



San Francisco Health Plan Medi-Cal Formulary
AS OF NOVEMBER 2014

**SAN FRANCISCO
HEALTH PLAN™**



Here for you

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Medi-Cal Formulary

As of November 2014



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The San Francisco Health Plan (SFHP), with the direction from the Pharmacy and Therapeutics Committee (P&T), has developed a formulary to be used by members, clinicians, and pharmacists. The P&T Committee is composed of the SFHP Medical Director, the SFHP Pharmacy Director, physicians from various medical specialties and clinics, and community clinical pharmacists. The P&T meets quarterly to review formulary changes based on quality of care considerations and sound pharmacoeconomic principles.

The formulary is a list of drug products designed to reflect the most appropriate, high quality and cost-effective drug therapies. The formulary is updated regularly and is subject to change without notice.

The formulary requires the continuous support of all our providers and pharmacists. Please contact us at (415) 547-7818 x 7085 or pharmacy@sfhp.org if you have any questions regarding the formulary. The SFHP Formulary can be easily accessed online from our website at <http://www.sfhp.org/providers/formulary/sfhp-formulary/>.

Request for Addition or Deletion of a Drug to the Formulary

SFHP providers may request evaluation of drugs for addition to or deletion from the Formulary by submitting the [Formulary Modification Request Form](#) which can be obtained on our website at <http://www.sfhp.org/providers/formulary/prior-authorization-requests/> or by emailing pharmacy@sfhp.org.

Request for Non-Preferred Medications

Non-preferred or non-formulary medications may be authorized when there is clinical justification for doing so. Clinicians can submit a prior authorization (PA) request in one of three different ways:

1. Download and Fax [Prior Authorization Request Form](#) to **(855) 811-9330** for standard requests or **(855) 811-9331** for urgent requests.
2. Call our Pharmacy Benefits Manager (PBM) PerformRx at **(888) 989-0091** to submit a verbal request.
3. Submit online using the [Online Pharmacy Prior Authorization Request Form](#).

The [Prior Authorization Request Form](#) and the [Online Pharmacy Prior Authorization Request Form](#) can be accessed from our website at <http://www.sfhp.org/providers/formulary/prior-authorization-requests/>.



Brand Medication Policy

SFHP has a mandatory generic policy and requires generic substitution when an equivalent generic product is available. Dispensing of brand name medications when generic equivalent is available will be allowed only in the following cases:

- Pharmacy bills brand medication as DAW 5 (i.e. billed as a generic product)
- Pharmacy bills brand medication as DAW 8 (i.e. generic formulation is not currently available)
- Pharmacy is dispensing one of the following narrow therapeutic index drugs: Armour Thyroid, Coumadin, Dilantin, Synthroid

For all other brand name medication requests, prior authorization with documentation of trial and failure of 2 generic medications from different manufacturers will be required. All brand name medication prior authorization requests will be reviewed by the SFHP Medical Director.

Medi-Cal Formulary Exclusions

The following drugs classes are excluded from the SFHP Medi-Cal formulary and are covered by fee-for-service Medi-Cal. TAR may need to be submitted to fee-for-service Medi-Cal for certain medications. For more information, refer to the "Capitated/Noncapitated Drugs" section in the "[MCP: Two-Plan Model](#)" document available at Medi-Cal's website (www.medi-cal.ca.gov).

- Anti-psychotics
- AIDS/HIV drugs (except didanosine, zidovudine; covered on SFHP Medi-Cal formulary)
 - NOTE: tenofovir (Viread®) is used for treatment of HIV and Hepatitis B infections. SFHP will cover the use of tenofovir for Hepatitis B indication only. Prior authorization request will need to be submitted using the process outlined above.
- Alcohol, heroin detoxification and dependency treatment drugs
- Erectile dysfunction drugs

Medications in the following categories are excluded from the SFHP Medi-Cal formulary as not medically necessary:

- Fertility agents
- Drugs for cosmetic indication (e.g. hydroquinone for hyperpigmentation of the skin)

Day Supply Policy

SFHP's standard day supply policy is: 30 day supply for brand and 90 day supply for generic medications.

Exceptions to the 30 day supply policy for brand medications are as follows:

- 90 day supply is allowed for all insulin products



- Up to 100 day supply is allowed for test strips and lancets
- Up to 90 day supply for brand contraceptives (e.g. Nuvaring®, Ortho Evra® patch) AFTER a one-month trial on the brand medication. Prior authorization request must be submitted explaining the need for 90 day supply of brand medication and documenting that one-month trial has been completed and no side effects were experienced.

Exceptions to the 90 day supply policy for generic medications are as follows:

- Effective 3/1/14, 30 day supply only is allowed for all opiate medications except tramadol

Formulary Restrictions (DUR edits)

Standard DUR edits applicable to SFHP formularies include: medication quantity, age, and gender limitations. All DUR edits are based on FDA approved indications, standards of practice, safety and abuse potential considerations. Visit our website at <http://www.sfhp.org/providers/formulary/sfhp-formulary/> for detailed information on all active formulary restrictions.

Step Therapy (ST)

Step Therapy (ST) drugs will process at the point of sale at the pharmacy if the required medications have been tried and failed with paid claims. If paid claims do not exist, a prior authorization request must be submitted for consideration of coverage. Visit our website at <http://www.sfhp.org/providers/formulary/sfhp-formulary/> for detailed information on all active [step therapy rules](#).

Diabetic Supplies

The following diabetic supplies are covered:

- Glucometers: ACCU-CHEK Nano SmartView and ACCU-CHEK Aviva Plus, Accu-Chek Designer Care Kit, 1 glucometer per 365 days
- Test strips: ACCU-CHEK SmartView (for Nano) and ACCU-CHEK Aviva Plus test strips with the following quantity limits:
 - 100 per 100 days for all members
 - 400 per 100 days for members on insulin
 - 800 per 100 days for members with gestational diabetes
- Lancets: ACCU-CHEK FastClix, Multiclix, SoftClix lancets, 100 day supply

Respiratory Supplies

The following respiratory supplies are covered for members under 19 years of age with quantity limit of #2 per 365 days:

- Inhalers and inhaler assist devices



- Nebulizers
- Peak flow meters

Formulary Document Details

The SFHP formulary document is listed by drug class and includes: drug name, dosage form, drug tier, quantity limit and prior authorization, or step therapy requirements. Brand products are listed in all uppercase letters and generic products are listed in all lowercase letters. Tier 1 drugs are formulary and will pay at the point of sale if quantity limits, age, and gender limitations are met (see “Formulary Restrictions (DUR edits)” above). Tier 2 drugs may require a Prior Authorization (see “Request for Non-Preferred Medications” above) or Step Therapy (see “Step Therapy (ST)” above).

**Some medications may be listed as both Tier 1 and Tier 2 due to a particular strength being formulary and another strength of the same medication requiring a prior authorization.



