



**Senior Whole Health di New York NHC (HMO-DSNP),  
Senior Whole Health Medicare Complete Care (HMO D-SNP)**

**Prontuario 2026**

**(Lista dei farmaci coperti o “Lista dei farmaci”)**

**DA LEGGERE: QUESTO DOCUMENTO CONTIENE INFORMAZIONI  
SUI FARMACI COPERTI DA QUESTO PIANO**

File di presentazione del prontuario approvato dall’HPMS ID 00026144

Questo prontuario è stato aggiornato il 06/01/2026.

Per informazioni più recenti o altre domande, si prega di contattare il Servizio Membri del Senior Whole Health di New York, Senior Whole Health Medicare Complete Care al numero (800) 665-3086 (gli utenti TTY devono chiamare il 711), 1 ottobre – 31 marzo: 7 giorni su 7, dalle 8.00 alle 20.00, ora locale, dal 1° aprile al 30 settembre: Lunedì – Venerdì, dalle 8 a.m. alle 8 p.m., ora locale, oppure consulti il sito [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare).



**Nota i soci:** Il prontuario è cambiato rispetto all'anno scorso. Legga attentamente questo documento per assicurarsi che contenga ancora i farmaci che Lei assume.

Quando in questo elenco di farmaci (prontuario) si cita "noi", "ci" o "nostro", si fa riferimento al Senior Whole Health di New York. Quando si cita "piano" o "nostro piano", si fa riferimento al Senior Whole Health Medicare Complete Care.

Questo documento contiene l'elenco dei farmaci (prontuario) per il nostro piano, aggiornato al 06/01/2026. Per ricevere la lista di farmaci (prontuario) aggiornata, non esitare a contattarci. I nostri recapiti, come pure la data dell'ultimo aggiornamento della lista di farmaci (prontuario), sono riportati sulla copertina frontale e posteriore.

In genere, per usufruire della prestazione di prescrizione di farmaci è necessario utilizzare le farmacie della rete. Le prestazioni, il prontuario, la rete di farmacie e/o i copagamenti/le coassicurazioni possono cambiare il 1° gennaio 2026 e di tanto in tanto nel corso dell'anno.

### **Cos'è il prontuario del Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete Care?**

In questo documento utilizziamo i termini "lista di farmaci" e "prontuario" per intendere la medesima cosa. Il prontuario è un elenco di farmaci coperti selezionato dal nostro piano a seguito della consultazione con un team di operatori sanitari, che costituiscono le terapie su prescrizione ritenute necessarie in un programma di trattamento di qualità. Il nostro piano copre solitamente i farmaci inclusi nel nostro prontuario, a condizione che il farmaco sia necessario dal punto di vista medico, che la prescrizione venga erogata presso una farmacia della rete del piano e che vengano rispettate le altre regole del piano. Per ulteriori informazioni sulle modalità di erogazione delle prescrizioni, consultare l'Evidence of Coverage (la Prova di copertura).

### **È possibile che il prontuario cambi?**

La maggior parte delle modifiche alla copertura dei farmaci avviene il 1° gennaio, ma il nostro piano potrebbe aggiungere o rimuovere farmaci dal prontuario nel corso dell'anno oppure spostarli in diversi livelli di compartecipazione ai costi o aggiungere nuove restrizioni. Nell'apportare queste modifiche, dobbiamo attenerci alle regole di Medicare. Gli aggiornamenti al prontuario sono postati mensilmente sul nostro sito web, qui: [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare).

**Cambiamenti che possono riguardarLa durante l'anno in corso::** Qui di seguito vengono elencate le modifiche di copertura durante l'anno in corso che potrebbero riguardarLa:

- **Sostituzione immediata di una certa versione di un farmaco di marca e del prodotto organico originale.** È possibile che venga rimosso immediatamente un determinato farmaco dal prontuario, se verrà sostituito con una certa nuova versione dello stesso farmaco che verrà inserito nello stesso livello di compartecipazione ai costi o a un livello inferiore e con le stesse o minori restrizioni. Quando aggiungiamo una nuova versione di un farmaco nel nostro prontuario, è possibile che venga deciso di mantenere il farmaco di marca o il prodotto organico originale nel prontuario, ma di spostarlo immediatamente a un diverso livello di compartecipazione ai costi o di aggiungere nuove restrizioni.

Possiamo attuare questi cambi immediati solo se si dovrà inserire una nuova versione generica di un farmaco di marca o se si dovrà aggiungere una nuova versione biochimica di un prodotto organico originale che era già nel prontuario (per esempio, aggiungere un biosimilare intercambiabile che può essere sostituito a un prodotto organico originale da una farmacia senza una nuova prescrizione).

Se sta assumendo un farmaco di marca, è possibile che non venga informato in anticipo prima che effettuiamo la modifica, ma forniremo in seguito le informazioni sulle modifiche specifiche apportate.

Se apportiamo questa modifica, Lei o il suo medico curante potete chiedere di fare una deroga e continuare a coprire il costo del farmaco di marca. Per maggiori informazioni, consulta la sezione in basso intitolata “Come richiedo una deroga al formulario del Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete Care?”

Alcuni di questi nuovi tipi di farmaco potrebbero essere nuovi per Lei. Per maggiori informazioni, consulta la sezione in basso intitolata “Quali sono i prodotti organici originali e in che modo sono correlati con i biosimilari?”

- **Farmaci ritirati dal mercato.** Se un farmaco viene ritirato dal mercato dal produttore o se l’ente Food and Drug Administration (FDA) determina che debba essere ritirato per motivi legati alla sicurezza o all’effettività, è possibile che venga rimosso immediatamente dal nostro formulario e che l’avviso a coloro che assumono il farmaco arrivi successivamente.
- **Altre modifiche.** Potremmo apportare altre modifiche che riguardano gli iscritti che stanno assumendo un farmaco. Per fare un esempio, è possibile che venga rimosso un farmaco di marca dal prontuario nel momento in cui si aggiunge un equivalente generico o che si rimuova un prodotto organico quando si aggiunge un biosimilare. È possibile che vengano applicate anche nuove restrizioni al farmaco di marca o al prodotto organico originale, o che vengano spostati ad un diverso livello di compartecipazione ai costi, o entrambi. Potremmo inoltre apportare modifiche in base a nuove linee guida cliniche. Se eliminiamo dei farmaci dal nostro prontuario, o aggiungiamo autorizzazioni preventive, limiti di quantità e/o restrizioni alla terapia graduale per un farmaco o spostiamo un farmaco a un livello di condivisione dei costi più elevato, è necessario che informiamo gli assicurati interessati della modifica almeno 30 giorni prima che la modifica diventi effettiva. In alternativa, quando un membro richiede una ricarica del farmaco, può ricevere una fornitura di 31 giorni del farmaco e una comunicazione relativa alla modifica.

Se apportiamo queste ulteriori modifiche, Lei o il suo medico curante potete chiedere di fare una deroga e continuare a coprire il costo del farmaco di marca. L'avviso che Le forniremo includerà anche le informazioni su come richiedere una deroga; e possibile trovare informazioni

a riguardo nella sezione sottostante intitolata “Come richiedo una deroga al formulario del Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete Care?”

**Modifiche che non La riguarderanno se sta attualmente assumendo il farmaco.** In generale, se il paziente sta assumendo un farmaco presente nel prontuario 2026 che era coperto all'inizio dell'anno, noi non interromperemo né limiteremo la copertura di tale farmaco durante l'anno di copertura 2026, ad eccezione di quanto descritto sopra. Ciò significa che questi farmaci rimarranno disponibili con la stessa quota di condivisione del costo e senza nuove restrizioni per gli assicurati che li assumono per il resto dell'anno di copertura. Quest'anno non riceverà comunicazioni dirette riguardanti modifiche che non La riguardano. Tuttavia, il 1° gennaio dell'anno successivo, tali modifiche potrebbero riguardarLa ed è pertanto importante controllare il prontuario per il nuovo anno di prestazioni per verificare eventuali modifiche ai farmaci.

Il formulario allegato è aggiornato al 06/01/2026. Per ottenere informazioni aggiornate sui farmaci coperti dal nostro piano, si metta in contatto con noi. I nostri recapiti sono riportati sulla prima e sulla quarta di copertina.

### **Come si utilizza il Prontuario?**

Ci sono due modi per trovare il farmaco all'interno del prontuario:

#### **Patologia medica**

Il prontuario inizia a pagina 10. I farmaci di questo prontuario sono raggruppati in categorie a seconda del tipo di patologie mediche che vengono utilizzate per il trattamento. Ad esempio, i farmaci utilizzati per il trattamento di una patologia cardiaca sono elencati nella categoria Cardiovascolare. Se sa a cosa serve il farmaco che assume, cerchi il nome della categoria nell'elenco che inizia a pagina 10. Successivamente, cerchi all'interno della categoria del Suo farmaco.

#### **Elenco alfabetico**

Se non è sicuro della categoria in cui cercare, cerchi il Suo farmaco nell'indice che inizia a pagina 101. L'indice fornisce un elenco alfabetico di tutti i farmaci inclusi in questo documento. Nell'Indice sono elencati sia i farmaci di marca che i farmaci generici. Consulti l'Indice e cerchi il Suo farmaco. Accanto al Suo farmaco, viene visualizzato il numero di pagina in cui sono riportate le informazioni sulla copertura (ovvero sul rimborso del farmaco). Vada alla pagina elencata nell'Indice e cerchi il nome del farmaco nella prima colonna dell'elenco.

### **Cosa sono i farmaci generici?**

Il nostro piano copre sia i farmaci di marca che i farmaci generici. Un farmaco generico è approvato dall'FDA in quanto ha lo stesso principio attivo del farmaco di marca. In generale, i farmaci generici hanno lo stesso effetto e costano solitamente di meno rispetto ai farmaci di marca. Esistono farmaci generici sostitutivi disponibili per molti farmaci di marca. I farmaci generici possono solitamente essere sostituiti ai farmaci di marca in farmacia senza bisogno di una nuova prescrizione, a seconda delle leggi statali.

### **Quali sono i prodotti organici originali e in che modo sono correlati con i biosimilari?**

06/01/2026

Nel prontuario, quando ci riferiamo a un farmaco, è possibile che si faccia riferimento al farmaco in sé o al prodotto organico. I prodotti organici sono farmaci più complessi rispetto ai farmaci tradizionali. Poiché i prodotti organici sono più complessi dei farmaci tradizionali, invece di avere una forma generica, hanno alternative chiamate biosimilari. In generale, i biosimilari funzionano altrettanto bene quanto il prodotto organico originale e possono costare meno. Esistono alternative biosimilari per alcuni prodotti biologici originali. Alcuni biosimilari sono anche biosimilari intercambiabili e, a seconda delle leggi statali, possono essere sostituiti al prodotto organico originale in farmacia senza bisogno di una nuova prescrizione, proprio come i farmaci generici possono essere sostituiti ai farmaci di marca.

Per quanto riguarda i tipi di farmaco, si prega di consultare la Prova di copertura assicurativa, nel capitolo 5; Sezione 3.1, “La lista dei farmaci indica quali farmaci della Parte D sono coperti”.

### **Ci sono restrizioni alla mia copertura?**

Alcuni farmaci coperti possono avere ulteriori requisiti o limiti di copertura. Tali requisiti e limiti possono comprendere:

- **Autorizzazione preventiva::** Il nostro piano prevede che Lei o il Suo medico curante otteniate un'autorizzazione preventiva per determinati farmaci. Ciò significa che è necessario ottenere l'approvazione del nostro piano prima di erogare le Sue prescrizioni. Se non ottiene l'approvazione, il nostro piano potrebbe non coprire il farmaco.
- **Limiti di quantità:** Per alcuni farmaci, il nostro piano limita la quantità di farmaco che il nostro piano può coprire. Per esempio, il nostro piano prevede 30 per prescrizione per l'esomeprazolo magnesio. Questo può essere in aggiunta alla fornitura standard di un mese o tre mesi.
- **Terapia graduale:** In alcuni casi, il nostro piano prevede che Lei debba prima provare determinati farmaci per il trattamento della Sua patologia prima che venga coperto un altro farmaco per la stessa patologia. Ad esempio, se il farmaco A e il farmaco B curano entrambi la Sua patologia, il nostro piano potrebbe non coprire il farmaco B a meno che non provi prima il farmaco A. Se il farmaco A non funziona, il nostro piano coprirà il farmaco B.

Per sapere se il farmaco in questione presenta requisiti o limiti aggiuntivi, si prega di consultare il prontuario che inizia a pagina 10. Per ulteriori informazioni sulle restrizioni applicate a specifici farmaci coperti, visiti il nostro sito web. Abbiamo pubblicato online dei documenti che spiegano le nostre restrizioni in materia di autorizzazione preventiva e di terapia graduale. Può anche chiederci di inviarLe una copia. I nostri recapiti, come pure la data dell'ultimo aggiornamento del prontuario, sono riportate sulla prima e sulla quarta pagina di copertina.

Lei può chiedere al nostro piano di derogare a queste restrizioni o limiti o di fornire un elenco di altri farmaci simili che possono trattare la Sua malattia. Per informazioni su come richiedere una deroga; si prega di consultare la sezione “Come richiedo una deroga al Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete Care?”, a pagina 6.

### **Cosa sono i “farmaci da banco” (over-the-counter - OTC)?**

I farmaci da banco non farmaci non prescrivibili che solitamente non sono coperti dal Medicare Prescription Drug Plan. Il nostro piano prevede pagamenti per determinati farmaci da banco. Il nostro piano fornirà questi farmaci da banco senza alcun costo aggiuntivo per Lei. Il costo di questi farmaci da banco previsto dal nostro piano non verrà conteggiato nel costo totale dei farmaci della Parte D.

### **Cosa succede se il mio farmaco non è presente nel Prontuario?**

Se il Suo farmaco non è incluso nel prontuario (elenco dei farmaci coperti), è necessario contattare il Servizio Soci e chiedere se il farmaco è coperto.

Se scopre che il nostro piano non copre il Suo farmaco, Lei hai due possibilità:

- È possibile richiedere al Servizio Soci un elenco di farmaci simili coperti dal nostro piano. Una volta ricevuto l'elenco, lo mostri al Suo medico e gli chiedi di prescrivere un farmaco simile coperto dal nostro piano.
- È possibile chiedere al nostro piano di fare una deroga e coprire il Suo farmaco. Per informazioni su come richiedere una deroga, vedere qui di seguito.

### **Come richiedo una deroga al Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete Care?**

Lei può chiedere al nostro piano di fare una deroga alle nostre regole di copertura. Ci sono diversi tipi di deroghe che potete chiedere di applicare.

- È possibile chiedere la copertura di un farmaco anche se non è presente nel nostro prontuario. Se approvato, il farmaco sarà coperto a un livello di condivisione dei costi prestabilito e Lei non potrà chiederci di fornire il farmaco a un livello di condivisione dei costi inferiore.
- È possibile richiedere di rinunciare a una restrizione di copertura, tra cui l'autorizzazione preventiva, la terapia graduale o un limite quantitativo sul tuo farmaco. Ad esempio, per alcuni farmaci, il nostro piano limita la quantità di farmaco che siamo in grado di coprire. Se il farmaco ha un limite quantitativo, è possibile chiedere di derogare a tale limite e coprire una quantità maggiore.
- È possibile chiedere di coprire un farmaco presente nel prontuario a un livello di condivisione dei costi inferiore, a meno che il farmaco non sia nella categoria di specializzazione. Se viene approvato, ciò ridurrebbe l'importo che dovete pagare per il vostro farmaco.

In generale, il nostro piano approverà la richiesta di deroga solo se i farmaci alternativi inclusi nel formulario del piano, il farmaco a costo inferiore o l'applicazione delle restrizioni non saranno efficaci per Lei e/o Le causeranno effetti avversi.

Lei o il Suo medico curante dovrete contattarci per richiedere una deroga al livello di copertura o al prontuario, compresa una deroga a una restrizione di copertura. **Quando si richiede una deroga, il tuo medico curante avrà bisogno di spiegare le ragioni mediche per cui Lei necessita della deroga.** In genere, noi dobbiamo prendere una decisione entro 72 ore dal ricevimento della dichiarazione a sostegno della richiesta presentata dal Suo prescrittore. È possibile richiedere una decisione tempestiva (rapida) se si ritiene, e noi concordiamo, che la propria salute potrebbe subire gravi danni attendendo fino a 72 ore per una decisione. Se concordiamo o se il medico che ha prescritto il farmaco richiede una decisione rapida,

dovremo comunicarti la nostra decisione entro e non oltre 24 ore dal ricevimento della dichiarazione di supporto del medico.

### **Cosa succede se il mio farmaco non è presente nel prontuario o è affetto da restrizioni?**

In qualità di nuovo socio o di socio continuativo del nostro piano, è possibile che Lei assuma farmaci che non sono presenti nel nostro prontuario. Oppure potresti assumere un farmaco che è presente nel nostro prontuario ma che ha una restrizione di copertura, come l'autorizzazione preventiva. È opportuno rivolgersi al proprio medico curante per richiedere una decisione di copertura che dimostri il soddisfacimento dei criteri di approvazione, passare a un farmaco alternativo da noi coperto o richiedere un'eccezione al prontuario farmaceutico affinché il farmaco assunto sia coperto dalla nostra assicurazione. Mentre Lei e il tuo medico decidete la linea d'azione più adatta al suo caso, in alcune circostanze è possibile che venga coperto il costo del farmaco nei primi 90 giorni di adesione al nostro piano.

Per ciascuno dei farmaci che non è presente nel nostro prontuario o che ha una restrizione di copertura, copriremo una fornitura temporanea di 31 giorni. Se la prescrizione è valida per un numero inferiore di giorni, consentiremo il rinnovo fino a un massimo di 31 giorni di fornitura del farmaco. Se la copertura non viene approvata, dopo la prima fornitura di 31 giorni, non pagheremo questi farmaci, anche se sei iscritto al piano da meno di 90 giorni.

Se Lei è residente presso una struttura di assistenza a lungo termine e ha bisogno di un farmaco che non è presente nel nostro prontuario o se la Sua possibilità di ottenere i farmaci è limitata, ma ha superato i primi 90 giorni di iscrizione al nostro piano, copriremo una fornitura di emergenza di 31 giorni di quel farmaco in attesa dell'eventuale deroga al prontuario.

#### **Normativa di transizione**

I nuovi membri del nostro Piano potrebbero assumere farmaci che non sono presenti nel nostro prontuario o che sono soggetti a determinate restrizioni, quali l'autorizzazione preventiva o la terapia graduale. Anche gli attuali membri potrebbero essere interessati dai cambiamenti apportati al nostro prontuario di anno in anno. I membri devono consultare il proprio medico per decidere se passare a un altro farmaco da noi coperto o richiedere una deroga al prontuario farmaceutico per ottenere la copertura del farmaco. Consulta il Manuale per i membri per ulteriori informazioni su come richiedere un'eccezione. Contatta il Servizio Assistenza Membri se il tuo farmaco non è presente nel nostro prontuario, è soggetto a determinate restrizioni, quali autorizzazione preventiva o terapia graduale, o non sarà più presente nel nostro prontuario il prossimo anno e hai bisogno di aiuto per passare a un farmaco diverso da noi coperto o per richiedere un'eccezione al prontuario.

Durante il periodo in cui i membri consultano i propri medici per determinare la linea di condotta più appropriata, è possibile che venga garantita una fornitura temporanea del farmaco non incluso nel prontuario farmaceutico qualora tali membri necessitino di una ricarica del farmaco durante i primi 90 giorni di nuova adesione al nostro Piano per i farmaci della Parte D. Se sei un membro attuale interessato da una modifica al prontuario di anno in anno, ti forniremo una fornitura temporanea del farmaco non presente nel prontuario se hai bisogno di una ricarica dello stesso durante i primi 90 giorni del nuovo anno del piano.

Quando un membro si reca presso una farmacia della rete e forniamo una fornitura temporanea di un farmaco che non è presente nel nostro prontuario, o che ha restrizioni o limiti di copertura (ma che è

comunque considerato un “farmaco della Parte D”), copriremo una fornitura di 31 giorni (a meno che la prescrizione non sia stata redatta per un numero inferiore di giorni). Dopo aver coperto la fornitura temporanea di 31 giorni, in genere non pagheremo più questi farmaci nell'ambito della nostra politica di transizione.

Ti invieremo una comunicazione scritta dopo aver fornito alla fornitura temporanea. Il presente avviso illustra la procedura da seguire per richiedere una deroga e come collaborare con il proprio medico per decidere se passare a un farmaco appropriato coperto dalla nostra assicurazione.

Se un nuovo membro è residente in una struttura di assistenza a lungo termine (come una casa di cura), copriremo una fornitura temporanea di 31 giorni per la transizione (a meno che la prescrizione non sia stata redatta per un numero inferiore di giorni). Se necessario, copriremo più di una ricarica di questi farmaci durante i primi 90 giorni di iscrizione di un nuovo membro al nostro Piano. Se il residente è iscritto al nostro Piano da più di 90 giorni e necessita di un farmaco che non è presente nel nostro prontuario o è soggetto ad altre restrizioni, quali la terapia graduale o limiti di dosaggio, copriremo una fornitura temporanea di emergenza di 31 giorni di tale farmaco (a meno che la prescrizione non sia per un numero inferiore di giorni) mentre il nuovo membro richiede una deroga al prontuario. Sono previste deroghe nei casi in cui si verifichi un cambiamento nel livello di assistenza ricevuta che richieda anche il trasferimento da una struttura o da un centro di cura a un altro. In tali circostanze, avresti diritto a una deroga temporanea e singola, anche se non sei più nei primi 90 giorni di adesione al piano.

### **Per maggiori informazioni**

Per informazioni più dettagliate sulla copertura dei farmaci su prescrizione del Suo piano, consulti la Sua Evidence of Coverage (Prova di copertura) e gli altri materiali del piano.

Se ha domande sul nostro piano, non esiti a contattarci. I nostri recapiti, come pure la data dell'ultimo aggiornamento del prontuario, sono riportate sulla prima e sulla quarta pagina di copertina.

Per domande di carattere generale sulla copertura medica Medicare, chiami il numero 1-800-MEDICARE (1-800-633-4227) 24 ore al giorno e 7 giorni alla settimana. Gli utenti TTY possono chiamare il numero 1-877-486-2048. Oppure, consulti il sito <http://www.medicare.gov>.

### **Prontuario del Senior Whole Health di New York NHC, Senior Whole Health Medicare Complete**

Il formulario riportato di seguito fornisce informazioni sui farmaci coperti dal nostro piano. Se non riesce a trovare il Suo farmaco nell'elenco, consulti l'indice che inizia a pagina 101.

La prima colonna della tabella riporta il nome del farmaco. I nomi dei farmaci di marca sono in maiuscolo (ad esempio, CIPRO), mentre i farmaci generici sono elencati in corsivo minuscolo (per esempio, ciprofloxacina ).

Le informazioni riportate nella colonna Requisiti/Limiti indicano se il nostro piano prevede requisiti speciali per la copertura del Suo farmaco.

PA = Prior Authorization (approvazione preventiva): è necessario avere l'approvazione prima di poter ottenere questo farmaco.

QL = Quantity Limits (Limiti di quantità): la quantità di farmaco che il piano coprirà.

ST = Step Therapy Criteria, criteri di terapia graduale: è necessario provare un altro farmaco prima di potere assumere questo farmaco.

NM = Non-Mail Order: questo farmaco non può essere acquistato per corrispondenza.

B/D = Questo farmaco può essere coperto dalla Parte B o D di Medicare, a seconda delle circostanze.

\_ = Farmaci non compresi nella Parte D o prodotti da banco coperti da Medicaid.

NDS = Fornitura non estesa: il numero di giorni di fornitura che potrai ricevere sarà limitato.

**MOLINA\_CY26\_6T\_GS\_CORE eff 06/01/2026****Drug Name Drug Tier Requirements/Limits****ANALGESICS****GOUT**

<i>allopurinol</i> TABS 100mg, 300mg	1	
<i>colchicine</i> TABS .6mg	3	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	3	
<i>febuxostat</i> TABS 40mg, 80mg	4	PA
<i>probenecid</i> TABS 500mg	3	

**MISCELLANEOUS**

<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%	3	B/D
---	---	-----

**NSAIDS**

<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	3	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	3	QL (30 caps / 30 days)
<i>diclofenac potassium</i> TABS 50mg	2	QL (120 tabs / 30 days)
<i>diclofenac sodium</i> TB24 100mg	3	
<i>diclofenac sodium</i> TBEC 25mg, 50mg, 75mg	2	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	4	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	4	
<i>diflunisal</i> TABS 500mg	3	
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	3	
<i>flurbiprofen</i> TABS 100mg	3	
<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
<i>ibuprofen</i> SUSP 100mg/5ml	3	
<i>ibuprofen</i> TABS 400mg, 600mg, 800mg	1	
<i>meloxicam</i> TABS 7.5mg, 15mg	1	
<i>nabumetone</i> TABS 500mg, 750mg	2	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>naproxen</i> TBEC 375mg	2	QL (120 tabs / 30 days)
<i>naproxen sodium</i> TABS 275mg, 550mg	3	
<i>oxaprozin</i> TABS 600mg	4	
<i>piroxicam</i> CAPS 10mg, 20mg	3	
<i>sulindac</i> TABS 150mg, 200mg	2	

**OPIOID ANALGESICS, LONG-ACTING**

<i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	2	QL (4 patches / 28 days), PA
--	---	------------------------------

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	4	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg	4	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 100mg, 120mg	5	NDS, QL (30 tabs / 30 days), PA
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml	3	QL (450 mL / 30 days), PA
<i>methadone hcl</i> TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA
<i>methadone hydrochloride i</i> CONC 10mg/ml	3	QL (90 mL / 30 days), PA
<i>morphine sulfate</i> TBCR 15mg, 30mg, 60mg, 100mg, 200mg	3	QL (90 tabs / 30 days), PA
OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg	4	QL (60 tabs / 30 days), PA
OXYCONTIN T12A 40mg, 60mg, 80mg	5	NDS, QL (60 tabs / 30 days), PA
<b>OPIOID ANALGESICS, SHORT-ACTING</b>		
<i>acetaminophen w/ codeine soln</i> 120-12 mg/5ml	3	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-15 mg	2	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-30 mg	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-60 mg	2	QL (180 tabs / 30 days)
<i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml	4	
<i>butorphanol tartrate</i> SOLN 10mg/ml	3	QL (10 mL / 30 days)
<i>endocet tab</i> 2.5-325mg	3	QL (360 tabs / 30 days)
<i>endocet tab</i> 5-325mg	3	QL (360 tabs / 30 days)
<i>endocet tab</i> 7.5-325mg	3	QL (240 tabs / 30 days)
<i>endocet tab</i> 10-325mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen soln</i> 7.5-325 mg/15ml	4	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab</i> 5-325 mg	3	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab</i> 7.5-325 mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab</i> 10-325 mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab</i> 7.5-200 mg	3	QL (150 tabs / 30 days)
<i>hydromorphone hcl</i> LIQD 1mg/ml	4	QL (600 mL / 30 days)
<i>hydromorphone hcl</i> TABS 2mg, 4mg, 8mg	3	QL (180 tabs / 30 days)
<i>morphine sulfate</i> SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	4	B/D
<i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml	3	QL (900 mL / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>morphine sulfate</i> SOLN 100mg/5ml	3	QL (180 mL / 30 days)
<i>morphine sulfate</i> TABS 15mg, 30mg	3	QL (180 tabs / 30 days)
<i>oxycodone hcl</i> CONC 100mg/5ml	4	QL (180 mL / 30 days)
<i>oxycodone hcl</i> SOLN 5mg/5ml	4	QL (900 mL / 30 days)
<i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg	3	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	3	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	3	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	3	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	3	QL (180 tabs / 30 days)
<i>tramadol hcl</i> TABS 50mg	2	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2	QL (240 tabs / 30 days)

## **ANTI-INFECTIVES**

### **ANTI-INFECTIVES - MISCELLANEOUS**

<i>albendazole</i> TABS 200mg	4	QL (672 tabs / year), PA
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	4	
ARIKAYCE SUSP 590mg/8.4ml	5	NDS, NM, PA
<i>atovaquone</i> SUSP 750mg/5ml	4	QL (300 mL / 30 days), PA
<i>aztreonam</i> SOLR 1gm, 2gm	4	
BLUJEPA TABS 750mg	3	
CAYSTON SOLR 75mg	5	NDS, NM, PA
<i>clindamycin hcl</i> CAPS 75mg, 150mg, 300mg	2	
<i>clindamycin palmitate hydrochloride</i> SOLR 75mg/5ml	4	
<i>clindamycin phosphate</i> SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	3	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	4	
CLINDMYC/NAC INJ 300/50ML	4	
CLINDMYC/NAC INJ 600/50ML	4	
CLINDMYC/NAC INJ 900/50ML	4	
<i>colistimethate sodium</i> SOLR 150mg	4	
<i>dapsone</i> TABS 25mg, 100mg	3	
DAPTOMYCIN SOLR 350mg	5	NDS
<i>daptomycin</i> SOLR 350mg, 500mg	5	NDS

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMVERM CHEW 100mg	5	NDS, QL (12 tabs / year)
<i>ertapenem sodium</i> SOLR 1gm	3	
<i>fosfomycin tromethamine</i> PACK 3gm	4	
<i>gentamicin in saline inj 0.8 mg/ml</i>	3	
<i>gentamicin in saline inj 1 mg/ml</i>	3	
<i>gentamicin in saline inj 1.2 mg/ml</i>	3	
<i>gentamicin in saline inj 1.6 mg/ml</i>	3	
<i>gentamicin in saline inj 2 mg/ml</i>	3	
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	3	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	4	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	4	
IMPAVIDO CAPS 50mg	5	NDS, PA
<i>ivermectin</i> TABS 3mg	3	QL (20 tabs / 90 days), PA
<i>ivermectin</i> TABS 6mg	3	QL (10 tabs / 90 days), PA
<i>linezolid</i> SOLN 600mg/300ml	4	
<i>linezolid</i> SUSR 100mg/5ml	5	NDS, QL (1800 mL / 30 days)
<i>linezolid</i> TABS 600mg	4	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	4	
<i>meropenem</i> SOLR 1gm, 2gm, 500mg	4	
<i>methenamine hippurate</i> TABS 1gm	3	
<i>metronidazole</i> SOLN 500mg/100ml	3	
<i>metronidazole</i> TABS 250mg, 500mg	1	
<i>neomycin sulfate</i> TABS 500mg	2	
<i>nitazoxanide</i> TABS 500mg	5	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal</i> CAPS 50mg, 100mg	3	
<i>nitrofurantoin monohyd macro</i> CAPS 100mg	3	
<i>pentamidine isethionate inh</i> SOLR 300mg	4	B/D
<i>pentamidine isethionate inj</i> SOLR 300mg	4	
<i>polymyxin b sulfate</i> SOLR 500000unit	4	
<i>praziquantel</i> TABS 600mg	4	
<i>pyrimethamine</i> TABS 25mg	5	NDS, QL (90 tabs / 30 days), PA
<i>streptomycin sulfate</i> SOLR 1gm	5	NDS
<i>sulfadiazine</i> TABS 500mg	5	NDS

