

2024 Formulary

Effective January 1, 2024



Ambetter.SunshineHealth.com

Formulary Introduction

FORMULARY

The Ambetter from Sunshine Health Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

Tier 0 - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.

Tier 1_A - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 1_B - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 2 - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.

Tier 3 - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.

Tier 4 - Highest copayment is for "specialty" drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management. Prescription drugs covered under the specialty tier may require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Pharmacy Services will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.

Opioid Medications:

Medications identified on the formulary by "**New starts limited to 7 day supply**" allow up to two 7 day fills during any 28 day period and up to a total of 28 day non-consecutive supply in any 90 day period. This limit applies cumulatively to all opioid medications filled. For fills exceeding these limits, your providers may submit a Prior Authorization request.

Introducción al Formulario

FORMULARIO

El Formulario de Ambetter from Sunshine Health, o la Lista de medicamentos recetados, es una guía de los medicamentos de marca y genéricos disponibles que están aprobados por la Administración de Alimentos y Medicamentos (FDA) y que están cubiertos a través de su beneficio de medicamentos recetados. Los medicamentos genéricos tienen los mismos principios activos que los de marca y deben considerarse la primera línea de tratamiento. La FDA exige que los medicamentos genéricos sean seguros y funcionen igual que los medicamentos de marca. Si no hay un genérico disponible, podría haber más de un medicamento de marca para tratar una condición. Los medicamentos de marca preferidos figuran en el nivel 2 para ayudar a identificar los medicamentos de marca que son opciones de tratamiento clínicamente adecuadas, seguras y rentables, si un medicamento genérico del Formulario no es adecuado para su condición.

Tenga en cuenta que el Formulario no pretende ser una lista completa de los medicamentos cubiertos por su beneficio de medicamentos recetados. Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento. Esta lista se revisa y actualiza periódicamente y puede estar sujeta a cambios. Se pueden agregar o eliminar medicamentos, o se pueden incorporar requisitos adicionales para aprobar el uso continuado de un medicamento específico.

Es posible que determinados diseños de planes de beneficios de medicamentos recetados no cubran algunos productos o categorías, independientemente de que figuren en este documento. Revise sus beneficios para conocer las limitaciones de la cobertura y la parte que le corresponde pagar por sus medicamentos.

Clave de la lista de medicamentos:

Los medicamentos de marca aparecen en MAYÚSCULAS y los medicamentos genéricos aparecen en minúsculas.

Los medicamentos están cubiertos por diferentes niveles de copago en función de su beneficio:

Nivel 0 - Sin copago para aquellos medicamentos que se usan para prevención y son obligatorios según la Ley de Cuidado de Salud Asequible. Los anticonceptivos orales seleccionados, la vitamina D, el ácido fólico para mujeres en edad fértil, las aspirinas de venta libre (OTC) y los productos para dejar de fumar pueden estar cubiertos en este nivel. Es posible que se apliquen ciertos límites de edad.

Nivel 1_A - El copago más bajo para medicamentos seleccionados que ofrecen el mayor valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.

Nivel 1_B - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.

Nivel 2 - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.

Nivel 3 - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.

Nivel 4 - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

Autorización previa para medicamentos no incluidos en el Formulario

Para obtener autorización previa para un medicamento no incluido en el Formulario, su proveedor debe completar el formulario de autorización previa. Los servicios responderán por fax o teléfono en un plazo de 24 horas a partir de la recepción de toda la información necesaria para las solicitudes urgentes, y en un plazo de 72 horas en caso de solicitudes no urgentes, a menos que la legislación estatal exija una respuesta más rápida. Si la solicitud es denegada, el aviso de la denegación incluirá una explicación clara de los motivos específicos para denegar la solicitud de autorización previa o, si la autorización estaba incompleta, la explicación identificará la información material faltante necesaria para completar la solicitud.

Abreviaturas del Formulario:

Abreviatura	Término	Significado
AL	Límite de edad	Algunos medicamentos solo están cubiertos para determinadas edades.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para determinadas cantidades.
PA	Autorización previa	Su médico debe solicitar la aprobación de Ambetter antes de que algunos medicamentos tengan cobertura.
ST	Terapia escalonada	En algunos casos, usted primero debe probar un medicamento determinado antes de que Ambetter cubra otro medicamento para su condición médica. Por ejemplo, si tanto el medicamento A como el medicamento B tratan su condición médica, Ambetter podría no cubrir el medicamento B a menos que usted pruebe primero el medicamento A.
NF	No incluido en el Formulario	Este producto no está cubierto a menos que usted o su proveedor soliciten una excepción. Hay medicamentos alternativos que figuran a continuación del producto no cubierto.
RX/OTC	Medicamentos recetados y OTC	Estos medicamentos se fabrican tanto como medicamento recetado como de venta libre (OTC).
SP	Medicamento de especialidad	Estos productos son medicamentos de especialidad que pueden tener requisitos de surtido especiales.
SF	Surtido dividido	Al principio es posible que ciertos medicamentos solo estén disponibles en suministros incrementales cada 15 días hasta que usted se estabilice con el medicamento. Una vez transcurridos 90 días desde que comenzó a tomar este medicamento, es posible que esta restricción ya no se aplique.

Medicamentos opioides:

Los medicamentos identificados en el Formulario como “**Nuevos pedidos limitados a suministro de 7 días**” permiten hasta dos surtidos de 7 días durante cualquier periodo de 28 días y hasta un total de 28 días no consecutivos en un periodo de 90 días. Este límite se aplica de forma acumulativa a todos los medicamentos opioides surtidos. Para surtidos que superen estos límites, sus proveedores pueden presentar una solicitud de autorización previa.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)
Amphetamines			<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 ea daily); ST
<i>amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG</i>	1B	QL(1 ea daily)	<i>methamphetamine hcl</i>	1B	QL(5 ea daily); AL(At least 6 yrs old)
<i>amphetamine-dextroamphetamine CP24 3.75 MG-3.75 MG-3.75 MG-3.75 MG</i>	1B		VYVANSE CAPS	3	QL(1 ea daily); ST
<i>amphetamine-dextroamphetamine CP24 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)	Anorexiants Non-Amphetamine		
<i>amphetamine-dextroamphetamine TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)	<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG-1.875 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG</i>	1B	QL(3 ea daily)	<i>phentermine hcl CAPS</i>	1B	PA
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 ea daily)	Anti-Obesity Agents		
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B		CONTRAVE	3	QL(4 ea daily); PA
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B		Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
			<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
			<i>clonidine hcl (adhd) TB12</i>	1B	
			<i>guanfacine hcl (adhd)</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
			Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
			SUNOSI 150 MG	3	QL(1 ea daily); PA
			SUNOSI 75 MG	3	QL(2 ea daily); PA
			Stimulants - Misc.		
			<i>armodafinil</i>	1B	QL(1 ea daily); AL(At least 17 yrs old); PA
			<i>dexmethylphenidate hcl CP24</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
dexamethylphenidate hcl TABS	1B	QL(2 ea daily); AL(At least 6 yrs old)	modafinil 200 MG	1B	QL(2 ea daily); PA	
methylphenidate hcl CHEW 2.5 MG	1B	QL(2 ea daily)	modafinil 100 MG	1B	QL(1 ea daily); PA	
methylphenidate hcl CHEW 10 MG	1B	QL(5 ea daily)	ALLERGENIC EXTRACTS/BIOLOGICALS MISC			
methylphenidate hcl CHEW 5 MG	1B	QL(6 ea daily)	Allergenic Extracts			
methylphenidate hcl CP24 20 MG, 40 MG	1B	AL(At least 6 yrs old)	GRASTEK SUBL	3	PA	
methylphenidate hcl CP24	1B		AMEBICIDES			
methylphenidate hcl CP24 30 MG	1B	QL(3 ea daily); AL(At least 6 yrs old)	Amebicides			
methylphenidate hcl CP24 10 MG, 60 MG	1B	QL(1 ea daily); AL(At least 6 yrs old)	SOLOSEC	3	PA	
methylphenidate hcl CPCR	1B	QL(1 ea daily); AL(At least 6 yrs old)	AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections			
methylphenidate hcl SOLN	1B	QL(30 ml daily); AL(At least 6 yrs old)	Aminoglycosides			
methylphenidate hcl TABS 5 MG	1B	QL(6 ea daily); AL(At least 6 yrs old)	amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML	1B		
methylphenidate hcl TABS 10 MG, 20 MG	1B	QL(5 ea daily); AL(At least 6 yrs old)	ARIKAYCE	4	PA	
methylphenidate hcl TB24 18 MG, 27 MG	1B	QL(1 ea daily); AL(At least 6 yrs old)	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %	1B		
methylphenidate hcl TB24 36 MG, 54 MG	1B	QL(2 ea daily); AL(At least 6 yrs old)	gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML	1B		
methylphenidate hcl TBCR 18 MG, 27 MG	1B	QL(1 ea daily); AL(At least 6 yrs old)	neomycin sulfate TABS	1B		
methylphenidate hcl TBCR 10 MG, 20 MG	1B	QL(3 ea daily); AL(At least 6 yrs old)	streptomycin sulfate SOLR	3		
methylphenidate hcl TBCR 36 MG, 54 MG	1B	QL(2 ea daily); AL(At least 6 yrs old)	tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML	1B		
methylphenidate hcl PTCH	1B	QL(1 ea daily); PA	tobramycin NEBU	4	QL(280 ml per 56 day(s) retail; 280 ml per 56 days mail); PA	
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions						
Antirheumatic - Enzyme Inhibitors						
RINVOQ TB24			RINVOQ TB24	4	QL(1 ea daily); PA	
XELJANZ XR TB24			XELJANZ XR TB24	4	QL(1 ea daily); PA	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
XELJANZ SOLN	4	QL(20 ml daily); PA	HADLIMA SOSY	4	QL(0.086 ml daily); PA			
XELJANZ TABS 5 MG	4	QL(2 ea daily); SP; PA	HADLIMA SOSY	4	QL(0.172 ml daily); PA			
XELJANZ TABS 10 MG	4	QL(2 ea daily); PA	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
Antirheumatic Antimetabolites								
METHOTREXATE	4	QL(1.714 ea daily); SP; PA	HUMIRA PEN-CD/UC/HS STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
Anti-TNF-alpha - Monoclonal Antibodies								
ADALIMUMAB-ADAZ SOAJ	4	QL(0.086 ml daily); PA	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
ADALIMUMAB-ADAZ SOSY	4	QL(0.086 ml daily); PA	HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily); PA			
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA PEN PNKT	4	QL(0.143 ea daily); PA			
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA	HUMIRA PEN-PS/UV STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA PSKT	4	QL(0.143 ea daily); PA			
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	SIMPONI ARIA SOLN	4	PA			
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	Gold Compounds					
CYLTEZO AJKT	4	QL(0.029 ea daily); PA	RIDAURA	3	QL(3 ea daily)			
CYLTEZO PSKT 40 MG/0.4ML	4	QL(0.029 ea daily); PA	Interleukin-1 Blockers					
CYLTEZO PSKT 10 MG/0.2ML	4	QL(0.072 ea daily); PA	ARCALYST	4	QL(0.286 ea daily); SP; PA			
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	Interleukin-6 Receptor Inhibitors					
HADLIMA PUSHTOUCH SOAJ	4	QL(0.172 ml daily); PA	KEVZARA SOAJ	4	QL(0.082 ml daily); PA			
HADLIMA PUSHTOUCH SOAJ	4	QL(0.086 ml daily); PA	KEVZARA SOSY	4	QL(0.082 ml daily); PA			
Nonsteroidal Anti-inflammatory Agents (NSAIDs)								

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
celecoxib	1B	QL(2 ea daily)	<i>tolmetin sodium TABS 600 MG</i>	1B	
<i>diclofenac potassium TABS 50 MG</i>	1B		Phosphodiesterase 4 (PDE4) Inhibitors		
<i>diclofenac sodium TB24</i>	1B		OTEZLA TABS	4	QL(2 ea daily); PA
<i>diclofenac sodium TBEC</i>	1B		OTEZLA TBPK	4	1 package(s) per 180 day(s) retail; PA
<i>diclofenac w/ misoprostol TBEC</i>	1B		Pyrimidine Synthesis Inhibitors		
<i>etodolac CAPS</i>	1B		<i>leflunomide</i>	1B	QL(1 ea daily)
<i>etodolac TABS</i>	1B		Soluble Tumor Necrosis Factor Receptor Agents		
<i>fenoprofen calcium TABS</i>	1B	QL(4 ea daily); ST	ENBREL MINI SOCT	4	QL(0.146 ml daily); PA
<i>flurbiprofen TABS</i>	1B		ENBREL SURECLICK SOAJ	4	QL(0.146 ml daily); PA
<i>ibuprofen SUSP 100 MG/5ML</i>	1B	RX/OTC	ENBREL SOLN	4	QL(0.146 ml daily); PA
<i>ibuprofen TABS 800 MG</i>	1B		ENBREL SOSY 50 MG/ML	4	QL(0.286 ml daily); SP; PA
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A		ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ml daily); PA
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B		ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>indomethacin CPCR</i>	1B		Analgesic Combinations		
<i>ketoprofen CAPS 50 MG</i>	1B		<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 ea daily)	<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>meclofenamate sodium CAPS</i>	1B		<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 ea daily); ST	<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>meloxicam TABS</i>	1A	QL(1 ea daily)	<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)
<i>nabumetone</i>	1B		Salicylates		
<i>naproxen sodium TABS 550 MG</i>	1B		<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>naproxen SUSP</i>	1B	PA			
<i>naproxen TABS</i>	1B				
<i>naproxen TBEC 500 MG</i>	1B	QL(3 ea daily)			
<i>oxaprozin TABS</i>	1B				
<i>piroxicam CAPS</i>	1B				
<i>sulindac TABS</i>	1B				
<i>tolmetin sodium CAPS</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
aspirin TABS 325 MG	0	AL(At least 45 yrs old - Up to 79 yrs old)	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	1B	
aspirin TBEC 325 MG	1A		meperidine hcl SOLN OR 50 MG/5ML	1B	New starts limited to 7 day supply; QL(500 ml per fill retail)
aspirin TBEC 81 MG	0	AL(At least 45 yrs old - Up to 79 yrs old)	meperidine hcl TABS 50 MG	1B	New starts limited to 7 day supply; QL(6 ea daily)
diflunisal TABS	1B		methadone hcl CONC	1B	QL(10 ml daily)
salsalate	1B		methadone hcl SOLN IJ 10 MG/ML	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			methadone hcl SOLN OR 10 MG/5ML	1B	QL(50 ml daily)
Opioid Agonists			methadone hcl SOLN OR 5 MG/5ML	1B	QL(100 ml daily)
codeine sulfate TABS 30 MG	1B	New starts limited to 7 day supply	METHADONE HCL SOLN IJ	1B	
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	methadone hcl TABS 10 MG	1B	QL(10 ea daily)
fentanyl citrate LPOP	1B	QL(4 ea daily); PA	methadone hcl TABS 5 MG	1B	QL(4 ea daily)
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	1B	QL(0.34 ea daily)	methadone hcl TBSO	1B	QL(2 ea daily)
hydrocodone bitartrate T24A	1B	QL(2 ea daily)	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	1B	QL(2 ea daily); PA
hydromorphone hcl LIQD	1B	New starts limited to 7 day supply	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	1B	
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML	1B		morphine sulfate SOLN OR 20 MG/5ML	1B	New starts limited to 7 day supply; QL(50 ml daily)
hydromorphone hcl TABS	1B	New starts limited to 7 day supply; QL(8 ea daily)	morphine sulfate SOLN OR 10 MG/5ML	1B	New starts limited to 7 day supply; QL(100 ml daily)
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	1B	QL(2 ea daily); PA	morphine sulfate TABS 15 MG	1B	New starts limited to 7 day supply; QL(6 ea daily)
hydromorphone hcl TB24 32 MG	1B	QL(1 ea daily); PA	morphine sulfate TABS 30 MG	1B	QL(6 ea daily)
HYSINGLA ER T24A	3	QL(2 ea daily)			
levorphanol tartrate TABS 2 MG	1B	New starts limited to 7 day supply			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate TBCR</i>	1B	QL(2 ea daily)	<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
NUCYNTA ER TB12	2	QL(2 ea daily); PA	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA
NUCYNTA TABS	2	QL(6 ea daily); PA	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 ea daily); PA	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>oxymorphone hcl TABS</i>	1B	QL(12 ea daily); PA	<i>butalbital-aspirin-caffeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 ea daily); PA	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1B	New starts limited to 7 day supply; QL(180 ml daily)
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 ea daily); PA	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
ROXYBOND TABA 15 MG, 30 MG	3	QL(12 ea daily)	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
SUBSYS LIQD 100 MCG	3	QL(3 ea daily); PA	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 ea daily); PA	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 ea daily)
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	3	QL(8 ea daily); PA	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 ea daily)			
<i>tramadol hcl TB24</i>	1B	QL(1 ea daily)			
XTAMPZA ER	2	QL(2 ea daily)			
Opioid Combinations					
<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ml daily)			
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)			
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)	<i>testosterone cypionate SOLN IM</i>	1B				
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)	<i>TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML</i>	1B				
Opioid Partial Agonists								
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 ea daily)	<i>testosterone enanthate SOLN IM</i>	1B				
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 ea daily)	ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching					
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 ea daily)	Intrarectal Steroids					
<i>buprenorphine hcl SOLN</i>	1B		<i>budesonide (intrarectal)</i>	4	PA			
<i>buprenorphine hcl SUBL</i>	1B	QL(3 ea daily)	<i>hydrocortisone (intrarectal)</i>	1B				
<i>buprenorphine PTWK</i>	1B	QL(0.143 ea daily); PA	<i>UCERIS (budesonide (intrarectal))</i>	4	PA			
<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA	Rectal Steroids					
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B		<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC			
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)	<i>hydrocortisone acetate (rectal)</i>	1B				
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply	Vasodilating Agents					
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones								
Anabolic Steroids								
<i>oxandrolone</i>	1B		<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)			
Androgens			<i>RECTIV (nitroglycerin (intra-anal))</i>	3	QL(2 gm daily)			
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 ea daily); PA	ANTHELMINTICS - Drugs to Treat Worm Infections					
<i>danazol CAPS</i>	1B		Anthelmintics					
<i>METHITEST TABS</i>	3		<i>albendazole</i>	1B	PA			
			<i>EMVERM CHEW</i>	2	QL(2 ea daily; 6 ea per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ivermectin</i>	1B	QL(9 ea per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail	Benzodiazepines		
<i>praziquantel</i>	1B	PA	<i>alprazolam TABS 2 MG</i>	1B	QL(4 ea daily)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain			<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 ea daily)
Antianginals-Other			<i>alprazolam TB24</i>	1B	
<i>ranolazine TB12 500 MG</i>	1B	QL(3 ea daily)	<i>alprazolam TBDP</i>	1B	
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 ea daily)	<i>chlordiazepoxide hcl CAPS</i>	1B	
Nitrates			<i>clorazepate dipotassium TABS</i>	1B	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B		<i>diazepam CONC</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B		<i>diazepam SOLN OR 5 MG/5ML</i>	1B	
<i>isosorbide mononitrate TB24</i>	1B		<i>diazepam TABS</i>	1A	QL(4 ea daily)
NITRO-BID OINT	3		<i>lorazepam CONC</i>	1B	
<i>nitroglycerin CPCR</i>	1B	QL(4 ea daily)	<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 ea daily)
<i>nitroglycerin PT24</i>	1B		<i>lorazepam TABS 1 MG</i>	1A	QL(4 ea daily)
NITROGLYCERIN SOLN IV	1B		<i>oxazepam CAPS</i>	1B	
<i>nitroglycerin SUBL</i>	1B		ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
ANTIANXIETY AGENTS - Drugs to Treat Anxiety			Antiarrhythmics Type I-A		
Antianxiety Agents - Misc.			<i>disopyramide phosphate CAPS</i>	1B	
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B		<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>buspirone hcl 5 MG</i>	1A		<i>quinidine sulfate TABS</i>	1B	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B		Antiarrhythmics Type I-B		
<i>hydroxyzine hcl SYRP</i>	1B		<i>mexiletine hcl</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B		Antiarrhythmics Type I-C		
<i>hydroxyzine pamoate CAPS</i>	1B		<i>flecainide acetate</i>	1B	
<i>meprobamate</i>	1B	QL(6 ea daily)	<i>propafenone hcl CP12</i>	1B	
			<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III					
			<i>amiodarone hcl SOLN 50 MG/ML</i>	1B	
			<i>amiodarone hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
<i>dofetilide</i>	1B		<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)			
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions								
Antiasthmatic - Monoclonal Antibodies								
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA	<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)			
FASENRA SOSY 30 MG/ML	4	QL(0.036 ml daily); PA	<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)			
NUCALA SOAJ	4	QL(0.1073 ml daily); PA	<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)			
NUCALA SOLR	4	QL(0.1073 ea daily); PA	<i>zafirlukast</i>	1B	QL(2 ea daily)			
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA	<i>zileuton TB12</i>	1B	QL(4 ea daily)			
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors					
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>roflumilast</i>	3	QL(1 ea daily)			
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA	Steroid Inhalants					
XOLAIR SOLR	4	QL(0.286 ea daily); PA	ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA			
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA	ARNUITY ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail			
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA			
Anti-Inflammatory Agents			<i>fluticasone propionate (inhalation) AEPB</i>	1B				
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)	<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)			
Bronchodilators - Anticholinergics			PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail			
ATROVENT HFA	3	Limit 2 inhalers per month; QL(0.44 gm daily)	QVAR REDIHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail			
INCRUSE ELLIPTA	2	QL(1 ea daily)	Sympathomimetics					
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)	<i>albuterol sulfate AERS</i>	1B				
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	2	QL(1 ea daily)						
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)						