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
Antihistamine Drugs			
First Generation Antihistamines			
<i>aprodine</i>	TABS	1	
<i>childrens complete allergy</i>	CHEW	1	
<i>chlorpheniramine maleate</i>	TABS	1	
<i>chlorpheniramine maleate</i>	TBCR	1	
CLEMASTINE FUMARATE	SYRP	1	
<i>clemastine fumarate</i>	TABS	1	
<i>cyproheptadine hcl</i>	SYRP	1	
<i>cyproheptadine hcl</i>	TABS	1	
<i>diphenhydramine hcl</i>	CAPS	1	
<i>diphenhydramine hcl</i>	ELIX	1	
<i>diphenhydramine hcl</i>	TABS	1	
<i>phenadoz</i>	SUPP	1	
<i>promethazine hcl</i>	SOLN	1	
<i>promethazine hcl</i>	SUPP	1	
<i>promethazine hcl</i>	TABS	1	
PROMETHAZINE VC PLAIN	SYRP	1	
<i>promethegan</i>	SUPP	2	PA
<i>q-dryl</i>	LIQD	1	
Second Generation Antihistamines			
ALLEGRA ALLERGY CHILDRENS	SUSP	1	
ALLEGRA ALLERGY CHILDRENS	TABS	1	QL
ALLEGRA ALLERGY CHILDRENS	TBDP	2	PA
ALLEGRA-D 24 HOUR ALLERGY& CONGESTION	TB24	2	PA
<i>allergy relief</i>	TBDP	1	
<i>cetirizine hcl</i>	CHEW	1	
<i>cetirizine hcl</i>	SYRP	1	
<i>cetirizine hcl</i>	TABS	1	
<i>childrens loratadine</i>	SYRP	1	
CLARINEX	SYRP	2	PA
<i>desloratadine odt</i>	TBDP	2	PA
<i>desloratadine</i>	TABS	2	PA
<i>fexofenadine hcl</i>	TABS	1	QL
<i>loratadine</i>	TABS	1	
<i>loratadine-d 12hr</i>	TB12	1	
<i>loratadine-d 24hr</i>	TB24	1	
Anti-infective Agents			
Anthelmintics			
ALBENZA	TABS	1	QL
BILTRICIDE	TABS	1	
Antibacterials			
<i>amoxicillin/clavulanate potassium</i>	CHEW	1	
<i>amoxicillin/clavulanate potassium</i>	SUSR	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>amoxicillin/clavulanate potassium</i>	TABS	1	
<i>amoxicillin</i>	CAPS	1	
AMOXICILLIN	CHEW	1	
<i>amoxicillin</i>	SUSR	1	
<i>amoxicillin</i>	TABS	1	
<i>ampicillin</i>	CAPS	1	
AMPICILLIN	SUSR	1	QL
AUGMENTIN	SUSR	1	
AZITHROMYCIN	PACK	1	QL
<i>azithromycin</i>	SUSR	1	QL
<i>azithromycin</i>	TABS	1	QL
CAYSTON	SOLR	2	PA
CEDAX	SUSR	2	PA
CEFACTOR ER	TB12	1	
<i>cefactor</i>	CAPS	1	
CEFACTOR	SUSR	1	
<i>cefadroxil</i>	CAPS	2	PA
<i>cefadroxil</i>	SUSR	2	PA
<i>cefadroxil</i>	TABS	2	PA
<i>cefdinir</i>	CAPS	1	
<i>cefdinir</i>	SUSR	1	
CEFDITOREN PIVOXIL	TABS	2	PA
<i>cefpodoxime proxetil</i>	SUSR	1	
<i>cefpodoxime proxetil</i>	TABS	1	QL
<i>cefprozil</i>	SUSR	1	
<i>cefprozil</i>	TABS	1	
CEFTIBUTEN	CAPS	2	PA
CEFTIBUTEN	SUSR	2	PA
CEFTIN	SUSR	1	
<i>cefuroxime axetil</i>	SUSR	1	
<i>cefuroxime axetil</i>	TABS	1	
<i>cephalexin</i>	CAPS	1	
<i>cephalexin</i>	SUSR	1	
<i>ciprofloxacin er</i>	TB24	1	QL
<i>ciprofloxacin hcl</i>	TABS	1	
<i>ciprofloxacin</i>	SUSR	2	PA
<i>clarithromycin</i>	TABS	1	QL
<i>clindamycin hcl</i>	CAPS	1	
<i>clindamycin hcl</i>	CAPS	2	PA
<i>clindamycin palmitate hcl</i>	SOLR	1	
<i>demeclocycline hcl</i>	TABS	2	PA
<i>dicloxacillin sodium</i>	CAPS	1	
DIFICID	TABS	2	PA
<i>doxycycline hyclate</i>	CAPS	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>doxycycline hyclate</i>	TABS	1	QL
<i>doxycycline monohydrate</i>	CAPS	2	PA
<i>doxycycline monohydrate</i>	TABS	2	PA
<i>doxycycline</i>	CAPS	2	PA
<i>doxycycline</i>	SUSR	2	PA
E.E.S. GRANULES	SUSR	1	
<i>e.s.p.</i>	SUSR	1	
ERYPED 400	SUSR	1	
ERY-TAB	TBEC	1	
ERYTHROCIN STEARATE	TABS	1	
ERYTHROMYCIN BASE	TABS	1	
ERYTHROMYCIN ETHYLSUCCINATE	TABS	1	
<i>erythromycin</i>	CPEP	1	
KETEK	TABS	2	PA
<i>levofloxacin</i>	TABS	1	QL
<i>minocycline hcl</i>	CAPS	1	QL
<i>moxifloxacin hcl</i>	TABS	2	PA
<i>neomycin sulfate</i>	TABS	1	
NOROXIN	TABS	2	PA
OCUDOX	KIT	2	PA
PCE	TBEC	1	
<i>penicillin v potassium</i>	SOLR	1	
<i>penicillin v potassium</i>	TABS	1	
SULFADIAZINE	TABS	1	
<i>sulfamethoxazole/trimethoprim ds</i>	TABS	1	
<i>sulfamethoxazole/trimethoprim</i>	SUSP	1	
<i>sulfamethoxazole/trimethoprim</i>	TABS	1	
<i>sulfasalazine</i>	TABS	1	
<i>sulfasalazine</i>	TBEC	1	
SUPRAX	CHEW	1	
SUPRAX	SUSR	1	
SUPRAX	TABS	1	QL
TETRACYCLINE HCL	CAPS	1	QL
<i>tobramycin</i>	NEBU	2	PA
<i>vancomycin hcl</i>	SOLR	1	
<i>vancomycin hcl</i>	CAPS	2	QL
VIBRAMYCIN	SYRP	2	PA
XIFAXAN	TABS	2	QL ST
Antifungals			
<i>fluconazole</i>	SUSR	1	
<i>fluconazole</i>	TABS	1	
<i>griseofulvin microsize</i>	SUSP	1	
<i>griseofulvin microsize</i>	TABS	1	
<i>griseofulvin ultramicrosize</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>ketoconazole</i>	TABS	1	
<i>nystatin</i>	POWD	1	
<i>nystatin</i>	SUSP	1	
<i>nystatin</i>	TABS	1	
<i>terbinafine hcl</i>	TABS	1	QL
<i>voriconazole</i>	SUSR	2	PA
<i>voriconazole</i>	TABS	2	PA
Antimycobacterials			
DAPSONE	TABS	1	
<i>ethambutol hcl</i>	TABS	1	
ISONIAZID	SYRP	1	
<i>isoniazid</i>	TABS	1	
<i>pyrazinamide</i>	TABS	1	
<i>rifabutin</i>	CAPS	1	
<i>rifampin</i>	CAPS	1	
Antiprotozoals			
<i>atovaquone/proguanil hcl</i>	TABS	2	PA
<i>atovaquone</i>	SUSP	1	
<i>chloroquine phosphate</i>	TABS	1	
<i>hydroxychloroquine sulfate</i>	TABS	1	
<i>mefloquine hcl</i>	TABS	1	
<i>metronidazole</i>	TABS	1	
NEBUPENT	SOLR	2	PA
PENTAM 300	SOLR	2	PA
PRIMAQUINE PHOSPHATE	TABS	1	
YODOXIN	TABS	1	
Antivirals			
<i>acyclovir</i>	CAPS	1	QL
<i>acyclovir</i>	SUSP	1	
<i>acyclovir</i>	TABS	1	QL
<i>adefovir dipivoxil</i>	TABS	2	PA
BARACLUDE	SOLN	2	PA
<i>didanosine</i>	CPDR	1	
<i>entecavir</i>	TABS	2	PA
EPIVIR HBV	SOLN	2	PA
<i>famciclovir</i>	TABS	2	PA
INFERGEN	INJ	2	PA
<i>lamivudine</i>	TABS	2	PA
OLYSIO	CAPS	2	PA
PEGASYS PROCLICK	SOLN	2	PA
PEGASYS	KIT	2	PA
PEGASYS	SOLN	2	PA
REBETOL	SOLN	2	PA
RELENZA DISKHALER	AEPB	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>ribavirin</i>	CAPS	2	PA
<i>ribavirin</i>	TABS	2	PA
<i>rimantadine hcl</i>	TABS	1	
SOVALDI	TABS	2	PA
TAMIFLU	CAPS	1	QL
TAMIFLU	SUSR	1	QL
TYZEKA	TABS	2	PA
<i>valacyclovir hcl</i>	TABS	2	QL ST
VALCYTE	SOLR	2	PA
VALCYTE	TABS	2	PA
VIDEX PEDIATRIC	SOLR	1	
VIRAZOLE	SOLR	2	PA
VIREAD	POWD	2	PA
VIREAD	TABS	2	PA
<i>zidovudine</i>	CAPS	1	
<i>zidovudine</i>	SYRP	1	
<i>zidovudine</i>	TABS	1	
Urinary Anti-infectives			
MACRODANTIN	CAPS	1	
<i>nitrofurantoin macrocrystals</i>	CAPS	1	
<i>nitrofurantoin monohydrate</i>	CAPS	1	
<i>nitrofurantoin</i>	SUSP	1	
<i>trimethoprim</i>	TABS	1	
Antineoplastic Agents			
AFINITOR	TABS	2	PA
ALFERON N	SOLN	2	PA
ALKERAN	TABS	2	PA
<i>anastrozole</i>	TABS	1	QL
<i>bicalutamide</i>	TABS	1	
<i>capecitabine</i>	TABS	2	PA
CAPRELSA	TABS	2	PA
CYCLOPHOSPHAMIDE	TABS	2	PA
<i>exemestane</i>	TABS	2	PA
FARESTON	TABS	2	PA
<i>flutamide</i>	CAPS	1	
GLEEVEC	TABS	2	PA
HYCAMTIN	CAPS	2	PA
<i>hydroxyurea</i>	CAPS	1	
INTRON-A W/DILUENT	SOLR	2	PA
INTRON-A	SOLN	2	PA
<i>letrozole</i>	TABS	1	
<i>megestrol acetate</i>	SUSP	1	
<i>megestrol acetate</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>mercaptopurine</i>	TABS	1	
<i>methotrexate</i>	TABS	1	
MYLERAN	TABS	2	PA
NEXAVAR	TABS	2	PA
REVLIMID	CAPS	2	PA
RHEUMATREX	TABS	1	
SPRYCEL	TABS	2	PA
SUTENT	CAPS	2	PA
SYLATRON	KIT	2	PA
<i>tamoxifen citrate</i>	TABS	1	
TARCEVA	TABS	2	PA
TASIGNA	CAPS	2	PA
<i>temozolomide</i>	CAPS	2	PA
TREXALL	TABS	2	PA
TYKERB	TABS	2	PA
XALKORI	CAPS	2	PA
XTANDI	CAPS	2	PA
ZELBORAF	TABS	2	PA
ZYTIGA	TABS	2	PA
Autonomic Drugs			
Anticholinergic Agents			
ATROVENT HFA	AERS	1	QL
<i>chlordiazepoxide hcl/clidinium bromide</i>	CAPS	1	
<i>dicyclomine hcl</i>	CAPS	1	
<i>dicyclomine hcl</i>	TABS	1	
<i>glycopyrrolate</i>	TABS	2	PA
<i>hyoscyamine sulfate er</i>	TB12	1	
<i>hyoscyamine sulfate</i>	SUBL	1	
<i>ipratropium bromide</i>	SOLN	1	QL
<i>oscimin</i>	TABS	1	
SPIRIVA HANDIHALER	CAPS	1	QL
TUDORZA PRESSAIR	AEPB	1	QL
Autonomic Drugs, Miscellaneous			
CHANTIX STARTING MONTH PAK	TABS	1	QL
CHANTIX	TABS	1	QL
<i>nicotine polacrilex</i>	GUM	1	QL
<i>nicotine polacrilex</i>	LOZG	2	PA
<i>nicotine</i>	PT24	1	QL
NICOTROL INHALER	INHA	2	PA
NICOTROL NS	SOLN	2	PA
Parasympathomimetic (Cholinergic) Agents			
<i>bethanechol chloride</i>	TABS	2	PA
<i>donepezil hcl</i>	TABS	1	QL
EXELON	PT24	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>galantamine hydrobromide</i>	CP24	2	PA
<i>galantamine hydrobromide</i>	SOLN	2	PA
<i>galantamine hydrobromide</i>	TABS	2	PA
MESTINON TIMESPAN	TBCR	1	
MESTINON	SYRP	1	
<i>pilocarpine hydrochloride</i>	TABS	1	QL
PROSTIGMIN	TABS	1	
<i>pyridostigmine bromide</i>	TABS	1	
Skeletal Muscle Relaxants			
<i>baclofen</i>	TABS	1	
<i>carisoprodol</i>	TABS	2	QL ST
<i>cyclobenzaprine hcl</i>	TABS	1	QL
<i>methocarbamol</i>	TABS	1	
<i>tizanidine hcl</i>	TABS	1	QL
Sympatholytic (Adrenergic Blocking) Agents			
<i>alfuzosin hcl er</i>	TB24	2	PA
DIBENZYLIN	CAPS	1	
RAPAFLO	CAPS	2	PA
<i>tamsulosin hcl</i>	CAPS	1	QL
Sympathomimetic (Adrenergic) Agents			
ADVAIR DISKUS	AEPB	2	PA
ADVAIR HFA	AERO	2	PA
<i>albuterol sulfate er</i>	TB12	2	PA
<i>albuterol sulfate</i>	NEBU	1	QL
<i>albuterol sulfate</i>	SYRP	1	QL
<i>albuterol sulfate</i>	TABS	1	QL
AUVI-Q	SOAJ	1	
<i>childrens silfedrine</i>	LIQD	1	
COMBIVENT RESPIMAT	AERS	1	QL
EPIPEN 2-PAK	SOAJ	1	
EPIPEN-JR 2-PAK	SOAJ	1	
<i>ipratropium bromide/albuterol sulfate</i>	SOLN	1	QL
<i>levalbuterol hcl</i>	NEBU	2	QL ST
LEVALBUTEROL	NEBU	2	QL ST
<i>midodrine hcl</i>	TABS	1	
NASAL DECONGESTANT	LIQD	1	
<i>pseudoephedrine hcl</i>	TABS	1	
SEREVENT DISKUS	AEPB	2	PA
SUDAFED 24 HOUR	TB24	1	
<i>sudogest 12 hour</i>	TB12	1	
<i>sudogest</i>	TABS	1	
<i>terbutaline sulfate</i>	TABS	1	
VENTOLIN HFA	AERS	1	QL
XOPENEX HFA	AERO	2	QL ST



