HIGHMARK WHOLECARE

Updated: 4/2025
PARP Approved: 6/2025

# QUANTITY EXCEPTION
# PRIOR AUTHORIZATION FORM

Please complete and fax all requested information below including any progress notes, laboratory test results, or chart documentation as applicable to Highmark Wholecare Pharmacy Services. **FAX:** (888) 245-2049
If needed, you may call to speak to a Pharmacy Services Representative. **PHONE**: (800) 392-1147 Mon – Fri 8:30am to 5:00pm

## PROVIDER INFORMATION

| | |
|---|---|
| Requesting Provider: | Provider NPI: |
| Provider Specialty: | Office Contact: |
| State license #: | Office NPI: |
| Office Address: | Office Phone: |
| | Office Fax: |

## MEMBER INFORMATION

| | | |
|---|---|---|
| Member Name: | DOB: | |
| Member ID: | Member weight: | Height: |

## REQUESTED DRUG INFORMATION

| | | |
|---|---|---|
| Medication: | Strength: | |
| Directions: | Quantity: | Refills: |
| Is the member currently receiving requested medication? ☐ Yes ☐ No | Date Medication Initiated: | |

## Billing Information

This medication will be billed: ☐ at a pharmacy **OR** ☐ medically, JCODE:_____

Place of Service: ☐ Hospital ☐ Provider's office ☐ Member's home ☐ Other

## Place of Service Information

| | |
|---|---|
| Name: | NPI: |
| Address: | Phone: |

## MEDICAL HISTORY (Complete for ALL requests)

| | |
|---|---|
| Diagnosis: | ICD Code: |

☐ **FOR ONCOLOGY USE**

Provide clinical rationale for the requested drug and quantity (attach any supporting medical documentation):

_____

_____

## CURRENT or PREVIOUS THERAPY

| Medication Name | Strength/ Frequency | Dates of Therapy | Status (Discontinued & Why/Current) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

## SUPPORTING INFORMATION or CLINICAL RATIONALE

| |
|---|
| |
| |
| |

| Prescribing Provider Signature | Date |
|---|---|
| | |

Prior Authorization Criteria

**Quantity Limits**

All requests for quantity exceptions require a prior authorization and will be screened for medical necessity and appropriateness using the criteria listed below.
The following criteria will be taken into consideration when reviewing requests:

- The requested dose falls within approved maximum dosing guidelines set forth by the FDA.
- The requested dose is the optimal dosage form for the member or if half tablets, titration or more frequent dosing is necessary.
- There are other therapeutic alternatives that are available and may be more appropriate.
- For an opioid analgesic, other alternatives have been tried and if the member may be more appropriately pain controlled on a long acting analgesic.
- For the following maintenance inhalers, a minimum of 1 inhaler must be filled for a 30 day supply: Advair HFA 45/21, 115/21, 230/21, Asmanex HFA 100, 200 mcg, Dulera 5/100, 5/200mcg, Flovent Diskus 100, 250mcg, Flovent HFA 110mcg and 220mcg, Symbicort 80/4.5, 160/4.5 (e.g. 1 inhaler for 60-day supply will not be permitted)
- Recipient's physician provides reference from a peer-reviewed medical literature/journal for use of a higher dose.

When criteria are not met, the request will be forwarded to a Medical Director for review. The physician reviewer must override criteria when, in their professional judgment, the requested medication is medically necessary.

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Abilify | aripiprazole | 30 tablets per month |
| Abilify Asimtufii 720 and 960mg | Aripiprazole | 1 syringe per 56 days |
| Abilify Maintena | Aripiprazole | 1 injection per 28 days |
| Abilify MyCite | Aripiprazole | 30 tabs per month |
| Abilify ODT | Aripiprazole | 60 tabs per month |
| Abilify 1mg/1ml solution | Aripiprazole | 750 ml per month |
| ABREVA 10% CREAM | DOCASONAL | 1 tube per 30 days |
| Absorica | isotretinoin | 60 capsules per 30 days |
| ABSTRAL SUBLINGUAL TABLET | FENTANYL CITRATE | 120 tablets per 30 days |
| Accolate | zafirlukast | 60 tablets per month |
| Accuneb inhalation solution | albuterol | 120 vials (360mL) per month |
| ACCUPRIL TABLET | QUINAPRIL | 60 tablets per 30 days |
| Accuretic 10/12.5, 20/25 MG tab | Quinapril/HCTZ | 30 tablets per 30 days |
| Accuretic 20 MG/12.5 MG tab | Quinapril/HCTZ | 60 tablets per 30 days |
| ACEON TABLET | PERINDOPRIL | 60 tablets per 30 days |
| Acetaminophen 100 MG/ML liquid | ACETAMINOPHEN | 240 mL per 30 days |
| Acetaminophen 160 MG/5 ML liquid | ACETAMINOPHEN | 2250 mL per 30 days |
| Acetaminophen 320 MG/10 ML, 320 MG/10.15 ML, 650 MG/20.3 ML LIQUID | ACETAMINOPHEN | 3000 mL per 30 days |
| Acetaminophen 500 MG/15 ML LIQUID | ACETAMINOPHEN | 2700 mL per 30 days |
| Acetaminophen 500 MG/5 ML LIQUID | ACETAMINOPHEN | 900 mL per 30 days |
| Acetaminophen 640 MG/20 ML LIQUID | ACETAMINOPHEN | 3750 mL per 30 days |
| Acetaminophen CAP/TAB/ SUPPOSITORY 500 MG, 650 MG | ACETAMINOPHEN | 180 tab/cap/suppositories per 30 days |
| Acetaminophen TAB/CAP/ SUPPOSITORY 120 MG, 160MG | ACETAMINOPHEN | 600 tab/cap/suppositories per 30 days |
| Acetaminophen TAB/CAP/SUPPOSITORY 325 MG | ACETAMINOPHEN | 300 tab/cap/suppositories per 30 days |
| Acetaminophen TAB/CAP/SUPPOSITORY 80 MG | ACETAMINOPHEN | 900 tab/cap/suppositories per 30 days |
| Acetazolamide 125 and 250 mg tab | Acetazolamide | 120 tablets per 30 days |
| Acetazolamide 500 mg ER cap | Acetazolamide | 60 capsules per 30 days |
| ACIPHEX 20 MG TABLET EC | RABEPRAZOLE | 60 tablets per 30 days |
| ACIPHEX 10 MG SPRINKLE DR CAP | RABEPRAZOLE | 60 capsules per 30 days |
| ACIPHEX 5 MG SPRINKLE DR CAP | RABEPRAZOLE | 30 capsules per 30 days |
| Aclovate 0.05% cream, ointment | ALCLOMETASONE | 120g per 30 days |
| Acnefree Severe Acne Clearing System | BENZOYL PEROXIDE | 1 kit per 30 days |
| ACTEMRA 162 MG/0.9 ML SYRINGE | TOCILIZUMAB | 4 syringes per 28 days |
| Actemra vial 80 MG/4 ML, 200 MG/10 ML, 400 MG/20 ML | TOCILIZUMAB | 45 mL per 30 days |
| ACTIGALL 300 MG CAPSULE | URSODIOL | 120 capsules per 30 days |
| ACTIQ LOZENGE | FENTANYL CITRATE | 120 lozenges per 30 days |
| ACTONEL 150 MG TABLET | RISEDRONATE | 1 tablet per 28 days |
| ACTONEL 35 MG TABLET | RISEDRONATE | 4 tablets per 28 days |
| ACTONEL TABLET 5 MG, 30 MG | RISEDRONATE | 30 tablets per 30 days |
| ActoPlus Met | pioglitazone/metformin | 90 tablets per month |
| Actos | pioglitazone | 30 tablets per month |
| ADALAT CC 60 MG TABLET | NIFEDIPINE | 60 tablets per 30 days |

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|---|---|---|
| ADALAT CC TABLET 30 MG, 90 MG | NIFEDIPINE | 30 tablets per 30 days |
| Adalimumab-fkjp 20 mg | Adalimumab-fkjp | JIA (15-30 kg): 2 syringes per 28 days<br>Ped Crohns (<40kg): 6 syringes for the first 28 days, then 2 syringes per 28 days thereafter |
| Adalimumab-fkjp 40mg | Adalimumab-fkjp | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter<br>HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Adalimumab-fkjp Starter Pack | Adalimumab-fkjp | 1 pack per 6 months |
| Adbry | Tralokinumab | 6 prefilled syringes (6 ml) per 28 days |
| Adcirca 20 mg tab | tadalafil | 60 tablets per month |
| Adderall | amphetamine salt combination | 60 tablets per month |
| Adderall XR 20mg, 25mg, 30mg | amphetamine salt combination | 60 capsules per month |
| Adderall XR 5mg, 10mg, 15mg | amphetamine salt combination | 30 capsules per month |
| ADEMPAS TABLET | RIOCIGUAT | 90 tablets per 30 days |
| Adipex-P 37.5mg capsule/tablet | Phentermine hydrochloride | 30 capsules/tablets per 30 days |
| ADLYXIN | LIXISENATIDE | 2 pens per 28 days |
| Admelog Solostar pen | insulin lispro | 30 ml per month |
| Admelog vial | insulin lispro | 30 ml per month |
| Advair HFA/Advair Diskus | fluticasone propionate/salmeterol | 1 inhaler or diskus per month |
| ADZENYS ER 1.25 MG/ML SUSPENSION | AMPHETAMINE | 450 mL per 30 days |
| ADZENYS XR-ODT TABLET | AMPHETAMINE | 30 tablets per 30 days |
| Aerospan | flunisolide | 2 inhalers per month |
| AFINITOR TABLET | EVEROLIMUS | 30 tablets per 30 days |
| AGGRENOX 25-200 MG CAPSULE | ASPIRIN/DIPYRIDAMOLE | 60 capsules per 30 days |
| Aimovig | Erenumab | 2mL/30 days |
| Airduo Respiclick | fluticasone propionate/salmeterol | 1 inhaler per month |
| Airsupra Inhalation Aerosol 90-80 mcg/act | Albuterol-Budesonide | 32.1 gm (3 canisters) per 30 days |
| Ajovy | fremanezumab-vfrm | 3 syringes per 90 days |
| Akeega Tablet 50-500mg | Niraparib-Abiraterone | 60 tablets per 30 days |
| Akeega Tablet 100-500mg | Niraparib-Abiraterone | 60 tablets per 30 days |
| AKYNZEO 300/0.5 MG CAPSULE | Netupitant/palonosetron | 30 capsules per 30 days |
| Alahist DM Liquid 5-12.5-10mg/5ml | Phenylephrine-Pheniramine-DM | 473ml per 8 days |
| ALAVERT 10 MG TABLET | LORATADINE | 30 tablets per 30 days |
| ALAVERT CHILDREN'S SYRUP | LORATADINE | 300 mL per 30 days |
| ALAVERT-D 12 HR | Pseudoephedrine/loratadine | 60 tablets per 30 days |
| ALBENZA 200 MG TABLET | ALBENDAZOLE | 120 tablets per 30 days |
| Albuterol 2.5mg/0.5ml | albuterol inhalation soln | 160ml per month |
| Albuterol 2.5mg/3ml | albuterol inhalation soln | 375ml per month |
| Albuterol 5mg/ml | albuterol inhalation soln | 80ml per month |
| Albuterol HFA | albuterol | 2 inhalers per 30 days. |

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|---|---|---|
| Alcohol Swabs | Alcohol swabs | 200 per 30 days |
| ALECENSA 150 MG CAPSULE | ALECTINIB HCL | 240 capsules per 30 days |
| ALINIA 100 MG/5 ML SUSPENSION | NITAZOXANIDE | 1800 mL per 30 days |
| ALINIA 500 MG TABLET | NITAZOXANIDE | 60 tablets per 30 days |
| ALLEGRA 180 MG TABLET | FEXOFENADINE | 30 tablets per 30 days |
| ALLEGRA 30 MG/5 ML SUSPENSION | FEXOFENADINE ORAL | 300 mL per 30 days |
| Allegra tab, cap, ODT 30 MG, 60 MG | FEXOFENADINE | 60 capsules/tablets per 30 days |
| ALLEGRA-D 12 HR TABLET | Pseudoephedrine/fexofenadine | 60 tablets per 30 days |
| ALLEGRA-D 24 HR TABLET | Pseudoephedrine/fexofenadine | 30 tablets per 30 days |
| ALLZITAL 25 MG/325 MG TABLET | Butalbital/acetaminophen | 18 tablets per 30 days |
| Alprazolam Intensol 1 MG/ML | ALPRAZOLAM | 180mL per 30 days |
| ALTACE 1.25 MG CAPSULE | RAMIPRIL | 30 capsules per 30 days |
| ALTACE 10 MG CAPSULE | RAMIPRIL | 60 capsules per 30 days |
| ALTACE CAPSULE 2.5 MG, 5 MG | RAMIPRIL | 120 capsules per 30 days |
| ALTOPREV TABLET | LOVASTATIN ER | 30 tablets per 30 days |
| Alunbrig 30 mg tab | BRIGATINIB | 120 tablets per 30 days |
| Alunbrig 90, 180, 90-180 MG tab pack | BRIGATINIB | 30 tablets per 30 days |
| Alvesco | ciclesonide | 2 inhalers per month |
| Amaryl 1mg, 2mg | glimepiride | 30 tablets per month |
| Ambien | zolpidem | 30 tablets per month |
| AMBIEN CR | ZOLPIDEM ER | 30 capsules per 30 days |
| AMERGE TABLET | NARATRIPTAN | 9 tablets per 30 days |
| AMERISOURCE LICE BEDING SPRAY | PERMETHRIN 0.5% | 5 oz ( 142g) per 5 days |
| AMITIZA 24 MCG CAPSULE | LUBIPROSTONE | 60 capsules per 30 days |
| AMITIZA 8 MCG CAPSULE | LUBIPROSTONE | 120 capsules per 30 days |
| Amjevita 10mg/0.2ml Prefilled Syringe | Adalimumab-atto | JIA (<15kg): 2 syringes per 28 days |
| Amjevita Sol 20mg/0.4ml Prefilled Syringe | Adalimumab-atto | JIA (15-30 kg): 2 syringes per 28 days<br>Ped Crohns (<40kg): 6 syringes for the first 28 days, then 2 syringes per 28 days thereafter |
| Amnesteem | isotretinoin | 60 capsules per 30 days |
| AMPYRA ER 10 MG TABLET | DALFAMPRIDINE | 60 tablets per 30 days |
| AMRIX ER CAPSULE | CYCLOBENZAPRINE ER | 30 capsules per 30 days |
| Amvuttra | Vutrisiran | 1 syringe per 90 days |
| Anafranil 25mg | clomipramine | 30 capsules per month |
| Anafranil 50mg | clomipramine | 90 capsules per month |
| Anafranil 75mg | clomipramine | 60 capsules per month |
| ANAPROX 275 MG TABLET | NAPROXEN | 90 tablets per 30 days |
| ANAPROX DS 550 MG TABLET | NAPROXEN | 90 tablets per 30 days |
| ANDRODERM PATCH | TESTOSTERONE | 30 patches per 30 days |
| Androgel 1% (5 GM) gel packet | TESTOSTERONE | 300 grams per 30 days |
| Androgel 1% gel (2.5 GM) packet/pump | TESTOSTERONE | 225 grams per 30 days |
| Androgel 1.62% (1.25 GM) gel packet | TESTOSTERONE | 37.5 grams per 30 days |
| Androgel 1.62% gel (2.5 GM) packet/pump | TESTOSTERONE | 150 grams per 30 days |

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|---|---|---|
| ANDROID 10 MG CAPSULE | METHYLTESTOSTERONE | 150 capsules per 30 days |
| ANDROXY 10 MG TABLET | FLUOXYMESTERONE | 120 tablets per 30 days |
| Anoro Ellipta | umeclidinium and vilanterol | 1 inhaler per month |
| ANTARA CAPSULE 30 MG, 43 MG | FENOFIBRATE MICRONIZED | 60 capsules per 30 days |
| ANTARA CAPSULE 90 MG, 130 MG | FENOFIBRATE MICRONIZED | 30 capsules per 30 days |
| ANZEMET 100 MG TABLET | DOLASETRON | 30 tablets per 30 days |
| ANZEMET 50 MG TABLET | DOLASETRON | 60 tablets per 30 days |
| Apadaz | Benzhydrocodone/acetaminophen | 180 tablets per 30 days |
| Apidra | insulin glulisine | 30 mL per month |
| APLENZIN ER TABLET | BUPROPION | 30 tablets per 30 days |
| APRISO 0.375 GRAM ER CAPSULE | MESALAMINE | 120 capsules per 30 days |
| APTIOM TABLET 200 MG, 400 MG | ESLICARBAZEPINE | 30 tablets per 30 days |
| APTIOM TABLET 600 MG, 800 MG | ESLICARBAZEPINE | 60 tablets per 30 days |
| Aptivus 250mg | tipranavir | 120 capsules per month |
| Arava | leflunomide | 30 tablets per month |
| ARCALYST 220 MG INJECTION | RILONACEPT | 5 vials per 28 days |
| ARCAPTA NEOHALER 75 MCG CAP | INDACATEROL | 30 capsules per 30 days |
| Aricept | donepezil | 30 tablets per month |
| ARIMIDEX 1 MG TABLET | ANASTROZOLE | 30 tablets per 30 days |
| ARISTADA ER 1064 MG/3.9 ML | ARIPIPRAZOLE LAUROXIL | 1 syringe per 60 days |
| ARISTADA ER SYRINGE 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML | ARIPIPRAZOLE LAUROXIL | 1 syringe per 30 days |
| Arixtra | fondaparinux | 10 syringes per month |
| ARMONAIR RESPICLICK | FLUTICASONE PROPIONATE | 1 inhaler per 30 days |
| Arnuity Ellipta | fluticasone | 1 inhaler per month |
| AROMASIN 25 MG TABLET | EXEMESTANE | 60 tablets per 30 days |
| Artane 2mg | trihexyphenidyl | 180 tablets per month |
| Artane 5mg | trihexyphenidyl | 90 tablets per month |
| ARTHROTEC EC 50 MG/200 MCG | Diclofenac/misoprostol | 120 tablets per 30 days |
| ARTHROTEC EC 75 MG/200 MCG | Diclofenac/misoprostol | 90 tablets per 30 days |
| ARYMO ER 15 MG TABLET | MORPHINE SULFATE | 90 tablets per 30 days |
| ARYMO ER TABLET 30 MG, 60 MG | MORPHINE SULFATE | 60 tablets per 30 days |
| ASACOL HD 800 MG TABLET | MESALAMINE | 180 tablets per 30 days |
| ASCOMP WITH CODEINE CAPSULE | Butalbital/asa/caffeine/codeine | 18 capsules per 30 days |
| Asendin 100mg | Amoxapine | 120 tablets per month |
| Asendin 150mg | amoxapine | 60 tablets per month |
| Asendin 25mg, 50mg | amoxapine | 90 tablets per month |
| Asmanex | mometasone furoate | 1 inhaler per month |
| ASPIRIN SUPPOSITORY | ASPIRIN | 180 suppositories per 30 days |
| ASPIRIN TAB/CAP | ASPIRIN | 360 tablets/capsules per 30 days |
| ASTELIN 0.1% NASAL SPRAY | AZELASTINE | 1 bottle per 25 days |
| ASTEPRO NASAL SPRAY | AZELASTINE | 1 bottle per 25 days |
| ATACAND 32 MG TABLET | CANDESARTAN | 30 tablets per 30 days |
| ATACAND HCT 16/12.5 MG TAB | CANDESARTAN/HCTZ | 60 tablets per 30 days |

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|---|---|---|
| ATACAND HCT TAB 32/12.5, 32/25 MG | CANDESARTAN/HCTZ | 30 tablets per 30 days |
| ATACAND TABLET 4 MG, 8 MG, 16 MG | CANDESARTAN | 60 tablets per 30 days |
| ATELVIA 35 MG DR TABLET | RISEDRONATE | 4 tablets per 28 days |
| Ativan 0.5mg, 2mg | lorazepam | 90 tablets per month |
| Ativan 1mg | lorazepam | 180 tablets per month |
| Atorvaliq 20mg/5 ml susp | Atorvastatin | 600 ml per 30 days |
| Atripla 600/200/300 mg tablet | Efavirenz/emtricitabine/tenofovir DF | 30 tablets per 30 days |
| Atrovent HFA | ipratropium bromide | 2 inhalers per month |
| Atrovent Inhalation Solution | ipratropium bromide | 120 vials or 300mL per month |
| Atrovent Nasal Spray 0.03% | ipratropium bromide | 1 bottle per month (30mL) |
| Atrovent Nasal Spray 0.06% | ipratropium bromide | 2 bottles per month (30mL total) |
| AUBAGIO 7 AND 14 MG TABLET | TERIFLUNOMIDE | 30 tablets per 30 days |
| AURYXIA 210 MG TABLET | FERRIC CITRATE | 360 tablets per 30 days |
| AUSTEDO 12 MG TABLET | DEUTETRABENAZINE | 120 tablets per 30 days |
| AUSTEDO 6 MG TABLET | DEUTETRABENAZINE | 60 tablets per 30 days |
| AUSTEDO 9 MG TABLET | DEUTETRABENAZINE | 120 tablets per 30 days |
| Austedo XR 6, 12, 24 mg | Deutetrabenazine | 60 tabs per 30 days |
| AutoPen | Reusable insulin pen | 2 pens per 365 days |
| Auvelity tab | Dextromethorphan/bupropion | 60 tabs per 30 days |
| AVALIDE 150-12.5 MG TABLET | IRBESARTAN/HCTZ | 60 tablets per 30 days |
| AVALIDE 300-12.5 MG TABLET | IRBESARTAN/HCTZ | 30 tablets per 30 days |
| Avandamet | rosiglitazone/metformin | 60 tablets per month |
| Avandaryl 4/1mg | rosiglitazone/glimepiride | 30 tablets per month |
| Avandaryl 4/2mg, 4/4mg | rosiglitazone/glimepiride | 60 tablets per month |
| Avandia | rosiglitazone | 30 tablets per month |
| AVAPRO 75, 150, 300 MG TABLET | IRBESARTAN | 30 tablets per 30 days |
| AVEED 750 MG/3 ML VIAL | Testosterone undecanoate | 3ml initial, then 3ml in 28 days, then 3ml per 70 days |
| Avelox | moxifloxacin | 10 tablets per month |
| AVINZA 30,45,60,75,90, 120 MG CAP | MORPHINE SULFATE ER | 30 capsules per 30 days |
| AVODART 0.5 MG SOFTGEL | DUTASTERIDE | 30 softgels per 30 days |
| Avonex | interferon beta-1a | 1 package (4 vials) per month |
| Avonex 30 mcg/0.5 ml pen autoinjector kit | INTERFERON BETA-1A | 2ML per 28 days |
| Avonex 30mcg prefilled syringe kit | INTERFERON BETA-1A | 1 kit (4 syringes) per 28 days |
| AXERT 12.5 MG TABLET | ALMOTRIPTAN | 9 tablets for 30 days |
| AXERT 6.25 MG TABLET | ALMOTRIPTAN | 6 tablets for 30 days |
| AXIRON 30 MG/ACTUATION SOLUTION | TESTOSTERONE | 180 mL (two bottles) per 30 days |
| AYGESTIN 5 MG TABLET | NORETHINDRONE ACETATE | 90 tablets per 30 days |
| Ayvakit | Avapritinib | 30 tablets per 30 days |
| AZACTAM 1 GM INJECTION VIAL | AZTREONAM | 90g per 30 days |
| AZACTAM 2 GM INJECTION VIAL | AZTREONAM | 240g per 30 days |
| AZILECT 0.5, 1 MG TABLET | RASAGILINE | 30 tablets per 30 days |
| AZOR 10/20,10/40,5/20,5/40 MG TABLET | AMLODIPINE/OLMESARTAN | 30 tablets per 30 days |

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|---|---|---|
| Azstarys | Serdexmethylphenidate/ dexmethylphenidate | 30 capsules per 30 days |
| AZULFIDINE 500 MG TABLET | SULFASALAZINE | 360 tablets per 30 days |
| AZULFIDINE EN-TAB 500 MG TABLET | SULFASALAZINE | 360 tablets per 30 days |
| BANZEL 200 MG TABLET | RUFINAMIDE | 120 tablets per 30 days |
| BANZEL 40 MG/ML SUSPENSION | RUFINAMIDE | 2400ML per 30 days |
| BANZEL 400 MG TABLET | RUFINAMIDE | 240 tablets per 30 days |
| Baqsimi | glucagon | 2 kits per 30 days |
| Baraclude 0.5mg, 1mg | Entecavir | 30 tablets per 30 days |
| Basaglar | Insulin glargine | 30 ml per 30 days |
| BC Arthritis powder packet 1000 MG/65 MG | ASPIRIN/CAFFEINE | 120 packets per 30 days |
| BELSOMRA 5,10,15,20 MG TABLET | SUVOREXANT | 30 tablets per 30 days |
| Benicar 5, 20, 40 mg tab | olmesartan | 30 tablets per 30 days |
| Benicar HCT 20/12.5, 40/12.5, 40/25 mg tab | Olmesartan/HCTZ | 30 tablets per 30 days |
| Benzphetamine Hydrochloride Tablet | Benzphetamine Hydrochloride | 90 tablets per 30 days |
| Berinert | C1 esterase inhibitor | 12 vials per month |
| Bethkis 300 MG/4 ML inhalation soln vial | TOBRAMYCIN | 240 ml per 30 days |
| Bevespi Aerosphere | Glycopyrrolate/formoterol | 1 inhaler per 30 days |
| Biaxin, Biaxin XL | clarithromycin | 28 tablets per 30 days |
| BICILLIN L-A 1,200,000 UNITS/2 ML | PENICILLIN G BENZATHINE | 2.1ml per 30 days |
| BICILLIN L-A 2,400,000 UNITS/4 ML | PENICILLIN G BENZATHINE | 17.7ml per 30 days |
| BICILLIN L-A 600,000 UNITS/ML | PENICILLIN G BENZATHINE | 2.4ml per 30 days |
| Biktarvy | bictegravir, emtricitabine, tenofovir alafenamide | 30 tablets per 30 days |
| Binosto 70 MG effervescent tab | ALENDRONATE | 4 tablets per 28 days |
| BONIVA 150 MG TABLET | IBANDRONATE | 1 tablet per 30 days |
| BONIVA 3 MG/3 ML SYRINGE | IBANDRONATE | 1 syringe per 30 days |
| BONJESTA ER 20-20 MG TABLET | Doxylamine/pyridoxine | 60 tablets per 30 days |
| BOSULIF 100 MG TABLET | BOSUTINIB | 90 tablets per 30 days |
| BOSULIF 400,500 MG TABLET | BOSUTINIB | 30 tablets per 30 days |
| Bontril 35mg | phendimetrazine tartrate | 180 tablets/30 days |
| Bontril Slow-Release 105mg | phendimetrazine tartrate | 30 tablets/30 days |
| BOTOX 100 UNITS INJECTION VIAL | ONABOTULINUMTOXIN A | 3 vials per 30 days |
| BOTOX 200 UNITS INJECTION VIAL | ONABOTULINUMTOXIN A | 2 vials per 30 days |
| BPO 4%, 8% CREAMY WASH KIT | BENZOYL PEROXIDE | 30g per 30 days |
| Breo Ellipta | fluticasone and vilanterol | 1 inhaler per month |
| Brexafemme | Ibrexafungerp | 4 tablets per 30 days |
| Breztri Inhaler | Budesonide, formoterol, glycopyrrolate | 1 inhaler per 30 days |
| BRILINTA 60,90 MG TABLET | TICAGRELOR | 60 tablets per 30 days |
| BRISDELLE 7.5 MG CAPSULE | PAROXETINE MESYLATE | 30 capsules per 30 days |
| BRIVIACT 10,25,50 MG TABLET | BRIVARACETAM | 120 tablets per 30 days |
| Briviact 10mg/ml, 50 mg/ml oral soln | BRIVARACETAM | 600ML per 30 days |
| BRIVIACT 75, 100 MG TABLET | BRIVARACETAM | 60 per 30 days |
| Brixadi SQ Injection: 8mg/wk | Buprenorphine HCl | 6 syringes per 28 days |

