



INTRODUCTION

The information contained in the Willamette Valley Community Health (WVCH) Formulary and its appendices is provided solely for the convenience of medical providers. WVCH does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. The WVCH Formulary is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in his/her choice of prescription drugs. WVCH assumes no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

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This document contains references to brand name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with Willamette Valley Community Health.

If viewing this formulary via the Internet, please be advised that the formulary is updated periodically and changes may appear prior to their effective date.

HOW TO USE THE FORMULARY

The medications on the Willamette Valley Community Health (WVCH) formulary are grouped into categories depending on the type of medical conditions that they are used to treat. Medications are listed in alphabetical order in the first column of the drug table. Brand name drugs are capitalized, and generic drugs are listed in lower case italics.

GENERIC AND BRAND NAME MEDICATIONS

Willamette Valley Community Health covers both brand name and generic medications. The presence of a brand name medication in parentheses next to the generic equivalent is for informational purposes only, and is NOT an indication of coverage.

Coverage of multisource brand drugs listed on the WVCH formulary that have generic equivalents available may require prior approval. We are a mandatory generic plan.

LEGEND

The following restriction and coverage notes may be found within the body of the WVCH formulary:

Abbreviations	Description	Explanation
PA	Prior Authorization Required	Prior authorization is required before filling a prescription for this medication. Without prior approval, WVCH may not cover this medication.
PA NSO	Prior Authorization Required for New Starts Only	Prior authorization is required before filling initial prescription for this medication. If approved by WVCH, subsequent authorizations will not be required if medication has been filled in the last 60 to 90 days, depending on the medication.
QL	Quantity Limit	WVCH limits the amount of this medication that is covered per prescription, or within a specific time frame. Exceptions may be allowed with prior approval.
ST	Step Therapy Restriction	Coverage for this medication may require you to have a claim history indicating you have tried a different medication in the past.
SPEC	Specialty Drug	Coverage for specialty drugs will only be provided if obtained from Medimpact Direct Specialty, which is the contracted pharmacy for WVCH. Medimpact Direct Specialty Telephone: (877) 391-1103 Fax: (888) 807-5716 Website: medimpactdirect.com

FOR MORE INFORMATION

If you should have additional questions about the WVCH Formulary, please contact Customer Service at 1-(503) 584-2150 or toll free at 1-(866) 362-4794, Monday through Friday from 8:00 a.m. to 5:00 p.m. Pacific Time. TTY/TDD users should call 711.

ABBREVIATIONS

Abbreviations	Description
amps	ampules
APAP	acetaminophen
ASA	aspirin
blst w/dev	blister pack with device
cap	capsule
chew	chewable
conc	concentrated
cyp	cytochrome P450
DR	delayed release
ER	extended release
g	gram
hr	hour
IM	intramuscular
inj	injection
IV	intravenous
mcg	microgram
MDI	metered dose inhaler
mg	milligram
mL	milliliter
neb	nebulizer
ODT	orally disintegrating tablets
oint	ointment
pgy	piggyback
pgy vl prt	piggyback vial port
recon	reconstitution
SA	sustained action
sol	solution
soln	solution
SR	sustained release
subl	sublingual
subq	subcutaneous
supp	suppository
susp	suspension
tab	tablet
w/dev	with device

Drug Name	Common Brand Name	Restrictions
Analgesics		
Analgesics, Miscellaneous		
<i>acetaminophen (APAP)</i>		
▪ rectal supp: 120 mg, 325 mg, 650 mg	(Feverall)	Max of 4,000 mg per day
▪ oral susp: 160 mg/5 mL	(Infant's Tylenol)	Max of 4,000 mg per day
▪ chew tabs: 80 mg, 160 mg	(Tylenol Jr. Meltaways)	Max of 4,000 mg per day
▪ tabs: 325 mg, 500 mg	(Tylenol)	Max of 4,000 mg per day
<i>APAP-codeine</i>		
▪ tabs: 300-15 mg, 300-30 mg, 300-60 mg	(Tylenol with Codeine)	QL of 120 tabs in 30 days. PA <13 yo. 13yo and older may receive up to two 7 day fills every 6 months without PA.
<i>butalbital-APAP</i>		
▪ tabs: 50-325 mg	(Marten-Tab)	QL of 20 tabs/30 days
<i>butalbital-APAP-caffeine</i>		
▪ tabs: 50-325-40 mg	(Esgic)	QL of 20 tabs/30 days
<i>butalbital-ASA-caffeine</i>		
▪ tabs: 50-325-40 mg	(Fiorinal)	QL of 20 tabs/30 days
<i>codeine</i>		
▪ tabs: 15 mg, 30 mg, 60 mg		QL of 120 tabs in 30 days. PA <13 yo. 13yo and older may receive up to two 7 day fills every 6 months without PA.
<i>fentanyl</i>		
▪ transdermal patches: 12.5 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr	(Duragesic)	PA
<i>hydrocodone-APAP</i>		
▪ oral soln: 7.5-325 mg/15 mL	(Hycet)	QL of 240 mL/30 days. May receive up to two 7 day fills every 6 months without PA.
▪ tabs: 5-325 mg, 7.5-325 mg, 10-325 mg	(Norco)	QL of 120 tablets/30 days May receive up to two 7 day fills every 6 months without PA.
<i>hydrocodone-ibuprofen</i>		
▪ tabs: 7.5-200 mg	(Vicoprofen)	QL of 120 tablets/30 days

Drug Name	Common Brand Name	Restrictions
		May receive up to two 7 day fills every 6 months without PA.
<i>hydromorphone</i>		
▪ tabs: 2 mg, 4 mg	(Dilaudid)	QL of 120 tablets/30 days PA < 18 y.o., 18 and older may receive up to two 7 day fills every 6 months without PA.
▪ tabs: 8 mg	(Dilaudid)	QL of 60 tablets/30 days PA
<i>methadone</i>		
▪ tabs: 5 mg, 10 mg	(Dolophine)	PA required
<i>morphine</i>		
▪ tabs: 15 mg, 30 mg		QL of 90 tabs/30 days PA <18 yo 18 and older may receive up to two 7 day fills every 6 months without PA.
▪ ER tabs: 15 mg, 30 mg	(MS Contin)	PA required
▪ ER tabs: 60 mg	(MS Contin)	PA required
<i>oxycodone</i>		
▪ tabs: 5 mg, 10 mg, 15 mg, 20 mg	(Roxicodone)	QL of 120 tablets/30 days PA < 18 y.o., 18 and older may receive up to two 7 day fills every 6 months without PA.
▪ tabs: 20 mg		QL of 90 tablets/30 days PA required
▪ tabs: 30 mg	(Roxicodone)	QL of 60 tabs in 25 days. PA required
<i>oxycodone/APAP</i>		
▪ tabs: 5-325 mg, 7.5-325 mg, 10-325 mg	(Percocet)	QL of 120 tablets/30 days PA < 18 y.o., 18 and older may receive up to two 7 day fills every 6 months without PA.
<i>tramadol</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tabs: 50 mg 	(Ultram)	QL of 120 tablets/30 days PA < 18 y.o., 18 and older may receive up to two 7 day fills every 6 months without PA.
Nonsteroidal Anti-Inflammatory Agents		
<i>aspirin (ASA)</i>		
<ul style="list-style-type: none"> rectal supp: 300 mg, 600 mg chew tabs: 81 mg tabs: 81 mg, 325 mg DR tabs: 325 mg, 500 mg, 650 mg 		
<i>celecoxib</i>		
<ul style="list-style-type: none"> caps: 50 mg, 100 mg, 200 mg, 400 mg 	(Celebrex)	ST – must have 2 claims for alternative NSAID within 120 days. QL – 30 caps/30 days
<i>diclofenac sodium</i>		
<ul style="list-style-type: none"> DR tabs: 25 mg, 50 mg, 75 mg ER tabs: 100 mg Topical gel 1% 	(Voltaren) (Voltaren-XR)	PA QL – 200g/30 days
<i>diclofenac sodium-misoprostol</i>		
<ul style="list-style-type: none"> DR tabs: 50-200 mg, 75-200 mg 	(Arthrotec)	
<i>etodolac</i>		
<ul style="list-style-type: none"> caps: 200 mg, 300 mg tabs: 400 mg, 500 mg ER tabs: 400 mg, 500 mg, 600 mg 		
<i>ibuprofen</i>		
<ul style="list-style-type: none"> oral infant drops: 50 mg/1.25 mL oral susp: 100 mg/5 mL chew tabs: 100 mg tabs: 200 mg, 400 mg, 600 mg, 800 mg 	(Infant's Motrin) (Children's Motrin) (Motrin Chewables) (Motrin)	
<i>indomethacin</i>		
<ul style="list-style-type: none"> caps: 25 mg, 50 mg 	(Indocin)	
<i>meloxicam</i>		
<ul style="list-style-type: none"> tabs: 7.5 mg, 15 mg 	(Mobic)	
<i>nabumetone</i>		
<ul style="list-style-type: none"> tabs: 500 mg, 750 mg 	(Relafen)	
<i>naproxen</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL tabs: 250 mg, 375 mg, 500 mg DR tabs: 375 mg, 500 mg 	(Naprosyn) (Naprosyn) (EC-Naprosyn)	
<i>naproxen sodium</i>		
<ul style="list-style-type: none"> tabs: 275 mg, 550 mg 	(Anaprox, Anaprox DS)	
<i>salsalate</i>		
<ul style="list-style-type: none"> tabs: 500 mg, 750 mg 	(Disalcid)	
<i>sulindac</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ tabs: 150 mg, 200 mg 	(Clinoril)	
Anesthetics		
capsaicin		
<ul style="list-style-type: none"> ▪ cream: 0.025%, 0.1%, 0.25% ▪ gel: 0.025%, 0.05%, 0.075% 	(Zostrix)	
lidocaine		
<ul style="list-style-type: none"> ▪ viscous oral soln: 2 % ▪ topical soln: 4 % ▪ topical cream: 4% 	(Xylocaine)	QL 90g per 30 days
lidocaine-prilocaine		
<ul style="list-style-type: none"> ▪ cream: 2.5-2.5% 	(EMLA)	QL 30g per 28 days
Anti-Addiction/Substance Abuse Treatment Agents		
buprenorphine		
<ul style="list-style-type: none"> ▪ sublingual tabs: 2 mg, 8 mg 	(Subutex)	PA
buprenorphine-naloxone		
<ul style="list-style-type: none"> ▪ sublingual tabs: 2 mg-0.5 mg, 8 mg-2 mg ▪ sublingual film: 2 mg/0.5 mg 	(Suboxone tabs)	PA PA, QL 30 films/30 days
bupropion		
<ul style="list-style-type: none"> ▪ SR: 150mg 	(Zyban)	QL 360 tabs/180 days
disulfiram		
<ul style="list-style-type: none"> ▪ tabs: 250 mg, 500 mg 	(Antabuse)	
naloxone	(Narcan)	
<ul style="list-style-type: none"> ▪ syringe: 1 mg/ml, 0.4 mg/ml ▪ vial: 0.4 mg/ml ▪ nasal spray: 4mg/0.1 ml 		
naltrexone	(ReVia)	
<ul style="list-style-type: none"> ▪ tabs: 50 mg 		
nicotine polacrilex	(Nicorette)	
<ul style="list-style-type: none"> ▪ gum: 2 mg, 4 mg ▪ lozenges: 2 mg, 4 mg 		
nicotine transdermal patches	(Nicoderm)	
<ul style="list-style-type: none"> ▪ transdermal patches: 7 mg/24 hr, 11 mg/24 hr, 14 mg/24 hr, 21 mg/24 hr, 22 mg/24 hr 		
nicotine replacement, misc.		
<ul style="list-style-type: none"> ▪ inhaler: 10mg 	(Nicotrol)	PA, QL: 2880 cartridges
<ul style="list-style-type: none"> ▪ nasal spray: 10mg/mL 	(Nicotrol NS)	PA, QL: 36 bottles per 90 days
varenicline		
<ul style="list-style-type: none"> ▪ tabs: 0.5 mg, 1 mg ▪ tab pack: 0.5 mg and 1 mg 	(Chantix) (Chantix Starter Pack)	QL of 336 tabs in 365 days QL of 336 tabs in 365 days

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tab pack: 1 mg 	(Chantix Continuation Pack)	QL of 336 tabs in 365 days
Antianxiety Agents		
<i>clonazepam</i>		
<ul style="list-style-type: none"> tabs: 0.5 mg, 1 mg, 2 mg 	(Klonopin)	QL of 60 tablets/month PA required after 30 days
<i>temazepam</i>		
<ul style="list-style-type: none"> caps: 15 mg, 30 mg 	(Restoril)	PA
Antibacterials		
Penicillins		
<i>amoxicillin</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL, 250 mg/5 mL, 400mg/5mL 	(Amoxil)	
<ul style="list-style-type: none"> chew tabs: 125 mg, 200 mg, 250 mg, 400 mg 	(Amoxil)	
<ul style="list-style-type: none"> caps: 250 mg, 500 mg 	(Amoxil)	
<i>amoxicillin-clavulanate</i>		
<ul style="list-style-type: none"> oral susp: 125-31.25 mg/mL, 200-28.5 mg/5 mL, 250-62.5 mg/5 mL, 400-57 mg/5 mL, 600-42.9 mg/5 mL 	(Augmentin)	
<ul style="list-style-type: none"> chew tabs: 200-28.5 mg, 400-57 mg 	(Augmentin)	
<ul style="list-style-type: none"> tabs: 250-125 mg, 500-125 mg, 875-125 mg 	(Augmentin)	
<i>ampicillin trihydrate</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL, 250 mg/5 mL 		
<ul style="list-style-type: none"> caps: 250 mg, 500 mg 		
<i>dicloxacillin sodium</i>		
<ul style="list-style-type: none"> caps: 250 mg, 500 mg 		
<i>penicillin V potassium</i>		
<ul style="list-style-type: none"> oral susp: 250 mg/5 mL 		
<ul style="list-style-type: none"> tabs: 250 mg, 500 mg 		
Cephalosporins		
<i>cefdinir</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL, 250 mg/5 mL 		
<ul style="list-style-type: none"> caps: 300 mg 		
<i>cefprozil</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL, 250 mg/5 mL 		
<ul style="list-style-type: none"> tabs: 250 mg, 500 mg 		
<i>ceftriaxone</i>		
<ul style="list-style-type: none"> frozen pb (with dextrose, iso) inj: 1 g/50 mL 	(Rocephin)	
<ul style="list-style-type: none"> vial for inj: 250 mg, 1 g 	(Rocephin)	
<i>cephalexin</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL, 250 mg/5 mL 		
<ul style="list-style-type: none"> caps: 250 mg, 500 mg 	(Keflex)	
Macrolides		
<i>azithromycin</i>		
<ul style="list-style-type: none"> oral susp: 100 mg/5 mL, 200 mg/5 mL 	(Zithromax)	

Drug Name	Common Brand Name	Restrictions
▪ powder packet: 1 g	(Zithromax)	
▪ tabs: 250 mg, 500 mg, 600 mg	(Zithromax)	
<i>clarithromycin</i>		
▪ oral susp: 125 mg/5 mL, 250 mg/5 mL		
▪ tabs: 250 mg, 500 mg	(Biaxin)	
<i>erythromycin base</i>		
▪ DR caps: 250 mg		PA
▪ tabs: 250 mg, 500 mg		PA
▪ DR tabs: 250 mg, 333 mg, 500 mg	(ERY-TAB)	PA
<i>erythromycin ethylsuccinate</i>		
▪ oral susp: 200 mg/5 mL, 400 mg/5 mL	(E.E.S., ERYPED)	
▪ tabs: 400 mg	(E.E.S.)	
<i>erythromycin stearate</i>		
▪ tabs: 250 mg, 500 mg		
Quinolones		
<i>ciprofloxacin</i>		
▪ oral susp: 250 mg/5 mL, 500 mg/5 mL	(Cipro)	
▪ tabs: 100 mg, 250 mg, 500 mg, 750 mg	(Cipro)	
<i>levofloxacin</i>		
▪ oral soln: 250 mg/10 mL	(Levaquin)	
▪ tabs: 250 mg, 500 mg, 750 mg	(Levaquin)	
<i>moxifloxacin</i>		
▪ tabs: 400 mg	(Avelox)	
Sulfonamides		
<i>sulfamethoxazole-trimethoprim</i>		
▪ oral susp: 200 mg-40 mg/5 mL	(Sulfatrim)	
▪ tabs: 400 mg-80 mg	(Bactrim, Septra)	
▪ tabs: 800 mg-160 mg	(Bactrim DS, Septra DS)	
<i>sulfasalazine</i>		
▪ tabs: 500 mg tabs	(Azulfidine)	
▪ DR tabs: 500 mg	(Azulfidine)	
Tetracyclines		
<i>doxycycline hyclate</i>		
▪ caps: 50 mg, 100 mg	(Vibramycin)	QL of 2 x 14 days every 3 months.
▪ tabs: 100 mg		QL of 2 x 14 days every 3 months.
<i>doxycycline monohydrate</i>		
▪ oral susp: 25 mg/5 mL	(Vibramycin)	
▪ caps: 50 mg, 100 mg	(Monodox)	QL of 2 x 14 days every 3 months.
▪ tabs: 50 mg, 100 mg	(Adoxa)	QL of 2 x 14 days every 3 months.

