



mercy care

**Title 19/21 Non-SMI & Non-Title 19/21 SMI
Behavioral Health Drug List**

Updated 05/01/2024

What is the Mercy Care Formulary?

This is a drug list created by Mercy Care. The plan will cover drugs on this list. Some drugs may have coverage rules. If the rules for that drug are met, the plan will cover the drug. Drugs must also be filled at a plan network pharmacy.

Can the Plan's Drug List change?

The plan may add or remove drugs on the list. All drug removals from the formulary will be sent to the state for review before the change is made. Utilizing members and their providers will be notified at least 30 days before a drug is removed from the formulary. All changes to the formulary will be posted on the plan's website.

How do I use the Plan's Formulary?

- **Column #1:** lists the covered drug. Brand drugs are in upper case letters (e.g., DRUG). Generics are in lower case letters (e.g., drug).
- **Column #2:** shows brand drug for the generic; *brand drugs are not covered if generic equivalent is available.*
- **Column #3:** tells you if drug has a need for prior authorization or other restrictions

Drugs are also grouped by drug class. If you know what class your drug is in, please look for that class name in the table of contents. Then look under that page for your drug.

What are generic drugs?

The plan covers both brand and generic drugs. Generic drugs cost less and are approved by the Food and Drug Administration (FDA).

Are Over-The-Counter (OTC) drugs covered?

The plan will cover OTC drugs on the formulary. Some OTC drugs may have coverage rules. If the rules for that OTC drug are met, the plan will cover the OTC drug. Like other drugs, OTC drugs need a prescription from a doctor if they are to be covered by the plan.

Are there Medication Copays?

Refer to member handbook for copay information.

What are some types of coverage rules?

- **Prior Approval (PA):** This means your doctor will need to get approval from the plan first before the drug can be filled at the pharmacy. If it is not approved, the plan will not cover the drug.
- **Quantity Level Limits (QLL):** This means there is a limit on the amount of drug the plan will cover. For example, the plan provides 60 pills in 30 days for some drugs.
- **Step Therapy (ST):** This means you may need to try certain drugs first to treat your condition. After the first drug is tried, the plan will then cover the other drug for that same condition. For example, Drug A and Drug B may treat your condition. The plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then Drug B will be covered.

What if my drug is not on the plan's Formulary?

First, please call your doctor and ask if your drug is covered. If the plan does not cover the drug, then:

- Ask your doctor for a similar drug that is covered.
- Your doctor can ask the plan to cover your drug through the prior approval process.


Definition of Symbols	
F	Formulary
AL	<p>Age Restriction: We require that the appropriate dose of medication based on age (e.g., pediatric and elderly populations) and indication AND dosage requested must be based on national established/recognized guidelines pertaining to the treatment and management of the diagnosis and age for which the medication is being used to treat. OR FDA-approved age limitations.</p> <p>Click this symbol  on the online search tool for more information.</p>
Names in <i>Italics</i>	Generic Drug - We cover both brand and generic drugs. Generic drugs have the same active ingredient formula as a brand name drug. Generic drugs usually cost less than brand name drugs and are rated by the Food and Drug Administration (FDA) to be as safe and effective as brand name drugs.
PA	This means your doctor will need to get approval from us first before the drug can be filled at the pharmacy. If it is not approved, we will not cover the drug.
QLL	This means there is a limit on the amount of drug we will cover. For example, we provide 60 pills in 30 days for some drugs.
ST	This means you may need to try certain drugs first to treat your condition. After the first drug is tried, we will then cover the other drug for that same condition. For example, Drug A and Drug B may treat your condition. We may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then Drug B will be covered.

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Drug Name	Reference	Restrictions
Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant		
*Adhd Agent - Selective Alpha Adrenergic Agonists***		
<i>clonidine hcl er tablet extended release 12 hour 0.1 mg oral</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg, 4 mg</i>	Intuniv	QLL (1 EA per 1 day); AL (Min 6 Years)
*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor***		
<i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	Strattera	QLL (1 EA per 1 day); AL (Min 6 Years)
*Amphetamine Mixtures***		
<i>amphetamine-dextroamphetamine er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	Adderall XR	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	Adderall	QLL (2 EA per 1 day); AL (Min 6 Years)
*Amphetamines***		
<i>dextroamphetamine sulfate oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	Zenzedi	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 30 mg</i>	Zenzedi	QLL (2 EA per 1 day)
<i>lisdexamfetamine dimesylate oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</i>	Vyvanse	QLL (1 EA per 1 day); AL (Min 6 Years)
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	lisdexamfetamine dimesylate	QLL (1 EA per 1 day); AL (Min 6 Years)
*Stimulants - Misc.***		
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	Focalin XR	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	Focalin	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	Metadate CD	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg</i>	Ritalin LA	QLL (1 EA per 1 day); AL (Min 6 Years)