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
Blood Formation, Coagulation & Thrombosis			
Antianemia Drugs			
<i>ferrous drops</i>	SOLN	1	QL
<i>ferrous sulfate</i>	ELIX	1	
<i>ferrous sulfate</i>	TABS	1	
FERROUS SULFATE	TBCR	1	
<i>ferrous sulfate</i>	TBEC	1	
HEMATOGEN FA	CAPS	1	
<i>trigels-f forte</i>	CAPS	1	
VITAFOL	TABS	1	
Antithrombotic Agents			
<i>cilostazol</i>	TABS	1	QL
<i>clopidogrel</i>	TABS	1	
EFFIENT	TABS	2	QL ST
<i>enoxaparin sodium</i>	SOLN	1	QL
<i>fondaparinux sodium</i>	SOLN	1	QL
<i>heparin sodium dcu</i>	SOLN	1	
<i>heparin sodium</i>	SOLN	1	
PRADAXA	CAPS	2	PA
<i>ticlopidine hcl</i>	TABS	2	PA
<i>warfarin sodium</i>	TABS	1	
XARELTO	TABS	2	PA
Hematopoietic Agents			
ARANESP ALBUMIN FREE	SOLN	2	PA
EPOGEN	SOLN	2	PA
NEULASTA	SOLN	2	PA
NEUPOGEN	SOLN	2	PA
PROCRIT	SOLN	2	PA
PROMACTA	TABS	2	PA
Hemorrhologic Agents			
<i>pentoxifylline er</i>	TBCR	1	QL
Cardiovascular Drugs			
alpha-Adrenergic Blocking Agents			
<i>doxazosin mesylate</i>	TABS	1	
<i>prazosin hcl</i>	CAPS	1	
<i>terazosin hcl</i>	CAPS	1	QL
Antilipemic Agents			
<i>atorvastatin calcium</i>	TABS	1	QL
<i>cholestyramine light</i>	PACK	1	
<i>cholestyramine light</i>	POWD	1	
<i>cholestyramine</i>	PACK	1	
<i>cholestyramine</i>	POWD	1	
<i>colestipol hcl for oral suspension</i>	PACK	2	PA
<i>colestipol hcl</i>	GRAN	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
CRESTOR	TABS	2	PA
<i>fenofibrate micronized</i>	CAPS	1	
<i>fenofibrate micronized</i>	CAPS	2	PA
<i>fenofibrate</i>	TABS	1	
<i>fenofibrate</i>	CAPS	2	PA
<i>fenofibrate</i>	TABS	2	PA
<i>fenofibric acid dr</i>	CPDR	2	PA
FENOFIBRIC ACID	TABS	2	PA
FENOGLIDE	TABS	2	PA
<i>fluvastatin</i>	CAPS	2	PA
<i>gemfibrozil</i>	TABS	1	
LIPOFEN	CAPS	2	PA
<i>lovastatin</i>	TABS	1	
<i>micronized colestipol hcl</i>	TABS	2	PA
<i>pravastatin sodium</i>	TABS	1	QL
<i>simvastatin</i>	TABS	1	QL
VYTORIN	TABS	2	PA
WELCHOL	PACK	2	PA
WELCHOL	TABS	2	PA
ZETIA	TABS	2	PA
beta-Adrenergic Blocking Agents			
<i>acebutolol hcl</i>	CAPS	1	QL
<i>atenolol/chlorthalidone</i>	TABS	1	
<i>atenolol</i>	TABS	1	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	TABS	1	
<i>bisoprolol fumarate</i>	TABS	1	
<i>carvedilol</i>	TABS	1	QL
<i>labetalol hcl</i>	TABS	1	
<i>metoprolol succinate er</i>	TB24	1	
<i>metoprolol tartrate</i>	TABS	1	
<i>nadolol</i>	TABS	1	
<i>pindolol</i>	TABS	1	QL
<i>propranolol hcl er</i>	CP24	1	QL
PROPRANOLOL HCL	SOLN	1	
<i>propranolol hcl</i>	TABS	1	
<i>sotalol hcl</i>	TABS	1	QL
Calcium-Channel Blocking Agents			
<i>amlodipine besylate/atorvastatin calcium</i>	TABS	2	PA
<i>amlodipine besylate</i>	TABS	1	
<i>diltiazem cd</i>	CP24	1	QL
<i>diltiazem hcl er</i>	CP12	1	QL
<i>diltiazem hcl er</i>	CP24	1	QL
<i>diltiazem hcl</i>	TABS	1	
<i>felodipine er</i>	TB24	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>nifedipine er</i>	TB24	1	QL
<i>nifedipine</i>	CAPS	1	QL
<i>taztia xt</i>	CP24	1	QL
<i>telmisartan/amlodipine</i>	TABS	2	PA
<i>verapamil hcl er</i>	CP24	1	
<i>verapamil hcl er</i>	TBCR	1	
<i>verapamil hcl sr</i>	CP24	1	
<i>verapamil hcl</i>	TABS	1	
Cardiac Drugs			
<i>amiodarone hcl</i>	TABS	1	
DIGOXIN	SOLN	1	
<i>digoxin</i>	TABS	1	
<i>flecainide acetate</i>	TABS	1	
<i>mexiletine hcl</i>	CAPS	1	
NORPACE CR	CP12	1	
<i>propafenone hcl</i>	TABS	1	
QUINIDINE SULFATE ER	TBCR	1	
TIKOSYN	CAPS	1	
Hypotensive Agents			
<i>clonidine hcl er</i>	TB12	1	
<i>clonidine hcl</i>	TABS	1	
<i>clonidine hcl</i>	PTWK	2	PA
<i>guanfacine hcl</i>	TABS	1	QL
<i>hydralazine hcl</i>	TABS	1	
KAPVAY DOSE PACK	MISC	1	
<i>methyldopa</i>	TABS	1	
<i>minoxidil</i>	TABS	1	
RESERPINE	TABS	2	PA
Renin-Angiotensin-Aldosterone Sys Inhib			
<i>benazepril hcl/hydrochlorothiazide</i>	TABS	1	
<i>benazepril hcl</i>	TABS	1	
<i>candesartan cilexetil/hydrochlorothiazide</i>	TABS	2	PA
<i>candesartan cilexetil</i>	TABS	2	PA
CAPTOPRIL/HYDROCHLOROTHIAZIDE	TABS	2	PA
<i>captopril</i>	TABS	1	
<i>enalapril maleate/hydrochlorothiazide</i>	TABS	1	
<i>enalapril maleate</i>	TABS	1	
<i>eprosartan mesylate</i>	TABS	2	PA
<i>irbesartan/hydrochlorothiazide</i>	TABS	2	PA
<i>irbesartan</i>	TABS	2	ST
<i>lisinopril/hydrochlorothiazide</i>	TABS	1	
<i>lisinopril</i>	TABS	1	
<i>losartan potassium/hydrochlorothiazide</i>	TABS	1	QL
<i>losartan potassium</i>	TABS	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>quinapril hcl</i>	TABS	1	
<i>spironolactone/hydrochlorothiazide</i>	TABS	1	
<i>spironolactone</i>	TABS	1	
<i>telmisartan/hydrochloroth</i>	TABS	2	PA
<i>telmisartan/hydrochlorothiazide</i>	TABS	2	PA
<i>telmisartan</i>	TABS	2	PA
<i>trandolapril</i>	TABS	2	PA
<i>valsartan/hydrochlorothiazide</i>	TABS	2	PA
<i>valsartan</i>	TABS	2	PA
Vasodilating Agents			
DILATRATE SR	CPCR	1	
<i>dipyridamole</i>	TABS	1	
ISORDIL TITRADOSE	TABS	1	
<i>isosorbide dinitrate er</i>	TBCR	1	
<i>isosorbide dinitrate</i>	TABS	1	
<i>isosorbide mononitrate er</i>	TB24	1	
<i>isosorbide mononitrate</i>	TABS	1	
NITRO-BID	OINT	1	
NITROSTAT	SUBL	1	
<i>sildenafil</i>	TABS	2	PA
Central Nervous System Agents			
Analgesics and Antipyretics			
<i>acetaminophen/codeine #2</i>	TABS	1	QL
<i>acetaminophen/codeine #3</i>	TABS	1	QL
<i>acetaminophen/codeine</i>	SOLN	1	
<i>acetaminophen/codeine</i>	TABS	1	QL
<i>acetaminophen</i>	SUPP	1	
<i>acetaminophen</i>	TABS	1	
<i>aspirin ec</i>	TBEC	1	
<i>aspirin</i>	CHEW	1	
<i>aspirin</i>	TABS	1	
<i>butalbital/acetaminophen/caffeine</i>	TABS	1	
<i>butalbital/acetaminophen/caffeine</i>	CAPS	2	PA
<i>butalbital/aspirin/caffeine</i>	CAPS	2	PA
CAPITAL/CODEINE	SUSP	1	
CELEBREX	CAPS	2	QL ST
<i>childrens ibuprofen</i>	SUSP	1	
<i>choline magnesium trisalicylate</i>	LIQD	1	
<i>codeine sulfate</i>	TABS	1	QL
<i>diclofenac potassium</i>	TABS	2	PA
<i>diclofenac sodium dr</i>	TBEC	1	
<i>diclofenac sodium er</i>	TB24	2	PA
<i>diclofenac sodium/misoprostol</i>	TBEC	1	
<i>diflunisal</i>	TABS	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>eql infant pain relief</i>	SUSP	1	
<i>etodolac er</i>	TB24	1	
<i>etodolac</i>	CAPS	1	
<i>etodolac</i>	TABS	1	
FENOPROFEN CALCIUM	TABS	2	PA
<i>fentanyl</i>	PT72	2	PA
FEVERALL INFANTS	SUPP	1	
<i>feverall</i>	SUPP	1	
<i>flurbiprofen</i>	TABS	1	
<i>hydrocodone/acetaminophen</i>	TABS	1	QL
<i>hydromorphone hcl</i>	TABS	1	QL
<i>hydromorphone hcl</i>	LIQD	2	PA
HYDROMORPHONE HCL	SUPP	2	PA
<i>ibuprofen junior strength</i>	CHEW	1	
<i>ibuprofen</i>	SUSP	1	
<i>ibuprofen</i>	TABS	1	
INDOCIN	SUPP	1	
INDOCIN	SUSP	1	
<i>indomethacin</i>	CAPS	1	
KADIAN	CP24	2	PA
KETOPROFEN ER	CP24	2	PA
<i>ketoprofen</i>	CAPS	2	PA
<i>ketorolac tromethamine</i>	TABS	2	PA
<i>mapap</i>	LIQD	1	
MECLOFENAMATE SODIUM	CAPS	2	PA
<i>mefenamic acid</i>	CAPS	2	PA
MELOXICAM COMFORT PAC	KIT	2	PA
<i>meloxicam</i>	TABS	1	
MELOXICAM	SUSP	2	PA
<i>methadone hcl</i>	CONC	1	
<i>methadone hcl</i>	SOLN	1	
<i>methadone hcl</i>	TABS	1	
<i>methadone hcl</i>	TBSO	1	
<i>migraine formula</i>	TABS	1	
<i>morphine sulfate er</i>	TBCR	1	
<i>morphine sulfate er</i>	CP24	2	PA
<i>morphine sulfate</i>	SOLN	1	
MORPHINE SULFATE	SUPP	1	
MORPHINE SULFATE	TABS	1	QL
<i>nabumetone</i>	TABS	1	
<i>naproxen dr</i>	TBEC	1	
<i>naproxen sodium</i>	TABS	1	
<i>naproxen</i>	SUSP	1	
<i>naproxen</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>nortemp infants</i>	SUSP	1	
OPANA ER (CRUSH RESISTANT)	T12A	2	PA
<i>oxaprozin</i>	TABS	1	
OXYCODONE HCL ER	T12A	2	PA
<i>oxycodone hcl</i>	CONC	1	
<i>oxycodone hcl</i>	SOLN	1	
<i>oxycodone hcl</i>	TABS	1	QL
<i>oxycodone/acetaminophen</i>	TABS	1	QL
<i>oxycodone/aspirin</i>	TABS	1	QL
<i>oxycodone/ibuprofen</i>	TABS	2	PA
OXYCONTIN	T12A	2	PA
<i>oxymorphone hydrochloride er</i>	TB12	2	QL PA
<i>oxymorphone hydrochloride</i>	TABS	2	QL PA
<i>pain relief childrens</i>	SUSP	1	
<i>piroxicam</i>	CAPS	1	
ROXICET	SOLN	1	
<i>salsalate</i>	TABS	1	
SPRIX	SOLN	2	PA
<i>sulindac</i>	TABS	1	
<i>tension headache relief</i>	TABS	1	
<i>tolmetin sodium</i>	CAPS	2	PA
TOLMETIN SODIUM	TABS	2	PA
<i>tramadol hcl</i>	TABS	1	QL
Anorexigenic Agents and Respiratory and CNS Stimulants			
<i>amphetamine/dextroamphetamine</i>	TABS	1	QL
<i>amphetamine/dextroamphetamine</i>	CP24	2	PA
<i>dexmethylphenidate hcl</i>	TABS	1	QL
<i>dextroamphetamine sulfate er</i>	CP24	2	PA
<i>dextroamphetamine sulfate</i>	TABS	1	QL
<i>methamphetamine hcl</i>	TABS	2	PA
<i>methylphenidate hcl cd</i>	CPCR	2	PA
METHYLPHENIDATE HCL ER	TBCR	1	QL
<i>methylphenidate hcl er</i>	CP24	2	PA
<i>methylphenidate hcl er</i>	TBCR	2	PA
<i>methylphenidate hcl sr</i>	TBCR	1	QL
<i>methylphenidate hcl</i>	TABS	1	QL
<i>methylphenidate hydrochloride</i>	SOLN	1	QL
<i>modafinil</i>	TABS	2	PA
NUVIGIL	TABS	2	PA
RITALIN LA	CP24	2	PA
Anticonvulsants			
BANZEL	SUSP	2	PA
BANZEL	TABS	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>carbamazepine er</i>	TB12	1	QL
<i>carbamazepine er</i>	CP12	2	PA
<i>carbamazepine</i>	CHEW	1	QL
<i>carbamazepine</i>	SUSP	1	QL
<i>carbamazepine</i>	TABS	1	QL
CELONTIN	CAPS	1	
<i>clonazepam odt</i>	TBDP	2	PA
<i>clonazepam</i>	TABS	1	
DILANTIN	CAPS	1	QL
<i>divalproex sodium dr</i>	TBEC	1	QL
<i>divalproex sodium er</i>	TB24	1	QL
<i>divalproex sodium</i>	CPSP	1	QL
<i>ethosuximide</i>	CAPS	1	QL
<i>ethosuximide</i>	SOLN	1	QL
<i>felbamate</i>	SUSP	2	PA
<i>felbamate</i>	TABS	2	PA
<i>gabapentin</i>	CAPS	1	QL
<i>gabapentin</i>	SOLN	1	QL
<i>gabapentin</i>	TABS	1	QL
GABITRIL	TABS	2	PA
LAMICTAL ODT	KIT	2	PA
LAMICTAL ODT	TBDP	2	PA
LAMICTAL STARTER/NOT TAKING	KIT	2	PA
CARBAMAZEPINE			
LAMICTAL STARTER/TAKING	KIT	2	PA
CARBAMAZEPINE/NOT TAKING VALPROATE			
LAMICTAL XR	KIT	2	PA
<i>lamotrigine er</i>	TB24	2	PA
<i>lamotrigine starter/taking valproate</i>	KIT	2	PA
<i>lamotrigine</i>	CHEW	1	QL
<i>lamotrigine</i>	TABS	1	QL
<i>levetiracetam er</i>	TB24	1	QL
<i>levetiracetam</i>	SOLN	1	QL
<i>levetiracetam</i>	TABS	1	QL
LYRICA	CAPS	2	PA
LYRICA	SOLN	2	PA
ONFI	SUSP	2	PA
ONFI	TABS	2	PA
<i>oxcarbazepine</i>	SUSP	1	QL
<i>oxcarbazepine</i>	TABS	1	QL
PEGANONE	TABS	2	PA
<i>phenytoin sodium extended</i>	CAPS	1	QL
<i>phenytoin</i>	CHEW	1	QL
<i>phenytoin</i>	SUSP	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>phenytoin</i>	SUSP	2	QL PA
POTIGA	TABS	2	PA
<i>primidone</i>	TABS	1	QL
SABRIL	PACK	2	PA
SABRIL	TABS	2	PA
STAVZOR	CPDR	2	PA
TEGRETOL-XR	TB12	1	
<i>tiagabine hydrochloride</i>	TABS	2	PA
<i>topiramate</i>	CPSP	1	QL
<i>topiramate</i>	TABS	1	QL
<i>valproic acid</i>	CAPS	1	QL
<i>valproic acid</i>	SYRP	1	QL
VIMPAT	SOLN	2	PA
VIMPAT	TABS	2	PA
<i>zonisamide</i>	CAPS	1	QL
Antimigraine Agents			
<i>rizatriptan benzoate odt</i>	TBDP	2	QL PA
<i>rizatriptan benzoate</i>	TABS	2	QL ST
<i>sumatriptan succinate</i>	TABS	1	QL
SUMATRIPTAN	SOLN	2	PA
Antiparkinsonian Agents			
APOKYN	SOLN	2	PA
<i>bromocriptine mesylate</i>	TABS	1	
<i>bromocriptine mesylate</i>	CAPS	2	PA
<i>carbidopa/levodopa er</i>	TBCR	1	
<i>carbidopa/levodopa</i>	TABS	1	
<i>carbidopa</i>	TABS	1	QL
<i>entacapone</i>	TABS	1	
NEUPRO	PT24	2	PA
<i>pramipexole dihydrochloride</i>	TABS	1	
<i>ropinirole hcl</i>	TABS	1	QL
<i>selegiline hcl</i>	CAPS	1	
<i>selegiline hcl</i>	TABS	1	
TASMAR	TABS	2	PA
Anxiolytics, Sedatives, and Hypnotics			
<i>buspirone hcl</i>	TABS	1	QL
<i>chlordiazepoxide hcl</i>	CAPS	1	
DIASTAT ACUDIAL	GEL	1	QL
DIAZEPAM	GEL	1	QL
<i>diazepam</i>	TABS	1	
EDLUAR	SUBL	2	PA
<i>eszopiclone</i>	TABS	2	PA
<i>flurazepam hcl</i>	CAPS	1	QL
<i>hydroxyzine hcl</i>	SYRP	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>hydroxyzine hcl</i>	TABS	1	
<i>hydroxyzine pamoate</i>	CAPS	1	
INTERMEZZO	SUBL	2	PA
<i>lorazepam</i>	TABS	1	QL
<i>nighttime sleep aid</i>	TABS	1	
<i>oxazepam</i>	CAPS	1	
<i>phenobarbital</i>	SOLN	1	
<i>phenobarbital</i>	TABS	1	
ROZEREM	TABS	2	PA
<i>temazepam</i>	CAPS	1	QL
<i>triazolam</i>	TABS	2	PA
<i>zaleplon</i>	CAPS	2	PA
<i>zolpidem tartrate er</i>	TBCR	2	PA
<i>zolpidem tartrate</i>	TABS	1	QL
ZOLPIMIST	SOLN	2	PA
Central Nervous System Agents, Misc			
STRATTERA	CAPS	2	PA
XYREM	SOLN	2	PA
Psychotherapeutic Agents			
<i>amitriptyline hcl</i>	TABS	1	
<i>budeprion sr</i>	TB12	1	QL
<i>bupropion hcl er</i>	TB12	1	QL
<i>bupropion hcl sr</i>	TB12	1	QL
<i>bupropion hcl xl</i>	TB24	1	QL
<i>bupropion hcl</i>	TABS	1	
<i>citalopram hydrobromide</i>	SOLN	1	
<i>citalopram hydrobromide</i>	TABS	1	QL
<i>clomipramine hcl</i>	CAPS	1	
<i>desipramine hcl</i>	TABS	1	
<i>doxepin hcl</i>	CAPS	1	
<i>doxepin hcl</i>	CONC	1	
<i>duloxetine hcl</i>	CPEP	2	PA
<i>escitalopram oxalate</i>	SOLN	1	QL
<i>escitalopram oxalate</i>	TABS	1	QL
<i>fluoxetine hcl</i>	CAPS	1	QL
<i>fluoxetine hcl</i>	SOLN	1	QL
<i>fluoxetine hcl</i>	TABS	1	QL
<i>fluoxetine hcl</i>	TABS	2	PA
<i>fluoxetine</i>	CAPS	1	QL
<i>fluvoxamine maleate</i>	TABS	1	QL
<i>imipramine hcl</i>	TABS	1	
<i>imipramine pamoate</i>	CAPS	2	PA
<i>mirtazapine odt</i>	TBDP	2	PA
<i>mirtazapine</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>mirtazapine</i>	TBDP	2	PA
<i>nefazodone hcl</i>	TABS	1	QL
<i>nortriptyline hcl</i>	CAPS	1	
NORTRIPTYLINE HCL	SOLN	1	
<i>paroxetine hcl</i>	TABS	1	
<i>prochlorperazine maleate</i>	TABS	1	
<i>prochlorperazine</i>	SUPP	1	
<i>sertraline hcl</i>	CONC	1	
<i>sertraline hcl</i>	TABS	1	QL
<i>trazodone hcl</i>	TABS	1	
<i>venlafaxine hcl er</i>	CP24	1	QL
<i>venlafaxine hcl</i>	TABS	1	QL
Contraceptives			
FEMCAP	DEVI	1	
OPTIONS GYNOL II VAGINAL CONTRACEPTIVE	GEL	1	
ORTHO DIAPHRAGM ALL-FLEX/65MM	DPRH	1	
ORTHO DIAPHRAGM ALL-FLEX/70MM	DPRH	1	
ORTHO DIAPHRAGM ALL-FLEX/75MM	DPRH	1	
ORTHO DIAPHRAGM ALL-FLEX/80MM	DPRH	1	
VCF VAGINAL CONTRACEPTIVE FILM	FILM	1	
VCF VAGINAL CONTRACEPTIVE FOAM	FOAM	1	
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	DPRH	1	
Devices			
ACCU-CHEK AVIVA PLUS	KIT	1	QL
ACCU-CHEK AVIVA	SOLN	1	
ACCU-CHEK FASTCLIX LANCETS	MISC	1	
ACCU-CHEK NANO SMARTVIEW	KIT	1	QL
ACCU-CHEK SMARTVIEW CONTROL	LIQD	1	
AEROCHAMBER PLUS FLOW-VU/SMALL MASK	MISC	1	QL
ASTHMAPACK FOR CHILDREN	KIT	1	
BD SAFETYGLIDE ALLERGY SYRINGE/1ML/27GX1/2"	MISC	1	
CURITY AMD ANTIMICROBIAL GAUZE SPONGES 2"X2" 8 PLY	PADS	1	
DEPEND EASY FIT UNDERGARMENT X-ABS	MISC	1	
EXACTA-MIX EVA CONTAINER	MISC	1	
G4 PLATINUM RECEIVER KIT	KIT	1	
GUARDIAN REAL-TIME REPLACEMENT MONITOR	DEVI	1	
KERLIX AMD ANTIMICROBIAL SUPER SPONGES	PADS	1	
MEDI-JECTOR VISION	MISC	1	
NESSI SPACER/MOUTHPIECE	DEVI	1	
OMNIPOD	MISC	1	
SENSURA STANDARD WEAR BASEPLATE	MISC	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
SILICONE MASK FOR BREATHERITE CHAMBER/INFANT TEST PLUG	MISC	1	
TRUZONE PEAK FLOW METER	DEVI	1	
V-GO 20	KIT	1	
XEROFORM OCCLUSIVE PETROLATUM GAUZE STRIP/OVERWRAP 5"X9"	MISC	1	
Diagnostic Agents			
COAGUCHEK XS PT TEST STRIP	STRP	1	
Diabetes Mellitus			
ACCU-CHEK AVIVA PLUS	STRP	2	ST
ACCU-CHEK SMARTVIEW STRIPS	STRP	2	ST
Drug Hypersensitivity			
PRE-PEN	SOLN	1	
Ocular Disorders			
<i>fluorescein-benoxinate</i>	SOLN	1	
FLURA-SAFE	SOLN	1	
PAREMYD	SOLN	1	
Respiratory Function			
ARIDOL	KIT	1	
Urine and Feces Contents			
KETOSTIX	STRP	1	QL
Electrolytic, Caloric, and Water Balance			
Alkalinizing Agents			
<i>potassium citrate er</i>	TBCR	1	QL
<i>sodium bicarbonate</i>	SOLN	1	
Ammonia Detoxicants			
<i>enulose</i>	SOLN	1	
<i>lactulose</i>	SOLN	1	
Caloric Agents			
BOOST	LIQD	2	PA
ENSURE BONE HEALTH REVIGOR	LIQD	2	PA
ENSURE CLEAR	LIQD	2	PA
ENSURE CLINICAL STRENGTH REVIGOR	LIQD	2	PA
ENSURE MUSCLE HEALTH REVIGOR	LIQD	2	PA
ENSURE PUDDING	PUDG	2	PA
ENSURE/FIBER	LIQD	2	PA
ENSURE	LIQD	2	PA
ENSURE	POWD	2	PA
GLYTACTIN BETTERMILK 10	PACK	2	PA
GLYTACTIN BETTERMILK 15	PACK	2	PA
PEDIASURE 1.0 CAL/FIBER	LIQD	2	PA
PEDIASURE 1.5 CAL WITH FIBER	LIQD	2	PA
PEDIASURE 1.5 CAL	LIQD	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
PEDIASURE PEPTIDE 1.5 CAL	LIQD	2	PA
PEDIASURE SIDEKICKS CLEAR	LIQD	2	PA
PEDIASURE SIDEKICKS	LIQD	2	PA
PEDIASURE WITH FIBER	LIQD	2	PA
PEDIASURE	LIQD	2	PA
PKU 2	POWD	2	PA
PKU 3	POWD	2	PA
PKU COOLER 10	LIQD	2	PA
PKU EXPRESS20	PACK	2	PA
PKU EXPRESS	PACK	2	PA
PKU LOPHLEX LQ 20	LIQD	2	PA
PKU TRIO	POWD	2	PA
SIMILAC EXPERT CARE NEOSURE/IRON	LIQD	2	PA
Diuretics			
<i>bumetanide</i>	TABS	1	
CHLORTHALIDONE	TABS	1	QL
<i>furosemide</i>	SOLN	1	
<i>furosemide</i>	TABS	1	
<i>hydrochlorothiazide</i>	CAPS	1	
<i>hydrochlorothiazide</i>	TABS	1	
<i>metolazone</i>	TABS	1	
<i>torseamide</i>	TABS	1	
<i>triamterene/hydrochlorothiazide</i>	CAPS	1	
<i>triamterene/hydrochlorothiazide</i>	TABS	1	
Ion-removing Agents			
FOSRENOL	CHEW	2	PA
SEVELAMER CARBONATE	TABS	2	PA
<i>sodium polystyrene sulfonate</i>	SUSP	1	QL
Replacement Preparations			
<i>calcium 600-d</i>	TABS	1	
<i>calcium acetate</i>	CAPS	1	
<i>calcium acetate</i>	TABS	1	
<i>calcium carbonate</i>	TABS	1	
CALCIUM CITRATE W/D	TABS	1	
<i>calcium/vitamin d</i>	TABS	1	
<i>calvite p&d</i>	TABS	1	QL
MAGNESIUM GLUCONATE	TABS	1	
<i>magnesium oxide</i>	TABS	1	QL
<i>magnesium</i>	TABS	1	
<i>os-cal calcium + d3</i>	TABS	1	
<i>oysco 500+d</i>	CHEW	1	
<i>oyster shell calcium 250+d</i>	TABS	1	
<i>oyster shell calcium/vitamin d</i>	TABS	1	
<i>oyster shell/vitamin d</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits	
<i>pediatric electrolyte</i>	SOLN	1		
PHOSLYRA	SOLN	1		
PHOS-NAK POWDER CONCENTRATE	PACK	1		
<i>potassium chloride er</i>	CPCR	1		
<i>potassium chloride er</i>	TBCR	1		
<i>potassium chloride sr</i>	TBCR	1		
<i>potassium chloride</i>	LIQD	1		
<i>sodium chloride</i>	TABS	1		
<i>zinc sulfate</i>	CAPS	1		
Uricosuric Agents				
<i>probenecid</i>	TABS	1	QL	
Eye, Ear, Nose & Throat Preparations				
Antiallergic Agents				
<i>azelastine hcl</i>	SOLN	2	QL	ST
<i>cromolyn sodium</i>	AERS	1		
<i>cromolyn sodium</i>	SOLN	1		
<i>epinastine hcl</i>	SOLN	2	QL	ST
<i>ketotifen fumarate</i>	SOLN	1		
Antiglaucoma Agents				
<i>acetazolamide er</i>	CP12	1		
<i>acetazolamide</i>	TABS	1		
<i>betaxolol hcl</i>	SOLN	1		
<i>brimonidine tartrate</i>	SOLN	1		
<i>carteolol hcl</i>	SOLN	1		
<i>dorzolamide hcl/timolol maleate</i>	SOLN	1		
<i>dorzolamide hcl</i>	SOLN	1		
<i>latanoprost</i>	SOLN	1	QL	
<i>levobunolol hcl</i>	SOLN	1		
<i>methazolamide</i>	TABS	1		
METIPRANOLOL	SOLN	1		
<i>pilocarpine hcl</i>	SOLN	1		
PILOPINE HS	GEL	2		PA
<i>timolol maleate</i>	SOLN	1		
TRAVOPROST	SOLN	2	QL	ST
Anti-infectives				
<i>bacitracin/polymyxin b</i>	OINT	1		
BACITRACIN	OINT	1		
<i>chlorhexidine gluconate</i>	SOLN	1		
<i>ciprofloxacin hcl</i>	SOLN	1		
<i>ear drops earwax removal aid</i>	SOLN	1		
<i>erythromycin</i>	OINT	1		
<i>gentamicin sulfate</i>	OINT	1		
<i>gentamicin sulfate</i>	SOLN	1		
<i>neomycin/polymyxin/gramicidin</i>	SOLN	1		



