



**AETNA BETTER HEALTH® OF NEW JERSEY**  
Formulary

## FORMULARY

---

### What is the Aetna Better Health of New Jersey Formulary?

This is a drug list created by Aetna Better Health of New Jersey (“plan”). Aetna Better Health of New Jersey will cover drugs on this list. Some drugs may have coverage rules. If the rules for that drug are met, Aetna Better Health of New Jersey will cover the drug. Drugs must also be filled at an Aetna Better Health of New Jersey network pharmacy.

### Can Aetna Better Health of New Jersey’s Drug List change?

The plan may add or remove drugs on the list. All drug removals from the formulary will be sent to the state for review before the change is made. Utilizing members and their providers will be notified at least 60 days before a drug is removed from the formulary. All changes to the formulary will be posted on the plan’s website.

### How do I use Aetna Better Health of New Jersey’s formulary?

- **Column #1:** lists the covered drug. Brand drugs are in upper case letters (e.g., DRUG). Generics are in lower case letters (e.g., drug).
- **Column #2:** lists the brand name of the drug when a generic is covered
- **Column #3:** shows coverage rules for the drug

Drugs are also grouped by the type of condition they treat. Drugs used to treat an earache are listed under the section, Ear-Nose-Throat Medications. If you know what your drug is used for, please look for that section name on the drug list. Then look under that section for your drug.

### How much will I pay for covered drugs?

Description	1-34 day supply GENERIC	1-34 day supply BRAND	35-102 day supply GENERIC (mail-order only)	35-102 day supply BRAND (mail-order only)
FamilyCare Plan A	No Copay	No Copay	No Copay	No Copay
FamilyCare Plan B	No Copay	No Copay	No Copay	No Copay
FamilyCare Plan C	\$1	\$5	\$1	\$5
FamilyCare Plan D	\$1	\$5	\$1	\$5
FamilyCare Plan MLTSS	No Copay	No Copay	No Copay	No Copay

- American Indians and Alaska Native members will NOT have a copay.

## FORMULARY

---

### What are some types of coverage rules?

- **Prior Approval (PA):** This means your doctor will need to get approval from the plan first before the drug can be filled at the pharmacy. If it is not approved, the plan will not cover the drug.
- **Quantity Level Limits (QLL):** This means there is a limit on the amount of drug the plan will cover. For example, the plan provides 60 pills in 30 days for some drugs.
- **Step Therapy (ST):** This means you may need to try certain drugs first to treat your condition. After the first drug is tried, the plan will then cover the other drug for that same condition. For example, Drug A and Drug B may treat your condition. The plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then Drug B will be covered.

### What if my drug is not on Aetna Better Health of New Jersey's formulary?

First, please call your doctor and ask if your drug is covered. If the plan does not cover the drug, then:

- Ask your doctor for a similar drug that is covered.
- Your doctor can ask the plan to cover your drug through the prior approval process.

### What are generic drugs?

Aetna Better Health covers both brand and generic drugs. Generic drugs cost less and are approved by the Food and Drug Administration (FDA).

### Are Over-The-Counter (OTC) drugs covered?

The plan will cover OTC drugs on the formulary. Some OTC drugs may have coverage rules. If the rules for that OTC drug are met, the plan will cover the OTC drug. Like other drugs, OTC drugs need a prescription from a doctor if they are to be covered by the plan.



### ¿Qué es el formulario de Aetna Better Health of New Jersey?

Es una lista de medicamentos creada por Aetna Better Health of New Jersey (el “plan”). Aetna Better Health of New Jersey ofrece cobertura para los medicamentos de esta lista. Es posible que para algunos medicamentos se apliquen reglas de cobertura. Si se cumplen las reglas para esos medicamentos, Aetna Better Health of New Jersey los cubrirá. Además, los medicamentos deben adquirirse en una farmacia de la red de Aetna Better Health of New Jersey.

### ¿Puede cambiar la lista de medicamentos de Aetna Better Health of New Jersey?

El plan puede agregar o quitar medicamentos de la lista. Todas las eliminaciones de medicamentos del formulario se enviarán al estado, donde se revisarán antes de que se realice el cambio. Los miembros y proveedores que utilizan el formulario recibirán un aviso como mínimo 60 días antes de que se elimine un medicamento del formulario. Encontrará todos los cambios del formulario en el sitio en Internet del plan.

### ¿Cómo utilizo el formulario de Aetna Better Health of New Jersey?

- **Columna Nº 1:** enumera los medicamentos cubiertos. Los medicamentos de marca aparecen en mayúscula (por ejemplo, MEDICAMENTO); los genéricos aparecen en minúscula (por ejemplo, medicamento).
- **Columna Nº 2:** enumera los medicamentos de marca cuando una opción genérica está cubierta.
- **Columna Nº 3:** muestra las reglas de cobertura de los medicamentos.

Los medicamentos también están agrupados según el tipo de condición que tratan. Por ejemplo, los medicamentos que se usan para tratar un dolor de oído figuran en la sección, Ear-Nose-Throat Medications. Si sabe para qué se usa el medicamento que usted toma, busque el nombre de esa sección en la lista de medicamentos y luego busque el medicamento en esa sección.

### ¿Cuánto pagaré por los medicamentos cubiertos?

Descripción	Suministro para 1-34 días (GENÉRICOS)	Suministro para 1-34 días (DE MARCA)	Suministro para 35-102 días (GENÉRICOS)	Suministro para 35-102 días (DE MARCA)
FamilyCare Plan A	Sin copago	Sin copago	Sin copago	Sin copago
FamilyCare Plan B	Sin copago	Sin copago	Sin copago	Sin copago
FamilyCare Plan C	\$1	\$5	\$1	\$5
FamilyCare Plan D	\$1	\$5	\$1	\$5
FamilyCare Plan MLTSS	Sin copago	Sin copago	Sin copago	Sin copago

- Los miembros que sean indígenas americanos o nativos de Alaska NO tienen copago.

### ¿Cuáles son algunos de los tipos de reglas de cobertura?

- **Aprobación previa (PA):** significa que su médico primero deberá obtener la aprobación del plan antes de que se pueda adquirir el medicamento en la farmacia. Si no se aprueba, el plan no cubrirá el medicamento.
- **Límites de cantidad (QLL):** significa que el plan cubre hasta una cierta cantidad del medicamento. Por ejemplo, en el caso de algunos medicamentos, el plan cubre 60 píldoras en 30 días.
- **Terapia escalonada (ST):** significa que posiblemente primero deba probar ciertos medicamentos para tratar su condición. Después de probar el primer medicamento, el plan cubrirá el otro medicamento para la misma condición. Por ejemplo, el Medicamento A y el Medicamento B pueden tratar su condición. Es posible que el plan no cubra el Medicamento B a menos que usted primero pruebe el Medicamento A. Si el Medicamento A no funciona en su caso, entonces se cubrirá el Medicamento B.

### ¿Qué sucede si el medicamento que tomo no está incluido en el formulario de Aetna Better Health of New Jersey?

Primero, llame a su médico y pregúntele si su medicamento está cubierto. Si el plan no lo cubre, usted tiene dos opciones:

- Pida a su médico un medicamento similar que esté cubierto.
- Su médico puede solicitar que el plan cubra el medicamento a través del proceso de aprobación previa.

### ¿Qué son los medicamentos genéricos?

Aetna Better Health of New Jersey cubre tanto medicamentos de marca como genéricos. Los medicamentos genéricos cuestan menos y están aprobados por la Administración de Drogas y Alimentos (FDA).

### ¿Los medicamentos de venta libre están cubiertos?

El plan cubrirá los medicamentos de venta libre que figuren en el formulario. Es posible que para algunos medicamentos de venta libre se apliquen reglas de cobertura. Si se cumplen las reglas para esos medicamentos de venta libre, el plan los cubrirá. Al igual que con otros medicamentos, se requiere una receta del médico para que el plan brinde cobertura para los medicamentos de venta libre.

**Table of Contents**

*ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS*	3
*ALTERNATIVE MEDICINES*	5
*AMINOGLYCOSIDES*	5
*ANALGESICS - ANTI-INFLAMMATORY*	5
*ANALGESICS - NONNARCOTIC*	7
*ANALGESICS - OPIOID*	8
*ANDROGENS-ANABOLIC*	11
*ANORECTAL AND RELATED PRODUCTS*	12
*ANTACIDS*	12
*ANTHELMINTICS*	13
*ANTIANGINAL AGENTS*	13
*ANTIANKXIETY AGENTS*	13
*ANTIARRHYTHMICS*	14
*ANTIASTHMATIC AND BRONCHODILATOR AGENTS*	15
*ANTICOAGULANTS*	17
*ANTICONVULSANTS*	18
*ANTIDEPRESSANTS*	20
*ANTIDIABETICS*	22
*ANTIDIARRHEAL/PROBIOTIC AGENTS*	25
*ANTIDOTES AND SPECIFIC ANTAGONISTS*	26
*ANTIEMETICS*	26
*ANTIFUNGALS*	27
*ANTI HISTAMINES*	28
*ANTIHYPERLIPIDEMICS*	29
*ANTI HYPERTENSIVES*	30
*ANTI-INFECTIVE AGENTS - MISC.*	32
*ANTIMALARIALS*	33
*ANTIMYASTHENIC/CHOLINERGIC AGENTS*	34
*ANTIMYCOBACTERIAL AGENTS*	34
*ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES*	34
*ANTIPARKINSON AND RELATED THERAPY AGENTS*	38
*ANTIPSYCHOTICS/ANTIMANIC AGENTS*	39
*ANTIVIRALS*	43
*BETA BLOCKERS*	48
*CALCIUM CHANNEL BLOCKERS*	49
*CARDIOTONICS*	50
*CARDIOVASCULAR AGENTS - MISC.*	50
*CEPHALOSPORINS*	51
*CHEMICALS*	52
*CONTRACEPTIVES*	52
*CORTICOSTEROIDS*	58
*COUGH/COLD/ALLERGY*	58
*DERMATOLOGICALS*	61
*DIAGNOSTIC PRODUCTS*	69
*DIGESTIVE AIDS*	70
*DIURETICS*	70
*ENDOCRINE AND METABOLIC AGENTS - MISC.*	71

*ESTROGENS*	72
*FLUOROQUINOLONES*	73
*GASTROINTESTINAL AGENTS - MISC.*	73
*GENITOURINARY AGENTS - MISCELLANEOUS*	74
*GOUT AGENTS*	75
*HEMATOLOGICAL AGENTS - MISC.*	75
*HEMATOPOIETIC AGENTS*	76
*HEMOSTATICS*	78
*HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS*	78
*LAXATIVES*	78
*MACROLIDES*	80
*MEDICAL DEVICES AND SUPPLIES*	80
*MIGRAINE PRODUCTS*	83
*MINERALS & ELECTROLYTES*	84
*MISCELLANEOUS THERAPEUTIC CLASSES*	85
*MOUTH/THROAT/DENTAL AGENTS*	86
*MULTIVITAMINS*	87
*MUSCULOSKELETAL THERAPY AGENTS*	89
*NASAL AGENTS - SYSTEMIC AND TOPICAL*	89
*NEUROMUSCULAR AGENTS*	90
*NUTRIENTS*	90
*OPHTHALMIC AGENTS*	90
*OTIC AGENTS*	94
*PASSIVE IMMUNIZING AND TREATMENT AGENTS*	95
*PENICILLINS*	95
*PHARMACEUTICAL ADJUVANTS*	96
*PROGESTINS*	97
*PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.*	97
*RESPIRATORY AGENTS - MISC.*	100
*SULFONAMIDES*	101
*TETRACYCLINES*	101
*THYROID AGENTS*	101
*ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS*	102
*URINARY ANTISPASMODICS*	104
*VAGINAL AND RELATED PRODUCTS*	105
*VASOPRESSORS*	105
*VITAMINS*	106

**Restrictions**

= QLL: 1 capsule per day for under age 12 and 2 capsules per day for age 12 and older  
 = Maximum qty of 360 tablets per 365 days (6 months of therapy per year)

= QLL

**F** = Female Only

**M** = Male Only

**OTC** = Over the Counter

**PA** = Prior Authorization Required

**QLL** = Quantity Level Limit Applies

**ST** = Step Therapy Required

**lowercase italics** = Generic drugs

**UPPERCASE BOLD** = Brand name drugs

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS*</b>		
<b>*Adhd Agent - Selective Alpha Adrenergic Agonists***</b>		
<i>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg</i>	Intuniv	QLL (30 EA per 30 days); AL (Min 6 Years)
<i>guanfacine hcl er oral tablet extended release 24 hour 4 mg</i>	Intuniv	QLL (30 Tablets per 30 days); AL (Min 6 Years)
<b>*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor***</b>		
<i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg</i>	Strattera	QLL (30 EA per 30 days); AL (Min 6 Years)
<i>atomoxetine hcl oral capsule 60 mg, 80 mg</i>	Strattera	QLL (30 EA per 30 days); AL (Min 6 Years)
<b>*Amphetamine Mixtures***</b>		
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg</i>	Adderall XR	PA; QLL (1 EA per 1 day)
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 20 mg, 25 mg</i>	Adderall XR	PA; QLL (30 Capsules per 30 days)
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 30 mg</i>	Adderall XR	PA; QLL (2 EA per 1 day)
<i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg</i>	Adderall	PA; QLL (90 Tablets per 30 days)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>amphetamine-dextroamphetamine oral tablet 30 mg</i>	Adderall	PA; QLL (60 Tablets per 30 days)
<b>*Amphetamines***</b>		
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg</i>	Dexedrine	PA; QLL (4 EA per 1 day)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg</i>		PA; QLL (4 EA per 1 day)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg</i>		PA; QLL (90 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	Zenzedi	PA; QLL (6 EA per 1 day)
<b>ZENZEDI ORAL TABLET 5 MG</b>	dextroamphetamine sulfate	PA; QLL (6 EA per 1 day)
<b>*Analeptics***</b>		
<i>caffeine citrate oral solution 20 mg/ml, 60 mg/3ml</i>		
<b>*Stimulants - Misc.***</b>		
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg</i>	Nuvigil	PA; QLL (1 EA per 1 day); AL (Min 17 Years)
<i>armodafinil oral tablet 50 mg</i>	Nuvigil	PA; QLL (2 EA per 1 day); AL (Min 17 Years)
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	Focalin XR	PA; QLL (30 EA per 30 days)
<i>dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	Focalin	PA; QLL (60 Tablets per 30 days)
<b>METHYLIN ORAL SOLUTION 10 MG/5ML, 5 MG/5ML</b>	methylphenidate hcl	PA; QLL (30 ML per 1 day); AL (Min 6 Years)
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	Metadate CD	PA; QLL (1 EA per 1 day)
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg</i>	Concerta	PA; QLL (30 Tablets per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 36 mg</i>	Concerta	PA; QLL (60 Tablets per 30 days)
<i>methylphenidate hcl er oral tablet extended release 10 mg, 20 mg</i>		PA; QLL (90 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg</i>		PA; QLL (1 EA per 1 day)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>		PA; QLL (2 EA per 1 day)
<i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	Methylin	PA; QLL (30 ML per 1 day); AL (Min 6 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	Ritalin	PA; QLL (90 Tablets per 30 days)
<i>methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg</i>		PA; QLL (4 EA per 1 day)
<b>*ALTERNATIVE MEDICINES*</b>		
<b>*Alternative Medicine - Me's***</b>		
<i>melatonin maximum strength oral tablet 5 mg</i>		OTC
<i>melatonin oral tablet 1 mg</i>		OTC
<i>melatonin oral tablet 3 mg, 5 mg</i>		OTC
<i>sm melatonin oral tablet 3 mg</i>		OTC
<b>*Alternative Medicine - St's***</b>		
<i>stevia oral packet 100 mg</i>		OTC
<b>*AMINOGLYCOSIDES*</b>		
<b>*Aminoglycosides***</b>		
<i>neomycin sulfate oral tablet 500 mg</i>		
<i>tobramycin inhalation nebulization solution 300 mg/5ml</i>	Kitabis Pak	PA; QLL (280 ML per 56 days)
<b>*ANALGESICS - ANTI-INFLAMMATORY*</b>		
<b>*Antirheumatic - Janus Kinase (Jak) Inhibitors***</b>		
<b>RINVOQ LQ ORAL SOLUTION 1 MG/ML</b>		PA
<b>RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG, 45 MG</b>		PA
<b>*Anti-Tnf-Alpha - Monoclonal Antibodies***</b>		
<i>adalimumab-adaz subcutaneous solution auto-injector 40 mg/0.4ml</i>	Hyrimoz	PA
<i>adalimumab-adaz subcutaneous solution prefilled syringe 40 mg/0.4ml</i>	Hyrimoz	PA
<i>adalimumab-fkjp (2 pen) subcutaneous auto-injector kit 40 mg/0.8ml</i>	Hulio (2 Pen)	PA
<i>adalimumab-fkjp (2 syringe) subcutaneous prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml</i>	Hulio (2 Syringe)	PA
<b>HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML</b>		PA