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML</i>	1B	QL(15 ml daily)	<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)
<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	1B		<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)
<i>albuterol sulfate SYRP</i>	1B		<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B	
<i>albuterol sulfate TABS</i>	1B		<i>levalbuterol hcl</i>	1B	QL(12 ml daily)
<i>ANORO ELLIPTA</i>	2	QL(2 ea daily)	<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)
<i>arformoterol tartrate</i>	1B	QL(4 ml daily)	<i>SEREVENT DISKUS</i>	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>BREO ELLIPTA</i>	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>STIOLTO RESPIMAT</i>	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>BREO ELLIPTA (fluticasone furoate-vilanterol)</i>	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>STRIVERDI RESPIMAT</i>	2	
<i>BREZTRI AEROSPHERE</i>	2	QL(0.38 gm daily)	<i>terbutaline sulfate SOLN</i>	1B	
<i>budesonide-formoterol fumarate dihydrate</i>	1B	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	<i>terbutaline sulfate TABS</i>	1B	
<i>DULERA</i>	2		<i>TRELEGY ELLIPTA</i>	2	QL(2 ea daily)
<i>fluticasone furoate-vilanterol</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	Xanthines		
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>aminophylline SOLN</i>	1B	
<i>fluticasone-salmeterol AERO</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>theophylline ELIX</i>	1B	
			<i>theophylline SOLN</i>	1B	QL(56 ml daily)
			<i>theophylline TB12</i>	1B	
			<i>theophylline TB24</i>	1B	
			ANTICOAGULANTS - Blood Thinners		
			Coumarin Anticoagulants		
			<i>warfarin sodium TABS</i>	1B	
			Direct Factor Xa Inhibitors		
			<i>ELIQUIS STARTER PACK TBPK</i>	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail
			<i>ELIQUIS TABS</i>	2	QL(2 ea daily)
			<i>XARELTO STARTER PACK TBPK</i>	2	1 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)	AMPA Glutamate Receptor Antagonists		
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)	FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)	FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA
Heparins And Heparinoid-Like Agents			FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)	FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ml daily); SP	Anticonvulsants - Benzodiazepines		
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)	<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)	<i>clobazam TABS</i>	1B	QL(2 ea daily); PA
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ml daily; 30 Day(s) limit); SP	<i>clonazepam TABS</i>	1A	
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit); SP	<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ml per 180 day(s) retail; 4 ml per 180 days mail); SP	NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA
<i>fondaparinux sodium 5 MG/0.4ML, 7.5 MG/0.6ML, 10 MG/0.8ML</i>	4	SP	VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
FRAGMIN SOSY	4	SP; PA	VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B		VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B		VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
Thrombin Inhibitors			Anticonvulsants - Misc.		
<i>dabigatran etexilate mesylate CAPS</i>	1B		APTIOM	3	QL(2 ea daily); ST
ANTICONVULSANTS - Drugs to Treat Seizures			BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 ea daily); PA
			BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 ea daily); PA
			BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BRIVIACT TABS	3	QL(2 ea daily); PA	<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)
<i>carbamazepine CHEW</i>	1B		<i>levetiracetam TB24</i>	1B	QL(4 ea daily)
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)	<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)	<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)
<i>carbamazepine CP12 100 MG</i>	1B		<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)
<i>carbamazepine SUSP</i>	1B		<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>carbamazepine TABS</i>	1B		<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 ea daily)	<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)	<i>primidone 50 MG, 250 MG</i>	1B	
DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA	<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA
DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA	<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA	<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA
DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA	<i>TEGRETOL SUSP (carbamazepine)</i>	2	
EPIDIOLEX	3	PA	<i>TEGRETOL TABS (carbamazepine)</i>	2	
<i>gabapentin CAPS</i>	1B		<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>gabapentin SOLN</i>	1B	QL(60 ml daily)	<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>gabapentin TABS 600 MG, 800 MG</i>	1B		<i>topiramate CS24</i>	3	PA
<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)	<i>topiramate TABS 200 MG</i>	1B	QL(2 ea daily)
<i>lacosamide TABS</i>	1B	QL(2 ea daily)	<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)	<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)	<i>zonisamide CAPS</i>	1B	QL(6 ea daily)
<i>lamotrigine TABS</i>	1B		Carbamates		
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)	<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)	<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)	<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)	GABA Modulators		
			<i>tiagabine hcl</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
vigabatrin PACK	4	QL(6 ea daily); SP; PA	mirtazapine TABS 7.5 MG, 45 MG	1B	QL(1 ea daily)
vigabatrin TABS	4	QL(6 ea daily); SP; PA	mirtazapine TBDP 15 MG	1B	QL(3 ea daily)
Hydantoins					
DILANTIN	2		mirtazapine TBDP 45 MG	1B	QL(1 ea daily)
DILANTIN (<i>phenytoin sodium extended</i>)	2		mirtazapine TBDP 30 MG	1B	QL(1.5 ea daily)
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2		Antidepressants - Misc.		
DILANTIN-125 SUSP (<i>phenytoin</i>)	2		bupropion hcl TABS	1B	QL(3 ea daily)
<i>fosphenytoin sodium</i>	1B		bupropion hcl TB12 150 MG	1B	QL(3 ea daily)
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B		bupropion hcl TB12 100 MG	1B	QL(4 ea daily)
<i>phenytoin sodium SOLN</i>	1B		bupropion hcl TB12 200 MG	1B	QL(2 ea daily)
<i>phenytoin CHEW</i>	1B		bupropion hcl TB24 150 MG	1B	QL(3 ea daily)
<i>phenytoin SUSP</i>	1B		bupropion hcl TB24 300 MG	1B	QL(1 ea daily)
Succinimides					
CELONTIN (<i>methsuximide</i>)	3	QL(4 ea daily)	Monoamine Oxidase Inhibitors (MAOIs)		
<i>ethosuximide CAPS</i>	1B	QL(6 ea daily)	EMSAM	3	QL(1 ea daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ml daily)	MARPLAN	2	QL(6 ea daily)
<i>methsuximide</i>	1B	QL(4 ea daily)	<i>phenelzine sulfate</i>	1B	
ZARONTIN CAPS (<i>ethosuximide</i>)	2	QL(6 ea daily)	<i>tranylcypromine sulfate</i>	1B	
Valproic Acid					
<i>divalproex sodium TB24</i>	1B		N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
<i>divalproex sodium TBEC</i>	1B		SPRAVATO 56MG DOSE	4	PA
<i>valproate sodium SOLN OR 250 MG/5ML</i>	1B		SPRAVATO 84MG DOSE	4	PA
<i>valproic acid CAPS</i>	1B		Selective Serotonin Reuptake Inhibitors (SSRIs)		
ANTIDEPRESSANTS - Drugs to Treat Depression			<i>citalopram hydrobromide SOLN</i>	1B	QL(20 ml daily)
Alpha-2 Receptor Antagonists (Tetracyclines)			<i>citalopram hydrobromide TABS 10 MG</i>	1B	QL(4 ea daily)
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)	<i>citalopram hydrobromide TABS 20 MG</i>	1B	QL(2 ea daily)
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)	<i>citalopram hydrobromide TABS 40 MG</i>	1B	QL(1 ea daily)
			<i>escitalopram oxalate SOLN</i>	1B	QL(20 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate TABS 10 MG</i>	1B	QL(2 ea daily)	<i>nefazodone hcl</i>	1B	
<i>escitalopram oxalate TABS 20 MG</i>	1B	QL(1 ea daily)	<i>trazodone hcl TABS</i>	1B	
<i>escitalopram oxalate TABS 5 MG</i>	1B	QL(4 ea daily)	<i>TRINTELLIX</i>	3	QL(1 ea daily); PA
<i>fluoxetine hcl CAPS 40 MG</i>	1B	QL(2 ea daily)	<i>VIIBRYD STARTER PACK KIT</i>	3	1 package(s) per 180 day(s) retail
<i>fluoxetine hcl CAPS 20 MG</i>	1B	QL(3 ea daily)	<i>vilazodone hcl TABS</i>	1B	QL(1 ea daily)
<i>fluoxetine hcl CAPS 10 MG</i>	1A	QL(1 ea daily)	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>fluoxetine hcl CPDR</i>	1B		<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1B	QL(1 ea daily)
<i>fluoxetine hcl SOLN</i>	1B	QL(20 ml daily)	<i>desvenlafaxine succinate 100 MG</i>	1B	QL(4 ea daily)
<i>fluoxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)	<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1B	QL(2 ea daily)
<i>fluoxetine hcl TABS 10 MG, 60 MG</i>	1B	QL(1 ea daily)	<i>duloxetine hcl CPEP 40 MG</i>	1B	
<i>fluvoxamine maleate TABS 100 MG</i>	1B	QL(3 ea daily)	<i>FETZIMA TITRATION PACK C4PK</i>	3	PA
<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	1B	QL(2 ea daily)	<i>FETZIMA CP24</i>	3	QL(1 ea daily); PA
<i>paroxetine hcl SUSP</i>	1B	QL(30 ml daily)	<i>venlafaxine hcl CP24 75 MG</i>	1B	QL(5 ea daily)
<i>paroxetine hcl TABS 10 MG</i>	1B	QL(6 ea daily)	<i>venlafaxine hcl CP24 150 MG</i>	1B	QL(2 ea daily)
<i>paroxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)	<i>venlafaxine hcl CP24 37.5 MG</i>	1B	QL(4 ea daily)
<i>paroxetine hcl TABS 40 MG</i>	1B	QL(1 ea daily)	<i>venlafaxine hcl TABS</i>	1B	QL(3 ea daily)
<i>paroxetine hcl TABS 30 MG</i>	1B	QL(2 ea daily)	<i>venlafaxine hcl TB24 150 MG</i>	1B	QL(2 ea daily)
<i>paroxetine hcl TB24 25 MG, 37.5 MG</i>	1B	QL(2 ea daily)	<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)
<i>paroxetine hcl TB24 12.5 MG</i>	1B	QL(1 ea daily)	Tricyclic Agents		
<i>sertraline hcl CONC</i>	1B	QL(10 ml daily)	<i>amitriptyline hcl TABS</i>	1B	
<i>sertraline hcl TABS 100 MG</i>	1B	QL(2 ea daily)	<i>amoxapine</i>	1B	
<i>sertraline hcl TABS 25 MG, 50 MG</i>	1B	QL(4 ea daily)	<i>clomipramine hcl</i>	1B	PA
Serotonin Modulators			<i>desipramine hcl TABS</i>	1B	
			<i>doxepin hcl CAPS</i>	1B	
			<i>doxepin hcl CONC</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>imipramine hcl TABS</i>	1B		JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
<i>imipramine pamoate</i>	1B		JANUMET TABS	2	QL(2 ea daily)
<i>nortriptyline hcl CAPS</i>	1B		<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>nortriptyline hcl SOLN</i>	1B		<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 ea daily)
<i>protriptyline hcl</i>	1B		<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 ea daily)
<i>trimipramine maleate CAPS</i>	1B		<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 ea daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar			SOLIQUA 100/33	2	QL(0.5 ml daily); PA
Alpha-Glucosidase Inhibitors			SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
<i>acarbose</i>	1B	QL(3 ea daily)	SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily)
<i>miglitol</i>	1B	QL(3 ea daily)	SYNJARDY TABS	2	QL(2 ea daily)
Antidiabetic Combinations			TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)
<i>alogliptin-metformin hcl</i>	1B	QL(2 ea daily); PA	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)
<i>alogliptin-pioglitazone 15 MG-12.5 MG, 30 MG-12.5 MG, 45 MG-12.5 MG</i>	1B	QL(2 ea daily); PA	XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 ea daily); PA	XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 ea daily)	XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 ea daily)	Biguanides		
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	QL(2 ea daily)	<i>metformin hcl TABS 850 MG</i>	0	QL(3 ea daily)
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	QL(4 ea daily)	<i>metformin hcl TABS 500 MG</i>	1B	QL(5 ea daily)
<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	QL(2 ea daily)	<i>metformin hcl TABS 1000 MG</i>	1B	QL(2.5 ea daily)
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	QL(4 ea daily)	<i>metformin hcl TB24 500 MG</i>	1B	QL(4 ea daily)
GLYXAMBI	2	QL(1 ea daily)			
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl TB24 750 MG</i>	1B	QL(3 ea daily)	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1B	
Diabetic Other			INSULIN ASPART SOLN IJ	1B	
<i>diazoxide</i>	3		INSULIN DEGLUDEC FLEXTOUCH SOPN	2	
<i>glucagon (rdna)</i>	1B	QL(0.035 ea daily)	INSULIN DEGLUDEC SOLN	2	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			LEVEMIR FLEXPEN SOPN	3	PA
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)	LEVEMIR FLEXTOUCH SOPN	3	PA
JANUVIA	2	QL(1 ea daily)	LEVEMIR SOLN	3	PA
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)	NOVOLIN 70/30 FLEXPEN SUPN	2	
Incretin Mimetic Agents			NOVOLIN 70/30 SUSP	2	
<i>liraglutide</i>	1B	QL(0.3 ml daily); PA	NOVOLIN N FLEXPEN SUPN	2	
OZEMPIC SOPN	2	QL(0.108 ml daily); PA	NOVOLIN N SUSP	2	
OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily); PA	NOVOLIN R FLEXPEN SOPN IJ	2	
RYBELSUS TABS	2	QL(1 ea daily); PA	NOVOLIN R SOLN IJ	2	
TRULICITY	2	QL(0.143 ml daily); PA	Insulin Sensitizing Agents		
VICTOZA	2	QL(0.3 ml daily); PA	<i>pioglitazone hcl</i>	1B	QL(1 ea daily)
Insulin			Meglitinide Analogues		
APIDRA SOLOSTAR SOPN	3	PA	<i>nateglinide</i>	1B	QL(3 ea daily)
APIDRA SOLN	3	PA	<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
BASAGLAR KWIKPEN SOPN	2		<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ml daily)	Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ml daily)	<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
INSULIN ASPART FLEXPEN SOPN	1B		FARXIGA	2	QL(1 ea daily)
INSULIN ASPART PENFILL SOCT	1B		FARXIGA	2	QL(1 ea daily)
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1B		JARDIANCE	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
glipizide TABS 5 MG, 10 MG	1B	QL(4 ea daily)	Vomiting		
glipizide TB24	1B	QL(2 ea daily)	5-HT3 Receptor Antagonists		
glyburide micronized 1.5 MG, 3 MG, 6 MG	1B	QL(4 ea daily)	ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA
glyburide TABS	1B	QL(4 ea daily)	granisetron hcl SOLN IV 1 MG/ML	1B	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea			granisetron hcl TABS	1B	QL(0.34 ea daily)
Antiperistaltic Agents			ondansetron hcl SOLN IJ 4 MG/2ML	1B	
diphenoxylate w/ atropine LIQD	1B		ondansetron hcl SOLN OR 4 MG/5ML	1B	QL(3.34 ml daily)
diphenoxylate w/ atropine TABS	1B		ondansetron hcl SOSY	1B	
loperamide hcl CAPS	1B	RX/OTC	ondansetron hcl TABS 24 MG	1B	QL(0.143 ea daily)
MOTOFEN	3		ondansetron hcl TABS 8 MG	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
ANTIDOTES AND SPECIFIC ANTAGONISTS			ondansetron hcl TABS 4 MG	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
Antidotes - Chelating Agents			ondansetron TBDP 8 MG	1B	
CHEMET	3		ondansetron TBDP 4 MG	1B	QL(1 ea daily)
deferasirox PACK	4	PA	palonosetron hcl SOLN	1B	
deferasirox TABS	4	SP; PA	Antiemetics - Anticholinergic		
deferasirox TBSO	4	SP; PA	meclizine hcl TABS 12.5 MG	1A	RX/OTC
deferiprone TABS 500 MG	1B		meclizine hcl TABS 25 MG	1B	RX/OTC
Antidotes and Specific Antagonists			scopolamine	1B	QL(0.34 ea daily)
deferoxamine mesylate	4	PA	trimethobenzamide hcl CAPS	1B	
DESFERAL 500 MG (deferoxamine mesylate)	4	PA	Antiemetics - Miscellaneous		
VISTOGARD	4	PA	AKYNZEO	3	PA
Opioid Antagonists			AKYNZEO SOLR	4	PA
naloxone hcl LIQD	1B	QL(2 ea per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC			
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	1B				
naltrexone hcl	1B				
ANTIEMETICS - Drugs to Treat Nausea and					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 ea daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA	<i>itraconazole CAPS</i>	1B	QL(4 ea daily); PA			
<i>dronabinol CAPS</i>	1B		<i>itraconazole SOLN</i>	1B	QL(20 ml daily); PA			
Substance P/Neurokinin 1 (NK1) Receptor Antagonists								
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 ea daily); PA	<i>ketoconazole</i>	1B				
<i>aprepitant CAPS</i>	1B	PA	<i>NOXAFIL SUSP (posaconazole)</i>	3	QL(20 ml daily)			
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 ea daily); PA	<i>posaconazole SUSP</i>	1B	QL(20 ml daily)			
<i>aprepitant MISC</i>	1B	PA	<i>TOLSURA CAPS</i>	4	PA			
<i>VARUBI TBPK</i>	3	PA	<i>voriconazole TABS</i>	1B	QL(4 ea daily)			
ANTIFUNGALS - Drugs to Treat Fungal Infections								
Antifungal - Glucan Synthesis Inhibitors								
<i>caspofungin acetate</i>	1B		ANTIHISTAMINES - Drugs to Treat Allergies					
<i>ERAXIS</i>	3		Antihistamines - Alkylamines					
<i>micafungin sodium</i>	1B	PA	<i>dexchlorpheniramine maleate SOLN</i>	1B				
Antifungals			Antihistamines - Ethanolamines					
<i>ABELCET</i>	3		<i>carbinoxamine maleate SOLN</i>	1B				
<i>amphotericin b IV</i>	3		<i>carbinoxamine maleate TABS 4 MG</i>	1B				
<i>amphotericin b liposome</i>	3		<i>clemastine fumarate SYRP</i>	1B				
<i>flucytosine</i>	1B		<i>clemastine fumarate TABS 2.68 MG</i>	1B				
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)	<i>diphenhydramine hcl CAPS 50 MG</i>	1A				
<i>griseofulvin microsize TABS</i>	1B		<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B				
<i>griseofulvin ultramicrosize</i>	1B		<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1B				
<i>nystatin TABS</i>	1B		<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1B				
<i>terbinafine hcl TABS</i>	1B	QL(1 ea daily)	Antihistamines - Non-Sedating					
Imidazole-Related Antifungals								
<i>CRESEMBA CAPS 186 MG</i>	3	PA	<i>cetirizine hcl TABS</i>	1A	QL(1 ea daily)			
<i>fluconazole SUSR</i>	1B		<i>desloratadine TABS</i>	1B	QL(1 ea daily)			
<i>fluconazole TABS</i>	1B		<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 ea daily)			
			<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ml daily); RX/OTC			
			<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 ea daily); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
<i>loratadine CAPS</i>	1B	
<i>loratadine CHEW</i>	1B	
<i>loratadine SOLN</i>	1B	
<i>loratadine TABS</i>	1A	
<i>loratadine TBDP</i>	1B	
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	1B	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 ea daily)
<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>promethazine hcl TABS</i>	1B	
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1B	QL(4 ea daily)
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)
<i>cholestyramine PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)
<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	QL(1 ea daily)
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1B	QL(1 ea daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 ea daily)
<i>gemfibrozil TABS</i>	1B	QL(2 ea daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1B	QL(1 ea daily)
<i>fluvastatin sodium CAPS 40 MG</i>	3	QL(2 ea daily)
<i>fluvastatin sodium CAPS 20 MG</i>	3	QL(1 ea daily)
<i>lovastatin TABS 40 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(2 ea daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(1 ea daily); PV
<i>pravastatin sodium</i>	1B	QL(1 ea daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 ea daily)
<i>simvastatin TABS</i>	1B	QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	QL(1 ea daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 ea daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
<i>REPATHA PUSHTRONEX SYSTEM SOCT</i>	4	QL(0.25 ml daily); PA
<i>REPATHA SURECLICK SOAJ</i>	4	QL(0.0714 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
REPATHA SOSY	4	QL(0.0714 ml daily); PA	<i>clonidine</i>	3	QL(0.15 ea daily)		
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure					<i>clonidine hcl TABS</i>		
ACE Inhibitors					<i>doxazosin mesylate</i>		
<i>benazepril hcl</i>	1B		<i>guanfacine hcl</i>	1B			
<i>captopril 12.5 MG</i>	1B		<i>methyldopa TABS</i>	1B	QL(6 ea daily)		
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)	<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)		
<i>enalapril maleate TABS</i>	1B		<i>terazosin hcl</i>	1B			
<i>fosinopril sodium</i>	1B		Antihypertensive Combinations				
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B		<i>amlodipine besylate-benazepril hcl</i>	1B			
<i>moexipril hcl</i>	1B	QL(2 ea daily)	<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST		
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 ea daily)	<i>amlodipine besylate-valsartan</i>	1B	QL(1 ea daily)		
<i>perindopril erbumine 4 MG</i>	1B		<i>amlodipine-valsartan-hydrochlorothiazide</i>	3			
<i>quinapril hcl 20 MG, 40 MG</i>	1B		<i>atenolol & chlorthalidone</i>	1B			
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)	<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)		
<i>ramipril CAPS</i>	1B		<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B			
<i>trandolapril 4 MG</i>	1B	QL(2 ea daily)	<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 ea daily)		
<i>trandolapril 1 MG, 2 MG</i>	1B	QL(1 ea daily)	<i>candesartan cilexetil-hydrochlorothiazide</i>	1B			
Agents for Pheochromocytoma					<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>		
<i>phenoxybenzamine hcl</i>	3	PA	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)		
Angiotensin II Receptor Antagonists					<i>fosinopril sodium & hydrochlorothiazide</i>		
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)	<i>irbesartan-hydrochlorothiazide</i>	1B			
<i>EDARBI</i>	3	QL(1 ea daily); ST	<i>lisinopril & hydrochlorothiazide</i>	1B			
<i>irbesartan</i>	1B	QL(1 ea daily)					
<i>losartan potassium</i>	1B	QL(1 ea daily)					
<i>olmesartan medoxomil</i>	1B	QL(1 ea daily)					
<i>telmisartan</i>	1B	QL(1 ea daily)					
<i>valsartan TABS</i>	1B	QL(1 ea daily)					
Antiadrenergic Antihypertensives							

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	QL(2 ea daily)	Selective Aldosterone Receptor Antagonists (SARAs)		
<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	QL(1 ea daily)	<i>eplerenone</i>	1B	
<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)	Vasodilators		
<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B		<i>hydralazine hcl SOLN</i>	1B	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST	<i>hydralazine hcl TABS</i>	1B	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B		<i>minoxidil 2.5 MG, 10 MG</i>	1B	
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 ea daily)	ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 ea daily)	Anti-infective Agents - Misc.		
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 ea daily)	<i>bacitracin</i>	3	
<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)	<i>IMPAVIDO</i>	3	QL(3 ea daily); PA
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)	<i>metronidazole TABS</i>	1B	
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3		<i>trimethoprim TABS</i>	1B	
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 ea daily)	<i>XIFAXAN 550 MG</i>	3	QL(3 ea daily); AL(At least 12 yrs old); PA
<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)	<i>XIFAXAN 200 MG</i>	3	QL(3 ea daily; 9 ea per 3 day(s) retail; 9 ea per 3 days mail); AL(At least 12 yrs old); PA
Antihypertensives - Misc.			Anti-infective Misc. - Combinations		
VECAMYL	3	PA	<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
Direct Renin Inhibitors			<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>aliskiren fumarate</i>	1B	QL(1 ea daily)	<i>sulfamethoxazole-trimethoprim TABS</i>	1A	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
<i>imipenem-cilastatin IV</i>	1B		Polymyxins					
<i>meropenem</i>	1B		<i>polymyxin b sulfate SOLR</i>	1B				
Chloramphenicols								
<i>chloramphenicol sodium succinate</i>	4	SP; PA	Urinary Anti-infectives					
Cyclic Lipopeptides								
<i>daptomycin 500 MG</i>	1B		<i>fosfomycin tromethamine</i>	1B				
Glycopeptides			<i>methenamine hippurate</i>	1B				
<i>vancomycin hcl CAPS</i>	1B	QL(4 ea daily; 40 ea per fill retail)	<i>nitrofurantoin</i>	1B				
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)	<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B				
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B		<i>nitrofurantoin monohyd macro</i>	1B				
Leprostatics								
<i>dapsone</i>	3		ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)					
Lincosamides								
<i>clindamycin hcl</i>	1B		Antimalarial Combinations					
<i>clindamycin palmitate hydrochloride</i>	1B		<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail			
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B		<i>COARTEM</i>	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 ea per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail			
<i>lincomycin hcl</i>	1B		Antimalarials					
Monobactams			<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)			
<i>aztreonam 1 GM</i>	1B		<i>chloroquine phosphate TABS 500 MG</i>	1B				
<i>CAYSTON</i>	4	QL(3 ml daily); PA						
Oxazolidinones								
<i>linezolid SUSR</i>	1B							
<i>linezolid TABS</i>	1B	QL(2 ea daily); PA						
<i>SIVEXTRO TABS</i>	3	PA						

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
hydroxychloroquine sulfate 400 MG	1B	QL(1 ea daily)	isoniazid SYRP	1B	
hydroxychloroquine sulfate 200 MG	1B	QL(3 ea daily)	isoniazid TABS	1B	
hydroxychloroquine sulfate 100 MG	1B	QL(4 ea daily)	PASER PACK	3	QL(3 ea daily)
KRINTAFEL	3	QL(2 ea per 30 day(s) retail)	PRIFTIN	3	
mefloquine hcl	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	pyrazinamide	1B	
primaquine phosphate TABS	3		rifabutin	1B	PA
pyrimethamine	1B	QL(3 ea daily); PA	rifampin CAPS	1B	
quinine sulfate CAPS 324 MG	1B	PA	rifampin SOLR	1B	
ANTIMYASTHENIC/CHOLINERGIC AGENTS					
Antimyasthenic/Cholinergic Agents					
FIRDAPSE	4	PA	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
neostigmine methylsulfate SOSY	3	PA	Alkylating Agents		
pyridostigmine bromide SOLN OR	1B		BELRAPZO SOLN	4	PA
pyridostigmine bromide TABS 60 MG	1B		bendamustine hcl SOLR	4	SP; PA
pyridostigmine bromide TBCR	1B		BENDAMUSTINE HYDROCHLORIDE SOLN	4	PA
ANTIMYCOPATHIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)			BENDEKA SOLN	4	PA
Antimycobacterial Agents			busulfan SOLN	4	SP; PA
cycloserine	1B	QL(4 ea daily)	carboplatin SOLN 50 MG/5ML	4	SP; PA
ethambutol hcl TABS	1B		carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML	4	PA
isoniazid SOLN	1B		carmustine	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	<i>gemcitabine hcl SOLR 1 GM</i>	4	PA	
<i>ifosfamide SOLR</i>	4	SP; PA	<i>gemcitabine hcl SOLR 2 GM</i>	4	PA	
IFOSFAMIDE SOLR	4	PA	<i>gemcitabine hcl SOLR 200 MG</i>	4	SP; PA	
LEUKERAN	4	SP; PA	<i>mercaptopurine TABS</i>	1B		
<i>melphalan</i>	1B		<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B		
<i>melphalan hcl IV</i>	1B		<i>methotrexate sodium SOLR</i>	1B	SP	
MYLERAN TABS	4	SP; PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP	
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA	<i>nelarabine</i>	4	SP; PA	
TEMODAR SOLR	4	SP; PA	<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA	
<i>temozolomide CAPS</i>	4	SP; PA	<i>pemetrexed disodium SOLR 100 MG</i>	4	PA	
TEPADINA 100 MG (thiotepa)	4	PA	<i>pralatrexate</i>	4	PA	
<i>thiotepa 100 MG</i>	4	PA	TABLOID	4	SP; PA	
<i>thiotepa 15 MG</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA	
VIVIMUSTA SOLN	4	PA	Antineoplastic - Angiogenesis Inhibitors			
YONDELIS	4	PA	CYRAMZA	4	PA	
ZANOSAR	4	SP; PA	INLYTA	4	QL(2 ea daily); SP; PA	
Antimetabolites						
ALIMTA SOLR 100 MG (pemetrexed disodium)	4	PA	LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA	
azacitidine SUSR	4	SP; PA	LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA	
capecitabine	4	SP; PA	LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA	
cladribine 10 MG/10ML	4	PA	LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA	
clofarabine	4	SP; PA	LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA	
cytarabine SOLN	4	SP; PA	LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA	
decitabine	4	SP; PA	LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA	
floxuridine	4	SP; PA				
fludarabine phosphate SOLN	4	SP; PA				
fludarabine phosphate SOLR	4	SP; PA				
fluorouracil 1 GM/20ML, 2.5 GM/50ML, 5 GM/100ML	4	PA				
fluorouracil 500 MG/10ML	4	SP; PA				
FOLOTYN 40 MG/2ML	4	PA				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA	<i>erlotinib hcl</i>	4	QL(1 ea daily); SP; PA			
MVASI	4	PA	<i>gefitinib</i>	4	QL(2 ea daily); PA			
ZALTRAP 100 MG/4ML	4	SP; PA	GILOTrif	4	QL(1 ea daily); PA			
ZIRABEV	4	PA	IRESSA (<i>gefitinib</i>)	4	QL(2 ea daily); PA			
Antineoplastic - Antibodies								
ADCETRIS	4	SP; PA	PORTRAZZA	4	PA			
ARZERRA	4	SP; PA	TAGRISSO 80 MG	4	QL(1 ea daily); PA			
BAVENCIO	4	PA	TAGRISSO 40 MG	4	QL(2 ea daily); PA			
BESPONSA	4	PA	VECTIBIX 100 MG/5ML	4	SP; PA			
BLINCYTO	4	PA	VECTIBIX 400 MG/20ML	4	PA			
DARZALEX	4	PA	VIZIMPRO	4	QL(1 ea daily); PA			
EMPLICITI	4	PA	Antineoplastic - Hedgehog Pathway Inhibitors					
GAZYVA	4	PA	DAURISMO	4	PA			
IMFINZI	4	PA	ERIVEDGE	4	QL(1 ea daily); SP; PA			
KADCYLA	4	PA	ODOMZO	4	QL(1 ea daily); PA			
KEYTRUDA	4	PA	Antineoplastic - Hormonal and Related Agents					
LIBTAYO	4	PA	<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); SP; PA			
LUMOXITI	4	PA	<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); PA			
MYLOTARG	4	PA	<i>anastrozole</i>	1B	QL(1 ea daily)			
OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	4	PA	<i>bicalutamide</i>	1B	QL(1 ea daily); SP			
POTELIGEO	4	PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA			
RUXIENCE	4	PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA			
TECENTRIQ 1200 MG/20ML	4	PA	EMCYT	4	SP; PA			
TRUXIMA	4	PA	ERLEADA 60 MG	4	QL(4 ea daily); PA			
YEROVY	4	SP; PA	ERLEADA 240 MG	4	QL(1 ea daily); PA			
Antineoplastic - Anti-HER2 Agents			<i>exemestane</i>	4	QL(1 ea daily); SP			
KANJINTI	4	PA	FIRMAGON	4	QL(0.143 ea daily); SP; PA			
OGIVRI	4	PA						
PERJETA	4	SP; PA						
TRAZIMERA	4	PA						
TUKYSA	4	PA						
Antineoplastic - EGFR Inhibitors								
ERBITUX	4	SP; PA						

