

WYOMING MEDICAID

DOSAGE LIMITATION LIST

(*) Indicates BRAND is Preferred
 If the Brand name is underlined a generic is currently not available
 Last Updated October 8, 2020

Brand Name	Generic Name	Strength	Limit/Day	Limit/Days
ABILIFY (<13 YEARS OF AGE)	ARIPIRAZOLE (<13 YEARS OF AGE)		15 MG	
ABILIFY (>=13 YEARS OF AGE)	ARIPIRAZOLE (>=13 YEARS OF AGE)		30 MG	
ADDERALL	AMPHETAMINE SALTS/D-AMPHETAMINE SALTS		60 MG	
ADDERALL XR	AMPHETAMINE SALTS/D-AMPHETAMINE SALTS XR		90 MG	(for diagnosis of narcolepsy)
ADVAIR (7 & 14 DAY PACKS)	FLUTICASONE/SALMETEROL		60 MG	
AMBIEN (IR)	ZOLPIDEM (IR)		15 MG	
AMBIEN CR	ZOLPIDEM CR		18.75 MG	
AMERGE	NARATRIPTAN	1 MG		25/34
AMERGE	NARATRIPTAN	2.5 MG		10/34
ANFRANIL (< 18 YEARS OF AGE)	CLOMIPRAMINE (< 18 YEARS OF AGE)		300 MG	
ANFRANIL (>= 18 YEARS OF AGE)	CLOMIPRAMINE (>= 18 YEARS OF AGE)		375 MG	
ANTIHYPERTENSIVES, LONG ACTING				LABELLED FREQUENCY + 1
APLENZIN	BUPROPION SR		450MG	
APTENSIO XR	METHYLPHENIDATE ER CAPSULES		90MG	
ARISTADA 441MG, 662MG, 882MG	ARIPIRAZOLE			1/28
ARISTADA 1064MG	ARIPIRAZOLE			1/56
ARISTADA INITIO	ARIPIRAZOLE			1/365
ATIVAN	LORAZEPAM		15 MG	
AXERT	ALMOTRIPTAN	6.25 MG		27/34
AXERT	ALMOTRIPTAN	12.5 MG		27/34
BELBUCA	BUPRENORPHINE BUCCAL FILM		1.2MG (1200MCG)	
BELSOMRA	SUVOREXANT		30 MG	
BUTRANS	BUPRENORPHINE WEEKLY PATCH	1 STRENGTH AT A TIME	20 MCG/HR DOSE	1 PATCH/WEEK
CATHETERS			10 CATHETERS	
CELEXA (<= 60 YEARS OF AGE)	CITALOPRAM (<= 60 YEARS OF AGE)		60 MG	
CELEXA (> 60 YEARS OF AGE)	CITALOPRAM (> 60 YEARS OF AGE)		30 MG	
CHANTIX	VARENICLINE			168 TABS &/or 84 DAYS/365
CLOZARIL	CLOZAPINE		1350 MG	
CAPITAL/CODEINE SUSPENSION	CODEINE/ACETAMINOPHEN ORAL SUSPENSION AND SOLUTION		20 ML	
CONCERTA	METHYLPHENIDATE ER TABLETS		90 MG	
CONZIP	TRAMADOL ER CAPSULES		300MG	
COTEMPLA	METHYLPHENIDATE ER DISINTEGRATING TABLETS		90MG	
CYMBALTA	DULOXETINE		120 MG	
DALMANE	FLURAZEPAM		45MG	
DAYTRANA	METHYLPHENIDATE PATCHES		45MG/9HR PATCH	
DEMEROL ORAL LIQUID	MEPERIDINE ORAL SOLUTION		20 ML	
DESYREL (<18 YEARS OF AGE)	TRAZODONE IR (<18 YEARS OF AGE)		300 MG	
DESYREL (>= 18 YEARS OF AGE)	TRAZODONE IR (>= 18 YEARS OF AGE)		600 MG	
