

Peach State Health Plan: Planning for Healthy Babies[®]

Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



This Preferred Drug List is searchable. Here is how to search for a medicine:

1. Press Control F to open the search tool
2. Type the medicine name into the text box
3. Press enter

Planning for Healthy Babies[®]: Inter-Pregnancy Care (IPC) Pharmacy Program

Peach State Health Plan covers all forms of birth control for Planning for Healthy Babies[®]: Inter-Pregnancy Care (IPC) women. We also cover some medicines to help IPC women with their chronic diseases like diabetes and high blood pressure. The pharmacy team works with doctors and pharmacists to be sure the medicines to prevent pregnancies and the medicines to keep you healthy are covered on the Inter-Pregnancy Care Preferred Drug List (IPC-PDL). Your doctor must write a prescription for these all of these medicines.

Planning for Healthy Babies[®]: Inter-Pregnancy Care Preferred Drug List (IPC-PDL)

The Peach State Health Plan Inter-Pregnancy Care Preferred Drug List (IPC-PDL) is the list of covered drugs. The IPC-PDL tells you the drugs you can get at local pharmacies. The list is updated every three months by the Pharmacy and Therapeutics (P&T) Committee. The group is made up of the Chief Medical Officer, the Chief Medical Director of Pharmacy Services, and several Peach State Health Plan primary care physicians, pharmacists, and specialists.

The Inter-Pregnancy Care Pharmacy Program does not pay for all medicines. Only these kinds of medicines are covered:

- Birth control
- Antibiotics used to treat Sexually Transmitted Infections (except HIV/AIDS and Hepatitis)
- Folic Acid and Multivitamins with Folic Acid
- Medicines for lower vaginal tract and vaginal skin infections
- Medicines to treat Urinary Tract Infections (UTIs)
- Medicines to treat chronic diseases

Some drugs have limits on age, dose, and maximum quantities. These medicines need a prior authorization (PA) if the doctor thinks you need more than the limit.

You can call Member Services to talk to someone about the list of drugs Peach State Health Plan covers. The Member Service phone number is [1-800-704-1484](tel:1-800-704-1484) (TTY/TTD [1-800-255-0056](tel:1-800-255-0056)). You can also use the “Drug Lookup” Tool in the secure member webpage to see if your medicine is covered. You can get to the tool by logging into the [Member Portal](#).

Pharmacy Benefit Manager (PBM)

Peach State Health Plan works with Express Scripts to pay for pharmacy claims. Express Scripts is our Pharmacy Benefit Manager (PBM).

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Specialty Drugs

Some drugs are only paid for when you get them from a Peach State Health Plan specialty pharmacy. Specialty pharmacies can be found using the Find A Provider tool on the Peach State Health Plan website at www.pshp.com.

These drugs are not usually available at local pharmacies. Be sure to call the specialty pharmacy for a refill before you run out of medicine. Drugs that specialty pharmacies provided are marked in the PDL. This list is on the Peach State Health Plan website at www.pshp.com. Please call Member Services if you have any questions about the PDL.

Dispensing Limits

The pharmacy can give you up to 31 days' supply of each new prescription or refill. There may be some medicine, like Depo-Provera, that is given once and lasts 84 days. 80% of the days' supply or 25 days must have passed before the medicine can be refilled for IPC-PDL drugs that are not controlled. Controlled Substances must have 90% of the supply used before the medicine can be refilled. You will need a new prescription for some controlled medicines.

Appropriate Use and Safety Edits

Your safety is very important to Peach State Health Plan. One of the ways we look out for your safety is through point-of sale (POS) edits when the medicine claim is sent by the pharmacy. These edits are based on the Food and Drug Administration (FDA) approvals. One example would be only allowing one drug in the same therapy class each month.

More information about the drugs that are part of these edits can be found in the **Appropriate Use and Safety Edits** document on the Peach State Health Plan website at www.pshp.com.

Prior Authorizations (PA)

Some medicines on the IPC-PDL may require PA. You should talk to your doctor or pharmacist if your pharmacy tells you a PA is needed. A request should be sent by the doctor or pharmacy to Pharmacy Services on the **Medication Prior Authorization Form**. This form is on the Peach State Health Plan website at www.pshp.com. The completed form and doctor notes to show your history should be **faxed to Pharmacy Services at 1-833-582-2342**. A request can also be sent using the secure electronic Prior Authorization portal by Cover My Meds at www.covermymeds.com.

Peach State Health Plan will cover the medicine if:

- There is a medical reason you need that specific medication.
- Other medications on the PDL have not worked.

Peach State Health Plan: Planning for Healthy Babies[®]

Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



All reviews are done by a Georgia licensed clinical pharmacist and will be completed in 24 hours unless more information is needed. They use the standards set by the P&T Committee. If the request is approved, Pharmacy Services sends your doctor a fax. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines. It will also tell you about the appeal process.

Step Therapy

Some drugs on the IPC-PDL may require another drug to be used first. This is called Step Therapy. If you filled that required drug with Peach State Health Plan already, the step therapy medicine will be covered. If you have not tried the IPC-PDL medicine, your doctor will need to send in a PA form with other medicine you have tried. If Pharmacy Services does not approve the PA we will send you a letter and a fax to your doctor. The letter will tell you about the appeal process.

Quantity Limits

Peach State Health Plan may limit how much of a medicine you can get at one time. If the doctor feels you need a larger amount, a PA may be sent to Pharmacy Services. If Pharmacy Services does not approve the PA we will send you a letter and a fax to your doctor. The letter will tell you about the appeal process.

Medical Necessity Requests

Only medicines listed on the IPC-PDL are covered for Inter-Pregnancy Care women. If you need a medicine that is not on the IPC-PDL, your doctor can make a medical necessity (MN) PA request for the medicine. There are medicines on the IPC-PDL to treat most conditions covered by P4HB-IPC. For medicines not on the IPC-PDL, Peach State Health Plan requires:

- Doctor's notes to show you tried at least two IPC-PDL medicines in the same class and used for the same diagnosis; or
- Doctor's notes to show you are allergic or cannot take at least two IPC-PDL medicines in the same class; or
- Doctor's notes to show you cannot take any of the IPC-PDL agents for your diagnosis.

All reviews are done by a Georgia licensed clinical pharmacist and will be completed in 24 hours unless more information is needed. They use the standards set by the P&T Committee. If the request is approved, Pharmacy Services sends your doctor a fax. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines. It will also tell you about the appeal process.

72 Hour Emergency Supply Policy

State and Federal law says a pharmacy can give you a 72 hour (3 day) supply of medicine if you are waiting on PA review. Pharmacies will be paid for the 3 day supply even if the PA is not

Peach State Health Plan: Planning for Healthy Babies[®]

Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



approved. The pharmacist can use professional judgment to decide if the medicine is urgent. The 72 hour supply is not allowed for Controlled substances that need a PA. The pharmacy must **call Pharmacy Services at 1-866-399-0928** for assistance to send the 72 hour supply for payment.

Exclusions

Only drug categories listed on the Peach State Health Plan IPC-PDL are covered for Inter-Pregnancy Care women. All other drug categories are not covered.

Drugs Covered Under the Medical Benefit

Peach State Health Plan covers some vaccines and medicines under the medical benefit for Planning for Healthy Babies[®] Inter-Pregnancy Care women. These medicines cannot be filled at a local pharmacy. The doctor can bill Peach State Health Plan for them. For questions about which vaccines and injectable drugs are covered, call Peach State Health Plan's Member Services Department.

Some birth control must be given in the doctor's office. Intrauterine Devices (IUDs), like Mirena, Liletta, Skyla, and Paragard, can be placed during your family planning office visit. Implantable contraception, called Nexplanon, can be inserted during your family planning office visit, too. If you have questions about birth control, ask your doctor.

Over-the-Counter Medications

The Peach State Health Plan IPC-PDL covers some OTC medicines. These OTCs are covered when your doctor writes a prescription for one of them.

Tobacco Cessation Medications

Tobacco Cessation is when you quit smoking cigarettes. These are the medicines Peach State Health Plan covers: generic nicotine replacement products (gum, lozenges, and patches) and bupropion SR (Zyban). You will need a prescription from your doctor for these medicines.

Generic Drugs

Brand-name drugs will not be covered without PA when an acceptable generic is available. Generic drugs have the same active ingredient, work the same as brand-name medicines. If you or your doctor feels a brand-name is needed, your doctor can ask for PA. We will cover the brand-name drug if there is a medical reason you need the brand-name. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other medicine. It will also tell you about the appeal process.

Peach State Health Plan: Planning for Healthy Babies[®]

Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



Filling a Prescription

You can have medicine filled at a Peach State Health Plan pharmacy. You can find a pharmacy by calling Peach State Health Plan Member Services. You can also look for a pharmacy close to you using the Provider-Lookup tool on the website. You will need to give the pharmacist your prescription and Peach State Health Plan ID card. Your pharmacy may ask for other forms of identification, like driver's license or state ID.

Ordering, Prescribing and Referring (OPR) Provider Requirements

Georgia Medicaid and the Center for Medicaid and Medicare Services (CMS) want your doctor to be listed with Georgia Medicaid. Peach State Health Plan and Pharmacy Services check pharmacy claims to be sure the pharmacy and doctor on your prescription are enrolled with Georgia Families[®]. If a non-enrolled doctor writes your prescription, the prescription will be rejected. Your pharmacy will not be able to fill prescriptions for you if it is not enrolled in Georgia Families[®].

Copayments

Co-pays are not required for Planning for Healthy Babies[®] Inter-Pregnancy Care women.

Contact Information

Peach State Health Plan Member Services:	<u>1-800-704-1484</u>
	Fax: 1-800-659-7518
Peach State Health Plan Member Services TTY/TDD:	<u>1-800-255-0056</u>
Pharmacy Services Prior Authorizations:	<u>1-866-399-0928</u>
	Fax: 1-833-582-2342
Express Scripts Pharmacy Help Desk:	<u>1-833-750-4403</u>

Language Assistance

Do you need this book translated? Do you need help understanding this book? If you do, call Peach State Health Plan's Member Service line at [1-800-704-1484](tel:1-800-704-1484). If you are hearing impaired, call our TDD/TTY at [1-800-255-0056](tel:1-800-255-0056). To get this information in large font or audiotape, call Member Services. Interpreter services are provided free of charge to you. Peach State Health Plan has a telephone language line available 24 hours a day, 7 days a week.

¿Necesita ayuda para entender esto? Si la necesita, llame a la línea de Servicios para los miembros de Peach State Health Plan al 1-800-704-1484. Si es una persona con problemas de audición, llame a nuestro TTY 1-800-255-0056. Para obtener esta información en letra más grande o que se la lean por teléfono, llame a Servicios para los Miembros.

Peach State Health Plan: Planning for Healthy Babies[®]

Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



Preferred Drug List Abbreviations

PREFERRED DRUG LIST TIER ABBREVIATIONS	
Tier	Tier Definitions
<i>P</i>	Preferred Drug
<i>NP</i>	Non-Preferred Drug
REQUIREMENT or LIMITS	
Requirement/Limits	Requirement/Limit Description
<i>AL</i>	Age Limit: Drug is limited to a specific age
<i>PA</i>	Prior Authorization: Review required before prescription can be filled
<i>QL</i>	Quantity Limit: There is a limit on the amount covered per prescription or within a set time frame.
<i>Rx/OTC</i>	Product has both prescription and over the counter coverage
<i>SP</i>	Specialty Drug: High-cost drugs used to treat complex conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia and may be limited to a specific pharmacy.
<i>ST</i>	Step Therapy: Requires trial and failure of one or more preferred products prior to coverage.
CLINICAL EDIT DESCRIPTIONS	
Edit Name	Edit Description
<i>Opioid</i>	Short-acting opioid medicines can only be filled for 7-days at a time when no opioids are filled in the past 180 days (Treatment-Naïve). This limit is extended to 30-day fills when a member has a medical history of cancer, sickle cell, or palliative care in their records. Treatment-Naïve* Limits: - Daily Dose Max = 50 MME** - Day Supply Max = 7 days - Must use Short-acting opioids before Long-acting opioids *Treatment-Naïve means no opioid fill in last 180 days **MME = Morphine Milligram Equivalent
<i>Test Strips</i>	Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days EXCEPTIONS: The below members may get up to 200 strips per 30 days - Members who are less than 18 years old - Members with a Gestational Diabetes or Diabetes in Pregnancy

STANDARD ABBREVIATIONS

Dose Form	Dose Form Description
<i>AEPB</i>	Aerosol Powder Breath Activated
<i>AERB</i>	Aerosol, breath activated
<i>AERO</i>	Aerosol
<i>AJKT</i>	Auto-injector Kit

Dose Form	Dose Form Description
<i>AUII</i>	Auto-injector
<i>CAPS</i>	Capsule
<i>CHEW</i>	Tablet Chewable
<i>CONC</i>	Concentrate

Peach State Health Plan: Planning for Healthy Babies® Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



Dose Form	Dose Form Description
CP12	Capsule ER 12 HR
CP24	Capsule ER 24 HR
CPCR	Capsule ER
CPDR	Capsule Delayed Release
CPEP	Capsule Enteric Coated Particles
CPSP	Capsule Sprinkle
CREA	Cream
CSDR	Capsule Delayed Release Sprinkle
DEVI	Device
ELIX	Elixir
EMUL	Emulsion
ENEM	Enema
EX	External
GRAN	Granules
IJ	Injection
IMPL	Implant
INHA	Inhaler
INJ	Injectable
IUD	Intrauterine Device
IV	Intravenous
LIQD	Liquid
LOTN	Lotion
LOZG	Lozenge
LPOP	Lollipop
MISC	Miscellaneous
NA	Nasal
NEBU	Nebulization solution
OINT	Ointment
OP	Ophthalmic
OPHT	Ophthalmic
OR	Oral
PACK	Packet
PEN	Pen-injector
PNKT	Pen-injector Kit
POT	Potassium
POWD	Powder
PRSY	Prefilled Syringe
PSKT	Prefilled Syringe Kit
PSTE	Paste
PT24	Patch 24 Hour
PT72	Patch 72 Hour

Dose Form	Dose Form Description
PTCH	Patch
PTTW	Patch Biweekly
PTWK	Patch Weekly
RE	Rectal
S.O.P.	Sterile Ophthalmic Preparation
SHAM	Shampoo
SOAJ	Solution Auto-injector
SOCT	Solution Cartridge
SOLN	Solution
SOLR	Solution Reconstituted
SOPN	Solution Pen-injector
SOSY	Solution Prefilled Syringe
SRER	Suspension Reconstituted ER
STRP	Strip
SUBL	Tablet Sublingual
SUER	Suspension Extended Release
SUPN	Suspension Pen-injector
SUPP	Suppository
SUSP	Suspension
SUSR	Suspension Reconstituted
SUSY	Suspension Prefilled Syringe
SYRP	Syrup
T12A	Tablet ER 12 Hour Abuse-Deterrent
TABS	Tablets
TB12	Tablet ER 12 Hour
TB24	Tablet ER 24 Hour
TBCR	Tablet ER
TBDP	Tablet Dispersible
TBEC	Tablet Enteric Coated
TBEF	Tablet Effervescent
TBPK	Tablet Therapy Pack
TBSO	Tablet Soluble
TEST	Diagnostic Test
TINC	Tincture
TROC	Troche
VA	Vaginal
VI	Visual Indicator
WAFR	Wafer
XR	Extended Release

Peach State Health Plan: Planning for Healthy Babies® Inter-Pregnancy Care (IPC) - Preferred Drug List (PDL)



Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 (Use amphetamine-dextroamphetamine)	NP	QL(1 EA daily); AL(At least 6 yrs old)
ADDERALL TABS (Use amphetamine-dextroamphetamine)	NP	QL(2 EA daily); AL(At least 3 yrs old)
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine TABS	P	QL(2 EA daily); AL(At least 3 yrs old)
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate)	NP	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24	P	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate TABS 5 MG, 10 MG	P	QL(2 EA daily); AL(At least 3 yrs old)
lisdexamfetamine dimesylate CAPS	P	QL(1 EA daily); PA
lisdexamfetamine dimesylate CHEW	P	QL(1 EA daily); PA
VYVANSE CAPS	NP	QL(1 EA daily); PA
VYVANSE CHEW	NP	QL(1 EA daily); PA
Analeptics		
CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate)	NF	
CAFFEINE CITRATED POWD	P	QL(45 GM per fill retail)
caffeine citrate SOLN PO	P	QL(45 ML per fill retail)

Drug Name	Drug Tier	Requirements/Limits
Anorexiants Non-Amphetamine		
PLENITY	NP	
PLENITY WELCOME KIT	NP	
Anti-Obesity Agents		
IMCIVREE	P	SP; PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl	P	QL(1 EA daily); AL(At least 6 yrs old); ST
clonidine hcl (adhd) TB12	P	
guanfacine hcl (adhd)	P	QL(1 EA daily); AL(At least 6 yrs old)
INTUNIV (Use guanfacine hcl (adhd))	NP	QL(1 EA daily); AL(At least 6 yrs old)
KAPVAY TB12 (Use clonidine hcl (adhd))	NP	
STRATTERA (Use atomoxetine hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old); ST
Stimulants - Misc.		
CONCERTA TBCR 36 MG (Use methylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old)
dexmethylphenidate hcl TABS	P	QL(2 EA daily); AL(At least 6 yrs old)
FOCALIN TABS (Use dexmethylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)
METADATE CD CPCR (Use methylphenidate hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old)
METHYLIN SOLN 10 MG/5ML (Use methylphenidate hcl)	NP	QL(900 ML per 30 day(s) retail); AL(At least 3 yrs old)

Drug Name	Drug Tier	Requirements/Limits
METHYLIN SOLN 5 MG/5ML (<i>Use methylphenidate hcl</i>)	NP	QL(1800 ML per 30 day(s) retail); AL(At least 3 yrs old)
<i>methylphenidate hcl CPCR</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN 10 MG/5ML</i>	P	QL(900 ML per 30 day(s) retail); AL(At least 3 yrs old)
<i>methylphenidate hcl SOLN 5 MG/5ML</i>	P	QL(1800 ML per 30 day(s) retail); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	P	QL(6 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	P	QL(3 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 36 MG	P	QL(2 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 18 MG, 27 MG, 54 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (<i>Use methylphenidate hcl</i>)	NP	QL(6 EA daily); AL(At least 3 yrs old)
RITALIN TABS 10 MG, 20 MG (<i>Use methylphenidate hcl</i>)	NP	QL(3 EA daily); AL(At least 3 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		

Drug Name	Drug Tier	Requirements/Limits
ROUGH PIGWEED	NP	
SHEEP SORREL-YELLOW DOCK IJ	NP	
SORREL/DOCK MIX IJ	NP	
ALTERNATIVE MEDICINES		
Alternative Medicine - G's		
<i>ginger (zingiber officinalis) CAPS 250 MG</i>	P	OTC; QL(4 EA daily)
Alternative Medicine - M's		
MELATONIN SUBL	P	QL(1 EA daily)
<i>melatonin TABS 3 MG, 5 MG</i>	P	OTC; QL(1 EA daily)
<i>melatonin TBDP 3 MG</i>	P	QL(1 EA daily)
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
ARIKAYCE	P	SP; PA
BETHKIS NEBU (<i>Use tobramycin</i>)	NP	SP; PA
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (<i>Use tobramycin</i>)	NP	SP; PA
<i>neomycin sulfate TABS</i>	P	
TOBI PODHALER CAPS	P	SP; PA
TOBI NEBU (<i>Use tobramycin</i>)	NP	SP; PA
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	P	PA
<i>tobramycin sulfate SOLR</i>	P	PA
<i>tobramycin NEBU</i>	P	SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24 30 MG, 45 MG	P	SP; PA
XELJANZ XR TB24	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XELJANZ SOLN	P	SP; PA	ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	P	SP; PA
XELJANZ TABS	P	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	P	SP; PA
Antirheumatic Antimetabolites			ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	P	SP; PA	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP; PA	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	P	SP; PA
REDITREX SOSY	P	SP; PA	ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
Anti-TNF-alpha - Monoclonal Antibodies			CYLTEZO (2 PEN) AJKT	NP	SP
ADALIMUMAB-AATY (1 PEN) AJKT	P	SP; PA	CYLTEZO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AATY (2 PEN) AJKT	P	SP; PA	CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP
ADALIMUMAB-AATY (2 SYRINGE) PSKT	P	SP; PA	CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP
ADALIMUMAB-ADAZ SOAJ	P	SP; PA	HADLIMA PUSHTOUCH SOAJ	P	SP; PA
ADALIMUMAB-ADAZ SOSY	P	SP; PA	HADLIMA SOSY	P	SP; PA
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP	HULIO (2 PEN) AJKT	NP	SP
ADALIMUMAB-ADBM (2 PEN) AJKT	P	SP; PA	HULIO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-ADBM (2 SYRINGE) PSKT 40 MG/0.8ML	NP	SP	HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	P	SP; PA	HYRIMOZ SOAJ	NP	SP
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	P	SP; PA	HYRIMOZ SOSY 20 MG/0.2ML, 40 MG/0.4ML	NP	SP
			SIMLANDI (1 PEN) AJKT	P	SP; PA
			SIMLANDI (2 PEN) AJKT	P	SP; PA
			SIMLANDI (2 SYRINGE) PSKT 40 MG/0.4ML	P	SP; PA
			YUFLYMA (1 PEN) AJKT	NP	SP
			YUFLYMA (2 PEN) AJKT	NP	SP
			YUFLYMA (2 SYRINGE) PSKT	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP	<i>ibuprofen CHEW</i>	P	OTC
YUSIMRY	P	SP; PA	<i>ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML</i>	P	OTC
Interleukin-1 Blockers			<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	P	RX/OTC
ARCALYST	P	SP; PA	<i>ibuprofen TABS 200 MG</i>	P	OTC
Interleukin-1 Receptor Antagonist (IL-1Ra)			<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	P	
KINERET SOSY	P	SP; PA	INDOCIN SUSP (<i>Use indomethacin</i>)	NP	
Interleukin-1beta Blockers			<i>indomethacin sodium</i>	P	
ILARIS SOLN	P	SP; PA	INDOMETHACIN SODIUM	P	
Interleukin-6 Receptor Inhibitors			<i>indomethacin CAPS 25 MG, 50 MG</i>	P	
ACTEMRA ACTPEN SOAJ	P	SP; PA	<i>indomethacin SUPP</i>	P	
ACTEMRA SOLN	P	SP; PA	<i>indomethacin SUSP</i>	P	
ACTEMRA SOSY	P	SP; PA	INFANTS ADVIL SUSP (<i>Use ibuprofen</i>)	NP	OTC
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>ketorolac tromethamine SOLN IJ 15 MG/ML, 30 MG/ML</i>	P	
ADVIL TABS (<i>Use ibuprofen</i>)	NP	OTC	KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML	P	
ALEVE TABS (<i>Use naproxen sodium</i>)	NP	OTC; QL(2 EA daily)	<i>ketorolac tromethamine TABS</i>	P	QL(20 EA per 30 day(s) retail); AL(At least 17 yrs old)
ANAPROX DS TABS (<i>Use naproxen sodium</i>)	NP		LODINE TABS (<i>Use etodolac</i>)	NP	
CHILDRENS ADVIL SUSP 100 MG/5ML (<i>Use ibuprofen</i>)	NP	RX/OTC	<i>meloxicam TABS</i>	P	
CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>Use ibuprofen</i>)	NP	RX/OTC	MOTRIN CHILDRENS CHEW (<i>Use ibuprofen</i>)	NP	OTC
<i>diclofenac potassium TABS 50 MG</i>	P		MOTRIN INFANTS DROPS SUSP (<i>Use ibuprofen</i>)	NP	OTC
<i>diclofenac sodium TBEC</i>	P		<i>nabumetone</i>	P	
<i>etodolac CAPS</i>	P		NALFON CAPS (<i>Use fenoprofen calcium</i>)	NP	
<i>etodolac TABS</i>	P				
FELDENE CAPS (<i>Use piroxicam</i>)	NP				
<i>fenoprofen calcium CAPS 400 MG</i>	P				
<i>flurbiprofen TABS</i>	P				
<i>ibuprofen lysine</i>	P				

Georgia Medicaid

Updated April 1, 2025

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NAPROSYN SUSP (<i>Use naproxen</i>)	NP		<i>butalbital-aspirin-caffeine CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
NAPROSYN TABS 500 MG (<i>Use naproxen</i>)	NP		ESGIC TABS (<i>Use butalbital-acetaminophen-caffeine</i>)	NP	QL(4 EA daily); AL(At least 12 yrs old)
<i>naproxen sodium TABS 220 MG</i>	P	OTC; QL(2 EA daily)	Analgesics Other		
<i>naproxen sodium TABS 275 MG, 550 MG</i>	P		<i>acetaminophen CHEW</i>	P	OTC
<i>naproxen SUSP</i>	P		<i>acetaminophen ELIX</i>	P	OTC
<i>naproxen TABS</i>	P		<i>acetaminophen LIQD 160 MG/5ML</i>	P	OTC
NEOPROFEN (<i>Use ibuprofen lysine</i>)	NP		<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P	OTC
<i>piroxicam CAPS</i>	P		<i>acetaminophen SUPP 120 MG, 650 MG</i>	P	OTC; QL(12 EA per 30 day(s) retail)
<i>sulindac TABS</i>	P		ACETAMINOPHEN SUPP	P	OTC; QL(12 EA per 30 day(s) retail)
Phosphodiesterase 4 (PDE4) Inhibitors			<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	P	OTC
OTEZLA TABS	P	SP; PA	<i>acetaminophen TABS 325 MG, 500 MG</i>	P	OTC
OTEZLA TBPk	P	SP; PA	FEVERALL JUNIOR STRENGTH SUPP	P	OTC; QL(12 EA per 30 day(s) retail)
Pyrimidine Synthesis Inhibitors			TYLENOL CHILDRENS CHEWABLES CHEW (<i>Use acetaminophen</i>)	NP	OTC
ARAVA (<i>Use leflunomide</i>)	NP	QL(1 EA daily)	TYLENOL CHILDRENS PAIN + FEVER SUSP (<i>Use acetaminophen</i>)	NP	OTC
<i>leflunomide</i>	P	QL(1 EA daily)	TYLENOL CHILDRENS SUSP (<i>Use acetaminophen</i>)	NP	OTC
Selective Costimulation Modulators			TYLENOL EXTRA STRENGTH TABS (<i>Use acetaminophen</i>)	NP	OTC
ORENCIA CLICKJECT SOAJ	P	SP; PA	TYLENOL FOR CHILDREN + ADULTS SUSP (<i>Use acetaminophen</i>)	NP	OTC
ORENCIA SOLR	P	SP; PA			
ORENCIA SOSY	P	SP; PA			
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions					
Analgesic Combinations					
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)			
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)			
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)			

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TYLENOL INFANTS PAIN+FEVER SUSP (<i>Use acetaminophen</i>)	NP	OTC	DILAUDID TABS 8 MG (<i>Use hydromorphone hcl</i>)	NP	Clinical Edit: Opioids; QL(4 EA daily)
TYLENOL TABS (<i>Use acetaminophen</i>)	NP	OTC	<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	QL(0.34 EA daily)
Analgesics-Peptide Channel Blockers			HYDROMORPHONE HCL SUPP	P	Clinical Edit: Opioids; QL(2 EA daily)
PRIALT	P	SP; PA	<i>hydromorphone hcl TABS 2 MG, 4 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
Salicylates			<i>hydromorphone hcl TABS 8 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily)
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	P	OTC	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	P	Clinical Edit: Opioids; QL(30 ML daily)
<i>aspirin CHEW</i>	P	OTC	<i>meperidine hcl TABS 50 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
ASPIRIN SUPP 300 MG	P	OTC; QL(12 EA per 30 day(s) retail)	<i>methadone hcl TABS 5 MG</i>	P	QL(6 EA daily); PA
<i>aspirin TABS 325 MG</i>	P	OTC	<i>methadone hcl TABS 10 MG</i>	P	QL(10 EA daily); PA
<i>aspirin TBEC 81 MG, 325 MG</i>	P	OTC	<i>morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML</i>	P	Clinical Edit: Opioids; QL(240 ML per fill retail)
BUFFERIN (<i>Use aspirin buffered (cal carb-mag carb-mag oxide)</i>)	NP	OTC	<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	P	Clinical Edit: Opioids; QL(21.4 ML daily)
<i>diflunisal TABS</i>	P		<i>morphine sulfate SUPP</i>	P	Clinical Edit: Opioids; QL(18 EA per fill retail)
ECOTRIN ARTHRTIS PAIN TBEC (<i>Use aspirin</i>)	NP	OTC	<i>morphine sulfate TABS</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
ECOTRIN TBEC (<i>Use aspirin</i>)	NP	OTC	<i>morphine sulfate TBCR</i>	P	QL(3 EA daily)
<i>salsalate</i>	P		MS CONTIN TBCR (<i>Use morphine sulfate</i>)	NP	QL(3 EA daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			OXAYDO TABS 5 MG	P	Clinical Edit: Opioids; QL(6 EA daily)
Opioid Agonists					
<i>codeine sulfate TABS 30 MG</i>	P	Clinical Edit: Opioids; QL(2 EA daily); AL(At least 12 yrs old)			
CODEINE SULFATE TABS	P	Clinical Edit: Opioids; QL(2 EA daily); AL(At least 12 yrs old)			
DILAUDID TABS 2 MG, 4 MG (<i>Use hydromorphone hcl</i>)	NP	Clinical Edit: Opioids; QL(6 EA daily)			

Georgia Medicaid

Updated April 1, 2025

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl CAPS</i>	P	Clinical Edit: Opioids; QL(6 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 12 yrs old)
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Clinical Edit: Opioids; QL(90 ML per fill retail)	<i>butalbital-aspirin-caffeine w/cod</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 12 yrs old)
<i>oxycodone hcl SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily)	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	Clinical Edit: Opioids; QL(180 ML daily)
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	P	QL(2 EA daily); PA	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Clinical Edit: Opioids
<i>oxycodone hcl TABS 5 MG, 10 MG, 15 MG, 20 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
<i>oxycodone hcl TABS 30 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily)	<i>oxycodone w/ acetaminophen SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily)
OXYCONTIN T12A	P	QL(2 EA daily); PA	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
ROXICODONE TABS 15 MG (Use oxycodone hcl)	NP	Clinical Edit: Opioids; QL(6 EA daily)	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	NP	Clinical Edit: Opioids; QL(6 EA daily)
ROXICODONE TABS 30 MG (Use oxycodone hcl)	NP	Clinical Edit: Opioids; QL(4 EA daily)	<i>tramadol-acetaminophen</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 18 yrs old)
<i>tramadol hcl TABS 50 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 18 yrs old)	Opioid Partial Agonists		
Opioid Combinations			BELBUCA FILM	P	PA
<i>acetaminophen w/ codeine SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily); AL(At least 12 yrs old)	BUPRENEX SOLN (Use buprenorphine hcl)	NP	PA
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	P	QL(6 EA daily); AL(At least 12 yrs old)			
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily); AL(At least 12 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	P	QL(2 EA daily); PA	CORTENEMA (Use hydrocortisone (intrarectal))	NP	
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	P	QL(3 EA daily)	<i>hydrocortisone (intrarectal)</i>	P	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	P	QL(3 EA daily)	Rectal Combinations		
<i>buprenorphine hcl SOLN</i>	P	PA	ANALPRAM-HC LOTN EX	P	QL(62 ML per 30 day(s) retail)
<i>buprenorphine hcl SUBL</i>	P	PA	<i>phenylephrine-shark liver oil-cocoa butter</i>	P	OTC; QL(12 EA per 30 day(s) retail)
SUBLOCADE SOSY	P	2 max fill(s) per 30 day(s) retail; SP; PA	<i>phenylephrine-shark liver oil-mineral oil-petrolatum</i>	P	OTC; QL(31 GM per 30 day(s) retail)
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 EA daily)	Rectal Steroids		
SUBOXONE FILM SL 3 MG-12 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(2 EA daily); PA	ANUSOL-HC EX (Use hydrocortisone (rectal))	NP	
ZUBSOLV SUBL	P	PA	<i>hydrocortisone (rectal) EX 1 %</i>	P	QL(454 GM per fill retail); RX/OTC
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones			<i>hydrocortisone (rectal) EX 2.5 %</i>	P	
Androgens			<i>hydrocortisone (rectal) EX 1 %</i>	NP	RX/OTC
AVEED SOLN	P	SP; PA	ANTACIDS		
<i>methyltestosterone TABS</i>	P		Antacid Combinations		
TESTOPEL PLLT	P	SP; PA	<i>alum & mag hydrox-simethicone LIQD</i>	P	QL(744 ML per 30 day(s) retail)
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	P	QL(4 ML per 30 day(s) retail)	<i>alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	P	QL(744 ML per 30 day(s) retail)
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	P	QL(0.2858 ML daily)	Antacids - Aluminum Salts		
<i>testosterone enanthate SOLN IM</i>	P	QL(4 ML per 30 day(s) retail)	ALUMINUM HYDROXIDE GEL SUSP	P	OTC
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching			Antacids - Bicarbonate		
Intrarectal Steroids					

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	P	OTC; QL(100 EA per 30 day(s) retail)
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG</i>	P	OTC
TUMS LASTING EFFECTS CHEW (Use <i>calcium carbonate (antacid)</i>)	NP	OTC
TUMS ULTRA 1000 CHEW (Use <i>calcium carbonate (antacid)</i>)	NF	
TUMS CHEW (Use <i>calcium carbonate (antacid)</i>)	NP	OTC
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	P	OTC
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
BENZNIDAZOLE	P	SP; PA
EMVERM CHEW	P	QL(1 EA per 14 day(s) retail)
PIN RID CHEW	P	QL(3 EA per fill retail)
<i>pyrantel pamoate SUSP</i>	P	OTC; QL(60 ML per fill retail)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (Use <i>isosorbide dinitrate</i>)	NP	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	P	
<i>isosorbide mononitrate TABS</i>	P	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
ISOSORBIDE MONONITRATE TABS	P	QL(2 EA daily)
<i>isosorbide mononitrate TB24</i>	P	QL(1 EA daily)
NITRO-BID OINT	P	
NITRO-DUR PT24 (Use <i>nitroglycerin</i>)	NP	
<i>nitroglycerin CPCR</i>	P	
<i>nitroglycerin PT24</i>	P	
<i>nitroglycerin SUBL</i>	P	
NITROSTAT SUBL (Use <i>nitroglycerin</i>)	NP	
ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 5 MG, 10 MG</i>	P	QL(6 EA daily)
<i>buspirone hcl 15 MG</i>	P	QL(4 EA daily)
<i>buspirone hcl 7.5 MG, 30 MG</i>	P	QL(3 EA daily)
<i>hydroxyzine hcl SYRP</i>	P	
<i>hydroxyzine hcl TABS</i>	P	
<i>hydroxyzine pamoate CAPS</i>	P	
<i>meprobamate</i>	P	
VISTARIL CAPS (Use <i>hydroxyzine pamoate</i>)	NP	
Benzodiazepines		
<i>alprazolam TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
ATIVAN TABS (Use <i>lorazepam</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
<i>chlordiazepoxide hcl CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
<i>clorazepate dipotassium TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>diazepam SOLN PO 5 MG/5ML</i>	P	AL (6 months to 12 years old)

Drug Name	Drug Tier	Requirements/ Limits
<i>diazepam TABS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
<i>lorazepam TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>oxazepam CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
VALIUM TABS (<i>Use diazepam</i>)	NP	QL(4 EA daily); AL(At least 18 yrs old)
XANAX TABS (<i>Use alprazolam</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)

ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms

Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	P	
NORPACE CR CP12 150 MG	P	
NORPACE CAPS (<i>Use disopyramide phosphate</i>)	P	
<i>quinidine gluconate TBCR</i>	P	
<i>quinidine sulfate TABS</i>	P	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	P	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	P	
<i>propafenone hcl TABS</i>	P	
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	P	
<i>dofetilide</i>	P	
TIKOSYN (<i>Use dofetilide</i>)	NP	

ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions

Antiasthmatic - Monoclonal Antibodies		
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Drug Name	Drug Tier	Requirements/ Limits
CINQAIR	P	SP; PA
TEZSPIRE SOSY	P	SP; PA
XOLAIR SOAJ	P	SP; PA
XOLAIR SOLR	P	SP; PA
XOLAIR SOSY	P	SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	P	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	QL(25.8 GM per fill retail)
INCRUSE ELLIPTA	P	QL(1 EA daily)
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ML per 20 day(s) retail)
SPIRIVA HANDIHALER CAPS (<i>Use tiotropium bromide monohydrate</i>)	NP	
<i>tiotropium bromide monohydrate CAPS</i>	P	
TUDORZA PRESSAIR	P	QL(1 EA per 30 day(s) retail)
Leukotriene Modulators		
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)
<i>montelukast sodium PACK</i>	P	QL(1 EA daily)
<i>montelukast sodium TABS</i>	P	QL(1 EA daily)
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (<i>Use roflumilast</i>)	NP	QL(1 EA daily)
<i>roflumilast</i>	P	QL(1 EA daily)
Steroid Inhalants		
ARNUITY ELLIPTA	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ASMANEX HFA AERO	P	QL(0.44 GM daily)	<i>albuterol sulfate AERS</i>	P	QL(6.7 GM per fill retail; 13.4 GM per 30 day(s) retail)
<i>budesonide (inhalation) SUSP</i>	P	QL(120 ML per fill retail); AL(At least 1 yrs old - Up to 8 yrs old)	<i>albuterol sulfate AERS</i>	NP	
FLOVENT DISKUS AEPB	NP		<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ML daily)
FLOVENT DISKUS AEPB (Use <i>fluticasone propionate (inhalation)</i>)	NP		<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 30 day(s) retail)
FLOVENT HFA (Use <i>fluticasone propionate hfa</i>)	NP		<i>albuterol sulfate NEBU</i>	P	
<i>fluticasone propionate (inhalation) AEPB</i>	P		ALBUTEROL SULFATE NEBU	P	
<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per fill retail); AL(Up to 12 yrs old)	<i>albuterol sulfate SYRP</i>	P	
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(10.6 GM per fill retail); AL(Up to 12 yrs old)	<i>albuterol sulfate TABS</i>	P	
PULMICORT SUSP (Use <i>budesonide (inhalation)</i>)	NP	QL(120 ML per fill retail); AL(At least 1 yrs old - Up to 8 yrs old)	<i>budesonide-formoterol fumarate dihydrate 160 MCG/ACT-4.5 MCG/ACT</i>	P	QL(11 GM per fill retail)
QVAR REDHALER 40 MCG/ACT	P	QL(0.36 GM daily)	<i>budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT</i>	P	QL(10.2 GM per fill retail)
QVAR REDHALER 80 MCG/ACT	P	QL(0.72 GM daily)	<i>budesonide-formoterol fumarate dihydrate</i>	P	QL(0.367 GM daily)
Sympathomimetics			COMBIVENT RESPIMAT AERS	P	QL(0.14 GM daily)
ADVAIR DISKUS AEPB (Use <i>fluticasone-salmeterol</i>)	NP	QL(2 EA daily)	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	P	QL(2 EA daily)
<i>albuterol sulfate AERS</i>	NP		<i>ipratropium-albuterol SOLN</i>	P	QL(12 ML daily)
<i>albuterol sulfate AERS</i>	P	QL(8.5 GM per fill retail; 17 GM per 30 day(s) retail)	<i>levalbuterol tartrate</i>	P	QL(0.5 GM daily)
<i>albuterol sulfate AERS</i>	P	QL(18 GM per fill retail; 36 GM per 30 day(s) retail)	PROAIR RESPICLICK AEPB	P	QL(1 EA per fill retail; 2 EA per 30 day(s) retail); AL(At least 4 yrs old - Up to 18 yrs old)
			PROVENTIL HFA AERS (Use <i>albuterol sulfate</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SEREVENT DISKUS	P	QL(60 EA per fill retail)	<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	P	
SYMBICORT (Use <i>budesonide-formoterol fumarate dihydrate</i>)	NP		<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML</i>	NP	
<i>terbutaline sulfate TABS</i>	P		LOVENOX SOLN IJ 300 MG/3ML (Use <i>enoxaparin sodium</i>)	NP	SP
VENTOLIN HFA AERS (Use <i>albuterol sulfate</i>)	NP		LOVENOX SOSY (Use <i>enoxaparin sodium</i>)	NP	SP; PA
XOPENEX HFA (Use <i>levalbuterol tartrate</i>)	NP	QL(0.5 GM daily)	Thrombin Inhibitors		
Xanthines			<i>dabigatran etexilate mesylate CAPS</i>	P	
THEO-24 CP24	P		PRADAXA CAPS (Use <i>dabigatran etexilate mesylate</i>)	NP	
<i>theophylline ELIX</i>	P		ANTICONVULSANTS - Drugs to Treat Seizures		
<i>theophylline SOLN</i>	P	QL(475 ML per fill retail)	Anticonvulsants - Benzodiazepines		
<i>theophylline TB12</i>	P		<i>clonazepam TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>theophylline TB24</i>	P		DIASTAT ACUDIAL GEL 10 MG (Use <i>diazepam (anticonvulsant)</i>)	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
ANTICOAGULANTS - Blood Thinners			DIASTAT ACUDIAL GEL 20 MG (Use <i>diazepam (anticonvulsant)</i>)	NP	QL(1 EA per fill retail); AL(At least 2 yrs old)
Coumarin Anticoagulants			DIASTAT PEDIATRIC GEL (Use <i>diazepam (anticonvulsant)</i>)	NP	QL(1 EA per fill retail); AL(At least 2 yrs old)
<i>warfarin sodium TABS</i>	P		<i>diazepam (anticonvulsant) GEL 10 MG</i>	NP	
Direct Factor Xa Inhibitors			<i>diazepam (anticonvulsant) GEL</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
ELIQUIS DVT/PE STARTER PACK TBPK	P	QL(2.47 EA daily)	KLONOPIN TABS (Use <i>clonazepam</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
ELIQUIS TABS	P	QL(2 EA daily)	NAYZILAM	P	QL(10 EA per 30 day(s) retail); PA
Heparins And Heparinoid-Like Agents					
ARIXTRA (Use <i>fondaparinux sodium</i>)	NP	SP; PA			
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	SP			
<i>enoxaparin sodium SOSY</i>	P	SP; PA			
<i>fondaparinux sodium</i>	P	SP; PA			
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	P	SP; PA			
FRAGMIN SOSY	P	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VALTOCO 10 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail); PA	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	NP	QL(4 EA daily)
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	P	QL(10 EA per 30 day(s) retail); PA	KEPPRA TABS 500 MG (Use levetiracetam)	NP	QL(6 EA daily)
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	P	QL(10 EA per 30 day(s) retail); PA	KEPPRA TABS 1000 MG (Use levetiracetam)	NP	
VALTOCO 5 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail); PA	LAMICTAL XR TB24 (Use lamotrigine)	NP	Use lamotrigine IR; ST
Anticonvulsants - Misc.			LAMICTAL CHEW (Use lamotrigine)	NP	
BANZEL SUSP (Use rufinamide)	NP	SP; PA	LAMICTAL TABS (Use lamotrigine)	NP	
BANZEL TABS (Use rufinamide)	NP	SP; PA	lamotrigine CHEW	P	
BRIVIACT SOLN IV 50 MG/5ML	P	SP; PA	lamotrigine TABS	P	
carbamazepine CHEW 100 MG	P		lamotrigine TB24	P	Use lamotrigine IR; ST
carbamazepine SUSP	P		levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	P	QL(16 ML daily)
carbamazepine TABS	P		levetiracetam TABS 500 MG	P	QL(6 EA daily)
carbamazepine TB12	P		levetiracetam TABS 250 MG, 750 MG	P	QL(4 EA daily)
DIACOMIT CAPS 500 MG	P	QL(6 EA daily); SP; PA	levetiracetam TABS 1000 MG	P	
DIACOMIT CAPS 250 MG	P	QL(12 EA daily); SP; PA	levetiracetam TB24	P	Use levetiracetam IR; ST
DIACOMIT PACK 500 MG	P	QL(6 EA daily); SP; PA	MYSOLINE (Use primidone)	NP	
DIACOMIT PACK 250 MG	P	QL(12 EA daily); SP; PA	NEURONTIN CAPS (Use gabapentin)	NP	QL(9 EA daily)
EPIDIOLEX	P	SP; PA	NEURONTIN SOLN (Use gabapentin)	NP	
FINTEPLA	P	SP; PA	NEURONTIN TABS 600 MG (Use gabapentin)	NP	QL(6 EA daily)
gabapentin CAPS	P	QL(9 EA daily)	NEURONTIN TABS 800 MG (Use gabapentin)	NP	QL(4 EA daily)
gabapentin SOLN	P		oxcarbazepine SUSP	P	
gabapentin TABS 800 MG	P	QL(4 EA daily)	oxcarbazepine TABS	P	
gabapentin TABS 600 MG	P	QL(6 EA daily)	primidone	P	
KEPPRA XR TB24 (Use levetiracetam)	NP	Use levetiracetam IR; ST	rufinamide SUSP	P	SP; PA
KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	NP	QL(16 ML daily)			

Georgia Medicaid Updated April 1, 2025
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<i>rufinamide TABS</i>	P	SP; PA	GABITRIL (<i>Use tiagabine hcl</i>)	NP	
TEGRETOL SUSP (<i>Use carbamazepine</i>)	NP		SABRIL PACK (<i>Use vigabatrin</i>)	NP	SP; PA
TEGRETOL TABS (<i>Use carbamazepine</i>)	NP		SABRIL TABS (<i>Use vigabatrin</i>)	NP	SP; PA
TEGRETOL-XR TB12 (<i>Use carbamazepine</i>)	NP		<i>tiagabine hcl</i>	P	
TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NP	QL(6 EA daily)	<i>vigabatrin PACK</i>	P	SP; PA
TOPAMAX SPRINKLE CPSP 25 MG (<i>Use topiramate</i>)	NP	QL(8 EA daily)	<i>vigabatrin TABS</i>	P	SP; PA
TOPAMAX TABS 200 MG (<i>Use topiramate</i>)	NP	QL(3 EA daily)	Hydantoins		
TOPAMAX TABS 25 MG, 50 MG (<i>Use topiramate</i>)	NP	QL(6 EA daily)	DILANTIN	P	
TOPAMAX TABS 100 MG (<i>Use topiramate</i>)	NP	QL(4 EA daily)	DILANTIN (<i>Use phenytoin sodium extended</i>)	P	
<i>topiramate CPSP 15 MG</i>	P	QL(6 EA daily)	DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	P	
<i>topiramate CPSP 25 MG</i>	P	QL(8 EA daily)	DILANTIN-125 SUSP (<i>Use phenytoin</i>)	P	
<i>topiramate TABS 100 MG</i>	P	QL(4 EA daily)	DILANTIN SUSP (<i>Use phenytoin</i>)	P	
<i>topiramate TABS 200 MG</i>	P	QL(3 EA daily)	<i>phenytoin sodium extended 100 MG</i>	P	
<i>topiramate TABS 25 MG, 50 MG</i>	P	QL(6 EA daily)	<i>phenytoin sodium SOLN</i>	P	
TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NP		<i>phenytoin CHEW</i>	P	
TRILEPTAL TABS (<i>Use oxcarbazepine</i>)	NP		<i>phenytoin SUSP</i>	P	
ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NP		Succinimides		
<i>zonisamide CAPS</i>	P		<i>ethosuximide CAPS</i>	P	
Carbamates			<i>ethosuximide SOLN</i>	P	
<i>felbamate SUSP</i>	P		ZARONTIN CAPS (<i>Use ethosuximide</i>)	NP	
<i>felbamate TABS</i>	P		ZARONTIN SOLN (<i>Use ethosuximide</i>)	NP	
FELBATOL SUSP (<i>Use felbamate</i>)	NP		Valproic Acid		
FELBATOL TABS (<i>Use felbamate</i>)	NP		DEPAKOTE ER TB24 250 MG (<i>Use divalproex sodium</i>)	NP	QL(3 EA daily)
GABA Modulators			DEPAKOTE ER TB24 500 MG (<i>Use divalproex sodium</i>)	NP	QL(7 EA daily)

Georgia Medicaid Updated April 1, 2025
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DEPAKOTE SPRINKLES CSDR (Use divalproex sodium)	NP	QL(8 EA daily)	REMERON SOLTAB TBDP 45 MG (Use mirtazapine)	NP	QL(1 EA daily)
DEPAKOTE TBEC 125 MG (Use divalproex sodium)	NP	QL(2 EA daily)	REMERON SOLTAB TBDP 30 MG (Use mirtazapine)	NP	QL(1.5 EA daily)
DEPAKOTE TBEC 500 MG (Use divalproex sodium)	NP	QL(7 EA daily)	REMERON TABS 15 MG (Use mirtazapine)	NP	QL(3 EA daily)
DEPAKOTE TBEC 250 MG (Use divalproex sodium)	NP	QL(3 EA daily)	REMERON TABS 30 MG (Use mirtazapine)	NP	QL(1.5 EA daily)
divalproex sodium CSDR	P	QL(8 EA daily)	Antidepressants - Misc.		
divalproex sodium TB24 250 MG	P	QL(3 EA daily)	bupropion hcl TABS	P	QL(3 EA daily)
divalproex sodium TB24 500 MG	P	QL(7 EA daily)	bupropion hcl TB12 100 MG	P	QL(4 EA daily)
divalproex sodium TBEC 500 MG	P	QL(7 EA daily)	bupropion hcl TB12 200 MG	P	QL(2 EA daily)
divalproex sodium TBEC 125 MG	P	QL(2 EA daily)	bupropion hcl TB12 150 MG	P	QL(3 EA daily)
divalproex sodium TBEC 250 MG	P	QL(3 EA daily)	bupropion hcl TB24 150 MG	P	QL(3 EA daily)
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	P		bupropion hcl TB24 300 MG	P	QL(1 EA daily)
valproic acid CAPS	P		WELLBUTRIN SR TB12 150 MG (Use bupropion hcl)	NP	QL(3 EA daily)
ANTIDEPRESSANTS - Drugs to Treat Depression			WELLBUTRIN SR TB12 200 MG (Use bupropion hcl)	NP	QL(2 EA daily)
Alpha-2 Receptor Antagonists (Tetracyclics)			WELLBUTRIN SR TB12 100 MG (Use bupropion hcl)	NP	QL(4 EA daily)
mirtazapine TABS 7.5 MG, 45 MG	P	QL(1 EA daily)	WELLBUTRIN XL TB24 300 MG (Use bupropion hcl)	NP	QL(1 EA daily)
mirtazapine TABS 15 MG	P	QL(3 EA daily)	WELLBUTRIN XL TB24 150 MG (Use bupropion hcl)	NP	QL(3 EA daily)
mirtazapine TABS 30 MG	P	QL(1.5 EA daily)	GABA Receptor Modulator - Neuroactive Steroid		
mirtazapine TBDP 15 MG	P	QL(3 EA daily)	ZULRESSO	P	SP; PA
mirtazapine TBDP 30 MG	P	QL(1.5 EA daily)	Monoamine Oxidase Inhibitors (MAOIs)		
mirtazapine TBDP 45 MG	P	QL(1 EA daily)			
REMERON SOLTAB TBDP 15 MG (Use mirtazapine)	NP	QL(3 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NARDIL (Use phenelzine sulfate)	NP		fluoxetine hcl CAPS 40 MG	P	QL(2 EA daily); AL(At least 7 yrs old)
PARNATE (Use tranylcypromine sulfate)	NP		fluoxetine hcl SOLN	P	QL(600 ML per 30 day(s) retail); AL(Up to 6 yrs old)
phenelzine sulfate	P		fluoxetine hcl TABS 10 MG	P	QL(1 EA daily); AL(At least 7 yrs old)
tranylcypromine sulfate	P		fluoxetine hcl TABS 20 MG	P	QL(4 EA daily)
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			fluvoxamine maleate TABS 100 MG	P	QL(3 EA daily)
SPRAVATO (56 MG DOSE)	P	SP; PA	fluvoxamine maleate TABS 25 MG, 50 MG	P	QL(2 EA daily)
SPRAVATO (84 MG DOSE)	P	SP; PA	LEXAPRO TABS 20 MG (Use escitalopram oxalate)	NP	QL(1 EA daily); AL(At least 12 yrs old)
Selective Serotonin Reuptake Inhibitors (SSRIs)			LEXAPRO TABS 5 MG (Use escitalopram oxalate)	NP	QL(4 EA daily); AL(At least 12 yrs old)
CELEXA TABS 10 MG (Use citalopram hydrobromide)	NP	QL(4 EA daily)	LEXAPRO TABS 10 MG (Use escitalopram oxalate)	NP	QL(2 EA daily); AL(At least 12 yrs old)
CELEXA TABS 20 MG (Use citalopram hydrobromide)	NP	QL(2 EA daily)	paroxetine hcl SUSP	P	QL(40 ML daily); PA
CELEXA TABS 40 MG (Use citalopram hydrobromide)	NP	QL(1 EA daily)	paroxetine hcl TABS 20 MG	P	QL(3 EA daily)
citalopram hydrobromide SOLN	P		paroxetine hcl TABS 30 MG, 40 MG	P	QL(2 EA daily)
citalopram hydrobromide TABS 10 MG	P	QL(4 EA daily)	paroxetine hcl TABS 10 MG	P	QL(6 EA daily)
citalopram hydrobromide TABS 20 MG	P	QL(2 EA daily)	paroxetine hcl TB24	P	
citalopram hydrobromide TABS 40 MG	P	QL(1 EA daily)	PAXIL CR TB24 (Use paroxetine hcl)	NP	
escitalopram oxalate TABS 10 MG	P	QL(2 EA daily); AL(At least 12 yrs old)	PAXIL SUSP (Use paroxetine hcl)	NP	QL(40 ML daily); PA
escitalopram oxalate TABS 5 MG	P	QL(4 EA daily); AL(At least 12 yrs old)	PAXIL TABS 30 MG, 40 MG (Use paroxetine hcl)	NP	QL(2 EA daily)
escitalopram oxalate TABS 20 MG	P	QL(1 EA daily); AL(At least 12 yrs old)	PAXIL TABS 20 MG (Use paroxetine hcl)	NP	QL(3 EA daily)
fluoxetine hcl CAPS 10 MG, 20 MG	P	QL(4 EA daily)	PAXIL TABS 10 MG (Use paroxetine hcl)	NP	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PROZAC CAPS 40 MG (Use fluoxetine hcl)	NP	QL(2 EA daily); AL(At least 7 yrs old)	EFFEXOR XR CP24 150 MG (Use venlafaxine hcl)	NP	QL(2 EA daily)
PROZAC CAPS 10 MG, 20 MG (Use fluoxetine hcl)	NP	QL(4 EA daily)	EFFEXOR XR CP24 37.5 MG (Use venlafaxine hcl)	NP	QL(4 EA daily)
sertraline hcl CONC	P	QL(6 ML daily)	EFFEXOR XR CP24 75 MG (Use venlafaxine hcl)	NP	QL(5 EA daily)
sertraline hcl TABS 100 MG	P	QL(2 EA daily)	PRISTIQ 100 MG (Use desvenlafaxine succinate)	NP	QL(4 EA daily); ST
sertraline hcl TABS 25 MG, 50 MG	P	QL(4 EA daily)	PRISTIQ 25 MG, 50 MG (Use desvenlafaxine succinate)	NP	QL(1 EA daily); ST
ZOLOFT CONC (Use sertraline hcl)	NP	QL(6 ML daily)	venlafaxine hcl CP24 150 MG	P	QL(2 EA daily)
ZOLOFT TABS 100 MG (Use sertraline hcl)	NP	QL(2 EA daily)	venlafaxine hcl CP24 37.5 MG	P	QL(4 EA daily)
ZOLOFT TABS 25 MG, 50 MG (Use sertraline hcl)	NP	QL(4 EA daily)	venlafaxine hcl CP24 75 MG	P	QL(5 EA daily)
Serotonin Modulators			venlafaxine hcl TABS	P	
nefazodone hcl	P		venlafaxine hcl TB24 150 MG	P	QL(2 EA daily)
trazodone hcl TABS 50 MG, 100 MG, 150 MG	P		venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	P	QL(1 EA daily)
trazodone hcl TABS 300 MG	P	QL(2 EA daily)	Tricyclic Agents		
TRINTELLIX	P	QL(1 EA daily); AL(At least 18 yrs old); PA	amitriptyline hcl TABS	P	
VIIBRYD TABS (Use vilazodone hcl)	NP	QL(1 EA daily); PA	amoxapine	P	
vilazodone hcl TABS	P	QL(1 EA daily); PA	ANAFRANIL 75 MG (Use clomipramine hcl)	NP	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			clomipramine hcl 75 MG	P	
CYMBALTA CPEP (Use duloxetine hcl)	NP	QL(1 EA daily); AL(At least 7 yrs old)	desipramine hcl TABS 25 MG	P	QL(2 EA daily)
desvenlafaxine succinate 25 MG, 50 MG	P	QL(1 EA daily); ST	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	P	
desvenlafaxine succinate 100 MG	P	QL(4 EA daily); ST	doxepin hcl CAPS	P	
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	doxepin hcl CONC	P	
			imipramine hcl TABS	P	
			NORPRAMIN TABS 10 MG (Use desipramine hcl)	NP	
			NORPRAMIN TABS 25 MG (Use desipramine hcl)	NP	QL(2 EA daily)
			nortriptyline hcl CAPS	P	

