



QUANTITY LIMIT CRITERIA FOR APPROVAL

1. ONE of the following:
 - a. The requested quantity (dose) does NOT exceed the program quantity limit
OR
 - b. Information has been provided that fulfills the criteria listed under the "Allowed exception cases/diagnoses" (if applicable)
OR
 - c. The requested quantity (dose) exceeds the program quantity limit AND ONE of the following:
 - i. BOTH of the following:
 1. The requested agent does not have a maximum FDA labeled dose for the requested indication
AND
 2. Information has been provided to support therapy with a higher dose for the requested indication
OR
 - ii. BOTH of the following:
 1. The requested quantity (dose) does NOT exceed the maximum FDA labeled dose for the requested indication
AND
 2. Information has been provided to support why the requested quantity (dose) cannot be achieved with a lower quantity of a higher strength that does NOT exceed the program quantity limit
OR
 - iii. BOTH of the following:
 1. The requested quantity (dose) exceeds the maximum FDA labeled dose for the requested indication
AND
 2. Information has been provided to support therapy with a higher dose for the requested indication

Length of Approval: up to 12 months

Program	Target Agents Note: Brand and generic agents are subject to quantity limits	Dosage/Strength	Quantity Limit (Units/Day or as noted)	Allowed exception cases/ diagnoses
Accrufer PAQL	**Accrufer QL information is included in the individual program document			
Acute Migraine Agents PAQL	**Acute Migraine Agents QL information is included in the individual program document			
ADHD PS	**ADHD QL information is included in the individual program document			
Afrezza PAQL	**Afrezza QL information is included in the individual program document			
Alinia QL	**Alinia QL information is included in the individual program document			
Amifampridine PAQL	**Amifampridine QL information is included in the individual program document			
Ampyra PAQL	**Ampyra QL information is included in the individual program document			
Androgens and Anabolic Steroids PAQL	**Androgen and Anabolic Steroids QL information is included in the individual program document			
Anti-COVID19 Agents QL	**Anti-COVID19 Agents QL information is included in the individual program document			
Antidepressants QL	**Antidepressants QL information is included in the individual program document			
Antiemetic Agents QL	**Antiemetic Agents QL information is included in the individual program document			
Antifungal Agents (Brexafemme Cresemba Noxafil Vfend) PAQL	**Antifungal Agents (Brexafemme Cresemba Noxafil Vfend) QL information is included in the individual program document			
Antifungal Agents (Ciclopirox, Efinaconazole, Itraconazole, Tavaborole, Terbinafine) PAQL	**Antifungal Agents (Ciclopirox, Efinaconazole, Itraconazole, Tavaborole, Terbinafine) QL information is included in the individual program document			
Anti-Influenza QL	**Anti-Influenza QL information is included in the individual program document			
Antiretroviral PS AR0722 r0123	**Antiretroviral QL information is included in the individual program document			
ARB/Renin Inhibitors PS AR0722	Quantity limits apply to FlexRx Closed, FlexRx Open, FocusRx, GenRx Closed, GenRx Open, Health Insurance Marketplace, and KeyRx. Angiotensin II Receptor Antagonists (ARBs), ARB Combinations			
	Atacand (candesartan)	4 mg tablets	2 tablets	
	Atacand (candesartan)	8 mg tablets	2 tablets	
	Atacand (candesartan)	16 mg tablets	2 tablets	
	Atacand (candesartan)	32 mg tablets	1 tablet	
	Atacand HCT (candesartan/hydrochlorothiazide)	16 mg/12.5 mg tablets	1 tablet	
	Atacand HCT (candesartan/hydrochlorothiazide)	32 mg/12.5 mg tablets	1 tablet	
	Atacand HCT (candesartan/hydrochlorothiazide)	32 mg/25 mg tablets	1 tablet	
	Avapro (irbesartan)	75 mg tablets	1 tablet	
	Avapro (irbesartan)	150 mg tablets	1 tablet	
	Avapro (irbesartan)	300 mg tablets	1 tablet	
	Avalide (irbesartan/hydrochlorothiazide)	150 mg/12.5 mg tablets	1 tablet	
	Avalide (irbesartan/hydrochlorothiazide)	300 mg/12.5 mg tablets	1 tablet	
	Azor (amlodipine/olmesartan medoxomil)	5 mg/20 mg tablets	1 tablet	

