

Iowa Medicaid Quantity Limits

Effective July 28, 2008

Requests for a Quantity Limit Override should be faxed on the Quantity Limit Override form, by the prescriber, to 1-800-574-2515 with the medical necessity documentation the form. The override form can be found at our website, www.iowamedicaidpdl.com under the heading, "PA Forms" and "Quantity Limits".

Drug Product	Quantity	Days Supply	Comments
ABILIFY 2MG	30	30	
ABILIFY 5MG	30	30	
ABILIFY 10MG	30	30	
ABILIFY 15MG	30	30	
ABILIFY 20MG	30	30	
ABILIFY 30MG	30	30	
ACEON 2MG	30	30	
ACEON 4MG	30	30	
ACEON 8MG	60	30	
ACIPHEX 20MG	60	30	
ACTONEL TAB 5MG	30	30	
ACTONEL TAB 30MG	30	30	
ACTONEL TAB 35MG	4	30	
ACTOPLUS MET 15-500MG	60	30	
ACTOPLUS MET 15-850MG	60	30	
ACTOS 15MG	30	30	
ACTOS 30MG	30	30	
ACTOS 45MG	30	30	
ADALAT CC 30MG (PROCARDIA)	30	30	
ADALAT CC 60MG (PROCARDIA)	30	30	
ADALAT CC 90MG (PROCARDIA)	30	30	
ADVAIR 100/50 DISKUS	60	30	
ADVAIR 250/50 DISKUS	60	30	
ADVAIR 500/50 DISKUS	60	30	
ADVAIR HFA	1 inhaler (12 grams)	30	
AEROBID	21	30	
AEROBID-M	21	30	
ALTACE 1.25MG	30	30	
ALTACE 2.5MG	30	30	
ALTACE 5MG	30	30	
ALTACE 10MG	60	30	
AMARYL 1MG	30	30	
AMARYL 2MG	30	30	
AMBIEN CR CAP 6.25MG	15	30	PA required for greater than 15 days of Sedative Hypnotic therapy
AMBIEN CR CAP 12.5MG	15	30	PA required for greater than 15 days of Sedative Hypnotic therapy
ANDROGEL 1%(25MG) GEL	30 PKTS	30	
ANDROGEL 1%(50MG) GEL	60 PKTS	30	
ANDROGEL PUMP	300GM	30	
ARICEPT ODT TAB 5MG	30	30	
ARICEPT ODT TAB 10MG	30	30	

ARICEPT TAB 5MG	30	30	
ARICEPT TAB 10MG	30	30	
ASTELIN NASAL SPRAY	30ML	30	
ATACAND 4MG	30	30	
ATACAND 8MG	30	30	
ATACAND 16MG	30	30	
ATACAND 32MG	30	30	
ATACAND HCT 16-12.5MG	30	30	
ATACAND HCT 32-12.5MG	30	30	
ATROVENT HFA	2 bottles (25.8 grams)	30	
ATROVENT INHALER	2 inhalers (28 grams)	30	
AVALIDE 150-12.5MG	30	30	
AVALIDE 300-12.5MG	30	30	
AVALIDE 300-25MG	30	30	
AVANDARYL 4MG/1MG	60	30	
AVANDARYL 4MG/2MG	60	30	
AVANDARYL 4MG/4MG	60	30	
AVANDIA 8MG	30	30	
AVAPRO 75MG	30	30	
AVAPRO 150MG	30	30	
AVAPRO 300MG	30	30	
AVINZA 30MG	30	30	
AVINZA 60MG	30	30	
AVINZA 90MG	30	30	
AVINZA 120MG	150	30	
AZMACORT	2 inhalers (40 grams)	30	
BECONASE AQ	2 inhalers (50 grams)	30	
BENICAR 5MG	30	30	
BENICAR 20MG	30	30	
BENICAR 40MG	30	30	
BENICAR HCT 20-12.5MG	30	30	
BENICAR HCT 40-12.5MG	30	30	
BENICAR HCT 40-25MG	30	30	
BISOPROLOL 5MG (ZEBETA)	30	30	
BONIVA 2.5MG	30	30	
BONIVA 150MG	1 tablet	30	
BONIVA SYR	1 syringe	90	
BUPROPION ER 150MG (WELLBUTRIN XL)	30	30	
BUPROPION ER 300MG (WELLBUTRIN XL)	30	30	
BUPROPION HCL 75MG TABLET	180	30	
BUPROPION HCL 100MG TABLET	90	30	
BUPROPION SR 100MG TABLET	60	30	
BUPROPION SR 150MG TABLET	60	30	
BUPROPION SR 200MG TAB	60	30	
CADUET 2.5-20MG	30	30	
CADUET 2.5-40MG	30	30	
CADUET 2.5-100MG	30	30	

