

DRUGS THAT HAVE QUANTITY LIMITS

Liberty Health Advantage (HMO-POS) utilizes quantity limits for certain medications, and will only cover the medications listed below up to the specified amounts. Quantity limitations are placed on medications to ensure appropriate safeguards and utilization. You should contact us to ask us for a quantity limit exception. **When you are requesting a quantity limit exception you should submit a statement from your physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescribing physician's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get your prescribing physician's supporting statement.

Your physician must submit a statement supporting your quantity limit exception request. In order to help us make a decision more quickly, you should include supporting medical information from your doctor when you submit your exception request.

What if I have additional questions?

You can call us at: 1-800-546-5677 (seven days a week, 24 hours a day) if you have any additional questions. If you have a hearing or speech impairment, please call us at TTY 1-866-706-4757.

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| ABILIFY SOL1MG/ML | 4 | 900 | 30 |
| ABILIFY TAB10MG | 4 | 30 | 30 |
| ABILIFY TAB15MG | 4 | 30 | 30 |
| ABILIFY TAB20MG | 4 | 30 | 30 |
| ABILIFY TAB2MG | 4 | 30 | 30 |
| ABILIFY TAB30MG | 4 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| ABILIFY TAB5MG | 4 | 30 | 30 |
| ABILIFY DISCTAB10MG | 4 | 60 | 30 |
| ABILIFY DISCTAB15MG | 4 | 60 | 30 |
| ACTONEL TAB150MG | 4 | 5 | 30 |
| ACTONEL TAB30MG | 4 | 5 | 30 |
| ACTONEL TAB35MG | 4 | 5 | 30 |
| ACTONEL TAB5MG | 4 | 30 | 30 |
| ACTOPLUS METTAB15/500MG | 4 | 90 | 30 |
| ACTOPLUS METTAB15/850MG | 4 | 90 | 30 |
| ACTOS TAB15MG | 4 | 30 | 30 |
| ACTOS TAB30MG | 4 | 30 | 30 |
| ACTOS TAB45MG | 4 | 30 | 30 |
| ADCIRCA TAB20MG | 5 | 60 | 30 |
| ADVAIR DISKUAER100/50 | 3 | 60 | 30 |
| ADVAIR DISKUAER250/50 | 3 | 60 | 30 |
| ADVAIR DISKUAER500/50 | 3 | 60 | 30 |
| ADVAIR HFA AER115/21 | 3 | 12 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|----------------------|------------|-----------------------|---------------------|
| ADVAIR HFA AER230/21 | 3 | 12 | 30 |
| ADVAIR HFA AER45/21 | 3 | 12 | 30 |
| ADVICOR TAB1000-20 | 4 | 30 | 30 |
| ADVICOR TAB1000-40 | 4 | 30 | 30 |
| ADVICOR TAB500-20MG | 4 | 30 | 30 |
| ADVICOR TAB750-20MG | 4 | 30 | 30 |
| AFINITOR TAB10MG | 5 | 60 | 30 |
| AFINITOR TAB2.5MG | 5 | 60 | 30 |
| AFINITOR TAB5MG | 5 | 60 | 30 |
| ALENDRONATE TAB10MG | 1 | 120 | 30 |
| ALENDRONATE TAB35MG | 1 | 5 | 30 |
| ALENDRONATE TAB40MG | 1 | 30 | 30 |
| ALENDRONATE TAB5MG | 1 | 240 | 30 |
| ALENDRONATE TAB70MG | 1 | 5 | 30 |
| ALORA DIS0.025MG | 4 | 8 | 28 |
| ALORA DIS0.05MG | 4 | 8 | 28 |
| ALORA DIS0.075MG | 4 | 8 | 28 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| ALORA DIS0.1MG | 4 | 8 | 28 |
| ALOXI INJ0.25MG/5 | 4 | 5 | 1 |
| AMLOD/BENAZPCAP10-20MG | 2 | 30 | 30 |
| AMLOD/BENAZPCAP10-40MG | 2 | 30 | 30 |
| AMLOD/BENAZPCAP2.5-10MG | 2 | 30 | 30 |
| AMLOD/BENAZPCAP5-10MG | 2 | 30 | 30 |
| AMLOD/BENAZPCAP5-20MG | 2 | 30 | 30 |
| AMLOD/BENAZPCAP5-40MG | 2 | 30 | 30 |
| AMLODIPINE TAB10MG | 2 | 30 | 30 |
| AMLODIPINE TAB2.5MG | 2 | 30 | 30 |
| AMLODIPINE TAB5MG | 2 | 30 | 30 |
| AMTURNIDE300TAB-5-12.5 | 3 | 30 | 30 |
| AMTURNIDE300TAB-5-25MG | 3 | 30 | 30 |
| ANASTROZOLE TAB1MG | 2 | 30 | 30 |
| ANDRODERM DIS2.5MG/24 | 4 | 30 | 30 |
| ANDRODERM DIS5MG/24HR | 4 | 30 | 30 |
| ANDROGEL GEL1%(50MG) | 4 | 300 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| ANZEMET INJ20MG/ML | 4 | 50 | 1 |
| ANZEMET TAB100MG | 4 | 1 | 1 |
| ANZEMET TAB50MG | 4 | 1 | 1 |
| APAP/CODEINETAB300-15MG | 2 | 400 | 30 |
| APAP/CODEINETAB300-30MG | 2 | 400 | 30 |
| APAP/CODEINETAB300-60MG | 2 | 400 | 30 |
| APIDRA INJSOLOSTAR | 3 | 30 | 30 |
| APIDRA INJU-100 | 4 | 30 | 30 |
| APTIVUS SOL | 4 | 300 | 30 |
| ARANESP INJ100MCG | 4 | 4 | 28 |