BlueCross BlueShield BluePlus of Minnesota Quantity Limit Program Criteria

Azor (amlodipine/olmesartan medoxomil)	5 mg/40 mg tablets	1 tablet
Azor (amlodipine/olmesartan medoxomil)	10 mg/20 mg tablets	1 tablet
Azor (amlodipine/olmesartan medoxomil)	10 mg/40 mg tablets	1 tablet
Benicar (olmesartan)	5 mg tablets	2 tablets
Benicar (olmesartan)	20 mg tablets	1 tablet
Benicar (olmesartan)	40 mg tablets	1 tablet
Benicar HCT (olmesartan/hydrochlorothiazide)	20 mg/12.5 mg tablets	1 tablet
Benicar HCT (olmesartan/hydrochlorothiazide)	40 mg/12.5 mg tablets	1 tablet
Benicar HCT (olmesartan/hydrochlorothiazide)	40 mg/25 mg tablets	1 tablet
Cozaar (losartan)	25 mg tablets	2 tablets
Cozaar (losartan)	50 mg tablets	2 tablets
Cozaar (losartan)	100 mg tablets	1 tablet
Diovan (valsartan)	40 mg tablets	2 tablets
Diovan (valsartan)	80 mg tablets	2 tablets
Diovan (valsartan)	160 mg tablets	2 tablets
Diovan (valsartan)	320 mg tablets	1 tablet
Diovan HCT (valsartan/hydrochlorothiazide)	80 mg/12.5 mg tablets	1 tablet
Diovan HCT (valsartan/hydrochlorothiazide)	160 mg/12.5 mg tablets	1 tablet
Diovan HCT (valsartan/hydrochlorothiazide)	160 mg/25 mg tablets	1 tablet
Diovan HCT (valsartan/hydrochlorothiazide)	320 mg/12.5 mg tablets	1 tablet
Diovan HCT (valsartan/hydrochlorothiazide)	320 mg/25 mg tablets	1 tablet
Edarbi (azilsartan)	40 mg tablets	1 tablet
Edarbi (azilsartan)	80 mg tablets	1 tablet
Edarbyclor (azilsartan/chlorthalidone)	40 mg/12.5 mg tablets	1 tablet
Edarbyclor (azilsartan/chlorthalidone)	40 mg/25 mg tablets	1 tablet
Exforge (amlodipine/valsartan)	5 mg/160 mg tablets	1 tablet
Exforge (amlodipine/valsartan)	5 mg/320 mg tablets	1 tablet
Exforge (amlodipine/valsartan)	10 mg/160 mg tablets	1 tablet
Exforge (amlodipine/valsartan)	10 mg/320 mg tablets	1 tablet
Exforge HCT (amlodipine/valsartan/hydrochlorothiazide)	5 mg/160 mg/12.5 mg tablets	1 tablet
Exforge HCT (amlodipine/valsartan/hydrochlorothiazide)	5 mg/160 mg/25 mg tablets	1 tablet
Exforge HCT (amlodipine/valsartan/hydrochlorothiazide)	10 mg/160 mg/12.5 mg tablets	1 tablet
Exforge HCT (amlodipine/valsartan/hydrochlorothiazide)	10 mg/160 mg/25 mg tablets	1 tablet
Exforge HCT (amlodipine/valsartan/hydrochlorothiazide)	10 mg/320 mg/25 mg tablets	1 tablet
Hyzaar (losartan/hydrochlorothiazide)	50 mg/12.5 mg tablets	1 tablet
Hyzaar (losartan/hydrochlorothiazide)	100 mg/12.5 mg tablets	1 tablet
Hyzaar (losartan/hydrochlorothiazide)	100 mg/25 mg tablets	1 tablet
Micardis (telmisartan)	20 mg tablets	1 tablet
Micardis (telmisartan)	40 mg tablets	1 tablet
Micardis (telmisartan)	80 mg tablets	1 tablet
Micardis HCT (telmisartan/hydrochlorothiazide)	40 mg/12.5 mg tablets	1 tablet
Micardis HCT (telmisartan/hydrochlorothiazide)	80 mg/12.5 mg tablets	2 tablets
Micardis HCT (telmisartan/hydrochlorothiazide)	80 mg/25 mg tablets	1 tablet
Teveten HCT (eprosartan/hydrochlorothiazide)	600 mg/12.5 mg tablets	1 tablet
Teveten HCT (eprosartan/hydrochlorothiazide)	600 mg/25 mg tablets	1 tablet
Tribenzor (olmesartan/amlodipine/hydrochlorothiazide)	20 mg/5 mg/12.5 mg tablets	1 tablet
Tribenzor (olmesartan/amlodipine/hydrochlorothiazide)	40 mg/5 mg/12.5 mg tablets	1 tablet
Tribenzor (olmesartan/amlodipine/hydrochlorothiazide)	40 mg/5 mg/25 mg tablets	1 tablet
Tribenzor (olmesartan/amlodipine/hydrochlorothiazide)	40 mg/10 mg/12.5 mg tablets	1 tablet
Tribenzor (olmesartan/amlodipine/hydrochlorothiazide)	40 mg/10 mg/25 mg tablets	1 tablet
Twynsta (telmisartan/amlodipine)	40 mg/5 mg tablets	1 tablet
Twynsta (telmisartan/amlodipine)	40 mg/10 mg tablets	1 tablet
Twynsta (telmisartan/amlodipine)	80 mg/5 mg tablets	1 tablet
Twynsta (telmisartan/amlodipine)	80 mg/10 mg tablets	1 tablet
Valsartan	20 mg/5 mL solution	80 mL
Renin Inhibitors, Renin Inhibitor Combinations		
Tekturna (aliskiren)	150 mg tablets	1 tablet
Tekturna (aliskiren)	300 mg tablets	1 tablet
Tekturna HCT (aliskiren/hydrochlorothiazide)	150 mg/12.5 mg tablets	1 tablet
Tekturna HCT (aliskiren/hydrochlorothiazide)	150 mg/25 mg tablets	1 tablet
Tekturna HCT (aliskiren/hydrochlorothiazide)	300 mg/12.5 mg tablets	1 tablet
Tekturna HCT (aliskiren/hydrochlorothiazide)	300 mg/25 mg tablets	1 tablet

