



2025 INDIVIDUAL/FAMILY & SMALL GROUP DRUG FORMULARY

**PLEASE READ: THIS DOCUMENT HAS INFORMATION ABOUT THE
PRESCRIPTION DRUGS WE COVER.**

Please refer to your "Certificate of Coverage or other plan materials" to determine if your drug is covered. This Drug Formulary does not guarantee coverage and is subject to change without notice. Members must use participating pharmacies to fill their prescription drugs.

Tiers are groups of drugs on our Drug List.

- Tier 0 drugs are drugs that qualify as an Affordable Care Act Preventative Drug
- Tier 1 drugs are generic drugs in the Adherence Drug Program
- Tier 2 drugs are generic drugs not included in the Adherence Drug Program
- Tier 3 drugs are preferred brand drugs
- Tier 4 drugs are non-preferred brand drugs
- Tier 5 drugs are preferred specialty drugs
- Tier 6 drugs are non-preferred specialty drugs

For the most recent information or other questions, please
contact Neighborhood Member Services at 1-833-486-5274
(TTY 711).

6T FERT Effective 04/01/2025

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		

ANTI-OBESITY AGENTS

SAXENDA INJ 18MG/3ML	Tier 6	PA, QL (5 pens every 30 days)
WEGOVY INJ 0.5MG	Tier 6	PA, QL (4 pens every 28 days)
WEGOVY INJ 0.25MG	Tier 6	PA, QL (4 pens every 28 days)
WEGOVY INJ 1.7MG	Tier 6	PA, QL (4 pens every 28 days)
WEGOVY INJ 1MG	Tier 6	PA, QL (4 pens every 28 days)
WEGOVY INJ 2.4MG	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 2.5/0.5	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 5/0.5ML	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 7.5/0.5	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 10/0.5ML	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 12.5/0.5	Tier 6	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 15/0.5ML	Tier 6	PA, QL (4 pens every 28 days)

ALTERNATIVE MEDICINES**ALTERNATIVE MEDICINE - M'S**

MELATONIN LIQ 1MG/4ML	Tier 1	OTC
<i>Melatonin Sub 5mg</i>	Tier 1	OTC
<i>melatonin tab 1 mg</i>	Tier 1	OTC
<i>Melatonin Tab 3mg</i>	Tier 1	OTC
<i>melatonin tab 5 mg</i>	Tier 1	OTC
<i>Melatonin Tab 10mg Cr</i>	Tier 1	OTC

ANALGESICS**COX-2 INHIBITORS**

<i>celecoxib cap 50 mg</i>	Tier 2
<i>celecoxib cap 100 mg</i>	Tier 2
<i>celecoxib cap 200 mg</i>	Tier 2

GOUT

<i>allopurinol tab 100 mg</i>	Tier 2
-------------------------------	--------

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>allopurinol tab 300 mg</i>	Tier 2	
<i>colchicine tab 0.6 mg</i>	Tier 2	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	Tier 2	
<i>febuxostat tab 40 mg</i>	Tier 2	ST; PA**
<i>febuxostat tab 80 mg</i>	Tier 2	ST; PA**
<i>probenecid tab 500 mg</i>	Tier 2	
NSAIDS		
<i>Advil Jr St Tab 100mg</i>	Tier 1	OTC
<i>diclofenac potassium tab 50 mg</i>	Tier 2	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	Tier 4	
<i>diclofenac sodium tab delayed release 25 mg</i>	Tier 2	
<i>diclofenac sodium tab delayed release 50 mg</i>	Tier 2	
<i>diclofenac sodium tab delayed release 75 mg</i>	Tier 2	
<i>diclofenac sodium tab er 24hr 100 mg</i>	Tier 2	
<i>etodolac cap 200 mg</i>	Tier 2	
<i>etodolac cap 300 mg</i>	Tier 2	
<i>etodolac tab 400 mg</i>	Tier 2	
<i>etodolac tab 500 mg</i>	Tier 2	
<i>etodolac tab er 24hr 400 mg</i>	Tier 2	
<i>etodolac tab er 24hr 500 mg</i>	Tier 2	
<i>etodolac tab er 24hr 600 mg</i>	Tier 2	
<i>fenoprofen calcium tab 600 mg</i>	Tier 4	
<i>flurbiprofen tab 50 mg</i>	Tier 2	
<i>flurbiprofen tab 100 mg</i>	Tier 2	
<i>Ibuprofen Jr Chw 100mg</i>	Tier 1	OTC
<i>ibuprofen susp 100 mg/5ml</i>	Tier 2	
<i>ibuprofen tab 400 mg</i>	Tier 2	
<i>ibuprofen tab 600 mg</i>	Tier 2	
<i>ibuprofen tab 800 mg</i>	Tier 2	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	Tier 2	
<i>ketorolac tromethamine inj 15 mg/ml</i>	Tier 2	
<i>ketorolac tromethamine inj 30 mg/ml</i>	Tier 2	
<i>ketorolac tromethamine tab 10 mg</i>	Tier 2	QL (20 tabs every 30 days)
<i>meclofenamate sodium cap 50 mg</i>	Tier 2	
<i>meclofenamate sodium cap 100 mg</i>	Tier 2	
<i>mefenamic acid cap 250 mg</i>	Tier 2	
<i>meloxicam tab 7.5 mg</i>	Tier 2	
<i>meloxicam tab 15 mg</i>	Tier 2	
MOTRIN CHILD SUS 100/5ML	Tier 1	OTC
<i>Motrin Ib Tab 200mg</i>	Tier 1	OTC
MOTRIN INFAN DRO 50/1.25	Tier 1	OTC
<i>nabumetone tab 500 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>nabumetone tab 750 mg</i>	Tier 2	
<i>Naproxen Sod Tab 220mg</i>	Tier 1	OTC
<i>naproxen tab 250 mg</i>	Tier 2	
<i>naproxen tab 375 mg</i>	Tier 2	
<i>naproxen tab 500 mg</i>	Tier 2	
<i>oxaprozin tab 600 mg</i>	Tier 2	
<i>piroxicam cap 10 mg</i>	Tier 2	
<i>piroxicam cap 20 mg</i>	Tier 2	
<i>sulindac tab 150 mg</i>	Tier 2	
<i>sulindac tab 200 mg</i>	Tier 2	
<i>Wal-Profen Cap 200mg</i>	Tier 1	OTC
NSAIDS, COMBINATIONS		
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	Tier 2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	Tier 2	
OPIOID ANALGESICS		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	Tier 2	PA, QL (2700 mL every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-15 mg</i>	Tier 2	PA, QL (400 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-30 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-60 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i>	Tier 2	ST, QL (300 caps every 30 days); Subject to initial 7-day limit
<i>butorphanol tartrate inj 1 mg/ml</i>	Tier 2	
<i>butorphanol tartrate inj 2 mg/ml</i>	Tier 2	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	Tier 2	QL (2 bottles every 30 days)
CODEINE SULF TAB 60MG	Tier 4	PA, QL (42 tabs every 30 days); Subject to initial 7-day limit
<i>codeine sulfate tab 30 mg</i>	Tier 2	PA, QL (42 tabs every 30 days); Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
<i>endocet tab 2.5-325</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>endocet tab 5-325mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>endocet tab 7.5-325</i>	Tier 2	PA, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>endocet tab 10-325mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl td patch 72hr 12 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	Tier 2	ST, PA; High Strength Requires PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	Tier 2	ST, PA; High Strength Requires PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	Tier 2	PA, QL (Initial fill 30 tabs, then 60 tabs/30 days); High Strength Requires PA
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	Tier 2	PA, QL (Initial fill 30 tabs, then 60 tabs/30 days); High Strength Requires PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	Tier 2	PA, QL (2700 mL every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i>	Tier 2	ST, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	Tier 2	PA, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	Tier 2	PA, QL (50 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl inj 2 mg/ml</i>	Tier 2	
<i>hydromorphone hcl tab 2 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl tab 4 mg</i>	Tier 2	PA, QL (120 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl tab 8 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab er 24hr 8 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 12 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 16 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 32 mg</i>	Tier 2	ST, PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>methadone hcl conc 10 mg/ml</i>	Tier 2	PA, QL (30 mL every 30 days)
<i>methadone hcl soln 5 mg/5ml</i>	Tier 2	PA, QL (450 ml every 30 days)
<i>methadone hcl soln 10 mg/5ml</i>	Tier 2	PA, QL (300 mL every 30 days)
<i>methadone hcl tab 5 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>methadone hcl tab 10 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>methadone hcl tab for oral susp 40 mg</i>	Tier 2	PA, QL (9 tabs every 30 days)
<i>Methadone Hydrochloride I</i>	Tier 2	PA, QL (60 mL every 30 days)
<i>Methadose</i>	Tier 2	PA, QL (9 tabs every 30 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 90 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>morphine sulfate cap er 24hr 10 mg</i>	Tier 2	PA, QL (60 caps every 30 days)
<i>morphine sulfate cap er 24hr 20 mg</i>	Tier 2	PA, QL (60 caps every 30 days)
<i>morphine sulfate cap er 24hr 30 mg</i>	Tier 2	PA, QL (60 caps every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate cap er 24hr 50 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 60 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 80 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 100 mg</i>	Tier 2	PA; High Strength Requires PA
<i>morphine sulfate iv soln 4 mg/ml</i>	Tier 2	
<i>morphine sulfate iv soln 10 mg/ml</i>	Tier 2	
<i>morphine sulfate oral soln 10 mg/5ml</i>	Tier 2	PA, QL (900 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate oral soln 20 mg/5ml</i>	Tier 2	PA, QL (675 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	Tier 2	PA, QL (135 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab 15 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab 30 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab er 15 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>morphine sulfate tab er 30 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>morphine sulfate tab er 60 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); High Strength Requires PA
<i>morphine sulfate tab er 100 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>morphine sulfate tab er 200 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>nalbuphine hcl inj 10 mg/ml</i>	Tier 2	PA
<i>nalbuphine hcl inj 20 mg/ml</i>	Tier 2	PA
NUCYNTA ER TAB 50MG	Tier 4	PA, QL (60 tabs every 30 days)
NUCYNTA ER TAB 100MG	Tier 4	PA, QL (60 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
NUCYNTA ER TAB 150MG	Tier 4	PA, QL (90 tabs every 30 days); High Strength Requires PA
NUCYNTA ER TAB 200MG	Tier 4	PA, QL (60 tabs every 30 days); High Strength Requires PA
NUCYNTA ER TAB 250MG	Tier 4	PA, QL (60 tabs every 30 days); High Strength Requires PA
NUCYNTA TAB 50MG	Tier 3	PA, QL (120 tabs every 30 days); Subject to initial 7-day limit
NUCYNTA TAB 75MG	Tier 3	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
NUCYNTA TAB 100MG	Tier 3	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl cap 5 mg</i>	Tier 2	PA, QL (180 caps every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	Tier 2	PA, QL (90 mL every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl soln 5 mg/5ml</i>	Tier 2	PA, QL (900 mL every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 5 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 10 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 15 mg</i>	Tier 2	PA, QL (120 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 20 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 30 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	Tier 2	PA; High Strength Requires PA
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	Tier 2	PA, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab 5 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab 10 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab er 12hr 5 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 10 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 15 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 20 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 30 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 40 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>tramadol hcl tab 50 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>tramadol hcl tab er 24hr 100 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl tab er 24hr 200 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>tramadol hcl tab er 24hr 300 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	Tier 2	PA, QL (40 tabs every 30 days); Subject to initial 7-day limit
XTAMPZA ER CAP 9MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 13.5MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 18MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 27MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 36MG	Tier 3	ST, PA, QL (90 caps every 30 days); High Strength Requires Prior Auth
OPIOID PARTIAL AGONISTS		
BELBUCA MIS 75MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 150MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 300MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 450MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 600MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
BELBUCA MIS 750MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
BELBUCA MIS 900MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	Tier 2	
<i>buprenorphine td patch weekly 5 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine td patch weekly 10 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	Tier 2	ST, PA, QL (4 patches every 30 days); High Strength Requires Prior Auth
<i>buprenorphine td patch weekly 20 mcg/hr</i>	Tier 2	ST, PA, QL (4 patches every 30 days); High Strength Requires Prior Auth
SUBLOCADE INJ 100/0.5	Tier 5	
SUBLOCADE INJ 300/1.5	Tier 5	

SALICYLATES

<i>diflunisal tab 500 mg</i>	Tier 2	
------------------------------	--------	--

ANALGESICS - NONNARCOTIC

ANALGESIC COMBINATIONS

EXCEDRIN TAB MIGRAINE	Tier 1	OTC
-----------------------	--------	-----

ANALGESICS OTHER

<i>Acephen Sup 325mg</i>	Tier 1	OTC
<i>Acephen Sup 650mg</i>	Tier 1	OTC
<i>acetaminophen soln 160 mg/5ml</i>	Tier 1	OTC
<i>Ed-Apap Liq 80mg/2.5</i>	Tier 1	OTC
FEVERALL INF SUP 80MG	Tier 1	OTC
<i>Non-Aspirin Chw 80mg</i>	Tier 1	OTC
<i>Pain/fever Sup 120mg</i>	Tier 1	OTC
<i>Tgt Apap Dro Infants</i>	Tier 1	OTC
TYLENOL 8 HR TAB 650MG	Tier 1	OTC
TYLENOL INFA SUS 160/5ML	Tier 1	OTC
TYLENOL SORE LIQ THROAT	Tier 1	OTC
TYLENOL TAB 325MG	Tier 1	OTC
TYLENOL TAB 500MG	Tier 1	OTC

SALICYLATES

ALKA-SELTZER TAB 325MG	Tier 1	OTC
ALKA-SELTZER TAB 500MG	Tier 1	OTC
<i>Aspirin Ec Adult Low Dose</i>	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members at risk for preeclampsia, otherwise not covered
<i>Aspirin Tab 325mg</i>	Tier 0	OTC
<i>Aspirin Tab 500 mg</i>	Tier 1	OTC
<i>Bayer Asa Tab 325mg</i>	Tier 0	OTC
BAYER PLUS TAB 500MG	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
BUFFERIN TAB 325MG	Tier 1	OTC
ECOTRIN M/S TAB 500MG EC	Tier 1	OTC
Goodsense Aspirin	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members at risk for preeclampsia, otherwise not covered

ANESTHETICS

LOCAL ANESTHETICS

<i>lidocaine hcl local inj 0.5%</i>	Tier 2	
<i>lidocaine hcl local inj 1%</i>	Tier 2	
<i>lidocaine hcl local inj 2%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	Tier 2	

ANORECTAL AND RELATED PRODUCTS

RECTAL COMBINATIONS

<i>Hemorrhoidal Cre</i>	Tier 1	OTC
<i>Hemorrhoidal Gel 0.25-50%</i>	Tier 1	OTC
<i>Hemorrhoidal Sup</i>	Tier 1	OTC

ANTACIDS

ANTACID COMBINATIONS

<i>Antacid Plus Sus Gas Rel</i>	Tier 1	OTC
<i>Maalox Advan Sus Max St</i>	Tier 1	OTC

ANTACIDS - ALUMINUM SALTS

ALUM HYDROX SUS 320/5ML	Tier 1	OTC
-------------------------	--------	-----

ANTACIDS - BICARBONATE

<i>sodium bicarbonate tab 650 mg</i>	Tier 1	OTC
--------------------------------------	--------	-----

ANTACIDS - CALCIUM SALTS

<i>Cal Antacid Chw 1000mg</i>	Tier 1	OTC
<i>Calc Antacid Chw 500mg</i>	Tier 1	OTC
<i>Calc Antacid Chw 750mg</i>	Tier 1	OTC
CALCIUM CARB TAB 648MG	Tier 1	OTC
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	Tier 1	OTC

ANTHELMINTICS

ANTHELMINTICS

<i>Pinworm Med Sus 144mg/ml</i>	Tier 1	OTC
---------------------------------	--------	-----

ANTI-INFECTIVES

ANTHELMINTICS

<i>albendazole tab 200 mg</i>	Tier 4	QL (336 tabs every 365 days)
-------------------------------	--------	------------------------------

Drug Name	Drug Tier	Requirements/Limits
EMVERM CHW 100MG	Tier 4	QL (12 tabs every 365 days)
<i>ivermectin tab 3 mg</i>	Tier 2	PA
<i>praziquantel tab 600 mg</i>	Tier 2	QL (24 tabs every 365 days)

ANTI-BACTERIALS - MISCELLANEOUS

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	Tier 2	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	Tier 2	
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	Tier 2	
<i>gentamicin sulfate inj 40 mg/ml</i>	Tier 2	
<i>neomycin sulfate tab 500 mg</i>	Tier 2	
<i>sulfadiazine tab 500 mg</i>	Tier 2	
<i>tinidazole tab 250 mg</i>	Tier 2	
<i>tinidazole tab 500 mg</i>	Tier 2	
<i>tobramycin sulfate for inj 1.2 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 10 day course every 365 days
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	Tier 2	QL (36 mL every day); Initial limit allows up to a 10 day course every 365 days
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	Tier 2	QL (36 mL every day); Initial limit allows up to a 10 day course every 365 days

ANTIFUNGALS

<i>amphotericin b for iv soln 50 mg</i>	Tier 2	QL (3 vials every day); Initial limit allows up to a 14 day course every 365 days
CRESEMBA CAP 74.5MG	Tier 4	
CRESEMBA CAP 186MG	Tier 4	
<i>fluconazole for susp 10 mg/ml</i>	Tier 2	
<i>fluconazole for susp 40 mg/ml</i>	Tier 2	
<i>fluconazole tab 50 mg</i>	Tier 2	
<i>fluconazole tab 100 mg</i>	Tier 2	
<i>fluconazole tab 150 mg</i>	Tier 2	
<i>fluconazole tab 200 mg</i>	Tier 2	
<i>griseofulvin microsize susp 125 mg/5ml</i>	Tier 2	
<i>griseofulvin microsize tab 500 mg</i>	Tier 2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	Tier 2	
<i>griseofulvin ultramicrosize tab 250 mg</i>	Tier 2	
<i>itraconazole cap 100 mg</i>	Tier 2	PA
<i>itraconazole oral soln 10 mg/ml</i>	Tier 2	PA
<i>nystatin tab 500000 unit</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>posaconazole susp 40 mg/ml</i>	Tier 2	PA
<i>posaconazole tab delayed release 100 mg</i>	Tier 4	PA
<i>terbinafine hcl tab 250 mg</i>	Tier 2	
<i>voriconazole for susp 40 mg/ml</i>	Tier 4	PA
<i>voriconazole tab 50 mg</i>	Tier 4	PA
<i>voriconazole tab 200 mg</i>	Tier 4	PA

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	Tier 2	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	Tier 2	
<i>chloroquine phosphate tab 250 mg</i>	Tier 2	
<i>chloroquine phosphate tab 500 mg</i>	Tier 2	
COARTEM TAB 20-120MG	Tier 4	
KRINTAFEL TAB 150MG	Tier 4	
<i>mefloquine hcl tab 250 mg</i>	Tier 2	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	Tier 2	
<i>quinine sulfate cap 324 mg</i>	Tier 2	

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	Tier 2	QL (900 mL every 30 days)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	Tier 2	QL (60 tabs every 30 days)
APRETUDE SUS 600MG ER	Tier 0	QL (2 vials every 90 days)
APTIVUS CAP 250MG	Tier 3	QL (120 caps every 30 days)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	Tier 2	QL (30 caps every 30 days)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	Tier 2	QL (60 caps every 30 days)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	Tier 2	QL (30 caps every 30 days)
<i>darunavir tab 600 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>darunavir tab 800 mg</i>	Tier 2	QL (30 tabs every 30 days)
EDURANT TAB 25MG	Tier 3	QL (60 tabs every 30 days)
<i>efavirenz cap 50 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>efavirenz cap 200 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>efavirenz tab 600 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine caps 200 mg</i>	Tier 2	QL (30 caps every 30 days)
EMTRIVA SOL 10MG/ML	Tier 3	QL (680 ml every 28 days)
<i>etravirine tab 100 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>etravirine tab 200 mg</i>	Tier 2	QL (60 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 14
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	Tier 2	QL (120 tabs every 30 days)
FUZEON INJ 90MG	Tier 5	PA, QL (60 vials every 30 days)
INTELENCE TAB 25MG	Tier 3	QL (120 tabs every 30 days)
ISENTRESS CHW 25MG	Tier 3	QL (180 tabs every 30 days)
ISENTRESS CHW 100MG	Tier 3	QL (180 tabs every 30 days)
ISENTRESS HD TAB 600MG	Tier 3	QL (60 tabs every 30 days)
ISENTRESS POW 100MG	Tier 3	QL (60 packets every 30 days)
ISENTRESS TAB 400MG	Tier 0	QL (120 tabs every 30 days)
<i>lamivudine oral soln 10 mg/ml</i>	Tier 2	QL (960 ml every 30 days)
<i>lamivudine tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>lamivudine tab 300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>maraviroc tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>maraviroc tab 300 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>nevirapine susp 50 mg/5ml</i>	Tier 2	QL (1200 mL every 30 days)
<i>nevirapine tab 200 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>nevirapine tab er 24hr 400 mg</i>	Tier 2	QL (30 tabs every 30 days)
NORVIR POW 100MG	Tier 3	QL (360 packets every 30 days)
PREZISTA SUS 100MG/ML	Tier 3	QL (400 ml every 30 days)
PREZISTA TAB 75MG	Tier 3	QL (300 tabs every 30 days)
PREZISTA TAB 150MG	Tier 3	QL (180 tabs every 30 days)
RETROVIR INJ 10MG/ML	Tier 3	
REYATAZ POW 50MG	Tier 3	QL (180 packets every 30 days)
<i>ritonavir tab 100 mg</i>	Tier 2	QL (360 tabs every 30 days)
SELZENTRY SOL 20MG/ML	Tier 3	QL (1840 mL every 30 days)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	Tier 2	QL (30 tabs every 30 days)
TIVICAY PD TAB 5MG	Tier 3	QL (360 tabs every 30 days)
TIVICAY TAB 50MG	Tier 3	QL (60 tabs every 30 days)
TROGARZO INJ 150MG/ML	Tier 5	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 15
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
TYBOST TAB 150MG	Tier 3	QL (30 tabs every 30 days)
VIREAD POW 40MG/GM	Tier 3	QL (240 gm every 30 days)
VIREAD TAB 150MG	Tier 3	QL (30 tabs every 30 days)
VIREAD TAB 200MG	Tier 3	QL (30 tabs every 30 days)
VIREAD TAB 250MG	Tier 3	QL (30 tabs every 30 days)
<i>zidovudine cap 100 mg</i>	Tier 2	QL (180 caps every 30 days)
<i>zidovudine syrup 10 mg/ml</i>	Tier 2	QL (1920 ml every 30 days)
<i>zidovudine tab 300 mg</i>	Tier 2	QL (60 tabs every 30 days)

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
BIKTARVY TAB	Tier 3	QL (30 tabs every 30 days)
CABENUVA SUS 400-600	Tier 6	PA, QL (1 kit every 30 days)
CABENUVA SUS 600-900	Tier 6	PA, QL (1 kit every 60 days); Loading dose of 1 kit in 30 days allowed for initial fill
CIMDUO TAB 300-300	Tier 3	QL (30 tabs every 30 days)
DESCOVY TAB 120-15MG	Tier 3	QL (30 tabs every 30 days)
DESCOVY TAB 200/25MG	Tier 0	QL (30 tabs every 30 days); \$0 copay when medically necessary for pre-exposure prophylaxis; copay applies for treatment
DOVATO TAB 50-300MG	Tier 3	QL (30 tabs every 30 days)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	Tier 0	QL (30 tabs every 30 days); \$0 copay when medically necessary for pre-exposure prophylaxis; copay applies for treatment

Drug Name	Drug Tier	Requirements/Limits
GENVOYA TAB	Tier 3	QL (30 tabs every 30 days)
<i>lamivudine-zidovudine tab 150-300 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	Tier 2	QL (480 ml every 30 days)
<i>lopinavir-ritonavir tab 100-25 mg</i>	Tier 2	QL (300 tabs every 30 days)
<i>lopinavir-ritonavir tab 200-50 mg</i>	Tier 2	QL (120 tabs every 30 days)
ODEFSEY TAB	Tier 3	QL (30 tabs every 30 days)
PREZCOBIX TAB 800-150	Tier 4	QL (30 tabs every 30 days)
SYMTUZA TAB	Tier 4	QL (30 tabs every 30 days)
TRIUMEQ PD TAB	Tier 4	QL (180 tabs every 30 days)
TRIUMEQ TAB	Tier 4	QL (30 tabs every 30 days)

ANTITUBERCULAR AGENTS

<i>cycloserine cap 250 mg</i>	Tier 2	
<i>ethambutol hcl tab 100 mg</i>	Tier 2	
<i>ethambutol hcl tab 400 mg</i>	Tier 2	
<i>isoniazid inj 100 mg/ml</i>	Tier 2	
<i>isoniazid syrup 50 mg/5ml</i>	Tier 2	
<i>isoniazid tab 100 mg</i>	Tier 2	
<i>isoniazid tab 300 mg</i>	Tier 2	
PRETOMANID TAB 200MG	Tier 4	
PRIFTIN TAB 150MG	Tier 3	
<i>pyrazinamide tab 500 mg</i>	Tier 2	
<i>rifabutin cap 150 mg</i>	Tier 2	
<i>rifampin cap 150 mg</i>	Tier 2	
<i>rifampin cap 300 mg</i>	Tier 2	
<i>rifampin for inj 600 mg</i>	Tier 2	
SIRTURO TAB 20MG	Tier 4	
SIRTURO TAB 100MG	Tier 4	
TRECTOR TAB 250MG	Tier 3	

ANTIVIRALS

<i>acyclovir cap 200 mg</i>	Tier 2	
<i>acyclovir susp 200 mg/5ml</i>	Tier 2	
<i>acyclovir tab 400 mg</i>	Tier 2	
<i>acyclovir tab 800 mg</i>	Tier 2	
<i>cidofovir iv inj 75 mg/ml</i>	Tier 2	
<i>famciclovir tab 125 mg</i>	Tier 2	
<i>famciclovir tab 250 mg</i>	Tier 2	
<i>famciclovir tab 500 mg</i>	Tier 2	
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	Tier 2	QL (40 caps every 90 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	Tier 2	QL (20 caps every 90 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	Tier 2	QL (20 caps every 90 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	Tier 2	QL (360 mL every 90 days)
PAXLOVID TAB 150-100	Tier 4	QL (40 tabs every 30 days)
PAXLOVID TAB 300-100	Tier 4	QL (60 tabs every 30 days)
RELENZA MIS DISKHALE	Tier 3	QL (2 inhalers every 90 days)
<i>rimantadine hydrochloride tab 100 mg</i>	Tier 2	
<i>valacyclovir hcl tab 1 gm</i>	Tier 2	
<i>valacyclovir hcl tab 500 mg</i>	Tier 2	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	Tier 5	PA, QL (1000 mL every 30 days)
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)

CEPHALOSPORINS

<i>cefaclor cap 250 mg</i>	Tier 2	
<i>cefaclor cap 500 mg</i>	Tier 2	
<i>cefaclor for susp 250 mg/5ml</i>	Tier 2	
<i>cefadroxil cap 500 mg</i>	Tier 2	
<i>cefadroxil for susp 250 mg/5ml</i>	Tier 2	
<i>cefadroxil for susp 500 mg/5ml</i>	Tier 2	
<i>cefadroxil tab 1 gm</i>	Tier 2	
<i>cefazolin sodium for inj 1 gm</i>	Tier 2	
<i>cefdinir cap 300 mg</i>	Tier 2	
<i>cefdinir for susp 125 mg/5ml</i>	Tier 2	
<i>cefdinir for susp 250 mg/5ml</i>	Tier 2	
<i>cefepime hcl for inj 1 gm</i>	Tier 2	
<i>cefepime hcl for iv soln 2 gm</i>	Tier 2	
<i>cefixime cap 400 mg</i>	Tier 2	
<i>cefixime for susp 100 mg/5ml</i>	Tier 2	
<i>cefixime for susp 200 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil tab 100 mg</i>	Tier 2	
<i>cefpodoxime proxetil tab 200 mg</i>	Tier 2	
<i>cefprozil for susp 125 mg/5ml</i>	Tier 2	
<i>cefprozil for susp 250 mg/5ml</i>	Tier 2	
<i>cefprozil tab 250 mg</i>	Tier 2	
<i>cefprozil tab 500 mg</i>	Tier 2	
<i>ceftazidime for iv soln 2 gm</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium for inj 1 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 2 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 10 gm</i>	Tier 2	QL (0.5 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 250 mg</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 500 mg</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for iv soln 1 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for iv soln 2 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>cefuroxime axetil tab 250 mg</i>	Tier 2	
<i>cefuroxime axetil tab 500 mg</i>	Tier 2	
<i>cephalexin cap 250 mg</i>	Tier 2	
<i>cephalexin cap 500 mg</i>	Tier 2	
<i>cephalexin cap 750 mg</i>	Tier 2	
<i>cephalexin for susp 125 mg/5ml</i>	Tier 2	
<i>cephalexin for susp 250 mg/5ml</i>	Tier 2	
<i>cephalexin tab 250 mg</i>	Tier 2	
<i>cephalexin tab 500 mg</i>	Tier 2	
<i>Tazicef</i>	Tier 2	

ERYTHROMYCINS/MACROLIDES

<i>azithromycin for susp 100 mg/5ml</i>	Tier 2
<i>azithromycin for susp 200 mg/5ml</i>	Tier 2
<i>azithromycin powd pack for susp 1 gm</i>	Tier 2
<i>azithromycin tab 250 mg</i>	Tier 2
<i>azithromycin tab 500 mg</i>	Tier 2
<i>azithromycin tab 600 mg</i>	Tier 2
<i>clarithromycin for susp 125 mg/5ml</i>	Tier 2
<i>clarithromycin for susp 250 mg/5ml</i>	Tier 2
<i>clarithromycin tab 250 mg</i>	Tier 2
<i>clarithromycin tab 500 mg</i>	Tier 2
<i>clarithromycin tab er 24hr 500 mg</i>	Tier 2

Drug Name	Drug Tier	Requirements/Limits
DIFICID SUS	Tier 3	PA
DIFICID TAB 200MG	Tier 3	PA
<i>Ery-Tab</i>	Tier 2	
<i>Erythrocin Stearate</i>	Tier 2	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	Tier 2	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	Tier 2	
<i>erythromycin ethylsuccinate tab 400 mg</i>	Tier 2	
<i>erythromycin tab 250 mg</i>	Tier 2	
<i>erythromycin tab 500 mg</i>	Tier 2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	Tier 2	
ZITHROMAX POW 1GM PAK	Tier 3	
FLUOROQUINOLONES		
BAXDELA TAB 450MG	Tier 4	
CIPRO (10%) SUS 500MG/5	Tier 4	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	Tier 2	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	Tier 2	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	Tier 2	
<i>levofloxacin iv soln 25 mg/ml</i>	Tier 2	QL (40 mL every day); Initial limit allows up to a 14 day course every 365 days
<i>levofloxacin oral soln 25 mg/ml</i>	Tier 2	
<i>levofloxacin tab 250 mg</i>	Tier 2	
<i>levofloxacin tab 500 mg</i>	Tier 2	
<i>levofloxacin tab 750 mg</i>	Tier 2	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	Tier 2	
<i>ofloxacin tab 300 mg</i>	Tier 2	
<i>ofloxacin tab 400 mg</i>	Tier 2	
HEPATITIS B		
<i>adefovir dipivoxil tab 10 mg</i>	Tier 5	
BARACLUDE SOL	Tier 5	PA, QL (630 mL every 30 days)
<i>entecavir tab 0.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>entecavir tab 1 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>lamivudine tab 100 mg (hbv)</i>	Tier 2	
HEPATITIS C		
EPCLUSA PAK 150-37.5	Tier 5	PA, QL (28 pellets every 28 days)

Drug Name	Drug Tier	Requirements/Limits
EPCLUSA PAK 200-50MG	Tier 5	PA, QL (56 pellets every 28 days)
EPCLUSA TAB 200-50MG	Tier 5	PA, QL (28 tabs every 28 days)
EPCLUSA TAB 400-100	Tier 5	PA, QL (28 tabs every 28 days)
HARVONI PAK	Tier 5	PA, QL (28 pellets every 28 days)
HARVONI PAK 45-200MG	Tier 5	PA, QL (56 pellets every 28 days)
HARVONI TAB 45-200MG	Tier 5	PA, QL (28 tabs every 28 days)
HARVONI TAB 90-400MG	Tier 5	PA, QL (28 tabs every 28 days)
PEGASYS INJ	Tier 5	PA
PEGASYS INJ 180MCG/ML	Tier 5	PA
<i>ribavirin cap 200 mg</i>	Tier 2	
<i>ribavirin tab 200 mg</i>	Tier 2	
SOVALDI PAK 150MG	Tier 6	ST, PA, QL (28 pellets every 28 days)
SOVALDI PAK 200MG	Tier 6	ST, PA, QL (56 pellets every 28 days)
SOVALDI TAB 200MG	Tier 6	ST, PA, QL (28 tabs every 28 days)
SOVALDI TAB 400MG	Tier 6	ST, PA, QL (28 tabs every 28 days)
VOSEVI TAB	Tier 5	PA, QL (28 tabs every 28 days)

MISCELLANEOUS

ALINIA SUS 100/5ML	Tier 4	QL (540 mL every 30 days)
<i>atovaquone susp 750 mg/5ml</i>	Tier 2	
<i>aztreonam for inj 1 gm</i>	Tier 2	
<i>aztreonam for inj 2 gm</i>	Tier 2	
<i>clindamycin hcl cap 75 mg</i>	Tier 2	
<i>clindamycin hcl cap 150 mg</i>	Tier 2	
<i>clindamycin hcl cap 300 mg</i>	Tier 2	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	Tier 2	
<i>clindamycin phosphate inj 9 gm/60ml</i>	Tier 2	
<i>dapsone tab 25 mg</i>	Tier 2	
<i>dapsone tab 100 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>linezolid for susp 100 mg/5ml</i>	Tier 2	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	Tier 2	
<i>linezolid tab 600 mg</i>	Tier 2	
<i>meropenem iv for soln 1 gm</i>	Tier 2	QL (6 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>meropenem iv for soln 500 mg</i>	Tier 2	QL (12 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>methenamine hippurate tab 1 gm</i>	Tier 2	
<i>metronidazole cap 375 mg</i>	Tier 2	
<i>metronidazole iv soln 500 mg/100ml</i>	Tier 2	
<i>metronidazole tab 250 mg</i>	Tier 2	
<i>metronidazole tab 500 mg</i>	Tier 2	
<i>nitazoxanide tab 500 mg</i>	Tier 2	QL (20 tabs every 30 days)
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin susp 25 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>pentamidine isethionate for inj soln 300 mg</i>	Tier 2	
<i>pentamidine isethionate for nebulization soln 300 mg</i>	Tier 2	
<i>polymyxin b sulfate for inj 500000 unit</i>	Tier 2	
<i>pyrimethamine tab 25 mg</i>	Tier 4	PA
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	Tier 2	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	Tier 2	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	Tier 2	
<i>trimethoprim tab 100 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 22
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	Tier 2	QL (80 caps every 10 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	Tier 2	QL (80 caps every 10 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	Tier 2	QL (0.3 bottles every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	Tier 2	QL (0.3 bottles every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	Tier 2	QL (4 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	Tier 2	QL (4 vials every day); Initial limit allows up to a 14 day course every 365 days

PENICILLINS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	Tier 2
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	Tier 2
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	Tier 2
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	Tier 2
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	Tier 2
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	Tier 2
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	Tier 2
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	Tier 2
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	Tier 2
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	Tier 2
<i>amoxicillin (trihydrate) cap 250 mg</i>	Tier 2
<i>amoxicillin (trihydrate) cap 500 mg</i>	Tier 2
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	Tier 2
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	Tier 2
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	Tier 2
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	Tier 2
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	Tier 2
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	Tier 2
<i>amoxicillin (trihydrate) tab 500 mg</i>	Tier 2

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) tab 875 mg</i>	Tier 2	
<i>ampicillin cap 500 mg</i>	Tier 2	
<i>ampicillin sodium for inj 1 gm</i>	Tier 2	
<i>ampicillin sodium for inj 2 gm</i>	Tier 2	
<i>dicloxacillin sodium cap 250 mg</i>	Tier 2	
<i>dicloxacillin sodium cap 500 mg</i>	Tier 2	
<i>penicillin g potassium for inj 5000000 unit</i>	Tier 2	
<i>penicillin g potassium for inj 20000000 unit</i>	Tier 2	
<i>penicillin g sodium for inj 5000000 unit</i>	Tier 2	
<i>penicillin v potassium for soln 125 mg/5ml</i>	Tier 2	
<i>penicillin v potassium for soln 250 mg/5ml</i>	Tier 2	
<i>penicillin v potassium tab 250 mg</i>	Tier 2	
<i>penicillin v potassium tab 500 mg</i>	Tier 2	
<i>Pfizerpen</i>	Tier 2	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	Tier 2	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	Tier 2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	Tier 2	

TETRACYCLINES

<i>Avidoxy</i>	Tier 2	
<i>demeclocycline hcl tab 150 mg</i>	Tier 2	
<i>demeclocycline hcl tab 300 mg</i>	Tier 2	
<i>Doxy 100</i>	Tier 2	
<i>doxycycline hyclate cap 50 mg</i>	Tier 2	
<i>doxycycline hyclate cap 100 mg</i>	Tier 2	
<i>doxycycline hyclate for inj 100 mg</i>	Tier 2	
<i>doxycycline hyclate tab 20 mg</i>	Tier 2	
<i>doxycycline hyclate tab 100 mg</i>	Tier 2	
<i>doxycycline monohydrate cap 50 mg</i>	Tier 2	
<i>doxycycline monohydrate cap 100 mg</i>	Tier 2	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	Tier 2	
<i>doxycycline monohydrate tab 50 mg</i>	Tier 2	
<i>doxycycline monohydrate tab 75 mg</i>	Tier 2	
<i>doxycycline monohydrate tab 150 mg</i>	Tier 2	
<i>minocycline hcl cap 50 mg</i>	Tier 2	
<i>minocycline hcl cap 75 mg</i>	Tier 2	
<i>minocycline hcl cap 100 mg</i>	Tier 2	
<i>minocycline hcl tab 50 mg</i>	Tier 2	
<i>minocycline hcl tab 75 mg</i>	Tier 2	
<i>minocycline hcl tab 100 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>tetracycline hcl cap 250 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>tetracycline hcl cap 500 mg</i>	Tier 2	QL (120 caps every 30 days)

ANTIASTHMATIC AND BRONCHODILATOR AGENTS

ANTIASTHMATIC - MONOCLONAL ANTIBODIES

NUCALA INJ 40MG/0.4	Tier 5	PA, QL (2.5 syringes every 28 days); 1 every 28 days
NUCALA INJ 100MG	Tier 5	PA, QL (3 vials every 28 days); 3 every 28 days
NUCALA INJ 100MG/ML	Tier 5	PA, QL (3 pens every 28 days); 3 every 28 days
NUCALA INJ 100MG/ML	Tier 5	PA, QL (3 syringes every 28 days); 3 every 28 days

STEROID INHALANTS

<i>fluticas hfa aer 44mcg</i>	Tier 2	QL (0.094 inhalers every 30 days)
<i>fluticas hfa aer 110mcg</i>	Tier 2	QL (0.083 inhalers every 30 days)
<i>fluticas hfa aer 220mcg</i>	Tier 2	QL (0.083 inhalers every 30 days)

SYMPATHOMIMETICS

<i>Wixela Inhub Aer 100/50</i>	Tier 2	QL (1 package every 30 days)
<i>Wixela Inhub Aer 250/50</i>	Tier 2	QL (1 package every 30 days)
<i>Wixela Inhub Aer 500/50</i>	Tier 2	QL (1 package every 30 days)

ANTIDIARRHEAL/PROBIOTIC AGENTS

ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.

