

Arizona Complete Health-Complete Care Plan

Lista de medicamentos preferentes para salud mental

La lista de medicamentos para salud mental de Arizona Complete Health-Complete Care Plan incluye todos los medicamentos para salud mental que figuran en la Lista de medicamentos para salud mental (BHDL) de AHCCCS. No es una lista completa de todos los medicamentos cubiertos para salud mental. Si necesita un medicamento que no figura en la lista de medicamentos para salud mental, su médico puede solicitar autorización previa para cubrir el medicamento.

La lista de medicamentos se actualiza con frecuencia y puede cambiar. Puede ver la lista de medicamentos más reciente en www.azcompletehealth.com/providers/pharmacy.html



Programa de farmacia

Arizona Complete Health-Complete Care Plan proporciona farmacoterapia adecuada, de alta calidad y rentable a todos los afiliados de Arizona Complete Health-Complete Care Plan. Arizona Complete Health-Complete Care Plan cubre medicamentos recetados y ciertos medicamentos de venta libre (OTC) cuando son indicados por un médico. Algunos medicamentos requieren autorización previa (PA) o tienen límites para la edad, dosis y cantidades máximas.

Los medicamentos genéricos tienen el mismo principio activo que sus equivalentes con nombre de marca y deben usarse como primera línea de tratamiento. Esto se aplica a menos que se indique concretamente que se prefiere una marca. Si no hay un medicamento genérico disponible, puede haber más de un medicamento de nombre de marca que se pueda usar en su tratamiento. La Lista de medicamentos preferentes (PDL) de salud mental de Arizona Complete Health-Complete Care Plan se revisa con frecuencia por nuestro Comité de Farmacia y Tratamientos (P&T) de Arizona Complete Health. Esto ayuda a promover el uso apropiado y rentable de los medicamentos.

Límites de dosis

Puede obtener hasta un suministro máximo de treinta (30) días por cada nueva receta médica o reabastecimiento de la mayoría de medicamentos. Puede obtener hasta un suministro de noventa (90) días si:

- El medicamento está prescrito para una enfermedad crónica
- Usted va a estar fuera del área de servicio durante un largo periodo de tiempo
- La receta está limitada al periodo de tiempo

Debe haber transcurrido un total del 85 % del suministro de 30 días antes de que se pueda reabastecer la receta médica para la mayoría de los medicamentos.

Autorización previa y otros límites

Algunos medicamentos que figuran en la PDL de salud mental de Arizona Complete Health-Complete Care Plan pueden requerir autorización previa (PA). Su médico o farmacéutico solicitará una PA para usted. La información deberá ser presentada por el practicante o farmacéutico en el formulario de autorización previa de medicamentos. Puede encontrar este documento en el sitio web de Arizona Complete Health-Complete Care Plan en <https://www.azcompletehealth.com/providers/pharmacy.html>. Pueden enviar la PA por fax al 1-855-554-5233 o su proveedor médico puede enviar una solicitud de PA electrónicamente a <https://www.covermymeds.com/main/prior-authorization-forms/>.

Arizona Complete Health-Complete Care Plan cubrirá el medicamento si:

1. Existe un motivo médico de salud mental que requiera el medicamento específico
2. Dependiendo del medicamento, otros medicamentos en la PDL no han funcionado

Los medicamentos antipsicóticos y el litio en la lista de medicamentos requieren una autorización previa si no fueron recetados por un especialista en salud mental u otro especialista aprobado.

Si la solicitud es aprobada, Arizona Complete Health-Complete Care Plan informa al médico por fax. Si la información clínica no cumple con los criterios de cobertura para el medicamento solicitado, Arizona Complete Health-Complete Care Plan revisará la solicitud y les informará a usted y su médico sobre nuestra decisión. También le informaremos sobre medicamentos alternativos, si estuviesen disponibles, y le proporcionaremos información sobre lo que puede hacer para apelar nuestra decisión si no está de acuerdo con ella.

Abreviación	Significado	Cómo funciona
AL	Límite de edad	Algunos medicamentos solo están cubiertos para ciertas edades.
F	Formulario	Estos medicamentos están cubiertos por Arizona Complete Health-Complete Care Plan.
MP	Producto de mantenimiento	Estos medicamentos se utilizan para el tratamiento de afecciones o enfermedades a largo plazo.
NF	Fuera del formulario	Estos medicamentos requieren autorización para estar cubiertos por Arizona Complete Health-Complete Care Plan.
PA	Autorización previa	Su médico debe solicitar la aprobación de Arizona Complete Health-Complete Care Plan antes de cubrir algunos medicamentos.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para una cantidad determinada.
SP	Producto especial	Se utilizan para el tratamiento de afecciones complejas o raras como hepatitis C o artritis reumatoide.
ST	Terapia escalonada	En algunos casos, primero debe probar ciertos medicamentos antes de que Arizona Complete Health-Complete Care Plan cubra otro medicamento para su afección médica. Por ejemplo, si el Medicamento A y el Medicamento B tratan su afección médica, Arizona Complete Health-Complete Care Plan puede no cubrir el Medicamento B a menos que pruebe primero el Medicamento A.

Solicitudes por necesidad médica

Si un afiliado de Arizona Complete Health-Complete Care Plan necesita un medicamento para tratar una afección de salud mental que no figura en la PDL, su médico puede presentar una solicitud por necesidad médica (MN) para el medicamento.

Política de suministro de emergencia

Las leyes estatales y federales exigen que una farmacia dispense un suministro de hasta 4 días a cualquier afiliado que espera una determinación de PA. El propósito es evitar la interrupción del tratamiento o retrasos en el inicio del tratamiento. Las farmacias incluidas están autorizadas a proporcionar un suministro de hasta 4 días de medicamentos tradicionales (no especiales) para salud mental. Solicite a su farmacia que llame al Servicio de asistencia a farmacias al **1-888-624-1131** para obtener ayuda para reabastecer el suministro de emergencia de 4 días.

Exclusiones

La lista de medicamentos de Arizona Complete Health-Complete Care Plan no incluye ciertos medicamentos. Los siguientes tipos de medicamentos están excluidos de la cobertura. Tampoco están disponibles como suministro de emergencia de 4 días.

- Los medicamentos que se consideran experimentales o de investigación (los afiliados que estén inscritos pueden participar en servicios experimentales; no obstante, AHCCCS no reembolsará dicho servicio experimental de acuerdo con la normativa A.A.C. R9-22-203)
- Medicamentos de estudios de eficacia e implementación de medicamentos (DESI)
- Prótesis, aparatos y dispositivos
- Medicamentos para tratar afecciones de salud física
- Vitaminas y minerales orales o medicamentos de venta libre, con la excepción de los que figuran en la PDL o si un afiliado tiene déficit de una vitamina que no figure en la PDL siempre que esta trate una afección de salud mental.
- Suplementos nutricionales
- Marihuana médica
- Los medicamentos elegibles para la cobertura de Medicare Part D (para afiliados elegibles de Medicare); los copagos y costos compartidos para medicamentos de salud mental están cubiertos para los afiliados de SMI que también sean elegibles para Medicare.

Productos recién aprobados

Arizona Complete Health-Complete Care Plan revisa los nuevos medicamentos para determinar su seguridad y efectividad antes de agregarlos a la PDL. Durante este período, el acceso a estos medicamentos se considerará mediante el proceso de

revisión de PA.

Cómo reabastecer una receta médica

Puede reabastecer su receta médica en una farmacia de la red de Arizona Complete Health-Complete Care Plan. Puede encontrar una farmacia cercana poniéndose en contacto con los servicios para afiliados de Arizona Complete Health-Complete Care Plan. Cuando seleccione una farmacia, traiga con usted su tarjeta de identificación de Arizona Complete Health-Complete Care Plan. La farmacia necesitará la información que figura en la tarjeta para reabastecer su receta médica.

Para obtener más información sobre sus beneficios de farmacia, consulte su Guía para afiliados o llame a los servicios para afiliados al 888-788-4408 (TTY/TDY 711).