Arikayce PAQL	**Arikayce QL information is included in the individual program document
ATTR Amyloidosis PAQL	**ATTR Amyloidosis QL information is included in the individual program document
Atypical Antipsychotics STQL	**Atypical Antipsychotics QL information is included in the individual program document
Atypical Antipsychotics, Extended Maintenance Agents AR0423 r0124	**Atypical Antipsychotics Extended Maintenance QL information is included in the individual program document
Baclofen PAQL	**Baclofen QL information is included in the individual program document
Bempedoic Acid PAQL	**Bempedoic Acid QL information is included in the individual program document
Benign Prostatic Hypertrophy (BPH) PS AR0722 r1022	**BPH QL information is included in the individual program document
Biologic Immunomodulators PAQL	**Biologic Immunomodulators QL information is included in the individual program document

Bisphosphonates QL	**Bisphosphonates QL information is included in the individual program document
Bonjesta Diclegis PAQL	**Bonjesta Diclegis QL information is included in the individual program document
Buprenorphine, buprenorphine-naloxone QL	**Buprenorphine, buprenorphine-naloxone QL information is included in the individual program document
Cablivi PAQL	**Cablivi QL information is included in the individual program document
Camzyos PAQL	**Camzyos QL information is included in the individual program document
CFTR PAQL	**CFTR QL information is included in the individual program document
CGRP PAQL	**CGRP QL information is included in the individual program document
Cibinqo PAQL	**Cibinqo QL information is included in the individual program document
CMV QL	**CMV QL information is included in the individual program document
Coagulation Factor VIIa PAQL	**Coagulation Factor VIIa QL information is included in the individual program document
Combination NSAID PAQL	**Combination NSAID QL information is included in the individual program document
Constipation Agents PAQL	**Constipation Agents QL information is included in the individual program document
DPP-4 Inhibitors STQL	**DPP-4 Inhibitors QL information is included in the individual program document
ED Agents PAQL	**ED Agents QL information is included in the individual program document
Egrifta PAQL	**Egrifta QL information is included in the individual program document
Elaqolix/Relugolix PAQL	**Elaqolix QL information is included in the individual program document
Emflaza PAQL	**Emflaza QL information is included in the individual program document
Empaveli PAQL	**Empaveli QL information is included in the individual program document
Ensprynq PAQL	**Ensprynq QL information is included in the individual program document
Evrysdi PAQL	**Evrysdi QL information is included in the individual program document
Eysuvis PAQL	**Eysuvis QL information is included in the individual program document
Factor VIII and von Willebrand Factor PAQL	**Factor VIII and von Willebrand Factor QL information is included in the individual program document
Fintepla PAQL	**Fintepla QL information is included in the individual program document
Gabapentin ER STQL	**Gabapentin ER QL information is included in the individual program document
Galafold PAQL	**Galafold QL information is included in the individual program document
GLP-1 Agonists PAQL	**GLP-1 QL information is included in the individual program document
Glucose Test Strips/Meters QL	**Glucose Test Strips/Meters QL information is included in the individual program document
Gonadotropin Hormones PAQL	**Gonadotropin Hormones QL information is included in the individual program document
HCN Channel Blocker PAQL	**HCN Channel Blocker QL information is included in the individual program document
Hemlibra PAQL	**Hemlibra QL information is included in the individual program document
Hemophilia Factor IX PAQL	**Hemophilia Factor IX QL information is included in the individual program document
Hepatitis C Direct Acting Antivirals PAQL	**Hepatitis C Direct Acting Antivirals QL information is included in the individual program document
Hereditary Angioedema PAQL	**Hereditary Angioedema QL information is included in the individual program document
Hetlioz PAQL	**Hetlioz QL information is included in the individual program document
HoFH PAQL	**HoFH QL information is included in the individual program document
HSDD PAQL	**HSDD QL information is included in the individual program document
Hyperhidrosis PAQL	**Hyperhidrosis QL information is included in the individual program document
Imcivree PAQL	**Imcivree QL information is included in the individual program document
Inhaled Antibiotics Duplicate Therapy PAQL	**Inhaled Antibiotics Duplicate Therapy QL information is included in the individual program document
Insomnia STQL	**Insomnia Agents QL information is included in the individual program document
Insulin Combination STQL	**Insulin Combination QL information is included in the individual program document

