

Drug Name	Strength (in MG or ML)	Maximum Quantity Limit per Day	Maximum Quantity Limit per Month	Requires Prior Authorization
* = Drug also requires attestation form.				
All drugs that exceed the 90 MME limit will require an attestation form.				
Oxycodone	5	12	360	No
Oxycodone	10	6	180	No
Oxycodone	15	4	120	No
Oxycodone	30	2	60	No
Oxycodone	20	3	90	No
Oxycodone CR	All strengths	All quantities within this dosing require authorization.		Yes*
Fentanyl	All strengths	All quantities within this dosing require authorization.		Yes*
Oxycodone/APAP 5/500	5	4	120	No
Oxycodone/APAP 5/325	5	4	120	No
Codeine/APAP 15/300	15	40	1200	No
Codeine/APAP 30/300	30	20	600	No
Codeine/APAP 60/300	60	10	300	No
Codeine/APAP 12/120	10	60	1800	No
Codeine Phosphate 15/mL	15	40	1200	No
Codeine Phosphate 30/mL	30	20	600	No
Codeine Sulfate	15	40	1200	No
Codeine Sulfate	30	20	600	No
Codeine Sulfate	60	10	300	No
Codeine Sulfate 15/2.5mL	6	100	3000	No
Codeine Sulfate 30/5mL	6	100	3000	No
Hydromorphone	2	11.23	337	No
Hydromorphone	4	5.6	168	No
Hydromorphone	8	2.8	84	No
Hydromorphone 1/mL	1	22.47	674	No
Hydromorphone 2/mL	1	22.47	674	No
Hydromorphone 5/5mL	1	22.47	674	No
Meperidine (oral)	50	18	540	No
Meperidine (oral)	10	90	2700	No
Meperidine 50/mL (IM/IV)	50	4.5	135	No
Meperidine 100/mL (IM/IV)	100	2.23	67	No

Meperidine 50/5mL (oral soln)	10	90	2700	No
Morphine Sulfate	15	6	180	No
Morphine Sulfate	30	3	90	No
Morphine Sulfate 1/mL (inj)	1	30	900	No
Morphine Sulfate 2/mL (inj)	2	15	450	No
Morphine Sulfate 4/mL (inj)	4	7.5	225	No
Morphine Sulfate 5/mL (inj)	5	6	180	No
Morphine Sulfate 8/mL (inj)	8	3.73	112	No
Morphine Sulfate 10/mL (inj)	10	3	90	No
Morphine Sulfate 15/mL (inj)	15	2	60	No
Morphine Sulfate 25/mL (inj)	25	1.2	36	No
Morphine Sulfate 50/mL (inj)	50	0.6	18	No
Morphine Sulfate 20/mL (oral soln)	20	4.5	135	No
Morphine Sulfate 10/5mL (oral soln)	2	45	1350	No
Morphine Sulfate 20/5mL (oral soln)	4	22.5	675	No
Morphine Sulfate SR	All strengths	All quantities within this dosing require authorization.		Yes*
Tramadol	50	8	240	No
Tramadol ER	All strengths	All quantities within this dosing require authorization.		Yes*
Hydrocodone/APAP 5/500	5	6	180	No
Hydrocodone/APAP 5/325	5	6	180	No
Hydrocodone/APAP 5/300	5	6	180	No
Methadone HCL	All strengths	All quantities require authorization.		Yes*