DEXEDRINE/DEXTROSTAT	D-AMPHETAMINE		90 MG	
DIABETIC MONITOR				1/365
DIABETIC LANCET DEVICE				1/365
DILAUDID ORAL LIQUID	HYDROMORPHONE ORAL LIQUID		8 ML	
DOLOPHINE	METHADONE		3 TABS	
DURAGESIC PATCH	FENTANYL PATCH	1 STRENGTH AT A TIME	50 MCG/HR DOSE	1 PATCH/72 HOURS
DYANAVEL	AMPHETAMINE ER SUSPENSION		60MG	
EFFEXOR IR (<18 YEARS OF AGE)	VENLAFAXINE IR (<18 YEARS OF AGE)		450 MG	
EFFEXOR IR (>= 18 YEARS OF AGE)	VENLAFAXINE IR (>= 18 YEARS OF AGE)		562.5 MG	
EFFEXOR XR (<18 YEARS OF AGE)	VENLAFAXINE XR/ER (<18 YEARS OF AGE)		337.5 MG	
EFFEXOR XR (>= 18 YEARS OF AGE)	VENLAFAXINE XR/ER (>= 18 YEARS OF AGE)		337.5 MG	
ELAVIL (<18 YEARS OF AGE)	AMITRIPTYLINE (<18 YEARS OF AGE)		75 MG	
ELAVIL (>= 18 YEARS OF AGE)	AMITRIPTYLINE (>= 18 YEARS OF AGE)		225 MG	
EMBEDA	MORPHINE/NALTREXONE		120MG	
ENBREL 25MG	ETANERCEPT 25MG		10 SYRINGES/MONTH	
ENBREL 50MG	ETANERCEPT 50MG		5 SYRINGES OR VIALS/MONTH	
EXALGO	HYDROMORPHONE SR		30 MG	
FANAPT	ILOPERIDONE		24 MG	
FAZACLO	CLOZAPINE		1350 MG	
FETZIMA	LEVOMILNACIPRAN		180 MG	
FOCALIN	DEXMETHYLPHENIDATE		30 MG	
FOCALIN XR (<=13 YEARS OF AGE)*	DEXMETHYLPHENIDATE ER		45 MG	
FOCALIN XR (>13 YEARS OF AGE)*	DEXMETHYLPHENIDATE ER		60 MG	
FORFIVO XL	BUPROPION XL		450MG	
FROVA	FROVATRIPTAN	2.5 MG		20/34
GEODON (<=17 YEARS OF AGE)	ZIPRASIDONE (<=17 YEARS OF AGE)		120 MG	
GEODON (>17 YEARS OF AGE)	ZIPRASIDONE (>17 YEARS OF AGE)		200 MG	
GRALISE	GABAPENTIN		1800 MG	
HALCION	TRIAZOLAM		0.75 MG	
HUMIRA 10MG	ADALIMUMAB 10MG		2 SYRINGES/28 DAYS, AFTER INITIAL DOSE	
HUMIRA 20MG	ADALIMUMAB 20MG		2 SYRINGES/28 DAYS, AFTER INITIAL DOSE	
HUMIRA 40MG	ADALIMUMAB 40MG		4 SYRINGES/28 DAYS, AFTER INITIAL DOSE	

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HYCET SOLUTION	HYDROCODONE/ACETAMINOPHEN ORAL SOLUTION		60 ML	
<u>HYSINGLA ER</u>	HYDROCODONE ER		120 MG	
IMITREX KIT/VIAL	<u>SUMATRIPTAN KIT</u>	4/0.5ML		3 VIALS/34
IMITREX KIT/VIAL	<u>SUMATRIPTAN KIT</u>	6 MG/0.5 ML		2 VIALS/34
IMITREX NASAL SPRAY	<u>SUMATRIPTAN NASAL SPRAY</u>	20 MG		6 BOTTLES/34
IMITREX NASAL SPRAY	<u>SUMATRIPTAN NASAL SPRAY</u>	5MG		12 BOTTLES/34
IMITREX TAB	<u>SUMATRIPTAN TAB</u>	25 MG		41/34