Insulin Pumps QL	**Insulin Pumps QL information is included in the individual program document
Interleukin (IL)-13 Antagonists PAQL	**Interleukin-13 Antagonists QL information is included in the individual program document
Interleukin (IL)-1 Inhibitors PAQL	**Interleukin-1 Inhibitors QL information is included in the individual program document
Interleukin (IL)-4 Inhibitors PAQL	**Interleukin-4 Inhibitors QL information is included in the individual program document
Interleukin (IL)-5 Inhibitors PAQL	**Interleukin-5 Inhibitors QL information is included in the individual program document
Interstitial Lung Disease PAQL	**Interstitial Lung Disease QL information is included in the individual program document
Iron Chelation PAQL	**Iron Chelation QL information is included in the individual program document
Isturisa PAQL	**Isturisa QL information is included in the individual program document
Ivermectin QL	**Ivermectin QL information is included in the individual program document
Jynarque PAQL	**Jynarque QL information is included in the individual program document
Kerendia PAQL	**Kerendia QL information is included in the individual program document
Ketorolac QL	**Ketorolac QL information is included in the individual program document
Keveyis PAQL	**Keveyis QL information is included in the individual program document
Korlym PAQL	**Korlym QL information is included in the individual program document
Long Acting Insulin	**Long Acting Insulin QL information is included in the individual program document
Low Molecular Weight Heparins (LMWH) and Arixtra	**Low Molecular Weight Heparins (LMWH) and Arixtra QL information is included in the individual program document
Lucemyra PAQL	**Lucemyra QL information is included in the individual program document
Lupus PAQL	**Lupus QL information is included in the individual program document
Lyrica and Savella STQ	**Lyrica and Savella QL information is included in the individual program document
Metformin ER STQL	**Metformin ER QL information is included in the individual program document
Multiple Sclerosis PAQL	**Multiple Sclerosis QL information is included in the individual program document
Nasal Antiepileptics QL	**Nasal antiepileptics QL information is included in the individual program document
Nasal Inhalers QL	**Nasal inhalers QL information is included in the individual program document
Natpara PAQL	**Natpara QL information is included in the individual program document
Neurotrophic Keratitis PAQL	**Neurotrophic Keratitis QL information is included in the individual program document
Nocturia PAQL	**Nocturia QL information is included in the individual program document
Northera PAQL	**Northera QL information is included in the individual program document
Ocaliva PAQL	**Ocaliva QL information is included in the individual program document
Ophthalmic Immunomodulators PAQL	**Ophthalmic Immunomodulators QL information is included in the individual program document
Ophthalmic Prostaglandins PS AR0722	**Ophthalmic Prostaglandins QL information is included in the individual program document
Opioids ER PAQL	**Opioids ER QL information is included in the individual program document
Opioids IR NTT with QL	**Opioids IR QL information is included in the individual program document
Opzelura PAQL	**Opzelura QL information is included in the individual program document
Oral Anticoagulant Agents QL PAQL	**Oral Anticoagulant Agents QL information is included in the individual program document
Oral Immunotherapy PAQL	**Oral Immunotherapy QL information is included in the individual program document
Oral Inhalers QL	**Oral Inhalers QL information is included in the individual program document
Oral PAH Agents PAQL	**Oral PAH Agents QL information is included in the individual program document
Otezla PAQL	**Otezla QL information is included in the individual program document
Oxbryta PAQL	**Oxbryta QL information is included in the individual program document
Oxybate PAQL	**Oxybate QL information is included in the individual program document