<i>Soothe Tab 262mg</i>	Tier 1	OTC
<i>Stomach Relf Chw 262mg</i>	Tier 1	OTC
<i>Stomach Relf Sus 262/15ml</i>	Tier 1	OTC
<i>Stomach Relf Sus 525/15ml</i>	Tier 1	OTC

ANTIPERISTALTIC AGENTS

ANTI-DIARRHE LIQ 1MG/5ML	Tier 1	OTC
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	Tier 2	
IMODIUM A-D CAP 2MG	Tier 1	OTC
IMODIUM A-D SOL 1MG/7.5	Tier 1	OTC
IMODIUM A-D TAB 2MG	Tier 1	OTC
MOTOFEN TAB 1-0.025	Tier 4	

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

<i>busulfan inj 6 mg/ml</i>	Tier 2	
<i>carmustine for inj 100 mg</i>	Tier 2	
<i>cyclophosphamide cap 25 mg</i>	Tier 2	
<i>cyclophosphamide cap 50 mg</i>	Tier 2	
<i>cyclophosphamide for inj 1 gm</i>	Tier 5	
<i>cyclophosphamide for inj 2 gm</i>	Tier 5	
<i>cyclophosphamide for inj 500 mg</i>	Tier 5	
<i>dacarbazine for inj 100 mg</i>	Tier 2	
<i>dacarbazine for inj 200 mg</i>	Tier 2	
EMCYT CAP 140MG	Tier 5	
GLEOSTINE CAP 10MG	Tier 5	
GLEOSTINE CAP 40MG	Tier 5	
GLEOSTINE CAP 100MG	Tier 5	
GLIADEL WAF 7.7MG	Tier 3	
<i>ifosfamide for inj 1 gm</i>	Tier 2	
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	Tier 2	
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	Tier 2	
LEUKERAN TAB 2MG	Tier 3	
MATULANE CAP 50MG	Tier 3	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	Tier 2	
TEMODAR INJ 100MG	Tier 5	PA
<i>temozolomide cap 5 mg</i>	Tier 5	PA
<i>temozolomide cap 20 mg</i>	Tier 5	PA
<i>temozolomide cap 100 mg</i>	Tier 5	PA
<i>temozolomide cap 140 mg</i>	Tier 5	PA
<i>temozolomide cap 180 mg</i>	Tier 5	PA
<i>temozolomide cap 250 mg</i>	Tier 5	PA

ANTIBIOTICS

<i>Adriamycin</i>	Tier 2	
<i>bleomycin sulfate for inj 15 unit</i>	Tier 2	
<i>bleomycin sulfate for inj 30 unit</i>	Tier 2	
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	Tier 2	
<i>doxorubicin hcl for inj 10 mg</i>	Tier 2	
<i>doxorubicin hcl inj 2 mg/ml</i>	Tier 2	
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	Tier 2	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	Tier 2	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	Tier 2	
<i>mitomycin for iv soln 5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>mitomycin for iv soln 20 mg</i>	Tier 2	
<i>mitomycin for iv soln 40 mg</i>	Tier 2	
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	Tier 5	
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	Tier 5	
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	Tier 5	

ANTIMETABOLITES

<i>azacitidine for inj 100 mg</i>	Tier 5	PA
<i>capecitabine tab 150 mg</i>	Tier 5	PA
<i>capecitabine tab 500 mg</i>	Tier 5	PA
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>clofarabine iv soln 1 mg/ml</i>	Tier 2	
<i>cytarabine inj 20 mg/ml</i>	Tier 2	
<i>cytarabine inj pf 20 mg/ml</i>	Tier 2	
<i>cytarabine inj pf 100 mg/ml</i>	Tier 2	
<i>decitabine for inj 50 mg</i>	Tier 5	PA
<i>fludarabine phosphate for inj 50 mg</i>	Tier 2	
<i>fludarabine phosphate inj 25 mg/ml</i>	Tier 2	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	Tier 2	
<i>gemcitabine hcl for inj 1 gm</i>	Tier 5	
<i>gemcitabine hcl for inj 2 gm</i>	Tier 5	
<i>gemcitabine hcl for inj 200 mg</i>	Tier 5	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>mercaptopurine tab 50 mg</i>	Tier 2	
<i>methotrexate sodium for inj 1 gm</i>	Tier 2	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	Tier 2	
NIPENT INJ 10MG	Tier 3	
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	Tier 5	
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	Tier 5	
TABLOID TAB 40MG	Tier 3	
ANTINEOPLASTIC, BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	Tier 5	PA, QL (120 tabs every 30 days)
VENCLEXTA TAB 50MG	Tier 5	PA, QL (120 tabs every 30 days)
VENCLEXTA TAB 100MG	Tier 5	PA, QL (180 tabs every 30 days)
VENCLEXTA TAB START PK	Tier 5	PA, QL (1 pack every 28 days)
BIOLOGIC RESPONSE MODIFIERS		
ERBITUX INJ 100MG	Tier 5	PA
ERBITUX INJ 200MG	Tier 5	PA
ERIVEDGE CAP 150MG	Tier 5	PA, QL (30 caps every 30 days)
KADCYLA INJ 100MG	Tier 5	PA
KADCYLA INJ 160MG	Tier 5	PA
KEYTRUDA INJ 100MG/4ML	Tier 5	PA
PADCEV INJ 20MG	Tier 6	PA, QL (21 vials every 28 days)
PADCEV INJ 30MG	Tier 6	PA, QL (15 vials every 28 days)
POMALYST CAP 1MG	Tier 6	PA, QL (21 caps every 28 days)
POMALYST CAP 2MG	Tier 6	PA, QL (21 caps every 28 days)
POMALYST CAP 3MG	Tier 6	PA, QL (21 caps every 28 days)
POMALYST CAP 4MG	Tier 6	PA, QL (21 caps every 28 days)
REVLIMID CAP 2.5MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 5MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 10MG	Tier 5	PA, QL (28 caps every 28 days)

Drug Name	Drug Tier	Requirements/Limits
REVLIMID CAP 15MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 20MG	Tier 5	PA, QL (21 caps every 28 days)
REVLIMID CAP 25MG	Tier 5	PA, QL (21 caps every 28 days)
THALOMID CAP 50MG	Tier 5	PA, QL (28 caps every 28 days)
THALOMID CAP 100MG	Tier 5	PA, QL (112 caps every 28 days)
TICE BCG INJ	Tier 3	
BIOSIMILARS		
GAZYVA INJ 25MG/ML	Tier 5	PA
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate tab 250 mg</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>abiraterone acetate tab 500 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>anastrozole tab 1 mg</i>	Tier 2	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>bicalutamide tab 50 mg</i>	Tier 2	
ELIGARD INJ 7.5MG	Tier 5	PA
ELIGARD INJ 22.5MG	Tier 5	PA
ELIGARD INJ 30MG	Tier 5	PA
ELIGARD INJ 45MG	Tier 5	PA
ERLEADA TAB 60MG	Tier 5	PA, QL (120 tabs every 30 days)
ERLEADA TAB 240MG	Tier 5	PA, QL (30 tabs every 30 days)
<i>exemestane tab 25 mg</i>	Tier 2	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	Tier 5	PA
<i>letrozole tab 2.5 mg</i>	Tier 2	
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	Tier 5	PA
LYSODREN TAB 500MG	Tier 3	
<i>megestrol acetate tab 20 mg</i>	Tier 2	
<i>megestrol acetate tab 40 mg</i>	Tier 2	
<i>nilutamide tab 150 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
NUBEQA TAB 300MG	Tier 5	PA, QL (120 tabs every 30 days)
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>toremifene citrate tab 60 mg (base equivalent)</i>	Tier 2	
XTANDI CAP 40MG	Tier 5	PA, QL (120 caps every 30 days)
XTANDI TAB 40MG	Tier 5	PA, QL (120 tabs every 30 days)
XTANDI TAB 80MG	Tier 5	PA, QL (60 tabs every 30 days)
YONSA TAB 125MG	Tier 5	PA, QL (120 tabs every 30 days)

KINASE INHIBITORS

ALECENSA CAP 150MG	Tier 5	PA, QL (240 caps every 30 days)
CABOMETYX TAB 20MG	Tier 5	PA, QL (30 tabs every 30 days)
CABOMETYX TAB 40MG	Tier 5	PA, QL (30 tabs every 30 days)
CABOMETYX TAB 60MG	Tier 5	PA, QL (30 tabs every 30 days)
CALQUENCE TAB 100MG	Tier 6	PA, QL (60 tabs every 30 days)
CAPRELSA TAB 100MG	Tier 5	PA, QL (60 tabs every 30 days)
CAPRELSA TAB 300MG	Tier 5	PA, QL (30 tabs every 30 days)
COMETRIQ KIT 60MG	Tier 5	PA, QL (1 kit every 28 days)
COMETRIQ KIT 100MG	Tier 5	PA, QL (1 kit every 28 days)
COMETRIQ KIT 140MG	Tier 5	PA, QL (1 kit every 28 days)
<i>dasatinib tab 20 mg</i>	Tier 5	PA, QL (90 tabs every 30 days)
<i>dasatinib tab 50 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>dasatinib tab 70 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dasatinib tab 80 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>dasatinib tab 100 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>dasatinib tab 140 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 2.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 7.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 10 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab for oral susp 2 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>everolimus tab for oral susp 3 mg</i>	Tier 5	PA, QL (90 tabs every 30 days)
<i>everolimus tab for oral susp 5 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	Tier 5	PA, QL (60 tabs every 30 days)
INLYTA TAB 1MG	Tier 5	PA, QL (240 tabs every 30 days)
INLYTA TAB 5MG	Tier 5	PA, QL (120 tabs every 30 days)
ITOVEBI TAB 3MG	Tier 6	PA, QL (60 tabs every 30 days)
ITOVEBI TAB 9MG	Tier 6	PA, QL (30 tabs every 30 days)
JAKAFI TAB 5MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 10MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 15MG	Tier 5	PA, QL (60 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
JAKAFI TAB 20MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 25MG	Tier 5	PA, QL (60 tabs every 30 days)
KISQALI TAB 200DOSE	Tier 5	PA, QL (21 tabs every 28 days); 200 mg dose
KISQALI TAB 400DOSE	Tier 5	PA, QL (42 tabs every 28 days); 400 mg dose
KISQALI TAB 600DOSE	Tier 5	PA, QL (63 tabs every 28 days); 600 mg dose
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	Tier 5	PA, QL (180 tabs every 30 days)
LENVIMA CAP 4MG	Tier 6	PA, QL (30 caps every 30 days)
LENVIMA CAP 8 MG	Tier 6	PA, QL (60 caps every 30 days)
LENVIMA CAP 10 MG	Tier 6	PA, QL (30 caps every 30 days)
LENVIMA CAP 12MG	Tier 6	PA, QL (90 caps every 30 days)
LENVIMA CAP 14 MG	Tier 6	PA, QL (60 caps every 30 days)
LENVIMA CAP 18 MG	Tier 6	PA, QL (90 caps every 30 days)
LENVIMA CAP 20 MG	Tier 6	PA, QL (60 caps every 30 days)
LENVIMA CAP 24 MG	Tier 6	PA, QL (90 caps every 30 days)
LORBRENA TAB 25MG	Tier 6	PA, QL (90 tabs every 30 days)
LORBRENA TAB 100MG	Tier 6	PA, QL (30 tabs every 30 days)
MEKINIST SOL 0.05/ML	Tier 5	PA, QL (12 bottles every 28 days)
MEKINIST TAB 0.5MG	Tier 5	PA, QL (90 tabs every 30 days)
MEKINIST TAB 2MG	Tier 5	PA, QL (30 tabs every 30 days)
<i>pazopanib hcl tab 200 mg (base equiv)</i>	Tier 5	PA, QL (120 tabs every 30 days)
RYDAPT CAP 25MG	Tier 6	PA, QL (224 caps every 28 days)
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 20MG	Tier 5	PA, QL (90 tabs every 30 days)
SPRYCEL TAB 50MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 70MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 80MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 140MG	Tier 5	PA, QL (30 tabs every 30 days)
STIVARGA TAB 40MG	Tier 5	PA, QL (84 tabs every 28 days)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 25 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
TAFINLAR CAP 50MG	Tier 5	PA, QL (120 caps every 30 days)
TAFINLAR CAP 75MG	Tier 5	PA, QL (120 caps every 30 days)
TAFINLAR TAB 10MG	Tier 5	PA, QL (4 bottles every 28 days)
TUKYSA TAB 50MG	Tier 6	PA, QL (120 tabs every 30 days)
TUKYSA TAB 150MG	Tier 6	PA, QL (120 tabs every 30 days)
VERZENIO TAB 50MG	Tier 5	PA, QL (56 tabs every 28 days)
VERZENIO TAB 100MG	Tier 5	PA, QL (56 tabs every 28 days)
VERZENIO TAB 150MG	Tier 5	PA, QL (56 tabs every 28 days)
VERZENIO TAB 200MG	Tier 5	PA, QL (56 tabs every 28 days)
VITRAKVI CAP 25MG	Tier 6	PA, QL (180 caps every 30 days)
VITRAKVI CAP 100MG	Tier 6	PA, QL (60 caps every 30 days)

Drug Name	Drug Tier	Requirements/Limits
VITRAKVI SOL 20MG/ML	Tier 6	PA, QL (300 mL every 30 days)
XALKORI CAP 20MG	Tier 5	PA, QL (120 pellets every 30 days)
XALKORI CAP 50MG	Tier 5	PA, QL (120 pellets every 30 days)
XALKORI CAP 150MG	Tier 5	PA, QL (180 pellets every 30 days)
XALKORI CAP 200MG	Tier 5	PA, QL (120 caps every 30 days)
XALKORI CAP 250MG	Tier 5	PA, QL (120 caps every 30 days)
ZELBORAF TAB 240MG	Tier 5	PA, QL (240 tabs every 30 days)
ZYDELIG TAB 100MG	Tier 5	PA, QL (60 tabs every 30 days)
ZYDELIG TAB 150MG	Tier 5	PA, QL (60 tabs every 30 days)
ZYKADIA TAB 150MG	Tier 5	PA, QL (90 tabs every 30 days)

MISCELLANEOUS

<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	Tier 2	
<i>bexarotene cap 75 mg</i>	Tier 5	PA
<i>hydroxyurea cap 500 mg</i>	Tier 2	
IDHIFA TAB 50MG	Tier 5	PA, QL (30 tabs every 30 days)
IDHIFA TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)
LYNPARZA TAB 100MG	Tier 5	PA, QL (120 tabs every 30 days)
LYNPARZA TAB 150MG	Tier 5	PA, QL (120 tabs every 30 days)
ODOMZO CAP 200MG	Tier 5	PA, QL (30 caps every 30 days)
ONCASPAR INJ 750/ML	Tier 5	PA
PHOTOFRIN INJ 75MG	Tier 3	
POLIVY INJ 30MG	Tier 6	PA
POLIVY INJ 140MG	Tier 6	PA
<i>tretinoin cap 10 mg</i>	Tier 2	
ZEJULA TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ZEJULA TAB 200MG	Tier 5	PA, QL (30 tabs every 30 days)
ZEJULA TAB 300MG	Tier 5	PA, QL (30 tabs every 30 days)
ZOLINZA CAP 100MG	Tier 5	PA, QL (120 caps every 30 days)

MITOTIC INHIBITORS

<i>docetaxel for inj conc 20 mg/ml</i>	Tier 2
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	Tier 2
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	Tier 2
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	Tier 2
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	Tier 2
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	Tier 2
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	Tier 2
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	Tier 2
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	Tier 2
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	Tier 2
<i>vinblastine sulfate inj 1 mg/ml</i>	Tier 2
<i>vincristine sulfate iv soln 1 mg/ml</i>	Tier 2
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	Tier 2
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	Tier 2

PLATINUM-BASED AGENTS

<i>carboplatin iv soln 50 mg/5ml</i>	Tier 2
<i>carboplatin iv soln 150 mg/15ml</i>	Tier 2
<i>carboplatin iv soln 450 mg/45ml</i>	Tier 2
<i>carboplatin iv soln 600 mg/60ml</i>	Tier 2
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	Tier 2
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	Tier 2
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	Tier 2
<i>oxaliplatin for iv inj 50 mg</i>	Tier 5
<i>oxaliplatin for iv inj 100 mg</i>	Tier 5
<i>oxaliplatin iv soln 50 mg/10ml</i>	Tier 5
<i>oxaliplatin iv soln 100 mg/20ml</i>	Tier 5
<i>Paraplatin</i>	Tier 2

PROTECTIVE AGENTS

<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	Tier 2
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	Tier 2
<i>leucovorin calcium for inj 50 mg</i>	Tier 2
<i>leucovorin calcium for inj 100 mg</i>	Tier 2
<i>leucovorin calcium for inj 200 mg</i>	Tier 2

Drug Name	Drug Tier	Requirements/Limits
<i>leucovorin calcium for inj 350 mg</i>	Tier 2	
<i>leucovorin calcium for inj 500 mg</i>	Tier 2	
<i>leucovorin calcium tab 5 mg</i>	Tier 2	
<i>leucovorin calcium tab 10 mg</i>	Tier 2	
<i>leucovorin calcium tab 15 mg</i>	Tier 2	
<i>leucovorin calcium tab 25 mg</i>	Tier 2	
<i>mesna inj 100 mg/ml</i>	Tier 2	
<i>mesna tab 400 mg</i>	Tier 2	
MESNEX TAB 400MG	Tier 5	

TOPOISOMERASE INHIBITORS

<i>etoposide cap 50 mg</i>	Tier 2	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	Tier 2	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	Tier 2	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	Tier 2	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	Tier 5	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	Tier 5	
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	Tier 2	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	Tier 5	
<i>topotecan hcl for inj 4 mg (base equiv)</i>	Tier 2	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ANTINEOPLASTIC ENZYME INHIBITORS

IBRANCE CAP 75MG	Tier 5	PA, QL (21 every 28 days)
IBRANCE CAP 100MG	Tier 5	PA, QL (21 every 28 days)
IBRANCE CAP 125MG	Tier 5	PA, QL (21 every 28 days)
IBRANCE TAB 75MG	Tier 5	PA, QL (21 every 28 days)
IBRANCE TAB 100MG	Tier 5	PA, QL (21 every 28 days)
IBRANCE TAB 125MG	Tier 5	PA, QL (21 every 28 days)

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	Tier 1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	Tier 1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	Tier 1	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	Tier 1	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	Tier 1	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	Tier 1	

ACE INHIBITORS

<i>benazepril hcl tab 5 mg</i>	Tier 1	
<i>benazepril hcl tab 10 mg</i>	Tier 1	
<i>benazepril hcl tab 20 mg</i>	Tier 1	
<i>benazepril hcl tab 40 mg</i>	Tier 1	
<i>captopril tab 12.5 mg</i>	Tier 1	
<i>captopril tab 25 mg</i>	Tier 1	
<i>captopril tab 50 mg</i>	Tier 1	
<i>captopril tab 100 mg</i>	Tier 1	
<i>enalapril maleate tab 2.5 mg</i>	Tier 1	
<i>enalapril maleate tab 5 mg</i>	Tier 1	
<i>enalapril maleate tab 10 mg</i>	Tier 1	
<i>enalapril maleate tab 20 mg</i>	Tier 1	
<i>fosinopril sodium tab 10 mg</i>	Tier 1	
<i>fosinopril sodium tab 20 mg</i>	Tier 1	
<i>fosinopril sodium tab 40 mg</i>	Tier 1	
<i>lisinopril tab 2.5 mg</i>	Tier 1	
<i>lisinopril tab 5 mg</i>	Tier 1	
<i>lisinopril tab 10 mg</i>	Tier 1	
<i>lisinopril tab 20 mg</i>	Tier 1	
<i>lisinopril tab 30 mg</i>	Tier 1	
<i>lisinopril tab 40 mg</i>	Tier 1	
<i>moexipril hcl tab 7.5 mg</i>	Tier 1	
<i>moexipril hcl tab 15 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>perindopril erbumine tab 2 mg</i>	Tier 1	
<i>perindopril erbumine tab 4 mg</i>	Tier 1	
<i>perindopril erbumine tab 8 mg</i>	Tier 1	
<i>quinapril hcl tab 5 mg</i>	Tier 1	
<i>quinapril hcl tab 10 mg</i>	Tier 1	
<i>quinapril hcl tab 20 mg</i>	Tier 1	
<i>quinapril hcl tab 40 mg</i>	Tier 1	
<i>ramipril cap 1.25 mg</i>	Tier 1	
<i>ramipril cap 2.5 mg</i>	Tier 1	
<i>ramipril cap 5 mg</i>	Tier 1	
<i>ramipril cap 10 mg</i>	Tier 1	
<i>trandolapril tab 1 mg</i>	Tier 1	
<i>trandolapril tab 2 mg</i>	Tier 1	
<i>trandolapril tab 4 mg</i>	Tier 1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	Tier 2	
<i>eplerenone tab 50 mg</i>	Tier 2	
KERENDIA TAB 10MG	Tier 4	PA
KERENDIA TAB 20MG	Tier 4	PA
<i>spironolactone tab 25 mg</i>	Tier 2	
<i>spironolactone tab 50 mg</i>	Tier 2	
<i>spironolactone tab 100 mg</i>	Tier 2	
ALPHA BLOCKERS		
<i>prazosin hcl cap 1 mg</i>	Tier 2	
<i>prazosin hcl cap 2 mg</i>	Tier 2	
<i>prazosin hcl cap 5 mg</i>	Tier 2	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	Tier 1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	Tier 1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 40-5 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	Tier 1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	Tier 1	
<i>candesartan cilexetil tab 8 mg</i>	Tier 1	
<i>candesartan cilexetil tab 16 mg</i>	Tier 1	
<i>candesartan cilexetil tab 32 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>irbesartan tab 75 mg</i>	Tier 1	
<i>irbesartan tab 150 mg</i>	Tier 1	
<i>irbesartan tab 300 mg</i>	Tier 1	
<i>losartan potassium tab 25 mg</i>	Tier 1	
<i>losartan potassium tab 50 mg</i>	Tier 1	
<i>losartan potassium tab 100 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 5 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 20 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 40 mg</i>	Tier 1	
<i>telmisartan tab 20 mg</i>	Tier 1	
<i>telmisartan tab 40 mg</i>	Tier 1	
<i>telmisartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 40 mg</i>	Tier 1	
<i>valsartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 160 mg</i>	Tier 1	
<i>valsartan tab 320 mg</i>	Tier 1	

ANTIARRHYTHMICS

<i>amiodarone hcl tab 200 mg</i>	Tier 2	
<i>amiodarone hcl tab 400 mg</i>	Tier 2	
<i>disopyramide phosphate cap 100 mg</i>	Tier 2	
<i>disopyramide phosphate cap 150 mg</i>	Tier 2	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	Tier 2	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	Tier 2	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	Tier 2	PA
<i>flecainide acetate tab 50 mg</i>	Tier 2	
<i>flecainide acetate tab 100 mg</i>	Tier 2	
<i>flecainide acetate tab 150 mg</i>	Tier 2	
<i>lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)</i>	Tier 2	
<i>lidocaine hcl (cardiac) iv soln pref syr 100 mg/5ml (2%)</i>	Tier 2	
MULTAQ TAB 400MG	Tier 4	PA
NORPACE CAP 100MG CR	Tier 3	
NORPACE CAP 150MG CR	Tier 3	
<i>Pacerone</i>	Tier 2	
<i>procainamide hcl inj 100 mg/ml</i>	Tier 2	
<i>propafenone hcl cap er 12hr 225 mg</i>	Tier 2	
<i>propafenone hcl cap er 12hr 325 mg</i>	Tier 2	
<i>propafenone hcl cap er 12hr 425 mg</i>	Tier 2	
<i>propafenone hcl tab 150 mg</i>	Tier 2	
<i>propafenone hcl tab 225 mg</i>	Tier 2	
<i>propafenone hcl tab 300 mg</i>	Tier 2	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 40
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl (afib/afl) tab 120 mg</i>	Tier 2	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	Tier 2	
<i>sotalol hcl tab 80 mg</i>	Tier 2	
<i>sotalol hcl tab 120 mg</i>	Tier 2	
<i>sotalol hcl tab 160 mg</i>	Tier 2	
<i>sotalol hcl tab 240 mg</i>	Tier 2	
ANTILIPEMICS, ACL INHIBITORS/COMBINATIONS		
<i>NEXLETOL TAB 180MG</i>	Tier 4	PA
ANTILIPEMICS, BILE ACID RESINS		
<i>cholestyramine light powder 4 gm/dose</i>	Tier 2	
<i>cholestyramine light powder packets 4 gm</i>	Tier 2	
<i>cholestyramine powder 4 gm/dose</i>	Tier 2	
<i>cholestyramine powder packets 4 gm</i>	Tier 2	
<i>colesevelam hcl packet for susp 3.75 gm</i>	Tier 2	
<i>colesevelam hcl tab 625 mg</i>	Tier 2	
<i>colestipol hcl granule packets 5 gm</i>	Tier 2	
<i>colestipol hcl granules 5 gm</i>	Tier 2	
<i>colestipol hcl tab 1 gm</i>	Tier 2	
<i>Prevalite</i>	Tier 2	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR		
<i>ezetimibe tab 10 mg</i>	Tier 2	
ANTILIPEMICS, FIBRATES		
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	Tier 2	
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	Tier 2	
<i>fenofibrate cap 150 mg</i>	Tier 2	
<i>fenofibrate micronized cap 43 mg</i>	Tier 2	
<i>fenofibrate micronized cap 67 mg</i>	Tier 2	
<i>fenofibrate micronized cap 134 mg</i>	Tier 2	
<i>fenofibrate micronized cap 200 mg</i>	Tier 2	
<i>fenofibrate tab 48 mg</i>	Tier 2	
<i>fenofibrate tab 54 mg</i>	Tier 2	
<i>fenofibrate tab 145 mg</i>	Tier 2	
<i>fenofibrate tab 160 mg</i>	Tier 2	
<i>gemfibrozil tab 600 mg</i>	Tier 2	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pitavastatin calcium tab 1 mg</i>	Tier 1	\$0 copay for members age 40 through 75
<i>pitavastatin calcium tab 2 mg</i>	Tier 1	\$0 copay for members age 40 through 75
<i>pitavastatin calcium tab 4 mg</i>	Tier 1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 80 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 5 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>rosuvastatin calcium tab 20 mg</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>rosuvastatin calcium tab 40 mg</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>simvastatin tab 5 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 80 mg</i>	Tier 1	ST; PA**; Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease

ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS

<i>ezetimibe-simvastatin tab 10-10 mg</i>	Tier 2
<i>ezetimibe-simvastatin tab 10-20 mg</i>	Tier 2
<i>ezetimibe-simvastatin tab 10-40 mg</i>	Tier 2
<i>ezetimibe-simvastatin tab 10-80 mg</i>	Tier 2

ANTILIPEMICS, MISCELLANEOUS

<i>niacin tab er 500 mg (antihyperlipidemic)</i>	Tier 2
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	Tier 2
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	Tier 2

ANTILIPEMICS, OMEGA-3 FATTY ACIDS

<i>icosapent ethyl cap 0.5 gm</i>	Tier 2
-----------------------------------	--------

Drug Name	Drug Tier	Requirements/Limits
<i>icosapent ethyl cap 1 gm</i>	Tier 2	Only indicated as an adjunct to diet to reduce TG levels in adult patients with severe (greater than or equal to 500 mg/dL) hypertriglyceridemia
<i>omega-3-acid ethyl esters cap 1 gm</i>	Tier 2	
ANTILIPEMICS, PCSK9 INHIBITORS		
REPATHA INJ 140MG/ML	Tier 3	QL (3 syringes every 28 days)
REPATHA PUSH INJ 420/3.5	Tier 3	QL (1 injection every 28 days)
REPATHA SURE INJ 140MG/ML	Tier 3	QL (3 pens every 28 days)
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	Tier 2	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	Tier 2	
BETA-BLOCKERS		
<i>acebutolol hcl cap 200 mg</i>	Tier 2	
<i>acebutolol hcl cap 400 mg</i>	Tier 2	
<i>atenolol tab 25 mg</i>	Tier 2	
<i>atenolol tab 50 mg</i>	Tier 2	
<i>atenolol tab 100 mg</i>	Tier 2	
<i>betaxolol hcl tab 10 mg</i>	Tier 2	
<i>betaxolol hcl tab 20 mg</i>	Tier 2	
<i>bisoprolol fumarate tab 5 mg</i>	Tier 2	
<i>bisoprolol fumarate tab 10 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 10 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	Tier 2	
<i>carvedilol tab 3.125 mg</i>	Tier 2	
<i>carvedilol tab 6.25 mg</i>	Tier 2	
<i>carvedilol tab 12.5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>carvedilol tab 25 mg</i>	Tier 2	
<i>labetalol hcl tab 100 mg</i>	Tier 2	
<i>labetalol hcl tab 200 mg</i>	Tier 2	
<i>labetalol hcl tab 300 mg</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol tartrate tab 25 mg</i>	Tier 2	
<i>metoprolol tartrate tab 50 mg</i>	Tier 2	
<i>metoprolol tartrate tab 100 mg</i>	Tier 2	
<i>nadolol tab 20 mg</i>	Tier 2	
<i>nadolol tab 40 mg</i>	Tier 2	
<i>nadolol tab 80 mg</i>	Tier 2	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	Tier 2	
<i>pindolol tab 5 mg</i>	Tier 2	
<i>pindolol tab 10 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 60 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 80 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 120 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 160 mg</i>	Tier 2	
<i>propranolol hcl oral soln 20 mg/5ml</i>	Tier 2	
<i>propranolol hcl oral soln 40 mg/5ml</i>	Tier 2	
<i>propranolol hcl tab 10 mg</i>	Tier 2	
<i>propranolol hcl tab 20 mg</i>	Tier 2	
<i>propranolol hcl tab 40 mg</i>	Tier 2	
<i>propranolol hcl tab 60 mg</i>	Tier 2	
<i>propranolol hcl tab 80 mg</i>	Tier 2	
<i>timolol maleate tab 5 mg</i>	Tier 2	
<i>timolol maleate tab 10 mg</i>	Tier 2	
<i>timolol maleate tab 20 mg</i>	Tier 2	
CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS		
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	Tier 1	

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	Tier 2	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	Tier 2	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	Tier 2	
<i>Cartia Xt</i>	Tier 2	
<i>Dilt-Xr</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 60 mg</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 90 mg</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 120 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	Tier 2	
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	Tier 2	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	Tier 2	
<i>diltiazem hcl tab 30 mg</i>	Tier 2	
<i>diltiazem hcl tab 60 mg</i>	Tier 2	
<i>diltiazem hcl tab 90 mg</i>	Tier 2	
<i>diltiazem hcl tab 120 mg</i>	Tier 2	
<i>diltiazem hcl tab er 24hr 120 mg</i>	Tier 2	
<i>felodipine tab er 24hr 2.5 mg</i>	Tier 2	
<i>felodipine tab er 24hr 5 mg</i>	Tier 2	
<i>felodipine tab er 24hr 10 mg</i>	Tier 2	
<i>isradipine cap 2.5 mg</i>	Tier 2	
<i>isradipine cap 5 mg</i>	Tier 2	
<i>Matzim La</i>	Tier 2	
<i>nicardipine hcl cap 20 mg</i>	Tier 2	
<i>nicardipine hcl cap 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 60 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 90 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	Tier 2	
<i>nimodipine cap 30 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 8.5 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 17 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 20 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 25.5 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 30 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 34 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 40 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 100 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 120 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 180 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 200 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 240 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 300 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 360 mg</i>	Tier 2	
<i>verapamil hcl tab 40 mg</i>	Tier 2	
<i>verapamil hcl tab 80 mg</i>	Tier 2	
<i>verapamil hcl tab 120 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl tab er 120 mg</i>	Tier 2	
<i>verapamil hcl tab er 180 mg</i>	Tier 2	
<i>verapamil hcl tab er 240 mg</i>	Tier 2	
DIGITALIS GLYCOSIDES		
<i>digoxin oral soln 0.05 mg/ml</i>	Tier 2	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	Tier 2	
<i>digoxin tab 125 mcg (0.125 mg)</i>	Tier 2	
<i>digoxin tab 250 mcg (0.25 mg)</i>	Tier 2	
DIRECT RENIN INHIBITORS/COMBINATIONS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	Tier 2	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	Tier 2	
DIURETICS		
<i>acetazolamide cap er 12hr 500 mg</i>	Tier 2	
<i>acetazolamide tab 125 mg</i>	Tier 2	
<i>acetazolamide tab 250 mg</i>	Tier 2	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	Tier 2	
<i>amiloride hcl tab 5 mg</i>	Tier 2	
<i>bumetanide tab 0.5 mg</i>	Tier 2	
<i>bumetanide tab 1 mg</i>	Tier 2	
<i>bumetanide tab 2 mg</i>	Tier 2	
<i>chlorthalidone tab 25 mg</i>	Tier 2	
<i>chlorthalidone tab 50 mg</i>	Tier 2	
<i>DIURIL SUS 250/5ML</i>	Tier 4	
<i>ethacrynic acid tab 25 mg</i>	Tier 4	
<i>furosemide inj 10 mg/ml</i>	Tier 2	
<i>furosemide oral soln 8 mg/ml</i>	Tier 2	
<i>furosemide oral soln 10 mg/ml</i>	Tier 2	
<i>furosemide tab 20 mg</i>	Tier 2	
<i>furosemide tab 40 mg</i>	Tier 2	
<i>furosemide tab 80 mg</i>	Tier 2	
<i>hydrochlorothiazide cap 12.5 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 12.5 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 25 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 50 mg</i>	Tier 2	
<i>indapamide tab 1.25 mg</i>	Tier 2	
<i>indapamide tab 2.5 mg</i>	Tier 2	
<i>mannitol iv soln 20%</i>	Tier 2	
<i>mannitol iv soln 25%</i>	Tier 2	
<i>methazolamide tab 25 mg</i>	Tier 2	
<i>methazolamide tab 50 mg</i>	Tier 2	
<i>metolazone tab 2.5 mg</i>	Tier 2	
<i>metolazone tab 5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>metolazone tab 10 mg</i>	Tier 2	
<i>Osmitol Viaflex</i>	Tier 2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	Tier 2	
<i>torsemide tab 5 mg</i>	Tier 2	
<i>torsemide tab 10 mg</i>	Tier 2	
<i>torsemide tab 20 mg</i>	Tier 2	
<i>torsemide tab 100 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	Tier 2	
<i>triamterene cap 50 mg</i>	Tier 2	
<i>triamterene cap 100 mg</i>	Tier 2	
HEART FAILURE		
<i>CORLANOR SOL 5MG/5ML</i>	Tier 3	
<i>CORLANOR TAB 5MG</i>	Tier 3	
<i>CORLANOR TAB 7.5MG</i>	Tier 3	
<i>ENTRESTO CAP 6-6MG</i>	Tier 3	
<i>ENTRESTO CAP 15-16MG</i>	Tier 3	
<i>ENTRESTO TAB 24-26MG</i>	Tier 3	
<i>ENTRESTO TAB 49-51MG</i>	Tier 3	
<i>ENTRESTO TAB 97-103MG</i>	Tier 3	
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	Tier 2	
<i>ivabradine hcl tab 5 mg (base equiv)</i>	Tier 2	
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	Tier 2	
MISCELLANEOUS		
<i>clonidine hcl tab 0.1 mg</i>	Tier 2	
<i>clonidine hcl tab 0.2 mg</i>	Tier 2	
<i>clonidine hcl tab 0.3 mg</i>	Tier 2	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	Tier 2	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	Tier 2	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	Tier 2	
<i>guanfacine hcl tab 1 mg</i>	Tier 2	
<i>guanfacine hcl tab 2 mg</i>	Tier 2	
<i>hydralazine hcl tab 10 mg</i>	Tier 2	
<i>hydralazine hcl tab 25 mg</i>	Tier 2	
<i>hydralazine hcl tab 50 mg</i>	Tier 2	
<i>hydralazine hcl tab 100 mg</i>	Tier 2	
<i>methyldopa tab 250 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>methyldopa tab 500 mg</i>	Tier 2	
<i>midodrine hcl tab 2.5 mg</i>	Tier 2	
<i>midodrine hcl tab 5 mg</i>	Tier 2	
<i>midodrine hcl tab 10 mg</i>	Tier 2	
<i>minoxidil tab 2.5 mg</i>	Tier 2	
<i>minoxidil tab 10 mg</i>	Tier 2	
<i>phenoxybenzamine hcl cap 10 mg</i>	Tier 5	PA, QL (360 caps every 30 days)
<i>ranolazine tab er 12hr 500 mg</i>	Tier 2	ST; PA**
<i>ranolazine tab er 12hr 1000 mg</i>	Tier 2	ST; PA**

