Maryland Physicians Care (MPC) Drug Coverage for Prescription Medications

Effective October 2026

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Introduction

Welcome to your guide to the Maryland Physicians Care (MPC) drug coverage for prescription medications. This booklet will provide you with information on the medications that are covered under the MPC formulary.

The formulary was developed by the MPC Pharmacy and Therapeutics Committee (P&T Committee) that is comprised of physicians from various medical specialties. The P&T Committee reviews new and existing medications to ensure the formulary remains responsive to the needs of our members and providers, as well as monitoring the safety, effectiveness and cost associated with all drug categories.

The formulary is the cornerstone of drug therapy quality assurance and cost containment efforts. The review process has been successfully used by hospitals and managed care organizations to provide a comprehensive and cost-effective formulary. As you use the formulary, we invite your suggestions to improve the format or content.

Formulary Medications

The formulary is a listing of medications marketed at the time of printing and intended for use by the health plan physicians and pharmacy providers. The first column of the chart lists the drug that is covered by the plan. Brand name drugs are capitalized (e.g., AMOXIL). Generic drugs are listed in lower case and italics (e.g., *amoxicillin*). The second column lists any requirements for the drug such as prior authorization (PA), quantity limits (QLL), step therapy (ST).

Injectable medications are only covered when noted on the formulary.

The formulary applies only to medications dispensed to outpatients by participating pharmacies.

The formulary does not apply to inpatient medications or to medications obtained from and administered by a physician.

Formulary Status

The Maryland Physicians Care formulary status information can be found online with the Formulary Search Tool available on the Maryland Physicians Care website available at https://www.marylandphysicianscare.com/providers/approved-drug-benefits.html

Mental Health Medications

Certain mental health medications are carved out for MPC and are payable as fee-for-service through Maryland Medical Assistance. Please refer to the following website for a list of medications that are carved out and those that must be covered by MPC:

https://health.maryland.gov/mmcp/pap/pages/paphome.aspx

Substance Use Disorder Medications

Abuse deterrent medications are “carved out” for MPC and are payable as fee-for-service through Maryland Medical Assistance. Please refer to the following website for a list of medications that are carved out:

https://health.maryland.gov/mmcp/pap/pages/paphome.aspx

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Over-the-Counter, Non-prescription Medications Policy

Some over-the-counter (OTC) products are covered according to the MPC OTC list and will require a prescription.

Generic Drug Policy

Specific drugs, which have generic equivalents are covered at a generic reimbursement level and should be prescribed and dispensed in the generic form. Providers are reminded of the following:

1. When generic substitution conflicts with state regulations or restrictions, the pharmacist must gain approval from the prescribing physician to use the generic equivalent.

2. If a physician indicates “Dispense as Written” (DAW) and completes a MedWatch form to document any adverse effects caused by previous experience with at least 2 of the generic alternatives, MPC will pay for the brand name drug.

Unapproved Use of Medications

The member’s benefit handbook states medications will be eligible for coverage only if they are FDA approved medications used for non-experimental indications. Non-experimental indications include the labeled indication(s) (FDA-approved) and other indications accepted as effective by the balance of currently available scientific evidence and informed professional opinion.

Experimental and investigational drugs, and drugs used for cosmetic purposes are not eligible for coverage.

Drugs, which have Drug Efficiency Studies Implementation (DESI) status, are not covered by MPC.

Prescriptions for Non-Formulary Medications

The MPC P&T Committee has attempted to include medications from all therapeutic needs. If a patient requires medication that is not listed on the formulary, the physician may request an exception to allow payment for the medication. It is anticipated that such exceptions will be rare and physicians should be able to find a medication on the formulary for most therapeutic needs.

However, if a health care provider wishes that a member receive a medication not covered, he/she must submit a letter explaining the necessity, past therapeutic failures, and patient identification (name, address, and member id number). The P&T Committee will monitor prescriptions written in a non-conformance with the formulary and contact physicians who prescribe non-formulary products to request compliance.

Specialty Medications

Most Specialty Medications require prior authorization. Prior authorization forms can be downloaded from the MPC website at: https://www.marylandphysicianscare.com/providers/drug-benefits/medication-prior-authorization/

Oncology Medications

MPC will no longer prior authorize oncology/chemotherapy & radiation oncology services without an Eviti code. Your office should have received notification to sign up for training. If you have not had training, please go to the website www.welcometoeviti.com and sign up for training in order to receive your pin# and learn how to access the web based system, Eviti®. If you have any additional questions, please call Eviti, Inc., our oncology vendor, at 1-888-678-0990 (toll free).

Prior Authorization (PA)

Pharmacy Prior Authorization Request forms can be downloaded from the MPC website at https://www.marylandphysicianscare.com/providers/drug-benefits/medication-prior-authorization/

Quantity Limits (QL)

Certain formulary drugs may be prescribed only in limited quantities. Quantity limits are based on clinically approved prescribing guidelines to ensure safe and proper use. Drugs that have quantity limits are identified on the formulary in the third column with QL. In order to receive an override for a medication that has a quantity limit, please submit a request to MPC via fax at 833-896-0656 or call directly at 888-258-8250 . Prior Authorization forms can be downloaded from the MPC website at https://www.marylandphysicianscare.com/providers/drug-benefits/

Step Therapy (ST)

The ST program requires certain first-line drugs (generic drugs or other formulary drugs) be prescribed prior to approval of specific second-line drugs. If the prerequisite first-line agents have been filled, the member will be able to fill the prescription automatically, without requiring prior authorization. The ST requirements document can be downloaded from the MPC website at: https://www.marylandphysicianscare.com/providers/drug-benefits/

Copayments

Effective 5/1/2024 Maryland Department of Health (MDH) is mandating Managed Care Organizations to charge copayments. Individuals under the age of 21, individuals residing in long-term care facilities, pregnant individuals and Native Americans will not be charged a copayment for their prescription medications. Family planning products and adult vaccines will also not require copayments. The following copayments are:

Up to $3 copayment for non-preferred brand name drugs

Up to $1 copayment for generic, preferred, and HIV/AIDs drugs

Formulary Additions

If there is a new or existing medication that you would like to have added to the formulary, you will need to complete the Drug Formulary Change Request Form and send to MPC for presentation to the P&T Committee. Forms are located in the MPC Provider Manual or you can call Provider Services at (800) 953-8854, to request a form. You will be notified in writing of the decision taken at the P&T Committee. The MPC P&T Committee meets on a quarterly basis.

Legend

Abbreviation:	Definition:
OTC	Over the counter
PA	Prior Authorization
QL	Quantity Limit
ST	Step Therapy

Drug Name	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS	
clonidine hcl (adhd) tb12 .1mg	PA; Covered under Fee-for-Service for age 6-17
guanfacine hcl (adhd) tb24 1mg, 2mg, 3mg, 4mg	PA; Covered under Fee-for-Service for age 6-17
AMINOGLYCOSIDES	
AMINOGLYCOSIDES	
neomycin sulfate tabs 500mg	
ANALGESICS - ANTI-INFLAMMATORY	
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES	
ADALIMUMAB-ADBM AJKT 40MG/0.4ML, 40MG/0.8ML; PSKT 10MG/0.2ML, 20MG/0.4ML, 40MG/0.4ML, 40MG/0.8ML	PA
HADLIMA SOSY 40MG/0.4ML, 40MG/0.8ML	PA
HADLIMA PUSHTOUCH SOAJ 40MG/0.4ML, 40MG/0.8ML	PA
SIMLANDI PSKT 20MG/0.2ML, 40MG/0.4ML	PA
SIMLANDI 1-PEN KIT AJKT 40MG/0.4ML, 80MG/0.8ML	PA
SIMLANDI 2-PEN KIT AJKT 40MG/0.4ML	PA
YUSIMRY SOAJ 40MG/0.8ML	PA
ANTIRHEUMATIC - ENZYME INHIBITORS	
tofacitinib citrate soln 1mg/ml; tabs 5mg, 10mg; tb24 11mg, 22mg	PA
GOLD COMPOUNDS	
AURANOFIN CAPS 3MG	
RIDAURA CAPS 3MG	
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)	
celecoxib caps 50mg, 100mg, 200mg	ST, QL (60 caps every 30 days)
celecoxib caps 400mg	ST, QL (30 caps every 30 days)
diclofenac potassium tabs 50mg	
diclofenac sodium tb24 100mg; tbec 25mg, 50mg, 75mg	
etodolac caps 200mg, 300mg; tabs 400mg, 500mg; tb24 400mg, 500mg, 600mg	
flurbiprofen tabs 100mg	
ibu tabs 400mg, 600mg, 800mg	
ibuprofen susp 100mg/5ml, 200mg/10ml; tabs 200mg	OTC
ibuprofen susp 100mg/5ml, 200mg/10ml; tabs 400mg, 600mg, 800mg	
indomethacin caps 25mg, 50mg; cpcr 75mg	
ketoprofen caps 50mg, 75mg; cp24 200mg	
ketorolac tromethamine tabs 10mg	
meclofenamate sodium caps 50mg, 100mg	
meloxicam tabs 7.5mg, 15mg	
nabumetone tabs 500mg, 750mg	

Drug Name	Requirements/Limits
naproxen susp 125mg/5ml; tabs 250mg, 375mg, 500mg; tbec 375mg, 500mg	
naproxen sodium tabs 275mg	
oxaprozin tabs 600mg	
piroxicam caps 10mg, 20mg	
sulindac tabs 150mg, 200mg	
tolectin 600 tabs 600mg	
tolmetin sodium tabs 200mg, 600mg	
PYRIMIDINE SYNTHESIS INHIBITORS	
leflunomide tabs 10mg, 20mg	
ANALGESICS - NONNARCOTIC	
ANALGESIC COMBINATIONS	
bac tab	QL (240 tabs every 30 days)
butalbital-acetaminophen tab 50-325 mg	QL (240 tabs every 30 days)
butalbital-acetaminophen-caffeine tab 50-325-40 mg	QL (240 tabs every 30 days)
butalbital-aspirin-caffeine cap 50-325-40 mg	QL (240 caps every 30 days)
ANALGESICS OTHER	
acetaminophen caps 500mg; chew 80mg; liqd 160mg/5ml, 500mg/15ml, 1000mg/30ml; soln 160mg/5ml, 325mg/10.15ml, 650mg/20.3ml; tabs 325mg, 500mg; tbcr 650mg; tbdp 80mg, 160mg	OTC
SALICYLATES	
aspirin tabs 325mg; tbec 81mg, 325mg	OTC
diflunisal tabs 500mg	
salsalate tabs 500mg, 750mg	
ANALGESICS - OPIOID	
OPIOID AGONISTS	
CODEINE SULFATE TABS 15MG, 60MG	PA, QL (180 tabs every 30 days)
codeine sulfate tabs 30mg	PA, QL (180 tabs every 30 days)
fentanyl pt72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	PA, QL (10 patches every 30 days)
hydromorphone hcl tabs 2mg, 4mg, 8mg	PA, QL (120 tabs every 30 days)
methadone hcl conc 10mg/ml; soln 5mg/5ml, 10mg/5ml	PA, QL (120 mL every 30 days)
methadone hcl soln 5mg/5ml	PA, QL (120 bottles every 30 days)
methadone hcl tabs 5mg, 10mg	PA, QL (120 ea every 30 days)
methadone hcl tabs 5mg, 10mg	PA, QL (120 tabs every 30 days)
methadone hydrochloride i conc 10mg/ml	PA, QL (120 mL every 30 days)
morphine sulfate soln 10mg/5ml	PA, QL (1350 bottles every 30 days)
morphine sulfate soln 10mg/5ml	PA, QL (1350 mL every 30 days)
morphine sulfate soln 20mg/5ml	PA, QL (675 mL every 30 days)
morphine sulfate soln 100mg/5ml	PA, QL (135 mL every 30 days)
morphine sulfate supp 5mg, 10mg, 20mg, 30mg	PA, QL (180 supp every 30 days)
morphine sulfate tabs 15mg, 30mg	PA, QL (90 ea every 30 days)
morphine sulfate tabs 15mg, 30mg	PA, QL (90 tabs every 30 days)

Drug Name	Requirements/Limits
morphine sulfate tbcr 15mg, 30mg, 60mg, 100mg	PA, QL (60 tabs every 30 days)
morphine sulfate tbcr 15mg, 30mg, 60mg, 100mg, 200mg	PA, QL (60 tabs every 30 days)
oxycodone hcl conc 20mg/ml, 100mg/5ml	PA, QL (90 mL every 30 days)
oxycodone hcl soln 5mg/5ml	PA, QL (600 mL every 30 days)
oxycodone hcl tabs 5mg, 10mg, 15mg, 20mg, 30mg	PA, QL (150 tabs every 30 days)
oxycodone hcl tabs 5mg, 15mg, 30mg	PA, QL (150 tabs every 30 days)
oxymorphone hcl tb12 5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg, 40mg	PA, QL (60 tabs every 30 days)
tramadol hcl tabs 25mg, 50mg, 100mg	PA, QL (180 tabs every 30 days)
tramadol hcl tb24 100mg, 200mg, 300mg	PA, QL (30 tabs every 30 days)
OPIOID COMBINATIONS	
acetaminophen w/ codeine soln 120-12 mg/5ml	PA, QL (1000 bottles every 30 days)
acetaminophen w/ codeine soln 120-12 mg/5ml	PA, QL (1000 mL every 30 days)
acetaminophen w/ codeine tab 300-15 mg	PA, QL (240 tabs every 30 days)
acetaminophen w/ codeine tab 300-30 mg	PA, QL (240 tabs every 30 days)
acetaminophen w/ codeine tab 300-30 mg	PA, QL (240 tabs every 30 days)
acetaminophen w/ codeine tab 300-60 mg	PA, QL (240 tabs every 30 days)
ascomp/cod cap 30mg	PA, QL (240 caps every 30 days)
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	PA, QL (240 caps every 30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	PA, QL (240 caps every 30 days)
endocet tab 2.5-325	PA, QL (180 tabs every 30 days)
endocet tab 5-325mg	PA, QL (180 tabs every 30 days)
endocet tab 7.5-325	PA, QL (180 tabs every 30 days)
endocet tab 10-325mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	PA, QL (2750 mL every 30 days)
hydrocodone-acetaminophen tab 5-300 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 5-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 5-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 7.5-300 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 10-300 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 10-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-acetaminophen tab 10-325 mg	PA, QL (180 tabs every 30 days)
hydrocodone-ibuprofen tab 5-200 mg	PA, QL (240 tabs every 30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	PA, QL (240 tabs every 30 days)
hydrocodone-ibuprofen tab 10-200 mg	PA, QL (240 tabs every 30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 5-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 5-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 10-325 mg	PA, QL (180 tabs every 30 days)
oxycodone w/ acetaminophen tab 10-325 mg	PA, QL (180 tabs every 30 days)
tramadol-acetaminophen tab 37.5-325 mg	PA, QL (150 tabs every 30 days)

Drug Name	Requirements/Limits
OPIOID PARTIAL AGONISTS	
butorphanol tartrate soln 10mg/ml	PA, QL (1 bottle every 30 days)
ANDROGENS-ANABOLIC	
ANDROGENS	
danazol caps 50mg, 100mg, 200mg	
depo-testosterone soln 100mg/ml, 200mg/ml	PA
testosterone gel 12.5mg/act, 50mg/5gm	PA, QL (300 gm every 30 days)
testosterone gel 20.25mg/1.25gm, 40.5mg/2.5gm	PA, QL (150 gm every 30 days)
testosterone gel 20.25mg/act	PA, QL (150 gm every 30 days)
testosterone gel 20.25mg/act	PA, QL (150 gm every 30 days)
testosterone cypionate soln 100mg/ml, 200mg/ml	PA
testosterone enanthate soln 200mg/ml	PA
ANORECTAL AND RELATED PRODUCTS	
INTRARECTAL STEROIDS	
CORTIFOAM FOAM 10%	
hydrocortisone (intrarectal) enem 100mg/60ml	
RECTAL COMBINATIONS	
hydrocortisone acetate w/ pramoxine perianal cream 1-1%	
lidocaine-hydrocortisone acetate perianal cream 3-0.5%	
lidocaine-hydrocortisone acetate rectal cream kit 3-0.5%	
lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%	
LIDOCAINE/HC GEL 2.8-0.55	
PROCTOFOAM AER HC 1%	
RECTAL STEROIDS	
hydrocortisone (rectal) crea 2.5%	
procto-med hc crea 2.5%	
proctosol hc crea 2.5%	
proctozone-hc crea 2.5%	
VASODILATING AGENTS	
nitroglycerin (intra-anal) oint .4%	QL (30 gm every 30 days)
ANTACIDS	
ANTACID COMBINATIONS	
alum & mag hydroxide-simethicone chew tab 200-200-25 mg	OTC
ANTACIDS - ALUMINUM SALTS	
ALUMINUM HYDROXIDE SUSP 320MG/5ML	OTC
ANTACIDS - CALCIUM SALTS	
calcium carbonate (antacid) chew 400mg, 500mg, 750mg, 1000mg	OTC
ANTHELMINTICS	
ANTHELMINTICS	
BENZNIDAZOLE TABS 100MG	PA
ivermectin tabs 3mg	
pyrantel pamoate susp 144mg/ml	OTC

Drug Name	Requirements/Limits
ANTI-INFECTIVE AGENTS - MISC.	
ANTI-INFECTIVE AGENTS - MISC.	
metronidazole caps 375mg; tabs 250mg, 500mg	
trimethoprim tabs 100mg	
ANTI-INFECTIVE MISC. - COMBINATIONS	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	
sulfamethoxazole-trimethoprim tab 400-80 mg	
sulfamethoxazole-trimethoprim tab 800-160 mg	
sulfatrim pd sus 200-40/5	
GLYCOPEPTIDES	
vancomycin hcl caps 125mg, 250mg	PA, QL (40 caps every 30 days)
LEPROSTATICS	
dapsone tabs 25mg, 100mg	
LINCOSAMIDES	
clindamycin hcl caps 75mg, 150mg, 300mg	
clindamycin palmitate hydrochloride solr 75mg/5ml	
OXAZOLIDINONES	
linezolid tabs 600mg	PA
URINARY ANTI-INFECTIVES	
methenamine hippurate tabs 1gm	
methenamine mandelate tabs .5gm, 1gm	
nitrofurantoin susp 25mg/5ml	
nitrofurantoin macrocrystal caps 25mg, 50mg, 100mg	
nitrofurantoin monohyd macro caps 100mg	
ANTIANGINAL AGENTS	
ANTIANGINALS-OTHER	
ranolazine tb12 500mg, 1000mg	
ranolazine tb12 500mg, 1000mg	
NITRATES	
isosorbide dinitrate tabs 5mg, 10mg, 20mg, 30mg	
isosorbide mononitrate tabs 10mg, 20mg; tb24 30mg, 60mg, 120mg	
nitro-bid oint 2%	
NITRO-DUR PT24 .1MG/HR, .2MG/HR, .3MG/HR, .4MG/HR, .6MG/HR, .8MG/HR	
NITRO-TIME CPCR 2.5MG, 6.5MG, 9MG	
nitroglycerin oint 2%; pt24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; subl .3mg, .4mg, .6mg	
ANTIARRHYTHMICS	
ANTIARRHYTHMICS TYPE I-A	
disopyramide phosphate caps 100mg, 150mg	
disopyramide phosphate caps 100mg, 150mg	
quinidine gluconate tbcr 324mg	

Drug Name	Requirements/Limits
quinidine sulfate tabs 200mg, 300mg	
ANTIARRHYTHMICS TYPE I-B	
mexiletine hcl caps 150mg, 200mg, 250mg	
ANTIARRHYTHMICS TYPE I-C	
flecainide acetate tabs 50mg, 100mg, 150mg	
propafenone hcl cp12 225mg, 325mg, 425mg; tabs 150mg, 225mg, 300mg	
ANTIARRHYTHMICS TYPE III	
amiodarone hcl tabs 100mg, 200mg, 400mg	
MULTAQ TABS 400MG	PA
pacerone tabs 100mg, 200mg	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS	
ANTI-INFLAMMATORY AGENTS	
cromolyn sodium nebu 20mg/2ml	
BRONCHODILATORS - ANTICHOLINERGICS	
ATROVENT HFA AERS 17MCG/ACT	
ipratropium bromide soln .02%	
umeclidinium bromide aepb 62.5mcg/inh	QL (90 blisters every 90 days)
LEUKOTRIENE MODULATORS	
montelukast sodium chew 4mg, 5mg; pack 4mg; tabs 10mg	
zafirlukast tabs 10mg, 20mg	ST
STEROID INHALANTS	
budesonide (inhalation) susp .25mg/2ml, .5mg/2ml, 1mg/2ml	
fluticasone furoate (inhalation) aepb 50mcg/act	QL (3 inhalers every 90 days)
fluticasone furoate (inhalation) aepb 100mcg/act, 200mcg/act	QL (90 blisters every 90 days)
fluticasone propionate hfa aero 44mcg/act, 110mcg/act, 220mcg/act	QL (3 inhalers every 90 days)
QVAR REDIHALER AERB 40MCG/ACT, 80MCG/ACT	QL (3 inhalers every 90 days)
SYMPATHOMIMETICS	
albuterol sulfate aers 108mcg/act	QL: 2 inhalers for children, 1 inhaler for adults
albuterol sulfate aers 108mcg/act	QL: 2 inhalers for children, 1 inhaler for adults
albuterol sulfate nebu .63mg/3ml, 1.25mg/3ml	ST
albuterol sulfate nebu .083%, .5%, 2.5mg/0.5ml	
BEVESPI AER 9-4.8MCG	QL (3 inhalers every 90 days)
breyna aer 80/4.5	QL (3 inhalers every 90 days)
breyna aer 160/4.5	QL (3 inhalers every 90 days)
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	QL (3 inhalers every 90 days)
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	QL (3 inhalers every 90 days)
COMBIVENT AER 20-100	QL (1 inhaler every 30 days)
fluticasone-salmeterol aer powder ba 55-14 mcg/act	QL (3 inhalers every 90 days)

