

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ALLERGENS, GRASS POLLEN</b>
<b>34 Tablets/Month</b>
GRASTEK (grass pollen-timothy, std)
ORALAIR (gr pol-orc/sw ver/rye/kent/tim)
<b>ALLERGENS, MITES</b>
<b>30 Tablets/Month</b>
ODACTRA (mite-dermatophagoides farinae, standardized)
<b>ALLERGENS, RAGWEED POLLEN</b>
<b>34 Tablets/Month</b>
RAGWITEK (weed pollen-short ragweed)
<b>ALZHEIMER'S AGENTS</b>
<b>34 Capsules/Month</b>
memantine hcl e (Example brand: NAMENDA XR)
memantine hcl er (Example brand: NAMENDA XR)
NAMENDA XR (memantine hcl)
NAMZARIC (memantine hcl/donepezil)
<b>68 Tablets/Month</b>
memantine hcl (Example brand: NAMENDA)
memantine hcl 5 (Example brand: NAMENDA)
NAMENDA (memantine hcl)
<b>ANALGESICS, MISCELLANEOUS</b>
<b>360 Capsules/Month</b>
ASCOMP WITH CODEINE (asa/butalb/caffeine/codeine)
butalb-acetaminoph-caff-codein (Example brand: FIORICET W/ CODEINE)
FIORICET WITH CODEINE (butalb/acetaminoph/caff/codein)
<b>ANALGESICS, OPIOIDS LONG-ACTING</b>
<b>4 Patches/Month</b>
BUTRANS (buprenorphine)
<b>34 Tablets/Month</b>
tramadol er 200 mg tablet (Example brand: RYZOLT ER)
tramadol er 300 mg tablet (Example brand: RYZOLT ER)
tramadol hcl er 200 mg tablet (Example brand: ULTRAM ER)
tramadol hcl er 300 mg tablet (Example brand: ULTRAM ER)
<b>34 Tablets/Month</b>
HYSINGLA ER (hydrocodone bitartrate)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANALGESICS, OPIOIDS LONG-ACTING</b>
<b>60 EA/Month (1 EA equals 1 film)</b>
BELBUCA (buprenorphine)
<b>68 Capsules/Month</b>
hydrocodone bitartrate er (Example brand: ZOHYDRO ER)
<b>68 Tablets/Month</b>
tramadol er 100 mg tablet (Example brand: RYZOLT ER)
tramadol hcl er 100 mg tablet (Example brand: ULTRAM ER)
<b>68 Tablets/Month</b>
NUCYNTA ER (tapentadol)
<b>240 Capsules/Month</b>
XTAMPZA ER (oxycodone myristate)
<b>ANALGESICS, OPIOIDS SHORT-ACTING, FENTANYL MUCOSAL AGENTS</b>
<b>360 Tablets or Capsules/Month</b>
ACTIQ (fentanyl)
fentanyl citrate (Example brand: ACTIQ)
FENTORA (fentanyl)
<b>ANALGESICS, OPIOIDS, SHORT-ACTING</b>
<b>68 Tablets/Month</b>
meperidine 50 mg tablet (Example brand: MEPERITAB)
<b>136 Tablets/Month</b>
tramadol hcl 100 mg tablet (Example brand: ULTRAM)
<b>204 Tablets/Month</b>
levorphanol 2 m (Example brand: LEVO-DROMORAN)
levorphanol tartrate (Example brand: LEVO-DROMORAN)
<b>272 Tablets/Month</b>
NUCYNTA (tapentadol)
tramadol hcl (Example brand: ULTRAM)
tramadol hcl 50 mg tablet (Example brand: ULTRAM)
tramadol-acetaminophn 37.5-325 (Example brand: ULTRACET)
<b>360 Tablets or Capsules/Month</b>
acetamin-caff-dihydrocodeine (Example brand: TREZIX)
acetaminophen-c (Example brand: TYLENOL #2)
acetaminophen-c (Example brand: TYLENOL #3)
acetaminophen-c (Example brand: TYLENOL #4)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANALGESICS, OPIOIDS, SHORT-ACTING</b>
<b>360 Tablets or Capsules/Month</b>
acetaminophen-codeine (Example brand: TYLENOL #2)
acetaminophen-codeine (Example brand: TYLENOL #3)
acetaminophen-codeine (Example brand: TYLENOL #4)
codeine sulfate (Example brand: No Brand Product)
DILAUDID (hydromorphone)
ENDOCET (oxycodone/acetaminophen)
hydrocodone-acetaminophen (Example brand: LORTAB)
hydrocodone-acetaminophen (Example brand: NORCO)
hydrocodone-acetaminophen (Example brand: XODOL)
hydrocodone-ibuprofen (Example brand: IBUDONE)
hydrocodone-ibuprofen (Example brand: VICOPROFEN)
morphine sulfate (Example brand: MSIR)
NALOCET (oxycodone/acetaminophen)
oxycodone hcl (Example brand: DAZIDOX)
oxycodone hcl (Example brand: OXYIR)
oxymorphone hcl (Example brand: OXYMORPHONE)
pentazocine-naloxone hcl (Example brand: TALWIN NX)
PERCOCET (oxycodone/acetaminophen)
PROLATE (oxycodone/acetaminophen)
ROXICODONE (oxycodone)
ROXYBOND (oxycodone)
<b>ANALGESICS/ ANESTHETICS, TOPICAL</b>
<b>90 Patches/Month</b>
DERMACINRX LIDOCAN (lidocaine)
LIDOCAN II (lidocaine)
LIDOCAN III (lidocaine)
LIDODERM (lidocaine)