CADUET 5-10MG	30	30	
CADUET 5-20MG	30	30	
CADUET 5-40MG	30	30	
CADUET 5-80MG	30	30	
CADUET 10-10MG	30	30	
CADUET 10-20MG	30	30	
CADUET 10-40MG	30	30	
CADUET 10-80MG	30	30	
CARISOPRODOL 350MG	120	30	
CELEBREX 100MG	60	30	
CELEBREX 200MG	30	30	
CELEBREX 400MG	30	30	
CELEXA 10MG	30	30	
CELEXA 20MG	45	30	
COMBIVENT 14.7GM INHALER	3 inhalers	30	
COMBUNOX (5mg oxycodone/400mg Ibuprofen)	28	30	
CONCERTA SA 18MG	60	30	
CONCERTA SA 27MG	60	30	
CONCERTA SA 36MG	60	30	
CONCERTA SA 54MG	60	30	
COZAAR 25MG	60	30	
COZAAR 50MG	60	30	
COZAAR 100MG	30	30	
CRESTOR 5MG	30	30	
CRESTOR 10MG	30	30	
CRESTOR 20MG	30	30	
CRESTOR 40MG	30	30	
CYMBALTA 20MG CAPSULE	60	30	
CYMBALTA 30MG CAPSULE	90	30	
CYMBALTA 60MG CAPSULE	60	30	
DAYTRANA 10MG/9 HR PATCH	30	30	
DAYTRANA 15MG/9 HR PATCH	30	30	
DAYTRANA 20MG/9 HOUR PATCH	30	30	
DAYTRANA 30MG/9 HOUR PATCH	30	30	
DETROL LA 2MG	30	30	
DETROL LA 4MG	30	30	
DEXTROAMPHETAMINE 5MG CAP SR	60	30	
DEXTROAMPHETAMINE 10MG CAP SR	60	30	
DEXTROAMPHETAMINE 15MG CAP SR	60	30	
DIASTAT	6	30	
DIAZEPAM SYR (VALIUM)	15 syringes	30	
DIFFERIN 0.1% CREAM	45	30	
DIFFERIN 0.1% GEL	45	30	
DIOVAN 40MG	30	30	
DIOVAN 80MG	30	30	
DIOVAN 160MG	30	30	
DIOVAN 320MG	30	30	

DIOVAN HCT 80-12.5MG	30	30	
DIOVAN HCT 160-12.5MG	30	30	
DIOVAN HCT 160-25MG	30	30	
DIOVAN HCT 320-12.5MG	30	30	
DIOVAN HCT 320-25MG	30	30	
DITROPAN XL 5MG	30	30	
DORAL 7.5MG	30	30	
DORAL 15MG	30	30	
DUONEB 3ML VIAL	620ML	30	
EFFEXOR XR 37.5MG	30	30	
EFFEXOR XR 75MG	30	30	
EFFEXOR XR 150MG	90	30	
EMSAM 6MG/24 HOURS PATCH	30	30	
EMSAM 9MG/24 HOURS PATCH	30	30	
EMSAM 12MG/24 HOURS PATCH	30	30	
ENABLEX 7.5MG	30	30	
ENABLEX 15MG	30	30	
EPIPEN	4 units	30	
EPIPEN, JR	4 units	30	
ESTRADERM	8 patches	30	
EXELON 1.5MG CAPSULE	60	30	
EXELON 2MG/ML ORAL SOLUTIO	180ml	30	
EXELON 3MG CAPSULE	60	30	
EXELON 4.5MG CAPSULE	60	30	
EXELON 6MG CAPSULE	60	30	
EXUBERA KIT	1 kit	365	
FEXOFENADINE 30MG (ALLEGRA)	60	30	
FEXOFENADINE 60MG (ALLEGRA)	60	30	
FEXOFENADINE 180MG (ALLEGRA)	30	30	
FLOVENT HFA 44MCG	1 inhaler (10.6 grams)	30	
FLOVENT HFA 110MCG	1 inhaler (12 grams)	30	
FLOVENT HFA 220MCG	2 inhalers (24 grams)	30	
FLUNISOLIDE 0.025% SPRAY (NASAREL)	3 bottles (75ML)	30	
FLUOXETINE 20MG/5 ML SOLUT	600ml	30	
FLUOXETINE HCL 10MG TABLET	45	30	
FLUOXETINE HCL 10MG CAPSUL	30	30	