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|---|---|---|
| Brixadi SQ Injection: 16mg/wk, 24mg/wk, 32mg/wk | Buprenorphine HCl | 4 syringes per 28 days |
| Brixadi SQ Injection: 64mg/mo, 96mg/mo, 128mg/mo | Buprenorphine HCl | 1 syringe per 28 days |
| Bronchitol capsules | Mannitol | 560 capsules per 28 days |
| Brovana | arformoterol | 120 mL (60 vials) per month |
| Bryhali lotion, cream, ointment | Halobetasol proprionate | 120g per 30 days |
| BUPAP 50 MG/300 MG TABLET | Butalbital/acetaminophen | 18 tablets per 30 days |
| BUTISOL SODIUM 30 MG TABLET | BUTABARBITAL SODIUM | 105 tablets per 30 days |
| Butrans 5, 7.5, 10, 15, 20 mcg/hr transdermal | BUPRENORPHINE | 4 patches per 28 days |
| Bydureon 2mg pen | exenatide | 4 pens per 28 days |
| Bydureon 2mg/0.65ml syringe | exenatide | 4 syringes per 28 days |
| Bydureon BCISE 2mg/0.85ml | exenatide | 4 pens per 28 days |
| Byetta 10mcg/0.04ml | exenatide | 2.4ml (1 pen) per month |
| Byetta 5mcg/0.02ml | exenatide | 1.2ml (1 pen) per month |
| Bylvay (Pellet) sprinkle cap 200 mcg | odevixibat | 900 caps per 30 days |
| Bylvay (Pellet) sprinkle cap 600 mcg | Odevixibat | 300 caps per 30 days |
| Bylvay cap 1200 mcg | Odevixibat | 150 caps per 30 days |
| Bylvay cap 400 mcg | odevixibat | 450 caps per 30 days |
| BYSTOLIC 2.5 MG TABLET | NEBIVOLOL | 30 tablets per 30 days |
| BYSTOLIC 20 MG TABLET | NEBIVOLOL | 60 tablets per 30 days |
| BYSTOLIC 5, 10 MG TABLET | NEBIVOLOL | 45 tablets per 30 days |
| BYVALSON 5/80 MG TABLET | NEBIVOLOL/VALSARTAN | 30 tablets per 30 days |
| Cabenuva injection | Cabotegravir/rilpivirine | 1 kit/30 days |
| CABOMETYX 20, 40, 60 MG TABLET | CABOZANTINIB | 30 tablets per 30 days |
| CADUET TABLETS | Amlodipine/atorvastatin | 30 tablets per 30 days |
| CAFERGOT TABLET | ERGOTAMINE/CAFFEINE | 42 tablets per 30 days |
| Calan SR | verapamil | 30 tablets per month |
| Calquence 100 mg caps | Acalabrutinib | 60 caps per 30 days |
| Calquence 100 mg tabs | Acalabrutinib | 60 tabs per 30 days |
| CAMBIA 50 MG POWDER PACKET | DICLOFENAC POTASSIUM | 9 packets per 30 days |
| CANCIDAS IV 50,70 MG VIAL | CASPOFUNGIN | 14 vials per 14 days |
| CAPACET 50 MG/325 MG/40 MG CAPSULE | Butalbital/acetaminophen/caffeine | 18 capsules per 30 days |
| Capital with codeine 120-12mg/5 ML susp | ACETAMINOPHEN/CODEINE | 2700ML per 30 days |
| Caplyta | Lumateperone | 30 capsules per 30 days |
| CAPOTEN TABLETS | CAPTOPRIL | 90 per 30 days |
| CAPOZIDE TABLETS | Captopril/HCTZ | 60 tablets per 30 days |
| CAPRELSA 100 MG TABLET | VANDETANIB | 60 tablets per 30 days |
| CAPRELSA 300 MG TABLET | VANDETANIB | 30 tablets per 30 days |
| Carafate 1 GM/10 ML susp | Sucralfate | 1120 ml per 28 days |
| CARBATROL ER 100 MG CAPSULE | CARBAMAZEPINE ER | 180 capsules per 30 days |
| CARBATROL ER 200 MG CAPSULE | CARBAMAZEPINE ER | 240 capsules per 30 days |
| CARBATROL ER 300 MG CAPSULE | CARBAMAZEPINE ER | 150 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| CARDENE 20 MG CAPSULE | NICARDIPINE | 180 capsules per 30 days |
| CARDENE 30 MG CAPSULE | NICARDIPINE | 90 capsules per 30 days |
| CARDIZEM 120 MG TABLET | DILTIAZEM | 90 tablets per 30 days |
| CARDIZEM 30, 60, 90 MG TABLET | DILTIAZEM | 120 tablets per 30 days |
| CARDIZEM CD 120, 300, 360 MG CAP | DILTIAZEM | 30 capsules per 30 days |
| CARDIZEM CD 180, 240 MG CAP | DILTIAZEM | 60 capsules per 30 days |
| CARDIZEM LA 120, 180, 300, 360, 420 MG TABLET | DILTIAZEM | 30 tablets per 30 days |
| CARDIZEM LA 240 MG TABLET | DILTIAZEM | 60 tablets per 30 days |
| CARDURA 1mg, 2mg TABLET | DOXAZOSIN | 30 tablets per 30 days |
| CARDURA 8 MG TABLET | DOXAZOSIN | 60 tablets per 30 days |
| CARDURA XL 4, 8 MG TABLET | DOXAZOSIN | 30 tablets per 30 days |
| Carospir susp 25mg/5ml | Spironolactone | 560 ml per 28 days |
| CARTIA XT 120,180,300 MG CAP SA | DILTIAZEM | 30 capsules per 30 days |
| CARTIA XT 240 MG CAPSULE SA | DILTIAZEM | 60 capsules per 30 days |
| CATAFLAM 50 MG TABLET | DICLOFENAC POTASSIUM | 120 tablets per 30 days |
| Catapres 0.1mg, 0.2mg | clonidine | 60 tablets per month |
| Catapres 0.3mg | clonidine | 240 tablets per month |
| Cayston 75 MG/ML inhalation soln vial | AZTREONAM LYSINE | 84 vials per 28 days |
| Celebrex 50, 100, 200 mg | celecoxib | 60 capsules per 30 days |
| Celebrex 400 mg | celecoxib | 30 capsules per 30 days (QVT) |
| Celexa | citalopram | 30 tablets per month |
| Celexa solution | citalopram 10mg/5mL solution | 600mL per month |
| CELONTIN 300 MG CAPSULE | METHOSUXIMIDE | 120 capsule per 30 days |
| Cerdelga | Eliglustat | 60 capsules per month |
| CESAMET 1 MG CAPSULE | NABILONE | 180 capsules per 30 days |
| CHANTIX 0.5 MG TABLET | VARENICLINE | 672 tablets per 365 days (dose optimization) |
| CHANTIX 0.5 MG X 11 & Tab 1 MG X 42 Pack | Varenicline Tartrate Tab 0.5 MG X 11 & Tab 1 MG X 42 Pack | 106 tablets /365 days |
| CHANTIX 1 MG CONTINUING MONTH PAK | VARENICLINE | 560/365 days |
| CHANTIX 1 MG TABLET | VARENICLINE | 672 tablets per 365 days |
| CHLORAL HYDRATE 500 MG/5 ML SOLN | CHLORAL HYDRATE | 300ML per 30 days |
| CHLORPROPAMIDE 100 MG TABLET | CHLORPROPAMIDE | 90 tablets per 30 days |
| CHLORPROPAMIDE 250 MG TABLET | CHLORPROPAMIDE | 60 tablets per 30 days |
| CHOLINE/MAG TRISAL 1000 MG TAB | CHOLINE/MAGNESIUM | 120 tablets per 30 days |
| CHOLINE/MAG TRISAL 500 MG TAB | CHOLINE/MAGNESIUM | 180 tablets per 30 days |
| CHOLINE/MAG TRISAL 500 MG/5 ML LIQUID | CHOLINE/MAGNESIUM | 1350 ML per 30 days |
| CHOLINE/MAG TRISAL 750 MG TAB | CHOLINE/MAGNESIUM | 180 tablets per 30 days |
| Cibinqo 50, 100, 200 mg | Abrocitinib | 30 tablets per 30 days |
| CIMDUO 300-300 MG TABLET | Lamivudine/tenofovir DF | 30 tablets per 30 days |
| Cimerli 0.3 and 0.5 mg injection | Ranibizumab-eqrn | 2 injections per 28 days |
| CIMZIA 200 MG VIAL KIT | CERTOLIZUMAB PEGOL | 2 packs or 2 kits (2 x 200mg vials) per 28 days |
| CIMZIA 200 MG/ML STARTER KIT | CERTOLIZUMAB PEGOL | 1 starter kit per 365 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| CIMZIA 200 MG/ML SYRINGE KIT | CERTOLIZUMAB PEGOL | 2 syringe kits (2 x 200mg/ml syringes) per 28 days |
| Cinryze | C1 esterase inhibitor | 20 vials per month |
| Claravis | isotretinoin | 60 capsules per 30 days |
| CLARINEX D 12 HOUR TABLET | Pseudoephedrine/desloratadine | 60 tablets per 30 days |
| CLARINEX D 24 HOUR TABLET | Pseudoephedrine/desloratadine | 30 tablets per 30 days |
| CLARINEX 0.5 MG/ML SYRUP | DESLORATADINE | 300ML per 30 days |
| CLARINEX 2.5 AND 5 MG REDITABS | DESLORATADINE | 30 tablets per 30 days |
| CLARINEX 5 MG TABLET | DESLORATADINE | 30 tablets per 30 days |
| CLARITIN 10 MG TAB AND REDITABS | LORATADINE | 30 tablets per 30 days |
| CLARITIN 5 MG/5 ML SYRUP | LORATADINE | 300ML per 30 days |
| CLARITIN CHEWABLE 5 MG TABLET | LORATADINE | 60 tablets per 30 days |
| CLARITIN-D 12 HOUR TAB SA | Pseudoephedrine/loratadine | 60 tablets per 30 days |
| CLARITIN-D 24 HOUR TAB ER | Pseudoephedrine/loratadine | 30 tablets per 30 days |
| Clenpiq solution | Sodium picosulfate/Mg Ox/Citric Acid | 2 bottles (350 ml) per 30 days |
| Cleocin, Clindagel gel, lotion, solution | CLINDAMYCIN | 60g per 30 days |
| CLINORIL 150, 200 MG TABLET | SULINDAC | 60 tablets per 30 days |
| Clozaril 200mg | clozapine | 135 tablets per month |
| Clozaril 25mg, 50mg, 100mg | clozapine | 270 tablets per month |
| Codeine sulfate | codeine sulfate | 180 tablets per month |
| Cogentin 0.5mg, 1mg | benztropine | 180 tablets per month |
| Cogentin 2mg | benztropine | 90 tablets per month |
| COLAZAL 750 MG CAPSULE | BALSALAZIDE | 270 capsules per 30 days |
| COLCRYS 0.6 MG TABLET | COLCHICINE | 90 tablets per 30 days |
| COLESTID 1 GRAM TABLET | COLESTIPOL | 480 tablets per 30 days |
| Combivent | ipratropium bromide/albuterol | 2 inhalers per month |
| Combivir | lamivudine/zidoduvine | 60 tablets per month |
| COMBUNOX 5 MG/400 MG TABLET | OXYCODONE/IBUPROFEN | 120 tablets per 30 days |
| COMETRIQ 100 MG DAILY DOSE PACK | CABOZANTINIB | 56 tablets per 28 days |
| COMETRIQ 140 MG DAILY DOSE PACK | CABOZANTINIB | 112 tablets per 28 days |
| COMETRIQ 60 MG DAILY DOSE PACK | CABOZANTINIB | 84 tablets per 28 days |
| COMMIT 2, 4 MG LOZENGE | NICOTINE POLACRILEX | 600 lozenges per 30 days |
| Complera | emtricitabine/rilpivirine/tenofovir | 30 tablets per month |
| COMTAN 200 MG | ENTACAPONE | 240 tablets per 30 days |
| Concerta 18mg, 27mg, 54mg | methylphenidate extended release | 30 tablets per month |
| Concerta 36mg | methylphenidate extended release | 60 tablets per month |
| CONTOUR USB blood glucose meter | BLOOD GLUCOSE METER | 1 meter per 365 days |
| Contrave ER | Naltrexone HCL/Bupropion HCL | 120 tablets per 30 days |
| Conzip 100, 200, 300 mg ER | Tramadol | 30 capsules per 30 days |
| Copaxone | glatiramer acetate | 1 package of 30 vials per month |
| Copiktra | duvelisib | 56 capsules per 28 days |
| COREG 25 MG TABLET | CARVEDILOL | 120 tablets per 30 days |
| COREG 3.125, 6.25, 12.5 MG TABLET | CARVEDILOL | 60 tablets per 30 days |
| COREG CR CAPSULE | CARVEDILOL | 30 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| CORLANOR TABLETS | IVABRADINE | 60 tablets per 30 days |
| Cortisone cream, lotion, ointment | hydrocortisone | 120g per 30 days |
| COSENTYX 150mg/ml 2-syringe/pen pack (150mg/ml) | SECUKINUMAB | 10 pens/syringes for the first month, then 4 pens/syringes per 28 days |
| Cosentyx 75mg/0.5ml and 150mg/ml 1-syringe/pen pack | secukinumab | 5 syringes/pens for the first month, then 1 syringe/pen per 28 days |
| Cosentyx 300mg/2ml syringe/pen | Secukinumab | 5 syringes/pens for the first month, then 2 syringes/pens per 28 days |
| COTELLIC 20 MG TABLET | COBIMETINIB FUMARATE | 90 tablets per 30 days |
| COVID-19 OTC at-home test | | 8 tests per 30 days |
| COZAAR 100 MG TABLET | LOSARTAN | 30 tablets per 30 days |
| COZAAR 25 AND 50 MG TABLET | LOSARTAN | 60 tablets per 30 days |
| CRESEMBA 186 MG CAPSULE | Isavuconazonium sulfate | 68 tablets per 30 days |
| CRESTOR 40 MG TABLET | ROSUVASTATIN | 30 tablets per 30 days |
| CRESTOR 5, 10, 20 MG TABLET | ROSUVASTATIN | 45 tablets per 30 days |
| Crixivan 200mg | indinavir | 360 tablets per month |
| Crixivan 400mg | indinavir | 180 tablets per month |
| Cutivate cream, ointment | fluticasone | 120g per 30 days |
| CUTTER Backwoods insect repellent | DIETHYLTOLUAMIDE | 12 oz per 30 days |
| CUTTER Lemon Eucalyptus insect repellent | OIL OF LEMON, UCALYPTUS | 12 oz per 30 days |
| CUTTER Skinsations insect repellent | DIETHYLTOLUAMIDE | 12 oz per 30 days |
| CVS LICE BEDDING SPRAY | PERMETHRIN 0.5% | 5oz (142 gm) per 5 days |
| CVS TOTAL HOME INSECT 30% SPRAY | DIETHYLTOLUAMIDE | 6 oz (177mL) per 6 days |
| Cymbalta 20mg, 30mg | duloxetine | 60 capsules per month |
| Cymbalta 60mg | duloxetine | 60 capsules per month |
| Cystadrops | Cysteamine | 20mL per 28 days |
| CYTOMEL 25 MCG TABLET | LIOTHYRONINE | 30 tablets per 30 days |
| CYTOMEL 5 MCG TABLET | LIOTHYRONINE | 120 tablets per 30 days |
| CYTOMEL 50 MCG TABLET | LIOTHYRONINE | 60 tablets per 30 days |
| DAKLINZA TABLET | DACLATASVIR | 30 tablets per 30 days |
| DALIRESP TABLET | ROFLUMILAST | 30 tablets per 30 days |
| DALMANE CAPSULE | FLURAZEPAM | 30 capsules per 30 days |
| DANTRIUM CAPSULE | DANTROLENE | 120 capsules per 30 days |
| DARAPRIM 25 MG TABLET | PYRIMETHAMINE | 90 tablets per 30 days |
| Daurismo 100mg | glasdegib | 28 tablets per 28 days |
| Daurismo 25mg | glasdegib | 56 tablets per 28 days |
| Daybue 200 mg/ml soln | Trofinetide | 8 bottles (3600 ml) per 30 days |
| DAYPRO 600 MG TABLET | OXAPROZIN | 90 tablets per 30 days |
| Dayvigo | Lemborexant | 30 tablets per 30 days |
| DDAVP 0.01% NASAL SPRAY PUMP | DESMOPRESSIN ACETATE | 15 ml per 30 days |
| DDAVP 0.1 and 0.2 mg tab | Desmopressin | 180 tablets per 30 days |
| DELATESTRYL 200 MG/ML VIAL | Testosterone enanthate | 5 mL (1 vial) per 28 days |
| Delstrigo | doravirine/lamivudine/tenofovir disoproxil fumarate | 30 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| DELZICOL 400 MG DR CAPSULE | MESALAMINE | 180 capsules per 30 days |
| DEMEROL 100 MG TABLET | MEPERIDINE | 150 tablets per 30 days |
| DEMEROL 50 MG TABLET | MEPERIDINE | 300 tablets per 30 days |
| DEMEROL 50 MG/5 ML SOLUTION | MEPERIDINE | 1500 ml per 30 days |
| DEMSER 250 MG CAPSULE | METYROSINE | 480 capsules per 30 days |
| DENAVIR 1% CREAM | PENCICLOVIR | 37.5 grams per 30 days |
| Depen | Penicillamine | 480 capsules per month |
| Depo-Provera 150 MG/ML vial/syringe | Medroxyprogesterone | 1 vial (1 ml) per 90 days |
| Depo-Provera 400 MG/ML vial/syringe | Medroxyprogesterone | 4 vials (10 ml) per 28 days |
| Depo-SubQ Provera 104 syringe | Medroxyprogesterone | 1 vial (1 ml) per 90 days |
| Depo-Testosterone 100 MG/ML VIAL | TESTOSTERONE CYPIONATE | 10mL (1 vial) per 28 days |
| Depo-Testosterone 200 MG/ML VIAL | TESTOSTERONE CYPIONATE | 4 vials (4 ml) per 28 days |
| DERMACINRX PRIZOPAK KIT | LIDOCAINE/PRILOCAINE | 1 kit per 30 days |
| DERMACINRX ZRM PAK KIT | LIDOCAINE/DIMETHICONE | 1 kit per 30 days |
| DESCOVY 200/25 MG TABLET | Emtricitabine/tenofovir alafenamide | 30 tablets per 30 days |
| Desoxyn | methamphetamine | 150 tablets per month |
| Detrol LA (all strengths) | Tolteradine ER | 30 capsules per 30 days |
| DETROL TABLET | TOLTERODINE | 60 tablets per 30 days |
| Dexcom G6 Sensor | blood sugar diagnostic sensor | 3 sensors per 30 days |
| Dexcom Receiver | Blood sugar display device | 1 per 365 days |
| Dexcom Transmitter | | 1 per 60 days |
| Dexedrine 10mg | d-amphetamine sulfate | 60 tablets per month |
| Dexedrine 15mg | d-amphetamine sulfate | 120 tablets per month |
| Dexedrine 5mg | d-amphetamine sulfate | 90 tablets per month |
| DEXEDRINE SPANSULE 10 and 15 MG | DEXTROAMPHETAMINE SR | 120 capsules per 30 days |
| DEXEDRINE SPANSULE 5 MG | DEXTROAMPHETAMINE SR | 60 capsules per 30 days |
| DEXILANT DR CAPSULE | DEXLANSOPRAZOLE | 30 capsules per 30 days |
| DEXTROSTAT TABLET | DEXTROAMPHETAMINE | 180 tablets per 30 days |
| DIABETA 1.25 and 2.5 MG TABLET | GLYBURIDE | 60 tablets per 30 days |
| DIABETA 5 MG TABLET | GLYBURIDE | 120 tablets per 30 days |
| Diabetic Lancets | Lancets | 200 lancets per 30 days |
| Diabetic Test Strips (< 21 years of age) | Blood sugar diagnostic strips | 200 test strips per 30 days |
| Diabetic Test Strips (≥ 21 years of age) | Blood sugar diagnostic strips | 150 test strips per 30 days |
| DICLEGIS DR TABLET | DOXYLAMINE/PYRIDOXINE | 120 tablets per 30 days |
| DIFICID 200 MG TABLET | FIDAXOMICIN | 60 tablets per 30 days |
| DIFLUCAN 10 mg/ml and 40 mg/ml susp | FLUCONAZOLE | 300 ml per 30 days |
| DIFLUCAN 150 MG TABLET | FLUCONAZOLE | 30 tablets per 30 days |
| DIFLUCAN 50, 100, 200 MG TABLET | FLUCONAZOLE | 60 tablets per 30 days |
| DIFLUNISAL 500 MG TABLET | DIFLUNISAL | 90 tablets per 30 days |
| DILACOR XR 120 and 180 MG CAP SA | DILTIAZEM | 30 capsules per 30 days |
| DILACOR XR 240 MG CAPSULE SA | DILTIAZEM | 60 capsules per 30 days |
| DILANTIN 125 mg/ml (100 mg/4 ml) liquid | PHENYTOIN | 720 ml per 30 days |
| DILANTIN 30 MG and 100 MG CAPSULE | PHENYTOIN | 180 capsules per 30 days |
| DILANTIN 50 MG CHEWABLE INFATAB | PHENYTOIN | 180 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Dilaudid | hydromorphone | 180 tablets per month |
| Dilaudid solution | hydromorphone solution | 2400 ml per month |
| DILT-CD 120, 180, 300 MG CAPSULE | DILTIAZEM | 30 capsules per 30 days |
| DILT-CD 240 MG CAPSULE | DILTIAZEM | 60 capsules per 30 days |
| DILTIA XT 120 and 180 MG CAPSULE SA | DILTIAZEM | 30 capsules per 30 days |
| DILTIA XT 240 MG CAPSULE SA | DILTIAZEM | 60 capsules per 30 days |
| DILTIAZEM ER 60 and 90 MG CAPSULE | DILTIAZEM | 60 capsules per 30 days |
| DILT-XR 120 and 180 MG CAP SA | DILTIAZEM | 30 capsules per 30 days |
| DILT-XR 240 MG CAP SA | DILTIAZEM | 60 capsules per 30 days |
| DILTZAC ER 120, 180, 300, 360 MG CAPSULE | DILTIAZEM | 30 capsules per 30 days |
| DILTZAC ER 240 MG CAPSULE | DILTIAZEM | 60 capsules per 30 days |
| DIOVAN 320 MG | VALSARTAN | 30 tablets per 30 days |
| DIOVAN 40, 80, 160 MG | VALSARTAN | 60 tablets per 30 days |
| DIOVAN HCT TAB | VALSARTAN/HCTZ | 30 tablets per 30 days |
| DIPENTUM 250 MG CAPSULE | OLSALAZINE | 120 capsules per 30 days |
| Diprolene 0.05% cream, ointment, lotion | Betamethasone dipropionate | 120g per 30 days |
| Diprolene AF 0.05% cream, gel, ointment, lotion | Augmented betamethasone | 120g per 30 days |
| DITROPAN 5 MG TABLET | OXYBUTYNIN | 120 tablets per 30 days |
| DITROPAN 5 MG/5 ML SYRUP | OXYBUTYNIN | 600 ml per 30 days |
| DITROPAN XL 10 and 15 MG TABLET | OXYBUTYNIN | 60 tablets per 30 days |
| DITROPAN XL 5 MG TABLET | OXYBUTYNIN | 30 tablets per 30 days |
| Doptelet | Avatrombopag | 60 tablets per 30 days |
| DORAL 15 MG TABLET | QUAZEPAM | 30 tablets per 30 days |
| DORYX DR TABLET | DOXYCYCLINE HYCLATE | 30 tablets per 30 days |
| DORYX MPC DR 60mg, 120 mg tab | DOXYCYCLINE HYCLATE | 60 tablets per 30 days |
| Dovonex cream and ointment | Calcipotriene | 120g per 30 days |
| Dovonex scalp solution | Calcipotriene | 60mL per 30 days |
| DUETACT TABLET | PIOGLITAZONE/ GLIMEPIRIDE | 30 tablets per 30 days |
| DUEXIS 800 MG/26.6 MG TABLET | IBUPROFEN/FAMOTIDINE | 90 tablets per 30 days |
| DULERA DISKUS | Mometasone/formoterol | 4 inhalers (52 g) per 90 days |
| Duoneb 0.5-3 MG/3 ML inhalation soln | IPRATROPIUM/ALBUTEROL | 180 vials (540 ml) per 30 days |
| Dupixent 100 mg/0.67 ML | Dupilumab | 2 syringes/pens(1.34 ml) every 28 days |
| Dupixent 200 MG/1.14 ML | Dupilumab | 3 syringes/pens (3.42 ml) during the first 28 days, then 2 syringes/pens (2.28 ml) per 28 days |
| DUPIXENT 300 MG/2 ML | DUPILUMAB | 4 syringes/pens (8 ml) per 28 days |
| Duragesic | fentanyl transdermal patches | 10 patches per 30 days |
| Durolane 60mg/3 ml | Hyaluronic acid | 1 syringe (3 ml) per knee per 6 months |
| Duzallo | Lesinurad/allopurinol | 30 tablets per 30 days |
| DYANAVEL XR 2.5 MG/ML SUSP | Dextroamphetamine/amphetamine | 240 ml per 30 days |
| DYMISTA NASAL SPRAY | AZELASTINE/FLUTICASONE | 1 bottle (23g) per 30 days |
| DYNACIRC CAPSULE | ISRADIPINE | 60 capsules per 30 days |
| DYNACIRC CR 10 MG TABLET SA | ISRADIPINE | 60 tablets per 30 days |
| DYNACIRC CR 5 MG TABLET SA | ISRADIPINE | 30 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| DYSPORT INJECTION VIAL | ABOBOTULINUMTOXIN A | 3 vials per 90 days |
| EC-NAPROSYN TABLET | NAPROXEN | 90 tablets per 30 days |
| EDARBI TABLET | AZILSARTAN | 30 tablets per 30 days |
| EDARBYCLOR TABLET | Azilsartan/chlorthalidone | 30 tablets per 30 days |
| Edurant | rilpivirine | 30 tablets per month |
| Effexor 100mg tablet | venlafaxine | 90 tablets per month |
| Effexor 25mg tablet | venlafaxine | 90 tablets per month |
| Effexor 37.5mg tablet | venlafaxine | 60 tablets per month |
| Effexor 50mg tablet | venlafaxine | 120 tablets per month |
| Effexor 75mg tablet | venlafaxine | 150 tablets per month |
| EFFEXOR XR 150 MG CAPSULE SA | VENLAFAXINE | 60 capsules per 30 days |
| Effexor XR 225mg | Venlafaxine ER | 30 tablets per month |
| EFFEXOR XR 37.5 MG CAPSULE SA | VENLAFAXINE | 30 capsules per 30 days |
| EFFEXOR XR 75 MG CAPSULE SA | VENLAFAXINE | 90 capsules per 30 days |
| EFFIENT 10 MG TABLET | PRASUGREL | 30 tablets per 30 days |
| ELDEPRYL 5 MG CAPSULE | SELEGILINE | 60 capsules per 30 days |
| ELIPHOS 667 MG TABLET | CALCIUM ACETATE | 360 tablets per 30 days |
| ELIQUIS STARTER PACK | APIXABAN | 74 tablets per 365 days |
| ELIQUIS TABLET | APIXABAN | 60 tablets per 30 days |
| ELMIRON 100 MG CAPSULE | Pentosane polysulfate sodium | 90 capsules per 30 days |
| Elocon cream, ointment | mometasone | 120g per 30 days |
| EMBEDA ER CAPSULE | MORPHINE/NALTREXONE | 30 capsules per 30 days |
| EMBRACE BLOOD GLUCOSE METER | BLOOD GLUCOSE METER | 1 meter per 365 days |
| EMEND 115 MG and 150 MG INJECTION | FOSAPREPITANT | 3 vials per 30 days |
| EMEND 125 MG CAPSULE | APREPITANT | 2 capsules per 21 days |
| EMEND 125 MG POWDER PACKET | APREPITANT | 6 packets per 21 days |
| EMEND 40 and 80 MG CAPSULE | APREPITANT | 4 capsules per 21 days |
| EMEND BIFOLD AND TRIFOLD PACK | APREPITANT | 2 packs per 21 days |
| EMGALITY 100MG | GALCANEZUMAB-GNLM | 3 syringes per 30 days |
| EMGALITY 120MG | GALCANEZUMAB-GNLM | 2 syringes for 30 days for first month, then 1 syringe per 30 days |
| EMLA cream | lidocaine/prilocaine | 30g per 30 days |
| EMSAM HR TRANSDERMAL PATCH | SELEGILINE | 30 patches per 30 days |
| Emtriva 200mg | emtricitabine | 30 capsules per month |
| EMVERM 100 MG CHEWABLE TABLET | MEBENDAZOLE | 60 tablets per 30 days |
| ENABLEX ER TABLET | DARIFENACIN | 30 tablets per 30 days |
| Enbrel 25mg/0.5ml Prefilled Syringe; 25mg/0.5ml Solution | etanercept | 4ml per 28 days |
| Enbrel 50mg/ml Prefilled Syringe Solution; Mini 50mg/ml Cartridge Solution; SureClick Autoinjector 50mg/ml Solution | etanercept | Plaque psoriasis: 8 ml per 28 days for the first 3 months, then 4 ml per 28 days<br><br>All other diagnoses: 4 ml per month |
| ENGERIX-B PEDIATRIC SYRINGE/VIAL | HEPATITIS B VIRUS VACCINE | 3 vials/syringes per year |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Entadfi 5-5 mg cap | Finasteride/tadalafil | 30 caps per 30 days |
| Entocort EC 3 mg cap | Budesonide | 90 capsules per 30 days |
| ENTRESTO 24 MG/26 MG TABLET | SACUBITRIL/VALSARTAN | 60 tablets per 180 days |
| Entresto 49/51 and 97/103 | sacubitril/valsartan | 60 tablets per 30 days |
| ENTYVIO 300 MG/20 ML VIAL | VEDOLIZUMAB | 2 vials (40 ml) per 28 days for the first month, 1 vial (20 ml) per 28 days for the second month, then 1 vial (20 ml) per 56 days |
| Epipen | epinephrine | 1 kit (2 syringes) per 30 days |
| Epivir 100mg | lamivudine | 90 tablets per month |
| Epivir 150mg | lamivudine | 60 tablets per month |
| Epivir 300mg | lamivudine | 30 tablets per month |
| Epkinly 4mg/0.8 ml | Epcoritamab-bysp | 2 vials (1.6 ml) per 28 days |
| Epkinly 48 mg/0.8 ml | Epcoritamab-bysp | 4 vials (3.2ml) per 28 days for the first 3 months, then 2 vials (1.6ml) per 28 days for 6 months, then 1 vial (0.8ml) every 28 days for maintenance |
| Epzicom | abacavir/lamivudine | 30 tablets per month |
| EQUETRO 100 MG CAPSULE | CARBAMAZEPINE ER | 180 capsules per 30 days |
| EQUETRO 200 MG CAPSULE | CARBAMAZEPINE ER | 240 capsules per 30 days |
| EQUETRO 300 MG CAPSULE | CARBAMAZEPINE ER | 150 capsules per 30 days |
| ERGOMAR 2 MG TABLET SL | ERGOTAMINE TARTRATE | 22 tablets per 30 days |
| ERIVEDGE 150 MG CAPSULE | VISMODEGIB | 30 capsules per 30 days |
| Erleada 60 mg | Apalutamide | 120 tablets per 30 days |
| Erleada 240 mg | Apalutamide | 30 tabs per 30 days |
| Erygel | ERYTHROMYCIN GEL | 60g per 30 days |
| ESBRIET 267 MG CAPSULE/TABLET | PERFENIDONE | 207 tablets per 30 days |
| ESBRIET 801 MG TABLET | PERFENIDONE | 90 tablets per 30 days |
| ESGIC 50 MG/325 MG/40 MG CAPSULE/TABLET | BUTALBITAL/ACETAMINOPHEN/CAFFEINE | 18 tablets/capsules per 30 days |
| ESOMEPRAZOLE STRONTIUM 49.3 MG DR CAPSULE | ESOMEPRAZOLE STRONTIUM | 30 capsules per 30 days |
| Estradiol Twice-weekly Patch 0.025mg, 0.0375 mg, 0.05mg, 0.075 mg, 0.1 mg per 24 hr | Estradiol | 8 patches per 28 days |
| Eucrisa | Crisaborole | 60 grams per 30 days |
| EUFLEXXA 20 MG/2 ML SYRINGE | HYALURONIC ACID | 6 syringes (12 ml) every 6 months |
| EULIXIN 125 MG CAPSULE | FLUTAMIDE | 180 capsules per 30 days |
| EVEKEO 10 MG TABLET | AMPHETAMINE SULFATE | 180 tablets per 30 days |
| EVEKEO 5 MG TABLET | AMPHETAMINE SULFATE | 60 tablets per 30 days |
| EVEKEO 5MG, 10 MG ODT | AMPHETAMINE SULFATE | 90 tablets per 30 days |
| EVEKEO 15MG 20MG ODT | AMPHETAMINE SULFATE | 60 tablets per 30 days |
| EVISTA 60 MG TABLET | RALOXIFENE | 30 tablets per 30 days |
| Evotaz | atazanavir/cobicistat | 30 tablets per month |
| Evrysdi 0.75mg/mL Oral Powder for Solution | Risdiplam | 210mL per 30 days |
| EXALGO 8, 12, 16, 32 MG ER TABLET | HYDROMORPHONE ER | 30 tablets per 30 days |
| EXCEDRIN EXTRA STRENGTH 250 MG/250 MG/65 MG | ASPIRIN/ACETAMINOPHEN/CAFFEINE | 390 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| EXCEDRIN TENSION HEADACHE 500 MG/65 MG | ACETAMINOPHEN/CAFFEINE | 180 tablets per 30 days |
| Exelon | rivastigmine | 60 tablets per month |
| EXFORGE TABLET (5/160, 5/320, 10/160, 10/320 MG) | AMLODIPINE/VALSARTAN | 30 tablets per 30 days |
| EXFORGE HCT TABLET (5/160/12.5, 5/160/25, 10/160/12.5, 10/160/25, 10/320/25) | AMLODIPINE/VALSARTAN/HCTZ | 30 tablets per 30 days |
| Exkivity | Mobocertinib | 120 capsules per 30 days |
| EYLEA 2 MG/0.05 INTRAVITREAL INJECTION VIAL | AFLIBERCEPT | 2 vials (0.1 mL) per 28 days |
| Eylea HD Intravitreal Inj 8mg/0.07ml (114.3mg/ml) | Aflibercept | 0.14ml per 28 days |
| Famotidine 40mg/5 ml susp | Famotidine | 300 ml per 30 days |
| FAMVIR 125 and 250 MG TABLET | FAMCICLOVIR | 180 tablets per 30 days |
| FAMVIR 500 MG TABLET | FAMCICLOVIR | 120 tablets per 30 days |
| FANAPT TABLET AND TITRATION PACK | ILOPERIDONE | 60 tablets per 30 days |
| FARESTON 60 MG TABLET | TOREMIFENE | 30 tablets per 30 days |
| FARXIGA 5 AND 10 MG TABLET | DAPAGLIFLOZIN | 30 tablets per 30 days |
| FARYDAK 10, 15, 20 MG CAPSULE | PANOBINOSTAT | 15 capsules per 30 days |
| Fasenra 30 MG/1 ML | Benralizumab | 1 pen/syringe every 28 days for the first 3 doses, then 1 pen/syringe every 56 days |
| Felbatol 400 mg tab | Felbamate | 270 tablets per 30 days |
| Felbatol 600 mg tab | Felbamate | 180 tablets per 30 days |
| FELDENE 10 and 20 MG CAPSULE | PIROXICAM | 30 capsules per 30 days |
| FEMARA 2.5 MG TABLET | LETROZOLE | 30 tablets per 30 days |
| FENOGLIDE 120 MG TABLET | FENOFIBRATE | 30 tablets per 30 days |
| FENOGLIDE 40 MG TABLET | FENOFIBRATE | 60 tablets per 30 days |
| FENTANYL 37.5, 62.5, 87.5 MCG/HR PATCH | FENTANYL TRANSDERMAL | 10 patches per 30 days |
| FENTORA BUCCAL TABLET (100, 200, 300, 400, 600, 800 MCG) | FENTANYL CITRATE BUCCAL | 120 tablets per 30 days |
| FETZIMA ER CAPSULE (20, 40, 80, 120 MG) | LEVOMILNACIPRIN | 30 capsules per 30 days |
| FEXMID 7.5 MG TABLET | CYCLOBENZAPRINE | 90 tablets per 30 days |
| FIBRICOR 105 MG TABLET | FENOFIBRIC ACID | 30 tablets per 30 days |
| FIBRICOR 35 MG TABLET | FENOFIBRIC ACID | 60 tablets per 30 days |
| Filspari 200 and 400 mg | Sparsentan | 30 tabs per 30 days |
| Fintepla 2.2mg/mL Oral Solution | Fenfluramine | 360mL per 30 days |
| FIORICET 50 MG/300 MG/40 MG CAPSULE | BUTALBITAL/ACETAMINOPHEN/CAFFEINE | 18 capsules per 30 days |
| FIORICET 50 MG/325 MG/40 MG TABLET | BUTALBITAL/ACETAMINOPHEN/CAFFEINE | 18 tablets per 30 days |
| FIORICET W/ CODEINE 50MG/300 MG/40MG/30MG CAPSULE | BUTALBITAL/ACETAMINOPHEN/CAFFEINE/CODEINE | 18 capsules per 30 days |
| FIORICET W/ CODEINE 50MG/325 MG/40MG/30MG CAPSULE | BUTALBITAL/ACETAMINOPHEN/CAFFEINE/CODEINE | 18 capsules per 30 days |
| FIORINAL 50 MG/325 MG/40 MG CAPSULE | BUTALBITAL/ASA/CAFFEINE | 18 capsules per 30 days |
| FIORINAL W/ CODEINE 50 MG/325 MG/40 MG/30 MG CAPSULE | BUTALBITAL/ASA/CAFFEINE/CODEINE | 18 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Firazyr | icatabant acetate | 6 syringes per month |
| FLAGYL ER 750 MG TABLET | METRONIDAZOLE | 30 tablets per 30 days |
| FLECTOR 180 MG PATCH | DICLOFENAC | 60 patches per 30 days |
| FLEXERIL 5 and 10 MG TABLET | CYCLOBENZAPRINE | 90 tablets per 30 days |
| Flomax | tamsulosin | 60 capsules per month |
| Flonase nasal spray | fluticasone propionate | 1 nasal spray devices per month |
| FLONASE SENSIMIST 27.5 MCG SPRAY | FLUTICASONE FUROATE | 2 bottles (19.8mL) per 30 days |
| Flovent Diskus 250 mcg | fluticasone propionate inhaler | 4 inhalers per month |
| Flovent Diskus 50 and 100 mcg | fluticasone propionate inhaler | 1 inhaler per month |
| Flovent HFA 220 mcg | fluticasone propionate inhaler | 2 inhalers per month |
| Flovent HFA 44 and 110 mcg | fluticasone propionate inhaler | 1 inhaler per month |
| FLU VACCINE PEDIATRIC SYRINGE | INFLUENZA VIRUS VACCINE | 1 syringe per 28 days |
| FLU VACCINE SYRINGE and VIAL | INFLUENZA VIRUS VACCINE | 1 syringe/vial per 6 months |
| FLUMIST NASAL SPRAY | INFLUENZA VIRUS VACCINE | 1 dose (0.2mL) per 28 days |
| FLUOXETINE 60 MG TABLET | FLUOXETINE 60 MG TABLET | 30 tablets per 30 days |
| FLURBIPROFEN 100 MG TABLET | FLURBIPROFEN | 90 tablets per 30 days |
| FLURBIPROFEN 50 MG TABLET | FLURBIPROFEN | 120 tablets per 30 days |
| Focalin | dexmethylphenidate | 60 tablets per month |
| Focalin XR | dexmethylphenidate | 30 tablets per month |
| FORADIL AEROLIZER 12 MCG CAP | FORMOTEROL | 60 capsules per 30 days |
| FORFIVO XL 450 MG TABLET | BUPROPION | 30 tablets per 30 days |
| FORTAMET ER 1,000 MG TABLET | METFORMIN ER | 60 tablets per 30 days |
| FORTAMET ER 500 MG TABLET | METFORMIN ER | 90 tablets per 30 days |
| FORTAZ 500 MG, 1 GM, 2 GM VIAL and TWISTVIAL | CEFTAZIDIME | 90 vials per 30 days |
| FORTAZ 6 GM VIAL | CEFTAZIDIME | 30 vials per 30 days |
| FORTAZ-ISO-OSMOT 1 and 2 GM/50 ML | CEFTAZIDIME | 4500 mL per 30 days |
| Forteo | teriparatide | 1 prefilled pen per 28 days; 26 pens per lifetime |
| FORTESTA 10 MG GEL PUMP | TESTOSTERONE | 1 canister per 17 days |
| FORTICAL 200 UNITS NASAL SPRAY | CALCITONIN-SALMON | 1 bottle per 30 days |
| FOSAMAX 35 and 70 MG TABLET | ALENDRONATE | 4 tablets per 28 days |
| FOSAMAX 5, 10, 40 MG TABLET | ALENDRONATE | 30 tablets per 30 days |
| FOSAMAX 70 MG/75 ML ORAL SOLN | ALENDRONATE | 300mL per 28 days |
| FOSAMAX PLUS D TABLET (70 MG/2800 IU, 70 MG/5600 IU) | ALENDRONATE/CHOLECALCIFEROL | 4 tablets per 28 days |
| FOSRENOL CHEWABLE TABLET (500, 750, 1000 MG) | LANTHANUM CARBONATE | 90 tablets per 30 days |
| FOSRENOL POWDER PACKET (750 and 1000 MG) | LANTHANUM CARBONATE | 90 packets per 30 days |
| Fotivda | Tivozanib | 21 tablets per 28 days |
| Fragmin | dalteparin | 10 syringes per month |
| Freestyle Libre 10 day sensor | blood sugar diagnostic sensor | 3 sensors per 30 days |
| Freestyle Libre 14 day sensor (includes both Freestyle Libre and Freestyle Libre 2) | blood sugar diagnostic sensor | 2 sensors per 28 days |
| Freestyle Libre Reader (includes Freestyle Libre and Freestyle Libre 2) | | 1 per 365 days |