Drug Name	Dosage Form	Drug Tier	Requirements / Limits		
<i>neo-polycin</i>	OINT	1			
<i>ofloxacin</i>	SOLN	1	QL		
<i>sodium sulfacetamide</i>	SOLN	1			
SULFACETAMIDE SODIUM	OINT	1			
<i>tobramycin sulfate</i>	SOLN	1			
<i>trimethoprim sulfate/polymyxin b sulfate</i>	SOLN	1			
Anti-inflammatory Agents					
BLEPHAMIDE S.O.P.	OINT	1			
BLEPHAMIDE	SUSP	1			
<i>budesonide</i>	SUSP	2		PA	
CIPRODEX	SUSP	2	QL		ST
<i>dexamethasone sodium phosphate</i>	SOLN	1			
<i>diclofenac sodium</i>	SOLN	1			
<i>flunisolide</i>	SOLN	1	QL		
<i>fluorometholone</i>	SUSP	1			
<i>flurbiprofen sodium</i>	SOLN	1			
<i>fluticasone propionate</i>	SUSP	1	QL		
<i>hydrocortisone/acetic acid</i>	SOLN	1			
NASACORT ALLERGY 24HR	AERO	1	QL		
NASONEX	SUSP	2		PA	
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	OINT	1			
<i>neomycin/polymyxin/dexamethasone</i>	OINT	1			
<i>neomycin/polymyxin/dexamethasone</i>	SUSP	1			
<i>neomycin/polymyxin/hydrocortisone</i>	SOLN	1			
<i>neomycin/polymyxin/hydrocortisone</i>	SUSP	1			
PRED MILD	SUSP	1			
<i>prednisolone acetate</i>	SUSP	1			
PREDNISOLONE SODIUM PHOSPHATE	SOLN	1			
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	SOLN	1			
TOBRADEX	OINT	1			
<i>tobramycin/dexamethasone</i>	SUSP	1	QL		
<i>triamcinolone acetonide</i>	AERO	2	QL		ST
ZYLET	SUSP	2		PA	
EENT Drugs, Miscellaneous					
<i>acetic acid</i>	SOLN	1			
<i>akwa tears renewed</i>	SOLN	1			
<i>artificial tears</i>	OINT	1			
<i>artificial tears</i>	SOLN	1			
<i>baby ayr saline</i>	SOLN	1			
<i>deep sea nasal spray</i>	SOLN	1	QL		
HYPOTEARNS	SOLN	1			
IOPIDINE	SOLN	1			
<i>natures tears</i>	SOLN	1			