| ARANESP INJ100MCG | 4 | 2 | 28 |
| ARANESP INJ150MCG | 5 | 1.2 | 28 |
| ARANESP INJ200MCG | 5 | 4 | 28 |
| ARANESP INJ200MCG | 5 | 1.6 | 28 |
| ARANESP INJ25MCG | 4 | 1.68 | 28 |
| ARANESP INJ25MCG | 4 | 4 | 28 |
| ARANESP INJ300MCG | 5 | 4 | 28 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| ARANESP INJ300MCG | 5 | 2.4 | 28 |
| ARANESP INJ40MCG | 4 | 1.6 | 28 |
| ARANESP INJ40MCG | 4 | 4 | 28 |
| ARANESP INJ500MCG | 5 | 4 | 28 |
| ARANESP INJ60MCG | 4 | 4 | 28 |
| ARANESP INJ60MCG | 4 | 1.2 | 28 |
| ARIXTRA SOL10/0.8 | 5 | 24 | 30 |
| ARIXTRA SOL2.5/0.5 | 4 | 15 | 30 |
| ARIXTRA SOL5.0/0.4 | 5 | 12 | 30 |
| ARIXTRA SOL7.5/0.6 | 5 | 18 | 30 |
| ASACOL HD TAB800MG | 4 | 180 | 30 |
| ASMANEX 120 AER220MCG | 4 | 0.48 | 30 |
| ASMANEX 14 AER220MCG | 4 | 0.96 | 30 |
| ASMANEX 30 AER220MCG | 4 | 0.48 | 30 |
| ASMANEX 60 AER220MCG | 4 | 0.48 | 30 |
| ASTEPRO SPR0.15% | 4 | 60 | 30 |
| ATACAND TAB16MG | 4 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| ATACAND TAB32MG | 4 | 30 | 30 |
| ATACAND TAB4MG | 4 | 30 | 30 |
| ATACAND TAB8MG | 4 | 30 | 30 |
| ATACAND HCT TAB16-12.5 | 4 | 30 | 30 |
| ATACAND HCT TAB32-12.5 | 4 | 30 | 30 |
| ATACAND HCT TAB32-25MG | 4 | 30 | 30 |
| ATROVENT HFAAER17MCG | 4 | 25.8 | 30 |
| AVODART CAP0.5MG | 3 | 30 | 30 |
| AVONEX KIT30MCG | 5 | 4 | 28 |
| AVONEX PREFLKIT30MCG | 5 | 4 | 28 |
| AZITHROMYCINSUS100/5ML | 2 | 30 | 5 |
| AZITHROMYCINSUS200/5ML | 2 | 90 | 5 |
| AZITHROMYCINTAB250MG | 2 | 6 | 5 |
| AZITHROMYCINTAB500MG | 2 | 6 | 5 |
| AZITHROMYCINTAB600MG | 2 | 6 | 1 |
| BANZEL SUS40MG/ML | 4 | 2400 | 30 |
| BANZEL TAB200MG | 4 | 240 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| BANZEL TAB400MG | 4 | 240 | 30 |
| BARACLUDE SOL.05MG/ML | 4 | 600 | 30 |
| BARACLUDE TAB0.5MG | 5 | 30 | 30 |
| BARACLUDE TAB1MG | 5 | 30 | 30 |
| BECONASE AQ SUS0.042% | 4 | 50 | 30 |
| BETASERON INJ0.3MG | 5 | 15 | 30 |
| BICALUTAMIDETAB50MG | 2 | 30 | 30 |
| BUDEPRION TAB100MG SR | 2 | 60 | 30 |
| BUDEPRION TAB150MG SR | 2 | 90 | 30 |
| BUDEPRION XLTAB150MG | 2 | 30 | 30 |
| BUDEPRION XLTAB300MG | 2 | 30 | 30 |
| BUPROBAN TAB150MG | 2 | 90 | 30 |
| BUPROPION TAB100MG | 2 | 120 | 30 |
| BUPROPION TAB100MG SR | 2 | 60 | 30 |
| BUPROPION TAB150MG SR | 2 | 90 | 30 |
| BUPROPION TAB200MG SR | 2 | 30 | 30 |
| BUPROPION TAB75MG | 2 | 180 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| BUTORPHANOL SOL10MG/ML | 2 | 10 | 30 |
| BYETTA INJ10MCG | 4 | 2.4 | 30 |
| BYETTA INJ5MCG | 4 | 2.4 | 30 |
| CARVEDILOL TAB12.5MG | 1 | 60 | 30 |
| CARVEDILOL TAB25MG | 1 | 60 | 30 |
| CARVEDILOL TAB3.125MG | 1 | 60 | 30 |
| CARVEDILOL TAB6.25MG | 1 | 60 | 30 |
| CELEBREX CAP100MG | 3 | 60 | 30 |
| CELEBREX CAP200MG | 3 | 60 | 30 |
| CELEBREX CAP400MG | 3 | 60 | 30 |
| CELEBREX CAP50MG | 3 | 60 | 30 |
| CHANTIX PAK0.5& 1MG | 4 | 60 | 30 |
| CHANTIX TAB0.5MG | 4 | 60 | 30 |
| CHANTIX TAB1MG | 4 | 60 | 30 |
| CITALOPRAM TAB10MG | 1 | 30 | 30 |
| CITALOPRAM TAB20MG | 1 | 30 | 30 |
| CITALOPRAM TAB40MG | 1 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| CLARITHROMYCTAB250MG | 2 | 28 | 1 |
| CLARITHROMYCTAB500MG | 2 | 28 | 1 |
| CLARITHROMYCTAB500MG ER | 2 | 28 | 1 |
| CLONIDINE DIS0.1/24HR | 2 | 4 | 28 |
| CLONIDINE DIS0.2/24HR | 2 | 4 | 28 |
| CLONIDINE DIS0.3/24HR | 2 | 4 | 28 |
| CLOZAPINE TAB100MG | 1 | 120 | 30 |
| CLOZAPINE TAB200MG | 1 | 120 | 30 |
| CLOZAPINE TAB25MG | 1 | 120 | 30 |
| CLOZAPINE TAB50MG | 1 | 120 | 30 |
| CO-GESIC TAB500-5MG | 2 | 240 | 30 |
| COLCRYS TAB0.6MG | 4 | 120 | 30 |
| COMBIVENT AER | 4 | 29.4 | 30 |
| COMTAN TAB200MG | 3 | 240 | 30 |
| COPAXONE KIT20MG/ML | 5 | 30 | 30 |
| CRESTOR TAB10MG | 3 | 30 | 30 |
| CRESTOR TAB20MG | 3 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| CRESTOR TAB40MG | 3 | 30 | 30 |
| CRESTOR TAB5MG | 3 | 30 | 30 |
| CYMBALTA CAP20MG | 3 | 60 | 30 |
| CYMBALTA CAP30MG | 3 | 30 | 30 |
| CYMBALTA CAP60MG | 3 | 30 | 30 |
| DENAVIR CRE1% | 4 | 1.5 | 28 |
| DIOVAN TAB160MG | 3 | 30 | 30 |