IMITREX TAB	<u>SUMATRIPTAN TAB</u>	50 MG		20/34
IMITREX TAB	<u>SUMATRIPTAN TAB</u>	100 MG		10/34
INCONTINENCE PRODUCTS	BRIEFS		13 BRIEFS	
	<u>DIAPERS</u>		13 DIAPERS	
	<u>LINERS</u>		13 LINERS	
	<u>PADS</u>		13 PADS	
INVEGA	<u>PALIPERIDONE</u>		12 MG	
<u>INVEGA SUSTENNA</u>	<u>PALIPERIDONE</u>			1/28
<u>INVEGA TRINZ</u>	<u>PALIPERIDONE</u>			1/84
IV EQUIPMENT				1/365
KLONOPIN	<u>CLONAZEPAM</u>		6 MG	
<u>LATUDA (10-17 YEARS OF AGE)</u>	<u>LURASIDONE</u>		80MG	
<u>LATUDA (>17 YEARS OF AGE)</u>	<u>LURASIDONE</u>		160MG	
LEXAPRO	<u>ESCITALOPRAM</u>		30 MG	
LIBRIUM (< 18 YEARS OF AGE)	<u>CHLORDIAZEPOXIDE (< 18 YEARS OF AGE)</u>		45 MG	
LIBRIUM (>= 18 YEARS OF AGE)	<u>CHLORDIAZEPOXIDE (>= 18 YEARS OF AGE)</u>		450 MG	
LONG-ACTING NARCOTIC			LIMITED TO ONE LONG-ACTING NARCOTIC AT A TIME	
LORCET	<u>HYDROCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
LORTAB	<u>HYDROCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
LORTAB ELIXIR	<u>HYDROCODONE/ACETAMINOPHEN ORAL SOLUTION</u>		60 ML	
LUNESTA	<u>EZOPICLONE</u>		4.5 MG	
LUVOX (<18 YEARS OF AGE)	<u>FLUVOXAMINE (<18 YEARS OF AGE)</u>		300 MG	
LUVOX (>= 18 YEARS OF AGE)	<u>FLUVOXAMINE (>= 18 YEARS OF AGE)</u>		450 MG	
<u>LYRICA</u>	<u>PREGABALIN</u>		600 MG	
MARINOL	<u>DRONABINOL</u>		20 MG	
MAXALT	<u>RIZATRIPTAN</u>	5 MG		27/34
MAXALT	<u>RIZATRIPTAN</u>	10 MG		14/34
MAXALT MLT	<u>RIZATRIPTAN MLT</u>	5 MG		27/34
MAXALT MLT	<u>RIZATRIPTAN MLT</u>	10 MG		14/34
METADATE CD/ER	<u>METHYLPHENIDATE ER CAPSULES</u>		90 MG	
<u>MORPHABOND</u>	<u>MORPHINE SULFATE ER DETER 60 MG</u>		120 MG	
MS CONTIN	<u>MORPHINE ER TABLETS</u>		120 MG	
NARCAN	<u>NALOXONE SOLUTION</u>	0.4MG/ML	2/365 (only 1 fill of any formulation per year)	
NEBULIZER				1/365
NEURONTIN	<u>GABAPENTIN</u>		3600 MG	
	<u>NICOTINE GUM/LOZENGES</u>			735 PCS &/or 84 DAYS/365
	<u>NICOTINE INHALER</u>			8 PACKS &/or 84 DAYS/365
	<u>NICOTINE NASAL SPRAY</u>			8 PACKS &/or 84 DAYS/365
	<u>NICOTINE PATCH</u>	7 MG		14 PATCH &/or 14 DAYS/365
	<u>NICOTINE PATCH</u>	14 MG		14 PATCH &/or 14 DAYS/365
	<u>NICOTINE PATCH</u>	21 MG		42 PATCH &/or 42 DAYS/365
	<u>NICOTINE TRANSDERMAL SYSTEM</u>			56 PATCH &/or 56 DAYS/365