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	4	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	3	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>tinidazole TABS 250mg, 500mg</i>	3	
TOBI PODHALER CAPS 28mg	5	NDS, NM, PA
<i>tobramycin NEBU 300mg/5ml</i>	5	NDS, NM, PA
<i>tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml</i>	3	
<i>trimethoprim TABS 100mg</i>	3	
<i>vancomycin hcl CAPS 125mg</i>	4	QL (80 caps / 180 days)
<i>vancomycin hcl CAPS 250mg</i>	4	QL (160 caps / 180 days)
<i>vancomycin hcl SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg</i>	4	
VANCOMYCIN INJ 1 GM	4	
VANCOMYCIN INJ 500MG	4	
VANCOMYCIN INJ 750MG	4	
<b>ANTIFUNGALS</b>		
<i>amphotericin b SOLR 50mg</i>	4	B/D
<i>amphotericin b liposome SUSR 50mg</i>	5	NDS, B/D
<i>caspofungin acetate SOLR 50mg, 70mg</i>	4	
CRESEMBA CAPS 74.5mg, 186mg	5	NDS, PA
<i>fluconazole SUSR 10mg/ml, 40mg/ml; TABS 50mg</i>	3	
<i>fluconazole TABS 100mg, 150mg, 200mg</i>	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	3	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	3	
<i>flucytosine CAPS 250mg, 500mg</i>	5	NDS, PA
<i>griseofulvin microsize SUSP 125mg/5ml; TABS 500mg</i>	4	
<i>griseofulvin ultramicrosize TABS 125mg, 250mg</i>	4	
<i>itraconazole CAPS 100mg</i>	4	QL (120 caps / 30 days)
<i>ketoconazole TABS 200mg</i>	3	PA
<i>miconazole sodium SOLR 50mg, 100mg</i>	4	
<i>nystatin TABS 500000unit</i>	3	
<i>posaconazole SUSP 40mg/ml</i>	5	NDS, QL (630 mL / 30 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>posaconazole</i> TBEC 100mg	5	NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	2	QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year
<i>voriconazole</i> SOLR 200mg	4	PA
<i>voriconazole</i> SUSR 40mg/ml	5	NDS, QL (600 mL / 28 days), PA
<i>voriconazole</i> TABS 50mg	4	QL (480 tabs / 30 days)
<i>voriconazole</i> TABS 200mg	4	QL (120 tabs / 30 days)
<b>ANTIMALARIALS</b>		
<i>atovaquone-proguanil hcl tab</i> 62.5-25 mg	4	
<i>atovaquone-proguanil hcl tab</i> 250-100 mg	4	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	4	
COARTEM TAB 20-120MG	4	
<i>mefloquine hcl</i> TABS 250mg	3	
<i>primaquine phosphate</i> TABS 26.3mg	3	
PRIMAQUINE PHOSPHATE TABS 26.3mg	3	
<i>quinine sulfate</i> CAPS 324mg	4	PA
<b>ANTIRETROVIRAL AGENTS</b>		
<i>abacavir sulfate</i> SOLN 20mg/ml; TABS 300mg	4	
APTIVUS CAPS 250mg	5	NDS
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	4	
<i>darunavir</i> TABS 600mg	4	QL (60 tabs / 30 days)
<i>darunavir</i> TABS 800mg	4	QL (30 tabs / 30 days)
EDURANT TABS 25mg	5	NDS
EDURANT PED TBSO 2.5mg	5	NDS
<i>efavirenz</i> TABS 600mg	4	
<i>emtricitabine</i> CAPS 200mg	4	
EMTRIVA SOLN 10mg/ml	4	
<i>etravirine</i> TABS 100mg, 200mg	5	NDS
<i>fosamprenavir calcium</i> TABS 700mg	5	NDS
INTELENCE TABS 25mg	4	
ISENTRESS CHEW 25mg	4	
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	5	NDS
ISENTRESS HD TABS 600mg	5	NDS
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>maraviroc</i> TABS 150mg, 300mg	5	NDS
<i>nevirapine</i> SUSP 50mg/5ml; TB24 400mg	4	
<i>nevirapine</i> TABS 200mg	2	
NORVIR PACK 100mg	4	
PIFELTRO TABS 100mg	5	NDS
PREZISTA SUSP 100mg/ml	5	NDS, QL (400 mL / 30 days)
PREZISTA TABS 75mg	4	QL (480 tabs / 30 days)
PREZISTA TABS 150mg	5	NDS, QL (240 tabs / 30 days)
REYATAZ PACK 50mg	5	NDS
<i>rilpivirine hcl</i> TABS 25mg	5	NDS
<i>ritonavir</i> TABS 100mg	3	
RUKOBIA TB12 600mg	5	NDS
SELZENTRY SOLN 20mg/ml	5	NDS
SUNLENCA TABS 300mg; TBPK 300mg	5	NDS
<i>tenofovir disoproxil fumarate</i> TABS 300mg	4	
TIVICAY TABS 50mg	5	NDS
TIVICAY PD TBSO 5mg	5	NDS
TROGARZO SOLN 200mg/1.33ml	5	NDS
TYBOST TABS 150mg	3	
VIRACEPT TABS 250mg, 625mg	5	NDS
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	5	NDS
<i>zidovudine</i> CAPS 100mg	4	
<i>zidovudine</i> SYRP 50mg/5ml; TABS 300mg	3	
<b>ANTIRETROVIRAL COMBINATION AGENTS</b>		
<i>abacavir sulfate-lamivudine tab</i> 600-300 mg	4	
BIKTARVY TAB 30-120-15 MG	5	NDS
BIKTARVY TAB 50-200-25 MG	5	NDS
CIMDUO TAB 300-300	5	NDS
DELSTRIGO TAB	5	NDS
DESCOVY TAB 120-15MG	5	NDS
DESCOVY TAB 200/25MG	5	NDS
DOVATO TAB 50-300MG	5	NDS
<i>efavirenz-emtricitabine-tenofovir df tab</i> 600-200-300 mg	4	
<i>efavirenz-lamivudine-tenofovir df tab</i> 400-300-300 mg	5	NDS
<i>efavirenz-lamivudine-tenofovir df tab</i> 600-300-300 mg	5	NDS

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>	5	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	4	
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	4	
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	4	
EVOTAZ TAB 300-150	5	NDS
GENVOYA TAB	5	NDS
JULUCA TAB 50-25MG	5	NDS
KALETRA SOL	4	
<i>lamivudine-zidovudine tab 150-300 mg</i>	4	
<i>lopinavir-ritonavir tab 100-25 mg</i>	4	
<i>lopinavir-ritonavir tab 200-50 mg</i>	4	
ODEFSEY TAB	5	NDS
PREZCOBIX TAB 675/150	5	NDS
PREZCOBIX TAB 800-150	5	NDS
STRIBILD TAB	5	NDS
SYMTUZA TAB	5	NDS
TRIUMEQ PD TAB	4	
TRIUMEQ TAB	5	NDS
<b>ANTITUBERCULAR AGENTS</b>		
<i>cycloserine CAPS 250mg</i>	5	NDS
<i>ethambutol hcl TABS 100mg, 400mg</i>	3	
<i>isoniazid SYRP 50mg/5ml</i>	4	
<i>isoniazid TABS 100mg, 300mg</i>	1	
PRIFTIN TABS 150mg	4	
<i>pyrazinamide TABS 500mg</i>	4	
<i>rifabutin CAPS 150mg</i>	4	
<i>rifampin CAPS 150mg, 300mg</i>	3	
<i>rifampin SOLR 600mg</i>	4	
SIRTURO TABS 20mg, 100mg	5	NDS, NM, PA
<b>ANTIVIRALS</b>		
<i>acyclovir CAPS 200mg; TABS 400mg, 800mg</i>	2	
<i>acyclovir SUSP 200mg/5ml</i>	4	
<i>acyclovir sodium SOLN 50mg/ml</i>	4	B/D
<i>adefovir dipivoxil TABS 10mg</i>	4	
BARACLUDE SOLN .05mg/ml	5	NDS, ST

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>entecavir</i> TABS .5mg, 1mg	4	
EPCLUSA PAK 150-37.5	5	NDS, NM, PA
EPCLUSA PAK 200-50MG	5	NDS, NM, PA
EPCLUSA TAB 200-50MG	5	NDS, NM, PA
EPCLUSA TAB 400-100	5	NDS, NM, PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	3	
<i>ganciclovir sodium</i> SOLR 500mg	4	B/D
<i>lamivudine (hbv)</i> TABS 100mg	3	
LIVTENCITY TABS 200mg	5	NDS, QL (336 tabs / 28 days), NM, PA
MAVYRET PAK 50-20MG	5	NDS, NM, PA
MAVYRET TAB 100-40MG	5	NDS, NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	3	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	3	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	3	QL (1080 mL / year)
PAXLOVID PAK	2	QL (22 tabs / 90 days)
PAXLOVID TAB 150-100	2	QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	2	QL (60 tabs / 90 days)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	5	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	5	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	3	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	3	NM
<i>rimantadine hydrochloride</i> TABS 100mg	4	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	3	
<i>valganciclovir hcl</i> SOLR 50mg/ml	5	NDS
<i>valganciclovir hcl</i> TABS 450mg	3	
VOSEVI TAB	5	NDS, NM, PA
<b>CEPHALOSPORINS</b>		
<i>cefaclor</i> CAPS 250mg, 500mg	3	
<i>cefadroxil</i> CAPS 500mg	2	
<i>cefadroxil</i> SUSR 250mg/5ml, 500mg/5ml	3	
CEFAZOLIN SOLR 2gm, 3gm	4	
CEFAZOLIN INJ 1GM/50ML	4	
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	3	
CEFAZOLIN SOLN 2GM/100ML-4%	4	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	4	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CEFAZOLIN/DEX SOL 3GM/50ML-2%	4	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	4	
<i>cefdinir</i> CAPS 300mg	2	
<i>cefdinir</i> SUSR 125mg/5ml, 250mg/5ml	3	
<i>cefepime hcl</i> SOLR 1gm, 2gm	4	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	4	
<i>cefotetan disodium</i> SOLR 1gm, 2gm	4	
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	4	
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml	4	
<i>cefpodoxime proxetil</i> TABS 100mg, 200mg	3	
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	3	
<i>ceftaroline fosamil</i> SOLR 400mg, 600mg	5	NDS
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	4	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	4	
<i>cefuroxime axetil</i> TABS 250mg, 500mg	2	
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	3	
<i>cephalexin</i> CAPS 250mg, 500mg	1	
<i>cephalexin</i> SUSR 125mg/5ml, 250mg/5ml	3	
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	4	
TEFLARO SOLR 400mg, 600mg	5	NDS
<b>ERYTHROMYCINS/MACROLIDES</b>		
<i>azithromycin</i> SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml	3	
<i>azithromycin</i> TABS 250mg, 500mg, 600mg	1	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TB24 500mg	4	
<i>clarithromycin</i> TABS 250mg, 500mg	3	
DIFICID SUSR 40mg/ml	5	NDS
<i>e.e.s. 400</i> TABS 400mg	4	
ERYTHROCIN LACTOBIONATE SOLR 500mg	4	
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	4	
<i>erythromycin ethylsuccinate</i> TABS 400mg	4	
<i>erythromycin lactobionate</i> SOLR 500mg	4	
<i>fidaxomicin</i> TABS 200mg	5	NDS
<b>FLUOROQUINOLONES</b>		
CIPRO SUSR 500mg/5ml	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ciprofloxacin 200 mg/100ml in d5w</i>	3	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	3	
<i>ciprofloxacin hcl TABS 250mg, 500mg, 750mg</i>	1	
<i>levofloxacin SOLN 25mg/ml</i>	4	
<i>levofloxacin TABS 250mg, 500mg, 750mg</i>	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	3	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	3	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	3	
<i>moxifloxacin hcl TABS 400mg</i>	3	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	4	
<b>PENICILLINS</b>		
<i>amoxicillin CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg</i>	1	
<i>amoxicillin CHEW 125mg, 250mg</i>	2	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	3	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	4	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	3	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	3	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	3	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	2	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	2	
<i>ampicillin CAPS 500mg</i>	2	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	4	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	4	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	4	
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	4	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	4	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg</i>	4	
<i>BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dicloxacillin sodium</i> CAPS 250mg, 500mg	3	
<i>nafcillin sodium</i> SOLR 1gm, 2gm	4	
<i>nafcillin sodium</i> SOLR 10gm	5	NDS
<i>oxacillin sodium</i> SOLR 1gm, 2gm, 10gm	4	
<i>penicillin g potassium</i> SOLR 5000000unit, 20000000unit	4	
<i>penicillin g sodium</i> SOLR 5000000unit	4	
<i>penicillin v potassium</i> SOLR 125mg/5ml, 250mg/5ml	2	
<i>penicillin v potassium</i> TABS 250mg, 500mg	1	
<i>pfizerpen</i> SOLR 5000000unit, 20000000unit	4	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	4	
<b>TETRACYCLINES</b>		
<i>doxy 100</i> SOLR 100mg	4	
<i>doxycycline (monohydrate)</i> CAPS 50mg, 100mg	2	
<i>doxycycline (monohydrate)</i> SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg	3	
<i>doxycycline hyclate</i> CAPS 50mg, 100mg; TABS 20mg, 100mg	3	
<i>doxycycline hyclate</i> SOLR 100mg	4	
<i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg	3	
NUZYRA SOLR 100mg	5	NDS, NM
NUZYRA TABS 150mg	5	NDS, QL (30 tabs / 14 days), NM
<i>tetracycline hcl</i> CAPS 250mg, 500mg	4	
<i>tigecycline</i> SOLR 50mg	4	
<b>ANTINEOPLASTIC AGENTS</b>		
<b>ALKYLATING AGENTS</b>		
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	5	NDS, B/D, NM
BENDEKA SOLN 100mg/4ml	5	NDS, B/D, NM

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	3	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	3	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	5	NDS, B/D, NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	5	NDS, B/D
<i>cyclophosphamide</i> SOLN 1gm/5ml; SOLR 2gm	5	NDS, B/D
<i>cyclophosphamide</i> SOLR 1gm, 500mg	4	B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	4	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	5	NDS, B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	5	NDS, B/D, NM
GLEOSTINE CAPS 10mg, 40mg	4	NM
GLEOSTINE CAPS 100mg	5	NDS, NM
LEUKERAN TABS 2mg	5	NDS, PA
<i>lomustine</i> CAPS 10mg, 40mg	4	NM
<i>lomustine</i> CAPS 100mg	5	NDS, NM
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	4	B/D
<i>oxaliplatin</i> SOLR 50mg, 100mg	5	NDS, B/D
VIVIMUSTA SOLN 100mg/4ml	5	NDS, B/D, NM
<b>ANTIMETABOLITES</b>		
<i>azacitidine</i> SUSR 100mg	5	NDS, B/D, NM
<i>cytarabine</i> SOLN 20mg/ml	3	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	3	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	4	B/D
INQOVI TAB 35-100MG	5	NDS, QL (5 tabs / 28 days), NM, PA
LONSURF TAB 15-6.14	5	NDS, QL (100 tabs / 28 days), NM, PA
LONSURF TAB 20-8.19	5	NDS, QL (80 tabs / 28 days), NM, PA
<i>mercaptopurine</i> SUSP 2000mg/100ml	5	NDS, NM
<i>mercaptopurine</i> TABS 50mg	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	2	B/D
ONUREG TABS 200mg, 300mg	5	NDS, QL (14 tabs / 28 days), NM, PA
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	5	NDS, B/D
TABLOID TABS 40mg	5	NDS, PA
<b><i>HORMONAL ANTINEOPLASTIC AGENTS</i></b>		
<i>abiraterone acetate</i> TABS 250mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>abiraterone acetate</i> TABS 500mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>abirtega</i> TABS 250mg	4	QL (120 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	5	NDS, QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 100/500	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>anastrozole</i> TABS 1mg	2	
<i>bicalutamide</i> TABS 50mg	2	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NM, PA
ERLEADA TABS 60mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ERLEADA TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA
EULEXIN CAPS 125mg	5	NDS
<i>exemestane</i> TABS 25mg	4	
FIRMAGON SOLR 80mg	4	NM, PA
FIRMAGON SOLR 120mg/vial	5	NDS, NM, PA
<i>fulvestrant</i> SOSY 250mg/5ml	5	NDS, B/D
INLURIYO TABS 200mg	5	NDS, QL (56 tabs / 28 days), NM, PA
<i>letrozole</i> TABS 2.5mg	2	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	4	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	5	NDS, NM, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	5	NDS, NM, PA
LYSODREN TABS 500mg	5	NDS, NM
<i>megestrol acetate</i> TABS 20mg, 40mg	3	
<i>nilutamide</i> TABS 150mg	5	NDS
NUBEQA TABS 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ORGOVYX TABS 120mg	5	NDS, NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ORSERDU TABS 86mg	5	NDS, QL (90 tabs / 30 days), NM, PA
ORSERDU TABS 345mg	5	NDS, QL (30 tabs / 30 days), NM, PA
SOLTAMOX SOLN 10mg/5ml	5	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	2	
<i>toremifene citrate</i> TABS 60mg	4	PA
XTANDI CAPS 40mg	5	NDS, QL (120 caps / 30 days), NM, PA
XTANDI TABS 40mg	5	NDS, QL (120 tabs / 30 days), NM, PA
XTANDI TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA
YONSA TABS 125mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<b>IMMUNOMODULATORS</b>		
<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg	5	NDS, QL (28 caps / 28 days), NM, PA
<i>lenalidomide</i> CAPS 20mg, 25mg	5	NDS, QL (21 caps / 28 days), NM, PA
<i>pomalidomide</i> CAPS 1mg, 2mg, 3mg, 4mg	5	NDS, QL (21 caps / 28 days), NM, PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg	5	NDS, QL (21 caps / 28 days), NM, PA
THALOMID CAPS 50mg	5	NDS, QL (84 caps / 28 days), NM, PA
THALOMID CAPS 100mg	5	NDS, QL (112 caps / 28 days), NM, PA
<b>MISCELLANEOUS</b>		
BESREMI SOSY 500mcg/ml	5	NDS, QL (2 syringes / 28 days), NM, PA
<i>bexarotene</i> CAPS 75mg	5	NDS, QL (300 caps / 30 days), NM, PA
<i>doxorubicin hcl</i> SOLN 2mg/ml	4	B/D
<i>doxorubicin hcl liposomal</i> SUSP 2mg/ml	5	NDS, B/D
<i>hydroxyurea</i> CAPS 500mg	2	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	4	B/D
IWILFIN TABS 192mg	5	NDS, QL (240 tabs / 30 days), NM, PA
<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	4	B/D

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	3	
MATULANE CAPS 50mg	5	NDS, NM
<i>mesna</i> TABS 400mg	5	NDS
MODEYSO CAPS 125mg	5	NDS, QL (20 caps / 28 days), NM, PA
<i>tretinoin (chemotherapy)</i> CAPS 10mg	5	NDS
WELIREG TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<b>MITOTIC INHIBITORS</b>		
<i>docetaxel</i> CONC 20mg/ml	4	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D, NM
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	3	B/D
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	4	B/D
<i>paclitaxel inj 100mg</i>	5	NDS, B/D, NM
<i>vincristine sulfate</i> SOLN 1mg/ml	2	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	4	B/D
<b>MOLECULAR TARGET AGENTS</b>		
ALECENSA CAPS 150mg	5	NDS, QL (240 caps / 30 days), NM, PA
ALUNBRIG TABS 30mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ALUNBRIG TABS 90mg, 180mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ALUNBRIG PAK	5	NDS, QL (30 tabs / 30 days), NM, PA
AUGTYRO CAPS 40mg	5	NDS, QL (240 caps / 30 days), NM, PA
AUGTYRO CAPS 160mg	5	NDS, QL (60 caps / 30 days), NM, PA
AVMAPKI PAK FAKZYNJA	5	NDS, QL (1 pack / 28 days), NM, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BALVERSA TABS 3mg	5	NDS, QL (84 tabs / 28 days), NM, PA
BALVERSA TABS 4mg	5	NDS, QL (56 tabs / 28 days), NM, PA
BALVERSA TABS 5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
BORTEZOMIB SOLR 1mg, 2.5mg	4	NM, PA
<i>bortezomib</i> SOLR 3.5mg	5	NDS, NM, PA
BOSULIF CAPS 50mg	5	NDS, QL (30 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	5	NDS, QL (300 caps / 30 days), NM, PA
BOSULIF TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	5	NDS, QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	5	NDS, QL (180 caps / 30 days), NM, PA
BRUKINSA CAPS 80mg	5	NDS, QL (120 caps / 30 days), NM, PA
BRUKINSA TABS 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CABOMETYX TABS 20mg, 40mg, 60mg	5	NDS, QL (30 tabs / 30 days), NM, PA
CALQUENCE TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
COMETRIQ (60MG DOSE) KIT 20mg	5	NDS, QL (84 caps / 28 days), NM, PA
COMETRIQ KIT 100MG	5	NDS, QL (56 caps / 28 days), NM, PA
COMETRIQ KIT 140MG	5	NDS, QL (112 caps / 28 days), NM, PA
COPIKTRA CAPS 15mg, 25mg	5	NDS, QL (56 caps / 28 days), NM, PA
COTELLIC TABS 20mg	5	NDS, QL (63 tabs / 28 days), NM, PA
DANZITEN TABS 71mg, 95mg	5	NDS, QL (112 tabs / 28 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dasatinib</i> TABS 20mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>dasatinib</i> TABS 50mg, 70mg, 80mg, 100mg, 140mg	5	NDS, QL (30 tabs / 30 days), NM, PA
DAURISMO TABS 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA
DAURISMO TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ENSACOVE CAPS 25mg	5	NDS, QL (270 caps / 30 days), NM, PA
ENSACOVE CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
ERIVEDGE CAPS 150mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 100mg, 150mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 2mg, 5mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 3mg	5	NDS, QL (90 tabs / 30 days), NM, PA
FOTIVDA CAPS .89mg, 1.34mg	5	NDS, QL (21 caps / 28 days), NM, PA
FRUZAQLA CAPS 1mg	5	NDS, QL (84 caps / 28 days), NM, PA
FRUZAQLA CAPS 5mg	5	NDS, QL (21 caps / 28 days), NM, PA
GAVRETO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
<i>gefitinib</i> TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
GOMEKLI CAPS 1mg	5	NDS, QL (168 caps / 28 days), NM, PA
GOMEKLI CAPS 2mg	5	NDS, QL (84 caps / 28 days), NM, PA
GOMEKLI TBSO 1mg	5	NDS, QL (168 tabs / 28 days), NM, PA
HERCEP HYLEC SOL 60-10000	5	NDS, NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HERCEPTIN SOLR 150mg	5	NDS, NM, PA
HERCESSI SOLR 150mg, 420mg	5	NDS, NM, PA
HERNEXEOS TABS 60mg	5	NDS, QL (120 tabs / 30 days), NM, PA
HERZUMA SOLR 150mg, 420mg	5	NDS, NM, PA
HYRNUO TABS 10mg	5	NDS, QL (120 tabs / 30 days), NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	5	NDS, QL (21 caps / 28 days), NM, PA
IBRANCE TABS 75mg, 100mg, 125mg	5	NDS, QL (21 tabs / 28 days), NM, PA
IBTROZI CAPS 200mg	5	NDS, QL (90 caps / 30 days), NM, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
IDHIFA TABS 50mg, 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 100mg	4	QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	5	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	5	NDS, QL (30 caps / 30 days), NM, PA
IMBRUVICA CAPS 140mg	5	NDS, QL (120 caps / 30 days), NM, PA
IMBRUVICA SUSP 70mg/ml	5	NDS, QL (216 mL / 27 days), NM, PA
IMBRUVICA TABS 140mg, 280mg, 420mg	5	NDS, QL (30 tabs / 30 days), NM, PA
IMKELDI SOLN 80mg/ml	5	NDS, QL (280 mL / 28 days), NM, PA
INLYTA TABS 1mg	5	NDS, QL (180 tabs / 30 days), NM, PA
INLYTA TABS 5mg	5	NDS, QL (120 tabs / 30 days), NM, PA
INREBIC CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
ITOVEBI TABS 3mg	5	NDS, QL (56 tabs / 28 days), NM, PA
ITOVEBI TABS 9mg	5	NDS, QL (28 tabs / 28 days), NM, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
JAYPIRCA TABS 50mg	5	NDS, QL (30 tabs / 30 days), NM, PA
JAYPIRCA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
KADCYLA SOLR 100mg, 160mg	5	NDS, B/D, NM
KANJINTI SOLR 150mg, 420mg	5	NDS, NM, PA
KEYTRUDA SOLN 100mg/4ml	5	NDS, NM, PA
KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML	5	NDS, QL (1 vial / 21 days), NM, PA
KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML	5	NDS, QL (1 vial / 42 days), NM, PA
KISQALI 200 DOSE TBPK 200mg	5	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	5	NDS, QL (42 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	5	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	5	NDS, QL (63 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	5	NDS, QL (91 tabs / 28 days), NM, PA
KOMZIFTI CAPS 200mg	5	NDS, QL (90 caps / 30 days), NM, PA
KOSELUGO CAPS 10mg	5	NDS, QL (240 caps / 30 days), NM, PA
KOSELUGO CAPS 25mg	5	NDS, QL (120 caps / 30 days), NM, PA
KOSELUGO CPSP 5mg	5	NDS, QL (600 caps / 30 days), NM, PA
KOSELUGO CPSP 7.5mg	5	NDS, QL (360 caps / 30 days), NM, PA
KRAZATI TABS 200mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	5	NDS, QL (180 tabs / 30 days), NM, PA
LAZCLUZE TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA
LAZCLUZE TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	5	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	5	NDS, QL (60 caps / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LENVIMA 10 MG DAILY DOSE CPPK 10mg	5	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 14 MG	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 18 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA CAP 24 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LORBRENA TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LORBRENA TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
LUMAKRAS TABS 120mg	5	NDS, QL (240 tabs / 30 days), NM, PA
LUMAKRAS TABS 240mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LUMAKRAS TABS 320mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LYNPARZA TABS 100mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (84 tabs / 28 days), NM, PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (112 tabs / 28 days), NM, PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (140 tabs / 28 days), NM, PA
MEKINIST SOLR .05mg/ml	5	NDS, QL (1260 mL / 30 days), NM, PA
MEKINIST TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA
MEKINIST TABS .5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
MEKTOVI TABS 15mg	5	NDS, QL (180 tabs / 30 days), NM, PA
MONJUVI SOLR 200mg	5	NDS, NM, PA
NERLYNX TABS 40mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>nilotinib hcl</i> CAPS 50mg	5	NDS, QL (120 caps / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nilotinib hcl</i> CAPS 150mg, 200mg	5	NDS, QL (112 caps / 28 days), NM, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	5	NDS, QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	5	NDS, QL (30 caps / 30 days), NM, PA
OGIVRI SOLR 150mg, 420mg	5	NDS, NM, PA
OGSIVEO TABS 100mg, 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
OJEMDA SUSR 25mg/ml	5	NDS, QL (96 mL / 28 days), NM, PA
OJEMDA TABS 100mg	5	NDS, QL (24 tabs / 28 days), NM, PA
OJJAARA TABS 100mg, 150mg, 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ONTRUZANT SOLR 150mg, 420mg	5	NDS, NM, PA
<i>pazopanib hcl</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>pazopanib hcl</i> TABS 400mg	5	NDS, QL (60 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PHESGO SOL	5	NDS, NM, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	5	NDS, QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 80mg	5	NDS, QL (120 tabs / 30 days), NM, PA
RETEVMO TABS 120mg, 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
REVUFORJ TABS 25mg	5	NDS, QL (240 tabs / 30 days), NM, PA
REVUFORJ TABS 110mg	5	NDS, QL (120 tabs / 30 days), NM, PA
REVUFORJ TABS 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REZLIDHIA CAPS 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
ROMVIMZA CAPS 14mg, 20mg, 30mg	5	NDS, QL (8 caps / 28 days), NM, PA
ROZLYTREK CAPS 100mg	5	NDS, QL (180 caps / 30 days), NM, PA
ROZLYTREK CAPS 200mg	5	NDS, QL (90 caps / 30 days), NM, PA
ROZLYTREK PACK 50mg	5	NDS, QL (336 packets / 28 days), NM, PA
RUBRACA TABS 200mg, 250mg, 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
RYDAPT CAPS 25mg	5	NDS, QL (224 caps / 28 days), NM, PA
SCEMBLIX TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
SCEMBLIX TABS 40mg	5	NDS, QL (300 tabs / 30 days), NM, PA
SCEMBLIX TABS 100mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>sorafenib tosylate</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
STIVARGA TABS 40mg	5	NDS, QL (84 tabs / 28 days), NM, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	5	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	5	NDS, QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	5	NDS, QL (120 caps / 30 days), NM, PA
TAFINLAR TBSO 10mg	5	NDS, QL (840 tabs / 28 days), NM, PA
TAGRISSO TABS 40mg, 80mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	5	NDS, QL (30 caps / 30 days), NM, PA
TALZENNA CAPS .25mg	5	NDS, QL (90 caps / 30 days), NM, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	5	NDS, NM, PA
TECENTRIQ INJ HYBREZA	5	NDS, QL (1 vial / 21 days), NM, PA
TEPMETKO TABS 225mg	5	NDS, QL (60 tabs / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TIBSOVO TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>torpenz</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TRAZIMERA SOLR 150mg, 420mg	5	NDS, NM, PA
TRUQAP TABS 160mg, 200mg	5	NDS, QL (64 tabs / 28 days), NM, PA
TRUQAP TBPK 160mg, 200mg	5	NDS, QL (4 packs / 28 days), NM, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	5	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
TURALIO CAPS 125mg	5	NDS, QL (120 caps / 30 days), NM, PA
VANFLYTA TABS 17.7mg, 26.5mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VENCLEXTA TABS 10mg	3	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 50mg	5	NDS, QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VENCLEXTA TAB START PK	5	NDS, QL (42 tabs / 28 days), NM, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VITRAKVI CAPS 25mg	5	NDS, QL (180 caps / 30 days), NM, PA
VITRAKVI CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
VITRAKVI SOLN 20mg/ml	5	NDS, QL (300 mL / 30 days), NM, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
VONJO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
VORANIGO TABS 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
VORANIGO TABS 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg	5	NDS, QL (120 caps / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XALKORI CPSP 150mg	5	NDS, QL (180 caps / 30 days), NM, PA
XOSPATA TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 10mg	5	NDS, QL (16 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 40mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPk 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPk 60mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPk 20mg	5	NDS, QL (24 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPk 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPk 80mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPk 20mg	5	NDS, QL (32 tabs / 28 days), NM, PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPk 50mg	5	NDS, QL (8 tabs / 28 days), NM, PA
ZEJULA TABS 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ZELBORAF TABS 240mg	5	NDS, QL (240 tabs / 30 days), NM, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	5	NDS, NM, PA
ZOLINZA CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
ZYDELIG TABS 100mg, 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
ZYKADIA TABS 150mg	5	NDS, QL (84 tabs / 28 days), NM, PA