| DIOVAN TAB320MG | 3 | 30 | 30 |
| DIOVAN TAB40MG | 3 | 30 | 30 |
| DIOVAN TAB80MG | 3 | 30 | 30 |
| DIOVAN HCT TAB160/12.5 | 3 | 30 | 30 |
| DIOVAN HCT TAB160/25MG | 3 | 30 | 30 |
| DIOVAN HCT TAB320/12.5 | 3 | 30 | 30 |
| DIOVAN HCT TAB320/25MG | 3 | 30 | 30 |
| DIOVAN HCT TAB80/12.5 | 3 | 30 | 30 |
| DONEPEZIL TAB10MG | 2 | 30 | 30 |
| DONEPEZIL TAB5MG | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| DONEPEZIL TABODT 10MG | 2 | 30 | 30 |
| DONEPEZIL TABODT 5MG | 2 | 30 | 30 |
| DOXAZOSIN TAB1MG | 1 | 30 | 30 |
| DOXAZOSIN TAB2MG | 1 | 30 | 30 |
| DOXAZOSIN TAB4MG | 1 | 30 | 30 |
| DOXAZOSIN TAB8MG | 1 | 60 | 30 |
| EDURANT TAB25MG | 5 | 30 | 30 |
| EFFIENT TAB10MG | 3 | 30 | 30 |
| EFFIENT TAB5MG | 3 | 30 | 30 |
| ELIDEL CRE1% | 4 | 30 | 1 |
| EMEND CAP125MG | 3 | 1 | 1 |
| EMEND CAP40MG | 3 | 1 | 1 |
| EMEND CAP80MG | 3 | 2 | 2 |
| EMEND PAK80 & 125 | 3 | 3 | 3 |
| EMSAM DIS12MG/24H | 4 | 30 | 30 |
| EMSAM DIS6MG/24HR | 4 | 30 | 30 |
| EMSAM DIS9MG/24HR | 4 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| ENABLEX TAB15MG | 3 | 30 | 30 |
| ENABLEX TAB7.5MG | 3 | 30 | 30 |
| ENBREL INJ25/0.5ML | 5 | 8 | 28 |
| ENBREL INJ25MG | 5 | 16 | 28 |
| ENBREL INJ50MG/ML | 5 | 8 | 28 |
| ENDOCET TAB10-325MG | 2 | 360 | 30 |
| ENDOCET TAB10-650MG | 2 | 180 | 30 |
| ENDOCET TAB5-325MG | 2 | 360 | 30 |
| ENDOCET TAB7.5-325M | 2 | 360 | 30 |
| ENDOCET TAB7.5-500M | 2 | 240 | 30 |
| ENDODAN TAB | 2 | 360 | 30 |
| ENOXAPARIN INJ100MG/ML | 5 | 28 | 30 |
| ENOXAPARIN INJ120/0.8 | 2 | 22.4 | 30 |
| ENOXAPARIN INJ150MG/ML | 5 | 28 | 30 |
| ENOXAPARIN INJ30/0.3ML | 4 | 8.4 | 30 |
| ENOXAPARIN INJ40/0.4ML | 4 | 11.2 | 30 |
| ENOXAPARIN INJ60/0.6ML | 4 | 16.8 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| ENOXAPARIN INJ80/0.8ML | 4 | 22.4 | 30 |
| EPIPEN 2-PAKINJ0.3MG | 4 | 2 | 1 |
| EPIPEN-JR INJ2-PAK | 4 | 2 | 1 |
| EPOGEN INJ2000/ML | 4 | 12 | 28 |
| EPOGEN INJ3000/ML | 4 | 12 | 28 |
| EPOGEN INJ4000/ML | 4 | 12 | 28 |
| ESTRADERM DIS0.05MG | 4 | 8 | 28 |
| ESTRADERM DIS0.1MG | 4 | 8 | 28 |
| ESTRADIOL DIS0.025MG | 1 | 4 | 28 |
| ESTRADIOL DIS0.0375MG | 1 | 4 | 28 |
| ESTRADIOL DIS0.05MG | 1 | 4 | 28 |
| ESTRADIOL DIS0.06MG | 1 | 4 | 28 |
| ESTRADIOL DIS0.075MG | 1 | 4 | 28 |
| ESTRADIOL DIS0.1MG | 1 | 4 | 28 |
| ESTRING MIS2MG | 4 | 1 | 90 |
| EVISTA TAB60MG | 3 | 30 | 30 |
| EXELON SOL2MG/ML | 3 | 180 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| EXFORGE TAB10-160MG | 3 | 30 | 30 |
| EXFORGE TAB10-320MG | 3 | 30 | 30 |
| EXFORGE TAB5-160MG | 3 | 30 | 30 |
| EXFORGE TAB5-320MG | 3 | 30 | 30 |
| EXFORGEH/10-TAB160-12.5 | 3 | 30 | 30 |
| EXFORGEH/10-TAB160-25 | 3 | 30 | 30 |
| EXFORGEH/10-TAB320-25 | 3 | 30 | 30 |
| EXFORGEH/5- TAB160-12.5 | 3 | 30 | 30 |
| EXFORGEH/5- TAB160-25 | 3 | 30 | 30 |
| FAMCICLOVIR TAB125MG | 1 | 21 | 10 |
| FAMCICLOVIR TAB250MG | 1 | 60 | 30 |
| FAMCICLOVIR TAB500MG | 1 | 21 | 7 |
| FANAPT PAK | 4 | 60 | 30 |
| FANAPT TAB10MG | 4 | 60 | 30 |
| FANAPT TAB12MG | 4 | 60 | 30 |
| FANAPT TAB1MG | 4 | 60 | 30 |
| FANAPT TAB2MG | 4 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|----------------------|------------|-----------------------|---------------------|
| FANAPT TAB4MG | 4 | 60 | 30 |
| FANAPT TAB6MG | 4 | 60 | 30 |
| FANAPT TAB8MG | 4 | 60 | 30 |
| FAZACLO TAB100MG | 4 | 270 | 30 |
| FAZACLO TAB12.5MG | 4 | 90 | 30 |
| FAZACLO TAB150MG | 4 | 180 | 30 |
| FAZACLO TAB200MG | 4 | 120 | 30 |
| FAZACLO TAB25MG | 4 | 270 | 30 |
| FENOFIBRATE CAP134MG | 2 | 30 | 30 |
| FENOFIBRATE CAP200MG | 2 | 30 | 30 |
| FENOFIBRATE CAP67MG | 2 | 30 | 30 |
| FENOFIBRATE TAB160MG | 2 | 30 | 30 |
| FENOFIBRATE TAB54MG | 2 | 30 | 30 |
| FENTANYL DIS100MCG/H | 2 | 30 | 30 |
| FENTANYL DIS12MCG/HR | 2 | 30 | 30 |
| FENTANYL DIS25MCG/HR | 2 | 30 | 30 |
| FENTANYL DIS50MCG/HR | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| FENTANYL DIS75MCG/HR | 2 | 30 | 30 |
| FENTANYL OT LOZ1200MCG | 2 | 120 | 30 |