Georgia Medicaid Updated April 1, 2025
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<i>nortriptyline hcl SOLN</i>	P	QL(20 ML daily)	Biguanides		
PAMELOR CAPS (<i>Use nortriptyline hcl</i>)	NP		GLUMETZA TB24 (<i>Use metformin hcl</i>)	NF	
ANTIDIABETICS - Drugs to Regulate Blood Sugar			<i>metformin hcl TABS 850 MG, 1000 MG</i>	P	
Antidiabetic Combinations			<i>metformin hcl TABS 500 MG</i>	P	QL(4 EA daily)
ACTOPLUS MET TABS 850 MG-15 MG (<i>Use pioglitazone hcl-metformin hcl</i>)	NP	QL(2 EA daily)	<i>metformin hcl TB24 750 MG</i>	P	QL(3 EA daily)
<i>alogliptin-metformin hcl</i>	P	QL(2 EA daily)	<i>metformin hcl TB24 500 MG</i>	P	QL(4 EA daily)
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-12.5 MG, 45 MG-25 MG</i>	P		Diabetic Other		
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	P	QL(1 EA daily)	BD GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	P	QL(2 EA daily)	CVS GLUCOSE	P	QL(50 EA per 30 day(s) retail)
<i>glipizide-metformin hcl</i>	P		CVS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
<i>glyburide-metformin</i>	P		CVS SOFT GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
KAZANO (<i>Use alogliptin-metformin hcl</i>)	NP		DEX4	P	QL(50 EA per 30 day(s) retail)
KOMBIGLYZE XR (<i>Use saxagliptin-metformin hcl</i>)	NP	QL(1 EA daily)	DEX4 GLUCOSE	P	QL(50 EA per 30 day(s) retail)
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>Use alogliptin-pioglitazone</i>)	NP		DEX4 NATURALS	P	QL(50 EA per 30 day(s) retail)
<i>pioglitazone hcl-metformin hcl TABS</i>	P	QL(2 EA daily)	DEX4 POUCH PACK	P	QL(50 EA per 30 day(s) retail)
<i>saxagliptin-metformin hcl</i>	P	QL(1 EA daily)	DEX4 QUICK DISSOLVE GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
SITAGLIPTIN BASE-METFORMIN HCL TABS	P	QL(2 EA daily)	<i>glucagon (rdna)</i>	P	QL(1 EA per fill retail)
SOLIQUA	P	QL(0.6 ML daily); PA	GLUCAGON EMERGENCY (<i>Use glucagon (rdna)</i>)	NP	QL(1 EA per fill retail)
XIGDUO XR (<i>Use dapagliflozin propanediol-metformin hcl</i>)	NP		GLUCO TO GO CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
ZITUVIMET TABS	NP		GLUCOSE 6 MG-4 GM	P	QL(50 EA per 30 day(s) retail)
			GLUCOSE INSTANT ENERGY	P	QL(50 EA per 30 day(s) retail)

Georgia Medicaid

Updated April 1, 2025

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GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	VALUE PLUS GLUCOSE	P	QL(50 EA per 30 day(s) retail)
GNP GLUCOSE 6 MG-4 GM	P	QL(50 EA per 30 day(s) retail)	WALGREENS GLUCOSE	P	QL(50 EA per 30 day(s) retail)
GNP GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	WALGREENS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
GNP QUICK DISSOLVE GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
GOODSENSE GLUCOSE	P	QL(50 EA per 30 day(s) retail)	<i>alogliptin benzoate</i>	P	
HY-VEE GLUCOSE	P	QL(50 EA per 30 day(s) retail)	NESINA (Use <i>alogliptin benzoate</i>)	NP	
KROGER GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ONGLYZA (Use <i>saxagliptin hcl</i>)	NP	QL(1 EA daily)
LEADER GLUCOSE 6 MG-4 GM	P	QL(50 EA per 30 day(s) retail)	<i>saxagliptin hcl</i>	P	QL(1 EA daily)
LEADER QUICK DISSOLVE GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	SITAGLIPTIN	P	QL(1 EA daily)
LONGS GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ZITUVIO	NP	
MEIJER GLUCOSE	P	QL(50 EA per 30 day(s) retail)	Incretin Mimetic Agents		
PREFERRED PLUS GLUCOSE	P	QL(50 EA per 30 day(s) retail)	<i>liraglutide</i>	P	QL(0.3 ML daily); AL(At least 10 yrs old)
PX GLUCOSE	P	QL(50 EA per 30 day(s) retail)	TRULICITY	P	QL(2 ML per 28 day(s) retail); AL(At least 10 yrs old); PA
RA GLUCOSE	P	QL(50 EA per 30 day(s) retail)	VICTOZA (Use <i>liraglutide</i>)	NP	QL(0.3 ML daily); AL(At least 10 yrs old)
RELION GLUCOSE	P	QL(50 EA per 30 day(s) retail)	Insulin		
SM GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ADMELOG SOLOSTAR SOPN	NP	
SMART SENSE GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ADMELOG SOLN IJ	NP	
TGT GLUCOSE	P	QL(50 EA per 30 day(s) retail)	HUMALOG KWIKPEN SOPN 100 UNIT/ML	NP	
TRUEPLUS GLUCOSE ON THE GO CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	HUMALOG SOLN IJ	NP	
TRUEPLUS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	HUMULIN 70/30 KWIKPEN SUPN	P	OTC; QL(1 ML daily)
UP & UP GLUCOSE	P	QL(50 EA per 30 day(s) retail)	HUMULIN 70/30 SUSP	P	OTC; QL(40 ML per 30 day(s) retail)
			HUMULIN N KWIKPEN SUPN	P	OTC; QL(1 ML daily)

Georgia Medicaid

Updated April 1, 2025

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HUMULIN N SUSP	P	QL(40 ML per 30 day(s) retail)
HUMULIN R SOLN IJ	P	OTC; QL(40 ML per 30 day(s) retail)
INSULIN GLARGINE-YFGN SOLN	P	QL(1 ML daily)
INSULIN GLARGINE-YFGN SOPN	P	QL(1 ML daily)
INSULIN LISPRO (1 UNIT DIAL) SOPN	P	QL(1.34 ML daily)
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	
INSULIN LISPRO PROT & LISPRO SUPN	P	QL(1 ML daily)
INSULIN LISPRO SOLN IJ	P	QL(40 ML per 30 day(s) retail)
NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	
NOVOLIN 70/30 FLEXPEN SUPN	P	OTC; QL(1 ML daily)
NOVOLIN 70/30 RELION SUSP	NP	
NOVOLIN 70/30 SUSP	P	OTC; QL(40 ML per 30 day(s) retail)
NOVOLIN N FLEXPEN RELION SUPN	NP	
NOVOLIN N FLEXPEN SUPN	P	OTC; QL(1 ML daily)
NOVOLIN N RELION SUSP	NP	
NOVOLIN N SUSP	P	QL(40 ML per 30 day(s) retail)
NOVOLIN R RELION SOLN IJ	NP	
NOVOLIN R SOLN IJ	P	OTC; QL(40 ML per 30 day(s) retail)
SEMGLEE (YFGN) SOLN	NP	
SEMGLEE (YFGN) SOPN	NP	
Insulin Sensitizing Agents		
ACTOS (Use <i>pioglitazone hcl</i>)	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>pioglitazone hcl</i>	P	QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	P	QL(3 EA daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	P	QL(1 EA daily)
FARXIGA (Use <i>dapagliflozin propanediol</i>)	NP	
Sulfonylureas		
AMARYL 4 MG (Use <i>glimepiride</i>)	NP	QL(2 EA daily)
AMARYL 1 MG, 2 MG (Use <i>glimepiride</i>)	NP	QL(4 EA daily)
<i>glimepiride 1 MG, 2 MG</i>	P	QL(4 EA daily)
<i>glimepiride 4 MG</i>	P	QL(2 EA daily)
<i>glipizide TABS</i>	P	
<i>glipizide TB24</i>	P	
GLUCOTROL XL TB24 (Use <i>glipizide</i>)	NP	
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	P	
<i>glyburide TABS</i>	P	
GLYNASE (Use <i>glyburide micronized</i>)	NP	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	P	OTC
<i>bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML</i>	P	OTC
PEPTO-BISMOL MAX STRENGTH SUSP (Use <i>bismuth subsalicylate</i>)	NP	OTC
PEPTO-BISMOL TO-GO CHEW (Use <i>bismuth subsalicylate</i>)	NP	OTC

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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PEPTO-BISMOL CHEW (Use bismuth subsalicylate)	NP	OTC	BRIDION SOLN	P	PA
Antiperistaltic Agents			<i>deferoxamine mesylate</i>	P	SP; PA
ANTI-DIARRHEAL LIQD	P	OTC; QL(40 ML daily)	DESFERAL 500 MG (Use <i>deferoxamine mesylate</i>)	NP	SP; PA
<i>diphenoxylate w/ atropine LIQD</i>	P		SM IPECAC SYRUP	P	
<i>diphenoxylate w/ atropine TABS</i>	P		VISTOGARD	P	
IMODIUM A-D CAPS (Use <i>loperamide hcl</i>)	NP	OTC; QL(8 EA daily); RX/OTC	Opioid Antagonists		
IMODIUM A-D TABS (Use <i>loperamide hcl</i>)	NP	OTC; QL(8 EA daily)	<i>naloxone hcl LIQD</i>	P	QL(4 EA per 90 day(s) retail); RX/OTC
LOMOTIL TABS (Use <i>diphenoxylate w/ atropine</i>)	NP		<i>naloxone hcl SOCT</i>	P	QL(2 ML per 90 day(s) retail)
<i>loperamide hcl CAPS</i>	P	OTC; QL(8 EA daily); RX/OTC	<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	QL(2 ML per 90 day(s) retail)
<i>loperamide hcl TABS</i>	P	OTC; QL(8 EA daily)	<i>naloxone hcl SOSY 2 MG/2ML</i>	P	QL(4 ML per 90 day(s) retail)
ANTIDOTES AND SPECIFIC ANTAGONISTS			<i>naltrexone hcl</i>	P	
Antidotes - Chelating Agents			NARCAN LIQD (Use <i>naloxone hcl</i>)	NP	QL(4 EA per 90 day(s) retail); RX/OTC
CHEMET	P		VIVITROL	P	SP
<i>deferasirox PACK</i>	P	SP; PA	ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
<i>deferasirox TABS</i>	P	SP; PA	5-HT3 Receptor Antagonists		
<i>deferasirox TBSO</i>	P	SP; PA	<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P	QL(50 ML per 30 day(s) retail)
<i>deferiprone TABS</i>	P	SP; PA	<i>ondansetron hcl TABS 24 MG</i>	P	QL(1 EA per 14 day(s) retail)
EXJADE TBSO (Use <i>deferasirox</i>)	NP	SP; PA	<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	QL(2 EA daily)
FERRIPROX TWICE-A-DAY TABS	P	SP; PA	<i>ondansetron TBDP 4 MG, 8 MG</i>	P	QL(2 EA daily)
FERRIPROX SOLN	P	SP; PA	<i>ondansetron TBDP 16 MG</i>	P	
FERRIPROX TABS (Use <i>deferiprone</i>)	NP	SP; PA	Antiemetics - Anticholinergic		
JADENU SPRINKLE PACK (Use <i>deferasirox</i>)	NP	SP; PA	ANTIVERT CHEW (Use <i>meclizine hcl</i>)	NP	OTC; RX/OTC
JADENU TABS (Use <i>deferasirox</i>)	NP	SP; PA	<i>dimenhydrinate TABS</i>	P	OTC; QL(24 EA per fill retail)
Antidotes and Specific Antagonists					
ANDEXXA 200 MG	P	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DRAMAMINE CHEW	P	OTC; QL(24 EA per fill retail)	<i>chlorpheniramine maleate SYRP</i>	P	OTC
DRAMAMINE TABS (<i>Use dimenhydrinate</i>)	NP	OTC; QL(24 EA per fill retail)	<i>chlorpheniramine maleate TABS</i>	P	OTC; QL(120 EA per fill retail)
<i>meclizine hcl CHEW</i>	P	OTC; RX/OTC	CHLOR-TRIMETON SYRP (<i>Use chlorpheniramine maleate</i>)	NP	OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	P	RX/OTC	CHLOR-TRIMETON TABS (<i>Use chlorpheniramine maleate</i>)	NP	OTC; QL(120 EA per fill retail)
ANTIFUNGALS - Drugs to Treat Fungal Infections			Antihistamines - Ethanolamines		
Antifungals			BENADRYL ALLERGY CHILDRENS LIQD (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(240 ML per fill retail)
<i>griseofulvin microsize SUSP</i>	P		BENADRYL ALLERGY EXTRA STR TABS	P	QL(4 EA daily)
<i>griseofulvin microsize TABS</i>	P		BENADRYL ALLERGY ULTRATABS TABS (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(4 EA daily)
<i>griseofulvin ultramicrosize</i>	P		BENADRYL ALLERGY CAPS (<i>Use diphenhydramine hcl</i>)	NP	QL(4 EA daily)
<i>nystatin TABS</i>	P	QL(6 EA daily)	BENADRYL ALLERGY TABS (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(4 EA daily)
<i>terbinafine hcl TABS</i>	P	QL(90 EA per 120 day(s) retail)	<i>clemastine fumarate TABS 1.34 MG</i>	P	OTC; QL(2 EA daily)
Imidazole-Related Antifungals			DAYHIST ALLERGY 12 HOUR RELIEF TABS	P	OTC; QL(2 EA daily)
DIFLUCAN SUSR (<i>Use fluconazole</i>)	NP	QL(70 ML per fill retail)	<i>diphenhydramine hcl CAPS</i>	P	QL(4 EA daily)
DIFLUCAN TABS 150 MG (<i>Use fluconazole</i>)	NP	QL(2 EA per fill retail)	<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	P	QL(240 ML per fill retail)
DIFLUCAN TABS 100 MG, 200 MG (<i>Use fluconazole</i>)	NP		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	P	OTC; QL(240 ML per fill retail)
<i>fluconazole SUSR</i>	P	QL(70 ML per fill retail)	<i>diphenhydramine hcl TABS 25 MG</i>	P	OTC; QL(4 EA daily)
<i>fluconazole TABS 50 MG</i>	P	QL(3 EA per 14 day(s) retail)	Antihistamines - Non-Sedating		
<i>fluconazole TABS 100 MG, 200 MG</i>	P				
<i>fluconazole TABS 150 MG</i>	P	QL(2 EA per fill retail)			
<i>itraconazole CAPS</i>	P	QL(1 EA daily); PA			
SPORANOX CAPS (<i>Use itraconazole</i>)	NP	QL(1 EA daily); PA			
ANTIHISTAMINES - Drugs to Treat Allergies					
Antihistamines - Alkylamines					

Georgia Medicaid Updated April 1, 2025
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ALLEGRA ALLERGY TABS 180 MG (Use fexofenadine hcl)	NP	QL(1 EA daily)	XYZAL ALLERGY 24HR TABS (Use levocetirizine dihydrochloride)	NP	RX/OTC
ALLEGRA ALLERGY TABS 60 MG (Use fexofenadine hcl)	NP	QL(2 EA daily)	ZYRTEC ALLERGY TABS (Use cetirizine hcl)	NP	QL(1 EA daily)
cetirizine hcl CHEW	P	QL(1 EA daily)	ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (Use cetirizine hcl)	NP	QL(1 EA daily)
cetirizine hcl SOLN PO	P	QL(240 ML per fill retail); RX/OTC	ZYRTEC CHILDRENS ALLERGY SOLN PO (Use cetirizine hcl)	NP	QL(240 ML per fill retail); RX/OTC
cetirizine hcl SYRP PO	P	QL(240 ML per fill retail); RX/OTC	ZYRTEC CHEW 10 MG (Use cetirizine hcl)	NP	QL(1 EA daily)
cetirizine hcl TABS	P	QL(1 EA daily)	Antihistamines - Phenothiazines		
CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine)	NP	OTC; QL(240 ML per fill retail)	promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML	P	AL(At least 2 yrs old)
CLARITIN REDITABS JUNIORS TBDP (Use loratadine)	NP	OTC; QL(1 EA daily)	promethazine hcl SUPP	P	QL(12 EA per fill retail); AL(At least 2 yrs old)
CLARITIN REDITABS TBDP 10 MG (Use loratadine)	NP	OTC; QL(1 EA daily)	promethazine hcl TABS	P	AL(At least 2 yrs old)
CLARITIN REDITABS TBDP 5 MG (Use loratadine)	NF		Antihistamines - Piperidines		
CLARITIN SOLN (Use loratadine)	NP	OTC; QL(240 ML per fill retail)	ciproheptadine hcl SYRP	P	
CLARITIN TABS (Use loratadine)	NP	OTC; QL(1 EA daily)	ciproheptadine hcl TABS	P	
fexofenadine hcl TABS 60 MG	P	QL(2 EA daily)	ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
fexofenadine hcl TABS 180 MG	P	QL(1 EA daily)	Angiotensin-like Protein Inhibitors		
levocetirizine dihydrochloride TABS	P	RX/OTC	EVKEEZA	P	SP; PA
loratadine SOLN	P	OTC; QL(240 ML per fill retail)	Antihyperlipidemics - Combinations		
loratadine TABS	P	OTC; QL(1 EA daily)	ezetimibe-simvastatin	P	QL(1 EA daily); ST
loratadine TBDP 10 MG	P	OTC; QL(1 EA daily)	VYTORIN (Use ezetimibe-simvastatin)	NP	QL(1 EA daily); ST
			Bile Acid Sequestrants		
			cholestyramine light PACK	P	
			cholestyramine light POWD	P	
			cholestyramine PACK	P	

Georgia Medicaid Updated April 1, 2025
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<i>cholestyramine POWD</i>	P		<i>pravastatin sodium</i>	P	QL(1 EA daily)
COLESTID FLAVORED GRAN (<i>Use colestipol hcl</i>)	NP		<i>rosuvastatin calcium TABS</i>	P	Try simvastatin or atorvastatin; QL(1 EA daily); ST
COLESTID GRAN (<i>Use colestipol hcl</i>)	NP		<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 EA daily)
COLESTID TABS (<i>Use colestipol hcl</i>)	NP		ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>Use simvastatin</i>)	NP	QL(1 EA daily)
<i>colestipol hcl GRAN</i>	P		Intestinal Cholesterol Absorption Inhibitors		
<i>colestipol hcl TABS</i>	P		<i>ezetimibe</i>	P	ST
QUESTRAN LIGHT POWD (<i>Use cholestyramine light</i>)	NP		ZETIA (<i>Use ezetimibe</i>)	NP	ST
QUESTRAN PACK (<i>Use cholestyramine</i>)	NP		Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
QUESTRAN POWD (<i>Use cholestyramine</i>)	NP		JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	P	SP; PA
Fibric Acid Derivatives			Nicotinic Acid Derivatives		
ANTARA 90 MG (<i>Use fenofibrate micronized</i>)	NF		<i>niacin (antihyperlipidemic) TABS</i>	P	
<i>fenofibrate micronized 134 MG, 200 MG</i>	P	QL(1 EA daily)	<i>niacin (antihyperlipidemic) TBCR</i>	P	
<i>fenofibrate micronized 67 MG</i>	P	QL(2 EA daily)	Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
<i>fenofibrate TABS 160 MG</i>	P	QL(1 EA daily)	LEQVIO	P	SP; PA
<i>fenofibrate TABS 54 MG</i>	P	QL(3 EA daily)	PRALUENT SOAJ	P	SP; PA
FENOGLIDE TABS (<i>Use fenofibrate</i>)	NF		REPATHA PUSHTRONEX SYSTEM SOCT	P	SP; PA
<i>gemfibrozil TABS</i>	P	QL(2 EA daily)	REPATHA SURECLICK SOAJ	P	SP; PA
LOPID TABS (<i>Use gemfibrozil</i>)	NP	QL(2 EA daily)	REPATHA SOSY	P	SP; PA
HMG CoA Reductase Inhibitors			ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
<i>atorvastatin calcium TABS</i>	P	QL(1 EA daily)	ACE Inhibitors		
CRESTOR TABS (<i>Use rosuvastatin calcium</i>)	NP	Try simvastatin or atorvastatin; QL(1 EA daily); ST	ACCUPRIL (<i>Use quinapril hcl</i>)	NP	
LIPITOR TABS (<i>Use atorvastatin calcium</i>)	NP	QL(1 EA daily)			
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 EA daily)			
<i>lovastatin TABS 40 MG</i>	P	QL(2 EA daily)			

Georgia Medicaid

Updated April 1, 2025

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ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (Use ramipril)	NP	QL(2 EA daily)	candesartan cilexetil	P	
benazepril hcl 5 MG, 10 MG, 20 MG	P	QL(1 EA daily)	COZAAR (Use losartan potassium)	NP	QL(1 EA daily)
benazepril hcl 40 MG	P	QL(2 EA daily)	DIOVAN TABS (Use valsartan)	NP	QL(1 EA daily)
captopril	P	QL(3 EA daily)	irbesartan	P	QL(1 EA daily)
enalapril maleate TABS	P	QL(2 EA daily)	losartan potassium	P	QL(1 EA daily)
fosinopril sodium	P	QL(1 EA daily)	MICARDIS (Use telmisartan)	NP	QL(1 EA daily)
lisinopril TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	P	QL(2 EA daily)	olmesartan medoxomil	P	Use losartan or irbesartan; QL(1 EA daily); ST
lisinopril TABS 2.5 MG	P	QL(1 EA daily)	telmisartan	P	QL(1 EA daily)
LOTENSIN 40 MG (Use benazepril hcl)	NP	QL(2 EA daily)	valsartan TABS	P	QL(1 EA daily)
LOTENSIN 10 MG, 20 MG (Use benazepril hcl)	NP	QL(1 EA daily)	Antiadrenergic Antihypertensives		
quinapril hcl	P		CARDURA (Use doxazosin mesylate)	NP	
ramipril CAPS	P	QL(2 EA daily)	clonidine hcl TABS	P	
trandolapril 1 MG, 2 MG	P	QL(1 EA daily)	doxazosin mesylate	P	
trandolapril 4 MG	P	QL(2 EA daily)	guanfacine hcl	P	
VASOTEC TABS (Use enalapril maleate)	NP	QL(2 EA daily)	methyldopa TABS	P	
ZESTRIL TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG (Use lisinopril)	NP	QL(2 EA daily)	MINIPRESS CAPS (Use prazosin hcl)	NP	
ZESTRIL TABS 2.5 MG (Use lisinopril)	NP	QL(1 EA daily)	prazosin hcl CAPS	P	
Agents for Pheochromocytoma			terazosin hcl	P	
DEMSEER (Use metyrosine)	NP	SP; PA	Antihypertensive Combinations		
metyrosine	P	SP; PA	ACCURETIC 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	NP	QL(3 EA daily)
Angiotensin II Receptor Antagonists			ACCURETIC 25 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(2 EA daily)
ATACAND (Use candesartan cilexetil)	NP		ACCURETIC 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(4 EA daily)
AVAPRO 150 MG, 300 MG (Use irbesartan)	NP	QL(1 EA daily)	amlodipine besylate-benazepril hcl	P	QL(1 EA daily)
BENICAR (Use olmesartan medoxomil)	NP	Use losartan or irbesartan; QL(1 EA daily); ST	amlodipine besylate-olmesartan medoxomil	P	Use losartan or irbesartan; ST

Georgia Medicaid Updated April 1, 2025
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<i>amlodipine besylate-valsartan</i>	P	Use losartan or irbesartan; ST	<i>HYZAAR (Use losartan potassium & hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	Use losartan or irbesartan; ST	<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)</i>	NP		<i>lisinopril & hydrochlorothiazide 25 MG-20 MG</i>	P	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	P	QL(2 EA daily)	<i>lisinopril & hydrochlorothiazide 12.5 MG-10 MG, 12.5 MG-20 MG</i>	P	QL(2 EA daily)
<i>AVALIDE (Use irbesartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>AZOR (Use amlodipine besylate-olmesartan medoxomil)</i>	NP	Use losartan or irbesartan; ST	<i>LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>benazepril & hydrochlorothiazide</i>	P	QL(1 EA daily)	<i>LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)</i>	NP	QL(1 EA daily)
<i>BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide)</i>	NP	Use losartan or irbesartan; QL(1 EA daily); ST	<i>metoprolol & hydrochlorothiazide TABS 50 MG-100 MG</i>	P	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide</i>	P	QL(1 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	P	QL(2 EA daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	P		<i>MICARDIS HCT (Use telmisartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	P	QL(2 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	P	Use losartan or irbesartan; ST
<i>captopril & hydrochlorothiazide 25 MG-50 MG</i>	P	QL(3 EA daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	P	Use losartan or irbesartan; QL(1 EA daily); ST
<i>DIOVAN HCT (Use valsartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	P	QL(4 EA daily)
<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(2 EA daily)			
<i>EXFORGE (Use amlodipine besylate-valsartan)</i>	NP	Use losartan or irbesartan; ST			
<i>EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)</i>	NP	Use losartan or irbesartan; ST			
<i>fosinopril sodium & hydrochlorothiazide</i>	P	QL(1 EA daily)			

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	P	QL(2 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	P	QL(3 EA daily)
<i>telmisartan-amlodipine</i>	P	
<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
TENORETIC 100 (Use atenolol & chlorthalidone)	NP	QL(2 EA daily)
TENORETIC 50 (Use atenolol & chlorthalidone)	NP	QL(2 EA daily)
<i>trandolapril-verapamil hcl</i>	P	
TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NP	Use losartan or irbesartan; ST
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)	NP	QL(2 EA daily)
ZESTORETIC 12.5 MG-10 MG, 12.5 MG-20 MG (Use lisinopril & hydrochlorothiazide)	NP	QL(2 EA daily)
ZESTORETIC 25 MG-20 MG (Use lisinopril & hydrochlorothiazide)	NP	QL(1 EA daily)
ZIAC (Use bisoprolol & hydrochlorothiazide)	NP	QL(1 EA daily)
Antihypertensives - Misc.		
VECAMYL	P	SP; PA
Vasodilators		
<i>hydralazine hcl TABS</i>	P	
<i>minoxidil 2.5 MG</i>	P	QL(3 EA daily)
<i>minoxidil 10 MG</i>	P	QL(10 EA daily)
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/ Limits
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	P	
<i>trimethoprim TABS</i>	P	
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim)	NP	
BACTRIM TABS (Use sulfamethoxazole-trimethoprim)	NP	
<i>methenamine-hyosc-methylene blue-sod phospheryl sal TABS 81.6 MG</i>	P	
<i>sulfamethoxazole-trimethoprim SUSP</i>	P	
<i>sulfamethoxazole-trimethoprim TABS</i>	P	
Carbapenems		
<i>ertapenem sodium IJ</i>	P	SP; PA
INVANZ IJ (Use ertapenem sodium)	NP	SP; PA
Glycopeptides		
FIRVANQ SOLR PO (Use vancomycin hcl)	NP	QL(300 ML per fill retail)
VANCOCIN CAPS 125 MG (Use vancomycin hcl)	NP	QL(4 EA daily)
VANCOCIN CAPS 250 MG (Use vancomycin hcl)	NP	QL(8 EA daily)
<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 EA daily)
<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 EA daily)
<i>vancomycin hcl SOLR IV 1 GM</i>	P	QL(14 EA per fill retail)
<i>vancomycin hcl SOLR IV 500 MG</i>	P	QL(14 EA per 30 day(s) retail)
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	QL(300 ML per fill retail)

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits
VANCOMYCIN HCL SOLR IV 1 GM	P	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 500 MG	P	QL(14 EA per 30 day(s) retail)
Leprostatics		
dapsone	P	
Lincosamides		
CLEOCIN (Use clindamycin palmitate hydrochloride)	NP	QL(300 ML per fill retail)
CLEOCIN 150 MG, 300 MG (Use clindamycin hcl)	NP	
clindamycin hcl 150 MG, 300 MG	P	
clindamycin palmitate hydrochloride	P	QL(300 ML per fill retail)
Monobactams		
CAYSTON	P	SP; PA
Oxazolidinones		
SIVEXTRO TABS	P	QL(6 EA per fill retail); PA
Pleuromutilins		
XENLETA TABS	P	SP; PA
Urinary Anti-infectives		
MACROBID (Use nitrofurantoin monohyd macro)	NP	
MACRODANTIN 50 MG, 100 MG (Use nitrofurantoin macrocrystal)	NP	
methenamine mandelate	P	
nitrofurantoin	P	QL(40 ML daily)
nitrofurantoin macrocrystal 50 MG, 100 MG	P	
nitrofurantoin monohyd macro	P	
ANTIMALARIALS - Drugs to Treat Malaria		

Drug Name	Drug Tier	Requirements/ Limits
(Parasitic Infections)		
Antimalarial Combinations		
COARTEM	P	QL(24 EA per fill retail)
Antimalarials		
chloroquine phosphate TABS 500 MG	P	QL(1 EA daily)
chloroquine phosphate TABS 250 MG	P	
DARAPRIM (Use pyrimethamine)	NP	SP; PA
hydroxychloroquine sulfate 200 MG	P	
KRINTAFEL	P	QL(2 EA per 30 day(s) retail)
mefloquine hcl	P	
PLAQUENIL (Use hydroxychloroquine sulfate)	NP	
primaquine phosphate TABS	P	
PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)	NP	
pyrimethamine	P	SP; PA
SOVUNA 200 MG	P	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
MESTINON TABS (Use pyridostigmine bromide)	NP	
MESTINON TBCR (Use pyridostigmine bromide)	NP	
pyridostigmine bromide TABS 60 MG	P	
pyridostigmine bromide TBCR	P	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ethambutol hcl TABS</i>	P		<i>cyclophosphamide SOLR IJ</i>	P	SP; PA
<i>isoniazid SYRP</i>	P		EVOMELA IV	P	SP; PA
<i>isoniazid TABS</i>	P		KEMOPLAT SOLN	P	SP; PA
MYAMBUTOL TABS 400 MG (<i>Use ethambutol hcl</i>)	NP		LEUKERAN	P	
MYCOBUTIN (<i>Use rifabutin</i>)	NP		<i>melphalan</i>	P	
<i>pyrazinamide</i>	P		<i>melphalan hcl IV</i>	P	SP; PA
<i>rifabutin</i>	P		MYLERAN TABS	P	
<i>rifampin CAPS</i>	P		TEMODAR SOLR	P	SP; PA
TRECTOR	P		<i>temozolomide CAPS</i>	P	SP; PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			TEPADINA (<i>Use thiotepa</i>)	NP	SP; PA
Alkylating Agents			<i>thiotepa</i>	P	SP; PA
ALKERAN IV (<i>Use melphalan hcl</i>)	NP	SP; PA	TREANDA SOLR (<i>Use bendamustine hcl</i>)	NP	SP; PA
ALKERAN (<i>Use melphalan</i>)	NP		VIVIMUSTA SOLN	P	SP; PA
BELRAPZO SOLN	P	SP; PA	YONDELIS	P	SP; PA
BENDAMUSTINE HCL SOLN	P	SP; PA	ZEPZELCA	P	SP; PA
<i>bendamustine hcl SOLR</i>	P	SP; PA	Antimetabolites		
BENDEKA SOLN	P	SP; PA	ALIMTA SOLR (<i>Use pemetrexed disodium</i>)	NP	SP; PA
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	P	SP; PA	<i>azacitidine SUSR</i>	P	SP; PA
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	P	SP; PA	<i>capecitabine</i>	P	SP; PA
CISPLATIN SOLR	P	SP; PA	<i>cladribine 10 MG/10ML</i>	P	SP; PA
<i>cyclophosphamide SOLN</i>	P	SP; PA	<i>cytarabine SOLN</i>	P	SP; PA
CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML, 500 MG/2.5ML	P	SP; PA	<i>decitabine</i>	P	SP; PA
CYCLOPHOSPHAMIDE SOLN (<i>Use cyclophosphamide</i>)	NP	SP; PA	<i>fludarabine phosphate SOLN</i>	P	SP; PA
			FLUDARABINE PHOSPHATE SOLN	P	SP; PA
			<i>fludarabine phosphate SOLR</i>	P	SP; PA
			FOLOTYN	P	SP; PA
			<i>mercaptopurine SUSP 2000 MG/100ML</i>	P	
			<i>mercaptopurine TABS</i>	P	

Georgia Medicaid Updated April 1, 2025
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<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P		LENVIMA (8 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA
<i>methotrexate sodium TABS 2.5 MG</i>	P		MVASI	P	SP; PA
ONUREG TABS	P	SP; PA	ZALTRAP	P	SP; PA
PEMETREXED 500 MG/20ML	P	SP; PA	ZIRABEV	P	SP; PA
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	P	SP; PA	Antineoplastic - Antibodies		
PEMFEXY	P	SP; PA	ADCETRIS	P	SP; PA
<i>pralatrexate</i>	P	SP; PA	ARZERRA	P	SP; PA
PURIXAN SUSP 2000 MG/100ML (<i>Use mercaptopurine</i>)	NP		BAVENCIO	P	SP; PA
TABLOID	P	SP; PA	BESPOUSA	P	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	P		BLENREP	P	SP; PA
VIDAZA SUSR (<i>Use azacitidine</i>)	NP	SP; PA	BLINCYTO	P	SP; PA
XELODA (<i>Use capecitabine</i>)	NP	SP; PA	DARZALEX	P	SP; PA
Antineoplastic - Angiogenesis Inhibitors			EMPLICITI	P	SP; PA
CYRAMZA	P	SP; PA	ENHERTU	P	SP; PA
INLYTA	P	SP; PA	GAZYVA	P	SP; PA
LENVIMA (10 MG DAILY DOSE)	P	QL(1 EA daily); SP; PA	IMFINZI	P	SP; PA
LENVIMA (12 MG DAILY DOSE)	P	QL(3 EA daily); SP; PA	JEMPERLI	P	SP; PA
LENVIMA (14 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	KADCYLA	P	SP; PA
LENVIMA (18 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	KEYTRUDA	P	SP; PA
LENVIMA (20 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	KIMMTRAK	P	SP; PA
LENVIMA (24 MG DAILY DOSE)	P	QL(3 EA daily); SP; PA	LIBTAYO	P	SP; PA
LENVIMA (4 MG DAILY DOSE)	P	QL(1 EA daily); SP; PA	LUMOXITI	P	SP; PA
			MONJUVI	P	SP; PA
			OPDIVO	P	SP; PA
			PADCEV	P	SP; PA
			POLIVY	P	SP; PA
			POTELIGEO	P	SP; PA
			RIABNI	P	SP; PA
			RITUXAN	P	SP; PA
			RUXIENCE	P	SP; PA
			TECENTRIQ	P	SP; PA
			TIVDAK	P	SP; PA
			TRUXIMA	P	SP; PA
			UNITUXIN	P	SP; PA
			YERVOY	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZEVALIN Y-90	P	SP; PA	ODOMZO	P	SP; PA
ZYNLONTA	P	SP; PA	Antineoplastic - Hormonal and Related Agents		
Antineoplastic - Anti-HER2 Agents			<i>abiraterone acetate</i>	P	SP; PA
HERCEPTIN 150 MG	P	SP; PA	<i>anastrozole</i>	P	
KANJINTI 420 MG	P	SP; PA	ARIMIDEX (<i>Use anastrozole</i>)	NP	
MARGENZA	P	SP; PA	AROMASIN (<i>Use exemestane</i>)	NP	
OGIVRI	P	SP; PA	<i>bicalutamide</i>	P	QL(1 EA daily)
PERJETA	P	SP; PA	CASODEX (<i>Use bicalutamide</i>)	NP	QL(1 EA daily)
TRAZIMERA	P	SP; PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	P	SP; PA
TUKYSA	P	SP; PA	ELIGARD KIT SC 7.5 MG	P	SP; PA
Antineoplastic - BCL-2 Inhibitors			EMCYT	P	SP; PA
VENCLEXTA STARTING PACK TBPK	P	SP; PA	ERLEADA 60 MG	P	SP; PA
VENCLEXTA TABS	P	SP; PA	EULEXIN	P	
Antineoplastic - Cellular Immunotherapy			<i>exemestane</i>	P	
ABECMA	P	SP; PA	FARESTON (<i>Use toremifene citrate</i>)	NP	PA
BREYANZI	P	SP; PA	FEMARA (<i>Use letrozole</i>)	NP	
CARVYKTI	P	SP; PA	<i>hydroxyprogesterone caproate (antineoplastic)</i>	P	SP; PA
TECARTUS	P	SP; PA	<i>letrozole</i>	P	
Antineoplastic - EGFR Inhibitors			LEUPROLIDE ACETATE-BUPIVACAINE	P	SP; PA
ERBITUX	P	SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	P	SP; PA
<i>erlotinib hcl</i>	P	SP; PA	LYSODREN	P	SP; PA
EXKIVITY	P	SP; PA	<i>megestrol acetate SUSP</i>	P	
<i>gefitinib</i>	P	SP; PA	<i>megestrol acetate TABS</i>	P	
GILOTRIF	P	SP; PA	NUBEQA	P	SP; PA
IRESSA (<i>Use gefitinib</i>)	NP	SP; PA	<i>tamoxifen citrate TABS</i>	P	
PORTRAZZA	P	SP; PA	<i>toremifene citrate</i>	P	PA
TAGRISSO	P	SP; PA	XTANDI CAPS	P	SP; PA
TARCEVA (<i>Use erlotinib hcl</i>)	NP	SP; PA	XTANDI TABS	P	SP; PA
VECTIBIX 100 MG/5ML, 400 MG/20ML	P	SP; PA	YONSA	P	SP; PA
VIZIMPRO	P	SP; PA	ZOLADEX	P	SP; PA
Antineoplastic - Hedgehog Pathway Inhibitors					
DAURISMO	P	SP; PA			
ERIVEDGE	P	SP; PA			

Georgia Medicaid

Updated April 1, 2025

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ZYTIGA (<i>Use abiraterone acetate</i>)	NP	SP; PA	DARZALEX FASPRO	P	SP; PA
Antineoplastic - Hypoxia-Inducible Factor Inhibitors			HERCEPTIN HYLECTA	P	SP; PA
WELIREG	P	SP; PA	INQOVI	P	SP; PA
Antineoplastic - Immunomodulators			KISQALI FEMARA (200 MG DOSE)	P	SP; PA
POMALYST	P	SP; PA	KISQALI FEMARA (400 MG DOSE)	P	SP; PA
Antineoplastic - PDGFR-alpha Inhibitors			KISQALI FEMARA (600 MG DOSE)	P	SP; PA
AYVAKIT	P	QL(1 EA daily); SP; PA	LONSURF	P	SP; PA
Antineoplastic - XPO1 Inhibitors			OPDUALAG	P	SP; PA
XPOVIO (100 MG ONCE WEEKLY) 50 MG	P	SP; PA	PHESGO	P	SP; PA
XPOVIO (40 MG ONCE WEEKLY) 40 MG	P	SP; PA	RITUXAN HYCELA	P	SP; PA
XPOVIO (40 MG TWICE WEEKLY) 40 MG	P	SP; PA	VYXEOS	P	SP; PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG	P	SP; PA	Antineoplastic Enzyme Inhibitors		
XPOVIO (60 MG TWICE WEEKLY)	P	SP; PA	AFINITOR DISPERZ TBSO (<i>Use everolimus</i>)	NP	SP; PA
XPOVIO (80 MG ONCE WEEKLY) 40 MG	P	SP; PA	AFINITOR TABS (<i>Use everolimus</i>)	NP	SP; PA
XPOVIO (80 MG TWICE WEEKLY)	P	SP; PA	ALECENSA	P	SP; PA
Antineoplastic Antibiotics			ALUNBRIG TABS	P	SP; PA
<i>daunorubicin hcl SOLN</i>	P	SP; PA	ALUNBRIG TBPk	P	SP; PA
DAUNORUBICIN HCL SOLN (<i>Use daunorubicin hcl</i>)	NP	SP; PA	BALVERSA	P	SP; PA
ELLENCE SOLN	P	SP; PA	BELEODAQ	P	SP; PA
<i>mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML</i>	P	SP; PA	<i>bortezomib SOLR IJ</i>	P	SP; PA
<i>valrubicin</i>	P	SP; PA	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	P	SP; PA
VALSTAR (<i>Use valrubicin</i>)	NP	SP; PA	BOSULIF TABS	P	SP; PA
Antineoplastic Combinations			BRAFTOVI 75 MG	P	SP; PA
			BRUKINSA	P	SP; PA
			CABOMETYX TABS 20 MG, 60 MG	P	QL(1 EA daily); SP; PA
			CABOMETYX TABS 40 MG	P	QL(2 EA daily); SP; PA
			CAPRELSA	P	SP; PA
			COMETRIQ (100 MG DAILY DOSE) KIT	P	SP; PA
			COMETRIQ (140 MG DAILY DOSE) KIT	P	SP; PA

Georgia Medicaid Updated April 1, 2025
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COMETRIQ (60 MG DAILY DOSE) KIT	P	SP; PA	NEXAVAR (Use sorafenib tosylate)	NP	SP; PA
COPIKTRA	P	SP; PA	NINLARO	P	SP; PA
COTELLIC	P	SP; PA	pazopanib hcl	P	SP; PA
dasatinib	P	SP; PA	PEMAZYRE	P	SP; PA
everolimus TABS	P	SP; PA	PIQRAY (200 MG DAILY DOSE)	P	SP; PA
everolimus TBSO	P	SP; PA	PIQRAY (250 MG DAILY DOSE)	P	SP; PA
FOTIVDA	P	SP; PA	PIQRAY (300 MG DAILY DOSE)	P	SP; PA
FYARRO	P	SP; PA	QINLOCK	P	SP; PA
GAVRETO	P	SP; PA	RETEVMO CAPS	P	SP; PA
GLEEVEC TABS (Use imatinib mesylate)	NP	SP; PA	ROMIDEPSIN SOLN	P	SP; PA
IBRANCE CAPS	P	SP; PA	romidepsin SOLR	P	SP; PA
IBRANCE TABS	P	SP; PA	ROZLYTREK CAPS	P	SP; PA
ICLUSIG	P	QL(1 EA daily); SP; PA	RUBRACA	P	SP; PA
IDHIFA	P	SP; PA	RYDAPT	P	SP; PA
imatinib mesylate TABS	P	SP; PA	SCEMBLIX 20 MG, 40 MG	P	SP; PA
IMBRUVICA CAPS	P	SP; PA	SCEMBLIX 100 MG	P	SP
IMBRUVICA TABS	P	QL(1 EA daily); SP; PA	sorafenib tosylate	P	SP; PA
INREBIC	P	SP; PA	SPRYCEL (Use dasatinib)	NP	SP; PA
ISTODAX SOLR (Use romidepsin)	NP	SP; PA	STIVARGA	P	SP; PA
JAKAFI	P	QL(2 EA daily); SP; PA	sunitinib malate	P	SP; PA
KISQALI (200 MG DOSE)	P	SP; PA	SUTENT (Use sunitinib malate)	NP	SP; PA
KISQALI (400 MG DOSE)	P	SP; PA	TABRECTA	P	SP; PA
KISQALI (600 MG DOSE)	P	SP; PA	TAFINLAR CAPS	P	SP; PA
KOSELUGO	P	SP; PA	TALZENNA	P	SP; PA
KYPROLIS	P	SP; PA	TASIGNA	P	SP; PA
lapatinib ditosylate	P	SP; PA	TAZVERIK	P	SP; PA
LORBRENA	P	SP; PA	temsirolimus	P	SP; PA
LUMAKRAS	P	SP; PA	TIBSOVO	P	SP; PA
LYNPARZA TABS	P	QL(4 EA daily); SP; PA	TORISEL (Use temsirolimus)	NP	SP; PA
MEKINIST TABS	P	SP; PA	TURALIO 125 MG	P	SP; PA
MEKTOVI	P	SP; PA	TYKERB (Use lapatinib ditosylate)	NP	SP; PA
NERLYNX	P	SP; PA			

Georgia Medicaid Updated April 1, 2025
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VELCADE SOLR IJ (<i>Use bortezomib</i>)	NP	SP; PA	SYNRIBO	P	SP; PA
VERZENIO	P	QL(2 EA daily); SP; PA	TARGRETIN (<i>Use bexarotene</i>)	NP	SP; PA
VITRAKVI CAPS	P	SP; PA	<i>tretinoin (chemotherapy)</i>	P	SP; PA
VITRAKVI SOLN	P	SP; PA	TRISENOX (<i>Use arsenic trioxide</i>)	NP	SP; PA
VONJO	P	SP; PA	Chemotherapy Adjuncts		
VOTRIENT	P	SP; PA	KEPIVANCE 6.25 MG	P	SP; PA
VOTRIENT (<i>Use pazopanib hcl</i>)	NP	SP; PA	KEPIVANCE 5.16 MG	P	SP
XALKORI CAPS	P	SP; PA	Chemotherapy Rescue/Antidote/Protective Agents		
XOSPATA	P	SP; PA	<i>dexrazoxane hcl</i>	P	SP; PA
ZEJULA CAPS	P	SP; PA	KHAPZORY	P	SP; PA
ZELBORAF	P	SP; PA	<i>leucovorin calcium TABS</i>	P	
ZOLINZA	P	SP; PA	<i>levoleucovorin calcium SOLN 250 MG/25ML</i>	P	SP; PA
ZYDELIG	P	SP; PA	<i>levoleucovorin calcium SOLR</i>	P	SP; PA
ZYKADIA TABS	P	SP; PA	<i>mesna SOLN</i>	P	SP; PA
Antineoplastic Enzymes			<i>mesna TABS</i>	P	SP; PA
ASPARLAS	P	SP; PA	MESNEX SOLN (<i>Use mesna</i>)	NP	SP; PA
ONCASPAS	P	SP; PA	MESNEX TABS	P	SP; PA
RYLAZE	P	SP; PA	VORAXAZE	P	SP; PA
Antineoplastic Radiopharmaceuticals			Mitotic Inhibitors		
AZEDRA DOSIMETRIC	P	SP; PA	ABRAXANE (<i>Use paclitaxel protein-bound particles</i>)	NP	SP; PA
AZEDRA THERAPEUTIC	P	SP; PA	<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	P	SP; PA
Antineoplastics Misc.			DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (<i>Use docetaxel</i>)	NP	SP; PA
ACTIMMUNE 100 MCG/0.5ML	P	SP; PA	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	P	SP; PA
ALFERON N	P	SP; PA	<i>docetaxel SOLN</i>	P	SP; PA
<i>arsenic trioxide</i>	P	SP; PA	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	P	SP; PA
BESREMI	P	SP; PA			
<i>bexarotene</i>	P	SP; PA			
HYDREA (<i>Use hydroxyurea</i>)	NP				
<i>hydroxyurea</i>	P				
MATULANE	P	SP; PA			
PHOTOFRIN	P	SP; PA			
PROLEUKIN	P	SP; PA			

Georgia Medicaid

Updated April 1, 2025

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DOCETAXEL SOLN (<i>Use docetaxel</i>)	NP	SP; PA	<i>benztropine mesylate TABS</i>	P	
DOCIVYX SOLN	P	SP; PA	<i>trihexyphenidyl hcl TABS</i>	P	
<i>eribulin mesylate</i>	P	SP; PA	Antiparkinson Dopaminergics		
<i>etoposide CAPS</i>	P	SP; PA	<i>amantadine hcl CAPS</i>	P	
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	P	SP; PA	<i>amantadine hcl SOLN</i>	P	
HALAVEN (<i>Use eribulin mesylate</i>)	NP	SP; PA	APOKYN SOCT	P	SP; PA
IXEMPRA KIT	P	SP; PA	<i>apomorphine hydrochloride SOCT</i>	P	SP; PA
JEVTANA	P	SP; PA	<i>bromocriptine mesylate CAPS</i>	P	
PACLITAXEL PROTEIN-BOUND PART	P	SP; PA	<i>bromocriptine mesylate TABS 2.5 MG</i>	P	
<i>paclitaxel protein-bound particles</i>	P	SP; PA	<i>carbidopa-levodopa TABS</i>	P	
<i>vincristine sulfate</i>	P	SP; PA	<i>carbidopa-levodopa TBCR</i>	P	
Oncolytic Viral Agents			DHIVY TABS	P	
IMLYGIC	P	SP; PA	GOCOVRI CP24	P	SP; PA
Topoisomerase I Inhibitors			PARLODEL CAPS (<i>Use bromocriptine mesylate</i>)	NP	
CAMPTOSAR (<i>Use irinotecan hcl</i>)	NP	SP; PA	PARLODEL TABS (<i>Use bromocriptine mesylate</i>)	NP	
HYCANTIN CAPS	P	SP; PA	<i>pramipexole dihydrochloride TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
HYCANTIN SOLR (<i>Use topotecan hcl</i>)	NP	SP; PA	<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 EA daily)
<i>irinotecan hcl</i>	P	SP; PA	<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily)
<i>topotecan hcl SOLN</i>	P	SP; PA	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>Use carbidopa-levodopa</i>)	NP	
TOPOTECAN HCL SOLN	P	SP; PA	Antiparkinson Monoamine Oxidase Inhibitors		
TOPOTECAN HCL SOLN (<i>Use topotecan hcl</i>)	NP	SP; PA	<i>selegiline hcl CAPS</i>	P	
<i>topotecan hcl SOLR</i>	P	SP; PA	<i>selegiline hcl TABS</i>	P	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antiparkinson Adjunctive Therapy			Antimanic Agents		
<i>carbidopa</i>	P				
LODOSYN (<i>Use carbidopa</i>)	NP				
Antiparkinson Anticholinergics					