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>flutamide</i>	4	QL(6 ea daily); SP; PA	Antineoplastic - XPO1 Inhibitors		
<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); SP; PA	XPOVIO	4	PA
<i>letrozole</i>	1B		XPOVIO 60 MG TWICE WEEKLY	4	PA
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA	XPOVIO 80 MG TWICE WEEKLY	4	PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 ea daily); SP; PA	Antineoplastic Antibiotics		
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA	<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); SP; PA	<i>dactinomycin</i>	4	SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); SP; PA	DAUNORUBICIN HYDROCHLORIDE SOLN 50 MG/10ML	4	PA
LYSODREN	4	SP; PA	<i>doxorubicin hcl liposomal</i>	4	SP; PA
<i>megestrol acetate SUSP</i>	1B		<i>doxorubicin hcl SOLN</i>	4	SP; PA
<i>megestrol acetate TABS</i>	1B		<i>doxorubicin hcl SOLR 10 MG</i>	4	PA
<i>nilutamide</i>	1B	QL(2 ea daily)	<i>doxorubicin hcl SOLR 50 MG</i>	4	SP; PA
NUBEQA	4	QL(4 ea daily); PA	<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>tamoxifen citrate TABS</i>	0		<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA
<i>tamoxifen citrate TABS</i>	0		<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA
<i>toremifene citrate</i>	1B		<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA
TRELSTAR MIXJECT	4	SP; PA	<i>valrubicin</i>	4	SP; PA
XTANDI CAPS	4	QL(4 ea daily); SP; PA	Antineoplastic Combinations		
XTANDI TABS 40 MG	4	QL(4 ea daily); PA	KISQALI FEMARA 200 DOSE	4	PA
XTANDI TABS 80 MG	4	QL(2 ea daily); PA	KISQALI FEMARA 400 DOSE	4	PA
YONSA	4	QL(4 ea daily); PA	KISQALI FEMARA 600 DOSE	4	PA
ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); SP; PA	VYXEOS	4	PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA	Antineoplastic Enzyme Inhibitors		
Antineoplastic - Immunomodulators			ALECENSA	4	QL(4 ea daily); PA
POMALYST	4	QL(1 ea daily); PA	ALUNBRIG TABS	4	QL(1 ea daily); PA
Antineoplastic - PDGFR-alpha Inhibitors					
AYVAKIT	4	QL(1 ea daily); PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALUNBRIG TBPK	4	QL(1 ea daily); PA	INREBIC	4	PA
BALVERSA	4	PA	JAKAFI	4	QL(2 ea daily); SP; PA
BELEODAQ	4	PA	KISQALI	4	PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	KOSELUGO	4	PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	KYPROLIS	4	PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	LORBRENA	4	QL(1 ea daily); PA
BRAFTOVI 75 MG	4	SP; PA	LYNPARZA TABS	4	QL(4 ea daily); PA
BRUKINSA	4	PA	MEKINIST TABS	4	PA
CABOMETYX TABS	4	QL(1 ea daily); PA	MEKTOVI	4	SP; PA
CALQUENCE	4	QL(2 ea daily); PA	NINLARO	4	QL(0.143 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
CAPRELSA	4	QL(1 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	PIQRAY 200MG DAILY DOSE	4	PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	PIQRAY 250MG DAILY DOSE	4	PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	PIQRAY 300MG DAILY DOSE	4	PA
COPIKTRA	4	PA	QINLOCK	4	PA
<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA	RETEVMO	4	PA
IBRANCE CAPS	4	QL(1 ea daily); PA	<i>romidepsin SOLR</i>	4	SP; PA
IBRANCE TABS	4	QL(1 ea daily); PA	ROZLYTREK CAPS	4	PA
ICLUSIG	4	QL(1 ea daily); PA	RUBRACA	4	QL(4 ea daily); PA
<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA	SCEMBLIX 100 MG	4	QL(4 ea daily); PA
IMBRUWICA CAPS 70 MG	4	QL(1 ea daily); PA	SCEMBLIX 40 MG	4	QL(10 ea daily); PA
IMBRUWICA CAPS 140 MG	4	QL(3 ea daily); PA	SCEMBLIX 20 MG	4	QL(2 ea daily); PA
IMBRUWICA SUSP	4	QL(8 ml daily); PA	<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA
IMBRUWICA TABS	4	QL(1 ea daily); PA	SPRYCEL	4	QL(1 ea daily); SP; PA
			STIVARGA	4	QL(4 ea daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
sunitinib malate 12.5 MG, 25 MG, 50 MG	4	QL(1 ea daily); SP; PA	ACTIMMUNE 100 MCG/0.5ML	4	SP; PA	
sunitinib malate 37.5 MG	4	QL(1 ea daily); PA	arsenic trioxide 10 MG/10ML	4	SP; PA	
TABRECTA	4	PA	bexarotene	4	SP; PA	
TAFINLAR CAPS	4	PA	dacarbazine SOLR 200 MG	4	SP; PA	
TALZENNA	4	QL(1 ea daily); PA	hydroxyurea	1B		
TALZENNA	4	QL(1 ea daily); PA	INTRON A SOLR 18000000 UNIT	4	SP; PA	
TASIGNA 50 MG	4	QL(4 ea daily); PA	MATULANE	4	SP; PA	
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA	NIPENT	4	SP; PA	
TAZVERIK	4	PA	PHOTOFRIN	4	SP; PA	
temsirolimus	4	QL(0.143 ml daily); SP; PA	PROLEUKIN	4	SP; PA	
TIBSOVO	4	PA	SYNRIBO	4	SP; PA	
TURALIO	4	AC; PA	TICE BCG	4	PA	
TURALIO	4	PA	tretinoin (chemotherapy)	1B		
VERZENIO	4	PA	UVADEX	4	SP; PA	
VITRAKVI CAPS	4	PA	Chemotherapy Adjuncts			
VITRAKVI SOLN	4	PA	ELITEK	4	PA	
VOTRIENT (pazopanib hcl)	4	QL(4 ea daily); SP; PA	KEPIVANCE 6.25 MG	4	SP; PA	
XALKORI CAPS	4	QL(2 ea daily); SP; PA	Chemotherapy Rescue/Antidote/Protective Agents			
XOSPATA	4	PA	KHAPZORY	4	PA	
ZEJULA CAPS	4	QL(3 ea daily); PA	leucovorin calcium SOLR	1B		
ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA	leucovorin calcium TABS	1B		
ZEJULA TABS 100 MG	4	QL(3 ea daily); PA	mesna SOLN	4	PA	
ZELBORAF	4	SP; PA	MESNEX SOLN (mesna)	4	PA	
ZOLINZA	4	QL(4 ea daily); SP; PA	VORAXAZE	4	SP; PA	
ZYDELIG	4	QL(2 ea daily); PA	Mitotic Inhibitors			
Antineoplastic Enzymes			docetaxel CONC 20 MG/ML	4	SP; PA	
ONCASPAR	4	SP; PA	docetaxel SOLN 20 MG/2ML	4	SP; PA	
Antineoplastics Misc.			eribulin mesylate	4	SP; PA	
			ETOPOPHOS	4	SP; PA	
			etoposide CAPS	4	SP; PA	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA	Antiparkinson Anticholinergics		
<i>HALAVEN (eribulin mesylate)</i>	4	SP; PA	<i>benztropine mesylate SOLN</i>	1B	
<i>IXEMPRA KIT 15 MG</i>	4	SP; PA	<i>benztropine mesylate TABS</i>	1B	
<i>IXEMPRA KIT 45 MG</i>	4	PA	<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>JEVTANA</i>	4	SP; PA	<i>trihexyphenidyl hcl TABS</i>	1B	
<i>paclitaxel 6 MG/ML, 30 MG/5ML, 300 MG/50ML</i>	4	PA	Antiparkinson COMT Inhibitors		
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA	<i>entacapone</i>	1B	QL(8 ea daily)
<i>paclitaxel protein-bound particles</i>	4	SP; PA	<i>TASMAR (tolcapone)</i>	3	
<i>vincristine sulfate</i>	4	SP; PA	<i>tolcapone</i>	3	
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA	Antiparkinson Dopaminergics		
<i>vinorelbine tartrate 50 MG/5ML</i>	4	PA	<i>amantadine hcl CAPS</i>	1B	
Oncolytic Viral Agents			<i>amantadine hcl SOLN</i>	1B	
<i>IMLYGIC</i>	4	PA	<i>amantadine hcl TABS</i>	1B	
Topoisomerase I Inhibitors			<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>CAMPTOSAR 300 MG/15ML (irinotecan hcl)</i>	4	PA	<i>bromocriptine mesylate CAPS</i>	1B	
<i>HYCAMTIN CAPS</i>	4	SP; PA	<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA	<i>carbidopa-levodopa-entacapone</i>	1B	
<i>irinotecan hcl 300 MG/15ML</i>	4	PA	<i>carbidopa-levodopa TABS</i>	1B	
<i>ONIVYDE</i>	4	PA	<i>carbidopa-levodopa TBCR</i>	1B	
<i>topotecan hcl SOLN</i>	4	PA	<i>carbidopa-levodopa TBDP</i>	1B	
<i>TOPOTECAN HCL SOLN</i>	4	PA	<i>NEUPRO</i>	2	
<i>topotecan hcl SOLR</i>	4	SP; PA	<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
Antiparkinson Adjunctive Therapy			<i>ropinirole hydrochloride TABS</i>	1B	
<i>carbidopa</i>	1B		<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST	<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA
Antiparkinson Monoamine Oxidase Inhibitors					
<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA	<i>risperidone SOLN</i>	1B	QL(8 ml daily)
<i>selegiline hcl CAPS</i>	1B		<i>risperidone TABS</i>	1B	QL(4 ea daily)
<i>selegiline hcl TABS</i>	1B		<i>risperidone TBDP</i>	1B	QL(4 ea daily)
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders					
Antimanic Agents					
<i>lithium</i>	1B		Butyrophenones		
<i>lithium carbonate CAPS</i>	1B		<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)
<i>lithium carbonate TABS</i>	1B		<i>haloperidol lactate CONC</i>	1B	
<i>lithium carbonate TBCR</i>	1B		<i>haloperidol lactate SOLN</i>	1B	
Antipsychotics - Misc.			<i>haloperidol TABS</i>	1B	
<i>EQUETRO 100 MG</i>	3	QL(2 ea daily); ST	Dibenzapines		
<i>EQUETRO 300 MG</i>	3	QL(4 ea daily); ST	<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA
<i>EQUETRO 200 MG</i>	3	QL(8 ea daily); ST	<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)	<i>clozapine TABS</i>	1B	
<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)	<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)	<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
Benzisoxazoles			<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)
<i>FANAPT</i>	2	QL(2 ea daily); PA	<i>loxapine succinate</i>	1B	
<i>FANAPT TITRATION PACK</i>	2	PA	<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)	<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)
<i>PERSERIS PRSY</i>	2	QL(0.072 ea daily); PA	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
<i>RISPERDAL CONSTA (risperidone microspheres)</i>	2	QL(0.072 ea daily); PA	<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)
			<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)
			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)
			<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
			<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Phenothiazines					
<i>chlorpromazine hcl SOLN</i>	3		COMPLERA	2	QL(1 ea daily)
<i>chlorpromazine hcl TABS</i>	1B		<i>darunavir TABS 800 MG</i>	1B	QL(1 ea daily)
<i>fluphenazine hcl CONC</i>	1B		<i>darunavir TABS 600 MG</i>	1B	QL(2 ea daily)
<i>fluphenazine hcl ELIX</i>	1B		DELSTRIGO	2	QL(1 ea daily)
<i>fluphenazine hcl SOLN</i>	1B		DESCOVY 200 MG-25 MG	2	QL(1 ea daily); PA
<i>fluphenazine hcl TABS</i>	1B		DOVATO	2	QL(1 ea daily)
<i>perphenazine TABS</i>	1B		EDURANT	2	QL(1 ea daily)
<i>prochlorperazine</i>	1B		<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>prochlorperazine maleate TABS</i>	1B		<i>efavirenz CAPS 50 MG</i>	1B	QL(3 ea daily)
<i>thioridazine hcl</i>	1B		<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>trifluoperazine hcl TABS</i>	1B		<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
Quinolinone Derivatives					
<i>ariPIPRAZOLE SOLN OR</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)	<i>efavirenz TABS</i>	1B	QL(1 ea daily)
<i>ariPIPRAZOLE TABS</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)	<i>emtricitabine CAPS</i>	1B	QL(1 ea daily)
REXULTI	3	PA	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)
Thioxanthenes					
<i>thiothixene</i>	1B		<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
ANTIVIRALS - Drugs to Treat Viral Infections					
Antiretrovirals					
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)	<i>EMTRIVA CAPS (emtricitabine)</i>	2	QL(1 ea daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)	<i>EMTRIVA SOLN</i>	2	QL(24 ml daily)
<i>abacavir sulfate TABS</i>	1B		<i>EPIVIR SOLN (lamivudine)</i>	3	QL(30 ml daily)
<i>APTIVUS CAPS</i>	2	QL(4 ea daily)	<i>EPIVIR TABS 150 MG (lamivudine)</i>	3	QL(2 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)	<i>EPIVIR TABS 300 MG (lamivudine)</i>	3	QL(1 ea daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)	<i>EPZICOM (abacavir sulfate-lamivudine)</i>	2	QL(1 ea daily)
<i>BIKTARVY</i>	2	QL(1 ea daily)	<i>etravirine 200 MG</i>	1B	QL(2 ea daily)
<i>CIMDUO</i>	2	QL(1 ea daily)	<i>etravirine 100 MG</i>	1B	QL(4 ea daily)
<i>COMBIVIR (lamivudine-zidovudine)</i>	3		<i>EVOTAZ</i>	2	QL(1 ea daily)
			<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FUZEON SOLR	4	SP; PA	PREZCOBIX	2	QL(1 ea daily)
GENVOYA	2	QL(1 ea daily)	PREZISTA SUSP	2	QL(12 ml daily)
INTELENCE 100 MG <i>(etravirine)</i>	2	QL(4 ea daily)	PREZISTA TABS 75 MG, 150 MG, 600 MG	2	QL(2 ea daily)
INTELENCE 25 MG	2	QL(8 ea daily)	PREZISTA TABS 800 MG <i>(darunavir)</i>	2	QL(1 ea daily)
INTELENCE 200 MG <i>(etravirine)</i>	2	QL(2 ea daily)	PREZISTA TABS <i>(darunavir)</i>	2	QL(2 ea daily)
ISENTRESS HD TABS	2	QL(2 ea daily)	RETROVIR IV INFUSION SOLN	1B	
ISENTRESS CHEW	2	QL(6 ea daily)	RETROVIR CAPS <i>(zidovudine)</i>	3	
ISENTRESS PACK	2	QL(8 ea daily)	RETROVIR SYRP <i>(zidovudine)</i>	3	
ISENTRESS TABS	2	QL(2 ea daily)	REYATAZ CAPS 300 MG <i>(atazanavir sulfate)</i>	3	QL(1 ea daily)
JULUCA	2	QL(1 ea daily)	REYATAZ CAPS 200 MG <i>(atazanavir sulfate)</i>	3	QL(2 ea daily)
KALETRA SOLN <i>(lopinavir-ritonavir)</i>	3	QL(12.5 ml daily)	REYATAZ PACK	2	
KALETRA TABS <i>(lopinavir-ritonavir)</i>	2	QL(4 ea daily)	ritonavir TABS	1B	QL(12 ea daily)
lamivudine SOLN	1B	QL(30 ml daily)	RUKOBIA	2	PA
lamivudine TABS 300 MG	1B	QL(1 ea daily)	SELZENTRY SOLN	2	QL(30 ml daily)
lamivudine TABS 150 MG	1B	QL(2 ea daily)	SELZENTRY TABS 25 MG, 75 MG	2	QL(2 ea daily)
lamivudine-zidovudine	1B		SELZENTRY TABS 150 MG <i>(maraviroc)</i>	3	QL(2 ea daily)
LEXIVA SUSP	2	QL(56 ml daily)	SELZENTRY TABS 300 MG <i>(maraviroc)</i>	3	QL(4 ea daily)
LEXIVA TABS <i>(fosamprenavir calcium)</i>	3	QL(4 ea daily)	stavudine CAPS	1B	QL(2 ea daily)
lopinavir-ritonavir SOLN	1B	QL(12.5 ml daily)	STRIBILD	2	QL(1 ea daily)
lopinavir-ritonavir TABS	1B	QL(4 ea daily)	SUNLENCA TBPK	3	
maraviroc TABS 150 MG	1B	QL(2 ea daily)	SUSTIVA CAPS 50 MG <i>(efavirenz)</i>	3	QL(3 ea daily)
maraviroc TABS 300 MG	1B	QL(4 ea daily)	SUSTIVA CAPS 200 MG <i>(efavirenz)</i>	3	QL(2 ea daily)
nevirapine SUSP	1B	QL(40 ml daily)	SUSTIVA TABS <i>(efavirenz)</i>	3	QL(1 ea daily)
nevirapine TABS	1B		SYMFI <i>(efavirenz-lamivudine-tenofovir disoproxil fumarate)</i>	2	QL(1 ea daily)
nevirapine TB24 100 MG	1B	QL(3 ea daily)			
nevirapine TB24 400 MG	1B	QL(1 ea daily)			
NORVIR CAPS	2	QL(12 ea daily)			
NORVIR PACK	2	QL(12 ea daily)			
NORVIR SOLN	2	QL(15 ml daily)			
NORVIR TABS <i>(ritonavir)</i>	3	QL(12 ea daily)			
ODEFSEY	2	QL(1 ea daily)			
PIFELTRO	2	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
SYMF1 LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	2	QL(1 ea daily)	entecavir TABS	4	QL(1 ea daily); SP; PA	
SYMTUZA	2	QL(1 ea daily)	EPIVIR HBV SOLN	2	QL(60 ml daily); SP; PA	
<i>tenofovir disoproxil fumarate TABS</i>	1B		EPIVIR HBV TABS (<i>lamivudine (hbv)</i>)	3	QL(3 ea daily); SP	
TIVICAY PD TBSO	2		HEPSERA (<i>adefovir dipivoxil</i>)	4	QL(1 ea daily); SP; PA	
TIVICAY TABS	2	QL(2 ea daily)	<i>lamivudine (hbv) TABS</i>	1B	QL(3 ea daily); SP	
TRIUMEQ PD TBSO	2		PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA	
TRIUMEQ TABS	2	QL(1 ea daily)	PEGASYS SOSY	4	QL(0.072 ml daily); PA	
TRIZIVIR	3	QL(2 ea daily)	<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 ea daily)	
TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	3	QL(1 ea daily)	<i>ribavirin (hepatitis c) TABS 200 MG</i>	1B	QL(7 ea daily)	
TYBOST	2	QL(1 ea daily)	SOFOSBUVIR/VELPATA SVIR TABS	1B	QL(1 ea daily); PA	
VIRACEPT TABS 250 MG	2	QL(10 ea daily)	Herpes Agents			
VIRACEPT TABS 625 MG	2	QL(4 ea daily)	<i>acyclovir CAPS</i>	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)	
VIREAD POWD	2	QL(7.5 gm daily)	<i>acyclovir SUSP</i>	1B	QL(13.34 ml daily)	
VIREAD TABS 150 MG, 200 MG, 250 MG	2	QL(1 ea daily)	<i>acyclovir TABS OR famciclovir 500 MG</i>	1B	QL(5 ea daily)	
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	2		<i>famciclovir 125 MG, 250 MG</i>	1B	QL(4 ea daily)	
ZIAGEN SOLN (<i>abacavir sulfate</i>)	3	QL(32 ml daily)	<i>valacyclovir hcl 1 GM, 1000 MG</i>	1B	QL(3 ea daily)	
ZIAGEN TABS (<i>abacavir sulfate</i>)	3		<i>valacyclovir hcl 500 MG</i>	1B	QL(4 ea daily)	
<i>zidovudine CAPS</i>	1B		Influenza Agents			
<i>zidovudine SYRP</i>	1B		<i>oseltamivir phosphate CAPS</i>	1B	QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	
<i>zidovudine TABS</i>	1B					
CMV Agents						
<i>cidofovir</i>	3					
<i>ganciclovir sodium SOLR</i>	1B					
<i>valganciclovir hcl TABS</i>	1B	QL(4 ea daily); PA				
Hepatitis Agents						
<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP; PA				
BARACLUDE SOLN	4	QL(20 ml daily); SP; PA				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate</i> SUSR	1B	Limit 1 fill every 90 days.; QL(125 ml per fill retail); 1 max fill(s) per 90 day(s) retail	<i>nadolol TABS 80 MG</i>	1B	
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>rimantadine hydrochloride</i> TABS	1B	QL(2 ea daily)	<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
BETA BLOCKERS - Drugs to Treat High Blood Pressure			<i>pindolol TABS</i>	1B	
Alpha-Beta Blockers			<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>carvedilol</i>	1B		<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>carvedilol phosphate</i>	3	QL(1 ea daily)	<i>propranolol hcl TABS</i>	1B	
<i>labetalol hcl SOLN</i>	1B		<i>sotalol hcl (afib/afl)</i>	1B	
<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 ea daily)	<i>sotalol hcl TABS 240 MG</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B		<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
Beta Blockers Cardio-Selective			<i>timolol maleate TABS</i>	1B	
<i>acebutolol hcl CAPS</i>	1B		CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>atenolol TABS</i>	1B		Calcium Channel Blockers		
<i>betaxolol hcl</i>	1B		<i>amlodipine besylate TABS</i>	1B	
<i>bisoprolol fumarate</i>	1B		<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B		<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)
<i>metoprolol succinate TB24 200 MG</i>	1B	QL(2 ea daily)	<i>diltiazem hcl extended release beads</i>	1B	
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B		<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B		<i>diltiazem hcl CP24</i>	1B	
<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)	<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)	<i>DILTIAZEM HCL SOLR</i>	1B	
Beta Blockers Non-Selective			<i>diltiazem hcl TABS</i>	1B	
HEMANGEOL SOLN OR	4	QL(75 ml daily); PA	<i>diltiazem hcl TB24</i>	1B	
			<i>felodipine</i>	1B	
			<i>isradipine CAPS</i>	1B	
			<i>nicardipine hcl CAPS</i>	1B	
			<i>nicardipine hcl SOLN</i>	1B	
			<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)
			<i>nifedipine CAPS 10 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>nifedipine TB24</i>	1B		<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA	
<i>nifedipine TB24 60 MG</i>	1B	QL(2 ea daily)	Prostaglandin Vasodilators			
<i>nifedipine TB24 90 MG</i>	1B	QL(1 ea daily)	<i>epoprostenol sodium</i>	4	PA	
<i>nimodipine CAPS</i>	1B		<i>ORENITRAM TBCR</i>	4	PA	
<i>nisoldipine</i>	1B		<i>treprostinil SOLN IJ</i>	4	SP; PA	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)	<i>TYVASO REFILL SOLN IN</i>	4	PA	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B		<i>TYVASO STARTER SOLN IN</i>	4	PA	
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B		<i>TYVASO SOLN IN</i>	4	PA	
<i>verapamil hcl TABS</i>	1B		Pulmonary Hypertension - Endothelin Receptor Antagonists			
<i>verapamil hcl TBCR</i>	1B		<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA	
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm			<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA	
Cardiac Glycosides			<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA	
<i>digoxin SOLN OR 0.05 MG/ML</i>	1B		<i>OPSUMIT</i>	4	QL(1 ea daily); PA	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B		<i>TRACLEER TBSO</i>	4	QL(2 ea daily); PA	
<i>LANOXIN SOLN IJ (digoxin)</i>	2		Pulmonary Hypertension - Phosphodiesterase Inhibitors			
<i>LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)</i>	2		<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); SP; PA	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions			<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ml daily); PA	
Cardiovascular Agents Misc. - Combinations			<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA	
<i>amlodipine besylate- atorvastatin calcium</i>	1B	QL(1 ea daily)	<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA	
<i>isosorbide dinitrate- hydralazine hcl</i>	1B		Pulmonary Hypertension - Prostacyclin Receptor Agonist			
Impotence Agents						
<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA				
<i>STENDRA</i>	3	QL(0.134 ea daily)				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TITRATION PACK TBPK	4	1 max fill(s) per 180 day(s) retail; PA	<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA	<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
UPTRAVI TABS 200 MCG	4	PA	<i>cefprozil SUSR</i>	1B	
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator			<i>cefprozil TABS</i>	1B	
ADEMPAS	4	QL(3 ea daily); PA	<i>cefuroxime axetil TABS</i>	1B	
Sinus Node Inhibitors			<i>cefuroxime sodium IJ 750 MG</i>	1B	
CORLANOR SOLN	3	QL(15 ml daily); PA	Cephalosporins - 3rd Generation		
CORLANOR TABS	3	QL(2 ea daily); PA	<i>cefdinir CAPS</i>	1B	
<i>ivabradine hcl TABS</i>	1B	QL(2 ea daily); PA	<i>cefdinir SUSR</i>	1B	
Transthyretin Stabilizers			<i>cefixime CAPS</i>	1B	
VYNDAMAX	4	QL(1 ea daily); PA	<i>cefixime SUSR</i>	1B	ST
VYNDAQEL	4	QL(4 ea daily); PA	<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections			<i>cefpodoxime proxetil SUSR</i>	1B	
Cephalosporins - 1st Generation			<i>cefpodoxime proxetil TABS</i>	1B	
<i>cefadroxil CAPS</i>	1B		<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
<i>cefadroxil SUSR</i>	1B		<i>ceftriaxone sodium IJ 250 MG</i>	1A	
<i>cefadroxil TABS</i>	1B		<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B		Cephalosporins - 4th Generation		
<i>cephalexin CAPS</i>	1B		<i>cefepime hcl SOLR IV 2 GM</i>	1B	
<i>cephalexin SUSR</i>	1B		Cephalosporins - 5th Generation		
Cephalosporins - 2nd Generation			TEFLARO	3	
<i>cefaclor CAPS</i>	1B		CONTRACEPTIVES - Drugs to Prevent Pregnancy		
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B		Combination Contraceptives - Oral		
			<i>BALCOLTRA (levonorgestrel-ethynodiol-estradiol-iron)</i>	0	
			<i>desogestrel & ethynodiol estradiol</i>	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0		<i>norgestimate-ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>drosipirenone-ethinyl estradiol</i>	0		<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
<i>drosipirenone-ethinyl estradiol-levomefolate calcium</i>	0		TYBLUME CHEW	0	
<i>ethynodiol diacet & eth estrad</i>	0		Combination Contraceptives - Transdermal		
<i>levonorgestrel & eth estradiol TABS</i>	0		<i>norelgestromin-ethinyl estradiol</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0		TWIRLA	0	QL(3 ea per 28 day(s) retail)
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0		Combination Contraceptives - Vaginal		
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0		ANNOVERA	0	PA
<i>levonorgestrel-ethinyl estradiol-iron</i>	0		<i>etongestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
LO LOESTRIN FE TABS	0		Emergency Contraceptives		
NATAZIA	0		ELLA	0	
NEXTSTELLIS	0		<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
<i>norethrin acet & estrad-fe CAPS</i>	0		Progestin Contraceptives - Injectable		
<i>norethrin acet & estrad-fe CHEW</i>	0		DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>norethrin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>norethindrone & eth estradiol</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>norethindrone & ethinyl estradiol-fe</i>	0		Progestin Contraceptives - Oral		
<i>norethindrone acet & eth estra</i>	0		<i>norethindrone (contraceptive)</i>	0	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0		OPILL	0	
<i>norethindrone-eth estradiol (triphasic)</i>	0		SLYND	0	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
deflazacort SUSP	4	PA	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	1A		
deflazacort TABS	4	PA	prednisone TABS 1 MG, 5 MG	1B		
DEPO-MEDROL SUSP	3		prednisone TBPK	1B		
DEXAMETHASONE INTENSOL CONC	1B		SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail	
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	1B		SOLU-CORTEF 250 MG	3		
dexamethasone sodium phosphate SOSY IJ 4 MG/ML	1B		SOLU-MEDROL 2 GM	3		
dexamethasone ELIX	1B		triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	1B		
dexamethasone SOLN	1B		Mineralocorticoids			
dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	1B		fludrocortisone acetate TABS	1B		
dexamethasone TABS 0.5 MG, 0.75 MG	1A		COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			
EMFLAZA SUSP	4	PA	Antitussives			
EMFLAZA TABS (deflazacort)	4	PA	benzonatate 150 MG	1B	QL(4 ea daily)	
hydrocortisone TABS	1B		benzonatate 200 MG	1B	QL(3 ea daily)	
MEDROL TABS	3		benzonatate 100 MG	1B	QL(6 ea daily)	
methylprednisolone acetate SUSP	1B		Cough/Cold/Allergy Combinations			
methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	1B		hydrocodone polistirex- chlorpheniramine polistirex SUER	1B		
methylprednisolone TABS	1B		TUZISTRA XR	2	PA	
methylprednisolone TBPK	1B		Misc. Respiratory Inhalants			
prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML	1B		HYPERSAL NEBU	1B		
prednisolone sodium phosphate TBDP	3		NEBUSAL NEBU	1B		
prednisolone SOLN	1B		sodium chloride (inhalant) NEBU 7 %	1B		
prednisolone TABS	1B		Mucolytics			
prednisone SOLN	1B		acetylcysteine SOLN	1B		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	1B	AL(At least 12 yrs old); ST	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	1B	AL(At least 12 yrs old); PA
adapalene CREA	1B	AL(At least 12 yrs old); ST	clindamycin phosphate-tretinoin	1B	AL(At least 12 yrs old); ST
adapalene GEL 0.3 %	1B	AL(At least 12 yrs old); ST	DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
adapalene GEL 0.1 %	1B	AL(At least 12 yrs old); ST; RX/OTC	erythromycin (acne aid) PADS	1B	AL(At least 12 yrs old)
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST	erythromycin (acne aid) SOLN	1B	AL(At least 12 yrs old)
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	3	AL(At least 12 yrs old); PA
benzoyl peroxide-erythromycin GEL	1B	AL(At least 12 yrs old); PA	PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
benzoyl peroxide FOAM 5.3 %, 9.8 %	1B	AL(At least 12 yrs old); RX/OTC	sulfacetamide sodium (acne)	1B	AL(At least 12 yrs old)
benzoyl peroxide GEL 10 %	1B	AL(At least 12 yrs old)	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	1B	AL(At least 12 yrs old)
benzoyl peroxide GEL 5 %	1B	QL(3 gm daily); AL(At least 12 yrs old)	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	1B	AL(At least 12 yrs old)
benzoyl peroxide LIQD 4 %, 7 %, 10 %	1B	AL(At least 12 yrs old)	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	1B	AL(At least 12 yrs old); ST
clindamycin phosphate (topical) FOAM	1B	AL(At least 12 yrs old); PA	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	1B	AL(At least 12 yrs old)
clindamycin phosphate (topical) GEL	1B	QL(8 gm daily)	tretinoin microsphere 0.1 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) LOTN	1B	AL(At least 12 yrs old)	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) SOLN	1B	QL(4 ml daily); AL(At least 12 yrs old)	tretinoin GEL 0.01 %, 0.025 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) SWAB	1B	AL(At least 12 yrs old)	Agents for External Genital and Perianal Warts		
clindamycin phosphate-benzoyl peroxide (refrigerate)	1B	AL(At least 12 yrs old); PA	VEREGEN	3	QL(1 gm daily)
			Antibiotics - Topical		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)	<i>naftifine hcl CREA 1 %</i>	1B	QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)	<i>naftifine hcl CREA 2 %</i>	1B	QL(2 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>gentamicin sulfate (topical) OINT</i>	1B		<i>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
<i>mupirocin OINT</i>	1B	QL(6 gm daily)	<i>nystatin (topical) OINT</i>	1B	QL(6 gm daily)
NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA	<i>nystatin (topical) POWD EX</i>	1B	QL(10 gm daily)
Antifungals - Topical			<i>nystatin-triamcinolone CREA</i>	1B	QL(10 gm daily)
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC	<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 gm per fill retail); 1 max fill(s) per 30 day(s) retail	<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>ciclopirox olamine SUSP</i>	1B		OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ml daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>ciclopirox GEL</i>	1B	QL(3.35 gm daily)	<i>sulconazole nitrate CREA</i>	1B	
<i>ciclopirox SHAM</i>	1B	QL(10 ml daily)	<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>ciclopirox SOLN</i>	1B	QL(0.22 ml daily)	<i>tavaborole</i>	1B	PA
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC	Anti-inflammatory Agents - Topical		
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ml daily); RX/OTC	<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 ea daily); PA
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 gm daily)			
<i>clotrimazole w/ betamethasone LOTN</i>	1B				
<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)			
ERTACZO	3	QL(2.15 gm daily)			
<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)			
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)			
<i>luliconazole</i>	1B	PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 gm daily); RX/OTC	COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA	
Antineoplastic or Premalignant Lesion Agents - Topical					COSENTYX SOSY 150 MG/ML	
<i>bexarotene (topical)</i>	4	SP; PA	<i>methoxsalen rapid</i>	1B	QL(4 ea daily)	
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 gm daily); PA	SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA	
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 gm daily)	SKYRIZI PSKT	4	QL(0.025 ea daily); PA	
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ml daily)	SKYRIZI SOSY	4	QL(0.025 ml daily); PA	
PANRETIN	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ml daily); PA	
Antipruritics - Topical					STELARA SOSY 90 MG/ML	
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 gm per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily); PA	
Antipsoriatics					<i>tazarotene CREA</i>	
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)	TREMFYA SOPN	4	QL(0.018 ml daily); PA	
<i>acitretin 25 MG</i>	1B	QL(2 ea daily)	TREMFYA SOSY	4	QL(0.018 ml daily); PA	
<i>calcipotriene CREA</i>	1B	QL(4 gm daily); PA	Antiseborrheic Products			
<i>calcipotriene OINT</i>	1B	QL(4 gm daily); PA	<i>selenium sulfide LOTN 2.5 %</i>	1B		
<i>calcipotriene SOLN</i>	1B	QL(4 ml daily); PA	Antivirals - Topical			
<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)	<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	
<i>COSENTYX SENSOREADY PEN SOAJ</i>	4	QL(0.072 ml daily); PA	<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	
<i>COSENTYX UNOREADY SOAJ</i>	4	QL(0.072 ml daily); PA	<i>penciclovir</i>	3	QL(0.18 gm daily)	
<i>COSENTYX SOSY 150 MG/ML</i>	4	QL(0.036 ml daily); PA	Burn Products			
					<i>mafenide acetate PACK</i>	
					<i>silver sulfadiazine</i>	
					SULFAMYLYON CREA	
					Corticosteroids - Topical	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>amcinonide OINT</i>	3		<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)	<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>betamethasone dipropionate (topical) LOTN</i>	1B		<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)	<i>clocortolone pivalate</i>	3	QL(3 gm daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)	<i>CORDRAN TAPE</i>	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)	<i>desonide CREA</i>	1B	QL(4 gm daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)	<i>desonide LOTN</i>	1B	QL(4 ml daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)	<i>desonide OINT</i>	1B	QL(3 gm daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)	<i>desoximetasone GEL</i>	1B	QL(3 gm daily)
<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST	<i>diflorasone diacetate CREA</i>	1B	PA
			<i>diflorasone diacetate OINT</i>	1B	PA
			<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 gm daily)
			<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
			<i>fluocinolone acetonide OIL</i>	1B	QL(8 ml daily)
			<i>fluocinolone acetonide OINT</i>	1B	QL(4 gm daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ml daily)	<i>mometasone furoate CREA</i>	1B	QL(3 gm daily)	
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)	<i>mometasone furoate OINT</i>	1B	QL(4 gm daily)	
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)	<i>mometasone furoate SOLN</i>	1B	QL(5 ml daily)	
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)	<i>prednicarbate OINT</i>	1B		
<i>fluocinonide GEL</i>	1B		<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)	
<i>fluocinonide OINT</i>	1B	QL(2 gm daily)	<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)	
<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)	<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)	
<i>flurandrenolide CREA</i>	2	QL(2 gm daily)	<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)	
<i>flurandrenolide LOTN</i>	2	QL(2 ml daily)	<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B		
<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 gm daily)	<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)	
<i>fluticasone propionate LOTN</i>	1B	QL(6 ml daily)	<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)	
<i>fluticasone propionate OINT</i>	1B	QL(4 gm daily)	Eczema Agents			
<i>halcinonide CREA</i>	1B	PA	DUPIXENT SOPN 200 MG/1.14ML	4	QL(0.082 ml daily); PA	
<i>halobetasol propionate CREA</i>	1B	QL(3.5 gm daily)	DUPIXENT SOPN 300 MG/2ML	4	QL(0.29 ml daily); PA	
<i>halobetasol propionate OINT</i>	1B	QL(3.5 gm daily)	DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA	
<i>HALOG OINT</i>	3	PA	DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA	
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC	DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA	
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B		Emollients			
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC	<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC	
<i>hydrocortisone butyrate CREA</i>	1B	QL(3 gm daily)	<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC	
<i>hydrocortisone butyrate OINT</i>	1B	QL(3 gm daily)	Enzymes - Topical			
<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ml daily)	SANTYL OINT	3	PA	
<i>hydrocortisone valerate CREA</i>	1B					
<i>hydrocortisone valerate OINT</i>	1B					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Immunomodulating Agents - Topical					
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)	<i>crotamiton LOTN</i>	1B	PA
Immunosuppressive Agents - Topical					
<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA	<i>ivermectin (pediculicide)</i>	1B	PA; RX/OTC
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA	<i>malathion</i>	1B	
Keratolytic/Antimitotic/Vesicant Agents					
<i>podofilox SOLN</i>	1B		<i>permethrin CREA</i>	1B	
Local Anesthetics - Topical			<i>permethrin LIQD EX</i>	1B	
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)	<i>spinosad</i>	1B	PA
<i>lidocaine hcl PRSY</i>	1B	QL(4 ml daily)	Wound Care Products		
<i>lidocaine hcl SOLN</i>	1B	QL(10 ml daily)	REGRANEX	3	QL(0.5 gm daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 gm daily)	DIAGNOSTIC PRODUCTS		
<i>lidocaine PTCH 5 %</i>	1B	PA	Diagnostic Drugs		
SYNERA PTCH	3	QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
EUCRISA	3	QL(2 gm daily); PA	Diagnostic Tests		
Rosacea Agents			CHEMSTRIP-K STRP	1B	
<i>azelaic acid GEL</i>	1B	QL(1.67 gm daily)	FORA GTEL BLOOD KETONE TEST STRIPS	1B	
<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA	FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B	
<i>metronidazole (topical) CREA</i>	1B	QL(3 gm daily)	GOJJI BLOOD KETONE TEST STRIPS	1B	
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)	KETONE TEST STRIPS STRP	1B	
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)	KETONE STRP	1B	
<i>metronidazole (topical) LOTN</i>	1B		KETOSTIX STRP	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC			
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC			
TRUETRACK TEST STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC			
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Digestive Enzymes			Carbonic Anhydrase Inhibitors		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization	<i>acetazolamide sodium</i>	1B	
PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	3	Non-FDA approved uses require Prior Authorization	<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2		<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
			<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
			<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
			<i>methazolamide TABS</i>	1B	QL(6 ea daily)
Diuretic Combinations					
			<i>amiloride & hydrochlorothiazide</i>	1B	
			<i>spironolactone & hydrochlorothiazide</i>	1B	
			<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
			<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics					
			<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
			<i>bumetanide TABS</i>	1B	QL(5 ea daily)
			<i>ethacrynic acid</i>	1B	QL(16 ea daily)
			<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
furosemide TABS	1B		PAMIDRONATE DISODIUM SOLN	4	SP; PA			
torsemide TABS	1B		PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA			
Potassium Sparing Diuretics								
amiloride hcl TABS	1B		risedronate sodium TABS 35 MG	1B	QL(0.143 ea daily); PA			
spironolactone TABS	1B		risedronate sodium TABS 5 MG, 30 MG	1B	QL(1 ea daily); PA			
triamterene CAPS	1B	QL(3 ea daily)	risedronate sodium TABS 150 MG	1B	QL(0.036 ea daily); PA			
Thiazides and Thiazide-Like Diuretics								
chlorthalidone 25 MG, 50 MG	1B		risedronate sodium TBEC	1B	PA			
hydrochlorothiazide CAPS	1B	QL(2 ea daily)	teriparatide (recombinant) SOPN	4	QL(0.09 ml daily); SP; PA			
hydrochlorothiazide TABS 12.5 MG	1B	QL(2 ea daily)	TERIPARATIDE SOPN	4	QL(0.09 ml daily); PA			
hydrochlorothiazide TABS 25 MG, 50 MG	1A	QL(2 ea daily)	TYMLOS	4	PA			
indapamide TABS 1.25 MG	1B	QL(1 ea daily)	XGEVA SOLN	4	SP; PA			
indapamide TABS 2.5 MG	1B	QL(2 ea daily)	zoledronic acid CONC	4	SP; PA			
metolazone	1B	QL(2 ea daily)	zoledronic acid SOLN	4	SP; PA			
ENDOCRINE AND METABOLIC AGENTS - MISC.								
- Drugs to Treat Bone Disease and Regulate Hormones								
Bone Density Regulators								
alendronate sodium TABS 5 MG, 10 MG	1B	QL(1 ea daily)	ACTHAR GEL	3	PA			
alendronate sodium TABS 35 MG, 70 MG	1B	QL(0.143 ea daily)	Fertility Regulators					
calcitonin (salmon) NA	1B	QL(0.14 ml daily)	CHORIONIC GONADOTROPIN IM	4	PA			
FORTEO SOPN (teriparatide (recombinant))	4	QL(0.09 ml daily); SP; PA	GnRH/LHRH Antagonists					
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA	ganirelix acetate	4	PA			
ibandronate sodium SOLN	4	SP; PA	ORILISSA	2	PA			
ibandronate sodium TABS	1B	QL(0.036 ea daily)	Growth Hormone Receptor Antagonists					
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	4	SP; PA	SOMAVERT 10 MG, 15 MG, 20 MG	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA	<i>paricalcitol SOLN</i>	1B	
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA	PHEBURANE PLLT	4	PA
ZORBTIVE SC	4	SP; PA	<i>sapropterin dihydrochloride PACK</i>	4	PA
Hormone Receptor Modulators			<i>sapropterin dihydrochloride TABS</i>	4	PA
OSPHENA	3	PA	<i>sodium phenylbutyrate POWD</i>	1B	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)	<i>sodium phenylbutyrate TABS</i>	1B	PA
Insulin-Like Growth Factors (Somatomedins)			STRENSIQ	4	PA
INCRELEX	4	SP; PA	Posterior Pituitary Hormones		
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>desmopressin acetate spray</i>	1B	
FENSOLVI SC	4	SP; PA	<i>desmopressin acetate spray refrigerated</i>	1B	
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA	<i>desmopressin acetate SOLN IJ</i>	1B	PA
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA	<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
SYNAREL	4	SP; PA	<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)
Metabolic Modifiers			STIMATE SOLN NA	4	SP; PA
ALDURAZYME	4	SP; PA	Prolactin Inhibitors		
<i>betaine</i>	4	SP; PA	<i>cabergoline</i>	1B	
<i>calcitriol CAPS</i>	1B		Somatostatic Agents		
<i>calcitriol SOLN IV</i>	1B		<i>octreotide acetate SOLN</i>	4	SP; PA
<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA	SANDOSTATIN LAR DEPOT KIT	4	PA
<i>doxercalciferol CAPS</i>	1B		SIGNIFOR	4	PA
<i>doxercalciferol SOLN</i>	1B		Vasopressin Receptor Antagonists		
ELAPRASE	4	SP; PA	<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
GALAFOLD	4	QL(0.5 ea daily); PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
LUMIZYME	4	SP; PA	Estrogen Combinations		
MYALEPT	4	PA			
NAGLAZYME	4	SP; PA			
<i>nitisinone CAPS</i>	4	PA			
<i>paricalcitol CAPS</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLIMARA PRO	3		<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 max fill(s) per 30 day(s) retail
DUAVEE	3	PA	CIPRO SUSR	2	2 max fill(s) per 30 day(s) retail
<i>norethindrone acetate-ethinyl estradiol</i>	1B		<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B	
PREMPHASE	2		<i>levofloxacin SOLN OR</i>	1B	
PREMPRO	2	QL(1 ea daily)	<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
Estrogens			<i>levofloxacin TABS 500 MG</i>	1A	
DELESTROGEN 10 MG/ML (<i>estradiol valerate</i>)	1B		<i>moxifloxacin hcl in sodium chloride</i>	1B	
DEPO-ESTRADIOL	3		<i>moxifloxacin hcl TABS</i>	1B	
ELESTRIN GEL	3		<i>ofloxacin 300 MG, 400 MG</i>	1B	
<i>estradiol valerate</i>	1B		GASTROINTESTINAL AGENTS - MISC. -		
<i>estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM</i>	1B		Miscellaneous Gastrointestinal Drugs		
<i>estradiol GEL 0.06 %</i>	3		Bile Acid Synthesis Disorder Agents		
<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)	CHOLBAM	4	SP; PA
<i>estradiol PTWK</i>	1B		Gallstone Solubilizing Agents		
<i>estradiol TABS</i>	1B		<i>ursodiol CAPS</i>	1B	QL(3 ea daily)
ESTROGEL GEL (<i>estradiol</i>)	3		<i>ursodiol TABS</i>	1B	
EVAMIST SOLN	3		Gastrointestinal Chloride Channel Activators		
MENEST	3		<i>lubiprostone</i>	1B	QL(2 ea daily)
MENOSTAR PTWK	3		Gastrointestinal Stimulants		
PREMARIN SOLR	2		<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
PREMARIN TABS	2	QL(1 ea daily)	<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
Fluoroquinolones			Inflammatory Bowel Agents		
BAXDELA SOLR	3	PA	<i>balsalazide disodium CAPS</i>	1B	QL(9 ea daily)
BAXDELA TABS	3	PA	DIPENTUM	2	
<i>ciprofloxacin hcl TABS</i>	1B		INFLECTRA SOLR	4	PA
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3		<i>mesalamine CP24</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine CPDR</i>	1B		GENITOURINARY AGENTS - MISCELLANEOUS -		
<i>mesalamine ENEM</i>	3		Miscellaneous Drugs to Treat Reproductive		
<i>mesalamine SUPP</i>	3		Organs and Urinary System		
<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)	Alkalinizers		
<i>mesalamine TBEC 1.2 GM</i>	3		<i>potassium citrate (alkalinizer) TBCR</i>	1B	
RENFLEXIS	4	PA	<i>sodium citrate & citric acid</i>	1B	RX/OTC
SKYRIZI SOCT	4	QL(0.043 ml daily); PA	Cystinosis Agents		
SKYRIZI SOLN	4	QL(0.36 ml daily); PA	CYSTAGON CAPS	3	PA
STELARA 130 MG/26ML	4	QL(3.47 ml daily); PA	Genitourinary Irrigants		
<i>sulfasalazine TABS</i>	1B		<i>acetic acid 0.25 %</i>	1B	
<i>sulfasalazine TBEC</i>	1B		<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
Intestinal Acidifiers			<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
<i>lactulose (encephalopathy)</i>	1B		SORBITOL 3 %	1B	
Irritable Bowel Syndrome (IBS) Agents			SORBITOL/MANNITOL IRRIGATION	1B	
<i>alosetron hcl</i>	1B	QL(2 ea daily)	Interstitial Cystitis Agents		
LINZESS	2	QL(1 ea daily)	ELMIRON CAPS	2	QL(3 ea daily)
Peripheral Opioid Receptor Antagonists			Prostatic Hypertrophy Agents		
<i>alvimopan</i>	1B		<i>alfuzosin hcl</i>	1B	QL(1 ea daily)
MOVANTIK	3	QL(1 ea daily); PA	<i>dutasteride</i>	1B	QL(1 ea daily)
Phosphate Binder Agents			<i>dutasteride-tamsulosin hcl</i>	3	PA
<i>calcium acetate (phosphate binder) CAPS</i>	1B		<i>finasteride</i>	1B	5 mg only
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC	<i>silodosin</i>	1B	
<i>lanthanum carbonate CHEW</i>	1B		<i>tamsulosin hcl</i>	1B	
PHOSLYRA SOLN	2		Urinary Analgesics		
<i>sevelamer carbonate PACK</i>	1B		<i>phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG</i>	1B	
<i>sevelamer carbonate TABS</i>	1B		Urinary Stone Agents		
VELPHORO	3	PA	THIOLA EC TBEC 100 MG (<i>tiopronin</i>)	3	QL(3 ea daily); PA
			THIOLA EC TBEC 300 MG (<i>tiopronin</i>)	3	QL(10 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tiopronin TBEC 300 MG</i>	3	QL(10 ea daily); PA	Complement Inhibitors		
<i>tiopronin TBEC 100 MG</i>	3	QL(3 ea daily); PA	HAEGARDA SOLR SC	4	PA
GOUT AGENTS - Drugs to Treat Gout					
Gout Agent Combinations					
<i>colchicine w/ probenecid</i>	1B		TAVALISSE	4	QL(2 ea daily); SP; PA
Gout Agents					
<i>allopurinol</i>	1B		Hematorheologic Agents		
<i>colchicine TABS</i>	1B	QL(1 ea daily)	<i>pentoxifylline</i>	1B	QL(3 ea daily)
<i>febuxostat</i>	1B	QL(1 ea daily); PA	Plasma Kallikrein Inhibitors		
Uricosurics			<i>ORLADEYO</i>	4	PA
<i>probenecid</i>	1B		<i>TAKHZYRO SOLN</i>	4	PA
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders			<i>TAKHZYRO SOSY</i>	4	PA
Antihemophilic Products			Platelet Aggregation Inhibitors		
<i>ADVATE</i>	4	PA	<i>anagrelide hcl</i>	1B	
<i>ADYNOVATE</i>	4	PA	<i>aspirin-dipyridamole</i>	1B	QL(2 ea daily); PA
<i>AFSTYLA</i>	4	PA	<i>BRILINTA</i>	2	QL(2 ea daily)
<i>ALPROLIX</i>	4	PA	<i>CABLIVI</i>	4	PA
<i>ALTUVIPIO</i>	4	PA	<i>cilostazol</i>	1B	
<i>BENEFIX KIT</i>	4	PA	<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>ELOCTATE</i>	4	PA	<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>ESPEROCT</i>	4	PA	<i>dipyridamole</i>	1B	
<i>IDELVION</i>	4	PA	<i>prasugrel hcl</i>	1B	QL(1 ea daily)
<i>JIVI</i>	4	PA	<i>ZONTIVITY</i>	3	PA
<i>KOGENATE FS KIT</i>	4	PA	HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
<i>KOVALTRY</i>	4	PA	Agents for Gaucher Disease		
<i>NOVOEIGHT</i>	4	PA	<i>CERDELGA</i>	4	QL(2 ea daily); PA
<i>XYNTHA</i>	4	PA	<i>CEREZYME 400 UNIT</i>	4	SP; PA
<i>XYNTHA SOLOFUSE</i>	4	PA	<i>miglustat</i>	4	QL(3 ea daily); SP; PA
Bradykinin B2 Receptor Antagonists			Agents for Sickle Cell Disease		
<i>icatibant acetate SOLN</i>	4	QL(9 ml daily); PA	<i>DROXIA CAPS</i>	3	
<i>icatibant acetate SOSY</i>	4	QL(9 ml daily); PA	<i>OXBRYTA TABS 500 MG</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Cobalamins			UDENYCA ONBODY SOSY	4	PA
cyanocobalamin SOLN IJ 1000 MCG/ML	1B	QL(1 ml daily)	UDENYCA SOAJ	4	PA
Folic Acid/Folates			UDENYCA SOSY	4	PA
folic acid TABS	0		ZARXIO	4	PA
Hematopoietic Growth Factors			ZIEXTENZO	4	PA
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP	Hematopoietic Mixtures		
ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA	ferrous fumarate-folic acid	1B	QL(1 ea daily)
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA	Iron		
DOPTELET	4	QL(3 ea daily); PA	ferrous sulfate SOLN 15 MG/ML	0	AL(Up to 1 yrs old)
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	ferrous sulfate TABS 65 MG, 325 MG	0	
GRANIX SOLN	4	PA	ferrous sulfate TBEC 325 MG	0	
GRANIX SOSY	4	PA	INFED	4	PA
LEUKINE SOLR IJ	4	SP; PA	VENOFER	4	PA
MIRCERA	4	PA	Stem Cell Mobilizers		
MULPLETA	4	QL(1 ea daily); PA	MOZOBIL (plerixafor)	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	plerixafor	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
PROCRIT 40000 UNIT/ML	4	SP; PA	Hemostatics - Systemic		
PROMACTA PACK	4	QL(1 ea daily); PA	aminocaproic acid TABS	1B	PA
PROMACTA TABS	4	QL(1 ea daily); PA	tranexamic acid SOLN 1000 MG/10ML	1B	
RETACRIT	4	PA	tranexamic acid TABS	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>estazolam</i>	1B		<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST	Laxatives - Miscellaneous		
<i>flurazepam hcl</i>	1B		<i>lactulose SOLN</i>	1B	
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)	Saline Laxatives		
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)	OSMOPREP	3	PA
<i>triazolam</i>	1B		Stimulant Laxatives		
<i>zaleplon 10 MG</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)	<i>bisacodyl SUPP</i>	1A	
<i>zaleplon 5 MG</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)	<i>bisacodyl TBEC</i>	1A	
<i>zolpidem tartrate TABS</i>	1A	QL(1 ea daily); AL(At least 18 yrs old)	Surfactant Laxatives		
<i>zolpidem tartrate TBCR</i>	1B	QL(1 ea daily)	<i>docusate calcium</i>	1A	QL(1 ea daily)
Orexin Receptor Antagonists			<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 ea daily)
BELSOMRA	3	PA	<i>docusate sodium CAPS 250 MG</i>	1A	
Selective Melatonin Receptor Agonists			LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
<i>ramelteon</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)	Local Anesthetics - Amides		
LAXATIVES - Bowel Treatment Drugs			<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1B	
Bulk Laxatives			MACROLIDES - Drugs to Treat Bacterial Infections		
<i>calcium polycarbophil TABS</i>	1B		Azithromycin		
Laxative Combinations			<i>azithromycin PACK</i>	1B	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B		<i>azithromycin SOLR</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM</i>	0		<i>azithromycin SUSR</i>	1B	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA	<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 ea daily)
			<i>azithromycin TABS 500 MG</i>	1B	QL(4 ea per fill retail; 4 per fill mail)
			<i>azithromycin TABS 250 MG</i>	1B	QL(6 ea per fill retail; 6 per fill mail)
Clarithromycin			Clarithromycin		
			<i>clarithromycin SUSR</i>	1B	
			<i>clarithromycin TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
clarithromycin TB24	1B		KAMELEON LUBRICATED MISC	0	QL(2 ea daily)
Erythromycins			KIMONO COLORS DEVI	0	QL(2 ea daily)
erythromycin base CPEP	3		KIMONO LUBRICATED MISC	0	QL(2 ea daily)
erythromycin base TABS	3		KIMONO MAXX/LARGE FLARE MISC	0	QL(2 ea daily)
erythromycin base TBEC	1B		KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
erythromycin ethylsuccinate SUSR	1B		KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
erythromycin ethylsuccinate TABS	3		KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)
Fidaxomicin			KIMONO PS LUBRICATED MISC	0	QL(2 ea daily)
DIFICID TABS	2		KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)
MEDICAL DEVICES AND SUPPLIES			KIMONO SENSATION LUBRICATED MISC	0	QL(2 ea daily)
Blood Pressure Devices			KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
ADVOCATE ARM BLOOD PRESSURE MONITOR/SMALL/MEDIUM DEVI	2		KIMONO SPECIAL DEVI	0	QL(2 ea daily)
Contraceptives			K-Y ME & YOU EXTRA LUBRICATED DEVI	0	QL(2 ea daily)
AIMSCO LUBRICATED MISC	0	QL(2 ea daily)	K-Y ME & YOU INTENSE DEVI	0	QL(2 ea daily)
CAYA DPRH	0		MAXX LUBRICATED MISC	0	QL(2 ea daily)
DUREX EXTRA SENSITIVE THIN DEVI	0	QL(2 ea daily)	MAXX PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
DUREX EXTRA SENSITIVE THIN MISC	0	QL(2 ea daily)	OMNIFLEX DIAPHRAGM	0	
DUREX TROPICAL MISC	0	QL(2 ea daily)	PREMIUM CONDOMS LUBRICATED MISC	0	QL(2 ea daily)
FANTASY LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)	REALITY LATEX CONDOMS/LUBRICATED MISC	0	QL(2 ea daily)
FANTASY LUBRICATED MISC	0	QL(2 ea daily)			
FC2 FEMALE CONDOM	0	QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail			
FEMCAP DEVI	0				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REALITY LATEX/ULTRA TEXTURED DEVI	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0	
REALITY LATEX/ULTRA THIN DEVI	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0	
TRUE COVER DEVI	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0	
TRUSTEX COLOR CONDOMS + LUBE MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0	
TRUSTEX LUBRICATED EXTRALARGE MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0	
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0	
TRUSTEX LUBRICATED/RIBBED/STUDDED MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0	
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	QL(2 ea daily)	Diabetic Supplies		
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0	QL(2 ea daily)	ADVOCATE CONTROL SOLUTIONHIGH LIQD	1B	
TRUSTEX LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)	ADVOCATE REDI-CODE+ CONTROL SOLUTION HIGH SOLN	1B	
TRUSTEX LUBRICATED MISC	0	QL(2 ea daily)	AGAMATRIX CONTROL HIGH SOLN	1B	
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0	QL(2 ea daily)	CLEVER CHOICE GLUCOSE CONTROL HIGH LIQD	1B	
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED MISC	0	QL(2 ea daily)	CONTOUR HIGH CONTROL LIQD	1B	
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	QL(2 ea daily)	DIATRUE GLUCOSE CONTROL SOLUTION LEVEL 3 SOLN	1B	
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)	EASY PLUS II CONTROL SOLUTION HIGH SOLN	1B	
TRUSTEX/RIA LUBRICATED MISC	0	QL(2 ea daily)	EASY STEP CONTROL SOLUTION HIGH SOLN	1B	
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		EASY TALK CONTROL SOLUTION HIGH SOLN	1B	
			EASY TALK PLUS II CONTROLHIGH SOLN	1B	
			EASY TRAK GLUCOSE CONTROLSOLUTION HIGH SOLN	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ELEMENT HIGH CONTROL LIQD	1B		ONETOUCH DELICA SAFETY LANCING DEVICE	1B	RX/OTC
EMBRACE GLUCOSE CONTROL SOLUTION HIGH LIQD	1B		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	RX/OTC
EMBRACE TALK GLUCOSE CONTROL SOLUTION HIGH SOLN	1B		ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	1B	
FORA CONTROL SOLUTION HIGH SOLN	1B		PRODIGY CONTROL SOLUTIONHIGH SOLN	1B	
FORACARE GDH CONTROL SOLUTION HIGH SOLN	1B		RELION 2-IN-1 LANCET DEVICES 30G	1B	RX/OTC
FORTISCARE CONTROL SOLUTIONS HIGH SOLN	1B		RELION 2-IN-1 LANCING DEVICE 25G	1B	RX/OTC
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA	RELION 2-IN-1 LANCING DEVICE 30G	1B	RX/OTC
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA	RIGHTEST GC300 HIGH CONTROL LIQD	1B	
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA	SELECT LANCETS	1B	6.66/day
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA	SOLUS V2 CONTROL HIGH SOLN	1B	
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA	UNISTRIP CONTROL SOLUTIONHIGH SOLN	1B	
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA	Parenteral Therapy Supplies		
GLUCOCOM HIGH CONTROL LIQD	1B		SELECT INSULIN SYRINGES	1B	5/day
INFINITY CONTROL SOLUTION HIGH SOLN	1B		MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
LIBERTY CONTROL SOLUTION HIGH SOLN	1B		Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
			AIMOVIG	2	QL(0.04 ml daily); PA
			EMGALITY SOAJ	2	QL(0.07 ml daily); PA
			EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA	<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
UBRELVY	3	QL(10 ea per 30 day(s) retail); ST	<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
Migraine Combinations					
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)	<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)	<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)
Migraine Products					
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B		<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)	<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
ERGOMAR SUBL	3	QL(0.667 ea daily)	<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
Serotonin Agonists					
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST	<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)	MINERALS & ELECTROLYTES		
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)	Bicarbonates		
			<i>sodium acetate SOLN</i>	1B	
			<i>SODIUM ACETATE SOLN (sodium acetate)</i>	1B	
			Calcium		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
calcium chloride (dihydrate) SOLN	1B		POTASSIUM CHLORIDE/DEXTROSE/L ACTATED RINGERS	1B			
Electrolyte Mixtures							
dextrose in lactated ringers	1B		POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	1B			
electrolyte-148	1B		ringer's	1B			
electrolyte-a	1B		Fluoride				
ELLIOTTS B	4	PA	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	0	QL(1 ea daily)		
IONOSOL-MB/DEXTROSE 5%	1B		Magnesium				
ISOLYTE-P/DEXTROSE 5%	1B		magnesium sulfate IJ 50 %	1B			
ISOLYTE-S	1B		Phosphate				
KCL 0.3%/D5W/NACL 0.9% (potassium chloride in dextrose & sodium chloride)	1B		potassium phosphates 236 MG/ML-224 MG/ML	1B			
lactated ringer's	1B		Potassium				
NORMOSOL-M/D5W	1B		potassium acetate SOLN 2 MEQ/ML	1B			
NORMOSOL-R	1B		potassium bicarbonate TBEF	1B			
PLASMA-LYTE A (electrolyte-a)	1B		potassium chloride microencapsulated crystals er	1B			
PLASMA-LYTE-148 (electrolyte-148)	1B		potassium chloride CPCR	1B			
potassium chloride in dextrose 5 %-20 MEQ/L	1B		potassium chloride PACK OR 20 MEQ	1B	PA		
potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	1B		potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	1B			
potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride)	1B			
			potassium chloride TBCR	1B			
			Sodium				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	1B		NULOJIX	4	SP; PA			
MISCELLANEOUS THERAPEUTIC CLASSES								
Chelating Agents								
penicillamine CAPS	1B	PA	PROGRAF PACK	2	PA			
penicillamine TABS	1B	QL(8 ea daily)	PROGRAF SOLN	2				
trientine hcl 250 MG	4	QL(8 ea daily); SP; PA	SIMULECT	3				
Immunomodulators								
lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	4	QL(1 ea daily); SP; PA	sirolimus TABS	1B				
lenalidomide 20 MG	4	QL(1 ea daily); PA	tacrolimus CAPS	1B				
THALOMID	4	QL(3 ea daily); SP; PA	THYMOGLOBULIN	4	SP; PA			
Immunosuppressive Agents								
ATGAM	4	SP; PA	Irrigation Solutions					
AZATHIOPRINE	1B		irrigation solutions, physiological	1B				
azathioprine TABS	1B		lactated ringer's (irrigation)	1B				
cyclosporine modified (for microemulsion) CAPS	1B		ringer's irrigation	1B				
cyclosporine modified (for microemulsion) SOLN	1B		water for irrigation, sterile	1B				
cyclosporine CAPS	1B		Potassium Removing Agents					
cyclosporine SOLN IV 50 MG/ML	1B		LOKELMA	3	QL(1 ea daily); PA			
ENSPRYNG	4	PA	sodium polystyrene sulfonate POWD	1B				
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	4	QL(20 ea daily); SP; PA	sodium polystyrene sulfonate SUSP OR 15 GM/60ML	1B				
everolimus (immunosuppressant) 1 MG	4	QL(10 ea daily); PA	MOUTH/THROAT/DENTAL AGENTS					
mycophenolate mofetil CAPS	1B		Anesthetics Topical Oral					
mycophenolate mofetil TABS	1B		lidocaine hcl (mouth- throat) 2 %	1B	QL(4 ml daily)			
mycophenolate sodium	1B		lidocaine hcl (mouth- throat) 4 %	1B				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Steroids - Mouth/Throat/Dental					
<i>triamcinolone acetonide (mouth)</i>	1B		NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC
Throat Products - Misc.					
<i>cevimeline hcl</i>	1B		ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC
<i>pilocarpine hcl (oral)</i>	1B		ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)
MULTIVITAMINS					
Ped MV w/ Fluoride					
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC	PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)
Prenatal Vitamins					
CLASSIC PRENATAL TABS	2	QL(1 ea daily)	PRENATAL ONE DAILY TABS	2	QL(1 ea daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 ea daily)	PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC
EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)	PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
GNP PRENATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)	PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)
MASONATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATAL VITAMINS TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 ea daily)
MULTI PRENATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMIN TABS	2	QL(1 ea daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 ea daily); RX/OTC	PRENATAL TABS	2	QL(1 ea daily)
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)	PRENATRYL TABS	2	QL(1 ea daily); RX/OTC
NEONATAL VITAMIN TABS	2	QL(1 ea daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
			QC PRENATAL TABS	2	QL(1 ea daily)
			RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
			RA PRENATAL TABS	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)	<i>ipratropium bromide (nasal) 0.06 %</i>	1B				
THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC	Nasal Steroids					
TRICARE TABS	2	QL(1 ea daily); RX/OTC	<i>budesonide (nasal)</i>	1B				
VITATELY/GINGER TABS	2	QL(1 ea daily); RX/OTC	<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail			
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC	<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC			
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms								
Central Muscle Relaxants								
<i>baclofen TABS 10 MG, 20 MG</i>	1B		<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC			
<i>carisoprodol TABS</i>	1B		<i>triamcinolone acetonide (nasal) AERO</i>	1B				
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)	XHANCE EXHU	3	PA			
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)	NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles					
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)	ALS Agents					
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)	<i>riluzole TABS</i>	3				
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B		Neuromuscular Blocking Agent - Neurotoxins					
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)	XEOMIN	3	PA			
<i>tizanidine hcl CAPS</i>	1B		NUTRIENTS					
<i>tizanidine hcl TABS</i>	1B		Proteins					
Direct Muscle Relaxants								
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)	<i>CLINIMIX 4.25%/DEXTROSE 10%</i>	3				
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus								
Nasal Antiallergy								
<i>azelastine hcl</i>	1B	RX/OTC	<i>CLINIMIX 4.25%/DEXTROSE 5%</i>	3				
<i>olopatadine hcl (nasal)</i>	1B		<i>CLINIMIX E 5%/DEXTROSE 20%</i>	3				
Nasal Anticholinergics								
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)	OPHTHALMIC AGENTS - Drugs to Treat the Eye					
Beta-blockers - Ophthalmic								
<i>betaxolol hcl (ophth) SOLN</i>	1B		<i>brimonidine tartrate-timolol maleate</i>	1B				
<i>carteolol hcl (ophth)</i>	1B							