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>tears naturale ii</i>	SOLN	1	
<i>tears naturale</i>	SOLN	1	
THERATEARS	GEL	1	
<i>ultra fresh</i>	SOLN	1	
Local Anesthetics			
<i>antipyrine/benzocaine</i>	SOLN	1	
<i>lidocaine viscous</i>	SOLN	1	
Mydriatics			
ATROPINE SULFATE	OINT	1	
<i>atropine-care</i>	SOLN	1	
CYCLOGYL	SOLN	1	
<i>cyclopentolate hcl</i>	SOLN	1	
<i>homatropaire</i>	SOLN	1	
ISOPTO HOMATROPINE	SOLN	1	
<i>tropicamide</i>	SOLN	1	
Vasoconstrictors			
<i>eye allergy relief</i>	SOLN	1	
NAPHAZOLINE HCL	SOLN	1	
<i>tgt eye allergy relief</i>	SOLN	1	
Gastrointestinal Drugs			
Antacids and Adsorbents			
<i>calcium antacid</i>	CHEW	1	
CALCIUM CARBONATE	TABS	1	
<i>maalox advanced maximum strength</i>	SUSP	1	
<i>maalox advanced</i>	SUSP	1	
Antidiarrhea Agents			
<i>anti-diarrheal</i>	TABS	1	
DIPHENOXYLATE/ATROPINE	LIQD	1	
<i>diphenoxylate/atropine</i>	TABS	1	
<i>gnp pink bismuth</i>	TABS	1	
<i>loperamide hcl</i>	CAPS	1	
<i>loperamide hcl</i>	LIQD	1	
<i>peptic relief</i>	CHEW	1	
<i>stomach relief</i>	SUSP	1	
Antiemetics			
CESAMET	CAPS	2	PA
<i>dronabinol</i>	CAPS	2	PA
EMEND	CAPS	2	PA
<i>granisetron hcl</i>	TABS	2	PA
<i>meclizine hcl</i>	TABS	1	
<i>ondansetron hcl</i>	TABS	1	QL
<i>ondansetron hcl</i>	SOLN	2	PA
<i>ondansetron odt</i>	TBDP	1	QL
TIGAN	SOLN	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>travel sickness</i>	CHEW	1	
Antiflatulents			
<i>gas relief</i>	SUSP	1	
<i>simethicone</i>	CAPS	1	
<i>simethicone</i>	CHEW	1	
Anti-inflammatory Agents			
APRISO	CP24	2	PA
ASACOL HD	TBEC	1	QL
<i>balsalazide disodium</i>	CAPS	1	QL
CANASA	SUPP	1	QL
DELZICOL	CPDR	1	QL
LIALDA	TBEC	1	QL
LOTRONEX	TABS	2	PA
<i>mesalamine</i>	ENEM	1	QL
PENTASA	CPCR	1	QL
Antiulcer Agents and Acid Suppressants			
CARAFATE	SUSP	1	
<i>cimetidine hcl</i>	SOLN	1	
<i>cimetidine</i>	TABS	1	
<i>famotidine</i>	SUSR	1	
<i>famotidine</i>	TABS	1	
FIRST-LANSOPRAZOLE	SUSP	2	PA
FIRST-OMEPRAZOLE	SUSP	1	QL
<i>lansoprazole</i>	CPDR	2	QL ST
<i>misoprostol</i>	TABS	1	
NEXIUM 24HR	CPDR	2	QL ST
<i>omeprazole</i>	CPDR	1	QL
<i>omeprazole</i>	CPDR	2	PA
<i>pantoprazole sodium</i>	TBEC	1	QL
PREVACID SOLUTAB	TBDP	2	PA
PROTONIX	PACK	2	PA
<i>ranitidine 75</i>	TABS	1	
<i>ranitidine hcl</i>	CAPS	1	
<i>ranitidine hcl</i>	SYRP	1	
<i>ranitidine hcl</i>	TABS	1	
<i>sucralfate</i>	TABS	1	
Cathartics and Laxatives			
<i>bisacodyl ec</i>	TBEC	1	
<i>bisacodyl</i>	SUPP	1	
COLACE	CAPS	1	
COLYTE-FLAVOR PACKS	SOLR	1	
<i>docusate calcium</i>	CAPS	1	
<i>docusate sodium & senna stimulant laxative/stool softener</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>docusate sodium</i>	CAPS	1	
<i>docusate sodium</i>	LIQD	1	
<i>enema ready-to-use</i>	ENEM	1	
GLYCERIN ADULT	SUPP	1	
<i>konsyl</i>	CAPS	1	
<i>magnesium citrate</i>	SOLN	1	
<i>metamucil original texture</i>	POWD	1	
METAMUCIL	WAFR	1	
MINERAL OIL	OIL	1	
<i>peg 3350/electrolytes</i>	SOLR	1	
<i>peg-3350/electrolytes</i>	SOLR	1	
<i>peg-3350/nacl/na bicarbonate/kcl</i>	SOLR	1	
<i>polyethylene glycol 3350</i>	PACK	1	QL
<i>polyethylene glycol 3350</i>	POWD	1	QL
<i>senna</i>	SYRP	1	
<i>senna</i>	TABS	1	
<i>silace</i>	SYRP	1	
SUPREP BOWEL PREP	SOLN	2	PA
Cholelitholytic Agents			
<i>ursodiol</i>	CAPS	1	
Digestants			
CREON	CPEP	1	QL
<i>lactase enzyme</i>	TABS	1	
<i>lactose fast acting relief</i>	TABS	1	
ZENPEP	CPEP	1	QL
GI Drugs, Miscellaneous			
NUTRESTORE	PACK	2	PA
Prokinetic Agents			
<i>metoclopramide hcl</i>	SOLN	1	
<i>metoclopramide hcl</i>	TABS	1	
Heavy Metal Antagonists			
CUPRIMINE	CAPS	1	
DEPEN TITRATABS	TABS	1	
EXJADE	TBSO	2	PA
Hormones and Synthetic Substitutes			
Adrenals			
ASMANEX TWISTHALER 120 METERED DOSES	AEPB	1	QL
ASMANEX TWISTHALER 14 METERED DOSES	AEPB	1	QL
ASMANEX TWISTHALER 30 METERED DOSES	AEPB	1	QL
ASMANEX TWISTHALER 30 METERED DOSES	AEPB	1	QL
ASMANEX TWISTHALER 60 METERED DOSES	AEPB	1	QL
ASMANEX TWISTHALER 7 METERED DOSES	AEPB	1	QL
<i>budesonide</i>	SUSP	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>budesonide</i>	CP24	2	PA
CORTISONE ACETATE	TABS	1	
<i>dexamethasone</i>	ELIX	1	
DEXAMETHASONE	SOLN	1	
<i>dexamethasone</i>	TABS	1	
DULERA	AERO	1	QL
FLOVENT DISKUS	AEPB	1	QL
FLOVENT HFA	AERO	1	QL
<i>fludrocortisone acetate</i>	TABS	1	
<i>hydrocortisone</i>	TABS	1	
MEDROL	TABS	1	
<i>methylprednisolone dose pack</i>	TABS	1	
<i>methylprednisolone</i>	TABS	1	
MILLIPRED	TABS	1	
<i>prednisolone sodium phosphate</i>	SOLN	1	
<i>prednisolone</i>	SOLN	1	
PREDNISON INTENSOL	CONC	1	
PREDNISON	SOLN	1	
<i>prednisone</i>	TABS	1	
PULMICORT FLEXHALER	AEPB	1	QL
PULMICORT	SUSP	1	QL
QVAR	AERS	1	QL
SYMBICORT	AERO	1	QL
UCERIS	TB24	2	PA
Androgens			
ANDRODERM	PT24	2	PA
ANDROGEL PUMP	GEL	2	PA
ANDROGEL	GEL	2	PA
ANDROXY	TABS	2	PA
AXIRON	SOLN	2	PA
METHITEST	TABS	1	
<i>oxandrolone</i>	TABS	2	PA
<i>testosterone cypionate</i>	SOLN	1	
<i>testosterone cypionate</i>	SOLN	2	PA
TESTRED	CAPS	1	
Antidiabetic Agents			
<i>acarbose</i>	TABS	1	
APIDRA SOLOSTAR	SOPN	1	
APIDRA	SOLN	1	
BYDUREON	SUSR	2	PA
BYETTA	SOPN	2	PA
<i>glimepiride</i>	TABS	1	QL
<i>glipizide er</i>	TB24	1	
<i>glipizide/metformin hcl</i>	TABS	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>glipizide</i>	TABS	1	
<i>glyburide micronized</i>	TABS	1	
<i>glyburide/metformin hcl</i>	TABS	1	QL
<i>glyburide</i>	TABS	1	QL
HUMALOG KWIKPEN	SOPN	1	
HUMALOG MIX 50/50 KWIKPEN	SUPN	1	
HUMALOG MIX 50/50	SUSP	1	
HUMALOG MIX 75/25 KWIKPEN	SUPN	1	
HUMALOG MIX 75/25	SUSP	1	
HUMALOG	SOCT	1	
HUMALOG	SOLN	1	
HUMULIN 70/30 PEN	SUPN	1	
HUMULIN 70/30	SUSP	1	
HUMULIN N U-100 PEN	SUPN	1	
HUMULIN N	SUSP	1	
HUMULIN R U-500 (CONCENTRATED)	SOLN	1	
HUMULIN R	SOLN	1	
JANUVIA	TABS	2	PA
LANTUS SOLOSTAR	SOPN	1	
LANTUS	SOLN	1	
LEVEMIR FLEXPEN	SOPN	2	ST
LEVEMIR	SOLN	2	ST
<i>metformin hcl er</i>	TB24	1	QL
<i>metformin hcl er</i>	TB24	2	PA
<i>metformin hcl</i>	TABS	1	QL
<i>nateglinide</i>	TABS	2	PA
NOVOLIN N	SUSP	1	
NOVOLIN R RELION	SOLN	1	
NOVOLOG FLEXPEN	SOPN	1	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	SUPN	1	
NOVOLOG MIX 70/30	SUSP	1	
NOVOLOG PENFILL	SOCT	1	
NOVOLOG	SOLN	1	
ONGLYZA	TABS	2	PA
<i>pioglitazone hcl/metformin hcl</i>	TABS	2	PA
<i>pioglitazone hcl</i>	TABS	1	QL
<i>repaglinide</i>	TABS	2	PA
RIOMET	SOLN	2	PA
SYMLINPEN 120	SOPN	2	PA
SYMLINPEN 60	SOPN	2	PA
<i>tolazamide</i>	TABS	1	
TOLBUTAMIDE	TABS	1	
TRADJENTA	TABS	2	PA
VICTOZA	SOPN	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
Antihypoglycemic Agents			
GLUCAGON EMERGENCY KIT	KIT	1	
GLUCOSE	CHEW	1	
Contraceptives			
<i>amethia</i>	TABS	2	PA
BEYAZ	TABS	2	PA
<i>camrese lo</i>	TABS	2	QL PA
<i>chateal</i>	TABS	1	QL
<i>cryselle-28</i>	TABS	1	QL
<i>cyclafem 1/35</i>	TABS	1	QL
ELLA	TABS	1	QL
<i>falmina</i>	TABS	1	QL
GENERESS FE	CHEW	1	QL
<i>gianvi</i>	TABS	1	QL
<i>jolessa</i>	TABS	1	QL
<i>junel fe 1.5/30</i>	TABS	1	QL
<i>junel fe 1/20</i>	TABS	1	QL
<i>kelnor 1/35</i>	TABS	1	QL
<i>leena</i>	TABS	1	QL
<i>levonorgestrel</i>	TABS	1	QL
LO LOESTRIN FE	TABS	2	PA
<i>microgestin 1.5/30</i>	TABS	1	QL
<i>microgestin 1/20</i>	TABS	1	QL
<i>mononessa</i>	TABS	1	QL
<i>myzilra</i>	TABS	1	QL
NATAZIA	TABS	2	PA
NECON 10/11-28	TABS	1	QL
<i>next choice one dose</i>	TABS	1	QL
<i>nora-be</i>	TABS	1	QL
NORINYL 1+50	TABS	1	QL
<i>nortrel 0.5/35 (28)</i>	TABS	1	QL
<i>nortrel 7/7/7</i>	TABS	1	QL
NUVARING	RING	1	QL
OGESTREL	TABS	1	QL
ORTHO TRI-CYCLEN LO	TABS	2	PA
<i>philith</i>	TABS	1	QL
<i>reclipsen</i>	TABS	1	QL
SAFYRAL	TABS	2	PA
<i>syeda</i>	TABS	1	QL
<i>tri-legest fe</i>	TABS	1	QL
<i>tri-sprintec</i>	TABS	1	QL
<i>velivet</i>	TABS	1	QL
<i>viorele</i>	TABS	1	QL
<i>xulane</i>	PTWK	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>zenchent fe</i>	CHEW	1	QL
ZOVIA 1/50E	TABS	1	QL
Estrogens and Antiestrogens			
ALORA	PTTW	1	
CENESTIN	TABS	1	
CLIMARA PRO	PTWK	1	QL
COMBIPATCH	PTTW	1	QL
<i>covaryx hs</i>	TABS	1	
<i>covaryx</i>	TABS	1	
DEPO-ESTRADIOL	OIL	1	QL
ENJUVIA	TABS	2	PA
ESTRACE	CREA	1	
<i>estradiol valerate</i>	OIL	1	QL
<i>estradiol/norethindrone acetate</i>	TABS	1	
<i>estradiol</i>	PTWK	1	QL
<i>estradiol</i>	TABS	1	
ESTRASORB	EMUL	2	PA
ESTRING	RING	2	PA
ESTROGEL	GEL	2	PA
<i>estropipate</i>	TABS	1	
FEMRING	RING	1	
MENEST	TABS	2	PA
MENOSTAR	PTWK	1	QL
PREMARIN	CREA	1	
PREMARIN	TABS	1	
PREMPHASE	TABS	1	
PREMPRO	TABS	1	
<i>raloxifene hydrochloride</i>	TABS	1	
VAGIFEM	TABS	1	
VIVELLE-DOT	PTTW	1	QL
Gonadotropins			
SYNAREL	SOLN	2	PA
Parathyroid			
<i>calcitonin-salmon</i>	SOLN	2	PA
FORTEO	SOLN	2	PA
Pituitary			
<i>desmopressin acetate</i>	TABS	1	QL
<i>desmopressin acetate</i>	SOLN	2	PA
STIMATE	SOLN	2	PA
Progestins			
CRINONE	GEL	1	
ENDOMETRIN	INST	1	
FIRST-PROGESTERONE VGS 100 COMPOUNDING KIT	SUPP	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
FIRST-PROGESTERONE VGS 200 COMPOUNDING KIT	SUPP	1	
FIRST-PROGESTERONE VGS 25 COMPOUNDING KIT	SUPP	1	
FIRST-PROGESTERONE VGS 400 COMPOUNDING KIT	SUPP	1	
FIRST-PROGESTERONE VGS 50 COMPOUNDING KIT	SUPP	1	
<i>medroxyprogesterone acetate</i>	TABS	1	
<i>norethindrone acetate</i>	TABS	1	
<i>progesterone</i>	CAPS	1	QL
Somatotropin Agonists and Antagonists			
GENOTROPIN MINIQUICK	SOLR	2	PA
GENOTROPIN	SOLR	2	PA
HUMATROPE	SOLR	2	PA
NORDITROPIN FLEXPRO	SOLN	2	PA
NORDITROPIN NORDIFLEX PEN	SOLN	2	PA
NUTROPIN AQ NUSPIN 10	SOLN	2	PA
NUTROPIN AQ NUSPIN 20	SOLN	2	PA
NUTROPIN AQ NUSPIN 5	SOLN	2	PA
NUTROPIN	SOLR	2	PA
OMNITROPE	SOLN	2	PA
OMNITROPE	SOLR	2	PA
SAIZEN CLICK.EASY	SOLR	2	PA
SAIZEN	SOLR	2	PA
SEROSTIM	SOLR	2	PA
TEV-TROPIN	SOLR	2	PA
ZORBTIVE	SOLR	2	PA
Thyroid and Antithyroid Agents			
ARMOUR THYROID	TABS	1	
<i>levothyroxine sodium</i>	TABS	1	
<i>liothyronine sodium</i>	TABS	1	
<i>methimazole</i>	TABS	1	
<i>np thyroid 30</i>	TABS	1	
<i>np thyroid 60</i>	TABS	1	
<i>np thyroid 90</i>	TABS	1	
<i>propylthiouracil</i>	TABS	1	
Miscellaneous Therapeutic Agents			
5-alpha-Reductase Inhibitors			
AVODART	CAPS	2	PA
<i>finasteride</i>	TABS	1	QL
Alcohol Deterrents			
<i>disulfiram</i>	TABS	1	
Antidotes			