| FENTANYL OT LOZ1600MCG | 2 | 120 | 30 |
| FENTANYL OT LOZ200MCG | 2 | 120 | 30 |
| FENTANYL OT LOZ400MCG | 2 | 120 | 30 |
| FENTANYL OT LOZ600MCG | 2 | 120 | 30 |
| FENTANYL OT LOZ800MCG | 2 | 120 | 30 |
| FEXOFENADINETAB180MG | 2 | 30 | 30 |
| FEXOFENADINETAB30MG | 2 | 60 | 30 |
| FEXOFENADINETAB60MG | 2 | 60 | 30 |
| FINASTERIDE TAB5MG | 2 | 30 | 30 |
| FIRMAGON INJ120MG | 4 | 2 | 30 |
| FLOVENT DISKAER100MCG | 3 | 120 | 30 |
| FLOVENT DISKAER250MCG | 3 | 300 | 30 |
| FLOVENT DISKAER50MCG | 3 | 120 | 30 |
| FLOVENT HFA AER110MCG | 3 | 24 | 30 |
| FLOVENT HFA AER220MCG | 3 | 24 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| FLOVENT HFA AER44MCG | 3 | 21.2 | 30 |
| FLUCONAZOLE TAB150MG | 1 | 2 | 7 |
| FLUNISOLIDE SPR0.025% | 1 | 25 | 30 |
| FLUOXETINE CAP10MG | 1 | 30 | 30 |
| FLUOXETINE CAP40MG | 1 | 60 | 30 |
| FLUOXETINE TAB10MG | 1 | 30 | 30 |
| FLUTICASONE SPR50MCG | 1 | 16 | 30 |
| FLUVOXAMINE TAB100MG | 2 | 90 | 30 |
| FLUVOXAMINE TAB25MG | 2 | 45 | 30 |
| FLUVOXAMINE TAB50MG | 2 | 60 | 30 |
| FORADIL CAPAEROLIZE | 4 | 60 | 30 |
| FRAGMIN INJ10000/ML | 5 | 20 | 30 |
| FRAGMIN INJ12500UNT | 5 | 20 | 30 |
| FRAGMIN INJ15000UNT | 5 | 20 | 30 |
| FRAGMIN INJ18000UNT | 5 | 20 | 30 |
| FRAGMIN INJ2500/0.2 | 4 | 20 | 30 |
| FRAGMIN INJ25000/ML | 4 | 20 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| FRAGMIN INJ5000/0.2 | 4 | 20 | 30 |
| FRAGMIN INJ7500/0.3 | 5 | 20 | 30 |
| GABAPENTIN CAP100MG | 2 | 360 | 30 |
| GABAPENTIN CAP300MG | 2 | 360 | 30 |
| GABAPENTIN CAP400MG | 2 | 270 | 30 |
| GABAPENTIN TAB600MG | 2 | 180 | 30 |
| GABAPENTIN TAB800MG | 2 | 120 | 30 |
| GALANTAMINE CAP16MG ER | 2 | 30 | 30 |
| GALANTAMINE CAP24MG ER | 2 | 30 | 30 |
| GALANTAMINE CAP8MG ER | 2 | 30 | 30 |
| GALANTAMINE SOL4MG/ML | 2 | 180 | 30 |
| GEODON CAP20MG | 3 | 60 | 30 |
| GEODON CAP40MG | 3 | 60 | 30 |
| GEODON CAP60MG | 3 | 60 | 30 |
| GEODON CAP80MG | 3 | 60 | 30 |
| GLEEVEC TAB100MG | 5 | 90 | 30 |
| GLEEVEC TAB400MG | 5 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| GLIMEPIRIDE TAB1MG | 2 | 60 | 30 |
| GLIMEPIRIDE TAB2MG | 2 | 60 | 30 |
| GLIMEPIRIDE TAB4MG | 2 | 60 | 30 |
| GLIP/METFORMTAB2.5-250M | 2 | 240 | 30 |
| GLIP/METFORMTAB2.5-500M | 2 | 120 | 30 |
| GLIP/METFORMTAB5-500MG | 2 | 120 | 30 |
| GLIPIZIDE TAB10MG | 1 | 120 | 30 |
| GLIPIZIDE TAB5MG | 1 | 240 | 30 |
| GLIPIZIDE ERTAB10MG | 1 | 60 | 30 |
| GLIPIZIDE ERTAB2.5MG | 1 | 240 | 30 |
| GLIPIZIDE ERTAB5MG | 1 | 120 | 30 |
| GLUCAGEN INJHYPOKIT | 4 | 2 | 1 |
| GLUCAGON KIT1MG | 4 | 2 | 1 |
| GLYB/METFORMTAB1.25-250 | 2 | 240 | 30 |
| GLYB/METFORMTAB2.5-500 | 2 | 120 | 30 |
| GLYB/METFORMTAB5-500MG | 2 | 120 | 30 |
| GLYBURID MCRTAB1.5MG | 1 | 120 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| GLYBURID MCRTAB3MG | 1 | 60 | 30 |
| GLYBURID MCRTAB6MG | 1 | 30 | 30 |
| GLYBURIDE TAB1.25MG | 1 | 480 | 30 |
| GLYBURIDE TAB2.5MG | 1 | 240 | 30 |
| GLYBURIDE TAB5MG | 1 | 120 | 30 |
| GLYCRON TAB1.5MG | 1 | 240 | 30 |
| GLYCRON TAB3MG | 1 | 120 | 30 |
| GLYCRON TAB4.5MG | 1 | 90 | 30 |
| GLYCRON TAB6MG | 1 | 60 | 30 |
| GRANISETRON TAB1MG | 1 | 2 | 1 |
| HUMALOG INJ100/ML | 3 | 30 | 30 |
| HUMALOG KWIKINJ100/ML | 3 | 30 | 30 |
| HUMALOG MIX INJ50/50 | 3 | 30 | 30 |
| HUMALOG MIX INJ50/50KWP | 3 | 30 | 30 |
| HUMALOG MIX INJ75/25KWP | 3 | 30 | 30 |
| HUMALOG MIX SUS75/25 | 3 | 30 | 30 |
| HUMIRA KIT20MG/0.4 | 5 | 8 | 28 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| HUMIRA KIT40MG/0.8 | 5 | 8 | 28 |
| HUMIRA PEN KITCROHNS | 5 | 8 | 28 |
| HUMULIN INJ70/30 | 3 | 30 | 30 |
| HUMULIN N INJU-100 | 3 | 30 | 30 |
| HUMULIN N PNINJU-100 | 3 | 30 | 30 |
| HUMULIN PEN INJ70/30 | 3 | 30 | 30 |
| HUMULIN R INJU-100 | 3 | 30 | 30 |
| HUMULIN R INJU-500 | 3 | 30 | 30 |
| HYDROCO/APAPTAB10-325MG | 2 | 360 | 30 |
| HYDROCO/APAPTAB10-500MG | 2 | 240 | 30 |
| HYDROCO/APAPTAB10-650MG | 2 | 180 | 30 |
| HYDROCO/APAPTAB10-660MG | 2 | 180 | 30 |
| HYDROCO/APAPTAB10-750MG | 2 | 150 | 30 |