Drug Name	Reference	Restrictions
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg</i>	Concerta	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	Methylin	QLL (10 ML per 1 day); AL (Min 6 Years)
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	Ritalin	QLL (3 EA per 1 day); AL (Min 6 Years)
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER 25 MG/5ML		QLL (5 ML per 1 day); AL (Min 6 Years)
Alternative Medicines		
*Alternative Medicine - Kr's***		
<i>krill oil oral capsule 300 mg</i>	SM MegaKrill	OTC
*Alternative Medicine - Me's***		
<i>melatonin oral tablet 1 mg, 3 mg, 5 mg</i>		OTC
*Alternative Medicine Combinations - Three Ingredients***		
<i>sm omega-3 oral capsule</i>	Super Omega-3	OTC
Analgesics - Opioid		
*Opioid Partial Agonists***		
<i>buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg</i>		PA
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg</i>	Suboxone	
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg</i>		
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML		PA
Antianxiety Agents		
*Antianxiety Agents - Misc.***		
<i>buspirone hcl oral tablet 10 mg, 15 mg, 5 mg, 7.5 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>buspirone hcl oral tablet 30 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml</i>		PA
<i>hydroxyzine hcl oral syrup 10 mg/5ml</i>		QLL (10 ML per 1 day)
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>		QLL (8 EA per 1 day)
<i>hydroxyzine pamoate oral capsule 100 mg, 50 mg</i>		QLL (4 EA per 1 day)
<i>hydroxyzine pamoate oral capsule 25 mg</i>	Vistaril	QLL (4 EA per 1 day)

Drug Name	Reference	Restrictions
*Benzodiazepines***		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	Xanax XR	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg</i>	Xanax	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>alprazolam oral tablet 2 mg</i>	Xanax	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>alprazolam oral tablet dispersible 2 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>clorazepate dipotassium oral tablet 15 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>clorazepate dipotassium oral tablet 3.75 mg, 7.5 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>diazepam oral concentrate 5 mg/ml</i>	diazePAM Intensol	QLL (8 ML per 1 day); AL (Min 6 Years)
<i>diazepam oral solution 5 mg/5ml</i>		QLL (10 ML per 1 day); AL (Min 6 Years)
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	Valium	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>lorazepam oral concentrate 2 mg/ml</i>	LORazepam Intensol	QLL (2 ML per 1 day); AL (Min 6 Years)
<i>lorazepam oral tablet 0.5 mg, 1 mg</i>	Ativan	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>lorazepam oral tablet 2 mg</i>	Ativan	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML		QLL (4 ML per 1 day); AL (Min 6 Years)
Anticonvulsants		
*Anticonvulsants - Benzodiazepines***		
<i>clonazepam oral tablet 0.5 mg, 1 mg</i>	KlonoPIN	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>clonazepam oral tablet 2 mg</i>	KlonoPIN	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>clonazepam oral tablet dispersible 0.125 mg, 0.25 mg</i>		QLL (4 EA per 1 day)

Drug Name	Reference	Restrictions
<i>clonazepam oral tablet dispersible 0.5 mg, 1 mg</i>		QLL (4 EA per 2 days)
<i>clonazepam oral tablet dispersible 2 mg</i>		QLL (2 EA per 1 day)
*Anticonvulsants - Misc.***		
<i>carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg</i>	Carbatrol	
<i>carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg</i>	TEGretol-XR	
<i>carbamazepine oral suspension 100 mg/5ml</i>	TEGretol	
<i>carbamazepine oral tablet 200 mg</i>	Epitol	
<i>carbamazepine oral tablet chewable 100 mg</i>		
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	Neurontin	
<i>gabapentin oral solution 250 mg/5ml</i>	Neurontin	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	Neurontin	
<i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	LaMICtal XR	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	LaMICtal	
<i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>	LaMICtal	
<i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i>	LaMICtal ODT	
<i>oxcarbazepine oral suspension 300 mg/5ml</i>	Trileptal	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	Trileptal	
<i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>	Topamax Sprinkle	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	Topamax	
*Valproic Acid***		
<i>divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg</i>	Depakote ER	
<i>divalproex sodium oral capsule delayed release sprinkle 125 mg</i>	Depakote Sprinkles	
<i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>	Depakote	
<i>valproic acid oral capsule 250 mg</i>		
<i>valproic acid oral solution 250 mg/5ml</i>		

