

# Stimulant Prescription Trends in the United States From 2012-2022

August 31, 2023

#### **Prepared For**

Drug Enforcement Administration (DEA) 600 Army Navy Dr. Arlington, VA 22202

#### **Prepared By**

IQVIA Government Solutions, Inc 3110 Fairview Park Drive Suite 400 Falls Church, VA 22042





# **Table of contents**

Executive Summary
Key Findings
Introduction
Methods
Analysis7
Results10
Overall Trend in Stimulant Prescriptions10
Patient Demographics10
Prescriber Specialties
Average Daily Dose (ADD)13
Product Switching within Stimulant Market14
ADHD Medications Containing Stimulants (Controlled) vs. Non-Stimulants (Non-Controlled)15
Branded vs. Generic Stimulant Medications17
Effects of COVID-19 Pandemic18
Telemedicine Visits for New Therapy Start Prescriptions during COVID-1919
Stimulant Prescriptions with Co-Prescriptions for Controlled Substance20
Data Caveats and Discussion23
References
Appendix 1: Stimulant ADHD Products
Appendix 2: Prescriber Specialty Categories
Appendix 3: ADHD Products with Non-Controlled Substances
Appendix 4: Telemedicine and Telehealth HCPCS Codes
Appendix 5: ADHD Diagnosis Codes
Appendix 6: Schedule Controlled Substances Considered for Co-Prescription



# Table of Figures

Figure 1: Projected Counts of Stimulant Prescriptions and Patients from 2012 to 2022 1	10
Figure 2: Top Prescriber Specialties from 2012 to 2022 1	13
Figure 3: Average Daily Dose (ADD) of Stimulant Prescriptions from 2012 to 2022 1	14
Figure 4: Stimulant Prescriptions Dispensed by Treatment Categories from 2012 to 2022 1	14
Figure 5: Switching Patterns Between Stimulants from 2012 to 2022 1	15
Figure 6: Percentage of ADHD Prescriptions Dispensed for Products Containing Stimulants from 2012 to 2022	17
Figure 7: Switch Patterns between ADHD Products Containing Stimulants and Non-Controlled Substances from 2019 to 2022	17
Figure 8: Percentage of Stimulant Prescriptions Dispensed for Branded Products from 2019 to 20221	18
Figure 9: Number of Stimulant Prescriptions Dispensed Monthly from 2019 to 2022 1	19
Figure 10: Percentage of Stimulant NTS Prescriptions Associated with Telemedicine Visits from 2019 to 2022	19
Figure 11: Percentage of Stimulant NTS Prescriptions Associated with Telemedicine Visits by Census Region from 2019 to 2022	20
Figure 12: USCs Most Often Co-Prescribed with Stimulant Medications from 2012 to 2022 2	22

# **Table of Tables**

Table 1: Demographic Characteristics of Stimulant Prescriptions Dispensed from 2012 to 2022	12
Table 2: Dispensed Prescriptions for Stimulant and Non-stimulant ADHD Treatment Molecules   from 2012 to 2022	16
Table 3: Proportion of Stimulant Prescriptions with Controlled Substance Co-Prescriptions from   2012 to 2022	21

# **Executive Summary**

#### What is already known about stimulant prescribing?

Prescriptions for stimulants have steadily increased since 2012. During the COVID-19 pandemic, policies enacted to minimize barriers to treatment combined with increased health seeking behavior likely expanded access to stimulants via telehealth. From 2012 to 2021, adults between the ages of 31-40 years, particularly women, and older patients (71-80 years old) had the highest increase in prescription stimulants dispensed. Overall, psychiatrists and pediatricians had most prescription stimulants dispensed; however, annual increases have been much higher among nurse practitioners.

### What is added by this report?

The increasing trend in stimulant prescriptions continued through 2022; since 2012, the highest annual increase in prescription stimulants dispensed was from 2021 to 2022. Women and older patients continue to experience the highest annual increase in prescription stimulants dispensed; in 2022, women surpassed men in dispensed prescriptions for stimulants. Overall, 90% of all ADHD treatment molecules dispensed were for stimulants and 10% were for non-stimulant medications in 2022. The most dispensed stimulant and non-stimulant ADHD treatment molecules in 2022 were amphetamine/dextroamphetamine and guanfacine, respectively. While the number of prescriptions dispensed for products containing amphetamine/dextroamphetamine continued to increase, the annual increase in 2022 was not as high as the one observed in 2021. In contrast, dispensed prescriptions for products containing methylphenidate HCI and dexmethylphenidate HCI had a higher annual increase in 2022 than in 2021. Over 75% of all stimulant prescriptions dispensed in 2022 came from prescriptions written by psychiatrists, pediatricians, family practice providers, and nurse practitioners; for the first time, more stimulant prescriptions dispensed came from prescriptions written by nurse practitioners (23.4%) than psychiatrists (21.8%).

## What are the implications for increased stimulant prescribing?

The sustained increase in stimulant prescribing, particularly among women and older adults, suggests a need for updated prescribing guidelines and provider education to ensure appropriate prescribing among those who may benefit from stimulants. Increased prescribing has led to increased availability of stimulants for misuse and abuse more broadly. A better understanding of who is prescribing, in what setting, and to which patients can help further inform strategies for mitigating misuse and/or abuse of stimulant medications.

# **Key Findings**

### Trends by patient demographics and prescriber specialty

- From 2012 to 2022, overall dispensing of stimulants in the US increased by 57.9%.
- Stimulants dispensed among the 31-40-year-old (yo) and 71-80yo age groups more than tripled since 2012; from 2012 to 2022, prescriptions dispensed rose from 5.4 million to 17.5 million among those 31-40yo, and from 0.1 million to 0.9 million among those 71-80yo.
- From 2012 to 2021, male patients had more stimulant prescriptions dispensed than female patients. By 2022, the number of stimulants dispensed to females were slightly higher than for males. Compared to 2012, prescriptions dispensed increased by 35.6% for males and 87.5% for females.
- For the first time in 2022, nurse practitioners wrote the highest number of stimulant prescriptions (23.4%), followed by psychiatrists (21.8%). While the number of stimulant prescriptions dispensed from psychiatry, pediatrics, and family practice have either declined or remained stable, stimulant prescriptions from nurse practitioners have more than tripled since 2012.

### Stimulant dispensing patterns: Switching patterns and average daily dose

- 94.5% of all stimulant prescriptions dispensed were existing prescriptions, ~3.6% were New Therapy Starts (NTS; i.e., did not have another stimulant prescription dispensed in the last 12 months), ~1.6% were switches, and 0.4% were add-ons to existing prescriptions. Of the switches, 10-18.5% were products containing non-controlled substances used for ADHD treatment.
- For non-controlled substances (atomoxetine, clonidine, guanfacine, viloxazine) used to treat ADHD, ~90% were existing prescriptions, ~5% were NTS, ~3% were switches, and 2% were add-ons. Among switches, ~85-90% were from products containing stimulants.
- Since 2012, average daily dose dispensed for stimulant medications had a modest decline over time, with similar trends across the top five most dispensed stimulant products.

#### Impact of the COVID-19 pandemic and telemedicine on stimulant dispensations

- From April to May 2020, there was a steep decline in the number of stimulant prescriptions dispensed immediately after the US began to recommend various COVID-19 restrictions. By October 2020, stimulant dispensing rebounded to pre-pandemic levels and subsequently had the highest year over year increase between 2021 and 2022.
- The use of telemedicine for stimulant NTS increased from less than 1% in March 2020 to 10% in April 2020, with a steady decline thereafter. By the end of 2022, the proportion of NTS stimulants had decreased to 5.4%. Even with the continued decline, the percentage of stimulant NTS prescribed through telemedicine visits has remained above pre-pandemic levels throughout 2022; however, regional differences were noted.

#### Stimulant co-prescribing with other controlled substances

In 2022, ~21% of stimulant prescriptions had a corresponding co-prescription for another controlled substance, most commonly benzodiazepines and SSRIs. Although opioids (e.g., hydrocodone, oxycodone, etc.) were also co-prescribed with stimulants, the proportion has declined from 16.5% in 2012 to 6.5% in 2022.



# Introduction

Prescription stimulants, such as methylphenidate (e.g., Ritalin) and amphetamine compounds (e.g., dextroamphetamine; Adderall), have been approved by the US Food and Drug Administration (FDA) for the treatment of attention-deficit/hyperactivity disorder (ADHD). These medications are available in short, intermediate, and long-acting (i.e., sustained release) formulations, and studies have demonstrated the effectiveness of prescription stimulants in the management of ADHD symptoms (Coghill, 2021). Due to the high potential for abuse and dependence, the DEA has classified stimulants as Schedule II medications. While increasing rates of ADHD diagnoses combined with the increase of telemedicine during the pandemic may have resulted in expanded access to stimulant prescribing, the increased availability of these medications has had broader implications with respect to substance abuse trends and may have exacerbated the ongoing opioid overdose epidemic in the US (Ciccarone, 2021; Hirschtritt et al., 2021; Danielson et al., 2023).

In response to the growing problems of opioid overdose involving stimulants and reported increases in prescription stimulant abuse, the DEA commissioned IQVIA to assess US trends related to prescription stimulant use from 2012 to 2021. This report expands on the previous report provided to DEA and provides an additional year of data (2022). This report further describes the increasing rate of stimulant prescriptions dispensed since the pandemic, prescribing patterns by patient demographics and prescriber specialty, and trends in dosing, switches, telehealth visits, and the coprescribing of stimulants and other controlled substances. The findings presented in this report are descriptive and contextual, and do not include tests of statistical significance. This report can help the DEA better understand the nuances around stimulant dispensing trends in the US, and the potential impact of increased stimulant dispensing on the opioid overdose epidemic.



# **Methods**

# **Data Sources**

IQVIA used the following longitudinal patient data sources: Longitudinal Prescription (LRx), Open-Source Medical Claims (Dx), and Consumer data. The primary data source was LRx, with additional indicators for telehealth visits from Dx, and patient race/ethnicity information from the Consumer database.

## Longitudinal Prescription (LRx) Database

LRx data track individual patients' prescriptions over time. IQVIA receives approximately **3.7 billion prescription claims for 250 million patients per year**, with history back to January 2004. LRx captures approximately 94% of all raw prescription transactions from retail pharmacies across the US, 74% for traditional and specialty mail order pharmacies, and 62% for long-term care pharmacies. LRx data are received electronically from pharmacies, payers, software providers, and transactional clearinghouses. LRx data contain granular prescription-level information on the pharmaceutical product dispensed, prescription specifications (e.g., dose, duration, etc.), prescriber, payer, and geographical location of the patient. LRx data are longitudinally linked back to an anonymous patient token that can be linked to other patient-level data.

## Medical Claims Database (Dx)

Dx data represent pre-adjudicated claims generated by office-based physicians and specialists and collected through practice management software and claims clearinghouses (or "switches"). These data are sourced from CMS-1500 form-based or EDI 837p and EDI 837i claim transactions, the standard reimbursement form for all non-cash claims. Medical claims contain patient-level diagnoses, procedures performed, tests ordered, and drugs prescribed during visits to US office-based healthcare professionals, ambulatory, and general healthcare sites, as well as hospitals and skilled nursing facilities. Dx claims cover more than **200 million patients** per year. Approximately 96% of AMA licensed physicians are captured in the sample. Dx data can be linked to other patient-level data for a more comprehensive understanding of the patient experience and prescription utilization by indication.

## **Consumer Database**

The consumer attributes database can link consumer demographic or behavioral data to individual patients or Health Care Professionals (HPC) to create *Patient as Consumer or Physician* as *Consumer* Profiles. These data allow users to understand the patient or HCP beyond just age and sex, creating stronger patient insights for profiles, segmentation, and measurement. The consumer data are updated daily as new information is gathered for each consumer, which then goes through a de-identification and tokenization process. There are data on approximately 248 million consumers which can be matched and linked across IQVIA's patient-level databases. The match rate is ~50% and will vary across patient cohorts meeting different market definitions.



# Analysis

#### **Stimulant Prescriptions**

IQVIA defined the ADHD stimulant market as prescriptions dispensed from January 2012 through December 2022 for all products containing stimulant molecules:

- Amphetamine
- Dextroamphetamine
- Methamphetamine
- Lisdexamfetamine
- Methylphenidate
- Dexmethylphenidate
- Serdexmethylphenidate

For the full list of ADHD stimulant products, please refer to Appendix 1.

Once the prescription claims for stimulants are selected, IQVIA ensures completeness of the data by applying pharmacy stability and patient eligibility requirements. All pharmacies used by the patient must have consistently supplied data to the LRx database for the relevant study period, which includes the selection, look-back, and look-forward periods. To meet the patient eligibility requirement, the patient must have at least one record of prescription activity in any market within the LRx database prior to the look-back period. The use of eligibility requirements is standard practice for ensuring continuous eligibility in custom longitudinal studies.

#### Projection

While LRx captures approximately **94%** of all raw prescription transactions across the US, IQVIA has developed a proprietary projection methodology to account for the remaining 6% of prescriptions that were not captured. Specifically, IQVIA uses data from its sales database, which captures data from more than 428 pharmaceutical wholesalers, chain distribution centers, specialty distributors, physician suppliers, re-packagers, mail service pharmacies as well as direct sales data from over 100 pharmaceutical manufacturers. IQVIA uses the sell-in data to size the locations of each pharmacy. Utilizing data from reporting pharmacies (i.e., pharmacies that report prescription data to IQVIA) located in proximity to the non-reporting pharmacies, IQVIA projects for the volume of the non-reporting pharmacies, and therefore projects to 100% of dispensing in the retail, mail, and long-term care channels.

Except for the Average Daily Dose (ADD) analysis, all the analyses detailed below used the described methodology to calculate the projected number of prescriptions dispensed and the projected number of patients.

#### **Patient Demographics**

IQVIA calculated patient age using the patient's year of birth and the study year, and further categorized patient ages into 10-year groups up to 80yo (e.g., 0-10, 11-20, etc.); patients older than 80 were grouped together. IQVIA defined patient sex as male or female. IQVIA sourced patient race/ethnicity from the Consumer data using the following categories: White, African American, Hispanic, Asian/Other, or Unspecified.



#### **Prescriber Specialties**

IQVIA grouped specialties of the prescribers into the same specialty categories as found in IQVIA's National Prescription Audit (NPA). Please refer to Appendix 2 for the list for specialty categories used in this report.

### Average Daily Dose (ADD)

IQVIA assessed trends in Average Daily Dose (ADD) for stimulant medications from 2012 to 2022. IQVIA calculated daily dose for each prescription as (strength)\* (quantity/days' supply). IQVIA defined ADD in a year as the total daily dose divided by the number of dispensed prescriptions.