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>leucovorin calcium</i>	TABS	2	PA
Antigout Agents			
<i>allopurinol</i>	TABS	1	QL
COLCRYS	TABS	1	QL
ULORIC	TABS	2	PA
Bone Resorption Inhibitors			
ACTONEL	TABS	2	PA
<i>alendronate sodium</i>	TABS	1	QL
ALENDRONATE SODIUM	SOLN	2	PA
<i>alendronate sodium</i>	TABS	2	PA
AELVIA	TBEC	2	PA
BINOSTO	TBEF	1	QL
ETIDRONATE DISODIUM	TABS	2	PA
FOSAMAX PLUS D	TABS	2	PA
<i>ibandronate sodium</i>	TABS	2	QL ST
<i>risedronate sodium</i>	TABS	2	PA
SKELID	TABS	2	PA
Cariostatic Agents			
<i>denta 5000 plus</i>	CREA	1	
<i>fluor-a-day</i>	SOLN	1	
<i>fluoridex daily defense</i>	GEL	1	
<i>floritab</i>	CHEW	1	
FLURA-DROPS	SOLN	1	
LOZI-FLUR	LOZG	1	
<i>Iudent</i>	CHEW	1	
<i>neutral sodium fluoride</i>	SOLN	1	
PREVIDENT 5000 BOOSTER PLUS	PSTE	1	
<i>sodium fluoride</i>	CHEW	1	
<i>sodium fluoride</i>	SOLN	1	
Complement Inhibitors			
FIRAZYR	SOLN	2	PA
Disease-modifying Antirheumatic Drugs			
ENBREL SURECLICK	SOAJ	2	PA
ENBREL	KIT	2	PA
ENBREL	SOSY	2	PA
HUMIRA PEN	KIT	2	PA
HUMIRA PEN-PSORIASIS STARTER	KIT	2	PA
HUMIRA	KIT	2	PA
<i>leflunomide</i>	TABS	1	QL
Immunomodulatory Agents			
ACTIMMUNE	SOLN	2	PA
AVONEX PEN	KIT	2	PA
AVONEX	KIT	2	PA
BETASERON	KIT	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
COPAXONE	KIT	2	PA
EXTAVIA	KIT	2	PA
GILENYA	CAPS	2	PA
REBIF REBIDOSE TITRATION PACK	SOLN	2	PA
REBIF REBIDOSE	SOLN	2	PA
REBIF TITRATION PACK	SOLN	2	PA
REBIF	SOLN	2	PA
THALOMID	CAPS	1	
Immunosuppressive Agents			
<i>azathioprine</i>	TABS	1	QL
CELLCEPT	SUSR	2	PA
<i>cyclosporine modified</i>	CAPS	1	QL
<i>cyclosporine modified</i>	SOLN	2	PA
<i>cyclosporine</i>	CAPS	2	PA
<i>hecoria</i>	CAPS	1	QL
<i>mycophenolate mofetil</i>	CAPS	1	QL
<i>mycophenolate mofetil</i>	TABS	1	QL
<i>mycophenolic acid dr</i>	TBEC	2	PA
RAPAMUNE	SOLN	2	PA
SANDIMMUNE	SOLN	2	PA
<i>sirolimus</i>	TABS	2	PA
<i>tacrolimus</i>	CAPS	1	QL
ZORTRESS	TABS	2	PA
Other Miscellaneous Therapeutic Agents			
AMPYRA	TB12	2	PA
CARNITOR SF	SOLN	1	
<i>fish oil</i>	CAPS	1	QL
<i>levocarnitine</i>	SOLN	1	
ORFADIN	CAPS	2	PA
SENSIPAR	TABS	1	QL
ZAVESCA	CAPS	2	PA
Protective Agents			
MESNEX	TABS	2	PA
Oxytocics			
<i>methylergonovine maleate</i>	TABS	1	QL
Respiratory Tract Agents			
Anti-inflammatory Agents			
<i>cromolyn sodium</i>	CONC	1	
<i>cromolyn sodium</i>	NEBU	1	
<i>montelukast sodium</i>	CHEW	1	QL
<i>montelukast sodium</i>	PACK	1	QL
<i>montelukast sodium</i>	TABS	1	QL
ZYFLO CR	TB12	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
ZYFLO	TABS	2	PA
Antitussives			
<i>benzonatate</i>	CAPS	1	
<i>cheratussin dac</i>	SOLN	1	
<i>dextromethorphan polistirex</i>	LQCR	1	
<i>diabetic tussin maximum strength</i>	LIQD	1	
<i>guaifenesin/codeine</i>	SOLN	1	
<i>guaifenesin-dm</i>	SYRP	1	
<i>neotuss</i>	LIQD	1	
<i>pedia relief cough/cold</i>	LIQD	1	
PROMETHAZINE VC/CODEINE	SYRP	1	
<i>promethazine/codeine</i>	SYRP	1	
<i>promethazine-dm</i>	SYRP	1	
REZIRA	SOLN	2	PA
Expectorants			
<i>guaifenesin er</i>	TB12	1	
<i>guaifenesin</i>	TABS	1	
MUCINEX D	TB12	1	
<i>tussin</i>	SYRP	1	
Mucolytic Agents			
PULMOZYME	SOLN	2	PA
<i>sodium chloride</i>	NEBU	1	
Phosphodiesterase Type 4 Inhibitors			
DALIRESP	TABS	2	PA
Vasodilating Agents			
ADEMPAS	TABS	2	PA
LETAIRIS	TABS	2	PA
TYVASO REFILL	SOLN	2	PA
TYVASO STARTER	SOLN	2	PA
Skin and Mucous Membrane Preparations			
Anti-infectives			
ABREVA	CREA	1	QL
<i>acne medication 5</i>	GEL	1	
<i>acyclovir</i>	OINT	2	PA
ALCOHOL PREPS	MISC	1	
AVC	CREA	1	
AZOLEN TINCTURE	SOLN	1	
<i>bacitracin zinc</i>	OINT	1	
<i>bacitracin/neomycin/polymyxin</i>	OINT	1	
<i>bacitracin</i>	OINT	1	
<i>benzoyl peroxide wash</i>	LIQD	1	
<i>benzoyl peroxide</i>	GEL	1	QL
<i>bp wash</i>	LIQD	1	
CENTANY	OINT	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>ciclopirox olamine</i>	CREA	1	QL
CLEOCIN	SUPP	1	
<i>clindamycin phosphate</i>	CREA	1	
<i>clindamycin phosphate</i>	GEL	1	
<i>clindamycin phosphate</i>	LOTN	1	
<i>clindamycin phosphate</i>	SOLN	1	
<i>clindamycin phosphate</i>	SWAB	1	
<i>clindamycin phosphate</i>	FOAM	2	PA
<i>clotrimazole/betamethasone dipropionate</i>	CREA	1	QL
<i>clotrimazole</i>	CREA	1	QL
<i>clotrimazole</i>	SOLN	1	
<i>clotrimazole</i>	TROC	1	
<i>double antibiotic</i>	OINT	1	
<i>econazole nitrate</i>	CREA	1	QL
<i>erythromycin/benzoyl peroxide</i>	GEL	2	PA
<i>erythromycin</i>	GEL	1	
<i>erythromycin</i>	SOLN	1	
GYNAZOLE-1	CREA	1	
GYNE-LOTRIMIN 3	CREA	1	
<i>ketoconazole</i>	CREA	1	
<i>ketoconazole</i>	SHAM	1	
<i>ketodan</i>	FOAM	2	PA
LAVOCLEN-4 CREAMY WASH	LIQD	1	
<i>lice killing maximum strength</i>	SHAM	1	
<i>lice treatment creme rinse</i>	LIQD	1	
<i>lotrimin af deodorant powder</i>	AERP	1	
<i>lotrimin af</i>	POWD	1	
<i>malathion</i>	LOTN	2	PA
<i>metronidazole vaginal</i>	GEL	1	
<i>metronidazole</i>	CREA	1	QL
<i>metronidazole</i>	GEL	1	QL
<i>metronidazole</i>	LOTN	1	QL
<i>metronidazole</i>	GEL	2	QL ST
<i>miconazole 3 combo pack</i>	KIT	1	
MICONAZOLE 3	SUPP	1	
<i>miconazole 7</i>	CREA	1	
<i>miconazole 7</i>	SUPP	1	
<i>miconazole nitrate</i>	CREA	1	
NORITATE	CREA	2	PA
<i>nystatin</i>	CREA	1	QL
<i>nystatin</i>	OINT	1	QL
<i>nystatin</i>	POWD	1	QL
PACNEX MX	LIQD	1	
<i>permethrin</i>	CREA	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>permethrin</i>	LOTN	1	
<i>pr benzoyl peroxide wash</i>	LIQD	1	
RELAGARD	GEL	1	
<i>selenium sulfide</i>	LOTN	1	
SELENIUM SULFIDE	SHAM	2	PA
SPINOSAD	SUSP	2	PA
<i>ssd</i>	CREA	1	
<i>sulfacetamide sodium</i>	SUSP	2	PA
<i>terbinafine hcl</i>	CREA	1	QL
<i>terconazole</i>	CREA	1	
<i>terconazole</i>	SUPP	1	
<i>tioconazole-1</i>	OINT	1	
<i>tolnaftate</i>	CREA	1	QL
XOLEGEL	GEL	2	PA
ZOVIRAX	CREA	2	PA
Anti-inflammatory Agents			
<i>anucort-hc</i>	SUPP	1	
ANUSOL-HC	CREA	1	
<i>augmented betamethasone dipropionate</i>	CREA	1	QL
<i>augmented betamethasone dipropionate</i>	GEL	1	QL
<i>augmented betamethasone dipropionate</i>	LOTN	1	QL
<i>augmented betamethasone dipropionate</i>	OINT	1	QL
<i>betamethasone dipropionate</i>	LOTN	1	QL
<i>betamethasone dipropionate</i>	OINT	1	QL
<i>betamethasone valerate</i>	CREA	1	QL
<i>betamethasone valerate</i>	LOTN	1	QL
CORTIFOAM	FOAM	1	
<i>desoximetasone</i>	CREA	1	QL
<i>fluocinolone acetonide</i>	CREA	1	QL
<i>fluocinonide</i>	GEL	1	QL
<i>fluocinonide</i>	OINT	1	QL
<i>fluocinonide</i>	SOLN	1	QL
<i>fluticasone propionate</i>	CREA	1	QL
<i>gnp hydro-lotion</i>	LOTN	1	
<i>halobetasol propionate</i>	OINT	1	QL
<i>hydrocortisone</i>	CREA	1	QL
<i>hydrocortisone</i>	ENEM	1	
<i>hydrocortisone</i>	LOTN	1	QL
<i>hydrocortisone</i>	OINT	1	QL
<i>mometasone furoate</i>	CREA	1	QL
<i>mometasone furoate</i>	OINT	1	QL
<i>mometasone furoate</i>	SOLN	1	QL
<i>nystatin/triamcinolone</i>	CREA	1	QL
<i>nystatin/triamcinolone</i>	OINT	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>proctozone-hc</i>	CREA	1	
<i>triamcinolone acetonide</i>	CREA	1	QL
<i>triamcinolone acetonide</i>	LOTN	1	QL
<i>triamcinolone acetonide</i>	OINT	1	QL
<i>triamcinolone acetonide</i>	PSTE	1	
TRIANEX	OINT	1	QL
Antipruritics and Local Anesthetics			
<i>benadryl itch stopping</i>	GEL	1	
<i>lidocaine hcl jelly</i>	GEL	1	QL
<i>lidocaine/prilocaine</i>	CREA	1	
<i>lidocaine</i>	OINT	1	QL
<i>phenazopyridine hcl</i>	TABS	1	
PROCTOFOAM HC	FOAM	1	
<i>vagicream</i>	CREA	1	
VAGISIL MAXIMUM STRENGTH	CREA	1	
Astringents			
ALUMINUM ACETATE	SOLN	1	
<i>hypercare</i>	SOLN	1	QL
Cell Stimulants and Proliferants			
<i>tretinoin</i>	CREA	1	QL
<i>tretinoin</i>	GEL	1	QL
Emollients, Demulcents, and Protectants			
<i>ammonium lactate</i>	CREA	1	
<i>ammonium lactate</i>	LOTN	1	
BENGAY ULTRA STRENGTH	CREA	1	
<i>hydrophor</i>	OINT	1	
<i>lac-hydrin five</i>	LOTN	1	
<i>lactic acid</i>	LOTN	1	
<i>minerin</i>	CREA	1	
Keratolytic Agents			
<i>avar cleanser</i>	EMUL	2	PA
<i>bp 10-1</i>	EMUL	2	PA
<i>prascion fc</i>	PADS	2	PA
<i>ra wart remover</i>	SOLN	1	QL
<i>salicylic acid</i>	SOLN	1	QL
<i>se 10-5 ss</i>	CREA	2	PA
<i>sodium sulfacetamide/sulfur wash</i>	LIQD	2	PA
<i>sodium sulfacetamide/sulfur</i>	CREA	2	PA
<i>sodium sulfacetamide/sulfur</i>	FOAM	2	PA
<i>sodium sulfacetamide/sulfur</i>	LIQD	2	PA
<i>sodium sulfacetamide/sulfur</i>	LOTN	2	PA
<i>sodium sulfacetamide/sulfur</i>	PADS	2	PA
<i>sodium sulfacetamide/sulfur</i>	SUSP	2	PA
SSS 10-4	FOAM	2	PA