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			DAYTRANA PTCH (methylphenidate)	F	QL(1 EA daily); AL(At least 6 yrs old)
Amphetamines			dexmethylphenidate hcl CP24 25 MG, 30 MG, 35 MG, 40 MG	F	QL(1 EA daily); AL(At least 6 yrs old)
ADDERALL TABS (amphetamine-dextroamphetamine)	F	QL(2 EA daily); AL(At least 6 yrs old)	dexmethylphenidate hcl CP24 5 MG, 10 MG, 15 MG, 20 MG	F	QL(2 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	F	QL(1 EA daily); AL(At least 6 yrs old)	dexmethylphenidate hcl TABS	F	QL(2 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine TABS	F	QL(2 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (methylphenidate hcl)	F	QL(10 ML daily); AL(At least 6 yrs old)
dextroamphetamine sulfate TABS	F	QL(2 EA daily); AL(At least 6 yrs old)	methylphenidate hcl CPCR	F	QL(1 EA daily); AL(At least 6 yrs old)
VYVANSE CAPS	F	QL(1 EA daily); AL(At least 6 yrs old)	methylphenidate hcl TABS	F	QL(3 EA daily); AL(At least 6 yrs old)
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents			RITALIN LA CP24 40 MG (methylphenidate hcl)	F	QL(1 EA daily); AL(At least 6 yrs old)
atomoxetine hcl	F	QL(1 EA daily); AL(At least 6 yrs old)	RITALIN LA CP24 10 MG, 20 MG, 30 MG (methylphenidate hcl)	F	QL(2 EA daily); AL(At least 6 yrs old)
clonidine hcl (adhd) TB12	F	QL(4 EA daily); AL(At least 6 yrs old)	ALTERNATIVE MEDICINES		
guanfacine hcl (adhd)	F	QL(1 EA daily); AL(At least 6 yrs old)	Alternative Medicine - M's		
Histamine H3-Receptor Antagonist/Inverse Agonists			melatonin TABS 5 MG	F	
WAKIX	F	SP; PA	Alternative Medicine Combinations		
WAKIX	F	SP; PA	FLAX + DHA CAPS	F	
Stimulants - Misc.			OMEGA 3-6-9 COMPLEX CAPS	F	
CONCERTA TBCR 18 MG, 27 MG, 36 MG (methylphenidate hcl)	F	QL(2 EA daily); AL(At least 6 yrs old)	OMEGA 3-6-9 CAPS	F	
CONCERTA TBCR 54 MG (methylphenidate hcl)	F	QL(1 EA daily); AL(At least 6 yrs old)	OMEGA-3-6-9 CAPS	F	
			RA OMEGA 3-6-9 CAPS	F	
			SM OMEGA 3-6-9 FATTY ACIDS CAPS	F	
			SM OMEGA-3 CAPS	F	
			SUPER OMEGA-3 CAPS	F	
			TRIPLE OMEGA-3-6-9 CAPS	F	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>buprenorphine hcl</i> SUBL 2 MG	F	PA REQUIRED unless pregnant or nursing. Use ICD-10 codes on prescription: 1. O09.91- Supervision of high risk pregnancy, 1st Trimester. Use for Postpartum Nursing Mothers. 2. O09.92- 2nd Trimester. 3. O09.93- 3rd Trimester.; QL(16 EA daily)
Opioid Partial Agonists					
BRIXADI (WEEKLY) SOSY	F	SP; PA			
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	F	SP; PA			
<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 2 MG-8 MG	F	QL(4 EA daily)			
<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 0.5 MG-2 MG	F	QL(16 EA daily)			
<i>buprenorphine hcl</i> SUBL 8 MG	F	PA Req'd unless member is pregnant or nursing; Prescriber must note ICD-10 diagnosis code on prescription.;O 09.91; O09.92; O09.93- Supervision of high risk pregnancy, postpartum nursing mothers; QL(4 EA daily)	SUBLOCADE SOSY	F	SP; PA
			SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	F	QL(4 EA daily); AL(At least 6 yrs old)
			SUBOXONE FILM SL 0.5 MG-2 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	F	QL(16 EA daily); AL(At least 6 yrs old)
			SUBOXONE FILM SL 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	F	QL(8 EA daily); AL(At least 6 yrs old)
			SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	F	QL(2 EA daily); AL(At least 6 yrs old)
ANTIANXIETY AGENTS - Drugs to Treat Anxiety					
Antianxiety Agents - Misc.					
			<i>buspirone hcl</i> 30 MG	F	QL(2 EA daily); AL(At least 6 yrs old)
			<i>buspirone hcl</i> 5 MG, 7.5 MG, 10 MG, 15 MG	F	QL(4 EA daily); AL(At least 6 yrs old)
			<i>hydroxyzine hcl</i> SOLN 25 MG/ML, 50 MG/ML	F	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydroxyzine hcl SYRP</i>	F	QL(10 ML daily)	<i>chlordiazepoxide hcl CAPS</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>hydroxyzine hcl TABS</i>	F	QL(8 EA daily)	<i>clorazepate dipotassium TABS 15 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>hydroxyzine pamoate CAPS 100 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)	<i>clorazepate dipotassium TABS 3.75 MG, 7.5 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>hydroxyzine pamoate CAPS 25 MG, 50 MG</i>	F	QL(4 EA daily)	<i>diazepam CONC</i>	F	QL(2 ML daily); AL(At least 6 yrs old)
Benzodiazepines			<i>DIAZEPAM SOAJ</i>	F	PA
<i>ALPRAZOLAM INTENSOL CONC</i>	F	Limit 1 anxiolytic per 30 days; QL(60 ML per 15 day(s) retail; 60 ML per 15 days mail); AL(At least 6 yrs old)	<i>diazepam SOLN PO 5 MG/5ML</i>	F	QL(10 ML daily); AL(At least 6 yrs old)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	F	Limit 1 anxiolytic per 30 days; QL(4 EA daily); AL(At least 6 yrs old)	<i>diazepam SOLN IJ 5 MG/ML</i>	F	PA
<i>alprazolam TABS 2 MG</i>	F	Limit 1 anxiolytic per 30 days; QL(2 EA daily); AL(At least 6 yrs old)	<i>DIAZEPAM SOLN IJ 5 MG/ML</i>	F	PA
<i>alprazolam TB24</i>	F	Limit 1 anxiolytic per 30 days; QL(1 EA daily); AL(At least 6 yrs old)	<i>diazepam TABS</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>alprazolam TBDP 2 MG</i>	F	Limit 1 anxiolytic per 30 days; QL(2 EA daily); AL(At least 6 yrs old)	<i>lorazepam CONC</i>	F	QL(2 ML daily); AL(At least 6 yrs old)
<i>alprazolam TBDP 0.25 MG, 0.5 MG, 1 MG</i>	F	Limit 1 anxiolytic per 30 days; QL(4 EA daily); AL(At least 6 yrs old)	<i>lorazepam SOLN</i>	F	PA
			<i>lorazepam TABS 0.5 MG, 1 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
			<i>lorazepam TABS 2 MG</i>	F	Limit 1 anxiolytic per 30 days; QL(2 EA daily); AL(At least 6 yrs old)
			<i>oxazepam CAPS</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
ANTICONVULSANTS - Drugs to Treat Seizures					
Anticonvulsants - Benzodiazepines					
<i>clobazam SUSP</i>	F	AL(At least 6 yrs old); PA			
<i>clobazam TABS</i>	F	AL(At least 6 yrs old); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clonazepam TABS 0.5 MG, 1 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)	<i>oxcarbazepine TABS</i>	F	AL(At least 6 yrs old)
<i>clonazepam TABS 2 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>pregabalin CAPS</i>	F	
<i>clonazepam TBDP 2 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>pregabalin SOLN</i>	F	
<i>clonazepam TBDP 0.125 MG, 0.25 MG, 0.5 MG, 1 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)	<i>topiramate CPSP 15 MG, 25 MG</i>	F	AL(At least 6 yrs old)
Anticonvulsants - Misc.			<i>topiramate CPSP 50 MG</i>	F	
<i>carbamazepine CHEW 200 MG</i>	F		<i>topiramate TABS</i>	F	AL(At least 6 yrs old)
<i>carbamazepine CHEW 100 MG</i>	F	AL(At least 6 yrs old)	TRILEPTAL SUSP (<i>oxcarbazepine</i>)	F	AL(At least 6 yrs old)
<i>carbamazepine CP12</i>	F	AL(At least 6 yrs old)	Valproic Acid		
<i>carbamazepine SUSP 100 MG/5ML</i>	F	AL(At least 6 yrs old)	<i>divalproex sodium CSDR</i>	F	
<i>carbamazepine TABS</i>	F	AL(At least 6 yrs old)	<i>divalproex sodium TB24</i>	F	AL(At least 6 yrs old)
<i>carbamazepine TB12</i>	F	AL(At least 6 yrs old)	<i>divalproex sodium TBEC 250 MG</i>	F	AL(At least 6 yrs old)
CARBATROL CP12 (<i>carbamazepine</i>)	F	AL(At least 6 yrs old)	<i>divalproex sodium TBEC 125 MG, 500 MG</i>	F	
<i>gabapentin CAPS</i>	F	AL(At least 6 yrs old)	<i>valproate sodium SOLN PO 250 MG/5ML</i>	F	AL(At least 6 yrs old)
<i>gabapentin SOLN</i>	F	AL(At least 6 yrs old)	<i>valproic acid CAPS</i>	F	AL(At least 6 yrs old)
<i>gabapentin TABS 600 MG, 800 MG</i>	F	AL(At least 6 yrs old)	ANTIDEPRESSANTS - Drugs to Treat Depression		
<i>lamotrigine CHEW</i>	F	AL(At least 6 yrs old)	Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>lamotrigine TABS</i>	F	AL(At least 6 yrs old)	<i>mirtazapine TABS</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>lamotrigine TB24 25 MG, 50 MG, 100 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)	<i>mirtazapine TBDP</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>lamotrigine TB24 200 MG, 250 MG, 300 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	Antidepressants - Misc.		
<i>lamotrigine TBDP</i>	F	AL(At least 6 yrs old)	<i>bupropion hcl TABS</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>oxcarbazepine SUSP</i>	F	AL(At least 6 yrs old)	<i>bupropion hcl TB12</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
			<i>bupropion hcl TB24 150 MG, 300 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
			GABA Receptor Modulator - Neuroactive Steroid		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZURZUVAE	F	SP; PA	<i>paroxetine hcl TABS 10 MG, 20 MG, 30 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			<i>paroxetine hcl TABS 40 MG</i>	F	QL(1.5 EA daily); AL(At least 6 yrs old)
SPRAVATO (56 MG DOSE)	F	SP; PA	<i>sertraline hcl CONC</i>	F	QL(10 ML daily); AL(At least 6 yrs old - Up to 12 yrs old)
SPRAVATO (84 MG DOSE)	F	SP; PA	<i>sertraline hcl TABS 100 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>sertraline hcl TABS 25 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)
<i>citalopram hydrobromide SOLN</i>	F	QL(20 ML daily); AL(At least 6 yrs old - Up to 12 yrs old)	<i>sertraline hcl TABS 50 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>citalopram hydrobromide TABS 10 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	Serotonin Modulators		
<i>citalopram hydrobromide TABS 20 MG, 40 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	<i>trazodone hcl TABS 50 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)
<i>escitalopram oxalate TABS 5 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>trazodone hcl TABS 300 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>escitalopram oxalate TABS 10 MG, 20 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	<i>trazodone hcl TABS 150 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>fluoxetine hcl CAPS 10 MG, 40 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>trazodone hcl TABS 100 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>fluoxetine hcl CAPS 20 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>fluoxetine hcl SOLN</i>	F	QL(20 ML daily); AL(At least 6 yrs old - Up to 12 yrs old)	<i>duloxetine hcl CPEP 60 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>fluvoxamine maleate TABS 25 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>duloxetine hcl CPEP 20 MG, 30 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>fluvoxamine maleate TABS 100 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)	<i>venlafaxine hcl CP24 150 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>fluvoxamine maleate TABS 50 MG</i>	F	QL(6 EA daily); AL(At least 6 yrs old)	<i>venlafaxine hcl CP24 37.5 MG, 75 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl TABS 25 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)	<i>naloxone hcl SOCT</i>	F	
<i>venlafaxine hcl TABS 75 MG</i>	F	QL(5 EA daily); AL(At least 6 yrs old)	<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	F	
<i>venlafaxine hcl TABS 37.5 MG, 50 MG, 100 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)	<i>naloxone hcl SOSY</i>	F	
Tricyclic Agents			<i>naltrexone hcl</i>	F	AL(At least 6 yrs old)
<i>amitriptyline hcl TABS</i>	F	AL(At least 6 yrs old)	NARCAN LIQD (<i>naloxone hcl</i>)	F	QL(2 EA per 1 day(s) retail; 2 EA per 1 days mail); RX/OTC
<i>amoxapine</i>	F	AL(At least 6 yrs old)	REXTOVY LIQD	F	
<i>clomipramine hcl</i>	F	AL(At least 6 yrs old)	VIVITROL	F	AL(At least 6 yrs old); SP
<i>desipramine hcl TABS</i>	F	AL(At least 6 yrs old)	ANTI-HISTAMINES - Drugs to Treat Allergies		
<i>doxepin hcl CAPS</i>	F	QL(3 EA daily); AL(At least 6 yrs old)	Antihistamines - Ethanolamines		
<i>doxepin hcl CONC</i>	F	QL(6 ML daily); AL(At least 6 yrs old)	BENADRYL ALLERGY EXTRA STR TABS	F	AL(At least 6 yrs old)
<i>imipramine hcl TABS</i>	F	AL(At least 6 yrs old)	<i>diphenhydramine hcl CAPS</i>	F	AL(At least 6 yrs old)
<i>imipramine pamoate</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	<i>diphenhydramine hcl CHEW 12.5 MG</i>	F	AL(At least 6 yrs old)
<i>nortriptyline hcl CAPS</i>	F	AL(At least 6 yrs old)	<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	F	AL(At least 6 yrs old)
<i>nortriptyline hcl SOLN</i>	F	AL(At least 6 yrs old)	<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	F	AL(At least 6 yrs old)
<i>protriptyline hcl</i>	F	AL(At least 6 yrs old)	<i>diphenhydramine hcl TABS 25 MG</i>	F	AL(At least 6 yrs old)
<i>trimipramine maleate CAPS</i>	F	AL(At least 6 yrs old)	Antihistamines - Piperidines		
ANTIDOTES AND SPECIFIC ANTAGONISTS			<i>cypheptadine hcl TABS</i>	F	AL(At least 6 yrs old)
Opioid Antagonists			ANTI-HYPERTENSIVES - Drugs to Treat High Blood Pressure		
KLOXXADO LIQD	F	QL(2 EA per 1 day(s) retail; 2 EA per 1 days mail)	Antiadrenergic Antihypertensives		
<i>naloxone hcl LIQD</i>	F	QL(2 EA per 1 day(s) retail; 2 EA per 1 days mail); RX/OTC	<i>clonidine hcl TABS</i>	F	AL(At least 6 yrs old)
			<i>clonidine PTWK</i>	F	QL(0.15 EA daily); AL(At least 6 yrs old)
			<i>guanfacine hcl</i>	F	AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>prazosin hcl CAPS</i>	F	AL(At least 6 yrs old)
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	F	PA
<i>benztropine mesylate TABS</i>	F	AL(At least 6 yrs old)
<i>trihexyphenidyl hcl SOLN</i>	F	
<i>trihexyphenidyl hcl TABS</i>	F	AL(At least 6 yrs old)
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	F	
<i>amantadine hcl SOLN</i>	F	
<i>pramipexole dihydrochloride TABS</i>	F	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium carbonate CAPS</i>	F	
<i>lithium carbonate TABS</i>	F	
<i>lithium carbonate TBCR</i>	F	
Antipsychotics - Misc.		
<i>lurasidone hcl</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>ziprasidone hcl 80 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>ziprasidone hcl 20 MG, 40 MG, 60 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)
Benzisoxazoles		