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl-timolol maleate</i>	1B		<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B		NATACYN	2	
<i>timolol maleate (ophth) SOLG</i>	1B		<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B		<i>ofloxacin (ophth)</i>	1B	
Cycloplegic Mydriatics			<i>polymyxin b-trimethoprim</i>	1B	
<i>tropicamide SOLN 1 %</i>	1B		<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)	<i>tobramycin (ophth) SOLN</i>	1B	
Miotics			<i>trifluridine</i>	1B	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B		ZIRGAN GEL	2	
Ophthalmic Adrenergic Agents			Ophthalmic Immunomodulators		
<i>apraclonidine hcl</i>	1B		<i>cyclosporine (ophth) EMUL</i>	3	PA
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B		Ophthalmic Local Anesthetics		
IOPIDINE	3		<i>proparacaine hcl</i>	1B	
Ophthalmic Anti-infectives			Ophthalmic Steroids		
AZASITE	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)	<i>ALREX SUSP (loteprednol etabonate)</i>	3	PA
<i>bacitracin (ophthalmic)</i>	3		<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
BESIVANCE	3	PA	<i>difluprednate</i>	1B	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B		<i>fluorometholone (ophth) SUSP</i>	1B	
<i>erythromycin (ophth)</i>	1B		<i>FML FORTE SUSP</i>	3	PA
<i>gatifloxacin (ophth)</i>	1B		<i>FML OINT</i>	3	PA
<i>gentamicin sulfate (ophth) OINT</i>	1B		<i>LOTEMAX OINT</i>	3	PA
<i>gentamicin sulfate (ophth) SOLN</i>	1B		<i>loteprednol etabonate GEL</i>	1B	PA
KLARITY-A	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)	<i>loteprednol etabonate SUSP</i>	1B	PA
<i>levofloxacin (ophth) 0.5 %</i>	1B		MAXIDEX SUSP OP	3	PA
			<i>neomycin-polymy-dexameth OINT</i>	1B	
			<i>neomycin-polymy-dexameth SUSP</i>	1B	
			<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRED MILD	3	PA	<i>travoprost SOLN</i>	1B	
PRED-G SUSP	3	PA	OTIC AGENTS - Drugs to Treat the Ear		
<i>prednisolone acetate (ophth)</i>	1B		Otic Agents - Miscellaneous		
PREDNISOLONE SODIUM PHOSPHATE	3		<i>acetic acid (otic)</i>	1B	QL(0.5 ml daily)
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA	Otic Anti-infectives		
<i>tobramycin-dexamethasone SUSP</i>	1B		<i>ciprofloxacin hcl (otic)</i>	1B	
ZYLET	3	PA	<i>ofloxacin (otic)</i>	1B	
Ophthalmics - Misc.			Otic Combinations		
ALOCRIL	3	PA	<i>ciprofloxacin-dexamethasone</i>	1B	PA
ALOMIDE	3	PA	<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 ea daily); PA
<i>azelastine hcl (ophth)</i>	1B		CORTISPORIN-TC	3	
<i>bepotastine besilate</i>	3	PA	<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ml daily)
<i>brinzolamide</i>	1B		<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B		Otic Steroids		
<i>cromolyn sodium (ophth)</i>	1B		<i>fluocinolone acetonide (otic)</i>	1B	
CYSTARAN	2	QL(2.143 ml daily); PA	<i>hydrocortisone w/acetic acid</i>	1B	
<i>diclofenac sodium (ophth)</i>	1B		PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
<i>dorzolamide hcl</i>	1B		Immune Serums		
<i>epinastine hcl (ophth)</i>	1B		<i>GAMMAGARD LIQUID 30 GM/300ML</i>	4	PA
<i>flurbiprofen sodium</i>	1B		<i>GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML</i>	4	SP; PA
<i>ketorolac tromethamine (ophth)</i>	1B		<i>GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR</i>	4	SP; PA
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	RX/OTC	<i>GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML</i>	4	SP; PA
LASTACAFT	3	PA			
NEVANAC	3	QL(0.2 ml daily); ST			
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC			
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC			
Prostaglandins - Ophthalmic					
<i>bimatoprost SOLN</i>	3				
<i>latanoprost SOLN</i>	1B				
<i>tafluprost</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
GAMUNEX-C	4	SP; PA	<i>amoxicillin & pot clavulanate TB12</i>	1B			
Passive Immunizing Agents - Combinations							
HYQVIA	4	PA	<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B			
PENICILLINS - Drugs to Treat Bacterial Infections							
Aminopenicillins							
<i>amoxicillin CAPS</i>	1A		<i>piperacillin sodium-tazobactam sodium</i>	1B			
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B		Penicillinase-Resistant Penicillins				
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B		<i>dicloxacillin sodium</i>	1B			
<i>amoxicillin SUSR 125 MG/5ML</i>	1A		<i>nafcillin sodium IV 10 GM</i>	1B			
<i>amoxicillin TABS</i>	1B		<i>oxacillin sodium IV 10 GM</i>	1B			
<i>ampicillin sodium IJ 1 GM</i>	1B		PROGESTINS - Hormone Replacement/Modifying Drugs				
<i>ampicillin CAPS 500 MG</i>	1B		Progestins				
Natural Penicillins							
<i>penicillin g potassium 5000000 UNIT</i>	1B		<i>medroxyprogesterone acetate 10 MG</i>	1A			
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B		<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B			
PENICILLIN G PROCAINE	3		<i>megestrol acetate (appetite)</i>	1B	PA		
<i>penicillin g sodium</i>	3		<i>norethindrone acetate TABS</i>	0			
<i>penicillin v potassium SOLR</i>	1B		<i>progesterone CAPS</i>	1B			
<i>penicillin v potassium TABS</i>	1B		PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions				
Penicillin Combinations							
<i>amoxicillin & pot clavulanate CHEW</i>	1B		Agents for Chemical Dependency				
<i>amoxicillin & pot clavulanate SUSR</i>	1B		<i>acamprosate calcium</i>	1B			
<i>amoxicillin & pot clavulanate TABS</i>	1B		<i>disulfiram</i>	1B			
Antidementia Agents							
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 ea daily)	<i>LUCEMYRA</i>	3	QL(224 ea per 14 day(s) retail); PA		
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 ea daily)					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 ea daily)	<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA	
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 ea daily)	Multiple Sclerosis Agents			
<i>galantamine hydrobromide CP24</i>	1B	QL(1 ea daily)	AVONEX PEN AJKT	4	QL(0.0714 ml daily); SP; PA	
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ml daily)	AVONEX PSKT	4	QL(0.0714 ml daily); SP; PA	
<i>galantamine hydrobromide TABS</i>	1B	QL(2 ea daily)	BETASERON KIT	4	QL(0.0357 ea daily); SP; PA	
<i>memantine hcl TABS</i>	1B		<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA	
<i>memantine hcl TABS</i>	1B	QL(2 ea daily)	<i>dimethyl fumarate CDPK</i>	1B	QL(2 ea daily)	
<i>rivastigmine tartrate CAPS</i>	1B		<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)	
Combination Psychotherapeutics			<i>fingolimod hcl</i>	4	QL(1 ea daily)	
<i>chlordiazepoxide-amitriptyline</i>	1B		<i>glatiramer acetate SOSY 20 MG/ML</i>	3	QL(1 ml daily)	
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)	<i>glatiramer acetate SOSY 40 MG/ML</i>	3	QL(0.43 ml daily)	
Fibromyalgia Agents			KESIMPTA	4	QL(0.0144 ml daily); PA	
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA	PLEGRIDY STARTER PACK SOPN	4	QL(0.036 ml daily); PA	
SAVELLA TABS	2	QL(2 ea daily); PA	PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA	
Movement Disorder Drug Therapy			PLEGRIDY SOPN	4	QL(0.036 ml daily); PA	
AUSTEDO PATIENT TITRATION KIT TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA	
AUSTEDO XR PATIENT TITRATION KIT TEPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA	
AUSTEDO XR TB24	4	QL(1 ea daily); PA	REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); SP; PA	
AUSTEDO TABS	4	QL(4 ea daily); PA	REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA	
INGREZZA CAPS	4	QL(1 ea daily); PA	REBIF SOSY	4	QL(0.214 ml daily); SP; PA	
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA	<i>teriflunomide</i>	4	QL(1 ea daily)	
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents			Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents			
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>			<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA	ORKAMBI TABS	4	QL(4 ea daily); PA
Pseudobulbar Affect (PBA) Agents			PULMOZYME	4	QL(2.5 ml daily); SP; PA
NUEDEXTA	3	QL(2 ea daily); PA	TRIKAFTA TBPK	4	QL(3 ea daily); PA
Psychotherapeutic and Neurological Agents - Misc.			Pulmonary Fibrosis Agents		
<i>ergoloid mesylates TABS</i>	1B		OFEV	4	QL(2 ea daily); PA
<i>pimozide</i>	1B		<i>pirfenidone CAPS</i>	4	
Smoking Deterrents			<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)	SULFONAMIDES - Drugs to Treat Bacterial Infections		
<i>nicotine polacrilex GUM</i>	0		Sulfonamides		
<i>nicotine polacrilex LOZG</i>	0		<i>sulfadiazine TABS</i>	1B	
NICOTINE TRANSDERMAL SYSTEM KIT	0		TETRACYCLINES - Drugs to Treat Bacterial Infections		
<i>nicotine MISC XX</i>	0	QL(1 ea daily)	Glycylcyclines		
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 ea daily)	<i>tigecycline</i>	1B	
NICOTROL INHALER INHA	0		Tetracyclines		
NICOTROL NS SOLN	0		<i>demeclacycline hcl TABS</i>	1B	
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)	<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>varenicline tartrate TBPK</i>	0		<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
Transthyretin Amyloidosis Agents			<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
TEGSEDI	4	PA	<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
Alpha-Proteinase Inhibitor (Human)			<i>doxycycline hyclate SOLR</i>	1B	
PROLASTIN-C SOLN	4	PA	<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
Cystic Fibrosis Agents			<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
KALYDECO TABS	4	QL(2 ea daily); SP; PA	<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
ORKAMBI PACK	4	QL(2 ea daily); PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)	<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones					
Antithyroid Agents					
<i>methimazole TABS</i>	1B		<i>chlor diazepoxide hcl-clidinium bromide</i>	1B	
<i>propylthiouracil</i>	1B		<i>dicyclomine hcl CAPS</i>	1B	
Thyroid Hormones					
<i>ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG</i>	2		<i>dicyclomine hcl SOLN OR</i>	1B	
<i>ARMOUR THYROID TABS</i>	2	QL(1 ea daily)	<i>dicyclomine hcl TABS</i>	1B	
<i>levothyroxine sodium TABS</i>	1B		<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B	
<i>liothyronine sodium SOLN</i>	1B		<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)
<i>liothyronine sodium TABS</i>	1B		<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>NP THYROID 120 TABS</i>	1B	QL(1 ea daily)	<i>methscopolamine bromide</i>	1B	
<i>NP THYROID 15 TABS</i>	1B	QL(1 ea daily)	H-2 Antagonists		
<i>NP THYROID 30 TABS</i>	1B	QL(1 ea daily)	<i>cimetidine TABS</i>	1B	RX/OTC
<i>NP THYROID 60 TABS</i>	1B	QL(1 ea daily)	<i>famotidine in nacl SOLN</i>	1B	
<i>NP THYROID 90 TABS</i>	1B	QL(1 ea daily)	<i>famotidine SOLN 20 MG/2ML</i>	1A	
<i>SYNTHROID TABS (levothyroxine sodium)</i>	2		<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B	
TOXOIDS			<i>famotidine SUSR</i>	1B	QL(10 ml daily)
Toxoid Combinations			<i>famotidine TABS 20 MG, 40 MG</i>	1B	
<i>ADACEL SUSP</i>	0		<i>nizatidine CAPS</i>	1B	
<i>BOOSTRIX SUSP</i>	0		<i>ranitidine hcl TABS 150 MG</i>	1B	
<i>BOOSTRIX SUSY</i>	0		Misc. Anti-Ulcer		
<i>KINRIX SUSY</i>	0		<i>sucralfate SUSP</i>	1B	QL(40 ml daily)
<i>QUADRACEL SUSP</i>	0		<i>sucralfate TABS</i>	1B	QL(4 ea daily)
<i>QUADRACEL SUSY</i>	0		Proton Pump Inhibitors		
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			<i>dexlansoprazole</i>	3	QL(1 ea daily)
Antispasmodics			<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B		<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 ea daily)
			<i>esomeprazole magnesium TBEC</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 ea daily); RX/OTC	<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA	
<i>lansoprazole CPDR 30 MG</i>	1B		<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)	
<i>NEXIUM 24HR TBEC (esomeprazole magnesium)</i>	1B	QL(2 ea daily)	<i>tolterodine tartrate TABS</i>	1B		
<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)	<i>trospium chloride CP24</i>	1B	QL(1 ea daily)	
<i>omeprazole CPDR</i>	1B	QL(2 ea daily)	<i>trospium chloride TABS</i>	1B	QL(3 ea daily)	
<i>omeprazole TBEC</i>	1B	QL(2 ea daily)	Urinary Antispasmodics - Cholinergic Agonists			
<i>pantoprazole sodium TBEC 40 MG</i>	1B		<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)	
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)	<i>bethanechol chloride 25 MG</i>	1B		
<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)	Urinary Antispasmodics - Direct Muscle Relaxants			
Ulcer Drugs - Prostaglandins			<i>flavoxate hcl</i>	1B		
<i>misoprostol</i>	1B	QL(4 ea daily)	VACCINES			
Ulcer Therapy Combinations			Bacterial Vaccines			
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail	<i>MENACTRA</i>	0		
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC	<i>MENQUADFI</i>	0		
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms						
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)			<i>MENVEO SOLR</i>	0		
<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)	<i>PNEUMOVAX 23</i>	0		
<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA	<i>PNEUMOVAX 23/1 DOSE</i>	0		
<i>oxybutynin chloride SOLN</i>	1B		<i>PREVNAR 13</i>	0		
<i>oxybutynin chloride TABS 5 MG</i>	1B		<i>PREVNAR 20</i>	0	1 max fill(s) per 999 day(s) retail	
<i>oxybutynin chloride TB24</i>	1B		<i>VAXNEUVANCE</i>	0	4 max fill(s) per 999 day(s) retail	
Viral Vaccines						
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)			<i>ABRYSVO</i>	0		
<i>AFLURIA 2024-2025 SUSP</i>			<i>AFLURIA 2024-2025 SUSP</i>	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	
<i>AFLURIA 2024-2025 SUSY</i>			<i>AFLURIA 2024-2025 SUSY</i>	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AFLURIA QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUBLOK QUADRIVALENT 2022-2023	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AREXVY	0		FLUBLOK QUADRIVALENT 2023-2024	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY 2023-24 SUSP	0		FLUCELVAX 2024-2025 SUSY	V1	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY 2023-24 SUSY	0		FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY SUSP	0		FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail	FLUCELVAX QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail			
FLUAD 2024-2025	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail			
FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULALVAL 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULALVAL QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULALVAL QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail
FLUZONE 2024-2025 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSY	0	3 max fill(s) per 365 day(s) retail
FLUZONE 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	HAVRIX	0	1 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	HEPLISAV-B SOSY	0	2 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE PF 2022-2023	0	1 max fill(s) per 180 day(s) retail	IPOL INACTIVATED IPV	0	1 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE PF 2023-2024	0	1 max fill(s) per 180 day(s) retail	M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail
			MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0	
			MODERNA COVID-19 VACCINE6MO-5Y SUSP	0	
			MODERNA COVID-19 VACCINE SUSP	0	
			PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0		TWINRIX SUSY	0	3 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0		VAQTA	0	1 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0		VARIVAX INJ	0	2 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0		VAGINAL AND RELATED PRODUCTS		
PFIZER-BIONTECH COVID-19VACCINE SUSP	0		Miscellaneous Vaginal Products		
PREHEVBRIOD	0	3 max fill(s) per 365 day(s) retail	INTRAROSA	3	QL(1 ea daily); PA
PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail	Spermicides		
RECOMBIVAX HB SUSP	0	1 max fill(s) per 365 day(s) retail	TODAY SPONGE MISC	0	
RECOMBIVAX HB SUSY	0	1 max fill(s) per 365 day(s) retail	Vaginal Anti-infectives		
ROTARIX SUSP	0		<i>clindamycin phosphate vaginal CREA</i>	1B	
ROTARIX SUSR	0	1 max fill(s) per 365 day(s) retail	<i>clotrimazole vaginal CREA 1 %</i>	1B	
ROTAQUE SOLN	0	1 max fill(s) per 365 day(s) retail	GYNAZOLE-1	3	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)	<i>metronidazole vaginal</i>	1B	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0		<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0		<i>terconazole vaginal CREA</i>	1B	
SPIKEVAX COVID-19 VACCINE SUSP	0		<i>terconazole vaginal CREA</i>	1B	
			<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents			Vaginal Anti-inflammatory Agents		
			<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
Vaginal Contraceptive - pH Modulators			Vaginal Contraceptive - pH Modulators		
			PHEXXI	0	PV
Vaginal Estrogens			Vaginal Estrogens		
			<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)
			<i>estradiol vaginal TABS</i>	1B	
			FEMRING	3	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PREMARIN	2	QL(1.5 gm daily)	<i>niacin TABS</i>	1A	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
Anaphylaxis Therapy Agents					
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail	<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors					
<i>midodrine hcl</i>	1B				
VITAMINS					
Oil Soluble Vitamins					
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A				
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0				
<i>ergocalciferol CAPS</i>	0				
<i>ergocalciferol SOLN OR</i>	1B				
<i>VITAMIN D2 TABS 400 UNIT</i>	0	AL(At least 65 yrs old)			
Water Soluble Vitamins					
<i>NIACIN TR TBCR</i>	1B				
<i>niacinamide TABS 100 MG</i>	1B				
<i>niacinamide TABS 500 MG</i>	1A				
<i>niacin CPCR 250 MG, 500 MG</i>	1A				