### Treatment Categories via Source of Business (SOB)

To assess product switching behaviors, IQVIA grouped stimulant prescriptions into various treatment categories. With product group defined as the molecule of the stimulant product, the treatment categories were reported as follows:

- New Therapy Start (NTS): The patient did not have a stimulant prescription dispensed during the 12-month look-back from the index date.
- **Continue**: The patient had at least one prescription dispensed for the index stimulant product group during the 12-month look-back from the index date.
- Add-On (AO): The patient did not have a prescription dispensed for the index stimulant product group and met at least one of the two following criteria during the 12-month look-back from the index date:
  - > Dispensed a stimulant that extended beyond the end of the days' supply of the current index prescription.
  - > Dispensed another stimulant in the same product group as the prior prescription, and met all three criteria below:
    - Within 30 days after the current index prescription;
    - Within 30 days of the days' supply end of the prior prescription;
    - At least 5 days of days' supply overlap between the current and prior prescription.
- **Switch**: The patient did not have a prescription for the index stimulant produced group but had a prescription dispensed in at least one other stimulant product group during the 12-month lookback for the index date.

## ADHD Medications Containing Stimulant (Controlled) vs. Non-Stimulant (Non-Controlled) Substances

To compare the use of stimulant and non-stimulant medications used to treat ADHD, IQVIA selected prescriptions dispensed from January 2012 to December 2022 for all products indicated for ADHD treatment that contain these selected molecules:

- atomoxetine
- clonidine
- guanfacine
- viloxazine



# For the full list of ADHD products with non-controlled substances, please refer to Appendix 3 – Branded vs. Generic Stimulant Medications

Using IQVIA's product reference files, IQVIA distinguished between branded and generic stimulant products using product indicators.

#### **Effects of COVID-19 Pandemic**

IQVIA assessed the number of stimulant prescriptions dispensed from January 2019 to December 2022 (monthly) to evaluate the impact of the COVID-19 pandemic.

### Telemedicine/Telehealth

IQVIA defined telemedicine visits in the Dx data that met any of the conditions below:

- Place of Service code = "02," indicating health services were provided or received through telecommunication technology
- Procedure Modifier code of "95," "GT," or "GQ," which all indicate telehealth services
- Procedure Code for Telemedicine/Telehealth

To flag NTS stimulant prescriptions that resulted from telemedicine visits, both conditions must have been met:

- There was a telemedicine medical claim within a 14-day look-back period from the fill date of each NTS prescription
- <u>At least</u> one of the following conditions:
  - Prescriber ID on the stimulant prescription claim is the same as the Rendering Provider ID on the telemedicine medical claim
  - > ADHD is listed as one of the diagnoses on the telemedicine medical claim

Please refer to Appendix 4 for the list for telemedicine Healthcare Common Procedure Coding System (HCPCS) procedure codes and Appendix 5 for the list of ADHD International Classification of Diseases-10 (ICD-10) diagnosis codes.

#### **Co-Prescription**

IQVIA flagged each stimulant prescription for a co-prescription with a controlled substance if the coprescription met <u>all the criteria</u> below:

- Occurred within 90-days (before or after) of a stimulant prescription
- Days' supply overlap of at least 15 days between the controlled substance prescription and stimulant prescription
- Same Prescriber ID in both the controlled substance prescription and stimulant prescription

There could be multiple co-prescribed products for each stimulant prescription. For these, IQVIA captured up to five co-prescribed products with dispense dates closest to the stimulant prescription dispense dates. Please refer to Appendix 6 for the list for controlled substance products considered for co-prescription.

# **Results**

# **Overall Trend in Stimulant Prescriptions**

From 2012 to 2022 (See Figure 1), the projected number of stimulant prescriptions dispensed increased by **57.9%**, from 50.4 million in 2012 to 79.6 million in 2022. While the projected patient counts increased from 11.1 million in 2012 to 14.0 million in 2022, the patient counts decreased from 2012 to 2013, and then again from 2016 to 2018. Prescriptions dispensed increased every year except in 2017. The highest annual percent increase in prescription and patient counts was from 2021 to 2022 (8.5%). On average, the number of prescriptions dispensed per patient per year increased from 4.5 in 2012 to 5.7 in 2022.

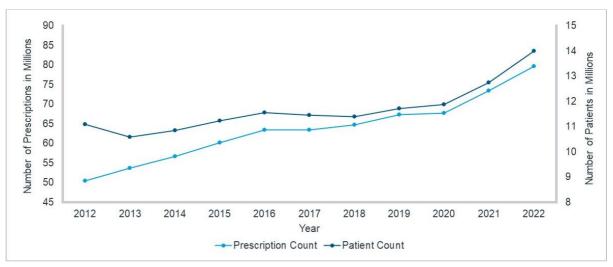


Figure 1: Projected Counts of Stimulant Prescriptions and Patients from 2012 to 2022

# **Patient Demographics**

## Sex

Consistent with overall stimulant prescriptions dispensed (See Table 1), there was an increase in the number of prescriptions dispensed from 2012 to 2022 for both males and females; however, the percent increase for female was higher than males. The number of prescriptions increased by 87.5% (21.6 million in 2012 to 40.5 million in 2022) for females, and 35.3% (28.9 million in 2012 to 39.1 million in 2022) for males. The highest percent increase occurred between 2020 and 2021 for females, and between 2021 and 2022 for males. For NTS, more prescriptions were dispensed for male patients from 2012 to 2019, but from 2020 to 2022 more prescriptions were dispensed to female patients.

# Age

While the 11-20yo group consistently had the highest percentage of stimulant prescriptions dispensed from 2012 to 2022 (See Table 1), the percentage among this group decreased from 35.1% of all stimulant prescriptions in 2012 to **22.6%** in 2022. Prescriptions among the 31-40yo group more than tripled since 2012, and the share has increased from 10.1% of all stimulant prescriptions in 2012 to 22.0% in 2022. The 0-10yo group was the only group with a decrease in dispensed prescriptions, from 9.7 million in 2012 to 7.4 million in 2021; however, in 2022, IQVIA observed a slight increase in



dispensing for this group. For patients 20 years and younger, males consistently had more prescriptions dispensed than females while for patients 21 years and older, females consistently had more prescriptions than males.

#### **Race/Ethnicity**

Approximately 32% of the stimulant prescriptions had patient race/ethnicity data available (See Table 1). Of those with known patient race/ethnicity, most prescriptions were dispensed to Caucasian patients, followed by Hispanic, African American, and Asian/Other patients. The number of prescriptions dispensed to Asian/Other patients from 2012 to 2022 had the highest increase while the number of prescriptions dispensed to African American patients had the lowest increase from 2012 to 2022.



		2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
All		50,445,946	53,728,661	56,622,294	60,188,348	63,493,937	63,487,133	64,742,449	67,374,892	67,693,255	73,380,849	79,624,134
Sex	Female	21,580,852	23,317,646	24,946,217	26,951,783	28,757,702	29,046,829	29,918,189	31,451,891	32,796,307	36,569,804	40,495,128
Š	Male	28,865,094	30,411,014	31,676,077	33,236,565	34,736,236	34,440,304	34,824,259	35,923,001	34,896,948	36,811,044	39,129,006
	0-10	9,692,397	9,919,205	9,800,148	9,706,586	9,646,703	9,110,508	8,726,354	8,549,027	7,442,584	7,410,165	7,657,647
	11-20	17,695,482	18,008,758	18,238,758	18,600,204	18,955,272	18,412,146	18,291,767	18,417,680	16,806,264	17,360,227	18,012,607
Irs)	21-30	7,991,733	8,815,799	9,657,661	10,546,520	11,204,189	11,174,822	11,170,624	11,347,064	11,545,862	12,885,615	13,847,035
(Years)	31-40	5,400,980	6,280,328	7,170,513	8,301,850	9,364,545	9,986,388	10,863,877	12,047,202	13,329,846	15,313,953	17,510,521
Group	41-50	4,565,717	5,038,783	5,477,489	6,080,020	6,686,117	6,959,177	7,466,272	8,143,264	8,968,588	9,978,536	11,269,826
Gre	51-60	3,414,722	3,735,112	4,062,297	4,442,739	4,790,171	4,857,559	5,035,066	5,371,021	5,789,320	6,292,592	6,820,803
Age	61-70	1,264,688	1,452,640	1,666,185	1,898,400	2,161,059	2,275,866	2,419,832	2,633,406	2,846,920	3,063,213	3,295,025
	71-80	146,379	206,023	275,086	342,141	423,005	479,032	556,893	638,790	716,329	800,789	903,930
	81+	273,849	272,013	274,157	269,887	262,877	231,634	211,764	227,439	247,541	275,758	306,740
ty	African American	634,934	613,725	610,039	614,618	624,339	598,240	587,976	607,229	632,250	711,020	766,724
nici	Asian/Other	230,965	238,451	259,527	280,161	304,521	311,558	320,350	342,340	362,499	424,986	463,627
Race/Ethnicity	Caucasian	15,193,380	15,644,491	16,239,758	16,946,942	17,660,125	17,471,228	17,600,394	18,276,027	19,242,658	21,201,505	22,538,453
Race	Hispanic	939,698	932,587	957,162	993,197	1,043,690	1,014,919	1,019,623	1,107,048	1,197,921	1,369,054	1,512,733
	Unspecified	33,446,970	36,299,406	38,555,808	41,353,429	43,861,262	44,091,189	45,214,105	47,042,249	46,257,928	49,674,284	54,342,596

## Table 1: Demographic Characteristics of Stimulant Prescriptions Dispensed from 2012 to 2022



# **Prescriber Specialties**

Among provider specialties, psychiatry, pediatrics, family practice, and nurse practitioner prescribed over **75%** of the stimulant prescriptions dispensed from 2012 to 2022 (See Figure 2). The number of dispensed stimulant prescriptions written by nurse practitioners has increased more than five times since 2012, and they were the highest prescribers for the first time in 2022.





Prescriptions for the products amphetamine/dextroamphetamine and Vyvanse largely contributed to the increase in dispensed stimulant prescriptions written by nurse practitioners. Since 2012, the number of dispensed stimulant prescriptions written by pediatricians has decreased by 6.9%, notably for the products methylphenidate HCL and Vyvanse.

# Average Daily Dose (ADD)

Across all stimulant products, there was an initial increase in ADD from 2012 to 2013, followed by a consistent decrease resulting in an overall **8.7%** decrease in ADD from 2013 to 2022 (See Figure 3). The most notable decreases occurred from 2017 to 2018 and 2020 to 2022.

IQVIA also observed a decrease in ADD in the top five most dispensed stimulant products. For amphetamine/dextroamphetamine, there was a 6.9% decrease over time, with the sharpest decrease from 2021 to 2022. For methylphenidate HCl, there was a 13.1% decrease over time, with increases from 2012 to 2013 and 2019 to 2020 and decreases from 2017 to 2018 and 2020 to 2022. For Adderall XR, there was 11.9% decrease over time, with the sharpest decrease from 2012 to 2012 to 2013 and 2019 to 2020 and decrease over time, with the sharpest decrease from 2012 to 2013 and 2019 to 2013 and 2020 to 2022. For Adderall XR, there was a 3.8% decrease over time, with increases from 2015 to 2016, and decreases thereafter. For Vyvanse, there was a 6.7% decrease over time, with the sharpest decrease from 2014 to 2015.



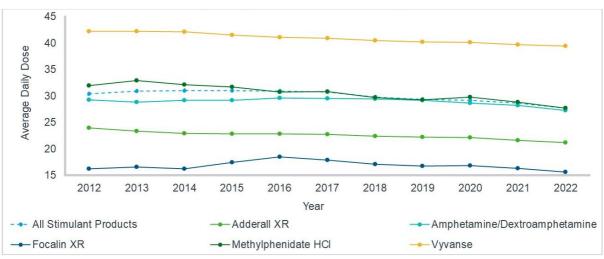


Figure 3: Average Daily Dose (ADD) of Stimulant Prescriptions from 2012 to 2022

# **Product Switching within Stimulant Market**

For all stimulants dispensed from 2012 to 2022, 94.5% of all stimulant prescriptions were classified as continue, 3.6% as NTS, 1.6% as switch, and 0.4% as AO prescriptions (See Figure 4). For continue and NTS prescriptions, about 90% were for products containing the molecules amphetamine/dextroamphetamine, lisdexamfetamine dimesylate, and methylphenidate HCI. For switch prescriptions, about 83% were for products containing the molecules amphetamine/dextroamphetamine, lisdexamfetamine dimesylate, and methylphenidate HCI. Lastly, over half of the AO prescriptions were for amphetamine/dextroamphetamine products.





Since 2012, the number of prescriptions that switched from lisdexamfetamine dimesylate products to amphetamine/dextroamphetamine products increased by **24.9%**, with a peak in 2018 (See Figure 5). The number of prescriptions that switched from either amphetamine/dextroamphetamine or lisdexamfetamine dimesylate products to methylphenidate hydrocholoride products steadily decreased until 2020. Since then, there has been a steady increase in switching resulting in the highest annual increase (32.8%) in the number of stimulant prescriptions in 2022 switching from either amphetamine/dextroamphetamine or lisdexamfetamine dimesylate products to methylphenidate HCI.



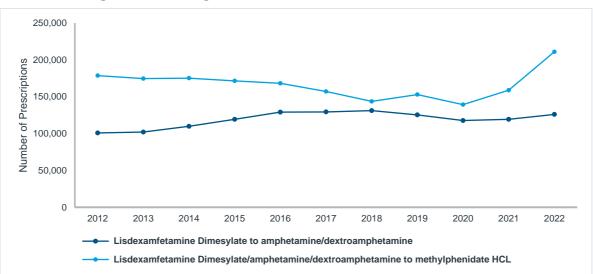


Figure 5: Switching Patterns Between Stimulants from 2012 to 2022

# ADHD Medications Containing Stimulants (Controlled) vs. Non-Stimulants (Non-Controlled)

Overall, 90% of all ADHD treatment molecules dispensed were for stimulants and 10% were for nonstimulant medications in 2022 (See Table 2). Stimulants have increased ~58% from 2012 and ~9% from 2021; in contrast, non-stimulant medications have increased ~74% from 2012 and ~17% from 2021. The most dispensed stimulant and non-stimulant ADHD treatment molecules in 2022 were amphetamine/dextroamphetamine and guanfacine, respectively, the same as 2021. Notable increases in stimulant and non-stimulant dispensing from 2021 to 2022 were for atomoxetine (20.6%), dexmethylphenidate (11.5%), methylphenidate HCI (9.1%), and amphetamine/dextroamphetamine (8.5%).