| HYDROCO/APAPTAB2.5-500 | 2 | 240 | 30 |
| HYDROCO/APAPTAB5-325MG | 2 | 360 | 30 |
| HYDROCO/APAPTAB5-500MG | 2 | 240 | 30 |
| HYDROCO/APAPTAB7.5-325 | 2 | 360 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| HYDROCO/APAPTAB7.5-500 | 2 | 240 | 30 |
| HYDROCO/APAPTAB7.5-650 | 2 | 180 | 30 |
| HYDROCO/APAPTAB7.5-750 | 2 | 150 | 30 |
| HYDROCOD/IBUTAB7.5-200 | 2 | 480 | 30 |
| HYDROCODONE/SOLAPAP | 2 | 3600 | 30 |
| INNOHEP INJ20000/ML | 4 | 20 | 30 |
| INTELENCE TAB100MG | 4 | 120 | 30 |
| INVEGA TAB1.5MG | 4 | 60 | 30 |
| INVEGA TAB3MG | 4 | 30 | 30 |
| INVEGA TAB6MG | 4 | 60 | 30 |
| INVEGA TAB9MG | 4 | 30 | 30 |
| IPRATROPIUM SPR0.03% | 2 | 30 | 30 |
| IPRATROPIUM SPR0.06% | 2 | 30 | 30 |
| IRESSA TAB250MG | 5 | 30 | 30 |
| JALYN CAP | 3 | 30 | 30 |
| JANUMET TAB50-1000 | 4 | 60 | 30 |
| JANUMET TAB50-500MG | 4 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| JANUVIA TAB100MG | 4 | 30 | 30 |
| JANUVIA TAB25MG | 4 | 30 | 30 |
| JANUVIA TAB50MG | 4 | 30 | 30 |
| KEPPRA XR TAB500MG | 4 | 180 | 30 |
| KEPPRA XR TAB750MG | 4 | 120 | 30 |
| LANSOPRAZOLECAP15MG | 2 | 30 | 30 |
| LANSOPRAZOLECAP30MG | 2 | 30 | 30 |
| LANSOPRAZOLETAB15MG ODT | 2 | 30 | 30 |
| LANSOPRAZOLETAB30MG ODT | 2 | 30 | 30 |
| LANTUS INJ100/ML | 3 | 30 | 30 |
| LANTUS INJSOLOSTAR | 3 | 30 | 30 |
| LATANOPROST SOL0.005% | 2 | 5 | 30 |
| LATUDA TAB40MG | 4 | 30 | 30 |
| LATUDA TAB80MG | 4 | 30 | 30 |
| LEFLUNOMIDE TAB10MG | 2 | 30 | 30 |
| LEFLUNOMIDE TAB20MG | 2 | 30 | 30 |
| LETROZOLE TAB2.5MG | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| LEVEMIR INJ | 3 | 30 | 30 |
| LIDODERM DIS5% | 4 | 90 | 30 |
| LOSARTAN POTTAB100MG | 2 | 30 | 30 |
| LOSARTAN POTTAB25MG | 2 | 30 | 30 |
| LOSARTAN POTTAB50MG | 2 | 30 | 30 |
| LOSARTAN/HCTTAB100-12.5 | 2 | 30 | 30 |
| LOSARTAN/HCTTAB100-25 | 2 | 30 | 30 |
| LOSARTAN/HCTTAB50-12.5 | 2 | 30 | 30 |
| LOTRONEX TAB0.5MG | 3 | 60 | 30 |
| LOTRONEX TAB1MG | 3 | 60 | 30 |
| LOVASTATIN TAB10MG | 2 | 30 | 30 |
| LOVASTATIN TAB20MG | 2 | 30 | 30 |
| LOVASTATIN TAB40MG | 2 | 60 | 30 |
| LOVENOX INJ300/3ML | 4 | 84 | 30 |
| LUMIGAN SOL0.01% | 4 | 7.5 | 30 |
| LUMIGAN SOL0.03% | 4 | 7.5 | 30 |
| MARGESIC-H CAP500-5MG | 2 | 240 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| MEDROXYPR ACINJ150MG/ML | 4 | 1 | 90 |
| MELOXICAM TAB15MG | 2 | 30 | 30 |
| MELOXICAM TAB7.5MG | 2 | 30 | 30 |
| METFORMIN TAB1000MG | 1 | 90 | 30 |
| METFORMIN TAB500MG | 1 | 150 | 30 |
| METFORMIN TAB500MG ER | 1 | 120 | 30 |
| METFORMIN TAB750MG ER | 1 | 90 | 30 |
| METFORMIN TAB850MG | 1 | 90 | 30 |
| METOPROLOL TAB100MG ER | 2 | 30 | 30 |
| METOPROLOL TAB200MG ER | 2 | 60 | 30 |
| METOPROLOL TAB25MG ER | 2 | 30 | 30 |
| METOPROLOL TAB50MG ER | 2 | 30 | 30 |
| MICONAZOLE 3SUP200MG | 2 | 3 | 3 |
| MIRTAZAPINE TAB15MG | 2 | 30 | 30 |
| MIRTAZAPINE TAB15MG ODT | 2 | 30 | 30 |
| MIRTAZAPINE TAB30MG | 2 | 30 | 30 |
| MIRTAZAPINE TAB30MG ODT | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| MIRTAZAPINE TAB45MG | 2 | 30 | 30 |
| MIRTAZAPINE TAB45MG ODT | 2 | 30 | 30 |
| MIRTAZAPINE TAB7.5MG | 2 | 30 | 30 |
| MORPHINE SULTAB100MG ER | 1 | 120 | 30 |
| MORPHINE SULTAB15MG ER | 1 | 120 | 30 |
| MORPHINE SULTAB200MG ER | 1 | 120 | 30 |
| MORPHINE SULTAB30MG ER | 1 | 120 | 30 |
| MORPHINE SULTAB60MG ER | 1 | 120 | 30 |
| MULTAQ TAB400MG | 4 | 60 | 30 |
| NAMENDA SOL10MG/5ML | 3 | 360 | 30 |
| NAMENDA TAB10MG | 3 | 60 | 30 |
| NAMENDA TAB5-10MG | 3 | 60 | 30 |
| NAMENDA TAB5MG | 3 | 60 | 30 |
| NARATRIPTAN TAB1MG | 2 | 9 | 30 |
| NARATRIPTAN TAB2.5MG | 2 | 9 | 30 |
| NATEGLINIDE TAB120MG | 2 | 90 | 30 |
| NATEGLINIDE TAB60MG | 2 | 90 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| NEULASTA INJ6MG/0.6M | 5 | 2 | 30 |
| NEUMEGA INJ5MG | 5 | 21 | 21 |
| NEXAVAR TAB200MG | 5 | 120 | 30 |
| NIASPAN TAB1000 ER | 3 | 60 | 30 |
| NIASPAN TAB500MG ER | 3 | 60 | 30 |
| NIASPAN TAB750MG ER | 3 | 60 | 30 |
| NICOTROL NS SPR10MG/ML | 4 | 40 | 30 |
| NOVOLIN INJ70/30 | 4 | 30 | 30 |