Drug Name	Reference	Restrictions
Antidepressants		
*Alpha-2 Receptor Antagonists (Tetracyclics)***		
<i>mirtazapine oral tablet 15 mg, 30 mg</i>	Remeron	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>mirtazapine oral tablet 45 mg, 7.5 mg</i>		QLL (1 EA per 1 day); AL (Min 6 Years)
<i>mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg</i>	Remeron SolTab	QLL (1 EA per 1 day); AL (Min 6 Years)
*Antidepressants - Misc.***		
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg</i>	Wellbutrin SR	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>	Wellbutrin XL	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>maprotiline hcl oral tablet 25 mg, 50 mg, 75 mg</i>		AL (Min 6 Years)
*Gaba Receptor Modulator - Neuroactive Steroid***		
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG		PA
*Selective Serotonin Reuptake Inhibitors (Ssris)***		
<i>citalopram hydrobromide oral solution 10 mg/5ml</i>		QLL (20 ML per 1 day); AL (Min 6 Years and Max 12 Years)
<i>citalopram hydrobromide oral tablet 10 mg</i>	CeleXA	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>citalopram hydrobromide oral tablet 20 mg, 40 mg</i>	CeleXA	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>escitalopram oxalate oral tablet 10 mg, 20 mg</i>	Lexapro	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>escitalopram oxalate oral tablet 5 mg</i>	Lexapro	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>fluoxetine hcl oral capsule 10 mg, 40 mg</i>	PROzac	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>fluoxetine hcl oral capsule 20 mg</i>	PROzac	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>fluoxetine hcl oral solution 20 mg/5ml</i>		QLL (20 ML per 1 day); AL (Min 6 Years and Max 12 Years)

Drug Name	Reference	Restrictions
<i>fluvoxamine maleate oral tablet 100 mg</i>		QLL (3 EA per 1 day); AL (Min 6 Years)
<i>fluvoxamine maleate oral tablet 25 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>fluvoxamine maleate oral tablet 50 mg</i>		QLL (6 EA per 1 day); AL (Min 6 Years)
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg</i>	Paxil	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>paroxetine hcl oral tablet 40 mg</i>	Paxil	QLL (1.5 EA per 1 day); AL (Min 6 Years)
<i>sertraline hcl oral concentrate 20 mg/ml</i>	Zoloft	QLL (10 ML per 1 day); AL (Min 6 Years and Max 12 Years)
<i>sertraline hcl oral tablet 100 mg</i>	Zoloft	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>sertraline hcl oral tablet 25 mg</i>	Zoloft	QLL (3 EA per 1 day); AL (Min 6 Years)
<i>sertraline hcl oral tablet 50 mg</i>	Zoloft	QLL (4 EA per 1 day); AL (Min 6 Years)
*Serotonin Modulators***		
<i>trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>		AL (Min 6 Years)
*Serotonin-Norepinephrine Reuptake Inhibitors (Snris)***		
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg</i>	Cymbalta	QLL (4 EA per 1 day); AL (Min 6 Years)
<i>duloxetine hcl oral capsule delayed release particles 60 mg</i>	Cymbalta	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg</i>	Effexor XR	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg, 75 mg</i>	Effexor XR	QLL (3 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl oral tablet 100 mg, 37.5 mg, 50 mg</i>		QLL (3 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl oral tablet 25 mg</i>		QLL (4 EA per 1 day); AL (Min 6 Years)
<i>venlafaxine hcl oral tablet 75 mg</i>		QLL (5 EA per 1 day); AL (Min 6 Years)
*Tricyclic Agents***		
<i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		AL (Min 6 Years)
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>		AL (Min 6 Years)

Drug Name	Reference	Restrictions
<i>clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg</i>	Anafranil	AL (Min 6 Years)
<i>desipramine hcl oral tablet 10 mg, 25 mg</i>	Norpramin	AL (Min 6 Years)
<i>desipramine hcl oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>		AL (Min 6 Years)
<i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		QLL (3 EA per 1 day); AL (Min 6 Years)
<i>doxepin hcl oral concentrate 10 mg/ml</i>		QLL (6 ML per 1 day); AL (Min 6 Years)
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>		AL (Min 6 Years)
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>		AL (Min 6 Years)
<i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	Pamelor	AL (Min 6 Years)
<i>nortriptyline hcl oral solution 10 mg/5ml</i>		AL (Min 6 Years)
<i>protriptyline hcl oral tablet 10 mg, 5 mg</i>		AL (Min 6 Years)
<i>trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg</i>		AL (Min 6 Years)
Antidotes And Specific Antagonists		
*Opioid Antagonists***		
<i>naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml</i>		
<i>naloxone hcl injection solution cartridge 0.4 mg/ml</i>		
<i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i>		
<i>naloxone hcl nasal liquid 4 mg/0.1ml</i>	Narcan	
<i>naltrexone hcl oral tablet 50 mg</i>		
KLOXXADO NASAL LIQUID 8 MG/0.1ML		
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG		
Antihistamines		
*Antihistamines - Ethanolamines***		
<i>diphenhydramine hcl oral capsule 25 mg, 50 mg</i>	Banophen	
<i>diphenhydramine hcl oral elixir 12.5 mg/5ml</i>		
<i>diphenhydramine hcl oral liquid 12.5 mg/5ml, 25 mg/10ml</i>	Banophen	OTC
<i>diphenhydramine hcl oral tablet 25 mg</i>	Alka-Seltzer Plus Allergy	OTC