TRIDACAINE 5% P (lidocaine)
ZTLIDO (lidocaine)
<b>ANDROGENIC AGENTS</b>
<b>136 Capsules/Month</b>
JATENZO (testosterone undecanoate)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANDROGENIC AGENTS</b>
<b>136 Capsules/Month</b>
TLANDO (testosterone)
TLANDO 112.5 MG (testosterone)
<b>ANGIOTENSIN MODULATORS ARBs AND DRIs</b>
<b>34 Tablets/Month</b>
ATACAND (candesartan cilexetil)
ATACAND HCT (candesartan/hydrochlorothiazide)
AVALIDE 300-12.5 MG TABLET (irbesartan/hydrochlorothiazide)
AVAPRO (irbesartan)
BENICAR (olmesartan)
BENICAR HCT (olmesartan/hydrochlorothiazide)
DIOVAN 320 MG TABLET (valsartan)
DIOVAN HCT (valsartan/hydrochlorothiazide)
EDARBI (azilsartan medoxomil)
EDARBYCLOR (azilsartan med/chlorthalidone)
MICARDIS (telmisartan)
MICARDIS HCT (telmisartan/hydrochlorothiazide)
<b>34 Tablets/Month</b>
TEKTURNA (aliskiren)
TEKTURNA HCT (aliskiren/hydrochlorothiazide)
<b>68 Tablets/Month</b>
AVALIDE 150-12.5 MG TABLET (irbesartan/hydrochlorothiazide)
DIOVAN 160 MG TABLET (valsartan)
DIOVAN 40 MG TABLET (valsartan)
DIOVAN 80 MG TABLET (valsartan)
ENTRESTO (sacubitril/valsartan)
ENTRESTO 24 MG- (sacubitril/valsartan)
ENTRESTO 49 MG- (sacubitril/valsartan)
ENTRESTO 97 MG- (sacubitril/valsartan)
<b>ANGIOTENSIN MODULATORS, COMBINATIONS</b>
<b>34 Tablets/Month</b>
AZOR (amlodipine bes/olmesartan)
EXFORGE (amlodipine/valsartan)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANGIOTENSIN MODULATORS, COMBINATIONS</b>
<b>34 Tablets/Month</b>
EXFORGE HCT (amlodipine/valsartan/hcthiazid)
telmisartan-amlodipine (Example brand: TWYNSTA)
trandolapr-verapam er 4-240 mg (Example brand: TARKA ER)
TRIBENZOR 40-10-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
TRIBENZOR 40-10-25 MG TABLET (olmesartan med/amlodipine/hctz)
TRIBENZOR 40-5-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
TRIBENZOR 40-5-25 MG TABLET (olmesartan med/amlodipine/hctz)
<b>68 Tablets/Month</b>
trandolapr-verapam er 1-240 mg (Example brand: TARKA ER)
trandolapr-verapam er 2-180 mg (Example brand: TARKA ER)
trandolapr-verapam er 2-240 mg (Example brand: TARKA ER)
TRIBENZOR 20-5-12.5 MG TABLET (olmesartan med/amlodipine/hctz)
<b>ANTIBIOTICS, GI</b>
<b>9 Tablets/68 Days</b>
XIFAXAN 200 MG TABLET (rifaximin)
<b>ANTIBIOTICS, TETRACYCLINES</b>
<b>68 Tablets/Month</b>
doxycycline hyclate (Example brand: PERIOSTAT)
<b>ANTIBIOTICS, TOPICAL</b>
<b>60 GM/Month (15-30 GM per tube)</b>
mupirocin 2% cream (Example brand: BACTROBAN)
<b>66 Grams/Month</b>
CENTANY 2% OINTMENT (mupirocin)
<b>ANTICOAGULANTS</b>
<b>34 Tablets/Month</b>
SAVAYSA (edoxaban tosylate)
XARELTO 10 MG TABLET (rivaroxaban)
XARELTO 20 MG TABLET (rivaroxaban)
<b>68 Tablets or Capsules/Month</b>
ELIQUIS 2.5 MG TABLET (apixaban)
PRADAXA (dabigatran etexilate)
XARELTO 15 MG TABLET (rivaroxaban)
XARELTO 2.5 MG TABLET (rivaroxaban)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANTICOAGULANTS</b>
<b>74 Tablets/Month</b>
ELIQUIS 5 MG TABLET (apixaban)
ELIQUIS DVT-PE TREAT START 5MG (apixaban)
<b>ANTICONVULSANT/NEUROPATHIC PAIN/FIBROMYAIGIA)</b>
<b>136 Capsules/Month</b>
LYRICA (pregabalin)
<b>ANTIDEPRESSANTS, OTHER</b>
<b>34 Capsule/Month</b>
FETZIMA (levomilnacipran hydrochloride)
<b>68 Capsules/Month</b>
duloxetine hcl (Example brand: IRENKA DR)
<b>ANTIDEPRESSANTS, OTHER/NEUROPATHIC PAIN/FIBROMYAIGIA</b>
<b>68 Capsules/Month</b>
CYMBALTA (duloxetine hcl)
<b>ANTIDIARRHEAL - G.I. CHLORIDE CHANNEL INHIBITORS</b>
<b>68 Tablets/Month</b>
MYTESI (crofelemer)
<b>ANTIEMETICS/ANTIVERTIGO AGENTS</b>
<b>136 Tablets/Month</b>
DICLEGIS (doxylamine/pyridoxine)
<b>ANTIFUNGALS, ORAL</b>
<b>102 Tablets/Month</b>
NOXAFIL (posaconazole)
<b>ANTI-NARCOLEPSY &amp; ANTI-CATAPLEXY, SEDATIVE-TYPE AGT</b>
<b>540 ML/Month</b>
XYREM (sodium oxybate)
XYWAV (gamma-hydroxybutyric acid)
<b>ANTIPSYCHOTICS</b>
<b>34 Tablets/Month</b>
LYBALVI (olanzapine)
<b>34 Tablets/Month</b>
LATUDA 120 MG TABLET (lurasidone)