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|---|---|---|
| FROVA 2.5 MG TABLET | FROVATRIPTAN | 9 tablets per 30 days |
| Fulphila | Pegfilgrastim-imdb | 1 syringe per 14 days |
| FULYZAQ DR 125 MG TABLET | CROFELEMER | 60 tablets per 30 days |
| FURADANTIN 25 MG/5 ML SUSP | NITROFURANTOIN | 600mL per 30 days |
| FUZEON injection 90 MG VIAL and KIT | ENFUVIRTIDE | 60 vials per 30 days |
| FYCOMPA 0.5 MG/ML SUSPENSION | PERAMPANEL | 720mL per 30 days |
| FYCOMPA 2 MG TABLET | PERAMPANEL | 60 tablets per 30 days |
| FYCOMPA 4, 6, 8, 10, 12 MG TABLET | PERAMPANEL | 30 tablets per 30 days |
| Fylnetra | Pegfilgrastim-pbbk | 1 syringe per 14 days |
| Galafold | Miglastat | 16 capsules per 30 days |
| GARDASIL and GARDASIL 9 VACCINE | HPV VACCINE | 1 syringe/vial per 30 days |
| Gavreto 100 mg Capsule | pralsetinib | 120 capsules per 30 days |
| GELNIQUE 10% GEL PUMP | OXYBUTYNIN | 1 canister per 30 days |
| GELNIQUE 10% GEL SACHET | OXYBUTYNIN | 30 sachets per 30 days |
| GEL-ONE 30 MG/3 ML SYRINGE | HYALURONATE SODIUM | 2 syringes per 30 days |
| GELSYN-3 16.8 MG/2 ML SYRINGE | HYALURONATE SODIUM | 6 syringes per 21 days |
| Gemtesa tablets | vibegron | 30 tablets per 30 days |
| GENVISC 850 25 MG/2.5 ML SYRINGE | HYALURONATE SODIUM | 10 syringes per 35 days |
| Genvoya | elvitegravir/cobicistat/emtricitabine/tenofovir | 30 tablets per month |
| Geodon 20mg, 40mg, 80mg | ziprasidone | 60 capsules per month |
| Geodon 60mg | ziprasidone | 90 capsules per month |
| GIAZO 1.1 GRAM TABLET | BALSALAZIDE | 180 tablets per 30 days |
| Gilenya | Fingolimod | 30 capsules per month |
| GILOTRIF 20, 30, 40 MG TABLET | AFATINIB DIMALEATE | 30 tablets per 30 days |
| GLEEVEC 100 MG TABLET | IMATINIB MESYLATE | 180 tablets per 30 days |
| GLEEVEC 400 MG TABLET | IMATINIB MESYLATE | 60 tablets per 30 days |
| Glucagon Emergency Kit | Glucagon | 2 kits per month |
| GLUCOPHAGE 1,000 MG TABLET | METFORMIN | 75 tablets per 30 days |
| GLUCOPHAGE 500 MG TABLET | METFORMIN | 150 tablets per 30 days |
| GLUCOPHAGE 850 MG TABLET | METFORMIN | 90 tablets per 30 days |
| GLUCOPHAGE XR 500 MG TABLET | METFORMIN | 150 tablets per 30 days |
| GLUCOPHAGE XR 750 MG TABLET | METFORMIN | 90 tablets per 30 days |
| GLUCOTROL 5 and 10 MG TABLET | GLIPIZIDE | 120 tablets per 30 days |
| GLUCOTROL XL 10 MG TABLET | GLIPIZIDE ER | 60 tablets per 30 days |
| GLUCOTROL XL 2.5 and 5 MG TABLET | GLIPIZIDE ER | 30 tablets per 30 days |
| GLUCOVANCE TABLET (1.25/250, 2.5/500, 5/500 MG) | GLYBURIDE/METFORMIN | 120 tablets per 30 days |
| GLUMETZA ER 1000 MG TABLET | METFORMIN ER | 60 tablets per 30 days |
| GLUMETZA ER 500 MG TABLET | METFORMIN ER | 90 tablets per 30 days |
| GLYNASE 1.5 and 3 MG TABLET | GLYBURIDE MICRONIZED | 120 tablets per 30 days |
| GLYNASE 6 MG TABLET | GLYBURIDE MICRONIZED | 60 tablets per 30 days |
| GLYSET 25, 50, 100 MG TABLET | MIGLITOL | 90 tablets per 30 days |
| GLYXAMBI TABLET (10/5, 25/5 MG) | Empagliflozin/linagliptin | 30 tablets per 30 days |

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|---|---|---|
| Gocovri 68.5 mg | amantadine | 30 capsules per month |
| Gocovri 137 mg | Amantadine | 60 capsules per month |
| GOODY'S EX-STR POWDER PACKET 500 MG/325 MG/CAFFEINE | ASPIRIN/ACETAMINOPHEN/CAFFEINE | 240 packets per 30 days |
| Gralise tab 300, 450 mg | Gabapentin | 30 tabs per 30 days |
| Gralise tab 600, 750, 900 mg | Gabapentin | 60 tabs per 30 days |
| Grastek | Timothy grass pollen | 30 tablets per month |
| Griseofulvin microcrystalline susp 125mg/5ml | Griseofulvin | 600 ml per 30 days |
| Hadlima 40mg/0.4ml Prefilled Syringe; Auto-Injector; 40mg/0.8ml Prefilled Syringe; Auto-Injector | Adalimumab-bwwd | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter<br>HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Hadlima Starter Pack | Adalimymab-bwwd | 1 pack per 6 months |
| Halcion 0.125mg | triazolam | 120 tablets per month |
| Halcion 0.25mg | triazolam | 60 tablets per month |
| Haldol 0.5mg, 1mg, 2mg | haloperidol | 90 tablets per month |
| Haldol 10mg | haloperidol | 90 tablets per month |
| Haldol 20mg | haloperidol | 30 tablets per month |
| Haldol 5mg | haloperidol | 120 tablets per month |
| HAVRIX SYRINGE and VIAL | HEPATITIS A VIRUS vaccine | 1 syringe/vial per 30 days |
| HEPSERA 10 MG TABLET | ADEFOVIR DIPIVOXIL | 30 tablets per 30 days |
| HETLIOZ 20 MG CAPSULE | TASIMELTEON | 30 capsules per 30 days |
| Hetlioz LQ suspension | tasmelteon | 158 mL per 30 days |
| HORIZANT ER 300 and 600 MG TABLET | GABAPENTIN ENACARBIL | 60 tablets per 30 days |
| Hulio 20mg/0.4ml Prefilled Syringe Kit | Adalimumab-fkjp | JIA (15-30 kg): 2 syringes per 28 days<br>Ped Crohns (<40kg): 6 syringes for the first 28 days, then 2 syringes per 28 days thereafter |
| Hulio 40mg/0.8ml Prefilled Syringe Kit; Auto-injector Kit | Adalimumab-fkjp | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter<br>HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Hulio Starter Pack | Adalimumab-fkjp | 1 pack per 6 months |
| Humalog and Humalog Mix (50-50 and 75-25), Humalog Tempo | insulin lispro | 30 mL per month |
| Humira 10mg syringe | adalimumab | JIA (<15kg): 2 syringes per 28 days |
| Humira 20mg syringe | adalimumab | JIA (15-30 kg): 2 syringes per 28 days |

| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| | | Ped Crohns (<40kg): 6 syringes for the first 28 days, then 2 syringes per 28 days thereafter |
| Humira 40mg syringe | adalimumab | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter<br>HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| HUMIRA STARTER KIT | ADALIMUMAB | 1 kit per 6 months |
| Humulin N, R (U-100 and U-500), 70/30 | human insulin isophane/ human insulin regular | 30 mL per month |
| HYALGAN SYRINGE and VIAL (10 MG/ML and 20 MG/2 ML) | HYALURONATE SODIUM | 10 syringes/vials per 35 days |
| Hycet solution | hydrocodone/acetaminophen | 2700 mL per month |
| Hycodan | hydrocodone/homatropine | 900 ml per month |
| Hycodan | hydrocodone/homatropine | 180 tablets per month |
| HYDERGINE 1 MG TABLET | ERGOLOID MESYLATES | 90 tablets per 30 days |
| HYDROCODONE/APAP 2.5-167 MG/5 ML ORAL SOLUTION | HYDROCODONE/ACETAMINOPHEN | 1800mL per 30 days |
| HYDROCODONE/APAP 5-217 MG/10 ML ORAL SOLUTION | HYDROCODONE/ACETAMINOPHEN | 3000mL per 30 days |
| HYDROXYPROGESTERONE CAPROATE 1.25 GM/5 ML MDV | HYDROXYPROGESTERONE CAPROATE | 1 vial per 30 days |
| HYMOVIS 24 MG/3 ML SYRINGE | HYALURONATE | 4 syringes per 14 days |
| HYSINGLA TABLET (20, 30, 40, 60, 80, 100, 120 MG) | HYDROCODONE ER | 30 tablets per 30 days |
| HYTRIN 1, 2, 5 MG CAPSULE | TERAZOSIN | 30 capsules per 30 days |
| HYTRIN 10 MG CAPSULE | TERAZOSIN | 60 capsules per 30 days |
| HYZAAR 100-12.5 and 100-25 MG TAB | LOSARTAN/HCTZ | 30 tablets per 30 days |
| HYZAAR 50-12.5 TABLET | LOSARTAN/HCTZ | 60 tablets per 30 days |
| IBRANCE 75, 100, 125 MG CAPSULE | PALBOCICLIB | 30 capsules per 30 days |
| Ibsrela | Tenapanor | 60 tablets per 30 days |
| IBUPROFEN 100 MG/5 ML LIQUID | IBUPROFEN | 1800mL per 30 days |
| IBUPROFEN 50 MG/1.25 ML LIQUID | IBUPROFEN | 240mL per 30 days |
| IBUPROFEN TABLET/CAPLET (100, 200, 400, 600, 800 MG) | IBUPROFEN | 120 tablets/caplets per 30 days |
| Icatibant acetate 30mg/3 ml | Icatibant acetate | 6 syringes per month |
| ICLUSIG 15 MG TABLET | PONATINIB | 60 tablets per 30 days |
| ICLUSIG 45 MG TABLET | PONATINIB | 30 tablets per 30 days |
| Idacio; Idacio Crohn's Disease/UC; Idacio Plaque Psoriasis 40mg/0.8ml Auto-Injector Kit, Prefilled Syringe | Adalimumab-aacf | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter |

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|---|---|---|
| | | HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Idacio Starter Pack | Adalimumab-aacf | 1 pack per 6 months |
| IDHIFA 50 and 100 MG TABLET | ENASIDENIB | 30 tablets per 30 days |
| Ilaris 150 mg vial | canakinumab | 2 vials per 28 days |
| Ilumya | tildrakizumab-asmn | 1 syringe per 28 days for first 2 months, then 1 syringe per 84 days thereafter |
| Iluvien 0.19 mg Intraocular Implant | fluocinolone intraocular | 2 implants per year |
| IMBRUVICA 140 MG CAPSULE | IBRUTINIB | 90 capsules per 30 days |
| IMBRUVICA 70MG CAPSULE | IBRUTINIB | 30 capsules per 30 days |
| IMBRUVICA TAB (140, 280, 420, 560 MG) | IBRUTINIB | 30 tablets per 30 days |
| Imbruvica 70mg/ml suspension | Ibrutinib | 240 ml/30 days |
| Imcivree | Setmelanotide | 9 ml per 30 days |
| Imitrex 100mg | sumatriptan | 9 tablets per month |
| Imitrex 25mg, 50mg | sumatriptan | 18 tablets per month |
| Imitrex Injection | sumatriptan | 2 boxes (4 injections) per month |
| Imitrex Nasal Spray | sumatriptan | 1 box (6 spray units) per month |
| Imodium 2 mg capsule | loperamide | 240 capsules per 30 days |
| Imodium A-D 1 mg/5 ml solution | loperamide | 2400 ml per 30 days |
| Imodium A-D 1 mg/7.5 ml (2 mg/15 ml) Susp | loperamide | 3600 ml per 30 days |
| Impavido 50 mg capsule | miltefosine | 90 capsules per 30 days |
| Implanon 68 mg Implant | etonogestrel implant | 1 device every 3 years |
| Incruse Ellipta | umeclidinium | 1 inhaler per month |
| Inderal Xl capsule | propranolol | 30 capsules per 30 days |
| Indocin 25 mg/5 ml liquid | indomethacin | 1200 ml per 30 days |
| Indocin 50 mg Suppository | indomethacin | 120 suppositories per 30 days |
| Indocin capsule | indomethacin | 120 capsules per 30 days |
| Indocin ER 75 mg capsule | indomethacin | 60 capsules per 30 days |
| Inflectra 100mg single use vial | Infliximab-dyyb | 14 vials per 28 days |
| Ingrezza | Valbenazine | 30 capsules per month |
| Inlyta 1 mg tablet | axitinib | 180 tablets per 30 days |
| Inlyta 5 mg tablet | axitinib | 120 tablets per 30 days |
| Innopran Xl capsule | propranolol | 30 capsules per 30 days |
| Inpefa tab 200mg | Sotaglifozin | 60 tabs per 30 days |
| InPen smart insulin pen | Reusable insulin pen | 2 pens per 365 days |
| Inqovi | Decitabine/cedazuridine | 5 tablets per 28 days |
| Inrebic | Fedratinib | 120 capsules per 30 days |
| Inspra 25 mg tablet | eplerenone | 120 tablets per 30 days |
| Inspra 50 mg tablet | eplerenone | 60 tablets per 30 days |
| Intal inhalation solution | cromolyn sodium | 120 vials or 240mL per month |
| Intelence 100 and 200 mg | etravirine | 60 tablets per month |
| Intuniv | guanfacine | 30 tablets per month |
| Invanz 1 Gm vial | ertapenem | 30 vials per 30 days |
| Invega ER 1.5 mg, 3 mg, 9 mg tablet | palipERidone ER | 30 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Invega ER 6 mg tablet | palipERidone ER | 60 tablets per 30 days |
| Invega Sustenna | paliperidone palmitate | 1 syringe per 28 days |
| Invirase 200mg | saquinavir | 300 capsules per month |
| Invirase 500mg | saquinavir | 120 tablets per month |
| Invokamet 150/1000 mg, 150/500 mg, 50/1000 mg tablet | canagliflozin/metformin | 60 tablets per 30 days |
| Invokamet 50/500 mg tablet | canagliflozin/metformin | 90 tablets per 30 days |
| Invokamet XR tablet | canagliflozin/metformin | 60 tablets per 30 days |
| Invokana 100 mg tablet | canagliflozin | 60 tablets per 30 days |
| Invokana 300 mg tablet | canagliflozin | 30 tablets per 30 days |
| Iressa 250 mg tablet | gefitinib | 60 tablets per 30 days |
| Isentress | raltegravir potassium | 60 tablets per month |
| Isentress 100 mg PowdER Packets | raltegravir powder | 60 packets per 30 days |
| Isentress Chewable tablet | raltegravir | 180 tablets per 30 days |
| Iyuzeh Ophth Sol 0.005% | Latanoprost (PF) | 6ml per 30 days |
| Izervay Intravitreal Sol 2mg/0.1ml (20mg/ml) | Avacincaptad Pegol | 0.2ml per 28 days |
| Jakafi tablet | ruxolitinib | 60 tablets per 30 days |
| Jalyn 0.5 mg/0.4 mg capsule | dutasteride/tamsulosin | 30 capsules per 30 days |
| Janumet | sitagliptin/metformin | 60 tablets per month |
| Janumet XR 100/1000 | sitagliptin/metformin XR | 30 tablets per month |
| Janumet XR 50/1000, 50/500 | sitagliptin/metformin XR | 60 tablets per month |
| Januvia | sitagliptin | 30 tablets per month |
| Jardiance | Empagliflozin | 30 tablets per month |
| Jaypirca 50 mg tab | Pirtobrutinib | 120 tabs per 30 days |
| Jaypirca 100 mg tab | Pirtobrutinib | 60 tabs per 30 days |
| Jentadueto tablet | linagliptin/metformin | 60 tablets per 30 days |
| Jentadueto XR 2.5 mg/1000 mg tablet | linagliptin/metformin ER | 60 tablets per 30 days |
| Jentadueto XR 5 mg/1000 mg tablet | linagliptin/metformin ER | 30 tablets per 30 days |
| Jesduvroq Tab 1mg, 2mg, 4mg, 6mg, 8mg | Daprodustat | 90 tablets per 30 days |
| Jetrea vial | ocriplasmin | 2 vials per 30 days |
| Joenja tab 70mg | Leniolisib | 60 tabs per 30 days |
| Jornay PM capsule | Methylphenidate | 30 capsules per 30 days |
| Journavx tablet | Suzetrigine | 29 tablets once per 42 days |
| Juluca 50-25 mg tablet | dolutegravir and rilpivirine | 30 tablets per 30 days |
| Juxtapid capsule | lomitapide | 30 capsules per 30 days |
| Kadian ER 10 and 20 mg capsule | morphine sulfate ER | 60 capsules per 30 days |
| Kadian ER 30, 40, 50, 60, 70, 80, 100, 200 mg capsule | morphine sulfate ER | 30 capsules per 30 days |
| Kalbitor | Ecallantide | 4 kits per month |
| Kaletra 100-25 | lopinavir/ritonavir | 240 tablets per month |
| Kaletra 200-50 | lopinavir/ritonavir | 120 tablets per month |
| Kalydeco 150 mg tablet | ivacaftor | 60 tablets per 30 days |
| Kalydeco Granules Packet 5.8, 13.4, 25, 50, 75 | ivacaftor | 60 packets per 30 days |
| Katerzia susp 1 mg/1 ml | Amlodipine | 150 ml per 30 days |
| Kapvay 0.1 mg ER tablet | clonidine ER | 120 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Kazano tablet | alogliptin/metformin | 60 tablets per 30 days |
| Kenalog cream, lotion, ointment | triamcinolone | 120g per 30 days |
| Kenalog In Orabase Dental Paste | triamcinolone | 15 grams per 30 days |
| Keppra 100 mg/ml Oral Soln | levetiracetam | 1200 ml per 30 days |
| Keppra 1000 mg tablet | levetiracetam | 90 tablets per 30 days |
| Keppra 250 and 500 mg tablet | levetiracetam | 180 tablets per 30 days |
| Keppra 500 mg/5 ml Injection vial | levetiracetam | 900 ml per 30 days |
| Keppra 750 mg tablet | levetiracetam | 120 tablets per 30 days |
| Keppra XR 500 mg tablet | levetiracetam | 180 tablets per 30 days |
| Keppra XR 750 mg tablet | levetiracetam | 120 tablets per 30 days |
| Kerendia | Finerenone | 30 tablets per 30 days |
| Kesimpta 20mg/0.4 ml | Ofatumumab | 3 pens per 28 days for the first month, then 1 pen every 28 days |
| Ketonazole cream | Ketonazole | 120 grams/ 30 days |
| Ketoprofen 50 mg capsule | ketoprofen | 180 capsules per 30 days |
| Ketoprofen 75 mg capsule | ketoprofen | 120 capsules per 30 days |
| Ketoprofen ER 200 mg capsule | ketoprofen | 30 capsules per 30 days |
| Kevzara Syringe | sarilumab | 2 syringes per 28 days |
| Kisqali 200 mg Daily Dose (21 X 200 mg tablets) | ribociclib succinate | 21 tablets per 28 days |
| Kisqali 400 mg Daily Dose (42 X 200 mg tablets) | ribociclib succinate | 42 tablets per 28 days |
| Kisqali 600 mg Daily Dose (63 X 200 mg tablets) | ribociclib succinate | 63 tablets per 28 days |
| Kisqali Femara Co-Pack | ribociclib succinate/letrozole | 1 pack per 28 days |
| Kitabis Pak 300 mg/5 ml Nebulizer Kit | tobramycin | 280ml per 28 days |
| Klisyri packets | tirbanibulin | 5 packets per 30 days |
| Klonopin 0.5mg, 1mg | clonazepam | 120 tablets per month |
| Klonopin 2mg | clonazepam | 90 tablets per month |
| Klonopin Wafers 1 mg ODT | clonazepam odt | 120 wafers per 30 days |
| Klonopin Wafers 2 mg ODT | clonazepam odt | 90 wafers per 30 days |
| Klonopin Wafers ODT (0.125, 0.25, 0.5 MG) | clonazepam odt | 180 wafers per 30 days |
| Kombiglyze XR 2.5 mg/1000 mg tablet | saxagliptin/metformin ER | 60 tablets per 30 days |
| Kombiglyze XR 5/500 and 5/1000 mg tablet | saxagliptin/metformin ER | 30 tablets per 30 days |
| Konvomep 2-84mg/ml Oral Susp | Omeprazole-Sodium Bicarbonate | 21.43ml per day |
| Korlym 300 mg tablet | mifepristone | 120 tablets per 30 days |
| Koselugo 10 mg | Selumetinib | 240 capsules per 30 days |
| Koselugo 25 mg capsule | selumetinib | 120 capsules per 30 days |
| Krazati tablet | Adagrasib | 180 tabs per 30 days |
| Krystexxa | pegloticase | 2 vials per 28 days |
| Kyleena 19.5 mg Intrauterine System | levonorgestral | 1 device every 5 years |
| Kynamro 200 mg/ml Syringe | mipomersen | 4 syringes per 28 days |
| Kytril 1 mg tablet | granisetron | 2 tablets per day |
| Kyzatrex 100, 150, 200 mg cap | Testosterone undecanoate | 120 caps per 30 days |
| Lagevrio 100mg Capsule | Molnupiravir | 80 capsules (2 cycles) per 30 days |
| Lamictal (all strengths) | lamotrigine | 60 tablets per month |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Lamictal XR (all strengths) | lamotrigine | 60 tablets per month |
| Lamisil | terbinafine | 90 tablets per year |
| Lantus | insulin glargine | 30 mL per month |
| Latuda | lurasidone | 30 tablets per month |
| Latuda 80mg | lurasidone | 60 tablets per month |
| Lazanda Nasal Spray | fentanyl citrate nasal | 15 bottles per 30 days |
| Lefluniclo 20mg tab/1% gel Kit | Leflunomide tab/diclofenac gel | 1 box (30 tabs/100g tube) per 30 days |
| Lemtrada 12 mg/1.2 ml vial | alemtuzumab | 5 vials per 365 days |
| Lenvima capsules | lenvatinib mesylate | 90 capsules per 30 days |
| Lescol capsule | fluvastatin | 60 capsules per 30 days |
| Lescol Xl 80 mg tablet Sa | fluvastatin | 30 tablets per 30 days |
| Letairis | ambrisentan | 30 tablets per month |
| Levalbuterol HFA | Levalbuterol | 2 inhalers per 30 days |
| Levemir | insulin detemir | 30 mL per month |
| Levo-Dromoran 2 mg tablet | levorphanol | 120 tablets per 30 days |
| Lexapro 10mg | escitalopram | 45 tablets per 30 days |
| Lexapro 5mg, 20mg | escitalopram | 30 tablets per month |
| Lexiva 700mg | fosamprenavir | 120 tablets per month |
| Lialda Dr 1.2 Gram tablet | mesalamine | 120 tablets per 30 days |
| Librax 2.5 mg/5 mg capsule | clidinium/chlordiazepoxide | 240 capsules per 30 days |
| Librium 5mg, 10mg, 25mg | chlordiazepoxide | 120 capsules per month |
| Lice treatment 1% crème rinse | Permethrin | 118 ml per 28 days |
| Lidocaine 5% patch | Lidocaine | 90 patches per 30 days |
| Lidocaine ointment | Lidocaine | 180 grams per 30 days |
| Liletta 52 mg System (IUD) | levonorgestrel intrauterine | 1 device every 4 years |
| Limbitrol 12.5/5 mg tablet | amitriptyline/chlordiazepoxide | 180 tablets per 30 days |
| Limbitrol Ds 25/10 mg tablet | amitriptyline/chlordiazepoxide | 180 tablets per 30 days |
| Linzess capsule | linaclotide | 30 capsules per 30 days |
| Lioresal 10 mg tablet | baclofen | 150 tablets per 30 days |
| Lioresal 20 mg tablet | baclofen | 120 tablets per 30 days |
| Lipitor | Atorvastatin | 30 tablets per month |
| Lipofen 150 mg capsule | fenofibrate | 30 capsules per 30 days |
| Lipofen 50 mg capsule | fenofibrate | 60 capsules per 30 days |
| Liqrev 10mg/ml susp | Sildenafil citrate | 1 bottle (122 ml) per 20 days |
| Lithobid 150mg | lithium | 360 capsules per month |
| Lithobid 300mg | lithium | 180 capsules per month |
| Lithobid 600mg | lithium | 90 capsules per month |
| Lithobid XR 300mg, 450mg | lithium | 120 tablets per month |
| Livalo tablet | pitavastatin | 30 tablets per 30 days |
| Livmarli liquid | Maralixibat | 90 ml per 30 days |
| Livtencity | Marabavir | 120 tablets per 30 days |
| Locoid cream, ointment, solution | Hydrocortisone butyrate | 120g per 30 days |
| Lodine 200 mg capsule | etodolac | 120 capsules per 30 days |
| Lodine 300 mg capsule | etodolac | 90 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Lodine 400 and 500 mg tablet | etodolac | 60 tablets per 30 days |
| Lodine Xl 400 and 500 mg tablet | etodolac ER | 60 tablets per 30 days |
| Lodine Xl 600 mg tablet | etodolac ER | 30 tablets per 30 days |
| Lodoco 0.5mg Tablet | Colchicine | 30 tablets per 30 days |
| Lodosyn 25 mg tablet | carbidopa | 240 tablets per 30 days |
| Lofibra capsule | fenofibrate micronized | 30 capsules per 30 days |
| Lofibra tablet | fenofibrate micronized | 30 tablets per 30 days |
| Lomaira tablet | Phenteramine Hydrochloride | 90 tablets per 30 days |
| Lonhala Magnair 25 mcg Starter/Refill | glycopyrrolate | 60 vials per 30 days |
| Lonsurf 15 mg/6.14 mg tablet | trifluridine/tipiracil | 100 tablets per 28 days |
| Lonsurf 20 mg/8.19 mg tablet | trifluridine/tipiracil | 80 tablets per 28 days |
| Lopid 600 mg tablet | gemfibrozil | 60 tablets per 30 days |
| Loprox cream and gel | CICLOPIROX | 120g per 30 days |
| Loprox shampoo and suspension | CICLOPIROX | 120mL per 30 days |
| Lorazepam Intensol 2mg/ml | lorazepam concentrate | 90mL per 30 days |
| Lorbrena 100mg | lorlatinib | 30 tablets per 30 days |
| Lorbrena 25mg | lorlatinib | 90 tablets per 30 days |
| Lorcet, Lorcet HD, Lorcet Plus | hydrocodone/acetaminophen | 180 tablets per month |
| Lortab | hydrocodone/acetaminophen | 180 tablets per month |
| Lortab Elixir 10 mg-300 mg/15 ml | hydrocodone/acetaminophen | 2250 ml per 30 days |
| Lorzone tablet | chlorzoxazone | 120 tablets per 30 days |
| Lotensin Hct tablet | benazepril/hydrochlorothiazide | 30 tablets per 30 days |
| Lotensin tablet | benazepril | 60 tablets per 30 days |
| Lotrel capsule | amlodipine/benazepril | 30 capsules per 30 days |
| Lotrimin 1% cream | CLOTRIMAZOLE | 120g per 30 days |
| Lotrimin 1% solution | CLOTRIMAZOLE | 120mL per 30 days |
| Lotronex tablet | alosetron | 60 tablets per 30 days |
| Lovaza 1 Gram capsule | omega-3-acid ethyl esters | 120 capsules per 30 days |
| Lovenox | enoxaparin | 28 syringes per 28 days |
| Loxitane 50mg | loxapine | 150 capsules per month |
| Loxitane 5mg, 10mg, 25mg | loxapine | 120 capsules per month |
| Lucentis Syringe and Vial | ranibizumab | 2 syringes/vials per 28 days |
| Lumakras 120 mg | Sotorasib | 120 tablets per 30 days |
| Lumakras 320 mg | Sotorasib | 90 tablets per 30 days |
| Lumryz pack for suspension 4.5, 6, 7.5, 9 gram | Sodium oxabate | 30 packets per 30 days |
| Lunesta (all strengths) | Eszopiclone | 30 tablets per 30 days |
| Lupaneta Pack 11.25/5 mg 3-Month Kit | leuprolide acetate/norethindrone acetate | 1 kit every 90 days |
| Lupaneta Pack 3.75/5 mg 1-Month Kit | leuprolide acetate/norethindrone acetate | 1 kit every 30 days |
| Lupkynis tablets | voclosporin | 180 tablets per 30 days |
| Lupron Depot | leuprolide acetate | 1 kit per month |
| Lupron Dept-Ped 45mg/1.5ml (6-month) | Leuprolide acetate | 1 kit per 168 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Lutathera | Lutetium Lu 177 dotatate | 20 ml per 56 days; 80 ml per lifetime |
| Luvox 25mg, 50mg, 100 mg | fluvoxamine | 90 tablets per month |
| Luxiq 0.1% cream and ointment | Betamethasone valerate | 120g per 30 days |
| Luxiq 0.1% Lotion | Betamethasone valerate | 120mL per 30 days |
| Lynparza 100 and 150 mg tablet | olaparib | 120 tablets per 30 days |
| Lynparza 50 mg capsule | olaparib | 480 capsules per 30 days |
| Lyrica 225mg, 300mg | pregabalin | 60 capsules per month |
| Lyrica 25mg, 50mg, 75mg, 100mg, 150mg, 200mg | pregabalin | 90 capsules per month |
| Lyrica Cr 330 mg tablet | pregabalin | 60 tablets per 30 days |
| Lyrica Cr 82.5 and 165 mg tablet | pregabalin | 90 tablets per 30 days |
| Lysteda 650 mg tablet | tranexamic acid | 180 tablets per 30 days |
| Lytgobi 4mg (12mg DosePak) | Futibatinib | 4 boxes (84 tab) per 28 ds |
| Lytgobi 4mg (16mg DosePak) | Futibatinib | 4 boxes (112 tab) per 28 ds |
| Lytgobi 4mg (20mg DosePak) | Futibatinib | 4 boxes (140 tab) per 28 ds |
| Lyumjev | Insulin lispro | 30 ml per 30 days |
| Macrobid 100 mg capsule | nitrofurantoin monohyd-macro | 60 capsules per 30 days |
| Macrodantin 25 mg capsule | nitrofurantoin macrocrystal | 30 capsules per 30 days |
| Macrodantin 50 and 100 mg capsule | nitrofurantoin macrocrystal | 120 capsules per 30 days |
| Macugen 0.3 mg/0.09 ml Intravitreal Inj. Syringe | pegaptanib sodium | 2 syringes every 42 days |
| Makena 1250 mg/5 ml Multi-Dose vial | hydroxyprogesterone caproate | 1 vial per 35 days |
| Makena 250 mg/ml Single-Dose vial | hydroxyprogesterone caproate | 4 vials per 28 days |
| Makena 275 mg/1.1 ml Auto-Injector | hydroxyprogesterone caproate | 4 syringes per 28 days |
| Malarone 250 mg/100 mg tablet | atovaquone/proguanil | 120 tablets per 30 days |
| Malarone 62.5 mg/25 mg Pediatric tablet | atovaquone/proguanil | 90 tablets per 30 days |
| Marinol 10 mg capsule | dronabinol | 90 capsules per 30 days |
| Marinol 2.5 and 5 mg capsule | dronabinol | 180 capsules per 30 days |
| Marplan | Isocarboxazid | 180 tablets per month |
| Masks | | 2 masks per 365 days |
| MAVIK 1 and 2 MG TABLET | TRANDOLAPRIL | 30 tablets per 30 days |
| MAVIK 4 MG TABLET | TRANDOLAPRIL | 60 tablets per 30 days |
| Mavyret 50-20mg Pak | Glecaprevir/pibrentasvir | 840 packets per 365 days |
| MAVYRET 100-40 MG TABLET | Glecaprevir/pibrentasvir | 588 tablets per 365 days |
| Maxair Autohaler | pirbuterol acetate | 1 inhaler per month |
| Maxalt, Maxalt MLT | rizatriptan | 18 tablets per month |
| MECLOFENAMATE 100 MG CAPSULE | MECLOFENAMATE | 120 tablets per 30 days |
| MECLOFENAMATE 50 MG CAPSULE | MECLOFENAMATE | 180 tablets per 30 days |
| Mekinist 0.5mg tab | trametinib | 90 tablets per 30 days |
| Mekinist 2mg tab | trametinib | 30 tablets per 30 days |
| Mekinist soln 0.05mg/ml (4.7mg bottle) | Trametinib | 13 bottles (61.1mg) per 30 days |
| MENACTRA VACCINE VIAL | MENINGOCOCCAL A, C, Y, W-135 VACCINE | 1 vial per 30 days |
| MENOMUNE-A/C/Y/W-135 VIAL VACCINE | MENINGOCOCCAL A, C, Y, W-135 VACCINE | 1 vial per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| MENVEO A/C/Y/W-135 DIP VACCINE VIAL KIT | MENINGOCOCCAL A, C, Y, W-135 VACCINE | 1 vial per 30 days |
| MEPRON 750 MG/5 ML SUSPENSION | ATOVAQUONE | 600ml per 30 days |
| Metadate CD | methylphenidate extended release | 30 capsules per month |
| METAGLIP TAB (2.5/250, 2.5/500, 5/500 MG) | GLIPIZIDE/METFORMIN | 120 tablets per 30 days |
| Methadone | methadone | 90 tablets per month |
| METHITEST 10 MG TABLET | METHYLTESTOSTERONE | 150 tablets per 30 days |
| Methylin | methylphenidate solution | 900 ml per month |
| METHYLPHENIDATE ER 45, 63, 72 MG TAB | METHYLPHENIDATE ER | 30 tablets per 30 days |
| MEVACOR 10 and 20 MG TABLET | LOVASTATIN | 45 tablets per 30 days |
| MEVACOR 40 MG TABLET | LOVASTATIN | 60 tablets per 30 days |
| MIACALCIN 200 UNIT NASAL SPRAY | CALCITONIN-SALMON | 3.9 mL per 30 days |
| MIACALCIN 200 UNIT/ML VIAL | CALCITONIN-SALMON | 15 mL per 30 day s |
| MICARDIS 20, 40, 80 MG TABLET | TELMISARTAN | 30 tablets per 30 days |
| MICARDIS HCT 40/12.5 MG TAB | TELMISARTAN/HCTZ | 30 tablets per 30 days |
| MICARDIS HCT 80/12.5 MG TAB | TELMISARTAN/HCTZ | 60 tablets per 30 days |
| MICARDIS HCT 80/25 MG TABLET | TELMISARTAN/HCTZ | 30 tablets per 30 days |
| MICROLET 2 LANCING DEVICE | BLOOD GLUCOSE LANCING DEVICE | 1 lancing device per month |
| MIDAZOLAM 2 MG/ML SYRUP | MIDAZOLAM | 300mL per 30 days |
| Mifeprex | mifepristone | 1 tablet per 30 days |
| MIGERGOT SUPPOSITORY | Ergotamine tartrate/caffeine | 22 suppositories per month |
| MIGRANAL 4 MG/ML NASAL SPRAY | DIHYDROERGOTAMINE | 9 mL per 30 days |
| MILTOWN 200 and 400 MG TABLET | MEPROBAMATE | 120 tablets per 30 days |
| MIRAPEX ER TABLET (all strengths) | PRAMIPEXOLE ER | 30 tablets per 30 days |
| MIRAPEX TABLET (all strengths) | PRAMIPEXOLE | 90 tablets per 30 days |
| MITIGARE 0.6 MG CAPSULE | COLCHICINE | 90 tablets per 30 days |
| M-M-R II VACCINE VIAL | MEASLES, MUMPS, RUBELLA VACCINE | 1 vial per 28 days |
| MOBAN 25 MG TABLET | MOLINDONE | 270 tablets per 30 days |
| MOBAN 5 and 10 MG TABLET | MOLINDONE | 120 tablets per 30 days |
| MOBIC 15 MG TABLET | MELOXICAM | 30 tablets per 30 days |
| MOBIC 7.5 MG TABLET | MELOXICAM | 60 tablets per 30 days |
| MOBIC 7.5 MG/5 ML LIQUID | MELOXICAM | 300 mL per 30 days |
| Modafinil 100mg, 200mg | modafinil | 30 tablets per 30 days |
| MONOPRIL 10 and 20 MG TABLET | FOSINOPRIL | 60 tablets per 30 days |
| MONOPRIL 40 MG TABLET | FOSINOPRIL | 30 tablets per 30 days |
| MONOPRIL-HCT 10 MG/12.5 MG TAB | Fosinopril/HCTZ | 60 tablets per 30 days |
| MONOPRIL-HCT 20 MG/12.5 MG TAB | Fosinopril/HCTZ | 60 tablets per 30 days |
| MONOVISC 88 MG/4 ML SYRINGE | HYALURONATE SODIUM | 8 mL per 30 days |
| MORGIDOX KIT (1x50 MG, 1x100 MG, 2x100 MG) | DOXYCYCLINE/Skin cleanser | 1 kit per month |
| MORPHABOND ER 15, 30, 60, 100 MG TABLET | MORPHINE SULFATE | 60 tablets per 30 days |
| MORPHINE 20 MG/ML CONCENTRATE (INTENSOL) | MORPHINE SULFATE | 270 mL per 30 days |
| Morphine sulfate oral solution 10mg/5mL | morphine sulfate solution | 900 ml per month |
| Morphine sulfate oral solution 20mg/5mL | Morphine sulfate solution | 450 ml per month |