Drug Name	Reference	Restrictions
<i>gnp allergy relief oral tablet chewable 12.5 mg</i>	Benadryl Allergy Childrens	OTC
BENADRYL ALLERGY EXTRA STR ORAL TABLET 50 MG		OTC
*Antihistamines - Piperidines***		
<i>cyproheptadine hcl oral syrup 2 mg/5ml</i>		
<i>cyproheptadine hcl oral tablet 4 mg</i>		
Antihypertensives		
*Antiadrenergics - Centrally Acting***		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>		AL (Min 6 Years)
<i>clonidine hcl transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr</i>		QLL (4 EA per 28 days); AL (Min 6 Years)
<i>guanfacine hcl oral tablet 1 mg, 2 mg</i>		AL (Min 6 Years)
*Antiadrenergics - Peripherally Acting***		
<i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>	Minipress	
Antiparkinson And Related Therapy Agents		
*Antiparkinson Anticholinergics***		
<i>benztropine mesylate injection solution 1 mg/ml</i>		PA
<i>benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg</i>		
<i>trihexyphenidyl hcl oral solution 0.4 mg/ml</i>		
<i>trihexyphenidyl hcl oral tablet 2 mg, 5 mg</i>		
*Antiparkinson Dopaminergics***		
<i>amantadine hcl oral capsule 100 mg</i>		
<i>amantadine hcl oral syrup 50 mg/5ml</i>		
Antipsychotics/Antimanic Agents		
*Antimanic Agents***		
<i>lithium carbonate er oral tablet extended release 300 mg</i>	Lithobid	AL (Min 6 Years)
<i>lithium carbonate er oral tablet extended release 450 mg</i>		AL (Min 6 Years)
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>		AL (Min 6 Years)
<i>lithium carbonate oral tablet 300 mg</i>		AL (Min 6 Years)
<i>lithium oral solution 8 meq/5ml</i>		AL (Min 6 Years)

Drug Name	Reference	Restrictions
*Antipsychotics - Misc.***		
<i>lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	Latuda	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	Geodon	QLL (2 EA per 1 day); AL (Min 6 Years)
*Benzisoxazoles***		
<i>risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	RisperDAL Consta	QLL (2 EA per 28 days); AL (Min 18 Years)
<i>risperidone oral solution 1 mg/ml</i>	RisperDAL	QLL (8 ML per 1 day); AL (Min 6 Years)
<i>risperidone oral tablet 0.25 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
<i>risperidone oral tablet 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	RisperDAL	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>		QLL (2 EA per 1 day); AL (Min 6 Years)
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML		QLL (1 Syringe per 180 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML		QLL (0.75 ML per 28 days); AL (Min 18 Years)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 156 MG/ML		QLL (1 ML per 28 days); AL (Min 18 Years)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 234 MG/1.5ML		QLL (1.5 ML per 28 days); AL (Min 18 Years)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML		QLL (0.25 ML per 28 days); AL (Min 18 Years)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 78 MG/0.5ML		QLL (0.5 ML per 28 days); AL (Min 18 Years)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML		QLL (0.88 ML per 69 days); AL (Min 18 Years)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 410 MG/1.32ML		QLL (1.32 ML per 69 days); AL (Min 18 Years)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 546 MG/1.75ML		QLL (1.75 ML per 28 days); AL (Min 18 Years)

Drug Name	Reference	Restrictions
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 819 MG/2.63ML		QLL (2.63 ML per 69 days); AL (Min 18 Years)
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG		AL (Min 18 Years)
*Butyrophenones***		
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	Haldol Decanoate	AL (Min 18 Years)
<i>haloperidol lactate injection solution 5 mg/ml</i>		AL (Min 18 Years)
<i>haloperidol lactate oral concentrate 2 mg/ml</i>		AL (Min 12 Years)
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>		AL (Min 12 Years)
*Dibenzodiazepines***		
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	Clozaril	QLL (5 EA per 1 day); AL (Min 18 Years)
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>		QLL (5 EA per 1 day); AL (Min 18 Years)
*Dibenzothiazepines***		
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	SEROquel	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>quetiapine fumarate oral tablet 150 mg</i>		QLL (2 EA per 1 day)
*Dibenzoxazepines***		
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>		AL (Min 12 Years)
*Dihydroindolones***		
<i>molindone hcl oral tablet 10 mg, 25 mg, 5 mg</i>		PA
*Phenothiazines***		
<i>chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>		AL (Min 6 Years)
<i>fluphenazine decanoate injection solution 25 mg/ml</i>		AL (Min 18 Years)
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>		AL (Min 6 Years)
<i>fluphenazine hcl oral elixir 2.5 mg/5ml</i>		AL (Min 6 Years)
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>		AL (Min 6 Years)
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>		AL (Min 12 Years)
<i>thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>		AL (Min 12 Years)
<i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>		AL (Min 12 Years)