LATUDA 20 MG TABLET (lurasidone)
LATUDA 40 MG TABLET (lurasidone)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ANTIPSYCHOTICS</b>
<b>68 Tablets/Month</b>
LATUDA 60 MG TABLET (lurasidone)
LATUDA 80 MG TABLET (lurasidone)
<b>ANTIVIRALS, Other</b>
<b>2 Buccal Tablets/Month</b>
SITAVIG (acyclovir)
<b>136 Tablets/Month</b>
LIVTENCITY (maribavir)
<b>BLADDER RELAXANT PREPARATIONS</b>
<b>8 Patches/Month</b>
OXYTROL (oxybutynin)
<b>34 Tablets or Packets/Month</b>
darifenacin er (Example brand: ENABLEX)
DETROL LA (tolterodine tartrate er)
DETROL LA 4 MG (tolterodine tartrate er)
GELNIQUE (oxybutynin)
GEMTESA (vibegron)
MYRBETRIQ (mirabegron)
oxybutynin cl er 5 mg tablet (Example brand: DITROPAN XL)
TOVIAZ (fesoterodine fumarate)
tropium chloride er (Example brand: SANCTURA XR)
VESICARE (solifenacin succinate)
<b>68 Tablets/Month</b>
DETROL (tolterodine tartrate)
oxybutynin cl er 10 mg tablet (Example brand: DITROPAN XL)
oxybutynin cl er 15 mg tablet (Example brand: DITROPAN XL)
tropium chlori (Example brand: SANCTURA)
tropium chloride (Example brand: SANCTURA)
<b>136 Tablets/Month</b>
oxybutynin 2.5 mg tablet (Example brand: OXYBUTYNIN)
oxybutynin 5 mg tablet (Example brand: DITROPAN)
<b>680 ML/Month</b>
oxybutynin 5 mg/5 ml solution (Example brand: DITROPAN)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>BLADDER RELAXANT PREPARATIONS</b>
<b>680 ML/Month</b>
oxybutynin 5 mg/5 ml syrup (Example brand: DITROPAN)
<b>BRONCHODILATORS, BETA AGONISTS</b>
<b>17 GM/Month (13.4 to 17 GM for 2 inhalers)</b>
PROAIR HFA 90 MCG INHALER (albuterol sulfate) 8.5 GM
PROVENTIL HFA 90 MCG INHALER (albuterol sulfate) 6.7 GM
VENTOLIN HFA 90 MCG INHALER (albuterol sulfate) 8 GM
<b>30 GM/Month (15 GM per inhaler)</b>
XOPENEX HFA (levalbuterol tartrate)
<b>36 GM/Month (36 GM for 2 inhalers)</b>
VENTOLIN HFA 90 MCG INHALER (albuterol sulfate) 18 GM
<b>CARDIAC TONE, CONTRACTILITY, AND REMODELING</b>
<b>34 Tablets/Month</b>
VERQUVO (vericiguat)
<b>CENTRAL NERVOUS SYSTEM AGENTS, MISCELLANEOUS</b>
<b>68 Capsules/Month</b>
NUDEXTA (dextromethorphan hbr/quinidine)
<b>CONTRACEPTIVES (EMERGENCY),ORAL</b>
<b>8 Tablets/Month</b>
ELLA (ulipristal acetate)
<b>8 Tablets/Month</b>
CURAE (levonorgestrel)
ECONTRA ONE-STEP (levonorgestrel)
HER STYLE (levonorgestrel)
MY CHOICE (levonorgestrel)
MY WAY (levonorgestrel)
NEW DAY (levonorgestrel)
OPTION 2 (levonorgestrel)
<b>CONTRACEPTIVES,INJECTABLE</b>
<b>1 EA/3 Months (1 EA equals 1 vial or syringe)</b>
DEPO-PROVERA (medroxyprogesterone acetate)
DEPO-SUBQ PROVERA 104 (medroxyprogesterone acetate)
<b>CONTRACEPTIVES,TRANSDERMAL</b>
<b>9 Patches/3 Month</b>



# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>CONTRACEPTIVES, TRANSDERMAL</b>
<b>9 Patches/3 Month</b>
XULANE (norelgestromin/ethin.estradiol)
ZAFEMY (norelgestromin/ethin.estradiol)
<b>COPD AGENTS</b>
<b>1 EA/Month (1 EA per inhaler)</b>
TUDORZA PRESSAIR (aclidinium bromide)
<b>4 GM/Month (4 GM per inhaler)</b>
STIOLTO RESPIMAT (tiotropium br/olodaterol)
<b>8 GM/Month (4 GM per inhaler)</b>
COMBIVENT RESPIMAT (ipratropium/albuterol)
<b>10.7 GM/Month (10.7 GM per inhaler)</b>
BEVESPI AEROSPHERE (glycopyrrolate/formoterol)
<b>25.8 GM/Month (12.9 GM per inhaler)</b>
ATROVENT HFA (ipratropium bromide)
<b>30 EA/Month (5-30 capsules per carton)</b>
SPIRIVA HANDIHALER (tiotropium bromide)
<b>34 Tablets/Month</b>
DALIRESP (roflumilast)
<b>CYTOKINE AND CAM ANTAGONISTS</b>
<b>1 EA/Month (1 EA equals 1 Kit (contains 2 pens)</b>
<b>2 EA/Month (1 EA equals 1 Kit (contains 1 pen)</b>
ZYMFENTRA 120 MG/ML PEN KIT (infliximab-dyyb)
<b>1 EA/Month (1 EA equals 1 Kit (contains 2 prefilled syringes)</b>
ZYMFENTRA 120 MG/ML SYRINGE KT (infliximab-dyyb)
<b>3 EA/Year (3 EA Starter Kit contains 6 syringes)</b>
CIMZIA 2X200 MG/ML(X3)START KT (certolizumab)
<b>34 Tablets/Month</b>
RINVOQ (upadacitinib)
XELJANZ XR (tofacitinib citrate)
<b>68 Tablets/Month</b>