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>lithium</i>	P		<i>risperidone TABS</i>	P	QL(4 EA daily); AL(At least 5 yrs old)
<i>lithium carbonate CAPS</i>	P		<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 5 yrs old)
<i>lithium carbonate TABS</i>	P		Butyrophenones		
<i>lithium carbonate TBCR</i>	P		HALDOL DECANOATE (Use <i>haloperidol decanoate</i>)	NP	
LITHOBID TBCR (Use <i>lithium carbonate</i>)	P		<i>haloperidol decanoate</i>	P	
Antipsychotics - Misc.			<i>haloperidol lactate CONC</i>	P	
GEODON (Use <i>ziprasidone hcl</i>)	NP	QL(2 EA daily); AL(At least 18 yrs old)	<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	P	QL(3 EA daily)
LATUDA (Use <i>lurasidone hcl</i>)	NP		<i>haloperidol TABS 20 MG</i>	P	
<i>lurasidone hcl</i>	P		Dibenzapines		
NUPLAZID CAPS	P	QL(1 EA daily); PA	<i>clozapine TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
NUPLAZID TABS 10 MG	P	QL(1 EA daily); PA	CLOZARIL TABS (Use <i>clozapine</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
<i>ziprasidone hcl</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	<i>loxapine succinate</i>	P	QL(4 EA daily)
Benzisoxazoles			<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	P	SP; PA	<i>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old)
INVEGA HAFYERA	P	SP; PA	<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
INVEGA SUSTENNA	P	SP; PA	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
INVEGA TRINZA	P	SP; PA	<i>quetiapine fumarate TABS 100 MG, 200 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
PERSERIS PRSY	P	SP; PA	<i>quetiapine fumarate TABS 25 MG, 50 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old - Up to 17 yrs old)
RISPERDAL CONSTA (Use <i>risperidone microspheres</i>)	NP	SP; PA	SEROQUEL TABS 100 MG, 200 MG (Use <i>quetiapine fumarate</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)
RISPERDAL SOLN (Use <i>risperidone</i>)	NP	QL(4 ML daily); AL(At least 5 yrs old)			
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use <i>risperidone</i>)	NP	QL(4 EA daily); AL(At least 5 yrs old)			
<i>risperidone microspheres</i>	P	SP; PA			
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 5 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits
SEROQUEL TABS 300 MG, 400 MG (<i>Use quetiapine fumarate</i>)	NP	QL(2 EA daily); AL(At least 10 yrs old)
SEROQUEL TABS 25 MG, 50 MG (<i>Use quetiapine fumarate</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old - Up to 17 yrs old)
ZYPREXA RELPREVV	P	SP; PA
ZYPREXA TABS 15 MG, 20 MG (<i>Use olanzapine</i>)	NP	QL(1 EA daily); AL(At least 10 yrs old)
ZYPREXA TABS 7.5 MG, 10 MG (<i>Use olanzapine</i>)	NP	QL(2 EA daily); AL(At least 10 yrs old)
ZYPREXA TABS 2.5 MG, 5 MG (<i>Use olanzapine</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)
Dihydroindolones		
<i>molindone hcl</i>	P	QL(4 EA daily)
Phenothiazines		
<i>chlorpromazine hcl TABS 10 MG</i>	P	QL(10 EA daily)
<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(3 EA daily)
<i>fluphenazine decanoate</i>	P	
<i>fluphenazine hcl TABS</i>	P	
<i>perphenazine TABS</i>	P	QL(4 EA daily)
<i>prochlorperazine</i>	P	
<i>prochlorperazine maleate TABS</i>	P	
<i>thioridazine hcl</i>	P	QL(3 EA daily)
<i>trifluoperazine hcl TABS</i>	P	QL(2 EA daily)
Quinolone Derivatives		
ABILIFY MAINTENA PRSY	P	SP; PA
ABILIFY MAINTENA SRER	P	SP; PA
ABILIFY TABS (<i>Use aripiprazole</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>aripiprazole SOLN PO</i>	P	QL(750 ML per fill retail); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>aripiprazole TBDP</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
ARISTADA	P	SP; PA
ARISTADA INITIO	P	SP; PA
Thioxanthenes		
<i>thiothixene</i>	P	QL(3 EA daily)
ANTISEPTICS & DISINFECTANTS		
Antiseptics & Disinfectants		
<i>formaldehyde SOLN 10 %</i>	P	QL(90 ML per fill retail)
Chlorine Antiseptics		
<i>chlorhexidine gluconate SOLN EX 4 %</i>	NP	
<i>chlorhexidine gluconate SOLN EX 4 %</i>	P	OTC; QL(946 ML per fill retail)
HIBICLENS SOLN EX (<i>Use chlorhexidine gluconate</i>)	NP	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)
<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)
APTIVUS CAPS	P	QL(4 EA daily); ST
<i>atazanavir sulfate CAPS 300 MG</i>	P	
<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)
BIKTARVY	P	QL(1 EA daily)
CIMDUO	P	QL(1 EA daily); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMBIVIR (Use lamivudine-zidovudine)	NP	QL(2 EA daily)	fosamprenavir calcium TABS	P	QL(4 EA daily)
COMPLERA	P	QL(1 EA daily)	FUZEON SOLR	P	SP; PA
darunavir TABS 800 MG	P	QL(1 EA daily); ST	GENVOYA	P	QL(1 EA daily)
darunavir TABS 600 MG	P	QL(2 EA daily); ST	INTELENCE 25 MG	P	QL(4 EA daily)
DELSTRIGO	P	QL(1 EA daily)	INTELENCE 100 MG (Use etravirine)	NP	QL(4 EA daily)
DESCOVY 200 MG-25 MG	P	QL(1 EA daily); PA	INTELENCE 200 MG (Use etravirine)	NP	QL(2 EA daily)
DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA	ISENTRESS HD TABS	P	QL(2 EA daily)
DOVATO	P		ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
EDURANT	P	QL(1 EA daily)	ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
efavirenz CAPS 50 MG	P	QL(2 EA daily)	ISENTRESS PACK	P	QL(2 EA daily)
efavirenz CAPS 200 MG	P	QL(1 EA daily)	ISENTRESS TABS	P	QL(2 EA daily)
efavirenz-emtricitabine-tenofovir disoproxil fumarate	P	QL(1 EA daily)	JULUCA	P	QL(1 EA daily)
efavirenz-lamivudine-tenofovir disoproxil fumarate	P	QL(1 EA daily)	KALETRA SOLN	P	QL(480 ML per 30 day(s) retail)
efavirenz TABS	P	QL(1 EA daily)	KALETRA TABS 50 MG-200 MG (Use lopinavir-ritonavir)	NP	QL(6 EA daily)
emtricitabine CAPS	P	QL(1 EA daily)	KALETRA TABS 25 MG-100 MG (Use lopinavir-ritonavir)	NP	QL(4 EA daily)
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	P	QL(1 EA daily)	lamivudine SOLN	P	QL(30 ML daily)
EMTRIVA CAPS (Use emtricitabine)	NP	QL(1 EA daily)	lamivudine TABS 150 MG	P	QL(2 EA daily)
EMTRIVA SOLN	P	QL(24 ML daily)	lamivudine TABS 300 MG	P	QL(1 EA daily)
EPIVIR SOLN (Use lamivudine)	NP	QL(30 ML daily)	lamivudine-zidovudine	P	QL(2 EA daily)
EPIVIR TABS 150 MG (Use lamivudine)	NP	QL(2 EA daily)	LEXIVA SUSP	P	QL(56 ML daily)
EPIVIR TABS 300 MG (Use lamivudine)	NP	QL(1 EA daily)	LEXIVA TABS (Use fosamprenavir calcium)	NP	QL(4 EA daily)
EPZICOM (Use abacavir sulfate-lamivudine)	NP	QL(1 EA daily)	lopinavir-ritonavir SOLN	P	QL(480 ML per 30 day(s) retail)
etravirine 100 MG	P	QL(4 EA daily)	lopinavir-ritonavir TABS 50 MG-200 MG	P	QL(6 EA daily)
etravirine 200 MG	P	QL(2 EA daily)	lopinavir-ritonavir TABS 25 MG-100 MG	P	QL(4 EA daily)
			maraviroc TABS 300 MG	P	QL(4 EA daily)
			maraviroc TABS 150 MG	P	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nevirapine SUSP</i>	P	QL(40 ML daily)	STRIBILD	P	QL(1 EA daily)
<i>nevirapine TABS</i>	P	QL(2 EA daily)	SUSTIVA CAPS 50 MG (<i>Use efavirenz</i>)	NP	QL(2 EA daily)
<i>nevirapine TB24 100 MG</i>	P	QL(3 EA daily)	SUSTIVA CAPS 200 MG (<i>Use efavirenz</i>)	NP	QL(1 EA daily)
<i>nevirapine TB24 400 MG</i>	P	QL(1 EA daily)	SYMFI (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
NORVIR CAPS	P	QL(12 EA daily)	SYMFI LO (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
NORVIR TABS (<i>Use ritonavir</i>)	NP	QL(12 EA daily)	<i>tenofovir disoproxil fumarate TABS</i>	P	QL(1 EA daily)
ODEFSEY	P		TIVICAY TABS 50 MG	P	QL(2 EA daily)
PIFELTRO	P	QL(1 EA daily)	TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
PREZCOBIX	P	QL(1 EA daily)	TRIZIVIR	P	QL(2 EA daily)
PREZISTA SUSP	P	QL(12 ML daily); ST	TROGARZO	P	SP; PA
PREZISTA TABS 75 MG	P	QL(2 EA daily); ST	TRUVADA 200 MG-300 MG (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
PREZISTA TABS 800 MG (<i>Use darunavir</i>)	NP	QL(1 EA daily); ST	TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)
PREZISTA TABS 150 MG	P	QL(3 EA daily); ST	VIRACEPT TABS 625 MG	P	QL(4 EA daily)
PREZISTA TABS 600 MG (<i>Use darunavir</i>)	NP	QL(2 EA daily); ST	VIRACEPT TABS 250 MG	P	QL(9 EA daily)
RETROVIR CAPS (<i>Use zidovudine</i>)	NP	QL(6 EA daily)	VIREAD POWD	P	QL(240 GM per 30 day(s) retail)
RETROVIR SYRP (<i>Use zidovudine</i>)	NP	QL(60 ML daily)	VIREAD TABS (<i>Use tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NP	QL(2 EA daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	P	QL(1 EA daily)
REYATAZ CAPS 300 MG (<i>Use atazanavir sulfate</i>)	NP		ZIAGEN SOLN (<i>Use abacavir sulfate</i>)	NP	QL(30 ML daily)
REYATAZ PACK	P	QL(6 EA daily)	ZIAGEN TABS (<i>Use abacavir sulfate</i>)	NP	QL(2 EA daily)
<i>ritonavir TABS</i>	P	QL(12 EA daily)	<i>zidovudine CAPS</i>	P	QL(6 EA daily)
RUKOBIA	P	PA	<i>zidovudine SYRP</i>	P	QL(60 ML daily)
SELZENTRY SOLN	P	QL(35 ML daily)	<i>zidovudine TABS</i>	P	QL(2 EA daily)
SELZENTRY TABS 25 MG, 75 MG	P	QL(2 EA daily)			
SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	NP	QL(4 EA daily)			
SELZENTRY TABS 150 MG (<i>Use maraviroc</i>)	NP	QL(2 EA daily)			
<i>stavudine CAPS</i>	P	QL(2 EA daily)			

Georgia Medicaid

Updated April 1, 2025

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Antiviral Combinations			VALTREX 500 MG (<i>Use valacyclovir hcl</i>)	NP	QL(2 EA daily)
PAXLOVID (150/100)	P		Influenza Agents		
PAXLOVID (300/100)	P		<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	P	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
CMV Agents			<i>oseltamivir phosphate CAPS 30 MG</i>	P	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
LIVTENCITY	P	SP; PA	<i>oseltamivir phosphate SUSR</i>	P	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
PREVYMIS SOLN	P	SP; PA	RELENZA DISKHALER	P	QL(20 EA per fill retail); AL(At least 5 yrs old)
PREVYMIS TABS	P	QL(1 EA daily); SP; PA	TAMIFLU CAPS 30 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NP	QL(2 EA daily)	TAMIFLU CAPS 45 MG, 75 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>valganciclovir hcl</i> TABS	P	QL(2 EA daily)	TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NP	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
Hepatitis Agents			BETA BLOCKERS - Drugs to Treat High Blood Pressure		
MAVYRET PACK	P	QL(6 EA daily); SP; PA	Alpha-Beta Blockers		
MAVYRET TABS	P	QL(3 EA daily); SP; PA	<i>carvedilol 25 MG</i>	P	QL(4 EA daily)
PEGASYS SOLN	P	SP; PA	<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(3 EA daily)
<i>ribavirin (hepatitis c) CAPS</i>	P	SP; PA	<i>carvedilol phosphate</i>	P	QL(1 EA daily)
<i>ribavirin (hepatitis c) TABS 200 MG</i>	P	SP; PA	COREG 25 MG (<i>Use carvedilol</i>)	NP	QL(4 EA daily)
SOFOSBUVIR-VELPATASVIR TABS	P	QL(1 EA daily); SP; PA			
SOVALDI TABS	P	SP; PA			
VEMLIDY	P	SP; PA			
Herpes Agents					
<i>acyclovir CAPS</i>	P	QL(50 EA per 30 day(s) retail)			
<i>acyclovir SUSP</i>	P	QL(400 ML per 30 day(s) retail)			
<i>acyclovir TABS PO 800 MG</i>	P	QL(50 EA per 30 day(s) retail)			
<i>acyclovir TABS PO 400 MG</i>	P	QL(3 EA daily)			
<i>famciclovir</i>	P				
<i>valacyclovir hcl 500 MG</i>	P	QL(2 EA daily)			
<i>valacyclovir hcl 1 GM</i>	P	QL(42 EA per 21 day(s) retail)			
VALTREX 1 GM (<i>Use valacyclovir hcl</i>)	NP	QL(42 EA per 21 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COREG 3.125 MG, 6.25 MG, 12.5 MG (<i>Use carvedilol</i>)	NP	QL(3 EA daily)	BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>Use sotalol hcl</i>)	NP	QL(2 EA daily)
COREG CR (<i>Use carvedilol phosphate</i>)	NP	QL(1 EA daily)	CORGARD TABS 20 MG, 40 MG (<i>Use nadolol</i>)	NP	QL(2 EA daily)
<i>labetalol hcl</i> TABS 300 MG	P	QL(8 EA daily)	INDERAL LA CP24 (<i>Use propranolol hcl</i>)	NP	QL(2 EA daily)
<i>labetalol hcl</i> TABS 100 MG	P	QL(3 EA daily)	<i>nadolol</i> TABS 20 MG, 40 MG, 80 MG	P	QL(2 EA daily)
<i>labetalol hcl</i> TABS 200 MG, 400 MG	P	QL(6 EA daily)	<i>pindolol</i> TABS	P	
Beta Blockers Cardio-Selective			<i>propranolol hcl</i> CP24	P	QL(2 EA daily)
<i>acebutolol hcl</i> CAPS	P		<i>propranolol hcl</i> SOLN PO 20 MG/5ML, 40 MG/5ML	P	
<i>atenolol</i> TABS	P	QL(2 EA daily)	<i>propranolol hcl</i> TABS	P	
<i>bisoprolol fumarate</i>	P	QL(1 EA daily)	<i>sotalol hcl</i> (<i>afib/afl</i>)	P	QL(2 EA daily)
LOPRESSOR TABS 100 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4.5 EA daily)	<i>sotalol hcl</i> TABS 80 MG, 120 MG, 160 MG	P	QL(2 EA daily)
LOPRESSOR TABS 50 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4 EA daily)	<i>sotalol hcl</i> TABS 240 MG	P	
<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	P	QL(4 EA daily)	<i>timolol maleate</i> TABS	P	
<i>metoprolol succinate</i> TB24 200 MG	P	QL(2 EA daily)	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>metoprolol tartrate</i> TABS 25 MG, 50 MG	P	QL(4 EA daily)	Calcium Channel Blockers		
<i>metoprolol tartrate</i> TABS 100 MG	P	QL(4.5 EA daily)	<i>amlodipine besylate</i> TABS	P	QL(1 EA daily)
TENORMIN TABS (<i>Use atenolol</i>)	NP	QL(2 EA daily)	CALAN SR TBCR (<i>Use verapamil hcl</i>)	NP	QL(2 EA daily)
TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NP	QL(2 EA daily)	CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (<i>Use diltiazem hcl coated beads</i>)	NP	QL(1 EA daily)
TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>Use metoprolol succinate</i>)	NP	QL(4 EA daily)	CARDIZEM CD CP24 240 MG (<i>Use diltiazem hcl coated beads</i>)	NP	QL(2 EA daily)
Beta Blockers Non-Selective			CARDIZEM TABS 30 MG, 60 MG, 120 MG (<i>Use diltiazem hcl</i>)	NP	QL(3 EA daily)
BETAPACE AF (<i>Use sotalol hcl</i> (<i>afib/afl</i>)))	NP	QL(2 EA daily)	<i>diltiazem hcl</i> coated beads CP24 240 MG	P	QL(2 EA daily)
			<i>diltiazem hcl</i> coated beads CP24 120 MG, 180 MG, 300 MG	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG</i>	P	QL(1 EA daily)	VERELAN PM CP24 100 MG, 200 MG (<i>Use verapamil hcl</i>)	NP	QL(2 EA daily)
<i>diltiazem hcl extended release beads 240 MG</i>	P	QL(2 EA daily)	VERELAN PM CP24 300 MG (<i>Use verapamil hcl</i>)	NP	QL(1 EA daily)
<i>diltiazem hcl CP12</i>	P	QL(2 EA daily)	VERELAN CP24 (<i>Use verapamil hcl</i>)	NP	QL(1 EA daily)
<i>diltiazem hcl CP24 120 MG, 180 MG</i>	P	QL(1 EA daily)	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
<i>diltiazem hcl CP24 240 MG</i>	P	QL(2 EA daily)	Cardiac Glycosides		
<i>diltiazem hcl TABS</i>	P	QL(3 EA daily)	<i>digoxin SOLN PO 0.05 MG/ML</i>	P	
<i>felodipine</i>	P	QL(1 EA daily)	<i>digoxin TABS 125 MCG, 250 MCG</i>	P	
<i>nicardipine hcl CAPS</i>	P		LANOXIN SOLN IJ (<i>Use digoxin</i>)	P	
<i>nifedipine CAPS</i>	P	QL(4 EA daily)	LANOXIN TABS 125 MCG, 250 MCG (<i>Use digoxin</i>)	P	
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 EA daily)	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)	Cardiac Myosin Inhibitors		
NORVASC TABS (<i>Use amlodipine besylate</i>)	NP	QL(1 EA daily)	CAMZYOS	P	SP; PA
PROCARDIA XL TB24 60 MG (<i>Use nifedipine</i>)	NP	QL(2 EA daily)	Impotence Agents		
PROCARDIA XL TB24 30 MG, 90 MG (<i>Use nifedipine</i>)	NP	QL(1 EA daily)	BI-MIX SOLR	P	PA
TIAZAC 240 MG (<i>Use diltiazem hcl extended release beads</i>)	NP	QL(2 EA daily)	IFE-BIMIX 30/1 SOLN	P	PA
TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (<i>Use diltiazem hcl extended release beads</i>)	NP	QL(1 EA daily)	SUPER BI-MIX SOLR	P	PA
VERAPAMIL HCL ER CP24 (<i>Use verapamil hcl</i>)	NP	QL(2 EA daily)	SUPER TRI-MIX SOLR	P	SP; PA
<i>verapamil hcl CP24 100 MG, 200 MG</i>	P	QL(2 EA daily)	TRI-MIX SOLR	P	SP; PA
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	P	QL(1 EA daily)	Prostaglandin Vasodilators		
<i>verapamil hcl TABS</i>	P	QL(3 EA daily)	<i>epoprostenol sodium</i>	P	SP; PA
<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)	FLOLAN (<i>Use epoprostenol sodium</i>)	NP	SP; PA
			ORENITRAM TBCR	P	SP; PA
			TYVASO REFILL KIT SOLN IN	P	SP; PA
			TYVASO STARTER KIT SOLN IN	P	SP; PA

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TYVASO SOLN IN	P	SP; PA	UPTRAVI TITRATION TBPK	P	SP; PA
VELETRI (Use epoprostenol sodium)	NP	SP; PA	UPTRAVI SOLR	P	SP; PA
VENTAVIS IN	P	SP; PA	UPTRAVI TABS	P	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists			Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
<i>ambrisentan</i>	P	QL(1 EA daily); SP; PA	ADEMPAS	P	SP; PA
<i>bosentan TABS</i>	P	SP; PA	Transthyretin Stabilizers		
LETAIRIS (Use <i>ambrisentan</i>)	NP	QL(1 EA daily); SP; PA	VYNDAMAX	P	QL(1 EA daily); SP; PA
TRACLEER TABS (Use <i>bosentan</i>)	NP	SP; PA	VYNDAQEL	P	QL(4 EA daily); SP; PA
TRACLEER TBSO	P	SP; PA	CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Pulmonary Hypertension - Phosphodiesterase Inhibitors			Cephalosporins - 1st Generation		
ADCIRCA TABS (Use <i>tadalafil (pulmonary hypertension)</i>)	NP	SP; PA	<i>cefadroxil CAPS</i>	P	
REVATIO SOLN (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA	<i>cefadroxil SUSR</i>	P	
REVATIO SUSR (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA	<i>cefadroxil TABS</i>	P	
REVATIO TABS (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA	<i>cephalexin CAPS 250 MG, 500 MG</i>	P	
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	P	SP; PA	<i>cephalexin SUSR</i>	P	
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	P	SP; PA	Cephalosporins - 2nd Generation		
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	P	SP; PA	<i>cefaclor CAPS</i>	P	
<i>tadalafil (pulmonary hypertension) TABS</i>	P	SP; PA	<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	P	
Pulmonary Hypertension - Prostacyclin Receptor Agonist			<i>cefprozil SUSR</i>	P	QL(200 ML per fill retail); AL(Up to 12 yrs old)
			<i>cefprozil TABS</i>	P	QL(20 EA per fill retail)
			<i>cefuroxime axetil TABS</i>	P	QL(20 EA per fill retail)
			Cephalosporins - 3rd Generation		
			<i>cefdinir CAPS</i>	P	QL(20 EA per fill retail)
			<i>cefdinir SUSR</i>	P	QL(100 ML per fill retail)
			<i>cefixime CAPS</i>	P	

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits
<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	P	QL(3 EA per fill retail)
SUPRAX CAPS (Use <i>cefixime</i>)	NP	
CHEMICALS		
Bulk Chemicals - O's		
OMEPRAZOLE	P	PA
Bulk Chemicals - P's		
PROMETHAZINE HCL POWD	P	PA
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	P	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	P	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	P	
<i>drospirenone-ethinyl estradiol</i>	P	QL(1 EA daily)
<i>ethynodiol diacet & eth estrad</i>	P	QL(1 EA daily)
GENERESS FE (Use <i>norethindrone & ethinyl estradiol-fe</i>)	NP	
<i>levonorgestrel & eth estradiol TABS</i>	P	
<i>levonorgestrel-eth estradiol (triphasic)</i>	P	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	P	QL(91 EA per fill retail)
LOSEASONIQUE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	
MIRCETTE (Use <i>desogestrel-ethinyl estradiol (biphasic)</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	P	
<i>norethindrone & eth estradiol</i>	P	
<i>norethindrone & ethinyl estradiol-fe</i>	P	
<i>norethindrone acet & eth estra TABS</i>	P	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	P	
<i>norethindrone-eth estradiol (triphasic)</i>	P	
<i>norgestimate-ethinyl estradiol</i>	P	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	P	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	P	QL(2 EA daily)
QUARTETTE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	
SEASONIQUE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NP	QL(91 EA per fill retail)
TYBLUME CHEW	P	
YASMIN 28 (Use <i>drospirenone-ethinyl estradiol</i>)	NP	QL(1 EA daily)
YAZ (Use <i>drospirenone-ethinyl estradiol</i>)	NP	QL(1 EA daily)
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	P	QL(3 EA per 28 day(s) retail)
Combination Contraceptives - Vaginal		
<i>etonogestrel-ethinyl estradiol</i>	P	QL(1 EA per fill retail)
NUVARING (Use <i>etonogestrel-ethinyl estradiol</i>)	NP	QL(1 EA per fill retail)
Emergency Contraceptives		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELLA	P	QL(4 EA per 365 day(s) retail)	<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	P	QL(150 ML per 30 day(s) retail)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	P	QL(1 EA per 21 day(s) retail)	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	P	QL(150 ML per 30 day(s) retail)
PLAN B ONE-STEP (Use <i>levonorgestrel (emergency oc)</i>)	NP	QL(1 EA per 21 day(s) retail)	<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	P	QL(150 ML per 30 day(s) retail)
Progestin Contraceptives - Injectable			<i>dexamethasone ELIX</i>	P	
DEPO-PROVERA SUSP IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NP	QL(1 ML per fill retail)	<i>dexamethasone SOLN</i>	P	
DEPO-PROVERA SUSY IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NP	QL(1 ML per fill retail)	<i>dexamethasone TABS</i>	P	
DEPO-SUBQ PROVERA 104 SUSY SC	P	QL(1 ML per fill retail)	EMFLAZA SUSP (Use <i>deflazacort</i>)	NP	SP; PA
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	P	QL(1 ML per fill retail)	EMFLAZA TABS (Use <i>deflazacort</i>)	NP	SP; PA
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	P	QL(1 ML per fill retail)	<i>hydrocortisone TABS</i>	P	
Progestin Contraceptives - Oral			MEDROL TABS 4 MG, 8 MG (Use <i>methylprednisolone</i>)	NP	
<i>norethindrone (contraceptive)</i>	P		MEDROL TBPk (Use <i>methylprednisolone</i>)	NP	
OPILL	P		<i>methylprednisolone TABS 4 MG, 8 MG</i>	P	
OPILL	NP		<i>methylprednisolone TBPk</i>	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			MILLIPRED TABS	P	
Glucocorticosteroids			PEDIAPRED SOLN (Use <i>prednisolone sodium phosphate</i>)	NP	
CORTEF TABS (Use <i>hydrocortisone</i>)	NP		<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ML per fill retail)
CORTISONE ACETATE TABS	P		<i>prednisolone sodium phosphate SOLN</i>	P	
<i>deflazacort SUSP</i>	P	SP; PA	<i>prednisolone SOLN</i>	P	
<i>deflazacort TABS</i>	P	SP; PA	<i>prednisolone TABS</i>	P	
			PREDNISONE INTENSOL CONC	P	
			<i>prednisone SOLN</i>	P	
			<i>prednisone TABS</i>	P	
			<i>prednisone TBPk</i>	P	

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/Limits
TARPEYO CPDR	P	SP; PA
ZILRETTA SRER	P	SP; PA
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	P	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 200 MG</i>	P	QL(30 EA per 30 day(s) retail); AL(At least 10 yrs old - Up to 21 yrs old)
<i>benzonatate 100 MG</i>	P	AL(At least 10 yrs old - Up to 21 yrs old)
DELSYM COUGH CHILDRENS SUER (<i>Use dextromethorphan polistirex</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
DELSYM SUER (<i>Use dextromethorphan polistirex</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>dextromethorphan hbr LIQD 7.5 MG/5ML</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>dextromethorphan polistirex SUER</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
HYCODAN SOLN (<i>Use hydrocodone bitartrate-homatropine methylbromide</i>)	NP	AL(At least 18 yrs old - Up to 21 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)
TRIAMINIC LONG ACTING COUGH LIQD (<i>Use dextromethorphan hbr</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/Limits
Cough/Cold/Allergy Combinations		
ADVIL COLD/SINUS TABS (<i>Use pseudoephedrine-ibuprofen</i>)	NP	OTC; AL(Up to 21 yrs old)
<i>brompheniramine & phenyleph ELIX</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>brompheniramine & pseudoeph ELIX</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>cetirizine-pseudoephedrine</i>	P	AL(Up to 21 yrs old)
CLARITIN-D 12 HOUR TB12 (<i>Use loratadine & pseudoephedrine</i>)	NP	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
CLARITIN-D 24 HOUR TB24 (<i>Use loratadine & pseudoephedrine</i>)	NP	OTC; QL(1 EA daily); AL(Up to 21 yrs old)
COLD & FLU RELIEF NIGHTTIME D LIQD	P	OTC; AL(Up to 21 yrs old)
<i>dextromethorphan-doxylamine-acetaminophen LIQD</i>	P	OTC; AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin LIQD 200 MG/5ML-10 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	P	OTC; AL(Up to 21 yrs old)	MUCINEX DM TB12 (<i>Use dextromethorphan-guaifenesin</i>)	NP	QL(2 EA daily); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)	MUCINEX D TB12 (<i>Use pseudoephedrine-guaifenesin</i>)	NP	QL(210 EA per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	P	QL(2 EA daily); AL(Up to 21 yrs old)	<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	P	OTC; AL(Up to 21 yrs old)	<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
DIABETIC TUSSIN COLD/FLU CAPS	P	OTC; AL(Up to 21 yrs old)	<i>phenylephrine-dm SOLN</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
ED BRON GP LIQD	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>promethazine & phenylephrine SYRP</i>	P	QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>guaifenesin-codeine SOLN</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)	<i>promethazine w/codeine SOLN</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
<i>guaifenesin-codeine SYRP</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)	<i>promethazine w/codeine SYRP</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
LOHIST-D LIQD	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>promethazine-dm SYRP</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>loratadine & pseudoephedrine TB12</i>	P	OTC; QL(2 EA daily); AL(Up to 21 yrs old)	<i>promethazine-phenylephrine-codeine</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
<i>loratadine & pseudoephedrine TB24</i>	P	OTC; QL(1 EA daily); AL(Up to 21 yrs old)	<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
MAXI-TUSS PE MAX LIQD	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
MAXI-TUSS PE LIQD	P	AL(Up to 21 yrs old)			
MUCINEX D MAX STRENGTH TB12 (<i>Use pseudoephedrine-guaifenesin</i>)	NF				

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>guaifenesin TB12 1200 MG</i>	P	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	P	QL(210 EA per fill retail); AL(Up to 21 yrs old)	<i>guaifenesin TB12 600 MG</i>	P	QL(40 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>pseudoephedrine-ibuprofen TABS</i>	P	OTC; AL(Up to 21 yrs old)	MUCINEX MAXIMUM STRENGTH TB12 (<i>Use guaifenesin</i>)	NP	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
PX DAYTIME MULTI-SYMPTOM CAPS	P	OTC; AL(Up to 21 yrs old)	MUCINEX TB12 (<i>Use guaifenesin</i>)	NP	QL(40 EA per 30 day(s) retail); AL(Up to 21 yrs old)
PX NITETIME MULTI-SYMPTOM CAPS	P	OTC; QL(240 EA per fill retail); AL(Up to 21 yrs old)	Misc. Respiratory Inhalants		
QC TRIACTING DAYTIME CHILDRENS SYRP	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>sodium chloride (inhalant) AERS</i>	P	OTC; QL(240 ML per fill retail)
SCOT-TUSSIN DM LIQD	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %</i>	P	
SCOT-TUSSIN SENIOR LIQD	P	OTC; AL(Up to 21 yrs old)	Mucolytics		
TRIAMINIC COLD/COUGH DAY TIME SYRP	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>acetylcysteine SOLN</i>	P	
ZYRTEC-D ALLERGY & CONGESTION (<i>Use cetirizine-pseudoephedrine</i>)	NP	AL(Up to 21 yrs old)	DERMATOLOGICALS - Drugs to Treat Skin Conditions		
ZYRTEC-D ALLERGY & SINUS (<i>Use cetirizine-pseudoephedrine</i>)	NP	AL(Up to 21 yrs old)	Acne Products		
Expectorants			ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>Use isotretinoin</i>)	NP	QL(2 EA daily); AL(At least 12 yrs old); PA
GERI-TUSSIN SYRP	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	BENZAC AC WASH LIQD 5 % (<i>Use benzoyl peroxide</i>)	NP	RX/OTC
<i>guaifenesin LIQD</i>	P	QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>benzoyl peroxide BAR</i>	P	
			<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	P	
			<i>benzoyl peroxide LIQD 4 %, 5 %, 10 %</i>	P	
			<i>benzoyl peroxide LOTN 5 %, 10 %</i>	P	OTC
			CLEOCIN-T LOTN (<i>Use clindamycin phosphate (topical)</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLINDAGEL GEL (<i>Use clindamycin phosphate (topical)</i>)	NP	QL(60 ML per fill retail)	<i>tretinoin GEL 0.025 %</i>	P	AL(Up to 35 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	P	QL(60 ML per fill retail)	<i>tretinoin GEL 0.01 %</i>	P	QL(15 GM per fill retail); AL(Up to 35 yrs old)
<i>clindamycin phosphate (topical) LOTN</i>	P		Antibiotics - Topical		
<i>clindamycin phosphate (topical) SOLN</i>	P		<i>bacitracin (topical) OINT</i>	P	OTC; QL(30 EA per fill retail)
DIFFERIN CLEANSER LIQD (<i>Use benzoyl peroxide</i>)	NP	RX/OTC	<i>bacitracin zinc OINT</i>	P	OTC; QL(30 GM per fill retail)
ERYGEL GEL (<i>Use erythromycin (acne aid)</i>)	NP	QL(60 GM per fill retail)	<i>gentamicin sulfate (topical) CREA</i>	P	QL(60 GM per fill retail)
<i>erythromycin (acne aid) GEL</i>	P	QL(60 GM per fill retail)	<i>gentamicin sulfate (topical) OINT</i>	P	QL(60 GM per fill retail)
<i>erythromycin (acne aid) SOLN</i>	P		<i>mupirocin calcium (topical)</i>	P	QL(30 GM per fill retail)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(2 EA daily); AL(At least 12 yrs old); PA	<i>mupirocin OINT</i>	P	
KLARON (<i>Use sulfacetamide sodium (acne)</i>)	NP		<i>neomycin-bacitracin-polymyxin OINT</i>	P	OTC; QL(454 GM per fill retail)
RETIN-A CREA (<i>Use tretinoin</i>)	NP	QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>neomycin-polymyxin w/ pramoxine</i>	P	OTC; QL(30 GM per fill retail)
RETIN-A GEL 0.025 % (<i>Use tretinoin</i>)	NP	AL(Up to 35 yrs old)	NEOSPORIN ORIGINAL OINT (<i>Use neomycin-bacitracin-polymyxin</i>)	NP	OTC; QL(454 EA per fill retail)
RETIN-A GEL 0.01 % (<i>Use tretinoin</i>)	NP	QL(15 GM per fill retail); AL(Up to 35 yrs old)	NEOSPORIN PLUS PAIN RELIEF MS (<i>Use neomycin-polymyxin w/ pramoxine</i>)	NP	OTC; QL(30 GM per fill retail)
<i>sulfacetamide sodium (acne)</i>	P		Antifungals - Topical		
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	P	QL(60 GM per fill retail)	<i>clotrimazole (topical) CREA</i>	P	QL(90 GM per fill retail); RX/OTC
<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	P		<i>clotrimazole (topical) SOLN</i>	P	QL(60 ML per fill retail); RX/OTC
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 GM per 30 day(s) retail)
			<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>econazole nitrate CREA</i>	P	QL(30 GM per fill retail)
<i>ketoconazole (topical) CREA</i>	P	QL(60 GM per fill retail)
<i>ketoconazole (topical) SHAM 2 %</i>	P	
LAMISIL AT ATHLETES FOOT CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LAMISIL AT JOCK ITCH CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LAMISIL AT CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LOTRIMIN AF JOCK ITCH CREA (<i>Use clotrimazole (topical)</i>)	NP	QL(90 GM per fill retail); RX/OTC
LOTRIMIN AF CREA (<i>Use clotrimazole (topical)</i>)	NP	QL(90 GM per fill retail); RX/OTC
MICATIN CREA (<i>Use miconazole nitrate (topical)</i>)	NP	QL(60 GM per fill retail)
<i>miconazole nitrate (topical) CREA</i>	P	QL(60 GM per fill retail)
NIZORAL SHAM	P	OTC
<i>nystatin (topical) CREA</i>	P	QL(30 GM per fill retail)
<i>nystatin (topical) OINT</i>	P	QL(30 GM per fill retail)
<i>nystatin (topical) POWD EX</i>	P	QL(60 GM per fill retail)
<i>nystatin-triamcinolone CREA</i>	P	QL(60 GM per fill retail)
<i>nystatin-triamcinolone OINT</i>	P	QL(60 GM per fill retail)
<i>terbinafine hcl (topical) CREA</i>	P	OTC; QL(30 GM per fill retail)
TINACTIN CREA (<i>Use tolinaftate</i>)	NP	OTC; QL(30 GM per fill retail)
<i>tolinaftate CREA</i>	P	OTC; QL(30 GM per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
Antihistamines-Topical		
ITCH RELIEF CREA	P	OTC
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 GM daily); 2 max fill(s) per 30 day(s) retail; RX/OTC
VOLTAREN ARTHRITIS PAIN GEL EX (<i>Use diclofenac sodium (topical)</i>)	NP	QL(6.68 GM daily); 2 max fill(s) per 30 day(s) retail; RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	P	SP; PA
CARAC CREA	P	
EFUDEX CREA (<i>Use fluorouracil (topical)</i>)	NP	QL(40 GM per 30 day(s) retail)
<i>fluorouracil (topical) CREA 5 %</i>	P	QL(40 GM per 30 day(s) retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	P	
<i>fluorouracil (topical) SOLN</i>	P	QL(10 ML per 30 day(s) retail)
LEVULAN KERASTICK SOLR	P	SP; PA
TARGRETIN (<i>Use bexarotene (topical)</i>)	NP	SP; PA
VALCHLOR	P	SP; PA
Antipruritics - Topical		
<i>camphor & menthol LOTN</i>	P	OTC; QL(222 ML per fill retail)
SARNA LOTN (<i>Use camphor & menthol</i>)	NP	OTC; QL(222 ML per fill retail)
Antipsoriatics		
<i>calcipotriene CREA</i>	P	
<i>calcipotriene SOLN</i>	P	QL(60 ML per fill retail)

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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DOVONEX CREA (<i>Use calcipotriene</i>)	NP		SELSUN BLUE DAILY LOTN (<i>Use selenium sulfide</i>)	NP	OTC; QL(420 ML per fill retail)
ILUMYA	P	SP; PA	SELSUN BLUE MEDICATED LOTN (<i>Use selenium sulfide</i>)	NP	OTC; QL(420 ML per fill retail)
SKYRIZI (150 MG DOSE) PSKT	P	SP; PA	SELSUN BLUE MOISTURIZING LOTN (<i>Use selenium sulfide</i>)	NP	OTC; QL(420 ML per fill retail)
SKYRIZI PEN SOAJ	P	SP; ST; PA	SELSUN BLUE LOTN (<i>Use selenium sulfide</i>)	NP	OTC; QL(420 ML per fill retail)
SKYRIZI SOSY	P	SP; PA	<i>sulfacetamide sodium LIQD</i>	P	QL(120 ML per fill retail)
STELARA SOSY	P	SP; PA	Antivirals - Topical		
TALTZ SOAJ	P	SP; PA	<i>acyclovir topical CREA</i>	P	QL(5 GM per fill retail)
TALTZ SOSY	P	SP; PA	<i>acyclovir topical OINT</i>	P	QL(30 GM per 30 day(s) retail)
<i>tazarotene CREA</i>	P	QL(2 GM daily); AL(Up to 20 yrs old)	ZOVIRAX CREA (<i>Use acyclovir topical</i>)	NP	QL(5 GM per fill retail)
<i>tazarotene GEL</i>	P	QL(6.67 GM daily); AL(Up to 20 yrs old)	ZOVIRAX OINT (<i>Use acyclovir topical</i>)	NP	QL(30 GM per 30 day(s) retail)
TAZORAC CREA (<i>Use tazarotene</i>)	NP	QL(2 GM daily); AL(Up to 20 yrs old)	Burn Products		
TAZORAC GEL (<i>Use tazarotene</i>)	NP	QL(6.67 GM daily); AL(Up to 20 yrs old)	SILVADENE (<i>Use silver sulfadiazine</i>)	NP	
TREMFYA SOAJ 100 MG/ML	P	SP; PA	<i>silver sulfadiazine</i>	P	
TREMFYA SOSY 100 MG/ML	P	SP; PA	Corticosteroids - Topical		
Antiseborrheic Products			<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail
OVACE PLUS WASH LIQD (<i>Use sulfacetamide sodium</i>)	NP	QL(120 ML per fill retail)	<i>betamethasone dipropionate augmented CREA</i>	P	QL(50 GM per fill retail)
OVACE WASH LIQD (<i>Use sulfacetamide sodium</i>)	NP	QL(120 ML per fill retail)	<i>betamethasone valerate CREA</i>	P	
<i>selenium sulfide LOTN 1 %</i>	P	OTC; QL(420 ML per fill retail)	<i>betamethasone valerate LOTN</i>	P	
<i>selenium sulfide LOTN 2.5 %</i>	P		<i>betamethasone valerate OINT</i>	P	
<i>selenium sulfide SHAM 1 %</i>	P	OTC; QL(420 ML per fill retail)	<i>clobetasol propionate emollient base 0.05 %</i>	P	QL(60 GM per fill retail)
SELSUN BLUE CARE MENS MAX STR LOTN (<i>Use selenium sulfide</i>)	NP	OTC; QL(420 ML per fill retail)			

Georgia Medicaid Updated April 1, 2025
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<i>clobetasol propionate CREA 0.05 %</i>	P	QL(60 GM per fill retail)	HYDROCORT LOTION COMPLETE KIT THPK	NP	
<i>clobetasol propionate GEL 0.05 %</i>	P	QL(60 GM per fill retail)	<i>hydrocortisone (topical) CREA 0.5 %</i>	P	OTC
<i>clobetasol propionate OINT 0.05 %</i>	P	QL(60 GM per fill retail)	<i>hydrocortisone (topical) CREA 1 %</i>	P	QL(454 GM per fill retail); RX/OTC
<i>clobetasol propionate SOLN 0.05 %</i>	P	QL(50 ML per fill retail)	<i>hydrocortisone (topical) CREA 2.5 %</i>	P	
DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	NP	QL(118.28 ML per fill retail)	<i>hydrocortisone (topical) LOTN 2.5 %</i>	P	QL(120 ML per fill retail)
<i>desonide CREA</i>	P		<i>hydrocortisone (topical) LOTN 1 %</i>	P	QL(453.6 GM per fill retail)
<i>desonide OINT</i>	P	QL(2 GM daily)	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	P	RX/OTC
DESOWEN CREA (Use desonide)	NP		<i>hydrocortisone butyrate SOLN</i>	P	
<i>desoximetasone CREA 0.05 %</i>	P		HYDROCORTISONE COMPLETE KIT THPK	NP	
<i>desoximetasone CREA 0.25 %</i>	P	QL(2 GM daily)	<i>mometasone furoate CREA</i>	P	QL(50 GM per fill retail)
<i>desoximetasone GEL</i>	P	QL(2 GM daily)	<i>mometasone furoate OINT</i>	P	QL(45 GM per fill retail)
<i>desoximetasone OINT 0.25 %</i>	P	QL(2 GM daily)	<i>mometasone furoate SOLN</i>	P	QL(60 ML per fill retail)
EPIFOAM FOAM	P	QL(15 GM per fill retail)	TOPICORT CREA 0.05 % (Use desoximetasone)	NP	
<i>fluocinolone acetonide OIL</i>	P	QL(118.28 ML per fill retail)	TOPICORT CREA 0.25 % (Use desoximetasone)	NP	QL(2 GM daily)
<i>fluocinonide emulsified base</i>	P	QL(60 GM per fill retail)	TOPICORT GEL (Use desoximetasone)	NP	QL(2 GM daily)
<i>fluocinonide CREA 0.05 %</i>	P	QL(150 GM per 30 day(s) retail); 1 package(s) per fill retail	TOPICORT OINT 0.25 % (Use desoximetasone)	NP	QL(2 GM daily)
<i>fluocinonide GEL</i>	P	QL(60 GM per fill retail)	<i>triamcinolone acetonide (topical) CREA</i>	P	
<i>fluocinonide OINT</i>	P	QL(60 GM per fill retail)	<i>triamcinolone acetonide (topical) LOTN</i>	P	QL(60 ML per fill retail)
<i>fluocinonide SOLN</i>	P	QL(60 ML per fill retail)	<i>triamcinolone acetonide (topical) OINT 0.025 %</i>	P	QL(454 GM per fill retail)
<i>fluticasone propionate CREA 0.05 %</i>	P	QL(60 GM per fill retail)	<i>triamcinolone acetonide (topical) OINT 0.1 %, 0.5 %</i>	P	
<i>fluticasone propionate OINT</i>	P	QL(60 GM per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRIDESILON CREA 0.05 % (Use desonide)	NP		<i>tacrolimus (topical) OINT 0.03 %</i>	P	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA
Eczema Agents			<i>tacrolimus (topical) OINT 0.1 %</i>	P	QL(30 GM per 30 day(s) retail); AL(At least 16 yrs old); PA
ADBRY SOSY	P	SP; PA	Keratolytic/Antimitotic/Vesicant Agents		
CIBINQO	P	SP; PA	DERMAREST PSORIASIS GEL	P	OTC
Emollient/Keratolytic Agents			KERALYT GEL	P	OTC
<i>urea CREA 40 %</i>	P	RX/OTC	KERALYT GEL (Use <i>salicylic acid</i>)	NP	
<i>urea LOTN 40 %</i>	P		<i>podofilox SOLN</i>	P	
Emollients			<i>salicylic acid GEL 6 %</i>	P	
EMOLLIENT LOTION-MISC	P	RX/OTC	Local Anesthetics - Topical		
<i>lactic acid (ammonium lactate) CREA</i>	P	QL(385 GM per fill retail); RX/OTC	<i>capsaicin CREA 0.035 %</i>	P	OTC; QL(42.5 GM per fill retail)
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	P	QL(1368 GM per fill retail); RX/OTC	<i>capsaicin CREA 0.025 %, 0.075 %</i>	P	OTC; QL(60 GM per fill retail)
Immunomodulating Agents - Topical			<i>capsaicin CREA 0.1 %</i>	P	OTC; QL(43 GM per fill retail)
<i>imiquimod 5 %</i>	P	QL(48 EA per 180 day(s) retail)	CAPZASIN-HP CREA (Use <i>capsaicin</i>)	NP	OTC; QL(43 GM per fill retail)
Immunosuppressive Agents - Topical			CAPZASIN-P CREA 0.035 % (Use <i>capsaicin</i>)	NP	OTC; QL(42.5 GM per fill retail)
ELIDEL (Use <i>pimecrolimus</i>)	NP	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA	CASTIVA WARMING LOTN	P	OTC; QL(30 GM per fill retail)
<i>pimecrolimus</i>	P	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA	<i>dibucaine</i>	P	OTC; QL(56.7 GM per fill retail)
PROTOPIC OINT 0.03 % (Use <i>tacrolimus (topical)</i>)	NP	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA	<i>lidocaine hcl CREA 4 %</i>	P	OTC; QL(2 GM daily)
PROTOPIC OINT 0.1 % (Use <i>tacrolimus (topical)</i>)	NP	QL(30 GM per 30 day(s) retail); AL(At least 16 yrs old); PA	<i>lidocaine hcl CREA 3 %</i>	P	QL(453.6 GM per fill retail)
			<i>lidocaine hcl GEL 2 %</i>	P	AL(At least 21 yrs old)

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>lidocaine CREA 4 %</i>	P	OTC; QL(2 GM daily)	METROCREAM CREA (Use metronidazole (topical))	NP	
<i>lidocaine OINT 5 %</i>	P	QL(100 GM per 30 day(s) retail); 1 package(s) per fill retail	METROLOTION LOTN (Use metronidazole (topical))	NP	
<i>lidocaine-prilocaine CREA</i>	P	QL(30 GM per fill retail)	<i>metronidazole (topical) CREA</i>	P	
LMX 4 CREA (Use <i>lidocaine</i>)	NP	OTC; QL(2 GM daily)	<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 GM per fill retail)
Misc. Topical			<i>metronidazole (topical) LOTN</i>	P	
CVS LANOLIN CREA	P	OTC	Scabicides & Pediculicides		
DRYSOL SOLN	P		<i>crotamiton LOTN</i>	P	QL(454 GM per fill retail)
<i>lanolin (topical) CREA</i>	P	OTC	ELIMITE CREA (Use <i>permethrin</i>)	NP	QL(360 GM per fill retail)
LANOLOR CREA	P	OTC	LICEMD GEL	P	OTC
OFF DEEP WOODS AERO	P	OTC; QL(170 gm per fill retail, 340 gm per 30 days retail)	<i>malathion</i>	P	QL(59 ML per fill retail)
OFF DEEP WOODS DRY AERO	P	OTC; QL(113 gm per fill retail, 226 gm per 30 days retail)	NATROBA (Use <i>spinosad</i>)	NP	Min Age limit = 6 months; QL(120 ML per fill retail; 240 ML per 30 day(s) retail)
REPEL SPORTSMEN MAX LOTN	NP		NIX CREME RINSE LIQD EX (Use <i>permethrin</i>)	NP	OTC
SAWYER INSECT REPELLENT LOTN	NP		OVIDE (Use <i>malathion</i>)	NP	QL(59 ML per fill retail)
ULTRATHON INSECT REPELLENT 8 AERO	P	OTC; QL(170 gm per fill retail, 340 gm per 30 days retail)	<i>permethrin CREA</i>	P	QL(360 GM per fill retail)
ULTRATHON INSECT REPELLENT LOTN	P	OTC; QL(57 GM per fill retail; 114 GM per 30 day(s) retail)	<i>permethrin LIQD EX</i>	P	OTC
<i>zinc oxide (topical) OINT 20 %</i>	P	OTC; QL(500 GM per fill retail)	<i>pyrethrins-piperonyl butoxide LIQD</i>	P	OTC
Rosacea Agents			<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	P	OTC
			<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	P	OTC

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RID COMPLETE LICE ELIMINATION (<i>Use pyrethrins-piperonyl butoxide-permethrin-nit remover</i>)	NP	OTC	PROTEXT SUSP	P	PA
RID LIQD 4 %-0.33 % (<i>Use pyrethrins-piperonyl butoxide</i>)	NP	OTC	PURAPLY	P	PA
SCHOOLTIME SHAMPOO SHAM	P	OTC; QL(1 ML per 14 day(s) retail)	DIAGNOSTIC PRODUCTS		
<i>spinosad</i>	P	Min Age limit = 6 months; QL(120 ML per fill retail; 240 ML per 30 day(s) retail)	Diagnostic Drugs		
Tar Products			CORTROSYN SOLR (<i>Use cosyntropin</i>)	NP	SP; PA
<i>coal tar extract SHAM 0.5 %</i>	P	OTC	<i>cosyntropin SOLR</i>	P	SP; PA
DHS TAR GEL SHAM (<i>Use coal tar extract</i>)	NP	OTC	THYROGEN 0.9 MG	P	SP; PA
DHS TAR SHAM (<i>Use coal tar extract</i>)	NP	OTC	Diagnostic Tests		
Wound Care Products			ACCU-CHEK GUIDE TEST STRP	NP	RX/OTC
AMNIOTIC MEMBRANE ALLOGRAFT (HUMAN) SHEET	P	SP; PA	ADVIN COVID-19 ANTIGEN TEST KIT	NP	
APLIGRAF DISK	P	PA	BINAXNOW COVID-19 AG HOME TEST KIT	P	QL(2 EA per fill retail)
CORETEXT SUSP 1 ML, 2 ML	P	PA	BLOOD GLUCOSE TEST STRIPS 333 STRP	NP	RX/OTC
EPICORD SHEE	P	PA	BLULINK GLUCOSE TEST STRP	NP	RX/OTC
MIRODERM BIO MATRIX FENESTRAT	P	PA	CARESENS N GLUCOSE TEST STRP	NP	RX/OTC
MIRODERM BIO MATRIX FENESTRAT+	P	PA	CARESTART COVID-19 HOME TEST KIT	P	QL(2 EA per fill retail)
NOVACHOR	P	PA	CARETOUCH TEST STRP	NP	RX/OTC
OASIS ULTRA MATRIX FENESTRATED	P	PA	CHEMSTRIP K STRP	P	OTC; QL(6.67 EA daily)
OASIS WOUND MATRIX FENESTRATED	P	PA	CLEARDETECT COVID-19 AG HOME KIT	P	QL(2 EA per fill retail)
OSTEOCONDUCTIVE MATRIX PLUS	P	PA	CLINITEST RAPID COVID-19 TEST KIT	NP	
			CONTOUR PLUS TEST STRP	NP	RX/OTC
			COVID-19 AT HOME ANTIGEN TEST KIT	NP	
			COVID-19 AT-HOME TEST KIT	P	QL(2 EA per fill retail)
			COVID-19 AT-HOME TEST KIT	NP	
			CVS COVID-19 AT HOME TEST KIT KIT	NP	

Georgia Medicaid

Updated April 1, 2025

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CVS TRUE METRIX GLUCOSE TEST STRP	NP	RX/OTC	IHEALTH COVID-19 RAPID TEST KIT	P	QL(2 EA per fill retail)
EASY MAX BLOOD GLUCOSE TEST STRP	NP	RX/OTC	INDICAID COVID-19 RAPID TEST KIT	NP	
EASY TALK PLUS II TEST STRIPS STRP	NP	RX/OTC	INTELISWAB COVID-19 RAPID TEST KIT	P	QL(2 EA per fill retail)
EASY TOUCH HEALTHPRO GLUCOSE STRP	NP	RX/OTC	KETONE TEST STRP	P	OTC; QL(6.67 EA daily)
EASY TRAK II GLUCOSE TEST STRP	NP	RX/OTC	KETOSTIX STRP	P	OTC; QL(6.67 EA daily)
ELLUME COVID-19 HOME TEST KIT	P	QL(2 EA per fill retail)	MM BLULINK GLUCOSE TEST STRP	NP	RX/OTC
EMBRACE PRO GLUCOSE TEST STRP	NP	RX/OTC	NOVA MAX PLUS KETONE TEST	P	OTC; QL(1 EA daily)
EMBRACE WAVE BLOOD GLUCOSE STRP	NP	RX/OTC	OHC COVID-19 ANTIGEN SELF TEST KIT	NP	
FASTEP COVID-19 ANTIGEN TEST KIT	NP		ON/GO COVID-19 ANTIGEN TEST KIT	P	QL(2 EA per fill retail)
FLOWFLEX COVID-19 AG HOME TEST KIT	P	QL(2 EA per fill retail)	ON/GO ONE COVID-19 HOME TEST KIT	NP	
FORA 6 CONNECT/GTEL TEST STRP	NP	RX/OTC	ONETOUCH ULTRA BLUE TEST STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA GTEL BLOOD KETONE TEST	P	OTC; QL(1 EA daily)	ONETOUCH ULTRA TEST STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA TEST N'GO ADV-VOICE-6 CON	P	OTC; QL(1 EA daily)	ONETOUCH ULTRA STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA TN'G ADVANCE PRO STRP	NP	RX/OTC	ONETOUCH VERIO STRP	P	RX/OTC
FORTISCARE G1 TEST STRIP STRP	NP	RX/OTC	ONETOUCH VERIO STRP	P	Clinical Edit: Test Strips; RX/OTC
GENABIO COVID-19 RAPID TEST KIT	NP		PILOT COVID-19 AT-HOME TEST KIT	NP	
GNP EASY TOUCH GLUCOSE TEST STRP	NP	RX/OTC	PIP BLOOD GLUCOSE TEST STRIP STRP	NP	RX/OTC
GOJJI BLOOD KETONE TEST	P	OTC; QL(1 EA daily)	PRECISION XTRA KETONE	P	OTC; QL(1 EA daily)
GOTOKNOW COVID-19 ANTIGEN RAPI KIT	NP		PTS PANELS EGLU TEST STRP	NP	RX/OTC
IHEALTH BLOOD GLUCOSE TEST STR STRP	NP	RX/OTC	QUICK TOUCH BLOOD GLUCOSE TEST STRP	NP	RX/OTC