NITRATES

<i>isosorbide dinitrate tab 5 mg</i>	Tier 2	
<i>isosorbide dinitrate tab 10 mg</i>	Tier 2	
<i>isosorbide dinitrate tab 20 mg</i>	Tier 2	
<i>isosorbide dinitrate tab 30 mg</i>	Tier 2	
<i>isosorbide mononitrate tab 10 mg</i>	Tier 2	
<i>isosorbide mononitrate tab 20 mg</i>	Tier 2	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	Tier 2	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	Tier 2	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	Tier 2	
NITRO-BID OIN 2%	Tier 4	
NITRO-DUR DIS 0.3MG/HR	Tier 3	
NITRO-DUR DIS 0.8MG/HR	Tier 3	
<i>nitroglycerin sl tab 0.3 mg</i>	Tier 2	
<i>nitroglycerin sl tab 0.4 mg</i>	Tier 2	
<i>nitroglycerin sl tab 0.6 mg</i>	Tier 2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	Tier 2	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	Tier 2	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	Tier 2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	Tier 2	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	Tier 2	

PULMONARY ARTERIAL HYPERTENSION

<i>ambrisentan tab 5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>ambrisentan tab 10 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>bosentan tab 62.5 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>bosentan tab 125 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
OPSUMIT TAB 10MG	Tier 5	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ORENITRAM TAB 0.25MG	Tier 5	PA
ORENITRAM TAB 0.125MG	Tier 5	PA
ORENITRAM TAB 1MG	Tier 5	PA
ORENITRAM TAB 2.5MG	Tier 5	PA
ORENITRAM TAB 5MG	Tier 5	PA
ORENITRAM TAB MONTH 1	Tier 5	PA
ORENITRAM TAB MONTH 2	Tier 5	PA
ORENITRAM TAB MONTH 3	Tier 5	PA
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	Tier 5	PA
<i>sildenafil citrate tab 20 mg</i>	Tier 5	PA, QL (360 tabs every 30 days)
<i>tadalafil tab 20 mg (pah)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	Tier 5	PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	Tier 5	PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	Tier 5	PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	Tier 5	PA
TYVASO RF KT SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
TYVASO SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
TYVASO ST KT SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
UPTRAVI INJ 1800MCG	Tier 5	PA
UPTRAVI PACK TAB 200/800	Tier 5	PA, QL (1 pack every 28 days)
UPTRAVI TAB 200MCG	Tier 5	PA, QL (140 tabs every 28 days)
UPTRAVI TAB 400MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 600MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 800MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1000MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1200MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1400MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1600MCG	Tier 5	PA, QL (60 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
VENTAVIS SOL 10MCG/ML	Tier 5	PA, QL (270 ampules every 30 days)
VENTAVIS SOL 20MCG/ML	Tier 5	PA, QL (270 ampules every 30 days)

CENTRAL NERVOUS SYSTEM

ALCOHOL DETERRENTS

<i>acamprosate calcium tab delayed release 333 mg</i>	Tier 2	PA
<i>disulfiram tab 250 mg</i>	Tier 2	
<i>disulfiram tab 500 mg</i>	Tier 2	

AMYOTROPHIC LATERAL SCLEROSIS (ALS)

<i>riluzole tab 50 mg</i>	Tier 2	
---------------------------	--------	--

ANTIANXIETY

ALPRAZOLAM CON 1 MG/ML	Tier 3	QL (300 mL every 30 days)
<i>alprazolam orally disintegrating tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 0.25 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 0.25 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>buspirone hcl tab 5 mg</i>	Tier 2	
<i>buspirone hcl tab 7.5 mg</i>	Tier 2	
<i>buspirone hcl tab 10 mg</i>	Tier 2	
<i>buspirone hcl tab 15 mg</i>	Tier 2	
<i>buspirone hcl tab 30 mg</i>	Tier 2	
<i>chlordiazepoxide hcl cap 5 mg</i>	Tier 2	QL (360 caps every 30 days)
<i>chlordiazepoxide hcl cap 10 mg</i>	Tier 2	QL (360 caps every 30 days)
<i>chlordiazepoxide hcl cap 25 mg</i>	Tier 2	QL (360 caps every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clomipramine hcl cap 25 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 50 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 75 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>fluvoxamine maleate tab 25 mg</i>	Tier 2	
<i>fluvoxamine maleate tab 50 mg</i>	Tier 2	
<i>fluvoxamine maleate tab 100 mg</i>	Tier 2	
<i>lorazepam conc 2 mg/ml</i>	Tier 2	QL (150 mL every 30 days)
<i>lorazepam tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>lorazepam tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>lorazepam tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>meprobamate tab 200 mg</i>	Tier 2	
<i>meprobamate tab 400 mg</i>	Tier 2	
<i>oxazepam cap 10 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>oxazepam cap 15 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>oxazepam cap 30 mg</i>	Tier 2	QL (120 caps every 30 days)

ANTIDEMENTIA

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	Tier 2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 5 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 10 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 23 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	Tier 2	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	Tier 2	
<i>galantamine hydrobromide tab 4 mg</i>	Tier 2	
<i>galantamine hydrobromide tab 8 mg</i>	Tier 2	
<i>galantamine hydrobromide tab 12 mg</i>	Tier 2	
<i>memantine hcl cap er 24hr 7 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl cap er 24hr 14 mg</i>	Tier 2	
<i>memantine hcl cap er 24hr 21 mg</i>	Tier 2	
<i>memantine hcl cap er 24hr 28 mg</i>	Tier 2	
<i>memantine hcl oral solution 2 mg/ml</i>	Tier 2	
<i>memantine hcl tab 5 mg</i>	Tier 2	
<i>memantine hcl tab 10 mg</i>	Tier 2	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	Tier 2	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	Tier 2	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	Tier 2	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	Tier 2	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	Tier 2	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	Tier 2	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	Tier 2	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	Tier 2	

ANTIDEPRESSANTS

<i>amitriptyline hcl tab 10 mg</i>	Tier 2	QL (150 tabs every 30 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 25 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 50 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 75 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amitriptyline hcl tab 100 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amitriptyline hcl tab 150 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amoxapine tab 25 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>amoxapine tab 50 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>amoxapine tab 100 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>amoxapine tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>bupropion hcl tab 75 mg</i>	Tier 2	
<i>bupropion hcl tab 100 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 100 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 150 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 200 mg</i>	Tier 2	
<i>bupropion hcl tab er 24hr 150 mg</i>	Tier 2	
<i>bupropion hcl tab er 24hr 300 mg</i>	Tier 2	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	Tier 2	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	Tier 2	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	Tier 2	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	Tier 2	
<i>desipramine hcl tab 10 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 25 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 50 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 75 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 100 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 150 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); (generic of Pristiq)
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); (generic of Pristiq)
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); (generic of Pristiq)

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl cap 10 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 25 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 50 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 75 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 150 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl conc 10 mg/ml</i>	Tier 2	QL (450 mL every 30 days); QL applies to members age 65 and older
<i>duloxetine hcl cap 20 mg</i>	Tier 2	
<i>duloxetine hcl cap 30 mg</i>	Tier 2	
<i>duloxetine hcl cap 60 mg</i>	Tier 2	
EMSAM DIS 6MG/24HR	Tier 4	PA
EMSAM DIS 9MG/24HR	Tier 4	PA
EMSAM DIS 12MG/24H	Tier 4	PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	Tier 2	
FETZIMA CAP 20MG	Tier 4	QL (30 caps every 30 days)
FETZIMA CAP 40MG	Tier 4	QL (30 caps every 30 days)
FETZIMA CAP 80MG	Tier 4	QL (30 caps every 30 days)
FETZIMA CAP 120MG	Tier 4	QL (30 caps every 30 days)
FETZIMA CAP TITRATIO	Tier 4	QL (30 caps every 30 days)
<i>fluoxetine hcl cap 10 mg</i>	Tier 2	
<i>fluoxetine hcl cap 20 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl cap 40 mg</i>	Tier 2	
<i>fluoxetine hcl cap delayed release 90 mg</i>	Tier 2	
<i>fluoxetine hcl solution 20 mg/5ml</i>	Tier 2	
<i>fluoxetine hcl tab 10 mg</i>	Tier 2	(generic Sarafem not covered)
<i>fluoxetine hcl tab 20 mg</i>	Tier 2	(generic Sarafem not covered)
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	Tier 2	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	Tier 2	
<i>imipramine hcl tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days); QL applies to members age 65 and older
<i>imipramine hcl tab 25 mg</i>	Tier 2	QL (120 tabs every 30 days); QL applies to members age 65 and older
<i>imipramine hcl tab 50 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 75 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 125 mg</i>	Tier 2	PA, QL (Max DD of 200mg); High strength requires PA for members age 65 and older
<i>imipramine pamoate cap 150 mg</i>	Tier 2	PA, QL (Max DD of 200mg); High strength requires PA for members age 65 and older
MARPLAN TAB 10MG	Tier 4	
<i>mirtazapine orally disintegrating tab 15 mg</i>	Tier 2	
<i>mirtazapine orally disintegrating tab 30 mg</i>	Tier 2	
<i>mirtazapine orally disintegrating tab 45 mg</i>	Tier 2	
<i>mirtazapine tab 7.5 mg</i>	Tier 2	
<i>mirtazapine tab 15 mg</i>	Tier 2	
<i>mirtazapine tab 30 mg</i>	Tier 2	
<i>mirtazapine tab 45 mg</i>	Tier 2	
<i>nefazodone hcl tab 50 mg</i>	Tier 2	
<i>nefazodone hcl tab 100 mg</i>	Tier 2	
<i>nefazodone hcl tab 150 mg</i>	Tier 2	
<i>nefazodone hcl tab 200 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 57
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hcl tab 250 mg</i>	Tier 2	
<i>nortriptyline hcl cap 10 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 25 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 50 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 75 mg</i>	Tier 2	PA, QL (Max DD of 150mg); High strength requires PA for members age 65 and older
<i>nortriptyline hcl soln 10 mg/5ml</i>	Tier 2	QL (750 mL every 30 days); QL applies to members age 65 and older
<i>paroxetine hcl tab 10 mg</i>	Tier 2	
<i>paroxetine hcl tab 20 mg</i>	Tier 2	
<i>paroxetine hcl tab 30 mg</i>	Tier 2	
<i>paroxetine hcl tab 40 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 25 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	Tier 2	
<i>phenelzine sulfate tab 15 mg</i>	Tier 2	
<i>protriptyline hcl tab 5 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>protriptyline hcl tab 10 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	Tier 2	
<i>sertraline hcl tab 25 mg</i>	Tier 2	
<i>sertraline hcl tab 50 mg</i>	Tier 2	
<i>sertraline hcl tab 100 mg</i>	Tier 2	
<i>tranylcypromine sulfate tab 10 mg</i>	Tier 2	
<i>trazodone hcl tab 50 mg</i>	Tier 2	
<i>trazodone hcl tab 100 mg</i>	Tier 2	
<i>trazodone hcl tab 150 mg</i>	Tier 2	
<i>trazodone hcl tab 300 mg</i>	Tier 2	
<i>trimipramine maleate cap 25 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 58
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate cap 50 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>trimipramine maleate cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
TRINTELLIX TAB 5MG	Tier 4	ST; PA**
TRINTELLIX TAB 10MG	Tier 4	ST; PA**
TRINTELLIX TAB 20MG	Tier 4	ST; PA**
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	Tier 2	
<i>vilazodone hcl tab 10 mg</i>	Tier 2	
<i>vilazodone hcl tab 20 mg</i>	Tier 2	
<i>vilazodone hcl tab 40 mg</i>	Tier 2	
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl cap 100 mg</i>	Tier 2	
<i>amantadine hcl soln 50 mg/5ml</i>	Tier 2	
<i>amantadine hcl tab 100 mg</i>	Tier 2	
APOKYN INJ 10MG/ML	Tier 6	ST, PA, QL (20 cartridges every 30 days)
<i>benztropine mesylate inj 1 mg/ml</i>	Tier 2	
<i>benztropine mesylate tab 0.5 mg</i>	Tier 2	
<i>benztropine mesylate tab 1 mg</i>	Tier 2	
<i>benztropine mesylate tab 2 mg</i>	Tier 2	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	Tier 2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	Tier 2	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	Tier 2	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	Tier 2	
<i>carbidopa & levodopa tab 10-100 mg</i>	Tier 2	
<i>carbidopa & levodopa tab 25-100 mg</i>	Tier 2	
<i>carbidopa & levodopa tab 25-250 mg</i>	Tier 2	
<i>carbidopa & levodopa tab er 25-100 mg</i>	Tier 2	
<i>carbidopa & levodopa tab er 50-200 mg</i>	Tier 2	
<i>carbidopa tab 25 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	Tier 2	
<i>entacapone tab 200 mg</i>	Tier 2	
INBRIJA CAP 42MG	Tier 5	PA, QL (300 caps every 30 days)
NEUPRO DIS 1MG/24HR	Tier 3	
NEUPRO DIS 2MG/24HR	Tier 3	
NEUPRO DIS 3MG/24HR	Tier 3	
NEUPRO DIS 4MG/24HR	Tier 3	
NEUPRO DIS 6MG/24HR	Tier 3	
NEUPRO DIS 8MG/24HR	Tier 3	
ONGENTYS CAP 25MG	Tier 4	PA
ONGENTYS CAP 50MG	Tier 4	PA
<i>pramipexole dihydrochloride tab 0.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 1 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	Tier 2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	Tier 2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	Tier 2	
<i>ropinirole hydrochloride tab 0.5 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 0.25 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 1 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 2 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 3 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 4 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 5 mg</i>	Tier 2	
<i>selegiline hcl cap 5 mg</i>	Tier 2	
<i>selegiline hcl tab 5 mg</i>	Tier 2	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	Tier 2	
<i>trihexyphenidyl hcl tab 2 mg</i>	Tier 2	
<i>trihexyphenidyl hcl tab 5 mg</i>	Tier 2	

ANTIPSYCHOTICS

<i>aripiprazole oral solution 1 mg/ml</i>	Tier 2	
<i>aripiprazole orally disintegrating tab 10 mg</i>	Tier 2	
<i>aripiprazole orally disintegrating tab 15 mg</i>	Tier 2	
<i>aripiprazole tab 2 mg</i>	Tier 2	
<i>aripiprazole tab 5 mg</i>	Tier 2	
<i>aripiprazole tab 10 mg</i>	Tier 2	
<i>aripiprazole tab 15 mg</i>	Tier 2	
<i>aripiprazole tab 20 mg</i>	Tier 2	
<i>aripiprazole tab 30 mg</i>	Tier 2	
ARISTADA INJ 441MG/1.	Tier 3	
ARISTADA INJ 662MG/2	Tier 3	
ARISTADA INJ 882MG/3	Tier 3	
ARISTADA INJ 1064MG	Tier 3	
ARISTADA INJ INITIO	Tier 3	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	Tier 2	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	Tier 2	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	Tier 2	
<i>chlorpromazine hcl inj 25 mg/ml</i>	Tier 2	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>chlorpromazine hcl tab 10 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 25 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 50 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 100 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 200 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 12.5 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 25 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 100 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 150 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 200 mg</i>	Tier 2	
<i>clozapine tab 25 mg</i>	Tier 2	
<i>clozapine tab 50 mg</i>	Tier 2	
<i>clozapine tab 100 mg</i>	Tier 2	
<i>clozapine tab 200 mg</i>	Tier 2	
<i>fluphenazine decanoate inj 25 mg/ml</i>	Tier 2	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	Tier 2	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	Tier 2	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	Tier 2	
<i>fluphenazine hcl tab 1 mg</i>	Tier 2	
<i>fluphenazine hcl tab 2.5 mg</i>	Tier 2	
<i>fluphenazine hcl tab 5 mg</i>	Tier 2	
<i>fluphenazine hcl tab 10 mg</i>	Tier 2	
<i>haloperidol decanoate im soln 50 mg/ml</i>	Tier 2	
<i>haloperidol decanoate im soln 100 mg/ml</i>	Tier 2	
<i>haloperidol lactate inj 5 mg/ml</i>	Tier 2	
<i>haloperidol lactate oral conc 2 mg/ml</i>	Tier 2	
<i>haloperidol tab 0.5 mg</i>	Tier 2	
<i>haloperidol tab 1 mg</i>	Tier 2	
<i>haloperidol tab 2 mg</i>	Tier 2	
<i>haloperidol tab 5 mg</i>	Tier 2	
<i>haloperidol tab 10 mg</i>	Tier 2	
<i>haloperidol tab 20 mg</i>	Tier 2	
<i>loxapine succinate cap 5 mg</i>	Tier 2	
<i>loxapine succinate cap 10 mg</i>	Tier 2	
<i>loxapine succinate cap 25 mg</i>	Tier 2	
<i>loxapine succinate cap 50 mg</i>	Tier 2	
<i>lurasidone hcl tab 20 mg</i>	Tier 2	
<i>lurasidone hcl tab 40 mg</i>	Tier 2	
<i>lurasidone hcl tab 60 mg</i>	Tier 2	
<i>lurasidone hcl tab 80 mg</i>	Tier 2	
<i>lurasidone hcl tab 120 mg</i>	Tier 2	
<i>olanzapine for im inj 10 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 5 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine orally disintegrating tab 10 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 15 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 20 mg</i>	Tier 2	
<i>olanzapine tab 2.5 mg</i>	Tier 2	
<i>olanzapine tab 5 mg</i>	Tier 2	
<i>olanzapine tab 7.5 mg</i>	Tier 2	
<i>olanzapine tab 10 mg</i>	Tier 2	
<i>olanzapine tab 15 mg</i>	Tier 2	
<i>olanzapine tab 20 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 1.5 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 3 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 6 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 9 mg</i>	Tier 2	
<i>perphenazine tab 2 mg</i>	Tier 2	
<i>perphenazine tab 4 mg</i>	Tier 2	
<i>perphenazine tab 8 mg</i>	Tier 2	
<i>perphenazine tab 16 mg</i>	Tier 2	
<i>quetiapine fumarate tab 25 mg</i>	Tier 2	
<i>quetiapine fumarate tab 50 mg</i>	Tier 2	
<i>quetiapine fumarate tab 100 mg</i>	Tier 2	
<i>quetiapine fumarate tab 200 mg</i>	Tier 2	
<i>quetiapine fumarate tab 300 mg</i>	Tier 2	
<i>quetiapine fumarate tab 400 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 0.5 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 0.25 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 1 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 2 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 3 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 4 mg</i>	Tier 2	
<i>risperidone soln 1 mg/ml</i>	Tier 2	
<i>risperidone tab 0.5 mg</i>	Tier 2	
<i>risperidone tab 0.25 mg</i>	Tier 2	
<i>risperidone tab 1 mg</i>	Tier 2	
<i>risperidone tab 2 mg</i>	Tier 2	
<i>risperidone tab 3 mg</i>	Tier 2	
<i>risperidone tab 4 mg</i>	Tier 2	
<i>thioridazine hcl tab 10 mg</i>	Tier 2	
<i>thioridazine hcl tab 25 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>thioridazine hcl tab 50 mg</i>	Tier 2	
<i>thioridazine hcl tab 100 mg</i>	Tier 2	
<i>thiothixene cap 1 mg</i>	Tier 2	
<i>thiothixene cap 2 mg</i>	Tier 2	
<i>thiothixene cap 5 mg</i>	Tier 2	
<i>thiothixene cap 10 mg</i>	Tier 2	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	Tier 2	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	Tier 2	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	Tier 2	
VRAYLAR CAP 1.5MG	Tier 3	ST; PA**
VRAYLAR CAP 3MG	Tier 3	ST; PA**
VRAYLAR CAP 4.5MG	Tier 3	ST; PA**
VRAYLAR CAP 6MG	Tier 3	ST; PA**
<i>ziprasidone hcl cap 20 mg</i>	Tier 2	
<i>ziprasidone hcl cap 40 mg</i>	Tier 2	
<i>ziprasidone hcl cap 60 mg</i>	Tier 2	
<i>ziprasidone hcl cap 80 mg</i>	Tier 2	

ANTISEIZURE AGENTS

<i>carbamazepine cap er 12hr 100 mg</i>	Tier 2	
<i>carbamazepine cap er 12hr 200 mg</i>	Tier 2	
<i>carbamazepine cap er 12hr 300 mg</i>	Tier 2	
<i>carbamazepine chew tab 100 mg</i>	Tier 2	
<i>carbamazepine chew tab 200 mg</i>	Tier 2	
<i>carbamazepine susp 100 mg/5ml</i>	Tier 2	
<i>carbamazepine tab 200 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 100 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 200 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 400 mg</i>	Tier 2	
<i>clobazam suspension 2.5 mg/ml</i>	Tier 2	
<i>clobazam tab 10 mg</i>	Tier 2	
<i>clobazam tab 20 mg</i>	Tier 2	
<i>clonazepam tab 0.5 mg</i>	Tier 2	
<i>clonazepam tab 1 mg</i>	Tier 2	
<i>clonazepam tab 2 mg</i>	Tier 2	
<i>clorazepate dipotassium tab 3.75 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>clorazepate dipotassium tab 15 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>diazepam inj 5 mg/ml</i>	Tier 2	
<i>Diazepam Intensol</i>	Tier 2	QL (240 mL every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam oral soln 1 mg/ml</i>	Tier 2	QL (1200 mL every 30 days)
<i>diazepam tab 2 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>diazepam tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>diazepam tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days)
DILANTIN CAP 30MG	Tier 4	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 125 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 250 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 500 mg</i>	Tier 2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	Tier 2	
<i>divalproex sodium tab er 24 hr 500 mg</i>	Tier 2	
<i>Epitol</i>	Tier 2	
<i>ethosuximide cap 250 mg</i>	Tier 2	
<i>ethosuximide soln 250 mg/5ml</i>	Tier 2	
<i>felbamate susp 600 mg/5ml</i>	Tier 2	
<i>felbamate tab 400 mg</i>	Tier 2	
<i>felbamate tab 600 mg</i>	Tier 2	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	Tier 2	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	Tier 2	
FYCOMPA SUS 0.5MG/ML	Tier 4	
FYCOMPA TAB 2MG	Tier 4	
FYCOMPA TAB 4MG	Tier 4	
FYCOMPA TAB 6MG	Tier 4	
FYCOMPA TAB 8MG	Tier 4	
FYCOMPA TAB 10MG	Tier 4	
FYCOMPA TAB 12MG	Tier 4	
<i>gabapentin cap 100 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin cap 300 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin cap 400 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin oral soln 250 mg/5ml</i>	Tier 2	QL (72 mL every day)
<i>gabapentin tab 600 mg</i>	Tier 2	QL (6 tabs every day)
<i>gabapentin tab 800 mg</i>	Tier 2	QL (4 tabs every day)
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	Tier 2	
<i>lacosamide oral solution 10 mg/ml</i>	Tier 2	
<i>lacosamide tab 50 mg</i>	Tier 2	
<i>lacosamide tab 100 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>lacosamide tab 150 mg</i>	Tier 2	
<i>lacosamide tab 200 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 25 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 50 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 100 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 200 mg</i>	Tier 2	
<i>lamotrigine tab 25 mg</i>	Tier 2	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	Tier 2	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	Tier 2	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	Tier 2	
<i>lamotrigine tab 100 mg</i>	Tier 2	
<i>lamotrigine tab 150 mg</i>	Tier 2	
<i>lamotrigine tab 200 mg</i>	Tier 2	
<i>lamotrigine tab chewable dispersible 5 mg</i>	Tier 2	
<i>lamotrigine tab chewable dispersible 25 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 25 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 50 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 100 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 200 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 250 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 300 mg</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	Tier 2	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	Tier 2	
<i>levetiracetam oral soln 100 mg/ml</i>	Tier 2	
<i>levetiracetam tab 250 mg</i>	Tier 2	
<i>levetiracetam tab 500 mg</i>	Tier 2	
<i>levetiracetam tab 750 mg</i>	Tier 2	
<i>levetiracetam tab 1000 mg</i>	Tier 2	
<i>levetiracetam tab er 24hr 500 mg</i>	Tier 2	
<i>levetiracetam tab er 24hr 750 mg</i>	Tier 2	
<i>methsuximide cap 300 mg</i>	Tier 2	
NAYZILAM SPR 5MG	Tier 3	QL (10 units every 30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	Tier 2	
<i>oxcarbazepine tab 150 mg</i>	Tier 2	
<i>oxcarbazepine tab 300 mg</i>	Tier 2	
<i>oxcarbazepine tab 600 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>phenobarbital elixir 20 mg/5ml</i>	Tier 2	
<i>phenobarbital tab 15 mg</i>	Tier 2	
<i>phenobarbital tab 16.2 mg</i>	Tier 2	
<i>phenobarbital tab 30 mg</i>	Tier 2	
<i>phenobarbital tab 32.4 mg</i>	Tier 2	
<i>phenobarbital tab 60 mg</i>	Tier 2	
<i>phenobarbital tab 64.8 mg</i>	Tier 2	
<i>phenobarbital tab 97.2 mg</i>	Tier 2	
<i>phenobarbital tab 100 mg</i>	Tier 2	
<i>Phenytoin Infatabs</i>	Tier 2	
<i>phenytoin sodium extended cap 100 mg</i>	Tier 2	
<i>phenytoin sodium extended cap 200 mg</i>	Tier 2	
<i>phenytoin sodium extended cap 300 mg</i>	Tier 2	
<i>phenytoin sodium inj 50 mg/ml</i>	Tier 2	
<i>phenytoin susp 125 mg/5ml</i>	Tier 2	
<i>pregabalin cap 25 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 50 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 75 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 100 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 150 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 200 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 225 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 300 mg</i>	Tier 2	ST; PA**
<i>pregabalin soln 20 mg/ml</i>	Tier 2	ST; PA**
<i>primidone tab 50 mg</i>	Tier 2	
<i>primidone tab 250 mg</i>	Tier 2	
<i>rufinamide susp 40 mg/ml</i>	Tier 2	
<i>rufinamide tab 200 mg</i>	Tier 2	
<i>rufinamide tab 400 mg</i>	Tier 2	
<i>tiagabine hcl tab 2 mg</i>	Tier 2	
<i>tiagabine hcl tab 4 mg</i>	Tier 2	
<i>tiagabine hcl tab 12 mg</i>	Tier 2	
<i>tiagabine hcl tab 16 mg</i>	Tier 2	
<i>topiramate sprinkle cap 15 mg</i>	Tier 2	
<i>topiramate sprinkle cap 25 mg</i>	Tier 2	
<i>topiramate sprinkle cap 50 mg</i>	Tier 2	
<i>topiramate tab 25 mg</i>	Tier 2	
<i>topiramate tab 50 mg</i>	Tier 2	
<i>topiramate tab 100 mg</i>	Tier 2	
<i>topiramate tab 200 mg</i>	Tier 2	
<i>valproate sodium inj 100 mg/ml</i>	Tier 2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>valproic acid cap 250 mg</i>	Tier 2	
<i>vigabatrin powd pack 500 mg</i>	Tier 5	PA, QL (180 packets every 30 days)
<i>vigabatrin tab 500 mg</i>	Tier 5	PA, QL (180 tabs every 30 days)
<i>XCOPRI PAK 12.5-25</i>	Tier 3	
<i>XCOPRI PAK 50-100MG</i>	Tier 3	
<i>XCOPRI PAK 100-150</i>	Tier 3	
<i>XCOPRI PAK 150-200</i>	Tier 3	
<i>XCOPRI TAB 25MG</i>	Tier 3	
<i>XCOPRI TAB 50MG</i>	Tier 3	
<i>XCOPRI TAB 100MG</i>	Tier 3	
<i>XCOPRI TAB 150MG</i>	Tier 3	
<i>XCOPRI TAB 200MG</i>	Tier 3	
<i>zonisamide cap 25 mg</i>	Tier 2	
<i>zonisamide cap 50 mg</i>	Tier 2	
<i>zonisamide cap 100 mg</i>	Tier 2	

ATTENTION DEFICIT HYPERACTIVITY DISORDER

<i>ADZENYS XR TAB 3.1MG</i>	Tier 4	QL (60 tabs every 30 days)
<i>ADZENYS XR TAB 6.3MG</i>	Tier 4	QL (60 tabs every 30 days)
<i>ADZENYS XR TAB 9.4MG</i>	Tier 4	QL (60 tabs every 30 days)
<i>ADZENYS XR TAB 12.5MG</i>	Tier 4	QL (30 tabs every 30 days)
<i>ADZENYS XR TAB 15.7 MG</i>	Tier 4	QL (30 tabs every 30 days)
<i>ADZENYS XR TAB 18.8MG</i>	Tier 4	QL (30 tabs every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	Tier 2	QL (30 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 68
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	Tier 2	
AZSTARYS CAP 26.1-5.2	Tier 3	QL (30 caps every 30 days)
AZSTARYS CAP 39.2-7.8	Tier 3	QL (30 caps every 30 days)
AZSTARYS CAP 52.3-10.	Tier 3	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	Tier 2	QL (1,200 mL every 30 days)
<i>dextroamphetamine sulfate tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dextroamphetamine sulfate tab 15 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate tab 20 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate tab 30 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	Tier 2	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 20 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 30 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 40 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 50 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 60 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 70 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	Tier 2	QL (60 chew tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	Tier 2	QL (60 chew tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	Tier 2	QL (60 chew tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	Tier 2	QL (30 chew tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	Tier 2	QL (30 chew tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	Tier 2	QL (30 chew tabs every 30 days)
<i>methamphetamine hcl tab 5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	Tier 2	QL (60 caps every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl chew tab 2.5 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl chew tab 5 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl chew tab 10 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl soln 5 mg/5ml</i>	Tier 2	QL (1800 mL every 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	Tier 2	QL (900 mL every 30 days)
<i>methylphenidate hcl tab 5 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>methylphenidate hcl tab 10 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>methylphenidate hcl tab 20 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>Zenzedi</i>	Tier 2	QL (120 tabs every 30 days)
FIBROMYALGIA		
SAVELLA MIS TITR PAK	Tier 4	ST; PA**
SAVELLA TAB 12.5MG	Tier 4	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
SAVELLA TAB 25MG	Tier 4	ST; PA**
SAVELLA TAB 50MG	Tier 4	ST; PA**
SAVELLA TAB 100MG	Tier 4	ST; PA**

HYPNOTICS

BELSOMRA TAB 5MG	Tier 3	ST; PA**
BELSOMRA TAB 10MG	Tier 3	ST; PA**
BELSOMRA TAB 15MG	Tier 3	ST; PA**
BELSOMRA TAB 20MG	Tier 3	ST; PA**
<i>Cvs Sleep-Aid Nighttime</i>	Tier 2	OTC
DAYVIGO TAB 5MG	Tier 3	PA, QL (30 tabs every 30 days)
DAYVIGO TAB 10MG	Tier 3	PA, QL (30 tabs every 30 days)
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>estazolam tab 1 mg</i>	Tier 4	QL (15 tabs every 30 days)
<i>estazolam tab 2 mg</i>	Tier 4	QL (15 tabs every 30 days)
<i>eszopiclone tab 1 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>eszopiclone tab 2 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>eszopiclone tab 3 mg</i>	Tier 2	QL (15 tabs every 30 days)
EXCEDRIN PM TAB 500-38MG	Tier 1	OTC
<i>ramelteon tab 8 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>tasimelteon capsule 20 mg</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>temazepam cap 7.5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 15 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 22.5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 30 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>triazolam tab 0.25 mg</i>	Tier 4	QL (10 tabs every 30 days)
<i>triazolam tab 0.125 mg</i>	Tier 4	QL (10 tabs every 30 days)
<i>zaleplon cap 5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>zaleplon cap 10 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>zolpidem tartrate tab 5 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab 10 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	Tier 2	QL (15 tabs every 30 days)

MIGRAINE - ERGOTAMINE DERIVATIVES

<i>dihydroergotamine mesylate inj 1 mg/ml</i>	Tier 2	
ERGOMAR SUB 2MG	Tier 4	

Drug Name	Drug Tier	Requirements/Limits
<i>ergotamine w/ caffeine tab 1-100 mg</i>	Tier 4	
MIGRAINE - MISCELLANEOUS		
QULIPTA TAB 10MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
QULIPTA TAB 30MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
QULIPTA TAB 60MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
UBRELVY TAB 50MG	Tier 3	ST, QL (16 tabs every 30 days); PA**
UBRELVY TAB 100MG	Tier 3	ST, QL (16 tabs every 30 days); PA**
MIGRAINE - MONOCLONAL ANTIBODIES		
AIMOVIG INJ 70MG/ML	Tier 3	ST, QL (2 injections every 30 days); PA**
AIMOVIG INJ 140MG/ML	Tier 3	ST, QL (1 injection every 30 days); PA**
EMGALITY INJ 100MG/ML	Tier 3	ST, QL (3 injections every 30 days); PA**
EMGALITY INJ 120MG/ML	Tier 3	ST, QL (2 injections every 30 days); PA**; Loading dose of 2 injections in 30 days allowed for initial fill
MIGRAINE - TRIPTANS AND COMBINATIONS		
<i>almotriptan malate tab 6.25 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>almotriptan malate tab 12.5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	Tier 2	QL (12 tabs every 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	Tier 2	QL (12 tabs every 30 days)
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	Tier 2	QL (12 tabs every 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	Tier 2	QL (12 tabs every 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	Tier 2	QL (24 sprays every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan nasal spray 20 mg/act</i>	Tier 2	QL (12 sprays every 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	Tier 2	QL (12 vials every 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	Tier 2	QL (18 syringes every 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	Tier 2	QL (12 units every 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	Tier 2	QL (18 syringes every 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	Tier 2	QL (12 units every 30 days)
<i>sumatriptan succinate tab 25 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan succinate tab 50 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan succinate tab 100 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	Tier 4	ST, QL (9 tabs every 30 days); PA**
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	Tier 2	QL (12 sprays every 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>zolmitriptan tab 2.5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>zolmitriptan tab 5 mg</i>	Tier 2	QL (12 tabs every 30 days)

MISCELLANEOUS

<i>EVRYSDI SOL</i>	Tier 6	PA, QL (2 bottles every 24 days)
--------------------	--------	----------------------------------

MOOD STABILIZERS

<i>lithium carbonate cap 150 mg</i>	Tier 2	
<i>lithium carbonate cap 300 mg</i>	Tier 2	
<i>lithium carbonate cap 600 mg</i>	Tier 2	
<i>lithium carbonate tab 300 mg</i>	Tier 2	
<i>lithium carbonate tab er 300 mg</i>	Tier 2	
<i>lithium carbonate tab er 450 mg</i>	Tier 2	
<i>lithium oral solution 8 meq/5ml</i>	Tier 2	

MOVEMENT DISORDERS

<i>tetrabenazine tab 12.5 mg</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>tetrabenazine tab 25 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)

MULTIPLE SCLEROSIS AGENTS

<i>BETASERON INJ 0.3MG</i>	Tier 5	PA, QL (14 injections every 28 days)
<i>dalfampridine tab er 12hr 10 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate capsule delayed release 120 mg</i>	Tier 5	PA, QL (14 caps every 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg</i>	Tier 5	PA, QL (60 caps every 30 days)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	Tier 5	PA, QL (1 kit every 30 days)
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	Tier 3	PA, QL (12 syringes every 28 days)
<i>Glatopa</i>	Tier 3	PA, QL (30 injections every 30 days)
<i>teriflunomide tab 7 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>teriflunomide tab 14 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>TYSABRI INJ 300/15ML</i>	Tier 5	PA, QL (1 vial every 28 days)