XELJANZ (tofacitinib citrate)
<b>DECONGESTANTS, ORAL</b>
<b>136 Tablets/Month</b>
NASAL DECONGESTANT (pseudoephedrine hcl)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>DECONGESTANTS, ORAL</b>
<b>136 Tablets/Month</b>
SUDOGEST (pseudoephedrine hcl)
SUPHEDRIN (pseudoephedrine hcl)
<b>DIABETIC SUPPLY</b>
<b>1 Calibration/Control Solution/Month</b>
blood-glucose calibration control
diabetic supplies,miscell
<b>1 EA/180 Days (1 EA equals 1 Lancing Device)</b>
lancing device
<b>1 EA/180 Days (1 EA equals 1 insulin administration pen)</b>
pen injectors
<b>1 EA/2 Year (1 EA equals to 1 blood glucose meter)</b>
blood-glucose meter
<b>204 EA/Month (1 EA equals 1 test strip)</b>
blood glucose test strips
<b>204 EA/Month (1 EA equals 1 lancet)</b>
lancets
<b>204 EA/Month (1 EA equals 1 pen needle)</b>
pen needles
<b>204 Blood/Urine/Ketone Test Strips/Month</b>
blood ketone test,strips
<b>204 EA/Month (1 EA equals 1 Syringe with or without needle)</b>
syringes with or without needle, insulin
<b>ELECTROLYTE DEPLETERS</b>
<b>34 EA/Month (1 EA equals 1 powder pack)</b>
VELTASSA (patiromer calcium sorbitex)
<b>ENZYME INHIBITOR, ORAL</b>
<b>60 Tablets/Month</b>
JOENJA (leniolisib)
<b>EPINEPHRINE, SELF-INJECTED</b>
<b>2 EA/Month (1 EA equals 1 syringe)</b>
AUVI-Q (epinephrine)
EPIPEN (epinephrine)
EPIPEN 2-PAK (epinephrine)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>EPINEPHRINE, SELF-INJECTED</b>
<b>2 EA/Month (1 EA equals 1 syringe)</b>
EPIPEN JR (epinephrine)
EPIPEN JR 2-PAK (epinephrine)
<b>FRIEDREICH'S DISEASE</b>
<b>90 Capsules/Month</b>
SKYCLARYS (omaveloxolone)
<b>GI MOTILITY, CONSTIPATION</b>
<b>34 Capsules/Month</b>
LINZESS (linaclotide)
<b>34 Tablets/Month</b>
MOVANTI (naloxegol oxalate)
<b>90 Tablets/Month</b>
RELISTOR (methylnaltrexone)
<b>GI MOTILITY, DIARRHEA</b>
<b>68 Tablets/Month</b>
LOTRONEX (alosetron hcl)
VIBERZI (eluxadoline)
<b>GLUCAGON AGENTS</b>
<b>2 Syringe/Month (0.1 ML equals 1 Syringe)</b>
GVOKE HYPOPEN 1PK 0.5MG/0.1 ML (glucagon)
GVOKE HYPOPEN 1-PK 1 MG/0.2 ML (glucagon)
GVOKE HYPOPEN 2PK 0.5MG/0.1 ML (glucagon)
GVOKE HYPOPEN 2-PK 1 MG/0.2 ML (glucagon)
GVOKE PFS 1-PK 1 MG/0.2 ML SYR (glucagon)
GVOKE PFS 2-PK 1 MG/0.2 ML SYR (glucagon)
ZEGALOGUE AUTOINJECTOR (dasiglucagon)
ZEGALOGUE SYRINGE (dasiglucagon)
<b>2 EA/Month (1 EA equals 1 Kit/vial/intranasal device)</b>
BAQSIMI (glucagon)
GLUCAGEN (glucagon)
GLUCAGON EMERGENCY KIT (glucagon)
<b>GLUCOCORTICOIDS, INHALED</b>
<b>1 EA/Month (1 EA equals 1 inhaler)</b>
ASMANEX (mometasone furoate)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>GLUCOCORTICOIDS, INHALED</b>
<b>1 EA/Month (1 EA equals 1 inhaler)</b>
ARMONAIR DIGIHALER (fluticasone)
<b>2 EA/Month (1 EA equals 1 inhaler)</b>
AIRDUO DIGIHALER (fluticasone)
AIRDUO RESPICLICK (fluticasone)
<b>2 EA/Month (1 EA equals 1 inhaler)</b>
PULMICORT FLEXHALER (budesonide)
<b>12.2 GM/Month (6.1 GM per inhaler)</b>
ALVESCO (ciclesonide) 6.1 GM
<b>13 GM/Month (8.8 -13 GM per inhaler)</b>
ASMANEX HFA (mometasone furoate)
<b>22 GM/Month (10.6 GM per inhaler)</b>
FLOVENT HFA 44 MCG INHALER (fluticasone propionate)
<b>24 GM/Month (8-12 GM per inhaler)</b>
ADVAIR HFA (fluticasone/salmeterol)
<b>24 GM/Month (12 GM per inhaler)</b>
FLOVENT HFA 110 MCG INHALER (fluticasone propionate)
FLOVENT HFA 220 MCG INHALER (fluticasone propionate)
<b>24 GM/Month (6.9-12.2 GM per inhaler)</b>
BREYNA (budesonide/ formoterol fumarate)
BREYNA (budesonide/formoterol fumarate)
SYMBICORT (budesonide/ formoterol fumarate)
SYMBICORT (budesonide/formoterol fumarate)
SYMBICORT 160-4 (budesonide/formoterol fumarate)
SYMBICORT 80-4. (budesonide/ formoterol fumarate)
<b>26 GM/Month (8.8 -13 GM per inhaler)</b>
DULERA (mometasone furoate)
DULERA (mometasone/formoterol)
<b>30 EA/Month (1 EA equals 1 blister pack)</b>
ARNUIITY ELLIPTA (fluticasone furoate)
<b>32.1 GM/Month (10.7 GM equals 1 inhaler)</b>