Georgia Medicaid Updated April 1, 2025
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QUICKVUE AT-HOME COVID-19 TEST KIT	P	QL(2 EA per fill retail)	MAXZIDE TABS (<i>Use triamterene & hydrochlorothiazide</i>)	NP	
RELION GLUCOSE TEST STRIPS STRP	NP	RX/OTC	<i>spironolactone & hydrochlorothiazide</i>	P	
RELION KETONE TEST STRP	P	OTC; QL(6.67 EA daily)	<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	P	
RIGHTEST GT333 BLOOD GLUCOSE STRP	NP	RX/OTC	<i>triamterene & hydrochlorothiazide TABS</i>	P	
RIGHTEST GT333 GLUCOSE TEST STRP	NP	RX/OTC	Loop Diuretics		
SPEEDY SWAB COVID-19 ANTIGEN KIT	NP		<i>bumetanide TABS</i>	P	
TRUE METRIX BLOOD GLUCOSE TEST STRP	NP	RX/OTC	BUMEX TABS 0.5 MG (<i>Use bumetanide</i>)	NP	
VIVAGUARD INO TEST STRIPS STRP	NP	RX/OTC	<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	P	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			<i>furosemide TABS</i>	P	
Digestive Enzymes			LASIX TABS (<i>Use furosemide</i>)	NP	
CREON CPEP	P	Smart PA	SOAANZ TABS 20 MG	NP	QL(1 EA daily)
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			<i>torseamide TABS</i>	P	QL(1 EA daily)
Carbonic Anhydrase Inhibitors			Potassium Sparing Diuretics		
<i>acetazolamide CP12</i>	P		ALDACTONE TABS (<i>Use spironolactone</i>)	NP	
<i>acetazolamide TABS</i>	P		<i>amiloride hcl TABS</i>	P	QL(4 EA daily)
<i>dichlorphenamide</i>	P	SP; PA	<i>spironolactone TABS</i>	P	
KEVEYIS (<i>Use dichlorphenamide</i>)	NP	SP; PA	Thiazides and Thiazide-Like Diuretics		
<i>methazolamide TABS</i>	P		<i>chlorthalidone 25 MG, 50 MG</i>	P	
Diuretic Combinations			<i>hydrochlorothiazide CAPS</i>	P	
ALDACTAZIDE (<i>Use spironolactone & hydrochlorothiazide</i>)	NP		<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	P	
<i>amiloride & hydrochlorothiazide</i>	P	QL(1 EA daily)	<i>indapamide TABS 1.25 MG, 2.5 MG</i>	P	
MAXZIDE-25 TABS (<i>Use triamterene & hydrochlorothiazide</i>)	NP		<i>metolazone</i>	P	
			ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
			Adrenal Steroid Inhibitors		

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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ISTURISA	P	SP; PA	<i>teriparatide SOPN</i>	P	SP; PA
RECORLEV	P	SP; PA	TERIPARATIDE SOPN	P	SP; PA
Bone Density Regulators			TYMLOS	P	SP; PA
ACTONEL TABS 35 MG (Use <i>risedronate sodium</i>)	NP	QL(4 EA per fill retail); PA	XGEVA SOLN	P	SP; PA
<i>alendronate sodium SOLN</i>	P	QL(10.8 ML daily)	<i>zoledronic acid CONC</i>	P	SP; PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 EA daily)	<i>zoledronic acid SOLN</i>	P	SP; PA
<i>alendronate sodium TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)	ZOLEDRONIC ACID SOLN	P	SP; PA
ATELVIA TBEC (Use <i>risedronate sodium</i>)	NP	QL(4 EA per 28 day(s) retail); PA	Fertility Regulators		
<i>calcitonin (salmon) IJ</i>	P	QL(2 ML per fill retail)	CHORIONIC GONADOTROPIN IM	P	PA
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail	FOLLISTIM AQ SC 300 UNT/0.36ML, 600 UNT/0.72ML, 900 UNT/1.08ML	P	PA
EVENITY	P	SP; PA	GONAL-F RFF REDIJECT SOPN	P	PA
FORTEO SOPN (Use <i>teriparatide</i>)	NP	SP; PA	GONAL-F RFF SOLR SC	P	PA
FOSAMAX TABS 70 MG (Use <i>alendronate sodium</i>)	NP	QL(0.15 EA daily)	GONAL-F SOLR IJ	P	PA
<i>ibandronate sodium SOLN</i>	P	SP; PA	MENOPUR SC	P	PA
MIACALCIN IJ (Use <i>calcitonin (salmon)</i>)	NP	QL(2 ML per fill retail)	NOVAREL IM	P	PA
NATPARA	P	SP; PA	OVIDREL SOSY	P	PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	P	SP; PA	PREGNYL IM	P	PA
PAMIDRONATE DISODIUM SOLN	P	SP; PA	GnRH/LHRH Antagonists		
PROLIA SOSY	P	SP; PA	<i>cetrorelix acetate</i>	P	PA
RECLAST SOLN (Use <i>zoledronic acid</i>)	NP	SP; PA	CETROTIDE (Use <i>cetrorelix acetate</i>)	NP	PA
<i>risedronate sodium TABS 35 MG</i>	P	QL(4 EA per fill retail); PA	<i>ganirelix acetate</i>	P	PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	P	QL(1 EA daily); PA	GANIRELIX ACETATE (Use <i>ganirelix acetate</i>)	NP	PA
<i>risedronate sodium TBEC</i>	P	QL(4 EA per 28 day(s) retail); PA	Growth Hormone Receptor Antagonists		
			SOMAVERT	P	SP; PA
			Growth Hormones		
			HUMATROPE CART IJ	P	SP; PA
			NORDITROPIN FLEXPROM SOPN	P	SP; PA
			SEROSTIM SC 4 MG, 5 MG, 6 MG	P	SP; PA

Georgia Medicaid

Updated April 1, 2025

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ZORBTIVE SC	P	SP; PA	CARNITOR SOLN PO 1 GM/10ML (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ML daily)
Hormone Receptor Modulators			CARNITOR TABS (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(3 EA daily)
EVISTA (<i>Use raloxifene hcl</i>)	NP	QL(1 EA daily)	<i>cinacalcet hcl</i>	P	SP; PA
<i>raloxifene hcl</i>	P	QL(1 EA daily)	CRYSVITA	P	SP; PA
Insulin-Like Growth Factor Receptor Inhibitors			CYSTADANE (<i>Use betaine</i>)	NP	SP; PA
TEPEZZA	P	SP; PA	ELAPRASE	P	SP; PA
Insulin-Like Growth Factors (Somatomedins)			GALAFOLD	P	QL(0.5 EA daily); SP; PA
INCRELEX	P	SP; PA	KANUMA	P	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			KUVAN PACK (<i>Use sapropterin dihydrochloride</i>)	NP	SP; PA
FENSOLVI (6 MONTH) SC	P	SP; PA	KUVAN TABS (<i>Use sapropterin dihydrochloride</i>)	NP	SP; PA
LUPRON DEPOT-PED (1-MONTH)	P	SP; PA	<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	P	QL(30 ML daily)
LUPRON DEPOT-PED (3-MONTH)	P	SP; PA	<i>levocarnitine (metabolic modifiers) TABS</i>	P	QL(3 EA daily)
SUPPRELIN LA	P	SP; PA	LUMIZYME	P	SP; PA
SYNAREL	P	SP; PA	MEPSEVII	P	SP; PA
TRIPTODUR	P	SP; PA	MYALEPT	P	SP; PA
Metabolic Modifiers			NAGLAZYME	P	SP; PA
ALDURAZYME	P	SP; PA	NEXVIAZYME	P	SP; PA
<i>betaine</i>	P	SP; PA	<i>nitisinone CAPS</i>	P	SP; PA
BRINEURA	P	SP; PA	NITYR TABS	P	SP; PA
BUPHENYL POWD (<i>Use sodium phenylbutyrate</i>)	NP	SP; PA	NULIBRY	P	SP; PA
BUPHENYL TABS (<i>Use sodium phenylbutyrate</i>)	NP	SP; PA	ORFADIN CAPS (<i>Use nitisinone</i>)	NP	SP; PA
<i>calcitriol CAPS</i>	P		ORFADIN SUSP	P	SP; PA
CARBAGLU (<i>Use carglumic acid</i>)	NP	SP; PA	PALYNZIQ	P	SP; PA
<i>carglumic acid</i>	P	SP; PA	<i>paricalcitol SOLN</i>	P	SP; PA
CARNITOR SF SOLN PO (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ML daily)	PARSABIV	P	SP; PA
			REVCIVI	P	SP; PA

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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ROCALTROL CAPS (<i>Use calcitriol</i>)	NP		SANDOSTATIN LAR DEPOT KIT (<i>Use octreotide acetate</i>)	NP	SP; PA
<i>sapropterin dihydrochloride PACK</i>	P	SP; PA	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>Use octreotide acetate</i>)	NP	SP; PA
<i>sapropterin dihydrochloride TABS</i>	P	SP; PA	SIGNIFOR	P	SP; PA
SENSIPAR (<i>Use cinacalcet hcl</i>)	NP	SP; PA	SIGNIFOR LAR	P	SP; PA
<i>sodium phenylbutyrate POWD</i>	P	SP; PA	Vasopressin Receptor Antagonists		
<i>sodium phenylbutyrate TABS</i>	P	SP; PA	JYNARQUE TABS	P	SP; PA
STRENSIQ	P	SP; PA	JYNARQUE TBPk	P	SP; PA
VIMIZIM	P	SP; PA	SAMSCA TABS (<i>Use tolvaptan</i>)	NP	SP; PA
XURIDEN	P	SP; PA	<i>tolvaptan TABS</i>	P	SP; PA
ZEMPLAR SOLN (<i>Use paricalcitol</i>)	NP	SP; PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
Natriuretic Peptides			Estrogen Combinations		
VOXZOGO	P	SP; PA	ACTIVEVELLA TABS 1 MG-0.5 MG (<i>Use estradiol & norethindrone acetate</i>)	NP	QL(1 EA daily)
Posterior Pituitary Hormones			COMBIPATCH PTTW	P	QL(8 EA per 28 day(s) retail)
DDAVP PF SOLN IJ (<i>Use desmopressin acetate</i>)	NP	SP; PA	<i>estradiol & norethindrone acetate TABS</i>	P	QL(1 EA daily)
DDAVP SOLN IJ 4 MCG/ML (<i>Use desmopressin acetate</i>)	NP	SP; PA	<i>norethindrone acetate-ethinyl estradiol</i>	P	
DDAVP TABS (<i>Use desmopressin acetate</i>)	NP	QL(6 EA daily)	PREMPHASE	P	
<i>desmopressin acetate spray</i>	P	QL(5 ML per fill retail)	PREMPRO	P	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	P	QL(5 ML per fill retail)	Estrogens		
<i>desmopressin acetate SOLN IJ</i>	P	SP; PA	ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	P	QL(8 EA per fill retail)
DESMOPRESSIN ACETATE SOLN NA	P	SP; PA	CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>Use estradiol</i>)	NP	QL(4 EA per fill retail)
<i>desmopressin acetate TABS</i>	P	QL(6 EA daily)	ESTRACE TABS (<i>Use estradiol</i>)	NP	
Somatostatic Agents					
<i>octreotide acetate KIT</i>	P	SP; PA			
<i>octreotide acetate SOLN</i>	P	SP; PA			

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>estradiol PTTW</i>	P	QL(8 EA per fill retail)
<i>estradiol PTWK</i>	P	QL(4 EA per fill retail)
<i>estradiol TABS</i>	P	
MINIVELLE PTTW (<i>Use estradiol</i>)	NP	QL(8 EA per fill retail)
PREMARIN TABS	P	QL(1 EA daily)
VIVELLE-DOT PTTW (<i>Use estradiol</i>)	NP	QL(8 EA per fill retail)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
<i>ciprofloxacin hcl TABS 100 MG</i>	P	QL(6 EA per fill retail)
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P	
CIPRO TABS 250 MG, 500 MG (<i>Use ciprofloxacin hcl</i>)	NP	
<i>levofloxacin TABS</i>	P	QL(1 EA daily; 14 EA per fill retail)
<i>ofloxacin 400 MG</i>	P	QL(56 EA per fill retail)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Antiflatulents		
MYLICON INFANTS GAS RELIEF SUSP (<i>Use simethicone</i>)	NP	OTC; QL(31 ML per 30 day(s) retail)
<i>simethicone CHEW 80 MG</i>	P	OTC
<i>simethicone LIQD PO</i>	P	OTC; QL(31 ML per 30 day(s) retail)
<i>simethicone SUSP</i>	P	OTC; QL(31 ML per 30 day(s) retail)
Bile Acid Synthesis Disorder Agents		
CHOLBAM	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Farnesoid X Receptor (FXR) Agonists		
OCALIVA	P	QL(1 EA daily); SP; PA
Gallstone Solubilizing Agents		
CHENODAL	P	SP; PA
CTEXLI 250 MG	P	SP; PA
URSO 250 TABS (<i>Use ursodiol</i>)	NP	QL(7 EA daily)
<i>ursodiol CAPS</i>	P	
<i>ursodiol TABS 250 MG</i>	P	QL(7 EA daily)
Gastrointestinal Stimulants		
GIMOTI SOLN NA	P	SP; PA
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>metoclopramide hcl TABS</i>	P	
REGLAN TABS (<i>Use metoclopramide hcl</i>)	NP	
Ileal Bile Acid Transporter (IBAT) Inhibitors		
BYLVAY (PELLETS) CPSP	P	SP; PA
BYLVAY CAPS	P	SP; PA
LIVMARLI	P	SP; PA
Inflammatory Bowel Agents		
APRISO CP24 (<i>Use mesalamine</i>)	NP	
ASACOL HD TBEC (<i>Use mesalamine</i>)	NP	
AVSOLA	P	SP; PA
AZULFIDINE EN-TABS TBEC (<i>Use sulfasalazine</i>)	NP	
AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NP	
<i>balsalazide disodium CAPS</i>	P	QL(9 EA daily)
COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NP	QL(9 EA daily)

Georgia Medicaid Updated April 1, 2025
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DELZICOL CPDR (<i>Use mesalamine</i>)	NP		UROCIT-K 5 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NP	
ENTYVIO SOLR	P	SP; PA	Cystinosis Agents		
LIALDA TBEC (<i>Use mesalamine</i>)	NP		CYSTAGON CAPS	P	SP; PA
<i>mesalamine CP24</i>	P		PROCYSBI CPDR	P	SP; PA
<i>mesalamine CPDR</i>	P		PROCYSBI PACK	P	SP; PA
<i>mesalamine ENEM</i>	P	QL(60 ML daily)	Genitourinary Irrigants		
<i>mesalamine TBEC</i>	P		SODIUM CHLORIDE 0.9 %	P	
SFROWASA ENEM	P		<i>sodium chloride (gu irrigant) 0.9 %</i>	P	
STELARA 130 MG/26ML	P	SP; PA	Hyperoxaluria Agents		
<i>sulfasalazine TABS</i>	P		OXLUMO	P	SP; PA
<i>sulfasalazine TBEC</i>	P		Prostatic Hypertrophy Agents		
Intestinal Acidifiers			<i>finasteride</i>	P	QL(1 EA daily)
<i>lactulose (encephalopathy)</i>	P		PROSCAR (<i>Use finasteride</i>)	NP	QL(1 EA daily)
Phosphate Binder Agents			<i>tamsulosin hcl</i>	P	QL(2 EA daily)
<i>calcium acetate (phosphate binder) CAPS</i>	P		Urinary Analgesics		
Short Bowel Syndrome (SBS) Agents			AZO URINARY PAIN RELIEF TABS (<i>Use phenazopyridine hcl</i>)	NF	
GATTEX	P	SP; PA	<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	P	
Tryptophan Hydroxylase Inhibitors			PYRIDIUM TABS (<i>Use phenazopyridine hcl</i>)	NP	
XERMELO	P	SP; PA	Urinary Stone Agents		
GENITOURINARY AGENTS - MISCELLANEOUS -			THIOLA EC TBEC (<i>Use tiopronin</i>)	NP	SP; PA
Miscellaneous Drugs to Treat Reproductive Organs and Urinary System			THIOLA TABS (<i>Use tiopronin</i>)	NP	SP; PA
Alkalinizers			<i>tiopronin TABS</i>	P	SP; PA
<i>potassium citrate (alkalinizer) TBCR</i>	P		<i>tiopronin TBEC</i>	P	SP; PA
<i>sodium citrate & citric acid</i>	NP	RX/OTC	Vesicoureteral Reflux (VUR) Agents		
<i>sodium citrate & citric acid</i>	P	QL(500 ML per 30 day(s) retail); RX/OTC	DEFLUX	P	SP; PA
UROCIT-K 10 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NP		GOUT AGENTS - Drugs to Treat Gout		

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Gout Agent Combinations			HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	P	SP; PA
<i>colchicine w/ probenecid</i>	P				
Gout Agents			HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	P	SP; PA
<i>allopurinol 100 MG, 300 MG</i>	P		HUMATE-P SOLR	P	SP; PA
<i>colchicine TABS</i>	P	QL(6 EA per fill retail)	IDELVION	P	SP; PA
COLCRYS TABS (<i>Use colchicine</i>)	NP	QL(6 EA per fill retail)	IXINITY SOLR	P	SP; PA
KRYSTEXXA	P	SP; PA	JIVI	P	SP; PA
ZYLOPRIM (<i>Use allopurinol</i>)	NP		KCENTRA	P	SP; PA
Uricosurics			KOATE-DVI SOLR 500 UNIT, 1000 UNIT	P	SP; PA
<i>probenecid</i>	P		KOATE SOLR	P	SP; PA
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders			KOGENATE FS KIT	P	SP; PA
Antihemophilic Products			KOVALTRY	P	SP; PA
ADVATE	P	SP; PA	NOVOSEVEN RT	P	SP; PA
ADYNOVATE	P	SP; PA	NUWIQ KIT	P	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	P	SP; PA	NUWIQ SOLR	P	SP; PA
ALPHANATE SOLR	P	SP; PA	OBIZUR	P	SP; PA
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	P	SP; PA	PROFILNINE	P	SP; PA
ALPROLIX	P	SP; PA	REBINYN	P	SP; PA
BENEFIX KIT	P	SP; PA	RECOMBINATE SOLR	P	SP; PA
COAGADEX	P	SP; PA	RIASTAP	P	SP; PA
CORIFACT	P	SP; PA	RIXUBIS SOLR	P	SP; PA
ELOCTATE	P	SP; PA	SEVENFACT	P	SP; PA
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	P	SP; PA	TRETTEN	P	SP; PA
FEIBA	P	SP; PA	VONVENDI	P	SP; PA
FIBRYGA	P	SP; PA	WILATE KIT	P	SP; PA
			XYNTHA	P	SP; PA
			XYNTHA SOLOFUSE	P	SP; PA
			Bradykinin B2 Receptor Antagonists		
			FIRAZYR SOSY (<i>Use icatibant acetate</i>)	NP	SP; PA
			<i>icatibant acetate SOSY</i>	P	SP; PA
			Complement Inhibitors		
			BERINERT KIT	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
CINRYZE SOLR IV	P	SP; PA
ENJAYMO	P	SP; PA
HAEGARDA SOLR SC	P	SP; PA
RUCONEST	P	SP; PA
TAVNEOS	P	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	P	
Hemin		
PANHEMATIN 350 MG	P	SP; PA
Human Protein C		
CEPROTIN	P	SP; PA
Plasma Kallikrein Inhibitors		
KALBITOR	P	SP; PA
ORLADEYO	P	SP; PA
TAKHZYRO SOLN	P	SP; PA
TAKHZYRO SOSY	P	SP; PA
Plasma Proteins		
RYPLAZIM	P	SP; PA
THROMBATE III	P	SP; PA
Platelet Aggregation Inhibitors		
BRILINTA	P	QL(2 EA daily)
CABLIVI	P	SP; PA
<i>cilostazol</i>	P	QL(2 EA daily)
<i>clopidogrel bisulfate 75 MG</i>	P	
<i>dipyridamole</i>	P	
EFFIENT (Use <i>prasugrel hcl</i>)	NP	QL(1 EA daily)
PLAVIX 75 MG (Use <i>clopidogrel bisulfate</i>)	NP	
<i>prasugrel hcl</i>	P	QL(1 EA daily)
Pyruvate Kinase Activators		
PYRUKYND TAPER PACK TBPB	P	SP; PA
PYRUKYND TABS	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Thrombolytic Agent - Misc		
DEFITELIO	P	SP; PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	P	SP; PA
CEREZYME 400 UNIT	P	SP; PA
<i>miglustat</i>	P	SP; PA
ZAVESCA (Use <i>miglustat</i>)	NP	SP; PA
Agents for Sick Cell Disease		
DROXIA CAPS	P	
ENDARI (Use <i>glutamine (sickle cell)</i>)	NP	SP; PA
<i>glutamine (sickle cell)</i>	P	SP; PA
OXBRYTA TABS 500 MG	P	PA
OXBRYTA TBSO	P	PA
SIKLOS TABS	P	PA
Cobalamins		
<i>cyanocobalamin SOLN 1J 1000 MCG/ML</i>	P	QL(10 ML per 270 day(s) retail)
Folic Acid/Folates		
<i>folic acid TABS 400 MCG, 800 MCG</i>	P	OTC; QL(1 EA daily)
<i>folic acid TABS 1 MG</i>	P	RX/OTC
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN	P	SP; PA
ARANESP (ALBUMIN FREE) SOSY	P	SP; PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP; PA
GRANIX SOLN	P	SP; PA
GRANIX SOSY	P	SP; PA

Georgia Medicaid Updated April 1, 2025
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LEUKINE SOLR IJ	P	SP; PA	FERROUS SULFATE TBEC (<i>Use ferrous sulfate</i>)	NP	OTC; AL(Up to 50 yrs old)
MIRCERA	P	SP; PA	IRON CHEWS PEDIATRIC CHEW	P	OTC
MULPLETA	P	SP; PA	IRON TABS 28 MG	P	OTC
NEUPOGEN SOLN	P	SP; PA	<i>polysaccharide iron complex CAPS</i>	P	QL(1 EA daily)
NEUPOGEN SOSY	P	SP; PA	Stem Cell Mobilizers		
NIVESTYM SOLN	P	SP; PA	MOZOBIL (<i>Use plerixafor</i>)	NP	SP; PA
NIVESTYM SOSY	P	SP; PA	<i>plerixafor</i>	P	SP; PA
NYVEPRIA	P	SP; PA	HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
PROCRIT	P	SP; PA	Hemostatics - Systemic		
PROCRIT	P	SP; PA	AMICAR SOLN PO (<i>Use aminocaproic acid</i>)	NP	QL(236.5 ML per 30 day(s) retail); SP
RELEUKO SOLN	P	SP; PA	AMICAR TABS 1000 MG (<i>Use aminocaproic acid</i>)	NP	SP; PA
RELEUKO SOSY	P	SP; PA	AMICAR TABS 500 MG (<i>Use aminocaproic acid</i>)	NP	QL(24 EA per fill retail); SP
RETACRIT	P	SP; PA	<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	P	QL(236.5 ML per 30 day(s) retail); SP
ZARXIO	P	SP; PA	<i>aminocaproic acid SOLN IV 250 MG/ML</i>	P	SP; PA
Hematopoietic Mixtures			<i>aminocaproic acid TABS 1000 MG</i>	P	SP; PA
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	P	QL(1 EA daily)	<i>aminocaproic acid TABS 500 MG</i>	P	QL(24 EA per fill retail); SP
HEMATINIC PLUS VIT/MINERALS TABS	P	QL(1 EA daily)	<i>tranexamic acid TABS</i>	P	QL(30 EA per 7 day(s) retail); AL(At least 12 yrs old)
Iron			HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
FER-IN-SOL SOLN (<i>Use ferrous sulfate</i>)	NP	OTC; QL(3.4 ML daily)	Antihistamine Hypnotics		
FERRETT'S TABS	P	OTC; QL(2 EA daily)	<i>diphenhydramine hcl (sleep) CAPS 50 MG</i>	P	OTC
<i>ferrous fumarate TABS</i>	P	OTC; QL(2 EA daily)			
FERROUS GLUCONATE TABS 324 MG	P	OTC; QL(100 EA per 30 day(s) retail); AL(Up to 50 yrs old)			
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	P	OTC; QL(3.4 ML daily)			
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	P	OTC; AL(Up to 50 yrs old)			
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	P	OTC; AL(Up to 50 yrs old)			
<i>ferrous sulfate TBEC</i>	P	OTC; AL(Up to 50 yrs old)			

Georgia Medicaid Updated April 1, 2025
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<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	P	OTC	<i>zolpidem tartrate TABS</i>	P	QL(14 EA per 31 day(s) retail); AL(At least 21 yrs old)
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	OTC; QL(1 EA daily)	LAXATIVES - Bowel Treatment Drugs		
<i>doxylamine succinate (sleep)</i>	P	OTC	Bulk Laxatives		
UNISOM SLEEPGELS CAPS (Use <i>diphenhydramine hcl (sleep)</i>)	NP	OTC	<i>calcium polycarbophil TABS</i>	P	OTC; QL(10 EA daily)
UNISOM SLEEPTABS (Use <i>doxylamine succinate (sleep)</i>)	NP	OTC	EVAC POWD (Use <i>psyllium</i>)	NP	OTC
Barbiturate Hypnotics			METAMUCIL FREE & NATURAL POWD (Use <i>psyllium</i>)	NP	
<i>phenobarbital ELIX</i>	P		METAMUCIL POWD (Use <i>psyllium</i>)	NP	OTC
<i>phenobarbital TABS</i>	P		NATURAL FIBER LAXATIVE POWD	P	OTC
Non-Barbiturate Hypnotics			<i>psyllium CAPS 0.52 GM</i>	P	OTC
AMBIEN TABS (Use <i>zolpidem tartrate</i>)	NP	QL(14 EA per 31 day(s) retail); AL(At least 21 yrs old)	<i>psyllium POWD 43 %</i>	NP	
<i>flurazepam hcl</i>	P	AL(At least 18 yrs old - Up to 65 yrs old)	<i>psyllium POWD 43 %</i>	P	
HALCION 0.25 MG (Use <i>triazolam</i>)	NP	QL(1 EA daily); AL(At least 18 yrs old)	<i>psyllium POWD 28.3 %, 30 %, 33 %, 48.57 %, 58.6 %, 100 %</i>	P	OTC
<i>midazolam hcl SOLN IJ</i>	P		Laxative Combinations		
RESTORIL 15 MG, 30 MG (Use <i>temazepam</i>)	NP	AL(At least 18 yrs old)	GOLYTELY SOLR (Use <i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	NP	QL(4000 ML per fill retail)
<i>temazepam 15 MG, 30 MG</i>	P	AL(At least 18 yrs old)	<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	QL(4000 ML per fill retail)
<i>triazolam</i>	P	QL(1 EA daily); AL(At least 18 yrs old)	<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	P	QL(4000 ML per fill retail)
<i>zaleplon 5 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)	PEG-PREP	P	
<i>zaleplon 10 MG</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	<i>sennosides-docusate sodium TABS</i>	P	OTC; QL(4 EA daily)
			SENOKOT S TABS (Use <i>sennosides-docusate sodium</i>)	NP	OTC; QL(4 EA daily)
			<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	P	

Georgia Medicaid Updated April 1, 2025
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SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)	NP		DULCOLAX SUPP (Use bisacodyl)	NP	OTC; QL(12 EA per fill retail)
Laxatives - Miscellaneous			DULCOLAX TBEC (Use bisacodyl)	NP	OTC; QL(1 EA daily)
GLYCERIN (ADULT) SUPP (Use glycerin (laxative))	NP	OTC	sennosides TABS 8.6 MG	P	OTC; QL(12 EA per fill retail)
glycerin (laxative) SUPP 2 GM	P	OTC	SENOKOT TABS (Use sennosides)	NP	OTC; QL(12 EA per fill retail)
lactulose SOLN	P		Surfactant Laxatives		
MIRALAX POWD (Use polyethylene glycol 3350)	NP	QL(34 GM daily)	COLACE CLEAR CAPS (Use docusate sodium)	NP	OTC
polyethylene glycol 3350 POWD	P	QL(34 GM daily)	COLACE CAPS 100 MG (Use docusate sodium)	NP	OTC; QL(3 EA daily)
SORBITOL PO 70 %	P	OTC	docusate sodium CAPS 50 MG	P	OTC
Saline Laxatives			docusate sodium CAPS 100 MG, 250 MG	P	OTC; QL(3 EA daily)
FLEET ENEMA ENEM (Use sodium phosphates)	NP	OTC	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML	P	OTC
FLEET PEDIATRIC ENEM (Use sodium phosphates)	NP	OTC	DOCUSATE SODIUM SYRP	P	OTC
FLEET SALINE ENEMA ENEM (Use sodium phosphates)	NP	OTC	docusate sodium TABS	P	OTC
magnesium citrate 1.745 GM/30ML	P	OTC	MACROLIDES - Drugs to Treat Bacterial Infections		
magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	P	OTC; QL(992 ML per 30 day(s) retail)	Azithromycin		
sodium phosphates ENEM	P	OTC	azithromycin PACK	P	QL(2 EA per fill retail)
Stimulant Laxatives			azithromycin SUSR 200 MG/5ML	P	QL(30 ML per fill retail)
bisacodyl SUPP	P	OTC; QL(12 EA per fill retail)	azithromycin SUSR 100 MG/5ML	P	QL(15 ML per fill retail)
bisacodyl TBEC	P	OTC; QL(1 EA daily)	azithromycin TABS 500 MG	P	QL(4 EA daily)
DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl)	NP	OTC; QL(1 EA daily)	azithromycin TABS 250 MG	P	QL(6 EA per fill retail)
			azithromycin TABS 600 MG	P	QL(8 EA per 28 day(s) retail)
			ZITHROMAX TRI-PAK TABS (Use azithromycin)	NP	QL(4 EA daily)

Georgia Medicaid Updated April 1, 2025
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ZITHROMAX Z-PAK TABS (<i>Use azithromycin</i>)	NP	QL(6 EA per fill retail)
ZITHROMAX PACK	P	QL(2 EA per fill retail)
ZITHROMAX SUSR 100 MG/5ML (<i>Use azithromycin</i>)	NP	QL(15 ML per fill retail)
ZITHROMAX SUSR 200 MG/5ML (<i>Use azithromycin</i>)	NP	QL(30 ML per fill retail)
ZITHROMAX TABS 250 MG (<i>Use azithromycin</i>)	NP	QL(6 EA per fill retail)
ZITHROMAX TABS 500 MG (<i>Use azithromycin</i>)	NP	QL(4 EA daily)
Clarithromycin		
<i>clarithromycin SUSR 125 MG/5ML</i>	P	QL(100 ML per fill retail)
<i>clarithromycin SUSR 250 MG/5ML</i>	P	QL(200 ML per fill retail)
<i>clarithromycin TABS</i>	P	QL(28 EA per fill retail)
<i>clarithromycin TB24</i>	P	QL(14 EA per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
ERYPED 200 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
ERYPED 400 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
<i>erythromycin base CPEP</i>	P	
<i>erythromycin base TABS</i>	P	
<i>erythromycin base TBEC</i>	P	
<i>erythromycin ethylsuccinate SUSR</i>	P	
<i>erythromycin ethylsuccinate TABS</i>	P	
<i>erythromycin stearate TABS 250 MG</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
GAUZE SPONGES	P	RX/OTC
Contraceptives		
CONDOMS-MISC	P	QL (36 ea per 30 days retail); OTC
Diabetic Supplies		
BIOTEL CARE BLOOD GLUCOSE KIT	NP	RX/OTC
CONTOUR NEXT EZ KIT	NP	RX/OTC
CONTOUR NEXT GEN MONITOR KIT	NP	RX/OTC
CONTOUR PLUS BLUE KIT	NP	RX/OTC
DEXCOM G6 RECEIVER	NP	
DEXCOM G7 RECEIVER	NP	
DEXCOM G7 SENSOR	NP	
EASY MAX T1 GLUCOSE SYSTEM KIT	NP	RX/OTC
EASY TOUCH HEALTHPRO GLUCOSE KIT	NP	RX/OTC
EVERSENSE 365 SENSOR/HOLDER	NP	
EVERSENSE E3 SENSOR/HOLDER	NP	
FREESTYLE LIBRE 14 DAY READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 14 DAY SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE 2 PLUS SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE 2 READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 2 SENSOR	P	QL(2 EA per 28 day(s) retail); PA

Georgia Medicaid Updated April 1, 2025
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FREESTYLE LIBRE 3 PLUS SENSOR	P	QL(2 EA per 28 day(s) retail); PA	ADVOCATE INSULIN PEN NEEDLE	NP	RX/OTC
FREESTYLE LIBRE 3 READER	P	QL(1 EA per 365 day(s) retail); PA	AQINJECT PEN NEEDLE	NP	RX/OTC
FREESTYLE LIBRE 3 SENSOR	P	QL(2 EA per 28 day(s) retail); PA	ASSURE ID DUO PRO PEN NEEDLES	NP	RX/OTC
FREESTYLE LIBRE READER	P	QL(1 EA per 365 day(s) retail); PA	ASSURE ID PRO PEN NEEDLES	NP	RX/OTC
FREESTYLE LITE KIT	NP	RX/OTC	AUM INSULIN SAFETY PEN NEEDLE	NP	RX/OTC
GUARDIAN 4 GLUCOSE SENSOR	NP		AUM PEN NEEDLE	NP	RX/OTC
GUARDIAN REAL-TIME REPLACE PED	NP		BD PEN NEEDLES	P	QL (5 ea daily); OTC
LANCETS-MISC	P	QL (6.67 ea daily); OTC	COMFORT EZ PRO PEN NEEDLES	NP	RX/OTC
LANCING DEVICE-MISC	P	OTC	EASY COMFORT PEN NEEDLES	NP	RX/OTC
MM BLOOD GLUCOSE SYSTEM KIT	NP	RX/OTC	EMBECTA AUTOSHIELD DUO	NP	RX/OTC
ONETOUCH SOLUTIONS STARTER KIT KIT	NP		EMBECTA PEN NEEDLE NANO	NP	RX/OTC
ONETOUCH ULTRA 2 KIT	P	RX/OTC	EMBECTA PEN NEEDLE NANO 2 GEN	NP	RX/OTC
ONETOUCH ULTRA MINI KIT	P	RX/OTC	EMBECTA PEN NEEDLE U/F	NP	
ONETOUCH VERIO FLEX SYSTEM KIT	P	RX/OTC	EMBRACE PEN NEEDLES	NP	RX/OTC
ONETOUCH VERIO REFLECT KIT	P	RX/OTC	GNP PEN NEEDLES	NP	RX/OTC
QUICK TOUCH BLOOD GLUCOSE KIT	NP	RX/OTC	INSULIN SYRINGES	P	QL (5 ea daily); OTC
TEMPO WELCOME KIT	NP	RX/OTC	INSULIN SYRINGES-MISC	P	QL (5 ea daily); RX/OTC
Misc. Devices			INSUPEN PEN NEEDLES	NP	RX/OTC
ALCOHOL PREP PADS-MISC	P	OTC	PEN NEEDLE/5-BEVEL TIP	NP	RX/OTC
Optical and Ophthalmic Supplies			PEN NEEDLES	NP	RX/OTC
SUSVIMO OCULAR IMPLANT	P	SP; PA	PURE COMFORT SAFETY PEN NEEDLE	NP	RX/OTC
Parenteral Therapy Supplies			QUICK TOUCH INSULIN PEN NEEDLE	NP	
			SURE COMFORT PEN NEEDLES	NP	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TECHLITE PLUS PEN NEEDLES	NP	RX/OTC	AEROECLIPSE MASK MEDIUM MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT PEN NEEDLES	NP	RX/OTC	AEROECLIPSE MASK SMALL MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT PRO PEN NEEDLES	NP	RX/OTC	AEROTRACH PLUS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLE	NP	RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ULTIGUARD SAFEPAK PEN NEEDLE	NP	RX/OTC	AIRZONE PEAK FLOW METER	P	RX/OTC
UNIFINE OTC PEN NEEDLES	NP	RX/OTC	ALL FLOW 1000 PFT FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
UNIFINE PROTECT PEN NEEDLE	NP	RX/OTC	ASSESS PEAK FLOW METER	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE	NP	RX/OTC	BREATHE EASE NEB MASK/CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
VERIFINE INSULIN PEN NEEDLE	NP	RX/OTC	BREATHE EASE NEB MASK/INFANT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
VERIFINE PLUS PEN NEEDLE	NP	RX/OTC	BREATHE EASE PEAK FLOW METER	P	RX/OTC
Respiratory Therapy Supplies			BUBBLES THE FISH II PEDI MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ACE AEROSOL CLOUD ENHANCER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	CARETOUCH 2 CPAP HOSE HANGER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ACTIVITY POUCH MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	CARETOUCH CPAP & BIPAP HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ADAPTER PED DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	CARETOUCH CPAP MASK WIPES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ADULT AEROSOL MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	CARETOUCH CPAP PRE-WASH SOLN MISC	P	QL(1 ML per 360 day(s) retail); RX/OTC
ADULT DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	CARETOUCH CPAP TUBE BRUSH MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
ADULT MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	CARETOUCH UNIVERSL CPAP FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
AEROECLIPSE EZ TWIST TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC			
AEROECLIPSE MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC			

Georgia Medicaid Updated April 1, 2025
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CLEVER CHOICE PEAK FLOW METER	P	RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC
CO MONITOR REPLACEMENT PIECES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	FLYP HYPERSONIQ CARTRIDGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE FULL RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	FULL KIT NEBULIZER SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE LOW RANGE/PEDIATRIC MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	HUDSON RCI AEROSOL MASK ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE LOW RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	INNOSPIRE REPLACEMENT FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE PAPER MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	KOKO PEAK PRO MOUTHPIECE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
DISPOSABLE UNIVERSAL RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	LITETOUCH MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
EASY FLOW 300 MM HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	LITETOUCH MASK MEDIUM MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
EASY FLOW 400 MM HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	LITETOUCH MASK SMALL MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
EASY FLOW AIR NOZZLE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	LUNG PERFORM PEAK FLOW METER	P	RX/OTC
EASY FLOW HEPA FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	MASK VORTEX/CHILD/FROG	P	QL(1 EA per 360 day(s) retail); RX/OTC
EBASE CONTROLLER KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	MASK VORTEX/TODDLER/LAD YBUG	P	QL(1 EA per 360 day(s) retail); RX/OTC
EXPIRATORY MOUTHPIECE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	MICROLIFE DIGITAL PEAK FLOW	P	RX/OTC
FILTER AIR PP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	MINI WRIGHT PEAK FLOW METER	P	RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC	MINIELITE FILTER REPLACEMENTS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
FLEXICHAMBER CHILD MASK/LARGE	P	QL(1 EA per 360 day(s) retail); RX/OTC	NEBULIZER AIR TUBE/PLUGS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
			NEBULIZER MASK ADULT/TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC

Georgia Medicaid Updated April 1, 2025
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NEBULIZER MASK ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI MASK SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SMARTMASK BABY/ELBOW MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK PED/TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SOFT PLASTIC ADULT MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NOSE CLIP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SOFT PLASTIC PED MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
OMBRA COMPRESSOR AIR FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI VORTEX ADULT MASK	P	QL(1 EA per 360 day(s) retail); RX/OTC
ONE FLOW TESTER MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK A-I-R FLOW METER	P	RX/OTC
ONE-WAY VALVED EXPIRATORY MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK AIR PEAK FLOW METER	P	RX/OTC
ONE-WAY VALVED INSPIRATORY MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK FLOW METER UNIVERSAL RANG	P	RX/OTC
PANDA MASK LARGE	P	QL(1 EA per 360 day(s) retail); RX/OTC	PED DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
PANDA MASK MEDIUM	P	QL(1 EA per 360 day(s) retail); RX/OTC	PEDIATRIC MOUTHPIECE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PANDA MASK SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC	PEDIATRIC PANDA MASK	P	QL(1 EA per 360 day(s) retail); RX/OTC
PARI ALTERA NEBULIZER HANDSET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PERSONAL BEST FULL RANGE	P	RX/OTC
PARI BABY CONVERSION KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PFLEX MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PARI BUBBLES PEDIATRIC MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PHARMACIST CHOICE MASK WIPES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PARI ERAPID NEBULIZER HANDSET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PIKO 1	P	RX/OTC
PARI EXPIRATORY FILTER SET DEVI	P	QL(1 EA per 360 day(s) retail); RX/OTC	PILLOW MASK/ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
			PILLOW MASK/CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
			PILLOW MASK/PEDIATRIC MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
POCKET PEAK FLOW METER	P	RX/OTC	SILICONE MASK/PEDIATRIC MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
POCKETPEAK PEAK FLOW METER	P	RX/OTC	SOOTHENE NBL 100 ADULT MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PRONEB ULTRA FILTER SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SOOTHENE NBL 100 CHILD MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT FLOW METER ADULT	P	RX/OTC	SOOTHENE NBL 100 MED CUP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT FLOW METER CHILD	P	RX/OTC	SOOTHENE NBL 100 MESH CAP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT PEAK FLOW MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES	P	QL (3 ea per 180days retail)
REPLACEMENT AIR FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SPACER/AEROSOL-HOLDING CHAMBERS	P	QL (2 ea per 360 days retail)
REPLACEMENT FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SPACERS AND BREATHING CHAMBERS-MISC	P	RX/OTC
REUSABLE COMFORTSEAL MASK-LRG MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	STRIVE DUAL ZONE PEAK FLOW MTR	P	RX/OTC
REUSABLE COMFORTSEAL MASK-MED MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	THRESHOLD IMT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
REUSABLE COMFORTSEAL MASK-SML MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	TRUZONE PEAK FLOW METER	P	RX/OTC
SAMI THE SEAL FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	TUBING/WING TIP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
SIDESTREAM ADULT FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	ULTRA NEB ACCESSORIES KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
SIDESTREAM PEDIATRIC FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	WINDMILL TRAINER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
SIDESTREAM PLS ADULT FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
SILICONE MASK/ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	Migraine Combinations		
SILICONE MASK/INFANT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	CAFERGOT TABS (<i>Use ergotamine w/ caffeine</i>)	NP	AL(At least 18 yrs old)

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>ergotamine w/ caffeine TABS</i>	P	AL(At least 18 yrs old)	<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
Migraine Products			<i>rizatriptan benzoate TBDP</i>	P	QL(0.4 EA daily)
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	P	AL(At least 18 yrs old)	<i>sumatriptan</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)
MIGRANAL SOLN NA (Use <i>dihydroergotamine mesylate</i>)	NP	AL(At least 18 yrs old)	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)
Serotonin Agonists			<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	P	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)
<i>eletriptan hydrobromide</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)	<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)
IMITREX 5 MG/ACT, 20 MG/ACT (Use <i>sumatriptan</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan succinate TABS</i>	P	QL(9 EA per 30 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (Use <i>sumatriptan succinate</i>)	NP	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)	<i>zolmitriptan SOLN 5 MG</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use <i>sumatriptan succinate</i>)	NP	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)	<i>zolmitriptan TABS</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)
IMITREX TABS (Use <i>sumatriptan succinate</i>)	NP	QL(9 EA per 30 day(s) retail); AL(At least 12 yrs old)	<i>zolmitriptan TBDP</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)
MAXALT-MLT TBDP 10 MG (Use <i>rizatriptan benzoate</i>)	NP	QL(0.4 EA daily)	ZOMIG SOLN 5 MG (Use <i>zolmitriptan</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)
MAXALT TABS 10 MG (Use <i>rizatriptan benzoate</i>)	NP	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)	MINERALS & ELECTROLYTES		
<i>naratriptan hcl</i>	P	QL(9 EA per 30 day(s) retail); AL(At least 18 yrs old)	Calcium		
RELPAK (Use <i>eletriptan hydrobromide</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)	CALCIUM 600 +D HIGH POTENCY TABS	P	OTC; QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	P	OTC	GOODSENSE ELECTROLYTE ADV CARE SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 20 MCG-600 MG, 400 UNIT-600 MG, 800 UNIT-600 MG</i>	P	QL(2 EA daily)	HYDRALYTE FREEZER POPS SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate-vitamin d TABS 600 MG-200 UNIT</i>	P	OTC; QL(2 EA daily)	HYDRALYTE SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT</i>	P	OTC	KINDERLYTE PREMAX SOLN	P	QL(1000 ML per fill retail)
CALTRATE 600+D3 TABS (Use <i>calcium carbonate-cholecalciferol</i>)	NP	QL(2 EA daily)	KINDERLYTE SOLN	P	QL(1000 ML per fill retail)
CALTRATE BONE HEALTH TABS (Use <i>calcium carbonate-cholecalciferol</i>)	NP	QL(2 EA daily)	<i>oral electrolytes SOLN</i>	P	QL(1000 ML per fill retail)
<i>oyster shell</i>	P	OTC	PEDIALYTE ADVANCED CARE SOLN (Use <i>oral electrolytes</i>)	NP	QL(1000 ML per fill retail)
OYSTER SHELL CALCIUM/D TABS 500 MG-200 UNIT	P	OTC	PEDIALYTE FREEZER POPS SOLN (Use <i>oral electrolytes</i>)	NP	QL(1000 ML per fill retail)
PARVA-CAL 200 UNIT-500 MG	P	OTC	PEDIALYTE IMMUNE SUPPORT SOLN	P	QL(1000 ML per fill retail)
QC CALCIUM 500MG-D3 TABS	P	OTC	PEDIALYTE SINGLES SOLN (Use <i>oral electrolytes</i>)	NP	QL(1000 ML per fill retail)
Electrolyte Mixtures			PEDIALYTE SOLN (Use <i>oral electrolytes</i>)	NP	QL(1000 ML per fill retail)
BIOLYTE SOLN	P	QL(1000 ML per fill retail)	TRUELYTE SOLN	P	QL(1000 ML per fill retail)
CERASPORT EX1 SOLN	P	QL(1000 ML per fill retail)	Fluoride		
CERASPORT SOLN	P	QL(1000 ML per fill retail)	<i>sodium fluoride CHEW</i>	P	AL(Up to 15 yrs old)
ENFAMIL ENFALYTE SOLN	P	QL(1000 ML per fill retail)	<i>sodium fluoride SOLN</i>	P	AL(Up to 15 yrs old); RX/OTC
EQUALYTE SOLN (Use <i>oral electrolytes</i>)	NP	QL(1000 ML per fill retail)	SOLUVITA SOLN	P	AL(Up to 15 yrs old); RX/OTC
FT ELECTROLYTE SOLN	P	QL(1000 ML per fill retail)	Magnesium		
			MAGNESIUM EXTRA STRENGTH CAPS	P	OTC
			<i>magnesium oxide (mg supplement) TABS</i>	P	OTC
			MAGNESIUM OXIDE -MG SUPPLEMENT CAPS	P	OTC

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MAGOX 400 TABS (<i>Use magnesium oxide (mg supplement)</i>)	NP	OTC	<i>penicillamine</i> TABS	P	
Phosphate			SYPRINE (<i>Use trientine hcl</i>)	NP	SP; PA
K-PHOS-NEUTRAL (<i>Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	NP	QL(8 EA daily)	<i>trientine hcl</i> 500 MG	P	SP
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	P	QL(8 EA daily)	<i>trientine hcl</i> 250 MG	P	SP; PA
Potassium			Enzymes		
K-TAB TBCR 20 MEQ (<i>Use potassium chloride</i>)	NF		XIAFLEX	P	SP; PA
K-TAB TBCR 10 MEQ (<i>Use potassium chloride</i>)	NP		Fecal Incontinence Bulking Agents		
<i>potassium bicarbonate TBEF</i>	P		SOLESTA	P	SP; PA
<i>potassium chloride microencapsulated crystals er</i>	P		Immunomodulators		
<i>potassium chloride CPCR 8 MEQ</i>	P	QL(1 EA daily)	<i>lenalidomide</i>	P	SP; PA
<i>potassium chloride CPCR 10 MEQ</i>	P		REVLIMID	P	SP; PA
<i>potassium chloride PACK PO 20 MEQ</i>	P		REZUROCK	P	SP; PA
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	P		THALOMID	P	SP; PA
<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	P		VYVGART	P	SP; PA
Zinc			Immunosuppressive Agents		
<i>zinc sulfate CAPS</i>	P	QL(100 EA per fill retail)	ATGAM	P	SP; PA
MISCELLANEOUS THERAPEUTIC CLASSES			<i>azathioprine</i> TABS 50 MG	P	
Allogeneic Tissue			<i>azathioprine</i> TABS 75 MG, 100 MG	P	PA
RETHYMIC	P	SP; PA	CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NP	
Chelating Agents			CELLCEPT SUSR (<i>Use mycophenolate mofetil</i>)	NP	
DEPEN TITRATABS TABS (<i>Use penicillamine</i>)	NP		CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NP	
			<i>cyclosporine</i> modified (for microemulsion) CAPS	P	
			<i>cyclosporine</i> modified (for microemulsion) SOLN	P	
			<i>cyclosporine</i> CAPS	P	
			<i>cyclosporine</i> SOLN IV 50 MG/ML	P	
			ENSPRYNG	P	SP; PA
			GAMIFANT	P	SP; PA
			IMURAN TABS (<i>Use azathioprine</i>)	NP	
			LUPKYNIS	P	SP; PA

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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<i>mycophenolate mofetil CAPS</i>	P	
<i>mycophenolate mofetil SUSR</i>	P	
<i>mycophenolate mofetil TABS</i>	P	
<i>mycophenolate sodium</i>	P	
MYFORTIC (Use <i>mycophenolate sodium</i>)	NP	
NEORAL CAPS (Use <i>cyclosporine modified (for microemulsion)</i>)	NP	
NEORAL SOLN (Use <i>cyclosporine modified (for microemulsion)</i>)	NP	
NULOJIX	P	SP; PA
PROGRAF CAPS (Use <i>tacrolimus</i>)	NP	
PROGRAF PACK	P	PA
RAPAMUNE SOLN (Use <i>sirolimus</i>)	NP	
RAPAMUNE TABS (Use <i>sirolimus</i>)	NP	
SANDIMMUNE CAPS (Use <i>cyclosporine</i>)	NP	
SANDIMMUNE SOLN IV 50 MG/ML	P	
<i>sirolimus SOLN</i>	P	
<i>sirolimus TABS</i>	P	
<i>tacrolimus CAPS</i>	P	
THYMOGLOBULIN	P	SP; PA
Lymphatic Agents		
SYLVANT	P	SP; PA
PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
VIJOICE TBPk	P	SP; PA
Potassium Removing Agents		
<i>sodium polystyrene sulfonate POWD</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	P	
Progeria Treatment Agents		
ZOKINVY	P	SP; PA
Systemic Lupus Erythematosus Agents		
BENLYSTA SOAJ	P	SP; PA
BENLYSTA SOLR	P	SP; PA
BENLYSTA SOSY	P	SP; PA
SAPHNELO	P	SP; PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	P	QL(100 ML per fill retail)
Anti-infectives - Throat		
NYSTATIN (Use <i>nystatin (mouth-throat)</i>)	NP	QL(120 ML per fill retail)
<i>nystatin (mouth-throat)</i>	P	QL(120 ML per fill retail)
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	P	
PERIDEX (Use <i>chlorhexidine gluconate (mouth-throat)</i>)	NP	
Dental Products		
PREVIDENT 5000 BOOSTER PLUS PSTE DT (Use <i>sodium fluoride (dental)</i>)	NP	
PREVIDENT 5000 DRY MOUTH GEL (Use <i>sodium fluoride (dental)</i>)	NP	
PREVIDENT 5000 KIDS PSTE DT (Use <i>sodium fluoride (dental)</i>)	NP	

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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PREVIDENT 5000 ORTHO DEFENSE PSTE DT (<i>Use sodium fluoride (dental)</i>)	NP	
PREVIDENT 5000 PLUS CREA (<i>Use sodium fluoride (dental)</i>)	NP	PA
PREVIDENT GEL (<i>Use sodium fluoride (dental)</i>)	NP	
<i>sodium fluoride (dental)</i> CREA	P	PA
<i>sodium fluoride (dental)</i> GEL	P	
<i>sodium fluoride (dental)</i> PSTE DT	P	
Periodontal Products		
ARESTIN	P	SP; PA
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	P	QL(5 GM per fill retail)
Throat Products - Misc.		
AQUORAL SOLN	P	QL(900 ML per fill retail); RX/OTC
BIOTENE DRY MOUTH MOISTURIZING SOLN	P	QL(900 ML per fill retail); RX/OTC
CAPHOSOL SOLN	P	QL(900 ML per fill retail); RX/OTC
CVS DRY MOUTH SOLN	P	QL(900 ML per fill retail); RX/OTC
EQL DRY MOUTH ORAL RINSE SOLN	P	QL(900 ML per fill retail); RX/OTC
MOI-STIR SOLN	P	QL(900 ML per fill retail); RX/OTC
MOUTH KOTE REMINT SOLN	P	QL(900 ML per fill retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MOUTH KOTE SOLN	P	QL(900 ML per fill retail); RX/OTC
NUMOISYN LIQD	P	QL(900 ML per fill retail); RX/OTC
ORAL RELIEF SPRAY SOLN	P	QL(900 ML per fill retail); RX/OTC
<i>pilocarpine hcl (oral)</i> 5 MG	P	QL(6 EA daily)
RA DRY MOUTH SOLN	P	QL(900 ML per fill retail); RX/OTC
SALAGEN 5 MG (<i>Use pilocarpine hcl (oral)</i>)	NP	QL(6 EA daily)
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	P	OTC; QL(1 EA daily)
<i>b-complex vitamins TABS</i>	P	QL(1 EA daily)
B-Complex w/ C		
<i>b complex w/ c CAPS</i>	P	OTC; QL(1 EA daily)
B-Complex w/ Folic Acid		
<i>b-complex w/ c & folic acid CAPS</i>	P	QL(1 EA daily); RX/OTC
<i>b-complex w/ c & folic acid TABS</i>	P	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Iron		
<i>multiple vitamins w/ iron TABS</i>	P	OTC; QL(1 EA daily)
TAB-A-VITE/IRON/BETA CAROTENE TABS	P	OTC; QL(1 EA daily)
Multiple Vitamins w/ Minerals		
MULTIPLE VITAMINS W/ MINERALS TABS	P	RX/OTC
MULTIPLE VITAMINS W/ MINERALS-VARIOUS	P	RX/OTC
Multivitamins		
ALTRIXA TABS	P	OTC; QL(1 EA daily); RX/OTC