Drug Name	Common Brand Name	Restrictions
<i>minocycline</i>		
▪ caps: 50 mg, 75 mg, 100 mg	(Minocin)	QL of 2 x 14 days every 3 months.
▪ tabs: 50 mg, 75 mg	(Dynacin)	QL of 2 x 14 days every 3 months.
<i>tetracycline</i>		
▪ caps: 250 mg, 500 mg		QL of 2 x 14 days every 3 months.
Antibacterials, Miscellaneous		
<i>clindamycin</i>		
▪ caps: 75 mg, 150 mg, 300 mg	(Cleocin)	
<i>clindamycin palmitate</i>		
▪ oral soln: 75 mg/5 mL	(Cleocin Palmitate)	
<i>linezolid</i>		
▪ IV solution: 600mg/300 ml	(Zyvox)	
▪ tabs: 600 mg		PA
<i>neomycin</i>		
▪ tabs: 500 mg		
<i>nitrofurantoin</i>		
▪ oral susp: 25 mg/5 mL	(Furadantin)	
▪ caps: 50 mg, 100 mg	(Macrobid, Macrochantin)	
<i>rifaximin</i>		
▪ tablets: 200 mg, 550 mg	(Xifaxan)	PA
<i>vancomycin</i>		
▪ caps: 125 mg, 250 mg	(Vancocin)	PA
▪ vial for inj: 750 mg, 1 g, 10 g		
Anticancer Agents		
<i>altretamine</i>		
▪ caps: 50 mg	(Hexalen)	
<i>anastrozole</i>		
▪ tabs: 1 mg	(Arimidex)	
<i>bexarotene</i>		
▪ caps: 75 mg	(Targretin)	
<i>bicalutamide</i>		
▪ tabs: 50 mg	(Casodex)	
<i>capecitabine</i>		
▪ tabs: 150 mg, 500 mg	(Xeloda)	SPEC, PA
<i>chlorambucil</i>		
▪ tabs: 2 mg	(Leukeran)	
<i>estramustine</i>		
▪ caps: 140 mg	(Emcyt)	
<i>etoposide</i>		
▪ caps: 50 mg	(Toposar)	
<i>exemestane</i>		
▪ tabs: 25 mg	(Aromasin)	
<i>flutamide</i>		

Drug Name	Common Brand Name	Restrictions
▪ caps: 125 mg <i>goserelin acetate</i>		
▪ subq implant: 3.6 mg, 10.8 mg <i>hydroxyurea</i>	(Zoladex)	SPEC, PA
▪ caps: 500 mg <i>letrozole</i>	(Hydrea)	
▪ tabs: 2.5 mg <i>leuprolide acetate</i>	(Femara)	
▪ subq kit: 1 mg/0.2 mL ▪ syringe kit: 3.75 mg, 7.5 mg, 11.25 mg, 22.5 mg, 30 mg ▪ syringe kit: 7.5 mg, 11.25 mg, 30 mg	(Lupron Depot) (Lupron Depot-Ped)	SPEC, PA SPEC, PA SPEC, PA
<i>lomustine</i> ▪ caps: 10 mg, 40 mg, 100 mg	(Ceenu)	
<i>megestrol acetate</i> ▪ oral susp: 400 mg/10 mL ▪ tabs: 20 mg, 40 mg	(Megace)	
<i>mercaptopurine</i> ▪ tabs: 50 mg	(Purinethol)	
<i>methotrexate</i> ▪ tabs: 2.5 mg ▪ vial: 25 mg/mL	(Rheumatrex)	
<i>mitotane</i> ▪ tabs: 500 mg	(Lysodren)	
<i>nilutamide</i> ▪ tabs: 150 mg	(Nilandron)	
<i>procarbazine</i> ▪ caps: 50 mg	(Matulane)	
<i>tamoxifen citrate</i> ▪ tabs: 10 mg, 20 mg		
<i>temozolomide</i> ▪ caps: 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg ▪ vial: 100 mg	(Temodar) (Temodar)	SPEC, PA SPEC, PA
<i>thioguanine</i> ▪ tabs: 40 mg	(Tabloid)	
<i>toremifene citrate</i> ▪ tabs: 60 mg	(Fareston)	
<i>tretinoin</i> ▪ caps: 10 mg	(Tretinoin)	PA
Anticonvulsants		
<i>carbamazepine</i> ▪ oral susp: 100 mg/5 mL ▪ chew tabs: 100 mg ▪ multi-phase 12 hr caps: 100 mg, 200 mg, 300 mg ▪ tabs: 200 mg ▪ ER 12 hr tabs: 100mg, 200 mg, 400 mg	(Tegretol) (Tegretol) (Carbatrol) (Tegretol) (Tegretol XR)	

Drug Name	Common Brand Name	Restrictions
<i>diazepam</i>		
▪ rectal gel kit: 2.5 mg, 5-7.5-10 mg, 12.5-15-20 mg	(Diastat)	
<i>ethosuximide</i>		
▪ oral soln: 250 mg/5 mL	(Zarontin)	
▪ caps: 250 mg	(Zarontin)	
<i>felbamate</i>		
▪ tabs: 400 mg	(Felbatol)	PA NSO
<i>gabapentin</i>		
▪ oral soln: 250 mg/5 mL	(Neurontin)	PA
▪ caps: 100 mg, 300 mg, 400 mg	(Neurontin)	
▪ tabs: 600 mg, 800 mg		
<i>levetiracetam</i>		
▪ oral soln: 100 mg/mL	(Keppra)	
▪ tabs: 250 mg, 500 mg, 750 mg, 1000 mg	(Keppra)	
▪ ER 25 hr tabs: 500 mg, 750 mg	(Keppra XR)	PA NSO
<i>oxcarbazepine</i>		
▪ oral susp: 300 mg/5 mL	(Trileptal)	PA NSO if ≥ 5 y.o.
▪ tabs: 150 mg, 300 mg, 600 mg	(Trileptal)	
<i>phenobarbital</i>		
▪ oral elixir 20 mg/5 mL		
▪ tabs: 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg		
<i>phenytoin</i>		
▪ oral susp: 125 mg/5 mL	(Dilantin-125)	
▪ chew tabs: 50 mg	(Dilantin Infatabs)	
▪ caps: 30 mg	Dilantin	
▪ caps: 100 mg, 200 mg caps, 300 mg	(Dilantin, Phenytek)	
<i>primidone</i>		
▪ tabs: 50 mg, 250 mg	(Mysoline)	
<i>tiagabine</i>		
▪ tabs: 2 mg, 4 mg	(Gabitril)	
<i>topiramate</i>		
▪ sprinkle caps: 15 mg, 25 mg	(Topamax)	
▪ tabs: 25 mg, 50 mg, 100 mg, 200 mg	(Topamax)	
<i>zonisamide</i>		
▪ caps: 25 mg, 50 mg, 100 mg	(Zonegran)	
Antidementia Agents		
<i>donepezil</i>		
▪ tabs: 5 mg, 10 mg	(Aricept)	PA – only if under 40 yo
<i>memantine</i>		
▪ oral soln: 10 mg/5 mL	(Namenda)	PA
▪ tabs: 5 mg, 10 mg	(Namenda)	PA – if under 40 yo, QL 60 tabs/30 days
▪ tab dosepak: 5-10 mg		PA if under 40 yo
<i>rivastigmine</i>		

Drug Name	Common Brand Name	Restrictions
▪ oral soln: 2 mg/mL	(Exelon)	PA
▪ caps: 1.5 mg, 3 mg, 4.5 mg, 6 mg	(Exelon)	PA
Antidiabetic Agents		
Antidiabetic Agents, Miscellaneous		
<i>acarbose</i>		
▪ tabs: 25 mg, 50 mg, 100 mg	(Precose)	
<i>metformin</i>		
▪ tabs: 500 mg, 850 mg, 1000 mg	(Glucophage)	
▪ ER tabs: 500 mg, 750 mg	(Glucophage XR)	
<i>pioglitazone</i>		
▪ tabs: 15 mg, 30 mg, 45 mg	(Actos)	
Dipeptidyl Peptidase-4 Inhibitors		
<i>alogliptin</i>		
▪ tabs: 6.25 mg, 12.5 mg, 25 mg	(Nesina)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
<i>linagliptin</i>		
▪ tabs: 5 mg	(Tradjenta)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
<i>sitagliptin</i>		
▪ tabs: 25 mg, 50 mg, 100 mg	(Januvia)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
Glucagon-Like Peptide-1 Agonists		
<i>albiglutide</i>		
▪ pen: 30 mg/0.5 mL, 50 mg/0.5 mL	(Tanzeum)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
<i>dulaglutide</i>		
▪ pen: 0.75 mg/0.5 ml, 1.5 mg/0.5 ml	(Trulicity)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
<i>exenatide</i>		
▪ pen: 2 mg/0.65 mL, 2 mg/0.85 ml	(Bydureon, Bydureon BCise)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.

Drug Name	Common Brand Name	Restrictions
<i>liraglutide</i>		
▪ pen: 18 mg/3 ml	(Victoza)	ST – must have claims for 2 or more preferred medications for 144 days out of the last 180 days.
Insulins, Rapid Acting		
<i>insulin lispro</i>		
▪ vial: 100 units/mL	(Admelog)	
▪ pen: 100 units/mL	(Admelog Kwikpen)	
Insulins, Short-Acting		
<i>insulin regular</i>		
▪ vial: 100 units/mL vial	(Humulin R, Novolin R)	
▪ vial: 500 units/mL	(Humulin R U-500)	
Insulins, Intermediate-Acting		
<i>insulin NPH</i>		
▪ vial: 100 units/mL	(Humulin N, Novolin N)	
▪ pen: 100 units/mL	(Humulin N Kwikpen)	
Insulins, Long-Acting		
<i>insulin detemir</i>		
▪ vial: 100 units/mL	(Levemir)	PA NSO
▪ pen: 100 units/mL	(Levemir Flextouch)	PA NSO
<i>insulin glargine</i>		
▪ pen: 100 units/mL	(Basaglar)	
Insulins, Mixes		
<i>insulin aspart protamine and insulin aspart</i>		
▪ vial: 70-30 units/mL	(Novolog Mix 70-30)	
▪ pen: 70-30 units/mL	(Novolog Mix 70-30 Flexpen)	
<i>insulin lispro protamine and insulin lispro</i>		
▪ vial: 50-50 units/mL	(Humalog Mix 50-50)	
▪ pen: 50-50 units/mL	(Humalog Mix 50-50 Kwikpen)	
▪ vial: 75-25 units/mL	(Humalog Mix 75-25)	
▪ pen: 75-25 units/mL	(Humalog Mix 75-25 Kwikpen)	
<i>insulin NPH and insulin regular</i>		
▪ vial: 70-30 units/mL	(Humulin 70-30, Novolin 70-30)	

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> pen: 70-30 units/mL 	(Humulin 70-30 Kwikpen)	
Sodium-Glucose Co-Transporter 2 Inhibitors		
<i>empagliflozin</i>		
<ul style="list-style-type: none"> tabs: 10 mg, 25 mg 	(Jardiance)	ST – must have claims for 3 or more preferred medications for 144 days out of the last 180 days.
Sulfonylureas		
<i>glimepiride</i>		
<ul style="list-style-type: none"> tabs: 1 mg, 2 mg, 4 mg 	(Amaryl)	
<i>glipizide</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg ER 24 hr tabs: 2.5 mg, 5 mg, 10 mg 	(Glucotrol) (Glucotrol XL)	
<i>glyburide</i>		
<ul style="list-style-type: none"> tabs: 1.25 mg, 2.5 mg, 5 mg 	(Diabeta)	
<i>glyburide micronized</i>		
<ul style="list-style-type: none"> tabs: 1.5 mg, 3 mg, 6 mg 	(Glynase)	
Antifungals		
<i>clotrimazole</i>		
<ul style="list-style-type: none"> topical cream: 1 % vaginal cream: 1 %, 2% 	(Lotrimin) (Gyne-Lotrimin)	
<i>fluconazole</i>		
<ul style="list-style-type: none"> oral susp: 10 mg/mL, 40 mg/mL tabs: 50 mg, 100 mg, 200 mg tabs: 150 mg 	(Diflucan) (Diflucan) (Diflucan)	PA PA QL of 3 in 30 days
<i>gentian violet</i>		
<ul style="list-style-type: none"> topical soln: 1 %, 2 % 		
<i>griseofulvin, microsize</i>		
<ul style="list-style-type: none"> oral susp: 125 mg/5 mL 		
<i>griseofulvin, ultramicrosize</i>		
<ul style="list-style-type: none"> tabs: 125 mg, 250 mg 	(Gris-Peg)	PA
<i>itraconazole</i>		
<ul style="list-style-type: none"> oral soln: 10 mg/mL caps: 100 mg 	Sporanox (Sporanox)	PA PA
<i>ketoconazole</i>		
<ul style="list-style-type: none"> tabs: 200 mg 		PA
<i>miconazole</i>		
<ul style="list-style-type: none"> vaginal cream: 2 % vaginal supp: 100 mg kit: 200 mg vaginal supp with 2 % vaginal cream 	(Miconazole 7) (Miconazole 7) (Miconazole 3)	
<i>nystatin</i>		
<ul style="list-style-type: none"> topical cream: 100,000 unit per g 		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ topical oint: 100,000 unit per g ▪ topical powder: 100,000 units/gram 		QL 60 Gm/30 days
<ul style="list-style-type: none"> ▪ oral susp: 100,000 unit/mL ▪ oral tabs: 500,000 unit 		PA
<i>terbinafine</i>		
<ul style="list-style-type: none"> ▪ cream: 1% 		
<i>voriconazole</i>		
<ul style="list-style-type: none"> ▪ oral susp: 40 mg/ml 		PA
<ul style="list-style-type: none"> ▪ oral tabs: 50 mg and 200 mg 		PA
Antihistamines (see Antinausea agents for antihistamines commonly used for nausea)		
<i>cetirizine</i>		
<ul style="list-style-type: none"> ▪ tabs: 5 mg, 10 mg ▪ soln: 5mg/5mL 	(Zyrtec)	
<i>cyproheptadine HCl</i>		
<ul style="list-style-type: none"> ▪ oral soln: 2 mg/5 mL ▪ tabs: 4 mg 		
<i>diphenhydramine</i>		
<ul style="list-style-type: none"> ▪ caps: 25 mg, 50 mg ▪ solution: 12.5 mg/5 ml 	(Benadryl)	
<ul style="list-style-type: none"> ▪ tabs: 25 mg 	(Benadryl)	
<i>doxylamine</i>		
<ul style="list-style-type: none"> ▪ tabs: 25 mg 		
<i>hydroxyzine HCl</i>		
<ul style="list-style-type: none"> ▪ oral soln 10 mg/5 mL ▪ tabs: 10 mg, 25 mg, 50 mg 	(Atarax)	
<i>hydroxyzine pamoate</i>		
<ul style="list-style-type: none"> ▪ caps: 25 mg, 50 mg, 100 mg 	(Vistaril)	
<i>loratidine</i>		
<ul style="list-style-type: none"> ▪ 10 mg tablets 		
Anti-infectives (skin and mucous membranes)		
<i>clindamycin</i>		
<ul style="list-style-type: none"> ▪ vaginal cream: 2 % ▪ vaginal supp: 100 mg 	(Cleocin)	
<i>metronidazole</i>		
<ul style="list-style-type: none"> ▪ vaginal gel: 0.75 % 	(MetroGel-Vaginal)	
Antimigraine Agents		
<i>erenumab-aooe</i>		
<ul style="list-style-type: none"> ▪ autoinjector solution: 70 mg/ml 	(Aimovig)	PA
<i>rizatriptan</i>		
<ul style="list-style-type: none"> ▪ dispersible tabs: 5 mg, 10 mg ▪ tabs: 5 mg, 10 mg 	(Maxalt-MLT)	QL of 9 in 25 days
	(Maxalt)	QL of 9 in 25 days
<i>sumatriptan</i>		
<ul style="list-style-type: none"> ▪ tabs: 25 mg, 50 mg 100 mg 	(Imitrex)	QL of 9 in 25 days