AIRSUPRA (albuterol/budesonide)
<b>60 EA/Month (1 EA equals 1 powdered dose)</b>
FLOVENT 50 MCG DISKUS (fluticasone propionate)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>GLUCOCORTICOIDS, INHALED</b>
<b>120 EA/Month (1 EA equals 1 powdered dose)</b>
ADVAIR DISKUS (fluticasone/salmeterol)
WIXELA INHUB (fluticasone/salmeterol)
<b>120 EA/Month (1 EA equals 1 powdered dose)</b>
BREO ELLIPTA (fluticasone/vilanterol)
<b>120 EA/Month (1 EA equals 1 powdered dose)</b>
FLOVENT DISKUS (fluticasone propionate)
<b>GOUT AGENTS</b>
<b>68 Tablets or Capsules/Month</b>
COLCRYS (colchicine)
MITIGARE (colchicine)
<b>HEADACHE AGENTS, ACUTE TREATMENT</b>
<b>1 Bottle</b>
ZAVZPRET (zavegepant)
<b>8 Tablets/Month</b>
REYVOW (lasmiditan)
<b>16 Tablets/Month</b>
UBRELVY (ubrogepant)
<b>18 Tablets/Month</b>
NURTEC ODT (rimegepant)
<b>HEADACHE AGENTS, PREVENTATIVE TREATMENT</b>
<b>1 ML/Month</b>
AIMOVIG 140 MG/ML AUTOINJECTOR (erenumab-aooe) 1 ML
AIMOVIG 70 MG/ML AUTOINJECTOR (erenumab-aooe) 1 ML
<b>3 Syringe/Month (1.5 ML equals 1 Syringe)</b>
AJOVY AUTOINJECTOR (fremanezumab-vfrm)
AJOVY SYRINGE (fremanezumab-vfrm)
<b>34 Tablets/Month</b>
QULIPTA (atogepant)
<b>HEADACHE AGENTS, TRIPTANS INJECTABLE</b>
<b>5 ML/Month (5 ML equals 10 (0.5 ML) vials)</b>
sumatriptan 6 mg/0.5 ml vial (Example brand: IMITREX)
<b>4 ML/Month (4 ML equals 8 (0.5 ML) syringes)</b>
IMITREX 4 MG/0.5 ML CARTRIDGES (sumatriptan succinate)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>HEADACHE AGENTS, TRIPTANS INJECTABLE</b>
<b>4 ML/Month (4 ML equals 8 (0.5 ML) syringes)</b>
IMITREX 4 MG/0.5 ML PEN INJECT (sumatriptan succinate)
IMITREX 6 MG/0.5 ML CARTRIDGES (sumatriptan succinate)
IMITREX 6 MG/0.5 ML PEN INJECT (sumatriptan succinate)
ZEMBRACE SYMTOUCH (sumatriptan succinate)
<b>HEADACHE AGENTS, TRIPTANS NON-INJECTABLE</b>
<b>6 EA/Month (1 EA equals 1 unit dose sprayer or syringe)</b>
IMITREX 20 MG NASAL SPRAY (sumatriptan)
IMITREX 5 MG NASAL SPRAY (sumatriptan)
TOSYMRA (sumatriptan)
zolmitriptan 2.5 mg nasal spry (Example brand: ZOMIG)
ZOMIG 5 MG NASAL SPRAY (zolmitriptan)
<b>18 Tablets/Month</b>
almotriptan malate (Example brand: AXERT)
FROVA (frovatriptan succinate)
IMITREX 100 MG TABLET (sumatriptan succinate)
IMITREX 25 MG TABLET (sumatriptan succinate)
IMITREX 50 MG TABLET (sumatriptan succinate)
MAXALT (rizatriptan)
MAXALT MLT (rizatriptan)
naratriptan hcl (Example brand: AMERGE)
RELPAX (eletriptan)
rizatriptan (Example brand: MAXALT MLT)
rizatriptan (Example brand: MAXALT)
sumatriptan succ-naproxen sod (Example brand: TREXIMET)
zolmitriptan 2.5 mg odt (Example brand: ZOMIG ZMT)
zolmitriptan 5 mg odt (Example brand: ZOMIG ZMT)
ZOMIG 2.5 MG TABLET (zolmitriptan)
ZOMIG 5 MG TABLET (zolmitriptan)
<b>HEMOLYTIC ANEMIA (PYRUVATE KINASE DEFICIENCY)</b>
<b>68 Tablets/Month</b>
PYRUKYND (mitapivat)
<b>HYPOGLYCEMICS, DPP-4 INHIBITORS</b>

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>HYPOGLYCEMICS, DPP-4 INHIBITORS</b>
<b>34 Tablets/Month</b>
JANUMET XR 100-1,000 MG TABLET (sitagliptin phos/metformin hcl)
JANUMET XR 50-500 MG TABLET (sitagliptin phos/metformin hcl)
JANUVIA (sitagliptin phosphate)
JENTADUETO XR 5 MG-1,000 MG TB (linagliptin/metformin)
NESINA (alogliptin)
ONGLYZA (saxagliptin)
OSENI (alogliptin/pioglitazone)
TRADJENTA (linagliptin)
ZITUVIO (sitagliptin)
<b>68 Tablets/Month</b>
JANUMET (sitagliptin phos/metformin hcl)
JANUMET XR 50-1,000 MG TABLET (sitagliptin phos/metformin hcl)
JENTADUETO (linagliptin/metformin)
JENTADUETO XR 2.5 MG-1,000 MG (linagliptin/metformin)
KAZANO (alogliptin/metformin)
KOMBIGLYZE XR (saxagliptin hcl/metformin)
<b>HYPOGLYCEMICS, OTHER</b>
<b>34 Tablets/Month</b>
FARXIGA (dapagliflozin propanediol)
FARXIGA 10 MG T (dapagliflozin propanediol)
FARXIGA 5 MG TA (dapagliflozin propanediol)
INPEFA (sotagliflozin)
INVOKANA (canagliflozin)
JARDIANCE (empagliflozin)
QTERN (dapagliflozin/saxagliptin)