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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AMLADEX TABS	P	OTC; QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	P	OTC; QL(1 EA daily); RX/OTC
ESTROFACTORS TABS	P	OTC; QL(1 EA daily); RX/OTC
FOLCYTEINE TABS	P	OTC; QL(1 EA daily); RX/OTC
GENICIN VITA-Q TABS	P	OTC; QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
MINCORA TABS	P	OTC; QL(1 EA daily); RX/OTC
MULTI VITAMIN W/D-3 TABS	P	OTC; QL(1 EA daily); RX/OTC
MULTI VITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>multiple vitamin TABS</i>	P	OTC; QL(1 EA daily); RX/OTC
MULTIVITAMIN ADULT TABS	P	OTC; QL(1 EA daily); RX/OTC
MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
NEOMULTIVITE TABS	P	OTC; QL(1 EA daily); RX/OTC
OMNICAP TABS	P	OTC; QL(1 EA daily); RX/OTC
ONE DAILY ESSENTIALS TABS	P	OTC; QL(1 EA daily); RX/OTC
ONE DAILY ESSENTIAL TABS	P	OTC; QL(1 EA daily); RX/OTC
ONE VITE DAILY MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
ONE-A-DAY ESSENTIAL TABS <i>(Use multiple vitamin)</i>	NP	OTC; QL(1 EA daily); RX/OTC
ONE-A-DAY MENS TABS <i>(Use multiple vitamin)</i>	NP	OTC; QL(1 EA daily); RX/OTC
QUINTABS TABS	P	OTC; QL(1 EA daily); RX/OTC
STRESS FORMULA/ZINC/ENERGY TABS	P	OTC; QL(1 EA daily); RX/OTC
THERA TABS	P	OTC; QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
THEREMS TABS	P	OTC; QL(1 EA daily); RX/OTC
TM-DAILY VITE TABS	P	OTC; QL(1 EA daily); RX/OTC
TRUE MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
Ped Multi Vitamins w/FI & FE		
<i>ped multivitamins w/fl & iron SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
Ped Multiple Vitamins w/ Minerals		
PEDIATRIC MULTIPLE VITAMINS W/ MINERALS-VARIOUS	P	RX/OTC
Ped MV w/ Fluoride		
FLORAFOL PEDIATRIC CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
FLORAFOL PEDIATRIC CHEW 1 MG	P	RX/OTC
FLORAFOL PEDIATRIC SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
FLORIVA PLUS SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
FLOTREX CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN + FLUORIDE CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN + FLUORIDE CHEW 0.25 MG, 1 MG	P	RX/OTC
MULTIVITAMIN/FLUORIDE CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN/FLUORIDE CHEW 0.25 MG, 1 MG	P	RX/OTC

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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MULTIVITAMIN/FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	Ped MV w/ Iron		
MULTI-VIT-FLOR CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	P	OTC; QL(60 ML per fill retail)
MULTI-VIT-FLOR CHEW 0.25 MG, 1 MG	P	RX/OTC	MULTIVITAMIN DROPS/IRON SOLN	P	OTC; QL(60 ML per fill retail)
<i>pediatric multivitamins w/fl CHEW 0.25 MG, 1 MG</i>	P	RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN	P	OTC; QL(60 ML per fill retail)
<i>pediatric multivitamins w/fl CHEW 0.5 MG</i>	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	PC PEDIATRIC POLY-VITA/FE DROP SOLN	P	OTC; QL(60 ML per fill retail)
<i>pediatric multivitamins w/fl SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VITA/IRON SOLN	P	OTC; QL(60 ML per fill retail)
<i>pediatric vitamins acid w/ fluoride SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VITE/IRON SOLN	P	OTC; QL(60 ML per fill retail)
POLY-VI-FLOR CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	Pediatric Multiple Vitamins		
POLY-VI-FLOR CHEW 0.25 MG, 1 MG	P	RX/OTC	BPROTECTED PEDIA POLY-VITE SOLN PO	P	OTC; QL(50 ML per fill retail)
QUFLORA PEDIATRIC CHEW 0.25 MG, 1 MG	P	RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN PO	P	OTC; QL(50 ML per fill retail)
QUFLORA PEDIATRIC CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	P	OTC; QL(50 ML per fill retail)
QUFLORA PEDIATRIC SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VI-SOL SOLN PO	P	OTC; QL(50 ML per fill retail)
SOLUVITA ACD WITH FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VITA SOLN PO	P	OTC; QL(50 ML per fill retail)
SOLUVITA WITH FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VITE PEDIATRIC SOLN PO	P	OTC; QL(50 ML per fill retail)
VITAMINS ACD-FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	Prenatal Vitamins		
			PRENATAL VITAMINS-MISC	P	RX/OTC
			Vitamins w/ Lipotropics		
			<i>vitamins w/ lipotropics CAPS</i>	P	OTC; QL(1 EA daily)
MUSCULOSKELETAL THERAPY AGENTS -					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Drugs to Treat Spasms			MONOVISC	P	SP; PA
Articular Cartilage Repair Therapy			ORTHOVISC	P	SP; PA
MACI	P	SP; PA	SUPARTZ FX SOSY	P	SP; PA
Central Muscle Relaxants			SYNOJOYNT SOSY	P	SP; PA
<i>baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	P	SP; PA	SYNVISC ONE SOSY	P	SP; PA
<i>baclofen TABS</i>	P		SYNVISC SOSY	P	SP; PA
<i>chlorzoxazone TABS 500 MG</i>	P		TRILURON SOSY	P	SP; PA
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 EA daily)	TRIVISC SOSY	P	SP; PA
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 EA daily)	VISCO-3 SOSY	P	SP; PA
GABLOFEN SOLN IT (Use <i>baclofen</i>)	NP	SP; PA	NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	P	SP; PA	Nasal Agents - Misc.		
LIORESAL SOLN IT	P	SP; PA	FT SALINE NASAL SPRAY SOLN	P	OTC; QL(480 ML per fill retail); AL(Up to 21 yrs old)
LIORESAL SOLN IT (Use <i>baclofen</i>)	NP	SP; PA	LITTLE REMEDIES SALINE SOLN	P	OTC; QL(480 ML per fill retail); AL(Up to 21 yrs old)
<i>methocarbamol TABS 500 MG, 750 MG</i>	P		SALINE NASAL SPRAY 0.65%	P	OTC; QL(480 ml per fill retail); AL(Up to 21 yrs old)
<i>orphenadrine citrate TB12</i>	P		Nasal Antiallergy		
<i>tizanidine hcl TABS</i>	P		<i>azelastine hcl 0.15 %, 205.5 MCG/SPRAY</i>	P	QL(30 ML per fill retail); RX/OTC
ZANAFLEX TABS 4 MG (Use <i>tizanidine hcl</i>)	NP		<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	P	
Viscosupplements			<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	P	OTC; QL(26 ML per 30 day(s) retail)
DUROLANE PRSY	P	SP; PA	NASALCROM (Use <i>cromolyn sodium (nasal)</i>)	NP	OTC; QL(26 ML per 30 day(s) retail)
EUFLEXXA SOSY	P	SP; PA	Nasal Anticholinergics		
GEL-ONE	P	SP; PA	<i>ipratropium bromide (nasal) 0.03 %</i>	P	QL(31 ML per 30 day(s) retail)
GELSYN-3 SOSY	P	SP; PA	<i>ipratropium bromide (nasal) 0.06 %</i>	P	QL(15 ML per 30 day(s) retail)
GENVISC 850 SOSY	P	SP; PA			
HYALGAN SOLN	P	SP; PA			
HYALGAN SOSY	P	SP; PA			
HYMOVIS	P	SP; PA			
HYRONAN KIT	P	SP; PA			

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Nasal Steroids			SUDAFED PE SINUS CONGESTION TABS (Use <i>phenylephrine hcl</i> (oral))	NP	OTC; QL(24 EA per fill retail)
FLONASE ALLERGY REL CHILDRENS SUSP (Use <i>fluticasone propionate</i> (nasal))	NP	QL(16 ML per fill retail); RX/OTC	SUDAFED SINUS CONGESTION TABS (Use <i>pseudoephedrine hcl</i>)	NP	OTC; AL(Up to 21 yrs old)
FLONASE ALLERGY RELIEF SUSP (Use <i>fluticasone propionate</i> (nasal))	NP	QL(16 ML per fill retail); RX/OTC	SUDAFED TABS (Use <i>pseudoephedrine hcl</i>)	NP	OTC; AL(Up to 21 yrs old)
<i>flunisolide</i> (nasal)	P	QL(25 ML per 30 day(s) retail)	NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
<i>fluticasone propionate</i> (nasal) SUSP	P	QL(16 ML per fill retail); RX/OTC	ALS Agents		
NASACORT ALLERGY 24HR AERO (Use <i>triamcinolone acetonide</i> (nasal))	NP	AL(At least 2 yrs old)	<i>edaravone</i> SOLN	P	SP; PA
<i>triamcinolone acetonide</i> (nasal) AERO	P	AL(At least 2 yrs old)	EXSERVAN FILM	P	SP; PA
Sympathomimetic Decongestants			RADICAVA ORS STARTER KIT SUSP	P	SP; PA
ADRENALIN 0.1 % (Use <i>epinephrine hcl</i> (nasal))	NP	QL(120 ML per fill retail); AL(Up to 21 yrs old)	RADICAVA ORS SUSP	P	SP; PA
<i>epinephrine hcl</i> (nasal)	P	QL(120 ML per fill retail); AL(Up to 21 yrs old)	RADICAVA SOLN (Use <i>edaravone</i>)	NP	SP; PA
<i>phenylephrine hcl</i> (oral) TABS	P	OTC; QL(24 EA per fill retail)	RILUTEK TABS (Use <i>riluzole</i>)	NP	PA
<i>pseudoephedrine hcl</i> TABS	P	OTC; AL(Up to 21 yrs old)	<i>riluzole</i> TABS	P	PA
<i>pseudoephedrine hcl</i> TB12	P	OTC; QL(62 EA per 30 day(s) retail); AL(Up to 21 yrs old)	TEGLUTIK SUSP	P	SP; PA
SUDAFED CHILDRENS LIQD	P	OTC; AL(Up to 21 yrs old)	TIGLUTIK SUSP	P	SP; PA
SUDAFED PE CHILDRENS SOLN	P	OTC; QL(120 ML per fill retail)	Muscular Dystrophy Agents		
			AMONDYS 45	P	SP; PA
			EXONDYS 51	P	SP; PA
			VILTEPSO	P	SP; PA
			VYONDYS 53	P	SP; PA
			Spinal Muscular Atrophy Agents (SMA)		
			EVRYSDI	P	SP; PA
			SPINRAZA	P	SP; PA
			ZOLGENSMA 20.6-21.0 KG	P	SP; PA
			ZOLGENSMA 10.1-10.5 KG	P	SP; PA
			ZOLGENSMA 10.6-11.0 KG	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 11.1-11.5 KG	P	SP; PA
ZOLGENSMA 11.6-12.0 KG	P	SP; PA
ZOLGENSMA 12.1-12.5 KG	P	SP; PA
ZOLGENSMA 12.6-13.0 KG	P	SP; PA
ZOLGENSMA 13.1-13.5 KG	P	SP; PA
ZOLGENSMA 13.6-14.0 KG	P	SP; PA
ZOLGENSMA 14.1-14.5 KG	P	SP; PA
ZOLGENSMA 14.6-15.0 KG	P	SP; PA
ZOLGENSMA 15.1-15.5 KG	P	SP; PA
ZOLGENSMA 15.6-16.0 KG	P	SP; PA
ZOLGENSMA 16.1-16.5 KG	P	SP; PA
ZOLGENSMA 16.6-17.0 KG	P	SP; PA
ZOLGENSMA 17.1-17.5 KG	P	SP; PA
ZOLGENSMA 17.6-18.0 KG	P	SP; PA
ZOLGENSMA 18.1-18.5 KG	P	SP; PA
ZOLGENSMA 18.6-19.0 KG	P	SP; PA
ZOLGENSMA 19.1-19.5 KG	P	SP; PA
ZOLGENSMA 19.6-20.0 KG	P	SP; PA
ZOLGENSMA 2.6-3.0 KG	P	SP; PA
ZOLGENSMA 20.1-20.5 KG	P	SP; PA
ZOLGENSMA 3.1-3.5 KG	P	SP; PA
ZOLGENSMA 3.6-4.0 KG	P	SP; PA
ZOLGENSMA 4.1-4.5 KG	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 4.6-5.0 KG	P	SP; PA
ZOLGENSMA 5.1-5.5 KG	P	SP; PA
ZOLGENSMA 5.6-6.0 KG	P	SP; PA
ZOLGENSMA 6.1-6.5 KG	P	SP; PA
ZOLGENSMA 6.6-7.0 KG	P	SP; PA
ZOLGENSMA 7.1-7.5 KG	P	SP; PA
ZOLGENSMA 7.6-8.0 KG	P	SP; PA
ZOLGENSMA 8.1-8.5 KG	P	SP; PA
ZOLGENSMA 8.6-9.0 KG	P	SP; PA
ZOLGENSMA 9.1-9.5 KG	P	SP; PA
ZOLGENSMA 9.6-10.0 KG	P	SP; PA
NUTRIENTS		
Carbohydrates		
POLYCOSE LIQD	P	OTC; QL(124 ML per fill retail)
POLYCOSE POWD	P	OTC; QL(350 GM per fill retail)
Lipids		
DOJOLVI	P	SP; PA
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS 1000 MG, 1200 MG</i>	P	OTC; QL(6 EA daily)
<i>omega-3 fatty acids CPDR 1200 MG</i>	P	QL(6 EA daily)
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
<i>polyvinyl alcohol 1.4 %</i>	P	OTC; QL(31 ML per 30 day(s) retail)
<i>white petrolatum-mineral oil</i>	P	OTC; QL(30 GM per fill retail)
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	P	
<i>carteolol hcl (ophth)</i>	P	

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COSOPT (<i>Use dorzolamide hcl-timolol maleate</i>)	NP	QL(10 ML per 30 day(s) retail)	PHENYLEPHRINE HCL SOLN (<i>Use phenylephrine hcl (mydriatic)</i>)	NP	QL(5 ML per 30 day(s) retail)
DORZOLAMIDE HCL-TIMOLOL MAL	P	QL(10 ML per 30 day(s) retail)	<i>tropicamide SOLN</i>	P	
<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ML per 30 day(s) retail)	Miotics		
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 30 day(s) retail)	<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 30 day(s) retail)	Ophthalmic - Angiogenesis Inhibitors		
TIMOPTIC OCUDOSE SOLN (<i>Use timolol maleate (ophth)</i>)	NP	QL(15 EA per 30 day(s) retail)	BEVACIZUMAB IZ 2.75 MG/0.11ML	P	PA
TIMOPTIC SOLN (<i>Use timolol maleate (ophth)</i>)	NP	QL(15 ML per 30 day(s) retail)	BEVACIZUMAB IZ 1.25 MG/0.05ML, 2 MG/0.08ML, 2.5 MG/0.1ML, 3.25 MG/0.13ML, 3.75 MG/0.15ML	P	SP; PA
Cycloplegic Mydriatics			EYLEA HD SOLN	P	SP; PA
<i>atropine sulfate (ophthalmic) OINT</i>	P		EYLEA SOLN	P	SP; PA
<i>atropine sulfate (ophthalmic) SOLN</i>	P		EYLEA SOSY	P	SP; PA
ATROPINE SULFATE SOLN 1 % (<i>Use atropine sulfate (ophthalmic)</i>)	NP		LUCENTIS SOSY	P	SP; PA
ATROPINE SULFATE SOLN 1 %	P		SUSVIMO (IMPLANT 1ST FILL) SOLN	P	SP; PA
CYCLOGYL 0.5 %	P	QL(15 ML per 30 day(s) retail)	SUSVIMO (IMPLANT REFILL) SOLN	P	SP; PA
CYCLOGYL (<i>Use cyclopentolate hcl</i>)	NP		VABYSMO SOLN	P	SP; PA
CYCLOGYL 2 %	P		Ophthalmic Adrenergic Agents		
<i>cyclopentolate hcl 0.5 %</i>	P	QL(15 ML per 30 day(s) retail)	<i>apraclonidine hcl</i>	P	
<i>cyclopentolate hcl 1 %, 2 %</i>	P		<i>brimonidine tartrate 0.2 %</i>	P	
<i>homatropine hbr</i>	P	QL(15 ML per fill retail)	IOPIDINE	P	
ISOPTO ATROPINE SOLN	P		Ophthalmic Anti-infectives		
MYDRIACYL SOLN (<i>Use tropicamide</i>)	NP		<i>bacitracin (ophthalmic)</i>	P	QL(4 GM per 30 day(s) retail)
<i>phenylephrine hcl (mydriatic) SOLN 2.5 %</i>	P	QL(5 ML per 30 day(s) retail)	<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 GM per 30 day(s) retail)
			CILOXAN OINT	P	
			CILOXAN SOLN (<i>Use ciprofloxacin hcl (ophth)</i>)	NP	
			<i>ciprofloxacin hcl (ophth) SOLN</i>	P	

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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ERYTHROMYCIN	P		VISINE RED EYE COMFORT (Use tetrahydrozoline hcl (ophth))	NP	OTC
erythromycin (ophth)	P		Ophthalmic Gene Therapy		
gentamicin sulfate (ophth) OINT	P	QL(4 GM per 30 day(s) retail)	LUXTURN A	P	SP; PA
gentamicin sulfate (ophth) SOLN	P		Ophthalmic Local Anesthetics		
moxifloxacin hcl (ophth) SOLN OP	P	QL(3 ML per fill retail)	tetracaine hcl (ophth)	P	
neomycin-bacitracin zn-polymyxin	P	QL(4 GM per 30 day(s) retail)	Ophthalmic Photodynamic Therapy Agents		
neomycin-polymyxin-gramicidin	P	QL(10 ML per 30 day(s) retail)	VISUDYNE	P	SP; PA
OCUFLOX (Use ofloxacin (ophth))	NP	QL(10 ML per 30 day(s) retail)	Ophthalmic Photoenhancers		
ofloxacin (ophth)	P	QL(10 ML per 30 day(s) retail)	PHOTREXA-PHOTREXA VISCOUS KIT	P	SP; PA
polymyxin b-trimethoprim	P	QL(10 ML per fill retail)	Ophthalmic Steroids		
POLYTRIM (Use polymyxin b-trimethoprim)	NP	QL(10 ML per fill retail)	dexamethasone sodium phosphate (ophth)	P	
sulfacetamide sodium (ophth) OINT	P	QL(4 GM per 30 day(s) retail)	DEXTENZA INST	P	SP; PA
sulfacetamide sodium (ophth) SOLN	P	QL(15 ML per 30 day(s) retail)	DEXYCU SUSP IO	P	SP; PA
tobramycin (ophth) SOLN	P	QL(5 ML per 30 day(s) retail)	fluorometholone (ophth) SUSP	P	
TOBREX OINT	P		FML LIQUIFILM SUSP (Use fluorometholone (ophth))	NP	
trifluridine	P	QL(8 ML per 30 day(s) retail)	ILUVIEN	P	SP; PA
VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	NP	QL(3 ML per fill retail)	MAXITROL OINT (Use neomycin-polymy-dexameth)	NP	QL(4 GM per 30 day(s) retail)
Ophthalmic Decongestants			MAXITROL SUSP (Use neomycin-polymy-dexameth)	NP	QL(10 ML per 30 day(s) retail)
naphazoline w/ pheniramine 0.315 %-0.027 %	P	OTC; QL(15 ML per 30 day(s) retail)	neomycin-polymy-dexameth OINT	P	QL(4 GM per 30 day(s) retail)
OPCON-A (Use naphazoline w/ pheniramine)	NP	OTC; QL(15 ML per 30 day(s) retail)	neomycin-polymy-dexameth SUSP	P	QL(10 ML per 30 day(s) retail)
tetrahydrozoline hcl (ophth) 0.05 %	P	OTC	neomycin-polymyxin-hc (ophth)	P	QL(15 ML per 30 day(s) retail)
			OZURDEX IMPL	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRED FORTE (Use prednisolone acetate (ophth))	NP		cromolyn sodium (ophth)	P	QL(10 ML per fill retail)
PRED MILD	P	QL(10 ML per 30 day(s) retail)	CYSTADROPS	P	SP; PA
prednisolone acetate (ophth)	P		CYSTARAN	P	SP; PA
prednisolone acetate (ophth)	NP		diclofenac sodium (ophth)	P	QL(3 ML per 30 day(s) retail)
PREDNISOLONE ACETATE P-F	P		dorzolamide hcl	P	QL(10 ML per 30 day(s) retail)
PREDNISOLONE SODIUM PHOSPHATE	P	QL(15 ML per 30 day(s) retail)	DORZOLAMIDE HCL	P	QL(10 ML per 30 day(s) retail)
RETISERT	P	SP; PA	flurbiprofen sodium	P	QL(5 ML per 30 day(s) retail)
sulfacetamide sod-prednisolone SOLN	P	QL(10 ML per 30 day(s) retail)	ketorolac tromethamine (ophth) 0.4 %	P	QL(5 ML per 30 day(s) retail)
TOBRADEX OINT	P	QL(4 GM per 30 day(s) retail)	ketorolac tromethamine (ophth) 0.5 %	P	QL(10 ML per fill retail)
TOBRADEX SUSP (Use tobramycin-dexamethasone)	NP	QL(10 ML per fill retail)	ketotifen fumarate (ophth) 0.035 %	P	
tobramycin-dexamethasone SUSP	P	QL(10 ML per fill retail)	ZADITOR 0.035 % (Use ketotifen fumarate (ophth))	NP	
TRIESENCE	P	SP; PA	Prostaglandins - Ophthalmic		
XIPERE	P	SP; PA	latanoprost SOLN	P	QL(5 ML per 30 day(s) retail)
YUTIQ	P	SP; PA	LATANOPROST SOLN	P	QL(5 ML per 30 day(s) retail)
Ophthalmics - Misc.			XALATAN SOLN (Use latanoprost)	NP	QL(5 ML per 30 day(s) retail)
ACULAR (Use ketorolac tromethamine (ophth))	NP	QL(10 ML per fill retail)	OTIC AGENTS - Drugs to Treat the Ear		
ACULAR LS (Use ketorolac tromethamine (ophth))	NP	QL(5 ML per 30 day(s) retail)	Otic Agents - Miscellaneous		
ALOCRIAL	P	QL(5 ML per 30 day(s) retail); PA	acetic acid (otic)	P	QL(15 ML per 30 day(s) retail)
ALOMIDE	P	QL(10 ML per 30 day(s) retail); PA	carbamide peroxide (otic) 6.5 %	P	OTC; QL(15 ML per 30 day(s) retail)
azelastine hcl (ophth)	P	QL(6 ML per 30 day(s) retail)	DEBROX 6.5 % (Use carbamide peroxide (otic))	NP	OTC; QL(15 ML per 30 day(s) retail)
AZOPT (Use brinzolamide)	NP		Otic Anti-infectives		
brinzolamide	P		ofloxacin (otic)	P	QL(10 ML per fill retail)
			Otic Combinations		

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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CIPRODEX (Use ciprofloxacin-dexamethasone)	NP	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail	FLEBOGAMMA DIF SOLN 5 GM/50ML	P	PA
ciprofloxacin-dexamethasone	P	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail	GAMASTAN	P	SP; PA
neomycin-polymyxin-hc (otic) SOLN	P	QL(10 ML per fill retail)	GAMMAGARD	P	SP; PA
neomycin-polymyxin-hc (otic) SUSP	P	QL(20 ML per 30 day(s) retail)	GAMMAGARD S/D LESS IGA SOLR	P	SP; PA
pramoxine-hc-chloroxylonol	P	QL(15 ML per fill retail)	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	P	SP; PA
Otic Steroids			GAMMAPLEX SOLN	P	SP; PA
DERMOTIC (Use fluocinolone acetonide (otic))	NP	QL(20 ML per fill retail); AL(At least 5 yrs old)	GAMMAPLEX SOLN 5 GM/50ML	P	PA
fluocinolone acetonide (otic)	P	QL(20 ML per fill retail); AL(At least 5 yrs old)	GAMUNEX-C	P	SP; PA
hydrocortisone w/acetic acid	P	QL(20 ML per 30 day(s) retail)	HEPAGAM B SOLN IJ	P	SP; PA
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding			HIZENTRA SOLN	P	SP; PA
Oxytocics			HIZENTRA SOSY	P	SP; PA
methylergonovine maleate TABS	P		HYPERHEP B SOLN IM	P	SP; PA
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System			HYPERRHO S/D SOSY IM 1500 UNIT	P	SP
Immune Serums			HYPERRHO S/D SOSY IM 250 UNIT	P	SP; PA
BIVIGAM SOLN 10 GM/100ML	P	SP; PA	MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	P	SP; PA
BIVIGAM SOLN 5 GM/50ML	P	PA	NABI-HB SOLN IM	P	SP; PA
CUTAQUIG	P	SP; PA	OCTAGAM SOLN 5 GM/50ML	P	PA
CUVITRU SOLN	P	SP; PA	OCTAGAM SOLN	P	SP; PA
CYTOGAM SOLN	P	SP; PA	PANZYGA	P	SP; PA
FLEBOGAMMA DIF SOLN	P	SP; PA	PRIVIGEN SOLN 5 GM/50ML	P	PA
			PRIVIGEN SOLN 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	P	SP; PA
			RHOGAM ULTRA-FILTERED PLUS SOSY IM	P	SP
			RHOPHYLAC SOSY IJ	P	SP; PA

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	P	SP; PA	<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML</i>	P	QL(100 ML per fill retail)
XEMBIFY	P	SP; PA	<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	P	QL(20 EA per fill retail)
Monoclonal Antibodies			<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	P	QL(30 EA per fill retail)
BEYFORTUS	P	SP; PA	<i>amoxicillin & pot clavulanate TB12</i>	P	QL(40 EA per 30 day(s) retail)
SYNAGIS SOLN	P	SP; PA	AUGMENTIN ES-600 SUSR (<i>Use amoxicillin & pot clavulanate</i>)	NP	QL(200 ML per fill retail)
ZINPLAVA	P	SP; PA	AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	P	QL(150 ML per fill retail)
Passive Immunizing Agents - Combinations			AUGMENTIN TABS 125 MG-500 MG (<i>Use amoxicillin & pot clavulanate</i>)	NP	QL(30 EA per fill retail)
HYQVIA	P	SP; PA	Penicillinase-Resistant Penicillins		
PENICILLINS - Drugs to Treat Bacterial Infections			<i>dicloxacillin sodium</i>	P	
Aminopenicillins			PHARMACEUTICAL ADJUVANTS		
<i>amoxicillin CAPS</i>	P		Internal Vehicle Ingredients/Agents		
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P		SIMPLYTHICK	P	OTC; QL(1816 GM per fill retail); AL(At least 1 yrs old); PA
<i>amoxicillin SUSR</i>	P		SIMPLYTHICK EASY MIX	P	OTC; QL(1816 GM per fill retail); AL(At least 1 yrs old); PA
AMOXICILLIN SUSR (<i>Use amoxicillin</i>)	NP		Liquid Vehicles		
<i>amoxicillin TABS 875 MG</i>	P		FLAVOR BLEND SUSP	P	RX/OTC
<i>ampicillin CAPS 500 MG</i>	P		FLAVOR PLUS LIQD	P	RX/OTC
Natural Penicillins			FLAVOR SWEET-SF SYRP	P	RX/OTC
<i>penicillin v potassium SOLR</i>	P		FLAVOR SWEET SYRP	P	RX/OTC
<i>penicillin v potassium TABS</i>	P		<i>glycine diluent</i>	P	SP; PA
Penicillin Combinations					
<i>amoxicillin & pot clavulanate CHEW</i>	P	QL(20 EA per fill retail)			
<i>amoxicillin & pot clavulanate SUSR 62.5 MG/5ML-250 MG/5ML</i>	P	QL(150 ML per fill retail)			
<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	QL(200 ML per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits
GRAPE SYRUP SYRP	P	RX/OTC
MX-SOL BLEND SF SUSP	P	RX/OTC
MX-SOL BLEND SUSP	P	RX/OTC
MX-SOL SF SYRP	P	RX/OTC
MX-SOL SUSPEND SUSP	P	RX/OTC
MX-SOL SYRP	P	RX/OTC
ORA-BLEND SF SUSP	P	RX/OTC
ORA-BLEND SUSP	P	RX/OTC
ORAL MIX SF SUSP	P	RX/OTC
ORAL MIX SUSP	P	RX/OTC
ORAL SUSPEND LIQD	P	RX/OTC
ORAL SYRUP SF SYRP	P	RX/OTC
ORAL SYRUP SYRP	P	RX/OTC
ORAPENN SD ANHYD SWEETENED LIQD	P	RX/OTC
ORAPENN SD ANHYD UNSWEETEN LIQD	P	RX/OTC
ORA-PLUS LIQD	P	RX/OTC
ORA-SWEET SF SYRP 10 %-9 %	P	RX/OTC
ORA-SWEET SYRP 4 %-5 %-54 %	P	RX/OTC
PCCA SWEET-SF SYRP	P	RX/OTC
PCCA SYRUP VEHICLE SYRP	P	RX/OTC
PCCA-PLUS SUSP	P	RX/OTC
SOSWEET SYRP	P	RX/OTC
STERILE DILUENT FLOLAN PH 12	P	SP; PA
STERILE DILUENT FOR REMODULIN (Use glycine diluent)	NP	SP; PA
SUSPENDIT ANHYDROUS SUSP	P	RX/OTC
SUSPENDRX W/BITTERBLOC SWEET SUSP	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SUSPENDRX W/BITTERBLOC UNSWEET SUSP	P	RX/OTC
SUSPENSION VEHICLE SUSP	P	RX/OTC
SYRPALTA (RED) SYRP	P	RX/OTC
SYRPALTA SYRP	P	RX/OTC
SYRSPEND SF LIQD	P	RX/OTC
SYRUP VEHICLE SF SYRP	P	RX/OTC
SYRUP VEHICLE SYRP	P	RX/OTC
UNISPEND ANHYDROUS SWEETENED SUSP	P	RX/OTC
UNISPEND ANHYDROUS UNSWEETENED SUSP	P	RX/OTC
VERSAFREE SYRP	P	RX/OTC
VERSAPLUS SYRP	P	RX/OTC
Semi Solid Vehicles		
lanolin XX	P	
LANOLIN XX	P	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
AYGESTIN TABS (Use norethindrone acetate)	NP	
hydroxyprogesterone caproate OIL	P	QL(2 ML per fill retail; 2 ML per 11 day(s) retail); SP; PA
MAKENA OIL (Use hydroxyprogesterone caproate)	NP	QL(2 ML per fill retail; 2 ML per 11 day(s) retail); SP; PA
MAKENA SOAJ	P	SP; PA
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	P	
norethindrone acetate TABS	P	
progesterone CAPS 200 MG	P	QL(20 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>progesterone CAPS 100 MG</i>	P	QL(30 EA per 30 day(s) retail)	RAZADYNE ER CP24 (Use <i>galantamine hydrobromide</i>)	NP	QL(1 EA daily)
PROMETRIUM CAPS 200 MG (Use <i>progesterone</i>)	NP	QL(20 EA per 30 day(s) retail)	<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	P	QL(1 EA daily); PA
PROMETRIUM CAPS 100 MG (Use <i>progesterone</i>)	NP	QL(30 EA per 30 day(s) retail)	<i>rivastigmine tartrate CAPS</i>	P	QL(2 EA daily); PA
PROVERA 5 MG, 10 MG (Use <i>medroxyprogesterone acetate</i>)	NP		Combination Psychotherapeutics		
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>perphenazine-amitriptyline</i>	P	QL(4 EA daily)
			Fibromyalgia Agents		
			SAVELLA TITRATION PACK MISC	P	QL(55 EA per 365 day(s) retail); PA
			SAVELLA TABS	P	QL(2 EA daily); PA
			Movement Disorder Drug Therapy		
			<i>tetrabenazine</i>	P	SP; PA
			XENAZINE (Use <i>tetrabenazine</i>)	NP	SP; PA
			Multiple Sclerosis Agents		
			AMPYRA (Use <i>dalfampridine</i>)	NP	SP; PA
			AUBAGIO (Use <i>teriflunomide</i>)	NP	QL(1 EA daily); SP
Agents for Chemical Dependency			AVONEX PEN AJKT	P	SP; PA
<i>disulfiram 250 MG</i>	P		AVONEX PREFILLED PSKT	P	SP; PA
Antidementia Agents			BAFIERTAM	P	SP; PA
ARICEPT TABS 5 MG, 10 MG (Use <i>donepezil hydrochloride</i>)	NP	QL(1 EA daily)	COPAXONE SOSY (Use <i>glatiramer acetate</i>)	NP	SP
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)	<i>dalfampridine</i>	P	SP; PA
EXELON 4.6 MG/24HR, 9.5 MG/24HR (Use <i>rivastigmine</i>)	NP	QL(1 EA daily); PA	<i>dimethyl fumarate CDPK</i>	P	SP
<i>galantamine hydrobromide CP24</i>	P	QL(1 EA daily)	<i>dimethyl fumarate CPDR</i>	P	SP
<i>galantamine hydrobromide SOLN</i>	P	QL(6 ML daily)	EXTAVIA KIT	P	SP; PA
<i>galantamine hydrobromide TABS</i>	P	QL(2 EA daily)	<i> fingolimod hcl</i>	P	QL(1 EA daily); SP
<i>memantine hcl SOLN 2 MG/ML</i>	P	QL(2 ML daily); PA	GILENYA (Use <i> fingolimod hcl</i>)	NP	QL(1 EA daily); SP
<i>memantine hcl TABS</i>	P	1 package(s) per 28 day(s) retail; PA	<i>glatiramer acetate SOSY</i>	P	SP
<i>memantine hcl TABS</i>	P	QL(2 EA daily); PA	KESIMPTA	P	SP; PA
NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i>)	NP	1 package(s) per 28 day(s) retail; PA			
NAMENDA TABS (Use <i>memantine hcl</i>)	NP	QL(2 EA daily); PA			

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

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PLEGRIDY STARTER PACK SOAJ	P	SP; PA	NICOTINE KIT	P	
PLEGRIDY STARTER PACK SOSY SC	P	SP; PA	<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	QL(1 EA daily)
PLEGRIDY SOAJ	P	SP; PA	NICOTROL NS SOLN	P	QL(4 ML daily)
PLEGRIDY SOSY IM	P	SP; PA	NICOTROL INHA	P	QL(16.8 EA daily)
REBIF REBIDOSE TITRATION PACK SOAJ	P	SP; PA	<i>varenicline tartrate TABS</i>	P	QL(2 EA daily); AL(At least 18 yrs old)
REBIF REBIDOSE SOAJ	P	SP; PA	<i>varenicline tartrate TBPK</i>	P	QL(53 EA per fill retail); AL(At least 18 yrs old)
REBIF TITRATION PACK SOSY	P	SP; PA			
REBIF SOSY	P	SP; PA			
TECFIDERA CDPK (<i>Use dimethyl fumarate</i>)	NP	SP	Transthyretin Amyloidosis Agents		
TECFIDERA CPDR (<i>Use dimethyl fumarate</i>)	NP	SP	ONPATTRO	P	SP; PA
<i>teriflunomide</i>	P	QL(1 EA daily); SP	TEGSEDI	P	SP; PA
Smoking Deterrents			RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
APO-VARENICLINE TABS	P	QL(2 EA daily); AL(At least 18 yrs old)	Alpha-Proteinase Inhibitor (Human)		
<i>bupropion hcl (smoking deterrent)</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	ARALAST NP SOLR 500 MG, 1000 MG	P	SP; PA
CHANTIX STARTING MONTH PAK TBPK (<i>Use varenicline tartrate</i>)	NP	QL(53 EA per fill retail); AL(At least 18 yrs old)	GLASSIA SOLN	P	SP; PA
NICODERM CQ PT24 TD (<i>Use nicotine</i>)	NP	QL(1 EA daily)	PROLASTIN-C SOLN	P	SP; PA
NICORETTE MINI LOZG (<i>Use nicotine polacrilex</i>)	NP	QL(20 EA daily)	PROLASTIN-C SOLR	P	SP; PA
NICORETTE STARTER KIT GUM (<i>Use nicotine polacrilex</i>)	NP	QL(24 EA daily)	ZEMAIRA SOLR 4000 MG	P	PA
NICORETTE GUM (<i>Use nicotine polacrilex</i>)	NP	QL(24 EA daily)	ZEMAIRA SOLR 1000 MG	P	SP; PA
NICORETTE LOZG (<i>Use nicotine polacrilex</i>)	NP	QL(20 EA daily)	Cystic Fibrosis Agents		
<i>nicotine polacrilex GUM</i>	P	QL(24 EA daily)	BRONCHITOL	P	SP; PA
<i>nicotine polacrilex LOZG</i>	P	QL(20 EA daily)	BRONCHITOL TOLERANCE TEST	P	SP; PA
			KALYDECO PACK 13.4 MG, 25 MG, 50 MG, 75 MG	P	SP; PA
			KALYDECO PACK 5.8 MG	P	SP
			KALYDECO TABS	P	SP; PA
			ORKAMBI PACK	P	SP; PA
			ORKAMBI TABS	P	SP; PA
			PULMOZYME	P	SP; PA

Georgia Medicaid

Updated April 1, 2025

P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYMDEKO	P	SP; PA	CYTOMEL TABS (<i>Use liothyronine sodium</i>)	NP	
TRIKAFTA TBPk	P	QL(3 EA daily); SP; PA	levothyroxine sodium TABS	P	
Pulmonary Fibrosis Agents			liothyronine sodium TABS	P	
ESBRIET CAPS (<i>Use pirfenidone</i>)	NP	SP; PA	NIVA THYROID TABS	P	
ESBRIET TABS (<i>Use pirfenidone</i>)	NP	SP; PA	NP THYROID TABS	P	
pirfenidone CAPS	P	SP; PA	SYNTHROID TABS (<i>Use levothyroxine sodium</i>)	P	
pirfenidone TABS	P	SP; PA	THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
TETRACYCLINES - Drugs to Treat Bacterial Infections			TOXOIDS		
Tetracyclines			Toxoid Combinations		
doxycycline (monohydrate) CAPS 50 MG, 100 MG	P		ADACEL SUSP	P	
doxycycline (monohydrate) TABS 50 MG, 100 MG	P		BOOSTRIX SUSP	P	
doxycycline hyclate CAPS	P		BOOSTRIX SUSY	P	
doxycycline hyclate TABS 100 MG	P		DAPTACEL	P	
minocycline hcl CAPS	P		DIPHTHERIA-TETANUS TOXOIDS DT SUSP	P	
tetracycline hcl CAPS 500 MG	P		INFANRIX	P	
VIBRAMYCIN CAPS (<i>Use doxycycline hyclate</i>)	NP		KINRIX SUSY	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			PEDIARIX SUSY	P	
Antithyroid Agents			PENTACEL	P	
methimazole TABS	P		QUADRACEL SUSP	P	
propylthiouracil	P		QUADRACEL SUSY	P	
Thyroid Hormones			TDVAX SUSP	P	
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P		TENIVAC INJ	P	
ARMOUR THYROID TABS	P		TETANUS-DIPHTHERIA TOXOIDS TD SUSP	P	
			VAXELIS SUSP	P	
			VAXELIS SUSY	P	
			ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
			Antispasmodics		
			dicyclomine hcl CAPS	P	
			dicyclomine hcl SOLN PO	P	QL(496 ML per 30 day(s) retail)

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits
<i>dicyclomine hcl TABS</i>	P	
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	P	QL(4 EA daily)
<i>hyoscyamine sulfate ELIX</i>	NP	
<i>hyoscyamine sulfate ELIX</i>	P	
HYOSCYAMINE SULFATE POWD	P	
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	NP	
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	P	
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	P	
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	NP	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	NP	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	P	
<i>hyoscyamine sulfate TB12 0.375 MG</i>	P	QL(4 EA daily)
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	NP	
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	P	
LEVBID TB12 (Use <i>hyoscyamine sulfate</i>)	NP	QL(4 EA daily)
ROBINUL-FORTE TABS (Use <i>glycopyrrolate</i>)	NP	QL(4 EA daily)
ROBINUL TABS (Use <i>glycopyrrolate</i>)	NP	QL(4 EA daily)
H-2 Antagonists		
<i>cimetidine hcl PO 300 MG/5ML</i>	P	
<i>cimetidine TABS</i>	P	RX/OTC
<i>famotidine SUSR</i>	P	
<i>famotidine TABS 10 MG</i>	P	OTC
<i>famotidine TABS 20 MG, 40 MG</i>	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PEPCID AC MAXIMUM STRENGTH TABS (Use <i>famotidine</i>)	NP	RX/OTC
PEPCID AC TABS (Use <i>famotidine</i>)	NP	OTC
PEPCID TABS (Use <i>famotidine</i>)	NP	RX/OTC
TAGAMET HB 200 TABS (Use <i>cimetidine</i>)	NP	RX/OTC
TAGAMET HB TABS (Use <i>cimetidine</i>)	NP	RX/OTC
Misc. Anti-Ulcer		
CARAFATE SUSP (Use <i>sucralfate</i>)	NP	QL(420 ML per fill retail)
CARAFATE TABS (Use <i>sucralfate</i>)	NP	
<i>sucralfate SUSP</i>	P	QL(420 ML per fill retail)
<i>sucralfate TABS</i>	P	
Proton Pump Inhibitors		
DEXILANT (Use <i>dexlansoprazole</i>)	NP	ST
<i>dexlansoprazole</i>	P	ST
<i>esomeprazole magnesium CPDR 20 MG</i>	P	QL(2 EA daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	P	
<i>lansoprazole CPDR 15 MG</i>	P	QL(4 EA daily); RX/OTC
NEXIUM 24HR CLEAR MINIS CPDR (Use <i>esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
NEXIUM 24HR CPDR (Use <i>esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
NEXIUM CPDR 20 MG (Use <i>esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
OMEPRAZOLE 20MG TABLET	P	QL (1 ea daily); OTC

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

Drug Name	Drug Tier	Requirements/ Limits
<i>omeprazole magnesium TBEC</i>	P	OTC; QL(1 EA daily)
<i>omeprazole CPDR</i>	P	QL(2 EA daily)
<i>pantoprazole sodium TBEC 40 MG</i>	P	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	P	QL(1 EA daily)
PREVACID 24HR CPDR (Use <i>lansoprazole</i>)	NP	QL(4 EA daily); RX/OTC
PREVACID CPDR 30 MG (Use <i>lansoprazole</i>)	NP	
PRILOSEC OTC TBEC (Use <i>omeprazole magnesium</i>)	NP	OTC; QL(1 EA daily)
PROTONIX TBEC 20 MG (Use <i>pantoprazole sodium</i>)	NP	QL(1 EA daily)
PROTONIX TBEC 40 MG (Use <i>pantoprazole sodium</i>)	NP	QL(2 EA daily)
VOQUEZNA	NP	
Ulcer Drugs - Prostaglandins		
CYTOTEC (Use <i>misoprostol</i>)	NP	
<i>misoprostol</i>	P	
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	P	14 day(s) max supply per 365 day(s) retail
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
DETROL LA CP24 (Use <i>tolterodine tartrate</i>)	NP	QL(1 EA daily)
DETROL TABS (Use <i>tolterodine tartrate</i>)	NP	QL(2 EA daily)
DITROPAN XL TB24 5 MG, 10 MG (Use <i>oxybutynin chloride</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride TABS</i>	P	QL(3 EA daily)
<i>oxybutynin chloride TB24</i>	P	QL(2 EA daily)
<i>tolterodine tartrate CP24</i>	P	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	P	QL(2 EA daily)
<i>trospium chloride TABS</i>	P	QL(2 EA daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	P	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	P	
BCG VACCINE	P	
BEXSERO	P	
BIOTHRAX	P	
HIBERIX SOLR IJ	P	
MENACTRA	P	
MENQUADFI	P	
MENVEO SOLN	P	
MENVEO SOLR	P	
PEDVAX HIB SUSP	P	
PENBRAYA	P	
PNEUMOVAX 23 SOLN	P	
PNEUMOVAX 23 SOSY	P	
PREVNAR 13	P	
PREVNAR 20	P	
TRUMENBA	P	
TYPHIM VI SOLN	P	
TYPHIM VI SOSY	P	
VAXCHORA	P	
VAXNEUVANCE	P	
VIVOTIF	P	
Viral Vaccines		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABRYSVO	P	1 max fill(s) per 999 day(s) retail; AL(At least 60 yrs old)	FLULAVAL QUADRIVALENT SUSY	P	
ACAM2000	P		FLULAVAL SUSY	P	
AFLURIA PRESERVATIVE FREE SUSY	P		FLUMIST	P	
AFLURIA QUADRIVALENT SUSP	P		FLUMIST QUADRIVALENT	P	
AFLURIA QUADRIVALENT SUSY 0.5 ML	P		FLUZONE HIGH-DOSE QUADRIVALENT	P	
AFLURIA SUSP	P		FLUZONE HIGH-DOSE SUSY	P	
AREXVY	P	1 max fill(s) per 999 day(s) retail; AL(At least 60 yrs old)	FLUZONE QUADRIVALENT SUSP	P	
COMIRNATY SUSP	P		FLUZONE QUADRIVALENT SUSY	P	
COMIRNATY SUSY	P		FLUZONE SUSP	P	
DENG VAXIA	P		FLUZONE SUSY	P	
ENGRIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail	GARDASIL 9 SUSP	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
ENGRIX-B SUSY	P	3 max fill(s) per 999 day(s) retail	GARDASIL 9 SUSY	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUAD	P		HAVRIX	P	
FLUAD QUADRIVALENT	P		HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail
FLUARIX QUADRIVALENT SUSY	P		IMOVAX RABIES SUSR	P	
FLUARIX SUSY	P		I POL	P	
FLUBLOK QUADRIVALENT	P		IXIARO	P	
FLUBLOK SOSY	P		JANSSEN COVID-19 VACCINE	P	
FLUCELVAX QUADRIVALENT SUSP	P		JYNNEOS	P	
FLUCELVAX QUADRIVALENT SUSY	P		M-M-R II SOLR	P	
FLUCELVAX SUSP	P		MODERNA COVID-19 BIVAL 6M-5Y	P	
FLUCELVAX SUSY	P		MODERNA COVID-19 BIVALENT	P	
			MODERNA COVID-19 VAC (BOOSTER) SUSP	P	

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 VAC 6M-11Y SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
MODERNA COVID-19 VAC 6M-11Y SUSY	P		SPIKEVAX COVID-19 VACCINE SUSP	P	
MODERNA COVID-19 VACC 6M-5Y SUSP	P		SPIKEVAX SUSP	P	
MODERNA COVID-19 VACCINE SUSP	P		SPIKEVAX SUSY	P	
NOVAVAX COVID-19 VACCINE SUSP	P		STAMARIL SUSR	P	
NOVAVAX COVID-19 VACCINE SUSY	P		TICOVAC	P	
PFIZER COVID-19 BIVAL 6MO-4YR	P		TWINRIX SUSY	P	
PFIZER COVID-19 VAC BIVAL 5-11	P		VAQTA	P	
PFIZER COVID-19 VAC BIVALENT	P		VARIVAX SUSR	P	2 max fill(s) per 999 day(s) retail
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	P		YF-VAX INJ	P	
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	P		VAGINAL AND RELATED PRODUCTS		
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	P		Vaginal Anti-infectives		
PFIZER-BIONTECH COVID-19 VACC SUSP	P		CLEOCIN CREA (<i>Use clindamycin phosphate vaginal</i>)	NP	
PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail	<i>clindamycin phosphate vaginal CREA</i>	P	
PRIORIX SUSR	P		<i>clotrimazole vaginal CREA 1 %</i>	P	OTC; QL(45 GM per 30 day(s) retail)
PROQUAD SUSR	P		<i>clotrimazole vaginal CREA 2 %</i>	P	OTC; QL(31 GM per 30 day(s) retail)
RABAVERT	P		GYNAZOLE-1	P	
RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail	GYNE-LOTTRIMIN 3 CREA (<i>Use clotrimazole vaginal</i>)	NP	OTC; QL(31 GM per 30 day(s) retail)
RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail	GYNE-LOTTRIMIN CREA (<i>Use clotrimazole vaginal</i>)	NP	OTC; QL(45 GM per 30 day(s) retail)
ROTARIX SUSP	P		<i>metronidazole vaginal</i>	P	QL(70 GM per fill retail)
ROTARIX SUSR	P		<i>miconazole nitrate vaginal CREA 2 %</i>	P	OTC; QL(45 GM per 30 day(s) retail)
ROTATEQ SOLN	P		<i>miconazole nitrate vaginal KIT</i>	P	

Georgia Medicaid Updated April 1, 2025
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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>miconazole nitrate vaginal SUPP 100 MG</i>	P	OTC; QL(7 EA per 30 day(s) retail)	AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>miconazole nitrate vaginal SUPP 200 MG</i>	P	QL(3 EA per 30 day(s) retail)	AUVI-Q SOAJ 0.15 MG/0.15ML	NP	
MONISTAT 3 COMBINATION PACK KIT (Use <i>miconazole nitrate vaginal</i>)	NP		<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	P	QL(2 EA per fill retail; 4 EA per 365 day(s) retail)
MONISTAT 3 CREA	P	OTC; QL(45 GM per 30 day(s) retail)	<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	NP	
MONISTAT 7 SIMPLY CURE CREA (Use <i>miconazole nitrate vaginal</i>)	NP	OTC; QL(45 GM per 30 day(s) retail)	<i>epinephrine (anaphylaxis) SOAJ</i>	P	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>terconazole vaginal CREA</i>	P		EPIPEN 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>terconazole vaginal SUPP</i>	P		EPIPEN JR 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>tioconazole vaginal 6.5 %</i>	P	OTC	Neurogenic Orthostatic Hypotension (NOH) - Agents		
VANDAZOLE	P	QL(70 GM per fill retail)	<i>droxidopa</i>	P	SP; PA
Vaginal Anti-inflammatory Agents			NORTHERA (Use <i>droxidopa</i>)	NP	SP; PA
<i>hydrocortisone vaginal</i>	P	QL(454 GM per fill retail)	Vasopressors		
MONISTAT CARE INSTANT ITCH RLF (Use <i>hydrocortisone vaginal</i>)	NP	QL(454 GM per fill retail)	<i>midodrine hcl</i>	P	
Vaginal Estrogens			VITAMINS		
ESTRACE CREA (Use <i>estradiol vaginal</i>)	NP	QL(43 GM per 30 day(s) retail)	Oil Soluble Vitamins		
<i>estradiol vaginal CREA</i>	P	QL(43 GM per 30 day(s) retail)	BABY DDROPS LIQD PO (Use <i>cholecalciferol</i>)	NP	Age limit = less than 6 months
<i>estradiol vaginal TABS</i>	P		<i>cholecalciferol CAPS 125 MCG, 5000 UNIT</i>	P	OTC; QL(2 EA daily)
PREMARIN	P	QL(43 GM per fill retail)	<i>cholecalciferol CAPS 1.25 MG, 50000 UNIT</i>	P	OTC; QL(8 EA per 30 day(s) retail)
VAGIFEM TABS (Use <i>estradiol vaginal</i>)	NP		<i>cholecalciferol CAPS</i>	P	OTC; QL(100 EA per fill retail)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
Anaphylaxis Therapy Agents					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	P		<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	P	OTC
<i>cholecalciferol LIQD PO</i>	P	Age limit = less than 6 months	<i>riboflavin TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)
<i>DRISDOL CAPS (Use ergocalciferol)</i>	NP		<i>SLO-NIACIN TBCR (Use niacin)</i>	NP	OTC
<i>D-VI-SOL LIQD PO (Use cholecalciferol)</i>	NP		<i>thiamine hcl TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)
<i>ergocalciferol CAPS</i>	P		<i>thiamine mononitrate TABS 100 MG</i>	P	OTC; QL(100 EA per 30 day(s) retail)
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	P				
<i>KEY-E CHEW</i>	P	QL(2 EA daily)			
<i>MEPHYTON TABS (Use phytonadione)</i>	NP				
<i>phytonadione TABS 5 MG</i>	P				
<i>VITAMIN D3 LIQD PO 125 MCG/ML</i>	P	Age limit = 6 months to 1 year			
<i>vitamin e CAPS 100 UNIT, 200 UNIT, 400 UNIT</i>	P	OTC; QL(2 EA daily)			
<i>vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG</i>	P	QL(2 EA daily)			
<i>VITAMIN E CAPS</i>	P	OTC; QL(2 EA daily)			
<i>VITAMIN E CHEW</i>	P	OTC; QL(2 EA daily)			
Water Soluble Vitamins					
<i>ascorbic acid TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)			
<i>B-1 TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)			
<i>NIACIN ER CPCR</i>	P	OTC			
<i>NIACIN ER TBCR</i>	P	OTC			
<i>niacin CPCR 250 MG, 500 MG</i>	P	OTC			
<i>niacin TABS 500 MG</i>	P	OTC			
<i>niacin TBCR</i>	P	OTC			

Georgia Medicaid Updated April 1, 2025
P-Preferred drug, NP-Non-Preferred drug, QL-Quantity limit, RX/OTC-both Rx and OTC NDCs