Drug Name	Drug Tier	Requirements/ Limits
INVEGA HAFYERA	F	Try Sustenna or Trinza first; 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; AL(At least 18 yrs old); SP
INVEGA SUSTENNA	F	Limit 1 per 4 weeks; 1 package(s) per 28 day(s) retail; 1 package(s) per 28 day(s) mail; AL(At least 18 yrs old); SP
INVEGA TRINZA	F	Try Invega Sustenna first; Limit 1 per 3 months; 1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old); SP
PERSERIS PRSY	F	Limit 1 per 28 days; QL(0.036 EA daily); AL(At least 18 yrs old); SP
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	F	Limit 2 per 4 weeks; 2 max fill(s) per 28 day(s) retail; 2 max fill(s) per 28 day(s) mail; AL(At least 18 yrs old); SP
<i>risperidone SOLN</i>	F	QL(8 ML daily; 240 ML per 30 day(s) retail; 240 ML per 30 days mail); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>risperidone TABS 0.25 MG, 0.5 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>risperidone TABS 1 MG, 2 MG</i>	F	QL(3 EA daily); AL(At least 6 yrs old)
<i>risperidone TABS 3 MG, 4 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>risperidone TBDP</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
Butyrophenones		
<i>haloperidol decanoate</i>	F	AL(At least 18 yrs old)
<i>haloperidol lactate CONC</i>	F	AL(At least 6 yrs old)
<i>haloperidol lactate SOLN</i>	F	AL(At least 6 yrs old)
<i>haloperidol TABS</i>	F	AL(At least 6 yrs old)
Dibenzapines		
<i>clozapine TABS</i>	F	QL(5 EA daily); AL(At least 18 yrs old)
<i>clozapine TBDP</i>	F	QL(5 EA daily); AL(At least 18 yrs old)
<i>loxapine succinate</i>	F	AL(At least 6 yrs old)
<i>olanzapine SOLR</i>	F	PA
<i>olanzapine TABS 15 MG, 20 MG</i>	F	AL(At least 6 yrs old)
<i>olanzapine TABS 5 MG, 10 MG, 15 MG, 20 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
<i>olanzapine TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>olanzapine TBDP 15 MG, 20 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)
<i>olanzapine TBDP 5 MG, 10 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 150 MG, 200 MG</i>	F	QL(4 EA daily); AL(At least 6 yrs old)
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)
Dihydroindolones		
<i>molindone hcl</i>	F	AL(At least 12 yrs old)
Phenothiazines		
<i>chlorpromazine hcl SOLN</i>	F	AL(At least 18 yrs old)
<i>chlorpromazine hcl TABS</i>	F	AL(At least 6 yrs old)
<i>fluphenazine decanoate</i>	F	AL(At least 18 yrs old)
<i>fluphenazine hcl CONC</i>	F	AL(At least 6 yrs old)
<i>fluphenazine hcl ELIX</i>	F	AL(At least 6 yrs old)
<i>fluphenazine hcl TABS</i>	F	AL(At least 6 yrs old)
<i>perphenazine TABS</i>	F	AL(At least 6 yrs old)
<i>thioridazine hcl</i>	F	AL(At least 6 yrs old)
<i>trifluoperazine hcl TABS</i>	F	AL(At least 6 yrs old)
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	F	Limit 1 per 8 weeks; 1 package(s) per 56 day(s) retail; 1 package(s) per 56 day(s) mail; AL(At least 18 yrs old); SP
ABILIFY MAINTENA PRSY	F	Limit 1 per 4 weeks; 1 package(s) per 28 day(s) retail; 1 package(s) per 28 day(s) mail; AL(At least 18 yrs old); SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABILIFY MAINTENANCE SRER	F	Limit 1 per 4 weeks; 1 package(s) per 28 day(s) retail; 1 package(s) per 28 day(s) mail; AL(At least 18 yrs old); SP	<i>propranolol hcl TABS</i>	F	AL(At least 6 yrs old)
<i>aripiprazole SOLN PO</i>	F		CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>aripiprazole TABS</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	Peripheral Vasodilators		
ARISTADA 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML	F	Limit 1 per 4 weeks; 1 package(s) per 28 day(s) retail; 1 package(s) per 28 day(s) mail; AL(At least 18 yrs old); SP	<i>inositol niacinate CAPS</i>	F	
ARISTADA 1064 MG/3.9ML	F	Limit 1 per 8 weeks; 1 package(s) per 56 day(s) retail; 1 package(s) per 56 day(s) mail; AL(At least 18 yrs old); SP	NIACIN FLUSH FREE CAPS	F	
ARISTADA INITIO	F	Limit 2 doses per 365 Days; 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; AL(At least 18 yrs old); SP	NIACIN FLUSH-FREE EX ST CAPS	F	
Thioxanthenes			NO FLUSH NIACIN TABS	F	
<i>thiothixene</i>	F	AL(At least 6 yrs old)	HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
BETA BLOCKERS - Drugs to Treat High Blood Pressure			Cobalamins		
Beta Blockers Non-Selective			B-12 TABS	F	AL(At least 6 yrs old)
			<i>cyanocobalamin TABS 50 MCG, 100 MCG, 250 MCG, 500 MCG, 1000 MCG</i>	F	AL(At least 6 yrs old)
			Folic Acid/Folates		
			<i>folic acid TABS 1 MG</i>	F	AL(At least 6 yrs old); RX/OTC
			HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
			Antihistamine Hypnotics		
			<i>diphenhydramine hcl (sleep) CAPS 50 MG</i>	F	QL(1 EA daily)
			<i>diphenhydramine hcl (sleep) CAPS 25 MG</i>	F	QL(2 EA daily)
			<i>diphenhydramine hcl (sleep) LIQD</i>	F	QL(30 ML daily)
			<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	F	QL(2 EA daily)
			<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	F	QL(1 EA daily)
			<i>diphenhydramine hcl (sleep) TBDP</i>	F	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WAL-SLEEP Z LIQUID SHOTS LIQD	F	QL(50 ML daily)	KONSYL DAILY FIBER PACK 100 %	F	
Non-Barbiturate Hypnotics			KONSYL DAILY FIBER POWD	F	
<i>eszopiclone</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	KONSYL ORIGINAL DAILY FIBER PACK	F	
<i>temazepam 15 MG, 30 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	METAMUCIL 4 IN 1 FIBER PACK	F	
<i>zolpidem tartrate TABS 10 MG</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	METAMUCIL WAFR	F	
<i>zolpidem tartrate TABS 5 MG</i>	F	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylcellulose (laxative) POWD</i>	F	
<i>zolpidem tartrate TBCR</i>	F	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylcellulose (laxative) TABS</i>	F	
Selective Melatonin Receptor Agonists			NATURAL FIBER LAXATIVE POWD	F	
ROZEREM (<i>ramelteon</i>)	F	Brand Product Preferred; QL(1 EA daily); AL(At least 6 yrs old); ST	OPTIFIBER LEAN POWD	F	
LAXATIVES - Bowel Treatment Drugs			PROFIBER LIQD PO	F	
Bulk Laxatives			<i>psyllium CAPS 0.52 GM, 400 MG</i>	F	
ADVANCED FIBER COMPLEX CAPS	F		<i>psyllium POWD 25 %, 27 %, 28.3 %, 30 %, 33 %, 43 %, 48.57 %, 49 %, 51.7 %, 58.6 %, 95 %, 100 %</i>	F	
<i>calcium polycarbophil TABS</i>	F		SOLFIBER POWD	F	
<i>corn dextrin POWD</i>	F		UNIFIBER	F	
CVS DAILY FIBER PACK	F		Laxatives - Miscellaneous		
DAILY FIBER PACK	F		<i>lactulose SOLN</i>	F	
EQUALACTIN CHEW	F		Saline Laxatives		
FIBER COMPLETE TABS	F		<i>magnesium citrate 1.745 GM/30ML</i>	F	
FIBER DIET TABS	F		<i>magnesium oxide (laxative)</i>	F	
FIBER FORMULA CAPS	F		PEDIA-LAX CHEW	F	
FIBERCEL POWD	F		PHILLIPS MILK OF MAGNESIA CHEW	F	
<i>fiber CHEW</i>	F		<i>sodium phosphates ENEM</i>	F	
FIBEREX F15 LIQD PO	F		Stimulant Laxatives		
HYDROCIL PACK	F		<i>bisacodyl SUPP</i>	F	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>bisacodyl TBEC</i>	F		CVS DRY MOUTH SOLN	F	RX/OTC
CASCARA SAGRADA CAPS	F		EQL DRY MOUTH ORAL RINSE SOLN	F	RX/OTC
FLEET BISACODYL ENEM	F		MIGHTEAFLOW GUM	F	
SENNA SYRP	F		MOI-STIR SOLN	F	RX/OTC
<i>sennosides CAPS</i>	F		MOUTH KOTE REMINT SOLN	F	RX/OTC
<i>sennosides CHEW</i>	F		MOUTH KOTE SOLN	F	RX/OTC
<i>sennosides LIQD</i>	F		MUCOSITISRX PACK	F	
<i>sennosides SYRP 8.8 MG/5ML</i>	F		NEUTRASAL PACK	F	
<i>sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	F		NUMOISYN LIQD	F	RX/OTC
Surfactant Laxatives			ORAL RELIEF FOR DRY MOUTH GEL	F	
<i>docusate sodium CAPS 100 MG, 250 MG</i>	F	AL(At least 6 yrs old)	ORAL RELIEF FOR DRY MOUTH KIT	F	
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	F		ORAL RELIEF SPRAY SOLN	F	RX/OTC
DOCUSATE SODIUM SYRP	F		RA DRY MOUTH SOLN	F	RX/OTC
<i>docusate sodium TABS</i>	F		SALIVAMAX PACK	F	
PEDIA-LAX LIQD	F		MULTIVITAMINS		
MOUTH/THROAT/DENTAL AGENTS			Multiple Vitamins w/ Iron		
Throat Products - Misc.			<i>multiple vitamins w/ iron TABS</i>	F	AL(At least 6 yrs old)
ACT DRY MOUTH MOISTURIZING GUM	F		TAB-A-VITE/IRON/BETA CAROTENE TABS	F	AL(At least 6 yrs old)
AQUORAL SOLN	F	RX/OTC	Multiple Vitamins w/ Minerals		