STEGLATRO 15 MG TABLET (ertugliflozin pidolate)
XIGDUO XR 10 MG-1,000 MG TAB (dapagliflozin/metformin)
XIGDUO XR 10 MG-500 MG TABLET (dapagliflozin/metformin)
XIGDUO XR 2.5 MG-1,000 MG TAB (dapagliflozin/metformin)
XIGDUO XR 5 MG-500 MG TABLET (dapagliflozin/metformin)
<b>68 Tablets/Month</b>
INVOKAMET (canagliflozin/metformin)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>HYPOGLYCEMICS, OTHER</b>
<b>68 Tablets/Month</b>
INVOKAMET XR (canagliflozin/metformin)
STEGLATRO 5 MG TABLET (ertugliflozin pidolate)
XIGDUO XR 5 MG-1,000 MG TABLET (dapagliflozin/metformin)
<b>IMMUNOMODULATORS, ATOPIC DERMATITIS</b>
<b>34 Tablets/Month</b>
CIBINQO (abrocitinib)
<b>IMMUNOSUPPRESSANT</b>
<b>204 Capsules/Month</b>
LUPKYNIS (voclosporin)
<b>INTRANASAL RHINITIS AGENTS</b>
<b>16 GM/Month (16 GM per inhaler)</b>
fluticasone propionate (Example brand: FLONASE)
XHANCE (fluticasone)
<b>17 GM/Month (17 GM per pump bottle)</b>
mometasone furo (Example brand: NASONEX)
mometasone furoate (Example brand: NASONEX)
<b>LIPOTROPICS, OTHER</b>
<b>34 Tablets or Capsules /Month</b>
ALTOPREV (lovastatin)
fluvastatin sodium (Example brand: LESCOL)
LESCOL XL (fluvastatin er)
LIVALO (pitavastatin)
rosuvastatin ca (Example brand: CRESTOR)
rosuvastatin calcium (Example brand: CRESTOR)
ZYPITAMAG (pitavastatin)
<b>LYSOSOMAL STORAGE DISORDER</b>
<b>17 Capsules/Month</b>
GALAFOLD (migalastat)
<b>MENOPAUSAL SYSTEM RELEIF</b>
<b>34 Tablets/Month</b>
VEOZAH (fezolinetant)
<b>MOVEMENT DISORDERS</b>
<b>34 Capsules/Month</b>



# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>MOVEMENT DISORDERS</b>
<b>34 Capsules/Month</b>
INGREZZA (valbenazine)
<b>MULTIPLE SCLEROSIS AGENTS IMMUNOMODULATORS</b>
<b>1 EA/Month (1 EA equals 1 syringe)</b>
AVONEX PEN 30 MCG/0.5 ML KIT (interferon beta-1a)
AVONEX PREFILLED SYR 30 MCG KT (interferon beta-1a)
<b>68 Capsules/Month</b>
TECFIDERA (dimethyl fumarate)
<b>136 Capsules/Month</b>
VUMERITY (diroximel fumarate)
<b>NARCOLEPSY H3 RECEPTOR ANTAG/INVERSE AGONIST</b>
<b>68 Tablets/Month</b>
WAKIX (pitolisant)
<b>ONCOLOGY AGENTS, ORAL</b>
<b>3 Capsules/Month</b>
NINLARO (ixazomib citrate)
<b>6 Tablets/Month</b>
INQOVI (decitabine)
<b>12 Tablets/Month</b>
XPOVIO 60 MG ONCE WEEKLY DOSE (selinexor)
<b>18 Tablets/Month</b>
ONUREG (azacitidine)
<b>21 Capsules/Month</b>
FRUZAQLA 5 MG CAPSULE (fruquintinib)
<b>30 Tablets/Month</b>
ERLEADA 240 MG TABLET (apalutamide)
ZEJULA (niraparib)
<b>30 Tablets or Capsules/Month</b>
IMBRUVICA 140 MG TABLET (ibrutinib)
IMBRUVICA 280 MG TABLET (ibrutinib)
IMBRUVICA 420 MG TABLET (ibrutinib)
IMBRUVICA 560 MG TABLET (ibrutinib)
IMBRUVICA 70 MG CAPSULE (ibrutinib)
<b>30 Capsules/Month</b>

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ONCOLOGY AGENTS, ORAL</b>
<b>30 Capsules/Month</b>
TALZENNA (talazoparib)
TALZENNA 0.1 MG (talazoparib)
TALZENNA 0.25 M (talazoparib)
TALZENNA 0.35 M (talazoparib)
TALZENNA 0.5 MG (talazoparib)
TALZENNA 0.75 M (talazoparib)
TALZENNA 1 MG S (talazoparib)
<b>30 Tablets/Month</b>
OJJAARA (mometotinib)
<b>32 Tablets/Month</b>
XPOVIO 80 MG TWICE WEEKLY DOSE (selinexor)
<b>34 Capsules/Month</b>
ROZLYTREK 100 MG CAPSULE (entrectinib)
<b>34 Tablets/Month</b>
GILOTRIF (afatinib dimaleate)
<b>34 Tablets/Month</b>
IDHIFA (enasidenib)
<b>34 Tablets/Month</b>
ALUNBRIG 180 MG TABLET (brigatinib)
ALUNBRIG 90 MG TABLET (brigatinib)
<b>34 Tablets/Month</b>
BALVERSA 5 MG TABLET (erdafitinib)
VIZIMPRO (dacomitinib)
<b>34 Tablets/Month</b>
AYVAKIT (avapritinib)
<b>34 Tablets/Month</b>
LORBRENA 100 MG TABLET (lorlatinib)
<b>34 Capsules/Month</b>
BOSULIF 50 MG CAPSULE (bosutinib)
<b>56 Tablets/Month</b>
OGSIVEO (nirogacestat)
<b>60 Tablets/Month</b>
JAYPIRCA (pirtobrutinib)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ONCOLOGY AGENTS, ORAL</b>
<b>60 Tablets/Month</b>
REZLIDHIA (olutasidenib)
<b>60 Tablets/Month</b>
AKEEGA (niraparib/abiraterone)
<b>60 Tablets/Month</b>
VANFLYTA (quizartinib)
