2021
Preferred Drug List

Humana Healthy Horizons™ in South Carolina

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN. THIS FORMULARY WAS UPDATED ON 12/16/2021.

Humana
Healthy Horizons™ in South Carolina

Healthy Connections

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Welcome to Humana Healthy Horizons™ in South Carolina

The Humana Preferred Drug List (also known as a formulary) is effective on July 1st unless otherwise specified. This is an all-inclusive list and may change throughout the year.

What is the Preferred Drug List?
The Preferred Drug List is a list of covered medicines selected by Humana. The medicines in the Preferred Drug List are covered by Humana as long as the medicine is medically necessary, the prescription is filled at a Humana network pharmacy and other plan rules are followed.

How do I use the Preferred Drug List?
Medicines are listed in the Preferred Drug List alphabetically.

Generic medicines have the same active ingredients as brand medicines and are prescribed for the same reasons. The Food and Drug Administration (FDA) requires generics to be safe and work the same as brand medicines. Generic medicines often cost much less.

- **Level 1** – Includes covered medicines.

What if my medicine is not on the Preferred Drug List?
You can use the drug search tool by signing into MyHumana at **Humana.com**. You can access the drug search tool by clicking "Pharmacy". For some medicines not listed below, medical coverage may apply.

Your health care provider can ask Humana to make an exception. Generally, Humana will only approve a request if a covered medicine wouldn't work as well OR would have a negative effect on your health. To ask for an approval, your health care provider can:

- Obtain forms at **Humana.com/PA**
- Submit requests electronically by visiting **Covermymeds.com/epa/Humana**
- Submit requests by fax to 877-486-2621
- Call Humana Clinical Pharmacy Review (HCPR) at 800-555-CLIN (800-555-2546).

The coverage determination decision will be reviewed based upon medical necessity and our decision communicated within 24 hours after the request is received from the heathcare provider.

Some covered medicines may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior authorization (PA):** Some medicines need to be approved in advance to be covered under your pharmacy plan. For these medicines to be covered, your health care provider must get approval from Humana. Your plan benefits won't cover this medicine without prior authorization. You may pay the entire cost of the medicine if you buy it without first getting a prior authorization.

- **Quantity limits (QL):** You may have a limit on how much you can get of some medicines at one time. The quantity limit for each medicine is based on safety or health care concerns and whether your health care provider prescribes a supply for 30, 60, or 90 days. These limits help prevent misuse of medicines. If your prescription is over the limit there are two choices:
  - You can get the amount of medicine that's covered by your plan.

    Or

  - If your health care provider thinks you need more than the amount allowed, he or she can ask for prior authorization from Humana for the amount of the medicine that goes over the limit.

Talk to your health care provider if your medicine has an additional requirement. Ask your health care provider to contact Humana Clinical Pharmacy Review (HCPR) to ask for approval for a medicine that requires prior authorization or quantity limit. Your health care provider can contact HCPR at 1-800-555-2546 between 8 a.m. – 8 p.m. EST, Monday – Friday to request an approval. Please allow 24 hours for Humana to review and provide a response back to your health care provider.

You can find out if your medicine has any additional requirements or limits by looking in the Preferred Drug List that begins on page 5.

Can the Preferred Drug List change?
Yes. Humana reviews and updates the Preferred Drug List as needed. New medicines may be added and medicines that are deemed unsafe by the Food and Drug Administration (FDA) or a medicine's manufacturer are immediately removed.

We will communicate changes to the Preferred Drug List to members, by mail, based on the Preferred Drug List notification requirements established by each state. Members can view the most up-to-date Preferred Drug List on **Humana.com**.

How much will I pay for covered medicines?
Medicines on the Preferred Drug List will have a $3.40 co-pay for medicines for members age 19 and older. However, there are no co-pays for the following members:
- Children 18 and younger
- Federally recognized Native Americans
- Pregnant women

Please refer to your Member Handbook or call the number on the back of your ID card to reach Member Services to find out more about your pharmacy coverage.

For specific coverage and cost information for existing members:
- Visit **Humana.com** and log into MyHumana.
- Access the drug search tool by clicking "Pharmacy".
- Search for your medicine by name.
- Please note: MyHumana only shows benefits as of the date of log in. Depending on your plan, you should wait until after your plan's 2021 renewal date to see your new benefit information.

For More Information

For more detailed information about your Humana prescription drug coverage, please review your Member Handbook and other plan materials.

If you're already enrolled in a Humana plan, please call the number on the back of your Humana member ID card or log into MyHumana.

If you're thinking about enrolling in a Humana plan, please call the Member Services number listed in your enrollment materials.

The Preferred Drug List that begins on the next page provides coverage information about some of the medicines covered by Humana.

How to read your Drug List
The first column of the chart lists medicine names in alphabetical order. Brand medicines are listed in UPPER CASE and generic medicines are listed in lower case. Next to the medicine name you may see the following indicators to tell you about additional coverage information for that medicine:
EDS – Extended Day Supply - This medicine may be available up to a 90 day supply. Pharmacy accessibility and max day supply may vary by medicine.
CE – Copay Exception - This medicine is available to you at no cost through your Humana benefit.

The second column lists the drug level. See page 2 for more details on the drug levels in your plan.

The third column shows the utilization management requirements for the medicine. Utilization management means that Humana may have requirements for covering that medicine. These can include prior authorization or quantity limits. See page 2 for more details on these requirements for your plan.

