List of Covered Drugs (*Drug List* or Formulary) 2026

UHC Senior Care Options MA-Y001 (HMO D-SNP)
UHC Senior Care Options NHC MA-Y002 (HMO D-SNP)

PLEASE READ: This document contains information about the drugs covered by this plan. For more recent information or if you have questions, contact Member Services:

MyUHC.com/CommunityPlan

Toll-free **1-888-867-5511**, TTY **711**
8 a.m.-8 p.m.: 7 Days Oct-Mar; M-F Apr-Sept

United Healthcare®

Formulary ID Number 00026002, Version 13
H2226_071425_112530_C v1.01
UHCSCO_071425_112530_C v1.01

Last updated October 15, 2025

UHC Senior Care Options MA-Y001 (HMO D-SNP)
UHC Senior Care Options NHC MA-Y002 (HMO D-SNP)

2026 *List of Covered Drugs* (*Drug List* or Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which drugs and over-the-counter (OTC) drugs and non-drug products are covered by UHC Senior Care Options. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by UHC Senior Care Options. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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If you have questions, please call UHC Senior Care Options at **1-888-867-5511**, TTY **711**, 8 a.m.-8 p.m.: 7 Days Oct-Mar; M-F Apr-Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

This formulary was updated on October 15, 2025

A. Disclaimers

This is a list of drugs that members can get in UHC Senior Care Options.

- UnitedHealthcare Senior Care Options is a Coordinated Care plan with a Medicare contract and a contract with the Commonwealth of Massachusetts Medicaid program. Enrollment in the plan depends on the plan's contract renewal with Medicare.
- You can always check UHC Senior Care Options' up-to-date *List of Covered Drugs* online at **MyUHC.com/CommunityPlan** or by calling Member Services at the numbers listed at the bottom of this page. The call is free.
- You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at the numbers listed at the bottom of the page. The call is free.
- This document is available for free in other languages.
- Esta documento está disponible sin costo en español.
- You can call Member Services at the numbers listed at the bottom of this page, and ask us to make a note in our system that you would like materials in a different language and/or alternate format now and in the future. This is called a "standing order". You can also make changes to your standing order at any time by calling Enrollee Services. The call is free.
- UnitedHealthcare does not discriminate on the basis of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, mental or physical disability, gender, marital status, or disability in health programs and activities.

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *Drug List*. You can read all of the FAQ to learn more or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C1** are the drugs covered by UHC Senior Care Options. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

- UHC Senior Care Options will cover all medically necessary drugs on the *Drug List* if:
  - your doctor or other prescriber says you need them to get better or stay healthy,
  - UHC Senior Care Options agrees that the drug is medically necessary for you, **and**
  - you fill the prescription at a UHC Senior Care Options network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at **MyUHC.com/CommunityPlan** or call Member Services at the numbers listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and UHC Senior Care Options must follow Medicare and MassHealth rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from UHC Senior Care Options before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

This section is continued on the next page.

If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- we learn that a drug isn't safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check UHC Senior Care Options' up-to-date *Drug List* online at **MyUHC.com/CommunityPlan**. Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs**. We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will remain $0 with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
  - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
  - We can make these changes only if the drug we're adding:
    - is a new generic version of a brand name drug, **or**
    - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
    - Some of these drug types may be new to you. For more information, refer to **Section B14**.
  - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10 - B12 for more information on exceptions.

This section is continued on the next page.

- **Remove unsafe drugs and other drugs that are taken off the market.** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice after we make the change. Contact your doctor or other prescriber and ask about your other options.

We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, **or**
- we remove an original biological product when adding a biosimilar, **or**
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- if there's a similar drug on the *Drug List* you can take instead **or**
- whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10 - B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes. Some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from UHC Senior Care Options before you fill your prescription. Prior authorization is different from a referral. UHC Senior Care Options may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes UHC Senior Care Options limits the amount of a drug you can get.

This section is continued on the next page.

- **Step therapy:** Sometimes UHC Senior Care Options requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C**. You can also get more information by visiting our website at **MyUHC.com/CommunityPlan**. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10 - B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the List of Drugs by Medical Condition has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if UHC Senior Care Options changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

- You can search alphabetically, **or**
- You can search by medical condition.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it on page 150. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the

This section is continued on the next page.

Drug List. Brand name drugs and generic drugs as well as over-the-counter (OTC) drugs and non-drug products are listed in the index.

To search **by medical condition**, find **Section C** labeled "List of Drugs by Medical Condition". The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That's where you will find drugs that treat heart conditions.

B8. What if the drug I want to take isn't on the *Drug List*?

If you don't find your drug on the *Drug List*, call Member Services at the numbers listed at the bottom of this page and ask about it. If you learn that UHC Senior Care Options won't cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that's like the one you want to take. **or**
- Ask UHC Senior Care Options to make an exception to cover your drug. Refer to questions B10 - B12 for more information about exceptions.

B9. What if I'm a new UHC Senior Care Options member and can't find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of UHC Senior Care Options. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the *Drug List* you can take instead, or whether to ask for an exception.

If your prescription is written for fewer days, we'll allow multiple refills to provide up to a maximum of 30 days of medication.

We'll cover a 30-day supply of your drug if:

- you're taking a drug that is not on our *Drug List*, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by UHC Senior Care Options, **or**
- you're taking a drug that is part of a step therapy restriction.

This section is continued on the next page.

If you're taking a drug that UHC Senior Care Options does not consider to be a Part D drug, you have the right to get a one-time, 72-hour emergency supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you cannot easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new UHC Senior Care Options member.
- This is in addition to the temporary supply during the first 90 days you are a member of UHC Senior Care Options.

If you're going through a change in your level of care, such as being transferred from a hospital to a long-term care facility, any time during the year, we may cover a temporary 31-day supply of the drug you need. This will give you time to talk to your doctor or other prescriber about other treatment options or to try to get an exception. Refer to questions B10 - B12 for more information about exceptions.

We won't pay for more of your drug after you get a temporary supply unless you receive authorization from the plan.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask UHC Senior Care Options to make an exception to cover a drug that isn't not on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, UHC Senior Care Options may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Member Services. A Member Services representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9, section G2 of the *Member Handbook* to learn more about exceptions.

This section is continued on the next page.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours. Your doctor or other prescriber can fax or mail the statement to us. Or your doctor or other prescriber can tell us on the phone and then fax or mail the statement. If you have questions, call Member Services at the numbers listed at the bottom of this page.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription - depending on state laws.

UHC Senior Care Options covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Member Handbook*.

This section is continued on the next page.

B15. What are OTC drugs?

OTC stands for “over-the-counter.” UHC Senior Care Options covers some OTC drugs when they’re written as prescriptions by your provider.

You can read the UHC Senior Care Options *Drug List* to find out what OTC drugs are covered.

B16. Does UHC Senior Care Options cover non-drug OTC products?

Yes. UHC Senior Care Options covers some non-drug OTC products when they’re written as prescriptions by your provider. Examples of non-drug OTC products include Rubbing Alcohol, Urine Test Strips, and Petroleum Ointment. These non-drug OTC products are listed in the *Drug List* in **Section C**.

B17. Does UHC Senior Care Options cover long-term supplies of prescriptions?

Yes. UHC Senior Care Options offers two ways to get a long-term supply (also called an extended supply) of “maintenance” drugs on our plan’s *Drug List*. Maintenance drugs are drugs that you take on a regular basis, for a chronic or long-term medical condition.

- **Retail pharmacy.** Some retail pharmacies in our network allow you to get a long-term supply of maintenance drugs. Your *Provider and Pharmacy Directory* tells you which pharmacies in our network can give you a long-term supply of maintenance drugs.
- **Mail-order.** Our plan’s mail-order service requires you to order a 90-day supply. To get order forms and information about filling your prescriptions by mail, please reference your *Provider and Pharmacy Directory* to find the mail service pharmacies in our network. If you use a mail-order pharmacy not in the plan’s network, your prescription won’t be covered.

For more information about getting a long-term supply of drugs, call Member Services at the numbers listed at the bottom of this page.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

This section is continued on the next page.

B19. What's my copay?

UHC Senior Care Options members have no copays for prescription and OTC drugs and non-drug products as long as the member follows the plan's rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

All covered drugs on our list (Generic or Brand) have a $0 copay.

OTC drugs also have a $0 copay.

If you have questions, call Member Services at the numbers listed at the bottom of this page.

B20. What happens if I lose MassHealth (Medicaid) eligibility?

If you are within our plan's 60-day period of deemed continued eligibility, we will continue to provide all Medicare Advantage plan-covered Medicare benefits. However, your MassHealth (Medicaid) coverage may end sooner than your Medicare coverage with us. When your MassHealth (Medicaid) coverage ends, we will not pay for your MassHealth (Medicaid) benefits including the Medicare cost sharing. Medicare cost-sharing amounts for Medicare basic and supplemental benefits do not change during this period.

We will assist your efforts to regain your (MassHealth) Medicaid eligibility. If your MassHealth (Medicaid) eligibility is restored while you are still enrolled with us for your Medicare coverage, we will resume paying for your MassHealth (Medicaid) benefits and your enrollment with us will continue. If you regain MassHealth (Medicaid) eligibility after we disenroll you from our Medicare coverage you will need to reach out to reenroll with us.

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by UHC Senior Care Options. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in section D. The index alphabetically lists all drugs covered by UHC Senior Care Options.

Note: The asterisk (*) at the end of the Drug name in the Drug Name column means the drug isn't a "Part D drug." These drugs have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn't covered or is no longer covered by Medicare or Medicaid.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Member Services at the numbers listed at the bottom of this page.
- You can also read **Chapter 9** of the *Member Handbook* to learn how to appeal a decision.

C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That is where you will find drugs that treat heart conditions.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *simvastatin*) and brand name drugs are capitalized (for example, HUMALOG). The information in the "Necessary actions, restrictions, or limits on use" column tells you if UHC Senior Care Options has any rules for covering your drug. OTC drugs and non-drug products are also listed in this table. Generic drugs are in lower-case italics (for example, *aspirin*) and brand name drugs are capitalized (for example, TYLENOL).

Here are the meanings of the codes used in the "Necessary actions, restrictions, or limits on use" column:

PA – Prior authorization
For some drugs, you or your doctor or other prescriber must get authorization from UHC Senior Care Options before you fill your prescription. Prior authorization is different from a referral. UHC Senior Care Options may not cover the drug if you don't get prior authorization.

QL – Quantity limits
Sometimes UHC Senior Care Options limits the amount of a drug you can get.

ST – Step therapy
Sometimes UHC Senior Care Options requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll

This section is continued on the next page.

cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

B/D – Medicare Part B or Part D
Depending on how this drug is used, it may be covered by either Medicare Part B (doctor and outpatient health care) or Medicare Part D (prescription drugs). Your doctor or prescriber may need to provide the plan with more information about how this drug will be used to make sure it's correctly covered by Medicare.

LA – Limited access
Drugs are considered "limited access" if the FDA says the drug can only be given out by certain facilities, doctors or prescribers. These drugs may require extra handling, provider coordination or patient education that can't be done at a network pharmacy.

MME – Morphine milligram equivalent
Additional quantity limits may apply to all opioid drugs used to treat pain. This additional limit is called a cumulative Morphine Milligram Equivalent (MME). It's designed to monitor safe dosing levels of opioids for people who may be taking more than one opioid drug for pain management. If your doctor or prescriber prescribes more than this amount or thinks the limit isn't right for your situation, you or your doctor or prescriber can ask the plan to cover the additional quantity.

7D – 7-day limit
An opioid drug used to treat pain may be limited to a 7-day supply if you don't have a recent history of using opioids. This limit helps minimize long-term opioid use. If you are new to the plan and have a recent history of using opioids, the pharmacy may override the limit when appropriate.