Drug Name	Requirements/Limits
fluticasone-salmeterol aer powder ba 100-50 mcg/act	QL (3 inhalers every 90 days)
fluticasone-salmeterol aer powder ba 113-14 mcg/act	QL (3 inhalers every 90 days)
fluticasone-salmeterol aer powder ba 232-14 mcg/act	QL (3 inhalers every 90 days)
fluticasone-salmeterol aer powder ba 250-50 mcg/act	QL (3 inhalers every 90 days)
fluticasone-salmeterol aer powder ba 500-50 mcg/act	QL (3 inhalers every 90 days)
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	
STIOLTO AER 2.5-2.5	ST, QL (3 inhalers every 90 days)
STIOLTO AER 2.5-2.5	ST, QL (3 inhalers every 90 days)
STRIVERDI RESPIMAT AERS 2.5MCG/ACT	QL (3 inhalers every 90 days)
terbutaline sulfate tabs 2.5mg, 5mg	
TRELEGY AER 100MCG	QL (3 inhalers every 90 days)
TRELEGY AER 100MCG	QL (3 inhalers every 90 days)
TRELEGY AER 200MCG	QL (3 inhalers every 90 days)
TRELEGY AER 200MCG	QL (3 inhalers every 90 days)
umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	QL (180 blisters every 90 days)
wixela inhub aer 100/50	QL (3 inhalers every 90 days)
wixela inhub aer 250/50	QL (3 inhalers every 90 days)
wixela inhub aer 500/50	QL (3 inhalers every 90 days)
XANTHINES	
theophylline elix 80mg/15ml; soln 80mg/15ml; tb12 300mg, 450mg	
theophylline tb12 300mg, 450mg; tb24 400mg, 600mg	
ANTICOAGULANTS	
COUMARIN ANTICOAGULANTS	
warfarin sodium tabs 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	
DIRECT FACTOR XA INHIBITORS	
ELIQUIS CPSP .15MG; TABS 2.5MG, 5MG	PA
ELIQUIS STARTER PACK TBPK 5MG	PA
HEPARINS AND HEPARINOID-LIKE AGENTS	
enoxaparin sodium soln 300mg/3ml; sosy 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	
fondaparinux sodium soln 2.5mg/0.5ml	
fondaparinux sodium soln 5mg/0.4ml	QL (8.4 mL every 365 days)
fondaparinux sodium soln 7.5mg/0.6ml	QL (12.6 mL every 248 days)
fondaparinux sodium soln 10mg/0.8ml	QL (16.8 mL every 248 days)
FRAGMIN SOLN 95000UNIT/3.8ML; SOSY 2500UNIT/0.2ML, 5000UNIT/0.2ML, 7500UNIT/0.3ML, 10000UNIT/ML, 12500UNIT/0.5ML, 15000UNIT/0.6ML, 18000UNT/0.72ML	
heparin sodium (porcine) soln 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	
THROMBIN INHIBITORS	
dabigatran etexilate mesylate caps 75mg, 110mg, 150mg	PA

Drug Name	Requirements/Limits
ANTICONVULSANTS	
ANTICONVULSANTS - MISC.	
primidone tabs 50mg, 250mg	
HYDANTOINS	
DILANTIN CAPS 30MG	
phenytoin chew 50mg; susp 125mg/5ml	
phenytoin sodium extended caps 100mg	
SUCCINIMIDES	
ethosuximide caps 250mg; soln 250mg/5ml	
ANTIDIABETICS	
ALPHA-GLUCOSIDASE INHIBITORS	
acarbose tabs 25mg, 50mg, 100mg	
ANTIDIABETIC COMBINATIONS	
alogliptin-metformin hcl tab 12.5-500 mg	
alogliptin-metformin hcl tab 12.5-1000 mg	
alogliptin-pioglitazone tab 12.5-30 mg	
alogliptin-pioglitazone tab 25-15 mg	
alogliptin-pioglitazone tab 25-30 mg	
alogliptin-pioglitazone tab 25-45 mg	
glipizide-metformin hcl tab 2.5-250 mg	
glipizide-metformin hcl tab 2.5-500 mg	
glipizide-metformin hcl tab 5-500 mg	
glyburide-metformin tab 1.25-250 mg	
glyburide-metformin tab 2.5-500 mg	
glyburide-metformin tab 5-500 mg	
pioglitazone hcl-glimepiride tab 30-2 mg	QL (30 tabs every 30 days)
pioglitazone hcl-glimepiride tab 30-4 mg	QL (30 tabs every 30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg	
pioglitazone hcl-metformin hcl tab 15-850 mg	
SEGLUROMET TAB 2.5-500	
SEGLUROMET TAB 2.5-1000	
SEGLUROMET TAB 7.5-500	
SEGLUROMET TAB 7.5-1000	
BIGUANIDES	
metformin hcl tabs 500mg, 850mg, 1000mg; tb24 500mg	
metformin hcl tabs 500mg, 850mg, 1000mg; tb24 500mg, 750mg	
DIABETIC OTHER	
BAQSIMI ONE PACK POWD 3MG/DOSE	
BAQSIMI TWO PACK POWD 3MG/DOSE	
dextrose (diabetic use) chew 4gm	OTC
glucagon solr 1mg	
GLUCAGON EMERGENCY KIT FO SOLR 1MG/ML	
glucose-vitamin c chew tab 4-6 gm-mg	OTC

Drug Name	Requirements/Limits
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS	
alogliptin benzoate tabs 6.25mg, 12.5mg, 25mg	
INCRETIN MIMETIC AGENTS	
liraglutide sopn 6mg/ml, 18mg/3ml	ST, PA
MOUNJARO SOAJ 2.5MG/0.5ML, 5MG/0.5ML, 7.5MG/0.5ML, 10MG/0.5ML, 12.5MG/0.5ML, 15MG/0.5ML	ST, PA
OZEMPIC SOPN 2MG/3ML, 4MG/3ML, 8MG/3ML; TABS 1.5MG, 4MG, 9MG	ST, PA
RYBELSUS TABS 1.5MG, 3MG, 4MG, 7MG, 9MG, 14MG	ST, PA
INSULIN	
ADMELOG SOLN 100UNIT/ML	
ADMELOG SOLOSTAR SOPN 100UNIT/ML	
HUMULIN INJ 70/30	OTC
HUMULIN N SUSP 100UNIT/ML	OTC
HUMULIN R SOLN 100UNIT/ML	OTC
INSULIN GLARGINE-YFGN SOLN 100UNIT/ML; SOPN 100UNIT/ML	
KIRSTY SOLN 100UNIT/ML; SOPN 100UNIT/ML	
NOVOLIN70/30 INJ RELION	OTC
NOVOLIN INJ 70/30	OTC
NOVOLIN N SUSP 100UNIT/ML	OTC
NOVOLIN N RELION SUSP 100UNIT/ML	OTC
NOVOLIN R SOLN 100UNIT/ML	OTC
NOVOLIN R RELION SOLN 100UNIT/ML	OTC
REZVOGLAR KWIKPEN SOPN 100UNIT/ML	
INSULIN SENSITIZING AGENTS	
pioglitazone hcl tabs 15mg, 30mg, 45mg	QL (30 tabs every 30 days)
MEGLITINIDE ANALOGUES	
nateglinide tabs 60mg, 120mg	
repaglinide tabs .5mg, 1mg, 2mg	
repaglinide tabs .5mg, 1mg, 2mg	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS	
dapagliflozin tabs 5mg, 10mg	PA
JARDIANCE TABS 10MG, 25MG	PA
STEGLATRO TABS 5MG, 15MG	
SULFONYLUREAS	
glimepiride tabs 1mg, 2mg, 4mg	
glipizide tabs 2.5mg, 5mg, 10mg; tb24 2.5mg, 5mg, 10mg	
glipizide tabs 15mg	
glyburide tabs 1.25mg, 2.5mg, 5mg	
ANTIDIARRHEAL/PROBIOTIC AGENTS	
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.	
bismuth subsalicylate susp 262mg/15ml, 525mg/15ml, 525mg/30ml, 527mg/30ml, 1050mg/30ml	OTC

Drug Name	Requirements/Limits
ANTIPERISTALTIC AGENTS	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	
diphenoxylate w/ atropine tab 2.5-0.025 mg	
loperamide hcl caps 2mg	
loperamide hcl caps 2mg; tabs 2mg	OTC
ANTIEMETICS	
5-HT3 RECEPTOR ANTAGONISTS	
granisetron hcl tabs 1mg	PA
ondansetron tbdp 4mg, 8mg	QL (30 tabs every 30 days)
ondansetron hcl soln 4mg/5ml	QL (150 mL every 30 days)
ondansetron hcl tabs 4mg, 8mg	QL (30 tabs every 30 days)
ANTIEMETICS - ANTICHOLINERGIC	
meclizine hcl chew 25mg; tabs 12.5mg, 25mg	OTC
meclizine hcl tabs 12.5mg, 25mg	
trimethobenzamide hcl caps 300mg	
ANTIEMETICS - MISCELLANEOUS	
doxylamine-pyridoxine tab delayed release 10-10 mg	
ANTIFUNGALS	
ANTIFUNGALS	
griseofulvin microsize susp 125mg/5ml; tabs 500mg	
griseofulvin ultramicrosize tabs 125mg, 250mg	
nystatin tabs 500000unit	
terbinafine hcl tabs 250mg	
IMIDAZOLE-RELATED ANTIFUNGALS	
fluconazole susr 10mg/ml, 40mg/ml; tabs 50mg, 100mg, 150mg, 200mg	
ketoconazole tabs 200mg	
ANTIHISTAMINES	
ANTIHISTAMINES - ALKYLAMINES	
chlorpheniramine maleate tabs 4mg; tbcr 12mg	OTC
ANTIHISTAMINES - ETHANOLAMINES	
clemastine fumarate tabs 2.68mg	
diphenhydramine hcl caps 25mg, 50mg; liqd 12.5mg/5ml, 25mg/10ml, 50mg/20ml; tabs 25mg	OTC
diphenhydramine hcl elix 12.5mg/5ml	
ANTIHISTAMINES - NON-SEDATING	
cetirizine hcl chew 10mg; soln 1mg/ml, 5mg/5ml; tabs 5mg, 10mg	OTC
cetirizine hcl soln 1mg/ml, 5mg/5ml	
fexofenadine hcl susp 30mg/5ml; tabs 60mg, 180mg	OTC
loratadine soln 5mg/5ml; tabs 10mg; tbdp 10mg	OTC
ANTIHISTAMINES - PHENOTHIAZINES	
promethazine hcl soln 6.25mg/5ml; supp 12.5mg, 25mg; tabs 12.5mg, 25mg, 50mg	

Drug Name	Requirements/Limits
promethegan supp 12.5mg, 25mg, 50mg	
ANTIHISTAMINES - PIPERIDINES	
cyproheptadine hcl syrp 2mg/5ml; tabs 4mg	
ANTIHYPERLIPIDEMICS	
ANTIHYPERLIPIDEMICS - COMBINATIONS	
ezetimibe-simvastatin tab 10-10 mg	ST
ezetimibe-simvastatin tab 10-20 mg	ST
ezetimibe-simvastatin tab 10-40 mg	ST
ezetimibe-simvastatin tab 10-80 mg	ST
BILE ACID SEQUESTRANTS	
cholestyramine pack 4gm; powd 4gm, 4gm/dose	
cholestyramine light pack 4gm; powd 4gm/dose	
colestipol hcl gran 5gm; pack 5gm; tabs 1gm	
colestipol hcl tabs 1gm	
prevalite pack 4gm; powd 4gm/dose	
FIBRIC ACID DERIVATIVES	
choline fenofibrate cpdr 45mg, 135mg	
choline fenofibrate cpdr 135mg	
fenofibrate tabs 48mg, 54mg, 145mg, 160mg	
fenofibrate micronized caps 67mg, 134mg, 200mg	
fenofibrate micronized caps 67mg, 134mg, 200mg	
gemfibrozil tabs 600mg	
HMG COA REDUCTASE INHIBITORS	
atorvastatin calcium tabs 10mg, 20mg, 40mg, 80mg	
atorvastatin calcium tabs 40mg	
lovastatin tabs 10mg, 20mg, 40mg	
pravastatin sodium tabs 10mg, 20mg, 40mg, 80mg	
pravastatin sodium tabs 10mg, 20mg, 40mg, 80mg	
rosuvastatin calcium tabs 5mg, 10mg, 20mg, 40mg	
rosuvastatin calcium tabs 5mg, 10mg, 20mg, 40mg	
simvastatin tabs 5mg, 10mg, 20mg, 40mg, 80mg	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS	
ezetimibe tabs 10mg	ST
ANTIHYPERTENSIVES	
ACE INHIBITORS	
benazepril hcl tabs 5mg, 10mg, 20mg, 40mg	
captopril tabs 12.5mg, 25mg, 50mg, 100mg	
enalapril maleate tabs 2.5mg, 5mg, 10mg, 20mg	
fosinopril sodium tabs 10mg, 20mg, 40mg	
lisinopril tabs 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	
lisinopril tabs 10mg, 20mg	
moexipril hcl tabs 7.5mg, 15mg	
perindopril erbumine tabs 2mg, 4mg, 8mg	
quinapril hcl tabs 5mg, 10mg, 20mg, 40mg	

Drug Name	Requirements/Limits
ramipril caps 1.25mg, 2.5mg, 5mg, 10mg	
ramipril caps 2.5mg, 5mg, 10mg	
trandolapril tabs 1mg, 2mg, 4mg	
ANGIOTENSIN II RECEPTOR ANTAGONISTS	
candesartan cilexetil tabs 4mg, 8mg, 16mg, 32mg	
irbesartan tabs 75mg, 150mg, 300mg	
irbesartan tabs 150mg	
losartan potassium tabs 25mg, 50mg, 100mg	
valsartan tabs 40mg, 80mg, 160mg, 320mg	
valsartan tabs 40mg, 80mg, 160mg, 320mg	
ANTIADRENERGIC ANTIHYPERTENSIVES	
clonidine ptwk .1mg/24hr, .2mg/24hr, .3mg/24hr	
clonidine hcl tabs .1mg	
clonidine hcl tabs .1mg, .2mg, .3mg	
doxazosin mesylate tabs 1mg, 2mg, 4mg, 8mg	
doxazosin mesylate tabs 1mg, 2mg, 4mg, 8mg	
guanfacine hcl tabs 1mg, 2mg	
methyldopa tabs 250mg, 500mg	
prazosin hcl caps 1mg, 2mg, 5mg	
terazosin hcl caps 1mg, 2mg, 5mg, 10mg	
ANTIHYPERTENSIVE COMBINATIONS	
amlodipine besylate-benazepril hcl cap 2.5-10 mg	
amlodipine besylate-benazepril hcl cap 5-10 mg	
amlodipine besylate-benazepril hcl cap 5-20 mg	
amlodipine besylate-benazepril hcl cap 5-40 mg	
amlodipine besylate-benazepril hcl cap 10-20 mg	
amlodipine besylate-benazepril hcl cap 10-40 mg	
amlodipine besylate-valsartan tab 5-160 mg	
amlodipine besylate-valsartan tab 5-320 mg	
amlodipine besylate-valsartan tab 10-160 mg	
amlodipine besylate-valsartan tab 10-320 mg	
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	QL (30 tabs every 30 days)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	QL (30 tabs every 30 days)
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	QL (30 tabs every 30 days)
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	QL (30 tabs every 30 days)
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	QL (30 tabs every 30 days)
atenolol & chlorthalidone tab 50-25 mg	
atenolol & chlorthalidone tab 100-25 mg	
benazepril & hydrochlorothiazide tab 5-6.25 mg	
benazepril & hydrochlorothiazide tab 10-12.5 mg	
benazepril & hydrochlorothiazide tab 20-12.5 mg	
benazepril & hydrochlorothiazide tab 20-25 mg	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	

Drug Name	Requirements/Limits
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	
captopril & hydrochlorothiazide tab 25-15 mg	
captopril & hydrochlorothiazide tab 25-25 mg	
captopril & hydrochlorothiazide tab 50-15 mg	
captopril & hydrochlorothiazide tab 50-25 mg	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	
lisinopril & hydrochlorothiazide tab 10-12.5 mg	
lisinopril & hydrochlorothiazide tab 20-12.5 mg	
lisinopril & hydrochlorothiazide tab 20-25 mg	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	
losartan potassium & hydrochlorothiazide tab 100-25 mg	
losartan potassium & hydrochlorothiazide tab 100-25 mg	
metoprolol & hydrochlorothiazide tab 50-25 mg	
metoprolol & hydrochlorothiazide tab 100-25 mg	
metoprolol & hydrochlorothiazide tab 100-50 mg	
quinapril-hydrochlorothiazide tab 10-12.5 mg	
quinapril-hydrochlorothiazide tab 20-12.5 mg	
quinapril-hydrochlorothiazide tab 20-25 mg	
valsartan-hydrochlorothiazide tab 80-12.5 mg	
valsartan-hydrochlorothiazide tab 160-12.5 mg	
valsartan-hydrochlorothiazide tab 160-25 mg	
valsartan-hydrochlorothiazide tab 320-12.5 mg	
valsartan-hydrochlorothiazide tab 320-25 mg	
VASODILATORS	
hydralazine hcl tabs 10mg, 25mg, 50mg, 100mg	
minoxidil tabs 2.5mg, 10mg	
ANTIMALARIALS	
ANTIMALARIALS	
chloroquine phosphate tabs 250mg, 500mg	
hydroxychloroquine sulfate tabs 200mg	
mefloquine hcl tabs 250mg	
primaquine phosphate tabs 26.3mg	
PRIMAQUINE PHOSPHATE TABS 26.3MG	
pyrimethamine tabs 25mg	PA

Drug Name	Requirements/Limits
ANTIMYASTHENIC/CHOLINERGIC AGENTS	
ANTIMYASTHENIC/CHOLINERGIC AGENTS	
pyridostigmine bromide tabs 60mg	
ANTIMYCOBACTERIAL AGENTS	
ANTIMYCOBACTERIAL AGENTS	
ethambutol hcl tabs 100mg, 400mg	
isoniazid syrp 50mg/5ml; tabs 100mg, 300mg	
PRIFTIN TABS 150MG	
pyrazinamide tabs 500mg	
rifampin caps 150mg, 300mg	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES	
ANTIMETABOLITES	
mercaptopurine tabs 50mg	
methotrexate sodium soln 1gm/40ml, 1000mg/40ml	QL (0.1 vials every 30 days)
methotrexate sodium soln 50mg/2ml	QL (2 vials every 30 days)
methotrexate sodium soln 50mg/2ml, 250mg/10ml; solr 1gm; tabs 2.5mg	
methotrexate sodium soln 250mg/10ml	QL (0.4 vials every 30 days)
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS	
megestrol acetate susp 40mg/ml, 400mg/10ml, 800mg/20ml	
ANTINEOPLASTICS MISC.	
hydroxyurea caps 500mg	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS	
lederle leucovorin tabs 5mg	
leucovorin calcium tabs 5mg, 10mg, 15mg, 25mg	
ANTIPARKINSON AND RELATED THERAPY AGENTS	
ANTIPARKINSON COMT INHIBITORS	
entacapone tabs 200mg	
ANTIPARKINSON DOPAMINERGICS	
amantadine hcl caps 100mg; soln 50mg/5ml; tabs 100mg	
bromocriptine mesylate caps 5mg; tabs 2.5mg	
carbidopa & levodopa tab 10-100 mg	
carbidopa & levodopa tab 25-100 mg	
carbidopa & levodopa tab 25-250 mg	
carbidopa & levodopa tab er 25-100 mg	
carbidopa & levodopa tab er 50-200 mg	
pramipexole dihydrochloride tabs .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	
ropinirole hydrochloride tabs .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	QL (90 tabs every 30 days)
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS	
selegiline hcl caps 5mg; tabs 5mg	

Drug Name	Requirements/Limits
ANTIPSYCHOTICS/ANTIMANIC AGENTS	
PHENOTHIAZINES	
compro supp 25mg	
prochlorperazine supp 25mg	
prochlorperazine maleate tabs 5mg, 10mg	
ANTIVIRALS	
ANTIRETROVIRALS	
abacavir sulfate soln 20mg/ml; tabs 300mg	PA
abacavir sulfate-lamivudine tab 600-300 mg	PA
APTIVUS CAPS 250MG	PA
atazanavir sulfate caps 150mg, 200mg, 300mg	PA
BIKTARVY TAB	
CIMDUO TAB 300-300	PA
COMPLERA TAB	PA
darunavir tabs 600mg, 800mg	PA
DELSTRIGO TAB	PA
DESCOVY TAB 120-15MG	PA
DESCOVY TAB 200/25MG	PA
DOVATO TAB 50-300MG	PA
EDURANT TABS 25MG	PA
EDURANT PED TBSO 2.5MG	PA
efavirenz tabs 600mg	PA
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	PA
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	
emtricitabine caps 200mg	PA
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	PA
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg	
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	
EMTRIVA CAPS 200MG; SOLN 10MG/ML	PA
EPIVIR SOLN 10MG/ML; TABS 150MG, 300MG	PA
etravirine tabs 100mg, 200mg	PA
EVOTAZ TAB 300-150	PA
fosamprenavir calcium tabs 700mg	PA
GENVOYA TAB	PA
IDVYNSO TAB 100-0.25	PA
INTELENCE TABS 25MG, 100MG, 200MG	PA
ISENTRESS CHEW 25MG, 100MG; PACK 100MG; TABS 400MG	
ISENTRESS HD TABS 600MG	
JULUCA TAB 50-25MG	PA
KALETRA SOL	PA
KALETRA TAB 100-25MG	PA

Drug Name	Requirements/Limits
KALETRA TAB 200-50MG	PA
lamivudine soln 10mg/ml; tabs 150mg, 300mg	PA
lamivudine-zidovudine tab 150-300 mg	PA
lopinavir-ritonavir tab 100-25 mg	PA
lopinavir-ritonavir tab 200-50 mg	PA
maraviroc tabs 150mg, 300mg	
nevirapine susp 50mg/5ml; tabs 200mg; tb24 400mg	PA
NORVIR PACK 100MG; TABS 100MG	
ODEFSEY TAB	PA
PIFELTRO TABS 100MG	PA
PREZCOBIX TAB 800-150	PA
PREZISTA SUSP 100MG/ML; TABS 75MG, 150MG, 600MG, 800MG	PA
RETROVIR CAPS 100MG; SYRP 50MG/5ML	PA
REYATAZ CAPS 200MG, 300MG	PA
REYATAZ PACK 50MG	
rilpivirine hcl tabs 25mg	PA
ritonavir tabs 100mg	
RUKOBIA TB12 600MG	PA
SELZENTRY TABS 150MG, 300MG	
STRIBILD TAB	PA
SUNLENCA TABS 300MG; TBPK 300MG	
SYMFI TAB	
SYMTUZA TAB	PA
tenofovir disoproxil fumarate tabs 300mg	
TIVICAY TABS 50MG	
TIVICAY PD TBSO 5MG	
TRIUMEQ PD TAB	PA
TRIUMEQ TAB	PA
TRUVADA TAB 100-150	PA
TRUVADA TAB 133-200	PA
TRUVADA TAB 167-250	PA
TRUVADA TAB 200-300	PA
VIRACEPT TABS 250MG, 625MG	PA
VIREAD POWD 40MG/GM; TABS 150MG, 200MG, 250MG, 300MG	
YEZTUGO TABS 300MG	QL (4 tabs every 336 days)
ZIAGEN SOLN 20MG/ML	PA
zidovudine caps 100mg; syrp 50mg/5ml	PA
zidovudine tabs 300mg	
ANTIVIRAL COMBINATIONS	
PAXLOVID PAK	QL (22 tabs every 30 days)
PAXLOVID TAB 150-100	QL (20 tabs every 30 days)
PAXLOVID TAB 300-100	QL (30 tabs every 30 days)