Drug Name	Dosage Form	Drug Tier	Requirements / Limits		
<i>urea</i>	CREA	1	QL		
Keratoplastic Agents					
COAL TAR	SOLN	1			
Skin and Mucous Membrane Agents, Misc					
<i>acitretin</i>	CAPS	2		PA	
<i>adapalene</i>	CREA	2	QL		ST
<i>adapalene</i>	GEL	2	QL	PA	ST
AZELEX	CREA	2		PA	
BEDSIDE-CARE PERINEAL WASH	LIQD	1			
<i>calcipotriene</i>	CREA	2	QL		ST
<i>calcipotriene</i>	OINT	2	QL		ST
CALCITRIOL	OINT	2	QL		ST
<i>capsaicin hp</i>	CREA	1	QL		
CONDYLOX	GEL	1			
DIFFERIN	LOTN	2		PA	
ELIDEL	CREA	2	QL		ST
<i>fluorouracil</i>	CREA	1	QL		
<i>imiquimod</i>	CREA	1	QL		
<i>k-y lubricating jelly</i>	GEL	1			
PERIFRESH PERINEAL CLEANSER	LIQD	1			
<i>podofilox</i>	SOLN	1			
PROSHIELD SPRAY CLEANSER	LIQD	1			
PROTOPIC	OINT	2	QL		ST
RESTORE SILVER DRESSING 4"X4" NON-ADHESIVE	PADS	1			
RESTORE SILVER DRESSING ROPE 12"	MISC	1			
SALONPAS	PTCH	1	QL		
TAZORAC	CREA	2		PA	
TAZORAC	GEL	2		PA	
<i>trixaicin hp</i>	CREA	1			
TRIXAICIN	CREA	1			
Smooth Muscle Relaxants					
Genitourinary Smooth Muscle Relaxants					
ENABLEX	TB24	2		PA	
GELNIQUE	GEL	2		PA	
<i>oxybutynin chloride er</i>	TB24	2	QL		ST
<i>oxybutynin chloride</i>	SYRP	1			
<i>oxybutynin chloride</i>	TABS	1			
<i>tolterodine tartrate er</i>	CP24	2		PA	
<i>tolterodine tartrate</i>	TABS	2		PA	
VESICARE	TABS	2		PA	
Respiratory Smooth Muscle Relaxants					
<i>theophylline cr</i>	TB12	1			
<i>theophylline er</i>	TB12	1			