DL – Dispensing limit
Dispensing limits apply to this drug. This drug is limited to a 1-month supply per prescription.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
celecoxib (oral capsule)	$0	QL (60 EA per 30 days)
diclofenac potassium (50mg oral tablet)	$0	
diclofenac sodium er (oral tablet extended release 24 hour)	$0	
diclofenac sodium (1.5% external solution)	$0	PA
diclofenac sodium (oral tablet delayed release)	$0	
diflunisal (oral tablet)	$0	
etodolac er (oral tablet extended release 24 hour)	$0	DL
etodolac (oral capsule)	$0	
etodolac (oral tablet immediate release)	$0	
flurbiprofen (100mg oral tablet)	$0	
ibu (600mg oral tablet, 800mg oral tablet)	$0	
ibuprofen (100mg/5ml oral suspension)	$0	
ibuprofen (400mg oral tablet, 600mg oral tablet, 800mg oral tablet)	$0	
indomethacin (oral capsule immediate release)	$0	
meloxicam (oral tablet)	$0	
nabumetone (oral tablet)	$0	
naproxen dr (oral tablet delayed release)	$0	
naproxen (oral tablet immediate release)	$0	
naproxen (375mg oral tablet delayed release) (generic ec-naprosyn)	$0	
piroxicam (oral capsule)	$0	
sulindac (oral tablet)	$0	
Opioid Analgesics, Long-acting		
buprenorphine (transdermal patch weekly)	$0	7D; DL; QL (4 EA per 28 days)
fentanyl (100mcg/hr transdermal patch 72 hour, 12mcg/hr transdermal patch 72 hour, 25mcg/hr transdermal patch 72 hour, 50mcg/hr transdermal patch 72 hour, 75mcg/hr transdermal patch 72 hour)	$0	7D; MME; DL; QL (15 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
methadone hcl (10mg/5ml oral solution)	$0	7D; MME; DL; QL (1800 ML per 30 days)
methadone hcl (5mg/5ml oral solution)	$0	7D; MME; DL; QL (3600 ML per 30 days)
methadone hcl (10mg oral tablet)	$0	7D; MME; DL; QL (360 EA per 30 days)
methadone hcl (5mg oral tablet)	$0	7D; MME; DL; QL (240 EA per 30 days)
morphine sulfate er (100mg oral tablet extended release, 15mg oral tablet extended release) (generic ms contin)	$0	7D; MME; DL; QL (90 EA per 30 days)
morphine sulfate er (200mg oral tablet extended release) (generic ms contin)	$0	7D; MME; DL; QL (60 EA per 30 days)
morphine sulfate er (30mg oral tablet extended release, 60mg oral tablet extended release) (generic ms contin)	$0	7D; MME; DL; QL (120 EA per 30 days)
XTAMPZA ER (13.5MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 18MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 9MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	$0	7D; MME; DL; QL (90 EA per 30 days)
XTAMPZA ER (27MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 36MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	$0	7D; MME; DL; QL (180 EA per 30 days)
Opioid Analgesics, Short-acting		
acetaminophen-codeine (120-12mg/5ml oral solution)	$0	7D; MME; DL; QL (4500 ML per 30 days)
acetaminophen-codeine (300-15mg oral tablet, 300-30mg oral tablet, 300-60mg oral tablet)	$0	7D; MME; DL; QL (390 EA per 30 days)
butalbital-acetaminophen-caffeine (oral tablet)	$0	QL (180 EA per 30 days)
butalbital-aspirin-caffeine (oral capsule)	$0	QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
endocet (oral tablet)	$0	7D; MME; DL; QL (360 EA per 30 days)
hydrocodone-acetaminophen (10-300mg/15ml oral solution, 10-325mg/15ml oral solution, 7.5-325mg/15ml oral solution)	$0	7D; MME; DL; QL (2700 ML per 30 days)
hydrocodone-acetaminophen (10-325mg oral tablet, 7.5-325mg oral tablet)	$0	7D; MME; DL; QL (180 EA per 30 days)
hydrocodone-acetaminophen (2.5-325mg oral tablet, 5-325mg oral tablet)	$0	7D; MME; DL; QL (240 EA per 30 days)
hydrocodone-ibuprofen (7.5-200mg oral tablet)	$0	7D; MME; DL; QL (150 EA per 30 days)
hydromorphone hcl (2mg oral tablet immediate release, 4mg oral tablet immediate release)	$0	7D; MME; DL; QL (240 EA per 30 days)
hydromorphone hcl (8mg oral tablet immediate release)	$0	7D; MME; DL; QL (180 EA per 30 days)
hydromorphone hcl preservative free (10mg/ml injection solution, 50mg/5ml injection solution)	$0	7D; DL
morphine sulfate (concentrate) (20mg/ml oral solution)	$0	7D; MME; DL; QL (300 ML per 30 days)
morphine sulfate (10mg/5ml oral solution)	$0	7D; MME; DL; QL (3000 ML per 30 days)
morphine sulfate (20mg/5ml oral solution)	$0	7D; MME; DL; QL (1500 ML per 30 days)
morphine sulfate (15mg oral tablet immediate release)	$0	7D; MME; DL; QL (240 EA per 30 days)
morphine sulfate (30mg oral tablet immediate release)	$0	7D; MME; DL; QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
oxycodone hcl (100mg/5ml oral concentrate)	$0	7D; MME; DL; QL (180 ML per 30 days)
oxycodone hcl (5mg/5ml oral solution)	$0	7D; MME; DL; QL (3900 ML per 30 days)
oxycodone hcl (10mg oral tablet immediate release, 5mg oral tablet immediate release)	$0	7D; MME; DL; QL (360 EA per 30 days)
oxycodone hcl (15mg oral tablet immediate release)	$0	7D; MME; DL; QL (240 EA per 30 days)
oxycodone hcl (20mg oral tablet immediate release, 30mg oral tablet immediate release)	$0	7D; MME; DL; QL (180 EA per 30 days)
oxycodone-acetaminophen (10-325mg oral tablet, 2.5-325mg oral tablet, 5-325mg oral tablet, 7.5-325mg oral tablet)	$0	7D; MME; DL; QL (360 EA per 30 days)
tramadol hcl (50mg oral tablet immediate release)	$0	7D; MME; DL; QL (240 EA per 30 days)
Anesthetics		
Local Anesthetics		
lidocaine (5% external ointment)	$0	QL (152 GM per 30 days)
lidocaine (5% external patch)	$0	PA; DL; QL (90 EA per 30 days)
lidocaine hcl (4% external solution)	$0	DL
lidocaine viscous (2% mouth/throat solution)	$0	
lidocaine-prilocaine (external cream)	$0	
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium (oral tablet delayed release)	$0	DL
disulfiram (oral tablet)	$0	
naltrexone hcl (oral tablet)	$0	
VIVITROL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	DL
Opioid Dependence		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
buprenorphine hcl (tablet sublingual)	$0	
buprenorphine hcl-naloxone hcl (sublingual film)	$0	DL
buprenorphine hcl-naloxone hcl (tablet sublingual)	$0	
Opioid Reversal Agents		
KLOXXADO (NASAL LIQUID)	$0	
naloxone hcl (0.4mg/ml injection solution)	$0	
naloxone hcl (injection solution cartridge)	$0	
naloxone hcl (injection solution prefilled syringe)	$0	
OPVEE (NASAL SOLUTION)	$0	DL
Smoking Cessation Agents		
bupropion hcl sr (150mg oral tablet extended release 12 hour smoking-deterrent)	$0	
NICOTROL NS (NASAL SOLUTION)	$0	DL
varenicline tartrate (starter) (oral tablet therapy pack)	$0	
varenicline tartrate (oral tablet)	$0	
Antibacterials		
Aminoglycosides		
amikacin sulfate (500mg/2ml injection solution)	$0	DL
ARIKAYCE (INHALATION SUSPENSION)	$0	PA; DL
gentamicin sulfate-0.9% sodium chloride (intravenous solution)	$0	DL
gentamicin sulfate (40mg/ml injection solution)	$0	DL
HUMATIN (ORAL CAPSULE)	$0	DL
neomycin sulfate (oral tablet)	$0	
streptomycin sulfate (intramuscular solution reconstituted)	$0	DL
tobramycin sulfate (10mg/ml injection solution, 80mg/2ml injection solution)	$0	DL
Antibacterials, Other		
aztreonam (injection solution reconstituted)	$0	DL
clindamycin hcl (oral capsule)	$0	
clindamycin palmitate hcl (oral solution reconstituted)	$0	DL
clindamycin phosphate in d5w (intravenous solution)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
clindamycin phosphate (300mg/2ml injection solution, 600mg/4ml injection solution, 900mg/6ml injection solution)	$0	DL
clindamycin phosphate (vaginal cream)	$0	
colistimethate sodium (cba) (injection solution reconstituted)	$0	DL
daptomycin (intravenous solution reconstituted)	$0	DL
fosfomycin tromethamine (oral packet)	$0	DL
linezolid (intravenous solution)	$0	DL
linezolid (oral suspension reconstituted)	$0	DL; QL (1800 ML per 30 days)
linezolid (oral tablet)	$0	DL; QL (60 EA per 30 days)
methenamine hippurate (oral tablet)	$0	
metronidazole (0.75% external cream)	$0	
metronidazole (0.75% external gel)	$0	
metronidazole (1% external gel)	$0	DL
metronidazole (0.75% external lotion)	$0	DL
metronidazole (500mg/100ml intravenous solution)	$0	DL
metronidazole (250mg oral tablet, 500mg oral tablet)	$0	
metronidazole (0.75% vaginal gel)	$0	
nitrofurantoin macrocrystal (100mg oral capsule, 50mg oral capsule) (generic macrodantin)	$0	
nitrofurantoin monohydrate (generic macrobid)	$0	
polymyxin b sulfate (injection solution reconstituted)	$0	DL
tigecycline (intravenous solution reconstituted)	$0	DL
tinidazole (oral tablet)	$0	DL
trimethoprim (oral tablet)	$0	
vancomycin hcl (10gm intravenous solution reconstituted, 1gm intravenous solution reconstituted, 500mg intravenous solution reconstituted, 750mg intravenous solution reconstituted)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
vancomycin hcl (125mg oral capsule)	$0	DL; QL (120 EA per 30 days)
vancomycin hcl (250mg oral capsule)	$0	DL; QL (240 EA per 30 days)
XIFAXAN (200MG ORAL TABLET)	$0	PA; DL
XIFAXAN (550MG ORAL TABLET)	$0	PA; DL
Beta-lactam, Cephalosporins		
cefaclor (oral capsule)	$0	
cefadroxil (oral capsule)	$0	
cefadroxil (oral suspension reconstituted)	$0	
cefazolin sodium (10gm injection solution reconstituted, 1gm injection solution reconstituted, 500mg injection solution reconstituted)	$0	DL
cefdinir (oral capsule)	$0	
cefdinir (oral suspension reconstituted)	$0	
cefepime hcl (injection solution reconstituted)	$0	DL
cefepime hcl (2gm intravenous solution reconstituted)	$0	DL
cefixime (oral capsule)	$0	
cefixime (oral suspension reconstituted)	$0	DL
cefotetan disodium (injection solution reconstituted)	$0	DL
cefoxitin sodium (intravenous solution reconstituted)	$0	DL
cefpodoxime proxetil (oral suspension reconstituted)	$0	DL
cefpodoxime proxetil (oral tablet)	$0	DL
cefprozil (oral suspension reconstituted)	$0	
cefprozil (oral tablet)	$0	
ceftazidime (injection solution reconstituted)	$0	DL
ceftazidime (intravenous solution reconstituted)	$0	DL
ceftriaxone sodium (1gm injection solution reconstituted, 250mg injection solution reconstituted, 2gm injection solution reconstituted, 500mg injection solution reconstituted)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ceftriaxone sodium (10gm intravenous solution reconstituted)	$0	DL
cefuroxime axetil (oral tablet)	$0	
cefuroxime sodium (injection solution reconstituted)	$0	DL
cefuroxime sodium (intravenous solution reconstituted)	$0	DL
cephalexin (250mg oral capsule, 500mg oral capsule)	$0	
cephalexin (750mg oral capsule)	$0	
cephalexin (oral suspension reconstituted)	$0	
tazicef (injection solution reconstituted)	$0	DL
tazicef (2gm intravenous solution reconstituted, 6gm intravenous solution reconstituted)	$0	DL
TEFLARO (INTRAVENOUS SOLUTION RECONSTITUTED)	$0	DL
Beta-lactam, Penicillins		
amoxicillin (oral capsule)	$0	
amoxicillin (oral suspension reconstituted)	$0	
amoxicillin (oral tablet immediate release)	$0	
amoxicillin (oral tablet chewable)	$0	
amoxicillin-potassium clavulanate er (oral tablet extended release 12 hour)	$0	DL
amoxicillin-potassium clavulanate (oral suspension reconstituted)	$0	
amoxicillin-potassium clavulanate (oral tablet immediate release)	$0	
ampicillin (oral capsule)	$0	
ampicillin sodium (1gm injection solution reconstituted)	$0	DL
ampicillin sodium (10gm intravenous solution reconstituted)	$0	DL
ampicillin-sulbactam sodium (injection solution reconstituted)	$0	DL
ampicillin-sulbactam sodium (15 (10-5)gm intravenous solution reconstituted)	$0	DL
BICILLIN C-R 900/300 (INTRAMUSCULAR SUSPENSION)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BICILLIN C-R (INTRAMUSCULAR SUSPENSION)	$0	DL
BICILLIN L-A (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	DL
dicloxacillin sodium (oral capsule)	$0	
nafcillin sodium (injection solution reconstituted)	$0	DL
nafcillin sodium (intravenous solution reconstituted)	$0	DL
OXACILLIN SODIUM IN DEXTROSE (INTRAVENOUS SOLUTION)	$0	DL
oxacillin sodium (injection solution reconstituted)	$0	DL
oxacillin sodium (intravenous solution reconstituted)	$0	DL
penicillin g potassium (20000000unit injection solution reconstituted)	$0	DL
penicillin g sodium (injection solution reconstituted)	$0	DL
penicillin v potassium (oral solution reconstituted)	$0	
penicillin v potassium (oral tablet)	$0	
piperacillin-tazobactam (2.25 (2-0.25)gm intravenous solution reconstituted, 3.375 (3-0.375)gm intravenous solution reconstituted, 4.5 (4-0.5)gm intravenous solution reconstituted, 40.5 (36-4.5)gm intravenous solution reconstituted)	$0	DL
Carbapenems		
ertapenem sodium (injection solution reconstituted)	$0	DL
imipenem-cilastatin (intravenous solution reconstituted)	$0	DL
meropenem (1gm intravenous solution reconstituted)	$0	DL
meropenem (500mg intravenous solution reconstituted)	$0	
Macrolides		
azithromycin (intravenous solution reconstituted)	$0	DL
azithromycin (oral suspension reconstituted)	$0	
azithromycin (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
clarithromycin er (oral tablet extended release 24 hour)	$0	DL
clarithromycin (oral suspension reconstituted)	$0	DL
clarithromycin (oral tablet immediate release)	$0	
DIFICID (ORAL TABLET)	$0	DL
erythromycin base (oral capsule delayed release particles)	$0	DL
erythromycin base (oral tablet immediate release)	$0	DL
erythromycin ethylsuccinate (200mg/5ml oral suspension reconstituted)	$0	DL
erythromycin ethylsuccinate (oral tablet)	$0	DL
erythromycin (oral tablet delayed release)	$0	DL
Quinolones		
ciprofloxacin hcl (oral tablet immediate release)	$0	
ciprofloxacin in d5w (200mg/100ml intravenous solution)	$0	DL
levofloxacin in d5w (500mg/100ml intravenous solution, 750mg/150ml intravenous solution)	$0	DL
levofloxacin (oral solution)	$0	DL
levofloxacin (oral tablet)	$0	
moxifloxacin hcl in nacl (intravenous solution)	$0	DL
moxifloxacin hcl (oral tablet)	$0	
ofloxacin (oral tablet)	$0	
Sulfonamides		
sulfadiazine (oral tablet)	$0	DL
sulfamethoxazole-trimethoprim (200-40mg/5ml oral suspension)	$0	
sulfamethoxazole-trimethoprim (oral tablet)	$0	
Tetracyclines		
demeclocycline hcl (oral tablet)	$0	DL
doxy 100 (intravenous solution reconstituted)	$0	DL
doxycycline hyclate (intravenous solution reconstituted)	$0	DL
doxycycline hyclate (oral capsule)	$0	
doxycycline hyclate (100mg oral tablet immediate release, 20mg oral tablet immediate release)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
doxycycline monohydrate (100mg oral capsule, 50mg oral capsule)	$0	
doxycycline monohydrate (oral suspension reconstituted)	$0	DL
doxycycline monohydrate (100mg oral tablet, 50mg oral tablet, 75mg oral tablet)	$0	
minocycline hcl (oral capsule)	$0	
minocycline hcl (oral tablet immediate release)	$0	DL
tetracycline hcl (oral capsule)	$0	DL
Antibacterials, Other		
Antibacterials		
*hydrogen per sol 3% (solution)**	$0 (OTC)	
SANITIZ HAND MIS WIPES (MISCELLANEOUS)*	$0 (OTC)	
*sm iodine tin mild (tincture)**	$0 (OTC)	
*triple antib oin plus (ointment)**	$0 (OTC)	
Anti-Constipation Agents		
Gastrointestinal Agents		
*docusate cal cap 240mg (capsule)**	$0 (OTC)	
*fiber laxatv tab 625mg (tablet)**	$0 (OTC)	
*fiber/d3 chw 2.5-500 (tablet chewable)**	$0 (OTC)	
*fiber-caps tab 625mg (tablet)**	$0 (OTC)	
FIBERCEL POW (PACKET, POWDER)*	$0 (OTC)	
GLYCERIN LIQ (LIQUID)*	$0 (OTC)	
*gnp castor oil 100% (oil)**	$0 (OTC)	
*gnp epsom gra salt (granules)**	$0 (OTC)	
*gnp milk mag sus cherry (suspension)**	$0 (OTC)	
*gnp milk mag sus mint (suspension)**	$0 (OTC)	
*gnp milk mag sus original (suspension)**	$0 (OTC)	
*lax/stl soft tab 8.6-50mg (tablet)**	$0 (OTC)	
LAXACIN TAB 8.6-50MG (TABLET)*	$0 (OTC)	
*laxative pls tab 8.6-50mg (tablet)**	$0 (OTC)	
*milk of magn sus 1200/15 (suspension)**	$0 (OTC)	
*milk of magn sus 2400/30 (suspension)**	$0 (OTC)	
*milk of magn sus 400/5ml (suspension)**	$0 (OTC)	
NUTRISOURCE PAK FIBER (PACKET)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
NUTRISOURCE POW FIBER (POWDER)*	$0 (OTC)	
*senna plus tab 8.6-50mg (tablet)**	$0 (OTC)	
*senna s tab 8.6-50mg (tablet)**	$0 (OTC)	
*senna/dss tab 8.6-50mg (tablet)**	$0 (OTC)	
*senna-plus tab 8.6-50mg (tablet)**	$0 (OTC)	
*senna-s tab 8.6-50mg (tablet)**	$0 (OTC)	
*sorbitol sol 70% (solution)**	$0 (OTC)	
*stimulant tab 8.6-50mg (tablet)**	$0 (OTC)	
*stool soft cap 240mg (capsule)**	$0 (OTC)	
*stool softnr tab 8.6-50mg (tablet)**	$0 (OTC)	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT (10MG/ML ORAL SOLUTION)	$0	PA; DL; QL (600 ML per 30 days)
BRIVIACT (100MG ORAL TABLET, 10MG ORAL TABLET, 25MG ORAL TABLET, 50MG ORAL TABLET, 75MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
EPIDIOLEX (ORAL SOLUTION)	$0	PA; DL
EPRONTIA (ORAL SOLUTION)	$0	DL
felbamate (oral suspension)	$0	DL
felbamate (oral tablet)	$0	DL
FINTEPLA (ORAL SOLUTION)	$0	PA; DL; QL (360 ML per 30 days)
FYCOMPA (ORAL SUSPENSION)	$0	DL; QL (720 ML per 30 days)
FYCOMPA (10MG ORAL TABLET, 12MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
FYCOMPA (2MG ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
lamotrigine (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 25mg oral tablet immediate release)	$0	
lamotrigine (25mg oral tablet chewable, 5mg oral tablet chewable)	$0	
levetiracetam er (oral tablet extended release 24 hour)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
levetiracetam (100mg/ml oral solution)	$0	
levetiracetam (1000mg oral tablet immediate release, 250mg oral tablet immediate release, 500mg oral tablet immediate release, 750mg oral tablet immediate release)	$0	
roweepra (oral tablet immediate release)	$0	
SPRITAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE, 500MG ORAL TABLET DISINTEGRATING SOLUBLE)	$0	DL; QL (60 EA per 30 days)
subvenite (100mg oral tablet, 150mg oral tablet, 200mg oral tablet, 25mg oral tablet)	$0	
topiramate (oral capsule sprinkle immediate release)	$0	
topiramate (oral solution)	$0	DL
topiramate (oral tablet)	$0	
valproic acid (oral capsule)	$0	
valproic acid (250mg/5ml oral solution)	$0	
Calcium Channel Modifying Agents		
ethosuximide (oral capsule)	$0	
ethosuximide (oral solution)	$0	
methsuximide (oral capsule)	$0	DL
Gamma-aminobutyric Acid (GABA) Modulating Agents		
clobazam (2.5mg/ml oral suspension)	$0	PA; DL; QL (480 ML per 30 days)
clobazam (10mg oral tablet, 20mg oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
DIACOMIT (250MG ORAL CAPSULE)	$0	DL; QL (360 EA per 30 days)
DIACOMIT (500MG ORAL CAPSULE)	$0	DL; QL (180 EA per 30 days)
DIACOMIT (250MG ORAL PACKET)	$0	DL; QL (360 EA per 30 days)
DIACOMIT (500MG ORAL PACKET)	$0	DL; QL (180 EA per 30 days)
diazepam (10mg rectal gel, 2.5mg rectal gel, 20mg rectal gel)	$0	DL; QL (5 EA per 30 days)
gabapentin (oral capsule)	$0	
gabapentin (250mg/5ml oral solution)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
gabapentin (600mg oral tablet, 800mg oral tablet)	$0	
NAYZILAM (NASAL SOLUTION)	$0	PA; DL; QL (10 EA per 30 days)
phenobarbital (20mg/5ml oral elixir)	$0	
phenobarbital (oral tablet)	$0	
primidone (oral tablet)	$0	
SYMPAZAN (10MG ORAL FILM, 20MG ORAL FILM)	$0	PA; DL; QL (60 EA per 30 days)
SYMPAZAN (5MG ORAL FILM)	$0	PA; DL; QL (60 EA per 30 days)
tiagabine hcl (oral tablet)	$0	DL
VALTOCO 10MG DOSE (NASAL LIQUID)	$0	PA; DL; QL (10 EA per 30 days)
VALTOCO 15MG DOSE (NASAL LIQUID THERAPY PACK)	$0	PA; DL; QL (10 EA per 30 days)
VALTOCO 20MG DOSE (NASAL LIQUID THERAPY PACK)	$0	PA; DL; QL (10 EA per 30 days)
VALTOCO 5MG DOSE (NASAL LIQUID)	$0	PA; DL; QL (10 EA per 30 days)
vigabatrin (oral packet)	$0	PA; DL; QL (180 EA per 30 days)
vigabatrin (oral tablet)	$0	PA; DL; QL (180 EA per 30 days)
VIGAFYDE (ORAL SOLUTION)	$0	PA; DL
vigpoder (500mg oral packet)	$0	PA; DL; QL (180 EA per 30 days)
ZTALMY (ORAL SUSPENSION)	$0	PA; DL
Sodium Channel Agents		
carbamazepine er (oral capsule extended release 12 hour)	$0	
carbamazepine er (oral tablet extended release 12 hour)	$0	
carbamazepine (100mg/5ml oral suspension)	$0	
carbamazepine (oral tablet immediate release)	$0	
carbamazepine (oral tablet chewable)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
DILANTIN INFATABS (ORAL TABLET CHEWABLE)	$0	
DILANTIN (ORAL CAPSULE)	$0	
eslicarbazepine acetate (200mg oral tablet, 400mg oral tablet)	$0	DL; QL (30 EA per 30 days)
eslicarbazepine acetate (600mg oral tablet, 800mg oral tablet)	$0	DL; QL (60 EA per 30 days)
lacosamide (10mg/ml oral solution)	$0	DL; QL (1200 ML per 30 days)
lacosamide (oral tablet)	$0	DL; QL (60 EA per 30 days)
oxcarbazepine (oral suspension)	$0	DL
oxcarbazepine (oral tablet immediate release)	$0	
phenytek (oral capsule)	$0	
phenytoin (oral suspension)	$0	
phenytoin (oral tablet chewable)	$0	
phenytoin sodium extended (100mg oral capsule)	$0	
rufinamide (oral suspension)	$0	DL
rufinamide (oral tablet)	$0	DL
XCOPRI (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 28 days)
XCOPRI (350MG DAILY DOSE) (150MG & 200MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 28 days)
XCOPRI (100MG ORAL TABLET, 25MG ORAL TABLET, 50MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
XCOPRI (150MG ORAL TABLET, 200MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
XCOPRI (14 X 12.5MG & 14 X 25MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 365 days)
XCOPRI (14 X 150MG & 14 X 200MG ORAL TABLET THERAPY PACK, 14 X 50MG & 14 X 100MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 365 days)
ZONISADE (ORAL SUSPENSION)	$0	ST; DL
zonisamide (oral capsule)	$0	
Antidementia Agents		
Antidementia Agents, Other		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
memantine hcl-donepezil hcl (oral capsule extended release 24 hour)	$0	PA; QL (30 EA per 30 days)
Cholinesterase Inhibitors		
donepezil hcl (10mg oral tablet)	$0	QL (60 EA per 30 days)
donepezil hcl (23mg oral tablet, 5mg oral tablet)	$0	QL (30 EA per 30 days)
donepezil hcl odt (10mg oral tablet dispersible)	$0	QL (60 EA per 30 days)
donepezil hcl odt (5mg oral tablet dispersible)	$0	QL (30 EA per 30 days)
galantamine hydrobromide er (oral capsule extended release 24 hour)	$0	DL; QL (30 EA per 30 days)
galantamine hydrobromide (oral solution)	$0	DL; QL (200 ML per 30 days)
galantamine hydrobromide (oral tablet)	$0	DL; QL (60 EA per 30 days)
rivastigmine tartrate (oral capsule)	$0	QL (60 EA per 30 days)
rivastigmine (transdermal patch 24 hour)	$0	ST; DL; QL (30 EA per 30 days)
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
memantine hcl er (oral capsule extended release 24 hour)	$0	PA; QL (30 EA per 30 days)
memantine hcl (2mg/ml oral solution)	$0	PA; DL; QL (300 ML per 30 days)
memantine hcl (10mg oral tablet)	$0	PA; QL (60 EA per 30 days)
memantine hcl titration pak (oral tablet)	$0	PA; QL (98 EA per 365 days)
memantine hcl (5mg oral tablet)	$0	PA; QL (90 EA per 30 days)
Antidepressants		
Antidepressants, Other		
AUVELITY (ORAL TABLET EXTENDED RELEASE)	$0	DL
bupropion hcl sr (oral tablet extended release 12 hour)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
bupropion hcl xl (150mg oral tablet extended release 24 hour, 300mg oral tablet extended release 24 hour)	$0	
bupropion hcl (oral tablet immediate release)	$0	
mirtazapine (oral tablet)	$0	
mirtazapine odt (oral tablet dispersible)	$0	
ZURZUVAE (20MG ORAL CAPSULE, 25MG ORAL CAPSULE)	$0	PA; DL; QL (28 EA per 14 days)
ZURZUVAE (30MG ORAL CAPSULE)	$0	PA; DL; QL (14 EA per 14 days)
Monoamine Oxidase Inhibitors		
EMSAM (TRANSDERMAL PATCH 24 HOUR)	$0	DL; QL (30 EA per 30 days)
MARPLAN (ORAL TABLET)	$0	DL
phenelzine sulfate (oral tablet)	$0	
tranylcypromine sulfate (oral tablet)	$0	DL
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
citalopram hydrobromide (10mg/5ml oral solution)	$0	
citalopram hydrobromide (oral tablet)	$0	
desvenlafaxine succinate er (100mg oral tablet extended release 24 hour) (generic pristiq)	$0	QL (120 EA per 30 days)
desvenlafaxine succinate er (25mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour) (generic pristiq)	$0	QL (30 EA per 30 days)
escitalopram oxalate (5mg/5ml oral solution)	$0	
escitalopram oxalate (oral tablet)	$0	
FETZIMA (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	$0	ST; DL; QL (30 EA per 30 days)
FETZIMA TITRATION (ORAL CAPSULE ER 24 HOUR THERAPY PACK)	$0	ST; DL; QL (56 EA per 365 days)
fluoxetine hcl (10mg oral capsule immediate release, 20mg oral capsule immediate release, 40mg oral capsule immediate release)	$0	
fluoxetine hcl (90mg oral capsule delayed release)	$0	DL
fluoxetine hcl (20mg/5ml oral solution)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
fluoxetine hcl (10mg oral tablet, 20mg oral tablet, 60mg oral tablet)	$0	
fluvoxamine maleate (oral tablet)	$0	
nefazodone hcl (oral tablet)	$0	DL
paroxetine hcl (10mg/5ml oral suspension)	$0	DL
paroxetine hcl (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 40mg oral tablet immediate release)	$0	
RALDESY (ORAL SOLUTION)	$0	DL
sertraline hcl (oral concentrate)	$0	DL
sertraline hcl (oral tablet)	$0	
trazodone hcl (100mg oral tablet, 150mg oral tablet, 50mg oral tablet)	$0	
trazodone hcl (300mg oral tablet)	$0	
TRINTELLIX (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
venlafaxine hcl er (oral capsule extended release 24 hour)	$0	
venlafaxine hcl (oral tablet immediate release)	$0	
vilazodone hcl (oral tablet)	$0	DL; QL (30 EA per 30 days)
Tricyclics		
amitriptyline hcl (oral tablet)	$0	DL
amoxapine (oral tablet)	$0	
clomipramine hcl (oral capsule)	$0	DL
desipramine hcl (oral tablet)	$0	DL
doxepin hcl (oral capsule)	$0	DL
doxepin hcl (oral concentrate)	$0	DL
imipramine hcl (oral tablet)	$0	DL
nortriptyline hcl (oral capsule)	$0	DL
nortriptyline hcl (oral solution)	$0	DL
protriptyline hcl (oral tablet)	$0	DL
trimipramine maleate (oral capsule)	$0	DL
Antiemetics		
Antiemetics, Other		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
meclizine hcl (12.5mg oral tablet, 25mg oral tablet)	$0	
metoclopramide hcl (5mg/5ml oral solution)	$0	
metoclopramide hcl (oral tablet)	$0	
perphenazine (oral tablet)	$0	DL
prochlorperazine maleate (oral tablet)	$0	
prochlorperazine (rectal suppository)	$0	DL
promethazine hcl (6.25mg/5ml oral solution)	$0	DL
promethazine hcl (oral tablet)	$0	
promethazine hcl (12.5mg rectal suppository)	$0	DL; QL (180 EA per 30 days)
promethazine hcl (25mg rectal suppository)	$0	DL; QL (120 EA per 30 days)
scopolamine (transdermal patch 72 hour)	$0	DL
Emetogenic Therapy Adjuncts		
aprepitant (125mg oral capsule)	$0	PA; DL; QL (2 EA per 28 days)
aprepitant (40mg oral capsule, 80mg oral capsule)	$0	PA; DL; QL (4 EA per 28 days)
aprepitant (80 & 125mg oral capsule therapy pack)	$0	PA; DL; QL (6 EA per 28 days)
dronabinol (oral capsule)	$0	PA; DL
granisetron hcl (oral tablet)	$0	B/D, PA; DL; QL (60 EA per 30 days)
ondansetron hcl (oral solution)	$0	B/D, PA; DL; QL (900 ML per 30 days)
ondansetron hcl (4mg oral tablet)	$0	B/D, PA; QL (180 EA per 30 days)
ondansetron hcl (8mg oral tablet)	$0	B/D, PA; QL (90 EA per 30 days)
ondansetron odt (4mg oral tablet dispersible)	$0	B/D, PA; QL (180 EA per 30 days)
ondansetron odt (8mg oral tablet dispersible)	$0	B/D, PA; QL (90 EA per 30 days)
SANCUSO (TRANSDERMAL PATCH)	$0	DL; QL (4 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Antifungals		
Antifungals		
amphotericin b (intravenous solution reconstituted)	$0	B/D, PA; DL
amphotericin b liposome (intravenous suspension reconstituted)	$0	B/D, PA; DL
*antifungal cre foot 1% (cream)**	$0 (OTC)	
*athlete foot cre 1% (cream)**	$0 (OTC)	
clotrimazole (mouth/throat troche)	$0	
CRESEMBA (ORAL CAPSULE)	$0	PA; DL
fluconazole (oral suspension reconstituted)	$0	
fluconazole (oral tablet)	$0	
fluconazole in sodium chloride (200-0.9mg/100ml-% intravenous solution, 400-0.9mg/200ml-% intravenous solution)	$0	DL
flucytosine (oral capsule)	$0	PA; DL
*foot care cre 1% (cream)**	$0 (OTC)	
griseofulvin microsize (oral suspension)	$0	DL
griseofulvin microsize (oral tablet)	$0	DL
griseofulvin ultramicrosize (125mg oral tablet, 250mg oral tablet)	$0	DL
itraconazole (oral capsule)	$0	PA; DL; QL (120 EA per 30 days)
*jock itch cre 1% (cream)**	$0 (OTC)	
ketoconazole (oral tablet)	$0	
LAMISIL AT CRE 1% (CREAM)*	$0 (OTC)	
micafungin sodium (intravenous solution reconstituted)	$0	DL
miconazole 3 (vaginal suppository)	$0	
*miconazole 3 kit combo pk (kit)**	$0 (OTC)	
*miconazole 7 cre 2% (cream)**	$0 (OTC)	
*miconazole 7 cre tube/kit (cream)**	$0 (OTC)	
MONISTAT 3 CRE 4% (CREAM)*	$0 (OTC)	
MONISTAT 3 KIT 200MG/2% (KIT)*	$0 (OTC)	
MONISTAT 3 KIT COMBO PK (KIT)*	$0 (OTC)	
MONISTAT 7 CRE 2% (CREAM)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
MONISTAT 7 KIT COMBO PK (KIT)*	$0 (OTC)	
nystatin (mouth/throat suspension)	$0	
nystatin (oral tablet)	$0	
posaconazole (oral suspension)	$0	DL; QL (600 ML per 30 days)
posaconazole (oral tablet delayed release)	$0	PA; DL; QL (180 EA per 30 days)
*terbinafine cre 1% (cream)**	$0 (OTC)	
terbinafine hcl (oral tablet)	$0	QL (60 EA per 30 days)
terconazole (vaginal cream)	$0	
terconazole (vaginal suppository)	$0	
voriconazole (200mg oral tablet)	$0	DL; QL (120 EA per 30 days)
voriconazole (50mg oral tablet)	$0	DL; QL (480 EA per 30 days)
voriconazole (intravenous solution reconstituted)	$0	PA; DL
voriconazole (oral suspension reconstituted)	$0	DL; QL (600 ML per 30 days)
Antigout Agents		
Antigout Agents		
allopurinol (100mg oral tablet, 300mg oral tablet)	$0	
colchicine (0.6mg oral tablet) (generic colcrys)	$0	QL (120 EA per 30 days)
colchicine-probenecid (oral tablet)	$0	
febuxostat (oral tablet)	$0	ST
probenecid (oral tablet)	$0	
Antihistamines		
Respiratory Tract/Pulmonary Agents		
*all day allg sol 1mg/ml (solution)**	$0 (OTC)	
*all day allg sol 5mg/5ml (solution)**	$0 (OTC)	
*allergy rel cap 10mg (capsule)**	$0 (OTC)	
*child allrgy sol 5mg/5ml (solution)**	$0 (OTC)	
EAZZZE PAIN TAB 25-500MG (TABLET)*	$0 (OTC)	
*night time tab 25-500mg (tablet)**	$0 (OTC)	
*night time tab 25mg (tablet)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
*pain relief tab 25-500mg (tablet)**	$0 (OTC)	
*pain relieve tab 25-500mg (tablet)**	$0 (OTC)	
*qc sleep aid cap 50mg (capsule)**	$0 (OTC)	
*sleep aid tab 25mg (tablet)**	$0 (OTC)	
*sleep-aid tab 25mg (tablet)**	$0 (OTC)	
Antimigraine Agents		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists		
AIMOVIG (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; QL (1 ML per 28 days)
EMGALITY (300MG DOSE) (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3 ML per 28 days)
EMGALITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; QL (2 ML per 28 days)
EMGALITY (120MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; QL (2 ML per 28 days)
NURTEC ODT (ORAL TABLET DISPERSIBLE)	$0	PA; DL; QL (18 EA per 30 days)
QULIPTA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
UBRELVY (ORAL TABLET)	$0	PA; DL; QL (16 EA per 30 days)
Ergot Alkaloids		
dihydroergotamine mesylate (nasal solution)	$0	DL; QL (16 ML per 28 days)
ergotamine-caffeine (oral tablet)	$0	
Prophylactic		
timolol maleate (oral tablet)	$0	
Serotonin (5-HT) Receptor Agonist		
naratriptan hcl (oral tablet)	$0	QL (12 EA per 30 days)
rizatriptan benzoate (oral tablet)	$0	QL (12 EA per 30 days)
rizatriptan benzoate odt (oral tablet dispersible)	$0	QL (12 EA per 30 days)
sumatriptan (nasal solution)	$0	DL; QL (12 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
sumatriptan succinate (oral tablet)	$0	QL (12 EA per 30 days)
sumatriptan succinate (subcutaneous solution auto-injector)	$0	DL; QL (6 ML per 30 days)
sumatriptan succinate (subcutaneous solution)	$0	DL; QL (6 ML per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
pyridostigmine bromide er (oral tablet extended release)	$0	DL
pyridostigmine bromide (60mg oral tablet immediate release)	$0	
Antimycobacterials		
Antimycobacterials, Other		
dapsone (oral tablet)	$0	
rifabutin (oral capsule)	$0	DL
Antituberculars		
cycloserine (oral capsule)	$0	DL
ethambutol hcl (oral tablet)	$0	
isoniazid (oral syrup)	$0	DL
isoniazid (oral tablet)	$0	
PRIFTIN (ORAL TABLET)	$0	DL
pyrazinamide (oral tablet)	$0	DL
rifampin (intravenous solution reconstituted)	$0	DL
rifampin (oral capsule)	$0	
SIRTURO (ORAL TABLET)	$0	PA; DL
Antineoplastics		
Alkylating Agents		
cyclophosphamide (25mg oral capsule, 50mg oral capsule)	$0	B/D, PA
CYCLOPHOSPHAMIDE (25MG ORAL TABLET, 50MG ORAL TABLET)	$0	B/D, PA
GLEOSTINE (100MG ORAL CAPSULE)	$0	DL
GLEOSTINE (10MG ORAL CAPSULE, 40MG ORAL CAPSULE)	$0	DL
LEUKERAN (ORAL TABLET)	$0	DL
MATULANE (ORAL CAPSULE)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
VALCHLOR (EXTERNAL GEL)	$0	PA; DL; QL (60 GM per 30 days)
Antiandrogens		
abiraterone acetate (250mg oral tablet)	$0	DL; QL (120 EA per 30 days)
abiraterone acetate (500mg oral tablet)	$0	DL; QL (60 EA per 30 days)
bicalutamide (oral tablet)	$0	
ERLEADA (240MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
ERLEADA (60MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
EULEXIN (ORAL CAPSULE)	$0	DL
nilutamide (oral tablet)	$0	DL
NUBEQA (ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
XTANDI (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
XTANDI (40MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
XTANDI (80MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
Antiangiogenic Agents		
lenalidomide (oral capsule)	$0	PA; DL; QL (30 EA per 30 days)
POMALYST (ORAL CAPSULE)	$0	PA; DL; QL (30 EA per 30 days)
THALOMID (100MG ORAL CAPSULE)	$0	PA; DL; QL (112 EA per 28 days)
THALOMID (50MG ORAL CAPSULE)	$0	PA; DL; QL (84 EA per 28 days)
Antiestrogens/Modifiers		
ORSERDU (345MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
ORSERDU (86MG ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
SOLTAMOX (ORAL SOLUTION)	$0	DL
tamoxifen citrate (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
toremifene citrate (oral tablet)	$0	DL
Antimetabolites		
hydroxyurea (oral capsule)	$0	
mercaptopurine (oral suspension)	$0	PA; DL
mercaptopurine (oral tablet)	$0	
ONUREG (ORAL TABLET)	$0	PA; DL; QL (14 EA per 28 days)
TABLOID (ORAL TABLET)	$0	PA; DL
Antineoplastics, Other		
AKEEGA (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
INQOVI (ORAL TABLET)	$0	PA; DL; QL (5 EA per 28 days)
IWILFIN (ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)
LAZCLUZE (240MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
LAZCLUZE (80MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
LONSURF (15-6.14MG ORAL TABLET)	$0	PA; DL; QL (300 EA per 30 days)
LONSURF (20-8.19MG ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)
LYSODREN (ORAL TABLET)	$0	DL
MODEYSO (ORAL CAPSULE)	$0	PA; DL; QL (20 EA per 28 days)
OGSIVEO (100MG ORAL TABLET, 150MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
OGSIVEO (50MG ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)
ORGOVYX (ORAL TABLET)	$0	PA; DL; QL (30 EA per 28 days)
REVUFORJ (110MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
REVUFORJ (160MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
REVUFORJ (25MG ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
VONJO (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
ZOLINZA (ORAL CAPSULE)	$0	PA; DL
Aromatase Inhibitors, 3rd Generation		
anastrozole (oral tablet)	$0	
exemestane (oral tablet)	$0	DL
letrozole (oral tablet)	$0	
Enzyme Inhibitors		
AVMAPKI FAKZYNJA CO-PACK (ORAL THERAPY PACK)	$0	PA; DL; QL (66 EA per 28 days)
Molecular Target Inhibitors		
ALECENSA (ORAL CAPSULE)	$0	PA; DL; QL (240 EA per 30 days)
ALUNBRIG (180MG ORAL TABLET, 90MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
ALUNBRIG (30MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
ALUNBRIG (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (60 EA per 365 days)
AUGTYRO (160MG ORAL CAPSULE)	$0	PA; DL; QL (60 EA per 30 days)
AUGTYRO (40MG ORAL CAPSULE)	$0	PA; DL; QL (240 EA per 30 days)
AYVAKIT (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
BALVERSA (3MG ORAL TABLET)	$0	PA; DL; QL (84 EA per 28 days)
BALVERSA (4MG ORAL TABLET)	$0	PA; DL; QL (56 EA per 28 days)
BALVERSA (5MG ORAL TABLET)	$0	PA; DL; QL (28 EA per 28 days)
BOSULIF (100MG ORAL CAPSULE)	$0	PA; DL; QL (180 EA per 30 days)
BOSULIF (50MG ORAL CAPSULE)	$0	PA; DL; QL (330 EA per 30 days)
BOSULIF (100MG ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BOSULIF (400MG ORAL TABLET, 500MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
BRAFTOVI (ORAL CAPSULE)	$0	PA; DL
BRUKINSA (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
CABOMETYX (20MG ORAL TABLET, 60MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
CABOMETYX (40MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
CALQUENCE (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
CAPRELSA (ORAL TABLET)	$0	PA; DL
COMETRIQ (100MG DAILY DOSE) (ORAL KIT)	$0	PA; DL; QL (56 EA per 28 days)
COMETRIQ (140MG DAILY DOSE) (ORAL KIT)	$0	PA; DL; QL (112 EA per 28 days)
COMETRIQ (60MG DAILY DOSE) (ORAL KIT)	$0	PA; DL; QL (84 EA per 28 days)
COPIKTRA (ORAL CAPSULE)	$0	PA; DL; QL (56 EA per 28 days)
COTELLIC (ORAL TABLET)	$0	PA; DL; QL (63 EA per 21 days)
DANZITEN (ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
dasatinib (100mg oral tablet, 140mg oral tablet, 70mg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
dasatinib (20mg oral tablet, 50mg oral tablet)	$0	PA; DL; QL (90 EA per 30 days)
dasatinib (80mg oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
DAURISMO (100MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
DAURISMO (25MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
ERIVEDGE (ORAL CAPSULE)	$0	PA; DL
erlotinib hcl (100mg oral tablet, 150mg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
erlotinib hcl (25mg oral tablet)	$0	PA; DL; QL (90 EA per 30 days)
everolimus (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	$0	PA; DL
everolimus (oral tablet soluble)	$0	PA; DL
FOTIVDA (ORAL CAPSULE)	$0	PA; DL; QL (21 EA per 28 days)
FRUZAQLA (1MG ORAL CAPSULE)	$0	PA; DL; QL (84 EA per 28 days)
FRUZAQLA (5MG ORAL CAPSULE)	$0	PA; DL; QL (21 EA per 28 days)
GAVRETO (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
gefitinib (oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
GILOTRIF (ORAL TABLET)	$0	PA; DL
GOMEKLI (1MG ORAL CAPSULE)	$0	PA; DL; QL (126 EA per 28 days)
GOMEKLI (2MG ORAL CAPSULE)	$0	PA; DL; QL (84 EA per 28 days)
GOMEKLI (ORAL TABLET SOLUBLE)	$0	PA; DL; QL (168 EA per 28 days)
HERNEXEOS (ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)
IBRANCE (ORAL CAPSULE)	$0	PA; DL; QL (21 EA per 21 days)
IBRANCE (ORAL TABLET)	$0	PA; DL; QL (21 EA per 21 days)
IBTROZI (ORAL CAPSULE)	$0	PA; DL; QL (90 EA per 30 days)
ICLUSIG (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
IDHIFA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
imatinib mesylate (oral tablet)	$0	QL (90 EA per 30 days)
IMBRUVICA (140MG ORAL CAPSULE)	$0	PA; DL; QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
IMBRUVICA (70MG ORAL CAPSULE)	$0	PA; DL; QL (28 EA per 28 days)
IMBRUVICA (ORAL SUSPENSION)	$0	PA; DL; QL (240 ML per 30 days)
IMBRUVICA (ORAL TABLET)	$0	PA; DL; QL (28 EA per 28 days)
IMKELDI (ORAL SOLUTION)	$0	PA; DL; QL (300 ML per 30 days)
INLYTA (ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
INREBIC (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
ITOVEBI (3MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
ITOVEBI (9MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
JAKAFI (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
JAYPIRCA (100MG ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
JAYPIRCA (50MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
KISQALI (200MG DOSE) (ORAL TABLET)	$0	PA; DL; QL (21 EA per 21 days)
KISQALI (400MG DOSE) (ORAL TABLET)	$0	PA; DL; QL (42 EA per 21 days)
KISQALI (600MG DOSE) (ORAL TABLET)	$0	PA; DL; QL (63 EA per 21 days)
KISQALI FEMARA (400MG DOSE) (200 & 2.5MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (70 EA per 28 days)
KISQALI FEMARA (600MG DOSE) (200 & 2.5MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (91 EA per 28 days)
KOSELUGO (10MG ORAL CAPSULE)	$0	PA; DL; QL (240 EA per 30 days)
KOSELUGO (25MG ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
KRAZATI (ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
lapatinib ditosylate (oral tablet)	$0	PA; DL
LENVIMA 10MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 12MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 14MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 18MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 20MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 24MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 4MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LENVIMA 8MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	$0	PA; DL
LORBRENA (100MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
LORBRENA (25MG ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
LUMAKRAS (120MG ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)
LUMAKRAS (240MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
LUMAKRAS (320MG ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
LYNPARZA (ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
LYTGOBI (12MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (84 EA per 28 days)
LYTGOBI (16MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (112 EA per 28 days)
LYTGOBI (20MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (140 EA per 28 days)
MEKINIST (ORAL SOLUTION RECONSTITUTED)	$0	PA; DL
MEKINIST (ORAL TABLET)	$0	PA; DL
MEKTOVI (ORAL TABLET)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
NERLYNX (ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)
nilotinib hcl (150mg oral capsule)	$0	PA; DL; QL (140 EA per 28 days)
nilotinib hcl (200mg oral capsule)	$0	PA; DL; QL (112 EA per 28 days)
nilotinib hcl (50mg oral capsule)	$0	PA; DL; QL (420 EA per 30 days)
NINLARO (ORAL CAPSULE)	$0	PA; DL; QL (3 EA per 28 days)
ODOMZO (ORAL CAPSULE)	$0	PA; DL
OJEMDA (ORAL SUSPENSION RECONSTITUTED)	$0	PA; DL; QL (96 ML per 28 days)
OJEMDA (ORAL TABLET)	$0	PA; DL; QL (24 EA per 28 days)
OJJAARA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
pazopanib hcl (oral tablet)	$0	PA; DL; QL (120 EA per 30 days)
PEMAZYRE (ORAL TABLET)	$0	PA; DL; QL (14 EA per 21 days)
PIQRAY (200MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (28 EA per 28 days)
PIQRAY (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 28 days)
PIQRAY (300MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (56 EA per 28 days)
QINLOCK (ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
RETEVMO (120MG ORAL TABLET, 160MG ORAL TABLET, 80MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
RETEVMO (40MG ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
REZLIDHIA (ORAL CAPSULE)	$0	PA; DL; QL (60 EA per 30 days)
ROMVIMZA (ORAL CAPSULE)	$0	PA; DL; QL (8 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ROZLYTREK (100MG ORAL CAPSULE)	$0	PA; DL; QL (150 EA per 30 days)
ROZLYTREK (200MG ORAL CAPSULE)	$0	PA; DL; QL (90 EA per 30 days)
ROZLYTREK (ORAL PACKET)	$0	PA; DL; QL (360 EA per 30 days)
RUBRACA (ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
RYDAPT (ORAL CAPSULE)	$0	PA; DL; QL (224 EA per 28 days)
SCEMBLIX (100MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
SCEMBLIX (20MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
SCEMBLIX (40MG ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)
sorafenib tosylate (oral tablet)	$0	PA; DL
STIVARGA (ORAL TABLET)	$0	PA; DL; QL (84 EA per 21 days)
sunitinib malate (12.5mg oral capsule, 25mg oral capsule, 50mg oral capsule)	$0	PA; DL; QL (28 EA per 28 days)
sunitinib malate (37.5mg oral capsule)	$0	PA; DL; QL (56 EA per 28 days)
TABRECTA (ORAL TABLET)	$0	PA; DL; QL (112 EA per 28 days)
TAFINLAR (ORAL CAPSULE)	$0	PA; DL
TAFINLAR (ORAL TABLET SOLUBLE)	$0	PA; DL
TAGRISSO (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
TALZENNA (0.1MG ORAL CAPSULE, 0.35MG ORAL CAPSULE, 0.5MG ORAL CAPSULE, 0.75MG ORAL CAPSULE, 1MG ORAL CAPSULE)	$0	PA; DL; QL (30 EA per 30 days)
TALZENNA (0.25MG ORAL CAPSULE)	$0	PA; DL; QL (90 EA per 30 days)
TAZVERIK (ORAL TABLET)	$0	PA; DL; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TEPMETKO (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
TIBSOVO (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
torpenz (oral tablet)	$0	PA; DL
TRUQAP (ORAL TABLET)	$0	PA; DL; QL (64 EA per 28 days)
TUKYSA (150MG ORAL TABLET)	$0	PA; DL; QL (120 EA per 30 days)
TUKYSA (50MG ORAL TABLET)	$0	PA; DL; QL (360 EA per 30 days)
TURALIO (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
VANFLYTA (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
VENCLEXTA (100MG ORAL TABLET)	$0	PA; DL; QL (180 EA per 30 days)
VENCLEXTA (10MG ORAL TABLET)	$0	PA; DL; QL (14 EA per 7 days)
VENCLEXTA (50MG ORAL TABLET)	$0	PA; DL; QL (7 EA per 7 days)
VENCLEXTA STARTING PACK (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (84 EA per 365 days)
VERZENIO (ORAL TABLET)	$0	PA; DL; QL (56 EA per 28 days)
VITRAKVI (100MG ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
VITRAKVI (25MG ORAL CAPSULE)	$0	PA; DL; QL (180 EA per 30 days)
VITRAKVI (ORAL SOLUTION)	$0	PA; DL; QL (600 ML per 30 days)
VIZIMPRO (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
VORANIGO (10MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
VORANIGO (40MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
XALKORI (ORAL CAPSULE)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
XALKORI (ORAL CAPSULE SPRINKLE)	$0	PA; DL
XOSPATA (ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
XPOVIO (100MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (8 EA per 28 days)
XPOVIO (40MG ONCE WEEKLY) (10MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (16 EA per 28 days)
XPOVIO (40MG ONCE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (4 EA per 28 days)
XPOVIO (40MG TWICE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (8 EA per 28 days)
XPOVIO (60MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (4 EA per 28 days)
XPOVIO (60MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (24 EA per 28 days)
XPOVIO (80MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (8 EA per 28 days)
XPOVIO (80MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (32 EA per 28 days)
ZEJULA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
ZELBORAF (ORAL TABLET)	$0	PA; DL
ZYDELIG (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
ZYKADIA (ORAL TABLET)	$0	PA; DL; QL (84 EA per 28 days)
Retinoids		
bexarotene (external gel)	$0	PA; DL; QL (60 GM per 30 days)
bexarotene (oral capsule)	$0	PA; DL
PANRETIN (EXTERNAL GEL)	$0	PA; DL
tretinoin (oral capsule)	$0	DL
Treatment Adjuncts		
leucovorin calcium (10mg oral tablet, 15mg oral tablet, 5mg oral tablet)	$0	
leucovorin calcium (25mg oral tablet)	$0	DL
mesna (oral tablet)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Antiparasitics		
Anthelmintics		
albendazole (oral tablet)	$0	DL; QL (480 EA per 30 days)
ivermectin (3mg oral tablet)	$0	PA
praziquantel (oral tablet)	$0	DL
Antiprotozoals		
atovaquone (oral suspension)	$0	DL; QL (420 ML per 30 days)
atovaquone-proguanil hcl (oral tablet)	$0	
chloroquine phosphate (oral tablet)	$0	DL; QL (60 EA per 30 days)
COARTEM (ORAL TABLET)	$0	DL
hydroxychloroquine sulfate (200mg oral tablet)	$0	QL (120 EA per 30 days)
IMPAVIDO (ORAL CAPSULE)	$0	DL
mefloquine hcl (oral tablet)	$0	
nitazoxanide (oral tablet)	$0	DL; QL (60 EA per 30 days)
pentamidine isethionate (inhalation solution reconstituted)	$0	B/D, PA; DL; QL (1 EA per 28 days)
pentamidine isethionate (injection solution reconstituted)	$0	DL
primaquine phosphate (oral tablet)	$0	DL
pyrimethamine (oral tablet)	$0	DL
quinine sulfate (oral capsule)	$0	PA; DL
Antiparkinson Agents		
Anticholinergics		
benztropine mesylate (oral tablet)	$0	
trihexyphenidyl hcl (oral solution)	$0	
trihexyphenidyl hcl (oral tablet)	$0	
Antiparkinson Agents, Other		
amantadine hcl (oral capsule)	$0	
amantadine hcl (oral solution)	$0	
amantadine hcl (oral tablet)	$0	
carbidopa-levodopa-entacapone (oral tablet)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
entacapone (oral tablet)	$0	DL
Dopamine Agonists		
NEUPRO (TRANSDERMAL PATCH 24 HOUR)	$0	DL
pramipexole dihydrochloride (oral tablet immediate release)	$0	
ropinirole hcl (oral tablet immediate release)	$0	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
carbidopa (oral tablet)	$0	DL
carbidopa-levodopa er (oral tablet extended release)	$0	
carbidopa-levodopa (oral tablet immediate release)	$0	
carbidopa-levodopa odt (oral tablet dispersible)	$0	
INBRIJA (INHALATION CAPSULE)	$0	PA; DL
Monoamine Oxidase B (MAO-B) Inhibitors		
rasagiline mesylate (oral tablet)	$0	DL
selegiline hcl (oral capsule)	$0	
selegiline hcl (oral tablet)	$0	
Antipsychotics		
1st Generation/Typical		
chlorpromazine hcl (oral concentrate)	$0	DL
chlorpromazine hcl (oral tablet)	$0	DL
fluphenazine decanoate (injection solution)	$0	DL
fluphenazine hcl (2.5mg/ml injection solution)	$0	DL
fluphenazine hcl (5mg/ml oral concentrate)	$0	
fluphenazine hcl (2.5mg/5ml oral elixir)	$0	DL
fluphenazine hcl (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)	$0	
haloperidol decanoate (intramuscular solution)	$0	DL
haloperidol lactate (injection solution)	$0	DL
haloperidol lactate (2mg/ml oral concentrate)	$0	
haloperidol (oral tablet)	$0	
loxapine succinate (oral capsule)	$0	
molindone hcl (10mg oral tablet, 25mg oral tablet)	$0	DL
molindone hcl (5mg oral tablet)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
pimozide (oral tablet)	$0	DL
thioridazine hcl (oral tablet)	$0	
thiothixene (oral capsule)	$0	
trifluoperazine hcl (oral tablet)	$0	
2nd Generation/Atypical		
CAPLYTA (ORAL CAPSULE)	$0	DL; QL (30 EA per 30 days)
FANAPT (10MG ORAL TABLET, 12MG ORAL TABLET, 1MG ORAL TABLET, 2MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	$0	ST; DL; QL (60 EA per 30 days)
FANAPT TITRATION PACK A (ORAL TABLET)	$0	ST; DL; QL (16 EA per 365 days)
INVEGA HAFYERA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	DL
INVEGA SUSTENNA (117MG/0.75ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 156MG/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 234MG/1.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 78MG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	DL
INVEGA SUSTENNA (39MG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	DL
INVEGA TRINZA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	DL
NUPLAZID (ORAL CAPSULE)	$0	PA; DL; QL (30 EA per 30 days)
NUPLAZID (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
paliperidone er (1.5mg oral tablet extended release 24 hour, 3mg oral tablet extended release 24 hour, 9mg oral tablet extended release 24 hour)	$0	DL; QL (30 EA per 30 days)
paliperidone er (6mg oral tablet extended release 24 hour)	$0	DL; QL (60 EA per 30 days)
REXULTI (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
VRAYLAR (1.5MG ORAL CAPSULE, 3MG ORAL CAPSULE, 4.5MG ORAL CAPSULE, 6MG ORAL CAPSULE)	$0	DL; QL (30 EA per 30 days)
Treatment-Resistant		
clozapine (100mg oral tablet, 200mg oral tablet, 25mg oral tablet, 50mg oral tablet)	$0	
clozapine odt (100mg oral tablet dispersible)	$0	DL; QL (270 EA per 30 days)
clozapine odt (12.5mg oral tablet dispersible)	$0	DL; QL (60 EA per 30 days)
clozapine odt (150mg oral tablet dispersible)	$0	DL; QL (180 EA per 30 days)
clozapine odt (200mg oral tablet dispersible)	$0	DL; QL (120 EA per 30 days)
clozapine odt (25mg oral tablet dispersible)	$0	DL; QL (90 EA per 30 days)
VERSACLOZ (ORAL SUSPENSION)	$0	DL
Antispasticity Agents		
Antispasticity Agents		
baclofen (10mg oral tablet, 20mg oral tablet, 5mg oral tablet)	$0	
dantrolene sodium (oral capsule)	$0	DL
tizanidine hcl (oral tablet)	$0	
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
LIVTENCITY (ORAL TABLET)	$0	PA; DL; QL (360 EA per 30 days)
PREVYMIS (ORAL PACKET)	$0	PA; DL; QL (120 EA per 30 days)
PREVYMIS (ORAL TABLET)	$0	PA; DL; QL (28 EA per 28 days)
valganciclovir hcl (oral solution reconstituted)	$0	DL; QL (1080 ML per 30 days)
valganciclovir hcl (oral tablet)	$0	QL (120 EA per 30 days)
ZIRGAN (OPHTHALMIC GEL)	$0	DL
Anti-hepatitis B (HBV) Agents		
adefovir dipivoxil (oral tablet)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BARACLUDE (ORAL SOLUTION)	$0	DL
entecavir (oral tablet)	$0	DL
lamivudine (100mg oral tablet)	$0	
VEMLIDY (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
Anti-hepatitis C (HCV) Agents		
MAVYRET (ORAL PACKET)	$0	PA; DL; QL (140 EA per 28 days)
MAVYRET (ORAL TABLET)	$0	PA; DL; QL (84 EA per 28 days)
ribavirin (oral tablet)	$0	
SOFOSBUVIR-VELPATASVIR (ORAL TABLET)	$0	PA; DL; QL (28 EA per 28 days)
VOSEVI (ORAL TABLET)	$0	PA; DL; QL (28 EA per 28 days)
Antiherpetic Agents		
acyclovir (external ointment)	$0	DL; QL (30 GM per 30 days)
acyclovir (oral capsule)	$0	
acyclovir (200mg/5ml oral suspension)	$0	
acyclovir (oral tablet)	$0	
acyclovir sodium (intravenous solution)	$0	B/D, PA; DL
famciclovir (125mg oral tablet, 250mg oral tablet)	$0	QL (60 EA per 30 days)
famciclovir (500mg oral tablet)	$0	QL (90 EA per 30 days)
valacyclovir hcl (1gm oral tablet)	$0	QL (120 EA per 30 days)
valacyclovir hcl (500mg oral tablet)	$0	QL (60 EA per 30 days)
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
DOVATO (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
GENVOYA (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ISENTRESS HD (ORAL TABLET)	$0	DL; QL (60 EA per 30 days)
ISENTRESS (ORAL PACKET)	$0	DL; QL (60 EA per 30 days)
ISENTRESS (ORAL TABLET)	$0	DL; QL (60 EA per 30 days)
ISENTRESS (100MG ORAL TABLET CHEWABLE)	$0	DL; QL (180 EA per 30 days)
ISENTRESS (25MG ORAL TABLET CHEWABLE)	$0	QL (180 EA per 30 days)
JULUCA (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
STRIBILD (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
TIVICAY (50MG ORAL TABLET)	$0	DL; QL (60 EA per 30 days)
TIVICAY PD (ORAL TABLET SOLUBLE)	$0	DL; QL (180 EA per 30 days)
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
DELSTRIGO (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
EDURANT (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
EDURANT PED (ORAL TABLET SOLUBLE)	$0	DL; QL (180 EA per 30 days)
efavirenz (oral tablet)	$0	DL; QL (30 EA per 30 days)
efavirenz-emtricitabine-tenofovir (oral tablet)	$0	DL; QL (30 EA per 30 days)
efavirenz-lamivudine-tenofovir (oral tablet)	$0	DL; QL (30 EA per 30 days)
emtricitabine-rilpivirine-tenofovir df (oral tablet)	$0	DL; QL (30 EA per 30 days)
etravirine (oral tablet)	$0	DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
INTELENCE (25MG ORAL TABLET)	$0	DL; QL (120 EA per 30 days)
nevirapine er (oral tablet extended release 24 hour)	$0	DL; QL (30 EA per 30 days)
nevirapine (oral suspension)	$0	DL; QL (1200 ML per 30 days)
nevirapine (oral tablet immediate release)	$0	QL (60 EA per 30 days)
PIFELTRO (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
abacavir sulfate (oral solution)	$0	DL; QL (960 ML per 30 days)
abacavir sulfate (oral tablet)	$0	DL; QL (60 EA per 30 days)
abacavir sulfate-lamivudine (oral tablet)	$0	DL; QL (30 EA per 30 days)
CIMDUO (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
DESCOVY (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
emtricitabine (oral capsule)	$0	DL; QL (30 EA per 30 days)
emtricitabine-tenofovir disoproxil fumarate (oral tablet)	$0	DL; QL (30 EA per 30 days)
EMTRIVA (ORAL SOLUTION)	$0	DL; QL (850 ML per 30 days)
lamivudine (10mg/ml oral solution)	$0	QL (960 ML per 30 days)
lamivudine (150mg oral tablet)	$0	QL (60 EA per 30 days)
lamivudine (300mg oral tablet)	$0	QL (30 EA per 30 days)
lamivudine-zidovudine (oral tablet)	$0	DL; QL (60 EA per 30 days)
ODEFSEY (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
tenofovir disoproxil fumarate (oral tablet)	$0	DL; QL (30 EA per 30 days)
TRIUMEQ (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
TRIUMEQ PD (ORAL TABLET SOLUBLE)	$0	DL; QL (180 EA per 30 days)
VIREAD (ORAL POWDER)	$0	DL; QL (240 GM per 30 days)
VIREAD (150MG ORAL TABLET, 200MG ORAL TABLET, 250MG ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
zidovudine (oral capsule)	$0	QL (180 EA per 30 days)
zidovudine (oral syrup)	$0	QL (1920 ML per 30 days)
zidovudine (oral tablet)	$0	QL (60 EA per 30 days)
Anti-HIV Agents, Other		
maraviroc (150mg oral tablet)	$0	DL; QL (60 EA per 30 days)
maraviroc (300mg oral tablet)	$0	DL; QL (120 EA per 30 days)
RUKOBIA (ORAL TABLET EXTENDED RELEASE 12 HOUR)	$0	DL; QL (60 EA per 30 days)
SELZENTRY (ORAL SOLUTION)	$0	DL; QL (1840 ML per 30 days)
SUNLENCA (ORAL TABLET)	$0	DL; QL (24 EA per 168 days)
SUNLENCA (4 X 300MG ORAL TABLET THERAPY PACK)	$0	DL; QL (8 EA per 365 days)
SUNLENCA (5 X 300MG ORAL TABLET THERAPY PACK)	$0	DL; QL (10 EA per 365 days)
TYBOST (ORAL TABLET)	$0	QL (30 EA per 30 days)
Anti-HIV Agents, Protease Inhibitors		
APTIVUS (ORAL CAPSULE)	$0	DL; QL (120 EA per 30 days)
atazanavir sulfate (150mg oral capsule, 300mg oral capsule)	$0	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
atazanavir sulfate (200mg oral capsule)	$0	DL; QL (60 EA per 30 days)
darunavir (600mg oral tablet)	$0	DL; QL (60 EA per 30 days)
darunavir (800mg oral tablet)	$0	DL; QL (30 EA per 30 days)
EVOTAZ (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
fosamprenavir calcium (oral tablet)	$0	DL; QL (120 EA per 30 days)
KALETRA (ORAL SOLUTION)	$0	DL; QL (480 ML per 30 days)
lopinavir-ritonavir (100-25mg oral tablet)	$0	DL; QL (240 EA per 30 days)
lopinavir-ritonavir (200-50mg oral tablet)	$0	DL; QL (120 EA per 30 days)
NORVIR (ORAL PACKET)	$0	DL; QL (360 EA per 30 days)
PREZCOBIX (800-150MG ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
PREZISTA (ORAL SUSPENSION)	$0	DL; QL (400 ML per 30 days)
PREZISTA (150MG ORAL TABLET)	$0	DL; QL (180 EA per 30 days)
PREZISTA (75MG ORAL TABLET)	$0	DL; QL (300 EA per 30 days)
REYATAZ (ORAL PACKET)	$0	DL; QL (180 EA per 30 days)
ritonavir (oral tablet)	$0	QL (360 EA per 30 days)
SYMTUZA (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
VIRACEPT (250MG ORAL TABLET)	$0	DL; QL (300 EA per 30 days)
VIRACEPT (625MG ORAL TABLET)	$0	DL; QL (120 EA per 30 days)
Anti-influenza Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
oseltamivir phosphate (oral capsule)	$0	QL (60 EA per 30 days)
oseltamivir phosphate (oral suspension reconstituted)	$0	QL (780 ML per 30 days)
RELENZA DISKHALER (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (60 EA per 30 days)
rimantadine hcl (oral tablet)	$0	DL
XOFLUZA (40MG DOSE) (ORAL TABLET THERAPY PACK)	$0	QL (2 EA per 30 days)
XOFLUZA (80MG DOSE) (ORAL TABLET THERAPY PACK)	$0	QL (1 EA per 30 days)
Antiviral, Coronavirus Agents		
PAXLOVID (150/100MG) (ORAL TABLET THERAPY PACK)	$0	DL; QL (20 EA per 5 days)
PAXLOVID (300/100MG) (ORAL TABLET THERAPY PACK)	$0	DL; QL (30 EA per 5 days)
PAXLOVID (300/100MG & 150/100MG) (ORAL TABLET THERAPY PACK)	$0	DL; QL (11 EA per 5 days)
Anxiolytics		
Anxiolytics, Other		
buspirone hcl (oral tablet)	$0	
hydroxyzine hcl (oral syrup)	$0	DL
hydroxyzine hcl (oral tablet)	$0	DL
hydroxyzine pamoate (oral capsule)	$0	DL
Benzodiazepines		
alprazolam (0.25mg oral tablet immediate release, 0.5mg oral tablet immediate release, 1mg oral tablet immediate release)	$0	PA; QL (120 EA per 30 days)
alprazolam (2mg oral tablet immediate release)	$0	PA; QL (150 EA per 30 days)
clonazepam (0.5mg oral tablet, 1mg oral tablet)	$0	QL (120 EA per 30 days)
clonazepam (2mg oral tablet)	$0	QL (300 EA per 30 days)
clonazepam odt (0.125mg oral tablet dispersible, 0.25mg oral tablet dispersible, 0.5mg oral tablet dispersible, 1mg oral tablet dispersible)	$0	DL; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
clonazepam odt (2mg oral tablet dispersible)	$0	DL; QL (300 EA per 30 days)
clorazepate dipotassium (15mg oral tablet)	$0	PA; DL; QL (180 EA per 30 days)
clorazepate dipotassium (3.75mg oral tablet)	$0	PA; DL; QL (720 EA per 30 days)
clorazepate dipotassium (7.5mg oral tablet)	$0	PA; DL; QL (360 EA per 30 days)
diazepam intensol (oral concentrate)	$0	PA; DL; QL (240 ML per 30 days)
diazepam (5mg/5ml oral solution)	$0	PA; DL
diazepam (10mg oral tablet, 2mg oral tablet, 5mg oral tablet)	$0	PA; QL (120 EA per 30 days)
lorazepam (0.5mg oral tablet, 1mg oral tablet)	$0	QL (120 EA per 30 days)
lorazepam (2mg oral tablet)	$0	QL (150 EA per 30 days)
Bipolar Agents		
Bipolar Agents, Other		
ABILIFY ASIMTUFII (720MG/2.4ML INTRAMUSCULAR PREFILLED SYRINGE)	$0	DL; QL (2.4 ML per 56 days)
ABILIFY ASIMTUFII (960MG/3.2ML INTRAMUSCULAR PREFILLED SYRINGE)	$0	DL; QL (3.2 ML per 56 days)
ABILIFY MAINTENA (INTRAMUSCULAR PREFILLED SYRINGE)	$0	DL
ABILIFY MAINTENA (INTRAMUSCULAR SUSPENSION RECONSTITUTED ER)	$0	DL
aripiprazole (1mg/ml oral solution)	$0	DL; QL (750 ML per 30 days)
aripiprazole (10mg oral tablet, 15mg oral tablet, 20mg oral tablet, 2mg oral tablet, 30mg oral tablet, 5mg oral tablet)	$0	QL (30 EA per 30 days)
aripiprazole odt (10mg oral tablet dispersible, 15mg oral tablet dispersible)	$0	DL; QL (60 EA per 30 days)
ARISTADA INITIO (INTRAMUSCULAR PREFILLED SYRINGE)	$0	DL
ARISTADA (INTRAMUSCULAR PREFILLED SYRINGE)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
asenapine maleate (tablet sublingual)	$0	DL; QL (60 EA per 30 days)
lurasidone hcl (120mg oral tablet, 20mg oral tablet, 40mg oral tablet, 60mg oral tablet)	$0	QL (30 EA per 30 days)
lurasidone hcl (80mg oral tablet)	$0	QL (60 EA per 30 days)
olanzapine (10mg intramuscular solution reconstituted)	$0	DL
olanzapine (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	$0	QL (60 EA per 30 days)
olanzapine (15mg oral tablet, 20mg oral tablet)	$0	QL (30 EA per 30 days)
olanzapine odt (10mg oral tablet dispersible, 5mg oral tablet dispersible)	$0	DL; QL (60 EA per 30 days)
olanzapine odt (15mg oral tablet dispersible, 20mg oral tablet dispersible)	$0	DL; QL (30 EA per 30 days)
OPIPZA (10MG ORAL FILM, 5MG ORAL FILM)	$0	PA; DL; QL (90 EA per 30 days)
OPIPZA (2MG ORAL FILM)	$0	PA; DL; QL (30 EA per 30 days)
quetiapine fumarate er (150mg oral tablet extended release 24 hour, 200mg oral tablet extended release 24 hour)	$0	QL (30 EA per 30 days)
quetiapine fumarate er (300mg oral tablet extended release 24 hour, 400mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour)	$0	QL (60 EA per 30 days)
quetiapine fumarate (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 50mg oral tablet immediate release)	$0	QL (90 EA per 30 days)
quetiapine fumarate (25mg oral tablet immediate release)	$0	QL (120 EA per 30 days)
quetiapine fumarate (300mg oral tablet immediate release, 400mg oral tablet immediate release)	$0	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
risperidone microspheres er (12.5mg intramuscular suspension reconstituted er, 25mg intramuscular suspension reconstituted er, 37.5mg intramuscular suspension reconstituted er)	$0	DL
risperidone microspheres er (50mg intramuscular suspension reconstituted er)	$0	DL
risperidone (oral solution)	$0	DL
risperidone (oral tablet)	$0	
risperidone odt (oral tablet dispersible)	$0	DL
SECUADO (TRANSDERMAL PATCH 24 HOUR)	$0	ST; DL; QL (30 EA per 30 days)
ziprasidone hcl (oral capsule)	$0	QL (60 EA per 30 days)
ziprasidone mesylate (intramuscular solution reconstituted)	$0	DL
Mood Stabilizers		
divalproex sodium er (oral tablet extended release 24 hour)	$0	
divalproex sodium (oral capsule delayed release sprinkle)	$0	
divalproex sodium (oral tablet delayed release)	$0	
lithium carbonate er (oral tablet extended release)	$0	
lithium carbonate (oral capsule)	$0	
lithium carbonate (oral tablet immediate release)	$0	
lithium (oral solution)	$0	
Blood Glucose Regulators		
Antidiabetic Agents		
acarbose (100mg oral tablet)	$0	QL (90 EA per 30 days)
acarbose (25mg oral tablet)	$0	QL (360 EA per 30 days)
acarbose (50mg oral tablet)	$0	QL (180 EA per 30 days)
glimepiride (1mg oral tablet)	$0	QL (240 EA per 30 days)
glimepiride (2mg oral tablet)	$0	QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
glimepiride (4mg oral tablet)	$0	QL (60 EA per 30 days)
glipizide er (10mg oral tablet extended release 24 hour)	$0	QL (60 EA per 30 days)
glipizide er (2.5mg oral tablet extended release 24 hour)	$0	QL (240 EA per 30 days)
glipizide er (5mg oral tablet extended release 24 hour)	$0	QL (120 EA per 30 days)
glipizide (10mg oral tablet immediate release)	$0	QL (120 EA per 30 days)
glipizide (5mg oral tablet immediate release)	$0	QL (240 EA per 30 days)
glipizide-metformin hcl (2.5-250mg oral tablet)	$0	QL (240 EA per 30 days)
glipizide-metformin hcl (2.5-500mg oral tablet, 5-500mg oral tablet)	$0	QL (120 EA per 30 days)
GLYXAMBI (ORAL TABLET)	$0	QL (30 EA per 30 days)
JANUMET (ORAL TABLET IMMEDIATE RELEASE)	$0	QL (60 EA per 30 days)
JANUMET XR (100-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 50-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (30 EA per 30 days)
JANUMET XR (50-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (60 EA per 30 days)
JANUVIA (ORAL TABLET)	$0	QL (30 EA per 30 days)
JENTADUETO (2.5-1000MG ORAL TABLET IMMEDIATE RELEASE, 2.5-500MG ORAL TABLET IMMEDIATE RELEASE)	$0	QL (60 EA per 30 days)
JENTADUETO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (60 EA per 30 days)
JENTADUETO XR (5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (30 EA per 30 days)
metformin hcl er (500mg oral tablet extended release 24 hour) (generic glucophage xr)	$0	QL (120 EA per 30 days)
metformin hcl er (750mg oral tablet extended release 24 hour) (generic glucophage xr)	$0	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
metformin hcl (oral solution)	$0	QL (765 ML per 30 days)
metformin hcl (1000mg oral tablet immediate release)	$0	QL (75 EA per 30 days)
metformin hcl (500mg oral tablet immediate release)	$0	QL (150 EA per 30 days)
metformin hcl (850mg oral tablet immediate release)	$0	QL (90 EA per 30 days)
miglitol (100mg oral tablet)	$0	DL; QL (90 EA per 30 days)
miglitol (25mg oral tablet)	$0	DL; QL (360 EA per 30 days)
miglitol (50mg oral tablet)	$0	DL; QL (180 EA per 30 days)
MOUNJARO (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; QL (2 ML per 28 days)
nateglinide (120mg oral tablet)	$0	QL (90 EA per 30 days)
nateglinide (60mg oral tablet)	$0	QL (180 EA per 30 days)
OZEMPIC (0.25MG/DOSE OR 0.5MG/DOSE) (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; QL (3 ML per 28 days)
OZEMPIC (1MG/DOSE) (4MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; QL (3 ML per 28 days)
OZEMPIC (2MG/DOSE) (8MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; QL (3 ML per 28 days)
pioglitazone hcl (oral tablet)	$0	QL (30 EA per 30 days)
pioglitazone hcl-glimepiride (oral tablet)	$0	QL (30 EA per 30 days)
pioglitazone hcl-metformin hcl (oral tablet)	$0	QL (90 EA per 30 days)
repaglinide (0.5mg oral tablet)	$0	QL (960 EA per 30 days)
repaglinide (1mg oral tablet)	$0	QL (480 EA per 30 days)
repaglinide (2mg oral tablet)	$0	QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
RYBELSUS (ORAL TABLET)	$0	PA; QL (30 EA per 30 days)
SOLIQUA (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	QL (15 ML per 24 days)
SYNJARDY (ORAL TABLET IMMEDIATE RELEASE)	$0	QL (60 EA per 30 days)
SYNJARDY XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 12.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (60 EA per 30 days)
SYNJARDY XR (25-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (30 EA per 30 days)
TRADJENTA (ORAL TABLET)	$0	QL (30 EA per 30 days)
TRIJARDY XR (10-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 25-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (30 EA per 30 days)
TRIJARDY XR (12.5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (60 EA per 30 days)
TRULICITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; QL (2 ML per 28 days)
XIGDUO XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 10-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (30 EA per 30 days)
XIGDUO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	QL (60 EA per 30 days)
Glycemic Agents		
BAQSIMI ONE PACK (NASAL POWDER)	$0	
diazoxide (oral suspension)	$0	DL
glucagon (injection kit) (lilly)	$0	
GVOKE HYPOPEN 2-PACK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	
GVOKE KIT (SUBCUTANEOUS SOLUTION)	$0	
GVOKE PFS (1MG/0.2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Insulins		
FIASP FLEXTOUCH (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
FIASP (INJECTION SOLUTION)	$0	
FIASP PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	
HUMALOG (INJECTION SOLUTION)	$0	
HUMALOG JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
HUMALOG KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
HUMALOG MIX 50/50 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	$0	
HUMALOG MIX 75/25 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	$0	
HUMALOG MIX 75/25 (SUBCUTANEOUS SUSPENSION)	$0	
HUMALOG (SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	
HUMULIN 70/30 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	$0	
HUMULIN 70/30 (SUBCUTANEOUS SUSPENSION)	$0	
HUMULIN N KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	$0	
HUMULIN N (SUBCUTANEOUS SUSPENSION)	$0	
HUMULIN R (INJECTION SOLUTION)	$0	
HUMULIN R U-500 KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
INSULIN LISPRO (1 UNIT DIAL) (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	$0	
INSULIN LISPRO (INJECTION SOLUTION) (BRAND EQUIVALENT HUMALOG)	$0	
INSULIN LISPRO JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
INSULIN LISPRO PROT & LISPRO (SUBCUTANEOUS SUSPENSION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	$0	
LANTUS SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
LANTUS (SUBCUTANEOUS SOLUTION)	$0	
LYUMJEV (INJECTION SOLUTION)	$0	
LYUMJEV KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
NOVOLIN R FLEXPEN (INJECTION SOLUTION PEN-INJECTOR)	$0	
NOVOLOG FLEXPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
NOVOLOG (INJECTION SOLUTION)	$0	
NOVOLOG PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	
TOUJEO MAX SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
TOUJEO SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	
Blood Products and Modifiers		
Anticoagulants		
dabigatran etexilate mesylate (oral capsule)	$0	DL; QL (60 EA per 30 days)
ELIQUIS (ORAL TABLET)	$0	QL (60 EA per 30 days)
ELIQUIS STARTER PACK (ORAL TABLET)	$0	QL (148 EA per 365 days)
enoxaparin sodium (100mg/ml injection solution prefilled syringe, 150mg/ml injection solution prefilled syringe)	$0	DL; QL (60 ML per 30 days)
enoxaparin sodium (120mg/0.8ml injection solution prefilled syringe, 80mg/0.8ml injection solution prefilled syringe)	$0	DL; QL (48 ML per 30 days)
enoxaparin sodium (30mg/0.3ml injection solution prefilled syringe)	$0	DL; QL (18 ML per 30 days)
enoxaparin sodium (40mg/0.4ml injection solution prefilled syringe)	$0	DL; QL (24 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
enoxaparin sodium (60mg/0.6ml injection solution prefilled syringe)	$0	DL; QL (36 ML per 30 days)
fondaparinux sodium (subcutaneous solution)	$0	DL
heparin sodium (porcine) (injection solution)	$0	B/D, PA
jantoven (oral tablet)	$0	
rivaroxaban (oral tablet)	$0	QL (360 EA per 30 days)
warfarin sodium (oral tablet)	$0	
XARELTO (ORAL SUSPENSION RECONSTITUTED)	$0	QL (600 ML per 30 days)
XARELTO (10MG ORAL TABLET, 20MG ORAL TABLET)	$0	QL (30 EA per 30 days)
XARELTO (15MG ORAL TABLET, 2.5MG ORAL TABLET)	$0	QL (60 EA per 30 days)
XARELTO STARTER PACK (ORAL TABLET THERAPY PACK)	$0	QL (102 EA per 365 days)
Blood Products and Modifiers, Other		
anagrelide hcl (oral capsule)	$0	
ARANESP (ALBUMIN FREE) (100MCG/ML INJECTION SOLUTION, 200MCG/ML INJECTION SOLUTION)	$0	PA; DL
ARANESP (ALBUMIN FREE) (25MCG/ML INJECTION SOLUTION, 40MCG/ML INJECTION SOLUTION, 60MCG/ML INJECTION SOLUTION)	$0	PA; DL
ARANESP (ALBUMIN FREE) (100MCG/0.5ML INJECTION SOLUTION PREFILLED SYRINGE, 150MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE, 200MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 300MCG/0.6ML INJECTION SOLUTION PREFILLED SYRINGE, 500MCG/ML INJECTION SOLUTION PREFILLED SYRINGE)	$0	PA; DL
ARANESP (ALBUMIN FREE) (10MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 25MCG/0.42ML INJECTION SOLUTION PREFILLED SYRINGE, 40MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 60MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
eltrombopag olamine (oral packet)	$0	PA; DL; QL (180 EA per 30 days)
eltrombopag olamine (12.5mg oral tablet, 25mg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
eltrombopag olamine (50mg oral tablet, 75mg oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
NEULASTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
PROCRIT (10000UNIT/ML INJECTION SOLUTION, 2000UNIT/ML INJECTION SOLUTION, 3000UNIT/ML INJECTION SOLUTION, 4000UNIT/ML INJECTION SOLUTION)	$0	PA; DL
PROCRIT (20000UNIT/ML INJECTION SOLUTION, 40000UNIT/ML INJECTION SOLUTION)	$0	PA; DL
UDENYCA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
UDENYCA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
XOLREMDI (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
ZARXIO (INJECTION SOLUTION PREFILLED SYRINGE)	$0	DL
Hemostasis Agents		
tranexamic acid (oral tablet)	$0	
Platelet Modifying Agents		
aspirin-dipyridamole er (oral capsule extended release 12 hour)	$0	QL (60 EA per 30 days)
CABLIVI (INJECTION KIT)	$0	PA; DL; QL (30 EA per 30 days)
cilostazol (oral tablet)	$0	
clopidogrel bisulfate (75mg oral tablet)	$0	QL (30 EA per 30 days)
DOPTELET (ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
prasugrel hcl (oral tablet)	$0	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ticagrelor (oral tablet)	$0	QL (60 EA per 30 days)
Cardiovascular Agents		
Alpha-adrenergic Agonists		
clonidine hcl (oral tablet immediate release)	$0	
clonidine (transdermal patch weekly)	$0	DL
droxidopa (100mg oral capsule)	$0	PA; DL; QL (90 EA per 30 days)
droxidopa (200mg oral capsule, 300mg oral capsule)	$0	PA; DL; QL (180 EA per 30 days)
midodrine hcl (oral tablet)	$0	
Alpha-adrenergic Blocking Agents		
doxazosin mesylate (oral tablet)	$0	
prazosin hcl (oral capsule)	$0	
Angiotensin II Receptor Antagonists		
candesartan cilexetil (oral tablet)	$0	
EDARBI (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
irbesartan (oral tablet)	$0	
losartan potassium (oral tablet)	$0	
olmesartan medoxomil (20mg oral tablet, 40mg oral tablet)	$0	QL (30 EA per 30 days)
olmesartan medoxomil (5mg oral tablet)	$0	QL (60 EA per 30 days)
telmisartan (oral tablet)	$0	QL (30 EA per 30 days)
valsartan (160mg oral tablet, 40mg oral tablet, 80mg oral tablet)	$0	QL (60 EA per 30 days)
valsartan (320mg oral tablet)	$0	QL (30 EA per 30 days)
Angiotensin-converting Enzyme (ACE) Inhibitors		
benazepril hcl (oral tablet)	$0	
captopril (100mg oral tablet)	$0	QL (120 EA per 30 days)
captopril (12.5mg oral tablet, 25mg oral tablet)	$0	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
captopril (50mg oral tablet)	$0	QL (270 EA per 30 days)
enalapril maleate (oral tablet)	$0	QL (60 EA per 30 days)
fosinopril sodium (oral tablet)	$0	
lisinopril (oral tablet)	$0	QL (60 EA per 30 days)
moexipril hcl (oral tablet)	$0	
perindopril erbumine (oral tablet)	$0	
quinapril hcl (oral tablet)	$0	
ramipril (oral capsule)	$0	
trandolapril (oral tablet)	$0	
Antiarrhythmics		
amiodarone hcl (200mg oral tablet)	$0	
dofetilide (125mcg oral capsule)	$0	QL (180 EA per 30 days)
dofetilide (250mcg oral capsule, 500mcg oral capsule)	$0	QL (60 EA per 30 days)
flecainide acetate (oral tablet)	$0	
mexiletine hcl (oral capsule)	$0	
MULTAQ (ORAL TABLET)	$0	QL (60 EA per 30 days)
propafenone hcl er (oral capsule extended release 12 hour)	$0	DL
propafenone hcl (oral tablet)	$0	
quinidine gluconate er (oral tablet extended release)	$0	DL
quinidine sulfate (oral tablet)	$0	
sotalol hcl (af) (oral tablet)	$0	
sotalol hcl (oral tablet)	$0	
Beta-adrenergic Blocking Agents		
acebutolol hcl (oral capsule)	$0	
atenolol (oral tablet)	$0	
betaxolol hcl (oral tablet)	$0	
bisoprolol fumarate (oral tablet)	$0	
carvedilol (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
labetalol hcl (100mg oral tablet, 200mg oral tablet, 300mg oral tablet)	$0	
metoprolol succinate er (oral tablet extended release 24 hour)	$0	
metoprolol tartrate (oral tablet)	$0	
nadolol (oral tablet)	$0	DL
nebivolol hcl (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)	$0	QL (30 EA per 30 days)
nebivolol hcl (20mg oral tablet)	$0	QL (60 EA per 30 days)
pindolol (oral tablet)	$0	
propranolol hcl er (oral capsule extended release 24 hour)	$0	
propranolol hcl (oral solution)	$0	
propranolol hcl (oral tablet)	$0	
Calcium Channel Blocking Agents, Dihydropyridines		
amlodipine besylate (oral tablet)	$0	
felodipine er (oral tablet extended release 24 hour)	$0	
nicardipine hcl (oral capsule)	$0	DL
nifedipine er (oral tablet extended release 24 hour)	$0	QL (60 EA per 30 days)
nifedipine er osmotic release (oral tablet extended release 24 hour)	$0	QL (60 EA per 30 days)
nimodipine (oral capsule)	$0	DL
Calcium Channel Blocking Agents, Nondihydropyridines		
cartia xt (oral capsule extended release 24 hour)	$0	
diltiazem hcl er beads (360mg oral capsule extended release 24 hour, 420mg oral capsule extended release 24 hour)	$0	
diltiazem hcl er coated beads (120mg oral capsule extended release 24 hour, 180mg oral capsule extended release 24 hour, 240mg oral capsule extended release 24 hour, 300mg oral capsule extended release 24 hour)	$0	
diltiazem hcl er (oral capsule extended release 12 hour)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
diltiazem hcl er (oral tablet extended release 24 hour)	$0	
diltiazem hcl (oral tablet immediate release)	$0	
dilt-xr (oral capsule extended release 24 hour)	$0	
matzim la (oral tablet extended release 24 hour)	$0	
tiadylt er (oral capsule extended release 24 hour)	$0	
verapamil hcl er (oral capsule extended release 24 hour)	$0	
verapamil hcl er (oral tablet extended release)	$0	
verapamil hcl (oral tablet immediate release)	$0	
Cardiovascular Agents, Other		
acetazolamide er (oral capsule extended release 12 hour)	$0	DL
acetazolamide (oral tablet)	$0	
aliskiren fumarate (oral tablet)	$0	
amiloride-hydrochlorothiazide (oral tablet)	$0	
amlodipine-atorvastatin (oral tablet)	$0	
amlodipine-benazepril (oral capsule)	$0	
amlodipine-olmesartan (oral tablet)	$0	QL (30 EA per 30 days)
amlodipine-valsartan (oral tablet)	$0	QL (30 EA per 30 days)
amlodipine-valsartan-hctz (oral tablet)	$0	QL (30 EA per 30 days)
atenolol-chlorthalidone (oral tablet)	$0	
benazepril-hydrochlorothiazide (oral tablet)	$0	
bisoprolol-hydrochlorothiazide (oral tablet)	$0	QL (60 EA per 30 days)
candesartan cilexetil-hctz (oral tablet)	$0	
digoxin (oral solution)	$0	
digoxin (125mcg oral tablet, 250mcg oral tablet)	$0	
digoxin (62.5mcg oral tablet)	$0	DL
EDARBYCLOR (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
enalapril-hydrochlorothiazide (10-25mg oral tablet)	$0	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
enalapril-hydrochlorothiazide (5-12.5mg oral tablet)	$0	QL (30 EA per 30 days)
ENTRESTO (ORAL CAPSULE SPRINKLE)	$0	QL (240 EA per 30 days)
fosinopril sodium-hctz (oral tablet)	$0	
irbesartan-hydrochlorothiazide (oral tablet)	$0	
isosorbide dinitrate-hydralazine (oral tablet)	$0	QL (180 EA per 30 days)
ivabradine hcl (oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
lisinopril-hydrochlorothiazide (10-12.5mg oral tablet)	$0	QL (30 EA per 30 days)
lisinopril-hydrochlorothiazide (20-12.5mg oral tablet)	$0	QL (120 EA per 30 days)
lisinopril-hydrochlorothiazide (20-25mg oral tablet)	$0	QL (60 EA per 30 days)
losartan potassium-hctz (oral tablet)	$0	
metoprolol-hydrochlorothiazide (oral tablet)	$0	
metyrosine (oral capsule)	$0	DL
olmesartan medoxomil-hctz (oral tablet)	$0	QL (30 EA per 30 days)
olmesartan-amlodipine-hctz (oral tablet)	$0	QL (30 EA per 30 days)
pentoxifylline er (oral tablet extended release)	$0	
quinapril-hydrochlorothiazide (oral tablet)	$0	
ranolazine er (oral tablet extended release 12 hour)	$0	QL (60 EA per 30 days)
sacubitril-valsartan (oral tablet)	$0	QL (60 EA per 30 days)
spironolactone-hctz (oral tablet)	$0	
telmisartan-amlodipine (oral tablet)	$0	QL (30 EA per 30 days)
telmisartan-hctz (40-12.5mg oral tablet, 80-25mg oral tablet)	$0	QL (30 EA per 30 days)
telmisartan-hctz (80-12.5mg oral tablet)	$0	QL (60 EA per 30 days)
trandolapril-verapamil hcl er (oral tablet extended release)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
triamterene-hctz (oral capsule)	$0	
triamterene-hctz (oral tablet)	$0	
valsartan-hydrochlorothiazide (oral tablet)	$0	QL (30 EA per 30 days)
Diuretics, Loop		
bumetanide (injection solution)	$0	DL
bumetanide (oral tablet)	$0	
ethacrynic acid (oral tablet)	$0	DL; QL (480 EA per 30 days)
furosemide (injection solution)	$0	DL
furosemide (oral solution)	$0	
furosemide (oral tablet)	$0	
torsemide (oral tablet)	$0	
Diuretics, Potassium-sparing		
amiloride hcl (oral tablet)	$0	
triamterene (oral capsule)	$0	DL
Diuretics, Thiazide		
chlorthalidone (oral tablet)	$0	
hydrochlorothiazide (oral capsule)	$0	
hydrochlorothiazide (oral tablet)	$0	
indapamide (oral tablet)	$0	
metolazone (oral tablet)	$0	
Dyslipidemics, Fibric Acid Derivatives		
fenofibrate micronized (134mg oral capsule, 200mg oral capsule, 43mg oral capsule, 67mg oral capsule)	$0	
fenofibrate (50mg oral capsule)	$0	
fenofibrate (145mg oral tablet, 48mg oral tablet)	$0	
fenofibrate (160mg oral tablet, 54mg oral tablet)	$0	
fenofibric acid (oral capsule delayed release)	$0	
gemfibrozil (oral tablet)	$0	
Dyslipidemics, HMG CoA Reductase Inhibitors		
atorvastatin calcium (oral tablet)	$0	
fluvastatin sodium er (oral tablet extended release 24 hour)	$0	
fluvastatin sodium (oral capsule)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
LIVALO (ORAL TABLET)	$0	QL (30 EA per 30 days)
lovastatin (oral tablet)	$0	
pravastatin sodium (oral tablet)	$0	
rosuvastatin calcium (oral tablet)	$0	QL (30 EA per 30 days)
simvastatin (oral tablet)	$0	QL (30 EA per 30 days)
Dyslipidemics, Other		
cholestyramine light (oral packet)	$0	DL
cholestyramine (oral packet)	$0	DL
colesevelam hcl (oral packet)	$0	
colesevelam hcl (oral tablet)	$0	
colestipol hcl (oral packet)	$0	DL
colestipol hcl (oral tablet)	$0	
ezetimibe (oral tablet)	$0	QL (30 EA per 30 days)
ezetimibe-simvastatin (oral tablet)	$0	
NEXLETOL (ORAL TABLET)	$0	PA; QL (30 EA per 30 days)
NEXLIZET (ORAL TABLET)	$0	PA; QL (30 EA per 30 days)
niacin (antihyperlipidemic) (oral tablet immediate release)	$0	DL
niacin er (antihyperlipidemic) (oral tablet extended release)	$0	
niacor (oral tablet)	$0	DL
omega-3-acid ethyl esters (oral capsule) (generic lovaza)	$0	DL; QL (120 EA per 30 days)
prevalite (oral packet)	$0	DL
REPATHA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; QL (3 ML per 28 days)
REPATHA SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; QL (3 ML per 28 days)
VASCEPA (ORAL CAPSULE)	$0	
Mineralocorticoid Receptor Antagonists		
eplerenone (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
KERENDIA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
spironolactone (oral tablet)	$0	
Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)		
DAPAGLIFLOZIN PROPANEDIOL (ORAL TABLET)	$0	QL (30 EA per 30 days)
FARXIGA (ORAL TABLET)	$0	QL (30 EA per 30 days)
JARDIANCE (ORAL TABLET)	$0	QL (30 EA per 30 days)
Vasodilators, Direct-acting Arterial		
hydralazine hcl (oral tablet)	$0	
minoxidil (oral tablet)	$0	
Vasodilators, Direct-acting Arterial/Venous		
isosorbide dinitrate (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 5mg oral tablet immediate release)	$0	
isosorbide mononitrate er (oral tablet extended release 24 hour)	$0	
isosorbide mononitrate (oral tablet immediate release)	$0	
NITRO-BID (TRANSDERMAL OINTMENT)	$0	DL
nitroglycerin (rectal ointment)	$0	DL; QL (30 GM per 30 days)
nitroglycerin (tablet sublingual)	$0	
nitroglycerin (transdermal patch 24 hour)	$0	
nitroglycerin (translingual solution)	$0	
VERQUVO (ORAL TABLET)	$0	PA; QL (30 EA per 30 days)
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine-dextroamphetamine er (oral capsule extended release 24 hour)	$0	DL; QL (60 EA per 30 days)
amphetamine-dextroamphetamine (10mg oral tablet, 12.5mg oral tablet, 15mg oral tablet, 30mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	$0	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
amphetamine-dextroamphetamine (20mg oral tablet)	$0	QL (90 EA per 30 days)
dextroamphetamine sulfate er (10mg oral capsule extended release 24 hour)	$0	DL; QL (180 EA per 30 days)
dextroamphetamine sulfate er (15mg oral capsule extended release 24 hour)	$0	DL; QL (120 EA per 30 days)
dextroamphetamine sulfate er (5mg oral capsule extended release 24 hour)	$0	DL; QL (90 EA per 30 days)
dextroamphetamine sulfate (10mg oral tablet, 5mg oral tablet)	$0	DL; QL (180 EA per 30 days)
dextroamphetamine sulfate (15mg oral tablet, 20mg oral tablet)	$0	DL; QL (90 EA per 30 days)
dextroamphetamine sulfate (30mg oral tablet)	$0	DL; QL (60 EA per 30 days)
lisdexamfetamine dimesylate (oral capsule)	$0	DL
lisdexamfetamine dimesylate (oral tablet chewable)	$0	DL
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
atomoxetine hcl (100mg oral capsule, 60mg oral capsule, 80mg oral capsule)	$0	DL; QL (30 EA per 30 days)
atomoxetine hcl (10mg oral capsule, 18mg oral capsule, 25mg oral capsule, 40mg oral capsule)	$0	DL; QL (60 EA per 30 days)
clonidine hcl er (oral tablet extended release 12 hour)	$0	PA
dexmethylphenidate hcl er (oral capsule extended release 24 hour)	$0	DL
dexmethylphenidate hcl (oral tablet)	$0	QL (60 EA per 30 days)
guanfacine hcl er (oral tablet extended release 24 hour)	$0	DL
methylphenidate hcl er (10mg oral tablet extended release)	$0	DL; QL (120 EA per 30 days)
methylphenidate hcl er (20mg oral tablet extended release)	$0	DL; QL (90 EA per 30 days)
methylphenidate hcl (10mg/5ml oral solution)	$0	DL; QL (900 ML per 30 days)
methylphenidate hcl (5mg/5ml oral solution)	$0	DL; QL (1800 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
methylphenidate hcl (oral tablet immediate release) (generic ritalin)	$0	QL (90 EA per 30 days)
Central Nervous System, Other		
AUSTEDO (ORAL TABLET IMMEDIATE RELEASE)	$0	PA; DL; QL (120 EA per 30 days)
COBENFY (ORAL CAPSULE)	$0	PA; DL; QL (60 EA per 30 days)
COBENFY STARTER PACK (ORAL CAPSULE THERAPY PACK)	$0	PA; DL; QL (112 EA per 365 days)
INGREZZA (ORAL CAPSULE)	$0	PA; DL; QL (30 EA per 30 days)
INGREZZA (ORAL CAPSULE SPRINKLE)	$0	PA; DL; QL (30 EA per 30 days)
INGREZZA (ORAL CAPSULE THERAPY PACK)	$0	PA; DL; QL (28 EA per 28 days)
NUEDEXTA (ORAL CAPSULE)	$0	PA; DL; QL (60 EA per 30 days)
riluzole (oral tablet)	$0	
SKYCLARYS (ORAL CAPSULE)	$0	PA; DL; QL (90 EA per 30 days)
tetrabenazine (12.5mg oral tablet)	$0	PA; DL; QL (90 EA per 30 days)
tetrabenazine (25mg oral tablet)	$0	PA; DL; QL (120 EA per 30 days)
VEOZAH (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
Fibromyalgia Agents		
DRIZALMA SPRINKLE (20MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 40MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 60MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	$0	ST; DL; QL (60 EA per 30 days)
DRIZALMA SPRINKLE (30MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	$0	ST; DL; QL (90 EA per 30 days)
duloxetine hcl (20mg oral capsule delayed release particles)	$0	QL (120 EA per 30 days)
duloxetine hcl (30mg oral capsule delayed release particles)	$0	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
duloxetine hcl (60mg oral capsule delayed release particles)	$0	QL (60 EA per 30 days)
pregabalin (100mg oral capsule, 25mg oral capsule, 50mg oral capsule, 75mg oral capsule)	$0	QL (120 EA per 30 days)
pregabalin (150mg oral capsule, 200mg oral capsule)	$0	QL (90 EA per 30 days)
pregabalin (225mg oral capsule, 300mg oral capsule)	$0	QL (60 EA per 30 days)
pregabalin (oral solution)	$0	QL (900 ML per 30 days)
SAVELLA (ORAL TABLET)	$0	
SAVELLA TITRATION PACK (ORAL TABLET)	$0	
Multiple Sclerosis Agents		
BAFIERTAM (ORAL CAPSULE DELAYED RELEASE)	$0	ST; DL; QL (120 EA per 30 days)
BETASERON (SUBCUTANEOUS KIT)	$0	DL; QL (15 EA per 30 days)
dalfampridine er (oral tablet extended release 12 hour)	$0	QL (60 EA per 30 days)
dimethyl fumarate (120mg oral capsule delayed release)	$0	DL; QL (56 EA per 28 days)
dimethyl fumarate (240mg oral capsule delayed release)	$0	DL; QL (60 EA per 30 days)
dimethyl fumarate starter pack (oral capsule delayed release therapy pack)	$0	DL; QL (120 EA per 365 days)
fingolimod hcl (oral capsule)	$0	DL; QL (30 EA per 30 days)
glatiramer acetate (20mg/ml subcutaneous solution prefilled syringe)	$0	DL; QL (30 ML per 30 days)
glatiramer acetate (40mg/ml subcutaneous solution prefilled syringe)	$0	DL; QL (12 ML per 28 days)
glatopa (20mg/ml subcutaneous solution prefilled syringe)	$0	DL; QL (30 ML per 30 days)
glatopa (40mg/ml subcutaneous solution prefilled syringe)	$0	DL; QL (12 ML per 28 days)
KESIMPTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
teriflunomide (oral tablet)	$0	DL; QL (30 EA per 30 days)
Central Nervous System, Other		
Central Nervous System Agents		
ADIPEX-P TAB 37.5MG (TABLET)*	$0 (OTC)	Generic preferred;PA required for brand
*benzphetamin tab 50mg (tablet)**	$0 (OTC)	PA
CONTRAVE TAB 8-90MG (TABLET ER 12HR)*	$0 (OTC)	PA
*diethylprop tab 25mg (tablet)**	$0 (OTC)	PA
*diethylprop tab 75mg er (tablet er 24hr)**	$0 (OTC)	PA
GOODYS POW EX ST (PACKET)*	$0 (OTC)	
LOMAIRA TAB 8MG (TABLET)*	$0 (OTC)	PA
*phendimetraz cap 105mg er (capsule er 24 hr)**	$0 (OTC)	PA
*phent/topira cap 11.25-69 (capsule er 24 hr)**	$0 (OTC)	PA
*phent/topira cap 15-92mg (capsule er 24 hr)**	$0 (OTC)	PA
*phent/topira cap 3.75-23 (capsule er 24 hr)**	$0 (OTC)	PA
*phent/topira cap 7.5-46mg (capsule er 24 hr)**	$0 (OTC)	PA
*phentermine cap 15mg (capsule)**	$0 (OTC)	Generic preferred;PA required for brand
*phentermine cap 30mg (capsule)**	$0 (OTC)	Generic preferred;PA required for brand
*phentermine cap 37.5mg (capsule)**	$0 (OTC)	Generic preferred;PA required for brand
*phentermine tab 37.5mg (tablet)**	$0 (OTC)	Generic preferred;PA required for brand
*phentermine tab 8mg (tablet)**	$0 (OTC)	PA
QSYMIA CAP 11.25-69 (CAPSULE ER 24 HR)*	$0 (OTC)	PA
QSYMIA CAP 15-92MG (CAPSULE ER 24 HR)*	$0 (OTC)	PA
QSYMIA CAP 3.75-23 (CAPSULE ER 24 HR)*	$0 (OTC)	PA
QSYMIA CAP 7.5-46MG (CAPSULE ER 24 HR)*	$0 (OTC)	PA
VANQUISH TAB (TABLET)*	$0 (OTC)	
Dental and Oral Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Dental and Oral Agents		
chlorhexidine gluconate (mouth solution)	$0	
*eql dental kit travel (kit)**	$0 (OTC)	
GLY-OXIDE SOL 10% (SOLUTION)*	$0 (OTC)	
*gnp dry liq mouth (liquid)**	$0 (OTC)	
*lemon-glycer mis (swab)**	$0 (OTC)	
*mouth rinse sol (solution)**	$0 (OTC)	
*mouthwash sol 0.0221% (solution)**	$0 (OTC)	
periogard (mouth solution)	$0	
pilocarpine hcl (oral tablet)	$0	DL
PREVDNT 5000 GEL 1.1-5% (GEL)*	$0 (OTC)	
*ra fluoride sol 0.05% (solution)**	$0 (OTC)	
triamcinolone acetonide (dental paste)	$0	
Dermatitis and Pruritus Agents		
Dermatological Agents		
*ammonium lac cre 12% (cream)**	$0 (OTC)	
Dermatological Agents		
Acne and Rosacea Agents		
accutane (10mg oral capsule, 20mg oral capsule, 40mg oral capsule)	$0	PA; DL
acitretin (oral capsule)	$0	DL
adapalene (0.3% external gel)	$0	
amnesteem (oral capsule)	$0	PA; DL
azelaic acid (external gel)	$0	DL; QL (50 GM per 30 days)
benzoyl peroxide-erythromycin (external gel)	$0	
claravis (oral capsule)	$0	PA; DL
clindamycin phosphate-benzoyl peroxide (1-5% external gel, 1.2-5% external gel)	$0	DL
isotretinoin (oral capsule)	$0	PA; DL
neuac (external gel)	$0	DL
tazarotene (0.1% external cream)	$0	PA; DL; QL (60 GM per 30 days)
tretinoin (external cream)	$0	PA; DL
tretinoin (0.01% external gel, 0.025% external gel)	$0	PA; DL
tretinoin microsphere (0.1% external gel)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
zenatane (oral capsule)	$0	PA; DL
Dermatitis and Pruritus Agents		
ala-cort (external cream)	$0	
alclometasone dipropionate (external cream)	$0	
alclometasone dipropionate (external ointment)	$0	
ammonium lactate (external cream)	$0	
ammonium lactate (external lotion)	$0	
betamethasone dipropionate aug (external cream)	$0	
betamethasone dipropionate aug (external gel)	$0	
betamethasone dipropionate aug (external lotion)	$0	
betamethasone dipropionate aug (external ointment)	$0	
betamethasone dipropionate (external cream)	$0	
betamethasone dipropionate (external lotion)	$0	
betamethasone dipropionate (external ointment)	$0	
betamethasone valerate (external cream)	$0	
betamethasone valerate (external lotion)	$0	
betamethasone valerate (external ointment)	$0	
clobetasol propionate emollient base (external cream)	$0	DL
clobetasol propionate (0.05% external cream)	$0	DL
clobetasol propionate (external gel)	$0	DL
clobetasol propionate (external ointment)	$0	DL
clobetasol propionate (external shampoo)	$0	DL
clobetasol propionate (external solution)	$0	
clodan (external shampoo)	$0	DL
desonide (external ointment)	$0	DL; QL (120 GM per 30 days)
desoximetasone (0.25% external cream)	$0	DL; QL (100 GM per 30 days)
fluocinolone acetonide (external cream)	$0	
fluocinolone acetonide (external ointment)	$0	
fluocinolone acetonide (external solution)	$0	
fluocinolone acetonide scalp (external oil)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
fluocinonide emulsified base (external cream)	$0	QL (60 GM per 30 days)
fluocinonide (0.05% external cream)	$0	QL (60 GM per 30 days)
fluocinonide (external gel)	$0	QL (60 GM per 30 days)
fluocinonide (external ointment)	$0	QL (60 GM per 30 days)
fluocinonide (external solution)	$0	QL (60 ML per 30 days)
fluticasone propionate (external cream)	$0	
fluticasone propionate (external ointment)	$0	
halobetasol propionate (external cream)	$0	DL
halobetasol propionate (external ointment)	$0	DL
hydrocortisone butyrate (external ointment)	$0	
hydrocortisone (1% external cream)	$0	
hydrocortisone (2.5% external lotion)	$0	
hydrocortisone (1% external ointment, 2.5% external ointment)	$0	
hydrocortisone valerate (external cream)	$0	DL
hydrocortisone valerate (external ointment)	$0	DL
mometasone furoate (external cream)	$0	
mometasone furoate (external ointment)	$0	
mometasone furoate (external solution)	$0	
pimecrolimus (external cream)	$0	ST; DL; QL (100 GM per 30 days)
selenium sulfide (external lotion)	$0	
tacrolimus (external ointment)	$0	ST; DL
triamcinolone acetonide (external cream)	$0	
triamcinolone acetonide (external lotion)	$0	
triamcinolone acetonide (0.025% external ointment, 0.1% external ointment, 0.5% external ointment)	$0	
triderm (external cream)	$0	
Dermatological Agents		
*calamine sus 8-8% (suspension)**	$0 (OTC)	
Dermatological Agents, Other		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
calcipotriene (external cream)	$0	DL; QL (120 GM per 30 days)
calcipotriene (external ointment)	$0	DL; QL (120 GM per 30 days)
calcipotriene (external solution)	$0	
clotrimazole-betamethasone (external cream)	$0	QL (90 GM per 30 days)
clotrimazole-betamethasone (external lotion)	$0	DL
diclofenac sodium (3% external gel)	$0	PA; DL; QL (100 GM per 30 days)
fluorouracil (5% external cream)	$0	DL; QL (40 GM per 30 days)
fluorouracil (external solution)	$0	
imiquimod (5% external cream)	$0	DL; QL (24 EA per 30 days)
methoxsalen rapid (oral capsule)	$0	DL
podofilox (external solution)	$0	
SANTYL (EXTERNAL OINTMENT)	$0	DL; QL (180 GM per 30 days)
silver sulfadiazine (external cream)	$0	
ssd (external cream)	$0	
ZORYVE (EXTERNAL CREAM)	$0	PA; DL
ZORYVE (EXTERNAL FOAM)	$0	PA; DL
Pediculicides/Scabicides		
malathion (external lotion)	$0	DL
permethrin (external cream)	$0	
Topical Anti-infectives		
ciclopirox (external gel)	$0	
ciclopirox (external shampoo)	$0	
ciclopirox (external solution)	$0	
ciclopirox olamine (external cream)	$0	
ciclopirox olamine (external suspension)	$0	
clindacin etz (external swab)	$0	QL (69 EA per 30 days)
clindamycin phosphate (once-daily) (external gel)	$0	QL (75 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
clindamycin phosphate (twice-daily) (external gel)	$0	QL (75 GM per 30 days)
clindamycin phosphate (external lotion)	$0	QL (60 ML per 30 days)
clindamycin phosphate (external solution)	$0	QL (60 ML per 30 days)
clindamycin phosphate (external swab)	$0	QL (69 EA per 30 days)
clotrimazole (external cream)	$0	
clotrimazole (external solution)	$0	
econazole nitrate (external cream)	$0	DL; QL (90 GM per 30 days)
ery (external pad)	$0	
erythromycin (external gel)	$0	DL
erythromycin (external solution)	$0	
gentamicin sulfate (external cream)	$0	
gentamicin sulfate (external ointment)	$0	
JUBLIA (EXTERNAL SOLUTION)	$0	DL
ketoconazole (external cream)	$0	QL (90 GM per 30 days)
ketoconazole (external shampoo)	$0	
mupirocin calcium (external cream)	$0	DL
mupirocin (external ointment)	$0	QL (110 GM per 30 days)
nyamyc (external powder)	$0	QL (120 GM per 30 days)
nystatin (external cream)	$0	
nystatin (external ointment)	$0	
nystatin (external powder)	$0	QL (120 GM per 30 days)
nystop (external powder)	$0	QL (120 GM per 30 days)
Dermatological Agents, Other		
Dermatological Agents		
AMERIDERM OIN PERISHIE (OINTMENT)*	$0 (OTC)	
AMERIPHOR OIN (OINTMENT)*	$0 (OTC)	
COMPOUND W LIQ 17% (LIQUID)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
DERMAFIX OIN (OINTMENT)*	$0 (OTC)	
*hm eyelid pad wipes (pad)**	$0 (OTC)	
*wart remover liq 17% (liquid)**	$0 (OTC)	
Electrolyte/Mineral Replacement		
Electrolytes/Minerals/Metals/Vitamins		
*3232a infant pow formula (powder)**	$0 (OTC)	
ABATRON LIQ (LIQUID)*	$0 (OTC)	
ACERFLEX POW (POWDER)*	$0 (OTC)	
ADVANTAGE POW FORMULA (POWDER)*	$0 (OTC)	
ALFAMINO POW INFANT (POWDER)*	$0 (OTC)	
ALFAMINO POW JUNIOR (POWDER)*	$0 (OTC)	
ALITRAQ POW VANILLA (PACKET)*	$0 (OTC)	
ALSOY SOY POW (POWDER)*	$0 (OTC)	
ARGINAID PAK CHERRY (PACKET)*	$0 (OTC)	
ARGINAID PAK ORANGE (PACKET)*	$0 (OTC)	
BABY'S BIG POW SUPPORT (POWDER)*	$0 (OTC)	
BABYS ONLY POW DAIRY (POWDER)*	$0 (OTC)	
BABYS ONLY POW DHA/ARA (POWDER)*	$0 (OTC)	
BABYS ONLY POW SOY (POWDER)*	$0 (OTC)	
BCAD 1 POW (POWDER)*	$0 (OTC)	
BCAD 2 POW (POWDER)*	$0 (OTC)	
BENTIVITE TAB 35-1MG (TABLET)*	$0 (OTC)	
*bone essenti cap (capsule)**	$0 (OTC)	
BRAINSUSTAIN PAK (PACKET)*	$0 (OTC)	
BRAINSUSTAIN POW KIDS (POWDER)*	$0 (OTC)	
CALCILO XD POW (POWDER)*	$0 (OTC)	
CARNATION POW BREAKFST (PACKET)*	$0 (OTC)	
*chewable chw iron (tablet chewable)**	$0 (OTC)	
*chicken/peas pow carrots (powder)**	$0 (OTC)	
*chicken/peas pow pediatri (powder)**	$0 (OTC)	
CHOLEXTRA POW (POWDER)*	$0 (OTC)	
COMPLEX ESSE POW MSD (POWDER)*	$0 (OTC)	
*cvs advantag pow /iron (powder)**	$0 (OTC)	
*cvs gentle pow (powder)**	$0 (OTC)	
*cvs sensitiv pow /iron (powder)**	$0 (OTC)	
*cvs tender pow /iron (powder)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
*cvs toddler pow infant (powder)**	$0 (OTC)	
CYCLINEX-1 POW (POWDER)*	$0 (OTC)	
CYCLINEX-2 POW (POWDER)*	$0 (OTC)	
DIARESQ PAK (PACKET)*	$0 (OTC)	
DIARESQ PAK CHILDREN (PACKET)*	$0 (OTC)	
DIARESQ PAK TODDLERS (PACKET)*	$0 (OTC)	
DR BROWNS POW GOOD ST (POWDER)*	$0 (OTC)	
DUOCAL POW (POWDER)*	$0 (OTC)	
EAA SUPPLEME POW (PACKET)*	$0 (OTC)	
EAA SUPPLEME POW TROPICAL (PACKET)*	$0 (OTC)	
EASY IRON CAP 28MG (CAPSULE)*	$0 (OTC)	
EGG/PRO POW (POWDER)*	$0 (OTC)	
ELECARE DHA/ POW ARA INFA (POWDER)*	$0 (OTC)	
ELECARE INF POW 0-12 MO (POWDER)*	$0 (OTC)	
ELECARE JR POW (POWDER)*	$0 (OTC)	
ELECARE JR POW BANANA (POWDER)*	$0 (OTC)	
ELECARE JR POW CHOCOLAT (POWDER)*	$0 (OTC)	
ELECARE JR POW VANILLA (POWDER)*	$0 (OTC)	
ELECARE POW (POWDER)*	$0 (OTC)	
ELECARE POW DHA/ARA (POWDER)*	$0 (OTC)	
EN GENTLEASE POW FUSS/GAS (POWDER)*	$0 (OTC)	
ENCALA PAK (PACKET)*	$0 (OTC)	
ENCALA POW (POWDER)*	$0 (OTC)	
ENFA NUTRAMI POW PROB/LGG (POWDER)*	$0 (OTC)	
ENFA NUTRAMI POW TOD/ENFL (POWDER)*	$0 (OTC)	
ENFAGROW POW PREMIUM (POWDER)*	$0 (OTC)	
ENFAGROW PRM POW GENTLEAS (POWDER)*	$0 (OTC)	
ENFAGROW PRM POW TODDLER (POWDER)*	$0 (OTC)	
ENFAMIL A.R. POW INFANT (POWDER)*	$0 (OTC)	
ENFAMIL AR POW SPIT-UP (POWDER)*	$0 (OTC)	
ENFAMIL INFA POW FORMULA (POWDER)*	$0 (OTC)	
ENFAMIL NEUR POW ENFACARE (POWDER)*	$0 (OTC)	
ENFAMIL NEUR POW GENTLEAS (POWDER)*	$0 (OTC)	
ENFAMIL NEUR POW GNTL ALL (POWDER)*	$0 (OTC)	
ENFAMIL NEUR POW INFANT (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ENFAMIL NEUR POW SENSITIV (POWDER)*	$0 (OTC)	
ENFAMIL POW ENSPIRE (POWDER)*	$0 (OTC)	
ENFAMIL POW GENTLEAS (POWDER)*	$0 (OTC)	
ENFAMIL POW INFANT (POWDER)*	$0 (OTC)	
ENFAMIL POW REGULINE (POWDER)*	$0 (OTC)	
ENFAMIL PREM POW INFANT (POWDER)*	$0 (OTC)	
ENFAMIL PREM POW NEWBORN (POWDER)*	$0 (OTC)	
ENFAMIL SOY POW PROSOBEE (POWDER)*	$0 (OTC)	
ENSURE HIGH POW PROTEIN (POWDER)*	$0 (OTC)	
ENSURE ORIGN POW VANILLA (POWDER)*	$0 (OTC)	
ENSURE POW VANILLA (POWDER)*	$0 (OTC)	
ENU PRO3 POW PLUS (POWDER)*	$0 (OTC)	
EQUACARE JR POW CHOCOLA (POWDER)*	$0 (OTC)	
EQUACARE JR POW UNFLAVO (POWDER)*	$0 (OTC)	
EQUACARE JR POW VANILLA (POWDER)*	$0 (OTC)	
*espresso pow protein (powder)**	$0 (OTC)	
ESSENTIAL POW CARE JR (POWDER)*	$0 (OTC)	
*fe c plus tab (tablet)**	$0 (OTC)	
FERREX 150 CAP FORTE (CAPSULE)*	$0 (OTC)	
FERRO-SEQUEL TAB 65-25MG (TABLET ER)*	$0 (OTC)	
FITFOOD LEAN POW COMPLETE (PACKET)*	$0 (OTC)	
FOLIVANE-PLS CAP (CAPSULE)*	$0 (OTC)	
FORTA DRINK POW FRT PUNC (POWDER)*	$0 (OTC)	
FORTA DRINK POW ORANGE (POWDER)*	$0 (OTC)	
FORTA DRINK POW PUNCH (POWDER)*	$0 (OTC)	
FORTA SHAKE POW DTH CHOC (POWDER)*	$0 (OTC)	
FORTA SHAKE POW EGGNOG (POWDER)*	$0 (OTC)	
FORTA SHAKE POW STRAWBER (POWDER)*	$0 (OTC)	
FORTA SHAKE POW VANILLA (POWDER)*	$0 (OTC)	
FRUITIVITS POW (PACKET)*	$0 (OTC)	
*ft magnes ox tab 400mg (tablet)**	$0 (OTC)	
GA EXPRESS15 PAK UNFLAVOR (PACKET)*	$0 (OTC)	
GA GEL PAK (PACKET)*	$0 (OTC)	
GA POW (POWDER)*	$0 (OTC)	
GA-1 ANAMIX POW ERLY YRS (POWDER)*	$0 (OTC)	
GENTLE DAILY POW DHA-ARA (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
GENTLE DAILY POW TODDLER (POWDER)*	$0 (OTC)	
*gentle infan pow form/fe (powder)**	$0 (OTC)	
GERBER EXTEN POW HA (POWDER)*	$0 (OTC)	
GERBER GOOD POW SOY/IRON (POWDER)*	$0 (OTC)	
GERBER GOOD POW START 2 (POWDER)*	$0 (OTC)	
GERBER GOOD POW W/IRON (POWDER)*	$0 (OTC)	
GERBER GRAD POW GENTLE (POWDER)*	$0 (OTC)	
GERBER GRAD POW PROTECT (POWDER)*	$0 (OTC)	
GERBER GRAD POW SOOTHE (POWDER)*	$0 (OTC)	
GERBER GRAD POW SOY (POWDER)*	$0 (OTC)	
GERBER NATUR POW STAGE 1 (POWDER)*	$0 (OTC)	
GERBER NATUR POW STAGE 2 (POWDER)*	$0 (OTC)	
GERBER NATUR POW STAGE 3 (POWDER)*	$0 (OTC)	
GLUTAREX-1 POW (POWDER)*	$0 (OTC)	
GLUTAREX-2 POW (POWDER)*	$0 (OTC)	
GLYCOSADE PAK (PACKET)*	$0 (OTC)	
GLYTACTIN PAK BTMK/DLT (PACKET)*	$0 (OTC)	
GLYTACTIN PAK SWIRL 15 (PACKET)*	$0 (OTC)	
GLYTACTIN POW APPLE (PACKET)*	$0 (OTC)	
GLYTACTIN POW BD 20/20 (PACKET)*	$0 (OTC)	
GLYTACTIN POW BETMLK15 (PACKET)*	$0 (OTC)	
GLYTACTIN POW BETTRMLK (POWDER)*	$0 (OTC)	
GLYTACTIN POW BLD 10PE (PACKET)*	$0 (OTC)	
GLYTACTIN POW BLD PKU (PACKET)*	$0 (OTC)	
GLYTACTIN POW PUNCH (PACKET)*	$0 (OTC)	
GLYTACTIN POW RESTOR 5 (PACKET)*	$0 (OTC)	
GLYTACTIN POW RST LT10 (PACKET)*	$0 (OTC)	
GLYTACTIN POW TROPICAL (PACKET)*	$0 (OTC)	
*gnp magnesiu tab oxide (tablet)**	$0 (OTC)	
GOOD START 2 POW SOY/IRON (POWDER)*	$0 (OTC)	
GOOD START 2 POW W/IRON (POWDER)*	$0 (OTC)	
GOOD START POW (POWDER)*	$0 (OTC)	
GOOD START POW /FE (POWDER)*	$0 (OTC)	
GOOD START POW A2/IRON (POWDER)*	$0 (OTC)	
GOOD START POW A2/TODDL (POWDER)*	$0 (OTC)	
GOOD START POW GEN PRO2 (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
GOOD START POW GENT PLS (POWDER)*	$0 (OTC)	
GOOD START POW GENTLE (POWDER)*	$0 (OTC)	
GOOD START POW GENTPRO (POWDER)*	$0 (OTC)	
GOOD START POW GROW 3 (POWDER)*	$0 (OTC)	
GOOD START POW NATURAL (POWDER)*	$0 (OTC)	
GOOD START POW NOURISH (POWDER)*	$0 (OTC)	
GOOD START POW PROTECT (POWDER)*	$0 (OTC)	
GOOD START POW SOOTHE (POWDER)*	$0 (OTC)	
GOOD START POW SOOTHE 1 (POWDER)*	$0 (OTC)	
GOOD START POW SOOTHE 2 (POWDER)*	$0 (OTC)	
GOOD START POW SOY (POWDER)*	$0 (OTC)	
GOOD START POW SOY PLS2 (POWDER)*	$0 (OTC)	
GOOD START POW SOY/IRON (POWDER)*	$0 (OTC)	
GOOD START POW W/IRON (POWDER)*	$0 (OTC)	
HCU ANAMIX POW ERLY YRS (POWDER)*	$0 (OTC)	
HCU ANAMIX POW NEXT (POWDER)*	$0 (OTC)	
HCU EXPRESS PAK 15+ UNFL (PACKET)*	$0 (OTC)	
HCU EXPRESS PAK 20+ UNFL (PACKET)*	$0 (OTC)	
HCU GEL PAK (PACKET)*	$0 (OTC)	
HCU MAXAMUM POW (POWDER)*	$0 (OTC)	
HCY 1 POW (POWDER)*	$0 (OTC)	
HCY 2 POW (POWDER)*	$0 (OTC)	
HEALTH SOURC POW CHOCOLA (POWDER)*	$0 (OTC)	
HEALTH SOURC POW CHOCOLAT (POWDER)*	$0 (OTC)	
HEALTH SOURC POW STRAWBER (POWDER)*	$0 (OTC)	
HEALTH SOURC POW UNFLAVOR (POWDER)*	$0 (OTC)	
HEALTH SOURC POW VANILLA (POWDER)*	$0 (OTC)	
*hematinic pl tab vit/min (tablet)**	$0 (OTC)	
*hematinic/fa tab (tablet)**	$0 (OTC)	
HEMATOGEN CAP FORTE (CAPSULE)*	$0 (OTC)	
HOM 2 POW (POWDER)*	$0 (OTC)	
HOMACTIN AA POW PLUS (PACKET)*	$0 (OTC)	
HOMINEX-1 POW (POWDER)*	$0 (OTC)	
HOMINEX-2 POW (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
I5 POW CHOCOLAT (PACKET)*	$0 (OTC)	
I5 POW VANILLA (PACKET)*	$0 (OTC)	
ICAR-C PLUS TAB (TABLET)*	$0 (OTC)	
*iferex 150 cap forte (capsule)**	$0 (OTC)	
IMMULIFE POW (POWDER)*	$0 (OTC)	
*infant form pow /iron (powder)**	$0 (OTC)	
*iron 100 tab plus (tablet)**	$0 (OTC)	
*iro-plex liq (liquid)**	$0 (OTC)	
*iro-plex tab 165-2mg (tablet)**	$0 (OTC)	
ISOMIL 2 POW W/CALCIU (POWDER)*	$0 (OTC)	
ISOMIL SOY POW W/IRON (POWDER)*	$0 (OTC)	
ISOMIL/IRON POW (POWDER)*	$0 (OTC)	
ISOVACTIN AA POW PLUS (PACKET)*	$0 (OTC)	
IVA ANAMIX POW ERLY YRS (POWDER)*	$0 (OTC)	
IVA ANAMIX POW NEXT (POWDER)*	$0 (OTC)	
IVA MAXAMUM POW (POWDER)*	$0 (OTC)	
I-VALEX-1 POW (POWDER)*	$0 (OTC)	
I-VALEX-2 POW (POWDER)*	$0 (OTC)	
JUVEN NUTRIV POW (PACKET)*	$0 (OTC)	
JUVEN NUTRIV POW FRT PNCH (PACKET)*	$0 (OTC)	
JUVEN NUTRIV POW ORANGE (PACKET)*	$0 (OTC)	
JUVEN NUTRIV POW UNFLAVRD (PACKET)*	$0 (OTC)	
JUVEN POW (PACKET, POWDER)*	$0 (OTC)	
JUVEN POW FRT PNCH (PACKET)*	$0 (OTC)	
JUVEN POW GRAPE (PACKET)*	$0 (OTC)	
JUVEN POW ORANGE (PACKET)*	$0 (OTC)	
JUVEN REVIGO POW FRT PNCH (PACKET)*	$0 (OTC)	
JUVEN REVIGO POW ORANGE (PACKET)*	$0 (OTC)	
JUVEN REVIGO POW UNFLAVRD (PACKET)*	$0 (OTC)	
*kale/quinoa pow berries (powder)**	$0 (OTC)	
*kale/quinoa pow pediatri (powder)**	$0 (OTC)	
KETOCAL 3:1 POW (POWDER)*	$0 (OTC)	
KETOCAL 4:1 POW (POWDER)*	$0 (OTC)	
KETOGEN POW (POWDER)*	$0 (OTC)	
KETONEX-1 POW (POWDER)*	$0 (OTC)	
KETONEX-2 POW (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
K-PAX IMMUNE POW BOOSTER (POWDER)*	$0 (OTC)	
*k-tan plus cap (capsule)**	$0 (OTC)	
LANAFLEX PAK (PACKET)*	$0 (OTC)	
LIL MIXINS POW EGG (POWDER)*	$0 (OTC)	
LIL MIXINS POW PEANUT (POWDER)*	$0 (OTC)	
LIPISTART POW (POWDER)*	$0 (OTC)	
LMD POW (POWDER)*	$0 (OTC)	
LOPHLEX POW (PACKET)*	$0 (OTC)	
LUTRISH POW CHOCOLAT (PACKET)*	$0 (OTC)	
LUTRISH POW VANILLA (PACKET)*	$0 (OTC)	
*mag oxide tab 400mg (tablet)**	$0 (OTC)	
*magnesium ox tab 400mg (tablet)**	$0 (OTC)	
*magnesium tab 250mg (tablet)**	$0 (OTC)	
*magnesium-ox tab 400mg (tablet)**	$0 (OTC)	
MAGOX 400 TAB 400MG (TABLET)*	$0 (OTC)	
MALTOCARB POW (POWDER)*	$0 (OTC)	
MCT PRO-CAL PAK (PACKET)*	$0 (OTC)	
METHIONAID POW (POWDER)*	$0 (OTC)	
*mgo tab 400mg (tablet)**	$0 (OTC)	
MIX-INS PAK STAGE1/2 (PACKET)*	$0 (OTC)	
MMA/PA ANAMI POW ERLY YRS (POWDER)*	$0 (OTC)	
MMA/PA ANAMX POW NEXT (POWDER)*	$0 (OTC)	
MMA/PA GEL PAK (PACKET)*	$0 (OTC)	
MMA/PA GEL POW (PACKET)*	$0 (OTC)	
MMA/PA MAXAM POW (POWDER)*	$0 (OTC)	
MMA/PA POW EXPR 15 (PACKET)*	$0 (OTC)	
MODULEN POW (POWDER)*	$0 (OTC)	
MONOGEN POW (POWDER)*	$0 (OTC)	
MSUD 2 POW (POWDER)*	$0 (OTC)	
MSUD AID POW (POWDER)*	$0 (OTC)	
MSUD ANALOG POW (POWDER)*	$0 (OTC)	
MSUD ANAMIX POW ERLY YRS (POWDER)*	$0 (OTC)	
MSUD EXPRESS PAK 15 PLUS (PACKET)*	$0 (OTC)	
MSUD EXPRESS PAK 20 PLUS (PACKET)*	$0 (OTC)	
MSUD GEL PAK UNFLAVOR (PACKET)*	$0 (OTC)	
MSUD MAXAMAD POW (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
MSUD MAXAMUM POW (POWDER)*	$0 (OTC)	
MULTIGEN PLS TAB (TABLET)*	$0 (OTC)	
MULTIGEN TAB (TABLET)*	$0 (OTC)	
MULTIGEN TAB FOLIC (TABLET)*	$0 (OTC)	
NAN PRO 1 POW IRON (POWDER)*	$0 (OTC)	
NAN PRO POW TODDLER (POWDER)*	$0 (OTC)	
NEOCATE INFT POW DHA/ARA (POWDER)*	$0 (OTC)	
NEOCATE JR POW PREBIOTC (POWDER)*	$0 (OTC)	
NEOCATE POW JUNIOR (POWDER)*	$0 (OTC)	
NEOCATE POW NUTRA (POWDER)*	$0 (OTC)	
NEOCATE POW SYNEO (POWDER)*	$0 (OTC)	
NEOCATE SYNE POW JUNIOR (POWDER)*	$0 (OTC)	
NOVAFERRUM LIQ 125 (LIQUID)*	$0 (OTC)	
*nutr drink pow mix choc (powder)**	$0 (OTC)	
*nutr drink pow mix van (powder)**	$0 (OTC)	
NUTRAMINE PAK (PACKET)*	$0 (OTC)	
NUTRAMINE PAK BITES (PACKET)*	$0 (OTC)	
NUTRICIA PAK PREOP (PACKET)*	$0 (OTC)	
*nutritional pow shak mix (powder)**	$0 (OTC)	
OA 1 POW (POWDER)*	$0 (OTC)	
OA 2 POW (POWDER)*	$0 (OTC)	
OPTICLEANSE PAK GHI (PACKET)*	$0 (OTC)	
OPTICLEANSE PAK PLUS (PACKET)*	$0 (OTC)	
OPTICLEANSE POW GHI (POWDER)*	$0 (OTC)	
OPTICLEANSE POW GHI/CHOC (POWDER)*	$0 (OTC)	
OPTIMETABOLI POW (PACKET)*	$0 (OTC)	
OPTIMETABOLI POW VANILLA (PACKET)*	$0 (OTC)	
OS 2 POW (POWDER)*	$0 (OTC)	
OSAPLEX MK-7 PAK (PACKET)*	$0 (OTC)	
PEDIA SMART POW CHOCOLAT (POWDER)*	$0 (OTC)	
PEDIA SMART POW VANILLA (POWDER)*	$0 (OTC)	
PEDIASMART POW PEA PROT (POWDER)*	$0 (OTC)	
PEDIASURE POW CHOCOLAT (POWDER)*	$0 (OTC)	
PEDIASURE POW SHAKE (POWDER)*	$0 (OTC)	
PEDIASURE POW SIDEKICK (POWDER)*	$0 (OTC)	
PEDIASURE POW VANILLA (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
PEPTICATE POW (POWDER)*	$0 (OTC)	
PERIFLEX JUN POW PLUS (POWDER)*	$0 (OTC)	
PERIFLEX POW ADVANCE (POWDER)*	$0 (OTC)	
PERIFLEX POW INFANT (POWDER)*	$0 (OTC)	
PERIFLEX POW JUNIOR (POWDER)*	$0 (OTC)	
PFD 2 POW (POWDER)*	$0 (OTC)	
PFD TODDLER POW (POWDER)*	$0 (OTC)	
PHENEX-1 POW (POWDER)*	$0 (OTC)	
PHENEX-2 POW (POWDER)*	$0 (OTC)	
PHENEX-2 POW VANILLA (POWDER)*	$0 (OTC)	
PHENYLADE POW CHOCOLAT (POWDER)*	$0 (OTC)	
PHENYLADE POW ESSNTL (PACKET, POWDER)*	$0 (OTC)	
PHENYLADE POW GMP (PACKET, POWDER)*	$0 (OTC)	
PHENYLADE POW GMP ULTR (PACKET)*	$0 (OTC)	
PHENYLADE POW ORANGE C (POWDER)*	$0 (OTC)	
PHENYLADE POW STRAWBER (POWDER)*	$0 (OTC)	
PHENYLADE POW VANILLA (POWDER)*	$0 (OTC)	
PHENYLADE60 POW (PACKET, POWDER)*	$0 (OTC)	
PHENYLADE60 POW DRNK MIX (POWDER)*	$0 (OTC)	
PHENYLADE60 POW VANILLA (PACKET)*	$0 (OTC)	
PHENYLD GMP POW DHA/FIBR (POWDER)*	$0 (OTC)	
PHENYL-FREE POW 1 (POWDER)*	$0 (OTC)	
PHENYL-FREE POW 2 (POWDER)*	$0 (OTC)	
PHENYL-FREE POW 2HP (POWDER)*	$0 (OTC)	
PHLEXY-10 POW (PACKET)*	$0 (OTC)	
PKU 2 POW (POWDER)*	$0 (OTC)	
PKU 3 POW (POWDER)*	$0 (OTC)	
PKU EASY POW SHAKE&GO (POWDER)*	$0 (OTC)	
PKU EXPLORE POW 10 ORG (PACKET)*	$0 (OTC)	
PKU EXPLORE POW 10 RASPB (PACKET)*	$0 (OTC)	
PKU EXPLORE POW ORANGE (PACKET)*	$0 (OTC)	
PKU EXPLORE POW RASPBERR (PACKET)*	$0 (OTC)	
PKU EXPLORE5 POW UNFLAVOR (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 15+ LEMO (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 15+ ORAN (PACKET)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
PKU EXPRESS PAK 15+ RASP (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 15+ TROP (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 15+ UNFL (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 20+ RASP (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 20+ TROP (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 20+ UNFL (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 20+LEMON (PACKET)*	$0 (OTC)	
PKU EXPRESS PAK 20+ORANG (PACKET)*	$0 (OTC)	
PKU GEL PAK (PACKET)*	$0 (OTC)	
PKU GEL PAK ORANGE (PACKET)*	$0 (OTC)	
PKU GEL PAK RASPBERR (PACKET)*	$0 (OTC)	
PKU PERIFLEX POW ERLY YRS (POWDER)*	$0 (OTC)	
PKU SPHERE POW 15 (PACKET)*	$0 (OTC)	
PKU SPHERE POW 20 (PACKET)*	$0 (OTC)	
PKU SPHERE POW 20 BANAN (PACKET)*	$0 (OTC)	
PKU SPHERE POW 20 LEMON (PACKET)*	$0 (OTC)	
PKU START POW (POWDER)*	$0 (OTC)	
*pku trio pow unflavor (powder)**	$0 (OTC)	
*pku trio pow vanilla (powder)**	$0 (OTC)	
POLYCAL POW (POWDER)*	$0 (OTC)	
*poly-iron cap 150 fort (capsule)**	$0 (OTC)	
*polysacchari cap iron (capsule)**	$0 (OTC)	
PORTAGEN POW (POWDER)*	$0 (OTC)	
PPA/MMA POW EXPRESS (PACKET)*	$0 (OTC)	
PREGESTIMIL POW (POWDER)*	$0 (OTC)	
*premium pow formula (powder)**	$0 (OTC)	
PROMOD POW (POWDER)*	$0 (OTC)	
PRO-PHREE POW (POWDER)*	$0 (OTC)	
PROPIMEX-1 POW (POWDER)*	$0 (OTC)	
PROPIMEX-2 POW (POWDER)*	$0 (OTC)	
PROSOURCE POW (POWDER)*	$0 (OTC)	
PROVIMIN POW (POWDER)*	$0 (OTC)	
PURAMINO JR POW UNFLAVOR (POWDER)*	$0 (OTC)	
PURAMINO JR POW VANILLA (POWDER)*	$0 (OTC)	
PURAMINO POW DHA/ARA (POWDER)*	$0 (OTC)	
PURE BLISS POW ORG/IRON (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
PURE BLISS/ POW IRON/MLK (POWDER)*	$0 (OTC)	
PURECARB POW (POWDER)*	$0 (OTC)	
*purevit dual cap fe plus (capsule)**	$0 (OTC)	
RENASTART POW (POWDER)*	$0 (OTC)	
*restore fus pow renal (powder)**	$0 (OTC)	
*restore rena pow support (powder)**	$0 (OTC)	
RESURGEX PAK FRUIT (PACKET)*	$0 (OTC)	
RESURGEX PAK VAN SUPR (PACKET)*	$0 (OTC)	
RESURGEX PLS PAK CHOC CRM (PACKET)*	$0 (OTC)	
RESURGEX PLS PAK VAN CRM (PACKET)*	$0 (OTC)	
RESURGEX SLT PAK CHOC FUG (PACKET)*	$0 (OTC)	
RESURGEX SLT PAK FRUIT SM (PACKET)*	$0 (OTC)	
RESURGEX SLT PAK VAN BEAN (PACKET)*	$0 (OTC)	
S.O.S. 20 POW (PACKET)*	$0 (OTC)	
S.O.S. 25 POW (PACKET)*	$0 (OTC)	
SCANDICAL POW (POWDER)*	$0 (OTC)	
SCANDISHAKE POW VANILLA (POWDER)*	$0 (OTC)	
SENSITIVE POW DHA-ARA (POWDER)*	$0 (OTC)	
SERACAL POW (PACKET, POWDER)*	$0 (OTC)	
*se-tan plus cap (capsule)**	$0 (OTC)	
SIMILAC 2 POW (POWDER)*	$0 (OTC)	
SIMILAC 2 POW ADVANCE (POWDER)*	$0 (OTC)	
SIMILAC 360 POW 5 HMO (POWDER)*	$0 (OTC)	
SIMILAC 360 POW SENSITIV (POWDER)*	$0 (OTC)	
SIMILAC 360 POW TOTAL CA (POWDER)*	$0 (OTC)	
SIMILAC ADV POW LAMEHADR (POWDER)*	$0 (OTC)	
SIMILAC ADV POW NON-GMO (POWDER)*	$0 (OTC)	
SIMILAC ADV POW STAGE 2 (POWDER)*	$0 (OTC)	
SIMILAC ADVA POW EARLY SH (POWDER)*	$0 (OTC)	
SIMILAC ADVA POW OPT/IRON (POWDER)*	$0 (OTC)	
SIMILAC ADVA POW ORGANIC (POWDER)*	$0 (OTC)	
SIMILAC ALIM POW IRON (POWDER)*	$0 (OTC)	
SIMILAC ALIM POW TODDLER (POWDER)*	$0 (OTC)	
SIMILAC FOR POW SUPPLEME (POWDER)*	$0 (OTC)	
SIMILAC GO & POW GROW (POWDER)*	$0 (OTC)	
SIMILAC GO & POW GROW HMO (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
SIMILAC LACT POW ADVANCE (POWDER)*	$0 (OTC)	
SIMILAC LF POW W/IRON (POWDER)*	$0 (OTC)	
SIMILAC MILK POW FORTIFIE (POWDER)*	$0 (OTC)	
SIMILAC ORGA POW A2 MILK (POWDER)*	$0 (OTC)	
SIMILAC PM POW 60/40 (POWDER)*	$0 (OTC)	
SIMILAC POW (POWDER)*	$0 (OTC)	
SIMILAC POW ADVANCE (PACKET, POWDER)*	$0 (OTC)	
SIMILAC POW LOW-IRON (POWDER)*	$0 (OTC)	
SIMILAC POW NEOSURE (POWDER)*	$0 (OTC)	
SIMILAC POW NON-GMO (POWDER)*	$0 (OTC)	
SIMILAC POW PRO-TOTA (POWDER)*	$0 (OTC)	
SIMILAC POW SPIT-UP (POWDER)*	$0 (OTC)	
SIMILAC PRO- POW ADVANCE (POWDER)*	$0 (OTC)	
SIMILAC PRO POW SENS/IRO (POWDER)*	$0 (OTC)	
SIMILAC PRO- POW SENSITIV (POWDER)*	$0 (OTC)	
SIMILAC PURE POW BLISS (POWDER)*	$0 (OTC)	
SIMILAC SENS POW EARLY SH (POWDER)*	$0 (OTC)	
SIMILAC SENS POW FUSS/GAS (POWDER)*	$0 (OTC)	
SIMILAC SENS POW OPT/IRON (POWDER)*	$0 (OTC)	
SIMILAC SENS POW SOY ISOM (PACKET, POWDER)*	$0 (OTC)	
SIMILAC SOY POW ISOMIL (POWDER)*	$0 (OTC)	
SIMILAC SPIT POW OPT/IRON (POWDER)*	$0 (OTC)	
SIMILAC SPIT POW OPTIGRO (POWDER)*	$0 (OTC)	
SIMILAC TOTL POW CMFT/IRO (POWDER)*	$0 (OTC)	
SIMILAC TOTL POW COMFORT (POWDER)*	$0 (OTC)	
SIMILAC/IRON POW (POWDER)*	$0 (OTC)	
SIMILAC/IRON POW ADVANCE (POWDER)*	$0 (OTC)	
SIMILAC/IRON POW ORGANIC (POWDER)*	$0 (OTC)	
SOD ANAMIX POW EARLY YR (POWDER)*	$0 (OTC)	
SOL CARB POW (POWDER)*	$0 (OTC)	
TANDEM PLUS CAP (CAPSULE)*	$0 (OTC)	
*toddler begi pow iron (powder)**	$0 (OTC)	
TOLEREX POW (PACKET)*	$0 (OTC)	
TRUE MAG OX TAB 400MG (TABLET)*	$0 (OTC)	
TYLACTIN POW BLD 20PE (PACKET)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TYLACTIN POW RESTOR5 (PACKET)*	$0 (OTC)	
TYR ANAMIX POW ERLY YRS (POWDER)*	$0 (OTC)	
TYR ANAMIX POW NEXT (POWDER)*	$0 (OTC)	
TYR COOLER LIQ (LIQUID)*	$0 (OTC)	
TYR EXPRESS PAK 15+ UNFL (PACKET)*	$0 (OTC)	
TYR EXPRESS PAK 20+ UNFL (PACKET)*	$0 (OTC)	
TYR GEL PAK UNFLAVOR (PACKET)*	$0 (OTC)	
TYR LOPHLEX PAK GMP MIX (PACKET)*	$0 (OTC)	
TYREX-1 POW (POWDER)*	$0 (OTC)	
TYREX-2 POW (POWDER)*	$0 (OTC)	
TYROS 1 POW (POWDER)*	$0 (OTC)	
TYROS 2 POW (POWDER)*	$0 (OTC)	
UCD 2 POW (POWDER)*	$0 (OTC)	
UCD ANAMIX POW INFANT (POWDER)*	$0 (OTC)	
UCD ANAMIX POW JUNIOR (POWDER)*	$0 (OTC)	
*ucd trio pow (powder)**	$0 (OTC)	
*ultramino pow soy prot (powder)**	$0 (OTC)	
UTYMAX PAK (PACKET)*	$0 (OTC)	
UTYMAX PAK CRANBERR (PACKET)*	$0 (OTC)	
VILACTIN AA POW PLUS (PACKET)*	$0 (OTC)	
VITAL HN POW (PACKET)*	$0 (OTC)	
VITRON-C TAB 65-125MG (TABLET)*	$0 (OTC)	
VIVONEX PLUS POW (PACKET)*	$0 (OTC)	
VIVONEX POW PEDIATRI (PACKET, POWDER)*	$0 (OTC)	
VIVONEX POW T.E.N. (PACKET)*	$0 (OTC)	
WELL MAGNESI TAB 400MG (TABLET)*	$0 (OTC)	
WND 1 POW (POWDER)*	$0 (OTC)	
WND 2 POW (POWDER)*	$0 (OTC)	
XLEU ANALOG POW (POWDER)*	$0 (OTC)	
XLEU MAXAMAD POW (POWDER)*	$0 (OTC)	
XLYS XTRP POW ANALOG (POWDER)*	$0 (OTC)	
XLYS-XTRP POW MAXAMAID (POWDER)*	$0 (OTC)	
XLYS-XTRP POW MAXAMUM (POWDER)*	$0 (OTC)	
XMET ANALOG POW (POWDER)*	$0 (OTC)	
XMET MAXAMAD POW (POWDER)*	$0 (OTC)	
XMET XCYS POW MAXAMAID (POWDER)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
XMTVI ANALOG POW (POWDER)*	$0 (OTC)	
XMTVI MAXAMD POW (POWDER)*	$0 (OTC)	
XPHE MAXAMAD POW (POWDER)*	$0 (OTC)	
XPHE-XTYR POW ANALOG (POWDER)*	$0 (OTC)	
XPHE-XTYR POW MAXAMAID (POWDER)*	$0 (OTC)	
XPTM ANALOG POW (POWDER)*	$0 (OTC)	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
carglumic acid (oral tablet soluble)	$0	DL
CLINOLIPID (INTRAVENOUS EMULSION)	$0	B/D, PA; DL
dextrose (10% intravenous solution, 5% intravenous solution)	$0	DL
dextrose-sodium chloride (10-0.2% intravenous solution, 10-0.45% intravenous solution, 2.5-0.45% intravenous solution, 5-0.2% intravenous solution, 5-0.45% intravenous solution, 5-0.9% intravenous solution)	$0	DL
INTRALIPID (INTRAVENOUS EMULSION)	$0	B/D, PA; DL
ISOLYTE-P IN D5W (INTRAVENOUS SOLUTION)	$0	DL
ISOLYTE-S PH 7.4 (INTRAVENOUS SOLUTION)	$0	DL
kcl in dextrose-nacl (intravenous solution)	$0	DL
kcl-lactated ringers-d5w (intravenous solution)	$0	DL
klor-con 10 (oral tablet extended release)	$0	
klor-con m10 (oral tablet extended release)	$0	
klor-con m15 (oral tablet extended release)	$0	
klor-con m20 (oral tablet extended release)	$0	
klor-con (oral packet)	$0	
klor-con 8 (oral tablet extended release)	$0	
l-glutamine (oral packet)	$0	PA; DL
magnesium sulfate (injection solution)	$0	DL
multiple electrolytes type 1 ph 7.4 (intravenous solution)	$0	DL
NUTRILIPID (INTRAVENOUS EMULSION)	$0	B/D, PA; DL
PLENAMINE (INTRAVENOUS SOLUTION)	$0	B/D, PA; DL
potassium chloride microencapsulated er (oral tablet extended release)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
potassium chloride er (oral capsule extended release)	$0	
potassium chloride er (oral tablet extended release)	$0	
potassium chloride in nacl (20-0.45meq/l-% intravenous solution, 20-0.9meq/l-% intravenous solution, 40-0.9meq/l-% intravenous solution)	$0	DL
potassium chloride (10meq/100ml intravenous solution, 20meq/100ml intravenous solution, 2meq/ml (30ml) intravenous solution, 2meq/ml (20ml) intravenous solution, 40meq/100ml intravenous solution)	$0	DL
potassium chloride (oral packet)	$0	
potassium chloride (20meq/15ml(10%) oral solution, 40meq/15ml(20%) oral solution)	$0	
potassium citrate er (oral tablet extended release)	$0	
potassium chloride in dextrose 5% (20meq/l intravenous solution)	$0	DL
PREMASOL (INTRAVENOUS SOLUTION)	$0	B/D, PA; DL
PROSOL (INTRAVENOUS SOLUTION)	$0	B/D, PA; DL
sodium chloride (0.45% intravenous solution, 0.9% intravenous solution, 3% intravenous solution, 5% intravenous solution)	$0	DL
sodium chloride (irrigation solution)	$0	
sodium fluoride (oral tablet)	$0	
TPN ELECTROLYTES (INTRAVENOUS CONCENTRATE)	$0	DL
TRAVASOL (INTRAVENOUS SOLUTION)	$0	B/D, PA; DL
TROPHAMINE (INTRAVENOUS SOLUTION)	$0	B/D, PA; DL
Electrolyte/Mineral/Metal Modifiers		
deferasirox (oral tablet) (generic jadenu)	$0	PA
deferasirox (oral tablet soluble) (generic exjade)	$0	PA; DL
tolvaptan (15mg oral tablet, 30mg oral tablet) (generic jynarque)	$0	PA; DL; QL (120 EA per 30 days)
tolvaptan (15mg oral tablet, 30mg oral tablet) (generic samsca)	$0	PA; DL; QL (120 EA per 30 days)
trientine hcl (250mg oral capsule)	$0	PA; DL; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
trientine hcl (500mg oral capsule)	$0	PA; DL; QL (120 EA per 30 days)
Potassium Binders		
LOKELMA (ORAL PACKET)	$0	DL; QL (90 EA per 30 days)
sodium polystyrene sulfonate (oral powder)	$0	
SPS (SODIUM POLYSTYRENE SULFATE) (COMBINATION SUSPENSION)	$0	DL
VELTASSA (16.8GM ORAL PACKET, 25.2GM ORAL PACKET, 8.4GM ORAL PACKET)	$0	DL; QL (30 EA per 30 days)
VELTASSA (1GM ORAL PACKET)	$0	DL; QL (120 EA per 30 days)
Vitamins		
prenatal (27-1mg oral tablet)	$0	
Gastrointestinal Agents		
Anti-Constipation Agents		
constulose (oral solution)	$0	
enulose (oral solution)	$0	
generlac (oral solution)	$0	
lactulose (10gm/15ml oral solution)	$0	
LINZESS (ORAL CAPSULE)	$0	QL (30 EA per 30 days)
lubiprostone (oral capsule)	$0	QL (60 EA per 30 days)
MOVANTIK (ORAL TABLET)	$0	QL (30 EA per 30 days)
TRULANCE (ORAL TABLET)	$0	QL (30 EA per 30 days)
Anti-Diarrheal Agents		
alosetron hcl (oral tablet)	$0	PA; DL
diphenoxylate-atropine (oral tablet)	$0	DL
loperamide hcl (oral capsule)	$0	
XERMELO (ORAL TABLET)	$0	PA; DL; QL (84 EA per 28 days)
Antispasmodics, Gastrointestinal		
dicyclomine hcl (oral capsule)	$0	DL
dicyclomine hcl (10mg/5ml oral solution)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
dicyclomine hcl (20mg oral tablet)	$0	DL
glycopyrrolate (1mg oral tablet, 2mg oral tablet)	$0	PA
methscopolamine bromide (oral tablet)	$0	DL
Gastrointestinal Agents, Other		
BYLVAY (PELLETS) (ORAL CAPSULE SPRINKLE)	$0	PA; DL
BYLVAY (ORAL CAPSULE)	$0	PA; DL
CHENODAL (ORAL TABLET)	$0	PA; DL
CLENPIQ (ORAL SOLUTION)	$0	
CTEXLI (ORAL TABLET)	$0	PA; DL
gavilyte-c (oral solution reconstituted)	$0	
gavilyte-g (oral solution reconstituted)	$0	
gavilyte-n with flavor pack (oral solution reconstituted)	$0	
sodium sulfate-potassium sulfate-magnesium sulfate (oral solution)	$0	
peg-3350-nacl-na bicarbonate-kcl (oral solution) (generic nulytely)	$0	
peg-3350-electrolytes (oral solution) (generic golytely)	$0	
SUFLAVE (ORAL SOLUTION RECONSTITUTED)	$0	DL
SUTAB (ORAL TABLET)	$0	
ursodiol (300mg oral capsule)	$0	
ursodiol (oral tablet)	$0	DL
VOQUEZNA DUAL PAK (ORAL THERAPY PACK)	$0	PA; DL
VOQUEZNA TRIPLE PAK (ORAL THERAPY PACK)	$0	PA; DL
VOWST (ORAL CAPSULE)	$0	PA; DL
Histamine2 (H2) Receptor Antagonists		
cimetidine hcl (oral solution)	$0	
cimetidine (oral tablet)	$0	
famotidine (oral suspension reconstituted)	$0	DL
famotidine (20mg oral tablet, 40mg oral tablet)	$0	
nizatidine (oral capsule)	$0	
Protectants		
misoprostol (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
sucralfate (oral suspension)	$0	DL
sucralfate (oral tablet)	$0	
Proton Pump Inhibitors		
dexlansoprazole (oral capsule delayed release)	$0	DL; QL (30 EA per 30 days)
esomeprazole magnesium (20mg oral capsule delayed release) (generic nexium)	$0	QL (90 EA per 30 days)
esomeprazole magnesium (40mg oral capsule delayed release) (generic nexium)	$0	QL (60 EA per 30 days)
lansoprazole (oral capsule delayed release)	$0	QL (60 EA per 30 days)
omeprazole (10mg oral capsule delayed release)	$0	QL (90 EA per 30 days)
omeprazole (20mg oral capsule delayed release, 40mg oral capsule delayed release)	$0	
pantoprazole sodium (20mg oral tablet delayed release)	$0	QL (90 EA per 30 days)
pantoprazole sodium (40mg oral tablet delayed release)	$0	QL (60 EA per 30 days)
rabeprazole sodium (oral tablet delayed release)	$0	
VOQUEZNA (10MG ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
VOQUEZNA (20MG ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
Gastrointestinal Agents, Other		
Gastrointestinal Agents		
*4x probiotic tab (tablet)**	$0 (OTC)	
ABATINEX CAP 680MG (CAPSULE)*	$0 (OTC)	
*acidoph/prob tab formula (tablet)**	$0 (OTC)	
*acidophilus cap (capsule)**	$0 (OTC)	
*acidophilus cap /pectin (capsule)**	$0 (OTC)	
*acidophilus cap 100mg (capsule)**	$0 (OTC)	
*acidophilus cap 10mg (capsule)**	$0 (OTC)	
*acidophilus cap ex st (capsule)**	$0 (OTC)	
*acidophilus cap high pot (capsule)**	$0 (OTC)	
ACIDOPHILUS CAP HIGH-POT (CAPSULE)*	$0 (OTC)	
*acidophilus cap lactoba (capsule)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ACIDOPHILUS CAP PEARLS (CAPSULE)*	$0 (OTC)	
*acidophilus cap probioti (capsule)**	$0 (OTC)	
*acidophilus chw (tablet chewable)**	$0 (OTC)	
*acidophilus chw probiotc (tablet chewable)**	$0 (OTC)	
*acidophilus tab (tablet)**	$0 (OTC)	
*acidophilus tab 0.5 mg (tablet)**	$0 (OTC)	
*acidophilus tab probiotc (tablet)**	$0 (OTC)	
*acidophilus tab probioti (tablet)**	$0 (OTC)	
*acidophilus waf (wafer)**	$0 (OTC)	
*acidophilus/ chw bifidus (tablet chewable)**	$0 (OTC)	
ACTIPHLORA CAP 433.34MG (CAPSULE)*	$0 (OTC)	
*adv probiotc chw gummies (tablet chewable)**	$0 (OTC)	
*advanced cap probioti (capsule)**	$0 (OTC)	
ADVANCED PRO CAP 14 (CAPSULE)*	$0 (OTC)	
ALIGN CAP 10MG (CAPSULE)*	$0 (OTC)	
ALIGN CAP EXTR STR (CAPSULE)*	$0 (OTC)	
ALIGN CHW (TABLET CHEWABLE)*	$0 (OTC)	
ALIGN JR CHW FOR KIDS (TABLET CHEWABLE)*	$0 (OTC)	
ALOE 10000 CAP PROBIOTI (CAPSULE)*	$0 (OTC)	
*anti-diarrhe tab 2-125mg (tablet)**	$0 (OTC)	
AZO COMPLETE CAP FEM BLNC (CAPSULE)*	$0 (OTC)	
AZO DUAL CAP PROTECT (CAPSULE)*	$0 (OTC)	
BACICAP CAP (CAPSULE)*	$0 (OTC)	
BACID CAP (CAPSULE)*	$0 (OTC)	
BACID TAB (TABLET)*	$0 (OTC)	
BILAC CAP (CAPSULE)*	$0 (OTC)	
BIO-KULT CAP (CAPSULE)*	$0 (OTC)	
BIOMEPRO CAP (CAPSULE, CAPSULE DELAYED RELEASE)*	$0 (OTC)	
BIOTINEX CAP (CAPSULE)*	$0 (OTC)	
CULTR ULTIMA CAP STRENGTH (CAPSULE)*	$0 (OTC)	
CULTRL TOTAL CAP BALANCE (CAPSULE)*	$0 (OTC)	
CULTUR KIDS CHW PURELY (TABLET CHEWABLE)*	$0 (OTC)	
CULTUR KIDS POW PURELY (PACKET)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
CULTURE BABY DRO IMM+DGST (LIQUID)*	$0 (OTC)	
CULTURE KIDS PAK PROB FIB (PACKET)*	$0 (OTC)	
CULTUREL KID CHW IMMUNE (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE CAP (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP ADV REG (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP DIGESTIV (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP HLTH/WEL (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP IMMUNE (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP IMMUNITY (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP PRO-WELL (CAPSULE)*	$0 (OTC)	
CULTURELLE CAP WOMENS (CAPSULE)*	$0 (OTC)	
CULTURELLE CHW DIGESTIV (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE CHW GUMMIES (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE CHW IMMUNE (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE CHW WOMENS (TABLET CHEWABLE)*	$0 (OTC)	
CULTURELLE PAK KIDS (PACKET)*	$0 (OTC)	
CULTURELLE PAK PROBIOT (PACKET)*	$0 (OTC)	
*cvs probioti cap (capsule)**	$0 (OTC)	
*cvs probioti cap adult 50 (capsule)**	$0 (OTC)	
*cvs probioti chw children (tablet chewable)**	$0 (OTC)	
*cvs senior cap probiotc (capsule)**	$0 (OTC)	
*cvsdigestive cap probiotc (capsule)**	$0 (OTC)	
DAILY CHEW CHW BERRY (TABLET CHEWABLE)*	$0 (OTC)	
*daily digest cap probioti (capsule)**	$0 (OTC)	
*daily probio cap 250mg (capsule)**	$0 (OTC)	
DAILY ULTIMA CAP PROBIOTI (CAPSULE)*	$0 (OTC)	
DERMACINRX CAP PROBISOL (CAPSULE)*	$0 (OTC)	
DERMACINRX CAP PROBITRA (CAPSULE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
DIALYVITE CHW PROBIOTI (TABLET CHEWABLE)*	$0 (OTC)	
*diges probio cap 250mg (capsule)**	$0 (OTC)	
DIGESTIVE AD CAP BWL SUP (CAPSULE)*	$0 (OTC)	
DIGESTIVE AD CAP DGS/IMMN (CAPSULE)*	$0 (OTC)	
DIGESTIVE AD CAP GAS SUP (CAPSULE)*	$0 (OTC)	
DIGESTIVE AD CAP LACT SUP (CAPSULE)*	$0 (OTC)	
DIGESTIVE AD CHW DGS/IMMN (TABLET CHEWABLE)*	$0 (OTC)	
DIGESTIVE AD CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
DIGESTIVE CAP ADVANTAG (CAPSULE)*	$0 (OTC)	
*digestive cap health (capsule)**	$0 (OTC)	
*digestive cap probiotc (capsule)**	$0 (OTC)	
*digestive cap probioti (capsule)**	$0 (OTC)	
*digestive chw advantag (tablet chewable)**	$0 (OTC)	
*digestv prob cap 250mg (capsule)**	$0 (OTC)	
DUAL PRENATA CAP IMMUNITY (CAPSULE)*	$0 (OTC)	
ENVIVE CAP 115MG (CAPSULE)*	$0 (OTC)	
*eq probiotic cap (capsule, capsule delayed release)**	$0 (OTC)	
*eql 4x tab probiotc (tablet)**	$0 (OTC)	
*eql daily cap probioti (capsule)**	$0 (OTC)	
*eql probioti cap colon (capsule)**	$0 (OTC)	
*everyday car cap probioti (capsule)**	$0 (OTC)	
FEM-DOPHILUS CAP WOMENS (CAPSULE)*	$0 (OTC)	
FLORA VANCE CAP (CAPSULE)*	$0 (OTC)	
FLORAJEN CAP ACIDOPHI (CAPSULE)*	$0 (OTC)	
FLORAJEN CAP DIGESTIO (CAPSULE)*	$0 (OTC)	
FLORAJEN CAP KIDS (CAPSULE)*	$0 (OTC)	
FLORAJEN CAP WOMEN (CAPSULE)*	$0 (OTC)	
FLORAJEN DIG CAP (CAPSULE)*	$0 (OTC)	
FLORANEX GRA (PACKET)*	$0 (OTC)	
*floranex tab (tablet)**	$0 (OTC)	
FORTFY DAILY CAP PROBIOTI (CAPSULE, CAPSULE DELAYED RELEASE)*	$0 (OTC)	
*geri-lanta sus (suspension)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
geri-lanta sus max st (suspension) *	$0 (OTC)	
geri-mox sus (suspension) *	$0 (OTC)	
gnp antacid chw 160-105 (tablet chewable) *	$0 (OTC)	
gnp antacid sus cherry (suspension) *	$0 (OTC)	
gnp antacid sus coolmint (suspension) *	$0 (OTC)	
gnp antacid sus original (suspension) *	$0 (OTC)	
gnp antacid sus reg st (suspension) *	$0 (OTC)	
goodsense sus ant/gas (suspension) *	$0 (OTC)	
high potency cap probioti (capsule) *	$0 (OTC)	
IDEAL BOWEL CAP PROBIOTI (CAPSULE)*	$0 (OTC)	
intestinex cap (capsule) *	$0 (OTC)	
JARRO-DOPHIL CAP EPS (CAPSULE DELAYED RELEASE)*	$0 (OTC)	
JARRO-DOPHIL CAP HYPOALLE (CAPSULE)*	$0 (OTC)	
JARRO-DOPHIL CAP PROBIOTI (CAPSULE, CAPSULE DELAYED RELEASE)*	$0 (OTC)	
KIDS PROBIOT PAK FIBER (PACKET)*	$0 (OTC)	
LACTEROL CAP (CAPSULE)*	$0 (OTC)	
lactobacillu cap (capsule) *	$0 (OTC)	
lactobacillu pak (packet) *	$0 (OTC)	
lactobacillu tab (tablet) *	$0 (OTC)	
lacto-pectin cap (capsule) *	$0 (OTC)	
loper/simeth tab 2-125mg (tablet) *	$0 (OTC)	
mag oxide tab 400mg (tablet) *	$0 (OTC)	
magnesium tab 250mg (tablet) *	$0 (OTC)	
mega cap probioti (capsule) *	$0 (OTC)	
META BIOTIC CAP BIO-ACT (CAPSULE)*	$0 (OTC)	
METABOLISM CAP WEIGHT (CAPSULE)*	$0 (OTC)	
mintox sus max st (suspension) *	$0 (OTC)	
MOMMYS BLISS POW PROBIOTI (PACKET)*	$0 (OTC)	
more-dophilu pow acidophi (powder) *	$0 (OTC)	
MYLANTA COAT SUS & COOL (SUSPENSION)*	$0 (OTC)	
MYLANTA SUS MAX ST (SUSPENSION)*	$0 (OTC)	
natrul cap probioti (capsule) *	$0 (OTC)	
NEWFLORA CAP PROBIOTI (CAPSULE)*	$0 (OTC)	
OPTIBALANCE CAP PROBIOTC (CAPSULE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
PEARLS IC CAP (CAPSULE)*	$0 (OTC)	
PHILLIPS CAP COLON (CAPSULE)*	$0 (OTC)	
PREORBOTIC CAP (CAPSULE)*	$0 (OTC)	
*primadophilu cap (capsule)**	$0 (OTC)	
*prob chocol chw bears (tablet chewable)**	$0 (OTC)	
*probiata tab (tablet)**	$0 (OTC)	
PROBINATE CAP (CAPSULE)*	$0 (OTC)	
PROBIO CAP DEFENSE (CAPSULE)*	$0 (OTC)	
*probio colon cap support (capsule)**	$0 (OTC)	
PROBIOMAX CAP COMPLETE (CAPSULE)*	$0 (OTC)	
PROBIOMAX CAP DAILY DF (CAPSULE)*	$0 (OTC)	
PROBIOMAX CAP LEAN DF (CAPSULE)*	$0 (OTC)	
PROBIOMAX IG CAP 26 DF (CAPSULE)*	$0 (OTC)	
PROBIOMAX SB CAP DF (CAPSULE)*	$0 (OTC)	
*probiot dig cap support (capsule)**	$0 (OTC)	
PROBIOT PRLS CAP MAX POTE (CAPSULE)*	$0 (OTC)	
PROBIOT PRLS CAP WOMENS (CAPSULE)*	$0 (OTC)	
*probiotic + cap omega-3 (capsule)**	$0 (OTC)	
PROBIOTIC + CHW PREBIOTI (TABLET CHEWABLE)*	$0 (OTC)	
*probiotic cap (capsule)**	$0 (OTC)	
*probiotic cap 250mg (capsule)**	$0 (OTC)	
*probiotic cap acidophi (capsule)**	$0 (OTC)	
*probiotic cap adlt 50+ (capsule)**	$0 (OTC)	
*probiotic cap adult (capsule)**	$0 (OTC)	
*probiotic cap blend (capsule)**	$0 (OTC)	
*probiotic cap colon (capsule)**	$0 (OTC)	
*probiotic cap complex (capsule)**	$0 (OTC)	
*probiotic cap daily (capsule)**	$0 (OTC)	
*probiotic cap digestiv (capsule)**	$0 (OTC)	
*probiotic cap max str (capsule)**	$0 (OTC)	
*probiotic cap max stre (capsule)**	$0 (OTC)	
*probiotic cap mood (capsule)**	$0 (OTC)	
*probiotic cap pearls (capsule)**	$0 (OTC)	
*probiotic cap prebioti (capsule)**	$0 (OTC)	
*probiotic cap super (capsule)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
probiotic cap turmeric (capsule) *	$0 (OTC)	
probiotic cap vita c (capsule) *	$0 (OTC)	
probiotic chw (tablet chewable) *	$0 (OTC)	
probiotic chw child (tablet chewable) *	$0 (OTC)	
probiotic chw children (tablet chewable) *	$0 (OTC)	
probiotic chw childrns (tablet chewable) *	$0 (OTC)	
probiotic chw gummies (tablet chewable) *	$0 (OTC)	
PROBIOTIC CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
probiotic dro colic (liquid) *	$0 (OTC)	
PROBIOTIC LIQ 15 DAY (LIQUID)*	$0 (OTC)	
PROBIOTIC LIQ NEWBORN (LIQUID)*	$0 (OTC)	
probiotic pak children (packet) *	$0 (OTC)	
probiotic tab 2 in 1 (tablet) *	$0 (OTC)	
probiotic tab enzyme (tablet) *	$0 (OTC)	
probiotic tab triple (tablet) *	$0 (OTC)	
PROBITROL CAP (CAPSULE)*	$0 (OTC)	
PROBIZEN CAP (CAPSULE)*	$0 (OTC)	
PRO-FLORA CAP IMMUNE (CAPSULE)*	$0 (OTC)	
PROMELLA CAP PREBIOTI (CAPSULE)*	$0 (OTC)	
PROMEROL CAP (CAPSULE)*	$0 (OTC)	
PROVELLA TAB (TABLET)*	$0 (OTC)	
qc antacid sus anti-gas (suspension) *	$0 (OTC)	
quad-probiot cap (capsule) *	$0 (OTC)	
ra probiotic cap digestiv (capsule) *	$0 (OTC)	
ra probiotic chw gummies (tablet chewable) *	$0 (OTC)	
REJUVAFLOR CAP (CAPSULE)*	$0 (OTC)	
resistance cap formula (capsule) *	$0 (OTC)	
RESTORA CAP (CAPSULE)*	$0 (OTC)	
RISA-BID TAB PROBIO (TABLET)*	$0 (OTC)	
RISAQUAD CAP (CAPSULE)*	$0 (OTC)	
RISAQUAD-2 CAP (CAPSULE)*	$0 (OTC)	
saccharomyce cap boulardi (capsule, capsule delayed release) *	$0 (OTC)	
SACCHAROMYCI CAP 250MG (CAPSULE)*	$0 (OTC)	
SD PROBIOTIC CAP 10 CMPLX (CAPSULE)*	$0 (OTC)	
sm probiotic cap 250mg (capsule) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
SMARTY PANTS CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
STABLEGI CAP 250MG (CAPSULE)*	$0 (OTC)	
SUPERIOR CAP PROBIOTI (CAPSULE)*	$0 (OTC)	
TRUBIOTICS CAP (CAPSULE)*	$0 (OTC)	
TRUBIOTICS CAP DIG+IMMU (CAPSULE)*	$0 (OTC)	
TRUBIOTICS CHW DIG+IMMU (TABLET CHEWABLE)*	$0 (OTC)	
TRUBIOTICS CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
ULTRAFLORA CAP IMMUNE (CAPSULE)*	$0 (OTC)	
UP4 PROBIOTI CAP ADULTS (CAPSULE)*	$0 (OTC)	
UP4 PROBIOTI CAP ULTRA (CAPSULE)*	$0 (OTC)	
UP4 PROBIOTI CAP WOMENS (CAPSULE)*	$0 (OTC)	
UP4 PROBIOTI CHW GUMMIES (TABLET CHEWABLE)*	$0 (OTC)	
UP4 PROBIOTI CHW KIDS (TABLET CHEWABLE)*	$0 (OTC)	
UP4 PROBIOTI CHW KIDS CUB (TABLET CHEWABLE)*	$0 (OTC)	
URO MAG CAP 140MG (CAPSULE)*	$0 (OTC)	
VISBIOME GI CAP CARE (CAPSULE)*	$0 (OTC)	
XYBIOTIC CAP (CAPSULE)*	$0 (OTC)	
YUMVS PROBIO CHW ZERO (TABLET CHEWABLE)*	$0 (OTC)	
YUMVSKIDS CHW PROBIOTI (TABLET CHEWABLE)*	$0 (OTC)	
YUM-YUM DOPH CHW PROBIOTI (TABLET CHEWABLE)*	$0 (OTC)	
ZELAC CAP (CAPSULE)*	$0 (OTC)	
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
betaine (oral powder)	$0	DL
CHOLBAM (ORAL CAPSULE)	$0	PA; DL
CREON (ORAL CAPSULE DELAYED RELEASE PARTICLES)	$0	
cromolyn sodium (oral concentrate)	$0	
CYSTAGON (ORAL CAPSULE)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
levocarnitine (oral solution)	$0	
levocarnitine (oral tablet)	$0	
miglustat (oral capsule)	$0	PA; DL
nitisinone (oral capsule)	$0	DL
PROLASTIN-C (INTRAVENOUS SOLUTION)	$0	PA; DL
PYRUKYND (20MG ORAL TABLET, 5MG ORAL TABLET)	$0	PA; DL; QL (56 EA per 28 days)
PYRUKYND (50MG ORAL TABLET)	$0	PA; DL; QL (112 EA per 28 days)
PYRUKYND TAPER PACK (5MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (7 EA per 7 days)
PYRUKYND TAPER PACK (7 X 20MG & 7 X 5MG ORAL TABLET THERAPY PACK, 7 X 50MG & 7 X 20MG ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (14 EA per 14 days)
REVCOVI (INTRAMUSCULAR SOLUTION)	$0	PA; DL
sapropterin dihydrochloride (oral packet)	$0	DL
sapropterin dihydrochloride (oral tablet)	$0	DL
sodium phenylbutyrate (oral powder)	$0	DL
sodium phenylbutyrate (oral tablet)	$0	DL
SUCRAID (ORAL SOLUTION)	$0	DL
VYNDAMAX (ORAL CAPSULE)	$0	PA; DL; QL (30 EA per 30 days)
VYNDAQEL (ORAL CAPSULE)	$0	PA; DL; QL (120 EA per 30 days)
WELIREG (ORAL TABLET)	$0	PA; DL; QL (90 EA per 30 days)
yargesa (oral capsule)	$0	PA; DL
ZENPEP (ORAL CAPSULE DELAYED RELEASE PARTICLES)	$0	
Genitourinary Agents		
Antispasmodics, Urinary		
GEMTESA (ORAL TABLET)	$0	DL
MYRBETRIQ (ORAL SUSPENSION RECONSTITUTED ER)	$0	
MYRBETRIQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
oxybutynin chloride er (10mg oral tablet extended release 24 hour)	$0	QL (90 EA per 30 days)
oxybutynin chloride er (15mg oral tablet extended release 24 hour)	$0	QL (60 EA per 30 days)
oxybutynin chloride er (5mg oral tablet extended release 24 hour)	$0	QL (30 EA per 30 days)
oxybutynin chloride (oral solution)	$0	
oxybutynin chloride (5mg oral tablet immediate release)	$0	
solifenacin succinate (oral tablet)	$0	QL (30 EA per 30 days)
tolterodine tartrate er (oral capsule extended release 24 hour)	$0	DL
tolterodine tartrate (oral tablet)	$0	DL
trospium chloride (oral tablet)	$0	
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er (oral tablet extended release 24 hour)	$0	
dutasteride (oral capsule)	$0	QL (30 EA per 30 days)
finasteride (5mg oral tablet) (generic proscar)	$0	
silodosin (oral capsule)	$0	QL (30 EA per 30 days)
tadalafil (2.5mg oral tablet, 5mg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
tamsulosin hcl (oral capsule)	$0	
terazosin hcl (oral capsule)	$0	
Genitourinary Agents, Other		
bethanechol chloride (oral tablet)	$0	
penicillamine (oral tablet)	$0	DL
Glycemic Agents		
Blood Glucose Regulators		
DEX4 CHW ORANGE (TABLET CHEWABLE)*	$0 (OTC)	
DEX4 CHW RASPBERR (TABLET CHEWABLE)*	$0 (OTC)	
DEX4 GLUCOSE CHW (TABLET CHEWABLE)*	$0 (OTC)	
*glucose chw 4-.006gm (tablet chewable)**	$0 (OTC)	
*glucose chw 4-0.006 (tablet chewable)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
GLUCOSE CHW GRAPE (TABLET CHEWABLE)*	$0 (OTC)	
*glucose chw orange (tablet chewable)**	$0 (OTC)	
GLUCOSE CHW RASPBERY (TABLET CHEWABLE)*	$0 (OTC)	
*glucose chw raspbrry (tablet chewable)**	$0 (OTC)	
*glucose chw trop frt (tablet chewable)**	$0 (OTC)	
*krog glucose chw grape (tablet chewable)**	$0 (OTC)	
*krog glucose chw orange (tablet chewable)**	$0 (OTC)	
RELION GLUCO CHW 4GM (TABLET CHEWABLE)*	$0 (OTC)	
SMART SENSE CHW 4GM (TABLET CHEWABLE)*	$0 (OTC)	
*tgt glucose chw raspbery (tablet chewable)**	$0 (OTC)	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
deflazacort (oral suspension)	$0	PA; DL
deflazacort (oral tablet)	$0	PA; DL
dexamethasone (oral solution)	$0	
dexamethasone (oral tablet)	$0	
fludrocortisone acetate (oral tablet)	$0	
hydrocortisone (oral tablet)	$0	
jaythari (oral tablet)	$0	PA; DL
methylprednisolone (oral tablet)	$0	
methylprednisolone (oral tablet therapy pack)	$0	
prednisolone (oral solution)	$0	
prednisolone sodium phosphate (25mg/5ml oral solution, 5mg/5ml oral solution)	$0	
prednisone intensol (oral concentrate)	$0	
prednisone (5mg/5ml oral solution)	$0	
prednisone (oral tablet)	$0	
prednisone (oral tablet therapy pack)	$0	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
desmopressin acetate (oral tablet)	$0	
desmopressin acetate spray (nasal solution)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
GENOTROPIN MINIQUICK (0.2MG SUBCUTANEOUS PREFILLED SYRINGE)	$0	PA; DL
GENOTROPIN MINIQUICK (0.4MG SUBCUTANEOUS PREFILLED SYRINGE, 0.6MG SUBCUTANEOUS PREFILLED SYRINGE, 0.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1.2MG SUBCUTANEOUS PREFILLED SYRINGE, 1.4MG SUBCUTANEOUS PREFILLED SYRINGE, 1.6MG SUBCUTANEOUS PREFILLED SYRINGE, 1.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1MG SUBCUTANEOUS PREFILLED SYRINGE, 2MG SUBCUTANEOUS PREFILLED SYRINGE)	$0	PA; DL
GENOTROPIN (SUBCUTANEOUS CARTRIDGE)	$0	PA; DL
INCRELEX (SUBCUTANEOUS SOLUTION)	$0	PA; DL
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
danazol (oral capsule)	$0	DL
testosterone cypionate (intramuscular solution)	$0	
testosterone enanthate (intramuscular solution)	$0	
testosterone (25mg/2.5gm 1% transdermal gel, 50mg/5gm 1% transdermal gel), testosterone pump (1% transdermal gel)	$0	
testosterone (20.25mg/1.25gm 1.62% transdermal gel, 40.5mg/2.5gm 1.62% transdermal gel), testosterone pump (1.62% transdermal gel)	$0	DL
Estrogens		
altavera (oral tablet)	$0	
alyacen 1/35 (oral tablet)	$0	
apri (oral tablet)	$0	
aranelle (oral tablet)	$0	
ashlyna (oral tablet)	$0	
aubra eq (oral tablet)	$0	
aviane (oral tablet)	$0	
azurette (oral tablet)	$0	
balziva (oral tablet)	$0	
blisovi 24 fe (oral tablet)	$0	
blisovi fe 1.5/30 (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
briellyn (oral tablet)	$0	
camrese lo (oral tablet)	$0	
CLIMARA PRO (TRANSDERMAL PATCH WEEKLY)	$0	DL
cryselle-28 (oral tablet)	$0	
cyred eq (oral tablet)	$0	
DEPO-ESTRADIOL (INTRAMUSCULAR OIL)	$0	DL
dolishale (oral tablet)	$0	
drospirenone-ethinyl estradiol (oral tablet)	$0	
DUAVEE (ORAL TABLET)	$0	DL
eluryng (vaginal ring)	$0	
enilloring (vaginal ring)	$0	
enskyce (oral tablet)	$0	
estarylla (oral tablet)	$0	
estradiol (oral tablet)	$0	
estradiol (0.75mg/1.25gm(0.06%) transdermal gel)	$0	DL
estradiol (transdermal patch weekly)	$0	QL (4 EA per 28 days)
estradiol (vaginal cream)	$0	
estradiol (vaginal tablet)	$0	DL; QL (18 EA per 28 days)
estradiol valerate (intramuscular oil)	$0	DL
ESTRING (VAGINAL RING)	$0	DL
etonogestrel-ethinyl estradiol (vaginal ring)	$0	
falmina (oral tablet)	$0	
feirza 1.5/30 (oral tablet)	$0	
feirza 1/20 (oral tablet)	$0	
finzala (oral tablet chewable)	$0	
fyavolv (oral tablet)	$0	DL
galbriela (oral tablet chewable)	$0	
hailey 24 fe (oral tablet)	$0	
haloette (vaginal ring)	$0	
iclevia (oral tablet)	$0	
introvale (oral tablet)	$0	
isibloom (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
jaimiess (oral tablet)	$0	
jasmiel (oral tablet)	$0	
jinteli (oral tablet)	$0	DL
juleber (oral tablet)	$0	
junel 1.5/30 (oral tablet)	$0	
junel 1/20 (oral tablet)	$0	
junel fe 1.5/30 (oral tablet)	$0	
junel fe 1/20 (oral tablet)	$0	
junel fe 24 (oral tablet)	$0	
kaitlib fe (oral tablet chewable)	$0	
kariva (oral tablet)	$0	
kelnor 1/35 (oral tablet)	$0	
kurvelo (oral tablet)	$0	
larin 1.5/30 (oral tablet)	$0	
larin 1/20 (oral tablet)	$0	
larin fe 1.5/30 (oral tablet)	$0	
larin fe 1/20 (oral tablet)	$0	
lessina (oral tablet)	$0	
levonest (oral tablet)	$0	
levonorgestrel-ethinyl estradiol 91-day (0.1-0.02 & 0.01mg oral tablet, 0.15-0.03mg oral tablet)	$0	
levonorgestrel-ethinyl estradiol (oral tablet)	$0	
levonorgestrel-ethinyl estradiol triphasic (oral tablet)	$0	
levora 0.15/30 (28) (oral tablet)	$0	
lojaimiess (oral tablet)	$0	
loryna (oral tablet)	$0	
low-ogestrel (oral tablet)	$0	
lutera (oral tablet)	$0	
marlissa (oral tablet)	$0	
mibelas 24 fe (oral tablet chewable)	$0	
microgestin 1.5/30 (oral tablet)	$0	
microgestin 1/20 (oral tablet)	$0	
microgestin fe 1.5/30 (oral tablet)	$0	
microgestin fe 1/20 (oral tablet)	$0	
mili (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
necon 0.5/35 (28) (oral tablet)	$0	
nikki (oral tablet)	$0	
norelgestromin-ethinyl estradiol (transdermal patch weekly)	$0	
norethindrone acetate-ethinyl estradiol-fe (1-20mg-mcg oral tablet chewable)	$0	
norethindrone acetate-ethinyl estradiol (1-20mg-mcg oral tablet)	$0	
norethindrone acetate-ethinyl estradiol (0.5-2.5mg-mcg oral tablet, 1-5mg-mcg oral tablet)	$0	DL
norgestimate-ethinyl estradiol (0.25-35mg-mcg oral tablet)	$0	
norgestimate-ethinyl estradiol triphasic (oral tablet)	$0	
nortrel 0.5/35 (28) (oral tablet)	$0	
nortrel 1/35 (21) (oral tablet)	$0	
nortrel 1/35 (28) (oral tablet)	$0	
nortrel 7/7/7 (oral tablet)	$0	
nylia 1/35 (oral tablet)	$0	
nylia 7/7/7 (oral tablet)	$0	
ocella (oral tablet)	$0	
pimtrea (oral tablet)	$0	
portia-28 (oral tablet)	$0	
PREMARIN (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
PREMARIN (VAGINAL CREAM)	$0	
PREMPHASE (ORAL TABLET)	$0	DL; QL (28 EA per 28 days)
PREMPRO (ORAL TABLET)	$0	DL; QL (28 EA per 28 days)
reclipsen (oral tablet)	$0	
rivelsa (oral tablet)	$0	
rosyrah (oral tablet)	$0	
setlakin (oral tablet)	$0	
sprintec 28 (oral tablet)	$0	
sronyx (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
syeda (oral tablet)	$0	
tarina 24 fe (oral tablet)	$0	
tarina fe 1/20 eq (oral tablet)	$0	
tilia fe (oral tablet)	$0	
tri-estarylla (oral tablet)	$0	
tri-legest fe (oral tablet)	$0	
tri-lo-estarylla (oral tablet)	$0	
tri-lo-sprintec (oral tablet)	$0	
tri-mili (oral tablet)	$0	
tri-sprintec (oral tablet)	$0	
tri-vylibra lo (oral tablet)	$0	
tri-vylibra (oral tablet)	$0	
turqoz (oral tablet)	$0	
valtya 1/50 (oral tablet)	$0	
velivet (oral tablet)	$0	
vestura (oral tablet)	$0	
vienva (oral tablet)	$0	
vyfemla (oral tablet)	$0	
vylibra (oral tablet)	$0	
wymzya fe (oral tablet chewable)	$0	
xarah fe (oral tablet)	$0	
xelria fe (oral tablet chewable)	$0	
xulane (transdermal patch weekly)	$0	
yuvafem (vaginal tablet)	$0	DL; QL (18 EA per 28 days)
zafemy (transdermal patch weekly)	$0	
zovia 1/35 (28) (oral tablet)	$0	
Progestins		
camila (oral tablet)	$0	
CRINONE (8% VAGINAL GEL)	$0	PA; DL
deblitane (oral tablet)	$0	
DEPO-SUBQ PROVERA 104 (SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE)	$0	
errin (oral tablet)	$0	
gallifrey (oral tablet)	$0	
heather (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
incassia (oral tablet)	$0	
LILETTA (52MG) (INTRAUTERINE DEVICE)	$0	
lyleq (oral tablet)	$0	
lyza (oral tablet)	$0	
medroxyprogesterone acetate (intramuscular suspension)	$0	
medroxyprogesterone acetate (intramuscular suspension prefilled syringe)	$0	
medroxyprogesterone acetate (oral tablet)	$0	
megestrol acetate (40mg/ml oral suspension)	$0	
megestrol acetate (625mg/5ml oral suspension)	$0	DL
megestrol acetate (oral tablet)	$0	
meleya (oral tablet)	$0	
NEXPLANON (SUBCUTANEOUS IMPLANT)	$0	
nora-be (oral tablet)	$0	
norethindrone acetate (5mg oral tablet)	$0	
norethindrone (0.35mg oral tablet)	$0	
orquidea (oral tablet)	$0	
progesterone (oral capsule)	$0	
sharobel (oral tablet)	$0	
Selective Estrogen Receptor Modifying Agents		
OSPHENA (ORAL TABLET)	$0	PA; QL (30 EA per 30 days)
raloxifene hcl (oral tablet)	$0	QL (30 EA per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
levothyroxine sodium (oral tablet)	$0	
levoxyl (oral tablet)	$0	
liothyronine sodium (oral tablet)	$0	
SYNTHROID (ORAL TABLET)	$0	
unithroid (oral tablet)	$0	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
bromocriptine mesylate (oral capsule)	$0	
bromocriptine mesylate (oral tablet)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
cabergoline (oral tablet)	$0	
ELIGARD (22.5MG SUBCUTANEOUS KIT)	$0	PA; DL; QL (1 EA per 84 days)
ELIGARD (30MG SUBCUTANEOUS KIT)	$0	PA; DL; QL (1 EA per 112 days)
ELIGARD (45MG SUBCUTANEOUS KIT)	$0	PA; DL; QL (1 EA per 168 days)
ELIGARD (7.5MG SUBCUTANEOUS KIT)	$0	PA; DL; QL (1 EA per 28 days)
FIRMAGON (240MG DOSE) (120MG/VIAL SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL; QL (4 EA per 365 days)
FIRMAGON (80MG SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL; QL (1 EA per 28 days)
leuprolide acetate (subcutaneous injection kit)	$0	PA; DL; QL (2 EA per 28 days)
LUPRON DEPOT (1-MONTH) (INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 28 days)
LUPRON DEPOT (3-MONTH) (INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 84 days)
LUPRON DEPOT (4-MONTH) (INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 112 days)
LUPRON DEPOT (6-MONTH) (INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 168 days)
LUPRON DEPOT-PED (1-MONTH) (7.5MG INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 28 days)
LUPRON DEPOT-PED (3-MONTH) (11.25MG INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 84 days)
LUPRON DEPOT-PED (6-MONTH) (INTRAMUSCULAR KIT)	$0	PA; DL; QL (1 EA per 168 days)
mifepristone (300mg oral tablet)	$0	PA; DL; QL (120 EA per 30 days)
octreotide acetate (injection solution)	$0	PA; DL
SIGNIFOR (SUBCUTANEOUS SOLUTION)	$0	PA; DL
SOMAVERT (SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL; QL (30 EA per 30 days)
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
methimazole (oral tablet)	$0	
propylthiouracil (oral tablet)	$0	
Immunological Agents		
Angioedema Agents		
HAEGARDA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL
icatibant acetate (subcutaneous solution prefilled syringe)	$0	PA; DL; QL (36 ML per 30 days)
Immunoglobulins		
GAMUNEX-C (1GM/10ML INJECTION SOLUTION)	$0	PA; DL
OCTAGAM (1GM/20ML INTRAVENOUS SOLUTION, 2GM/20ML INTRAVENOUS SOLUTION)	$0	PA; DL
Immunological Agents, Other		
ARCALYST (SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL
BENLYSTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
BENLYSTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
COSENTYX (300MG DOSE) (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (10 ML per 30 days)
COSENTYX SENSOREADY (300MG) (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (10 ML per 30 days)
COSENTYX (75MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (10 ML per 30 days)
COSENTYX UNOREADY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (10 ML per 30 days)
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (4.56 ML per 28 days)
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (8 ML per 28 days)
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (4.56 ML per 28 days)
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (8 ML per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
EBGLYSS (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
EBGLYSS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
KINERET (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
OTEZLA (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
OTEZLA (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (110 EA per 365 days)
RINVOQ LQ (ORAL SOLUTION)	$0	PA; DL; QL (360 ML per 30 days)
RINVOQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	PA; DL; QL (30 EA per 30 days)
SKYRIZI PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (1 ML per 28 days)
SKYRIZI (180MG/1.2ML SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	PA; DL; QL (1.2 ML per 56 days)
SKYRIZI (360MG/2.4ML SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	PA; DL; QL (2.4 ML per 56 days)
SKYRIZI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (1 ML per 28 days)
SOTYKTU (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
STELARA (SUBCUTANEOUS SOLUTION)	$0	PA; DL; QL (3 ML per 84 days)
STELARA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3 ML per 84 days)
STEQEYMA (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; QL (3 ML per 84 days)
STEQEYMA (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3 ML per 84 days)
TREMFYA CROHNS INDUCTION (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
TREMFYA ONE-PRESS (100MG/ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (2 ML per 56 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TREMFYA PEN (200MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (2 ML per 28 days)
TREMFYA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (2 ML per 56 days)
TREMFYA (200MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (2 ML per 28 days)
TYENNE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (3.6 ML per 28 days)
TYENNE (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3.6 ML per 28 days)
USTEKINUMAB (SUBCUTANEOUS SOLUTION) (BRAND EQUIVALENT STELARA)	$0	PA; DL; QL (3 ML per 84 days)
USTEKINUMAB (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE) (BRAND EQUIVALENT STELARA)	$0	PA; DL; QL (3 ML per 84 days)
XELJANZ (ORAL SOLUTION)	$0	PA; DL; QL (300 ML per 30 days)
XELJANZ (ORAL TABLET IMMEDIATE RELEASE)	$0	PA; DL; QL (60 EA per 30 days)
XELJANZ XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	$0	PA; DL; QL (30 EA per 30 days)
XOLAIR (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL
YESINTEK (SUBCUTANEOUS SOLUTION)	$0	PA; QL (3 ML per 84 days)
YESINTEK (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; QL (3 ML per 84 days)
YESINTEK (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3 ML per 84 days)
Immunostimulants		
ACTIMMUNE (SUBCUTANEOUS SOLUTION)	$0	DL
BESREMI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
PEGASYS (SUBCUTANEOUS SOLUTION)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
PEGASYS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
Immunosuppressants		
ADALIMUMAB-AATY (1 PEN) (80MG/0.8ML SUBCUTANEOUS AUTO-INJECTOR KIT)	$0	PA; DL
ADALIMUMAB-AATY (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT)	$0	PA; DL
ADALIMUMAB-AATY (2 SYRINGE) (SUBCUTANEOUS PREFILLED SYRINGE KIT)	$0	PA; DL
ADALIMUMAB-AATY (CROHN'S DISEASE/ ULCERATIVE COLITIS/HIDRADENITIS SUPPURATIVA STARTER) (SUBCUTANEOUS AUTO-INJECTOR KIT)	$0	PA; DL
ADALIMUMAB-ADBM (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT) (BOEHRINGER INGELHEIM)	$0	PA; DL; QL (4 EA per 28 days)
ADALIMUMAB-ADBM (2 SYRINGE) (10MG/ 0.2ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 20MG/0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	$0	PA; DL; QL (2 EA per 28 days)
ADALIMUMAB-ADBM (2 SYRINGE) (40MG/ 0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 40MG/0.8ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	$0	PA; DL; QL (4 EA per 28 days)
ASTAGRAF XL (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	$0	B/D, PA; DL
azathioprine (50mg oral tablet)	$0	B/D, PA
cyclosporine modified (oral capsule)	$0	B/D, PA
cyclosporine modified (oral solution)	$0	B/D, PA
cyclosporine (oral capsule)	$0	B/D, PA
ENBREL MINI (SUBCUTANEOUS SOLUTION CARTRIDGE)	$0	PA; DL; QL (8 ML per 28 days)
ENBREL (SUBCUTANEOUS SOLUTION)	$0	PA; DL; QL (4 ML per 28 days)
ENBREL (25MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (4 ML per 28 days)
ENBREL (50MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (8 ML per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ENBREL SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (8 ML per 28 days)
everolimus (0.25mg oral tablet, 0.5mg oral tablet)	$0	B/D, PA; DL
everolimus (0.75mg oral tablet, 1mg oral tablet)	$0	B/D, PA; DL
gengraf (oral capsule)	$0	B/D, PA
leflunomide (oral tablet)	$0	
methotrexate sodium (50mg/2ml injection solution prefilled syringe)	$0	
methotrexate sodium (50mg/2ml injection solution)	$0	
methotrexate sodium (oral tablet)	$0	
mycophenolate mofetil (oral capsule)	$0	B/D, PA
mycophenolate mofetil (oral suspension reconstituted)	$0	B/D, PA; DL
mycophenolate mofetil (oral tablet)	$0	B/D, PA
mycophenolate sodium (oral tablet delayed release)	$0	B/D, PA; DL
PROGRAF (ORAL PACKET)	$0	B/D, PA; DL
sirolimus (oral solution)	$0	B/D, PA; DL
sirolimus (oral tablet)	$0	B/D, PA; DL
tacrolimus (oral capsule)	$0	B/D, PA
XATMEP (ORAL SOLUTION)	$0	PA; DL
Vaccines		
ABRYSVO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)
ACTHIB (INTRAMUSCULAR SOLUTION RECONSTITUTED)	$0	QL (1 EA per 1 day)
ADACEL (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
AREXVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)
BCG VACCINE (INJECTION SOLUTION RECONSTITUTED)	$0	QL (1 EA per 1 day)
BEXSERO (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	PA; QL (0.5 ML per 1 day)
BOOSTRIX (5-2.5-18.5LF-MCG/0.5 INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BOOSTRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
DAPTACEL (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
ENGERIX-B (INJECTION SUSPENSION)	$0	B/D, PA; QL (1 ML per 1 day)
ENGERIX-B (10MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	$0	B/D, PA; QL (0.5 ML per 1 day)
ENGERIX-B (20MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	$0	B/D, PA; QL (1 ML per 1 day)
GARDASIL 9 (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
GARDASIL 9 (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
HAVRIX (INTRAMUSCULAR SUSPENSION)	$0	QL (2 ML per 999 days)
HAVRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (1 ML per 999 days)
HEPLISAV-B (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	$0	B/D, PA; QL (0.5 ML per 1 day)
HIBERIX (INJECTION SOLUTION RECONSTITUTED)	$0	QL (1 EA per 1 day)
IMOVAX RABIES (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	B/D, PA; QL (1 EA per 1 day)
INFANRIX (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
IPOL (INJECTION)	$0	QL (0.5 ML per 1 day)
IXIARO (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
JYNNEOS (SUBCUTANEOUS SUSPENSION)	$0	QL (0.5 ML per 1 day)
KINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
MENQUADFI (INTRAMUSCULAR SOLUTION)	$0	PA; QL (0.5 ML per 1 day)
MENVEO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
M-M-R II (INJECTION SOLUTION RECONSTITUTED)	$0	QL (1 EA per 1 day)
MRESVIA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	PA; QL (0.5 ML per 1 day)
PEDIARIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
PEDVAX HIB (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
PENBRAYA (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)
PENMENVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)
PENTACEL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	QL (1 EA per 1 day)
PRIORIX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	$0	QL (1 EA per 1 day)
PROQUAD (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	$0	QL (1 EA per 1 day)
QUADRACEL (INTRAMUSCULAR SUSPENSION)	$0	QL (0.5 ML per 1 day)
QUADRACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
RABAVERT (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	B/D, PA; QL (1 EA per 1 day)
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION, 40MCG/ML INJECTION SUSPENSION)	$0	B/D, PA; QL (1 ML per 1 day)
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION)	$0	B/D, PA; QL (0.5 ML per 1 day)
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	$0	B/D, PA; QL (1 ML per 1 day)
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	$0	B/D, PA; QL (0.5 ML per 1 day)
ROTARIX (ORAL SUSPENSION)	$0	QL (1.5 ML per 1 day)
ROTATEQ (ORAL SOLUTION)	$0	QL (2 ML per 1 day)
SHINGRIX (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	$0	PA; QL (1 EA per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TENIVAC (INTRAMUSCULAR INJECTABLE)	$0	QL (0.5 ML per 1 day)
TICOVAC (1.2MCG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.25 ML per 1 day)
TICOVAC (2.4MCG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
TRUMENBA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	PA; QL (0.5 ML per 1 day)
TWINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (1 ML per 1 day)
TYPHIM VI (INTRAMUSCULAR SOLUTION)	$0	QL (0.5 ML per 1 day)
TYPHIM VI (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	$0	QL (0.5 ML per 1 day)
VAQTA (25UNIT/0.5ML INTRAMUSCULAR SUSPENSION)	$0	QL (1 ML per 999 days)
VAQTA (50UNIT/ML INTRAMUSCULAR SUSPENSION)	$0	QL (2 ML per 999 days)
VARIVAX (INJECTION SUSPENSION RECONSTITUTED)	$0	QL (1 EA per 1 day)
VAXCHORA (ORAL SUSPENSION RECONSTITUTED)	$0	PA; QL (100 ML per 1 day)
VIMKUNYA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	$0	QL (0.8 ML per 1 day)
VIVOTIF (ORAL CAPSULE DELAYED RELEASE)	$0	QL (4 EA per 1825 days)
YF-VAX (SUBCUTANEOUS INJECTABLE)	$0	QL (1 EA per 1 day)
Inflammatory Bowel Disease Agents		
Aminosalicylates		
balsalazide disodium (oral capsule)	$0	DL
mesalamine er (0.375gm oral capsule extended release 24 hour) (generic apriso)	$0	QL (120 EA per 30 days)
mesalamine er (500mg oral capsule extended release) (generic pentasa)	$0	DL; QL (240 EA per 30 days)
mesalamine (1.2gm oral tablet delayed release) (generic lialda)	$0	QL (120 EA per 30 days)
mesalamine (rectal enema)	$0	DL; QL (1800 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
mesalamine (rectal suppository)	$0	DL; QL (30 EA per 30 days)
PENTASA (250MG ORAL CAPSULE EXTENDED RELEASE)	$0	DL; QL (480 EA per 30 days)
PENTASA (500MG ORAL CAPSULE EXTENDED RELEASE)	$0	DL; QL (240 EA per 30 days)
sulfasalazine (oral tablet immediate release)	$0	
sulfasalazine (oral tablet delayed release)	$0	
Glucocorticoids		
budesonide er (oral tablet extended release 24 hour)	$0	ST; DL
budesonide (oral capsule delayed release particles)	$0	DL
hydrocortisone (perianal) (2.5% external cream)	$0	
hydrocortisone (rectal enema)	$0	DL
procto-med hc (external cream)	$0	
Local Anesthetics		
Anesthetics		
ISOP ALCOHOL SOL 70% (SOLUTION)*	$0 (OTC)	
ISOPROPANOL SOL 70% (SOLUTION)*	$0 (OTC)	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
alendronate sodium (10mg oral tablet)	$0	QL (30 EA per 30 days)
alendronate sodium (35mg oral tablet)	$0	QL (8 EA per 28 days)
alendronate sodium (70mg oral tablet)	$0	QL (4 EA per 28 days)
BONSITY (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; DL; QL (2.24 ML per 28 days)
calcitonin salmon (nasal solution)	$0	QL (3.7 ML per 28 days)
calcitriol (oral capsule)	$0	B/D, PA
calcitriol (oral solution)	$0	B/D, PA
cinacalcet hcl (30mg oral tablet, 60mg oral tablet)	$0	B/D, PA; DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
cinacalcet hcl (90mg oral tablet)	$0	B/D, PA; DL; QL (120 EA per 30 days)
doxercalciferol (oral capsule)	$0	B/D, PA; DL
ibandronate sodium (oral tablet)	$0	QL (1 EA per 28 days)
JUBBONTI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	DL; QL (1 ML per 180 days)
paricalcitol (oral capsule)	$0	B/D, PA; DL
RAYALDEE (ORAL CAPSULE EXTENDED RELEASE)	$0	DL; QL (60 EA per 30 days)
risedronate sodium (150mg oral tablet immediate release)	$0	QL (1 EA per 30 days)
risedronate sodium (30mg oral tablet immediate release, 5mg oral tablet immediate release)	$0	QL (30 EA per 30 days)