Drug Name	Common Brand Name	Restrictions
▪ nasal spray: 5 mg, 20 mg	(Imitrex)	QL of 6 in 25 days
▪ cartridge for subq inj: 4 mg/0.5 mL, 6 mg/0.5 mL		QL of 6 in 25 days
▪ syringe for subq inj: 4 mg/0.5 mL		QL of 6 in 25 days
▪ vial for subq inj: 6 mg/0.5 mL		QL of 6 in 25 days
<i>zolmitriptan</i>		
▪ dispersible tabs: 2.5 mg, 5 mg	(Zomig ZMT)	QL of 6 in 25 days
▪ tabs: 2.5 mg, 5 mg	(Zomig)	QL of 6 in 25 days
Antimycobacterials		
<i>dapsone</i>		
▪ tabs: 25 mg, 100 mg		
<i>ethambutol</i>		
▪ tabs: 100 mg, 400 mg	(Myambutol)	
<i>isoniazid</i>		
▪ oral soln: 50 mg/5 mL		
▪ tabs: 100 mg, 300 mg		
<i>pyrazinamide</i>		
▪ tabs: 500 mg		
<i>rifabutin</i>		
▪ caps: 150 mg	(Mycobutin)	
<i>rifampin</i>		
▪ caps: 300 mg	(Rifadin)	
<i>rifapentine</i>		
▪ tabs: 150 mg	(Priftin)	PA
Antinausea Agents (AKA Antiemetics)		
<i>dimenhydrinate</i>		
▪ tabs: 50 mg tabs		
<i>fructose-dextrose-phosphoric acid</i>		
▪ oral soln: 1.87 g-1.87 g-21.5 mg per 5 mL	(Emetrol)	
<i>granisetron</i>		
▪ oral soln: 1 mg/5 mL	(Granisol)	
▪ tabs: 1 mg		
<i>meclizine</i>		
▪ tabs: 12.5 mg, 25 mg	(Antivert)	
<i>ondansetron</i>		
▪ oral soln: 4 mg/5 mL	(Zofran)	PA
▪ ODT tabs: 4 mg, 8 mg	(Zofran ODT)	PA: 6 yo and under Age 6-12=6 tab/90 days Age 13+=15 tab/90 days
▪ tabs: 4 mg, 8 mg	(Zofran)	PA: 6 yo and under Age 6-12=6 tab/90 days

Drug Name	Common Brand Name	Restrictions
		Age 13+=15 tab/90 days
<i>prochlorperazine</i>		
▪ rectal supp: 25 mg	(Compro)	
▪ tabs: 10 mg	(Compazine)	
<i>promethazine</i>		
▪ rectal supp: 12.5 mg, 25 mg, 50 mg	(Phenadoz, Phenergan)	
▪ oral syrup: 6.25 mg/5 mL		
▪ tabs: 12.5 mg, 25 mg, 50 mg	(Phenergan)	
▪ vial for inj: 25 mg/mL, 50 mg/mL		
<i>trimethobenzamide</i>		
▪ caps: 300 mg	(Tigan)	
Antiparasite Agents		
<i>atovaquone</i>		
▪ oral susp: 750 mg/5 mL	(Mepron)	
<i>atovaquone-proguanil</i>		
▪ tabs: 62.5-25 mg, 250-100 mg	(Malarone)	
<i>chloroquine</i>		
▪ tabs: 250 mg, 500 mg	(Aralen)	
<i>hydroxychloroquine</i>		
▪ tabs: 200 mg	(Plaquenil)	
<i>ivermectin</i>		
▪ tabs: 3 mg	(Stromectol)	
<i>metronidazole</i>		
▪ tabs: 250 mg tab, 500 mg	(Flagyl)	
<i>pyrantel pamoate</i>		
▪ suspension 50 mg/ml	(Pin-X)	
<i>quinine sulfate</i>		
▪ caps: 324 mg	(Qualaquin)	
Antiparkinsonian Agents		
<i>amantadine</i>		
▪ oral soln: 50 mg/5 mL		
▪ caps: 100 mg		
▪ tabs: 100 mg		
<i>benztropine</i>		
▪ tabs: 0.5 mg, 1 mg, 2 mg	(Cogentin)	
<i>bromocriptine</i>		
▪ caps: 5 mg	(Parlodel)	
▪ tabs: 2.5 mg		
<i>carbidopa-levodopa</i>		
▪ tabs: 10-100 mg, 25 mg-100 mg, 25-250 mg	(Sinemet)	
▪ ER tabs: 25-100 mg, 50-200 mg	(Sinemet CR)	
<i>carbidopa-levodopa-entacapone</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tabs: 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg 	(Stalevo)	PA
<i>entacapone</i>		
<ul style="list-style-type: none"> tabs: 200 mg 		PA
<i>Pramipexole</i>		
<ul style="list-style-type: none"> tabs: 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg tabs 	(Mirapex)	
<i>ropinirole</i>		
<ul style="list-style-type: none"> tabs: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg 	(Requip)	QL of 60 tabs/30 days for 0.25 mg, 0.5 mg, 1 mg and 2 mg
<ul style="list-style-type: none"> ER 24 hr tabs: 2 mg, 4 mg, 6 mg, 8 mg, 12 mg 	(Requip XL)	PA
<i>selegiline</i>		
<ul style="list-style-type: none"> caps: 5 mg 	(Eldepryl)	PA
<ul style="list-style-type: none"> tabs: 5 mg 		PA
<i>trihexyphenidyl</i>		
<ul style="list-style-type: none"> oral elixir: 2 mg/5 mL tabs: 2 mg, 5 mg 		
Antivirals		
Antiretrovirals		
<i>abacavir</i>		
<ul style="list-style-type: none"> oral soln: 20 mg/mL oral soln 	(Ziagen)	
<ul style="list-style-type: none"> tabs: 300 mg 	(Ziagen)	
<i>abacavir-lamivudine</i>		
<ul style="list-style-type: none"> tabs: 600-300 mg 	(Epzicom)	
<i>abacavir-lamivudine-zidovudine</i>		
<ul style="list-style-type: none"> tabs: 300-150-300 mg tabs 	(Trizivir)	
<i>atazanavir</i>		
<ul style="list-style-type: none"> caps: 100 mg, 150 mg, 200 mg, 300 mg 	(Reyataz)	
<i>atazanavir/cobicistat</i>		
<ul style="list-style-type: none"> tabs: 300-150 mg 	(Evotaz)	
<i>bictegravir/emtricitabine/tenofovir</i>		
<ul style="list-style-type: none"> tabs: 50-200-25 mg 	(Biktarvy)	PA
<i>darunavir ethanolate</i>		
<ul style="list-style-type: none"> tabs: 75 mg, 150 mg, 400 mg, 600 mg, 800 mg 	(Prezista)	
<i>darunavir/cobicistat</i>		
<ul style="list-style-type: none"> tabs: 800-150 mg 	(Prezcobix)	
<i>delavirdine mesylate</i>		
<ul style="list-style-type: none"> dispersible tabs: 100 mg 	(Rescriptor)	
<ul style="list-style-type: none"> tabs: 200 mg 	(Rescriptor)	
<i>didanosine</i>		
<ul style="list-style-type: none"> oral soln: 10 mg/mL 	(Videx)	
<ul style="list-style-type: none"> DR caps: 125 mg, 200 mg, 250 mg, 400 mg 	(Videx EC)	

Drug Name	Common Brand Name	Restrictions
<i>dolutegravir</i>		
▪ tabs: 10 mg, 25 mg, 50 mg	(Tivicay)	
<i>efavirenz</i>		
▪ caps: 50 mg, 100 mg, 200 mg, 600 mg	(Sustiva)	
<i>efavirenz-emtricitabine-tenofovir disoprxil fumarate</i>		
▪ tabs: 600-200-300 mg	(Atripla)	
<i>elvitegravir</i>		
▪ tabs: 85 mg, 150 mg	(Vitekta)	
<i>elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide</i>		
▪ tabs: 150-150-200-10 mg	(Genvoya)	
<i>elvitegravir-cobicistat-emtricitabine-tenofovir disoproxil fumarate</i>		
▪ tabs: 150-150-200-300 mg	(Stribild)	
<i>emtricitabine</i>		
▪ oral soln: 10 mg/mL	(Emtriva)	
▪ caps: 200 mg	(Emtriva)	
<i>emtricitabine-tenofovir</i>		
▪ tabs: 200-300 mg tabs	(Truvada)	
<i>enfuvirtide</i>		
▪ vial for subq inj: 90 mg	(Fuzeon)	SPEC
<i>entravirine</i>		
▪ tabs: 100 mg	(Intelence)	
<i>fosamprenavir</i>		
▪ oral susp: 50 mg/mL	(Lexiva)	
▪ tabs: 700 mg	(Lexiva)	
<i>indinavir</i>		
▪ caps: 100 mg, 200 mg 400 mg	(Crixivan)	
<i>lamivudine</i>		
▪ oral soln: 10 mg/mL	(Epivir)	PA
▪ oral soln: 25 mg/5 mL	(Epivir HBV)	
▪ tabs :100 mg, 150 mg, 300 mg	(Epivir HBV, Epivir)	
<i>lamivudine-zidovudine</i>		
▪ tabs: 150-300 mg	(Combivir)	
<i>lopinavir-ritonavir</i>		
▪ oral soln: 400-100 mg/5 mL	(Kaletra)	
▪ tabs: 100-25 mg, 200-50 mg	(Kaletra)	
<i>maraviroc</i>		
▪ tabs: 150 mg, 300 mg	(Selzentry)	
<i>nelfinavir mesylate</i>		
▪ tabs: 250 mg	(Viracept)	
<i>nevirapine</i>		
▪ oral susp: 50 mg/5 mL	(Viramune)	
▪ tabs: 200 mg	(Viramune)	
<i>raltegravir</i>		
▪ chew tabs: 25 mg, 100 mg	(Isentress)	
▪ tabs: 400 mg	(Isentress)	

Drug Name	Common Brand Name	Restrictions
<i>rilpivirine</i>		
▪ tabs: 25 mg	(Edurant)	
<i>rilpivirine-emtricitabine-tenofovir alafenamide</i>		
▪ tabs: 200-25-25 mg	(Odefsey)	
<i>rilpivirine-emtricitabine-tenofovir disoproxil fumarate</i>		
▪ tabs: 200-25-300 mg	(Complera)	
<i>ritonavir</i>		
▪ oral soln: 80 mg/mL	(Norvir)	
▪ caps: 100 mg	(Norvir)	
▪ tabs: 100 mg	(Norvir)	
<i>saquinavir mesylate</i>		
▪ caps: 200 mg	(Invirase)	
<i>stavudine</i>		
▪ oral soln: 1 mg/mL	(Zerit)	
▪ caps: 15 mg, 20 mg, 30 mg, 40 mg	(Zerit)	
<i>tenofovir disoproxil fumarate</i>		
▪ tabs: 150 mg, 200 mg, 250 mg 300 mg	(Viread)	
<i>tenofovir disoproxil fumarate - emtricitabine</i>		
▪ tabs: 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	(Truvada)	
<i>tipranavir</i>		
▪ caps: 250 mg	(Aptivus)	
<i>zidovudine</i>		
▪ oral syrup: 10 mg/mL	(Retrovir)	
▪ caps: 100 mg	(Retrovir)	
▪ tabs: 300 mg	(Retrovir)	
<i>zidovudine-lamivudine</i>		
▪ tabs: 150-300 mg	(Combivir)	
Antivirals, Miscellaneous		
<i>acyclovir</i>		
▪ oral susp: 200 mg/5 mL	(Zovirax)	
▪ caps: 200 mg	(Zovirax)	
▪ tabs: 400 mg, 800 mg	(Zovirax)	
<i>oseltamivir</i>		
▪ oral susp: 6 mg/mL, 12 mg/mL	(Tamiflu)	QL of 275 mL in 180 days
▪ caps: 30 mg, 45 mg, 75 mg	(Tamiflu)	QL of 10 in 180 days
<i>peginterferon alfa-2A</i>		
▪ syringe for subq inj: 180 mcg/0.5 mL	(Pegasys)	SPEC, PA
<i>peginterferon alfa-2B</i>		
▪ kit for subq inj: 50 mcg/0.5 mL, 80 mcg/0.5 mL, 120 mcg/0.5 mL, 150 mcg/0.5 mL	(Pegintron)	SPEC, PA
▪ pen kit for subq inj: 50 mcg/0.5 mL, 80 mcg/0.5 mL, 120 mcg/0.5 mL, 150 mcg/0.5 mL	(Pegintron Redipen)	SPEC, PA
<i>ribavirin</i>		
▪ caps: 200 mg	(Ribasphere)	SPEC, PA
▪ tabs: 200 mg	(Ribasphere)	SPEC, PA

Drug Name	Common Brand Name	Restrictions
<i>valacyclovir</i>		
▪ tabs: 500 mg, 1000 mg	(Valtrex)	QL of 30 tabs in 90 days
HCV Antivirals		
<i>elbasvir-grazoprevir</i>		
▪ tabs: 50-100 mg	(Zepatier)	SPEC, PA
<i>glecaprevir/pibrentasvir</i>		
▪ tabs: 100 mg-40 mg	(Mavyret)	SPEC, PA
<i>sofosbuvir-velpatasvir</i>		
▪ tabs: 400-100 mg	(Epclusa)	SPEC, PA
<i>sofosbuvir-velpatasvir-voxilaprevir</i>		
▪ tabs: 400 mg-100 mg-100 mg	(Vosevi)	SPEC, PA
Blood Products		
Anticoagulants and Platelet-Aggregation Inhibitors		
<i>apixaban</i>		
▪ tabs: 2.5 mg, 5 mg	(Eliquis)	
<i>clopidogrel</i>		
▪ tabs: 75 mg, 300 mg	(Plavix)	
<i>dalteparin</i>		
▪ syringe for subq inj: 2500 units/0.2 mL, 5000 units/0.2 mL, 7500 units/0.3 mL, 12,500 units/0.5 mL, 15,000 units/0.6 mL, 18,000 units/0.72 mL	(Fragmin)	
<i>dipyridamole</i>		
▪ tabs: 25 mg, 50 mg, 75 mg	(Persantine)	
<i>enoxaparin</i>		
▪ syringe for subq inj: 30 mg/0.3 mL, 40 mg/0.4 mL, 60 mg/0.6 mL, 80 mg/0.8 mL, 100 mg/mL, 120 mg/0.8 mL, 150 mg/mL	(Lovenox)	
<i>fondaparinux</i>		
▪ syringe for subq inj: 2.5 mg/0.5 mL, 5 mg/0.4 mL, 7.5 mg/0.6 mL, 10 mg/0.8 mL	(Arixtra)	
<i>heparin</i>		
▪ syringe for IV inj: 10 units/mL		
▪ vial for IV inj: 5000 units/mL, 10,000 units/mL, 20,000 units/mL		
<i>heparin, preservative free</i>		
▪ syringe for IV inj: 1 unit/mL, 10 units/mL 100 units/mL, 5000 units/0.5 mL		
▪ vial for IV inj: 10 units/mL, 1000 units/mL, 10,000 units/5 mL, 25,000 units/10 mL		
<i>heparin-0.9 % NaCl</i>		
▪ syringe kit for IV inj: 100 units/mL		
<i>rivaroxaban</i>		
▪ tabs: 10 mg, 15mg, 20 mg	(Xarelto)	
<i>ticagrelor</i>		
▪ tabs: 60 mg, 90 mg	(Brilinta)	PA

Drug Name	Common Brand Name	Restrictions
<i>warfarin</i>		
<ul style="list-style-type: none"> ▪ tabs: 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg 	(Coumadin)	
Blood Formation Modifiers		
<i>epoetin alfa</i>		
<ul style="list-style-type: none"> ▪ vial for IV inj: 2000 units/mL, 3000 units/mL, 4000 units/mL, 10,000 units/mL, 20,000 units/mL 	(Epogen)	SPEC, PA, QL of 3 mL in 25 days
<ul style="list-style-type: none"> ▪ vial for IV inj: 2000 units/mL, 3000 units/mL, 4000 units/mL, 10,000 units/mL, 20,000 units/mL, 40,000 units/mL 	(Procrit)	SPEC, PA
<i>filgrastim</i>		
<ul style="list-style-type: none"> ▪ syringe for IV inj: 300 mcg/0.5 mL, 480 mcg/0.8 mL 	(Neupogen)	SPEC, PA
<ul style="list-style-type: none"> ▪ vial for IV inj: 300 mcg/mL 	(Neupogen)	SPEC, PA
<i>sargramostim</i>		
<ul style="list-style-type: none"> ▪ vial for IV inj: 250 mcg/mL, 500 mcg/mL 	(Leukine)	SPEC, PA
Cardiovascular Agents		
Alpha-Adrenergic Agents		
<i>clonidine</i>		
<ul style="list-style-type: none"> ▪ tabs: 0.1, 0.2 mg, 0.3 mg 	(Catapres)	
<ul style="list-style-type: none"> ▪ transdermal patch: 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr 	(Catapres-TTS)	
<i>doxazosin</i>		
<ul style="list-style-type: none"> ▪ tabs: 1 mg, 2 mg, 4 mg, 8 mg 	(Cardura)	
<i>guanfacine</i>		
<ul style="list-style-type: none"> ▪ tabs: 1 mg, 2 mg 	(Tenex)	
<i>methyldopa</i>		
<ul style="list-style-type: none"> ▪ tabs: 250 mg, 500 mg 		
<i>prazosin</i>		
<ul style="list-style-type: none"> ▪ tabs: 1 mg, 2 mg, 5 mg 	(Minipress)	
<i>terazosin</i>		
<ul style="list-style-type: none"> ▪ caps: 1 mg, 2 mg, 5 mg, 10 mg 	(Hytrin)	
Angiotensin II Receptor Antagonists (ARBs)		
<i>irbesartan</i>		
<ul style="list-style-type: none"> ▪ tabs: 75 mg, 150 mg, 300 mg 	(Avapro)	
<i>losartan</i>		
<ul style="list-style-type: none"> ▪ tabs: 25 mg, 50 mg, 100 mg 	(Cozaar)	
<i>losartan-hydrochlorothiazide</i>		
<ul style="list-style-type: none"> ▪ tabs: 50-12.5 mg, 100-12.5 mg, 100-25 mg 	(Hyzaar)	
<i>olmesartan</i>		
<ul style="list-style-type: none"> ▪ 5 mg, 20 mg, 40 mg 	(Benicar)	
<i>telmisartan</i>		
<ul style="list-style-type: none"> ▪ 20 mg, 40 mg, 80 mg 	(Micardis)	

Drug Name	Common Brand Name	Restrictions
Angiotensin-Converting Enzyme Inhibitors (ACE Inhibitors)		
<i>benazepril</i>		
▪ tabs: 5 mg, 10 mg, 20 mg, 40 mg	(Lotensin)	
<i>enalapril</i>		
▪ tabs: 2.5 mg, 5 mg, 10 mg, 20 mg	(Vasotec)	
<i>fosinopril</i>		
▪ tabs: 10 mg, 20 mg, 40 mg	(Monopril)	
<i>lisinopril</i>		
▪ tabs: 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	(Zestril)	
<i>lisinopril-hydrochlorothiazide</i>		
▪ tabs: 10-12.5 mg, 20-12.5 mg, 20-25 mg	(Zestoretic)	
<i>quinapril</i>		
▪ tabs: 5 mg, 10 mg, 20 mg, 40 mg	(Accupril)	
<i>ramipril</i>		
▪ caps: 1.25 mg, 2.5 mg, 5 mg, 10 mg	(Altrace)	
Antiarrhythmic Agents		
<i>amiodarone</i>		
▪ tabs: 100 mg, 200 mg, 400 mg	(Cordarone, Pacerone)	
<i>flecainide</i>		
▪ tabs: 50 mg, 100 mg, 150 mg	(Tambocor)	
<i>propafenone</i>		
▪ tabs: 150 mg, 225 mg, 300 mg	(Rythmol)	
Beta-Adrenergic Blocking Agents (Beta-Blockers)		
<i>atenolol</i>		
▪ tabs: 25 mg, 50 mg, 100 mg	(Tenormin)	
<i>carvedilol</i>		
▪ tabs: 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	(Coreg)	
<i>labetolol</i>		
▪ tabs: 100 mg, 200 mg, 300 mg		
<i>metoprolol succinate</i>		
▪ 24 hr tabs: 25 mg, 50 mg, 100 mg, 200 mg	(Toprol XL)	
<i>metoprolol tartrate</i>		
▪ tabs: 25 mg, 50 mg, 100 mg	(Toprol)	
<i>pindolol</i>		
▪ tabs: 5 mg, 10 mg		
<i>propranolol</i>		
▪ oral soln: 20 mg/5 mL, 40 mg/5 mL		
▪ tabs: 10 mg, 20 mg, 40 mg, 80 mg		
▪ SA 24 hr caps: 60 mg, 80 mg	(Inderal LA)	
<i>sotalol</i>		
▪ tabs: 80 mg, 120 mg, 160 mg, 240 mg	(Betapace, Betapace AF)	
Calcium-Channel Blocking Agents (CCBs)		
<i>amlodipine</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ tabs: 2.5 mg, 5 mg, 10 mg 	(Norvasc)	
<i>diltiazem</i>		
<ul style="list-style-type: none"> ▪ ER 12 hr caps: 60 mg, 90 mg, 120 mg 		
<ul style="list-style-type: none"> ▪ ER 24 hr caps: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg 	(Cardizem CD, Cartia XT)	
<ul style="list-style-type: none"> ▪ ER 24 hr caps: 120 mg, 180 mg, 240 mg 	(Diltia XT, Dilacor XR)	
<ul style="list-style-type: none"> ▪ ER 24 hr caps: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg 	(Tiazac)	
<ul style="list-style-type: none"> ▪ tabs: 30 mg, 60 mg, 90 mg, 120 mg 	(Cardizem)	
<ul style="list-style-type: none"> ▪ ER 24 hr tabs: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg 	(Cardizem LA)	
<i>felodipine</i>		
<ul style="list-style-type: none"> ▪ ER 24 hr tabs: 2.5 mg, 5 mg, 10 mg 		
<i>nifedipine</i>		
<ul style="list-style-type: none"> ▪ ER tabs: 30 mg, 60 mg, 90 mg 	(Adalat CC)	
<ul style="list-style-type: none"> ▪ ER 24 hr tabs: 30 mg, 60 mg, 90 mg 	(Procardia XL)	
<i>verapamil</i>		
<ul style="list-style-type: none"> ▪ tabs: 40 mg, 80 mg, 120 mg 	(Calan)	
<ul style="list-style-type: none"> ▪ ER tabs: 120 mg, 180 mg, 240 mg 	(Calan SR)	
Sel. C-GMP Phosphodiesterase T5 Inhibitor		
<i>sildenafil</i>		
<ul style="list-style-type: none"> ▪ tabs: 20 mg 	(Revatio)	
Endothelin Receptor Antagonist		
<i>macitentan</i>		
<ul style="list-style-type: none"> ▪ tabs: 10 mg 	(Opsumit)	
Cardiovascular Agents, Miscellaneous		
<i>digoxin</i>		
<ul style="list-style-type: none"> ▪ oral soln: 50 mcg/mL 		
<ul style="list-style-type: none"> ▪ tabs: 125 mcg, 250 mcg 	(Lanoxin)	
<i>epoprostenol</i>		
<ul style="list-style-type: none"> ▪ IV solution: 0.5 mg, 1.5 mg 		
<i>epinephrine</i>		
<ul style="list-style-type: none"> ▪ IM auto-injector: 0.15 mg/0.15 mL 	(Adrenaclick)	
<ul style="list-style-type: none"> ▪ IM auto-injector: 0.15 mg/0.3 mL 	(Epipen Jr)	
<ul style="list-style-type: none"> ▪ IM auto-injector: 0.3 mg/0.3 mL 	(Adrenaclick, Epipen)	
<i>hydralazine</i>		
<ul style="list-style-type: none"> ▪ tabs: 10 mg, 25 mg, 50 mg, 100 mg 		
Diuretics		

Drug Name	Common Brand Name	Restrictions
<i>amiloride</i>		
▪ tabs: 5 mg	(Midamor)	
<i>chlorthalidone</i>		
▪ tabs: 25 mg, 50 mg		
<i>furosemide</i>		
▪ oral soln: 10 mg/mL, 40 mg/5 mL		
▪ tabs: 20 mg, 40 mg, 80 mg	(Lasix)	
<i>hydrochlorothiazide</i>		
▪ caps: 12.5 mg	(Microzide)	
▪ tabs: 25 mg, 50 mg		
<i>indapamide</i>		
▪ tabs: 1.25 mg, 2.5 mg		
<i>metolazone</i>		
▪ tabs: 2.5 mg, 5 mg, 10 mg	(Zaroxolyn)	
<i>spironolactone</i>		
▪ tabs: 25 mg, 50 mg, 100 mg	(Aldactone)	
<i>toremide</i>		
▪ tabs: 10 mg, 20 mg		
<i>triamterene-hydrochlorothiazide</i>		
▪ caps: 37.5-25 mg	(Dyazide)	
▪ tabs: 37.5-25 mg, 75 mg-50 mg	(Maxide)	
Dyslipidemia Agents		
<i>alirocumab</i>		
▪ Pen-injector/prefilled syringe: 75mg/mL, 150mg/mL	(Praluent)	PA, QL: 2 in 25 days
<i>atorvastatin</i>		
▪ tabs: 10 mg, 20 mg, 40 mg, 80 mg	(Lipitor)	
<i>cholestyramine</i>		
▪ powder cans: 4 gm/dose	(Questran)	
<i>colestipol</i>		
▪ tabs: 1 gm	(Colestid)	PA
<i>evolocumab</i>		
▪ Auto-injector/prefilled syringe: 140mg/mL	(Repatha)	PA
<i>ezetimibe</i>		
▪ tabs: 10mg	(Zetia)	ST – must have claim for Atorvastatin or Rosuvastatin for 72 days in 90 day period.
<i>fenofibrate</i>		
▪ caps: 67 mg, 134 mg, 200 mg	(Lofibra)	
▪ tabs: 54 mg, 160 mg	(Lofibra)	
<i>gemfibrozil</i>		
▪ tabs: 600 mg	(Lopid)	
<i>niacin</i>		
▪ tabs: 50 mg, 100 mg, 250 mg, 500 mg		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ER tabs: 250 mg ER 24 hr tabs: 500 mg, 1000 mg 	(Niaspan)	
<i>pravastatin</i>		
<ul style="list-style-type: none"> tabs: 10 mg, 20 mg, 40 mg, 80 mg 	(Pravachol)	
<i>rosuvastatin</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 20 mg 40 mg 	(Crestor)	
<i>simvastatin</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 20 mg 40 mg 	(Zocor)	
Vasodialators		
<i>isosorbide dinitrate</i>		
<ul style="list-style-type: none"> subl tabs: 2.5 mg, 5 mg tabs: 5 mg, 10 mg, 20 mg, 30 mg ER tabs: 40 mg 	(Isordil) (IsoDitrate ER)	
<i>isosorbide mononitrate</i>		
<ul style="list-style-type: none"> tabs: 10 mg, 20 mg ER 24 hr tabs: 30 mg, 60 mg, 120 mg 	(Imdur)	
<i>nitroglycerin</i>		
<ul style="list-style-type: none"> subl tabs: 0.3 mg, 0.4 mg, 0.6 mg transdermal patches: 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr transdermal patches: 0.3 mg/hr, 0.8 mg/hr 	(NitroStat) (Nitro-Dur) Nitro-Dur	
Central Nervous System Agents		
<i>amphetamine salt mix</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg 	(Adderall)	QL of 90 tabs per 30 days. PA for ages 5 and under and ages 19 and older.
<ul style="list-style-type: none"> ER caps: 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg 	(Adderall XR)	PA for ages 5 and under and ages 19 and older. QL of 30 caps per 30 days.
<i>dextroamphetamine</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg 		PA for ages 5 and under and ages 10 and older
<i>methylphenidate</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 20 mg 	(Ritalin)	QL of 90 tabs per 30 days. PA for ages 5 and under and ages 19 and older.
<ul style="list-style-type: none"> ER tabs: 18 mg, 27 mg, 36 mg, 54 mg 	(Concerta)	QL of 30 tabs per 30 days. PA for ages 5 and under and ages 19 and older.
<ul style="list-style-type: none"> ER tabs: 10 mg, 20 mg 	(Ritalin SR)	PA for ages 5 and under and ages 19 and older. QL of 30 tabs per 30 days
<ul style="list-style-type: none"> ER caps: 20 mg, 30 mg, 40 mg, 60 mg 	(Ritalin LA)	PA for ages 5 and under and ages 19 and older. QL of 30 caps per 30 days.

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ER caps: 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg 	(Metadate CD)	PA for ages 5 and under and ages 19 and older. QL of 30 caps per 30 days.
Contraceptives, Devices		
<i>cervical cap</i>		
<ul style="list-style-type: none"> 22 mm, 30 mm 	(FemCap)	
<i>condoms, female</i>	(FC Female Condom, FC2 Female Condom)	
<i>condoms, male, latex, lubricated</i>	(Examples: Aimsco, Durex Avanti, Fantasy)	
<i>condoms, male, latex, non-lubricated</i>	(Kimono, Trustex)	
<i>diaphragms, arc-spring</i>		
<ul style="list-style-type: none"> 65 mm, 70 mm, 75 mm, 80 mm 	(Ortho All-Flex)	
<i>diaphragms, wide seal</i>		
<ul style="list-style-type: none"> 60 mm 	(Wide Seal Diaphragm)	
<i>nonoxynol 9</i>		
<ul style="list-style-type: none"> foam: 12.5 % film: 28 % 	(VCF) (VCF)	
Contraceptives, Oral		
Daily Contraceptives		
<i>ethinyl estradiol-desogestrel</i>		
<ul style="list-style-type: none"> tabs: 0.03-0.15 mg tabs [21] and inactive tabs [7] 	(Examples: Apri, Emoquette (Ortho-Sept))	
<ul style="list-style-type: none"> tabs: 0.025-0.15 mg tabs [7], 0.025-0.125 mg tabs [7], 0.025-0.15 mg tabs [7] and inactive tabs [7] 	(Examples: Velivet, (Cyclesse))	
<i>ethinyl estradiol-desogestrel and ethinyl estradiol</i>		
<ul style="list-style-type: none"> tabs: 0.02-0.15 mg tabs [21], inactive tabs [2] and 0.01 mg tabs [5] 	(Examples: Azurette, Kariva, (Mircette))	
<i>ethinyl estradiol-drospirenone</i>		
<ul style="list-style-type: none"> tabs: 0.02-3 mg tabs [24], inactive tabs [4] 	(Examples: Gianvi, (Yaz))	
<ul style="list-style-type: none"> tabs: 0.03-3 mg tabs [21], inactive tabs [7] 	(Examples: Ocella, Zarah (Yasmin))	
<i>ethinyl estradiol-ethynodiol diacetate</i>		
<ul style="list-style-type: none"> tabs: 0.035-1 mg tabs [21], inactive tabs [7] 	(Examples: Kelnor 1-35)	
<ul style="list-style-type: none"> tabs: 0.05-1 mg tabs [21], inactive tabs [7] 	(Examples: Zovia 1-50)	
<i>ethinyl estradiol-etonogestrel</i>		
<ul style="list-style-type: none"> vaginal ring: 0.015-0.12 mg/day 	(NuvaRing)	
<i>ethinyl estradiol-levonorgestrel</i>		
<ul style="list-style-type: none"> tabs: 0.02-0.09 mg tabs [28] 	(Examples: Amenthyst)	
<ul style="list-style-type: none"> tabs: 0.02-0.1 mg tabs [21], inactive tabs [7] 	(Examples: Aviane, Lutera, Orsythia,)	

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tabs: 0.03-0.15 mg tabs [21], inactive tabs [7] 	(Examples: Marliissa, Portia (Nordette-28))	
<ul style="list-style-type: none"> tabs: 0.03-0.15 mg tabs [84], inactive tabs [7] 	(Examples: Jolessa, (Seasonale))	
<ul style="list-style-type: none"> tabs: 0.03-0.05 mg tabs [6], 0.04-0.075 mg tabs [5], 0.03-0.125 mg tabs [10], inactive tabs [7] 	(Examples: Levonest, Trivora-28)	
<i>ethinyl estradiol-levonorgestrel and ethinyl estradiol</i>		
<ul style="list-style-type: none"> tabs: 0.02-.01 mg tabs [84] and 0.01 mg tabs [7] 	(Examples: Amethia Lo (LoSeasonique))	
<ul style="list-style-type: none"> tabs: 0.03-.015 mg tabs [84] and 0.01 mg tabs [7] 	(Examples: Amethia, (Seasonique))	
<ul style="list-style-type: none"> tabs: 0.02-0.15 mg tabs [42], 0.025-0.15 mg tabs [21], 0.03-0.15 mg tabs [21], and 0.01 mg tabs [7] 	(Examples: Quartette)	
<i>ethinyl estradiol-norelgestromin</i>		
<ul style="list-style-type: none"> transdermal patches: 0.53-4.86 mg/day [releases 0.035-.15 mg/day] 	(Examples: Xulane, (Ortho Evra))	
<i>ethinyl estradiol-norethindrone</i>		
<ul style="list-style-type: none"> tabs: 0.02-1 mg tabs [21] 	(Examples: Gildess, Junel, (Loestrin))	
<ul style="list-style-type: none"> tabs: 0.03-1.5 mg tabs [21] 	(Examples: Microgestin, (Loestrin))	
<ul style="list-style-type: none"> tabs: 0.035-0.4 mg tabs [21], inactive tabs [7] 	(Examples: Balziva, Philith, (Ovcon-35))	
<ul style="list-style-type: none"> tabs: 0.035-0.5 mg tabs [21], inactive tabs [7] 	Examples: Necon, Nortrel, (Modicon)	
<ul style="list-style-type: none"> tabs: 0.035-1 mg tabs [21], inactive tabs [7] 	Examples: Cyclofem (Ortho-Novum)	
<ul style="list-style-type: none"> tabs: 0.05-1 mg tabs [21], inactive tabs [7] 	Examples: Ovcon-50	
<ul style="list-style-type: none"> tabs: 0.035-0.5 mg tabs [10], 0.035-1 mg tabs [11], inactive tabs [7] 	Examples: Necon	
<ul style="list-style-type: none"> tabs: 0.035-0.5 mg tabs [7], 0.035-0.75 mg tabs [7], 0.035-1 mg tabs [7], inactive tabs [7] 	Examples: Nortrel 7/7/7, Ortho-Novum 7/7/7	
<ul style="list-style-type: none"> tabs: 0.035-0.5 mg tabs [7], 0.035-1 mg tabs [9], 0.035-0.5 mg tabs [5], inactive tabs [7] 	Examples: Aranelle, Leena, (Tri-Norinyl)	
<i>ethinyl estradiol-norethindrone and iron</i>		
<ul style="list-style-type: none"> chew tabs: 0.035-0.4 mg tabs [21] and ferrous fumarate 75 mg tabs [7] 	Examples: Wymzya Fe, Zeosa	
<ul style="list-style-type: none"> tabs: 0.02-1 mg tabs [21] and ferrous fumarate 75 mg tabs [7] 	Examples: Gildess Fe, Junel Fe, Microgestin Fe	
<ul style="list-style-type: none"> tabs: 0.03-1.5 mg tabs [21] and ferrous fumarate 75 mg tabs [7] 	Examples: Gildess Fe, Junel Fe	
<ul style="list-style-type: none"> tabs: 0.02-1 mg tabs [24] and ferrous fumarate 75 mg tabs [4] 	Examples: Gildess 24 Fe, (Loestrin 24 Fe)	

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tabs: 0.02-1 mg tabs [5], 0.03-1 mg tabs [7], 0.035-1 mg tabs [9], and and ferrous fumarate 75 mg tabs [7] 	Examples: Tilia Fe, (Erostep Fe)	
<i>ethinyl estradiol-norethindrone, ethinyl estradiol, and iron</i>		
<ul style="list-style-type: none"> tabs: 0.01-1 mg tabs [24], 0.01 mg tabs [2], and ferrous fumarate 75 mg tabs [2] 	Examples: Lo Loestrin Fe, Lo Minastrin Fe	
<i>ethinyl estradiol-norgestimate</i>		
<ul style="list-style-type: none"> tabs: 0.035-0.25 mg tabs [21], inactive tabs [7] 	Examples: Ortho-Cyclen, Previfem, Sprintec	
<ul style="list-style-type: none"> tabs: 0.025-0.18 mg tabs [7], 0.025-0.215 mg tabs [7], 0.025-0.25 mg tabs [7], inactive tabs [7] 	Examples: Ortho Tri-Cyclen Lo	
<ul style="list-style-type: none"> tabs: 0.035-0.18 mg tabs [7], 0.035-0.215 mg tabs [7], 0.035-0.25 mg tabs [7], inactive tabs [7] 	Examples: Tri-Previfem, (Ortho Tri-Cyclen)	
<i>ethinyl estradiol-norgestrel</i>		
<ul style="list-style-type: none"> tabs: 0.03-0.3 mg tabs [21], inactive tabs [7] 	Examples: Cryselle, (Lo-Ovral-28)	
<ul style="list-style-type: none"> tabs: 0.05-0.5 mg tabs [21], inactive tabs [7] 	Examples: Ogestrel	
<i>mestranol-norethindrone</i>		
<ul style="list-style-type: none"> tabs: 0.05-1 mg tabs [21], inactive tabs [7] 	Examples: Necon 1/50	
<i>norethindrone</i>		
<ul style="list-style-type: none"> tabs: 0.35 mg tabs [28] 	Examples: Camila, Heather, Ortho Micronor,	
Emergency Contraceptives		
<i>levonorgestrel</i>		
<ul style="list-style-type: none"> tabs: 0.75 mg 	Examples: Next Choice, Plan B	
<ul style="list-style-type: none"> tabs: 1.5 mg 	Examples: Next Choice One Dose	
<i>ulipristal acetate</i>		
<ul style="list-style-type: none"> tabs: 30 mg 	Examples: Ella	
Cough and Cold Products		
<i>guaifenesin</i>		
<ul style="list-style-type: none"> oral liquid – 100 mg/5 ml 		QL of 240 ml in 180 days, PA under 13 yo
<ul style="list-style-type: none"> tabs: 400 mg 		QL of 30 tabs in 90 days, PA under 13 yo
<ul style="list-style-type: none"> ER tabs: 600 mg 		QL of 30 tabs in 90 days, PA under 13yo
<i>guaifenesin-dextromethorphan</i>		
<ul style="list-style-type: none"> oral liquid – 100-10 mg/5 ml 		QL of 240 ml in 180 days, PA under 13 yo

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ tabs: 400 mg-20 mg 		QL of 30 tabs in 90 days, PA under 13 yo
<i>pseudoephedrine</i>		
<ul style="list-style-type: none"> ▪ tabs: 30 mg, 60mg 	(Sudafed)	QL of 30 tabs in 90 days, PA required for patients under 18 years old.
Dental and Oral Agents		
<i>chlorhexidine gluconate</i>		
<ul style="list-style-type: none"> ▪ mouthwash: 0.12 % 	(Peridex)	
<i>triamcinolone acetonide</i>		
<ul style="list-style-type: none"> ▪ oral paste: 0.1 % 	(Oralone)	
Dermatological Agents		
Dermatological Agents, Other		
<i>acitretin</i>		
<ul style="list-style-type: none"> ▪ caps: 10mg, 17.5mg, 25mg 	(Soriatane)	PA
<i>acyclovir</i>		
<ul style="list-style-type: none"> ▪ oint: 5 % 	(Zovirax)	
<i>benzoyl peroxide</i>		
<ul style="list-style-type: none"> ▪ cream: 10% 		
<i>calcipotriene</i>		
<ul style="list-style-type: none"> ▪ cream: 0.005 % cream 	(Dovonex)	PA
<ul style="list-style-type: none"> ▪ oint: 0.005 % 	(Calcitrene)	PA
<ul style="list-style-type: none"> ▪ topical soln: 0.005 % 	(Dovonex)	PA
<i>dupilumab</i>		
<ul style="list-style-type: none"> ▪ syringe kit: 300 mg/ 2 ml 	(Dupixent)	PA
<i>fluorouracil</i>		
<ul style="list-style-type: none"> ▪ cream: 5 % 	(Efudex)	
<ul style="list-style-type: none"> ▪ topical soln: 2 % 		
<i>isotretinoin</i>		
<ul style="list-style-type: none"> ▪ 10 mg, 20 mg, 30 mg, 40 mg 	(Myorisan)	PA
<i>podofilox</i>		
<ul style="list-style-type: none"> ▪ gel: 0.5 % 	(Condylox)	
<ul style="list-style-type: none"> ▪ topical soln: 0.5 % 		
<i>povidone-iodine</i>		
<ul style="list-style-type: none"> ▪ topical soln: 10 % 	(Betadine)	
<i>secukinumab</i>		
<ul style="list-style-type: none"> ▪ pens/syringes: 150mg/mL 	(Cosentyx)	SPEC, PA
<i>vitamin A-vitamin D/white petrolatum-lanolin</i>		
<ul style="list-style-type: none"> ▪ ointment 	A + D ointment	
<i>zinc oxide</i>		
<ul style="list-style-type: none"> ▪ oint: 20 %, 40 % 		
Dermatological Antibacterials		
<i>bacitracin-polymyxin b</i>		
<ul style="list-style-type: none"> ▪ oint: 500-10,000 units per g 	(Polysporin)	

Drug Name	Common Brand Name	Restrictions
<i>clindamycin phosphate</i>		
▪ lotion: 1 %	(Cleocin T)	
▪ medicated swabs: 1 %	(Clindacin P)	
▪ topical soln: 1 %	(Cleocin T)	
<i>gentamycin sulfate</i>		
▪ cream: 0.1 %		
▪ oint: 0.1 %		
<i>metronidazole</i>		
▪ cream: 0.75 %, 1 %	Noritate, (Metrocream)	PA
▪ gel: 0.75 %, 1 %	(Metrogel)	PA
<i>mupirocin</i>		
▪ oint: 2 %	(Bactroban)	
<i>neomycin-bacitracin-polymyxin b</i>		
▪ oint: 3.5 mg-400 units-5,000 units per g	(Neosporin)	
<i>retapamulin</i>		
▪ oint: 1 %	Altabax	
<i>selenium sulfide</i>		
▪ lotion: 2.5 %	(Selseb)	
<i>silver sulfadiazine</i>		
▪ cream: 1 %	(SSD)	
Topical Corticosteroids, High Potency		
<i>betamethasone dipropionate</i>		
▪ cream: 0.05 %		PA
▪ lotion: 0.05 %		PA
▪ oint: 0.05 %		PA
<i>betamethasone dipropionate, augmented</i>		
▪ cream: 0.05 %	(Diprolene AF)	
▪ lotion: 0.05 %	(Diprolene)	PA
▪ oint: 0.05 %	(Diprolene)	
<i>betamethasone valerate</i>		
▪ cream: 0.1%		PA
▪ ointment: 0.1%		PA
<i>clobetasol propionate</i>		
▪ cream: 0.05 %	(Temovate)	
▪ foam: 0.05 %	(Olux)	PA
▪ gel: 0.05 %	(Temovate)	
▪ lotion: 0.05 %	(Clobex)	PA
▪ oint: 0.05 %	(Temovate)	
▪ shampoo: 0.05 %	(Clobex)	PA
▪ topical soln: 0.05 %	(Temovate)	
<i>fluocinonide</i>		
▪ cream: 0.05 %		PA
▪ gel: 0.05 %		PA
▪ oint: 0.05 %		PA
▪ topical soln: 0.05 %		PA

Drug Name	Common Brand Name	Restrictions
<i>triamcinolone acetonide</i>		
▪ cream: 0.5 %		
▪ oint: 0.5 %		
Topical Corticosteroids, Intermediate Potency		
<i>mometasone furoate</i>		
▪ cream: 0.1 %	(Elocon)	PA
▪ lotion: 0.1 %	(Elocon)	PA
▪ ointment: 0.1%		PA
<i>triamcinolone acetonide</i>		
▪ cream: 0.1 %		
▪ lotion: 0.1 %		PA
▪ oint: 0.025 %, 0.05 %, 0.1 %		
Topical Corticosteroids, Low Potency		
<i>hydrocortisone</i>		
▪ cream: 0.5 %, 1 %, 2.5 %		
▪ lotion: 0.5 %, 1 %, 2.5 %		
▪ oint: 0.5 %, 1 %, 2.5 %		
▪ topical soln: 1 %	(Scalpicin)	
<i>triamcinolone acetonide</i>		
▪ cream: 0.025 %		
▪ lotion: 0.025 %		
Topical Immunosuppressive Agents		
<i>tacrolimus</i>		
▪ 0.03 %, 0.1 % ointment	(Protopic)	PA
Topical Retinoids		
<i>adapalene</i>		
▪ gel: 0.1 %, 0.3 %	(Differin)	PA
<i>tazarotene</i>		
▪ cream: 0.05 %, 0.1 %	Tazorac	PA
▪ gel: 0.05 %, 0.1 %	Tazorac	PA
<i>tretinoin</i>		
▪ cream: 0.025 %, 0.5 %, 0.1 %	(Retin-A)	PA
▪ gel: 0.01 %, 0.025 %	(Retin-A)	PA
Topical Scabicides and Pediculicides		
<i>benzyl alcohol</i>		
▪ lotion: 5%	(Ulesfia)	PA
<i>cetaphil</i>		
▪ lotion		
<i>permethrin</i>		
▪ cream: 5 %	(Elimite)	
▪ topical liquid: 1 %	Nix	
<i>piperonyl butoxide-pyrethrins</i>		
▪ topical liquid: 4 %-0.33 %	(Rid)	
Devices and Equipment		
<i>alcohol antiseptic pads</i>		

Drug Name	Common Brand Name	Restrictions
<i>blood glucose diagnostic</i>		
▪ Freestyle Freedom Lite blood-glucose meter		
▪ Freestyle Insulinx blood-glucose meter		
▪ Freestyle Insulinx test strips		QL 100/90 – 50/45 for non-insulin users, 300/90 and 100/30 for insulin users
▪ Freestyle Lite blood-glucose meter		
▪ Freestyle Lite test strips		QL 100/90 – 50/45 for non-insulin users, 300/90 and 100/30 for insulin users
▪ Freestyle Precision Neo test strips		QL 100/90 – 50/45 for non-insulin users, 300/90 and 100/30 for insulin users
▪ Freestyle test strips		
▪ Precision Xtra blood-glucose meter		
▪ Precision Xtra test strips		QL 100/90 – 50/45 for non-insulin users, 300/90 and 100/30 for insulin users
<i>dressing</i>		
▪ Tegederm		
<i>inhaler assist devices</i>		
▪ Ace Aerosol Cloud Enhancer spacer		
▪ Aerochamber Plus Flow-Vu spacer		
▪ Aerochamber with Flowsignal spacer		
▪ Easivent spacer		
▪ Inspirease spacer		
<i>lancets and lancing devices</i>		
▪ Freestyle lancets: 28 gauge		
▪ Lancing device kit		QL: 150 in 25 days
▪ Medisense thin lancets: 28 gauge		
<i>needles and syringes</i>		
▪ Allergist Tray Syr-Detach NDL kit: 27 gauge, 1/2"		
▪ Allergist Tray Syr-Perm Needle kit: 28 gauge, 1/2"		
▪ Autoshield pen needles 29 gauge, 5/16"		
▪ BD Ultra-Fine pen needles 31 gauge, 5/16"		
▪ Eclipse Luer-Lok syringe: 1 mL, 27 gauge, 1/2"		QL: 150 in 25 days
▪ Exel Huber 22 gauge 3/4" needle		
▪ Insulin syringes: 0.3 mL, 31 gauge, 5/16"		QL: 150 in 25 days
▪ Insulin syringes: 0.5 mL, 31 gauge, 5/16"		QL: 150 in 25 days
▪ Insulin syringes: 1 mL, 31 gauge, 5/16"		QL: 150 in 25 days
Enzyme Replacement/Modifiers		
<i>digestive enzymes</i>		
▪ tabs		
<i>dornase alfa</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> nebulizer solution: 1 mg/mL 	Pulmozyme	SPEC, PA
<i>lactase</i>		
<ul style="list-style-type: none"> caps: 250 mg chewable tablets: 3,000 unit 		
<ul style="list-style-type: none"> tablets: 3,000 unit 		
<i>lipase/protease/amylase</i>		
<ul style="list-style-type: none"> DR caps: 3-9.5-15k units, 6-19-30k units, 12-38-60k units, 24-76-120k units, 36-114-180k units 	Creon	NSO PA
<ul style="list-style-type: none"> ER caps: 3-10-16k units, 5-17-24k units, 10-32-42k units, 20-63-84k units, 25-79-105k units, 40-125-168k units 	Zenpep	NSO PA
<ul style="list-style-type: none"> DR caps: 2.6-6.2-10.85k units, 4.2-14.2-24.6k units, 10.5-35.5-61.5k units, 16.8-56.8-98.4k units, 21-54.7-83.9k units 	Pancreaze	NSO PA
Eye, Ear, Nose, and Throat Agents		
Eye Anti-Infectives and Anti-Inflammatory Agents		
<i>ciprofloxacin</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.3 % 	(Ciloxan)	
<i>dexamethasone</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.1 % 	(Dexasol)	
<i>diclofenac sodium</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.1 % 	(Voltaren)	
<i>erythromycin</i>		
<ul style="list-style-type: none"> ophthalmic ointment: 5 mg/g 	(Ilotycin)	
<i>fluorometholone</i>		
<ul style="list-style-type: none"> ophthalmic drops and suspension: 0.1 % ophthalmic drops and suspension: 0.25 % ophthalmic ointment: 0.1 % 	(FML) FML Forte FML S.O.P.	
<i>gentamicin sulfate</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.3 % ophthalmic ointment: 0.3 % 	(Garamycin) (Garamycin)	
<i>neomycin--bacitracin-polymyxin B</i>		
<ul style="list-style-type: none"> ophthalmic ointment: 3.5 mg-400 units-10k units 	(Neo-Polycin)	
<i>neomycin-polymyxin B-dexamethasone</i>		
<ul style="list-style-type: none"> ophthalmic drops and suspension: 3.5 mg-10k units-0.1 % ophthalmic ointment: 3.5 mg-10k units-0.1 % 	(Maxitrol) (Maxitrol)	
<i>neomycin-polymyxin B-gramicidin</i>		
<ul style="list-style-type: none"> ophthalmic drops: 1.75 mg-10k units-0.025 mg 	(Neosporin)	
<i>ofloxacin</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.3 % 	(Ocuflox)	
<i>polymyxin B-trimethoprim</i>		
<ul style="list-style-type: none"> ophthalmic drops: 10k-1 % 	(Polytrim)	
<i>prednisolone acetate</i>		
<ul style="list-style-type: none"> ophthalmic drops and suspension: 0.12 % 	Pred Mild	

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ophthalmic drops and susp; 1 % 	(Pred Forte, Omnipred)	
<i>prednisolone sodium phosphate</i>		
<ul style="list-style-type: none"> ophthalmic drops: 1 % 	(Prednisol)	
<i>sulfacetamide sodium</i>		
<ul style="list-style-type: none"> ophthalmic drops: 10 % 	(Sulfac)	
<ul style="list-style-type: none"> ophthalmic ointment: 10 % 		
<i>sulfacetamide-prednisolone</i>		
<ul style="list-style-type: none"> ophthalmic drops: 10 % - 0.23 % 	(Blephamide)	
<i>tobramycin</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.3 % 	(Tobrex)	
<i>tobramycin-dexamethasone</i>		
<ul style="list-style-type: none"> ophthalmic drops and susp: 0.3 % - 0.1 % 	(TobraDex)	
<ul style="list-style-type: none"> ophthalmic oint: 0.3 % - 0.1 % 	TobraDex	
<i>trifluridine</i>		
<ul style="list-style-type: none"> ophthalmic drops: 1 % 	(Viroptic)	
Ear Anti-Infectives and Anti-Inflammatory Agents		
<i>acetic acid</i>		
<ul style="list-style-type: none"> otic soln: 2 % 	(Vosol)	
<i>acetic acid-hydrocortisone</i>		
<ul style="list-style-type: none"> otic drops: 2 % - 1 % 	(Acetasol HC)	
<i>carbamide peroxide</i>		
<ul style="list-style-type: none"> otic drops: 6.5 % 	(Murine Ear Wax Removal)	
<i>ciprofloxacin</i>		
<ul style="list-style-type: none"> otic drops: 0.2 % 	(Cetraxal)	
<i>neomycin-polymyxin B-hydrocortisone</i>		
<ul style="list-style-type: none"> otic drops: 3.5 mg-10k units-1 % 	(Cortisporin)	
<ul style="list-style-type: none"> otic drops, susp: 3.5 mg-10k units-1 % 	(Cortisporin)	
<i>ofloxacin</i>		
<ul style="list-style-type: none"> otic drops: 0.3 % 	Floxin	
Miscellaneous Eye, Ear, Nose, and Throat Agents		
<i>atropine sulfate</i>		
<ul style="list-style-type: none"> ophthalmic drops: 1 % 	(Isopto Atropine)	
<ul style="list-style-type: none"> ophthalmic oint: 1 % 		
<i>cromolyn</i>		
<ul style="list-style-type: none"> ophthalmic drops, soln: 4% 		
<i>dextran 70-hydroxypropyl methylcellulose</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.1 % - 0.3 % 	(Tears Naturale Free)	
<i>fluticasone propionate</i>		
<ul style="list-style-type: none"> nasal spray: 50 mcg 	(Flonase)	ST: Prior claim for asthma medication
<i>glycerin-propylene glycol</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.3 % - 0.1 % 	Advanced Eye Relief	
<i>hydroxypropyl methylcellulose</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.5 % 	Isopto Tears	

Drug Name	Common Brand Name	Restrictions
<i>ipratropium bromide</i>		
▪ nasal spray: 21 mcg, 42 mcg	(Atrovent)	
<i>ketotifen fumarate</i>		
▪ ophthalmic drops: 0.025 %	Alaway, (Zaditor)	
<i>polyethylene glycol-polyvinyl</i>		
▪ ophthalmic drops: 1 % - 1 %	Hypotears	
<i>polyvinyl alcohol</i>		
▪ ophthalmic drops: 1/4 %	Artificial Tears	
Gastrointestinal Agents		
Antiulcer Agents and Acid Suppressants		
<i>cimetidine</i>		
▪ tabs: 200 mg, 300 mg, 400 mg, 800 mg	(Tagamet)	
<i>famotidine</i>		
▪ tabs: 10 mg, 20 mg, 40 mg	(Pepcid)	
<i>lansoprazole</i>		
▪ caps: 15 mg, 30 mg	(Prevacid)	PA
<i>misoprostol</i>		
▪ tabs: 100 mcg, 200 mcg	(Cytotec)	
<i>omeprazole</i>		
▪ DR caps: 20 mg, 40 mg	(Prilosec)	PA after 68 days of therapy
<i>pantoprazole</i>		
▪ DR tabs: 20 mg, 40 mg	(Protonix)	PA after 68 days of therapy
<i>ranitidine</i>		
▪ oral syrup: 15 mg/mL	(Zantac)	
▪ caps: 150 mg, 300 mg		PA
▪ tabs: 150 mg, 300 mg	(Zantac)	
<i>sucralfate</i>		
▪ oral susp: 1 g/10 mL	(Carafate)	PA
▪ tabs: 1 g	(Carafate)	
Gastrointestinal Agents, Miscellaneous		
<i>bismuth subsalicylate</i>		
▪ oral susp: 262 mg/15 mL, 525 mg/15 mL	(Pepto-Bismol)	
▪ chew tabs: 262 mg	(Pepto-Bismol)	
▪ tabs: 262 mg	(Pepto-Bismol)	
<i>calcium carbonate</i>		
▪ chew tabs: 168(420) mg, 200(500) mg, 300(750) mg, 500(1250) mg	(Tums)	
<i>dicyclomine</i>		
▪ oral soln: 10 mg/5 mL	(Bentyl)	PA
▪ caps: 10 mg	(Bentyl)	
▪ tabs: 20 mg	(Bentyl)	
<i>diphenoxylate-atropine</i>		
▪ oral liquid: 2.5-0.25 mg/5 mL		PA

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> tabs: 2.5-0.025 mg 	(Lomotil)	
<i>glycopyrrolate</i>		
<ul style="list-style-type: none"> tabs: 1 mg, 2 mg 	(Robinul)	
<i>hydrocortisone</i>		
<ul style="list-style-type: none"> rectal cream: 1 %, 2.5 % 	(Proctocort)	PA
<ul style="list-style-type: none"> rectal enema: 100 mg/60 mL 	(Cortenema)	PA
<ul style="list-style-type: none"> rectal foam: 10 % 		
<i>hyoscyamine sulfate</i>		
<ul style="list-style-type: none"> oral drops: 0.125 mg/mL 	(Hyosyne)	PA
<ul style="list-style-type: none"> oral elixir: 0.125 mg/5 mL 	(Hyosyne)	PA
<ul style="list-style-type: none"> dispersible tabs: 0.125 mg 	(Symax)	
<ul style="list-style-type: none"> subl tabs: 0.125 mg 	(Levsin-SL, Symax-SL)	
<ul style="list-style-type: none"> tabs: 0.125 mg 	(Levsin)	
<ul style="list-style-type: none"> ER 12 hr tabs: 0.375 mg 	(Symax-SR)	PA
<i>loperamide</i>		
<ul style="list-style-type: none"> oral liquid: 1 mg/5 mL, 1 mg/7.5 mL 	(Imodium A-D)	PA
<ul style="list-style-type: none"> caps: 2 mg 	(Imodium A-D)	
<ul style="list-style-type: none"> tabs: 2 mg 	(Imodium A-D)	
<i>magnesium-aluminum-simethicone</i>		
<ul style="list-style-type: none"> oral susp: 200-200-20 mg, 200-225-25 mg, 400-400-40 mg, 	(Maalox, Mylanta)	
<ul style="list-style-type: none"> chew tabs: 200-200-25 mg 	(Almacone)	
<i>metoclopramide</i>		
<ul style="list-style-type: none"> oral soln: 5 mg/5mL 		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg 	(Reglan)	
<i>propantheline bromide</i>		
<ul style="list-style-type: none"> tabs: 15 mg 		
<i>ursodiol</i>		
<ul style="list-style-type: none"> caps: 300 mg 	(Actigall)	
Laxatives		
<i>bisacodyl</i>		
<ul style="list-style-type: none"> rectal supp: 10 mg 	(Dulcolax)	
<ul style="list-style-type: none"> tabs: 5 mg 	(Correctol)	
<i>docusate calcium</i>		
<ul style="list-style-type: none"> caps: 240 mg 		
<i>docusate sodium</i>		
<ul style="list-style-type: none"> oral liquid: 50 mg/5 mL 	(Colace)	
<ul style="list-style-type: none"> caps: 50 mg, 100 mg, 250 mg 	(Colace)	
<i>glycerin</i>		
<ul style="list-style-type: none"> rectal supp: adult and pediatric 		
<i>lactulose</i>		
<ul style="list-style-type: none"> oral soln: 10 g/15 mL 	(Enulose, Kristalose)	
<i>magnesium citrate</i>		
<ul style="list-style-type: none"> oral soln 		
<i>magnesium hydroxide</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> oral susp: 400 mg/5 mL 	(Milk of Magnesia)	
mineral oil		
<ul style="list-style-type: none"> rectal enema oral soln 	(Fleet Oil)	
polyethylene glycol 3350		
<ul style="list-style-type: none"> powder for recon: 17 g 	(Miralax)	QL: 527 g per 30 days
polyethylene glycol 3350-electrolytes		
<ul style="list-style-type: none"> kit: 227.1 g, 236 g, 240 g, 420 g 	Golytely, Trilyte with Flavor Packs, Moviprep	
senna extract		
<ul style="list-style-type: none"> oral syrup: 176 mg/5 mL 	Senna	PA
sennosides		
<ul style="list-style-type: none"> oral syrup: 8.8 mg/5 mL tabs: 8.6 mg 	(Senna)	
sodium phosphates		
<ul style="list-style-type: none"> rectal enema 		
Phosphate Binders		
calcium acetate		
<ul style="list-style-type: none"> caps: 667 mg tabs: 667 mg 	(Phoslo)	
sevelamer carbonate		
<ul style="list-style-type: none"> tabs: 800 mg 	(Renvela)	
sodium polystyrene sulfonate		
<ul style="list-style-type: none"> oral susp: 15 g/60 mL 	(Kionex)	
Genitourinary Agents		
oxybutynin		
<ul style="list-style-type: none"> oral syrup: 5 mg/5 mL tabs: 5 mg ER 24 hr tabs: 5 mg, 10 mg, 15 mg 	(Ditropan)	
	(Ditropan XL)	ST: Prior claim for oxybutynin IR required
phenazopyridine		
<ul style="list-style-type: none"> tabs: 100 mg, 200 mg 	(Pyridium)	
tamsulosin		
<ul style="list-style-type: none"> caps: 0.4 mg 	(Flomax)	
tolterodine		
<ul style="list-style-type: none"> tabs: 1 mg, 2 mg ER 24 hr caps: 2 mg, 4 mg 	(Detrol)	PA
	(Detrol LA)	PA
trospium		
<ul style="list-style-type: none"> tabs: 20 mg ER 25 hr caps: 60 mg 	(Sanctura)	PA
	(Sanctura XR)	PA
Heavy Metal Antagonists		
penicillamine		
<ul style="list-style-type: none"> caps: 250 mg 	Cuprimine	

Drug Name	Common Brand Name	Restrictions
<i>succimer</i>		
▪ caps: 100 mg	Chemet	
<i>zinc acetate</i>		
▪ caps: 25 mg, 50 mg	Galzin	
Hormonal Agents, Stimulant/Replacement/Modifying		
Androgens, Estrogens, Antiestrogens, and Progestins		
<i>estradiol</i>		
▪ tabs: 0.5 mg, 1 mg, 2 mg	(Estrace)	
▪ patches: 0.025mg, 0.0375mg, 0.05mg, 0.075mg, 0.1mg	(Minivelle)	
▪ patches: 0.025, 0.0375mg, 0.05mg, 0.06mg, 0.075mg, 0.1mg	(Climara)	
▪ vaginal cream: 0.1 mg/g	(Estrace)	ST – must try Estradiol vaginal tablets
▪ vaginal tablet: 10 mcg	(Vagifem)	
<i>estrogens (conjugated)</i>		
▪ tabs: 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	Premarin	PA - NSO
<i>estrogens (conjugated B/synthetic)</i>		
▪ tabs: 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	Enjuvia	
<i>estrogens (conjugated)-medroxyprogesterone</i>		
▪ tabs: 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	Prempro	PA – NSO
▪ tabs: 0.625 [14] and 0.625-5 mg [14]	Premphase	PA - NSO
<i>estropipate</i>		
▪ tabs: 0.75 mg, 1.5 mg, 3 mg	(Ogen)	
<i>ethinyl estradiol-norethindrone</i>		
▪ tabs: 2.5 mcg-0.5 mg, 5 mcg-1 mg	(Femhr) (Femhrt)	
<i>hydroxyprogesterone caproate</i>		
▪ injection: 250 mg/ml	(Makena)	PA
<i>medroxyprogesterone acetate</i>		
▪ syringe for IM inj: 150 mg/mL	(Depo-Provera)	
▪ vial for IM inj: 150 mg/mL	(Depo-Provera)	
▪ tabs: 2.5 mg, 5 mg, 10 mg	(Provera)	
<i>raloxifene</i>		
▪ tabs: 60 mg	(Evista)	PA
<i>testosterone cypionate</i>		
▪ vial for inj: 100 mg/mL, 200 mg/mL	(Depo-Testosterone)	PA
<i>testosterone enanthate</i>		
▪ vial for inj: 200 mg/mL		PA
<i>testosterone</i>		
▪ topical gel: 1% and 2%		PA
Corticosteroids (Glucocorticoids/Mineralocorticoids)		
<i>dexamethasone</i>		
▪ oral drops: 1 mg/mL	Dexamethasone Intensol	

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> oral elixir: 0.5 mg/5 mL tabs: 0.5 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg tab dose pack: 1.5 mg [21], 1.5 mg [35], 1.5 mg [51] 	(Dexpak)	
<i>fludrocortisone acetate</i>		
<ul style="list-style-type: none"> tabs: 0.1 mg 		
<i>hydrocortisone</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 20 mg 	(Cortef)	
<i>hydrocortisone sodium succinate</i>		
<ul style="list-style-type: none"> vial for inj: 100 mg 	A-Hydrocort	
<i>methylprednisolone</i>		
<ul style="list-style-type: none"> dose pack: 4 mg 		
<i>prednisolone</i>		
<ul style="list-style-type: none"> oral soln: 15 mg/5 mL 	(Prelone)	
<i>prednisolone sodium phosphate</i>		
<ul style="list-style-type: none"> oral soln: 5 mg/5 mL, 25 mg/5 mL 		
<i>prednisone</i>		
<ul style="list-style-type: none"> oral conc soln 5 mg/mL oral soln: 5 mg/5 mL tabs: 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg tab dose pack: 5 mg, 10 mg DR tabs: 1 mg, 2 mg, 5 mg 	Prednisone Intensol	
	Rayos	
Pituitary		
<i>cetorelix acetate</i>		
<ul style="list-style-type: none"> subq kit: 0.25 mg, 3 mg 	Cetrotide	PA
<i>desmopressin acetate</i>		
<ul style="list-style-type: none"> nasal soln: 0.1 mg/mL tabs: 0.1 mg, 0.2 mg 	(DDAVP)	PA
	(DDAVP)	PA
<i>elagolix</i>		
<ul style="list-style-type: none"> tabs: 150 mg 	Orilissa	PA
<i>somatropin</i>		
<ul style="list-style-type: none"> syringe for subq inj: 0.2 mg/0.25 mL, 0.4 mg/0.25 mL, 0.6 mg/0.25 mL, 0.8 mg/0.25 mL, 1 mg/0.25 mL, 1.2 mg/0.25 mL, 1.6 mg/0.25 mL, 1.8 mg/0.25 mL, 2 mg, 0.25 mL syringe for subq inj: 1.4 mg/0.25 mL cartridge for subq inj: 5 mg/mL, 12 mg/mL 	Norditropin preferred, Genotropin	SPEC, PA
	Norditropin preferred, Genotropin	SPEC, PA NSO
	Norditropin preferred, Genotropin	SPEC, PA
Thyroid and Antithyroid Agents		
<i>levothyroxine sodium</i>		
<ul style="list-style-type: none"> tabs: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg 	(Synthroid) (Levoxyl)	Brand Synthroid or Levoxyl requires PA
<i>liothyronine sodium</i>		
<ul style="list-style-type: none"> tabs: 5 mcg, 25 mcg, 50 mcg 	(Cytomel)	
<i>methimazole</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 20 mg 	(Tapazole)	
<i>propylthiouracil</i>		

Drug Name	Common Brand Name	Restrictions
▪ tabs: 50 mg <i>thyroid</i>		
▪ tabs: 65 mg, 130 mg <i>thyroid, pork</i>		PA NSO
▪ tabs: 15 mg, 30 mg, 32.5 mg, 60 mg, 65 mg, 90 mg, 120 mg, 130 mg, 180 mg, 195 mg, 240 mg	Armour Thyroid	PA NSO
Immunological Agents		
Immunological Agents		
<i>adalimumab</i>		
▪ pen inj kit: 40 mg/0.8 mL	Humira, Humira CF	SPEC, PA
▪ syringe kit: 10 mg/0.2 mL, 40 mg/0.8 mL	Humira, Humira CF	SPEC, PA
<i>antithymocyte globulin (equine)</i>		
▪ ampule for IV inj: 50 mg/mL	Atgam	
<i>antithymocyte globulin (rabbit)</i>		
▪ vial for IV inj: 25 mg	Thymoglobulin	
<i>auranofin</i>		
▪ caps: 3 mg	Ridaura	
<i>azathioprine</i>		
▪ tabs: 50 mg	(Imuran)	
<i>brodalumab</i>		
▪ syringe kit: 210 mg/1.5 ml	Siliq	SPEC, PA
<i>cyclosporine</i>		
▪ oral soln: 100 mg/mL	(Sandimmune)	
▪ caps: 25 mg, 100 mg	(Sandimmune)	
<i>cyclosporine, modified</i>		
▪ oral soln: 100 mg/mL	(Neoral)	
▪ caps: 25 mg, 100 mg	(Neoral)	
<i>etanercept</i>		
▪ pen inj: 50 mg/mL	Enbrel	SPEC, PA
▪ syringe: 25 mg/0.5 mL, 50 mg/0.5 mL	Enbrel	SPEC, PA
▪ vial for subq inj: 25 mg	Enbrel	SPEC, PA
<i>ixekizumab</i>		
▪ autoinjector kit: 80 mg/ml	Taltz	SPEC PA
▪ syringe kit: 80 mg/ml	Taltz	SPEC PA
<i>leflunomide</i>		
▪ tabs: 10 mg, 20 mg	(Arava)	
<i>mycophenolate mofetil</i>		
▪ oral susp for recon: 200 mg/mL	(Cellcept)	PA NSO
▪ caps: 250 mg	(Cellcept)	PA NSO
▪ tabs: 500 mg	(Cellcept)	PA NSO
<i>tacrolimus</i>		
▪ caps: 0.5 mg, 1 mg, 5 mg	(Prograf)	PA NSO
Vaccines		
<i>diphtheria and tetanus toxoids</i>		
▪ syringe and vial: 0.5 mL	Tenivac, Tetanus Diphtheria Toxoids	Pt must be over 18

Drug Name	Common Brand Name	Restrictions
<i>diphtheria, tetanus, and pertussive vaccine</i>		
▪ prefilled syringe and vial: 2-2.5-5/0.5 mL	Adacel TDAP	Pt must be over 18
▪ prefilled syringe and vial: 2-8-5/0.5 mL	Boostrix TDAP	Pt must be over 18
<i>haemophilus b conjugate vaccine</i>		
▪ vial: 10 mcg/0.5 mL	Acthib	Pt must be over 18
<i>hepatitis A vaccine</i>		
▪ syringe and vial: 1440/mL	Havrix	Pt must be over 18
▪ syringe and vial: 50/mL	VAQTA	Pt must be over 18
<i>hepatitis B vaccine</i>		
▪ syringe: 5 mcg/0.5 mL	Recombivax HB	Pt must be over 18
▪ syringe and vial: 10 mcg/mL	Recombivax HB	Pt must be over 18
▪ syringe: 20 mcg/mL	Engerix-B	Pt must be over 18
▪ vial: 40 mcg/mL	Recombivax HB	Pt must be over 18
<i>hepatitis A and B vaccine</i>		
▪ prefilled syringe and vial: 720-20/mL	Twinrix	Pt must be over 18
<i>human papillomavirus (HPV) 4-valent vaccine</i>		
▪ syringe and vial: 20-40/0.5 mL	Gardasil	Pt must be 18 to 26
<i>human papillomavirus (HPV) 9-valent vaccine</i>		
▪ syringe and vial: 0.5 mL	Gardasil 9	Pt must be 18 to 26
<i>influenza virus vaccine (inactivated)</i>		
▪ syringe: 36 mcg/0.1 mL	Fluzone Intraderm Quad	Pt must be over 18
▪ syringe and vial: 45 mcg/0.5 mL	Afluria, Fluarix, Flulaval, Fluzone	Pt must be over 18
▪ prefilled syringe and vial: 60 mcg/0.5 mL	Fluarix Quad, Flulaval Quad	Pt must be over 18
▪ prefilled syringe and vial: 180 mcg/0.5 mL	Fluzone High-Dose,	Pt must be over 64
<i>influenza virus vaccine (live/attenuated)</i>		
▪ nasal spray syringe: 10E6.5-7.5	FluMist Quad	Pt must be over 18
<i>measles, mumps, and rubella virus vaccine</i>		
▪ vial for subq inj: 12,500/0.5 mL	M-M-R II	Pt must be over 18
<i>meningococcal (groups A/C/Y sn W-135) diphtheria conjugate vaccine</i>		
▪ injection kit: 10-5/0.5 mL	Menveo	Pt must be over 18
▪ prefilled syringe and vial: 4 mcg/0.5 mL	Menactra	Pt must be over 18
<i>meningococcal group B vaccine</i>		
▪ syringe: 50-50/0.5 mL	Bexsero	Age must be 10 to 25
▪ syringe: 120 mcg/0.5 mL	Trumenba	Age must be 10 to 25
<i>pneumococcal conjugate vaccine (13-valent)</i>		
▪ syringe: 0.5 mL	Prennar 13	Pt must be over 18
<i>pneumococcal polysaccharide vaccine (23-valent)</i>		
▪ syringe and vial: 25 mcg/0.5 mL	Pneumovax 23	Pt must be over 18
<i>tetanus toxoid</i>		
▪ syringe and vial: 0.5 mL	Tetanus Toxoid Adsorbed	Pt must be over 18

Drug Name	Common Brand Name	Restrictions
<i>varicella virus vaccine</i>		
▪ vial for subq inj: 0.5 mL	Varivax	Pt must be over 18
<i>zoster vaccine</i>		
▪ vial for IM inj: 50 mcg	Shingrix	PA under 50 yo
▪ vial for subq inj: 0.65 mL	Zostavax	Pt must over over 59
Inflammatory Bowel Disease Agents		
<i>balsalazide</i>		
▪ tablets: 750mg	(Colazal)	
<i>budesonide</i>		
▪ DR caps: 3mg	(Entocort EC)	QL 90/30
<i>hydrocortisone</i>		
▪ enema: 100mg/60mL	(Cortenema)	
<i>mesalamine</i>		
▪ ER caps: 500 mg	Pentasa	
▪ DR caps: 400mg	Delzicol	
▪ DR tabs: 800 mg, 1.2g	Asacol HD, Lialda	
▪ rectal enema: 4 g/60 mL	(Sfrowasa)	
▪ rectal sup: 1000mg	Canasa	PA
Irrigating Solutions		
<i>sodium chloride</i>		
▪ irrigation soln: 0.9 %		
Metabolic Bone Disease Agents		
<i>alendronate sodium</i>		
▪ oral soln: 70 mg/75 mL		
▪ tabs: 5 mg, 10 mg, 35 mg, 70 mg		
<i>calcitonin</i>		
▪ nasal spray: 200 units/spray	(Fortical)	PA
<i>calcitriol</i>		
▪ caps: 0.5 mcg	(Rocaltrol)	
<i>denosumab</i>		
▪ injection: 60 mg/ml	(Prolia)	PA
<i>ibandronate</i>		
▪ tabs: 150 mg	(Boniva)	ST must have claim for Alendronate in past 120 days.
<i>paricalcitol</i>		
▪ vial for IV inj: 5 mcg/mL	Zemplar	
Miscellaneous Therapeutic Agents		
<i>allopurinol</i>		
▪ tabs: 100 mg, 300 mg	(Zyloprim)	
<i>bethanechol chloride</i>		
▪ tabs: 5 mg, 10 mg, 25 mg, 50 mg	(Urecholine)	
<i>colchicine</i>		
▪ tabs: 0.6 mg	(Colcrys)	
<i>Dimethyl fumarate</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> caps: 120 mg, 240 mg 	(Tecfidera) PA	
<i>finasteride</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 25 mg, 50 mg 	(Proscar)	
<i>glatiramer acetate</i>		
<ul style="list-style-type: none"> syringe: 20 mg/mL 	Glatopa, (Copaxone)	SPEC, PA
<i>glucagon</i>		
<ul style="list-style-type: none"> kit for inj: 1 mg 	Glucagon Emergency Kit	
<ul style="list-style-type: none"> vial for inj: 1 mg 	Glucagon	
<i>interferon beta-1a</i>		
<ul style="list-style-type: none"> kit for inj: 30 mcg 	Avonex Administration Pack	SPEC, PA
<ul style="list-style-type: none"> pen inj: kit: 30 mcg 	Avonex Pen	SPEC, PA
<ul style="list-style-type: none"> syringe inj kit: 30 mcg 	Avonex	SPEC, PA
<i>leucovorin calcium</i>		
<ul style="list-style-type: none"> tabs: 5 mg, 10 mg, 15 mg, 25 mg 		
<i>methylergonovine maleate</i>		
<ul style="list-style-type: none"> tabs: 0.2 mg 	(Methergine)	
<i>probenecid</i>		
<ul style="list-style-type: none"> tabs: 500 mg 		
<i>pyridostigmine bromide</i>		
<ul style="list-style-type: none"> oral syrup: 60 mg/5 mL 	(Mestinon)	PA
<ul style="list-style-type: none"> tabs: 60 mg 	(Mestinon)	PA
<ul style="list-style-type: none"> ER tabs: 180 mg 	(Mestinon)	PA
<i>starch</i>		
<ul style="list-style-type: none"> powder and powder packs 	(Thick-It, Thick-It #2)	
<i>ustekinumab</i>		
<ul style="list-style-type: none"> syringe for subq inj: 45 mg/0.5 mL, 90 mg/mL 	(Stelara)	SPEC, PA
Ophthalmic Agents		
Antiglaucoma Agents		
<i>acetazolamide</i>		
<ul style="list-style-type: none"> tabs: 125 mg, 250 mg 		
<ul style="list-style-type: none"> ER caps: 500 mg 	(Diamox Sequels)	
<i>bimatoprost</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.01 %, 0.03 % 	(Lumigan)	NSO – ST – requires trial of Latanoprost solution
<i>brimonidine tartrate</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.1 %, 0.15% 	(Alphagan P)	NSO – ST trial of Brimonidine 0.2% solution
<ul style="list-style-type: none"> ophthalmic drops: 0.2 % 	(Alphagain P)	
<i>brinzolamide</i>		
<ul style="list-style-type: none"> ophthalmic drops, susp: 1 % 	(Azopt)	NSO-ST trial of Dorzolamide solution
<i>carbachol</i>		
<ul style="list-style-type: none"> ophthalmic drops, soln: 0.01% 	(Miostat Intraocular)	
<i>carteolol</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ophthalmic drops, soln: 1% <i>dorzolamide</i>		
<ul style="list-style-type: none"> ophthalmic drops, soln: 2% <i>dorzolamide/timolol</i>		
<ul style="list-style-type: none"> ophthalmic drops, soln: 22.3-6.8mg/ml <i>latanoprost</i>		
<ul style="list-style-type: none"> ophthalmic drops: 0.005 % <i>levobunolol</i>	(Xalatan)	
<ul style="list-style-type: none"> ophthalmic drops: 0.25 %, 0.5 % <i>methazolamide</i>	(Betagan)	
<ul style="list-style-type: none"> tabs: 25 mg, 50 mg <i>metipranolol</i>	(Neptazane)	
<ul style="list-style-type: none"> ophthalmic drops, soln: 0.3% <i>pilocarpine</i>		
<ul style="list-style-type: none"> ophthalmic drops: 8 % <i>timolol maleate</i>	(Isopto Carpine)	PA
<ul style="list-style-type: none"> ophthalmic drops: 0.25 %, 0.5 % 	(Timoptic)	
<ul style="list-style-type: none"> ophthalmic gel soln: 0.25 %, 0.5 % 	(Timoptic-XE)	NSO – ST with Timolol solution
<ul style="list-style-type: none"> ophthalmic drops: 0.004 % 	(Travatan Z)	NSO – ST with Latanoprost solution
Replacement Preparations		
<i>electrolytes</i>		
<i>potassium citrate</i>		
<ul style="list-style-type: none"> ER tabs: 5 MEQ, 10 MEQ, 15 MEQ 		
<i>potassium chloride</i>		
<ul style="list-style-type: none"> oral soln: 20 MEQ/15 mL, 40 MEQ/15 mL 		
<ul style="list-style-type: none"> ER caps: 10 MEQ 	(Micro-K)	
<ul style="list-style-type: none"> ER tabs: 8 MEQ, 10 MEQ, 20 MEQ 	(K-Tab ER, Klor-Con)	
<i>sodium chloride, 0.9 %</i>		
<ul style="list-style-type: none"> vial for inj: 0.9 % 		
<ul style="list-style-type: none"> pgy vl prt: 0.9 % 		
Respiratory Tract Agents		
Short-Acting Beta₂ Agonists (SABA)		
<i>albuterol sulfate</i>		
<ul style="list-style-type: none"> neb soln: 2.5 mg/3 mL 	(Accuneb)	
<ul style="list-style-type: none"> HFA MDI: 90 mcg 	(ProAir, Ventolin)	QL of 2 devices in 25 days
<ul style="list-style-type: none"> DPI: 90 mcg 	(ProAir RespiClick)	QL of 2 devices per 25 days. Patient must be 12 or older
<i>terbutaline sulfate</i>		
<ul style="list-style-type: none"> tabs: 2.5 mg, 5 mg 		QL of 16 per 25 days
Long-Acting Beta₂ Agonists (LABA)		

Drug Name	Common Brand Name	Restrictions
<i>indacaterol maleate</i>		
▪ cap w/dev for inhalation: 75 mcg	(Arcapta Neohaler)	
<i>olodaterol HCl</i>		
▪ mist inhaler: 2.5 mcg	(Striverdi Respimat)	NSO PA
<i>salmeterol xinafoate</i>		
▪ blst w/dev for inhalation: 50 mcg	(Serevent Diskus)	NSO PA
Short-Acting Anticholinergics and Combination Products		
<i>ipratropium bromide</i>		
▪ neb soln: 0.2 mg/mL		
▪ HFA MDI: 17 mcg	(Atrovent HFA)	QL of 3 devices per 25 days
<i>ipratropium-albuterol</i>		
▪ neb soln: 0.5-3 mg/3 mL	(DuoNeb)	
▪ mist inhaler: 20-100 mcg	(Combivent Respimat)	
Long-Acting Anticholinergics and Combination Products		
<i>aclidinium</i>		
▪ powder inhaler: 400 mcg	(Tudorza Pressair)	
<i>tiotropium</i>		
▪ cap w/dev for inhalation: 18 mcg	(Spiriva Handihaler)	
▪ mist inhaler: 2.5 mcg	(Spiriva Respimat)	
<i>tiotropium-olodaterol</i>		
▪ mist inhaler: 2.5-2.5 mcg	(Stiolto Respimat)	
<i>umeclidinium bromide</i>		
▪ blst w/dev inhaler: 62.5 mcg	(Incruse Ellipta)	
<i>umeclidinium-vilanterol</i>		
▪ blst w/dev inhaler: 62.5-25 mcg	(Anoro Ellipta)	
Inhaled Corticosteroids (ICS)		
<i>beclomethasone dipropionate</i>		
▪ HFA MDI: 40 mcg, 80 mcg	(Qvar)	
<i>budesonide</i>		
▪ neb soln: 0.25 mg/2 mL, 0.5 mg/2 mL, 1 mg/2 mL	(Pulmicort)	
▪ aerosol powder inhaler: 90 mcg, 180 mcg	(Pulmicort Flexhaler)	
<i>fluticasone propionate</i>		
▪ HFA MDI: 44 mcg, 110 mcg, 220 mcg	(Flovent HFA)	
▪ aerosol powder: 50 mcg, 100 mcg, 200 mcg	(Arnuity Ellipta)	
▪ blst w/dev inhaler: 50 mcg, 100 mcg, 250 mcg	(Flovent Diskus)	
<i>mometasone furoate</i>		
▪ aerosol powder inhaler: 110 mcg, 220 mcg	(Asmanex Twisthaler)	
ICS-LABA Combination Inhalers		
<i>budesonide-formoterol fumarate</i>		
▪ HFA MDI: 80-4.5 mcg, 160-4.5 mcg	(Symbicort)	ST must have claims for formulary corticosteroid inhaler for 72 days out of the last 90 days
<i>fluticasone-salmeterol</i>		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ RespiClick MDI: 15-14 mcg, 113-14 mcg, 232-14 mcg ▪ Diskus: 250-50 mcg, 500-50 mcg 	(AirDuo Respiclick, Advair Diskus)	ST must have claims for formulary corticosteroid inhaler for 72 days out of the last 90 days
<i>mometasone-formoterol</i>		
<ul style="list-style-type: none"> ▪ HFA MDI: 100-5 mcg, 200-5 mcg 	(Dulera)	ST must have claims for formulary corticosteroid inhaler for 72 days out of the last 90 days
Miscellaneous Respiratory Tract Agents		
<i>cromolyn sodium</i>		
<ul style="list-style-type: none"> ▪ neb soln: 20 mg/2 mL 		QL of 30 amps per 25 days
<i>fluticasone/umeclidinium/vilanterol</i>		
	(Trelegy Ellipta)	
<ul style="list-style-type: none"> ▪ 100-62.5-25 mcg/INH 		PA
<i>montelukast sodium</i>		
<ul style="list-style-type: none"> ▪ granules: 4 mg 	(Singulair)	ST – must have claim for asthma medication within the last 180 days
<ul style="list-style-type: none"> ▪ chew tabs: 4 mg, 5 mg 	(Singulair)	ST – must have claim for asthma medication within the last 180 days
<ul style="list-style-type: none"> ▪ tabs: 10 mg 	(Singulair)	ST – must have claim for asthma medications within the last 180 days
<i>omalizumab</i>		
<ul style="list-style-type: none"> ▪ subcutaneous injection 150 mg 	(Xolair)	PA
<i>sodium chloride for inhalation</i>		
<ul style="list-style-type: none"> ▪ neb soln: 3 %, 7 %, 10 % 		
<i>theophylline anhydrous</i>		
<ul style="list-style-type: none"> ▪ ER 12 hr tabs: 100 mg, 200 mg, 300 mg, 450 mg 	(Theochron)	
<i>tobramycin</i>		
<ul style="list-style-type: none"> ▪ neb soln: 300 mg/5 ml 		PA
Skeletal Muscle Relaxants		
<i>baclofen</i>		
<ul style="list-style-type: none"> ▪ tabs: 10 mg, 20 mg 	(Lioresal)	
<i>cyclobenzaprine</i>		
<ul style="list-style-type: none"> ▪ tabs: 5 mg, 10 mg 	(Flexeril)	
<i>methocarbamol</i>		
<ul style="list-style-type: none"> ▪ tabs: 500 mg, 750 mg 	(Robaxin)	
<i>tizanidine</i>		
<ul style="list-style-type: none"> ▪ tabs: 2 mg, 4 mg 	(Zanaflex)	
Vitamins and Minerals		

Drug Name	Common Brand Name	Restrictions
*All brands must be substituted with generic when generic is available.		
adult multivitamin/mineral supplements		
<ul style="list-style-type: none"> ▪ Examples: Therems, Therems-M, Cerovite, Centrum Complete, Rena-Vite, Vitamin B complex 		
calcium and vitamin D supplements		
<ul style="list-style-type: none"> ▪ Examples: Oyster Shell Calcium, Caltrate, Calcium Plus D 		
fluoride supplements		
<ul style="list-style-type: none"> ▪ Examples: Fluora-Drops, Sodium Fluoride Drops, Fluoride Chewable Tabs, Ludent 		
folic acid		
<ul style="list-style-type: none"> ▪ tabs: 1 mg 		
iron supplements		
<ul style="list-style-type: none"> ▪ Examples: Ferrous Sulfate, Ferosul, Ferosul Elixir, Children's Iron Drops 		
multivitamin with fluoride		
<ul style="list-style-type: none"> ▪ chewable tablets: 0.25 mg, 0.5 mg, 1 mg 		
<ul style="list-style-type: none"> ▪ oral drops: 0.25 mg/ml, 0.5 mg/ml 		PA > 2 yo
ocular multivitamin/mineral supplements		
<ul style="list-style-type: none"> ▪ Examples: Ocuvite, Preservision AREDS, Preservision AREDS 2, Preservision with Lutein 		
pediatric multivitamin/mineral supplements		
<ul style="list-style-type: none"> ▪ Examples: Tri-Vit with Fluoride, Cerovite Jr, Flintstones Complete, Animal Shapes, Poly-Vita with Iron, Centrum Kids, Poly-Vi-Sol drops, Tri-Vi-Sol drops. 		
prenatal multivitamin/mineral supplements		
<ul style="list-style-type: none"> ▪ Examples: Prenatal Plus, Vol-Plus, SE-Natal 19, PrenaTabs 		
vitamin B1 (thiamine)		
<ul style="list-style-type: none"> ▪ tabs: 50 mg, 250 mg, 500 mg 		
vitamin B6 (pyridoxine)		
<ul style="list-style-type: none"> ▪ tabs: 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 500 mg 		
<ul style="list-style-type: none"> ▪ vial for inj: 100 mg/mL 		
vitamin B12 (cyanocobalamin)		
<ul style="list-style-type: none"> ▪ subl tabs: 500 mcg, 1000 mcg, 2500 mcg, 3000 mcg, 5000 mcg 		
<ul style="list-style-type: none"> ▪ tabs: 500 mcg, 2000 mcg 		
<ul style="list-style-type: none"> ▪ ER tabs: 500 mcg, 1000 mcg, 2000 mcg 		
<ul style="list-style-type: none"> ▪ vial for inj: 1000 mcg/mL 		
vitamin D₂ (ergocalciferol)		

Drug Name	Common Brand Name	Restrictions
<ul style="list-style-type: none"> ▪ caps: 50000 unit 		QL: 24 per 365 days
<i>vitamin D₃ (cholecalciferol)</i>		
<ul style="list-style-type: none"> ▪ oral drops: 400 unit/mL, 50000 unit/mL 		
<ul style="list-style-type: none"> ▪ caps: 400 unit, 2000 unit, 4000 unit, 5000 unit 		
<ul style="list-style-type: none"> ▪ caps: 50000 unit 		QL: 24 per 365 days
<ul style="list-style-type: none"> ▪ tabs: 400 unit, 2000 unit, 4000 unit, 5000 unit 		
<i>vitamin K (phytonadione)</i>		
<ul style="list-style-type: none"> ▪ tabs: 100 mcg 		