<i>artificial saliva LOZG</i>	F	RX/OTC	ABC COMPLETE ADULT TABS	F	AL(At least 6 yrs old); RX/OTC
BIOTENE DRY MOUTH MOIST SPRAY SOLN	F	RX/OTC	ABC COMPLETE MENS TABS	F	AL(At least 6 yrs old); RX/OTC
BIOTENE DRY MOUTH GUM	F		ABC COMPLETE SENIOR 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BIOTENE ORALBALANCE DRY MOUTH GEL	F		ABC COMPLETE SENIOR MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BIOTENE PBF DRY MOUTH GUM	F		ABC COMPLETE SENIOR WOMENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BOCASAL PACK	F				
CAPHOSOL SOLN	F	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABC COMPLETE WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC	ALIVE MENS ULTRA TABS	F	AL(At least 6 yrs old); RX/OTC
ACTIVNUTRIENTS PERFORMANCE CAPS	F	AL(At least 6 yrs old); RX/OTC	ALIVE ONCE DAILY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	F	AL(At least 6 yrs old); RX/OTC	ALIVE ULTRA POTENCY ADULT TABS	F	AL(At least 6 yrs old); RX/OTC
ACTIVNUTRIENTS CAPS	F	AL(At least 6 yrs old); RX/OTC	ALIVE ULTRA POTENCY WOMENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
ADVANCED DIABETIC MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	ALIVE WOMENS 50+ COMPLETE MV TABS	F	AL(At least 6 yrs old); RX/OTC
ALGAE BASED CALCIUM TABS	F	AL(At least 6 yrs old); RX/OTC	ALIVE WOMENS ENERGY TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE CALCIUM BONE SUPPORT TABS	F	AL(At least 6 yrs old); RX/OTC	ALPHA BETIC TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE DAILY ENERGY TABS	F	AL(At least 6 yrs old); RX/OTC	ANTIOXIDANT FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE DIABETIC MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	APETIBEX CAPS	F	AL(At least 6 yrs old); RX/OTC
ALIVE ENERGY 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	APPE-CURB CAPS	F	AL(At least 6 yrs old); RX/OTC
ALIVE EVERYDAY IMMUNE HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC	AZO HORMONAL HEALTH CYCLE CARE TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE GARDEN GOODNESS TABS	F	AL(At least 6 yrs old); RX/OTC	AZO HORMONAL HEALTH HAPPY CYCL TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	F	AL(At least 6 yrs old); RX/OTC	BACMIN TABS	F	AL(At least 6 yrs old); RX/OTC
ALIVE MENS 50+ ULTRA TABS	F	AL(At least 6 yrs old); RX/OTC	BARIATRIC MULTIVITAMINS/IRON CAPS	F	AL(At least 6 yrs old); RX/OTC
ALIVE MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	BARIATRIC MULTIVITAMINS CAPS	F	AL(At least 6 yrs old); RX/OTC
ALIVE MENS COMPLETE MULTI TABS	F	AL(At least 6 yrs old); RX/OTC	BARIATRIC MULTIVITAMINS TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BASIC AM TABS	F	AL(At least 6 yrs old); RX/OTC	CENTRAVITES 50 PLUS TABS	F	AL(At least 6 yrs old); RX/OTC
BASIC PM TABS	F	AL(At least 6 yrs old); RX/OTC	CENTRAVITES ADULTS TABS	F	AL(At least 6 yrs old); RX/OTC
BIO-35 GLUTEN-FREE CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM CARDIO TABS	F	AL(At least 6 yrs old); RX/OTC
BIO-35 IRON FREE CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM MEN TABS	F	AL(At least 6 yrs old); RX/OTC
BIOCAL CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM MINIS ADULTS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BIOTECT PLUS CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM MINIS MEN 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BLOOD SUGAR MANAGER TABS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM MINIS WOMEN 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
BONEUP 3 PER DAY CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM MINIS WOMEN IMMUNE SUP TABS	F	AL(At least 6 yrs old); RX/OTC
BONEUP VEGETARIAN TABS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM SILVER ULTRA WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC
BONEUP CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM SPECIALIST HEART TABS	F	AL(At least 6 yrs old); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM SPECIALIST IMMUNE TABS	F	AL(At least 6 yrs old); RX/OTC
CAL-DAY 1000 TABS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM SPECIALIST VISION TABS	F	AL(At least 6 yrs old); RX/OTC
CELEBRATE MULTI-COMplete 18 CAPS	F	AL(At least 6 yrs old); RX/OTC	CENTRUM ULTRA WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC
CELEBRATE MULTI-COMplete 36 CAPS	F	AL(At least 6 yrs old); RX/OTC	CERTAVITE SENIOR/ANTIOXIDANT TABS	F	AL(At least 6 yrs old); RX/OTC
CELEBRATE MULTI-COMplete 45 CAPS	F	AL(At least 6 yrs old); RX/OTC	CERTAVITE SENIOR TABS	F	AL(At least 6 yrs old); RX/OTC
CELEBRATE MULTI-COMplete 60 CAPS	F	AL(At least 6 yrs old); RX/OTC	CERTAVITE/ANTIOXIDANTS TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHOICEFUL MULTIVITAMIN CAPS	F	AL(At least 6 yrs old); RX/OTC	DAYAVITE TABS	F	AL(At least 6 yrs old); RX/OTC
CITRACAL +D3 TABS	F	AL(At least 6 yrs old); RX/OTC	DECUBI-VITE CAPS	F	AL(At least 6 yrs old); RX/OTC
CULTURELLE PROBIOTIC MEN DAILY CAPS	F	AL(At least 6 yrs old); RX/OTC	DEKAS PLUS OCEAN CAPS	F	AL(At least 6 yrs old); RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC	DEKAS PLUS CAPS	F	AL(At least 6 yrs old); RX/OTC
CVS DAILY MULTIV/MINERAL MENS TABS	F	AL(At least 6 yrs old); RX/OTC	DEPLIN MA CAPS	F	AL(At least 6 yrs old); RX/OTC
CVS DAILY MULTIVITAMIN MENS TABS	F	AL(At least 6 yrs old); RX/OTC	DERMACINRX MULTITAM TABS	F	AL(At least 6 yrs old); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	F	AL(At least 6 yrs old); RX/OTC	DERMACINRX RIBOTIN- E TABS	F	AL(At least 6 yrs old); RX/OTC
CVS IMMUNE SUPPORT CAPS	F	AL(At least 6 yrs old); RX/OTC	DERMACINRX ZINTREXYL-C TABS	F	AL(At least 6 yrs old); RX/OTC
CVS ONE DAILY MENS 50+ ADV TABS	F	AL(At least 6 yrs old); RX/OTC	DERMAVITE TABS	F	AL(At least 6 yrs old); RX/OTC
CVS ONE DAILY WOMENS 50+ ADV TABS	F	AL(At least 6 yrs old); RX/OTC	DEXATRAN CAPS	F	AL(At least 6 yrs old); RX/OTC
CVS SPECTRAVITE ADULT 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	DIALYVITE SUPREME D TABS	F	AL(At least 6 yrs old); RX/OTC
CVS SPECTRAVITE ADULTS TABS	F	AL(At least 6 yrs old); RX/OTC	DIATROL TABS	F	AL(At least 6 yrs old); RX/OTC
CVS SPECTRAVITE ULTRA MEN 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	EQ COMPLETE MULTIVITAMIN-ADULT TABS	F	AL(At least 6 yrs old); RX/OTC
CVS SPECTRAVITE ULTRA MENS TABS	F	AL(At least 6 yrs old); RX/OTC	EQ ONE DAILY MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
CVS SPECTRAVITE ULTRA WOMEN TABS	F	AL(At least 6 yrs old); RX/OTC	EQ ONE DAILY MENS HEALTH TABS	F	AL(At least 6 yrs old); RX/OTC
CVS VISION HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC	EQ ONE DAILY WOMENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EQ ONE DAILY WOMENS HEALTH TABS	F	AL(At least 6 yrs old); RX/OTC	FOLAMAX TABS	F	AL(At least 6 yrs old); RX/OTC
EQL CENTURY MATURE ADULTS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	FOLAMED DHA CAPS	F	AL(At least 6 yrs old); RX/OTC
EQL CENTURY MENS TABS	F	AL(At least 6 yrs old); RX/OTC	FOLAPRIME TABS	F	AL(At least 6 yrs old); RX/OTC
EQL CENTURY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC	FOLIFLEX TABS	F	AL(At least 6 yrs old); RX/OTC
EQL ONE DAILY MENS TABS	F	AL(At least 6 yrs old); RX/OTC	FOLITIN-Z TABS	F	AL(At least 6 yrs old); RX/OTC
ESTROVEN MENOPAUSE SUPPLEMENT TABS	F	AL(At least 6 yrs old); RX/OTC	FREEDAVITE TABS	F	AL(At least 6 yrs old); RX/OTC
EYE HEALTH + LUTEIN TABS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
EYE HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY ADULTS TABS	F	AL(At least 6 yrs old); RX/OTC
EYE MULTIVITAMIN/SODIUM TABS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY MEN 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
EYE MULTIVITAMIN CAPS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY MEN TABS	F	AL(At least 6 yrs old); RX/OTC
FINAZOL TABS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY WOMEN 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
FITNESS TABS FOR MEN AM/PM TABS	F	AL(At least 6 yrs old); RX/OTC	FT CENTURY WOMEN TABS	F	AL(At least 6 yrs old); RX/OTC
