



## Virginia Medicaid's Maximum Quantity Limits

The following are maximum quantity limits per fill for select drug classes. The “days supply” entered on the POS claim should follow the prescriber’s directions. Pharmacy providers will receive a claim denial when these quantity limits are exceeded. The Call Center can be reached at 1-800-774-8481 to answer questions regarding these quantity limits. *New additions to the maximum quantity limit program effective for **April 1, 2010** are bolded.*

Brand Name	Generic Name	Qty Limit/Rx	Recommended Dosage*
<b>Anti-emetic Agents</b>			
Anzemet® 50 mg tab	Dolasetron	10 tabs	100 mg 1 hour prior to chemo
Anzemet® 100 mg tab		10 tabs	
Emend® 40 mg tab	Aprepitant	4 tabs	125 mg 1 hour prior to chemo, then 80 mg daily days 2 and 3
Emend® 80 mg tab		2 tabs	
Emend® 125 mg tab		1 tab	
Emend® Tripack		1 pack	
Kytril® 1 mg tab	Granisetron	10 tabs	2 mg daily on chemo days
Sancuso® 34.3 mg Transdermal system		2 systems	34.3 mg system up to 7 days depending on the chemo regimen
Zofran® 4 mg tab	Ondansetron	15 tabs	24 mg daily on chemo days in divided doses. Multi-day single dose 24 mg has not been studied.
Zofran® 8 mg tab		15 tabs	
Zofran® ODT 4 mg tab		15 tabs	
Zofran® ODT 8 mg tab		15 tabs	
Zofran® 24 mg tab		1 tab	
<b>Anti-migraine Agents</b>			
Amerge® 1 mg tab	Naratriptan	9 tabs	1 to 2.5 mg ORALLY; may repeat once after 4 hr, MAX 5 mg/24 hr
Amerge® 2.5 mg tab		9 tabs	
Axert® 6.25 mg tab	Almotriptan	6 tabs	6.25 to 12.5 mg ORALLY, may repeat after 2 hr, MAX 2 doses/24 hr
Axert® 12.5 mg tab		6 tabs	
Frova® 2.5 mg tab	Frovatriptan	12 tabs	2.5 mg ORALLY, may repeat after 2 hr, MAX 7.5 mg/24 hr
Imitrex® 25 mg tab	Sumatriptan	18 tabs	25 to 100 mg ORALLY, repeat after 2 hr, MAX 200 mg/24 hr
Imitrex® 50 mg tab		18 tabs	
Imitrex® 100 mg tab		9 tabs	
Maxalt® 5 mg tab	Rizatriptan	12 tabs	5 to 10 mg ORALLY; may repeat after 2 hr, MAX 30 mg/24 hr
Maxalt® 10 mg tab		12 tabs	
Maxalt-MLT® 5 mg tab		12 tabs	
Maxalt-MLT® 10 mg tab		12 tabs	
Zomig® 2.5 mg tab	Zolmitriptan* (requires a PDL PA)	8 tabs	2.5 mg ORALLY; may repeat after 2 hr, MAX 10 mg/24 hr
Zomig® 5 mg tab		8 tabs	
Zomig-ZMT® 2.5 mg tab		8 tabs	
Zomig-ZMT® 5 mg tab		8 tabs	
Relpax® 20 mg tab	Eletriptan* (requires a PDL PA)	6 tabs	20 to 40 mg ORALLY; may repeat after 2 hr; MAX single dose 40 mg; MAX daily dose 80 mg
Relpax® 40 mg tab		6 tabs	

Brand Name	Generic Name	Qty Limit/Rx	Recommended Dosage*
<b>Narcotics</b>			
Actiq® 200 mcg lozenge	Fentanyl <i>(Generic patches require PDL PA)</i>	136 lozenges	4 lozenges per day
Actiq® 400 mcg lozenge		136 lozenges	
Actiq® 600 mcg lozenge		136 lozenges	
Actiq® 800 mcg lozenge		136 lozenges	
Actiq® 1200 mcg lozenge		136 lozenges	
Actiq® 1600 mcg lozenge		136 lozenges	
Duragesic® 12 mcg/hr patch		15 patches	1 patch every 72 hours
Duragesic® 25 mcg/hr patch		15 patches	
Duragesic® 50 mcg/hr patch		15 patches	
Duragesic® 75 mcg/hr patch		15 patches	
Duragesic® 100 mcg/hr patch	15 patches		
Duragesic® 100 mcg/hr patch	15 patches		
<b>Opiate Dependence</b>			
Suboxone® 2 mg	Buprenorphine and Naloxone	102 tablets	16 mg/day; range: 4-24 mg/day
Suboxone® 8mg		102 tablets	
Subutex® 2 mg	Buprenorphine	102 tablets	16 mg/day; range: 4-24 mg/day
Subutex® 8mg		102 tablets	
<b>Postherpetic Neuralgia Pain</b>			
Lidoderm® 5% patches	Lidocaine Patch 5% <i>(requires a PDL PA beginning July 2010)</i>	90 patches	Up to 3 patches may be applied in a single application. Patch may remain in place for up to 12 hours in any 24-hour period.

\*In addition to maximum quantity limits, some products may have prior authorization requirements.