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen tab 5 mg</i>	Tier 2	
<i>baclofen tab 10 mg</i>	Tier 2	
<i>baclofen tab 20 mg</i>	Tier 2	
<i>carisoprodol tab 350 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>chlorzoxazone tab 500 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 10 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dantrolene sodium cap 25 mg</i>	Tier 2	
<i>dantrolene sodium cap 50 mg</i>	Tier 2	
<i>dantrolene sodium cap 100 mg</i>	Tier 2	
<i>metaxalone tab 800 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tab 500 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>methocarbamol tab 750 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>Norgesic</i>	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>orphenadrine citrate inj 30 mg/ml</i>	Tier 2	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	Tier 2	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	Tier 2	
MYASTHENIA GRAVIS		
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	Tier 2	
<i>pyridostigmine bromide tab 60 mg</i>	Tier 2	
<i>pyridostigmine bromide tab er 180 mg</i>	Tier 2	
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tab 50 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>armodafinil tab 150 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>armodafinil tab 200 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>armodafinil tab 250 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>modafinil tab 100 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>modafinil tab 200 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
SOD OXYBATE SOL 500MG/ML	Tier 5	PA, QL (540mL every 30 days)
SUNOSI TAB 75MG	Tier 3	PA, QL (30 tabs every 30 days)
SUNOSI TAB 150MG	Tier 3	PA, QL (30 tabs every 30 days)
OPIOID AGONIST/ANTAGONIST		
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	Tier 2	QL (90 units every 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	Tier 2	QL (90 units every 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	Tier 2	QL (3 units every day)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	Tier 2	QL (2 units every day)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay
ZUBSOLV SUB 0.7-0.18	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 1.4-0.36	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 2.9-0.71	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 5.7-1.4	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 8.6-2.1	Tier 3	QL (60 units every 30 days)
ZUBSOLV SUB 11.4-2.9	Tier 3	QL (30 units every 30 days)

OPIOID ANTAGONIST

<i>naloxone hcl inj 0.4 mg/ml</i>	Tier 2	
<i>naloxone hcl inj 4 mg/10ml</i>	Tier 2	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	Tier 2	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	Tier 2	OTC
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	Tier 2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	Tier 2	
<i>naltrexone hcl tab 50 mg</i>	Tier 0	\$0 copay
NARCAN SPR 4MG	Tier 2	OTC

OPIOID PARTIAL AGONISTS

<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay; Must obtain approval after the first 30 day supply
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay; Must obtain approval after the first 30 day supply

PSYCHOTHERAPEUTIC-MISC

<i>chlorthalidone-amitriptyline tab 5-12.5 mg</i>	Tier 4	QL (120 tabs every 30 days); QL applies to members age 65 and older
<i>chlorthalidone-amitriptyline tab 10-25 mg</i>	Tier 4	QL (60 tabs every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i>	Tier 2	
NUDEXTA CAP 20-10MG	Tier 3	PA
<i>perphenazine-amitriptyline tab 2-10 mg</i>	Tier 4	QL (150 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 2-25 mg</i>	Tier 4	QL (60 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-10 mg</i>	Tier 4	QL (120 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-25 mg</i>	Tier 4	QL (60 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-50 mg</i>	Tier 4	QL (30 units every 30 days); QL applies to members age 65 and older
<i>pimozide tab 1 mg</i>	Tier 2	
<i>pimozide tab 2 mg</i>	Tier 2	

SMOKING DETERRENTS

<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	Tier 0	\$0 limited to 2 treatment cycles/year
Goodsense Nicotine Polacr	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 2 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 4 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex lozenge 2 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
Sm Nicotine Transdermal S	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	Tier 0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 1 mg (base equiv)</i>	Tier 0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	Tier 0	\$0 limited to 2 treatment cycles/year

COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>Robitussin Sus 30mg/5ml</i>	Tier 1	OTC
ROBITUSSIN SYP 7.5/5ML	Tier 1	OTC
<i>Wal-Tussin Syp 15mg/5ml</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

COUGH/COLD/ALLERGY COMBINATIONS

Allergy/cong Tab 5-120mg	Tier 1	OTC
Cold/cough Liq Child	Tier 1	OTC
CORICIDN HBP TAB CGH&COLD	Tier 1	OTC
CORICIDN HBP TAB COLD/FLU	Tier 1	OTC
DIMETAPP CLD ELX /ALLERGY	Tier 1	OTC
Dimetapp Liq Nighttim	Tier 1	OTC
DIMETAPP SYP CGH/COLD	Tier 1	OTC
guaifenesin-codeine soln 100-10 mg/5ml	Tier 2	OTC
Kidkare Liq Cgh/cold	Tier 1	OTC
Mucus Relief Tab Dm Cough	Tier 1	OTC
Mucus-D Tab 60-600mg	Tier 1	OTC
Nasal Relief Tab Night	Tier 1	OTC
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	Tier 2	
Robit Cgh Dm Cap 10-200mg	Tier 1	OTC
Robitussin Cap Cold+flu	Tier 1	OTC
Robitussin Liq	Tier 1	OTC
ROBITUSSIN LIQ CGH/CONG	Tier 1	OTC
ROBITUSSIN LIQ TO GO CF	Tier 1	OTC
ROBITUSSN DM SYP	Tier 1	OTC
SCOT-TUSSIN LIQ DM SF	Tier 1	OTC
Sinus Tab Max-St	Tier 1	OTC
Sudafed Pe Sol Cold/cgh	Tier 1	OTC
Theraflu Sev Tab Cold/cgh	Tier 1	OTC
TRIAMINIC SYP CGH/CNG	Tier 1	OTC
TRIAMINIC SYP CHST/NSL	Tier 1	OTC
TYLENOL CHLD SUS COLD FLU	Tier 1	OTC
TYLENOL COLD TAB SEVERE	Tier 1	OTC
Tylenol Sinu Tab 5-325mg	Tier 1	OTC
Wal-Itin D Tab 24 Hour	Tier 1	OTC
Wal-Phed Pe Tab 4-10mg	Tier 1	OTC
Wal-Profen Tab Cold/sin	Tier 1	OTC
Wal-Tussin Liq Cf	Tier 1	OTC
ZYNCOF SYP 20-400/5	Tier 1	OTC
ZYRTEC-D TAB 5-120MG	Tier 1	OTC

EXPECTORANTS

guaifenesin tab 200 mg	Tier 1	OTC
Mucus Relief Tab 400mg	Tier 1	OTC
Mucus Relief Tab 600mg Er	Tier 1	OTC
Mucus Relief Tab 1200mg	Tier 1	OTC
Mucus+chst Liq 100/5ml	Tier 1	OTC
Tussin Chest Liq 100/5ml	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
MISC. RESPIRATORY INHALANTS		
<i>Medicated Oin Chst Rub</i>	Tier 1	OTC
DERMATOLOGICALS		
EMOLLIENTS		
<i>A+d Prevent Oin</i>	Tier 1	OTC
AVEENO BATH PAK TREATMNT	Tier 1	OTC
KERI NRSHING LOT SHEA BTR	Tier 1	OTC
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
INFANT FOODS		
GOOD START LIQ W/IRON	Tier 1	OTC
GOOD START POW NATURAL	Tier 1	OTC
ENDOCRINE AND METABOLIC		
ACROMEGALY		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	Tier 5	PA, QL (225 ml every 30 days)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	Tier 5	PA, QL (45 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
SOMATULINE INJ 60/0.2ML	Tier 5	PA, QL (1 injection every 28 days)
SOMATULINE INJ 90/0.3ML	Tier 5	PA, QL (1 injection every 28 days)
SOMATULINE INJ 120/.5ML	Tier 5	PA, QL (1 injection every 28 days)
SOMAVERT INJ 10MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 15MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 20MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 25MG	Tier 5	PA, QL (30 vials every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 80
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
SOMAVERT INJ 30MG	Tier 5	PA, QL (30 vials every 30 days)
ANDROGENS		
testosterone cypionate im inj in oil 100 mg/ml	Tier 2	PA
testosterone cypionate im inj in oil 200 mg/ml	Tier 2	PA
testosterone enanthate im inj in oil 200 mg/ml	Tier 2	PA
testosterone td gel 10mg/act (2%)	Tier 2	PA
testosterone td gel 25 mg/2.5gm (1%)	Tier 2	PA
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
acarbose tab 25 mg	Tier 2	
acarbose tab 50 mg	Tier 2	
acarbose tab 100 mg	Tier 2	
miglitol tab 25 mg	Tier 2	
miglitol tab 50 mg	Tier 2	
miglitol tab 100 mg	Tier 2	
ANTIDIABETICS, AMYLIN ANALOGS		
SYMLINPEN 60 INJ 1000MCG	Tier 4	ST; PA**
SYMLINPEN 120 INJ 1000MCG	Tier 4	ST; PA**
ANTIDIABETICS, BIGUANIDE		
metformin hcl tab 500 mg	Tier 1	
metformin hcl tab 850 mg	Tier 1	\$0 copay for members age 35-70 for prevention of diabetes
metformin hcl tab 1000 mg	Tier 1	
metformin hcl tab er 24hr 500 mg	Tier 1	
metformin hcl tab er 24hr 750 mg	Tier 1	
ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS		
glipizide-metformin hcl tab 2.5-250 mg	Tier 1	
glipizide-metformin hcl tab 2.5-500 mg	Tier 1	
glipizide-metformin hcl tab 5-500 mg	Tier 1	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR COMBINATIONS		
alogliptin-metformin hcl tab 12.5-500 mg	Tier 1	ST; PA**
alogliptin-metformin hcl tab 12.5-1000 mg	Tier 1	ST; PA**
JANUMET TAB 50-500MG	Tier 3	ST; PA**
JANUMET TAB 50-1000	Tier 3	ST; PA**
JANUMET XR TAB 50-500MG	Tier 3	ST; PA**
JANUMET XR TAB 50-1000	Tier 3	ST; PA**
JANUMET XR TAB 100-1000	Tier 3	ST; PA**
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
alogliptin benzoate tab 6.25 mg (base equiv)	Tier 1	ST; PA**
alogliptin benzoate tab 12.5 mg (base equiv)	Tier 1	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	Tier 1	ST; PA**
JANUVIA TAB 25MG	Tier 3	ST; PA**
JANUVIA TAB 50MG	Tier 3	ST; PA**
JANUVIA TAB 100MG	Tier 3	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	Tier 2	ST, QL (3 pens every 30 days); PA**
MOUNJARO INJ 2.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
MOUNJARO INJ 5MG/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
MOUNJARO INJ 7.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
MOUNJARO INJ 10MG/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
MOUNJARO INJ 12.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
MOUNJARO INJ 15MG/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
OZEMPIC INJ 2MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
OZEMPIC INJ 4MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
OZEMPIC INJ 8MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
TRULICITY INJ 0.75/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 1.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 3/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 4.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
VICTOZA INJ 18MG/3ML	Tier 3	ST, QL (3 pens every 30 days); PA**
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS		
SOLIQUA INJ 100/33	Tier 3	ST; PA**
XULTOPHY INJ 100/3.6	Tier 3	ST; PA**
ANTIDIABETICS, INSULIN		
BASAGLAR KWIKPEN	Tier 3	
FIASP FLEX INJ TOUCH	Tier 3	
FIASP INJ 100/ML	Tier 3	
FIASP PENFIL INJ U-100	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
FIASP PMPCRT INJ U-100	Tier 3	
HUMULIN INJ 70/30	Tier 4	OTC
HUMULIN INJ 70/30KWP	Tier 4	OTC
HUMULIN N INJ U-100	Tier 4	OTC
HUMULIN N INJ U-100KWP	Tier 4	OTC
HUMULIN R INJ U-100	Tier 4	OTC
HUMULIN R INJ U-500	Tier 3	
LEVEMIR INJ	Tier 3	
LEVEMIR INJ FLEXPEN	Tier 3	
NOVOLIN INJ 70/30	Tier 3	OTC; RELION not covered
NOVOLIN INJ 70/30 FP	Tier 3	OTC; RELION not covered
NOVOLIN N INJ 100 UNIT	Tier 3	OTC; RELION not covered
NOVOLIN N INJ U-100	Tier 3	OTC; RELION not covered
NOVOLIN R INJ 100 UNIT	Tier 3	OTC; RELION not covered
NOVOLIN R INJ U-100	Tier 3	OTC; RELION not covered
NOVOLOG INJ 100/ML	Tier 3	
NOVOLOG INJ FLEXPEN	Tier 3	
NOVOLOG INJ PENFILL	Tier 3	
NOVOLOG MIX INJ 70/30	Tier 3	
NOVOLOG MIX INJ FLEXPEN	Tier 3	
TRESIBA FLEX INJ 100UNIT	Tier 3	
TRESIBA FLEX INJ 200UNIT	Tier 3	
TRESIBA INJ 100UNIT	Tier 3	
ANTIDIABETICS, INSULIN SENSITIZER		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	Tier 1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	Tier 1	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	Tier 1	
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION		
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	Tier 1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	Tier 1	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION		
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	Tier 1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	Tier 1	
ANTIDIABETICS, MEGLITINIDE		
<i>nateglinide tab 60 mg</i>	Tier 1	
<i>nateglinide tab 120 mg</i>	Tier 1	
<i>repaglinide tab 0.5 mg</i>	Tier 1	
<i>repaglinide tab 1 mg</i>	Tier 1	
<i>repaglinide tab 2 mg</i>	Tier 1	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR COMBINATIONS		
SYNJARDY TAB	Tier 3	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
SYNJARDY TAB 5-500MG	Tier 3	ST; PA**
SYNJARDY TAB 5-1000MG	Tier 3	ST; PA**
SYNJARDY TAB 12.5-500	Tier 3	ST; PA**
SYNJARDY XR TAB	Tier 3	ST; PA**
SYNJARDY XR TAB 5-1000MG	Tier 3	ST; PA**
SYNJARDY XR TAB 10-1000	Tier 3	ST; PA**
SYNJARDY XR TAB 25-1000	Tier 3	ST; PA**

ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS

GLYXAMBI TAB 10-5 MG	Tier 3	ST; PA**
GLYXAMBI TAB 25-5 MG	Tier 3	ST; PA**

ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS

JARDIANCE TAB 10MG	Tier 3	ST; PA**
JARDIANCE TAB 25MG	Tier 3	ST; PA**

ANTIDIABETICS, SULFONYLUREA

<i>glimepiride tab 1 mg</i>	Tier 1	
<i>glimepiride tab 2 mg</i>	Tier 1	
<i>glimepiride tab 4 mg</i>	Tier 1	
<i>glipizide tab 5 mg</i>	Tier 1	
<i>glipizide tab 10 mg</i>	Tier 1	
<i>glipizide tab er 24hr 2.5 mg</i>	Tier 1	
<i>glipizide tab er 24hr 5 mg</i>	Tier 1	
<i>glipizide tab er 24hr 10 mg</i>	Tier 1	

CALCIUM RECEPTOR AGONISTS

<i>cinacalcet hcl tab 30 mg (base equiv)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	Tier 5	PA, QL (120 tabs every 30 days)

CALCIUM REGULATORS, BISPHOSPHONATES

<i>alendronate sodium oral soln 70 mg/75ml</i>	Tier 2	
<i>alendronate sodium tab 5 mg</i>	Tier 2	
<i>alendronate sodium tab 10 mg</i>	Tier 2	
<i>alendronate sodium tab 35 mg</i>	Tier 2	
<i>alendronate sodium tab 70 mg</i>	Tier 2	
FOSAMAX + D TAB 70-2800	Tier 4	
FOSAMAX + D TAB 70-5600	Tier 4	
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	Tier 2	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>pamidronate disodium iv soln 3 mg/ml</i>	Tier 2	
<i>risedronate sodium tab 5 mg</i>	Tier 2	
<i>risedronate sodium tab 30 mg</i>	Tier 2	
<i>risedronate sodium tab 35 mg</i>	Tier 2	
<i>risedronate sodium tab 150 mg</i>	Tier 2	
<i>risedronate sodium tab delayed release 35 mg</i>	Tier 2	
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	Tier 5	PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	Tier 5	PA
CALCIUM REGULATORS, MISCELLANEOUS		
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	Tier 2	
PROLIA INJ 60MG/ML	Tier 5	PA, QL (60mg every 24 weeks)
CALCIUM REGULATORS, PARATHYROID HORMONES		
TYMLOS INJ	Tier 5	PA, QL (1 pen every 30 days)
CENTRAL PRECOCIOUS PUBERTY		
LUPR DEP-PED INJ 3M 30MG	Tier 5	PA
LUPR DEP-PED INJ 7.5MG	Tier 5	PA
LUPR DEP-PED INJ 11.25MG	Tier 5	PA
LUPR DEP-PED INJ 15MG	Tier 5	PA
LUPRON DEPOT INJ 45MG	Tier 5	PA
SUPPRELIN LA KIT 50MG	Tier 5	PA
TRIPTODUR SUS 22.5MG	Tier 5	PA
CHELATING AGENTS		
CHEMET CAP 100MG	Tier 4	
<i>deferiprone tab 500 mg</i>	Tier 5	PA
<i>deferiprone tab 1000 mg</i>	Tier 5	PA
FERPRX 2-DAY TAB 1000MG	Tier 5	PA
FERRIPROX SOL 100MG/ML	Tier 5	PA
<i>penicillamine tab 250 mg</i>	Tier 5	
VISTOGARD PAK 10GM	Tier 5	QL (20 packets every 5 days)
CONTRACEPTIVES		
<i>Altavera</i>	Tier 0	C
<i>Alyacen 1/35</i>	Tier 0	C
<i>Alyacen 7/7/7</i>	Tier 0	C
<i>Amethyst</i>	Tier 0	C
ANNOVERA MIS	Tier 0	QL (1 every 300 days)
<i>Apri</i>	Tier 0	C
<i>Aranelle</i>	Tier 0	C
<i>Ashlyna</i>	Tier 0	C
<i>Aviane</i>	Tier 0	C

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
Azurette	Tier 0	C
Camila	Tier 0	C
Camrese	Tier 0	C
Chateal Eq	Tier 0	C
CONDOMS MIS	Tier 0	QL (12 condoms every 30 days), OTC
Cryselle-28	Tier 0	C
Dasetta 1/35	Tier 0	C
Dasetta 7/7/7	Tier 0	C
Delyla	Tier 0	C
DEPO-SQ PROV INJ 104	Tier 0	QL (4 inj every 300 days); C
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	Tier 0	C
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	Tier 0	C
drospirenone-ethinyl estradiol tab 3-0.02 mg	Tier 0	C
drospirenone-ethinyl estradiol tab 3-0.03 mg	Tier 0	C
DUREX MIS REALFEEL	Tier 0	QL (12 condoms every 30 days), OTC
Elinest	Tier 0	C
ELLA TAB 30MG	Tier 0	C
Enpresse-28	Tier 0	C
Enskyce	Tier 0	C
Errin	Tier 0	C
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	Tier 0	C
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	Tier 0	QL (13 every 300 days); C
Falmina	Tier 0	C
FC2 FEMALE MIS CONDOM	Tier 0	QL (12 condoms every 30 days), OTC
FEMLYV TAB 1/0.02MG	Tier 0	
Gemmily	Tier 0	C
Heather	Tier 0	C
Introvale	Tier 0	C
Jolessa	Tier 0	C
Junel 1.5/30	Tier 0	C
Junel 1/20	Tier 0	C
Junel Fe 1.5/30	Tier 0	C
Junel Fe 1/20	Tier 0	C
Junel Fe 24	Tier 0	C
Kariva	Tier 0	C

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>Kelnor 1/35</i>	Tier 0	C
<i>Kurvelo</i>	Tier 0	C
KYLEENA IUD 19.5MG	Tier 0	QL (1 every 300 days); C
<i>Larin 1.5/30</i>	Tier 0	C
<i>Leena</i>	Tier 0	C
<i>Lessina</i>	Tier 0	C
<i>Levonest</i>	Tier 0	C
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	Tier 0	C
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	Tier 0	C
<i>Levora 0.15/30-28</i>	Tier 0	C
LILETTA IUD 52MG	Tier 0	QL (1 every 300 days); C
LO LOESTRIN TAB 1-10-10	Tier 0	C
<i>Loryna</i>	Tier 0	C
<i>Low-Ogestrel</i>	Tier 0	C
<i>Lutera</i>	Tier 0	C
<i>Marlissa</i>	Tier 0	C
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	Tier 0	QL (4 inj every 300 days); C
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	Tier 0	QL (4 inj every 300 days); C
<i>Microgestin 1.5/30</i>	Tier 0	C
MIRENA IUD SYSTEM	Tier 0	QL (1 every 300 days); C
<i>Mono-Linyah</i>	Tier 0	C
NATAZIA TAB	Tier 0	C
<i>Necon 0.5/35-28</i>	Tier 0	C
NEXPLANON IMP 68MG	Tier 0	QL (1 every 300 days); C
NEXTSTELLIS TAB 3-14.2MG	Tier 0	
<i>Nikki</i>	Tier 0	C
<i>Nora-Be</i>	Tier 0	C
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	Tier 0	C
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	Tier 0	C
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	Tier 0	C

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	Tier 0	C
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	Tier 0	C
<i>norethindrone tab 0.35 mg</i>	Tier 0	C
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	Tier 0	C
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	Tier 0	C
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	Tier 0	C
<i>Nortrel 0.5/35 (28)</i>	Tier 0	C
<i>Nortrel 1/35</i>	Tier 0	C
<i>Nortrel 7/7/7</i>	Tier 0	C
<i>Nylia 1/35</i>	Tier 0	C
<i>Ocella</i>	Tier 0	C
<i>OPILL TAB 0.075MG</i>	Tier 0	OTC
<i>PARAGARD IUD T380A</i>	Tier 0	QL (1 unit every 300 days); C
<i>Portia-28</i>	Tier 0	C
<i>Reclipsen</i>	Tier 0	C
<i>Rivelsa</i>	Tier 0	C
<i>SKYLA IUD 13.5MG</i>	Tier 0	QL (1 every 300 days); C
<i>SLYND TAB 4MG</i>	Tier 0	
<i>Sprintec 28</i>	Tier 0	C
<i>Sronyx</i>	Tier 0	C
<i>Syeda</i>	Tier 0	C
<i>Take Action</i>	Tier 0	OTC; C
<i>Tilia Fe</i>	Tier 0	C
<i>Tri-Linyah</i>	Tier 0	C
<i>Tri-Sprintec</i>	Tier 0	C
<i>Trivora-28</i>	Tier 0	C
<i>TRUSTEX/RIA MIS NON-LUB</i>	Tier 0	QL (12 condoms every 30 days), OTC
<i>TRUSTX NON-9 MIS RIB/STUD</i>	Tier 0	QL (12 condoms every 30 days), OTC
<i>TWIRLA DIS 120-30</i>	Tier 0	
<i>TYBLUME CHW 0.1-0.02</i>	Tier 0	
<i>Velivet</i>	Tier 0	C
<i>Viorele</i>	Tier 0	C
<i>Vyfemla</i>	Tier 0	C
<i>Wera</i>	Tier 0	C
<i>Xulane</i>	Tier 0	C

Drug Name	Drug Tier	Requirements/Limits
<i>Zovia 1/35</i>	Tier 0	C
DIABETIC SUPPLIES		
ACCU-CHEK BLOOD GLUCOSE TEST KITS	Tier 3	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 30 days), OTC
ACCU-CHEK LIQ COMPACT	Tier 3	OTC
ACCU-CHEK LIQ GUIDE	Tier 3	OTC
ALCOHOL PREP PAD	Tier 3	OTC
CAREFINE MIS 32GX6MM	Tier 3	OTC
CVS KETONE TES CARE	Tier 4	OTC
DEXCOM G5 MIS RECEIVER	Tier 3	
DEXCOM G5 MIS TRANSMIT	Tier 3	
DEXCOM G6 MIS RECEIVER	Tier 3	
DEXCOM G6 MIS SENSOR	Tier 3	QL (3 sensors every 30 days)
DEXCOM G6 MIS TRANSMIT	Tier 3	
DEXCOM G7 MIS RECEIVER	Tier 3	
DEXCOM G7 MIS SENSOR	Tier 3	QL (3 sensors every 30 days)
FASTCLIX MIS LANCETS	Tier 3	OTC
FREE LIBRE2 KIT PLUS/SEN	Tier 3	QL (6 every 77 days)
FREE LIBRE3 KIT PLUS/SEN	Tier 3	QL (6 every 77 days)
FREESTY LIBR KIT 2 SENSOR	Tier 3	QL (6 every 71 days)
FREESTY LIBR KIT 3 SENSOR	Tier 3	QL (6 every 71 days)
FREESTY LIBR KIT SENSOR	Tier 3	QL (6 every 71 days)
KETONE TES	Tier 4	OTC
KETONE TEST TES	Tier 4	OTC
OMNIPOD 5 DX KIT INT G7G6	Tier 3	
OMNIPOD 5 DX MIS POD G7G6	Tier 3	
OMNIPOD 5 G7 KIT INTRO	Tier 3	
OMNIPOD 5 G7 MIS PODS	Tier 3	
OMNIPOD DASH KIT INTRO	Tier 3	
OMNIPOD DASH KIT PDM	Tier 3	
OMNIPOD DASH MIS PODS	Tier 3	
OMNIPOD MIS CLASSIC	Tier 3	
OMNIPOD PDM KIT CLASSIC	Tier 3	
ONETOUCH BLOOD GLUCOSE TEST KITS	Tier 3	OTC
ONETOUCH BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (150 Test Strips every 30 days), OTC
ONETOUCH DEL MIS PLUS 30G	Tier 3	OTC
ONETOUCH DEL MIS PLUS 33G	Tier 3	OTC
ONETOUCH SOL KIT COMPLETE	Tier 3	OTC
ONETOUCH SOL KIT FIT	Tier 3	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ONETOUCH SOL KIT REFILL	Tier 3	OTC
ONETOUCH SOL KIT STARTER	Tier 3	OTC
SHARPS CONTAINER	Tier 3	OTC
SOFTCLIX MIS LANCETS	Tier 3	OTC
TWIIIST KIT REFILL	Tier 3	
TWIIIST KIT STARTER	Tier 3	
TWIIIST REFIL KIT INFUSION	Tier 3	
URINE GLUCOSE MONITORING SUPPLIES	Tier 4	OTC
URINE TEST STRIPS	Tier 4	OTC
V-GO 20 KIT	Tier 3	
V-GO 30 KIT	Tier 3	
V-GO 40 KIT	Tier 3	

ENDOMETRIOSIS

<i>danazol cap 50 mg</i>	Tier 2	
<i>danazol cap 100 mg</i>	Tier 2	
<i>danazol cap 200 mg</i>	Tier 2	
ORILISSA TAB 150MG	Tier 3	
ORILISSA TAB 200MG	Tier 3	
SYNAREL SOL 2MG/ML	Tier 6	PA

FERTILITY REGULATORS

CHOR GONADOT INJ 10000UNT	Tier 6	PA
<i>Clomid</i>	Tier 2	
GANIRELIX AC INJ 250/0.5	Tier 5	PA
GONAL-F INJ 450UNIT	Tier 5	PA, QL (10 vials every 28 days)
GONAL-F INJ 1050UNIT	Tier 5	PA, QL (6 vials every 28 days)
GONAL-F RFF INJ 75UNIT	Tier 5	PA, QL (60 vials every 28 days)
GONAL-F RFF INJ 300/0.5	Tier 5	PA, QL (15 cartridges every 28 days)
GONAL-F RFF INJ 450/0.75	Tier 5	PA, QL (10 cartridges every 28 days)
GONAL-F RFF INJ 900/1.5	Tier 5	PA, QL (7 cartridges every 28 days)
OVIDREL INJ	Tier 5	PA

GLUCOCORTICOIDS

<i>deflazacort susp 22.75 mg/ml</i>	Tier 5	PA, QL (52 mL every 30 days)
<i>deflazacort tab 6 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>deflazacort tab 18 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 90
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>deflazacort tab 30 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>deflazacort tab 36 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
DEPO-MEDROL INJ 20MG/ML	Tier 4	
DEXAMETHASON CON 1MG/ML	Tier 3	
<i>dexamethasone elixir 0.5 mg/5ml</i>	Tier 2	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj soln pref syr 4 mg/ml</i>	Tier 2	
<i>dexamethasone soln 0.5 mg/5ml</i>	Tier 2	
<i>dexamethasone tab 0.5 mg</i>	Tier 2	
<i>dexamethasone tab 0.75 mg</i>	Tier 2	
<i>dexamethasone tab 1 mg</i>	Tier 2	
<i>dexamethasone tab 1.5 mg</i>	Tier 2	
<i>dexamethasone tab 2 mg</i>	Tier 2	
<i>dexamethasone tab 4 mg</i>	Tier 2	
<i>dexamethasone tab 6 mg</i>	Tier 2	
EMFLAZA SUS 22.75/ML	Tier 6	PA, QL (52 mL every 30 days)
<i>fludrocortisone acetate tab 0.1 mg</i>	Tier 2	
<i>hydrocortisone sodium succinate pf for inj 100 mg</i>	Tier 2	
<i>hydrocortisone tab 5 mg</i>	Tier 2	
<i>hydrocortisone tab 10 mg</i>	Tier 2	
<i>hydrocortisone tab 20 mg</i>	Tier 2	
MEDROL TAB 2MG	Tier 3	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	Tier 2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	Tier 2	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	Tier 2	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone tab 4 mg</i>	Tier 2	
<i>methylprednisolone tab 8 mg</i>	Tier 2	
<i>methylprednisolone tab 16 mg</i>	Tier 2	
<i>methylprednisolone tab 32 mg</i>	Tier 2	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	Tier 2	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	Tier 2	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	Tier 2	
<i>prednisolone soln 15 mg/5ml</i>	Tier 2	
PREDNISONE CON 5MG/ML	Tier 3	
<i>prednisone oral soln 5 mg/5ml</i>	Tier 2	
<i>prednisone tab 1 mg</i>	Tier 2	
<i>prednisone tab 2.5 mg</i>	Tier 2	
<i>prednisone tab 5 mg</i>	Tier 2	
<i>prednisone tab 10 mg</i>	Tier 2	
<i>prednisone tab 20 mg</i>	Tier 2	
<i>prednisone tab 50 mg</i>	Tier 2	
<i>prednisone tab therapy pack 5 mg (21)</i>	Tier 2	
<i>prednisone tab therapy pack 5 mg (48)</i>	Tier 2	
<i>prednisone tab therapy pack 10 mg (21)</i>	Tier 2	
<i>prednisone tab therapy pack 10 mg (48)</i>	Tier 2	
SOLU-CORTEF INJ 100MG	Tier 4	
SOLU-CORTEF INJ 250MG	Tier 4	
SOLU-CORTEF INJ 500MG	Tier 4	
SOLU-CORTEF INJ 1000MG	Tier 4	
SOLU-MEDROL INJ 2GM	Tier 4	
GLUCOSE ELEVATING AGENTS		
<i>glucagon (rdna) for inj kit 1 mg</i>	Tier 2	
GLUCOSE CHW 4GM	Tier 1	OTC
GVOKE HYPO 1 INJ 0.5/.1ML	Tier 3	
GVOKE HYPO 1 INJ 1MG/.2ML	Tier 3	
GVOKE KIT SOL 1MG/0.2M	Tier 3	
GVOKE PFS INJ	Tier 3	
ORAL GLUCOSE REPLACEMENT	Tier 3	OTC