## **CARDIOVASCULAR**

### **ACE INHIBITOR COMBINATIONS**

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	6	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	6	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	6	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	6	QL (30 caps / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	6	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	6	QL (30 caps / 30 days)
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25mg</i>	6	
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	6	
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	6	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	6	
<i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i>	6	
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>	6	
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>	6	
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>	6	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	6	
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	6	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	6	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	6	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	6	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	6	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	6	
<b>ACE INHIBITORS</b>		
<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	6	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	6	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	6	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	6	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	6	
<i>moexipril hcl TABS 7.5mg, 15mg</i>	6	
<i>perindopril erbumine TABS 2mg, 4mg, 8mg</i>	6	
<i>quinapril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	6	
<i>ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg</i>	6	
<i>trandolapril TABS 1mg, 2mg, 4mg</i>	6	
<b>ALDOSTERONE RECEPTOR ANTAGONISTS</b>		
<i>eplerenone TABS 25mg, 50mg</i>	3	
<i>KERENDIA TABS 10mg, 20mg, 40mg</i>	3	QL (30 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>spironolactone TABS 25mg, 50mg, 100mg</i>	1	
<b>ALPHA BLOCKERS</b>		
<i>doxazosin mesylate TABS 1mg, 2mg, 4mg, 8mg</i>	2	
<i>prazosin hcl CAPS 1mg, 2mg, 5mg</i>	3	
<i>terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg</i>	1	
<b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS</b>		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	6	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	6	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	6	QL (30 tabs / 30 days)
EDARBYCLOR TAB 40-12.5	4	QL (30 tabs / 30 days), ST
EDARBYCLOR TAB 40-25MG	4	QL (30 tabs / 30 days), ST
ENTRESTO CAP 6-6MG	3	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	3	QL (240 caps / 30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	6	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	6	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	6	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	6	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	6	QL (30 tabs / 30 days)
<i>sacubitril-valsartan tab 24-26 mg</i>	3	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 49-51 mg</i>	3	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 97-103 mg</i>	3	QL (60 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	6	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	6	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	6	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	6	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	6	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	6	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	6	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	6	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	6	QL (30 tabs / 30 days)
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<i>candesartan cilexetil TABS 4mg, 8mg, 16mg</i>	6	QL (60 tabs / 30 days)
<i>candesartan cilexetil TABS 32mg</i>	6	QL (30 tabs / 30 days)
EDARBI TABS 40mg, 80mg	4	QL (30 tabs / 30 days), ST
<i>irbesartan TABS 75mg, 150mg, 300mg</i>	6	QL (30 tabs / 30 days)
<i>losartan potassium TABS 25mg, 50mg, 100mg</i>	6	
<i>olmesartan medoxomil TABS 5mg</i>	6	QL (60 tabs / 30 days)
<i>olmesartan medoxomil TABS 20mg, 40mg</i>	6	QL (30 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>telmisartan</i> TABS 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
<i>valsartan</i> TABS 40mg, 80mg, 160mg	6	QL (60 tabs / 30 days)
<i>valsartan</i> TABS 320mg	6	QL (30 tabs / 30 days)
<b>ANTIARRHYTHMICS</b>		
<i>amiodarone hcl</i> SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 400mg	4	
<i>amiodarone hcl</i> TABS 200mg	1	
<i>disopyramide phosphate</i> CAPS 100mg, 150mg	4	
<i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg	4	
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	3	
MULTAQ TABS 400mg	4	QL (60 tabs / 30 days)
<i>pacerone</i> TABS 100mg, 400mg	4	
<i>pacerone</i> TABS 200mg	1	
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg	4	
<i>propafenone hcl</i> TABS 150mg, 225mg, 300mg	3	
<i>quinidine sulfate</i> TABS 200mg, 300mg	4	
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	2	
<i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg	3	
<b>ANTILIPEMICS, FIBRATES</b>		
<i>choline fenofibrate</i> CPDR 45mg, 135mg	3	
<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	2	
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	3	
<i>gemfibrozil</i> TABS 600mg	2	
<b>ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS</b>		
<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
EZALLOR SPRINKLE CPSP 5mg, 10mg, 20mg, 40mg	4	QL (30 caps / 30 days), ST
<i>fluvastatin sodium</i> CAPS 20mg, 40mg	6	QL (60 caps / 30 days), ST
<i>fluvastatin sodium</i> TB24 80mg	6	QL (30 tabs / 30 days), ST
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	6	QL (60 tabs / 30 days)
<i>pitavastatin calcium</i> TABS 1mg, 2mg, 4mg	6	QL (30 tabs / 30 days), ST
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg	6	QL (30 tabs / 30 days)
<i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
ZYPITAMAG TABS 2mg, 4mg	4	QL (30 tabs / 30 days), ST
<b>ANTILIPEMICS, MISCELLANEOUS</b>		
<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	3	
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	3	
<i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg	4	
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm	4	
<i>colestipol hcl</i> TABS 1gm	3	
<i>ezetimibe</i> TABS 10mg	2	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	6	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	6	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	6	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	6	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	3	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	3	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg	3	QL (60 tabs / 30 days)
<i>omega-3-acid ethyl esters cap 1 gm</i>	3	
<i>prevalite</i> PACK 4gm; POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml	3	QL (6 syringes / 28 days), NM, PA
REPATHA SURECLICK SOAJ 140mg/ml	3	QL (6 autoinjectors / 28 days), NM, PA
VASCEPA CAPS .5gm, 1gm	3	
<b>BETA-BLOCKER/DIURETIC COMBINATIONS</b>		
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	2	
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	2	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	2	
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	2	
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>	2	
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	3	
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	3	
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>BETA-BLOCKERS</b>		
<i>acebutolol hcl</i> CAPS 200mg, 400mg	3	
<i>atenolol</i> TABS 25mg, 50mg, 100mg	1	
<i>bisoprolol fumarate</i> TABS 5mg, 10mg	2	
<i>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
<i>labetalol hcl</i> TABS 100mg, 200mg, 300mg	2	
<i>metoprolol succinate</i> TB24 25mg, 50mg, 100mg, 200mg	1	
<i>metoprolol tartrate</i> SOLN 5mg/5ml	4	
<i>metoprolol tartrate</i> TABS 25mg, 50mg, 100mg	1	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	3	
<i>nebivolol hcl</i> TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>nebivolol hcl</i> TABS 20mg	3	QL (60 tabs / 30 days)
<i>pindolol</i> TABS 5mg, 10mg	3	
<i>propranolol hcl</i> CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml	3	
<i>propranolol hcl</i> TABS 10mg, 20mg, 40mg, 60mg, 80mg	2	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	3	
<b>CALCIUM CHANNEL BLOCKERS</b>		
<i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg	1	
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	2	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	2	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg	4	
<i>diltiazem hcl</i> CP24 120mg, 180mg, 240mg; TABS 30mg, 60mg, 90mg, 120mg	2	
<i>diltiazem hcl</i> SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	3	
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg	2	
<i>diltiazem hcl coated beads</i> CP24 360mg	4	
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	2	
<i>isradipine</i> CAPS 2.5mg, 5mg	4	
<i>matzim la</i> TB24 180mg, 240mg, 300mg, 360mg, 420mg	3	
<i>nicardipine hcl</i> CAPS 20mg, 30mg	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	3	
<i>nimodipine</i> CAPS 30mg	4	
<i>nisoldipine</i> TB24 8.5mg, 17mg, 34mg	4	
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
<i>verapamil hcl</i> CP24 100mg, 200mg, 300mg, 360mg; SOLN 2.5mg/ml	4	
<i>verapamil hcl</i> CP24 120mg, 180mg, 240mg	3	
<i>verapamil hcl</i> TABS 40mg, 80mg, 120mg	1	
<i>verapamil hcl</i> TBCR 120mg, 180mg, 240mg	2	
<b>DIURETICS</b>		
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	3	
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	2	
<i>amiloride hcl</i> TABS 5mg	2	
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	3	
<i>chlorthalidone</i> TABS 25mg, 50mg	2	
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml	2	
<i>furosemide</i> TABS 20mg, 40mg, 80mg	1	
<i>furosemide inj</i> SOLN 10mg/ml	3	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
<i>indapamide</i> TABS 1.25mg, 2.5mg	1	
<i>methazolamide</i> TABS 25mg, 50mg	4	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	2	
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	2	
<i>toremide</i> TABS 5mg, 10mg, 20mg, 100mg	2	
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	
<b>MISCELLANEOUS</b>		
<i>aliskiren fumarate</i> TABS 150mg, 300mg	6	QL (30 tabs / 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	6	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-atorvastatin calcium tab</i> 2.5-40 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 5-10 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 5-20 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 5-40 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 5-80 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 10-10 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 10-20 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 10-40 mg	6	
<i>amlodipine besylate-atorvastatin calcium tab</i> 10-80 mg	6	
<i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	3	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml	4	QL (450 mL / 30 days)
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml	4	
<i>digoxin</i> TABS 125mcg, 250mcg	2	QL (30 tabs / 30 days)
<i>droxidopa</i> CAPS 100mg	4	QL (90 caps / 30 days), NM, PA
<i>droxidopa</i> CAPS 200mg, 300mg	5	NDS, QL (180 caps / 30 days), NM, PA
<i>epinephrine</i> SOLN 1mg/ml	4	
<i>guanfacine hcl</i> TABS 1mg, 2mg	3	PA; PA applies if 65 years and older
<i>hydralazine hcl</i> SOLN 20mg/ml	4	
<i>hydralazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1	
<i>ivabradine hcl</i> TABS 5mg, 7.5mg	4	QL (60 tabs / 30 days)
<i>metyrosine</i> CAPS 250mg	5	NDS, NM, PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg	3	
<i>midodrine hcl</i> TABS 10mg	4	
<i>minoxidil</i> TABS 2.5mg, 10mg	2	
<i>ranolazine</i> TB12 500mg, 1000mg	4	
VERQUVO TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><i>NITRATES</i></b>		
<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	3	
<i>isosorbide mononitrate</i> TB24 30mg, 60mg, 120mg	1	
<i>nitro-bid</i> OINT 2%	3	
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	3	
<i>nitroglycerin</i> SUBL .3mg, .4mg, .6mg	2	
<b><i>PULMONARY ARTERIAL HYPERTENSION</i></b>		
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>alyq</i> TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>ambrisentan</i> TABS 5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>bosentan</i> TABS 62.5mg, 125mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>bosentan</i> TBSO 32mg	5	NDS, QL (120 tabs / 30 days), NM, PA
OPSUMIT TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	3	QL (360 tabs / 30 days), NM, PA
<i>tadalafil (pulmonary hypertension)</i> TABS 20mg	4	QL (60 tabs / 30 days), NM, PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	5	NDS, NM, PA
UPTRAVI TABS 200mcg	5	NDS, QL (140 tabs / 28 days), NM, PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg	5	NDS, QL (60 tabs / 30 days), NM, PA
UPTRAVI PACK TAB 200/800	5	NDS, QL (1 pack / 28 days), NM, PA
WINREVAIR KIT 45mg, 60mg	5	NDS, QL (2 vials / 21 days), NM, PA
WINREVAIR INJ 45MG	5	NDS, QL (2 vials / 21 days), NM, PA
WINREVAIR INJ 60MG	5	NDS, QL (2 vials / 21 days), NM, PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg	5	NDS, QL (140 caps / 28 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
YUTREPIA CAPS 106mcg	5	NDS, QL (224 caps / 28 days), NM, PA

## **CENTRAL NERVOUS SYSTEM**

### **ANTIANSXIETY**

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>buspirone hcl</i> TABS 5mg, 10mg, 15mg	1	
<i>buspirone hcl</i> TABS 7.5mg, 30mg	3	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	3	
<i>lorazepam</i> CONC 2mg/ml	3	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 4mg/ml, 20mg/10ml	2	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	3	QL (150 mL / 30 days)

### **ANTIDEMENTIA**

<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	2	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	2	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	3	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	4	QL (200 mL / 30 days)
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	3	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml	4	PA; PA applies if 29 years and younger
<i>memantine hcl</i> TABS 5mg, 10mg	3	PA; PA applies if 29 years and younger
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	4	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	4	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	4	
NAMZARIC CAP 7-10MG	4	
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	4	QL (30 patches / 30 days)
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg	3	QL (60 caps / 30 days)

### **ANTIDEPRESSANTS**

<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	3	PA; PA applies if 65 years and older
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg	3	PA; PA applies if 65 years and older

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AUVELITY TAB 45-105MG	4	QL (60 tabs / 30 days), PA
<i>bupropion hcl</i> TABS 75mg, 100mg	2	
<i>bupropion hcl</i> TB12 100mg, 150mg, 200mg; TB24 150mg	2	QL (60 tabs / 30 days)
<i>bupropion hcl</i> TB24 300mg	2	QL (30 tabs / 30 days)
<i>citalopram hydrobromide</i> SOLN 10mg/5ml	3	
<i>citalopram hydrobromide</i> TABS 10mg, 20mg, 40mg	1	
<i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg	4	PA
<i>desipramine hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	4	PA; PA applies if 65 years and older
<i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	3	PA; PA applies if 65 years and older
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg	4	QL (60 caps / 30 days), PA
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	3	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	5	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml	4	
<i>escitalopram oxalate</i> TABS 5mg, 10mg, 20mg	1	
EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg	5	NDS, QL (30 tabs / 30 days), PA
EXXUA TITRATION PACK TB24 18.2mg	5	NDS, QL (2 packs / year), PA
FETZIMA CP24 20mg, 40mg	4	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	4	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	4	QL (2 packs / year), PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg	1	
<i>fluoxetine hcl</i> SOLN 20mg/5ml	3	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	2	PA; PA applies if 65 years and older
MARPLAN TABS 10mg	4	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg; TBDP 15mg, 30mg, 45mg	3	
<i>mirtazapine</i> TABS 15mg, 30mg, 45mg	2	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg	2	
<i>nortriptyline hcl</i> SOLN 10mg/5ml	4	
<i>paroxetine hcl</i> SUSP 10mg/5ml	4	QL (900 mL / 30 days), PA; PA applies if 65 years and older
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	2	PA; PA applies if 65 years and older
<i>paroxetine hcl</i> TB24 12.5mg, 25mg, 37.5mg	4	QL (60 tabs / 30 days), PA; PA applies if 65 years and older
<i>phenelzine sulfate</i> TABS 15mg	3	
<i>protriptyline hcl</i> TABS 5mg, 10mg	4	
RALDESY SOLN 10mg/ml	4	QL (1800 mL / 30 days), PA
<i>sertraline hcl</i> CONC 20mg/ml	3	
<i>sertraline hcl</i> TABS 25mg, 50mg, 100mg	1	
<i>tranylcypromine sulfate</i> TABS 10mg	4	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg	4	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	4	QL (60 caps / 30 days)
TRINTELLIX TABS 5mg, 10mg, 20mg	4	QL (30 tabs / 30 days), PA
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg	2	
<i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	3	
<i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg	4	QL (30 tabs / 30 days)
ZURZUVAE CAPS 20mg, 25mg	5	NDS, QL (28 caps / 14 days), PA
ZURZUVAE CAPS 30mg	5	NDS, QL (14 caps / 14 days), PA
<b>ANTIPARKINSONIAN AGENTS</b>		
<i>amantadine hcl</i> CAPS 100mg	3	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml	3	
<i>amantadine hcl</i> TABS 100mg	4	
<i>benztropine mesylate</i> SOLN 1mg/ml	4	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	2	PA; PA applies if 65 years and older
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	4	
<i>carb/levo orally disintegrating tab 10-100mg</i>	3	
<i>carb/levo orally disintegrating tab 25-100mg</i>	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carb/levo orally disintegrating tab 25-250mg</i>	3	
<i>carbidopa TABS 25mg</i>	4	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	2	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	2	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	2	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	3	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	4	
<i>entacapone TABS 200mg</i>	4	
INBRIJA CAPS 42mg	5	NDS, QL (300 caps / 30 days), NM, PA
<i>pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg</i>	2	
<i>pramipexole dihydrochloride TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg</i>	4	
<i>rasagiline mesylate TABS .5mg, 1mg</i>	4	QL (30 tabs / 30 days)
<i>ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg</i>	2	
<i>ropinirole hydrochloride TB24 2mg, 4mg, 6mg, 8mg, 12mg</i>	4	
<i>selegiline hcl CAPS 5mg; TABS 5mg</i>	3	
<i>trihexyphenidyl hcl SOLN .4mg/ml</i>	3	
<i>trihexyphenidyl hcl TABS 2mg, 5mg</i>	2	
<b>ANTIPSYCHOTICS</b>		
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml	5	NDS, QL (1 syringe / 56 days)
ABILIFY MAINTENA PRSY 300mg, 400mg	5	NDS, QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	5	NDS, QL (1 injection / 28 days)
<i>aripiprazole SOLN 1mg/ml</i>	4	QL (900 mL / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>aripiprazole</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	4	QL (30 tabs / 30 days)
<i>aripiprazole</i> TBDP 10mg, 15mg	4	QL (60 tabs / 30 days), ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	5	NDS, QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	5	NDS, QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	5	NDS
<i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg	4	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	5	NDS, QL (30 caps / 30 days)
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	4	
<i>clozapine</i> TABS 25mg, 50mg	3	
<i>clozapine</i> TABS 100mg	3	QL (270 tabs / 30 days)
<i>clozapine</i> TABS 200mg	3	QL (120 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	4	PA
<i>clozapine</i> TBDP 100mg	4	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	4	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	4	QL (120 tabs / 30 days), PA
COBENFY CAP 50-20MG	5	NDS, QL (60 caps / 30 days)
COBENFY CAP 100-20MG	5	NDS, QL (60 caps / 30 days)
COBENFY CAP 125-30MG	5	NDS, QL (60 caps / 30 days)
COBENFY STRT CAP PACK	5	NDS, QL (2 packs / year)
ERZOFRI SUSY 39mg/0.25ml	4	QL (1 syringe / 28 days)
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	5	NDS, QL (1 syringe / 28 days)
ERZOFRI SUSY 351mg/2.25ml	5	NDS, QL (2 syringes / year)
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	5	NDS, QL (60 tabs / 30 days), PA
FANAPT PAK PACK A	4	QL (2 packs / year), PA
FANAPT PAK PACK B	4	QL (2 packs / year), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FANAPT PAK PACK C	4	QL (2 packs / year), PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	4	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	4	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	3	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	3	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	3	
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml	5	NDS, QL (1 injection / 180 days)
INVEGA SUSTENNA SUSY 39mg/0.25ml	4	QL (1 syringe / 28 days)
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	5	NDS, QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml	5	NDS, QL (1 syringe / 90 days)
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	3	
<i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg, 120mg	4	QL (30 tabs / 30 days)
<i>lurasidone hcl</i> TABS 80mg	4	QL (60 tabs / 30 days)
LYBALVI TAB 5-10MG	5	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 10-10MG	5	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 15-10MG	5	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 20-10MG	5	NDS, QL (30 tabs / 30 days)
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	4	
NUPLAZID CAPS 34mg	5	NDS, QL (30 caps / 30 days), NM, PA
NUPLAZID TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>olanzapine</i> SOLR 10mg	4	QL (3 vials / 1 day)
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg	2	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg	2	QL (30 tabs / 30 days)
<i>olanzapine</i> TBDP 5mg, 15mg, 20mg	4	QL (30 tabs / 30 days), ST
<i>olanzapine</i> TBDP 10mg	4	QL (60 tabs / 30 days), ST

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OPIPZA FILM 2mg, 5mg	5	NDS, QL (30 films / 30 days), PA
OPIPZA FILM 10mg	5	NDS, QL (90 films / 30 days), PA
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	4	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	4	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	3	
<i>pimozide</i> TABS 1mg, 2mg	4	
<i>quetiapine fumarate</i> TABS 25mg	2	QL (180 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg	2	QL (90 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 300mg, 400mg	2	QL (60 tabs / 30 days)
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	4	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	4	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	5	NDS, QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	5	NDS, QL (60 tabs / 30 days)
<i>risperidone</i> SOLN 1mg/ml	3	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	2	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg	4	QL (60 tabs / 30 days), ST
<i>risperidone</i> TBDP 4mg	4	QL (120 tabs / 30 days), ST
<i>risperidone</i> TBDP .25mg, .5mg	4	QL (90 tabs / 30 days), ST
<i>risperidone microspheres</i> SRER 12.5mg, 25mg	4	QL (2 injections / 28 days)
<i>risperidone microspheres</i> SRER 37.5mg, 50mg	5	NDS, QL (2 injections / 28 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	5	NDS, QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	3	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	4	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	3	
VERSACLOZ SUSP 50mg/ml	5	NDS, QL (600 mL / 30 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VRAYLAR CAPS 1.5mg	5	NDS, QL (60 caps / 30 days)
VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg	5	NDS, QL (30 caps / 30 days)
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	4	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	4	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg	4	QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 300mg	5	NDS, QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 405mg	5	NDS, QL (1 vial / 28 days), NM, PA
<b>ANTISEIZURE AGENTS</b>		
APTIOM TABS 200mg, 400mg	5	NDS, QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	5	NDS, QL (60 tabs / 30 days)
<i>brivaracetam</i> SOLN 10mg/ml	4	QL (600 mL / 30 days), PA
<i>brivaracetam</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg	4	QL (60 tabs / 30 days), PA
BRIVIACT SOLN 10mg/ml	5	NDS, QL (600 mL / 30 days), PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	5	NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg; TABS 200mg	3	
<i>carbamazepine</i> CHEW 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TB12 100mg, 200mg, 400mg	4	
<i>clobazam</i> SUSP 2.5mg/ml	4	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	4	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg	2	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg	2	QL (90 tabs / 30 days)
<i>clonazepam</i> TBDP 2mg	3	QL (300 tabs / 30 days)
<i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg	3	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	4	QL (180 tabs / 30 days), PA; PA applies if 65 years and older

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIACOMIT CAPS 250mg	5	NDS, QL (360 caps / 30 days), NM, PA
DIACOMIT CAPS 500mg	5	NDS, QL (180 caps / 30 days), NM, PA
DIACOMIT PACK 250mg	5	NDS, QL (360 packets / 30 days), NM, PA
DIACOMIT PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>diazepam</i> SOLN 5mg/5ml	3	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam</i> TABS 2mg, 5mg, 10mg	2	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	4	
<i>diazepam inj</i> SOLN 5mg/ml	4	
<i>diazepam intensol</i> CONC 5mg/ml	3	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAPS 30mg	4	
<i>divalproex sodium</i> CSDR 125mg	4	
<i>divalproex sodium</i> TB24 250mg, 500mg	3	
<i>divalproex sodium</i> TBEC 125mg, 250mg, 500mg	2	
EPIDIOLEX SOLN 100mg/ml	5	NDS, QL (600 mL / 30 days), NM, PA
<i>eslicarbazepine acetate</i> TABS 200mg, 400mg	4	QL (30 tabs / 30 days)
<i>eslicarbazepine acetate</i> TABS 600mg, 800mg	4	QL (60 tabs / 30 days)
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	3	
<i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg	4	
FINTEPLA SOLN 2.2mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
FYCOMPA SUSP .5mg/ml	5	NDS, QL (680 mL / 28 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FYCOMPA TABS 2mg	4	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	5	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg, 300mg	2	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	2	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml	3	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	2	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	2	QL (120 tabs / 30 days)
<i>lacosamide</i> SOLN 200mg/20ml	4	
<i>lacosamide</i> TABS 50mg	4	QL (120 tabs / 30 days)
<i>lacosamide</i> TABS 100mg, 150mg, 200mg	4	QL (60 tabs / 30 days)
<i>lacosamide oral</i> SOLN 10mg/ml	4	QL (1200 mL / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg	3	
<i>lamotrigine</i> TABS 25mg, 100mg, 150mg, 200mg	1	
<i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg; TBDP 25mg, 50mg, 100mg, 200mg	4	ST
<i>levetiracetam</i> SOLN 100mg/ml; TB24 500mg, 750mg	3	
<i>levetiracetam</i> SOLN 500mg/5ml	4	
<i>levetiracetam</i> TABS 250mg, 500mg, 750mg, 1000mg	2	
<i>levetiracetam</i> TB3D 250mg	4	QL (360 tabs / 30 days)
<i>levetiracetam</i> TB3D 500mg	4	QL (180 tabs / 30 days)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	4	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	4	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	4	
<i>methsuximide</i> CAPS 300mg	4	
NAYZILAM SOLN 5mg/0.1ml	4	QL (10 nasal units / 30 days)
<i>oxcarbazepine</i> SUSP 300mg/5ml	4	
<i>oxcarbazepine</i> TABS 150mg, 300mg, 600mg	3	
<i>perampanel</i> SUSP .5mg/ml	5	NDS, QL (680 mL / 28 days), PA
<i>perampanel</i> TABS 2mg	4	QL (60 tabs / 30 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>perampanel</i> TABS 4mg, 6mg, 8mg, 10mg, 12mg	4	QL (30 tabs / 30 days), PA
<i>phenobarbital</i> ELIX 20mg/5ml	4	QL (1500 mL / 30 days), PA; PA applies if 65 years and older
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	3	QL (120 tabs / 30 days), PA; PA applies if 65 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	4	PA; PA applies if 65 years and older
<i>phenytek</i> CAPS 200mg, 300mg	3	
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	3	
<i>phenytoin sodium</i> SOLN 50mg/ml	4	
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	3	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	3	QL (120 caps / 30 days), PA; PA applies if 65 years and older
<i>pregabalin</i> CAPS 200mg	3	QL (90 caps / 30 days), PA; PA applies if 65 years and older
<i>pregabalin</i> CAPS 225mg, 300mg	3	QL (60 caps / 30 days), PA; PA applies if 65 years and older
<i>pregabalin</i> SOLN 20mg/ml	4	QL (900 mL / 30 days), PA; PA applies if 65 years and older
<i>primidone</i> TABS 50mg, 125mg, 250mg	2	
<i>roweepra</i> TABS 500mg	2	
<i>rufinamide</i> SUSP 40mg/ml	5	NDS, QL (2400 mL / 30 days), PA
<i>rufinamide</i> TABS 200mg	4	QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	5	NDS, QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	4	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	4	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	4	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	4	QL (90 tabs / 30 days)
SUBVENITE SUSP 10mg/ml	5	NDS, ST
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	1	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SYMPAZAN FILM 5mg, 10mg, 20mg	5	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	4	
<i>topiramate</i> CPSP 15mg, 25mg	3	
<i>topiramate</i> CPSP 50mg	4	
<i>topiramate</i> SOLN 25mg/ml	4	QL (480 mL / 30 days), PA
<i>topiramate</i> TABS 25mg, 50mg, 100mg, 200mg	2	
<i>valproate sodium</i> SOLN 100mg/ml	4	
<i>valproate sodium</i> SOLN 250mg/5ml	3	
<i>valproic acid</i> CAPS 250mg	2	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	4	QL (10 blister packs / 30 days)
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	4	QL (10 blister packs / 30 days)
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	4	QL (10 blister packs / 30 days)
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	4	QL (10 blister packs / 30 days)
<i>vigabatrin</i> PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>vigabatrin</i> TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>vigadrone</i> PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>vigadrone</i> TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VIGAFYDE SOLN 100mg/ml	5	NDS, QL (900 mL / 30 days), NM, PA
XCOPRI TABS 25mg, 50mg, 100mg	5	NDS, QL (30 tabs / 30 days)
XCOPRI TABS 150mg, 200mg	5	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	4	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	5	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	5	NDS, QL (28 tabs / 28 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZONISADE SUSP 100mg/5ml	5	NDS, QL (900 mL / 30 days), PA
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	2	
ZTALMY SUSP 50mg/ml	5	NDS, QL (1100 mL / 30 days), NM, PA
<b>ATTENTION DEFICIT HYPERACTIVITY DISORDER</b>		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 10 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	3	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	3	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl</i> CAPS 10mg, 18mg, 25mg	4	QL (120 caps / 30 days)
<i>atomoxetine hcl</i> CAPS 40mg	4	QL (60 caps / 30 days)
<i>atomoxetine hcl</i> CAPS 60mg, 80mg, 100mg	4	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl</i> TABS 2.5mg, 5mg	3	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl</i> TABS 10mg	3	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd)</i> TB24 1mg, 2mg, 4mg	3	QL (30 tabs / 30 days), PA; PA applies if 65 years and older