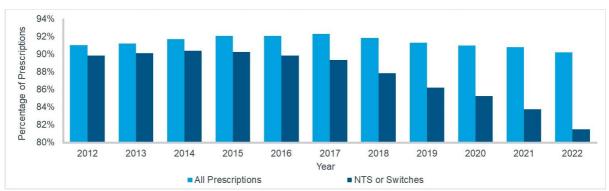
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
All ADHD Treatment Molecules	55,392,763	58,885,747	61,728,729	65,346,461	68,937,015	68,765,672	70,469,359	73,790,465	74,374,895	80,776,996	88,246,388
Stimulants	50,445,947	53,728,661	56,622,296	60,188,347	63,493,939	63,487,134	64,742,449	67,374,893	67,693,255	73,380,849	79,624,134
Amphetamine/Dextroamphetamine	21,187,383	23,552,936	25,858,983	28,513,613	30,880,983	31,782,478	33,358,137	35,325,787	37,019,895	40,901,001	44,613,679
Methylphenidate HCI	14,895,221	15,175,122	15,600,551	15,689,044	15,780,487	15,061,448	14,412,511	14,587,531	13,970,780	14,835,853	16,007,069
Lisdexamfetamine Dimesylate	9,084,740	9,662,494	10,070,051	10,859,310	11,621,538	11,416,971	11,348,741	11,613,957	11,228,130	11,774,361	12,508,565
Dexmethylphenidate HCI	3,940,547	4,074,100	3,847,401	3,913,517	4,071,564	3,991,043	4,142,464	4,384,091	4,133,639	4,474,663	4,988,664
Dextroamphetamine Sulfate	856,471	783,296	800,200	801,695	805,895	764,424	743,279	743,680	739,051	773,169	804,537
Amphetamine					37,945	223,183	368,460	349,144	289,625	307,028	309,365
Methylphenidate	467,553	467,815	432,667	358,353	186,040	127,052	259,897	271,609	227,792	228,345	217,409
Serdexmethylphenidate Chloride-Dexmethylphenidate HCI										5,008	99,374
Amphetamine Sulfate				41,170	98,925	111,065	100,114	90,694	76,182	73,558	68,797
Methamphetamine HCI	14,032	12,898	12,443	11,645	10,562	9,470	8,846	8,400	8,161	7,863	6,675
Non-Stimulants	4,946,816	5,157,086	5,106,434	5,158,114	5,443,077	5,278,539	5,726,910	6,415,573	6,681,639	7,396,148	8,622,254
Guanfacine HCL (ADHD)	2,324,769	2,513,095	2,517,386	2,540,676	2,784,167	2,833,565	3,118,545	3,601,000	3,715,627	3,913,957	4,197,557
Atomoxetine HCL	2,363,958	2,312,255	2,278,505	2,316,178	2,356,551	2,160,152	2,316,021	2,490,550	2,612,350	3,031,635	3,654,916
Clonidine HCL (ADHD)	258,089	331,736	310,543	301,260	302,359	284,822	292,344	324,023	353,662	400,567	459,880
Viloxazine HCL (ADHD)										49,989	309,901

### Table 2: Dispensed Prescriptions for Stimulant and Non-stimulant ADHD Treatment Molecules from 2012 to 2022

\*\*Note: Counts are projected and due to rounding may not add up to total

# **≣IQVIA**

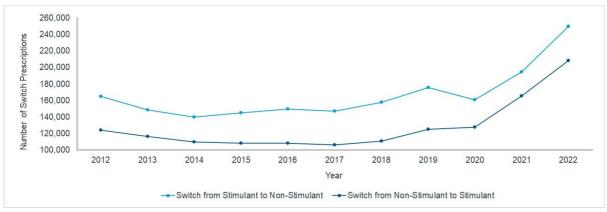
Most ADHD prescriptions dispensed were for products containing stimulants, and this remained consistent over time (See Figure 6). When restricted to ADHD prescriptions that are NTS or switches, the percentage of prescriptions for stimulants (as opposed to non-stimulants) decreased from 89.9% in 2012 to 81.5% in 2022.





When restricted to ADHD prescriptions that were switches only, 84.7% were for products that contained stimulants while 15.3% were for products that contained nonstimulants (See Figure 7). However, the number of prescriptions that switched from stimulants to nonstimulants was higher than the number of prescriptions that switched from nonstimulants to stimulants. IQVIA observed **80-90%** of the switch prescriptions for products containing nonstimulants had switched from products containing stimulants. At the same time, **12-16%** of the switch prescriptions for products containing nonstimulants. The number of prescriptions that switched from products containing amphetamine/dextroamphetamine to products containing atomoxetine has more than doubled since 2012.





# **Branded vs. Generic Stimulant Medications**

The percentage of stimulant prescriptions dispensed for branded compared to generic products decreased from 36% in 2012 to 29% in 2022 (See Figure 8). IQVIA observed the same trend when restricting to stimulant prescriptions that are NTS or switches.



Of the prescriptions dispensed for dexmethylphenidate products, the percentage of dispensed prescriptions for the branded products dropped from 81.5% in 2012 to 16.1% in 2022. Importantly, the loss of exclusivity for Focalin XR occurred in October 2013, and by November 2013 Mylan announced the launch of generic dexmethylphenidate ER capsules. Teva Pharmaceuticals, Sandoz, and KVK Tech were the top three manufacturers of dexmethylphenidate and dexmethylphenidate ER, which may have accelerated generic uptake.

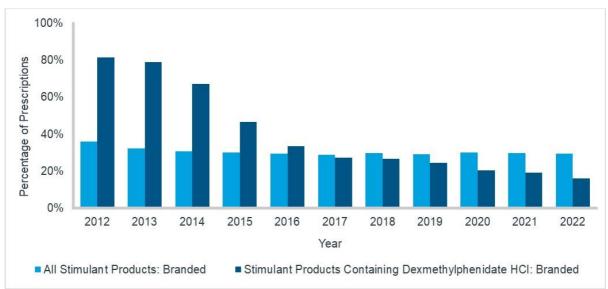


Figure 8: Percentage of Stimulant Prescriptions Dispensed for Branded Products from 2019 to 2022

# **Effects of COVID-19 Pandemic**

In March 2020, COVID-19 was declared a pandemic by the World Health Organization (WHO) and a national emergency by President Trump. Subsequently, there was **10.2%** drop in stimulant prescriptions until June 2020, after which prescriptions began to rebound to 2019 levels (See Figure 9). Compared to April and May 2019, dispensing decreased by 6.7% and 9.1% in April and May 2020, respectively. Methylphenidate HCl saw the largest decrease from 2019 to 2020.

Prescriptions increased by 8.5% from 2020 to 2022. The number of stimulant prescriptions dispensed per month in 2022 ranged from 1.4%-12.8% higher than those dispensed in 2021 during the same month. The product amphetamine/dextroamphetamine saw the largest increase from 2020. Consistently for all months, the number of stimulant prescriptions dispensed in 2021 and 2022 have been higher than those dispensed in 2019.



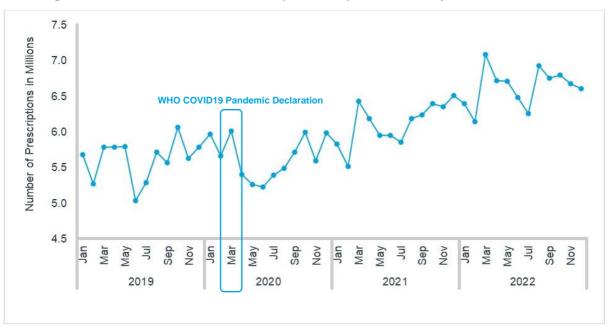


Figure 9: Number of Stimulant Prescriptions Dispensed Monthly from 2019 to 2022

# Telemedicine Visits for New Therapy Start Prescriptions during COVID-19

Prior to March 2020, the percentage of NTS prescriptions dispensed each month associated with telemedicine visits remained consistently low at ~0.3% (See Figure 10). This number spiked to 10.4% in April 2020. While telemedicine visits decreased in 2021 and 2022 compared to 2020, they remained higher than those observed prior to the start of the pandemic. NTS prescriptions associated with telemedicine visits were dispensed most often for amphetamine/dextroamphetamine, methylphenidate, and Vyvanse.

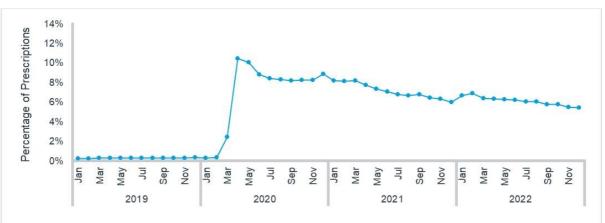
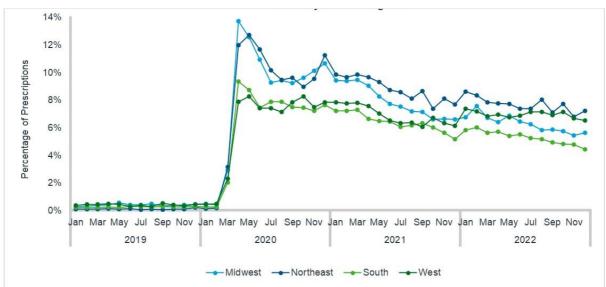


Figure 10: Percentage of Stimulant NTS Prescriptions Associated with Telemedicine Visits from 2019 to 2022

The highest percentage of NTS prescriptions associated with telemedicine visits were observed in the Northeast census region, and lowest in the West (See Figure 11). States with the highest increase in NTS prescriptions associated with telemedicine visits from 2019 to 2022 were Texas, followed by Florida, Ohio, New York, and Massachusetts. Conversely, states with the lowest increase in NTS



prescriptions associated with telemedicine visits from 2019 to 2022 were Wyoming, followed by Hawaii, Vermont, Montana, and Alaska.





# Stimulant Prescriptions with Co-Prescriptions for Controlled Substance

In 2022, about 21% of all stimulant prescriptions were co-prescribed with a controlled substance (See Table 3). The proportion of co-prescribing increased from 19.4% in 2012 to 21.9% in 2017, with a slight decrease until 2019. It peaked in 2020 at 22.5% and has decreased since then. In 2022, products containing the molecules amphetamine/dextroamphetamine (~25%), dextroamphetamine sulfate (~28%) and methamphetamine HCI (~45%) have the highest proportion of co-prescriptions.



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
All Stimulant Molecules	19.4%	20.1%	20.8%	21.5%	21.8%	21.9%	21.7%	21.5%	22.5%	22.1%	20.8%
Amphetamine					13.9%	12.4%	10.2%	9.7%	11.6%	12.7%	13.6%
Amphetamine Sulfate				32.4%	25.5%	22.1%	20.3%	20.4%	21.3%	21.0%	21.5%
Amphetamine/Dextroamphetamine	26.6%	27.6%	28.3%	28.8%	28.7%	28.4%	27.8%	27.2%	27.7%	26.6%	25.3%
Dexmethylphenidate HCI	7.0%	6.9%	7.0%	7.3%	7.5%	7.8%	7.8%	7.9%	8.7%	9.1%	9.3%
Dextroamphetamine Sulfate	31.2%	31.2%	31.4%	31.3%	31.2%	30.9%	30.2%	29.7%	30.0%	29.3%	28.2%
Lisdexamfetamine Dimesylate	14.9%	15.2%	15.7%	16.8%	17.7%	18.1%	18.2%	18.3%	19.6%	19.8%	19.9%
Methamphetamine HCI	50.9%	50.6%	48.6%	49.9%	48.0%	46.5%	46.2%	45.6%	47.0%	46.9%	44.5%
Methylphenidate	6.2%	6.4%	6.8%	7.0%	7.3%	8.1%	7.4%	7.1%	7.7%	7.9%	8.0%
Methylphenidate HCl	15.0%	15.0%	14.9%	14.8%	14.7%	14.5%	14.6%	14.5%	15.4%	15.5%	15.3%
Serdexmethylphenidate Chloride-Dexmethylphenidate HCI										16.0%	13.5%

#### Table 3: Proportion of Stimulant Prescriptions with Controlled Substance Co-Prescriptions from 2012 to 2022

Of stimulant prescriptions with controlled substance co-prescriptions, the controlled substances most often belonged in five Uniform System of Classification (USC) categories, the therapeutic classification system created by IQVIA that is the standard for pharmaceutical product classification (See Figure 12).



#### USC5 64610: Benzodiazepines

In 2022, benzodiazepines were the most common co-prescribed medications at ~35%. Alprazolam, diazepam, and lorazepam were the most commonly co-prescribed benzodiazepines.

#### USC5 64340: Selective Serotonin Reuptake Inhibitor (SSRI)

The proportion of stimulant prescriptions with a co-prescription of an SSRI have been steadily increasing, with a peak in 2022 at ~29%. Fluoxetine hydrocholoride was the most commonly co-prescribed SSRI

#### USC5 20200: Seizure Disorders

The proportion of stimulant prescriptions with co-prescription of a medication used to treat seizure disorder was ~18% in 2022, with a peak in 2015. Clonazepam was the most commonly co-prescribed medication in this class.

# USC5 67290: Non-Barbiturate Sedatives, Other (i.e., do not contain chloral hydrate, acetylcarbromal, or the sedative bromides)

The proportion of stimulant prescriptions with a co-prescription of a non-barbiturate sedative steadily decreased from ~22% in 2012 to 15% in 2022. Zolpidem was the most commonly co-prescribed medication in this class.

#### USC5 02232: Codeine & Combination, Non-Injectable (Includes most opioid molecules)

The proportion of stimulant prescriptions with a co-prescription of an opioid medication steadily decreased from 17% in 2012 to 7% in 2022. Hydrocodone, hydrocodone/acetaminophen, oxycodone, and oxycodone/acetaminophen were the most commonly co-prescribed opioid medications.

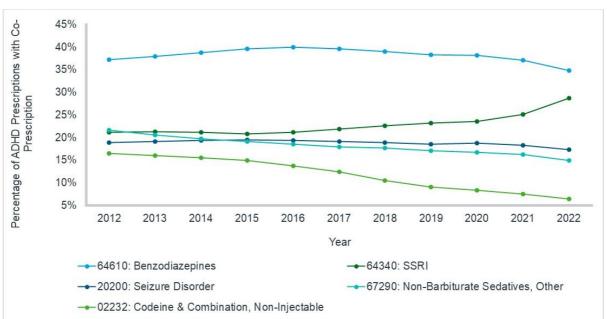


Figure 12: USCs Most Often Co-Prescribed with Stimulant Medications from 2012 to 2022



# **Data Caveats and Discussion**

The findings in this report should be interpreted considering a few notable caveats. First, LRx does not include prescriptions dispensed in inpatient settings. Second, the analysis on ADD did not account for patient age, dose at initiation, or non-ADHD indications for treatment. As such, ADD findings may be masking certain dosage trends by specific age groups. For instance, children tend to initiate treatment at a lower dose than adults so additional analysis looking at ADD by age may provide better insights on trends over time. Third, Dx data may not comprehensively capture telemedicine visits that occur in specific settings or regions. For instance, Dx does not capture claims originating from some larger telemedicine platforms and coverage varies by geography, with lower capture in the West. Lastly, patient race/ethnicity information was only available for 31.5% of the total patients dispensed stimulants in LRx. This lower match rate is likely due to a higher pediatric and adolescent population that are typically underrepresented in the consumer data.

Of note, this report characterizes dispensing trends of stimulant and non-stimulant ADHD medications, but it does not differentiate between legitimate medical use of these products and misuse/abuse of these products by the patient, or their close contacts. While some of the prescriptions dispensed may be misused/abused by the patient or others, the data in this report cannot be used to infer intent of the patient.