INDEX

abacavir sulfate SOLN	31	acyclovir SUSP	33	AFLURIA QUADRIVALENT 2022-2023 SUSY	68
abacavir sulfate TABS	31	acyclovir TABS OR	33	AFLURIA QUADRIVALENT 2023-2024 SUSP	68
abacavir sulfate-lamivudine	31	acyclovir topical CREA	41	AFLURIA QUADRIVALENT 2023-2024 SUSY	68
ABELCET	18	acyclovir topical OINT	41	AFSTYLA	50
abiraterone acetate 250 MG	25	ADACEL SUSP	66	AGAMATRIX CONTROL HIGH SOLN	54
abiraterone acetate 500 MG	25	ADALIMUMAB-ADAZ SOAJ	3	AIMOVIG	55
ABRYSVO	67	ADALIMUMAB-ADAZ SOSY	3	AIMSCO LUBRICATED MISC	53
acamprosate calcium	63	adapalene CREA	39	AKYNZEO	17
acarbose	15	adapalene GEL 0.1 %	39	AKYNZEO SOLR	17
acebutolol hcl CAPS	34	adapalene GEL 0.3 %	39	albendazole	7
acetaminophen w/ codeine SOLN ..	6	adapalene-benzoyl peroxide GEL 2.5 % -0.1 %	39	albuterol sulfate AERS	9
acetaminophen w/ codeine TABS 15 MG-300 MG	6	ADCETRIS	25	albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML	10
acetaminophen w/ codeine TABS 30 MG-300 MG	6	adefovir dipivoxil	33	albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML	10
acetaminophen w/ codeine TABS 60 MG-300 MG	6	ADEMPAS	36	albuterol sulfate SYRP	10
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	6	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	66	albuterol sulfate TABS	10
acetazolamide CP12	45	ADVATE	50	alclometasone dipropionate CREA	42
acetazolamide sodium	45	ADVOCATE ARM BLOOD PRESSURE		alclometasone dipropionate OINT	42
acetazolamide TABS 125 MG	45	MONITOR/SMALL/MEDIUM DEVI ..	53	ALDURAZYME	47
acetazolamide TABS 250 MG	45	ADVOCATE CONTROL SOLUTIONHIGH LIQD	54	ALECENSA	26
acetic acid (otic)	62	ADVOCATE REDI-CODE+ CONTROL SOLUTION HIGH SOLN ..		alendronate sodium TABS 35 MG, 70 MG	46
acetic acid 0.25 %	49	54		alendronate sodium TABS 5 MG, 10 MG	46
acetylcysteine SOLN	38	ADYNOVATE	50	alfuzosin hcl	49
acitretin 10 MG, 17.5 MG	41	AFLURIA 2024-2025 SUSP	67	ALIMTA SOLR 100 MG (pemetrexed disodium)	24
acitretin 25 MG	41	AFLURIA 2024-2025 SUSY	67	ALINIA SUSR	21
ACTHAR GEL	46	AFLURIA QUADRIVALENT 2021-2022 SUSY	68		
ACTIMMUNE 100 MCG/0.5ML	28	AFLURIA QUADRIVALENT 2022-2023 SUSP	68		
acyclovir CAPS	33				

aliskiren fumarate	21	amcinonide CREA	42	amoxicillin SUSR 125 MG/5ML	63
allopurinol	50	amcinonide LOTN	42	amoxicillin SUSR 200 MG/5ML, 250	
almotriptan malate 12.5 MG	56	amcinonide OINT	42	MG/5ML, 400 MG/5ML	63
almotriptan malate 6.25 MG	56	amikacin sulfate SOLN 1 GM/4ML,		amoxicillin TABS	63
ALOCRIL	62	500 MG/2ML	2	amoxicillin-clarithromycin w/	
alogliptin benzoate	16	amiloride & hydrochlorothiazide ..	45	lansoprazole THPK	67
alogliptin-metformin hcl	15	amiloride hcl TABS	46	amphetamine-dextroamphetamine	
alogliptin-pioglitazone 15 MG-12.5		aminocaproic acid TABS	51	CP24 1.25 MG-1.25 MG-1.25 MG-	
MG, 30 MG-12.5 MG, 45 MG-12.5		aminophylline SOLN	10	1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5	
MG	15	amiodarone hcl SOLN 50 MG/ML ..	8	MG	1
alogliptin-pioglitazone 15 MG-25 MG,		amiodarone hcl TABS	8	amphetamine-dextroamphetamine	
30 MG-25 MG, 45 MG-25 MG	15	amitriptyline hcl TABS	14	CP24 3.75 MG-3.75 MG-3.75 MG-	
ALOMIDE	62	amlodipine besylate TABS	34	3.75 MG	1
alosetron hcl	49	amlodipine besylate-atorvastatin		amphetamine-dextroamphetamine	
alprazolam TABS 0.25 MG, 0.5 MG,		calcium	35	CP24 5 MG-5 MG-5 MG, 6.25	
1 MG	8	amlodipine besylate-benazepril hcl		MG-6.25 MG-6.25 MG-6.25 MG, 7.5	
alprazolam TABS 2 MG	8	20		MG-7.5 MG-7.5 MG-7.5 MG	1
alprazolam TB24	8	amlodipine besylate-olmesartan		amphetamine-dextroamphetamine	
alprazolam TBDP	8	medoxomil	20	TABS 1.25 MG-1.25 MG-1.25 MG-	
ALPROLIX	50	amlodipine besylate-valsartan ..	20	1.25 MG, 1.875 MG-1.875 MG-1.875	
ALREX SUSP (loteprednol		amlodipine-valsartan-		MG-1.875 MG, 2.5 MG-2.5 MG-2.5	
etabonate)	61	hydrochlorothiazide	20	MG-2.5 MG, 3.125 MG-3.125 MG-	
ALTABAX	40	amoxapine	14	3.125 MG-3.125 MG, 3.75 MG-3.75	
ALTUVIIO	50	amoxicillin & pot clavulanate CHEW		MG-3.75 MG-3.75 MG, 5 MG-5 MG-5	
ALUNBRIG TABS	26	.63	MG	MG	1
ALUNBRIG TBPK	27	amoxicillin & pot clavulanate SUSR		amphetamine-dextroamphetamine	
ALVESCO	9	63		TABS 7.5 MG-7.5 MG-7.5 MG-7.5	
alvimopan	49	amoxicillin & pot clavulanate TABS		MG	1
amantadine hcl CAPS	29	63		amphotericin b IV	18
amantadine hcl SOLN	29	amoxicillin & pot clavulanate TB12	63	amphotericin b liposome	18
amantadine hcl TABS	29	63		ampicillin & sulbactam sodium IJ 1	
ambrisentan	35	amoxicillin CAPS	63	GM-0.5 GM, 2 GM-1 GM	63
		amoxicillin CHEW 125 MG, 250 MG .		ampicillin CAPS 500 MG	63
		63		ampicillin sodium IJ 1 GM	63
				anagrelide hcl	50
				anastrozole	25
				ANDRODERM PT24 2 MG/24HR, 4	

MG/24HR	7	ARZERRA	25	AVONEX PEN AJKT	64
ANNOVERA	37	asenapine maleate 2.5 MG	30	AVONEX PSKT	64
ANORO ELLIPTA	10	asenapine maleate 5 MG, 10 MG ..	30	AYVAKIT	26
ANZEMET TABS 50 MG	17	aspirin CHEW	4	azacitidine SUSR	24
APIDRA SOLN	16	aspirin TABS 325 MG	5	AZASITE	61
APIDRA SOLOSTAR SOPN	16	aspirin TBEC 325 MG	5	AZATHIOPRINE	58
apomorphine hydrochloride SOCT	29	aspirin TBEC 81 MG	5	azathioprine TABS	58
apraclonidine hcl	61	aspirin-dipyridamole	50	azelaic acid GEL	44
aprepitant CAPS 40 MG, 125 MG ..	18	atazanavir sulfate CAPS 150 MG,		azelastine hcl (ophth)	62
aprepitant CAPS 80 MG	18	300 MG	31	azelastine hcl	60
aprepitant CAPS	18	atazanavir sulfate CAPS 200 MG ..	31	AZELEX	39
aprepitant MISC	18	atenolol & chlorthalidone	20	azithromycin PACK	52
APTIOM	11	atenolol TABS	34	azithromycin SOLR	52
APTIVUS CAPS	31	ATGAM	58	azithromycin SUSR	52
ARANESP ALBUMIN FREE SOLN		atomoxetine hcl 10 MG, 18 MG, 25		azithromycin TABS 250 MG	52
25 MCG/ML	51	MG, 40 MG	1	azithromycin TABS 500 MG	52
ARANESP ALBUMIN FREE SOLN		atomoxetine hcl 60 MG, 80 MG, 100		azithromycin TABS 600 MG	52
40 MCG/ML, 60 MCG/ML, 100		MG	1	aztreonam 1 GM	22
MCG/ML	51	atorvastatin calcium TABS	19	bacitracin (ophthalmic)	61
ARANESP ALBUMIN FREE SOSY		atovaquone	21	bacitracin	21
150 MCG/0.3ML, 200 MCG/0.4ML,		atovaquone-proguanil hcl	22	baclofen TABS 10 MG, 20 MG ..	60
300 MCG/0.6ML, 500 MCG/ML ..	51	atropine sulfate SOLN IJ 0.4 MG/ML,		BALCOLTRA (levonorgestrel-ethinyl	
ARCALYST	3	1 MG/ML	66	estradiol-iron)	36
AREXVY	68	atropine sulfate SOSY IJ 0.25		balsalazide disodium CAPS	48
arformoterol tartrate	10	MG/5ML	66	BALVERSA	27
ARIKAYCE	2	ATROVENT HFA	9	BANZEL TABS 200 MG (rufinamide)	
ariPIPrazole SOLN OR	31	AUSTEDO PATIENT TITRATION		11	
ariPIPrazole TABS	31	KIT TBPK	64	BANZEL TABS 400 MG (rufinamide)	
armodafinil	1	AUSTEDO TABS	64	11	
ARMOUR THYROID TABS	66	AUSTEDO XR PATIENT TITRATION		BARACLUDE SOLN	33
ARNUITY ELLIPTA	9	KIT TEPK	64	BASAGLAR KWIKPEN SOPN	16
arsenic trioxide 10 MG/10ML	28	AUSTEDO XR TB24	64		

BAVENCIO	25	BESIVANCE	61	bisoprolol & hydrochlorothiazide ..	20
BAXDELA SOLR	48	BESPONSA	25	bisoprolol fumarate	34
BAXDELA TABS	48	betaine	47	bleomycin sulfate 15 UNIT	26
BELEODAQ	27	betamethasone dipropionate (topical)		BLINCYTO	25
BELRAPZO SOLN	23	CREA	42	BOOSTRIX SUSP	66
BELSOMRA	52	betamethasone dipropionate (topical)		BOOSTRIX SUSY	66
benazepril & hydrochlorothiazide		LOTN	42	bortezomib SOLR IJ	27
12.5 MG-10 MG, 25 MG-20 MG ..	20	betamethasone dipropionate (topical)		BORTEZOMIB SOLR IV 3.5 MG ..	27
benazepril & hydrochlorothiazide		OINT	42	bosentan TABS 125 MG	35
12.5 MG-20 MG, 6.25 MG-5 MG ..	20	betamethasone dipropionate		bosentan TABS 62.5 MG	35
benazepril hcl	20	augmented CREA	42	BOSULIF TABS 100 MG, 500 MG ..	27
bendamustine hcl SOLR	23	betamethasone dipropionate		BOSULIF TABS 400 MG	27
BENDAMUSTINE		augmented LOTN	42	BRAFTOVI 75 MG	27
HYDROCHLORIDE SOLN	23	betamethasone valerate CREA ..	42	BREO ELLIPTA (fluticasone furoate-	
BENDEKA SOLN	23	betamethasone valerate FOAM ..	42	vilanterol)	10
BENEFIX KIT	50	betamethasone valerate LOTN ..	42	BREO ELLIPTA	10
BENZEPRO CREAMY WASH LIQD ..		betamethasone valerate OINT ..	42	BREZTRI AEROSPHERE	10
39		BETASERON KIT	64	BRILINTA	50
benzonatate 100 MG	38	betaxolol hcl (ophth) SOLN ..	60	brimonidine tartrate (topical)	44
benzonatate 150 MG	38	betaxolol hcl	34	brimonidine tartrate 0.15 %, 0.2 % ..	61
benzonatate 200 MG	38	bethanechol chloride 25 MG ..	67	brimonidine tartrate-timolol maleate ..	
benzoyl peroxide FOAM 5.3 %, 9.8 %		bethanechol chloride 5 MG, 10 MG,		60	
.....	39	50 MG	67	brinzolamide	62
benzoyl peroxide GEL 10 %	39	bexarotene (topical)	41	BRIVIACT SOLN OR 10 MG/ML ..	11
benzoyl peroxide GEL 5 %	39	bexarotene	28	BRIVIACT TABS	12
benzoyl peroxide LIQD 4 %, 7 %, 10 %	39	bicalutamide	25	bromfenac sodium (ophth)	62
benzoyl peroxide-erythromycin GEL ..		BIKTARVY	31	bromocriptine mesylate CAPS	29
39		bimatoprost SOLN	62	bromocriptine mesylate TABS 2.5 MG	29
benztropine mesylate SOLN	29	bisacodyl SUPP	52	BRUKINSA	27
benztropine mesylate TABS	29	bisacodyl TBEC	52	budesonide (inhalation) SUSP	9
bepotastine besilate	62				

budesonide (intrarectal)	7	CAPS 40 MG-50 MG-325 MG	4	calcium chloride (dihydrate) SOLN	57
budesonide (nasal)	60	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	4	calcium polycarbophil TABS	52
budesonide CPEP	37	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	6	CALQUENCE	27
budesonide-formoterol fumarate dihydrate	10	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	6	CAMPTOSAR 300 MG/15ML (irinotecan hcl)	29
bumetanide SOLN 0.25 MG/ML	45	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	6	candesartan cilexetil	20
bumetanide TABS	45	butalbital-aspirin-caffeine CAPS	4	candesartan cilexetil-hydrochlorothiazide	20
buprenorphine hcl SOLN	7	butalbital-aspirin-caffeine w/cod	6	capecitabine	24
buprenorphine hcl SUBL	7	butenafine hcl	40	CAPRELSA	27
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	7	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	7	captopril 12.5 MG	20
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	7	butorphanol tartrate NA 10 MG/ML	7	captopril 25 MG, 50 MG, 100 MG	20
buprenorphine hcl-naloxone hcl dihydrate SUBL	7	cabergoline	47	carbamazepine CHEW	12
buprenorphine PTWK	7	CABLIVI	50	carbamazepine CP12 100 MG	12
bupropion hcl (smoking deterrent)	65	CABOMETYX TABS	27	carbamazepine CP12 200 MG	12
bupropion hcl TABS	13	calcipotriene CREA	41	carbamazepine CP12 300 MG	12
bupropion hcl TB12 100 MG	13	calcipotriene OINT	41	carbamazepine SUSP	12
bupropion hcl TB12 150 MG	13	calcipotriene SOLN	41	carbamazepine TABS	12
bupropion hcl TB12 200 MG	13	calcipotriene-betamethasone dipropionate OINT	42	carbamazepine TB12 100 MG, 400 MG	12
bupropion hcl TB24 150 MG	13	calcipotriene-betamethasone dipropionate SUSP	42	carbamazepine TB12 200 MG	12
bupropion hcl TB24 300 MG	13	calcitonin (salmon) NA	46	carbidopa	29
buspirone hcl 5 MG	8	calcitriol (topical)	41	carbidopa-levodopa TABS	29
buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG	8	calcitriol CAPS	47	carbidopa-levodopa TBCR	29
busulfan SOLN	23	calcitriol SOLN IV	47	carbidopa-levodopa TBDP	29
butalbital-acetaminophen TABS 50 MG-325 MG	4	calcium acetate (phosphate binder) CAPS	49	carbidopa-levodopa-entacapone ..	29
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG	4	calcium acetate (phosphate binder) TABS	49	carbinoxamine maleate SOLN	18
butalbital-acetaminophen-caffeine				carbinoxamine maleate TABS 4 MG	18
				carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML	23
				carboplatin SOLN 50 MG/5ML	23