Drug Name	Requirements/Limits
CMV AGENTS	
valganciclovir hcl solr 50mg/ml	PA
valganciclovir hcl tabs 450mg	
HEPATITIS AGENTS	
adefovir dipivoxil tabs 10mg	
BARACLUDE SOLN .05MG/ML	
entecavir tabs .5mg, 1mg	
lamivudine (hbv) tabs 100mg	
MAVYRET PAK 50-20MG	PA; 1st-line (AASLD & IDSA)
MAVYRET TAB 100-40MG	PA; 1st-line (AASLD & IDSA)
PEGASYS SOLN 180MCG/ML; SOSY 180MCG/0.5ML	PA
ribavirin (hepatitis c) caps 200mg	ST, PA, QL (90 caps every 30 days)
ribavirin (hepatitis c) tabs 200mg	ST, PA, QL (90 tabs every 30 days)
SOFOS/VELPAT TAB 400-100	PA; 1st-line (AASLD & IDSA)
VEMLIDY TABS 25MG	PA
HERPES AGENTS	
acyclovir caps 200mg; susp 200mg/5ml; tabs 400mg, 800mg	
famciclovir tabs 125mg, 250mg, 500mg	
valacyclovir hcl tabs 1gm, 500mg, 1000mg	
INFLUENZA AGENTS	
oseltamivir phosphate caps 30mg	QL (20 caps every 30 days)
oseltamivir phosphate caps 45mg, 75mg	QL (10 caps every 30 days)
oseltamivir phosphate susr 6mg/ml	QL (180 mL every 30 days)
RELENZA DISKHALER AEPB 5MG/BLISTER	QL (1 inhaler every 30 days)
rimantadine hydrochloride tabs 100mg	
XOFLUZA TBPK 40MG, 80MG	
MISC. ANTIVIRALS	
LAGEVRIO CAPS 200MG	
BETA BLOCKERS	
ALPHA-BETA BLOCKERS	
carvedilol tabs 3.125mg, 6.25mg, 12.5mg, 25mg	
carvedilol tabs 6.25mg, 12.5mg	
labetalol hcl tabs 100mg, 200mg, 300mg	
BETA BLOCKERS CARDIO-SELECTIVE	
acebutolol hcl caps 200mg, 400mg	
atenolol tabs 25mg, 50mg, 100mg	
betaxolol hcl tabs 10mg, 20mg	
bisoprolol fumarate tabs 5mg, 10mg	
LOPRESSOR TABS 12.5MG	
LOPRESSOR TABS 50MG, 100MG	
metoprolol succinate tb24 25mg, 50mg, 100mg, 200mg	
metoprolol tartrate tabs 12.5mg, 25mg, 50mg, 100mg	
metoprolol tartrate tabs 25mg, 37.5mg, 50mg, 75mg, 100mg	
nebivolol hcl tabs 2.5mg, 5mg, 10mg, 20mg	

Drug Name	Requirements/Limits
BETA BLOCKERS NON-SELECTIVE	
nadolol tabs 20mg, 40mg, 80mg	
pindolol tabs 5mg, 10mg	
propranolol hcl cp24 60mg, 80mg, 120mg, 160mg; soln 20mg/5ml, 40mg/5ml; tabs 10mg, 20mg, 40mg, 60mg, 80mg	
propranolol hcl tabs 20mg	
sotalol hcl tabs 80mg, 120mg, 160mg, 240mg	
sotalol hcl (afib/afl) tabs 80mg, 120mg, 160mg	
timolol maleate tabs 5mg, 10mg, 20mg	
CALCIUM CHANNEL BLOCKERS	
CALCIUM CHANNEL BLOCKERS	
amlodipine besylate tabs 2.5mg, 5mg, 10mg	
cartia xt cp24 120mg, 180mg, 240mg, 300mg	
dilt-xr cp24 120mg, 180mg, 240mg	
diltiazem hcl cp12 60mg, 90mg, 120mg; cp24 120mg, 180mg, 240mg; tabs 30mg, 60mg, 90mg, 120mg	
diltiazem hcl cp12 90mg	
diltiazem hcl coated beads cp24 120mg, 180mg, 240mg, 300mg, 360mg	
diltiazem hcl extended release beads cp24 180mg, 240mg, 300mg, 360mg, 420mg	
felodipine tb24 2.5mg, 5mg, 10mg	
isradipine caps 2.5mg, 5mg	
nicardipine hcl caps 20mg, 30mg	
nifedipine caps 10mg, 20mg; tb24 30mg, 60mg, 90mg	
nimodipine caps 30mg	
nisoldipine tb24 8.5mg, 17mg, 34mg	
verapamil hcl cp24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; tabs 40mg, 80mg, 120mg; tbcr 120mg, 180mg, 240mg	
VERAPAMIL HYDROCHLORIDE E CP24 100MG	
CARDIOTONICS	
CARDIAC GLYCOSIDES	
digoxin soln .05mg/ml	
digoxin tabs .125mg, 125mcg, 250mcg	
CARDIOVASCULAR AGENTS - MISC.	
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS	
ENTRESTO CAP 6-6MG	PA
ENTRESTO CAP 15-16MG	PA
ENTRESTO TAB 24-26MG	PA
ENTRESTO TAB 49-51MG	PA
ENTRESTO TAB 97-103MG	PA
sacubitril-valsartan tab 24-26 mg	
sacubitril-valsartan tab 49-51 mg	
sacubitril-valsartan tab 97-103 mg	

Drug Name	Requirements/Limits
PROSTAGLANDIN VASODILATORS	
treprostinil soln 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	PA
TYVASO SOLN .6MG/ML	PA
TYVASO REFILL KIT SOLN .6MG/ML	PA
TYVASO STARTER KIT SOLN .6MG/ML	PA
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS	
ambrisentan tabs 5mg, 10mg	PA
bosentan tabs 62.5mg, 125mg	PA
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS	
alyq tabs 20mg	PA
sildenafil citrate (pulmonary hypertension) tabs 20mg	PA
sildenafil citrate (pulmonary hypertension) tabs 20mg	PA
tadalafil (pulmonary hypertension) tabs 20mg	PA
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR	
ADEMPAS TABS .5MG, 1MG, 1.5MG, 2MG, 2.5MG	PA
CEPHALOSPORINS	
CEPHALOSPORINS - 1ST GENERATION	
cefadroxil caps 500mg; susr 250mg/5ml, 500mg/5ml; tabs 1gm	
cephalexin caps 250mg, 500mg; susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
CEPHALOSPORINS - 2ND GENERATION	
cefaclor caps 250mg, 500mg	
CEFACLOR ER TB12 500MG	
cefprozil susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
cefuroxime axetil tabs 250mg, 500mg	
CEPHALOSPORINS - 3RD GENERATION	
cefdinir caps 300mg; susr 125mg/5ml, 250mg/5ml	
cefixime caps 400mg; susr 100mg/5ml, 200mg/5ml	
cefpodoxime proxetil susr 50mg/5ml, 100mg/5ml; tabs 100mg, 200mg	
CONTRACEPTIVES	
COMBINATION CONTRACEPTIVES - ORAL	
afirmelle tab 0.1-0.02	
altavera tab	
alyacen tab 1/35	
alyacen tab 7/7/7	
amethyst tab 90-20mcg	
apri tab	
aranelle tab	
ashlyna tab	
aubra eq tab 0.1-0.02	
aurovela 24 tab fe 1/20	

Drug Name	Requirements/Limits
aviane tab	
ayuna tab	
azurette tab	
balziva tab	
blisovi 24 tab fe 1/20	
blisovi fe tab 1/20	
briellyn tab	
camrese lo tab	
camrese tab	
chateal eq tab 0.15/30	
cryselle tab	
dasetta tab 1/35	
dasetta tab 7/7/7	
daysee tab	
delyla tab 0.1-0.02	
dolishale tab 90-20mcg	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	
drospirenone-ethinyl estradiol tab 3-0.03 mg	
elinest tab	
enskyce tab	
estarylla tab 0.25-35	QL (336 tabs every 252 days)
falmina tab	
galbriela chw	QL (336 ea every 252 days)
hailey 24 tab fe	
iclevia tab	
introvale tab	
jolessa tab	
juleber tab	
junel 1.5/30 tab	
junel 1/20 tab	
junel fe 24 tab 1/20	
junel fe tab 1.5/30	
junel fe tab 1/20	
kaitlib fe chw	QL (336 ea every 252 days)
kariva tab 28 day	
kelnor tab 1/35	
kurvelo tab 0.15/30	
larin 24 tab fe 1/20	
larin fe tab 1.5/30	
larin fe tab 1/20	
larin tab 1.5/30	
larin tab 1/20	
lessina tab	
levonest tab	

Drug Name	Requirements/Limits
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	
loryna tab 3-0.02mg	
low-ogestrel tab	
marlissa tab 0.15/30	
microgestin tab 1.5/30	
microgestin tab 1/20	
microgestin tab fe1.5/30	
microgestin tab fe 1/20	
mili tab 0.25/35	QL (336 tabs every 252 days)
mono-linyah tab 0.25-35	QL (336 tabs every 252 days)
necon tab 0.5/35	
nikki tab 3-0.02mg	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	QL (336 tabs every 252 days)
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	QL (336 tabs every 252 days)
nortrel tab 0.5/35	
nortrel tab 1/35	
nortrel tab 7/7/7	
nylia tab 7/7/7	
philith tab 0.4-35	
pimtrea tab	
portia-28 tab	
reclipsen tab	
rivelsa tab	
rosyrah tab	
setlakin tab	
sprintec 28 tab 28 day	QL (336 tabs every 252 days)
syeda tab 3-0.03mg	
tarina 24 fe tab	
tarina fe tab 1/20 eq	
tilia fe tab	
tri-estaryll tab	QL (336 tabs every 252 days)
tri-legest tab fe	
tri-linyah tab	QL (336 tabs every 252 days)
tri-lo tab estaryll	QL (336 tabs every 252 days)
tri-lo- tab marzia	QL (336 tabs every 252 days)
tri-lo- tab sprintec	QL (336 tabs every 252 days)
tri-lo-mili tab	QL (336 tabs every 252 days)
tri-mili tab	QL (336 tabs every 252 days)
tri-sprintec tab	QL (336 tabs every 252 days)
tri-vylibra tab	QL (336 tabs every 252 days)

Drug Name	Requirements/Limits
tri-vylibra tab lo	QL (336 tabs every 252 days)
turqoz tab	
tydemy tab	
valtya 1/35 tab	
velivet pak	
vestura tab 3-0.02mg	
vienva tab 0.1-20	
viorele tab	
vyfemla tab 0.4-35	
vylibra tab 0.25-35	QL (336 tabs every 252 days)
wera tab 0.5/35	
wymzya fe chw 0.4mg-35	
xarah fe tab	
zovia 1/35 tab	
COMBINATION CONTRACEPTIVES - TRANSDERMAL	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	QL (39 ea every 274 days)
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	QL (39 patches every 274 days)
xulane dis 150-35	QL (39 ea every 274 days)
xulane dis 150-35	QL (39 patches every 274 days)
zafemy dis 150/35	QL (39 ea every 274 days)
zafemy dis 150/35	QL (39 patches every 274 days)
COMBINATION CONTRACEPTIVES - VAGINAL	
eluryng mis	QL (12 ea every 274 days)
eluryng mis	QL (12 rings every 274 days)
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	QL (12 ea every 274 days)
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	QL (12 rings every 274 days)
COPPER CONTRACEPTIVES - IUD	
MIUDELLA IUD	QL (1 IUD every 540 days)
PARAGARD IUD T380A	QL (1 IUD every 540 days)
EMERGENCY CONTRACEPTIVES	
ELLA TABS 30MG	QL (1 tab every 30 days)
levonorgestrel (emergency oc) tabs 1.5mg	QL (1 tab every 30 days), OTC
levonorgestrel (emergency oc) tabs 1.5mg	QL (1 tab every 30 days), OTC
PROGESTIN CONTRACEPTIVES - IMPLANTS	
NEXPLANON IMPL 68MG	QL (1 ea every 540 days)
PROGESTIN CONTRACEPTIVES - INJECTABLE	
medroxyprogesterone acetate (contraceptive) susp 150mg/ml	QL (1 injection every 68 days)
medroxyprogesterone acetate (contraceptive) susy 150mg/ml	
PROGESTIN CONTRACEPTIVES - IUD	
KYLEENA IUD 19.5MG	QL (1 IUD every 540 days)
LILETTA IUD 20.1MCG/DAY	QL (1 IUD every 540 days)
MIRENA IUD 21MCG/DAY	QL (1 IUD every 540 days)
SKYLA IUD 13.5MG	QL (1 IUD every 540 days)

Drug Name	Requirements/Limits
PROGESTIN CONTRACEPTIVES - ORAL	
camila tabs .35mg	
deblitane tabs .35mg	
errin tabs .35mg	
heather tabs .35mg	
jencycla tabs .35mg	
lyza tabs .35mg	
nora-be tabs .35mg	
norethindrone (contraceptive) tabs .35mg	
sharobel tabs .35mg	
CORTICOSTEROIDS	
GLUCOCORTICOSTEROIDS	
budesonide tb24 9mg	
CORTISONE ACETATE TABS 25MG	
dexamethasone elix .5mg/5ml; soln .5mg/5ml; tabs .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	
hydrocortisone tabs 5mg, 10mg, 20mg	
methylprednisolone tabs 4mg, 8mg, 16mg, 32mg; tbpk 4mg	
prednisolone soln 15mg/5ml	
prednisolone sodium phosphate soln 5mg/5ml, 15mg/5ml, 25mg/5ml	
prednisone soln 5mg/5ml; tabs 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	
PREDNISONE INTENSOL CONC 5MG/ML	
MINERALOCORTICOIDS	
fludrocortisone acetate tabs .1mg	
fludrocortisone acetate tabs .1mg	
COUGH/COLD/ALLERGY	
ANTITUSSIVES	
benzonatate caps 100mg, 200mg	
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	
COUGH/COLD/ALLERGY COMBINATIONS	
BIODESP DM SYP	OTC
cetirizine-pseudoephedrine tab er 12hr 5-120 mg	OTC
chlorpheniramine & pseudoephedrine tab 4-60 mg	OTC
dextromethorphan-guaifenesin liquid 5-100 mg/5ml	OTC
dextromethorphan-guaifenesin liquid 10-100 mg/5ml	OTC
dextromethorphan-guaifenesin syrup 10-100 mg/5ml	OTC
fexofenadine-pseudoephedrine tab er 12hr 60-120 mg	OTC
fexofenadine-pseudoephedrine tab er 24hr 180-240 mg	OTC
guaifenesin-codeine soln 100-10 mg/5ml	OTC
LOHIST-D LIQ	OTC

Drug Name	Requirements/Limits
LOHIST-D LIQ 2-30/5ML	OTC
loratadine & pseudoephedrine tab er 12hr 5-120 mg	OTC
loratadine & pseudoephedrine tab er 24hr 10-240 mg	OTC
MUCINEX FAST TAB 5-10-200	OTC
phenylephrine w/ dm-gg liqd 2.5-5-50 mg/ml	OTC
phenylephrine w/ dm-gg liqd 2.5-5-75 mg/5ml	OTC
phenylephrine w/ dm-gg liqd 2.5-5-100 mg/5ml	OTC
phenylephrine w/ dm-gg liqd 5-10-100 mg/5ml	OTC
phenylephrine w/ dm-gg liqd 5-10-200 mg/5ml	OTC
phenylephrine w/ dm-gg liqd 10-18-200 mg/15ml	OTC
phenylephrine w/ dm-gg liqd 10-30-200 mg/5ml	OTC
phenylephrine w/ dm-gg liquid 10-20-400 mg/5ml	OTC
promethazine & phenylephrine syrup 6.25-5 mg/5ml	
promethazine w/ codeine syrup 6.25-10 mg/5ml	
promethazine-dm syrup 6.25-15 mg/5ml	
pseudoephedrine-guaifenesin tab er 12hr 60-600 mg	OTC
ROBITUSSIN LIQ CF	OTC
TUSSLIN LIQ PEDIATRI	OTC
EXPECTORANTS	
GERI-TUSSIN SYRP 100MG/5ML	OTC
guaifenesin liqd 100mg/5ml, 200mg/10ml, 300mg/15ml, 400mg/20ml; tb12 600mg, 1200mg	OTC
MISC. RESPIRATORY INHALANTS	
sodium chloride (inhalant) nebu .9%	
MUCOLYTICS	
acetylcysteine soln 10%, 20%	
DERMATOLOGICALS	
ACNE PRODUCTS	
adapalene crea .1%	PA, QL (45 gm every 30 days)
benzoyl peroxide crea 2.5%, 10%; gel 2.5%, 5%; liqd 2.5%, 5%	OTC
clindacin etz pledgets swab 1%	QL (60 ea every 30 days)
clindacin-p swab 1%	QL (60 ea every 30 days)
clindamycin phosphate (topical) gel 1%	QL (150 gm every 30 days)
clindamycin phosphate (topical) gel 1%	QL (150 mL every 30 days)
clindamycin phosphate (topical) lotn 1%; soln 1%	QL (120 mL every 30 days)
clindamycin phosphate (topical) swab 1%	QL (60 ea every 30 days)
clindamycin phosphate (topical) swab 1%	QL (60 ea every 30 days)
ery pads 2%	
erythromycin (acne aid) gel 2%; soln 2%	
sulfacetamide sodium (acne) lotn 10%	QL (236 mL every 30 days)
tretinoin crea .025%, .05%, .1%; gel .01%, .025%	PA, QL (45 gm every 30 days)
zenatane caps 10mg, 20mg, 30mg	ST, QL (60 caps every 30 days)
zenatane caps 40mg	ST

Drug Name	Requirements/Limits
ANTIBIOTICS - TOPICAL	
gentamicin sulfate (topical) crea .1%; oint .1%	QL (60 gm every 30 days)
mupirocin oint 2%	QL (22 gm every 30 days)
neomycin-bacitracin-polymyxin oint	OTC
ANTIFUNGALS - TOPICAL	
ciclodan soln 8%	
ciclopirox gel .77%	QL (100 gm every 30 days)
ciclopirox sham 1%	QL (120 mL every 30 days)
ciclopirox soln 8%	
ciclopirox olamine crea .77%	QL (90 gm every 30 days)
ciclopirox olamine susp .77%	QL (60 mL every 30 days)
clotrimazole (topical) crea 1%	QL (45 gm every 30 days)
clotrimazole (topical) crea 1%	QL (45 gm every 30 days), OTC
clotrimazole (topical) crea 1%	QL (45 gm every 30 days), OTC
clotrimazole (topical) soln 1%	QL (30 mL every 30 days)
clotrimazole (topical) soln 1%	QL (30 mL every 30 days), OTC
clotrimazole (topical) soln 1%	QL (30 mL every 30 days), OTC
clotrimazole w/ betamethasone cream 1-0.05%	QL (45 gm every 30 days)
clotrimazole w/ betamethasone lotion 1-0.05%	QL (60 mL every 30 days)
econazole nitrate crea 1%	QL (85 gm every 30 days)
ketoconazole (topical) crea 2%	QL (60 gm every 30 days)
ketoconazole (topical) sham 2%	QL (120 mL every 30 days)
miconazole nitrate (topical) crea 2%	OTC
nystatin (topical) crea 100000unit/gm; oint 100000unit/gm	QL (30 gm every 30 days)
nystatin (topical) powd 100000unit/gm	QL (180 gm every 30 days)
nystop powd 100000unit/gm	QL (180 gm every 30 days)
terbinafine hcl (topical) crea 1%	OTC
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL	
fluorouracil (topical) crea .5%, 5%; soln 2%, 5%	
ANTIPSORIATICS	
calcipotriene crea .005%; oint .005%; soln .005%	QL (120 gm every 30 days)
calcitrene oint .005%	QL (120 gm every 30 days)
calcitriol (topical) oint 3mcg/gm	
PYZCHIVA SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	PA
STEQEYMA SOSY 45MG/0.5ML, 90MG/ML	PA
USTEKINUMAB-TTWE SOLN 45MG/0.5ML	PA
YESINTEK SOLN 45MG/0.5ML; SOSY 45MG/0.5ML, 90MG/ML	PA
ANTISEBORRHEIC PRODUCTS	
selenium sulfide lotn 2.5%; sham 2.25%	
sulfacetamide sodium liqd 10%	QL (710 mL every 30 days)
sulfacetamide sodium liqd 10%	QL (710 ml every 30 days)
ANTIVIRALS - TOPICAL	
acyclovir topical oint 5%	ST, QL (30 gm every 30 days)
docosanol crea 10%	QL (2 gm every 30 days), OTC

Drug Name	Requirements/Limits
penciclovir crea 1%	QL (5 gm every 30 days)
BATH PRODUCTS	
ROBATHOL OIL	OTC
BURN PRODUCTS	
silver sulfadiazine crea 1%	
ssd crea 1%	
CORTICOSTEROIDS - TOPICAL	
alclometasone dipropionate crea .05%; oint .05%	
betamethasone dipropionate (topical) crea .05%; lotn .05%; oint .05%	
betamethasone dipropionate augmented crea .05%; gel .05%; lotn .05%; oint .05%	
betamethasone valerate crea .1%; lotn .1%; oint .1%	
clobetasol propionate crea .05%; gel .05%; oint .05%	QL (120 gm every 30 days)
clobetasol propionate foam .05%	QL (100 gm every 30 days)
clobetasol propionate lotn .05%	QL (118 mL every 30 days)
clobetasol propionate sham .05%	QL (236 mL every 30 days)
clobetasol propionate soln .05%	QL (100 mL every 30 days)
clobetasol propionate emollient base crea .05%	QL (120 gm every 30 days)
clobetasol propionate emollient base crea .05%	QL (120 gm every 30 days)
clodan sham .05%	QL (236 mL every 30 days)
desonide crea .05%; lotn .05%; oint .05%	
desoximetasone crea .05%, .25%; gel .05%; oint .05%, .25%	
diflorasone diacetate crea .05%; oint .05%	QL (120 gm every 30 days)
fluocinolone acetonide crea .01%, .025%; oil .01%; oint .025%; soln .01%	
fluocinonide crea .05%	QL (120 gm every 30 days)
fluocinonide crea .05%, .1%; gel .05%; oint .05%	QL (120 gm every 30 days)
fluocinonide soln .05%	QL (120 mL every 30 days)
fluocinonide soln .05%	QL (120 mL every 30 days)
fluocinonide emulsified base crea .05%	QL (120 gm every 30 days)
fluticasone propionate crea .05%; lotn .05%; oint .005%	
halobetasol propionate crea .05%; oint .05%	
HYDROCORTISONE CREA 1%	OTC
hydrocortisone (topical) crea 1%, 2.5%; lotn 2.5%; oint 1%, 2.5%	
hydrocortisone (topical) crea .5%, 1%; lotn 1%; oint .5%, 1%	OTC
hydrocortisone butyrate crea .1%; oint .1%	QL (120 gm every 30 days)
hydrocortisone butyrate soln .1%	QL (120 mL every 30 days)
hydrocortisone valerate crea .2%; oint .2%	
mometasone furoate crea .1%; oint .1%; soln .1%	
PRAMOSONE CRE 1-1%	
triamcinolone acetonide (topical) crea .025%, .1%, .5%; lotn .025%, .1%; oint .025%, .1%, .5%	