Despite these caveats, this report provides valuable insights into stimulant prescription trends through 2022. IQVIA observed a consistent rise in stimulant utilization, notably starting in 2020 and persisting through 2022, but the drivers behind the increase are not entirely clear. While expanded access to stimulants via telehealth without an in-person visit may be one driver of the observed increase in stimulant utilization, health seeking behaviors and the impact of COVID-19 on everyday life may have also contributed to the rise in adults being diagnosed with and treated for ADHD. At the same time, some data prior to COVID-19 suggest stimulant utilization and ADHD diagnoses are not well correlated. From 2006 to 2016 there was more than a two-fold increase in stimulant use, but only a 4% increase in ADHD diagnoses during that same period (Piper et al., 2018).

The sustained increase in stimulant prescription dispensing has also impacted the ongoing opioid overdose epidemic (O'Donnell et al., 2020). As opioid overdoses continue to rise, clinicians, healthcare providers, and policymakers should promote appropriate co-prescribing of stimulants and opioid drugs and enhance clinical guidelines accordingly. While our findings suggest that co-prescribing of stimulants with opioids and most other controlled substances have decreased over time, co-prescribing with antidepressants continue to increase. Clinicians must continue to weigh the benefits and risks associated with co-prescribing stimulants with other drugs and monitor for patient adherence to treatment protocols.

Future analyses can build upon this report to provide a more comprehensive understanding of the trends surrounding prescription stimulant dispensing. For instance, a time series analysis that accounts for patient characteristics, payer and insurance type, prescriber characteristics, and geographical location could help to flesh out and quantify additional trends and associations. More indepth analyses around stimulant prescribing in telemedicine are also necessary. While this healthcare delivery modality brings great value to patients in remote and underserved geographical areas, it also carries the risks for misdiagnosis and inappropriate prescribing. Given the increase in stimulant dispensing in the older adult population, stratified analyses that account for various comorbid



conditions among existing and new stimulant users may inform targeted interventions for both patients and providers. Other potential factors to explore vis-à-vis the rise of stimulant utilization include off-label use and its impact, the duration and dose of stimulant treatment episodes, and common comorbidities associated with patient profiles.

Given the rise in stimulant use, it is critical to ensure that stimulants are being appropriately prescribed. In general, some prescribers and other healthcare providers treating patients with ADHD may want to consider the following practice changes to mitigate the overprescribing and misuse of stimulants:

- Confirm an ADHD diagnosis by adhering to Diagnostic and Statistical Manual of Mental Disorders (DSM-5) criteria before prescribing stimulant medications
- When a prescription is written, the prescriber should cross-reference data available in state-run prescription drug monitoring programs (PDMPs)
- Limit prescriptions to a smaller number of pills or dose per pill
- Limit the frequency of prescription refills
- Implement pill counts during patient visits
- Prescribe extended-release instead of immediate-release formulations
- Provide education on the proper use of stimulant medications and the danger of sharing medications with others
- Provide education on the proper disposal of stimulant medications
- Prescribe non-stimulant medications for ADHD, if clinically appropriate

Efforts to address stimulant misuse should also be integrated with initiatives already underway to address opioid addiction and overdose. The recognition that the US is facing a drug addiction and overdose crisis, not just a stimulant crisis, should guide research, prevention, and treatment efforts going forward.



# **References**

Brumbaugh, S, Tuan, WJ, Scott, A, et al. (2021). Trends in characteristics of the recipients of new prescription stimulants between years 2010 and 2020 in the United States: an observational cohort study. *EClinicalMedicine*, 50, 101524.

Ciccarone, D. (2021). The rise of illicit fentanyls, stimulants and the fourth wave of the opioid overdose crisis. *Current opinion in psychiatry*, 34(4), 344-350.

Coghill, D. (2021) The benefits and limitations of stimulants in treating ADHD. *Curr top behav neurosci*, 51-77.

Danielson, M. L., Bohm, M. K., Newsome, K, et al. (2023). Trends in Stimulant Prescription Fills Among Commercially Insured Children and Adults – United States, 2016-2021. MMWR. *Morbidity and mortality weekly report*, 72(13), 327–332.

Delcher, C, Pauly, N, Moyo, P. (2020). Advances in prescription drug monitoring program research: a literature synthesis (June 2018 to December 2019). *Current opinion in psychiatry*, 33(4), 326.

Hirschtritt, ME, Slama, N, Sterling, SA, et al. (2021). Psychotropic medication prescribing during the COVID-19 pandemic. *Medicine*, 100(43).

O'Donnell, J, Gladden, RM, Mattson, CL, et al. (2020). Vital signs: characteristics of drug overdose deaths involving opioids and stimulants—24 states and the District of Columbia, January–June 2019. *MMWR. Morbidity and mortality weekly report*, 69(35), 1189.

Piper, BJ, Ogden, CL, Simoyan, OM, et al. (2018). Trends in use of prescription stimulants in the United States and Territories, 2006 to 2016. *PloS one,* 13(11), e0206100.

Substance Abuse and Mental Health Services Administration (SAMHSA). (2021b) Treatment for Stimulant Use Disorders. Treatment Improvement Protocol (TIP) Series 33. SAMHSA Publication No. *PEP21-02-01-004*. Rockville, MD.

Wen, H, Hockenberry, JM, Jeng, PJ, et al. (2019). Prescription drug monitoring program mandates: impact on opioid prescribing and related hospital use. *Health Affairs*, 38(9), 1550-1556.

# **Appendix 1: Stimulant ADHD Products**

USC	Molecule name	Product name
64500: Analeptics	Amphetamine	Adzenys ER
64500: Analeptics	Amphetamine	Adzenys XR-ODT
64500: Analeptics	Amphetamine	Amphetamine ER
64500: Analeptics	Amphetamine	Dyanavel XR
64500: Analeptics	Amphetamine Sulfate	Amphetamine Sulfate
64500: Analeptics	Amphetamine Sulfate	Evekeo
64500: Analeptics	Amphetamine Sulfate	Evekeo ODT
64500: Analeptics	Amphetamine-Dextroamphetamine	Adderall
64500: Analeptics	Amphetamine-Dextroamphetamine	Adderall XR
64500: Analeptics	Amphetamine-Dextroamphetamine	Amphetamine Salt Combo
64500: Analeptics	Amphetamine-Dextroamphetamine	Amphetamine/Dextroampheta
64500: Analeptics	Amphetamine-Dextroamphetamine	Mydayis
64500: Analeptics	Dexmethylphenidate HCL	Dexmethylphenidate HCL
64500: Analeptics	Dexmethylphenidate HCL	Dexmethylphenidate HCL ER
64500: Analeptics	Dexmethylphenidate HCL	Dexmethylphenidate Hydroc
64500: Analeptics	Dexmethylphenidate HCL	Focalin
64500: Analeptics	Dexmethylphenidate HCL	Focalin XR
64500: Analeptics	Dextroamphetamine Sulfate	Dexedrine
64500: Analeptics	Dextroamphetamine Sulfate	Dextroamphetamine Sulfate
64500: Analeptics	Dextroamphetamine Sulfate	Dextrostat
64500: Analeptics	Dextroamphetamine Sulfate	Liquadd
64500: Analeptics	Dextroamphetamine Sulfate	Procentra
64500: Analeptics	Dextroamphetamine Sulfate	Zenzedi
64500: Analeptics	Lisdexamfetamine Dimesylate	Vyvanse
64500: Analeptics	Methamphetamine HCL	Desoxyn
64500: Analeptics	Methamphetamine HCL	Methamphetamine HCL
64500: Analeptics	Methylphenidate	Cotempla XR-ODT
64500: Analeptics	Methylphenidate	Daytrana
64500: Analeptics	Methylphenidate	Methylphenidate
64500: Analeptics	Methylphenidate HCL	Adhansia XR
64500: Analeptics	Methylphenidate HCL	Aptensio XR
64500: Analeptics	Methylphenidate HCL	Concerta
64500: Analeptics	Methylphenidate HCL	Jornay PM
64500: Analeptics	Methylphenidate HCL	Metadate CD
64500: Analeptics	Methylphenidate HCL	Metadate ER



USC	Molecule name	Product name
64500: Analeptics	Methylphenidate HCL	Methylin
64500: Analeptics	Methylphenidate HCL	Methylin Er
64500: Analeptics	Methylphenidate HCL	Methylphenidate HCL
64500: Analeptics	Methylphenidate HCL	Methylphenidate HCL CR
64500: Analeptics	Methylphenidate HCL	Methylphenidate HCL ER
64500: Analeptics	Methylphenidate HCL	Methylphenidate HCL SR
64500: Analeptics	Methylphenidate HCL	Methylphenidate Hydrochlo
64500: Analeptics	Methylphenidate HCL	Quillichew ER
64500: Analeptics	Methylphenidate HCL	Quillivant XR
64500: Analeptics	Methylphenidate HCL	Relexxii
64500: Analeptics	Methylphenidate HCL	Ritalin
64500: Analeptics	Methylphenidate HCL	Ritalin LA
64500: Analeptics	Methylphenidate HCL	Ritalin SR
64500: Analeptics	Serdexmethylphenidate Chloride- Dexmethylphenidate HCL	Azstarys

# **Appendix 2: Prescriber Specialty Categories**

Addiction medicine	Hepatology	Otology
Allergy	Hospice & Palliative Med	Pain Medicine
Allergy/Immun, Diag Lab	Infectious Disease	Pathology
Anesthesiology	Intern Med-Diag Lab. Imm.	Pediatric Critical Care
Cardiology	Internal Med/Pediatrics	Pediatric Neurosurgery
Cardiothoracic Surgery	Internal Medicine	Pediatrics
Cardiovascular Surgery	Medical Microbiology	Pediatrics, Diag Lab Immu
Clinical Neurophysiol.	Naturopathic Doctor	Pharmacist
Clinical Pharmacology	Nephrology	Physical Medicine & Rehab
Colon & Rectal Surgery	Neurological Surgery	Physician Assistant
Critical Care Medicine	Neurology	Plastic Surgery
Dentistry	Neurosurg-Critical Care	Podiatry
Dermatological Immunology	Nuclear Medicine	Psychiatry
Dermatology	Nurse Practitioner	Psychology
Dermato-Pathology	Nutrition	Pulmonary Critical Care
Diagnostic Lab Immun.	Ob/Gyn-Critical Care	Pulmonary Diseases
Emergency Medicine	Obstetrics/Gynecology	Radiology
Endocrinology	Occupational Medicine	Rheumatology
Family Practice	Oncology	Sleep Medicine
Gastroenterology	Ophthalmology	Specialty Unspecified
Gen Preventive Medicine	Optometry	Sports Medicine
General Practice	Ortho Surg of Spine	Surgery, Critical Care
General Surgery	Orthopedic Surgery	Thoracic Surgery
Genetics	Osteopathic Medicine	Urology
Geriatric Psychiatry	Other	Veterinary Medicine
Geriatrics	Other Surgery	Unknown
Hematology	Otolaryngology	



# Appendix 3: ADHD Products with Non-Controlled Substances

USC	Molecule name	Product name
64700: Newer Generation Psychother Agents	Atomoxetine HCL	Atomoxetine
64700: Newer Generation Psychother Agents	Atomoxetine HCL	Atomoxetine Hydrochloride
64700: Newer Generation Psychother Agents	Atomoxetine HCL	Strattera
64700: Newer Generation Psychother Agents	Clonidine HCL (ADHD)	Clonidine HCL ER
64700: Newer Generation Psychother Agents	Clonidine HCL (ADHD)	Clonidine Hydrochloride
64700: Newer Generation Psychother Agents	Clonidine HCL (ADHD)	Clonidine Hydrochloride E
64700: Newer Generation Psychother Agents	Clonidine HCL (ADHD)	Карvау
64700: Newer Generation Psychother Agents	Clonidine HCL (ADHD)	Kapvay Dose Pack
64700: Newer Generation Psychother Agents	Guanfacine HCL (ADHD)	Guanfacine ER
64700: Newer Generation Psychother Agents	Guanfacine HCL (ADHD)	Guanfacine Hydrochloride
64700: Newer Generation Psychother Agents	Guanfacine HCL (ADHD)	Intuniv
64700: Newer Generation Psychother Agents	Viloxazine HCL (ADHD)	Qelbree



# Appendix 4: Telemedicine and Telehealth HCPCS Codes

HCPCS	Description
G0406	Follow-up inpatient consultation, limited, physicians typically spend 15 minutes communicating with the patient via telehealth
G0407	Follow-up inpatient consultation, intermediate, physicians typically spend 25 minutes communicating with the patient via telehealth
G0408	Follow-up inpatient consultation, complex, physicians typically spend 35 minutes communicating with the patient via telehealth
G0425	Telehealth consultation, emergency department or initial inpatient, typically 30 minutes communicating with the patient via telehealth
G0426	Telehealth consultation, emergency department or initial inpatient, typically 50 minutes communicating with the patient via telehealth
G0427	Telehealth consultation, emergency department or initial inpatient, typically 70 minutes or more communicating with the patient via telehealth
G0459	Inpatient telehealth pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy
G0508	Telehealth consultation, critical care, initial, physicians typically spend 60 minutes communicating with the patient and providers via telehealth
G0509	Telehealth consultation, critical care, subsequent, physicians typically spend 50 minutes communicating with the patient and providers via telehealth
G2012	Brief communication technology-based service, e.g., virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment: 5-10 minutes of medical discussion
G9481	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved CMS innovation center demonstration project, which requires these 3 key components: a problem focused history; a problem focused examination; and straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9482	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved CMS innovation center demonstration project, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9483	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved CMS innovation center demonstration project, which requires these 3 key components: a detailed history; a detailed examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified



HCPCS	Description
	health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9484	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved CMS innovation center demonstration project, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9485	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved CMS innovation center demonstration project, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9486	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved CMS innovation center demonstration project, which requires at least 2 of the following 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9487	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved CMS innovation center demonstration project, which requires at least 2 of the following 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9488	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved CMS innovation center demonstration project, which requires at least 2 of the following 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology



HCPCS	Description
G9489	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved COMS innovation center demonstration project, which requires at least 2 of the following 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9868	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation ACO model, less than 10 minutes
G9869	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation ACO model, 10-20 minutes
G9870	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation ACO model, 20 or more minutes
G9978	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires these 3 key components: a problem focused history; a problem focused examination; and straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9979	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9980	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires these 3 key components: a detailed history; a detailed examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9981	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of



HCPCS	Description
	moderate complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9982	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9983	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires at least 2 of the following 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9984	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires at least 2 of the following 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
G9985	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires at least 2 of the following 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology



HCPCS	Description
G9986	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (BPCI advanced) model episode of care, which requires at least 2 of the following 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. Counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology
Q3014	Telehealth originating site facility fee
T1014	Telehealth transmission, per minute, professional services bill separately