Pain Medications QL	**Pain Medications QL information is included in the individual program document		
Parathyroid Hormone Analogs for Osteoporosis PAQL	** Parathyroid Hormone Analogs for Osteoporosis QL information is included in the individual program document		
PCSK-9 Inhibitors PAQL	**PCSK-9 Inhibitors QL information is included in the individual program document		
Peanut Allergy PAQL	**Peanut Allergy QL information is included in the individual program document		
PPIs PS AR0723 r0324	Quantity limit applies to FlexRx Closed, FlexRx Open, FocusRx, GenRx Closed, GenRx Open, Health Insurance Marketplace, and KeyRx.		
	Aciphex (rabeprazole)	20 mg delayed-release tablets	1 tablet
	Aciphex Sprinkle (rabeprazole)	5 mg capsule sprinkle	1 capsule
	Aciphex Sprinkle (rabeprazole)	10 mg capsule sprinkle	1 capsule
	Esomeprazole strontium	49.3 mg capsule	1 capsule
	Dexilant (dexlansoprazole)	30 mg delayed-release capsules	1 capsule
	Dexilant (dexlansoprazole)	60 mg delayed-release capsules	1 capsule
	Konvomep	40mg/20ml suspension	20 ml
	Nexium (esomeprazole)	20 mg delayed-release capsules	1 capsule
	Nexium (esomeprazole)	40 mg delayed-release capsules	1 capsule
	Nexium (esomeprazole)	10 mg delayed-release oral suspension	1 packet
	Nexium (esomeprazole)	20 mg delayed-release oral suspension	1 packet
	Nexium (esomeprazole)	40 mg delayed-release oral suspension	1 packet
	Nexium (esomeprazole)	2.5 mg susp pack	1 packet
	Nexium (esomeprazole)	5 mg susp pack	1 packet
	Prevacid (lansoprazole)	15 mg delayed-release capsules	1 capsule
	Prevacid (lansoprazole)	30 mg delayed-release capsules	1 capsule
	Prevacid (lansoprazole)	15 mg oral suspension (packets)	1 packet
	Prevacid (lansoprazole)	30 mg oral suspension (packets)	1 packet
	Prevacid (lansoprazole)	15 mg delayed-release orally disintegrating tablet	1 tablet
	Prevacid (lansoprazole)	30 mg delayed-release orally disintegrating tablet	1 tablet
	omeprazole	10 mg delayed-release capsules	1 capsule
	omeprazole	20 mg delayed-release capsules	1 capsule
	omeprazole	40 mg delayed-release capsules	1 capsule
	Prilosec (omeprazole)	2.5 mg oral suspension (packets)	2 packets
	Prilosec (omeprazole)	10 mg oral suspension (packets)	1 packet
	Protonix (pantoprazole)	40 mg delayed-release oral suspension (packets)	1 packet
	Protonix (pantoprazole)	20 mg delayed-release tablets	1 tablet
	Protonix (pantoprazole)	40 mg delayed-release tablets	1 tablet
	Voquezna (vonoprazan)	10 mg tablets	1 tablet
	Voquezna (vonoprazan)	20 mg tablets	1 tablet
	Zegerid (omeprazole/sodium bicarbonate)	20 mg immediate-release capsules	1 capsule
	Zegerid (omeprazole/sodium bicarbonate)	40 mg immediate-release capsules	1 capsule
	Zegerid (omeprazole/sodium bicarbonate)	20 mg powder for oral suspension (packets)	1 packet
	Zegerid (omeprazole/sodium bicarbonate)	40 mg powder for oral suspension (packets)	1 packet
Pseudobulbar Affect PAQL	**Pseudobulbar Affect QL information is included in the individual program document		
Pyrukynd PAQL	**Pyrukynd QL information is included in the individual program document		
Radicava PAQL	**Radicava QL information is included in the individual program document		
Rapid to Intermediate Acting Insulin	**Rapid to Intermediate Acting Insulin QL information is included in the individual program document		
Recorlev PAQL	**Recorlev QL information is included in the individual program document		
Rho Kinase Inhibitor	**Rho Kinase Inhibitor QL information is included in the individual program document		
SA Oncology PAQL	**SA Oncology QL information is included in the individual program document		
Samsca PAQL	**Samsca QL information is included in the individual program document		
SGLT Inhibitors STQL	**SGLT Inhibitors QL information is included in the individual program document		
Somatostatin Analogs PAQL	**Somatostatin Analogs QL information is included in the individual program document		
SSIA PAQL	**SSIA QL information is included in the individual program document		
Statins PS AR0723_r1123	Quantity limits apply to FlexRx Closed, FlexRx Open, FocusRx, GenRx Closed, GenRx Open, Health Insurance Marketplace, and KeyRx.		
	Altoprev (lovastatin extended release)	20 mg tablets	1 tablet
	Altoprev (lovastatin extended release)	40 mg tablets	1 tablet
	Altoprev (lovastatin extended release)	60 mg tablets	1 tablet
	Atorvaliq (atorvastatin)	20mg/5ml suspension	20ml
	Crestor (rosuvastatin)	5 mg tablets	1½ tablets
	Crestor (rosuvastatin)	10 mg tablets	1½ tablets
	Crestor (rosuvastatin)	20 mg tablets	1½ tablets

1. Hypersecretory disease (i.e., Zollinger-Ellison Syndrome), Barrett's esophagitis, or esophageal stricture - approve 12 months
OR
2. Conventional therapy failure (failure of standard labeled dosing with the requested agent) - approve 12 months
OR
3. H pylori treatment - approve once

BlueCross BlueShield BluePlus of Minnesota Quantity Limit Program Criteria

Crestor (rosuvastatin)	40 mg tablets	1 tablet
Ezallor Sprinkle (rosuvastatin)	5 mg capsules	1 capsule
Ezallor Sprinkle (rosuvastatin)	10 mg capsules	2 capsule
Ezallor Sprinkle (rosuvastatin)	20 mg capsules	3 capsule
Ezallor Sprinkle (rosuvastatin)	40 mg capsules	4 capsule
ezetimibe/atorvastatin	10-10mg	1 tablet
ezetimibe/atorvastatin	10-20mg	1 tablet
ezetimibe/atorvastatin	10-40mg	1 tablet
ezetimibe/atorvastatin	10-80mg	1 tablet
Flolipid (simvastatin oral suspension)	20 mg/5 mL suspension	5 mLs
Flolipid (simvastatin oral suspension)	40 mg/5 mL suspension	10 mLs
fluvastatin	20 mg capsules	2 capsules
fluvastatin	40 mg capsules	2 capsules
Lescol XL (fluvastatin extended release)	80 mg tablets	1 tablet
Lipitor (atorvastatin)	10 mg tablets	1½ tablets
Lipitor (atorvastatin)	20 mg tablets	1½ tablets
Lipitor (atorvastatin)	40 mg tablets	1½ tablets
Lipitor (atorvastatin)	80 mg tablets	1 tablet
Livalo (pitavastatin)	1 mg tablets	1½ tablets
Livalo (pitavastatin)	2 mg tablets	1½ tablets
Livalo (pitavastatin)	4 mg tablets	1 tablet
lovastatin	10 mg tablets	2 tablets
lovastatin	20 mg tablets	2 tablets
lovastatin	40 mg tablets	2 tablets
pravastatin	10 mg tablets	1½ tablets
Pravachol (pravastatin)	20 mg tablets	1½ tablets
Pravachol (pravastatin)	40 mg tablets	1½ tablets
pravastatin	80 mg tablets	1 tablet
Roszet (ezetimibe/rosuvastatin)	5 mg/10 mg tablet	1 tablet
Roszet (ezetimibe/rosuvastatin)	10 mg/10 mg tablet	1 tablet
Roszet (ezetimibe/rosuvastatin)	20 mg/10 mg tablet	1 tablet
Roszet (ezetimibe/rosuvastatin)	40 mg/10 mg tablet	1 tablet
Vytorin (ezetimibe/simvastatin)	10 mg/ 10 mg tablets	1 tablet
Vytorin (ezetimibe/simvastatin)	10 mg/ 20 mg tablets	1 tablet
Vytorin (ezetimibe/simvastatin)	10 mg/ 40 mg tablets	1 tablet
Vytorin (ezetimibe/simvastatin)	10 mg/ 80 mg tablets	1 tablet
simvastatin	5 mg tablets	1½ tablets
Zocor (simvastatin)	10 mg tablets	1½ tablets
Zocor (simvastatin)	20 mg tablets	2 tablets
Zocor (simvastatin)	40 mg tablets	1½ tablets
Zocor (simvastatin)	80 mg tablets	1 tablet
Zypitamaq (pitavastatin)	1 mg	1½ tablets
Zypitamaq (pitavastatin)	2 mg	1½ tablets
Zypitamaq (pitavastatin)	4 mg	1 tablets