NORCO	<u>HYDROCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
NORPRAMIN (< 18 YEARS OF AGE)	<u>DESIPRAMINE (< 18 YEARS OF AGE)</u>		225 MG	
NORPRAMIN (>= 18 YEARS OF AGE)	<u>DESIPRAMINE (>= 18 YEARS OF AGE)</u>		450 MG	
<u>NUCYNTA ER</u>	<u>TAPENTADOL SR</u>		327 MG	
<u>NUPLAZID</u>	<u>PIMAVANSERIN</u>		34 MG	
NUVIGIL	<u>ARMODAFINIL</u>		150 MG	
			250 MG	(for diagnosis of narcolepsy)
OLEPTRO (<18 YEARS OF AGE)	<u>TRAZODONE ER (< 18 YEARS OF AGE)</u>		300 MG	
OLEPTRO (>= 18 YEARS OF AGE)	<u>TRAZODONE ER (>= 18 YEARS OF AGE)</u>		562.5 MG	
OPANA ER	<u>OXYMORPHONE ER</u>		40 MG	
OXANDRIN	<u>OXANDROLONE</u>	2.5 MG	8 TABS	272/34
OXANDRIN	<u>OXANDROLONE</u>	10 MG	2 TABS	68/34
OXYCONTIN CR (limit 2 strengths per client)	<u>OXYCODONE ER (limit 2 strengths per client)</u>	3 TABS/STRENGTH	80 MG	
PAMELOR (<18 YEARS OF AGE)	<u>NORTRIPTYLINE (<18 YEARS OF AGE)</u>		150 MG	
PAMELOR (>= 18 YEARS OF AGE)	<u>NORTRIPTYLINE (>= 18 YEARS OF AGE)</u>		225 MG	
PAXIL IR (<18 YEARS OF AGE)	<u>PAROXETINE IR (<18 YEARS OF AGE)</u>		75 MG	
PAXIL IR (>= 18 YEARS OF AGE)	<u>PAROXETINE IR (>= 18 YEARS OF AGE)</u>		90 MG	
PAXIL CR (<18 YEARS OF AGE)	<u>PAROXETINE CR (<18 YEARS OF AGE)</u>		75 MG	
PAXIL CR (>= 18 YEARS OF AGE)	<u>PAROXETINE CR (>= 18 YEARS OF AGE)</u>		112.5 MG	
PERCOCET	<u>OXYCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
<u>PERSERIS</u>	<u>RISPERIDONE</u>			1/28
PRISTIQ	<u>DESVENLAFAXINE</u>		150 MG	

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PROSOM	<u>ESTAZOLAM</u>		3 MG	
PROVIGIL	<u>MODAFINIL</u>		200 MG	
PROZAC (<18 YEARS OF AGE)	<u>FLUOXETINE (<18 YEARS OF AGE)</u>		90 MG	
PROZAC (>= 18 YEARS OF AGE)	<u>FLUOXETINE (>= 18 YEARS OF AGE)</u>		120 MG	
<u>QUILLICHEW</u>	<u>METHYLPHENIDATE ER CHEWABLE</u>		90MG	
<u>QUILLIVANT XR</u>	<u>METHYLPHENIDATE ER SUSPENSION</u>		90MG	
<u>RELPAZ</u>	<u>ELETRIPTAN</u>	20 MG		20/34
<u>RELPAZ</u>	<u>ELETRIPTAN</u>	40 MG		14/34
REMERON	<u>MIRTAZAPINE</u>		67.5 MG	
RESTORIL	<u>TEMAZEPAM</u>		45 MG	
<u>REXULTI</u>	<u>BREXPIRAZOLE</u>		4 MG	
RISPERDAL (<10 YEARS OF AGE)	<u>RISPERIDONE (<10 YEARS OF AGE)</u>		3 MG	