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
1ST TIER UNILET COMFORTOUCH LANCET 28 GAUGE	1	
1ST TIER UNILET COMFORTOUCH LANCET 30 GAUGE	1	
2-IN-1 LANCET DEVICE 30 GAUGE	1	
24 hour nasal allergy 55 mcg spray aerosol	1	
3 day vaginal 200 mg/5 gram (4 %) cream	1	
3-DAY VAGINAL 2 % CREAM	1	
abacavir 20 mg/ml solution	1	QL(960 per 30 days)
abacavir 300 mg tablet	1	QL(60 per 30 days)
abacavir-lamivudine 600-300 mg	1	QL(30 per 30 days)
abacavir-lamivudine-zidov tab	1	QL(60 per 30 days)
ABILIFY MAINTENA 300 MG INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE	1	QL(1 per 28 days)
ABILIFY MAINTENA 300 MG SUSPENSION,EXTENDED REL. INTRAMUSCULAR SYRINGE	1	QL(1 per 28 days)
ABILIFY MAINTENA 400 MG INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE	1	QL(1 per 28 days)
ABILIFY MAINTENA 400 MG SUSPENSION,EXTENDED REL. INTRAMUSCULAR SYRINGE	1	QL(1 per 28 days)
abiraterone acetate 250 mg tab	1	PA,QL(120 per 30 days)
acamprosate calc dr 333 mg tab	1	QL(180 per 30 days)
acarbose 100 mg tablet	1	
acarbose 25 mg tablet	1	
acarbose 50 mg tablet	1	
ACCU-CHEK AVIVA CONTROL SOLN SOLUTION	1	
ACCU-CHEK AVIVA PLUS METER	1	
ACCU-CHEK AVIVA PLUS TEST STRIPS	1	QL(150 per 30 days)
ACCU-CHEK COMPACT PLUS CONTROL	1	
ACCU-CHEK COMPACT PLUS STRIPS	1	QL(153 per 30 days)
ACCU-CHEK FASTCLIX LANCET DRUM	1	
ACCU-CHEK FASTCLIX LANCING DEVICE KIT	1	
ACCU-CHEK GUIDE GLUCOSE METER	1	
ACCU-CHEK GUIDE L1-L2 CONTROL SOLUTION	1	
ACCU-CHEK GUIDE ME GLUCOSE METER	1	
ACCU-CHEK GUIDE TEST STRIPS	1	QL(150 per 30 days)
ACCU-CHEK MULTICLIX LANCET	1	
ACCU-CHEK MULTICLIX LANCET KIT	1	
ACCU-CHEK SAFE-T-PRO 23 GAUGE	1	
ACCU-CHEK SAFE-T-PRO PLUS 23 GAUGE	1	
ACCU-CHEK SMARTVIEW CONTROL SOLUTION	1	
ACCU-CHEK SMARTVIEW TEST STRIPS	1	QL(150 per 30 days)
ACCU-CHEK SOFTCLIX LANCETS	1	
ACCU-CHEK SOFTCLIX LANCING DEVICE+LANCETS KIT	1	
ACCUTREND GLUCOSE CONTROL SOLUTION	1	
ACE AEROSOL CLOUD ENHANCER SPACER	1	
acebutolol 200 mg capsule	1	
acebutolol 400 mg capsule	1	
acetamin-codein 300-30 mg/12.5	1	QL(2700 per 30 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
acetaminop-codeine 120-12 mg/5	1	QL(2700 per 30 days)
acetaminop-codeine 120-12 mg/5	1	QL(2700 per 30 days)
acetaminophen 120 mg suppos	1	
acetaminophen 160 mg/5 ml liq	1	
acetaminophen 325 mg tablet	1	
acetaminophen 500 mg tablet	1	
acetaminophen-cod #2 tablet	1	QL(390 per 30 days)
acetaminophen-cod #3 tablet	1	QL(360 per 30 days)
acetaminophen-cod #4 tablet	1	QL(180 per 30 days)
acetazolamide 125 mg tablet	1	QL(120 per 30 days)
acetazolamide 250 mg tablet	1	QL(120 per 30 days)
acetazolamide er 500 mg cap	1	QL(60 per 30 days)
acetic acid 2% ear solution	1	
acetylcysteine 10% vial	1	
acetylcysteine 20% vial	1	
acid controller 20 mg tablet	1	
acid gone antacid 95 mg-358 mg/15 ml oral suspension	1	
acid reducer (cimetidine) 200 mg tablet	1	
acid reducer (famotidine) 10 mg tablet	1	
acid reducer (famotidine) 20 mg tablet	1	
acitretin 10 mg capsule	1	PA
acitretin 17.5 mg capsule	1	PA
acitretin 25 mg capsule	1	PA
ACTI-LANCE LANCETS 17 GAUGE	1	
ACTI-LANCE LANCETS 23 GAUGE	1	
ACTI-LANCE LANCETS 28 GAUGE	1	
acyclovir 200 mg capsule	1	
acyclovir 200 mg/5 ml susp	1	
acyclovir 400 mg tablet	1	
acyclovir 5% ointment	1	PA
acyclovir 800 mg tablet	1	
adapalene 0.1% cream	1	
adapalene 0.1% gel	1	
adefovir dipivoxil 10 mg tab	1	
ADEMPAS 0.5 MG TABLET	1	QL(90 per 30 days)
ADEMPAS 1 MG TABLET	1	QL(90 per 30 days)
ADEMPAS 1.5 MG TABLET	1	QL(90 per 30 days)
ADEMPAS 2 MG TABLET	1	QL(90 per 30 days)
ADEMPAS 2.5 MG TABLET	1	QL(90 per 30 days)
ADJUSTABLE LANCING DEVICE	1	
ADMELOG SOLOSTAR U-100 INSULIN LISPRO 100 UNIT/ML SUBCUTANEOUS PEN	1	
ADMELOG U-100 INSULIN LISPRO 100 UNIT/ML SUBCUTANEOUS SOLUTION	1	
adult aspirin regimen 81 mg tablet,delayed release	1	
adult tussin chest congestion 100 mg/5 ml oral liquid	1	
adult tussin cough congestion dm 10 mg-100 mg/5 ml oral liquid	1	
adult tussin dm 10 mg-100 mg/5 ml oral syrup	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
advanced antacid-antigas 200 mg-200 mg-20 mg/5 ml oral suspension	1	
advanced antacid-antigas 400 mg-400 mg-40 mg/5 ml oral suspension	1	
ADVANCED LANCING DEVICE KIT	1	
ADVANCED TRAVEL LANCETS 28 GAUGE	1	
ADVANCED TRAVEL LANCETS 30 GAUGE	1	
ADVOCATE LANCET 26 GAUGE	1	
ADVOCATE LANCET 30 GAUGE	1	
ADVOCATE LANCING DEVICE	1	
ADVOCATE RAPID-SAFE LANCING DEVICE	1	
AEROCHAMBER MINI	1	
AEROCHAMBER MV SPACER	1	
AEROCHAMBER PLUS FLOW-VU	1	
AEROCHAMBER PLUS FLOW-VU,LARGE MASK	1	
AEROCHAMBER PLUS FLOW-VU,MEDIUM MASK	1	
AEROCHAMBER PLUS FLOW-VU,SMALL MASK	1	
AEROCHAMBER PLUS Z STAT LARGE MASK	1	
AEROCHAMBER PLUS Z STAT MEDIUM MASK	1	
AEROCHAMBER PLUS Z STAT SMALL MASK	1	
AEROCHAMBER PLUS Z STAT SPACER	1	
AEROCHAMBER WITH FLOWSIGNAL	1	
AEROCHAMBER Z-STAT PLUS-FLOW SIGNAL	1	
AEROGEAR ACTION ASTHMA KIT	1	
AEROTRACH PLUS SPACER	1	
AEROVENT PLUS SPACER	1	
AFINITOR DISPERZ 2 MG TABLET FOR ORAL SUSPENSION	1	PA,QL(30 per 30 days)
AFINITOR DISPERZ 3 MG TABLET FOR ORAL SUSPENSION	1	PA,QL(30 per 30 days)
AFINITOR DISPERZ 5 MG TABLET FOR ORAL SUSPENSION	1	PA,QL(30 per 30 days)
afirmelle 0.1 mg-20 mcg tablet[CE]	1	
AFLURIA QD 2021-22 (36 MOS UP)(PF)60 MCG (15 MCG X4)/0.5 ML IM SYRINGE	1	
AFLURIA QD 2021-22 (6-35 MOS)(PF) 30 MCG(7.5 MCGX4)/0.25 ML IM SYRINGE	1	
AFLURIA QUAD 2019-20 (3YR UP)	1	
AFLURIA QUAD 2019-20 (6-35MO)	1	
AFLURIA QUAD 2019-2020 VIAL	1	
AFLURIA QUAD 2020-2021 VIAL[CE]	1	
AFLURIA QUAD 2020-21 (3YR UP)[CE]	1	
AFLURIA QUAD 2020-21 (6-35MO)[CE]	1	
AFLURIA QUAD 2021-2022 60 MCG (15 MCG X 4)/0.5 ML INTRAMUSCULAR SUSP.	1	
AFTERA 1.5 MG TABLET[CE]	1	
AIMOVIG AUTOINJECTOR 140 MG/ML SUBCUTANEOUS AUTO-INJECTOR	1	PA,QL(1 per 30 days)
AIMOVIG AUTOINJECTOR 70 MG/ML SUBCUTANEOUS AUTO-INJECTOR	1	PA,QL(2 per 30 days)
AIMSCO LATEX CONDOM[CE]	1	
ak-poly-bac 500 unit-10,000 unit/gram eye ointment	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ALAWAY 0.025 % (0.035 %) EYE DROPS	1	
albendazole 200 mg tablet	1	
albuterol 2.5 mg/0.5 ml sol	1	
albuterol 5 mg/ml solution	1	
albuterol hfa 90 mcg inhaler	1	QL(36 per 30 days)
albuterol sul 0.63 mg/3 ml sol	1	
albuterol sul 1.25 mg/3 ml sol	1	
albuterol sul 2.5 mg/3 ml soln	1	
albuterol sulf 2 mg/5 ml syrup	1	
albuterol sulfate 2 mg tab	1	
albuterol sulfate 4 mg tab	1	
albuterol sulfate er 4 mg tab	1	
albuterol sulfate er 8 mg tab	1	
ALCOHOL 70% SWABS	1	
ALCOHOL PADS	1	
ALCOHOL PREP PADS	1	
ALCOHOL WIPES	1	
ALECENSA 150 MG CAPSULE	1	PA,QL(240 per 30 days)
alendronate sodium 10 mg tab	1	QL(30 per 30 days)
alendronate sodium 35 mg tab	1	QL(4 per 28 days)
alendronate sodium 5 mg tablet	1	QL(30 per 30 days)
alendronate sodium 70 mg tab	1	QL(4 per 28 days)
alfuzosin hcl er 10 mg tablet[EDS]	1	QL(30 per 30 days)
all day allergy (cetirizine) 1 mg/ml oral solution	1	QL(300 per 30 days)
all day allergy (cetirizine) 10 mg tablet	1	
all day pain relief 220 mg tablet	1	
all day relief 220 mg tablet	1	
ALLER-CHLOR 4 MG TABLET	1	
aller-g-time 25 mg tablet	1	
ALLERGIST TRAY 1/2 ML 27 GAUGE X 3/8" SYRINGE	1	
ALLERGIST TRAY INTRADERMAL BEVEL 1 ML 26 GAUGE X 1/2" SYRINGE	1	
ALLERGIST TRAY INTRADERMAL BEVEL 1 ML 26 GAUGE X 3/8" SYRINGE	1	
ALLERGIST TRAY INTRADERMAL BEVEL 1 ML 27 GAUGE X 3/8" SYRINGE	1	
ALLERGIST TRAY REGULAR BEVEL 1 ML 27 GAUGE X 3/8" SYRINGE	1	
allergy (chlorpheniramine) 4 mg tablet	1	
allergy (diphenhydramine) 25 mg capsule	1	
allergy (diphenhydramine) 25 mg tablet	1	
allergy 12.5 mg/5 ml oral liquid	1	
allergy and congestion relief 10 mg-240 mg tablet,extend release 24 hr	1	
allergy and congestion relief 5 mg-120 mg tablet,extend release 12 hr	1	
allergy medicine 25 mg tablet	1	
allergy relief (cetirizine) 10 mg tablet	1	
allergy relief (chlorpheniramine) 4 mg tablet	1	
allergy relief (diphenhydramine) 12.5 mg/5 ml oral liquid	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
allergy relief (diphenhydramine) 25 mg capsule	1	
allergy relief (diphenhydramine) 25 mg tablet	1	
allergy relief (loratadine) 10 mg disintegrating tablet	1	
allergy relief (loratadine) 10 mg tablet	1	
allergy relief (loratadine) 5 mg/5 ml oral solution	1	
allergy relief and nasal decongestant 10 mg-240 mg tablet,extended rel	1	
allergy relief d-24hr 10 mg-240 mg tablet,extended release	1	
allergy-time 4 mg tablet	1	
allopurinol 100 mg tablet[EDS]	1	
allopurinol 300 mg tablet[EDS]	1	
ALMACONE SUSPENSION	1	
almacone-2 400 mg-400 mg-40 mg/5 ml oral suspension	1	
alogliptin 12.5 mg tablet	1	QL(30 per 30 days)
alogliptin 25 mg tablet	1	QL(30 per 30 days)
alogliptin 6.25 mg tablet	1	QL(30 per 30 days)
alogliptin-metformin 12.5-1000	1	QL(60 per 30 days)
alogliptin-metformin 12.5-500	1	QL(60 per 30 days)
alogliptin-pioglit 12.5-15 mg	1	QL(30 per 30 days)
alogliptin-pioglit 12.5-30 mg	1	QL(30 per 30 days)
alogliptin-pioglit 12.5-45 mg	1	QL(30 per 30 days)
alogliptin-pioglit 25-15 mg tb	1	QL(30 per 30 days)
alogliptin-pioglit 25-30 mg tb	1	QL(30 per 30 days)
alogliptin-pioglit 25-45 mg tb	1	QL(30 per 30 days)
alprazolam 0.25 mg tablet	1	QL(120 per 30 days)
alprazolam 0.5 mg tablet	1	QL(120 per 30 days)
alprazolam 1 mg tablet	1	QL(120 per 30 days)
alprazolam 2 mg tablet	1	QL(150 per 30 days)
alprazolam er 0.5 mg tablet	1	QL(60 per 30 days)
alprazolam er 1 mg tablet	1	QL(60 per 30 days)
alprazolam er 2 mg tablet	1	QL(60 per 30 days)
alprazolam er 3 mg tablet	1	QL(60 per 30 days)
altavera (28) 0.15 mg-0.03 mg tablet[CE]	1	
ALTERNATE SITE LANCET 26 GAUGE	1	
ALTERNATE SITE LANCING DEVICE	1	
alum-mag hydroxide-simeth susp	1	
ALUNBRIG 180 MG TABLET	1	PA,QL(30 per 30 days)
ALUNBRIG 30 MG TABLET	1	PA,QL(180 per 30 days)
ALUNBRIG 90 MG (7)-180 MG (23) TABLETS IN A DOSE PACK	1	PA,QL(30 per 30 days)
ALUNBRIG 90 MG TABLET	1	PA,QL(30 per 30 days)
alyacen 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
alyacen 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet[CE]	1	
alyq 20 mg tablet	1	PA,QL(60 per 30 days)
amabelz 0.5 mg-0.1 mg tablet	1	
amabelz 1 mg-0.5 mg tablet	1	
amantadine 100 mg capsule	1	
amantadine 50 mg/5 ml solution	1	
ambrisentan 10 mg tablet	1	PA,QL(30 per 30 days)
ambrisentan 5 mg tablet	1	PA,QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
amethia 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
amethia lo tablet[CE]	1	QL(91 per 90 days)
amethyst (28) 90 mcg-20 mcg tablet[CE]	1	
amiloride hcl 5 mg tablet[EDS]	1	
amiloride hcl-hctz 5-50 mg tab[EDS]	1	
amiodarone hcl 100 mg tablet	1	
amiodarone hcl 200 mg tablet[EDS]	1	
amiodarone hcl 400 mg tablet	1	
amitriptyline hcl 10 mg tab	1	
amitriptyline hcl 100 mg tab	1	
amitriptyline hcl 150 mg tab	1	
amitriptyline hcl 25 mg tab	1	
amitriptyline hcl 50 mg tab	1	
amitriptyline hcl 75 mg tab	1	
amlodipine besylate 10 mg tab[EDS]	1	QL(30 per 30 days)
amlodipine besylate 2.5 mg tab[EDS]	1	QL(30 per 30 days)
amlodipine besylate 5 mg tab[EDS]	1	QL(30 per 30 days)
amlodipine-benazepril 10-20 mg[EDS]	1	QL(60 per 30 days)
amlodipine-benazepril 10-40 mg[EDS]	1	QL(30 per 30 days)
amlodipine-benazepril 2.5-10[EDS]	1	QL(60 per 30 days)
amlodipine-benazepril 5-10 mg[EDS]	1	QL(60 per 30 days)
amlodipine-benazepril 5-20 mg[EDS]	1	QL(60 per 30 days)
amlodipine-benazepril 5-40 mg[EDS]	1	QL(30 per 30 days)
ammonium lactate 12% cream	1	
ammonium lactate 12% lotion	1	
amnesteem 10 mg capsule	1	QL(60 per 30 days)
amnesteem 20 mg capsule	1	QL(60 per 30 days)
amnesteem 40 mg capsule	1	QL(120 per 30 days)
amox-clav 200-28.5 mg tab chew	1	
amox-clav 200-28.5 mg/5 ml sus	1	
amox-clav 250-125 mg tablet	1	
amox-clav 250-62.5 mg/5 ml sus	1	
amox-clav 400-57 mg tab chew	1	
amox-clav 400-57 mg/5 ml susp	1	
amox-clav 500-125 mg tablet	1	
amox-clav 600-42.9 mg/5 ml sus	1	
amox-clav 875-125 mg tablet	1	
amoxapine 100 mg tablet	1	
amoxapine 150 mg tablet	1	
amoxapine 25 mg tablet	1	
amoxapine 50 mg tablet	1	
amoxicillin 125 mg tab chew	1	
amoxicillin 125 mg/5 ml susp	1	
amoxicillin 200 mg/5 ml susp	1	
amoxicillin 250 mg capsule	1	
amoxicillin 250 mg tab chew	1	
amoxicillin 250 mg/5 ml susp	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
amoxicillin 400 mg/5 ml susp	1	
amoxicillin 500 mg capsule	1	
amoxicillin 500 mg tablet	1	
amoxicillin 875 mg tablet	1	
ampicillin 250 mg capsule	1	
ampicillin 500 mg capsule	1	
anagrelide hcl 0.5 mg capsule	1	
anagrelide hcl 1 mg capsule	1	
anastrozole 1 mg tablet[EDS]	1	QL(30 per 30 days)
animal chews tablet	1	
ANORO ELLIPTA 62.5 MCG-25 MCG/ACTUATION POWDER FOR INHALATION	1	QL(60 per 30 days)
antacid (calcium carbonate) 200 mg calcium (500 mg) chewable tablet	1	
antacid (calcium carbonate) 215 mg calcium (500 mg) chewable tablet	1	
antacid (calcium carbonate) 320 mg calcium (750 mg) chewable tablet	1	
antacid 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid anti-gas 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid anti-gas 400 mg-400 mg-40 mg/5 ml oral suspension	1	
antacid calcium 215 mg calcium (500 mg) chewable tablet	1	
antacid extra strength (calcium carb) 300 mg (750 mg) chewable tablet	1	
antacid extra-strength 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid extra-strength 300 mg (750 mg) chewable tablet	1	
antacid maximum strength 400 mg-400 mg-40 mg/5 ml oral suspension	1	
antacid plus anti-gas 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid plus anti-gas 400 mg-400 mg-40 mg/5 ml oral suspension	1	
antacid regular strength 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid ultra strength 400 mg calcium (1,000 mg) chewable tablet	1	
antacid-antigas 200 mg-200 mg-20 mg/5 ml oral suspension	1	
antacid-antigas 400 mg-400 mg-40 mg/5 ml oral suspension	1	
antacid-simethicone 400 mg-400 mg-40 mg/5 ml oral suspension	1	
anti-itch (hydrocortisone) 1 % topical cream	1	
anti-itch (hydrocortisone) with aloe 1 % topical cream	1	
antibiotic (bacitracin zinc) 500 unit/gram topical ointment	1	
antifungal cream (miconazole) 2 % topical	1	
anusol-hc 2.5 % topical cream with perineal applicator	1	
apo-varenicline 0.5 mg tablet[CE]	1	QL(56 per 28 days)
apo-varenicline 1 mg tablet[CE]	1	QL(56 per 28 days)
aprepitant 125 mg capsule	1	PA,QL(2 per 28 days)
aprepitant 125-80-80 mg pack	1	PA,QL(6 per 28 days)
aprepitant 40 mg capsule	1	PA,QL(2 per 28 days)
aprepitant 80 mg capsule	1	PA,QL(4 per 28 days)
apri 0.15 mg-0.03 mg tablet[CE]	1	
APTIVUS 100 MG/ML SOLUTION	1	QL(285 per 28 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
APTIVUS 250 MG CAPSULE	1	QL(120 per 30 days)
AQUA LANCE LANCING DEVICE	1	
aranelle (28) 0.5 mg/1 mg/0.5 mg-35 mcg tablet[CE]	1	
aripiprazole 1 mg/ml solution	1	QL(750 per 30 days)
aripiprazole 10 mg tablet	1	QL(30 per 30 days)
aripiprazole 15 mg tablet	1	QL(30 per 30 days)
aripiprazole 2 mg tablet	1	QL(30 per 30 days)
aripiprazole 20 mg tablet	1	QL(30 per 30 days)
aripiprazole 30 mg tablet	1	QL(30 per 30 days)
aripiprazole 5 mg tablet	1	QL(30 per 30 days)
aripiprazole odt 10 mg tablet	1	QL(60 per 30 days)
aripiprazole odt 15 mg tablet	1	QL(60 per 30 days)
ARISTADA 1,064 MG/3.9 ML SUSPENSION, EXTEND.REL. IM SYRINGE	1	QL(3.9 per 56 days)
ARISTADA 441 MG/1.6 ML SUSPENSION, EXTEND.REL. IM SYRINGE	1	QL(1.6 per 28 days)
ARISTADA 662 MG/2.4 ML SUSPENSION, EXTEND.REL. IM SYRINGE	1	QL(2.4 per 28 days)
ARISTADA 882 MG/3.2 ML SUSPENSION, EXTEND.REL. IM SYRINGE	1	QL(3.2 per 28 days)
ARISTADA INITIO 675 MG/2.4 ML SUSPENSION, EXTEND.REL. IM SYRINGE	1	QL(2.4 per 42 days)
ARMOUR THYROID 120 MG TABLET	1	
ARMOUR THYROID 15 MG TABLET	1	
ARMOUR THYROID 180 MG TABLET	1	
ARMOUR THYROID 240 MG TABLET	1	
ARMOUR THYROID 30 MG TABLET	1	
ARMOUR THYROID 300 MG TABLET	1	
ARMOUR THYROID 60 MG TABLET	1	
ARMOUR THYROID 90 MG TABLET	1	
ARNUITY ELLIPTA 100 MCG/ACTUATION POWDER FOR INHALATION	1	QL(30 per 30 days)
ARNUITY ELLIPTA 200 MCG/ACTUATION POWDER FOR INHALATION	1	QL(30 per 30 days)
ARNUITY ELLIPTA 50 MCG/ACTUATION POWDER FOR INHALATION	1	QL(30 per 30 days)
ARTIFICIAL TEARS (POLYVINYL ALCOHOL) 1.4 % EYE DROPS	1	
artificial tears (polyvinyl alcohol/povidone) 0.5 %-0.6 % eye drops	1	
ashlyna 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
aspir ec 81 mg tablet	1	
aspir-low ec 81 mg tablet	1	
aspirin 300 mg suppository	1	
aspirin 325 mg tablet	1	
aspirin 600 mg suppository	1	
aspirin 81 mg chewable tablet	1	
aspirin ec 325 mg tablet	1	
aspirin ec 81 mg tablet	1	
ASSURE COMFORT 28G LANCETS	1	
ASSURE HAEMOLANCE PLUS 1.2 MM	1	
ASSURE HAEMOLANCE PLUS 18 GAUGE	1	
ASSURE HAEMOLANCE PLUS 21 GAUGE	1	
ASSURE HAEMOLANCE PLUS 25 GAUGE	1	
ASSURE HAEMOLANCE PLUS 28 GAUGE	1	
ASSURE LANCE 25 GAUGE	1	
ASSURE LANCE 28 GAUGE	1	
ASSURE LANCE PLUS 21 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ASSURE LANCE PLUS 25 GAUGE	1	
ASSURE LANCE PLUS 30 GAUGE	1	
ASTHMAPACK CHILDREN'S KIT	1	
atazanavir sulfate 150 mg cap	1	QL(60 per 30 days)
atazanavir sulfate 200 mg cap	1	QL(60 per 30 days)
atazanavir sulfate 300 mg cap	1	QL(30 per 30 days)
atenolol 100 mg tablet[EDS]	1	
atenolol 25 mg tablet[EDS]	1	
atenolol 50 mg tablet[EDS]	1	
atenolol-chlorthalidone 100-25	1	
atenolol-chlorthalidone 50-25	1	
athlete's foot (clotrimazole) 1 % topical cream	1	
athlete's foot (clotrimazole) 1 % topical cream	1	
athlete's foot (terbinafine) 1 % topical cream	1	
atomoxetine hcl 10 mg capsule	1	QL(60 per 30 days)
atomoxetine hcl 100 mg capsule	1	QL(30 per 30 days)
atomoxetine hcl 18 mg capsule	1	QL(60 per 30 days)
atomoxetine hcl 25 mg capsule	1	QL(60 per 30 days)
atomoxetine hcl 40 mg capsule	1	QL(60 per 30 days)
atomoxetine hcl 60 mg capsule	1	QL(30 per 30 days)
atomoxetine hcl 80 mg capsule	1	QL(30 per 30 days)
atorvastatin 10 mg tablet[EDS]	1	
atorvastatin 20 mg tablet[EDS]	1	
atorvastatin 40 mg tablet[EDS]	1	
atorvastatin 80 mg tablet[EDS]	1	
atovaquone 750 mg/5 ml susp	1	QL(600 per 30 days)
atovaquone-proguanil 250-100	1	QL(30 per 30 days)
atovaquone-proguanil 62.5-25	1	QL(30 per 30 days)
ATRIPLA 600 MG-200 MG-300 MG TABLET	1	QL(30 per 30 days)
atropine 1% eye drops	1	
AUBAGIO 14 MG TABLET	1	PA,QL(30 per 30 days)
AUBAGIO 7 MG TABLET	1	PA,QL(30 per 30 days)
aubra 0.1 mg-20 mcg tablet[CE]	1	
aubra eq 0.1 mg-20 mcg tablet[CE]	1	
aurovela 1.5/30 (21) 1.5 mg-30 mcg tablet[CE]	1	
aurovela 1/20 (21) 1 mg-20 mcg tablet[CE]	1	
aurovela 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
aurovela fe 1-20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
aurovela fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
AUSTEDO 12 MG TABLET	1	PA,QL(120 per 30 days)
AUSTEDO 6 MG TABLET	1	PA,QL(60 per 30 days)
AUSTEDO 9 MG TABLET	1	PA,QL(120 per 30 days)
AUTO-LANCET MINI	1	
AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	1	
AUTOLET IMPRESSION LANCING DEVICE KIT	1	
AUTOLET LANCING DEVICE	1	
AUTOLET PLUS LANCING DEVICE	1	
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
AUTOPEN 2 TO 42 UNITS SUBCUTANEOUS	1	
aviane 0.1 mg-20 mcg tablet[CE]	1	
AYR SALINE 0.65 % NASAL SPRAY AEROSOL	1	
ayuna 0.15 mg-0.03 mg tablet[CE]	1	
azathioprine 50 mg tablet	1	
azelastine 0.1% (137 mcg) spry	1	QL(30 per 25 days)
azelastine 0.15% nasal spray	1	QL(30 per 25 days)
azelastine hcl 0.05% drops	1	
azithromycin 1 gm pwd packet	1	
azithromycin 100 mg/5 ml susp	1	
azithromycin 200 mg/5 ml susp	1	
azithromycin 250 mg tablet	1	
azithromycin 500 mg tablet	1	
azithromycin 600 mg tablet	1	QL(16 per 60 days)
azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
BABY AYR SALINE 0.65 % NASAL DROPS	1	
bacitracin 500 unit/gm ointmnt	1	
bacitracin 500 unit/gm ointmnt	1	
bacitracin 500 unit/gm ophth	1	
bacitracin zn 500 unit/gm oint	1	
bacitracin zn 500 unit/gm oint	1	
bacitracin-polymyxin eye oint	1	
baclofen 10 mg tablet	1	QL(240 per 30 days)
baclofen 20 mg tablet	1	QL(120 per 30 days)
baclofen 5 mg tablet	1	QL(90 per 30 days)
BALCOLTRA 0.1 MG-0.02 MG(21)/36.5 MG(7) TABLET[CE]	1	
balsalazide disodium 750 mg cp	1	QL(270 per 30 days)
BALVERSA 3 MG TABLET	1	PA,QL(90 per 30 days)
BALVERSA 4 MG TABLET	1	PA,QL(60 per 30 days)
BALVERSA 5 MG TABLET	1	PA,QL(30 per 30 days)
balziva (28) 0.4 mg-35 mcg tablet[CE]	1	
banophen 25 mg capsule	1	
banophen 25 mg tablet	1	
banophen 50 mg capsule	1	
BANZEL 200 MG TABLET	1	PA,QL(480 per 30 days)
BANZEL 40 MG/ML ORAL SUSPENSION	1	PA,QL(2760 per 30 days)
BANZEL 400 MG TABLET	1	PA,QL(240 per 30 days)
BARACLUDE 0.05 MG/ML ORAL SOLUTION	1	QL(630 per 30 days)
BD ALCOHOL SWABS	1	
BD ALLERGIST TRAY REG BEVEL 1 ML 26 GAUGE X 1/2" SYRINGE	1	
BD ALLERGIST TRAY REG BEVEL 1 ML 27 X 1/2" SYRINGE	1	
BD ALLERGIST TRAY REG BEVEL 1/2 ML 27 X 1/2"	1	
BD AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16"	1	
BD BLUNT NEEDLE 18GX1-1/2"	1	
BD ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2" SYRINGE	1	
BD ECLIPSE NEEDLE 18GX1 1/2"	1	
BD FILTER NEEDLE-5 MICRON 19 X 1 1/2"	1	
BD INSULIN SYRINGE SAFETY-LOK 1 ML 29 GAUGE X 1/2"	1	
BD INSULIN SYRINGE U-500 1/2 ML 31 GAUGE X 15/64"	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
BD INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"	1	
BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 GAUGE X 1/2"	1	
BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 31 GAUGE X 5/16"	1	
BD INSULIN SYRINGE ULTRA-FINE 0.5 ML 30 GAUGE X 1/2"	1	
BD INSULIN SYRINGE ULTRA-FINE 0.5 ML 31 GAUGE X 5/16"	1	
BD INSULIN SYRINGE ULTRA-FINE 1 ML 30 GAUGE X 1/2"	1	
BD INSULIN SYRINGE ULTRA-FINE 1 ML 31 GAUGE X 5/16"	1	
BD INTEGRA SYRINGE 3 ML 25 GAUGE X 1"	1	
BD LANCETS 33G	1	
BD MICROTAINER LANCET 21 GAUGE	1	
BD MICROTAINER LANCET 30 GAUGE	1	
BD NANO 2ND GEN PEN NEEDLE 32 GAUGE X 5/32"	1	
BD SAFETYGLIDE ALLERGIST TRAY 1 ML 27 X 1/2" SYRINGE	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64"	1	
BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"	1	
BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8"	1	
BD ULTRA FINE LANCETS 33 GAUGE	1	
BD ULTRA-FINE II LANCETS 30 GAUGE	1	
BD ULTRA-FINE MICRO PEN NEEDLE 32 GAUGE X 1/4"	1	
BD ULTRA-FINE MINI PEN NEEDLE 31 GAUGE X 3/16"	1	
BD ULTRA-FINE NANO PEN NEEDLE 32 GAUGE X 5/32"	1	
BD ULTRA-FINE ORIGINAL PEN NEEDLE 29 GAUGE X 1/2"	1	
BD ULTRA-FINE SHORT PEN NEEDLE 31 GAUGE X 5/16"	1	
BD VEO INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64"	1	
BD VEO INSULIN SYRINGE ULTRA-FINE 0.3 ML 31 GAUGE X 15/64"	1	
BD VEO INSULIN SYRINGE ULTRA-FINE 1 ML 31 GAUGE X 15/64"	1	
BD VEO INSULIN SYRINGE ULTRA-FINE 1/2 ML 31 GAUGE X 15/64"	1	
bekyree 28 day tablet[CE]	1	
benazepril hcl 10 mg tablet[EDS]	1	
benazepril hcl 20 mg tablet[EDS]	1	
benazepril hcl 40 mg tablet[EDS]	1	
benazepril hcl 5 mg tablet[EDS]	1	
benazepril-hctz 10-12.5 mg tab	1	
benazepril-hctz 20-12.5 mg tab[EDS]	1	
benazepril-hctz 20-25 mg tab[EDS]	1	
benazepril-hctz 5-6.25 mg tab	1	
BENLYSTA 200 MG/ML SUBCUTANEOUS AUTO-INJECTOR	1	PA,QL(8 per 28 days)
BENLYSTA 200 MG/ML SUBCUTANEOUS SYRINGE	1	PA,QL(8 per 28 days)
benznidazole 100 mg tablet	1	QL(240 per 365 days)
benznidazole 12.5 mg tablet	1	QL(720 per 365 days)
benzonatate 100 mg capsule	1	
benzonatate 200 mg capsule	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
benztropine mes 0.5 mg tab[EDS]	1	
benztropine mes 1 mg tablet[EDS]	1	
benztropine mes 2 mg tablet[EDS]	1	
betamethasone dp 0.05% crm	1	
betamethasone dp 0.05% lot	1	
betamethasone dp 0.05% oint	1	
betamethasone dp aug 0.05% crm	1	
betamethasone dp aug 0.05% gel	1	
betamethasone dp aug 0.05% lot	1	
betamethasone dp aug 0.05% oin	1	
betamethasone va 0.1% cream	1	
betamethasone va 0.1% lotion	1	
betamethasone valer 0.1% ointm	1	
BETASEPT SURGICAL SCRUB 4 % TOPICAL LIQUID	1	
betaxolol 10 mg tablet	1	
betaxolol 20 mg tablet	1	
bethanechol 10 mg tablet	1	
bethanechol 25 mg tablet	1	
bethanechol 5 mg tablet	1	
bethanechol 50 mg tablet	1	
BEVESPI AEROSPHERE 9 MCG-4.8 MCG HFA AEROSOL INHALER	1	QL(10.7 per 30 days)
bexarotene 75 mg capsule	1	PA,QL(300 per 30 days)
bicalutamide 50 mg tablet	1	QL(30 per 30 days)
BIKTARVY 30 MG-120 MG-15 MG TABLET	1	QL(30 per 30 days)
BIKTARVY 50 MG-200 MG-25 MG TABLET	1	QL(30 per 30 days)
bisa-lax (bisacodyl) 5 mg tablet,delayed release	1	
bisacodyl ec 5 mg tablet	1	
bismatrol 525 mg/15 ml susp	1	
bismatrol 525 mg/30 ml susp	1	
bisoprolol fumarate 10 mg tab[EDS]	1	
bisoprolol fumarate 5 mg tab[EDS]	1	
bisoprolol-hctz 10-6.25 mg tab[EDS]	1	
bisoprolol-hctz 2.5-6.25 mg tb[EDS]	1	
bisoprolol-hctz 5-6.25 mg tab[EDS]	1	
blisovi 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
blisovi fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
blisovi fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
bosentan 125 mg tablet	1	PA,QL(60 per 30 days)
bosentan 62.5 mg tablet	1	PA,QL(60 per 30 days)
BRAFTOVI 50 MG CAPSULE	1	PA,QL(120 per 30 days)
BRAFTOVI 75 MG CAPSULE	1	PA,QL(180 per 30 days)
BREATHERITE MDI SPACER	1	
BREATHERITE SPACER AND MASK, ADULT	1	
BREATHERITE SPACER AND MASK, CHILD	1	
BREATHERITE SPACER AND MASK, INFANT	1	
BREATHERITE SPACER AND MASK, NEONATE	1	
BREATHERITE SPACER AND MASK, SMALL CHILD	1	
BREATHERITE VALVED MDI CHAMBER SPACER	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
BREATHERITE VALVED MDI SPACER	1	
briellyn 0.4 mg-35 mcg tablet[CE]	1	
brimonidine 0.2% eye drop	1	QL(10 per 30 days)
bromfed dm 2 mg-30 mg-10 mg/5 ml oral syrup	1	
bromphen-pse-dm 2-30-10 mg/5ml	1	
BRUKINSA 80 MG CAPSULE	1	PA,QL(120 per 30 days)
budesonide 0.25 mg/2 ml susp	1	QL(240 per 30 days)
budesonide 0.5 mg/2 ml susp	1	QL(240 per 30 days)
budesonide 1 mg/2 ml inh susp	1	QL(120 per 30 days)
budesonide 32 mcg nasal spray	1	QL(18 per 30 days)
budesonide ec 3 mg capsule	1	
budesonide-formoterol 160-4.5	1	QL(10.2 per 30 days)
budesonide-formoterol 80-4.5	1	QL(10.2 per 30 days)
BULLSEYE MINI SAFETY LANCETS 21 GAUGE	1	
BULLSEYE MINI SAFETY LANCETS 25 GAUGE	1	
BULLSEYE MINI SAFETY LANCETS 28 GAUGE	1	
bumetanide 0.5 mg tablet	1	
bumetanide 1 mg tablet	1	
bumetanide 2 mg tablet	1	
buprenorphine 10 mcg/hr patch	1	QL(4 per 28 days)
buprenorphine 15 mcg/hr patch	1	QL(4 per 28 days)
buprenorphine 2 mg tablet sl	1	QL(90 per 30 days)
buprenorphine 20 mcg/hr patch	1	QL(4 per 28 days)
buprenorphine 5 mcg/hr patch	1	QL(4 per 28 days)
buprenorphine 7.5 mcg/hr patch	1	QL(4 per 28 days)
buprenorphine 8 mg tablet sl	1	QL(90 per 30 days)
buprenorphine-nalox 12-3mg flm	1	QL(60 per 30 days)
buprenorphine-nalox 2-0.5mg fm	1	QL(90 per 30 days)
buprenorphine-nalox 2-0.5mg tb	1	QL(90 per 30 days)
buprenorphine-nalox 4-1mg film	1	QL(90 per 30 days)
buprenorphine-nalox 8-2 mg tab	1	QL(90 per 30 days)
buprenorphine-nalox 8-2mg film	1	QL(90 per 30 days)
bupropion hcl 100 mg tablet[EDS]	1	QL(180 per 30 days)
bupropion hcl 75 mg tablet[EDS]	1	QL(180 per 30 days)
bupropion hcl sr 100 mg tablet[EDS]	1	QL(120 per 30 days)
bupropion hcl sr 150 mg tablet[CE]	1	QL(90 per 30 days)
bupropion hcl sr 150 mg tablet[EDS]	1	QL(90 per 30 days)
bupropion hcl sr 200 mg tablet[EDS]	1	QL(60 per 30 days)
bupropion hcl xl 150 mg tablet[EDS]	1	QL(90 per 30 days)
bupropion hcl xl 300 mg tablet[EDS]	1	QL(30 per 30 days)
buspirone hcl 10 mg tablet	1	
buspirone hcl 15 mg tablet	1	
buspirone hcl 30 mg tablet	1	
buspirone hcl 5 mg tablet	1	
buspirone hcl 7.5 mg tablet	1	
butalb-acetamin-caf-cod 50-325	1	QL(360 per 30 days)
butalb-acetamin-caff 50-325-40	1	QL(180 per 30 days)
butalb-aspirin-caffe 50-325-40	1	QL(180 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
butalbital-acetaminophn 50-325	1	QL(180 per 30 days)
butalbital-asa-caffeine cap	1	QL(180 per 30 days)
c-nate dha 28 mg iron-1 mg-200 mg capsule	1	
cabergoline 0.5 mg tablet	1	QL(16 per 28 days)
CABOMETYX 20 MG TABLET	1	PA,QL(30 per 30 days)
CABOMETYX 40 MG TABLET	1	PA,QL(30 per 30 days)
CABOMETYX 60 MG TABLET	1	PA,QL(30 per 30 days)
cal-gest antacid 200 mg calcium (500 mg) chewable tablet	1	
calcipotriene 0.005% cream	1	PA,QL(120 per 30 days)
calcipotriene 0.005% solution	1	PA,QL(60 per 30 days)
calcitonin-salmon 200 units sp	1	QL(3.7 per 28 days)
calcitriol 0.25 mcg capsule	1	
calcitriol 0.5 mcg capsule	1	
calcitriol 1 mcg/ml solution	1	
calcium 500 + d 500 mg-5 mcg (200 unit) tablet	1	
calcium 500 mg chewable tablet	1	
calcium 500 mg-vit d3 5 mcg tb	1	
calcium 500 with d 500 mg-10 mcg (400 unit) tablet	1	
calcium 600 + d(3) 600 mg-10 mcg (400 unit) tablet	1	
calcium 600 mg calcium (1,500 mg) tablet	1	
calcium 600 mg tablet	1	
calcium 600-vit d3 400 tablet	1	
calcium 600-vit d3 800 tablet	1	
calcium acetate 667 mg gelcap	1	
calcium acetate 667 mg tablet	1	
calcium acetate 668 mg tablet	1	
calcium antacid 1,000 mg tab	1	
calcium antacid 200 mg calcium (500 mg) chewable tablet	1	
calcium antacid 300 mg (750 mg) chewable tablet	1	
calcium antacid 320 mg calcium (750 mg) chewable tablet	1	
calcium antacid 400 mg calcium (1,000 mg) chewable tablet	1	
calcium carb 1,250 mg/5 ml sus	1	
calcium carbonate 648 mg tab	1	
CALPHRON 667 MG TABLET	1	
CALQUENCE 100 MG CAPSULE	1	PA,QL(60 per 30 days)
camila 0.35 mg tablet[CE]	1	
camrese 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
camrese lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
capecitabine 150 mg tablet	1	PA,QL(630 per 30 days)
capecitabine 500 mg tablet	1	PA,QL(189 per 30 days)
CAPRON DMT 30 MG-30 MG TABLET	1	
carbamazepine 100 mg tab chew	1	
carbamazepine 100 mg/5 ml susp	1	
carbamazepine 200 mg tablet	1	
carbamazepine 200 mg/10ml susp	1	
carbamazepine er 100 mg cap	1	
carbamazepine er 100 mg tablet	1	QL(120 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
carbamazepine er 200 mg cap	1	
carbamazepine er 200 mg tablet	1	QL(120 per 30 days)
carbamazepine er 300 mg cap	1	
carbamazepine er 400 mg tablet	1	QL(120 per 30 days)
carbidopa-levo er 25-100 tab	1	
carbidopa-levo er 50-200 tab	1	
carbidopa-levodopa 10-100 tab[EDS]	1	
carbidopa-levodopa 100 mg-enta	1	
carbidopa-levodopa 125 mg-enta	1	
carbidopa-levodopa 150 mg-enta	1	
carbidopa-levodopa 200 mg-enta	1	