| NOVOLIN N INJU-100 | 4 | 30 | 30 |
| NOVOLIN R INJU-100 | 4 | 30 | 30 |
| NOVOLOG INJ100/ML | 4 | 30 | 30 |
| NOVOLOG INJFLEXPEN | 4 | 30 | 30 |
| NOVOLOG MIX INJ70/30 | 4 | 30 | 30 |
| NOVOLOG MIX INJFLEXPEN | 4 | 30 | 30 |
| OMEPRAZOLE CAP10MG | 1 | 60 | 30 |
| OMEPRAZOLE CAP20MG | 1 | 60 | 30 |
| OMEPRAZOLE CAP40MG | 1 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| ONDANSETRON SOL4MG/5ML | 2 | 150 | 5 |
| ONDANSETRON TAB24MG | 2 | 1 | 1 |
| ONDANSETRON TAB4MG | 2 | 12 | 5 |
| ONDANSETRON TAB4MG ODT | 2 | 12 | 5 |
| ONDANSETRON TAB8MG | 2 | 12 | 5 |
| ONDANSETRON TAB8MG ODT | 2 | 12 | 5 |
| OXYBUTYNIN TAB10MG ER | 2 | 90 | 30 |
| OXYBUTYNIN TAB15MG ER | 2 | 60 | 30 |
| OXYBUTYNIN TAB5MG ER | 2 | 180 | 30 |
| OXYCOD/APAP CAP5-500MG | 2 | 240 | 30 |
| OXYCOD/APAP TAB10-325MG | 2 | 360 | 30 |
| OXYCOD/APAP TAB10-650MG | 2 | 180 | 30 |
| OXYCOD/APAP TAB5-325MG | 2 | 360 | 30 |
| OXYCOD/APAP TAB7.5-325 | 2 | 360 | 30 |
| OXYCOD/APAP TAB7.5-500 | 2 | 240 | 30 |
| OXYCOD/ASA TAB | 2 | 360 | 30 |
| OXYCOD/ASA TAB | 2 | 360 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| OXYCONTIN TAB15MG CR | 3 | 90 | 30 |
| OXYCONTIN TAB30MG CR | 3 | 90 | 30 |
| OXYCONTIN TAB60MG CR | 3 | 90 | 30 |
| OXYTROL DIS3.9MG/24 | 4 | 8 | 28 |
| PANTOPRAZOLETAB20MG | 2 | 30 | 30 |
| PANTOPRAZOLETAB40MG | 2 | 30 | 30 |
| PAROXETIN ERTAB12.5MG | 2 | 150 | 30 |
| PAROXETIN ERTAB37.5MG | 2 | 60 | 30 |
| PAROXETINE SUS10MG/5ML | 2 | 946 | 30 |
| PAROXETINE TAB10MG | 2 | 30 | 30 |
| PAROXETINE TAB20MG | 2 | 30 | 30 |
| PAROXETINE TAB25MG ER | 2 | 90 | 30 |
| PAROXETINE TAB30MG | 2 | 30 | 30 |
| PAROXETINE TAB40MG | 2 | 30 | 30 |
| PEGASYS KIT | 5 | 2 | 28 |
| PEG-INTRON KIT120 RP | 5 | 4 | 28 |
| PEG-INTRON KIT150 RP | 5 | 4 | 28 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| PEG-INTRON KIT50MCG | 5 | 4 | 28 |
| PEG-INTRON KIT50MCG RP | 5 | 4 | 28 |
| PEG-INTRON KIT80MCG RP | 5 | 4 | 28 |
| PLAVIX TAB300MG | 4 | 30 | 30 |
| PLAVIX TAB75MG | 4 | 30 | 30 |
| PRAMIPEXOLE TAB0.125MG | 2 | 90 | 30 |
| PRAMIPEXOLE TAB0.25MG | 2 | 90 | 30 |
| PRAMIPEXOLE TAB0.5MG | 2 | 90 | 30 |
| PRAMIPEXOLE TAB0.75MG | 2 | 90 | 30 |
| PRAMIPEXOLE TAB1.5MG | 2 | 90 | 30 |
| PRAMIPEXOLE TAB1MG | 2 | 90 | 30 |
| PRAVASTATIN TAB10MG | 2 | 30 | 30 |
| PRAVASTATIN TAB20MG | 2 | 30 | 30 |
| PRAVASTATIN TAB40MG | 2 | 60 | 30 |
| PRAVASTATIN TAB80MG | 2 | 30 | 30 |
| PRISTIQ TAB100MG | 4 | 30 | 30 |
| PRISTIQ TAB50MG | 4 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| PROAIR HFA AER | 4 | 17 | 30 |
| PROCRIT INJ2000/ML | 3 | 12 | 28 |
| PROCRIT INJ3000/ML | 3 | 12 | 28 |
| PROCRIT INJ4000/ML | 3 | 12 | 28 |
| PROMACTA TAB25MG | 5 | 90 | 30 |
| PROMACTA TAB50MG | 5 | 90 | 30 |
| PROMACTA TAB75MG | 5 | 90 | 30 |
| PROTOPIC OIN0.03% | 4 | 30 | 1 |
| PROTOPIC OIN0.1% | 4 | 30 | 1 |
| PROVENTIL AERHFA | 4 | 13.4 | 30 |
| PROVIGIL TAB100MG | 3 | 60 | 30 |
| PROVIGIL TAB200MG | 3 | 60 | 30 |
| PULMICORT INH180MCG | 3 | 2 | 30 |
| PULMICORT INH90MCG | 3 | 2 | 30 |
| QVAR AER40MCG | 4 | 21.9 | 30 |
| QVAR AER80MCG | 4 | 21.9 | 30 |
| RAMIPRIL CAP1.25MG | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| RAMIPRIL CAP10MG | 2 | 60 | 30 |
| RAMIPRIL CAP2.5MG | 2 | 30 | 30 |
| RAMIPRIL CAP5MG | 2 | 30 | 30 |
| RANEXA TAB1000MG | 3 | 120 | 30 |
| RANEXA TAB500MG | 3 | 120 | 30 |
| REBIF INJ22/0.5 | 5 | 12 | 30 |
| REBIF INJ44/0.5 | 5 | 12 | 30 |
| REBIF TITRTNSOLPACK | 5 | 6 | 30 |
| REGRANEX GEL0.01% | 4 | 15 | 30 |
| RELENZA MISDISKHALE | 4 | 60 | 180 |
| RELPAX TAB20MG | 3 | 6 | 30 |
| RELPAX TAB40MG | 3 | 6 | 30 |
| REQUIP XL TAB12MG | 3 | 60 | 30 |
| REQUIP XL TAB2MG | 3 | 360 | 30 |
| REQUIP XL TAB4MG | 3 | 180 | 30 |
| REQUIP XL TAB8MG | 3 | 90 | 30 |
| RESTASIS EMU0.05% | 4 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| REVATIO TAB20MG | 5 | 90 | 30 |
| RHINOCORT SUSQUA | 3 | 17.2 | 30 |
| RISPERIDONE SOL1MG/ML | 2 | 480 | 30 |
| RISPERIDONE TAB0.25 ODT | 2 | 60 | 30 |