FLUOXETINE HCL 20MG CAPSUL	120	30	
FLUOXETINE HCL 40MG CAPSUL	60	30	
FLURAZEPAM 15MG (DALMANE)	30	30	
FLUTICASONE PROPIONATE SUP 50MCG/ACT (FLONASE)	2 inhalers (32 grams)	30	
FOCALIN XR 5MG	60	30	
FOCALIN XR 10MG	60	30	
FOCALIN XR 15MG	90	30	
FOCALIN XR 20MG	90	30	
FORADIL AEROLIZER	60	30	
FOSAMAX 5MG	30	30	
FOSAMAX 10MG	30	30	
FOSAMAX 40MG	30	30	
FOSAMAX 70MG	4	30	
FOSINORPIL 10MG (MONOPRIL)	60	30	
FOSINORPIL 20MG (MONOPRIL)	60	30	
FOSINORPIL 40MG (MONOPRIL)	60	30	
GEODON 20MG CAPSULE	60	30	
GEODON 40MG CAPSULE	60	30	
GEODON 60MG CAPSULE	60	30	
GEODON 80MG CAPSULE	60	30	
GLUCAGON EMERGENCY KIT	5	30	
HALDOL DECANOATE 50mg/ml-1ml per vial	1ML	30	
HALDOL DECANOATE 50mg/ml-5ml per vial	10ML	30	
HALDOL DECANOATE 100mg/ml-1ml per vial	1ML	30	
HALDOL DECANOATE 100mg/ml-5ml per vial	5ml	30	
HYZAAR 50-12.5MG	30	30	
HYZAAR 100-25MG	30	30	
INNOPRAN XL 80MG	30	30	
INTAL INHALER	3 inhalers (42.6 grams)	30	
INVEGA 3MG TABLET	30	30	
INVEGA 6MG TABLET	60	30	
INVEGA 9MG TABLET	30	30	
IPATROPIUM 0.03% NASAL SPRAY	2 bottles	30	
IPATROPIUM 0.06% NASAL SPRAY	2 bottles	30	
LEFLUOMIDE 10MG (ARAVA)	30	30	
LEFLUOMIDE 20MG (ARAVA)	30	30	
LEFLUOMIDE 100MG (ARAVA)	3	30	
LESCOL 20MG	30	30	
LEXAPRO 5MG TABLET	30	30	
LEXAPRO 10MG TABLET	30	30	
LEXAPRO 20MG	60	30	
LIPITOR 10MG TABLET	30	30	
LIPITOR 20MG TABLET	30	30	
LIPITOR 40MG TABLET	30	30	