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>guanfacine hcl (adhd)</i> TB24 3mg	3	QL (60 tabs / 30 days), PA; PA applies if 65 years and older
<i>lisdexamfetamine dimesylate</i> CAPS 10mg, 20mg, 30mg	4	QL (60 caps / 30 days), PA
<i>lisdexamfetamine dimesylate</i> CAPS 40mg, 50mg, 60mg, 70mg	4	QL (30 caps / 30 days), PA
<i>lisdexamfetamine dimesylate</i> CHEW 10mg, 20mg, 30mg	4	QL (60 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate</i> CHEW 40mg, 50mg, 60mg	4	QL (30 tabs / 30 days), PA
<i>methylphenidate hcl</i> CHEW 2.5mg, 5mg, 10mg	4	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> SOLN 5mg/5ml	4	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl</i> SOLN 10mg/5ml	4	QL (900 mL / 30 days), PA
<i>methylphenidate hcl</i> TABS 5mg, 10mg	3	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> TABS 20mg	3	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl</i> TBCR 10mg, 20mg	4	QL (90 tabs / 30 days), PA
<b>HYPNOTICS</b>		
DAYVIGO TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep)</i> TABS 3mg, 6mg	3	QL (30 tabs / 30 days)
<i>ramelteon</i> TABS 8mg	3	QL (30 tabs / 30 days)
<i>tasimelteon</i> CAPS 20mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>temazepam</i> CAPS 7.5mg, 30mg	4	QL (30 caps / 30 days), PA; PA applies if 65 years and older
<i>temazepam</i> CAPS 15mg	4	QL (60 caps / 30 days), PA; PA applies if 65 years and older
<i>zolpidem tartrate</i> TABS 5mg, 10mg	2	QL (30 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<b>MIGRAINE</b>		
AIMOVIG SOAJ 70mg/ml, 140mg/ml	3	QL (1 pen / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	5	NDS, QL (8 mL / 30 days), PA
EMGALITY SOAJ 120mg/ml	3	QL (2 pens / 30 days), NM, PA
EMGALITY SOSY 100mg/ml	3	QL (3 syringes / 30 days), NM, PA
EMGALITY SOSY 120mg/ml	3	QL (2 syringes / 30 days), NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	3	QL (12 tabs / 30 days)
NURTEC TBDP 75mg	3	QL (16 tabs / 30 days), PA
QULIPTA TABS 10mg, 30mg, 60mg	3	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	3	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	4	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	4	QL (12 units / 30 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOLN 6mg/0.5ml	4	QL (12 injections / 30 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	2	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	3	QL (16 tabs / 30 days), PA
<b>MISCELLANEOUS</b>		
AUSTEDO TABS 6mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 6mg	5	NDS, QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg	5	NDS, QL (30 tabs / 30 days), NM, PA
AUSTEDO XR TB24 24mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	5	NDS, QL (2 packs / year), NM, PA
<i>lithium</i> SOLN 8meq/5ml	4	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg	1	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lithium carbonate</i> TBCR 300mg, 450mg	2	
NUEDEXTA CAP 20-10MG	5	NDS, QL (60 caps / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	3	
<i>riluzole</i> TABS 50mg	4	
<i>tetrabenazine</i> TABS 12.5mg	4	QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<b>MULTIPLE SCLEROSIS AGENTS</b>		
BAFIERTAM CPDR 95mg	5	NDS, QL (120 caps / 30 days), NM, PA
BETASERON KIT .3mg	5	NDS, QL (14 kits / 28 days), NM, PA
COPAXONE SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
COPAXONE SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	3	QL (60 tabs / 30 days), NM, PA
<i> fingolimod hcl</i> CAPS .5mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
KESIMPTA SOAJ 20mg/0.4ml	5	NDS, QL (16 pens / 365 days), NM, PA
<b>MUSCULOSKELETAL THERAPY AGENTS</b>		
<i>baclofen</i> TABS 5mg	2	QL (90 tabs / 30 days)
<i>baclofen</i> TABS 10mg, 20mg	2	
<i>carisoprodol</i> TABS 350mg	3	QL (120 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	4	
<i>methocarbamol</i> TABS 500mg	3	QL (360 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>methocarbamol</i> TABS 750mg	3	QL (240 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>tizanidine hcl</i> TABS 2mg, 4mg	2	
<b><i>NARCOLEPSY/CATAPLEXY</i></b>		
<i>armodafinil</i> TABS 50mg	4	QL (60 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	4	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 100mg	3	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 200mg	3	QL (60 tabs / 30 days), PA
<i>sodium oxybate</i> SOLN 500mg/ml	5	NDS, QL (540 mL / 30 days), NM, PA
<b><i>PSYCHOTHERAPEUTIC-MISC</i></b>		
<i>acamprosate calcium</i> TBEC 333mg	4	
<i>buprenorphine hcl</i> SUBL 2mg	3	QL (180 tabs / 30 days)
<i>buprenorphine hcl</i> SUBL 8mg	3	QL (120 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	4	QL (180 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	4	QL (120 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (180 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (120 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) TB12 150mg</i>	2	QL (60 tabs / 30 days)
<i>disulfiram TABS 250mg, 500mg</i>	3	
<i>KLOXXADO LIQD 8mg/0.1ml</i>	3	
<i>naloxone hcl LIQD 4mg/0.1ml</i>	3	
<i>naloxone hcl SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml</i>	2	
<i>naltrexone hcl TABS 50mg</i>	3	
<i>NICOTROL NS SOLN 10mg/ml</i>	4	
<i>varenicline tartrate TABS .5mg, 1mg</i>	4	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	4	QL (2 packs / year)
<i>VIVITROL SUSR 380mg</i>	5	NDS, NM
<b>ENDOCRINE AND METABOLIC</b>		
<b>ANDROGENS</b>		
<i>danazol CAPS 50mg, 100mg, 200mg</i>	4	
<i>depo-testosterone SOLN 100mg/ml, 200mg/ml</i>	3	PA
<i>testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm</i>	4	QL (300 gm / 30 days), PA
<i>testosterone cypionate SOLN 100mg/ml, 200mg/ml</i>	3	PA
<i>testosterone enanthate SOLN 200mg/ml</i>	3	PA
<i>testosterone pump GEL 1.62%</i>	4	QL (150 gm / 30 days), PA
<b>ANTIDIABETICS</b>		
<i>acarbose TABS 25mg, 50mg, 100mg</i>	6	
<i>dapagliflozin TABS 5mg, 10mg</i>	6	QL (30 tabs / 30 days)
<i>dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg</i>	6	QL (60 tabs / 30 days)
<i>dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg</i>	6	QL (60 tabs / 30 days)
<i>dapagliflozin free base-metformin hcl tab er 24hr 10-500 mg</i>	6	QL (30 tabs / 30 days)
<i>dapagliflozin free base-metformin hcl tab er 24hr 10-1000 mg</i>	6	QL (30 tabs / 30 days)
<i>FARXIGA TABS 5mg, 10mg</i>	3	QL (30 tabs / 30 days)
<i>glimepiride TABS 1mg, 2mg</i>	6	QL (90 tabs / 30 days)
<i>glimepiride TABS 4mg</i>	6	QL (60 tabs / 30 days)
<i>glipizide TABS 5mg</i>	6	QL (240 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>glipizide</i> TABS 10mg	6	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	6	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	6	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	6	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	6	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	6	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg, 25mg	3	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	3	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	6	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	6	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	6	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	6	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	6	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	3	QL (4 pens / 28 days), PA
<i>nateglinide</i> TABS 60mg, 120mg	6	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	3	QL (1 pen / 28 days), PA
<i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg	6	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	6	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	6	QL (90 tabs / 30 days)
<i>repaglinide</i> TABS 2mg	6	QL (240 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
repaglinide TABS .5mg, 1mg	6	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	3	QL (30 tabs / 30 days), PA
TRADJENTA TABS 5mg	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	3	QL (30 tabs / 30 days)
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	3	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)
<b>ANTIDIABETICS, INSULINS</b>		
ADMELOG SOLN 100unit/ml	3	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	3	
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY	3	PA
CEQR SIMPL KIT PATCH 2U (3-DAY)	4	QL (10 patches / 30 days), PA
CEQR SIMPL KIT PATCH 2U (4-DAY)	4	QL (8 patches / 24 days), PA
CEQR SIMPL MIS INSERTER	4	QL (2 inserters / year), PA
FIASP SOLN 100unit/ml	3	B/D
FIASP FLEXTOUCH SOPN 100unit/ml	3	
FIASP PENFILL SOCT 100unit/ml	3	
FIASP PUMPCART SOCT 100unit/ml	3	B/D
GAUZE PADS 2" X 2"	3	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	5	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	5	NDS
INSULIN PEN NEEDLES: EMBECTA-BD	3	PA
INSULIN SAFETY NEEDLES: EMBECTA-BD	3	PA
INSULIN SYRINGES: EMBECTA-BD	3	PA
LANTUS SOLN 100unit/ml	3	
LANTUS SOLOSTAR SOPN 100unit/ml	3	
NOVOLIN INJ 70/30	3	(brand RELION not covered)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NOVOLIN INJ 70/30 FP	3	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	3	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	3	B/D; (brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	3	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	3	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	3	
NOVOLOG MIX INJ 70/30	3	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	3	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	3	
NOVOLOG RELION SOLN 100unit/ml	3	B/D
OMNIPOD 5 DX KIT INT G7G6	4	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	4	QL (15 pods / 30 days), PA
OMNIPOD 5 L2 KIT INTRO G6	4	QL (1 kit / year), PA
OMNIPOD 5 L2 MIS PODS G6	4	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	4	QL (15 pods / 30 days), PA
SOLIQUA INJ 100/33	3	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	3	
TOUJEO SOLOSTAR SOPN 300unit/ml	3	
XULTOPHY INJ 100/3.6	3	QL (5 pens / 30 days)
<b>CALCIUM REGULATORS</b>		
<i>alendronate sodium</i> SOLN 70mg/75ml	4	ST
<i>alendronate sodium</i> TABS 10mg, 35mg, 70mg	6	
BILDYOS SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
BONSITY SOPN 560mcg/2.24ml	5	NDS, QL (1 pen / 28 days), NM, PA
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	3	B/D
<i>ibandronate sodium</i> SOLN 3mg/3ml	4	B/D, QL (1 injection / 90 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ibandronate sodium</i> TABS 150mg	2	B/D
OSPOMYV SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
PAMIDRONATE DISODIUM SOLN 6mg/ml	3	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	3	B/D
PROLIA SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
<i>risedronate sodium</i> TABS 5mg, 35mg, 150mg	3	
<i>risedronate sodium</i> TABS 30mg	4	
<i>risedronate sodium</i> TBEC 35mg	4	ST
<i>teriparatide</i> SOPN 560mcg/2.24ml	5	NDS, QL (1 pen / 28 days), NM, PA
TERIPARATIDE SOPN 560mcg/2.24ml	5	NDS, QL (1 pen / 28 days), NM, PA; (ALVOGEN product)
WYOST SOLN 120mg/1.7ml	5	NDS, NM, PA
XTRENBO SOLN 120mg/1.7ml	4	NM, PA
<i>zoledronic acid</i> CONC 4mg/5ml; SOLN 5mg/100ml	4	B/D, NM
<b>CHELATING AGENTS</b>		
CHEMET CAPS 100mg	5	NDS
<i>deferasirox</i> PACK 90mg, 180mg, 360mg; TBSO 250mg, 500mg	5	NDS, NM, PA
<i>deferasirox</i> TABS 90mg	3	NM, PA
<i>deferasirox</i> TABS 180mg, 360mg; TBSO 125mg	4	NM, PA
<i>kionex</i> SUSP 15gm/60ml	4	
LOKELMA PACK 5gm, 10gm	3	
<i>penicillamine</i> TABS 250mg	5	NDS, NM
<i>sodium polystyrene sulfonate</i> SUSP 15gm/60ml	4	
<i>sodium polystyrene sulfonate powder</i>	3	
<i>sps</i> SUSP 15gm/60ml	4	
<i>sps rectal</i> SUSP 15gm/60ml	4	
<i>trientine hcl</i> CAPS 250mg	5	NDS, NM, PA
<b>CONTRACEPTIVES</b>		
<i>afirmelle</i>	2	
<i>altavera</i>	2	
<i>alyacen 1/35</i>	2	
<i>alyacen 7/7/7</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amethyst</i>	2	
<i>apri</i>	2	
<i>aranelle</i>	2	
<i>ashlyna</i>	2	
<i>aubra eq</i>	2	
<i>aurovela 1/20</i>	2	
<i>aurovela 24 fe</i>	2	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	2	
<i>azurette</i>	2	
<i>balziva</i>	2	
<i>blisovi 24 fe</i>	2	
<i>blisovi fe 1.5/30</i>	2	
<i>blisovi fe 1/20</i>	2	
<i>briellyn</i>	2	
<i>camila TABS .35mg</i>	2	
<i>camrese</i>	2	
<i>camrese lo</i>	2	
<i>chateal eq</i>	2	
<i>cryselle</i>	2	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	2	
<i>dasetta 7/7/7</i>	2	
<i>daysee</i>	2	
<i>deblitane TABS .35mg</i>	2	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	3	
<i>desogest-eth estrad &amp; eth estrad tab 0.15- 0.02/0.01 mg(21/5)</i>	2	
<i>dolishale</i>	2	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	2	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	2	
<i>elinest</i>	2	
<i>eluryng</i>	3	
<i>emzahh TABS .35mg</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>enilloring</i>	3	
<i>enskyce</i>	2	
<i>errin</i> TABS .35mg	2	
<i>estarylla</i>	2	
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i>	2	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	3	
<i>falmina</i>	2	
<i>feirza 1.5/30</i>	2	
<i>feirza 1/20</i>	2	
<i>finzala</i>	2	
<i>galbriela</i>	2	
<i>hailey 1.5/30</i>	2	
<i>hailey 24 fe</i>	2	
<i>hailey fe 1/20</i>	2	
<i>heather</i> TABS .35mg	2	
<i>iclevia</i>	2	
<i>incassia</i> TABS .35mg	2	
<i>introvale</i>	2	
<i>isibloom</i>	2	
<i>jaimiess</i>	2	
<i>jasmiel</i>	2	
<i>jencycla</i> TABS .35mg	2	
<i>jolessa</i>	2	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	2	
<i>junel 1/20</i>	2	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	
<i>junel fe 24</i>	2	
<i>kaitlib fe</i>	2	
<i>kariva</i>	2	
<i>kelnor 1/35</i>	2	
<i>kurvelo</i>	2	
<i>larin 1.5/30</i>	2	
<i>larin 1/20</i>	2	
<i>larin 24 fe</i>	2	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>lessina</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levonest</i>	2	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp; eth est 0.01 mg</i>	2	
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	2	
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	2	
<i>levora 0.15/30-28</i>	2	
LILETTA IUD 20.1mcg/day	3	NM
<i>loestrin 1.5/30-21</i>	2	
<i>loestrin 1/20-21</i>	2	
<i>loestrin fe 1.5/30</i>	2	
<i>loestrin fe 1/20</i>	2	
<i>lojaimiess</i>	2	
<i>loryna</i>	2	
<i>low-ogestrel</i>	2	
<i>luizza 1.5/30</i>	2	
<i>luizza 1/20</i>	2	
<i>lutra</i>	2	
<i>lyleq TABS .35mg</i>	2	
<i>lyza TABS .35mg</i>	2	
<i>marlissa</i>	2	
<i>medroxyprogesterone acetate (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml</i>	3	
<i>meleya TABS .35mg</i>	2	
<i>mibelas 24 fe</i>	2	
<i>microgestin 1.5/30</i>	2	
<i>microgestin 1/20</i>	2	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>mili</i>	2	
<i>mono-lyyah</i>	2	
<i>necon 0.5/35-28</i>	2	
NEXPLANON IMPL 68mg	3	NM
<i>nikki</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nora-be</i> TABS .35mg	2	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	3	
<i>norethindrone (contraceptive)</i> TABS .35mg	2	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	2	
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	2	
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>norlyroc</i> TABS .35mg	2	
<i>nortrel 0.5/35 (28)</i>	2	
<i>nortrel 1/35 (21)</i>	2	
<i>nortrel 1/35 (28)</i>	2	
<i>nortrel 7/7/7</i>	2	
<i>nylia 1/35</i>	2	
<i>nylia 7/7/7</i>	2	
<i>orquidea</i> TABS .35mg	2	
<i>philith</i>	2	
<i>pimtrea</i>	2	
<i>portia-28</i>	2	
<i>reclipsen</i>	2	
<i>rivelsa</i>	2	
<i>rosyrah</i>	2	
<i>setlakin</i>	2	
<i>sharobel</i> TABS .35mg	2	
<i>simliya</i>	2	
<i>simpesse</i>	2	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda</i>	2	
<i>tarina 24 fe</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tarina fe 1/20 eq</i>	2	
<i>tilia fe</i>	2	
<i>tri-estarylla</i>	2	
<i>tri-legest fe</i>	2	
<i>tri-linyah</i>	2	
<i>tri-lo-estarylla</i>	2	
<i>tri-lo-marzia</i>	2	
<i>tri-lo-mili</i>	2	
<i>tri-lo-sprintec</i>	2	
<i>tri-mili</i>	2	
<i>tri-sprintec</i>	2	
<i>tri-vylibra</i>	2	
<i>tri-vylibra lo</i>	2	
<i>turqoz</i>	2	
<i>tydemy</i>	2	
<i>valtya 1/35</i>	2	
<i>valtya 1/50</i>	2	
<i>velivet</i>	2	
<i>vestura</i>	2	
<i>vienva</i>	2	
<i>viorele</i>	2	
<i>vyfemla</i>	2	
<i>vylibra</i>	2	
<i>wera</i>	2	
<i>wymzya fe</i>	2	
<i>xarah fe</i>	2	
<i>xelria fe</i>	2	
<i>xulane</i>	3	
<i>zafemy</i>	3	
<i>zovia 1/35</i>	2	
<i>zumandimine</i>	2	
<b>ESTROGENS</b>		
<i>abigale</i>	3	
<i>abigale lo</i>	3	
<i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	3	
<i>estradiol</i> TABS .5mg, 1mg, 2mg	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	3	
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	3	
<i>estradiol vaginal CREA .1mg/gm</i>	3	
<i>estradiol vaginal TABS 10mcg</i>	4	
<i>estradiol valerate OIL 10mg/ml, 20mg/ml, 40mg/ml</i>	4	
<i>fyavolv tab 0.5mg-2.5mcg</i>	3	
<i>fyavolv tab 1mg-5mcg</i>	3	
<i>jinteli</i>	3	
<i>lyllana PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr</i>	3	
<i>mimvey</i>	3	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	3	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	3	
<i>yuvafem TABS 10mcg</i>	4	
<b>GLUCOCORTICOIDS</b>		
<i>dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg</i>	3	
<i>DEXAMETHASONE INTENSOL CONC 1mg/ml</i>	4	
<i>dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml</i>	3	
<i>fludrocortisone acetate TABS .1mg</i>	2	
<i>hydrocortisone TABS 5mg, 10mg, 20mg</i>	3	
<i>hydrocortisone sod succinate SOLR 100mg</i>	4	
<i>methylprednisolone TABS 4mg, 8mg, 16mg, 32mg</i>	3	B/D
<i>methylprednisolone TBPK 4mg</i>	2	
<i>methylprednisolone acetate SUSP 40mg/ml, 80mg/ml</i>	3	B/D
<i>methylprednisolone sod succ SOLR 40mg, 125mg, 500mg, 1000mg</i>	3	B/D
<i>prednisolone SOLN 15mg/5ml</i>	2	B/D
<i>prednisolone sodium phosphate SOLN 5mg/5ml, 25mg/5ml</i>	4	B/D
<i>prednisolone sodium phosphate SOLN 15mg/5ml</i>	2	B/D
<i>prednisone SOLN 5mg/5ml</i>	4	B/D

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>prednisone</i> TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
<i>prednisone</i> TBPK 5mg, 10mg	2	
PREDNISONE INTENSOL CONC 5mg/ml	4	B/D
SOLU-CORTEF SOLR 250mg, 500mg, 1000mg	4	
<b>GLUCOSE ELEVATING AGENTS</b>		
<i>diazoxide</i> SUSP 50mg/ml	5	NDS
GVOKE HYPOPEN 1-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	3	
GVOKE HYPOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	3	
GVOKE KIT SOLN 1mg/0.2ml	3	
GVOKE PFS SOSY 1mg/0.2ml	3	
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	3	
<b>MISCELLANEOUS</b>		
ALDURAZYME SOLN 2.9mg/5ml	5	NDS, NM, PA
<i>betaine powder for oral solution</i>	5	NDS, NM
<i>cabergoline</i> TABS .5mg	3	
<i>carglumic acid</i> TBSO 200mg	5	NDS, NM, PA
CERDELGA CAPS 84mg	5	NDS, NM, PA
CEREZYME SOLR 400unit	5	NDS, NM, PA
<i>cinacalcet hcl</i> TABS 30mg, 60mg	4	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl</i> TABS 90mg	4	B/D, QL (120 tabs / 30 days), NM
CYSTAGON CAPS 50mg, 150mg	4	NM, PA
<i>desmopressin acetate</i> SOLN 4mcg/ml	5	NDS
<i>desmopressin acetate</i> TABS .1mg, .2mg	3	
<i>desmopressin acetate spray</i> SOLN .01%	4	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	4	
FABRAZYME SOLR 5mg, 35mg	5	NDS, NM, PA
GENOTROPIN CART 5mg, 12mg	5	NDS, NM, PA
GENOTROPIN MINIQUICK PRSY .2mg	3	NM, PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	5	NDS, NM, PA
INCRELEX SOLN 40mg/4ml	5	NDS, NM, PA
<i>javygtor</i> PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
<i>lanreotide acetate</i> SOLN 120mg/0.5ml	5	NDS, NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg	4	B/D
LUMIZYME SOLR 50mg	5	NDS, NM, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg)	5	NDS, NM, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg)	5	NDS, NM, PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg)	5	NDS, NM, PA
<i>mifepristone (hyperglycemia)</i> TABS 300mg	5	NDS, NM, PA
NAGLAZYME SOLN 1mg/ml	5	NDS, NM, PA
<i>nitisinone</i> CAPS 2mg, 5mg, 10mg, 20mg	5	NDS, NM, PA
<i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	4	NM, PA
<i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	5	NDS, NM, PA
<i>raloxifene hcl</i> TABS 60mg	3	
REVCOVI SOLN 2.4mg/1.5ml	5	NDS, NM, PA
REZDIFFRA TABS 60mg, 80mg, 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	5	NDS, NM, PA
<i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg	5	NDS, NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml	5	NDS, NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	5	NDS, NM, PA
SYNAREL SOLN 2mg/ml	5	NDS, PA
<i>tolvaptan</i> TABS 15mg, 30mg	5	NDS, NM, PA; (generic of JYNARQUE)
<i>tolvaptan</i> TBPK 15mg	5	NDS, NM, PA
<i>tolvaptan tab therapy pack 30 &amp; 15 mg</i>	5	NDS, NM, PA
<i>tolvaptan tab therapy pack 45 &amp; 15 mg</i>	5	NDS, NM, PA
<i>tolvaptan tab therapy pack 60 &amp; 30 mg</i>	5	NDS, NM, PA
<i>tolvaptan tab therapy pack 90 &amp; 30 mg</i>	5	NDS, NM, PA
<i>zelvysia</i> PACK 100mg, 500mg	5	NDS, NM, PA
<b>PROGESTINS</b>		
<i>gallifrey</i> TABS 5mg	3	
<i>medroxyprogesterone acetate</i> TABS 2.5mg, 5mg, 10mg	1	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>megestrol acetate</i> SUSP 40mg/ml	3	
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	4	PA
<i>norethindrone acetate</i> TABS 5mg	3	
<i>progesterone</i> CAPS 100mg, 200mg	3	
<b>THYROID AGENTS</b>		
<i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>liomny</i> TABS 5mcg, 25mcg, 50mcg	3	
<i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg	3	
<i>methimazole</i> TABS 5mg, 10mg	1	
<i>propylthiouracil</i> TABS 50mg	3	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	4	
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<b>VITAMIN D ANALOGS</b>		
<i>calcitriol</i> CAPS .25mcg, .5mcg	2	B/D
<i>calcitriol (oral)</i> SOLN 1mcg/ml	4	B/D
<i>doxercalciferol</i> CAPS .5mcg, 1mcg, 2.5mcg	4	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	4	B/D
<b>GASTROINTESTINAL</b>		
<b>ANTIEMETICS</b>		
<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	4	B/D
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	4	B/D
<i>compro</i> SUPP 25mg	4	
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	4	B/D, QL (60 caps / 30 days)
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	4	
<i>granisetron hcl</i> TABS 1mg	4	B/D

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>meclizine hcl</i> TABS 12.5mg, 25mg	2	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml	3	
<i>metoclopramide hcl</i> TABS 5mg, 10mg	1	
<i>ondansetron</i> TBDP 4mg, 8mg	3	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	3	
<i>ondansetron hcl</i> SOLN 4mg/5ml	4	B/D
<i>ondansetron hcl</i> TABS 4mg, 8mg	3	B/D
<i>prochlorperazine</i> SUPP 25mg	4	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	4	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	2	
<i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
<i>scopolamine</i> PT72 1mg/3days	4	QL (10 patches / 30 days)
<b>ANTISPASMODICS</b>		
<i>dicyclomine hcl</i> CAPS 10mg; TABS 20mg	3	PA; PA applies if 65 years and older
<i>dicyclomine hcl</i> SOLN 10mg/5ml	4	PA; PA applies if 65 years and older
<i>glycopyrrolate</i> TABS 1mg	3	QL (90 tabs / 30 days)
<i>glycopyrrolate</i> TABS 2mg	3	QL (120 tabs / 30 days)
<b>H2-RECEPTOR ANTAGONISTS</b>		
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	3	
<i>famotidine</i> SUSR 40mg/5ml	4	
<i>famotidine</i> TABS 20mg, 40mg	1	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	3	
<i>nizatidine</i> CAPS 150mg, 300mg	4	
<b>INFLAMMATORY BOWEL DISEASE</b>		
<i>balsalazide disodium</i> CAPS 750mg	3	
<i>budesonide</i> CPEP 3mg	4	QL (90 caps / 30 days)
<i>budesonide</i> TB24 9mg	5	NDS, QL (30 tabs / 30 days), PA
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	4	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>mesalamine</i> CP24 .375gm	4	QL (120 caps / 30 days)
<i>mesalamine</i> CPDR 400mg	4	QL (180 caps / 30 days)
<i>mesalamine</i> ENEM 4gm	4	QL (1680 mL / 28 days)
<i>mesalamine</i> SUPP 1000mg	4	QL (30 suppositories / 30 days)
<i>mesalamine</i> TBEC 1.2gm	4	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser</i> KIT 4gm	4	QL (28 bottles / 28 days)
<i>sulfasalazine</i> TABS 500mg	2	
<i>sulfasalazine</i> TBEC 500mg	3	
<b>LAXATIVES</b>		
<i>constulose</i> SOLN 10gm/15ml	2	
<i>enulose</i> SOLN 10gm/15ml	2	
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>gavilyte-n/ flavor pack</i>	2	
<i>generlac</i> SOLN 10gm/15ml	2	
<i>lactulose</i> SOLN 10gm/15ml	2	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	2	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	
PLENVU SOL	4	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	3	
<b>MISCELLANEOUS</b>		
<i>alosetron hcl</i> TABS 1mg	5	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl</i> TABS .5mg	4	QL (60 tabs / 30 days), PA
CREON CAP 3000UNIT	3	
CREON CAP 6000UNIT	3	
CREON CAP 12000UNT	3	
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	
<i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml	4	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	4	
GATTEX KIT 5mg	5	NDS, NM, PA
LINZESS CAPS 72mcg, 145mcg, 290mcg	3	QL (30 caps / 30 days)
<i>loperamide hcl</i> CAPS 2mg	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lubiprostone</i> CAPS 8mcg, 24mcg	3	QL (60 caps / 30 days)
<i>misoprostol</i> TABS 100mcg, 200mcg	3	
MOVANTIK TABS 12.5mg, 25mg	3	QL (30 tabs / 30 days)
RELISTOR SOLN 12mg/0.6ml	5	NDS, QL (28 vials / 28 days), PA
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml	5	NDS, QL (28 syringes / 28 days), PA
<i>sucralfate</i> TABS 1gm	3	
<i>ursodiol</i> CAPS 300mg	4	
<i>ursodiol</i> TABS 250mg, 500mg	3	
VOQUEZNA PAK DUAL PAK	3	QL (2 kits / year), PA
VOQUEZNA PAK TRIP PK	3	QL (2 kits / year), PA
VOWST CAP	5	NDS, QL (12 caps / 30 days), NM, PA
XERMELO TABS 250mg	5	NDS, QL (84 tabs / 28 days), NM, PA
XIFAXAN TABS 550mg	5	NDS, PA
ZENPEP CAP 3000UNIT	4	
ZENPEP CAP 5000UNIT	4	
ZENPEP CAP 10000UNT	4	
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	
ZENPEP CAP 25000UNT	4	
ZENPEP CAP 40000UNT	4	
ZENPEP CAP 60000UNT	4	
<b>PROTON PUMP INHIBITORS</b>		
<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	3	QL (30 caps / 30 days), ST
<i>lansoprazole</i> CPDR 15mg, 30mg	3	QL (60 caps / 30 days)
<i>lansoprazole</i> TBDD 15mg, 30mg	4	QL (60 tabs / 30 days), ST
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	
<i>pantoprazole sodium</i> SOLR 40mg	4	
<i>pantoprazole sodium</i> TBEC 20mg, 40mg	1	
<i>rabeprazole sodium</i> TBEC 20mg	3	QL (30 tabs / 30 days)
<b>GENITOURINARY</b>		
<b>BENIGN PROSTATIC HYPERPLASIA</b>		
<i>alfuzosin hcl</i> TB24 10mg	2	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	3	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	3	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	1	QL (30 tabs / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>silodosin</i> CAPS 4mg, 8mg	3	QL (30 caps / 30 days)
<i>tadalafil</i> TABS 5mg	3	QL (30 tabs / 30 days), PA
<i>tamsulosin hcl</i> CAPS .4mg	1	QL (60 caps / 30 days)
<b>MISCELLANEOUS</b>		
<i>acetic acid</i> SOLN .25%	2	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	3	
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	3	
<b>URINARY ANTISPASMODICS</b>		
<i>darifenacin hydrobromide</i> TB24 7.5mg, 15mg	4	QL (30 tabs / 30 days), ST
<i>fesoterodine fumarate</i> TB24 4mg, 8mg	4	QL (30 tabs / 30 days)
GEMTESA TABS 75mg	3	QL (30 tabs / 30 days)
MYRBETRIQ SRER 8mg/ml	3	QL (300 mL / 28 days)
MYRBETRIQ TB24 25mg, 50mg	3	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SOLN 5mg/5ml	3	QL (600 mL / 30 days)
<i>oxybutynin chloride</i> TABS 5mg	3	QL (120 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 5mg	3	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	3	QL (60 tabs / 30 days)
<i>solifenacin succinate</i> TABS 5mg, 10mg	4	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	4	QL (30 caps / 30 days)
<i>tolterodine tartrate</i> TABS 1mg, 2mg	4	QL (60 tabs / 30 days)
<i>tropium chloride</i> CP24 60mg	4	QL (30 caps / 30 days)
<i>tropium chloride</i> TABS 20mg	3	QL (60 tabs / 30 days)
<b>VAGINAL ANTI-INFECTIVES</b>		
<i>clindamycin phosphate vaginal</i> CREA 2%	3	
<i>metronidazole vaginal</i> GEL .75%	3	
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	3	
<b>HEMATOLOGIC</b>		
<b>ANTICOAGULANTS</b>		
<i>dabigatran etexilate mesylate</i> CAPS 75mg, 150mg	3	QL (60 caps / 30 days)
<i>dabigatran etexilate mesylate</i> CAPS 110mg	3	QL (120 caps / 30 days)
ELIQUIS CPSP .15mg	3	QL (56 caps / 21 days)
ELIQUIS TABS 2.5mg	3	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	3	QL (74 tabs / 30 days)
ELIQUIS TBSO .5mg	3	QL (588 tabs / 29 days)
ELIQUIS (1.5MG PACK) 3 X TBSO .5mg	3	QL (591 tabs / 29 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ELIQUIS (2MG PACK) 4 X TBSO .5mg	3	QL (592 tabs / 30 days)
ELIQUIS STARTER PACK TBPK 5mg	3	QL (74 tabs / 30 days)
<i>enoxaparin sodium</i> SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	4	
<i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml	4	
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	5	NDS
HEP SOD/NAACL INJ 25000UNT	3	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	3	B/D
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
<i>rivaroxaban</i> SUSR 1mg/ml	3	QL (620 mL / 30 days)
<i>rivaroxaban</i> TABS 2.5mg	3	QL (60 tabs / 30 days)
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO TABS 2.5mg	3	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	3	QL (30 tabs / 30 days)
XARELTO STAR TAB 15/20MG	3	QL (51 tabs / 30 days)
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
FULPHILA SOSY 6mg/0.6ml	5	NDS, QL (2 syringes / 28 days), NM, PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	3	NM, PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	5	NDS, NM, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	5	NDS, NM, PA
<b>MISCELLANEOUS</b>		
ALVAIZ TABS 9mg, 54mg	5	NDS, QL (60 tabs / 30 days), NM, PA
ALVAIZ TABS 18mg, 36mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>anagrelide hcl</i> CAPS .5mg, 1mg	4	
BERINERT KIT 500unit	5	NDS, QL (24 boxes / 30 days), NM, PA
<i>cilostazol</i> TABS 50mg, 100mg	2	
DOPTELET TABS 20mg	5	NDS, NM, PA
DOPTELET SPRINKLE CPSP 10mg	5	NDS, NM, PA
DROXIA CAPS 200mg, 300mg, 400mg	4	
HAEGARDA SOLR 2000unit	5	NDS, QL (30 vials / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HAEGARDA SOLR 3000unit	5	NDS, QL (20 vials / 30 days), NM, PA
<i>icatibant acetate</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
<i>l-glutamine (sickle cell)</i> PACK 5gm	5	NDS, NM, PA
<i>pentoxifylline</i> TBCR 400mg	2	
<i>sajazir</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
SIKLOS TABS 100mg	4	
SIKLOS TABS 1000mg	5	NDS
TAVNEOS CAPS 10mg	5	NDS, QL (180 caps / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml	4	
<i>tranexamic acid</i> TABS 650mg	3	
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	4	
<i>clopidogrel bisulfate</i> TABS 75mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	3	PA; PA applies if 65 years and older
<i>prasugrel hcl</i> TABS 5mg, 10mg	3	
<i>ticagrelor</i> TABS 60mg, 90mg	3	
<b>IMMUNOLOGIC AGENTS</b>		
<b>AUTOIMMUNE AGENTS</b>		
ADALIMUMAB-BWWD SOAJ 40mg/0.4ml	5	NDS, QL (6 autoinjectors / 28 days), NM, PA
ADALIMUMAB-BWWD SOSY 40mg/0.4ml	5	NDS, QL (6 syringes / 28 days), NM, PA
BIMZELX SOAJ 160mg/ml, 320mg/2ml	5	NDS, QL (2 pens / 28 days), NM, PA
BIMZELX SOSY 160mg/ml, 320mg/2ml	5	NDS, QL (2 syringes / 28 days), NM, PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
ENBREL SOLN 25mg/0.5ml	5	NDS, QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	5	NDS, QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ENBREL MINI SOCT 50mg/ml	5	NDS, QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 syringes / 28 days), NM, PA
HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 autoinjectors / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	5	NDS, QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 syringes / 28 days), NM, PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN AJKT 80mg/0.8ml	5	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	5	NDS, QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	5	NDS, QL (3 pens / 28 days), NM, PA
INFLIXIMAB SOLR 100mg	5	NDS, NM, PA
KINERET SOSY 100mg/0.67ml	5	NDS, QL (28 syringes / 28 days), NM, PA
PYZCHIVA SOAJ 45mg/0.5ml	3	QL (1 pen / 28 days), NM, PA
PYZCHIVA SOAJ 90mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
PYZCHIVA SOLN 45mg/0.5ml	3	QL (1 vial / 28 days), NM, PA
PYZCHIVA SOLN 130mg/26ml	5	NDS, NM, PA
PYZCHIVA SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
PYZCHIVA SOSY 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
REMICADE SOLR 100mg	5	NDS, NM, PA
RENFLIXIS SOLR 100mg	5	NDS, NM, PA
RINVOQ TB24 15mg, 30mg	5	NDS, QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	5	NDS, QL (168 tabs / year), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RINVOQ LQ SOLN 1mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	5	NDS, QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	5	NDS, NM, PA
SKYRIZI SOSY 150mg/ml	5	NDS, QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	5	NDS, QL (6 pens / 365 days), NM, PA
SOTYKTU TABS 6mg	5	NDS, QL (30 tabs / 30 days), NM, PA
STELARA SOLN 45mg/0.5ml	5	NDS, QL (1 vial / 28 days), NM, PA
STELARA SOLN 130mg/26ml	5	NDS, NM, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOAJ 200mg/2ml	5	NDS, QL (2 pens / 28 days), NM, PA
TREMFYA SOLN 200mg/20ml	5	NDS, NM, PA
TREMFYA SOPN 100mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
TREMFYA SOSY 100mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOSY 200mg/2ml	5	NDS, QL (2 syringes / 28 days), NM, PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml	5	NDS, QL (2 pens / 28 days), NM, PA
TREMFYA PEN SOAJ 100mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
TYENNE SOAJ 162mg/0.9ml	5	NDS, QL (4 pens / 28 days), NM, PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	5	NDS, NM, PA
TYENNE SOSY 162mg/0.9ml	5	NDS, QL (4 syringes / 28 days), NM, PA
USTEKINUMAB SOLN 45mg/0.5ml	5	NDS, QL (1 vial / 28 days), NM, PA
USTEKINUMAB SOLN 130mg/26ml	5	NDS, NM, PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
VELSIPITY TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XELJANZ SOLN 1mg/ml	5	NDS, QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	5	NDS, QL (30 tabs / 30 days), NM, PA
YESINTEK SOLN 45mg/0.5ml	3	QL (1 vial / 28 days), NM, PA
YESINTEK SOLN 130mg/26ml	3	NM, PA
YESINTEK SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
YESINTEK SOSY 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
<b><i>DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)</i></b>		
<i>hydroxychloroquine sulfate</i> TABS 200mg	3	
JYLAMVO SOLN 2mg/ml	4	B/D
<i>leflunomide</i> TABS 10mg, 20mg	3	QL (30 tabs / 30 days)
<i>methotrexate sodium</i> TABS 2.5mg	3	
XATMEP SOLN 2.5mg/ml	4	B/D
<b><i>IMMUNOGLOBULINS</i></b>		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
BIVIGAM SOLN 5gm/50ml, 10%	5	NDS, NM, PA
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMASTAN INJ	4	B/D, NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
GAMMAGARD LIQUID ERC SOLN 5gm/50ml, 10gm/100ml	5	NDS, NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	5	NDS, NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA
<b>IMMUNOMODULATORS</b>		
ACTIMMUNE SOLN 100mcg/0.5ml	5	NDS, NM, PA
ARCALYST SOLR 220mg	5	NDS, NM, PA
<b>IMMUNOSUPPRESSANTS</b>		
ASTAGRAF XL CP24 5mg	5	NDS, B/D
ASTAGRAF XL CP24 .5mg, 1mg	4	B/D
azathioprine TABS 50mg	3	B/D
BENLYSTA SOAJ 200mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	5	NDS, NM, PA
BENLYSTA SOSY 200mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
<i>cyclosporine</i> CAPS 25mg, 100mg	4	B/D
<i>cyclosporine modified (for microemulsion)</i> CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	4	B/D
<i>everolimus (immunosuppressant)</i> TABS .5mg, .75mg, 1mg	5	NDS, B/D
<i>everolimus (immunosuppressant)</i> TABS .25mg	4	B/D
<i>engraf</i> CAPS 25mg, 100mg	4	B/D
<i>mycophenolate mofetil</i> CAPS 250mg; TABS 500mg	3	B/D
<i>mycophenolate mofetil</i> SUSR 200mg/ml	5	NDS, B/D
<i>mycophenolate sodium</i> TBEC 180mg, 360mg	4	B/D
NULOJIX SOLR 250mg	5	NDS, B/D
PROGRAF PACK .2mg, 1mg	4	B/D
REZUROCK TABS 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sirolimus</i> SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	4	B/D
<i>tacrolimus</i> CAPS .5mg, 1mg, 5mg	4	B/D
<b>VACCINES</b>		
ABRYSVO SOLR 120mcg/0.5ml	1	PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	PA
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOLE INJ INACTIVE	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml	1	QL (2 vials per lifetime)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SHINGRIX SUSY 50mcg/0.5ml	1	QL (2 syringes per lifetime)
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
VIMKUNYA SUSY 40mcg/0.8ml	1	
VIVOTIF CAP EC	1	
YF-VAX INJ	1	