Substrate Reduction Therapy PAQL **Substrate Reduction Therapy QL information is included in the individual program document

Sucraid PAQL **Sucraid QL information is included in the individual program document

Sucrafate Suspension PAQL **Sucrafate Suspension QL information is included in the individual program document

Sunosi PAQL **Sunosi QL information is included in the individual program document

Tarpeyo PAQL **Tarpeyo QL information is included in the individual program document

Tavneos PAQL **Tavneos QL information is included in the individual program document

Thrombopoietin Receptor Agonists PAQL **Thrombopoietin Receptor Agonists QL information is included in the individual program document

TIRF PAQL **TIRF QL information is included in the individual program document

Topical Actinic Keratosis, Basal Cell Carcinoma, and Genital Warts Agents PAQL **Topical Actinic Keratosis, Basal Cell Carcinoma, and Genital Warts Agents QL information is included in the individual program document

Topical Corticosteroids PS AR1023_r0124 Quantity limits apply to FlexRx Closed, FlexRx Open, FocusRx, GenRx Closed, GenRx Open, Health Insurance Marketplace, and KeyRx.

Aclovate (acclometasone dipropionate)	0.05% cream (15 gm, 45 gm, 60 gm)	120 grams/30 days
Aclovate (acclometasone dipropionate)	0.05% ointment (15 gm, 45 gm, 60 gm)	120 grams/30 days
Ala Scalp (hydrocortisone)	2% lotion (29.6 mL, 59.2 mL)	118.4 mL/30 days
ApexiCon E (diflorasone diacetate)	0.05% emollient cream (30 mg, 60 gm)	120 grams/30 days
Aristocort HP (triamcinolone acetonide)	0.5% ointment (15 gm)	120 grams/30 days
Bryhali (halobetasol propionate)	0.01% lotion (60 gm, 100 gm)	200 grams/30 days
Capex (fluocinolone acetonide)	0.01% shampoo (120 mL)	840 mL/28 days
Clobex (clobetasol propionate)	0.05% spray (59 mL, 125 mL)	236 mL/28 days
Clobex (clobetasol propionate)	0.05% lotion (59 mL, 118 mL)	177 mL/28 days
Clobex (clobetasol propionate)	0.05% shampoo (118 mL)	236 mL/28 days
Cloderm (clocortolone pivalate)	0.1% cream (45 gm, 75 gm, 90 gm)	120 grams/30 days
Cordran (flurandrenolide)	4 mcg/cm2 (80 in x 3 in)	1 box/30 days
Cordran (flurandrenolide)	0.025% cream (120 gm)	120 grams/30 days
Cordran (flurandrenolide)	0.05% cream (60 gm, 120 gm)	120 grams/30 days