Drug Name	Drug Tier	Requirements/Limits
HEREDITARY TYROSINEMIA TYPE 1 AGENTS		
<i>nitisinone cap 2 mg</i>	Tier 5	PA
<i>nitisinone cap 5 mg</i>	Tier 5	PA
<i>nitisinone cap 10 mg</i>	Tier 5	PA
<i>nitisinone cap 20 mg</i>	Tier 5	PA
ORFADIN SUS 4MG/ML	Tier 5	PA
HUMAN GROWTH HORMONES		
HUMATROPE INJ 6MG	Tier 5	PA
HUMATROPE INJ 12MG	Tier 5	PA
HUMATROPE INJ 24MG	Tier 5	PA
NORDITROPIN INJ 5/1.5ML	Tier 5	PA
NORDITROPIN INJ 10/1.5ML	Tier 5	PA
NORDITROPIN INJ 15/1.5ML	Tier 5	PA
NORDITROPIN INJ 30/3ML	Tier 5	PA
LYSOSOMAL STORAGE DISORDERS - GAUCHER DISEASE		
CERDELGA CAP 84MG	Tier 5	PA, QL (56 caps every 28 days)
MENOPAUSAL SYMPTOM AGENTS		
BIJUVA CAP 0.5-100	Tier 4	PA; High Risk Medications require PA for members age 70 and older
BIJUVA CAP 1-100MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
CLIMARA PRO DIS WEEKLY	Tier 3	
DEPO-ESTRADI INJ 5MG/ML	Tier 4	
DUAVEE TAB 0.45-20	Tier 3	
ELESTRIN GEL 0.06%	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	Tier 2	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	Tier 2	
<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 0.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 1 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol tab 2 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 1 mg/gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.1 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.05 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.06 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td patch weekly 0.025 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.075 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol vaginal cream 0.1 mg/gm</i>	Tier 2	
<i>estradiol valerate im in oil 20 mg/ml</i>	Tier 2	
<i>estradiol valerate im in oil 40 mg/ml</i>	Tier 2	
EVAMIST SPR 1.53MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
IMVEXXY MAIN SUP 4MCG	Tier 3	
IMVEXXY MAIN SUP 10MCG	Tier 3	
IMVEXXY STRT SUP 4MCG	Tier 3	
IMVEXXY STRT SUP 10MCG	Tier 3	
<i>Jinteli</i>	Tier 2	
MENEST TAB 0.3MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 0.625MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 1.25MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 2.5MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>Mimvey</i>	Tier 2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	Tier 2	
PREMARIN TAB 0.3MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.9MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.45MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
PREMARIN TAB 0.625MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 1.25MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN VAG CRE 0.625MG	Tier 4	
Yuvaferm	Tier 2	
METABOLIC MODIFIERS		
Mccarnitine Tab 330mg	Tier 1	OTC
MISCELLANEOUS		
betaine powder for oral solution	Tier 5	PA
cabergoline tab 0.5 mg	Tier 2	
CYSTAGON CAP 50MG	Tier 5	PA
CYSTAGON CAP 150MG	Tier 5	PA
INCRELEX INJ 40MG/4ML	Tier 5	PA
INTRAROSA SUP 6.5MG	Tier 4	
MYALEPT INJ 11.3MG	Tier 5	PA, QL (30 vials every 30 days)
OSPHENA TAB 60MG	Tier 4	PA
raloxifene hcl tab 60 mg	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
sapropterin dihydrochloride powder packet 100 mg	Tier 5	PA
sapropterin dihydrochloride powder packet 500 mg	Tier 5	PA
sapropterin dihydrochloride tab 100 mg	Tier 5	PA
SIGNIFOR INJ 0.3MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
SIGNIFOR INJ 0.6MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
SIGNIFOR INJ 0.9MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
tolvaptan tab 15 mg	Tier 5	PA
tolvaptan tab 30 mg	Tier 5	PA
PHOSPHATE BINDER AGENTS		
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	Tier 2	
calcium acetate (phosphate binder) tab 667 mg	Tier 2	
lanthanum carbonate chew tab 500 mg (elemental)	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	Tier 2	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	Tier 2	
<i>sevelamer carbonate packet 0.8 gm</i>	Tier 2	
<i>sevelamer carbonate packet 2.4 gm</i>	Tier 2	
<i>sevelamer carbonate tab 800 mg</i>	Tier 2	
VELPHORO CHW 500MG	Tier 4	ST; PA**
POTASSIUM-REMOVING AGENTS		
<i>Sps</i>	Tier 2	
PROGESTINS		
CRINONE GEL 4% VAG	Tier 3	
CRINONE GEL 8% VAG	Tier 3	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	Tier 2	
<i>medroxyprogesterone acetate tab 5 mg</i>	Tier 2	
<i>medroxyprogesterone acetate tab 10 mg</i>	Tier 2	
<i>megestrol acetate susp 40 mg/ml</i>	Tier 2	
<i>megestrol acetate susp 625 mg/5ml</i>	Tier 2	
<i>norethindrone acetate tab 5 mg</i>	Tier 2	
<i>progesterone cap 100 mg</i>	Tier 2	
<i>progesterone cap 200 mg</i>	Tier 2	
THYROID AGENTS		
<i>levothyroxine sodium tab 25 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 50 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 75 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 88 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 100 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 112 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 125 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 137 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 150 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 175 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 200 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 300 mcg</i>	Tier 2	
<i>Levoxyl</i>	Tier 2	
<i>liothyronine sodium tab 5 mcg</i>	Tier 2	
<i>liothyronine sodium tab 25 mcg</i>	Tier 2	
<i>liothyronine sodium tab 50 mcg</i>	Tier 2	
<i>methimazole tab 5 mg</i>	Tier 2	
<i>methimazole tab 10 mg</i>	Tier 2	
<i>propylthiouracil tab 50 mg</i>	Tier 2	
SYNTHROID TAB 25MCG	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
SYNTHROID TAB 50MCG	Tier 3	
SYNTHROID TAB 75MCG	Tier 3	
SYNTHROID TAB 88MCG	Tier 3	
SYNTHROID TAB 100MCG	Tier 3	
SYNTHROID TAB 112MCG	Tier 3	
SYNTHROID TAB 125MCG	Tier 3	
SYNTHROID TAB 137MCG	Tier 3	
SYNTHROID TAB 150MCG	Tier 3	
SYNTHROID TAB 175MCG	Tier 3	
SYNTHROID TAB 200MCG	Tier 3	
SYNTHROID TAB 300MCG	Tier 3	
<i>Unithroid</i>	Tier 2	
UREA CYCLE DISORDER		
<i>carglumic acid soluble tab 200 mg</i>	Tier 5	PA
PHEBURANE MIS 483/GM	Tier 5	PA, QL (672g every 30 days)
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	Tier 5	PA, QL (798g every 30 days)
<i>sodium phenylbutyrate tab 500 mg</i>	Tier 5	PA, QL (1200 tabs every 30 days)
VASOPRESSINS		
<i>desmopressin acetate inj 4 mcg/ml</i>	Tier 2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	Tier 2	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	Tier 2	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	Tier 2	
<i>desmopressin acetate tab 0.1 mg</i>	Tier 2	
<i>desmopressin acetate tab 0.2 mg</i>	Tier 2	
VITAMIN D ANALOGS		
<i>calcitriol cap 0.5 mcg</i>	Tier 2	
<i>calcitriol cap 0.25 mcg</i>	Tier 2	
<i>calcitriol oral soln 1 mcg/ml</i>	Tier 2	
<i>doxercalciferol cap 0.5 mcg</i>	Tier 2	
<i>doxercalciferol cap 1 mcg</i>	Tier 2	
<i>doxercalciferol cap 2.5 mcg</i>	Tier 2	
<i>paricalcitol cap 1 mcg</i>	Tier 2	
<i>paricalcitol cap 2 mcg</i>	Tier 2	
<i>paricalcitol cap 4 mcg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
GASTROINTESTINAL		
ANTICHOLINERGICS		
<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	Tier 2	
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	Tier 2	
<i>dicyclomine hcl cap 10 mg</i>	Tier 2	
<i>dicyclomine hcl inj 10 mg/ml</i>	Tier 2	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	Tier 2	
<i>dicyclomine hcl tab 20 mg</i>	Tier 2	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	Tier 2	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	Tier 2	
<i>glycopyrrolate oral soln 1 mg/5ml</i>	Tier 2	
<i>glycopyrrolate tab 1 mg</i>	Tier 2	
<i>glycopyrrolate tab 2 mg</i>	Tier 2	
<i>methscopolamine bromide tab 2.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>methscopolamine bromide tab 5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
ANTIDIARRHEALS		
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	Tier 2	
ANTIEMETICS		
<i>AKYNZEO CAP 300-0.5</i>	Tier 4	QL (2 caps every 28 days)
<i>aprepitant capsule 40 mg</i>	Tier 2	QL (3 caps every 180 days)
<i>aprepitant capsule 80 mg</i>	Tier 2	QL (4 caps every 28 days)
<i>aprepitant capsule 125 mg</i>	Tier 2	QL (2 caps every 28 days)
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	Tier 2	QL (2 packs every 28 days)
<i>Compro</i>	Tier 2	
<i>DRAMAMINE CHW 50MG</i>	Tier 1	OTC
<i>Dramamine Tab 25mg</i>	Tier 1	OTC
<i>DRAMAMINE TAB 50MG</i>	Tier 1	OTC
<i>dronabinol cap 2.5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dronabinol cap 5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dronabinol cap 10 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>granisetron hcl inj 1 mg/ml</i>	Tier 2	QL (2 mL every 28 days)
<i>granisetron hcl tab 1 mg</i>	Tier 2	QL (12 tabs every 28 days)
<i>meclizine hcl tab 12.5 mg</i>	Tier 1	OTC
<i>meclizine hcl tab 12.5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>meclizine hcl tab 25 mg</i>	Tier 2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	Tier 2	
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	Tier 2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	Tier 2	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	Tier 2	
<i>Motion Sick Chw 25mg</i>	Tier 1	OTC
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	Tier 2	QL (20 mL every 28 days)
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	Tier 2	QL (20 mL every 28 days)
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	Tier 2	QL (20 mL every 28 days)
<i>ondansetron hcl oral soln 4 mg/5ml</i>	Tier 2	QL (200 mL every 28 days)
<i>ondansetron hcl tab 4 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron hcl tab 8 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron hcl tab 24 mg</i>	Tier 2	QL (2 tabs every 28 days)
<i>ondansetron orally disintegrating tab 4 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron orally disintegrating tab 8 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	Tier 2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	Tier 2	
<i>prochlorperazine suppos 25 mg</i>	Tier 2	
<i>promethazine hcl inj 25 mg/ml</i>	Tier 2	
<i>promethazine hcl inj 50 mg/ml</i>	Tier 2	
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl suppos 12.5 mg</i>	Tier 2	
<i>promethazine hcl suppos 25 mg</i>	Tier 2	
<i>promethazine hcl tab 12.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>Promethegan</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
SANCUSO DIS 3.1MG	Tier 3	QL (2 patches every 28 days)
<i>scopolamine td patch 72hr 1 mg/3days</i>	Tier 2	
<i>trimethobenzamide hcl cap 300 mg</i>	Tier 2	
VARUBI TAB 90MG	Tier 3	
ANTIPLATULENTS		
GAS-X CHW 80MG	Tier 1	OTC
PHAZYME CAP 180MG	Tier 1	OTC
<i>Phazyme Chw 125mg</i>	Tier 1	OTC
<i>Simethicone Dro 20/0.3ml</i>	Tier 1	OTC
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine tab 200 mg</i>	Tier 2	
<i>cimetidine tab 300 mg</i>	Tier 2	
<i>cimetidine tab 400 mg</i>	Tier 2	
<i>cimetidine tab 800 mg</i>	Tier 2	
<i>famotidine for susp 40 mg/5ml</i>	Tier 2	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	Tier 2	
<i>famotidine preservative free inj 20 mg/2ml</i>	Tier 2	
<i>famotidine tab 10 mg</i>	Tier 1	OTC
<i>famotidine tab 20 mg</i>	Tier 2	
<i>famotidine tab 40 mg</i>	Tier 2	
<i>nizatidine cap 150 mg</i>	Tier 2	
<i>nizatidine cap 300 mg</i>	Tier 2	
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium cap 750 mg</i>	Tier 2	
<i>budesonide delayed release particles cap 3 mg</i>	Tier 2	
<i>budesonide tab er 24hr 9 mg</i>	Tier 2	
CORTIFOAM AER 90MG	Tier 3	
DIPENTUM CAP 250MG	Tier 4	
<i>hydrocortisone enema 100 mg/60ml</i>	Tier 2	
<i>mesalamine cap dr 400 mg</i>	Tier 2	
<i>mesalamine cap er 24hr 0.375 gm</i>	Tier 2	
<i>mesalamine enema 4 gm</i>	Tier 2	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	Tier 2	
<i>mesalamine suppos 1000 mg</i>	Tier 2	
<i>mesalamine tab delayed release 1.2 gm</i>	Tier 2	
<i>mesalamine tab delayed release 800 mg</i>	Tier 2	
<i>sulfasalazine tab 500 mg</i>	Tier 2	
<i>sulfasalazine tab delayed release 500 mg</i>	Tier 2	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
LINZESS CAP 72MCG	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
LINZESS CAP 145MCG	Tier 3	
LINZESS CAP 290MCG	Tier 3	
<i>lubiprostone cap 8 mcg</i>	Tier 2	
<i>lubiprostone cap 24 mcg</i>	Tier 2	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	Tier 2	PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	Tier 2	PA
VIBERZI TAB 75MG	Tier 3	PA
VIBERZI TAB 100MG	Tier 3	PA
LAXATIVES		
CLENPIQ SOL	Tier 0	\$0 copay for members age 45 through 75, Tier 3 for all others
<i>Enulose</i>	Tier 2	
<i>Generlac</i>	Tier 2	
<i>lactulose solution 10 gm/15ml</i>	Tier 2	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	Tier 2	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
PEG-PREP KIT	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	Tier 2	OTC
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
SUFLAVE SOL	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
SUTAB TAB	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
MISCELLANEOUS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	Tier 2	
<i>misoprostol tab 100 mcg</i>	Tier 2	
<i>misoprostol tab 200 mcg</i>	Tier 2	
MOVANTIK TAB 12.5MG	Tier 3	
MOVANTIK TAB 25MG	Tier 3	
SUCRAID SOL 8500/ML	Tier 4	PA, QL (354 mL every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sucralfate tab 1 gm</i>	Tier 2	
<i>ursodiol cap 300 mg</i>	Tier 2	
<i>ursodiol tab 250 mg</i>	Tier 2	
<i>ursodiol tab 500 mg</i>	Tier 2	
VOWST CAP	Tier 6	PA, QL (12 caps every 30 days)

PANCREATIC ENZYMES

CREON CAP 3000UNIT	Tier 3	PA
CREON CAP 6000UNIT	Tier 3	PA
CREON CAP 12000UNIT	Tier 3	PA
CREON CAP 24000UNIT	Tier 3	PA
CREON CAP 36000UNIT	Tier 3	PA
VIOKACE TAB 10440	Tier 3	PA
VIOKACE TAB 20880	Tier 3	PA
ZENPEP CAP 3000UNIT	Tier 3	PA
ZENPEP CAP 5000UNIT	Tier 3	PA
ZENPEP CAP 10000UNIT	Tier 3	PA
ZENPEP CAP 15000UNIT	Tier 3	PA
ZENPEP CAP 20000UNIT	Tier 3	PA
ZENPEP CAP 25000UNIT	Tier 3	PA
ZENPEP CAP 40000UNIT	Tier 3	PA
ZENPEP CAP 60000UNIT	Tier 3	PA

PROTON PUMP INHIBITORS

<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	Tier 2	QL (90 caps every 365 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	Tier 2	QL (90 caps every 365 days)
<i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i>	Tier 2	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	Tier 2	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	Tier 2	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>lansoprazole cap delayed release 15 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>lansoprazole cap delayed release 30 mg</i>	Tier 2	QL (90 caps every 365 days)
NEXIUM GRA 2.5MG DR	Tier 4	QL (90 packets every 365 days); Covered for age less than 1 year only

Drug Name	Drug Tier	Requirements/Limits
NEXIUM GRA 5MG DR	Tier 4	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>omeprazole cap delayed release 10 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole cap delayed release 20 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole cap delayed release 40 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole delayed release tab 20 mg</i>	Tier 1	OTC
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	Tier 4	QL (90 packets every 365 days)
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	Tier 4	QL (90 packets every 365 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	Tier 2	QL (90 tabs every 365 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	Tier 2	QL (90 tabs every 365 days)
PRILOSEC OTC TAB 20MG	Tier 1	OTC
<i>rabeprazole sodium ec tab 20 mg</i>	Tier 2	QL (90 tabs every 365 days)

RECTAL, CORTICOSTEROIDS

<i>hydrocortisone perianal cream 1%</i>	Tier 2
<i>hydrocortisone perianal cream 2.5%</i>	Tier 2
<i>Proctozone-Hc</i>	Tier 2

ULCER THERAPY COMBINATIONS

<i>amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg</i>	Tier 2	
<i>Dual Action Chw Complete</i>	Tier 1	OTC
HELIDAC MIS THERAPY	Tier 4	

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	Tier 2
CARDURA XL TAB 4MG	Tier 4
CARDURA XL TAB 8MG	Tier 4
<i>doxazosin mesylate tab 1 mg</i>	Tier 2
<i>doxazosin mesylate tab 2 mg</i>	Tier 2
<i>doxazosin mesylate tab 4 mg</i>	Tier 2
<i>doxazosin mesylate tab 8 mg</i>	Tier 2
<i>dutasteride cap 0.5 mg</i>	Tier 2
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	Tier 2
<i>finasteride tab 5 mg</i>	Tier 2
<i>silodosin cap 4 mg</i>	Tier 2

Drug Name	Drug Tier	Requirements/Limits
<i>silodosin cap 8 mg</i>	Tier 2	
<i>tadalafil tab 2.5 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>tadalafil tab 5 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>tamsulosin hcl cap 0.4 mg</i>	Tier 2	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	Tier 2	

CONTRACEPTIVES

ENCARE SUP 100MG	Tier 0	OTC
GYNOL II GEL 3%	Tier 0	OTC
PHEXXI GEL	Tier 0	
TODAY SPONGE MIS	Tier 0	OTC
VCF VAGINAL GEL CONTRACE	Tier 0	OTC
VCF VAGINAL MIS CONTRACP	Tier 0	OTC

ERECTILE DYSFUNCTION

<i>avanafil tab 50 mg</i>	Tier 2	PA, QL (6 tabs every 30 days)
<i>avanafil tab 100 mg</i>	Tier 2	PA, QL (6 tabs every 30 days)
<i>avanafil tab 200 mg</i>	Tier 2	PA, QL (6 tabs every 30 days)
MUSE SUP 250MCG	Tier 4	PA, QL (6 units every 30 days)
MUSE SUP 500MCG	Tier 4	PA, QL (6 units every 30 days)
MUSE SUP 1000MCG	Tier 4	PA, QL (6 units every 30 days)
STENDRA TAB 50MG	Tier 4	PA, QL (6 tabs every 30 days)
STENDRA TAB 100MG	Tier 4	PA, QL (6 tabs every 30 days)
STENDRA TAB 200MG	Tier 4	PA, QL (6 tabs every 30 days)

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	Tier 2	
<i>bethanechol chloride tab 10 mg</i>	Tier 2	
<i>bethanechol chloride tab 25 mg</i>	Tier 2	
<i>bethanechol chloride tab 50 mg</i>	Tier 2	
ELMIRON CAP 100MG	Tier 4	
<i>Eq Urinary Pain Relief</i>	Tier 2	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy 105

Drug Name	Drug Tier	Requirements/Limits
<i>potassium citrate tab er 5 meq (540 mg)</i>	Tier 2	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	Tier 2	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	Tier 2	
URINARY ANTISPASMODICS		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	Tier 2	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	Tier 2	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	Tier 2	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	Tier 2	
<i>mirabegron tab er 24 hr 25 mg</i>	Tier 2	
<i>mirabegron tab er 24 hr 50 mg</i>	Tier 2	
MYRBETRIQ SUS 8MG/ML	Tier 3	
<i>oxybutynin chloride solution 5 mg/5ml</i>	Tier 2	
<i>oxybutynin chloride tab 5 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	Tier 2	
<i>solifenacin succinate tab 5 mg</i>	Tier 2	
<i>solifenacin succinate tab 10 mg</i>	Tier 2	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	Tier 2	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	Tier 2	
<i>tolterodine tartrate tab 1 mg</i>	Tier 2	
<i>tolterodine tartrate tab 2 mg</i>	Tier 2	
<i>trospium chloride cap er 24hr 60 mg</i>	Tier 2	
<i>trospium chloride tab 20 mg</i>	Tier 2	
VAGINAL ANTI-INFECTIVES		
CLEOCIN SUP 100MG	Tier 3	
<i>clindamycin phosphate vaginal cream 2%</i>	Tier 2	
<i>3 Day Vaginal Cre 4%</i>	Tier 1	OTC
GYNAZOLE-1 CRE 2%	Tier 4	
GYNE-LOTRIM CRE 1% VAG	Tier 1	OTC
GYNE-LOTRIMI CRE 3	Tier 1	OTC
<i>metronidazole vaginal gel 0.75%</i>	Tier 2	
<i>Miconazole 1 kit 1200-2%</i>	Tier 1	OTC
<i>Miconazole 3</i>	Tier 2	
<i>Miconazole 7 Cre Tube/kit</i>	Tier 1	OTC
<i>Miconazole 7 Sup 100mg</i>	Tier 1	OTC
<i>terconazole vaginal cream 0.4%</i>	Tier 2	
<i>terconazole vaginal cream 0.8%</i>	Tier 2	
<i>terconazole vaginal suppos 80 mg</i>	Tier 2	
VAGISTAT-1 OIN 6.5% VAG	Tier 1	OTC
<i>Vagistat-3 kit Combo Pk</i>	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 106
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
HEMATOLOGIC		
ANTICOAGULANTS		

<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	Tier 2
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	Tier 2
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	Tier 2
ELIQUIS ST P TAB 5MG	Tier 3
ELIQUIS TAB 2.5MG	Tier 3
ELIQUIS TAB 5MG	Tier 3
<i>enoxaparin sodium inj 300 mg/3ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	Tier 2
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	Tier 2
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	Tier 2
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	Tier 2
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	Tier 2
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	Tier 2
FRAGMIN INJ 2500/0.2	Tier 4
FRAGMIN INJ 2500/ML	Tier 4
FRAGMIN INJ 5000/0.2	Tier 4
FRAGMIN INJ 7500/0.3	Tier 4
FRAGMIN INJ 10000/ML	Tier 4
FRAGMIN INJ 12500UNT	Tier 4
FRAGMIN INJ 15000UNT	Tier 4
FRAGMIN INJ 18000UNT	Tier 4
FRAGMIN INJ 95000UNT	Tier 4
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	Tier 2
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	Tier 2

Drug Name	Drug Tier	Requirements/Limits
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	Tier 2	
<i>Jantoven</i>	Tier 2	
PRADAXA CAP 75MG	Tier 4	
<i>warfarin sodium tab 1 mg</i>	Tier 2	
<i>warfarin sodium tab 2 mg</i>	Tier 2	
<i>warfarin sodium tab 2.5 mg</i>	Tier 2	
<i>warfarin sodium tab 3 mg</i>	Tier 2	
<i>warfarin sodium tab 4 mg</i>	Tier 2	
<i>warfarin sodium tab 5 mg</i>	Tier 2	
<i>warfarin sodium tab 6 mg</i>	Tier 2	
<i>warfarin sodium tab 7.5 mg</i>	Tier 2	
<i>warfarin sodium tab 10 mg</i>	Tier 2	
XARELTO STAR TAB 15/20MG	Tier 3	
XARELTO SUS 1MG/ML	Tier 3	
XARELTO TAB 2.5MG	Tier 3	
XARELTO TAB 10MG	Tier 3	
XARELTO TAB 15MG	Tier 3	
XARELTO TAB 20MG	Tier 3	

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 10MCG	Tier 5	PA
ARANESP INJ 25MCG	Tier 5	PA
ARANESP INJ 40MCG	Tier 5	PA
ARANESP INJ 60MCG	Tier 5	PA
ARANESP INJ 100MCG	Tier 5	PA
ARANESP INJ 150MCG	Tier 5	PA
ARANESP INJ 200MCG	Tier 5	PA
ARANESP INJ 300MCG	Tier 5	PA
ARANESP INJ 500MCG	Tier 5	PA
FYLNETRA INJ 6MG/0.6	Tier 5	PA, QL (2 syringes every 28 days)
MIRCERA INJ 30MCG	Tier 5	PA
MIRCERA INJ 50MCG	Tier 5	PA
MIRCERA INJ 75MCG	Tier 5	PA
MIRCERA INJ 100MCG	Tier 5	PA
MIRCERA INJ 120MCG	Tier 5	PA
MIRCERA INJ 150MCG	Tier 5	PA
MIRCERA INJ 200MCG	Tier 5	PA
NIVESTYM INJ 300/0.5	Tier 5	PA
NIVESTYM INJ 300MCG	Tier 5	PA
NIVESTYM INJ 480/0.8	Tier 5	PA

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 108
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
NIVESTYM INJ 480MCG	Tier 5	PA
NYVEPRIA INJ 6/0.6ML	Tier 5	PA, QL (2 syringes every 28 days)
RETACRIT INJ 2000UNIT	Tier 5	PA
RETACRIT INJ 3000UNIT	Tier 5	PA
RETACRIT INJ 4000UNIT	Tier 5	PA
RETACRIT INJ 10000UNT	Tier 5	PA
RETACRIT INJ 20000UNI	Tier 5	PA
RETACRIT INJ 40000UNT	Tier 5	PA
HEMOPHILIA A AGENTS		
HEMLIBRA INJ 30MG/ML	Tier 6	PA
HEMLIBRA INJ 60/0.4	Tier 6	PA
HEMLIBRA INJ 105/0.7	Tier 6	PA
HEMLIBRA INJ 150/ML	Tier 6	PA
HEMLIBRA INJ 300/2ML	Tier 6	PA
HEMLIBRA SOL 12/0.4ML	Tier 6	PA
MISCELLANEOUS		
<i>anagrelide hcl cap 0.5 mg</i>	Tier 2	
<i>anagrelide hcl cap 1 mg</i>	Tier 2	
<i>cilostazol tab 50 mg</i>	Tier 2	
<i>cilostazol tab 100 mg</i>	Tier 2	
<i>pentoxifylline tab er 400 mg</i>	Tier 2	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	Tier 2	
<i>tranexamic acid tab 650 mg</i>	Tier 2	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	Tier 2	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	Tier 2	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	Tier 2	
<i>dipyridamole tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 75 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>prasugrel hcl tab 5 mg (base equiv)</i>	Tier 2	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	Tier 2	
YOSPRALA TAB 81-40MG	Tier 4	
YOSPRALA TAB 325-40MG	Tier 4	

Drug Name	Drug Tier	Requirements/Limits
SICKLE CELL DISEASE		
DROXIA CAP 200MG	Tier 3	
DROXIA CAP 300MG	Tier 3	
DROXIA CAP 400MG	Tier 3	
THROMBOCYTOPENIA AGENTS		
DOPTELET TAB 20MG (10 TABLETS)	Tier 5	PA, QL (1 carton every 5 days)
DOPTELET TAB 20MG (15 TABLETS)	Tier 5	PA, QL (1 carton every 5 days)
DOPTELET TAB 20MG (30 TABLETS)	Tier 5	PA, QL (2 cartons every 30 days)
HEMATOPOIETIC AGENTS		
COBALAMINS		
<i>cyanocobalamin sl tab 500 mcg</i>	Tier 1	OTC
<i>cyanocobalamin sl tab 1000 mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 100mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 250mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 500mcg</i>	Tier 1	OTC
<i>Vitamin B-12 Tab 1000mcg</i>	Tier 1	OTC
IRON		
FER-IN-SOL DRO 15MG/ML	Tier 0	OTC
<i>Ferate Tab 27mg</i>	Tier 1	OTC
FERRETT'S TAB 325MG	Tier 1	OTC
<i>Ferrocite Tab 324mg</i>	Tier 1	OTC
FERROUS GLUC TAB 324MG	Tier 1	OTC
FERROUS SUL LIQ 220/5ML	Tier 0	OTC
FERROUS SULF TAB 140MG	Tier 1	OTC
FERROUS SULF TAB 324MG EC	Tier 1	OTC
<i>Ferrous Sulf Tab 325mg</i>	Tier 1	OTC
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	Tier 0	OTC
<i>ferrous sulfate soln 300 mg/5ml (60 mg/5ml elemental fe)</i>	Tier 0	OTC
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	Tier 1	OTC
IRON CHW PEDIATRI	Tier 1	OTC
<i>Nu-Iron 150 Cap 150mg</i>	Tier 1	OTC
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS (PHYSICIAN-ADMINISTERED)		
ACTEMRA INJ 80MG/4ML	Tier 6	ST, PA, QL (20 vials every 28 days)

Drug Name	Drug Tier	Requirements/Limits
ACTEMRA INJ 200/10ML	Tier 6	ST, PA, QL (8 vials every 28 days)
ACTEMRA INJ 400/20ML	Tier 6	ST, PA, QL (4 vials every 28 days)
INFLIXIMAB INJ 100MG	Tier 5	PA, QL (5 vials every 42 days)
SIMPONI ARIA SOL 50MG/4ML	Tier 6	PA, QL (200 mg every 8 weeks)
SKYRIZI SOL 60MG/ML	Tier 5	PA, QL (6 vials every 56 days)
TREMFYA INJ 200/20ML	Tier 5	PA, QL (One time induction dose for UC diagnosis only); Preferred agent for Ulcerative Colitis
AUTOIMMUNE AGENTS (SELF-ADMINISTERED)		
ACTEMRA INJ 162/0.9	Tier 6	ST, PA, QL (4 syringes every 28 days)
ACTEMRA INJ ACTPEN	Tier 6	ST, PA, QL (4 injections every 28 days)
ADALIMU-ADAZ INJ 20/0.2ML	Tier 5	PA, QL (4 syringes every 28 days)
ADALIMU-ADAZ INJ 40/0.4ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
ADALIMU-ADAZ INJ 40/0.4ML	Tier 5	PA, QL (4 syringes every 28 days)
ADALIMU-ADAZ INJ 80/0.8ML	Tier 5	PA, QL (2 auto-injectors every 28 days)
ADALIMU-FKJP KIT 20/0.4ML	Tier 5	PA, QL (4 syringes every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	Tier 5	PA, QL (4 syringes every 28 days)
COSENTYX INJ 75MG/0.5	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
COSENTYX INJ 300DOSE	Tier 5	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	Tier 5	PA, QL (1 pen every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	Tier 5	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX UNO INJ 300/2ML	Tier 5	PA, QL (1 pen every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
ENBREL INJ 25/0.5ML	Tier 5	PA, QL (8 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 25MG	Tier 5	PA, QL (8 vials every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 50MG/ML	Tier 5	PA, QL (4 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL MINI INJ 50MG/ML	Tier 5	PA, QL (4 cartridges every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SRCLK INJ 50MG/ML	Tier 5	PA, QL (4 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
HYRIMOZ INJ 10/0.1ML	Tier 5	PA, QL (2 syringes every 28 days)

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ INJ 20/0.2ML	Tier 5	PA, QL (4 syringes every 28 days)
HYRIMOZ INJ 40/0.4ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
HYRIMOZ INJ 40/0.4ML	Tier 5	PA, QL (4 syringes every 28 days)
HYRIMOZ INJ 40/0.8ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
HYRIMOZ INJ 40/0.8ML	Tier 5	PA, QL (4 syringes every 28 days)
HYRIMOZ INJ 80/0.8ML	Tier 5	PA, QL (2 auto-injectors every 28 days)
HYRIMOZ SENS INJ 80/0.8ML	Tier 5	PA, QL (2 auto-injectors every 28 days)
HYRIMOZ SENS INJ 80/0.8ML	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ-CROH INJ UC SP	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ-PED INJ CROHNS	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ-PLAQ INJ PSOR/UVE	Tier 5	PA, QL (Starter pack - initial dose only)
KEVZARA INJ 150/1.14	Tier 5	PA, QL (2 pens every 28 days); Preferred agent for Rheumatoid Arthritis
KEVZARA INJ 150/1.14	Tier 5	PA, QL (2 syringes every 4 weeks); Preferred agent for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	Tier 5	PA, QL (2 pens every 28 days); Preferred agent for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	Tier 5	PA, QL (2 syringes every 4 weeks); Preferred agent for Rheumatoid Arthritis
OTEZLA TAB 10/20	Tier 5	PA, QL (55 tabs every 28 days); Preferred agent for Psoriasis and Psoriatic Arthritis
OTEZLA TAB 10/20/30	Tier 5	PA, QL (55 tabs every 28 days); Preferred agent for Psoriasis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
OTEZLA TAB 20MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Psoriasis and Psoriatic Arthritis
OTEZLA TAB 30MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Psoriasis and Psoriatic Arthritis
RINVOQ LQ SOL 1MG/ML	Tier 5	PA, QL (360 mL every 30 days); Preferred agent for Psoriatic Arthritis
RINVOQ TAB 15MG ER	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis.
RINVOQ TAB 30MG ER	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Atopic Dermatitis, Crohn's Disease and Ulcerative Colitis.
RINVOQ TAB 45MG ER	Tier 5	PA, QL (One time induction dose for CD/UC diagnosis only); Preferred agent for Crohn's Disease and Ulcerative Colitis.
SIMPONI INJ 50/0.5ML	Tier 6	ST, PA, QL (1 injection every 28 days)
SIMPONI INJ 100MG/ML	Tier 6	ST, PA, QL (1 injection every 28 days)
SKYRIZI INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 12 weeks); Preferred agent for Psoriasis and Psoriatic Arthritis
SKYRIZI INJ 180/1.2	Tier 5	PA, QL (1 cartridge every 56 days); Preferred Agent for Crohn's Disease and Ulcerative Colitis
SKYRIZI INJ 360/2.4	Tier 5	PA, QL (1 cartridge every 56 days); Preferred Agent for Crohn's Disease and Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI PEN INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 12 weeks); Preferred agent for Psoriasis and Psoriatic Arthritis
STELARA INJ 45MG/0.5	Tier 5	PA, QL (1 syringe every 84 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
STELARA INJ 45MG/0.5	Tier 5	PA, QL (1 vial every 84 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
STELARA INJ 90MG/ML	Tier 5	PA, QL (1 syringe every 56 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
TALTZ INJ 20/0.25	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Psoriasis
TALTZ INJ 40/0.5ML	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Psoriasis
TALTZ INJ 80MG/ML	Tier 5	PA, QL (1 injection every 28 days); Preferred agent for Psoriasis
TREMFYA INJ 100MG/ML	Tier 5	PA, QL (1 injection every 56 days); Preferred agent for Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
TREMFYA INJ 200/2ML	Tier 5	PA, QL (1 injection every 28 days); Preferred agent for Ulcerative Colitis
VELSIPITY TAB 2MG	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Ulcerative Colitis
XELJANZ SOL 1MG/ML	Tier 5	PA, QL (240 mL every 24 days)
XELJANZ TAB 5MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis.

Drug Name	Drug Tier	Requirements/Limits
XELJANZ TAB 10MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Ulcerative Colitis.
XELJANZ XR TAB 11MG	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis.
XELJANZ XR TAB 22MG	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Ulcerative Colitis.

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate tab 200 mg</i>	Tier 2	
<i>leflunomide tab 10 mg</i>	Tier 2	
<i>leflunomide tab 20 mg</i>	Tier 2	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	Tier 2	

HEREDITARY ANGIOEDEMA

<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	Tier 5	PA, QL (45 syringes every 90 days)
TAKHZYRO INJ 150MG/ML	Tier 6	PA, QL (2 syringes every 28 days)
TAKHZYRO INJ 300/2ML	Tier 6	PA, QL (2 syringes every 28 days)
TAKHZYRO INJ 300/2ML	Tier 6	PA, QL (2 vials every 28 days)

IMMUNOGLOBULIN

CUTAQUIG SOL 1.65GM	Tier 5	PA
CUTAQUIG SOL 1GM	Tier 5	PA
CUTAQUIG SOL 2GM	Tier 5	PA
CUTAQUIG SOL 3.3GM	Tier 5	PA
CUTAQUIG SOL 4GM	Tier 5	PA
CUTAQUIG SOL 8GM	Tier 5	PA

IMMUNOMODULATORS

ACTIMMUNE INJ 2MU/0.5	Tier 6	PA
ARCALYST INJ 220MG	Tier 5	PA, QL (8 vials every 28 days)

IMMUNOSUPPRESSANTS

ASTAGRAF XL CAP 0.5MG	Tier 4	
ASTAGRAF XL CAP 1MG	Tier 4	
ASTAGRAF XL CAP 5MG	Tier 4	
<i>azathioprine tab 50 mg</i>	Tier 2	
<i>azathioprine tab 75 mg</i>	Tier 2	
<i>azathioprine tab 100 mg</i>	Tier 2	
CELLCEPT CAP 250MG	Tier 4	

Drug Name	Drug Tier	Requirements/Limits
CELLCEPT IV INJ 500MG	Tier 4	
CELLCEPT SUS 200MG/ML	Tier 4	
CELLCEPT TAB 500MG	Tier 4	
<i>cyclosporine cap 25 mg</i>	Tier 2	
<i>cyclosporine cap 100 mg</i>	Tier 2	
<i>cyclosporine iv soln 50 mg/ml</i>	Tier 2	
<i>cyclosporine modified cap 25 mg</i>	Tier 2	
<i>cyclosporine modified cap 50 mg</i>	Tier 2	
<i>cyclosporine modified cap 100 mg</i>	Tier 2	
<i>cyclosporine modified oral soln 100 mg/ml</i>	Tier 2	
ENVARSUS XR TAB 0.75MG	Tier 4	
ENVARSUS XR TAB 1MG	Tier 4	
ENVARSUS XR TAB 4MG	Tier 4	
<i>everolimus tab 0.5 mg</i>	Tier 2	
<i>everolimus tab 0.25 mg</i>	Tier 2	
<i>everolimus tab 0.75 mg</i>	Tier 2	
<i>everolimus tab 1 mg</i>	Tier 2	
<i>Gengraf</i>	Tier 2	
<i>mycophenolate mofetil cap 250 mg</i>	Tier 2	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	Tier 2	
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	Tier 2	
<i>mycophenolate mofetil tab 500 mg</i>	Tier 2	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	Tier 2	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	Tier 2	
MYFORTIC TAB 180MG	Tier 4	
MYFORTIC TAB 360MG	Tier 4	
NEORAL CAP 25MG	Tier 4	
NEORAL CAP 100MG	Tier 4	
NEORAL SOL 100MG/ML	Tier 4	
NULOJIX INJ 250MG	Tier 4	
PROGRAF CAP 0.5MG	Tier 4	
PROGRAF CAP 1MG	Tier 4	
PROGRAF CAP 5MG	Tier 4	
PROGRAF GRA 0.2MG	Tier 4	
PROGRAF GRA 1MG	Tier 4	
PROGRAF INJ 5MG/ML	Tier 4	
RAPAMUNE SOL 1MG/ML	Tier 4	
RAPAMUNE TAB 0.5MG	Tier 4	
RAPAMUNE TAB 1MG	Tier 4	
RAPAMUNE TAB 2MG	Tier 4	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
SANDIMMUNE CAP 25MG	Tier 4	
SANDIMMUNE CAP 100MG	Tier 4	
SANDIMMUNE INJ 50MG/ML	Tier 4	
SANDIMMUNE SOL 100MG/ML	Tier 4	
<i>sirolimus oral soln 1 mg/ml</i>	Tier 2	
<i>sirolimus tab 0.5 mg</i>	Tier 2	
<i>sirolimus tab 1 mg</i>	Tier 2	
<i>sirolimus tab 2 mg</i>	Tier 2	
<i>tacrolimus cap 0.5 mg</i>	Tier 2	
<i>tacrolimus cap 1 mg</i>	Tier 2	
<i>tacrolimus cap 5 mg</i>	Tier 2	
ZORTRESS TAB 0.5MG	Tier 4	
ZORTRESS TAB 0.25MG	Tier 4	
ZORTRESS TAB 0.75MG	Tier 4	
ZORTRESS TAB 1MG	Tier 4	
MISCELLANEOUS		
BEYFORTUS INJ 50/0.5ML	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
BEYFORTUS INJ 100MG/ML	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
VACCINES		
ABRYSVO INJ	Tier 0	
AREXVY INJ 120MCG	Tier 0	\$0 copay for members age 19 and older, otherwise not covered
BEXSERO INJ	Tier 0	
BOOSTRIX INJ	Tier 0	
CAPVAXIVE INJ 0.5ML	Tier 0	
COMIRNATY INJ 30/0.3ML	Tier 0	
COMIRNATY INJ 2024-25	Tier 0	
DENG VAXIA SUS	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
ENGERIX-B INJ 10/0.5ML	Tier 0	
ENGERIX-B INJ 20MCG/ML	Tier 0	
FLUAD INJ 2024-25	Tier 0	
FLUMIST NASA LIQ 2024-25	Tier 0	
GARDASIL 9 INJ	Tier 0	
HAVRIX INJ 720UNIT	Tier 0	
HAVRIX INJ 1440UNIT	Tier 0	

Drug Name	Drug Tier	Requirements/Limits
HIBERIX SOL 10MCG	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
INFANRIX INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
IPOL INJ INACTIVE	Tier 0	
JYNNEOS INJ	Tier 0	
KINRIX INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
MENQUADFI INJ	Tier 0	
MENVEO INJ	Tier 0	
MENVEO SOL	Tier 0	
MODERNA INJ 6MO-11Y	Tier 0	
MODERNA INJ 2024-25	Tier 0	
MRESVIA INJ 50MCG	Tier 0	\$0 copay for members age 19 and older, otherwise not covered
NOVAVAX INJ 2023-24	Tier 0	
NOVAVAX INJ 2024-25	Tier 0	
PENBRAYA INJ	Tier 0	
PENTACEL INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
PFIZER 5-11Y INJ 2024-25	Tier 0	
PFIZER 6M-4Y INJ 2024-25	Tier 0	
PNEUMOVAX 23 INJ 25/0.5	Tier 0	
PREHEVBRIO SUS 10MCG/ML	Tier 0	
PREVNAR 20 INJ	Tier 0	
PRIORIX INJ	Tier 0	
PROQUAD INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
QUADRACEL INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
QUADRACEL INJ 0.5ML	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
RECOMBIVA HB INJ 5MCG/0.5	Tier 0	
RECOMBIVA HB INJ 10MCG/ML	Tier 0	

Drug Name	Drug Tier	Requirements/Limits
ROTARIX SUS	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
ROTATEQ SOL	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
SHINGRIX INJ 50/0.5ML	Tier 0	\$0 copay for members age 19 and older, otherwise not covered
SPIKEVAX INJ 50/0.5ML	Tier 0	
SPIKEVAX INJ 2024-25	Tier 0	
TWINRIX INJ	Tier 0	\$0 copay for members age 18 and older, otherwise not covered
VAXELIS INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
VAXNEUVANCE INJ	Tier 0	

LAXATIVES

BULK LAXATIVES

CITRUCEL POW ORANGE	Tier 1	OTC
CITRUCEL TAB 500MG	Tier 1	OTC
<i>corn dextrin oral powder</i>	Tier 1	OTC
<i>fiber oral powder</i>	Tier 1	OTC
FIBERCON TAB 625MG	Tier 1	OTC
<i>Konsyl Daily Pow 28.3%</i>	Tier 1	OTC
<i>Naturl Fiber Pow 58.6%</i>	Tier 1	OTC
<i>Wal-Mucil Pow 43%</i>	Tier 1	OTC

LAXATIVE COMBINATIONS

<i>Easy-Lax Pls Tab 8.6-50mg</i>	Tier 1	OTC
<i>Gavilyte-C</i>	Tier 2	
<i>Gavilyte-G</i>	Tier 2	
PLENVU SOL	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered

LAXATIVES - MISCELLANEOUS

<i>Clearlax Pow</i>	Tier 1	OTC
GLYCERIN SUP 2GM	Tier 1	OTC

LUBRICANT LAXATIVES

<i>mineral oil</i>	Tier 1	OTC
--------------------	--------	-----

SALINE LAXATIVES

FLEET ENE ENEMA	Tier 1	OTC
<i>magnesium citrate soln</i>	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 120
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>Milk Of Magn Sus Frsh Mnt</i>	Tier 1	OTC
STIMULANT LAXATIVES		
<i>Ex-Lax Ultra Tab 5mg Ec</i>	Tier 1	OTC
<i>Gentle Laxat Sup 10mg</i>	Tier 1	OTC
<i>Senexon Liq 8.8mg/5</i>	Tier 1	OTC
<i>Senna Tab 8.6mg</i>	Tier 1	OTC
SURFACTANT LAXATIVES		
<i>Diecto Syp 60/15ml</i>	Tier 1	OTC
<i>docusate calcium cap 240 mg</i>	Tier 1	OTC
<i>docusate sodium cap 250 mg</i>	Tier 1	OTC
<i>docusate sodium liquid 150 mg/15ml</i>	Tier 1	OTC
<i>Stool Softnr Cap 100mg</i>	Tier 1	OTC
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
CAYA DPR	Tier 0	QL (1 every 300 days)
FEMCAP MIS 22MM	Tier 0	QL (1 every 300 days)
FEMCAP MIS 26MM	Tier 0	QL (1 every 300 days)
FEMCAP MIS 30MM	Tier 0	QL (1 every 300 days)
OMNIFLEX DPR	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 60	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 65	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 70	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 75	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 80	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 85	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 90	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 95	Tier 0	QL (1 every 300 days)
DIABETIC SUPPLIES		
ACCU-CHEK BLOOD GLUCOSE TEST KITS	Tier 3	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 25 days), OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 30 days), OTC
AUTOLET LITE KIT STARTER	Tier 1	OTC
BAYER MICRLT MIS LANC DVC	Tier 1	OTC
BLOOD GLUCOSE CALIBRATION SOLUTION	Tier 3	OTC
FINGERSTIX MIS LANCETS	Tier 1	OTC
FREESTY LIBR MIS 2 READER	Tier 3	
FREESTY LIBR MIS READER	Tier 3	
FREESTYLE MIS READER	Tier 3	
GLUCOSE URINE TEST STRIPS	Tier 4	OTC
INSULIN PEN NEEDLES	Tier 3	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
INSULIN PEN NEEDLES/SYRINGES	Tier 3	OTC
MULTISTIX 10 TES SG	Tier 1	OTC
URIN-TEK KIT	Tier 1	OTC
URINE GLUCOSE MONITORING SUPPLIES	Tier 4	OTC
URINE TEST STRIPS	Tier 4	OTC
DIAGNOSTIC TESTS		
ALBUSTIX TES	Tier 1	OTC
RELION KETON TES	Tier 1	OTC
URINE TEST STRIPS	Tier 1	OTC
MISC. DEVICES		
ALCOHOL SWAB PAD 70%	Tier 1	OTC
MISCELLANEOUS		
HUMATROPEN MIS FOR 6MG	Tier 3	OTC
HUMATROPEN MIS FOR 12MG	Tier 3	OTC
HUMATROPEN MIS FOR 24MG	Tier 3	OTC
NORDIPEN 5 MIS DEVICE	Tier 3	
NORDIPEN DEL MIS SYSTEM	Tier 3	OTC
PEDIATRIC RESPIRATORY MASK	Tier 3	OTC
PARENTERAL THERAPY SUPPLIES		
BULB IRR SYR MIS 60ML	Tier 1	OTC
HYPO NEEDLE MIS 23GX1"	Tier 1	OTC
HYPO NEEDLE MIS 25GX5/8"	Tier 1	OTC
INSULIN PEN NEEDLES/SYRINGES	Tier 1	OTC
3ML LUER LOC MIS 22GX1"	Tier 1	OTC
3ML LUER LOC MIS 25GX1"	Tier 1	OTC
3ML LUER LOC MIS 25GX5/8"	Tier 1	OTC
MONOJECT S/P MIS 35ML/REG	Tier 1	OTC
1ML SYRINGE MIS 25GX5/8"	Tier 1	OTC
3ML SYRINGE MIS LUER LOK	Tier 1	OTC
12ML SYRINGE MIS REG LUER	Tier 1	OTC
MINERALS & ELECTROLYTES		
CALCIUM		
CA CITRATE TAB 250MG	Tier 1	OTC
CA GLUCONATE TAB 50MG	Tier 1	OTC
CA LACTATE TAB 100MG	Tier 1	OTC
CALCI-CHEW CHW 1250MG	Tier 1	OTC
<i>Calcitrate Tab 950mg</i>	Tier 1	OTC
<i>Calcium 600 Tab</i>	Tier 1	OTC
<i>Calcium 600+d</i>	Tier 1	OTC
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)</i>	Tier 1	OTC
CALCIUM CIT TAB 1040MG	Tier 1	OTC
<i>calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)</i>	Tier 1	OTC
<i>calcium cit-vitamin d tab 315 mg-5 mcg(200 unit) (elem ca)</i>	Tier 1	OTC
<i>calcium citrate tab 950 mg (200 mg elemental ca)</i>	Tier 1	OTC
<i>Calcium Citrate-Vitamin D Tab 315 mg-250 unit</i>	Tier 1	OTC
CALCIUM GLUC TAB 500MG	Tier 1	OTC
CALCIUM LACT TAB 648MG	Tier 1	OTC
CALCIUM LACT TAB 750MG	Tier 1	OTC
CALCIUM SOFT CHW CHOCOLAT	Tier 1	OTC
<i>Calcium Soft Chw Mlk Choc</i>	Tier 1	OTC
CALCIUM TAB 333MG	Tier 1	OTC
CALCIUM/D3 WAF	Tier 1	OTC
<i>Calcium/d Chw 500-400</i>	Tier 1	OTC
CALTRATE +D3 TAB 600-800	Tier 1	OTC
<i>Os-Cal + D3 Tab 500-200</i>	Tier 1	OTC
<i>Oyst Shell/d Tab 500mg</i>	Tier 1	OTC
MAGNESIUM		
<i>magnesium oxide tab 250 mg (mg supplement)</i>	Tier 1	OTC
MULTIVITAMINS		
B-COMPLEX VITAMINS		
<i>b-complex vitamin tab</i>	Tier 1	OTC
B-COMPLEX W/ C		
<i>Bee Zee Tab</i>	Tier 1	OTC
B-COMPLEX W/ FOLIC ACID		
<i>B-100 Complx Tab</i>	Tier 1	OTC
B-COMPLEX TAB C/FA/BIO	Tier 1	OTC
<i>Kobee Tab</i>	Tier 1	OTC
<i>Reno Cap</i>	Tier 1	OTC
MULTIPLE VITAMINS W/ IRON		
<i>Daily-Vite/ Tab Iron</i>	Tier 1	OTC
MULTIPLE VITAMINS W/ MINERALS		
CENTRUM CHW VITAMINT	Tier 1	OTC
CENTRUM LIQ	Tier 1	OTC
CENTRUM TAB SILVER	Tier 1	OTC
MULTIVITAMINS		
<i>Therapeutic Tab</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
PED MULTIPLE VITAMINS W/ MINERALS		
CENTRUM KIDS CHW	Tier 1	OTC
<i>Gummy Vit/ Chw Minerals</i>	Tier 1	OTC
HEALTHY KIDS CHW GUMMIES	Tier 1	OTC
<i>Multivitamin Dro Pediatr</i>	Tier 1	OTC
NANOVM T/F POW	Tier 1	OTC
PED MV W/ IRON		
POLY-VI-SOL SOL IRON	Tier 1	OTC
<i>Vite/iron Chw Children</i>	Tier 1	OTC
PEDIATRIC MULTIPLE VITAMINS		
<i>Chewabl Vite Chw Childrns</i>	Tier 1	OTC
POLY-VI-SOL SOL 50MG/ML	Tier 1	OTC
PEDIATRIC VITAMINS		
TRI-VI-SOL SOL A/C/D	Tier 1	OTC
<i>Tri-Vitamin Dro</i>	Tier 1	OTC
TRI-VITAMIN DRO	Tier 1	OTC
PRENATAL VITAMINS		
ALIVE PRENAT CHW DAILY SU	Tier 3	OTC
ATABEX CHW PRENATAL	Tier 3	OTC
BE WELL PAK ROUNDED	Tier 3	OTC
BRAINSTRONG MIS PRENATAL	Tier 3	OTC
CADEAU DHA CAP	Tier 3	OTC
CALNA TAB	Tier 3	OTC
CENTRUM SPEC PAK PRENATAL	Tier 3	OTC
COMP PRNATAL MIS DHA	Tier 3	OTC
CVS PRENATAL CHW GUMMY	Tier 3	OTC
<i>Elite-Ob</i>	Tier 2	
ENFAMIL MIS EXPECTA	Tier 3	OTC
EZFE FORTE CAP	Tier 3	OTC
KPN PRENATAL TAB	Tier 3	OTC
MTERYTI TAB	Tier 3	OTC
MTERYTI TAB FOLIC 5	Tier 3	OTC
NUTRICION TAB PORVIDA	Tier 3	OTC
NUTRIENTS TAB PRENATAL	Tier 3	OTC
OBTREX DHA PAK	Tier 3	OTC
OBTREX TAB	Tier 3	OTC
ONE A DAY CAP PRENATAL	Tier 3	OTC
ONE A DAY MIS PRENATAL	Tier 3	OTC
PERRY PRENAT CAP	Tier 3	OTC
PRENATAL 1 CAP	Tier 3	OTC
PRENATAL CAP FORMULA	Tier 3	OTC
PRENATAL CAP OMEGA-3	Tier 3	OTC

Drug Name	Drug Tier	Requirements/Limits
PRENATAL DHA PAK MULTI	Tier 3	OTC
PRENATAL FRM TAB A-FREE	Tier 3	OTC
PRENATAL GUM CHW 0.4-32.5	Tier 3	OTC
PRENATAL MUL CAP +DHA	Tier 3	OTC
PRENATAL MUL CAP DHA	Tier 3	OTC
PRENATAL MULTIVITAMINS	Tier 1	OTC
PRENATAL TAB	Tier 3	OTC
PRENATAL TAB 27-0.8MG	Tier 1	OTC
PRENATAL TAB COMPLETE	Tier 3	OTC
PRENATAL TAB FORMULA	Tier 3	OTC
PRENATAL+DHA MIS	Tier 3	OTC
PRENATL MULT CAP + DHA	Tier 3	OTC
SM ONE DAILY MIS PRENATAL	Tier 1	OTC
STUART ONE CAP	Tier 3	OTC
THERANATAL CAP ONE	Tier 3	OTC
THERANATAL MIS COMPLETE	Tier 3	OTC
THERANATAL PAK OVAVITE	Tier 3	OTC
THERANATAL TAB 27-1	Tier 3	OTC
VINATE CARE CHW 40-1MG	Tier 3	OTC

VITAMIN MIXTURES

<i>cod liver oil cap</i>	Tier 1	OTC
--------------------------	--------	-----

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTE MIXTURES

<i>Rehydralyte Sol</i>	Tier 1	OTC
------------------------	--------	-----

ELECTROLYTES

<i>Effer-K</i>	Tier 2	
<i>Klor-Con 8</i>	Tier 2	
<i>Klor-Con 10</i>	Tier 2	
<i>Klor-Con M15</i>	Tier 2	
MAGNESIUM GL TAB 500MG	Tier 1	OTC
<i>magnesium gluconate tab 27.5 mg (elemental mg)</i>	Tier 1	OTC
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	Tier 1	OTC
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	Tier 2	
<i>magnesium sulfate inj 50%</i>	Tier 2	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	Tier 2	
<i>Magnesium Tab 250mg</i>	Tier 1	OTC
<i>Monoject Sodium Chloride</i>	Tier 2	
PHOS-NAK POW CONCENTR	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride cap er 8 meq</i>	Tier 2	
<i>potassium chloride cap er 10 meq</i>	Tier 2	
<i>potassium chloride inj 2 meq/ml</i>	Tier 2	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	Tier 2	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	Tier 2	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	Tier 2	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	Tier 2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	Tier 2	
<i>potassium chloride tab er 10 meq</i>	Tier 2	
<i>potassium chloride tab er 15 meq</i>	Tier 2	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	Tier 2	
SLOW-MAG TAB	Tier 1	OTC
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	Tier 2	
<i>sodium chloride iv soln 0.9%</i>	Tier 2	
<i>sodium chloride iv soln 0.45%</i>	Tier 2	
<i>sodium chloride iv soln 3%</i>	Tier 2	
<i>sodium chloride iv soln 5%</i>	Tier 2	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	Tier 2	
<i>sodium chloride tab 1 gm</i>	Tier 1	OTC
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	Tier 2	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	Tier 2	
LIPIDS		
MCT OIL	Tier 1	OTC
MINERAL COMBINATIONS		
CALC CHEWABL CHW 600 PLUS	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
MISC. NUTRITIONAL SUBSTANCES		
<i>Omega-3 Fish Cap 1200mg</i>	Tier 1	OTC
<i>Sea-Omega 50 Cap 1000mg</i>	Tier 1	OTC
PRENATAL VITAMINS		
<i>Inatal Gt</i>	Tier 2	
<i>Pnv-Dha</i>	Tier 2	
<i>Pnv-Select</i>	Tier 2	
<i>Prenatal 19</i>	Tier 2	
<i>Trinate</i>	Tier 2	
PROTEINS		
<i>L-CARNITINE TAB 500MG</i>	Tier 1	OTC
<i>levocarnitine cap 250 mg</i>	Tier 1	OTC
TRACE MINERALS		
<i>Orazinc Cap 220mg</i>	Tier 1	OTC
<i>selenium tab 200 mcg</i>	Tier 1	OTC
<i>zinc gluconate tab 50 mg (elemental zn)</i>	Tier 1	OTC
VITAMINS		
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	Tier 2	
<i>folic acid cap 0.8 mg</i>	Tier 0	QL (100 caps every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
<i>folic acid tab 1 mg</i>	Tier 2	
<i>folic acid tab 400 mcg</i>	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
<i>folic acid tab 800 mcg</i>	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
<i>Multi-Vitamin/fluoride Dr</i>	Tier 2	
<i>Multi-Vitamin/fluoride/ir</i>	Tier 2	
<i>Multivitamin/fluoride</i>	Tier 2	
<i>phytonadione tab 5 mg</i>	Tier 2	
<i>Tri-Vite/fluoride</i>	Tier 2	
<i>vitamin b-12 injection</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC		
ANTI-INFECTIVE/ANTI-INFLAMMATORY		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	Tier 2	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	Tier 2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	Tier 2	
<i>neomycin-polymyxin-hc ophth susp</i>	Tier 2	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	Tier 2	
TOBRADEX OIN 0.3-0.1%	Tier 3	
TOBRADEX ST SUS 0.3-0.05	Tier 3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	Tier 2	
ZYLET SUS 0.5-0.3%	Tier 4	
ANTI-INFECTIVES		
AZASITE SOL 1%	Tier 3	
<i>bacitracin ophth oint 500 unit/gm</i>	Tier 2	
<i>bacitracin-polymyxin b ophth oint</i>	Tier 2	
BESIVANCE SUS 0.6%	Tier 4	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	Tier 2	
<i>erythromycin ophth oint 5 mg/gm</i>	Tier 2	
<i>gatifloxacin ophth soln 0.5%</i>	Tier 2	
<i>gentamicin sulfate ophth soln 0.3%</i>	Tier 2	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	Tier 2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	Tier 2	
NATACYN SUS 5% OP	Tier 3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	Tier 2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	Tier 2	
<i>ofloxacin ophth soln 0.3%</i>	Tier 2	
Polycin	Tier 2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	Tier 2	
<i>sulfacetamide sodium ophth oint 10%</i>	Tier 2	
<i>sulfacetamide sodium ophth soln 10%</i>	Tier 2	
<i>tobramycin ophth soln 0.3%</i>	Tier 2	
<i>trifluridine ophth soln 1%</i>	Tier 2	
ZIRGAN GEL 0.15%	Tier 4	

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFLAMMATORIES		
ACUVAIL SOL 0.45%	Tier 3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	Tier 2	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	Tier 2	
<i>diclofenac sodium ophth soln 0.1%</i>	Tier 2	
<i>difluprednate ophth emulsion 0.05%</i>	Tier 2	
<i>flurbiprofen sodium ophth soln 0.03%</i>	Tier 2	
ILEVRO DRO 0.3% OP	Tier 3	
<i>ketorolac tromethamine ophth soln 0.4%</i>	Tier 2	
<i>ketorolac tromethamine ophth soln 0.5%</i>	Tier 2	
<i>loteprednol etabonate ophth susp 0.5%</i>	Tier 2	
NEVANAC SUS 0.1% OP	Tier 3	
PRED SOD PHO SOL 1% OP	Tier 3	
<i>prednisolone acetate ophth susp 1%</i>	Tier 2	
ANTIALLERGICS		
ALOCRI SOL 2%	Tier 4	
ALOMIDE SOL 0.1% OP	Tier 4	
<i>azelastine hcl ophth soln 0.05%</i>	Tier 2	
<i>bepotastine besilate ophth soln 1.5%</i>	Tier 2	
<i>cromolyn sodium ophth soln 4%</i>	Tier 2	
<i>epinastine hcl ophth soln 0.05%</i>	Tier 2	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	Tier 2	
ZADITOR DRO 0.035%OP	Tier 1	OTC
ZERVIA DRO 0.24%	Tier 4	
ANTIGLAUCOMA BETA-BLOCKERS		
<i>betaxolol hcl ophth soln 0.5%</i>	Tier 2	
BETIMOL SOL 0.5%	Tier 4	
BETIMOL SOL 0.25%	Tier 4	
BETOPTIC-S SUS 0.25% OP	Tier 3	
<i>carteolol hcl ophth soln 1%</i>	Tier 2	
<i>levobunolol hcl ophth soln 0.5%</i>	Tier 2	
<i>timolol maleate ophth gel forming soln 0.5%</i>	Tier 2	
<i>timolol maleate ophth gel forming soln 0.25%</i>	Tier 2	
<i>timolol maleate ophth soln 0.5%</i>	Tier 2	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	Tier 2	
<i>timolol maleate ophth soln 0.25%</i>	Tier 2	
<i>timolol ophth soln 0.5%</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
ANTIGLAUCOMA COMBINATION AGENTS		
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	Tier 2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	Tier 2	
SIMBRINZA SUS 1-0.2%	Tier 3	
ARTIFICIAL TEARS AND LUBRICANTS		
<i>Artifi Tears Sol 1.4% Op</i>	Tier 1	OTC
MOISTURE EYE DRO	Tier 1	OTC
REFRESH LIQU DRO 1% OP	Tier 1	OTC
REFRESH OPTI DRO 0.5-0.9%	Tier 1	OTC
<i>Refresh P.m. Oin Op</i>	Tier 1	OTC
REFRESH TEAR DRO 0.5% OP	Tier 1	OTC
<i>Systane Dro Contacts</i>	Tier 1	OTC
SYSTANE SOL	Tier 1	OTC
TEARS NATURA OIN PM	Tier 1	OTC
<i>Tears Natura Sol Free Op</i>	Tier 1	OTC
CARBONIC ANHYDRASE INHIBITORS		
<i>brinzolamide ophth susp 1%</i>	Tier 2	
<i>dorzolamide hcl ophth soln 2%</i>	Tier 2	
DRY EYE DISEASE		
RESTASIS EMU 0.05% OP	Tier 2	
RESTASIS MUL EMU 0.05% OP	Tier 3	Multi-dose vial remains on preferred brand tier
MISCELLANEOUS		
<i>atropine sulfate ophth soln 1%</i>	Tier 2	
CYSTARAN SOL 0.44%	Tier 6	PA, QL (4 bottles every 28 days)
<i>phenylephrine hcl ophth soln 2.5%</i>	Tier 2	
<i>phenylephrine hcl ophth soln 10%</i>	Tier 2	
PHOSPHOLINE SOL 0.125%OP	Tier 4	
<i>pilocarpine hcl ophth soln 1%</i>	Tier 2	
<i>proparacaine hcl ophth soln 0.5%</i>	Tier 2	
<i>sodium chloride hypertonic ophth oint 5%</i>	Tier 1	OTC
<i>sodium chloride hypertonic ophth soln 5%</i>	Tier 1	OTC
<i>tropicamide ophth soln 0.5%</i>	Tier 2	
<i>tropicamide ophth soln 1%</i>	Tier 2	
OPHTHALMIC DECONGESTANTS		
<i>Eye Drops Sol 0.05% Op</i>	Tier 1	OTC
NAPHCON-A SOL OP	Tier 1	OTC
OPCON-A SOL OP	Tier 1	OTC
<i>Relief Eye Sol Drops</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>Sm Eye Dro</i>	Tier 1	OTC
PROSTAGLANDINS		
<i>latanoprost ophth soln 0.005%</i>	Tier 2	
LUMIGAN SOL 0.01% OP	Tier 3	ST; PA**
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	Tier 2	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	Tier 2	
SYMPATHOMIMETICS		
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	Tier 2	
<i>brimonidine tartrate ophth soln 0.1%</i>	Tier 2	
<i>brimonidine tartrate ophth soln 0.2%</i>	Tier 2	
<i>brimonidine tartrate ophth soln 0.15%</i>	Tier 2	
IOPIDINE SOL 1% OP	Tier 4	
OTHER		
IRRIGATION SOLUTIONS		
<i>Physiolyte</i>	Tier 2	
<i>Physiosol Irrigation</i>	Tier 2	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
SMOKING DETERRENTS		
<i>Goodsense Nicotine Polacr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>Nicotine Step 3</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 7 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 14 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 21 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
NICOTROL INH	Tier 0	QL (max 168 days every year); \$0 limited to 2 treatment cycles/year
NICOTROL NS SPR 10MG/ML	Tier 0	QL (max 168 days every year); \$0 limited to 2 treatment cycles/year
RESPIRATORY		
ALPHA-1 ANTITRYPSIN DEFICIENCY AGENTS		
PROLASTIN-C INJ 1000MG	Tier 5	PA

Drug Name	Drug Tier	Requirements/Limits
ANAPHYLAXIS TREATMENT AGENTS		
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	Tier 2	QL (4 auto-injectors every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	Tier 2	QL (4 auto-injectors every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	Tier 2	QL (4 auto-injectors every 30 days); (generic of Adrenaclick)
EPIPEN 2-PAK INJ 0.3MG	Tier 3	QL (4 auto-injectors every 30 days)
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
BEVESPI AER 9-4.8MCG	Tier 3	QL (1 package every 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	Tier 2	QL (6 boxes every 30 days)
STIOLTO AER 2.5-2.5	Tier 3	QL (1 package every 30 days)
ANTICHOLINERGIC/BETA AGONIST/STEROID COMBINATIONS		
BREZTRI AERO AER SPHERE	Tier 3	QL (1 package every 30 days)
TRELEGY AER 100MCG	Tier 3	QL (1 package every 30 days)
TRELEGY AER 200MCG	Tier 3	QL (1 package every 30 days)
ANTICHOLINERGICS		
<i>ipratropium bromide inhal soln 0.02%</i>	Tier 2	QL (5 boxes every 30 days)
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	Tier 2	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	Tier 2	
SPIRIVA AER 1.25MCG	Tier 3	QL (1 package every 30 days)
SPIRIVA SPR 2.5MCG	Tier 3	QL (1 package every 30 days)
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	Tier 2	QL (1 package every 30 days)
ANTI-HISTAMINE COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
ANTI-HISTAMINES		
Aller-Ease Tab 180mg	Tier 1	OTC
Allergy Rel Liq 12.5/5ml	Tier 1	OTC
Allergy Relf Cap 25mg	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 132
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ALLERGY ULTR TAB 25MG	Tier 1	OTC
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	Tier 2	QL (2 bottles every 30 days)
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	Tier 2	QL (2 bottles every 30 days)
BENADRYL ALL LIQ 12.5/5ML	Tier 1	OTC
<i>carbinoxamine maleate soln 4 mg/5ml</i>	Tier 2	
<i>carbinoxamine maleate tab 4 mg</i>	Tier 2	
<i>Cetirizine Tab 5mg</i>	Tier 1	OTC
CHLOR-TRIMET SYP 2MG/5ML	Tier 1	OTC
CHLOR-TRIMET TAB 4MG	Tier 1	OTC
CHLOR-TRIMET TAB 12MG CR	Tier 1	OTC
CLARITIN RDT TAB 5MG	Tier 1	OTC
<i>clemastine fumarate tab 2.68 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>ciproheptadine hcl syrup 2 mg/5ml</i>	Tier 2	
<i>ciproheptadine hcl tab 4 mg</i>	Tier 2	
<i>desloratadine tab 5 mg</i>	Tier 2	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	Tier 2	
<i>desloratadine tab orally disintegrating 5 mg</i>	Tier 2	
<i>Diphenhydram Cap 50mg</i>	Tier 1	OTC
<i>diphenhydramine hcl inj 50 mg/ml</i>	Tier 2	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 10 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine pamoate cap 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 133
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine pamoate cap 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine pamoate cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	Tier 2	
<i>levocetirizine dihydrochloride tab 5 mg</i>	Tier 1	OTC
<i>loratadine tab 10 mg</i>	Tier 1	OTC
<i>olopatadine hcl nasal soln 0.6%</i>	Tier 2	QL (1 container every 30 days)
<i>Quenalin Syp 12.5/5ml</i>	Tier 1	OTC
<i>Ryclora</i>	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>TAVIST TAB 1.34MG</i>	Tier 1	OTC
<i>Triaminic Tab 10mg</i>	Tier 1	OTC
<i>Wal-Fex Chld Sus 30mg/5ml</i>	Tier 1	OTC
<i>Wal-Itin Sol 5mg/5ml</i>	Tier 1	OTC
<i>Wal-Zyr Chw 5mg</i>	Tier 1	OTC
<i>Wal-Zyr Chw 10mg</i>	Tier 1	OTC
<i>ZYRTEC ALLGY TAB 10MG</i>	Tier 1	OTC
<i>ZYRTEC CHILD SOL 5MG/5ML</i>	Tier 1	OTC

BETA AGONISTS

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	Tier 2	QL (2 inhalers every 30 days)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	Tier 2	QL (120 vials every 30 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 2	QL (5 boxes every 30 days)
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	Tier 2	QL (5 boxes every 30 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 2	QL (5 boxes every 30 days)
<i>albuterol sulfate syrup 2 mg/5ml</i>	Tier 2	
<i>albuterol sulfate tab 2 mg</i>	Tier 2	
<i>albuterol sulfate tab 4 mg</i>	Tier 2	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	Tier 2	QL (60 vials every 30 days)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	Tier 2	QL (60 vials every 30 days)
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	Tier 2	QL (45 mL every 30 days)
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	Tier 2	QL (2 inhalers every 30 days)
SEREVENT DIS AER 50MCG	Tier 3	QL (1 package every 30 days)
STRIVERDI AER 2.5MCG	Tier 3	QL (1 package every 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	Tier 2	
<i>terbutaline sulfate tab 5 mg</i>	Tier 2	
COLD/COUGH		
<i>benzonatate cap 100 mg</i>	Tier 2	
<i>benzonatate cap 200 mg</i>	Tier 2	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 2	QL (60 mL every day), OTC; Subject to initial 7-day limit
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	Tier 2	QL (10 mL every day); Subject to initial 7-day limit
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	Tier 2	QL (6 tabs every day); Subject to initial 7-day limit
<i>Hydromet</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>Promethazine Vc</i>	Tier 2	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	Tier 2	
CYSTIC FIBROSIS		
CAYSTON INH 75MG	Tier 5	PA, QL (84 vials every 28 days)
KALYDECO GRA 5.8MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO GRA 13.4MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO PAK 25MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO PAK 50MG	Tier 5	PA, QL (56 packets every 28 days)

Drug Name	Drug Tier	Requirements/Limits
KALYDECO PAK 75MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO TAB 150MG	Tier 5	PA, QL (56 tabs every 28 days); carton consists of 56 tablets
ORKAMBI GRA 75-94MG	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI GRA 100-125	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI GRA 150-188	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI TAB 100-125	Tier 5	PA, QL (112 tabs every 28 days)
ORKAMBI TAB 200-125	Tier 5	PA, QL (112 tabs every 28 days)
SYMDEKO TAB 50-75MG	Tier 5	PA, QL (56 tabs every 28 days)
SYMDEKO TAB 100-150	Tier 5	PA, QL (56 tabs every 28 days)
<i>tobramycin nebu soln 300 mg/4ml</i>	Tier 5	PA, QL (224 mL every 28 days)
<i>tobramycin nebu soln 300 mg/5ml</i>	Tier 5	PA, QL (280 mL every 28 days)
TRIKAFTA PAK 59.5MG	Tier 5	PA, QL (56 packets every 28 days)
TRIKAFTA PAK 75MG	Tier 5	PA, QL (56 packets every 28 days)
TRIKAFTA TAB	Tier 5	PA, QL (84 tabs every 28 days)

LEUKOTRIENE MODIFIERS

<i>zileuton tab er 12hr 600 mg</i>	Tier 4
------------------------------------	--------

LEUKOTRIENE RECEPTOR ANTAGONISTS

<i>montelukast sodium chew tab 4 mg (base equiv)</i>	Tier 2
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	Tier 2
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	Tier 2
<i>montelukast sodium tab 10 mg (base equiv)</i>	Tier 2
<i>zafirlukast tab 10 mg</i>	Tier 2
<i>zafirlukast tab 20 mg</i>	Tier 2

MAST CELL STABILIZERS

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	Tier 2	QL (2 boxes every 30 days)
--	--------	----------------------------

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	Tier 2	
<i>acetylcysteine inhal soln 20%</i>	Tier 2	
<i>roflumilast tab 250 mcg</i>	Tier 2	PA
<i>roflumilast tab 500 mcg</i>	Tier 2	PA
<i>sodium chloride soln nebu 0.9%</i>	Tier 2	
<i>sodium chloride soln nebu 3%</i>	Tier 2	
<i>sodium chloride soln nebu 7%</i>	Tier 2	
<i>sodium chloride soln nebu 10%</i>	Tier 2	
NASAL AGENTS - MISC.		
<i>Afrin Saline Spr 0.65%</i>	Tier 1	OTC
AYR SALINE KIT RINSE	Tier 1	OTC
NASAL ANTIALLERGY		
NASALCROM SPR 5.2/ACT	Tier 1	OTC
NASAL STEROIDS		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	Tier 2	QL (3 containers every 30 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	Tier 1	OTC
<i>fluticasone propionate nasal susp 50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
<i>mometasone furoate nasal susp 50 mcg/act</i>	Tier 2	QL (2 packages every 30 days)
OMNARIS SPR	Tier 4	QL (1 package every 30 days)
<i>Rhinocort Sus Allergy</i>	Tier 1	OTC
<i>triamcinolone acetanide nasal aerosol suspension 55 mcg/act</i>	Tier 2	QL (1 package every 30 days), OTC
PULMONARY FIBROSIS AGENTS		
OFEV CAP 100MG	Tier 5	PA, QL (60 caps every 30 days)
OFEV CAP 150MG	Tier 5	PA, QL (60 caps every 30 days)
<i>pirfenidone cap 267 mg</i>	Tier 5	PA, QL (270 caps every 30 days)
<i>pirfenidone tab 267 mg</i>	Tier 5	PA, QL (270 tabs every 30 days)
<i>pirfenidone tab 801 mg</i>	Tier 5	PA, QL (90 tabs every 30 days)
RESPIRATORY THERAPY SUPPLIES		
ADULT RESPIRATORY MASK	Tier 3	
HOLD CHAMBER MIS MEDIUM	Tier 3	OTC
PEDIATRIC RESPIRATORY MASK	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
SEVERE ASTHMA AGENTS		
DUPIXENT INJ 200MG	Tier 5	PA, QL (2 pens every 28 days); Indicated for Asthma and Atopic Dermatitis
DUPIXENT INJ 300/2ML	Tier 5	PA, QL (4 pens every 28 days); Indicated for Asthma and Atopic Dermatitis
FASENRA INJ 10MG/0.5	Tier 5	PA, QL (1 syringe every 56 days)
FASENRA INJ 30MG/ML	Tier 5	PA, QL (1 syringe every 28 days)
FASENRA PEN INJ 30MG/ML	Tier 5	PA, QL (1 auto-injector every 28 days)
XOLAIR INJ 75/0.5	Tier 5	PA, QL (2 pens every 28 days)
XOLAIR INJ 75/0.5	Tier 5	PA, QL (2 syringes every 28 days)
XOLAIR INJ 150MG/ML	Tier 5	PA, QL (8 pens every 28 days)
XOLAIR INJ 150MG/ML	Tier 5	PA, QL (8 syringes every 28 days)
XOLAIR INJ 300/2ML	Tier 5	PA, QL (4 pens every 28 days)
XOLAIR INJ 300/2ML	Tier 5	PA, QL (4 syringes every 28 days)
XOLAIR SOL 150MG	Tier 5	PA, QL (8 vials every 28 days)
STEROID INHALANTS		
ALVESCO AER 80MCG	Tier 4	QL (3 packages every 30 days)
ALVESCO AER 160MCG	Tier 4	QL (2 packages every 30 days)
ARNUITY ELPT INH 50MCG	Tier 3	QL (1 package every 30 days)
ARNUITY ELPT INH 100MCG	Tier 3	QL (1 package every 30 days)
ARNUITY ELPT INH 200MCG	Tier 3	QL (1 package every 30 days)
ASMANEX HFA AER 50MCG	Tier 3	QL (1 package every 30 days)
ASMANEX HFA AER 100 MCG	Tier 3	QL (1 package every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX HFA AER 200 MCG	Tier 3	QL (1 package every 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	Tier 2	QL (2 boxes every 30 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	Tier 2	QL (3 boxes every 30 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	Tier 2	QL (1 box every 30 days)
STEROID/BETA-AGONIST COMBINATIONS		
AIRSUPRA AER 90-80MCG	Tier 3	QL (3 packages every 30 days)
BREO ELLIPTA INH 50-25MCG	Tier 3	QL (1 package every 30 days)
BREO ELLIPTA INH 100-25	Tier 3	QL (1 package every 30 days)
BREO ELLIPTA INH 200-25	Tier 3	QL (1 package every 30 days)
<i>Breyna</i>	Tier 2	QL (3 packages every 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	Tier 2	QL (3 packages every 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	Tier 2	QL (3 packages every 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
SYMPATHOMIMETIC DECONGESTANTS		
AFRIN CHILD SPR 0.25%	Tier 1	OTC
<i>Gnp Suphedrn Liq 15mg/5ml</i>	Tier 1	OTC
LITTLE REMED DRO 0.125%	Tier 1	OTC
NEO-SYNEPHRI SPR 0.5%	Tier 1	OTC
NEO-SYNEPHRI SPR 0.05%	Tier 1	OTC
<i>Pseudoephedrine Hcl Tab 60 mg</i>	Tier 1	OTC
<i>Sudafed 12hr Tab 120mg Cr</i>	Tier 1	OTC
SUDAFED CONG TAB 30MG	Tier 1	OTC
SUDAFED PE TAB SIN CONG	Tier 1	OTC
<i>4-Way Fast Spr 1%</i>	Tier 1	OTC
XANTHINES		
<i>aminophylline inj 25 mg/ml</i>	Tier 2	
<i>theophylline elixir 80 mg/15ml</i>	Tier 2	
<i>theophylline soln 80 mg/15ml</i>	Tier 2	
<i>theophylline tab er 12hr 300 mg</i>	Tier 2	
<i>theophylline tab er 12hr 450 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>theophylline tab er 24hr 400 mg</i>	Tier 2	
<i>theophylline tab er 24hr 600 mg</i>	Tier 2	

TOPICAL

ANALGESICS - TOPICAL

EUCERIN CALM LOT 0.1%	Tier 1	OTC
-----------------------	--------	-----

ANTI-HISTAMINES-TOPICAL

<i>Anti-Itch Gel 2% Ex St</i>	Tier 1	OTC
<i>Sb Itch Relf Spr 2%</i>	Tier 1	OTC

ANTISEBORRHEIC PRODUCTS

SEBULEX SHA	Tier 1	OTC
-------------	--------	-----

ANTISEPTICS & DISINFECTANTS

HIBICLENS SOL 4%	Tier 1	OTC
NUPREP 5% SOL POV-IODI	Tier 1	OTC
POVIDONE-IOD SOL 0.75%	Tier 1	OTC
POVIDONE-IOD SOL 1%	Tier 1	OTC
<i>Povidone-Iod Sol 7.5%</i>	Tier 1	OTC
<i>povidone-iodine oint 10%</i>	Tier 1	OTC
<i>povidone-iodine soln 10%</i>	Tier 1	OTC