## **NUTRITIONAL/SUPPLEMENTS**

### ***ELECTROLYTES/MINERALS, INJECTABLE***

D2.5W/NAACL INJ 0.45%	4	
D5W/NAACL INJ 0.2%	3	
D5W/NAACL INJ 0.45%	3	
D10W/NAACL INJ 0.2%	3	
D10W/NAACL INJ 0.45%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	3	
<i>dextrose 5% in lactated ringers</i>	3	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	3	
ISOLYTE-P INJ /D5W	4	
ISOLYTE-S INJ PH 7.4	4	
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	3	
<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	3	
KCL/D5W/NACL INJ 0.3/0.9%	4	
KCL/D5W/NACL INJ 0.15/0.2	3	
LACTATED RIN INJ	4	
<i>lactated ringer's solution</i>	3	
<i>magnesium sulfate SOLN 2gm/50ml, 3gm/100ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	3	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	3	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	3	
<i>multiple electrolytes ph 5.5</i>	4	
POT CHL 20MEQ/L IN NACL 0.9% INJ	4	
POT CHL 20MEQ/L IN NACL 0.45% INJ	4	
POT CHL 40MEQ/L IN NACL 0.9% INJ	4	
<i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml</i>	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	3	
<i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>	3	
TPN ELECTROL INJ	4	B/D
<b><i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i></b>		
<i>klor-con PACK 20meq</i>	4	
KLOR-CON 8 TBCR 8meq	2	
<i>klor-con 10 TBCR 10meq</i>	2	
KLOR-CON 10 TBCR 10meq	2	
<i>klor-con m10 TBCR 10meq</i>	2	
<i>klor-con m15 TBCR 15meq</i>	2	
<i>klor-con m20 TBCR 20meq</i>	2	
M-NATAL PLUS TAB	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>potassium chloride</i> CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq	2	
<i>potassium chloride</i> PACK 20meq; SOLN 10%, 20%	4	
<i>potassium chloride microencapsulated crystals</i> TBCR 10meq, 15meq, 20meq	2	
PRENATAL TAB 27-1MG	3	
PRENATAL TAB PLUS	3	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	2	
WESTAB PLUS TAB 27-1MG	3	
<b>IV NUTRITION</b>		
<i>aminosyn ii soln 15%</i>	4	B/D
AMINOSYN INJ 10%	4	B/D
AMINOSYN-PF INJ 10%	4	B/D
CLINIMIX INJ 4.25/D5W	4	B/D
CLINIMIX INJ 4.25/D10	4	B/D
CLINIMIX INJ 5%/D15W	4	B/D
CLINIMIX INJ 5%/D20W	4	B/D
CLINIMIX INJ 6/5	4	B/D
CLINIMIX INJ 8/10	4	B/D
CLINIMIX INJ 8/14	4	B/D
<i>clinisol sf 15%</i>	4	B/D
CLINOLIPID EMU 20%	4	B/D
<i>dextrose</i> SOLN 5%, 10%	3	
<i>dextrose</i> SOLN 50%	3	B/D
DEXTROSE 10% SOLN 10%	3	
DEXTROSE 70% SOLN 70%	3	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	4	B/D
NUTRILIPID EMUL 20gm/100ml	4	B/D
<i>plenamine</i>	4	B/D
PREMASOL SOL 10%	5	NDS, B/D
PROSOL INJ 20%	4	B/D
TRAVASOL INJ 10%	4	B/D
TROPHAMINE INJ 10%	4	B/D
<b>OPHTHALMIC</b>		
<b>ANTI-INFECTIVE/ANTI-INFLAMMATORY</b>		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	3	
<i>loteprednol etabonate-tobramycin ophth susp 0.5-0.3%</i>	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
<i>neomycin-polymyxin-hc ophth susp</i>	4	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2	
TOBRADEX OIN 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	3	
ZYLET SUS 0.5-0.3%	3	
<b>ANTI-INFECTIVES</b>		
<i>bacitracin-polymyxin b ophth oint</i>	2	
<i>besifloxacin hcl SUSP .6%</i>	3	
BESIVANCE SUSP .6%	3	
CILOXAN OINT .3%	3	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	2	
<i>erythromycin (ophth) OINT 5mg/gm</i>	2	
<i>gatifloxacin (ophth) SOLN .5%</i>	3	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	2	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	3	QL (12 mL / 30 days)
NATACYN SUSP 5%	4	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	3	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	3	
<i>ofloxacin (ophth) SOLN .3%</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) SOLN 10%</i>	3	
<i>tobramycin (ophth) SOLN .3%</i>	1	
<i>trifluridine SOLN 1%</i>	4	
XDEMY SOLN .25%	5	NDS, NM, PA
ZIRGAN GEL .15%	4	
<b>ANTI-INFLAMMATORIES</b>		
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	3	
<i>diclofenac sodium (ophth) SOLN .1%</i>	2	
<i>difluprednate EMUL .05%</i>	4	
<i>fluorometholone (ophth) SUSP .1%</i>	3	
<i>flurbiprofen sodium SOLN .03%</i>	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ketorolac tromethamine (ophth)</i> SOLN .4%	3	
<i>ketorolac tromethamine (ophth)</i> SOLN .5%	2	
LOTEMAX OINT .5%	3	
<i>prednisolone acetate (ophth)</i> SUSP 1%	3	
PREDNISOLONE SODIUM PHOSP SOLN 1%	3	
<b>ANTIALLERGICS</b>		
<i>azelastine hcl (ophth)</i> SOLN .05%	2	
<i>cromolyn sodium (ophth)</i> SOLN 4%	2	
ZERVIAE SOLN .24%	4	
<b>ANTI GLAUCOMA</b>		
<i>betaxolol hcl (ophth)</i> SOLN .5%	3	
<i>brimonidine tartrate</i> SOLN .2%	1	
<i>brinzolamide</i> SUSP 1%	4	ST
<i>carteolol hcl (ophth)</i> SOLN 1%	2	
COMBIGAN SOL 0.2/0.5%	3	
<i>dorzolamide hcl</i> SOLN 2%	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	2	
<i>latanoprost</i> SOLN .005%	1	
<i>levobunolol hcl</i> SOLN .5%	2	
LUMIGAN SOLN .01%	3	
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	3	
RHOPRESSA SOLN .02%	4	
ROCKLATAN DRO	4	
SIMBRINZA SUS 1-0.2%	4	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%	3	
<i>timolol maleate (ophth)</i> SOLN .25%, .5%	1	
<i>travoprost</i> SOLN .004%	4	
VYZULTA SOLN .024%	4	
<b>MISCELLANEOUS</b>		
ATROPINE SULFATE SOLN 1%	3	
<i>atropine sulfat (ophthalmic)</i> SOLN 1%	3	
CYSTADROPS SOLN .37%	5	NDS, NM, PA
CYSTARAN SOLN .44%	5	NDS, NM, PA
EYSUVIS SUSP .25%	4	
MIEBO SOLN 1.338gm/ml	3	
<i>proparacaine hcl</i> SOLN .5%	3	
RESTASIS EMUL .05%	3	
RESTASIS MULTIDOSE EMUL .05%	3	
XIIDRA SOLN 5%	3	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

Drug Name	Drug Tier	Requirements/Limits
<b>OTIC</b>		
<b>OTIC AGENTS</b>		
<i>acetic acid (otic) SOLN 2%</i>	3	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	4	
<i>flac OIL .01%</i>	3	
<i>fluocinolone acetonide (otic) OIL .01%</i>	3	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	4	
<i>neomycin-polymyxin-hc otic soln 1%</i>	3	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	3	
<i>ofloxacin (otic) SOLN .3%</i>	4	
<b>RESPIRATORY</b>		
<b>ANTICHOLINERGIC/BETA AGONIST COMBINATIONS</b>		
ANORO ELLIPT AER 62.5-25	3	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	3	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	4	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	3	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	3	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	3	QL (60 blisters / 30 days)
<b>ANTICHOLINERGICS</b>		
ATROVENT HFA AERS 17mcg/act	4	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	3	QL (30 blisters / 30 days)
<i>ipratropium bromide SOLN .02%</i>	2	B/D
<i>ipratropium bromide (nasal) SOLN .03%, .06%</i>	3	
<i>ipratropium bromide hfa AERS 17mcg/act</i>	4	QL (2 inhalers / 30 days)
SPIRIVA RESPIMAT AERS 1.25mcg/act	4	QL (1 inhaler / 30 days)
<b>ANTI-HISTAMINES</b>		
<i>azelastine hcl SOLN .1%</i>	2	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cetirizine hcl</i> SOLN 5mg/5ml	2	QL (300 mL / 30 days)
<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
<i>desloratadine</i> TABS 5mg	3	QL (30 tabs / 30 days)
<i>diphenhydramine hcl</i> SOLN 50mg/ml	3	
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml	4	PA; PA applies if 65 years and older
<i>hydroxyzine hcl</i> SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml	4	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride</i> TABS 5mg	2	QL (30 tabs / 30 days)
<i>olopatadine hcl (nasal)</i> SOLN .6%	4	
<b>BETA AGONISTS</b>		
<i>albuterol sulfate</i> AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	3	B/D
<i>albuterol sulfate</i> NEBU .083%	2	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml	3	
<i>albuterol sulfate</i> TABS 2mg, 4mg	4	
<i>arformoterol tartrate</i> NEBU 15mcg/2ml	4	B/D
<i>formoterol fumarate</i> NEBU 20mcg/2ml	4	B/D
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	4	B/D
<i>levalbuterol tartrate</i> AERO 45mcg/act	3	QL (2 inhalers / 30 days), ST

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SEREVENT DISKUS AEPB 50mcg/dose	3	QL (60 inhalations / 30 days)
<i>terbutaline sulfate</i> TABS 2.5mg, 5mg	4	
VENTOLIN HFA AERS 108mcg/act	3	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	3	QL (6 inhalers / 30 days)
<b>LEUKOTRIENE MODULATORS</b>		
<i>montelukast sodium</i> CHEW 4mg, 5mg	2	
<i>montelukast sodium</i> PACK 4mg	4	
<i>montelukast sodium</i> TABS 10mg	1	
<i>zafirlukast</i> TABS 10mg, 20mg	3	
<b>MISCELLANEOUS</b>		
<i>acetylcysteine</i> SOLN 10%, 20%	4	B/D
ALYFTREK TAB 4-20-50	5	NDS, QL (84 tabs / 28 days), NM, PA
ALYFTREK TAB 10-50-125	5	NDS, QL (56 tabs / 28 days), NM, PA
ARALAST NP SOLR 500mg, 1000mg	5	NDS, NM, PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	3	B/D
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml	3	(generic of EpiPen)
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml	3	(generic of Adrenaclick)
FASENRA SOSY 10mg/0.5ml, 30mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
FASENRA PEN SOAJ 30mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	5	NDS, QL (56 packets / 28 days), NM, PA
KALYDECO TABS 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>nintedanib esylate</i> CAPS 100mg, 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 75-94MG	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 100-125	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 150-188	5	NDS, QL (56 packets / 28 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ORKAMBI TAB 100-125	5	NDS, QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	5	NDS, QL (112 tabs / 28 days), NM, PA
<i>pirfenidone</i> CAPS 267mg	5	NDS, QL (270 caps / 30 days), NM, PA
<i>pirfenidone</i> TABS 267mg	5	NDS, QL (270 tabs / 30 days), NM, PA
<i>pirfenidone</i> TABS 534mg, 801mg	5	NDS, QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	5	NDS, NM, PA
PULMOZYME SOLN 2.5mg/2.5ml	5	NDS, NM, PA
<i>roflumilast</i> TABS 250mcg	4	QL (56 tabs / year)
<i>roflumilast</i> TABS 500mcg	4	QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	5	NDS, QL (56 tabs / 28 days), NM, PA
SYMDEKO TAB 100-150	5	NDS, QL (56 tabs / 28 days), NM, PA
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg	4	
<i>theophylline</i> TB24 400mg, 600mg	3	
TRIKAFTA PAK 59.5MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA PAK 75MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA TAB 50-25-37.5MG & 75MG	5	NDS, QL (84 tabs / 28 days), NM, PA
TRIKAFTA TAB 100-50-75MG & 150MG	5	NDS, QL (84 tabs / 28 days), NM, PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA
XOLAIR SOAJ 150mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
XOLAIR SOLR 150mg	5	NDS, QL (8 vials / 28 days), NM, PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
XOLAIR SOSY 150mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	5	NDS, NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>NASAL STEROIDS</b>		
<i>flunisolide (nasal) SOLN .025%</i>	3	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal) SUSP 50mcg/act</i>	2	QL (1 bottle / 30 days)
<i>mometasone furoate (nasal) SUSP 50mcg/act</i>	4	QL (2 bottles / 30 days)
XHANCE EXHU 93mcg/act	4	QL (32 mL / 30 days), PA
<b>STEROID INHALANTS</b>		
ALVESCO AERS 80mcg/act	4	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	4	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	3	QL (30 inhalations / 30 days)
<i>budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml</i>	4	B/D
<b>STEROID/BETA-AGONIST COMBINATIONS</b>		
ADVAIR HFA AER 45/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	3	QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	3	QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	3	QL (60 blisters / 30 days)
<i>breyana</i>	3	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	3	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	3	QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	4	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	3	QL (60 inhalations / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	3	QL (60 inhalations / 30 days)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	3	QL (60 inhalations / 30 days)
<i>wixela inhub</i>	3	QL (60 inhalations / 30 days)

## **TOPICAL**

### **DERMATOLOGY, ACNE**

<i>accutane CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>amnesteem CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	4	QL (46.6 gm / 30 days)
<i>claravis CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	3	QL (45 gm / 30 days)
<i>clindamycin phosphate (topical) GEL 1%</i>	3	QL (75 mL / 30 days), PA
<i>clindamycin phosphate (topical) LOTN 1%; SOLN 1%</i>	3	QL (60 mL / 30 days)
<i>ery PADS 2%</i>	3	QL (60 pledgets / 30 days)
<i>erythromycin (acne aid) GEL 2%</i>	3	QL (60 gm / 30 days)
<i>erythromycin (acne aid) SOLN 2%</i>	3	QL (60 mL / 30 days)
<i>isotretinoin CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>neufac</i>	3	QL (45 gm / 30 days)
<i>sulfacetamide sodium (acne) LOTN 10%</i>	4	QL (118 mL / 30 days)
<i>tretinoin CREA .025%, .05%, .1%; GEL .01%, .025%</i>	4	QL (45 gm / 30 days), PA
<i>twice-daily clindamycin phosphate (topical) GEL 1%</i>	3	QL (60 gm / 30 days)
<i>zenatane CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA

### **DERMATOLOGY, ANTIBIOTICS**

<i>gentamicin sulfate (topical) CREA .1%; OINT .1%</i>	3	QL (30 gm / 30 days)
<i>mupirocin OINT 2%</i>	2	QL (220 gm / 30 days)
<i>silver sulfadiazine CREA 1%</i>	2	
<i>ssd CREA 1%</i>	2	
<i>SULFAMYLON CREA 85mg/gm</i>	4	QL (453.6 gm / 30 days)

### **DERMATOLOGY, ANTIFUNGALS**

<i>ciclopirox GEL .77%</i>	3	QL (100 gm / 30 days)
<i>ciclopirox SHAM 1%</i>	3	QL (120 mL / 30 days)
<i>ciclopirox olamine CREA .77%</i>	3	QL (90 gm / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ciclopirox olamine</i> SUSP .77%	3	QL (60 mL / 30 days)
<i>clotrimazole (topical)</i> CREA 1%	2	QL (45 gm / 30 days)
<i>clotrimazole (topical)</i> SOLN 1%	3	QL (60 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	3	QL (45 gm / 30 days)
<i>econazole nitrate</i> CREA 1%	3	QL (85 gm / 30 days)
<i>ketconazole (topical)</i> CREA 2%	3	QL (60 gm / 30 days)
<i>ketconazole (topical)</i> SHAM 2%	2	QL (120 mL / 30 days)
<i>klayesta</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nyamyc</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	2	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	2	
<b>DERMATOLOGY, ANTIPSORIATICS</b>		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	4	PA
<i>calcipotriene</i> CREA .005%; OINT .005%	4	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	3	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	4	QL (120 gm / 30 days), PA
ENSTILAR AER	5	NDS, QL (120 gm / 30 days), PA
<i>methoxsalen rapid</i> CAPS 10mg	5	NDS
<i>tazarotene</i> CREA .05%, .1%	3	QL (60 gm / 30 days), PA
<b>DERMATOLOGY, CORTICOSTEROIDS</b>		
<i>ala-cort</i> CREA 1%	1	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	3	QL (60 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> CREA .05%	3	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> LOTN .05%	3	QL (120 mL / 30 days)
<i>betamethasone dipropionate (topical)</i> OINT .05%	4	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> CREA .05%	2	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> GEL .05%; OINT .05%	4	QL (120 gm / 30 days)

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>betamethasone dipropionate augmented</i> LOTN .05%	4	QL (120 mL / 30 days)
<i>betamethasone valerate</i> CREA .1%; OINT .1%	3	QL (120 gm / 30 days)
<i>betamethasone valerate</i> LOTN .1%	3	QL (120 mL / 30 days)
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%	4	QL (120 gm / 30 days)
<i>clobetasol propionate</i> SHAM .05%	4	QL (236 mL / 30 days)
<i>clobetasol propionate</i> SOLN .05%	4	QL (100 mL / 30 days)
<i>clobetasol propionate e</i> CREA .05%	4	QL (120 gm / 30 days)
<i>clodan</i> SHAM .05%	4	QL (236 mL / 30 days)
<i>fluocinolone acetonide</i> CREA .01%	4	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .025%	4	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> OIL .01%	3	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide</i> OINT .025%	3	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> SOLN .01%	4	QL (60 mL / 30 days)
<i>fluocinonide</i> CREA .05%, .1%	3	QL (120 gm / 30 days)
<i>fluocinonide</i> GEL .05%; OINT .05%	4	QL (60 gm / 30 days)
<i>fluocinonide</i> SOLN .05%	3	QL (60 mL / 30 days)
<i>fluocinonide emulsified base</i> CREA .05%	4	QL (120 gm / 30 days)
<i>fluticasone propionate</i> CREA .05%; OINT .005%	3	
<i>halobetasol propionate</i> CREA .05%; OINT .05%	4	QL (50 gm / 30 days)
<i>hydrocortisone (topical)</i> CREA 1%	1	
<i>hydrocortisone (topical)</i> CREA 2.5%; LOTN 2.5%; OINT 2.5%	2	
<i>hydrocortisone (topical)</i> OINT 1%	2	QL (30 gm / 30 days)
<i>hydrocortisone valerate</i> CREA .2%	3	QL (60 gm / 30 days)
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	3	
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5%	2	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%	3	
<i>triamcinolone acetonide (topical)</i> OINT .025%, .1%, .5%	2	
<i>triderm</i> CREA .5%	2	QL (454 gm / 30 days)
<b>DERMATOLOGY, LOCAL ANESTHETICS</b>		
<i>glydo</i> PRSY 2%	3	QL (60 mL / 30 days), PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lidocaine</i> OINT 5%	4	QL (50 gm / 30 days), PA
<i>lidocaine</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>lidocaine hcl</i> SOLN 4%	3	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	B/D, QL (30 gm / 30 days)
<i>lidocan</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>tridacaine ii</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<b>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</b>		
<i>azelaic acid</i> GEL 15%	4	QL (50 gm / 30 days)
<i>bexarotene (topical)</i> GEL 1%	5	NDS, QL (60 gm / 30 days), NM, PA
<i>diclofenac sodium (topical)</i> SOLN 1.5%	3	QL (300 mL / 28 days)
EUCRISA OINT 2%	4	QL (120 gm / 30 days), PA
<i>fluorouracil (topical)</i> CREA 5%	4	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	3	QL (10 mL / 30 days)
<i>hydrocortisone (rectal)</i> CREA 1%, 2.5%	3	
<i>imiquimod</i> CREA 5%	3	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	2	
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	3	QL (45 gm / 30 days)
<i>metronidazole (topical)</i> LOTN .75%	4	QL (59 mL / 30 days)
<i>nitroglycerin (intra-anal)</i> OINT .4%	4	QL (30 gm / 30 days)
PANRETIN GEL .1%	5	NDS, QL (60 gm / 30 days), PA
<i>pimecrolimus</i> CREA 1%	4	QL (100 gm / 30 days), PA
<i>podofilox</i> SOLN .5%	3	QL (7 mL / 28 days)
<i>procto-med hc</i> CREA 2.5%	3	
<i>proctocort</i> CREA 1%	3	
<i>proctosol hc</i> CREA 2.5%	3	
<i>proctozone-hc</i> CREA 2.5%	3	
<i>tacrolimus (topical)</i> OINT .03%, .1%	4	QL (100 gm / 30 days), PA
VALCHLOR GEL .016%	5	NDS, QL (60 gm / 30 days), NM, PA

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

**DERMATOLOGY, SCABICIDES AND PEDICULIDES**

<i>malathion</i> LOTN .5%	4	QL (59 mL / 30 days)
<i>permethrin</i> CREA 5%	3	QL (60 gm / 30 days)

**DERMATOLOGY, WOUND CARE AGENTS**

SANTYL OINT 250unit/gm	4	QL (180 gm / 30 days), PA
<i>sodium chloride (gu irrigant)</i> SOLN .9%	3	
<i>water for irrigation, sterile irrigation soln</i>	2	

**MOUTH/THROAT/DENTAL AGENTS**

<i>cevimeline hcl</i> CAPS 30mg	4	
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	1	
<i>clotrimazole</i> TROC 10mg	3	QL (150 lozenges / 30 days)
<i>kourzeq</i> PSTE .1%	3	
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	2	
<i>nystatin (mouth-throat)</i> SUSP 100000unit/ml	2	
<i>periogard</i> SOLN .12%	1	
<i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg	3	
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	3	

**PART B**

**DIABETIC METERS AND TEST STRIPS**

DEXCOM G6 MIS RECEIVER	0	PA
DEXCOM G6 MIS SENSOR	0	PA
DEXCOM G6 MIS TRANSMIT	0	PA
DEXCOM G7 MIS RECEIVER	0	PA
DEXCOM G7 MIS SENSOR	0	PA
FREESTYLE LB KIT 2/SENSOR	0	PA
FREESTYLE LB KIT 3/SENSOR	0	PA
FREESTYLE LB KIT 14D/SEN	0	PA
FREESTYLE LB MIS 2/READER	0	PA
FREESTYLE LB MIS 3/READER	0	PA
FREESTYLE MIS READER	0	PA
TRUE METRIX KIT AIR	0	
TRUE METRIX KIT METER	0	
TRUE METRIX STRIPS	0	

Per informazioni sul significato dei simboli e delle abbreviazioni presenti in questa tabella, consultare numero pagina 9

06/01/2026

## Indice dei farmaci

<b>A</b>		
<i>abacavir sulfate</i> .....	15	ADMELOG SOLOSTAR 63
<i>abacavir sulfate-</i> <i>lamivudine tab 600-</i> <i>300 mg</i> .....	16	ADVAIR HFA AER 115/21 .....
<i>abigale</i> .....	70	ADVAIR HFA AER 230/21 .....
<i>abigale lo</i> .....	70	ADVAIR HFA AER 45/21 .....
ABILIFY ASIMTUFII ...	47	<i>afirmelle</i> .....
ABILIFY MAINTENA ...	47	AIMOVIG .....
<i>abiraterone acetate</i> ...	23	AIRSUPRA AER 90- 80MCG .....
<i>abirtega</i> .....	23	AKEEGA TAB 100/500 23
ABRYSVO .....	84	AKEEGA TAB 50/500MG .....
<i>acamprosate calcium</i> . 60		<i>ala-cort</i> .....
<i>acarbose</i> .....	61	<i>albendazole</i> .....
<i>accutane</i> .....	96	<i>albuterol sulfate</i> .....
<i>acebutolol hcl</i> .....	40	<i>alclometasone</i> <i>dipropionate</i> .....
<i>acetaminophen w/</i> <i>codeine soln 120-12</i> <i>mg/5ml</i> .....	11	ALCOHOL SWABS: EMBECTA- BD/MHC/RUGBY .....
<i>acetaminophen w/</i> <i>codeine tab 300-15</i> <i>mg</i> .....	11	ALDURAZYME .....
<i>acetaminophen w/</i> <i>codeine tab 300-30</i> <i>mg</i> .....	11	ALECENSA .....
<i>acetaminophen w/</i> <i>codeine tab 300-60</i> <i>mg</i> .....	11	<i>alendronate sodium</i> ... 64
<i>acetazolamide</i> .....	41	<i>alfuzosin hcl</i> .....
<i>acetic acid</i> .....	78	<i>aliskiren fumarate</i> .....
<i>acetic acid (otic)</i> .....	91	<i>allopurinol</i> .....
<i>acetylcysteine</i> .....	93	<i>alose tron hcl</i> .....
<i>acitretin</i> .....	97	<i>alprazolam</i> .....
ACTHIB INJ.....	85	<i>altavera</i> .....
ACTIMMUNE.....	84	ALUNBRIG .....
<i>acyclovir</i> .....	17	ALUNBRIG PAK .....
<i>acyclovir sodium</i> .....	17	ALVAIZ.....
ADACEL INJ .....	85	ALVESCO .....
ADALIMUMAB-BWWD 80		<i>alyacen 1/35</i> .....
<i>adefovir dipivoxil</i> .....	17	<i>alyacen 7/7/7</i> .....
ADEMPAS .....	43	ALYFTREK TAB 10-50- 125 .....
ADMELOG .....	63	ALYFTREK TAB 4-20-50 .....
		ALYGLO .....
		<i>alyq</i> .....
		<i>amantadine hcl</i> .....
		<i>ambrisentan</i> .....
		<i>amethyst</i> .....
		<i>amikacin sulfate</i> .....
		<i>amiloride &amp;</i> <i>hydrochlorothiazide</i> <i>tab 5-50 mg</i> .....
		<i>amiloride hcl</i> .....
		<i>aminosyn ii soln 15%</i> .88
		AMINOSYN INJ 10% ..88
		AMINOSYN-PF INJ 10% .....
		<i>amiodarone hcl</i> .....
		<i>amitriptyline hcl</i> .....
		<i>amlodipine besylate</i> ... 40
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 10-10 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 10-20 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 10-40 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 10-80 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 2.5-10 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 2.5-20 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 2.5-40 mg</i> .....
		<i>amlodipine besylate-</i> <i>atorvastatin calcium</i> <i>tab 5-10 mg</i> .....