Drug Name	Reference	Restrictions
*Quinolinone Derivatives***		
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	Abilify	QLL (1 EA per 1 day); AL (Min 6 Years)
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE 720 MG/2.4ML		QLL (2.4 ML per 60 days); AL (Min 18 Years)
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE 960 MG/3.2ML		QLL (3.2 ML per 60 days); AL (Min 18 Years)
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG		QLL (1 EA per 28 days); AL (Min 18 Years)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG		QLL (1 EA per 28 days); AL (Min 18 Years)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML		QLL (3.9 ML per 56 days); AL (Min 18 Years)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 441 MG/1.6ML		QLL (1.6 ML per 28 days); AL (Min 18 Years)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 662 MG/2.4ML		QLL (2.4 ML per 28 days); AL (Min 18 Years)
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 882 MG/3.2ML		QLL (3.2 ML per 28 days); AL (Min 18 Years)
*Thienbenzodiazepines***		
<i>olanzapine intramuscular solution reconstituted 10 mg</i>	ZyPREXA	PA
<i>olanzapine oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	ZyPREXA	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>olanzapine oral tablet 15 mg, 20 mg</i>	ZyPREXA	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>olanzapine oral tablet dispersible 10 mg, 5 mg</i>	ZyPREXA Zydis	QLL (2 EA per 1 day); AL (Min 6 Years)
<i>olanzapine oral tablet dispersible 15 mg, 20 mg</i>	ZyPREXA Zydis	QLL (1 EA per 1 day); AL (Min 6 Years)
*Thioxanthenes***		
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>		AL (Min 12 Years)
Beta Blockers		
*Beta Blockers Non-Selective***		
<i>nadolol oral tablet 20 mg, 40 mg</i>	Corgard	AL (Max 18 Years)
<i>nadolol oral tablet 80 mg</i>		AL (Max 18 Years)

Drug Name	Reference	Restrictions
<i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>		
Hematopoietic Agents		
*Cobalamins***		
<i>b-12 oral tablet 2000 mcg, 2500 mcg</i>		OTC
<i>cyanocobalamin solution 1000 mcg/ml injection</i>	Dodex	
<i>vitamin b-12 oral tablet 100 mcg, 1000 mcg, 250 mcg, 50 mcg</i>		OTC
<i>vitamin b-12 oral tablet 500 mcg</i>	Finest Nutrition Vitamin B-12	OTC
<i>vitamin b-12 sublingual tablet sublingual 1000 mcg, 2500 mcg, 3000 mcg, 6000 mcg</i>		OTC
<i>vitamin b-12 sublingual tablet sublingual 500 mcg</i>	B-12 Microlozenge	OTC
*Folic Acid/Folates***		
<i>folic acid oral tablet 1 mg</i>		
<i>folic acid oral tablet 400 mcg, 800 mcg</i>		OTC
Hypnotics/Sedatives/Sleep Disorder Agents		
*Barbiturate Hypnotics***		
<i>phenobarbital oral elixir 20 mg/5ml</i>		
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>		
*Benzodiazepine Hypnotics***		
<i>temazepam oral capsule 15 mg, 30 mg</i>	Restoril	QLL (1 EA per 1 day); AL (Min 6 Years)
*Non-Benzodiazepine - Gaba-Receptor Modulators***		
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	Lunesta	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>zolpidem tartrate oral tablet 10 mg</i>	Ambien	QLL (1 EA per 1 day); AL (Min 6 Years)
<i>zolpidem tartrate oral tablet 5 mg</i>	Ambien	QLL (2 EA per 1 day); AL (Min 6 Years)
*Selective Melatonin Receptor Agonists***		
<i>ramelteon oral tablet 8 mg</i>	Rozerem	ST; QLL (1 EA per 1 day); AL (Min 6 Years)

Drug Name	Reference	Restrictions
Laxatives		
*Bulk Laxatives***		
<i>cvs daily fiber oral packet 58.6 %</i>		OTC
<i>cvs easy fiber oral powder</i>		OTC
<i>cvs natural daily fiber oral powder 43 %</i>	Metamucil 4 in 1 Fiber	OTC
<i>cvs natural daily fiber oral powder 48.57 %</i>		OTC
<i>eql fiber supplement (wheat) oral powder</i>	Benefiber	OTC
<i>eql fiber supplement oral powder</i>	Benefiber	OTC
<i>fiber (corn dextrin) oral powder</i>		OTC
<i>fiber therapy oral tablet 500 mg</i>	Citrucel	OTC
<i>geri-mucil oral powder 25 %</i>	Konsyl Daily Psyllium Fiber	OTC
<i>geri-mucil oral powder 51.7 %</i>	Reguloid	OTC
<i>konsyl daily fiber oral powder 60.3 %</i>		OTC
<i>natural fiber laxative oral powder 28.3 %</i>	Metamucil Smooth Texture	OTC
<i>natural fiber laxative oral powder 30.9 %</i>		OTC
<i>natural psyllium seed oral powder 100 %</i>	Evac	OTC
<i>psyllium fiber oral capsule 0.52 gm</i>	Medi-Mucil	OTC
<i>qc natural vegetable oral powder 95 %</i>	Hydrocil	OTC
CITRUCEL ORAL POWDER		OTC
CITRUCEL ORAL TABLET 500 MG	fiber therapy	OTC
METAMUCIL 4 IN 1 FIBER ORAL POWDER 55.6 %		OTC
METAMUCIL SMOOTH TEXTURE ORAL POWDER 28.3 %	natural fiber laxative	OTC
METAMUCIL SMOOTH TEXTURE ORAL POWDER 58.6 %	cvs natural daily fiber	OTC
SOLUBLE FIBER THERAPY ORAL POWDER		OTC
*Saline Laxatives***		
<i>cvs laxative dietary supplement oral tablet 500 mg</i>	Phillips	OTC
<i>magnesium citrate oral solution 1.745 gm/30ml</i>	Citroma	OTC
*Stimulant Laxatives***		
<i>bisacodyl oral tablet delayed release 5 mg</i>	Allophen	OTC
<i>bisacodyl rectal suppository 10 mg</i>	Dulcolax	OTC
<i>cascara sagrada oral capsule 450 mg</i>		OTC
<i>cvs chocolate laxative pieces oral tablet chewable 15 mg</i>	Ex-Lax	OTC