DERMATOLOGY, ACNE

<i>Acne Cleansi Bar 10%</i>	Tier 1	OTC
ACNE MEDICAT LOT 5%	Tier 1	OTC
ACNE MEDICAT LOT 10%	Tier 1	OTC
<i>adapalene cream 0.1%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene gel 0.1%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene gel 0.3%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	Tier 2	
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	Tier 2	
<i>benzoyl peroxide gel 2.5%</i>	Tier 1	OTC
<i>Benzoyl Peroxide Gel 5%</i>	Tier 1	OTC
<i>Benzoyl Peroxide Gel 10%</i>	Tier 1	OTC
<i>Benzoyl Peroxide Liq 5%</i>	Tier 1	OTC
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	Tier 2	QL (47g every 30 days)
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	Tier 2	QL (45g every 30 days)
<i>clindamycin phosphate foam 1%</i>	Tier 2	
<i>clindamycin phosphate gel 1%</i>	Tier 2	QL (75g every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate lotion 1%</i>	Tier 2	QL (60mL every 30 days)
<i>clindamycin phosphate soln 1%</i>	Tier 2	QL (60mL every 30 days)
<i>clindamycin phosphate swab 1%</i>	Tier 2	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	Tier 2	QL (50g every 30 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	Tier 2	QL (50g every 30 days)
<i>Ery</i>	Tier 2	
<i>erythromycin gel 2%</i>	Tier 2	QL (60g every 30 days)
<i>erythromycin soln 2%</i>	Tier 2	QL (60mL every 30 days)
<i>isotretinoin cap 10 mg</i>	Tier 2	PA
<i>isotretinoin cap 20 mg</i>	Tier 2	PA
<i>isotretinoin cap 30 mg</i>	Tier 2	PA
<i>isotretinoin cap 40 mg</i>	Tier 2	PA
<i>Panoxyl Wash Liq 10%</i>	Tier 1	OTC
<i>PANOXYL-4 LIQ CREM WSH</i>	Tier 1	OTC
<i>Spot Acne Cre 2.5%</i>	Tier 1	OTC
<i>sulfacetamide sodium lotion 10% (acne)</i>	Tier 2	
<i>tretinoin cream 0.1%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.05%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.025%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.01%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.05%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.025%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere gel 0.1%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere gel 0.04%</i>	Tier 2	PA; PA applies for members age 35 and older
DERMATOLOGY, ACTINIC KERATOSIS		
<i>fluorouracil cream 5%</i>	Tier 2	
<i>fluorouracil soln 2%</i>	Tier 2	
<i>fluorouracil soln 5%</i>	Tier 2	
<i>imiquimod cream 5%</i>	Tier 2	
DERMATOLOGY, ANTIBIOTICS		
<i>bacitracin oint 500 unit/gm</i>	Tier 1	OTC
<i>bacitracin zinc oint 500 unit/gm</i>	Tier 1	OTC
<i>gentamicin sulfate cream 0.1%</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate oint 0.1%</i>	Tier 2	
IV PREP WIPE PAD	Tier 3	OTC
<i>mupirocin oint 2%</i>	Tier 2	QL (30g every 30 days)
NEOSPORIN CRE PLUS	Tier 1	OTC
NEOSPORIN OIN ORIGINAL	Tier 1	OTC
<i>Neosporin+pn Oin Relf Max</i>	Tier 1	OTC
POLYSPORIN OIN	Tier 1	OTC
<i>silver sulfadiazine cream 1%</i>	Tier 2	
Ssd	Tier 2	
SULFAMYLON CRE 85MG/GM	Tier 4	
XEPI CRE 1%	Tier 4	PA, QL (30g every 30 days)

DERMATOLOGY, ANTIFUNGALS

<i>Anti-Fungal Pow 1%</i>	Tier 1	OTC
<i>ciclopirox gel 0.77%</i>	Tier 2	QL (120g every 30 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	Tier 2	QL (120g every 30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	Tier 2	QL (120 mL every 30 days)
<i>ciclopirox shampoo 1%</i>	Tier 2	QL (120 mL every 30 days)
<i>ciclopirox solution 8%</i>	Tier 2	
<i>clotrimazole cream 1%</i>	Tier 2	QL (120g every 30 days)
<i>clotrimazole soln 1%</i>	Tier 2	QL (120 mL every 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	Tier 2	QL (60g every 30 days)
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	Tier 2	QL (60 mL every 30 days)
<i>Desenex Cre 1%</i>	Tier 1	OTC
<i>econazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)
ERTACZO CRE 2%	Tier 4	QL (60g every 30 days)
JUBLIA SOL 10%	Tier 4	PA, QL (4mL every 30 days)
<i>ketoconazole cream 2%</i>	Tier 2	QL (120g every 30 days)
<i>Lamisil Af Aer 1%</i>	Tier 1	OTC
LAMISIL AT CRE 1%	Tier 1	OTC
LOTRIMIN ULT CRE 1%	Tier 1	OTC
<i>luliconazole cream 1%</i>	Tier 4	QL (60g every 30 days)
<i>Miconazole Cre 2%</i>	Tier 1	OTC
<i>naftifine hcl cream 1%</i>	Tier 2	QL (60g every 30 days)
<i>naftifine hcl cream 2%</i>	Tier 2	QL (60g every 30 days)
NIZORAL A-D SHA 1%	Tier 1	OTC
<i>Nyamyc</i>	Tier 2	QL (120g every 30 days)
<i>nystatin cream 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin oint 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin topical powder 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	Tier 2	QL (60g every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	Tier 2	QL (60g every 30 days)
<i>Nystop</i>	Tier 2	QL (120g every 30 days)
<i>oxiconazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)
<i>sulconazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)
<i>sulconazole nitrate solution 1%</i>	Tier 2	QL (60 mL every 30 days)
<i>TINACTIN CRE 1%</i>	Tier 1	OTC
<i>tolnaftate soln 1%</i>	Tier 1	OTC
<i>Triple Paste Oin Af 2%</i>	Tier 1	OTC
DERMATOLOGY, ANTIPRURITIC		
<i>doxepin hcl cream 5%</i>	Tier 4	
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	Tier 2	
<i>acitretin cap 17.5 mg</i>	Tier 2	
<i>acitretin cap 25 mg</i>	Tier 2	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	Tier 2	ST, QL (60 mL every 30 days); PA**
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	Tier 4	ST, QL (60g every 30 days); PA**
<i>calcitriol oint 3 mcg/gm</i>	Tier 4	ST, QL (100g every 30 days); PA**
<i>methoxsalen rapid cap 10 mg</i>	Tier 2	
<i>tazarotene cream 0.1%</i>	Tier 2	PA
<i>tazarotene cream 0.05%</i>	Tier 2	PA
<i>tazarotene gel 0.1%</i>	Tier 2	PA
<i>tazarotene gel 0.05%</i>	Tier 2	PA
<i>TAZORAC CRE 0.05%</i>	Tier 3	PA
DERMATOLOGY, ANTISEBORRHEICS		
<i>ketconazole shampoo 2%</i>	Tier 2	QL (120 mL every 30 days)
<i>selenium sulfide lotion 2.5%</i>	Tier 2	
DERMATOLOGY, ANTIVIRALS		
<i>ABREVA CRE 10%</i>	Tier 1	OTC
DERMATOLOGY, ATOPIC DERMATITIS		
<i>DUPIXENT INJ 200/1.14</i>	Tier 5	PA, QL (2 syringes every 28 days); Indicated for Asthma and Atopic Dermatitis
<i>DUPIXENT INJ 300/2ML</i>	Tier 5	PA, QL (4 syringes every 28 days); Indicated for Asthma and Atopic Dermatitis
<i>EBGLYSS INJ 250/2ML</i>	Tier 5	PA, QL (2 pens every 28 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 143
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
EBGLYSS INJ 250/2ML	Tier 5	PA, QL (2 syringes every 28 days)
EUCRISA OIN 2%	Tier 3	ST, QL (60 grams every 30 days); PA**
<i>pimecrolimus cream 1%</i>	Tier 4	ST; PA**
<i>tacrolimus oint 0.1%</i>	Tier 4	ST; PA**
<i>tacrolimus oint 0.03%</i>	Tier 4	ST; PA**

DERMATOLOGY, CORTICOSTEROIDS

<i>Ala-Cort</i>	Tier 2	QL (120g every 30 days)
<i>alclometasone dipropionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>alclometasone dipropionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>amcinonide oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>Anti-Itch Cre 1%</i>	Tier 1	OTC
<i>Aquanil Hc Lot 1%</i>	Tier 1	OTC
<i>betamethasone dipropionate augmented cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate augmented gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone valerate aerosol foam 0.12%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	Tier 2	QL (120g every 30 days)
BRYHALI LOT 0.01%	Tier 3	QL (120 mL every 30 days)
<i>clobetasol propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>Clobetasol Propionate Emo</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate foam 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate soln 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate spray 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>clocortolone pivalate cream 0.1%</i>	Tier 4	QL (120g every 30 days)
<i>desonide cream 0.05%</i>	Tier 2	QL (120g every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>desonide lotion 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>desonide oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone cream 0.25%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone oint 0.25%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone spray 0.25%</i>	Tier 4	QL (120 mL every 30 days)
<i>diflorasone diacetate cream 0.05%</i>	Tier 4	QL (120g every 30 days)
<i>diflorasone diacetate oint 0.05%</i>	Tier 4	QL (120g every 30 days)
<i>fluocinolone acetonide cream 0.01%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide cream 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	Tier 2	QL (120 mL every 30 days)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	Tier 2	QL (120mL every 30 days)
<i>fluocinolone acetonide oint 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide soln 0.01%</i>	Tier 2	QL (120mL every 30 days)
<i>fluocinonide cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide soln 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>fluticasone propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluticasone propionate lotion 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>fluticasone propionate oint 0.005%</i>	Tier 2	QL (120g every 30 days)
<i>halobetasol propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>halobetasol propionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate soln 0.1%</i>	Tier 2	QL (120mL every 30 days)
<i>hydrocortisone cream 0.5%</i>	Tier 1	OTC
<i>hydrocortisone cream 1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone cream 2.5%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone lotion 2.5%</i>	Tier 2	QL (120mL every 30 days)
<i>hydrocortisone oint 0.5%</i>	Tier 1	OTC
<i>hydrocortisone oint 1%</i>	Tier 1	OTC
<i>hydrocortisone oint 2.5%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone valerate cream 0.2%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone valerate oint 0.2%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate solution 0.1% (lotion)</i>	Tier 2	QL (120mL every 30 days)
<i>triamcinolone acetonide cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide cream 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide lotion 0.1%</i>	Tier 2	QL (120 mL every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 145
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide lotion 0.025%</i>	Tier 2	QL (120 mL every 30 days)
<i>triamcinolone acetonide oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide oint 0.5%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide oint 0.025%</i>	Tier 2	QL (120g every 30 days)

DERMATOLOGY, LOCAL ANESTHETICS

<i>Aloe Vera/lidocaine</i>	Tier 1	OTC
<i>Arth Pain Cre 0.075%</i>	Tier 1	OTC
<i>Caladryl Clr Lot 1-0.1%</i>	Tier 1	OTC
<i>CALADRYL LOT 1-8%</i>	Tier 1	OTC
<i>capsaicin cream 0.025%</i>	Tier 1	OTC
<i>Capsaicin Hp Cre 0.1%</i>	Tier 1	OTC
<i>CAPZASIN-P CRE 0.035%</i>	Tier 1	OTC
<i>dibucaine oint 1%</i>	Tier 1	OTC
<i>lidocaine hcl soln 4%</i>	Tier 2	QL (50 mL every 30 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	Tier 2	QL (60 mL every 30 days)
<i>lidocaine oint 5%</i>	Tier 2	QL (50g every 30 days)
<i>Lidocaine Pain Relief Pat</i>	Tier 2	QL (30 patches every 30 days), OTC
<i>lidocaine patch 5%</i>	Tier 2	PA, QL (90 patches every 30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	Tier 2	QL (30g every 30 days)
<i>LMX 4 CRE 4%</i>	Tier 1	OTC
<i>Mandelay Gel Max Str</i>	Tier 1	OTC
<i>Muscle Rub Cre Ultra St</i>	Tier 1	OTC
<i>MYOFLEX CRE 10%</i>	Tier 1	OTC
<i>Regenecare Gel Ha 2%</i>	Tier 1	OTC
<i>Thera-Gesic Cre</i>	Tier 1	OTC
<i>ZOSTRIX NAT CRE 0.033%</i>	Tier 1	OTC

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

<i>acyclovir cream 5%</i>	Tier 4	
<i>Amlactin Lot 12%</i>	Tier 1	OTC
<i>bexarotene gel 1%</i>	Tier 5	PA
<i>Callus Remov Pad 40%</i>	Tier 1	OTC
<i>Clean&clear Liq 2%</i>	Tier 1	OTC
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	Tier 2	QL (300g every 30 days)
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	Tier 2	QL (300g every 30 days), OTC
<i>Gordon-Vit E Cre 1500unit</i>	Tier 1	OTC
<i>LAC-HYDRIN LOT FIVE</i>	Tier 1	OTC
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1	OTC
<i>nitroglycerin oint 0.4%</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>penciclovir cream 1%</i>	Tier 2	
<i>podofilox gel 0.5%</i>	Tier 2	
<i>podofilox soln 0.5%</i>	Tier 2	
<i>Salactic Fil Sol 17%</i>	Tier 1	OTC
SARNA LOT	Tier 1	OTC
SELSUN BLUE SHA DEEP CLN	Tier 1	OTC
<i>Urea 20 Intn Cre 20%</i>	Tier 1	OTC
<i>vitamins a & d oint</i>	Tier 1	OTC
VOLTAREN GEL 1% ARTHR	Tier 2	QL (300g every 30 days), OTC

DERMATOLOGY, ROSACEA

<i>azelaic acid gel 15%</i>	Tier 2	
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	Tier 2	PA
FINACEA AER 15%	Tier 3	
<i>ivermectin cream 1%</i>	Tier 2	PA
<i>metronidazole cream 0.75%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole gel 0.75%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole gel 1%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole lotion 0.75%</i>	Tier 2	QL (60 mL every 30 days)

DERMATOLOGY, SCABICIDES AND PEDICULICIDES

<i>Crotan</i>	Tier 2	
<i>Cvs Ivermectin Lice Treat</i>	Tier 2	OTC
<i>Cvs Lice Treatment</i>	Tier 2	OTC
<i>malathion lotion 0.5%</i>	Tier 2	
<i>permethrin cream 5%</i>	Tier 2	
<i>spinosad susp 0.9%</i>	Tier 2	

DERMATOLOGY, SCABICIDES AND PEDICULIDES

<i>Lice Killing Sha 0.33-4%</i>	Tier 1	OTC
<i>Lice Trtmnt Liq 1%</i>	Tier 1	OTC
<i>Sm Lice Lot Treatmnt</i>	Tier 1	OTC
<i>Stop Lice Kit Complete</i>	Tier 1	OTC

DERMATOLOGY, WOUND CARE AGENTS

REGRANEX GEL 0.01%	Tier 4	PA, QL (30g every 30 days)
<i>sodium chloride irrigation soln 0.9%</i>	Tier 2	

MISCELLANEOUS

ALUMINUM SOL ACETATE	Tier 1	OTC
BALMEX CRE 11.3%	Tier 1	OTC
BOUDREAUXS OIN 16%	Tier 1	OTC
CALAMINE LOT 8-8%	Tier 1	OTC
CERAVE OIN 46.5%	Tier 1	OTC
<i>Diaper Rash Cre 13%</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>Diaper Rash Pst 40%</i>	Tier 1	OTC
DR SMITHS OIN DIAPER	Tier 1	OTC
IONIL LIQ	Tier 1	OTC
<i>Maxilube Gel</i>	Tier 1	OTC
<i>Medi Pad</i>	Tier 1	OTC
<i>Minerin Cre</i>	Tier 1	OTC
<i>Pedi-Boro Pow Soak Pak</i>	Tier 1	OTC
<i>Preparation Pad H</i>	Tier 1	OTC
SM CALAMINE LOT	Tier 1	OTC
TRIPLE PASTE OIN 12.8%	Tier 1	OTC
<i>zinc oxide oint 20%</i>	Tier 1	OTC
<i>zinc oxide oint 40%</i>	Tier 1	OTC

MOUTH/THROAT/DENTAL AGENTS

ANBESOL GEL 10%	Tier 1	OTC
BABY ANBESOL GEL 7.5%	Tier 1	OTC
<i>cevimeline hcl cap 30 mg</i>	Tier 2	
<i>chlorhexidine gluconate soln 0.12%</i>	Tier 2	
<i>clotrimazole troche 10 mg</i>	Tier 2	QL (90 lozenges every 30 days)
DRY MOUTH SPR	Tier 1	OTC
HURRICAIN SOL 20%	Tier 1	OTC
<i>lidocaine hcl laryngotracheal soln 4%</i>	Tier 2	
<i>lidocaine hcl viscous soln 2%</i>	Tier 2	
<i>nystatin susp 100000 unit/ml</i>	Tier 2	
<i>Oralene Dental Paste</i>	Tier 2	
ORAVIG TAB 50MG	Tier 4	QL (14 tabs every 30 days)
<i>Periogard</i>	Tier 2	
PEROXYL SOL	Tier 1	OTC
PHOS FLUR SOL 0.044%	Tier 1	OTC
<i>pilocarpine hcl tab 5 mg</i>	Tier 2	
<i>pilocarpine hcl tab 7.5 mg</i>	Tier 2	
<i>Sm Fluoride Sol Mint</i>	Tier 1	OTC
SMART RINSE SOL BBL BLAS	Tier 1	OTC
<i>Sore Throat Loz Cherry</i>	Tier 1	OTC
<i>Sore Throat Spr 1.4%</i>	Tier 1	OTC
<i>Tooth Sol Shield</i>	Tier 1	OTC
<i>triamcinolone acetanide dental paste 0.1%</i>	Tier 2	

OTIC

<i>acetic acid otic soln 2%</i>	Tier 2	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	Tier 2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	Tier 4	
CORTISPORIN SUS -TC OTIC	Tier 4	
<i>E-R-O Ear Dro 6.5% Ot</i>	Tier 1	OTC
<i>fluocinolone acetonide (otic) oil 0.01%</i>	Tier 2	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	Tier 2	
<i>neomycin-polymyxin-hc otic soln 1%</i>	Tier 2	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	Tier 2	
<i>ofloxacin otic soln 0.3%</i>	Tier 2	

TAR PRODUCTS

DHS TAR SHA	Tier 1	OTC
IONIL-T SHA 1%	Tier 1	OTC

VITAMINS

OIL SOLUBLE VITAMINS

<i>A-25 Cap 25000unit</i>	Tier 1	OTC
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	Tier 2	OTC
<i>cholecalciferol cap 10 mcg (400 unit)</i>	Tier 0	OTC
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	Tier 1	OTC
<i>cholecalciferol tab 10 mcg (400 unit)</i>	Tier 0	OTC
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	Tier 1	OTC
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	Tier 1	OTC
D-VI-SOL LIQ 400UNIT	Tier 0	OTC
E600 CAP 600UNIT	Tier 1	OTC
VIT A FISH CAP 7500UNIT	Tier 1	OTC
<i>Vita-Plus E Cap 400unit</i>	Tier 1	OTC
<i>vitamin a cap 3 mg (10000 unit)</i>	Tier 1	OTC
<i>vitamin a cap 2400 mcg (8000 unit)</i>	Tier 1	OTC
<i>Vitamin D3 Cap 1000unit</i>	Tier 1	OTC
<i>Vitamin D3 Cap 2000unit</i>	Tier 1	OTC
<i>Vitamin D Chw 1000unit</i>	Tier 1	OTC
<i>Vitamin E Cap 100unit</i>	Tier 1	OTC
<i>vitamin e cap 200 unit</i>	Tier 1	OTC
<i>vitamin e cap 450 mg (1000 unit)</i>	Tier 1	OTC
<i>vitamin e soln 15 unit/0.3ml (50 unit/ml)</i>	Tier 1	OTC

WATER SOLUBLE VITAMINS

<i>ascorbic acid cap er 500 mg</i>	Tier 1	OTC
<i>ascorbic acid tab 500 mg</i>	Tier 1	OTC
<i>biotin tab 5 mg</i>	Tier 1	OTC
<i>C-500 Chw 500mg</i>	Tier 1	OTC
LIQUID C 500 LIQ 500/15ML	Tier 1	OTC
<i>Meribin Cap 5mg</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>niacin cap er 250 mg</i>	Tier 1	OTC
<i>niacin tab 100 mg</i>	Tier 1	OTC
<i>niacin tab 250 mg</i>	Tier 1	OTC
<i>Niacin Tab 500mg</i>	Tier 1	OTC
NIACIN TR TAB 1000MG	Tier 1	OTC
SLO-NIACIN TAB 500MG CR	Tier 1	OTC
<i>Sm Vit B1 Tab 100mg</i>	Tier 1	OTC
<i>vitamin b-1 tab 50mg</i>	Tier 1	OTC
<i>vitamin b-2 tab 25mg</i>	Tier 1	OTC
<i>vitamin b-2 tab 100mg</i>	Tier 1	OTC
<i>vitamin b-6 tab 25mg</i>	Tier 1	OTC
<i>vitamin b-6 tab 50mg</i>	Tier 1	OTC
<i>Vitamin B-6 Tab 100mg</i>	Tier 1	OTC
<i>vitamin c liq 500/5ml</i>	Tier 1	OTC
<i>vitamin c tab 250mg</i>	Tier 1	OTC
<i>vitamin c tab 1000mg</i>	Tier 1	OTC

Index

1	
12ML SYRINGE MIS REG LUER	122
1ML SYRINGE MIS 25GX5/8	122
3	
3 Day Vaginal Cre 4%	106
3ML LUER LOC MIS 22GX1.....	122
3ML LUER LOC MIS 25GX1.....	122
3ML LUER LOC MIS 25GX5/8.....	122
3ML SYRINGE MIS LUER LOK.....	122
4	
4-Way Fast Spr 1%	139
A	
A+d Prevent Oin	80
A-25 Cap 25000unt.....	149
abacavir sulfate-lamivudine tab 600-300 mg	16
abacavir sulfate soln 20 mg/ml (base equiv)	14
abacavir sulfate tab 300 mg (base equiv) .	14
abiraterone acetate tab 250 mg	29
abiraterone acetate tab 500 mg	29
ABREVA CRE 10%	143
ABRYSVO INJ	118
acamprosate calcium tab delayed release 333 mg	52
acarbose tab 100 mg	81
acarbose tab 25 mg	81
acarbose tab 50 mg.....	81
ACCU-CHEK BLOOD GLUCOSE TEST KITS	89, 121
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	89, 121
ACCU-CHEK LIQ COMPACT	89
ACCU-CHEK LIQ GUIDE.....	89
acebutolol hcl cap 200 mg	44
acebutolol hcl cap 400 mg	44
Acephen Sup 325mg.....	11
Acephen Sup 650mg	11
acetaminophen-cafeine-dihydrocodeine cap 320.5-30-16 mg.....	3
acetaminophen soln 160 mg/5ml.....	11
acetaminophen w/ codeine soln 120-12 mg/5ml	3
acetaminophen w/ codeine tab 300-15 mg3	
acetaminophen w/ codeine tab 300-30 mg	3
acetaminophen w/ codeine tab 300-60 mg	3
acetazolamide cap er 12hr 500 mg	48
acetazolamide tab 125 mg	48
acetazolamide tab 250 mg	48
acetic acid otic soln 2%	148
acetylcysteine inhal soln 10%	137
acetylcysteine inhal soln 20%	137
acitretin cap 10 mg	143
acitretin cap 17.5 mg	143
acitretin cap 25 mg.....	143
Acne Cleansi Bar 10%.....	140
ACNE MEDICAT LOT 10%.....	140
ACNE MEDICAT LOT 5%	140
ACTEMRA INJ 162/0.9	111
ACTEMRA INJ 200/10ML	111
ACTEMRA INJ 400/20ML	111
ACTEMRA INJ 80MG/4ML.....	110
ACTEMRA INJ ACTPEN	111
ACTIMMUNE INJ 2MU/0.5	116
ACUVAIL SOL 0.45%	129
acyclovir cap 200 mg	17
acyclovir cream 5%	146
acyclovir susp 200 mg/5ml.....	17
acyclovir tab 400 mg.....	17
acyclovir tab 800 mg.....	17
ADALIMU-ADAZ INJ 20/0.2ML	111
ADALIMU-ADAZ INJ 40/0.4ML	111
ADALIMU-ADAZ INJ 80/0.8ML	111
ADALIMU-FKJP KIT 20/0.4ML	111
ADALIMU-FKJP KIT 40/0.8ML	111
adapalene-benzoyl peroxide gel 0.1-2.5%	140
adapalene-benzoyl peroxide gel 0.3-2.5%	140
adapalene cream 0.1%	140
adapalene gel 0.1%	140
adapalene gel 0.3%	140
adefovir dipivoxil tab 10 mg	20
Adriamycin	26

ADULT RESPIRATORY MASK	137
Advil Jr St Tab 100mg	2
ADZENYS XR TAB 12.5MG	68
ADZENYS XR TAB 15.7 MG	68
ADZENYS XR TAB 18.8MG	68
ADZENYS XR TAB 3.1MG	68
ADZENYS XR TAB 6.3MG	68
ADZENYS XR TAB 9.4MG	68
AFRIN CHILD SPR 0.25%	139
Afrin Saline Spr 0.65%	137
AIMOVIG INJ 140MG/ML	73
AIMOVIG INJ 70MG/ML	73
AIRSUPRA AER 90-80MCG	139
AKYNZEO CAP 300-0.5	99
Ala-Cort.....	144
albendazole tab 200 mg	12
ALBUSTIX TES.....	122
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	134
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	134
albuterol sulfate soln nebu 0.5% (5 mg/ml)	134
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	134
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	134
albuterol sulfate syrup 2 mg/5ml	134
albuterol sulfate tab 2 mg	134
albuterol sulfate tab 4 mg.....	134
alclometasone dipropionate cream 0.05%	144
alclometasone dipropionate oint 0.05%.....	144
ALCOHOL PREP PAD	89
ALCOHOL SWAB PAD 70%	122
ALECENSA CAP 150MG.....	30
alendronate sodium oral soln 70 mg/75ml	84
alendronate sodium tab 10 mg.....	84
alendronate sodium tab 35 mg	84
alendronate sodium tab 5 mg	84
alendronate sodium tab 70 mg	84
alfuzosin hcl tab er 24hr 10 mg	104
ALINIA SUS 100/5ML	21

aliskiren fumarate tab 150 mg (base equivalent)	48
aliskiren fumarate tab 300 mg (base equivalent)	48
ALIVE PRENAT CHW DAILY SU.....	124
ALKA-SELTZER TAB 325MG.....	11
ALKA-SELTZER TAB 500MG	11
Aller-Ease Tab 180mg	132
Allergy/cong Tab 5-120mg	79
Allergy Relf Cap 25mg	132
Allergy Rel Liq 12.5/5ml	132
ALLERGY ULTR TAB 25MG	133
allopurinol tab 100 mg	1
allopurinol tab 300 mg	2
almotriptan malate tab 12.5 mg.....	73
almotriptan malate tab 6.25 mg	73
ALOCRIOL SOL 2%	129
Aloe Vera/lidocaine.....	146
alogliptin benzoate tab 12.5 mg (base equiv)	81
alogliptin benzoate tab 25 mg (base equiv)	82
alogliptin benzoate tab 6.25 mg (base equiv)	81
alogliptin-metformin hcl tab 12.5-1000 mg	81
alogliptin-metformin hcl tab 12.5-500 mg.....	81
ALOMIDE SOL 0.1% OP	129
alosetron hcl tab 0.5 mg (base equiv)	102
alosetron hcl tab 1 mg (base equiv).....	102
ALPRAZOLAM CON 1 MG/ML.....	52
alprazolam orally disintegrating tab 0.25 mg.....	52
alprazolam orally disintegrating tab 0.5 mg	52
alprazolam orally disintegrating tab 1 mg	52
alprazolam orally disintegrating tab 2 mg	52
alprazolam tab 0.25 mg.....	52
alprazolam tab 0.5 mg.....	52
alprazolam tab 1 mg	52
alprazolam tab 2 mg	52
Altavera	85
ALUM HYDROX SUS 320/5ML	12
ALUMINUM SOL ACETATE	147

ALVESCO AER 160MCG	138
ALVESCO AER 80MCG	138
Alyacen 1/35	85
Alyacen 7/7/7	85
amantadine hcl cap 100 mg	59
amantadine hcl soln 50 mg/5ml	59
amantadine hcl tab 100 mg	59
ambrisentan tab 10 mg	50
ambrisentan tab 5 mg	50
amcinonide oint 0.1%	144
Amethyst	85
amikacin sulfate inj 1 gm/4ml (250 mg/ml)	13
amikacin sulfate inj 500 mg/2ml (250 mg/ml)	13
amiloride & hydrochlorothiazide tab 5-50 mg	48
amiloride hcl tab 5 mg	48
aminophylline inj 25 mg/ml	139
amiodarone hcl tab 200 mg	40
amiodarone hcl tab 400 mg	40
amitriptyline hcl tab 100 mg	54
amitriptyline hcl tab 10 mg	54
amitriptyline hcl tab 150 mg	54
amitriptyline hcl tab 25 mg	54
amitriptyline hcl tab 50 mg	54
amitriptyline hcl tab 75 mg	54
Amlactin Lot 12%	146
amlodipine besylate-atorvastatin calcium tab 10-10 mg	46
amlodipine besylate-atorvastatin calcium tab 10-20 mg	46
amlodipine besylate-atorvastatin calcium tab 10-40 mg	46
amlodipine besylate-atorvastatin calcium tab 10-80 mg	46
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg	45
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg	45
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg	46
amlodipine besylate-atorvastatin calcium tab 5-10 mg	46

amlodipine besylate-atorvastatin calcium tab 5-20 mg	46
amlodipine besylate-atorvastatin calcium tab 5-40 mg	46
amlodipine besylate-atorvastatin calcium tab 5-80 mg	46
amlodipine besylate-benazepril hcl cap 10- 20 mg	36
amlodipine besylate-benazepril hcl cap 10- 40 mg	36
amlodipine besylate-benazepril hcl cap 2.5- 10 mg	36
amlodipine besylate-benazepril hcl cap 5- 10 mg	36
amlodipine besylate-benazepril hcl cap 5- 20 mg	36
amlodipine besylate-benazepril hcl cap 5- 40 mg	36
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	38
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	38
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	38
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	38
amlodipine besylate tab 10 mg (base equivalent)	46
amlodipine besylate tab 2.5 mg (base equivalent)	46
amlodipine besylate tab 5 mg (base equivalent)	46
amlodipine besylate-valsartan tab 10-160 mg	38
amlodipine besylate-valsartan tab 10-320 mg	38
amlodipine besylate-valsartan tab 5-160 mg	38
amlodipine besylate-valsartan tab 5-320 mg	38
amoxapine tab 100 mg	55
amoxapine tab 150 mg	55
amoxapine tab 25 mg	54
amoxapine tab 50 mg	54

amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg	104
amoxicillin (trihydrate) cap 250 mg	23
amoxicillin (trihydrate) cap 500 mg	23
amoxicillin (trihydrate) chew tab 125 mg ..	23
amoxicillin (trihydrate) chew tab 250 mg ..	23
amoxicillin (trihydrate) for susp 125 mg/5ml	23
amoxicillin (trihydrate) for susp 200 mg/5ml	23
amoxicillin (trihydrate) for susp 250 mg/5ml	23
amoxicillin (trihydrate) for susp 400 mg/5ml	23
amoxicillin (trihydrate) tab 500 mg	23
amoxicillin (trihydrate) tab 875 mg	24
amoxicillin & k clavulanate chew tab 200- 28.5 mg	23
amoxicillin & k clavulanate chew tab 400- 57 mg	23
amoxicillin & k clavulanate for susp 200- 28.5 mg/5ml	23
amoxicillin & k clavulanate for susp 250- 62.5 mg/5ml	23
amoxicillin & k clavulanate for susp 400-57 mg/5ml	23
amoxicillin & k clavulanate for susp 600- 42.9 mg/5ml	23
amoxicillin & k clavulanate tab 250-125 mg	23
amoxicillin & k clavulanate tab 500-125 mg	23
amoxicillin & k clavulanate tab 875-125 mg	23
amoxicillin & k clavulanate tab er 12hr 1000- 62.5 mg	23
amphetamine-dextroamphetamine cap er 24hr 10 mg	68
amphetamine-dextroamphetamine cap er 24hr 15 mg	68
amphetamine-dextroamphetamine cap er 24hr 20 mg	68
amphetamine-dextroamphetamine cap er 24hr 25 mg	68

amphetamine-dextroamphetamine cap er 24hr 30 mg	68
amphetamine-dextroamphetamine cap er 24hr 5 mg	68
amphetamine-dextroamphetamine tab 10 mg	68
amphetamine-dextroamphetamine tab 12.5 mg	68
amphetamine-dextroamphetamine tab 15 mg	68
amphetamine-dextroamphetamine tab 20 mg	68
amphetamine-dextroamphetamine tab 30 mg	68
amphetamine-dextroamphetamine tab 5 mg	68
amphetamine-dextroamphetamine tab 7.5 mg	68
amphotericin b for iv soln 50 mg	13
ampicillin cap 500 mg	24
ampicillin sodium for inj 1 gm	24
ampicillin sodium for inj 2 gm	24
anagrelide hcl cap 0.5 mg	109
anagrelide hcl cap 1 mg	109
anastrozole tab 1 mg	29
ANBESOL GEL 10%	148
ANNOVERA MIS	85
Antacid Plus Sus Gas Rel	12
ANTI-DIARRHE LIQ 1MG/5ML	25
Anti-Fungal Pow 1%	142
Anti-Itch Cre 1%	144
Anti-Itch Gel 2% Ex St	140
APOKYN INJ 10MG/ML	59
apraclonidine hcl ophth soln 0.5% (base equivalent)	131
aprepitant capsule 125 mg	99
aprepitant capsule 40 mg	99
aprepitant capsule 80 mg	99
aprepitant capsule therapy pack 80 & 125 mg	99
APRETUDE SUS 600MG ER	14
Apri	85
APTIVUS CAP 250MG	14
Aquanil Hc Lot 1%	144

<i>Aranelle</i>	85	<i>ascorbic acid tab 500 mg</i>	149
ARANESP INJ 100MCG	108	<i>asenapine maleate sl tab 10 mg (base</i>	
ARANESP INJ 10MCG.....	108	<i>equiv)</i>	61
ARANESP INJ 150MCG	108	<i>asenapine maleate sl tab 2.5 mg (base</i>	
ARANESP INJ 200MCG.....	108	<i>equiv)</i>	61
ARANESP INJ 25MCG	108	<i>asenapine maleate sl tab 5 mg (base equiv)</i>	
ARANESP INJ 300MCG	108	.....	61
ARANESP INJ 40MCG.....	108	<i>Ashlyna</i>	85
ARANESP INJ 500MCG	108	ASMANEX HFA AER 100 MCG.....	138
ARANESP INJ 60MCG.....	108	ASMANEX HFA AER 200 MCG.....	139
ARCALYST INJ 220MG	116	ASMANEX HFA AER 50MCG	138
AREXVY INJ 120MCG	118	<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	
<i>arformoterol tartrate soln nebu 15 mcg/2ml</i>		.....	109
<i>(base equiv)</i>	134	<i>Aspirin Ec Adult Low Dose</i>	11
<i>aripiprazole orally disintegrating tab 10 mg</i>		<i>Aspirin Tab 325mg</i>	11
.....	61	<i>Aspirin Tab 500 mg</i>	11
<i>aripiprazole orally disintegrating tab 15 mg</i>		ASTAGRAF XL CAP 0.5MG.....	116
.....	61	ASTAGRAF XL CAP 1MG	116
<i>aripiprazole oral solution 1 mg/ml</i>	61	ASTAGRAF XL CAP 5MG	116
<i>aripiprazole tab 10 mg</i>	61	ATABEX CHW PRENATAL.....	124
<i>aripiprazole tab 15 mg</i>	61	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	
<i>aripiprazole tab 20 mg</i>	61	.....	14
<i>aripiprazole tab 2 mg</i>	61	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	
<i>aripiprazole tab 30 mg</i>	61	.....	14
<i>aripiprazole tab 5 mg</i>	61	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	
ARISTADA INJ 1064MG	61	.....	14
ARISTADA INJ 441MG/1.	61	<i>atenolol & chlorthalidone tab 100-25 mg</i> .	44
ARISTADA INJ 662MG/2.....	61	<i>atenolol & chlorthalidone tab 50-25 mg</i> ..	44
ARISTADA INJ 882MG/3.....	61	<i>atenolol tab 100 mg</i>	44
ARISTADA INJ INITIO.....	61	<i>atenolol tab 25 mg</i>	44
<i>armodafinil tab 150 mg</i>	76	<i>atenolol tab 50 mg</i>	44
<i>armodafinil tab 200 mg</i>	76	<i>atomoxetine hcl cap 100 mg (base equiv)</i> ..	69
<i>armodafinil tab 250 mg</i>	76	<i>atomoxetine hcl cap 10 mg (base equiv)</i> ..	69
<i>armodafinil tab 50 mg</i>	76	<i>atomoxetine hcl cap 18 mg (base equiv)</i> ..	69
ARNUITY ELPT INH 100MCG.....	138	<i>atomoxetine hcl cap 25 mg (base equiv)</i> ..	69
ARNUITY ELPT INH 200MCG	138	<i>atomoxetine hcl cap 40 mg (base equiv)</i> .	69
ARNUITY ELPT INH 50MCG.....	138	<i>atomoxetine hcl cap 60 mg (base equiv)</i> .	69
<i>arsenic trioxide iv soln 10 mg/10ml (1</i>		<i>atomoxetine hcl cap 80 mg (base equiv)</i> .	69
<i>mg/ml)</i>	34	<i>atorvastatin calcium tab 10 mg (base</i>	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>		<i>equivalent)</i>	41
.....	34	<i>atorvastatin calcium tab 20 mg (base</i>	
<i>Arth Pain Cre 0.075%</i>	146	<i>equivalent)</i>	41
<i>Artifi Tears Sol 1.4% Op</i>	130	<i>atorvastatin calcium tab 40 mg (base</i>	
<i>ascorbic acid cap er 500 mg</i>	149	<i>equivalent)</i>	42