Drug Name	Requirements/Limits
EMOLLIENT/KERATOLYTIC AGENTS	
urea crea 40%	QL (200 gm every 30 days)
EMOLLIENTS	
emollient crea 15%, 33%, 70%; oint 41%, 42%, 45%, 46.5%	OTC
emollient - cream	OTC
emollient - ointment	OTC
glycerin (topical) liqd 99.5%	OTC
glycerin topical liquid	OTC
lactic acid (ammonium lactate) crea 12%; lotn 12%	
lactic acid (ammonium lactate) crea 12%; lotn 12%	OTC
PETROLATUM OIN	OTC
IMMUNOMODULATING AGENTS - TOPICAL	
imiquimod crea 5%	
IMMUNOSUPPRESSIVE AGENTS - TOPICAL	
pimecrolimus crea 1%	ST, QL (100 gm every 30 days)
tacrolimus (topical) oint .03%, .1%	ST, QL (100 gm every 30 days)
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS	
CONDYLOX GEL .5%	
PODOCON-25 SOLN 25%	
podofilox soln .5%	
salicylic acid liqd 3%, 17%	OTC
LOCAL ANESTHETICS - TOPICAL	
capsaicin crea .025%, .1%	OTC
lidocaine oint 5%	QL (200 gm every 30 days)
lidocaine ptch 4%	QL (30 patches every 30 days), OTC
lidocaine ptch 4%	QL (30 patches every 30 days), OTC
lidocaine ptch 5%	QL (30 patches every 30 days)
lidocaine ptch 5%	QL (30 patches every 30 days)
lidocaine hcl crea 3%; gel 2%; soln 4%	
lidocaine-prilocaine cream 2.5-2.5%	QL (30 gm every 30 days)
lidocaine-prilocaine cream kit 2.5-2.5%	
pramoxine hcl lotn 1%	OTC
MISC. TOPICAL	
isopropyl alcohol (skin cleanser) misc 70%	OTC
skin protectants misc - cream	OTC
skin protectants misc - ointment	OTC
skin protectants, misc. crea 1.8%, 33%, 50%; oint 2%, 3.8%, 43%, 77.4%, 86.5%	OTC
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL	
EUCRISA OINT 2%	QL (120 gm every 30 days)
ROSACEA AGENTS	
azelaic acid gel 15%	
metronidazole (topical) crea .75%; gel .75%, 1%; lotn .75%	

Drug Name	Requirements/Limits
SCABICIDES & PEDICULICIDES	
malathion lotn .5%	
permethrin crea 5%	
permethrin liqd 1%	OTC
pyrethrins-piperonyl butoxide shampoo 0.33-4%	OTC
TAR PRODUCTS	
coal tar extract sham .5%, 1%	OTC
X-SEB T PEARL SHAM 10%	OTC
X-SEB T PLUS SHAM 10%	OTC
DIAGNOSTIC PRODUCTS	
DIAGNOSTIC TESTS	
ACCU-CHEK TES AVIVA PL	QL (150 strips every 30 days), OTC
ACCU-CHEK TES GUIDE	QL (150 strips every 30 days), OTC
ACCU-CHEK TES SMART	QL (150 strips every 30 days), OTC
ALBUSTIX TES	OTC
CHEMSTRIP 2 TES GP	OTC
CHEMSTRIP 2 TES LN	OTC
CHEMSTRIP 5 TES OB	OTC
CHEMSTRIP 7 TES	OTC
CHEMSTRIP 9 TES STRIPS	OTC
CHEMSTRIP 10 TES MD	OTC
CHEMSTRIP TES -10 SG	OTC
CHEMSTRIP TES MICRAL	OTC
CHEMSTRIP TES UGK	OTC
CVS KETONE TES CARE	OTC
DIASTIX TES REAGENT	OTC
DIASTIX TES STRIPS	OTC
KETO-DIASTIX TES	OTC
KETONE TES	OTC
KETONE TEST TES	OTC
KETOSTIX TES STRIP	OTC
MULTISTIX 10 TES SG	OTC
RELION TES KETONE	OTC
DIGESTIVE AIDS	
DIGESTIVE ENZYMES	
CREON CAP 3000UNIT	
CREON CAP 6000UNIT	
CREON CAP 12000UNT	
CREON CAP 24000UNT	
CREON CAP 36000UNT	
DIURETICS	
CARBONIC ANHYDRASE INHIBITORS	
acetazolamide cp12 500mg; tabs 125mg, 250mg	
methazolamide tabs 25mg, 50mg	

Drug Name	Requirements/Limits
DIURETIC COMBINATIONS	
amiloride & hydrochlorothiazide tab 5-50 mg	
spironolactone & hydrochlorothiazide tab 25-25 mg	
triamterene & hydrochlorothiazide cap 37.5-25 mg	
triamterene & hydrochlorothiazide tab 37.5-25 mg	
triamterene & hydrochlorothiazide tab 75-50 mg	
LOOP DIURETICS	
bumetanide tabs .5mg, 1mg, 2mg	
furosemide soln 10mg/ml, 40mg/5ml; tabs 20mg, 40mg, 80mg	
furosemide tab 80 mg	
torsemide tabs 5mg, 10mg, 20mg, 100mg	
POTASSIUM SPARING DIURETICS	
amiloride hcl tabs 5mg	
spironolactone tabs 25mg, 50mg, 100mg	
THIAZIDES AND THIAZIDE-LIKE DIURETICS	
chlorthalidone tabs 25mg, 50mg	
chlorthalidone tabs 25mg, 50mg	
hydrochlorothiazide caps 12.5mg; tabs 12.5mg, 25mg, 50mg	
indapamide tabs 1.25mg, 2.5mg	
metolazone tabs 2.5mg, 5mg, 10mg	
ENDOCRINE AND METABOLIC AGENTS - MISC.	
BONE DENSITY REGULATORS	
alendronate sodium tabs 10mg, 35mg	
alendronate sodium tabs 70mg	
calcitonin (salmon) soln 200unit/act	
calcitonin (salmon) soln 200unit/ml	PA
TYMLOS SOPN 3120MCG/1.56ML	PA
GROWTH HORMONES	
OMNITROPE SOCT 5MG/1.5ML, 10MG/1.5ML; SOLR 5.8MG	PA
HORMONE RECEPTOR MODULATORS	
raloxifene hcl tabs 60mg	
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)	
INCRELEX SOLN 40MG/4ML	PA
METABOLIC MODIFIERS	
calcitriol caps .25mcg, .5mcg; soln 1mcg/ml	
doxercalciferol caps .5mcg, 1mcg, 2.5mcg	
levocarnitine (metabolic modifiers) soln 1gm/10ml; tabs 330mg	
nitisinone caps 2mg, 5mg, 10mg, 20mg	PA
nitisinone caps 2mg, 5mg, 10mg, 20mg	PA
PALYNZIQ SOSY 2.5MG/0.5ML, 10MG/0.5ML, 20MG/ML	PA
paricalcitol caps 1mcg, 2mcg, 4mcg	ST
TRYNGOLZA SOAJ 50MG/0.8ML, 80MG/0.8ML	PA
VYKAT XR TB24 25MG, 75MG, 150MG	PA

Drug Name	Requirements/Limits
POSTERIOR PITUITARY HORMONES	
desmopressin acetate tabs .1mg, .2mg	
desmopressin acetate spray soln .01%	
desmopressin acetate spray refrigerated soln .01%, .1mg/ml	
PROLACTIN INHIBITORS	
cabergoline tabs .5mg	
ESTROGENS	
ESTROGEN COMBINATIONS	
COMBIPATCH DIS	
esterified estrogens & methyltestosterone tab 0.625-1.25 mg	
esterified estrogens & methyltestosterone tab 1.25-2.5 mg	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	
PREMPHASE TAB	
PREMPRO TAB	
PREMPRO TAB 0.3-1.5	
PREMPRO TAB 0.45-1.5	
PREMPRO TAB 0.625-5	
ESTROGENS	
estradiol ptwk .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	QL (4 patches per 28 days)
estradiol tabs .5mg, 1mg, 2mg	
FLUOROQUINOLONES	
FLUOROQUINOLONES	
ciprofloxacin hcl tabs 250mg, 500mg, 750mg	
levofloxacin tabs 250mg, 500mg, 750mg	
moxifloxacin hcl tabs 400mg	
ofloxacin tabs 400mg	
GASTROINTESTINAL AGENTS - MISC.	
ANTIFLATULENTS	
simethicone chew 80mg; susp 20mg/0.3ml, 40mg/0.6ml	OTC
BILE ACID SYNTHESIS DISORDER AGENTS	
CTEXLI TABS 250MG	PA
GALLSTONE SOLUBILIZING AGENTS	
ursodiol caps 300mg; tabs 250mg, 500mg	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS	
lubiprostone caps 8mcg, 24mcg	
GASTROINTESTINAL STIMULANTS	
metoclopramide hcl soln 5mg/5ml, 10mg/10ml; tabs 5mg, 10mg	
INFLAMMATORY BOWEL AGENTS	
mesalamine cp24 .375gm; cpdr 400mg; enem 4gm; supp 1000mg; tbec 800mg	

Drug Name	Requirements/Limits
mesalamine w/ cleanser kit 4gm	
PYZCHIVA SOLN 130MG/26ML	PA
STEQEYMA SOLN 130MG/26ML	PA
sulfasalazine tabs 500mg; tbec 500mg	
USTEKINUMAB-TTWE SOLN 130MG/26ML	PA
YESINTEK SOLN 130MG/26ML	PA
INTESTINAL ACIDIFIERS	
enulose soln 10gm/15ml	
generlac soln 10gm/15ml	
lactulose (encephalopathy) soln 10gm/15ml	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS	
VIBERZI TABS 75MG, 100MG	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS	
MOVANTIK TABS 12.5MG, 25MG	PA, QL (30 tabs every 30 days)
PHOSPHATE BINDER AGENTS	
calcium acetate (phosphate binder) tabs 667mg	
sevelamer carbonate pack .8gm, 2.4gm; tabs 800mg	
sevelamer hcl tabs 400mg, 800mg	
GENITOURINARY AGENTS - MISCELLANEOUS	
ACIDIFIERS	
K-PHOS TAB NO 2	
ALKALINIZERS	
potassium citrate (alkalinizer) tbcr 15meq, 540mg, 1080mg, 1620mg	
HYPEROXALURIA AGENTS	
RIVFLOZA SOLN 80MG/0.5ML; SOSY 128MG/0.8ML, 160MG/ML	PA
INTERSTITIAL CYSTITIS AGENTS	
ELMIRON CAPS 100MG	
PROSTATIC HYPERTROPHY AGENTS	
alfuzosin hcl tb24 10mg	
finasteride tabs 5mg	
tamsulosin hcl caps .4mg	QL (60 caps every 30 days)
URINARY ANALGESICS	
phenazopyridine hcl tabs 100mg, 200mg	
GOUT AGENTS	
GOUT AGENTS	
allopurinol tabs 100mg, 300mg	
colchicine tabs .6mg	QL (120 tabs every 30 days)
febuxostat tabs 40mg, 80mg	ST
URICOSURICS	
probenecid tabs 500mg	

Drug Name	Requirements/Limits
HEMATOLOGICAL AGENTS - MISC.	
ANTIHEMOPHILIC PRODUCTS	
HYMPAVZI SOAJ 75MG/0.5ML, 150MG/ML	PA
COMPLEMENT INHIBITORS	
FABHALTA CAPS 200MG	PA
HEMATORHEOLOGIC AGENTS	
pentoxifylline tbcr 400mg	
PLASMA KALLIKREIN INHIBITORS	
ORLADEYO CAPS 110MG, 150MG; PACK 72MG, 96MG, 108MG, 132MG	PA
PLATELET AGGREGATION INHIBITORS	
anagrelide hcl caps .5mg, 1mg	
cilostazol tabs 50mg, 100mg	
clopidogrel bisulfate tabs 75mg	
dipyridamole tabs 25mg, 50mg, 75mg	
prasugrel hcl tabs 5mg, 10mg	
ticagrelor tabs 60mg, 90mg	
HEMATOPOIETIC AGENTS	
COBALAMINS	
cyanocobalamin soln 1000mcg/ml	
NASCOBAL SOLN 500MCG/0.1ML	
FOLIC ACID/FOLATES	
folic acid caps .8mg, 800mcg; tabs 1mg, 400mcg, 800mcg	OTC
folic acid soln 5mg/ml; tabs 1mg	
HEMATOPOIETIC GROWTH FACTORS	
DOPTELET TABS 20MG	PA
MULPLETA TABS 3MG	PA
IRON	
ferrous gluconate tabs 324mg	OTC
ferrous sulfate soln 15mg/ml, 220mg/5ml, 300mg/5ml; tabs 65mg, 325mg; tbec 325mg	OTC
ferrous sulfate dried tabs 200mg	OTC
STEM CELL MOBILIZERS	
XOLREMDI CAPS 100MG	PA
HEMOSTATICS	
HEMOSTATICS - SYSTEMIC	
tranexamic acid tabs 650mg	QL (30 tabs every 30 days)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	
BARBITURATE HYPNOTICS	
phenobarbital elix 20mg/5ml, 30mg/7.5ml, 60mg/15ml; tabs 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	

Drug Name	Requirements/Limits
LAXATIVES	
BULK LAXATIVES	
CVS DAILY FIBER PACK 58.6%	OTC
HYDROCIL INSTANT POWD 95%	OTC
KONSYL DAILY FIBER PACK 100%	OTC
METAMUCIL 4 IN 1 FIBER POWD 55.6%	OTC
psyllium caps .52gm, 400mg; powd 28.3%, 43%, 51.7%, 58.6%, 100%	OTC
psyllium cap 400 mg	OTC
psyllium powder 100%	OTC
LAXATIVE COMBINATIONS	
gavilyte-c sol	
gavilyte-g sol	
gavilyte-n sol flav pk	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	
LAXATIVES - MISCELLANEOUS	
constulose soln 10gm/15ml	
lactulose soln 10gm/15ml, 20gm/30ml	
polyethylene glycol 3350 pack 17gm; powd 17gm/scoop	OTC
SORBITOL SOLN 70%	OTC
STIMULANT LAXATIVES	
castor oil oil 100%	OTC
FLEET MINI ENEMA ENEM 10MG/30ML	OTC
senna syrp 176mg/5ml	OTC
SENNA EXTRA STRENGTH CAPS 17.2MG	OTC
sennosides caps 8.6mg; chew 15mg; liqd 8.8mg/5ml; syrp 8.8mg/5ml, 26.4mg/15ml; tabs 8.6mg, 25mg	OTC
SURFACTANT LAXATIVES	
docusate sodium caps 100mg; tabs 100mg	OTC
MACROLIDES	
AZITHROMYCIN	
azithromycin susr 100mg/5ml, 200mg/5ml; tabs 250mg, 500mg, 600mg	
CLARITHROMYCIN	
clarithromycin susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg; tb24 500mg	
ERYTHROMYCINS	
e.e.s. 400 tabs 400mg	
erythromycin base cpep 250mg; tabs 250mg, 500mg; tbec 250mg, 333mg, 500mg	
erythromycin ethylsuccinate susr 200mg/5ml, 400mg/5ml	

Drug Name	Requirements/Limits
MEDICAL DEVICES AND SUPPLIES	
CONTRACEPTIVES	
AIMSCO MIS LUBRICAT	OTC
COLOR CONDOM MIS + LUBE	OTC
DUREX EXTRA MIS SENSITIV	OTC
DUREX MIS TROPICAL	OTC
FANTASY LUBR MIS	OTC
FANTASY LUBR MIS COLORS	OTC
FANTASY LUBR MIS SPERMICI	OTC
FANTASY MIS LUBRICAT	OTC
KAMELEON LUB MIS COLORS	OTC
KAMELEON MIS TRI-COLR	OTC
KIMONO COLOR MIS	OTC
KIMONO MAXX MIS LG FLARE	OTC
KIMONO MICRO MIS THIN	OTC
KIMONO MICRO MIS THIN +	OTC
KIMONO MICRO MIS THIN PLS	OTC
KIMONO MIS LUBRICAT	OTC
KIMONO MIS SENSATIO	OTC
KIMONO PLUS MIS LUBRICAT	OTC
KIMONO PLUS MIS SPERMICI	OTC
KIMONO PS MIS LUBRICAT	OTC
KIMONO PS MIS PLUS	OTC
KIMONO SENSA MIS PLUS	OTC
KIMONO SPEC MIS	OTC
MAXX MIS LUBRICAT	OTC
MAXX PLUS MIS SPERMICI	OTC
NATURAL COND MIS + LUBE	OTC
REALITY MIS LUBRICAT	OTC
REALITY ULTR MIS TEXTURED	OTC
REALITY ULTR MIS THIN	OTC
TROJAN MAGN MIS	OTC
TROJAN MIS BARESKIN	OTC
TROJAN MIS ENZ	OTC
TROJAN ULTRA MIS RIBBED	OTC
TROJAN ULTRA MIS THIN	OTC
TROJAN-ENZ MIS LUBRICAT	OTC
TROJAN-ENZ MIS W/SPERMI	OTC
TRUE COVER MIS CONDOM	OTC
TRUSTEX LUBR MIS ASSORTED	OTC
TRUSTEX LUBR MIS BANANA	OTC
TRUSTEX LUBR MIS CHOC	OTC
TRUSTEX LUBR MIS COLA	OTC
TRUSTEX LUBR MIS COLORS	OTC
TRUSTEX LUBR MIS EX LARGE	OTC

Drug Name	Requirements/Limits
TRUSTEX LUBR MIS EX STR	OTC
TRUSTEX LUBR MIS GRAPE	OTC
TRUSTEX LUBR MIS MINT	OTC
TRUSTEX LUBR MIS RIB/STUD	OTC
TRUSTEX LUBR MIS SPERMICI	OTC
TRUSTEX LUBR MIS STRWBRY	OTC
TRUSTEX LUBR MIS VANILLA	OTC
TRUSTEX MIS BANANA	OTC
TRUSTEX MIS CHOCOLAT	OTC
TRUSTEX MIS FLAVORS	OTC
TRUSTEX MIS MINT	OTC
TRUSTEX MIS STRWBRY	OTC
TRUSTEX MIS VANILLA	OTC
TRUSTEX/RIA MIS LUBRICAT	OTC
TRUSTEX/RIA MIS NON-LUB	OTC
TRUSTEX/RIA MIS SPERMICI	OTC
TRUSTX NON-9 MIS RIB/STUD	OTC
WIDE-SEAL SILICONE DIAPHR DPRH 2%	
DIABETIC SUPPLIES	
ACCU-CHEK KIT FASTCLIX	OTC
ACCU-CHEK KIT GUIDE	OTC
ACCU-CHEK KIT GUIDE ME	OTC
ACCU-CHEK KIT SOFTCLIX	OTC
ACTI-LANCE MIS 28G	OTC
ACTI-LANCE MIS LITE 28G	OTC
ACTI-LANCE MIS SPEC 17G	OTC
ACTI-LANCE MIS UNIV 23G	OTC
ADV LANCING MIS DEVICE	OTC
ADVCATE SAFE MIS LANC 21G	OTC
ADVCATE SAFE MIS LANC 23G	OTC
ADVCATE SAFE MIS LANC 26G	OTC
ADVCATE SAFE MIS LANC 28G	OTC
ADVOCATE MIS LANC 30G	OTC
ADVOCATE MIS LANC DEV	OTC
ADVOCATE MIS LANCETS	OTC
AGAMATRIX MIS 33G	OTC
AIMSCO TWIST MIS 32G	OTC
AIMSCO TWIST MIS 33G	OTC
AQUALANCE MIS 30G	OTC
ASSURE CMFRT MIS 28G	OTC
ASSURE LANCE MIS 21G	OTC
ASSURE LANCE MIS 28G	OTC
ASSURE LANCE MIS LOW FLOW	OTC
ASSURE LANCE MIS MICRO	OTC
ASSURE LANCE MIS SAFE 25G	OTC

Drug Name	Requirements/Limits
ASSURE LANCE MIS SAFE 30G	OTC
AURORA LANCE MIS 30G	OTC
AURORA LANCE MIS THIN 23G	OTC
AUTO LANCET MIS	OTC
AUTO-LANCET MIS	OTC
AUTO-LANCET MIS MINI	OTC
AUTOLET LANC MIS DEVICE	OTC
AUTOLET LITE MIS LANCING	OTC
AUTOLET MINI MIS	OTC
AUTOLET PLAT MIS 1.8MM	OTC
AUTOLET PLAT MIS 2.4MM	OTC
AUTOLET PLAT MIS 3.0MM	OTC
AUTOLET PLUS MIS	OTC
BD MICROTAIN MIS LANCETS	
BD MICROTAIN MIS LANCETS	OTC
CARDIOCOM MIS LANCING	OTC
CAREONE ADV MIS LANCING	OTC
CAREONE LANC MIS 30G	OTC
CAREONE LANC MIS THIN 23G	OTC
CARESENS 30G MIS LANCETS	OTC
CARETOUCH MIS EJECTOR	OTC
CARETOUCH MIS LANC 26G	OTC
CARETOUCH MIS LANC 28G	OTC
CARETOUCH MIS LANC 30G	OTC
CARETOUCH MIS TWIST 28	OTC
CARETOUCH MIS TWIST 30	OTC
CARETOUCH MIS TWIST 33	OTC
CHOSEN MIS 30G	OTC
CHOSEN MIS LANCING	OTC
CHOSEN MIS SAFE 28G	OTC
CLEANLET 28G MIS LANCETS	OTC
CLEVER CHECK MIS	OTC
CLEVER CHECK MIS 30G	OTC
COAGUCHEK MIS LANCETS	OTC
COMFORT ASSU MIS LANC 28G	OTC
COMFORT ASSU MIS LANC 33G	OTC
COMFORT EZ MIS 21G	OTC
COMFORT EZ MIS 23G	OTC
COMFORT EZ MIS 28G	OTC
COMFORT TCH MIS LANC 28G	OTC
COMFORT TCH MIS LANC 30G	OTC
COMFORTOUCH MIS LANCET	OTC
CVS LANCETS MIS ORIGINAL	OTC
CVS LANCETS MIS THIN 26G	OTC
CVS LANCING MIS DEVICE	OTC