Drug Name	Reference	Restrictions
<i>senna oral syrup 176 mg/5ml</i>		OTC
<i>senna oral syrup 8.8 mg/5ml</i>	OneLAX Senna	
<i>senna oral tablet 8.6 mg</i>	Evac-U-Gen	OTC
EX-LAX MAXIMUM STRENGTH ORAL TABLET 25 MG	cvs laxative pills max st	OTC
SENNA SMOOTH ORAL TABLET 15 MG	laxative regular strength	OTC
*Surfactant Laxatives***		
<i>docusate sodium oral capsule 100 mg</i>	Colace	OTC
<i>docusate sodium oral capsule 250 mg</i>		
<i>docusate sodium oral liquid 100 mg/10ml, 50 mg/5ml</i>	OneLAX Docusate Sodium	OTC
<i>docusate sodium oral syrup 60 mg/15ml</i>		OTC
<i>stool softener oral tablet 100 mg</i>	DOK	OTC
DOK ORAL TABLET 100 MG	stool softener	OTC
ENEMEEZ MINI RECTAL ENEMA 283 MG/5ML	docusate mini	OTC
Mouth/Throat/Dental Agents		
*Dry Mouth Agents And Artificial Saliva***		
<i>cvs dry mouth mouth/throat solution</i>	Biotene Dry Mouth Moisturizing	OTC
<i>eql dry mouth oral rinse mouth/throat solution</i>	Biotene Dry Mouth Moisturizing	OTC
<i>oral relief for dry mouth mouth/throat gel</i>	Biotene OralBalance Dry Mouth	OTC
<i>oral relief for dry mouth mouth/throat lozenge</i>	ACT Dry Mouth	OTC
<i>oral relief spray mouth/throat solution</i>	Biotene Dry Mouth Moisturizing	OTC
<i>ra dry mouth mouth/throat solution</i>	Biotene Dry Mouth Moisturizing	OTC
BIOTENE DRY MOUTH MOISTURIZING MOUTH/THROAT SOLUTION	cvs dry mouth	OTC
BIOTENE DRY MOUTH MOUTH/THROAT GUM		OTC
BOCASAL MOUTH/THROAT PACKET		
CAPHOSOL MOUTH/THROAT SOLUTION	cvs dry mouth	
MOI-STIR MOUTH/THROAT SOLUTION	cvs dry mouth	OTC

Drug Name	Reference	Restrictions
MOUTH KOTE MOUTH/THROAT SOLUTION	cvs dry mouth	OTC
MOUTH KOTE REMINT MOUTH/THROAT SOLUTION	cvs dry mouth	OTC
MUCOSITISRX MOUTH/THROAT PACKET		
SALIVAMAX MOUTH/THROAT PACKET		
Multivitamins		
*Multiple Vitamins W/ Minerals***		
<i>cvs adult 50+ eye health oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>cvs daily multiple for men oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs daily multiple women 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs eye health & lutein oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs eye health adult 50+ oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>cvs immune support oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>cvs one daily essential oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs one daily mens 50+ adv oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs one daily mens formula oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs one daily womens 50+ adv oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs one daily womens formula oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite adult 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite adults oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite advanced oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite men 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite men oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite senior oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite ultra men 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite ultra mens oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite ultra women oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite women 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite women oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs spectravite womens senior oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>cvs vision health oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>cvs womens active daily oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>mens 50+ advanced oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>mens 50+ multivitamin oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>mens multivitamin oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multi for her 50+ oral capsule</i>	Celebrate Multi-Complete 18	OTC