carbidopa-levodopa 25-100 tab[EDS]	1	
carbidopa-levodopa 25-250 tab[EDS]	1	
carbidopa-levodopa 50 mg-enta	1	
carbidopa-levodopa 75 mg-enta	1	
carbinoxamine 4 mg/5 ml liquid	1	
CARELANCE ULTIMATE COMFORT LANCING DEVICE	1	
CAREONE LANCING DEVICE	1	
CAREONE THIN LANCET	1	
CAREONE ULTRA THIN LANCET	1	
CARESENS LANCETS 30 GAUGE	1	
CARESENS PREMIUM COMFORT LANCING DEVICE	1	
CARETOUCH ALCOHOL PREP PAD TOPICAL PADS	1	
CARETOUCH LANCING DEVICE	1	
CARETOUCH TWIST LANCET 28 GAUGE	1	
CARETOUCH TWIST LANCET 30 GAUGE	1	
CARETOUCH TWIST LANCET 33 GAUGE	1	
carisoprodol 350 mg tablet	1	QL(120 per 30 days)
carteolol hcl 1% eye drops	1	
cartia xt 120 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
cartia xt 180 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
cartia xt 240 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
cartia xt 300 mg capsule,extended release	1	QL(30 per 30 days)
carvedilol 12.5 mg tablet[EDS]	1	
carvedilol 25 mg tablet[EDS]	1	
carvedilol 3.125 mg tablet[EDS]	1	
carvedilol 6.25 mg tablet[EDS]	1	
CAYA CONTOURED 65 MM-80 MM VAGINAL DIAPHRAGM[CE]	1	
caziant (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet[CE]	1	
cefaclor 125 mg/5 ml susp	1	
cefaclor 250 mg capsule	1	
cefaclor 250 mg/5 ml susp	1	
cefaclor 375 mg/5 ml suspen	1	
cefaclor 500 mg capsule	1	
cefadroxil 1 gm tablet	1	
cefadroxil 250 mg/5 ml susp	1	
cefadroxil 500 mg capsule	1	
cefadroxil 500 mg/5 ml susp	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
cefdinir 125 mg/5 ml susp	1	
cefdinir 250 mg/5 ml susp	1	
cefdinir 300 mg capsule	1	
cefixime 100 mg/5 ml susp	1	
cefixime 200 mg/5 ml susp	1	
cefixime 400 mg capsule	1	
cefpodoxime 100 mg tablet	1	
cefpodoxime 100 mg/5 ml susp	1	
cefpodoxime 200 mg tablet	1	
cefpodoxime 50 mg/5 ml susp	1	
cefprozil 125 mg/5 ml susp	1	
cefprozil 250 mg tablet	1	
cefprozil 250 mg/5 ml susp	1	
cefprozil 500 mg tablet	1	
cefuroxime axetil 250 mg tab	1	
cefuroxime axetil 500 mg tab	1	
celecoxib 100 mg capsule	1	QL(60 per 30 days)
celecoxib 200 mg capsule	1	QL(60 per 30 days)
celecoxib 400 mg capsule	1	QL(60 per 30 days)
celecoxib 50 mg capsule	1	QL(60 per 30 days)
centratex 106 mg iron-1 mg capsule	1	
cephalexin 125 mg/5 ml susp	1	
cephalexin 250 mg capsule	1	
cephalexin 250 mg/5 ml susp	1	
cephalexin 500 mg capsule	1	
cephalexin 750 mg capsule	1	
CERDELGA 84 MG CAPSULE	1	PA
cetirizine hcl 1 mg/ml soln	1	QL(300 per 30 days)
cetirizine hcl 10 mg tablet	1	
cetirizine hcl 5 mg tablet	1	
CHANTIX 0.5 MG TABLET[CE]	1	QL(56 per 28 days)
CHANTIX 1 MG CONT MONTH BOX[CE]	1	QL(56 per 28 days)
CHANTIX 1 MG TABLET[CE]	1	QL(56 per 28 days)
CHANTIX STARTING MONTH BOX[CE]	1	QL(53 per 28 days)
charlotte 24 fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet[CE]	1	
chateal (28) 0.15 mg-0.03 mg tablet[CE]	1	
chateal eq (28) 0.15 mg-0.03 mg tablet[CE]	1	
CHEMET 100 MG CAPSULE	1	
CHEMSTRIP 10 MD	1	
chest congestion relief 400 mg tablet	1	
chest congestion relief dm 20 mg-400 mg tablet	1	
chest congestion-cough relief 20 mg-400 mg tablet	1	
child mucus relief cough 5 mg-100 mg/5 ml oral liquid	1	
child mucus relief expectorant 100 mg/5 ml oral liquid	1	
child vitamin-iron tab chew	1	
children's acetaminophen 160 mg chewable tablet	1	
children's acetaminophen 160 mg/5 ml oral liquid	1	
children's acetaminophen 160 mg/5 ml oral suspension	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
CHILDREN'S ALAWAY 0.025 % (0.035 %) EYE DROPS	1	
children's all day allergy (cetirizine) 1 mg/ml oral solution	1	QL(300 per 30 days)
children's allergy (cetirizine) 1 mg/ml oral solution	1	QL(300 per 30 days)
children's allergy (diphenhydramine) 12.5 mg/5 ml oral liquid	1	
children's allergy relief (cetirizine) 1 mg/ml oral solution	1	QL(300 per 30 days)
children's allergy relief (loratadine) 5 mg/5 ml oral solution	1	
children's aspirin 81 mg chewable tablet	1	
children's cetirizine 1 mg/ml oral solution	1	QL(300 per 30 days)
CHILDREN'S CHEW MULTIVIT WITH IRON 15 MG IRON TABLET	1	
children's chewable multivitamin 300 mcg tablet	1	
CHILDREN'S CHEWABLE VITAMIN TABLET	1	
children's chewables 300 mcg tablet	1	
children's chewables extra c 300 mcg tablet	1	
children's diphenhydramine 12.5 mg/5 ml oral liquid	1	
children's ibuprofen 100 mg/5 ml oral suspension	1	
children's iron 15 mg iron (75 mg)/ml oral drops	1	
children's mapap 160 mg chewable tablet	1	
children's mucinex cough 5 mg-100 mg/5 ml oral liquid	1	
children's pain and fever relief 160 mg/5 ml oral suspension	1	
children's pain relief 160 mg/5 ml oral suspension	1	
children's pain reliever 160 mg/5 ml oral suspension	1	
childs/iron chewable tablet	1	
CHLOR-TRIMETON 4 MG TABLET	1	
chlordiazepoxide 10 mg capsule	1	QL(120 per 30 days)
chlordiazepoxide 25 mg capsule	1	QL(120 per 30 days)
chlordiazepoxide 5 mg capsule	1	QL(120 per 30 days)
chlorhexidine 0.12% rinse	1	
chloroquine ph 250 mg tablet	1	
chloroquine ph 500 mg tablet	1	
chlorpromazine 10 mg tablet	1	
chlorpromazine 100 mg tablet	1	
chlorpromazine 200 mg tablet	1	
chlorpromazine 25 mg tablet	1	
chlorpromazine 50 mg tablet	1	
chlorthalidone 25 mg tablet[EDS]	1	
chlorthalidone 50 mg tablet[EDS]	1	
CHOLBAM 250 MG CAPSULE	1	PA,QL(120 per 30 days)
CHOLBAM 50 MG CAPSULE	1	PA,QL(120 per 30 days)
cholestyramine light 4 gram oral powder	1	
cholestyramine light 4 gram powder for susp in a packet	1	
cholestyramine light packet	1	
cholestyramine packet	1	
cholestyramine powder	1	
ciclopirox 0.77% cream	1	
ciclopirox 0.77% gel	1	
ciclopirox 0.77% topical susp	1	
ciclopirox 1% shampoo	1	
cilostazol 100 mg tablet	1	
cilostazol 50 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
CIMDUO 300 MG-300 MG TABLET	1	QL(30 per 30 days)
cimetidine 200 mg tablet	1	
cimetidine 300 mg tablet	1	
cimetidine 300 mg/5 ml soln	1	
cimetidine 400 mg tablet	1	
cimetidine 800 mg tablet	1	
cinacalcet hcl 30 mg tablet	1	QL(60 per 30 days)
cinacalcet hcl 60 mg tablet	1	QL(60 per 30 days)
cinacalcet hcl 90 mg tablet	1	QL(120 per 30 days)
CIPRODEX 0.3 %-0.1 % EAR DROPS,SUSPENSION	1	
ciproflox-dexameth otic susp	1	
ciprofloxacin 0.2% otic soln	1	
ciprofloxacin 0.3% eye drop	1	
ciprofloxacin 250 mg/5 ml susp	1	
ciprofloxacin 500 mg/5 ml susp	1	
ciprofloxacin hcl 250 mg tab	1	
ciprofloxacin hcl 500 mg tab	1	
ciprofloxacin hcl 750 mg tab	1	
citalopram hbr 10 mg tablet[EDS]	1	QL(30 per 30 days)
citalopram hbr 10 mg/5 ml soln	1	
citalopram hbr 20 mg tablet[EDS]	1	QL(60 per 30 days)
citalopram hbr 40 mg tablet[EDS]	1	QL(30 per 30 days)
citrate of magnesia oral	1	
clarithromycin 125 mg/5 ml sus	1	
clarithromycin 250 mg tablet	1	
clarithromycin 250 mg/5 ml sus	1	
clarithromycin 500 mg tablet	1	
clearlax 17 gram/dose oral powder	1	QL(1054 per 30 days)
CLENPIQ 10 MG-3.5 GRAM-12 GRAM/160 ML ORAL SOLUTION	1	
CLEVER CHEK LANCETS 30 GAUGE	1	
CLEVER CHOICE HOLDING CHAMBER-LARGE MASK	1	
CLEVER CHOICE HOLDING CHAMBER-MEDIUM MASK	1	
CLEVER CHOICE HOLDING CHAMBER-SMALL MASK	1	
clindacin etz 1 % topical swab	1	
clindacin p 1 % topical swab	1	
clindamycin 2% vaginal cream	1	
clindamycin hcl 150 mg capsule	1	
clindamycin hcl 300 mg capsule	1	
clindamycin hcl 75 mg capsule	1	
clindamycin pediatric 75 mg/5 ml oral solution	1	
clindamycin ph 1% gel	1	
clindamycin ph 1% solution	1	
clindamycin phos 1% pledget	1	
clindamycin phosp 1% lotion	1	
clobazam 10 mg tablet	1	PA,QL(60 per 30 days)
clobazam 2.5 mg/ml suspension	1	PA,QL(480 per 30 days)
clobazam 20 mg tablet	1	PA,QL(60 per 30 days)
clobetasol 0.05% cream	1	
clobetasol 0.05% gel	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
clobetasol 0.05% ointment	1	
clobetasol 0.05% shampoo	1	
clobetasol 0.05% solution	1	
clobetasol emollient 0.05% crm	1	
clodan 0.05 % shampoo	1	
clomipramine 25 mg capsule	1	
clomipramine 50 mg capsule	1	
clomipramine 75 mg capsule	1	
clonazepam 0.125 mg dis tab	1	
clonazepam 0.25 mg odt	1	
clonazepam 0.5 mg dis tablet	1	
clonazepam 0.5 mg tablet	1	
clonazepam 1 mg dis tablet	1	
clonazepam 1 mg tablet	1	
clonazepam 2 mg odt	1	
clonazepam 2 mg tablet	1	
clonidine hcl 0.1 mg tablet[EDS]	1	
clonidine hcl 0.2 mg tablet[EDS]	1	
clonidine hcl 0.3 mg tablet[EDS]	1	
clopidogrel 300 mg tablet	1	QL(1 per 30 days)
clopidogrel 75 mg tablet[EDS]	1	QL(30 per 30 days)
clorazepate 15 mg tablet	1	
clorazepate 3.75 mg tablet	1	
clorazepate 7.5 mg tablet	1	
clotrimazole 1% solution	1	
clotrimazole 1% topical cream	1	
clotrimazole 1% vaginal cream	1	
clotrimazole 10 mg troche	1	
clotrimazole 3 day 2 % vaginal cream	1	
clotrimazole-3 2 % vaginal cream	1	
clotrimazole-betamethasone crm	1	
clovique 250 mg capsule	1	PA
clozapine 100 mg tablet	1	
clozapine 200 mg tablet	1	
clozapine 25 mg tablet	1	
clozapine 50 mg tablet	1	
COAGUCHEK LANCETS	1	
codeine sulfate 15 mg tablet	1	QL(360 per 30 days)
codeine sulfate 30 mg tablet	1	QL(360 per 30 days)
codeine sulfate 60 mg tablet	1	QL(180 per 30 days)
codeine-guaifen 10-100 mg/5 ml	1	
colchicine 0.6 mg tablet	1	QL(120 per 30 days)
colestipol hcl 1 gm tablet	1	
colestipol hcl granules	1	
colestipol hcl granules packet	1	
colocort 100 mg/60 ml enema	1	
COLOR LANCETS 21 GAUGE	1	
COMBIVENT RESPIMAT 20 MCG-100 MCG/ACTUATION SOLUTION FOR INHALATION	1	QL(4 per 20 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
COMETRIQ 100 MG/DAY (80 MG X 1-20 MG X 1) CAPSULES	1	PA,QL(56 per 28 days)
COMETRIQ 140 MG/DAY (80 MG X 1-20 MG X 3) CAPSULES	1	PA,QL(112 per 28 days)
COMETRIQ 60 MG/DAY (20 MG X 3/DAY) CAPSULES	1	PA,QL(84 per 28 days)
COMFORT EZ LANCETS 21 GAUGE	1	
COMFORT EZ LANCETS 23 GAUGE	1	
COMFORT EZ LANCETS 28 GAUGE	1	
COMFORT LANCETS	1	
COMIRNATY COVID-19 VACCINE VL	1	
COMPACT SPACE CHAMBER	1	
COMPACT SPACE CHAMBER PLUS	1	
COMPACT SPACE CHAMBER-LRG MASK	1	
COMPACT SPACE CHAMBER-MED MASK	1	
COMPACT SPACE CHAMBER-SM MASK	1	
COMPLERA 200 MG-25 MG-300 MG TABLET	1	QL(30 per 30 days)
complete allergy 25 mg capsule	1	
complete allergy 25 mg tablet	1	
complete allergy medicine 25 mg capsule	1	
complete allergy medicine 25 mg tablet	1	
complete natal dha 29 mg-1 mg-250 mg-200 mg oral pack	1	
completenate 29 mg iron-1 mg chewable tablet	1	
compro 25 mg rectal suppository	1	
CONDOMS-PREM LUBRICATED[CE]	1	
constulose 10 gram/15 ml oral solution	1	
COPIKTRA 15 MG CAPSULE	1	PA,QL(56 per 28 days)
COPIKTRA 25 MG CAPSULE	1	PA,QL(56 per 28 days)
cormax 0.05% solution	1	
cortisone 25 mg tablet	1	
COSENTYX 150 MG/ML SUBCUTANEOUS SYRINGE	1	PA,QL(32 per 365 days)
COSENTYX 300 MG/2 SYRINGES (150 MG/ML) SUBCUTANEOUS	1	PA,QL(32 per 365 days)
COSENTYX 75 MG/0.5 ML SUBCUTANEOUS SYRINGE	1	PA,QL(8.5 per 365 days)
COSENTYX PEN 150 MG/ML SUBCUTANEOUS	1	PA,QL(32 per 365 days)
COSENTYX PEN 300 MG/2 PENS (150 MG/ML) SUBCUTANEOUS	1	PA,QL(32 per 365 days)
cough relief 15 mg/5 ml oral liquid	1	
cough syrup 100 mg/5 ml oral liquid	1	
cough syrup dm 10 mg-100 mg/5 ml	1	
CREON 12,000-38,000-60,000 UNIT CAPSULE,DELAYED RELEASE	1	
CREON 24,000-76,000-120,000 UNIT CAPSULE,DELAYED RELEASE	1	
CREON 3,000 UNIT-9,500 UNIT-15,000 UNIT CAPSULE,DELAYED RELEASE	1	
CREON 36,000 UNIT-114,000 UNIT-180,000 UNIT CAPSULE,DELAYED RELEASE	1	
CREON 6,000-19,000-30,000 UNIT CAPSULE,DELAYED RELEASE	1	
CRESEMBA 186 MG CAPSULE	1	PA
CRIXIVAN 200 MG CAPSULE	1	QL(450 per 30 days)
CRIXIVAN 400 MG CAPSULE	1	QL(270 per 30 days)
cromolyn 100 mg/5 ml oral conc	1	
cromolyn 20 mg/2 ml neb soln	1	
cromolyn 4% eye drops	1	
cromolyn sodium nasal spray	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
cryselle (28) 0.3 mg-30 mcg tablet[CE]	1	
CURITY ALCOHOL SWABS	1	
CUTTER BACKWOODS 25 % TOPICAL PUMP SPRAY	1	
CUTTER BACKWOODS 25 % TOPICAL SPRAY	1	
CUTTER BACKWOODS DRY 25 % TOPICAL SPRAY	1	
CUTTER SKINSATIONS 7 % TOPICAL SPRAY	1	
CVS THIN 26G LANCETS	1	
cyanocobalamin 1,000 mcg/ml vl	1	QL(30 per 30 days)
cyclafem 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
cyclafem 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet[CE]	1	
cyclobenzaprine 10 mg tablet	1	
cyclobenzaprine 5 mg tablet	1	
cyclopentolate 1% eye drops	1	
cyclopentolate hcl 2% drops	1	
cyclophosphamide 25 mg capsule	1	QL(960 per 30 days)
cyclophosphamide 25 mg tablet	1	QL(960 per 30 days)
cyclophosphamide 50 mg capsule	1	QL(480 per 30 days)
cyclophosphamide 50 mg tablet	1	QL(480 per 30 days)
cyclosporine 100 mg capsule	1	QL(720 per 30 days)
cyclosporine 25 mg capsule	1	
cyclosporine modified 100 mg	1	QL(720 per 30 days)
cyclosporine modified 100mg/ml	1	
cyclosporine modified 25 mg	1	
cyclosporine modified 50 mg	1	
cyproheptadine 2 mg/5 ml syrup	1	
cyproheptadine 4 mg tablet	1	
cyred 0.15 mg-0.03 mg tablet[CE]	1	
cyred eq 0.15 mg-0.03 mg tablet[CE]	1	
CYSTADANE 1 GRAM/1.7 ML ORAL POWDER	1	
CYSTAGON 150 MG CAPSULE	1	
CYSTAGON 50 MG CAPSULE	1	
CYSTARAN 0.44 % EYE DROPS	1	PA,QL(60 per 28 days)
dalfampridine er 10 mg tablet	1	PA,QL(60 per 30 days)
danazol 100 mg capsule	1	
danazol 200 mg capsule	1	
danazol 50 mg capsule	1	
dantrolene sodium 100 mg cap	1	
dantrolene sodium 25 mg cap	1	
dantrolene sodium 50 mg cap	1	
dapsone 100 mg tablet	1	
dapsone 25 mg tablet	1	
dasetta 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
dasetta 7/7/7 (28) 0.5 mg(7)/0.75 mg(7)/1 mg(7)-35 mcg tablet[CE]	1	
DAURISMO 100 MG TABLET	1	PA,QL(30 per 30 days)
DAURISMO 25 MG TABLET	1	PA,QL(60 per 30 days)
daysee 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
deblitane 0.35 mg tablet[CE]	1	
decadron 0.5 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
decadron 0.75 mg tablet	1	
decadron 4 mg tablet	1	
decadron 6 mg tablet	1	
deep sea nasal 0.65 % spray aerosol	1	
deferasirox 125 mg tb for susp	1	PA,QL(150 per 30 days)
deferasirox 180 mg tablet	1	PA,QL(600 per 30 days)
deferasirox 250 mg tb for susp	1	PA,QL(150 per 30 days)
deferasirox 360 mg tablet	1	PA,QL(300 per 30 days)
deferasirox 500 mg tb for susp	1	PA,QL(150 per 30 days)
deferasirox 90 mg tablet	1	PA,QL(1200 per 30 days)
DELSTRIGO 100 MG-300 MG-300 MG TABLET	1	QL(30 per 30 days)
delsym cough-chest congestion dm 5 mg-100 mg/5 ml oral liquid	1	
demeclocycline 150 mg tablet	1	
demeclocycline 300 mg tablet	1	
DESCOVY 200 MG-25 MG TABLET	1	QL(30 per 30 days)
desipramine 10 mg tablet	1	
desipramine 100 mg tablet	1	
desipramine 150 mg tablet	1	
desipramine 25 mg tablet	1	
desipramine 50 mg tablet	1	
desipramine 75 mg tablet	1	
desloratadine 5 mg tablet	1	QL(30 per 30 days)
desmopressin acetate 0.1 mg tb	1	QL(180 per 30 days)
desmopressin acetate 0.2 mg tb	1	QL(180 per 30 days)
desogestr-eth estrad eth estra[CE]	1	
desogestrel-ee 0.15-0.03 mg tb[CE]	1	
desvenlafaxine succnt er 100mg	1	QL(30 per 30 days)
desvenlafaxine succnt er 25 mg	1	QL(30 per 30 days)
desvenlafaxine succnt er 50 mg	1	QL(30 per 30 days)
dexamethasone 0.1% eye drop	1	
dexamethasone 0.5 mg tablet	1	
dexamethasone 0.5 mg/5 ml elx	1	
dexamethasone 0.5 mg/5 ml liq	1	
dexamethasone 0.75 mg tablet	1	
dexamethasone 1 mg tablet	1	
dexamethasone 1.5 mg tablet	1	
dexamethasone 2 mg tablet	1	
dexamethasone 4 mg tablet	1	
dexamethasone 6 mg tablet	1	
dexamethasone intensol 1 mg/ml drops (concentrate)	1	
dexmethylphenidate 10 mg tab	1	QL(60 per 30 days)
dexmethylphenidate 2.5 mg tab	1	QL(60 per 30 days)
dexmethylphenidate 5 mg tab	1	QL(60 per 30 days)
dexmethylphenidate er 10 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 15 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 20 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 25 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 30 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 35 mg cp	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
dexmethylphenidate er 40 mg cp	1	QL(30 per 30 days)
dexmethylphenidate er 5 mg cap	1	QL(30 per 30 days)
dextroamp-amphet er 10 mg cap	1	QL(30 per 30 days)
dextroamp-amphet er 15 mg cap	1	QL(30 per 30 days)
dextroamp-amphet er 20 mg cap	1	QL(60 per 30 days)
dextroamp-amphet er 25 mg cap	1	QL(60 per 30 days)
dextroamp-amphet er 30 mg cap	1	QL(60 per 30 days)
dextroamp-amphet er 5 mg cap	1	QL(30 per 30 days)
dextroamp-amphetam 12.5 mg tab	1	QL(90 per 30 days)
dextroamp-amphetam 7.5 mg tab	1	QL(90 per 30 days)
dextroamp-amphetamin 10 mg tab	1	QL(90 per 30 days)
dextroamp-amphetamin 15 mg tab	1	QL(90 per 30 days)
dextroamp-amphetamin 20 mg tab	1	QL(90 per 30 days)
dextroamp-amphetamin 30 mg tab	1	QL(60 per 30 days)
dextroamp-amphetamine 5 mg tab	1	QL(90 per 30 days)
dextroamphetamine 10 mg tab	1	QL(180 per 30 days)
dextroamphetamine 5 mg tab	1	QL(150 per 30 days)
diabetic siltussin-dm max str 10 mg-200 mg/5 ml oral liquid	1	
diarrhea relief (bismuth subsalicylate) 262 mg/15 ml oral suspension	1	
diazepam 10 mg rectal gel syst	1	
diazepam 10 mg tablet	1	QL(120 per 30 days)
diazepam 2 mg tablet	1	QL(90 per 30 days)
diazepam 2.5 mg rectal gel sys	1	
diazepam 20 mg rectal gel syst	1	
diazepam 5 mg tablet	1	QL(90 per 30 days)
diazepam 5 mg/5 ml solution	1	QL(1200 per 30 days)
diazepam 5 mg/ml oral conc	1	QL(240 per 30 days)
diazepam intensol 5 mg/ml oral concentrate	1	QL(240 per 30 days)
dibucaine 1% ointment	1	
diclofenac 0.1% eye drops	1	QL(5 per 30 days)
diclofenac pot 50 mg tablet	1	
diclofenac sod ec 25 mg tab	1	
diclofenac sod ec 50 mg tab	1	
diclofenac sod ec 75 mg tab	1	
diclofenac sod er 100 mg tab	1	
diclofenac sodium 1% gel	1	
dicloxacillin 250 mg capsule	1	
dicloxacillin 500 mg capsule	1	
dicyclomine 10 mg capsule	1	
dicyclomine 10 mg/5 ml soln	1	
dicyclomine 20 mg tablet	1	
didanosine dr 250 mg capsule	1	QL(30 per 30 days)
didanosine dr 400 mg capsule	1	QL(30 per 30 days)
digitek 125 mcg (0.125 mg) tablet	1	QL(30 per 30 days)
digitek 250 mcg (0.25 mg) tablet[EDS]	1	QL(30 per 30 days)
digox 125 mcg (0.125 mg) tablet	1	QL(30 per 30 days)
digox 250 mcg (0.25 mg) tablet	1	QL(30 per 30 days)
digoxin 0.05 mg/ml solution	1	
digoxin 125 mcg tablet[EDS]	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
digoxin 250 mcg tablet[EDS]	1	QL(30 per 30 days)
dilt-xr 120 mg capsule, extended release	1	QL(60 per 30 days)
dilt-xr 180 mg capsule, extended release[EDS]	1	QL(60 per 30 days)
dilt-xr 240 mg capsule, extended release[EDS]	1	QL(60 per 30 days)
diltiazem 120 mg tablet	1	
diltiazem 12hr er 120 mg cap	1	QL(60 per 30 days)
diltiazem 12hr er 60 mg cap	1	QL(60 per 30 days)
diltiazem 12hr er 90 mg cap	1	QL(60 per 30 days)
diltiazem 24h er(cd) 120 mg cp[EDS]	1	QL(60 per 30 days)
diltiazem 24h er(cd) 180 mg cp[EDS]	1	QL(60 per 30 days)
diltiazem 24h er(cd) 240 mg cp[EDS]	1	QL(60 per 30 days)
diltiazem 24h er(cd) 300 mg cp	1	QL(30 per 30 days)
diltiazem 24h er(cd) 360 mg cp	1	QL(30 per 30 days)
diltiazem 24h er(xr) 120 mg cp	1	QL(60 per 30 days)
diltiazem 24h er(xr) 180 mg cp[EDS]	1	QL(60 per 30 days)
diltiazem 24h er(xr) 240 mg cp	1	QL(60 per 30 days)
diltiazem 24hr er 120 mg cap[EDS]	1	QL(60 per 30 days)
diltiazem 24hr er 180 mg cap[EDS]	1	QL(60 per 30 days)
diltiazem 24hr er 240 mg cap[EDS]	1	QL(60 per 30 days)
diltiazem 24hr er 300 mg cap[EDS]	1	QL(30 per 30 days)
diltiazem 24hr er 360 mg cap[EDS]	1	QL(30 per 30 days)
diltiazem 24hr er 420 mg cap	1	QL(30 per 30 days)
diltiazem 30 mg tablet[EDS]	1	
diltiazem 60 mg tablet[EDS]	1	
diltiazem 90 mg tablet[EDS]	1	
dimethyl fumarate 30d start pk	1	PA,QL(60 per 30 days)
dimethyl fumarate dr 120 mg cp	1	PA,QL(14 per 30 days)
dimethyl fumarate dr 240 mg cp	1	PA,QL(60 per 30 days)
diphedryl 12.5 mg/5 ml oral liquid	1	
DIPHENHIST 25 MG CAPSULE	1	
diphenhydramine 25 mg capsule	1	
diphenhydramine 25 mg/10 ml	1	
diphenhydramine 25 mg/10 ml	1	
diphenhydramine 50 mg capsule	1	
diphenoxylat-atrop 2.5-0.025/5	1	
diphenoxylate-atrop 2.5-0.025	1	
dipyridamole 25 mg tablet	1	
dipyridamole 50 mg tablet	1	
dipyridamole 75 mg tablet	1	
disopyramide 100 mg capsule	1	
disopyramide 150 mg capsule	1	
disulfiram 250 mg tablet	1	
disulfiram 500 mg tablet	1	
divalproex dr 125 mg cp(sprnk)	1	
divalproex sod dr 125 mg tab[EDS]	1	
divalproex sod dr 250 mg tab[EDS]	1	
divalproex sod dr 500 mg tab[EDS]	1	
divalproex sod er 250 mg tab	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
divalproex sod er 500 mg tab	1	
docusate sodium 100 mg softgel	1	
docusil 100 mg softgel	1	
dofetilide 125 mcg capsule	1	QL(240 per 30 days)
dofetilide 250 mcg capsule	1	QL(120 per 30 days)
dofetilide 500 mcg capsule	1	QL(60 per 30 days)
DOJOLVI 8.3 KCAL/ML ORAL LIQUID	1	PA
DOK 100 MG CAPSULE	1	
dok plus tablet	1	
dolishale 90 mcg-20 mcg (28) tablet[CE]	1	
donepezil hcl 10 mg tablet[EDS]	1	QL(60 per 30 days)
donepezil hcl 5 mg tablet[EDS]	1	QL(30 per 30 days)
donepezil hcl odt 10 mg tablet[EDS]	1	QL(30 per 30 days)
donepezil hcl odt 5 mg tablet[EDS]	1	QL(30 per 30 days)
dorzolamide hcl 2% eye drops	1	QL(10 per 30 days)
dorzolamide-timolol eye drops	1	QL(10 per 30 days)
dotti 0.025 mg/24 hr transdermal patch	1	QL(8 per 28 days)
dotti 0.0375 mg/24 hr transdermal patch	1	QL(8 per 28 days)
dotti 0.05 mg/24 hr transdermal patch	1	QL(8 per 28 days)
dotti 0.075 mg/24 hr transdermal patch	1	QL(8 per 28 days)
dotti 0.1 mg/24 hr transdermal patch	1	QL(8 per 28 days)
double antibiotic (bacitrcn zn) 500 unit-10,000 unit/gram top ointment	1	
DOVATO 50 MG-300 MG TABLET	1	QL(30 per 30 days)
doxazosin mesylate 1 mg tab[EDS]	1	
doxazosin mesylate 2 mg tab[EDS]	1	
doxazosin mesylate 4 mg tab[EDS]	1	
doxazosin mesylate 8 mg tab[EDS]	1	
doxepin 10 mg capsule	1	
doxepin 10 mg/ml oral conc	1	
doxepin 100 mg capsule	1	
doxepin 150 mg capsule	1	
doxepin 25 mg capsule	1	
doxepin 50 mg capsule	1	
doxepin 75 mg capsule	1	
doxycycline 25 mg/5 ml susp	1	
doxycycline hyclate 100 mg cap	1	QL(90 per 30 days)
doxycycline hyclate 100 mg tab	1	
doxycycline hyclate 20 mg tab	1	
doxycycline hyclate 50 mg cap	1	
doxycycline mono 100 mg cap	1	QL(90 per 30 days)
doxycycline mono 100 mg tablet	1	
doxycycline mono 50 mg cap	1	QL(60 per 30 days)
doxycycline mono 50 mg tablet	1	
doxylamine-pyridoxine 10-10 mg	1	QL(120 per 30 days)
dronabinol 10 mg capsule	1	PA,QL(120 per 30 days)
dronabinol 2.5 mg capsule	1	PA,QL(120 per 30 days)
dronabinol 5 mg capsule	1	PA,QL(120 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
DROPLET GENTEEL LANCING DEVICE	1	
DROPLET LANCETS 30 GAUGE	1	
DROPLET LANCING DEVICE	1	
drosp-ee-levomef 3-0.02-0.451[CE]	1	
drosp-ee-levomef 3-0.03-0.451[CE]	1	
drospirenone-ee 3-0.02 mg tab[CE]	1	
drospirenone-ee 3-0.03 mg tab[CE]	1	
DROXIA 200 MG CAPSULE	1	
DROXIA 300 MG CAPSULE	1	
DROXIA 400 MG CAPSULE	1	
ducodyl ec 5 mg tablet	1	
duloxetine hcl dr 20 mg cap[EDS]	1	QL(60 per 30 days)
duloxetine hcl dr 30 mg cap[EDS]	1	QL(60 per 30 days)
duloxetine hcl dr 60 mg cap[EDS]	1	QL(60 per 30 days)
dutasteride 0.5 mg capsule[EDS]	1	QL(30 per 30 days)
E-Z JECT LANCETS	1	
E-Z JECT LANCETS 26 GAUGE	1	
E-Z JECT LANCETS 30 GAUGE	1	
E-Z JECT LANCETS 32 GAUGE	1	
E-Z JECT LANCETS 33 GAUGE	1	
E-Z JECT THIN LANCETS 28 GAUGE	1	
ear drops (carbamide peroxide) 6.5 %	1	
ear wax removal drops 6.5 %	1	
ear wax removal kit 6.5 % drops	1	
EASIVENT HOLDING CHAMBER	1	
EASIVENT MASK LARGE	1	
EASIVENT MASK MEDIUM	1	
EASIVENT MASK SMALL	1	
EASY COMFORT LANCETS 30 GAUGE	1	
EASY MINI EJECT LANCING DEVICE	1	
EASY TOUCH ALCOHOL PREP PADS	1	
EASY TOUCH LANCETS 26 GAUGE	1	
EASY TOUCH LANCETS 28 GAUGE	1	
EASY TOUCH LANCETS 30 GAUGE	1	
EASY TOUCH LANCETS 32 GAUGE	1	
EASY TOUCH LANCING DEVICE	1	
EASY TOUCH SAFETY LANCETS 21 GAUGE	1	
EASY TOUCH SAFETY LANCETS 23 GAUGE	1	
EASY TOUCH SAFETY LANCETS 26 GAUGE	1	
EASY TOUCH SAFETY LANCETS 28 GAUGE	1	
EASY TOUCH SAFETY LANCETS 30 GAUGE	1	
EASY TOUCH SAFETY LANCETS 32 GAUGE	1	
EASY TOUCH TWIST LANCETS 26 GAUGE	1	
EASY TOUCH TWIST LANCETS 28 GAUGE	1	
EASY TOUCH TWIST LANCETS 30 GAUGE	1	
EASY TOUCH TWIST LANCETS 32 GAUGE	1	
EASY TOUCH TWIST LANCETS 33 GAUGE	1	
EASY TWIST AND CAP LANCETS 28 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ec-naproxen 500 mg tablet,delayed release	1	
ECLIPSE NEEDLE 23 GAUGE X 1"	1	
ECLIPSE NEEDLE 25 X 5/8"	1	
ECLIPSE NEEDLE 27 GAUGE X 1/2"	1	
ECLIPSE SYRINGE 3 ML 21 GAUGE X 1"	1	
ECLIPSE SYRINGE 3 ML 25 GAUGE X 1"	1	
econtra ez 1.5 mg tablet[CE]	1	
econtra one-step 1.5 mg tablet[CE]	1	
ecpirin ec 325 mg tablet	1	
ed-apap 160 mg/5 ml oral liquid	1	
ed-spaz 0.125 mg disintegrating tablet	1	
EDURANT 25 MG TABLET	1	QL(30 per 30 days)
efavir-emtri-tenof 600-200-300	1	QL(30 per 30 days)
efavir-lamiv-tenof 400-300-300	1	QL(30 per 30 days)
efavir-lamiv-tenof 600-300-300	1	QL(30 per 30 days)
efavirenz 200 mg capsule	1	QL(120 per 30 days)
efavirenz 50 mg capsule	1	QL(480 per 30 days)
efavirenz 600 mg tablet	1	QL(30 per 30 days)
EGRIFTA 1 MG VIAL	1	PA,QL(60 per 30 days)
EGRIFTA SV 2 MG SUBCUTANEOUS SOLUTION	1	PA,QL(30 per 30 days)
elinest 0.3 mg-30 mcg tablet[CE]	1	
ELIQUIS 2.5 MG TABLET	1	QL(60 per 30 days)
ELIQUIS 5 MG TABLET	1	QL(74 per 30 days)
ELIQUIS DVT-PE TREATMENT 30-DAY STARTER 5 MG (74 TABLETS) IN DOSE PACK	1	QL(74 per 30 days)
ELLA 30 MG TABLET[CE]	1	QL(1 per 30 days)
eluryng 0.12 mg-0.015 mg/24 hr vaginal ring[CE]	1	QL(1 per 28 days)
EMBRACE LANCETS 30 GAUGE	1	
EMCYT 140 MG CAPSULE	1	QL(540 per 30 days)
EMGALITY 120 MG/ML SUBCUTANEOUS SYRINGE	1	PA,QL(2 per 30 days)
EMGALITY PEN 120 MG/ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(2 per 30 days)
emoquette 0.15 mg-0.03 mg tablet[CE]	1	
emtricitabine 200 mg capsule	1	QL(30 per 30 days)
emtricitabine-tenofv 100-150mg	1	QL(30 per 30 days)
emtricitabine-tenofv 133-200mg	1	QL(30 per 30 days)
emtricitabine-tenofv 167-250mg	1	QL(30 per 30 days)
emtricitabine-tenofv 200-300mg	1	QL(30 per 30 days)
EMTRIVA 10 MG/ML ORAL SOLUTION	1	QL(680 per 28 days)
EMTRIVA 200 MG CAPSULE	1	QL(30 per 30 days)
enalapril maleate 10 mg tab[EDS]	1	
enalapril maleate 2.5 mg tab[EDS]	1	
enalapril maleate 20 mg tab[EDS]	1	
enalapril maleate 5 mg tablet[EDS]	1	
enalapril-hctz 10-25 mg tablet[EDS]	1	
enalapril-hctz 5-12.5 mg tab[EDS]	1	
ENBREL 25 MG (1 ML) SUBCUTANEOUS POWDER FOR SOLUTION	1	PA,QL(8 per 28 days)
ENBREL 25 MG/0.5 ML (0.5 ML) SUBCUTANEOUS SYRINGE	1	PA,QL(8.16 per 28 days)
ENBREL 25 MG/0.5 ML SUBCUTANEOUS SOLUTION	1	PA,QL(8 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ENBREL 50 MG/ML (1 ML) SUBCUTANEOUS SYRINGE	1	PA,QL(78 per 365 days)
ENBREL MINI 50 MG/ML (1 ML) SUBCUTANEOUS CARTRIDGE	1	PA,QL(8 per 28 days)
ENBREL SURECLICK 50 MG/ML (1 ML) SUBCUTANEOUS PEN INJECTOR	1	PA,QL(78 per 365 days)
endocet 10 mg-325 mg tablet	1	QL(360 per 30 days)
endocet 2.5 mg-325 mg tablet	1	QL(360 per 30 days)
endocet 5 mg-325 mg tablet	1	QL(360 per 30 days)
endocet 7.5 mg-325 mg tablet	1	QL(360 per 30 days)
enema 19 gram-7 gram/118 ml	1	
enema disposable 19 gram-7 gram/118 ml	1	
ENFAMIL ENFALYTE ORAL SOLUTION	1	
enoxaparin 100 mg/ml syringe	1	QL(28 per 28 days)
enoxaparin 120 mg/0.8 ml syr	1	QL(22.4 per 28 days)
enoxaparin 150 mg/ml syringe	1	QL(28 per 28 days)
enoxaparin 30 mg/0.3 ml syr	1	QL(16.8 per 28 days)
enoxaparin 300 mg/3 ml vial	1	QL(84 per 28 days)
enoxaparin 40 mg/0.4 ml syr	1	QL(11.2 per 28 days)
enoxaparin 60 mg/0.6 ml syr	1	QL(16.8 per 28 days)
enoxaparin 80 mg/0.8 ml syr	1	QL(22.4 per 28 days)
enpresse 50-30 (6)/75-40(5)/125-30(10) tablet[CE]	1	
enskyce 0.15 mg-0.03 mg tablet[CE]	1	
entacapone 200 mg tablet	1	QL(300 per 30 days)
entecavir 0.5 mg tablet	1	QL(30 per 30 days)
entecavir 1 mg tablet	1	QL(30 per 30 days)
ENTRESTO 24 MG-26 MG TABLET	1	PA,QL(60 per 30 days)
ENTRESTO 49 MG-51 MG TABLET	1	PA,QL(60 per 30 days)
ENTRESTO 97 MG-103 MG TABLET	1	PA,QL(60 per 30 days)
enulose 10 gram/15 ml oral solution	1	
EPIDIOLEX 100 MG/ML ORAL SOLUTION	1	PA
epinastine hcl 0.05% eye drops	1	QL(5 per 25 days)
epinephrine 0.15 mg auto-injct	1	QL(4 per 30 days)
epinephrine 0.15 mg auto-injct	1	QL(4 per 30 days)
epinephrine 0.3 mg auto-inject	1	QL(4 per 30 days)
epitol 200 mg tablet	1	
ERIVEDGE 150 MG CAPSULE	1	PA,QL(28 per 28 days)
erlotinib hcl 100 mg tablet	1	PA,QL(30 per 30 days)
erlotinib hcl 150 mg tablet	1	PA,QL(30 per 30 days)
erlotinib hcl 25 mg tablet	1	PA,QL(90 per 30 days)
errin 0.35 mg tablet[CE]	1	
erythromycin 0.5% eye ointment	1	
erythromycin 2% solution	1	
ESBRIET 267 MG CAPSULE	1	PA,QL(270 per 30 days)
ESBRIET 267 MG TABLET	1	PA,QL(270 per 30 days)
ESBRIET 801 MG TABLET	1	PA,QL(90 per 30 days)
escitalopram 10 mg tablet[EDS]	1	QL(45 per 30 days)
escitalopram 20 mg tablet[EDS]	1	QL(30 per 30 days)
escitalopram 5 mg tablet[EDS]	1	QL(30 per 30 days)
escitalopram oxalate 5 mg/5 ml	1	QL(600 per 30 days)
esomeprazole dr 10 mg packet	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
esomeprazole dr 20 mg packet	1	QL(30 per 30 days)
esomeprazole dr 40 mg packet	1	QL(30 per 30 days)
esomeprazole mag dr 20 mg cap	1	QL(60 per 30 days)
estarylla 0.25 mg-35 mcg tablet[CE]	1	
estradiol 0.01% cream	1	
estradiol 0.025 mg patch(1/wk)	1	QL(4 per 28 days)
estradiol 0.025 mg patch(2/wk)	1	QL(8 per 28 days)
estradiol 0.0375mg patch(1/wk)	1	QL(4 per 28 days)
estradiol 0.0375mg patch(2/wk)	1	QL(8 per 28 days)
estradiol 0.05 mg patch (1/wk)	1	QL(4 per 28 days)
estradiol 0.05 mg patch (2/wk)	1	QL(8 per 28 days)
estradiol 0.06 mg patch (1/wk)	1	QL(4 per 28 days)
estradiol 0.075 mg patch(1/wk)	1	QL(4 per 28 days)
estradiol 0.075 mg patch(2/wk)	1	QL(8 per 28 days)
estradiol 0.1 mg patch (1/wk)	1	QL(4 per 28 days)
estradiol 0.1 mg patch (2/wk)	1	QL(8 per 28 days)
estradiol 0.5 mg tablet	1	
estradiol 1 mg tablet	1	
estradiol 10 mcg vaginal insrt	1	
estradiol 2 mg tablet	1	
estradiol-noreth 0.5-0.1 mg tb	1	
estradiol-noreth 1-0.5 mg tab	1	
eszopiclone 1 mg tablet	1	QL(30 per 30 days)
eszopiclone 2 mg tablet	1	QL(30 per 30 days)
eszopiclone 3 mg tablet	1	QL(30 per 30 days)
ethambutol hcl 100 mg tablet	1	
ethambutol hcl 400 mg tablet	1	
ethosuximide 250 mg capsule	1	
ethosuximide 250 mg/5 ml soln	1	
ethynodiol-eth estra 1mg-35mcg[CE]	1	
ethynodiol-eth estra 1mg-50mcg[CE]	1	