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML, 40 MG/0.8ML</b>		PA
<b>*Cyclooxygenase 2 (Cox-2) Inhibitors***</b>		
<i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>	CeleBREX	
<i>celecoxib oral capsule 400 mg</i>	CeleBREX	QLL (1 EA per 1 day)
<b>*Gold Compounds***</b>		
<b>RIDAURA ORAL CAPSULE 3 MG</b>		
<b>*Interleukin-6 Receptor Inhibitors***</b>		
<b>KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML</b>		PA; QLL (2.28 ML per 28 days)
<b>KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML</b>		PA; QLL (2.28 ML per 28 days)
<b>*Nonsteroidal Anti-Inflammatory Agents (Nsaid)***</b>		
<i>childrens ibuprofen 100 oral suspension 100 mg/5ml</i>	Childrens Advil	OTC
<i>cvs naproxen sodium oral tablet 220 mg</i>	Aleve	OTC
<i>diclofenac potassium oral tablet 50 mg</i>		
<i>diclofenac sodium er oral tablet extended release 24 hour 100 mg</i>		
<i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg</i>		
<i>etodolac oral capsule 200 mg, 300 mg</i>		
<i>etodolac oral tablet 400 mg</i>	Lodine	
<i>etodolac oral tablet 500 mg</i>		
<i>flurbiprofen oral tablet 100 mg, 50 mg</i>		
<i>ibuprofen junior strength oral tablet chewable 100 mg</i>	Advil Junior Strength	OTC
<i>ibuprofen oral capsule 200 mg</i>	Advil	OTC; QLL (6 EA per 1 day)
<i>ibuprofen oral tablet 200 mg</i>	Medi-First Ibuprofen	OTC; QLL (6 EA per 1 day)
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	IBU	
<i>indomethacin er oral capsule extended release 75 mg</i>		
<i>indomethacin oral capsule 25 mg, 50 mg</i>		
<i>ketorolac tromethamine oral tablet 10 mg</i>		QLL (20 EA per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>MEDI-FIRST IBUPROFEN ORAL TABLET 200 MG</b>	ibuprofen	OTC; QLL (6 EA per 1 day)
<i>meloxicam oral tablet 15 mg</i>		QLL (1 EA per 1 day)
<i>meloxicam oral tablet 7.5 mg</i>		
<i>nabumetone oral tablet 500 mg</i>		QLL (4 EA per 1 day)
<i>nabumetone oral tablet 750 mg</i>		
<i>naproxen oral suspension 125 mg/5ml</i>	Naprosyn	ST
<i>naproxen oral tablet 250 mg, 375 mg</i>		
<i>naproxen oral tablet 500 mg</i>	Naprosyn	
<i>naproxen sodium oral capsule 220 mg</i>	Aleve	OTC
<i>piroxicam oral capsule 10 mg, 20 mg</i>		
<i>sm ibuprofen jr oral tablet 100 mg</i>	Advil Junior Strength	OTC
<i>sulindac oral tablet 150 mg, 200 mg</i>		
<b>*Phosphodiesterase 4 (Pde4) Inhibitors***</b>		
<b>OTEZLA ORAL TABLET 30 MG</b>		PA
<b>OTEZLA ORAL TABLET THERAPY PACK 10 &amp; 20 &amp; 30 MG</b>		PA
<b>*Pyrimidine Synthesis Inhibitors***</b>		
<i>leflunomide oral tablet 10 mg, 20 mg</i>	Arava	QLL (1 EA per 1 day)
<b>*Soluble Tumor Necrosis Factor Receptor Agents***</b>		
<b>ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML</b>		PA
<b>ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML</b>		PA; QLL (3.92 ML per 28 days)
<b>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML</b>		PA
<b>ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML</b>		PA
<b>*ANALGESICS - NONNARCOTIC*</b>		
<b>*Analgesic Combinations***</b>		
<i>headache relief oral tablet 250-250-65 mg</i>	Excedrin Extra Strength	OTC
<b>*Analgesics Other***</b>		
<i>acetaminophen er oral tablet extended release 650 mg</i>	Midol	OTC; QLL (6 EA per 1 day)
<i>acetaminophen oral liquid 160 mg/5ml</i>	Little Remedies for Fever	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml</i>		OTC
<i>acetaminophen oral suspension 160 mg/5ml</i>	Max Relief Jr Child Pain/Fever	OTC
<i>acetaminophen oral tablet 500 mg</i>	Healthy Mama Shake That Ache	OTC; QLL (8 EA per 1 day)
<i>acetaminophen oral tablet chewable 80 mg</i>	Childrens Medi-Tabs	OTC
<i>acetaminophen rectal suppository 120 mg</i>	FeverAll Childrens	OTC
<i>acetaminophen rectal suppository 650 mg</i>	FeverAll Adults	OTC
<i>non-aspirin jr strength oral tablet chewable 160 mg</i>	Mapap Childrens	OTC
<b>TRIAMINIC FEVER REDUCER ORAL SYRUP 160 MG/5ML</b>		OTC
<b>*Analgesics-Sedatives***</b>		
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	Bac	QLL (6 Tablets per 1 day)
<b>*Salicylate Combinations***</b>		
<i>tri-buffered aspirin oral tablet 325 mg</i>	Bufferin	OTC
<b>*Salicylates***</b>		
<i>aspirin oral tablet chewable 81 mg</i>	Bayer Low Dose	OTC
<i>aspirin oral tablet delayed release 81 mg</i>	Aspir-Low	OTC
<i>cvs aspirin oral tablet 325 mg</i>	Bayer Advanced Aspirin Reg St	OTC
<b>*ANALGESICS - OPIOID*</b>		
<b>*Codeine Combinations***</b>		
<i>acetaminophen-codeine oral solution 120-12 mg/5ml</i>		QLL (2700 ML per 30 days); AL (Min 18 Years)
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>		QLL (120 EA per 30 days); AL (Min 18 Years)
<b>*Hydrocodone Combinations***</b>		
<i>hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml</i>		QLL (1800 ML per 30 days); AL (Min 18 Years)
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>		QLL (120 ML per 30 days); AL (Min 18 Years)
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>		QLL (120 EA per 30 days); AL (Min 18 Years)
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>		QLL (120 Tablets per 30 days); AL (Min 18 Years)
<b>*Opioid Agonists***</b>		
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>		QLL (120 Tablets per 30 days); AL (Min 18 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>		PA; QLL (4 Lozenges per 1 day)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>		PA; QLL (10 Patches per 30 days)
<i>hydromorphone hcl oral tablet 2 mg, 4 mg</i>	Dilaudid	QLL (120 Tablets per 30 days)
<i>hydromorphone hcl oral tablet 8 mg</i>	Dilaudid	QLL (2 Tablets per 1 day)
<i>hydromorphone hcl rectal suppository 3 mg</i>		QLL (120 EA per 30 days)
<i>methadone hcl oral concentrate 10 mg/ml</i>	Methadone HCl Intensol	PA; QLL (3 EA per 1 day)
<i>methadone hcl oral tablet 10 mg</i>		PA; QLL (3 Tablets per 1 day)
<i>methadone hcl oral tablet 5 mg</i>		PA; QLL (6 Tablets per 1 day)
<i>methadone hcl oral tablet soluble 40 mg</i>	Methadose	PA; QLL (22 Tablets per 30 days)
<i>methadone hcl solution 10 mg/5ml oral</i>		PA; QLL (10 ML per 1 day)
<i>methadone hcl solution 5 mg/5ml oral</i>		PA; QLL (20 ML per 1 day)
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>		QLL (4 ML per 1 day)
<i>morphine sulfate er oral tablet extended release 100 mg, 200 mg</i>	MS Contin	PA; QLL (2 Tablets per 1 day)
<i>morphine sulfate er oral tablet extended release 15 mg, 30 mg, 60 mg</i>	MS Contin	PA; QLL (3 Tablets per 1 day)
<i>morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml</i>		QLL (600 ML per 30 days)
<i>morphine sulfate oral tablet 15 mg</i>		QLL (120 Tablets per 30 days)
<i>morphine sulfate oral tablet 30 mg</i>		QLL (3 Tablets per 1 day)
<i>morphine sulfate rectal suppository 10 mg, 20 mg, 5 mg</i>		QLL (120 EA per 30 days)
<i>morphine sulfate rectal suppository 30 mg</i>		QLL (3 EA per 1 day)
<i>oxycodone hcl oral solution 5 mg/5ml</i>		QLL (600 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg, 5 mg</i>		QLL (120 Tablets per 30 days)
<i>oxycodone hcl oral tablet 15 mg</i>	Roxicodone	QLL (4 Tablets per 1 day)
<i>oxycodone hcl oral tablet 20 mg</i>		QLL (3 Tablets per 1 day)
<i>oxycodone hcl oral tablet 30 mg</i>	Roxicodone	QLL (2 Tablets per 1 day)
<i>oxycodone hcl oral tablet abuse-deterrent 15 mg</i>	RoxyBond	QLL (4 Tablets per 1 day)
<i>tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i>		PA; QLL (1 EA per 1 day); AL (Min 18 Years)
<i>tramadol hcl oral tablet 50 mg</i>		QLL (120 Tablets per 30 days); AL (Min 18 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Opioid Combinations***</b>		
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	Endocet	QLL (120 Tablets per 30 days)
<b>*Opioid Partial Agonists***</b>		
<b>BRIXADI (WEEKLY) SOLUTION PREFILLED SYRINGE 16 MG/0.32ML SUBCUTANEOUS</b>		QLL (1.28 ML per 28 days)
<b>BRIXADI (WEEKLY) SOLUTION PREFILLED SYRINGE 24 MG/0.48ML SUBCUTANEOUS</b>		QLL (1.92 ML per 28 days)
<b>BRIXADI (WEEKLY) SOLUTION PREFILLED SYRINGE 32 MG/0.64ML SUBCUTANEOUS</b>		QLL (2.56 ML per 28 days)
<b>BRIXADI (WEEKLY) SOLUTION PREFILLED SYRINGE 8 MG/0.16ML SUBCUTANEOUS</b>		QLL (0.64 ML per 28 days)
<b>BRIXADI SOLUTION PREFILLED SYRINGE 128 MG/0.36ML SUBCUTANEOUS</b>		QLL (0.36 ML per 28 days)
<b>BRIXADI SOLUTION PREFILLED SYRINGE 64 MG/0.18ML SUBCUTANEOUS</b>		QLL (0.18 ML per 28 days)
<b>BRIXADI SOLUTION PREFILLED SYRINGE 96 MG/0.27ML SUBCUTANEOUS</b>		QLL (0.27 ML per 28 days)
<i>buprenorphine hcl sublingual tablet sublingual 2 mg</i>		QLL (16 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl sublingual tablet sublingual 8 mg</i>		QLL (4 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg</i>	Suboxone	QLL (2.6 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg</i>	Suboxone	QLL (16 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual film 4-1 mg</i>	Suboxone	QLL (8 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual film 8-2 mg</i>	Suboxone	QLL (4 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>		QLL (16 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>		QLL (4 EA per 1 day); AL (Min 16 Years)
<i>buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr</i>	Butrans	PA; QLL (4 EA per 28 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>butorphanol tartrate nasal solution 10 mg/ml</i>		QLL (1 Bottle per 30 days)
<i>pentazocine-naloxone hcl oral tablet 50-0.5 mg</i>		QLL (120 EA per 30 days)
<b>SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML</b>		
<b>SUBOXONE SUBLINGUAL FILM 12-3 MG</b>	buprenorphine hcl-naloxone hcl	QLL (2.6 EA per 1 day); AL (Min 16 Years)
<b>SUBOXONE SUBLINGUAL FILM 2-0.5 MG</b>	buprenorphine hcl-naloxone hcl	QLL (16 EA per 1 day); AL (Min 16 Years)
<b>SUBOXONE SUBLINGUAL FILM 4-1 MG</b>	buprenorphine hcl-naloxone hcl	QLL (8 EA per 1 day); AL (Min 16 Years)
<b>SUBOXONE SUBLINGUAL FILM 8-2 MG</b>	buprenorphine hcl-naloxone hcl	QLL (4 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG</b>		QLL (33 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG</b>		QLL (16.5 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG</b>		QLL (2 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 2.9-0.71 MG</b>		QLL (8 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 5.7-1.4 MG</b>		QLL (4 EA per 1 day); AL (Min 16 Years)
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG</b>		QLL (2.5 EA per 1 day); AL (Min 16 Years)
<b>*Tramadol Combinations***</b>		
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>		QLL (120 Tablets per 30 days); AL (Min 18 Years)
<b>*ANDROGENS-ANABOLIC*</b>		
<b>*Androgens***</b>		
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>		
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	Depo-Testosterone	PA; QLL (10 ML per 90 days)
<i>testosterone enanthate intramuscular solution 200 mg/ml</i>		PA
<i>testosterone gel 10 mg/act (2%) transdermal</i>		PA; QLL (120 GM per 30 days)
<i>testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%)</i>	AndroGel Pump	PA; QLL (5 GM per 1 day)
<i>testosterone transdermal gel 10 mg/act (2%)</i>		PA; QLL (2 canisters per 30 days)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>testosterone transdermal gel 12.5 mg/act (1%)</i>	Vogelxo Pump	PA; QLL (4 canisters per 30 days)
<i>testosterone transdermal gel 25 mg/2.5gm (1%)</i>		PA; QLL (2.5 GM per 1 day)
<i>testosterone transdermal gel 50 mg/5gm (1%)</i>	Testim	PA; QLL (10 GM per 1 day)
<i>testosterone transdermal solution 30 mg/act</i>		PA; QLL (6 ML per 1 day)
<b>*ANORECTAL AND RELATED PRODUCTS*</b>		
<b>*Intrarectal Steroids***</b>		
<i>hydrocortisone rectal enema 100 mg/60ml</i>	Cortenema	
<b>*Nitrate Vasodilating Agents***</b>		
<i>nitroglycerin rectal ointment 0.4 %</i>	Rectiv	PA; QLL (30 GM per 30 days)
<b>*Rectal Combinations - Misc.***</b>		
<i>gnp hemorrhoidal rectal ointment 0.25-14-74.9 %</i>	Avedana Hemorrhoid Pain Relief	OTC
<b>*Rectal Local Anesthetics***</b>		
<i>lidocaine (anorectal) external cream 5 %</i>	RectaSmoothe	OTC; QLL (30 GM per 30 days)
<i>pramoxine hcl (perianal) external foam 1 %</i>	Proctofoam	OTC; QLL (15 GM per 30 days)
<b>RECTASMOOTH EXTERNAL CREAM 5 %</b>	lidocaine (anorectal)	OTC; QLL (30 GM per 30 days)
<b>*Rectal Steroids***</b>		
<i>hydrocortisone (perianal) external cream 1 %</i>	Preparation H	
<b>*ANTACIDS*</b>		
<b>*Antacid &amp; Simethicone***</b>		
<i>aluminum-magnesium-simethicone oral suspension 200-200-20 mg/5ml</i>	Mintox	OTC
<i>antacid/simethicone ds oral suspension 400-400-40 mg/5ml</i>	Almacone Double Strength	OTC
<b>*Antacid Combinations***</b>		
<b>ACID GONE ORAL SUSPENSION 95-358 MG/15ML</b>		OTC
<i>heartburn antacid ex st oral tablet chewable 160-105 mg</i>	Acid Gone	OTC
<i>sm foaming antacid oral tablet chewable 80-20 mg</i>		OTC
<b>*Antacids - Bicarbonate***</b>		
<i>sodium bicarbonate oral powder</i>		
<i>sodium bicarbonate oral tablet 325 mg, 650 mg</i>		OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antacids - Calcium Salts***</b>		
<i>calcium carbonate antacid oral tablet chewable 500 mg</i>	Cal-Gest Antacid	OTC
<i>childrens pepto oral tablet chewable 400 mg</i>	Childrens Soothe	OTC
<b>*Antacids - Magnesium Salts***</b>		
<i>magnesium oxide oral tablet 400 mg</i>		OTC
<b>*ANTHELMINTICS*</b>		
<b>*Anthelmintics***</b>		
<i>albendazole oral tablet 200 mg</i>		
<i>ivermectin oral tablet 3 mg</i>	Stromectol	QLL (6 EA per 90 days)
<i>praziquantel oral tablet 600 mg</i>	Biltricide	
<i>reeses pinworm medicine oral suspension 144 (50 base) mg/ml</i>		OTC
<b>STROMECTOL ORAL TABLET 3 MG</b>	ivermectin	QLL (6 EA per 90 days)
<b>*ANTIANGINAL AGENTS*</b>		
<b>*Nitrates***</b>		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg</i>		
<i>isosorbide dinitrate oral tablet 5 mg</i>	Isordil Titradose	
<i>isosorbide mononitrate er oral tablet extended release 24 hour 120 mg</i>		QLL (2 EA per 1 day)
<i>isosorbide mononitrate er oral tablet extended release 24 hour 30 mg, 60 mg</i>		QLL (1 EA per 1 day)
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>		
<b>NITRO-BID TRANSDERMAL OINTMENT 2 %</b>		
<i>nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg</i>	Nitrostat	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	Nitro-Dur	
<b>NITRO-TIME ORAL CAPSULE EXTENDED RELEASE 2.5 MG, 6.5 MG, 9 MG</b>		
<b>*ANTIANSIETY AGENTS*</b>		
<b>*Antianxiety Agents - Misc.***</b>		
<i>bupirone hcl oral tablet 10 mg</i>		QLL (6 EA per 1 day); AL (Min 6 Years)
<i>bupirone hcl oral tablet 15 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>bupirone hcl oral tablet 5 mg</i>		QLL (12 EA per 1 day); AL (Min 6 Years)
<i>bupirone hcl oral tablet 7.5 mg</i>		QLL (8 EA per 1 day); AL (Min 6 Years)
<i>bupirone hcl tablet 30 mg oral</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>hydroxyzine hcl oral syrup 10 mg/5ml</i>		
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg</i>		QLL (4 EA per 1 day)
<i>hydroxyzine hcl oral tablet 50 mg</i>		QLL (8 EA per 1 day)
<i>hydroxyzine pamoate oral capsule 100 mg, 50 mg</i>		QLL (4 EA per 1 day)
<i>hydroxyzine pamoate oral capsule 25 mg</i>	Vistaril	QLL (4 EA per 1 day)
<b>*Benzodiazepines***</b>		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	Xanax XR	QLL (2 EA per 1 day); AL (Min 18 Years)
<i>alprazolam oral tablet 0.25 mg, 0.5 mg</i>	Xanax	QLL (4 EA per 1 day)
<i>alprazolam oral tablet 1 mg</i>	Xanax	QLL (6 EA per 1 day)
<i>alprazolam oral tablet 2 mg</i>	Xanax	QLL (5 EA per 1 day)
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	Xanax XR	QLL (2 EA per 1 day); AL (Min 18 Years)
<i>chlordiazepoxide hcl oral capsule 10 mg, 5 mg</i>		QLL (4 EA per 1 day)
<i>chlordiazepoxide hcl oral capsule 25 mg</i>		QLL (12 EA per 1 day)
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	Valium	QLL (4 EA per 1 day)
<b>LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML</b>	lorazepam	QLL (2 ML per 1 day)
<i>lorazepam oral tablet 0.5 mg</i>	Ativan	QLL (4 EA per 1 day)
<i>lorazepam oral tablet 1 mg</i>	Ativan	QLL (6 EA per 1 day)
<i>lorazepam oral tablet 2 mg</i>	Ativan	QLL (5 EA per 1 day)
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<b>*ANTIARRHYTHMICS*</b>		
<b>*Antiarrhythmics Type I-A***</b>		
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	Norpace	
<b>*Antiarrhythmics Type I-C***</b>		
<i>flecainide acetate oral tablet 100 mg, 150 mg, 50 mg</i>		
<i>propafenone hcl oral tablet 150 mg, 225 mg, 300 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antiarrhythmics Type Iii***</b>		
<i>amiodarone hcl oral tablet 200 mg</i>	Pacerone	
<b>MULTAQ ORAL TABLET 400 MG</b>		PA; QLL (60 EA per 30 days)
<b>*ANTIASTHMATIC AND BRONCHODILATOR AGENTS*</b>		
<b>*Adrenergic Combinations***</b>		
<b>BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT</b>		QLL (10.7 GM per 30 days)
<b>BREYNA INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT</b>	budesonide-formoterol fumarate	QLL (10.3 GM per 20 days)
<b>BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT</b>		ST; QLL (10.7 GM per 30 days)
<i>budesonide-formoterol fumarate inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act</i>	Breyna	QLL (10.3 GM per 20 days)
<i>fluticasone-salmeterol aerosol powder breath activated 250-50 mcg/act inhalation</i>	Wixela Inhub	QLL (2 EA per 1 day)
<i>fluticasone-salmeterol aerosol powder breath activated 500-50 mcg/act inhalation</i>	Wixela Inhub	QLL (2 EA per 1 day)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act</i>	AirDuo RespiClick 113/14	QLL (1 EA per 30 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 232-14 mcg/act</i>	AirDuo RespiClick 232/14	QLL (1 EA per 30 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 55-14 mcg/act</i>	AirDuo RespiClick 55/14	QLL (1 EA per 30 days)
<i>ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml</i>		QLL (18 ML per 1 day)
<b>WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 250-50 MCG/ACT, 500-50 MCG/ACT</b>	fluticasone-salmeterol	QLL (2 EA per 1 day)
<b>*Anti-Ige Monoclonal Antibodies***</b>		
<b>XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML</b>		PA
<b>XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML</b>		PA
<b>XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG</b>		PA
<b>*Anti-Inflammatory Agents***</b>		
<i>cromolyn sodium inhalation nebulization solution 20 mg/2ml</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Beta Adrenergics***</b>		
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	Proventil HFA	
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml</i>		QLL (12 ML per 1 day)
<i>albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%</i>		QLL (2 ML per 1 day)
<i>albuterol sulfate nebulization solution 0.63 mg/3ml inhalation</i>		QLL (12 ML per 1 day)
<i>albuterol sulfate nebulization solution 1.25 mg/3ml inhalation</i>		QLL (12 ML per 1 day)
<i>albuterol sulfate oral syrup 2 mg/5ml</i>		
<i>levalbuterol tartrate inhalation aerosol 45 mcg/act</i>	Xopenex HFA	ST
<b>STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT</b>		
<b>*Bronchodilators - Anticholinergics***</b>		
<b>INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT</b>		
<i>ipratropium bromide inhalation solution 0.02 %</i>		
<b>*Leukotriene Receptor Antagonists***</b>		
<i>montelukast sodium oral packet 4 mg</i>	Singulair	PA; QLL (30 Packets per 30 days); AL (Max 2 Years)
<i>montelukast sodium oral tablet 10 mg</i>	Singulair	QLL (30 Tablets per 30 days)
<i>montelukast sodium oral tablet chewable 4 mg, 5 mg</i>	Singulair	QLL (30 Tablets per 30 days)
<b>*Steroid Inhalants***</b>		
<i>budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>	Pulmicort	QLL (120 ML per 30 days)
<i>fluticasone propionate diskus aerosol powder breath activated 100 mcg/act inhalation</i>		QLL (60 EA per 30 days)
<i>fluticasone propionate diskus aerosol powder breath activated 250 mcg/act inhalation</i>		QLL (240 EA per 30 days)
<i>fluticasone propionate diskus aerosol powder breath activated 50 mcg/act inhalation</i>		QLL (60 EA per 30 days)
<i>fluticasone propionate hfa inhalation aerosol 110 mcg/act, 220 mcg/act, 44 mcg/act</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT</b>		QLL (10.6 GM per 30 days)
<b>QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 80 MCG/ACT</b>		QLL (21.2 GM per 30 days)
<b>*Xanthines***</b>		
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>		
<i>theophylline er oral tablet extended release 24 hour 400 mg, 600 mg</i>		
<i>theophylline oral elixir 80 mg/15ml</i>	Elixophyllin	
<i>theophylline oral solution 80 mg/15ml</i>		
<b>*ANTICOAGULANTS*</b>		
<b>*Coumarin Anticoagulants***</b>		
<b>JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG</b>	warfarin sodium	
<i>warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	Jantoven	
<b>*Direct Factor Xa Inhibitors***</b>		
<b>ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG</b>		
<b>ELIQUIS ORAL TABLET 2.5 MG, 5 MG</b>		Smart Edit Conditions Apply; QLL (2 EA per 1 day)
<b>XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG</b>		Smart Edit Conditions Apply; QLL (1 EA per 1 day)
<b>XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 &amp; 20 MG</b>		QLL (45 Days Supply per 168 days)
<b>*Heparins And Heparinoid-Like Agents***</b>		
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml</i>		
<i>heparin sodium (porcine) pf injection solution 1000 unit/ml</i>		
<b>*Low Molecular Weight Heparins***</b>		
<i>enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml</i>	Lovenox	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Thrombin Inhibitors - Selective Direct &amp; Reversible***</b>		
<i>dabigatran etexilate mesylate oral capsule 150 mg, 75 mg</i>	Pradaxa	QLL (2 EA per 1 day)
<b>PRADAXA ORAL CAPSULE 110 MG</b>	dabigatran etexilate mesylate	QLL (2 EA per 1 day)
<b>PRADAXA ORAL CAPSULE 150 MG, 75 MG</b>	dabigatran etexilate mesylate	QLL (2 EA per 1 day)
<b>*ANTICONVULSANTS*</b>		
<b>*Anticonvulsants - Benzodiazepines***</b>		
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	KlonoPIN	
<i>clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>		
<i>diazepam rectal gel 10 mg, 2.5 mg, 20 mg</i>		QLL (10 EA per 30 days)
<b>VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML</b>		QLL (10 EA per 30 days); AL (Min 6 Years)
<b>VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 7.5 MG/0.1ML</b>		QLL (10 EA per 30 days); AL (Min 6 Years)
<b>VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 10 MG/0.1ML</b>		QLL (10 EA per 30 days); AL (Min 6 Years)
<b>VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML</b>		QLL (10 EA per 30 days); AL (Min 6 Years)
<b>*Anticonvulsants - Misc.***</b>		
<i>carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg</i>	Carbatrol	QLL (120 Tablets per 30 days)
<i>carbamazepine er oral tablet extended release 12 hour 100 mg</i>	TEGretol-XR	QLL (10 EA per 1 day)
<i>carbamazepine er oral tablet extended release 12 hour 200 mg</i>	TEGretol-XR	QLL (5 EA per 1 day)
<i>carbamazepine er oral tablet extended release 12 hour 400 mg</i>	TEGretol-XR	QLL (120 Tablets per 30 days)
<i>carbamazepine oral suspension 100 mg/5ml</i>	TEGretol	
<i>carbamazepine oral tablet 200 mg</i>	Epitol	
<i>carbamazepine oral tablet chewable 100 mg</i>		
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	Neurontin	Smart Edit Conditions Apply; QLL (3600 MG (cumulative) per 1 day)
<i>gabapentin oral solution 250 mg/5ml, 300 mg/6ml</i>	Neurontin	QLL (3600 MG (cumulative) per 1 day)
<i>gabapentin oral tablet 600 mg, 800 mg</i>	Neurontin	Smart Edit Conditions Apply; QLL (3600 MG (cumulative) per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>lamotrigine oral tablet 100 mg, 200 mg</i>	LaMICtal	QLL (2 EA per 1 day)
<i>lamotrigine oral tablet 150 mg</i>	LaMICtal	QLL (3 EA per 1 day)
<i>lamotrigine oral tablet 25 mg</i>	LaMICtal	QLL (6 EA per 1 day)
<i>lamotrigine oral tablet chewable 25 mg</i>	LaMICtal	
<i>lamotrigine oral tablet chewable 5 mg</i>	LaMICtal	QLL (8 EA per 1 day)
<i>levetiracetam er tablet extended release 24 hour 500 mg oral</i>	Keppra XR	QLL (6 EA per 1 day)
<i>levetiracetam er tablet extended release 24 hour 750 mg oral</i>	Keppra XR	QLL (4 EA per 1 day)
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5ml</i>	Keppra	
<i>levetiracetam oral tablet 1000 mg</i>	Keppra	QLL (3 EA per 1 day)
<i>levetiracetam oral tablet 250 mg</i>	Keppra	
<i>levetiracetam oral tablet 500 mg</i>	Keppra	QLL (6 EA per 1 day)
<i>levetiracetam oral tablet 750 mg</i>	Keppra	QLL (4 EA per 1 day)
<i>oxcarbazepine oral suspension 300 mg/5ml</i>	Trileptal	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	Trileptal	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg, 75 mg</i>	Lyrica	PA; QLL (3 EA per 1 day)
<i>pregabalin oral capsule 225 mg, 300 mg</i>	Lyrica	PA; QLL (2 EA per 1 day)
<i>primidone oral tablet 250 mg, 50 mg</i>	Mysoline	
<i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>	Topamax Sprinkle	QLL (120 Capsules per 30 days)
<i>topiramate oral tablet 100 mg, 25 mg, 50 mg</i>	Topamax	QLL (120 Tablets per 30 days)
<i>topiramate oral tablet 200 mg</i>	Topamax	QLL (2 EA per 1 day)
<i>zonisamide oral capsule 100 mg, 25 mg</i>	Zonegran	QLL (180 Capsules per 30 days)
<i>zonisamide oral capsule 50 mg</i>		QLL (180 Capsules per 30 days)
<b>*Gaba Modulators***</b>		
<i>tiagabine hcl oral tablet 12 mg, 4 mg</i>		QLL (4 EA per 1 day)
<i>tiagabine hcl oral tablet 16 mg</i>		QLL (3 EA per 1 day)
<i>tiagabine hcl oral tablet 2 mg</i>		QLL (2 EA per 1 day)
<b>*Hydantoins***</b>		
<b>PHENYTOIN INFATABS ORAL TABLET CHEWABLE 50 MG</b>	phenytoin	
<i>phenytoin oral suspension 125 mg/5ml</i>	Dilantin	
<i>phenytoin oral tablet chewable 50 mg</i>	Phenytoin Infatabs	
<i>phenytoin sodium extended oral capsule 100 mg</i>	Dilantin	



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Succinimides***</b>		
<i>ethosuximide oral capsule 250 mg</i>	Zarontin	
<i>ethosuximide oral solution 250 mg/5ml</i>	Zarontin	
<b>*Valproic Acid***</b>		
<i>divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg</i>	Depakote ER	
<i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>	Depakote	
<i>valproic acid oral capsule 250 mg</i>		
<i>valproic acid oral solution 250 mg/5ml</i>		
<b>*ANTIDEPRESSANTS*</b>		
<b>*Alpha-2 Receptor Antagonists (Tetracyclics)***</b>		
<i>mirtazapine oral tablet 15 mg</i>	Remeron	QLL (30 Tablets per 30 days)
<i>mirtazapine oral tablet 30 mg</i>	Remeron	QLL (1 EA per 1 day)
<i>mirtazapine oral tablet 45 mg</i>		QLL (1 EA per 1 day)
<i>mirtazapine oral tablet 7.5 mg</i>		QLL (30 Tablets per 30 days)
<i>mirtazapine oral tablet dispersible 15 mg, 45 mg</i>	Remeron SolTab	QLL (30 Tablets per 30 days)
<i>mirtazapine oral tablet dispersible 30 mg</i>	Remeron SolTab	QLL (1 EA per 1 day)
<b>*Antidepressants - Misc.***</b>		
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg</i>	Wellbutrin SR	QLL (120 Tablets per 30 days)
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 150 mg, 200 mg</i>	Wellbutrin SR	QLL (60 Tablets per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg</i>	Wellbutrin XL	QLL (90 Tablets per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg</i>	Wellbutrin XL	QLL (30 Tablets per 30 days)
<i>bupropion hcl oral tablet 100 mg</i>		QLL (3 EA per 1 day)
<i>bupropion hcl oral tablet 75 mg</i>		QLL (180 Tablets per 30 days)
<b>*Monoamine Oxidase Inhibitors (Maois)***</b>		
<i>phenelzine sulfate oral tablet 15 mg</i>	Nardil	QLL (1 EA per 1 day); AL (Min 12 Years)
<b>*Selective Serotonin Reuptake Inhibitors (Ssris)***</b>		
<i>citalopram hydrobromide oral solution 10 mg/5ml</i>		QLL (600 ML per 30 days); AL (Max 12 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>citalopram hydrobromide oral tablet 10 mg, 20 mg</i>	CeleXA	QLL (2 EA per 1 day)
<i>citalopram hydrobromide oral tablet 40 mg</i>	CeleXA	QLL (30 Tablets per 30 days)
<i>escitalopram oxalate oral solution 5 mg/5ml</i>		QLL (20 ML per 1 day); AL (Max 12 Years)
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	Lexapro	QLL (30 Tablets per 30 days)
<i>fluoxetine hcl oral capsule 10 mg</i>	PROzac	QLL (30 Capsules per 30 days)
<i>fluoxetine hcl oral capsule 20 mg</i>	PROzac	QLL (2 EA per 1 day)
<i>fluoxetine hcl oral capsule 40 mg</i>	PROzac	QLL (60 Capsules per 30 days)
<i>fluoxetine hcl oral solution 20 mg/5ml</i>		QLL (600 ML per 30 days)
<i>fluvoxamine maleate oral tablet 100 mg</i>		QLL (90 Tablets per 30 days)
<i>fluvoxamine maleate oral tablet 25 mg</i>		QLL (30 Tablets per 30 days)
<i>fluvoxamine maleate oral tablet 50 mg</i>		QLL (1 EA per 1 day)
<i>paroxetine hcl oral tablet 10 mg, 20 mg</i>	Paxil	QLL (30 Tablets per 30 days)
<i>paroxetine hcl oral tablet 30 mg</i>	Paxil	QLL (60 Tablets per 30 days)
<i>paroxetine hcl oral tablet 40 mg</i>	Paxil	QLL (45 Tablets per 30 days)
<i>sertraline hcl oral concentrate 20 mg/ml</i>	Zoloft	QLL (300 ML per 30 days); AL (Max 12 Years)
<i>sertraline hcl oral tablet 100 mg, 25 mg</i>	Zoloft	QLL (2 EA per 1 day)
<i>sertraline hcl oral tablet 50 mg</i>	Zoloft	QLL (60 Tablets per 30 days)
<b>*Serotonin Modulators***</b>		
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>		
<b>*Serotonin-Norepinephrine Reuptake Inhibitors (Snris)***</b>		
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg</i>	Pristiq	QLL (1 EA per 1 day); AL (Min 18 Years)
<i>duloxetine hcl capsule delayed release particles 20 mg oral</i>	Cymbalta	QLL (2 EA per 1 day)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	Cymbalta	QLL (2 EA per 1 day)
<i>duloxetine hcl oral capsule delayed release particles 30 mg</i>	Cymbalta	QLL (30 Capsules per 30 days)
<i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	Effexor XR	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Tricyclic Agents***</b>		
<i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		
<i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		
<i>doxepin hcl oral concentrate 10 mg/ml</i>		
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>		
<i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	Pamelor	
<i>nortriptyline hcl oral solution 10 mg/5ml</i>		AL (Max 12 Years)
<b>*ANTIDIABETICS*</b>		
<b>*Alpha-Glucosidase Inhibitors***</b>		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>		QLL (3 EA per 1 day)
<b>*Biguanides***</b>		
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>		QLL (4 EA per 1 day)
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>		QLL (2 EA per 1 day)
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>		
<b>*Diabetic Other***</b>		
<b>BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE</b>		QLL (2 EA per 30 days)
<b>BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE</b>		QLL (2 EA per 30 days)
<b>BD GLUCOSE ORAL TABLET CHEWABLE 5 GM</b>		OTC
<i>glucose oral tablet chewable 4 gm</i>	Dex4 Quick Dissolve Glucose	OTC
<b>GLUTOSE 15 ORAL GEL 40 %</b>	cvs glucose	OTC
<b>GLUTOSE 45 ORAL GEL 40 %</b>	cvs glucose	OTC
<b>GLUTOSE 5 ORAL GEL 40 %</b>	cvs glucose	OTC
<b>GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML</b>		QLL (2 ML per 30 days)
<b>GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML</b>		QLL (0.4 ML per 30 days)
<b>GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML</b>		QLL (2 ML per 30 days)
<b>INSTA-GLUCOSE ORAL GEL 77.4 %</b>		OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors***</b>		
<i>alogliptin benzoate oral tablet 12.5 mg, 25 mg, 6.25 mg</i>		QLL (1 EA per 1 day)
<b>*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations***</b>		
<i>alogliptin-metformin hcl oral tablet 12.5-1000 mg, 12.5-500 mg</i>		QLL (2 EA per 1 day)
<b>*Dpp-4 Inhibitor-Thiazolidinedione Combinations***</b>		
<i>alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg</i>		QLL (1 EA per 1 day)
<b>*Human Insulin***</b>		
<b>HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML</b>		
<b>HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML</b>		
<b>HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML</b>	insulin lispro prot & lispro	
<b>HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML</b>		
<b>HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML</b>		
<i>insulin lispro (1 unit dial) subcutaneous solution pen-injector 100 unit/ml</i>	Admelog SoloStar	
<i>insulin lispro injection solution 100 unit/ml</i>	Admelog	
<i>insulin lispro junior kwikpen subcutaneous solution pen-injector 100 unit/ml</i>	HumaLOG Junior KwikPen	
<i>insulin lispro prot &amp; lispro subcutaneous suspension pen-injector (75-25) 100 unit/ml</i>	HumaLOG Mix 75/25 KwikPen	
<b>LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>	insulin glargine solostar	
<b>LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML</b>	insulin glargine	
<b>NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML</b>		OTC
<b>NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML</b>		OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML</b>		OTC
<b>NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML</b>		
<b>NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML</b>		OTC
<b>NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML</b>		OTC
<b>NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML</b>		OTC
<b>NOVOLIN R INJECTION SOLUTION 100 UNIT/ML</b>		OTC
<b>NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML</b>		OTC
<b>*Incretin Mimetic Agents (Glp-1 Receptor Agonists)***</b>		
<b>OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML</b>		ST; Diagnosis Required; QLL (0.1072 ML per 1 day)
<b>OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML</b>		ST; Diagnosis Required; QLL (0.1071 ML per 1 day)
<b>OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML</b>		ST; Diagnosis Required; QLL (0.1071 ML per 1 day)
<b>TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML</b>		ST; Diagnosis Required; QLL (4 Pens per 28 days)
<b>*Meglitinide Analogues***</b>		
<i>nateglinide oral tablet 120 mg, 60 mg</i>		QLL (3 EA per 1 day)
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>		QLL (4 EA per 1 day)
<i>repaglinide oral tablet 2 mg</i>		QLL (8 EA per 1 day)
<b>*Sodium-Glucose Co-Transporter 2 (Sglt2) Inhibitors***</b>		
<b>JARDIANCE ORAL TABLET 10 MG, 25 MG</b>		PA; QLL (1 EA per 1 day)
<b>STEGLATRO ORAL TABLET 15 MG, 5 MG</b>		ST; QLL (1 EA per 1 day)