<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i> .....	42	<i>amlodipine besylate-valsartan tab 10-320 mg</i> .....	36	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> ..	56
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i> .....	42	<i>amlodipine besylate-valsartan tab 5-160 mg</i> .....	36	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> ..	56
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i> .....	42	<i>amlodipine besylate-valsartan tab 5-320 mg</i> .....	36	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i> ...	56
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i> .....	35	<i>amnestem</i> .....	96	<i>amphetamine-dextroamphetamine tab 10 mg</i> .....	56
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i> .....	35	<i>amoxicillin</i> .....	20	<i>amphetamine-dextroamphetamine tab 12.5 mg</i> .....	56
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i> .....	34	<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i> ...	20	<i>amphetamine-dextroamphetamine tab 15 mg</i> .....	56
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i> .....	34	<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i> ...	20	<i>amphetamine-dextroamphetamine tab 20 mg</i> .....	56
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i> .....	34	<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i> .....	20	<i>amphetamine-dextroamphetamine tab 30 mg</i> .....	56
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i> .....	34	<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> ...	20	<i>amphetamine-dextroamphetamine tab 5 mg</i> .....	56
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i> .....	36	<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i> .....	20	<i>amphetamine-dextroamphetamine tab 7.5 mg</i> .....	56
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i> .....	36	<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i> .....	20	<i>amphotericin b</i> .....	14
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i> .....	36	<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i> .....	20	<i>amphotericin b liposome</i> .....	14
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i> .....	36	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> .	56	<i>ampicillin</i> .....	20
<i>amlodipine besylate-valsartan tab 10-160 mg</i> .....	36	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> .	56	<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i> .....	20
		<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> .	56	<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i> .....	20
				<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i> .....	20

<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i> .....	20	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	15	BARACLUDGE .....	17
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i> .....	20	<i>atovaquone-proguanil hcl tab 62.5-25 mg.</i>	15	BCG VACCINE.....	85
<i>ampicillin sodium</i> .....	20	ATROPINE SULFATE ..	90	<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	35
<i>anagrelide hcl</i> .....	79	<i>atropine sulfate (ophthalmic)</i> .....	90	<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	35
<i>anastrozole</i> .....	23	ATROVENT HFA .....	91	<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	35
ANORO ELLIPT AER 62.5-25 .....	91	<i>aubra eq</i> .....	66	<i>benazepril &amp; hydrochlorothiazide tab 5-6.25mg</i> .....	35
<i>aprepitant</i> .....	74	AUGTYRO .....	25	<i>benazepril hcl</i> .....	35
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i> .....	74	<i>aurovela 1/20</i> .....	66	BENDAMUSTINE HYDROCHLORID.....	21
<i>apri</i> .....	66	<i>aurovela 24 fe</i> .....	66	BENDEKA .....	21
APTIOM.....	51	<i>aurovela fe 1.5/30</i> ....	66	BENLYSTA.....	84
APTIVUS.....	15	<i>aurovela fe 1/20</i> .....	66	<i>benzoyl peroxide-erythromycin gel 5-3%</i> .....	96
ARALAST NP .....	93	AUSTEDO .....	58	<i>benztropine mesylate</i> .46	
<i>aranelle</i> .....	66	AUSTEDO XR.....	58	BERINERT .....	79
ARCALYST .....	84	AUSTEDO XR TAB TITR KIT .....	58	<i>besifloxacin hcl</i> .....	89
AREXVY.....	85	AUVELITY TAB 45-105MG.....	45	BESIVANCE .....	89
<i>arformoterol tartrate</i> .	92	<i>aviane</i> .....	66	BESREMI.....	24
ARIKAYCE.....	12	AVMAPKI PAK FAKZYNJA .....	25	<i>betaine powder for oral solution</i> .....	72
<i>aripiprazole</i> .....	47, 48	<i>ayuna</i> .....	66	<i>betamethasone dipropionate (topical)</i> .....	97
ARISTADA .....	48	AYVAKIT .....	25	<i>betamethasone augmented</i> .....	97, 98
ARISTADA INITIO .....	48	<i>azacitidine</i> .....	22	<i>betamethasone valerate</i> .....	98
<i>armodafinil</i> .....	60	<i>azathioprine</i> .....	84	BETASERON .....	59
ARNUITY ELLIPTA .....	95	<i>azelaic acid</i> .....	99	<i>betaxolol hcl (ophth)</i> .90	
<i>asenapine maleate</i> ....	48	<i>azelastine hcl</i> .....	91	<i>bethanechol chloride</i> ..	78
<i>ashlyna</i> .....	66	<i>azelastine hcl (ophth)</i>	90	BEVESPI AER 9-4.8MCG .....	91
<i>aspirin-dipyridamole cap er 12hr 25-200 mg.</i>	80	<i>azithromycin</i> .....	19	<i>bexarotene</i> .....	24
ASTAGRAF XL .....	84	<i>aztreonam</i> .....	12	<i>bexarotene (topical)</i> ..	99
<i>atazanavir sulfate</i> .....	15	<i>azurette</i> .....	66		
<i>atenolol</i> .....	40	<b>B</b>			
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i> .....	39	<i>bacitracin-polymyxin b ophth oint</i> .....	89		
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i> .....	39	<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i> .....	88		
<i>atomoxetine hcl</i> .....	56	<i>baclofen</i> .....	59		
<i>atorvastatin calcium</i> ..	38	BAFIERTAM .....	59		
<i>atovaquone</i> .....	12	<i>balsalazide disodium</i> .	75		
		BALVERSA .....	26		
		<i>balziva</i> .....	66		

BEXSERO .....	85	<i>briellyn</i> .....	66	<i>buspirone hcl</i> .....	44
<i>bicalutamide</i> .....	23	<i>brimonidine tartrate</i> ..	90	<i>butorphanol tartrate</i> ..	11
BICILLIN L-A.....	20	<i>brinzolamide</i> .....	90	<b>C</b>	
BIKTARVY TAB 30-120- 15 MG .....	16	<i>brivaracetam</i> .....	51	<i>cabergoline</i> .....	72
BIKTARVY TAB 50-200- 25 MG .....	16	BRIVIACT .....	51	CABOMETYX .....	26
BILDYOS .....	64	<i>bromocriptine mesylate</i> .....	46	<i>calcipotriene</i> .....	97
BIMZELX .....	80	BRUKINSA .....	26	<i>calcitonin (salmon)</i> <i>spray</i> .....	64
<i>bisoprolol &amp;</i> <i>hydrochlorothiazide</i> <i>tab 10-6.25 mg</i> ....	39	<i>budesonide</i> .....	75	<i>calcitrene</i> .....	97
<i>bisoprolol &amp;</i> <i>hydrochlorothiazide</i> <i>tab 2.5-6.25 mg</i> ....	39	<i>budesonide (inhalation)</i> .....	95	<i>calcitriol</i> .....	74
<i>bisoprolol &amp;</i> <i>hydrochlorothiazide</i> <i>tab 5-6.25 mg</i> .....	39	<i>budesonide-formoterol</i> <i>fumarate dihyd</i> <i>aerosol 160-4.5</i> <i>mcg/act</i> .....	95	<i>calcitriol (oral)</i> .....	74
<i>bisoprolol fumarate</i> ...	40	<i>budesonide-formoterol</i> <i>fumarate dihyd</i> <i>aerosol 80-4.5</i> <i>mcg/act</i> .....	95	CALQUENCE .....	26
BIVIGAM .....	83	<i>bumetanide</i> .....	41	<i>camila</i> .....	66
<i>blisovi 24 fe</i> .....	66	<i>buprenorphine</i> .....	10	<i>camrese</i> .....	66
<i>blisovi fe 1.5/30</i> .....	66	<i>buprenorphine hcl</i> .....	60	<i>camrese lo</i> .....	66
<i>blisovi fe 1/20</i> .....	66	<i>buprenorphine hcl-</i> <i>naloxone hcl sl film</i> <i>12-3 mg (base equiv)</i> .....	60	<i>candesartan cilexetil</i> ..	37
BLUJEPa.....	12	<i>buprenorphine hcl-</i> <i>naloxone hcl sl film</i> <i>0.5 mg (base equiv)</i> 60		<i>candesartan cilexetil-</i> <i>hydrochlorothiazide</i> <i>tab 16-12.5 mg</i> .....	36
BONSITY .....	64	<i>buprenorphine hcl-</i> <i>naloxone hcl sl film 2-</i> <i>0.5 mg (base equiv)</i> 60		<i>candesartan cilexetil-</i> <i>hydrochlorothiazide</i> <i>tab 32-12.5 mg</i> .....	36
BOOSTRIX INJ.....	85	<i>buprenorphine hcl-</i> <i>naloxone hcl sl film 4-</i> <i>1 mg (base equiv)</i> ..	60	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide</i> <i>tab 32-25 mg</i> .....	36
<i>bortezomib</i> .....	26	<i>buprenorphine hcl-</i> <i>naloxone hcl sl film 8-</i> <i>2 mg (base equiv)</i> ..	60	CAPLYTA .....	48
BOORTEZOMIB.....	26	<i>buprenorphine hcl-</i> <i>naloxone hcl sl tab 2-</i> <i>0.5 mg (base equiv)</i> 60		CAPRELSA.....	26
<i>bosentan</i> .....	43	<i>buprenorphine hcl-</i> <i>naloxone hcl sl tab 8-2</i> <i>mg (base equiv)</i> .....	61	<i>captopril</i> .....	35
BOSULIF .....	26	<i>bupropion hcl</i> .....	45	<i>captopril &amp;</i> <i>hydrochlorothiazide</i> <i>tab 25-15 mg</i> .....	35
BRAFTOVI.....	26	<i>bupropion hcl (smoking</i> <i>deterrent)</i> .....	61	<i>captopril &amp;</i> <i>hydrochlorothiazide</i> <i>tab 25-25 mg</i> .....	35
BREO ELLIPTA INH 100- 25 .....	95			<i>captopril &amp;</i> <i>hydrochlorothiazide</i> <i>tab 50-15 mg</i> .....	35
BREO ELLIPTA INH 200- 25 .....	95			<i>carb/levo orally</i> <i>disintegrating tab 10-</i> <i>100mg</i> .....	46
BREO ELLIPTA INH 50- 25MCG .....	95				
<i>breyna</i> .....	95				
BREZTRI AERO AER SPHERE .....	91				
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) .....	91				

<i>carb/levo orally</i>	<i>cefaclor</i> ..... 18	<i>chloroquine phosphate</i>
<i>disintegrating tab 25-</i>	<i>cefadroxil</i> ..... 18	..... 15
100mg ..... 46	CEFAZOLIN ..... 18	<i>chlorpromazine hcl</i> .... 48
<i>carb/levo orally</i>	CEFAZOLIN INJ	<i>chlorthalidone</i> ..... 41
<i>disintegrating tab 25-</i>	1GM/50ML ..... 18	<i>cholestyramine</i> ..... 39
250mg ..... 47	<i>cefazolin sodium</i> ..... 18	<i>cholestyramine light</i> .. 39
<i>carbamazepine</i> ..... 51	CEFAZOLIN SOLN	<i>choline fenofibrate</i> ..... 38
<i>carbidopa</i> ..... 47	2GM/100ML-4%..... 18	<i>ciclopirox</i> ..... 96
<i>carbidopa &amp; levodopa</i>	CEFAZOLIN/DEX SOL	<i>ciclopirox olamine</i> 96, 97
<i>tab 10-100 mg</i> ..... 47	1GM/50ML-4% ..... 18	<i>cilostazol</i> ..... 79
<i>carbidopa &amp; levodopa</i>	CEFAZOLIN/DEX SOL	CILOXAN..... 89
<i>tab 25-100 mg</i> ..... 47	2GM/50ML-3% ..... 18	CIMDUO TAB 300-300 16
<i>carbidopa &amp; levodopa</i>	CEFAZOLIN/DEX SOL	<i>cinacalcet hcl</i> ..... 72
<i>tab 25-250 mg</i> ..... 47	3GM/150ML-4%..... 19	CIPRO ..... 19
<i>carbidopa &amp; levodopa</i>	CEFAZOLIN/DEX SOL	<i>ciprofloxacin 200</i>
<i>tab er 25-100 mg</i> .. 47	3GM/50ML-2% ..... 19	<i>mg/100ml in d5w</i> ... 20
<i>carbidopa &amp; levodopa</i>	<i>cefdinir</i> ..... 19	<i>ciprofloxacin 400</i>
<i>tab er 50-200 mg</i> .. 47	<i>cefepime hcl</i> ..... 19	<i>mg/200ml in d5w</i> ... 20
<i>carbidopa-levodopa-</i>	<i>cefixime</i> ..... 19	<i>ciprofloxacin hcl</i> ..... 20
<i>entacapone tabs 12.5-</i>	<i>cefotetan disodium</i> .... 19	<i>ciprofloxacin hcl (ophth)</i>
50-200 mg..... 47	<i>cefoxitin sodium</i> ..... 19	..... 89
<i>carbidopa-levodopa-</i>	<i>cefpodoxime proxetil</i> . 19	<i>ciprofloxacin-</i>
<i>entacapone tabs</i>	<i>cefprozil</i> ..... 19	<i>dexamethasone otic</i>
18.75-75-200 mg .. 47	<i>ceftaroline fosamil</i> .... 19	<i>susp 0.3-0.1%</i> ..... 91
<i>carbidopa-levodopa-</i>	<i>ceftazidime</i> ..... 19	<i>cisplatin</i> ..... 22
<i>entacapone tabs 25-</i>	<i>ceftriaxone sodium</i> .... 19	<i>citalopram</i>
100-200 mg ..... 47	<i>cefuroxime axetil</i> ..... 19	<i>hydrobromide</i> ..... 45
<i>carbidopa-levodopa-</i>	<i>cefuroxime sodium</i> .... 19	<i>claravis</i> ..... 96
<i>entacapone tabs</i>	<i>celecoxib</i> ..... 10	<i>clarithromycin</i> ..... 19
31.25-125-200 mg. 47	<i>cephalexin</i> ..... 19	<i>clindamycin hcl</i> ..... 12
<i>carbidopa-levodopa-</i>	CEQR SIMPL KIT	<i>clindamycin palmitate</i>
<i>entacapone tabs 37.5-</i>	PATCH 2U (3-DAY) . 63	<i>hydrochloride</i> ..... 12
150-200 mg ..... 47	CEQR SIMPL KIT	<i>clindamycin phosphate</i>
<i>carbidopa-levodopa-</i>	PATCH 2U (4-DAY) . 63	..... 12
<i>entacapone tabs 50-</i>	CEQR SIMPL MIS	<i>clindamycin phosphate</i>
200-200 mg ..... 47	INSERTER ..... 63	<i>(topical)</i> ..... 96
<i>carboplatin</i> ..... 22	CERDELGA ..... 72	<i>clindamycin phosphate</i>
<i>carglumic acid</i> ..... 72	CEREZYME ..... 72	<i>in d5w iv soln 300</i>
<i>carisoprodol</i> ..... 59	<i>cetirizine hcl</i> ..... 92	<i>mg/50ml</i> ..... 12
<i>carteolol hcl (ophth)</i> .. 90	<i>cevimeline hcl</i> ..... 100	<i>clindamycin phosphate</i>
<i>cartia xt</i> ..... 40	<i>chateal eq</i> ..... 66	<i>in d5w iv soln 600</i>
<i>carvedilol</i> ..... 40	CHEMET ..... 65	<i>mg/50ml</i> ..... 12
<i>caspofungin acetate</i> .. 14	<i>chlorhexidine gluconate</i>	
CAYSTON ..... 12	<i>(mouth-throat)</i> .... 100	

<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i> .....	12	<i>clotrimazole w/ betamethasone cream 1-0.05%</i> .....	97	CRESEMBA .....	14
<i>clindamycin phosphate vaginal</i> .....	78	<i>clozapine</i> .....	48	<i>cromolyn sodium</i> .....	93
<i>clindamycin phosph- benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> .....	96	COARTEM TAB 20- 120MG.....	15	<i>cromolyn sodium (mastocytosis)</i> .....	76
CLINDMYC/NAC INJ 300/50ML .....	12	COBENFY CAP 100- 20MG .....	48	<i>cromolyn sodium (ophth)</i> .....	90
CLINDMYC/NAC INJ 600/50ML .....	12	COBENFY CAP 125- 30MG .....	48	<i>cryselle</i> .....	66
CLINDMYC/NAC INJ 900/50ML .....	12	COBENFY CAP 50-20MG .....	48	<i>cyclobenzaprine hcl</i> ...	60
CLINIMIX INJ 4.25/D10 .....	88	COBENFY STRT CAP PACK.....	48	<i>cyclophosphamide</i> .....	22
CLINIMIX INJ 4.25/D5W .....	88	<i>colchicine</i> .....	10	CYCLOPHOSPHAMIDE 22 MONOHYDR .....	22
CLINIMIX INJ 5%/D15W .....	88	<i>colchicine w/ probenecid tab 0.5-500 mg</i> .....	10	<i>cycloserine</i> .....	17
CLINIMIX INJ 5%/D20W .....	88	<i>colesevelam hcl</i> .....	39	<i>cyclosporine</i> .....	84
CLINIMIX INJ 6/5 .....	88	<i>colestipol hcl</i> .....	39	<i>cyclosporine modified (for microemulsion)</i>	84
CLINIMIX INJ 8/10....	88	<i>colistimethate sodium</i>	12	<i>cyproheptadine hcl</i> ....	92
CLINIMIX INJ 8/14....	88	COMBIGAN SOL 0.2/0.5% .....	90	<i>cyred eq</i> .....	66
<i>clinisol sf 15%</i> .....	88	COMBIVENT AER 20-100 .....	91	CYSTADROPS .....	90
CLINOLIPID EMU 20%	88	COMETRIQ (60MG DOSE) .....	26	CYSTAGON.....	72
<i>clobazam</i> .....	51	COMETRIQ KIT 100MG .....	26	CYSTARAN .....	90
<i>clobetasol propionate</i>	98	COMETRIQ KIT 140MG .....	26	<i>cytarabine</i> .....	22
<i>clobetasol propionate e</i> .....	98	<i>compro</i> .....	74	<b>D</b>	
<i>clodan</i> .....	98	<i>constulose</i> .....	76	D10W/NACL INJ 0.2% 86 D10W/NACL INJ 0.45% .....	86
<i>clomipramine hcl</i> .....	45	COPAXONE.....	59	D2.5W/NACL INJ 0.45% .....	86
<i>clonazepam</i> .....	51	COPIKTRA.....	26	D5W/NACL INJ 0.2% .86 D5W/NACL INJ 0.45% 86	
<i>clonidine</i> .....	42	CORLANOR .....	42	<i>dabigatran etexilate mesylate</i> .....	78
<i>clonidine hcl</i> .....	42	COTELLIC .....	26	<i>dalfampridine</i> .....	59
<i>clopidogrel bisulfate</i> ..	80	CREON CAP 12000UNT .....	76	<i>danazol</i> .....	61
<i>clorazepate dipotassium</i> .....	51	CREON CAP 24000UNT .....	76	<i>dantrolene sodium</i> .....	60
<i>clotrimazole</i> .....	100	CREON CAP 3000UNIT76 .....	76	DANZITEN.....	26
<i>clotrimazole (topical)</i> .	97	CREON CAP 36000UNT .....	76	<i>dapagliflozin</i> .....	61
		CREON CAP 6000UNIT76 .....	76	<i>dapagliflozin free base- metformin hcl tab er 24hr 10-1000 mg</i> ...	61
				<i>dapagliflozin free base- metformin hcl tab er 24hr 10-500 mg</i> .....	61

<i>dapagliflozin free base- metformin hcl tab er 24hr 5-1000 mg ....</i>	DEXAMETHASONE INTENSOL.....	<i>diclofenac sodium (ophth) .....</i>
61	71	89
<i>dapagliflozin free base- metformin hcl tab er 24hr 5-500 mg .....</i>	<i>dexamethasone sodium phosphate.....</i>	<i>diclofenac sodium (topical) .....</i>
61	71	99
<i>dapsone .....</i>	<i>dexamethasone sodium phosphate (ophth) .</i>	<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg .....</i>
12	89	10
DAPTACEL INJ.....	DEXCOM G6 MIS RECEIVER .....	10
85	100	<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg .....</i>
<i>daptomycin.....</i>	DEXCOM G6 MIS SENSOR.....	10
12	100	21
DAPTOMYCIN .....	DEXCOM G6 MIS TRANSMIT.....	75
12	100	19
<i>darifenacin hydrobromide.....</i>	DEXCOM G7 MIS RECEIVER .....	10
78	100	89
<i>darunavir .....</i>	DEXCOM G7 MIS SENSOR.....	42
15	100	58
<i>dasatinib .....</i>	<i>dexmethylphenidate hcl .....</i>	52
27	56	40
<i>dasetta 1/35.....</i>	<i>dextrose .....</i>	40
66	88	40
<i>dasetta 7/7/7.....</i>	DEXTROSE 10% .....	40
66	88	40
DAURISMO .....	<i>dextrose 2.5% w/ sodium chloride 0.45% .....</i>	40
27	86	40
<i>daysee .....</i>	<i>dextrose 5% in lactated ringers.....</i>	40
66	86	40
DAYVIGO.....	<i>dextrose 5% w/ sodium chloride 0.225% ....</i>	40
57	86	40
<i>deblitane .....</i>	<i>dextrose 5% w/ sodium chloride 0.3% .....</i>	40
66	86	40
<i>deferasirox .....</i>	<i>dextrose 5% w/ sodium chloride 0.45% .....</i>	40
65	86	40
DELSTRIGO TAB.....	<i>dextrose 5% w/ sodium chloride 0.9% .....</i>	40
16	86	40
DENGVAXIA SUS .....	DEXTROSE 70% .....	40
85	88	40
DEPO-SUBQ PROVERA 104.....	DIACOMIT.....	40
66	52	40
<i>depo-testosterone ....</i>	<i>diazepam.....</i>	40
61	52	40
DESCOVY TAB 120- 15MG .....	<i>diazepam (anticonvulsant).....</i>	40
16	52	40
DESCOVY TAB 200/25MG.....	<i>diazepam inj .....</i>	40
16	52	40
<i>desipramine hcl .....</i>	<i>diazepam intensol .....</i>	40
45	52	40
<i>desloratadine .....</i>	<i>diazoxide .....</i>	40
92	72	40
<i>desmopressin acetate</i>	<i>diclofenac potassium .</i>	40
72	10	40
<i>desmopressin acetate spray .....</i>	<i>diclofenac sodium .....</i>	40
72	10	40
<i>desmopressin acetate spray refrigerated ..</i>		40
72		40
<i>desogest-eth estrad &amp; eth estrad tab 0.15- 0.02/0.01 mg(21/5)</i>		40
66		40
<i>desvenlafaxine succinate .....</i>		40
45		40
<i>dexamethasone .....</i>		40
71		40

DOPTELET SPRINKLE. 79	DUPIXENT..... 80	<i>emtricitabine-tenofovir</i>
<i>dorzolamide hcl</i> ..... 90	<i>dutasteride</i> ..... 77	<i>disoproxil fumarate</i>
<i>dorzolamide hcl-timolol</i>	<i>dutasteride-tamsulosin</i>	<i>tab 133-200 mg</i> ..... 17
<i>maleate ophth soln 2-</i>	<i>hcl cap 0.5-0.4 mg</i> . 77	<i>emtricitabine-tenofovir</i>
<i>0.5%</i> ..... 90	<b>E</b>	<i>disoproxil fumarate</i>
<i>dotti</i> ..... 70	<i>e.e.s. 400</i> ..... 19	<i>tab 167-250 mg</i> ..... 17
DOVATO TAB 50-300MG	<i>econazole nitrate</i> ..... 97	<i>emtricitabine-tenofovir</i>
..... 16	EDARBI ..... 37	<i>disoproxil fumarate</i>
<i>doxazosin mesylate</i> ... 36	EDARBYCLOR TAB 40-	<i>tab 200-300 mg</i> ..... 17
<i>doxepin hcl</i> ..... 45	12.5 ..... 36	EMTRIVA..... 15
<i>doxepin hcl (sleep)</i> ... 57	EDARBYCLOR TAB 40-	EMVERM ..... 13
<i>doxercalciferol</i> ..... 74	25MG ..... 36	<i>emzahn</i> ..... 66
<i>doxorubicin hcl</i> ..... 24	EDURANT..... 15	<i>enalapril maleate</i> ..... 35
<i>doxorubicin hcl</i>	EDURANT PED ..... 15	<i>enalapril maleate &amp;</i>
<i>liposomal</i> ..... 24	<i>efavirenz</i> ..... 15	<i>hydrochlorothiazide</i>
<i>doxy 100</i> ..... 21	<i>efavirenz-emtricitabine-</i>	<i>tab 10-25 mg</i> ..... 35
<i>doxycycline</i>	<i>tenofovir df tab 600-</i>	<i>enalapril maleate &amp;</i>
<i>(monohydrate)</i> ..... 21	<i>200-300 mg</i> ..... 16	<i>hydrochlorothiazide</i>
<i>doxycycline hyclate</i> ... 21	<i>efavirenz-lamivudine-</i>	<i>tab 5-12.5 mg</i> ..... 35
DRIZALMA SPRINKLE 45	<i>tenofovir df tab 400-</i>	ENBREL ..... 80
<i>dronabinol</i> ..... 74	<i>300-300 mg</i> ..... 16	ENBREL MINI..... 81
<i>drospirenone-ethinyl</i>	<i>efavirenz-lamivudine-</i>	ENBREL SURECLICK .. 81
<i>estradiol tab 3-0.02</i>	<i>tenofovir df tab 600-</i>	<i>endocet tab 10-325mg</i>
<i>mg</i> ..... 66	<i>300-300 mg</i> ..... 16	..... 11
<i>drospirenone-ethinyl</i>	ELIGARD ..... 23	<i>endocet tab 2.5-325mg</i>
<i>estradiol tab 3-0.03</i>	<i>elinest</i> ..... 66	..... 11
<i>mg</i> ..... 66	ELIQUIS ..... 78	<i>endocet tab 5-325mg</i> 11
<i>drospirenone-ethinyl</i>	ELIQUIS (1.5MG PACK)	<i>endocet tab 7.5-325mg</i>
<i>estrad-levomefolate</i>	3 X..... 78	..... 11
<i>tab 3-0.02-0.451 mg</i>	ELIQUIS (2MG PACK) 4	ENGERIX-B ..... 85
..... 66	X ..... 79	<i>enilloring</i> ..... 67
<i>drospirenone-ethinyl</i>	ELIQUIS STARTER PACK	<i>enoxaparin sodium</i> .... 79
<i>estrad-levomefolate</i>	..... 79	ENSACOVE ..... 27
<i>tab 3-0.03-0.451 mg</i>	<i>eluryng</i> ..... 66	<i>enskyce</i> ..... 67
..... 66	EMGALITY ..... 58	ENSTILAR AER ..... 97
DROXIA..... 79	EMSAM ..... 45	<i>entacapone</i> ..... 47
<i>droxidopa</i> ..... 42	<i>emtricitabine</i> ..... 15	<i>entecavir</i> ..... 18
DULERA AER 100-5MCG	<i>emtricitabine-rilpivirine-</i>	ENTRESTO CAP 15-
..... 95	<i>tenofovir df tab 200-</i>	16MG..... 36
DULERA AER 200-5MCG	<i>25-300 mg</i> ..... 17	ENTRESTO CAP 6-6MG
..... 95	<i>emtricitabine-tenofovir</i>	..... 36
DULERA AER 50-5MCG	<i>disoproxil fumarate</i>	<i>enulose</i> ..... 76
..... 95	<i>tab 100-150 mg</i> ..... 17	EPCLUSA PAK 150-37.5
<i>duloxetine hcl</i> ..... 45		..... 18

EPCLUSA PAK 200-50MG ..... 18	<i>estradiol valerate</i> ..... 71	FANAPT PAK PACK C.. 49
EPCLUSA TAB 200-50MG ..... 18	<i>ethambutol hcl</i> ..... 17	FARXIGA ..... 61
EPCLUSA TAB 400-100 ..... 18	<i>ethosuximide</i> ..... 52	FASENRA ..... 93
EPIDIOLEX..... 52	<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i> ..... 67	FASENRA PEN ..... 93
<i>epinephrine</i> ..... 42	<i>etodolac</i> ..... 10	<i>febuxostat</i> ..... 10
<i>epinephrine (anaphylaxis)</i> ..... 93	<i>etonogestrel-ethinyl estradiol va ring 0.12- 0.015 mg/24hr</i> ..... 67	<i>feirza 1.5/30</i> ..... 67
<i>eplerenone</i> ..... 35	<i>etoposide</i> ..... 25	<i>feirza 1/20</i> ..... 67
<i>ergotamine w/ caffeine tab 1-100 mg</i> ..... 58	<i>etravirine</i> ..... 15	<i>felbamate</i> ..... 52
ERIVEDGE ..... 27	EUCRISA ..... 99	<i>felodipine</i> ..... 40
ERLEADA ..... 23	EULEXIN ..... 23	<i>fenofibrate</i> ..... 38
<i>erlotinib hcl</i> ..... 27	<i>everolimus</i> ..... 27	<i>fenofibrate micronized</i> 38
<i>errin</i> ..... 67	<i>everolimus (immunosuppressant)</i> ..... 84	<i>fentanyl</i> ..... 11
<i>ertapenem sodium</i> .... 13	EVOTAZ TAB 300-150 17	<i>fesoterodine fumarate</i> 78
<i>ery</i> ..... 96	<i>exemestane</i> ..... 23	FETZIMA ..... 45
ERYTHROCIN LACTOBIONATE ..... 19	EXXUA..... 45	FETZIMA CAP TITRATIO ..... 45
<i>erythromycin (acne aid)</i> ..... 96	EXXUA TITRATION PACK ..... 45	FIASP ..... 63
<i>erythromycin (ophth)</i> 89	EYSUVIS..... 90	FIASP FLEXTOUCH..... 63
<i>erythromycin base</i> .... 19	EZALLOR SPRINKLE... 38	FIASP PENFILL ..... 63
<i>erythromycin ethylsuccinate</i> ..... 19	<i>ezetimibe</i> ..... 39	FIASP PUMPCART ..... 63
<i>erythromycin lactobionate</i> ..... 19	<i>ezetimibe-simvastatin tab 10-10 mg</i> ..... 39	<i>fidaxomicin</i> ..... 19
ERZOFRI ..... 48	<i>ezetimibe-simvastatin tab 10-20 mg</i> ..... 39	<i>finasteride</i> ..... 77
<i>escitalopram oxalate</i> . 45	<i>ezetimibe-simvastatin tab 10-40 mg</i> ..... 39	<i>finolimid hcl</i> ..... 59
<i>eslicarbazepine acetate</i> ..... 52	<i>ezetimibe-simvastatin tab 10-80 mg</i> ..... 39	FINTEPLA ..... 52
<i>esomeprazole magnesium</i> ..... 77	<b>F</b>	<i>finzala</i> ..... 67
<i>estarylla</i> ..... 67	FABRAZYME ..... 72	FIRMAGON ..... 23
<i>estradiol</i> ..... 70	<i>falmina</i> ..... 67	<i>flac</i> ..... 91
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i> ..... 71	<i>famciclovir</i> ..... 18	FLEBOGAMMA DIF ..... 83
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i> ..... 71	<i>famotidine</i> ..... 75	<i>flecainide acetate</i> ..... 38
<i>estradiol vaginal</i> ..... 71	<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i> 75	<i>fluconazole</i> ..... 14
	FANAPT ..... 48	<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i> ... 14
	FANAPT PAK PACK A.. 48	<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i> ... 14
	FANAPT PAK PACK B.. 48	<i>flucytosine</i> ..... 14
		<i>fludrocortisone acetate</i> ..... 71
		<i>flunisolide (nasal)</i> ..... 95
		<i>fluocinolone acetonide</i> 98
		<i>fluocinolone acetonide (otic)</i> ..... 91
		<i>fluocinonide</i> ..... 98
		<i>fluocinonide emulsified base</i> ..... 98