etodolac 200 mg capsule	1	
etodolac 300 mg capsule	1	
etodolac 400 mg tablet	1	
etodolac 500 mg tablet	1	
etonogestrel-ee vaginal ring[CE]	1	QL(1 per 28 days)
etoposide 50 mg capsule	1	QL(100 per 30 days)
etravirine 100 mg tablet	1	QL(120 per 30 days)
etravirine 200 mg tablet	1	QL(60 per 30 days)
EUTHYROX 100 MCG TABLET	1	
EUTHYROX 112 MCG TABLET	1	
EUTHYROX 125 MCG TABLET	1	
EUTHYROX 137 MCG TABLET	1	
EUTHYROX 150 MCG TABLET	1	
EUTHYROX 175 MCG TABLET	1	
EUTHYROX 200 MCG TABLET	1	
EUTHYROX 25 MCG TABLET	1	
EUTHYROX 50 MCG TABLET	1	
EUTHYROX 75 MCG TABLET	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
EUTHYROX 88 MCG TABLET	1	
everolimus 0.25 mg tablet	1	PA,QL(60 per 30 days)
everolimus 0.5 mg tablet	1	PA,QL(120 per 30 days)
everolimus 0.75 mg tablet	1	PA,QL(60 per 30 days)
everolimus 1 mg tablet	1	PA,QL(60 per 30 days)
everolimus 10 mg tablet	1	PA,QL(30 per 30 days)
everolimus 2 mg tab for susp	1	PA,QL(30 per 30 days)
everolimus 2.5 mg tablet	1	PA,QL(30 per 30 days)
everolimus 3 mg tab for susp	1	PA,QL(30 per 30 days)
everolimus 5 mg tab for susp	1	PA,QL(30 per 30 days)
everolimus 5 mg tablet	1	PA,QL(30 per 30 days)
everolimus 7.5 mg tablet	1	PA,QL(30 per 30 days)
EVOTAZ 300 MG-150 MG TABLET	1	QL(30 per 30 days)
exemestane 25 mg tablet	1	QL(60 per 30 days)
eye itch relief 0.025 % (0.035 %) drops	1	
EZ SMART LANCETS 28 GAUGE	1	
EZ-LETS 26 GAUGE	1	
ezetimibe 10 mg tablet	1	QL(30 per 30 days)
falmina (28) 0.1 mg-20 mcg tablet[CE]	1	
famciclovir 125 mg tablet	1	QL(90 per 30 days)
famciclovir 250 mg tablet	1	QL(90 per 30 days)
famciclovir 500 mg tablet	1	QL(90 per 30 days)
famotidine 10 mg tablet	1	
famotidine 20 mg tablet	1	
famotidine 40 mg tablet	1	
famotidine 40 mg/5 ml susp	1	
FANTASY CONDOM[CE]	1	
FARYDAK 10 MG CAPSULE	1	PA,QL(6 per 21 days)
FARYDAK 15 MG CAPSULE	1	PA,QL(6 per 21 days)
FARYDAK 20 MG CAPSULE	1	PA,QL(6 per 21 days)
FC2 FEMALE CONDOM[CE]	1	
felbamate 400 mg tablet	1	
felbamate 600 mg tablet	1	
felbamate 600 mg/5 ml susp	1	
felodipine er 10 mg tablet	1	QL(30 per 30 days)
felodipine er 2.5 mg tablet	1	QL(30 per 30 days)
felodipine er 5 mg tablet	1	QL(30 per 30 days)
FEMCAP 22 MM VAGINAL DEVICE[CE]	1	
FEMCAP 26 MM VAGINAL DEVICE[CE]	1	
FEMCAP 30 MM VAGINAL DEVICE[CE]	1	
femynor 0.25 mg-35 mcg tablet[CE]	1	
fenofibrate 134 mg capsule	1	QL(30 per 30 days)
fenofibrate 145 mg tablet	1	QL(30 per 30 days)
fenofibrate 160 mg tablet	1	QL(30 per 30 days)
fenofibrate 200 mg capsule	1	QL(30 per 30 days)
fenofibrate 48 mg tablet	1	QL(60 per 30 days)
fenofibrate 54 mg tablet	1	QL(60 per 30 days)
fenofibrate 67 mg capsule	1	QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
fentanyl 100 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 12 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 25 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 37.5 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 50 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 62.5 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 75 mcg/hr patch	1	QL(20 per 30 days)
fentanyl 87.5 mcg/hr patch	1	QL(20 per 30 days)
fentanyl cit otfc 1,200 mcg	1	PA,QL(120 per 30 days)
fentanyl cit otfc 1,600 mcg	1	PA,QL(120 per 30 days)
fentanyl citrate otfc 200 mcg	1	PA,QL(120 per 30 days)
fentanyl citrate otfc 400 mcg	1	PA,QL(120 per 30 days)
fentanyl citrate otfc 600 mcg	1	PA,QL(120 per 30 days)
fentanyl citrate otfc 800 mcg	1	PA,QL(120 per 30 days)
feosol 325 mg (65 mg iron) tablet	1	
FER-IN-SOL 15 MG IRON (75 MG)/ML ORAL DROPS	1	
FERIVA 75 MG IRON-1 MG-175 MG CAPSULE,EXTENDED RELEASE	1	
ferocon 110 mg-0.5 mg capsule	1	
ferosul 325 mg (65 mg iron) tablet	1	
ferrex 150 forte 150 mg-25 mcg-1 mg capsule	1	
ferrex 150 forte plus 150 mg-60 mg-25 mcg-1 mg capsule	1	
ferrex 150 mg iron capsule	1	
ferrex 28 151 mg-200 mg-1 mg-0.8 mg tablet	1	
ferro-time 325 mg (65 mg iron) tablet	1	
ferrocite 324 mg (106 mg iron) tablet	1	
ferrocite plus 106 mg iron-1 mg tablet	1	
ferrous fumarate 324 mg tab	1	
ferrous gluconate 324 mg tab	1	
ferrous gluconate 324 mg tab	1	
ferrous sulf 15 mg iron/ml drp	1	
ferrous sulf 220 mg/5 ml elix	1	
ferrous sulf 300 mg/5 ml liq	1	
ferrous sulf 44 mg iron/5ml lq	1	
ferrous sulf ec 324 mg tablet	1	
ferrous sulf ec 325 mg tablet	1	
ferrousul 325 mg tablet	1	
fever reducer 120 mg rectal suppository	1	
FEVERALL 120 MG RECTAL SUPPOSITORY	1	
FEVERALL 80 MG RECTAL SUPPOSITORY	1	
FIFTY50 SAFETY SEAL LANCETS 30 GAUGE	1	
FIFTY50 SAFETY SEAL LANCETS 32 GAUGE	1	
FILTER NEEDLE 5 MICRON	1	
FILTER NEEDLE 5 MICRON	1	
finasteride 5 mg tablet[EDS]	1	QL(30 per 30 days)
FINE 30 UNIVERSAL LANCETS 30 GAUGE	1	
FINGERSTIX LANCETS	1	
flavoxate hcl 100 mg tablet	1	
flecainide acetate 100 mg tab	1	
flecainide acetate 150 mg tab	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
flecainide acetate 50 mg tab	1	
FLEET ENEMA 19 GRAM-7 GRAM/118 ML	1	
fleet laxative (bisacodyl) 5 mg tablet,delayed release	1	
FLEXICHAMBER SPACER	1	
FLEXICHAMBER-LARGE CHILD MASK	1	
FLEXICHAMBER-SMALL ADULT MASK	1	
FLEXICHAMBER-SMALL CHILD MASK	1	
FLUAD 2019-2020 SYRINGE	1	
FLUAD 2020-2021 SYRINGE[CE]	1	
FLUAD QUAD 2020-2021 SYRINGE[CE]	1	
FLUAD QUAD 2021-2022(65YR UP)(PF) 60 MCG (15 MCG X 4)/0.5ML IM SYRINGE	1	
FLUARIX QUAD 2019-2020 SYRINGE	1	
FLUARIX QUAD 2020-2021 SYRINGE[CE]	1	
FLUARIX QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUBLOK QUAD 2019-2020 SYRINGE	1	
FLUBLOK QUAD 2020-2021 SYRINGE[CE]	1	
FLUBLOK QUAD 2021-2022 (PF) 180 MCG (45 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUCELVAX QUAD 2019-2020 SYR	1	
FLUCELVAX QUAD 2019-2020 VIAL	1	
FLUCELVAX QUAD 2020-2021 SYR[CE]	1	
FLUCELVAX QUAD 2020-2021 VIAL[CE]	1	
FLUCELVAX QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUCELVAX QUAD 2021-2022 60 MCG (15 MCG X 4)/0.5 ML INTRAMUSCULAR SUSP	1	
fluconazole 10 mg/ml susp	1	
fluconazole 100 mg tablet	1	
fluconazole 150 mg tablet	1	
fluconazole 200 mg tablet	1	
fluconazole 40 mg/ml susp	1	
fluconazole 50 mg tablet	1	
flucytosine 250 mg capsule	1	
flucytosine 500 mg capsule	1	
fludrocortisone 0.1 mg tablet	1	
FLULAVAL QUAD 2019-2020 SYR	1	
FLULAVAL QUAD 2019-2020 VIAL	1	
FLULAVAL QUAD 2020-2021 SYR[CE]	1	
FLULAVAL QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUMIST QUAD 2021-2022 10EXP6.5-7.5 FF UNIT/0.2 ML NASAL SPRAY SYRINGE	1	
FLUMIST QUAD NASAL 2019-20 VAC	1	
FLUMIST QUAD NASAL 2020-21 VAC[CE]	1	
flunisolide 0.025% spray	1	QL(50 per 30 days)
fluocinolone 0.01% cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
fluocinolone 0.025% cream	1	
fluocinolone 0.025% ointment	1	
fluocinonide 0.05% cream	1	
fluocinonide 0.05% gel	1	
fluocinonide 0.05% ointment	1	
fluocinonide 0.05% solution	1	
fluoride 0.25 mg tablet chew	1	
fluoride 0.5 mg tablet chew	1	
fluoride 1 mg tablet chewable	1	
fluorometholone 0.1% drops	1	
fluorouracil 2% topical soln	1	
fluorouracil 5% cream	1	
fluorouracil 5% topical soln	1	
fluoxetine 20 mg/5 ml solution[EDS]	1	
fluoxetine hcl 10 mg capsule[EDS]	1	QL(60 per 30 days)
fluoxetine hcl 20 mg capsule[EDS]	1	QL(120 per 30 days)
fluoxetine hcl 40 mg capsule[EDS]	1	QL(60 per 30 days)
fluphenazine 1 mg tablet	1	
fluphenazine 10 mg tablet	1	
fluphenazine 2.5 mg tablet	1	
fluphenazine 2.5 mg/5 ml elix	1	
fluphenazine 2.5 mg/ml vial	1	
fluphenazine 5 mg tablet	1	
fluphenazine 5 mg/ml conc	1	
fluphenazine dec 125 mg/5 ml	1	
flurbiprofen 0.03% eye drop	1	
flurbiprofen 100 mg tablet	1	
flutamide 125 mg capsule	1	QL(180 per 30 days)
fluticasone prop 0.005% oint	1	
fluticasone prop 0.05% cream	1	
fluticasone prop 50 mcg spray	1	QL(16 per 30 days)
fluticasone-salmeterol 100-50	1	QL(60 per 30 days)
fluticasone-salmeterol 113-14	1	QL(1 per 30 days)
fluticasone-salmeterol 232-14	1	QL(1 per 30 days)
fluticasone-salmeterol 250-50	1	QL(60 per 30 days)
fluticasone-salmeterol 500-50	1	QL(60 per 30 days)
fluticasone-salmeterol 55-14	1	QL(1 per 30 days)
fluvoxamine maleate 100 mg tab	1	QL(90 per 30 days)
fluvoxamine maleate 25 mg tab	1	QL(90 per 30 days)
fluvoxamine maleate 50 mg tab	1	QL(90 per 30 days)
FLUZONE HIGH-DOSE 2019-20 SYR	1	
FLUZONE HIGH-DOSE QUAD 2020-21[CE]	1	
FLUZONE HIGH-DOSE QUAD 2021-22 (PF) 240 MCG/0.7 ML IM SYRINGE	1	
FLUZONE QUAD 2019-2020 SYRINGE	1	
FLUZONE QUAD 2019-2020 VIAL	1	
FLUZONE QUAD 2019-2020 VIAL	1	
FLUZONE QUAD 2020-2021 SYRINGE[CE]	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
FLUZONE QUAD 2020-2021 VIAL[CE]	1	
FLUZONE QUAD 2020-2021 VIAL[CE]	1	
FLUZONE QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SUSPENSION	1	
FLUZONE QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUZONE QUAD 2021-2022 60 MCG (15 MCG X 4)/0.5 ML INTRAMUSCULAR SUSP.	1	
FLUZONE QUAD PEDI 2019-20 SYR	1	
FLUZONE QUAD SOUTH HEM 2020 VL	1	
FLUZONE QUAD SOUTH HEM2020 SYR	1	
FLUZONE QUAD SOUTHERN HEMIS 2021(PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYR	1	
FLUZONE QUAD SOUTHERN HEMISPH 2021 60 MCG (15 MCG X 4)/0.5 ML IM SUSP	1	
foaming antacid 95 mg-358 mg/15 ml oral suspension	1	
folic acid 1 mg tablet	1	
folic acid 400 mcg tablet	1	
folivane-f 125 mg-1 mg-40 mg-3 mg capsule	1	
folivane-ob 85 mg-1 mg capsule	1	
folivane-plus 125 mg iron-1 mg capsule	1	
FORA LANCING DEVICE	1	
FORACARE LANCETS 30 GAUGE	1	
fosamprenavir 700 mg tablet	1	QL(120 per 30 days)
fosinopril sodium 10 mg tab[EDS]	1	
fosinopril sodium 20 mg tab[EDS]	1	
fosinopril sodium 40 mg tab[EDS]	1	
fosinopril-hctz 10-12.5 mg tab	1	
fosinopril-hctz 20-12.5 mg tab[EDS]	1	
FREESTYLE LANCETS 28 GAUGE	1	
FREESTYLE UNISTIK 2	1	
furosemide 10 mg/ml solution[EDS]	1	
furosemide 20 mg tablet[EDS]	1	
furosemide 40 mg tablet[EDS]	1	
furosemide 40 mg/5 ml soln[EDS]	1	
furosemide 80 mg tablet[EDS]	1	
FUZEON 90 MG SUBCUTANEOUS SOLUTION	1	QL(60 per 30 days)
fyavolv 0.5 mg-2.5 mcg tablet	1	
fyavolv 1 mg-5 mcg tablet	1	
FYCOMPA 0.5 MG/ML ORAL SUSPENSION	1	PA,QL(680 per 28 days)
FYCOMPA 10 MG TABLET	1	PA,QL(30 per 30 days)
FYCOMPA 12 MG TABLET	1	PA,QL(30 per 30 days)
FYCOMPA 2 MG TABLET	1	PA,QL(30 per 30 days)
FYCOMPA 4 MG TABLET	1	PA,QL(30 per 30 days)
FYCOMPA 6 MG TABLET	1	PA,QL(30 per 30 days)
FYCOMPA 8 MG TABLET	1	PA,QL(30 per 30 days)
gabapentin 100 mg capsule	1	QL(270 per 30 days)
gabapentin 250 mg/5 ml soln	1	QL(2250 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
gabapentin 250 mg/5 ml soln	1	QL(2250 per 30 days)
gabapentin 300 mg capsule	1	QL(270 per 30 days)
gabapentin 300 mg/6 ml soln	1	QL(2250 per 30 days)
gabapentin 400 mg capsule	1	QL(270 per 30 days)
gabapentin 600 mg tablet	1	QL(180 per 30 days)
gabapentin 800 mg tablet	1	QL(180 per 30 days)
galantamine 4 mg/ml oral soln	1	QL(200 per 30 days)
galantamine er 16 mg capsule	1	QL(30 per 30 days)
galantamine er 24 mg capsule	1	QL(30 per 30 days)
galantamine er 8 mg capsule	1	QL(30 per 30 days)
galantamine hbr 12 mg tablet	1	QL(60 per 30 days)
galantamine hbr 4 mg tablet	1	QL(60 per 30 days)
galantamine hbr 8 mg tablet	1	QL(60 per 30 days)
gas relief (simethicone) 40 mg/0.6 ml oral drops,suspension	1	
gatifloxacin 0.5% eye drops	1	QL(2.5 per 25 days)
gavilax 17 gram/dose oral powder	1	QL(1054 per 30 days)
gavilyte-c 240 gram-22.72 gram-6.72 gram-5.84 gram oral solution	1	
gavilyte-g 236 gram-22.74 gram-6.74 gram-5.86 gram oral solution	1	
gavilyte-n 420 gram oral solution	1	
gemfibrozil 600 mg tablet	1	QL(60 per 30 days)
generlac 10 gram/15 ml oral solution	1	
gengraf 100 mg capsule	1	QL(720 per 30 days)
gengraf 100 mg/ml oral solution	1	
gengraf 25 mg capsule	1	
gentak 0.3 % (3 mg/gram) eye ointment	1	
gentamicin 0.1% cream	1	
gentamicin 0.1% ointment	1	
gentamicin 0.3% eye drop	1	
GENTEEL VACUUM LANCING DEVICE COMBO PACK	1	
gentle laxative (bisacodyl) 5 mg tablet,delayed release	1	
GENVOYA 150 MG-150 MG-200 MG-10 MG TABLET	1	QL(30 per 30 days)
gianvi 3 mg-0.02 mg tablet[CE]	1	
glatiramer 20 mg/ml syringe	1	PA,QL(30 per 30 days)
glatiramer 40 mg/ml syringe	1	PA,QL(12 per 28 days)
glatopa 20 mg/ml subcutaneous syringe	1	PA,QL(30 per 30 days)
glatopa 40 mg/ml subcutaneous syringe	1	PA,QL(12 per 28 days)
glimepiride 1 mg tablet[EDS]	1	
glimepiride 2 mg tablet[EDS]	1	
glimepiride 4 mg tablet[EDS]	1	
glipizide 10 mg tablet[EDS]	1	
glipizide 5 mg tablet[EDS]	1	
glipizide er 10 mg tablet[EDS]	1	
glipizide er 2.5 mg tablet[EDS]	1	
glipizide er 5 mg tablet[EDS]	1	
glipizide-metformin 2.5-250 mg	1	
glipizide-metformin 2.5-500 mg	1	
glipizide-metformin 5-500 mg	1	
GLUCAGEN HYPOKIT 1 MG INJECTION	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
GLUCOCOM LANCETS 28 GAUGE	1	
GLUCOCOM LANCETS 30 GAUGE	1	
GLUCOCOM LANCETS 33 GAUGE	1	
glyburid-metformin 1.25-250 mg[EDS]	1	
glyburide 1.25 mg tablet[EDS]	1	
glyburide 2.5 mg tablet[EDS]	1	
glyburide 5 mg tablet[EDS]	1	
glyburide micro 1.5 mg tab[EDS]	1	
glyburide micro 3 mg tablet[EDS]	1	
glyburide micro 6 mg tablet[EDS]	1	
glyburide-metformin 2.5-500 mg[EDS]	1	
glyburide-metformin 5-500 mg[EDS]	1	
glycopyrrolate 1 mg tablet	1	
glycopyrrolate 2 mg tablet	1	
glydo 2 % mucosal jelly in applicator	1	
GLYXAMBI 10 MG-5 MG TABLET	1	QL(30 per 30 days)
GLYXAMBI 25 MG-5 MG TABLET	1	QL(30 per 30 days)
gnp hydrocort acetate 1% cr	1	
GOJJI LANCETS 30 GAUGE	1	
GOJJI LANCING DEVICE	1	
granisetron hcl 1 mg tablet	1	QL(28 per 28 days)
griseofulvin 125 mg/5 ml susp	1	
griseofulvin micro 500 mg tab	1	
griseofulvin ultra 125 mg tab	1	
griseofulvin ultra 250 mg tab	1	
gs simethicone 20 mg/0.3 ml	1	
guaiatussin ac 10 mg-100 mg/5 ml oral liquid	1	
guaifenesin 200 mg tablet	1	
guaifenesin 200 mg/10 ml soln	1	
guaifenesin 400 mg tablet	1	
guaifenesin ac 10 mg-100 mg/5 ml oral liquid	1	
guaifenesin dm syrup	1	
guaifenesin-dm 200-20 mg/10 ml	1	
guaifenesin-dm er 1,200-60 mg	1	
guanfacine 1 mg tablet[EDS]	1	
guanfacine 2 mg tablet[EDS]	1	
guanfacine hcl er 1 mg tablet	1	QL(30 per 30 days)
guanfacine hcl er 2 mg tablet	1	QL(30 per 30 days)
guanfacine hcl er 3 mg tablet	1	QL(30 per 30 days)
guanfacine hcl er 4 mg tablet	1	QL(30 per 30 days)
guanidine hcl 125 mg tablet	1	
GVOKE 1 MG/0.2 ML SUBCUTANEOUS SOLUTION	1	
GVOKE PFS 1-PACK 0.5 MG/0.1 ML SUBCUTANEOUS SYRINGE	1	
GVOKE PFS 1-PACK 1 MG/0.2 ML SUBCUTANEOUS SYRINGE	1	
GVOKE PFS 2-PACK 0.5 MG/0.1 ML SUBCUTANEOUS SYRINGE	1	
GVOKE PFS 2-PACK 1 MG/0.2 ML SUBCUTANEOUS SYRINGE	1	
gynazole-1 2 % vaginal cream	1	
hailey 1.5 mg-30 mcg tablet[CE]	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
hailey 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
hailey fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
hailey fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
haloperidol 0.5 mg tablet	1	
haloperidol 1 mg tablet	1	
haloperidol 10 mg tablet	1	
haloperidol 2 mg tablet	1	
haloperidol 20 mg tablet	1	
haloperidol 5 mg tablet	1	
haloperidol dec 100 mg/ml amp	1	QL(5 per 30 days)
haloperidol dec 50 mg/ml vial	1	QL(9 per 30 days)
haloperidol lac 2 mg/ml conc	1	
haloperidol lac 5 mg/ml syring	1	
haloperidol lac 5 mg/ml vial	1	
HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE	1	
HEALTHY ACCENTS UNILET LANCET 30 GAUGE	1	
heartburn relief (cimetidine) 200 mg tablet	1	
heartburn relief (famotidine) 10 mg tablet	1	
heartburn relief (famotidine) 20 mg tablet	1	
heather 0.35 mg tablet[CE]	1	
hematinic plus vit/minerals 106 mg iron-1 mg tablet	1	
hematinic/folic acid 324 mg (106 mg iron)-1 mg tablet	1	
hematogen fa 200 mg-250 mg-0.01 mg-1 mg capsule	1	
hematogen forte 460 mg-60 mg-0.01 mg-1 mg capsule	1	
HEMATOGEN SOFTGEL	1	
hm cal antacid 750 mg chew tab	1	
HUMIRA 10 MG/0.2 ML SYRINGE	1	PA,QL(2 per 28 days)
HUMIRA 20 MG/0.4 ML SYRINGE	1	PA,QL(6 per 28 days)
HUMIRA 40 MG/0.8 ML SUBCUTANEOUS SYRINGE KIT	1	PA,QL(6 per 28 days)
HUMIRA PEN 40 MG/0.8 ML SUBCUTANEOUS KIT	1	PA,QL(6 per 28 days)
HUMIRA PEN CROHN'S-ULC COLITIS-HID SUP STARTER 40 MG/0.8 ML SUBCUT KIT	1	PA,QL(6 per 28 days)
HUMIRA PEN PSORIASIS-UVEITIS-ADOL HID SUP START 40 MG/0.8 ML SUBCUT KT	1	PA,QL(6 per 28 days)
HUMIRA(CF) 10 MG/0.1 ML SUBCUTANEOUS SYRINGE KIT	1	PA,QL(2 per 28 days)
HUMIRA(CF) 20 MG/0.2 ML SUBCUTANEOUS SYRINGE KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) 40 MG/0.4 ML SUBCUTANEOUS SYRINGE KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEDI CROHN'S START 80 MG/0.8 ML-40 MG/0.4 ML SUBCUT SYR KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEDIATRIC CROHN'S STARTER 80 MG/0.8 ML SUBCUT SYRINGE KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEN 40 MG/0.4 ML SUBCUTANEOUS KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEN 80 MG/0.8 ML SUBCUTANEOUS KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEN CROHN'S-ULC COLITIS-HID SUP STRT 80 MG/0.8 ML SUBCUT KT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEN PEDIATRIC ULCER COLITIS STARTER 80 MG/0.8 ML SUBCUT KIT	1	PA,QL(6 per 28 days)
HUMIRA(CF) PEN PS-UV-ADOL HS 80 MG/0.8 ML(1)-40 MG/0.4 ML(2)SUBCUT KIT	1	PA,QL(6 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
HUMULIN R U-500 (CONC) INSULIN KWIKPEN 500 UNIT/ML (3 ML) SUBCUTANEOUS	1	
HUMULIN R U-500 (CONCENTRATED) INSULIN 500 UNIT/ML SUBCUTANEOUS SOLN	1	
HYCAMTIN 0.25 MG CAPSULE	1	QL(100 per 25 days)
HYCAMTIN 1 MG CAPSULE	1	QL(25 per 25 days)
hydralazine 10 mg tablet[EDS]	1	
hydralazine 100 mg tablet[EDS]	1	
hydralazine 25 mg tablet[EDS]	1	
hydralazine 50 mg tablet[EDS]	1	
hydrochlorothiazide 12.5 mg cp[EDS]	1	
hydrochlorothiazide 12.5 mg tb[EDS]	1	
hydrochlorothiazide 25 mg tab[EDS]	1	
hydrochlorothiazide 50 mg tab[EDS]	1	
hydrocodone-acetamin 10-325 mg	1	QL(360 per 30 days)
hydrocodone-acetamin 2.5-325	1	QL(360 per 30 days)
hydrocodone-acetamin 5-325 mg	1	QL(360 per 30 days)
hydrocodone-acetamin 7.5-325	1	QL(360 per 30 days)
hydrocodone-acetamn 7.5-325/15	1	QL(5520 per 30 days)
hydrocodone-chlorphen er susp	1	
hydrocodone-homatropine soln	1	
hydrocodone-homatropine syrup	1	
hydrocodone-ibuprofen 10-200	1	QL(150 per 30 days)
hydrocodone-ibuprofen 5-200 mg	1	QL(150 per 30 days)
hydrocodone-ibuprofen 7.5-200	1	QL(150 per 30 days)
hydrocortisone 0.5% cream	1	
hydrocortisone 0.5% cream	1	
hydrocortisone 1% cream	1	
hydrocortisone 1% cream	1	
hydrocortisone 1% ointment	1	
hydrocortisone 1% ointment	1	
hydrocortisone 10 mg tablet	1	
hydrocortisone 100 mg/60 ml	1	
hydrocortisone 2.5% cream	1	
hydrocortisone 2.5% cream	1	
hydrocortisone 2.5% lotion	1	
hydrocortisone 2.5% ointment	1	
hydrocortisone 20 mg tablet	1	
hydrocortisone 5 mg tablet	1	
hydrocortisone plus 1 % topical cream	1	
hydrocortisone-aloe 1% cream	1	
hydromet 5 mg-1.5 mg/5 ml oral syrup	1	
hydromorphone 1 mg/ml solution	1	QL(2400 per 30 days)
hydromorphone 2 mg tablet	1	QL(360 per 30 days)
hydromorphone 4 mg tablet	1	QL(360 per 30 days)
hydromorphone 8 mg tablet	1	QL(240 per 30 days)
hydroxychloroquine 100 mg tab	1	
hydroxychloroquine 200 mg tab	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
hydroxychloroquine 300 mg tab	1	
hydroxychloroquine 400 mg tab	1	
hydroxyurea 500 mg capsule	1	
hydroxyzine 10 mg/5 ml syrup	1	
hydroxyzine hcl 10 mg tablet	1	
hydroxyzine hcl 25 mg tablet	1	
hydroxyzine hcl 50 mg tablet	1	
hydroxyzine pam 100 mg cap	1	
hydroxyzine pam 25 mg cap	1	
hydroxyzine pam 50 mg cap	1	
hyoscyamine 0.125 mg odt	1	
hyoscyamine 0.125 mg tab sl	1	
hyoscyamine 0.125 mg/5 ml elix	1	
hyoscyamine 0.125 mg/ml drop	1	
hyoscyamine er 0.375 mg tab	1	
hyoscyamine sulf 0.125 mg tab	1	
HYPOLANCE AST LANCING KIT	1	
ibandronate sodium 150 mg tab	1	QL(1 per 28 days)
IBRANCE 100 MG CAPSULE	1	PA,QL(21 per 28 days)
IBRANCE 100 MG TABLET	1	PA,QL(21 per 28 days)
IBRANCE 125 MG CAPSULE	1	PA,QL(21 per 28 days)
IBRANCE 125 MG TABLET	1	PA,QL(21 per 28 days)
IBRANCE 75 MG CAPSULE	1	PA,QL(21 per 28 days)
IBRANCE 75 MG TABLET	1	PA,QL(21 per 28 days)
ibu 400 mg tablet	1	
ibu 600 mg tablet	1	
ibu 800 mg tablet	1	
ibu-200 200 mg tablet	1	
ibuprofen 100 mg/5 ml susp	1	
ibuprofen 200 mg tablet	1	
ibuprofen 400 mg tablet	1	
ibuprofen 600 mg tablet	1	
ibuprofen 800 mg tablet	1	
ibuprofen ib 200 mg tablet	1	
icatibant 30 mg/3 ml syringe	1	PA,QL(9 per 30 days)
iclevia 0.15 mg-30 mcg (91) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
ICLUSIG 10 MG TABLET	1	PA,QL(30 per 30 days)
ICLUSIG 15 MG TABLET	1	PA,QL(60 per 30 days)
ICLUSIG 30 MG TABLET	1	PA,QL(30 per 30 days)
ICLUSIG 45 MG TABLET	1	PA,QL(30 per 30 days)
IDHIFA 100 MG TABLET	1	PA,QL(30 per 30 days)
IDHIFA 50 MG TABLET	1	PA,QL(30 per 30 days)
iferex 150 150 mg iron capsule	1	
iferex 150 forte 150 mg-25 mcg-1 mg capsule	1	
imatinib mesylate 100 mg tab	1	PA,QL(90 per 30 days)
imatinib mesylate 400 mg tab	1	PA,QL(60 per 30 days)
IMBRUVICA 140 MG CAPSULE	1	PA,QL(90 per 30 days)
IMBRUVICA 420 MG TABLET	1	PA,QL(28 per 28 days)
IMBRUVICA 560 MG TABLET	1	PA,QL(28 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
IMBRUVICA 70 MG CAPSULE	1	PA,QL(28 per 28 days)
imipramine hcl 10 mg tablet	1	
imipramine hcl 25 mg tablet	1	
imipramine hcl 50 mg tablet	1	
imiquimod 5% cream packet	1	QL(12 per 30 days)
incassia 0.35 mg tablet[CE]	1	
INCONTROL ALCOHOL PADS	1	
INCONTROL LANCING DEVICE	1	
INCONTROL SUPER THIN LANCETS 30 GAUGE	1	
INCONTROL ULTRA THIN LANCETS 28 GAUGE	1	
INCRUSE ELLIPTA 62.5 MCG/ACTUATION POWDER FOR INHALATION	1	QL(30 per 30 days)
indapamide 1.25 mg tablet[EDS]	1	
indapamide 2.5 mg tablet[EDS]	1	
indomethacin 25 mg capsule	1	
indomethacin 50 mg capsule	1	
infant pain reliever 160 mg/5 ml oral suspension	1	
infant's acetaminophen 160 mg/5 ml oral suspension	1	
infants gas relief 40 mg/0.6 ml oral drops,suspension	1	
infants' pain and fever 160 mg/5 ml oral suspension	1	
infants' pain relief 160 mg/5 ml oral suspension	1	
INJECT EASE LANCETS 28 GAUGE	1	
INJECT EASE LANCETS 30 GAUGE	1	
INLYTA 1 MG TABLET	1	PA,QL(180 per 30 days)
INLYTA 5 MG TABLET	1	PA,QL(60 per 30 days)
insect repellent (deet) 15 % topical spray	1	
INSECT REPELLENT (PICARIDIN) 20 % TOPICAL SPRAY WITH PUMP	1	
INSPIRACHAMBER SPACER	1	
INSPIRACHAMBER WITH MASK-LARGE	1	
INSPIRACHAMBER WITH MASK-MED	1	
INSPIRACHAMBER WITH MASK-SMALL	1	
INSULIN ASPART PRO MIX70-30 PN	1	
INSULIN ASPART PRO MIX70-30 VL	1	
INSULIN GLARGINE-YFGN U100 PEN	1	
INSULIN GLARGINE-YFGN U100 VL	1	
INSULIN LISPRO MIX 75-25 KWKPN	1	
INTEGRA SYRINGE 3 ML 21 GAUGE X 1"	1	
INTELENCE 100 MG TABLET	1	QL(120 per 30 days)
INTELENCE 200 MG TABLET	1	QL(60 per 30 days)
INTELENCE 25 MG TABLET	1	QL(120 per 30 days)
INTERLINK SYRINGE AND CANNULA 15 X 10 ML	1	
INTRON A 10 MILLION UNIT (1 ML) SOLUTION FOR INJECTION	1	PA,QL(12 per 30 days)
INTRON A 18 MILLION UNIT (1 ML) SOLUTION FOR INJECTION	1	PA,QL(12 per 30 days)
INTRON A 18 MILLION UNIT/3 ML	1	PA,QL(136.8 per 30 days)
INTRON A 25 MILLION UNIT/2.5ML	1	PA,QL(12 per 30 days)
INTRON A 50 MILLION UNIT (1 ML) SOLUTION FOR INJECTION	1	PA,QL(12 per 30 days)
introvale 0.15-0.03 mg tablet[CE]	1	QL(91 per 90 days)
INVACARE LANCETS 30 GAUGE	1	
INVEGA HAFYERA 1,092 MG/3.5 ML INTRAMUSCULAR SYRINGE	1	QL(3.5 per 180 days)
INVEGA HAFYERA 1,560 MG/5 ML INTRAMUSCULAR SYRINGE	1	QL(5 per 180 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
INVEGA SUSTENNA 117 MG/0.75 ML INTRAMUSCULAR SYRINGE	1	QL(1.5 per 28 days)
INVEGA SUSTENNA 156 MG/ML INTRAMUSCULAR SYRINGE	1	QL(1 per 28 days)
INVEGA SUSTENNA 234 MG/1.5 ML INTRAMUSCULAR SYRINGE	1	QL(1.5 per 28 days)
INVEGA SUSTENNA 39 MG/0.25 ML INTRAMUSCULAR SYRINGE	1	QL(1.5 per 28 days)
INVEGA SUSTENNA 78 MG/0.5 ML INTRAMUSCULAR SYRINGE	1	QL(1.5 per 28 days)
INVEGA TRINZA 273 MG/0.875 ML INTRAMUSCULAR SYRINGE	1	QL(0.875 per 90 days)
INVEGA TRINZA 410 MG/1.315 ML INTRAMUSCULAR SYRINGE	1	QL(1.315 per 90 days)
INVEGA TRINZA 546 MG/1.75 ML INTRAMUSCULAR SYRINGE	1	QL(1.75 per 90 days)
INVEGA TRINZA 819 MG/2.625 ML INTRAMUSCULAR SYRINGE	1	QL(2.625 per 90 days)
INVIRASE 500 MG TABLET	1	QL(120 per 30 days)
iprat-albut 0.5-3(2.5) mg/3 ml	1	
ipratropium 0.03% spray	1	QL(30 per 30 days)
ipratropium 0.06% spray	1	QL(45 per 30 days)
ipratropium br 0.02% soln	1	
irbesartan 150 mg tablet[EDS]	1	QL(30 per 30 days)
irbesartan 300 mg tablet[EDS]	1	QL(30 per 30 days)
irbesartan 75 mg tablet[EDS]	1	QL(30 per 30 days)
irbesartan-hctz 150-12.5 mg tb[EDS]	1	QL(60 per 30 days)
irbesartan-hctz 300-12.5 mg tb	1	QL(30 per 30 days)
iron 27 mg tablet	1	
iron 325 mg (65 mg iron) tablet	1	
iron 65 mg tablet	1	
iron er 159 mg (45 mg iron) tablet,extended release	1	
ISENTRESS 100 MG CHEWABLE TABLET	1	QL(180 per 30 days)
ISENTRESS 100 MG ORAL POWDER PACKET	1	QL(300 per 30 days)
ISENTRESS 25 MG CHEWABLE TABLET	1	QL(180 per 30 days)
ISENTRESS 400 MG TABLET	1	QL(120 per 30 days)
ISENTRESS HD 600 MG TABLET	1	QL(60 per 30 days)
isibloom 0.15 mg-0.03 mg tablet[CE]	1	
isoniazid 100 mg tablet	1	
isoniazid 300 mg tablet	1	
isoniazid 50 mg/5 ml solution	1	
isosorbide dinitrate 10 mg tab	1	
isosorbide dinitrate 20 mg tab	1	
isosorbide dinitrate 30 mg tab	1	
isosorbide dinitrate 40 mg tab	1	
isosorbide dinitrate 5 mg tab	1	
isosorbide mononit 10 mg tab[EDS]	1	
isosorbide mononit 20 mg tab[EDS]	1	
isosorbide mononit er 120 mg[EDS]	1	
isosorbide mononit er 30 mg tb[EDS]	1	
isosorbide mononit er 60 mg tb[EDS]	1	
isotretinoin 10 mg capsule	1	QL(60 per 30 days)
isotretinoin 20 mg capsule	1	QL(60 per 30 days)
isotretinoin 30 mg capsule	1	QL(60 per 30 days)
isotretinoin 40 mg capsule	1	QL(120 per 30 days)
isradipine 2.5 mg capsule	1	
isradipine 5 mg capsule	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
itraconazole 10 mg/ml solution	1	QL(150 per 30 days)
itraconazole 100 mg capsule	1	QL(120 per 30 days)
ivermectin 3 mg tablet	1	
jaimiess 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
JAKAFI 10 MG TABLET	1	PA,QL(60 per 30 days)
JAKAFI 15 MG TABLET	1	PA,QL(60 per 30 days)
JAKAFI 20 MG TABLET	1	PA,QL(60 per 30 days)
JAKAFI 25 MG TABLET	1	PA,QL(60 per 30 days)
JAKAFI 5 MG TABLET	1	PA,QL(60 per 30 days)
JANSSEN COVID-19 VACCINE (PF) 0.5 ML INTRAMUSCULAR SUSPENSION (EUA)	1	
jantoven 1 mg tablet	1	
jantoven 10 mg tablet	1	
jantoven 2 mg tablet	1	
jantoven 2.5 mg tablet	1	
jantoven 3 mg tablet	1	
jantoven 4 mg tablet	1	
jantoven 5 mg tablet	1	
jantoven 6 mg tablet	1	
jantoven 7.5 mg tablet	1	
JARDIANCE 10 MG TABLET	1	QL(30 per 30 days)
JARDIANCE 25 MG TABLET	1	QL(30 per 30 days)
jasmiel (28) 3 mg-0.02 mg tablet[CE]	1	
jencycla 0.35 mg tablet[CE]	1	
JENTADUETO 2.5 MG-1,000 MG TABLET	1	QL(60 per 30 days)
JENTADUETO 2.5 MG-500 MG TABLET	1	QL(60 per 30 days)
JENTADUETO 2.5 MG-850 MG TABLET	1	QL(60 per 30 days)
JENTADUETO XR 2.5 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(60 per 30 days)
JENTADUETO XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(30 per 30 days)
jinteli 1 mg-5 mcg tablet	1	
jolessa 0.15 mg-30 mcg (91) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
jr. str non-aspirin pain 160 mg disintegrating tablet	1	
juleber 0.15 mg-0.03 mg tablet[CE]	1	
JULUCA 50 MG-25 MG TABLET	1	QL(30 per 30 days)
junel 1.5/30 (21) 1.5 mg-30 mcg tablet[CE]	1	
junel 1/20 (21) 1 mg-20 mcg tablet[CE]	1	
junel fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
junel fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
junel fe 24 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
JYNARQUE 15 MG (AM)/15 MG (PM) TABLETS	1	PA,QL(56 per 28 days)
JYNARQUE 15 MG TABLET	1	PA,QL(60 per 30 days)
JYNARQUE 30 MG (AM)/15 MG (PM) TABLETS	1	PA,QL(56 per 28 days)
JYNARQUE 30 MG TABLET	1	PA,QL(60 per 30 days)
JYNARQUE 45 MG (AM)/15 MG (PM) TABLETS	1	PA,QL(56 per 28 days)
JYNARQUE 60 MG (AM)/30 MG (PM) TABLETS	1	PA,QL(56 per 28 days)
JYNARQUE 90 MG (AM)/30 MG (PM) TABLETS	1	PA,QL(56 per 28 days)
k-pec antidiarrheal (bism sub) 262 mg/15 ml oral suspension	1	
kaitlib fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet[CE]	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
KALETRA 100 MG-25 MG TABLET	1	QL(300 per 30 days)
KALETRA 200 MG-50 MG TABLET	1	QL(150 per 30 days)
kalliga 0.15 mg-0.03 mg tablet[CE]	1	
KALYDECO 150 MG TABLET	1	PA,QL(60 per 30 days)
KALYDECO 25 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
KALYDECO 50 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
KALYDECO 75 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
kaopectate (bismuth subsalicylate) 262 mg/15 ml oral suspension	1	
kariva (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
kelnor 1-50 (28) 1 mg-50 mcg tablet[CE]	1	
kelnor 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
ketoconazole 2% cream	1	
ketoconazole 2% shampoo	1	
ketoconazole 200 mg tablet	1	
ketoprofen 25 mg capsule	1	
ketoprofen 50 mg capsule	1	
ketoprofen 75 mg capsule	1	
ketorolac 0.4% ophth solution	1	
ketorolac 0.5% ophth solution	1	
ketorolac 10 mg tablet	1	QL(20 per 30 days)
ketotifen fum 0.025% eye drops	1	
KEVZARA 150 MG/1.14 ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(2.28 per 28 days)
KEVZARA 150 MG/1.14 ML SUBCUTANEOUS SYRINGE	1	PA,QL(2.28 per 28 days)
KEVZARA 200 MG/1.14 ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(2.28 per 28 days)
KEVZARA 200 MG/1.14 ML SUBCUTANEOUS SYRINGE	1	PA,QL(2.28 per 28 days)
KIMONO CONDOMS(NON-LUBRICATED)[CE]	1	
KIMONO MAXX CONDOMS[CE]	1	
KIMONO MICROTHIN AQUA LUBE CONDOM[CE]	1	
KIMONO MICROTHIN CONDOMS[CE]	1	
KIMONO MICROTHIN LARGE CONDOMS[CE]	1	
KIMONO TEXTURED CONDOMS[CE]	1	
kionex 15 gm/60 ml suspension	1	
klor-con m10 meq tablet,extended release	1	
klor-con m20 meq tablet,extended release	1	
klor-con/ef 25 meq effervescent tablet	1	
KORLYM 300 MG TABLET	1	PA,QL(120 per 30 days)
KOSELUGO 10 MG CAPSULE	1	PA,QL(240 per 30 days)
KOSELUGO 25 MG CAPSULE	1	PA,QL(120 per 30 days)
kurvelo (28) 0.15 mg-0.03 mg tablet[CE]	1	
KUVAN 100 MG ORAL POWDER PACKET	1	PA
KUVAN 100 MG SOLUBLE TABLET	1	PA
KUVAN 500 MG ORAL POWDER PACKET	1	PA
l-methylfolate 15 mg tablet	1	
l-methylfolate 7.5 mg tablet	1	
l-methylfolate cal 15 mg tab	1	