Drug Name	Reference	Restrictions
<b>*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***</b>		
SEGLUROMET ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 7.5-1000 MG, 7.5-500 MG		ST; QLL (2 EA per 1 day)
<b>*Sulfonylurea-Biguanide Combinations***</b>		
<i>glipizide-metformin hcl oral tablet 2.5-250 mg</i>		QLL (2 EA per 1 day)
<i>glipizide-metformin hcl oral tablet 2.5-500 mg</i>		QLL (3 EA per 1 day)
<i>glipizide-metformin hcl oral tablet 5-500 mg</i>		QLL (4 EA per 1 day)
<b>*Sulfonylureas***</b>		
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>		
<i>glipizide er oral tablet extended release 24 hour 10 mg</i>	Glucotrol XL	QLL (2 EA per 1 day)
<i>glipizide er oral tablet extended release 24 hour 2.5 mg</i>		QLL (1 EA per 1 day)
<i>glipizide er oral tablet extended release 24 hour 5 mg</i>	Glucotrol XL	QLL (1 EA per 1 day)
<i>glipizide oral tablet 10 mg, 5 mg</i>		
<i>glipizide xl oral tablet extended release 24 hour 10 mg</i>	Glucotrol XL	QLL (2 EA per 1 day)
<i>glipizide xl oral tablet extended release 24 hour 2.5 mg</i>		QLL (1 EA per 1 day)
<i>glipizide xl oral tablet extended release 24 hour 5 mg</i>	Glucotrol XL	QLL (1 EA per 1 day)
<b>*Thiazolidinediones***</b>		
<i>pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg</i>	Actos	QLL (30 Tablets per 30 days)
<b>*ANTIDIARRHEAL/PROBIOTIC AGENTS*</b>		
<b>*Antidiarrheal/Probiotic Agents - Misc.***</b>		
<i>acidophilus lactobacillus oral capsule</i>	Abatinex	OTC
<i>acidophilus probiotic oral tablet 10 mg</i>	Floranex	OTC
<i>bismuth subsalicylate oral tablet chewable 262 mg</i>	Pepto-Bismol	OTC
<i>cvs probiotic (lactobacillus) oral capsule</i>	Culturelle	OTC
<b>ENVIVE ORAL CAPSULE</b>	acidophilus probiotic blend	OTC
<b>FLORANEX ORAL TABLET</b>	acidophilus probiotic	OTC
<i>lactobacillus extra strength oral capsule</i>	Abatinex	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>PEDIA-LAX PROBIOTIC YUMS ORAL TABLET CHEWABLE</b>		OTC
<i>pink bismuth maximum strength oral suspension 525 mg/15ml</i>	Kaopectate Extra Strength	OTC
<i>pink bismuth oral suspension 262 mg/15ml</i>	Kaopectate	OTC
<i>probiotic oral capsule 250 mg</i>	Florastor	OTC
<b>PROBITROL ORAL CAPSULE</b>	acidophilus probiotic blend	OTC
<b>PROMEROL ORAL CAPSULE</b>	acidophilus probiotic blend	OTC
<b>RISAQUAD ORAL CAPSULE</b>	acidophilus probiotic blend	OTC
<b>RISAQUAD-2 ORAL CAPSULE</b>	acidophilus probiotic blend	OTC
<i>sm acidophilus oral capsule 10 mg</i>	Abatinex	OTC
<b>*Antidiarrheal/Probiotic Combinations***</b>		
<i>acidophilus/pectin oral capsule</i>		OTC
<b>*Antiperistaltic Agents***</b>		
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	Lomotil	
<i>eq anti-diarrheal oral capsule 2 mg</i>	Imodium A-D	OTC
<i>loperamide hcl oral suspension 1 mg/7.5ml</i>		OTC
<i>loperamide hcl oral tablet 2 mg</i>	Imodium A-D	OTC
<b>*ANTIDOTES AND SPECIFIC ANTAGONISTS*</b>		
<b>*Antidotes - Chelating Agents***</b>		
<b>CHEMET ORAL CAPSULE 100 MG</b>		
<b>*Antidotes And Specific Antagonists***</b>		
<i>sm ipecac syrup oral syrup</i>		OTC
<b>*Opioid Antagonists***</b>		
<i>naloxone hcl injection solution 0.4 mg/ml</i>		
<i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i>		QLL (8 ML per 30 days)
<i>naloxone hcl nasal liquid 4 mg/0.1ml</i>	Narcan	QLL (2 EA per 1 fill)
<i>naltrexone hcl oral tablet 50 mg</i>		QLL (3 EA per 1 day)
<b>VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG</b>		QLL (1 EA per 28 days)
<b>*ANTIEMETICS*</b>		
<b>*5-Ht3 Receptor Antagonists***</b>		
<i>granisetron hcl oral tablet 1 mg</i>		ST

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>ondansetron hcl oral solution 4 mg/5ml</i>		QLL (15 ML per 1 day)
<i>ondansetron hcl oral tablet 24 mg</i>		QLL (1 Tablets per 1 day)
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>		QLL (3 EA per 1 day)
<i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>		QLL (3 EA per 1 day)
<b>*Antiemetics - Anticholinergic***</b>		
<b>DRAMAMINE LESS DROWSY ORAL TABLET 25 MG</b>	meclizine hcl	OTC
<b>DRIMINATE ORAL TABLET 50 MG</b>	motion sickness relief	OTC; QLL (8 EA per 1 day)
<i>meclizine hcl oral tablet 12.5 mg</i>		
<i>meclizine hcl oral tablet 25 mg</i>	Dramamine Less Drowsy	
<i>motion sickness relief oral tablet 50 mg</i>	Driminate	OTC; QLL (8 EA per 1 day)
<i>qc motion sickness relief oral tablet 50 mg</i>	Driminate	OTC; QLL (8 EA per 1 day)
<i>sm motion sickness oral tablet 50 mg</i>	Driminate	OTC; QLL (8 EA per 1 day)
<b>*Substance P/Neurokinin 1 (Nk1) Receptor Antagonists***</b>		
<i>aprepitant oral capsule 125 mg, 40 mg</i>		QLL (6 EA per 30 days)
<i>aprepitant oral capsule 80 &amp; 125 mg</i>	Emend Tri-Pack	QLL (6 EA per 30 days)
<i>aprepitant oral capsule 80 mg</i>	Emend	QLL (6 EA per 30 days)
<b>*ANTIFUNGALS*</b>		
<b>*Antifungals***</b>		
<i>griseofulvin microsize oral suspension 125 mg/5ml</i>		ST; Smart Edit Conditions Apply
<i>griseofulvin microsize oral tablet 500 mg</i>		ST; Smart Edit Conditions Apply
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>		ST; Smart Edit Conditions Apply
<i>nystatin oral tablet 500000 unit</i>		
<i>terbinafine hcl oral tablet 250 mg</i>		QLL (1 EA per 1 day)
<b>*Imidazoles***</b>		
<i>ketoconazole oral tablet 200 mg</i>		QLL (2 EA per 1 day)
<b>*Triazoles***</b>		
<b>DIFLUCAN ORAL TABLET 100 MG, 200 MG</b>	fluconazole	QLL (2 EA per 1 day)
<i>fluconazole oral suspension reconstituted 10 mg/ml</i>		
<i>fluconazole oral suspension reconstituted 40 mg/ml</i>	Diflucan	
<i>fluconazole tablet 100 mg oral</i>	Diflucan	QLL (2 EA per 1 day)
<i>fluconazole tablet 150 mg oral</i>	Diflucan	QLL (14 EA per 28 days)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>fluconazole tablet 200 mg oral</i>	Diflucan	QLL (2 EA per 1 day)
<i>fluconazole tablet 50 mg oral</i>		QLL (2 EA per 1 day)
<i>itraconazole oral capsule 100 mg</i>	Sporanox	QLL (4 EA per 1 day)
<b>SPORANOX ORAL CAPSULE 100 MG</b>	itraconazole	QLL (4 EA per 1 day)
<i>voriconazole oral tablet 200 mg, 50 mg</i>	Vfend	PA
<b>*ANTIHISTAMINES*</b>		
<b>*Antihistamines - Alkylamines***</b>		
<i>chlorpheniramine maleate er oral tablet extended release 12 mg</i>	Chlor-Trimeton Allergy	OTC; QLL (2 EA per 1 day)
<i>chlorpheniramine maleate oral tablet 4 mg</i>	Wal-finate	OTC
<b>HISTEX ORAL SYRUP 2.5 MG/5ML</b>		OTC
<b>HISTEX PD ORAL LIQUID 0.938 MG/ML</b>	triprolidine hcl	OTC
<b>PEDIACLEAR PD CHILDRENS ORAL LIQUID 0.625 MG/ML</b>	triprolidine hcl	OTC
<i>triprolidine hcl oral liquid 0.938 mg/ml</i>	Histex PD	OTC
<b>*Antihistamines - Ethanolamines***</b>		
<i>allergy relief oral capsule 25 mg</i>	Banophen	OTC
<i>clemastine fumarate oral tablet 2.68 mg</i>		
<i>diphenhydramine hcl oral capsule 25 mg, 50 mg</i>	Banophen	
<i>diphenhydramine hcl oral liquid 12.5 mg/5ml</i>	Banophen	OTC; QLL (20 ML per 1 day)
<b>*Antihistamines - Non-Sedating***</b>		
<i>allergy childrens oral suspension 30 mg/5ml</i>	Allegra Allergy Childrens	OTC; QLL (30 ML per 1 day)
<i>cetirizine hcl oral solution 1 mg/ml</i>	KLS Aller-Tec Childrens	QLL (150 ML per 30 days); AL (Min 6 Years)
<i>cetirizine hcl oral tablet 10 mg</i>	KLS Aller-Tec	OTC; QLL (1 EA per 1 day)
<i>cetirizine hcl oral tablet 5 mg</i>		OTC; QLL (1 EA per 1 day)
<i>cvs allergy relief oral tablet 180 mg</i>	Allegra Allergy	OTC; QLL (1 EA per 1 day)
<i>cvs allergy relief oral tablet 60 mg</i>	Allegra Allergy	OTC; QLL (2 EA per 1 day)
<i>cvs allergy relief oral tablet dispersible 10 mg</i>	Alavert	OTC; QLL (1 EA per 1 day)
<i>levocetirizine dihydrochloride oral tablet 5 mg</i>	Xyzal Allergy 24HR	QLL (1 EA per 1 day)
<i>loratadine childrens oral tablet chewable 5 mg</i>	Claritin	OTC; QLL (2 EA per 1 day)
<i>loratadine oral tablet 10 mg</i>	Claritin	OTC; QLL (1 EA per 1 day)
<b>*Antihistamines - Phenothiazines***</b>		
<i>promethazine hcl oral solution 6.25 mg/5ml</i>		QLL (80 ML per 1 day)
<i>promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg</i>		
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	Promethegan	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG</b>	promethazine hcl	
<b>PROMETHEGAN RECTAL SUPPOSITORY 50 MG</b>		
<b>*Antihistamines - Piperidines***</b>		
<i>cyproheptadine hcl oral syrup 2 mg/5ml</i>		
<i>cyproheptadine hcl oral tablet 4 mg</i>		
<b>*ANTIHYPERLIPIDEMICS*</b>		
<b>*Adenosine Triphosphate-Citrate Lyase (Acl) Inhibitors***</b>		
<b>NEXLETOL ORAL TABLET 180 MG</b>		PA; QLL (1 EA per 1 day)
<b>*Antihyperlipidemics - Misc.***</b>		
<i>icosapent ethyl capsule 0.5 gm oral</i>	Vascepa	PA; QLL (8 EA per 1 day)
<i>icosapent ethyl oral capsule 1 gm</i>	Vascepa	PA; QLL (4 EA per 1 day)
<i>omega-3-acid ethyl esters oral capsule 1 gm</i>	Lovaza	QLL (4 EA per 1 day)
<b>*Bile Acid Sequestrants***</b>		
<i>cholestyramine light oral packet 4 gm</i>	Prevalite	
<i>cholestyramine oral packet 4 gm</i>	Questran	
<i>colestipol hcl oral tablet 1 gm</i>	Colestid	
<b>PREVALITE ORAL PACKET 4 GM</b>	cholestyramine light	
<b>*Fibric Acid Derivatives***</b>		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>		
<i>fenofibrate oral tablet 145 mg, 48 mg</i>	Tricor	
<i>fenofibrate oral tablet 160 mg, 54 mg</i>		
<i>gemfibrozil oral tablet 600 mg</i>	Lopid	QLL (60 Tablets per 30 days)
<b>*Hmg Coa Reductase Inhibitors***</b>		
<i>atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	Lipitor	QLL (30 Tablets per 30 days)
<i>fluvastatin sodium oral capsule 20 mg, 40 mg</i>		ST; QLL (30 Capsules per 30 days)
<i>lovastatin oral tablet 10 mg, 20 mg</i>		QLL (30 Tablets per 30 days)
<i>lovastatin oral tablet 40 mg</i>		QLL (60 Tablets per 30 days)
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>		QLL (30 Tablets per 30 days)
<i>rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	Crestor	QLL (30 EA per 30 days)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg</i>	Zocor	QLL (30 Tablets per 30 days)
<i>simvastatin oral tablet 5 mg, 80 mg</i>		QLL (30 Tablets per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Intestinal Cholesterol Absorption Inhibitors***</b>		
<i>ezetimibe oral tablet 10 mg</i>	Zetia	QLL (1 EA per 1 day)
<b>*Pcsk9 Inhibitors***</b>		
<b>REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML</b>		PA
<b>REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML</b>		PA
<b>REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML</b>		PA
<b>*ANTIHYPERTENSIVES*</b>		
<b>*Ace Inhibitor &amp; Calcium Channel Blocker Combinations***</b>		
<i>amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 5-10 mg, 5-20 mg</i>	Lotrel	QLL (1 EA per 1 day)
<i>amlodipine besy-benazepril hcl oral capsule 2.5-10 mg, 5-40 mg</i>		QLL (1 EA per 1 day)
<b>*Ace Inhibitors &amp; Thiazide/Thiazide-Like***</b>		
<b>ACCURETIC ORAL TABLET 10-12.5 MG</b>	quinapril-hydrochlorothiazide	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg</i>	Vaseretic	QLL (2 EA per 1 day)
<i>enalapril-hydrochlorothiazide oral tablet 5-12.5 mg</i>		QLL (1 EA per 1 day)
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg</i>	Zestoretic	QLL (1 EA per 1 day)
<i>lisinopril-hydrochlorothiazide oral tablet 20-25 mg</i>	Zestoretic	QLL (2 EA per 1 day)
<i>lisinopril-hydrochlorothiazide tablet 20-12.5 mg oral</i>	Zestoretic	QLL (2 EA per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet 20-12.5 mg</i>	Accuretic	QLL (1 EA per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet 20-25 mg</i>		QLL (1 EA per 1 day)
<b>*Ace Inhibitors***</b>		
<i>benazepril hcl oral tablet 10 mg, 20 mg, 40 mg</i>	Lotensin	QLL (2 EA per 1 day)
<i>benazepril hcl oral tablet 5 mg</i>		QLL (2 EA per 1 day)
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	Vasotec	QLL (2 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg</i>		QLL (2 EA per 1 day)
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	Zestril	QLL (2 Tablets per 1 day)
<i>quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	Accupril	QLL (2 EA per 1 day)
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	Altace	QLL (2 EA per 1 day)
<i>trandolapril oral tablet 1 mg, 2 mg</i>		QLL (1 EA per 1 day)
<i>trandolapril oral tablet 4 mg</i>		QLL (2 EA per 1 day)
<b>*Angiotensin Ii Receptor Antag &amp; Ca Channel Blocker Comb***</b>		
<i>amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	Exforge	QLL (1 EA per 1 day)
<b>*Angiotensin Ii Receptor Antag &amp; Thiazide/Thiazide-Like***</b>		
<i>candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	Atacand HCT	ST; QLL (1 EA per 1 day)
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg</i>	Avalide	
<i>irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg</i>	Avalide	QLL (1 EA per 1 day)
<i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	Hyzaar	QLL (1 EA per 1 day)
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	Diovan HCT	QLL (30 Tablets per 30 days)
<b>*Angiotensin Ii Receptor Antagonists***</b>		
<i>candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	Atacand	ST; QLL (1 EA per 1 day)
<i>losartan potassium oral tablet 100 mg</i>	Cozaar	QLL (1 EA per 1 day)
<i>losartan potassium oral tablet 25 mg, 50 mg</i>	Cozaar	QLL (2 EA per 1 day)
<i>olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg</i>	Benicar	QLL (1 EA per 1 day)
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	Diovan	QLL (1 EA per 1 day)
<b>*Antiadrenergics - Centrally Acting***</b>		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>clonidine transdermal patch weekly 0.1 mg/24hr</i>	Catapres-TTS-1	ST
<i>clonidine transdermal patch weekly 0.2 mg/24hr</i>	Catapres-TTS-2	ST
<i>clonidine transdermal patch weekly 0.3 mg/24hr</i>	Catapres-TTS-3	ST
<i>guanfacine hcl oral tablet 1 mg</i>		QLL (240 EA per 30 days)
<i>guanfacine hcl oral tablet 2 mg</i>		QLL (120 EA per 30 days)
<i>methyldopa oral tablet 250 mg, 500 mg</i>		
<b>*Antiadrenergics - Peripherally Acting***</b>		
<i>doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg</i>	Cardura	QLL (30 Tablets per 30 days)
<i>doxazosin mesylate oral tablet 8 mg</i>	Cardura	QLL (2 EA per 1 day)
<i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>		QLL (4 EA per 1 day)
<i>terazosin hcl oral capsule 1 mg</i>		QLL (30 Capsules per 30 days)
<i>terazosin hcl oral capsule 10 mg, 2 mg</i>		QLL (2 EA per 1 day)
<i>terazosin hcl oral capsule 5 mg</i>		QLL (3 EA per 1 day)
<b>*Beta Blocker &amp; Diuretic Combinations***</b>		
<i>atenolol-chlorthalidone oral tablet 100-25 mg</i>	Tenoretic 100	
<i>atenolol-chlorthalidone oral tablet 50-25 mg</i>	Tenoretic 50	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>		
<i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>		
<b>*Selective Aldosterone Receptor Antagonists (Saras)***</b>		
<i>eplerenone oral tablet 25 mg, 50 mg</i>	Inspira	
<b>*Vasodilators***</b>		
<i>hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>		
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>		
<b>*ANTI-INFECTIVE AGENTS - MISC.*</b>		
<b>*Anti-Infective Agents - Misc.***</b>		
<i>metronidazole oral tablet 250 mg, 500 mg</i>		
<i>tinidazole oral tablet 250 mg, 500 mg</i>		
<i>trimethoprim oral tablet 100 mg</i>		
<b>XIFAXAN ORAL TABLET 550 MG</b>		PA

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Anti-Infective Misc. - Combinations***</b>		
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	Sulfatrim Pediatric	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg</i>	Bactrim	
<b>SULFATRIM PEDIATRIC ORAL SUSPENSION 200-40 MG/5ML</b>	sulfamethoxazole-trimethoprim	
<b>*Glycopeptides***</b>		
<i>vancomycin hcl oral capsule 125 mg, 250 mg</i>	Vancocin	QLL (8 EA per 1 day)
<b>*Leprostatics***</b>		
<i>dapsone oral tablet 100 mg, 25 mg</i>		
<b>*Lincosamides***</b>		
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	Cleocin	
<i>clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml</i>	Cleocin	
<b>*Oxazolidinones***</b>		
<i>linezolid oral tablet 600 mg</i>	Zyvox	QLL (2 EA per 1 day)
<b>*Urinary Anti-Infectives***</b>		
<i>methenamine hippurate oral tablet 1 gm</i>	Hiprex	
<i>methenamine mandelate oral tablet 0.5 gm, 1 gm</i>		
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	Macrochantin	
<i>nitrofurantoin monohyd macro oral capsule 100 mg</i>	Macrobid	
<i>nitrofurantoin oral suspension 25 mg/5ml</i>		AL (Max 12 Years)
<b>*ANTIMALARIALS*</b>		
<b>*Antimalarial Combinations***</b>		
<i>atovaquone-proguanil hcl oral tablet 250-100 mg</i>	Malarone	QLL (12 EA Max Qty Per Fill Retail)
<i>atovaquone-proguanil hcl oral tablet 62.5-25 mg</i>	Malarone	QLL (9 EA Max Qty Per Fill Retail)
<b>*Antimalarials***</b>		
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>		
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	Plaquenil	
<i>mefloquine hcl oral tablet 250 mg</i>		
<i>pyrimethamine oral tablet 25 mg</i>	Daraprim	PA

Drug Name	Reference	Restrictions
<b>*ANTIMYASTHENIC/CHOLINERGIC AGENTS*</b>		
<b>*Antimyasthenic/Cholinergic Agents***</b>		
<i>pyridostigmine bromide oral tablet 60 mg</i>	Mestinon	
<b>*ANTIMYCOBACTERIAL AGENTS*</b>		
<b>*Antimycobacterial Agents***</b>		
<i>ethambutol hcl oral tablet 100 mg</i>		
<i>ethambutol hcl oral tablet 400 mg</i>	Myambutol	
<i>isoniazid oral syrup 50 mg/5ml</i>		
<i>isoniazid oral tablet 100 mg, 300 mg</i>		
<b>PRIFTIN ORAL TABLET 150 MG</b>		
<i>pyrazinamide oral tablet 500 mg</i>		
<i>rifabutin oral capsule 150 mg</i>	Mycobutin	
<i>rifampin oral capsule 150 mg, 300 mg</i>		
<b>*ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES*</b>		
<b>*Alkylating Agents***</b>		
<b>MYLERAN ORAL TABLET 2 MG</b>		
<b>*Androgen Biosynthesis Inhibitors***</b>		
<i>abiraterone acetate oral tablet 250 mg</i>	Zytiga	PA
<b>*Antiadrenals***</b>		
<b>LYSODREN ORAL TABLET 500 MG</b>		
<b>*Antiandrogens***</b>		
<i>bicalutamide oral tablet 50 mg</i>	Casodex	QLL (1 EA per 1 day)
<b>*Antiestrogens***</b>		
<b>SOLTAMOX ORAL SOLUTION 10 MG/5ML</b>		
<i>tamoxifen citrate oral tablet 10 mg, 20 mg</i>		
<i>toremifene citrate oral tablet 60 mg</i>	Fareston	
<b>*Antimetabolites***</b>		
<i>capecitabine oral tablet 150 mg</i>	Xeloda	PA; Smart Edit Conditions Apply; QLL (140 EA per 21 days)
<i>capecitabine oral tablet 500 mg</i>	Xeloda	PA; Smart Edit Conditions Apply; QLL (154 EA per 21 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>mercaptopurine oral tablet 50 mg</i>		
<i>methotrexate sodium oral tablet 2.5 mg</i>		
<b>*Antineoplastic - Alk Inhibitors***</b>		
<b>ALECENSA ORAL CAPSULE 150 MG</b>		PA
<b>*Antineoplastic - Anti-Her2 Agents***</b>		
<b>TUKYSA ORAL TABLET 150 MG, 50 MG</b>		PA
<b>*Antineoplastic - Bcl-2 Inhibitors***</b>		
<b>VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG</b>		PA
<b>VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 &amp; 50 &amp; 100 MG</b>		PA
<b>*Antineoplastic - Bcr-Abl Kinase Inhibitors***</b>		
<i>imatinib mesylate oral tablet 100 mg</i>	Gleevec	PA; QLL (3 EA per 1 day)
<i>imatinib mesylate oral tablet 400 mg</i>	Gleevec	PA; QLL (2 EA per 1 day)
<b>SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 70 MG, 80 MG</b>		PA; QLL (30 EA per 30 days)
<b>SPRYCEL ORAL TABLET 20 MG</b>		PA; QLL (3 EA per 1 day)
<b>TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG</b>		PA; QLL (4 EA per 1 day)
<b>*Antineoplastic - Braf Kinase Inhibitors***</b>		
<b>TAFINLAR ORAL CAPSULE 50 MG, 75 MG</b>		PA
<b>TAFINLAR ORAL TABLET SOLUBLE 10 MG</b>		PA
<b>*Antineoplastic - Btk Inhibitors***</b>		
<b>IMBRUVICA ORAL CAPSULE 140 MG</b>		PA; QLL (120 EA per 30 days)
<b>IMBRUVICA ORAL CAPSULE 70 MG</b>		PA; QLL (1 EA per 1 day)
<b>IMBRUVICA ORAL SUSPENSION 70 MG/ML</b>		PA; QLL (6 ML per 1 day)
<b>IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG</b>		PA; QLL (1 EA per 1 day)
<b>*Antineoplastic - Egfr Inhibitors***</b>		
<i>erlotinib hcl oral tablet 100 mg, 150 mg, 25 mg</i>	Tarceva	PA; QLL (1 EA per 1 day)
<i>gefitinib oral tablet 250 mg</i>	Iressa	PA; QLL (1 EA per 1 day)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG</b>		PA
<b>TARCEVA ORAL TABLET 25 MG</b>	erlotinib hcl	PA; QLL (1 EA per 1 day)
<b>*Antineoplastic - Hedgehog Pathway Inhibitors***</b>		
<b>ERIVEDGE ORAL CAPSULE 150 MG</b>		PA
<b>*Antineoplastic - Mek Inhibitors***</b>		
<b>MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML</b>		PA
<b>MEKINIST ORAL TABLET 0.5 MG, 2 MG</b>		PA
<b>*Antineoplastic - Mtor Kinase Inhibitors***</b>		
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	Afinitor	PA; QLL (1 EA per 1 day)
<b>*Antineoplastic - Multikinase Inhibitors***</b>		
<b>CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG</b>		PA; QLL (1 EA per 1 day)
<b>CAPRELSA ORAL TABLET 100 MG, 300 MG</b>		PA
<i>lapatinib ditosylate oral tablet 250 mg</i>	Tykerb	PA; QLL (6 EA per 1 day)
<i>pazopanib hcl oral tablet 200 mg</i>	Votrient	PA; QLL (4 EA per 1 day)
<b>RYDAPT ORAL CAPSULE 25 MG</b>		PA
<i>sunitinib malate oral capsule 12.5 mg, 25 mg</i>	Sutent	PA
<i>sunitinib malate oral capsule 37.5 mg</i>	Sutent	PA; QLL (30 EA per 30 days)
<i>sunitinib malate oral capsule 50 mg</i>	Sutent	PA; QLL (1 EA per 1 day)
<b>*Antineoplastics Misc.***</b>		
<b>ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML</b>		PA
<i>hydroxyurea oral capsule 500 mg</i>	Hydrea	
<b>MATULANE ORAL CAPSULE 50 MG</b>		PA
<b>*Aromatase Inhibitors***</b>		
<i>anastrozole oral tablet 1 mg</i>	Arimidex	QLL (1 EA per 1 day)
<i>exemestane oral tablet 25 mg</i>	Aromasin	QLL (1 EA per 1 day)
<i>letrozole oral tablet 2.5 mg</i>	Femara	QLL (1 EA per 1 day)
<b>*Cyclin-Dependent Kinases (Cdk) Inhibitors***</b>		
<b>VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG</b>		PA; QLL (2 EA per 1 day)

Drug Name	Reference	Restrictions
<b>*Estrogens-Antineoplastic***</b>		
EMCYT ORAL CAPSULE 140 MG		
<b>*Folic Acid Antagonists Rescue Agents***</b>		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>		
<b>*Imidazotetrazines***</b>		
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>		
<b>*Janus Associated Kinase (Jak) Inhibitors***</b>		
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG		PA
<b>*Lhrh Analogs***</b>		
ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG		PA; Smart Edit Conditions Apply
<i>leuprolide acetate injection kit 1 mg/0.2ml</i>		PA
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG, 3.6 MG		PA; Smart Edit Conditions Apply
<b>*Mitotic Inhibitors***</b>		
<i>etoposide oral capsule 50 mg</i>		
<b>*Nitrogen Mustards And Related Analogues***</b>		
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>		
LEUKERAN ORAL TABLET 2 MG		
<b>*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors***</b>		
LYNPARZA ORAL TABLET 100 MG, 150 MG		PA; QLL (4 EA per 1 day)
<b>*Progestins-Antineoplastic***</b>		
<i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml</i>		
<i>megestrol acetate oral tablet 20 mg, 40 mg</i>		
<b>*Retinoids***</b>		
<i>tretinoin oral capsule 10 mg</i>		PA
<b>*Selective Retinoid X Receptor Agonists***</b>		
<i>bexarotene oral capsule 75 mg</i>	Targretin	PA

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Urinary Tract Protective Agents***</b>		
MESNEX ORAL TABLET 400 MG		
<b>*Vascular Endothelial Growth Factor (Vegf) Inhibitors***</b>		
INLYTA ORAL TABLET 1 MG, 5 MG		PA; QLL (4 EA per 1 day)
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG		PA
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG		PA
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG		PA
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG		PA
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG		PA
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG		PA
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG		PA
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG		PA
<b>*ANTIPARKINSON AND RELATED THERAPY AGENTS*</b>		
<b>*Antiparkinson Anticholinergics***</b>		
<i>benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg</i>		
<i>trihexyphenidyl hcl oral solution 0.4 mg/ml</i>		
<i>trihexyphenidyl hcl oral tablet 2 mg, 5 mg</i>		
<b>*Antiparkinson Dopaminergics***</b>		
<i>amantadine hcl oral capsule 100 mg</i>		
<i>amantadine hcl oral tablet 100 mg</i>		
<b>*Antiparkinson Monoamine Oxidase Inhibitors***</b>		
<i>selegiline hcl oral capsule 5 mg</i>		PA; Smart Edit Conditions Apply
<i>selegiline hcl oral tablet 5 mg</i>		PA; Smart Edit Conditions Apply

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Levodopa Combinations***</b>		
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>		
<i>carbidopa-levodopa oral tablet 10-100 mg</i>	Sinemet	
<i>carbidopa-levodopa oral tablet 25-100 mg</i>	Dhivy	
<i>carbidopa-levodopa oral tablet 25-250 mg</i>		
<i>carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg</i>		
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 50-200-200 mg</i>		PA; Smart Edit Conditions Apply; QLL (9 EA per 1 day)
<i>carbidopa-levodopa-entacapone oral tablet 37.5-150-200 mg</i>	Stalevo 150	PA; Smart Edit Conditions Apply; QLL (9 EA per 1 day)
<b>*Nonergoline Dopamine Receptor Agonists***</b>		
<i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>		PA; Smart Edit Conditions Apply
<i>ropinirole hcl er oral tablet extended release 24 hour 12 mg</i>		ST; QLL (2 EA per 1 day)
<i>ropinirole hcl er oral tablet extended release 24 hour 2 mg, 4 mg, 6 mg</i>		ST; QLL (1 EA per 1 day)
<i>ropinirole hcl er oral tablet extended release 24 hour 8 mg</i>		ST
<i>ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>		PA; Smart Edit Conditions Apply; QLL (3 EA per 1 day)
<b>*Peripheral Comt Inhibitors***</b>		
<i>entacapone oral tablet 200 mg</i>		PA; Smart Edit Conditions Apply; QLL (4 Tablets per 1 day)
<b>*ANTIPSYCHOTICS/ANTIMANIC AGENTS*</b>		
<b>*Antimanic Agents***</b>		
<i>lithium carbonate er oral tablet extended release 300 mg</i>	Lithobid	QLL (8 EA per 1 day)
<i>lithium carbonate er oral tablet extended release 450 mg</i>		QLL (6 EA per 1 day)
<i>lithium carbonate oral capsule 150 mg</i>		QLL (16 EA per 1 day)
<i>lithium carbonate oral capsule 300 mg</i>		QLL (8 EA per 1 day)
<i>lithium carbonate oral capsule 600 mg</i>		QLL (4 EA per 1 day)
<i>lithium carbonate oral tablet 300 mg</i>		QLL (8 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antipsychotics - Misc.***</b>		
<i>lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	Latuda	QLL (1 EA per 1 day); AL (Min 10 Years)
<b>VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG</b>		PA; QLL (1 EA per 1 day); AL (Min 18 Years)
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	Geodon	Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 18 Years)
<b>*Benzisoxazoles***</b>		
<b>INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML</b>		PA; QLL (3.5 ML per 168 days); AL (Min 18 Years)
<b>INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1560 MG/5ML</b>		PA; QLL (5 ML per 168 days); AL (Min 18 Years)
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML</b>		PA; QLL (0.75 ML per 28 days); AL (Min 18 Years)
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 156 MG/ML</b>		PA; QLL (1 ML per 28 days); AL (Min 18 Years)
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 234 MG/1.5ML</b>		PA; QLL (1.5 ML per 28 days); AL (Min 18 Years)
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML</b>		PA; QLL (0.25 ML per 28 days); AL (Min 18 Years)
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 78 MG/0.5ML</b>		PA; QLL (0.5 ML per 28 days); AL (Min 18 Years)
<b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML</b>		PA; QLL (0.88 ML per 84 days); AL (Min 18 Years)
<b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 410 MG/1.32ML</b>		PA; QLL (1.32 ML per 84 days); AL (Min 18 Years)
<b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 546 MG/1.75ML</b>		PA; QLL (1.75 ML per 84 days); AL (Min 18 Years)
<b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 819 MG/2.63ML</b>		PA; QLL (2.63 ML per 84 days); AL (Min 18 Years)
<i>risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	RisperDAL Consta	PA; QLL (2 ML per 28 days); AL (Min 18 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>risperidone oral solution 1 mg/ml</i>	RisperDAL	Smart Edit Conditions Apply; QLL (16 ML per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet 0.25 mg</i>		Smart Edit Conditions Apply; QLL (2 Tablets per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet 0.5 mg, 1 mg, 2 mg</i>	RisperDAL	Smart Edit Conditions Apply; QLL (2 Tablets per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet 3 mg</i>	RisperDAL	Smart Edit Conditions Apply; QLL (3 Tablets per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet 4 mg</i>	RisperDAL	Smart Edit Conditions Apply; QLL (4 Tablets per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet dispersible 0.25 mg, 1 mg, 2 mg</i>		Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet dispersible 0.5 mg</i>		Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet dispersible 3 mg</i>		Smart Edit Conditions Apply; QLL (3 EA per 1 day); AL (Min 5 Years)
<i>risperidone oral tablet dispersible 4 mg</i>		Smart Edit Conditions Apply; QLL (4 EA per 1 day); AL (Min 5 Years)
<b>*Butyrophenones***</b>		
<i>haloperidol decanoate intramuscular solution 100 mg/ml</i>	Haldol Decanoate	QLL (5 ML per 28 days); AL (Min 18 Years)
<i>haloperidol decanoate intramuscular solution 50 mg/ml</i>	Haldol Decanoate	QLL (9 ML per 28 days); AL (Min 18 Years)
<i>haloperidol lactate injection solution 5 mg/ml</i>		QLL (4 ML per 1 day); AL (Min 18 Years)
<i>haloperidol lactate oral concentrate 2 mg/ml</i>		QLL (50 ML per 1 day); AL (Min 3 Years)
<i>haloperidol oral tablet 0.5 mg, 20 mg, 5 mg</i>		QLL (5 EA per 1 day); AL (Min 3 Years)
<i>haloperidol oral tablet 1 mg, 10 mg, 2 mg</i>		QLL (10 EA per 1 day); AL (Min 3 Years)
<b>*Dibenzodiazepines***</b>		
<i>clozapine oral tablet 100 mg</i>	Clozaril	Smart Edit Conditions Apply; QLL (9 EA per 1 day); AL (Min 18 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>clozapine oral tablet 200 mg, 50 mg</i>	Clozaril	Smart Edit Conditions Apply; QLL (4 EA per 1 day); AL (Min 18 Years)
<i>clozapine oral tablet 25 mg</i>	Clozaril	Smart Edit Conditions Apply; QLL (3 EA per 1 day); AL (Min 18 Years)
<b>*Dibenzothiazepines***</b>		
<i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg</i>	SEROquel XR	QLL (1 EA per 1 day); AL (Min 10 Years)
<i>quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg</i>	SEROquel XR	QLL (2 EA per 1 day); AL (Min 10 Years)
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	SEROquel	Smart Edit Conditions Apply; QLL (3 EA per 1 day); AL (Min 10 Years)
<i>quetiapine fumarate oral tablet 300 mg, 400 mg</i>	SEROquel	Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 10 Years)
<b>*Dibenzoxazepines***</b>		
<i>loxapine succinate oral capsule 10 mg, 5 mg, 50 mg</i>		QLL (5 EA per 1 day); AL (Min 18 Years)
<i>loxapine succinate oral capsule 25 mg</i>		QLL (10 EA per 1 day); AL (Min 18 Years)
<b>*Phenothiazines***</b>		
<b>COMPRO RECTAL SUPPOSITORY 25 MG</b>	prochlorperazine	QLL (2 EA per 1 day)
<i>fluphenazine decanoate injection solution 25 mg/ml</i>		QLL (10 ML per 28 days); AL (Min 18 Years)
<i>perphenazine oral tablet 16 mg</i>		QLL (4 EA per 1 day); AL (Min 12 Years)
<i>perphenazine oral tablet 2 mg, 4 mg</i>		QLL (6 EA per 1 day); AL (Min 12 Years)
<i>perphenazine oral tablet 8 mg</i>		QLL (5 EA per 1 day); AL (Min 12 Years)
<i>prochlorperazine maleate oral tablet 10 mg</i>		QLL (4 EA per 1 day)
<i>prochlorperazine maleate oral tablet 5 mg</i>		QLL (8 EA per 1 day)
<i>prochlorperazine rectal suppository 25 mg</i>	Compro	QLL (2 EA per 1 day)
<i>thioridazine hcl oral tablet 10 mg</i>		QLL (6 EA per 1 day); AL (Min 13 Years)
<i>thioridazine hcl oral tablet 100 mg</i>		QLL (8 EA per 1 day); AL (Min 13 Years)
<i>thioridazine hcl oral tablet 25 mg, 50 mg</i>		QLL (3 EA per 1 day); AL (Min 13 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>trifluoperazine hcl oral tablet 5 mg</i>		QLL (3 EA per 1 day); AL (Min 6 Years)
<b>*Quinolinone Derivatives***</b>		
<b>ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG</b>		PA; QLL (1 EA per 28 days); AL (Min 18 Years)
<b>ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG</b>		PA; QLL (1 EA per 28 days); AL (Min 18 Years)
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	Abilify	Smart Edit Conditions Apply; QLL (1 EA per 1 day); AL (Min 6 Years)
<b>ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML</b>		PA; QLL (2.4 ML per 168 days)
<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML</b>		PA; QLL (3.9 ML per 56 days); AL (Min 18 Years)
<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 441 MG/1.6ML</b>		PA; QLL (1.6 ML per 28 days); AL (Min 18 Years)
<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 662 MG/2.4ML</b>		PA; QLL (2.4 ML per 28 days); AL (Min 18 Years)
<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 882 MG/3.2ML</b>		PA; QLL (3.2 ML per 28 days); AL (Min 18 Years)
<b>REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</b>		PA; QLL (1 EA per 1 day); AL (Min 18 Years)
<b>*Thienbenzodiazepines***</b>		
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	ZyPREXA	Smart Edit Conditions Apply; QLL (1 EA per 1 day); AL (Min 13 Years)
<i>olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg</i>	ZyPREXA Zydis	Smart Edit Conditions Apply; QLL (1 EA per 1 day); AL (Min 13 Years)
<b>*Thioxanthenes***</b>		
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>		QLL (6 EA per 1 day); AL (Min 12 Years)
<b>*ANTIVIRALS*</b>		
<b>*Antiretroviral Combinations***</b>		
<i>abacavir sulfate-lamivudine oral tablet 600-300 mg</i>	Epzicom	QLL (1 EA per 1 day)
<b>BIKTARVY ORAL TABLET 50-200-25 MG</b>		QLL (1 EA per 1 day)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 400 &amp; 600 MG/2ML, 600 &amp; 900 MG/3ML</b>		
<b>CIMDUO ORAL TABLET 300-300 MG</b>		
<b>COMPLERA ORAL TABLET 200-25-300 MG</b>		QLL (1 EA per 1 day)
<b>DELSTRIGO ORAL TABLET 100-300-300 MG</b>		
<b>DESCOVY ORAL TABLET 120-15 MG, 200-25 MG</b>		QLL (1 EA per 1 day)
<b>DOVATO ORAL TABLET 50-300 MG</b>		QLL (1 EA per 1 day)
<i>efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg</i>	Atripla	QLL (1 EA per 1 day)
<i>efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg</i>	Symfi Lo	QLL (1 EA per 1 day)
<i>efavirenz-lamivudine-tenofovir oral tablet 600-300-300 mg</i>	Symfi	QLL (1 EA per 1 day)
<i>emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</i>	Truvada	QLL (1 EA per 1 day)
<b>GENVOYA ORAL TABLET 150-150-200-10 MG</b>		QLL (1 EA per 1 day)
<b>JULUCA ORAL TABLET 50-25 MG</b>		QLL (1 EA per 1 day)
<b>KALETRA ORAL SOLUTION 400-100 MG/5ML</b>	lopinavir-ritonavir	QLL (13 ML per 1 day)
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>		QLL (2 EA per 1 day)
<i>lopinavir-ritonavir oral solution 400-100 mg/5ml</i>	Kaletra	QLL (13 ML per 1 day)
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	Kaletra	
<b>ODEFSEY ORAL TABLET 200-25-25 MG</b>		QLL (1 EA per 1 day)
<b>STRIBILD ORAL TABLET 150-150-200-300 MG</b>		QLL (1 EA per 1 day)
<b>SYMTUZA ORAL TABLET 800-150-200-10 MG</b>		QLL (1 EA per 1 day)
<b>TRIUMEQ ORAL TABLET 600-50-300 MG</b>		QLL (1 EA per 1 day)
<b>TRIUMEQ PD ORAL TABLET SOLUBLE 60-5-30 MG</b>		QLL (6 EA per 1 day)
<b>*Antiretrovirals - Ccr5 Antagonists (Entry Inhibitor)***</b>		
<i>maraviroc oral tablet 150 mg, 300 mg</i>	Selzentry	

Drug Name	Reference	Restrictions
<b>*Antiretrovirals - Cd4-Directed Post-Attachment Inhibitor***</b>		
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33ML		
<b>*Antiretrovirals - Fusion Inhibitors***</b>		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG		QLL (2 EA per 1 day)
<b>*Antiretrovirals - Gp120-Directed Attachment Inhibitor***</b>		
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG		
<b>*Antiretrovirals - Integrase Inhibitors***</b>		
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 MG/3ML		
ISENTRESS HD ORAL TABLET 600 MG		QLL (2 EA per 1 day)
ISENTRESS ORAL PACKET 100 MG		
ISENTRESS ORAL TABLET 400 MG		QLL (4 EA per 1 day)
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG		QLL (6 EA per 1 day)
TIVICAY ORAL TABLET 50 MG		QLL (2 EA per 1 day)
TIVICAY PD ORAL TABLET SOLUBLE 5 MG		
VOCABRIA ORAL TABLET 30 MG		
<b>*Antiretrovirals - Protease Inhibitors***</b>		
APTIVUS ORAL CAPSULE 250 MG		QLL (4 EA per 1 day)
<i>atazanavir sulfate oral capsule 150 mg</i>		QLL (1 EA per 1 day)
<i>atazanavir sulfate oral capsule 200 mg</i>	Reyataz	QLL (2 EA per 1 day)
<i>atazanavir sulfate oral capsule 300 mg</i>	Reyataz	QLL (1 EA per 1 day)
<i>darunavir tablet 600 mg oral</i>	Prezista	QLL (2 EA per 1 day)
<i>darunavir tablet 800 mg oral</i>	Prezista	QLL (1 EA per 1 day)
<i>fosamprenavir calcium oral tablet 700 mg</i>	Lexiva	QLL (4 EA per 1 day)
NORVIR ORAL PACKET 100 MG		
PREZISTA ORAL SUSPENSION 100 MG/ML		QLL (12 ML per 1 day)
PREZISTA TABLET 150 MG ORAL		QLL (6 EA per 1 day)
PREZISTA TABLET 75 MG ORAL		QLL (2 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>ritonavir oral tablet 100 mg</i>	Norvir	QLL (12 EA per 1 day)
<b>VIRACEPT ORAL TABLET 250 MG</b>		QLL (10 EA per 1 day)
<b>VIRACEPT ORAL TABLET 625 MG</b>		QLL (4 EA per 1 day)
<b>*Antiretrovirals - Rti-Non-Nucleoside Analogues***</b>		
<b>EDURANT ORAL TABLET 25 MG</b>		QLL (1 EA per 1 day)
<i>efavirenz oral capsule 200 mg, 50 mg</i>		QLL (3 EA per 1 day)
<i>efavirenz oral tablet 600 mg</i>	Sustiva	QLL (1 EA per 1 day)
<i>etravirine oral tablet 100 mg</i>	Intelence	QLL (4 EA per 1 day)
<i>etravirine oral tablet 200 mg</i>	Intelence	QLL (2 EA per 1 day)
<b>INTELENCE ORAL TABLET 25 MG</b>		QLL (4 EA per 1 day)
<i>nevirapine er oral tablet extended release 24 hour 400 mg</i>		QLL (1 EA per 1 day)
<i>nevirapine oral tablet 200 mg</i>		QLL (2 EA per 1 day)
<b>PIFELTRO ORAL TABLET 100 MG</b>		
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Purines***</b>		
<i>abacavir sulfate oral solution 20 mg/ml</i>	Ziagen	QLL (30 ML per 1 day)
<i>abacavir sulfate oral tablet 300 mg</i>		QLL (2 EA per 1 day)
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Pyrimidines***</b>		
<i>emtricitabine oral capsule 200 mg</i>	Emtriva	QLL (1 EA per 1 day)
<b>EMTRIVA ORAL SOLUTION 10 MG/ML</b>		QLL (24 ML per 1 day)
<i>lamivudine oral solution 10 mg/ml</i>	Epivir	QLL (30 ML per 1 day)
<i>lamivudine oral tablet 150 mg</i>	Epivir	QLL (2 EA per 1 day)
<i>lamivudine oral tablet 300 mg</i>	Epivir	QLL (1 EA per 1 day)
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Thymidines***</b>		
<i>zidovudine oral capsule 100 mg</i>	Retrovir	QLL (2 EA per 1 day)
<i>zidovudine oral syrup 50 mg/5ml</i>	Retrovir	QLL (60 ML per 1 day)
<i>zidovudine oral tablet 300 mg</i>		QLL (2 EA per 1 day)
<b>*Antiretrovirals - Rti-Nucleotide Analogues***</b>		
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	Viread	QLL (1 EA per 1 day)
<b>VIREAD ORAL POWDER 40 MG/GM</b>		QLL (8 GM per 1 day)
<b>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG</b>		QLL (30 EA per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antiviral Combinations***</b>		
<b>PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG &amp; 10 X 100MG</b>		QLL (20 EA per 5 days); AL (Min 12 Years)
<b>PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG &amp; 10 X 100MG</b>		QLL (20 EA per 5 days); AL (Min 12 Years)
<b>*Cmv Agents***</b>		
<i>valganciclovir hcl oral tablet 450 mg</i>	Valcyte	QLL (2 EA per 1 day)
<b>*Hepatitis B Agents***</b>		
<i>entecavir oral tablet 0.5 mg</i>	Baraclude	QLL (30 EA per 30 days)
<i>entecavir oral tablet 1 mg</i>	Baraclude	QLL (30 EA per 30 Days)
<i>lamivudine oral tablet 100 mg</i>		QLL (30 EA per 30 Days)
<b>*Hepatitis C Agent - Combinations***</b>		
<b>MAVYRET ORAL PACKET 50-20 MG</b>		PA; Diagnosis Required; QLL (6 EA per 1 day)
<b>MAVYRET ORAL TABLET 100-40 MG</b>		PA; Diagnosis Required; QLL (3 EA per 1 day)
<i>sofosbuvir-velpatasvir oral tablet 400-100 mg</i>	Epclusa	PA; Diagnosis Required; QLL (1 EA per 1 day)
<b>*Hepatitis C Agents***</b>		
<b>PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML</b>		PA
<i>ribavirin oral capsule 200 mg</i>		ST
<i>ribavirin oral tablet 200 mg</i>		ST
<b>*Herpes Agents - Purine Analogues***</b>		
<i>acyclovir oral capsule 200 mg</i>		
<i>acyclovir oral suspension 200 mg/5ml</i>		QLL (4000 mg per 1 day); AL (Max 12 Years)
<i>acyclovir oral tablet 400 mg, 800 mg</i>		
<i>valacyclovir hcl oral tablet 1 gm, 500 mg</i>	Valtrex	
<b>*Herpes Agents - Thymidine Analogues***</b>		
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>		
<b>*Misc. Antivirals***</b>		
<b>LAGEVRIO ORAL CAPSULE 200 MG</b>		PA; QLL (40 EA per 5 days); AL (Min 18 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Neuraminidase Inhibitors***</b>		
<i>oseltamivir phosphate capsule 30 mg oral</i>	Tamiflu	QLL (20 EA Max Qty Per Fill Retail); AL (Max 12 Years)
<i>oseltamivir phosphate oral capsule 45 mg, 75 mg</i>	Tamiflu	QLL (10 EA Max Qty Per Fill Retail)
<i>oseltamivir phosphate oral suspension reconstituted 6 mg/ml</i>	Tamiflu	QLL (180 ML Max Qty Per Fill Retail); AL (Max 12 Years)
<b>*BETA BLOCKERS*</b>		
<b>*Alpha-Beta Blockers***</b>		
<i>carvedilol oral tablet 12.5 mg, 3.125 mg, 6.25 mg</i>	Coreg	QLL (60 Tablets per 30 days)
<i>carvedilol oral tablet 25 mg</i>	Coreg	QLL (4 EA per 1 day)
<i>labetalol hcl oral tablet 100 mg, 200 mg, 300 mg</i>		
<b>*Beta Blockers Cardio-Selective***</b>		
<i>acebutolol hcl oral capsule 200 mg, 400 mg</i>		
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	Tenormin	
<i>bisoprolol fumarate oral tablet 5 mg</i>		QLL (1 EA per 1 day)
<i>bisoprolol fumarate tablet 10 mg oral</i>		QLL (2 EA per 1 day)
<i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 50 mg</i>	Toprol XL	QLL (1.5 EA per 1 day)
<i>metoprolol succinate er oral tablet extended release 24 hour 200 mg</i>	Toprol XL	QLL (60 Tablets per 30 days)
<i>metoprolol succinate er oral tablet extended release 24 hour 25 mg</i>	Toprol XL	QLL (1 EA per 1 day)
<i>metoprolol tartrate oral tablet 100 mg, 50 mg</i>	Lopressor	
<i>metoprolol tartrate oral tablet 25 mg</i>		
<i>nebivolol hcl tablet 10 mg oral</i>	Bystolic	QLL (1 EA per 1 day)
<i>nebivolol hcl tablet 2.5 mg oral</i>	Bystolic	QLL (1 EA per 1 day)
<i>nebivolol hcl tablet 20 mg oral</i>	Bystolic	QLL (2 EA per 1 day)
<i>nebivolol hcl tablet 5 mg oral</i>	Bystolic	QLL (1 EA per 1 day)
<b>*Beta Blockers Non-Selective***</b>		
<b>INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>	propranolol hcl er	QLL (2 EA per 1 day)
<i>propranolol hcl er capsule extended release 24 hour 120 mg oral</i>	Inderal LA	QLL (2 EA per 1 day)
<i>propranolol hcl er capsule extended release 24 hour 160 mg oral</i>	Inderal LA	QLL (2 EA per 1 day)
<i>propranolol hcl er oral capsule extended release 24 hour 60 mg, 80 mg</i>	Inderal LA	QLL (1 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml</i>		
<i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>		
<i>sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg</i>	Betapace AF	
<i>sotalol hcl oral tablet 120 mg, 160 mg, 80 mg</i>	Betapace	
<i>sotalol hcl oral tablet 240 mg</i>		
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>		
<b>*CALCIUM CHANNEL BLOCKERS*</b>		
<b>*Calcium Channel Blockers***</b>		
<i>amlodipine besylate oral tablet 10 mg</i>	Norvasc	QLL (30 Tablets per 30 days)
<i>amlodipine besylate oral tablet 2.5 mg, 5 mg</i>	Norvasc	QLL (2 Tablets per 1 day)
<b>CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>	diltiazem hcl er coated beads	QLL (1 EA per 1 day)
<b>CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG</b>	diltiazem hcl er coated beads	QLL (3 EA per 1 day)
<b>CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 240 MG, 300 MG</b>	diltiazem hcl er coated beads	QLL (60 EA per 30 days)
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 300 mg, 360 mg, 420 mg</i>	Tiadytl ER	QLL (1 EA per 1 day)
<i>diltiazem hcl er beads oral capsule extended release 24 hour 180 mg</i>	Tiadytl ER	QLL (3 EA per 1 day)
<i>diltiazem hcl er beads oral capsule extended release 24 hour 240 mg</i>	Tiadytl ER	QLL (60 EA per 30 days)
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg</i>	Cartia XT	QLL (1 EA per 1 day)
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 180 mg</i>	Cartia XT	QLL (3 EA per 1 day)
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 240 mg, 300 mg</i>	Cartia XT	QLL (60 EA per 30 days)
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg</i>		QLL (1 EA per 1 day)
<i>diltiazem hcl er oral capsule extended release 24 hour 180 mg</i>		QLL (3 EA per 1 day)
<i>diltiazem hcl er oral capsule extended release 24 hour 240 mg</i>		QLL (60 EA per 30 days)
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg</i>	Cardizem	QLL (120 Tablets per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>diltiazem hcl oral tablet 90 mg</i>		QLL (120 Tablets per 30 days)
<i>dilt-xr oral capsule extended release 24 hour 120 mg</i>		QLL (1 EA per 1 day)
<i>dilt-xr oral capsule extended release 24 hour 180 mg</i>		QLL (3 EA per 1 day)
<i>dilt-xr oral capsule extended release 24 hour 240 mg</i>		QLL (60 EA per 30 days)
<i>felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i>		QLL (1 EA per 1 day)
<i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>		QLL (30 Tablets per 30 days)
<i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 90 mg</i>	Procardia XL	QLL (30 Tablets per 30 days)
<i>nifedipine er osmotic release oral tablet extended release 24 hour 60 mg</i>	Procardia XL	QLL (2 EA per 1 day)
<i>nifedipine oral capsule 10 mg, 20 mg</i>		
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 360 mg</i>	Verelan	QLL (30 Tablets per 30 days)
<i>verapamil hcl er oral capsule extended release 24 hour 240 mg</i>	Verelan	QLL (2 EA per 1 day)
<i>verapamil hcl er oral tablet extended release 120 mg</i>		QLL (2 Tablets per 1 day)
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>		QLL (60 Tablets per 30 days)
<i>verapamil hcl oral tablet 120 mg, 40 mg, 80 mg</i>		QLL (120 Tablets per 30 days)
<b>*CARDIOTONICS*</b>		
<b>*Cardiac Glycosides***</b>		
<i>digoxin oral solution 0.05 mg/ml</i>		
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	Digox	
<b>*CARDIOVASCULAR AGENTS - MISC.*</b>		
<b>*Neprilysin Inhib (Arni)-Angiotensin Ii Recept Antag Comb***</b>		
<b>ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG</b>		PA; QLL (60 EA per 30 days)
<b>*Nitrate &amp; Vasodilator Combinations***</b>		
<i>isosorb dinitrate-hydralazine oral tablet 20-37.5 mg</i>	BiDil	QLL (6 EA per 1 day)

Drug Name	Reference	Restrictions
<b>*Prostaglandin Vasodilators***</b>		
<i>epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg</i>	Flolan	PA
<b>*Pulmonary Hypertension - Endothelin Receptor Antagonists***</b>		
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	Letairis	PA; QLL (30 EA per 30 days)
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	Tracleer	PA; QLL (60 EA per 30 days)
<b>OPSUMIT ORAL TABLET 10 MG</b>		PA; QLL (30 EA per 30 days)
<b>TRACLEER ORAL TABLET SOLUBLE 32 MG</b>		PA; QLL (60 EA per 30 days)
<b>*Pulmonary Hypertension - Phosphodiesterase Inhibitors***</b>		
<i>sildenafil citrate oral tablet 20 mg</i>	Revatio	PA; QLL (12 EA per 1 day)
<i>tadalafil (pah) oral tablet 20 mg</i>	Adcirca	ST; QLL (2 EA per 1 day)
<b>*Sinus Node Inhibitors**</b>		
<i>ivabradine hcl oral tablet 5 mg, 7.5 mg</i>	Corlanor	PA; QLL (60 EA per 30 days)
<b>*CEPHALOSPORINS*</b>		
<b>*Cephalosporins - 1St Generation***</b>		
<i>cefadroxil oral capsule 500 mg</i>		
<i>cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml</i>		AL (Max 12 Years)
<i>cephalexin oral capsule 250 mg, 500 mg</i>		
<i>cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>		AL (Max 12 Years)
<b>*Cephalosporins - 2Nd Generation***</b>		
<i>cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>		AL (Max 12 Years)
<i>cefprozil oral tablet 250 mg, 500 mg</i>		
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>		
<b>*Cephalosporins - 3Rd Generation***</b>		
<i>cefdinir oral capsule 300 mg</i>		
<i>cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>		AL (Max 12 Years)
<i>cefixime oral capsule 400 mg</i>		QLL (1 EA Max Qty Per Fill Retail)
<i>cefpodoxime proxetil oral tablet 100 mg, 200 mg</i>		



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i>		QLL (2 EA per 1 day)
<b>*CHEMICALS*</b>		
<b>*Bulk Chemicals - St's***</b>		
<i>stevia extract powder</i>	TruClear Stevia Plus	
<i>stevia extract powder 90 %</i>		
<i>steviol glycosides powder 95 %</i>		
<i>stevioside fluid extract 15 %</i>		
<b>*Liquids***</b>		
<i>chlorhexidine gluconate solution</i>		
<i>glycerin liquid</i>		
<b>*Solids***</b>		
<i>sorbitol powder</i>		
<b>*CONTRACEPTIVES*</b>		
<b>*Biphasic Contraceptives - Oral***</b>		
<b>AZURETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)</b>	desogestrel-ethinyl estradiol	
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	Azurette	
<b>KARIVA ORAL TABLET 0.15-0.02/0.01 MG (21/5)</b>	desogestrel-ethinyl estradiol	
<b>PIMTREA ORAL TABLET 0.15-0.02/0.01 MG (21/5)</b>	desogestrel-ethinyl estradiol	
<i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>	Azurette	
<b>*Combination Contraceptives - Oral***</b>		
<b>ALTAVERA ORAL TABLET 0.15-30 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<i>alyacen 1/35 oral tablet 1-35 mg-mcg</i>	Dasetta 1/35	
<b>APRI ORAL TABLET 0.15-30 MG-MCG</b>		
<b>AVIANE ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>BALZIVA ORAL TABLET 0.4-35 MG-MCG</b>	briellyn	
<i>briellyn oral tablet 0.4-35 mg-mcg</i>	Balziva	
<b>CRYSELLE-28 ORAL TABLET 0.3-30 MG-MCG</b>		
<b>DASETTA 1/35 ORAL TABLET 1-35 MG-MCG</b>	alyacen 1/35	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>DELYLA ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	Ocella	
<b>ELINEST ORAL TABLET 0.3-30 MG-MCG</b>		
<b>ENSKYCE ORAL TABLET 0.15-30 MG-MCG</b>		
<b>ESTARYLLA ORAL TABLET 0.25-35 MG-MCG</b>	norgestimate-eth estradiol	
<b>FALMINA ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>JUNEL 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>JUNEL 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>JUNEL FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>JUNEL FE 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>KELNOR 1/35 ORAL TABLET 1-35 MG-MCG</b>	ethynodiol diac-eth estradiol	
<b>KURVELO ORAL TABLET 0.15-30 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>LARIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>LARIN 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>LARIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>LARIN FE 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>LESSINA ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg</i>	Aviane	
<i>levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg</i>	Altavera	
<b>LEVORA 0.15/30 (28) ORAL TABLET 0.15-30 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>LORYNA ORAL TABLET 3-0.02 MG</b>	drospirenone-ethinyl estradiol	
<b>LOW-OGESTREL ORAL TABLET 0.3-30 MG-MCG</b>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>LUTERA ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<i>marlissa oral tablet 0.15-30 mg-mcg</i>	Altavera	
<b>MICROGESTIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>MICROGESTIN 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethindrone acet-ethinyl est	
<b>MICROGESTIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>MICROGESTIN FE 1/20 ORAL TABLET 1-20 MG-MCG</b>	norethin ace-eth estrad-fe	
<b>MONO-LINYAH ORAL TABLET 0.25-35 MG-MCG</b>	norgestimate-eth estradiol	
<b>NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG</b>		
<b>NECON 1/35 (28) ORAL TABLET 1-35 MG-MCG</b>	alyacen 1/35	
<b>NIKKI ORAL TABLET 3-0.02 MG</b>	drospirenone-ethinyl estradiol	
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>	Junel FE 1/20	
<i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg</i>	Junel 1/20	
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	Estarylla	
<b>NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG</b>		
<b>NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG</b>	alyacen 1/35	
<b>NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG</b>	alyacen 1/35	
<b>OCELLA ORAL TABLET 3-0.03 MG</b>	drospirenone-ethinyl estradiol	
<b>ORSYTHIA ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>PHILITH ORAL TABLET 0.4-35 MG-MCG</b>	briellyn	
<b>PORTIA-28 ORAL TABLET 0.15-30 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>RECLIPSEN ORAL TABLET 0.15-30 MG-MCG</b>		
<b>SOLIA ORAL TABLET 0.15-30 MG-MCG</b>		
<b>SPRINTEC 28 ORAL TABLET 0.25-35 MG-MCG</b>	norgestimate-eth estradiol	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>SRONYX ORAL TABLET 0.1-20 MG-MCG</b>	levonorgestrel-ethinyl estrad	
<b>SYEDA ORAL TABLET 3-0.03 MG</b>	drospirenone-ethinyl estradiol	
<b>VESTURA ORAL TABLET 3-0.02 MG</b>	drospirenone-ethinyl estradiol	
<b>VYFEMLA ORAL TABLET 0.4-35 MG-MCG</b>	briellyn	
<b>WERA ORAL TABLET 0.5-35 MG-MCG</b>		
<b>*Combination Contraceptives - Transdermal***</b>		
<b>XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR</b>	norelgestromin-eth estradiol	QLL (3 Patches per 28 days)
<b>*Combination Contraceptives - Vaginal***</b>		
<b>ELURYNG VAGINAL RING 0.12-0.015 MG/24HR</b>	etonogestrel-ethinyl estradiol	QLL (1 EA per 21 days)
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr</i>	EluRyng	QLL (1 EA per 21 days)
<b>HALOETTE VAGINAL RING 0.12-0.015 MG/24HR</b>	etonogestrel-ethinyl estradiol	QLL (1 EA per 21 days)
<b>*Continuous Contraceptives - Oral***</b>		
<b>AMETHYST ORAL TABLET 90-20 MCG</b>	levonorgestrel-ethinyl estrad	
<b>DOLISHALE ORAL TABLET 90-20 MCG</b>	levonorgestrel-ethinyl estrad	
<i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg</i>	Amethyst	
<b>*Copper Contraceptives - Iud***</b>		
<b>PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE</b>		QLL (1 EA per 10 Years)
<b>*Emergency Contraceptives***</b>		
<b>AFTERA ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>ECONTRA ONE-STEP ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>ELLA ORAL TABLET 30 MG</b>		QLL (3 EA per 90 days)
<b>HER STYLE ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<i>levonorgestrel oral tablet 1.5 mg</i>	Aftera	OTC
<b>MY CHOICE ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>MY WAY ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>NEW DAY ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>OPCICON ONE-STEP ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>OPTION 2 ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>REACT ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>TAKE ACTION ORAL TABLET 1.5 MG</b>	levonorgestrel	OTC
<b>*Extended-Cycle Contraceptives - Oral***</b>		
<b>INTROVALE ORAL TABLET 0.15-0.03 MG</b>	levonorgest-eth estrad 91-day	
<b>JOLESSA ORAL TABLET 0.15-0.03 MG</b>	levonorgest-eth estrad 91-day	
<i>levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg</i>	Introvale	
<b>*Progestin Contraceptives - Implants***</b>		
<b>NEXPLANON SUBCUTANEOUS IMPLANT 68 MG</b>		QLL (1 EA per 3 Years)
<b>*Progestin Contraceptives - Injectable***</b>		
<i>medroxyprogesterone acetate intramuscular suspension 150 mg/ml</i>	Depo-Provera	QLL (1 Injection per 90 days)
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i>	Depo-Provera	QLL (1 ML per 84 days)
<b>*Progestin Contraceptives - Iud***</b>		
<b>LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY</b>		QLL (1 EA per 999 days)
<b>*Progestin Contraceptives - Oral***</b>		
<b>CAMILA ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>DEBLITANE ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>ERRIN ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>HEATHER ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>JENCYCLA ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>LYZA ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>NORA-BE ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<i>norethindrone oral tablet 0.35 mg</i>	Camila	QLL (1 EA per 1 day)
<b>NORLYROC ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>OPILL ORAL TABLET 0.075 MG</b>		OTC
<b>SHAROBEL ORAL TABLET 0.35 MG</b>	norethindrone	QLL (1 EA per 1 day)
<b>*Triphasic Contraceptives - Oral***</b>		
<i>alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>	Dasetta 7/7/7	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>ARANELLE ORAL TABLET 0.5/1/0.5-35 MG-MCG</b>		
<b>DASETTA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG</b>	alyacen 7/7/7	
<b>ENPRESSE-28 ORAL TABLET 50-30/75-40/ 125-30 MCG</b>	levonorg-eth estrad triphasic	
<b>LEENA ORAL TABLET 0.5/1/0.5-35 MG-MCG</b>		
<b>LEVONEST ORAL TABLET 50-30/75-40/ 125-30 MCG</b>	levonorg-eth estrad triphasic	
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	Tri-Lo-Estarylla	
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i>	Tri-Estarylla	
<b>NORTREL 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG</b>	alyacen 7/7/7	
<b>PIRMELLA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG</b>	alyacen 7/7/7	
<b>TILIA FE ORAL TABLET 1-20/1-30/1-35 MG-MCG</b>	norethindron-ethinyl estrad-fe	
<b>TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-LEGEST FE ORAL TABLET 1-20/1-30/1-35 MG-MCG</b>	norethindron-ethinyl estrad-fe	
<b>TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-35 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-25 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-25 MCG</b>	norgestim-eth estrad triphasic	
<b>TRINESSA (28) ORAL TABLET 0.18/0.215/0.25 MG-35 MCG</b>	norgestim-eth estrad triphasic	
<b>TRI-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-35 MCG</b>	norgestim-eth estrad triphasic	
<b>TRIVORA (28) ORAL TABLET 50-30/75-40/ 125-30 MCG</b>	levonorg-eth estrad triphasic	
<b>TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG</b>	norgestim-eth estrad triphasic	
<b>VELIVET ORAL TABLET 0.1/0.125/0.15 - 0.025 MG</b>		

Drug Name	Reference	Restrictions
<b>*CORTICOSTEROIDS*</b>		
<b>*Glucocorticosteroids***</b>		
<i>budesonide er oral tablet extended release 24 hour 9 mg</i>	Uceris	
<i>budesonide oral capsule delayed release particles 3 mg</i>		PA; ST; QLL (90 EA per 365 days)
<i>cortisone acetate oral tablet 25 mg</i>		
<b>DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML</b>		
<i>dexamethasone oral elixir 0.5 mg/5ml</i>		
<i>dexamethasone oral solution 0.5 mg/5ml</i>		
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>		
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml</i>		
<i>dexamethasone sodium phosphate injection solution prefilled syringe 4 mg/ml</i>		
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	Cortef	
<i>methylprednisolone oral tablet 16 mg, 4 mg, 8 mg</i>	Medrol	
<i>methylprednisolone oral tablet 32 mg</i>		
<i>methylprednisolone oral tablet therapy pack 4 mg</i>	Medrol	
<i>prednisolone oral solution 15 mg/5ml</i>		
<i>prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml</i>		
<i>prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml</i>	Pediapred	
<i>prednisone oral solution 5 mg/5ml</i>		AL (Max 12 Years)
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>		
<b>SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG</b>		
<b>*Mineralocorticoids***</b>		
<i>fludrocortisone acetate oral tablet 0.1 mg</i>		
<b>*COUGH/COLD/ALLERGY*</b>		
<b>*Antitussive - Nonnarcotic***</b>		
<i>benzonatate capsule 200 mg oral</i>		QLL (3 EA per 1 day); AL (Min 10 Years)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>benzonatate oral capsule 100 mg</i>		QLL (6 EA per 1 day); AL (Min 10 Years)
<i>cough dm oral suspension extended release 30 mg/5ml</i>	Delsym	OTC; QLL (180 ML per 30 days)
<i>dextromethorphan hbr oral capsule 15 mg</i>	Wal-Tussin Cough	OTC
<i>qc cough relief oral liquid 15 mg/5ml</i>	Giltuss Honey DM	OTC; QLL (180 ML per 30 days)
<b>*Antitussive - Opioid***</b>		
<i>hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml</i>	Hycodan	QLL (30 ML per 1 day); AL (Min 18 Years)
<i>hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg</i>	Hycodan	QLL (6 EA per 1 day); AL (Min 18 Years)
<i>hydrocodone bit-homatrop mbr solution 5-1.5 mg/5ml oral</i>	Hycodan	
<i>hydrocodone bit-homatrop mbr tablet 5-1.5 mg oral</i>	Hycodan	
<i>hydromet oral solution 5-1.5 mg/5ml</i>	Hycodan	QLL (30 ML per 1 day); AL (Min 18 Years)
<b>*Antitussive-Decongestant-Analgesic***</b>		
<i>cold &amp; flu relief daytime oral capsule 10-5-325 mg</i>	Alka-Seltzer Pls Sinus & Cough	OTC; QLL (4 EA per 1 day)
<b>*Antitussive-Expectorant***</b>		
<i>dextromethorphan-guaifenesin oral syrup 10-100 mg/5ml</i>	Robafen DM Cough Clear	OTC
<i>guaiaatussin ac oral syrup 100-10 mg/5ml</i>		OTC; AL (Min 18 Years)
<i>mucus relief dm max oral liquid 5-100 mg/5ml</i>	Delsym Cgh/Chest Cong DM Child	OTC
<i>mucus-dm max oral tablet extended release 12 hour 60-1200 mg</i>	Mucinex DM Maximum Strength	OTC
<i>mucus-dm oral tablet extended release 12 hour 30-600 mg</i>	Mucinex DM	OTC
<b>*Antitussive-Expectorants-Decongestant***</b>		
<i>goodsense mucus relief child oral liquid 2.5-5-100 mg/5ml</i>	Mucinex Childrens Freefrom	OTC; QLL (180 ML per 30 days)
<i>phenylephrine-dm-gg oral liquid 10-18-200 mg/15ml</i>	Vanacof DM	OTC; QLL (180 ML per 30 days)
<b>*Decongestant &amp; Antihistamine***</b>		
<b>ALAHIST D ORAL TABLET 17.5-10 MG</b>		OTC
<i>allergy/congestion relief oral tablet extended release 12 hour 5-120 mg</i>	Alavert D-12 Hour Allergy/Cong	OTC; QLL (2 EA per 1 day)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>cetirizine-pseudoephedrine er oral tablet extended release 12 hour 5-120 mg</i>	EQ Allergy Relief Nasal Decong	OTC; QLL (60 EA per 30 days); AL (Min 6 Years)
<i>fexofenadine-pseudoephed er oral tablet extended release 12 hour 60-120 mg</i>	Allegra-D Allergy & Congestion	OTC; QLL (2 EA per 1 day)
<i>loratadine-d 24hr oral tablet extended release 24 hour 10-240 mg</i>	Claritin-D 24 Hour	OTC; QLL (30 Tablets per 30 days)
<b>*Decongestant W/ Expectorant***</b>		
<b>MUCINEX D ORAL TABLET EXTENDED RELEASE 12 HOUR 60-600 MG</b>	cvs mucus d extended release	OTC
<b>*Expectorants***</b>		
<i>gmp mucus er oral tablet extended release 12 hour 1200 mg</i>	EQ Mucus ER	OTC
<i>guaifenesin oral liquid 100 mg/5ml</i>	Buckleys Chest Congestion	OTC
<i>guaifenesin oral tablet 200 mg</i>		OTC
<i>guaifenesin oral tablet 400 mg</i>	Xpect	OTC
<i>mucus relief er oral tablet extended release 12 hour 600 mg</i>	EQ Mucus ER	OTC
<b>*Misc. Respiratory Inhalants***</b>		
<i>nasal mist inhalation aerosol solution 0.9 %</i>	Simply Saline Baby	OTC
<i>sodium chloride inhalation nebulization solution 0.9 %</i>		
<i>sodium chloride inhalation nebulization solution 10 %</i>		
<i>sodium chloride inhalation nebulization solution 3 %</i>	Nebusal	
<i>sodium chloride inhalation nebulization solution 7 %</i>	HyperSal	
<b>*Mucolytics***</b>		
<i>acetylcysteine inhalation solution 10 %, 20 %</i>		
<b>*Non-Narc Antitussive-Antihistamine***</b>		
<i>promethazine-dm oral syrup 6.25-15 mg/5ml</i>		
<b>*Non-Narc Antitussive-Decongestant-Antihistamine***</b>		
<i>lohist-dm oral syrup 5-2-10 mg/5ml</i>		OTC
<i>pse-dexchlorphen-chlophedianol oral liquid 30-1-12.5 mg/5ml</i>	Vanacof	OTC; QLL (180 ML per 30 days)
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>		
<i>rynex dm oral liquid 2.5-1-5 mg/5ml</i>	Dimaphen DM Cold/Cough	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>VANACOF ORAL LIQUID 30-1-12.5 MG/5ML</b>	pse-dexchlorphen-chlophedianol	OTC; QLL (180 ML per 30 days)
<b>*Opioid Antitussive-Antihistamine***</b>		
<i>promethazine-codeine oral solution 6.25-10 mg/5ml</i>		AL (Min 18 Years)
<i>promethazine-codeine oral syrup 6.25-10 mg/5ml</i>		AL (Min 18 Years)
<b>*DERMATOLOGICALS*</b>		
<b>*Acne Antibiotics***</b>		
<i>clindamycin phosphate external gel 1 %</i>	Clindagel	QLL (1 GM per 1 day)
<i>clindamycin phosphate external lotion 1 %</i>	Cleocin-T	QLL (2 ML per 1 day)
<i>clindamycin phosphate external solution 1 %</i>		QLL (2 ML per 1 day)
<i>clindamycin phosphate external swab 1 %</i>	Clindacin ETZ	QLL (2 EA per 1 day)
<i>ery external pad 2 %</i>		
<i>erythromycin external gel 2 %</i>	Erygel	QLL (1 GM per 1 day)
<i>erythromycin external solution 2 %</i>		QLL (2 ML per 1 day)
<i>sulfacetamide sodium (acne) external lotion 10 %</i>	Klaron	QLL (118 ML per 30 days)
<b>*Acne Combinations***</b>		
<i>adapalene-benzoyl peroxide external gel 0.1-2.5 %</i>	Epiduo	QLL (45 GM per 30 days); AL (Max 35 Years)
<i>benzoyl peroxide-erythromycin external gel 5-3 %</i>	Benzamycin	QLL (46.6 GM per 30 days)
<i>clindamycin phos-benzoyl perox gel 1.2-5 % external</i>	Neuac	QLL (45 GM per 30 days)
<i>clindamycin phos-benzoyl perox gel 1-5 % external</i>		QLL (50 GM per 30 days)
<b>NEUAC EXTERNAL GEL 1.2-5 %</b>	clindamycin phos-benzoyl perox	QLL (45 GM per 30 days)
<b>*Acne Products***</b>		
<b>ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<i>acne medication 10 external lotion 10 %</i>		OTC
<i>acne medication 5 external lotion 5 %</i>		OTC
<i>acne-clear external gel 10 %</i>	Clean & Clear Persa-Gel Max St	OTC
<i>adapalene external gel 0.3 %</i>	Differin	ST; QLL (45 GM per 30 days); AL (Max 35 Years)
<b>AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 40 MG</b>	isotretinoin	ST; QLL (2 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>benzoyl peroxide external gel 10 %</i>	Clean & Clear Persa-Gel Max St	
<i>benzoyl peroxide external gel 2.5 %</i>		OTC
<i>benzoyl peroxide wash external liquid 5 %</i>	Benzac AC Wash	
<i>bp wash external liquid 10 %</i>	Medpura Benzoyl Peroxide	OTC
<b>CLARAVIS ORAL CAPSULE 10 MG, 20 MG</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<b>CLARAVIS ORAL CAPSULE 30 MG, 40 MG</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<i>isotretinoin oral capsule 10 mg</i>	Accutane	ST; QLL (2 EA per 1 day)
<i>isotretinoin oral capsule 20 mg, 30 mg, 40 mg</i>	Accutane	ST; QLL (2 EA per 1 day)
<b>PANOXYL CREAMY WASH EXTERNAL LIQUID 4 %</b>	cvs creamy acne face wash	OTC
<b>RETIN-A EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 %</b>	tretinoin	ST; QLL (45 GM per 30 days); AL (Max 35 Years)
<b>RETIN-A EXTERNAL GEL 0.01 %, 0.025 %</b>	tretinoin	ST; QLL (45 GM per 30 days); AL (Max 35 Years)
<b>ZENATANE CAPSULE 10 MG ORAL</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<b>ZENATANE CAPSULE 20 MG ORAL</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<b>ZENATANE CAPSULE 30 MG ORAL</b>	isotretinoin	ST; QLL (2 EA per 1 day)
<b>ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG</b>	isotretinoin	ST; Smart Edit Conditions Apply; QLL (2 EA per 1 day)
<b>*Antibiotic Mixtures Topical***</b>		
<i>double antibiotic external ointment 500-10000 unit/gm</i>	Neosporin	OTC
<i>gnp antibiotic/pain relief external cream 3.5-10000-10</i>	Neosporin Plus Pain Relief MS	OTC
<b>NEOSPORIN EXTERNAL OINTMENT 500-10000 UNIT/GM</b>	double antibiotic	OTC
<i>sm antibiotic plus pain relief external cream 3.5-10000-10</i>	Neosporin Plus Pain Relief MS	OTC
<i>triple antibiotic plus external ointment 1 %</i>	Neosporin + Pain Relief Max St	OTC
<b>*Antibiotics - Topical***</b>		
<i>bacitracin external ointment 500 unit/gm</i>	Bacitraycin Plus	OTC
<i>bacitracin zinc external ointment 500 unit/gm</i>		OTC
<i>gentamicin sulfate external cream 0.1 %</i>		
<i>gentamicin sulfate external ointment 0.1 %</i>		
<i>mupirocin external ointment 2 %</i>		QLL (110 GM per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antifungals - Topical Combinations***</b>		
<i>clotrimazole-betamethasone external cream 1-0.05 %</i>		QLL (60 GM per 30 days)
<b>*Antifungals - Topical***</b>		
<i>butenafine hcl external cream 1 %</i>	Lotrimin Ultra	OTC; QLL (30 GM per 30 days)
<i>ciclopirox external shampoo 1 %</i>		ST; QLL (120 ML per 30 days)
<i>ciclopirox external solution 8 %</i>	Ciclodan	QLL (6.6 ML per 1 day)
<i>ciclopirox olamine external cream 0.77 %</i>		QLL (60 GM per 30 days)
<i>ciclopirox olamine external suspension 0.77 %</i>		ST; QLL (30 ML per 30 days)
<i>nystatin external cream 100000 unit/gm</i>		QLL (60 GM per 30 days)
<i>nystatin external ointment 100000 unit/gm</i>		QLL (60 GM per 30 days)
<i>nystatin external powder 100000 unit/gm</i>	Klayesta	QLL (60 GM per 30 days)
<i>terbinafine hcl external cream 1 %</i>	Lamisil AT	OTC; QLL (60 GM per 30 days)
<i>tolnaftate external aerosol powder 1 %</i>	Odor Eaters Foot/Sneaker Spray	OTC; QLL (133 GM per 30 days)
<i>tolnaftate external cream 1 %</i>	Tinactin	OTC; QLL (90 GM per 30 days)
<b>*Antihistamine-Topical Combinations***</b>		
<i>anti-itch external cream 2-0.1 %</i>	Banophen	OTC
<b>*Anti-Inflammatory Agents - Topical***</b>		
<i>diclofenac sodium external gel 1 %</i>	Aleve Arthritis Pain	QLL (6.667 GM per 1 day)
<b>*Antineoplastic Antimetabolites - Topical***</b>		
<i>fluorouracil external cream 5 %</i>	Efudex	
<i>fluorouracil external solution 2 %, 5 %</i>		
<b>*Antipsoriatics***</b>		
<i>calcipotriene external cream 0.005 %</i>		PA; QLL (4 GM per 1 day)
<i>calcipotriene external ointment 0.005 %</i>	Calcitrene	PA; QLL (4 GM per 1 day)
<i>calcipotriene external solution 0.005 %</i>		PA; QLL (2 ML per 1 day)
<b>CALCITRENE EXTERNAL OINTMENT 0.005 %</b>	calcipotriene	PA; QLL (4 GM per 1 day)
<i>tazarotene external cream 0.1 %</i>	Tazorac	ST; QLL (3 GM per 1 day)
<b>*Antiseborrheic Products***</b>		
<i>anti-dandruff external shampoo 1 %</i>	Selsun Blue	OTC
<i>selenium sulfide external lotion 2.5 %</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Antivirals - Topical***</b>		
<i>docosanol external cream 10 %</i>	Abreva	OTC; QLL (1 Tube per 30 days)
<b>ZOVIRAX EXTERNAL OINTMENT 5 %</b>	acyclovir	ST; QLL (15 GM per 30 days)
<b>*Astringents***</b>		
<i>calamine external lotion</i>		OTC
<i>zinc oxide external ointment 20 %</i>	Medpura Zinc Oxide	OTC
<i>zinc oxide external ointment 40 %</i>	Boudreauxs Butt Paste	OTC
<b>*Atopic Dermatitis - Monoclonal Antibodies***</b>		
<b>DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML, 300 MG/2ML</b>		PA
<b>DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML</b>		PA
<b>*Burn Products***</b>		
<i>silver sulfadiazine external cream 1 %</i>	SSD	
<b>SSD EXTERNAL CREAM 1 %</b>	silver sulfadiazine	
<b>*Corticosteroids - Topical***</b>		
<i>betamethasone dipropionate aug external cream 0.05 %</i>		QLL (50 GM per 30 days)
<i>betamethasone dipropionate aug external gel 0.05 %</i>		QLL (60 GM per 30 days)
<i>betamethasone dipropionate aug external lotion 0.05 %</i>		QLL (60 ML per 30 days)
<i>betamethasone dipropionate aug external ointment 0.05 %</i>	Diprolene	QLL (60 GM per 30 days)
<i>betamethasone dipropionate external cream 0.05 %</i>		QLL (60 GM per 30 days)
<i>betamethasone dipropionate external lotion 0.05 %</i>		QLL (120 ML per 30 days)
<i>betamethasone dipropionate external ointment 0.05 %</i>		QLL (60 GM per 30 days)
<i>betamethasone valerate external cream 0.1 %</i>		QLL (60 GM per 30 days)
<i>betamethasone valerate external lotion 0.1 %</i>		QLL (120 ML per 30 days)
<i>betamethasone valerate external ointment 0.1 %</i>		QLL (45 GM per 30 days)
<i>clobetasol propionate e external cream 0.05 %</i>		ST; QLL (60 GM per 30 days)
<i>clobetasol propionate external cream 0.05 %</i>		ST; QLL (60 GM per 30 days)
<i>clobetasol propionate external gel 0.05 %</i>		QLL (60 GM per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>clobetasol propionate external ointment 0.05 %</i>		ST; QLL (60 GM per 30 days)
<i>clobetasol propionate external solution 0.05 %</i>		ST; QLL (60 ML per 30 days)
<b>DERMA-SMOOTHIE/FS BODY EXTERNAL OIL 0.01 %</b>	fluocinolone acetonide body	QLL (120 ML per 30 days)
<b>DERMA-SMOOTHIE/FS SCALP EXTERNAL OIL 0.01 %</b>	fluocinolone acetonide scalp	QLL (120 ML per 30 days)
<i>fluocinolone acetonide external ointment 0.025 %</i>	Synalar	QLL (60 GM per 30 days)
<i>fluocinonide external cream 0.05 %</i>		QLL (60 GM per 30 days)
<i>fluocinonide external cream 0.1 %</i>	Vanos	QLL (120 GM per 30 days)
<i>fluocinonide external gel 0.05 %</i>		QLL (60 GM per 30 days)
<i>fluocinonide external solution 0.05 %</i>		QLL (60 ML per 30 days)
<i>fluticasone propionate external cream 0.05 %</i>		
<i>fluticasone propionate external ointment 0.005 %</i>		
<i>gnp hydrocortisone external cream 0.5 %</i>		OTC; QLL (90 GM per 30 days)
<i>halobetasol propionate external cream 0.05 %</i>		QLL (50 GM per 30 days)
<i>halobetasol propionate external ointment 0.05 %</i>		QLL (50 GM per 30 days)
<i>hydrocortisone cream 0.5 % external</i>		OTC; QLL (90 GM per 30 days)
<i>hydrocortisone external cream 0.5 %</i>		OTC; QLL (90 GM per 30 days)
<i>hydrocortisone external cream 1 %</i>	Aveeno Anti-Itch Max St	QLL (90 GM per 30 days)
<i>hydrocortisone external cream 2.5 %</i>		QLL (90 GM per 30 days)
<i>hydrocortisone external lotion 1 %</i>	Aquanil HC	OTC; QLL (120 GM per 30 days)
<i>hydrocortisone external lotion 2.5 %</i>		QLL (120 ML per 30 days)
<i>hydrocortisone external ointment 0.5 %</i>		OTC; QLL (120 GM per 30 days)
<i>hydrocortisone external ointment 1 %</i>	Aquaphor Itch Relief Children	QLL (90 GM per 30 days)
<i>hydrocortisone external ointment 2.5 %</i>		QLL (90 GM per 30 days)
<i>mometasone furoate external cream 0.1 %</i>		QLL (45 GM per 30 days)
<i>mometasone furoate external ointment 0.1 %</i>		QLL (45 GM per 30 days)
<i>mometasone furoate external solution 0.1 %</i>		QLL (60 ML per 30 days)
<i>sm hydrocortisone external cream 0.5 %</i>		OTC; QLL (90 GM per 30 days)
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %</i>		QLL (90 GM per 30 days)
<i>triamcinolone acetonide external cream 0.5 %</i>	Triderm	QLL (90 GM per 30 days)
<i>triamcinolone acetonide external lotion 0.025 %, 0.1 %</i>		QLL (120 ML per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>triamcinolone acetonide external ointment 0.025 %, 0.5 %</i>		QLL (90 GM per 30 days)
<i>triamcinolone acetonide external ointment 0.1 %</i>		
<b>*Diaper Rash Products***</b>		
<b>MEDI-PASTE EXTERNAL OINTMENT</b>	cvs all-purpose skin protect	OTC
<b>*Emollient Combinations***</b>		
<i>mineral oil-hydrophil petrolat external ointment</i>		OTC
<b>*Emollient/Keratolytic Agents***</b>		
<i>urea 20 intensive hydrating external cream 20 %</i>		OTC
<i>urea external cream 20 %</i>		
<i>ureacin-20 external cream 20 %</i>		OTC
<b>*Emollients***</b>		
<i>a&amp;d external ointment</i>	Medpura Vitamin A & D	OTC
<i>ammonium lactate external cream 12 %</i>		
<i>ammonium lactate external lotion 12 %</i>	AL12	
<b>AQUA GLYCOLIC FACE EXTERNAL CREAM</b>	beta care	OTC
<b>DERMABASE EXTERNAL CREAM</b>	beta care	OTC
<b>DML FORTE EXTERNAL CREAM</b>	beta care	OTC
<i>glycerin external liquid</i>		OTC
<b>KERADAN EXTERNAL CREAM</b>	beta care	OTC
<b>KERI LONG LASTING EXTERNAL CREAM</b>	beta care	OTC
<b>LAC-HYDRIN FIVE EXTERNAL LOTION 5 %</b>		OTC
<i>lactic acid external lotion 10 %</i>		
<b>LACTINOL HX EXTERNAL CREAM</b>	beta care	OTC
<b>MEDERMA STRETCH MARKS THERAPY EXTERNAL CREAM</b>	beta care	OTC
<b>NISEKO HYDRATING FACIAL EXTERNAL CREAM</b>	beta care	OTC
<b>RISABAL-PH EXTERNAL CREAM</b>	beta care	OTC
<i>thera-derm external lotion</i>	AmLactin Rapid Relief	OTC
<b>VELVACHOL EXTERNAL CREAM</b>	beta care	OTC
<b>*Imidazole-Related Antifungals - Topical***</b>		
<i>antifungal external powder 2 %</i>	Zeasorb-AF	OTC; QLL (90 GM per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>athletes foot powder spray external aerosol powder 2 %</i>	Cruex Prescription Strength	OTC; QLL (133 GM per 30 days)
<i>clotrimazole anti-fungal external cream 1 %</i>	Desenex	OTC; QLL (60 GM per 30 days)
<i>clotrimazole athletes foot external cream 1 %</i>	Desenex	OTC; QLL (60 GM per 30 days)
<i>clotrimazole external cream 1 %</i>	Desenex	QLL (60 GM per 30 days)
<i>clotrimazole external solution 1 %</i>		QLL (30 ML per 30 days)
<i>gnp miconazorb af external powder 2 %</i>	Zeasorb-AF	OTC; QLL (90 GM per 30 days)
<i>ketoconazole external cream 2 %</i>		ST; QLL (60 GM per 30 days)
<i>ketoconazole external shampoo 2 %</i>		QLL (120 ML per 30 days)
<i>miconazole nitrate external cream 2 %</i>	Micatin	QLL (90 GM per 30 days)
<b>ZEASORB-AF EXTERNAL POWDER 2 %</b>	antifungal	OTC; QLL (90 GM per 30 days)
<b>*Immunomodulators</b>		
<b>Imidazoquinolinamines - Topical***</b>		
<i>imiquimod external cream 5 %</i>		
<b>*Insect Repellents***</b>		
<b>OFF DEEP WOODS DRY EXTERNAL AEROSOL</b>	cvs insect repellent	OTC; QLL (1 unit per 30 days)
<b>OFF DEEP WOODS EXTERNAL AEROSOL</b>	cvs insect repellent	OTC; QLL (1 unit per 30 days)
<b>OFF DEEP WOODS SPORTSMEN EXTERNAL AEROSOL 30 %</b>	cvs insect repellent	OTC; QLL (1 unit per 30 days)
<b>OFF FAMILYCARE CLEAN FEEL EXTERNAL LIQUID 5 %</b>		OTC; QLL (1 unit per 30 days)
<b>OFF SMOOTH &amp; DRY EXTERNAL AEROSOL 15 %</b>	cvs insect repellent	OTC; QLL (1 unit per 30 days)
<b>SAWYER INSECT REPELLENT EXTERNAL LIQUID 20 %</b>		OTC; QLL (1 unit per 30 days)
<b>ULTRATHON INSECT REPELLENT 8 EXTERNAL AEROSOL 25 %</b>	cvs insect repellent	OTC; QLL (1 unit per 30 days)
<b>*Keratolytic/Antimitotic/Vesicant Agents***</b>		
<i>corn &amp; callus remover external liquid 17 %</i>	Compound W	OTC
<i>gnp wart remover external liquid 17 %</i>	Compound W	OTC
<i>podofilox external solution 0.5 %</i>		
<i>qc corn and callus remover external liquid 17 %</i>	Compound W	OTC
<i>qc wart remover external liquid 17 %</i>	Compound W	OTC
<b>SCALPICIN EXTERNAL LIQUID 3 %</b>	cvs scalp relief	OTC
<i>wart remover maximum strength external liquid 17 %</i>	Compound W	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Liniment Combinations***</b>		
<b>CAPASIL EXTERNAL CREAM 2-10 %</b>	muscle rub	OTC
<b>MENCYLATE EXTERNAL CREAM 2-10 %</b>	muscle rub	OTC
<i>muscle rub external cream 10-15 %</i>	Capasil	OTC
<i>pain relieving external cream</i>	Capasil	OTC
<i>sm cold &amp; hot extra strength external cream</i>	Capasil	OTC
<b>THERA-GESIC EXTERNAL CREAM 1-15 %</b>	muscle rub	OTC
<b>*Local Anesthetics - Topical***</b>		
<b>ASPERCREME LIDOCAINE EXTERNAL CREAM 4 %</b>	cvs lidocaine maximum strength	OTC; QLL (2 GM per 1 day)
<i>capsaicin external cream 0.025 %</i>	DermacinRx Penetral	OTC
<i>gnp lidocaine pain relief external patch 4 %</i>	Aspercreme Lidocaine	OTC; QLL (1 EA per 1 day)
<i>lidocaine external ointment 5 %</i>		QLL (50 GM per 30 days)
<i>lidocaine external patch 5 %</i>	Lidocan	PA; QLL (90 EA per 30 days)
<i>qc lidocaine pain relief external patch 4 %</i>	Aspercreme Lidocaine	OTC; QLL (1 EA per 1 day)
<b>*Macrolide Immunosuppressants - Topical***</b>		
<i>tacrolimus external ointment 0.03 %, 0.1 %</i>		ST
<b>*Misc. Topical Combinations***</b>		
<i>calamine external lotion 8-8 %</i>		OTC
<b>*Rosacea Agents***</b>		
<i>azelaic acid external gel 15 %</i>	Finacea	QLL (50 GM per 30 days)
<i>metronidazole external cream 0.75 %</i>	MetroCream	
<i>metronidazole external gel 0.75 %</i>		
<i>metronidazole external gel 1 %</i>	Metrogel	ST; QLL (60 GM per 30 days)
<i>metronidazole external lotion 0.75 %</i>	MetroLotion	
<b>*Scabicide Combinations***</b>		
<i>lice killing external shampoo 4-0.33 %</i>	Rid Lice Killing Shampoo	OTC; QLL (240 ML per 30 days)
<b>*Scabicides &amp; Pediculicides***</b>		
<i>ivermectin external lotion 0.5 %</i>	Sklice	ST; QLL (117 GM per 30 days)
<i>malathion external lotion 0.5 %</i>	Ovide	ST; QLL (59 ML per 180 days)
<i>permethrin external cream 5 %</i>		QLL (60 GM per 30 days)
<i>sm lice treatment external liquid 1 %</i>	Nix Creme Rinse	OTC; QLL (120 ML per 30 days)
<i>spinosad external suspension 0.9 %</i>	Natroba	ST

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Skin Cleansers***</b>		
<i>isopropyl alcohol wipes external 70 %</i>		OTC
<b>*Tar Products***</b>		
<i>therapeutic external shampoo 0.5 %</i>	DHS Tar	OTC
<b>*Topical Anesthetic Combinations***</b>		
<i>lidocaine-prilocaine external cream 2.5-2.5 %</i>		QLL (1 GM per 1 day)
<b>*DIAGNOSTIC PRODUCTS*</b>		
<b>*Diagnostic Tests***</b>		
<b>CHEMSTRIP K IN VITRO STRIP</b>	ketone test	OTC
<b>DIASTIX IN VITRO STRIP</b>		OTC
<b>FORA GTEL BLOOD KETONE TEST IN VITRO STRIP</b>		OTC
<b>GOJJI BLOOD KETONE TEST IN VITRO STRIP</b>		OTC
<b>KETOSTIX IN VITRO STRIP</b>	ketone test	OTC
<b>NOVA MAX PLUS KETONE TEST IN VITRO STRIP</b>		OTC
<b>ONETOUCH ULTRA STRIP IN VITRO</b>	blood glucose test	OTC; QLL (150 EA per 30 days)
<b>ONETOUCH ULTRA STRIP IN VITRO</b>	blood glucose test	Smart Edit Conditions Apply; OTC; QLL (150 EA per 30 days)
<b>ONETOUCH ULTRA TEST IN VITRO STRIP</b>	blood glucose test	Smart Edit Conditions Apply; OTC; QLL (150 EA per 30 days)
<b>ONETOUCH VERIO STRIP IN VITRO</b>	blood glucose test	OTC; QLL (150 EA per 30 days)
<b>ONETOUCH VERIO STRIP IN VITRO</b>	blood glucose test	Smart Edit Conditions Apply; OTC; QLL (150 EA per 30 days)
<b>ONETOUCH VERIO STRIP IN VITRO</b>	blood glucose test	Smart Edit Conditions Apply; OTC; QLL (150 EA per 30 days)
<b>PRECISION XTRA KETONE IN VITRO STRIP</b>		OTC

Drug Name	Reference	Restrictions
<b>*DIGESTIVE AIDS*</b>		
<b>*Digestive Enzymes***</b>		
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT		
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT		
<b>*DIURETICS*</b>		
<b>*Carbonic Anhydrase Inhibitors***</b>		
<i>acetazolamide er oral capsule extended release 12 hour 500 mg</i>		
<i>acetazolamide oral tablet 125 mg, 250 mg</i>		
<b>*Diuretic Combinations***</b>		
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>		
<i>spironolactone-hctz oral tablet 25-25 mg</i>		
<i>triamterene-hctz oral capsule 37.5-25 mg</i>		
<i>triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg</i>		
<b>*Loop Diuretics***</b>		
<i>bumetanide oral tablet 0.5 mg</i>	Bumex	
<i>bumetanide oral tablet 1 mg, 2 mg</i>		
<i>ethacrynic acid oral tablet 25 mg</i>	Edecrin	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>		
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	Lasix	
<i>toremide oral tablet 10 mg, 100 mg, 5 mg</i>		
<i>toremide oral tablet 20 mg</i>	Soanz	
<b>*Potassium Sparing Diuretics***</b>		
<i>amiloride hcl oral tablet 5 mg</i>		
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	Aldactone	
<b>*Thiazides And Thiazide-Like Diuretics***</b>		
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>		
<i>hydrochlorothiazide oral capsule 12.5 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>		
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>		
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>		
<b>*ENDOCRINE AND METABOLIC AGENTS - MISC.*</b>		
<b>*Bisphosphonates***</b>		
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>		QLL (30 Tablets per 30 days)
<i>alendronate sodium oral tablet 35 mg</i>		QLL (4 Tablets per 30 days)
<i>alendronate sodium oral tablet 70 mg</i>	Fosamax	QLL (4 Tablets per 30 days)
<i>ibandronate sodium intravenous solution 3 mg/3ml</i>		QLL (3 ML per 84 days)
<i>ibandronate sodium oral tablet 150 mg</i>		QLL (1 EA per 28 days)
<i>pamidronate disodium intravenous solution 30 mg/10ml, 6 mg/ml, 90 mg/10ml</i>		
<b>*Calcimimetic Agents***</b>		
<i>cinacalcet hcl oral tablet 30 mg, 60 mg, 90 mg</i>	Sensipar	PA
<b>*Calcitonins***</b>		
<i>calcitonin (salmon) nasal solution 200 unit/act</i>		
<b>*Carnitine Replenisher - Agents***</b>		
<i>levocarnitine oral solution 1 gm/10ml</i>	Carnitor	Smart Edit Conditions Apply
<i>levocarnitine oral tablet 330 mg</i>	Carnitor	Smart Edit Conditions Apply
<b>*Dopamine Receptor Agonists***</b>		
<i>cabergoline oral tablet 0.5 mg</i>		Smart Edit Conditions Apply
<b>*Gnrh/Lhrh Antagonists***</b>		
<b>ORLISSA ORAL TABLET 150 MG, 200 MG</b>		PA
<b>*Growth Hormones***</b>		
<b>NORDITROPIN FLEXP SUBCUTANEOUS SOLUTION PEN- INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 30 MG/3ML, 5 MG/1.5ML</b>		PA
<b>*Hyperparathyroid Treatment - Vitamin D Analogs***</b>		
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	Rocaltrol	
<i>paricalcitol oral capsule 1 mcg, 2 mcg</i>	Zemplar	ST; Smart Edit Conditions Apply; QLL (30 EA per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>paricalcitol oral capsule 4 mcg</i>		ST; Smart Edit Conditions Apply; QLL (30 EA per 30 days)
<b>*Parathyroid Hormone And Derivatives***</b>		
<i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>		PA; QLL (2.48 ML per 28 days)
<b>TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML</b>		PA; QLL (0.052 ML per 1 day)
<b>*Rank Ligand (Rankl) Inhibitors***</b>		
<b>PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML</b>		PA; QLL (1 ML per 168 days)
<b>*Selective Estrogen Receptor Modulators (Serms)***</b>		
<i>raloxifene hcl oral tablet 60 mg</i>	Evista	QLL (30 Tablets per 30 days)
<b>*Somatostatic Agents***</b>		
<i>octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	SandoSTATIN	PA
<i>octreotide acetate injection solution 1000 mcg/ml, 200 mcg/ml</i>		PA
<b>SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG</b>		PA
<b>*Vasopressin***</b>		
<i>desmopressin acetate oral tablet 0.1 mg, 0.2 mg</i>	DDAVP	QLL (90 Tablets per 30 days)
<i>desmopressin acetate spray nasal solution 0.01 %</i>		QLL (10 ML per 25 days)
<b>*ESTROGENS*</b>		
<b>*Estrogen &amp; Progestin***</b>		
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg</i>		QLL (1 EA per 1 day)
<i>estradiol-norethindrone acet oral tablet 1-0.5 mg</i>	Mimvey	QLL (1 EA per 1 day)
<b>JINTELI ORAL TABLET 1-5 MG-MCG</b>	norethindrone-eth estradiol	QLL (1 EA per 1 day)
<b>MIMVEY ORAL TABLET 1-0.5 MG</b>	estradiol-norethindrone acet	QLL (1 EA per 1 day)
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg</i>	Fyavolv	QLL (1 EA per 1 day)
<i>norethindrone-eth estradiol oral tablet 1-5 mg-mcg</i>	Jinteli	QLL (1 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Estrogens***</b>		
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	Estrace	
<i>estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	Alora	QLL (8 EA per 28 days)
<i>estradiol transdermal patch twice weekly 0.0375 mg/24hr, 0.05 mg/24hr</i>	Dotti	QLL (8 EA per 28 days)
<i>estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	Climara	QLL (4 Patches per 30 days)
<b>*FLUOROQUINOLONES*</b>		
<b>*Fluoroquinolones***</b>		
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg</i>	Cipro	QLL (28 Tablets per 30 days)
<i>ciprofloxacin hcl oral tablet 750 mg</i>		QLL (28 Tablets per 30 days)
<i>levofloxacin oral solution 25 mg/ml</i>		AL (Max 12 Years)
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>		QLL (14 Tablets per 90 days)
<b>*GASTROINTESTINAL AGENTS - MISC.*</b>		
<b>*Antiflatulents***</b>		
<i>eq gas relief extra strength oral capsule 125 mg</i>	Gas-X Extra Strength	OTC
<i>gas relief extra strength oral tablet chewable 125 mg</i>	Gas-X Extra Strength	OTC
<i>gas relief ultra strength oral capsule 180 mg</i>	Gas-X Ultra Strength	OTC
<i>simethicone liquid</i>		
<b>*Gallstone Solubilizing Agents***</b>		
<i>ursodiol oral capsule 300 mg</i>		
<i>ursodiol oral tablet 250 mg</i>		
<i>ursodiol oral tablet 500 mg</i>	Urso Forte	
<b>*Gastrointestinal Chloride Channel Activators***</b>		
<i>lubiprostone oral capsule 24 mcg</i>	Amitiza	PA; Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 18 Years)
<i>lubiprostone oral capsule 8 mcg</i>	Amitiza	PA; Smart Edit Conditions Apply; QLL (2 EA per 1 day); AL (Min 18 Years)
<b>*Gastrointestinal Stimulants***</b>		
<i>metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	Reglan	
<b>*Inflammatory Bowel Agents***</b>		
<i>balsalazide disodium oral capsule 750 mg</i>	Colazal	
<i>mesalamine er oral capsule extended release 24 hour 0.375 gm</i>	Apriso	QLL (4 EA per 1 day)
<i>mesalamine oral capsule delayed release 400 mg</i>	Delzicol	QLL (6 EA per 1 day)
<i>mesalamine oral tablet delayed release 1.2 gm</i>	Lialda	QLL (120 EA per 30 days)
<i>mesalamine rectal enema 4 gm</i>		
<i>mesalamine rectal suppository 1000 mg</i>	Canasa	
<i>sulfasalazine oral tablet 500 mg</i>	Azulfidine	
<i>sulfasalazine oral tablet delayed release 500 mg</i>	Azulfidine EN-tabs	
<b>*Intestinal Acidifiers***</b>		
<i>enulose oral solution 10 gm/15ml</i>		
<i>generlac oral solution 10 gm/15ml</i>		
<i>lactulose encephalopathy oral solution 10 gm/15ml, 20 gm/30ml</i>		
<b>*Peripheral Opioid Receptor Antagonists***</b>		
<b>MOVANTI<sup>K</sup> ORAL TABLET 12.5 MG, 25 MG</b>		PA; QLL (30 EA per 30 days)
<b>SYMPROIC ORAL TABLET 0.2 MG</b>		PA; QLL (1 EA per 1 day)
<b>*Phosphate Binder Agents***</b>		
<i>calcium acetate (phos binder) oral tablet 667 mg</i>	Calphron	
<b>CALPHRON ORAL TABLET 667 MG</b>	calcium acetate (phos binder)	OTC
<i>sevelamer carbonate oral tablet 800 mg</i>	Renvela	ST
<b>*GENITOURINARY AGENTS - MISCELLANEOUS*</b>		
<b>*5-Alpha Reductase Inhibitors***</b>		
<i>finasteride oral tablet 5 mg</i>	Proscar	QLL (1 EA per 1 day)
<b>*Alpha 1-Adrenoceptor Antagonists***</b>		
<i>alfuzosin hcl er oral tablet extended release 24 hour 10 mg</i>	Uroxatral	QLL (1 EA per 1 day)
<i>tamsulosin hcl oral capsule 0.4 mg</i>	Flomax	QLL (60 Capsules per 30 days)
<b>*Citrates***</b>		
<i>cytra k crystals oral packet 3300-1002 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>potassium citrate er oral tablet extended release 10 meq (1080 mg)</i>	Urocit-K 10	
<i>potassium citrate er oral tablet extended release 15 meq (1620 mg)</i>	Urocit-K 15	
<i>potassium citrate er oral tablet extended release 5 meq (540 mg)</i>	Urocit-K 5	
<i>potassium citrate monohydrate granules</i>		
<i>potassium citrate-citric acid oral solution 1100-334 mg/5ml</i>		
<b>*Genitourinary Irrigants***</b>		
<i>sodium chloride irrigation solution 0.9 %</i>	Argyle Sterile Saline	
<b>*Phosphates***</b>		
<b>K-PHOS NO 2 ORAL TABLET 305-700 MG</b>		
<b>*Urinary Analgesics***</b>		
<i>gnp urinary pain relief max st oral tablet 99.5 mg</i>	AZO Urinary Pain Relief	OTC
<b>PHENAZO ORAL TABLET 200 MG</b>	phenazopyridine hcl	
<i>phenazopyridine hcl oral tablet 100 mg</i>	Pyridium	
<i>phenazopyridine hcl oral tablet 200 mg</i>	Phenazo	
<b>*GOUT AGENTS*</b>		
<b>*Gout Agent Combinations***</b>		
<i>colchicine-probenecid oral tablet 0.5-500 mg</i>		
<b>*Gout Agents***</b>		
<i>allopurinol oral tablet 100 mg, 300 mg</i>		
<i>colchicine oral tablet 0.6 mg</i>		QLL (9 EA per 30 days)
<i>febuxostat oral tablet 40 mg, 80 mg</i>	Uloric	ST; QLL (1 EA per 1 day)
<b>*Uricosurics***</b>		
<i>probenecid oral tablet 500 mg</i>		
<b>*HEMATOLOGICAL AGENTS - MISC.*</b>		
<b>*C1 Esterase Inhibitors***</b>		
<b>HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT, 3000 UNIT</b>		PA
<b>*Complement C5 Inhibitors***</b>		
<b>SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML</b>		PA; Smart Edit Conditions Apply



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Hematorheologic Agents***</b>		
<i>pentoxifylline er oral tablet extended release 400 mg</i>		
<b>*Phosphodiesterase Iii Inhibitors***</b>		
<i>cilostazol oral tablet 100 mg, 50 mg</i>		
<b>*Plasma Kallikrein Inhibitors - Monoclonal Antibodies***</b>		
<b>TAKHZYRO SOLUTION PREFILLED SYRINGE 150 MG/ML SUBCUTANEOUS</b>		PA; QLL (2 ML per 28 days)
<b>TAKHZYRO SOLUTION PREFILLED SYRINGE 300 MG/2ML SUBCUTANEOUS</b>		PA; QLL (4 ML per 28 days)
<b>TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML</b>		PA; QLL (4 ML per 28 days)
<b>*Platelet Aggregation Inhibitors***</b>		
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>		
<b>*Quinazoline Agents***</b>		
<i>anagrelide hcl oral capsule 0.5 mg</i>	Agrylin	
<i>anagrelide hcl oral capsule 1 mg</i>		
<b>*Thienopyridine Derivatives***</b>		
<i>clopidogrel bisulfate oral tablet 300 mg</i>		QLL (30 Tablets per 30 days)
<i>clopidogrel bisulfate oral tablet 75 mg</i>	Plavix	QLL (30 Tablets per 30 days)
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i>	Effient	QLL (1 EA per 1 day)
<b>*HEMATOPOIETIC AGENTS*</b>		
<b>*Amino Acids***</b>		
<b>ENDARI ORAL PACKET 5 GM</b>	l-glutamine	PA
<b>*Cobalamins***</b>		
<i>cyanocobalamin injection solution 1000 mcg/ml</i>	Dodex	
<i>vitamin b-12 oral tablet 1000 mcg</i>		OTC
<i>vitamin b-12 sublingual tablet sublingual 1000 mcg</i>		OTC
<b>*Cytotoxic Agents***</b>		
<b>DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG</b>		

Drug Name	Reference	Restrictions
<b>*Erythropoiesis-Stimulating Agents (Esas)***</b>		
<b>RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML</b>		PA
<b>*Folic Acid/Folate Combinations***</b>		
<i>fa-vitamin b-6-vitamin b-12 oral tablet 2.2-25-0.5 mg</i>		
<i>folplex 2.2 oral tablet 2.2-25-0.5 mg</i>		
<b>*Folic Acid/Folates***</b>		
<i>folic acid oral tablet 1 mg</i>		
<b>*Granulocyte Colony-Stimulating Factors (G-Csf)***</b>		
<b>ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML</b>		PA
<b>ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML</b>		PA
<b>*Iron Combinations***</b>		
<i>iron 100 plus oral tablet 100-250-0.025-1 mg</i>	Icar-C Plus	OTC
<b>*Iron***</b>		
<b>FERATE ORAL TABLET 240 (27 FE) MG</b>	cvs iron	OTC
<b>FERROCITE ORAL TABLET 324 MG</b>	ferrous fumarate	OTC
<i>ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg</i>	Ferrocite	OTC
<i>ferrous gluconate oral tablet 324 (37.5 fe) mg</i>		OTC
<i>ferrous gluconate oral tablet 324 (38 fe) mg</i>		OTC
<i>ferrous sulfate oral solution 220 (44 fe) mg/5ml</i>	One Vite Ferrous Sulfate	OTC
<i>ferrous sulfate oral tablet 27 mg</i>		OTC
<i>ferrous sulfate oral tablet 325 (65 fe) mg</i>	FeroSul	OTC
<i>iron chews pediatric oral tablet chewable 15 mg</i>		OTC
<i>iron oral tablet 28 mg</i>		OTC
<i>kp ferrous gluconate oral tablet 324 (37.5 fe) mg</i>		OTC
<b>POLY-IRON 150 ORAL CAPSULE 150 MG</b>	ferric x-150	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>sm slow release iron oral tablet extended release 143 (45 fe) mg</i>		OTC
<b>*Thrombopoietin (Tpo) Receptor Agonists***</b>		
<b>PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG</b>		PA; QLL (1 EA per 1 day)
<b>*HEMOSTATICS*</b>		
<b>*Hemostatics - Systemic***</b>		
<i>tranexamic acid oral tablet 650 mg</i>		QLL (30 EA per 28 days)
<b>*HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS*</b>		
<b>*Antihistamine Hypnotics***</b>		
<i>eql nighttime sleep aid oral tablet 25 mg</i>	Nytol QuickCaps	OTC
<i>sleep aid (doxylamine) oral tablet 25 mg</i>	Unisom SleepTabs	OTC
<b>*Barbiturate Hypnotics***</b>		
<i>phenobarbital oral elixir 20 mg/5ml</i>		
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>		
<b>*Benzodiazepine Hypnotics***</b>		
<i>estazolam oral tablet 1 mg, 2 mg</i>		QLL (30 Tablets per 30 days)
<i>temazepam oral capsule 15 mg, 30 mg</i>	Restoril	QLL (30 Capsules per 30 days)
<b>*Non-Benzodiazepine - Gaba-Receptor Modulators***</b>		
<i>zaleplon oral capsule 10 mg, 5 mg</i>		QLL (30 Capsules per 30 days)
<i>zolpidem tartrate oral tablet 10 mg, 5 mg</i>	Ambien	QLL (30 Capsules per 30 days)
<b>*Orexin Receptor Antagonists***</b>		
<b>DAYVIGO ORAL TABLET 10 MG, 5 MG</b>		PA; QLL (1 EA per 1 day)
<b>*Selective Melatonin Receptor Agonists***</b>		
<i>ramelteon oral tablet 8 mg</i>	Rozerem	ST; QLL (1 EA per 1 day); AL (Min 18 Years)
<b>*LAXATIVES*</b>		
<b>*Bowel Evacuant Combinations***</b>		
<b>GAVILYTE-C ORAL SOLUTION RECONSTITUTED 240 GM</b>		
<b>GAVILYTE-G ORAL SOLUTION RECONSTITUTED 236 GM</b>	peg-3350/electrolytes	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm</i>	GaviLyte-N with Flavor Pack	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>peg-3350/electrolytes oral solution reconstituted 236 gm</i>	GaviLyte-G	
<b>*Bulk Laxatives***</b>		
<i>fiber oral tablet 625 mg</i>	FiberCon	OTC
<i>konsyl daily fiber oral packet 100 %</i>		OTC
<b>*Laxatives - Miscellaneous***</b>		
<i>constulose oral solution 10 gm/15ml</i>		
<i>cvs glycerin adult rectal suppository 2.1 gm</i>		OTC
<b>CVS PURELAX ORAL POWDER 17 GM/SCOOP</b>	ft clearlax	OTC; QLL (34 GM per 1 day)
<i>glycerin (adult) rectal suppository 2.1 gm</i>		OTC
<i>glycerin (infants &amp; children) rectal suppository 1 gm</i>		OTC
<i>glycerin (pediatric) rectal suppository 1.2 gm</i>		OTC
<i>glycerin adult rectal suppository 2 gm</i>	Avedana Glycerin (Adult)	OTC
<b>HEALTHYLAX ORAL PACKET 17 GM</b>	polyethylene glycol 3350	OTC; QLL (1 EA per 1 day)
<i>lactulose oral solution 10 gm/15ml, 20 gm/30ml</i>		
<i>polyethylene glycol 3350 oral packet 17 gm</i>	HealthyLax	OTC; QLL (1 EA per 1 day)
<i>sm glycerin pediatric rectal suppository 80.7 %</i>		OTC
<b>*Laxatives &amp; Dss***</b>		
<i>sennosides-docusate sodium oral tablet 8.6-50 mg</i>	Colace 2-IN-1	OTC
<b>*Lubricant Laxatives***</b>		
<i>mineral oil heavy oil</i>		
<i>mineral oil heavy oral oil</i>		
<i>mineral oil oil</i>		
<b>MURI-LUBE OIL</b>	mineral oil light	
<b>*Saline Laxative Mixtures***</b>		
<i>enema rectal enema 7-19 gm/118ml</i>	Fleet Enema	OTC; QLL (133 ML per 1 day)
<b>*Saline Laxatives***</b>		
<i>gnp milk of magnesia oral suspension 1200 mg/15ml</i>	Dulcolax	OTC
<i>qc magnesium citrate oral solution 1.745 gm/30ml</i>	Citroma	OTC
<b>*Stimulant Laxatives***</b>		
<i>bisacodyl ec oral tablet delayed release 5 mg</i>	Alophen	
<i>bisacodyl rectal suppository 10 mg</i>	Dulcolax	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>castor oil oral oil 100 %</i>		OTC
<i>chocolated laxative oral tablet chewable 15 mg</i>	Ex-Lax	OTC
<i>gnp castor oil oral oil 100 %</i>		OTC
<i>senna oral syrup 176 mg/5ml</i>		OTC
<i>senna oral syrup 8.8 mg/5ml</i>	OneLAX Senna	
<i>senna oral tablet 8.6 mg</i>	Evac-U-Gen	OTC
<b>SENNA SMOOTH ORAL TABLET 15 MG</b>	laxative regular strength	OTC
<b>*Surfactant Laxatives***</b>		
<i>docusate calcium oral capsule 240 mg</i>	Surfak	OTC
<i>docusate sodium oral capsule 100 mg</i>	Colace	OTC
<i>docusate sodium oral capsule 250 mg</i>		
<i>docusate sodium oral liquid 50 mg/5ml</i>	OneLAX Docusate Sodium	OTC
<i>docusate sodium oral syrup 60 mg/15ml</i>		OTC
<b>PEDIA-LAX ORAL LIQUID 50 MG/15ML</b>		OTC
<b>*MACROLIDES*</b>		
<b>*Azithromycin***</b>		
<i>azithromycin oral packet 1 gm</i>	Zithromax	
<i>azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>	Zithromax	AL (Max 12 Years)
<i>azithromycin oral tablet 250 mg, 500 mg</i>	Zithromax	
<i>azithromycin oral tablet 600 mg</i>		
<b>*Clarithromycin***</b>		
<i>clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>		AL (Max 12 Years)
<i>clarithromycin oral tablet 250 mg, 500 mg</i>		
<b>*Fidaxomicin***</b>		
<b>DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML</b>		PA
<b>DIFICID ORAL TABLET 200 MG</b>		PA
<b>*MEDICAL DEVICES AND SUPPLIES*</b>		
<b>*Applicators,Cotton Balls,Etc***</b>		
<i>alcohol prep pad</i>	Advocate Alcohol Prep Pads	OTC
<b>*Glucose Monitoring Test Supplies***</b>		
<b>DEXCOM G6 RECEIVER DEVICE</b>		PA; QLL (1 EA per 365 days)
<b>DEXCOM G6 SENSOR</b>	guardian sensor 3	PA; QLL (3 EA per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>DEXCOM G6 TRANSMITTER</b>		PA; QLL (1 EA per 90 days)
<b>DEXCOM G7 RECEIVER DEVICE</b>		PA; QLL (1 EA per 365 days)
<b>DEXCOM G7 SENSOR</b>	guardian sensor 3	PA; QLL (3 EA per 30 days)
<b>FREESTYLE LIBRE 14 DAY READER DEVICE</b>		PA; QLL (1 EA per 365 days)
<b>FREESTYLE LIBRE 14 DAY SENSOR</b>	guardian sensor 3	PA; QLL (2 EA per 28 days)
<b>FREESTYLE LIBRE 2 READER DEVICE</b>		PA; QLL (1 EA per 365 days)
<b>FREESTYLE LIBRE 2 SENSOR</b>	guardian sensor 3	PA; QLL (2 EA per 28 days)
<b>FREESTYLE LIBRE 3 READER DEVICE</b>		PA; QLL (1 EA per 365 days)
<b>FREESTYLE LIBRE 3 SENSOR</b>	guardian sensor 3	PA; QLL (2 EA per 28 days)
<b>FREESTYLE LIBRE READER DEVICE</b>		PA; QLL (1 EA per 365 days)
<i>lancet device</i>	OneTouch Delica Plus Lancing	OTC
<b>ONETOUCH DELICA PLUS LANCET30G</b>	acti-lance 28g	OTC
<b>ONETOUCH DELICA PLUS LANCET33G</b>	acti-lance 28g	OTC
<b>ONETOUCH DELICA PLUS LANCING</b>	lancet device	OTC
<b>ONETOUCH DELICA SAFETY LANCING</b>	acti-lance 28g	OTC
<b>ONETOUCH ULTRA 2 KIT W/DEVICE</b>	blood glucose monitor system	OTC; QLL (1 EA per 365 days)
<b>ONETOUCH ULTRA CONTROL IN VITRO LIQUID</b>	element compact control 2	OTC
<b>ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE</b>	blood glucose monitor system	OTC; QLL (1 EA per 365 days)
<b>ONETOUCH VERIO REFLECT KIT W/DEVICE</b>	blood glucose monitor system	OTC; QLL (1 EA per 365 days)
<b>*Needles &amp; Syringes***</b>		
<b>BD INSULIN SYRINGE U/F 1/2UNIT 31G X 5/16" 0.3 ML</b>	careone insulin syringe	OTC
<b>BD INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML</b>	careone insulin syringe	OTC
<b>BD INSULIN SYRINGE U/F 31G X 5/16" 1 ML</b>	aq insulin syringe	OTC
<b>BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML</b>		
<b>BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.5 ML</b>	careone insulin syringe	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>BD PEN NEEDLE MICRO U/F 32G X 6 MM</b>	1st tier unifine pentips	ST; OTC
<b>BD PEN NEEDLE MINI U/F 31G X 5 MM</b>	1st tier unifine pentips	ST; OTC
<b>BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM</b>	1st tier unifine pentips	ST; OTC
<b>BD PEN NEEDLE NANO U/F 32G X 4 MM</b>	1st tier unifine pentips	ST
<b>BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM</b>	sure comfort pen needles	ST; OTC
<b>BD PEN NEEDLE SHORT U/F 31G X 8 MM</b>	1st tier unifine pentips	ST; OTC
<b>BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML</b>	global easy glide insulin syr	OTC
<b>BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML</b>	global easy glide insulin syr	OTC
<b>*Peak Flow Meters***</b>		
<b>TRUZONE PEAK FLOW METER DEVICE</b>	breathe ease peak flow meter	QLL (1 EA per 1 Year)
<b>*Spacer/Aerosol-Holding Chambers &amp; Supplies***</b>		
<b>AEROCHAMBER MINI CHAMBER DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>COMPACT SPACE CHAMBER/LG MASK DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>COMPACT SPACE CHAMBER/MED MASK DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>COMPACT SPACE CHAMBER/SM MASK DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>EASIVENT</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>EASIVENT MASK LARGE</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>EASIVENT MASK MEDIUM</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>EASIVENT MASK SMALL</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>FLEXICHAMBER ADULT MASK/SMALL</b>		QLL (2 EA per 1 year)
<b>FLEXICHAMBER CHILD MASK/LARGE</b>		QLL (2 EA per 1 year)
<b>FLEXICHAMBER CHILD MASK/SMALL</b>		QLL (2 EA per 1 year)
<b>INSPIREASE</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>MICROCHAMBER</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>MICROSPACER</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>OPTICHAMBER DIAMOND</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>OPTICHAMBER DIAMOND-LG MASK DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>OPTICHAMBER DIAMOND-MD MASK</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>OPTICHAMBER DIAMOND-SM MASK</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>POCKET SPACER DEVICE</b>	breathe comfort chamber/adult	QLL (2 EA per 1 year)
<b>RITFLO DEVICE</b>	breathe comfort chamber/adult	QLL (1 EA per 1 Year)
<b>*MIGRAINE PRODUCTS*</b>		
<b>*Calcitonin Gene-Related Peptide Receptor Antag (Cgrp)***</b>		
<b>UBRELVY ORAL TABLET 50 MG</b>		ST; QLL (16 EA per 30 days)
<b>*Cgrp Receptor Antagonists - Monoclonal Antibodies***</b>		
<b>EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML</b>		ST; QLL (1 ML per 28 days)
<b>EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML</b>		ST; QLL (1 ML per 28 days)
<b>*Selective Serotonin Agonists 5-Ht(1)***</b>		
<i>eletriptan hydrobromide oral tablet 20 mg, 40 mg</i>	Relpax	QLL (9 EA per 30 days)
<i>naratriptan hcl oral tablet 1 mg</i>		QLL (9 EA per 30 days)
<i>naratriptan hcl oral tablet 2.5 mg</i>		QLL (9 EA per 30 Days)
<i>rizatriptan benzoate oral tablet 10 mg</i>	Maxalt	QLL (12 Tablets per 30 days)
<i>rizatriptan benzoate oral tablet 5 mg</i>		QLL (12 Tablets per 30 days)
<i>rizatriptan benzoate oral tablet dispersible 10 mg</i>	Maxalt-MLT	QLL (9 EA per 30 days)
<i>rizatriptan benzoate oral tablet dispersible 5 mg</i>		QLL (9 EA per 30 days)
<i>sumatriptan nasal solution 20 mg/act, 5 mg/act</i>		QLL (6 Nasal Sprays per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	Imitrex	QLL (9 Tablets per 30 days)
<i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml</i>	Imitrex STATdose Refill	QLL (4 Vials per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>		QLL (4 Vials per 30 days)
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>	Imitrex STATdose System	QLL (4 Vials per 30 days)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*MINERALS &amp; ELECTROLYTES*</b>		
<b>*Calcium Combinations***</b>		
<i>cal-citrate plus vitamin d oral tablet 250-2.5 mg-mcg</i>		OTC
<i>calcium 500 + d oral tablet 500-3.125 mg-mcg</i>		OTC
<i>calcium 500/vitamin d oral tablet 500-3.125 mg-mcg</i>		OTC
<i>calcium 600 + minerals oral tablet 600-200 mg-unit</i>		OTC
<i>calcium 600+d oral tablet 600-5 mg-mcg</i>		OTC
<i>calcium-vitamin d oral tablet 600-3.125 mg-mcg</i>		OTC
<i>qc calcium/minerals/vitamin d oral tablet 600-400 mg-unit</i>		OTC
<i>ra calcium 600/vit d/minerals oral tablet 600-200 mg-unit</i>		OTC
<b>*Calcium***</b>		
<i>calcium 600 oral tablet 1500 (600 ca) mg</i>		OTC
<i>calcium oral tablet 500 mg</i>		OTC
<i>cvs calcium oral tablet 600 mg</i>		OTC
<i>oyster shell calcium oral tablet 500 mg</i>		OTC
<i>ra calcium high potency oral tablet 600 mg</i>		OTC
<i>ra calcium oral tablet 500 mg</i>		OTC
<b>*Fluoride***</b>		
<i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>	SoluVita	
<i>sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg</i>		
<b>*Magnesium***</b>		
<i>magnesium oral tablet 250 mg</i>		OTC
<i>magnesium oxide -mg supplement oral tablet 400 (240 mg) mg</i>	MAGnesium-Oxide	OTC
<i>magnesium oxide -mg supplement oral tablet 500 mg</i>		OTC
<b>*Phosphate***</b>		
<b>PHOSPHA 250 NEUTRAL ORAL TABLET 155-852-130 MG</b>	phosphorous	
<b>PHOSPHO-TRIN K500 ORAL TABLET 500 MG</b>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Potassium***</b>		
<b>EFFER-K ORAL TABLET EFFERVESCENT 25 MEQ</b>		
<b>KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ</b>	potassium chloride crys er	
<b>K-PRIME ORAL TABLET EFFERVESCENT 25 MEQ</b>		
<b>K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ</b>	potassium chloride er	
<i>potassium chloride crys er oral tablet extended release 10 meq</i>	Klor-Con M10	
<i>potassium chloride crys er oral tablet extended release 20 meq</i>	Klor-Con M20	
<i>potassium chloride er oral capsule extended release 10 meq, 8 meq</i>		
<i>potassium chloride er oral tablet extended release 10 meq</i>	Klor-Con 10	
<i>potassium chloride er oral tablet extended release 20 meq</i>	K-Tab	
<i>potassium chloride er oral tablet extended release 8 meq</i>	Klor-Con	
<b>*MISCELLANEOUS THERAPEUTIC CLASSES*</b>		
<b>*Chelating Agents***</b>		
<i>penicillamine oral tablet 250 mg</i>	Depen Titratabs	PA; Smart Edit Conditions Apply; QLL (8 EA per 1 day)
<b>*Cyclosporine Analogs***</b>		
<i>cyclosporine modified oral capsule 100 mg, 25 mg</i>	Gengraf	
<i>cyclosporine modified oral capsule 50 mg</i>		
<i>cyclosporine modified oral solution 100 mg/ml</i>	Gengraf	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	SandIMMUNE	
<b>GENGRAF ORAL CAPSULE 100 MG, 25 MG</b>	cyclosporine modified	
<b>GENGRAF ORAL SOLUTION 100 MG/ML</b>	cyclosporine modified	
<b>*Immunomodulators For Myelodysplastic Syndromes***</b>		
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg</i>	Revlimid	PA; QLL (30 EA per 30 days)
<b>REVLIMID CAPSULE 10 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>REVLIMID CAPSULE 15 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)
<b>REVLIMID CAPSULE 2.5 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)
<b>REVLIMID CAPSULE 20 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)
<b>REVLIMID CAPSULE 25 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)
<b>REVLIMID CAPSULE 5 MG ORAL</b>	lenalidomide	PA; QLL (30 EA per 30 days)
<b>REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG</b>	lenalidomide	PA; Smart Edit Conditions Apply; QLL (30 EA per 30 days)
<b>*Inosine Monophosphate Dehydrogenase Inhibitors***</b>		
<i>mycophenolate mofetil oral capsule 250 mg</i>	CellCept	
<i>mycophenolate mofetil oral tablet 500 mg</i>	CellCept	
<b>*Irrigation Solutions***</b>		
<i>sterile water for irrigation irrigation solution</i>	Argyle Sterile Water	
<i>water for irrigation, sterile irrigation solution</i>	Argyle Sterile Water	
<b>*Macrolide Immunosuppressants***</b>		
<i>sirolimus oral solution 1 mg/ml</i>	Rapamune	
<i>sirolimus oral tablet 0.5 mg</i>	Rapamune	
<i>sirolimus oral tablet 1 mg, 2 mg</i>	Rapamune	
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	Prograf	
<b>*Potassium Removing Agents***</b>		
<b>SPS ORAL SUSPENSION 15 GM/60ML</b>		
<b>*Purine Analogs***</b>		
<i>azathioprine oral tablet 50 mg</i>	Imuran	
<b>*MOUTH/THROAT/DENTAL AGENTS*</b>		
<b>*Anti-Infectives - Throat***</b>		
<i>clotrimazole mouth/throat troche 10 mg</i>		
<i>nystatin mouth/throat suspension 100000 unit/ml</i>		
<b>*Antiseptics - Mouth/Throat***</b>		
<i>chlorhexidine gluconate mouth/throat solution 0.12 %</i>	Periogard	
<i>gnp sore throat spray mouth/throat liquid 1.4 %</i>	Chloraseptic	OTC
<b>PERIOGARD MOUTH/THROAT SOLUTION 0.12 %</b>	chlorhexidine gluconate	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Fluoride Dental Products***</b>		
<b>DENTA 5000 PLUS DENTAL CREAM 1.1 %</b>	sf 5000 plus	
<b>DENTAGEL DENTAL GEL 1.1 %</b>	sf	
<i>sf 5000 plus dental cream 1.1 %</i>	Denta 5000 Plus	
<i>sf dental gel 1.1 %</i>	DentaGel	
<i>sodium fluoride 5000 plus dental cream 1.1 %</i>	Denta 5000 Plus	
<i>sodium fluoride dental gel 1.1 %</i>	DentaGel	
<b>*Saliva Stimulants***</b>		
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	Salagen	
<b>*Steroids - Mouth/Throat/Dental***</b>		
<b>ORALONE MOUTH/THROAT PASTE 0.1 %</b>	triamcinolone acetonide	
<i>triamcinolone acetonide mouth/throat paste 0.1 %</i>	Oralone	
<b>*MULTIVITAMINS*</b>		
<b>*Multiple Vitamins W/ Iron***</b>		
<i>multi-vitamin/iron oral tablet</i>	Tab-A-Vite/Iron/Beta Carotene	OTC
<b>*Multiple Vitamins W/ Minerals***</b>		
<i>b-plex plus oral tablet</i>	Lysiplex Plus	
<i>cvs daily gummies oral tablet chewable</i>	Adek Gummies Plus Zn	OTC
<b>LYSIPLEX PLUS ORAL TABLET</b>	b-plex plus	
<i>multi-vitamin/minerals oral tablet</i>	Lysiplex Plus	OTC
<b>NICAZEL FORTE ORAL TABLET</b>	b-plex plus	
<b>NICAZEL ORAL TABLET</b>	b-plex plus	
<i>v-c forte oral capsule</i>	ActivNutrients	
<b>*Multivitamins***</b>		
<i>daily-vite oral tablet</i>	Amladex	OTC
<b>*Ped Multi Vitamins W/Fl &amp; Fe***</b>		
<i>multi-vit/iron/fluoride oral solution 0.25-10 mg/ml</i>		OTC
<i>multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml</i>		
<b>*Ped Multiple Vitamins W/ Minerals***</b>		
<i>cvs gummy dinos oral tablet chewable</i>	ActivNutrients	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Ped Mv W/ Fluoride***</b>		
<i>multi-vitamin/fluoride oral solution 0.25 mg/ml</i>	Floriva Plus	AL (Max 6 Months)
<i>multivitamin/fluoride oral solution 0.5 mg/ml</i>	Quflora Pediatric	OTC
<i>multivitamin/fluoride oral tablet chewable 0.25 mg</i>	Multi-Vit-Flor	
<i>multivitamin/fluoride oral tablet chewable 0.5 mg, 1 mg</i>	FloraFol Pediatric	
<i>multi-vitamin/fluoride solution 0.5 mg/ml oral</i>	Quflora Pediatric	
<b>POLY-VI-FLOR ORAL SUSPENSION 0.25 MG/ML</b>		
<b>QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML</b>	multi-vitamin/fluoride	
<b>*Ped Mv W/ Iron***</b>		
<b>CEROVITE JR ORAL TABLET CHEWABLE 18 MG</b>	childrens animal shapes	OTC
<i>multivitamin infant &amp; toddler oral solution 11 mg/ml</i>	Poly-Vi-Sol/Iron	OTC
<b>*Ped Vitamins Acd W/ Fluoride***</b>		
<i>adc/f (0.5mg/ml) oral solution</i>		
<i>tri-vite/fluoride oral solution 0.25 mg/ml</i>	SoluVita ACD with Fluoride	
<i>tri-vite/fluoride oral solution 0.5 mg/ml</i>		
<i>vitamins acd-fluoride oral solution 0.25 mg/ml</i>	SoluVita ACD with Fluoride	
<b>*Pediatric Multiple Vitamins***</b>		
<i>gnp childrens chewables/ex c oral tablet chewable</i>	Culturelle Kids Complete	OTC
<b>POLY-VI-SOL ORAL SOLUTION</b>	multivitamin infant & toddler	OTC
<b>*Pediatric Vitamins A &amp; D W/ C***</b>		
<b>TRI-VI-SOL A/C/D ORAL SOLUTION 250-50-10</b>	vitamin a-c-d infant	OTC
<b>*Prenatal Mv &amp; Min W/Fe-Fa***</b>		
<i>classic prenatal oral tablet 28-0.8 mg</i>		OTC; QLL (100 EA per 90 days)
<b>CO-NATAL FA ORAL TABLET</b>	neonatal complete	QLL (100 Tablets per 90 days)
<b>CONCEPT DHA ORAL CAPSULE 53.5-38-1 MG</b>	wescap-c dha	QLL (100 Tablets per 90 days)
<i>multi prenatal oral tablet 27-0.8 mg</i>	NeoNatal Vitamin	OTC; QLL (100 EA per 90 days)
<b>PRENATABS RX ORAL TABLET 29-1 MG</b>	thrivite rx	OTC; QLL (100 Tablets per 90 days)
<i>prenatal oral tablet 27-1 mg</i>	NeoNatal Plus	QLL (100 Tablets per 90 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>prenatal plus oral tablet 27-1 mg</i>	NeoNatal Plus	QLL (100 Tablets per 90 days)
<b>PRENATAL-U ORAL CAPSULE 106.5-1 MG</b>		QLL (100 Tablets per 90 days)
<i>se-natal 19 oral tablet 29-1 mg</i>		QLL (100 Tablets per 90 days)
<i>trinatal rx 1 oral tablet 60-1 mg</i>	Vinate One	QLL (100 Tablets per 90 days)
<b>TRINATE ORAL TABLET</b>		QLL (100 Tablets per 90 days)
<b>VINATE II ORAL TABLET 29-1 MG</b>		QLL (100 Tablets per 90 days)
<b>VINATE ONE ORAL TABLET 60-1 MG</b>	trinatal rx 1	QLL (100 Tablets per 90 days)
<b>*MUSCULOSKELETAL THERAPY AGENTS*</b>		
<b>*Central Muscle Relaxants***</b>		
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>		QLL (4 EA per 1 day)
<i>carisoprodol oral tablet 350 mg</i>	Soma	QLL (120 Tablets per 30 days)
<i>chlorzoxazone oral tablet 500 mg</i>		QLL (6 EA per 1 day)
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>		QLL (3 EA per 1 day)
<i>methocarbamol oral tablet 500 mg, 750 mg</i>		QLL (4 EA per 1 day)
<i>orphenadrine citrate er oral tablet extended release 12 hour 100 mg</i>		QLL (2 EA per 1 day)
<i>tizanidine hcl oral tablet 2 mg</i>		
<i>tizanidine hcl oral tablet 4 mg</i>	Zanaflex	
<b>*Direct Muscle Relaxants***</b>		
<i>dantrolene sodium oral capsule 100 mg, 50 mg</i>		QLL (4 EA per 1 day)
<i>dantrolene sodium oral capsule 25 mg</i>	Dantrium	QLL (4 EA per 1 day)
<b>*Viscosupplements***</b>		
<b>GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML</b>		PA
<b>VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML</b>		PA
<b>*NASAL AGENTS - SYSTEMIC AND TOPICAL*</b>		
<b>*Nasal Agents - Misc.***</b>		
<i>deep sea nasal spray nasal solution 0.65 %</i>	Afrin Saline Nasal Mist	OTC
<b>*Nasal Anticholinergics***</b>		
<i>ipratropium bromide nasal solution 0.03 %, 0.06 %</i>		
<b>*Nasal Antihistamines***</b>		
<i>azelastine hcl nasal solution 0.1 %</i>		QLL (2 Bottles per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Nasal Mast Cell Stabilizers***</b>		
<i>cromolyn sodium nasal aerosol solution 5.2 mg/act</i>	NasalCrom	OTC; QLL (52 ML per 30 days)
<b>*Nasal Steroids***</b>		
<i>allergy relief nasal suspension 50 mcg/act</i>	ClariSpray	OTC
<b>NASACORT ALLERGY 24HR NASAL AEROSOL 55 MCG/ACT</b>	allergy spray 24 hour	OTC; QLL (2 Bottles per 30 days)
<b>*Systemic Decongestants***</b>		
<i>gnp nasal decongestant pe oral tablet 10 mg</i>	Sudafed PE Maximum Strength	OTC
<i>kp pseudoephedrine hcl oral tablet 60 mg</i>	SudoGest	OTC
<i>nasal decongestant oral tablet 30 mg</i>	Sudafed	OTC
<i>pseudoephedrine hcl er oral tablet extended release 12 hour 120 mg</i>	Sudafed Sinus Congestion 12HR	OTC
<b>*Topical Decongestants***</b>		
<i>cvs nasal spray nasal solution 0.05 %</i>	Afrin 12 Hour	OTC; QLL (1 ML per 1 day)
<b>*NEUROMUSCULAR AGENTS*</b>		
<b>*Benzathiazoles***</b>		
<i>riluzole oral tablet 50 mg</i>		PA; Smart Edit Conditions Apply
<b>*NUTRIENTS*</b>		
<b>*Misc. Nutritional Substances***</b>		
<i>cvs fish oil oral capsule delayed release 1200 mg</i>		OTC
<i>fish oil maximum strength oral capsule 1200 mg</i>	Theragran-M Fish Oil Conc	OTC
<i>fish oil oral capsule 1000 mg</i>	Maximum EPA	
<b>FISH OIL PEARLS ORAL CAPSULE 300 MG</b>	fish oil	OTC
<i>fish oil triple strength oral capsule 1400 mg</i>		OTC
<b>*OPHTHALMIC AGENTS*</b>		
<b>*Artificial Tear And Lubricant Combinations***</b>		
<i>artificial tears ophthalmic solution 0.1-0.3 %</i>	GenTeal Tears	OTC
<i>artificial tears ophthalmic solution 1-0.3 %</i>	Moisture Eyes	OTC
<i>artificial tears ophthalmic solution 5-6 mg/ml</i>	Clear Eyes Natural Tears	OTC
<b>BION TEARS PF OPHTHALMIC SOLUTION 0.1-0.3 %</b>	artificial tears pf	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>dry eye relief drops ophthalmic solution 0.2-0.2-1 %</i>		OTC
<b>GENTEAL TEARS NIGHT-TIME OPHTHALMIC OINTMENT</b>	cvs dry-eye relief nighttime	OTC
<i>lubricant eye drops ophthalmic solution 0.4-0.3 %</i>	Systane	OTC
<b>REFRESH DIGITAL OPHTHALMIC SOLUTION 0.5-1-0.5 %</b>		OTC
<b>REFRESH OPTIVE ADVANCED OPHTHALMIC SOLUTION 0.5-1-0.5 %</b>		OTC
<b>REFRESH OPTIVE OPHTHALMIC GEL 1-0.9 %</b>		OTC
<b>REFRESH OPTIVE OPHTHALMIC SOLUTION 0.5-0.9 %</b>	lubricant drops/dual-action	OTC
<b>REFRESH RELIEVA OPHTHALMIC SOLUTION 0.5-0.9 %</b>	lubricant drops/dual-action	OTC
<b>REFRESH RELIEVA PF OPHTHALMIC SOLUTION 0.5-1 %</b>		OTC
<b>SYSTANE OPHTHALMIC GEL 0.4-0.3 %</b>		OTC
<b>*Artificial Tears And Lubricants***</b>		
<i>cvs lubricant drops ophthalmic gel 1 %</i>	Refresh Liquigel	OTC
<i>cvs lubricant eye drops ophthalmic solution 0.5 %</i>	Refresh Tears	OTC
<i>lubricant eye drops ophthalmic solution 0.6 %</i>	Systane Balance	OTC
<i>polyvinyl alcohol ophthalmic solution 1.4 %</i>		OTC
<b>PURE &amp; GENTLE LUBRICANT OPHTHALMIC SOLUTION 3 MG/ML</b>		OTC
<b>*Beta-Blockers - Ophthalmic Combinations***</b>		
<i>dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %</i>	Cosopt	ST; QLL (10 ML per 30 days)
<b>*Beta-Blockers - Ophthalmic***</b>		
<i>betaxolol hcl ophthalmic solution 0.5 %</i>		QLL (10 ML per 30 days)
<i>carteolol hcl ophthalmic solution 1 %</i>		QLL (10 ML per 30 days)
<i>levobunolol hcl ophthalmic solution 0.5 %</i>		QLL (10 ML per 30 days)
<i>timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %</i>		ST; QLL (5 ML per 30 days)
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>		QLL (10 ML per 30 days)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Cycloplegic Mydriatics***</b>		
<b>ALTAFRIN OPHTHALMIC SOLUTION 10 %</b>	phenylephrine hcl	
<b>ALTAFRIN OPHTHALMIC SOLUTION 2.5 %</b>	phenylephrine hcl	QLL (2 ML per 30 days)
<i>atropine sulfate ophthalmic ointment 1 %</i>		QLL (3.5 GM per 30 days)
<i>atropine sulfate ophthalmic solution 1 %</i>		QLL (5 ML per 30 days)
<i>cyclopentolate hcl ophthalmic solution 1 %</i>	Cyclogyl	
<i>phenylephrine hcl ophthalmic solution 10 %</i>	Altafrin	
<i>phenylephrine hcl ophthalmic solution 2.5 %</i>	Altafrin	QLL (2 ML per 30 days)
<i>tropicamide ophthalmic solution 0.5 %</i>		
<i>tropicamide ophthalmic solution 1 %</i>	Mydriacyl	
<b>*Miotics - Direct Acting***</b>		
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>		
<b>*Ophthalmic Antiallergic***</b>		
<i>azelastine hcl ophthalmic solution 0.05 %</i>		QLL (6 ML per 30 days)
<i>cromolyn sodium ophthalmic solution 4 %</i>		
<i>cvs allergy eye drops ophthalmic solution 0.035 %</i>	Alaway	OTC
<i>eye allergy itch/redness rel ophthalmic solution 0.1 %</i>	Pataday	OTC; QLL (5 ML per 25 days)
<i>olopatadine hcl ophthalmic solution 0.2 %</i>	Pataday	
<b>PATADAY OPHTHALMIC SOLUTION 0.7 %</b>		OTC
<b>*Ophthalmic Antibiotics***</b>		
<i>bacitracin ointment 500 unit/gm ophthalmic</i>		QLL (3.5 GM per 30 days)
<i>bacitracin ophthalmic ointment 500 unit/gm</i>		
<i>ciprofloxacin hcl ophthalmic solution 0.3 %</i>		
<i>erythromycin ophthalmic ointment 5 mg/gm</i>		QLL (3.5 GM per 30 days)
<i>gentamicin sulfate ophthalmic solution 0.3 %</i>		
<i>ofloxacin ophthalmic solution 0.3 %</i>	Ocuflox	
<i>tobramycin ophthalmic solution 0.3 %</i>		
<b>*Ophthalmic Antifungal***</b>		
<b>NATACYN OPHTHALMIC SUSPENSION 5 %</b>		QLL (15 ML per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Ophthalmic Anti-Infective Combinations***</b>		
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	Polycin	QLL (3.5 GM per 30 days)
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	Neo-Polycin	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>		
<b>POLYCIN OPHTHALMIC OINTMENT 500-10000 UNIT/GM</b>	bacitracin-polymyxin b	QLL (3.5 GM per 30 days)
<i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i>		
<b>*Ophthalmic Antivirals***</b>		
<i>trifluridine ophthalmic solution 1 %</i>		QLL (7.5 ML per 30 days)
<b>*Ophthalmic Carbonic Anhydrase Inhibitors***</b>		
<i>dorzolamide hcl ophthalmic solution 2 %</i>		
<b>*Ophthalmic Decongestant Combinations***</b>		
<b>NAPHCAN-A OPHTHALMIC SOLUTION 0.025-0.3 %</b>	allergy eye	OTC
<b>*Ophthalmic Decongestants***</b>		
<i>eye drops ophthalmic solution 0.05 %</i>	Visine Red Eye Comfort	OTC
<b>*Ophthalmic Hyperosmolar Products***</b>		
<i>sodium chloride (hypertonic) ophthalmic ointment 5 %</i>	Altachlore	OTC
<i>sodium chloride (hypertonic) ophthalmic solution 5 %</i>	Altachlore	OTC
<b>*Ophthalmic Immunomodulators***</b>		
<i>cyclosporine ophthalmic emulsion 0.05 %</i>	Restasis	PA; QLL (2 EA per 1 day)
<b>*Ophthalmic Nonsteroidal Anti-Inflammatory Agents***</b>		
<i>diclofenac sodium ophthalmic solution 0.1 %</i>		
<i>flurbiprofen sodium ophthalmic solution 0.03 %</i>		
<i>ketorolac tromethamine ophthalmic solution 0.5 %</i>	Acular	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Ophthalmic Selective Alpha Adrenergic Agonists***</b>		
<i>brimonidine tartrate ophthalmic solution 0.2 %</i>		QLL (10 ML per 30 days)
<b>*Ophthalmic Steroid Combinations***</b>		
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %</i>	Neo-Polycin HC	QLL (3.5 GM per 30 days)
<i>neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1</i>	Maxitrol	QLL (3.5 GM per 30 days)
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Maxitrol	
<b>NEO-POLYCYN HC OPHTHALMIC OINTMENT 1 %</b>	bacitra-neomycin-polymyxin-hc	QLL (3.5 GM per 30 days)
<i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>		
<b>*Ophthalmic Steroids***</b>		
<i>dexamethasone sodium phosphate ophthalmic solution 0.1 %</i>		
<i>fluorometholone ophthalmic suspension 0.1 %</i>	FML Liquifilm	
<i>prednisolone acetate ophthalmic suspension 1 %</i>	Pred Forte	
<i>prednisolone sodium phosphate ophthalmic solution 1 %</i>		
<b>*Ophthalmic Sulfonamides***</b>		
<i>sulfacetamide sodium ophthalmic solution 10 %</i>		
<b>*Prostaglandins - Ophthalmic***</b>		
<i>bimatoprost ophthalmic solution 0.03 %</i>		ST; QLL (2.5 ML per 30 days)
<i>latanoprost ophthalmic solution 0.005 %</i>	Xalatan	
<b>*OTIC AGENTS*</b>		
<b>*Otic Agents - Miscellaneous***</b>		
<i>acetic acid otic solution 2 %</i>		
<i>ear drops earwax aid otic solution 6.5 %</i>	Clearcanal Earwax Softener	OTC; QLL (15 ML per 30 days)
<b>*Otic Anti-Infectives***</b>		
<i>ciprofloxacin hcl otic solution 0.2 %</i>	Cetraxal	QLL (28 mL per 30 days)
<i>ofloxacin otic solution 0.3 %</i>		QLL (15 ML per 30 days)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Otic Steroid-Anti-Infective Combinations***</b>		
<i>ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %</i>		QLL (7.5 ML per 30 days)
<i>neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1</i>		QLL (15 ML per 30 days)
<i>neomycin-polymyxin-hc otic suspension 3.5-10000-1</i>		QLL (15 ML per 30 days)
<b>*Otic Steroids***</b>		
<b>FLAC OTIC OIL 0.01 %</b>	fluocinolone acetonide	QLL (20 ML per 30 days)
<i>fluocinolone acetonide otic oil 0.01 %</i>	Flac	QLL (20 ML per 30 days)
<i>hydrocortisone-acetic acid otic solution 1-2 %</i>		QLL (10 ML per 30 days)
<b>*PASSIVE IMMUNIZING AND TREATMENT AGENTS*</b>		
<b>*Antiviral Monoclonal Antibodies***</b>		
<b>SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML</b>		PA
<b>*Immune Serums***</b>		
<b>GAMMAGARD INJECTION SOLUTION 10 GM/100ML, 30 GM/300ML</b>		PA
<b>GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 2.5 GM/25ML, 40 GM/400ML</b>		PA
<b>HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML</b>		PA
<b>HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 2 GM/10ML, 4 GM/20ML</b>		PA
<b>PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML</b>		PA
<b>*PENICILLINS*</b>		
<b>*Aminopenicillins***</b>		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>		
<i>amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</i>		
<i>amoxicillin oral tablet 500 mg, 875 mg</i>		
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>		
<i>ampicillin oral capsule 500 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Natural Penicillins***</b>		
<b>BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 2400000 UNIT/4ML</b>		
<i>penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml</i>		
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>		
<b>*Penicillin Combinations***</b>		
<i>amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml</i>		
<i>amoxicillin-pot clavulanate oral suspension reconstituted 600-42.9 mg/5ml</i>	Augmentin ES-600	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 875-125 mg</i>		
<i>amoxicillin-pot clavulanate oral tablet 500-125 mg</i>	Augmentin	
<i>amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg</i>		
<b>*Penicillinase-Resistant Penicillins***</b>		
<i>dicloxacillin sodium oral capsule 250 mg, 500 mg</i>		
<b>*PHARMACEUTICAL ADJUVANTS*</b>		
<b>*Flavoring Agents***</b>		
<i>apple flavor liquid</i>	Flavorx	
<i>apricot flavor liquid</i>	Flavorx	
<i>banana concentrate liquid</i>	Flavorx	
<i>banana creme flavor liquid</i>	Flavorx	
<i>banana flavor liquid</i>	Flavorx	
<i>blueberry flavor liquid</i>	Flavorx	
<i>bubble gum concentrate liquid</i>	Flavorx	
<i>bubble gum flavor liquid</i>	Flavorx	
<i>bubble gum os liquid</i>	Flavorx	OTC
<i>cherry flavor liquid</i>	Flavorx	
<b>*Gelatin Capsules (Empty)***</b>		
<i>capsule coni-snap #0 blu/white capsule</i>	DRcaps Size 00	