<i>fluorometholone (ophth)</i>	FREESTYLE LB MIS	GEMTESA.....	78
.....	2/READER.....	<i>generlac</i> .....	76
<i>fluorouracil</i> .....	FREESTYLE LB MIS	<i>gengraf</i> .....	84
<i>fluorouracil (topical)</i> ..	3/READER.....	GENOTROPIN.....	72
<i>fluoxetine hcl</i> .....	FREESTYLE MIS READER	GENOTROPIN	
<i>fluphenazine decanoate</i>	.....	MINIQUICK.....	72
.....	100	<i>gentamicin in saline inj</i>	
<i>fluphenazine hcl</i> .....	FRINDOVYX.....	0.8 mg/ml .....	13
<i>flurbiprofen</i> .....	22	<i>gentamicin in saline inj</i>	
<i>flurbiprofen sodium</i> ...	FRUZAQLA .....	1 mg/ml.....	13
89	27	<i>gentamicin in saline inj</i>	
<i>fluticasone propionate</i>	FULPHILA.....	1.2 mg/ml .....	13
<i>fluticasone propionate</i>	<i>fulvestrant</i> .....	<i>gentamicin in saline inj</i>	
(nasal) .....	23	1.6 mg/ml .....	13
95	<i>furosemide</i> .....	<i>gentamicin in saline inj</i>	
<i>fluticasone-salmeterol</i>	<i>furosemide inj</i> .....	2 mg/ml.....	13
<i>aer powder ba 100-50</i>	<i>fyavolv tab 0.5mg-</i>	<i>gentamicin sulfate</i> .....	13
<i>mcg/act</i> .....	2.5mcg .....	<i>gentamicin sulfate</i>	
95	71	(ophth) .....	89
<i>fluticasone-salmeterol</i>	<i>fyavolv tab 1mg-5mcg</i>	<i>gentamicin sulfate</i>	
<i>aer powder ba 250-50</i>	.....	(topical) .....	96
<i>mcg/act</i> .....	FYCOMPA.....	GENVOYA TAB .....	17
96	52, 53	GILOTRIF .....	27
<i>fluticasone-salmeterol</i>	<b>G</b>	<i>glatiramer acetate</i> .....	59
<i>aer powder ba 500-50</i>	<i>gabapentin</i> .....	<i>glatopa</i> .....	59
<i>mcg/act</i> .....	53	GLEOSTINE .....	22
96	<i>galantamine</i>	<i>glimepiride</i> .....	61
<i>fluvastatin sodium</i> ....	<i>hydrobromide</i> .....	<i>glipizide</i> .....	61, 62
38	44	<i>glipizide-metformin hcl</i>	
<i>fluvoxamine maleate</i> .	<i>galbriela</i> .....	tab 2.5-250 mg.....	62
44	67	<i>glipizide-metformin hcl</i>	
<i>fondaparinux sodium</i> .	<i>gallifrey</i> .....	tab 2.5-500 mg.....	62
79	73	<i>glipizide-metformin hcl</i>	
<i>formoterol fumarate</i> ..	GAMASTAN INJ.....	tab 5-500 mg .....	62
92	83	<i>glycopyrrolate</i> .....	75
<i>fosamprenavir calcium</i>	GAMMAGARD LIQUID	<i>glydo</i> .....	98
.....	LIQUID	GLYXAMBI TAB 10-5 MG	
15	ERC.....	.....	62
<i>fosfomycin</i>	GAMMAGARD S/D IGA	GLYXAMBI TAB 25-5 MG	
<i>tromethamine</i> .....	LESS TH .....	.....	62
13	83	GOMEKLI .....	27
<i>fosinopril sodium</i> .....	GAMMAKED.....	<i>granisetron hcl</i> .....	74
35	83	<i>griseofulvin microsize</i>	14
<i>fosinopril sodium &amp;</i>	GAMMAPLEX.....		
<i>hydrochlorothiazide</i>	GAMUNEX-C.....		
<i>tab 10-12.5 mg</i> .....	83		
35	<i>ganciclovir sodium</i> ....		
<i>fosinopril sodium &amp;</i>	18		
<i>hydrochlorothiazide</i>	GARDASIL 9.....		
<i>tab 20-12.5 mg</i> .....	85		
35	<i>gatifloxacin (ophth)</i> ...		
FOTIVDA .....	89		
27	GATTEX .....		
FREESTYLE LB KIT	76		
14D/SEN .....	GAUZE PADS 2 .....		
100	63		
FREESTYLE LB KIT	<i>gavilyte-c</i> .....		
2/SENSOR .....	76		
100	<i>gavilyte-g</i> .....		
FREESTYLE LB KIT	76		
3/SENSOR .....	<i>gavilyte-n/ flavor pack</i>		
100	76		
	GAVRETO.....		
	27		
	<i>gefitinib</i> .....		
	27		
	<i>gemcitabine hcl</i> .....		
	22		
	<i>gemfibrozil</i> .....		
	38		

*griseofulvin*  
*ultramicrosize*..... 14  
*guanfacine hcl*..... 42  
*guanfacine hcl (adhd)*  
..... 56, 57  
GVOKE HYPOPEN 1-  
PACK..... 72  
GVOKE HYPOPEN 2-  
PACK..... 72  
GVOKE KIT ..... 72  
GVOKE PFS..... 72  
**H**  
HADLIMA ..... 81  
HADLIMA PUSH TOUCH  
..... 81  
HAEGARDA ..... 79, 80  
*hailey 1.5/30* ..... 67  
*hailey 24 fe*..... 67  
*hailey fe 1/20*..... 67  
*halobetasol propionate*  
..... 98  
*haloperidol* ..... 49  
*haloperidol decanoate* 49  
*haloperidol lactate* .... 49  
HAVRIX ..... 85  
*heather* ..... 67  
HEP SOD/NACL INJ  
25000UNT ..... 79  
*heparin sodium*  
(*porcine*) ..... 79  
HEPLISAV-B ..... 85  
HERCEP HYLEC SOL 60-  
10000 ..... 27  
HERCEPTIN ..... 28  
HERCESSI ..... 28  
HERNEXEOS ..... 28  
HERZUMA ..... 28  
HIBERIX ..... 85  
HUMIRA ..... 81  
HUMIRA PEN ..... 81  
HUMIRA PEN KIT PS/UV  
..... 81  
HUMIRA PEN-CD/UC/HS  
START ..... 81

HUMULIN R U-500  
(CONCENTR..... 63  
HUMULIN R U-500  
KWIKPEN ..... 63  
*hydralazine hcl* ..... 42  
*hydrochlorothiazide* ... 41  
*hydrocodone bitartrate*  
..... 11  
*hydrocodone-*  
*acetaminophen soln*  
7.5-325 mg/15ml... 11  
*hydrocodone-*  
*acetaminophen tab*  
10-325 mg ..... 11  
*hydrocodone-*  
*acetaminophen tab 5-*  
325 mg ..... 11  
*hydrocodone-*  
*acetaminophen tab*  
7.5-325 mg ..... 11  
*hydrocodone-ibuprofen*  
*tab 7.5-200 mg* .... 11  
*hydrocortisone* ..... 71  
*hydrocortisone*  
(*intrarectal*)..... 75  
*hydrocortisone (rectal)*  
..... 99  
*hydrocortisone (topical)*  
..... 98  
*hydrocortisone sod*  
*succinate* ..... 71  
*hydrocortisone valerate*  
..... 98  
*hydrocortisone w/ acetic*  
*acid otic soln 1-2%*. 91  
*hydromorphone hcl* ... 11  
*hydroxychloroquine*  
*sulfate* ..... 83  
*hydroxyurea*..... 24  
*hydroxyzine hcl* ..... 92  
*hydroxyzine pamoate* 92  
HYRNUO ..... 28

**I**  
*ibandronate sodium* .. 64,  
65  
IBRANCE..... 28  
IBTROZI ..... 28  
*ibu* ..... 10  
*ibuprofen* ..... 10  
*icatibant acetate* ..... 80  
*iclevia*..... 67  
ICLUSIG ..... 28  
IDHIFA ..... 28  
*imatinib mesylate*..... 28  
IMBRUVICA ..... 28  
*imipenem-cilastatin*  
*intravenous for soln*  
250 mg ..... 13  
*imipenem-cilastatin*  
*intravenous for soln*  
500 mg ..... 13  
*imipramine hcl* ..... 45  
*imiquimod* ..... 99  
IMKELDI ..... 28  
IMOVAX RABIES  
(H.D.C.V.) ..... 85  
IMPAVIDO ..... 13  
INBRIJA ..... 47  
*incassia* ..... 67  
INCRELEX ..... 72  
INCRUSE ELLIPTA ..... 91  
*indapamide* ..... 41  
INFANRIX INJ ..... 85  
INFLIXIMAB ..... 81  
INLURIYO ..... 23  
INLYTA ..... 28  
INQOVI TAB 35-100MG  
..... 22  
INREBIC ..... 28  
INSULIN PEN NEEDLES:  
EMBECTA-BD ..... 63  
INSULIN SAFETY  
NEEDLES: EMBECTA-  
BD ..... 63  
INSULIN SYRINGES:  
EMBECTA-BD ..... 63

INTELENCE .....	15	JANUMET TAB 50-1000	<i>kcl 10 meq/l (0.075%)</i>
INTRALIPID .....	88	.....	<i>in dextrose 5% &amp; nacl</i>
<i>introvale</i> .....	67	JANUMET TAB 50-	<i>0.45% inj.....</i>
INVEGA HAFYERA .....	49	500MG.....	<i>86</i>
INVEGA SUSTENNA... ..	49	JANUMET XR TAB 100-	<i>kcl 20 meq/l (0.149%)</i>
INVEGA TRINZA .....	49	1000 .....	<i>in nacl 0.45% inj....</i>
IPOL INJ INACTIVE ...	85	JANUMET XR TAB 50-	<i>86</i>
<i>ipratropium bromide</i> .	91	1000 .....	<i>kcl 20 meq/l (0.149%)</i>
<i>ipratropium bromide</i>		JANUMET XR TAB 50-	<i>in nacl 0.9% inj.....</i>
<i>(nasal)</i> .....	91	500MG.....	<i>86</i>
<i>ipratropium bromide hfa</i>		JANUVIA.....	<i>kcl 20 meq/l (0.15%) in</i>
.....	91	JARDIANCE .....	<i>dextrose 5% &amp; nacl</i>
<i>ipratropium-albuterol</i>		<i>jasmiel</i> .....	<i>0.9% inj.....</i>
<i>nebu soln 0.5-2.5(3)</i>		<i>javygtor</i> .....	<i>86</i>
<i>mg/3ml</i> .....	91	JAYPIRCA.....	<i>kcl 20 meq/l (0.15%) in</i>
<i>irbesartan</i> .....	37	<i>jencycla</i> .....	<i>nacl 0.45% inj .....</i>
<i>irbesartan-</i>		JENTADUETO TAB 2.5-	<i>86</i>
<i>hydrochlorothiazide</i>		1000 .....	<i>kcl 20 meq/l (0.15%) in</i>
<i>tab 150-12.5 mg ...</i>	36	JENTADUETO TAB 2.5-	<i>nacl 0.9% inj .....</i>
<i>irbesartan-</i>		500 .....	<i>86</i>
<i>hydrochlorothiazide</i>		JENTADUETO TAB 2.5-	<i>kcl 30 meq/l (0.224%)</i>
<i>tab 300-12.5 mg ...</i>	36	850 .....	<i>in dextrose 5% &amp; nacl</i>
<i>irinotecan hcl</i> .....	24	JENTADUETO TAB XR	<i>0.45% inj.....</i>
ISENTRESS.....	15	2.5-1000MG .....	<i>87</i>
ISENTRESS HD.....	15	JENTADUETO TAB XR 5-	<i>kcl 40 meq/l (0.298%)</i>
<i>isibloom</i> .....	67	1000MG.....	<i>in nacl 0.9% inj.....</i>
ISOLYTE-P INJ /D5W .	86	<i>jinteli</i> .....	<i>87</i>
ISOLYTE-S INJ PH 7.4	86	<i>jolessa</i> .....	<i>kcl 40 meq/l (0.3%) in</i>
<i>isoniazid</i> .....	17	<i>juleber</i> .....	<i>dextrose 5% &amp; nacl</i>
<i>isosorbide dinitrate</i> ...	43	JULUCA TAB 50-25MG	<i>0.9% inj.....</i>
<i>isosorbide mononitrate</i>		<i>junel 1.5/30</i> .....	<i>87</i>
.....	43	<i>junel 1/20</i> .....	<i>KCL/D5W/NACL INJ</i>
<i>isotretinoin</i> .....	96	<i>junel fe 1.5/30</i> .....	<i>0.15/0.2 .....</i>
<i>isradipine</i> .....	40	<i>junel fe 1/20</i> .....	<i>87</i>
ITOVEBI .....	28	<i>junel fe 24</i> .....	<i>KCL/D5W/NACL INJ</i>
<i>itraconazole</i> .....	14	JYLAMVO .....	<i>0.3/0.9% .....</i>
<i>ivabradine hcl</i> .....	42	JYNNEOS .....	<i>87</i>
<i>ivermectin</i> .....	13	<b>K</b>	<i>kelnor 1/35 .....</i>
IWILFIN .....	24	KADCYLA .....	<i>67</i>
IXIARO INJ .....	85	<i>kaitlib fe</i> .....	<i>KERENDIA.....</i>
<b>J</b>		KALETRA SOL.....	<i>35</i>
<i>jaimiess</i> .....	67	KALYDECO .....	<i>KESIMPTA .....</i>
JAKAFI .....	28	KANJINTI.....	<i>59</i>
<i>jantoven</i> .....	79	<i>kariva</i> .....	<i>ketoconazole .....</i>
			<i>14</i>
			<i>ketoconazole (topical)</i>
			<i>97</i>
			<i>ketorolac tromethamine</i>
			<i>(ophth) .....</i>
			<i>90</i>
			<i>KEYTRUDA .....</i>
			<i>29</i>

KEYTRUDA INJ QLEX 395-4800 MG- UNIT/2.4ML ..... 29	<i>lamivudine-zidovudine tab 150-300 mg..... 17</i>	<i>levetiracetam in sodium chloride iv soln 500 mg/100ml ..... 53</i>
KEYTRUDA INJ QLEX 790-9600 MG- UNIT/4.8ML ..... 29	<i>lamotrigine ..... 53</i>	<i>levobunolol hcl..... 90</i>
KINERET ..... 81	<i>lanreotide acetate ..... 72</i>	<i>levocarnitine (metabolic modifiers) ..... 73</i>
KINRIX INJ ..... 85	<i>lansoprazole..... 77</i>	<i>levocetirizine dihydrochloride ..... 92</i>
<i>kionex..... 65</i>	LANTUS ..... 63	<i>levofloxacin ..... 20</i>
KISQALI 200 DOSE ... 29	LANTUS SOLOSTAR... 63	<i>levofloxacin in d5w iv soln 250 mg/50ml .. 20</i>
KISQALI 400 DOSE ... 29	<i>lapatinib ditosylate .... 29</i>	<i>levofloxacin in d5w iv soln 500 mg/100ml 20</i>
KISQALI 400 PAK FEMARA..... 29	<i>larin 1.5/30..... 67</i>	<i>levofloxacin in d5w iv soln 750 mg/150ml 20</i>
KISQALI 600 DOSE ... 29	<i>larin 1/20 ..... 67</i>	<i>levonest..... 68</i>
KISQALI 600 PAK FEMARA..... 29	<i>larin 24 fe..... 67</i>	<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg ..... 68</i>
<i>klayesta ..... 97</i>	<i>larin fe 1.5/30 ..... 67</i>	<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg ..... 68</i>
<i>klor-con ..... 87</i>	<i>larin fe 1/20..... 67</i>	<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg- 20 mcg ..... 68</i>
<i>klor-con 10..... 87</i>	<i>latanoprost ..... 90</i>	<i>levonorgestrel-eth estra tab 0.05-30/0.075- 40/0.125-30mg-mcg ..... 68</i>
KLOR-CON 10 ..... 87	LAZCLUZE..... 29	<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg ..... 68</i>
KLOR-CON 8 ..... 87	<i>leflunomide ..... 83</i>	<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7) .. 68</i>
<i>klor-con m10 ..... 87</i>	<i>lenalidomide..... 24</i>	<i>levora 0.15/30-28 ..... 68</i>
<i>klor-con m15 ..... 87</i>	LENVIMA 10 MG DAILY DOSE ..... 30	<i>levo-t ..... 74</i>
<i>klor-con m20 ..... 87</i>	LENVIMA 12MG DAILY DOSE ..... 30	<i>levothyroxine sodium. 74</i>
KLOXXADO ..... 61	LENVIMA 20 MG DAILY DOSE ..... 30	<i>levoxyl..... 74</i>
KOMZIFTI..... 29	LENVIMA 4 MG DAILY DOSE ..... 29	<i>l-glutamine (sickle cell) ..... 80</i>
KOSELUGO ..... 29	LENVIMA 8 MG DAILY DOSE ..... 29	<i>lidocaine ..... 99</i>
<i>kourzeq..... 100</i>	LENVIMA CAP 14 MG . 30	<i>lidocaine hcl ..... 99</i>
KRAZATI ..... 29	LENVIMA CAP 18 MG . 30	
<i>kurvelo ..... 67</i>	LENVIMA CAP 24 MG . 30	
<b>L</b>	<i>lessina..... 67</i>	
<i>labetalol hcl ..... 40</i>	<i>letrozole ..... 23</i>	
<i>lacosamide ..... 53</i>	<i>leucovorin calcium24, 25</i>	
<i>lacosamide oral ..... 53</i>	LEUKERAN ..... 22	
LACTATED RIN INJ.... 87	<i>leuprolide acetate ..... 23</i>	
<i>lactated ringer's solution ..... 87</i>	<i>levabuterol hcl..... 92</i>	
<i>lactic acid (ammonium lactate) ..... 99</i>	<i>levabuterol tartrate .. 92</i>	
<i>lactulose..... 76</i>	<i>levetiracetam ..... 53</i>	
<i>lactulose (encephalopathy)... 76</i>	<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml..... 53</i>	
<i>lamivudine..... 15</i>	<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml..... 53</i>	
<i>lamivudine (hbv) ..... 18</i>		

<i>lidocaine hcl (local anesth.)</i> .....	10	<i>lopinavir-ritonavir tab 200-50 mg</i> .....	17	LYBALVI TAB 15-10MG .....	49
<i>lidocaine hcl (mouth-throat)</i> .....	100	<i>lorazepam</i> .....	44	LYBALVI TAB 20-10MG .....	49
<i>lidocaine-prilocaine cream 2.5-2.5%</i> ....	99	<i>lorazepam intensol</i> ....	44	LYBALVI TAB 5-10MG	49
<i>lidocan</i> .....	99	LORBRENA .....	30	<i>lyleq</i> .....	68
LILETTA .....	68	<i>loryna</i> .....	68	<i>lyllana</i> .....	71
<i>linezolid</i> .....	13	<i>losartan potassium</i> ....	37	LYNPARZA.....	30
LINEZOLID INJ 2MG/ML .....	13	<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i> ....	36	LYSODREN .....	23
LINZESS.....	76	<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i> .....	36	LYTGOBI (12 MG DAILY DOSE) .....	30
<i>liomny</i> .....	74	<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i> ....	36	LYTGOBI (16 MG DAILY DOSE) .....	30
<i>liothyronine sodium</i> ..	74	LOTEMAX.....	90	LYTGOBI (20 MG DAILY DOSE) .....	30
<i>lisdexamfetamine dimesylate</i> .....	57	<i>loteprednol etabonate-tobramycin ophth susp 0.5-0.3%</i> .....	88	<i>lyza</i> .....	68
<i>lisinopril</i> .....	35	<i>lovastatin</i> .....	38	<b>M</b>	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i> ....	35	<i>low-ogestrel</i> .....	68	<i>magnesium sulfate</i> ....	87
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i> ....	35	<i>loxapine succinate</i> .....	49	MAGNESIUM SULFATE	87
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	35	<i>lubiprostone</i> .....	77	<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i> .....	87
<i>lithium</i> .....	58	<i>luizza 1.5/30</i> .....	68	<i>malathion</i> .....	100
<i>lithium carbonate</i> . 58, 59		<i>luizza 1/20</i> .....	68	<i>maraviroc</i> .....	16
LIVTENCITY .....	18	LUMAKRAS.....	30	<i>marlissa</i> .....	68
<i>loestrin 1.5/30-21</i> .....	68	LUMIGAN .....	90	MARPLAN .....	45
<i>loestrin 1/20-21</i> .....	68	LUMIZYME .....	73	MATULANE .....	25
<i>loestrin fe 1.5/30</i> .....	68	LUPRON DEPOT (1-MONTH).....	23	<i>matzim la</i> .....	40
<i>loestrin fe 1/20</i> .....	68	LUPRON DEPOT (3-MONTH).....	23	MAVYRET PAK 50-20MG .....	18
<i>lojaimiess</i> .....	68	LUPRON DEPOT-PED (1-MONTH).....	73	MAVYRET TAB 100-40MG.....	18
LOKELMA.....	65	LUPRON DEPOT-PED (3-MONTH).....	73	<i>meclizine hcl</i> .....	75
<i>lomustine</i> .....	22	LUPRON DEPOT-PED (6-MONTH).....	73	<i>medroxyprogesterone acetate</i> .....	73
LONSURF TAB 15-6.14 .....	22	<i>lurasidone hcl</i> .....	49	<i>medroxyprogesterone acetate (contraceptive)</i> .....	68
LONSURF TAB 20-8.19 .....	22	<i>lutera</i> .....	68	<i>mefloquine hcl</i> .....	15
<i>loperamide hcl</i> .....	76	LYBALVI TAB 10-10MG .....	49	<i>megestrol acetate</i> 23, 74	
<i>lopinavir-ritonavir tab 100-25 mg</i> .....	17			<i>megestrol acetate (appetite)</i> .....	74
				MEKINIST .....	30
				MEKTOVI .....	30

<i>meleya</i> .....	68	<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i> .....	39	<i>morphine sulfate</i> .	11, 12
<i>meloxicam</i> .....	10	<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i> .....	39	MOUNJARO .....	62
<i>memantine hcl</i> .....	44	<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i> .....	39	MOVANTIK .....	77
<i>memantine hcl- donepezil hcl cap er 24hr 14-10 mg</i> .....	44	<i>metoprolol succinate</i> .	40	<i>moxifloxacin hcl</i> .....	20
<i>memantine hcl- donepezil hcl cap er 24hr 21-10 mg</i> .....	44	<i>metoprolol tartrate</i> ....	40	<i>moxifloxacin hcl (ophth)</i> .....	89
<i>memantine hcl- donepezil hcl cap er 24hr 28-10 mg</i> .....	44	<i>metronidazole</i> .....	13	<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i> ....	20
MENQUADFI.....	85	<i>metronidazole (topical)</i> .....	99	MRESVIA .....	85
MENVEO INJ .....	85	<i>metronidazole vaginal</i>	78	MULTAQ.....	38
MENVEO SOL .....	85	<i>metyrosine</i> .....	42	<i>multiple electrolytes ph 5.5</i> .....	87
<i>mercaptopurine</i> .....	22	<i>mibelas 24 fe</i> .....	68	<i>mupirocin</i> .....	96
<i>meropenem</i> .....	13	<i>micafungin sodium</i> ....	14	<i>mycophenolate mofetil</i> .....	84
<i>mesalamine</i> .....	76	<i>microgestin 1.5/30</i> ....	68	<i>mycophenolate sodium</i> .....	84
<i>mesalamine w/ cleanser</i> .....	76	<i>microgestin 1/20</i> .....	68	MYRBETRIQ.....	78
<i>mesna</i> .....	25	<i>microgestin fe 1.5/30</i>	68	<b>N</b>	
<i>metformin hcl</i> .....	62	<i>microgestin fe 1/20</i> ...	68	<i>nabumetone</i> .....	10
<i>methadone hcl</i> .....	11	<i>midodrine hcl</i> .....	42	<i>nadolol</i> .....	40
<i>methadone hydrochloride i</i> .....	11	MIEBO.....	90	<i>nafcillin sodium</i> .....	21
<i>methazolamide</i> .....	41	<i>mifepristone (hyperglycemia)</i> .....	73	NAGLAZYME .....	73
<i>methenamine hippurate</i> .....	13	<i>mili</i> .....	68	<i>naloxone hcl</i> .....	61
<i>methimazole</i> .....	74	<i>mimvey</i> .....	71	NAMZARIC CAP 7-10MG .....	44
<i>methocarbamol</i> .....	60	<i>minocycline hcl</i> .....	21	<i>naproxen</i> .....	10
<i>methotrexate sodium 23, 83</i>		<i>minoxidil</i> .....	42	<i>naproxen sodium</i> .....	10
<i>methoxsalen rapid</i> ....	97	<i>mirtazapine</i> .....	45	<i>naratriptan hcl</i> .....	58
<i>methsuximide</i> .....	53	<i>misoprostol</i> .....	77	NATACYN .....	89
<i>methylphenidate hcl</i> ..	57	M-M-R II INJ .....	85	<i>nateglinide</i> .....	62
<i>methylprednisolone</i> ... 71		M-NATAL PLUS TAB ...	87	NAYZILAM.....	53
<i>methylprednisolone acetate</i> .....	71	<i>modafinil</i> .....	60	<i>nebivolol hcl</i> .....	40
<i>methylprednisolone sod succ</i> .....	71	MODEYSO .....	25	<i>necon 0.5/35-28</i> .....	68
<i>metoclopramide hcl</i> ... 75		<i>moexipril hcl</i> .....	35	<i>nefazodone hcl</i> .....	45
<i>metolazone</i> .....	41	<i>molindone hcl</i> .....	49	<i>neomycin sulfate</i> .....	13
		<i>mometasone furoate</i> .	98	<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> .....	89
		<i>mometasone furoate (nasal)</i> .....	95	<i>neomycin-polymy-gramicid op sol 1.75-</i>	
		MONJUVI .....	30		
		<i>mono-lynyah</i> .....	68		
		<i>montelukast sodium</i> ..	93		

10000-0.025mg-unt- mg/ml.....	89	nizatidine.....	75	NORVIR.....	16
neomycin-polymyxin- dexamethasone ophth oint 0.1%.....	89	nora-be.....	69	NOVOLIN INJ 70/30...	63
neomycin-polymyxin- dexamethasone ophth susp 0.1%.....	89	norelgestromin-ethinyl estradiol td ptwk 150- 35 mcg/24hr.....	69	NOVOLIN INJ 70/30 FP .....	64
neomycin-polymyxin- dexamethasone ophth susp 0.1%.....	89	norethindrone (contraceptive).....	69	NOVOLIN N.....	64
neomycin-polymyxin-hc ophth susp.....	89	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg.....	69	NOVOLIN N FLEXPEN .	64
neomycin-polymyxin-hc otic soln 1%.....	91	norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg.....	69	NOVOLIN R.....	64
neomycin-polymyxin-hc otic susp 3.5 mg/ml- 10000 unit/ml-1% .	91	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg.....	69	NOVOLIN R FLEXPEN .	64
NERLYNX.....	30	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg.....	69	NOVOLOG.....	64
neuac.....	96	norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) ....	69	NOVOLOG FLEXPEN ...	64
nevirapine.....	16	norethindrone acetate	74	NOVOLOG FLEXPEN RELION.....	64
NEXLETOL.....	39	norethindrone acetate- ethinyl estradiol tab 0.5 mg-2.5 mcg.....	71	NOVOLOG MIX INJ 70/30.....	64
NEXLIZET TAB 180/10MG.....	39	norethindrone acetate- ethinyl estradiol tab 1 mg-5 mcg.....	71	NOVOLOG MIX INJ FLEXPEN.....	64
NEXPLANON.....	68	norethindrone ac-ethinyl estradiol-fe tab 1-20/1- 30/1-35 mg-mcg....	69	NOVOLOG PENFILL....	64
niacin (antihyperlipidemic)	39	norgestimate & ethinyl estradiol tab 0.25 mg- 35 mcg.....	69	NOVOLOG RELION.....	64
nicardipine hcl.....	40	norgestimate-eth estrad tab 0.18-25/0.215- 25/0.25-25 mg-mcg69	69	NUBEQA.....	23
NICOTROL NS.....	61	norlyroc.....	69	NUDEXTA CAP 20- 10MG.....	59
nifedipine.....	41	nortrel 0.5/35 (28)....	69	NULOJIX.....	84
nikki.....	68	nortrel 1/35 (21).....	69	NUPLAZID.....	49
nilotinib hcl.....	30, 31	nortrel 1/35 (28).....	69	NURTEC.....	58
nilutamide.....	23	nortrel 7/7/7.....	69	NUTRILIPID.....	88
nimodipine.....	41	nortriptyline hcl.....	46	NUZYRA.....	21
NINLARO.....	31			nyamyc.....	97
nintedanib esylate ....	93			nylia 1/35.....	69
nisoldipine.....	41			nylia 7/7/7.....	69
nitazoxanide.....	13			nystatin.....	14
nitisinone.....	73			nystatin (mouth-throat) .....	100
nitro-bid.....	43			nystatin (topical).....	97
nitrofurantoin macrocrystal.....	13			nystop.....	97
nitrofurantoin monohyd macro.....	13			●	
nitroglycerin.....	43			OCTAGAM.....	84
nitroglycerin (intra-anal) .....	99			octreotide acetate.....	73