l-methylfolate calcium 7.5 mg	1	
labetalol hcl 100 mg tablet	1	
labetalol hcl 200 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
labetalol hcl 300 mg tablet	1	
lactulose 10 gm/15 ml solution	1	
lactulose 10 gm/15 ml solution	1	
lactulose 20 gm/30 ml solution	1	
lamivudine 10 mg/ml oral soln	1	QL(960 per 30 days)
lamivudine 150 mg tablet	1	QL(60 per 30 days)
lamivudine 300 mg tablet	1	QL(30 per 30 days)
lamivudine hbv 100 mg tablet	1	QL(90 per 30 days)
lamivudine-zidovudine tablet	1	QL(60 per 30 days)
lamotrigine 100 mg tablet[EDS]	1	
lamotrigine 150 mg tablet[EDS]	1	
lamotrigine 200 mg tablet[EDS]	1	
lamotrigine 25 mg disper tab	1	QL(120 per 30 days)
lamotrigine 25 mg tablet[EDS]	1	
lamotrigine 5 mg disper tablet	1	QL(150 per 30 days)
lamotrigine tab start kit-blue	1	
lamotrigine tab start kt-green	1	
lamotrigine tab start kt-orang	1	
LAMPIT 120 MG TABLET	1	
LAMPIT 30 MG TABLET	1	
LANCETS, SUPER THIN	1	
LANCETS,THIN	1	
LANCETS,THIN 23 GAUGE	1	
LANCETS,THIN 28 GAUGE	1	
LANCETS,ULTRA THIN	1	
LANCETS,ULTRA THIN 26 GAUGE	1	
LANCING DEVICE	1	
LANCING DEVICE WITH LANCETS	1	
LANCING SYSTEM	1	
LANZO LANCING DEVICE KIT	1	
lapatinib 250 mg tablet	1	PA,QL(180 per 30 days)
larin 1.5/30 (21) 1.5 mg-30 mcg tablet[CE]	1	
larin 1/20 (21) 1 mg-20 mcg tablet[CE]	1	
larin 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
larin fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
larin fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
larissia 0.1 mg-20 mcg tablet[CE]	1	
latanoprost 0.005% eye drops	1	QL(5 per 25 days)
laxative (bisacodyl) 5 mg tablet	1	
laxative (bisacodyl) 5 mg tablet,delayed release	1	
laxative plus stool softener 8.6 mg-50 mg tablet	1	
leena 28 0.5 mg/1 mg/0.5 mg-35 mcg tablet[CE]	1	
leflunomide 10 mg tablet	1	QL(30 per 30 days)
leflunomide 20 mg tablet	1	QL(30 per 30 days)
lessina 0.1 mg-20 mcg tablet[CE]	1	
letrozole 2.5 mg tablet	1	QL(30 per 30 days)
leucovorin calcium 10 mg tab	1	
leucovorin calcium 15 mg tab	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
leucovorin calcium 25 mg tab	1	
leucovorin calcium 5 mg tab	1	
LEUKERAN 2 MG TABLET	1	QL(480 per 30 days)
leuprolide 2wk 14 mg/2.8 ml kt	1	PA,QL(2.8 per 14 days)
levetiracetam 1,000 mg tablet	1	
levetiracetam 100 mg/ml soln[EDS]	1	QL(900 per 30 days)
levetiracetam 250 mg tablet[EDS]	1	
levetiracetam 500 mg tablet[EDS]	1	
levetiracetam 500 mg/5 ml soln	1	QL(900 per 30 days)
levetiracetam 750 mg tablet[EDS]	1	
levetiracetam er 500 mg tablet	1	
levetiracetam er 750 mg tablet	1	
levobunolol 0.5% eye drops	1	QL(5 per 25 days)
levocarnitine 1 g/10 ml soln	1	
levocarnitine 330 mg tablet	1	
levocetirizine 2.5 mg/5 ml sol	1	QL(300 per 30 days)
levocetirizine 5 mg tablet	1	QL(30 per 30 days)
levofloxacin 0.5% eye drops	1	
levofloxacin 250 mg tablet	1	
levofloxacin 500 mg tablet	1	
levofloxacin 750 mg tablet	1	
levomefolate-algal 15 mg cap	1	
levonest (28) 50-30 (6)/75-40(5)/125-30(10) tablet[CE]	1	
levono-e estrad 0.15-0.03-0.01[CE]	1	QL(91 per 90 days)
levonor-e estrad 0.1-0.02-0.01[CE]	1	QL(91 per 90 days)
levonor-eth estra 0.09-0.02 mg[CE]	1	
levonor-eth estrad 0.1-0.02 mg[CE]	1	
levonor-eth estrad 0.15-0.03[CE]	1	
levonor-eth estrad 0.15-0.03[CE]	1	QL(91 per 90 days)
levonor-eth estrad triphasic[CE]	1	
levonorg 0.15mg-ee 20-25-30mcg[CE]	1	QL(91 per 90 days)
levonorgestrel 1.5 mg tablet[CE]	1	
levora-28 0.15 mg-0.03 mg tablet[CE]	1	
levothyroxine 100 mcg tablet[EDS]	1	
levothyroxine 112 mcg tablet[EDS]	1	
levothyroxine 125 mcg tablet[EDS]	1	
levothyroxine 137 mcg tablet[EDS]	1	
levothyroxine 150 mcg tablet[EDS]	1	
levothyroxine 175 mcg tablet[EDS]	1	
levothyroxine 200 mcg tablet[EDS]	1	
levothyroxine 25 mcg tablet[EDS]	1	
levothyroxine 300 mcg tablet[EDS]	1	
levothyroxine 50 mcg tablet[EDS]	1	
levothyroxine 75 mcg tablet[EDS]	1	
levothyroxine 88 mcg tablet[EDS]	1	
LEXIVA 50 MG/ML ORAL SUSPENSION	1	QL(1575 per 28 days)
lice killing 0.33 %-4 % shampoo	1	
lice treatment (permethrin) 1 % topical liquid	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
lice treatment 0.33 %-4 % shampoo	1	
lice treatment 1 % topical liquid	1	
lidocaine 2% viscous soln	1	
lidocaine 4% cream	1	
lidocaine 5% patch	1	PA,QL(90 per 30 days)
lidocaine hcl 2% jelly	1	
lidocaine hcl 2% jelly uro-jet	1	
lidocaine viscous 2 % mucosal solution	1	
lidocaine-prilocaine cream	1	
lillow (28) 0.15 mg-0.03 mg tablet[CE]	1	
lindane 1% shampoo	1	
linezolid 100 mg/5 ml susp	1	QL(1800 per 30 days)
linezolid 600 mg tablet	1	QL(30 per 30 days)
liothyronine sod 25 mcg tab	1	
liothyronine sod 5 mcg tab	1	
liothyronine sod 50 mcg tab	1	
liquituss gg 200 mg/5 ml oral liquid	1	
lisinopril 10 mg tablet[EDS]	1	
lisinopril 2.5 mg tablet[EDS]	1	
lisinopril 20 mg tablet[EDS]	1	
lisinopril 30 mg tablet[EDS]	1	
lisinopril 40 mg tablet[EDS]	1	
lisinopril 5 mg tablet[EDS]	1	
lisinopril-hctz 10-12.5 mg tab[EDS]	1	
lisinopril-hctz 20-12.5 mg tab[EDS]	1	
lisinopril-hctz 20-25 mg tab[EDS]	1	
LITE TOUCH LANCETS 28 GAUGE	1	
LITE TOUCH LANCETS 30 GAUGE	1	
LITE TOUCH LANCETS 33 GAUGE	1	
LITE TOUCH LANCING DEVICE	1	
LITE TOUCH-MEDIUM MASK	1	
LITEAIRE MDI CHAMBER	1	
LITETOUCH-LARGE MASK	1	
LITETOUCH-SMALL MASK	1	
lithium 8 meq/5 ml solution	1	
lithium carbonate 150 mg cap[EDS]	1	
lithium carbonate 300 mg cap[EDS]	1	
lithium carbonate 300 mg tab[EDS]	1	
lithium carbonate 600 mg cap[EDS]	1	
lithium carbonate er 300 mg tb[EDS]	1	
lithium carbonate er 450 mg tb[EDS]	1	
LO LOESTRIN FE 1 MG-10 MCG (24)/10 MCG (2) TABLET[CE]	1	
lo-zumandimine (28) 3 mg-0.02 mg tablet[CE]	1	
lojaimiess 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
LONSURF 15 MG-6.14 MG TABLET	1	PA,QL(100 per 30 days)
LONSURF 20 MG-8.19 MG TABLET	1	PA,QL(80 per 30 days)
loperamide 2 mg capsule	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
lopinavir-ritonavir 80-20mg/ml	1	
lopinavir-ritonavr 100-25mg tb	1	QL(300 per 30 days)
lopinavir-ritonavr 200-50mg tb	1	QL(150 per 30 days)
lorata-dine d 10 mg-240 mg tablet,extended release	1	
loratadine 10 mg odt	1	
loratadine 10 mg tablet	1	
loratadine 5 mg/5 ml syrup	1	
loratadine-d 10 mg-240 mg tablet,extended release 24 hr	1	
loratadine-d 5 mg-120 mg tablet,extended release 12 hr	1	
lorazepam 0.5 mg tablet	1	QL(90 per 30 days)
lorazepam 1 mg tablet	1	QL(90 per 30 days)
lorazepam 2 mg tablet	1	QL(150 per 30 days)
lorazepam 2 mg/ml oral concent	1	QL(150 per 30 days)
lorazepam intensol 2 mg/ml oral concentrate	1	QL(150 per 30 days)
LORBRENA 100 MG TABLET	1	PA,QL(30 per 30 days)
LORBRENA 25 MG TABLET	1	PA,QL(90 per 30 days)
loryna (28) 3 mg-0.02 mg tablet[CE]	1	
losartan potassium 100 mg tab[EDS]	1	QL(60 per 30 days)
losartan potassium 25 mg tab[EDS]	1	QL(60 per 30 days)
losartan potassium 50 mg tab[EDS]	1	QL(60 per 30 days)
losartan-hctz 100-12.5 mg tab[EDS]	1	QL(60 per 30 days)
losartan-hctz 100-25 mg tab[EDS]	1	QL(60 per 30 days)
losartan-hctz 50-12.5 mg tab[EDS]	1	QL(60 per 30 days)
lovastatin 10 mg tablet[EDS]	1	
lovastatin 20 mg tablet[EDS]	1	
lovastatin 40 mg tablet[EDS]	1	
low-ogestrel (28) 0.3 mg-30 mcg tablet[CE]	1	
loxapine 10 mg capsule	1	
loxapine 25 mg capsule	1	
loxapine 5 mg capsule	1	
loxapine 50 mg capsule	1	
lubricant eye (pg-peg 400) 0.4 %-0.3 % drops	1	
lubricant eye drops 0.5 %	1	
lutera (28) 0.1 mg-20 mcg tablet[CE]	1	
lyleq 0.35 mg tablet[CE]	1	
lyllana 0.025 mg/24 hr transdermal patch	1	QL(8 per 28 days)
lyllana 0.0375 mg/24 hr transdermal patch	1	QL(8 per 28 days)
lyllana 0.05 mg/24 hr transdermal patch	1	QL(8 per 28 days)
lyllana 0.075 mg/24 hr transdermal patch	1	QL(8 per 28 days)
lyllana 0.1 mg/24 hr transdermal patch	1	QL(8 per 28 days)
LYNPARZA 100 MG TABLET	1	PA,QL(120 per 30 days)
LYNPARZA 150 MG TABLET	1	PA,QL(120 per 30 days)
LYSODREN 500 MG TABLET	1	
lyza 0.35 mg tablet[CE]	1	
m-dryl 12.5 mg/5 ml oral liquid	1	
m-natal plus 27 mg iron-1 mg tablet	1	
m-pap 160 mg/5 ml oral liquid	1	
MAG-AL PLUS 200 MG-200 MG-20 MG/5 ML ORAL SUSPENSION	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
mag-al plus extra strength 400 mg-400 mg-40 mg/5 ml oral suspension	1	
MAGELLAN SAFETY SYRINGE 1 ML 23 GAUGE X 1"	1	
MAGELLAN SYRINGE 1 ML 27 GAUGE X 1/2"	1	
MAGELLAN TUBERCULIN SAFETY SYRINGE 1 ML 28 GAUGE X 1/2"	1	
magnesium citrate solution	1	
mapap (acetaminophen) 325 mg tablet	1	
mapap (acetaminophen) 500 mg capsule	1	
maprotiline 25 mg tablet	1	
maprotiline 50 mg tablet	1	
maprotiline 75 mg tablet	1	
marlissa (28) 0.15 mg-0.03 mg tablet[CE]	1	
MARPLAN 10 MG TABLET	1	
MATULANE 50 MG CAPSULE	1	
MAVYRET 100 MG-40 MG TABLET	1	PA,QL(84 per 28 days)
MAVYRET 50 MG-20 MG ORAL PELLETS IN PACKET	1	PA,QL(150 per 30 days)
maxi-tuss ac 10 mg-100 mg/5 ml oral liquid	1	
maxi-tuss g 10 mg-100 mg/5 ml oral liquid	1	
maxi-tuss gmx 10 mg-200 mg/5 ml oral liquid	1	
meclizine 12.5 mg tablet	1	
meclizine 25 mg tablet	1	
MEDISENSE THIN LANCETS	1	
MEDISENSE THIN LANCETS 28 GAUGE	1	
MEDLANCE PLUS LANCETS 21 GAUGE	1	
MEDLANCE PLUS LANCETS 25 GAUGE	1	
MEDLANCE PLUS LANCETS 30 GAUGE	1	
MEDLANCE PLUS SPECIAL BLADE 0.8 MM X 2 MM MISC	1	
medroxyprogesterone 10 mg tab	1	
medroxyprogesterone 150 mg/ml[CE]	1	QL(1 per 90 days)
medroxyprogesterone 150 mg/ml[CE]	1	QL(1 per 90 days)
medroxyprogesterone 2.5 mg tab	1	
medroxyprogesterone 5 mg tab	1	
mefloquine hcl 250 mg tablet	1	
megestrol 20 mg tablet	1	
megestrol 40 mg tablet	1	
megestrol acet 40 mg/ml susp	1	
megestrol acet 400 mg/10 ml	1	
MEKTOVI 15 MG TABLET	1	PA,QL(180 per 30 days)
melodetta 24 fe chewable tab[CE]	1	
meloxicam 15 mg tablet	1	QL(30 per 30 days)
meloxicam 7.5 mg tablet	1	QL(60 per 30 days)
melphalan 2 mg tablet	1	QL(80 per 30 days)
memantine 5-10 mg titration pk	1	QL(98 per 30 days)
memantine hcl 10 mg tablet[EDS]	1	QL(60 per 30 days)
memantine hcl 2 mg/ml solution	1	QL(360 per 30 days)
memantine hcl 5 mg tablet[EDS]	1	QL(60 per 30 days)
MENQUADFI (PF) 10 MCG/0.5 ML INTRAMUSCULAR SOLUTION	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
MENVEO MENA COMPONENT (PF) 10 MCG/0.5 ML (FINAL) IM SOLUTION	1	
MENVEO MENCYW-135 COMPONENT (PF) 5 MCG X 3/0.5 ML (FINAL) IM SOLUTION	1	
meperidine 50 mg tablet	1	QL(480 per 30 days)
meperidine 50 mg/5 ml solution	1	QL(720 per 30 days)
mercaptopurine 50 mg tablet	1	QL(480 per 30 days)
mesalamine 4 gm/60 ml enema	1	QL(1800 per 30 days)
mesalamine dr 1.2 gm tablet	1	QL(120 per 30 days)
MESNEX 400 MG TABLET	1	
metadate er 20 mg tablet,extended release	1	QL(90 per 30 days)
metaproterenol 10 mg/5 ml syr	1	
metformin hcl 1,000 mg tablet[EDS]	1	
metformin hcl 500 mg tablet[EDS]	1	
metformin hcl 850 mg tablet[EDS]	1	
metformin hcl er 500 mg tablet[EDS]	1	QL(120 per 30 days)
metformin hcl er 750 mg tablet[EDS]	1	QL(60 per 30 days)
methadone 10 mg/5 ml solution	1	QL(1800 per 30 days)
methadone 10 mg/ml oral conc	1	QL(360 per 30 days)
methadone 5 mg/5 ml solution	1	QL(3600 per 30 days)
methadone hcl 10 mg tablet	1	QL(240 per 30 days)
methadone hcl 5 mg tablet	1	QL(480 per 30 days)
methadone intensol 10 mg/ml oral concentrate	1	QL(360 per 30 days)
methazolamide 25 mg tablet	1	
methazolamide 50 mg tablet	1	
methergine 0.2 mg tablet	1	
methimazole 10 mg tablet[EDS]	1	
methimazole 5 mg tablet[EDS]	1	
methocarbamol 500 mg tablet	1	
methocarbamol 750 mg tablet	1	
methotrexate 2.5 mg tablet	1	
methotrexate 50 mg/2 ml vial	1	
methotrexate 50 mg/2 ml vial	1	
methoxsalen 10 mg softgel	1	
methyldopa 250 mg tablet[EDS]	1	
methyldopa 500 mg tablet[EDS]	1	
methylergonovine 0.2 mg tablet	1	
methylphenidate 10 mg chew tab	1	QL(180 per 30 days)
methylphenidate 10 mg tablet	1	QL(90 per 30 days)
methylphenidate 10 mg/5 ml sol	1	QL(900 per 30 days)
methylphenidate 2.5 mg chew tb	1	QL(150 per 30 days)
methylphenidate 20 mg tablet	1	QL(90 per 30 days)
methylphenidate 5 mg chew tab	1	QL(150 per 30 days)
methylphenidate 5 mg tablet	1	QL(90 per 30 days)
methylphenidate 5 mg/5 ml soln	1	QL(1800 per 30 days)
methylphenidate cd 10 mg cap	1	QL(30 per 30 days)
methylphenidate cd 20 mg cap	1	QL(60 per 30 days)
methylphenidate cd 30 mg cap	1	QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
methylphenidate er 10 mg tab	1	QL(180 per 30 days)
methylphenidate er 18 mg tab	1	QL(30 per 30 days)
methylphenidate er 20 mg tab	1	QL(90 per 30 days)
methylphenidate er 27 mg tab	1	QL(30 per 30 days)
methylphenidate er 36 mg tab	1	QL(60 per 30 days)
methylphenidate er 54 mg tab	1	QL(30 per 30 days)
methylphenidate er 72 mg tab	1	QL(30 per 30 days)
methylphenidate la 10 mg cap	1	QL(30 per 30 days)
methylphenidate la 20 mg cap	1	QL(30 per 30 days)
methylphenidate la 30 mg cap	1	QL(60 per 30 days)
methylphenidate la 40 mg cap	1	QL(30 per 30 days)
methylprednisolone 16 mg tab	1	
methylprednisolone 32 mg tab	1	
methylprednisolone 4 mg dosepk	1	
methylprednisolone 4 mg tablet	1	
methylprednisolone 8 mg tab	1	
metipranolol 0.3% eye drops	1	
metoclopramide 10 mg tablet	1	
metoclopramide 5 mg tablet	1	
metoclopramide 5 mg/5 ml soln	1	
metolazone 10 mg tablet	1	
metolazone 2.5 mg tablet	1	
metolazone 5 mg tablet	1	
metoprolol succ er 100 mg tab[EDS]	1	QL(60 per 30 days)
metoprolol succ er 200 mg tab[EDS]	1	QL(60 per 30 days)
metoprolol succ er 25 mg tab[EDS]	1	QL(60 per 30 days)
metoprolol succ er 50 mg tab[EDS]	1	QL(60 per 30 days)
metoprolol tartrate 100 mg tab[EDS]	1	
metoprolol tartrate 25 mg tab[EDS]	1	
metoprolol tartrate 37.5 mg tb[EDS]	1	
metoprolol tartrate 50 mg tab[EDS]	1	
metoprolol tartrate 75 mg tab[EDS]	1	
metoprolol-hctz 100-25 mg tab	1	
metoprolol-hctz 100-50 mg tab	1	
metoprolol-hctz 50-25 mg tab	1	
metronidazole 0.75% cream	1	
metronidazole 250 mg tablet	1	
metronidazole 500 mg tablet	1	
metronidazole topical 0.75% gl	1	
metronidazole vaginal 0.75% gl	1	
mexiletine 150 mg capsule	1	
mexiletine 200 mg capsule	1	
mexiletine 250 mg capsule	1	
mi acid suspension	1	
mi-acid max strength liquid	1	
mibelas 24 fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet[CE]	1	
miconazole 2% topical cream	1	
miconazole 2% vaginal cream	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
miconazole-3 200 mg-2 % (9 gram) vaginal kit	1	
miconazole-3 200 mg vaginal suppository	1	
miconazole-3 200 mg/5 gram (4 %) vaginal cream	1	
miconazole-3 4 % (200 mg)-2 % (9 gram) vaginal pack,prefil appl, cream	1	
miconazole-7 100 mg vaginal suppository	1	
miconazole-7 2 % vaginal cream	1	
MICRO THIN LANCETS 33 GAUGE	1	
MICROCHAMBER SPACER	1	
microgestin 1.5/30 (21) 1.5 mg-30 mcg tablet[CE]	1	
microgestin 1/20 (21) 1 mg-20 mcg tablet[CE]	1	
microgestin 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
microgestin fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet[CE]	1	
microgestin fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
MICROLET 2 LANCING DEVICE KIT	1	
MICROLET LANCET	1	
MICROLET NEXT LANCING DEVICE KIT	1	
MICROSPACER	1	
midodrine hcl 10 mg tablet	1	
midodrine hcl 2.5 mg tablet	1	
midodrine hcl 5 mg tablet	1	
mili 0.25 mg-35 mcg tablet[CE]	1	
milk of magnesia 400 mg/5 ml oral suspension	1	
mimvey 1 mg-0.5 mg tablet	1	
MINI LANCING DEVICE	1	
MINI WRIGHT PEAK FLOW METER	1	
MINI-WRIGHT PEAK FLOW METER	1	
MINIMED SYRINGE RESERVOIR 1.8 ML	1	
MINIMED SYRINGE RESERVOIR 3 ML	1	
minitran 0.1 mg/hr transdermal 24 hour patch	1	QL(30 per 30 days)
minitran 0.2 mg/hr transdermal 24 hour patch	1	QL(30 per 30 days)
minitran 0.4 mg/hr transdermal 24 hour patch	1	QL(60 per 30 days)
minitran 0.6 mg/hr transdermal 24 hour patch	1	QL(30 per 30 days)
minocycline 100 mg capsule	1	
minocycline 50 mg capsule	1	
minocycline 75 mg capsule	1	
minocycline hcl 75 mg tablet	1	
minoxidil 10 mg tablet	1	
minoxidil 2.5 mg tablet[EDS]	1	
mintox 200 mg-200 mg-20 mg/5 ml oral suspension	1	
mintox maximum strength 400 mg-400 mg-40 mg/5 ml oral suspension	1	
mirtazapine 15 mg tablet[EDS]	1	QL(30 per 30 days)
mirtazapine 30 mg tablet[EDS]	1	QL(30 per 30 days)
mirtazapine 45 mg tablet[EDS]	1	QL(30 per 30 days)
mirtazapine 7.5 mg tablet[EDS]	1	QL(30 per 30 days)
misoprostol 100 mcg tablet	1	
misoprostol 200 mcg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
modafinil 100 mg tablet	1	PA,QL(60 per 30 days)
modafinil 200 mg tablet	1	PA,QL(60 per 30 days)
MODERNA COVID-19 VACCINE (PF) 100 MCG/0.5 ML INTRAMUSCULAR SUSP. (EUA)[CE]	1	
moexipril hcl 15 mg tablet	1	
moexipril hcl 7.5 mg tablet	1	
mometasone furoate 0.1% cream	1	
mometasone furoate 0.1% oint	1	
mometasone furoate 0.1% soln	1	
mono-linyah 0.25 mg-35 mcg tablet[CE]	1	
MONOJECT BLOOD COLLECTION 20 GAUGE X 1" NEEDLE	1	
MONOJECT BLOOD COLLECTION 20 X 1 1/2" NEEDLE	1	
MONOJECT BLOOD COLLECTION 21 GAUGE X 1" NEEDLE	1	
MONOJECT BLOOD COLLECTION 22 GAUGE X 1" NEEDLE	1	
MONOJECT CONTROL SYRINGE LUER LOCK 12 ML	1	
MONOJECT ENFIT STERILE SYRINGE 1 ML	1	
MONOJECT ENFIT STERILE SYRINGE 3 ML	1	
MONOJECT ENFIT STERILE SYRINGE 35 ML	1	
MONOJECT ENFIT STERILE SYRINGE 6 ML	1	
MONOJECT ENFIT STERILE SYRINGE 60 ML	1	
MONOJECT ENFIT SYRINGE 12 ML	1	
MONOJECT HYPODERMIC NEEDLES 22 GAUGE X 1 1/2"	1	
MONOJECT HYPODERMIC NEEDLES 22 GAUGE X 1"	1	
MONOJECT HYPODERMIC NEEDLES 23 GAUGE X 1"	1	
MONOJECT HYPODERMIC NEEDLES 25 GAUGE X 1 1/2"	1	
MONOJECT HYPODERMIC NEEDLES 25 GAUGE X 1"	1	
MONOJECT HYPODERMIC NEEDLES 25 GAUGE X 5/8"	1	
MONOJECT HYPODERMIC NEEDLES 26 GAUGE X 1 1/2"	1	
MONOJECT HYPODERMIC NEEDLES 27 GAUGE X 1/2"	1	
MONOJECT HYPODERMIC NEEDLES 30 GAUGE X 3/4"	1	
MONOJECT MAGELLAN SYRINGE 1 ML 25 GAUGE X 1"	1	
MONOJECT MAGELLAN SYRINGE 1 ML 25 GAUGE X 5/8"	1	
MONOJECT MAGELLAN SYRINGE 3 ML 20 GAUGE X 1"	1	
MONOJECT PHARMACY TRAY REGULAR TIP 1 ML SYRINGE	1	
MONOJECT SAFETY SYRINGES	1	
MONOJECT SAFETY SYRINGES 12 ML 21 X 1 1/2"	1	
MONOJECT SAFETY SYRINGES 3 ML 21 GAUGE X 1"	1	
MONOJECT SAFETY SYRINGES 3 ML 22 GAUGE X 1 1/2"	1	
MONOJECT SAFETY SYRINGES 6 ML	1	
MONOJECT SYRINGE 3 ML	1	
MONOJECT SYRINGE 6 ML	1	
MONOJECT SYRINGE 6 ML 20 X 1 1/2"	1	
MONOJECT SYRINGE 6 ML 21 X 1 1/2"	1	
MONOJECT SYRINGE 6 ML 21 X 1"	1	
MONOJECT SYRINGE 6 ML 22 X 1 1/2"	1	
MONOJECT TB LUER LOK 1 ML SYRINGE	1	
MONOJECT TUBERCULIN SYRINGE 1 ML	1	
MONOLET LANCETS 21 GAUGE	1	
MONOLET THIN LANCETS 28 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
montelukast sod 10 mg tablet	1	QL(30 per 30 days)
montelukast sod 4 mg granules	1	QL(30 per 30 days)
montelukast sod 4 mg tab chew	1	QL(30 per 30 days)
montelukast sod 5 mg tab chew	1	QL(30 per 30 days)
morgidox 100 mg capsule	1	QL(90 per 30 days)
morgidox 50 mg capsule	1	
morphine sulf 10 mg/5 ml soln	1	QL(2700 per 30 days)
morphine sulf 100 mg/5 ml conc	1	QL(540 per 30 days)
morphine sulf 20 mg/5 ml soln	1	QL(1350 per 30 days)
morphine sulf er 100 mg tablet	1	QL(180 per 30 days)
morphine sulf er 15 mg tablet	1	QL(120 per 30 days)
morphine sulf er 200 mg tablet	1	QL(90 per 30 days)
morphine sulf er 30 mg tablet	1	QL(120 per 30 days)
morphine sulf er 60 mg tablet	1	QL(120 per 30 days)
morphine sulfate ir 15 mg tab	1	QL(180 per 30 days)
morphine sulfate ir 30 mg tab	1	QL(180 per 30 days)
MOVANTIK 12.5 MG TABLET	1	QL(30 per 30 days)
MOVANTIK 25 MG TABLET	1	QL(30 per 30 days)
moxifloxacin hcl 400 mg tablet	1	
MUCINEX 600 MG TABLET, EXTENDED RELEASE	1	
MUCINEX DM 60 MG-1,200 MG TABLET,EXTENDED RELEASE 12 HR	1	
mucinex fast-max dm max 5 mg-100 mg/5 ml oral liquid	1	
mucosa 400 mg tablet	1	
mucosa dm 20 mg-400 mg tablet	1	
mucus dm 30 mg-600 mg tablet,extended release	1	
mucus dm max er 60 mg-1,200 mg tablet,extended release	1	
mucus relief 400 mg tablet	1	
mucus relief cough 5 mg-100 mg/5 ml oral liquid	1	
mucus relief dm 20 mg-400 mg tablet	1	
mucus relief dm cough 20 mg-400 mg tablet	1	
mucus relief dm max 5 mg-100 mg/5 ml oral liquid	1	
mucus relief er 600 mg tablet, extended release	1	
mucus rlf chest congest 200 mg	1	
MUCUS-CHEST CONGESTION 100 MG/5 ML ORAL LIQUID	1	
MULTI-LANCET DEVICE 2 KIT	1	
multi-vit with fluoride and iron 0.25 mg-10 mg/ml oral drops	1	
multi-vitamin with fluoride 0.25 mg/ml oral drops	1	
multi-vitamin with fluoride 0.5 mg/ml oral drops	1	
multigen 70 mg-150 mg-10 mcg-2 mg-75mg tablet	1	
multigen folic 70 mg-150 mg-10 mcg-1 mg-2 mg tablet	1	
multigen plus 151 mg-60 mg-10 mcg-1 mg tablet	1	
mupirocin 2% ointment	1	
my choice 1.5 mg tablet[CE]	1	
my way 1.5 mg tablet[CE]	1	
mycophenolate 200 mg/ml susp	1	
mycophenolate 250 mg capsule	1	QL(360 per 30 days)
mycophenolate 500 mg tablet	1	QL(180 per 30 days)
mycophenolic acid dr 180 mg tb	1	
mycophenolic acid dr 360 mg tb	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
MYGLUCOHEALTH LANCETS 30 GAUGE	1	
MYLERAN 2 MG TABLET	1	QL(150 per 30 days)
myorisan 10 mg capsule	1	QL(60 per 30 days)
myorisan 20 mg capsule	1	QL(60 per 30 days)
myorisan 30 mg capsule	1	QL(60 per 30 days)
myorisan 40 mg capsule	1	QL(120 per 30 days)
nabumetone 500 mg tablet	1	
nabumetone 750 mg tablet	1	
nadolol 20 mg tablet	1	
nadolol 40 mg tablet	1	
nadolol 80 mg tablet	1	
naloxone 0.4 mg/ml carpuject	1	
naloxone 0.4 mg/ml vial	1	
naloxone 2 mg/2 ml syringe	1	
naltrexone 50 mg tablet	1	
NAPHCON-A 0.025 %-0.3 % EYE DROPS	1	
naproxen 250 mg tablet	1	
naproxen 375 mg tablet	1	
naproxen 500 mg tablet	1	
naproxen dr 375 mg tablet	1	
naproxen dr 500 mg tablet	1	
naproxen sodium 220 mg caplet	1	
naratriptan hcl 1 mg tablet	1	QL(9 per 30 days)
naratriptan hcl 2.5 mg tablet	1	QL(9 per 30 days)
NARCAN 4 MG/ACTUATION NASAL SPRAY	1	QL(2 per 30 days)
nasal allergy 55 mcg spray aerosol	1	
nasal allergy symptom control 5.2 mg/spray (4 %) spray	1	
nasal moisturizing 0.65 % spray aerosol	1	
natura-lax 17 gram/dose oral powder	1	QL(1054 per 30 days)
natural vegetable laxative (sennosides) 8.6 mg tablet	1	
NAYZILAM 5 MG/SPRAY (0.1 ML) NASAL SPRAY	1	QL(10 per 30 days)
necon 0.5/35 (28) 0.5 mg-35 mcg tablet[CE]	1	
nefazodone hcl 50 mg tablet	1	
neo-bacit-poly-hc eye ointment	1	
neo-polycin 3.5 mg-400 unit-10,000 unit/g eye ointment	1	
neo-polycin hc 3.5 mg-400-10,000 unit/g-1 % eye ointment	1	
neomyc-bacit-polymix eye oint	1	
neomyc-polym-dexamet eye ointm	1	
neomyc-polym-dexameth eye drop	1	
neomyc-polym-gramicid eye drop	1	
neomycin 500 mg tablet	1	
neomycin-poly-hc eye drops	1	
neomycin-polymyxin-hc ear soln	1	
neomycin-polymyxin-hc ear susp	1	
nevirapine 200 mg tablet	1	QL(60 per 30 days)
nevirapine 50 mg/5 ml susp	1	QL(1200 per 30 days)
nevirapine er 100 mg tablet	1	QL(120 per 30 days)
nevirapine er 400 mg tablet	1	QL(30 per 30 days)
new day 1.5 mg tablet[CE]	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
NEXAVAR 200 MG TABLET	1	PA,QL(120 per 30 days)
NEXTSTELLIS 3 MG-14.2 MG (28) TABLET[CE]	1	
niacin 500 mg tablet	1	
NICADAN 800 MG-10 MG-100 MG-500 MCG TABLET	1	
nicotine 14 mg/24hr patch[CE]	1	
nicotine 2 mg chewing gum[CE]	1	
nicotine 2 mg lozenge[CE]	1	
nicotine 2 mg mini lozenge[CE]	1	
nicotine 21 mg/24hr patch[CE]	1	
nicotine 4 mg chewing gum[CE]	1	
nicotine 4 mg lozenge[CE]	1	
nicotine 4 mg mini lozenge[CE]	1	
nicotine 7 mg/24hr patch[CE]	1	
nicotine transdermal system[CE]	1	
NICOTROL 10 MG INHALATION CARTRIDGE[CE]	1	
NICOTROL NS 10 MG/ML NASAL SPRAY[CE]	1	
nifedipine 10 mg capsule	1	
nifedipine 20 mg capsule	1	
nifedipine er 30 mg tablet	1	QL(60 per 30 days)
nifedipine er 30 mg tablet	1	QL(60 per 30 days)
nifedipine er 60 mg tablet	1	QL(60 per 30 days)
nifedipine er 60 mg tablet	1	QL(60 per 30 days)
nifedipine er 90 mg tablet	1	QL(60 per 30 days)
nifedipine er 90 mg tablet	1	QL(60 per 30 days)
nikki (28) 3 mg-0.02 mg tablet[CE]	1	
nilutamide 150 mg tablet	1	QL(60 per 30 days)
nitisinone 10 mg capsule	1	QL(60 per 30 days)
nitisinone 2 mg capsule	1	QL(300 per 30 days)
nitisinone 5 mg capsule	1	QL(120 per 30 days)
NITRO-BID 2 % TRANSDERMAL OINTMENT	1	
nitro-time 2.5 mg capsule,extended release	1	
nitro-time 6.5 mg capsule,extended release	1	
nitro-time 9 mg capsule,extended release	1	
nitrofurantoin 25 mg/5 ml susp	1	QL(2400 per 30 days)
nitrofurantoin mcr 100 mg cap	1	
nitrofurantoin mcr 50 mg cap	1	
nitrofurantoin mono-mcr 100 mg	1	
nitroglycerin 0.1 mg/hr patch[EDS]	1	QL(30 per 30 days)
nitroglycerin 0.2 mg/hr patch[EDS]	1	QL(30 per 30 days)
nitroglycerin 0.3 mg tablet sl	1	
nitroglycerin 0.4 mg tablet sl	1	
nitroglycerin 0.4 mg/hr patch[EDS]	1	QL(60 per 30 days)
nitroglycerin 0.6 mg tablet sl	1	
nitroglycerin 0.6 mg/hr patch	1	QL(30 per 30 days)
NIVESTYM 300 MCG/0.5 ML SUBCUTANEOUS SYRINGE	1	PA,QL(7 per 30 days)
NIVESTYM 300 MCG/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
NIVESTYM 480 MCG/0.8 ML SUBCUTANEOUS SYRINGE	1	PA,QL(11.2 per 30 days)
NIVESTYM 480 MCG/1.6 ML INJECTION SOLUTION	1	PA,QL(22.4 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
nizatidine 15 mg/ml solution	1	
nizatidine 150 mg capsule	1	
nizatidine 300 mg capsule	1	
non-aspirin 325 mg tablet	1	
non-aspirin extra strength 500 mg tablet	1	
non-aspirin pain relief 500 mg tablet	1	
nora-be 0.35 mg tablet[CE]	1	
noret-estr-fe 0.4-0.035(21)-75[CE]	1	
noreth-ee-fe 1-0.02(21)-75 tab[CE]	1	
noreth-ee-fe 1-0.02(24)-75 chw[CE]	1	
noreth-ee-fe 1.5-0.03mg(21)-75[CE]	1	
norethin-ee 1.5-0.03 mg(21) tb[CE]	1	
norethin-estra-fe 0.8-0.025 mg[CE]	1	
norethin-eth estrad 1 mg-5 mcg	1	
norethind-eth estrad 0.5-2.5	1	
norethind-eth estrad 1-0.02 mg[CE]	1	
norethindrone 0.35 mg tablet[CE]	1	
norethindrone 5 mg tablet	1	
norg-ee 0.18-0.215-0.25/0.025[CE]	1	
norg-ee 0.18-0.215-0.25/0.035[CE]	1	
norg-ethin estra 0.25-0.035 mg[CE]	1	
norlyda 0.35 mg tablet[CE]	1	
nortrel 0.5/35 (28) 0.5 mg-35 mcg tablet[CE]	1	
nortrel 1/35 (21) 1 mg-35 mcg tablet[CE]	1	
nortrel 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
nortrel 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet[CE]	1	
nortriptyline 10 mg/5 ml soln	1	
nortriptyline hcl 10 mg cap	1	
nortriptyline hcl 25 mg cap	1	
nortriptyline hcl 50 mg cap	1	
nortriptyline hcl 75 mg cap	1	
NORVIR 100 MG ORAL POWDER PACKET	1	QL(360 per 30 days)
NORVIR 80 MG/ML ORAL SOLUTION	1	QL(480 per 30 days)
NOVA SAFETY LANCETS 23 GAUGE	1	
NOVA SAFETY LANCETS 28 GAUGE	1	
NOVA SUREFLEX LANCETS	1	
NOVOLIN 70-30 FLEXPEN U-100 INSULIN 100 UNIT/ML (70-30) SUBCUTANEOUS	1	
NOVOLIN 70/30 U-100 INSULIN 100 UNIT/ML SUBCUTANEOUS SUSPENSION	1	
NOVOLIN N FLEXPEN 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN	1	
NOVOLIN N NPH U-100 INSULIN ISOPHANE 100 UNIT/ML SUBCUTANEOUS SUSP	1	
NOVOLIN R FLEXPEN 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN	1	
NOVOLIN R REGULAR U-100 INSULIN 100 UNIT/ML INJECTION SOLUTION	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
NOXAFIL 100 MG TABLET,DELAYED RELEASE	1	PA,QL(93 per 30 days)
NOXAFIL 200 MG/5 ML (40 MG/ML) ORAL SUSPENSION	1	PA,QL(840 per 28 days)
np thyroid 120 mg tablet	1	
np thyroid 15 mg tablet	1	
np thyroid 30 mg tablet	1	
np thyroid 60 mg tablet	1	
np thyroid 90 mg tablet	1	
NUBEQA 300 MG TABLET	1	PA,QL(120 per 30 days)
NUPLAZID 10 MG TABLET	1	PA,QL(30 per 30 days)
NUPLAZID 34 MG CAPSULE	1	PA,QL(30 per 30 days)
nyamyc 100,000 unit/gram topical powder	1	
nylia 7/7/7 (28) 0.5/0.75/1 mg-35 mcg tablet[CE]	1	
nymyo 0.25 mg-35 mcg tablet[CE]	1	
nystatin 100,000 unit/gm cream	1	
nystatin 100,000 unit/gm oint	1	
nystatin 100,000 unit/gm powd	1	
nystatin 100,000 unit/ml susp	1	
nystatin 500,000 unit oral tab	1	
nystop 100,000 unit/gram topical powder	1	
OCEAN NASAL 0.65 % SPRAY AEROSOL	1	
ocella 3 mg-0.03 mg tablet[CE]	1	
ODEFSEY 200 MG-25 MG-25 MG TABLET	1	QL(30 per 30 days)
ODOMZO 200 MG CAPSULE	1	PA,QL(30 per 30 days)
OFEV 100 MG CAPSULE	1	PA,QL(60 per 30 days)
OFEV 150 MG CAPSULE	1	PA,QL(60 per 30 days)
OFF ACTIVE 15 % TOPICAL SPRAY	1	
off deep woods 25 % topical pump spray	1	
OFF DEEP WOODS 25 % TOPICAL SPRAY	1	
OFF DEEP WOODS DRY 25 % TOPICAL SPRAY POWDER	1	
off deep woods sportsmen 25 % topical spray pump	1	
OFF DEEP WOODS SPORTSMEN 30 % TOPICAL SPRAY	1	
OFF DEEP WOODS SPORTSMEN 98.25 % TOPICAL SPRAY PUMP	1	
OFF FAMILYCARE (WITH DEET) 15 % TOPICAL SPRAY POWDER	1	
OFF FAMILYCARE (WITH DEET) 5 % TOPICAL SPRAY	1	
off familycare (with deet) 7 % topical spray	1	
OFF FAMILYCARE (WITH PICARIDIN) 5 % TOPICAL SPRAY WITH PUMP	1	
ofloxacin 0.3% ear drops	1	
ofloxacin 0.3% eye drops	1	
ogestrel tablet[CE]	1	
olanzapine 10 mg tablet[EDS]	1	QL(30 per 30 days)
olanzapine 15 mg tablet[EDS]	1	QL(60 per 30 days)
olanzapine 2.5 mg tablet[EDS]	1	QL(30 per 30 days)
olanzapine 20 mg tablet[EDS]	1	QL(60 per 30 days)
olanzapine 5 mg tablet[EDS]	1	QL(30 per 30 days)
olanzapine 7.5 mg tablet[EDS]	1	QL(30 per 30 days)
olmesartan medoxomil 20 mg tab[EDS]	1	QL(30 per 30 days)
olmesartan medoxomil 40 mg tab[EDS]	1	QL(30 per 30 days)
olmesartan medoxomil 5 mg tab[EDS]	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
olmesartan-hctz 20-12.5 mg tab	1	QL(30 per 30 days)
olmesartan-hctz 40-12.5 mg tab	1	QL(30 per 30 days)
olmesartan-hctz 40-25 mg tab	1	QL(30 per 30 days)
olopatadine hcl 0.1% eye drops	1	
omega-3 ethyl esters 1 gm cap	1	PA,QL(120 per 30 days)
omeprazole dr 10 mg capsule	1	QL(60 per 30 days)
omeprazole dr 20 mg capsule	1	QL(60 per 30 days)
omeprazole dr 40 mg capsule	1	QL(60 per 30 days)
OMNIPOD DASH 5 PACK INSULIN POD SUBCUTANEOUS CARTRIDGE	1	
OMNIPOD DASH PERSONAL DIABETES MANAGER KIT	1	
OMNIPOD INSULIN MANAGEMENT	1	
OMNIPOD INSULIN REFILL SUBCUTANEOUS CARTRIDGE	1	
OMNITROPE 10 MG/1.5 ML (6.7 MG/ML) SUBCUTANEOUS CARTRIDGE	1	PA,QL(12 per 28 days)
OMNITROPE 5 MG/1.5 ML (3.3 MG/ML) SUBCUTANEOUS CARTRIDGE	1	PA,QL(24 per 28 days)
OMNITROPE 5.8 MG SUBCUTANEOUS SOLUTION	1	PA,QL(8 per 28 days)
ON CALL LANCET 30 GAUGE	1	
ON CALL LANCING DEVICE	1	
ON CALL PLUS LANCET 30 GAUGE	1	
ON CALL PLUS LANCING DEVICE	1	
ON-THE-GO LANCETS 30 GAUGE	1	
ondansetron hcl 24 mg tablet	1	QL(30 per 30 days)
ondansetron hcl 4 mg tablet	1	QL(90 per 30 days)
ondansetron hcl 8 mg tablet	1	QL(90 per 30 days)
ondansetron odt 4 mg tablet	1	QL(90 per 30 days)