risedronate sodium (35mg (12 pack) oral tablet immediate release, 35mg (4 pack) oral tablet immediate release)	$0	QL (4 EA per 28 days)
TERIPARATIDE (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; DL; QL (2.48 ML per 28 days)
TYMLOS (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	$0	PA; DL; QL (1.56 ML per 30 days)
WYOST (SUBCUTANEOUS SOLUTION)	$0	DL
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
3 SERIES BP MIS MONITOR (DEVICE)*	$0 (OTC)	
ADV ONE STEP MIS BP MONIT (DEVICE)*	$0 (OTC)	
ADVOCATE ARM MIS BPM LRG (DEVICE)*	$0 (OTC)	
ADVOCATE ARM MIS BPM S/M (DEVICE)*	$0 (OTC)	
ADVOCATE MIS ARM BPM (DEVICE)*	$0 (OTC)	
ALCOHOL PREP PADS	$0	
ASSESS METER MIS FULL (DEVICE)*	$0 (OTC)	
ASSESS METER MIS LOW (DEVICE)*	$0 (OTC)	
BINAXNOW COV KIT HOME TES (KIT)*	$0 (OTC)	
BLOOD PRESS KIT #100-019 (KIT)*	$0 (OTC)	
BLOOD PRESS KIT #100-021 (KIT)*	$0 (OTC)	
BLOOD PRESS KIT 3 SERIES (DEVICE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BLOOD PRESS KIT FINGER (KIT)*	$0 (OTC)	
BLOOD PRESS KIT MANUAL (KIT)*	$0 (OTC)	
BLOOD PRESS MIS MONITOR (DEVICE)*	$0 (OTC)	
BLOOD PRESS MIS PREM ARM (DEVICE)*	$0 (OTC)	
BLOOD PRESS MIS WRIST (DEVICE)*	$0 (OTC)	
BLOOD PRESS MIS WRIST CF (DEVICE)*	$0 (OTC)	
BLOOD PRESSR KIT TRAVEL (KIT)*	$0 (OTC)	
BLOOD PRESSU KIT DELUXE (KIT)*	$0 (OTC)	
BLOOD PRESSU KIT MANUAL (KIT)*	$0 (OTC)	
BLOOD PRESSU MIS /MANUAL (DEVICE)*	$0 (OTC)	
BLOOD PRESSU MIS MANUAL (DEVICE)*	$0 (OTC)	
BLOOD PRESSU MIS MONITOR (DEVICE)*	$0 (OTC)	
BLOOD PRESSU MIS VERSATII (DEVICE)*	$0 (OTC)	
BLOOD PRESSU MIS WRIST (DEVICE)*	$0 (OTC)	
BLOOD PRSSRE MIS MONITOR (DEVICE)*	$0 (OTC)	
BP CUFF MNTR MIS AUTOMATC (DEVICE)*	$0 (OTC)	
BP MONITOR KIT ARM (KIT)*	$0 (OTC)	
BP MONITOR KIT DELUXE (KIT)*	$0 (OTC)	
BP MONITOR KIT MANUAL (KIT)*	$0 (OTC)	
BP MONITOR KIT STETHSCP (KIT)*	$0 (OTC)	
BP MONITOR KIT WRIST (KIT)*	$0 (OTC)	
BP MONITOR MIS (DEVICE)*	$0 (OTC)	
BP MONITOR MIS /WRIST (DEVICE)*	$0 (OTC)	
BP MONITOR MIS ADV AUTO (DEVICE)*	$0 (OTC)	
BP MONITOR MIS ADVANCED (DEVICE)*	$0 (OTC)	
BP MONITOR MIS ARM (DEVICE)*	$0 (OTC)	
BP MONITOR MIS ARM PREM (DEVICE)*	$0 (OTC)	
BP MONITOR MIS AUTO (DEVICE)*	$0 (OTC)	
BP MONITOR MIS AUTO ARM (DEVICE)*	$0 (OTC)	
BP MONITOR MIS AUTOMATI (DEVICE)*	$0 (OTC)	
BP MONITOR MIS DIGITAL (DEVICE)*	$0 (OTC)	
BP MONITOR MIS DLUX ARM (DEVICE)*	$0 (OTC)	
BP MONITOR MIS EX-LARGE (DEVICE)*	$0 (OTC)	
BP MONITOR MIS MANUAL (DEVICE)*	$0 (OTC)	
BP MONITOR MIS OMRON 10 (DEVICE)*	$0 (OTC)	
BP MONITOR MIS PREM/ARM (DEVICE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
BP MONITOR MIS PRO HLTH (DEVICE)*	$0 (OTC)	
BP MONITOR MIS WRIST (DEVICE)*	$0 (OTC)	
BP PREMIUM KIT WRIST (KIT)*	$0 (OTC)	
CARESTART KIT COVID-19 (KIT)*	$0 (OTC)	
CARETOUCH BP MIS MONITOR (DEVICE)*	$0 (OTC)	
CHEMSTRIP TES MICRAL (STRIP)*	$0 (OTC)	
CHEMSTRIP TES UGK (STRIP)*	$0 (OTC)	
COLOX CAP (CAPSULE)*	$0 (OTC)	
COMPLEAT 1.0 LIQ PEPTIDE (LIQUID)*	$0 (OTC)	
COMPLEAT ORG LIQ PLNT BAS (LIQUID)*	$0 (OTC)	
COMPLEAT PED LIQ PEP 1.0 (LIQUID)*	$0 (OTC)	
COMPLEAT PED LIQ PLNT BAS (LIQUID)*	$0 (OTC)	
CVS KETONE TES CARE (STRIP)*	$0 (OTC)	
ENDUR-THINE TAB 500-200 (TABLET ER)*	$0 (OTC)	
ENSURE HARVE LIQ 1.2 CAL (LIQUID)*	$0 (OTC)	
EQ BP MONITO MIS WRIST (DEVICE)*	$0 (OTC)	
ESSENTIAL BP MIS MONITOR (DEVICE)*	$0 (OTC)	
FLOWFLEX KIT TEST (KIT)*	$0 (OTC)	
FORA P20 MIS BP (DEVICE)*	$0 (OTC)	
FORA P30 PLU MIS MEDIUM (DEVICE)*	$0 (OTC)	
FORA P30 PLU MIS WIDE RAN (DEVICE)*	$0 (OTC)	
FORA P50 BP MIS MONITOR (DEVICE)*	$0 (OTC)	
FORA TEST N' MIS GO BP (DEVICE)*	$0 (OTC)	
FT BLOOD PRE MIS SER 200 (DEVICE)*	$0 (OTC)	
FT BLOOD PRE MIS SER 600 (DEVICE)*	$0 (OTC)	
GAUZE (NON-MEDICATED 2X2 PAD)	$0	
GLUCOSE SUP LIQ 1.2 (LIQUID)*	$0 (OTC)	
GNP BLOOD MIS PRESSURE (DEVICE)*	$0 (OTC)	
*gnp isop alc sol 99% (solution)**	$0 (OTC)	
GOJJI BP KIT MONITOR (KIT)*	$0 (OTC)	
HEALTH SENSE MIS BLOOD PR (DEVICE)*	$0 (OTC)	
HEART CHECK MIS BP WRIST (DEVICE)*	$0 (OTC)	
HM BP MONITO MIS ADVANCED (DEVICE)*	$0 (OTC)	
HM BP MONITO MIS AUTOMATI (DEVICE)*	$0 (OTC)	
HM BP MONITO MIS DELUXE (DEVICE)*	$0 (OTC)	
HM BP MONITO MIS MANUAL (DEVICE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
HM BP MONITO MIS WRIST (DEVICE)*	$0 (OTC)	
IHEALTH 2-PK KIT COVID-19 (KIT)*	$0 (OTC)	
IMPACT PEPT LIQ 1.5 (LIQUID)*	$0 (OTC)	
INCONTROL MIS BP MONIT (DEVICE)*	$0 (OTC)	
INCONTROL MIS DELUXE (DEVICE)*	$0 (OTC)	
INCONTROL MIS PREMIUM (DEVICE)*	$0 (OTC)	
INSULIN SYRINGES, NEEDLES	$0	
*isop alcohol sol 91% (solution)**	$0 (OTC)	
*isop alcohol sol 99% (solution)**	$0 (OTC)	
KATE FARMS LIQ 1.4 (LIQUID)*	$0 (OTC)	
KATE FARMS LIQ 1.5 (LIQUID)*	$0 (OTC)	
KAZ VAPORIZR MIS 1 GALLON (MISCELLANEOUS)*	$0 (OTC)	
KAZ VAPORIZR MIS 1.5 GAL (MISCELLANEOUS)*	$0 (OTC)	
KAZ VAPORIZR MIS 2.2 GAL (MISCELLANEOUS)*	$0 (OTC)	
*kelp/lec/b6 cap (capsule)**	$0 (OTC)	
LANOLIN ANHY OIN (OINTMENT)*	$0 (OTC)	
LIFESTYLECOM MIS VAPORIZE (MISCELLANEOUS)*	$0 (OTC)	
LIQ HOPE PEP LIQ HIGH PRO (LIQUID)*	$0 (OTC)	
*liraglutide inj 18mg/3ml (soln pen-inj)**	$0 (OTC)	PA
*l-tryptophan tab 500mg (tablet)**	$0 (OTC)	
LUNG PERFM MIS METER (DEVICE)*	$0 (OTC)	
MAD NASAL MIS (MISCELLANEOUS)*	$0 (OTC)	
MAD NASAL MIS ATOMIZAT (MISCELLANEOUS)*	$0 (OTC)	
MICROLIFE BP KIT MONITOR (KIT)*	$0 (OTC)	
MICROLIFE BP MIS DELUXE (DEVICE)*	$0 (OTC)	
MICROLIFE BP MIS WRIST (DEVICE)*	$0 (OTC)	
MICROLIFE KIT BPM1 (KIT)*	$0 (OTC)	
MICROLIFE KIT BPM2 (KIT)*	$0 (OTC)	
MICROLIFE KIT BPM3 (KIT)*	$0 (OTC)	
MICROLIFE MIS BPM6 (DEVICE)*	$0 (OTC)	
MICROLIFE MIS PEAK FLO (DEVICE)*	$0 (OTC)	
MINI WRIGHT MIS PFM (DEVICE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
MUCOSAL ATOM MIS DEVICE (MISCELLANEOUS)*	$0 (OTC)	
MULTI-USER MIS BP MONIT (DEVICE)*	$0 (OTC)	
NARCOSOFT CAP HERB LAX (CAPSULE)*	$0 (OTC)	
NASAL SPRAY MIS PMP 15ML (MISCELLANEOUS)*	$0 (OTC)	
NASAL SPRAY MIS PUMP (MISCELLANEOUS)*	$0 (OTC)	
NOURISH PEPT LIQ BERRY (LIQUID)*	$0 (OTC)	
NUTREN 1.5 LIQ UNFLAV (LIQUID)*	$0 (OTC)	
OMRON 10 SER MIS BP MONIT (DEVICE)*	$0 (OTC)	
OMRON 3 SERI MIS BP MONIT (DEVICE)*	$0 (OTC)	
OMRON 5 SERI MIS BP MONIT (DEVICE)*	$0 (OTC)	
OMRON 7 SERI MIS BP MONIT (DEVICE)*	$0 (OTC)	
ON/GO COVID KIT ANTIGEN (KIT)*	$0 (OTC)	
PEAK AIR FLO MIS ADLT/PED (DEVICE)*	$0 (OTC)	
PEAK A-I-R MIS FLW METR (DEVICE)*	$0 (OTC)	
PEAK FLOW MIS METER (DEVICE)*	$0 (OTC)	
PEAK FLW MTR MIS ADULT (DEVICE)*	$0 (OTC)	
PEAK FLW MTR MIS CHILD (DEVICE)*	$0 (OTC)	
PEAK FLW MTR MIS UNIVERSL (DEVICE)*	$0 (OTC)	
PEDIASUR 1.0 LIQ PEPTIDE (LIQUID)*	$0 (OTC)	
PEDIASUR 1.5 LIQ PEPTIDE (LIQUID)*	$0 (OTC)	
PEDIASUR 1.5 LIQ W/FIBER (LIQUID)*	$0 (OTC)	
PEDIASURE LIQ ENTERAL (LIQUID)*	$0 (OTC)	
PEDIASURE LIQ HARVEST (LIQUID)*	$0 (OTC)	
PEDIASURE LIQ W/FIBER (LIQUID)*	$0 (OTC)	
PERSONAL BES MIS FULL RNG (DEVICE)*	$0 (OTC)	
*phendimetraz tab 35mg (tablet)**	$0 (OTC)	PA
POCKETPEAK MIS MTR LOW (DEVICE)*	$0 (OTC)	
PRELIEF TAB 340MG (TABLET)*	$0 (OTC)	
PRO HEALTH MIS BP MONIT (DEVICE)*	$0 (OTC)	
PROCARE ARM MIS BP MONIT (DEVICE)*	$0 (OTC)	
PROCARE WRST MIS BP MONIT (DEVICE)*	$0 (OTC)	
PROCHECK KIT BLOOD PR (KIT)*	$0 (OTC)	
QC CASTOR OIL (OIL)*	$0 (OTC)	
QGEL MEGA100 CAP COQ10 (CAPSULE)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
QUICKVUE HOM KIT COVID-19 (KIT)*	$0 (OTC)	
RA BLOOD MIS PRESSURE (DEVICE)*	$0 (OTC)	
RASPBERRY SYP (SYRUP)*	$0 (OTC)	
*real food liq blends (liquid)**	$0 (OTC)	
REAL FOOD LIQ MINI (LIQUID)*	$0 (OTC)	
RELION PREM MIS MONITOR (DEVICE)*	$0 (OTC)	
RENAL SUPPRT LIQ 1.8 (LIQUID)*	$0 (OTC)	
REZDIFFRA (ORAL TABLET)	$0	PA; DL; QL (30 EA per 30 days)
SAXENDA INJ 18MG/3ML (SOLN PEN-INJ)*	$0 (OTC)	PA
SERIES 100 MIS BLOOD PR (DEVICE)*	$0 (OTC)	
SERIES 400 MIS BLOOD PR (DEVICE)*	$0 (OTC)	
SERIES 600 MIS BLOOD PR (DEVICE)*	$0 (OTC)	
SERIES 800 MIS BLOOD PR (DEVICE)*	$0 (OTC)	
SIMPLE SYP (SYRUP)*	$0 (OTC)	
SIMPLE SYRUP SYP NF (SYRUP)*	$0 (OTC)	
SLIM BP MIS MONITOR (DEVICE)*	$0 (OTC)	
SM BLOOD PRE MIS SER 200 (DEVICE)*	$0 (OTC)	
SM BLOOD PRE MIS SER 200W (DEVICE)*	$0 (OTC)	
SM BLOOD PRE MIS SER 600 (DEVICE)*	$0 (OTC)	
SM BLOOD PRE MIS SER 600W (DEVICE)*	$0 (OTC)	
SM BLOOD PRE MIS SER 800 (DEVICE)*	$0 (OTC)	
SORBITOL SOL 70% (SOLUTION)*	$0 (OTC)	
SPHYGMOMANOM MIS ANEROID (DEVICE)*	$0 (OTC)	
TALKING BP KIT MONITOR (KIT)*	$0 (OTC)	
TALKING SENS MIS BLOOD PR (DEVICE)*	$0 (OTC)	
TRUE HEALTH MIS BP MONIT (DEVICE)*	$0 (OTC)	
*ultra coq10 cap 75mg (capsule)**	$0 (OTC)	
VAPORIZER MIS 1 GALLON (MISCELLANEOUS)*	$0 (OTC)	
VAPORIZER MIS 1.2 GAL (MISCELLANEOUS)*	$0 (OTC)	
VAPORIZER MIS 1.7 GAL (MISCELLANEOUS)*	$0 (OTC)	
VAPORIZER MIS 1.9 GAL (MISCELLANEOUS)*	$0 (OTC)	
VAPORIZER MIS 2 GALLON (MISCELLANEOUS)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
VAPORIZER MIS 3 GALLON (MISCELLANEOUS)*	$0 (OTC)	
VAPORIZER MIS WATERLES (MISCELLANEOUS)*	$0 (OTC)	
VERSA BP MIS MONITOR (DEVICE)*	$0 (OTC)	
WEGOVY INJ 0.25MG (SOLN AUTO-INJ)*	$0 (OTC)	PA
WEGOVY INJ 0.5MG (SOLN AUTO-INJ)*	$0 (OTC)	PA
WEGOVY INJ 1.7MG (SOLN AUTO-INJ)*	$0 (OTC)	PA
WEGOVY INJ 1MG (SOLN AUTO-INJ)*	$0 (OTC)	PA
WEGOVY INJ 2.4MG (SOLN AUTO-INJ)*	$0 (OTC)	PA
ZEPBOUND INJ 10/0.5ML (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
ZEPBOUND INJ 12.5/0.5 (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
ZEPBOUND INJ 15/0.5ML (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
ZEPBOUND INJ 2.5/0.5 (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
ZEPBOUND INJ 5/0.5ML (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
ZEPBOUND INJ 7.5/0.5 (SOLN AUTO-INJ, SOLUTION)*	$0 (OTC)	PA
Nonsteroidal Anti-inflammatory Drugs		
Analgesics		
ANACIN TAB 400-32MG (TABLET)*	$0 (OTC)	
*antacid/pain tab 325mg (tablet effervescent)**	$0 (OTC)	
*arthr pain gel 1% (gel)**	$0 (OTC)	
BC FAST PAIN POW RELIEF (PACKET)*	$0 (OTC)	
BC FAST PAIN POW RLF ARTH (PACKET)*	$0 (OTC)	
*diclofenac gel 1% (gel)**	$0 (OTC)	
*eq arthritis gel 1% (gel)**	$0 (OTC)	
*eql migraine tab formula (tablet)**	$0 (OTC)	
*ft arthritis gel 1% (gel)**	$0 (OTC)	
*gnp diclofen gel 1% (gel)**	$0 (OTC)	
*gnp headach tab relief (tablet)**	$0 (OTC)	
*gnp headache tab extra st (tablet)**	$0 (OTC)	
*gnp migraine tab relief (tablet)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
*goodsense gel art pain (gel)**	$0 (OTC)	
GOODYS POW EX ST (PACKET)*	$0 (OTC)	
*headache tab relief (tablet)**	$0 (OTC)	
*kls arthriti gel 1% (gel)**	$0 (OTC)	
*kls diclofen gel 1% (gel)**	$0 (OTC)	
*medi-seltzer tab 325mg (tablet effervescent)**	$0 (OTC)	
*migraine tab formula (tablet)**	$0 (OTC)	
*pain relief tab (tablet)**	$0 (OTC)	
*pain-off tab (tablet)**	$0 (OTC)	
PERCOGESIC TAB 580MG (TABLET)*	$0 (OTC)	
*qc diclofena gel 1% (gel)**	$0 (OTC)	
*qc headache tab relief (tablet)**	$0 (OTC)	
Ophthalmic Agents		
Ophthalmic Agents, Other		
atropine sulfate (1% ophthalmic solution)	$0	
neomycin-polymyxin-bacitracin-hydrocortisone (ophthalmic ointment)	$0	
brimonidine tartrate-timolol (ophthalmic solution)	$0	
COMBIGAN (OPHTHALMIC SOLUTION)	$0	
CYSTARAN (OPHTHALMIC SOLUTION)	$0	DL
dorzolamide hcl-timolol maleate (ophthalmic solution)	$0	
dorzolamide hcl-timolol maleate preservative free (ophthalmic solution)	$0	DL
MIEBO (OPHTHALMIC SOLUTION)	$0	DL; QL (12 ML per 30 days)
neomycin-polymyxin-dexamethasone (ophthalmic ointment)	$0	
neomycin-polymyxin-dexamethasone (3.5-10000-0.1 ophthalmic suspension)	$0	
neomycin-polymyxin-hc (ophthalmic suspension)	$0	DL
RESTASIS MULTIDOSE (OPHTHALMIC EMULSION)	$0	QL (5.5 ML per 25 days)
RESTASIS SINGLE-USE VIALS (OPHTHALMIC EMULSION)	$0	QL (60 EA per 30 days)
ROCKLATAN (OPHTHALMIC SOLUTION)	$0	ST
sulfacetamide-prednisolone (ophthalmic solution)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TOBRADEX (OPHTHALMIC OINTMENT)	$0	
tobramycin-dexamethasone (ophthalmic suspension)	$0	
TYRVAYA (NASAL SOLUTION)	$0	DL; QL (8.4 ML per 30 days)
XIIDRA (OPHTHALMIC SOLUTION)	$0	DL; QL (60 EA per 30 days)
Ophthalmic Anti-allergy Agents		
azelastine hcl (ophthalmic solution)	$0	
bepotastine besilate (ophthalmic solution)	$0	DL
BEPREVE (OPHTHALMIC SOLUTION)	$0	DL
cromolyn sodium (ophthalmic solution)	$0	
epinastine hcl (ophthalmic solution)	$0	
Ophthalmic Anti-Infectives		
bacitracin (ophthalmic ointment)	$0	QL (7 GM per 28 days)
bacitracin-polymyxin b (ophthalmic ointment)	$0	
BESIVANCE (OPHTHALMIC SUSPENSION)	$0	DL
ciprofloxacin hcl (ophthalmic solution)	$0	
erythromycin (ophthalmic ointment)	$0	
gatifloxacin (ophthalmic solution)	$0	
gentamicin sulfate (ophthalmic solution)	$0	
levofloxacin (0.5% ophthalmic solution)	$0	
moxifloxacin hcl (ophthalmic solution) (generic vigamox)	$0	DL
NATACYN (OPHTHALMIC SUSPENSION)	$0	DL
neomycin-bacitracin-polymyxin (5-400-10000 ophthalmic ointment)	$0	
neomycin-polymyxin-gramicidin (ophthalmic solution)	$0	
ofloxacin (ophthalmic solution)	$0	
polymyxin b-trimethoprim (ophthalmic solution)	$0	
sulfacetamide sodium (ophthalmic ointment)	$0	
sulfacetamide sodium (ophthalmic solution)	$0	
tobramycin (ophthalmic solution)	$0	
trifluridine (ophthalmic solution)	$0	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
XDEMVY (OPHTHALMIC SOLUTION)	$0	DL; QL (10 ML per 42 days)
Ophthalmic Anti-inflammatories		
dexamethasone sodium phosphate (ophthalmic solution)	$0	
diclofenac sodium (ophthalmic solution)	$0	
FLAREX (OPHTHALMIC SUSPENSION)	$0	DL
fluorometholone (ophthalmic suspension)	$0	
flurbiprofen sodium (ophthalmic solution)	$0	
ILEVRO (OPHTHALMIC SUSPENSION)	$0	
ketorolac tromethamine (ophthalmic solution)	$0	
LOTEMAX (OPHTHALMIC GEL)	$0	DL
LOTEMAX (OPHTHALMIC OINTMENT)	$0	DL
LOTEMAX (OPHTHALMIC SUSPENSION)	$0	DL
LOTEMAX SM (OPHTHALMIC GEL)	$0	DL
loteprednol etabonate (ophthalmic gel)	$0	DL
loteprednol etabonate (0.5% ophthalmic suspension)	$0	DL
PRED MILD (OPHTHALMIC SUSPENSION)	$0	DL
prednisolone acetate (ophthalmic suspension)	$0	
prednisolone sodium phosphate (1% ophthalmic solution)	$0	
Ophthalmic Beta-Adrenergic Blocking Agents		
betaxolol hcl (ophthalmic solution)	$0	
BETIMOL (OPHTHALMIC SOLUTION)	$0	DL
carteolol hcl (ophthalmic solution)	$0	
levobunolol hcl (ophthalmic solution)	$0	
timolol maleate ophthalmic gel forming (ophthalmic solution) (generic timoptic-xe)	$0	
timolol maleate (ophthalmic solution) (generic timoptic)	$0	
Ophthalmic Intraocular Pressure Lowering Agents, Other		
ALPHAGAN P (0.1% OPHTHALMIC SOLUTION)	$0	
apraclonidine hcl (ophthalmic solution)	$0	
brimonidine tartrate (0.1% ophthalmic solution)	$0	
brimonidine tartrate (0.15% ophthalmic solution)	$0	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
brimonidine tartrate (0.2% ophthalmic solution)	$0	
brinzolamide (ophthalmic suspension)	$0	
dorzolamide hcl (ophthalmic solution)	$0	
methazolamide (oral tablet)	$0	DL
pilocarpine hcl (1% ophthalmic solution, 2% ophthalmic solution, 4% ophthalmic solution)	$0	
RHOPRESSA (OPHTHALMIC SOLUTION)	$0	ST
SIMBRINZA (OPHTHALMIC SUSPENSION)	$0	
Ophthalmic Prostaglandin and Prostamide Analogs		
latanoprost (ophthalmic solution)	$0	
LUMIGAN (OPHTHALMIC SOLUTION)	$0	
travoprost (bak free) (ophthalmic solution)	$0	
VYZULTA (OPHTHALMIC SOLUTION)	$0	DL
Ophthalmic Agents, Other		
Ophthalmic Agents		
*allergy eye dro op (solution)**	$0 (OTC)	
*artificial dro 1% tears (solution)**	$0 (OTC)	
*artificial dro tears (solution)**	$0 (OTC)	
*carboxmethyl gel 1% op (gel)**	$0 (OTC)	
*carboxymethl gel 1% (gel)**	$0 (OTC)	
*carboxymethy sol 0.5% (solution)**	$0 (OTC)	
*carboxymethy sol 0.5% op (solution)**	$0 (OTC)	
*eye allergy sol relief (solution)**	$0 (OTC)	
*for sty reli oin (ointment)**	$0 (OTC)	
*lubricant dro eye 0.6% (solution)**	$0 (OTC)	
*lubricant oin eye pm (ointment)**	$0 (OTC)	
*lubricant pm oin (ointment)**	$0 (OTC)	
*lubricnt eye dro 0.5% op (solution)**	$0 (OTC)	
NAPHCON-A SOL OP (SOLUTION)*	$0 (OTC)	
OPCON-A SOL OP (SOLUTION)*	$0 (OTC)	
*sm dry eye sol relief (solution)**	$0 (OTC)	
STERILE LUBR DRO 0.7% (LIQUID)*	$0 (OTC)	
*stye oin (ointment)**	$0 (OTC)	
*ultra fresh dro 0.5% op (solution)**	$0 (OTC)	
*ultra fresh oin pm (ointment)**	$0 (OTC)	
VISINE SOL (SOLUTION)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
Ophthalmic Anti-allergy Agents		
Ophthalmic Agents		
LASTACAFT SOL 0.25% (SOLUTION)*	$0 (OTC)	
Otic Agents		
Otic Agents		
acetic acid (otic solution)	$0	
CIPRO HC (OTIC SUSPENSION)	$0	DL
ciprofloxacin-dexamethasone (otic suspension)	$0	DL
flac (0.01% otic oil)	$0	DL
fluocinolone acetonide (otic oil)	$0	DL
hydrocortisone-acetic acid (otic solution)	$0	
neomycin-polymyxin-hc (1% otic solution)	$0	
neomycin-polymyxin-hc (otic suspension)	$0	
ofloxacin (otic solution)	$0	
Pediculicides/Scabicides		
Dermatological Agents		
NIX COMPLETE KIT LICE 1% (KIT)*	$0 (OTC)	
NIX ULTRA KIT 2-IN-1 (KIT)*	$0 (OTC)	
Progestins		
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
*aftera tab 1.5mg (tablet)**	$0 (OTC)	
AFTERPILL TAB 1.5MG (TABLET)*	$0 (OTC)	
*curae tab 1.5mg (tablet)**	$0 (OTC)	
*econtra os tab 1.5mg (tablet)**	$0 (OTC)	
*her style tab 1.5mg (tablet)**	$0 (OTC)	
*levonorgestr tab 1.5mg (tablet)**	$0 (OTC)	
*my choice tab 1.5mg (tablet)**	$0 (OTC)	
*my way tab 1.5mg (tablet)**	$0 (OTC)	
*new day tab 1.5mg (tablet)**	$0 (OTC)	
*opcicon tab 1.5mg (tablet)**	$0 (OTC)	
*option 2 tab 1.5mg (tablet)**	$0 (OTC)	
PLAN B TAB 1.5MG (TABLET)*	$0 (OTC)	
*react tab 1.5mg (tablet)**	$0 (OTC)	
*take action tab 1.5mg (tablet)**	$0 (OTC)	
Respiratory Tract Agents, Other		
Respiratory Tract/Pulmonary Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
*zinc w/a&c loz (lozenge)**	$0 (OTC)	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
azelastine hcl (0.1% nasal solution)	$0	
cetirizine hcl (5mg/5ml oral solution)	$0	
desloratadine (oral tablet)	$0	
levocetirizine dihydrochloride (oral tablet)	$0	QL (30 EA per 30 days)
RYALTRIS (NASAL SUSPENSION)	$0	
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (30 EA per 30 days)
budesonide (inhalation suspension)	$0	B/D, PA; DL
flunisolide (nasal solution)	$0	
fluticasone propionate (nasal suspension)	$0	
mometasone furoate (nasal suspension)	$0	DL
QVAR REDIHALER (INHALATION AEROSOL BREATH ACTIVATED)	$0	QL (21.2 GM per 30 days)
Antileukotrienes		
montelukast sodium (oral packet)	$0	QL (30 EA per 30 days)
montelukast sodium (oral tablet)	$0	QL (30 EA per 30 days)
montelukast sodium (oral tablet chewable)	$0	QL (30 EA per 30 days)
zafirlukast (oral tablet)	$0	QL (60 EA per 30 days)
Bronchodilators, Anticholinergic		
ATROVENT HFA (INHALATION AEROSOL SOLUTION)	$0	DL
INCRUSE ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (30 EA per 30 days)
ipratropium bromide (inhalation solution)	$0	B/D, PA
ipratropium bromide (nasal solution)	$0	
SPIRIVA HANDIHALER (INHALATION CAPSULE)	$0	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
SPIRIVA RESPIMAT (INHALATION AEROSOL SOLUTION)	$0	QL (4 GM per 30 days)
Bronchodilators, Sympathomimetic		
albuterol sulfate hfa (inhalation aerosol solution)	$0	
albuterol sulfate (inhalation nebulization solution)	$0	B/D, PA
albuterol sulfate (2mg/5ml oral syrup)	$0	DL
albuterol sulfate (oral tablet immediate release)	$0	DL
arformoterol tartrate (inhalation nebulization solution)	$0	B/D, PA; DL; QL (120 ML per 30 days)
epinephrine (injection solution auto-injector)	$0	QL (4 EA per 30 days)
levalbuterol hcl (inhalation nebulization solution)	$0	B/D, PA; DL
LEVALBUTEROL TARTRATE (INHALATION AEROSOL)	$0	
SEREVENT DISKUS (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (60 EA per 30 days)
VENTOLIN HFA (INHALATION AEROSOL SOLUTION)	$0	
Cystic Fibrosis Agents		
CAYSTON (INHALATION SOLUTION RECONSTITUTED)	$0	PA; DL
KALYDECO (ORAL PACKET)	$0	PA; DL; QL (56 EA per 28 days)
KALYDECO (ORAL TABLET)	$0	PA; DL; QL (60 EA per 30 days)
ORKAMBI (ORAL PACKET)	$0	PA; DL; QL (56 EA per 28 days)
ORKAMBI (ORAL TABLET)	$0	PA; DL; QL (112 EA per 28 days)
PULMOZYME (INHALATION SOLUTION)	$0	B/D, PA; DL; QL (150 ML per 30 days)
TOBI PODHALER (INHALATION CAPSULE)	$0	PA; DL; QL (224 EA per 28 days)
tobramycin (300mg/5ml inhalation nebulization solution)	$0	B/D, PA; QL (280 ML per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
TRIKAFTA (ORAL TABLET THERAPY PACK)	$0	PA; DL; QL (84 EA per 28 days)
TRIKAFTA (ORAL GRANULE THERAPY PACK)	$0	PA; DL; QL (56 EA per 28 days)
Mast Cell Stabilizers		
cromolyn sodium (inhalation nebulization solution)	$0	B/D, PA
Phosphodiesterase Inhibitors, Airways Disease		
roflumilast (250mcg oral tablet)	$0	PA; DL; QL (28 EA per 28 days)
roflumilast (500mcg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
theophylline er (oral tablet extended release 12 hour)	$0	
theophylline er (oral tablet extended release 24 hour)	$0	
theophylline (oral solution)	$0	
Pulmonary Antihypertensives		
ADEMPAS (ORAL TABLET)	$0	PA; DL
alyq (oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
ambrisentan (oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
bosentan (oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
ORENITRAM MONTH 1 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	$0	PA; DL; QL (336 EA per 365 days)
ORENITRAM MONTH 2 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	$0	PA; DL; QL (672 EA per 365 days)
ORENITRAM MONTH 3 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	$0	PA; DL; QL (504 EA per 365 days)
ORENITRAM (0.125MG ORAL TABLET EXTENDED RELEASE)	$0	PA; DL
ORENITRAM (0.25MG ORAL TABLET EXTENDED RELEASE, 1MG ORAL TABLET EXTENDED RELEASE, 2.5MG ORAL TABLET EXTENDED RELEASE, 5MG ORAL TABLET EXTENDED RELEASE)	$0	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
sildenafil citrate (20mg oral tablet) (generic revatio)	$0	PA; QL (90 EA per 30 days)
tadalafil (pah) (20mg oral tablet) (generic adcirca)	$0	PA; DL; QL (60 EA per 30 days)
WINREVAIR (SUBCUTANEOUS KIT)	$0	PA; DL; QL (1 EA per 21 days)
Pulmonary Fibrosis Agents		
OFEV (ORAL CAPSULE)	$0	PA; DL; QL (60 EA per 30 days)
pirfenidone (oral capsule)	$0	PA; DL; QL (270 EA per 30 days)
pirfenidone (267mg oral tablet)	$0	PA; DL; QL (180 EA per 30 days)
pirfenidone (801mg oral tablet)	$0	PA; DL; QL (90 EA per 30 days)
Respiratory Tract Agents, Other		
acetylcysteine (inhalation solution)	$0	B/D, PA
AIRSUPRA (INHALATION AEROSOL)	$0	QL (32.1 GM per 30 days)
ANORO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (60 EA per 30 days)
BREO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (60 EA per 30 days)
BREZTRI AEROSPHERE (INHALATION AEROSOL)	$0	QL (10.7 GM per 30 days)
COMBIVENT RESPIMAT (INHALATION AEROSOL SOLUTION)	$0	QL (4 GM per 20 days)
DULERA (INHALATION AEROSOL)	$0	DL; QL (13 GM per 30 days)
FASENRA PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL
FASENRA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL
fluticasone-salmeterol (100-50mcg/act inhalation aerosol powder breath activated, 250-50mcg/act inhalation aerosol powder breath activated, 500-50mcg/act inhalation aerosol powder breath activated) (generic advair)	$0	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
ipratropium-albuterol (inhalation solution)	$0	B/D, PA
NUCALA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	$0	PA; DL; QL (3 ML per 28 days)
NUCALA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (3 ML per 28 days)
NUCALA (40MG/0.4ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	$0	PA; DL; QL (0.4 ML per 28 days)
NUCALA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	$0	PA; DL; QL (3 EA per 28 days)
STIOLTO RESPIMAT (INHALATION AEROSOL SOLUTION)	$0	QL (4 GM per 30 days)
SYMBICORT (INHALATION AEROSOL)	$0	QL (10.2 GM per 30 days)
TRELEGY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	$0	QL (60 EA per 30 days)
wixela inhub (inhalation aerosol powder breath activated) (generic advair)	$0	QL (60 EA per 30 days)
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
chlorzoxazone (500mg oral tablet)	$0	
cyclobenzaprine hcl (10mg oral tablet, 5mg oral tablet)	$0	
methocarbamol (500mg oral tablet, 750mg oral tablet)	$0	
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA (ORAL TABLET)	$0	QL (30 EA per 30 days)
eszopiclone (oral tablet)	$0	QL (30 EA per 30 days)
QUVIVIQ (ORAL TABLET)	$0	DL; QL (30 EA per 30 days)
ramelteon (oral tablet)	$0	DL; QL (30 EA per 30 days)
tasimelteon (oral capsule)	$0	PA; DL; QL (30 EA per 30 days)
temazepam (15mg oral capsule, 30mg oral capsule)	$0	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
zaleplon (10mg oral capsule)	$0	QL (60 EA per 30 days)
zaleplon (5mg oral capsule)	$0	QL (30 EA per 30 days)
zolpidem tartrate (oral tablet immediate release)	$0	QL (30 EA per 30 days)
Wakefulness Promoting Agents		
armodafinil (150mg oral tablet, 200mg oral tablet, 250mg oral tablet)	$0	PA; DL; QL (30 EA per 30 days)
armodafinil (50mg oral tablet)	$0	PA; DL; QL (60 EA per 30 days)
LUMRYZ (ORAL PACKET)	$0	PA; DL; QL (30 EA per 30 days)
LUMRYZ STARTER PACK (ORAL THERAPY PACK)	$0	PA; DL; QL (56 EA per 365 days)
modafinil (100mg oral tablet)	$0	PA; QL (30 EA per 30 days)
modafinil (200mg oral tablet)	$0	PA; QL (60 EA per 30 days)
Vitamins		
Electrolytes/Minerals/Metals/Vitamins		
5-MTHF PLUS TAB B12 (TABLET DISINTEGRATING)*	$0 (OTC)	
*arkaliox cap 200mg (capsule)**	$0 (OTC)	
*b complex/fo tab (tablet)**	$0 (OTC)	
*b-12 methyco tab 1000mcg (tablet disintegrating)**	$0 (OTC)	
*b-12 sub 1000mcg (tab sublingual)**	$0 (OTC)	
*b12 sub 5000mcg (tab sublingual)**	$0 (OTC)	
*b-12 sub 5000mcg (tab sublingual)**	$0 (OTC)	
*b-12/folic tab acid (tablet disintegrating)**	$0 (OTC)	
*beta caroten cap 25000unt (capsule)**	$0 (OTC)	
*biotin sub 5000mcg (tab sublingual)**	$0 (OTC)	
*c 1000/biofl cap /r hips (capsule)**	$0 (OTC)	
*c complex tab 1000mg (tablet er)**	$0 (OTC)	
*c complex tab 500mg (tablet er)**	$0 (OTC)	
DIALYVIT 800 TAB ZINC 15 (TABLET)*	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you	Necessary actions, restrictions, or limits on use
DIALYVITE TAB 800/ZINC (TABLET)*	$0 (OTC)	
DIALYVITE WAF PLUS D (WAFER)*	$0 (OTC)	
DRISDOL CAP 50000UNT (CAPSULE)*	$0 (OTC)	
*ergocalcifer cap 50000unt (capsule)**	$0 (OTC)	
*ester-c tab 1000mg (tablet)**	$0 (OTC)	
*ester-c tab 500mg (tablet, tablet er)**	$0 (OTC)	
*folic acid tab 1000mcg (tablet)**	$0 (OTC)	
*folic acid tab 1mg (tablet)**	$0 (OTC)	
FOLVITE-D TAB (TABLET)*	$0 (OTC)	
*fruit c chw 200mg (tablet chewable)**	$0 (OTC)	
IMMUNERX CAP (CAPSULE)*	$0 (OTC)	
*liquid c liq 500/5ml (liquid)**	$0 (OTC)	
*l-methylfola tab 15mg (tablet)**	$0 (OTC)	
*l-methylfola tab 7.5mg (tablet)**	$0 (OTC)	
*pan-c 500 tab bioflavo (tablet)**	$0 (OTC)	
*phytonadione tab 5mg (tablet)**	$0 (OTC)	
*span c tab (tablet)**	$0 (OTC)	
*vit b12/fa tab (tablet)**	$0 (OTC)	
*vitamin c chw 500mg (tablet chewable)**	$0 (OTC)	
*vitamin d cap 1.25mg (capsule)**	$0 (OTC)	
*vitamin d cap 1250mcg (capsule)**	$0 (OTC)	
*vitamin d cap 50000 (capsule)**	$0 (OTC)	
*vitamin d cap 50000unt (capsule)**	$0 (OTC)	
*vitamins for cap hair (capsule)**	$0 (OTC)	
*zinc plus cap vit c (capsule)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

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