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
<i>theophylline er</i>	TB24	1	
<i>theophylline</i>	SOLN	1	
Vitamins			
Multivitamin Preparations			
AQUADEKS	CHEW	1	
ATABEX EC	TBEC	1	QL
BAL-CARE DHA ESSENTIAL	MISC	1	QL
BAL-CARE DHA	MISC	1	QL
CAVAN-EC SOD DHA	MISC	1	QL
<i>centrum kids complete</i>	CHEW	1	
CENTRUM SILVER	TABS	1	
CENTRUM SPECIALIST PRENATAL	MISC	1	QL
<i>chewable vite childrens</i>	CHEW	1	
<i>childrens chewable vitamins/iron</i>	CHEW	1	
CITRANATAL 90 DHA	MISC	1	QL
CITRANATAL B-CALM	MISC	1	
CITRANATAL DHA	MISC	1	QL
CITRANATAL HARMONY	CAPS	1	QL
COMPLETE NATAL DHA	MISC	1	QL
COMPLETE PRENATAL MULTIVITAMIN/PRENATAL DHA	MISC	1	QL
COMPLETENATE	CHEW	1	QL
COMPLETE-RF PRENATAL	TABS	1	QL
<i>daily vite</i>	TABS	1	
<i>dialyvite 800/ultra d</i>	TABS	1	
<i>dialyvite 800</i>	TABS	1	QL
<i>dialyvite</i>	TABS	1	
DUET DHA 400	MISC	1	QL
DUET DHA 400EC	MISC	1	QL
DUET DHA 430	MISC	1	QL
DUET DHA 430EC	MISC	1	QL
DUET DHA BALANCED	MISC	1	QL
ELITE OB WITH DHA	CAPS	1	QL
ELITE-OB 400	CAPS	1	QL
ELITE-OB	TABS	1	QL
EXTRA-VIRT PLUS DHA	CAPS	1	
EZFE FORTE	CAPS	1	QL
<i>flintstones complete</i>	CHEW	1	
FOCALGIN-B	TABS	1	QL
FOLBECAL	TABS	1	QL
FOLCAPS OMEGA 3	CAPS	1	QL
FOLIVANE-OB	CAPS	1	QL
FOLIVANE-PRX DHA NF	CAPS	1	QL
GESTICARE DHA	MISC	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
HEMENATAL OB + DHA	MISC	1	QL
HEMENATAL OB	TABS	1	QL
INATAL ULTRA	TABS	1	QL
KPN PRENATAL	TABS	1	QL
L-METHYLFOLATE PNV DHA	CAPS	1	
MACNATAL CN DHA	CAPS	1	QL
MARNATAL-F	CAPS	1	QL
<i>multi vitamin/fluoride</i>	CHEW	1	
<i>multi-delyn</i>	LIQD	1	
<i>multivitamin with fluoride</i>	CHEW	1	
<i>multi-vitamin/fluoride/iron</i>	SOLN	1	
<i>multivitamin/fluoride</i>	CHEW	1	
<i>multi-vitamin/fluoride</i>	CHEW	1	
<i>multi-vitamin/fluoride</i>	SOLN	1	
<i>mvc-fluoride</i>	CHEW	1	
MYNATAL ULTRACAPLET	TABS	1	QL
MYNATAL	CAPS	1	QL
MYNATAL-Z	TABS	1	QL
MYNATE 90 PLUS	TBCR	1	QL
<i>mynephrocaps</i>	CAPS	1	
NATACHEW	CHEW	1	QL
NATAFORT	TABS	1	QL
NATALVIRT CA	MISC	1	QL
NATALVIT	TABS	1	QL
NATELLE ONE	CAPS	1	QL
NATELLE-EZ	TABS	1	QL
<i>nephronex</i>	TABS	1	
NESTABS DHA	MISC	1	QL
NESTABS	TABS	1	QL
NEXA PLUS	CAPS	1	QL
OB COMPLETE 400	CAPS	1	QL
OB COMPLETE ONE	CAPS	1	QL
OB COMPLETE PETITE	CAPS	1	QL
OB COMPLETE PREMIER	TABS	1	QL
OB COMPLETE/DHA	CAPS	1	QL
OB COMPLETE	CHEW	1	QL
OBSTETRIX DHA	MISC	1	QL
OBSTETRIX EC	TABS	1	QL
OBTREX	TABS	1	
O-CAL FA	TABS	1	QL
O-CAL PRENATAL	TABS	1	QL
OCUVITE LUTEIN	CAPS	1	
<i>ocuvite</i>	TABS	1	
<i>one daily plus minerals</i>	TABS	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
ONE-A-DAY WOMENS PRENATAL	MISC	1	QL
PAIRE OB	MISC	1	
PERRY PRENATAL	CAPS	1	QL
PNV FOLIC ACID + IRON MULTIVITAMIN	TABS	1	
PNV-DHA+DOCUSATE	CAPS	1	QL
PNV-OMEGA	CAPS	1	QL
<i>poly vitamin</i>	CHEW	1	
POLY-VI-SOL/IRON	SOLN	1	
POLY-VI-SOL	SOLN	1	
<i>poly-vitamin drops</i>	SOLN	1	QL
<i>poly-vitamin/iron drops</i>	SOLN	1	
<i>polyvitamin/iron</i>	CHEW	1	
<i>polyvitamin/iron</i>	SOLN	1	
<i>polyvitamin</i>	SOLN	1	
PR NATAL 400 EC	MISC	1	QL
PR NATAL 400	MISC	1	QL
PR NATAL 430 EC	MISC	1	QL
PR NATAL 430	MISC	1	QL
PREFERAOB ONE	CAPS	1	QL
PRENA1 CHEW/QUATREFOLIC	CHEW	1	QL
PRENA1/QUATREFOLIC	CAPS	1	QL
PRENAISSANCE BALANCE	CAPS	1	QL
PRENAPLUS	TABS	1	
PRENATA	CHEW	1	QL
PRENATABS RX	TABS	1	
PRENATAL 1	CAPS	1	QL
PRENATAL 19	CHEW	1	QL
PRENATAL 19	TABS	1	QL
PRENATAL FORMULA A-FREE	TABS	1	QL
PRENATAL LOW IRON	TABS	1	QL
PRENATAL MULTI +DHA	CAPS	1	QL
PRENATAL MULTIVITAMIN + DHA	MISC	1	QL
PRENATAL PLUS IRON	TABS	1	QL
PRENATAL VITAMINS PLUS	TABS	1	
PRENATAL VITAMINS	TABS	1	QL
PRENATAL	TABS	1	QL
PRENATAL-U	CAPS	1	QL
PRENATE DHA	CAPS	1	QL
PRENATE ELITE	TABS	1	QL
PRENATE ESSENTIAL	CAPS	1	QL
PRENATE MINI	CAPS	1	QL
PRENATE	CHEW	1	QL
PREQUE 10	TABS	1	
PROTECT PLUS	LIQD	1	



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
PROTECTNATAL	TBEC	1	QL
PUREFE OB PLUS	CAPS	1	QL
RELNATE DHA	CAPS	1	QL
<i>rena-vite rx</i>	TABS	1	
SELECT-OB	CHEW	1	QL
SE-TAN DHA	CAPS	1	QL
STROVITE FORTE	TABS	1	
STUART PRENATAL + DHA	MISC	1	QL
TARON-BC	MISC	1	QL
TARON-C DHA	CAPS	1	QL
TARON-PREX	CAPS	1	QL
<i>thera</i>	TABS	1	
<i>thera-m</i>	TABS	1	
THERANATAL COMPLETE	MISC	1	QL
<i>theratrum complete</i>	TABS	1	
THEREMS-M	TABS	1	
TRI RX	TABS	1	QL
TRIADVANCE	TABS	1	
TRICARE PRENATAL DHA ONE	CAPS	1	QL
TRINATAL GT	TABS	1	QL
TRINATE	TABS	1	QL
TRIVEEN-ONE	CAPS	1	QL
TRIVEEN-PRX RNF	CAPS	1	QL
TRIVEEN-TEN	TABS	1	QL
TRI-VI-SOL/IRON	SOLN	1	
TRI-VIT/FLUORIDE/IRON	SOLN	1	
<i>tri-vit/fluoride</i>	SOLN	1	
<i>tri-vitamin/fluoride</i>	SOLN	1	
<i>tri-vitamin</i>	SOLN	1	
ULTIMATECARE ONE NF	CAPS	1	QL
VENATAL-FA	TABS	1	QL
<i>vic-forte</i>	CAPS	1	
VINATE AZ	TABS	1	QL
VINATE CALCIUM	TABS	1	QL
VINATE CARE	CHEW	1	
VINATE IC	CAPS	1	QL
VINATE II	TABS	1	
VINATE M	TABS	1	QL
VINATE ONE	TABS	1	QL
VINATE PN CARE	TABS	1	QL
VIRT-SELECT	CAPS	1	QL
<i>vita-bee/c</i>	TABS	1	
VITAFOL-OB	TABS	1	QL
VITAMEDMD PLUS RX/QUATRE FOLIC	MISC	1	QL



Drug Name	Dosage Form	Drug Tier	Requirements / Limits
VITASPIRE	TABS	1	QL
VP-ERA OB PLUS	TABS	1	QL
VP-PNV-DHA	CAPS	1	QL
ZATEAN-CH	CAPS	1	
ZATEAN-PN DHA	CAPS	1	QL
ZATEAN-PN	TABS	1	QL
ZINGIBER	TABS	1	QL
Vitamin A			
<i>vitamin a</i>	CAPS	1	
Vitamin B Complex			
B-1	TABS	1	
<i>cyanocobalamin</i>	SOLN	1	QL
<i>folic acid</i>	TABS	1	
<i>niacin tr</i>	TBCR	1	QL
<i>niacin</i>	TABS	1	
NIACOR	TABS	1	
<i>pyridoxine hcl</i>	TABS	1	
<i>vitamin b-1</i>	TABS	1	
<i>vitamin b-12 cr</i>	TBCR	1	
<i>vitamin b-12</i>	TABS	1	QL
Vitamin C			
<i>ascorbic acid</i>	TABS	1	
<i>c-500</i>	CHEW	1	
<i>vitamin c</i>	TABS	1	
Vitamin D			
<i>calcitriol</i>	CAPS	1	QL
<i>calcitriol</i>	SOLN	2	PA
<i>d 400</i>	CHEW	1	
<i>d3</i>	CAPS	1	
<i>doxercalciferol</i>	CAPS	2	QL ST
<i>vitamin d-1000</i>	TABS	1	
<i>vitamin d</i>	CAPS	1	
<i>vitamin d</i>	TABS	1	
VITAMIN D3 400	CAPS	1	
<i>vitamin d3</i>	CAPS	1	
<i>vitamin d3</i>	TABS	1	
Vitamin K Activity			
MEPHYTON	TABS	1	