Drug Name	Requirements/Limits
DEXCOM G6 MIS SENSOR	QL (3 boxes every 30 days)
DEXCOM G7 MIS SENSOR	QL (3 boxes every 30 days)
DEXCOM G7 MIS SNSR 15D	QL (2 boxes every 30 days)
DIATHRIVE MIS LANCETS	OTC
DIATHRIVE MIS LANCING	OTC
DIATHRIVE MIS UT 30G	OTC
DROPLET GENT MIS LANCING	OTC
DROPLET LANC MIS 30G	OTC
DROPLET LANC MIS DEVICE	OTC
DROPLET PERS MIS LANC 30G	OTC
DROPSAFE ACT MIS LANC 23G	OTC
EASY COMFORT LANCETS TWIS	OTC
EASY COMFORT MIS 30G	OTC
EASY COMFORT MIS LANC/30G	OTC
EASY COMFORT MIS TWIST	OTC
EASY MINI MIS	OTC
EASY MINI MIS EJECT	OTC
EASY TOUCH MIS	OTC
EASY TOUCH MIS /EJECTOR	OTC
EASY TOUCH MIS LANC/21G	OTC
EASY TOUCH MIS LANC/23G	OTC
EASY TOUCH MIS LANC/26G	OTC
EASY TOUCH MIS LANC/28G	OTC
EASY TOUCH MIS LANC/30G	OTC
EASY TOUCH MIS LANC/32G	OTC
EASY TOUCH MIS P-AC/21G	OTC
EASY TOUCH MIS P-AC/23G	OTC
EASY TOUCH MIS P-AC/26G	OTC
EASY TOUCH MIS P-AC/28G	OTC
EASY TOUCH MIS P-AC/30G	OTC
EASY TOUCH MIS TWST/28G	OTC
EASY TOUCH MIS TWST/30G	OTC
EASY TOUCH MIS TWST/32G	OTC
EASY TOUCH MIS TWST/33G	OTC
EMBRACE LANC MIS 21G	OTC
EMBRACE LANC MIS 28G	OTC
EMBRACE LANC MIS /EJECTOR	OTC
EMBRACE LANC MIS THIN 30G	OTC
ENLITE GLUCO MIS SENSOR	QL (5 boxes every 30 days)
EVERSENSE365 MIS SENSOR	QL (1 box every 274 days)
EVERSENSE MIS SENSOR	QL (1 box every 30 days)
FASTCLIX MIS LANCETS	OTC
FIFTY50 SAFE MIS LANCETS	OTC
FINGERSTIX MIS LANCETS	OTC
FORA LANCETS MIS 30G	OTC

Drug Name	Requirements/Limits
FORA MIS LANCETS	OTC
FORA MIS LANCING	OTC
FREESTYLE LB KIT 2/SENSOR	QL (2 boxes every 30 days)
FREESTYLE LB KIT 2PLS/SEN	QL (2 boxes every 30 days)
FREESTYLE LB KIT 3/SENSOR	QL (2 boxes every 30 days)
FREESTYLE LB KIT 3PLS/SEN	QL (2 boxes every 30 days)
FREESTYLE LB KIT 14D/SEN	QL (2 boxes every 30 days)
FREESTYLE MIS LANCETS	OTC
FREESTYLE MIS UNISTICK	OTC
GENTEEL MIS LANCETS	OTC
GENTEEL MIS NOZZLES	OTC
GENTEEL PLUS MIS BLACK	OTC
GENTEEL PLUS MIS BLUE	OTC
GENTEEL PLUS MIS PINK	OTC
GENTEEL PLUS MIS PURPLE	OTC
GENTEEL PLUS MIS WHITE	OTC
GENTEEL TIPS MIS BLUE	OTC
GENTEEL TIPS MIS CLEAR	OTC
GENTEEL TIPS MIS GREEN	OTC
GENTEEL TIPS MIS ORANGE	OTC
GENTEEL TIPS MIS RAINBOW	OTC
GENTEEL TIPS MIS VIOLET	OTC
GENTEEL TIPS MIS YELLOW	OTC
GLOBAL 28G MIS LANCETS	OTC
GLOBAL 30G MIS LANCETS	OTC
GLOBAL LANC MIS DEVICE	OTC
GLUCOCOM MIS 28G	OTC
GLUCOCOM MIS 30G	OTC
GLUCOCOM MIS 33G	OTC
GNP LANCETS MIS 28G	OTC
GNP LANCETS MIS 30G	OTC
GNP LANCETS MIS 33G	OTC
GNP LANCING MIS DEVICE	OTC
GOJJI LANCET MIS 30G	OTC
GOJJI MIS LANC DEV	OTC
GUARDIAN 4 MIS SENSOR	QL (5 boxes every 30 days)
GUARDIAN MIS SENSOR 3	QL (5 boxes every 30 days)
GUARDIAN MIS SENSOR 3	QL (5 each every 30 days)
HAEMOLANCE MIS HIGH FLO	OTC
HAEMOLANCE MIS LOW FLOW	OTC
HAEMOLANCE MIS PLUS	OTC
HAEMOLANCE MIS PLUS LOW	OTC
HAEMOLANCE MIS PLUS MAX	OTC
HAEMOLANCE MIS PLUS PED	OTC
HAEMOLANCE MIS RETRACT	OTC

Drug Name	Requirements/Limits
HYPOLANCE KIT LANCING	OTC
IHEALTH LANC MIS DEVICE	OTC
IN TOUCH LAN MIS 30G	OTC
IN TOUCH LAN MIS DEVICE	OTC
INCONTROL MIS LANC 28G	OTC
INCONTROL MIS LANC 30G	OTC
INCONTROL MIS LANC 33G	OTC
INCONTROL MIS LANC DEV	OTC
KINNEY MIS LANCETS	OTC
KINNEY THIN MIS LANCETS	OTC
KROGER LANCE MIS	OTC
KROGER LANCE MIS 26G	OTC
KROGER LANCE MIS THIN	OTC
KROGER LANCE MIS THIN 30G	OTC
LANCET DEVIC MIS 30G	OTC
LANCET DEVIC MIS ADJUST	OTC
LANCET SUPER MIS THIN 30G	OTC
LANCET ULTRA MIS THIN 30G	OTC
LANCET WITH MIS EJECTOR	OTC
LANCETS	OTC
LANCETS MICR MIS THIN 33G	OTC
LANCETS MIS	OTC
LANCETS MIS 21G	OTC
LANCETS MIS 26G	OTC
LANCETS MIS 28G	OTC
LANCETS MIS 28G THIN	OTC
LANCETS MIS 30G	OTC
LANCETS MIS 33G	OTC
LANCETS MIS ORIGINAL	OTC
LANCETS MIS THIN	OTC
LANCETS SUPR MIS THIN 28G	OTC
LANCETS ULTR MIS THIN	OTC
LANCETS ULTR MIS THIN 31G	OTC
LANCING DEVI MIS	OTC
LANCING DEVI MIS 25G	OTC
LANCING DEVI MIS 30G	OTC
LANCING DEVICE	OTC
LANCING MIS DEVICE	OTC
LANZO MIS LANCING	OTC
LITE TOUCH MIS LANC PEN	OTC
LITE TOUCH MIS LANCETS	OTC
LITETOUCH MIS LANCETS	OTC
MEDICHOICE MIS LANCET	OTC
MEDLANCE MIS 30G PLUS	OTC
MEDLANCE MIS PLUS 30G	OTC

Drug Name	Requirements/Limits
MEDLANCE PLS MIS 0.8MM	OTC
MEDLANCE PLS MIS EXTR 21G	OTC
MEDLANCE PLS MIS LITE 25G	OTC
MEDLANCE PLS MIS UNIV 21G	OTC
MEIJER LANCE MIS COLOR	OTC
MEIJER LANCE MIS UNIV 21G	OTC
MEIJER LANCE MIS UNIV 30G	OTC
MEIJER MIS LANCETS	OTC
MICROLET MIS LANCETS	OTC
MICROLET MIS NEXT	OTC
MINI LANCING MIS DEVICE	OTC
MINIMED INST MIS SENSOR	QL (2 boxes every 30 days)
MM LANCING MIS DEVICE	OTC
MM TWIST MIS LANCETS	OTC
MOBILE LANCE MIS 30G	OTC
MONOLET MIS LANCETS	OTC
MONOLET OPD MIS LANCETS	OTC
MONOLETTOR MIS LANCETS	OTC
MULTI-LANCET KIT DEVICE	OTC
MULTI-LANCET MIS DEVICE	OTC
MYGLUCOHEALT MIS LANC 30G	OTC
NOVA SAFETY MIS LANC 23G	OTC
NOVA SAFETY MIS LANC 28G	OTC
NOVA SURE MIS LANCETS	OTC
NOVA SUREFLX MIS LANC DEV	OTC
ON-THE-GO MIS LANC 30G	OTC
PERFECT 28G MIS LANCETS	OTC
PERFECT 30G MIS LANCETS	OTC
PERFECT POIN MIS LANC 28G	OTC
PERFECT POIN MIS LANC 30G	OTC
PIP LANCETS MIS 28G	OTC
PIP LANCETS MIS 30G	OTC
PRO COMFORT MIS 31G	OTC
PRO COMFORT MIS LANC 30G	OTC
PRO COMFORT MIS LANCETS	OTC
PRODIGY MIS 26G	OTC
PRODIGY MIS 28G	OTC
PRODIGY MIS LANC DEV	OTC
PURE COMFORT LANCETS 30G	OTC
PURE COMFORT MIS 30G LAN	OTC
PX LANCETS MIS 28G	OTC
PX LANCETS MIS 33G	OTC
QC LANCETS MIS 28G	OTC
QC LANCETS MIS 30G	OTC
QC LANCING MIS DEVICE	OTC

Drug Name	Requirements/Limits
RAPID-SAFE MIS LANCING	OTC
READYLANCE MIS 21G	OTC
READYLANCE MIS 23G	OTC
READYLANCE MIS 26G	OTC
READYLANCE MIS 28G	OTC
READYLANCE MIS 30G	OTC
REALITY MIS LANCETS	OTC
REALITY TRIG MIS LANCETS	OTC
RELION LANCE MIS THIN 26G	OTC
RELION LANCE MIS THIN 30G	OTC
RELION LANCI MIS DEVICE	OTC
RELION MICRO MIS THIN 33G	OTC
RELION ULTRA MIS THIN 30G	OTC
RIGHTEST ALT MIS ADAPTOR	OTC
RIGHTEST MIS GD500	OTC
RIGHTEST MIS GL300	OTC
SAFE-T-PRO MIS LANCETS	OTC
SAFE-T-PRO MIS PLUS	OTC
SAFETY 21G MIS LANCETS	OTC
SAFETY 23G MIS LANCETS	OTC
SAFETY 28G MIS LANCETS	OTC
SAFETY MIS LANCETS	OTC
SAPS HEALTH MIS TWIST	OTC
SAPS TWIST MIS 30G	OTC
SAPSCARE MIS TWIST	OTC
SB LANCETS MIS THIN	OTC
SB LANCETS MIS ULTR THN	OTC
SELECT-LITE MIS LANC DEV	OTC
SIMPLE DIAG MIS LANCING	OTC
SIMPLERA MIS SENSOR	QL (5 boxes every 30 days)
SIMPLERA MIS SYNC SEN	QL (5 each every 30 days)
SIMPLERA MIS SYSTEM	QL (5 boxes every 30 days)
SINGLE-LET MIS 23G	OTC
SMARTEST MIS LANCETS	OTC
SOFTCLIX MIS LANCETS	OTC
SOLUS V2 MIS LANC 28G	OTC
SOLUS V2 MIS LANC 30G	OTC
SOLUS V2 MIS LANC DEV	OTC
STERILANCE MIS TL 28G	OTC
STERILANCE MIS TL 30G	OTC
STERILANCE MIS TL 32G	OTC
SUPER THIN MIS LANCETS	OTC
SURE COMFORT MIS LANC 18G	OTC
SURE COMFORT MIS LANC 21G	OTC
SURE COMFORT MIS LANC 23G	OTC

Drug Name	Requirements/Limits
SURE COMFORT MIS LANC 30G	OTC
SURE COMFORT MIS LANC PEN	OTC
SURE COMFORT MIS LANCETS	OTC
SUREFLEX MIS LANCETS	OTC
SURELITE MIS LANCETS	OTC
TECHLITE AST MIS LANCETS	OTC
TECHLITE MIS LANC 26G	OTC
TECHLITE MIS LANCETS	OTC
TRAVEL LANCE MIS ADV 28G	OTC
TRUE COM LAN MIS SAFE 30G	OTC
TRUE COM LAN MIS TWST 30G	OTC
TRUEDRAW MIS LANC DEV	OTC
TRUPLUS LANC MIS 26G	OTC
TRUPLUS LANC MIS 28G	OTC
TRUPLUS LANC MIS 30G	OTC
TRUPLUS LANC MIS 33G	OTC
TWIST LANCET MIS 30G	OTC
TWIST LANCET MIS 30G MULT	OTC
ULTI-LANCE MIS CLR TIP	OTC
ULTILET MIS 26G	OTC
ULTILET MIS 28G	OTC
ULTILET MIS 30G	OTC
ULTILET MIS 33G	OTC
ULTILET MIS LANCETS	OTC
ULTILET MIS SAFETY	OTC
ULTILET SAFE MIS 21G	OTC
ULTRA THIN MIS 28G	OTC
ULTRA THIN MIS 30G	OTC
ULTRA THIN MIS 31G	OTC
ULTRA THIN MIS 33G	OTC
ULTRA THIN MIS LAN 31G	OTC
ULTRA THIN MIS LANC 28G	OTC
ULTRA THIN MIS LANC 30G	OTC
ULTRA THIN MIS LANCETS	OTC
UNILET EX II MIS 28G	OTC
UNILET EXCEL MIS 23G	OTC
UNILET G.P MIS SUPR 23G	OTC
UNILET G.P. MIS 21G	OTC
UNILET GP 28 MIS ULT THIN	OTC
UNILET LANC MIS 33G	OTC
UNILET LANCE MIS 21G	OTC
UNILET LANCE MIS 28G	OTC
UNILET LANCE MIS 33G	OTC
UNILET LANCT MIS 28G	OTC
UNILET LANCT MIS 30G	OTC

Drug Name	Requirements/Limits
UNILET LANCT MIS 33G	OTC
UNILET MICRO MIS 33G	OTC
UNILET MIS 21G	OTC
UNILET SUPER MIS 23G	OTC
UNILET SUPER MIS G.P. 23G	OTC
UNISTIK 1 MIS 2.4MM	OTC
UNISTIK 1 MIS 3.0MM	OTC
UNISTIK 2 MIS	OTC
UNISTIK 2 MIS 1.8MM	OTC
UNISTIK 2 MIS 2.4MM	OTC
UNISTIK 2 MIS COMFORT	OTC
UNISTIK 2 MIS EXTRA	OTC
UNISTIK 2 MIS NEONATAL	OTC
UNISTIK 2 MIS NORMAL	OTC
UNISTIK 2 MIS SUPER	OTC
UNISTIK 3 MIS 1.8MM	OTC
UNISTIK 3 MIS COMFORT	OTC
UNISTIK 3 MIS EXTRA	OTC
UNISTIK 3 MIS GENT 30G	OTC
UNISTIK 3 MIS NEONATAL	OTC
UNISTIK 3 MIS NORMAL	OTC
UNISTIK 23G MIS NORMAL	OTC
UNISTIK CZT MIS COMFORT	OTC
UNISTIK CZT MIS NORMAL	OTC
UNISTIK PRO MIS LANC 21G	OTC
UNISTIK PRO MIS LANC 28G	OTC
UNISTIK SAFE MIS LANC 28G	OTC
UNISTIK SAFE MIS LANC 30G	OTC
UNISTIK TOUC MIS LANC 21G	OTC
UNISTIK TOUC MIS LANC 23G	OTC
UNISTIK TOUC MIS LANC 28G	OTC
UNISTIK TOUC MIS LANC 30G	OTC
UNITSTIK PRO MIS LANC 25G	OTC
VANTAGE LANC MIS DEVICE	OTC
VERIFINE LAN MIS MINI 21G	OTC
VERIFINE LAN MIS MINI 23G	OTC
VERIFINE LAN MIS MINI 28G	OTC
VERIFINE LAN MIS MINI 30G	OTC
VERIFINE MIS UNIV 28G	OTC
VERIFINE MIS UNIV 30G	OTC
VERIFINE MIS UNIV 33G	OTC
VIVAGUARD MIS 28G	OTC
VIVAGUARD MIS 30G	OTC
VIVAGUARD MIS LANCING	OTC
ZEVRX TWIST MIS LANC 30G	OTC

Drug Name	Requirements/Limits
MISC. DEVICES	
ADVOCATE ALCOHOL PREP PAD PADS 70%	OTC
ALCOHOL PADS PADS 70%	OTC
ALCOHOL PREP PAD PADS 70%	OTC
ALCOHOL PREP PAD 70%	OTC
ALCOHOL PREP PADS PADS 70%	OTC
ALCOHOL PREPS PADS 70%	OTC
ALCOHOL SWAB PAD	OTC
ALCOHOL SWAB PAD 70%	OTC
ALCOHOL SWABS PADS 70%	OTC
ALCOHOL SWABSTICKS PADS 70%	OTC
AUM ALCOHOL PREP PADS PADS 70%	OTC
BD SWAB REG PAD SNGL USE	OTC
CARETOUCH ALCOHOL PREP PA PADS 70%	OTC
COMFORT TOUCH ALCOHOL PRE PADS 70%	OTC
CURITY ALCOHOL PREPS/MEDI PADS 70%	OTC
CVS ALCOHOL PREP PADS PADS 70%	OTC
CVS PREP PADS PADS 70%	OTC
DROPSAFE ALCOHOL PREP PAD PADS 70%	OTC
EASY COMFORT ALCOHOL PADS PADS 70%	OTC
EASY TOUCH ALCOHOL PREP P PADS 70%	OTC
EQL ALCOHOL SWABS PADS 70%	OTC
FIFTY50 ALCOHOL PREP PADS PADS 70%	OTC
GLOBAL ALCOHOL PREP EASE PADS 70%	OTC
GNP ALCOHOL SWABS PADS 70%	OTC
GOODSENSE ALCOHOL SWABS PADS 70%	OTC
INCONTROL PAD ALCOHOL	OTC
MEIJER ALCOHOL SWABS EXTR PADS 70%	OTC
PHARMACIST CHOICE ALCOHOL PADS 70%	OTC
PRO COMFORT ALCOHOL PADS PADS 70%	OTC
PURE COMFORT ALCOHOL PREP PADS 70%	OTC
QC ALCOHOL SWABS PADS 70%	OTC
REALITY SWAB PAD	OTC
RELION ALCOHOL SWABS PADS 70%	OTC
SAPS CARE ALCOHOL PREP PA PADS 70%	OTC
SAPS HEALTH ALCOHOL PREP PADS 70%	OTC
SAPS HEALTH CARE ALCOHOL PADS 70%	OTC
SB ALCOHOL PREP PADS PADS 70%	OTC
SURE COMFORT ALCOHOL PREP PADS 70%	OTC
TRUE COMFORT ALCOHOL PREP PADS 70%	OTC
TRUE COMFORT PRO ALCOHOL PADS 70%	OTC
ULTICARE ALCOHOL SWABS PADS 70%	OTC
ULTILET PAD ALCOHOL	OTC
ULTRA-CARE ALCOHOL PREP P PADS 70%	OTC
WEBCOL ALCOHOL PREP LARGE PADS 70%	OTC

Drug Name	Requirements/Limits
WEBCOL ALCOHOL PREP MEDIU PADS 70%	OTC
ZEVRX STERILE ALCOHOL PRE PADS 70%	OTC
PARENTERAL THERAPY SUPPLIES	
ASSURE ID MIS 31GX5MM	OTC
AUM MINI PEN MIS 32GX4MM	OTC
AUM MINI PEN MIS 33GX4MM	OTC
AUM READYGRD MIS 32GX4MM	OTC
AUM SAFETY MIS 31GX5MM	OTC
AUTOJECT 2 MIS	OTC
BD PEN NEEDL MIS 31GX5MM	OTC
BD PEN NEEDL MIS 31GX8MM	OTC
BD PEN NEEDL MIS 32GX4MM	OTC
CAREFINE MIS 31GX8MM	OTC
CAREFINE MIS 32GX4MM	OTC
CARETOUCH MIS 27GX1.5"	OTC
CARETOUCH MIS 31GX5MM	OTC
CARETOUCH MIS 31GX6MM	OTC
CARETOUCH MIS 31GX8MM	OTC
CARETOUCH MIS 32GX4MM	OTC
CARETOUCH MIS 32GX5MM	OTC
COMFORT EZ MIS 29GX12MM	OTC
COMFORT EZ MIS 31GX5/16	OTC
COMFORT EZ MIS 31GX5MM	OTC
COMFORT EZ MIS 31GX6MM	OTC
COMFORT EZ MIS 31GX8MM	OTC
COMFORT EZ MIS 32GX4MM	OTC
COMFORT EZ MIS 32GX5MM	OTC
COMFORT EZ MIS 32GX6MM	OTC
COMFORT EZ MIS 32GX8MM	OTC
COMFORT EZ MIS 33GX4MM	OTC
COMFORT EZ MIS 33GX5MM	OTC
COMFORT EZ MIS 33GX6MM	OTC
COMFORT EZ MIS 33GX8MM	OTC
COMFORT EZ P MIS 32GX4MM	OTC
COMFORT TOUC MIS 31GX5MM	OTC
COMFORT TOUC MIS 31GX6MM	OTC
COMFORT TOUC MIS 31GX8MM	OTC
COMFORT TOUC MIS 32GX4MM	OTC
DIATHRIVE MIS 31GX5MM	OTC
DIATHRIVE MIS 31GX6MM	OTC
DIATHRIVE MIS 31GX8MM	OTC
DIATHRIVE MIS 32GX4MM	OTC
DROPSAFE MIS 31GX5MM	OTC
DROPSAFE MIS 31GX8MM	OTC
EASY COMFORT MIS 31GX1/4"	OTC

Drug Name	Requirements/Limits
EASY COMFORT MIS 31GX3/16	OTC
EASY COMFORT MIS 31GX5/16	OTC
EASY COMFORT MIS 32GX4MM	OTC
EASY COMFORT MIS 32GX5/32	OTC
EASY TOUCH MIS 29GX1/2"	OTC
EASY TOUCH MIS 31GX1/4"	OTC
EASY TOUCH MIS 31GX3/16	OTC
EASY TOUCH MIS 31GX5/16	OTC
EASY TOUCH MIS 32GX5/32	OTC
EMBECTA NANO MIS 32GX4MM	OTC
EMBECTA UF MIS 31GX5MM	OTC
EMBECTA UF MIS 31GX8MM	OTC
FIFTY50 MIS 31GX3/16	OTC
FIFTY50 MIS 31GX5/16	OTC
FIFTY50 MIS 31GX5MM	OTC
FIFTY50 PEN MIS 31GX8MM	OTC
FIFTY50 PEN MIS 32GX4MM	OTC
FIFTY50 PEN MIS 32GX6MM	OTC
GNP PEN NEED MIS 31GX5MM	OTC
GNP PEN NEED MIS 31GX8MM	OTC
GNP PEN NEED MIS 32GX4MM	OTC
GNP ULTICARE MIS 31GX5/16	OTC
GNP ULTICARE MIS 31GX5MM	OTC
GNP ULTICARE MIS 32GX5/32	OTC
HAN-EASE MIS	OTC
HM INSULIN S MIS 0.3/31G	OTC
HM INSULIN S MIS 1ML/30G	OTC
HM ULTICARE MIS 31GX8MM	OTC
HYPO NEEDLE MIS 27GX1.5"	OTC
IN CONTROL MIS 31GX3/16	OTC
IN CONTROL MIS 31GX5MM	OTC
IN CONTROL MIS 31GX6MM	OTC
IN CONTROL MIS 31GX8MM	OTC
INCONTROL MIS 29GX12MM	OTC
INCONTROL MIS 31GX6MM	OTC
INCONTROL MIS 31GX8MM	OTC
INCONTROL MIS 32GX4MM	OTC
INJECT-EASE MIS	OTC
INS SY 0.3ML MIS 31GX5/16	OTC
INS SY 0.5ML MIS 30GX1/2"	OTC
INS SY 0.5ML MIS 30GX5/16	OTC
INS SY 1/2ML MIS 30GX1/2"	OTC
INS SYR 1ML MIS 30GX1/2"	OTC
INS SYR 1ML MIS 30GX5/16	OTC
INS SYR 1ML MIS 31GX5/16	OTC