carisoprodol TABS	60	ceftriaxone sodium IJ 250 MG	36	MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT	71
carmustine	23	cefuroxime axetil TABS	36	cholecalciferol TABS 10 MCG, 400 UNIT	71
carteolol hcl (ophth)	60	cefuroxime sodium IJ 750 MG	36	cholestyramine light PACK	19
carvedilol	34	celecoxib	4	cholestyramine light POWD	19
carvedilol phosphate	34	CELONTIN (methsuximide)	13	cholestyramine PACK	19
caspofungin acetate	18	cephalexin CAPS	36	cholestyramine POWD	19
CAYA DPRH	53	cephalexin SUSR	36	choline fenofibrate	19
CAYSTON	22	CERDELGA	50	CHORIONIC GONADOTROPIN IM	
cefaclor CAPS	36	CEREZYME 400 UNIT	50	cetirizine hcl TABS	18
cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	36	cevimeline hcl	59	ciclopirox GEL	40
cefadroxil CAPS	36	CHEMET	17	ciclopirox olamine CREA	40
cefadroxil SUSR	36	CHEMSTRIP-K STRP	44	ciclopirox olamine SUSP	40
cefadroxil TABS	36	chloramphenicol sodium succinate		ciclopirox SHAM	40
cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	36	22		ciclopirox SOLN	40
cefdinir CAPS	36	chlordiazepoxide hcl CAPS	8	cidofovir	33
cefdinir SUSR	36	chlordiazepoxide hcl-clidinium		cilostazol	50
cefepime hcl SOLR IV 2 GM	36	bromide	66	CIMDUO	31
cefixime CAPS	36	chlordiazepoxide-amitriptyline	64	cimetidine TABS	66
cefixime SUSR	36	chlorhexidine gluconate (mouth- throat)	58	cinacalcet hcl	47
cefotaxime sodium IJ 1 GM, 2 GM	36	chloroquine phosphate TABS 250 MG	22	CIPRO SUSR	48
cefotetan disodium IJ 1 GM, 2 GM	36	chloroquine phosphate TABS 500 MG		ciprofloxacin hcl (ophth) SOLN	61
cefoxitin sodium IV 1 GM, 2 GM	36	MG	22	ciprofloxacin hcl (otic)	62
cefpodoxime proxetil SUSR	36	chlorpromazine hcl SOLN	31	ciprofloxacin hcl TABS	48
cefpodoxime proxetil TABS	36	chlorpromazine hcl TABS	31	ciprofloxacin in d5w 5 %-200 MG/100ML	48
cefprozil SUSR	36	chlorthalidone 25 MG, 50 MG	46	ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML	48
cefprozil TABS	36	chlorzoxazone TABS 500 MG	60	ciprofloxacin-dexamethasone	62
ceftazidime IJ 1 GM, 6 GM	36	chlorzoxazone TABS 750 MG	60	ciprofloxacin-fluocinolone acetonide ..	62
ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG	36	CHOLBAM	48		
		cholecalciferol CAPS 1.25 MG, 1.25			

cisplatin SOLN 100 MG/100ML	23	GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	22	clopidogrel bisulfate 300 MG	50
cisplatin SOLN 50 MG/50ML	23			clopidogrel bisulfate 75 MG	50
citalopram hydrobromide SOLN	13	clindamycin phosphate vaginal CREA		clorazepate dipotassium TABS	8
citalopram hydrobromide TABS 10 MG	13	clindamycin phosphate-benzoyl peroxide (refrigerate)	39	clotrimazole (topical) CREA	40
citalopram hydrobromide TABS 20 MG	13	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	39	clotrimazole (topical) SOLN	40
citalopram hydrobromide TABS 40 MG	13	clindamycin phosphate-tretinoin	39	clotrimazole	58
cladribine 10 MG/10ML	24	CLINIMIX 4.25%/DEXTROSE 10%		clotrimazole vaginal CREA 1 %	70
clarithromycin SUSR	52	60		clotrimazole w/ betamethasone CREA	40
clarithromycin TABS	52	CLINIMIX 4.25%/DEXTROSE 5%	60	clotrimazole w/ betamethasone LOTN	40
clarithromycin TB24	53	CLINIMIX E 5%/DEXTROSE 20%	60	clozapine TABS	30
CLASSIC PRENATAL TABS	59	clobazam SUSP	11	clozapine TBDP 100 MG	30
clemastine fumarate SYRP	18	clobazam TABS	11	clozapine TBDP 12.5 MG, 150 MG	30
clemastine fumarate TABS 2.68 MG	18	clobetasol propionate CREA 0.05 %	42	clozapine TBDP 25 MG	30
CLEVER CHOICE GLUCOSE CONTROL HIGH LIQD	54	clobetasol propionate emollient base 0.05 %	42	COARTEM	22
CLIMARA PRO	48	clobetasol propionate FOAM	42	codeine sulfate TABS 30 MG	5
clindamycin hcl	22	clobetasol propionate GEL 0.05 %	42	CODEINE SULFATE TABS	5
clindamycin palmitate hydrochloride	22	clobetasol propionate OINT 0.05 %	42	colchicine TABS	50
clindamycin phosphate (topical) FOAM	39	clobetasol propionate SOLN 0.05 %	42	colchicine w/ probenecid	50
clindamycin phosphate (topical) GEL	39	clocortolone pivalate	42	colesevelam hcl PACK	19
clindamycin phosphate (topical) LOTN	39	clofarabine	24	colesevelam hcl TABS	19
clindamycin phosphate (topical) SOLN	39	clomipramine hcl	14	colestipol hcl GRAN	19
clindamycin phosphate (topical) SWAB	39	clonazepam TABS	11	colestipol hcl PACK	19
clindamycin phosphate SOLN IJ 9		clonidine	20	colestipol hcl TABS	19
		clonidine hcl (adhd) TB12	1	COMBIVIR (lamivudine-zidovudine)	31
		clonidine hcl TABS	20	COMETRIQ KIT	27
				COMIRNATY 2023-24 SUSP	68
				COMIRNATY 2023-24 SUSY	68

COMIRNATY SUSP	68	cyclosporine CAPS	58	hcl 1000 MG-10 MG	15
COMPLERA	31	cyclosporine modified (for microemulsion) CAPS	58	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	15
CONTOUR HIGH CONTROL LIQD 54		cyclosporine modified (for microemulsion) SOLN	58	dapsone	22
CONTRAVE	1	cyclosporine SOLN IV 50 MG/ML .	58	daptomycin 500 MG	22
COPIKTRA	27	CYLTEZO AJKT	3	darifenacin hydrobromide	67
CORDRAN TAPE	42	CYLTEZO PSKT 10 MG/0.2ML ..	3	darunavir TABS 600 MG	31
CORLANOR SOLN	36	CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	darunavir TABS 800 MG	31
CORLANOR TABS	36	CYLTEZO PSKT 40 MG/0.4ML ..	3	DARZALEX	25
CORTISPORIN-TC	62	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	3	DAUNORUBICIN HYDROCHLORIDE SOLN 50 MG/10ML	26
COSENTYX SENSOREADY PEN SOAJ	41	CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	3	DAURISMO	25
COSENTYX SOSY 150 MG/ML ..	41	CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ..	3	DEBACTEROL	58
COSENTYX SOSY 75 MG/0.5ML .	41	cyproheptadine hcl SYRP	19	decitabine	24
COSENTYX UNOREADY SOAJ ..	41	cyproheptadine hcl TABS	19	deferasirox PACK	17
CREON CPEP	45	CYRAMZA	24	deferasirox TABS	17
CRESEMBA CAPS 186 MG	18	CYSTAGON CAPS	49	deferasirox TBSO	17
cromolyn sodium (ophth)	62	CYSTARAN	62	deferiprone TABS 500 MG	17
cromolyn sodium NEBU	9	cytarabine SOLN	24	deferoxamine mesylate	17
crotamiton LOTN	44	dabigatran etexilate mesylate CAPS .		deflazacort SUSP	38
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG- 263 MG-11 UNIT-4000 UNIT	59	11		deflazacort TABS	38
cyanocobalamin SOLN IJ 1000 MCG/ML	51	dacarbazine SOLR 200 MG	28	DELESTROGEN 10 MG/ML (estradiol valerate)	48
cyclobenzaprine hcl TABS 5 MG, 10 MG	60	dactinomycin	26	DELSTRIGO	31
cyclophosphamide CAPS	23	dalfampridine	64	demeclocycline hcl TABS	65
cyclophosphamide SOLR IJ	23	danazol CAPS	7	DEPO-ESTRADIOL	48
cycloserine	23	dantrolene sodium CAPS	60	DEPO-MEDROL SUSP	38
cyclosporine (ophth) EMUL	61	dapagliflozin propanediol	16	DEPO-SUBQ PROVERA 104 SUSY SC	37
		dapagliflozin propanediol-metformin		DESCOVY 200 MG-25 MG	31
				DESFERAL 500 MG (deferoxamine	

mesylate)	17	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	38	diazepam TABS	8
desipramine hcl TABS	14			diazoxide	16
desloratadine TABS	18	dexamethasone sodium phosphate		dichlorphenamide	45
desloratadine TBDP 2.5 MG	18	SOSY IJ 4 MG/ML	38	diclofenac epolamine PTCH EX ...	40
desmopressin acetate SOLN IJ ...	47	dexamethasone SOLN	38	diclofenac potassium TABS 50 MG .	4
DESMOPRESSIN ACETATE SOLN NA	47	dexamethasone TABS 0.5 MG, 0.75 MG	38	diclofenac sodium (actinic keratoses) EX	41
desmopressin acetate spray	47	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	38	diclofenac sodium (ophth)	62
desmopressin acetate spray refrigerated	47	dexchlorpheniramine maleate SOLN .		diclofenac sodium (topical) GEL EX	
desmopressin acetate TABS 0.1 MG		18		41	
47		dexlansoprazole	66		
desmopressin acetate TABS 0.2 MG		dexmethylphenidate hcl CP24	1	diclofenac sodium TB24	4
47		dexmethylphenidate hcl TABS	2	diclofenac sodium TBEC	4
desogestrel & ethynodiol dienoate		dextroamphetamine sulfate CP24 10 MG, 15 MG	1	diclofenac w/ misoprostol TBEC	4
desogestrel-ethynodiol dienoate (biphasic)	37	dextroamphetamine sulfate CP24 5 MG	1	dicloxacillin sodium	63
desogestrel-ethynodiol dienoate (triphasic)	37	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG .	1	dicyclomine hcl CAPS	66
desonide CREA	42	1		dicyclomine hcl SOLN OR	66
desonide LOTN	42	dextroamphetamine sulfate TABS 5 MG, 10 MG	1	dicyclomine hcl TABS	66
desonide OINT	42	dextroamphetamine sulfate TABS 5 MG, 10 MG	1	DIFFERIN LOTN	39
desoximetasone CREA 0.25 %	42	dextrose in lactated ringers	57	DIFICID TABS	53
desoximetasone GEL	42	DIACOMIT CAPS 250 MG	12	diflorasone diacetate CREA	42
desoximetasone OINT 0.25 %	42	DIACOMIT CAPS 500 MG	12	diflorasone diacetate OINT	42
desvenlafaxine succinate 100 MG		DIACOMIT PACK 250 MG	12	diflunisal TABS	5
14		DIACOMIT PACK 500 MG	12	difluprednate	61
desvenlafaxine succinate 25 MG, 50 MG	14	DIATRUE GLUCOSE CONTROL SOLUTION LEVEL 3 SOLN	54	digoxin SOLN OR 0.05 MG/ML ...	35
		diazepam (anticonvulsant) GEL ...	11	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG	35
dexamethasone ELIX	38	diazepam CONC	8	dihydroergotamine mesylate SOLN IJ 1 MG/ML	56
DEXAMETHASONE INTENSOL CONC	38	diazepam SOLN OR 5 MG/5ML	8	dihydroergotamine mesylate SOLN NA 4 MG/ML	56
dexamethasone sodium phosphate (ophth)	61			DILANTIN (phenytoin sodium	

extended)	13	divalproex sodium TB24	13	doxycycline (monohydrate) CAPS 50 MG, 100 MG	65
DILANTIN	13	divalproex sodium TBEC	13	doxycycline (monohydrate) CAPS 75 MG	65
DILANTIN INFATABS CHEW (phenytoin)	13	docetaxel CONC 20 MG/ML	28	doxycycline (monohydrate) TABS 100 MG	65
DILANTIN-125 SUSP (phenytoin) .	13	docetaxel SOLN 20 MG/2ML	28	doxycycline (monohydrate) TABS 50 MG, 75 MG	65
diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	34	docusate calcium	52	doxycycline hyclate CAPS	65
diltiazem hcl coated beads CP24 180 MG, 240 MG	34	docusate sodium CAPS 100 MG ..	52	doxycycline hyclate SOLR	65
diltiazem hcl CP12	34	docusate sodium CAPS 250 MG ..	52	doxycycline hyclate TABS 20 MG, 100 MG	65
diltiazem hcl CP24	34	dofetilide	9	doxylamine-pyridoxine TBEC	18
diltiazem hcl extended release beads	34	donepezil hydrochloride TABS 10 MG	63	dronabinol CAPS	18
diltiazem hcl SOLN 50 MG/10ML ..	34	donepezil hydrochloride TABS 5 MG, 23 MG	63	drospirenone-ethinyl estradiol	37
DILTIAZEM HCL SOLR	34	donepezil hydrochloride TBDP 10 MG	64	drospirenone-ethinyl estradiol-levomefolate calcium	37
diltiazem hcl TABS	34	DOPELET	51	DROXIA CAPS	50
diltiazem hcl TB24	34	dorzolamide hcl	62	DUAVEE	48
dimethyl fumarate CDPK	64	dorzolamide hcl-timolol maleate ..	61	DULERA	10
dimethyl fumarate CPDR	64	DOVATO	31	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	14
DIPENTUM	48	doxazosin mesylate	20	duloxetine hcl CPEP 40 MG	14
diphenhydramine hcl CAPS 50 MG 18		doxepin hcl (antipruritic)	41	DUPIXENT SOPN 200 MG/1.14ML 43	
diphenhydramine hcl ELIX 12.5 MG/5ML	18	doxepin hcl (sleep)	51	DUPIXENT SOPN 300 MG/2ML ..43	
diphenhydramine hcl LIQD 12.5 MG/5ML	18	doxepin hcl CAPS	14	DUPIXENT SOSY 100 MG/0.67ML 43	
diphenhydramine hcl SOLN 50 MG/ML	18	doxepin hcl CONC	14	DUPIXENT SOSY 200 MG/1.14ML 43	
diphenoxylate w/ atropine LIQD ..	17	doxercalciferol CAPS	47	DUPIXENT SOSY 300 MG/2ML ..43	
diphenoxylate w/ atropine TABS ..	17	doxercalciferol SOLN	47	DUREX EXTRA SENSITIVE THIN DEVI	53
dipyridamole	50	doxorubicin hcl liposomal	26	DUREX EXTRA SENSITIVE THIN	
disopyramide phosphate CAPS ..	8	doxorubicin hcl SOLN	26		
disulfiram	63	doxorubicin hcl SOLR 10 MG ..	26		
		doxorubicin hcl SOLR 50 MG ..	26		

MISC	53	ELIGARD KIT SC 7.5 MG	25	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20	
DUREX TROPICAL MISC	53	ELIGARD SC 22.5 MG, 30 MG, 45 MG	25	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20	
dutasteride	49	ELIQUIS STARTER PACK TBPK .	10	enalapril maleate TABS	20
dutasteride-tamsulosin hcl	49	ELIQUIS TABS	10	ENBREL MINI SOCT	4
EASY PLUS II CONTROL SOLUTION HIGH SOLN	54	ELITEK	28	ENBREL SOLN	4
EASY STEP CONTROL SOLUTION HIGH SOLN	54	ELLA	37	ENBREL SOSY 25 MG/0.5ML	4
EASY TALK CONTROL SOLUTION HIGH SOLN	54	ELLIOTTS B	57	ENBREL SOSY 50 MG/ML	4
EASY TALK PLUS II CONTROLHIGH SOLN	54	ELMIRON CAPS	49	ENBREL SURECLICK SOAJ	4
EASY TRAK GLUCOSE CONTROLSOLUTION HIGH SOLN 54		ELOCTATE	50	ENGERIX-B SUSP 20 MCG/ML ...	68
econazole nitrate CREA	40	EMBRACE GLUCOSE CONTROL SOLUTION HIGH LIQD	55	ENGERIX-B SUSY	68
EDARBI	20	EMBRACE TALK GLUCOSE CONTROL SOLUTION HIGH SOLN .	55	enoxaparin sodium SOLN IJ 300 MG/3ML	11
EDURANT	31	EMCYT	25	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11
efavirenz CAPS 200 MG	31	EMFLAZA SUSP	38	enoxaparin sodium SOSY 30 MG/0.3ML	11
efavirenz CAPS 50 MG	31	EMFLAZA TABS (deflazacort)	38	enoxaparin sodium SOSY 40 MG/0.4ML	11
efavirenz TABS	31	EMGALITY SOAJ	55	enoxaparin sodium SOSY 60 MG/0.6ML	11
efavirenz-emtricitabine-tenofovir disoproxil fumarate	31	EMGALITY SOSY 100 MG/ML	56	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11
efavirenz-lamivudine-tenofovir disoproxil fumarate	31	EMGALITY SOSY 120 MG/ML	55	ENSPRYNG	58
EGRIFTA 2 MG	46	EMPLICITI	25	entacapone	29
EGRIFTA SV	46	EMSAM	13	entecavir TABS	33
ELAPRASE	47	emtricitabine CAPS	31	EPIDIOLEX	12
electrolyte-148	57	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	31	epinastine hcl (ophth)	62
electrolyte-a	57	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	31	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	71
ELEMENT HIGH CONTROL LIQD	55	EMTRIVA CAPS (emtricitabine) ...	31	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	71
ELESTRIN GEL	48	EMTRIVA SOLN	31		
eletriptan hydrobromide	56	EMVERM CHEW	7		

EPIVIR HBV SOLN	33	ERTACZO	40	estradiol vaginal TABS	70
EPIVIR HBV TABS (lamivudine (hbv))	33	ertapenem sodium IJ	21	estradiol valerate	48
EPIVIR SOLN (lamivudine)	31	erythromycin (acne aid) PADS	39	ESTROGEL GEL (estradiol)	48
EPIVIR TABS 150 MG (lamivudine) 31		erythromycin (acne aid) SOLN	39	eszopiclone	52
EPIVIR TABS 300 MG (lamivudine) 31		erythromycin (ophth)	61	ethacrynic acid	45
eplerenone	21	erythromycin base CPEP	53	ethambutol hcl TABS	23
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	51	erythromycin base TABS	53	ethosuximide CAPS	13
epoprostenol sodium	35	erythromycin base TBEC	53	ethosuximide SOLN	13
EPZICOM (abacavir sulfate-lamivudine)	31	erythromycin ethylsuccinate SUSR 53		ethynodiol diacet & eth estrad	37
EQL PRENATAL FORMULA TABS 59		erythromycin ethylsuccinate TABS 53		etodolac CAPS	4
EQUETRO 100 MG	30	escitalopram oxalate SOLN	13	etodolac TABS	4
EQUETRO 200 MG	30	escitalopram oxalate TABS 10 MG 14		etonogetrel-ethinyl estradiol	37
EQUETRO 300 MG	30	escitalopram oxalate TABS 20 MG 14		ETOPOPHOS	28
ERAXIS	18	escitalopram oxalate TABS 5 MG . 14		etoposide CAPS	28
ERBITUX	25	esomeprazole magnesium CPDR 20 MG	66	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	29
ergocalciferol CAPS	71	esomeprazole magnesium CPDR 40 MG	66	etravirine 100 MG	31
ergocalciferol SOLN OR	71	esomeprazole magnesium TBEC	66	etravirine 200 MG	31
ergoloid mesylates TABS	65	ESPEROCT	50	EUCRISA	44
ERGOMAR SUBL	56	estazolam	52	EVAMIST SOLN	48
ergotamine w/ caffeine TABS	56	estradiol GEL 0.06 %	48	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	58
eribulin mesylate	28	estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM	48	everolimus (immunosuppressant) 1 MG	58
ERIVEDGE	25	estradiol PTTW	48	everolimus TABS	27
ERLEADA 240 MG	25	estradiol PTWK	48	EVOMELA IV	23
ERLEADA 60 MG	25	estradiol TABS	48	EVOTAZ	31
erlotinib hcl	25	estradiol vaginal CREA	70	exemestane	25
				ezetimibe	19
				ezetimibe-simvastatin	19
				famciclovir 125 MG, 250 MG	33

famciclovir 500 MG	33	MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	68
famotidine in nacl SOLN	66	ferrous fumarate-folic acid	51	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	68
famotidine SOLN 20 MG/2ML	66	ferrous sulfate SOLN 15 MG/ML ..	51	FLUCELVAX QUADRIVALENT 2023-2024 SUSP	68
famotidine SOLN 40 MG/4ML, 200 MG/20ML	66	ferrous sulfate TABS 65 MG, 325 MG	51	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	69
famotidine SUSR	66	fesoterodine fumarate	67	fluconazole SUSR	18
famotidine TABS 20 MG, 40 MG ..	66	FETZIMA CP24	14	fluconazole TABS	18
FANAPT	30	FETZIMA TITRATION PACK C4PK 14		flucytosine	18
FANAPT TITRATION PACK	30	finasteride	49	fludarabine phosphate SOLN	24
FANTASY LUBRICATED MISC ..	53	fingolimod hcl	64	fludarabine phosphate SOLR	24
FANTASY LUBRICATED/SPERMICIDE MISC 53		FIRDAPSE	23	fludrocortisone acetate TABS	38
FARXIGA	16	FIRMAGON	25	FLULALVAL 2024-2025 SUSY	69
FASENRA PEN SOAJ	9	flavoxate hcl	67	FLULALVAL QUADRIVALENT 2022- 2023 SUSY	69
FASENRA SOSY 30 MG/ML	9	flecainide acetate	8	FLULALVAL QUADRIVALENT 2023- 2024 SUSY	69
FC2 FEMALE CONDOM	53	floxuridine	24	FLUMIST QUADRIVALENT	69
febuxostat	50	FLUAD 2024-2025	68	flunisolide (nasal) 0.025 %	60
felbamate SUSP	12	FLUAD QUADRIVALENT 2022-2023	68	fluocinolone acetonide (otic)	62
felbamate TABS 400 MG	12	FLUAD QUADRIVALENT 2023-2024	68	fluocinolone acetonide CREA 0.01 % 42	
felbamate TABS 600 MG	12	FLUARIX 2024-2025 SUSY	68	fluocinolone acetonide CREA 0.025 %	42
felodipine	34	FLUARIX QUADRIVALENT 2022- 2023 SUSY	68	fluocinolone acetonide OIL	42
FEMCAP DEVI	53	FLUARIX QUADRIVALENT 2023- 2024 SUSY	68	fluocinolone acetonide OINT	42
FEMRING	70	FLUBLOK QUADRIVALENT 2022- 2023	68	fluocinolone acetonide SOLN	43
fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ...	19	FLUBLOK QUADRIVALENT 2023- 2024 SUSY	68	fluocinonide CREA 0.05 %	43
fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	19	FLUCELVAX 2024-2025 SUSY	68	fluocinonide CREA 0.1 %	43
fenoprofen calcium TABS	4	FLUCELVAX QUADRIVALENT 2023- 2024	68	fluocinonide emulsified base	43
FENSOLVI SC	47	FLUCELVAX QUADRIVALENT 2023- 2024 SUSY	68	fluocinonide GEL	43
fentanyl citrate LPOP	5	FLUCELVAX 2024-2025 SUSY	68		
fentanyl PT72 12 MCG/HR, 25					

fluocinonide OINT	43	fluticasone propionate CREA 0.05 % 43	folic acid TABS	51
fluocinonide SOLN	43	fluticasone propionate hfa	FOLOTYN 40 MG/2ML	24
fluorometholone (ophth) SUSP	61	fluticasone propionate LOTN	fondaparinux sodium 2.5 MG/0.5ML .	11
fluorouracil (topical) CREA 5 %	41	fluticasone propionate OINT	11	fondaparinux sodium 5 MG/0.4ML,
fluorouracil (topical) SOLN	41	fluticasone-salmeterol AEPB 100	7.5 MG/0.6ML, 10 MG/0.8ML	11
fluorouracil 1 GM/20ML, 2.5 GM/50ML, 5 GM/100ML	24	MCG/ACT-50 MCG/ACT, 250	FORA CONTROL SOLUTION HIGH	
fluorouracil 500 MG/10ML	24	MCG/ACT-50 MCG/ACT, 500	SOLN	55
fluoxetine hcl CAPS 10 MG	14	MCG/ACT-50 MCG/ACT	FORA GTEL BLOOD KETONE TEST	
fluoxetine hcl CAPS 20 MG	14	fluticasone-salmeterol AERO	STRIPS	44
fluoxetine hcl CAPS 40 MG	14	fluvastatin sodium CAPS 20 MG ...	FORA TEST N' GO	
fluoxetine hcl CPDR	14	19	ADVANCE/VOICE/6 CONNECT ..	44
fluoxetine hcl SOLN	14	fluvastatin sodium CAPS 40 MG ...	FORACARE GDH CONTROL	
fluoxetine hcl TABS 10 MG, 60 MG 14		19	SOLUTION HIGH SOLN	55
fluoxetine hcl TABS 20 MG	14	fluvoxamine maleate TABS 100 MG .	formoterol fumarate NEBU	10
fluphenazine hcl CONC	31	14	FORTEO SOPN (teriparatide (recombinant))	46
fluphenazine hcl ELIX	31	fluvoxamine maleate TABS 25 MG, 50 MG	FORTISCARE CONTROL	
fluphenazine hcl SOLN	31	69	SOLUTIONS HIGH SOLN	55
fluphenazine hcl TABS	31	FLUZONE 2024-2025 SUSY	FOSAMAX PLUS D	46
flurandrenolide CREA	43	69	fosamprenavir calcium TABS	31
flurandrenolide LOTN	43	FLUZONE HIGH-DOSE PF 2023- 2024	fosfomycin tromethamine	22
flurazepam hcl	52	69	fosinopril sodium & hydrochlorothiazide	20
flurbiprofen sodium	62	FLUZONE QUADRIVALENT 2022- 2023 SUSP	fosinopril sodium	20
flurbiprofen TABS	4	69	fosphenytoin sodium	13
flutamide	26	FLUZONE QUADRIVALENT 2023- 2024 SUSP	FRAGMIN SOSY	11
fluticasone furoate-vilanterol	10	69	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	55
fluticasone propionate (inhalation) AEPB	9	FLUZONE QUADRIVALENT 2023- 2024 SUSY	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH	
fluticasone propionate (nasal) SUSP .	60	69	MONITORING SYSTEM	55
		FML FORTE SUSP	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE	
		61		
		FML OINT		
		61		