| RISPERIDONE TAB0.25MG | 2 | 60 | 30 |
| RISPERIDONE TAB0.5MG | 2 | 60 | 30 |
| RISPERIDONE TAB0.5MG OD | 2 | 60 | 30 |
| RISPERIDONE TAB1MG | 2 | 60 | 30 |
| RISPERIDONE TAB1MG ODT | 2 | 60 | 30 |
| RISPERIDONE TAB2MG | 2 | 60 | 30 |
| RISPERIDONE TAB2MG ODT | 2 | 60 | 30 |
| RISPERIDONE TAB3MG | 2 | 60 | 30 |
| RISPERIDONE TAB3MG ODT | 2 | 60 | 30 |
| RISPERIDONE TAB4MG | 2 | 120 | 30 |
| RISPERIDONE TAB4MG ODT | 2 | 120 | 30 |
| RIVASTIGMINECAP1.5MG | 2 | 60 | 30 |
| RIVASTIGMINECAP3MG | 2 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| RIVASTIGMINECAP4.5MG | 2 | 60 | 30 |
| RIVASTIGMINECAP6MG | 2 | 60 | 30 |
| ROXICET SOL5-325/5 | 2 | 1800 | 30 |
| ROXICET TAB5-325MG | 2 | 360 | 30 |
| ROXICET TAB5-500MG | 2 | 240 | 30 |
| SABRIL POW500MG | 5 | 180 | 30 |
| SABRIL TAB500MG | 5 | 180 | 30 |
| SANDOSTATIN KITLAR 10MG | 5 | 1 | 28 |
| SANDOSTATIN KITLAR 20MG | 5 | 2 | 28 |
| SANDOSTATIN KITLAR 30MG | 5 | 1 | 28 |
| SANTYL OIN250/GM | 4 | 30 | 1 |
| SAPHRIS SUB10MG | 4 | 60 | 30 |
| SAPHRIS SUB5MG | 4 | 60 | 30 |
| SEREVENT DISAER50MCG | 3 | 60 | 30 |
| SEROQUEL TAB100MG | 3 | 120 | 30 |
| SEROQUEL TAB200MG | 3 | 90 | 30 |
| SEROQUEL TAB25MG | 3 | 120 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| SEROQUEL TAB300MG | 3 | 90 | 30 |
| SEROQUEL TAB400MG | 3 | 60 | 30 |
| SEROQUEL TAB50MG | 3 | 120 | 30 |
| SEROQUEL XR TAB150MG | 3 | 30 | 30 |
| SEROQUEL XR TAB200MG | 3 | 30 | 30 |
| SEROQUEL XR TAB300MG | 3 | 60 | 30 |
| SEROQUEL XR TAB400MG | 3 | 60 | 30 |
| SEROQUEL XR TAB50MG | 3 | 60 | 30 |
| SERTRALINE CON20MG/ML | 2 | 300 | 30 |
| SERTRALINE TAB100MG | 2 | 60 | 30 |
| SERTRALINE TAB25MG | 2 | 30 | 30 |
| SERTRALINE TAB50MG | 2 | 30 | 30 |
| SIMCOR TAB1000-40 | 3 | 60 | 30 |
| SIMCOR TAB500-20MG | 3 | 60 | 30 |
| SIMCOR TAB500-40MG | 3 | 60 | 30 |
| SIMCOR TAB750-20MG | 3 | 60 | 30 |
| SIMVASTATIN TAB10MG | 1 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| SIMVASTATIN TAB20MG | 1 | 30 | 30 |
| SIMVASTATIN TAB40MG | 1 | 30 | 30 |
| SIMVASTATIN TAB5MG | 1 | 30 | 30 |
| SIMVASTATIN TAB80MG | 1 | 30 | 30 |
| SINGULAIR CHW4MG | 4 | 30 | 30 |
| SINGULAIR CHW5MG | 4 | 30 | 30 |
| SINGULAIR GRA4MG | 4 | 30 | 30 |
| SINGULAIR TAB10MG | 4 | 30 | 30 |
| SOLARAZE GEL3% W/W | 4 | 50 | 1 |
| SPIRIVA CAPHANDIHLR | 3 | 90 | 30 |
| STAGESIC CAP500-5MG | 2 | 240 | 30 |
| STRATTERA CAP100MG | 3 | 60 | 30 |
| STRATTERA CAP10MG | 3 | 60 | 30 |
| STRATTERA CAP18MG | 3 | 60 | 30 |
| STRATTERA CAP25MG | 3 | 60 | 30 |
| STRATTERA CAP40MG | 3 | 60 | 30 |
| STRATTERA CAP60MG | 3 | 60 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|------------------------|------------|-----------------------|---------------------|
| STRATTERA CAP80MG | 3 | 60 | 30 |
| SUBOXONE MIS2-0.5MG | 4 | 90 | 30 |
| SUBOXONE MIS8-2MG | 4 | 90 | 30 |
| SUBOXONE SUB2-0.5MG | 4 | 90 | 30 |
| SUBOXONE SUB8-2MG | 4 | 90 | 30 |
| SUMATRIPTAN INJ4MG/0.5 | 2 | 6 | 30 |
| SUMATRIPTAN INJ6MG/0.5 | 2 | 6 | 30 |
| SUMATRIPTAN TAB100MG | 2 | 9 | 30 |
| SUMATRIPTAN TAB25MG | 2 | 9 | 30 |
| SUMATRIPTAN TAB50MG | 2 | 9 | 30 |
| SYMBICORT AER160-4.5 | 3 | 10.2 | 30 |
| SYMBICORT AER80-4.5 | 3 | 6.9 | 30 |
| SYMBYAX CAP12-25MG | 3 | 30 | 30 |
| SYMBYAX CAP12-50MG | 3 | 30 | 30 |
| SYMBYAX CAP3-25MG | 3 | 30 | 30 |
| SYMBYAX CAP6-25MG | 3 | 30 | 30 |
| SYMBYAX CAP6-50MG | 3 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| SYMLIN INJ600MCG | 4 | 20 | 30 |
| TAMIFLU CAP30MG | 3 | 84 | 180 |
| TAMIFLU CAP45MG | 3 | 42 | 180 |
| TAMIFLU CAP75MG | 3 | 42 | 180 |
| TAMIFLU SUS12MG/ML | 3 | 900 | 180 |
| TAMSULOSIN CAP0.4MG | 2 | 60 | 30 |
| TARGRETIN GEL1% | 5 | 60 | 1 |
| TEKAMLO TAB150-10MG | 3 | 30 | 30 |
| TEKAMLO TAB150-5MG | 3 | 30 | 30 |
| TEKAMLO TAB300-10MG | 3 | 30 | 30 |
| TEKAMLO TAB300-5MG | 3 | 30 | 30 |
| TEKTURNA TAB150MG | 3 | 30 | 30 |
| TEKTURNA TAB300MG | 3 | 30 | 30 |
| TEKTURNA HCTTAB150-12.5 | 3 | 30 | 30 |
| TEKTURNA HCTTAB150-25MG | 3 | 30 | 30 |