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Oral Vehicles***</b>		
<i>cherry oral syrup</i>		
<b>FLAVOR BLEND ORAL SUSPENSION</b>	suspension vehicle	
<i>flavor plus oral liquid</i>	Ora-Plus	
<i>flavor sweet oral syrup</i>	PCCA Sweet-SF	
<b>GOOD START STERILE WATER ORAL LIQUID</b>		OTC
<i>oral suspend oral liquid</i>	Ora-Plus	OTC
<b>PCCA SWEET-SF ORAL SYRUP</b>	flavor sweet	
<b>PCCA SYRUP VEHICLE ORAL SYRUP</b>	flavor sweet	
<b>PCCA-PLUS ORAL SUSPENSION</b>	suspension vehicle	
<i>raspberry syrup oral syrup</i>		
<i>simple syrup oral syrup</i>	Syrpalta	
<i>sorbitol solution 70 %</i>		
<b>SYRSPEND SF ALKA ORAL SUSPENSION RECONSTITUTED</b>		OTC
<b>VERSAFREE ORAL SYRUP</b>	flavor sweet	
<b>VERSAPLUS ORAL SYRUP</b>	flavor sweet	
<b>*Parenteral Vehicles***</b>		
<i>sterile water for injection injection solution</i>		
<b>*Pharmaceutical Excipients***</b>		
<i>lactose monohydrate powder</i>		
<b>PCCA SORBITOL LOLLIPOP BASE FLAKES</b>		
<i>xanthan gum powder</i>		
<b>*PROGESTINS*</b>		
<b>*Progestins***</b>		
<i>medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg</i>	Provera	
<i>norethindrone acetate oral tablet 5 mg</i>		ST
<i>progesterone oral capsule 100 mg, 200 mg</i>	Prometrium	QLL (2 EA per 1 day)
<b>*PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.*</b>		
<b>*Alcohol Deterrents***</b>		
<i>disulfiram oral tablet 250 mg, 500 mg</i>		QLL (1 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Benzodiazepines &amp; Tricyclic Agents***</b>		
<i>chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg</i>		
<b>*Cholinomimetics - Ache Inhibitors***</b>		
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	Aricept	QLL (30 Tablets per 30 days)
<i>donepezil hcl oral tablet dispersible 10 mg, 5 mg</i>		QLL (30 Tablets per 30 days)
<i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg</i>		QLL (30 Capsules per 30 days)
<i>galantamine hydrobromide oral solution 4 mg/ml</i>		QLL (6 ML per 1 day)
<i>galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg</i>		QLL (60 Tablets per 30 days)
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>		QLL (60 Capsules per 30 days)
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr</i>	Exelon	PA
<b>*Fibromyalgia Agent - Snris***</b>		
<b>SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG</b>		ST; Smart Edit Conditions Apply; QLL (60 EA per 30 days)
<b>SAVELLA TITRATION PACK ORAL 12.5 &amp; 25 &amp; 50 MG</b>		ST; Smart Edit Conditions Apply; QLL (1 EA per 90 days)
<b>*Movement Disorder Drug Therapy***</b>		
<b>AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG</b>		PA
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 12 MG ORAL</b>		PA; QLL (1 EA per 1 day)
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 24 MG ORAL</b>		PA; QLL (2 EA per 1 day)
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 30 MG ORAL</b>		PA; QLL (1 EA per 1 day)
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 36 MG ORAL</b>		PA; QLL (1 EA per 1 day)
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 42 MG ORAL</b>		PA; QLL (1 EA per 1 day)
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 48 MG ORAL</b>		PA; QLL (1 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 6 MG ORAL</b>		PA; QLL (1 EA per 1 day)
<i>tetrabenazine oral tablet 12.5 mg</i>	Xenazine	PA; QLL (4 EA per 1 day)
<i>tetrabenazine oral tablet 25 mg</i>	Xenazine	PA; QLL (2 EA per 1 day)
<b>*Ms Agents - Pyrimidine Synthesis Inhibitors***</b>		
<i>teriflunomide oral tablet 14 mg, 7 mg</i>	Aubagio	PA; QLL (30 EA per 30 days)
<b>*Multiple Sclerosis Agents - Interferons***</b>		
<b>AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML</b>		PA; Smart Edit Conditions Apply; QLL (1 kit per 28 days)
<b>AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML</b>		PA; Smart Edit Conditions Apply; QLL (1 kit per 28 days)
<b>EXTAVIA SUBCUTANEOUS KIT 0.3 MG</b>		PA
<b>REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML</b>		PA; Smart Edit Conditions Apply; QLL (6 ML per 28 days)
<b>REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 &amp; 6X22 MCG</b>		PA; Smart Edit Conditions Apply; QLL (4.2 ML per 28 days)
<b>REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML</b>		PA; Smart Edit Conditions Apply; QLL (6 ML per 28 days)
<b>REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 &amp; 6X22 MCG</b>		PA; Smart Edit Conditions Apply; QLL (4.2 ML per 28 days)
<b>*Multiple Sclerosis Agents - Monoclonal Antibodies***</b>		
<b>OCREVUS INTRAVENOUS SOLUTION 300 MG/10ML</b>		PA; QLL (0.12 ML per 1 day)
<b>*Multiple Sclerosis Agents - Nrf2 Pathway Activators***</b>		
<i>dimethyl fumarate oral capsule delayed release 120 mg, 240 mg</i>	Tecfidera	PA; QLL (60 EA per 30 days)
<i>dimethyl fumarate starter pack oral capsule delayed release therapy pack 120 &amp; 240 mg</i>	Tecfidera	PA; QLL (1 STARTER PACK per 90 days)
<b>*Multiple Sclerosis Agents***</b>		
<i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml</i>	Copaxone	PA; QLL (1 ML per 1 day)



<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml</i>	Copaxone	PA; Smart Edit Conditions Apply; QLL (12 ML per 28 days)
<b>*N-Methyl-D-Aspartate (Nmda) Receptor Antagonists***</b>		
<i>memantine hcl oral tablet 10 mg, 5 mg</i>		QLL (2 EA per 1 day)
<b>*Phenothiazines &amp; Tricyclic Agents***</b>		
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>		
<b>*Smoking Deterrents***</b>		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg</i>		AL (Min 18 Years)
<i>cvs nicotine polacrilex mouth/throat lozenge 2 mg</i>	KLS Quit2	OTC
<i>cvs nicotine polacrilex mouth/throat lozenge 4 mg</i>	KLS Quit4	OTC
<i>cvs nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>	Nicoderm CQ	OTC
<i>eq nicotine transdermal patch 24 hour 21 mg/24hr</i>	Habitrol	OTC
<i>nicotine polacrilex mouth/throat gum 2 mg</i>	KLS Quit2	OTC
<i>nicotine polacrilex mouth/throat gum 4 mg</i>	KLS Quit4	OTC
<i>nicotine transdermal kit 21-14-7 mg/24hr</i>		OTC
<i>varenicline tartrate oral tablet 0.5 mg</i>		QLL (2 EA per 1 day)
<i>varenicline tartrate oral tablet 1 mg</i>	Chantix	QLL (2 EA per 1 day)
<b>*Sphingosine 1-Phosphate (S1p) Receptor Modulators***</b>		
<i> fingolimod hcl oral capsule 0.5 mg</i>	Gilenya	PA; QLL (1 EA per 1 day)
<b>GILENYA ORAL CAPSULE 0.25 MG</b>		PA; QLL (1 EA per 1 day)
<b>*RESPIRATORY AGENTS - MISC.*</b>		
<b>*Cftr Potentiators***</b>		
<b>KALYDECO ORAL PACKET 13.4 MG</b>		PA
<b>KALYDECO ORAL PACKET 25 MG, 50 MG, 75 MG</b>		PA
<b>KALYDECO ORAL TABLET 150 MG</b>		PA
<b>*Cystic Fibrosis Agent - Combinations***</b>		
<b>ORKAMBI ORAL PACKET 100-125 MG</b>		PA

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>ORKAMBI ORAL PACKET 75-94 MG</b>		PA
<b>ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG</b>		PA
<b>SYMDEKO ORAL TABLET THERAPY PACK 100-150 &amp; 150 MG, 50-75 &amp; 75 MG</b>		PA
<b>TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 &amp; 150 MG, 50-25-37.5 &amp; 75 MG</b>		PA
<b>TRIKAFTA ORAL THERAPY PACK 100-50-75 &amp; 75 MG, 80-40-60 &amp; 59.5 MG</b>		PA
<b>*Pulmonary Fibrosis Agents***</b>		
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	Esbriet	PA
<b>*SULFONAMIDES*</b>		
<b>*Sulfonamides***</b>		
<i>sulfadiazine oral tablet 500 mg</i>		
<b>*TETRACYCLINES*</b>		
<b>*Tetracyclines***</b>		
<i>doxycycline hyclate oral capsule 100 mg</i>	Vibramycin	
<i>doxycycline hyclate oral capsule 50 mg</i>		
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>		
<i>doxycycline hyclate oral tablet 75 mg</i>		
<i>doxycycline monohydrate oral capsule 100 mg</i>	Mondoxyne NL	
<i>doxycycline monohydrate oral capsule 50 mg</i>		
<i>doxycycline monohydrate oral suspension reconstituted 25 mg/5ml</i>		AL (Max 12 Years)
<i>doxycycline monohydrate oral tablet 100 mg</i>		
<i>doxycycline monohydrate oral tablet 50 mg, 75 mg</i>		
<i>minocycline hcl oral capsule 100 mg, 50 mg, 75 mg</i>		
<b>*THYROID AGENTS*</b>		
<b>*Antithyroid Agents***</b>		
<i>methimazole oral tablet 10 mg, 5 mg</i>		
<i>propylthiouracil oral tablet 50 mg</i>		
<b>*Thyroid Hormones***</b>		
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	Levoxyl	QLL (1 EA per 1 day)
<i>levothyroxine sodium oral tablet 300 mcg</i>	Unithroid	QLL (1 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG</b>	levothyroxine sodium	QLL (1 EA per 1 day)
<i>liothyronine sodium oral tablet 25 mcg, 50 mcg</i>	Cytomel	QLL (2 EA per 1 day)
<i>liothyronine sodium oral tablet 5 mcg</i>	Cytomel	QLL (4 EA per 1 day)
<b>NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 90 MG</b>	niva thyroid	QLL (1 EA per 1 day)
<b>NP THYROID ORAL TABLET 60 MG</b>	niva thyroid	
<b>UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG</b>	levothyroxine sodium	QLL (1 EA per 1 day)
<b>*ULCER DRUGS/ANTISPASMODICS/ANTI CHOLINERGICS*</b>		
<b>*Antispasmodics***</b>		
<i>dicyclomine hcl oral capsule 10 mg</i>		
<i>dicyclomine hcl oral solution 10 mg/5ml</i>		AL (Max 12 Years)
<i>dicyclomine hcl oral tablet 20 mg</i>		
<b>*Belladonna Alkaloids***</b>		
<i>hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg</i>	Levbid	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5ml</i>		
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	Levsin	
<i>hyoscyamine sulfate oral tablet dispersible 0.125 mg</i>	NuLev	
<i>hyoscyamine sulfate sublingual tablet sublingual 0.125 mg</i>	Levsin/SL	
<i>hyosyne oral elixir 0.125 mg/5ml</i>		
<b>NULEV ORAL TABLET DISPERSIBLE 0.125 MG</b>	hyoscyamine sulfate	
<i>oscimin oral tablet 0.125 mg</i>	Levsin	
<i>oscimin sublingual tablet sublingual 0.125 mg</i>	Levsin/SL	
<b>*H-2 Antagonists***</b>		
<i>acid reducer maximum strength oral tablet 20 mg</i>	MM Acid-Pep Maximum Strength	OTC
<i>cimetidine 200 oral tablet 200 mg</i>	Tagamet HB	OTC
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>		QLL (2 EA per 1 day)

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>famotidine oral suspension reconstituted 40 mg/5ml</i>		AL (Max 12 Years)
<i>famotidine oral tablet 10 mg</i>	Pepcid AC	OTC; QLL (2 EA per 1 day)
<i>famotidine oral tablet 20 mg</i>	MM Acid-Pep Maximum Strength	
<i>famotidine oral tablet 40 mg</i>	Pepcid	QLL (2 EA per 1 day)
<i>nizatidine oral capsule 150 mg</i>		QLL (2 EA per 1 day)
<i>nizatidine oral capsule 300 mg</i>		QLL (1 EA per 1 day)
<b>*Misc. Anti-Ulcer***</b>		
<i>sucralfate oral tablet 1 gm</i>	Carafate	
<b>*Proton Pump Inhibitors***</b>		
<i>esomeprazole magnesium capsule delayed release 20 mg oral (otc)</i>	GoodSense Esomeprazole	
<i>esomeprazole magnesium capsule delayed release 40 mg oral</i>	NexIUM	QLL (2 EA per 1 day)
<i>esomeprazole magnesium oral tablet delayed release 20 mg</i>	NexIUM 24HR	OTC
<b>FIRST-LANSOPRAZOLE ORAL SUSPENSION 3 MG/ML</b>		Smart Edit Conditions Apply; AL (Max 12 Years)
<i>gnp esomeprazole magnesium oral capsule delayed release 20 mg</i>	GoodSense Esomeprazole	OTC
<b>GOODSENSE ESOMEPRAZOLE ORAL CAPSULE DELAYED RELEASE 20 MG</b>	esomeprazole magnesium	OTC
<i>hm esomeprazole magnesium dr oral capsule delayed release 20 mg</i>	GoodSense Esomeprazole	OTC
<i>lansoprazole oral capsule delayed release 15 mg</i>	Prevacid 24HR	Smart Edit Conditions Apply; QLL (60 EA per 30 days)
<i>lansoprazole oral capsule delayed release 30 mg</i>	Prevacid	Smart Edit Conditions Apply; QLL (2 EA per 1 day)
<i>omeprazole capsule delayed release 10 mg oral</i>		QLL (2 EA per 1 day)
<i>omeprazole magnesium oral capsule delayed release 20.6 (20 base) mg</i>		Smart Edit Conditions Apply; OTC; QLL (120 EA per 30 days)
<i>omeprazole magnesium oral tablet delayed release 20 mg</i>	PriLOSEC OTC	Smart Edit Conditions Apply; OTC; QLL (2 EA per 1 day)
<i>omeprazole oral capsule delayed release 20 mg</i>		Smart Edit Conditions Apply; QLL (60 EA per 30 days)
<i>omeprazole oral capsule delayed release 40 mg</i>		Smart Edit Conditions Apply; QLL (2 EA per 1 day)
<i>omeprazole oral tablet delayed release 20 mg</i>		Smart Edit Conditions Apply; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<i>omeprazole oral tablet delayed release dispersible 20 mg</i>		Smart Edit Conditions Apply; OTC; QLL (2 EA per 1 day)
<b>OMEPRAZOLE+SYRSPEND SF ALKA ORAL SUSPENSION 2 MG/ML</b>		Smart Edit Conditions Apply; AL (Max 12 Years)
<i>pantoprazole sodium oral tablet delayed release 20 mg, 40 mg</i>	Protonix	Smart Edit Conditions Apply; QLL (2 EA per 1 day)
<i>qc esomeprazole magnesium oral capsule delayed release 20 mg</i>	GoodSense Esomeprazole	OTC
<i>rabeprazole sodium oral tablet delayed release 20 mg</i>	Aciphex	QLL (2 EA per 1 day)
<i>sm esomeprazole magnesium oral capsule delayed release 20 mg</i>	GoodSense Esomeprazole	OTC
<b>*Quaternary Anticholinergics***</b>		
<i>glycopyrrolate oral tablet 1 mg</i>	Robinul	
<i>glycopyrrolate oral tablet 2 mg</i>	Robinul-Forte	
<b>*Ulcer Drugs - Prostaglandins***</b>		
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	Cytotec	
<b>*URINARY ANTISPASMODICS*</b>		
<b>*Urinary Antispasmodic - Antimuscarinic (Anticholinergic)***</b>		
<i>fesoterodine fumarate er oral tablet extended release 24 hour 4 mg, 8 mg</i>	Toviaz	ST; QLL (1 EA per 1 day)
<i>oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 5 mg</i>		QLL (1 EA per 1 day)
<i>oxybutynin chloride er oral tablet extended release 24 hour 15 mg</i>		QLL (2 EA per 1 day)
<i>oxybutynin chloride oral solution 5 mg/5ml</i>		
<i>oxybutynin chloride oral tablet 5 mg</i>		QLL (4 EA per 1 day)
<i>solifenacin succinate oral tablet 10 mg, 5 mg</i>	VESIcare	ST; QLL (1 EA per 1 day)
<i>tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg</i>	Detrol LA	QLL (1 EA per 1 day)
<i>tolterodine tartrate oral tablet 1 mg, 2 mg</i>	Detrol	QLL (2 EA per 1 day)
<i>tropium chloride er oral capsule extended release 24 hour 60 mg</i>		QLL (1 Tablets per 1 day)
<i>tropium chloride oral tablet 20 mg</i>		QLL (2 Tablets per 1 day)
<b>*Urinary Antispasmodics - Cholinergic Agonists***</b>		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*Urinary Antispasmodics - Direct Muscle Relaxants***</b>		
<i>flavoxate hcl oral tablet 100 mg</i>		QLL (8 EA per 1 day)
<b>*VAGINAL AND RELATED PRODUCTS*</b>		
<b>*Imidazole-Related Antifungals***</b>		
<i>clotrimazole 3 vaginal cream 2 %</i>		OTC
<i>clotrimazole vaginal cream 1 %</i>		OTC
<i>miconazole 1 vaginal kit 1200 &amp; 2 mg &amp; %</i>	Monistat 1 Combo Pack	OTC
<i>miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>	Monistat 3 Combo Pack App	OTC
<i>miconazole nitrate vaginal cream 2 %</i>	Monistat 7 Simply Cure	OTC
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>		
<b>*Spermicides***</b>		
<b>TODAY SPONGE VAGINAL 1000 MG</b>		OTC; QLL (24 EA per 30 days)
<b>*Vaginal Anti-Infectives***</b>		
<i>clindamycin phosphate vaginal cream 2 %</i>	Cleocin	
<i>metronidazole vaginal gel 0.75 %</i>	Vandazole	
<b>*Vaginal Contraceptive Ph Modulator - Combinations***</b>		
<b>PHEXXI VAGINAL GEL 1.8-1-0.4 %</b>		QLL (10 GM per 30 days)
<b>*Vaginal Estrogens***</b>		
<i>estradiol vaginal cream 0.1 mg/gm</i>	Estrace	QLL (42.5 GM per 30 days)
<b>YUVAFEM VAGINAL TABLET 10 MCG</b>	estradiol	Smart Edit Conditions Apply; QLL (8 EA per 28 days)
<b>*VASOPRESSORS*</b>		
<b>*Anaphylaxis Therapy Agents***</b>		
<i>epinephrine solution auto-injector 0.15 mg/0.15ml injection</i>	Auvi-Q	QLL (2 EA Max Qty Per Fill Retail)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml injection</i>	Auvi-Q	QLL (2 EA Max Qty Per Fill Retail)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml injection</i>	Auvi-Q	QLL (2 PENS Max Qty Per Fill Retail)
<b>*Vasopressors***</b>		
<i>midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>		

<b>Drug Name</b>	<b>Reference</b>	<b>Restrictions</b>
<b>*VITAMINS*</b>		
<b>*Vitamin B-3***</b>		
<i>niacin er oral capsule extended release 250 mg, 500 mg</i>		OTC
<i>niacin er oral tablet extended release 500 mg</i>	Endur-Acin	OTC
<i>niacin oral tablet 100 mg, 500 mg</i>		OTC
<b>*Vitamin B-6***</b>		
<i>vitamin b-6 oral tablet 100 mg, 50 mg</i>		OTC
<i>vitamin b-6 oral tablet 25 mg</i>		OTC
<b>*Vitamin C***</b>		
<i>ascorbic acid oral tablet 500 mg</i>	Easy-C Immune Health	OTC
<i>c-250 oral tablet chewable 250 mg</i>		OTC
<i>c-500 oral tablet chewable 500 mg</i>	Sunkist Vitamin C	OTC
<i>vitamin c oral tablet 1000 mg, 250 mg</i>		OTC
<b>*Vitamin D***</b>		
<i>ergocalciferol oral capsule 1.25 mg (50000 ut)</i>	Drisdol	
<i>vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit)</i>		OTC
<i>vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)</i>	Vitamin D-1000 Max St	OTC
<i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)</i>	Drisdol	
<i>vitamin d3 oral capsule 1.25 mg (50000 ut)</i>	D3-50	OTC
<i>vitamin d3 oral capsule 125 mcg (5000 ut)</i>	Dialyvite Vitamin D 5000	OTC
<i>vitamin d3 oral capsule 25 mcg (1000 ut)</i>	Pronutrients Vitamin D3	OTC
<i>vitamin d3 oral capsule 50 mcg (2000 ut)</i>		OTC
<i>vitamin d3 oral tablet 125 mcg (5000 ut)</i>	Radiance Platinum Vitamin D3	OTC
<i>vitamin d3 oral tablet 50 mcg (2000 ut)</i>	Thera-D 2000	OTC
<i>vitamin d3 oral tablet chewable 10 mcg (400 unit)</i>		OTC
<i>vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>	Kids First Vitamin D3 Gummies	OTC
<i>vitamin d3 oral tablet dispersible 125 mcg (5000 ut)</i>		OTC
<b>*Vitamin K***</b>		
<i>phytonadione oral tablet 5 mg</i>		