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|---|---|---|
| Motegrity tablet | Prucalopride | 30 tablets per 30 days |
| Mounjaro 2.5, 5, 7.5, 10, 12.5, 15mg | Tirzepatide | 4 pens per 28 days |
| MOVANTIK 12.5 and 25 MG TABLET | NALOXEGOL | 30 tablets per 30 days |
| Moxeza | Moxifloxacin HCL Drops | 1 bottle per month |
| MS CONTIN 15 MG TABLET | MORPHINE SULFATE ER | 90 tablets per 30 days |
| MS CONTIN 30, 60, 100, 200 MG TABLET | MORPHINE SULFATE ER | 60 tablets per 30 days |
| MSIR 10 MG/5 ML SOLN | MORPHINE SULFATE IR | 900 mL per 30 days |
| MSIR 15 and 30 MG TABLET | MORPHINE SULFATE IR | 180 tablets per 30 days |
| MSIR 20 MG/5 ML SOLN | MORPHINE SULFATE IR | 450 mL per 30 days |
| Mulpleta | lusutrombopag | 7 tablets per 30 days |
| MULTAQ 400 MG TABLET | DRONEDARONE | 60 tablets per 30 days |
| MYCELEX 10 MG TROCHE | CLOTRIMAZOLE | 150 troches per 30 days |
| MYDAYIS ER 12.5, 25, 37.5, 50 MG | Amphetamine mixed salts | 30 tablets per 30 days |
| MYOBLOC INJECTION VIAL (2500, 5000, 10000 UNITS) | RIMABOTULINUMTOXIN B | 1 vial per 84 days |
| Myorisan | isotretinoin | 60 capsules per 30 days |
| MYRBETRIQ ER 25 and 50 MG TABLET | MIRABEGRON | 30 tablets per 30 days |
| MYSOLINE 50 and 250 MG TABLET | PRIMIDONE | 240 tablets per 30 days |
| NALFON 200 MG PULVULE | FENOPROFEN | 360 tablets per 30 days |
| NALFON 400 MG CAPSULE | FENOPROFEN | 120 tablets per 30 days |
| NAMENDA 10 MG/5 ML ORAL SOLN | MEMANTINE | 300 mL per 30 days |
| NAMENDA 5 and 10 MG TABLET | MEMANTINE | 60 tablets per 30 days |
| NAMENDA XR CAPSULE (all strengths) | MEMANTINE HCL | 30 tablets per 30 days |
| NAMENDA XR TITRATION PACK | MEMANTINE HCL | 30 tablets per 30 days |
| NAMZARIC ER CAPSULE (all strengths) | MEMANTINE/DONEPEZIL | 30 tablets per 30 days |
| NAMZARIC TITRATION PACK | MEMANTINE/DONEPEZIL | 30 tablets per 30 days |
| NAPRELAN CR 375 MG TABLET | NAPROXEN | 90 tablets per 30 days |
| NAPRELAN CR 500 MG TABLET | NAPROXEN | 90 tablets per 30 days |
| NAPRELAN CR 750 MG TABLET | NAPROXEN | 60 tablets per 30 days |
| NAPRELAN CR dosecard 500 MG/750 MG | NAPROXEN | 60 tablets per 30 days |
| NAPROSYN 250 MG TABLET/CAPLET | NAPROXEN | 120 tablets per 30 days |
| NAPROSYN 375 MG TABLET/CAPLET | NAPROXEN | 90 tablets per 30 days |
| NAPROSYN 500 MG TABLET/CAPLET | NAPROXEN | 90 tablets per 30 days |
| NAPROXEN 125 MG/5 ML LIQUID | NAPROXEN | 1800 ml per 30 days |
| NAPROXEN 220 MG TABLET/CAPLET | NAPROXEN | 120 tablets per 30 days |
| Nardil | Phenelzine | 180 tablets per month |
| NASACORT AQ 55 MCG | TRIAMCINOLONE | 16.5mL per 30 days |
| NASONEX NASAL SPRAY | MOMETASONE | 17.1mL per 30 days |
| NATESTO NASAL 5.5 MG/0.122 GM | TESTOSTERONE | 23gm per 30 days |
| NATPARA 100 MCG DOSE CARTRIDGE | PARATHYROID HORMONE | 2 cartridges per 28 days |
| NATPARA 25 MCG DOSE CARTRIDGE | PARATHYROID HORMONE | 2 cartridges per 28 days |
| NATPARA 50 MCG DOSE CARTRIDGE | PARATHYROID HORMONE | 2 cartridges per 28 days |
| NATPARA 75 MCG DOSE CARTRIDGE | PARATHYROID HORMONE | 2 cartridges per 28 days |

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|---|---|---|
| Navane 10mg | thiothixene | 180 capsules per month |
| Navane 1mg, 2mg, 5mg | thiothixene | 360 capsules per month |
| NEOSPORIN GU irrigation 40 MG/ML amp | NEOMYCIN/POLYMIXIN B | 60mL per 30 days |
| NEOSPORIN GU irrigation 40 MG/ML vial | NEOMYCIN/POLYMIXIN B | 60mL per 30 days |
| NERLYNX 40 MG TABLET | NERATINIB | 180 tablets per 30 days |
| Nesina 6.25mg, 12.5mg, 25mg | alogliptan | 30 tablets per month |
| NEULASTA 6 MG/0.6 ML ONPRO DELIVERY KIT | PEGFILGRASTIM | 2 delivery kits per 14 days |
| NEULASTA 6 MG/0.6 ML SYRINGE | PEGFILGRASTIM | 2 syringes (1.2mL) per 14 days |
| NEUPRO 1 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| NEUPRO 2 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| NEUPRO 3 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| NEUPRO 4 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| NEUPRO 6 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| NEUPRO 8 MG/24 HR PATCH | ROTIGOTINE | 30 patches per 30 days |
| Neurontin 100, 300, 400, 600mg | gabapentin | 180 tablets or capsules per month |
| Neurontin 800mg | gabapentin | 120 tablets per month |
| NEXAVAR 200 MG TABLET | SORAFENIB | 120 tablets per 30 days |
| Nexium (all strengths and packets) | Esomeprazole | 30 capsules/packets per 30 days |
| Nexletol 180 mg tablet | Bempedoic acid | 30 tablets per 30 days |
| Nexlizet 180mg-10mg | bempedoic acid, ezetimibe | 30 tablets per 30 days |
| NEXPLANON 68 MG IMPLANT | ETONOGESTREL IMPLANT | 1 per 12 months |
| NICODERM CQ 14 MG/24 HOURS TRANSDERMAL PATCH | NICOTINE | 30 patches per 30 days |
| NICODERM CQ 21 MG/24 HOURS TRANSDERMAL PATCH | NICOTINE | 30 patches per 30 days |
| NICODERM CQ 7 MG/24 HOURS TRANSDERMAL PATCH | NICOTINE | 30 patches per 30 days |
| NICORETTE 2 MG GUM | NICOTINE POLACRILEX | 720 gums per 30 days |
| NICORETTE 2 MG LOZENGE | NICOTINE POLACRILEX | 600 lozenges per 30 days |
| NICORETTE 4 MG GUM | NICOTINE POLACRILEX | 720 gums per 30 days |
| NICORETTE 4 MG LOZENGE | NICOTINE POLACRILEX | 600 lozenges per 30 days |
| NICOTROL NS 10 MG/ML nasal spray | NICOTINE | 120mL per 30 days |
| NICOTROL ORAL INHALATION CARTRIDGE | NICOTINE | 480 cartridges per 30 days |
| NIFEDIAC CC 30 MG TABLET | NIFEDIPINE | 30 tablets per 30 days |
| NIFEDIAC CC 60 MG TABLET | NIFEDIPINE | 60 tablets per 30 days |
| NIFEDIAC CC 90 MG TABLET | NIFEDIPINE | 30 tablets per 30 days |
| NIFEDICAL XL 30 MG TABLET | NIFEDIPINE | 30 tablets per 30 days |
| NIFEDICAL XL 60 MG TABLET | NIFEDIPINE | 60 tablets per 30 days |
| NILANDRON 150 MG TABLET | NILUTAMIDE | 60 tablets per 30 days |
| NINLARO 2.3 MG CAPSULE | IXAZOMIB | 6 capsules per 30 days |
| NINLARO 3 MG CAPSULE | IXAZOMIB | 6 capsules per 30 days |
| NINLARO 4 MG CAPSULE | IXAZOMIB | 6 capsules per 30 days |
| NIRAVAM 0.25 MG TABLET | ALPRAZOLAM ODT | 180 tablets per 30 days |
| NIRAVAM 0.5 MG TABLET | ALPRAZOLAM ODT | 180 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| NIRAVAM 1 MG TABLET | ALPRAZOLAM ODT | 120 tablets per 30 days |
| NIRAVAM 2 MG TABLET | ALPRAZOLAM ODT | 60 tablets per 30 days |
| NISOLDIPINE ER 20 MG TABLET | NISOLDIPINE | 30 tablets per 30 days |
| NISOLDIPINE ER 30 MG TABLET | NISOLDIPINE | 60 tablets per 30 days |
| NISOLDIPINE ER 40 MG TABLET | NISOLDIPINE | 30 tablets per 30 days |
| NIZORAL 200 MG TABLET | KETOCONAZOLE | 30 tablets per 30 days |
| Nizoral cream | ketoconazole cream | 120g per 30 days |
| Nizoral shampoo | ketoconazole shampoo | 120mL per 30 days |
| NODOLOR CAPSULE | ISOMETHEPTENE/DICHLORALPHENAZONE/APAP | 240 tablets per 30 days |
| NOLVADEX 10 MG TABLET | TAMOXIFEN | 60 tablets per 30 days |
| NOLVADEX 20 MG TABLET | TAMOXIFEN | 60 tablets per 30 days |
| NORCO 10 MG/325 MG TABLET | Hydrocodone/acetaminophen | 150 tablets per 30 days |
| NORCO 5 MG/325 MG TABLET | Hydrocodone/acetaminophen | 300 tablets per 30 days |
| NORCO 7.5 MG/325 MG TABLET | Hydrocodone/acetaminophen | 180 tablets per 30 days |
| NORFLEX ER 100 MG SR TABLET | ORPHENADRINE SR | 60 tablets per 30 days |
| Norpace 100mg cap | Disopyramide | 240 capsules per 30 days |
| Norpace 150mg cap | Disopyramide | 150 capsules per 30 days |
| Norpramin 100mg | desipramine | 90 tablets per month |
| Norpramin 10mg, 25mg, 50mg, 75mg | desipramine | 60 tablets per month |
| Norpramin 150mg | desipramine | 60 tablets per month |
| NORTHERA 100 MG CAPSULE | DROXIDOPA | 90 tablets per 30 days |
| NORTHERA 200 MG CAPSULE | DROXIDOPA | 90 tablets per 30 days |
| NORTHERA 300 MG CAPSULE | DROXIDOPA | 180 tablets per 30 days |
| NORVASC 10 MG TABLET | AMLODIPINE | 30 tablets per 30 days |
| NORVASC 2.5 MG TABLET | AMLODIPINE | 120 tablets per 30 days |
| NORVASC 5 MG TABLET | AMLODIPINE | 60 tablets per 30 days |
| Norvir 100mg | ritonavir | 360 tablets per month |
| Nourianz | Istradefylline | 30 tablets per 30 days |
| Novolin 70/30 | human insulin isophane/regular | 30 mL per month |
| Novolin N | human insulin isophane | 30 mL per month |
| Novolin R | human insulin regular | 30 mL per month |
| Novolog | insulin aspart | 30 mL per month |
| Novolog Mix 70-30 | insulin aspart protamine/insulin aspart | 30 mL per month |
| Novolog Mix 70-30 FlexPen | insulin aspart protamine/insulin aspart | 30 mL per month |
| Novopen Echo | Reusable insulin pen | 2 pens per 365 days |
| NOXAFIL 300 MG/16.7 ML VIAL | POSACONAZOLE | 753mL per 30 days |
| NOXAFIL 40 MG/ML SUSPENSION | POSACONAZOLE | 600ml per 30 days |
| NOXAFIL DR 100 MG TABLET | POSACONAZOLE | 100 tablets per 30 days |
| Noxafil PowderMix 300mg packet | Posaconazole | 4 boxes (32 packets) per 30 days |
| NUBEQA 300 MG | DAROLUTAMIDE | 120 tablets per 30 days |
| NUCALA 100 MG VIAL | MEPOLIZUMAB | 3 vials per 28 days |
| NUCYNTA 100 MG TABLET | TAPENTADOL | 120 tablets per 30 days |
| NUCYNTA 50 MG TABLET | TAPENTADOL | 120 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| NUCYNTA 75 MG TABLET | TAPENTADOL | 120 tablets per 30 days |
| NUCYNTA ER 100 MG TABLET | TAPENTADOL HCL ER | 60 tablets per 30 days |
| NUCYNTA ER 150 MG TABLET | TAPENTADOL HCL ER | 60 tablets per 30 days |
| NUCYNTA ER 200 MG TABLET | TAPENTADOL HCL ER | 60 tablets per 30 days |
| NUCYNTA ER 250 MG TABLET | TAPENTADOL HCL ER | 60 tablets per 30 days |
| NUCYNTA ER 50 MG TABLET | TAPENTADOL HCL ER | 60 tablets per 30 days |
| NUEDEXTA 20-10 MG CAPSULE | Dextromethorphan/quinidine | 60 tablets per 30 days |
| NUPLAZID 17 MG TABLET | PIMAVANSERIN | 60 tablets per 30 days |
| Nurtec ODT | Rimegapant | 16 tablets per 30 days |
| Nuvaring | etonogestrel/ethinyl estradiol | 1 per 28 days |
| Nuvigil 150mg, 200mg, 250mg | armodafinil | 30 tablets per month |
| Nuvigil 50mg | armodafinil | 60 tablets per month |
| Nystat cream, ointment, powder | nystatin | 120g per 30 days |
| Nyvepria | Pegfilgrastim-apgf | 1 syringe per 14 days |
| OCALIVA 10 MG TABLET | OBETICHOLIC ACID | 30 tablets per 30 days |
| OCALIVA 5 MG TABLET | OBETICHOLIC ACID | 30 tablets per 30 days |
| OCREVUS 300 MG/10 MLVIAL | OCRELIZUMAB | 22mL per 30 days |
| Octreotide 1000 mcg/ml | Octreotide | 9 vials (45 ml) per 30 days |
| Odactra | House dust mite allergen extract | 30 tablets per month |
| ODEFSEY 200 MG/25 MG/25 MG TABLET | Emtricitabine/rilpivirine/tenofovir alafenamide | 30 tablets per 30 days |
| ODOMZO 200 MG CAPSULE | SONIDEGIB | 30 tablets per 30 days |
| OFEV 100 MG CAPSULE | NINTEDANIB ESYLATE | 60 tablets per 30 days |
| OFEV 150 MG CAPSULE | NINTEDANIB ESYLATE | 60 tablets per 30 days |
| OFF! ACTIVE INSECT REPELLENT I 15% AEROSOL | DIETHYLTOLUAMIDE | 900mL per 30 days |
| OFF! DEEP WOODS INSECT REPELLENT V 25% AEROSOL | DIETHYLTOLUAMIDE | 903mL per 30 days |
| OFF! DEEP WOODS INSECT REPELLENT VII PUMP | DIETHYLTOLUAMIDE | 900mL per 30 days |
| OFF! DEEP WOODS INSECT REPELLENT VIII DRY 25% AERO. | DIETHYLTOLUAMIDE | 900mL per 30 days |
| OFF! FAMILYCARE INSECT REPELLENT I SMOOTH & DRY 15% | DIETHYLTOLUAMIDE | 1080mL per 30 days |
| Ojjaara Tablet 100mg; 150mg; 200mg | Momelotinib | 30 tablets per 30 days |
| Oleptro 150mg | trazodone | 120 tablets per month |
| Oleptro 50mg, 100mg, 300mg | trazodone | 60 tablets per month |
| Olpruva packet 2 and 3 gram | Sodium phenylbutyrate | 180 packets per 30 days |
| Olpruva packet 4 gram | Sodium phenylbutyrate | 150 packets per 30 days |
| Olpruva packet 5 gram | Sodium phenylbutyrate | 120 packets per 30 days |
| Olpruva packet 6 and 6.67 gram | Sodium phenylbutyrate | 90 packets per 30 days |
| OLYSIO 150 MG CAPSULE | SIMEPREVIR | 30 capsules per day |
| OMNARIS NASAL SPRAY | CICLESONIDE AQUEOUS | 12.6mL per 30 days |
| Omnipod GO | Insulin delivery device | 10 per 30 days |
| Omnipod Pods | Insulin delivery device | 10 pods per 30 days |
| Omnipod Starter Kit | Insulin delivery device | 1 kit per 730 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| ONE TOUCH DELICA LANCING DEVICE | BLOOD GLUCOSE LANCING DEVICE | 30 per 30 days |
| ONE TOUCH PENLET PLUS | BLOOD GLUCOSE LANCING DEVICE | 30 per 30 days |
| ONE TOUCH Ultra 2, Ultra Link, Ultra Mini, Ultra Smart, Ultra System BLOOD GLUCOSE METER | BLOOD GLUCOSE METER | 1 glucose meter per year |
| ONE TOUCH VERIO IQ BLOOD GLUCOSE METER | BLOOD GLUCOSE METER | 1 glucose meter per year |
| ONFI 10 MG TABLET | CLOBAZAM | 60 tablets per 30 days |
| ONFI 2.5 MG/ML SUSPENSION | CLOBAZAM | 480mL per 30 days |
| ONFI 20 MG TABLET | CLOBAZAM | 60 tablets per 30 days |
| ONFI 5 MG TABLET | CLOBAZAM | 60 tablets per 30 days |
| Ongentys 50 mg Capsule | Opicapone | 30 capsules per 30 days |
| Onglyza 2.5mg, 5mg | saxagliptin | 30 tablets per month |
| ONMEL 200 MG TABLET | ITRACONAZOLE | 30 tablets per 30 days |
| Onureg 200mg, 300mg Tablet | Azacitidine | 14 tablets per 28 days |
| Opana ER | oxymorphone extended release | 60 tablets per month |
| Opana IR | oxymorphone immediate release | 180 tablets per month |
| OPIUM TINCTURE 10 MG/ML | OPIUM | 150 ml per month |
| OPSUMIT 10 MG TABLET | MACITENTAN | 30 tablets per 30 days |
| ORACEA 40 MG CAPSULE | DOXYCYCLINE MONOHYDRATE | 30 tablets per 30 days |
| Oralair 100 IR | Sweet vernal, orchard, perennial rye, Timothy and Kentucky blue grass mixed pollens | 3 tablets per month |
| Oralair 300 IR | Sweet vernal, orchard, perennial rye, Timothy and Kentucky blue grass mixed pollens | 30 tablets per month |
| ORAMORPH SR 100 MG TABLET | MORPHINE SULFATE SR | 60 tablets per 30 days |
| ORAMORPH SR 15 MG TABLET | MORPHINE SULFATE SR | 90 tablets per 30 days |
| ORAMORPH SR 30 MG TABLET | MORPHINE SULFATE SR | 60 tablets per 30 days |
| ORAMORPH SR 60 MG TABLET | MORPHINE SULFATE SR | 60 tablets per 30 days |
| ORAP 1mg | pimozide | 300 tablets per month |
| ORAP 2mg | pimozide | 150 tablets per month |
| ORAVIG 50 MG BUCCAL TABLET | MICONAZOLE | 30 tablets per 30 days |
| ORENCIA 125 MG INJECTION SYRINGE | ABATACEPT | 4 ml per 28 days |
| ORENCIA 125 MG/ML CLICKJET | ABATACEPT | 4 ml per 28 days |
| ORENCIA 250 MG INJECTION VIAL | ABATACEPT | 8 vials per 28 days |
| ORENCIA 50 MG/0.4ML SYRINGE | ABATACEPT | 1.6 ml per 28 days |
| ORENCIA 87.5 MG/0.7 ML SYRINGE | ABATACEPT | 2.8 ml per 28 days |
| Orenitram ER Tablet 0.125mg; 2.5mg | Treprostinil | 90 tablets per 30 days |
| Orenitram ER 0.25mg Tablet | Treprostinil | 270 tablets per 30 days |
| Orenitram ER 1mg Tablet | Treprostinil | 360 tablets per 30 days |
| Orenitram ER 5mg Tablet | Treprostinil | 720 tablets per 30 days |
| Orenitram Titration Pack Month 1, Month 2, and Month 3 | Treprostinil | 1 pack per 6 months |
| Orgovyx tablet | Relugolix | 32 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Oriahn Tablet | elagolix, estradiol, norethindrone acetate | 56 tablets per 28 days |
| ORKAMBI 100 MG/125 MG TABLET | LUMACAFTOR/IVACAFTOR | 120 tablets per 30 days |
| ORKAMBI 200 MG/125 MG TABLET | LUMACAFTOR/IVACAFTOR | 120 tablets per 30 days |
| Orkambi 75-94 mg, 100-125 mg, 150-188 mg granules packet | Lumacaftor/ivacaftor | 60 packets per 30 days |
| Orladeyo capsules | berotralstat | 30 capsules per 30 days |
| Orserdu 86 mg tab | Elacestrant | 90 tabs per 30 days |
| Orserdu 345 mg tab | Elacestrant | 30 tabs per 30 days |
| ORTHO EVRA TRANSDERMAL PATCH | Norelgestromin/ethinyl estradiol | 4 patches per 28 days |
| ORTHOVISC 15 MG/ML SYRINGE | HYALURONATE SODIUM | 16 ml per 28 days |
| OSENI 12.5 MG/15 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OSENI 12.5 MG/30 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OSENI 12.5 MG/45 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OSENI 25 MG/15 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OSENI 25 MG/30 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OSENI 25 MG/45 MG TABLET | ALOGLIPTIN/PIOGLITAZONE | 30 tablets per 30 days |
| OTEZLA 30 MG TABLET | APREMILAST | 60 tablets per 30 days |
| OTEZLA STARTER PACK (28 DAY, 55 TABLETS) | APREMILAST | 55 tablets per 28 days |
| OTREXUP 10 mg/0.4ml, 15 mg/0.4ml, 20mg/0.4ml, 25mg/0.4ml auto-injector | METHOTREXATE | 1.6 ml per 28 days |
| OXANDRIN 10 MG TABLET | OXANDROLONE | 60 tablets per 30 days |
| OXANDRIN 2.5 MG TABLET | OXANDROLONE | 240 tablets per 30 days |
| OXAYDO 5 MG TABLET | OXYCODONE HCL | 180 tablets per 30 days |
| OXAYDO 7.5 MG TABLET | OXYCODONE HCL | 120 tablets per 30 days |
| Oxbryta 300 mg, 500 mg | Voxelotor | 90 tablets per 30 days |
| Oxervate | cenegermin-bkbj | 112 vials per 56 days |
| Oxtellar XR 150 and 300mg tab | Oxcarbazepine | 90 tablets per 30 days |
| Oxtellar XR 600mg tab | Oxcarbazepine | 120 tablets per 30 days |
| OXY IR 5MG CAPSULE | OXYCODONE | 180 capsules per 30 days |
| Oxybutynin Chloride 2.5 mg tab | Oxybutynin | 120 tabs per 30 days |
| Oxybutynin Chloride 5mg/5ml soln | Oxybutynin | 600 ml per 30 day |
| OXYCODONE 20 MG/ML SOLN | OXYCODONE | 270 ml per 30 days |
| OXYCODONE 5 MG/5 ML SOLN | OXYCODONE | 900 ml per 30 days |
| Oxycodone IR | oxycodone immediate release | 180 tablets per month |
| Oxycontin 10, 15, 20, 30, 40, 60, 80mg CR TAB | OXYCODONE CR | 60 tablets per 30 days |
| OXYTROL 3.9 MG/DAY TD PATCH | OXYBUTYNIN | 8 patches per 28 days |
| Ozempic | Semaglutide | 3 ml per 28 days |
| Pamelor 10mg, 25mg | nortriptyline | 120 capsules per month |
| Pamelor 50mg, 75mg | nortriptyline | 60 capsules per month |
| PANLOR 325-30-16 MG TABLET | ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE | 300 tablets per 30 days |

| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| PARAFON FORTE DSC 500 MG TABLET | CHLORZOXAZONE | 180 tablets per 30 days |
| PARCOPA 10/100 MG ODT | CARBIDOPA/LEVODOPA | 240 tablets per 30 days |
| PARCOPA 25/100 MG ODT | CARBIDOPA/LEVODOPA | 240 tablets per 30 days |
| PARCOPA 25/250 MG ODT | CARBIDOPA/LEVODOPA | 240 tablets per 30 days |
| PARLODEL 2.5 MG TABLET | BROMOCRIPTINE | 600 tablets per 30 days |
| PARLODEL 5 MG CAPSULE | BROMOCRIPTINE | 300 tablets per 30 days |
| Pataday | olopatadine | 1 bottle per 25 days |
| Paxil 10, 20, 40 mg | paroxetine | 30 tablets per month |
| Paxil 30mg | Paroxetine | 60 tablets per month |
| Paxlovid 150mg-100mg | Nirmatrelvir; Ritonavir | 40 tabs (2 cycles) per 30 days |
| Paxlovid 300mg-100mg | Nirmatrelvir; Ritonavir | 60 tabs (2 cycles) per 30 days |
| PEGANONE 250 MG TABLET | ETHOTOIN | 360 tablets per 30 days |
| Pegasys Kit 180 mcg | Peginterferon alfa-2a | 4 kits per 28 days |
| Pegasys Proclick Solution 135 mcg and 180 mcg | Peginterferon alfa-2a | 4 syringes per 28 days |
| Pegasys Solution 180 mcg | Peginterferon alfa-2a | 4 vials per 28 days |
| Pemazyre 4.5, 9, 13.5 mg tab | Pemigatinib | 28 tablets per 28 days |
| PENERGAN 25 MG SUPPOSITORY | PROMETHAZINE | 180 suppositories per 30 days |
| PENTASA 250 MG ER CAPSULE | MESALAMINE | 480 capsules per 30 days |
| PENTASA 500 MG ER CAPSULE | MESALAMINE | 240 capsules per 30 days |
| PEPCID 10 MG TABLET | FAMOTIDINE | 60 tablets per 30 days |
| PEPCID 20 MG TABLET | FAMOTIDINE | 60 tablets per 30 days |
| PEPCID 40 MG TABLET | FAMOTIDINE | 30 tablets per 30 days |
| PERCOCET 10 MG/325 MG TABLET | OXYCODONE/APAP | 120 tablets per 30 days |
| PERCOCET 2.5 MG/325 MG TABLET | OXYCODONE/APAP | 300 tablets per 30 days |
| PERCOCET 5 MG/325 MG TABLET | OXYCODONE/APAP | 180 tablets per 30 days |
| PERCOCET 7.5 MG/325 MG TABLET | OXYCODONE/APAP | 120 tablets per 30 days |
| PERCODAN TABLET | OXYCODONE/ASA | 180 tablets per 30 days |
| PERFOROMIST 20 MCG/2 ML SOLN | FORMOTEROL | 120 ml per 30 days |
| PERSANTINE 25 MG TABLET | DIPYRIDAMOLE | 120 tablets per 30 days |
| PERSANTINE 50 MG TABLET | DIPYRIDAMOLE | 240 tablets per 30 days |
| PERSANTINE 75 MG TABLET | DIPYRIDAMOLE | 120 tablets per 30 days |
| Perseris 90 and 120mg | Risperidone | 1 kit per 30 days |
| PEXEVA 10 MG TABLET | PAROXETINE MESYLATE | 30 tablets per 30 days |
| PEXEVA 20 MG TABLET | PAROXETINE MESYLATE | 30 tablets per 30 days |
| PEXEVA 30 MG TABLET | PAROXETINE MESYLATE | 60 tablets per 30 days |
| PEXEVA 40 MG TABLET | PAROXETINE MESYLATE | 30 tablets per 30 days |
| Pheburane 483 mg/gram oral pellets | Sodium phenylbuturate | 1243 grams of pellets per 30 days |
| PHENERGAN 12.5 MG SUPPOSITORY | PROMETHAZINE | 180 suppositories per 30 days |
| PHENERGAN 12.5 MG TABLET | PROMETHAZINE | 180 tablets per 30 days |
| PHENERGAN 25 MG TABLET | PROMETHAZINE | 180 tablets per 30 days |
| PHENERGAN 50 MG SUPPOSITORY | PROMETHAZINE | 90 suppositories per 30 days |
| PHENERGAN 50 MG TABLET | PROMETHAZINE | 90 tablets per 30 days |
| Phenergan VC with Codeine | phenylephrine/codeine/promethazine solution | 900 ml per month |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Phenergan with Codeine | codeine/promethazine syrup | 900 ml per month |
| Phentermine Hydrochloride 15mg, 30mg capsules | Phentermine Hydrochloride | 30 capsules per 30 days |
| PHENYTEK 200 MG CAPSULE | PHENYTOIN | 90 tablets per 30 days |
| PHENYTEK 300 MG CAPSULE | PHENYTOIN | 60 tablets per 30 days |
| PHOSLO 667 MG CAPSULE/TABLET | CALCIUM ACETATE | 360 capsules/tablets per 30 days |
| PHOSLYRA 667 MG/5 ML ORAL SOLN | CALCIUM ACETATE | 1800 ml per 30 days |
| PHRENILIN 50 MG/325 MG TABLET | Butalbital/acetaminophen | 18 tablets per 30 |
| Pifeltro 100 mg Tablet | doravirine | 30 per 30 days |
| Pirfenidone 534 mg tab | Pirfenidone | 90 tabs per 30 days |
| Plavix | Clopidogrel | 30 tablets per month |
| PLEGRIDY 125 MCG/0.5 ML PEN | PEGINTERFERON BETA-1A | 1 ml per 28 days |
| PLEGRIDY 125 MCG/0.5 ML SYRINGE | PEGINTERFERON BETA-1A | 1 ml per 28 days |
| PLEGRIDY PEN INJECTION STARTER PACK | PEGINTERFERON BETA-1A | 1 ml per 28 days |
| PLEGRIDY SYRINGE STARTER PACK | PEGINTERFERON BETA-1A | 1 ml per 28 days |
| PLENDIL 10 MG TABLET SA | FELODIPINE | 30 tablets per 30 days |
| PLENDIL 2.5 MG TABLET SA | FELODIPINE | 30 tablets per 30 days |
| PLENDIL 5 MG TABLET SA | FELODIPINE | 30 tablets per 30 days |
| PLETAL 100 MG TABLET | CILOSTAZOL | 60 tablets per 30 days |
| PLETAL 50 MG TABLET | CILOSTAZOL | 60 tablets per 30 days |
| Polytussin DM5-12.5-7.5mg/5ml Liq | Phenylephrine-Pyrilamine-DM | 473ml per 8 days |
| POMALYST 1 MG CAPSULE | POMALIDOMIDE | 30 capsules per 30 days |
| POMALYST 2 MG CAPSULE | POMALIDOMIDE | 30 capsules per 30 days |
| POMALYST 3 MG CAPSULE | POMALIDOMIDE | 30 capsules per 30 days |
| POMALYST 4 MG CAPSULE | POMALIDOMIDE | 30 capsules per 30 days |
| PONSTEL 250 MG CAPSULE | MEFENAMIC ACID | 180 capsules per 30 days |
| Ponvory | Ponesimod | 30 tablets per 30 days |
| POTIGA 200 MG TABLET | EZOGABINE | 90 tablets per 30 days |
| POTIGA 300 MG TABLET | EZOGABINE | 90 tablets per 30 days |
| POTIGA 400 MG TABLET | EZOGABINE | 90 tablets per 30 days |
| POTIGA 50 MG TABLET | EZOGABINE | 270 tablets per 30 days |
| Pradaxa 20 mg Pellet Pack | Dabigatran | 60 per 30 |
| Pradaxa 30, 40, 50, 110 mg Pellet Pack | Dabigatran | 120 per 30 |
| Pradaxa  150 mg Pellet Pack | Dabigatran | 60 per 30 |
| PRADAXA 110 MG CAPSULE | DABIGATRAN | 60 capsules per 30 days |
| PRADAXA 150 MG CAPSULE | DABIGATRAN | 60 capsules per 30 days |
| PRADAXA 75 MG CAPSULE | DABIGATRAN | 60 capsules per 30 days |
| Praluent | alirocumab | 2 syringes per month |
| PRANDIMET 1 MG/500 MG TABLET | REPAGLINIDE/METFORMIN | 150 tablets per 30 days |
| PRANDIMET 2 MG/500 MG TABLET | REPAGLINIDE/METFORMIN | 150 tablets per 30 days |
| PRANDIN 0.5 MG TABLET | REPAGLINIDE | 120 tablets per 30 days |
| PRANDIN 1 MG TABLET | REPAGLINIDE | 120 tablets per 30 days |
| PRANDIN 2 MG TABLET | REPAGLINIDE | 240 tablets per 30 days |
| PRAVACHOL 10 MG TABLET | PRAVASTATIN | 45 tablets per 30 days |
| PRAVACHOL 20 MG TABLET | PRAVASTATIN | 45 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| PRAVACHOL 40 MG TABLET | PRAVASTATIN | 45 tablets per 30 days |
| PRAVACHOL 80 MG TABLET | PRAVASTATIN | 30 tablets per 30 days |
| PRECOSE 100 MG TABLET | ACARBOSE | 90 tablets per 30 days |
| PRECOSE 25 MG TABLET | ACARBOSE | 90 tablets per 30 days |
| PRECOSE 50 MG TABLET | ACARBOSE | 90 tablets per 30 days |
| Premarin | estrogens, conjugated | 30 tablets per month |
| PREMARIN 25 MG VIAL | CONJUGATED ESTROGENS | 60 per 30 days |
| PremPro (all strengths) | Conjugated estrogens | 30 tablets per 30 days |
| PremPhase (all strengths) | Conjugated estrogens | 30 tablets per 30 days |
| PRESTALIA 14 MG/10 MG TABLET | Perindopril arginine/amlodipine | 30 tablets per 30 days |
| PRESTALIA 3.5 MG/2.5 MG TABLET | Perindopril arginine/amlodipine | 60 tablets per 30 days |
| PRESTALIA 7 MG/5 MG TABLET | Perindopril arginine/amlodipine | 60 tablets per 30 days |
| Prevacid | lansoprazole | 60 capsules per month |
| PREVPAC PATIENT PACK | Lansoprazole/amoxicillin/clarithromycin | 240 tablets per 30 days |
| PREVYMIS 240 MG TABLET | LETERMOVIR | 30 tablets per 30 days |
| PREVYMIS 240 MG/ 12 ML VIAL | LETERMOVIR | 360 ml per 30 days |
| PREVYMIS 480 MG TABLET | LETERMOVIR | 30 tablets per 30 days |
| PREVYMIS 480 MG/ 24 ML VIAL | LETERMOVIR | 720 ml per 30 days |
| PREZCOBIX 800 MG/150 MG TABLET | DARUNAVIR/COBICISTAT | 30 tablets per 30 days |
| Prezista 150mg | darunavir | 240 tablets per month |
| Prezista 600mg | darunavir | 60 tablets per month |
| Prezista 75mg | darunavir | 480 tablets per month |
| Prezista 800mg | darunavir | 30 tablets per month |
| Prilosec | omeprazole | 60 capsules per month |
| PRIMAXIN 250 and 500 MG VIAL | IMIPENEM/CILASTATIN | 240 vials per 30 days |
| PRINIVIL 2.5, 5, 10, 20, 30, 40 MG TAB | LISINOPRIL | 60 tablets per 30 days |
| PRINZIDE 10 MG/12.5 MG TABLET | Lisinopril/HCTZ | 120 tablets per 30 days |
| PRINZIDE 20 MG/12.5 MG TABLET | Lisinopril/HCTZ | 60 tablets per 30 days |
| PRISTIQ 100 MG TABLET | Desvenlafaxine succinate | 30 tablets per 30 days |
| PRISTIQ 50 MG TABLET | Desvenlafaxine succinate | 30 tablets per 30 days |
| Proair Digihaler | albuterol | 2 inhalers per 30 days |
| Proair Respiclick/HFA | albuterol | 2 inhalers per 30 days |
| PROBUPHINE 74.2 MG IMPLANT | BUPRENORPHINE HCL | 4 implants per 180 days |
| PROCARDIA XL 30 MG TABLET | NIFEDIPINE | 30 tablets per 30 days |
| PROCARDIA XL 60 MG TABLET | NIFEDIPINE | 60 tablets per 30 days |
| PROCARDIA XL 90 MG TABLET | NIFEDIPINE | 30 tablets per 30 days |
| PROCENTRA 5 MG/5 ML ORAL SOLN | DEXTROAMPHETAMINE | 1800 ml per 30 days |
| PRODIGY AUTOCODE BLOOD GLUCOSE METER | BLOOD GLUCOSE METER | 1 meter per year |
| PRODIGY VOICE BLOOD GLUCOSE METER | BLOOD GLUCOSE METER | 1 meter per year |
| Progesterone Oil 50mg/ml | progesterone | 1 vial per 8 days |
| PROLIA 60 MG/ML INJECTION SYRINGE | DENOSUMAB | 1 ml per 180 days |
| PROMACTA 12.5 MG TABLET | ELTROMBOPAG | 120 tablets per 30 days |
| PROMACTA 25 MG TABLET | ELTROMBOPAG | 90 tablets per 30 days |
| PROMACTA 50 and 75 MG TABLET | ELTROMBOPAG | 60 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| PROMETRIUM 100 MG CAPSULE | PROGESTERONE | 30 capsules per 30 days |
| PROMETRIUM 200 MG CAPSULE | PROGESTERONE | 60 capsules per 30 days |
| PROSCAR 5 MG TABLET | FINASTERIDE | 30 tablets per 30 days |
| PROSOM 1 and 2 MG TABLET | ESTAZOLAM | 30 tablets per 30 days |
| Protonix | pantoprazole | 60 tablets per month |
| Proventil HFA | albuterol | 2 inhalers per 30 days |
| PROVERA 2.5, 5, 10 MG TABLET | Medroxyprogesterone acetate | 30 tablets per 30 days |
| Prozac 10mg | fluoxetine | 60 capsules per month |
| Prozac 20mg | fluoxetine | 120 capsules per month |
| Prozac 40mg | Fluoxetine | 60 capsules per month |
| Prozac 20mg/5ml solution | Fluoxetine | 600 mL per month |
| Pulmicort Flexhaler 180 | budesonide | 2 inhalers per month |
| Pulmicort Flexhaler 90 | budesonide | 1 inhaler per month |
| Pulmicort Respules 0.25, 0.5mg | budesonide | 60 vials or 120mL per month |
| Pulmicort Respules 1mg | budesonide | 30 vials or 60mL per month |
| Pulmozyme | dornase alfa | 60 vials or 150mL per month |
| QBRELIS 1 MG/ML SOLUTION | LISINOPRIL | 1200 ml per 30 days |
| Qbrexza | Glycopyrronium | 30 cloths per 30 days |
| Qdolo 5mg/mL Solution | Tramadol | 2400mL per 30 days |
| Qelbree 100 mg | Viloxazine | 30 tablets per 30 days |
| Qelbree 150 mg | Viloxazine | 60 tablets per 30 days |
| Qelbree 200 mg | Viloxazine | 90 tablets per 30 days |
| Qinlock 50 mg Tablet | Ripretinib | 90 tablets per 30 days |
| QTERN 10 MG-5 MG TABLET | DAPAGLIFLOZIN AND SAXAGLIPTIN | 30 tablets per 30 days |
| Qudexy XR 100, 150, 200 MG sprinkle cap | TOPIRAMATE ER | 60 capsules per 30 days |
| Qudexy XR 25, 50 MG sprinkle cap | TOPIRAMATE ER | 120 capsules per 30 days |
| Questran powder packet | Cholestyramine | 180 packets per 30 days |
| QuilliChew ER chew tab 20 mg | Methylphenidate | 90 tablets per 30 days |
| QuilliChew ER chew tab 30 mg | Methylphenidate | 60 tablets per 30 days |
| QuilliChew ER chew tab 40 mg | Methylphenidate | 45 tablets per 30 days |
| Quillivant XR susp | methylphenidate hcl | 360mL per month |
| Qulipta | Atogepant | 30 tablets per 30 days |
| QUTENZA 8% KIT | CAPSAICIN | 4 patches per 90 days |
| Qvar 40 | beclomethasone | 4 inhalers per month |
| Qvar 80 | beclomethasone | 2 inhalers per month |
| Qvar Redihaler 40 mcg | beclomethasone | 1 inhaler per month |
| Qvar Redihaler 80 mcg | beclomethasone | 2 inhalers per month |
| Ragwitek | Short ragweed pollen | 30 tablets per month |
| RANEXA 500 MG, 1000 MG TABLET | RANOLAZINE | 60 tablets per 30 days |
| RAPAFLO 4 MG, 8 MG CAPSULE | SILODOSIN | 30 capsules per 30 days |
| Rasuvo 10 MG/0.2 ML autoinjector | METHOTREXATE | 5.6 ml per 28 days |
| Rasuvo 12.5 MG/0.25 ML autoinjector | METHOTREXATE | 7 ml per 28 days |
| Rasuvo 15 MG/0.3 ML autoinjector | METHOTREXATE | 8.4 ml per 28 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Rasuvo 17.5 MG/0.35 ML autoinjector | METHOTREXATE | 9.8 ml per 28 days |
| Rasuvo 20 MG/0.4 ML autoinjector | METHOTREXATE | 11.2 ml per 28 days |
| Rasuvo 22.5 MG/0.45 ML autoinjector | METHOTREXATE | 12.6 ml per 28 days |
| Rasuvo 25 MG/0.5 ML autoinjector | METHOTREXATE | 14 ml per 28 days |
| Rasuvo 27.5 MG/0.55 ML autoinjector | METHOTREXATE | 15.4 ml per 28 days |
| Rasuvo 30 MG/0.6 ML autoinjector | METHOTREXATE | 16.8 ml per 28 days |
| Rasuvo 7.5 MG/0.15 ML autoinjector | METHOTREXATE | 4.2 ml per 28 days |
| RAVICTI 1.1 GRAM/ML LIQUID | Glycerol phenylbutyrate | 540 ml per 30 days |
| RAYALDEE ER 30 MCG CAPSULE | CALCIFEDIOL | 60 capsules per 30 days |
| RAZADYNE ER 8, 16, 24 MG CAPSULE | GALANTAMINE ER | 30 capsules per 30 days |
| REBIF 22 mcg/0.5 ml, 44 mcg/0.5 ml syringe | INTERFERON BETA-1A | 6 ml per 28 days |
| RECLAST 5 ML/100 ML IV INJECTION | ZOLEDRONIC ACID | 100 ml per 30 days |
| RECTIV 0.4% OINTMENT | NITROGLYCERIN RECTAL | 36 grams per 30 days |
| RELAFEN 500 MG TABLET | NABUMETONE | 120 tablets per 30 days |
| RELAFEN 750 MG TABLET | NABUMETONE | 60 tablets per 30 days |
| RELENZA 5 MG DISKHALER | ZANAMAVIR | 20 blisters per 5 days |
| RELISTOR 12 MG/0.6 ML SYRINGE | METHYLNALTREXONE | 18 ml per 30 days |
| RELISTOR 150 MG TABLET | METHYLNALTREXONE | 90 tablets per 30 days |
| RELPAX TABLET | ELETRIPTAN | 6 tablets per 30 days |
| Relyvrio powder pack | Sodium phenylbutyrate | 60 packets per 30 days |
| Remeron | mirtazapine | 30 tablets per month |
| Remicade 100mg single use vial | Infliximab | 14 vials per 28 days |
| RENAGEL 400 MG TABLET | SEVELAMER HCL | 360 tablets per 30 days |
| RENAGEL 800 MG TABLET | SEVELAMER HCL | 180 tablets per 30 days |
| Renflexis 100mg single use vial | Infliximab-abda | 14 vials per 28 days |
| Renvela 0.8, 2.4 GM powder packet | SEVELAMER CARBONATE | 180 packets per 30 days |
| RENVELA 800 MG tablet | SEVELAMER CARBONATE | 540 tablets per 30 days |
| Repatha 140 MG/ML Syringe, Sureclick Autoinjector | EVOLOCUMAB | 3 injection systems per 28 days |
| Repatha 420 MG/3.5 ML Pushtronex System | EVOLOCUMAB | 1 system per 30 days |
| REQUIP 0.25 mg, 0.5 mg. 5 mg TABLET | ROPINIROLE | 120 tablets per 30 days |
| REQUIP 1 mg, 2 mg TABLET | ROPINIROLE | 90 tablets per 30 days |
| REQUIP 3 mg, 4 mg TABLET | ROPINIROLE | 180 tablets per 30 days |
| REQUIP XL 2 mg, 4 mg, 6 mg TABLET | ROPINIROLE | 30 tablets per 30 days |
| REQUIP XL 8 mg, 12 mg TABLET | ROPINIROLE | 60 tablets per 30 days |
| Rescriptor 100mg | delavirdine | 360 tablets per month |
| Rescriptor 200mg | delavirdine | 180 tablets per month |
| Restasis multidose 0.05% eye drop | CYCLOSPORINE | 1 bottle (5.5 ml) per 27 days |
| Restoril 15mg, 22.5mg, 30mg | temazepam | 30 capsules per month |
| Restoril 7.5mg | temazepam | 60 capsules per month |
| Retevmo 40 mg | Selpercatinib | 180 capsules per 30 days |
| Retevmo 80 mg | Selpercatinib | 120 capsules per 30 days |
| Retisert 0.59 MG intraocular implant | FLUOCINOLONE | 2 implants per 912.5 days |
| RETROVIR 10 MG/ML ORAL SOLUTION | ZIDOVUDINE | 1800 ml per 30 days |
| RETROVIR 100 MG CAPSULE | ZIDOVUDINE | 180 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Retrovir 100mg | zidoduvine | 180 capsules per month |
| RETROVIR 300 MG TABLET | ZIDOVUDINE | 60 capsules per 30 days |
| Retrovir 300mg | zidoduvine | 60 tablets per month |
| Revatio | Sildenafil | 90 tablets per month |
| REVLIMID 2.5, 5, 10, 15, 20, 25mg TAB | LENALIDOMIDE | 30 tablets per 30 days |
| REXULTI 0.25, 0.5, 1 mg TABLET | BREXPIPRAZOLE | 60 tablets per 30 days |
| REXULTI 2, 3, 4 mg TABLET | BREXPIPRAZOLE | 30 tablets per 30 days |
| Reyataz 150mg, 200mg | atazanavir/cobicistat | 60 tablets per month |
| Reyataz 300mg | atazanavir/cobicistat | 30 tablets per month |
| REYATAZ 50 MG POWDER PACKET | ATAZANAVIR | 180 packets per 30 days |
| Reyvow 100 mg | Lasmiditan | 8 tablets per month |
| Reyvow 50 mg | Lasmiditan | 4 tablets per month |
| Rezlidhia 150mg cap | Olutasidenib | 60 caps per 30 days |
| Rezurock | Belumosudil | 30 tablets per 30 days |
| Rezvoglar KwikPen | Insulin Glargine-aglr | 30 ml per 30 days |
| Rezzayo IV Sol 200mg | Rezafungin | 2 vials (400mg) on day 1 then 1 vial (200mg) every 7 days |
| RILUTEK 50 MG TABLET | RILUZOLE | 60 tablets per 30 days |
| RIMSO-50 SOLUTION | DIMETHYL SULFOXIDE | 214.5 ml per 30 days |
| Rinvoq | Upadacitinib | 30 tablets per 30 days |
| RIOMET 500 MG/5 ML SOLUTION | METFORMIN | 750 ml per 30 days |
| Risperdal | risperidone | 60 tablets per month |
| Risperdal Consta | risperidone | 2 syringes per 28 days |
| Risperdal oral solution | risperidone | 180 mL per month |
| Ritalin 20mg | methylphenidate | 120 tablets per month |
| Ritalin 5mg, 10mg | methylphenidate | 90 tablets per month |
| Ritalin SR | methylphenidate extended release | 120 tablet per month |
| RMS 10 mg, 20 mg SUPPOSITORY | MORPHINE SULFATE | 180 suppositories per 30 days |
| RMS 30 MG SUPPOSITORY | MORPHINE SULFATE | 120 suppositories per 30 days |
| RMS 5 MG SUPPOSITORY | MORPHINE SULFATE | 300 suppositories per 30 days |
| ROBAXIN 500 MG TABLET | METHOCARBAMOL | 480 tablets per 30 days |
| ROBAXIN-750 TABLET | METHOCARBAMOL | 300 tablets per 30 days |
| Rocaltrol 0.5 mcg cap | Calcitriol | 120 capsules per 30 days |
| ROCEPHIN 1 GM PIGGYBACK | CEFTRIAXONE | 600ml per 30 days |
| ROCEPHIN 1 gm, 2 gm, 500 mg VIAL | CEFTRIAXONE | 60 vials per 30 days |
| ROCEPHIN 10 GM VIAL | CEFTRIAXONE | 12 vials per 30 days |
| ROCEPHIN 2 GM PIGGYBACK | CEFTRIAXONE | 300ml per 30 days |
| ROCEPHIN 250 MG VIAL | CEFTRIAXONE | 30 vials per 30 days |
| Rolvedon | Eflapegrastim-xnst | 1 syringe per 14 days |
| Roszet | Rosuvastatin/ezetimibe | 30 tablets per 30 days |
| Roxicet solution | oxycodone/acetaminophen | 1200 ml per month |
| Rozerem 8mg | ramelteon | 30 tablets per month |
| ROZLYTREK 100MG | ENTRECTINIB | 90 capsules per 30 days |
| ROZLYTREK 200MG | ENTRECTINIB | 90 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| RUBRACA 200 MG TABLET | RUCAPARIB CAMSYLATE | 120 tablets per 30 days |
| RUBRACA 250 MG | RUCAPARIB | 120 tablets per 30 days |
| RUBRACA 300 MG TABLET | RUCAPARIB CAMSYLATE | 120 tablets per 30 days |
| Ruconest | C1 esterase inhibitor recombinant | 8 vials per month |
| Rukobia | Fostemsavir | 60 tablets per 30 days |
| Rybelsus tablet | Semaglutide | 30 tablets per 30 days |
| RYDAPT 25 MG CAPSULE | MIDOSTAURIN | 224 capsules per 28 days |
| Rykindo ER IM Susp Kit 25mg; 37.5mg; 50mg | Risperidone | 2 vials/kits per 28 days |
| RYTARY 23.75/95 MG ER CAPSULE | CARBIDOPA/LEVODOPA | 360 capsules per 30 days |
| RYTARY 36.25/145 MG ER CAPSULE | CARBIDOPA/LEVODOPA | 270 capsules per 30 days |
| RYTARY 48.75/195 MG ER CAPSULE | CARBIDOPA/LEVODOPA | 360 capsules per 30 days |
| RYTARY 61.25/245 MG ER CAPSULE | CARBIDOPA/LEVODOPA | 300 capsules per 30 days |
| SABRIL 500 MG POWDER PACKET | VIGABATRIN | 180 packets per 30 days |
| SABRIL 500 MG TABLET | VIGABATRIN | 180 tablets per 30 days |
| Sajazir syringe 30mg/3 ml | icatibant | 6 syringes per month |
| SALSALATE 500 mg, 750 mg TABLET | SALSALATE | 120 tablets per 30 days |
| SAMSCA 15 MG TABLET | TOLVAPTAN | 30 tablets per 30 days |
| SAMSCA 30 MG TABLET | TOLVAPTAN | 60 tablets per 30 days |
| SANCTURA 20 MG TABLET | TROSPIUM | 60 tablets per 30 days |
| SANCTURA XR 60MG CAPSULE | TROSPIUM | 30 capsules per 30 days |
| SANCUSO 3.1 MG/24 HR PATCH | GRANISETRON | 4 patches per 28 days |
| SANDOSTATIN LAR 10 MG KIT | OCTREOTIDE | 1 kit per 28 days |
| SANDOSTATIN LAR 10MG DEPOT KIT | OCTREOTIDE ACETATE | 1 kit per 28 days |
| SANDOSTATIN LAR 20MG DEPOT KIT | OCTREOTIDE ACETATE | 2 kits per 28 days |
| Santyl | collagenase | 90 grams per month |
| Saphris | asenapine | 60 SL tablets per month |
| SAVAYSA 15, 30, 60 mg TABLET | EDOXABAN | 30 tablets per 30 days |
| SAVELLA 12.5, 25, 50, 100 mg TABLET | MILNACIPRAN | 60 tablets per 30 days |
| Sawyer Premium Insect Repellent 20% spray | PICARIDIN | 4 oz ( 118mL) per 4 days |
| Saxenda | Liraglutide | 15 ml (5 pens) per 30 days |
| Scemblix 20 mg | Asciminib | 60 tablets per 30 days |
| Scemblix 40 mg | Asciminib | 300 tablets per 30 days |
| SEEBRI NEOHALER 15.6 MCG INHAL | GLYCOPYRROLATE | 60 capsules per 30 days |
| Segluromet | Ertugliflozin/metformin | 60 tablets per 30 days |
| SELZENTRY 20 MG/ML SOLUTION | MARAVIROC | 1800 ml per 30 days |
| SELZENTRY 25 mg, 300 mg TABLET | MARAVIROC | 120 tablets per 30 days |
| SELZENTRY 75 mg, 150 mg TABLET | MARAVIROC | 60 tablets per 30 days |
| SEMPREX-D CAPSULE | Acrivastine/psuedoephedrine | 120 tablets per 30 days |
| SENSIPAR 30 mg, 60 mg, 90 mg TABLET | CINACALCET | 120 tablets per 30 days |
| Serax 10mg | oxazepam | 180 capsules per month |
| Serax 15mg, 30mg | oxazepam | 120 capsules per month |
| Serevent Diskus | salmeterol | 1 inhaler per month |
| Seroquel | quetiapine | 90 tablets per month |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Seroquel 400mg | quetiapine | 60 tablets per month |
| Seroquel XR | quetiapine | 60 tablets per month |
| Serzone | nefazodone 150mg | 120 tablets per month |
| Serzone | nefazodone 200mg | 90 tablets per month |
| Serzone 50mg, 100mg, 250mg | nefazodone | 60 tablets per month |
| Seysara | Sarecycline | 30 tablets per 30 days |
| SF ROWASA 4 GRAM/60 ML ENEMA | MESALAMINE | 30 bottles per 30 days |
| SIGNIFOR 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML AMPULE | PASIREOTIDE DIASPARTATE | 60 ampules per 30 days |
| SIGNIFOR LAR 20 MG KIT | PASIREOTIDE PAMOATE | 1 kit per 28 days |
| SIGNIFOR LAR 20 MG VIAL | PASIREOTIDE PAMOATE | 1 vial per 28 days |
| SIGNIFOR LAR 40 MG KIT | PASIREOTIDE PAMOATE | 1 kit per 28 days |
| SIGNIFOR LAR 40 MG VIAL | PASIREOTIDE PAMOATE | 1 vial per 28 days |
| SIGNIFOR LAR 60 MG KIT | PASIREOTIDE PAMOATE | 1 kit per 28 days |
| SIGNIFOR LAR 60 MG VIAL | PASIREOTIDE PAMOATE | 1 vial per 28 days |
| Sila III 0.1% ointment | Triamcinolone | 80 grams (1 kit) per 30 days |
| Silenor 100mg | doxepin | 90 capsules per month |
| Silenor 10mg, 25mg, 50mg, 75mg | doxepin | 30 capsules per month |
| Silenor 150mg | doxepin | 60 capsules per month |
| SILIQ 210 MG/1.5 ML SYRINGE | BRODALUMAB | 3 syringes per 28 days |
| Simponi 100mg | Golimumab | 3 ml (3 syringes) for the first month, then 1 ml (1 syringe) per 28 days |
| Simponi 50mg | Golimumab | 0.5 ml (1 syringe) per 28 days |
| SINEMET 10/100, 25/100, 25/250 mg TAB | CARBIDOPA/LEVODOPA | 240 tablets per 30 days |
| SINEMET CR 25/100, 50/200 mg TAB | CARBIDOPA/LEVODOPA | 240 tablets per 30 days |
| Singulair | montelukast | 30 tablets per month |
| SIRTURO 100 MG TABLET | BEDAQUILINE | 120 tablets per 30 days |
| SITAVIG 50 MG BUCCAL TABLET | ACYCLOVIR DR | 30 tablets per 30 days |
| SIVEXTRO 200 MG TABLET | TEDIZOLID PHOSPHATE | 30 tablets per 30 days |
| SIVEXTRO 200 MG VIAL | TEDIZOLID PHOSPHATE | 30 vials per 30 days |
| SKELAXIN 400 MG TABLET | METAXOLONE | 240 tablets per 30 days |
| SKELAXIN 800 MG TABLET | METAXALONE | 120 tablets per 30 days |
| Skyclarys 50 mg cap | Omaveloxolone | 90 caps per 30 days |
| SKYLA INTRAUTERINE SYSTEM | LEVONORGESTREL | 1 system per 3 years |
| Skyrizi 75 MG syringe | Risankizumab-rzaa | 2 syringes every 28 days for the first 2 months, then 2 syringes every 84 days |
| Skyrizi 150 mg pen/syringe | Risankizumab-rzaa | 1 pen/syringe every 28 days for the first 2 months, then 1 pen/syringe every 84 days |
| Skyrizi 180 mg/1.2 ml | Risankizumab-rzaa | 1.2 ml per 56 days |
| Skyrizi 360 mg/2.4 ml | Risankizumab-rzaa | 2.4 ml per 56 days |
| Sofosbuvir-Velpatasvir Tablet: 400-100mg | Sofosbuvir-Velpatasvir | 336 tablets per 365 days |
| Sogroya pen injector 5, 10, 15mg | Somapacitan-beco | 4 pens every 28 days |
| Sohonos Capsule 1mg | Palovarotene | 120 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Sohonos Capsule 1.5mg; 10mg | Palovarotene | 60 capsules per 30 days |
| Sohonos Capsule 2.5mg; 5mg | Palovarotene | 90 capsules per 30 days |
| SOLIQUA 100 UNIT-33 MCG/ML PEN | Insulin glargine/lixisenatide | 6 pens per 30 days |
| SOLIRIS 300 MG/30 ML VIAL | ECULIZUMAB | 12 vials per 28 days |
| SOLODYN ER 45, 55, 65, 80, 90, 105, 115, 135 mg TABLET | MINOCYCLINE | 30 tablets per 30 days |
| SOLTAMOX 10 MG/5 ML SOLUTION | TAMOXIFEN | 600 ml per 30 days |
| Soma | Carisoprodol | 120 tablets per 30 days |
| SOMA COMPOUND | CARISOPRODOL/ASPIRIN | 120 tablets per 30 days |
| SOMA COMPOUND WITH CODEINE | Carisoprodol/aspirin/codeine | 120 tablets per 30 days |
| Somatuline Depot 120 MG/0.5 ML | LANREOTIDE | 0.5 mL per 28 days |
| Somatuline Depot 60 MG/0.2 ML injection | LANREOTIDE | 1 syringe (0.2mL) per 28 days |
| Somatuline Depot 90 MG/0.3 ML injection | LANREOTIDE | 1 syringe (0.3mL) per 28 days |
| SOMAVERT 10, 15, 20, 25 mg, 30 mg vial | PEGVISOMANT | 30 vials per 30 days |
| SOMNOTE 500 MG SOFTGEL | CHLORAL HYDRATE | 60 softgels per 30 days |
| Sonata | zaleplon | 30 tablets per month |
| SORIATANE 10 MG CAPSULE | ACITRETIN | 120 capsules per 30 days |
| SORIATANE 17.5 mg, 25 mg CAPSULE | ACITRETIN | 60 capsules per 30 days |
| Sotyktu 6 mg tab | deucravacitinib | 30 tabs per 30 days |
| Spacers | | 2 spacers per 365 days |
| Spinraza Intrathecal Solution 2.4mg/1ml | Nusinersen | Initial, 12 mg intrathecally every 14 days for 3 doses (loading doses); then, a fourth loading dose of 12 mg intrathecally 30 days after the third loading dose, then Maintenance, 12 mg intrathecally every 4 months |
| Spiriva Handihaler | tiotropium | 30 capsules (1 handihaler) per month |
| Spiriva Respimat | Tiotropium | 4 grams (1 inhaler) per month |
| SPORANOX 10 MG/ML SOLUTION | ITRACONAZOLE | 600 ml per 30 days |
| SPORANOX 100 MG CAPSULE | ITRACONAZOLE | 120 capsules per 30 days |
| Spravato | Esketamine | 8 kits per 28 days for first fill, then 4 kits per 28 days |
| SPRITAM 1000 MG TABLET | LEVETIRACETAM | 90 tablets per 30 days |
| SPRITAM 250 MG TABLET | LEVETIRACETAM | 180 tablets per 30 days |
| SPRITAM 500 MG TABLET | LEVETIRACETAM | 180 tablets per 30 days |
| SPRITAM 750 MG TABLET | LEVETIRACETAM | 120 tablets per 30 days |
| SPRIX 15.75 MG NASAL SPRAY | Ketorolac tromethamine | 1 bottle per 30 days |
| SPRYCEL 20, 50, 70, 80, 100, 140 mg TAB | DASATINIB | 30 tablets per 30 days |
| STADOL NS 10 MG/ML SPRAY | BUTORPHANOL TARTRATE | 5 bottles per 30 days |
| STALEVO 200 MG TABLET | Carbidopa/levodopa/entacapone | 180 tablets per 30 days |
| STALEVO 50, 75, 100, 125, 150 mg TAB | Carbidopa/levodopa/entacapone | 240 tablets per 30 days |
| STARLIX 60 mg, 120 mg TABLET | NATEGLINIDE | 90 tablets per 30 days |
| STAVZOR DR 125 mg, 250 mg CAPSULE | VALPROIC ACID DR | 240 capsules per 30 days |
| STAVZOR DR 500 MG CAPSULE | VALPROIC ACID DR | 270 capsules per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Steglatro 5mg, 15mg | Ertugliflozin | 30 tablets per 30 days |
| Steglujan 5/100mg, 15/100mg | Ertugliflozin/sitagliptin | 30 tablets per 30 days |
| Stelara 130 MG/26 ML vial | USTEKINUMAB | 4 vials per 28 days |
| Stelara 45mg/0.5ml syringe | USTEKINUMAB | PP, PA: 0.5ml day 1, day 28 then every 12 weeks |
| Stelara 90 MG/ML syringe | USTEKINUMAB | PP, PA: 1 ml day 1, day 28, then every 12 weeks CD, UC: 1ml per 56 days |
| Stimufend | Pegfilgrastim-fpgk | 1 syringe per 14 days |
| Stiolto Respimat | tiotropium and olodaterol | 1 inhaler per month |
| STIVARGA 40 MG TABLET | REGORAFENIB | 84 tablets per 28 days |
| Strattera 10mg, 18mg, 25mg, 40mg | atomoxetine | 60 capsules per month |
| Strattera 60mg, 80mg, 100mg | atomoxetine | 30 tablets per month |
| STRIANT 30 MG MUCOADHESIVE | TESTOSTERONE | 60 systems per 30 days |
| Stribild | Elvitegravir/cobicistat/emtricitabine/tenofovir/disoproxil fumarate | 30 tablets per 30days |
| Striverdi Respimat | olodaterol | 1 inhaler per 30 days |
| Suboxone Film | buprenorphine/naloxone | 60 film strips per month |
| SUBSYS 100, 200, 400, 600, 800, 1200, 1600 MCG SUBLINGUAL SPRAY | FENTANYL | 120 blisters per 30 days |
| Subutex | buprenorphine | 90 tablets per month |
| Suflave Soln 178.7gm | PEG 3350-KCL-NaCl-Na Sulfate-Mag Sulfate | 2 bottles every 2 days |
| SULAR | NISOLDIPINE | 30 tablets per 30 days |
| SULFAZINE 500 MG TABLET | SULFASALAZINE | 360 tablets per 30 days |
| SULFAZINE EC 500 MG TABLET | SULFASALAZINE | 360 tablets per 30 days |
| Sunlenca Therapy Pack | Lenacapavir | 1 pack per 6 months |
| Sunlenca SQ soln 463 mg/1.5 ml | Lenacapavir | 2 vials (3 ml) per 6 months |
| SUPARTZ 25 MG/2.5 ML SYRINGE | HYALURONATE SODIUM | 12.5 mL (5 syringes) per knee per 35 days |
| SUPARTZ FX 25 MG/2.5 ML SYRINGE | HYALURONATE SODIUM | 12.5 mL (5 syringes) per knee per 35 days |
| Supprelin LA | Histrelin acetate | One implant per 12 months |
| SUSTIVA 200 MG CAPSULE | EFAVIRENZ | 60 capsules per 30 days |
| SUSTIVA 50 MG CAPSULE | EFAVIRENZ | 90 capsules per 30 days |
| SUSTIVA 600 MG TABLET | EFAVIRENZ | 30 capsules per 30 days |
| SUSTOL 10 MG/0.4 ML SYRINGE | GRANISETRON | 0.4 mL (1 syringe) per 7 days. Maximum 6 months |
| SUTENT | SUNITINIB | 30 capsules per 30 days |
| Syfovre 15mg/0.1 ml soln | pegcetacoplan | 1 injection per eye every 25 days |
| Symbicort | budesonide;formoterol | 4 inhalers (inhalation aerosol) per 90 days |
| Symbyax | olanzapine/fluoxetine | 30 capsules per month |
| Symdeko | Tezacaftor/ivacaftor and ivacaftor | 60 tablets per 30 days |
| Symfi | Efavirenz, lamivudine, tenofovir | 30 tablets in 30 days |
| Symfi Lo | Efavirenz, lamivudine, tenofovir | 30 tablets in 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| SYMLINPEN 120 PEN INJECTOR | PRAMLINTIDE | 10.8 mL (4 pens/2 boxes) per 30 days |
| SYMLINPEN 60 PEN INJECTOR | PRAMLINTIDE | 6 mL (4 pens/2 boxes) per 33 days |
| SYMPROIC 0.2 MG TABLET | NALDEMEDINE | 30 tablets per 30 days |
| Synagis 50mg, 100mg | palivizumab | 1 vial per month |
| Synalar cream, ointment | Fluocinolone Acetonide | 120g per 30 days |
| SYNALGOS-DC CAPSULE | Dihydrocodone/aspirin/caffeine | 300 capsules per 30 days |
| SYNAREL 2 MG/ML NASAL SPRAY | NAFARELIN ACETATE | 32 mL (4 boxes) per 26 days |
| Synjardy 5/500, 5/1000, 12.5/500, 12.5/1000 | Empagliflozin/metformin | 60 tablets per 30 days |
| Synvisc | hylan G-F 20 | 6ml per 6 months per knee |
| Synvisc One | hylan G-F 20 | 6ml per 6 months per knee |
| Tabrecta | Capmatinib | 120 tablets per 30 days |
| Tabrecta 150mg, 200mg tablet | capmatinib | 120 tablets per 30 days |
| Tadliq 20 mg/5ml oral susp | Tadalafil | 300 ml per 30 days |
| Tafinlar 50mg cap | dabrafenib | 120 caps/30 days |
| Tafinlar 75mg cap | dabrafenib | 120 caps/30 days |
| Tafinlar tab for susp 10 mg | Dabrafenib | 900 per 30 days |
| TAGRISSO | OSIMERTINIB | 30 tablets per 30 days |
| Takhzyro 150 and 300mg syringe, 300 mg vial | Lanadelumab-flyo | 2 ml every 2 weeks |
| TALTZ | IXEKIZUMAB | 3 mL (3 syringes) every 28 days |
| TALWIN NX 50MG/0.5MG TABLET | PENTAZOCINE/NALOXONE | 90 tablets per 30 days |
| Talzenna 0.1mg, 0.25mg, 0.35mg, 0.5, 0.75, 1 mg | talazoparib | 30 capsules per 30 days |
| Tamiflu | oseltamivir | 42 capsules per 6 months |
| Tamiflu 6mg/ml | oseltamivir | 180ml per 6 months |
| TANZEUM | ALBIGLUTIDE | 2 mL (4 pens) per 28 days |
| TARCEVA 100 MG TABLET | ERLOTINIB | 30 tablets per 30 days |
| TARCEVA 25 MG, 150 MG TABLET | ERLOTINIB | 60 tablets per 30 days |
| TARKA | Trandolapril/verapamil | 30 tablets per 30 days |
| Tascenso 0.25 and 0.5 mg ODT | Fingolimod lauryl sulfate | 30 tabs per 30 days |
| TASIGNA 150 and 200 mg | NILOTINIB | 120 capsules per 30 days |
| Tasigna 50 mg | Nilotinib | 300 capsules per 30 days |
| TASMAR 100 MG TABLET | TOLCAPONE | 180 tablets per 30 days |
| Tavneos | Avacopan | 180 capsules per 30 days |
| TAZTIA XT 120, 180, 300, 360 MG CAP | DILTIAZEM | 30 capsules per 30 days |
| TAZTIA XT 240 MG CAPSULE | DILTIAZEM | 60 capsules per 30 days |
| Tazverik | Tazemetostat | 240 tablets per 30 days |
| Tecfidera 120 mg | dimethyl fumarate | 14 capsules per 7 days |
| Tecfidera 240 mg | dimethyl fumarate | 60 capsules per 30 days |
| Tecfidera Starter Pack | dimethyl fumarate | 60 capsules per 30 days |
| TECHNIVIE DOSE PACK | OMBITASVIR/PARITAPREVIR/RITONAVIR | 60 tablets per 30 days, 12 week treatment period |
| Tegretol 100mg, 200mg | carbamazepine | 240 tablets per month |
| Tegretol XR 100mg | carbamazepine | 60 tablets per month |
| Tegretol XR 200mg, 400mg | carbamazepine | 120 tablets per month |
| TEKTURNA 150 MG, 300 MG TABLET | ALISKIREN | 30 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| TEKTURNA HCT TABLET | ALISKIREN/HCTZ | 30 tablets per 30 days |
| Temovate cream, gel, ointment | CLOBETASOL | 120g per 30 days |
| Temovate solution | CLOBETASOL | 120mL per 30 days |
| TENEX 1 MG TABLET | GUANFACINE | 90 tablets per 30 days |
| TENEX 2 MG TABLET | GUANFACINE | 60 tablets per 30 days |
| Tenuate Dospan ER Tablet | Diethylpropion hydrochloride ER | 30 tablets per 30 days |
| Tenuate Tablet | Diethylpropion hydrochloride | 90 tablets per 30 days |
| Tepmetko tablets | tepotinib | 60 tablets per 30 days |
| TESTIM 1% (50 MG) GEL TUBES | TESTOSTERONE | 300 grams (60 tubes) per 30 days |
| TESTOPEL 75 MG PELLETS | TESTOSTERONE IMPLANT | 6 pellets per 3 months |
| TESTRED 10 MG CAPSULE | METHYLTESTOSTERONE | 150 capsules per 30 days |
| TEVETEN 400 MG TABLET | EPROSARTAN | 60 tablets per 30 days |
| TEVETEN 600 MG TABLET | EPROSARTAN | 30 tablets per 30 days |
| TEVETEN 600/12.5, 600/25 MG TABLET | EPROSARTAN/HCTZ | 30 tablets per 30 days |
| Tezspire | Tezepelumab | 1 vial/prefilled syringe (1.91 ml) per 28 days |
| THALOMID 150 MG, 200 MG CAPSULE | THALIDOMIDE | 60 capsules per 30 days |
| THALOMID 50 MG, 100 MG CAPSULE | THALIDOMIDE | 30 capsules per 30 days |
| Thorazine | chlorpromazine | 120 tablets per 30 days |
| Tiazac 120, 180, 300, 360, 420 MG cap SA | DILTIAZEM | 30 capsules per 30 days |
| Tiazac 240 MG capsule SA | DILTIAZEM | 60 capsules per 30 days |
| Tibsovo | ivosidenib | 60 tablets per 30 days |
| TICANASE KIT NASAL SPRAY | FLUTICASONE/SALINE | 16 grams (1 device/120 sprays) per 30 days |
| TICLID 250 MG TABLET | TICLOPIDINE | 60 tablets per 30 days |
| TIGAN 100 MG/ML VIAL | TRIMETHOBENZAMIDE | 240 mL per 30 days |
| TIGAN 300 MG CAPSULE | TRIMETHOBENZAMIDE | 120 capsules per 30 days |
| TIKOSYN | DOFETILIDE | 60 capsules per 30 days |
| TINDAMAX 250 MG TABLET | TINIDAZOLE | 240 tablets per 30 days |
| TINDAMAX 500 MG TABLET | TINIDAZOLE | 120 tablets per 30 days |
| Tivicay 10mg | dolutegravir | 30 tablets per month |
| Tivicay 25mg | dolutegravir | 120 tablets per month |
| Tivicay 50mg | dolutegravir | 60 tablets per month |
| Tivicay PD 5mg oral tablet for suspension | Dolutegravir | 180 tablets per 30 days |
| TIVORBEX 20 MG, 40 MG CAPSULE | Indomethacin submicronized | 90 capsules per 30 days |
| TOBI 300 MG/5 ML INHALATION VIAL | TOBRAMYCIN | 280 mL (56 vials/1 box) per 28 days |
| TOBI PODHALER 28 MG CAPSULES | TOBRAMYCIN | 240 capsules per 30 days |
| Tofranil 10mg | imipramine | 120 tablets per month |
| Tofranil 25mg | imipramine | 60 tablets per month |
| Tofranil 50mg | imipramine | 120 tablets per month |
| TOLAZAMIDE 250 MG TABLET | TOLAZAMIDE | 30 tablets per 30 days |
| TOLAZAMIDE 500 MG TABLET | TOLAZAMIDE | 60 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| TOLBUTAMIDE 500 MG TABLET | TOLBUTAMIDE | 180 tablets per 30 days |
| TOLECTIN | TOLMETIN | 90 tablets per 30 days |
| Topamax | topiramate | 120 tablets per month |
| Topicort cream, gel, ointment | DESOXIMETASONE | 120g per 30 days |
| TORADOL 10 MG TABLET | KETOROLAC | 20 tablets per 30 days |
| Toujeo Max SoloStar Pen 300 units/ml | Insulin glargine | 12ml (4 pens) per 30 days |
| Toujeo SoloStar Pen 300 units/ml | insulin glargine | 9ml (6 pens) per 30 days |
| TOVIAZ ER | FESOTERODINE | 30 tablets per 30 days |
| TRACLEER 32 MG TABLET FOR SUSP | BOSENTAN | 120 tablets per 30 days |
| TRACLEER 62.5 MG, 125 MG TABLET | BOSENTAN | 60 tablets per 30 days |
| Tradjenta | linagliptin | 30 tablets per month |
| Tramadol ER 100, 150, 200, 300 mg capsule | Tramadol | 30 capsules per 30 days |
| TRANSDERM-SCOP PATCH | SCOPOLAMINE | 12 patches per 30 days |
| Tranxene-T 3.75mg, 15mg | clorazepate | 120 tablets per month |
| Tranxene-T 7.5mg | clorazepate | 240 tablets per month |
| Trelegy Ellipta | fluticasone/umeclidinium/vilanterol | 1 inhaler per month |
| TRELSTAR 11.25 MG SYRINGE | TRIPTORELIN PAMOATE | 2 mL (1 kit) per 12 weeks |
| TRELSTAR 22.5 MG SYRINGE | TRIPTORELIN PAMOATE | 2 mL (1 kit) per 24 weeks |
| TRELSTAR 3.75 MG SYRINGE | TRIPTORELIN PAMOATE | 2 mL (1 kit) per 4 weeks |
| TREMFYA 100 MG/ML SYRINGE | GUSELKUMAB | 1 mL (1 syringe) per 28 days |
| TREXIMET 10/60 MG, 85/500 MG TAB | Sumatriptan/naproxen | 9 tablets per 30 days |
| TREZIX CAPSULE | Acetaminophen/caffeine/dihydrocodone | 300 capsules per 30 days |
| Trianex 0.05% ointment | Triamcinolone | 430 grams per 90 days |
| TRIBENZOR | Amlodipine/olmesartan/HCTZ | 30 tablets per 30 days |
| TRICOR 145 MG TABLET | Fenofibrate nanocrystallized | 30 tablets per 30 days |
| TRICOR 48 MG TABLET | Fenofibrate nanocrystallized | 60 tablets per 30 days |
| Triderm 0.025%, 0.1%, 0.5% cream | Triamcinolone | 120 grams per 30 days |
| Triesence 40mg/ml intraocular vial | TRIAMCINOLONE | 2 mL per 30 days |
| TRIGLIDE 160 MG TABLET | Fenofibrate nanocrystallized | 30 tablets per 30 days |
| Trijardy XR 10/5/1000mg, 25/5/1000mg | Empagliflozin/linagliptin/metformin | 30 tablets per 30 days |
| Trijardy XR 5/2.5/1000mg, 12.5/2.5/1000mg | Empagliflozin/linagliptin/metformin | 60 tablets per 30 days |
| Trikafta granule packet | Ivacaftor, tezacaftor, elexacaftor | 60 packets per 30 days |
| Trikafta tablets | Ivacaftor, tezacaftor, elexacaftor | 90 tablets per 30 days |
| Trileptal 150, 300, 600mg | oxcarbazepine | 120 tablets per month |
| Trileptal 300mg/5 ml susp | Oxcarbazepine | 1200 ml per 30 days |
| TRILIPIX 135 MG DR CAPSULE | Fenofibric acid (choline) | 30 capsules per 30 days |
| TRILIPIX 45 MG DR CAPSULE | Fenofibric acid (choline) | 60 capsules per 30 days |
| TRINTELLIX 20 MG TABLET | VORTIOXETINE | 30 tablets per 30 days |
| TRINTELLIX 5 MG, 10 MG TABLET | VORTIOXETINE | 60 tablets per 30 days |
| TRIPTODUR 22.5 MG KIT | TRIPTORELIN | 2 mL (1 syringe) per 24 weeks |
| Triumeq | Abacavir/dolutegravir/lamivudine | 30 tablets per month |
| Trizivir | abacavir/lamivudine/zidovudine | 60 tablets per month |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Trogarzo | Ibalizumab | 14 vials the first month, then 8 vials per 28 days |
| TROKENDI XR 100 MG CAPSULE | TOPIRAMATE ER | 90 capsules per 30 days |
| TROKENDI XR 200 MG CAPSULE | TOPIRAMATE ER | 60 capsules per 30 days |
| TROKENDI XR 25 MG, 50 MG CAPSULE | TOPIRAMATE ER | 120 capsules per 30 days |
| TRULANCE 3 MG TABLET | PLECANATIDE | 30 tablets per 30 days |
| Trulicity 0.75mg/0.5ml | dulaglutide | 2ml (4 pens) per 28 days |
| Trulicity 1.5mg/0.5ml | dulaglutide | 2ml (4 pens) per 28 days |
| Truseltiq | Infigratinib | 1 carton per 28 days |
| Truvada | emtricitabine/tenofovir disoproxil | 30 tablets per month |
| Tudorza Pressair | aclidinium bromide | 1 inhalation device per month |
| Tukysa 150 mg | Tucatinib | 120 tablets per 30 days |
| Tukysa 50 mg | Tucatinib | 300 tablets per 30 days |
| Turalio | Pexidartinib | 120 capsules per 30 days |
| TWINRIX VACCINE | HEPATITIS A & B VACCINE | 4 mL per 30 days |
| TWYNSTA | AMLODIPINE/TELMISARTAN | 30 tablets per 30 days |
| TYBOST 150 MG TABLET | COBICISTAT | 30 tablets per 30 days |
| TYKERB 250 MG TABLET | LAPATINIB | 180 tablets per 30 days |
| TYLENOL 100 MG/ML, 80 MG/0.8 ML LIQUID (INFANTS SILAPAP) | ACETAMINOPHEN | 240 mL per 30 days |
| TYLENOL 120, 160 MG TAB/CAP/ SUPPOSITORY | ACETAMINOPHEN | 600 tablets/capsules/suppositories per 30 days |
| TYLENOL 160 MG/5 ML LIQUID | ACETAMINOPHEN | 2250 mL per 30 days |
| TYLENOL 320 MG/10 ML, 325 MG/10.15 ML, 650 MG/20.3 ML LIQUID | ACETAMINOPHEN | 3000 mL per 30 days |
| TYLENOL 325 MG TAB/CAP/ SUPPOSITORY | ACETAMINOPHEN | 300 tablets/capsules/suppositories per 30 days |
| TYLENOL 500, 650 MG CAP/TAB/ SUPPOSITORY | ACETAMINOPHEN | 180 tablets/capsules/suppositories per 30 days |
| TYLENOL 500 MG/15 ML LIQUID | ACETAMINOPHEN | 2700 mL per 30 days |
| TYLENOL 500 MG/5 ML LIQUID | ACETAMINOPHEN | 900 mL per 30 days |
| TYLENOL 640 MG/20 ML LIQUID | ACETAMINOPHEN | 3750 mL per 30 days |
| TYLENOL 80 MG TAB/CAP/ SUPPOSITORY | ACETAMINOPHEN | 900 tablets/capsules/suppositories per 30 days |
| Tylenol with codeine | codeine/acetaminophen | 180 tablets per month |
| Tylenol with codeine solution | codeine/acetaminophen | 2700 ml per month |
| TYMLOS 80 MCG DOSE PEN INJECTOR | ABALOPARATIDE | 1.56 mL (1 pen) per 30 days |
| TYSABRI 300 MG/15 ML VIAL | NATALIZUMAB | 15 mL (1 vial) per 28 days |
| TYVASO | TREPROSTINIL | 87 mL per 30 days |
| TYZEKA 600 MG TABLET | TELBIDVUDINE | 30 tablets per 30 days |
| Ubrelvy | Ubrogepant | 16 tablets per 30 days |
| Udenyca | Pegfilgrastim-cbqv | 1 syringe/autoinjector per 14 days |
| Ukoniq tablets | umbralisib | 120 tablets per 30 days |
| ULORIC 40 MG TABLET | FEBUXOSTAT | 30 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| ULORIC 80 MG TABLET | FEBUXOSTAT | 30 tablets per 30 days |
| Ultracet | tramadol/acetaminophen | 240 tablets per month |
| Ultram 50mg | tramadol | 240 tablets per month |
| Ultram 100 mg | tramadol | 120 tablets per 30 days |
| ULTRAM ER 200 and 300 mg | TRAMADOL ER | 30 tablets per 30 days |
| UNIRETIC | Moexipril/hydrochlorothiazide | 60 tablets per 30 days |
| UNIVASC | MOEXIPRIL | 60 tablets per 30 days |
| Uptravi 200-800 MCG Titration Pack | SELEXIPAG | 200 tabs (1 package) per 43 days |
| UPTRAVI TABLET | SELEXIPAG | 60 tablets per 30 days |
| Urecholine 5mg, 10mg, 25mg, 50mg | bethanechol | 120 tablets per month |
| UROXATRAL 10 MG TABLET | ALFUZOSIN | 30 tablets per 30 days |
| URSO TABLET | URSODIOL | 90 tablets per 30 days |
| UTIBRON NEOHALER | Indacaterol/glycopyrrolate | 60 capsules (1 device) per 30 days |
| Uzedy syringe 50, 75, 100, 125 mg | Risperidone | 1 syringe per 30 days |
| Uzedy syringe 150, 200, 250 mg | Risperidone | 1 syringe per 60 days |
| Valium 2mg, 10mg | diazepam | 120 tablets per month |
| Valium 5mg | diazepam | 240 tablets per month |
| Valtrex 1000mg | Valacyclovir | 30 tablets per month |
| Valtrex 500mg | Valacyclovir | 60 tablets per month |
| VALTURNA | ALISKIREN/VALSARTAN | 30 tablets per 30 days |
| VANATOL LQ 50-325-40 MG/15 ML ORAL SOLUTION | Butalbital/acetaminophen/caffeine | 270 mL per 30 days |
| Vantas | histrelin acetate | 1 implant per 12 months |
| VAQTA 25 UNITS/0.5 ML VIAL | Hepatitis A virus vaccine | 0.5 mL per 6 months |
| VAQTA 50 UNITS/ML VIAL | Hepatitis A virus vaccine | 1 mL per 6 months |
| VARIVAX VACCINE VIAL | VARICELLA VACCINE | 1 vial per 28 days |
| VARUBI 90 MG TABLET | ROLAPITANT | 60 tablets per 30 days |
| VASCEPA 0.5 GM CAPSULE | ICOSAPENT ETHYL | 240 capsules per 30 days |
| VASCEPA 1 GM CAPSULE | ICOSAPENT ETHYL | 120 capsules per 30 days |
| VASERETIC 5/12.5 MG, 10/25 MG TAB | Enalapril/hydrochlorothiazide | 60 tablets per 30 days |
| VASOTEC 2.5, 5, 10, 20 MG TABLET | enalapril | 60 tablets per 30 days |
| VECAMYL 2.5 MG TABLET | MECAMYLAMINE | 300 tablets per 30 days |
| VELPHORO 500 MG CHEW TABLET | Sucroferric oxyhydroxide | 180 tablets per 30 days |
| Veltassa 8.4, 16.8, 25.2 GM powder packet | Patiromer sorbitex calcium | 30 packets per 30 days |
| VEMLIDY 25 MG TABLET | Tenofovir alafenamide fumarate | 30 tablets per 30 days |
| VENCLEXTA 10 MG TABLET | VENETOCLAX | 60 tablets per 30 days |
| VENCLEXTA 100 MG TABLET | VENETOCLAX | 120 tablets per 30 days |
| VENCLEXTA 50 MG TABLET | VENETOCLAX | 30 tablets per 30 days |
| Venlafaxine besylate XR tab 112.5mg | Venlafaxine | 60 tablets per 30 days |
| Venlafaxine HCl ER 37.5, 75, 150, 225 MG TAB | VENLAFAXINE | 30 tablets per 30 days |
| VENOFER 100 MG/5 ML, 200 MG/10 ML VIAL | IRON SUCROSE COMPLEX | 600 ML per 30 days |
| VENOFER 50 MG/2.5 ML VIAL | IRON SUCROSE COMPLEX | 150 ML per 30 days |
| Ventolin HFA | albuterol inhaler | 2 inhalers per 30 days |
| Veozah 45 mg tab | Fezolinetant | 30 tabs per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Verquvo 10 mg tablets | vericiguat | 30 tablets per 30 days |
| Verquvo 2.5, 5 mg tablets | vericiguat | 60 tablets per 30 days |
| VERZENIO 50, 100, 150, 200 MG TAB | ABEMACICLIB | 60 tablets per 30 days |
| Vesicare 1mg/mL oral solution | Solifenacin | 300mL per 30 days |
| VESICARE 5 MG, 10 MG TABLET | SOLIFENACIN | 30 tablets per 30 days |
| VIBERZI 75 MG, 100 MG TABLET | ELUXADOLINE | 60 tablets per 30 days |
| VICODIN 5 MG/300 MG TABLET | Hydrocodone/acetaminophen | 300 tablets per 30 days |
| VICODIN ES 7.5 MG/300 MG TABLET | Hydrocodone/acetaminophen | 180 tablets per 30 days |
| VICODIN HP 10 MG/300 MG TABLET | Hydrocodone/acetaminophen | 150 tablets per 30 days |
| Vicoprofen | hydrocodone/ibuprofen | 150 tablets per month |
| Victoza | Liraglutide | 9 mL (3 pens) per month |
| Videx 250 and 400mg | didanosine | 30 capsules per month |
| Viekira Pak | Ombitasvir/paritaprevir/ritonavir; dasabuvir | 112 tablets per month |
| VIEKIRA XR TABLET | Dasabuvir/ombitasvir/paritaprevir/ritonavir | 90 tablets per 30 days |
| Viibryd | vilazodone | 30 tablets per month |
| VIMOVO 375/20 MG, 500/20 MG TABLET | Naproxen/esomeprazole | 60 tablets per 30 days |
| VIMPAT 10 MG/ML SOLUTION | LACOSAMIDE | 1200 ML per 30 days |
| VIMPAT 100, 150, 200 MG TABLET | LACOSAMIDE | 60 tablets per 30 days |
| VIMPAT 50 MG TABLET | LACOSAMIDE | 120 tablets per 30 days |
| Viracept 250mg | nelfinavir | 270 tablets per month |
| Viracept 625mg | nelfinavir | 120 tablets per month |
| Viramune 200mg | nevaripine | 60 tablets per month |
| VIRAMUNE 50 MG/5 ML ORAL SUSP | NEVIRAPINE | 1200 ML per 30 days |
| VIRAMUNE XR 100 MG TABLET | NEVIRAPINE | 90 tablets per 30 days |
| Viramune XR 400mg | nevaripine | 30 tablets per month |
| VIREAD 150 MG TABLET | Tenofovir disoproxil fumarate | 60 tablets per 30 days |
| VIREAD 200 MG TABLET | Tenofovir disoproxil fumarate | 45 tablets per 30 days |
| VIREAD 250 MG, 300 MG TABLET | Tenofovir disoproxil fumarate | 30 tablets per 30 days |
| VIREAD 40 MG/SCOOP POWDER | Tenofovir disoproxil fumarate | 225 scoops per 30 days |
| VITEKTA 85 MG, 150 MG TABLET | ELVITEGRAVIR | 30 tablets per 30 days |
| Vivactil 10mg | Protriptyline | 180 tablets per month |
| Vivactil 5mg | Protriptyline | 360 tablets per month |
| VIVITROL INJECTABLE SUSP KIT | NALTREXONE | 1 kit per 28 days |
| VIVLODEX 5 MG, 10 MG CAPSULE | MELOXICAM | 30 capsules per 30 days |
| VIVOTIF BERNA EC CAPSULE | TYPHOID VACCINE | 4 capsules per 7 days |
| Vocabria tablets | cabotegravir | 30/30 days |
| VOLTAREN EC 50 MG TABLET | DICLOFENAC SODIUM DR | 120 tablets per 30 days |
| VOLTAREN EC 75 MG TABLET | DICLOFENAC SODIUM DR | 90 tablets per 30 days |
| Voltaren gel | Diclofenac sodium | 1000 grams per 30 days |
| VOLTAREN XR 100 MG TABLET | DICLOFENAC SODIUM ER | 60 tablets per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| Voquezna Dual Pak | Vonoprazan, amoxicillin | 1 carton per 14 days |
| Voquezna Triple Pak | Vonoprazan, amoxicillin, clarithromycin | 1 carton per 14 days |
| VOTRIENT 200 MG TABLET | Pazopanib | 120 tablets per 30 days |
| Vowst caps | Fecal microbiota spores | 12 caps per 90 days |
| VRAYLAR 1.5, 3, 4.5, 6 MG CAP | CARIPRAZINE | 30 capsules per 30 days |
| VRAYLAR 1.5 MG/3 MG PACK | CARIPRAZINE | 30 capsules per 30 days |
| Vyjuvek gel | Beremagene geperpavec-svdt | 4 vials (10 ml) per 28 days |
| Vumerity | Diroximel fumarate | 120 capsules per 30 days |
| VYTORIN 10/10, 10/20, 10/40, 10/80 TAB | EZETIMIBE/SIMVASTATIN | 30 tablets per 30 days |
| Vyvanse | lisdexamfetamine | 30 capsules per month |
| Wakix | Pitolisant | 60 tablets per 30 days |
| Wegovy 0.25mg, 0.5mg, 1mg | semaglutide | 2ml (4 pens) per 28 days |
| Wegovy 1.7mg, 2.4 mg | semaglutide | 3ml (4 pens) per 28 days |
| Welchol 3.75 GM powder packet | COLESEVELAM | 30 packet per 30 days |
| WELCHOL 625 MG TABLET | COLESEVELAM | 180 tablets per 30 days |
| Welireg | Belzutifan | 90 tablets per 30 days |
| Wellbutrin 100mg | bupropion hcl | 120 tablets per month |
| Wellbutrin 75mg | bupropion hcl | 180 tablets per month |
| Wellbutrin SR 100mg | bupropion hcl sr | 60 tablets per month |
| Wellbutrin SR 150mg | bupropion hcl sr | 60 tablets per month |
| Wellbutrin SR 200mg | bupropion hcl sr | 60 tablets per month |
| Wellbutrin XL 150mg | bupropion hcl xl | 30 tablets per month |
| Wellbutrin XL 300mg | bupropion hcl xl | 30 tablets per month |
| Westcort cream, ointment | hydrocortisone valerate | 120g per 30 days |
| XADAGO 50 MG, 100 MG TABLET | SAFINAMIDE MESYLATE | 30 tablets per 30 days |
| XALKORI 200 MG, 250 MG CAPSULE | CRIZOTINIB | 60 tablets per 30 days |
| Xanax 0.25mg, 0.5mg, 2mg | alprazolam | 90 tablets per month |
| Xanax 1mg | alprazolam | 180 tablets per month |
| XANAX XR 0.5, 1, 2, 3 MG TABLET | ALPRAZOLAM ER | 60 tablets per 30 days |
| XARELTO 10, 20 MG TABLET | RIVAROXOBAN | 30 tablets per 30 days |
| XARELTO 15 MG TABLET | RIVAROXOBAN | 60 tablets per 30 days |
| XARELTO STARTER PACK | RIVAROXOBAN | 51 tablets per 30 days |
| Xcopri 12.5mg, 25mg, 50mg, 100mg | Cenobamate | 30 tablets per 30 days |
| Xcopri 150mg and 200mg | Cenobamate | 60 tablets per 30 days |
| Xdemvy Ophth Sol 0.25% | Lotilaner | 10ml per 40 days |
| Xeglyze Lotion | abametapir | 210mL per 30 days |
| Xeljanz | Tofacitinib citrate | 60 tablets per 30 days |
| Xeljanz 1mg/mL Oral Solution | Tofacitinib | 300mL per 30 days |
| Xeljanz XR | Tofacitinib citrate | 30 tablets per 30 days |
| Xelstrym 4.5, 9, 13.5, 18 mg patch | Dextroamphetamine | 30 patches per 30 days |
| XENAZINE 12.5 MG TABLET | TETRABENAZINE | 120 tablets per 30 days |
| XENAZINE 25 MG TABLET | TETRABENAZINE | 120 tablets per 30 days |
| Xenical 120mg capsules | Orlistat | 90 capsules per 30 days |
| XEOMIN 200 UNIT VIAL | INCOBOTULINUMTOXIN A | 2 vials per 30 days |