RISPERDAL (10-17 YEARS OF AGE)	<u>RISPERIDONE (10-17 YEARS OF AGE)</u>		6 MG	
RISPERDAL (>17 YEARS OF AGE)	<u>RISPERIDONE (>17 YEARS OF AGE)</u>		16 MG	
<u>RISPERDAL CONSTA</u>	<u>RISPERIDONE</u>			2/28
RITALIN	<u>METHYLPHENIDATE TABLETS</u>		90 MG	
RITALIN LA	<u>METHYLPHENIDATE ER CAPSULES</u>		90 MG	
RITALIN SR	<u>METHYLPHENIDATE ER/METHYLIN ER TABLETS</u>		90 MG	
ROXANOL CONCENTRATE	<u>MORPHINE CONCENTRATE ORAL SOLUTION</u>		4 ML	
ROXANOL	<u>MORPHINE ORAL SOLUTION</u>		20 ML	
ROXICET	<u>OXYCODONE/ACETAMINOPHEN ORAL SOLUTION</u>		20 ML	
ROXICODONE CONCENTRATE	<u>OXYCODONE CONCENTRATE ORAL SOLUTION</u>		4 ML	
ROXICODONE	<u>OXYCODONE ORAL SOLUTION</u>		20 ML	
<u>ROZEREM</u>	<u>RAMELTEON</u>		12 MG	
RYBIX	<u>TRAMADOL ODT</u>		8 TABS	
RYZOLT	<u>TRAMADOL ER TABLETS</u>		300 MG	
<u>SAPHRIS</u>	<u>ASENAPINE</u>		20 MG	
<u>SAVELLA</u>	<u>MILNACIPRAN</u>		200 MG	
SERAX	<u>OXAZEPAM</u>		180 MG	
SEREVENT (14 DAY PACK)	<u>SALMETEROL</u>			1/365
SEROQUEL (<13 YEARS OF AGE)	<u>QUETIAPINE FUMARATE (<13 YEARS OF AGE)</u>		400 MG	
SEROQUEL (13-17 YEARS OF AGE)	<u>QUETIAPINE FUMARATE (13-17 YEARS OF AGE)</u>		600 MG	
SEROQUEL (>17 YEARS OF AGE)	<u>QUETIAPINE FUMARATE (>17 YEARS OF AGE)</u>		800 MG	
SERZONE	<u>NEFAZODONE</u>		600 MG	
<u>SHARPS CONTAINER</u>				1/365
<u>SHORT-ACTING NARCOTICS</u>		LIMITED TO ONE SHORT-ACTING NARCOTIC AT A TIME		
<u>SHORT-ACTING NARCOTIC TABS/CAPS</u>		4 TABS OR CAPS/DAY AFTER 42 DAYS OF CONSECUTIVE USE		
SINEQUAN (< 18 YEARS OF AGE)	<u>DOXEPIN (< 18 YEARS OF AGE)</u>		150 MG	
SINEQUAN (>= 18 YEARS OF AGE)	<u>DOXEPIN (>= 18 YEARS OF AGE)</u>		450 MG	
SOMA	<u>CARISOPRODOL</u>			84/365
SONATA	<u>ZALEPLON</u>		30 MG	
SPACER				1/365
<u>SPIRIVA (5 DAY PACK)</u>	<u>TIOTROPIUM BROMIDE</u>			1/365
<u>SPIROMETER</u>				1/365
STADOL NASAL SPRAY	<u>BUTORPHANOL</u>	10 MG/ML		1 BOTTLE/34
STRATTERA	<u>ATOMOXETINE</u>		150 MG	
SUBOXONE*	<u>BUPRENORPHINE/NALOXONE</u>		DURING FIRST TWO YEARS OF TREATMENT DOSAGE LIMIT IS 16 MG AFTER TWO YEARS OF TREATMENT DOSAGE LIMIT IS 8MG	
SUBUTEX	<u>BUPRENORPHINE</u>		DURING FIRST TWO YEARS OF TREATMENT DOSAGE LIMIT IS 16 MG AFTER TWO YEARS OF TREATMENT DOSAGE LIMIT IS 8MG	