LORATADINE 10MG (ALAVERT, CLARITIN, TAVIST ND)	30	30	
LOVASTATIN 10MG (MEVACOR)	30	30	
LOVASTATIN 20MG (MEVACOR)	30	30	
LOVASTATIN 40MG (MEVACOR)	60	30	
LUNESTA TAB 1MG	15	30	PA required for greater than 15 days of Sedative Hypnotic therapy
LUNESTA TAB 2MG	15	30	PA required for greater than 15 days of Sedative Hypnotic therapy
LUNESTA TAB 3MG	15	30	PA required for greater than 15 days of Sedative Hypnotic therapy
LUVOX 25MG	30	30	
LUVOX 50MG	30	30	
LYRICA 25MG	90	30	
LYRICA 50MG	90	30	
LYRICA 75MG	90	30	
LYRICA 100MG	90	30	
LYRICA 150MG	90	30	
LYRICA 200MG	90	30	
LYRICA 225MG	60	30	
LYRICA 300MG	60	30	
MAVIK 1MG	30	30	
MAVIK 2MG	30	30	
MAVIK 4MG	60	30	
MAXAIR AUTOINHALER 14G	2 inhalers	30	
MELOXICAN 7.5MG (MOBIC)	30	30	
MELOXICAN 15MG (MOBIC)	30	30	
METADATE CD 10MG	60	30	
METADATE CD 20MG	90	30	
METADATE CD 30MG	60	30	
METADATE CD 40MG	60	30	
METADATE CD 50MG	60	30	
METADATE CD 60MG	60	30	
METADATE ER 10MG TABLET	90	30	
METADATE ER 20MG TABLET	90	30	
METHYLIN ER 10MG TABLET SA	90	30	
METHYLIN ER 20MG TABLET SA	90	30	
METHYLPHENIDATE ER 20MG TA	90	30	
MIACALCIN NASAL 200 U/DOSE	4ML	30	
MIRTAZAPINE 15MG (REMERON)	45	30	
MIRTAZAPINE 30MG (REMERON)	30	30	
MIRTAZAPINE 45MG (REMERON)	30	30	
MORPHINE SULFATE SA 15MG	90	30	
MORPHINE SULFATE SA 30MG	90	30	
MORPHINE SULFATE SA 60MG	90	30	
MORPHINE SULFATE SA 100MG	300	30	
NAMENDA 2MG/1ML ORAL SOLUTION	300ml	30	Comes in 360ml containers
NAMENDA 5MG	60	30	
NAMENDA 10MG	60	30	

NASACORT AQ	2 bottles	30	
NASONEX 50MCG NASAL SPRAY	2 bottles	30	
NEXIUM 20MG	30	30	
NEXIUM 40MG	60	30	
NORVASC 2.5MG	30	30	
NORVASC 5MG	30	30	
OMEPRAZOLE 10MG (PRILOSEC RX)	30	30	
OMEPRAZOLE 20MG (PRILOSEC RX)	30	30	
PAROXETINE 10MG (PAXIL)	30	30	
PAROXETINE 20MG (PAXIL)	30	30	
PAROXETINE 30MG (PAXIL)	30	30	
PAROXETINE 40MG (PAXIL)	45	30	
PAXIL CR 12.5MG	30	30	
PAXIL CR 25MG	60	30	
PAXIL CR 37.5MG	60	30	
PRAVASTATIN TAB 10MG (PRAVACHOL)	30	30	
PRAVASTATIN TAB 20MG (PRAVACHOL)	30	30	
PRAVASTATIN TAB 40MG (PRAVACHOL)	30	30	
PRAVASTATIN TAB 80MG (PRAVACHOL)	30	30	
PREMARIN 0.625MG	30	30	
PREMARIN VAGINAL CREAM	1 tube	30	
PREVACID CAP 15MG	30	30	PA required for greater than 60 days of PPI therapy
PREVACID CAP 30MG	60	30	PA required for greater than 60 days of PPI therapy
PREVACID GRANULES 15MG	30	30	PA required for greater than 60 days of PPI therapy
PREVACID GRANULES 30MG	60	30	PA required for greater than 60 days of PPI therapy
PREVACID SOLUTABS 15MG	30	30	PA required for greater than 60 days of PPI therapy
PREVACID SOLUTABS 30MG	60	30	PA required for greater than 60 days of PPI therapy
PRILOSEC 20MG OTC	120	30	PA required for greater than 60 days of PPI therapy
PRILOSEC 40MG RX	60	30	
PROAIR HFA 8.5GM	3 inhalers (25.5 grams)	30	
PROTONIX 20MG	30	30	PA required for greater than 60 days of PPI therapy
PROTONIX 40MG	60	30	PA required for greater than 60 days of PPI therapy
PROTOPIC OINTMENT	120	30	
PROVIGIL 100MG	30	30	
PROVIGIL 200MG	60	30	
PULMICORT FLEXHALER 180MCG/DOSE	2	30	
PULMICORT TURBUHALER	2	30	
QVAR 40MCG	3 inhalers	30	
QVAR 80MCG	3 inhalers	30	