MONITORING SYSTEM	55	GM/100ML, 20 GM/200ML	62	glatiramer acetate SOSY 40 MG/ML	64
FREESTYLE LIBRE		GAMMAGARD LIQUID 30		GLEOSTINE 10 MG	23
2/SENSOR/FLASH GLUCOSE		GM/300ML	62	GLEOSTINE 40 MG, 100 MG	23
MONITORING SYSTEM	55	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	62	glimepiride 1 MG, 2 MG	16
FREESTYLE LIBRE		GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	62	glimepiride 4 MG	16
3/READER/GLUCOSE		GAMUNEX-C	63	glipizide TABS 5 MG, 10 MG	17
MONITORING SYSTEM	55	ganciclovir sodium SOLR	33	glipizide TB24	17
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	55	ganirelix acetate	46	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	15
frovatriptan succinate	56	GARDASIL 9 SUSP	69	glipizide-metformin hcl 500 MG-5 MG	15
fulvestrant SOSY	26	GARDASIL 9 SUSY	69	GLUCAGEN DIAGNOSTIC	44
furosemide SOLN OR 10 MG/ML, 40 MG/5ML	45	gatifloxacin (ophth)	61	glucagon (rdna)	16
furosemide TABS	46	GAZYVA	25	GLUCOCOM HIGH CONTROL LIQD	55
FUZEON SOLR	32	gefitinib	25	glyburide micronized 1.5 MG, 3 MG, 6 MG	17
FYCOMPA TABS 2 MG	11	gemcitabine hcl SOLR 1 GM	24	glyburide TABS	17
FYCOMPA TABS 4 MG	11	gemcitabine hcl SOLR 2 GM	24	glyburide-metformin 250 MG-1.25 MG	15
FYCOMPA TABS 6 MG	11	gemcitabine hcl SOLR 200 MG	24	glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	15
FYCOMPA TABS 8 MG, 10 MG, 12 MG	11	gemfibrozil TABS	19	glycine (gu irrigant) SOLN 1.5 %	49
gabapentin CAPS	12	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %	2	glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML	66
gabapentin SOLN	12	gentamicin sulfate (ophth) OINT	61	glycopyrrolate TABS 1 MG	66
gabapentin TABS 600 MG, 800 MG 12		gentamicin sulfate (ophth) SOLN	61	glycopyrrolate TABS 2 MG	66
GALAFOLD	47	gentamicin sulfate (topical) CREA	40	GLYXAMBI	15
galantamine hydrobromide CP24 ..	64	gentamicin sulfate (topical) OINT	40	GNP PRENATAL TABS	59
galantamine hydrobromide SOLN ..	64	gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML	2	GOJJI BLOOD KETONE TEST STRIPS	44
galantamine hydrobromide TABS ..	64	GENVOYA	32	gransitron hcl SOLN IV 1 MG/ML	17
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10		GILOTrif	25	glatiramer acetate SOSY 20 MG/ML	64

granisetron hcl TABS	17	HEPSERA (adefovir dipivoxil)	33	MG-7.5 MG	6
GRANIX SOLN	51	HUMATROPE CART IJ	46	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6
GRANIX SOSY	51	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	6
GRASTEK SUBL	2	HUMIRA PEN PNKT 80 MG/0.8ML .	3	hydrocodone-ibuprofen 7.5 MG-200 MG	6
griseofulvin microsize SUSP	18	HUMIRA PEN PNKT	3	hydrocortisone (intrarectal)	7
griseofulvin microsize TABS	18	HUMIRA PEN-CD/UC/HS STARTER PNKT	3	hydrocortisone (rectal) EX	7
griseofulvin ultramicrosize	18	HUMIRA PEN-PS/UV STARTER PNKT	3	hydrocortisone (topical) CREA 1 %, 2.5 %	43
guanfacine hcl (adhd)	1	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	3	hydrocortisone (topical) LOTN 2.5 % .	43
guanfacine hcl	20	HUMIRA PSKT	3	hydrocortisone (topical) OINT 1 %, 2.5 %	43
GYNAZOLE-1	70	HUMULIN R U-500 (CONCENTRATED) SOLN SC	16	hydrocortisone acetate (rectal)	7
HADLIMA PUSHTOUCH SOAJ	3	HUMULIN R U-500 KWIKPEN SOPN SC	16	hydrocortisone butyrate CREA	43
HADLIMA SOSY	3	HYCAMTIN CAPS	29	hydrocortisone butyrate OINT	43
HAEGARDA SOLR SC	50	hydralazine hcl SOLN	21	hydrocortisone butyrate SOLN	43
HALAVEN (eribulin mesylate)	29	hydralazine hcl TABS	21	hydrocortisone TABS	38
halcinonide CREA	43	hydrochlorothiazide CAPS	46	hydrocortisone vaginal	70
halobetasol propionate CREA	43	hydrochlorothiazide TABS 12.5 MG 46		hydrocortisone valerate CREA	43
halobetasol propionate OINT	43	hydrochlorothiazide TABS 25 MG, 50 MG	46	hydrocortisone valerate OINT	43
HALOG OINT	43	hydrocodone bitartrate T24A	5	hydrocortisone w/acetic acid	62
haloperidol decanoate	30	hydrocodone polistirex- chlorpheniramine polistirex SUER .	38	hydromorphone hcl LIQD	5
haloperidol lactate CONC	30	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	6	hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	5
haloperidol lactate SOLN	30			hydromorphone hcl TABS	5
haloperidol TABS	30			hydromorphone hcl TB24 32 MG ..	5
HAVRIX	69			hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	5
HEMANGEOL SOLN OR	34				
heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	11				
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	11				
HEPLISAV-B SOSY	69	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300			

hydroxychloroquine sulfate 100 MG 23	ifosfamide SOLR	24	16
hydroxychloroquine sulfate 200 MG 23	IFOSFAMIDE SOLR	24	INSULIN ASPART
hydroxychloroquine sulfate 400 MG 23	imatinib mesylate	27	PROTAMINE/INSULIN ASPART FLEXPEN SUPN
hydroxyurea	IMBRUVICA CAPS 140 MG	27	16
hydroxyzine hcl SOLN 50 MG/ML ..8	IMBRUVICA CAPS 70 MG	27	INSULIN ASPART
hydroxyzine hcl SYRP	IMBRUVICA SUSP	27	PROTAMINE/INSULIN ASPART SUSP
hydroxyzine hcl TABS	IMBRUVICA TABS	27	16
HYPERSAL NEBU	IMFINZI	25	INSULIN DEGLUDEC FLEXTOUCH SOPN
HYQVIA	imipenem-cilastatin IV	22	16
IBRANCE CAPS	imipramine hcl TABS	15	INTELENCE 100 MG (etravirine) ..32
IBRANCE TABS	imipramine pamoate	15	INTELENCE 200 MG (etravirine) ..32
ibandronate sodium SOLN	imiquimod 5 %	44	INTELENCE 25 MG
IYSINGLA ER T24A	IMLYGIC	29	32
ibandronate sodium TABS	IMPAVIDO	21	INTRAROSA
IBRANCE CAPS	INCRELEX	47	70
IBRANCE TABS	INCRUSE ELLIPTA	9	INTRON A SOLR 18000000 UNIT 28
ibuprofen SUSP 100 MG/5ML ..4	indapamide TABS 1.25 MG	46	IONOSOL-MB/DEXTROSE 5% ..57
ibuprofen TABS 400 MG, 600 MG ..4	indapamide TABS 2.5 MG	46	IOPIDINE
ibuprofen TABS 800 MG ..4	indomethacin CAPS 25 MG, 50 MG 4	60	61
icatibant acetate SOLN	indomethacin CPCR	4	IPOL INACTIVATED IPV
icatibant acetate SOSY	INFED	51	69
ICLUSIG	INFINITY CONTROL SOLUTION HIGH SOLN	55	ipratropium bromide (nasal) 0.03 %
icosapent ethyl 1 GM	INFLECTRA SOLR	48	60
idarubicin hcl 20 MG/20ML	INGREZZA CAPS	64	ipratropium bromide (nasal) 0.06 %
idarubicin hcl 5 MG/5ML, 10 MG/10ML	INGREZZA CPPK	64	9
IDELVION	INLYTA	24	ipratropium bromide SOLN 0.02 % .9
IFEX SOLR	INREBIC	27	ipratropium-albuterol SOLN
ifosfamide SOLN 1 GM/20ML ..24	INSULIN ASPART FLEXPEN SOPN 16	10	20
	INSULIN ASPART PENFILL SOCT		25
			irbesartan
			20
			irbesartan-hydrochlorothiazide ....20
			IRESSA (gefitinib)
			25
			irinotecan hcl 300 MG/15ML
			29
			irinotecan hcl 40 MG/2ML, 100 MG/5ML
			29
			irrigation solutions, physiological ..58
			ISENTRESS CHEW
			32

ISENTRESS HD TABS	32	JEVTANA	29	KIMONO LUBRICATED MISC	53
ISENTRESS PACK	32	JIVI	50	KIMONO MAXX/LARGE FLARE	
ISENTRESS TABS	32	JULUCA	32	MISC	53
ISOLYTE-P/DEXTROSE 5%	57	KADCYLA	25	KIMONO MICRO THIN PLUS	
ISOLYTE-S	57	KALETRA SOLN (lopinavir-ritonavir) .	32	SPERMICIDE LUBRICATED MISC	
isoniazid SOLN	23	KALETRA TABS (lopinavir-ritonavir) .	32	53	
isoniazid SYRP	23	KALYDECO TABS	65	KIMONO PLUS SPERMICIDE	
isoniazid TABS	23	KAMELEON LUBRICATED MISC	53	LUBRICATED MISC	53
isosorbide dinitrate TABS 5 MG, 10		KANJINTI	25	KIMONO PLUS	
MG, 20 MG, 30 MG	8	KCL 0.3%/D5W/NACL 0.9%		SPERMICIDE/LUBRICATED MISC	
isosorbide dinitrate-hydralazine hcl		(potassium chloride in dextrose &		53	
35		sodium chloride)	57	KIMONO PS LUBRICATED MISC	53
isosorbide mononitrate TABS	8	KEPIVANCE 6.25 MG	28	KIMONO PS PLUS	
isosorbide mononitrate TB24	8	KESIMPTA	64	SPERMICIDE/LUBRICATED MISC	
isotretinoin 10 MG, 20 MG, 30 MG,		ketoconazole (topical) CREA	40	53	
40 MG	39	ketoconazole (topical) SHAM 2 %	40	KIMONO SENSATION	
isradipine CAPS	34	KETONE STRP	44	LUBRICATED MISC	53
itraconazole CAPS	18	KETONE TEST STRIPS STRP	44	KIMONO SENSATION PLUS	
itraconazole SOLN	18	ketoprofen CAPS 50 MG	4	SPERMICIDE LUBRICATED MISC	
ivabradine hcl TABS	36	ketorolac tromethamine (ophth)	62	53	
ivermectin (pediculicide)	44	ketorolac tromethamine TABS	4	KIMONO SPECIAL DEVI	53
ivermectin	8	KETOSTIX STRP	44	KINRIX SUSY	66
IXEMPRA KIT 15 MG	29	ketotifen fumarate (ophth) 0.035 %		KISQALI	27
IXEMPRA KIT 45 MG	29	KEVZARA SOAJ	3	KISQALI FEMARA 200 DOSE	26
JAKAFI	27	KEVZARA SOSY	3	KISQALI FEMARA 400 DOSE	26
JANUMET TABS	15	KEYTRUDA	25	KISQALI FEMARA 600 DOSE	26
JANUMET XR TB24 1000 MG-100		KHAPZORY	28	KLARITY-A	61
MG	15	KIMONO COLORS DEVI	53	KOGENATE FS KIT	50
JANUMET XR TB24 1000 MG-50				KOSELUGO	27
MG, 500 MG-50 MG	15			KOVALTRY	50
JANUVIA	16			KP PRENATAL MULTIVITAMINS	
JARDIANCE	16			TABS	59
				KRINTAFEL	23
				K-Y ME & YOU EXTRA	

LUBRICATED DEVI	53	lanthanum carbonate CHEW	49	levetiracetam TABS 1000 MG	12
K-Y ME & YOU INTENSE DEVI	53	lapatinib ditosylate	27	levetiracetam TABS 250 MG, 750	
KYPROLIS	27	LASTACRAFT	62	MG	12
labetalol hcl SOLN	34	latanoprost SOLN	62	levetiracetam TABS 500 MG	12
labetalol hcl TABS 100 MG, 200 MG	34	leflunomide	4	levetiracetam TB24	12
labetalol hcl TABS 300 MG	34	lenalidomide 2.5 MG, 5 MG, 10 MG,		levobunolol hcl 0.5 %	61
lacosamide SOLN IV 200 MG/20ML	12	15 MG, 25 MG	58	levocetirizine dihydrochloride SOLN	
lacosamide TABS	12	lenalidomide 20 MG	58	18	
lactated ringer's (irrigation)	58	LENVIMA 10 MG DAILY DOSE	24	levocetirizine dihydrochloride TABS	
lactated ringer's	57	LENVIMA 12MG DAILY DOSE	24	18	
lactic acid (ammonium lactate) CREA		LENVIMA 14 MG DAILY DOSE	24	levofloxacin (ophth) 0.5 %	61
.....	43	LENVIMA 18 MG DAILY DOSE	24	levofloxacin in d5w 5 %-500	
lactic acid (ammonium lactate) LOTN		LENVIMA 20 MG DAILY DOSE	24	MG/100ML	48
12 %	43	LENVIMA 24 MG DAILY DOSE	24	levofloxacin SOLN OR	48
lactulose (encephalopathy)	49	LENVIMA 4 MG DAILY DOSE	24	levofloxacin TABS 250 MG, 750 MG	
lactulose SOLN	52	LENVIMA 8 MG DAILY DOSE	25	48	
lamivudine (hbv) TABS	33	letrozole	26	levofloxacin TABS 500 MG	48
lamivudine SOLN	32	leucovorin calcium SOLR	28	levonorgestrel & eth estradiol TABS	
lamivudine TABS 150 MG	32	LEUKERAN	24	37	
lamivudine TABS 300 MG	32	LEUKINE SOLR IJ	51	levonorgestrel (emergency oc) 1.5	
lamivudine-zidovudine	32	leuprolide acetate KIT IJ 1 MG/0.2ML		MG	37
lamotrigine CHEW 25 MG	12	.....	26	levonorgestrel-eth estradiol	
lamotrigine CHEW 5 MG	12	levalbuterol hcl	10	(triphasic)	37
lamotrigine TABS	12	levalbuterol hcl 1.25 MG/0.5ML	10	levonorgestrel-ethinyl estradiol	
lamotrigine TBDP	12	levalbuterol tartrate	10	(91-day) 0.03 MG-0.15 MG	37
LANOXIN SOLN IJ (digoxin)	35	LEVEMIR FLEXPEN SOPN	16	levonorgestrel-ethinyl estradiol-iron	
LANOXIN TABS 62.5 MCG, 125		LEVEMIR FLEXTOUCH SOPN	16	levorphanol tartrate TABS 2 MG	5
MCG, 250 MCG (digoxin)	35	LEVEMIR SOLN	16	levothyroxine sodium TABS	66
lansoprazole CPDR 15 MG	67	levetiracetam SOLN IV 500 MG/5ML		LEXIVA SUSP	32
lansoprazole CPDR 30 MG	67	12		LEXIVA TABS (fosamprenavir	
				calcium)	32

LIBERTY CONTROL SOLUTION HIGH SOLN	55	lopinavir-ritonavir TABS	32	LUPRON DEPOT (4-MONTH) IM ..	26
LIBTAYO	25	loratadine CAPS	19	LUPRON DEPOT (6-MONTH) IM ..	26
lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	52	loratadine CHEW	19	LUPRON DEPOT-PED (1-MONTH) ..	47
lidocaine hcl (mouth-throat) 2 % ..	58	loratadine SOLN	19	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	47
lidocaine hcl (mouth-throat) 4 % ..	58	loratadine TABS	19	LUPRON DEPOT-PED (3-MONTH) 30 MG	47
lidocaine hcl GEL 2 %	44	loratadine TBDP	19	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	30
lidocaine hcl PRSY	44	lorazepam CONC	8	lurasidone hcl 80 MG	30
lidocaine hcl SOLN	44	lorazepam TABS 0.5 MG, 2 MG ..	8	LYNPARZA TABS	27
lidocaine PTCH 5 %	44	lorazepam TABS 1 MG	8	LYSODREN	26
lidocaine-prilocaine CREA	44	LORBRENA	27	mafenvide acetate PACK	41
lincomycin hcl	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	21	magnesium sulfate IJ 50 %	57
linezolid SUSR	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG ..	21	malathion	44
linezolid TABS	22	losartan potassium	20	maraviroc TABS 150 MG	32
LINZESS	49	LOTEMAX OINT	61	maraviroc TABS 300 MG	32
liothyronine sodium SOLN	66	loteprednol etabonate GEL	61	MARPLAN	13
liothyronine sodium TABS	66	loteprednol etabonate SUSP	61	MASONATAL TABS	59
liraglutide	16	lovastatin TABS 10 MG, 20 MG ..	19	MATULANE	28
lisdexamfetamine dimesylate CAPS 1	1	lovastatin TABS 40 MG	19	MAXIDEX SUSP OP	61
lisinopril & hydrochlorothiazide ..	20	loxapine succinate	30	MAXX LUBRICATED MISC	53
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	20	lubiprostone	48	MAXX PLUS SPERMICIDE LUBRICATED MISC	53
lithium	30	LUCEMYRA	63	meclizine hcl TABS 12.5 MG	17
lithium carbonate CAPS	30	luliconazole	40	meclizine hcl TABS 25 MG	17
lithium carbonate TABS	30	LUMIZYME	47	meclofenamate sodium CAPS	4
lithium carbonate TBCR	30	LUMOXITI	25	MEDROL TABS	38
LO LOESTRIN FE TABS	37	LUPRON DEPOT (1-MONTH) KIT IM	26	medroxyprogesterone acetate (contraceptive) SUSP IM	37
LOKELMA	58	LUPRON DEPOT (3-MONTH) KIT IM	26	medroxyprogesterone acetate	
loperamide hcl CAPS	17				
lopinavir-ritonavir SOLN	32				

(contraceptive) SUSY IM	37	mesalamine ENEM	49	MG/2ML, 250 MG/10ML	24
medroxyprogesterone acetate 10 MG	63	mesalamine SUPP	49	methotrexate sodium SOLR	24
medroxyprogesterone acetate 2.5 MG, 5 MG	63	mesalamine TBEC 1.2 GM	49	methotrexate sodium TABS 2.5 MG	24
mefenamic acid CAPS	4	mesalamine TBEC 800 MG	49	methoxsalen rapid	41
mefloquine hcl	23	mesna SOLN	28	methscopolamine bromide	66
megestrol acetate (appetite)	63	MESNEX SOLN (mesna)	28	methsuximide	13
megestrol acetate SUSP	26	metaxalone 800 MG	60	methyldopa TABS	20
megestrol acetate TABS	26	metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 10 MG .2	
MEKINIST TABS	27	metformin hcl TABS 500 MG	15	methylphenidate hcl CHEW 2.5 MG 2	
MEKTOVI	27	metformin hcl TABS 850 MG	15	methylphenidate hcl CHEW 5 MG ..2	
meloxicam TABS	4	metformin hcl TB24 500 MG	15	methylphenidate hcl CP24 10 MG, 60	
melphalan	24	metformin hcl TB24 750 MG	16	MG	2
melphalan hcl IV	24	methadone hcl CONC	5	methylphenidate hcl CP24 20 MG, 40	
memantine hcl TABS	64	methadone hcl SOLN IJ 10 MG/ML .5	5	MG	2
MENACTRA	67	METHADONE HCL SOLN IJ	5	methylphenidate hcl CP24 30 MG ..2	
MENEST	48	methadone hcl SOLN OR 10 MG/5ML	5	methylphenidate hcl CP24	2
MENOSTAR PTWK	48	methadone hcl SOLN OR 5 MG/5ML	5	methylphenidate hcl CPCR	2
MENQUADFI	67	methadone hcl TABS 10 MG	5	methylphenidate hcl SOLN	2
MENVEO SOLR	67	methadone hcl TABS 5 MG	5	methylphenidate hcl TABS 10 MG,	
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5	methadone hcl TBSO	5	20 MG	2
meperidine hcl SOLN OR 50 MG/5ML	5	methamphetamine hcl	1	methylphenidate hcl TABS 5 MG ...2	
meperidine hcl TABS 50 MG	5	methazolamide TABS	45	methylphenidate hcl TB24 18 MG, 27	
meprobamate	8	methenamine hippurate	22	MG	2
mercaptopurine TABS	24	methimazole TABS	66	methylphenidate hcl TB24 36 MG, 54	
meropenem	22	METHITEST TABS	7	MG	2
mesalamine CP24	48	methocarbamol TABS 500 MG, 750 MG	60	methylphenidate hcl TBCR 10 MG,	
mesalamine CPDR	49	METHOTREXATE	3	20 MG	2
		methotrexate sodium SOLN 50		methylphenidate hcl TBCR 18 MG,	
				27 MG	2
				methylphenidate hcl TBCR 36 MG,	
				54 MG	2
				methylphenidate PTCH	2

methylprednisolone acetate SUSP	38	MG	70	mometasone furoate OINT	43
methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	38	midodrine hcl	71	mometasone furoate SOLN	43
methylprednisolone TABS	38	miglitol	15	montelukast sodium CHEW	9
methylprednisolone TBPK	38	miglustat	50	montelukast sodium PACK	9
metoclopramide hcl SOLN IJ 5 MG/ML	48	minocycline hcl CAPS	65	montelukast sodium TABS	9
metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	48	minocycline hcl TABS	65	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	5
metoclopramide hcl TABS	48	minoxidil 2.5 MG, 10 MG	21	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	5
metolazone	46	MIRCERA	51	morphine sulfate SOLN OR 10 MG/5ML	5
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	21	mirtazapine TABS 15 MG	13	morphine sulfate SOLN OR 20 MG/5ML	5
metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	21	mirtazapine TABS 30 MG	13	morphine sulfate TABS 15 MG	5
metoprolol succinate TB24 200 MG 34		mirtazapine TABS 7.5 MG, 45 MG	13	morphine sulfate TABS 30 MG	5
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	34	mirtazapine TBDP 15 MG	13	morphine sulfate TBCR	6
metoprolol tartrate SOLN IV 5 MG/5ML	34	mirtazapine TBDP 30 MG	13	MOTOFEN	17
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	34	mirtazapine TBDP 45 MG	13	MOVANTIK	49
metronidazole (topical) CREA	44	misoprostol	67	moxifloxacin hcl (ophth) SOLN OP	61
metronidazole (topical) GEL 0.75 % 44		mitomycin SOLR IV 20 MG	26	moxifloxacin hcl in sodium chloride	
metronidazole (topical) GEL 1 % ..	44	mitoxantrone hcl 2 MG/ML	26	48	
metronidazole (topical) LOTN	44	M-M-R II SOLR	69	moxifloxacin hcl TABS	48
metronidazole TABS	21	M-NATAL PLUS TABS	59	MOZOBIL (plerixafor)	51
metronidazole vaginal	70	modafinil 100 MG	2	MULPLETA	51
mexiletine hcl	8	modafinil 200 MG	2	MULTI PRENATAL TABS	59
micafungin sodium	18	MODERNA COVID-19 VACCINE SUSP	69	mupirocin OINT	40
miconazole nitrate vaginal SUPP 200		MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 69		MVASI	25
		MODERNA COVID-19 VACCINE6MO-5Y SUSP	69	MYALEPT	47
		moexipril hcl	20	mycophenolate mofetil CAPS	58
		mometasone furoate (nasal) SUSP 60		mycophenolate mofetil TABS	58
		mometasone furoate CREA	43	mycophenolate sodium	58

MYLERAN TABS	24	neomycin-bacitracin zn-polymyxin	61	NIACIN TR TBCR	71
MYLOTARG	25	neomycin-polomy-dexameth OINT	61	niacinamide TABS 100 MG	71
nabumetone	4	neomycin-polomy-dexameth SUSP	61	niacinamide TABS 500 MG	71
nadolol TABS 20 MG	34	neomycin-polomyxin-hc (ophth) ..	61	nicardipine hcl CAPS	34
nadolol TABS 40 MG	34	neomycin-polomyxin-hc (otic) SOLN .	62	nicardipine hcl SOLN	34
nadolol TABS 80 MG	34	neomycin-polomyxin-hc (otic) SUSP .	62	nicotine MISC XX	65
nafcillin sodium IV 10 GM	63	neomycin-polomyxin-hc (otic) SUSP .	62	nicotine polacrilex GUM	65
naftifine hcl CREA 1 %	40	NEONATAL COMPLETE TABS 120		nicotine polacrilex LOZG	65
naftifine hcl CREA 2 %	40	MG-10 MG-9.2 MG-1000 MCG-10		nicotine PT24 TD 7 MG/24HR, 14	
NAGLAZYME	47	MCG-12 MCG-3 MG-5 MG-20 MG-		MG/24HR, 21 MG/24HR	65
nalbuphine hcl	7	27 MG-200 MG-1.84 MG-25 MG-2		NICOTINE TRANSDERMAL	
naloxone hcl LIQD	17	MG-1200 MCG-2 MG-0.2 MG	59	SYSTEM KIT	65
naloxone hcl SOLN 0.4 MG/ML, 4		NEONATAL PLUS TABS	59	NICOTROL INHALER INHA	65
MG/10ML	17	NEONATAL PRENATAL VITAMIN		NICOTROL NS SOLN	65
naltrexone hcl	17	TABS	59	nifedipine CAPS 10 MG	34
naproxen sodium TABS 550 MG ...	4	NEONATAL VITAMIN TABS	59	nifedipine CAPS 20 MG	34
naproxen SUSP	4	neostigmine methylsulfate SOSY ..	23	nifedipine TB24 60 MG	35
naproxen TABS	4	NEO-SYNALAR	40	nifedipine TB24 90 MG	35
naproxen TBEC 500 MG	4	NEUPRO	29	nifedipine TB24	35
naratriptan hcl	56	NEVANAC	62	nilutamide	26
NATACYN	61	nevirapine SUSP	32	nimodipine CAPS	35
NATAZIA	37	nevirapine TABS	32	NINLARO	27
nateglinide	16	nevirapine TB24 100 MG	32	NIPENT	28
NAYZILAM	11	nevirapine TB24 400 MG	32	nisoldipine	35
nebivolol hcl 2.5 MG, 5 MG, 10 MG		NEXIUM 24HR TBEC (esomeprazole		nitazoxanide TABS	21
34		magnesium)	67	nitisinone CAPS	47
nebivolol hcl 20 MG	34	NEXTSTELLIS	37	NITRO-BID OINT	8
NEBUSAL NEBU	38	niacin (antihyperlipidemic) TBCR ..	19	nitrofurantoin	22
nefazodone hcl	14	niacin CPCR 250 MG, 500 MG ..	71	nitrofurantoin macrocrystal 50 MG,	
nelarabine	24	niacin TABS	71	100 MG	22
neomycin sulfate TABS	2	niacin TBCR	71	nitrofurantoin monohyd macro ..	22

nitroglycerin (intra-anal)	7	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	37	NUCYNTA TABS	6
nitroglycerin CPCR	8	NORMOSOL-M/D5W	57	NUEDEXTA	65
nitroglycerin PT24	8	NORMOSOL-R	57	NULOJIX	58
NITROGLYCERIN SOLN IV	8	nortriptyline hcl CAPS	15	nystatin (mouth-throat)	58
nitroglycerin SUBL	8	nortriptyline hcl SOLN	15	nystatin (topical) CREA	40
NIVA-PLUS TABS	59	NORVIR CAPS	32	nystatin (topical) OINT	40
nizatidine CAPS	66	NORVIR PACK	32	nystatin (topical) POWD EX	40
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	47	NORVIR SOLN	32	nystatin TABS	18
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	47	NORVIR TABS (ritonavir)	32	nystatin-triamcinolone CREA	40
norelgestromin-ethinyl estradiol ..	37	NOVA MAX PLUS KETONE TESTSTRIPS	44	nystatin-triamcinolone OINT	40
norethin acet & estrad-fe CAPS ..	37	NOVOEIGHT	50	octreotide acetate SOLN	47
norethin acet & estrad-fe CHEW ..	37	NOVOLIN 70/30 FLEXPEN SUPN 16		ODEFSEY	32
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	37	NOVOLIN 70/30 SUSP	16	ODOMZO	25
norethindrone & eth estradiol ..	37	NOVOLIN N FLEXPEN SUPN	16	OFEV	65
norethindrone & ethinyl estradiol-fe ..	37	NOVOLIN N SUSP	16	ofloxacin (ophth)	61
norethindrone (contraceptive) ..	37	NOVOLIN R FLEXPEN SOPN IJ ..	16	ofloxacin (otic)	62
norethindrone acet & eth estra ..	37	NOVOLIN R SOLN IJ	16	ofloxacin 300 MG, 400 MG	48
norethindrone acetate TABS	63	NOXAFIL SUSP (posaconazole) ..	18	OGIVRI	25
norethindrone acetate-ethinyl estradiol	48	NP THYROID 120 TABS	66	olanzapine SOLR	30
norethindrone acetate-ethinyl estradiol-fe	37	NP THYROID 15 TABS	66	olanzapine TABS 2.5 MG, 5 MG ..	30
norethindrone-eth estradiol (triphasic)	37	NP THYROID 30 TABS	66	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	30
norgestimate-ethinyl estradiol (triphasic)	37	NP THYROID 60 TABS	66	olanzapine TBDP 20 MG	30
norgestimate-ethinyl estradiol	37	NP THYROID 90 TABS	66	olanzapine TBDP 5 MG, 10 MG, 15 MG	30
		NUBEQA	26	olmesartan medoxomil	20
		NUCALA SOAJ	9	olmesartan medoxomilamlodipinehydrochlorothiazide	21
		NUCALA SOLR	9	olmesartan medoxomilhydrochlorothiazide	21
		NUCALA SOSY 100 MG/ML	9	olopatadine hcl (nasal)	60
		NUCALA SOSY 40 MG/0.4ML	9		
		NUCYNTA ER TB12	6		

olopatadine hcl 0.1 %	62	OPILL	37	40 MG, 80 MG	6
olopatadine hcl 0.2 %	62	OPSUMIT	35	oxycodone hcl TABS	6
omega-3-acid ethyl esters	19	ORENITRAM TBCR	35	oxycodone w/ acetaminophen TABS	
omeprazole CPDR	67	ORILISSA	46	325 MG-10 MG, 325 MG-5 MG, 325	
omeprazole magnesium CPDR ...	67	ORKAMBI PACK	65	MG-7.5 MG	7
omeprazole TBEC	67	ORKAMBI TABS	65	oxycodone w/ acetaminophen TABS	
omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	67	ORLADEYO	50	325 MG-2.5 MG	6
OMNIFLEX DIAPHRAGM	53	orphenadrine citrate TB12	60	oxymorphone hcl TABS	6
ONCASPAR	28	oseltamivir phosphate CAPS	33	oxymorphone hcl TB12 40 MG	6
ondansetron hcl SOLN IJ 4 MG/2ML . 17		oseltamivir phosphate SUSR	34	oxymorphone hcl TB12 5 MG, 7.5	
ondansetron hcl SOLN OR 4 MG/5ML	17	OSMOPREP	52	MG, 10 MG, 15 MG, 20 MG, 30 MG 6	
ondansetron hcl SOSY	17	OSPHENA	47	OZEMPIC SOPN 2 MG/1.5ML	16
ondansetron hcl TABS 24 MG	17	OTEZLA TABS	4	OZEMPIC SOPN	16
ondansetron hcl TABS 4 MG	17	OTEZLA TBPK	4	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML	29
ondansetron hcl TABS 8 MG	17	oxacillin sodium IV 10 GM	63	paclitaxel 6 MG/ML, 30 MG/5ML, 300	
ondansetron TBDP 4 MG	17	oxaliplatin SOLN 50 MG/10ML, 100		MG/50ML	29
ondansetron TBDP 8 MG	17	MG/20ML	24	paclitaxel protein-bound particles ..	29
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	59	oxandrolone	7	paliperidone 1.5 MG, 3 MG, 9 MG .	30
ONE VITE WOMENS PRENATALVITAMIN TABS	59	oxaprozin TABS	4	paliperidone 6 MG	30
ONETOUCH DELICA SAFETY LANCING DEVICE	55	oxazepam CAPS	8	palonosetron hcl SOLN	17
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	55	OXBRYTA TABS 500 MG	50	pamidronate disodium SOLN 30	
ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	55	oxcarbazepine SUSP	12	MG/10ML, 90 MG/10ML	46
ONIVYDE	29	oxcarbazepine TABS 150 MG, 300		PAMIDRONATE DISODIUM SOLN	
OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	25	MG	12	46	
OXISTAT LOTN		oxcarbazepine TABS 600 MG	12	PANCREAZE CPEP 149900 UNIT-	
oxybutynin chloride SOLN	67	oxiconazole nitrate CREA	40	97300 UNIT-37000 UNIT, 15200	
oxybutynin chloride TABS 5 MG ..	67	OXISTAT LOTN	40	UNIT-8800 UNIT-2600 UNIT, 24600	
oxybutynin chloride TB24	67	oxybutynin chloride TABS 5 MG ..	67	UNIT-14200 UNIT-4200 UNIT, 61500	
oxycodone hcl T12A 10 MG, 20 MG,		oxybutynin chloride TB24	67	UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000	
				UNIT, 98400 UNIT-56800 UNIT- 16800 UNIT	45
				PANRETIN	41
				pantoprazole sodium TBEC 20 MG	