TALWIN NX	<u>PENTAZOCINE/NALOXONE</u>		2 TABS	60/30
TOFRANIL	<u>IMIPRAMINE</u>		300 MG	
TORADOL SYRINGE	<u>KETOROLAC SYRINGE</u>	30 MG		5-DAY DURATION/34 DAYS
TORADOL SYRINGE	<u>KETOROLAC SYRINGE</u>	15 MG		5-DAY DURATION/34 DAYS
TORADOL TAB	<u>KETOROLAC TAB</u>	10 MG	4 TABS	5-DAY DURATION/34 DAYS
TRANXENE (< 18 YEARS OF AGE)	<u>CLORAZEPATE (< 18 YEARS OF AGE)</u>		90 MG	
TRANXENE (>= 18 YEARS OF AGE)	<u>CLORAZEPATE (>= 18 YEARS OF AGE)</u>		135 MG	
<u>TREXIMET</u>	<u>SUMATRIPTAN/NAPROXEN</u>		85/500 MG	10/34
<u>TREXIMET</u>	<u>SUMATRIPTAN/NAPROXEN</u>		10/60 MG	5/34
<u>TRINTELLIX</u>	<u>VORTIOXETINE</u>		30 MG	
TYLENOL #3	<u>ACETAMINOPHEN/CODEINE</u>		4G/DAY OF APAP	
TYLOX	<u>OXYCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
ULTRAM	<u>TRAMADOL</u>		8 TABS	
ULTRAM ER	<u>TRAMADOL ER TABLETS</u>		300 MG	
ULTRACET	<u>TRAMADOL/ACETAMINOPHEN</u>		8 TABS	
VALIUM (< 18 YEARS OF AGE)	<u>DIAZEPAM (< 18 YEARS OF AGE)</u>		15 MG	
VALIUM (>= 18 YEARS OF AGE)	<u>DIAZEPAM (>= 18 YEARS OF AGE)</u>		60 MG	
<u>VICTOZA</u>	<u>LIRAGLUTIDE</u>		1.8 MG	
<u>VIIIBRYD</u>	<u>VILAZODONE</u>		60 MG	
VICODIN	<u>HYDROCODONE/ACETAMINOPHEN</u>		4G/DAY OF APAP	
VRAYLAR	<u>CARIPRAZINE</u>		6 MG	

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VYVANSE	LISDEXAMFETAMINE		105 MG	
WELLBUTRIN IR	<u>BUPROPION IR</u>		450 MG	
WELLBUTRIN SR	<u>BUPROPION SR</u>		450 MG	
WELLBUTRIN XL	<u>BUPROPION XL</u>		450 MG	
XANAX	ALPRAZOLAM		6 MG	
<u>XARTEMIS XR</u>	OXYCODONE/ACETAMINOPHEN CR		80 MG	
<u>XENAZINE</u>	TETRABENAZINE		50 MG	
<u>XTAMPZA ER</u>	OXYCODONE ER		80 MG	
ZAMICET SOLUTION	<u>HYDROCODONE/ACETAMINOPHEN ORAL SOLUTION</u>		60 ML	
<u>ZENZEDI</u>	DEXTRAMPHETAMINE		90MG	
ZOFRAN	<u>ONDANSETRON</u>		12 MG	
<u>ZOHYDRO ER</u>	HYDROCODONE SR		120 MG	
ZOLOFT	<u>SERTRALINE</u>		300 MG	
ZOMIG	ZOLMITRIPTAN	2.5 MG		20/34
ZOMIG	ZOLMITRIPTAN	5 MG		10/34
ZOMIG ZMT	ZOLMITRIPTAN ZMT	2.5 MG		20/34
ZYBAN	<u>BUPROPION</u>		450 MG	168 TABS &/or 84 DAYS/365
ZYPREXA (<13 YEARS OF AGE)	<u>OLANZAPINE (<13 YEARS OF AGE)</u>		10 MG	
ZYPREXA (>=13 YEARS OF AGE)	<u>OLANZAPINE (>=13 YEARS OF AGE)</u>		20 MG	