RHINOCORT AQUA SUS	8.6 grams	30	
RISPERDAL 0.25MG	120	30	
RISPERDAL 0.5MG	120	30	
RISPERDAL 0.5MG M-TAB	120	30	
RISPERDAL 1MG	120	30	
RISPERDAL 1MG M-TAB	120	30	
RISPERDAL 2MG	90	30	
RISPERDAL 2MG M-TAB	90	30	
RISPERDAL 3MG	60	30	
RISPERDAL 3MG M-TAB	60	30	
RISPERDAL 4MG	60	30	
RISPERDAL 4MG M-TAB	60	30	
RISPERDAL CONSTA 25MG SYR	2 syringes	28	
RISPERDAL CONSTA 37.5MG SY	2 syringes	28	
RISPERDAL CONSTA 50MG SYR	2 syringes	28	
RITALIN LA 10MG CAPSULE	30	30	
RITALIN LA 20MG CAPSULE	30	30	
RITALIN LA 30MG CAPSULE	60	30	
RITALIN LA 40MG CAPSULE	30	30	
ROZEREM TAB 8MG	15	30	
SEREVENT DISKUS 60 BLISTERS	1 package	30	
SONATA CAP 5MG	15	30	
SONATA CAP 10MG	15	30	
SPIRIVA CAP HANDIHALER PKG SIZE 30	30	30	
STRATTERA 10MG CAPSULE	60	30	
STRATTERA 18MG CAPSULE	60	30	
STRATTERA 25MG CAPSULE	60	30	
STRATTERA 40MG CAPSULE	60	30	
STRATTERA 60MG CAPSULE	30	30	
STRATTERA 80MG CAPSULE	30	30	
STRATTERA 100MG CAPSULE	30	30	
TERAZOSIN 1MG (HYTRIN)	30	30	
TERAZOSIN 2MG (HYTRIN)	60	30	
TERAZOSIN 5MG (HYTRIN)	30	30	
TERAZOSIN 10MG (HYTRIN)	60	30	
TILADE INHALER	3 inhalers	30	
TOPROL XL 25MG	45	30	
TOPROL XL 50MG	45	30	
TOPROL XL 100MG	45	30	
TOPROL XL 200MG	60	30	
TRAMADOL 50MG	240	30	
TRAMADOL/ACETAMINOPHEN 325MG/37.5MG	240	30	
TRICOR 48MG	30	30	
TRICOR 145MG	30	30	
TRIGLIDE 160MG	30	30	
ULTRAM ER 100MG	30	30	
ULTRAM ER 200MG	30	30	
ULTRAM ER 300MG	30	30	

UROXATROL	30	30	
VIVELLE/VIVELLE-DOT	8 patches	28	
XANAX XR 0.5MG	30	30	
XANAX XR 1MG	30	30	
XOLAIR SOL 150MG	6	30	
ZEGERID CAP 20MG	30	30	
ZEGERID CAP 40MG	60	30	
ZEGERID POWDER FOR ORAL SUSP 20MG	30	30	
ZEGERID POWDER FOR ORAL SUSP 40MG	60	30	
ZETIA 10MG	30	30	
ZOCOR 5MG	30	30	
ZOCOR 10MG	30	30	
ZOCOR 20MG	30	30	
ZOCOR 40MG	30	30	
ZYPREXA 2.5MG TABLET	30	30	
ZYPREXA 5MG TABLET	30	30	
ZYPREXA 7.5MG TABLET	30	30	
ZYPREXA 10MG TABLET	30	30	
ZYPREXA 15MG TABLET	60	30	
ZYPREXA 20MG TABLET	60	30	
ZYPREXA ZYDIS 5MG TABLET	30	30	
ZYPREXA ZYDIS 10MG TABLET	30	30	
ZYPREXA ZYDIS 15MG TAB	60	30	
ZYPREXA ZYDIS 20MG TABLET	60	30	
ZYRTEC 5MG	30	30	
ZYRTEC 10MG	30	30	
ZYRTEC-D 5-120MG	60	30	