# **Appendix 5: ADHD Diagnosis Codes**

ICD-10	Description
F90	Attention-deficit hyperactivity disorders
F90.0	Attention-deficit hyperactivity disorder, predominantly inattentive type
F90.9	Attention-deficit hyperactivity disorder, unspecified type
F90.2	Attention-deficit hyperactivity disorder, combined type
F90.8	Attention-deficit hyperactivity disorder, other type
F90.1	Attention-deficit hyperactivity disorder, predominantly hyperactive type

## Appendix 6: Schedule Controlled Substances Considered for Co-Prescription

USC	Molecule name	Product name
02120: Acetaminophen	Butalbital-acetaminophen	Butalbital/acetaminophen
02120: Acetaminophen	Butalbital-acetaminophen- caffeine	Butalbital/acetaminophen/ caffeine
02132: Synth non-narc, non-injectable	Meprobamate-aspirin	Equagesic
02140: Salicylates and related	Butalbital-aspirin-caffeine	Aspirin-caffeine-butalbit
02140: Salicylates and related	Butalbital-aspirin-caffeine	Butal/asa/caff
02140: Salicylates and related	Butalbital-aspirin-caffeine	Butalbital compound
02140: Salicylates and related	Butalbital-aspirin-caffeine	Butalbital/ASA/caffeine
02140: Salicylates and related	Butalbital-aspirin-caffeine	Butalbital/aspirin/caffei
02140: Salicylates and related	Butalbital-aspirin-caffeine	Farbital
02140: Salicylates and related	Butalbital-aspirin-caffeine	Fiorinal
02211: Synth narcotic, injectable	Butorphanol tartrate	Butorphanol tartrate
02211: Synth narcotic, injectable	Butorphanol tartrate	Stadol
02211: Synth narcotic, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl-bupivacaine-NS
02211: Synth narcotic, injectable	Levorphanol tartrate	Levo dromoran
02211: Synth narcotic, injectable	Meperidine HCL	Demerol
02211: Synth narcotic, injectable	Meperidine HCL	Meperidine HCL
02211: Synth narcotic, injectable	Meperidine HCL-sodium chloride	Meperidine HCL/NS
02211: Synth narcotic, injectable	Meperidine HCL-sodium chloride	Meperidine HCL-NS
02211: Synth narcotic, injectable	Meperidine HCL-sodium chloride	Meperidine hydrochloride/
02211: Synth narcotic, injectable	Meperidine HCL-sodium chloride	Meperidine/NS
02211: Synth narcotic, injectable	Methadone HCL	Methadone HCL
02211: Synth narcotic, injectable	Methadone HCL	Methadone HCL-0.9% NACL
02211: Synth narcotic, injectable	Methadone HCL-sodium chloride	Methadone hydrochloride/s



USC	Molecule name	Product name
02211: Synth narcotic, injectable	Oliceridine fumarate	Olinvyk
02211: Synth narcotic, injectable	Pentazocine lactate	Talwin
02212: Propoxyphene	Propoxyphene HCL	Darvon
02212: Propoxyphene	Propoxyphene HCL	Propoxyphene HCL
02212: Propoxyphene	Propoxyphene HCL w/acetaminophen	Propoxacet
02212: Propoxyphene	Propoxyphene HCL w/acetaminophen	Propoxyphene/acetaminophe
02212: Propoxyphene	Propoxyphene napsylate	Darvon-n
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Balacet 325
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Darvocet a500
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Darvocet-n 100
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Darvocet-n 50
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Propoxacet-n
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Propoxyphene n/acetaminop
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Propoxyphene nap- acetaminophen
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Propoxyphene napsylate/ac
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Propoxyphene-n/acetaminop
02212: Propoxyphene	Propoxyphene-n w/acetaminophen	Trycet
02212: Propoxyphene	Propoxyphene-n w/apap & dietary management product	Therapoxyphene-325
02212: Propoxyphene	Propoxyphene-n w/apap & dietary management product	Therapoxyphene-650
02214: Synth narcotic, non- injectable	Butorphanol tartrate	Butorphanol tartrate
02214: Synth narcotic, non- injectable	Celecoxib-tramadol HCL	Seglentis
02214: Synth narcotic, non- injectable	Levorphanol tartrate	Levo-dromoran
02214: Synth narcotic, non- injectable	Levorphanol tartrate	Levorphanol tartrate
02214: Synth narcotic, non- injectable	Meperidine HCL	Demerol

## ≣IQVIA

USC	Molecule name	Product name
02214: Synth narcotic, non- injectable	Meperidine HCL	Meperidine HCL
02214: Synth narcotic, non- injectable	Meperidine HCL	Meperitab
02214: Synth narcotic, non- injectable	Meperidine w/promethazine	Meperidine HCL/promethazi
02214: Synth narcotic, non- injectable	Meperidine w/promethazine	Meperidine/promethazine
02214: Synth narcotic, non- injectable	Meperidine w/promethazine	Meprozine
02214: Synth narcotic, non- injectable	Methadone HCL	Dolophine
02214: Synth narcotic, non- injectable	Methadone HCL	Methadone HCL
02214: Synth narcotic, non- injectable	Methadone HCL	Methadone HCL diskets
02214: Synth narcotic, non- injectable	Methadone HCL	Methadone hydrochloride
02214: Synth narcotic, non- injectable	Methadone HCL	Methadose
02214: Synth narcotic, non- injectable	Pentazocine w/naloxone HCL	Pentazocine/naloxone HCL
02214: Synth narcotic, non- injectable	Pentazocine w/naloxone HCL	Talwin NX
02214: Synth narcotic, non- injectable	Pentazocine-acetaminophen	Pentazocine/acetaminophen
02214: Synth narcotic, non- injectable	Pentazocine-acetaminophen	Talacen
02214: Synth narcotic, non- injectable	Tapentadol HCL	Nucynta
02214: Synth narcotic, non- injectable	Tapentadol HCL	Nucynta ER
02214: Synth narcotic, non- injectable	Tramadol HCL	Conzip
02214: Synth narcotic, non- injectable	Tramadol HCL	Qdolo
02214: Synth narcotic, non- injectable	Tramadol HCL	Rybix ODT
02214: Synth narcotic, non- injectable	Tramadol HCL	Ryzolt
02214: Synth narcotic, non- injectable	Tramadol HCL	Synapryn fusepaq
02214: Synth narcotic, non- injectable	Tramadol HCL	Tramadol HCL



USC	Molecule name	Product name
02214: Synth narcotic, non- injectable	Tramadol HCL	Tramadol HCL ER
02214: Synth narcotic, non- injectable	Tramadol HCL	Tramadol hydrochloride
02214: Synth narcotic, non- injectable	Tramadol HCL	Tramadol hydrochloride er
02214: Synth narcotic, non- injectable	Tramadol HCL	Ultram
02214: Synth narcotic, non- injectable	Tramadol HCL	Ultram ER
02214: Synth narcotic, non- injectable	Tramadol HCL (topical)	Active-tramadol kit
02214: Synth narcotic, non- injectable	Tramadol HCL (topical)	Enovarx-tramadol
02214: Synth narcotic, non- injectable	Tramadol HCL-dietary management product	Theratramadol-60
02214: Synth narcotic, non- injectable	Tramadol HCL-dietary management product	Theratramadol-90
02214: Synth narcotic, non- injectable	Tramadol-acetaminophen	Tramadol HCL-acetaminophen
02214: Synth narcotic, non- injectable	Tramadol-acetaminophen	Tramadol hydrochloride/ac
02214: Synth narcotic, non- injectable	Tramadol-acetaminophen	Ultracet
02214: Synth narcotic, non- injectable	Tramadol-gabapentin-menthol- camphor	Active-prep kit IV
02221: Morphine/opium, injectable	Buprenorphine HCL	Buprenex
02221: Morphine/opium, injectable	Buprenorphine HCL	Buprenorphine HCL
02221: Morphine/opium, injectable	Buprenorphine HCL	Buprenorphine hydrochlori
02221: Morphine/opium, injectable	Fentanyl citrate	Fentanyl
02221: Morphine/opium, injectable	Fentanyl citrate	Fentanyl citrate
02221: Morphine/opium, injectable	Fentanyl citrate	Fentanyl citrate-0.9% Nacl
02221: Morphine/opium, injectable	Fentanyl citrate	Fentanyl citrate-D5W
02221: Morphine/opium, injectable	Fentanyl citrate	Fentanyl citrate-NS
02221: Morphine/opium, injectable	Fentanyl citrate	Sublimaze



USC	Molecule name	Product name
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl citrate/bupivaca
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl citrate/bupivica
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl/bupivacaine hydr
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl/bupivacaine/nacl
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl/bupivacaine/ns
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl-bupivacaine-0.9% nacl
02221: Morphine/opium, injectable	Fentanyl citrate-bupivacaine HCL-sodium chloride	Fentanyl-bupivacaine-ns
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl citrate/ropivac
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl citrate/ropivaca
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl citrate-ns
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl/ropivacaine hydo
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl/ropivacaine hydr
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl-ropivacaine-0.9% nacl
02221: Morphine/opium, injectable	Fentanyl citrate-ropivacaine HCL-sodium chloride	Fentanyl-ropivacaine-ns
02221: Morphine/opium, injectable	Fentanyl citrate-sodium chloride	Fentanyl citrate/nacl
02221: Morphine/opium, injectable	Fentanyl citrate-sodium chloride	Fentanyl citrate/sodium c
02221: Morphine/opium, injectable	Fentanyl citrate-sodium chloride	Fentanyl citrate-0.9% NACL
02221: Morphine/opium, injectable	Fentanyl citrate-sodium chloride	Fentanyl citrate-ns
02221: Morphine/opium, injectable	Fentanyl citrate-sodium chloride	Fentanyl/ns
02221: Morphine/opium, injectable	Hydromorphone HCL	Dilaudid
02221: Morphine/opium, injectable	Hydromorphone HCL	Dilaudid-hp
02221: Morphine/opium, injectable	Hydromorphone HCL	Hydromorphone HCL



USC	Molecule name	Product name
02221: Morphine/opium, injectable	Hydromorphone HCL	Hydromorphone hydrochlori
02221: Morphine/opium, injectable	Hydromorphone HCL- bupivacaine HCL-sodium chloride	Hydromorph-bupivac-0.9% NACL
02221: Morphine/opium, injectable	Hydromorphone HCL- bupivacaine HCL-sodium chloride	Hydromorphone hydrochlori
02221: Morphine/opium, injectable	Hydromorphone HCL- bupivacaine HCL-sodium chloride	Hydromorphone/bupivacaine
02221: Morphine/opium, injectable	Hydromorphone HCL- bupivacaine HCL-sodium chloride	Hydromorphone-bupivacaine
02221: Morphine/opium, injectable	Hydromorphone HCL- bupivacaine HCL-sodium chloride	Hydromorphone-bupivacaine- ns
02221: Morphine/opium, injectable	Hydromorphone HCL- ropivacaine HCL-sodium chloride	Hydromorphone hydrochlori
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone HCL/sodium
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone HCL-0.9% NACL
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone HCL-NS
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone hydrochlor
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone hydrochlori
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone/ns
02221: Morphine/opium, injectable	Hydromorphone HCL-sodium chloride	Hydromorphone/sodium chlo
02221: Morphine/opium, injectable	Meperidine HCL-sodium chloride	Meperidine HCL-NS
02221: Morphine/opium, injectable	Morphine sulfate	Astramorph
02221: Morphine/opium, injectable	Morphine sulfate	Duramorph
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate add-vant
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate dilute-a



USC	Molecule name	Product name
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate stick-ga
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate/sodium c
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate-0.9% nacl
02221: Morphine/opium, injectable	Morphine sulfate	Morphine sulfate-d5w
02221: Morphine/opium, injectable	Morphine sulfate for continuous microinfusion	Infumorph 200
02221: Morphine/opium, injectable	Morphine sulfate for continuous microinfusion	Infumorph 500
02221: Morphine/opium, injectable	Morphine sulfate for continuous microinfusion	Mitigo
02221: Morphine/opium, injectable	Morphine sulfate in dextrose	Morphine sulfate in dextr
02221: Morphine/opium, injectable	Morphine sulfate in dextrose	Morphine sulfate/d5w
02221: Morphine/opium, injectable	Morphine sulfate in dextrose	Morphine sulfate/dextrose
02221: Morphine/opium, injectable	Morphine sulfate in dextrose	Morphine sulfate-d5w
02221: Morphine/opium, injectable	Morphine sulfate in dextrose	Morphine/d5w
02221: Morphine/opium, injectable	Morphine sulfate liposome	Depodur
02221: Morphine/opium, injectable	Morphine sulfate-sodium chloride	Morphine sulfate/ns
02221: Morphine/opium, injectable	Morphine sulfate-sodium chloride	Morphine sulfate/sodium c
02221: Morphine/opium, injectable	Morphine sulfate-sodium chloride	Morphine sulfate-0.9% NACL
02221: Morphine/opium, injectable	Oxymorphone HCL	Opana
02222: Morphine/opium, non- injectable	Buprenorphine	Buprenorphine
02222: Morphine/opium, non- injectable	Buprenorphine	Butrans
02222: Morphine/opium, non- injectable	Buprenorphine HCL	Belbuca
02222: Morphine/opium, non- injectable	Buprenorphine HCL	Buprenorphine buccal
02222: Morphine/opium, non- injectable	Fentanyl	Duragesic



USC	Molecule name	Product name
02222: Morphine/opium, non- injectable	Fentanyl	Fentanyl
02222: Morphine/opium, non- injectable	Fentanyl	Subsys
02222: Morphine/opium, non- injectable	Fentanyl citrate	Abstral
02222: Morphine/opium, non- injectable	Fentanyl citrate	Actiq
02222: Morphine/opium, non- injectable	Fentanyl citrate	Fentanyl citrate
02222: Morphine/opium, non- injectable	Fentanyl citrate	Fentanyl citrate oral tra
02222: Morphine/opium, non- injectable	Fentanyl citrate	Fentora
02222: Morphine/opium, non- injectable	Fentanyl citrate	Lazanda
02222: Morphine/opium, non- injectable	Fentanyl citrate	Onsolis
02222: Morphine/opium, non- injectable	Fentanyl HCL	lonsys
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Dilaudid
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Dilaudid-5
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Exalgo
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Hydromorphone HCL
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Hydromorphone HCL ER
02222: Morphine/opium, non- injectable	Hydromorphone HCL	Hydromorphone hydrochlori
02222: Morphine/opium, non- injectable	Morphine sulfate	Arymo ER
02222: Morphine/opium, non- injectable	Morphine sulfate	Kadian
02222: Morphine/opium, non- injectable	Morphine sulfate	Morphabond ER
02222: Morphine/opium, non- injectable	Morphine sulfate	Morphine sulfate
02222: Morphine/opium, non- injectable	Morphine sulfate	Morphine sulfate cr
02222: Morphine/opium, non- injectable	Morphine sulfate	Morphine sulfate er