Drug Name	Reference	Restrictions
<i>multi for her 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multi for her oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>multi for her oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multi for him 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin adult (minerals) oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin adults 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin adults oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin men 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin men oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin women 50+ oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin women oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>multivitamin womens 50+ adv oral tablet</i>	Alive Diabetic Multivitamin	OTC
<i>one-daily multi caps oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>vision health oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>womens 50+ advanced oral capsule</i>	Celebrate Multi-Complete 18	OTC
<i>womens multi oral capsule</i>	Celebrate Multi-Complete 18	OTC
AIRBORNE ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE DIABETIC MULTIVITAMIN ORAL TABLET	cvs daily multiple for men	OTC
ALIVE ENERGY 50+ ORAL TABLET	cvs daily multiple for men	OTC
ALIVE HAIR, SKIN & NAILS ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE MENS 50+ MULTI GUMMY ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE MENS 50+ ORAL TABLET	cvs daily multiple for men	OTC
ALIVE MENS COMPLETE MULTI ORAL TABLET	cvs daily multiple for men	OTC
ALIVE MENS GUMMY MULTIVITAMINS ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE MULTI-VITAMIN ORAL LIQUID	complete multivitamin/mineral	OTC
ALIVE MULTI-VITAMIN ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE ONCE DAILY WOMENS ORAL TABLET	cvs daily multiple for men	OTC
ALIVE ULTRA POTENCY WOMENS 50+ ORAL TABLET	cvs daily multiple for men	OTC
ALIVE WOMENS 50+ COMPLETE MV ORAL TABLET	cvs daily multiple for men	OTC

Drug Name	Reference	Restrictions
ALIVE WOMENS 50+ GUMMY ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE WOMENS 50+ ORAL TABLET CHEWABLE	a thru z select	OTC
ALIVE WOMENS ENERGY ORAL TABLET	cvs daily multiple for men	OTC
ALIVE WOMENS GUMMY ORAL TABLET CHEWABLE	a thru z select	OTC
CELEBRATE MULTI-COMPLETE 18 ORAL CAPSULE	cvs adult 50+ eye health	OTC
CELEBRATE MULTI-COMPLETE 36 ORAL CAPSULE	cvs adult 50+ eye health	OTC
CELEBRATE MULTI-COMPLETE 45 ORAL CAPSULE	cvs adult 50+ eye health	OTC
CELEBRATE MULTI-COMPLETE 60 ORAL CAPSULE	cvs adult 50+ eye health	OTC
CENTRUM ADULT 50+ MULTIGUMMIES ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM ADULT ORAL LIQUID	complete multivitamin/mineral	OTC
CENTRUM ADULTS MULTIGUMMIES ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM ADULTS ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM CARDIO ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM FLAVOR BURST ADULT ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM FLAVOR BURST ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM FRESH/FRUITY 50+ ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM FRESH/FRUITY ADULT ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM MEN ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM MINIS ADULTS 50+ ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM MINIS MEN 50+ ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM MINIS WOMEN 50+ ORAL TABLET	cvs daily multiple for men	OTC
CENTRUM MULTI + OMEGA 3 ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM ORAL LIQUID	complete multivitamin/mineral	OTC

Drug Name	Reference	Restrictions
CENTRUM SILVER 50+MEN ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SILVER 50+WOMEN ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SILVER ADULT 50+ ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SILVER ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SILVER ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM SILVER ULTRA WOMENS ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SPECIALIST HEART ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SPECIALIST IMMUNE ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM SPECIALIST VISION ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM ULTRA WOMENS ORAL TABLET	cv's daily multiple for men	OTC
CENTRUM VITAMINTS ORAL TABLET CHEWABLE	a thru z select	OTC
CENTRUM WOMEN ORAL TABLET	cv's daily multiple for men	OTC
ICAPS AREDS FORMULA ORAL TABLET	cv's daily multiple for men	OTC
ICAPS LUTEIN & OMEGA-3 ORAL CAPSULE	cv's adult 50+ eye health	OTC
ICAPS MV ORAL TABLET	cv's daily multiple for men	OTC
ICAPS ORAL CAPSULE	cv's adult 50+ eye health	OTC
MULTI COMPLETE ORAL CAPSULE	cv's adult 50+ eye health	OTC
MULTI FOR HIM ORAL CAPSULE	cv's adult 50+ eye health	OTC
MULTI FOR HIM ORAL TABLET	cv's daily multiple for men	OTC
OCUVITE ADULT 50+ ORAL CAPSULE	cv's adult 50+ eye health	OTC
OCUVITE ADULT FORMULA ORAL CAPSULE	cv's adult 50+ eye health	OTC
OCUVITE EXTRA ORAL TABLET	cv's daily multiple for men	OTC
OCUVITE EYE + MULTI ORAL TABLET	cv's daily multiple for men	OTC
OCUVITE EYE HEALTH FORMULA ORAL CAPSULE	cv's adult 50+ eye health	OTC
OCUVITE-LUTEIN ORAL TABLET	cv's daily multiple for men	OTC
ONE A DAY IMMUNITY DEFENSE ORAL TABLET CHEWABLE	a thru z select	OTC