67	penicillamine TABS	58	PHEBURANE PLLT	47
pantoprazole sodium TBEC 40 MG 67	penicillin g potassium 5000000 UNIT 63		phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	49
paricalcitol CAPS	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	63	phendimetrazine tartrate TABS	1
paricalcitol SOLN	PENICILLIN G PROCAINE	63	phenelzine sulfate	13
paroxetine hcl SUSP	penicillin g sodium	63	phenobarbital ELIX	51
paroxetine hcl TABS 10 MG	penicillin v potassium SOLR	63	phenobarbital TABS	51
paroxetine hcl TABS 20 MG	penicillin v potassium TABS	63	phenoxybenzamine hcl	20
paroxetine hcl TABS 30 MG	pentazocine w/ naloxone hcl	7	phentermine hcl CAPS	1
paroxetine hcl TABS 40 MG	pentoxifylline	50	phenytoin CHEW	13
paroxetine hcl TB24 12.5 MG	perindopril erbumine 2 MG, 8 MG ..	20	phenytoin sodium extended 100 MG, 200 MG, 300 MG	13
paroxetine hcl TB24 25 MG, 37.5 MG 14	perindopril erbumine 4 MG	20	phenytoin sodium SOLN	13
PASER PACK	PERJETA	25	phenytoin SUSP	13
pazopanib hcl	permethrin CREA	44	PHEXXI	70
pediatric multivitamins w/fl CHEW .59	permethrin LIQD EX	44	PHOSLYRA SOLN	49
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	perphenazine TABS	31	PHOTOFRIN	28
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM 52	perphenazine-amitriptyline	64	PIFELTRO	32
peg 3350-potassium chloride-sod bicarbonate-sod chloride	PERSERIS PRSY	30	pilocarpine hcl (oral)	59
PEGASYS SOLN	PFIZER-BIONTECH COVID- 19VACCINE SUSP	70	pilocarpine hcl SOLN 1 %, 2 %, 4 % ..	61
PEGASYS SOSY	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y SUSP	70	pimecrolimus	44
PEMAZYRE	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2023-24 SUSP	70	pimozide	65
pemetrexed disodium SOLR 100 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y SUSP	70	pindolol TABS	34
pemetrexed disodium SOLR 500 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP	70	pioglitazone hcl	16
penciclovir	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..	70	pioglitazone hcl-glimepiride	15
penicillamine CAPS	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..	70	pipleracillin sodium-tazobactam sodium	63
			PIQRAY 200MG DAILY DOSE ..	27
			PIQRAY 250MG DAILY DOSE ..	27

PIQRAY 300MG DAILY DOSE	27	potassium chloride in dextrose 5 %-20 MEQ/L	57	praziquantel	8
pirfenidone CAPS	65	potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	57	prazosin hcl CAPS	20
pirfenidone TABS 534 MG	65	potassium chloride microencapsulated crystals er	57	PRECISION XTRA	44
piroxicam CAPS	4	potassium chloride PACK OR 20 MEQ	57	PRED MILD	62
PLASMA-LYTE A (electrolyte-a)	57	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride)	57	PRED-G SUSP	62
PLASMA-LYTE-148 (electrolyte-148)	57	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	57	prednicarbate OINT	43
PLEGRIDY SOPN	64	potassium chloride TBCR	57	prednisolone acetate (ophth)	62
PLEGRIDY SOSY SC	64	POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	57	PREDNISOLONE SODIUM PHOSPHATE	62
PLEGRIDY STARTER PACK SOPN	64	POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	57	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML	38
plerixafor	51	potassium citrate (alkalinizer) TBCR	49	prednisolone sodium phosphate TBDP	38
PNEUMOVAX 23	67	POTASSIUM CHLORIDE/SODIUM CHLORIDE 236 MG/ML-224 MG/ML	57	prednisolone SOLN	38
PNEUMOVAX 23/1 DOSE	67	POTELIGEO	25	prednisolone TABS	38
podofilox SOLN	44	PR BENZOYL PEROXIDE WASH	39	prednisone SOLN	38
polymyxin b sulfate SOLR	22	LIQD	24	prednisone TABS 1 MG, 5 MG	38
polymyxin b-trimethoprim	61	pralatrexate	24	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	38
POMALYST	26	pramipexole dihydrochloride TABS 0.125 MG	29	prednisone TBPK	38
PORTRAZZA	25	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	29	pregabalin (once-daily) 330 MG	65
posaconazole SUSP	18	prasugrel hcl	50	pregabalin (once-daily) 82.5 MG, 165 MG	64
potassium acetate SOLN 2 MEQ/ML	57	pravastatin sodium	19	pregabalin CAPS 225 MG, 300 MG	12
potassium bicarbonate TBEF	57			pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG	12
potassium chloride CPCR	57			pregabalin SOLN	12
potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	57			PREHEVBRI	70
				PREMARIN	71
				PREMARIN SOLR	48

PREMARIN TABS	48	PRIFTIN	23	propranolol hcl CP24	34
PREMIUM CONDOMS		primaquine phosphate TABS	23	propranolol hcl SOLN OR 20	
LUBRICATED MISC	53	primidone 50 MG, 250 MG	12	MG/5ML, 40 MG/5ML	34
PREMPHASE	48	PRIORIX SUSR	70	propranolol hcl TABS	34
PREMPRO	48	probenecid	50	propylthiouracil	66
PRENATAL MULTIVITAMIN TABS	59	procainamide hcl SOLN 500 MG/ML .	8	protriptyline hcl	15
PRENATAL ONE DAILY TABS	59	prochlorperazine	31	PULMICORT FLEXHALER AEPB ..	9
PRENATAL PLUS TABS	59	prochlorperazine maleate TABS ..	31	PULMOZYME	65
PRENATAL PLUS VITAMIN ANDMINERAL TABS	59	PROCRIPT 2000 UNIT/ML, 3000		PX PRENATAL MULTIVITAMINS	
PRENATAL TABS	59	UNIT/ML, 4000 UNIT/ML, 10000		TABS	59
PRENATAL VITAMIN & MINERAL TABS	59	UNIT/ML, 20000 UNIT/ML	51	pyrazinamide	23
PRENATAL VITAMIN TABS	59	PROCRIPT 40000 UNIT/ML	51	pyridostigmine bromide SOLN OR	23
PRENATAL VITAMIN/IRON TABS	59	PRODIGY CONTROL		pyridostigmine bromide TABS 60 MG	
PRENATAL VITAMINS PLUS LOW IRON TABS	59	SOLUTIONHIGH SOLN	55	..... .....	23
PRENATAL VITAMINS TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8		progesterone CAPS	63	pyridostigmine bromide TBCR	23
MCG-1.7 MG-20 MG-28 MG-200		PROGRAF PACK	58	pyrimethamine	23
MG-1.8 MG-25 MG-4000 UNIT-30		PROGRAF SOLN	58	QC PRENATAL TABS	59
UNIT	59	PROLASTIN-C SOLN	65	QINLOCK	27
PRENATRIX TABS	59	PROLEUKIN	28	QUADRACEL SUSP	66
PRENATRYL TABS	59	PROLIA SOSY	46	QUADRACEL SUSY	66
PREVNAR 13	67	PROMACTA PACK	51	quetiapine fumarate TABS 25 MG,	
PREVNAR 20	67	PROMACTA TABS	51	50 MG, 100 MG, 200 MG	30
PREZCOBIX	32	promethazine hcl SOLN OR 6.25		quetiapine fumarate TABS 300 MG,	
PREZISTA SUSP	32	MG/5ML	19	400 MG	30
PREZISTA TABS (darunavir)	32	promethazine hcl SUPP 12.5 MG, 25		quetiapine fumarate TB24 300 MG,	
PREZISTA TABS 75 MG, 150 MG,		MG	19	400 MG	30
600 MG	32	promethazine hcl SUPP 50 MG ...	19	quetiapine fumarate TB24 50 MG,	
PREZISTA TABS 800 MG (darunavir)	32	promethazine hcl TABS	19	150 MG, 200 MG	30
		propafenone hcl CP12	8	quinapril hcl 20 MG, 40 MG	20
		propafenone hcl TABS	8	quinapril hcl 5 MG, 10 MG	20
		proparacaine hcl	61	quinapril-hydrochlorothiazide 12.5	
				MG-10 MG	21
				quinapril-hydrochlorothiazide 12.5	

MG-20 MG	21	RELENZA DISKHALER	34	RIDAURA	3
quinapril-hydrochlorothiazide 25 MG- 20 MG	21	RELION 2-IN-1 LANCET DEVICES 30G	55	rifabutin	23
quinidine sulfate TABS	8	RELION 2-IN-1 LANCING DEVICE 25G	55	rifampin CAPS	23
quinine sulfate CAPS 324 MG	23	RELION 2-IN-1 LANCING DEVICE 30G	55	rifampin SOLR	23
QVAR REDIHALER	9	RELION KETONE TEST STRIPS STRP	44	RIGHTEST GC300 HIGH CONTROL LIQD	55
RA PRENATAL FORMULA/FOLICACID TABS	59	RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	45	riluzole TABS	60
RA PRENATAL TABS	59	RENFLEXIS	49	rimantadine hydrochloride TABS ..	34
rabeprazole sodium TBEC	67	repaglinide 0.5 MG, 1 MG	16	ringer's	57
raloxifene hcl	47	repaglinide 2 MG	16	ringer's irrigation	58
ramelteon	52	REPATHA PUSHTRONEX SYSTEM SOCT	19	RINVOQ TB24	2
ramipril CAPS	20	REPATHA SOSY	20	risedronate sodium TABS 150 MG	46
ranitidine hcl TABS 150 MG	66	REPATHA SURECLICK SOAJ	19	risedronate sodium TABS 35 MG	46
ranolazine TB12 1000 MG	8	RETACRIT	51	risedronate sodium TABS 5 MG, 30	46
ranolazine TB12 500 MG	8	RETEVMO	27	risedronate sodium TBEC	46
rasagiline mesylate	30	RETROVIR CAPS (zidovudine) ..	32	RISPERDAL CONSTA (risperidone microspheres)	30
REALITY LATEX CONDOMS/LUBRICATED MISC ..	53	RETROVIR IV INFUSION SOLN ..	32	risperidone microspheres	30
REALITY LATEX/ULTRA TEXTURED DEVI	54	RETROVIR SYRP (zidovudine) ..	32	risperidone SOLN	30
REALITY LATEX/ULTRA THIN DEVI 54		REXULTI	31	risperidone TBDP	30
REBIF REBIDOSE SOAJ	64	REYATAZ CAPS 200 MG (atazanavir sulfate)	32	ritonavir TABS	32
REBIF REBIDOSE TITRATIONPACK SOAJ	64	REYATAZ CAPS 300 MG (atazanavir sulfate)	32	rivastigmine tartrate CAPS	64
REBIF SOSY	64	REYATAZ PACK	32	rizatriptan benzoate TABS 10 MG	.56
REBIF TITRATION PACK SOSY ..	64	ribavirin (hepatitis c) CAPS	33	rizatriptan benzoate TABS 5 MG	.56
RECOMBIVAX HB SUSP	70	ribavirin (hepatitis c) TABS 200 MG		rizatriptan benzoate TBDP 10 MG	.56
RECOMBIVAX HB SUSY	70	33	rizatriptan benzoate TBDP 5 MG	.56	
RECTIV (nitroglycerin (intra-anal))	.7			roflumilast .....	.9
REGRANEX	44			romidepsin SOLR	27
				ropinirole hydrochloride TABS ..	.29

ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	30	SCEMBLIX 40 MG	27	SIMPONI ARIA SOLN	3
ropinirole hydrochloride TB24 8 MG, 12 MG	29	scopolamine	17	SIMULECT	58
rosuvastatin calcium TABS	19	SELECT INSULIN SYRINGES	55	simvastatin TABS	19
ROTARIX SUSP	70	SELECT LANCETS	55	sirolimus TABS	58
ROTARIX SUSR	70	selegiline hcl CAPS	30	SIRTURO	23
ROTATEQ SOLN	70	selegiline hcl TABS	30	SIVEXTRO TABS	22
ROXYBOND TABA 15 MG, 30 MG ..	6	selenium sulfide LOTN 2.5 %	41	SKYRIZI PEN SOAJ	41
ROZLYTREK CAPS	27	SELZENTRY SOLN	32	SKYRIZI PSKT	41
RUBRACA	27	SELZENTRY TABS 150 MG (maraviroc)	32	SKYRIZI SOCT	49
rufinamide SUSP	12	SELZENTRY TABS 25 MG, 75 MG 32		SKYRIZI SOLN	49
rufinamide TABS 200 MG	12	SELZENTRY TABS 300 MG (maraviroc)	32	SKYRIZI SOSY	41
rufinamide TABS 400 MG	12	SEREVENT DISKUS	10	SLYND	37
RUKOBIA	32	sertraline hcl CONC	14	SM PRENATAL VITAMINS TABS ..	60
RUXIENCE	25	sertraline hcl TABS 100 MG	14	SODIUM ACETATE SOLN (sodium acetate)	56
RYBELSUS TABS	16	sertraline hcl TABS 25 MG, 50 MG 14		sodium acetate SOLN	56
salsalate	5	sevelamer carbonate PACK	49	sodium chloride (gu irrigant) 0.9 % ..	49
SANDOSTATIN LAR DEPOT KIT ..	47	sevelamer carbonate TABS	49	sodium chloride (inhalant) NEBU 7 %	38
SANTYL OINT	43	SHINGRIX	70	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	58
sapropterin dihydrochloride PACK ..	47	SIGNIFOR	47	sodium citrate & citric acid	49
sapropterin dihydrochloride TABS ..	47	sildenafil citrate (pulmonary hypertension) SOLN	35	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	57
SAVELLA TABS	64	sildenafil citrate (pulmonary hypertension) SUSR	35	sodium phenylbutyrate POWD	47
SAVELLA TITRATION PACK MISC ..	64	sildenafil citrate (pulmonary hypertension) TABS	35	sodium phenylbutyrate TABS	47
saxagliptin hcl	16	sildenafil citrate	35	sodium polystyrene sulfonate POWD ..	58
saxagliptin-metformin hcl 1000 MG-2.5 MG	15	silodosin	49	sodium polystyrene sulfonate SUSP OR 15 GM/60ML	58
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	silver sulfadiazine	41	sodium sulfate-potassium sulfate-magnesium sulfate	52
SCEMBLIX 100 MG	27				
SCEMBLIX 20 MG	27				

SOFOSBUVIR/VELPATASVIR TABS	SPRAVATO 56MG DOSE	13	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	39
.....33	SPRAVATO 84MG DOSE	13		
solifenacin succinate TABS	SPRYCEL	27	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	39
67	stannous fluoride CONC	58		
SOLIQUA 100/33	stavudine CAPS	32	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	39
15	STELARA 130 MG/26ML	49	sulfacetamide sod-prednisolone SOLN	62
SOLOSEC	STELARA SOLN 45 MG/0.5ML ...	41	sulfadiazine TABS	65
2	STELARA SOSY 45 MG/0.5ML ...	41	sulfamethoxazole-trimethoprim SOLN	21
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	STELARA SOSY 90 MG/ML	41	sulfamethoxazole-trimethoprim SUSP	21
38	STENDRA	35	sulfamethoxazole-trimethoprim TABS	21
SOLU-CORTEF 250 MG	STIMATE SOLN NA	47	SULFAMYLYON CREA	41
38	STIOLTO RESPIMAT	10	sulfasalazine TABS	49
SOLU-MEDROL 2 GM	STIVARGA	27	sulfasalazine TBEC	49
38	STRENSIQ	47	sulindac TABS	4
SOLUS V2 CONTROL HIGH SOLN 55	streptomycin sulfate SOLR	2	sumatriptan	56
SOMAVERT 10 MG, 15 MG, 20 MG . 46	STRIBILD	32	sumatriptan succinate SOAJ	56
sorafenib tosylate	STRIVERDI RESPIMAT	10	sumatriptan succinate SOCT	56
27	SUBSYS LIQD 100 MCG	6	sumatriptan succinate SOLN 6 MG/0.5ML	56
SORBITOL 3 %	SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	6	sumatriptan succinate TABS	56
49	SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	6	sumatriptan-naproxen sodium	56
SORBITOL/MANNITOL IRRIGATION.....49	sucralfate SUSP	66	sunitinib malate 12.5 MG, 25 MG, 50 MG	28
sotalol hcl (afib/afl)	sucralfate TABS	66	sunitinib malate 37.5 MG	28
34	sulconazole nitrate CREA	40	SUNLENCA TBPK	32
sotalol hcl TABS 240 MG	sulconazole nitrate SOLN	40	SUNOSI 150 MG	1
34	sulfacetamide sodium (acne)	39	SUNOSI 75 MG	1
sotalol hcl TABS 80 MG, 120 MG, 160 MG	sulfacetamide sodium (ophth) SOLN . 61		SUSTIVA CAPS 200 MG (efavirenz) .	
34	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	39		
SPIKEVAX COVID-19 VACCINE SUSP				
70				
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP				
70				
SPIKEVAX COVID-19 VACCINE/2023-24 SUSY				
70				
spinosad				
44				
SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) ..9				
SPIRIVA RESPIMAT AERS				
9				
spironolactone & hydrochlorothiazide.....45				
spironolactone TABS				
46				

32	TALZENNA	28	terbutaline sulfate TABS	10
SUSTIVA CAPS 50 MG (efavirenz) 32	tamoxifen citrate TABS	26	terconazole vaginal CREA	70
SUSTIVA TABS (efavirenz)	tamsulosin hcl	49	terconazole vaginal SUPP	70
SYMFYI (efavirenz-lamivudine-tenofovir disoproxil fumarate)	TASIGNA 150 MG, 200 MG	28	teriflunomide	64
SYMFYI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate)	TASIGNA 50 MG	28	teriparatide (recombinant) SOPN ..	46
SYMTUZA	TASMAR (tolcapone)	29	TERIPARATIDE SOPN	46
SYNAREL	tavaborole	40	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7
SYNERA PTCH	TAVALISSE	50	testosterone cypionate SOLN IM ...	7
SYNJARDY TABS	tazarotene CREA	41	testosterone enanthate SOLN IM ...	7
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	TAZVERIK	28	tetrabenazine	64
SYNJARDY XR TB24 1000 MG-25 MG	TECENTRIQ 1200 MG/20ML	25	tetracycline hcl CAPS	66
SYNRIBO	TEFLARO	36	THALOMID	58
SYNTHROID TABS (levothyroxine sodium)	TEGRETOL SUSP (carbamazepine) .12	12	theophylline ELIX	10
TABLOID	TEGRETOL TABS (carbamazepine) .12	12	theophylline SOLN	10
TABRECTA	TEGSEDI	65	theophylline TB12	10
tacrolimus (topical) OINT	telmisartan	20	theophylline TB24	10
tacrolimus CAPS	telmisartan-amlodipine	21	THERANATAL CORE NUTRITION TABS	60
tadalafil (pulmonary hypertension) TABS	telmisartan-hydrochlorothiazide ..	21	THIOLA EC TBEC 100 MG (tiopronin)	49
tadalafil 5 MG	temazepam 15 MG, 30 MG	52	THIOLA EC TBEC 300 MG (tiopronin)	49
TAFINLAR CAPS	temazepam 7.5 MG, 22.5 MG	52	thioridazine hcl	31
tafluprost	TEMODAR SOLR	24	thiotepa 100 MG	24
TAGRISSO 40 MG	temozolamide CAPS	24	thiotepa 15 MG	24
TAGRISSO 80 MG	temsitrolimus	28	thiothixene	31
TAKHZYRO SOLN	tenofovir disoproxil fumarate TABS 33	18	THYMOGLOBULIN	58
TAKHZYRO SOSY	TEPADINA 100 MG (thiotepa)	24	THYROGEN 0.9 MG	44
	terazosin hcl	20	tiagabine hcl	12
	terbinafine hcl TABS	18	TIBSOVO	28
	terbutaline sulfate SOLN	10		

TICE BCG	28	topiramate TABS 25 MG, 100 MG .12	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	39
tigecycline	65	topiramate TABS 50 MG	tretinoin GEL 0.01 %, 0.025 %	39
timolol maleate (ophth) SOLG	61	topotecan hcl SOLN	tretinoin microsphere 0.1 %	39
timolol maleate (ophth) SOLN	61	TOPOTECAN HCL SOLN	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	24
timolol maleate TABS	34	topotecan hcl SOLR	triamicinolone acetonide (mouth)	59
tiopronin TBEC 100 MG	50	toremifene citrate	triamicinolone acetonide (nasal)	46
tiopronin TBEC 300 MG	50	torsemide TABS	AERO	60
tiotropium bromide monohydrate CAPS	9	TRACLEER TBSO	triamicinolone acetonide (topical)	43
TIVICAY PD TBSO	33	tramadol hcl TABS 50 MG	CREA 0.025 %	43
TIVICAY TABS	33	tramadol hcl TB24	triamicinolone acetonide (topical)	43
tizanidine hcl CAPS	60	tramadol-acetaminophen	CREA 0.1 %	43
tizanidine hcl TABS	60	trandolapril 1 MG, 2 MG	triamicinolone acetonide (topical)	43
tobramycin (ophth) SOLN	61	trandolapril 4 MG	CREA 0.5 %	43
tobramycin NEBU	2	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	triamicinolone acetonide (topical)	43
tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML	2	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	LOTN 0.025 %	43
tobramycin-dexamethasone SUSP 62		tranexamic acid SOLN 1000 MG/10ML	triamicinolone acetonide (topical)	43
TODAY SPONGE MISC	70	tranexamic acid TABS	OINT 0.025 %, 0.1 %	43
tolcapone	29	tranylcypromine sulfate	triamicinolone acetonide (topical)	43
tolmetin sodium CAPS	4	travoprost SOLN	triamicinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	38
tolmetin sodium TABS 600 MG	4	TRAZIMERA .....	.....	.....
TOLSURA CAPS	18	trazodone hcl TABS	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	45
tolterodine tartrate CP24	67	TRECATOR	triamterene & hydrochlorothiazide TABS	45
tolterodine tartrate TABS	67	TRELEGY ELLIPTA	triamterene CAPS	46
tolvaptan TABS	47	TRELSTAR MIXJECT	triazolam	52
topiramate CPSP 15 MG	12	TREMFYA SOPN	TRICARE TABS	60
topiramate CPSP 25 MG	12	TREMFYA SOSY	trientine hcl 250 MG	58
topiramate CS24	12	treprostинil SOLN IJ	trifluoperazine hcl TABS	31
topiramate TABS 200 MG	12	tretinoin (chemotherapy)		

trifluridine	61	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	54	TYBOST	33
trihexyphenidyl hcl SOLN	29	TRUSTEX LUBRICATED MISC	54	TYMLOS	46
trihexyphenidyl hcl TABS	29	TRUSTEX LUBRICATED/RIBBED/STUDDED MISC	54	TYVASO REFILL SOLN IN	35
TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG ..	15	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	54	TYVASO SOLN IN	35
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	54	TYVASO STARTER SOLN IN	35
TRIKAFTA TBPK	65	TRUSTEX LUBRICATED/SPERMICIDE MISC	54	UBRELVY	56
trimethobenzamide hcl CAPS	17	TRUSTEX LUBRICATED/SPERMICIDE MISC	54	UCERIS (budesonide (intrarectal)) ..	7
trimethoprim TABS	21	TRUSTEX LUBRICATED/SPERMICIDE MISC	54	UDENYCA ONBODY SOSY	51
trimipramine maleate CAPS	15	TRUSTEX LUBRICATED/SPERMICIDE MISC	54	UDENYCA SOAJ	51
TRINTELLIX	14	TRUSTEX LUBRICATED/SPERMICIDE MISC	54	UDENYCA SOSY	51
TRIUMEQ PD TBSO	33	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	54	UNISTRIP CONTROL SOLUTIONHIGH SOLN	55
TRIUMEQ TABS	33	TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDDED MISC	54	UPTRAVI TABS 200 MCG	36
TRIZIVIR	33	TRUSTEX/RIA LUBRICATED MISC ..	54	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	36
tropicamide SOLN 0.5 %	61	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	54	UPTRAVI TITRATION PACK TBPK 36	
tropicamide SOLN 1 %	61	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	54	ursodiol CAPS	48
trospium chloride CP24	67	TRUVADA (emtricitabine-tenofovir disoproxil fumarate)	33	ursodiol TABS	48
trospium chloride TABS	67	TRUXIMA	25	UVADEX	28
TRUE COVER DEVI	54	TUKYSA	25	valacyclovir hcl 1 GM, 1000 MG ..	33
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ..	45	TURALIO	28	valacyclovir hcl 500 MG	33
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	55	TUZISTRA XR	38	valganciclovir hcl TABS	33
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP 45		TWINRIX SUSY	70	valproate sodium SOLN OR 250 MG/5ML	13
TRUETRACK TEST STRP	45	TWIRLA	37	valproic acid CAPS	13
TRULICITY	16	TYBLUME CHEW	37	valrubicin	26
TRUSTEX COLOR CONDOMS + LUBE MISC	54	VALTOCO 10 MG DOSE LIQD ..	11	valsartan TABS	20
TRUSTEX LUBRICATED EXTRALARGE MISC	54	VALTOCO 15 MG DOSE LQPK ..	11	valsartan-hydrochlorothiazide ..	21

VALTOCO 20 MG DOSE LQPK	...11	VEREGEN	.....39	warfarin sodium TABS	.....10
VALTOCO 5 MG DOSE LIQD	....11	VERZENIO	.....28	water for irrigation, sterile	.....58
vancomycin hcl CAPS	.....22	VICTOZA	.....16	WESTAB PLUS TABS	.....60
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG	.....22	vigabatrin PACK	.....13	WIDE-SEAL SILICONE DIAPHRAGM KIT 60	.....54
vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML	....22	vigabatrin TABS	.....13	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	.....54
VAQTA	.....70	VIIBRYD STARTER PACK KIT	....14	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	.....54
varenicline tartrate TABS	.....65	vilazodone hcl TABS	.....14	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	.....54
varenicline tartrate TBPK	.....65	vincristine sulfate	.....29	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	.....54
VARIVAX INJ	.....70	vinorelbine tartrate 10 MG/ML	....29	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	.....54
VARUBI TBPK	.....18	vinorelbine tartrate 50 MG/5ML	....29	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	.....54
VAXNEUVANCE	.....67	VIRACEPT TABS 250 MG	....33	WIDE-SEAL SILICONE DIAPHRAGM KIT 95	.....54
VECAMYL	.....21	VIRACEPT TABS 625 MG	....33	WIDE-SEAL SILICONE DIAPHRAGM KIT 99	.....54
VECTIBIX 100 MG/5ML	....25	VIREAD POWD	.....33	WIDE-SEAL SILICONE DIAPHRAGM KIT 100	.....54
VECTIBIX 400 MG/20ML	....25	VIREAD TABS (tenofovir disoproxil fumarate)	.....33	WIDE-SEAL SILICONE DIAPHRAGM KIT 105	.....54
VELPHORO	.....49	VIREAD TABS 150 MG, 200 MG, 250 MG	....33	WIDE-SEAL SILICONE DIAPHRAGM KIT 110	.....54
venlafaxine hcl CP24 150 MG	....14	VISTOGARD	.....17	XALKORI CAPS	.....28
venlafaxine hcl CP24 37.5 MG	....14	VITAMIN D2 TABS 400 UNIT	....71	XARELTO STARTER PACK TBPK 10	.....10
venlafaxine hcl CP24 75 MG	....14	VITATELY/GINGER TABS	....60	XARELTO SUSR	.....11
venlafaxine hcl TABS	....14	VITRAKVI CAPS	.....28	XARELTO TABS 10 MG, 20 MG	..11
venlafaxine hcl TB24 150 MG	....14	VITRAKVI SOLN	.....28	XARELTO TABS 2.5 MG, 15 MG	..11
venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	....14	VIVIMUSTA SOLN	.....24	XELJANZ SOLN	.....3
VENOFER	.....51	VIZIMPRO	.....25	XELJANZ TABS 10 MG	.....3
verapamil hcl CP24 100 MG, 200 MG, 300 MG	....35	VORAXAZE	.....28	XELJANZ TABS 5 MG	.....3
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	....35	voriconazole TABS	.....18	XELJANZ XR TB24	.....2
verapamil hcl SOLN 2.5 MG/ML	...35	VOTRIENT (pazopanib hcl)	....28	XEOMIN	.....60
verapamil hcl TABS	....35	VYNDAMAX	.....36	XGEVA SOLN	.....46
verapamil hcl TBCR	....35	VYNDAQEL	.....36	XHANCE EXHU	.....60
verapamil hcl TBCR	....35	VYVANSE CAPS	.....1	XIFAXAN 200 MG	.....21
		VYXEOS	.....26		

XIFAXAN 550 MG	21	ZANOSAR	24	zolmitriptan SOLN	56
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	15	ZARONTIN CAPS (ethosuximide) ..	13	zolmitriptan TABS	56
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	15	ZARXIO	51	zolmitriptan TBDP	56
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	9	ZEJULA CAPS	28	zolpidem tartrate TABS	52
XOLAIR SOAJ 75 MG/0.5ML	9	ZEJULA TABS 100 MG	28	zolpidem tartrate TBCR	52
ZEJULA TABS 200 MG, 300 MG ..	28	zonisamide CAPS	12		
XOLAIR SOAJ 75 MG/0.5ML	9	ZELBORAF	28	ZONTIVITY	50
XOLAIR SOLR	9	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	45	ZORBTIVE SC	47
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	9	ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	45	ZYDELIG	28
XOLAIR SOSY 75 MG/0.5ML	9	ZIAGEN SOLN (abacavir sulfate) ..	33	ZYLET	62
XOSPAT A	28	ZIAGEN TABS (abacavir sulfate) ..	33		
XPOVIO	26	zidovudine CAPS	33		
XPOVIO 60 MG TWICE WEEKLY	26	zidovudine SYRP	33		
XPOVIO 80 MG TWICE WEEKLY	26	zidovudine TABS	33		
XTAMPZA ER	6	ZIEXTENZO	51		
XTANDI CAPS	26	zileuton TB12	9		
XTANDI TABS 40 MG	26	ziprasidone hcl	30		
XTANDI TABS 80 MG	26	ZIRABEV	25		
XULTOPHY 100/3.6	15	ZIRGAN GEL	61		
XYNTHA	50	ZOLADEX 10.8 MG	26		
XYNTHA SOLOFUSE	50	ZOLADEX 3.6 MG	26		
YERVOY	25	zoledronic acid CONC	46		
YONDELIS	24	zoledronic acid SOLN	46		
YONSA	26	ZOLINZA	28		
zafirlukast	9				
zaleplon 10 MG	52				
zaleplon 5 MG	52				
ZALTRAP 100 MG/4ML	25				

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