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| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| XEOMIN 50 UNIT, 100 UNIT VIAL | INCOBOTULINUMTOXIN A | 4 vials per 30 days |
| XERESE 5%/1% CREAM | Acyclovir/hydrocortisone | 5 grams per 5 days |
| XERMELO 250 MG TABLET | TELOTRISTAT ETHYL | 90 tablets per 30 days |
| XGEVA 120 MG/1.7 ML VIAL | DENOSUMAB | 3 vials per 28 days |
| XIAFLEX 0.9 MG VIAL | Collagenase clostridium histolyticum | 4 vials per 28 days |
| Xifaxan 200mg | Rifaximin | 9 tablets per 30 days |
| Xifaxan 550mg | Rifaximin | 60 tablets per 30 days |
| XIGDUO XR 10/500, 10/1000 MG TAB | Dapagliflozin/metformin | 30 tablets per 30 days |
| XIGDUO XR 2.5/1000, 5/500, 5/1000 MG TABLET | Dapagliflozin/metformin | 60 tablets per 30 days |
| XIIDRA 5% EYE DROPS | LEFITEGRAST | 60 vials per 30 days |
| XIMINO ER 45, 90, 135 MG CAPSULE | MINOCYCLINE | 30 tablets per 30 days |
| XODOL 10 MG/300 MG TABLET | Hydrocodone/acetaminophen | 150 tablets per 30 days |
| XODOL 5 MG/300 MG TABLET | Hydrocodone/acetaminophen | 300 tablets per 30 days |
| XODOL 7.5 MG/300 MG TABLET | Hydrocodone/acetaminophen | 180 tablets per 30 days |
| Xofluza Suspension | baloxavir marboxil | 40mL per 180 days |
| Xolair | omalizumab | 6 vials per 28 days |
| XOPENEX 1.25 MG/0.5 ML SOLUTION | LEVALBUTEROL | 90 vials per 30 days |
| Xopenex HFA | levalbuterol | 2 inhalers per 30 days |
| Xospata | gilteritinib | 90 tablets per 30 days |
| XTAMPZA 9 MG, 36 MG CAPSULE | OXYCODONE MYRISTATE | 60 tablets per 30 days |
| XTAMPZA ER 13.5, 18, 27 MG CAPSULE | OXYCODONE MYRISTATE | 60 tablets per 30 days |
| Xtandi 40mg Tablet, capsule | Enzalutamide | 120 per 30 days |
| XULTOPHY 100 UNIT-3.6 MG/ML PEN | Insulin degludec/liraglutide | 15ml per 30 days |
| Xylocaine solution | lidocaine | 50mL per 30 days |
| XYREM 500 MG/ML ORAL SOLUTION | SODIUM OXYBATE | 540 ML per 30 days |
| Xywav Oral Solution | Ca oxybate, Mg oxybate, K oxybate, Na oxybate | 540mL per 30 days |
| XYZAL 0.5 MG/ML SOLUTION | LEVOCETIRIZINE | 300 ML per 30 days |
| XYZAL 5 MG TABLET | LEVOCETIRIZINE | 30 tablets per 30 days |
| Yonsa 125mg | abiraterone acetate | 120 tablets per 30 days |
| Yuflyma Starter Pack | Adalimumab-aaty | 1 pack per 6 months |
| Yuflyma Kit Auto-Injector 40mg/0.4ml; Yuflyma 2-syringe Kit Prefilled 40mg/0.4ml | Adalimumab-aaty | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter<br>HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Yusimry Sol Pen-Ijector 40mg/0.8ml | Adalimumab-aqvh | AS, PsA, RA, JIA: 2 syringes per 28 days<br>Psoriasis, Uveitis: 4 syringes for the first 28 days, then 2 per 28 days thereafter<br>Crohns, UC: 6 syringes for the first 28 days, then 2 per 28 days thereafter |