INDEX

abacavir sulfate SOLN	37	ACETAMINOPHEN SUPP	5	acyclovir SUSP	40
abacavir sulfate TABS	37	acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML	5	acyclovir TABS PO 400 MG	40
abacavir sulfate-lamivudine	37	acetaminophen TABS 325 MG, 500 MG	5	acyclovir TABS PO 800 MG	40
ABECMA	31	acetaminophen w/ codeine SOLN ..	7	acyclovir topical CREA	51
ABILIFY MAINTENA PRSY	37	acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG	7	acyclovir topical OINT	51
ABILIFY MAINTENA SRER	37	acetaminophen w/ codeine TABS 60 MG-300 MG	7	ADACEL SUSP	92
ABILIFY TABS (Use aripiprazole) .	37	acetaminophen w/ codeine TABS 60 MG-300 MG	7	ADALIMUMAB-AATY (1 PEN) AJKT . 3	
abiraterone acetate	31	acetaminophen w/ codeine TABS 60 MG-300 MG	7	ADALIMUMAB-AATY (2 PEN) AJKT . 3	
ABRAXANE (Use paclitaxel protein- bound particles)	34	acetazolamide CP12	57	ADALIMUMAB-AATY (2 SYRINGE) PSKT	3
ABRYSVO	95	acetazolamide TABS	57	ADALIMUMAB-ADAZ SOAJ	3
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use isotretinoin)	48	acetic acid (otic)	86	ADALIMUMAB-ADAZ SOSY	3
ACAM2000	95	acetylcysteine SOLN	48	ADALIMUMAB-ADBM (2 PEN) AJKT 3	
ACCU-CHEK GUIDE TEST STRP	55	ACTEMRA ACTPEN SOAJ	4	ADALIMUMAB-ADBM (2 SYRINGE) PSKT 40 MG/0.8ML	3
ACCUPRIL (Use quinapril hcl)	24	ACTEMRA SOLN	4	ADALIMUMAB-ADBM (2 SYRINGE) PSKT	3
ACCURETIC 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	25	ACTEMRA SOSY	4	ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	3
ACCURETIC 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	25	ACTHIB SOLR IM	94	ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	3
ACCURETIC 25 MG-20 MG (Use quinapril-hydrochlorothiazide)	25	ACTIMMUNE 100 MCG/0.5ML	34	ADALIMUMAB-FKJP (2 PEN) AJKT . 3	
ACE AEROSOL CLOUD ENHANCER MISC	70	ACTIVELLA TABS 1 MG-0.5 MG (Use estradiol & norethindrone acetate)	60	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	3
acebutolol hcl CAPS	41	ACTIVITY POUCH MISC	70	ADALIMUMAB-RYVK (2 SYRINGE) PSKT	3
acetaminophen CHEW	5	ACTONEL TABS 35 MG (Use risedronate sodium)	58	ADAPTER PED DISPOSABLE MISC	70
acetaminophen ELIX	5	ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl)	18	ADBRY SOSY	53
acetaminophen LIQD 160 MG/5ML .	5	ACTOS (Use pioglitazone hcl)	20	ADCETRIS	30
acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	5	ACULAR (Use ketorolac tromethamine (ophth))	86		
acetaminophen SUPP 120 MG, 650 MG	5	ACULAR LS (Use ketorolac tromethamine (ophth))	86		
		acyclovir CAPS	40		

ADCIRCA TABS (Use tadalafil (pulmonary hypertension))	43	alendronate sodium SOLN	58
ADDERALL TABS (Use amphetamine-dextroamphetamine)	.1	alendronate sodium TABS 35 MG, 70 MG	58
ADDERALL XR CP24 (Use amphetamine-dextroamphetamine)	.1	alendronate sodium TABS 5 MG, 10 MG	58
ADEMPAS	43	ALEVE TABS (Use naproxen sodium)	4
ADMELOG SOLN IJ	19	ALFERON N	34
ADMELOG SOLOSTAR SOPN	19	ALIMTA SOLR (Use pemetrexed disodium)	29
ADRENALIN 0.1 % (Use epinephrine hcl (nasal))	82	ALKERAN (Use melphalan)	29
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	92	ALKERAN IV (Use melphalan hcl)	29
ADULT AEROSOL MASK MISC	70	ALL FLOW 1000 PFT FILTER MISC	70
ADULT DISPOSABLE MISC	70	ALLEGRA ALLERGY TABS 180 MG (Use fexofenadine hcl)	23
ADULT MASK LARGE MISC	70	ALLEGRA ALLERGY TABS 60 MG (Use fexofenadine hcl)	23
ADVAIR DISKUS AEPB (Use fluticasone-salmeterol)	11	allopurinol 100 MG, 300 MG	63
ADVATE	63	ALOCRIL	86
ADVIL COLD/SINUS TABS (Use pseudoephedrine-ibuprofen)	46	alogliptin benzoate	19
ADVIL TABS (Use ibuprofen)	4	alogliptin-metformin hcl	18
ADVIN COVID-19 ANTIGEN TEST KIT	55	alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-12.5 MG, 45 MG-25 MG	18
ADVOCATE INSULIN PEN NEEDLE	69	ALOMIDE	86
ADYNOVATE	63	ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	60
AEROECLIPSE EZ TWIST TUBING MISC	70	ALPHANATE SOLR	63
AEROECLIPSE MASK LARGE MISC	70	ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	63
AEROECLIPSE MASK MEDIUM MISC	70	alprazolam TABS	9
AEROECLIPSE MASK SMALL MISC		ALPROLIX	63
		ALTACE CAPS 1.25 MG, 2.5 MG, 5	
AEROTRACH PLUS MISC	70		
AFINITOR DISPERZ TBSO (Use everolimus)	32		
AFINITOR TABS (Use everolimus)	32		
AFLURIA PRESERVATIVE FREE SUSY	95		
AFLURIA QUADRIVALENT SUSP	95		
AFLURIA QUADRIVALENT SUSY 0.5 ML	95		
AFLURIA SUSP	95		
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	63		
AIRS PEDIATRIC AEROSOL MASK MISC	70		
AIRZONE PEAK FLOW METER	70		
albuterol sulfate AERS	11		
albuterol sulfate NEBU 0.083 %	11		
albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML	11		
albuterol sulfate NEBU	11		
ALBUTEROL SULFATE NEBU	11		
albuterol sulfate SYRP	11		
albuterol sulfate TABS	11		
ALCOHOL PREP PADS-MISC	69		
ALDACTAZIDE (Use spironolactone & hydrochlorothiazide)	57		
ALDACTONE TABS (Use spironolactone)	57		
ALDURAZYME	59		
ALECENSA	32		

MG, 10 MG (Use ramipril)	25	65	88
ALTRIXA TABS	78	aminocaproic acid TABS 500 MG .	65
alum & mag hydrox-simethicone		amiodarone hcl TABS 200 MG . . .	10
LIQD	8	amitriptyline hcl TABS	17
alum & mag hydrox-simethicone		AMLADEX TABS	79
SUSP 1200 MG/30ML-120		amlodipine besylate TABS	41
MG/30ML-1200 MG/30ML, 200		amlodipine besylate-benazepril hcl	25
MG/5ML-20 MG/5ML-200 MG/5ML,		amlodipine besylate-olmesartan	
400 MG/10ML-40 MG/10ML-400		medoxomil	25
MG/10ML	8	amlodipine besylate-valsartan . . .	26
ALUMINUM HYDROXIDE GEL		amlodipine-valsartan-	
SUSP	8	hydrochlorothiazide	26
ALUNBRIG TABS	32	AMNIOTIC MEMBRANE	
ALUNBRIG TBPK	32	ALLOGRAFT (HUMAN) SHEET	55
amantadine hcl CAPS	35	AMONDYS 45	82
amantadine hcl SOLN	35	amoxapine	17
AMARYL 1 MG, 2 MG (Use		amoxicillin & pot clavulanate CHEW .	88
glimepiride)	20	amoxicillin & pot clavulanate SUSR	
AMARYL 4 MG (Use glimepiride) .	20	28.5 MG/5ML-200 MG/5ML	88
AMBIEN TABS (Use zolpidem		amoxicillin & pot clavulanate SUSR	
tartrate)	66	42.9 MG/5ML-600 MG/5ML, 57	
ambrisentan	43	MG/5ML-400 MG/5ML	88
AMICAR SOLN PO (Use		amoxicillin & pot clavulanate SUSR	
aminocaproic acid)	65	62.5 MG/5ML-250 MG/5ML	88
AMICAR TABS 1000 MG (Use		amoxicillin & pot clavulanate TABS	
aminocaproic acid)	65	125 MG-250 MG, 125 MG-500 MG	88
AMICAR TABS 500 MG (Use		88	
aminocaproic acid)	65	amoxicillin & pot clavulanate TABS	
amiloride & hydrochlorothiazide . .	57	125 MG-875 MG	88
amiloride hcl TABS	57	amoxicillin & pot clavulanate TB12	88
aminocaproic acid SOLN IV 250		amoxicillin CAPS	88
MG/ML	65	amoxicillin CHEW 125 MG, 250 MG .	
aminocaproic acid SOLN PO 0.25			
GM/ML	65		
aminocaproic acid TABS 1000 MG			

APRISO CP24 (Use mesalamine) .61	ascorbic acid TABS98	(Use atropine sulfate (ophthalmic)) 84
APTIVUS CAPS37	ASMANEX HFA AERO 11	ATROPINE SULFATE SOLN 1 % .84
AQINJECT PEN NEEDLE 69	ASPARLAS34	ATROVENT HFA10
AQUORAL SOLN78	aspirin buffered (cal carb-mag carb- mag oxide)6	AUBAGIO (Use teriflunomide) 90
ARALAST NP SOLR 500 MG, 1000 MG 91	aspirin CHEW 6	AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)88
ARANESP (ALBUMIN FREE) SOLN . 64	ASPIRIN SUPP 300 MG 6	AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML 88
ARANESP (ALBUMIN FREE) SOSY . 64	aspirin TABS 325 MG6	AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate) 88
ARAVA (Use leflunomide)5	aspirin TBEC 81 MG, 325 MG 6	AUM INSULIN SAFETY PEN NEEDLE69
ARCALYST4	ASSESS PEAK FLOW METER ...70	AUM PEN NEEDLE69
ARESTIN78	ASSURE ID DUO PRO PEN NEEDLES 69	AUVI-Q SOAJ 0.15 MG/0.15ML ...97
AREXVY95	ASSURE ID PRO PEN NEEDLES 69	AUVI-Q SOAJ 0.3 MG/0.3ML97
ARICEPT TABS 5 MG, 10 MG (Use donepezil hydrochloride)90	ATACAND (Use candesartan cilexetil) 25	AVALIDE (Use irbesartan- hydrochlorothiazide) 26
ARIKAYCE2	ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide) 26	AVAPRO 150 MG, 300 MG (Use irbesartan) 25
ARIMIDEX (Use anastrozole)31	atazanavir sulfate CAPS 150 MG, 200 MG37	AVEED SOLN8
aripiprazole SOLN PO37	atazanavir sulfate CAPS 300 MG .37	AVONEX PEN AJKT90
aripiprazole TABS37	ATELVIA TBEC (Use risedronate sodium)58	AVONEX PREFILLED PSKT90
aripiprazole TBDP37	atenolol & chlorthalidone26	AVSOLA61
ARISTADA 37	atenolol TABS41	AYGESTIN TABS (Use norethindrone acetate)89
ARISTADA INITIO37	ATGAM76	AYVAKIT 32
ARIXTRA (Use fondaparinux sodium)12	ATIVAN TABS (Use lorazepam)9	azacitidine SUSR 29
ARMOUR THYROID TABS92	atomoxetine hcl1	azathioprine TABS 50 MG76
ARNUITY ELLIPTA10	atorvastatin calcium TABS24	azathioprine TABS 75 MG, 100 MG 76
AROMASIN (Use exemestane) ...31	atropine sulfate (ophthalmic) OINT 84	AZEDRA DOSIMETRIC34
arsenic trioxide34	atropine sulfate (ophthalmic) SOLN 84	AZEDRA THERAPEUTIC34
ARZERRA30	ATROPINE SULFATE SOLN 1 %	
ASACOL HD TBEC (Use mesalamine) 61		

azelastine hcl (ophth) 86	sulfamethoxazole-trimethoprim) ... 27	25
azelastine hcl 0.1 %, 137 MCG/SPRAY 81	BACTRIM TABS (Use sulfamethoxazole-trimethoprim) ... 27	BENDAMUSTINE HCL SOLN 29
azelastine hcl 0.15 %, 205.5 MCG/SPRAY 81	BAFIERTAM 90	bendamustine hcl SOLR 29
azithromycin PACK 67	balsalazide disodium CAPS 61	BENDEKA SOLN 29
azithromycin SUSR 100 MG/5ML . 67	BALVERSA 32	BENEFIX KIT 63
azithromycin SUSR 200 MG/5ML . 67	BANZEL SUSP (Use rufinamide) .. 13	BENICAR (Use olmesartan medoxomil) 25
azithromycin TABS 250 MG 67	BANZEL TABS (Use rufinamide) .. 13	BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) ... 26
azithromycin TABS 500 MG 67	BAVENCIO 30	BENLYSTA SOAJ 77
azithromycin TABS 600 MG 67	BCG VACCINE 94	BENLYSTA SOLR 77
AZO URINARY PAIN RELIEF TABS (Use phenazopyridine hcl) 62	b-complex vitamins CAPS 78	BENLYSTA SOSY 77
AZOPT (Use brinzolamide) 86	b-complex vitamins TABS 78	BENZAC AC WASH LIQD 5 % (Use benzoyl peroxide) 48
AZOR (Use amlodipine besylate- olmesartan medoxomil) 26	b-complex w/ c & folic acid CAPS . 78	BENZNIDAZOLE 9
AZULFIDINE EN-TABS TBEC (Use sulfasalazine) 61	b-complex w/ c & folic acid TABS . 78	benzonatate 100 MG 46
AZULFIDINE TABS (Use sulfasalazine) 61	BD GLUCOSE CHEW 18	benzonatate 200 MG 46
b complex w/ c CAPS 78	BD PEN NEEDLES 69	benzoyl peroxide BAR 48
B-1 TABS 98	BELBUCA FILM 7	benzoyl peroxide GEL 2.5 %, 5 %, 10 % 48
BABY DDROPS LIQD PO (Use cholecalciferol) 97	BELEODAQ 32	benzoyl peroxide LIQD 4 %, 5 %, 10 % 48
bacitracin (ophthalmic) 84	BELRAPZO SOLN 29	benzoyl peroxide LOTN 5 %, 10 % 48
bacitracin (topical) OINT 49	BENADRYL ALLERGY CAPS (Use diphenhydramine hcl) 22	benztropine mesylate TABS 35
bacitracin zinc OINT 49	BENADRYL ALLERGY CHILDRENS LIQD (Use diphenhydramine hcl) .. 22	BERINERT KIT 63
bacitracin-polymyxin b (ophth) 84	BENADRYL ALLERGY EXTRA STR TABS 22	BESPONSA 30
baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML 81	BENADRYL ALLERGY ULTRATABS TABS (Use diphenhydramine hcl) . 22	BESREMI 34
baclofen TABS 81	benazepril & hydrochlorothiazide . 26	betaine 59
BACTRIM DS TABS (Use	benazepril hcl 40 MG 25	betamethasone dipropionate (topical) CREA 51
	benazepril hcl 5 MG, 10 MG, 20 MG .	betamethasone dipropionate augmented CREA 51

betamethasone valerate CREA51	20	BRINEURA59
betamethasone valerate LOTN51	bismuth subsalicylate SUSP 525	brinzolamide86
betamethasone valerate OINT51	MG/15ML, 1050 MG/30ML 20	BRIVIACT SOLN IV 50 MG/5ML .. 13
BETAPACE AF (Use sotalol hcl	bisoprolol & hydrochlorothiazide ..26	bromocriptine mesylate CAPS35
(afib/af))41	bisoprolol fumarate41	bromocriptine mesylate TABS 2.5
BETAPACE TABS 80 MG, 120 MG,	BIVIGAM SOLN 10 GM/100ML ...87	MG 35
160 MG (Use sotalol hcl)41	BIVIGAM SOLN 5 GM/50ML 87	brompheniramine & phenyleph ELIX .
betaxolol hcl (ophth) SOLN83	BLENREP30	46
bethanechol chloride94	BLINCYTO30	brompheniramine & pseudoeph ELIX
BETHKIS NEBU (Use tobramycin) . 2	BLOOD GLUCOSE TEST STRIPS	46
BEVACIZUMAB IZ 1.25 MG/0.05ML,	333 STRP55	brompheniramine & pseudoeph LIQD
2 MG/0.08ML, 2.5 MG/0.1ML, 3.25	BLULINK GLUCOSE TEST STRP .55	15 MG/5ML-1 MG/5ML 46
MG/0.13ML, 3.75 MG/0.15ML84	BOOSTRIX SUSP92	BRONCHITOL91
BEVACIZUMAB IZ 2.75 MG/0.11ML .	BOOSTRIX SUSY92	BRONCHITOL TOLERANCE TEST .
84	BORTEZOMIB SOLR IJ 1 MG, 2.5	91
bexarotene (topical)50	MG32	BRUKINSA32
bexarotene34	bortezomib SOLR IJ32	BUBBLES THE FISH II PEDI MASK
BEXSERO94	bosentan TABS43	MISC70
BEYFORTUS88	BOSULIF TABS32	budesonide (inhalation) SUSP11
bicalutamide31	BPROTECTED PEDIA POLY-VITE	budesonide-formoterol fumarate
BIKTARVY37	SOLN PO80	dihydrate11
BI-MIX SOLR42	BRAFTOVI 75 MG32	budesonide-formoterol fumarate
BINAXNOW COVID-19 AG HOME	BREATHE EASE NEB MASK/CHILD	dihydrate 160 MCG/ACT-4.5
TEST KIT55	MISC70	MCG/ACT11
BIOLYTE SOLN75	BREATHE EASE NEB	budesonide-formoterol fumarate
BIOTEL CARE BLOOD GLUCOSE	MASK/INFANT MISC70	dihydrate 80 MCG/ACT-4.5
KIT68	BREATHE EASE PEAK FLOW	MCG/ACT11
BIOTENE DRY MOUTH	METER70	BUFFERIN (Use aspirin buffered
MOISTURIZING SOLN78	BREYANZI31	(cal carb-mag carb-mag oxide))6
BIOTHRAX94	BRIDION SOLN21	bumetanide TABS57
bisacodyl SUPP67	BRILINTA64	BUMEX TABS 0.5 MG (Use
bisacodyl TBEC67	brimonidine tartrate 0.2 % 84	bumetanide)57
bismuth subsalicylate CHEW 262 MG		BUPHENYL POWD (Use sodium
		phenylbutyrate)59
		BUPHENYL TABS (Use sodium

phenylbutyrate)59	BYLVAY (PELLETS) CPSP61	calcium carbonate-vitamin d TABS 600 MG-200 UNIT 75
BUPRENEX SOLN (Use buprenorphine hcl)7	BYLVAY CAPS61	calcium polycarbophil TABS66
buprenorphine hcl SOLN8	CABLIVI64	CALTRATE 600+D3 TABS (Use calcium carbonate-cholecalciferol) 75
buprenorphine hcl SUBL8	CABOMETYX TABS 20 MG, 60 MG . 32	CALTRATE BONE HEALTH TABS (Use calcium carbonate- cholecalciferol)75
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG8	CABOMETYX TABS 40 MG32	camphor & menthol LOTN50
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG8	CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate)1	CAMPTOSAR (Use irinotecan hcl) 35
buprenorphine hcl-naloxone hcl dihydrate SUBL8	CAFERGOT TABS (Use ergotamine w/ caffeine)73	CAMZYOS42
bupropion hcl (smoking deterrent) 91	caffeine citrate SOLN PO1	candesartan cilexetil25
bupropion hcl TABS15	CAFFEINE CITRATED POWD1	candesartan cilexetil- hydrochlorothiazide26
bupropion hcl TB12 100 MG15	CALAN SR TBCR (Use verapamil hcl)41	capecitabine29
bupropion hcl TB12 150 MG15	calcipotriene CREA50	CAPHOSOL SOLN78
bupropion hcl TB12 200 MG15	calcipotriene SOLN50	CAPRELSA32
bupropion hcl TB12 200 MG15	calcitonin (salmon) IJ58	capsaicin CREA 0.025 %, 0.075 % 53
bupropion hcl TB24 150 MG15	calcitonin (salmon) NA58	capsaicin CREA 0.035 %53
bupropion hcl TB24 300 MG15	calcitriol CAPS59	capsaicin CREA 0.1 %53
buspirone hcl 15 MG9	CALCIUM 600 +D HIGH POTENCY TABS74	captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG26
buspirone hcl 5 MG, 10 MG9	calcium acetate (phosphate binder) CAPS62	captopril & hydrochlorothiazide 25 MG-50 MG26
buspirone hcl 7.5 MG, 30 MG9	calcium carbonate (antacid) CHEW 500 MG9	captopril25
butalbital-acetaminophen TABS 50 MG-325 MG5	calcium carbonate-cholecalciferol TABs 10 MCG-600 MG, 20 MCG- 600 MG, 400 UNIT-600 MG, 800 UNIT-600 MG75	CAPZASIN-HP CREA (Use capsaicin)53
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG5	calcium carbonate-cholecalciferol TABs 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG75	CAPZASIN-P CREA 0.035 % (Use capsaicin)53
butalbital-acetaminophen-caffeine TABs 40 MG-50 MG-325 MG5	calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT75	CARAC CREA50
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG7		CARAFATE SUSP (Use sucralfate)
butalbital-aspirin-caffeine CAPS5		
butalbital-aspirin-caffeine w/cod7		

93	CARETOUCH CPAP PRE-WASH SOLN MISC	70	cefixime CAPS	43	
CARAFATE TABS (Use sucralfate)			cefprozil SUSR	43	
93	CARETOUCH CPAP TUBE BRUSH MISC	70	cefprozil TABS	43	
CARBAGLU (Use carglumic acid)	59		ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG	44	
carbamazepine CHEW 100 MG	13	CARETOUCH TEST STRP	55	cefuroxime axetil TABS	43
carbamazepine SUSP	13	CARETOUCH UNIVERSL CPAP FILTER MISC	70	CELEXA TABS 10 MG (Use citalopram hydrobromide)	16
carbamazepine TABS	13	carglumic acid	59	CELEXA TABS 20 MG (Use citalopram hydrobromide)	16
carbamazepine TB12	13	CARNITOR SF SOLN PO (Use levocarnitine (metabolic modifiers))	59	CELEXA TABS 40 MG (Use citalopram hydrobromide)	16
carbamide peroxide (otic) 6.5 %	86	CARNITOR SOLN PO 1 GM/10ML (Use levocarnitine (metabolic modifiers))	59	CELLCEPT CAPS (Use mycophenolate mofetil)	76
carbidopa	35	CARNITOR TABS (Use levocarnitine (metabolic modifiers))	59	CELLCEPT SUSR (Use mycophenolate mofetil)	76
carbidopa-levodopa TABS	35	carteolol hcl (ophth)	83	CELLCEPT TABS (Use mycophenolate mofetil)	76
carbidopa-levodopa TBCR	35	carvedilol 25 MG	40	cephalexin CAPS 250 MG, 500 MG	43
carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	29	carvedilol 3.125 MG, 6.25 MG, 12.5 MG	40	cephalexin SUSR	43
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (Use diltiazem hcl coated beads)	41	carvedilol phosphate	40	CEPROTIN	64
CARDIZEM CD CP24 240 MG (Use diltiazem hcl coated beads)	41	CARVYKTI	31	CERASPORT EX1 SOLN	75
CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)	41	CASODEX (Use bicalutamide)	31	CERASPORT SOLN	75
CARDURA (Use doxazosin mesylate)	25	CASTIVA WARMING LOTN	53	CERDELGA	64
CARESENS N GLUCOSE TEST STRP	55	CAYSTON	28	CEREZYME 400 UNIT	64
CARESTART COVID-19 HOME TEST KIT	55	cefaclor CAPS	43	cetirizine hcl CHEW	23
CARETOUCH 2 CPAP HOSE HANGER MISC	70	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	43	cetirizine hcl SOLN PO	23
CARETOUCH CPAP & BIPAP HOSE MISC	70	cefadroxil CAPS	43	cetirizine hcl SYRP PO	23
CARETOUCH CPAP MASK WIPES MISC	70	cefadroxil SUSR	43	cetirizine hcl TABS	23
		cefadroxil TABS	43	cetirizine-pseudoephedrine	46
		cefdinir CAPS	43	cetorelix acetate	58
		cefdinir SUSR	43	CETROTIDE (Use cetorelix acetate)	

58	UNIT	97	MG/100ML, 200 MG/200ML	29
CHANTIX STARTING MONTH PAK	cholecalciferol CAPS	97	CISPLATIN SOLR	29
TBPK (Use varenicline tartrate) ...	cholecalciferol LIQD PO 10 MCG/ML,		citalopram hydrobromide SOLN	16
91	400 UNIT/ML	98	citalopram hydrobromide TABS 10	
CHEMET	cholecalciferol LIQD PO	98	MG	16
21			citalopram hydrobromide TABS 20	
CHEMSTRIP K STRP	cholestyramine light PACK	23	MG	16
55	cholestyramine light POWD	23	citalopram hydrobromide TABS 40	
CHENODAL	cholestyramine PACK	23	MG	16
61	cholestyramine POWD	24	cladribine 10 MG/10ML	29
CHILDRENS ADVIL SUSP 100	CHORIONIC GONADOTROPIN IM		clarithromycin SUSR 125 MG/5ML	68
MG/5ML (Use ibuprofen) ...	58		clarithromycin SUSR 250 MG/5ML	68
4	CIBINQO	53	clarithromycin TABS	68
CHILDRENS MOTRIN SUSP 100	cilostazol	64	clarithromycin TB24	68
MG/5ML (Use ibuprofen) ...	CILOXAN OINT	84	CLARITIN ALLERGY CHILDRENS	
4	CILOXAN SOLN (Use ciprofloxacin		SOLN (Use loratadine) ...	23
chlordiazepoxide hcl CAPS	hcl (ophth))	84	CLARITIN REDITABS JUNIORS	
9			TBDP (Use loratadine) ...	23
chlorhexidine gluconate (mouth-	CIMDUO	37	CLARITIN REDITABS TBDP 10 MG	
throat) ...	cimetidine hcl PO 300 MG/5ML	93	(Use loratadine) ...	23
77	cimetidine TABS	93	CLARITIN REDITABS TBDP 5 MG	
chlorhexidine gluconate SOLN EX 4	cinacalcet hcl	59	(Use loratadine) ...	23
%	CINQAIR	10	CLARITIN SOLN (Use loratadine)	23
37			CLARITIN TABS (Use loratadine)	23
chloroquine phosphate TABS 250	CINRYZE SOLR IV	64	CLARITIN-D 12 HOUR TB12 (Use	
MG	CIPRO TABS 250 MG, 500 MG (Use		loratadine & pseudoephedrine) ...	46
28	ciprofloxacin hcl)	61	CLARITIN-D 24 HOUR TB24 (Use	
chloroquine phosphate TABS 500	CIPRODEX (Use ciprofloxacin-		loratadine & pseudoephedrine) ...	46
MG	dexamethasone)	87	CLEARDETECT COVID-19 AG	
28	ciprofloxacin hcl (ophth) SOLN	84	HOME KIT	55
chlorpheniramine maleate SYRP	ciprofloxacin hcl TABS 100 MG	61	clemastine fumarate TABS 1.34 MG	
22			22	
chlorpheniramine maleate TABS	ciprofloxacin hcl TABS 250 MG, 500		CLEOCIN (Use clindamycin	
22	MG, 750 MG	61	palmitate hydrochloride) ...	28
chlorpromazine hcl TABS 10 MG	ciprofloxacin-dexamethasone	87		
37				
chlorpromazine hcl TABS 25 MG, 50	cisplatin SOLN 50 MG/50ML, 100			
MG, 100 MG, 200 MG				
37				
chlorthalidone 25 MG, 50 MG				
57				
CHLOR-TRIMETON SYRP (Use				
chlorpheniramine maleate)				
22				
CHLOR-TRIMETON TABS (Use				
chlorpheniramine maleate)				
22				
chlorzoxazone TABS 500 MG				
81				
CHOLBAM				
61				
cholecalciferol CAPS 1.25 MG,				
50000 UNIT				
97				
cholecalciferol CAPS 125 MCG, 5000				

CLEOCIN 150 MG, 300 MG (Use clindamycin hcl)	28	clomipramine hcl 75 MG	17	COLD & FLU RELIEF NIGHTTIME D LIQD	46
CLEOCIN CREA (Use clindamycin phosphate vaginal)	96	clonazepam TABS	12	COLESTID FLAVORED GRAN (Use colestipol hcl)	24
CLEOCIN-T LOTN (Use clindamycin phosphate (topical))	48	clonidine hcl (adhd) TB12	1	COLESTID GRAN (Use colestipol hcl)	24
CLEVER CHOICE PEAK FLOW METER	71	clonidine hcl TABS	25	COLESTID TABS (Use colestipol hcl)	24
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	60	clopidogrel bisulfate 75 MG	64	colestipol hcl GRAN	24
CLINDAGEL GEL (Use clindamycin phosphate (topical))	49	clorazepate dipotassium TABS	9	colestipol hcl TABS	24
clindamycin hcl 150 MG, 300 MG ..	28	clotrimazole (topical) CREA	49	COMBIPATCH PTTW	60
clindamycin palmitate hydrochloride ..	28	clotrimazole (topical) SOLN	49	COMBIVENT RESPIMAT AERS ..	11
clindamycin phosphate (topical) GEL ..	49	clotrimazole vaginal CREA 1 % ...	96	COMBIVIR (Use lamivudine-zidovudine)	38
clindamycin phosphate (topical) LOTN	49	clotrimazole vaginal CREA 2 % ...	96	COMETRIQ (100 MG DAILY DOSE) KIT	32
clindamycin phosphate (topical) SOLN	49	clotrimazole w/ betamethasone CREA	49	COMETRIQ (140 MG DAILY DOSE) KIT	32
clindamycin phosphate vaginal CREA	96	clotrimazole w/ betamethasone LOTN	49	COMETRIQ (60 MG DAILY DOSE) KIT	33
CLINITEST RAPID COVID-19 TEST KIT	55	clozapine TABS	36	COMFORT EZ PRO PEN NEEDLES	69
clobetasol propionate CREA 0.05 % ..	52	CLOZARIL TABS (Use clozapine) ..	36	COMIRNATY SUSP	95
clobetasol propionate emollient base 0.05 %	51	CO MONITOR REPLACEMENT PIECES MISC	71	COMIRNATY SUSY	95
clobetasol propionate GEL 0.05 % ..	52	COAGADDEX	63	COMPLERA	38
clobetasol propionate OINT 0.05 % ..	52	coal tar extract SHAM 0.5 %	55	CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl) ..	1
clobetasol propionate SOLN 0.05 % ..	52	COARTEM	28	CONCERTA TBCR 36 MG (Use methylphenidate hcl)	1
		codeine sulfate TABS 30 MG	6	CONDOMS-MISC	68
		CODEINE SULFATE TABS	6	CONTOUR NEXT EZ KIT	68
		COLACE CAPS 100 MG (Use docusate sodium)	67	CONTOUR NEXT GEN MONITOR KIT	68
		COLACE CLEAR CAPS (Use docusate sodium)	67	CONTOUR PLUS BLUE KIT	68
		COLAZAL CAPS (Use balsalazide disodium)	61		
		colchicine TABS	63		
		colchicine w/ probenecid	63		
		COLCRYS TABS (Use colchicine) ..	63		

CONTOUR PLUS TEST STRP55	cromolyn sodium (ophth)86	cyclophosphamide SOLR IJ29
COPAXONE SOSY (Use glatiramer acetate)90	cromolyn sodium NEBU10	cyclosporine CAPS76
COPIKTRA33	crotamiton LOTN54	cyclosporine modified (for microemulsion) CAPS76
COREG 25 MG (Use carvedilol) ...40	CRYSVITA59	cyclosporine modified (for microemulsion) SOLN76
COREG 3.125 MG, 6.25 MG, 12.5 MG (Use carvedilol)41	CTEXLI 250 MG61	cyclosporine SOLN IV 50 MG/ML .76
COREG CR (Use carvedilol phosphate)41	CUTAQUIG87	CYLTEZO (2 PEN) AJKT3
CORETEXT SUSP 1 ML, 2 ML55	CUVITRU SOLN87	CYLTEZO (2 SYRINGE) PSKT3
CORGARD TABS 20 MG, 40 MG (Use nadolol)41	CVS COVID-19 AT HOME TEST KIT KIT55	CYLTEZO-CD/UC/HS STARTER AJKT3
CORIFACT63	CVS DRY MOUTH SOLN78	CYLTEZO-PSORIASIS/UV STARTER AJKT3
CORTEF TABS (Use hydrocortisone)45	CVS GLUCOSE18	CYMBALTA CPEP (Use duloxetine hcl)17
CORTENEMA (Use hydrocortisone (intrarectal))8	CVS GLUCOSE CHEW18	cyproheptadine hcl SYRP23
CORTISONE ACETATE TABS45	CVS LANOLIN CREA54	cyproheptadine hcl TABS23
CORTROSYN SOLR (Use cosyntropin)55	CVS SOFT GLUCOSE CHEW18	CYRAMZA30
COSOPT (Use dorzolamide hcl-timolol maleate)84	CVS TRUE METRIX GLUCOSE TEST STRP56	CYSTADANE (Use betaine)59
cosyntropin SOLR55	cyanocobalamin SOLN IJ 1000 MCG/ML64	CYSTADROPS86
COTELLIC33	cyclobenzaprine hcl TABS 5 MG, 10 MG81	CYSTAGON CAPS62
COVID-19 AT HOME ANTIGEN TEST KIT55	cyclobenzaprine hcl TABS 7.5 MG 81	CYSTARAN86
COVID-19 AT-HOME TEST KIT55	CYCLOGYL (Use cyclopentolate hcl)84	cytarabine SOLN29
COZAAR (Use losartan potassium) 25	CYCLOGYL 0.5 %84	CYTOGAM SOLN87
CREON CPEP57	CYCLOGYL 2 %84	CYTOMEL TABS (Use liothyronine sodium)92
CRESTOR TABS (Use rosuvastatin calcium)24	cyclopentolate hcl 0.5 %84	CYTOTEC (Use misoprostol)94
cromolyn sodium (nasal) 5.2 MG/ACT81	cyclopentolate hcl 1 %, 2 %84	dabigatran etexilate mesylate CAPS .12
	CYCLOPHOSPHAMIDE SOLN (Use cyclophosphamide)29	DAILY MULTIPLE VITAMINS TABS .79
	CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML, 500 MG/2.5ML29	dalfampridine90
	cyclophosphamide SOLN29	DALIRESP (Use roflumilast)10

dapagliflozin propanediol	20	DEFITELIO	64	SC	45
dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	18	deflazacort SUSP	45	DERMAREST PSORIASIS GEL ...	53
dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	18	deflazacort TABS	45	DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	52
dapsone	28	DEFLUX	62	DERMOTIC (Use fluocinolone acetonide (otic))	87
DAPTACEL	92	DELSTRIGO	38	DESCOVY 120 MG-15 MG	38
DARAPRIM (Use pyrimethamine) ..	28	DELSYM COUGH CHILDRENS SUER (Use dextromethorphan polistirex)	46	DESCOVY 200 MG-25 MG	38
darunavir TABS 600 MG	38	DELSYM SUER (Use dextromethorphan polistirex)	46	DESFERAL 500 MG (Use deferoxamine mesylate)	21
darunavir TABS 800 MG	38	DELZICOL CPDR (Use mesalamine) 62	62	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	17
DARZALEX	30	DEMSEER (Use metyrosine)	25	desipramine hcl TABS 25 MG	17
DARZALEX FASPRO	32	DENG VAXIA	95	desmopressin acetate SOLN IJ ...	60
dasatinib	33	DEPAKOTE ER TB24 250 MG (Use divalproex sodium)	14	DESMOPRESSIN ACETATE SOLN NA	60
DAUNORUBICIN HCL SOLN (Use daunorubicin hcl)	32	DEPAKOTE ER TB24 500 MG (Use divalproex sodium)	14	desmopressin acetate spray	60
daunorubicin hcl SOLN	32	DEPAKOTE SPRINKLES CSDR (Use divalproex sodium)	15	desmopressin acetate spray refrigerated 0.01 %	60
DAURISMO	31	DEPAKOTE TBEC 125 MG (Use divalproex sodium)	15	desmopressin acetate TABS	60
DAYHIST ALLERGY 12 HOUR RELIEF TABS	22	DEPAKOTE TBEC 250 MG (Use divalproex sodium)	15	desogestrel & ethinyl estradiol	44
DDAVP PF SOLN IJ (Use desmopressin acetate)	60	DEPAKOTE TBEC 500 MG (Use divalproex sodium)	15	desogestrel-ethinyl estradiol (biphasic)	44
DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	60	DEPEN TITRATABS TABS (Use penicillamine)	76	desogestrel-ethinyl estradiol (triphasic)	44
DDAVP TABS (Use desmopressin acetate)	60	DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive))	45	desonide CREA	52
DEBROX 6.5 % (Use carbamide peroxide (otic))	86	DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive))	45	desonide OINT	52
decitabine	29	DEPO-SUBQ PROVERA 104 SUSY		DESOWEN CREA (Use desonide) ..	52
deferasirox PACK	21			desoximetasone CREA 0.05 %	52
deferasirox TABS	21			desoximetasone CREA 0.25 %	52
deferasirox TBSO	21			desoximetasone GEL	52
deferiprone TABS	21			desoximetasone OINT 0.25 %	52
deferoxamine mesylate	21			desvenlafaxine succinate 100 MG ..	17

desvenlafaxine succinate 25 MG, 50 MG	17	DEXTENZA INST	85	DIACOMIT CAPS 500 MG	13
DETROL LA CP24 (Use tolterodine tartrate)	94	dextroamphetamine sulfate CP24 ...	1	DIACOMIT PACK 250 MG	13
DETROL TABS (Use tolterodine tartrate)	94	dextroamphetamine sulfate TABS 5 MG, 10 MG	1	DIACOMIT PACK 500 MG	13
DEX4	18	dextromethorphan hbr LIQD 7.5 MG/5ML	46	DIASTAT ACUDIAL GEL 10 MG (Use diazepam (anticonvulsant)) ..	12
DEX4 GLUCOSE	18	dextromethorphan polistirex SUER 46		DIASTAT ACUDIAL GEL 20 MG (Use diazepam (anticonvulsant)) ..	12
DEX4 NATURALS	18	dextromethorphan-doxylamine-acetaminophen LIQD	46	DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))	12
DEX4 POUCH PACK	18	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML	46	diazepam (anticonvulsant) GEL 10 MG	12
DEX4 QUICK DISSOLVE GLUCOSE CHEW	18	dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML	47	diazepam (anticonvulsant) GEL ...	12
dexamethasone ELIX	45	dextromethorphan-guaifenesin LIQD 200 MG/5ML-10 MG/5ML	46	diazepam SOLN PO 5 MG/5ML	9
dexamethasone sodium phosphate (ophth)	85	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML	47	diazepam TABS	10
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	45	dextromethorphan-guaifenesin TB12 600 MG-30 MG	47	dibucaine	53
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML ..	45	dextromethorphan-phenylephrine-acetaminophen CAPS	47	dichlorphenamide	57
dexamethasone sodium phosphate SOSY IJ 4 MG/ML	45	DEXYCU SUSP IO	85	diclofenac potassium TABS 50 MG .	4
dexamethasone SOLN	45	DHIVY TABS	35	diclofenac sodium (ophth)	86
dexamethasone TABS	45	DHS TAR GEL SHAM (Use coal tar extract)	55	diclofenac sodium (topical) GEL EX 50	
DEXCOM G6 RECEIVER	68	DHS TAR SHAM (Use coal tar extract)	55	diclofenac sodium TBEC	4
DEXCOM G7 RECEIVER	68	DIABETIC TUSSIN COLD/FLU CAPS	47	dicloxacin sodium	88
DEXCOM G7 SENSOR	68	DIACOMIT CAPS 250 MG	13	dicyclomine hcl CAPS	92
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) ...	1			dicyclomine hcl SOLN PO	92
DEXILANT (Use dexlansoprazole) 93				dicyclomine hcl TABS	93
dexlansoprazole	93			DIFFERIN CLEANSER LIQD (Use benzoyl peroxide)	49
dexmethylphenidate hcl TABS	1			DIFLUCAN SUSR (Use fluconazole) .	22
dexrazoxane hcl	34			DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)	22
				DIFLUCAN TABS 150 MG (Use fluconazole)	22

diflunisal TABS6	dimethyl fumarate CPDR 90	DITROPAN XL TB24 5 MG, 10 MG (Use oxybutynin chloride)94
digoxin SOLN PO 0.05 MG/ML42	DIOVAN HCT (Use valsartan- hydrochlorothiazide) 26	divalproex sodium CSDR 15
digoxin TABS 125 MCG, 250 MCG 42	DIOVAN TABS (Use valsartan) ...25	divalproex sodium TB24 250 MG ..15
dihydroergotamine mesylate SOLN NA 4 MG/ML 74	diphenhydramine hcl (sleep) CAPS 50 MG65	divalproex sodium TB24 500 MG ..15
DILANTIN (Use phenytoin sodium extended) 14	diphenhydramine hcl (sleep) TABS 25 MG66	divalproex sodium TBEC 125 MG .15
DILANTIN14	diphenhydramine hcl (sleep) TABS 50 MG66	divalproex sodium TBEC 250 MG .15
DILANTIN INFATABS CHEW (Use phenytoin)14	diphenhydramine hcl CAPS 22	divalproex sodium TBEC 500 MG .15
DILANTIN SUSP (Use phenytoin) .14	diphenhydramine hcl ELIX 12.5 MG/5ML22	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (Use docetaxel)34
DILANTIN-125 SUSP (Use phenytoin)14	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML22	docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML 34
DILAUDID TABS 2 MG, 4 MG (Use hydromorphone hcl)6	diphenhydramine hcl TABS 25 MG 22	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML 34
DILAUDID TABS 8 MG (Use hydromorphone hcl)6	diphenoxylate w/ atropine LIQD ...21	DOCETAXEL SOLN (Use docetaxel) 35
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG 41	diphenoxylate w/ atropine TABS ..21	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML34
diltiazem hcl coated beads CP24 240 MG 41	DIPHThERIA-TETANUS TOXOIDS DT SUSP92	docetaxel SOLN 34
diltiazem hcl CP12 42	dipyridamole64	DOCIVYX SOLN35
diltiazem hcl CP24 120 MG, 180 MG 42	disopyramide phosphate CAPS ... 10	docusate sodium CAPS 100 MG, 250 MG 67
diltiazem hcl CP24 240 MG42	DISPOSABLE FULL RANGE MISC 71	docusate sodium CAPS 50 MG ...67
diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG42	DISPOSABLE LOW RANGE MISC 71	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML67
diltiazem hcl extended release beads 240 MG42	DISPOSABLE LOW RANGE/PEDIATRIC MISC71	DOCUSATE SODIUM SYRP67
diltiazem hcl TABS42	DISPOSABLE PAPER MISC71	docusate sodium TABS67
dimenhydrinate TABS21	DISPOSABLE UNIVERSAL RANGE MISC71	dofetilide10
dimethyl fumarate CDPK 90	disulfiram 250 MG90	DOJOLVI83
		donepezil hydrochloride TABS 5 MG, 10 MG90
		dorzolamide hcl86

DORZOLAMIDE HCL	86	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	17	EDURANT	38
DORZOLAMIDE HCL-TIMOLOL MAL	84	DUROLANE PRSY	81	efavirenz CAPS 200 MG	38
dorzolamide hcl-timolol maleate ..	84	D-VI-SOL LIQD PO (Use cholecalciferol)	98	efavirenz CAPS 50 MG	38
DOVATO	38	E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	68	efavirenz TABS	38
DOVONEX CREA (Use calcipotriene)	51	EASY COMFORT PEN NEEDLES 69		efavirenz-emtricitabine-tenofovir disoproxil fumarate	38
doxazosin mesylate	25	EASY FLOW 300 MM HOSE MISC 71		efavirenz-lamivudine-tenofovir disoproxil fumarate	38
doxepin hcl CAPS	17	EASY FLOW 400 MM HOSE MISC 71		EFFEXOR XR CP24 150 MG (Use venlafaxine hcl)	17
doxepin hcl CONC	17	EASY FLOW AIR NOZZLE MISC . 71		EFFEXOR XR CP24 37.5 MG (Use venlafaxine hcl)	17
doxycycline (monohydrate) CAPS 50 MG, 100 MG	92	EASY FLOW HEPA FILTER MISC 71		EFFEXOR XR CP24 75 MG (Use venlafaxine hcl)	17
doxycycline (monohydrate) TABS 50 MG, 100 MG	92	EASY MAX BLOOD GLUCOSE TEST STRP	56	EFFIENT (Use prasugrel hcl)	64
doxycycline hyclate CAPS	92	EASY MAX T1 GLUCOSE SYSTEM KIT	68	EFUDEX CREA (Use fluorouracil (topical))	50
doxycycline hyclate TABS 100 MG 92		EASY TALK PLUS II TEST STRIPS STRP	56	ELAPRASE	59
doxylamine succinate (sleep)	66	EASY TOUCH HEALTHPRO GLUCOSE KIT	68	eletriptan hydrobromide	74
DRAMAMINE CHEW	22	EASY TRAK II GLUCOSE TEST STRP	56	ELIDEL (Use pimecrolimus)	53
DRAMAMINE TABS (Use dimenhydrinate)	22	EBASE CONTROLLER KIT MISC 71		ELIGARD KIT SC 7.5 MG	31
DRISDOL CAPS (Use ergocalciferol) 98		econazole nitrate CREA	50	ELIGARD SC 22.5 MG, 30 MG, 45 MG	31
drospirenone-ethinyl estradiol	44	ECOTRIN ARTHRTIS PAIN TBEC (Use aspirin)	6	ELIMITE CREA (Use permethrin) . 54	
DROXIA CAPS	64	ECOTRIN TBEC (Use aspirin)	6	ELIQUIS DVT/PE STARTER PACK TBPK	12
droxidopa	97	ED BRON GP LIQD	47	ELIQUIS TABS	12
DRYSOL SOLN	54	edaravone SOLN	82	ELLA	45
DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl)	67			ELLENCE SOLN	32
DULCOLAX SUPP (Use bisacodyl) 67				ELLUME COVID-19 HOME TEST KIT	56
DULCOLAX TBEC (Use bisacodyl) 67				ELOCTATE	63
				EMBECTA AUTOSHIELD DUO ..	69

EMBECTA PEN NEEDLE NANO .69	ENHERTU30	ergocalciferol CAPS98
EMBECTA PEN NEEDLE NANO 2 GEN69	ENJAYMO64	ergocalciferol SOLN PO 200 MCG/ML98
EMBECTA PEN NEEDLE U/F69	enoxaparin sodium SOLN IJ 300 MG/3ML12	ergotamine w/ caffeine TABS74
EMBRACE PEN NEEDLES69	enoxaparin sodium SOSY12	eribulin mesylate35
EMBRACE PRO GLUCOSE TEST STRP56	ENSPRYNG76	ERIVEDGE31
EMBRACE WAVE BLOOD GLUCOSE STRP56	ENTYVIO SOLR62	ERLEADA 60 MG31
EMCYT31	EPICORD SHEE55	erlotinib hcl31
EMFLAZA SUSP (Use deflazacort) 45	EPIDIOLEX13	ertapenem sodium IJ27
EMFLAZA TABS (Use deflazacort) 45	EPIFOAM FOAM52	ERYGEL GEL (Use erythromycin (acne aid))49
EMOLLIENT LOTION-MISC53	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML97	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)68
EMPLICITI30	epinephrine (anaphylaxis) SOAJ ..97	ERYPED 400 SUSR (Use erythromycin ethylsuccinate)68
emtricitabine CAPS38	epinephrine hcl (nasal)82	erythromycin (acne aid) GEL49
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG38	EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))97	erythromycin (acne aid) SOLN49
EMTRIVA CAPS (Use emtricitabine) . 38	EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))97	erythromycin (ophth)85
EMTRIVA SOLN38	EPIVIR SOLN (Use lamivudine) ...38	ERYTHROMYCIN85
EMVERM CHEW9	EPIVIR TABS 150 MG (Use lamivudine)38	erythromycin base CPEP68
enalapril maleate & hydrochlorothiazide26	EPIVIR TABS 300 MG (Use lamivudine)38	erythromycin base TABS68
enalapril maleate TABS25	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML64	erythromycin base TBEC68
ENDARI (Use glutamine (sickle cell))64	epoprostenol sodium42	erythromycin ethylsuccinate SUSR 68
ENFAMIL ENFALYTE SOLN75	EPZICOM (Use abacavir sulfate- lamivudine)38	erythromycin ethylsuccinate TABS 68
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML80	EQL DRY MOUTH ORAL RINSE SOLN78	erythromycin stearate TABS 250 MG 68
ENERGIX-B SUSP 20 MCG/ML ...95	EQUALYTE SOLN (Use oral electrolytes)75	ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML36
ENERGIX-B SUSY95	ERBITUX31	ESBRIET CAPS (Use pirfenidone) 92
		ESBRIET TABS (Use pirfenidone) 92
		escitalopram oxalate TABS 10 MG

16	etravirine 200 MG	38	ezetimibe	24
escitalopram oxalate TABS 20 MG	EUFLEXXA SOSY	81	ezetimibe-simvastatin	23
16	EULEXIN	31	famciclovir	40
escitalopram oxalate TABS 5 MG . 16	EVAC POWD (Use psyllium)	66	famotidine SUSR	93
ESGIC TABS (Use butalbital- acetaminophen-caffeine)	EVENITY	58	famotidine TABS 10 MG	93
5	everolimus TABS	33	famotidine TABS 20 MG, 40 MG .	93
esomeprazole magnesium CPDR 20 MG	everolimus TBSO	33	FARESTON (Use toremifene citrate)	31
93	EVERSENSE 365 SENSOR/HOLDER	68	FARXIGA (Use dapagliflozin propanediol)	20
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	EVERSENSE E3 SENSOR/HOLDER	68	FASTEP COVID-19 ANTIGEN TEST KIT	56
63	EVISTA (Use raloxifene hcl)	59	FEIBA	63
ESTRACE CREA (Use estradiol vaginal)	EVKEEZA	23	felbamate SUSP	14
97	EVOMELA IV	29	felbamate TABS	14
ESTRACE TABS (Use estradiol)	EVRYSDI	82	FELBATOL SUSP (Use felbamate)	14
.. 60	EXELON 4.6 MG/24HR, 9.5 MG/24HR (Use rivastigmine)	90	FELBATOL TABS (Use felbamate)	14
estradiol & norethindrone acetate TABS	exemestane	31	FELDENE CAPS (Use piroxicam)	4
60	EXFORGE (Use amlodipine besylate-valsartan)	26	felodipine	42
estradiol PTTW	EXFORGE HCT (Use amlodipine- valsartan-hydrochlorothiazide)	26	FEMARA (Use letrozole)	31
61	EXJADE TBSO (Use deferiasirox)	21	fenofibrate micronized 134 MG, 200 MG	24
estradiol PTWK	EXKIVITY	31	fenofibrate micronized 67 MG	24
61	EXONDYS 51	82	fenofibrate TABS 160 MG	24
estradiol TABS	EXPIRATORY MOUTHPIECE MISC . 71	71	fenofibrate TABS 54 MG	24
61	EXSERVAN FILM	82	FENOGLIDE TABS (Use fenofibrate)	24
estradiol vaginal CREA	EXTAVIA KIT	90	fenoprofen calcium CAPS 400 MG .	4
97	EYLEA HD SOLN	84	FENSOLVI (6 MONTH) SC	59
estradiol vaginal TABS	EYLEA SOLN	84	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR,	
97	EYLEA SOSY	84		
ESTROFACTORS TABS				
79				
ethambutol hcl TABS				
29				
ethosuximide CAPS				
14				
ethosuximide SOLN				
14				
ethynodiol diacet & eth estrad				
44				
etodolac CAPS				
4				
etodolac TABS				
4				
etonogestrel-ethinyl estradiol				
44				
etoposide CAPS				
35				
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML				
35				
etravirine 100 MG				
38				

100 MCG/HR	6	FIRVANQ SOLR PO (Use vancomycin hcl)	27	FLORAFOL PEDIATRIC SOLN ...	79
FER-IN-SOL SOLN (Use ferrous sulfate)	65	FLAVOR BLEND SUSP	88	FLORIVA PLUS SOLN	79
FERRETTS TABS	65	FLAVOR PLUS LIQD	88	FLOTREX CHEW 0.5 MG	79
FERRIPROX SOLN	21	FLAVOR SWEET SYRP	88	FLOVENT DISKUS AEPB (Use fluticasone propionate (inhalation))	11
FERRIPROX TABS (Use deferiprone)	21	FLAVOR SWEET-SF SYRP	88	FLOVENT DISKUS AEPB	11
FERRIPROX TWICE-A-DAY TABS 21		flavoxate hcl	94	FLOVENT HFA (Use fluticasone propionate hfa)	11
ferrous fumarate TABS	65	FLEBOGAMMA DIF SOLN 5 GM/50ML	87	FLOWFLEX COVID-19 AG HOME TEST KIT	56
ferrous fumarate-fa-b complex-c-zn- mg-mn-cu TABS	65	FLEBOGAMMA DIF SOLN	87	FLUAD	95
FERROUS GLUCONATE TABS 324 MG	65	flecainide acetate	10	FLUAD QUADRIVALENT	95
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	65	FLEET ENEMA ENEM (Use sodium phosphates)	67	FLUARIX QUADRIVALENT SUSY	95
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	65	FLEET PEDIATRIC ENEM (Use sodium phosphates)	67	FLUARIX SUSY	95
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	65	FLEET SALINE ENEMA ENEM (Use sodium phosphates)	67	FLUBLOK QUADRIVALENT	95
FERROUS SULFATE TBEC (Use ferrous sulfate)	65	FLEXICHAMBER ADULT MASK/SMALL	71	FLUBLOK SOSY	95
ferrous sulfate TBEC	65	FLEXICHAMBER CHILD MASK/LARGE	71	FLUCELVAX QUADRIVALENT SUSP	95
FEVERALL JUNIOR STRENGTH SUPP	5	FLEXICHAMBER CHILD MASK/SMALL	71	FLUCELVAX QUADRIVALENT SUSY	95
fexofenadine hcl TABS 180 MG ...	23	FLOLAN (Use epoprostenol sodium)	42	FLUCELVAX SUSP	95
fexofenadine hcl TABS 60 MG	23	FLONASE ALLERGY REL CHILDRENS SUSP (Use fluticasone propionate (nasal))	82	FLUCELVAX SUSY	95
FIBRYGA	63	FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	82	fluconazole SUSR	22
FILTER AIR PP MISC	71			fluconazole TABS 100 MG, 200 MG .	22
finasteride	62			fluconazole TABS 150 MG	22
fingolimod hcl	90			fluconazole TABS 50 MG	22
FINTEPLA	13			fludarabine phosphate SOLN	29
FIRAZYR SOSY (Use icanitabant acetate)	63	FLORAFOL PEDIATRIC CHEW 0.5 MG	79	FLUDARABINE PHOSPHATE SOLN	29
		FLORAFOL PEDIATRIC CHEW 1 MG	79	fludarabine phosphate SOLR	29
				fludrocortisone acetate TABS	46