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Cordran (flurandrenolide)	0.05% lotion (120 mL)	120 mL/30 days
Cordran (flurandrenolide)	0.05% ointment (60 gm)	120 grams/30 days
Cutivate (fluticasone propionate)	0.05% lotion (60 mL, 120 mL)	120 mL/30 days
Cutivate (fluticasone propionate)	0.05% cream (15 gm, 30 gm, 60 gm)	120 grams/30 days
Cutivate (fluticasone propionate)	0.005% ointment (15 gm, 30 gm, 60 gm)	120 grams/30 days
Cyclocort (amcinonide)	0.1% cream (15 gm, 30 gm, 60 gm)	120 grams/30 days
Cyclocort (amcinonide)	0.1% lotion (60 mLs)	120 mL/30 days
Cyclocort (amcinonide)	0.1% ointment (60 gm)	120 grams/30 days
Derma-Smoothe (fluocinolone acetonide)	0.01% oil (body) (118.28 mL)	118.28 mL/30 days
Derma-Smoothe (fluocinolone acetonide)	0.01% oil (scalp) (118.28 mL)	118.28 mL/30 days
Dermatop (prednicarbate)	0.1% cream (60 gm)	120 grams/30 days
Dermatop (prednicarbate)	0.1% ointment (15 gm, 60 gm)	120 grams/30 days
Desonate (desonide)	0.05% qel (60 gm)	120 grams/30 days
DesOwen (desonide)	0.05% lotion (59 mL, 118 mL)	118 mL/30 days
DesOwen, Tridesilon (desonide)	0.05% cream (15 gm, 60 gm)	120 grams/30 days
DesOwen, Tridesilon (desonide)	0.05% ointment (15 gm, 60 gm)	120 grams/30 days
Betamethasone dipropionate augmented	0.05% qel (15 gm, 50 gm)	200 grams/28 days
betamethasone dipropionate augmented	0.05% lotion (30 mL, 60 mL)	210 mL/30 days
betamethasone dipropionate augmented	0.05% ointment (15 gm, 45 gm, 50 gm)	200 grams/28 days
Diprolene AF (betamethasone dipropionate)	0.05% cream (15 gm, 50 gm)	200 grams/28 days
Diprosone (betamethasone dipropionate)	0.05% cream (15 gm, 45 gm)	135 grams/30 days
Diprosone (betamethasone dipropionate)	0.05% lotion (60 mL)	120 mL/30 days
betamethasone dipropionate	0.05% ointment (15 gm, 45 gm)	135 grams/30 days
mometasone furoate	0.1% cream (15 gm, 45 gm)	135 grams/30 days
Elocon (mometasone furoate)	0.1% ointment (15 gm, 45 gm)	135 grams/30 days
Elocon (mometasone furoate)	0.1% lotion/solution (30 mL, 60 mL)	120 mL/30 days
Florone (diflorasone diacetate)	0.05% ointment (15 gm, 30 gm, 45 gm, 60 gm)	120 grams/30 days
Haloq (halcinonide)	0.1% cream (30 gm, 60 gm, 216 gm)	120 grams/ 30 days
Haloq (halcinonide)	0.1% ointment (60 gm)	120 grams/ 30 days
Haloq (halcinonide)	0.1% solution (120 mL)	120 mL/ 30 days
Hytone (hydrocortisone)	2.5% cream (20 gm, 28 gm, 28.35 gm, 30 gm, 453.6 gm, 454 gm)	454 grams/30 days
Hytone (hydrocortisone)	1% cream (28.35 gm, 28.4 gm, 30 gm, 85.2 gm, 453.6 gm, 454 gm)	454 grams/30 days
Hytone (hydrocortisone)	2.5% lotion (59 mL, 118 mL)	118 mL/30 days
Hytone (hydrocortisone)	1% ointment (25 gm, 28.35 gm, 28.4 gm, 110 gm, 430 gm, 453.6 gm)	453.6 grams/30 days
Hytone (hydrocortisone)	2.5% ointment (20 gm, 28.35 gm, 453.6 gm, 454 gm)	454 grams/30 days
Impeklo (clobetasol propionate)	0.05% lotion (68 gm)	204 grams/28 days
Impoyz (clobetasol propionate)	0.025% cream (100 gm)	200 grams/30 days
Kenalog (triamcinolone acetonide)	0.147 mg/gm aerosol spray (63 gm, 100 gm)	126 grams/30 days
Kenalog (triamcinolone acetonide)	0.025% lotion (60 mL)	120 mL/30 days
Kenalog (triamcinolone acetonide)	0.1% lotion (60 mL)	120 mL/30 days
Kenalog (triamcinolone acetonide)	0.025% ointment (15 gm, 80 gm, 454 gm)	454 grams/30 days
Kenalog, Aristocort (triamcinolone acetonide)	0.025% cream (15 gm, 80 gm, 454 gm)	454 grams/30 days
Kenalog, Aristocort (triamcinolone acetonide)	0.1% cream (15 gm, 28.4 gm, 30 gm, 80 gm, 85.2 gm, 453.6 gm, 454 gm)	454 grams/30 days
Kenalog, Aristocort (triamcinolone acetonide)	0.5% cream (15 gm, 454 gm)	454 grams/30 days
Kenalog, Aristocort (triamcinolone acetonide)	0.1% ointment (15 gm, 30 gm, 80 gm, 453.6 gm, 454 gm)	454 grams/30 days
Lexette (halobetasol propionate)	0.05% foam (50 gm, 100 gm)	200 grams/28 days
Lidex (fluocinonide)	0.05% solution (20 mL, 60 mL)	120 mL/30 days
Lidex (fluocinonide)	0.05% cream (15 gm, 30 gm, 60 gm, 120 gm)	120 grams/30 days
Lidex (fluocinonide)	0.05% qel (15 gm, 30 gm, 60 gm)	120 grams/30 days
Lidex (fluocinonide)	0.05% ointment (15 gm, 30 gm, 60 gm)	120 grams/30 days
Lidex-E (fluocinonide)	0.05% emulsified cream (15 gm, 30 gm, 60 gm)	120 grams/30 days
Hydrocortisone butyrate	0.1% solution (20 mL, 60 mL)	120 mL/30 days
Hydrocortisone butyrate	0.1% cream (15 gm, 45 gm)	135 grams/30 days
Locoid (hydrocortisone butyrate)	0.1% lotion (59 mL, 118 mL)	118 mL/30 days
Locoid (hydrocortisone butyrate)	0.1% ointment (15 gm, 45 gm)	135 grams/30 days
Locoid Lipocream (hydrocortisone butyrate)	0.1% hydrophilic lipo cream (45 gm, 60 gm)	120 grams/30 days
Luxiq (betamethasone valerate)	0.12% foam (50 gm, 100 gm)	150 grams/30 days
Olux (clobetasol propionate)	0.05% foam (50 gm, 100 gm)	200 grams/28 days
Olux-E (clobetasol propionate)	0.05% emulsion foam (50 gm, 100 gm)	200 grams/28 days
Pandel (hydrocortisone probutate)	0.1% cream (80 gm)	160 grams/30 days
Diflorasone diacetate	0.05% cream (15 gm, 30 gm, 60 gm)	120 grams/30 days
Sernivo (betamethasone dipropionate)	0.05% spray (120 mL)	120 mL/30 days
Synalar (fluocinolone acetonide)	0.01% solution (60 mL, 90 mL)	120 mL/30 days
Synalar (fluocinolone acetonide)	0.025% cream (15 gm, 60 gm, 120 gm)	120 grams/30 days
Synalar (fluocinolone acetonide)	0.025% ointment (15 gm, 60 gm, 120 gm)	120 grams/30 days