| TEKTURNA HCTTAB300-12.5 | 3 | 30 | 30 |
| TEKTURNA HCTTAB300-25MG | 3 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| TERAZOSIN CAP10MG | 1 | 60 | 30 |
| TERAZOSIN CAP1MG | 1 | 30 | 30 |
| TERAZOSIN CAP2MG | 1 | 30 | 30 |
| TERAZOSIN CAP5MG | 1 | 30 | 30 |
| TERCONAZOLE CRE0.4% | 1 | 45 | 7 |
| TERCONAZOLE CRE0.8% | 1 | 20 | 3 |
| TERCONAZOLE SUP80MG | 1 | 3 | 3 |
| TOVIAZ TAB4MG | 4 | 30 | 30 |
| TOVIAZ TAB8MG | 4 | 30 | 30 |
| TRAMADL/APAPTAB37.5-325 | 2 | 240 | 30 |
| TRAMADOL HCLTAB100MG ER | 2 | 30 | 30 |
| TRAMADOL HCLTAB200MG ER | 2 | 30 | 30 |
| TRAMADOL HCLTAB50MG | 2 | 240 | 30 |
| TRILIPIX CAP135MG | 3 | 30 | 30 |
| TRILIPIX CAP45MG | 3 | 30 | 30 |
| TWINJECT INJ0.15MG | 4 | 4 | 2 |
| VALACYCLOVIRTAB1GM | 2 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| VALACYCLOVIR TAB500MG | 2 | 30 | 30 |
| VALTURNA TAB150-160 | 3 | 30 | 30 |
| VALTURNA TAB300-320 | 3 | 30 | 30 |
| VANDETANIB TAB100MG | 5 | 60 | 30 |
| VANDETANIB TAB300MG | 5 | 30 | 30 |
| VENLAFAXINE CAP150MG | 2 | 60 | 30 |
| VENLAFAXINE CAP37.5MG | 2 | 180 | 30 |
| VENLAFAXINE CAP75MG | 2 | 90 | 30 |
| VENLAFAXINE TAB100MG | 2 | 90 | 30 |
| VENLAFAXINE TAB150MG ER | 2 | 60 | 30 |
| VENLAFAXINE TAB225MG ER | 3 | 30 | 30 |
| VENLAFAXINE TAB25MG | 2 | 90 | 30 |
| VENLAFAXINE TAB37.5 ER | 2 | 180 | 30 |
| VENLAFAXINE TAB37.5MG | 2 | 90 | 30 |
| VENLAFAXINE TAB50MG | 2 | 90 | 30 |
| VENLAFAXINE TAB75MG | 2 | 150 | 30 |
| VENLAFAXINE TAB75MG ER | 2 | 90 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-------------------------|------------|-----------------------|---------------------|
| VENTOLIN HFAAER | 3 | 36 | 30 |
| VERAMYST SPR27.5MCG | 3 | 20 | 30 |
| VIIBRYD TAB10MG | 4 | 30 | 30 |
| VIIBRYD TAB20MG | 4 | 30 | 30 |
| VIIBRYD TAB40MG | 4 | 30 | 30 |
| VIMPAT INJ200MG/20 | 4 | 1200 | 30 |
| VIMPAT SOL10MG/ML | 4 | 1200 | 30 |
| VIMPAT TAB100MG | 4 | 60 | 30 |
| VIMPAT TAB150MG | 4 | 60 | 30 |
| VIMPAT TAB200MG | 4 | 60 | 30 |
| VIMPAT TAB50MG | 4 | 60 | 30 |
| VIVELLE-DOT DIS0.025MG | 4 | 8 | 28 |
| VIVELLE-DOT DIS0.0375MG | 4 | 8 | 28 |
| VIVELLE-DOT DIS0.05MG | 4 | 8 | 28 |
| VIVELLE-DOT DIS0.075MG | 4 | 8 | 28 |
| VIVELLE-DOT DIS0.1MG | 4 | 8 | 28 |
| VYTORIN TAB10-10MG | 4 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|-----------------------|------------|-----------------------|---------------------|
| VYTORIN TAB10-20MG | 4 | 30 | 30 |
| VYTORIN TAB10-40MG | 4 | 30 | 30 |
| VYTORIN TAB10-80MG | 4 | 30 | 30 |
| ZAFIRLUKAST TAB10MG | 2 | 60 | 30 |
| ZAFIRLUKAST TAB20MG | 2 | 60 | 30 |
| ZALEPLON CAP10MG | 2 | 60 | 30 |
| ZALEPLON CAP5MG | 2 | 30 | 30 |
| ZAZOLE CRE0.4% | 1 | 45 | 7 |
| ZAZOLE CRE0.8% | 1 | 20 | 3 |
| ZETIA TAB10MG | 4 | 30 | 30 |
| ZMAX SUS2GM | 4 | 60 | 1 |
| ZOLPIDEM TAB10MG | 2 | 30 | 30 |
| ZOLPIDEM TAB5MG | 2 | 30 | 30 |
| ZOLPIDEM ER TAB12.5MG | 2 | 30 | 30 |
| ZOLPIDEM TARTAB6.25MG | 2 | 30 | 30 |
| ZOMIG SPR5MG | 4 | 6 | 30 |
| ZOMIG TAB2.5MG | 4 | 6 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| ZOMIG TAB5MG | 4 | 6 | 30 |
| ZOMIG ZMT TAB2.5 MG | 4 | 6 | 30 |
| ZOMIG ZMT TAB5MG | 4 | 6 | 30 |
| ZORTRESS TAB0.25MG | 4 | 60 | 30 |
| ZORTRESS TAB0.5MG | 5 | 60 | 30 |
| ZORTRESS TAB0.75MG | 5 | 60 | 30 |
| ZOVIRAX CRE5% | 4 | 10 | 30 |
| ZOVIRAX OIN5% | 4 | 30 | 30 |
| ZYFLO CR TAB600MG | 4 | 120 | 30 |
| ZYPREXA INJ10MG | 4 | 30 | 30 |
| ZYPREXA TAB10MG | 3 | 30 | 30 |
| ZYPREXA TAB15MG | 3 | 30 | 30 |
| ZYPREXA TAB2.5MG | 3 | 30 | 30 |
| ZYPREXA TAB20MG | 3 | 30 | 30 |
| ZYPREXA TAB5MG | 3 | 30 | 30 |
| ZYPREXA TAB7.5MG | 3 | 30 | 30 |
| ZYPREXA ZYDITAB10MG | 3 | 30 | 30 |

| PRODUCT DESCRIPTION | TIER LEVEL | QUANTITY LIMIT AMOUNT | QUANTITY LIMIT DAYS |
|---------------------|------------|-----------------------|---------------------|
| ZYPREXA ZYDITAB15MG | 3 | 30 | 30 |
| ZYPREXA ZYDITAB20MG | 3 | 30 | 30 |
| ZYPREXA ZYDITAB5MG | 3 | 30 | 30 |
| ZYTIGA TAB250MG | 5 | 120 | 30 |
| ZYVOX TAB600MG | 5 | 28 | 14 |