FLULAVAL QUADRIVALENT SUSY . 82	FOLLISTIM AQ SC 300
95	UNT/0.36ML, 600 UNT/0.72ML, 900
FLULAVAL SUSY95	UNT/1.08ML58
FLUMIST95	FOLOTYN29
FLUMIST QUADRIVALENT95	fondaparinux sodium12
flunisolide (nasal)82	FORA 6 CONNECT/GTEL TEST
fluocinolone acetonide (otic)87	STRP56
fluocinolone acetonide OIL52	FORA GTEL BLOOD KETONE TEST
fluocinonide CREA 0.05 %52	56
fluocinonide emulsified base52	FORA TEST N'GO ADV-VOICE-6
fluocinonide GEL52	CON56
fluocinonide OINT52	FORA TN'G ADVANCE PRO STRP
fluocinonide SOLN52	56
fluorometholone (ophth) SUSP85	formaldehyde SOLN 10 %37
fluorouracil (topical) CREA 0.5 % ..50	FORTEO SOPN (Use teriparatide) 58
fluorouracil (topical) CREA 5 %50	FORTISCARE G1 TEST STRIP
fluorouracil (topical) SOLN50	STRP56
fluoxetine hcl CAPS 10 MG, 20 MG	FOSAMAX TABS 70 MG (Use
16	alendronate sodium)58
fluoxetine hcl CAPS 40 MG16	fosamprenavir calcium TABS38
fluoxetine hcl SOLN16	fosinopril sodium &
fluoxetine hcl TABS 10 MG16	hydrochlorothiazide26
fluoxetine hcl TABS 20 MG16	fosinopril sodium25
fluphenazine decanoate37	FOTIVDA33
fluphenazine hcl TABS37	FRAGMIN SOLN 10000 UNIT/4ML,
flurazepam hcl66	95000 UNIT/3.8ML12
flurbiprofen sodium86	FRAGMIN SOSY12
flurbiprofen TABS4	FREESTYLE LIBRE 14 DAY
fluticasone propionate (inhalation)	READER68
AEPB11	FREESTYLE LIBRE 14 DAY
fluticasone propionate (nasal) SUSP .	SENSOR68
64	FREESTYLE LIBRE 2 PLUS
	SENSOR68
	FREESTYLE LIBRE 2 READER ..68

FREESTYLE LIBRE 2 SENSOR ..68	GAMMAGARD S/D LESS IGA SOLR ..87	GEODON (Use ziprasidone hcl) ..36
FREESTYLE LIBRE 3 PLUS SENSOR69	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML87	GERI-TUSSIN SYRP48
FREESTYLE LIBRE 3 READER ..69	GAMMAPLEX SOLN 5 GM/50ML .87	GILENYA (Use fingolimod hcl)90
FREESTYLE LIBRE 3 SENSOR ..69	GAMMAPLEX SOLN87	GILOTTRIF31
FREESTYLE LIBRE READER69	GAMUNEX-C87	GIMOTI SOLN NA61
FREESTYLE LITE KIT69	GANIRELIX ACETATE (Use ganirelix acetate)58	ginger (zingiber officinalis) CAPS 250 MG2
FT ELECTROLYTE SOLN75	ganirelix acetate58	GLASSIA SOLN91
FT SALINE NASAL SPRAY SOLN 81	GARDASIL 9 SUSP95	glatiramer acetate SOSY90
FULL KIT NEBULIZER SET MISC 71	GARDASIL 9 SUSY95	GLEEVEC TABS (Use imatinib mesylate)33
furosemide SOLN PO 8 MG/ML, 10 MG/ML57	GATTEX62	glimepiride 1 MG, 2 MG20
furosemide TABS57	GAUZE SPONGES68	glimepiride 4 MG20
FUZEON SOLR38	GAVRETO33	glipizide TABS20
FYARRO33	GAZYVA30	glipizide TB2420
gabapentin CAPS13	gefitinib31	glipizide-metformin hcl18
gabapentin SOLN13	GEL-ONE81	glucagon (rdna)18
gabapentin TABS 600 MG13	GELSYN-3 SOSY81	GLUCAGON EMERGENCY (Use glucagon (rdna))18
gabapentin TABS 800 MG13	gemfibrozil TABS24	GLUCO TO GO CHEW18
GABITRIL (Use tiagabine hcl)14	GENABIO COVID-19 RAPID TEST KIT56	GLUCOSE 6 MG-4 GM18
GABLOFEN SOLN IT (Use baclofen) 81	GENERESS FE (Use norethindrone & ethinyl estradiol-fe)44	GLUCOSE CHEW19
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML ...81	GENICIN VITA-Q TABS79	GLUCOSE INSTANT ENERGY ...18
GALAFOLD59	gentamicin sulfate (ophth) OINT ...85	GLUCOTROL XL TB24 (Use glipizide)20
galantamine hydrobromide CP24 ..90	gentamicin sulfate (ophth) SOLN ..85	GLUMETZA TB24 (Use metformin hcl)18
galantamine hydrobromide SOLN .90	gentamicin sulfate (topical) CREA .49	glutamine (sickle cell)64
galantamine hydrobromide TABS .90	gentamicin sulfate (topical) OINT ..49	glyburide micronized 1.5 MG, 3 MG, 6 MG20
GAMASTAN87	GENVISC 850 SOSY81	glyburide TABS20
GAMIFANT76	GENVOYA38	glyburide-metformin18
GAMMAGARD87		

GLYCERIN (ADULT) SUPP (Use glycerin (laxative))	67	guaifenesin LIQD	48	HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	63
glycerin (laxative) SUPP 2 GM	67	guaifenesin TB12 1200 MG	48	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	63
glycine diluent	88	guaifenesin TB12 600 MG	48	HEPAGAM B SOLN IJ	87
glycopyrrolate TABS 1 MG, 2 MG	93	guaifenesin-codeine SOLN	47	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	12
GLYNASE (Use glyburide micronized)	20	guaifenesin-codeine SYRP	47	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML	12
GNP EASY TOUCH GLUCOSE TEST STRP	56	guanfacine hcl (adhd)	1	HEPLISAV-B SOSY	95
GNP GLUCOSE 6 MG-4 GM	19	guanfacine hcl	25	HERCEPTIN 150 MG	31
GNP GLUCOSE CHEW	19	GUARDIAN 4 GLUCOSE SENSOR	69	HERCEPTIN HYLECTA	32
GNP PEN NEEDLES	69	GUARDIAN REAL-TIME REPLACE PED	69	HIBERIX SOLR IJ	94
GNP QUICK DISSOLVE GLUCOSE CHEW	19	GYNAZOLE-1	96	HIBICLENS SOLN EX (Use chlorhexidine gluconate)	37
GOCOVRI CP24	35	GYNE-LOTRIMIN 3 CREA (Use clotrimazole vaginal)	96	HIGH POTENCY MULTIVITAMIN TABS	79
GOJJI BLOOD KETONE TEST	56	GYNE-LOTRIMIN CREA (Use clotrimazole vaginal)	96	HIZENTRA SOLN	87
GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	66	HADLIMA PUSHTOUCH SOAJ	3	HIZENTRA SOSY	87
GONAL-F RFF REDIRECT SOPN	58	HADLIMA SOSY	3	homatropine hbr	84
GONAL-F RFF SOLR SC	58	HAEGARDA SOLR SC	64	HUDSON RCI AEROSOL MASK ADULT MISC	71
GONAL-F SOLR IJ	58	HALAVEN (Use eribulin mesylate)	35	HULIO (2 PEN) AJKT	3
GOODSENSE ELECTROLYTE ADV CARE SOLN	75	HALCION 0.25 MG (Use triazolam)	66	HULIO (2 SYRINGE) PSKT	3
GOODSENSE GLUCOSE	19	HALDOL DECANOATE (Use haloperidol decanoate)	36	HUMALOG KWIKPEN SOPN 100 UNIT/ML	19
GOTOKNOW COVID-19 ANTIGEN RAPI KIT	56	haloperidol decanoate	36	HUMALOG SOLN IJ	19
GRANIX SOLN	64	haloperidol lactate CONC	36	HUMATE-P SOLR	63
GRANIX SOSY	64	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG	36	HUMATROPE CART IJ	58
GRAPE SYRUP SYRP	89	haloperidol TABS 20 MG	36	HUMULIN 70/30 KWIKPEN SUPN	19
griseofulvin microsize SUSP	22	HAVRIX	95	HUMULIN 70/30 SUSP	19
griseofulvin microsize TABS	22	HEMATINIC PLUS VIT/MINERALS TABS	65		
griseofulvin ultramicrosize	22				

HUMULIN N KWIKPEN SUPN 19	hydrocortisone (rectal) EX 2.5 % ...8	hyoscyamine sulfate ELIX 93
HUMULIN N SUSP 20	hydrocortisone (topical) CREA 0.5 % 52	HYOSCYAMINE SULFATE POWD 93
HUMULIN R SOLN IJ 20	hydrocortisone (topical) CREA 1 % 52	hyoscyamine sulfate SOLN PO 0.125 MG/ML 93
HYALGAN SOLN 81	hydrocortisone (topical) CREA 2.5 % 52	hyoscyamine sulfate SUBL 0.125 MG 93
HYALGAN SOSY 81	hydrocortisone (topical) LOTN 1 % 52	hyoscyamine sulfate TABS 0.125 MG 93
HYCAMTIN CAPS 35	hydrocortisone (topical) LOTN 2.5 % . 52	hyoscyamine sulfate TB12 0.375 MG 93
HYCODAN SOLN (Use hydrocodone bitartrate-homatropine methylobromide) 46	hydrocortisone (topical) OINT 1 %, 2.5 % 52	hyoscyamine sulfate TBDP 0.125 MG 93
hydralazine hcl TABS 27	hydrocortisone butyrate SOLN 52	HYPERHEP B SOLN IM 87
HYDRALYTE FREEZER POPS SOLN 75	HYDROCORTISONE COMPLETE KIT THPK 52	HYPERRHO S/D SOSY IM 1500 UNIT 87
HYDRALYTE SOLN 75	hydrocortisone TABS 45	HYPERRHO S/D SOSY IM 250 UNIT 87
HYDREA (Use hydroxyurea) 34	hydrocortisone vaginal 97	HYQVIA 88
hydrochlorothiazide CAPS 57	hydrocortisone w/acetic acid 87	HYRIMOZ SOAJ 3
hydrochlorothiazide TABS 25 MG, 50 MG 57	HYDROMORPHONE HCL SUPP ... 6	HYRIMOZ SOSY 20 MG/0.2ML, 40 MG/0.4ML 3
hydrocodone bitartrate-homatropine methylobromide SOLN 46	hydromorphone hcl TABS 2 MG, 4 MG 6	HYRIMOZ-CROHNS/UC STARTER SOAJ 3
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 7	hydromorphone hcl TABS 8 MG 6	HYRONAN KIT 81
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML 7	hydroxychloroquine sulfate 200 MG 28	HY-VEE GLUCOSE 19
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG 7	hydroxyprogesterone caproate (antineoplastic) 31	HYZAAR (Use losartan potassium & hydrochlorothiazide) 26
HYDROCORT LOTION COMPLETE KIT THPK 52	hydroxyprogesterone caproate OIL 89	ibandronate sodium SOLN 58
hydrocortisone (intrarectal) 8	hydroxyurea 34	IBRANCE CAPS 33
hydrocortisone (rectal) EX 1 % 8	hydroxyzine hcl SYRP 9	IBRANCE TABS 33
	hydroxyzine hcl TABS 9	ibuprofen CHEW 4
	hydroxyzine pamoate CAPS 9	ibuprofen lysine 4
	HYMOVIS 81	ibuprofen SUSP 100 MG/5ML, 200

MG/10ML	4	IMITREX TABS (Use sumatriptan succinate)	74	INSULIN GLARGINE-YFGN SOPN	20
ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML	4	IMLYGIC	35	INSULIN LISPRO (1 UNIT DIAL) SOPN	20
ibuprofen TABS 200 MG	4	IMODIUM A-D CAPS (Use loperamide hcl)	21	INSULIN LISPRO JUNIOR KWIKPEN SOPN	20
ibuprofen TABS 400 MG, 600 MG, 800 MG	4	IMODIUM A-D TABS (Use loperamide hcl)	21	INSULIN LISPRO PROT & LISPRO SUPN	20
icatibant acetate SOSY	63	IMOVAX RABIES SUSR	95	INSULIN LISPRO SOLN IJ	20
ICLUSIG	33	IMURAN TABS (Use azathioprine)	76	INSULIN SYRINGES	69
IDELVION	63	INCRELEX	59	INSULIN SYRINGES-MISC	69
IDHIFA	33	INCRUSE ELLIPTA	10	INSUPEN PEN NEEDLES	69
IFE-BIMIX 30/1 SOLN	42	indapamide TABS 1.25 MG, 2.5 MG . 57		INTELENCE 100 MG (Use etravirine)	38
IHEALTH BLOOD GLUCOSE TEST STR STRP	56	INDERAL LA CP24 (Use propranolol hcl)	41	INTELENCE 200 MG (Use etravirine)	38
IHEALTH COVID-19 RAPID TEST KIT	56	INDICAID COVID-19 RAPID TEST KIT	56	INTELENCE 25 MG	38
ILARIS SOLN	4	INDOCIN SUSP (Use indomethacin) . 4		INTELISWAB COVID-19 RAPID TEST KIT	56
ILUMYA	51	indomethacin CAPS 25 MG, 50 MG 4		INTUNIV (Use guanfacine hcl (adhd))	1
ILUVIEN	85	indomethacin sodium	4	INVANZ IJ (Use ertapenem sodium) . 27	
imatinib mesylate TABS	33	INDOMETHACIN SODIUM	4	INVEGA HAFYERA	36
IMBRUVICA CAPS	33	indomethacin SUPP	4	INVEGA SUSTENNA	36
IMBRUVICA TABS	33	indomethacin SUSP	4	INVEGA TRINZA	36
IMCIVREE	1	INFANRIX	92	IOPIDINE	84
IMFINZI	30	INFANTS ADVIL SUSP (Use ibuprofen)	4	IPOL	95
imipramine hcl TABS	17	INLYTA	30	ipratropium bromide (nasal) 0.03 % 81	
imiquimod 5 %	53	INNOSPIRE REPLACEMENT FILTER MISC	71	ipratropium bromide (nasal) 0.06 % 81	
IMITREX 5 MG/ACT, 20 MG/ACT (Use sumatriptan)	74	INQOVI	32	ipratropium bromide SOLN 0.02 % 10	
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (Use sumatriptan succinate)	74	INREBIC	33		
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate)	74	INSULIN GLARGINE-YFGN SOLN			

ipratropium-albuterol SOLN11	IXINITY SOLR 63	KCENTRA63
irbesartan25	JADENU SPRINKLE PACK (Use deferasirox) 21	KEMOPLAT SOLN29
irbesartan-hydrochlorothiazide26	JADENU TABS (Use deferasirox) .21	KEPIVANCE 5.16 MG 34
IRESSA (Use gefitinib)31	JAKAFI 33	KEPIVANCE 6.25 MG 34
irinotecan hcl 35	JANSSEN COVID-19 VACCINE ..95	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)13
IRON CHEWS PEDIATRIC CHEW 65	JEMPERLI30	KEPPRA TABS 1000 MG (Use levetiracetam)13
IRON TABS 28 MG 65	JEVTANA35	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam) 13
ISENTRESS CHEW 100 MG38	JIVI 63	KEPPRA TABS 500 MG (Use levetiracetam)13
ISENTRESS CHEW 25 MG 38	JULUCA38	KEPPRA XR TB24 (Use levetiracetam)13
ISENTRESS HD TABS 38	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG 24	KERALYT GEL (Use salicylic acid) 53
ISENTRESS PACK38	JYNARQUE TABS60	KERALYT GEL53
ISENTRESS TABS 38	JYNARQUE TBPK60	KESIMPTA 90
isoniazid SYRP29	JYNNEOS95	ketoconazole (topical) CREA50
isoniazid TABS29	KADCYLA 30	ketoconazole (topical) SHAM 2 % .50
ISOPTO ATROPINE SOLN84	KALBITOR64	KETONE TEST STRP56
ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate) 9	KALETRA SOLN38	ketorolac tromethamine (ophth) 0.4 %86
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 9	KALETRA TABS 25 MG-100 MG (Use lopinavir-ritonavir)38	ketorolac tromethamine (ophth) 0.5 %86
isosorbide mononitrate TABS9	KALETRA TABS 50 MG-200 MG (Use lopinavir-ritonavir)38	ketorolac tromethamine SOLN IJ 15 MG/ML, 30 MG/ML4
ISOSORBIDE MONONITRATE TABS 9	KALYDECO PACK 13.4 MG, 25 MG, 50 MG, 75 MG 91	KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML 4
isosorbide mononitrate TB249	KALYDECO PACK 5.8 MG91	ketorolac tromethamine TABS4
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG49	KALYDECO TABS91	KETOSTIX STRP56
ISTODAX SOLR (Use romidepsin) 33	KANJINTI 420 MG31	ketotifen fumarate (ophth) 0.035 % 86
ISTURISA 58	KANUMA59	KEVEYIS (Use dichlorphenamide)
ITCH RELIEF CREA50	KAPVAY TB12 (Use clonidine hcl (adhd))1	
itraconazole CAPS22	KAZANO (Use alogliptin-metformin hcl) 18	
IXEMPRA KIT35		
IXIARO 95		

57	KOSELUGO	33	CREA (Use terbinafine hcl (topical))	50	
KEY-E CHEW	98	KOVALTRY	63	LAMISIL AT CREA (Use terbinafine hcl (topical))	50
KEYTRUDA	30	K-PHOS-NEUTRAL (Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic)	76	LAMISIL AT JOCK ITCH CREA (Use terbinafine hcl (topical))	50
KHAPZORY	34	KRINTAFEL	28	lamivudine SOLN	38
KIMMTRAK	30	KROGER GLUCOSE	19	lamivudine TABS 150 MG	38
KINDERLYTE PREMAX SOLN	75	KRYSTEXXA	63	lamivudine TABS 300 MG	38
KINDERLYTE SOLN	75	K-TAB TBCR 10 MEQ (Use potassium chloride)	76	lamivudine-zidovudine	38
KINERET SOSY	4	K-TAB TBCR 20 MEQ (Use potassium chloride)	76	lamotrigine CHEW	13
KINRIX SUSY	92	KUVAN PACK (Use sapropterin dihydrochloride)	59	lamotrigine TABS	13
KISQALI (200 MG DOSE)	33	KUVAN TABS (Use sapropterin dihydrochloride)	59	lamotrigine TB24	13
KISQALI (400 MG DOSE)	33	KYPROLIS	33	LANCETS-MISC	69
KISQALI (600 MG DOSE)	33	labetalol hcl TABS 100 MG	41	LANCING DEVICE-MISC	69
KISQALI FEMARA (200 MG DOSE)	32	labetalol hcl TABS 200 MG, 400 MG	41	lanolin (topical) CREA	54
KISQALI FEMARA (400 MG DOSE)	32	labetalol hcl TABS 300 MG	41	lanolin XX	89
KISQALI FEMARA (600 MG DOSE)	32	lactic acid (ammonium lactate) CREA	53	LANOLIN XX	89
KITABIS PAK (W/ NEBULIZER)		lactic acid (ammonium lactate) LOTN 12 %	53	LANOLOR CREA	54
NEBU 300 MG/5ML (Use tobramycin)	2	lactulose (encephalopathy)	62	LANOXIN SOLN IJ (Use digoxin)	42
KLARON (Use sulfacetamide sodium (acne))	49	lactulose SOLN	67	LANOXIN TABS 125 MCG, 250 MCG (Use digoxin)	42
KLONOPIN TABS (Use clonazepam)	12	LAMICTAL CHEW (Use lamotrigine)	13	lansoprazole CPDR 15 MG	93
KOATE SOLR	63	LAMICTAL TABS (Use lamotrigine)	13	lansoprazole CPDR 30 MG	93
KOATE-DVI SOLR 500 UNIT, 1000 UNIT	63	LAMICTAL XR TB24 (Use lamotrigine)	13	lapatinib ditosylate	33
KOGENATE FS KIT	63	LAMISIL AT ATHLETES FOOT		LASIX TABS (Use furosemide)	57
KOKO PEAK PRO MOUTHPIECE MISC	71			latanoprost SOLN	86
KOMBIGLYZE XR (Use saxagliptin-metformin hcl)	18			LATANOPROST SOLN	86
				LATUDA (Use lurasidone hcl)	36
				LEADER GLUCOSE 6 MG-4 GM	19
				LEADER QUICK DISSOLVE GLUCOSE CHEW	19

leflunomide	5	SOLN PO 1 GM/10ML	59	lidocaine hcl CREA 4 %	53
lenalidomide	76	levocarnitine (metabolic modifiers) TABS	59	lidocaine hcl GEL 2 %	53
LENVIMA (10 MG DAILY DOSE) .	30	levocetirizine dihydrochloride TABS 23		lidocaine OINT 5 %	54
LENVIMA (12 MG DAILY DOSE) .	30	levofloxacin TABS	61	lidocaine-prilocaine CREA	54
LENVIMA (14 MG DAILY DOSE) .	30	levoleucovorin calcium SOLN 250 MG/25ML	34	LIORESAL SOLN IT (Use baclofen) 81	
LENVIMA (18 MG DAILY DOSE) .	30	levoleucovorin calcium SOLR	34	LIORESAL SOLN IT	81
LENVIMA (20 MG DAILY DOSE) .	30	levonorgestrel & eth estradiol TABS 44		liothyronine sodium TABS	92
LENVIMA (24 MG DAILY DOSE) .	30	levonorgestrel (emergency oc) 1.5 MG	45	LIPITOR TABS (Use atorvastatin calcium)	24
LENVIMA (4 MG DAILY DOSE) ..	30	levonorgestrel-eth estradiol (triphasic)	44	liraglutide	19
LENVIMA (8 MG DAILY DOSE) ..	30			lisdexamphetamine dimesylate CAPS 1	
LEQVIO	24			lisdexamphetamine dimesylate CHEW . 1	
LETAIRIS (Use ambrisentan)	43			lisinopril & hydrochlorothiazide 12.5 MG-10 MG, 12.5 MG-20 MG	26
letrozole	31			lisinopril & hydrochlorothiazide 25 MG-20 MG	26
leucovorin calcium TABS	34			lisinopril TABS 2.5 MG	25
LEUKERAN	29			lisinopril TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	25
LEUKINE SOLR IJ	65			LITETOUCH MASK LARGE MISC 71	
leuprolide acetate KIT IJ 1 MG/0.2ML	31			LITETOUCH MASK MEDIUM MISC . 71	
LEUPROLIDE ACETATE- BUPIVACAINE	31			LITETOUCH MASK SMALL MISC .71	
levalbuterol tartrate	11			lithium	36
LEVBID TB12 (Use hyoscyamine sulfate)	93			lithium carbonate CAPS	36
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	13			lithium carbonate TABS	36
levetiracetam TABS 1000 MG	13			lithium carbonate TBCR	36
levetiracetam TABS 250 MG, 750 MG	13			LITHOBID TBCR (Use lithium carbonate)	36
levetiracetam TABS 500 MG	13			LITTLE REMEDIES SALINE SOLN 81	
levetiracetam TB24	13				
levobunolol hcl 0.5 %	84				
levocarnitine (metabolic modifiers)					

LIVMARLI	61	losartan potassium	25	LUPRON DEPOT-PED (3-MONTH) .	59
LIVTENCITY	40	LOSEASONIQUE (Use		lurasidone hcl	36
LMX 4 CREA (Use lidocaine)	54	levonorgestrel-ethinyl estradiol (91-		LUXTURNA	85
LODINE TABS (Use etodolac)	4	day))	44	LYNPARZA TABS	33
LODOSYN (Use carbidopa)	35	LOTENSIN 10 MG, 20 MG (Use		LYSODREN	31
LOHIST-D LIQD	47	benazepril hcl)	25	MACI	81
LOMOTIL TABS (Use diphenoxylate		LOTENSIN 40 MG (Use benazepril		MACROBID (Use nitrofurantoin	
w/ atropine)	21	hcl)	25	monohyd macro)	28
LONGS GLUCOSE	19	LOTENSIN HCT 12.5 MG-10 MG,		MACRODANTIN 50 MG, 100 MG	
LONSURF	32	12.5 MG-20 MG, 25 MG-20 MG (Use		(Use nitrofurantoin macrocrystal) ..	28
loperamide hcl CAPS	21	benazepril & hydrochlorothiazide) .	26	magnesium citrate 1.745 GM/30ML	
loperamide hcl TABS	21	LOTREL 10 MG-5 MG, 20 MG-10		67	
LOPID TABS (Use gemfibrozil)	24	MG, 20 MG-5 MG, 40 MG-10 MG		MAGNESIUM EXTRA STRENGTH	
lopinavir-ritonavir SOLN	38	(Use amlodipine besylate-benazepril		CAPS	75
lopinavir-ritonavir TABS 25 MG-100		hcl)	26	magnesium hydroxide SUSP 7.75 %,	
MG	38	LOTRIMIN AF CREA (Use		400 MG/5ML, 1200 MG/15ML, 2400	
lopinavir-ritonavir TABS 50 MG-200		clotrimazole (topical))	50	MG/30ML	67
MG	38	LOTRIMIN AF JOCK ITCH CREA		magnesium oxide (mg supplement)	
LOPRESSOR TABS 100 MG (Use		(Use clotrimazole (topical))	50	TABS	75
metoprolol tartrate)	41	lovastatin TABS 10 MG, 20 MG ...	24	MAGNESIUM OXIDE -MG	
LOPRESSOR TABS 50 MG (Use		lovastatin TABS 40 MG	24	SUPPLEMENT CAPS	75
metoprolol tartrate)	41	LOVENOX SOLN IJ 300 MG/3ML		magnesium oxide TABS 400 MG ...	9
loratadine & pseudoephedrine TB12 .		(Use enoxaparin sodium)	12	MAGOX 400 TABS (Use magnesium	
47		LOVENOX SOSY (Use enoxaparin		oxide (mg supplement))	76
loratadine & pseudoephedrine TB24 .		sodium)	12	MAKENA OIL (Use	
47		loxapine succinate	36	hydroxyprogesterone caproate) ...	89
loratadine SOLN	23	LUCENTIS SOSY	84	MAKENA SOAJ	89
loratadine TABS	23	LUMAKRAS	33	malathion	54
loratadine TBDP 10 MG	23	LUMIZYME	59	maraviroc TABS 150 MG	38
lorazepam TABS	10	LUMOXITI	30	maraviroc TABS 300 MG	38
LORBRENA	33	LUNG PERFORM PEAK FLOW		MARGENZA	31
losartan potassium &		METER	71	MASK VORTEX/CHILD/FROG ...	71
hydrochlorothiazide	26	LUPKYNIS	76	MASK	
		LUPRON DEPOT-PED (1-MONTH) .	59		

VORTEX/TODDLER/LADYBUG ..71	MEIJER GLUCOSE19	mesna TABS34
MATULANE34	MEKINIST TABS33	MESNEX SOLN (Use mesna)34
MAVYRET PACK40	MEKTOVI33	MESNEX TABS34
MAVYRET TABS40	MELATONIN SUBL2	MESTINON TABS (Use pyridostigmine bromide)28
MAXALT TABS 10 MG (Use rizatriptan benzoate)74	melatonin TABS 3 MG, 5 MG2	MESTINON TBCR (Use pyridostigmine bromide)28
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)74	melatonin TBDP 3 MG2	METADATE CD CPCR (Use methylphenidate hcl)1
MAXITROL OINT (Use neomycin- polymy-dexameth)85	meloxicam TABS4	METAMUCIL FREE & NATURAL POWD (Use psyllium)66
MAXITROL SUSP (Use neomycin- polymy-dexameth)85	melphalan29	METAMUCIL POWD (Use psyllium) . 66
MAXI-TUSS PE LIQD47	melphalan hcl IV29	metformin hcl TABS 500 MG18
MAXI-TUSS PE MAX LIQD47	memantine hcl SOLN 2 MG/ML ...90	metformin hcl TABS 850 MG, 1000 MG18
MAXZIDE TABS (Use triamterene & hydrochlorothiazide)57	memantine hcl TABS90	metformin hcl TB24 500 MG18
MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide)57	MENACTRA94	metformin hcl TB24 750 MG18
meclizine hcl CHEW22	MENOPUR SC58	methadone hcl TABS 10 MG6
meclizine hcl TABS 12.5 MG, 25 MG 22	MENQUADFI94	methadone hcl TABS 5 MG6
MEDROL TABS 4 MG, 8 MG (Use methylprednisolone)45	MENVEO SOLN94	methazolamide TABS57
MEDROL TBPK (Use methylprednisolone)45	MENVEO SOLR94	methenamine mandelate28
medroxyprogesterone acetate (contraceptive) SUSP IM45	meperidine hcl SOLN PO 50 MG/5ML6	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 81.6 MG . 27
medroxyprogesterone acetate (contraceptive) SUSY IM45	meperidine hcl TABS 50 MG6	methimazole TABS92
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG89	MEPHYTON TABS (Use phytonadione)98	methocarbamol TABS 500 MG, 750 MG81
mefloquine hcl28	meprobamate9	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML30
megestrol acetate SUSP31	MEPSEVII59	methotrexate sodium TABS 2.5 MG 30
megestrol acetate TABS31	mercaptopurine SUSP 2000 MG/100ML29	methyldopa TABS25
	mercaptopurine TABS29	
	mesalamine CP2462	
	mesalamine CPDR62	
	mesalamine ENEM62	
	mesalamine TBEC62	
	mesna SOLN34	

methylergonovine maleate TABS ..87	metoprolol succinate TB24 25 MG, 50 MG, 100 MG41	PLUS SOSY IM87
METHYLIN SOLN 10 MG/5ML (Use methylphenidate hcl) 1	metoprolol tartrate TABS 100 MG .41	MICROLIFE DIGITAL PEAK FLOW . 71
METHYLIN SOLN 5 MG/5ML (Use methylphenidate hcl)2	metoprolol tartrate TABS 25 MG, 50 MG 41	midazolam hcl SOLN IJ66
methylphenidate hcl CPCR 2	METROCREAM CREA (Use metronidazole (topical))54	midodrine hcl97
methylphenidate hcl SOLN 10 MG/5ML2	METROLOTION LOTN (Use metronidazole (topical))54	miglustat64
methylphenidate hcl SOLN 5 MG/5ML2	metronidazole (topical) CREA 54	MIGRANAL SOLN NA (Use dihydroergotamine mesylate)74
methylphenidate hcl TABS 10 MG, 20 MG2	metronidazole (topical) GEL 0.75 % 54	MILLIPRED TABS 45
methylphenidate hcl TABS 5 MG ... 2	metronidazole (topical) LOTN 54	MINCORA TABS79
methylphenidate hcl TB24 18 MG, 27 MG, 54 MG2	metronidazole TABS 250 MG, 500 MG27	MINI WRIGHT PEAK FLOW METER71
methylphenidate hcl TB24 36 MG .. 2	metronidazole vaginal96	MINIELITE FILTER
methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG2	metyrosine25	REPLACEMENTS MISC71
methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG2	mexiletine hcl10	MINIPRESS CAPS (Use prazosin hcl) 25
methylprednisolone TABS 4 MG, 8 MG45	MIACALCIN IJ (Use calcitonin (salmon))58	MINIVELLE PTTW (Use estradiol) 61
methylprednisolone TBPk45	MICARDIS (Use telmisartan) 25	minocycline hcl CAPS 92
methyltestosterone TABS8	MICARDIS HCT (Use telmisartan-hydrochlorothiazide)26	minoxidil 10 MG27
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML61	MICATIN CREA (Use miconazole nitrate (topical)) 50	minoxidil 2.5 MG27
metoclopramide hcl TABS61	miconazole nitrate (topical) CREA .50	MIRALAX POWD (Use polyethylene glycol 3350)67
metolazone57	miconazole nitrate vaginal CREA 2 %96	MIRCERA 65
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG26	miconazole nitrate vaginal KIT96	MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))44
metoprolol & hydrochlorothiazide TABS 50 MG-100 MG 26	miconazole nitrate vaginal SUPP 100 MG 97	MIRODERM BIO MATRIX FENESTRAT55
metoprolol succinate TB24 200 MG 41	miconazole nitrate vaginal SUPP 200 MG 97	MIRODERM BIO MATRIX FENESTRAT+55
	MICRHOGAM ULTRA-FILTERED	mirtazapine TABS 15 MG15
		mirtazapine TABS 30 MG15
		mirtazapine TABS 7.5 MG, 45 MG 15
		mirtazapine TBDP 15 MG15

mirtazapine TBDP 30 MG15	(Use miconazole nitrate vaginal) ..97	MUCINEX TB12 (Use guaifenesin) 48
mirtazapine TBDP 45 MG15	MONISTAT CARE INSTANT ITCH	
misoprostol94	RLF (Use hydrocortisone vaginal) 97	MULPLETA65
mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML32	MONJUVI30	MULTI VITAMIN TABS79
MM BLOOD GLUCOSE SYSTEM KIT69	MONOVISC81	MULTI VITAMIN W/D-3 TABS79
MM BLULINK GLUCOSE TEST STRP56	montelukast sodium CHEW10	multiple vitamin TABS79
M-M-R II SOLR95	montelukast sodium PACK10	multiple vitamins w/ iron TABS78
MODERNA COVID-19 BIVAL 6M-5Y95	montelukast sodium TABS10	MULTIPLE VITAMINS W/ MINERALS TABS78
MODERNA COVID-19 BIVALENT 95	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML6	MULTIPLE VITAMINS W/ MINERALS-VARIOUS78
MODERNA COVID-19 VAC (BOOSTER) SUSP95	morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML6	MULTIVITAMIN + FLUORIDE CHEW 0.25 MG, 1 MG79
MODERNA COVID-19 VAC 6M-11Y SUSP96	morphine sulfate SUPP6	MULTIVITAMIN + FLUORIDE CHEW 0.5 MG79
MODERNA COVID-19 VAC 6M-11Y SUSY96	morphine sulfate TABS6	MULTIVITAMIN ADULT TABS79
MODERNA COVID-19 VACC 6M-5Y SUSP96	morphine sulfate TBCR6	MULTIVITAMIN DROPS/IRON SOLN80
MODERNA COVID-19 VACCINE SUSP96	MOTRIN CHILDRENS CHEW (Use ibuprofen)4	MULTIVITAMIN INFANT & TODDLER SOLN PO80
MOI-STIR SOLN78	MOTRIN INFANTS DROPS SUSP (Use ibuprofen)4	MULTIVITAMIN INFANT & TODDLER SOLN80
molindone hcl37	MOUTH KOTE REMINT SOLN78	MULTIVITAMIN TABS79
mometasone furoate CREA52	MOUTH KOTE SOLN78	MULTIVITAMIN/FLUORIDE CHEW 0.25 MG, 1 MG79
mometasone furoate OINT52	moxifloxacin hcl (ophth) SOLN OP 85	MULTIVITAMIN/FLUORIDE CHEW 0.5 MG79
mometasone furoate SOLN52	MOZOBIL (Use plerixafor)65	MULTIVITAMIN/FLUORIDE SOLN 80
MONISTAT 3 COMBINATION PACK KIT (Use miconazole nitrate vaginal) . 97	MS CONTIN TBCR (Use morphine sulfate)6	MULTI-VIT-FLOR CHEW 0.25 MG, 1 MG80
MONISTAT 3 CREA97	MUCINEX D MAX STRENGTH TB12 (Use pseudoephedrine-guaifenesin) . 47	MULTI-VIT-FLOR CHEW 0.5 MG .80
MONISTAT 7 SIMPLY CURE CREA	MUCINEX D TB12 (Use pseudoephedrine-guaifenesin)47	mupirocin calcium (topical)49
	MUCINEX DM TB12 (Use dextromethorphan-guaifenesin) ...47	mupirocin OINT49
	MUCINEX MAXIMUM STRENGTH TB12 (Use guaifenesin)48	

MVASI	30	MG/10ML	21	NEBULIZER MASK ADULT MISC	72
MX-SOL BLEND SF SUSP	89	naloxone hcl SOSY 2 MG/2ML	21	NEBULIZER MASK ADULT/TUBING MISC	71
MX-SOL BLEND SUSP	89	naltrexone hcl	21	NEBULIZER MASK CHILD MISC ..	72
MX-SOL SF SYRP	89	NAMENDA TABS (Use memantine hcl)	90	NEBULIZER MASK PED/TUBING MISC	72
MX-SOL SUSPEND SUSP	89	NAMENDA TITRATION PAK TABS (Use memantine hcl)	90	nefazodone hcl	17
MX-SOL SYRP	89	naphazoline w/ pheniramine 0.315 %-0.027 %	85	NEOMULTIVITE TABS	79
MYALEPT	59	NAPROSYN SUSP (Use naproxen) ..	5	neomycin sulfate TABS	2
MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	29	NAPROSYN TABS 500 MG (Use naproxen)	5	neomycin-bacitracin zn-polymyxin ..	85
MYCOBUTIN (Use rifabutin)	29	naproxen sodium TABS 220 MG ...	5	neomycin-bacitracin-polymyxin OINT 49	
mycophenolate mofetil CAPS	77	naproxen sodium TABS 275 MG, 550 MG	5	neomycin-polymy-dexameth OINT ..	85
mycophenolate mofetil SUSR	77	naproxen SUSP	5	neomycin-polymy-dexameth SUSP 85	
mycophenolate mofetil TABS	77	naproxen TABS	5	neomycin-polymyxin w/ pramoxine 49	
mycophenolate sodium	77	naratriptan hcl	74	neomycin-polymyxin-gramicidin ...	85
MYDRIACYL SOLN (Use tropicamide)	84	NARCAN LIQD (Use naloxone hcl) 21		neomycin-polymyxin-hc (ophth) ...	85
MYFORTIC (Use mycophenolate sodium)	77	NARDIL (Use phenelzine sulfate) ..	16	neomycin-polymyxin-hc (otic) SOLN .	87
MYLERAN TABS	29	NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	82	neomycin-polymyxin-hc (otic) SUSP .	87
MYLICON INFANTS GAS RELIEF SUSP (Use simethicone)	61	NASALCROM (Use cromolyn sodium (nasal))	81	NEOPROFEN (Use ibuprofen lysine)	5
MYSOLINE (Use primidone)	13	nateglinide	20	NEORAL CAPS (Use cyclosporine modified (for microemulsion))	77
NABI-HB SOLN IM	87	NATPARA	58	NEORAL SOLN (Use cyclosporine modified (for microemulsion))	77
nabumetone	4	NATROBA (Use spinosad)	54	NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin) ...	49
nadolol TABS 20 MG, 40 MG, 80 MG	41	NATURAL FIBER LAXATIVE POWD 66		NEOSPORIN PLUS PAIN RELIEF MS (Use neomycin-polymyxin w/ pramoxine)	49
NAGLAZYME	59	NAYZILAM	12		
NALFON CAPS (Use fenoprofen calcium)	4	NEBULIZER AIR TUBE/PLUGS MISC	71		
naloxone hcl LIQD	21				
naloxone hcl SOCT	21				
naloxone hcl SOLN 0.4 MG/ML, 4					

NERLYNX	33	nicardipine hcl CAPS	42	NITROSTAT SUBL (Use nitroglycerin)	9
NESINA (Use alogliptin benzoate) 19		NICODERM CQ PT24 TD (Use nicotine)	91	NITYR TABS	59
NEUPOGEN SOLN	65	NICORETTE GUM (Use nicotine polacrilex)	91	NIVA THYROID TABS	92
NEUPOGEN SOSY	65	NICORETTE LOZG (Use nicotine polacrilex)	91	NIVESTYM SOLN	65
NEURONTIN CAPS (Use gabapentin)	13	NICORETTE MINI LOZG (Use nicotine polacrilex)	91	NIVESTYM SOSY	65
NEURONTIN SOLN (Use gabapentin)	13	NICORETTE STARTER KIT GUM (Use nicotine polacrilex)	91	NIX CREME RINSE LIQD EX (Use permethrin)	54
NEURONTIN TABS 600 MG (Use gabapentin)	13	NICOTINE KIT	91	NIZORAL SHAM	50
NEURONTIN TABS 800 MG (Use gabapentin)	13	nicotine polacrilex GUM	91	NORDITROPIN FLEXPPO SOPN	58
nevirapine SUSP	39	nicotine polacrilex LOZG	91	norelgestromin-ethinyl estradiol ...	44
nevirapine TABS	39	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	91	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	44
nevirapine TB24 100 MG	39	NICOTROL INHA	91	norethindrone & eth estradiol	44
nevirapine TB24 400 MG	39	NICOTROL NS SOLN	91	norethindrone & ethinyl estradiol-fe 44	
NEXAVAR (Use sorafenib tosylate) . 33		nifedipine CAPS	42	norethindrone (contraceptive)	45
NEXIUM 24HR CLEAR MINIS CPDR (Use esomeprazole magnesium) ..	93	nifedipine TB24 30 MG, 90 MG ...	42	norethindrone acet & eth estra TABS 44	
NEXIUM 24HR CPDR (Use esomeprazole magnesium)	93	nifedipine TB24 60 MG	42	norethindrone acetate TABS	89
NEXIUM CPDR 20 MG (Use esomeprazole magnesium)	93	NINLARO	33	norethindrone acetate-ethinyl estradiol	60
NEXVIAZYME	59	nitisinone CAPS	59	norethindrone acetate-ethinyl estradiol-fe	44
niacin (antihyperlipidemic) TABS ..	24	NITRO-BID OINT	9	norethindrone-eth estradiol (triphasic)	44
niacin (antihyperlipidemic) TBCR ..	24	NITRO-DUR PT24 (Use nitroglycerin)	9	norgestimate-ethinyl estradiol (triphasic)	44
niacin CPCR 250 MG, 500 MG	98	nitrofurantoin	28	norgestimate-ethinyl estradiol	44
NIACIN ER CPCR	98	nitrofurantoin macrocrystal 50 MG, 100 MG	28	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	44
NIACIN ER TBCR	98	nitrofurantoin monohyd macro	28	NORPACE CAPS (Use disopyramide phosphate)	10
niacin TABS 500 MG	98	nitroglycerin CPCR	9		
niacin TBCR	98	nitroglycerin PT24	9		
		nitroglycerin SUBL	9		

NORPACE CR CP12 150 MG10	NOVOSEVEN RT63	octreotide acetate SOLN60
NORPRAMIN TABS 10 MG (Use desipramine hcl)17	NP THYROID TABS92	OCUFLOX (Use ofloxacin (ophth)) 85
NORPRAMIN TABS 25 MG (Use desipramine hcl)17	NUBEQA31	ODEFSEY39
NORTHERA (Use droxidopa)97	NULIBRY59	ODOMZO31
nortriptyline hcl CAPS17	NULOJIX77	OFF DEEP WOODS AERO54
nortriptyline hcl SOLN18	NUMOISYN LIQD78	OFF DEEP WOODS DRY AERO 54
NORVASC TABS (Use amlodipine besylate)42	NUPLAZID CAPS36	ofloxacin (ophth)85
NORVIR CAPS39	NUPLAZID TABS 10 MG36	ofloxacin (otic)86
NORVIR TABS (Use ritonavir)39	NUVARING (Use etonogestrel- ethinyl estradiol)44	ofloxacin 400 MG61
NOSE CLIP MISC72	NUWIQ KIT63	OGIVRI31
NOVA MAX PLUS KETONE TEST 56	NUWIQ SOLR63	OHC COVID-19 ANTIGEN SELF TEST KIT56
NOVACHOR55	NYSTATIN (Use nystatin (mouth- throat))77	olanzapine TABS 15 MG, 20 MG ..36
NOVAREL IM58	nystatin (mouth-throat)77	olanzapine TABS 2.5 MG, 5 MG ..36
NOVAVAX COVID-19 VACCINE SUSP96	nystatin (topical) CREA50	olanzapine TABS 7.5 MG, 10 MG ..36
NOVAVAX COVID-19 VACCINE SUSY96	nystatin (topical) OINT50	olmesartan medoxomil25
NOVOLIN 70/30 FLEXPEN RELION SUPN20	nystatin (topical) POWD EX50	olmesartan medoxomil-amlodipine- hydrochlorothiazide26
NOVOLIN 70/30 FLEXPEN SUPN 20	nystatin TABS22	olmesartan medoxomil- hydrochlorothiazide26
NOVOLIN 70/30 RELION SUSP ..20	nystatin-triamcinolone CREA50	OMBRA COMPRESSOR AIR FILTERS MISC72
NOVOLIN 70/30 SUSP20	nystatin-triamcinolone OINT50	omega-3 fatty acids CAPS 1000 MG, 1200 MG83
NOVOLIN N FLEXPEN RELION SUPN20	NYVEPRIA65	omega-3 fatty acids CPDR 1200 MG 83
NOVOLIN N FLEXPEN SUPN20	OASIS ULTRA MATRIX FENESTRATED55	OMEPRAZOLE44
NOVOLIN N RELION SUSP20	OASIS WOUND MATRIX FENESTRATED55	OMEPRAZOLE 20MG TABLET ..93
NOVOLIN N SUSP20	OBIZUR63	omeprazole CPDR94
NOVOLIN R RELION SOLN IJ20	OCALIVA61	omeprazole magnesium TBEC94
NOVOLIN R SOLN IJ20	OCTAGAM SOLN 5 GM/50ML87	OMNICAP TABS79
	OCTAGAM SOLN87	
	octreotide acetate KIT60	

ON/GO COVID-19 ANTIGEN TEST KIT56	ONE-WAY VALVED EXPIRATORY MISC72	ORENITRAM TBCR 42
ON/GO ONE COVID-19 HOME TEST KIT56	ONE-WAY VALVED INSPIRATORY MISC72	ORFADIN CAPS (Use nitisinone) . 59
ONCASPAR34	ONGLYZA (Use saxagliptin hcl) .. 19	ORFADIN SUSP59
ondansetron hcl SOLN PO 4 MG/5ML21	ONPATTRO91	ORKAMBI PACK91
ondansetron hcl TABS 24 MG21	ONUREG TABS30	ORKAMBI TABS91
ondansetron hcl TABS 4 MG, 8 MG 21	OPCON-A (Use naphazoline w/ pheniramine) 85	ORLADEYO64
ondansetron TBDP 16 MG21	OPDIVO30	orphenadrine citrate TB1281
ondansetron TBDP 4 MG, 8 MG ..21	OPDUALAG32	ORTHOVISC81
ONE DAILY ESSENTIAL TABS ...79	OPILL45	oseltamivir phosphate CAPS 30 MG . 40
ONE DAILY ESSENTIALS TABS ..79	ORA-BLEND SF SUSP89	oseltamivir phosphate CAPS 45 MG, 75 MG40
ONE FLOW TESTER MISC 72	ORA-BLEND SUSP89	oseltamivir phosphate SUSR40
ONE VITE DAILY MULTIVITAMIN TABS79	oral electrolytes SOLN75	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (Use alogliptin-pioglitazone) 18
ONE-A-DAY ESSENTIAL TABS (Use multiple vitamin)79	ORAL MIX SF SUSP89	OSTEOCONDUCTIVE MATRIX PLUS55
ONE-A-DAY MENS TABS (Use multiple vitamin)79	ORAL MIX SUSP89	OTEZLA TABS5
ONETOUCH SOLUTIONS STARTER KIT KIT69	ORAL RELIEF SPRAY SOLN78	OTEZLA TBPK5
ONETOUCH ULTRA 2 KIT69	ORAL SUSPEND LIQD89	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML3
ONETOUCH ULTRA BLUE TEST STRP56	ORAL SYRUP SF SYRP89	OVACE PLUS WASH LIQD (Use sulfacetamide sodium)51
ONETOUCH ULTRA MINI KIT69	ORAPENN SD ANHYD SWEETENED LIQD89	OVACE WASH LIQD (Use sulfacetamide sodium)51
ONETOUCH ULTRA STRP56	ORAPENN SD ANHYD UNSWEETEN LIQD89	OVIDE (Use malathion)54
ONETOUCH ULTRA TEST STRP .56	ORA-PLUS LIQD89	OVIDREL SOSY58
ONETOUCH VERIO FLEX SYSTEM KIT69	ORA-SWEET SF SYRP 10 %-9 % 89	OXAYDO TABS 5 MG6
ONETOUCH VERIO REFLECT KIT 69	ORA-SWEET SYRP 4 %-5 %-54 % 89	oxazepam CAPS10
ONETOUCH VERIO STRP56	ORENCIA CLICKJECT SOAJ5	OXBRYTA TABS 500 MG64
	ORENCIA SOLR5	
	ORENCIA SOSY5	

OXBRYTA TBSO	64	PAMIDRONATE DISODIUM SOLN	58	PARNATE (Use tranlycypromine sulfate)	16
oxcarbazepine SUSP	13	PANDA MASK LARGE	72	paroxetine hcl SUSP	16
oxcarbazepine TABS	13	PANDA MASK MEDIUM	72	paroxetine hcl TABS 10 MG	16
OXLUMO	62	PANDA MASK SMALL	72	paroxetine hcl TABS 20 MG	16
oxybutynin chloride TABS	94	PANHEMATIN 350 MG	64	paroxetine hcl TABS 30 MG, 40 MG	16
oxybutynin chloride TB24	94	pantoprazole sodium TBEC 20 MG	94	paroxetine hcl TB24	16
oxycodone hcl CAPS	7	pantoprazole sodium TBEC 40 MG	94	PARSABIV	59
oxycodone hcl CONC 100 MG/5ML	7	PANZYGA	87	PARVA-CAL 200 UNIT-500 MG	75
oxycodone hcl SOLN	7	PARI ALTERA NEBULIZER		PAXIL CR TB24 (Use paroxetine hcl)	16
oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	7	HANDSET MISC	72	PAXIL SUSP (Use paroxetine hcl)	16
oxycodone hcl TABS 30 MG	7	PARI BABY CONVERSION KIT		PAXIL TABS 10 MG (Use paroxetine hcl)	16
oxycodone hcl TABS 5 MG, 10 MG, 15 MG, 20 MG	7	MISC	72	PAXIL TABS 20 MG (Use paroxetine hcl)	16
oxycodone w/ acetaminophen SOLN	7	PARI BUBBLES PEDIATRIC MASK		PAXIL TABS 30 MG, 40 MG (Use paroxetine hcl)	16
oxycodone w/ acetaminophen TABS		MISC	72	PAXLOVID (150/100)	40
325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7	PARI ERAPID NEBULIZER		PAXLOVID (300/100)	40
OXYCONTIN T12A	7	HANDSET MISC	72	pazopanib hcl	33
oyster shell	75	PARI EXPIRATORY FILTER SET		PC PEDIATRIC POLY-VITA/FE	
OYSTER SHELL CALCIUM/D TABS		DEVI	72	DROP SOLN	80
500 MG-200 UNIT	75	PARI MASK SET MISC	72	PC PEDIATRIC POLY-VITAMIN	
OZURDEX IMPL	85	PARI SMARTMASK BABY/ELBOW		DROP SOLN PO	80
PACLITAXEL PROTEIN-BOUND		MISC	72	PCCA SWEET-SF SYRP	89
PART	35	PARI SOFT PLASTIC ADULT MASK		PCCA SYRUP VEHICLE SYRP	89
paclitaxel protein-bound particles	35	MISC	72	PCCA-PLUS SUSP	89
PADCEV	30	PARI SOFT PLASTIC PED MASK		PEAK A-I-R FLOW METER	72
PALYNZIQ	59	MISC	72	PEAK AIR PEAK FLOW METER	72
PAMELOR CAPS (Use nortriptyline hcl)	18	PARI VORTEX ADULT MASK	72	PEAK FLOW METER UNIVERSAL	
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	58	paricalcitol SOLN	59	RANG	72
		PARLODEL CAPS (Use bromocriptine mesylate)	35		
		PARLODEL TABS (Use bromocriptine mesylate)	35		