USC	Molecule name	Product name
02222: Morphine/opium, non- injectable	Morphine sulfate	Ms contin
02222: Morphine/opium, non- injectable	Morphine sulfate	Oramorph sr
02222: Morphine/opium, non- injectable	Morphine sulfate	Roxanol
02222: Morphine/opium, non- injectable	Morphine sulfate beads	Avinza
02222: Morphine/opium, non- injectable	Morphine sulfate beads	Morphine sulfate er
02222: Morphine/opium, non- injectable	Morphine-naltrexone	Embeda
02222: Morphine/opium, non- injectable	Opium tincture	Opium
02222: Morphine/opium, non- injectable	Opium tincture	Opium tincture
02222: Morphine/opium, non- injectable	Oxymorphone HCL	Opana
02222: Morphine/opium, non- injectable	Oxymorphone HCL	Opana er
02222: Morphine/opium, non- injectable	Oxymorphone HCL	Opana er (crush resistant
02222: Morphine/opium, non- injectable	Oxymorphone HCL	Oxymorphone hydrochloride
02222: Morphine/opium, non- injectable	Sufentanil citrate	Dsuvia
02231: Codeine & comb, injectable	Codeine phosphate	Codeine phosphate
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen/codeine
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen/codeine #2
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen/codeine #3
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen/codeine #4
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen/codeine pho
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Acetaminophen-codeine
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Capital/codeine
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Cocet

## ≣IQVIA

USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Cocet plus
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Codeine phosphate/acetami
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Codeine/acetaminophen
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Tylenol/codeine #3
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Tylenol/codeine #4
02232: Codeine & comb, non- injectable	Acetaminophen w/codeine	Vopac
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Acetaminophen/caffeine/di
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Dvorah
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Panlor
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Panlor dc
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Panlor ss
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Trezix
02232: Codeine & comb, non- injectable	Acetaminophen-caff- dihydrocod	Zerlor
02232: Codeine & comb, non- injectable	Acetaminophen-codeine & dietary management product	Theracodeine-300
02232: Codeine & comb, non- injectable	Aspirin w/codeine	Aspirin/codeine
02232: Codeine & comb, non- injectable	Aspirin w/codeine	Aspirin/codeine #3
02232: Codeine & comb, non- injectable	Aspirin-apap-salicyl-caff w/cod	Rid-a-pain
02232: Codeine & comb, non- injectable	Aspirin-caffeine- dihydrocodeine bitartrate	Aspirin-caffeine-dihydroc
02232: Codeine & comb, non- injectable	Aspirin-caffeine- dihydrocodeine bitartrate	Synalgos dc
02232: Codeine & comb, non- injectable	Aspirin-caffeine- dihydrocodeine bitartrate	Synalgos-dc
02232: Codeine & comb, non- injectable	Benzhydrocodone HCL- acetaminophen	Apadaz
02232: Codeine & comb, non- injectable	Benzhydrocodone HCL- acetaminophen	Benzhydrocodone/acetamino



USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Butalbital-acetaminophen- caffeine w/codeine	Butalbital/acetaminophen/
02232: Codeine & comb, non- injectable	Butalbital-acetaminophen- caffeine w/codeine	Fioricet/codeine
02232: Codeine & comb, non- injectable	Butalbital-acetaminophen- caffeine w/codeine	Phrenilin w/caffeine/code
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Asa/caff/butal/cod
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Ascomp/codeine
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Butalbital compound/codei
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Butalbital/aspirin/caffei
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Butalbital/aspirn/caffein
02232: Codeine & comb, non- injectable	Butalbital-aspirin-caffeine w/cod	Fiorinal/codeine #3
02232: Codeine & comb, non- injectable	Codeine sulfate	Codeine sulfate
02232: Codeine & comb, non- injectable	Hydrocodone bitartrate	Hydrocodone bitartrate er
02232: Codeine & comb, non- injectable	Hydrocodone bitartrate	Hysingla er
02232: Codeine & comb, non- injectable	Hydrocodone bitartrate	Zohydro er
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Anexsia
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Co-gesic
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Dolacet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Dolorex forte
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hycet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hydrocet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hydrocodone bitartrate/ac
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hydrocodone/acetaminophen
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hydrocodone-acetaminophen

## ≣IQVIA

USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Hydrogesic
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Liquicet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lorcet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lorcet 10/650
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lorcet hd
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lorcet plus
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lortab
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Lortab 5
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Margesic-h
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Maxidone
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Norco
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Polygesic
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Stagesic
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Vanacet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Verdrocet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Vicodin
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Vicodin es
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Vicodin hp
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Xodol
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Zamicet
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Zolvit
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen	Zydone



USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen- dietary management product	Theracodophen-325
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen- dietary management product	Theracodophen-650
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen- dietary management product	Theracodophen-750
02232: Codeine & comb, non- injectable	Hydrocodone-acetaminophen- dietary management product	Theracodophen-low-90
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Hydrocodone bit-ibuprofen
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Hydrocodone/ibuprofen
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Ibudone
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Reprexain
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Vicoprofen
02232: Codeine & comb, non- injectable	Hydrocodone-ibuprofen	Xylon
02232: Codeine & comb, non- injectable	Oxycodone	Xtampza er
02232: Codeine & comb, non- injectable	Oxycodone HCL	Dazidox
02232: Codeine & comb, non- injectable	Oxycodone HCL	Eth-oxydose
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxaydo
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxecta
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycodone HCL
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycodone HCL cr
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycodone HCL er
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycodone hydrochloride
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycodone hydrochloride er
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxycontin
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxyfast



USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Oxycodone HCL	Oxyir
02232: Codeine & comb, non- injectable	Oxycodone HCL	Roxicodone
02232: Codeine & comb, non- injectable	Oxycodone HCL	Roxicodone intensol
02232: Codeine & comb, non- injectable	Oxycodone HCL	Roxybond
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Alcet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Endocet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Lynox
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Magnacet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Nalocet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Narvox
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Oxycodone and acetaminophen
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Oxycodone hydrochloride/acetaminophen
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Oxycodone/acetaminophen
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Percocet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Perloxx
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Primalev
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Primlev
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Prolate
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Roxicet
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Tylox
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Xartemis xr
02232: Codeine & comb, non- injectable	Oxycodone w/acetaminophen	Xolox



USC	Molecule name	Product name
02232: Codeine & comb, non- injectable	Oxycodone-aspirin	Endodan
02232: Codeine & comb, non- injectable	Oxycodone-aspirin	Oxycodone/aspirin
02232: Codeine & comb, non- injectable	Oxycodone-aspirin	Percodan
02232: Codeine & comb, non- injectable	Oxycodone-ibuprofen	Combunox
02232: Codeine & comb, non- injectable	Oxycodone-ibuprofen	Oxycodone/ibuprofen
04120: Anesth local, injectable	Ketorolac trometh – bupivacaine HCL – ketamine HCL	Ketorolac tromethamine/bu
04130: Anesth local & topical, other	Cocaine HCL	Cocaine HCL
04130: Anesth local & topical, other	Cocaine HCL	C-topical
04130: Anesth local & topical, other	Cocaine HCL (nasal anesthetic)	Cocaine hydrochloride
04130: Anesth local & topical, other	Cocaine HCL (nasal anesthetic)	Goprelto
04130: Anesth local & topical, other	Cocaine HCL (nasal anesthetic)	Numbrino
04200: Anesthetics general	Ketamine HCL	Ketamine hydrochloride
04200: Anesthetics general	Midazolam-ketamine HCL- ondansetron HCL	Midazolam/ketamine hydroc
04200: Anesthetics general	Midazolam-ketamine HCL- ondansetron HCL	Mko melt dose pack
04210: Anesth general, injectable	Alfentanil	Alfenta
04210: Anesth general, injectable	Alfentanil	Alfentanil
04210: Anesth general, injectable	Alfentanil HCL	Alfentanil
04210: Anesth general, injectable	Alfentanil HCL	Alfentanil hydrochloride
04210: Anesth general, injectable	Fospropofol disodium	Lusedra
04210: Anesth general, injectable	Ketamine HCL	Ketalar
04210: Anesth general, injectable	Ketamine HCL	Ketalar steri-vial
04210: Anesth general, injectable	Ketamine HCL	Ketamine HCL



USC	Molecule name	Product name
04210: Anesth general, injectable	Ketamine HCL	Ketamine HCL-0.9% nacl
04210: Anesth general, injectable	Ketamine HCL	Ketamine hydrochloride
04210: Anesth general, injectable	Ketamine HCL-sodium chloride	Ketamine hydrochloride/so
04210: Anesth general, injectable	Methohexital sodium	Brevital sodium
04210: Anesth general, injectable	Methohexital sodium	Methohexital sodium
04210: Anesth general, injectable	Not classified	Remifentanil HCL-ns
04210: Anesth general, injectable	Remifentanil HCL	Remifentanil hydrochlorid
04210: Anesth general, injectable	Remifentanil HCL	Ultiva
04210: Anesth general, injectable	Remifentanil HCL-sodium chloride	Remifentanil hydrochlorid
04210: Anesth general, injectable	Sufentanil citrate	Sufenta
04210: Anesth general, injectable	Sufentanil citrate	Sufentanil citrate
04210: Anesth general, injectable	Thiopental sodium	Pentothal
13100: Antidiarrheals w/o anti- infective	Difenoxin w/atropine	Motofen
13100: Antidiarrheals w/o anti- infective	Diphenoxylate w/atropine	Diphenatol
13100: Antidiarrheals w/o anti- infective	Diphenoxylate w/atropine	Diphenoxylate hydrochlori
13100: Antidiarrheals w/o anti- infective	Diphenoxylate w/atropine	Diphenoxylate/atropine
13100: Antidiarrheals w/o anti- infective	Diphenoxylate w/atropine	Lomotil
13100: Antidiarrheals w/o anti- infective	Diphenoxylate w/atropine	Lonox
13100: Antidiarrheals w/o anti- infective	Paregoric	Paregoric
17400: Cannabinoid	Dronabinol	Dronabinol
17400: Cannabinoid	Dronabinol	Marinol
17400: Cannabinoid	Dronabinol	Syndros
17400: Cannabinoid	Nabilone	Cesamet
18100: Anti-obesity, systemic	Benzphetamine HCL	Didrex
18100: Anti-obesity, systemic	Diethylpropion HCL	Diethylpropion HCL



USC	Molecule name	Product name
18100: Anti-obesity, systemic	Diethylpropion HCL	Diethylpropion HCL cr
18100: Anti-obesity, systemic	Diethylpropion HCL	Tenuate dospan
18100: Anti-obesity, systemic	Fenfluramine HCL	Pondimin
18100: Anti-obesity, systemic	Lorcaserin HCL	Belviq
18100: Anti-obesity, systemic	Lorcaserin HCL	Belviq xr
18100: Anti-obesity, systemic	Phendimetrazine tartrate	Bontril sr
18100: Anti-obesity, systemic	Phendimetrazine tartrate	Phendimetrazine tartrate
18100: Anti-obesity, systemic	Phentermine HCL	Phentermine HCL
18100: Anti-obesity, systemic	Phentermine HCL	Phentride
18100: Anti-obesity, systemic	Phentermine resin complex	Ionamin
18100: Anti-obesity, systemic	Phentermine resin complex	Ionamin-15
18100: Anti-obesity, systemic	Phentermine resin complex	Ionamin-30
18100: Anti-obesity, systemic	Sibutramine HCL monohydrate	Meridia
18110: Stimulants	Benzphetamine HCL	Benzphetamine HCL
18110: Stimulants	Benzphetamine HCL	Didrex
18110: Stimulants	Benzphetamine HCL	Regimex
18110: Stimulants	Diethylpropion HCL	Diethylpropion HCL
18110: Stimulants	Diethylpropion HCL	Diethylpropion HCL er
18110: Stimulants	Diethylpropion HCL	Diethylpropion hydrochlor
18110: Stimulants	Diethylpropion HCL	Tenuate
18110: Stimulants	Diethylpropion HCL	Tenuate dospan
18110: Stimulants	Mazindol	Sanorex
18110: Stimulants	Phendimetrazine tartrate	Bontril pdm
18110: Stimulants	Phendimetrazine tartrate	Bontril slow release
18110: Stimulants	Phendimetrazine tartrate	Phendimetrazine tartrate
18110: Stimulants	Phentermine HCL	Adipex-p
18110: Stimulants	Phentermine HCL	Lomaira
18110: Stimulants	Phentermine HCL	Oby-trim
18110: Stimulants	Phentermine HCL	Phentermine HCL
18110: Stimulants	Phentermine HCL	Phentermine hydrochloride
18110: Stimulants	Phentermine HCL	Pro-fast hs
18110: Stimulants	Phentermine HCL	Pro-fast sa
18110: Stimulants	Phentermine HCL	Pro-fast sr
18110: Stimulants	Phentermine HCL	Suprenza
18110: Stimulants	Phentermine HCL-topiramate	Qsymia
18110: Stimulants	Sibutramine HCL monohydrate	Meridia
20200: Seizure disorders	Brivaracetam	Briviact



USC	Molecule name	Product name
20200: Seizure disorders	Cenobamate	Xcopri
20200: Seizure disorders	Clobazam	Clobazam
20200: Seizure disorders	Clobazam	Onfi
20200: Seizure disorders	Clobazam	Sympazan
20200: Seizure disorders	Clonazepam	Clonazepam
20200: Seizure disorders	Clonazepam	Clonazepam odt
20200: Seizure disorders	Clonazepam	Klonopin
20200: Seizure disorders	Clonazepam	Klonopin wafers
20200: Seizure disorders	Diazepam (anticonvulsant)	Diastat acudial
20200: Seizure disorders	Diazepam (anticonvulsant)	Diastat pediatric
20200: Seizure disorders	Diazepam (anticonvulsant)	Diazepam
20200: Seizure disorders	Diazepam (anticonvulsant)	Diazepam rectal gel
20200: Seizure disorders	Diazepam (anticonvulsant)	Valtoco
20200: Seizure disorders	Ezogabine	Potiga
20200: Seizure disorders	Fenfluramine HCL (anticonvulsant)	Fintepla
20200: Seizure disorders	Ganaxolone	Ztalmy
20200: Seizure disorders	Lacosamide	Lacosamide
20200: Seizure disorders	Lacosamide	Vimpat
20200: Seizure disorders	Midazolam (anticonvulsant)	Nayzilam
20200: Seizure disorders	Perampanel	Fycompa
20521: Gaba analogs	Pregabalin	Lyrica
20521: Gaba analogs	Pregabalin	Pregabalin
20521: Gaba analogs	Pregabalin (once-daily)	Lyrica cr
20521: Gaba analogs	Pregabalin (once-daily)	Pregabalin er
20720: Serotonin 5ht-1 rec agon	Lasmiditan succinate	Reyvow
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Amidrine
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Diacetazone
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Epidrin
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Isomethept-dichloralp- acetamin