FITNESS TABS FOR WOMEN AM/PM TABS	F	AL(At least 6 yrs old); RX/OTC	FT EYE HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC
FLORRAVITE TABS	F	AL(At least 6 yrs old); RX/OTC	FT EYE HEALTH TABS	F	AL(At least 6 yrs old); RX/OTC
FLORRAXYL TABS	F	AL(At least 6 yrs old); RX/OTC	FT HAIR SKIN & NAILS EXTRA STR TABS	F	AL(At least 6 yrs old); RX/OTC
FOLAGENT DHA CAPS	F	AL(At least 6 yrs old); RX/OTC	FT ONE DAILY MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FT ONE DAILY MENS TABS	F	AL(At least 6 yrs old); RX/OTC	HM HAIR/SKIN/NAILS TABS	F	AL(At least 6 yrs old); RX/OTC
FT ONE DAILY WOMENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC	HYLAZINC TABS	F	AL(At least 6 yrs old); RX/OTC
FT ONE DAILY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC	ICAPS AREDS FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC
GENADEK STEP 1 CAPS	F	AL(At least 6 yrs old); RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	F	AL(At least 6 yrs old); RX/OTC
GENADEK STEP 2 CAPS	F	AL(At least 6 yrs old); RX/OTC	KEYFOLIC TABS	F	AL(At least 6 yrs old); RX/OTC
GERI-FREEDA SENIOR FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC	KEYLOSA TABS	F	AL(At least 6 yrs old); RX/OTC
GNP CENTURY ADULT TABS	F	AL(At least 6 yrs old); RX/OTC	K-PAX IMMUNE PROFESSIONAL ST TABS	F	AL(At least 6 yrs old); RX/OTC
GNP THERAPEUTIC-M TABS	F	AL(At least 6 yrs old); RX/OTC	LIVER DETOX TABS	F	AL(At least 6 yrs old); RX/OTC
HAIR SKIN & NAILS ADVANCED TABS	F	AL(At least 6 yrs old); RX/OTC	LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	F	AL(At least 6 yrs old); RX/OTC
HAIR SKIN & NAILS TABS	F	AL(At least 6 yrs old); RX/OTC	MEDI TAB TABS	F	AL(At least 6 yrs old); RX/OTC
HAIR/SKIN/NAILS CAPS	F	AL(At least 6 yrs old); RX/OTC	MEGA MULTI FOR WOMEN TABS	F	AL(At least 6 yrs old); RX/OTC
HEAD CARE PROACTIVE HEALTH TABS	F	AL(At least 6 yrs old); RX/OTC	MEGA MULTI MEN TABS	F	AL(At least 6 yrs old); RX/OTC
HEALTHY EYES SUPERVISION 2 CAPS	F	AL(At least 6 yrs old); RX/OTC	MEGAVITE FRUITS & VEGGIES TABS	F	AL(At least 6 yrs old); RX/OTC
HIGH POT MULTIVITAMIN/BETA-CAR TABS	F	AL(At least 6 yrs old); RX/OTC	MEGAVITE GOLDEN YEARS 55+ TABS	F	AL(At least 6 yrs old); RX/OTC
HIGH POTENCY MULTIVIT/FA TABS	F	AL(At least 6 yrs old); RX/OTC	MENATROL CAPS	F	AL(At least 6 yrs old); RX/OTC
HM COMPLETE MEN TABS	F	AL(At least 6 yrs old); RX/OTC	MENS 50+ ADVANCED CAPS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MENS 50+ MULTI VITAMIN/MIN TABS	F	AL(At least 6 yrs old); RX/OTC	MULTIVITAMIN-MINERALS TABS	F	AL(At least 6 yrs old); RX/OTC
MENS 50+ MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	MVW COMPLETE FORMULATION D3000 CAPS	F	AL(At least 6 yrs old); RX/OTC
MENS MULTI HEALTH FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC	MVW COMPLETE FORMULATION D5000 CAPS	F	AL(At least 6 yrs old); RX/OTC
MENS MULTI VITAMIN & MINERAL TABS	F	AL(At least 6 yrs old); RX/OTC	MVW COMPLETE FORMULATION MINIS CAPS	F	AL(At least 6 yrs old); RX/OTC
MENS MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	MVW COMPLETE FORMULATION CAPS	F	AL(At least 6 yrs old); RX/OTC
MOOD FOOD ES CAPS	F	AL(At least 6 yrs old); RX/OTC	MVW MODULATOR FORMULATION MINI CAPS	F	AL(At least 6 yrs old); RX/OTC
MOOD FOOD CAPS	F	AL(At least 6 yrs old); RX/OTC	MVW MODULATOR FORMULATION CAPS	F	AL(At least 6 yrs old); RX/OTC
MULTIA CAPS	F	AL(At least 6 yrs old); RX/OTC	NAT-RUL THERAVITE-M TABS	F	AL(At least 6 yrs old); RX/OTC
<i>multiple vitamins w/ minerals CAPS</i>	F	AL(At least 6 yrs old); RX/OTC	NATRUL-VITES TABS	F	AL(At least 6 yrs old); RX/OTC
<i>multiple vitamins w/ minerals TABS</i>	F	AL(At least 6 yrs old); RX/OTC	NEOVITE TABS	F	AL(At least 6 yrs old); RX/OTC
MULTITOL-M TABS	F	AL(At least 6 yrs old); RX/OTC	NICADAN TABS	F	AL(At least 6 yrs old); RX/OTC
MULTIVITAMIN ADULT (MINERALS) TABS	F	AL(At least 6 yrs old); RX/OTC	NICAZEL FORTE TABS	F	AL(At least 6 yrs old); RX/OTC
MULTIVITAMIN MEN TABS	F	AL(At least 6 yrs old); RX/OTC	NICAZEL TABS	F	AL(At least 6 yrs old); RX/OTC
MULTI-VITAMIN MONOCAPS TABS	F	AL(At least 6 yrs old); RX/OTC	NO IRON MULT VITAMIN-MINERALS TABS	F	AL(At least 6 yrs old); RX/OTC
MULTIVITAMIN WOMEN TABS	F	AL(At least 6 yrs old); RX/OTC	NUTRICAP TABS	F	AL(At least 6 yrs old); RX/OTC
MULTIVITAMIN/ZINC STRESS TABS	F	AL(At least 6 yrs old); RX/OTC	OCULAR VITAMINS TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY MENS 50+ ADVANTAGE TABS	F	AL(At least 6 yrs old); RX/OTC
OCUVITE ADULT 50+ CAPS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
OCUVITE ADULT FORMULA CAPS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY MENS HEALTH FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC
OCUVITE-LUTEIN CAPS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY MENS PRO EDGE TABS	F	AL(At least 6 yrs old); RX/OTC
ONCOVITE TABS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY PROACTIVE 65+ TABS	F	AL(At least 6 yrs old); RX/OTC
ONE A DAY ENERGY TABS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY TEEN ADVANTAGE/HIM TABS	F	AL(At least 6 yrs old); RX/OTC
ONE A DAY MEN 50 PLUS TABS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY WOMENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
ONE A DAY TRIPLE IMMUNE SUPPRT TABS	F	AL(At least 6 yrs old); RX/OTC	ONE-A-DAY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC
ONE A DAY WOMEN 50 PLUS TABS	F	AL(At least 6 yrs old); RX/OTC	ONE-DAILY MULTI CAPS CAPS	F	AL(At least 6 yrs old); RX/OTC
ONE DAILY MEN FORMULA W/O IRON TABS	F	AL(At least 6 yrs old); RX/OTC	ONEVITE TABS	F	AL(At least 6 yrs old); RX/OTC
ONE DAILY MENS 50+ MULTIVIT TABS	F	AL(At least 6 yrs old); RX/OTC	OPURITY TABS	F	AL(At least 6 yrs old); RX/OTC
ONE DAILY MULTIVITAMIN WOMEN TABS	F	AL(At least 6 yrs old); RX/OTC	OSTEOPRIME PLUS TABS	F	AL(At least 6 yrs old); RX/OTC
ONE DAILY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC	PARVLEX TABS	F	AL(At least 6 yrs old); RX/OTC
ONE-A-DAY ENERGY TABS	F	AL(At least 6 yrs old); RX/OTC	PHYTOMULTI TABS	F	AL(At least 6 yrs old); RX/OTC
ONE-A-DAY MENOPAUSE FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC	PRESCRIPTION SUPPORT MULTIVIT CAPS	F	AL(At least 6 yrs old); RX/OTC
ONE-A-DAY MENS (MINERALS) TABS	F	AL(At least 6 yrs old); RX/OTC	PRESERVISION AREDS 2+MULTI VIT CAPS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRESERVISION AREDS 2 CAPS	F	AL(At least 6 yrs old); RX/OTC	QUIN B STRONG TABS	F	AL(At least 6 yrs old); RX/OTC
PRESERVISION AREDS CAPS	F	AL(At least 6 yrs old); RX/OTC	QUINTABS-M TABS	F	AL(At least 6 yrs old); RX/OTC
PRESERVISION AREDS TABS	F	AL(At least 6 yrs old); RX/OTC	RA CENTRAL-VITE TABS	F	AL(At least 6 yrs old); RX/OTC
PRESERVISION/LUTEIN CAPS	F	AL(At least 6 yrs old); RX/OTC	RAYAVIT TABS	F	AL(At least 6 yrs old); RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS	F	AL(At least 6 yrs old); RX/OTC	REMEDIENT CAPS	F	AL(At least 6 yrs old); RX/OTC
PRO-CAL TABS	F	AL(At least 6 yrs old); RX/OTC	RENAPLEX-D TABS	F	AL(At least 6 yrs old); RX/OTC
PROCERV HP TABS	F	AL(At least 6 yrs old); RX/OTC	SENTRY SENIOR MENS 50+ TABS	F	AL(At least 6 yrs old); RX/OTC
PROFOLA TABS	F	AL(At least 6 yrs old); RX/OTC	SENTRY SENIOR/LUTEIN TABS	F	AL(At least 6 yrs old); RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS	F	AL(At least 6 yrs old); RX/OTC	SENTRY TABS	F	AL(At least 6 yrs old); RX/OTC
PRORENAL + D TABS	F	AL(At least 6 yrs old); RX/OTC	SIDEROL TABS	F	AL(At least 6 yrs old); RX/OTC
PROTECT CARDIO AF CAPS	F	AL(At least 6 yrs old); RX/OTC	SKIN HAIR & NAILS ADVANCED CAPS	F	AL(At least 6 yrs old); RX/OTC
PROTECT PLUS SO CAPS	F	AL(At least 6 yrs old); RX/OTC	SM ONE DAILY MENS TABS	F	AL(At least 6 yrs old); RX/OTC
PROTEGRA CAPS	F	AL(At least 6 yrs old); RX/OTC	SM ONE DAILY WOMENS TABS	F	AL(At least 6 yrs old); RX/OTC
PROVIT TABS	F	AL(At least 6 yrs old); RX/OTC	SOLO TABS	F	AL(At least 6 yrs old); RX/OTC
QC MULTI-VITE TABS	F	AL(At least 6 yrs old); RX/OTC	SPECTRAVITE TABS	F	AL(At least 6 yrs old); RX/OTC
QC OCUHEALTH VISION SUPPORT 2 CAPS	F	AL(At least 6 yrs old); RX/OTC	STROVITE ONE TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SUPER ANTIOXIDANT CAPS	F	AL(At least 6 yrs old); RX/OTC	THERANATAL LACTATION ONE CAPS	F	AL(At least 6 yrs old); RX/OTC
SUPER D-ZINC-SELENIUM-COPPER TABS	F	AL(At least 6 yrs old); RX/OTC	THERA-TABS M TABS	F	AL(At least 6 yrs old); RX/OTC
SUPERIOR MENS MULTI TABS	F	AL(At least 6 yrs old); RX/OTC	THERA-VITE MAX-M TABS	F	AL(At least 6 yrs old); RX/OTC
SUPERIOR WOMENS MULTI TABS	F	AL(At least 6 yrs old); RX/OTC	THEREMS-M TABS	F	AL(At least 6 yrs old); RX/OTC
SUPPORT-500 CAPS	F	AL(At least 6 yrs old); RX/OTC	T-VITES TABS	F	AL(At least 6 yrs old); RX/OTC
SYSTANE ICAPS AREDS2 TABS	F	AL(At least 6 yrs old); RX/OTC	UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG	F	AL(At least 6 yrs old); RX/OTC
THERA M PLUS TABS	F	AL(At least 6 yrs old); RX/OTC	ULTRA BONEUP TABS	F	AL(At least 6 yrs old); RX/OTC
THERABETIC MULTI-VITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	VENEXA FE TABS	F	AL(At least 6 yrs old); RX/OTC
THERAGRAN-M ADVANCED 50 PLUS TABS	F	AL(At least 6 yrs old); RX/OTC	VENEXA TABS	F	AL(At least 6 yrs old); RX/OTC
THERAGRAN-M ADVANCED TABS	F	AL(At least 6 yrs old); RX/OTC	VENTRIXYL FE TABS	F	AL(At least 6 yrs old); RX/OTC
THERAGRAN-M PREMIER 50 PLUS TABS	F	AL(At least 6 yrs old); RX/OTC	VENTRIXYL TABS	F	AL(At least 6 yrs old); RX/OTC
THERAGRAN-M PREMIER TABS	F	AL(At least 6 yrs old); RX/OTC	VISION HEALTH CAPS	F	AL(At least 6 yrs old); RX/OTC
THERAGRAN-M TABS	F	AL(At least 6 yrs old); RX/OTC	VISION OPTIMIZER CAPS	F	AL(At least 6 yrs old); RX/OTC
THERA-M PLUS MV W/BETA-CAROT TABS	F	AL(At least 6 yrs old); RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS	F	AL(At least 6 yrs old); RX/OTC
THERAMILL FORTE CAPS	F	AL(At least 6 yrs old); RX/OTC	VISTA ADVANCED DRY EYE FORMULA CAPS	F	AL(At least 6 yrs old); RX/OTC
THERA-M TABS	F	AL(At least 6 yrs old); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VITABASIC COMPLETE TABS	F	AL(At least 6 yrs old); RX/OTC	VITREXATE FE TABS	F	AL(At least 6 yrs old); RX/OTC
VITABASIC SENIOR TABS	F	AL(At least 6 yrs old); RX/OTC	VITREXATE TABS	F	AL(At least 6 yrs old); RX/OTC
VITABEX PLUS CAPS	F	AL(At least 6 yrs old); RX/OTC	VITREXYL + IRON TABS	F	AL(At least 6 yrs old); RX/OTC
VITABEX CAPS	F	AL(At least 6 yrs old); RX/OTC	VITREXYL TABS	F	AL(At least 6 yrs old); RX/OTC
VITACORE TABS	F	AL(At least 6 yrs old); RX/OTC	VITRUM 50+ ADULT-MULTI TABS	F	AL(At least 6 yrs old); RX/OTC
VITAMIN D3 COMPLETE TABS	F	AL(At least 6 yrs old); RX/OTC	VITRUM 50+ SENIOR MULTI TABS	F	AL(At least 6 yrs old); RX/OTC
VITASANA TABS	F	AL(At least 6 yrs old); RX/OTC	WELLFOLA TABS	F	AL(At least 6 yrs old); RX/OTC
VITATRUM TABS	F	AL(At least 6 yrs old); RX/OTC	WOMENS 50+ MULTI VITAMIN/MIN TABS	F	AL(At least 6 yrs old); RX/OTC
VITEYES CLASSIC ADVANCED CAPS	F	AL(At least 6 yrs old); RX/OTC	WOMENS 50+ MULTI VITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC
VITEYES CLASSIC MACULAR SUPPOR CAPS	F	AL(At least 6 yrs old); RX/OTC	WOMENS MULTI VITAMIN & MINERAL TABS	F	AL(At least 6 yrs old); RX/OTC
VITEYES CLASSIC MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	YELETS TEENAGE FORMULA TABS	F	AL(At least 6 yrs old); RX/OTC
VITEYES CLASSIC+OMEGA-3 CAPS	F	AL(At least 6 yrs old); RX/OTC	Multivitamins		
VITEYES OPTIC NERVE SUPPORT TABS	F	AL(At least 6 yrs old); RX/OTC	ALTRIXA TABS	F	AL(At least 6 yrs old); RX/OTC
VITRAMYN TABS	F	AL(At least 6 yrs old); RX/OTC	AMLADEX TABS	F	AL(At least 6 yrs old); RX/OTC
VITRANOL FE TABS	F	AL(At least 6 yrs old); RX/OTC	DAILY MULTIPLE VITAMINS TABS	F	AL(At least 6 yrs old); RX/OTC
VITRANOL TABS	F	AL(At least 6 yrs old); RX/OTC	ESTROFACTORS TABS	F	AL(At least 6 yrs old); RX/OTC
			FOLCYTEINE TABS	F	AL(At least 6 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GENICIN VITA-Q TABS	F	AL(At least 6 yrs old); RX/OTC	THEREMS TABS	F	AL(At least 6 yrs old); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	TM-DAILY VITE TABS	F	AL(At least 6 yrs old); RX/OTC
MINCORA TABS	F	AL(At least 6 yrs old); RX/OTC	TRUE MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC
MULTI VITAMIN W/D-3 TABS	F	AL(At least 6 yrs old); RX/OTC	NUTRIENTS		
MULTI VITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	Misc. Nutritional Substances		
<i>multiple vitamin TABS</i>	F	AL(At least 6 yrs old); RX/OTC	FISH OIL PEARLS CAPS	F	AL(At least 6 yrs old)
MULTIVITAMIN ADULT TABS	F	AL(At least 6 yrs old); RX/OTC	FISH OIL TRIPLE STRENGTH CAPS	F	AL(At least 6 yrs old)
MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	FISH OIL ULTRA CAPS	F	AL(At least 6 yrs old)
NEOMULTIVITE TABS	F	AL(At least 6 yrs old); RX/OTC	FISH OIL CAPS 875 MG	F	AL(At least 6 yrs old)
OMNICAP TABS	F	AL(At least 6 yrs old); RX/OTC	FISH OIL CHEW	F	AL(At least 6 yrs old)
ONE DAILY ESSENTIALS TABS	F	AL(At least 6 yrs old); RX/OTC	OCEAN BLUE MINICAPS OMEGA-3 CAPS	F	AL(At least 6 yrs old)
ONE DAILY ESSENTIAL TABS	F	AL(At least 6 yrs old); RX/OTC	OMEGA-3 EPA FISH OIL CAPS	F	AL(At least 6 yrs old)
ONE VITE DAILY MULTIVITAMIN TABS	F	AL(At least 6 yrs old); RX/OTC	<i>omega-3 fatty acids CAPS</i>	F	AL(At least 6 yrs old)
QUINTABS TABS	F	AL(At least 6 yrs old); RX/OTC	<i>omega-3 fatty acids CHEW</i>	F	AL(At least 6 yrs old)
STRESS FORMULA/ZINC/ENERGY TABS	F	AL(At least 6 yrs old); RX/OTC	OMEGA-3 FISH OIL EX ST CAPS	F	AL(At least 6 yrs old)
THERA TABS	F	AL(At least 6 yrs old); RX/OTC	OMEGA-3 CAPS	F	AL(At least 6 yrs old)
			OMEGAPURE 820 CAPS	F	AL(At least 6 yrs old)
			SALMON CAPS	F	AL(At least 6 yrs old)
			SM FISH OIL CAPS	F	AL(At least 6 yrs old)
			ULTRA OMEGA 3 CAPS	F	AL(At least 6 yrs old)
			ULTRA OMEGA-3 FISH OIL CAPS	F	AL(At least 6 yrs old)
			PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Emotional Conditions			ADTHYZA TABS 30 MG, 32.5 MG, 60 MG, 65 MG, 90 MG, 120 MG, 130 MG	F	AL(At least 6 yrs old)
Agents for Chemical Dependency			ARMOUR THYROID TABS 30 MG, 60 MG, 90 MG, 120 MG	F	AL(At least 6 yrs old)
<i>acamprosate calcium</i>	F	AL(At least 6 yrs old)	<i>levothyroxine sodium TABS</i>	F	AL(At least 6 yrs old)
<i>disulfiram</i>	F	AL(At least 6 yrs old)	<i>liothyronine sodium TABS</i>	F	AL(At least 6 yrs old)
Movement Disorder Drug Therapy			NIVA THYROID TABS 30 MG, 60 MG, 90 MG, 120 MG	F	AL(At least 6 yrs old)
AUSTEDO XR PATIENT TITRATION TEPK	F	Limit 1 kit per 28 days ; QL(42 EA per 28 day(s) retail; 42 EA per 28 days mail); SP; PA	NP THYROID TABS 30 MG, 60 MG, 90 MG, 120 MG	F	AL(At least 6 yrs old)
AUSTEDO XR PATIENT TITRATION TEPK	F	SP; PA	THYROID TABS 30 MG, 60 MG, 90 MG, 120 MG	F	AL(At least 6 yrs old)
AUSTEDO XR TB24 18 MG, 30 MG, 36 MG, 42 MG, 48 MG	F	SP; PA	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
AUSTEDO XR TB24 6 MG, 12 MG, 24 MG	F	QL(1 EA daily); SP; PA	Urinary Antispasmodics - Cholinergic Agonists		
AUSTEDO TABS	F	QL(2 EA daily); SP; PA	<i>bethanechol chloride</i>	F	AL(At least 6 yrs old)
INGREZZA CAPS	F	QL(1 EA daily); SP; PA	VITAMINS		
INGREZZA CPPK	F	Limit 1 kit per 28 days ; QL(28 EA per 28 day(s) retail; 28 EA per 28 days mail); SP; PA	Oil Soluble Vitamins		
INGREZZA CPSP	F	QL(1 EA daily); SP; PA	KEY-E CHEW	F	
Psychotherapeutic and Neurological Agents - Misc.			<i>vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG</i>	F	
<i>pimozide</i>	F	AL(At least 12 yrs old)	<i>vitamin e CAPS 180 MG, 400 UNIT, 100 UNIT, 180 MG, 200 UNIT, 400 UNIT</i>	F	AL(At least 6 yrs old)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			VITAMIN E CAPS	F	AL(At least 6 yrs old)
Thyroid Hormones			VITAMIN E CHEW	F	AL(At least 6 yrs old)
			Water Soluble Vitamins		
			B-1 TABS	F	AL(At least 6 yrs old)
			<i>niacin CPCR 250 MG</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>niacin TBCR 250 MG, 750 MG</i>	F	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	F	AL (At least 6 yrs old)
SLO-NIACIN TBCR 250 MG, 500 MG (<i>niacin</i>)	F	
SLO-NIACIN TBCR 250 MG, 500 MG (<i>niacin</i>)	F	
<i>thiamine hcl TABS</i>	F	AL (At least 6 yrs old)
<i>thiamine mononitrate TABS 100 MG</i>	F	AL (At least 6 yrs old)

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diphenhydramine hcl ELIX 12.5 MG/5ML	6	EQL CENTURY WOMENS TABS ..	15	FISH OIL ULTRA CAPS	22
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diphenhydramine hcl TABS 25 MG ..	6	EQ ONE DAILY MENS TABS	15	FITNESS TABS FOR WOMEN AM/PM TABS	15
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				FOLAMED DHA CAPS	15

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FT CENTURY WOMEN 50+ TABS		haloperidol TABS	8	INVEGA SUSTENNA	7
15		HEAD CARE PROACTIVE HEALTH		INVEGA TRINZA	7
FT CENTURY WOMEN TABS	15	TABS	16	KEY-E CHEW	23
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FT EYE HEALTH TABS	15	CAPS	16	KEYLOSA TABS	16
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FT ONE DAILY MENS 50+ TABS .	15	HIGH POTENCY MULTIVIT/FA			10
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gabapentin TABS 600 MG, 800 MG	4	hydroxyzine hcl SOLN 25 MG/ML, 50		lamotrigine CHEW	4
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paroxetine hcl TABS 40 MG	5	PROTECT CARDIO AF CAPS	19	risperidone TABS 1 MG, 2 MG	8
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perphenazine TABS	8	PROVIT TABS	19	RITALIN LA CP24 40 MG (methylphenidate hcl)	1
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PHILLIPS MILK OF MAGNESIA CHEW	10	psyllium POWD 25 %, 27 %, 28.3 %, 30 %, 33 %, 43 %, 48.57 %, 49 %, 51.7 %, 58.6 %, 95 %, 100 %	10	SALIVAMAX PACK	11
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sodium phosphates ENEM	10	THERA M PLUS TABS	20	topiramate TABS	4
SOLFIBER POWD	10	THERA TABS	22	trazodone hcl TABS 100 MG	5
SOLO TABS	19	THERABETIC MULTI-VITAMIN TABS	20	trazodone hcl TABS 150 MG	5
SPECTRAVITE TABS	19	THERAGRAN-M ADVANCED 50 PLUS TABS	20	trazodone hcl TABS 300 MG	5
SPRAVATO (56 MG DOSE)	5	THERAGRAN-M ADVANCED TABS .	20	trazodone hcl TABS 50 MG	5
SPRAVATO (84 MG DOSE)	5	20		trifluoperazine hcl TABS	8
STRESS FORMULA/ZINC/ENERGY TABS	22	THERAGRAN-M PREMIER 50 PLUS TABS	20	trihexyphenidyl hcl SOLN	7
STROVITE ONE TABS	19	THERAGRAN-M PREMIER TABS	20	trihexyphenidyl hcl TABS	7
SUBLOCADE SOSY	2	THERAGRAN-M TABS	20	TRILEPTAL SUSP (oxcarbazepine)	4
SUBOXONE FILM SL 0.5 MG-2 MG (buprenorphine hcl-naloxone hcl dihydrate)	2	THERA-M PLUS MV W/BETA-CAROT TABS	20	trimipramine maleate CAPS	6
SUBOXONE FILM SL 1 MG-4 MG (buprenorphine hcl-naloxone hcl dihydrate)	2	THERA-M TABS	20	TRIPLE OMEGA-3-6-9 CAPS	1
SUBOXONE FILM SL 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate)	2	THERAMILL FORTE CAPS	20	TRUE MULTIVITAMIN TABS	22
SUBOXONE FILM SL 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate)	2	THERANATAL LACTATION ONE CAPS	20	T-VITES TABS	20
SUPER ANTIOXIDANT CAPS	20	THERA-TABS M TABS	20	UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG ...	20
SUPER D-ZINC-SELENIUM-COPPER TABS	20	THERA-VITE MAX-M TABS	20	ULTRA BONEUP TABS	20
SUPER OMEGA-3 CAPS	1	THEREMS TABS	22	ULTRA OMEGA 3 CAPS	22
		THEREMS-M TABS	20	ULTRA OMEGA-3 FISH OIL CAPS	22
		thiamine hcl TABS	24	UNIFIBER	10
		thiamine mononitrate TABS 100 MG .	24	valproate sodium SOLN PO 250 MG/5ML	4
				valproic acid CAPS	4
				VENEXA FE TABS	20

VENEXA TABS	20	CAPS	21	ziprasidone hcl 20 MG, 40 MG, 60 MG	7
venlafaxine hcl CP24 150 MG	5	VITEYES CLASSIC MACULAR SUPPOR CAPS	21	ziprasidone hcl 80 MG	7
venlafaxine hcl CP24 37.5 MG, 75 MG	5	VITEYES CLASSIC MULTIVITAMIN TABS	21	zolpidem tartrate TABS 10 MG	10
venlafaxine hcl TABS 25 MG	6	VITEYES CLASSIC+OMEGA-3 CAPS	21	zolpidem tartrate TABS 5 MG	10
venlafaxine hcl TABS 37.5 MG, 50 MG, 100 MG	6	VITEYES OPTIC NERVE SUPPORT TABS	21	zolpidem tartrate TBCR	10
venlafaxine hcl TABS 75 MG	6	VITRAMYN TABS	21	ZURZUVAE	5
VENTRIXYL FE TABS	20	VITRANOL FE TABS	21		
VENTRIXYL TABS	20	VITRANOL TABS	21		
VISION HEALTH CAPS	20	VITREXATE FE TABS	21		
VISION OPTIMIZER CAPS	20	VITREXATE TABS	21		
VISTA ADVANCED AREDS2 FORMULA CAPS	20	VITREXYL + IRON TABS	21		
VISTA ADVANCED DRY EYE FORMULA CAPS	20	VITREXYL TABS	21		
VITABASIC COMPLETE TABS ...	21	VITRUM 50+ ADULT-MULTI TABS 21			
VITABASIC SENIOR TABS	21	VITRUM 50+ SENIOR MULTI TABS . 21			
VITABEX CAPS	21	VIVITROL	6		
VITABEX PLUS CAPS	21	VYVANSE CAPS	1		
VITACORE TABS	21	WAKIX	1		
VITAMIN D3 COMPLETE TABS ..	21	WAL-SLEEP Z LIQUID SHOTS LIQD	10		
vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG	23	WELLFOLA TABS	21		
vitamin e CAPS 180 MG, 400 UNIT, 100 UNIT, 180 MG, 200 UNIT, 400 UNIT	23	WOMENS 50+ MULTI VITAMIN TABS	21		
VITAMIN E CAPS	23	WOMENS 50+ MULTI VITAMIN/MIN TABS	21		
VITAMIN E CHEW	23	WOMENS MULTI VITAMIN & MINERAL TABS	21		
VITASANA TABS	21	YELETS TEENAGE FORMULA TABS	21		
VITATRUM TABS	21				
VITEYES CLASSIC ADVANCED					