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Synalar (fluocinolone acetonide)	0.01% cream (15 gm, 60 gm)	120 grams/30 days
Temovate (clobetasol propionate)	0.05% solution (25 mL, 50 mL)	200 mL/28 days
Temovate (clobetasol propionate)	0.05% cream (15 gm, 30 gm, 45 gm, 60 gm)	210 grams/28 days
Temovate (clobetasol propionate)	0.05% ointment (15 gm, 30 gm, 45 gm, 60 gm)	210 grams/28 days
Temovate (clobetasol propionate)	0.05% gel (15 gm, 30 gm, 60 gm)	210 grams/28 days
Temovate E (clobetasol propionate)	0.05% emollient cream (15 gm, 30 gm, 45 gm, 60 gm)	210 grams/28 days
Texacort (hydrocortisone)	2.5 % solution (30 mL)	120 mL/30 days
Topicort (desoximetasone)	0.05% cream (15 gm, 60 gm, 100 gm)	120 grams/30 days
Topicort (desoximetasone)	0.25% cream (15 gm, 60 gm, 100 gm)	120 grams/30 days
Topicort (desoximetasone)	0.05% gel (15 gm, 60 gm)	120 grams/30 days
Topicort (desoximetasone)	0.05% ointment (60 gm, 100 gm)	120 grams/30 days
Topicort (desoximetasone)	0.25% ointment (15 gm, 60 gm, 100 gm)	120 grams/30 days
Topicort (desoximetasone)	0.25% spray (100 mL)	100 mL/30 days
triamcinolone acetonide	0.05% ointment (110 gm, 430 gm)	430 grams/30 days
halobetasol propionate	0.05% cream (15 gm, 50 gm)	200 grams/28 days
Ultravate (halobetasol propionate)	0.05% lotion (60 mL, 120 mL)	240 mL/30 days
halobetasol propionate	0.05% ointment (15 gm, 50 gm)	200 grams/28 days
Valisone (betamethasone valerate)	0.1% cream (15 gm, 45 gm)	135 grams/30 days
Valisone (betamethasone valerate)	0.1% lotion (60 mL)	120 mL/30 days
betamethasone valerate	0.1% ointment (15 gm, 45 gm)	135 grams/30 days
Vanos (fluocinonide)	0.1% cream (30 gm, 60 gm, 120 gm)	240 grams/30 days
Verdeso (desonide)	0.05% foam (100 gm)	100 grams/30 days
Westcort (hydrocortisone valerate)	0.2% ointment (15 gm, 45 gm, 60 gm)	120 grams/30 days
Westcort (hydrocortisone valerate)	0.2% cream (15 gm, 45 gm, 60 gm)	120 grams/30 days

Topical Doxepin PAQL	**Topical Doxepin QL information is included in the individual program document
Topical Lidocaine PAQL	**Topical Lidocaine QL information is included in the individual program document
Topical NSAIDs STQL	**Topical NSAID QL information is included in the individual program document
Topiramate ER PAQL	**Topiramate ER QL information is included in the individual program document
Triptan QL	**Triptan QL information is included in the individual program document
Tyrvaya PAQL	**Tyrvaya QL information is included in the individual program document
Urinary Incontinence QL	**Urinary Incontinence QL information is included in the individual program document
Vascepa PAQL	**Vascepa QL information is included in the individual program document
Verquvo PAQL	**Verquvo QL information is included in the individual program document
Vijoice PAQL	**Vijoice QL information is included in the individual program document
VMAT2 Inhibitors PAQL	**VMAT2 Inhibitors QL information is included in the individual program document
Voxzogo PAQL	**Voxzogo QL information is included in the individual program document
Vuity QL	**Vuity QL information is included in the individual program document
Weight Loss Agents PAQL	**Weight Loss Agents QL information is included in the individual program document
Xermelo PAQL	**Xermelo QL information is included in the individual program document
Xhance PAQL	**Xhance QL information is included in the individual program document
Zeposia PAQL	**Zeposia QL information is included in the individual program document
Zokinvy PAQL	**Zokinvy QL information is included in the individual program document