OJEMDA .....	31	OMNIPOD DASH MIS		OZEMPIC (1MG/DOSE)	
OJJAARA .....	31	PODS .....	64	.....	62
<i>olanzapine</i> .....	49	<i>ondansetron</i> .....	75	OZEMPIC (2MG/DOSE)	
<i>olmesartan medoxomil</i>		<i>ondansetron hcl</i> .....	75	.....	62
.....	37	ONTRUZANT.....	31	<b>P</b>	
<i>olmesartan medoxomil-</i>		ONUREG .....	23	<i>pacerone</i> .....	38
<i>hydrochlorothiazide</i>		OPIPZA.....	50	<i>paclitaxel</i> .....	25
<i>tab 20-12.5 mg</i> .....	37	OPSUMIT .....	43	<i>paclitaxel inj 100mg</i> ..	25
<i>olmesartan medoxomil-</i>		ORGOVYX .....	23	<i>paliperidone</i> .....	50
<i>hydrochlorothiazide</i>		ORKAMBI GRA 100-125		<i>pamidronate disodium</i>	65
<i>tab 40-12.5 mg</i> .....	37	.....	93	PAMIDRONATE	
<i>olmesartan medoxomil-</i>		ORKAMBI GRA 150-188		DISODIUM.....	65
<i>hydrochlorothiazide</i>		.....	93	PANRETIN .....	99
<i>tab 40-25 mg</i> .....	37	ORKAMBI GRA 75-94MG		<i>pantoprazole sodium</i> .	77
<i>olmesartan-amlodipine-</i>		.....	93	PANZYGA .....	84
<i>hydrochlorothiazide</i>		ORKAMBI TAB 100-125		<i>paricalcitol</i> .....	74
<i>tab 20-5-12.5 mg</i> ..	37	.....	94	<i>paroxetine hcl</i> .....	46
<i>olmesartan-amlodipine-</i>		ORKAMBI TAB 200-125		PAXLOVID PAK.....	18
<i>hydrochlorothiazide</i>		.....	94	PAXLOVID TAB 150-100	
<i>tab 40-10-12.5 mg</i> .	37	<i>orquidea</i> .....	69	.....	18
<i>olmesartan-amlodipine-</i>		ORSERDU .....	24	PAXLOVID TAB 300-100	
<i>hydrochlorothiazide</i>		<i>oseltamivir phosphate</i>	18	.....	18
<i>tab 40-10-25 mg</i> ...	37	OSPOMYV .....	65	<i>pazopanib hcl</i> .....	31
<i>olmesartan-amlodipine-</i>		<i>oxacillin sodium</i> .....	21	PEDIARIX INJ 0.5ML ..	85
<i>hydrochlorothiazide</i>		<i>oxaliplatin</i> .....	22	PEDVAX HIB .....	85
<i>tab 40-5-12.5 mg</i> ..	37	<i>oxaprozin</i> .....	10	<i>peg 3350-kcl-na bicarb-</i>	
<i>olmesartan-amlodipine-</i>		<i>oxcarbazepine</i> .....	53	<i>nacl-na sulfate for soln</i>	
<i>hydrochlorothiazide</i>		<i>oxybutynin chloride</i> ...	78	<i>236 gm</i> .....	76
<i>tab 40-5-25 mg</i> .....	37	<i>oxycodone hcl</i> .....	12	<i>peg 3350-kcl-sod</i>	
<i>olopatadine hcl (nasal)</i>		<i>oxycodone w/</i>		<i>bicarb-nacl for soln</i>	
.....	92	<i>acetaminophen tab</i>		<i>420 gm</i> .....	76
<i>omega-3-acid ethyl</i>		<i>10-325 mg</i> .....	12	PEGASYS .....	18
<i>esters cap 1 gm</i> .....	39	<i>oxycodone w/</i>		PEMAZYRE .....	31
<i>omeprazole</i> .....	77	<i>acetaminophen tab</i>		<i>pemetrexed disodium</i>	23
OMNIPOD 5 DX KIT INT		<i>2.5-325 mg</i> .....	12	PENBRAYA INJ .....	85
G7G6 .....	64	<i>oxycodone w/</i>		<i>penicillamine</i> .....	65
OMNIPOD 5 DX MIS POD		<i>acetaminophen tab 5-</i>		<i>penicillin g potassium</i>	21
G7G6 .....	64	<i>325 mg</i> .....	12	<i>penicillin g sodium</i> .....	21
OMNIPOD 5 L2 KIT		<i>oxycodone w/</i>		<i>penicillin v potassium</i> .	21
INTRO G6 .....	64	<i>acetaminophen tab</i>		PENMENVY INJ.....	85
OMNIPOD 5 L2 MIS		<i>7.5-325 mg</i> .....	12	PENTACEL INJ.....	85
PODS G6 .....	64	OXYCONTIN .....	11	<i>pentamidine isethionate</i>	
OMNIPOD DASH KIT		OZEMPIC (0.25 OR		<i>inh</i> .....	13
INTRO .....	64	0.5MG/DOSE) .....	62		

<i>pentamidine isethionate inj</i> .....	2.25 gm (2-0.25 gm) .....	<i>potassium citrate (alkalinizer)</i> .....
13	21	78
<i>pentoxifylline</i> .....	<i>piperacillin sod-tazobactam sod for inj</i>	<i>pramipexole dihydrochloride</i> .....
80	4.5 gm (4-0.5 gm) .	47
<i>perampanel</i> .....	21	<i>prasugrel hcl</i> .....
53, 54	<i>piperacillin sod-tazobactam sod for inj</i>	80
<i>perindopril erbumine</i> .	40.5 gm (36-4.5 gm) .....	<i>pravastatin sodium</i> ....
35	21	38
<i>perio gard</i> .....	PIQRAY 200MG DAILY	<i>praziquantel</i> .....
100	DOSE .....	13
<i>permethrin</i> .....	31	<i>prazosin hcl</i> .....
100	PIQRAY 250MG TAB	36
<i>perphenazine</i> .....	DOSE .....	<i>prednisolone</i> .....
50	31	71
<i>pfizerpen</i> .....	PIQRAY 300MG DAILY	<i>prednisolone acetate (ophth)</i> .....
21	DOSE .....	90
<i>phenelzine sulfate</i> .....	31	PREDNISOLONE
46	<i>pirfenidone</i> .....	SODIUM PHOSP .....
<i>phenobarbital</i> .....	94	90
54	<i>piroxicam</i> .....	<i>prednisolone sodium phosphate</i> .....
<i>phenobarbital sodium</i>	10	71
54	<i>pitavastatin calcium</i> ..	71, 72
<i>phenytek</i> .....	38	PREDNISONE INTENSOL
54	<i>plenamine</i> .....	.....
<i>phenytoin</i> .....	88	72
54	PLENVU SOL.....	<i>pregabalin</i> .....
<i>phenytoin sodium</i> .....	76	54
54	<i>podofilox</i> .....	PREMASOL SOL 10% .
<i>phenytoin sodium extended</i> .....	99	88
54	<i>polymyxin b sulfate</i> ...	PRENATAL TAB 27-1MG
PHESGO SOL.....	13	.....
31	<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i> .....	88
<i>philith</i> .....	89	PRENATAL TAB PLUS .
69	<i>pomalidomide</i> .....	88
PIFELTRO .....	24	<i>prevalite</i> .....
16	POMALYST .....	39
<i>pilocarpine hcl</i> .....	24	PREVYMIS .....
90	<i>portia-28</i> .....	18
<i>pilocarpine hcl (oral)</i>	69	PREZCOBIX TAB
100	<i>posaconazole</i> .....	675/150.....
<i>pimecrolimus</i> .....	14, 15	17
99	POT CHL 20MEQ/L IN	PREZCOBIX TAB 800-150 .....
<i>pimozide</i> .....	NACL 0.45% INJ ....	17
50	87	PREZISTA .....
<i>pimtreea</i> .....	POT CHL 20MEQ/L IN	16
69	NACL 0.9% INJ .....	PRIFTIN .....
<i>pindolol</i> .....	87	17
40	POT CHL 40MEQ/L IN	<i>primaquine phosphate</i>
<i>pioglitazone hcl</i> .....	NACL 0.9% INJ .....	15
62	87	PRIMAQUINE
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i> .....	<i>potassium chloride</i> ...	PHOSPHATE.....
62	87, 88	15
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i> .....	<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i> .....	<i>primidone</i> .....
62	87	54
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i> .....	<i>potassium chloride microencapsulated crystals er</i> .....	85
21	88	PRIORIX INJ .....
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i> .....		84
21		PRIVIGEN.....
<i>piperacillin sod-tazobactam sod for inj</i>		<i>probenecid</i> .....
		10
		<i>prochlorperazine</i> .....
		75
		<i>prochlorperazine edisylate</i> .....
		75
		<i>prochlorperazine maleate</i> .....
		75
		PROCRIT .....
		79

<i>proctocort</i> .....	99	REMICADE .....	81	ROTATEQ SOL .....	85
<i>procto-med hc</i> .....	99	RENFLXIS .....	81	<i>roweepra</i> .....	54
<i>proctosol hc</i> .....	99	<i>repaglinide</i> .....	62, 63	ROZLYTREK.....	32
<i>proctozone-hc</i> .....	99	REPATHA .....	39	RUBRACA.....	32
<i>progesterone</i> .....	74	REPATHA SURECLICK	39	<i>rufinamide</i> .....	54
PROGRAF .....	84	RESTASIS .....	90	RUKOBIA .....	16
PROLASTIN-C.....	94	RESTASIS MULTIDOSE		RYBELSUS.....	63
PROLIA .....	65	.....	90	RYDAPT .....	32
<i>promethazine hcl</i> .....	75	RETEVMO.....	31	<b>S</b>	
<i>propafenone hcl</i> .....	38	REVCOVI .....	73	<i>sacubitril-valsartan tab</i>	
<i>proparacaine hcl</i> .....	90	REVUFORJ.....	31	24-26 mg .....	37
<i>propranolol hcl</i> .....	40	REXULTI .....	50	<i>sacubitril-valsartan tab</i>	
<i>propylthiouracil</i> .....	74	REYATAZ .....	16	49-51 mg .....	37
PROQUAD INJ .....	85	REZDIFFRA .....	73	<i>sacubitril-valsartan tab</i>	
PROSOL INJ 20%.....	88	REZLIDHIA.....	32	97-103 mg .....	37
<i>protriptyline hcl</i> .....	46	REZUROCK.....	84	<i>sajazir</i> .....	80
PULMOZYME .....	94	RHOPRESSA.....	90	SANTYL .....	100
<i>pyrazinamide</i> .....	17	<i>ribavirin (hepatitis c)</i> .	18	<i>sapropterin</i>	
<i>pyridostigmine bromide</i>		<i>rifabutin</i> .....	17	<i>dihydrochloride</i> .....	73
.....	59	<i>rifampin</i> .....	17	SCSEMBLIX .....	32
<i>pyrimethamine</i> .....	13	<i>rilpivirine hcl</i> .....	16	<i>scopolamine</i> .....	75
PYZCHIVA.....	81	<i>riluzole</i> .....	59	SECUADO.....	50
<b>Q</b>		<i>rimantadine</i>		<i>selegiline hcl</i> .....	47
QINLOCK.....	31	<i>hydrochloride</i> .....	18	<i>selenium sulfide</i> .....	97
QUADRACEL INJ 0.5ML		RINVOQ.....	81	SELZENTRY .....	16
.....	85	RINVOQ LQ .....	82	SEREVENT DISKUS....	93
<i>quetiapine fumarate</i> ..	50	<i>risedronate sodium</i> ...	65	<i>sertraline hcl</i> .....	46
<i>quinapril hcl</i> .....	35	<i>risperidone</i> .....	50	<i>setlakin</i> .....	69
<i>quinidine sulfate</i> .....	38	<i>risperidone</i>		<i>sharobel</i> .....	69
<i>quinine sulfate</i> .....	15	<i>microspheres</i> .....	50	SHINGRIX .....	85, 86
QULIPTA.....	58	<i>ritonavir</i> .....	16	SIGNIFOR .....	73
<b>R</b>		<i>rivaroxaban</i> .....	79	SIKLOS.....	80
RABAVERT INJ.....	85	<i>rivastigmine</i> .....	44	<i>sildenafil citrate</i>	
<i>rabeprazole sodium</i> ...	77	<i>rivastigmine tartrate</i> ..	44	( <i>pulmonary</i>	
RALDESY .....	46	<i>rivelsa</i> .....	69	<i>hypertension</i> ) .....	43
<i>raloxifene hcl</i> .....	73	<i>rizatriptan benzoate</i> ..	58	<i>silodosin</i> .....	78
<i>ramelteon</i> .....	57	ROCKLATAN DRO .....	90	<i>silver sulfadiazine</i> .....	96
<i>ramipril</i> .....	35	<i>roflumilast</i> .....	94	SIMBRINZA SUS 1-0.2%	
<i>ranolazine</i> .....	42	ROMVIMZA .....	32	.....	90
<i>rasagiline mesylate</i> ...	47	<i>ropinirole hydrochloride</i>		<i>simliya</i> .....	69
<i>reclipsen</i> .....	69	.....	47	<i>simpesse</i> .....	69
RECOMBIVAX HB .....	85	<i>rosuvastatin calcium</i> ..	39	<i>simvastatin</i> .....	39
RELENZA DISKHALER	18	<i>rosyrah</i> .....	69	<i>sirolimus</i> .....	84
RELISTOR.....	77	ROTARIX SUS.....	85	SIRTURO .....	17

SKYRIZI .....	82	SUBVENITE .....	54	<i>tadalafil</i> .....	78
SKYRIZI PEN.....	82	<i>sucralfate</i> .....	77	<i>tadalafil (pulmonary</i>	
<i>sod sulfate-pot sulf-mg</i>		<i>sulfacetamide sodium</i>		<i>hypertension)</i> .....	43
<i>sulf oral sol 17.5-3.13-</i>		<i>(acne)</i> .....	96	TAFINLAR.....	32
<i>1.6 gm/177ml</i> .....	76	<i>sulfacetamide sodium</i>		TAGRISO.....	32
<i>sodium chloride</i> .....	87	<i>(ophth)</i> .....	89	TALZENNA .....	32
<i>sodium chloride (gu</i>		<i>sulfacetamide sodium-</i>		<i>tamoxifen citrate</i> .....	24
<i>irrigant)</i> .....	100	<i>prednisolone ophth</i>		<i>tamsulosin hcl</i> .....	78
<i>sodium fluoride chew;</i>		<i>soln 10-0.23(0.25)%</i>		<i>tarina 24 fe</i> .....	69
<i>tab; 1.1 (0.5 f) mg/ml</i>		.....	89	<i>tarina fe 1/20 eq</i> .....	70
<i>soln</i> .....	88	<i>sulfadiazine</i> .....	13	<i>tasimelteon</i> .....	57
<i>sodium oxybate</i> .....	60	<i>sulfamethoxazole-</i>		TAVNEOS.....	80
<i>sodium phenylbutyrate</i>		<i>trimethoprim iv soln</i>		<i>tazarotene</i> .....	97
.....	73	<i>400-80 mg/5ml</i> .....	14	<i>tazicef</i> .....	19
<i>sodium polystyrene</i>		<i>sulfamethoxazole-</i>		TECENTRIQ .....	32
<i>sulfonate</i> .....	65	<i>trimethoprim susp</i>		TECENTRIQ INJ	
<i>sodium polystyrene</i>		<i>200-40 mg/5ml</i> .....	14	HYBREZA .....	32
<i>sulfonate powder</i> ...	65	<i>sulfamethoxazole-</i>		TEFLARO.....	19
<i>solifenacin succinate</i> .	78	<i>trimethoprim tab 400-</i>		<i>telmisartan</i> .....	38
SOLIQUA INJ 100/33.	64	<i>80 mg</i> .....	14	<i>telmisartan-amlodipine</i>	
SOLTAMOX .....	24	<i>sulfamethoxazole-</i>		<i>tab 40-10 mg</i> .....	37
SOLU-CORTEF.....	72	<i>trimethoprim tab 800-</i>		<i>telmisartan-amlodipine</i>	
SOMATULINE DEPOT .	73	<i>160 mg</i> .....	14	<i>tab 40-5 mg</i> .....	37
SOMAVERT .....	73	SULFAMYLON .....	96	<i>telmisartan-amlodipine</i>	
<i>sorafenib tosylate</i> ....	32	<i>sulfasalazine</i> .....	76	<i>tab 80-10 mg</i> .....	37
<i>sotalol hcl</i> .....	38	<i>sulindac</i> .....	10	<i>telmisartan-amlodipine</i>	
<i>sotalol hcl (afib/afl)</i> ... 38		<i>sumatriptan</i> .....	58	<i>tab 80-5 mg</i> .....	37
SOTYKTU.....	82	<i>sumatriptan succinate</i> 58		<i>telmisartan-</i>	
SPIRIVA RESPIMAT ...	91	<i>sunitinib malate</i> .....	32	<i>hydrochlorothiazide</i>	
<i>spironolactone</i> .....	36	SUNLENCA .....	16	<i>tab 40-12.5 mg</i> .....	37
<i>spironolactone &amp;</i>		<i>syeda</i> .....	69	<i>telmisartan-</i>	
<i>hydrochlorothiazide</i>		SYMDEKO TAB 100-150		<i>hydrochlorothiazide</i>	
<i>tab 25-25 mg</i> .....	41	.....	94	<i>tab 80-12.5 mg</i> .....	37
<i>sprintec 28</i> .....	69	SYMDEKO TAB 50-75MG		<i>telmisartan-</i>	
SPRITAM .....	54	.....	94	<i>hydrochlorothiazide</i>	
<i>sps</i> .....	65	SYMPAZAN.....	55	<i>tab 80-25 mg</i> .....	37
<i>sps rectal</i> .....	65	SYMTUZA TAB .....	17	<i>temazepam</i> .....	57
<i>sronyx</i> .....	69	SYNAREL .....	73	TENIVAC INJ 5-2LF....	86
<i>ssd</i> .....	96	SYNTHROID .....	74	<i>tenofovir disoproxil</i>	
STELARA .....	82	<b>T</b>		<i>fumarate</i> .....	16
STIVARGA .....	32	TABLOID.....	23	TEPMETKO .....	32
<i>streptomycin sulfate</i> .	13	TABRECTA .....	32	<i>terazosin hcl</i> .....	36
STRIBILD TAB .....	17	<i>tacrolimus</i> .....	84	<i>terbinafine hcl</i> .....	15
<i>subvenite</i> .....	54	<i>tacrolimus (topical)</i> ...	99	<i>terbutaline sulfate</i> ....	93

<i>terconazole vaginal</i> ... 78	<i>tolvaptan tab therapy</i>	<i>triamterene &amp;</i>
<i>teriparatide</i> ..... 65	<i>pack 60 &amp; 30 mg</i> .... 73	<i>hydrochlorothiazide</i>
TERIPARATIDE ..... 65	<i>tolvaptan tab therapy</i>	<i>tab 37.5-25 mg</i> ..... 41
<i>testosterone</i> ..... 61	<i>pack 90 &amp; 30 mg</i> .... 73	<i>triamterene &amp;</i>
<i>testosterone cypionate</i>	<i>topiramate</i> ..... 55	<i>hydrochlorothiazide</i>
..... 61	<i>toremifene citrate</i> ..... 24	<i>tab 75-50 mg</i> ..... 41
<i>testosterone enanthate</i>	<i>torpenz</i> ..... 33	<i>tridacaine ii</i> ..... 99
..... 61	<i>torseamide</i> ..... 41	<i>triderm</i> ..... 98
<i>testosterone pump</i> .... 61	TOUJEO MAX SOLOSTAR	<i>trientine hcl</i> ..... 65
<i>tetrabenazine</i> ..... 59	..... 64	<i>tri-estarylla</i> ..... 70
<i>tetracycline hcl</i> ..... 21	TOUJEO SOLOSTAR... 64	<i>trifluoperazine hcl</i> ..... 50
THALOMID ..... 24	TPN ELECTROL INJ .... 87	<i>trifluridine</i> ..... 89
<i>theophylline</i> ..... 94	TRADJENTA..... 63	<i>trihexyphenidyl hcl</i> .... 47
<i>thioridazine hcl</i> ..... 50	<i>tramadol hcl</i> ..... 12	TRIJARDY XR TAB ER
<i>thiothixene</i> ..... 50	<i>tramadol-</i>	24HR 10-5-1000MG 63
<i>tiadylt er</i> ..... 41	<i>acetaminophen tab</i>	TRIJARDY XR TAB ER
<i>tiagabine hcl</i> ..... 55	<i>37.5-325 mg</i> ..... 12	24HR 12.5-2.5-
TIBSOVO ..... 33	<i>trandolapril</i> ..... 35	1000MG ..... 63
<i>ticagrelor</i> ..... 80	<i>tranexamic acid</i> ..... 80	TRIJARDY XR TAB ER
TICOVAC ..... 86	<i>tranylcypromine sulfate</i>	24HR 25-5-1000MG 63
<i>tigecycline</i> ..... 21	..... 46	TRIJARDY XR TAB ER
<i>tilia fe</i> ..... 70	TRAVASOL INJ 10% .. 88	24HR 5-2.5-1000MG
<i>timolol maleate</i> ..... 40	<i>travoprost</i> ..... 90	..... 63
<i>timolol maleate (ophth)</i>	TRAZIMERA..... 33	TRIKAFTA PAK 59.5MG
..... 90	<i>trazodone hcl</i> ..... 46	..... 94
<i>tinidazole</i> ..... 14	TRELEGY AER ELLIPTA	TRIKAFTA PAK 75MG .94
TIVICAY ..... 16	100-62.5-25 MCG .. 91	TRIKAFTA TAB 100-50-
TIVICAY PD..... 16	TRELEGY AER ELLIPTA	75MG & 150MG ..... 94
<i>tizanidine hcl</i> ..... 60	200-62.5-25 MCG .. 91	TRIKAFTA TAB 50-25-
TOBI PODHALER..... 14	TREMFYA ..... 82	37.5MG & 75MG ..... 94
TOBRADEX OIN 0.3-	TREMFYA INDUCTION	<i>tri-legend fe</i> ..... 70
0.1% ..... 89	PACK FO ..... 82	<i>tri-linyah</i> ..... 70
<i>tobramycin</i> ..... 14	TREMFYA PEN..... 82	<i>tri-lo-estarylla</i> ..... 70
<i>tobramycin (ophth)</i> ... 89	<i>treprostinil</i> ..... 43	<i>tri-lo-marzia</i> ..... 70
<i>tobramycin sulfate</i> .... 14	<i>tretinoin</i> ..... 96	<i>tri-lo-mili</i> ..... 70
<i>tobramycin-</i>	<i>tretinoin</i>	<i>tri-lo-sprintec</i> ..... 70
<i>dexamethasone ophth</i>	<i>(chemotherapy)</i> ..... 25	<i>trimethoprim</i> ..... 14
<i>susp 0.3-0.1%</i> ..... 89	<i>triamcinolone acetonide</i>	<i>tri-mili</i> ..... 70
<i>tolterodine tartrate</i> ... 78	<i>(mouth)</i> ..... 100	<i>trimipramine maleate</i> 46
<i>tolvaptan</i> ..... 73	<i>triamcinolone acetonide</i>	TRINTELLIX..... 46
<i>tolvaptan tab therapy</i>	<i>(topical)</i> ..... 98	<i>tri-sprintec</i> ..... 70
<i>pack 30 &amp; 15 mg</i> ... 73	<i>triamterene &amp;</i>	TRIUMEQ PD TAB ..... 17
<i>tolvaptan tab therapy</i>	<i>hydrochlorothiazide</i>	TRIUMEQ TAB..... 17
<i>pack 45 &amp; 15 mg</i> ... 73	<i>cap 37.5-25 mg</i> ..... 41	<i>tri-vylibra</i> ..... 70

<i>tri-vylibra lo</i> .....	70	<i>valsartan-</i>		VENTOLIN HFA	
TROGARZO .....	16	<i>hydrochlorothiazide</i>		(INSTITUTIONAL	
TROPHAMINE INJ 10%		<i>tab 160-25 mg</i> .....	37	PACK).....	93
.....	88	<i>valsartan-</i>		<i>verapamil hcl</i> .....	41
<i>tropium chloride</i> .....	78	<i>hydrochlorothiazide</i>		VERQUVO .....	42
TRUE METRIX KIT AIR		<i>tab 320-12.5 mg</i> ....	37	VERSACLOZ .....	50
.....	100	<i>valsartan-</i>		VERZENIO.....	33
TRUE METRIX KIT		<i>hydrochlorothiazide</i>		<i>vestura</i> .....	70
METER.....	100	<i>tab 320-25 mg</i> .....	37	<i>vienva</i> .....	70
TRUE METRIX STRIPS		<i>valsartan-</i>		<i>vigabatrin</i> .....	55
.....	100	<i>hydrochlorothiazide</i>		<i>vigadrone</i> .....	55
TRULICITY .....	63	<i>tab 80-12.5 mg</i> .....	37	VIGAFYDE .....	55
TRUMENBA .....	86	VALTOCO 10 MG DOSE		<i>vilazodone hcl</i> .....	46
TRUQAP .....	33	.....	55	VIMKUNYA .....	86
TRUXIMA .....	33	VALTOCO 15 MG DOSE		<i>vincristine sulfate</i> .....	25
TUKYSA.....	33	.....	55	<i>vinorelbine tartrate</i> ....	25
TURALIO .....	33	VALTOCO 20 MG DOSE		<i>viorele</i> .....	70
<i>turqoz</i> .....	70	.....	55	VIRACEPT .....	16
<i>twice-daily clindamycin</i>		VALTOCO 5 MG DOSE	55	VIREAD.....	16
<i>phosphate (topical)</i>	96	<i>valtya 1/35</i> .....	70	VITRAKVI.....	33
TWINRIX INJ.....	86	<i>valtya 1/50</i> .....	70	VIVIMUSTA .....	22
TYBOST.....	16	<i>vancomycin hcl</i> .....	14	VIVITROL.....	61
<i>tydemy</i> .....	70	VANCOMYCIN INJ 1 GM		VIVOTIF CAP EC.....	86
TYENNE.....	82	.....	14	VIZIMPRO .....	33
TYPHIM VI .....	86	VANCOMYCIN INJ		VONJO.....	33
<b>U</b>		500MG.....	14	VOQUEZNA PAK DUAL	
UBRELVY .....	58	VANCOMYCIN INJ		PAK .....	77
<i>unithroid</i> .....	74	750MG.....	14	VOQUEZNA PAK TRIP PK	
UPTRAVI .....	43	VANFLYTA.....	33	.....	77
UPTRAVI PACK TAB		VAQTA .....	86	VORANIGO.....	33
200/800 .....	43	<i>varenicline tartrate</i> ....	61	<i>voriconazole</i> .....	15
<i>ursodiol</i> .....	77	<i>varenicline tartrate tab</i>		VOSEVI TAB .....	18
USTEKINUMAB .....	82	<i>11 x 0.5 mg &amp; 42 x 1</i>		VOWST CAP .....	77
<b>V</b>		<i>mg start pack</i> .....	61	VRAYLAR.....	51
<i>valacyclovir hcl</i> .....	18	VARIVAX .....	86	<i>vyfemla</i> .....	70
VALCHLOR.....	99	VASCEPA .....	39	<i>vylibra</i> .....	70
<i>valganciclovir hcl</i> .....	18	VAXCHORA SUS.....	86	VYZULTA.....	90
<i>valproate sodium</i> .....	55	<i>velivet</i> .....	70	<b>W</b>	
<i>valproic acid</i> .....	55	VELSIPITY.....	82	<i>warfarin sodium</i> .....	79
<i>valsartan</i> .....	38	VENCLEXTA.....	33	<i>water for irrigation,</i>	
<i>valsartan-</i>		VENCLEXTA TAB START		<i>sterile irrigation soln</i>	
<i>hydrochlorothiazide</i>		PK.....	33	.....	100
<i>tab 160-12.5 mg</i> ...	37	<i>venlafaxine hcl</i> .....	46	WELIREG .....	25
		VENTOLIN HFA .....	93	<i>wera</i> .....	70

WESTAB PLUS TAB 27- 1MG.....	88	XIGDUO XR TAB 5- 500MG.....	63	<i>zenatane</i> .....	96
WINREVAIR .....	43	XIIDRA.....	90	ZENPEP CAP 10000UNT .....	77
WINREVAIR INJ 45MG	43	XOLAIR .....	94	ZENPEP CAP 15000UNT .....	77
WINREVAIR INJ 60MG	43	XOSPATA.....	34	ZENPEP CAP 20000UNT .....	77
<i>wixela inhub</i> .....	96	XPOVIO PAK (100 MG ONCE WEEKLY).....	34	ZENPEP CAP 25000UNT .....	77
<i>wymzya fe</i> .....	70	XPOVIO PAK (40 MG ONCE WEEKLY).....	34	ZENPEP CAP 3000UNIT .....	77
WYOST.....	65	XPOVIO PAK (40 MG TWICE WEEKLY) ....	34	ZENPEP CAP 40000UNT .....	77
<b>X</b>		XPOVIO PAK (60 MG ONCE WEEKLY).....	34	ZENPEP CAP 5000UNIT .....	77
XALKORI .....	33, 34	XPOVIO PAK (60 MG TWICE WEEKLY) ....	34	ZENPEP CAP 60000UNT .....	77
<i>xarah fe</i> .....	70	XPOVIO PAK (80 MG ONCE WEEKLY).....	34	ZERVIAE .....	90
XARELTO .....	79	XPOVIO PAK (80 MG TWICE WEEKLY) ....	34	<i>zidovudine</i> .....	16
XARELTO STAR TAB 15/20MG .....	79	XTANDI .....	24	<i>ziprasidone hcl</i> .....	51
XATMEP.....	83	XTRENBO.....	65	<i>ziprasidone mesylate</i> .	51
XCOPRI .....	55	<i>xulane</i> .....	70	ZIRABEV .....	34
XCOPRI PAK 100-150	55	XULTOPHY INJ 100/3.6 .....	64	ZIRGAN .....	89
XCOPRI PAK 12.5-25.	55	<b>Y</b>		<i>zoledronic acid</i> .....	65
XCOPRI PAK 150-200MG (MAINTENANCE) ....	55	YESINTEK .....	83	ZOLINZA.....	34
XCOPRI PAK 150-200MG (TITRATION) .....	55	YF-VAX INJ .....	86	<i>zolpidem tartrate</i> ....	57
XCOPRI PAK 50-100MG .....	55	YONSA .....	24	ZONISADE .....	56
XDEMVY .....	89	YUTREPIA .....	43, 44	<i>zonisamide</i> .....	56
XELJANZ .....	83	<i>yuvafem</i> .....	71	<i>zovia 1/35</i> .....	70
XELJANZ XR.....	83	<b>Z</b>		ZTALMY .....	56
<i>xelria fe</i> .....	70	<i>zafemy</i> .....	70	<i>zumandimine</i> .....	70
XERMELO .....	77	<i>zafirlukast</i> .....	93	ZURZUVAE .....	46
XHANCE .....	95	ZARXIO .....	79	ZYDELIG .....	34
XIFAXAN .....	77	ZEGALOGUE.....	72	ZYKADIA.....	34
XIGDUO XR TAB 10- 1000.....	63	ZEJULA.....	34	ZYLET SUS 0.5-0.3% .	89
XIGDUO XR TAB 10- 500MG .....	63	ZELBORAF .....	34	ZYPITAMAG .....	39
XIGDUO XR TAB 2.5- 1000 .....	63	<i>zelvysia</i> .....	73	ZYPREXA RELPREVV ..	51
XIGDUO XR TAB 5- 1000MG.....	63	ZEMAIRA .....	94		

Molina Healthcare è un piano C-SNP, D-SNP e HMO con contratto Medicare. I piani D-SNP hanno un contratto con il programma Medicaid dello Stato. L'iscrizione dipende dal rinnovo del contratto.

*[Per la disponibilità clicca qui.](#)*

ATTENTION: Language assistance services, free of charge, are available to you. Call (833) 671-0440 (TTY:711).	English
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (833) 671-0440 (TTY:711).	Spanish
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 (833) 671-0440 (TTY:711)。	Chinese
ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (833) 671-0440 (الهاتف النصي (TTY): 711)	Arabic
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다 (833) 671-0440 (TTY:711) 번으로 전화해 주십시오.	Korean
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (833) 671-0440 (телетайп: (TTY:711)).	Russian
ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero (833) 671-0440 (TTY:711).	Italian
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le (833) 671-0440 (TTY:711).	French
ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele (833) 671-0440 (TTY:711).	French Creole
אויפמערקזאם: אויב איר רעדט אידיש, זענען פארהאן פאר אייך שפראך הילף סערוויסעס פריי פון אפצאל. רופט (833) 671-0440 (TTY:711).	Yiddish
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer (833) 671-0440 (TTY:711)	Polish
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (833) 671-0440 (TTY:711).	Tagalog
লক্ষ্য করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন ১-(833) 671-0440 (TTY:711)	Bengali
KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në (833) 671-0440 (TTY:711).	Albanian
ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε (833) 671-0440 (TTY:711).	Greek
خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں - کال کریں (833) 671-0440 (TTY:711) :	Urdu



Questo prontuario è stato aggiornato il 06/01/2026.

Per informazioni più recenti o altre domande, contattare il Servizio Membri del Senior Whole Health Medicare Complete Care al numero (800) 665-3086 (gli utenti TTY devono chiamare il 711), 1 ottobre – 31 marzo: 7 giorni su 7, dalle 8.00 alle 20.00, ora locale, dal 1° aprile al 30 settembre: Lunedì – Venerdì, dalle 8 a.m. alle 8 p.m, ora locale, oppure consulti il sito [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare).