2022
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 12/15/2022.

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 January 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 2022 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 oral solution	1	QL(960 per 30 days)
abacavir 300 mg tablet	1	QL(60 per 30 days)
abacavir 300 mg-lamivudine 150 mg-zidovudine 300 mg tablet	1	QL(60 per 30 days)
abacavir 600 mg-lamivudine 300 mg tablet	1	QL(30 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 250 mg tablet	1	PA,QL(120 per 30 days)
acamprosate 333 mg tablet,delayed release	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 FASTCLIX LANCET DRUM	1	
ACCU-CHEK FASTCLIX LANCING DEVICE KIT	1	
ACCU-CHEK GUIDE L1-L2 CONTROL SOLUTION	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 SOFTCLIX LANCETS	1	
ACCU-CHEK SOFTCLIX LANCING DEVICE+LANCETS KIT	1	
accutane 10 mg capsule	1	QL(60 per 30 days)
accutane 20 mg capsule	1	QL(60 per 30 days)
accutane 30 mg capsule	1	QL(60 per 30 days)
accutane 40 mg capsule	1	QL(120 per 30 days)
ACCUTREND GLUCOSE CONTROL SOLUTION	1	
ACE AEROSOL CLOUD ENHANCER SPACER	1	
acebutolol 200 mg capsule	1	
acebutolol 400 mg capsule	1	
acetaminophen 120 mg rectal suppository	1	
acetaminophen 120 mg-codeine 12 mg/5 ml (5 ml) oral solution	1	QL(2700 per 30 days)
acetaminophen 120 mg-codeine 12 mg/5 ml oral solution	1	QL(2700 per 30 days)
acetaminophen 160 mg/5 ml (5 ml) oral suspension	1	
acetaminophen 160 mg/5 ml oral liquid	1	
acetaminophen 300 mg-codeine 15 mg tablet	1	QL(390 per 30 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
acetaminophen 300 mg-codeine 30 mg tablet	1	QL(360 per 30 days)
acetaminophen 300 mg-codeine 30 mg/12.5 ml (12.5 ml) oral solution	1	QL(2700 per 30 days)
acetaminophen 300 mg-codeine 60 mg tablet	1	QL(180 per 30 days)
acetaminophen 325 mg tablet	1	
acetaminophen 325 mg/10.15 ml oral suspension	1	
acetaminophen 500 mg tablet	1	
acetaminophen 650 mg/20.3 ml oral suspension	1	
acetazolamide 125 mg tablet	1	QL(120 per 30 days)
acetazolamide 250 mg tablet	1	QL(120 per 30 days)
acetazolamide er 500 mg capsule,extended release	1	QL(60 per 30 days)
acetic acid 2 % ear solution	1	
acetylcysteine 100 mg/ml (10 %) solution	1	
acetylcysteine 200 mg/ml (20 %) solution	1	
acid controller 10 mg tablet	1	
acid controller 20 mg tablet	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 oral suspension	1	
acyclovir 400 mg tablet	1	
acyclovir 5 % topical ointment	1	PA
acyclovir 800 mg tablet	1	
adapalene 0.1 % topical gel	1	
adapalene 0.3 % topical gel with pump	1	
adefovir 10 mg tablet	1	
ADEMPAS 0.5 MG TABLET	1	PA,QL(90 per 30 days)
ADEMPAS 1 MG TABLET	1	PA,QL(90 per 30 days)
ADEMPAS 1.5 MG TABLET	1	PA,QL(90 per 30 days)
ADEMPAS 2 MG TABLET	1	PA,QL(90 per 30 days)
ADEMPAS 2.5 MG TABLET	1	PA,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	
advanced antacid-antigas 200 mg-200 mg-20 mg/5 ml oral suspension	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 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 2021-2022 60 MCG (15 MCG X 4)/0.5 ML INTRAMUSCULAR SUSP.	1	
AFLURIA QUAD 2022-2023(6MO UP) 60 MCG (15 MCG X 4)/0.5 ML IM SUSP	1	
AFLURIA QUAD 2022-23(3YR UP)(PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	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	
ALAWAY 0.025 % (0.035 %) EYE DROPS	1	
albendazole 200 mg tablet	1	
albuterol sulfate 0.63 mg/3 ml solution for nebulization	1	
albuterol sulfate 1.25 mg/3 ml solution for nebulization	1	
albuterol sulfate 2 mg tablet	1	
albuterol sulfate 2 mg/5 ml oral syrup	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
albuterol sulfate 2.5 mg/3 ml (0.083 %) solution for nebulization	1	
albuterol sulfate 4 mg tablet	1	
albuterol sulfate concentrate 2.5 mg/0.5 ml solution for nebulization	1	
albuterol sulfate concentrate 5 mg/ml(0.5 %) solution for nebulization	1	
albuterol sulfate er 4 mg tablet,extended release,12 hr	1	
albuterol sulfate er 8 mg tablet,extended release,12 hr	1	
albuterol sulfate hfa 90 mcg/actuation aerosol inhaler	1	QL(36 per 30 days)
ALCOHOL PADS	1	
ALCOHOL PREP PADS	1	
ALCOHOL SWABS	1	
ALCOHOL WIPES	1	
ALECENSA 150 MG CAPSULE	1	PA,QL(240 per 30 days)
alendronate 10 mg tablet	1	QL(30 per 30 days)
alendronate 35 mg tablet	1	QL(4 per 28 days)
alendronate 5 mg tablet	1	QL(30 per 30 days)
alendronate 70 mg tablet	1	QL(4 per 28 days)
alfuzosin er 10 mg tablet,extended release 24 hr[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 relief (cetirizine) 10 mg tablet	1	
allergy relief (chlorpheniramine) 4 mg tablet	1	
allergy relief (diphenhydramine) 12.5 mg/5 ml oral liquid	1	
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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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-2 400 mg-400 mg-40 mg/5 ml oral suspension	1	
alogliptin 12.5 mg tablet	1	QL(30 per 30 days)
alogliptin 12.5 mg-metformin 1,000 mg tablet	1	QL(60 per 30 days)
alogliptin 12.5 mg-metformin 500 mg tablet	1	QL(60 per 30 days)
alogliptin 12.5 mg-pioglitazone 15 mg tablet	1	QL(30 per 30 days)
alogliptin 12.5 mg-pioglitazone 30 mg tablet	1	QL(30 per 30 days)
alogliptin 12.5 mg-pioglitazone 45 mg tablet	1	QL(30 per 30 days)
alogliptin 25 mg tablet	1	QL(30 per 30 days)
alogliptin 25 mg-pioglitazone 15 mg tablet	1	QL(30 per 30 days)
alogliptin 25 mg-pioglitazone 30 mg tablet	1	QL(30 per 30 days)
alogliptin 25 mg-pioglitazone 45 mg tablet	1	QL(30 per 30 days)
alogliptin 6.25 mg tablet	1	QL(30 per 30 days)
alosetron 0.5 mg tablet	1	PA,QL(60 per 30 days)
alosetron 1 mg tablet	1	PA,QL(60 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)
altavera (28) 0.15 mg-0.03 mg tablet[CE]	1	
ALTERNATE SITE LANCET 26 GAUGE	1	
ALTERNATE SITE LANCING DEVICE	1	
aluminum-mag hydroxide-simethicone 200 mg-200 mg-20 mg/5 ml oral susp	1	
aluminum-mag hydroxide-simethicone 400 mg-400 mg-40 mg/5 ml oral 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 hcl 100 mg capsule	1	
amantadine hcl 50 mg/5 ml oral solution	1	
ambrisentan 10 mg tablet	1	PA,QL(30 per 30 days)
ambrisentan 5 mg tablet	1	PA,QL(30 per 30 days)
amethia 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
amethia lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
amethyst (28) 90 mcg-20 mcg tablet[CE]	1	
amiloride 5 mg tablet[EDS]	1	
amiloride 5 mg-hydrochlorothiazide 50 mg tablet[EDS]	1	
amiodarone 100 mg tablet	1	
amiodarone 200 mg tablet[EDS]	1	
amiodarone 400 mg tablet	1	
amitriptyline 10 mg tablet	1	
amitriptyline 100 mg tablet	1	
amitriptyline 150 mg tablet	1	
amitriptyline 25 mg tablet	1	
amitriptyline 50 mg tablet	1	
amitriptyline 75 mg tablet	1	
amlodipine 10 mg tablet[EDS]	1	QL(30 per 30 days)
amlodipine 10 mg-benazepril 20 mg capsule[EDS]	1	QL(60 per 30 days)
amlodipine 10 mg-benazepril 40 mg capsule[EDS]	1	QL(30 per 30 days)
amlodipine 2.5 mg tablet[EDS]	1	QL(30 per 30 days)
amlodipine 2.5 mg-benazepril 10 mg capsule[EDS]	1	QL(60 per 30 days)
amlodipine 5 mg tablet[EDS]	1	QL(30 per 30 days)
amlodipine 5 mg-benazepril 10 mg capsule[EDS]	1	QL(60 per 30 days)
amlodipine 5 mg-benazepril 20 mg capsule[EDS]	1	QL(60 per 30 days)
amlodipine 5 mg-benazepril 40 mg capsule[EDS]	1	QL(30 per 30 days)
ammonium lactate 12 % lotion	1	
ammonium lactate 12 % topical cream	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)
amoxapine 100 mg tablet	1	
amoxapine 150 mg tablet	1	
amoxapine 25 mg tablet	1	
amoxapine 50 mg tablet	1	
amoxicillin 125 mg chewable tablet	1	
amoxicillin 125 mg/5 ml oral suspension	1	
amoxicillin 200 mg-potassium clavulanate 28.5 mg chewable tablet	1	
amoxicillin 200 mg-potassium clavulanate 28.5 mg/5 ml oral suspension	1	
amoxicillin 200 mg/5 ml oral suspension	1	
amoxicillin 250 mg capsule	1	
amoxicillin 250 mg chewable tablet	1	
amoxicillin 250 mg-potassium clavulanate 125 mg tablet	1	
amoxicillin 250 mg-potassium clavulanate 62.5 mg/5 ml oral suspension	1	
amoxicillin 250 mg/5 ml oral suspension	1	
amoxicillin 400 mg-potassium clavulanate 57 mg chewable tablet	1	
amoxicillin 400 mg-potassium clavulanate 57 mg/5 ml oral suspension	1	
amoxicillin 400 mg/5 ml oral suspension	1	
amoxicillin 500 mg capsule	1	
amoxicillin 500 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
amoxicillin 500 mg-potassium clavulanate 125 mg tablet	1	
amoxicillin 600 mg-potassium clavulanate 42.9 mg/5 ml oral suspension	1	
amoxicillin 875 mg tablet	1	
amoxicillin 875 mg-potassium clavulanate 125 mg tablet	1	
ampicillin 250 mg capsule	1	
ampicillin 500 mg capsule	1	
anagrelide 0.5 mg capsule	1	
anagrelide 1 mg capsule	1	
anastrozole 1 mg tablet[EDS]	1	QL(30 per 30 days)
animal chews tablet	1	
ANIMAL SHAPES CHEWABLE TABLET	1	
antacid (calcium carbonate) 200 mg calcium (500 mg) chewable tablet	1	
antacid (calcium carbonate) 215 mg calcium (500 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 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 (clotrimazole) 1 % topical cream	1	
antifungal cream (miconazole) 2 % topical	1	
anusol-hc 2.5 % topical cream with perineal applicator	1	
aprepitant 125 mg (1)-80 mg (2) capsules in a dose pack	1	PA,QL(6 per 28 days)
aprepitant 125 mg capsule	1	PA,QL(2 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 (WITH VITAMIN E) 100 MG/ML ORAL SOLUTION	1	QL(285 per 28 days)
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 oral solution	1	QL(750 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
aripiprazole 10 mg disintegrating tablet	1	QL(60 per 30 days)
aripiprazole 10 mg tablet	1	QL(30 per 30 days)
aripiprazole 15 mg disintegrating tablet	1	QL(60 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)
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)
aspirin 300 mg rectal suppository	1	
aspirin 325 mg tablet	1	
aspirin 325 mg tablet,delayed release	1	
aspirin 600 mg rectal suppository	1	
aspirin 81 mg chewable tablet	1	
aspirin 81 mg tablet,delayed release	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	
ASSURE LANCE PLUS 25 GAUGE	1	
ASSURE LANCE PLUS 30 GAUGE	1	
ASTHMAPACK CHILDREN'S KIT	1	
atazanavir 150 mg capsule	1	QL(60 per 30 days)
atazanavir 200 mg capsule	1	QL(60 per 30 days)
atazanavir 300 mg capsule	1	QL(30 per 30 days)
atenolol 100 mg tablet[EDS]	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
atenolol 100 mg-chlorthalidone 25 mg tablet	1	
atenolol 25 mg tablet[EDS]	1	
atenolol 50 mg tablet[EDS]	1	
atenolol 50 mg-chlorthalidone 25 mg tablet	1	
athlete's foot (clotrimazole) 1 % topical cream	1	
athlete's foot (terbinafine) 1 % topical cream	1	
atomoxetine 10 mg capsule	1	QL(60 per 30 days)
atomoxetine 100 mg capsule	1	QL(30 per 30 days)
atomoxetine 18 mg capsule	1	QL(60 per 30 days)
atomoxetine 25 mg capsule	1	QL(60 per 30 days)
atomoxetine 40 mg capsule	1	QL(60 per 30 days)
atomoxetine 60 mg capsule	1	QL(30 per 30 days)
atomoxetine 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 250 mg-proguanil 100 mg tablet	1	QL(30 per 30 days)
atovaquone 750 mg/5 ml oral suspension	1	QL(600 per 30 days)
atovaquone-proguanil (pediatric) 62.5 mg-25 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	
AUTOPEN 2 TO 42 UNITS SUBCUTANEOUS	1	
aviane 0.1 mg-20 mcg tablet[CE]	1	
AYR ALLERGY AND SINUS 2.65 % NASAL SPRAY AEROSOL	1	
AYR SALINE 0.65 % NASAL DROPS	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 0.05 % eye drops	1	
azelastine 137 mcg (0.1 %) nasal spray aerosol	1	QL(30 per 25 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
azelastine 205.5 mcg (0.15 %) nasal spray	1	QL(30 per 25 days)
azithromycin 1 gram oral packet	1	
azithromycin 100 mg/5 ml oral suspension	1	
azithromycin 200 mg/5 ml oral suspension	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/gram eye ointment	1	
bacitracin 500 unit/gram topical ointment	1	
bacitracin 500 unit/gram topical packet	1	
bacitracin zinc 500 unit/gram topical ointment	1	
bacitracin zinc 500 unit/gram topical ointment in packet	1	
bacitracin-polymyxin b 500 unit-10,000 unit/gram eye ointment	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 750 mg capsule	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	
BARACLUDE 0.05 MG/ML ORAL SOLUTION	1	QL(630 per 30 days)
bayer aspirin 325 mg tablet	1	
bayer aspirin 325 mg tablet,delayed release	1	
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 ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2" SYRINGE	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	
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 MICROTAINER LANCET 1.5 MM X 2 MM	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 29 GAUGE X 1/2"	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) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet[CE]	1	
benazepril 10 mg tablet[EDS]	1	
benazepril 10 mg-hydrochlorothiazide 12.5 mg tablet	1	
benazepril 20 mg tablet[EDS]	1	
benazepril 20 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
benazepril 20 mg-hydrochlorothiazide 25 mg tablet[EDS]	1	
benazepril 40 mg tablet[EDS]	1	
benazepril 5 mg tablet[EDS]	1	
benazepril 5 mg-hydrochlorothiazide 6.25 mg tablet	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	
benztropine 0.5 mg tablet[EDS]	1	
benztropine 1 mg tablet[EDS]	1	
benztropine 2 mg tablet[EDS]	1	
betaine 1 gram/scoop oral powder	1	
betamethasone dipropionate 0.05 % lotion	1	
betamethasone dipropionate 0.05 % topical cream	1	
betamethasone dipropionate 0.05 % topical ointment	1	
betamethasone valerate 0.1 % lotion	1	
betamethasone valerate 0.1 % topical cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
betamethasone valerate 0.1 % topical ointment	1	
betamethasone, augmented 0.05 % lotion	1	
betamethasone, augmented 0.05 % topical cream	1	
betamethasone, augmented 0.05 % topical gel	1	
betamethasone, augmented 0.05 % topical ointment	1	
BETASEPT SURGICAL SCRUB 4 % TOPICAL LIQUID	1	
betaxolol 10 mg tablet	1	
betaxolol 20 mg tablet	1	
bethanechol chloride 10 mg tablet	1	
bethanechol chloride 25 mg tablet	1	
bethanechol chloride 5 mg tablet	1	
bethanechol chloride 50 mg tablet	1	
BEVESPI AEROSPHERE 9 MCG-4.8 MCG HFA AEROSOL INHALER	1	QL(10.7 per 30 days)
bexarotene 1 % topical gel	1	PA
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)
BINAXNOW COVID-19 AG CARD HOME TEST KIT	1	
BINAXNOW COVID-19 AG SELF TEST KIT[CE]	1	
bisacodyl 5 mg tablet,delayed release	1	
bismatrol 262 mg chewable tablet	1	
bismatrol 262 mg/15 ml oral suspension	1	
bismatrol 525 mg/15 ml oral suspension	1	
bismuth subsalicylate 262 mg/15 ml oral suspension	1	
bisoprolol 10 mg-hydrochlorothiazide 6.25 mg tablet[EDS]	1	
bisoprolol 2.5 mg-hydrochlorothiazide 6.25 mg tablet[EDS]	1	
bisoprolol 5 mg-hydrochlorothiazide 6.25 mg tablet[EDS]	1	
bisoprolol fumarate 10 mg tablet[EDS]	1	
bisoprolol fumarate 5 mg tablet[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	
BLUNT NEEDLE, DISPOSABLE 18 X 1 1/2"	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	
BREATHERITE VALVED MDI SPACER	1	
briellyn 0.4 mg-35 mcg tablet[CE]	1	
brimonidine 0.2 % eye drops	1	QL(10 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
bromfed dm 2 mg-30 mg-10 mg/5 ml oral syrup	1	
brompheniramine-pseudoephedrine-dm 2 mg-30 mg-10 mg/5 ml oral syrup	1	
BRUKINSA 80 MG CAPSULE	1	PA,QL(120 per 30 days)
budesonide 0.25 mg/2 ml suspension for nebulization	1	QL(240 per 30 days)
budesonide 0.5 mg/2 ml suspension for nebulization	1	QL(240 per 30 days)
budesonide 1 mg/2 ml suspension for nebulization	1	QL(120 per 30 days)
budesonide 32 mcg/actuation nasal spray	1	QL(18 per 30 days)
budesonide dr - er 3 mg capsule,delayed,extended release	1	
budesonide-formoterol hfa 160 mcg-4.5 mcg/actuation aerosol inhaler	1	QL(10.2 per 30 days)
budesonide-formoterol hfa 80 mcg-4.5 mcg/actuation aerosol inhaler	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/hour weekly transdermal patch	1	QL(4 per 28 days)
buprenorphine 12 mg-naloxone 3 mg sublingual film	1	QL(60 per 30 days)
buprenorphine 15 mcg/hour weekly transdermal patch	1	QL(4 per 28 days)
buprenorphine 2 mg-naloxone 0.5 mg sublingual film	1	QL(90 per 30 days)
buprenorphine 2 mg-naloxone 0.5 mg sublingual tablet	1	QL(90 per 30 days)
buprenorphine 20 mcg/hour weekly transdermal patch	1	QL(4 per 28 days)
buprenorphine 4 mg-naloxone 1 mg sublingual film	1	QL(90 per 30 days)
buprenorphine 5 mcg/hour weekly transdermal patch	1	QL(4 per 28 days)
buprenorphine 7.5 mcg/hour weekly transdermal patch	1	QL(4 per 28 days)
buprenorphine 8 mg-naloxone 2 mg sublingual film	1	QL(90 per 30 days)
buprenorphine 8 mg-naloxone 2 mg sublingual tablet	1	QL(90 per 30 days)
buprenorphine hcl 2 mg sublingual tablet	1	QL(90 per 30 days)
buprenorphine hcl 8 mg sublingual tablet	1	QL(90 per 30 days)
bupropion hcl 100 mg tablet[EDS]	1	QL(180 per 30 days)
bupropion hcl 150 mg tablet,12 hr sustained-release(smoking deterrent)[CE]	1	QL(90 per 30 days)
bupropion hcl 75 mg tablet[EDS]	1	QL(180 per 30 days)
bupropion hcl sr 100 mg tablet,12 hr sustained-release[EDS]	1	QL(120 per 30 days)
bupropion hcl sr 150 mg tablet,12 hr sustained-release[EDS]	1	QL(90 per 30 days)
bupropion hcl sr 200 mg tablet,12 hr sustained-release[EDS]	1	QL(60 per 30 days)
bupropion hcl xl 150 mg 24 hr tablet, extended release[EDS]	1	QL(90 per 30 days)
bupropion hcl xl 300 mg 24 hr tablet, extended release[EDS]	1	QL(30 per 30 days)
buspirone 10 mg tablet	1	
buspirone 15 mg tablet	1	
buspirone 30 mg tablet	1	
buspirone 5 mg tablet	1	
buspirone 7.5 mg tablet	1	
butalbital 50 mg-acetaminophen 325 mg tablet	1	QL(180 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
butalbital 50 mg-acetaminophen 325 mg-caffeine 40 mg-codeine 30 mg cap	1	QL(360 per 30 days)
butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet	1	QL(180 per 30 days)
butalbital-aspirin-caffeine 50 mg-325 mg-40 mg capsule	1	QL(180 per 30 days)
butalbital-aspirin-caffeine 50 mg-325 mg-40 mg tablet	1	QL(180 per 30 days)
BUTTERFLY TOUCH LANCET 30 GAUGE	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 % scalp solution	1	PA,QL(60 per 30 days)
calcipotriene 0.005 % topical cream	1	PA,QL(120 per 30 days)
calcitonin (salmon) 200 unit/actuation nasal spray	1	QL(3.7 per 28 days)
calcitriol 0.25 mcg capsule	1	
calcitriol 0.5 mcg capsule	1	
calcitriol 1 mcg/ml oral solution	1	
calcium 500 + d 500 mg-10 mcg (400 unit) chewable tablet	1	
calcium 500 + d 500 mg-5 mcg (200 unit) tablet	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 acetate 668 mg (169 mg calcium) tablet	1	
calcium acetate(phosphate binders) 667 mg capsule	1	
calcium acetate(phosphate binders) 667 mg tablet	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-vit d3-minerals 600 mg calcium-400 unit tablet	1	
calcium carbonate 260 mg calcium (648 mg) tablet	1	
calcium carbonate 500 mg calcium (1,250 mg) chewable tablet	1	
calcium carbonate 500 mg calcium (1,250 mg) tablet	1	
calcium carbonate 500 mg-vitamin d3 10 mcg (400 unit) chewable tablet	1	
calcium carbonate 500 mg-vitamin d3 10 mcg (400 unit) tablet	1	
calcium carbonate 500 mg-vitamin d3 15 mcg (600 unit) tablet	1	
calcium carbonate 500 mg-vitamin d3 5 mcg (200 unit) tablet	1	
calcium carbonate 500 mg/5 ml calcium (1,250 mg/5 ml) oral suspension	1	
calcium carbonate 600 mg calcium (1,500 mg) tablet	1	
calcium carbonate 600 mg-vitamin d3 10 mcg (400 unit) tablet	1	
calcium carbonate 600 mg-vitamin d3 20 mcg (800 unit) tablet	1	
CALPHRON 667 MG TABLET	1	
CALQUENCE (ACALABRUTINIB MALEATE) 100 MG TABLET	1	PA,QL(60 per 30 days)
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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
camrese lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack[CE]	1	QL(91 per 90 days)
CAMZYOS 10 MG CAPSULE	1	PA,QL(30 per 30 days)
CAMZYOS 15 MG CAPSULE	1	PA,QL(30 per 30 days)
CAMZYOS 2.5 MG CAPSULE	1	PA,QL(30 per 30 days)
CAMZYOS 5 MG CAPSULE	1	PA,QL(30 per 30 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 chewable tablet	1	
carbamazepine 100 mg/5 ml oral suspension	1	
carbamazepine 200 mg tablet	1	
carbamazepine 200 mg/10 ml oral suspension	1	
carbamazepine er 100 mg capsule,extended release mphase12hr	1	
carbamazepine er 100 mg tablet,extended release,12 hr	1	QL(120 per 30 days)
carbamazepine er 200 mg capsule,extended release mphase12hr	1	
carbamazepine er 200 mg tablet,extended release,12 hr	1	QL(120 per 30 days)
carbamazepine er 300 mg capsule,extended release mphase12hr	1	
carbamazepine er 400 mg tablet,extended release,12 hr	1	QL(120 per 30 days)
carbidopa 10 mg-levodopa 100 mg tablet[EDS]	1	
carbidopa 25 mg-levodopa 100 mg tablet[EDS]	1	
carbidopa 25 mg-levodopa 250 mg tablet[EDS]	1	
carbidopa er 25 mg-levodopa 100 mg tablet,extended release	1	
carbidopa er 50 mg-levodopa 200 mg tablet,extended release	1	
carbinoxamine 4 mg/5 ml oral liquid	1	
carboxymethylcellulose sodium 0.5 % eye drops	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	
CARESTART COVID-19 ANTIGEN HOME TEST KIT[CE]	1	
CARETOUCH ALCOHOL PREP PAD TOPICAL PADS	1	
CARETOUCH LANCING DEVICE	1	
CARETOUCH SAFETY LANCETS 26 GAUGE	1	
CARETOUCH SAFETY LANCETS 28 GAUGE	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 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	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 oral suspension	1	
cefaclor 250 mg capsule	1	
cefaclor 250 mg/5 ml oral suspension	1	
cefaclor 375 mg/5 ml oral suspension	1	
cefaclor 500 mg capsule	1	
cefadroxil 1 gram tablet	1	
cefadroxil 250 mg/5 ml oral suspension	1	
cefadroxil 500 mg capsule	1	
cefadroxil 500 mg/5 ml oral suspension	1	
cefdinir 125 mg/5 ml oral suspension	1	
cefdinir 250 mg/5 ml oral suspension	1	
cefdinir 300 mg capsule	1	
cefixime 100 mg/5 ml oral suspension	1	
cefixime 200 mg/5 ml oral suspension	1	
cefixime 400 mg capsule	1	
cefpodoxime 100 mg tablet	1	
cefpodoxime 100 mg/5 ml oral suspension	1	
cefpodoxime 200 mg tablet	1	
cefpodoxime 50 mg/5 ml oral suspension	1	
cefprozil 125 mg/5 ml oral suspension	1	
cefprozil 250 mg tablet	1	
cefprozil 250 mg/5 ml oral suspension	1	
cefprozil 500 mg tablet	1	
cefuroxime axetil 250 mg tablet	1	
cefuroxime axetil 500 mg tablet	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)
CELLTRION DIATRUST COVID-19 AG HOME TEST KIT	1	
centratex 106 mg iron-1 mg capsule	1	
cephalexin 125 mg/5 ml oral suspension	1	
cephalexin 250 mg capsule	1	
cephalexin 250 mg/5 ml oral suspension	1	
cephalexin 500 mg capsule	1	
CERDELGA 84 MG CAPSULE	1	PA
cetirizine 1 mg/ml oral solution	1	QL(300 per 30 days)
cetirizine 10 mg tablet	1	
cetirizine 5 mg tablet	1	
CHANTIX 0.5 MG TABLET[CE]	1	QL(56 per 28 days)
CHANTIX 1 MG TABLET[CE]	1	QL(56 per 28 days)
CHANTIX CONTINUING MONTH BOX 1 MG TABLET[CE]	1	QL(56 per 28 days)
CHANTIX STARTING MONTH BOX 0.5 MG (11)-1 MG (42) TABLETS IN DOSE PACK[CE]	1	QL(53 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 chewable vitamins with iron 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	
children delsym cough-chest congestion dm 5 mg-100 mg/5 ml oral liquid	1	
children's acetaminophen 160 mg chewable tablet	1	
children's acetaminophen 160 mg/5 ml (5 ml) oral suspension	1	
children's acetaminophen 160 mg/5 ml oral liquid	1	
children's acetaminophen 160 mg/5 ml oral suspension	1	
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	
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 gluconate 0.12 % mouthwash	1	
chloroquine 250 mg tablet	1	
chloroquine 500 mg tablet	1	
chlorpheniramine 4 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)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
CHOLBAM 50 MG CAPSULE	1	PA,QL(120 per 30 days)
cholestyramine (with sugar) 4 gram oral powder	1	
cholestyramine (with sugar) 4 gram powder for susp in a packet	1	
cholestyramine light 4 gram oral powder	1	
cholestyramine light 4 gram powder for susp in a packet	1	
cholestyramine-aspartame 4 gram oral powder for susp in a packet	1	
ciclopirox 0.77 % topical cream	1	
ciclopirox 0.77 % topical gel	1	
ciclopirox 0.77 % topical suspension	1	
ciclopirox 1 % shampoo	1	
cilostazol 100 mg tablet	1	
cilostazol 50 mg tablet	1	
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 oral solution	1	
cimetidine 400 mg tablet	1	
cimetidine 800 mg tablet	1	
cinacalcet 30 mg tablet	1	QL(60 per 30 days)
cinacalcet 60 mg tablet	1	QL(60 per 30 days)
cinacalcet 90 mg tablet	1	QL(120 per 30 days)
CIPRODEX 0.3 %-0.1 % EAR DROPS,SUSPENSION	1	
ciprofloxacin 0.2 % ear drops in a dropperette	1	
ciprofloxacin 0.3 % eye drops	1	
ciprofloxacin 0.3 %-dexamethasone 0.1 % ear drops,suspension	1	
ciprofloxacin 250 mg tablet	1	
ciprofloxacin 250 mg/5 ml oral suspension	1	
ciprofloxacin 500 mg tablet	1	
ciprofloxacin 500 mg/5 ml oral suspension	1	
ciprofloxacin 750 mg tablet	1	
citalopram 10 mg tablet[EDS]	1	QL(30 per 30 days)
citalopram 10 mg/5 ml oral solution	1	
citalopram 20 mg tablet[EDS]	1	QL(60 per 30 days)
citalopram 40 mg tablet[EDS]	1	QL(30 per 30 days)
citrate of magnesia oral	1	
claravis 10 mg capsule	1	QL(60 per 30 days)
claravis 20 mg capsule	1	QL(60 per 30 days)
claravis 30 mg capsule	1	QL(60 per 30 days)
claravis 40 mg capsule	1	QL(120 per 30 days)
clarithromycin 125 mg/5 ml oral suspension	1	
clarithromycin 250 mg tablet	1	
clarithromycin 250 mg/5 ml oral suspension	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
clindacin etz 1 % topical swab	1	
clindacin p 1 % topical swab	1	
clindamycin 1 % lotion	1	
clindamycin 1 % topical gel	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 phosphate 1 % topical solution	1	
clindamycin phosphate 1 % topical swab	1	
clobazam 10 mg tablet	1	PA,QL(60 per 30 days)
clobazam 2.5 mg/ml oral suspension	1	PA,QL(480 per 30 days)
clobazam 20 mg tablet	1	PA,QL(60 per 30 days)
clobetasol 0.05 % scalp solution	1	
clobetasol 0.05 % shampoo	1	
clobetasol 0.05 % topical cream	1	
clobetasol 0.05 % topical gel	1	
clobetasol 0.05 % topical ointment	1	
clobetasol-emollient 0.05 % topical cream	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 disintegrating tablet	1	
clonazepam 0.25 mg disintegrating tablet	1	
clonazepam 0.5 mg disintegrating tablet	1	
clonazepam 0.5 mg tablet	1	
clonazepam 1 mg disintegrating tablet	1	
clonazepam 1 mg tablet	1	
clonazepam 2 mg disintegrating tablet	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 dipotassium 15 mg tablet	1	
clorazepate dipotassium 3.75 mg tablet	1	
clorazepate dipotassium 7.5 mg tablet	1	
clotrimazole 1 % topical cream	1	
clotrimazole 1 % topical solution	1	
clotrimazole 1 % vaginal cream	1	
clotrimazole 10 mg troche	1	
clotrimazole-3 2 % vaginal cream	1	
clotrimazole-betamethasone 1 %-0.05 % lotion	1	
clotrimazole-betamethasone 1 %-0.05 % topical cream	1	
clovique 250 mg capsule	1	PA
clozapine 100 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
clozapine 200 mg tablet	1	
clozapine 25 mg tablet	1	
clozapine 50 mg tablet	1	
COAGUCHEK LANCETS	1	
codeine 10 mg-guaifenesin 100 mg/5 ml oral liquid	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)
colchicine 0.6 mg tablet	1	QL(120 per 30 days)
colestipol 1 gram tablet	1	
colestipol 5 gram oral granules	1	
colestipol 5 gram oral packet	1	
COLOR LANCETS 21 GAUGE	1	
COMBIVENT RESPIMAT 20 MCG-100 MCG/ACTUATION SOLUTION FOR INHALATION	1	QL(4 per 20 days)
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 TRIS VACCINE(PF) 30 MCG/0.3 ML INTRAMUSCULAR SUSPENSION	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)
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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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)
cromolyn 100 mg/5 ml oral concentrate	1	
cromolyn 4 % eye drops	1	
cromolyn 5.2 mg/spray (4 %) nasal spray	1	
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 PUMP SPRAY	1	
cyanocobalamin (vit b-12) 1,000 mcg/ml injection solution	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 2 % eye 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 0.05 % eye drops in a dropperette	1	QL(60 per 30 days)
cyclosporine 100 mg capsule	1	QL(720 per 30 days)
cyclosporine 25 mg capsule	1	
cyclosporine modified 100 mg capsule	1	QL(720 per 30 days)
cyclosporine modified 100 mg/ml oral solution	1	
cyclosporine modified 25 mg capsule	1	
cyclosporine modified 50 mg capsule	1	
cyproheptadine 2 mg/5 ml oral 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/SCOOP 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,extended release,12 hr	1	PA,QL(60 per 30 days)
danazol 100 mg capsule	1	
danazol 200 mg capsule	1	
danazol 50 mg capsule	1	
dantrolene 100 mg capsule	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
dantrolene 25 mg capsule	1	
dantrolene 50 mg capsule	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	
deep sea nasal 0.65 % spray aerosol	1	
deferasirox 125 mg dispersible tablet	1	PA,QL(150 per 30 days)
deferasirox 180 mg tablet	1	PA,QL(600 per 30 days)
deferasirox 250 mg dispersible tablet	1	PA,QL(150 per 30 days)
deferasirox 360 mg tablet	1	PA,QL(300 per 30 days)
deferasirox 500 mg dispersible tablet	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 120 MG-15 MG TABLET	1	QL(30 per 30 days)
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 0.1 mg tablet	1	QL(180 per 30 days)
desmopressin 0.2 mg tablet	1	QL(180 per 30 days)
desogestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet[CE]	1	
desogestrel-e.estradiol 0.15 mg-0.02 mg(21)/e.estrad 0.01 mg(5) tablet[CE]	1	
desvenlafaxine succinate er 100 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
desvenlafaxine succinate er 25 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
desvenlafaxine succinate er 50 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
dexamethasone 0.5 mg tablet	1	
dexamethasone 0.5 mg/5 ml oral elixir	1	
dexamethasone 0.5 mg/5 ml oral solution	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
dexamethasone sodium phosphate 0.1 % eye drops	1	
dexmethylphenidate 10 mg tablet	1	QL(60 per 30 days)
dexmethylphenidate 2.5 mg tablet	1	QL(60 per 30 days)
dexmethylphenidate 5 mg tablet	1	QL(60 per 30 days)
dexmethylphenidate er 10 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 15 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 20 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 25 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 30 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 35 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 40 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dexmethylphenidate er 5 mg capsule,extended release biphasic50-50	1	QL(30 per 30 days)
dextroamphetamine sulfate 10 mg tablet	1	QL(180 per 30 days)
dextroamphetamine sulfate 5 mg tablet	1	QL(150 per 30 days)
dextroamphetamine-amphetamine 10 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine 12.5 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine 15 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine 20 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine 30 mg tablet	1	QL(60 per 30 days)
dextroamphetamine-amphetamine 5 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine 7.5 mg tablet	1	QL(90 per 30 days)
dextroamphetamine-amphetamine er 10 mg 24hr capsule,extend release	1	QL(30 per 30 days)
dextroamphetamine-amphetamine er 15 mg 24hr capsule,extend release	1	QL(30 per 30 days)
dextroamphetamine-amphetamine er 20 mg 24hr capsule,extend release	1	QL(60 per 30 days)
dextroamphetamine-amphetamine er 25 mg 24hr capsule,extend release	1	QL(60 per 30 days)
dextroamphetamine-amphetamine er 30 mg 24hr capsule,extend release	1	QL(60 per 30 days)
dextroamphetamine-amphetamine er 5 mg 24hr capsule,extend release	1	QL(30 per 30 days)
dextromethorphan-guaifenesin 10 mg-100 mg/5 ml oral liquid	1	
dextromethorphan-guaifenesin 10 mg-100 mg/5 ml oral syrup	1	
dextromethorphan-guaifenesin er 60 mg-1,200 mg tab,extend release,12hr	1	
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 tablet	1	QL(120 per 30 days)
diazepam 12.5 mg-15 mg-17.5 mg-20 mg rectal kit	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
diazepam 2 mg tablet	1	QL(90 per 30 days)
diazepam 2.5 mg rectal kit	1	
diazepam 5 mg tablet	1	QL(90 per 30 days)
diazepam 5 mg-7.5 mg-10 mg rectal kit	1	
diazepam 5 mg/5 ml (1 mg/ml) oral solution	1	QL(1200 per 30 days)
diazepam 5 mg/ml oral concentrate	1	QL(240 per 30 days)
diazepam intensol 5 mg/ml oral concentrate	1	QL(240 per 30 days)
dibucaine 1 % topical ointment	1	
diclofenac 0.1 % eye drops	1	QL(5 per 30 days)
diclofenac 1 % topical gel	1	
diclofenac er 100 mg tablet,extended release 24 hr	1	
diclofenac potassium 50 mg tablet	1	
diclofenac sodium 25 mg tablet,delayed release	1	
diclofenac sodium 50 mg tablet,delayed release	1	
diclofenac sodium 75 mg tablet,delayed release	1	
dicloxacillin 250 mg capsule	1	
dicloxacillin 500 mg capsule	1	
dicyclomine 10 mg capsule	1	
dicyclomine 10 mg/5 ml oral solution	1	
dicyclomine 20 mg tablet	1	
didanosine 250 mg capsule,delayed release	1	QL(30 per 30 days)
didanosine 400 mg capsule,delayed release	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 125 mcg (0.125 mg) tablet[EDS]	1	QL(30 per 30 days)
digoxin 250 mcg (0.25 mg) tablet[EDS]	1	QL(30 per 30 days)
digoxin 50 mcg/ml (0.05 mg/ml) oral solution	1	
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 30 mg tablet[EDS]	1	
diltiazem 60 mg tablet[EDS]	1	
diltiazem 90 mg tablet[EDS]	1	
diltiazem cd 120 mg capsule,extended release 24 hr[EDS]	1	QL(60 per 30 days)
diltiazem cd 180 mg capsule,extended release 24 hr[EDS]	1	QL(60 per 30 days)
diltiazem cd 240 mg capsule,extended release 24 hr[EDS]	1	QL(60 per 30 days)
diltiazem cd 300 mg capsule,extended release 24 hr	1	QL(30 per 30 days)
diltiazem cd 360 mg capsule,extended release 24 hr	1	QL(30 per 30 days)
diltiazem er (xr/xt) 120 mg capsule,extended release 24 hr, controlled	1	QL(60 per 30 days)
diltiazem er (xr/xt) 180 mg capsule,extended release 24 hr, controlled[EDS]	1	QL(60 per 30 days)
diltiazem er (xr/xt) 240 mg capsule,extended release 24 hr, controlled	1	QL(60 per 30 days)
diltiazem er 120 mg capsule,24 hr,extended release[EDS]	1	QL(60 per 30 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
diltiazem er 120 mg capsule,extended release 12 hr	1	QL(60 per 30 days)
diltiazem er 180 mg capsule,24 hr,extended release[EDS]	1	QL(60 per 30 days)
diltiazem er 240 mg capsule,24 hr,extended release[EDS]	1	QL(60 per 30 days)
diltiazem er 300 mg capsule,24 hr,extended release[EDS]	1	QL(30 per 30 days)
diltiazem er 360 mg capsule,24 hr,extended release[EDS]	1	QL(30 per 30 days)
diltiazem er 420 mg capsule,24 hr,extended release	1	QL(30 per 30 days)
diltiazem er 60 mg capsule,extended release 12 hr	1	QL(60 per 30 days)
diltiazem er 90 mg capsule,extended release 12 hr	1	QL(60 per 30 days)
dimethyl fumarate 120 mg (14)-240 mg (46) capsule,delayed release	1	PA,QL(60 per 30 days)
dimethyl fumarate 120 mg capsule,delayed release	1	PA,QL(14 per 30 days)
dimethyl fumarate 240 mg capsule,delayed release	1	PA,QL(60 per 30 days)
diphedryl 12.5 mg/5 ml oral liquid	1	
DIPHENHIST 25 MG CAPSULE	1	
diphenhydramine 12.5 mg/5 ml oral elixir	1	
diphenhydramine 12.5 mg/5 ml oral liquid	1	
diphenhydramine 25 mg capsule	1	
diphenhydramine 25 mg tablet	1	
diphenhydramine 50 mg capsule	1	
diphenoxylate-atropine 2.5 mg-0.025 mg tablet	1	
dipyridamole 25 mg tablet	1	
dipyridamole 50 mg tablet	1	
dipyridamole 75 mg tablet	1	
disopyramide phosphate 100 mg capsule	1	
disopyramide phosphate 150 mg capsule	1	
disulfiram 250 mg tablet	1	
disulfiram 500 mg tablet	1	
divalproex 125 mg capsule,delayed release sprinkle	1	
divalproex 125 mg tablet,delayed release[EDS]	1	
divalproex 250 mg tablet,delayed release[EDS]	1	
divalproex 500 mg tablet,delayed release[EDS]	1	
divalproex er 250 mg tablet,extended release 24 hr	1	
divalproex er 500 mg tablet,extended release 24 hr	1	
docusate sodium 100 mg capsule	1	
docusil 100 mg capsule	1	
dodex 1,000 mcg/ml injection solution	1	QL(30 per 30 days)
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	
dolishale 90 mcg-20 mcg (28) tablet[CE]	1	
donepezil 10 mg disintegrating tablet[EDS]	1	QL(30 per 30 days)
donepezil 10 mg tablet[EDS]	1	QL(60 per 30 days)
donepezil 5 mg disintegrating tablet[EDS]	1	QL(30 per 30 days)
donepezil 5 mg tablet[EDS]	1	QL(30 per 30 days)
dorzolamide 2 % eye drops	1	QL(10 per 30 days)
dorzolamide 22.3 mg-timolol 6.8 mg/ml eye drops	1	QL(10 per 30 days)
dotti 0.025 mg/24 hr transdermal patch	1	QL(8 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 1 mg tablet[EDS]	1	
doxazosin 2 mg tablet[EDS]	1	
doxazosin 4 mg tablet[EDS]	1	
doxazosin 8 mg tablet[EDS]	1	
doxepin 10 mg capsule	1	
doxepin 10 mg/ml oral concentrate	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 hyclate 100 mg capsule	1	QL(90 per 30 days)
doxycycline hyclate 100 mg tablet	1	
doxycycline hyclate 20 mg tablet	1	
doxycycline hyclate 50 mg capsule	1	
doxycycline monohydrate 100 mg capsule	1	QL(90 per 30 days)
doxycycline monohydrate 100 mg tablet	1	
doxycycline monohydrate 25 mg/5 ml oral suspension	1	
doxycycline monohydrate 50 mg capsule	1	QL(60 per 30 days)
doxycycline monohydrate 50 mg tablet	1	
doxycycline monohydrate 75 mg tablet	1	
doxylamine 10 mg-pyridoxine (vit b6) 10 mg tablet,delayed release	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)
DROPLET GENTEEL LANCING DEVICE	1	
DROPLET LANCETS 30 GAUGE	1	
DROPLET LANCING DEVICE	1	
drospiren-e.estrad-l.mefol 3 mg-0.02 mg-0.451 mg(24)/0.451 mg(4)tablet[CE]	1	
drospiren-e.estrad-l.mefol 3 mg-0.03 mg-0.451 mg(21)/0.451 mg(7)tablet[CE]	1	
drospirenone 3 mg-ethinyl estradiol 0.02 mg tablet[CE]	1	
drospirenone 3 mg-ethinyl estradiol 0.03 mg tablet[CE]	1	
ducodyl (bisacodyl) 5 mg tablet,delayed release	1	
duloxetine 20 mg capsule,delayed release[EDS]	1	QL(60 per 30 days)
duloxetine 30 mg capsule,delayed release[EDS]	1	QL(90 per 30 days)
duloxetine 60 mg capsule,delayed release[EDS]	1	QL(60 per 30 days)
DUREX AVANTI BARE REAL FEEL CONDOM[CE]	1	
dutasteride 0.5 mg capsule[EDS]	1	QL(30 per 30 days)
E-Z JECT LANCETS	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
e.c. prin 325 mg tablet,delayed release	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	
ec-naproxen 500 mg tablet,delayed release	1	
ECLIPSE NEEDLE 23 GAUGE X 1"	1	
ECLIPSE NEEDLE 25 GAUGE 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	
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)
efavirenz 200 mg capsule	1	QL(120 per 30 days)
efavirenz 400 mg-lamivudine 300 mg-tenofovir disoproxil 300 mg tablet	1	QL(30 per 30 days)
efavirenz 50 mg capsule	1	QL(480 per 30 days)
efavirenz 600 mg tablet	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
efavirenz 600 mg-emtricitabine 200 mg-tenofovir disoprox 300 mg tablet	1	QL(30 per 30 days)
efavirenz 600 mg-lamivudine 300 mg-tenofovir disoproxil 300 mg tablet	1	QL(30 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)
ELLUME COVID-19 HOME TEST KIT[CE]	1	
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)
emoquette 0.15 mg-0.03 mg tablet[CE]	1	
emtricitabine 100 mg-tenofovir disoproxil fumarate 150 mg tablet	1	QL(30 per 30 days)
emtricitabine 133 mg-tenofovir disoproxil fumarate 200 mg tablet	1	QL(30 per 30 days)
emtricitabine 167 mg-tenofovir disoproxil fumarate 250 mg tablet	1	QL(30 per 30 days)
emtricitabine 200 mg capsule	1	QL(30 per 30 days)
emtricitabine 200 mg-tenofovir disoproxil fumarate 300 mg tablet	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 10 mg-hydrochlorothiazide 25 mg tablet[EDS]	1	
enalapril 5 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
enalapril maleate 10 mg tablet[EDS]	1	
enalapril maleate 2.5 mg tablet[EDS]	1	
enalapril maleate 20 mg tablet[EDS]	1	
enalapril maleate 5 mg tablet[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)
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 subcutaneous syringe	1	QL(28 per 28 days)
enoxaparin 120 mg/0.8 ml subcutaneous syringe	1	QL(22.4 per 28 days)
enoxaparin 150 mg/ml subcutaneous syringe	1	QL(28 per 28 days)
enoxaparin 30 mg/0.3 ml subcutaneous syringe	1	QL(16.8 per 28 days)
enoxaparin 300 mg/3 ml subcutaneous solution	1	QL(84 per 28 days)
enoxaparin 40 mg/0.4 ml subcutaneous syringe	1	QL(11.2 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
enoxaparin 60 mg/0.6 ml subcutaneous syringe	1	QL(16.8 per 28 days)
enoxaparin 80 mg/0.8 ml subcutaneous syringe	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 0.05 % eye drops	1	QL(5 per 25 days)
epinephrine (jr) 0.15 mg/0.3 ml injection,auto-injector	1	QL(4 per 30 days)
epinephrine 0.15 mg/0.15 ml auto-injector (for 33 to 66 lb patients)	1	QL(4 per 30 days)
epinephrine 0.3 mg/0.3 ml injection, auto-injector	1	QL(4 per 30 days)
epitol 200 mg tablet	1	
ergocalciferol (vitamin d2) 1,250 mcg (50,000 unit) capsule	1	
ERIVEDGE 150 MG CAPSULE	1	PA,QL(28 per 28 days)
erlotinib 100 mg tablet	1	PA,QL(30 per 30 days)
erlotinib 150 mg tablet	1	PA,QL(30 per 30 days)
erlotinib 25 mg tablet	1	PA,QL(90 per 30 days)
errin 0.35 mg tablet[CE]	1	
erythromycin 5 mg/gram (0.5 %) eye ointment	1	
erythromycin with ethanol 2 % topical solution	1	
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 5 mg/5 ml oral solution	1	QL(600 per 30 days)
esomeprazole magnesium dr 10 mg granules delayed release for susp	1	QL(30 per 30 days)
esomeprazole magnesium dr 20 mg granules delayed release for susp	1	QL(30 per 30 days)
esomeprazole magnesium dr 40 mg granules delayed release for susp	1	QL(30 per 30 days)
estarylla 0.25 mg-35 mcg tablet[CE]	1	
estradiol 0.01% (0.1 mg/gram) vaginal cream	1	
estradiol 0.025 mg/24 hr semiweekly transdermal patch	1	QL(8 per 28 days)
estradiol 0.025 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)
estradiol 0.0375 mg/24 hr semiweekly transdermal patch	1	QL(8 per 28 days)
estradiol 0.0375 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)
estradiol 0.05 mg/24 hr semiweekly transdermal patch	1	QL(8 per 28 days)
estradiol 0.05 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)
estradiol 0.06 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)
estradiol 0.075 mg/24 hr semiweekly transdermal patch	1	QL(8 per 28 days)
estradiol 0.075 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)
estradiol 0.1 mg/24 hr semiweekly transdermal patch	1	QL(8 per 28 days)
estradiol 0.1 mg/24 hr weekly transdermal patch	1	QL(4 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
estradiol 0.5 mg tablet	1	
estradiol 1 mg tablet	1	
estradiol 10 mcg vaginal tablet	1	
estradiol 2 mg tablet	1	
estradiol-norethindrone acet 0.5 mg-0.1 mg tablet	1	
estradiol-norethindrone acet 1 mg-0.5 mg tablet	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 100 mg tablet	1	
ethambutol 400 mg tablet	1	
ethosuximide 250 mg capsule	1	
ethosuximide 250 mg/5 ml oral solution	1	
ethynodiol diacetate-ethinyl estradiol 1 mg-35 mcg tablet[CE]	1	
ethynodiol diacetate-ethinyl estradiol 1 mg-50 mcg tablet[CE]	1	
etodolac 200 mg capsule	1	
etodolac 300 mg capsule	1	
etodolac 400 mg tablet	1	
etodolac 500 mg tablet	1	
etonogestrel 0.12 mg-ethinyl estradiol 0.015 mg/24 hr 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	
EUTHYROX 88 MCG TABLET	1	
everolimus (antineoplastic) 10 mg tablet	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 2 mg tablet for oral suspension	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 2.5 mg tablet	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 3 mg tablet for oral suspension	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 5 mg tablet	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 5 mg tablet for oral suspension	1	PA,QL(30 per 30 days)
everolimus (antineoplastic) 7.5 mg tablet	1	PA,QL(30 per 30 days)
everolimus (immunosuppressive) 0.25 mg tablet	1	PA,QL(60 per 30 days)
everolimus (immunosuppressive) 0.5 mg tablet	1	PA,QL(120 per 30 days)
everolimus (immunosuppressive) 0.75 mg tablet	1	PA,QL(60 per 30 days)
everolimus (immunosuppressive) 1 mg tablet	1	PA,QL(60 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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 (8 mg/ml) oral suspension	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 oral suspension	1	
felodipine er 10 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
felodipine er 2.5 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
felodipine er 5 mg tablet,extended release 24 hr	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 160 mg tablet	1	QL(30 per 30 days)
fenofibrate 54 mg tablet	1	QL(60 per 30 days)
fenofibrate micronized 134 mg capsule	1	QL(30 per 30 days)
fenofibrate micronized 200 mg capsule	1	QL(30 per 30 days)
fenofibrate micronized 67 mg capsule	1	QL(60 per 30 days)
fenofibrate nanocrystallized 145 mg tablet	1	QL(30 per 30 days)
fenofibrate nanocrystallized 48 mg tablet	1	QL(60 per 30 days)
fentanyl 1,200 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 1,600 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 100 mcg/hr transdermal patch	1	QL(20 per 30 days)
fentanyl 12 mcg/hr transdermal patch	1	QL(20 per 30 days)
fentanyl 200 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 25 mcg/hr transdermal patch	1	QL(20 per 30 days)
fentanyl 37.5 mcg/hour transdermal patch	1	QL(20 per 30 days)
fentanyl 400 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 50 mcg/hr transdermal patch	1	QL(20 per 30 days)
fentanyl 600 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 62.5 mcg/hour transdermal patch	1	QL(20 per 30 days)
fentanyl 75 mcg/hr transdermal patch	1	QL(20 per 30 days)
fentanyl 800 mcg lozenge on a handle	1	PA,QL(120 per 30 days)
fentanyl 87.5 mcg/hour transdermal patch	1	QL(20 per 30 days)
feosol 325 mg (65 mg iron) tablet	1	
FER-IN-SOL 15 MG IRON (75 MG)/ML ORAL DROPS	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 plus 106 mg iron-1 mg tablet	1	
ferrous fumarate 324 mg (106 mg iron) tablet	1	
ferrous gluconate 324 mg (37.5 mg iron) tablet	1	
ferrous gluconate 324 mg (38 mg iron) tablet	1	
ferrous sulfate 15 mg iron (75 mg)/ml oral drops	1	
ferrous sulfate 220 mg (44 mg iron)/5 ml oral elixir	1	
ferrous sulfate 220 mg (44 mg iron)/5 ml oral solution	1	
ferrous sulfate 300 mg (60 mg iron)/5 ml oral liquid	1	
ferrous sulfate 324 mg (65 mg iron) tablet,delayed release	1	
ferrous sulfate 325 mg (65 mg iron) tablet	1	
ferrous sulfate 325 mg (65 mg iron) tablet,delayed release	1	
ferrousul 325 mg (65 mg iron) 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 NEEDLES 19 X 1 1/2"	1	
FILTER NEEDLES 19 X 1"	1	
finasteride 5 mg tablet[EDS]	1	QL(30 per 30 days)
FINE 30 UNIVERSAL LANCETS 30 GAUGE	1	
FINGERSTIX LANCETS	1	
finzala 1 mg-20 mcg (24)/75 mg (4) chewable tablet[CE]	1	
FIRDAPSE 10 MG TABLET	1	PA,QL(240 per 30 days)
first aid antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment	1	
flavoxate 100 mg tablet	1	
flecainide 100 mg tablet	1	
flecainide 150 mg tablet	1	
flecainide 50 mg tablet	1	
FLEET ENEMA 19 GRAM-7 GRAM/118 ML	1	
fleet glycerin (child) rectal suppository	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	
FLOWFLEX COVID-19 ANTIGEN HOME TEST KIT[CE]	1	
FLUAD QUAD 2021-2022(65YR UP)(PF) 60 MCG (15 MCG X 4)/0.5ML IM SYRINGE	1	
FLUAD QUAD 2022-2023(65YR UP)(PF) 60 MCG (15 MCG X 4)/0.5ML IM SYRINGE	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
FLUARIX QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUARIX QUAD 2022-2023 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUBLOK QUAD 2021-2022 (PF) 180 MCG (45 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUBLOK QUAD 2022-2023 (PF) 180 MCG (45 MCG X 4)/0.5 ML IM SYRINGE	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	
FLUCELVAX QUAD 2022-2023 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUCELVAX QUAD 2022-2023 60 MCG (15 MCG X 4)/0.5 ML IM SUSPENSION	1	
fluconazole 10 mg/ml oral suspension	1	
fluconazole 100 mg tablet	1	
fluconazole 150 mg tablet	1	
fluconazole 200 mg tablet	1	
fluconazole 40 mg/ml oral suspension	1	
fluconazole 50 mg tablet	1	
flucytosine 250 mg capsule	1	
flucytosine 500 mg capsule	1	
fludrocortisone 0.1 mg tablet	1	
FLULAVAL QUAD 2021-2022 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLULAVAL QUAD 2022-2023 (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 2022-2023 10EXP6.5-7.5 FF UNIT/0.2 ML NASAL SPRAY SYRINGE	1	
flunisolide 25 mcg (0.025 %) nasal spray	1	QL(50 per 30 days)
fluocinolone 0.01 % topical cream	1	
fluocinolone 0.025 % topical cream	1	
fluocinolone 0.025 % topical ointment	1	
fluocinonide 0.05 % topical cream	1	
fluocinonide 0.05 % topical gel	1	
fluocinonide 0.05 % topical ointment	1	
fluocinonide 0.05 % topical solution	1	
fluocinonide-e 0.05 % topical cream	1	
fluocinonide-emollient 0.05 % topical cream	1	
fluoride 0.25 mg (0.55 mg sodium fluoride) chewable tablet	1	
fluoride 0.5 mg (1.1 mg sodium fluoride) chewable tablet	1	
fluoride 0.5 mg (1.1 mg sodium fluoride)/ml oral drops	1	
fluoride 1 mg (2.2 mg sodium fluoride) chewable tablet	1	
fluorometholone 0.1 % eye drops,suspension	1	
fluorouracil 2 % topical solution	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
fluorouracil 5 % topical cream	1	
fluorouracil 5 % topical solution	1	
fluoxetine 10 mg capsule[EDS]	1	QL(60 per 30 days)
fluoxetine 20 mg capsule[EDS]	1	QL(120 per 30 days)
fluoxetine 20 mg/5 ml (4 mg/ml) oral solution[EDS]	1	
fluoxetine 40 mg capsule[EDS]	1	QL(60 per 30 days)
fluphenazine 2.5 mg/5 ml oral elixir	1	
fluphenazine 5 mg/ml oral concentrate	1	
fluphenazine decanoate 25 mg/ml injection solution	1	
flurbiprofen 0.03 % eye drops	1	
flurbiprofen 100 mg tablet	1	
flutamide 125 mg capsule	1	QL(180 per 30 days)
fluticasone 100 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	1	QL(60 per 30 days)
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr	1	QL(1 per 30 days)
fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	1	QL(1 per 30 days)
fluticasone 250 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	1	QL(60 per 30 days)
fluticasone 500 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	1	QL(60 per 30 days)
fluticasone 55 mcg-salmeterol 14 mcg/actuation breath activated powder	1	QL(1 per 30 days)
fluticasone propionate 0.005 % topical ointment	1	
fluticasone propionate 0.05 % topical cream	1	
fluticasone propionate 110 mcg/actuation hfa aerosol inhaler	1	QL(24 per 30 days)
fluticasone propionate 220 mcg/actuation hfa aerosol inhaler	1	QL(24 per 30 days)
fluticasone propionate 44 mcg/actuation hfa aerosol inhaler	1	QL(10.6 per 30 days)
fluticasone propionate 50 mcg/actuation nasal spray,suspension	1	QL(16 per 30 days)
fluvoxamine 100 mg tablet	1	QL(90 per 30 days)
fluvoxamine 25 mg tablet	1	QL(90 per 30 days)
fluvoxamine 50 mg tablet	1	QL(90 per 30 days)
FLUZONE HIGH-DOSE QUAD 2021-22 (PF) 240 MCG/0.7 ML IM SYRINGE	1	
FLUZONE HIGH-DOSE QUAD 2022-2023 (PF) 240 MCG/0.7 ML IM SYRINGE	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 2022-2023 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SUSPENSION	1	
FLUZONE QUAD 2022-2023 (PF) 60 MCG (15 MCG X 4)/0.5 ML IM SYRINGE	1	
FLUZONE QUAD 2022-2023 60 MCG (15 MCG X 4)/0.5 ML INTRAMUSCULAR SUSP.	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 10 mg tablet[EDS]	1	
fosinopril 10 mg-hydrochlorothiazide 12.5 mg tablet	1	
fosinopril 20 mg tablet[EDS]	1	
fosinopril 20 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
fosinopril 40 mg tablet[EDS]	1	
FREESTYLE LANCETS 28 GAUGE	1	
FREESTYLE UNISTIK 2	1	
furosemide 10 mg/ml oral solution[EDS]	1	
furosemide 20 mg tablet[EDS]	1	
furosemide 40 mg tablet[EDS]	1	
furosemide 40 mg/5 ml (8 mg/ml) oral solution[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	
gabapentin 100 mg capsule	1	QL(270 per 30 days)
gabapentin 250 mg/5 ml (5 ml) oral solution	1	QL(2250 per 30 days)
gabapentin 250 mg/5 ml oral solution	1	QL(2250 per 30 days)
gabapentin 300 mg capsule	1	QL(270 per 30 days)
gabapentin 300 mg/6 ml (6 ml) oral solution	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 12 mg tablet	1	QL(60 per 30 days)
galantamine 4 mg tablet	1	QL(60 per 30 days)
galantamine 4 mg/ml oral solution	1	QL(200 per 30 days)
galantamine 8 mg tablet	1	QL(60 per 30 days)
galantamine er 16 mg 24 hr capsule,extended release	1	QL(30 per 30 days)
galantamine er 24 mg 24 hr capsule,extended release	1	QL(30 per 30 days)
galantamine er 8 mg 24 hr capsule,extended release	1	QL(30 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)
GENABIO COVID-19 RAPID AT-HOME KIT	1	
generlac 10 gram/15 ml oral solution	1	
gengraf 100 mg capsule	1	QL(720 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
gengraf 100 mg/ml oral solution	1	
gengraf 25 mg capsule	1	
gentak 0.3 % (3 mg/gram) eye ointment	1	
gentamicin 0.3 % eye drops	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 (28) 3 mg-0.02 mg tablet[CE]	1	
glatiramer 20 mg/ml subcutaneous syringe	1	PA,QL(30 per 30 days)
glatiramer 40 mg/ml subcutaneous 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 2.5 mg-metformin 250 mg tablet	1	
glipizide 2.5 mg-metformin 500 mg tablet	1	
glipizide 5 mg tablet[EDS]	1	
glipizide 5 mg-metformin 500 mg tablet	1	
glipizide er 10 mg tablet, extended release 24 hr[EDS]	1	
glipizide er 2.5 mg tablet, extended release 24 hr[EDS]	1	
glipizide er 5 mg tablet, extended release 24 hr[EDS]	1	
GLUCAGEN DIAGNOSTIC KIT 1 MG/ML INJECTION	1	
GLUCAGEN HYPOKIT 1 MG INJECTION	1	
GLUCOCOM LANCETS 28 GAUGE	1	
GLUCOCOM LANCETS 30 GAUGE	1	
GLUCOCOM LANCETS 33 GAUGE	1	
glucose 4 gram chewable tablet	1	
glyburide 1.25 mg tablet[EDS]	1	
glyburide 1.25 mg-metformin 250 mg tablet[EDS]	1	
glyburide 2.5 mg tablet[EDS]	1	
glyburide 2.5 mg-metformin 500 mg tablet[EDS]	1	
glyburide 5 mg tablet[EDS]	1	
glyburide 5 mg-metformin 500 mg tablet[EDS]	1	
glyburide micronized 1.5 mg tablet[EDS]	1	
glyburide micronized 3 mg tablet[EDS]	1	
glyburide micronized 6 mg tablet[EDS]	1	
glycerin (child) rectal suppository	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)
GOJJI LANCETS 30 GAUGE	1	
GOJJI LANCING DEVICE	1	
granisetron hcl 1 mg tablet	1	QL(28 per 28 days)
griseofulvin microsize 125 mg/5 ml oral suspension	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
griseofulvin microsize 500 mg tablet	1	
griseofulvin ultramicrosize 125 mg tablet	1	
griseofulvin ultramicrosize 250 mg tablet	1	
guaiatussin ac 10 mg-100 mg/5 ml oral liquid	1	
guaifenesin 100 mg/5 ml oral liquid	1	
guaifenesin 200 mg tablet	1	
guaifenesin 400 mg tablet	1	
guaifenesin ac 10 mg-100 mg/5 ml oral liquid	1	
guanfacine 1 mg tablet[EDS]	1	
guanfacine 2 mg tablet[EDS]	1	
guanfacine er 1 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
guanfacine er 2 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
guanfacine er 3 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
guanfacine er 4 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
guanidine 125 mg tablet	1	
GVOKE 1 MG/0.2 ML SUBCUTANEOUS SOLUTION	1	
GVOKE HYPOPEN 1-PACK 0.5 MG/0.1 ML SUBCUTANEOUS AUTO-INJECTOR	1	
GVOKE HYPOPEN 1-PACK 1 MG/0.2 ML SUBCUTANEOUS AUTO-INJECTOR	1	
GVOKE HYPOPEN 2-PACK 0.5 MG/0.1 ML SUBCUTANEOUS AUTO-INJECTOR	1	
GVOKE HYPOPEN 2-PACK 1 MG/0.2 ML SUBCUTANEOUS AUTO-INJECTOR	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	
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	
HALDOL DECANOATE 100 MG/ML INTRAMUSCULAR SOLUTION	1	QL(5 per 30 days)
HALDOL DECANOATE 50 MG/ML INTRAMUSCULAR SOLUTION	1	QL(9 per 30 days)
haloette 0.12 mg-0.015 mg/24 hr vaginal ring[CE]	1	QL(1 per 28 days)
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 decanoate 100 mg/ml intramuscular solution	1	QL(5 per 30 days)
haloperidol decanoate 50 mg/ml intramuscular solution	1	QL(9 per 30 days)
haloperidol lactate 2 mg/ml oral concentrate	1	
haloperidol lactate 5 mg/ml injection solution	1	
haloperidol lactate 5 mg/ml intramuscular syringe	1	
HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
hematex 150 mg iron tablet	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	
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)
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 capsule[EDS]	1	
hydrochlorothiazide 12.5 mg tablet[EDS]	1	
hydrochlorothiazide 25 mg tablet[EDS]	1	
hydrochlorothiazide 50 mg tablet[EDS]	1	
hydrocodone 10 mg-acetaminophen 325 mg tablet	1	QL(360 per 30 days)
hydrocodone 10 mg-chlorpheniramine 8 mg/5 ml oral susp extend.rel 12hr	1	
hydrocodone 10 mg-ibuprofen 200 mg tablet	1	QL(150 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
hydrocodone 2.5 mg-acetaminophen 325 mg tablet	1	QL(360 per 30 days)
hydrocodone 5 mg-acetaminophen 325 mg tablet	1	QL(360 per 30 days)
hydrocodone 5 mg-ibuprofen 200 mg tablet	1	QL(150 per 30 days)
hydrocodone 7.5 mg-acetaminophen 325 mg tablet	1	QL(360 per 30 days)
hydrocodone 7.5 mg-acetaminophen 325 mg/15 ml oral solution	1	QL(5520 per 30 days)
hydrocodone 7.5 mg-ibuprofen 200 mg tablet	1	QL(150 per 30 days)
hydrocodone-homatropine 5 mg-1.5 mg/5 ml (5 ml) oral syrup	1	
hydrocodone-homatropine 5 mg-1.5 mg/5 ml oral syrup	1	
hydrocortisone 0.5 % topical cream	1	
hydrocortisone 1 % topical cream	1	
hydrocortisone 1 % topical cream with perineal applicator	1	
hydrocortisone 1 % topical ointment	1	
hydrocortisone 10 mg tablet	1	
hydrocortisone 100 mg/60 ml enema	1	
hydrocortisone 2.5 % lotion	1	
hydrocortisone 2.5 % topical cream	1	
hydrocortisone 2.5 % topical cream with perineal applicator	1	
hydrocortisone 2.5 % topical ointment	1	
hydrocortisone 20 mg tablet	1	
hydrocortisone 5 mg tablet	1	
hydrocortisone acetate 0.5 % topical cream	1	
hydrocortisone acetate 1 % topical cream	1	
hydrocortisone acetate 1 % topical ointment	1	
hydrocortisone plus 1 % topical cream	1	
hydrocortisone-aloe vera 1 % topical cream	1	
hydromet 5 mg-1.5 mg/5 ml oral syrup	1	
hydromorphone 1 mg/ml oral liquid	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 tablet	1	
hydroxychloroquine 200 mg tablet	1	
hydroxychloroquine 300 mg tablet	1	
hydroxychloroquine 400 mg tablet	1	
hydroxyurea 500 mg capsule	1	
hydroxyzine hcl 10 mg tablet	1	
hydroxyzine hcl 10 mg/5 ml oral solution	1	
hydroxyzine hcl 25 mg tablet	1	
hydroxyzine hcl 50 mg tablet	1	
hydroxyzine pamoate 100 mg capsule	1	
hydroxyzine pamoate 25 mg capsule	1	
hydroxyzine pamoate 50 mg capsule	1	
HYFTOR 0.2 % TOPICAL GEL	1	PA
hyoscyamine 0.125 mg disintegrating tablet	1	
hyoscyamine 0.125 mg sublingual tablet	1	
hyoscyamine 0.125 mg/5 ml oral elixir	1	
hyoscyamine 0.125 mg/ml oral drops	1	
hyoscyamine er 0.375 mg tablet,extended release,12 hr	1	
hyoscyamine sulfate 0.125 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
HYPOLANCE AST LANCING KIT	1	
ibandronate 150 mg tablet	1	QL(1 per 28 days)
IBRANCE 100 MG TABLET	1	PA,QL(21 per 28 days)
IBRANCE 125 MG TABLET	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 oral suspension	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 subcutaneous 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	
IHEALTH COVID-19 ANTIGEN RAPID HOME TEST KIT[CE]	1	
imatinib 100 mg tablet	1	PA,QL(90 per 30 days)
imatinib 400 mg tablet	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)
IMBRUVICA 70 MG CAPSULE	1	PA,QL(28 per 28 days)
imipramine 10 mg tablet	1	
imipramine 25 mg tablet	1	
imipramine 50 mg tablet	1	
imiquimod 5 % topical 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	
infant's ibuprofen 50 mg/1.25 ml oral drops,suspension	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
infant's pain relief 80 mg/0.8 ml oral drops,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 ASPAR PROT-INSULIN ASPART 100 UNIT/ML (70-30) SUBCUTANEOUS PEN	1	
INSULIN ASPAR PRT-INSULIN ASPART 100 UNIT/ML (70-30) SUBCUTANEOUS SOLN	1	
INSULIN GLARGINE (U-100) 100 UNIT/ML (3 ML) SUBCUTANEOUS PEN	1	
INSULIN GLARGINE (U-100) 100 UNIT/ML SUBCUTANEOUS SOLUTION	1	
INSULIN GLARGINE-YFGN (U-100) 100 UNIT/ML (3 ML) SUBCUTANEOUS PEN	1	
INSULIN GLARGINE-YFGN (U-100) 100 UNIT/ML SUBCUTANEOUS SOLUTION	1	
INSULIN LISPRO PROTAMINE-LISPRO 100 UNIT/ML (75-25) SUBCUTANEOUS PEN	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)
INTELISWAB COVID-19 RAPID HOME TEST KIT[CE]	1	
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 10 MILLION UNIT/ML INJECTION SOLUTION	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 50 MILLION UNIT (1 ML) SOLUTION FOR INJECTION	1	PA,QL(12 per 30 days)
INTRON A 6 MILLION UNIT/ML INJECTION SOLUTION	1	PA,QL(136.8 per 30 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)
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/0.88 ML INTRAMUSCULAR SYRINGE	1	QL(0.88 per 90 days)
INVEGA TRINZA 410 MG/1.32 ML INTRAMUSCULAR SYRINGE	1	QL(1.32 per 90 days)
INVEGA TRINZA 546 MG/1.75 ML INTRAMUSCULAR SYRINGE	1	QL(1.75 per 90 days)
INVEGA TRINZA 819 MG/2.63 ML INTRAMUSCULAR SYRINGE	1	QL(2.63 per 90 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
INVIRASE 500 MG TABLET	1	QL(120 per 30 days)
ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 ml nebulization soln	1	
ipratropium bromide 0.02 % solution for inhalation	1	
ipratropium bromide 21 mcg (0.03 %) nasal spray	1	QL(30 per 30 days)
ipratropium bromide 42 mcg (0.06 %) nasal spray	1	QL(45 per 30 days)
irbesartan 150 mg tablet[EDS]	1	QL(30 per 30 days)
irbesartan 150 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	QL(60 per 30 days)
irbesartan 300 mg tablet[EDS]	1	QL(30 per 30 days)
irbesartan 300 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
irbesartan 75 mg tablet[EDS]	1	QL(30 per 30 days)
iron 325 mg (65 mg iron) 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 oral solution	1	
isosorbide dinitrate 10 mg tablet	1	
isosorbide dinitrate 20 mg tablet	1	
isosorbide dinitrate 30 mg tablet	1	
isosorbide dinitrate 40 mg tablet	1	
isosorbide dinitrate 5 mg tablet	1	
isosorbide mononitrate 10 mg tablet[EDS]	1	
isosorbide mononitrate 20 mg tablet[EDS]	1	
isosorbide mononitrate er 120 mg tablet,extended release 24 hr[EDS]	1	
isosorbide mononitrate er 30 mg tablet,extended release 24 hr[EDS]	1	
isosorbide mononitrate er 60 mg tablet,extended release 24 hr[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	
itraconazole 10 mg/ml oral 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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
kelnor 1-50 (28) 1 mg-50 mcg tablet[CE]	1	
kelnor 1/35 (28) 1 mg-35 mcg tablet[CE]	1	
ketoconazole 2 % shampoo	1	
ketoconazole 2 % topical cream	1	
ketoconazole 200 mg tablet	1	
ketoprofen 25 mg capsule	1	
ketoprofen 50 mg capsule	1	
ketoprofen 75 mg capsule	1	
ketorolac 0.4 % eye drops	1	
ketorolac 0.5 % eye drops	1	
ketorolac 10 mg tablet	1	QL(20 per 30 days)
ketotifen 0.025 % (0.035 %) 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 (with sorbitol) 15 gram-19.3 gram/60 ml oral 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	
l norgest/e estradiol-e estrad 0.10 mg-20 mcg (84)/10 mcg(7) tabs,3mos[CE]	1	QL(91 per 90 days)
l norgest/e estradiol-e estrad 0.15 mg-30 mcg (84)/10 mcg(7) tabs,3mos[CE]	1	QL(91 per 90 days)
l norgest/ee 0.15-0.02mg/0.15-0.025mg/0.15-0.03mg/ee 0.01 mg tabs,3mo[CE]	1	QL(91 per 90 days)
l-methylfolate 15 mg tablet	1	
l-methylfolate 7.5 mg tablet	1	
l.norgest-eth.estradiol triphasic 50-30 (6)/75-40(5)/125-30(10) tablet[CE]	1	
labetalol 100 mg tablet	1	
labetalol 200 mg tablet	1	
labetalol 300 mg tablet	1	
lactulose 10 gram/15 ml (15 ml) oral solution	1	
lactulose 10 gram/15 ml oral solution	1	
lactulose 20 gram/30 ml oral solution	1	
LAGEVRIO 200 MG CAPSULE (EUA)	1	QL(40 per 5 days)
lamivudine 10 mg/ml oral solution	1	QL(960 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
lamivudine 100 mg tablet	1	QL(90 per 30 days)
lamivudine 150 mg tablet	1	QL(60 per 30 days)
lamivudine 150 mg-zidovudine 300 mg tablet	1	QL(60 per 30 days)
lamivudine 300 mg tablet	1	QL(30 per 30 days)
lamotrigine 100 mg tablet[EDS]	1	
lamotrigine 150 mg tablet[EDS]	1	
lamotrigine 200 mg tablet[EDS]	1	
lamotrigine 25 mg (35) tablets in a dose pack	1	
lamotrigine 25 mg (42)-100 mg (7) tablets in a dose pack	1	
lamotrigine 25 mg (84)-100 mg (14) tablets in a dose pack	1	
lamotrigine 25 mg chewable dispersible tablet	1	QL(120 per 30 days)
lamotrigine 25 mg tablet[EDS]	1	
lamotrigine 5 mg chewable dispersible tablet	1	QL(150 per 30 days)
LAMPIT 120 MG TABLET	1	
LAMPIT 30 MG TABLET	1	
LANCETS	1	
LANCETS 21 GAUGE	1	
LANCETS 26 GAUGE	1	
LANCETS 28 GAUGE	1	
LANCETS 30 GAUGE	1	
LANCETS 33 GAUGE	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 DEVICE WITH LANCETS KIT	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	
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)
lenalidomide 10 mg capsule	1	PA,QL(28 per 28 days)
lenalidomide 15 mg capsule	1	PA,QL(28 per 28 days)
lenalidomide 2.5 mg capsule	1	PA,QL(28 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
lenalidomide 20 mg capsule	1	PA,QL(28 per 28 days)
lenalidomide 25 mg capsule	1	PA,QL(28 per 28 days)
lenalidomide 5 mg capsule	1	PA,QL(28 per 28 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 tablet	1	
leucovorin calcium 15 mg tablet	1	
leucovorin calcium 25 mg tablet	1	
leucovorin calcium 5 mg tablet	1	
LEUKERAN 2 MG TABLET	1	QL(480 per 30 days)
leuprolide 1 mg/0.2 ml subcutaneous kit	1	PA,QL(2.8 per 14 days)
leuprolide 1 mg/0.2 ml subcutaneous solution	1	PA,QL(2.8 per 14 days)
leuprolide 22.5 mg (3 month) intramuscular suspension	1	PA,QL(1 per 90 days)
levetiracetam 1,000 mg tablet	1	
levetiracetam 100 mg/ml oral solution[EDS]	1	QL(900 per 30 days)
levetiracetam 250 mg tablet[EDS]	1	
levetiracetam 500 mg tablet[EDS]	1	
levetiracetam 500 mg/5 ml (5 ml) oral solution	1	QL(900 per 30 days)
levetiracetam 750 mg tablet[EDS]	1	
levetiracetam er 500 mg tablet,extended release 24 hr	1	
levetiracetam er 750 mg tablet,extended release 24 hr	1	
levobunolol 0.5 % eye drops	1	QL(5 per 25 days)
levocarnitine (with sugar) 100 mg/ml oral solution	1	
levocarnitine 330 mg tablet	1	
levocetirizine 2.5 mg/5 ml oral solution	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 15 mg-algal oil 90.314 mg capsule	1	
levomefolate calcium 15 mg tablet	1	
levomefolate calcium 7.5 mg tablet	1	
levonest (28) 50-30 (6)/75-40(5)/125-30(10) tablet[CE]	1	
levonorgestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet[CE]	1	
levonorgestrel 0.15 mg-ethinyl estradiol 30 mcg tablets,3 mos pack(91)[CE]	1	QL(91 per 90 days)
levonorgestrel 1.5 mg tablet[CE]	1	
levonorgestrel-ethinyl estradiol 0.1 mg-20 mcg tablet[CE]	1	
levonorgestrel-ethinyl estradiol 90 mcg-20 mcg (28) 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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
lice treatment 0.33 %-4 % shampoo	1	
lice treatment 1 % topical liquid	1	
lidocaine 2 % mucosal jelly in applicator	1	
lidocaine 4 % topical cream	1	
lidocaine 5 % topical patch	1	PA,QL(90 per 30 days)
lidocaine hcl 2 % mucosal jelly	1	
lidocaine hcl 2 % mucosal solution	1	
lidocaine viscous 2 % mucosal solution	1	
lidocaine-prilocaine 2.5 %-2.5 % topical cream	1	
lillow (28) 0.15 mg-0.03 mg tablet[CE]	1	
lindane 1 % shampoo	1	
linezolid 100 mg/5 ml oral suspension	1	QL(1800 per 30 days)
linezolid 600 mg tablet	1	QL(30 per 30 days)
liothyronine 25 mcg tablet	1	
liothyronine 5 mcg tablet	1	
liothyronine 50 mcg tablet	1	
liquituss gg 200 mg/5 ml oral liquid	1	
lisinopril 10 mg tablet[EDS]	1	
lisinopril 10 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
lisinopril 2.5 mg tablet[EDS]	1	
lisinopril 20 mg tablet[EDS]	1	
lisinopril 20 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
lisinopril 20 mg-hydrochlorothiazide 25 mg tablet[EDS]	1	
lisinopril 30 mg tablet[EDS]	1	
lisinopril 40 mg tablet[EDS]	1	
lisinopril 5 mg tablet[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 carbonate 150 mg capsule[EDS]	1	
lithium carbonate 300 mg capsule[EDS]	1	
lithium carbonate 300 mg tablet[EDS]	1	
lithium carbonate 600 mg capsule[EDS]	1	
lithium carbonate er 300 mg tablet,extended release[EDS]	1	
lithium carbonate er 450 mg tablet,extended release[EDS]	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
lopinavir-ritonavir 100 mg-25 mg tablet	1	QL(300 per 30 days)
lopinavir-ritonavir 200 mg-50 mg tablet	1	QL(150 per 30 days)
lopinavir-ritonavir 400 mg-100 mg/5 ml oral solution	1	
lorata-dine d 10 mg-240 mg tablet,extended release	1	
loratadine 10 mg disintegrating tablet	1	
loratadine 10 mg tablet	1	
loratadine 5 mg/5 ml oral solution	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 concentrate	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 100 mg tablet[EDS]	1	QL(60 per 30 days)
losartan 100 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	QL(60 per 30 days)
losartan 100 mg-hydrochlorothiazide 25 mg tablet[EDS]	1	QL(60 per 30 days)
losartan 25 mg tablet[EDS]	1	QL(60 per 30 days)
losartan 50 mg tablet[EDS]	1	QL(60 per 30 days)
losartan 50 mg-hydrochlorothiazide 12.5 mg tablet[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 succinate 10 mg capsule	1	
loxapine succinate 25 mg capsule	1	
loxapine succinate 5 mg capsule	1	
loxapine succinate 50 mg capsule	1	
lubricant eye (pg-peg 400) (pf) 0.4 %-0.3 % drops in a dropperette	1	
lubricant eye (pg-peg 400) 0.4 %-0.3 % drops	1	
lubricant eye drops 0.5 %	1	
lubricant eye drops 0.5 % drops in a dropperette	1	
lubricating plus 0.5 % eye drops in a dropperette	1	
LUCIRA CHECK-IT COVID-19 HOME TEST KIT[CE]	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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
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 oral solution	1	
magnesium hydroxide 400 mg/5 ml oral suspension	1	
mapap (acetaminophen) 500 mg capsule	1	
maraviroc 150 mg tablet	1	QL(240 per 30 days)
maraviroc 300 mg tablet	1	QL(120 per 30 days)
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 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 tablet	1	
medroxyprogesterone 150 mg/ml intramuscular suspension[CE]	1	QL(1 per 90 days)
medroxyprogesterone 150 mg/ml intramuscular syringe[CE]	1	QL(1 per 90 days)
medroxyprogesterone 2.5 mg tablet	1	
medroxyprogesterone 5 mg tablet	1	
mefloquine 250 mg tablet	1	
megestrol 20 mg tablet	1	
megestrol 40 mg tablet	1	
megestrol 400 mg/10 ml (10 ml) oral suspension	1	
megestrol 400 mg/10 ml (40 mg/ml) oral suspension	1	
MEKTOVI 15 MG TABLET	1	PA,QL(180 per 30 days)
melodetta 24 fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet[CE]	1	
meloxicam 15 mg tablet	1	QL(30 per 30 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
meloxicam 7.5 mg tablet	1	QL(60 per 30 days)
melphalan 2 mg tablet	1	QL(80 per 30 days)
memantine 10 mg tablet[EDS]	1	QL(60 per 30 days)
memantine 2 mg/ml oral solution	1	QL(360 per 30 days)
memantine 5 mg tablet[EDS]	1	QL(60 per 30 days)
memantine 5 mg-10 mg tablets in a dose pack	1	QL(98 per 30 days)
meperidine 50 mg tablet	1	QL(480 per 30 days)
meperidine 50 mg/5 ml oral solution	1	QL(720 per 30 days)
mercaptopurine 50 mg tablet	1	QL(480 per 30 days)
mesalamine 4 gram/60 ml enema	1	QL(1800 per 30 days)
mesalamine er 0.375 gram capsule,extended release 24 hr	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 oral syrup	1	
metformin 1,000 mg tablet[EDS]	1	
metformin 500 mg tablet[EDS]	1	
metformin 850 mg tablet[EDS]	1	
metformin er 500 mg tablet,extended release 24 hr[EDS]	1	QL(120 per 30 days)
metformin er 750 mg tablet,extended release 24 hr[EDS]	1	QL(60 per 30 days)
methadone 10 mg tablet	1	QL(240 per 30 days)
methadone 10 mg/5 ml oral solution	1	QL(1800 per 30 days)
methadone 10 mg/ml oral concentrate	1	QL(360 per 30 days)
methadone 5 mg tablet	1	QL(480 per 30 days)
methadone 5 mg/5 ml oral solution	1	QL(3600 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 sodium (pf) 25 mg/ml injection solution	1	
methotrexate sodium 2.5 mg tablet	1	
methotrexate sodium 25 mg/ml injection solution	1	
methyldopa 250 mg tablet[EDS]	1	
methyldopa 500 mg tablet[EDS]	1	
methylergonovine 0.2 mg tablet	1	
methylphenidate 10 mg chewable tablet	1	QL(180 per 30 days)
methylphenidate 10 mg tablet	1	QL(90 per 30 days)
methylphenidate 10 mg/5 ml oral solution	1	QL(900 per 30 days)
methylphenidate 2.5 mg chewable tablet	1	QL(150 per 30 days)
methylphenidate 20 mg tablet	1	QL(90 per 30 days)
methylphenidate 5 mg chewable tablet	1	QL(150 per 30 days)
methylphenidate 5 mg tablet	1	QL(90 per 30 days)
methylphenidate 5 mg/5 ml oral solution	1	QL(1800 per 30 days)
methylphenidate cd 10 mg biphasic 30-70 capsule,extended release	1	QL(30 per 30 days)
methylphenidate cd 20 mg biphasic 30-70 capsule,extended release	1	QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
methylphenidate cd 30 mg biphasic 30-70 capsule,extended release	1	QL(60 per 30 days)
methylphenidate er 10 mg tablet,extended release	1	QL(180 per 30 days)
methylphenidate er 18 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
methylphenidate er 20 mg tablet,extended release	1	QL(90 per 30 days)
methylphenidate er 27 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
methylphenidate er 36 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
methylphenidate er 54 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
methylphenidate er 72 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
methylphenidate la 10 mg biphasic 50-50 capsule,extended release	1	QL(30 per 30 days)
methylphenidate la 20 mg biphasic 50-50 capsule,extended release	1	QL(30 per 30 days)
methylphenidate la 30 mg biphasic 50-50 capsule,extended release	1	QL(60 per 30 days)
methylphenidate la 40 mg biphasic 50-50 capsule,extended release	1	QL(30 per 30 days)
methylprednisolone 16 mg tablet	1	
methylprednisolone 32 mg tablet	1	
methylprednisolone 4 mg tablet	1	
methylprednisolone 4 mg tablets in a dose pack	1	
methylprednisolone 8 mg tablet	1	
metipranolol 0.3 % eye drops	1	
metoclopramide 10 mg tablet	1	
metoclopramide 5 mg tablet	1	
metoclopramide 5 mg/5 ml oral solution	1	
metolazone 10 mg tablet	1	
metolazone 2.5 mg tablet	1	
metolazone 5 mg tablet	1	
metoprolol succinate er 100 mg tablet,extended release 24 hr[EDS]	1	QL(60 per 30 days)
metoprolol succinate er 200 mg tablet,extended release 24 hr[EDS]	1	QL(60 per 30 days)
metoprolol succinate er 25 mg tablet,extended release 24 hr[EDS]	1	QL(90 per 30 days)
metoprolol succinate er 50 mg tablet,extended release 24 hr[EDS]	1	QL(60 per 30 days)
metoprolol tartrate 100 mg tablet[EDS]	1	
metoprolol tartrate 100 mg-hydrochlorothiazide 25 mg tablet	1	
metoprolol tartrate 100 mg-hydrochlorothiazide 50 mg tablet	1	
metoprolol tartrate 25 mg tablet[EDS]	1	
metoprolol tartrate 37.5 mg tablet[EDS]	1	
metoprolol tartrate 50 mg tablet[EDS]	1	
metoprolol tartrate 50 mg-hydrochlorothiazide 25 mg tablet	1	
metoprolol tartrate 75 mg tablet[EDS]	1	
metronidazole 0.75 % (37.5 mg/5 gram) vaginal gel	1	
metronidazole 0.75 % topical cream	1	
metronidazole 0.75 % topical gel	1	
metronidazole 250 mg tablet	1	
metronidazole 500 mg tablet	1	
mexiletine 150 mg capsule	1	
mexiletine 200 mg capsule	1	
mexiletine 250 mg capsule	1	
mi-acid 200 mg-200 mg-20 mg/5 ml oral suspension	1	
mibelas 24 fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet[CE]	1	
miconazole nitrate 2 % topical cream	1	
miconazole nitrate 2 % vaginal cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
miconazole nitrate 4 % (200 mg)-2 % (9 gram)vaginal,prefill appl,cream	1	
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 10 mg tablet	1	
midodrine 2.5 mg tablet	1	
midodrine 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	
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	
minoxidil 10 mg tablet	1	
minoxidil 2.5 mg tablet[EDS]	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	
modafinil 100 mg tablet	1	PA,QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
modafinil 200 mg tablet	1	PA,QL(60 per 30 days)
MODERNA COVID-19 (12 YR UP) VACCINE (PF) 100 MCG/0.5 ML IM SUSP (EUA)[CE]	1	
MODERNA COVID-19 BIVALENT BOOST(6MO-5Y)(PF) 10 MCG/0.2 ML IM SUSP(EUA)	1	
MODERNA COVID-19 BIVALENT BOOST(6YR UP)(PF) 50 MCG/0.5 ML IM SUSP(EUA)	1	
MODERNA COVID-19 VACC (6-11YR PRIMARY)(PF) 50 MCG/0.5 ML IM SUSP (EUA)	1	
MODERNA COVID-19 VACCINE(6MO-5YR)(PF) 25 MCG/0.25 ML IM SUSP (EUA)	1	
moexipril 15 mg tablet	1	
moexipril 7.5 mg tablet	1	
mometasone 0.1 % topical cream	1	
mometasone 0.1 % topical ointment	1	
mometasone 0.1 % topical solution	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
montelukast 10 mg tablet	1	QL(30 per 30 days)
montelukast 4 mg chewable tablet	1	QL(30 per 30 days)
montelukast 4 mg oral granules in packet	1	QL(30 per 30 days)
montelukast 5 mg chewable tablet	1	QL(30 per 30 days)
morgidox 100 mg capsule	1	QL(90 per 30 days)
morgidox 50 mg capsule	1	
morphine 10 mg/5 ml oral solution	1	QL(2700 per 30 days)
morphine 15 mg immediate release tablet	1	QL(180 per 30 days)
morphine 20 mg/5 ml (4 mg/ml) oral solution	1	QL(1350 per 30 days)
morphine 30 mg immediate release tablet	1	QL(180 per 30 days)
morphine concentrate 100 mg/5 ml (20 mg/ml) oral solution	1	QL(540 per 30 days)
morphine er 100 mg tablet,extended release	1	QL(180 per 30 days)
morphine er 15 mg tablet,extended release	1	QL(120 per 30 days)
morphine er 200 mg tablet,extended release	1	QL(90 per 30 days)
morphine er 30 mg tablet,extended release	1	QL(120 per 30 days)
morphine er 60 mg tablet,extended release	1	QL(120 per 30 days)
MOUTHPIECE DEVICE	1	
MOVANTIK 12.5 MG TABLET	1	QL(30 per 30 days)
MOVANTIK 25 MG TABLET	1	QL(30 per 30 days)
moxifloxacin 400 mg tablet	1	
MUCINEX 600 MG TABLET, EXTENDED RELEASE	1	
mucinex fast-max chest congestion 100 mg/5 ml oral liquid	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-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	
multi-vitamin-fluoride (vit e acetate) 0.25 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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
mupirocin 2 % topical ointment	1	
my choice 1.5 mg tablet[CE]	1	
my way 1.5 mg tablet[CE]	1	
mycophenolate mofetil 200 mg/ml oral suspension	1	
mycophenolate mofetil 250 mg capsule	1	QL(360 per 30 days)
mycophenolate mofetil 500 mg tablet	1	QL(180 per 30 days)
mycophenolate sodium 180 mg tablet,delayed release	1	
mycophenolate sodium 360 mg tablet,delayed release	1	
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 injection solution	1	
naloxone 0.4 mg/ml injection syringe	1	
naloxone 1 mg/ml injection syringe	1	
naloxone 4 mg/actuation nasal spray	1	QL(2 per 30 days)
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 375 mg tablet,delayed release	1	
naproxen 500 mg tablet	1	
naproxen 500 mg tablet,delayed release	1	
naproxen sodium 220 mg tablet	1	
naratriptan 1 mg tablet	1	QL(9 per 30 days)
naratriptan 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 decongestant (phenylephrine) 10 mg tablet	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	
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	
neomycin 1.75 mg-polymyxin 10,000 unit-gramicidin 0.025mg/ml eye drops	1	
neomycin 3.5 mg-polymyxin 10,000 unit-hydrocort 10 mg/ml eye drop,susp	1	
neomycin 3.5 mg/g-polymyxin b 10,000 unit/g-dexameth 0.1 % eye oint	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
neomycin 500 mg tablet	1	
neomycin-bacitracin-poly-hc 3.5 mg-400-10,000 unit/g-1 % eye ointment	1	
neomycin-bacitracin-polymyxn 3.5 mg-400 unit-10,000 unit/gram eye oint	1	
neomycin-polymyxin-dexameth 3.5 mg/ml-10,000 unit/ml-0.1% eye drops	1	
neomycin-polymyxin-hydrocort 3.5 mg-10,000 unit/ml-1 % ear drops,susp	1	
neomycin-polymyxin-hydrocort 3.5 mg/ml-10,000 unit/ml-1 % ear solution	1	
nevirapine 200 mg tablet	1	QL(60 per 30 days)
nevirapine 50 mg/5 ml oral suspension	1	QL(1200 per 30 days)
nevirapine er 100 mg tablet,extended release 24 hr	1	QL(120 per 30 days)
nevirapine er 400 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
new day 1.5 mg tablet[CE]	1	
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 (polacrilex) 2 mg buccal lozenge[CE]	1	
nicotine (polacrilex) 2 mg buccal mini lozenge[CE]	1	
nicotine (polacrilex) 2 mg gum[CE]	1	
nicotine (polacrilex) 4 mg buccal lozenge[CE]	1	
nicotine (polacrilex) 4 mg buccal mini lozenge[CE]	1	
nicotine (polacrilex) 4 mg gum[CE]	1	
nicotine 14 mg/24 hr daily transdermal patch[CE]	1	
nicotine 21 mg/24 hr daily transdermal patch[CE]	1	
nicotine 21mg/24hr-14mg/24hr-7mg/24hr daily transderm patches,sequentl[CE]	1	
nicotine 7 mg/24 hr daily transdermal patch[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,extended release	1	QL(60 per 30 days)
nifedipine er 30 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
nifedipine er 60 mg tablet,extended release	1	QL(60 per 30 days)
nifedipine er 60 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
nifedipine er 90 mg tablet,extended release	1	QL(60 per 30 days)
nifedipine er 90 mg tablet,extended release 24 hr	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	
nitrofurantoin 25 mg/5 ml oral suspension	1	QL(2400 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
nitrofurantoin macrocrystal 100 mg capsule	1	
nitrofurantoin macrocrystal 50 mg capsule	1	
nitrofurantoin monohydrate/macrocrystals 100 mg capsule	1	
nitroglycerin 0.1 mg/hr transdermal 24 hour patch[EDS]	1	QL(30 per 30 days)
nitroglycerin 0.2 mg/hr transdermal 24 hour patch[EDS]	1	QL(30 per 30 days)
nitroglycerin 0.3 mg sublingual tablet	1	
nitroglycerin 0.4 mg sublingual tablet	1	
nitroglycerin 0.4 mg/hr transdermal 24 hour patch[EDS]	1	QL(60 per 30 days)
nitroglycerin 0.6 mg sublingual tablet	1	
nitroglycerin 0.6 mg/hr transdermal 24 hour 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)
nizatidine 150 mg capsule	1	
nizatidine 150 mg/10 ml oral solution	1	
nizatidine 300 mg capsule	1	
non-aspirin pain relief 500 mg tablet	1	
nora-be 0.35 mg tablet[CE]	1	
norethin-ethinyl estradiol-iron 0.4 mg-35 mcg(21)/75 mg(7) chew tablet[CE]	1	
norethin-ethinyl estradiol-iron 0.8 mg-25 mcg(24)/75 mg(4) chew tablet[CE]	1	
norethindrone (contraceptive) 0.35 mg tablet[CE]	1	
norethindrone 1 mg-e. estradiol 20 mcg (24)-iron 75 mg (4) chew tablet[CE]	1	
norethindrone 1 mg-ethinyl estradiol 20 mcg (21)-iron 75 mg (7) tablet[CE]	1	
norethindrone 1.5 mg-ethinyl estradiol 30 mcg(21)/iron 75 mg(7) tablet[CE]	1	
norethindrone acetate 0.5 mg-ethinyl estradiol 2.5 mcg tablet	1	
norethindrone acetate 1 mg-ethinyl estradiol 20 mcg tablet[CE]	1	
norethindrone acetate 1 mg-ethinyl estradiol 5 mcg tablet	1	
norethindrone acetate 1.5 mg-ethinyl estradiol 30 mcg tablet[CE]	1	
norethindrone acetate 5 mg tablet	1	
norethindrone-eth. estradiol-iron 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet[CE]	1	
norgestimate 0.18 mg/0.215 mg/0.25 mg-ethinyl estradiol 25 mcg tablet[CE]	1	
norgestimate 0.25 mg-ethinyl estradiol 35 mcg tablet[CE]	1	
norgestimate-ethinyl estradiol 0.18 mg/0.215mg/0.25mg-35 mcg(28)tablet[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 capsule	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
nortriptyline 10 mg/5 ml oral solution	1	
nortriptyline 25 mg capsule	1	
nortriptyline 50 mg capsule	1	
nortriptyline 75 mg capsule	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	
NOVAVAX COVID-19 VACCINE,ADJUVANTED (PF) 5 MCG/0.5 ML IM SUSPEN (EUA)	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	
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	
NU-IRON 150 MG IRON CAPSULE	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 1/35 (28) 1 mg-35 mcg tablet[CE]	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/gram topical cream	1	
nystatin 100,000 unit/gram topical ointment	1	
nystatin 100,000 unit/gram topical powder	1	
nystatin 100,000 unit/ml oral suspension	1	
nystatin 500,000 unit tablet	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	
octreotide acetate 1,000 mcg/ml injection solution	1	PA
octreotide acetate 100 mcg/ml (1 ml) injection syringe	1	PA
octreotide acetate 100 mcg/ml injection solution	1	PA
octreotide acetate 200 mcg/ml injection solution	1	PA

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
octreotide acetate 50 mcg/ml (1 ml) injection syringe	1	PA
octreotide acetate 50 mcg/ml injection solution	1	PA
octreotide acetate 500 mcg/ml (1 ml) injection syringe	1	PA
octreotide acetate 500 mcg/ml injection solution	1	PA
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	
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 20 mg tablet[EDS]	1	QL(30 per 30 days)
olmesartan 20 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
olmesartan 40 mg tablet[EDS]	1	QL(30 per 30 days)
olmesartan 40 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
olmesartan 40 mg-hydrochlorothiazide 25 mg tablet	1	QL(30 per 30 days)
olmesartan 5 mg tablet[EDS]	1	QL(30 per 30 days)
olopatadine 0.1 % eye drops	1	
omega-3 acid ethyl esters 1 gram capsule	1	PA,QL(120 per 30 days)
omeprazole 10 mg capsule,delayed release	1	QL(60 per 30 days)
omeprazole 20 mg capsule,delayed release	1	QL(60 per 30 days)
omeprazole 40 mg capsule,delayed release	1	QL(60 per 30 days)
OMNIFLEX DIAPHRAGM 65 MM VAGINAL[CE]	1	
OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE WITH CONTROLLER	1	
OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	1	
OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE	1	
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE WITH CONTROLLER	1	
OMNIPOD DASH PDM KIT (GEN 4)	1	
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	1	
OMNITROPE 10 MG/1.5 ML (6.7 MG/ML) SUBCUTANEOUS CARTRIDGE	1	PA,QL(12 per 28 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 4 mg disintegrating tablet	1	QL(90 per 30 days)
ondansetron 8 mg disintegrating tablet	1	QL(90 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)
ONE WAY VALVED MOUTHPIECE DEVICE	1	
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)
ORKAMBI 75 MG-94 MG ORAL GRANULES IN PACKET	1	PA,QL(56 per 28 days)
orphenadrine citrate er 100 mg tablet,extended release	1	
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 30 mg capsule	1	QL(224 per 365 days)
oseltamivir 45 mg capsule	1	QL(112 per 365 days)
oseltamivir 6 mg/ml oral suspension	1	QL(1440 per 365 days)
oseltamivir 75 mg capsule	1	QL(112 per 365 days)
oxcarbazepine 150 mg tablet	1	
oxcarbazepine 300 mg tablet	1	
oxcarbazepine 300 mg/5 ml (60 mg/ml) oral suspension	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
oxcarbazepine 600 mg tablet	1	
oxybutynin chloride 5 mg tablet	1	
oxybutynin chloride 5 mg/5 ml oral syrup	1	
oxybutynin chloride er 10 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
oxybutynin chloride er 15 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
oxybutynin chloride er 5 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
oxycodone 10 mg tablet	1	QL(360 per 30 days)
oxycodone 15 mg tablet	1	QL(360 per 30 days)
oxycodone 20 mg tablet	1	QL(360 per 30 days)
oxycodone 20 mg/ml oral concentrate	1	QL(270 per 30 days)
oxycodone 30 mg tablet	1	QL(360 per 30 days)
oxycodone 5 mg capsule	1	QL(360 per 30 days)
oxycodone 5 mg tablet	1	QL(360 per 30 days)
oxycodone 5 mg/5 ml oral solution	1	QL(5400 per 30 days)
oxycodone-acetaminophen 10 mg-325 mg tablet	1	QL(360 per 30 days)
oxycodone-acetaminophen 2.5 mg-325 mg tablet	1	QL(360 per 30 days)
oxycodone-acetaminophen 5 mg-325 mg tablet	1	QL(360 per 30 days)
oxycodone-acetaminophen 5 mg-325 mg/5 ml oral solution	1	QL(1800 per 30 days)
oxycodone-acetaminophen 7.5 mg-325 mg tablet	1	QL(360 per 30 days)
oysco 500/d 500 mg-5 mcg (200 unit) 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-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)
OZEMPIC 2 MG/DOSE (8 MG/3 ML) SUBCUTANEOUS PEN INJECTOR	1	QL(3 per 28 days)
pacerone 200 mg tablet[EDS]	1	
pain relief (acetaminophen) 325 mg tablet	1	
pain relief (acetaminophen) 500 mg tablet	1	
pain relief extra strength (acetaminophen) 500 mg tablet	1	
pain reliever (acetaminophen) 325 mg tablet	1	
pain reliever (acetaminophen) 500 mg tablet	1	
pain reliever extra strength (acetaminophen) 500 mg tablet	1	
paliperidone er 1.5 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
paliperidone er 3 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
paliperidone er 6 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
paliperidone er 9 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
PANDA MASK	1	
PANRETIN 0.1 % TOPICAL GEL	1	
pantoprazole 20 mg tablet,delayed release	1	QL(60 per 30 days)
pantoprazole 40 mg tablet,delayed release	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 10 mg tablet[EDS]	1	QL(30 per 30 days)
paroxetine 20 mg tablet[EDS]	1	QL(30 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
paroxetine 30 mg tablet[EDS]	1	QL(60 per 30 days)
paroxetine 40 mg tablet[EDS]	1	QL(60 per 30 days)
PAXLOVID 150 MG-100 MG TABLETS IN A DOSE PACK (RENAL DOSE)(EUA)	1	QL(40 per 10 days)
PAXLOVID 300 MG (150 MG X 2)-100 MG TABLETS IN A DOSE PACK (EUA)	1	QL(60 per 10 days)
PEDIALYTE FREEZER POPS ORAL SOLUTION	1	
PEDIALYTE ORAL SOLUTION	1	
PEDIALYTE SINGLES ORAL SOLUTION	1	
pediatric electrolyte oral solution	1	
PEDIATRIC MEDIUM MASK	1	
PEDIATRIC PANDA MASK	1	
PEDIATRIC SMALL MASK	1	
peg 3350-electrolytes 236 gram-22.74 gram-6.74 gram-5.86 gram solution	1	
peg-electrolyte solution 420 gram oral solution	1	
PEGINTRON 50 MCG/0.5 ML SUBCUTANEOUS KIT	1	PA,QL(4 per 28 days)
PEMAZYRE 13.5 MG TABLET	1	PA,QL(28 per 28 days)
PEMAZYRE 4.5 MG TABLET	1	PA,QL(28 per 28 days)
PEMAZYRE 9 MG TABLET	1	PA,QL(28 per 28 days)
penicillamine 250 mg tablet	1	
penicillin v potassium 125 mg/5 ml oral solution	1	
penicillin v potassium 250 mg tablet	1	
penicillin v potassium 250 mg/5 ml oral solution	1	
penicillin v potassium 500 mg tablet	1	
pentamidine 300 mg solution for inhalation	1	
pentoxifylline er 400 mg tablet,extended release	1	
peptic relief 262 mg chewable tablet	1	
perindopril erbumine 2 mg tablet	1	
perindopril erbumine 4 mg tablet	1	
perindopril erbumine 8 mg tablet	1	
permethrin 5 % topical cream	1	
perphenazine 16 mg tablet	1	
perphenazine 2 mg tablet	1	
perphenazine 4 mg tablet	1	
perphenazine 8 mg tablet	1	
perphenazine-amitriptyline 2 mg-10 mg tablet	1	
perphenazine-amitriptyline 2 mg-25 mg tablet	1	
perphenazine-amitriptyline 4 mg-10 mg tablet	1	
perphenazine-amitriptyline 4 mg-25 mg tablet	1	
perphenazine-amitriptyline 4 mg-50 mg tablet	1	
PERSERIS 120 MG ABDOMINAL SUBCUTANEOUS EXT. RELEASE SUSPENSION SYRINGE	1	QL(1 per 28 days)
PERSERIS 90 MG ABDOMINAL SUBCUTANEOUS EXT. RELEASE SUSPENSION SYRINGE	1	QL(1 per 28 days)
PFIZER COVID-19 BIVALENT BOOST(12Y UP)(PF) 30 MCG/0.3 ML IM SUSP (EUA)	1	
PFIZER COVID-19 BIVALENT BOOST(5-11YR)(PF) 10 MCG/0.2 ML IM SUSP(EUA)	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
PFIZER COVID-19 BIVALENT VACCINE(6MO-4Y)(PF) 3 MCG/0.2 ML IM SUSP(EUA)	1	
PFIZER-BIONT COVID19 TRIS (12Y UP) VACC(PF)30 MCG/0.3 ML IM SUSP(GRAY)	1	
PFIZER-BIONT COVID19 TRIS(5-11Y) VACC(PF)10 MCG/0.2 ML IM SUSP(ORANGE)	1	
PFIZER-BIONT COVID19 TRIS(6M-4Y) VACC(PF) 3 MCG/0.2 ML IM SUSP(MAROON)	1	
PFIZER-BIONTECH COVID-19 VACCINE (PF) 30 MCG/0.3 ML IM SUSP (PURPLE)[CE]	1	
pharbechlor 4 mg tablet	1	
pharbedryl 25 mg capsule	1	
pharbedryl 50 mg capsule	1	
pharbetol 325 mg tablet	1	
pharbetol 500 mg tablet	1	
PHASEAL PROTECTOR 13 MM DEVICE	1	
PHASEAL PROTECTOR 20 MM DEVICE	1	
PHASEAL PROTECTOR 28 MM DEVICE	1	
phenazopyridine 100 mg tablet	1	
phenelzine 15 mg tablet	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 (4 mg/ml) oral elixir	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)
phenylephrine 10 mg tablet	1	
phenytoin 100 mg/4 ml oral suspension	1	
phenytoin 125 mg/5 ml oral suspension	1	
phenytoin 50 mg chewable tablet	1	
phenytoin sodium extended 100 mg capsule	1	
phenytoin sodium extended 200 mg capsule	1	
phenytoin sodium extended 300 mg capsule	1	
philith 0.4 mg-35 mcg tablet[CE]	1	
phospha neutral 250 mg tablet	1	
phytonadione (vitamin k1) 1 mg/0.5 ml injection solution	1	
phytonadione (vitamin k1) 1 mg/0.5 ml injection syringe	1	
phytonadione (vitamin k1) 10 mg/ml injection solution	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 5 mg tablet	1	
pilocarpine 7.5 mg tablet	1	
PILOT COVID-19 AT-HOME TEST KIT	1	
pimecrolimus 1 % topical cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 chewable tablet	1	
pink bismuth 262 mg tablet	1	
pink bismuth 262 mg/15 ml oral suspension	1	
pioglitazone 15 mg tablet[EDS]	1	QL(30 per 30 days)
pioglitazone 30 mg tablet[EDS]	1	QL(30 per 30 days)
pioglitazone 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 AND 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)
pirfenidone 267 mg tablet	1	PA,QL(270 per 30 days)
pirfenidone 534 mg tablet	1	PA,QL(90 per 30 days)
pirfenidone 801 mg tablet	1	PA,QL(90 per 30 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	
POCKET CHAMBER SPACER	1	
podofilox 0.5 % topical solution	1	
poly bacitracin (zinc) 500 unit-10,000 unit/gram topical ointment	1	
poly-iron 150 forte 150 mg-25 mcg-1 mg capsule	1	
poly-iron 150 mg iron capsule	1	
POLY-VI-SOL 250 MCG-50 MG-10 MCG/ML ORAL DROPS	1	
POLY-VI-SOL WITH IRON 11 MG IRON/ML ORAL DROPS	1	
polycin 500 unit-10,000 unit/gram eye ointment	1	
polyethylene glycol 3350 17 gram/dose oral powder	1	QL(1054 per 30 days)
polymyxin b sulfate 10,000 unit-trimethoprim 1 mg/ml eye drops	1	
polysaccharide iron complex 150 mg iron capsule	1	
polyvinyl alcohol 1.4 % eye drops	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 100 mg tablet,delayed release	1	PA,QL(93 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
potassium chloride 20 meq/15 ml oral liquid	1	
potassium chloride 40 meq/15 ml oral liquid	1	
potassium chloride er 10 meq capsule,extended release	1	
potassium chloride er 10 meq tablet,extended release	1	
potassium chloride er 10 meq tablet,extended release(part/cryst)	1	
potassium chloride er 20 meq tablet,extended release	1	
potassium chloride er 20 meq tablet,extended release(part/cryst)	1	
potassium chloride er 8 meq capsule,extended release	1	
potassium chloride er 8 meq tablet,extended release	1	
potassium citrate er 10 meq (1,080 mg) tablet,extended release	1	
potassium citrate er 15 meq (1,620 mg) tablet,extended release	1	
potassium citrate er 5 meq (540 mg) tablet,extended release	1	
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 10 mg tablet[EDS]	1	
pravastatin 20 mg tablet[EDS]	1	
pravastatin 40 mg tablet[EDS]	1	
pravastatin 80 mg tablet[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 oral solution	1	
prednisolone acetate 1 % eye drops,suspension	1	
prednisolone sodium phosphate 1 % eye drops	1	
prednisolone sodium phosphate 15 mg/5 ml (3 mg/ml) oral solution	1	
prednisolone sodium phosphate 25 mg/5 ml (5 mg/ml) oral solution	1	
prednisolone sodium phosphate 5 mg base/5 ml (6.7 mg/5 ml) oral soln	1	
prednisone 1 mg tablet	1	
prednisone 10 mg tablet	1	
prednisone 10 mg tablets in a dose pack	1	
prednisone 2.5 mg tablet	1	
prednisone 20 mg tablet	1	
prednisone 5 mg tablet	1	
prednisone 5 mg tablets in a dose pack	1	
prednisone 5 mg/5 ml oral 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 oral solution	1	QL(900 per 30 days)
pregabalin 200 mg capsule	1	QL(90 per 30 days)

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 19 29 mg iron-1 mg chewable tablet	1	
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	
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	
PRO COMFORT SPACER-INFANT MASK	1	
probenecid 500 mg tablet	1	
probenecid 500 mg-colchicine 0.5 mg tablet	1	
PROCARE SPACER WITH ADULT MASK	1	
PROCARE SPACER WITH CHILD MASK	1	
PROCHAMBER	1	
prochlorperazine 25 mg rectal suppository	1	
prochlorperazine maleate 10 mg tablet	1	
prochlorperazine maleate 5 mg tablet	1	
PROCRIT 10,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
PROCRIT 2,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
PROCRIT 20,000 UNIT/2 ML INJECTION SOLUTION	1	PA,QL(28 per 30 days)
PROCRIT 20,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
PROCRIT 3,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
PROCRIT 4,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
PROCRIT 40,000 UNIT/ML INJECTION SOLUTION	1	PA,QL(14 per 30 days)
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 micronized 100 mg capsule	1	
progesterone micronized 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 rectal suppository	1	
promethazine 12.5 mg tablet	1	
promethazine 25 mg rectal suppository	1	
promethazine 25 mg tablet	1	
promethazine 50 mg rectal suppository	1	
promethazine 50 mg tablet	1	
promethazine 6.25 mg-codeine 10 mg/5 ml syrup	1	
promethazine 6.25 mg/5 ml oral syrup	1	
promethazine-dm 6.25 mg-15 mg/5 ml oral syrup	1	
promethegan 12.5 mg rectal suppository	1	
promethegan 25 mg rectal suppository	1	
promethegan 50 mg rectal suppository	1	
propafenone 150 mg tablet	1	
propafenone 225 mg tablet	1	
propafenone 300 mg tablet	1	
propranolol 10 mg tablet[EDS]	1	
propranolol 20 mg tablet[EDS]	1	
propranolol 20 mg/5 ml (4 mg/ml) oral solution[EDS]	1	
propranolol 40 mg tablet[EDS]	1	
propranolol 40 mg-hydrochlorothiazide 25 mg tablet	1	
propranolol 40 mg/5 ml (8 mg/ml) oral solution	1	
propranolol 60 mg tablet	1	
propranolol 80 mg tablet	1	
propranolol 80 mg-hydrochlorothiazide 25 mg tablet	1	
propranolol er 120 mg capsule,24 hr,extended release	1	
propranolol er 160 mg capsule,24 hr,extended release	1	
propranolol er 60 mg capsule,24 hr,extended release	1	
propranolol er 80 mg capsule,24 hr,extended release	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
propylthiouracil 50 mg tablet	1	
protriptyline 10 mg tablet	1	
protriptyline 5 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 21 GAUGE	1	
PUSH BUTTON SAFETY LANCETS 28 GAUGE	1	
pyrazinamide 500 mg tablet	1	
pyridostigmine bromide 30 mg tablet	1	
pyridostigmine bromide 60 mg tablet	1	
pyridoxine (vitamin b6) 25 mg tablet	1	
PYRUKYND 20 MG (7)-5 MG (7) TABLETS IN A DOSE PACK	1	PA,QL(14 per 14 days)
PYRUKYND 20 MG TABLET	1	PA,QL(60 per 30 days)
PYRUKYND 5 MG TABLET	1	PA,QL(60 per 30 days)
PYRUKYND 50 MG (7)-20 MG (7) TABLETS IN A DOSE PACK	1	PA,QL(14 per 14 days)
PYRUKYND 50 MG TABLET	1	PA,QL(60 per 30 days)
QINLOCK 50 MG TABLET	1	PA,QL(90 per 30 days)
quetiapine 100 mg tablet[EDS]	1	QL(90 per 30 days)
quetiapine 150 mg tablet	1	QL(30 per 30 days)
quetiapine 200 mg tablet[EDS]	1	QL(120 per 30 days)
quetiapine 25 mg tablet[EDS]	1	QL(120 per 30 days)
quetiapine 300 mg tablet[EDS]	1	QL(60 per 30 days)
quetiapine 400 mg tablet[EDS]	1	QL(60 per 30 days)
quetiapine 50 mg tablet[EDS]	1	QL(120 per 30 days)
quetiapine er 150 mg tablet,extended release 24 hr	1	QL(90 per 30 days)
quetiapine er 200 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
quetiapine er 300 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
quetiapine er 400 mg tablet,extended release 24 hr	1	QL(60 per 30 days)
quetiapine er 50 mg tablet,extended release 24 hr	1	QL(120 per 30 days)
QUICKVUE AT-HOME COVID-19 TEST KIT[CE]	1	
quinapril 10 mg tablet[EDS]	1	
quinapril 10 mg-hydrochlorothiazide 12.5 mg tablet	1	
quinapril 20 mg tablet[EDS]	1	
quinapril 20 mg-hydrochlorothiazide 12.5 mg tablet[EDS]	1	
quinapril 20 mg-hydrochlorothiazide 25 mg tablet	1	
quinapril 40 mg tablet[EDS]	1	
quinapril 5 mg tablet[EDS]	1	
quinidine sulfate 200 mg tablet	1	
quinidine sulfate 300 mg tablet	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 60 mg tablet	1	QL(30 per 30 days)
ramipril 1.25 mg capsule[EDS]	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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,extended release,12 hr	1	QL(120 per 30 days)
ranolazine er 500 mg tablet,extended release,12 hr	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 THIN LANCETS 26 GAUGE	1	
RELION ULTRA THIN PLUS LANCETS	1	
repaglinide 0.5 mg tablet	1	
repaglinide 1 mg tablet	1	
repaglinide 2 mg tablet	1	
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	
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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
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 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)
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 oral 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 3 mg capsule[EDS]	1	QL(90 per 30 days)
rivastigmine 4.5 mg capsule[EDS]	1	QL(60 per 30 days)
rivastigmine 6 mg capsule[EDS]	1	QL(60 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 disintegrating tablet	1	QL(12 per 30 days)
rizatriptan 10 mg tablet	1	QL(12 per 30 days)
rizatriptan 5 mg disintegrating tablet	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 10 mg-100 mg/5 ml oral liquid	1	
ropinirole 0.25 mg tablet[EDS]	1	QL(180 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ropinirole 0.5 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole 1 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole 2 mg tablet[EDS]	1	QL(90 per 30 days)
ropinirole 3 mg tablet[EDS]	1	QL(180 per 30 days)
ropinirole 4 mg tablet[EDS]	1	QL(180 per 30 days)
ropinirole 5 mg tablet[EDS]	1	QL(120 per 30 days)
rosuvastatin 10 mg tablet[EDS]	1	
rosuvastatin 20 mg tablet[EDS]	1	
rosuvastatin 40 mg tablet[EDS]	1	
rosuvastatin 5 mg tablet[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 oral suspension	1	PA,QL(2760 per 30 days)
rufinamide 400 mg tablet	1	PA,QL(240 per 30 days)
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 NEEDLES 18 GAUGE X 1 1/2"	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	
sapropterin 100 mg oral powder packet	1	PA
sapropterin 100 mg soluble tablet	1	PA
sapropterin 500 mg oral powder packet	1	PA
scalpicin anti-itch 1 % topical solution	1	
SCEMBLIX 20 MG TABLET	1	PA,QL(60 per 30 days)
SCEMBLIX 40 MG TABLET	1	PA,QL(300 per 30 days)
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	
secura antifungal 2 % topical cream	1	
secura antifungal extra thick 2 % topical cream	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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
selegiline 5 mg capsule	1	
selegiline 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 capsule	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 8.6 mg tablet	1	
sennosides 8.6 mg-docusate sodium 50 mg tablet	1	
SENOKOT 8.6 MG TABLET	1	
sertraline 100 mg tablet[EDS]	1	QL(60 per 30 days)
sertraline 20 mg/ml oral concentrate	1	QL(60 per 30 days)
sertraline 25 mg tablet[EDS]	1	QL(90 per 30 days)
sertraline 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 carbonate 0.8 gram oral powder packet	1	QL(540 per 30 days)
sevelamer carbonate 2.4 gram oral powder packet	1	QL(180 per 30 days)
sevelamer carbonate 800 mg tablet	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	
SHINGRIX ADJUVANT COMPONENT (PF) INTRAMUSCULAR SUSPENSION	1	
SHINGRIX GE ANTIGEN COMPONENT 50 MCG INTRAMUSCULAR SUSPENSION[CE]	1	
SIDESTREAM PEDIATRIC FACE MASK	1	
siladryl sa 12.5 mg/5 ml oral liquid	1	
sildenafil (pulmonary hypertension) 10 mg/ml oral suspension	1	PA,QL(180 per 30 days)
sildenafil (pulmonary hypertension) 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 % topical cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
simethicone 40 mg/0.6 ml oral drops,suspension	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 oral 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	
SMART SENSE LANCETS 21 GAUGE	1	
SMART SENSE LANCETS 26 GAUGE	1	
SMART SENSE LANCETS 33 GAUGE	1	
SMARTDIABETES VANTAGE	1	
SMARTEST LANCET	1	
sodium bicarbonate 650 mg tablet	1	
sodium chloride 0.9 % irrigation solution	1	
sodium chloride 10 % for nebulization	1	
sodium chloride 3 % for nebulization	1	
sodium chloride 7 % for nebulization	1	
sodium phenylbutyrate 0.94 gram/gram oral powder	1	
sodium polystyrene sulfonate (sorbitol free) 15 gram/60 ml oral susp	1	
sodium polystyrene sulfonate oral powder	1	
sof-lax 100 mg capsule	1	
sofosbuvir 400 mg-velpatasvir 100 mg tablet	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	
sorafenib 200 mg tablet	1	PA,QL(120 per 30 days)
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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
SPIKEVAX (PF) 100 MCG/0.5 ML INTRAMUSCULAR SUSPENSION	1	
spinosad 0.9 % topical suspension	1	QL(240 per 30 days)
spironolactone 100 mg tablet[EDS]	1	
spironolactone 25 mg tablet[EDS]	1	
spironolactone 25 mg-hydrochlorothiazide 25 mg tablet	1	
spironolactone 50 mg tablet[EDS]	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)
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 capsule	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 gram tablet	1	
sudogest pe 10 mg tablet	1	
sulfacetamide sodium (acne) 10 % lotion (suspension)	1	
sulfacetamide sodium 10 % eye drops	1	
sulfacetamide sodium 10 % eye ointment	1	
sulfacetamide-prednisolone 10 %-0.23 % (0.25 %) eye drops	1	
sulfadiazine 500 mg tablet	1	
sulfamethoxazole 200 mg-trimethoprim 40 mg/5 ml oral suspension	1	
sulfamethoxazole 400 mg-trimethoprim 80 mg tablet	1	
sulfamethoxazole 800 mg-trimethoprim 160 mg tablet	1	
sulfasalazine 500 mg tablet	1	QL(240 per 30 days)
sulfasalazine 500 mg tablet,delayed release	1	QL(240 per 30 days)
sulindac 150 mg tablet	1	
sulindac 200 mg tablet	1	
sumatriptan 100 mg tablet	1	QL(9 per 30 days)
sumatriptan 20 mg/actuation nasal spray	1	QL(12 per 30 days)
sumatriptan 25 mg tablet	1	QL(9 per 30 days)
sumatriptan 4 mg/0.5 ml subcutaneous cartridge (refill)	1	QL(6 per 30 days)
sumatriptan 4 mg/0.5 ml subcutaneous pen injector	1	QL(6 per 30 days)
sumatriptan 5 mg/actuation nasal spray	1	QL(12 per 30 days)
sumatriptan 50 mg tablet	1	QL(9 per 30 days)
sumatriptan 6 mg/0.5 ml subcutaneous cartridge (refill)	1	QL(6 per 30 days)
sumatriptan 6 mg/0.5 ml subcutaneous pen injector	1	QL(6 per 30 days)
sumatriptan 6 mg/0.5 ml subcutaneous solution	1	QL(6 per 30 days)
sumatriptan 6 mg/0.5 ml subcutaneous syringe	1	QL(3 per 30 days)
sunitinib 12.5 mg capsule	1	PA,QL(28 per 28 days)
sunitinib 25 mg capsule	1	PA,QL(28 per 28 days)
sunitinib 37.5 mg capsule	1	PA,QL(28 per 28 days)
sunitinib 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	
suphedrine pe 10 mg tablet	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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	
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 GAUGE 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	
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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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)
TABRECTA 200 MG TABLET	1	PA,QL(112 per 28 days)
tacrolimus 0.03 % topical ointment	1	
tacrolimus 0.1 % topical ointment	1	
tacrolimus 0.5 mg capsule, immediate-release	1	
tacrolimus 1 mg capsule, immediate-release	1	
tacrolimus 5 mg capsule, immediate-release	1	QL(180 per 30 days)
tactinal 325 mg tablet	1	
tactinal extra strength 500 mg tablet	1	
tadalafil 20 mg tablet (pulmonary hypertension)	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 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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 disoproxil fumarate 300 mg tablet	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 hcl 1 % topical cream	1	
terbinafine hcl 250 mg tablet	1	QL(90 per 365 days)
terbutaline 2.5 mg tablet	1	
terbutaline 5 mg tablet	1	
terconazole 0.4 % vaginal cream	1	
terconazole 0.8 % vaginal cream	1	
testosterone 1.62 % (20.25 mg/1.25 gram) transdermal gel packet	1	PA,QL(37.5 per 30 days)
testosterone 1.62 % (40.5 mg/2.5 gram) transdermal gel packet	1	PA,QL(150 per 30 days)
testosterone 20.25 mg/1.25 gram (1.62 %) transdermal gel pump	1	PA,QL(150 per 30 days)
testosterone cypionate 100 mg/ml intramuscular oil	1	QL(24 per 90 days)
testosterone cypionate 200 mg/ml intramuscular oil	1	QL(24 per 90 days)
testosterone enanthate 200 mg/ml intramuscular oil	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 oral elixir	1	
theophylline 80 mg/15 ml oral solution	1	
theophylline er 300 mg tablet,extended release,12 hr	1	
theophylline er 400 mg tablet,extended release 24 hr	1	
theophylline er 450 mg tablet,extended release,12 hr	1	
theophylline er 600 mg tablet,extended release 24 hr	1	
THIN LANCETS 26 GAUGE	1	
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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
THYQUIDITY 20 MCG/ML ORAL SOLUTION	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 12 mg tablet	1	QL(140 per 30 days)
tiagabine 16 mg tablet	1	QL(105 per 30 days)
tiagabine 2 mg tablet	1	QL(840 per 30 days)
tiagabine 4 mg tablet	1	QL(120 per 30 days)
TIBSOVO 250 MG TABLET	1	PA,QL(60 per 30 days)
tilia fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet[CE]	1	
timolol maleate 0.25 % eye drops	1	QL(25 per 90 days)
timolol maleate 0.25 % eye gel forming solution	1	
timolol maleate 0.5 % eye drops	1	QL(25 per 90 days)
timolol maleate 0.5 % eye gel forming solution	1	QL(5 per 50 days)
tinidazole 250 mg tablet	1	
tinidazole 500 mg tablet	1	
tioconazole 6.5 % vaginal ointment	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 2 mg tablet	1	
tizanidine 4 mg tablet	1	
tobramycin 0.3 % eye drops	1	
tobramycin 0.3 %-dexamethasone 0.1 % eye drops,suspension	1	
tobramycin 300 mg/4 ml solution for nebulization	1	PA,QL(224 per 28 days)
tobramycin 300 mg/5 ml in 0.225 % sodium chloride for nebulization	1	PA,QL(280 per 28 days)
tobramycin with nebulizer 300 mg/5 ml solution for nebulization	1	PA,QL(280 per 28 days)
tolvaptan 15 mg tablet	1	QL(60 per 30 days)
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 capsule	1	QL(120 per 30 days)
topiramate 200 mg tablet[EDS]	1	QL(120 per 30 days)
topiramate 25 mg sprinkle capsule	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 60 mg tablet	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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
total home insect repellent 30 % topical spray	1	
TRADJENTA 5 MG TABLET	1	QL(30 per 30 days)
tramadol 100 mg tablet	1	QL(120 per 30 days)
tramadol 37.5 mg-acetaminophen 325 mg tablet	1	QL(240 per 30 days)
tramadol 50 mg tablet	1	QL(240 per 30 days)
tramadol er 100 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
tramadol er 200 mg tablet,extended release 24 hr	1	QL(30 per 30 days)
tramadol er 300 mg tablet,extended release 24 hr	1	QL(30 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 10 mg tablet	1	QL(270 per 30 days)
travoprost 0.004 % eye drops	1	QL(2.5 per 25 days)
trazodone 100 mg tablet	1	
trazodone 150 mg tablet	1	
trazodone 300 mg tablet	1	
trazodone 50 mg tablet	1	
tretinoin (antineoplastic) 10 mg capsule	1	PA,QL(360 per 30 days)
tretinoin 0.01 % topical gel	1	PA
tretinoin 0.025 % topical cream	1	PA
tretinoin 0.025 % topical gel	1	PA
tretinoin 0.05 % topical cream	1	PA
tretinoin 0.05 % topical gel	1	PA
tretinoin 0.1 % topical cream	1	PA
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-VI-SOL 250 MCG-50 MG-10 MCG/ML ORAL DROPS	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 acetonide 0.025 % lotion	1	
triamcinolone acetonide 0.025 % topical cream	1	
triamcinolone acetonide 0.025 % topical ointment	1	
triamcinolone acetonide 0.1 % dental paste	1	
triamcinolone acetonide 0.1 % lotion	1	
triamcinolone acetonide 0.1 % topical cream	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
triamcinolone acetonide 0.1 % topical ointment	1	
triamcinolone acetonide 0.5 % topical cream	1	
triamcinolone acetonide 0.5 % topical ointment	1	
triamcinolone acetonide 55 mcg nasal spray aerosol	1	
triamterene 37.5 mg-hydrochlorothiazide 25 mg capsule[EDS]	1	
triamterene 37.5 mg-hydrochlorothiazide 25 mg tablet[EDS]	1	
triamterene 75 mg-hydrochlorothiazide 50 mg tablet[EDS]	1	
TRICARE 27 MG IRON-1 MG TABLET	1	
tricon 110 mg-0.5 mg capsule	1	
trientine 250 mg capsule	1	PA
trifluoperazine 1 mg tablet	1	
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 0.4 mg/ml oral elixir	1	
trihexyphenidyl 2 mg tablet[EDS]	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 420 gram oral solution	1	
trimethoprim 100 mg tablet	1	
trimipramine 100 mg capsule	1	
trimipramine 25 mg capsule	1	
trimipramine 50 mg capsule	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	
triple antibiotic plus 3.5 mg-500 unit-10,000 unit/gram top ointment	1	
triple antibiotic-pain relief 3.5 mg-500 unit-10,000 unit/gram ointmnt	1	
TRIUMEQ 600 MG-50 MG-300 MG TABLET	1	QL(30 per 30 days)
TRIUMEQ PD 60 MG-5 MG-30 MG TABLET FOR ORAL SUSPENSION	1	QL(180 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	
TRIZIVIR 300 MG-150 MG-300 MG TABLET	1	QL(60 per 30 days)
tropicamide 0.5 % eye drops	1	
tropicamide 1 % eye drops	1	
TRUE COMFORT ALCOHOL PADS	1	
TRUE COMFORT LANCET 30 GAUGE	1	
TRUE METRIX AIR GLUCOSE METER	1	
TRUE METRIX GLUCOSE METER	1	
TRUE METRIX GLUCOSE TEST STRIP[EDS]	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	
TRUECONTROL LEVEL 0 SOLUTION	1	
TRUECONTROL LEVEL 1 SOLUTION	1	

QL - Quantity Limit • PA - Prior Authorization

DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
TRUEDRAW LANCING DEVICE	1	
TRUEPLUS LANCETS 26 GAUGE	1	
TRUEPLUS LANCETS 28 GAUGE	1	
TRUEPLUS LANCETS 30 GAUGE	1	
TRUEPLUS LANCETS 33 GAUGE	1	
TRULANCE 3 MG TABLET	1	PA,QL(30 per 30 days)
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)
TRUSTEX LATEX CONDOM[CE]	1	
TRUSTEX LUBRICATED CONDOMS[CE]	1	
TRUSTEX NON-LUBRICATED CONDOMS[CE]	1	
TRUSTEX-RIA LUBRICATED CONDOMS[CE]	1	
TRUSTEX-RIA LUBRICATED/SPERMICIDE CONDOM[CE]	1	
TRUSTEX-RIA NON-LUBRICATED CONDOMS[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 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	
TYVASO 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION	1	PA,QL(89.9 per 28 days)
TYVASO INSTITUTIONAL STARTER KIT 1.74 MG/2.9 ML SOLN FOR NEBULIZATION	1	PA,QL(89.9 per 28 days)
TYVASO REFILL KIT 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION	1	PA,QL(89.9 per 28 days)
TYVASO STARTER KIT 1.74 MG/2.9 ML SOLUTION FOR NEBULIZATION	1	PA,QL(89.9 per 28 days)
ULTI-LANCE KIT	1	
ULTI-LANCE MISC	1	
ULTICARE 1 ML 25 GAUGE X 5/8" SYRINGE	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
ULTILET ALCOHOL SWAB	1	
ULTILET BASIC LANCETS 30 GAUGE	1	
ULTILET CLASSIC LANCETS	1	
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 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	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
UNISTIK EXTRA LANCETS 21 GAUGE	1	
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	
urinary pain relief 97.5 mg tablet	1	
urinary pain relief 99.5 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 1 gram tablet	1	QL(90 per 30 days)
valacyclovir 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 (as sodium salt) 250 mg/5 ml (5 ml) oral solution	1	
valproic acid (as sodium salt) 250 mg/5 ml oral solution[EDS]	1	
valproic acid (as sodium salt) 500 mg/10 ml (10 ml) oral solution	1	
valproic acid 250 mg capsule[EDS]	1	
valsartan 160 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
valsartan 160 mg-hydrochlorothiazide 25 mg tablet	1	QL(30 per 30 days)
valsartan 320 mg tablet[EDS]	1	QL(60 per 30 days)
valsartan 320 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
valsartan 320 mg-hydrochlorothiazide 25 mg tablet	1	QL(30 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 80 mg-hydrochlorothiazide 12.5 mg tablet	1	QL(30 per 30 days)
vancomycin 125 mg capsule	1	QL(120 per 30 days)
vancomycin 250 mg capsule	1	QL(240 per 30 days)
vancomycin 50 mg/ml oral solution	1	
varenicline 0.5 mg (11)-1 mg (42) tablets in a dose pack[CE]	1	QL(53 per 28 days)
varenicline 0.5 mg tablet[CE]	1	QL(56 per 28 days)
varenicline 1 mg tablet[CE]	1	QL(56 per 28 days)
VAXELIS (PF) 15 UNIT-5 UNIT-10 MCG/0.5 ML INTRAMUSCULAR SUSPENSION	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
VAXELIS (PF) 15 UNIT-5 UNIT-10 MCG/0.5 ML INTRAMUSCULAR SYRINGE	1	
VAXNEUVANCE (PF) 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)
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 100 mg tablet[EDS]	1	
venlafaxine 25 mg tablet[EDS]	1	
venlafaxine 37.5 mg tablet[EDS]	1	
venlafaxine 50 mg tablet[EDS]	1	
venlafaxine 75 mg tablet[EDS]	1	
venlafaxine er 150 mg capsule,extended release 24 hr[EDS]	1	QL(60 per 30 days)
venlafaxine er 37.5 mg capsule,extended release 24 hr[EDS]	1	QL(90 per 30 days)
venlafaxine er 75 mg capsule,extended release 24 hr[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 (sr) 120 mg tablet,extended release[EDS]	1	QL(30 per 30 days)
verapamil er (sr) 180 mg tablet,extended release[EDS]	1	QL(30 per 30 days)
verapamil er (sr) 240 mg tablet,extended release[EDS]	1	QL(60 per 30 days)
verapamil er 120 mg 24 hr capsule,extended release	1	QL(60 per 30 days)
verapamil er 180 mg 24 hr capsule,extended release	1	QL(60 per 30 days)
verapamil er 240 mg 24 hr capsule,extended release	1	QL(60 per 30 days)
verapamil er 360 mg 24 hr capsule,extended release	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	
vienva 0.1 mg-20 mcg tablet[CE]	1	
vigabatrin 500 mg oral powder packet	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)
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)
VIREAD 40 MG/SCOOP (40 MG/GRAM) ORAL POWDER	1	QL(240 per 30 days)
virt-phos neutral 250 mg tablet	1	

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
virtussin ac 10 mg-100 mg/5 ml oral liquid	1	
vitamin a 10,000 unit capsule	1	
vitamin a palmitate 10,000 unit capsule	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 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 200 mg/5 ml (40 mg/ml) oral suspension	1	PA,QL(400 per 30 days)
voriconazole 50 mg tablet	1	PA,QL(120 per 30 days)
VORTEX HOLDING CHAMBER	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 1 mg tablet	1	
warfarin 10 mg tablet	1	
warfarin 2 mg tablet	1	
warfarin 2.5 mg tablet	1	
warfarin 3 mg tablet	1	
warfarin 4 mg tablet	1	
warfarin 5 mg tablet	1	
warfarin 6 mg tablet	1	
warfarin 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	
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)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
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 1 MG/ML ORAL SUSPENSION	1	QL(600 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/WEEK (20 MG X 5) TABLET	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 TWICE WEEK (40 MG X 2) TABLET	1	PA,QL(8 per 28 days)
XPOVIO 40 MG TWICE WEEKLY (80 MG/WEEK) (20 MG X 4) TABLET	1	PA,QL(16 per 28 days)
XPOVIO 40 MG/WEEK (20 MG X 2) TABLET	1	PA,QL(8 per 28 days)
XPOVIO 40 MG/WEEK (40 MG X 1) TABLET	1	PA,QL(4 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 (20 MG X 3) TABLET	1	PA,QL(12 per 28 days)
XPOVIO 60 MG/WEEK (60 MG X 1) TABLET	1	PA,QL(4 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 (20 MG X 4) TABLET	1	PA,QL(16 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)
zaditor 0.025 % (0.035 %) eye drops	1	
zafemy 150 mcg-35 mcg/24 hr transdermal patch[CE]	1	QL(3 per 28 days)
zaleplon 10 mg capsule	1	QL(30 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)
zenatane 10 mg capsule	1	QL(60 per 30 days)
zenatane 20 mg capsule	1	QL(60 per 30 days)

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DRUG NAME	DRUG LEVEL	UTILIZATION MANAGEMENT REQUIREMENTS
zenatane 30 mg capsule	1	QL(60 per 30 days)
zenatane 40 mg capsule	1	QL(120 per 30 days)
zidovudine 10 mg/ml oral syrup	1	QL(1680 per 28 days)
zidovudine 100 mg capsule	1	QL(180 per 30 days)
zidovudine 300 mg tablet	1	QL(60 per 30 days)
ziprasidone 20 mg capsule	1	QL(60 per 30 days)
ziprasidone 40 mg capsule	1	QL(60 per 30 days)
ziprasidone 60 mg capsule	1	QL(60 per 30 days)
ziprasidone 80 mg capsule	1	QL(60 per 30 days)
ZOLINZA 100 MG CAPSULE	1	PA,QL(120 per 30 days)
zolpidem 10 mg tablet	1	QL(30 per 30 days)
zolpidem 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 SUBCUTANEOUS SOLUTION	1	PA,QL(28 per 30 days)
ZORTRESS 1 MG TABLET	1	PA,QL(60 per 30 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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Notes

Call If You Need Us

If you have questions or need help reading or understanding this document, call us at **866-432-0001 (TTY: 711)**. We are available Monday through Friday, from 8 a.m. to 8 p.m., Eastern time. We can help you at no cost to you. We can explain the document in English or in your first language. We can also help you if you need help seeing or hearing. Please refer to your Member Handbook regarding your rights.

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- You may file a complaint, also known as a grievance:

  Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618
  If you need help filing a grievance, call **866-432-0001** or if you use a **TTY**, call **711**

- You can also file a civil rights complaint with the:

  South Carolina Department of Health and Human Services, Civil Rights Division
  1801 Main Street, P.O. Box 8206, Columbia, South Carolina 29202, **888-808-4238, TTY: 888-842-3620**, **civilrights@scdhhs.gov.** Complaint form is available at **https://msp.scdhhs.gov/crd/sites/default/files/Health%20Information%20Privacy%20Complaint%20Form.pdf**

  U.S. Department of Health and Human Services, **Office for Civil Rights** electronically through their Complaint Portal, available at **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**, or at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **800-368-1019, 800-537-7697 (TDD)**. Complaint forms are available at **https://www.hhs.gov/ocr/office/file/index.html**

Auxiliary aids and services, free of charge, are available to you. **866-432-0001 (TTY: 711)**

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

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Language assistance services, free of charge, are available to you. **866-432-0001 (TTY: 711)**

English: Call the number above to receive free language assistance services.

Español (Spanish): Llame al número que se indica arriba para recibir servicios gratuitos de asistencia lingüística.

繁體中文 (Chinese): 您可以撥打上面的電話號碼以獲得免費的語言協助服務。

Tiếng Việt (Vietnamese): Gọi số điện thoại ở trên để nhận các dịch vụ hỗ trợ ngôn ngữ miễn phí.

한국어 (Korean): 무료 언어 지원 서비스를 받으려면 위 번호로 전화하십시오.

Français (French): Appelez le numéro ci-dessus pour recevoir des services gratuits d'assistance linguistique.

Tagalog (Tagalog – Filipino): Tawagan ang numero sa itaas para makatanggap ng mga libreng serbisyo sa tulong sa wika.

Русский (Russian): Позвоните по вышеуказанному номеру, чтобы получить бесплатную языковую поддержку.

Deutsch (German): Wählen Sie die oben angegebene Nummer, um kostenlose sprachliche Hilfsdienstleistungen zu erhalten.

ગુજરાતી (Gujarati): મફત ભાષા સહાય સેવાઓ મેળવવા માટે ઉપર આપેલા નંબર પર કૉલ કરો.

(Arabic) ةيبرعلا اتصل برقم الهاتف أعلاه للحصول على خدمات المساعدة اللغوية المجانية.

Português (Portuguese): Ligue para o número acima para receber serviços gratuitos de assistência no idioma.

日本語 (Japanese): 無料の言語支援サービスを受けるには、上記の番号までお電話ください。

Українська (Ukrainian): Зателефонуйте за вказаним вище номером для отримання безкоштовної мовної підтримки.

हिंदी (Hindi): भाषा सहायता सेवाएं मुफ्त में प्राप्त करने के लिए ऊपर के नंबर पर कॉल करें।

ខ្មែរ (Cambodian) ហៅមកលេខទូរស័ព្ទខាងលើ ដើម្បីទទួលបានសេវាកម្មបកប្រែភាសាដោយមិនអស់ប្រាក់ ។