Drug Name	Reference	Restrictions
ONE A DAY MENS VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
ONE A DAY WOMEN 50 PLUS ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY ENERGY ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY FOR HER VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY FOR HIM VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY MENOPAUSE FORMULA ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS (MINERALS) ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS 50+ ADVANTAGE ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS 50+ ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS HEALTH FORMULA ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS PRO EDGE ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY MENS VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY PROACTIVE 65+ ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY TEEN ADVANTAGE/HER ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY TEEN ADVANTAGE/HIM ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY VITACRAVES ADULT ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY VITACRAVES IMMUNITY ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY VITACRAVES SOUR ORAL TABLET CHEWABLE	a thru z select	OTC
ONE-A-DAY WEIGHT SMART ADVANCE ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS 50 PLUS ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS 50+ ADVANTAGE ORAL TABLET	cv's daily multiple for men	OTC

Drug Name	Reference	Restrictions
ONE-A-DAY WOMENS 50+ ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS HEALTHY SKIN ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS MIND & BODY ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS PETITES ORAL TABLET	cv's daily multiple for men	OTC
ONE-A-DAY WOMENS VITACRAVES ORAL TABLET CHEWABLE	a thru z select	OTC
PRESERVISION AREDS 2 ORAL CAPSULE	cv's adult 50+ eye health	OTC
PRESERVISION AREDS 2+MULTI VIT ORAL CAPSULE	cv's adult 50+ eye health	OTC
PRESERVISION AREDS ORAL CAPSULE	cv's adult 50+ eye health	OTC
PRESERVISION AREDS ORAL TABLET	cv's daily multiple for men	OTC
PRESERVISION/LUTEIN ORAL CAPSULE	cv's adult 50+ eye health	OTC
SYSTANE ICAPS AREDS2 ORAL TABLET	cv's daily multiple for men	OTC
*Multivitamins***		
<i>daily multiple vitamins oral tablet</i>	One-A-Day Essential	OTC
<i>multi vitamin oral tablet</i>	One-A-Day Essential	OTC
<i>multiple vitamin-folic acid oral tablet</i>	One-A-Day Essential	OTC
<i>one-daily multi vitamins oral tablet</i>	One-A-Day Essential	OTC
<i>one-daily multi-vitamin oral tablet</i>	One-A-Day Essential	OTC
ONE-A-DAY ESSENTIAL ORAL TABLET	daily multiple vitamins	OTC
ONE-A-DAY MENS ORAL TABLET	daily multiple vitamins	OTC
Nutrients		
*Misc. Nutritional Substances***		
<i>fish oil oral capsule 435 mg, 645 mg</i>		OTC
<i>fish oil oral capsule delayed release 1000 mg</i>	OmegaPure 600 EC	OTC
<i>fish oil oral capsule delayed release 1200 mg</i>		OTC
<i>fish oil oral tablet chewable 875 mg</i>		OTC
<i>omega-3 fish oil oral capsule 1000 mg</i>	Maximum EPA	OTC
<i>omega-3 fish oil oral capsule 1200 mg</i>	Theragran-M Fish Oil Conc	OTC
<i>omega-3 fish oil oral capsule 300 mg</i>	Fish Oil Pearls	OTC

Drug Name	Reference	Restrictions
<i>omega-3 fish oil oral capsule 500 mg</i>	Ovega-3	OTC
<i>omega-3 oral capsule 1400 mg</i>		OTC
Psychotherapeutic And Neurological Agents - Misc.		
*Alcohol Deterrents***		
<i>acamprosate calcium oral tablet delayed release 333 mg</i>		
<i>disulfiram oral tablet 250 mg, 500 mg</i>		
*Movement Disorder Drug Therapy***		
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG		PA
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG		PA
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG		PA
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG		PA
*Psychotherapeutic And Neurological Agents - Misc.***		
<i>pimozide oral tablet 1 mg, 2 mg</i>		AL (Min 12 Years)
Thyroid Agents		
*Thyroid Hormones***		
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	Euthyrox	
<i>levothyroxine sodium oral tablet 300 mcg</i>	Levo-T	
<i>liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg</i>	Cytomel	
Urinary Antispasmodics		
*Urinary Antispasmodics - Cholinergic Agonists***		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>		AL (Min 6 Years)
Vitamins		
*Vitamin B-1***		
<i>b1 oral tablet 100 mg</i>		OTC
<i>b-1 oral tablet 500 mg</i>		OTC

Drug Name	Reference	Restrictions
<i>thiamine hcl oral tablet 100 mg</i>		OTC
<i>thiamine mononitrate oral tablet 100 mg</i>		OTC
<i>thiamine oral capsule 50 mg</i>		OTC
<i>vitamin b-1 oral tablet 250 mg, 50 mg</i>		OTC
*Vitamin B-6***		
<i>b-6 oral tablet 100 mg, 500 mg</i>		OTC
<i>pyridoxine hcl oral tablet 25 mg, 50 mg</i>		OTC
<i>vitamin b-6 er oral tablet extended release 200 mg</i>		OTC
<i>vitamin b6 oral tablet 100 mg, 200 mg, 250 mg</i>		OTC
*Vitamin E***		
<i>vitamin e oral capsule 100 unit, 1000 unit, 200 unit, 400 unit, 600 unit</i>		OTC
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