Drug Name	Requirements/Limits
INS SYR U500 MIS 0.5/31G	
INS SYR U500 MIS 31GX6MM	
INSULIN SYR MIS BARR 1ML	OTC
INSULIN SYRG MIS 0.3/29G	
INSULIN SYRG MIS 0.3/29G	OTC
INSULIN SYRG MIS 0.3/30G	
INSULIN SYRG MIS 0.3/30G	OTC
INSULIN SYRG MIS 0.3/31G	OTC
INSULIN SYRG MIS 0.3ML/31	OTC
INSULIN SYRG MIS 0.5/28G	
INSULIN SYRG MIS 0.5/28G	OTC
INSULIN SYRG MIS 0.5/29G	
INSULIN SYRG MIS 0.5/29G	OTC
INSULIN SYRG MIS 0.5/30G	
INSULIN SYRG MIS 0.5/30G	OTC
INSULIN SYRG MIS 0.5/31G	OTC
INSULIN SYRG MIS 1/2ML/30	OTC
INSULIN SYRG MIS 1/2ML/31	OTC
INSULIN SYRG MIS 1ML	
INSULIN SYRG MIS 1ML	OTC
INSULIN SYRG MIS 1ML/25G	OTC
INSULIN SYRG MIS 1ML/28G	
INSULIN SYRG MIS 1ML/28G	OTC
INSULIN SYRG MIS 1ML/29G	
INSULIN SYRG MIS 1ML/29G	OTC
INSULIN SYRG MIS 1ML/30G	
INSULIN SYRG MIS 1ML/30G	OTC
INSULIN SYRG MIS 1ML/31G	OTC
INSULIN SYRG MIS 28GX1/2"	
INSULIN SYRG MIS 28GX1/2"	OTC
INSULIN SYRG MIS 28GX12MM	OTC
INSULIN SYRG MIS 29GX1/2"	
INSULIN SYRG MIS 29GX1/2"	OTC
INSULIN SYRG MIS 29GX12MM	OTC
INSULIN SYRG MIS 30GX1/2"	
INSULIN SYRG MIS 30GX1/2"	OTC
INSULIN SYRG MIS 30GX5/16	
INSULIN SYRG MIS 30GX5/16	OTC
INSULIN SYRG MIS 30GX8MM	OTC
INSULIN SYRG MIS 30GX12MM	OTC
INSULIN SYRG MIS 31GX5/16	
INSULIN SYRG MIS 31GX5/16	OTC
INSULIN SYRG MIS 31GX8MM	OTC
INSULIN SYRI MIS 0.3/31G	OTC
INSUPEN MIS 29GX12MM	OTC

Drug Name	Requirements/Limits
INSUPEN MIS 31GX5MM	OTC
INSUPEN MIS 31GX8MM	OTC
INSUPEN MIS 32GX4MM	OTC
LITETOUCH INSULIN SYRINGE	OTC
LITETOUCH MIS 31GX8MM	OTC
3ML LL SYRNG MIS 22GX1"	OTC
3ML LUER LOC MIS 22GX1"	OTC
MAXICOMFORT MIS 31GX1/4"	OTC
NORDIPEN DEL MIS SYSTEM	OTC
NOVOFINE PLS MIS 32GX4MM	OTC
PEN NEEDLE MIS 31GX3/16	OTC
PEN NEEDLE MIS 31GX5/16	OTC
PEN NEEDLE MIS 31GX5MM	OTC
PEN NEEDLE MIS 31GX6MM	OTC
PEN NEEDLE MIS 31GX8MM	OTC
PEN NEEDLE MIS 32GX4MM	OTC
PEN NEEDLE MIS 32GX5/32	OTC
PEN NEEDLE MIS 33GX4MM	OTC
PEN NEEDLE MIS 33GX5/32	OTC
PEN NEEDLES MIS 29GX1/2"	OTC
PEN NEEDLES MIS 29GX12MM	OTC
PEN NEEDLES MIS 30GX5MM	
PEN NEEDLES MIS 30GX5MM	OTC
PEN NEEDLES MIS 30GX8MM	OTC
PEN NEEDLES MIS 31GX1/4"	OTC
PEN NEEDLES MIS 31GX3/16	OTC
PEN NEEDLES MIS 31GX5/16	OTC
PEN NEEDLES MIS 31GX5MM	OTC
PEN NEEDLES MIS 31GX6MM	OTC
PEN NEEDLES MIS 31GX8MM	OTC
PEN NEEDLES MIS 32GX4MM	OTC
PEN NEEDLES MIS 32GX5/32	OTC
PEN NEEDLES MIS 33GX4MM	OTC
PEN NEEDLES MIS 33GX5/32	OTC
PENTIPS MIS 29GX12MM	OTC
PENTIPS MIS 31GX5MM	OTC
PENTIPS MIS 31GX6MM	OTC
PENTIPS MIS 31GX8MM	OTC
PENTIPS MIS 32GX4MM	OTC
PIP PEN NEED MIS 32GX4MM	OTC
PRECISIONGLI MIS 27GX1.5"	OTC
PREVENT DROP MIS 31GX1/4"	OTC
PREVENT DROP MIS 31GX5/16	OTC
PREVENT SAFE MIS 31GX1/4"	OTC
PREVENT SAFE MIS 31GX5/16	OTC

Drug Name	Requirements/Limits
PRO COMFORT MIS 0.5/30G	OTC
PRO COMFORT MIS 0.5/31G	OTC
PRO COMFORT MIS 1ML/30G	OTC
PRO COMFORT MIS 1ML/31G	OTC
PURE COMFORT MIS 32GX4MM	OTC
QUICK TOUCH MIS 31GX5MM	OTC
QUICK TOUCH MIS 31GX6MM	OTC
QUICK TOUCH MIS 31GX8MM	OTC
QUICK TOUCH MIS 32GX4MM	OTC
QUICK TOUCH MIS 33GX4MM	OTC
QUICK TOUCH MIS 33GX8MM	OTC
RAYA SURE MIS 29GX12MM	OTC
RAYA SURE MIS 31GX5MM	OTC
RAYA SURE MIS 31GX6MM	OTC
RAYA SURE MIS 31GX8MM	OTC
RELION PEN MIS 31GX5/16	OTC
RELION PEN MIS 31GX6MM	OTC
RELION PEN MIS 31GX8MM	OTC
RELION PEN MIS 32GX4MM	OTC
SECURESAFE MIS 0.5/29G	OTC
SECURESAFE MIS 29GX1/2"	OTC
SURE COMFORT MIS 31GX3/16	OTC
SURE COMFORT MIS 31GX5/16	OTC
SURE COMFORT MIS 32GX5/32	OTC
SYRG/NDL 3ML MIS 22G X 1"	OTC
SYRG/NEEDLE MIS 29GX12.5	
SYRG/NEEDLE MIS 31GX8MM	
SYRINGE MIS 0.5/30G	OTC
3ML SYRINGE MIS 22G X 1"	OTC
3ML SYRINGE MIS 22GX1"	OTC
1ML SYRINGE MIS 30G	OTC
1ST TIER UNI MIS 29GX12MM	OTC
1ST TIER UNI MIS 31GX5MM	OTC
1ST TIER UNI MIS 31GX6MM	OTC
1ST TIER UNI MIS 31GX8MM	OTC
1ST TIER UNI MIS 32GX4MM	OTC
TIER UNI PLS MIS 31GX8MM	OTC
TOPFINE MIS 32GX4MM	OTC
ULTICARE MIC MIS 32GX4MM	OTC
ULTICARE PEN MIS 31GX5MM	OTC
ULTICARE PEN MIS 31GX6MM	OTC
ULTICARE PEN MIS 31GX8MM	OTC
ULTIGUARD MIS 31GX5MM	OTC
ULTIGUARD MIS 31GX6MM	OTC
ULTIGUARD MIS 31GX8MM	OTC

Drug Name	Requirements/Limits
ULTIGUARD MIS 32GX4MM	OTC
ULTILET PEN MIS 31GX5MM	OTC
ULTILET PEN MIS 31GX8MM	OTC
ULTILET PEN MIS 32GX4MM	OTC
ULTRA FLO MIS 31GX5MM	OTC
ULTRA FLO MIS 31GX8MM	OTC
ULTRA FLO MIS PEN NEED	OTC
UNIFINE PLUS MIS 31GX1/4"	OTC
UNIFINE PLUS MIS 31GX3/16	OTC
UNIFINE PLUS MIS 31GX5/16	OTC
UNIFINE PLUS MIS 32GX5/32	OTC
UNIFINE PLUS MIS 33GX5/32	OTC
UNIFINE PNTP MIS 29GX12MM	OTC
UNIFINE PNTP MIS 31GX3/16	OTC
UNIFINE PNTP MIS 31GX5/16	OTC
UNIFINE PNTP MIS 31GX5MM	OTC
UNIFINE PNTP MIS 31GX6MM	OTC
UNIFINE PNTP MIS 31GX8MM	OTC
UNIFINE PNTP MIS 32GX4MM	OTC
UNIFINE PNTP MIS 32GX5/32	OTC
UNIFINE PNTP MIS 32GX6MM	OTC
UNIFINE PNTP MIS 33GX4MM	OTC
UNIFINE PROT MIS 32GX4MM	OTC
UNIFINE SAFE MIS 31GX5MM	OTC
UNIFINE SAFE MIS 31GX6MM	OTC
UNIFINE SAFE MIS 31GX8MM	OTC
UNIFINE SAFE MIS 32GX4MM	OTC
UNIFINE ULTR MIS 29GX12MM	OTC
UNIFINE ULTR MIS 31GX5MM	OTC
UNIFINE ULTR MIS 31GX6MM	OTC
UNIFINE ULTR MIS 31GX8MM	OTC
UNIFINE ULTR MIS 32GX4MM	OTC
VERIFINE PEN MIS 29GX12MM	OTC
VERIFINE PEN MIS 31GX5MM	OTC
VERIFINE PEN MIS 31GX8MM	OTC
VERIFINE PEN MIS 32GX4MM	OTC
ZEVRX MIS 31GX5MM	OTC
ZEVRX MIS 31GX6MM	OTC
ZEVRX MIS 31GX8MM	OTC
ZEVRX MIS 32GX4MM	OTC
RESPIRATORY THERAPY SUPPLIES	
AERCHMBR PLS MIS INTERMED	QL (2 ea every 248 days)
AERCHMBR PLS MIS MED MASK	QL (2 boxes every 248 days)
AERCHMBR Z- MIS STAT PLS	QL (2 boxes every 248 days)
AEROCHAMBER MIS CHAMBER	QL (2 each every 248 days)

Drug Name	Requirements/Limits
AEROCHAMBER MIS MTHPIECE	QL (2 each every 248 days)
AEROCHAMBER MIS MV	QL (2 boxes every 248 days)
AEROCHAMBER MIS PLUS	QL (2 boxes every 248 days)
AEROVENT MIS PLUS	QL (2 each every 248 days)
AIRZONE PEAK MIS FLOW MTR	QL (1 each every 248 days), OTC
ASSESS METER MIS FULL	QL (1 each every 248 days), OTC
ASSESS METER MIS LOW	QL (1 each every 248 days), OTC
BREATHE EASE MIS METER	QL (1 each every 248 days), OTC
BREATHERITE MIS MDI CHMB	QL (2 each every 248 days)
COMPACT SPAC MIS CHAMBER	QL (2 each every 248 days)
COMPACT SPAC MIS LG MASK	QL (2 each every 248 days)
COMPACT SPAC MIS MD MASK	QL (2 each every 248 days)
COMPACT SPAC MIS SM MASK	QL (2 each every 248 days)
EASIVENT MIS	QL (2 boxes every 248 days)
EASIVENT MIS MASK LG	QL (2 boxes every 248 days)
EASIVENT MIS MASK MED	QL (2 boxes every 248 days)
EASIVENT MIS MASK SM	QL (2 boxes every 248 days)
FLEXICHAMBER MIS	QL (2 each every 248 days)
HOLD CHAMBER MIS ADLT LG	QL (2 each every 248 days)
HOLD CHAMBER MIS ADLT LG	QL (2 each every 248 days), OTC
HOLD CHAMBER MIS MEDIUM	QL (2 each every 248 days)
HOLD CHAMBER MIS MEDIUM	QL (2 each every 248 days), OTC
HOLD CHAMBER MIS SMALL	QL (2 each every 248 days)
HOLD CHAMBER MIS SMALL	QL (2 each every 248 days), OTC
HOLDING CHAM MIS ADULT	QL (2 each every 248 days), OTC
HOLDING CHAM MIS CHILD	QL (2 each every 248 days), OTC
LUNG PERFM MIS METER	QL (1 each every 248 days), OTC
MICROCHAMBER MIS	QL (2 boxes every 248 days)
MICROCHAMBER MIS	QL (2 each every 248 days)
MICROLIFE MIS PEAK FLO	QL (1 each every 248 days), OTC
MICROSPACER MIS	QL (2 boxes every 248 days)
MINI WRIGHT MIS PFM	QL (1 each every 248 days), OTC
MINI WRIGHT MIS PFM LOW	QL (1 each every 248 days), OTC
OPTICHAMBER MIS DIA LG	QL (2 each every 248 days)
OPTICHAMBER MIS DIA MD	QL (2 boxes every 248 days)
OPTICHAMBER MIS DIA SM	QL (2 boxes every 248 days)
OPTICHAMBER MIS DIAMOND	QL (2 boxes every 248 days)
OPTICHAMBER MIS DIAMOND	QL (2 each every 248 days)
PEAK A-I-R MIS FLW METR	QL (1 each every 248 days), OTC
PEAK AIR FLO MIS ADLT/PED	QL (1 each every 248 days), OTC
PEAK FLOW MIS METER	QL (1 each every 248 days), OTC
PEAK FLW MTR MIS ADULT	QL (1 each every 248 days), OTC
PEAK FLW MTR MIS CHILD	QL (1 each every 248 days), OTC
PEAK FLW MTR MIS UNIVERSL	QL (1 each every 248 days), OTC
PERSONAL BES MIS FULL RNG	QL (1 each every 248 days), OTC

Drug Name	Requirements/Limits
PIKO 1 MIS ELECTRON	QL (1 each every 248 days), OTC
POCKET CHAMB MIS	QL (2 each every 248 days)
POCKET PEAK MIS METER	QL (1 each every 248 days), OTC
POCKETPEAK MIS MTR LOW	QL (1 each every 248 days), OTC
PROCARE MIS ADULT	QL (2 each every 248 days), OTC
PROCARE MIS CHILD	QL (2 each every 248 days), OTC
PROCHAMBER MIS VHC	QL (2 each every 248 days)
RITEFLO MIS	QL (2 each every 248 days)
SPACER CHAMB MIS ADULT	QL (2 boxes every 248 days), OTC
SPACER CHAMB MIS CHILD	QL (2 boxes every 248 days), OTC
TRUZONE PEAK MIS FLOW MTR	QL (1 each every 248 days)

MIGRAINE PRODUCTS

CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

AIMOVIG SOAJ 70MG/ML, 140MG/ML	PA
AJOVY SOAJ 225MG/1.5ML; SOSY 225MG/1.5ML	PA
EMGALITY SOAJ 120MG/ML; SOSY 100MG/ML, 120MG/ML	PA

MIGRAINE PRODUCTS

dihydroergotamine mesylate soln 4mg/ml	QL (8 mL every 30 days)
ERGOMAR SUBL 2MG	

SEROTONIN AGONISTS

naratriptan hcl tabs 1mg, 2.5mg	QL (9 tabs every 30 days)
rizatriptan benzoate tabs 5mg, 10mg	QL (9 tabs every 30 days)
sumatriptan soln 5mg/act, 20mg/act	QL (6 inhalers every 30 days)
sumatriptan succinate soaj 6mg/0.5ml; soln 6mg/0.5ml	QL (4 injections every 30 days)
sumatriptan succinate soaj 6mg/0.5ml; soln 6mg/0.5ml	QL (4 injections every 30 days)
sumatriptan succinate tabs 25mg, 50mg, 100mg	QL (9 tabs every 30 days)
zolmitriptan soln 5mg	QL (6 bottles every 30 days)
zolmitriptan tabs 2.5mg, 5mg; tbdp 2.5mg, 5mg	QL (6 tabs every 30 days)
zomig tabs 2.5mg, 5mg	QL (6 tabs every 30 days)

MINERALS & ELECTROLYTES

CALCIUM

CALC CIT+D3 TAB 250-200	OTC
CALC CITRATE TAB +D	OTC
CALCIUM 600 TAB +D	OTC
calcium carb-cholecalciferol tab 500 mg-3.125 mcg (125 unit)	OTC
calcium carb-cholecalciferol tab 500 mg-10 mcg (400 unit)	OTC
calcium carb-cholecalciferol tab 500 mg-15 mcg (600 unit)	OTC
calcium carb-cholecalciferol tab 600 mg-10 mcg (400 unit)	OTC
calcium carb-cholecalciferol tab 600 mg-20 mcg (800 unit)	OTC
calcium carb-vit d w/ minerals chew tab 600 mg-400 unit	OTC
calcium carb-vit d w/ minerals tabs 600 mg-400 unit	OTC
CALCIUM CARBONATE CHEW 500MG; POWD 800MG/2GM	OTC
calcium carbonate tabs 600mg, 1500mg	OTC
calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)	OTC

Drug Name	Requirements/Limits
calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)	OTC
calcium carbonate-vitamin d cap 600 mg-5 mcg (200 unit)	OTC
calcium carbonate-vitamin d tab 600 mg-5 mcg (200 unit)	OTC
CALCIUM CHW 500MG	OTC
calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)	OTC
calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)	OTC
calcium citrate tabs 250mg	OTC
calcium-magnesium w/ vit d tab er 24hr 600 mg-40 mg-500 unit	OTC
calcium-magnesium-zinc-vit d3 tab 333 mg-133 mg-5 mg-3.3 mcg	OTC
calcium-magnesium-zinc-vit d3 tab 333 mg-133 mg-5 mg-5 mcg	OTC
CALCIUM/C/D CHW 500MG	OTC
CALCIUM/VITD CAP 600-400	OTC
ELECTROLYTE MIXTURES	
oral electrolyte - packet	OTC
oral electrolyte solution	OTC
FLUORIDE	
sodium fluoride chew .25mg, .5mg, 1mg; soln .5mg/ml	
MINERAL COMBINATIONS	
ADVANCED CA/ TAB D/MAGNES	OTC
BONE DENSITY TAB BUILDER	OTC
CA CITRATE + TAB MAG/MIN	OTC
CA CITRATE + TAB MAGNESIU	OTC
CA CITRATE TAB PLUS	OTC
CA CITRATE+D TAB MAGNESIU	OTC
CAL-MAG-ZINC TAB +D3	OTC
CALC 600+D3 TAB MINERALS	OTC
CITRACAL TAB MAX PLUS	OTC
CVS CALCIUM TAB CITR/D3	OTC
FEM-CAL TAB CITRATE	OTC
MULTI MEGA TAB MINERALS	OTC
PROSTEON TAB	OTC
THERACAL TAB	OTC
THERACAL TAB D2000	OTC
THERACAL TAB D4000	OTC
PHOSPHATE	
K-PHOS TABS 500MG	
POTASSIUM	
EFFER-K TBEF 25MEQ	
klor-con pack 20meq	
klor-con 8 tbcr 8meq	
klor-con 10 tbcr 10meq	

Drug Name	Requirements/Limits
klor-con m10 tbcr 10meq	
klor-con m15 tbcr 15meq	
klor-con m20 tbcr 20meq	
potassium chloride cpcr 8meq; tbcr 10meq	
potassium chloride cpcr 10meq; pack 20meq; soln 10%; tbcr 8meq	
potassium chloride microencapsulated crystals er tbcr 10meq	
potassium chloride microencapsulated crystals er tbcr 15meq, 20meq	
MISCELLANEOUS THERAPEUTIC CLASSES	
CHELATING AGENTS	
penicillamine caps 250mg	
IMMUNOMODULATORS	
JOENJA TABS 70MG	PA
IMMUNOSUPPRESSIVE AGENTS	
azathioprine tabs 50mg	
cyclosporine caps 25mg, 100mg	
cyclosporine modified (for microemulsion) caps 25mg, 50mg, 100mg; soln 100mg/ml	
gengraf caps 25mg, 100mg	
mycophenolate mofetil caps 250mg; susr 200mg/ml; tabs 500mg	
sirolimus tabs .5mg, 1mg, 2mg	
tacrolimus caps .5mg, 1mg, 5mg	
IRRIGATION SOLUTIONS	
water for irrigation, sterile irrigation soln	
MISCELLANEOUS THERAPEUTIC CLASSES	
GELATIN CAPS 600MG	OTC
gelatin caps 650mg	OTC
POTASSIUM REMOVING AGENTS	
kionex susp 15gm/60ml	
LOKELMA PACK 5GM, 10GM	PA
sodium polystyrene sulfonate powd 100%; susp 15gm/60ml	
sodium polystyrene sulfonate powder	
sps susp 15gm/60ml	
MOUTH/THROAT/DENTAL AGENTS	
ANESTHETICS TOPICAL ORAL	
lidocaine hcl (mouth-throat) soln 2%	
ANTI-INFECTIVES - THROAT	
clotrimazole troc 10mg	
nystatin (mouth-throat) susp 100000unit/ml	
ANTISEPTICS - MOUTH/THROAT	
chlorhexidine gluconate (mouth-throat) soln .12%	

Drug Name	Requirements/Limits
DENTAL PRODUCTS	
denta 5000 plus crea 1.1%	QL (102 gm every 30 days)
dentagel gel 1.1%	
sodium fluoride 5000 ppm gel 1.1%	
sodium fluoride (dental) gel 1.1%	
STEROIDS - MOUTH/THROAT/DENTAL	
oralone dental paste pste .1%	
triamcinolone acetonide (mouth) pste .1%	
THROAT PRODUCTS - MISC.	
pilocarpine hcl (oral) tabs 5mg, 7.5mg	
MULTIVITAMINS	
B-COMPLEX W/ C	
b-complex w/ c & calcium tab	OTC
b-complex w/ c & e + zn tab	OTC
b-complex w/ c tab	OTC
B-COMPLEX W/ FOLIC ACID	
B-COMPLEX TAB C/FA/BIO	OTC
b-complex w/ c & folic acid tab	OTC
MULTIPLE VITAMINS W/ MINERALS	
A THRU Z ADV TAB ADULT	OTC
A THRU Z SEL TAB 50+ ADVA	OTC
A THRU Z SEL TAB 50+ MENS	OTC
A THRU Z SEL TAB ADVANCED	OTC
A THRU Z TAB ADVANCED	OTC
A THRU Z TAB HIGH POT	OTC
A THRU Z TAB SELECT	OTC
A THRU Z TAB ULTIMATE	OTC
A THRU Z ULT TAB MENS	OTC
ABC COMPLETE TAB ADULT	OTC
ABC COMPLETE TAB MENS	OTC
ABC COMPLETE TAB MENS 50+	OTC
ABC COMPLETE TAB SENIOR	OTC
ABC COMPLETE TAB WOMEN	OTC
ACTICAL CAP	OTC
ACTIVNUTRIEN CAP	OTC
ACTIVNUTRIEN CAP PERFORMA	OTC
ACTIVNUTRIEN CAP W/O IRON	OTC
ADULT 50+ CAP EYE HLTH	OTC
ADULT 50+ CAP OCUVITE	OTC
50+ ADULT CAP EYE HLTH	OTC
ADVANCED EYE CAP HEALTH	OTC
ADVANCED TAB FORMULA	OTC
ALIVE CALCIU TAB BONE	OTC
ALIVE DAILY TAB ENERGY	OTC

Drug Name	Requirements/Limits
ALIVE DAILY TAB WOMENS	OTC
ALIVE DIABET TAB MULTIVIT	OTC
ALIVE ENERGY TAB WOMENS	OTC
ALIVE GARDEN TAB GOODNESS	OTC
ALIVE HAIR/ CAP SKN/NAIL	OTC
ALIVE MAX 6 CAP POTENCY	OTC
ALIVE MENS TAB	OTC
ALIVE MENS TAB COMPLETE	OTC
ALIVE MENS TAB ULTRA	OTC
ALIVE ULTRA TAB POTENCY	OTC
ALIVE WOMENS TAB 50+ COMP	OTC
ALPHA BETIC TAB	OTC
AMORYN MOOD CAP BOOSTER	OTC
ANTIOX FORM/ CAP MINERALS	OTC
APETIBEX CAP	OTC
APPE-CURB CAP	OTC
BARIATRIC CAP MULTIVIT	OTC
BARIATRIC CAP MVIT-IRN	OTC
BARIATRIC TAB MULTIVIT	OTC
BASIC AM TAB	OTC
BASIC PM TAB	OTC
BDY/HAIR/SKN CAP NAILS	OTC
BIO-35 GLUTE CAP FREE	OTC
BIO-35 IRON CAP FREE	OTC
BIOCAL CAP	OTC
BIOTECT PLUS CAP	OTC
BLADDER 2.2 TAB	OTC
BLOOD SUGAR TAB MANAGER	OTC
BONEUP 3 PER CAP DAY	OTC
BONEUP CAP	OTC
BONEUP VEG TAB	OTC
BOOSTNOW CAP IMM SUPP	OTC
CELEBRATE CAP 18	OTC
CELEBRATE CAP 36	OTC
CELEBRATE CAP 45	OTC
CELEBRATE CAP 60	OTC
CENT MATURE TAB ADLT 50+	OTC
CENT MATURE TAB MEN 50+	OTC
CENT MATURE TAB WOMN 50+	OTC
CENTAVITE AZ TAB MINERALS	OTC
CENTRAVITES TAB	OTC
CENTRAVITES TAB 50 PLUS	OTC
CENTRAVITES TAB ADULTS	OTC
CENTRUM MENO TAB HOT FLAS	OTC
CENTRUM MINI TAB ADULT 50	OTC

Drug Name	Requirements/Limits
CENTRUM MINI TAB MEN 50+	OTC
CENTRUM MINI TAB WOMEN	OTC
CENTRUM MINI TAB WOMEN 50	OTC
CENTRUM SILV TAB 50+MEN	OTC
CENTRUM SILV TAB 50+WOMEN	OTC
CENTRUM SILV TAB ADULT 50	OTC
CENTRUM SILV TAB MEN 50+	OTC
CENTRUM SILV TAB WOMEN 50	OTC
CENTRUM SPEC TAB HEART	OTC
CENTRUM SPEC TAB IMMUNE	OTC
CENTRUM SPEC TAB VISION	OTC
CENTRUM TAB ADULTS	OTC
CENTRUM TAB CARDIO	OTC
CENTRUM TAB MEN	OTC
CENTRUM TAB SILVER	OTC
CENTRUM TAB ULTRA	OTC
CENTRUM TAB WOMEN	OTC
CEROVITE TAB SENIOR	OTC
CERTAVITE TAB SENIOR	OTC
CERTAVITE/ TAB ANTIOXID	OTC
CHOICEFUL CAP MULTIVIT	OTC
CITRACAL +D3 TAB MAX PLUS	OTC
COMPANION TAB	OTC
COMPETE TAB	OTC
COMPLE MULTI TAB ADLT 50+	OTC
COMPLETIA TAB DIABETIC	OTC
CORAL CALCIU CAP PLUS	OTC
CULTURELLE CAP MENS DAI	OTC
CVS IMMUNE CAP SUPPORT	OTC
CVS MULTIVIT TAB MINERAL	OTC
CVS VISION CAP HEALTH	OTC
DAILY BETIC TAB	OTC
DAILY COMBO TAB	OTC
DAILY MULTI TAB MEN	OTC
DAILY MULTI TAB MENS	OTC
DAILY MULTI TAB MINERALS	OTC
DAILY MULTI TAB VIT/MENS	OTC
DAILY MULTI TAB VIT/MIN	OTC
DAILY MULTI TAB WOMENS	OTC
DAILY MULTI TAB WOMN 50+	OTC
DECUBI-VITE CAP	OTC
DEKAS PLUS CAP	OTC
DEKAS PLUS CAP OCEAN	OTC
DERMAVITE TAB	OTC
DIABETS HLTH TAB FORMULA	OTC

Drug Name	Requirements/Limits
DIALYVITE TAB 800/D	OTC
DRY EYE CAP FORMULA	OTC
EQ COMPLETE TAB ADULT	OTC
EQ ONE DAILY TAB MENS	OTC
EQ ONE DAILY TAB WOMENS	OTC
EQL CENTURY TAB	OTC
EQL CENTURY TAB MATURE	OTC
EQL CENTURY TAB MENS	OTC
EQL CENTURY TAB WOMENS	OTC
EQL VISION TAB FORMULA	OTC
ESSENTIA TAB	OTC
ESSENTIAL TAB BALANCE	OTC
EYE HEALTH & TAB LUTEIN	OTC
EYE HEALTH CAP	OTC
EYE HEALTH CAP ADLT 50+	OTC
EYE HEALTH CAP AREDS 2	OTC
EYE HEALTH TAB LUTEIN	OTC
EYE MULTIVIT TAB SODIUM	OTC
EYE VITAMINS CAP	OTC
EYE-VITES TAB	OTC
FITNESS TABS TAB MEN	OTC
FITNESS TABS TAB WOMEN	OTC
FREEDAVITE TAB	OTC
FT CENTURY TAB 50+	OTC
FT CENTURY TAB ADULTS	OTC
FT CENTURY TAB MEN	OTC
FT CENTURY TAB MEN 50+	OTC
FT CENTURY TAB WOMEN	OTC
FT CENTURY TAB WOMEN 50	OTC
FT EYE CAP HEALTH	OTC
FT EYE TAB HEALTH	OTC
FT HAIR SKIN TAB & NAILS	OTC
FT ONE DAILY TAB MENS	OTC
FT ONE DAILY TAB MENS 50+	OTC
FT ONE DAILY TAB WOMENS	OTC
GERI-FREEDA TAB SENIOR	OTC
GERITOL NUTR TAB SUPPORT	OTC
GERIVITE TAB COMPLETE	OTC
GNP CENTURY TAB ADLT 50	OTC
GNP CENTURY TAB ADLT MEN	OTC
GNP CENTURY TAB ADLT WOM	OTC
GNP CENTURY TAB ADULT	OTC
GNP HEALTHY TAB EYES	OTC
HAIR SKIN & TAB NAILS AD	OTC
HAIR SKIN TAB NAILS	OTC

Drug Name	Requirements/Limits
HAIR/SKIN CAP NAILS	OTC
HAIR/SKIN/ CAP NAILS	OTC
HAIR/SKIN/ TAB NAILS	OTC
HEAD CARE TAB PROACTIV	OTC
HEALTHY EYES CAP	OTC
HEALTHY EYES CAP SUPERV 2	OTC
HEALTHY EYES CAP SUPERVIS	OTC
HEALTHY EYES TAB	OTC
HI-KOVITE TAB 2-PART	OTC
HIGH POTENCY TAB MV/FA	OTC
I-VITE TAB LUTEIN	OTC
ICAPS AREDS TAB FORMULA	OTC
ICAPS CAP	OTC
ICAPS LUTEIN CAP /OMEGA-3	OTC
ICAPS MV TAB	OTC
IMMUNE 24 CAP HOUR+	OTC
IMMUNE ESSEN CAP DAILY	OTC
JOINT HEALTH TAB BONE STR	OTC
K-PAX TAB PROF ST	OTC
KP ADULT 50+ TAB DAILY	OTC
KP ADULTS TAB DAILY	OTC
KP MENS 50+ TAB DAILY	OTC
KP MENS TAB DAILY	OTC
KP VISION TAB FOR/LTN	OTC
KP VISION TAB FORMULA	OTC
KP WOMEN 50+ TAB DAILY	OTC
KP WOMENS TAB DAILY	OTC
LIFE PACK TAB MENS	OTC
LIFE PACK TAB WOMENS	OTC
LIVER DETOX TAB	OTC
LUMIVANCE CAP	OTC
LUTEIN PLUS TAB ZEAXANTH	OTC
MACULAR HLTH CAP FORMULA	OTC
MACUVITE TAB	OTC
MACUVITE TAB EYE CARE	OTC
MAX DAILY TAB GREEN	OTC
MEGA MULTI TAB MEN	OTC
MEGA MULTI TAB WOMEN	OTC
MEGAVITE TAB FRT/VEG	OTC
MENS 50+ CAP ADVANCED	OTC
MENS 50+ TAB MULTIVIT	OTC
MENS DAILY TAB FORMULA	OTC
MENS MULTIPL TAB	OTC
MENS MULTIVI TAB HEALTH	OTC
MOOD FOOD CAP	OTC

Drug Name	Requirements/Limits
MOOD FOOD ES CAP	OTC
MULT VITAMIN TAB NO IRON	OTC
MULTI 50+ CAP FOR HER	OTC
MULTI 50+ TAB FOR HER	OTC
MULTI 50+ TAB FOR HIM	OTC
MULTI CAP COMPLETE	OTC
MULTI CAP FOR HER	OTC
MULTI CAP FOR HIM	OTC
MULTI COMPLT TAB /IRON	OTC
MULTI HEALTH TAB WOMEN	OTC
MULTI TAB FOR HER	OTC
MULTI TAB FOR HIM	OTC
MULTI VITAMI TAB MINERALS	OTC
MULTI VITAMN TAB MINERALS	OTC
MULTI-VIT/ TAB MINERALS	OTC
MULTI-VITAMI TAB MONOCAPS	OTC
MULTI-VITE TAB	OTC
MULTI-VITE TAB 50&OVER	OTC
MULTIA CAP	OTC
MULTIV WOMEN TAB 50+	OTC
MULTIVITAMIN CAP DAILY	OTC
MULTIVITAMIN TAB	OTC
MULTIVITAMIN TAB ADLT 50+	OTC
MULTIVITAMIN TAB ADULT	OTC
MULTIVITAMIN TAB ADULTS	OTC
MULTIVITAMIN TAB MEN	OTC
MULTIVITAMIN TAB MEN 50+	OTC
MULTIVITAMIN TAB WOMEN	OTC
MULTIVITAMIN TAB WOMENS	OTC
MULTIVITAMIN TAB ZINC STR	OTC
MVW COMPLETE CAP D3000	OTC
MVW COMPLETE CAP D5000	OTC
MVW COMPLETE CAP FORMULAT	OTC
MVW COMPLETE CAP MINIS	OTC
MVW MODULAT CAP FORM MIN	OTC
MYAMULTI TAB	OTC
NAT-RUL THER TAB M	OTC
NATRUL-VITES TAB	OTC
NUTRITIONAL TAB SUPPORT	OTC
OCUHEALTH CAP VISION 2	OTC
OCULAR TAB VITAMINS	OTC
OCUTABS TAB	OTC
OCUTABS TAB LUTEIN	OTC
OCUVITE CAP ADULT	OTC
OCUVITE EYE CAP HEALTH	OTC

Drug Name	Requirements/Limits
OCUVITE EYE CAP PERFORM	OTC
OCUVITE EYE TAB + MULTI	OTC
OCUVITE LUTE CAP	OTC
OCUVITE TAB LUTEIN	OTC
OCUVITE XTRA TAB	OTC
ONCOVITE TAB	OTC
ONE A DAY CAP POSTNATA	OTC
ONE A DAY TAB MENS 50+	OTC
ONE A DAY TAB WOMENS	OTC
ONE A DAY WO TAB MULTI	OTC
ONE DAILY MN TAB W/O IRON	OTC
ONE DAILY MV TAB WOMENS	OTC
ONE DAILY TAB 50 PLUS	OTC
ONE DAILY TAB 50+	OTC
ONE DAILY TAB 50+ ADV	OTC
ONE DAILY TAB /MINERAL	OTC
ONE DAILY TAB COMPLETE	OTC
ONE DAILY TAB ESSENTL	OTC
ONE DAILY TAB FE/CA	OTC
ONE DAILY TAB HEALTHY	OTC
ONE DAILY TAB IRON-FRE	OTC
ONE DAILY TAB MAXIMUM	OTC
ONE DAILY TAB MEN	OTC
ONE DAILY TAB MEN 50+	OTC
ONE DAILY TAB MENS	OTC
ONE DAILY TAB MENS 50+	OTC
ONE DAILY TAB MULTI-VI	OTC
ONE DAILY TAB WMNS 50+	OTC
ONE DAILY TAB WOM 50+	OTC
ONE DAILY TAB WOMEN	OTC
ONE DAILY TAB WOMEN 50	OTC
ONE DAILY TAB WOMENS	OTC
ONE DLY HLTH TAB WGHT ADV	OTC
ONE VITE M TAB HIGH	OTC
ONE-A-DAY TAB 50+ ADV	OTC
ONE-A-DAY TAB 50+ MENS	OTC
ONE-A-DAY TAB 50+ WMN	OTC
ONE-A-DAY TAB 65+	OTC
ONE-A-DAY TAB MENOPAUS	OTC
ONE-A-DAY TAB MENS	OTC
ONE-A-DAY TAB PETITES	OTC
ONE-A-DAY TAB PROEDGE	OTC
ONE-A-DAY TAB WOMENS	OTC
ONE-DAILY CAP MULTI	OTC
OPTIC-VITES TAB	OTC

Drug Name	Requirements/Limits
OPTIC-VITES TAB LUTEIN	OTC
OPTIMUM PMS TAB	OTC
OPTIVITE TAB P.M.T.	OTC
OPURITY TAB	OTC
OSTEOPRIME TAB PLUS	OTC
OSTEOPRIME TAB ULTRA	OTC
PARVLEX TAB	OTC
PHYTOMULTI TAB	OTC
PRESCRIPTION CAP SUPPORT	OTC
PRESERVISION CAP AREDS	OTC
PRESERVISION CAP AREDS 2	OTC
PRESERVISION CAP AREDS 3	OTC
PRESERVISION CAP LUTEIN	OTC
PRESERVISION TAB AREDS	OTC
PREVENT CAP	OTC
PRO-CAL TAB	OTC
PROBIOTICS + CAP BARIATRC	OTC
PROCERV HP TAB	OTC
PRORENAL +D TAB	OTC
PRORENAL+D CAP OMEGA 3	OTC
PRORENAL+D CAP OMEGA-3	OTC
PRORENAL+D TAB	OTC
PROTECT CAP CARDIO	OTC
PROTECT CAP PLUS SO	OTC
PROTEGRA CAP	OTC
QC HAIR/SKIN TAB NAILS	OTC
QC MULTI-VIT TAB	OTC
QC THERIN-M TAB	OTC
QUIN B TAB STRONG	OTC
QUINTABS-M TAB	OTC
RENAPLEX TAB	OTC
RENAPLEX-D TAB	OTC
SENIOR TABS TAB	OTC
SENTRY SENIO TAB LUTEIN	OTC
SENTRY SENIO TAB MENS 50+	OTC
SENTRY TAB	OTC
SENTRY TAB SENIOR	OTC
SKIN/HAIR/ CAP NAILS	OTC
SOLO TAB	OTC
SPECTR WOMEN TAB HLTH SEN	OTC
SPECTRA ULTR TAB HLTH MEN	OTC
SPECTRAVITE TAB	OTC
SPECTRAVITE TAB ADLT 50+	OTC
SPECTRAVITE TAB ADULTS	OTC
SPECTRAVITE TAB ADVANCED	OTC

Drug Name	Requirements/Limits
SPECTRAVITE TAB MEN	OTC
SPECTRAVITE TAB MEN 50+	OTC
SPECTRAVITE TAB SENIOR	OTC
SPECTRAVITE TAB ULT MEN	OTC
SPECTRAVITE TAB ULT WMN	OTC
SPECTRAVITE TAB WOMEN	OTC
SPECTRAVITE TAB WOMEN 50	OTC
STRESS B-COM TAB ANTIO/ZN	OTC
STRESSTABS TAB ADVANCED	OTC
SUPER ANTIOX CAP PROTECT	OTC
SUPER ANTIOX TAB A/C/E/SE	OTC
SUPER D/ZINC TAB SELENIUM	OTC
SUPER THERA TAB VITE M	OTC
SUPERIOR TAB MENS	OTC
SUPR AYTINAL TAB	OTC
SUPR AYTINAL TAB 50 PLUS	OTC
SUPR VITAMIN TAB	OTC
SYSTANE ICAP CAP AREDS2	OTC
SYSTANE ICAP TAB AREDS2	OTC
T-VITES TAB	OTC
THERA FORM/ TAB HEMATIN	OTC
THERA TAB VITAL-M	OTC
THERA VITAL TAB M	OTC
THERA-M PLUS TAB BETA-CAR	OTC
THERA-M TAB	OTC
THERA-TABS M TAB	OTC
THERA-VITE TAB MAX-M	OTC
THERABASIC-M TAB	OTC
THERAGRAN-M TAB	OTC
THERAGRAN-M TAB 50 PLUS	OTC
THERAGRAN-M TAB ADVANCED	OTC
THERAGRAN-M TAB PREMIER	OTC
THERAMILL CAP FORTE	OTC
THERANATAL CAP LACTATIO	OTC
THERAPEUTIC TAB -M	OTC
THERAPEUTIC- TAB M	OTC
THERATRUM CO TAB 50 PLUS	OTC
THERATRUM TAB COMPLETE	OTC
THRIVE FOR TAB WOMEN	OTC
ULTRA BONEUP TAB	OTC
ULTRA FREEDA TAB	OTC
ULTRA FREEDA TAB /IRON	OTC
ULTRA MULTI CAP /IRON	OTC
ULTRA POTENC TAB WOMEN 50	OTC
ULTRACHOICE TAB ADVANCED	OTC

Drug Name	Requirements/Limits
VISION CAP OPTIMIZE	OTC
VISION FORM CAP 2	OTC
VISION FORM/ TAB LUTEIN	OTC
VISION FORMU CAP 50+	OTC
VISION HEALT CAP	OTC
VISION TAB VITAMINS	OTC
VISTA ADVAN CAP AREDS2	OTC
VISTA ADVAN CAP DRY EYE	OTC
VIT A-D-E/ TAB SELENIUM	OTC
VITA HAIR TAB	OTC
VITA-MIN CAP	OTC
VITABASIC TAB COMPLETE	OTC
VITABASIC TAB SENIOR	OTC
VITABEX CAP	OTC
VITABEX PLUS CAP	OTC
VITASANA TAB	OTC
VITEYES ARED CAP 2 +COQ10	OTC
VITEYES ARED CAP 2 +MULTI	OTC
VITEYES CAP AREDS 2	OTC
VITEYES CAP CLASSIC	OTC
VITEYES CAP COMPLETE	OTC
VITEYES CLAS CAP ADV	OTC
VITEYES CLAS CAP ADVANCED	OTC
VITEYES CLAS CAP MAC SUPP	OTC
VITEYES CLAS CAP OMEGA-3	OTC
VITEYES CLAS TAB MULTIVIT	OTC
VITEYES OPTI TAB NERV SUP	OTC
WOMENS 50+ CAP ADVANCED	OTC
WOMENS 50+ TAB MULTIVIT	OTC
WOMENS CAP MULTI	OTC
WOMENS DAILY TAB FORMULA	OTC
WOMENS MULT TAB	OTC
WOMENS MULTI TAB	OTC
WOMNS ACTIVE TAB DAILY	OTC
YELETS TEEN TAB FORMULA	OTC
MULTIVITAMINS	
ANTI-OXIDANT TAB	OTC
CENTRUM MENO TAB MND/MOOD	OTC
DAILY MULTI TAB VITAMINS	OTC
DAILY VALUE TAB MULTIVIT	OTC
DAILY VIT TAB	OTC
DAILY VITE TAB	OTC
DAILY-VITE TAB	OTC
E/C/BETA CAR TAB	OTC
ESSENTL ONE TAB DAILY	OTC

Drug Name	Requirements/Limits
ESTROFACTORS TAB	OTC
HEALTHY HAIR TAB SKN/NAIL	OTC
MULT VITAMIN TAB	OTC
MULTI VITAMI TAB	OTC
MULTI VITAMI TAB D-3	OTC
MULTI-VITAMN TAB	OTC
MULTIPLE VIT TAB	OTC
MULTIPLE VIT TAB FOLIC	OTC
multiple vitamin tab	OTC
MULTIVITAMIN TAB	OTC
MULTIVITAMIN TAB ADULT	OTC
MULTIVITAMIN TAB IRON-FRE	OTC
NEOMULTIVITE TAB	OTC
NEWVITE TAB	OTC
OMNICAP TAB	OTC
ONCE DAILY TAB	OTC
ONE DAILY TAB	OTC
ONE DAILY TAB ESSENTL	OTC
ONE DAILY TAB MULTIVIT	OTC
ONE VITE TAB DAILY MV	OTC
ONE-DAILY TAB MULT VIT	OTC
ONE-DAILY TAB MULT-VIT	OTC
QC ESSENTIAL TAB	OTC
QUINTABS TAB	OTC
STRESS FORM TAB	OTC
STRESS FORMU TAB	OTC
STRESS FORMU TAB ZINC/ENE	OTC
STRESSTABS TAB ENERGY	OTC
TAB-A-VITE TAB	OTC
TAB-A-VITE TAB BETA CAR	OTC
THERA TAB	OTC
THERA-TABS TAB	OTC
THEREMS TAB MULTIVIT	OTC
TM-DAILY TAB VITE	OTC
TRUE MULTI- TAB VITAMIN	OTC
VITALEE TAB	OTC
PED MV W/ FLUORIDE	
pediatric multiple vitamin w/ fluoride susp 0.25 mg/ml	
pediatric multiple vitamins w/ fluoride chew tab 0.5 mg	
pediatric multiple vitamins w/ fluoride chew tab 0.25 mg	
pediatric multiple vitamins w/ fluoride chew tab 1 mg	
pediatric multiple vitamins w/ fluoride susp 0.5 mg/ml	
tri-vit/fluo dro 0.5mg	
tri-vit/fluo dro 0.25mg	

Drug Name	Requirements/Limits
PED MV W/ IRON	
ANIMAL SHAPE CHW COMPLETE	OTC
CEROVITE JR CHW	OTC
CHEWABLE CHW CHILDREN	OTC
CHLD MLTIVIT CHW /MINERAL	OTC
COMPL MULTIV CHW CHILDRNS	OTC
CVS CHILDREN CHW COMPLETE	OTC
FLINTSTONES CHW EXT IRON	OTC
HONEY BEARS CHW IRON-ZIN	OTC
MULTI/IRON/ DRO 11MG/ML	OTC
MULTI/IRON/ DRO INF/TODD	OTC
MULTIVITAMIN CHW IRON	OTC
MULTIVITAMIN W/IRON/INFAN	OTC
POLY-VI-SOL DRO IRON	OTC
POLY-VI-SOL SOL IRON	OTC
POLY-VITE SOL /IRON	OTC
POLY-VITE SOL IRON	OTC
QC CHILDRENS CHW COMPLETE	OTC
ULTRA CHOICE CHW KIDS	OTC
PEDIATRIC MULTIPLE VITAMINS	
MULTIV INFAN DRO /TODDLER	OTC
MULTIVITAMIN DRO INFANT	OTC
MULTIVITAMIN INFANT/TODDL	OTC
PED POLY-VIT DRO	OTC
POLY-VI-SOL SOL 50MG/ML	OTC
POLY-VITA DRO	OTC
POLY-VITE DRO	OTC
POLY-VITE SOL 50MG/ML	OTC
PRENATAL VITAMINS	
COMPLETE NAT PAK DHA	QL (100 tabs every 90 days)
CVS PRENATAL TAB 27-0.8MG	QL (100 tabs per 90 days), OTC
elite-ob tab	QL (100 tabs every 90 days)
KPN PRENATAL TAB	QL (100 tabs per 90 days), OTC
MULTI PRENAT TAB	QL (100 capsules every 90 days), OTC
NEONATAL TAB PRENATAL	QL (100 tabs per 90 days), OTC
NEONATAL VIT TAB 27-0.8MG	QL (100 capsules every 90 days), OTC
NURTIVA TAB	QL (100 tabs every 90 days), OTC
ONE VITE TAB 27-0.8MG	QL (100 capsules every 90 days), OTC
pnv-dha cap	QL (100 capsules every 90 days)
PNV-OMEGA CAP	QL (100 capsules every 90 days)
pnv-select tab	QL (100 capsules every 90 days)
PRENATAL ONE TAB DAILY	QL (100 tabs per 90 days), OTC

Drug Name	Requirements/Limits
PRENATAL TAB	QL (100 tabs per 90 days), OTC
PRENATAL TAB 27-0.8MG	QL (100 tabs per 90 days), OTC
PRENATAL TAB 27-1MG	QL (100 tabs per 90 days)
PRENATAL VIT TAB 27-0.8MG	QL (100 tabs per 90 days), OTC
PRENATE CHW 0.6-0.4	QL (100 capsules every 90 days)
SELECT-OB+ PAK DHA	QL (180 capsules every 90 days)
TARON-C DHA CAP	QL (100 capsules every 90 days)
THERANATAL TAB 27-1	QL (100 capsules every 90 days), OTC
VITAFOL-OB TAB 65-1MG	QL (100 capsules every 90 days)
SPECIALTY VITAMINS PRODUCTS	
A THRU Z TAB ADVANTAG	OTC
ALLERWELL TAB ALLERGY	OTC
BIOTIN PLUS TAB KERATIN	OTC
BIOTIN/ TAB KERATIN	OTC
CENTRUM SPEC TAB ENERGY	OTC
CENTRUM TAB PERFORMA	OTC
CVS HAIR/SKN TAB NAILS	OTC
ELON MATRIX TAB 5000	OTC
ELON MATRIX TAB 5000 COM	OTC
ELON MATRIX TAB COMPLETE	OTC
ELON MATRIX TAB PLUS	OTC
ELON R3 TAB	OTC
HAIR NOURISH TAB SUPPLEMN	OTC
HAIR/SKIN/ TAB NAILS	OTC
HEART TABS TAB	OTC
LIPIDSHIELD TAB PLUS	OTC
MEMORY TAB COMPLEX	OTC
MENOPAUSE TAB SUPPORT	OTC
MG PLUS TAB PROTEIN	OTC
MIL ADREGEN TAB	OTC
NERVIVE NERV TAB RELIEF	OTC
ULTIMATE FAT TAB BURNER	OTC
UPSPRING TAB HE NATAL	OTC
VIT FOR HAIR TAB	OTC
MUSCULOSKELETAL THERAPY AGENTS	
CENTRAL MUSCLE RELAXANTS	
baclofen tabs 5mg, 10mg, 15mg, 20mg	
carisoprodol tabs 350mg	QL (120 tabs every 30 days)
chlorzoxazone tabs 500mg	
cyclobenzaprine hcl tabs 5mg, 10mg	
methocarbamol tabs 500mg, 750mg	
orphenadrine citrate tb12 100mg	
tizanidine hcl tabs 2mg, 4mg	

Drug Name	Requirements/Limits
DIRECT MUSCLE RELAXANTS	
dantrolene sodium caps 25mg, 50mg, 100mg	
NASAL AGENTS - SYSTEMIC AND TOPICAL	
NASAL ANTIALLERGY	
azelastine hcl soln .1%, 137mcg/spray	
NASAL ANTICHOLINERGICS	
ipratropium bromide (nasal) soln .03%, .06%	
NASAL STEROIDS	
budesonide (nasal) susp 32mcg/act	OTC
flunisolide (nasal) soln .025%	ST, QL (1 bottle every 30 days)
fluticasone propionate (nasal) susp 50mcg/act	OTC
fluticasone propionate (nasal) susp 50mcg/act	QL (1 bottle every 30 days)
triamcinolone acetonide (nasal) aero 55mcg/act	OTC
SYMPATHOMIMETIC DECONGESTANTS	
oxymetazoline hcl soln .05%	OTC
NEUROMUSCULAR AGENTS	
FRIEDRICH'S ATAXIA AGENTS	
SKYCLARYS CAPS 50MG	PA
RETT SYNDROME AGENTS	
DAYBUE SOLN 200MG/ML	PA
DAYBUE STIX PACK 5000MG, 6000MG, 8000MG	PA
NUTRIENTS	
MISC. NUTRITIONAL SUBSTANCES	
omega-3 fatty acids caps 1000mg, 1200mg	OTC
omega-3 fatty acids cap 300 mg	OTC
omega-3 fatty acids cap 360 mg	OTC
omega-3 fatty acids cap 1000 mg	OTC
omega-3 fatty acids cap 1200 mg	OTC
omega-3 fatty acids cap 1400 mg	OTC
omega-3 fatty acids cap delayed release 1000 mg	OTC
omega-3 fatty acids cap delayed release 1200 mg	OTC
PROTEINS	
glutamine tabs 500mg	OTC
levocarnitine tabs 500mg	OTC
levocarnitine l-tartrate caps 500mg	OTC
OPHTHALMIC AGENTS	
ARTIFICIAL TEARS AND LUBRICANTS	
carboxymethylcellulose sodium (ophth) gel 1%; soln .5%	OTC
BETA-BLOCKERS - OPHTHALMIC	
betaxolol hcl (ophth) soln .5%	
carteolol hcl (ophth) soln 1%	
dorzolamide hcl-timolol maleate ophth soln 2-0.5%	
levobunolol hcl soln .5%	

Drug Name	Requirements/Limits
timolol maleate (ophth) solg .25%, .5%; soln .25%, .5%	
CYCLOPLEGIC MYDRIATICS	
ATROPINE SULFATE SOLN 1%	
atropine sulfate (ophthalmic) soln 1%	
tropicamide soln .5%, 1%	
MIOTICS	
pilocarpine hcl soln 1%, 2%, 4%	
OPHTHALMIC ADRENERGIC AGENTS	
BRIMON/DORZO SOL 0.1-2%OP	
brimonidine tartrate soln .15%, .2%	
OPHTHALMIC ANTI-INFECTIVES	
bacitracin-polymyxin b ophth oint	
CILOXAN OINT .3%	
ciprofloxacin hcl (ophth) soln .3%	
erythromycin (ophth) oint 5mg/gm	
gatifloxacin (ophth) soln .5%	
gentamicin sulfate (ophth) soln .3%	
levofloxacin (ophth) soln .5%	
moxifloxacin hcl (ophth) soln .5%	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	
ofloxacin (ophth) soln .3%	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	
sulfacetamide sodium (ophth) soln 10%	
tobramycin (ophth) soln .3%	
TOBREX OINT .3%	
trifluridine soln 1%	
OPHTHALMIC IMMUNOMODULATORS	
CEQUA SOLN .09%	
OPHTHALMIC STEROIDS	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	
dexamethasone sodium phosphate (ophth) soln .1%	
fluorometholone (ophth) susp .1%	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	
neomycin-polymyxin-hc ophth susp	
PRED MILD SUSP .12%	
prednisolone acetate (ophth) susp 1%	
PREDNISOLONE SODIUM PHOSP SOLN 1%	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	
TOBRADEX OIN 0.3-0.1%	
tobramycin-dexamethasone ophth susp 0.3-0.1%	

Drug Name	Requirements/Limits
OPHTHALMICS - MISC.	
azelastine hcl (ophth) soln .05%	ST
cromolyn sodium (ophth) soln 4%	
diclofenac sodium (ophth) soln .1%	
dorzolamide hcl soln 2%	
epinastine hcl (ophth) soln .05%	ST
flurbiprofen sodium soln .03%	
ketorolac tromethamine (ophth) soln .4%, .5%	
ketotifen fumarate (ophth) soln .035%	OTC
PROSTAGLANDINS - OPHTHALMIC	
latanoprost soln .005%	
travoprost soln .004%	
OTIC AGENTS	
OTIC AGENTS - MISCELLANEOUS	
acetic acid (otic) soln 2%	
OTIC ANTI-INFECTIVES	
ciprofloxacin hcl (otic) soln .2%	
ofloxacin (otic) soln .3%	
OTIC COMBINATIONS	
neomycin-polymyxin-hc otic soln 1%	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	
OTIC STEROIDS	
hydrocortisone w/ acetic acid otic soln 1-2%	
PENICILLINS	
AMINOPENICILLINS	
amoxicillin caps 500mg; chew 125mg, 250mg; susr 200mg/5ml, 250mg/5ml, 400mg/5ml; tabs 500mg, 875mg	
ampicillin caps 500mg	
NATURAL PENICILLINS	
penicillin v potassium solr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg	
PENICILLIN COMBINATIONS	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	
amoxicillin & k clavulanate tab 250-125 mg	
amoxicillin & k clavulanate tab 500-125 mg	
amoxicillin & k clavulanate tab 875-125 mg	
PENICILLINASE-RESISTANT PENICILLINS	
dicloxacillin sodium caps 250mg, 500mg	

Drug Name	Requirements/Limits
PHARMACEUTICAL ADJUVANTS	
LIQUID VEHICLES	
COLA SYP	OTC
LOZIBASE MIS	OTC
RASPBERRY SYP	OTC
SYRSPEND SF SUS ALKA	OTC
SYRSPEND SF SUS ALKA DRY	OTC
SYRSPEND SF SUS PH4 DRY	OTC
TROCHIBASE S MIS	OTC
UNISPEND ANH SUS SWEETENE	OTC
UNISPEND ANH SUS UNSWEETE	OTC
SEMI SOLID VEHICLES	
AQUASOOTHE OINT 41%	OTC
BABY SKIN PROTECTANT OINT 41%	OTC
DAILY MOISTURIZER OINT 41%	OTC
PETROLATUM OINT 42%	OTC
PETROLATUM OIN WHITE	OTC
PETROLATUM OIN YELLOW	OTC
PETROLEUM OIN BABY	OTC
PETROLEUM OIN JELLY	OTC
RA PETROLEUM OIN	OTC
SECURA PROTECTIVE OINT 98.849%	OTC
SKIN PROTECTANT PETROLATU OINT 44.28%	OTC
WHITE PETROLATUM OINT 100%	OTC
PROGESTINS	
PROGESTINS	
gallifrey tabs 5mg	
medroxyprogesterone acetate tabs 2.5mg, 5mg, 10mg	
megestrol acetate (appetite) susp 625mg/5ml	
norethindrone acetate tabs 5mg	
progesterone caps 100mg, 200mg	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	
ANTIDEMENTIA AGENTS	
donepezil hydrochloride tabs 5mg, 10mg, 23mg; tbdp 5mg, 10mg	
galantamine hydrobromide cp24 8mg, 16mg, 24mg	QL (30 caps every 30 days)
galantamine hydrobromide soln 4mg/ml	QL (200 mL every 30 days)
galantamine hydrobromide tabs 4mg, 8mg, 12mg	QL (60 tabs every 30 days)
memantine hcl cp24 7mg, 14mg, 21mg, 28mg; tabs 5mg, 10mg	
rivastigmine pt24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	
rivastigmine tartrate caps 1.5mg, 3mg, 4.5mg, 6mg	
FIBROMYALGIA AGENTS	
SAVELLA TABS 12.5MG, 25MG, 50MG, 100MG	PA, QL (60 tabs every 30 days)

Drug Name	Requirements/Limits
MULTIPLE SCLEROSIS AGENTS	
dimethyl fumarate cpdr 120mg, 240mg	
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	
fingolimod hcl caps .5mg	
glatiramer acetate sosy 20mg/ml, 40mg/ml	
glatopa sosy 20mg/ml, 40mg/ml	
REBIF SOSY 22MCG/0.5ML, 44MCG/0.5ML	PA, QL
REBIF REBIDO INJ TITRATN	PA, QL
REBIF REBIDOSE SOAJ 22MCG/0.5ML, 44MCG/0.5ML	PA, QL
REBIF TITRTN INJ PACK	PA, QL
teriflunomide tabs 7mg, 14mg	
TRANSTHYRETIN AMYLOIDOSIS AGENTS	
WAINUA SOAJ 45MG/0.8ML; SOSY 45MG/0.8ML	PA
SULFONAMIDES	
SULFONAMIDES	
sulfadiazine tabs 500mg	
TETRACYCLINES	
TETRACYCLINES	
demeclocycline hcl tabs 150mg, 300mg	
doxycycline (monohydrate) caps 50mg, 75mg, 100mg; tabs 50mg, 75mg, 100mg, 150mg	
doxycycline hyclate caps 50mg, 100mg; tabs 20mg, 100mg; tbec 75mg, 100mg, 150mg	
minocycline hcl caps 50mg, 75mg, 100mg; tb24 80mg, 105mg	
tetracycline hcl caps 250mg, 500mg	
THYROID AGENTS	
ANTITHYROID AGENTS	
methimazole tabs 5mg, 10mg	
propylthiouracil tabs 50mg	
THYROID HORMONES	
AMERITHROID TABS 15MG, 30MG, 60MG, 90MG, 120MG, 180MG, 240MG, 300MG	
ARMOUR THYROID TABS 15MG	
ARMOUR THYROID TABS 30MG, 60MG, 90MG, 120MG, 180MG, 240MG, 300MG	
EVEXITHROID TABS 15MG, 30MG, 60MG, 90MG, 120MG, 180MG	
EVEXITHROID TABS 45MG, 75MG	
levothyroxine sodium tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	
levoxyl tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	
liomny tabs 5mcg, 25mcg, 50mcg	
liothyronine sodium tabs 5mcg, 25mcg, 50mcg	

Drug Name	Requirements/Limits
NIVA THYROID TABS 15MG, 30MG, 60MG, 90MG, 120MG	
NP THYROID 15 TABS 15MG	
NP THYROID 30 TABS 30MG	
NP THYROID 60 TABS 60MG	
NP THYROID 90 TABS 90MG	
NP THYROID 120 TABS 120MG	
RENTHYROID TABS 15MG, 30MG, 60MG, 90MG, 120MG	
RENTHYROID TABS 45MG, 75MG	
THYROID TABS 15MG, 30MG, 60MG, 90MG, 120MG	
unithroid tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	
ANTISPASMODICS	
dicyclomine hcl caps 10mg; soln 10mg/5ml; tabs 20mg	
glycopyrrolate tabs 1mg, 2mg	
hyoscyamine sulfate elix .125mg/5ml; soln .125mg/ml; subl .125mg; tabs .125mg; tb12 .375mg; tbdp .125mg	
hyosyne elix .125mg/5ml; soln .125mg/ml	
NULEV TBDP .125MG	
H-2 ANTAGONISTS	
cimetidine tabs 200mg	OTC
cimetidine tabs 200mg, 300mg, 400mg, 800mg	
cimetidine hcl soln 300mg/5ml	
famotidine susr 40mg/5ml; tabs 20mg, 40mg	
famotidine tabs 20mg	OTC
nizatidine caps 150mg, 300mg	
ranitidine hcl tabs 150mg, 300mg	
MISC. ANTI-ULCER	
sucralfate susp 1gm/10ml; tabs 1gm	
PROTON PUMP INHIBITORS	
esomeprazole magnesium cpdr 20mg	PA, OTC
esomeprazole magnesium cpdr 20mg, 40mg	PA
lansoprazole cpdr 15mg	PA, OTC
lansoprazole cpdr 15mg, 30mg	PA
omeprazole cpdr 10mg, 20mg, 40mg	PA
omeprazole tbdd 20mg	PA, OTC
omeprazole tbec 20mg	PA, OTC
omeprazole magnesium cpdr 20mg, 20.6mg	QL (30 caps every 30 days), OTC
omeprazole magnesium tbec 20mg	QL (30 tabs every 30 days), OTC
omeprazole magnesium tbec 20mg	QL (30 tabs every 30 days), OTC
pantoprazole sodium tbec 20mg, 40mg	PA
rabeprazole sodium tbec 20mg	PA
ULCER DRUGS - PROSTAGLANDINS	
misoprostol tabs 100mcg, 200mcg	

Drug Name	Requirements/Limits
ULCER THERAPY COMBINATIONS	
omeprazole-sodium bicarbonate cap 20-1100 mg	QL (30 caps every 30 days)
omeprazole-sodium bicarbonate cap 20-1100 mg	QL (30 caps every 30 days), OTC
omeprazole-sodium bicarbonate cap 20-1100 mg	QL (30 caps every 30 days), OTC
omeprazole-sodium bicarbonate cap 40-1100 mg	QL (30 caps every 30 days)
URINARY ANTISPASMODICS	
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)	
oxybutynin chloride soln 5mg/5ml; tabs 5mg; tb24 15mg	
oxybutynin chloride tb24 5mg, 10mg	
tolterodine tartrate tabs 1mg, 2mg	ST
trospium chloride cp24 60mg	QL (30 caps every 30 days)
trospium chloride tabs 20mg	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS	
bethanechol chloride tabs 5mg, 10mg, 25mg, 50mg	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS	
flavoxate hcl tabs 100mg	
VACCINES	
VIRAL VACCINES	
FLUMIST NASA LIQ 2026-27	PA
MFLUSIVA INJ 2026-27	PA
MRESVIA SUSY 50MCG/0.5ML	PA
SHINGRIX SUSY 50MCG/0.5ML	PA
VAGINAL AND RELATED PRODUCTS	
VAGINAL ANTI-INFECTIVES	
CLEOCIN SUPP 100MG	
clindamycin phosphate vaginal crea 2%	
clotrimazole vaginal crea 1%	QL (45 gm every 30 days), OTC
clotrimazole vaginal crea 1%	QL (45 gm every 30 days), OTC
metronidazole vaginal gel .75%	
miconazole nitrate vaginal crea 2%, 4%	OTC
miconazole nitrate vaginal app 200 mg & 2% cream 9 gm kit	OTC
miconazole nitrate vaginal supp 200 mg & 2% cream 9 gm kit	OTC
terconazole vaginal crea .4%, .8%; supp 80mg	
VANDAZOLE GEL .75%	
VAGINAL ANTI-INFLAMMATORY AGENTS	
MONISTAT CARE INSTANT ITC CREA 1%	OTC
VAGINAL ESTROGENS	
estradiol vaginal crea .01%, .1mg/gm; tabs 10mcg	
yuvafem tabs 10mcg	
VASOPRESSORS	
ANAPHYLAXIS THERAPY AGENTS	
epinephrine (anaphylaxis) soaj .15mg/0.3ml, .3mg/0.3ml	QL (6 pens every 248 days)

Drug Name	Requirements/Limits
VASOPRESSORS	
midodrine hcl tabs 2.5mg, 5mg, 10mg	
VITAMINS	
OIL SOLUBLE VITAMINS	
cholecalciferol caps 1.25mg, 10mcg, 25mcg, 50mcg, 125mcg, 250mcg, 400unit, 1000unit, 2000unit, 5000unit, 10000unit, 50000unit; chew 25mcg, 400unit, 1000unit; liqd 10mcg/ml, 400unit/ml, 1000ut/0.028ml; tabs 1.25mg, 10mcg, 25mcg, 50mcg, 125mcg, 400unit, 1000unit, 2000unit, 5000unit, 50000unit	OTC
cholecalciferol cap 1.25 mg (50000 unit)	OTC
cholecalciferol cap 250 mcg (10000 unit)	OTC
ergocalciferol caps 1.25mg, 50000unit	
ergocalciferol soln 200mcg/ml, 8000unit/ml	OTC
MAXIMUM D3 CAPS 325MCG	OTC
phytonadione tabs 5mg	QL (10 tablets every 30 days)
REPLESTA WAFR 50000UNIT	OTC
VITAMIN D2 TABS 400UNIT	OTC
VITAMIN D3 LIQD 1200UNIT/15ML, 5000UNIT/ML; TABS 3000UNIT	OTC
WATER SOLUBLE VITAMINS	
niacin cpcr 250mg; tabs 50mg, 100mg, 250mg, 500mg; tbcr 250mg, 500mg, 750mg	OTC
pyridoxine hcl tabs 25mg, 50mg, 100mg, 250mg	OTC

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