USC	Molecule name	Product name
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Isometheptene/acetaminoph
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Isometheptene/dichloralph
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Midrin
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Migragesic ida
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Migratine
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Migrazone
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Migrin-a
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Nodolor
20780: Anti-migraine, comb	Isometheptene- dichloralphenazone- acetaminophen	Va-zone
23120: GI antispasmodic, belladonna	Belladonna alkaloids & opium	Belladonna/opium
23120: GI antispasmodic, belladonna	Belladonna alkaloids- phenobarbital	Belladonna alkaloids/phen
23120: GI antispasmodic, belladonna	Belladonna alkaloids- phenobarbital	Me-pb-hyos
23120: GI antispasmodic, belladonna	Belladonna alkaloids- phenobarbital	Servira
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	B-donna
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Me-pb-hyos
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Pb-hyos
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Phenobarbital/belladonna
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Quadrapax
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Re-pb hyos



USC	Molecule name	Product name
23120: GI antispasmodic, belladonna	Phenobarbital-hyoscyamine- atropine-scopolamine	Se-donna pb hyos
23130: GI antispasmodic, w/tranquilizers	Chlordiazepoxide HCL- clidinium bromide	Chlordiazepoxide HCL/clid
23130: GI antispasmodic, w/tranquilizers	Chlordiazepoxide HCL- clidinium bromide	Chlordiazepoxide hydrochl
23130: GI antispasmodic, w/tranquilizers	Chlordiazepoxide HCL- clidinium bromide	Chlordiazepoxide/clidiniu
23690: Opioid receptor modulators, other	Eluxadoline	Viberzi
24414: Estrogen/androgen	Esterified estrogens & methyltestosterone	Covaryx
24414: Estrogen/androgen	Esterified estrogens & methyltestosterone	Covaryx hs
24414: Estrogen/androgen	Esterified estrogens & methyltestosterone	Eemt
24414: Estrogen/androgen	Esterified estrogens & methyltestosterone	Eemt hs
24414: Estrogen/androgen	Esterified estrogens & methyltestosterone	Esterified estrogens/meth
34210: Narc cgh/decn	Phenyleph-hydrocodone	Nalex dh
34210: Narc cgh/decn	Phenylephrine w/codeine	Alahist ac
34210: Narc cgh/decn	Phenylephrine w/codeine	Notuss-pe
34210: Narc cgh/decn	Phenylephrine-dihydrocodeine	Alahist dhc
34210: Narc cgh/decn	Pseudoephedrine w/codeine	Endacof-dc
34210: Narc cgh/decn	Pseudoephedrine w/codeine	Notuss-dc
34210: Narc cgh/decn	Pseudoephedrine w/codeine	Nucofed
34210: Narc cgh/decn	Pseudoephedrine w/codeine	Pseudoephedrine/codeine
34210: Narc cgh/decn	Pseudoephedrine w/hydrocodone	Detussin
34210: Narc cgh/decn	Pseudoephedrine w/hydrocodone	Rezira
34220: Narc cgh/anthst	Chlorpheniramine tannate- hydrocodone tannate	Novasus
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Chlorpheniramine/codeine
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Codar ar
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Cotab a
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Cotab ax
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Lexuss 210
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Notuss-ac
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	TI-hist cm
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Tuxarin er



USC	Molecule name	Product name
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Zodryl ac 50
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Zodryl ac 60
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Zodryl ac 80
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Zodryl ac adult
34220: Narc cgh/anthst	Chlorpheniramine w/codeine	Z-tuss ac
34220: Narc cgh/anthst	Codeine polistirex- chlorpheniramine polistirex	Tuzistra xr
34220: Narc cgh/anthst	Codeine-brompheniramine	Brovex cb
34220: Narc cgh/anthst	Codeine-brompheniramine	Brovex cbx
34220: Narc cgh/anthst	Codeine-brompheniramine	Endacof-ac
34220: Narc cgh/anthst	Codeine-brompheniramine	Nalex ac
34220: Narc cgh/anthst	Hydrocodone polistirex- chlorpheniramine polistirex	Hydrocodone polistirex/ch
34220: Narc cgh/anthst	Hydrocodone polistirex- chlorpheniramine polistirex	Tussicaps
34220: Narc cgh/anthst	Hydrocodone polistirex- chlorpheniramine polistirex	Tussionex pennkinetic ext
34220: Narc cgh/anthst	Hydrocodone- chlorpheniramine	Vituz
34220: Narc cgh/anthst	Promethazine w/codeine	Promethazine/codeine
34240: Narc cgh/decn/anthst	Codeine-phenylephrine- chlorcyclizine	Nasotuss
34240: Narc cgh/decn/anthst	Pe-pse-cpm-pyril w/hydrocodone	Statuss green
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Hc tussive
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Hydrocodone bitrate/pheny
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Hydrocodone/phenylephrine
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Neo hc
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Phenylephrine/hydrocodone
34240: Narc cgh/decn/anthst	Phenyleph-cpm w/hydrocod	Poly-tussin hd
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Codimal dh
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Codituss dh
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Hycomal dh
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Hydrophene dh
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Phendacof plus
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Poly hist hc
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Poly-tussin
34240: Narc cgh/decn/anthst	Phenyleph-pyril w/hydrocod	Pro-red



USC	Molecule name	Product name
34240: Narc cgh/decn/anthst	Phenylephrine tan- dexchlorpheniramine tan- hydrocodone tan	Tussinal 12
34240: Narc cgh/decn/anthst	Phenylephrine tan- diphenhydramine tan- hydrocodone tan	Dytan-hc
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine w/codeine	Brovex pb c
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine w/codeine	Brovex pb cx
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine w/codeine	Pluratuss
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine w/codeine	TI-hist cd
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine- dihydrocodeine	Centussin dhc
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine- dihydrocodeine	Dihydrocodeine/bpm/phenyl
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine- dihydrocodeine	Endacof-dh
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine- dihydrocodeine	Poly-tussin dhc
34240: Narc cgh/decn/anthst	Phenylephrine- brompheniramine-hydrocodone	Canges-hc
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Baltussin
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Coldcough pd
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Despec-pd
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Despec-pdc
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Dihydro-pe
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Duohist dh



USC	Molecule name	Product name
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Novahistine dh
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Pancof pd
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine- dihydrocodeine	Tusscough dhc
34240: Narc cgh/decn/anthst	Phenylephrine- chlorpheniramine-pyrilamine- hydrocodone	Phena-hc
34240: Narc cgh/decn/anthst	Phenylephrine- dexchlorpheniramine-codeine	Dexphen w/c
34240: Narc cgh/decn/anthst	Phenylephrine- dexchlorpheniramine- hydrocodone	Endacof-plus
34240: Narc cgh/decn/anthst	Phenylephrine- dexchlorpheniramine- hydrocodone	Zotex hc
34240: Narc cgh/decn/anthst	Phenylephrine- diphenhydramine-codeine	Airacof
34240: Narc cgh/decn/anthst	Phenylephrine- diphenhydramine-codeine	Endal cd
34240: Narc cgh/decn/anthst	Phenylephrine-pyrilamine w/cod	Codimal ph
34240: Narc cgh/decn/anthst	Phenylephrine-pyrilamine w/cod	Zotex-c
34240: Narc cgh/decn/anthst	Phenylephrine-pyrilamine- dihydrocodeine	Poly hist dhc
34240: Narc cgh/decn/anthst	Promethazine-phenylephrine- codeine	Promethazine vc/codeine
34240: Narc cgh/decn/anthst	Promethazine-phenylephrine- codeine	Promethazine/phenylephrin
34240: Narc cgh/decn/anthst	Pseudoeph-chlorphen w/cod	Dihistine dh
34240: Narc cgh/decn/anthst	Pseudoeph-chlorphen w/cod	Zodryl dac 50
34240: Narc cgh/decn/anthst	Pseudoeph-chlorphen w/cod	Zodryl dac 60
34240: Narc cgh/decn/anthst	Pseudoeph-chlorphen w/cod	Zodryl dac 80
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Cordron-hc
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Genecof-hc
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Hydrocodone bitartrate/ch
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Hyfed
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Jaycof-hc
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Notuss-forte



USC	Molecule name	Product name
34240: Narc cgh/decn/anthst	Pseudoephed-cpm w/hydrocod	Zutripro
34240: Narc cgh/decn/anthst	Pseudoephedrine- brompheniramine-codeine	Срь wc
34240: Narc cgh/decn/anthst	Pseudoephedrine- brompheniramine- dihydrocodeine	J-cof dhc
34240: Narc cgh/decn/anthst	Pseudoephedrine- brompheniramine-hydrocodone	Bromplex hd
34240: Narc cgh/decn/anthst	Pseudoephedrine- brompheniramine-hydrocodone	Endacof-hc
34240: Narc cgh/decn/anthst	Pseudoephedrine- brompheniramine-hydrocodone	J-tan d hc
34240: Narc cgh/decn/anthst	Pseudoephedrine- carbinoxamine w/hydrocodone	Pseudoephedrine/hydrocodo
34240: Narc cgh/decn/anthst	Pseudoephedrine- chlorpheniramine- dihydrocodeine	Coldcough
34240: Narc cgh/decn/anthst	Pseudoephedrine- chlorpheniramine- dihydrocodeine	Dihydro-cp
34240: Narc cgh/decn/anthst	Pseudoephedrine- chlorpheniramine- dihydrocodeine	Hydro-tussin dhc
34240: Narc cgh/decn/anthst	Pseudoephedrine- chlorpheniramine- dihydrocodeine	Uni-cof
34240: Narc cgh/decn/anthst	Pseudoeph-triprolidine w/cod	Poly hist nc
34240: Narc cgh/decn/anthst	Pseudoeph-triprolidine w/cod	Triacin-c
34260: Narc cgh/anthst/analg	Codeine-chlorpheniramine- acetaminophen	Cotabflu
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Hycodan
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Hydrocodone bitartrate/ho
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Hydrocodone bit-homatropine mb
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Hydrocodone/homatropine
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Hydromet
34290: Narc cgh comb w/o exp, oth	Hydrocodone bitartrate- homatropine methylbromide	Tussigon
34290: Narc cgh comb w/o exp, oth	Hydrocodone w/homatropine	Tussigon
34310: Narc cgh/decn/exp	Phenylephrine w/codeine-gg	Giltuss ped-c



USC	Molecule name	Product name
34310: Narc cgh/decn/exp	Phenylephrine w/codeine-gg	Maxiphen cd
34310: Narc cgh/decn/exp	Phenylephrine w/codeine-gg	Maxiphen cdx
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Giltuss hc
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Hydrocodone/phenylephrine
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Hydrofed
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Nariz-hc
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Phendacof hc
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Poly-tussin xp
34310: Narc cgh/decn/exp	Phenylephrine w/hydrocodone- gg	Zyrphen-hc
34310: Narc cgh/decn/exp	Phenylephrine-dihydrocodeine- guaifenesin	Donatuss dc
34310: Narc cgh/decn/exp	Phenylephrine-dihydrocodeine- guaifenesin	Poly-tussin ex
34310: Narc cgh/decn/exp	Phenylpropanolamine w/cod- gg	Endal expectorant
34310: Narc cgh/decn/exp	Phenylpropanolamine w/cod- gg	Enditussin
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Duratuss hd
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Genecof-xp
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Hycofenix
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Hydro-tussin hd
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Jaycof-xp
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Nalex expectorant
34310: Narc cgh/decn/exp	Pseudoeph w/hydrocodone-gg	Vanacon
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Ambifed cd
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Ambifed cdx
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Ambifed-g cd
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Ambifed-g cdx
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Cheratussin dac
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Codafed pediatric expecto



USC	Molecule name	Product name
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Guiatuss dac
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Maxifed cd
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Maxifed cdx
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Maxifed-g cd
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Maxifed-g cdx
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Novagest expectorant/code
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Phenhist expectorant
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Phenylhistine expectorant
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Sudatuss-2
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Sudatuss-2 df
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Sudatuss-sf
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Suttar-2
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Suttar-sf
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Tusnel ped-c
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Zodryl dec 50
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Zodryl dec 60
34310: Narc cgh/decn/exp	Pseudoephedrine w/codeine- gg	Zodryl dec 80
34310: Narc cgh/decn/exp	Pseudoephedrine- dihydrocodeine-guaifenesin	Despec-exp
34310: Narc cgh/decn/exp	Pseudoephedrine- dihydrocodeine-guaifenesin	Hydro-tussin exp
34310: Narc cgh/decn/exp	Pseudoephedrine- dihydrocodeine-guaifenesin	Uni-cof exp
34320: Narc cgh/anthst/exp	Brompheniramine w/hydrocodone-gg	Tusnel-hc
34340: Narc cgh/decn/anthst/exp	Pseudoephedrine- chlorpheniramine w/hydrocodone-gg	Z-tuss 2 expectorant



USC	Molecule name	Product name
34340: Narc cgh/decn/anthst/exp	Pseudoephedrine- chlorpheniramine w/hydrocodone-gg	Ztuss expectorant
34350: Narc cgh/decn/analg/exp	Phenylephrine-codeine- guaifenesin-acetaminophen	Phenflu cd
34350: Narc cgh/decn/analg/exp	Phenylephrine-codeine- guaifenesin-acetaminophen	Phenflu cdx
34350: Narc cgh/decn/analg/exp	Pseudoephedrine-codeine- guaifenesin-acetaminophen	Maxiflu cd
34350: Narc cgh/decn/analg/exp	Pseudoephedrine-codeine- guaifenesin-acetaminophen	Maxiflu cdx
34370: Narc cgh/decn/anthst/analg/exp	Phenylephrine-pheniramine- cod-sod salicylate-sod cit-caff	Tussirex
34380: Narc cgh/exp	Codeine-iodinated glycerol	lodinated glycerol/codein
34380: Narc cgh/exp	Dihydrocodeine-guaifenesin	J-max dhc
34380: Narc cgh/exp	Guaifenesin-codeine	Allfen cd
34380: Narc cgh/exp	Guaifenesin-codeine	Allfen cdx
34380: Narc cgh/exp	Guaifenesin-codeine	Brontex
34380: Narc cgh/exp	Guaifenesin-codeine	Cgu wc
34380: Narc cgh/exp	Guaifenesin-codeine	Cheratussin ac
34380: Narc cgh/exp	Guaifenesin-codeine	Codeine phosphate/guaifen
34380: Narc cgh/exp	Guaifenesin-codeine	Codeine/guaifenesin
34380: Narc cgh/exp	Guaifenesin-codeine	Dex-tuss
34380: Narc cgh/exp	Guaifenesin-codeine	Diabetic tussin c
34380: Narc cgh/exp	Guaifenesin-codeine	Execlear-c
34380: Narc cgh/exp	Guaifenesin-codeine	Gani-tuss nr
34380: Narc cgh/exp	Guaifenesin-codeine	Guaifenesin nr
34380: Narc cgh/exp	Guaifenesin-codeine	Guaifenesin/codeine
34380: Narc cgh/exp	Guaifenesin-codeine	Guaifenesin/codeine phosp
34380: Narc cgh/exp	Guaifenesin-codeine	Guaifenesin-codeine
34380: Narc cgh/exp	Guaifenesin-codeine	Guiatuss ac
34380: Narc cgh/exp	Guaifenesin-codeine	Myci-gc
34380: Narc cgh/exp	Guaifenesin-codeine	Mytussin ac
34380: Narc cgh/exp	Guaifenesin-codeine	Pro-clear
34380: Narc cgh/exp	Guaifenesin-codeine	Robafen ac
34380: Narc cgh/exp	Guaifenesin-codeine	Romilar ac
34380: Narc cgh/exp	Guaifenesin-codeine	Tussiden c
34380: Narc cgh/exp	Guaifenesin-codeine	Tussi-organidin nr
34380: Narc cgh/exp	Guaifenesin-codeine	Tussi-organidin-s nr
34380: Narc cgh/exp	Guaifenesin-codeine	Tusso-c