| Brand Name | Generic Name | Quantity Limit |
|---|---|---|
| | | HS: 6 syringes for the first 28 days, then 4 per 28 days thereafter |
| Yusimry Starter Pack | Adalimumab-aavh | 1 pack per 6 months |
| ZAMICET 10 MG-325 MG/15 ML SOLN | Hydrocodone/acetaminophen | 2250 ML per 30 days |
| ZANAFLEX 2 MG CAPSULE | TIZANIDINE | 90 capsules per 30 days |
| ZANAFLEX 2 MG TABLET | TIZANIDINE | 90 tablets per 30 days |
| ZANAFLEX 4 MG CAPSULE | TIZANIDINE | 240 capsules per 30 days |
| ZANAFLEX 4 MG TABLET | TIZANIDINE | 240 tablets per 30 days |
| ZANAFLEX 6 MG CAPSULE | TIZANIDINE | 180 capsules per 30 days |
| ZANTAC 1000 MG/40 ML VIAL | RANITIDINE | 480 ML per 30 days |
| ZANTAC 150 MG CAPSULE/TABLET | RANITIDINE | 60 capsules/tablets per 30 days |
| ZANTAC 150 MG/6 ML VIAL | RANITIDINE | 480 ML per 30 days |
| ZANTAC 300 MG CAPSULE/TABLET | RANITIDINE | 30 capsules/tablets per 30 days |
| ZANTAC 50 MG/2 ML VIAL | RANITIDINE | 480 ML per 30 days |
| ZANTAC 75 MG TABLET | RANITIDINE | 60 tablets per 30 days |
| ZARONTIN 250 MG CAPSULE | ETHOSUXIMIDE | 180 capsules per 30 days |
| ZARONTIN 250 MG/5 ML SOLUTION | ETHOSUXIMIDE | 900 ML per 30 days |
| Zavzpret nasal spray | Zavegepant | 8 units (single-dose devices) per 30 days |
| ZEBUTAL 50 MG/325 MG/40 MG CAPSULE | Butalbital/acetaminophen/ caffeine | 18 capsules per 30 days |
| Zegalogue autoinjector/prefilled syringe | Dasiglucagon | 1.2 ml (2 autoinjectors/prefilled syringes) per 30 days |
| ZEGERID 40/1100 MG CAPSULE | Omeprazole/sodium bicarbonate | 30 capsules per 30 days |
| ZEGERID OTC 20/1100 MG CAPSULE | Omeprazole/sodium bicarbonate | 30 capsules per 30 days |
| ZEJULA 100 MG CAPSULE | NIRAPARIB TOSYLATE | 90 capsules per 30 days |
| ZELAPAR 1.25 MG ODT | SELEGILINE | 60 tablets per 30 days |
| ZELBORAF 240 MG TABLET | VEMURAFENIB | 240 tablets per 30 days |
| ZENZEDI 2.5 MG, 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG TABLET | DEXTROAMPHETAMINE | 90 tablets per 30 days |
| ZENZEDI 30 MG TABLET | DEXTROAMPHETAMINE | 60 tablets per 30 days |
| Zeposia 0.92 mg capsule | Ozanimod | 30 capsules per 30 days |
| Zeposia Starter Kit | Ozanimod | 1 pack per 28 days |
| Zerit 15mg | stavudine | 120 tablets per month |
| Zerit 20mg, 30mg, 40mg | stavudine | 60 tablets per month |
| Zestoretic 10/12.5, 20/12.5, 20/25 MG TAB | Lisinopril/HCTZ | 60 tablets per 30 days |
| ZESTRIL 2.5, 10, 20, 30 MG TABLET | LISINOPRIL | 30 tablets per 30 days |
| ZESTRIL 40 MG TABLET | LISINOPRIL | 60 tablets per 30 days |
| ZESTRIL 5 MG TABLET | LISINOPRIL | 30 tablets per 30 days |
| Zetia | Ezetimibe | 30 tablets per 30 days |
| Ziagen 300mg | abacavir | 60 tablets per month |
| Ziextenzo | Pegfilgrastim-bmez | 1 syringe per 14 days |
| ZINBRYTA 150 MG/ML SYRINGE | DACLIZUMAB | 1 syringe per 30 days |
| ZIPSOR 25 MG CAPSULE | DICLOFENAC POTASSIUM | 120 capsules per 30 days |
| ZITHROMAX I.V. 500 MG VIAL | AZITHROMYCIN | 30 vials per 30 days |

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|---|---|---|
| ZOCOR 40 MG, 80 MG TABLET | SIMVASTATIN | 30 tablets per 30 days |
| ZOCOR 5 MG, 10 MG, 20 MG TABLET | SIMVASTATIN | 45 tablets per 30 days |
| ZOFRAN 2 MG/ML VIAL | ONDANSETRON | 720 ML per 30 days |
| ZOFRAN 24 MG TABLET | ONDANSETRON | 30 tablets per 30 days |
| ZOFRAN 4 MG TABLET | ONDANSETRON | 120 tablets per 30 days |
| ZOFRAN 4 MG/5 ML ORAL SOLUTION | ONDANSETRON | 600 ML per 30 days |
| ZOFRAN 8 MG TABLET | ONDANSETRON | 90 tablets per 30 days |
| ZOFRAN ODT 4 MG, 8 MG TABLET | ONDANSETRON | 90 tablets per 30 days |
| ZOHYDRO ER 10, 15, 20, 30, 40, 50 MG CAPSULE | HYDROCODONE ER | 60 tablets per 30 days |
| ZOLADEX 10.8 MG IMPLANT SYRINGE | GOSERELIN | 1 syringe per 84 days |
| Zoloft 100mg | Sertraline | 60 tablets per month |
| Zoloft 25mg, | sertraline | 30 tablets per month |
| Zoloft 50mg | Sertraline | 45 tablets per month |
| Zoloft solution | Sertraline | 300mL per month |
| Zolpidem tartrate 7.5mg cap | Zolpidem | 30 caps per 30 days |
| ZOMETA 4 MG/100 ML VIAL | ZOLEDRONIC ACID | 100 mL per 7 days |
| ZOMETA 4 MG/5 ML VIAL | ZOLEDRONIC ACID | 5 mL per 7 days |
| ZOMIG 2.5 MG, 5 MG TABLET | ZOLMITRIPTAN | 6 tablets per 30 days |
| ZOMIG 2.5 MG, 5 MG NASAL SPRAY | ZOLMITRIPTAN | 12 units per 30 days |
| ZOMIG-ZMT 2.5 MG, 5 MG ODT | ZOLMITRIPTAN | 6 tablets per 30 days |
| ZONEGRAN 25, 50, 100 MG CAPSULE | ZONISAMIDE | 180 tablets per 30 days |
| Zonisade 20mg/ml oral susp | Zonisamide | 900 ml per 30 days |
| ZONTIVITY 2.08 MG TABLET | VORAPAXAR | 30 tablets per 30 days |
| ZORVOLEX 18 MG, 35 MG CAPSULE | DICLOFENAC | 90 capsules per 30 days |
| ZOSTAVAX VACCINE VIAL | ZOSTER VACCINE | 1 vial per 90 days |
| Zostrix 0.025% and 0.1% cream | CAPSAICIN | 120g per 30 days |
| ZOVIRAX 5% CREAM | ACYCLOVIR | 5 grams per 28 days |
| ZOVIRAX 5% OINTMENT | ACYCLOVIR | 30 grams per 28 days |
| Zubsolv | buprenorphine/naloxone | 60 tablets per month |
| ZUPLENZ 4 MG, 8 MG SOLUBLE FILM | ONDANSETRON | 90 films per 30 days |
| ZURAMPIC 200 MG TABLET | LESINURAD | 30 tablets per 30 days |
| ZYBAN SR 150 MG TABLET | BUPROPION | 60 tablets per 30 days |
| Zyclara pump | Imiquimod | 1 bottle (28 actuations) per 28 days |
| ZYDELIG 100 MG, 150 MG TABLET | IDELALISIB | 60 tablets per 30 days |
| ZYFLO CR 600 MG TABLET | ZILEUTON | 120 tablets per 30 days |
| ZYKADIA 150 MG CAPSULE | CERITINIB | 150 capsules per 30 days |
| Zyprexa | olanzapine | 30 tablets per month |
| ZYRTEC 5 MG, 10 MG TAB/CHEW TAB | CETIRIZINE | 30 tablets per 30 days |
| ZYRTEC-D TABLET | Pseudoephedrine/cetirizine | 60 tablets per 30 days |
| ZYTIGA 250 MG TABLET | ABIRATERONE | 120 tablets per 30 days |
| ZYTIGA 500 MG TABLET | ABIRATERONE | 60 tablets per 30 days |
| Zyvox tablet | Linezolid | 56 tablets per 28 days |