<b>63 Tablets/Month</b>
KISQALI (ribociclib)
<b>64 Tablets/Month</b>
TRUQAP (capivasertib)
<b>68 Tablets/Month</b>
TEPMETKO (tepotinib)
XTANDI 80 MG TABLET (enzalutamide)
<b>68 Tablets/Month</b>
ZYTIGA 500 MG TABLET (abiraterone)
<b>68 Tablets/Month</b>
VERZENIO (abemaciclib)
<b>68 Capsules/Month</b>
CALQUENCE (acalabrutinib)
<b>68 Tablets/Month</b>
ALUNBRIG 30 MG TABLET (brigatinib)
<b>68 Tablets/Month</b>
BALVERSA 4 MG TABLET (erdafitinib)
TIBSOVO (ivosidenib)
<b>68 Capsules/Month</b>
VITRAKVI 100 MG CAPSULE (larotrectinib)
<b>68 Capsules/Month</b>
COPIKTRA (duvelisib)
<b>84 Capsules/Month</b>
FRUZAQLA 1 MG CAPSULE (fruquintinib)
<b>90 Tablets/Month</b>
ERLEADA 60 MG TABLET (apalutamide)
<b>90 Tablets/Month</b>
LUMAKRAS 320 MG TABLET (sotorasib)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ONCOLOGY AGENTS, ORAL</b>
<b>102 Capsules/Month</b>
ROZLYTREK 200 MG CAPSULE (entrectinib)
<b>102 Capsules/Month</b>
XTANDI 40 MG CAPSULE (ebzakytamide)
XTANDI 40 MG TABLET (enzalutamide)
<b>102 Capsules/Month</b>
ZEJULA (niraparib)
<b>102 Capsules/Month</b>
LENVIMA (lenvatinib)
<b>102 Tablets/Month</b>
LORBRENA 25 MG TABLET (lorlatinib)
<b>102 Tablets/Month</b>
BALVERSA 3 MG TABLET (erdafitinib)
XOSPATA (gilteritinib)
<b>120 Tablets/Month</b>
LUMAKRAS 120 MG TABLET (sotorasib)
<b>120 Tablets or Capsules/Month</b>
IMBRUVICA 140 MG CAPSULE (ibrutinib)
<b>120 Capsules/Month</b>
XALKORI 200 MG CAPSULE (crizotinib)
XALKORI 250 MG CAPSULE (crizotinib)
<b>136 Capsules/Month</b>
KOSELUGO 25 MG CAPSULE (selumetinib)
<b>136 Tablets/Month</b>
ZYTIGA 250 MG TABLET (abiraterone)
<b>136 Tablets/Month</b>
RUBRACA (rucaparib)
<b>136 Tablets/Month</b>
LYNPARZA (olaparib)
<b>136 Capsules/Month</b>
TASIGNA (nilotinib)
TURALIO (pexidartinib)
<b>136 Tablets/Month</b>
YONSA (abiraterone)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ONCOLOGY AGENTS, ORAL</b>
<b>136 Tablets/Month</b>
NUBEQA (darolutamide)
<b>136 Tablets/Month</b>
TABRECTA (capmatinib)
<b>136 Tablets/Month</b>
TUKYSA (tucatinib)
<b>170 Tablets/Month</b>
LYTGOBI (futibatinib)
<b>180 Tablets/Month</b>
KRAZATI (adagrasib)
<b>204 Capsules/Month</b>
BRAFTOVI 75 MG CAPSULE (encorafenib)
<b>204 Tablets/Month</b>
NERLYNX (neratinib)
<b>204 Tablets/Month</b>
MEKTOVI (binimetinib)
<b>204 Capsules/Month</b>
VITRAKVI 25 MG CAPSULE (larotrectinib)
<b>204 Capsules/Month</b>
BOSULIF 100 MG CAPSULE (bosutinib)
<b>204 Tablets/Month</b>
OGSIVEO (nirogacestat)
<b>240 Pellets/Month</b>
XALKORI 150 MG PELLETT (crizotinib)
XALKORI 20 MG PELLETT (crizotinib)
XALKORI 50 MG PELLETT (crizotinib)
<b>272 Capsules/Month</b>
RYDAPT (midostaurin)
<b>272 Capsules/Month</b>
KOSELUGO 10 MG CAPSULE (selumetinib)
<b>272 Capsules/Month</b>
TAZVERIK (tazemetostat)
<b>272 Capsules/Month</b>
IWILFIN (eflornithine)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>ONCOLOGY AGENTS, ORAL</b>
<b>360 Tablets/Month</b>
SCEMBLIX (asciminib)
<b>408 Packs/Month</b>
ROZLYTREK 50 MG PELLETT PACKET (entrectinib)
<b>OPHTHALMICS, GLAUCOMA – PROSTAGLANDINS</b>
<b>2 Bottles/Month (2.5 ml equals 1 Bottle)</b>
VUITY (pilocarpine)
<b>5 ML/Month</b>
bimatoprost (Example brand: LUMIGAN)
LUMIGAN (bimatoprost)
TRAVATAN Z (travoprost)
XALATAN (latanoprost)
<b>OTC COVID - 19 TESTING KITS</b>
<b>8 Tests/Month</b>
covid-19 antigen test kit
<b>PLATELET AGGREGATION</b>
<b>34 Tablets/Month</b>
aspirin-omeprazole (Example brand: YOSPRALA DR)
<b>PROTON PUMP INHIBITOR</b>
<b>34 Tablets or Capsules /Month</b>
DEXILANT DR 30 MG CAPSULE (dexlansoprazole)
FT ACID REDUCER DR 15 MG CAP (lansoprazole)
NEXIUM DR 20 MG CAPSULE (esomeprazole magnesium)
omeprazole dr 10 mg capsule (Example brand: PRILOSEC)
PREVACID 24HR DR 15 MG CAPSULE (lansoprazole)
PREVACID DR 15 MG SOLUTAB (lansoprazole)
PROTONIX DR 20 MG TABLET (pantoprazole sodium)
<b>68 Tablets or Capsules or Packet/Month</b>
ACIPHEX (rabeprazole sodium)