PED DISPOSABLE MISC	72	PEMAZYRE	33	perphenazine-amitriptyline	90
ped multivitamins w/fl & iron SOLN 79		PEMETREXED 500 MG/20ML	30	PERSERIS PRSY	36
PEDIALYTE ADVANCED CARE SOLN (Use oral electrolytes)	75	pemetrexed disodium SOLR 100 MG, 500 MG	30	PERSONAL BEST FULL RANGE	72
PEDIALYTE FREEZER POPS SOLN (Use oral electrolytes)	75	PEMFEXY	30	PFIZER COVID-19 BIVAL 6MO-4YR	96
PEDIALYTE IMMUNE SUPPORT SOLN	75	PEN NEEDLE/5-BEVEL TIP	69	PFIZER COVID-19 VAC BIVAL 5-11	96
PEDIALYTE SINGLES SOLN (Use oral electrolytes)	75	PEN NEEDLES	69	PFIZER COVID-19 VAC BIVALENT .	96
PEDIALYTE SOLN (Use oral electrolytes)	75	PENBRAYA	94	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	96
PEDIAPRED SOLN (Use prednisolone sodium phosphate) ..	45	penicillamine TABS	76	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	96
PEDIARIX SUSY	92	penicillin v potassium SOLR	88	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	96
PEDIATRIC MOUTHPIECE MISC	72	penicillin v potassium TABS	88	PFIZER-BIONTECH COVID-19 VACC SUSP	96
PEDIATRIC MULTIPLE VITAMINS W/ MINERALS-VARIOUS	79	PENTACEL	92	PFLEX MISC	72
pediatric multivitamins w/fl CHEW 0.25 MG, 1 MG	80	pentoxifylline	64	PHARMACIST CHOICE MASK WIPES MISC	72
pediatric multivitamins w/fl CHEW 0.5 MG	80	PEPCID AC MAXIMUM STRENGTH TABS (Use famotidine)	93	phenazopyridine hcl TABS 100 MG, 200 MG	62
pediatric multivitamins w/fl SOLN ..	80	PEPCID AC TABS (Use famotidine) .	93	phenelzine sulfate	16
PEDIATRIC PANDA MASK	72	PEPCID TABS (Use famotidine) ..	93	phenobarbital ELIX	66
pediatric vitamins acid w/ fluoride SOLN	80	PEPTO-BISMOL CHEW (Use bismuth subsalicylate)	21	phenobarbital TABS	66
PEDVAX HIB SUSP	94	PEPTO-BISMOL MAX STRENGTH SUSP (Use bismuth subsalicylate)	20	phenylephrine hcl (mydriatic) SOLN 2.5 %	84
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	66	PEPTO-BISMOL TO-GO CHEW (Use bismuth subsalicylate)	20	phenylephrine hcl (oral) TABS	82
peg 3350-potassium chloride-sod bicarbonate-sod chloride	66	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	7	PHENYLEPHRINE HCL SOLN (Use phenylephrine hcl (mydriatic))	84
PEGASYS SOLN	40	PERIDEX (Use chlorhexidine gluconate (mouth-throat))	77	phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML	47
PEG-PREP	66	PERJETA	31	phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML	47
		permethrin CREA	54		
		permethrin LIQD EX	54		
		perphenazine TABS	37		

phenylephrine-dm SOLN	47	PIQRAY (200 MG DAILY DOSE) .	33	polysaccharide iron complex CAPS	65
phenylephrine-shark liver oil-cocoa butter	8	PIQRAY (250 MG DAILY DOSE) .	33	POLYTRIM (Use polymyxin b-trimethoprim)	85
phenylephrine-shark liver oil-mineral oil-petrolatum	8	PIQRAY (300 MG DAILY DOSE) .	33	POLY-VI-FLOR CHEW 0.25 MG, 1 MG	80
phenytoin CHEW	14	pirfenidone CAPS	92	POLY-VI-FLOR CHEW 0.5 MG ...	80
phenytoin sodium extended 100 MG .	14	pirfenidone TABS	92	polyvinyl alcohol 1.4 %	83
phenytoin sodium SOLN	14	piroxicam CAPS	5	POLY-VI-SOL SOLN PO	80
phenytoin SUSP	14	PLAN B ONE-STEP (Use levonorgestrel (emergency oc)) ...	45	POLY-VITA SOLN PO	80
PHESGO	32	PLAQUENIL (Use hydroxychloroquine sulfate)	28	POLY-VITA/IRON SOLN	80
PHOTOFIN	34	PLAVIX 75 MG (Use clopidogrel bisulfate)	64	POLY-VITE PEDIATRIC SOLN PO	80
PHOTREXA-PHOTREXA VISCOUS KIT	85	PLEGRIDY SOAJ	91	POLY-VITE/IRON SOLN	80
phytonadione TABS 5 MG	98	PLEGRIDY SOSY IM	91	POMALYST	32
PIFELTRO	39	PLEGRIDY STARTER PACK SOAJ .	91	PORTRAZZA	31
PIKO 1	72	PLEGRIDY STARTER PACK SOSY SC	91	pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	76
PILLOW MASK/ADULT MISC	72	PLENITY	1	potassium bicarbonate TBEF	76
PILLOW MASK/CHILD MISC	72	PLENITY WELCOME KIT	1	potassium chloride CPCR 10 MEQ	76
PILLOW MASK/PEDIATRIC MISC	72	plerixafor	65	potassium chloride CPCR 8 MEQ .	76
pilocarpine hcl (oral) 5 MG	78	PNEUMOVAX 23 SOLN	94	potassium chloride microencapsulated crystals er	76
pilocarpine hcl SOLN 1 %, 2 %, 4 % .	84	PNEUMOVAX 23 SOSY	94	potassium chloride PACK PO 20 MEQ	76
PILOT COVID-19 AT-HOME TEST KIT	56	POCKET PEAK FLOW METER ..	73	potassium chloride SOLN PO 10 %, 20 %, 10 %	76
pimecrolimus	53	POCKETPEAK PEAK FLOW METER	73	potassium chloride TBCR 8 MEQ, 10 MEQ	76
PIN RID CHEW	9	podofilox SOLN	53	potassium citrate (alkalinizer) TBCR .	62
pindolol TABS	41	POLIVY	30	POTELIGEO	30
pioglitazone hcl	20	POLYCOSE LIQD	83	PRADAXA CAPS (Use dabigatran	
pioglitazone hcl-metformin hcl TABS .	18	POLYCOSE POWD	83		
PIP BLOOD GLUCOSE TEST STRIP STRP	56	polyethylene glycol 3350 POWD ..	67		
		polymyxin b-trimethoprim	85		

etexilate mesylate)12	PREMPHASE60	PRIALT6
pralatrexate30	PREMPRO60	PRILOSEC OTC TBEC (Use omeprazole magnesium)94
PRALUENT SOAJ24	PRENATAL VITAMINS-MISC80	PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)28
pramipexole dihydrochloride TABS 35	PREVACID 24HR CPDR (Use lansoprazole)94	primaquine phosphate TABS28
pramoxine-hc-chloroxylenol87	PREVACID CPDR 30 MG (Use lansoprazole)94	primidone13
prasugrel hcl64	PREVIDENT 5000 BOOSTER PLUS PSTE DT (Use sodium fluoride (dental))77	PRIORIX SUSR96
pravastatin sodium24	PREVIDENT 5000 DRY MOUTH GEL (Use sodium fluoride (dental)) 77	PRISTIQ 100 MG (Use desvenlafaxine succinate)17
prazosin hcl CAPS25	PREVIDENT 5000 KIDS PSTE DT (Use sodium fluoride (dental))77	PRISTIQ 25 MG, 50 MG (Use desvenlafaxine succinate)17
PRECISION XTRA KETONE56	PREVIDENT 5000 ORTHO DEFENSE PSTE DT (Use sodium fluoride (dental))78	PRIVIGEN SOLN 10 GM/100ML, 20 GM/200ML, 40 GM/400ML87
PRED FORTE (Use prednisolone acetate (ophth))86	PREVIDENT 5000 PLUS CREA (Use sodium fluoride (dental))78	PRIVIGEN SOLN 5 GM/50ML87
PRED MILD86	PREVIDENT GEL (Use sodium fluoride (dental))78	PROAIR RESPIClick AEPB11
prednisolone acetate (ophth)86	PREVNAR 1394	probenecid63
PREDNISOLONE ACETATE P-F86	PREVNAR 2094	PROCARDIA XL TB24 30 MG, 90 MG (Use nifedipine)42
PREDNISOLONE SODIUM PHOSPHATE86	PREVYMIS SOLN40	PROCARDIA XL TB24 60 MG (Use nifedipine)42
prednisolone sodium phosphate SOLN 20 MG/5ML45	PREVYMIS TABS40	prochlorperazine37
prednisolone sodium phosphate SOLN45	PREZCOBIX39	prochlorperazine maleate TABS ...37
prednisolone SOLN45	PREZISTA SUSP39	PROCRIT65
prednisolone TABS45	PREZISTA TABS 150 MG39	PROCYSBI CPDR62
PREDNISONE INTENSOL CONC45	PREZISTA TABS 600 MG (Use darunavir)39	PROCYSBI PACK62
prednisone SOLN45	PREZISTA TABS 75 MG39	PROFILNINE63
prednisone TABS45	PREZISTA TABS 800 MG (Use darunavir)39	progesterone CAPS 100 MG90
prednisone TBPk45		progesterone CAPS 200 MG89
PREFERRED PLUS GLUCOSE ..19		PROGRAF CAPS (Use tacrolimus) 77
PREGNYL IM58		PROGRAF PACK77
PREHEVBRIO96		PROLASTIN-C SOLN91
PREMARIN97		
PREMARIN TABS61		

PROLASTIN-C SOLR	91	pantoprazole sodium)	94	PURE COMFORT FLOW METER ADULT	73
PROLEUKIN	34	PROTOPIC OINT 0.03 % (Use tacrolimus (topical))	53	PURE COMFORT FLOW METER CHILD	73
PROLIA SOSY	58	PROTOPIC OINT 0.1 % (Use tacrolimus (topical))	53	PURE COMFORT PEAK FLOW MISC	73
promethazine & phenylephrine SYRP	47	PROVENTIL HFA AERS (Use albuterol sulfate)	11	PURE COMFORT SAFETY PEN NEEDLE	69
PROMETHAZINE HCL POWD	44	PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate)	90	PURIXAN SUSP 2000 MG/100ML (Use mercaptopurine)	30
promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML	23	PROZAC CAPS 10 MG, 20 MG (Use fluoxetine hcl)	17	PX DAYTIME MULTI-SYMPTOM CAPS	48
promethazine hcl SUPP	23	PROZAC CAPS 40 MG (Use fluoxetine hcl)	17	PX GLUCOSE	19
promethazine hcl TABS	23	pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML 47		PX NITETIME MULTI-SYMPTOM CAPS	48
promethazine w/codeine SOLN	47	pseudoephedrine hcl TABS	82	pyrantel pamoate SUSP	9
promethazine w/codeine SYRP	47	pseudoephedrine hcl TB12	82	pyrazinamide	29
promethazine-dm SYRP	47	pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML .47		pyrethrins-piperonyl butoxide LIQD 54	
promethazine-phenylephrine-codeine	47	pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML	48	pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %	54
PROMETRIUM CAPS 100 MG (Use progesterone)	90	pseudoephedrine-guaifenesin TB12 600 MG-60 MG	48	pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 %	54
PROMETRIUM CAPS 200 MG (Use progesterone)	90	pseudoephedrine-ibuprofen TABS 48		PYRIDIDIUM TABS (Use phenazopyridine hcl)	62
PRONEB ULTRA FILTER SET MISC	73	psyllium CAPS 0.52 GM	66	pyridostigmine bromide TABS 60 MG	28
propafenone hcl TABS	10	psyllium POWD 28.3 %, 30 %, 33 %, 48.57 %, 58.6 %, 100 %	66	pyridostigmine bromide TBCR	28
propranolol hcl CP24	41	psyllium POWD 43 %	66	pyridoxine hcl TABS 25 MG, 50 MG, 100 MG	98
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	41	PTS PANELS EGLU TEST STRP .56		pyrimethamine	28
propranolol hcl TABS	41	PULMICORT SUSP (Use budesonide (inhalation))	11	PYRUKYND TABS	64
propylthiouracil	92	PULMOZYME	91	PYRUKYND TAPER PACK TBPK .64	
PROQUAD SUSR	96	PURAPLY	55	QC CALCIUM 500MG-D3 TABS ..	75
PROSCAR (Use finasteride)	62				
PROTEXT SUSP	55				
PROTONIX TBEC 20 MG (Use pantoprazole sodium)	94				
PROTONIX TBEC 40 MG (Use					

QC TRIACTING DAYTIME CHILDRENS SYRP	48	quinapril-hydrochlorothiazide 12.5 MG-20 MG	26	REBIF TITRATION PACK SOSY ..	91
QINLOCK	33	quinapril-hydrochlorothiazide 25 MG-20 MG	27	REBINYN	63
QUADRACEL SUSP	92	quinidine gluconate TBCR	10	RECLAST SOLN (Use zoledronic acid)	58
QUADRACEL SUSY	92	quinidine sulfate TABS	10	RECOMBINATE SOLR	63
QUARTETTE (Use levonorgestrel-ethinyl estradiol (91-day))	44	QUINTABS TABS	79	RECOMBIVAX HB SUSP	96
QUESTRAN LIGHT POWD (Use cholestyramine light)	24	QVAR REDIHALER 40 MCG/ACT ..	11	RECOMBIVAX HB SUSY	96
QUESTRAN PACK (Use cholestyramine)	24	QVAR REDIHALER 80 MCG/ACT ..	11	RECORLEV	58
QUESTRAN POWD (Use cholestyramine)	24	RA DRY MOUTH SOLN	78	REDITREX SOSY	3
quetiapine fumarate TABS 100 MG, 200 MG	36	RA GLUCOSE	19	REGLAN TABS (Use metoclopramide hcl)	61
quetiapine fumarate TABS 25 MG, 50 MG	36	RABAVERT	96	RELENZA DISKHALER	40
quetiapine fumarate TABS 300 MG, 400 MG	36	RADICAVA ORS STARTER KIT SUSP	82	RELEUKO SOLN	65
QUFLORA PEDIATRIC CHEW 0.25 MG, 1 MG	80	RADICAVA ORS SUSP	82	RELEUKO SOSY	65
QUFLORA PEDIATRIC CHEW 0.5 MG	80	RADICAVA SOLN (Use edaravone) 82		RELEXXII TBCR 18 MG, 27 MG, 54 MG	2
QUFLORA PEDIATRIC SOLN	80	raloxifene hcl	59	RELEXXII TBCR 36 MG	2
QUICK TOUCH BLOOD GLUCOSE KIT	69	ramipril CAPS	25	RELION GLUCOSE	19
QUICK TOUCH BLOOD GLUCOSE TEST STRP	56	RAPAMUNE SOLN (Use sirolimus) 77		RELION GLUCOSE TEST STRIPS STRP	57
QUICK TOUCH INSULIN PEN NEEDLE	69	RAPAMUNE TABS (Use sirolimus) 77		RELION KETONE TEST STRP ...	57
QUICKVUE AT-HOME COVID-19 TEST KIT	57	RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	3	RELPAKX (Use eletriptan hydrobromide)	74
quinapril hcl	25	RAZADYNE ER CP24 (Use galantamine hydrobromide)	90	REMERON SOLTAB TBDP 15 MG (Use mirtazapine)	15
quinapril-hydrochlorothiazide 12.5 MG-10 MG	27	REBIF REBIDOSE SOAJ	91	REMERON SOLTAB TBDP 30 MG (Use mirtazapine)	15
		REBIF REBIDOSE TITRATION PACK SOAJ	91	REMERON SOLTAB TBDP 45 MG (Use mirtazapine)	15
		REBIF SOSY	91	REMERON TABS 15 MG (Use mirtazapine)	15
				REMERON TABS 30 MG (Use mirtazapine)	15

REPATHA PUSHTRONEX SYSTEM SOCT	24	citrate (pulmonary hypertension)) .	43	risedronate sodium TABS 5 MG, 30 MG	58
REPATHA SOSY	24	REVCovi	59	risedronate sodium TBEC	58
REPATHA SURECLICK SOAJ	24	REVLIMID	76	RISPERDAL CONSTA (Use risperidone microspheres)	36
REPEL SPORTSMEN MAX LOTN 54		REYATAZ CAPS 200 MG (Use atazanavir sulfate)	39	RISPERDAL SOLN (Use risperidone)	36
REPLACEMENT AIR FILTER MISC . 73		REYATAZ CAPS 300 MG (Use atazanavir sulfate)	39	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone) 36	
REPLACEMENT FILTERS MISC ..	73	REYATAZ PACK	39	risperidone microspheres	36
RESTORIL 15 MG, 30 MG (Use temazepam)	66	REZUROCK	76	risperidone SOLN	36
RETACRIT	65	RHOGAM ULTRA-FILTERED PLUS SOSY IM	87	risperidone TABS	36
RETEVMO CAPS	33	RHOPHYLAC SOSY IJ	87	risperidone TBDP	36
RETHYMIC	76	RIABNI	30	RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)	2
RETIN-A CREA (Use tretinoin)	49	RIASTAP	63	RITALIN TABS 5 MG (Use methylphenidate hcl)	2
RETIN-A GEL 0.01 % (Use tretinoin) 49		ribavirin (hepatitis c) CAPS	40	ritonavir TABS	39
RETIN-A GEL 0.025 % (Use tretinoin)	49	ribavirin (hepatitis c) TABS 200 MG 40		RITUXAN	30
RETISERT	86	riboflavin TABS	98	RITUXAN HYCELA	32
RETROVIR CAPS (Use zidovudine) . 39		RID COMPLETE LICE ELIMINATION (Use pyrethrins-piperonyl butoxide- permethrin-nit remover)	55	rivastigmine 4.6 MG/24HR, 9.5 MG/24HR	90
RETROVIR SYRP (Use zidovudine) . 39		RID LIQD 4 %-0.33 % (Use pyrethrins-piperonyl butoxide)	55	rivastigmine tartrate CAPS	90
REUSABLE COMFORTSEAL MASK- LRG MISC	73	rifabutin	29	RIXUBIS SOLR	63
REUSABLE COMFORTSEAL MASK- MED MISC	73	rifampin CAPS	29	rizatriptan benzoate TABS	74
REUSABLE COMFORTSEAL MASK- SML MISC	73	RIGHTEST GT333 BLOOD GLUCOSE STRP	57	rizatriptan benzoate TBDP	74
REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) .	43	RIGHTEST GT333 GLUCOSE TEST STRP	57	ROBINUL TABS (Use glycopyrrolate)	93
REVATIO SUSR (Use sildenafil citrate (pulmonary hypertension)) .	43	RILUTEK TABS (Use riluzole)	82	ROBINUL-FORTE TABS (Use glycopyrrolate)	93
REVATIO TABS (Use sildenafil		riluzole TABS	82	ROCALTROL CAPS (Use calcitriol) 60	
		RINVOQ TB24 30 MG, 45 MG	2	roflumilast	10
		risedronate sodium TABS 35 MG .	58		

ROMIDEPSIN SOLN	33	SAMI THE SEAL FILTERS MISC .	73	selenium sulfide LOTN 2.5 %	51
romidepsin SOLR	33	SAMSCA TABS (Use tolvaptan) ...	60	selenium sulfide SHAM 1 %	51
ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG	35	SANDIMMUNE CAPS (Use cyclosporine)	77	SELSUN BLUE CARE MENS MAX STR LOTN (Use selenium sulfide)	51
ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG	35	SANDIMMUNE SOLN IV 50 MG/ML . 77		SELSUN BLUE DAILY LOTN (Use selenium sulfide)	51
rosuvastatin calcium TABS	24	SANDOSTATIN LAR DEPOT KIT (Use octreotide acetate)	60	SELSUN BLUE LOTN (Use selenium sulfide)	51
ROTARIX SUSP	96	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	60	SELSUN BLUE MEDICATED LOTN (Use selenium sulfide)	51
ROTARIX SUSR	96			SELSUN BLUE MOISTURIZING LOTN (Use selenium sulfide)	51
ROTATEQ SOLN	96	SAPHNELO	77	SELZENTRY SOLN	39
ROUGH PIGWEED	2	sapropterin dihydrochloride PACK .	60	SELZENTRY TABS 150 MG (Use maraviroc)	39
ROXICODONE TABS 15 MG (Use oxycodone hcl)	7	sapropterin dihydrochloride TABS .	60	SELZENTRY TABS 25 MG, 75 MG 39	
ROXICODONE TABS 30 MG (Use oxycodone hcl)	7	SARNA LOTN (Use camphor & menthol)	50	SELZENTRY TABS 300 MG (Use maraviroc)	39
ROZLYTREK CAPS	33	SAVELLA TABS	90	SEMGLEE (YFGN) SOLN	20
RUBRACA	33	SAVELLA TITRATION PACK MISC 90		SEMGLEE (YFGN) SOPN	20
RUCONEST	64	SAWYER INSECT REPELLENT LOTN	54	sennosides TABS 8.6 MG	67
rufinamide SUSP	13	saxagliptin hcl	19	sennosides-docusate sodium TABS 66	
rufinamide TABS	14	saxagliptin-metformin hcl	18	SENOKOT S TABS (Use sennosides-docusate sodium)	66
RUKOBIA	39	SCEMBLIX 100 MG	33	SENOKOT TABS (Use sennosides) 67	
RUXIENCE	30	SCEMBLIX 20 MG, 40 MG	33	SENSIPAR (Use cinacalcet hcl) ..	60
RYDAPT	33	SCHOOLTIME SHAMPOO SHAM	55	SEREVENT DISKUS	12
RYLAZE	34	SCOT-TUSSIN DM LIQD	48	SEROQUEL TABS 100 MG, 200 MG (Use quetiapine fumarate)	36
RYPLAZIM	64	SCOT-TUSSIN SENIOR LIQD	48	SEROQUEL TABS 25 MG, 50 MG (Use quetiapine fumarate)	37
SABRIL PACK (Use vigabatrin) ...	14	SEASONIQUE (Use levonorgestrel- ethinyl estradiol (91-day))	44		
SABRIL TABS (Use vigabatrin)	14	selegiline hcl CAPS	35		
SALAGEN 5 MG (Use pilocarpine hcl (oral))	78	selegiline hcl TABS	35		
salicylic acid GEL 6 %	53	selenium sulfide LOTN 1 %	51		
SALINE NASAL SPRAY 0.65% ..	81				
salsalate	6				

SEROQUEL TABS 300 MG, 400 MG (Use quetiapine fumarate)	37	silver sulfadiazine	51	SMART SENSE GLUCOSE	19
SEROSTIM SC 4 MG, 5 MG, 6 MG 58		simethicone CHEW 80 MG	61	SOAANZ TABS 20 MG	57
sertraline hcl CONC	17	simethicone LIQD PO	61	sodium bicarbonate (antacid) TABS 325 MG, 650 MG	9
sertraline hcl TABS 100 MG	17	simethicone SUSP	61	sodium chloride (gu irrigant) 0.9 %	62
sertraline hcl TABS 25 MG, 50 MG 17		SIMLANDI (1 PEN) AJKT	3	sodium chloride (inhalant) AERS ..	48
SEVENFACT	63	SIMLANDI (2 PEN) AJKT	3	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %	48
SFROWASA ENEM	62	SIMLANDI (2 SYRINGE) PSKT 40 MG/0.4ML	3	SODIUM CHLORIDE 0.9 %	62
SHEEP SORREL-YELLOW DOCK IJ	2	SIMPLYTHICK	88	sodium citrate & citric acid	62
SHINGRIX	96	SIMPLYTHICK EASY MIX	88	sodium fluoride (dental) CREA	78
SIDESTREAM ADULT FACE MASK MISC	73	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	24	sodium fluoride (dental) GEL	78
SIDESTREAM PEDIATRIC FACE MASK MISC	73	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa- levodopa)	35	sodium fluoride (dental) PSTE DT .	78
SIDESTREAM PLS ADULT FACE MASK MISC	73	SINGULAIR CHEW (Use montelukast sodium)	10	sodium fluoride CHEW	75
SIGNIFOR	60	SINGULAIR PACK (Use montelukast sodium)	10	sodium fluoride SOLN	75
SIGNIFOR LAR	60	SINGULAIR TABS (Use montelukast sodium)	10	sodium phenylbutyrate POWD	60
SIKLOS TABS	64	sirolimus SOLN	77	sodium phenylbutyrate TABS	60
sildenafil citrate (pulmonary hypertension) SOLN	43	sirolimus TABS	77	sodium phosphates ENEM	67
sildenafil citrate (pulmonary hypertension) SUSR	43	SITAGLIPTIN	19	sodium polystyrene sulfonate POWD 77	
sildenafil citrate (pulmonary hypertension) TABS	43	SITAGLIPTIN BASE-METFORMIN HCL TABS	18	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	77
SILICONE MASK/ADULT MISC ...	73	SIVEXTRO TABS	28	sodium sulfate-potassium sulfate- magnesium sulfate	66
SILICONE MASK/INFANT MISC ..	73	SKYRIZI (150 MG DOSE) PSKT ..	51	SOFOSBUVIR-VELPATASVIR TABS	40
SILICONE MASK/PEDIATRIC MISC .	73	SKYRIZI PEN SOAJ	51	SOLESTA	76
		SKYRIZI SOSY	51	SOLQUA	18
SILVADENE (Use silver sulfadiazine)	51	SLO-NIACIN TBCR (Use niacin) ..	98	SOLUVITA ACD WITH FLUORIDE SOLN	80
		SM GLUCOSE	19	SOLUVITA SOLN	75
		SM IPECAC SYRUP	21	SOLUVITA WITH FLUORIDE SOLN .	80

SOMAVERT	58	SPIRIVA HANDIHALER CAPS (Use tiotropium bromide monohydrate) .	10	(Use buprenorphine hcl-naloxone hcl dihydrate)	8
SOOTHENEB NBL 100 ADULT MASK MISC	73	spironolactone & hydrochlorothiazide	57	sucrafate SUSP	93
SOOTHENEB NBL 100 CHILD MASK MISC	73	spironolactone TABS	57	sucrafate TABS	93
SOOTHENEB NBL 100 MED CUP MISC	73	SPORANOX CAPS (Use itraconazole)	22	SUDAFED CHILDRENS LIQD	82
SOOTHENEB NBL 100 MESH CAP MISC	73	SPRAVATO (56 MG DOSE)	16	SUDAFED PE CHILDRENS SOLN	82
sorafenib tosylate	33	SPRAVATO (84 MG DOSE)	16	SUDAFED PE SINUS CONGESTION TABS (Use phenylephrine hcl (oral))	82
SORBITOL PO 70 %	67	SPRYCEL (Use dasatinib)	33	SUDAFED SINUS CONGESTION TABS (Use pseudoephedrine hcl) .	82
SORREL/DOCK MIX IJ	2	STAMARIL SUSR	96	SUDAFED TABS (Use pseudoephedrine hcl)	82
SOSWEET SYRP	89	stavudine CAPS	39	sulfacetamide sodium (acne)	49
sotalol hcl (afib/afl)	41	STELARA 130 MG/26ML	62	sulfacetamide sodium (ophth) OINT	85
sotalol hcl TABS 240 MG	41	STELARA SOSY	51	sulfacetamide sodium (ophth) SOLN .	85
sotalol hcl TABS 80 MG, 120 MG, 160 MG	41	STERILE DILUENT FLOLAN PH 12 .	89	sulfacetamide sodium LIQD	51
SOVALDI TABS	40	STERILE DILUENT FOR REMODULIN (Use glycine diluent)	89	sulfacetamide sodium w/ sulfur LOTN	49
SOVUNA 200 MG	28	STIVARGA	33	sulfacetamide sodium w/ sulfur SUSP	49
SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES	73	STRATTERA (Use atomoxetine hcl)	1	10 %-5 %	49
SPACER/AEROSOL-HOLDING CHAMBERS	73	STRENSIQ	60	sulfacetamide sod-prednisolone SOLN	86
SPACERS AND BREATHING CHAMBERS-MISC	73	STRESS FORMULA/ZINC/ENERGY TABS	79	sulfamethoxazole-trimethoprim SUSP	27
SPEEDY SWAB COVID-19 ANTIGEN KIT	57	STRIBILD	39	sulfamethoxazole-trimethoprim TABS	27
SPIKEVAX COVID-19 VACCINE SUSP	96	STRIVE DUAL ZONE PEAK FLOW MTR	73	sulfasalazine TABS	62
SPIKEVAX SUSP	96	SUBLOCADE SOSY	8	sulfasalazine TBEC	62
SPIKEVAX SUSY	96	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	8	sulindac TABS	5
spinosad	55	SUBOXONE FILM SL 3 MG-12 MG		sumatriptan	74
SPINRAZA	82				

sumatriptan succinate SOAJ 6 MG/0.5ML74	SUTENT (Use sunitinib malate) ...33	TABS43
sumatriptan succinate SOCT 6 MG/0.5ML74	SYLVANT77	TAFINLAR CAPS33
sumatriptan succinate SOLN 6 MG/0.5ML74	SYMBICORT (Use budesonide- formoterol fumarate dihydrate)12	TAGAMET HB 200 TABS (Use cimetidine)93
sumatriptan succinate TABS74	SYMDEKO92	TAGAMET HB TABS (Use cimetidine)93
sunitinib malate33	SYMFI (Use efavirenz-lamivudine- tenofovir disoproxil fumarate)39	TAGRISSE31
SUPARTZ FX SOSY81	SYMFI LO (Use efavirenz- lamivudine-tenofovir disoproxil fumarate)39	TAKHZYRO SOLN64
SUPER BI-MIX SOLR42	SYNAGIS SOLN88	TAKHZYRO SOSY64
SUPER TRI-MIX SOLR42	SYNAREL59	TALTZ SOAJ51
SUPPRELIN LA59	SYNOJOYNT SOSY81	TALTZ SOSY51
SUPRAX CAPS (Use cefixime) ...44	SYNRIBO34	TALZENNA33
SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate- magnesium sulfate)67	SYNTHROID TABS (Use levothyroxine sodium)92	TAMIFLU CAPS 30 MG (Use oseltamivir phosphate)40
SURE COMFORT PEN NEEDLES 69	SYNVISC ONE SOSY81	TAMIFLU CAPS 45 MG, 75 MG (Use oseltamivir phosphate)40
SUSPENDIT ANHYDROUS SUSP 89	SYNVISC SOSY81	TAMIFLU SUSR (Use oseltamivir phosphate)40
SUSPENDRX W/BITTERBLOC SWEET SUSP89	SYPRINE (Use trientine hcl)76	tamoxifen citrate TABS31
SUSPENDRX W/BITTERBLOC UNSWEET SUSP89	SYRPALTA (RED) SYRP89	tamsulosin hcl62
SUSPENSION VEHICLE SUSP ...89	SYRPALTA SYRP89	TARCEVA (Use erlotinib hcl)31
SUSTIVA CAPS 200 MG (Use efavirenz)39	SYRSPEND SF LIQD89	TARGRETIN (Use bexarotene (topical))50
SUSTIVA CAPS 50 MG (Use efavirenz)39	SYRUP VEHICLE SF SYRP89	TARGRETIN (Use bexarotene) ...34
SUSVIMO (IMPLANT 1ST FILL) SOLN84	SYRUP VEHICLE SYRP89	TARPEYO CPDR46
SUSVIMO (IMPLANT REFILL) SOLN84	TAB-A-VITE/IRON/BETA CAROTENE TABS78	TASIGNA33
SUSVIMO OCULAR IMPLANT ...69	TABLOID30	TAVNEOS64
	TABRECTA33	tazarotene CREA51
	tacrolimus (topical) OINT 0.03 % ..53	tazarotene GEL51
	tacrolimus (topical) OINT 0.1 % ...53	TAZORAC CREA (Use tazarotene) 51
	tacrolimus CAPS77	TAZORAC GEL (Use tazarotene) .51
	tadalafil (pulmonary hypertension)	

TAZVERIK	33	TEPADINA (Use thiotepa)	29	theophylline TB24	12
TDVAX SUSP	92	TEPEZZA	59	THERA TABS	79
TECARTUS	31	terazosin hcl	25	THEREMS TABS	79
TECENTRIQ	30	terbinafine hcl (topical) CREA	50	thiamine hcl TABS	98
TECFIDERA CDPK (Use dimethyl fumarate)	91	terbinafine hcl TABS	22	thiamine mononitrate TABS 100 MG .	98
TECFIDERA CPDR (Use dimethyl fumarate)	91	terbutaline sulfate TABS	12	THIOLA EC TBEC (Use tiopronin) .	62
TECHLITE PLUS PEN NEEDLES	70	terconazole vaginal CREA	97	THIOLA TABS (Use tiopronin)	62
TEGLUTIK SUSP	82	terconazole vaginal SUPP	97	thioridazine hcl	37
TEGRETOL SUSP (Use carbamazepine)	14	teriflunomide	91	thiotepa	29
TEGRETOL TABS (Use carbamazepine)	14	teriparatide SOPN	58	thiothixene	37
TEGRETOL-XR TB12 (Use carbamazepine)	14	TERIPARATIDE SOPN	58	THRESHOLD IMT MISC	73
TEGSEDI	91	TESTOPEL PLLT	8	THROMBATE III	64
telmisartan	25	testosterone cypionate SOLN IM 100 MG/ML	8	THYMOGLOBULIN	77
telmisartan-amlodipine	27	testosterone cypionate SOLN IM 200 MG/ML	8	THYROGEN 0.9 MG	55
telmisartan-hydrochlorothiazide ...	27	testosterone enanthate SOLN IM ...	8	THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	92
temazepam 15 MG, 30 MG	66	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	92	tiagabine hcl	14
TEMODAR SOLR	29	tetrabenazine	90	TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (Use diltiazem hcl extended release beads)	42
temozolomide CAPS	29	tetracaine hcl (ophth)	85	TIAZAC 240 MG (Use diltiazem hcl extended release beads)	42
TEMPO WELCOME KIT	69	tetracycline hcl CAPS 500 MG	92	TIBSOVO	33
temsirolimus	33	tetrahydrozoline hcl (ophth) 0.05 % 85		TICOVAC	96
TENIVAC INJ	92	TEZSPIRE SOSY	10	TIGLUTIK SUSP	82
tenofovir disoproxil fumarate TABS 39		TGT GLUCOSE	19	TIKOSYN (Use dofetilide)	10
TENORETIC 100 (Use atenolol & chlorthalidone)	27	THALOMID	76	timolol maleate (ophth) SOLN	84
TENORETIC 50 (Use atenolol & chlorthalidone)	27	THEO-24 CP24	12	timolol maleate TABS	41
TENORMIN TABS (Use atenolol) .	41	theophylline ELIX	12	TIMOPTIC OCUDOSE SOLN (Use timolol maleate (ophth))	84
		theophylline SOLN	12	TIMOPTIC SOLN (Use timolol	
		theophylline TB12	12		

maleate (ophth)) 84	(Use topiramate) 14	43
TINACTIN CREA (Use tolnaftate) . 50	TOPAMAX TABS 100 MG (Use topiramate) 14	TRACLEER TBSO 43
tioconazole vaginal 6.5 % 97	TOPAMAX TABS 200 MG (Use topiramate) 14	tramadol hcl TABS 50 MG 7
tiopronin TABS 62	TOPAMAX TABS 25 MG, 50 MG (Use topiramate) 14	tramadol-acetaminophen 7
tiopronin TBEC 62	TOPAMAX TABS 25 MG, 50 MG (Use topiramate) 14	trandolapril 1 MG, 2 MG 25
tiotropium bromide monohydrate CAPS 10	TOPICORT CREA 0.05 % (Use desoximetasone) 52	trandolapril 4 MG 25
TIVDAK 30	TOPICORT CREA 0.25 % (Use desoximetasone) 52	trandolapril-verapamil hcl 27
TIVICAY TABS 50 MG 39	TOPICORT GEL (Use desoximetasone) 52	tranexamic acid TABS 65
tizanidine hcl TABS 81	TOPICORT OINT 0.25 % (Use desoximetasone) 52	tranylcypromine sulfate 16
TM-DAILY VITE TABS 79	topiramate CPSP 15 MG 14	TRAZIMERA 31
TOBI NEBU (Use tobramycin) 2	topiramate CPSP 25 MG 14	trazodone hcl TABS 300 MG 17
TOBI PODHALER CAPS 2	topiramate TABS 100 MG 14	trazodone hcl TABS 50 MG, 100 MG, 150 MG 17
TOBRADEX OINT 86	topiramate TABS 200 MG 14	TREANDA SOLR (Use bendamustine hcl) 29
TOBRADEX SUSP (Use tobramycin-dexamethasone) 86	topiramate TABS 25 MG, 50 MG .. 14	TRECTOR 29
tobramycin (ophth) SOLN 85	TOPOTECAN HCL SOLN (Use topotecan hcl) 35	TREMFYA SOAJ 100 MG/ML 51
tobramycin NEBU 2	topotecan hcl SOLN 35	TREMFYA SOSY 100 MG/ML 51
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML 2	TOPOTECAN HCL SOLN 35	tretinoin (chemotherapy) 34
tobramycin sulfate SOLR 2	topotecan hcl SOLR 35	tretinoin CREA 0.025 %, 0.05 %, 0.1 % 49
tobramycin-dexamethasone SUSP 86	TOPROL XL TB24 200 MG (Use metoprolol succinate) 41	tretinoin GEL 0.01 % 49
TOBREX OINT 85	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate) 41	tretinoin GEL 0.025 % 49
tolnaftate CREA 50	toremifene citrate 31	TRETEN 63
tolterodine tartrate CP24 94	TORISEL (Use temsirolimus) 33	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG 30
tolterodine tartrate TABS 94	torsemide TABS 57	triamcinolone acetonide (mouth) .. 78
tolvaptan TABS 60	TRACLEER TABS (Use bosentan)	triamcinolone acetonide (nasal) AERO 82
TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate) 14		triamcinolone acetonide (topical) CREA 52
TOPAMAX SPRINKLE CPSP 25 MG		triamcinolone acetonide (topical)

LOTN	52	TRIPTODUR	59	TUMS LASTING EFFECTS CHEW (Use calcium carbonate (antacid)) ..	9
triamcinolone acetonide (topical) OINT 0.025 %	52	TRISENOX (Use arsenic trioxide) ..	34	TUMS ULTRA 1000 CHEW (Use calcium carbonate (antacid))	9
triamcinolone acetonide (topical) OINT 0.1 %, 0.5 %	52	TRIUMEQ TABS	39	TURALIO 125 MG	33
TRIAMINIC COLD/COUGH DAY TIME SYRP	48	TRIVISC SOSY	81	TWINRIX SUSY	96
TRIAMINIC LONG ACTING COUGH LIQD (Use dextromethorphan hbr) ..	46	TRIZIVIR	39	TYBLUME CHEW	44
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	57	TROGARZO	39	TYBOST	39
triamterene & hydrochlorothiazide TABS	57	tropicamide SOLN	84	TYKERB (Use lapatinib ditosylate) 33	
triazolam	66	trosipium chloride TABS	94	TYLENOL CHILDRENS CHEWABLES CHEW (Use acetaminophen)	5
TRIBENZOR (Use olmesartan medoxomil-amlodipine- hydrochlorothiazide)	27	TRUE COMFORT PEN NEEDLES 70		TYLENOL CHILDRENS PAIN + FEVER SUSP (Use acetaminophen) . 5	
TRIDESILON CREA 0.05 % (Use desonide)	53	TRUE COMFORT PRO PEN NEEDLES	70	TYLENOL CHILDRENS SUSP (Use acetaminophen)	5
trientine hcl 250 MG	76	TRUE COMFORT SAFETY PEN NEEDLE	70	TYLENOL EXTRA STRENGTH TABS (Use acetaminophen)	5
trientine hcl 500 MG	76	TRUE METRIX BLOOD GLUCOSE TEST STRP	57	TYLENOL FOR CHILDREN + ADULTS SUSP (Use acetaminophen)	5
TRIESENCE	86	TRUE MULTIVITAMIN TABS	79	TYLENOL INFANTS PAIN+FEVER SUSP (Use acetaminophen)	6
trifluoperazine hcl TABS	37	TRUELYTE SOLN	75	TYLENOL TABS (Use acetaminophen)	6
trifluridine	85	TRUEPLUS GLUCOSE CHEW	19	TYMLOS	58
trihexyphenidyl hcl TABS	35	TRUEPLUS GLUCOSE ON THE GO CHEW	19	TYPHIM VI SOLN	94
TRIKAFTA TBPK	92	TRULICITY	19	TYPHIM VI SOSY	94
TRILEPTAL SUSP (Use oxcarbazepine)	14	TRUMENBA	94	TYVASO REFILL KIT SOLN IN ...	42
TRILEPTAL TABS (Use oxcarbazepine)	14	TRUVADA 200 MG-300 MG (Use emtricitabine-tenofovir disoproxil fumarate)	39	TYVASO SOLN IN	43
TRILURON SOSY	81	TRUXIMA	30	TYVASO STARTER KIT SOLN IN	42
trimethoprim TABS	27	TRUZONE PEAK FLOW METER .	73	ULTIGUARD SAFEPACK PEN NEEDLE	70
TRI-MIX SOLR	42	TUBING/WING TIP MISC	73		
TRINTELLIX	17	TUDORZA PRESSAIR	10		
		TUKYSA	31		
		TUMS CHEW (Use calcium carbonate (antacid))	9		

ULTRA NEB ACCESSORIES KIT	VAGIFEM TABS (Use estradiol	vancomycin hcl SOLR IV 1 GM27
MISC73	vaginal)97	VANCOMYCIN HCL SOLR IV 1 GM .
ULTRATHON INSECT REPELLENT	valacyclovir hcl 1 GM40	28
8 AERO54	valacyclovir hcl 500 MG40	vancomycin hcl SOLR IV 500 MG .27
ULTRATHON INSECT REPELLENT	VALCHLOR50	VANCOMYCIN HCL SOLR IV 500
LOTN54	VALCYTE TABS (Use valganciclovir	MG28
UNIFINE OTC PEN NEEDLES ...70	hcl)40	vancomycin hcl SOLR PO 25
UNIFINE PROTECT PEN NEEDLE .	valganciclovir hcl TABS40	MG/ML, 50 MG/ML, 250 MG/5ML .27
70	VALIUM TABS (Use diazepam) ...10	VANDAZOLE97
UNIFINE SAFECONTROL PEN	valproate sodium SOLN PO 250	VAQTA96
NEEDLE70	MG/5ML, 500 MG/10ML15	varenicline tartrate TABS91
UNISOM SLEEPGELS CAPS (Use	valproic acid CAPS15	varenicline tartrate TBPK91
diphenhydramine hcl (sleep))66	valrubicin32	VARIVAX SUSR96
UNISOM SLEEPTABS (Use	valsartan TABS25	VASERETIC 25 MG-10 MG (Use
doxylamine succinate (sleep))66	valsartan-hydrochlorothiazide27	enalapril maleate &
UNISPEND ANHYDROUS	VALSTAR (Use valrubicin)32	hydrochlorothiazide)27
SWEETENED SUSP89	VALTOCO 10 MG DOSE LIQD13	VASOTEC TABS (Use enalapril
UNISPEND ANHYDROUS	VALTOCO 15 MG DOSE LQPK 7.5	maleate)25
UNSWEETENED SUSP89	MG/0.1ML13	VAXCHORA94
UNITUXIN30	VALTOCO 20 MG DOSE LQPK 10	VAXELIS SUSP92
UP & UP GLUCOSE19	MG/0.1ML13	VAXELIS SUSY92
UPTRAVI SOLR43	VALTOCO 5 MG DOSE LIQD13	VAXNEUVANCE94
UPTRAVI TABS43	VALTrex 1 GM (Use valacyclovir	VECAMEYL27
UPTRAVI TITRATION TBPK43	hcl)40	VECTIBIX 100 MG/5ML, 400
urea CREA 40 %53	VALTrex 500 MG (Use valacyclovir	MG/20ML31
urea LOTN 40 %53	hcl)40	VELCADE SOLR IJ (Use bortezomib)
UROCIT-K 10 TBCR (Use potassium	VALUE PLUS GLUCOSE19	34
citrate (alkalinizer))62	VANCOCIN CAPS 125 MG (Use	VELETRI (Use epoprostenol
UROCIT-K 5 TBCR (Use potassium	vancomycin hcl)27	sodium)43
citrate (alkalinizer))62	VANCOCIN CAPS 250 MG (Use	VEMLIDY40
URSO 250 TABS (Use ursodiol) ...61	vancomycin hcl)27	VENCLEXTA STARTING PACK
ursodiol CAPS61	vancomycin hcl CAPS 125 MG27	TBPK31
ursodiol TABS 250 MG61	vancomycin hcl CAPS 250 MG27	VENCLEXTA TABS31
VABYSMO SOLN84		

venlafaxine hcl CP24 150 MG 17	VIDAZA SUSR (Use azacitidine) ... 30	VITAMIN E CAPS98
venlafaxine hcl CP24 37.5 MG 17	vigabatrin PACK 14	VITAMIN E CHEW98
venlafaxine hcl CP24 75 MG 17	vigabatrin TABS14	VITAMINS ACD-FLUORIDE SOLN 80
venlafaxine hcl TABS 17	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))85	vitamins w/ lipotropics CAPS 80
venlafaxine hcl TB24 150 MG 17	VIIBRYD TABS (Use vilazodone hcl) 17	VITRAKVI CAPS34
venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG 17	VIJOICE TBPk77	VITRAKVI SOLN34
VENTAVIS IN 43	vilazodone hcl TABS17	VIVAGUARD INO TEST STRIPS STRP57
VENTOLIN HFA AERS (Use albuterol sulfate) 12	VILTEPSO82	VIVELLE-DOT PTTW (Use estradiol) 61
verapamil hcl CP24 100 MG, 200 MG42	VIMIZIM 60	VIVIMUSTA SOLN29
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 300 MG, 360 MG ... 42	vincristine sulfate35	VIVITROL 21
VERAPAMIL HCL ER CP24 (Use verapamil hcl)42	VIRACEPT TABS 250 MG39	VIVOTIF94
verapamil hcl TABS42	VIRACEPT TABS 625 MG39	VIZIMPRO31
verapamil hcl TBCR 42	VIREAD POWD39	VOLTAREN ARTHRITIS PAIN GEL EX (Use diclofenac sodium (topical)) . 50
VERELAN CP24 (Use verapamil hcl) 42	VIREAD TABS (Use tenofovir disoproxil fumarate)39	VONJO 34
VERELAN PM CP24 100 MG, 200 MG (Use verapamil hcl)42	VIREAD TABS 150 MG, 200 MG, 250 MG39	VONVENDI63
VERELAN PM CP24 300 MG (Use verapamil hcl)42	VISCO-3 SOSY81	VOQUEZNA94
VERIFINE INSULIN PEN NEEDLE 70	VISINE RED EYE COMFORT (Use tetrahydrozoline hcl (ophth))85	VORAXAZE 34
VERIFINE PLUS PEN NEEDLE .. 70	VISTARIL CAPS (Use hydroxyzine pamoate) 9	VOTRIENT (Use pazopanib hcl) ..34
VERSAFREE SYRP 89	VISTOGARD 21	VOTRIENT 34
VERSAPLUS SYRP 89	VISUDYNE85	VOXZOGO 60
VERZENIO34	VITAMIN D3 LIQD PO 125 MCG/ML . 98	VYNDAMAX43
VIBRAMYCIN CAPS (Use doxycycline hyclate)92	vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG98	VYNDAQEL 43
VICTOZA (Use liraglutide) 19	vitamin e CAPS 100 UNIT, 200 UNIT, 400 UNIT98	VYONDYS 53 82
		VYTORIN (Use ezetimibe- simvastatin) 23
		VYVANSE CAPS1
		VYVANSE CHEW1

VYVGART	76	XERMELO	62	YASMIN 28 (Use drospirenone-ethinyl estradiol)	44
VYXEOS	32	XGEVA SOLN	58	YAZ (Use drospirenone-ethinyl estradiol)	44
WALGREENS GLUCOSE	19	XIAFLEX	76	YERVOY	30
WALGREENS GLUCOSE CHEW ..	19	XIGDUO XR (Use dapagliflozin propanediol-metformin hcl)	18	YF-VAX INJ	96
warfarin sodium TABS	12	XIPERE	86	YONDELIS	29
WELIREG	32	XOLAIR SOAJ	10	YONSA	31
WELLBUTRIN SR TB12 100 MG (Use bupropion hcl)	15	XOLAIR SOLR	10	YUFLYMA (1 PEN) AJKT	3
WELLBUTRIN SR TB12 150 MG (Use bupropion hcl)	15	XOLAIR SOSY	10	YUFLYMA (2 PEN) AJKT	3
WELLBUTRIN SR TB12 200 MG (Use bupropion hcl)	15	XOPENEX HFA (Use levalbuterol tartrate)	12	YUFLYMA (2 SYRINGE) PSKT	3
WELLBUTRIN XL TB24 150 MG (Use bupropion hcl)	15	XOSPATA	34	YUFLYMA-CD/UC/HS STARTER AJKT	4
WELLBUTRIN XL TB24 300 MG (Use bupropion hcl)	15	XPOVIO (100 MG ONCE WEEKLY) 50 MG	32	YUSIMRY	4
white petrolatum-mineral oil	83	XPOVIO (40 MG ONCE WEEKLY) 40 MG	32	YUTIQ	86
WILATE KIT	63	XPOVIO (40 MG TWICE WEEKLY) 40 MG	32	ZADITOR 0.035 % (Use ketotifen fumarate (ophth))	86
WINDMILL TRAINER MISC	73	XPOVIO (60 MG ONCE WEEKLY) 60 MG	32	zaleplon 10 MG	66
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ...	88	XPOVIO (60 MG TWICE WEEKLY) 32		zaleplon 5 MG	66
XALATAN SOLN (Use latanoprost) 86		XPOVIO (80 MG ONCE WEEKLY) 40 MG	32	ZALTRAP	30
XALKORI CAPS	34	XPOVIO (80 MG TWICE WEEKLY) 32		ZANAFLEX TABS 4 MG (Use tizanidine hcl)	81
XANAX TABS (Use alprazolam) ...	10	XTANDI CAPS	31	ZARONTIN CAPS (Use ethosuximide)	14
XELJANZ SOLN	3	XTANDI TABS	31	ZARONTIN SOLN (Use ethosuximide)	14
XELJANZ TABS	3	XURIDEN	60	ZARXIO	65
XELJANZ XR TB24	2	XYNTHA	63	ZAVESCA (Use miglustat)	64
XELODA (Use capecitabine)	30	XYNTHA SOLOFUSE	63	ZEJULA CAPS	34
XEMBIFY	88	XYZAL ALLERGY 24HR TABS (Use levocetirizine dihydrochloride)	23	ZELBORAF	34
XENAZINE (Use tetrabenazine) ..	90			ZEMAIRA SOLR 1000 MG	91
XENLETA TABS	28			ZEMAIRA SOLR 4000 MG	91

ZEMPLAR SOLN (Use paricalcitol) 60	(Use azithromycin)68	ZOLGENSMA 16.6-17.0 KG83
ZEPZELCA29	ZITHROMAX TABS 250 MG (Use azithromycin)68	ZOLGENSMA 17.1-17.5 KG83
ZESTORETIC 12.5 MG-10 MG, 12.5 MG-20 MG (Use lisinopril & hydrochlorothiazide)27	ZITHROMAX TABS 500 MG (Use azithromycin)68	ZOLGENSMA 17.6-18.0 KG83
ZESTORETIC 25 MG-20 MG (Use lisinopril & hydrochlorothiazide) ...27	ZITHROMAX TRI-PAK TABS (Use azithromycin)67	ZOLGENSMA 18.1-18.5 KG83
ZESTRIL TABS 2.5 MG (Use lisinopril)25	ZITHROMAX Z-PAK TABS (Use azithromycin)68	ZOLGENSMA 18.6-19.0 KG83
ZESTRIL TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG (Use lisinopril) 25	ZITUVIMET TABS18	ZOLGENSMA 19.1-19.5 KG83
ZETIA (Use ezetimibe)24	ZITUVIO19	ZOLGENSMA 19.6-20.0 KG83
ZEVALIN Y-9031	ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin)24	ZOLGENSMA 2.6-3.0 KG83
ZIAC (Use bisoprolol & hydrochlorothiazide)27	ZOKINVY77	ZOLGENSMA 20.1-20.5 KG83
ZIAGEN SOLN (Use abacavir sulfate)39	ZOLADEX31	ZOLGENSMA 3.1-3.5 KG83
ZIAGEN TABS (Use abacavir sulfate)39	zoledronic acid CONC58	ZOLGENSMA 3.6-4.0 KG83
zidovudine CAPS39	zoledronic acid SOLN58	ZOLGENSMA 4.1-4.5 KG83
zidovudine SYRP39	ZOLEDRONIC ACID SOLN58	ZOLGENSMA 4.6-5.0 KG83
zidovudine TABS39	ZOLGENSMA 20.6-21.0 KG82	ZOLGENSMA 5.1-5.5 KG83
ZILRETTA SRER46	ZOLGENSMA 10.1-10.5 KG82	ZOLGENSMA 5.6-6.0 KG83
zinc oxide (topical) OINT 20 %54	ZOLGENSMA 10.6-11.0 KG82	ZOLGENSMA 6.1-6.5 KG83
zinc sulfate CAPS76	ZOLGENSMA 11.1-11.5 KG83	ZOLGENSMA 6.6-7.0 KG83
ZINPLAVA88	ZOLGENSMA 11.6-12.0 KG83	ZOLGENSMA 7.1-7.5 KG83
ziprasidone hcl36	ZOLGENSMA 12.1-12.5 KG83	ZOLGENSMA 7.6-8.0 KG83
ZIRABEV30	ZOLGENSMA 12.6-13.0 KG83	ZOLGENSMA 8.1-8.5 KG83
ZITHROMAX PACK68	ZOLGENSMA 13.1-13.5 KG83	ZOLGENSMA 8.6-9.0 KG83
ZITHROMAX SUSR 100 MG/5ML (Use azithromycin)68	ZOLGENSMA 13.6-14.0 KG83	ZOLGENSMA 9.1-9.5 KG83
ZITHROMAX SUSR 200 MG/5ML	ZOLGENSMA 14.1-14.5 KG83	ZOLGENSMA 9.6-10.0 KG83
	ZOLGENSMA 14.6-15.0 KG83	ZOLINZA34
	ZOLGENSMA 15.1-15.5 KG83	zolmitriptan SOLN 5 MG74
	ZOLGENSMA 15.6-16.0 KG83	zolmitriptan TABS74
	ZOLGENSMA 16.1-16.5 KG83	zolmitriptan TBDP74
		ZOLOFT CONC (Use sertraline hcl) 17
		ZOLOFT TABS 100 MG (Use sertraline hcl)17

ZOLOFT TABS 25 MG, 50 MG (Use sertraline hcl)	17	ZYRTEC-D ALLERGY & CONGESTION (Use cetirizine- pseudoephedrine)	48
zolpidem tartrate TABS	66		
ZOMIG SOLN 5 MG (Use zolmitriptan)	74	ZYRTEC-D ALLERGY & SINUS (Use cetirizine-pseudoephedrine) .	48
ZONEGRAN CAPS 25 MG, 100 MG (Use zonisamide)	14	ZYTIGA (Use abiraterone acetate) 32	
zonisamide CAPS	14		
ZORBTIVE SC	59		
ZOVIRAX CREA (Use acyclovir topical)	51		
ZOVIRAX OINT (Use acyclovir topical)	51		
ZUBSOLV SUBL	8		
ZULRESSO	15		
ZYDELIG	34		
ZYKADIA TABS	34		
ZYLOPRIM (Use allopurinol)	63		
ZYNLONTA	31		
ZYPREXA RELPREVV	37		
ZYPREXA TABS 15 MG, 20 MG (Use olanzapine)	37		
ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	37		
ZYPREXA TABS 7.5 MG, 10 MG (Use olanzapine)	37		
ZYRTEC ALLERGY TABS (Use cetirizine hcl)	23		
ZYRTEC CHEW 10 MG (Use cetirizine hcl)	23		
ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (Use cetirizine hcl) .	23		
ZYRTEC CHILDRENS ALLERGY SOLN PO (Use cetirizine hcl)	23		