USC	Molecule name	Product name
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Codiclear dh
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Flowtuss
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Hycotuss expectorant
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Hydrocodone bitartrate/gu
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Hydrocodone/guaifenesin
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Hydrocodone/guaifenesin e
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Maxi-tuss hcg
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Obredon
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Phanatuss hc
34380: Narc cgh/exp	Hydrocodone-guaifenesin	Xpect-hc
34380: Narc cgh/exp	Hydrocodone-potassium guaiacolsulfonate	Potassium guaiaco/hydroco
34380: Narc cgh/exp	Hydrocodone-potassium guaiacolsulfonate	Pro-clear
35310: Antineo androgens	Testolactone	Teslac
37800: Dermatological prep, other	Ketoprofen-ketamine-lidocaine	Lidoprofen
37800: Dermatological prep, other	Ketoprofen-ketamine-lidocaine	Vopac kt
52151: Hormones, androgens, injectable	Testosterone	Testopel
52151: Hormones, androgens, injectable	Testosterone	Testosterone
52151: Hormones, androgens, injectable	Testosterone cypionate	Depo-testosterone
52151: Hormones, androgens, injectable	Testosterone cypionate	Testone cik
52151: Hormones, androgens, injectable	Testosterone cypionate	Testosterone
52151: Hormones, androgens, injectable	Testosterone cypionate	Testosterone cypionate
52151: Hormones, androgens, injectable	Testosterone cypionate & propionate	Testosterone cypionate/te
52151: Hormones, androgens, injectable	Testosterone cypionate & propionate	Testosterone eo-pro-cyp 2
52151: Hormones, androgens, injectable	Testosterone enanthate	Delatestryl
52151: Hormones, androgens, injectable	Testosterone enanthate	Testosterone enanthate
52151: Hormones, androgens, injectable	Testosterone enanthate	Xyosted
52151: Hormones, androgens, injectable	Testosterone propionate	Testosterone propionate



USC	Molecule name	Product name
52151: Hormones, androgens, injectable	Testosterone undecanoate	Aveed
52152: Hormones, androgens, oral	Fluoxymesterone	Androxy
52152: Hormones, androgens, oral	Methyltestosterone	Android
52152: Hormones, androgens, oral	Methyltestosterone	Methitest
52152: Hormones, androgens, oral	Methyltestosterone	Methyltestosterone
52152: Hormones, androgens, oral	Methyltestosterone	Testred
52152: Hormones, androgens, oral	Testosterone undecanoate	Jatenzo
52152: Hormones, androgens, oral	Testosterone undecanoate	Tlando
52153: Hormones, Androgens, transdermal	Testosterone	Androderm
52153: Hormones, androgens, transdermal	Testosterone	Androgel
52153: Hormones, androgens, transdermal	Testosterone	Androgel pump
52153: Hormones, androgens, transdermal	Testosterone	Axiron
52153: Hormones, androgens, transdermal	Testosterone	Ec-rx testosterone 0.2%
52153: Hormones, androgens, transdermal	Testosterone	Ec-rx testosterone 0.4%
52153: Hormones, androgens, transdermal	Testosterone	Ec-rx testosterone 10%
52153: Hormones, androgens, transdermal	Testosterone	Ec-rx testosterone 20%
52153: Hormones, androgens, transdermal	Testosterone	Fortesta
52153: Hormones, androgens, transdermal	Testosterone	Natesto
52153: Hormones, androgens, transdermal	Testosterone	Striant
52153: Hormones, androgens, transdermal	Testosterone	Testim
52153: Hormones, androgens, transdermal	Testosterone	Testosterone
52153: Hormones, androgens, transdermal	Testosterone	Testosterone compounding



USC	Molecule name	Product name
52153: Hormones, androgens, transdermal	Testosterone	Testosterone pump
52153: Hormones, androgens, transdermal	Testosterone	Testosterone topical solu
52153: Hormones, androgens, transdermal	Testosterone	Vogelxo
52153: Hormones, androgens, transdermal	Testosterone	Vogelxo pump
52158: Hormones, androgens, other	Testosterone propionate	First-testosterone
52158: Hormones, androgens, other	Testosterone propionate	First-testosterone mc com
52170: Sex hormones, other	Estradiol-estriol-testosterone- progesterone micronized	Bi-est 50:50 progesterone
52400: Anabolic hormones	Nandrolone decanoate	Nandrolone decanoate
52400: Anabolic hormones	Oxandrolone	Oxandrin
52400: Anabolic hormones	Oxandrolone	Oxandrolone
52400: Anabolic hormones	Oxymetholone	Anadrol-50
52400: Anabolic hormones	Stanozolol	Winstrol
59111: Mus relx, non-surg, w/o analgesic	Carisoprodol	Carisoprodol
59111: Mus relx, non-surg, w/o analgesic	Carisoprodol	Soma
59111: Mus relx, non-surg, w/o analgesic	Carisoprodol	Vanadom
59111: Mus relx, non-surg, w/o analgesic	Carisoprodol-dietary management product	Prazolamine
59112: Mus relx, non-surg, w/analgesic	Carisoprodol w/aspirin	Carisoprodol/aspirin
59112: Mus relx, non-surg, w/analgesic	Carisoprodol w/aspirin	Soma compound
59112: Mus relx, non-surg, w/analgesic	Carisoprodol w/aspirin & codeine	Carisoprodol/aspirin/code
59112: Mus relx, non-surg, w/analgesic	Carisoprodol w/aspirin & codeine	Soma compound/codeine
64380: Antidepressants in combination	Chlordiazepoxide-amitriptyline	Amitriptyline/chlordiazep
64380: Antidepressants in combination	Chlordiazepoxide-amitriptyline	Chlordiazepoxide/amitript
64380: Antidepressants in combination	Chlordiazepoxide-amitriptyline	Limbitrol
64380: Antidepressants in combination	Chlordiazepoxide-amitriptyline	Limbitrol ds
64390: Antidepressants, other	Brexanolone	Zulresso



USC	Molecule name	Product name
64390: Antidepressants, other	Esketamine HCL	Spravato 56mg dose
64390: Antidepressants, other	Esketamine HCL	Spravato 84mg dose
64500: Analeptics	Armodafinil	Armodafinil
64500: Analeptics	Armodafinil	Nuvigil
64500: Analeptics	Modafinil	Modafinil
64500: Analeptics	Modafinil	Provigil
64500: Analeptics	Modafinil & dietary management product	Sentramodafin am-100
64500: Analeptics	Solriamfetol HCL	Sunosi
64610: Benzodiazepines	Alprazolam	Alprazolam
64610: Benzodiazepines	Alprazolam	Alprazolam er
64610: Benzodiazepines	Alprazolam	Alprazolam intensol
64610: Benzodiazepines	Alprazolam	Alprazolam odt
64610: Benzodiazepines	Alprazolam	Alprazolam xr
64610: Benzodiazepines	Alprazolam	Niravam
64610: Benzodiazepines	Alprazolam	Xanax
64610: Benzodiazepines	Alprazolam	Xanax xr
64610: Benzodiazepines	Alprazolam-dietary management product	Gabazolamine
64610: Benzodiazepines	Alprazolam-dietary management product	Gabazolamine-0.5
64610: Benzodiazepines	Alprazolam-dietary management product	Sentrazolam am 0.25
64610: Benzodiazepines	Chlordiazepoxide HCL	Chlordiazepoxide HCL
64610: Benzodiazepines	Chlordiazepoxide HCL	Chlordiazepoxide hydrochl
64610: Benzodiazepines	Chlordiazepoxide HCL	Librium
64610: Benzodiazepines	Clorazepate dipotassium	Clorazepate dipotassium
64610: Benzodiazepines	Clorazepate dipotassium	Tranxene t
64610: Benzodiazepines	Clorazepate dipotassium	Tranxene-sd
64610: Benzodiazepines	Diazepam	Diazepam
64610: Benzodiazepines	Diazepam	Diazepam intensol
64610: Benzodiazepines	Diazepam	Valium
64610: Benzodiazepines	Diazepam-dietary management product	Gabavale-5
64610: Benzodiazepines	Lorazepam	Ativan
64610: Benzodiazepines	Lorazepam	Lorazepam
64610: Benzodiazepines	Lorazepam	Lorazepam intensol
64610: Benzodiazepines	Lorazepam	Lorazepam-d5w
64610: Benzodiazepines	Lorazepam	Loreev xr



USC	Molecule name	Product name
64610: Benzodiazepines	Lorazepam-dextrose	Lorazepam/dextrose
64610: Benzodiazepines	Lorazepam-sodium chloride	Lorazepam/sodium chloride
64610: Benzodiazepines	Midazolam	Midazolam
64610: Benzodiazepines	Midazolam	Midazolam/syrspend sf ph4
64610: Benzodiazepines	Midazolam HCL	Midazolam HCL
64610: Benzodiazepines	Midazolam HCL	Midazolam hydrochloride
64610: Benzodiazepines	Midazolam HCL	Versed
64610: Benzodiazepines	Midazolam HCL-dextrose	Midazolam hydrochloride/d
64610: Benzodiazepines	Midazolam HCL-sodium chloride	Midazolam HCL/nacl
64610: Benzodiazepines	Midazolam HCL-sodium chloride	Midazolam HCL-0.9% nacl
64610: Benzodiazepines	Midazolam HCL-sodium chloride	Midazolam HCL-ns
64610: Benzodiazepines	Midazolam HCL-sodium chloride	Midazolam hydrochloride/s
64610: Benzodiazepines	Midazolam HCL-sodium chloride	Midazolam-0.9% nacl
64610: Benzodiazepines	Midazolam-sodium chloride	Midazolam/sodium chloride
64610: Benzodiazepines	Oxazepam	Oxazepam
64610: Benzodiazepines	Oxazepam	Serax
64610: Benzodiazepines	Remimazolam besylate	Byfavo
64690: Antianxiety, other	Meprobamate	Meprobamate
67110: Barb long-acting	Mephobarbital	Mebaral
67110: Barb long-acting	Mephobarbital	Mephobarbital
67110: Barb long-acting	Phenobarbital	Phenobarbital
67110: Barb long-acting	Phenobarbital sodium	Luminal
67110: Barb long-acting	Phenobarbital sodium	Phenobarbital sodium
67120: Barb intermediate- acting	Amobarbital sodium	Amytal sodium
67120: Barb intermediate- acting	Butabarbital sodium	Butisol sodium
67130: Barb short-acting	Pentobarbital sodium	Nembutal
67130: Barb short-acting	Pentobarbital sodium	Nembutal sodium
67130: Barb short-acting	Pentobarbital sodium	Pentobarbital sodium
67130: Barb short-acting	Secobarbital sodium	Seconal
67130: Barb short-acting	Secobarbital sodium	Seconal sodium
67210: Non-barb chloral,etc	Chloral hydrate	Chloral hydrate
67210: Non-barb chloral,etc	Chloral hydrate	Somnote



USC	Molecule name	Product name
67290: Non-barb, other	Calcium, magnesium, potassium, & sodium oxybates	Xywav
67290: Non-barb, other	Daridorexant HCL	Quviviq
67290: Non-barb, other	Estazolam	Estazolam
67290: Non-barb, other	Estazolam	Prosom
67290: Non-barb, other	Eszopiclone	Eszopiclone
67290: Non-barb, other	Eszopiclone	Lunesta
67290: Non-barb, other	Flurazepam HCL	Dalmane
67290: Non-barb, other	Flurazepam HCL	Flurazepam HCL
67290: Non-barb, other	Lemborexant	Dayvigo
67290: Non-barb, other	Quazepam	Doral
67290: Non-barb, other	Quazepam	Quazepam
67290: Non-barb, other	Sodium oxybate	Xyrem
67290: Non-barb, other	Suvorexant	Belsomra
67290: Non-barb, other	Temazepam	Restoril
67290: Non-barb, other	Temazepam	Temazepam
67290: Non-barb, other	Temazepam-dietary management product	Strazepam
67290: Non-barb, other	Triazolam	Halcion
67290: Non-barb, other	Triazolam	Triazolam
67290: Non-barb, other	Zaleplon	Sonata
67290: Non-barb, other	Zaleplon	Zaleplon
67290: Non-barb, other	Zolpidem & dietary management product	Gabazolpidem-5
67290: Non-barb, other	Zolpidem & dietary management product	Sentrazolpidem pm-5
67290: Non-barb, other	Zolpidem tartrate	Ambien
67290: Non-barb, other	Zolpidem tartrate	Ambien cr
67290: Non-barb, other	Zolpidem tartrate	Edluar
67290: Non-barb, other	Zolpidem tartrate	Intermezzo
67290: Non-barb, other	Zolpidem tartrate	Zolpidem tartrate
67290: Non-barb, other	Zolpidem tartrate	Zolpidem tartrate er
67290: Non-barb, other	Zolpidem tartrate	Zolpimist
78340: Drug dependence	Buprenorphine	Sublocade
78340: Drug dependence	Buprenorphine HCL	Buprenorphine HCL
78340: Drug dependence	Buprenorphine HCL	Buprenorphine hydrochlori
78340: Drug dependence	Buprenorphine HCL	Probuphine implant kit
78340: Drug dependence	Buprenorphine HCL	Subutex



USC	Molecule name	Product name
78340: Drug dependence	Buprenorphine HCL-naloxone HCL dihydrate	Bunavail
78340: Drug dependence	Buprenorphine HCL-naloxone HCL dihydrate	Buprenorphine HCL/naloxone
78340: Drug dependence	Buprenorphine HCL-naloxone HCL dihydrate	Buprenorphine hydrochlori
78340: Drug dependence	Buprenorphine HCL-naloxone HCL dihydrate	Suboxone
78340: Drug dependence	Buprenorphine HCL-naloxone HCL dihydrate	Zubsolv
78340: Drug dependence	Methadone HCL	Methadone HCL
78340: Drug dependence	Methadone HCL	Methadone HCL intensol
78340: Drug dependence	Methadone HCL	Methadone hydrochloride
78340: Drug dependence	Methadone HCL	Methadone hydrochloride I
78340: Drug dependence	Methadone HCL	Methadose
78340: Drug dependence	Methadone HCL	Methadose sugar-free