DEXILANT DR 60 MG CAPSULE (dexlansoprazole)
NEXIUM DR 10 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 2.5 MG PACKET (esomeprazole magnesium)
NEXIUM DR 20 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 40 MG CAPSULE (esomeprazole magnesium)

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>PROTON PUMP INHIBITOR</b>
<b>68 Tablets or Capsules or Packet/Month</b>
NEXIUM DR 40 MG PACKET (esomeprazole mag trihydrate)
NEXIUM DR 5 MG PACKET (esomeprazole magnesium)
omeprazole dr 20 mg capsule (Example brand: PRILOSEC)
omeprazole dr 40 mg capsule (Example brand: PRILOSEC)
PREVACID DR 30 MG CAPSULE (lansoprazole)
PREVACID DR 30 MG SOLUTAB (lansoprazole)
PRILOSEC DR 10 MG SUSPENSION (omeprazole magnesium)
PRILOSEC DR 2.5 MG SUSPENSION (omeprazole magnesium)
PROTONIX 40 MG SUSPENSION (pantoprazole)
PROTONIX DR 40 MG TABLET (pantoprazole sodium)
ZEGERID 20 MG CAPSULE (omeprazole/sodium bicarbonate)
ZEGERID 20 MG PACKET (omeprazole/sodium bicarbonate)
ZEGERID 40 MG CAPSULE (omeprazole/sodium bicarbonate)
ZEGERID 40 MG PACKET (omeprazole/sodium bicarbonate)
<b>PULMONARY ARTERIAL HYPERTENSION</b>
<b>34 Tablets/Month</b>
OPSUMIT (macitentan)
<b>68 Tablets/Month</b>
ADCIRCA (tadalafil)
ALYQ (tadalafil)
LETAIRIS (ambrisentan)
TRACLEER (bosentan)
UPTRAVI (selexipag)
<b>102 Tablets/Month</b>
ADEMPAS (riociguat)
<b>SEDATIVE HYPNOTICS</b>
<b>10 Tablets/Month</b>
zolpidem tartrate (Example brand: INTERMEZZO)
<b>34 Tablets/Month</b>
QUVIVIQ (daridorexant)
<b>SICKLE CELL ANEMIA</b>
<b>102 Tablets/Month</b>

# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>SICKLE CELL ANEMIA</b>
<b>102 Tablets/Month</b>
OXBRYTA (voxelotor)
<b>SKELETAL MUSCLE RELAXANTS</b>
<b>84 Tablets/Month</b>
SOMA 250 MG TABLET (carisoprodol)
<b>136 Tablets/Month</b>
SOMA 350 MG TABLET (carisoprodol)
<b>SOMATOSTATIN AGENTS</b>
<b>112 Tablets/Month</b>
MYCAPSSA (octreotide)
<b>STIMULANTS</b>
<b>136 Tablets, Capsules, or Patches/Month</b>
ADDERALL (dextroamphetamine/amphetamine)
ADDERALL XR (dextroamphetamine/amphetamine)
ADHANSIA XR (methylphenidate)
ADZENYS XR-ODT (amphetamine)
APTENSIO XR (methylphenidate hcl)
AZSTARYS (serdexmethylphenidate/dexmethylphenidate) (Limited to 34 tablets/claim)
CONCERTA (methylphenidate hcl)
COTEMPLA XR-ODT (methylphenidate)
DAYTRANA (methylphenidate hcl)
DEXEDRINE (dextroamphetamine sulfate)
dextroamphetamine sulfate er (Example brand: DEXEDRINE)
EVEKEO (amphetamine)
EVEKEO ODT (amphetamine)
FOCALIN (dexmethylphenidate hcl)
FOCALIN XR (dexmethylphenidate hcl)
JORNAY PM (methylphenidate er)
methamphetamine hcl (Example brand: DESOXYN)
methylphenidate er (Example brand: METADATE ER)
methylphenidate er (Example brand: METHYLIN)
methylphenidate hcl (Example brand: METHYLIN CHEW)
methylphenidate hcl cd (Example brand: METADATE CD)



# Quantity Limit Drugs and Diabetic Supplies

Effective Date: June 1, 2024

<b>STIMULANTS</b>
<b>136 Tablets, Capsules, or Patches/Month</b>
methylphenidate hcl er (cd) (Example brand: METADATE CD)
methylphenidate la (Example brand: RITALIN LA)
MYDAYIS (dextroamphetamine/amphetamine)
QUILLICHEW ER (methylphenidate hcl)
RELEXXII (methylphenidate hcl)
RELEXXII (methylphenidate)
RITALIN (methylphenidate hcl)
RITALIN LA (methylphenidate hcl)
VYVANSE (lisdexamfetamine dimesylate)
XELSTRYM (dextroamphetamine) (Limited to 34 Patches/Claim)
ZENZEDI (dextroamphetamine sulfate)
<b>STIMULANTS, RELATED AGENTS - WAKE PROMOTING</b>
<b>136 Tablets or Capsules/Month</b>
NUVIGIL (armodafinil)
PROVIGIL (modafinil)
SUNOSI (solriamfetol)
<b>Thrombopoietin Receptor Agonist</b>
<b>68 Tablets/Month</b>
ALVAIZ (eltrombopag)
<b>UTERINE DISORDER TREATMENTS</b>
<b>34 Tablets/Month</b>
ORLISSA 150 MG TABLET (elagolix sodium)
<b>68 Tablets/Month</b>
ORLISSA 200 MG TABLET (elagolix sodium)
<b>VAGINAL ESTROGEN PREPARATIONS</b>
<b>1 EA/3 Month (1 EA equals 1 vaginal ring)</b>
ESTRING (estradiol)
FEMRING (estradiol acetate)