ondansetron odt 8 mg tablet	1	QL(90 per 30 days)
ONETOUCH DELICA LANCETS 30 GAUGE	1	
ONETOUCH DELICA LANCETS 33 GAUGE	1	
ONETOUCH DELICA LANCING DEVICE KIT	1	
ONETOUCH DELICA PLUS LANCET 30 GAUGE	1	
ONETOUCH DELICA PLUS LANCET 33 GAUGE	1	
ONETOUCH DELICA PLUS LANCING DEVICE KIT	1	
ONETOUCH SURESOFT LANCING DEVICES 18 GAUGE	1	
ONETOUCH SURESOFT LANCING DEVICES 21 GAUGE	1	
ONETOUCH SURESOFT LANCING DEVICES 28 GAUGE	1	
ONETOUCH ULTRASOFT LANCETS	1	
opcicon one-step 1.5 mg tablet[CE]	1	
OPTICHAMBER ADULT MASK-LARGE	1	
OPTICHAMBER DIAMOND VHC SPACER	1	
OPTICHAMBER DIAMOND VHC WITH LARGE MASK	1	
OPTICHAMBER DIAMOND VHC WITH MEDIUM MASK	1	
OPTICHAMBER DIAMOND VHC WITH SMALL MASK	1	
option-2 1.5 mg tablet[CE]	1	
oralone 0.1 % dental paste	1	
oralyte oral solution	1	
ORKAMBI 100 MG-125 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
ORKAMBI 100 MG-125 MG TABLET	1	PA,QL(112 per 28 days)
ORKAMBI 150 MG-188 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
ORKAMBI 200 MG-125 MG TABLET	1	PA,QL(112 per 28 days)
orphenadrine er 100 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
orsythia 0.1 mg-20 mcg tablet[CE]	1	
os-cal 500 + d3 500 mg-5 mcg (200 unit) tablet	1	
oscimin 0.125 mg tablet	1	
oscimin sl 0.125 mg sublingual tablet	1	
oscimin sr 0.375 mg tablet,extended release	1	
oseltamivir 6 mg/ml suspension	1	QL(1440 per 365 days)
oseltamivir phos 30 mg capsule	1	QL(224 per 365 days)
oseltamivir phos 45 mg capsule	1	QL(112 per 365 days)
oseltamivir phos 75 mg capsule	1	QL(112 per 365 days)
oxcarbazepine 150 mg tablet	1	
oxcarbazepine 300 mg tablet	1	
oxcarbazepine 300 mg/5 ml susp	1	
oxcarbazepine 600 mg tablet	1	
oxybutynin 5 mg tablet	1	
oxybutynin 5 mg/5 ml syrup	1	
oxybutynin cl er 10 mg tablet	1	QL(60 per 30 days)
oxybutynin cl er 15 mg tablet	1	QL(60 per 30 days)
oxybutynin cl er 5 mg tablet	1	QL(60 per 30 days)
oxycodone hcl (ir) 10 mg tab	1	QL(360 per 30 days)
oxycodone hcl (ir) 15 mg tab	1	QL(360 per 30 days)
oxycodone hcl (ir) 20 mg tab	1	QL(360 per 30 days)
oxycodone hcl (ir) 30 mg tab	1	QL(360 per 30 days)
oxycodone hcl (ir) 5 mg cap	1	QL(360 per 30 days)
oxycodone hcl (ir) 5 mg tablet	1	QL(360 per 30 days)
oxycodone hcl 100 mg/5 ml conc	1	QL(270 per 30 days)
oxycodone hcl 5 mg/5 ml soln	1	QL(5400 per 30 days)
oxycodone-acetaminophen 10-325	1	QL(360 per 30 days)
oxycodone-acetaminophen 5-325	1	QL(360 per 30 days)
oxycodone-acetaminophn 2.5-325	1	QL(360 per 30 days)
oxycodone-acetaminophn 7.5-325	1	QL(360 per 30 days)
oysco 500/d 500 mg-5 mcg (200 unit) tablet	1	
oysco-500 tablet	1	
oyster shell calcium 500 500 mg calcium (1,250 mg) tablet	1	
oyster shell calcium 500 mg calcium (1,250 mg) tablet	1	
oyster shell calcium 500 mg tb	1	
oyster shell calcium-vitamin d3 500 mg-5 mcg (200 unit) tablet	1	
OZEMPIC 0.25 MG OR 0.5 MG (2 MG/1.5 ML) SUBCUTANEOUS PEN INJECTOR	1	QL(1.5 per 28 days)
OZEMPIC 1 MG/DOSE (2 MG/1.5 ML) SUBCUTANEOUS PEN INJECTOR	1	QL(3 per 28 days)
OZEMPIC 1 MG/DOSE (4 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	1	QL(3 per 28 days)
PACERONE 100 MG TABLET	1	
pacerone 200 mg tablet[EDS]	1	
PACERONE 400 MG TABLET	1	
PAIN & FEVER 325 MG TABLET	1	
pain relief (acetaminophen) 325 mg tablet	1	
pain relief (acetaminophen) 500 mg tablet	1	
pain relief extra strength 500 mg tablet	1	
pain reliever (acetaminophen) 325 mg tablet	1	
pain reliever (acetaminophen) 500 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
pain reliever extra strength 500 mg tablet	1	
paliperidone er 1.5 mg tablet	1	QL(30 per 30 days)
paliperidone er 3 mg tablet	1	QL(30 per 30 days)
paliperidone er 6 mg tablet	1	QL(60 per 30 days)
paliperidone er 9 mg tablet	1	QL(30 per 30 days)
PANRETIN 0.1 % TOPICAL GEL	1	
pantoprazole sod dr 20 mg tab	1	QL(60 per 30 days)
pantoprazole sod dr 40 mg tab	1	QL(60 per 30 days)
paricalcitol 1 mcg capsule	1	QL(30 per 30 days)
paricalcitol 2 mcg capsule	1	QL(30 per 30 days)
paricalcitol 4 mcg capsule	1	QL(12 per 30 days)
paromomycin 250 mg capsule	1	
paroxetine hcl 10 mg tablet[EDS]	1	QL(30 per 30 days)
paroxetine hcl 20 mg tablet[EDS]	1	QL(30 per 30 days)
paroxetine hcl 30 mg tablet[EDS]	1	QL(60 per 30 days)
paroxetine hcl 40 mg tablet[EDS]	1	QL(60 per 30 days)
PEDIALYTE FREEZER POPS ORAL SOLUTION	1	
PEDIALYTE ORAL SOLUTION	1	
PEDIALYTE SINGLES ORAL SOLUTION	1	
pediatric electrolyte oral solution	1	
peg 3350-electrolyte solution	1	
peg-3350 and electrolytes soln	1	
PEGANONE 250 MG TABLET	1	
PEGINTRON 50 MCG KIT	1	PA,QL(4 per 28 days)
PEMAZYRE 13.5 MG TABLET	1	PA,QL(14 per 21 days)
PEMAZYRE 4.5 MG TABLET	1	PA,QL(14 per 21 days)
PEMAZYRE 9 MG TABLET	1	PA,QL(14 per 21 days)
penicillamine 250 mg tablet	1	
penicillin vk 125 mg/5 ml soln	1	
penicillin vk 250 mg tablet	1	
penicillin vk 250 mg/5 ml soln	1	
penicillin vk 500 mg tablet	1	
pentamidine 300 mg inhal powdr	1	
pentoxifylline er 400 mg tab	1	
perindopril erbumine 2 mg tab	1	
perindopril erbumine 4 mg tab	1	
perindopril erbumine 8 mg tab	1	
permethrin 5% cream	1	
perphen-amitrip 2 mg-10 mg tab	1	
perphen-amitrip 2 mg-25 mg tab	1	
perphen-amitrip 4 mg-10 mg tab	1	
perphen-amitrip 4 mg-25 mg tab	1	
perphen-amitrip 4 mg-50 mg tab	1	
perphenazine 16 mg tablet	1	
perphenazine 2 mg tablet	1	
perphenazine 4 mg tablet	1	
perphenazine 8 mg tablet	1	
PERSERIS 120 MG ABDOMINAL SUBCUTANEOUS EXT. RELEASE SUSPENSION SYRINGE	1	QL(1 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
PERSERIS 90 MG ABDOMINAL SUBCUTANEOUS EXT. RELEASE SUSPENSION SYRINGE	1	QL(1 per 28 days)
PFIZER-BIONT COVID-19 TRIS (12Y UP) VAC(PF)30 MCG/0.3 ML IM SUSP (EUA)	1	
PFIZER-BIONT COVID-19 TRIS (5-11YR) VAC(PF)10 MCG/0.2 ML IM SUSP (EUA)	1	
PFIZER-BIONTECH COVID-19 VACCINE (PF) 30 MCG/0.3 ML IM SUSPENSION(EUA)[CE]	1	
PHARMACIST CHOICE 30G LANCETS	1	
PHASEAL PROTECTOR 13 MM DEVICE	1	
PHASEAL PROTECTOR 20 MM DEVICE	1	
PHASEAL PROTECTOR 28 MM DEVICE	1	
phenadoz 12.5 mg suppository	1	
phenadoz 25 mg suppository	1	
phenazopyridine 100 mg tab	1	
phenelzine sulfate 15 mg tab	1	
phenobarbital 100 mg tablet	1	QL(90 per 30 days)
phenobarbital 15 mg tablet	1	QL(120 per 30 days)
phenobarbital 16.2 mg tablet	1	QL(90 per 30 days)
phenobarbital 20 mg/5 ml elix	1	QL(1500 per 30 days)
phenobarbital 30 mg tablet	1	QL(300 per 30 days)
phenobarbital 32.4 mg tablet	1	QL(90 per 30 days)
phenobarbital 60 mg tablet	1	QL(120 per 30 days)
phenobarbital 64.8 mg tablet	1	QL(90 per 30 days)
phenobarbital 97.2 mg tablet	1	QL(90 per 30 days)
phenytoin 100 mg/4 ml susp	1	
phenytoin 125 mg/5 ml susp	1	
phenytoin 50 mg tablet chew	1	
phenytoin sod ext 100 mg cap	1	
phenytoin sod ext 200 mg cap	1	
phenytoin sod ext 300 mg cap	1	
philith 0.4 mg-35 mcg tablet[CE]	1	
phospha 250 neutral 250 mg tablet	1	
phytonadione 1 mg/0.5 ml syr	1	
phytonadione 10 mg/ml ampul	1	
PIFELTRO 100 MG TABLET	1	QL(60 per 30 days)
pilocarpine 1% eye drops	1	
pilocarpine 2% eye drops	1	
pilocarpine 4% eye drops	1	
pilocarpine hcl 5 mg tablet	1	
pilocarpine hcl 7.5 mg tablet	1	
pimecrolimus 1% cream	1	
pimozide 1 mg tablet	1	
pimozide 2 mg tablet	1	
pimtrea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
pindolol 10 mg tablet	1	
pindolol 5 mg tablet	1	
pink bismuth 262 mg tablet	1	
pink bismuth 262 mg/15 ml oral suspension	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
pioglitazone hcl 15 mg tablet[EDS]	1	QL(30 per 30 days)
pioglitazone hcl 30 mg tablet[EDS]	1	QL(30 per 30 days)
pioglitazone hcl 45 mg tablet[EDS]	1	QL(30 per 30 days)
PIP LANCET 28 GAUGE	1	
PIP LANCET 30 GAUGE	1	
PIQRAY 200 MG/DAY (200 MG X 1) TABLET	1	PA,QL(28 per 28 days)
PIQRAY 250 MG/DAY (200 MG X 1-50 MG X 1) TABLET	1	PA,QL(56 per 28 days)
PIQRAY 300 MG/DAY (150 MG X 2) TABLET	1	PA,QL(56 per 28 days)
pirmella 0.5/0.75/1 mg-35 mcg tablet[CE]	1	
pirmella 1 mg-35 mcg tablet[CE]	1	
PLAN B ONE-STEP 1.5 MG TABLET[CE]	1	
PLEGRIDY 125 MCG/0.5 ML INTRAMUSCULAR SYRINGE	1	PA,QL(1 per 28 days)
PLEGRIDY 125 MCG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(1 per 28 days)
PLEGRIDY 125 MCG/0.5 ML SUBCUTANEOUS SYRINGE	1	PA,QL(1 per 28 days)
PLEGRIDY 63 MCG/0.5 ML-94 MCG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(1 per 28 days)
PLEGRIDY 63 MCG/0.5 ML-94 MCG/0.5 ML SUBCUTANEOUS SYRINGE	1	PA,QL(1 per 28 days)
PNEUMOVAX-23 25 MCG/0.5 ML INJECTION SOLUTION[CE]	1	
PNEUMOVAX-23 25 MCG/0.5 ML INJECTION SYRINGE[CE]	1	
pnv-select 27 mg-1 mg tablet	1	
POCKET CHAMBER SPACER	1	
podofilox 0.5% topical soln	1	
poly-iron 150 forte 150 mg-25 mcg-1 mg capsule	1	
poly-iron 150 mg iron capsule	1	
POLY-VITAMIN TAB CHEW	1	
polycin 500 unit-10,000 unit/gram eye ointment	1	
polyethylene glycol 3350 powd	1	QL(1054 per 30 days)
polymyxin b-tmp eye drops	1	
polysaccharide iron 150 mg cap	1	
polyvinyl alcohl 1.4% eyedrop	1	
POMALYST 1 MG CAPSULE	1	PA,QL(21 per 28 days)
POMALYST 2 MG CAPSULE	1	PA,QL(21 per 28 days)
POMALYST 3 MG CAPSULE	1	PA,QL(21 per 28 days)
POMALYST 4 MG CAPSULE	1	PA,QL(21 per 28 days)
portia 28 0.15 mg-0.03 mg tablet[CE]	1	
posaconazole dr 100 mg tablet	1	PA,QL(93 per 30 days)
potassium citrate er 10 meq tb	1	
potassium citrate er 15 meq tb	1	
potassium citrate er 5 meq tab	1	
potassium cl 10% (20 meq/15ml)	1	
potassium cl 20% (40 meq/15ml)	1	
potassium cl er 10 meq capsule	1	
potassium cl er 10 meq tablet	1	
potassium cl er 10 meq tablet	1	
potassium cl er 20 meq tablet	1	
potassium cl er 20 meq tablet	1	
potassium cl er 8 meq capsule	1	
potassium cl er 8 meq tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
pramipexole 0.125 mg tablet[EDS]	1	
pramipexole 0.25 mg tablet[EDS]	1	
pramipexole 0.5 mg tablet[EDS]	1	
pramipexole 0.75 mg tablet[EDS]	1	
pramipexole 1 mg tablet[EDS]	1	
pramipexole 1.5 mg tablet[EDS]	1	
prasugrel 10 mg tablet	1	QL(30 per 30 days)
prasugrel 5 mg tablet	1	QL(30 per 30 days)
pravastatin sodium 10 mg tab[EDS]	1	
pravastatin sodium 20 mg tab[EDS]	1	
pravastatin sodium 40 mg tab[EDS]	1	
pravastatin sodium 80 mg tab[EDS]	1	
praziquantel 600 mg tablet	1	
prazosin 1 mg capsule	1	
prazosin 2 mg capsule	1	
prazosin 5 mg capsule	1	
prednisolone 15 mg/5 ml soln	1	
prednisolone 15 mg/5 ml soln	1	
prednisolone 5 mg/5 ml soln	1	
prednisolone ac 1% eye drop	1	
prednisolone sod 1% eye drop	1	
prednisolone sod ph 25 mg/5 ml	1	
prednisone 1 mg tablet	1	
prednisone 10 mg tab dose pack	1	
prednisone 10 mg tablet	1	
prednisone 2.5 mg tablet	1	
prednisone 20 mg tablet	1	
prednisone 5 mg tab dose pack	1	
prednisone 5 mg tablet	1	
prednisone 5 mg/5 ml solution	1	
prednisone 50 mg tablet	1	
pregabalin 100 mg capsule	1	QL(90 per 30 days)
pregabalin 150 mg capsule	1	QL(90 per 30 days)
pregabalin 20 mg/ml solution	1	QL(900 per 30 days)
pregabalin 200 mg capsule	1	QL(90 per 30 days)
pregabalin 225 mg capsule	1	QL(60 per 30 days)
pregabalin 25 mg capsule	1	QL(90 per 30 days)
pregabalin 300 mg capsule	1	QL(60 per 30 days)
pregabalin 50 mg capsule	1	QL(90 per 30 days)
pregabalin 75 mg capsule	1	QL(90 per 30 days)
prenatal 28 mg iron-800 mcg tablet	1	
prenatal vitamin 27 mg iron-0.8 mg tablet	1	
prenatal vitamin 27 mg iron-800 mcg tablet	1	
prenatal vitamins plus low iron 27 mg iron-1 mg tablet	1	
PRENATE AM 1 MG-500 MG TABLET	1	
PRENATE RESTORE 27 MG IRON-1 MG-400 MG CAPSULE	1	
preplus 27 mg iron-1 mg tablet	1	
PRESSURE ACTIVATED LANCETS 21 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
PRESSURE ACTIVATED LANCETS 28 GAUGE	1	
pretab 29 mg-1 mg tablet	1	
prevalite 4 gram oral powder	1	
prevalite 4 gram powder for susp in a packet	1	
previfem 0.25 mg-35 mcg tablet[CE]	1	
PREVNAR 13 (PF) 0.5 ML INTRAMUSCULAR SYRINGE[CE]	1	
PREVNAR 20 (PF) 0.5 ML INTRAMUSCULAR SYRINGE	1	
PREZCOBIX 800 MG-150 MG TABLET	1	QL(30 per 30 days)
PREZISTA 100 MG/ML ORAL SUSPENSION	1	QL(360 per 30 days)
PREZISTA 150 MG TABLET	1	QL(240 per 30 days)
PREZISTA 600 MG TABLET	1	QL(60 per 30 days)
PREZISTA 75 MG TABLET	1	QL(480 per 30 days)
PREZISTA 800 MG TABLET	1	QL(30 per 30 days)
primaquine 26.3 mg tablet	1	
PRIMEAIRE SPACER	1	
primidone 250 mg tablet[EDS]	1	
primidone 50 mg tablet[EDS]	1	
PRO COMFORT ALCOHOL PADS	1	
PRO COMFORT LANCET 30 GAUGE	1	
PRO COMFORT LANCET 31 GAUGE	1	
PRO COMFORT SPACER-ADULT MASK	1	
PRO COMFORT SPACER-CHILD MASK	1	
probenecid 500 mg tablet	1	
probenecid-colchicine tablet	1	
PROCARE SPACER WITH ADULT MASK	1	
PROCHAMBER	1	
prochlorperazine 10 mg tab	1	
prochlorperazine 25 mg supp	1	
prochlorperazine 5 mg tablet	1	
procto-med hc 2.5 % topical cream perineal applicator	1	
procto-pak 1 % topical cream perineal applicator	1	
proctosol hc 2.5 % topical cream perineal applicator	1	
proctozone-hc 2.5 % topical cream perineal applicator	1	
PRODIGY LANCETS 26 GAUGE	1	
PRODIGY LANCETS 28 GAUGE	1	
PRODIGY LANCING DEVICE	1	
PRODIGY TWIST TOP LANCET 28 GAUGE	1	
progesterone 100 mg capsule	1	
progesterone 200 mg capsule	1	
PROGRAF 0.2 MG ORAL GRANULES IN PACKET	1	
PROGRAF 1 MG ORAL GRANULES IN PACKET	1	
PROMACTA 12.5 MG ORAL POWDER PACKET	1	PA,QL(360 per 30 days)
PROMACTA 12.5 MG TABLET	1	PA,QL(60 per 30 days)
PROMACTA 25 MG ORAL POWDER PACKET	1	PA,QL(180 per 30 days)
PROMACTA 25 MG TABLET	1	PA,QL(30 per 30 days)
PROMACTA 50 MG TABLET	1	PA,QL(90 per 30 days)
PROMACTA 75 MG TABLET	1	PA,QL(60 per 30 days)
promethazine 12.5 mg suppos	1	
promethazine 12.5 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
promethazine 25 mg suppository	1	
promethazine 25 mg tablet	1	
promethazine 50 mg suppository	1	
promethazine 50 mg tablet	1	
promethazine 6.25 mg/5 ml syrp	1	
promethazine-codeine syrup	1	
promethazine-dm 6.25-15 mg/5ml	1	
promethegan 12.5 mg rectal suppository	1	
promethegan 25 mg rectal suppository	1	
promethegan 50 mg rectal suppository	1	
propafenone hcl 150 mg tablet	1	
propafenone hcl 225 mg tab	1	
propafenone hcl 300 mg tab	1	
propranolol 10 mg tablet[EDS]	1	
propranolol 20 mg tablet[EDS]	1	
propranolol 20 mg/5 ml soln[EDS]	1	
propranolol 40 mg tablet[EDS]	1	
propranolol 40 mg/5 ml soln	1	
propranolol 60 mg tablet	1	
propranolol 80 mg tablet	1	
propranolol er 120 mg capsule	1	
propranolol er 160 mg capsule	1	
propranolol er 60 mg capsule	1	
propranolol er 80 mg capsule	1	
propranolol-hctz 40-25 mg tab	1	
propranolol-hctz 80-25 mg tab	1	
propylthiouracil 50 mg tablet	1	
protriptyline hcl 10 mg tablet	1	
protriptyline hcl 5 mg tablet	1	
provil 200 mg tablet	1	
PULMOZYME 1 MG/ML SOLUTION FOR INHALATION	1	QL(150 per 30 days)
PURE COMFORT ALCOHOL PADS	1	
PURE COMFORT LANCETS 30 GAUGE	1	
PURE COMFORT SAFETY LANCETS 30 GAUGE	1	
purevit dualfe plus 162 mg-115.2 mg (106 mg)-1 mg capsule	1	
PUSH BUTTON SAFETY LANCETS 28 GAUGE	1	
pyrazinamide 500 mg tablet	1	
pyridostigmine br 30 mg tablet	1	
pyridostigmine br 60 mg tablet	1	
pyridoxine 25 mg tablet	1	
qc chlorpheniramine 4 mg tab	1	
QINLOCK 50 MG TABLET	1	PA,QL(90 per 30 days)
quetiapine er 150 mg tablet	1	QL(90 per 30 days)
quetiapine er 200 mg tablet	1	QL(30 per 30 days)
quetiapine er 300 mg tablet	1	QL(60 per 30 days)
quetiapine er 400 mg tablet	1	QL(60 per 30 days)
quetiapine er 50 mg tablet	1	QL(120 per 30 days)
quetiapine fumarate 100 mg tab[EDS]	1	QL(90 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
quetiapine fumarate 200 mg tab[EDS]	1	QL(120 per 30 days)
quetiapine fumarate 25 mg tab[EDS]	1	QL(120 per 30 days)
quetiapine fumarate 300 mg tab[EDS]	1	QL(90 per 30 days)
quetiapine fumarate 400 mg tab[EDS]	1	QL(90 per 30 days)
quetiapine fumarate 50 mg tab[EDS]	1	QL(120 per 30 days)
quinapril 10 mg tablet[EDS]	1	
quinapril 20 mg tablet[EDS]	1	
quinapril 40 mg tablet[EDS]	1	
quinapril 5 mg tablet[EDS]	1	
quinapril-hctz 10-12.5 mg tab	1	
quinapril-hctz 20-12.5 mg tab[EDS]	1	
quinapril-hctz 20-25 mg tab	1	
quinidine sulfate 200 mg tab	1	
quinidine sulfate 300 mg tab	1	
QVAR REDIHALER 40 MCG/ACTUATION HFA BREATH ACTIVATED AEROSOL	1	QL(10.6 per 30 days)
QVAR REDIHALER 80 MCG/ACTUATION HFA BREATH ACTIVATED AEROSOL	1	QL(21.2 per 30 days)
raloxifene hcl 60 mg tablet	1	QL(30 per 30 days)
ramipril 1.25 mg capsule[EDS]	1	
ramipril 10 mg capsule[EDS]	1	
ramipril 2.5 mg capsule[EDS]	1	
ramipril 5 mg capsule[EDS]	1	
ranger ready repellent 20 % topical spray with pump	1	
ranolazine er 1,000 mg tablet	1	QL(120 per 30 days)
ranolazine er 500 mg tablet	1	QL(120 per 30 days)
ready-to-use enema 19 gram-7 gram/118 ml	1	
READYLANCE SAFETY LANCETS 21 GAUGE	1	
READYLANCE SAFETY LANCETS 23 GAUGE	1	
READYLANCE SAFETY LANCETS 26 GAUGE	1	
READYLANCE SAFETY LANCETS 28 GAUGE	1	
READYLANCE SAFETY LANCETS 30 GAUGE	1	
reclipsen (28) 0.15 mg-0.03 mg tablet[CE]	1	
REFRESH TEARS 0.5 % EYE DROPS	1	
RELIAMED LANCET 23 GAUGE	1	
RELIAMED LANCET 28 GAUGE	1	
RELIAMED LANCET 30 GAUGE	1	
RELIAMED MINI LANCING DEVICE	1	
RELIAMED SAFETY SEAL LANCETS 28 GAUGE	1	
RELIAMED SAFETY SEAL LANCETS 30 GAUGE	1	
RELIAMED TWIST AND CAP LANCET 28 GAUGE	1	
RELION LANCING DEVICE	1	
RELION THIN 26G LANCETS	1	
RELION ULTRA THIN PLUS LANCETS	1	
repaglinide 0.5 mg tablet	1	
repaglinide 1 mg tablet	1	
repaglinide 2 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
REPATHA PUSHTRONEX 420 MG/3.5 ML SUBCUTANEOUS WEARABLE INJECTOR	1	PA,QL(3.5 per 28 days)
REPATHA SURECLICK 140 MG/ML SUBCUTANEOUS PEN INJECTOR	1	PA,QL(3 per 28 days)
REPATHA SYRINGE 140 MG/ML SUBCUTANEOUS SYRINGE	1	PA,QL(3 per 28 days)
REPEL 100 98.11 % TOPICAL PUMP SPRAY	1	
REPEL FAMILY 10 % TOPICAL SPRAY	1	
repel family 15 % topical spray powder	1	
REPEL HUNTER'S 25 % TOPICAL SPRAY	1	
REPEL SPORTSMEN 25 % TOPICAL SPRAY	1	
REPEL SPORTSMEN DRY 25 % TOPICAL SPRAY	1	
REPEL SPORTSMEN MAX 40 % TOPICAL PUMP SPRAY	1	
REPEL SPORTSMEN MAX 40 % TOPICAL SPRAY	1	
RESCRIPTOR 200 MG TABLET	1	QL(180 per 30 days)
RESTASIS 0.05 % EYE DROPS IN A DROPPERETTE	1	QL(60 per 30 days)
RESTASIS MULTIDOSE 0.05 % EYE DROPS	1	QL(5.5 per 25 days)
RETACRIT 10,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 2,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 20,000 UNIT/2 ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 20,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 3,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 4,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETACRIT 40,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
RETEVMO 40 MG CAPSULE	1	PA,QL(180 per 30 days)
RETEVMO 80 MG CAPSULE	1	PA,QL(120 per 30 days)
REVATIO 10 MG/ML ORAL SUSPENSION	1	PA,QL(180 per 30 days)
REVLIMID 10 MG CAPSULE	1	PA,QL(28 per 28 days)
REVLIMID 15 MG CAPSULE	1	PA,QL(28 per 28 days)
REVLIMID 2.5 MG CAPSULE	1	PA,QL(28 per 28 days)
REVLIMID 20 MG CAPSULE	1	PA,QL(28 per 28 days)
REVLIMID 25 MG CAPSULE	1	PA,QL(28 per 28 days)
REVLIMID 5 MG CAPSULE	1	PA,QL(28 per 28 days)
REYATAZ 50 MG ORAL POWDER PACKET	1	
ribasphere 200 mg capsule	1	QL(168 per 28 days)
ribavirin 200 mg capsule	1	QL(168 per 28 days)
ribavirin 200 mg tablet	1	QL(168 per 28 days)
RIDAURA 3 MG CAPSULE	1	
rifabutin 150 mg capsule	1	
rifampin 150 mg capsule	1	
rifampin 300 mg capsule	1	
RIGHTEST GD500 LANCING DEVICE	1	
RIGHTEST GL300 LANCETS 30 GAUGE	1	
riluzole 50 mg tablet	1	
rimantadine hcl 100 mg tablet	1	
RISPERDAL CONSTA 12.5 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	1	QL(2 per 28 days)
RISPERDAL CONSTA 25 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	1	QL(2 per 28 days)
RISPERDAL CONSTA 37.5 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	1	QL(2 per 28 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
RISPERDAL CONSTA 50 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	1	QL(2 per 28 days)
risperidone 0.25 mg tablet[EDS]	1	QL(60 per 30 days)
risperidone 0.5 mg tablet[EDS]	1	QL(120 per 30 days)
risperidone 1 mg tablet[EDS]	1	QL(60 per 30 days)
risperidone 1 mg/ml solution	1	
risperidone 2 mg tablet[EDS]	1	QL(60 per 30 days)
risperidone 3 mg tablet[EDS]	1	QL(60 per 30 days)
risperidone 4 mg tablet[EDS]	1	QL(60 per 30 days)
RITEFLO AEROCHAMBER	1	
ritonavir 100 mg tablet	1	QL(360 per 30 days)
rivastigmine 1.5 mg capsule[EDS]	1	QL(90 per 30 days)
rivastigmine 13.3 mg/24hr ptch	1	QL(30 per 30 days)
rivastigmine 3 mg capsule[EDS]	1	QL(90 per 30 days)
rivastigmine 4.5 mg capsule[EDS]	1	QL(60 per 30 days)
rivastigmine 4.6 mg/24hr patch	1	QL(30 per 30 days)
rivastigmine 6 mg capsule[EDS]	1	QL(60 per 30 days)
rivastigmine 9.5 mg/24hr patch	1	QL(30 per 30 days)
rivelsa 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
rizatriptan 10 mg odt	1	QL(12 per 30 days)
rizatriptan 10 mg tablet	1	QL(12 per 30 days)
rizatriptan 5 mg odt	1	QL(12 per 30 days)
rizatriptan 5 mg tablet	1	QL(12 per 30 days)
robafen 100 mg/5 ml oral liquid	1	
robafen dm cough 10 mg-100 mg/5 ml oral liquid	1	
robafen dm cough-chest congestion 10 mg-100 mg/5 ml oral syrup	1	
robafen dm peak cold liquid	1	
ropinirole hcl 0.25 mg tablet[EDS]	1	QL(180 per 30 days)
ropinirole hcl 0.5 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole hcl 1 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole hcl 2 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole hcl 3 mg tablet[EDS]	1	QL(180 per 30 days)
ropinirole hcl 4 mg tablet[EDS]	1	QL(180 per 30 days)
ropinirole hcl 5 mg tablet[EDS]	1	QL(120 per 30 days)
rosuvastatin calcium 10 mg tab[EDS]	1	
rosuvastatin calcium 20 mg tab[EDS]	1	
rosuvastatin calcium 40 mg tab[EDS]	1	
rosuvastatin calcium 5 mg tab[EDS]	1	
roweepra 1,000 mg tablet	1	
roweepra 500 mg tablet	1	
roweepra 750 mg tablet	1	
roweepra xr 500 mg tablet,extended release	1	
roweepra xr 750 mg tablet,extended release	1	
ROZLYTREK 100 MG CAPSULE	1	PA,QL(30 per 30 days)
ROZLYTREK 200 MG CAPSULE	1	PA,QL(90 per 30 days)
rufinamide 200 mg tablet	1	PA,QL(480 per 30 days)
rufinamide 40 mg/ml suspension	1	PA,QL(2760 per 30 days)
rufinamide 400 mg tablet	1	PA,QL(240 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
RUKOBIA 600 MG TABLET,EXTENDED RELEASE	1	QL(60 per 30 days)
RUZURGI 10 MG TABLET	1	PA,QL(300 per 30 days)
RYDAPT 25 MG CAPSULE	1	PA,QL(224 per 28 days)
SAFETY LANCETS 21 GAUGE	1	
SAFETY LANCETS 26 GAUGE	1	
SAFETY LANCETS 28 GAUGE	1	
SAFETY SEAL LANCETS 28 GAUGE	1	
SAFETY SEAL LANCETS 30 GAUGE	1	
SAFETY-LET LANCETS 30 GAUGE	1	
sajazir 30 mg/3 ml subcutaneous syringe	1	PA,QL(9 per 30 days)
saline mist 0.65 % nasal spray aerosol	1	
saline nasal 0.65 % spray aerosol	1	
saline nasal mist 0.65 % spray aerosol	1	
saline nose 0.65 % spray aerosol	1	
SAMSCA 15 MG TABLET	1	QL(60 per 30 days)
SAMSCA 30 MG TABLET	1	QL(60 per 30 days)
sapropterin 100 mg powder pkt	1	PA
sapropterin 100 mg tablet	1	PA
sapropterin 500 mg powder pkt	1	PA
scalpicin anti-itch 1 % topical solution	1	
se-natal 19 chewable 29 mg iron-1 mg tablet	1	
se-tan plus 162 mg-115.2 mg (106 mg)-1 mg capsule	1	
SEA-OMEGA 200 MG-300 MG-100 MG-1,000 MG CAPSULE	1	
SEGLUROMET 2.5 MG-1,000 MG TABLET	1	QL(60 per 30 days)
SEGLUROMET 2.5 MG-500 MG TABLET	1	QL(60 per 30 days)
SEGLUROMET 7.5 MG-1,000 MG TABLET	1	QL(60 per 30 days)
SEGLUROMET 7.5 MG-500 MG TABLET	1	QL(60 per 30 days)
selegiline hcl 5 mg capsule	1	
selegiline hcl 5 mg tablet	1	
selenium sulfide 2.5% lotion	1	
SELZENTRY 150 MG TABLET	1	QL(240 per 30 days)
SELZENTRY 20 MG/ML ORAL SOLUTION	1	QL(1800 per 30 days)
SELZENTRY 25 MG TABLET	1	QL(240 per 30 days)
SELZENTRY 300 MG TABLET	1	QL(120 per 30 days)
SELZENTRY 75 MG TABLET	1	QL(120 per 30 days)
SEMGLEE (INSULIN GLARGINE-YFGN) 100 UNIT/ML SUBCUTANEOUS SOLUTION	1	
SEMGLEE (INSULIN GLARGINE-YFGN) PEN 100 UNIT/ML (3 ML) SUBCUTANEOUS	1	
SEMGLEE PEN U-100 INSULIN 100 UNIT/ML (3 ML) SUBCUTANEOUS	1	
SEMGLEE U-100 INSULIN 100 UNIT/ML SUBCUTANEOUS SOLUTION	1	
senexon-s 8.6 mg-50 mg tablet	1	
senna 8.6 mg tablet	1	
senna lax 8.6 mg tablet	1	
senna laxative 8.6 mg tablet	1	
senna plus 8.6 mg-50 mg tablet	1	
senna-s 8.6 mg-50 mg tablet	1	
senna-time s 8.6 mg-50 mg tablet	1	
senno tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
sennosides-docusate sodium tab	1	
SENOKOT 8.6 MG TABLET	1	
sertraline 20 mg/ml oral conc	1	QL(60 per 30 days)
sertraline hcl 100 mg tablet[EDS]	1	QL(60 per 30 days)
sertraline hcl 25 mg tablet[EDS]	1	QL(90 per 30 days)
sertraline hcl 50 mg tablet[EDS]	1	QL(90 per 30 days)
setlakin 0.15 mg-30 mcg (91) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
sevelamer 0.8 gm powder packet	1	QL(540 per 30 days)
sevelamer 2.4 gm powder packet	1	QL(180 per 30 days)
sevelamer carbonate 800 mg tab	1	QL(540 per 30 days)
sharobel 0.35 mg tablet[CE]	1	
SHINGRIX (PF) 50 MCG/0.5 ML INTRAMUSCULAR SUSPENSION, KIT[CE]	1	QL(2 per 365 days)
SHINGRIX ADJUVANT COMPONENT (PF) INTRAMUSCULAR SUSPENSION	1	QL(1 per 365 days)
SHINGRIX GE ANTIGEN COMPONENT 50 MCG INTRAMUSCULAR SUSPENSION[CE]	1	QL(1 per 365 days)
siladryl sa 12.5 mg/5 ml oral liquid	1	
sildenafil 10 mg/ml oral susp	1	PA,QL(180 per 30 days)
sildenafil 20 mg tablet	1	PA,QL(90 per 30 days)
SILICONE MASK - INFANT	1	
siltussin dm das 10 mg-100 mg/5 ml oral liquid	1	
siltussin sa 100 mg/5 ml oral liquid	1	
siltussin-dm 10 mg-100 mg/5 ml oral syrup	1	
silver sulfadiazine 1% cream	1	
simliya (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
simpesse 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
simvastatin 10 mg tablet[EDS]	1	
simvastatin 20 mg tablet[EDS]	1	
simvastatin 40 mg tablet[EDS]	1	
simvastatin 5 mg tablet[EDS]	1	
simvastatin 80 mg tablet[EDS]	1	
SINGLE-LET MISC	1	
sirolimus 0.5 mg tablet	1	
sirolimus 1 mg tablet	1	QL(300 per 30 days)
sirolimus 1 mg/ml solution	1	
sirolimus 2 mg tablet	1	QL(150 per 30 days)
slow release iron 143 mg (45 mg iron) tablet,extended release	1	
SLYND 4 MG (28) TABLET[CE]	1	
sm allergy relief 25 mg cap	1	
sm calcium 500-vit d3 400 tab	1	
sm glucose 4 gram tab chew	1	
SM LANCETS 21G	1	
sm milk of magnesia suspension	1	
sm tioconazole-1 6.5% ointment	1	
SMART SENSE LANCETS 21 GAUGE	1	
SMART SENSE LANCETS 26 GAUGE	1	
SMART SENSE LANCETS 33 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
SMARTDIABETES VANTAGE	1	
SMARTEST LANCET	1	
smooth antacid 300 mg (750 mg) chewable tablet	1	
sod polystyren sulf 15 g/60 ml	1	
sodium bicarb 650 mg tablet	1	
sodium chloride 0.9% irrig.	1	
sodium chloride 10% vial	1	
sodium chloride 3% vial	1	
sodium chloride 7% vial	1	
sodium fluoride 0.5 mg/ml drop	1	
sodium phenylbutyrate powder	1	
sodium polystyrene sulf powder	1	
sof-lax 100 mg capsule	1	
sofosbuvir-velpatasvir 400-100	1	PA,QL(28 per 28 days)
SOFT TOUCH LANCETS	1	
solifenacin 10 mg tablet	1	QL(30 per 30 days)
solifenacin 5 mg tablet	1	QL(30 per 30 days)
SOLIQUA 100/33 100 UNIT-33 MCG/ML SUBCUTANEOUS INSULIN PEN	1	QL(15 per 24 days)
SOLUS V2 LANCETS 28 GAUGE	1	
SOLUS V2 LANCETS 30 GAUGE	1	
SOLUS V2 LANCING DEVICE KIT	1	
sorine 120 mg tablet	1	
sorine 160 mg tablet	1	
sorine 240 mg tablet	1	
sorine 80 mg tablet	1	
sotalol 120 mg tablet[EDS]	1	
sotalol 160 mg tablet[EDS]	1	
sotalol 240 mg tablet	1	
sotalol 80 mg tablet[EDS]	1	
sotalol af 120 mg tablet[EDS]	1	
sotalol af 160 mg tablet	1	
sotalol af 80 mg tablet[EDS]	1	
SPACE CHAMBER	1	
SPACE CHAMBER PLUS	1	
SPACE CHAMBER WITH LARGE MASK	1	
SPACE CHAMBER WITH MEDIUM MASK	1	
SPACE CHAMBER WITH SMALL MASK	1	
spinosad 0.9% topical susp	1	QL(240 per 30 days)
spironolactone 100 mg tablet[EDS]	1	
spironolactone 25 mg tablet[EDS]	1	
spironolactone 50 mg tablet[EDS]	1	
spironolactone-hctz 25-25 tab	1	
sprintec (28) 0.25 mg-35 mcg tablet[CE]	1	
SPRYCEL 100 MG TABLET	1	PA,QL(60 per 30 days)
SPRYCEL 140 MG TABLET	1	PA,QL(30 per 30 days)
SPRYCEL 20 MG TABLET	1	PA,QL(90 per 30 days)
SPRYCEL 50 MG TABLET	1	PA,QL(60 per 30 days)
SPRYCEL 70 MG TABLET	1	PA,QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
SPRYCEL 80 MG TABLET	1	PA,QL(60 per 30 days)
sronyx 0.1 mg-20 mcg tablet[CE]	1	
stavudine 15 mg capsule	1	QL(120 per 30 days)
stavudine 20 mg capsule	1	QL(120 per 30 days)
stavudine 30 mg capsule	1	QL(60 per 30 days)
stavudine 40 mg capsule	1	QL(60 per 30 days)
STEGLATRO 15 MG TABLET	1	QL(30 per 30 days)
STEGLATRO 5 MG TABLET	1	QL(30 per 30 days)
STERILANCE TL 30 GAUGE	1	
STERILANCE TL 32 GAUGE	1	
stimulant laxative plus 8.6 mg-50 mg tablet	1	
stomach relief 262 mg tablet	1	
stomach relief 262 mg/15 ml oral suspension	1	
stomach relief 525 mg/15 ml oral suspension	1	
stomach relief max strength 525 mg/15 ml oral suspension	1	
stomach relief original 262 mg/15 ml oral suspension	1	
stool softener 100 mg capsule	1	
stool softener-laxative 8.6 mg-50 mg tablet	1	
stool softener-stimulant laxative 8.6 mg-50 mg tablet	1	
STRENSIQ 18 MG/0.45 ML SUBCUTANEOUS SOLUTION	1	PA,QL(10.8 per 28 days)
STRENSIQ 28 MG/0.7 ML SUBCUTANEOUS SOLUTION	1	PA,QL(16.8 per 28 days)
STRENSIQ 40 MG/ML SUBCUTANEOUS SOLUTION	1	PA,QL(24 per 28 days)
STRENSIQ 80 MG/0.8 ML SUBCUTANEOUS SOLUTION	1	PA,QL(38.4 per 28 days)
STRIBILD 150 MG-150 MG-200 MG-300 MG TABLET	1	QL(30 per 30 days)
STRIVERDI RESPIMAT 2.5 MCG/ACTUATION SOLUTION FOR INHALATION	1	QL(4 per 30 days)
subvenite 100 mg tablet	1	
subvenite 150 mg tablet	1	
subvenite 200 mg tablet	1	
subvenite 25 mg tablet	1	
subvenite starter (blue) kit 25 mg (35) tablets in a dose pack	1	
subvenite starter (green) kit 25 mg (84)-100 mg (14) tablet, dose pack	1	
subvenite starter (orange) kit 25 mg (42)-100 mg (7) tablet, dose pack	1	
sucralfate 1 gm tablet	1	
sulf-pred 10-0.23% eye drops	1	
sulfacetamide 10% eye drops	1	
sulfacetamide 10% eye ointment	1	
sulfacetamide sod 10% top susp	1	
sulfadiazine 500 mg tablet	1	
sulfamethoxazole-tmp ds tablet	1	
sulfamethoxazole-tmp ss tablet	1	
sulfamethoxazole-tmp susp	1	
sulfasalazine 500 mg tablet	1	QL(240 per 30 days)
sulfasalazine dr 500 mg tab	1	QL(240 per 30 days)
sulindac 150 mg tablet	1	
sulindac 200 mg tablet	1	
sumatriptan 20 mg nasal spray	1	QL(12 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
sumatriptan 4 mg/0.5 ml cart	1	QL(6 per 30 days)
sumatriptan 4 mg/0.5 ml inject	1	QL(6 per 30 days)
sumatriptan 5 mg nasal spray	1	QL(12 per 30 days)
sumatriptan 6 mg/0.5 ml cart	1	QL(6 per 30 days)
sumatriptan 6 mg/0.5 ml inject	1	QL(6 per 30 days)
sumatriptan 6 mg/0.5 ml syrng	1	QL(3 per 30 days)
sumatriptan 6 mg/0.5 ml vial	1	QL(6 per 30 days)
sumatriptan succ 100 mg tablet	1	QL(9 per 30 days)
sumatriptan succ 25 mg tablet	1	QL(9 per 30 days)
sumatriptan succ 50 mg tablet	1	QL(9 per 30 days)
sunitinib malate 12.5 mg cap	1	PA,QL(28 per 28 days)
sunitinib malate 25 mg capsule	1	PA,QL(28 per 28 days)
sunitinib malate 37.5 mg cap	1	PA,QL(28 per 28 days)
sunitinib malate 50 mg capsule	1	PA,QL(28 per 28 days)
SUPER THIN LANCETS	1	
SUPER THIN LANCETS 28 GAUGE	1	
SUPER THIN LANCETS 30 GAUGE	1	
SURE COMFORT ALCOHOL PREP PADS	1	
SURE COMFORT LANCETS 18 GAUGE	1	
SURE COMFORT LANCETS 21 GAUGE	1	
SURE COMFORT LANCETS 23 GAUGE	1	
SURE COMFORT LANCETS 28 GAUGE	1	
SURE COMFORT LANCETS 30 GAUGE	1	
SURE COMFORT LANCING PEN	1	
SURE-LANCE	1	
SURE-LANCE 26 GAUGE	1	
SURE-LANCE 28 GAUGE	1	
SURE-LANCE ULTRA THIN 30 GAUGE	1	
SURE-PEN LANCING DEVICE	1	
SURE-PREP ALCOHOL PREP PADS	1	
SURE-TOUCH LANCET	1	
SUREFLEX LANCING DEVICE	1	
SUREFLEX LANCING DEVICE WITH LANCETS KIT	1	
SURGUARD2 SAFETY 1 ML 25 GAUGE X 5/8" SYRINGE	1	
SURGUARD2 SAFETY 1 ML 26 GAUGE X 3/8" SYRINGE	1	
SURGUARD2 SAFETY 1 ML 27 GAUGE X 1/2" SYRINGE	1	
SURGUARD2 SAFETY 10 ML 20 GAUGE X 1 1/2" SYRINGE	1	
SURGUARD2 SAFETY 10 ML 20 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 18 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 18 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 19 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 19 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 20 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 20 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 21 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 21 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 22 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 22 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 23 GAUGE X 1 1/2" NEEDLE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
SURGUARD2 SAFETY 23 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 25 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 25 GAUGE X 1" NEEDLE	1	
SURGUARD2 SAFETY 25 X 5/8" NEEDLE	1	
SURGUARD2 SAFETY 26 GAUGE X 1/2" NEEDLE	1	
SURGUARD2 SAFETY 27 GAUGE X 1/2" NEEDLE	1	
SURGUARD2 SAFETY 3 ML 20 GAUGE X 1 1/2" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 20 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 21 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 22 GAUGE X 1 1/2" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 22 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 23 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 3 ML 25 GAUGE X 5/8" SYRINGE	1	
SURGUARD2 SAFETY 30 GAUGE X 1 1/2" NEEDLE	1	
SURGUARD2 SAFETY 5 ML 20 GAUGE X 1 1/2" SYRINGE	1	
SURGUARD2 SAFETY 5 ML 20 GAUGE X 1" SYRINGE	1	
SURGUARD2 SAFETY 5 ML 21 GAUGE X 1 1/2" SYRINGE	1	
SURGUARD2 SAFETY SYRINGE 10 ML 21 GAUGE X 1 1/2"	1	
SURGUARD2 SAFETY SYRINGE 3 ML 21 GAUGE X 1 1/2"	1	
SURGUARD2 SAFETY SYRINGE 3 ML 25 GAUGE X 1"	1	
SUTENT 12.5 MG CAPSULE	1	PA,QL(28 per 28 days)
SUTENT 25 MG CAPSULE	1	PA,QL(28 per 28 days)
SUTENT 37.5 MG CAPSULE	1	PA,QL(28 per 28 days)
SUTENT 50 MG CAPSULE	1	PA,QL(28 per 28 days)
syeda 3 mg-0.03 mg tablet[CE]	1	
SYMDEKO 100 MG-150 MG (DAY)/150 MG (NIGHT) TABLETS	1	PA,QL(56 per 28 days)
SYMDEKO 50 MG-75 MG (DAY)/75 MG (NIGHT) TABLETS	1	PA,QL(56 per 28 days)
SYMFI 600 MG-300 MG-300 MG TABLET	1	QL(30 per 30 days)
SYMFI LO 400 MG-300 MG-300 MG TABLET	1	QL(30 per 30 days)
SYMJEPI 0.15 MG/0.3 ML INJECTION SYRINGE (FOR 33 LB TO 66 LB PATIENTS)	1	QL(4 per 30 days)
SYMJEPI 0.3 MG/0.3 ML INJECTION SYRINGE	1	QL(4 per 30 days)
SYMLINPEN 120 2,700 MCG/2.7 ML SUBCUTANEOUS PEN INJECTOR	1	QL(10.8 per 30 days)
SYMLINPEN 60 1,500 MCG/1.5 ML SUBCUTANEOUS PEN INJECTOR	1	QL(10.5 per 28 days)
SYMTUZA 800 MG-150 MG-200 MG-10 MG TABLET	1	QL(30 per 30 days)
SYNAGIS 100 MG/ML INTRAMUSCULAR SOLUTION	1	PA,QL(2 per 30 days)
SYNAGIS 50 MG/0.5 ML INTRAMUSCULAR SOLUTION	1	PA,QL(1 per 30 days)
SYNJARDY 12.5 MG-1,000 MG TABLET	1	QL(60 per 30 days)
SYNJARDY 12.5 MG-500 MG TABLET	1	QL(60 per 30 days)
SYNJARDY 5 MG-1,000 MG TABLET	1	QL(60 per 30 days)
SYNJARDY 5 MG-500 MG TABLET	1	QL(60 per 30 days)
SYNJARDY XR 10 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(30 per 30 days)
SYNJARDY XR 12.5 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(60 per 30 days)
SYNJARDY XR 25 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(30 per 30 days)
SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE	1	QL(60 per 30 days)
SYSTANE (PROPYLENE GLYCOL) 0.4 %-0.3 % EYE DROPS	1	
SYSTANE ULTRA 0.4 %-0.3 % EYE DROPS	1	
TABLOID 40 MG TABLET	1	QL(360 per 30 days)
TABRECTA 150 MG TABLET	1	PA,QL(112 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
TABRECTA 200 MG TABLET	1	PA,QL(112 per 28 days)
tacrolimus 0.03% ointment	1	
tacrolimus 0.1% ointment	1	
tacrolimus 0.5 mg capsule (ir)	1	
tacrolimus 1 mg capsule (ir)	1	
tacrolimus 5 mg capsule (ir)	1	QL(180 per 30 days)
tactinal 325 mg tablet	1	
tactinal 500 mg caplet	1	
tadalafil 20 mg tablet	1	PA,QL(60 per 30 days)
TAKE ACTION 1.5 MG TABLET[CE]	1	
tamoxifen 10 mg tablet[EDS]	1	
tamoxifen 20 mg tablet[EDS]	1	
tamsulosin hcl 0.4 mg capsule[EDS]	1	QL(60 per 30 days)
TARGRETIN 1 % TOPICAL GEL	1	PA
tarina 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet[CE]	1	
tarina fe 1-20 eq (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
tarina fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet[CE]	1	
taron forte 150 mg-60 mg-25 mcg-1 mg capsule	1	
taron-c dha 35 mg-1 mg-200 mg capsule	1	
taztia xt 120 mg capsule,extended release	1	QL(60 per 30 days)
taztia xt 180 mg capsule,extended release	1	QL(60 per 30 days)
taztia xt 240 mg capsule,extended release	1	QL(60 per 30 days)
taztia xt 300 mg capsule,extended release	1	QL(30 per 30 days)
taztia xt 360 mg capsule,extended release	1	QL(30 per 30 days)
TECHLITE LANCETS 25 GAUGE	1	
TECHLITE LANCETS 28 GAUGE	1	
TECHLITE LANCETS 30 GAUGE	1	
TELCARE LANCETS 30 GAUGE	1	
temazepam 15 mg capsule	1	QL(30 per 30 days)
temazepam 30 mg capsule	1	QL(30 per 30 days)
TEMIXYS 300 MG-300 MG TABLET	1	QL(30 per 30 days)
temozolomide 100 mg capsule	1	PA,QL(60 per 30 days)
temozolomide 140 mg capsule	1	PA,QL(60 per 30 days)
temozolomide 180 mg capsule	1	PA,QL(60 per 30 days)
temozolomide 20 mg capsule	1	PA,QL(270 per 30 days)
temozolomide 250 mg capsule	1	PA,QL(10 per 30 days)
temozolomide 5 mg capsule	1	PA,QL(90 per 30 days)
tenofovir disop fum 300 mg tb	1	QL(30 per 30 days)
terazosin 1 mg capsule[EDS]	1	
terazosin 10 mg capsule[EDS]	1	
terazosin 2 mg capsule[EDS]	1	
terazosin 5 mg capsule[EDS]	1	
terbinafine 1% cream	1	
terbinafine hcl 250 mg tablet	1	QL(90 per 365 days)
terbutaline sulfate 2.5 mg tab	1	
terbutaline sulfate 5 mg tab	1	
terconazole 0.4% cream	1	
terconazole 0.8% cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
testosteron cyp 1,000 mg/10 ml	1	QL(24 per 90 days)
testosteron enan 1,000 mg/5 ml	1	QL(24 per 90 days)
testosterone 1.62% (2.5 g) pkt	1	PA,QL(150 per 30 days)
testosterone 1.62% gel pump	1	PA,QL(150 per 30 days)
testosterone 1.62%(1.25 g) pkt	1	PA,QL(37.5 per 30 days)
testosterone cyp 200 mg/ml	1	QL(24 per 90 days)
tetrabenazine 12.5 mg tablet	1	PA,QL(240 per 30 days)
tetrabenazine 25 mg tablet	1	PA,QL(120 per 30 days)
THALOMID 100 MG CAPSULE	1	PA,QL(30 per 30 days)
THALOMID 150 MG CAPSULE	1	PA,QL(60 per 30 days)
THALOMID 200 MG CAPSULE	1	PA,QL(30 per 30 days)
THALOMID 50 MG CAPSULE	1	PA,QL(30 per 30 days)
theophylline 80 mg/15 ml soln	1	
theophylline 80 mg/15 ml soln	1	
theophylline er 100 mg tablet	1	
theophylline er 200 mg tablet	1	
theophylline er 300 mg tab	1	
theophylline er 400 mg tablet	1	
theophylline er 450 mg tab	1	
theophylline er 600 mg tablet	1	
THIN LANCETS 26 GAUGE	1	
THIOLA 100 MG TABLET	1	PA
thioridazine 10 mg tablet	1	
thioridazine 100 mg tablet	1	
thioridazine 25 mg tablet	1	
thioridazine 50 mg tablet	1	
thiothixene 1 mg capsule	1	
thiothixene 10 mg capsule	1	
thiothixene 2 mg capsule	1	
thiothixene 5 mg capsule	1	
THRESHOLD IMT TRAINER DEVICE	1	
THRESHOLD PEP DEVICE	1	
THYQUIDITY 20 MCG/ML ORAL SOLUTION	1	
thyroid 120 mg tablet	1	
thyroid 15 mg tablet	1	
thyroid 30 mg tablet	1	
thyroid 60 mg tablet	1	
thyroid 90 mg tablet	1	
tiadylt er 120 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
tiadylt er 180 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
tiadylt er 240 mg capsule,extended release[EDS]	1	QL(60 per 30 days)
tiadylt er 300 mg capsule,extended release[EDS]	1	QL(30 per 30 days)
tiadylt er 360 mg capsule,extended release	1	QL(30 per 30 days)
tiadylt er 420 mg capsule,extended release	1	QL(30 per 30 days)
tiagabine hcl 12 mg tablet	1	QL(140 per 30 days)
tiagabine hcl 16 mg tablet	1	QL(105 per 30 days)
tiagabine hcl 2 mg tablet	1	QL(840 per 30 days)
tiagabine hcl 4 mg tablet	1	QL(120 per 30 days)
TIBSOVO 250 MG TABLET	1	PA,QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
tilia fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet[CE]	1	
timolol 0.25% gfs gel-solution	1	
timolol 0.5% gfs gel-solution	1	QL(5 per 50 days)
timolol maleate 0.25% eye drop	1	QL(25 per 90 days)
timolol maleate 0.5% eye drops	1	QL(25 per 90 days)
tinidazole 250 mg tablet	1	
tinidazole 500 mg tablet	1	
tioconazole-1 6.5 % vaginal ointment	1	
tiopronin 100 mg tablet	1	PA
TIVICAY 10 MG TABLET	1	QL(60 per 30 days)
TIVICAY 25 MG TABLET	1	QL(60 per 30 days)
TIVICAY 50 MG TABLET	1	QL(60 per 30 days)
TIVICAY PD 5 MG TABLET FOR ORAL SUSPENSION	1	QL(180 per 30 days)
tizanidine hcl 2 mg tablet	1	
tizanidine hcl 4 mg tablet	1	
TOBI PODHALER 28 MG CAPSULE WITH INHALATION DEVICE	1	PA,QL(224 per 28 days)
TOBI PODHALER 28 MG INHALE CAP	1	PA,QL(224 per 28 days)
tobramycin 0.3% eye drop	1	
tobramycin 300 mg/4 ml ampule	1	PA,QL(224 per 28 days)
tobramycin-dexameth ophth susp	1	
tolvaptan 30 mg tablet	1	QL(60 per 30 days)
TOPCARE UNIVERSAL1 LANCET	1	
TOPCARE UNIVERSAL1 LANCET 33 GAUGE	1	
topiramate 100 mg tablet[EDS]	1	QL(120 per 30 days)
topiramate 15 mg sprinkle cap	1	QL(120 per 30 days)
topiramate 200 mg tablet[EDS]	1	QL(120 per 30 days)
topiramate 25 mg sprinkle cap	1	QL(180 per 30 days)
topiramate 25 mg tablet[EDS]	1	QL(90 per 30 days)
topiramate 50 mg tablet[EDS]	1	QL(120 per 30 days)
toremifene citrate 60 mg tab	1	QL(30 per 30 days)
torsemide 10 mg tablet[EDS]	1	
torsemide 100 mg tablet[EDS]	1	
torsemide 20 mg tablet[EDS]	1	
torsemide 5 mg tablet[EDS]	1	
total home insect repellent 30 % topical spray	1	
TRADJENTA 5 MG TABLET	1	QL(30 per 30 days)
tramadol hcl 100 mg tablet	1	QL(120 per 30 days)
tramadol hcl 50 mg tablet	1	QL(240 per 30 days)
tramadol hcl er 100 mg tablet	1	QL(30 per 30 days)
tramadol hcl er 200 mg tablet	1	QL(30 per 30 days)
tramadol hcl er 300 mg tablet	1	QL(30 per 30 days)
tramadol-acetaminophn 37.5-325	1	QL(240 per 30 days)
trandolapril 1 mg tablet	1	
trandolapril 2 mg tablet	1	
trandolapril 4 mg tablet	1	
tranexamic acid 650 mg tablet	1	QL(30 per 5 days)
tranylcypromine sulf 10 mg tab	1	QL(270 per 30 days)
travoprost 0.004% eye drop	1	QL(2.5 per 25 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
trazodone 100 mg tablet	1	
trazodone 150 mg tablet	1	
trazodone 300 mg tablet	1	
trazodone 50 mg tablet	1	
treprostinil 100 mg/20 ml vial	1	PA
treprostinil 20 mg/20 ml vial	1	PA
treprostinil 200 mg/20 ml vial	1	PA
treprostinil 50 mg/20 ml vial	1	PA
tretinoin 0.01% gel	1	PA
tretinoin 0.025% cream	1	PA
tretinoin 0.025% gel	1	PA
tretinoin 0.05% cream	1	PA
tretinoin 0.05% gel	1	PA
tretinoin 0.1% cream	1	PA
tretinoin 10 mg capsule	1	PA,QL(360 per 30 days)
tri femynor (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-estarylla (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-legest fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet[CE]	1	
tri-linyah (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-lo-estarylla 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet[CE]	1	
tri-lo-marzia 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet[CE]	1	
tri-lo-mili 0.18/0.215/0.25 mg-25 mcg tablet[CE]	1	
tri-lo-sprintec 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet[CE]	1	
tri-mili (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-nymyo 0.18/0.215/0.25 mg-35 mcg(28) tablet[CE]	1	
tri-previfem (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-sprintec (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-vite with fluoride 0.25 mg fluoride (0.55 mg)/ml oral drops	1	
tri-vite with fluoride 0.5 mg fluoride (1.1 mg)/ml oral drops	1	
tri-vylibra (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet[CE]	1	
tri-vylibra lo 0.18/0.215/0.25 mg-25 mcg tablet[CE]	1	
triamcinolone 0.025% cream	1	
triamcinolone 0.025% lotion	1	
triamcinolone 0.025% oint	1	
triamcinolone 0.1% cream	1	
triamcinolone 0.1% lotion	1	
triamcinolone 0.1% ointment	1	
triamcinolone 0.1% paste	1	
triamcinolone 0.5% cream	1	
triamcinolone 0.5% ointment	1	
triamcinolone 55 mcg nasal spr	1	
triamterene-hctz 37.5-25 mg cp[EDS]	1	
triamterene-hctz 37.5-25 mg tb[EDS]	1	
triamterene-hctz 75-50 mg tab[EDS]	1	
TRICARE 27 MG IRON-1 MG TABLET	1	
tricon 110 mg-0.5 mg capsule	1	
trientine hcl 250 mg capsule	1	PA
trifluoperazine 1 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
trifluoperazine 10 mg tablet	1	
trifluoperazine 2 mg tablet	1	
trifluoperazine 5 mg tablet	1	
trifluridine 1% eye drops	1	
trigels-f forte 460 mg-60 mg-0.01 mg-1 mg capsule	1	
trihexyphenidyl 2 mg tablet[EDS]	1	
trihexyphenidyl 2 mg/5 ml soln	1	
trihexyphenidyl 5 mg tablet[EDS]	1	
TRIKAFTA 100-50-75 MG (D)/150 MG (N) TABLETS	1	PA,QL(84 per 28 days)
TRIKAFTA 50-25-37.5 MG (D)/75 MG (N) TABLETS	1	PA,QL(84 per 28 days)
trilyte with flavor packets	1	
trimethoprim 100 mg tablet	1	
trimipramine maleate 100 mg cp	1	
trimipramine maleate 25 mg cap	1	
trimipramine maleate 50 mg cap	1	
trinatal rx 1 60 mg iron-1 mg tablet	1	
triple antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment	1	
TRIUMEQ 600 MG-50 MG-300 MG TABLET	1	QL(30 per 30 days)
triveen-duo dha 29 mg-1 mg-400 mg oral pack	1	
trivora (28) 50-30 (6)/75-40(5)/125-30(10) tablet[CE]	1	
tropicamide 0.5% eye drops	1	
tropicamide 1% eye drops	1	
trospium chloride 20 mg tablet	1	QL(60 per 30 days)
TRUE COMFORT ALCOHOL PADS	1	
TRUE COMFORT LANCET 30 GAUGE	1	
TRUE METRIX AIR GLUCOSE METER	1	
TRUE METRIX AIR GLUCOSE METER KIT	1	
TRUE METRIX GLUCOSE METER	1	
TRUE METRIX GLUCOSE METER KIT	1	
TRUE METRIX GLUCOSE TEST STRIP	1	QL(150 per 30 days)
TRUE METRIX GO GLUCOSE METER	1	
TRUE METRIX LEVEL 1 SOLUTION	1	
TRUE METRIX LEVEL 2 SOLUTION	1	
TRUE METRIX LEVEL 3 SOLUTION	1	
TRUE METRIX PRO TEST STRIP	1	QL(150 per 30 days)
TRUE2GO BLOOD GLUCOSE SYSTEM KIT	1	
TRUECONTROL LEVEL 0 SOLUTION	1	
TRUECONTROL LEVEL 1 SOLUTION	1	
TRUEDRAW LANCING DEVICE	1	
TRUEPLUS 26G LANCETS	1	
TRUEPLUS LANCETS 28 GAUGE	1	
TRUEPLUS LANCETS 30 GAUGE	1	
TRUEPLUS LANCETS 33 GAUGE	1	
TRUERESULT BLOOD GLUCOSE SYSTEM KIT	1	
TRUETEST TEST STRIPS	1	QL(150 per 30 days)
TRUETRACK BLOOD GLUCOSE SYSTEM KIT	1	
TRUETRACK SMART SYSTEM KIT	1	
TRUETRACK TEST STRIPS	1	QL(150 per 30 days)
TRULANCE 3 MG TABLET	1	PA,QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
TRULICITY 0.75 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	QL(2 per 28 days)
TRULICITY 1.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	QL(2 per 28 days)
TRULICITY 3 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	QL(2 per 28 days)
TRULICITY 4.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR	1	QL(2 per 28 days)
trust natal dha	1	
TRUSTEX LATEX CONDOM[CE]	1	
TRUSTEX LUBRICATED CONDOMS[CE]	1	
TRUSTEX-RIA LUBRICATED CONDOMS[CE]	1	
TRUSTEX-RIA LUBRICATED/SPERMICIDE CONDOM[CE]	1	
TRUZONE PEAK FLOW METER	1	
TUKYSA 150 MG TABLET	1	PA,QL(120 per 30 days)
TUKYSA 50 MG TABLET	1	PA,QL(300 per 30 days)
tulana 0.35 mg tablet[CE]	1	
TURALIO 200 MG CAPSULE	1	PA,QL(120 per 30 days)
tusnel diabetic 10 mg-100 mg/5 ml oral liquid	1	
tusnel-ex 100 mg/5 ml oral liquid	1	
tussin 100 mg/5 ml oral liquid	1	
tussin 400 mg tablet	1	
tussin chest congestion 100 mg/5 ml oral liquid	1	
tussin cough (dm only) 15 mg/5 ml oral liquid	1	
tussin dm 10 mg-100 mg/5 ml oral liquid	1	
tussin dm 10 mg-100 mg/5 ml oral syrup	1	
tussin dm 20 mg-400 mg tablet	1	
tussin dm clear 10 mg-100 mg/5 ml oral syrup	1	
tussin dm cough and chest 10 mg-100 mg/5 ml oral syrup	1	
tussin dm cough and chest 5 mg-100 mg/5 ml oral liquid	1	
tussin dm max 10 mg-200 mg/5 ml oral liquid	1	
tussin expectorant 100 mg/5 ml oral liquid	1	
tussin honey 100 mg/5 ml oral liquid	1	
tussin mucus-chest congestion 100 mg/5 ml oral liquid	1	
TWIST LANCETS 30 GAUGE	1	
TWIST LANCETS 32 GAUGE	1	
TYBOST 150 MG TABLET	1	QL(30 per 30 days)
tydemy 3 mg-0.03 mg-0.451 mg (21)(7) tablet[CE]	1	
TYKERB 250 MG TABLET	1	PA,QL(180 per 30 days)
TYVASO 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION	1	PA,QL(28 per 28 days)
TYVASO INSTITUTIONAL STARTER KIT 1.74 MG/2.9 ML SOLN FOR NEBULIZATION	1	PA,QL(28 per 28 days)
TYVASO REFILL KIT 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION	1	PA,QL(28 per 28 days)
TYVASO STARTER KIT 1.74 MG/2.9 ML SOLUTION FOR NEBULIZATION	1	PA,QL(28 per 28 days)
ULTI-LANCE KIT	1	
ULTI-LANCE MISC	1	
ULTICARE 1 ML 25 GAUGE X 5/8" SYRINGE	1	
ULTICARE SYR 1.5 ML 22GX1 1/2"	1	
ULTILET ALCOHOL SWAB	1	
ULTILET BASIC LANCETS 30 GAUGE	1	
ULTILET CLASSIC LANCETS	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ULTILET CLASSIC LANCETS 28 GAUGE	1	
ULTILET CLASSIC LANCETS 30 GAUGE	1	
ULTILET CLASSIC LANCETS 33 GAUGE	1	
ULTILET LANCETS 28 GAUGE	1	
ULTILET LANCETS 30 GAUGE	1	
ULTILET LANCETS 33 GAUGE	1	
ULTILET SAFETY LANCETS 23 GAUGE	1	
ULTRA FINE LANCETS 30 GAUGE	1	
ultra lubricant eye 0.4 %-0.3 % drops	1	
ULTRA PRENATAL PLUS DHA 27 MG-800 MCG-250 MG-200 MG CAPSULE	1	
ultra strength antacid 400 mg calcium (1,000 mg) chewable tablet	1	
ULTRA THIN II LANCETS 30 GAUGE	1	
ULTRA THIN LANCETS	1	
ULTRA THIN LANCETS 28 GAUGE	1	
ULTRA THIN LANCETS 30 GAUGE	1	
ULTRA THIN LANCETS 31 GAUGE	1	
ULTRA THIN LANCETS 33 GAUGE	1	
ULTRA THIN PLUS LANCETS 33 GAUGE	1	
ULTRA TLC LANCETS	1	
ULTRA-CARE LANCETS 30 GAUGE	1	
ULTRA-THIN II LANCETS 28 GAUGE	1	
ULTRALANCE LANCETS 26 GAUGE	1	
ULTRALANCE LANCETS 28 GAUGE	1	
ultrathon 25 % topical spray	1	
UNILET COMFORTOUCH LANCET	1	
UNILET COMFORTOUCH LANCET 26 GAUGE	1	
UNILET EXCELITE II LANCET	1	
UNILET EXCELITE LANCET	1	
UNILET GP LANCET	1	
UNILET LANCET 28 GAUGE	1	
UNILET LANCET 33 GAUGE	1	
UNILET LANCETS 30 GAUGE	1	
UNISTIK 2 DEVICE KIT	1	
UNISTIK 2 EXTRA KIT	1	
UNISTIK 2 NORMAL LANCET AND DEVICE KIT	1	
UNISTIK 3 COMFORT DEVICE KIT	1	
UNISTIK 3 COMFORT LANCET	1	
UNISTIK 3 EXTRA LANCET 21 GAUGE	1	
UNISTIK 3 GENTLE 30 GAUGE	1	
UNISTIK 3 KIT	1	
UNISTIK 3 LANCETS 21 GAUGE	1	
UNISTIK 3 NEONATAL DEVICE KIT	1	
UNISTIK 3 NEONATAL KIT	1	
UNISTIK 3 NORMAL LANCET 23 GAUGE	1	
UNISTIK COMFORT LANCETS 28 GAUGE	1	
UNISTIK CZT LANCET 23 GAUGE	1	
UNISTIK CZT LANCET 28 GAUGE	1	
UNISTIK EXTRA LANCETS 21 GAUGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
UNISTIK PRO LANCET 21 GAUGE	1	
UNISTIK PRO LANCET 25 GAUGE	1	
UNISTIK PRO LANCET 28 GAUGE	1	
UNISTIK SAFETY 28 GAUGE	1	
UNISTIK SAFETY 30 GAUGE	1	
UNISTIK TOUCH LANCETS 21 GAUGE	1	
UNISTIK TOUCH LANCETS 23 GAUGE	1	
UNISTIK TOUCH LANCETS 28 GAUGE	1	
UNISTIK TOUCH LANCETS 30 GAUGE	1	
UNIVERSAL 1 LANCETS 21 GAUGE	1	
UNIVERSAL 1 LANCETS 26 GAUGE	1	
UNIVERSAL 1 LANCETS 30 GAUGE	1	
UNIVERSAL 1 LANCETS 33 GAUGE	1	
urinary pain relief 95 mg tablet	1	
ursodiol 250 mg tablet	1	
ursodiol 500 mg tablet	1	
V-GO 20 DEVICE	1	
V-GO 30 DEVICE	1	
V-GO 40 DEVICE	1	
valacyclovir hcl 1 gram tablet	1	QL(90 per 30 days)
valacyclovir hcl 500 mg tablet	1	QL(90 per 30 days)
VALCHLOR 0.016 % TOPICAL GEL	1	PA,QL(60 per 28 days)
valganciclovir 450 mg tablet	1	QL(120 per 30 days)
valproic acid 250 mg capsule[EDS]	1	
valproic acid 250 mg/5 ml soln[EDS]	1	
valproic acid 250 mg/5 ml soln	1	
valproic acid 500 mg/10 ml sol	1	
valsartan 160 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan 320 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan 40 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan 80 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan-hctz 160-12.5 mg tab	1	QL(30 per 30 days)
valsartan-hctz 160-25 mg tab	1	QL(30 per 30 days)
valsartan-hctz 320-12.5 mg tab	1	QL(30 per 30 days)
valsartan-hctz 320-25 mg tab	1	QL(30 per 30 days)
valsartan-hctz 80-12.5 mg tab	1	QL(30 per 30 days)
vancomycin 250 mg/5 ml soln	1	
vancomycin hcl 125 mg capsule	1	QL(120 per 30 days)
vancomycin hcl 250 mg capsule	1	QL(240 per 30 days)
VAXELIS (PF) 15 UNIT-5 UNIT-10 MCG/0.5 ML INTRAMUSCULAR SUSPENSION	1	
VAXELIS (PF) 15 UNIT-5 UNIT-10 MCG/0.5 ML INTRAMUSCULAR SYRINGE	1	
VAXNEUVANCE 0.5 ML INTRAMUSCULAR SYRINGE	1	
vegetable laxative-stool softener 8.6 mg-50 mg tablet	1	
velivet triphasic regimen (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet[CE]	1	
VENCLEXTA 10 MG TABLET	1	PA,QL(56 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
VENCLEXTA 100 MG TABLET	1	PA,QL(180 per 30 days)
VENCLEXTA 50 MG TABLET	1	PA,QL(28 per 28 days)
VENCLEXTA STARTING PACK 10 MG-50 MG-100 MG TABLETS IN A DOSE PACK	1	PA,QL(42 per 28 days)
venlafaxine hcl 100 mg tablet[EDS]	1	
venlafaxine hcl 25 mg tablet[EDS]	1	
venlafaxine hcl 37.5 mg tablet[EDS]	1	
venlafaxine hcl 50 mg tablet[EDS]	1	
venlafaxine hcl 75 mg tablet[EDS]	1	
venlafaxine hcl er 150 mg cap[EDS]	1	QL(60 per 30 days)
venlafaxine hcl er 37.5 mg cap[EDS]	1	QL(30 per 30 days)
venlafaxine hcl er 75 mg cap[EDS]	1	QL(90 per 30 days)
VENTAVIS 10 MCG/ML SOLUTION FOR NEBULIZATION	1	PA,QL(150 per 30 days)
VENTAVIS 20 MCG/ML SOLUTION FOR NEBULIZATION	1	PA,QL(90 per 30 days)
verapamil 120 mg tablet[EDS]	1	QL(120 per 30 days)
verapamil 40 mg tablet[EDS]	1	QL(120 per 30 days)
verapamil 80 mg tablet[EDS]	1	QL(120 per 30 days)
verapamil er 120 mg tablet[EDS]	1	QL(30 per 30 days)
verapamil er 180 mg tablet[EDS]	1	QL(30 per 30 days)
verapamil er 240 mg tablet[EDS]	1	QL(60 per 30 days)
verapamil sr 120 mg capsule	1	QL(60 per 30 days)
verapamil sr 180 mg capsule	1	QL(60 per 30 days)
verapamil sr 240 mg capsule	1	QL(60 per 30 days)
verapamil sr 360 mg capsule	1	QL(60 per 30 days)
VERZENIO 100 MG TABLET	1	PA,QL(60 per 30 days)
VERZENIO 150 MG TABLET	1	PA,QL(60 per 30 days)
VERZENIO 200 MG TABLET	1	PA,QL(60 per 30 days)
VERZENIO 50 MG TABLET	1	PA,QL(60 per 30 days)
vestura (28) 3 mg-0.02 mg tablet[CE]	1	
VIBRAMYCIN 50 MG/5 ML ORAL SYRUP	1	
VIDEX 2 GM PEDIATRIC SOLN	1	QL(1200 per 30 days)
vienva 0.1 mg-20 mcg tablet[CE]	1	
vigabatrin 500 mg powder packt	1	PA,QL(180 per 30 days)
vigabatrin 500 mg tablet	1	PA,QL(180 per 30 days)
vigadrone 500 mg oral powder packet	1	PA,QL(180 per 30 days)
VIMPAT 10 MG/ML ORAL SOLUTION	1	PA,QL(1395 per 30 days)
VIMPAT 100 MG TABLET	1	PA
VIMPAT 150 MG TABLET	1	PA
VIMPAT 200 MG TABLET	1	PA
VIMPAT 50 MG TABLET	1	PA
vinate one tablet	1	
vinate-m tablet	1	
viorele (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
VIRACEPT 250 MG TABLET	1	QL(300 per 30 days)
VIRACEPT 625 MG TABLET	1	QL(120 per 30 days)
VIREAD 150 MG TABLET	1	QL(30 per 30 days)
VIREAD 200 MG TABLET	1	QL(30 per 30 days)
VIREAD 250 MG TABLET	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
VIREAD 40 MG/SCOOP (40 MG/GRAM) ORAL POWDER	1	QL(240 per 30 days)
virt-c dha 35 mg-1 mg-200 mg capsule	1	
virt-nate dha 28 mg iron-1 mg-200 mg capsule	1	
virt-phos 250 neutral 250 mg tablet	1	
virtussin ac 10 mg-100 mg/5 ml oral liquid	1	
vitamin a 3,000 mcg softgel	1	
vitamin b-6 100 mg tablet	1	
vitamin b-6 25 mg tablet	1	
vitamin d2 1,250 mcg (50,000 unit) capsule	1	
vitamin d2 1.25mg(50,000 unit)	1	
vitamin k 1 mg/0.5 ml injection solution	1	
vitamin k1 10 mg/ml injection solution	1	
VITRAKVI 100 MG CAPSULE	1	PA,QL(60 per 30 days)
VITRAKVI 20 MG/ML ORAL SOLUTION	1	PA,QL(300 per 30 days)
VITRAKVI 25 MG CAPSULE	1	PA,QL(180 per 30 days)
VIVAGUARD LANCET 30 GAUGE	1	
VIVAGUARD LANCING DEVICE	1	
VIVITROL 380 MG INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE	1	QL(1 per 28 days)
VOCABRIA 30 MG TABLET	1	QL(30 per 30 days)
volnea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
voriconazole 200 mg tablet	1	PA,QL(120 per 30 days)
voriconazole 40 mg/ml susp	1	PA,QL(400 per 30 days)
voriconazole 50 mg tablet	1	PA,QL(120 per 30 days)
VORTEX HOLDING CHAMBER	1	
VORTEX HOLDING CHAMBER-CHILD	1	
VORTEX HOLDING CHAMBER-TODDLER	1	
VORTEX VHC FROG MASK-CHILD	1	
VORTEX VHC LADYBUG MASK-TODDLER	1	
VOTRIENT 200 MG TABLET	1	PA,QL(120 per 30 days)
vyfemla (28) 0.4 mg-35 mcg tablet[CE]	1	
vylibra 0.25 mg-35 mcg tablet[CE]	1	
VYNDAMAX 61 MG CAPSULE	1	PA,QL(30 per 30 days)
VYNDAQEL 20 MG CAPSULE	1	PA,QL(120 per 30 days)
warfarin sodium 1 mg tablet	1	
warfarin sodium 10 mg tablet	1	
warfarin sodium 2 mg tablet	1	
warfarin sodium 2.5 mg tablet	1	
warfarin sodium 3 mg tablet	1	
warfarin sodium 4 mg tablet	1	
warfarin sodium 5 mg tablet	1	
warfarin sodium 6 mg tablet	1	
warfarin sodium 7.5 mg tablet	1	
WEBCOL TOPICAL PADS	1	
wera (28) 0.5 mg-35 mcg tablet[CE]	1	
westab plus 27 mg iron-1 mg tablet	1	
WIDE-SEAL DIAPHRAGM 60 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 65 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 70 MM VAGINAL[CE]	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
WIDE-SEAL DIAPHRAGM 75 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 80 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 85 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 90 MM VAGINAL[CE]	1	
WIDE-SEAL DIAPHRAGM 95 MM VAGINAL[CE]	1	
wixela inhub 100 mcg-50 mcg/dose powder for inhalation	1	QL(60 per 30 days)
wixela inhub 250 mcg-50 mcg/dose powder for inhalation	1	QL(60 per 30 days)
wixela inhub 500 mcg-50 mcg/dose powder for inhalation	1	QL(60 per 30 days)
women's gentle laxative (bisacodyl) 5 mg tablet,delayed release	1	
women's laxative (bisacodyl) 5 mg tablet	1	
women's laxative (bisacodyl) 5 mg tablet,delayed release	1	
wymzya fe 0.4 mg-35 mcg (21)/75 mg (7) chewable tablet[CE]	1	
XALKORI 200 MG CAPSULE	1	PA,QL(120 per 30 days)
XALKORI 250 MG CAPSULE	1	PA,QL(120 per 30 days)
XARELTO 10 MG TABLET	1	QL(30 per 30 days)
XARELTO 15 MG TABLET	1	QL(60 per 30 days)
XARELTO 2.5 MG TABLET	1	QL(60 per 30 days)
XARELTO 20 MG TABLET	1	QL(30 per 30 days)
XARELTO DVT-PE TREATMENT 30-DAY STARTER 15 MG(42)-20 MG(9) TABLET PACK	1	QL(51 per 30 days)
XOFLUZA 20 MG TABLET	1	QL(10 per 365 days)
XOFLUZA 40 MG TABLET	1	QL(10 per 365 days)
XOFLUZA 80 MG TABLET	1	QL(5 per 365 days)
XOSPATA 40 MG TABLET	1	PA,QL(90 per 30 days)
XPOVIO 100 MG ONCE WEEKLY DOSE	1	PA,QL(20 per 28 days)
XPOVIO 100 MG/WEEK (50 MG X 2) TABLET	1	PA,QL(8 per 28 days)
XPOVIO 40 MG ONCE WEEKLY DOSE	1	PA,QL(8 per 28 days)
XPOVIO 40 MG TWICE WEEK (40 MG X 2) TABLET	1	PA,QL(8 per 28 days)
XPOVIO 40 MG TWICE WEEKLY DOSE	1	PA,QL(16 per 28 days)
XPOVIO 40 MG/WEEK (40 MG X 1) TABLET	1	PA,QL(4 per 28 days)
XPOVIO 60 MG ONCE WEEKLY DOSE	1	PA,QL(12 per 28 days)
XPOVIO 60 MG TWICE WEEKLY (120 MG/WEEK) (20 MG X 6) TABLET	1	PA,QL(24 per 28 days)
XPOVIO 60 MG/WEEK (60 MG X 1) TABLET	1	PA,QL(4 per 28 days)
XPOVIO 80 MG ONCE WEEKLY DOSE	1	PA,QL(16 per 28 days)
XPOVIO 80 MG TWICE WEEKLY (160 MG/WEEK) (20 MG X 8) TABLET	1	PA,QL(32 per 28 days)
XPOVIO 80 MG/WEEK (40 MG X 2) TABLET	1	PA,QL(8 per 28 days)
XTAMPZA ER 13.5 MG CAPSULE SPRINKLE	1	QL(60 per 30 days)
XTAMPZA ER 18 MG CAPSULE SPRINKLE	1	QL(60 per 30 days)
XTAMPZA ER 27 MG CAPSULE SPRINKLE	1	QL(60 per 30 days)
XTAMPZA ER 36 MG CAPSULE SPRINKLE	1	QL(60 per 30 days)
XTAMPZA ER 9 MG CAPSULE SPRINKLE	1	QL(60 per 30 days)
XTANDI 40 MG CAPSULE	1	PA,QL(120 per 30 days)
XTANDI 40 MG TABLET	1	PA,QL(120 per 30 days)
XTANDI 80 MG TABLET	1	PA,QL(60 per 30 days)
xulane 150 mcg-35 mcg/24 hr transdermal patch[CE]	1	QL(3 per 28 days)
yuvafem 10 mcg vaginal tablet	1	
zaditor 0.025 % (0.035 %) eye drops	1	
zafemy 150 mcg-35 mcg/24 hr transdermal patch[CE]	1	QL(3 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
zaleplon 10 mg capsule	1	QL(60 per 30 days)
zaleplon 5 mg capsule	1	QL(30 per 30 days)
zarah 3 mg-0.03 mg tablet[CE]	1	
ZARXIO 300 MCG/0.5 ML INJECTION SYRINGE	1	PA,QL(7 per 30 days)
ZARXIO 480 MCG/0.8 ML INJECTION SYRINGE	1	PA,QL(11.2 per 30 days)
zidovudine 100 mg capsule	1	QL(180 per 30 days)
zidovudine 300 mg tablet	1	QL(60 per 30 days)
zidovudine 50 mg/5 ml syrup	1	QL(1680 per 28 days)
ziprasidone hcl 20 mg capsule	1	QL(60 per 30 days)
ziprasidone hcl 40 mg capsule	1	QL(60 per 30 days)
ziprasidone hcl 60 mg capsule	1	QL(60 per 30 days)
ziprasidone hcl 80 mg capsule	1	QL(60 per 30 days)
ZOLINZA 100 MG CAPSULE	1	PA,QL(120 per 30 days)
zolpidem tartrate 10 mg tablet	1	QL(30 per 30 days)
zolpidem tartrate 5 mg tablet	1	QL(30 per 30 days)
zonisamide 100 mg capsule[EDS]	1	
zonisamide 25 mg capsule[EDS]	1	
zonisamide 50 mg capsule[EDS]	1	
ZORBTIVE 8.8 MG VIAL	1	PA,QL(28 per 30 days)
ZORTRESS 1 MG TABLET	1	PA,QL(60 per 30 days)
ZOSTAVAX (PF) 19,400 UNIT/0.65 ML SUBCUTANEOUS SUSPENSION[CE]	1	QL(1 per 365 days)
zovia 1-35 (28) 1 mg-35 mcg tablet[CE]	1	
zovia 1/35e (28) 1 mg-35 mcg tablet[CE]	1	
zumandimine (28) 3 mg-0.03 mg tablet[CE]	1	
ZYDELIG 100 MG TABLET	1	PA,QL(60 per 30 days)
ZYDELIG 150 MG TABLET	1	PA,QL(60 per 30 days)
ZYPREXA RELPREVV 210 MG INTRAMUSCULAR SUSPENSION	1	QL(4 per 28 days)
ZYPREXA RELPREVV 300 MG INTRAMUSCULAR SUSPENSION	1	QL(2 per 28 days)
ZYPREXA RELPREVV 405 MG INTRAMUSCULAR SUSPENSION	1	QL(1 per 28 days)

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Discrimination is Against the Law

Humana Inc. and its subsidiaries comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Humana Inc. and its subsidiaries do not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation, gender identity, or religion. See our website for more information.

Humana Inc. and its subsidiaries:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provide free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Member Services at **1-866-432-0001 (TTY: 711)**.

If you believe that Humana Inc. or its subsidiaries have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Discrimination Grievances
P.O. Box 14618
Lexington, KY 40512 – 4618
1-866-432-0001 or if you use a **TTY**, call **711**.

You can file a grievance by mail or phone. If you need help filing a grievance, Customer Service is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Multi-Language Interpreter Services

English ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-866-432-0001 (TTY: 711)**.

Español (Spanish) ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-866-432-0001 (TTY: 711)**.

繁體中文 (Chinese) 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 **1-866-432-0001**（**TTY：711**）。

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-866-432-0001 (TTY: 711)**.

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-866-432-0001 (TTY: 711)**번으로 전화해 주십시오.

Français (French) ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-866-432-0001 (ATS : 711)**.

Tagalog (Tagalog – Filipino) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-866-432-0001 (TTY: 711)**.

Русский (Russian) ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-866-432-0001 (телетайп: 711)**.

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-866-432-0001 (TTY: 711)**.

ગુજરાતી (Gujarati): સુચના :જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે .ફોન કરો **1-866-432-0001 (TTY: 711)**.

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-866-432-0001** (رقم هاتف الصم والبكم: **711**).

Português (Portuguese): ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-866-432-0001 (TTY: 711)**.

日本語 (Japanese) 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。**1-866-432-0001 (TTY: 711**）まで、お電話にてご連絡ください。

Українська (Ukrainian): УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером **1-866-432-0001 (телетайп: 711).**

हिंदी (Hindi): ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। **1-866-432-0001 (TTY: 711)** पर कॉल करें।

ខ្មែរ (Cambodian): ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតឈ្នួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ **1-866-432-0001 (TTY: 711)**។