<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	42
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	14
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i> 14	
<i>atovaquone susp 750 mg/5ml</i>	21
<i>atropine sulfate ophth soln 1%</i>	130
<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	99
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	99
AUTOLET LITE KIT STARTER.....	121
<i>avanafil tab 100 mg</i>	105
<i>avanafil tab 200 mg</i>	105
<i>avanafil tab 50 mg</i>	105
AVEENO BATH PAK TREATMNT	80
Aviane	85
Avidoxy	24
AYR SALINE KIT RINSE	137
<i>azacitidine for inj 100 mg</i>	27
AZASITE SOL 1%.....	128
<i>azathioprine tab 100 mg</i>	116
<i>azathioprine tab 50 mg</i>	116
<i>azathioprine tab 75 mg</i>	116
<i>azelaic acid gel 15%</i>	147
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	132
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	133
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	133
<i>azelastine hcl ophth soln 0.05%</i>	129
<i>azithromycin for susp 100 mg/5ml</i>	19
<i>azithromycin for susp 200 mg/5ml</i>	19
<i>azithromycin powd pack for susp 1 gm</i>	19
<i>azithromycin tab 250 mg</i>	19
<i>azithromycin tab 500 mg</i>	19
<i>azithromycin tab 600 mg</i>	19
AZSTARYS CAP 26.1-5.2.....	69
AZSTARYS CAP 39.2-7.8	69
AZSTARYS CAP 52.3-10.....	69
<i>aztreonam for inj 1 gm</i>	21
<i>aztreonam for inj 2 gm</i>	21
Azurette	86

B	
<i>B-100 Complx Tab</i>	123
BABY ANBESOL GEL 7.5%.....	148
<i>bacitracin oint 500 unit/gm</i>	141
<i>bacitracin ophth oint 500 unit/gm</i>	128
<i>bacitracin-polymyxin b ophth oint</i>	128
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	128
<i>bacitracin zinc oint 500 unit/gm</i>	141
<i>baclofen tab 10 mg</i>	75
<i>baclofen tab 20 mg</i>	75
<i>baclofen tab 5 mg</i>	75
BALMEX CRE 11.3%	147
<i>balsalazide disodium cap 750 mg</i>	101
BARACLUDE SOL.....	20
BASAGLAR KWIKPEN	82
BAXDELA TAB 450MG.....	20
<i>Bayer Asa Tab 325mg</i>	11
BAYER MICRLT MIS LANC DVC.....	121
BAYER PLUS TAB 500MG.....	11
B-COMPLEX TAB C/FA/BIO	123
<i>b-complex vitamin tab</i>	123
<i>Bee Zee Tab</i>	123
BELBUCA MIS 150MCG	10
BELBUCA MIS 300MCG	10
BELBUCA MIS 450MCG	10
BELBUCA MIS 600MCG	10
BELBUCA MIS 750MCG.....	10
BELBUCA MIS 75MCG	10
BELBUCA MIS 900MCG	10
BELSOMRA TAB 10MG	72
BELSOMRA TAB 15MG	72
BELSOMRA TAB 20MG	72
BELSOMRA TAB 5MG	72
BENADRYL ALL LIQ 12.5/5ML.....	133
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	36
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	37
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	37
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	36
<i>benazepril hcl tab 10 mg</i>	37

<i>benazepril hcl tab 20 mg</i>	37	<i>bethanechol chloride tab 50 mg</i>	105
<i>benazepril hcl tab 40 mg</i>	37	<i>bethanechol chloride tab 5 mg</i>	105
<i>benazepril hcl tab 5 mg</i>	37	BETIMOL SOL 0.25%	129
<i>benzonatate cap 100 mg</i>	135	BETIMOL SOL 0.5%	129
<i>benzonatate cap 200 mg</i>	135	BETOPTIC-S SUS 0.25% OP	129
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	140	BEVESPI AER 9-4.8MCG	132
<i>Benzoyl Peroxide Gel 10%</i>	140	BE WELL PAK ROUNDED	124
<i>benzoyl peroxide gel 2.5%</i>	140	<i>bexarotene cap 75 mg</i>	34
<i>Benzoyl Peroxide Gel 5%</i>	140	<i>bexarotene gel 1%</i>	146
<i>Benzoyl Peroxide Liq 5%</i>	140	BEXSERO INJ	118
<i>benztropine mesylate inj 1 mg/ml</i>	59	BEYFORTUS INJ 100MG/ML	118
<i>benztropine mesylate tab 0.5 mg</i>	59	BEYFORTUS INJ 50/0.5ML	118
<i>benztropine mesylate tab 1 mg</i>	59	<i>bicalutamide tab 50 mg</i>	29
<i>benztropine mesylate tab 2 mg</i>	59	BIJUVA CAP 0.5-100	93
<i>bepotastine besilate ophth soln 1.5%</i>	129	BIJUVA CAP 1-100MG	93
BESIVANCE SUS 0.6%	128	BIKTARVY TAB.....	16
<i>betaine powder for oral solution</i>	96	<i>biotin tab 5 mg</i>	149
<i>betamethasone dipropionate augmented</i> <i>cream 0.05%</i>	144	<i>bisoprolol & hydrochlorothiazide tab 10-</i> <i>6.25 mg</i>	44
<i>betamethasone dipropionate augmented</i> <i>gel 0.05%</i>	144	<i>bisoprolol & hydrochlorothiazide tab 2.5-</i> <i>6.25 mg</i>	44
<i>betamethasone dipropionate augmented</i> <i>lotion 0.05%</i>	144	<i>bisoprolol & hydrochlorothiazide tab 5-6.25</i> <i>mg</i>	44
<i>betamethasone dipropionate augmented</i> <i>oint 0.05%</i>	144	<i>bisoprolol fumarate tab 10 mg</i>	44
<i>betamethasone dipropionate cream 0.05%</i>	144	<i>bisoprolol fumarate tab 5 mg</i>	44
<i>betamethasone dipropionate lotion 0.05%</i>	144	<i>bleomycin sulfate for inj 15 unit</i>	26
<i>betamethasone valerate aerosol foam</i> <i>0.12%</i>	144	<i>bleomycin sulfate for inj 30 unit</i>	26
<i>betamethasone valerate cream 0.1% (base</i> <i>equivalent)</i>	144	BLOOD GLUCOSE CALIBRATION SOLUTION	121
<i>betamethasone valerate lotion 0.1% (base</i> <i>equivalent)</i>	144	BOOSTRIX INJ	118
<i>betamethasone valerate oint 0.1% (base</i> <i>equivalent)</i>	144	<i>bosentan tab 125 mg</i>	50
BETASERON INJ 0.3MG.....	74	<i>bosentan tab 62.5 mg</i>	50
<i>betaxolol hcl ophth soln 0.5%</i>	129	BOUDREAUXS OIN 16%.....	147
<i>betaxolol hcl tab 10 mg</i>	44	BRAINSTRONG MIS PRENATAL	124
<i>betaxolol hcl tab 20 mg</i>	44	BREO ELLIPTA INH 100-25	139
<i>bethanechol chloride tab 10 mg</i>	105	BREO ELLIPTA INH 200-25.....	139
<i>bethanechol chloride tab 25 mg</i>	105	BREO ELLIPTA INH 50-25MCG.....	139
		<i>Breyna</i>	139
		BREZTRI AERO AER SPHERE	132
		<i>brimonidine tartrate gel 0.33% (base</i> <i>equivalent)</i>	147
		<i>brimonidine tartrate ophth soln 0.1%</i>	131
		<i>brimonidine tartrate ophth soln 0.15%</i>	131
		<i>brimonidine tartrate ophth soln 0.2%</i>	131

<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	130
<i>brinzolamide ophth susp 1%</i>	130
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	129
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	59
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	59
<i>BRYHALI LOT 0.01%</i>	144
<i>budesonide delayed release particles cap 3 mg</i>	101
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	139
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	139
<i>budesonide inhalation susp 0.25 mg/2ml</i>	139
<i>budesonide inhalation susp 0.5 mg/2ml</i>	139
<i>budesonide inhalation susp 1 mg/2ml</i>	139
<i>budesonide tab er 24hr 9 mg</i>	101
<i>BUFFERIN TAB 325MG</i>	12
<i>BULB IRR SYR MIS 60ML</i>	122
<i>bumetanide tab 0.5 mg</i>	48
<i>bumetanide tab 1 mg</i>	48
<i>bumetanide tab 2 mg</i>	48
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	10
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	77
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	76
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	76
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	76
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	77
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	77
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	77
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	77

<i>buprenorphine td patch weekly 10 mcg/hr</i>	11
<i>buprenorphine td patch weekly 15 mcg/hr</i>	11
<i>buprenorphine td patch weekly 20 mcg/hr</i>	11
<i>buprenorphine td patch weekly 5 mcg/hr</i>	10
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	10
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	78
<i>bupropion hcl tab 100 mg</i>	55
<i>bupropion hcl tab 75 mg</i>	55
<i>bupropion hcl tab er 12hr 100 mg</i>	55
<i>bupropion hcl tab er 12hr 150 mg</i>	55
<i>bupropion hcl tab er 12hr 200 mg</i>	55
<i>bupropion hcl tab er 24hr 150 mg</i>	55
<i>bupropion hcl tab er 24hr 300 mg</i>	55
<i>buspirone hcl tab 10 mg</i>	52
<i>buspirone hcl tab 15 mg</i>	52
<i>buspirone hcl tab 30 mg</i>	52
<i>buspirone hcl tab 5 mg</i>	52
<i>buspirone hcl tab 7.5 mg</i>	52
<i>busulfan inj 6 mg/ml</i>	26
<i>butorphanol tartrate inj 1 mg/ml</i>	3
<i>butorphanol tartrate inj 2 mg/ml</i>	3
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	3
C	
<i>C-500 Chw 500mg</i>	149
<i>CABENUVA SUS 400-600</i>	16
<i>CABENUVA SUS 600-900</i>	16
<i>cabergoline tab 0.5 mg</i>	96
<i>CABOMETYX TAB 20MG</i>	30
<i>CABOMETYX TAB 40MG</i>	30
<i>CABOMETYX TAB 60MG</i>	30
<i>CA CITRATE TAB 250MG</i>	122
<i>CADEAU DHA CAP</i>	124
<i>CA GLUCONATE TAB 50MG</i>	122
<i>CA LACTATE TAB 100MG</i>	122
<i>Caladryl Clr Lot 1-0.1%</i>	146
<i>CALADRYL LOT 1-8%</i>	146
<i>CALAMINE LOT 8-8%</i>	147
<i>Cal Antacid Chw 1000mg</i>	12
<i>Calc Antacid Chw 500mg</i>	12
<i>Calc Antacid Chw 750mg</i>	12
<i>CALC CHEWABL CHW 600 PLUS</i>	126

CALCI-CHEW CHW 1250MG	122
calcipotriene-betamethasone dipropionate oint 0.005-0.064%	143
calcipotriene soln 0.005% (50 mcg/ml)	143
calcitonin (salmon) nasal soln 200 unit/act	85
Calcitrate Tab 950mg	122
calcitriol cap 0.25 mcg	98
calcitriol cap 0.5 mcg	98
calcitriol oint 3 mcg/gm	143
calcitriol oral soln 1 mcg/ml	98
CALCIUM/D3 WAF	123
Calcium/d Chw 500-400	123
Calcium 600+d	122
Calcium 600 Tab	122
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	96
calcium acetate (phosphate binder) tab 667 mg	96
calcium carbonate (antacid) susp 1250 mg/5ml	12
calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)	123
calcium carbonate tab 1250 mg (500 mg elemental ca)	122
CALCIUM CARB TAB 648MG	12
calcium citrate tab 950 mg (200 mg elemental ca)	123
Calcium Citrate-Vitamin D Tab 315 mg-250 unit	123
CALCIUM CIT TAB 1040MG	123
calcium cit-vitamin d tab 315 mg-5 mcg(200 unit) (elem ca)	123
calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)	123
CALCIUM GLUC TAB 500MG	123
CALCIUM LACT TAB 648MG	123
CALCIUM LACT TAB 750MG	123
CALCIUM SOFT CHW CHOCOLAT	123
Calcium Soft Chw Mlk Choc	123
CALCIUM TAB 333MG	123
Callus Remov Pad 40%	146
CALNA TAB	124
CALQUENCE TAB 100MG	30

CALTRATE +D3 TAB 600-800	123
Camila	86
Camrese	86
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	38
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	38
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	39
candesartan cilexetil tab 16 mg	39
candesartan cilexetil tab 32 mg	39
candesartan cilexetil tab 4 mg	39
candesartan cilexetil tab 8 mg	39
capecitabine tab 150 mg	27
capecitabine tab 500 mg	27
CAPRELSA TAB 100MG	30
CAPRELSA TAB 300MG	30
capsaicin cream 0.025%	146
Capsaicin Hp Cre 0.1%	146
captopril tab 100 mg	37
captopril tab 12.5 mg	37
captopril tab 25 mg	37
captopril tab 50 mg	37
CAPVAXIVE INJ 0.5ML	118
CAPZASIN-P CRE 0.035%	146
carbamazepine cap er 12hr 100 mg	64
carbamazepine cap er 12hr 200 mg	64
carbamazepine cap er 12hr 300 mg	64
carbamazepine chew tab 100 mg	64
carbamazepine chew tab 200 mg	64
carbamazepine susp 100 mg/5ml	64
carbamazepine tab 200 mg	64
carbamazepine tab er 12hr 100 mg	64
carbamazepine tab er 12hr 200 mg	64
carbamazepine tab er 12hr 400 mg	64
carbidopa & levodopa orally disintegrating tab 10-100 mg	60
carbidopa & levodopa orally disintegrating tab 25-100 mg	60
carbidopa & levodopa orally disintegrating tab 25-250 mg	60
carbidopa & levodopa tab 10-100 mg	60
carbidopa & levodopa tab 25-100 mg	60
carbidopa & levodopa tab 25-250 mg	60

carbidopa & levodopa tab er 25-100 mg ..60	cefadroxil for susp 500 mg/5ml .....18
carbidopa & levodopa tab er 50-200 mg .60	cefadroxil tab 1 gm.....18
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg .....60	cefazolin sodium for inj 1 gm .....18
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg.....60	cefdinir cap 300 mg .....18
carbidopa-levodopa-entacapone tabs 25-100-200 mg .....60	cefdinir for susp 125 mg/5ml.....18
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg .....60	cefdinir for susp 250 mg/5ml.....18
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg .....60	cefepime hcl for inj 1 gm .....18
carbidopa-levodopa-entacapone tabs 50-200-200 mg.....60	cefepime hcl for iv soln 2 gm.....18
carbidopa tab 25 mg .....60	cefixime cap 400 mg.....18
carbinoxamine maleate soln 4 mg/5ml...133	cefixime for susp 100 mg/5ml .....18
carbinoxamine maleate tab 4 mg .....133	cefixime for susp 200 mg/5ml.....18
carboplatin iv soln 150 mg/15ml.....35	cefpodoxime proxetil for susp 100 mg/5ml .....18
carboplatin iv soln 450 mg/45ml .....35	cefpodoxime proxetil for susp 50 mg/5ml18
carboplatin iv soln 50 mg/5ml.....35	cefpodoxime proxetil tab 100 mg .....18
carboplatin iv soln 600 mg/60ml.....35	cefpodoxime proxetil tab 200 mg .....18
CARDURA XL TAB 4MG .....104	cefprozil for susp 125 mg/5ml.....18
CARDURA XL TAB 8MG .....104	cefprozil for susp 250 mg/5ml.....18
CAREFINE MIS 32GX6MM.....89	cefprozil tab 250 mg.....18
carglumic acid soluble tab 200 mg .....98	cefprozil tab 500 mg .....18
carisoprodol tab 350 mg.....75	ceftazidime for iv soln 2 gm.....18
carmustine for inj 100 mg.....26	ceftriaxone sodium for inj 10 gm.....19
carteolol hcl ophth soln 1% .....129	ceftriaxone sodium for inj 1 gm .....19
Cartia Xt.....46	ceftriaxone sodium for inj 250 mg.....19
carvedilol phosphate cap er 24hr 10 mg..44	ceftriaxone sodium for inj 2 gm .....19
carvedilol phosphate cap er 24hr 20 mg ..44	ceftriaxone sodium for inj 500 mg .....19
carvedilol phosphate cap er 24hr 40 mg..44	ceftriaxone sodium for iv soln 1 gm .....19
carvedilol phosphate cap er 24hr 80 mg..44	ceftriaxone sodium for iv soln 2 gm .....19
carvedilol tab 12.5 mg.....44	cefuroxime axetil tab 250 mg .....19
carvedilol tab 25 mg .....45	cefuroxime axetil tab 500 mg .....19
carvedilol tab 3.125 mg .....44	celecoxib cap 100 mg.....1
carvedilol tab 6.25 mg .....44	celecoxib cap 200 mg .....1
CAYA DPR .....121	celecoxib cap 50 mg .....1
CAYSTON INH 75MG.....135	CELLCEPT CAP 250MG .....116
cefaclor cap 250 mg.....18	CELLCEPT IV INJ 500MG .....117
cefaclor cap 500 mg .....18	CELLCEPT SUS 200MG/ML .....117
cefaclor for susp 250 mg/5ml.....18	CELLCEPT TAB 500MG.....117
cefadroxil cap 500 mg .....18	CENTRUM CHW VITAMINT .....123
cefadroxil for susp 250 mg/5ml .....18	CENTRUM KIDS CHW .....124
	CENTRUM LIQ.....123
	CENTRUM SPEC PAK PRENATAL.....124
	CENTRUM TAB SILVER.....123
	cephalexin cap 250 mg.....19
	cephalexin cap 500 mg .....19

<i>cephalexin cap 750 mg</i>	19	<i>cholestyramine powder 4 gm/dose</i>	41
<i>cephalexin for susp 125 mg/5ml</i>	19	<i>cholestyramine powder packets 4 gm</i>	41
<i>cephalexin for susp 250 mg/5ml</i>	19	<i>choline fenofibrate cap dr 135 mg</i> (fenofibric acid equiv)	41
<i>cephalexin tab 250 mg</i>	19	<i>choline fenofibrate cap dr 45 mg (fenofibric</i> acid equiv)	41
<i>cephalexin tab 500 mg</i>	19	<i>CHOR GONADOT INJ 10000UNT</i>	90
<i>CERAVE OIN 46.5%</i>	147	<i>ciclopirox gel 0.77%</i>	142
<i>CERDELGA CAP 84MG</i>	93	<i>ciclopirox olamine cream 0.77% (base</i> equiv)	142
<i>Cetirizine Tab 5mg</i>	133	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	142
<i>cevimeline hcl cap 30 mg</i>	148	<i>ciclopirox shampoo 1%</i>	142
<i>Chateal Eq</i>	86	<i>ciclopirox solution 8%</i>	142
<i>CHEMET CAP 100MG</i>	85	<i>cidofovir iv inj 75 mg/ml</i>	17
<i>Chewabl Vite Chw Childrns</i>	124	<i>cilostazol tab 100 mg</i>	109
<i>chlordiazepoxide-amitriptyline tab 10-25</i> mg	77	<i>cilostazol tab 50 mg</i>	109
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i> mg	77	<i>CIMDUO TAB 300-300</i>	16
<i>chlordiazepoxide hcl cap 10 mg</i>	52	<i>cimetidine tab 200 mg</i>	101
<i>chlordiazepoxide hcl cap 25 mg</i>	52	<i>cimetidine tab 300 mg</i>	101
<i>chlordiazepoxide hcl cap 5 mg</i>	52	<i>cimetidine tab 400 mg</i>	101
<i>chlorhexidine gluconate soln 0.12%</i>	148	<i>cimetidine tab 800 mg</i>	101
<i>chloroquine phosphate tab 250 mg</i>	14	<i>cinacalcet hcl tab 30 mg (base equiv)</i>	84
<i>chloroquine phosphate tab 500 mg</i>	14	<i>cinacalcet hcl tab 60 mg (base equiv)</i>	84
<i>chlorpromazine hcl inj 25 mg/ml</i>	61	<i>cinacalcet hcl tab 90 mg (base equiv)</i>	84
<i>chlorpromazine hcl inj 50 mg/2ml</i>	61	<i>CIPRO (10%) SUS 500MG/5</i>	20
<i>chlorpromazine hcl tab 100 mg</i>	62	<i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%	148
<i>chlorpromazine hcl tab 10 mg</i>	62	<i>ciprofloxacin-fluocinolone aceton (pf) otic</i> soln 0.3-0.025%	149
<i>chlorpromazine hcl tab 200 mg</i>	62	<i>ciprofloxacin hcl ophth soln 0.3% (base</i> equivalent)	128
<i>chlorpromazine hcl tab 25 mg</i>	62	<i>ciprofloxacin hcl otic soln 0.2% (base</i> equivalent)	148
<i>chlorpromazine hcl tab 50 mg</i>	62	<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	20
<i>chlorthalidone tab 25 mg</i>	48	<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	20
<i>chlorthalidone tab 50 mg</i>	48	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	20
<i>CHLOR-TRIMET SYP 2MG/5ML</i>	133	<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	35
<i>CHLOR-TRIMET TAB 12MG CR</i>	133	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	35
<i>CHLOR-TRIMET TAB 4MG</i>	133	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	35
<i>chlorzoxazone tab 500 mg</i>	75	<i>citalopram hydrobromide oral soln 10</i> mg/5ml	55
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	149		
<i>cholecalciferol cap 10 mcg (400 unit)</i>	149		
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	149		
<i>cholecalciferol tab 10 mcg (400 unit)</i>	149		
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	149		
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	149		
<i>cholestyramine light powder 4 gm/dose</i>	41		
<i>cholestyramine light powder packets 4 gm</i>	41		

<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	55	<i>Clobetasol Propionate Emo</i>	144
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	55	<i>clobetasol propionate foam 0.05%</i>	144
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	55	<i>clobetasol propionate gel 0.05%</i>	144
<i>CITRUCEL POW ORANGE</i>	120	<i>clobetasol propionate lotion 0.05%</i>	144
<i>CITRUCEL TAB 500MG</i>	120	<i>clobetasol propionate oint 0.05%</i>	144
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i> ...	27	<i>clobetasol propionate shampoo 0.05%</i> ..	144
<i>clarithromycin for susp 125 mg/5ml</i>	19	<i>clobetasol propionate soln 0.05%</i>	144
<i>clarithromycin for susp 250 mg/5ml</i>	19	<i>clobetasol propionate spray 0.05%</i>	144
<i>clarithromycin tab 250 mg</i>	19	<i>clocortolone pivalate cream 0.1%</i>	144
<i>clarithromycin tab 500 mg</i>	19	<i>clofarabine iv soln 1 mg/ml</i>	27
<i>clarithromycin tab er 24hr 500 mg</i>	19	<i>Clomid</i>	90
<i>CLARITIN RDT TAB 5MG</i>	133	<i>clomipramine hcl cap 25 mg</i>	53
<i>Clean&clear Liq 2%</i>	146	<i>clomipramine hcl cap 50 mg</i>	53
<i>Clearlax Pow</i>	120	<i>clomipramine hcl cap 75 mg</i>	53
<i>clemastine fumarate tab 2.68 mg</i>	133	<i>clonazepam tab 0.5 mg</i>	64
<i>CLENPIQ SOL</i>	102	<i>clonazepam tab 1 mg</i>	64
<i>CLEOCIN SUP 100MG</i>	106	<i>clonazepam tab 2 mg</i>	64
<i>CLIMARA PRO DIS WEEKLY</i>	93	<i>clonidine hcl tab 0.1 mg</i>	49
<i>clindamycin hcl cap 150 mg</i>	21	<i>clonidine hcl tab 0.2 mg</i>	49
<i>clindamycin hcl cap 300 mg</i>	21	<i>clonidine hcl tab 0.3 mg</i>	49
<i>clindamycin hcl cap 75 mg</i>	21	<i>clonidine td patch weekly 0.1 mg/24hr</i>	49
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	21	<i>clonidine td patch weekly 0.2 mg/24hr</i>	49
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	141	<i>clonidine td patch weekly 0.3 mg/24hr</i>	49
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	141	<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	109
<i>clindamycin phosphate foam 1%</i>	140	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	109
<i>clindamycin phosphate gel 1%</i>	140	<i>clorazepate dipotassium tab 15 mg</i>	64
<i>clindamycin phosphate inj 9 gm/60ml</i>	21	<i>clorazepate dipotassium tab 3.75 mg</i>	64
<i>clindamycin phosphate lotion 1%</i>	141	<i>clorazepate dipotassium tab 7.5 mg</i>	64
<i>clindamycin phosphate soln 1%</i>	141	<i>clotrimazole cream 1%</i>	142
<i>clindamycin phosphate swab 1%</i>	141	<i>clotrimazole soln 1%</i>	142
<i>clindamycin phosphate vaginal cream 2%</i>	106	<i>clotrimazole troche 10 mg</i>	148
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	140	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	142
<i>clobazam suspension 2.5 mg/ml</i>	64	<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	142
<i>clobazam tab 10 mg</i>	64	<i>clozapine orally disintegrating tab 100 mg</i>	62
<i>clobazam tab 20 mg</i>	64	<i>clozapine orally disintegrating tab 12.5 mg</i>	62
<i>clobetasol propionate cream 0.05%</i>	144	<i>clozapine orally disintegrating tab 150 mg</i>	62

<i>clozapine orally disintegrating tab 200 mg</i>	CREON CAP 36000UNT	103
.....62	CREON CAP 6000UNIT	103
<i>clozapine orally disintegrating tab 25 mg</i>	CRESEMBA CAP 186MG	13
<i>clozapine tab 100 mg</i>.....62	CRESEMBA CAP 74.5MG	13
<i>clozapine tab 200 mg</i>.....62	CRINONE GEL 4% VAG.....97	
<i>clozapine tab 25 mg</i>.....62	CRINONE GEL 8% VAG.....97	
<i>clozapine tab 50 mg</i>.....62	<i>cromolyn sodium ophth soln 4%</i>.....129	
COARTEM TAB 20-120MG.....14	<i>cromolyn sodium oral conc 100 mg/5ml</i> 102	
<i>codeine sulfate tab 30 mg</i>.....3	<i>cromolyn sodium soln nebu 20 mg/2ml</i> ..136	
CODEINE SULF TAB 60MG.....3	<i>Crotan</i>.....147	
<i>cod liver oil cap</i>.....125	<i>Cryselle-28</i>.....86	
<i>colchicine tab 0.6 mg</i>.....2	CUTAQUIG SOL 1.65GM	116
<i>colchicine w/ probenecid tab 0.5-500 mg</i> .2	CUTAQUIG SOL 1GM	116
<i>Cold/cough Liq Child</i>.....79	CUTAQUIG SOL 2GM.....116	
<i>colesevelam hcl packet for susp 3.75 gm</i> .41	CUTAQUIG SOL 3.3GM.....116	
<i>colesevelam hcl tab 625 mg</i>.....41	CUTAQUIG SOL 4GM.....116	
<i>colestipol hcl granule packets 5 gm</i>.....41	CUTAQUIG SOL 8GM.....116	
<i>colestipol hcl granules 5 gm</i>.....41	<i>Cvs Ivermectin Lice Treat</i>.....147	
<i>colestipol hcl tab 1 gm</i>.....41	CVS KETONE TES CARE	89
COMETRIQ KIT 100MG.....30	<i>Cvs Lice Treatment</i>.....147	
COMETRIQ KIT 140MG.....30	CVS PRENATAL CHW GUMMY	124
COMETRIQ KIT 60MG.....30	<i>Cvs Sleep-Aid Nighttime</i>.....72	
COMIRNATY INJ 2024-25	<i>cyanocobalamin sl tab 1000 mcg</i>	110
COMIRNATY INJ 30/0.3ML.....118	<i>cyanocobalamin sl tab 500 mcg</i>.....110	
COMP PRNATAL MIS DHA	<i>cyclobenzaprine hcl tab 10 mg</i>.....75	
124	<i>cyclobenzaprine hcl tab 5 mg</i>.....75	
<i>Compro</i>.....99	<i>cyclophosphamide cap 25 mg</i>.....26	
CONDOMS MIS	<i>cyclophosphamide cap 50 mg</i>.....26	
86	<i>cyclophosphamide for inj 1 gm</i>.....26	
CORICIDN HBP TAB CGH&COLD	<i>cyclophosphamide for inj 2 gm</i>.....26	
79	<i>cyclophosphamide for inj 500 mg</i>.....26	
CORICIDN HBP TAB COLD/FLU	<i>cycloserine cap 250 mg</i>.....17	
79	<i>cyclosporine cap 100 mg</i>.....117	
CORLANOR SOL 5MG/5ML	<i>cyclosporine cap 25 mg</i>.....117	
49	<i>cyclosporine iv soln 50 mg/ml</i>.....117	
CORLANOR TAB 5MG.....49	<i>cyclosporine modified cap 100 mg</i>.....117	
CORLANOR TAB 7.5MG.....49	<i>cyclosporine modified cap 25 mg</i>.....117	
<i>corn dextrin oral powder</i>.....120	<i>cyclosporine modified cap 50 mg</i>.....117	
CORTIFOAM AER 90MG	<i>cyclosporine modified oral soln 100 mg/ml</i>	
101	117	
CORTISPORIN SUS -TC OTIC	<i>ciproheptadine hcl syrup 2 mg/5ml</i>.....133	
149	<i>ciproheptadine hcl tab 4 mg</i>.....133	
COSENTYX INJ 150MG/ML.....111	CYSTAGON CAP 150MG.....96	
COSENTYX INJ 300DOSE.....112	CYSTAGON CAP 50MG.....96	
COSENTYX INJ 75MG/0.5		
111		
COSENTYX PEN INJ 150MG/ML.....112		
COSENTYX PEN INJ 300DOSE		
112		
COSENTYX UNO INJ 300/2ML.....112		
CREON CAP 12000UNT.....103		
CREON CAP 24000UNT.....103		
CREON CAP 3000UNIT.....103		

CYSTARAN SOL 0.44%	130
cytarabine inj 20 mg/ml	27
cytarabine inj pf 100 mg/ml	27
cytarabine inj pf 20 mg/ml	27
D	
dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	107
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	107
dabigatran etexilate mesylate cap 75 mg (etexilate base eq)	107
dacarbazine for inj 100 mg	26
dacarbazine for inj 200 mg	26
Daily-Vite/ Tab Iron	123
dalfampridine tab er 12hr 10 mg	74
danazol cap 100 mg	90
danazol cap 200 mg	90
danazol cap 50 mg	90
dantrolene sodium cap 100 mg	75
dantrolene sodium cap 25 mg	75
dantrolene sodium cap 50 mg	75
dapsone tab 100 mg	21
dapsone tab 25 mg	21
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	106
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	106
darunavir tab 600 mg	14
darunavir tab 800 mg	14
dasatinib tab 100 mg	31
dasatinib tab 140 mg	31
dasatinib tab 20 mg	30
dasatinib tab 50 mg	30
dasatinib tab 70 mg	30
dasatinib tab 80 mg	31
Dasetta 1/35	86
Dasetta 7/7/7	86
daunorubicin hcl iv soln 20 mg/4ml (base equiv)	26
DAYVIGO TAB 10MG	72
DAYVIGO TAB 5MG	72
decitabine for inj 50 mg	27
deferiprone tab 1000 mg	85
deferiprone tab 500 mg	85

deflazacort susp 22.75 mg/ml	90
deflazacort tab 18 mg	90
deflazacort tab 30 mg	91
deflazacort tab 36 mg	91
deflazacort tab 6 mg	90
Delyla	86
demeclocycline hcl tab 150 mg	24
demeclocycline hcl tab 300 mg	24
DENG VAXIA SUS	118
DEPO-ESTRADI INJ 5MG/ML	93
DEPO-MEDROL INJ 20MG/ML	91
DEPO-SQ PROV INJ 104	86
DESCOVY TAB 120-15MG	16
DESCOVY TAB 200/25MG	16
Desenex Cre 1%	142
desipramine hcl tab 100 mg	55
desipramine hcl tab 10 mg	55
desipramine hcl tab 150 mg	55
desipramine hcl tab 25 mg	55
desipramine hcl tab 50 mg	55
desipramine hcl tab 75 mg	55
desloratadine tab 5 mg	133
desloratadine tab orally disintegrating 2.5 mg	133
desloratadine tab orally disintegrating 5 mg	133
desmopressin acetate inj 4 mcg/ml	98
desmopressin acetate nasal spray soln 0.01%	98
desmopressin acetate nasal spray soln 0.01% (refrigerated)	98
desmopressin acetate preservative free (pf) inj 4 mcg/ml	98
desmopressin acetate tab 0.1 mg	98
desmopressin acetate tab 0.2 mg	98
desonide cream 0.05%	144
desonide lotion 0.05%	145
desonide oint 0.05%	145
desoximetasone cream 0.05%	145
desoximetasone cream 0.25%	145
desoximetasone gel 0.05%	145
desoximetasone oint 0.25%	145
desoximetasone spray 0.25%	145

<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	55	<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	69
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	55	<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	69
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	55	<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	69
<i>DEXAMETHASON CON 1MG/ML</i>	91	<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	69
<i>dexamethasone elixir 0.5 mg/5ml</i>	91	<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	69
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	91	<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	69
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	91	<i>dexmethylphenidate hcl tab 10 mg</i>	69
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	91	<i>dexmethylphenidate hcl tab 2.5 mg</i>	69
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	91	<i>dexmethylphenidate hcl tab 5 mg</i>	69
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	91	<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	35
<i>dexamethasone sodium phosphate inj soln pref syr 4 mg/ml</i>	91	<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	35
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	129	<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	69
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	91	<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	69
<i>dexamethasone soln 0.5 mg/5ml</i>	91	<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	69
<i>dexamethasone tab 0.5 mg</i>	91	<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	69
<i>dexamethasone tab 0.75 mg</i>	91	<i>dextroamphetamine sulfate tab 10 mg</i>	70
<i>dexamethasone tab 1.5 mg</i>	91	<i>dextroamphetamine sulfate tab 15 mg</i>	70
<i>dexamethasone tab 1 mg</i>	91	<i>dextroamphetamine sulfate tab 20 mg</i>	70
<i>dexamethasone tab 2 mg</i>	91	<i>dextroamphetamine sulfate tab 30 mg</i>	70
<i>dexamethasone tab 4 mg</i>	91	<i>dextroamphetamine sulfate tab 5 mg</i>	69
<i>dexamethasone tab 6 mg</i>	91	<i>DHS TAR SHA</i>	149
<i>DEXCOM G5 MIS RECEIVER</i>	89	<i>Diaper Rash Cre 13%</i>	147
<i>DEXCOM G5 MIS TRANSMIT</i>	89	<i>Diaper Rash Pst 40%</i>	148
<i>DEXCOM G6 MIS RECEIVER</i>	89	<i>diazepam inj 5 mg/ml</i>	64
<i>DEXCOM G6 MIS SENSOR</i>	89	<i>Diazepam Intensol</i>	64
<i>DEXCOM G6 MIS TRANSMIT</i>	89	<i>diazepam oral soln 1 mg/ml</i>	65
<i>DEXCOM G7 MIS RECEIVER</i>	89	<i>diazepam tab 10 mg</i>	65
<i>DEXCOM G7 MIS SENSOR</i>	89	<i>diazepam tab 2 mg</i>	65
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	69	<i>diazepam tab 5 mg</i>	65
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	69	<i>dibucaine oint 1%</i>	146
		<i>diclofenac potassium tab 50 mg</i>	2

<i>diclofenac sodium (actinic keratoses) gel</i>		<i>diltiazem hcl coated beads cap er 24hr 300</i>	
3%	2	mg	46
<i>diclofenac sodium gel 1% (1.16%</i>		<i>diltiazem hcl coated beads cap er 24hr 360</i>	
<i>diethylamine equiv)</i>	146	mg	46
<i>diclofenac sodium ophth soln 0.1%</i>	129	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 25</i>		<i>er 24hr 120 mg</i>	46
<i>mg</i>	2	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 50</i>		<i>er 24hr 180 mg</i>	46
<i>mg</i>	2	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 75</i>		<i>er 24hr 240 mg</i>	46
<i>mg</i>	2	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	<i>er 24hr 300 mg</i>	46
<i>diclofenac w/ misoprostol tab delayed</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>release 50-0.2 mg</i>	3	<i>er 24hr 360 mg</i>	47
<i>diclofenac w/ misoprostol tab delayed</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>release 75-0.2 mg</i>	3	<i>er 24hr 420 mg</i>	47
<i>dicloxacillin sodium cap 250 mg</i>	24	<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	
<i>dicloxacillin sodium cap 500 mg</i>	24	.....	47
<i>dicyclomine hcl cap 10 mg</i>	99	<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	
<i>dicyclomine hcl inj 10 mg/ml</i>	99	.....	47
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	99	<i>diltiazem hcl tab 120 mg</i>	47
<i>dicyclomine hcl tab 20 mg</i>	99	<i>diltiazem hcl tab 30 mg</i>	47
<i>DIFICID SUS</i>	20	<i>diltiazem hcl tab 60 mg</i>	47
<i>DIFICID TAB 200MG</i>	20	<i>diltiazem hcl tab 90 mg</i>	47
<i>diflorasone diacetate cream 0.05%</i>	145	<i>diltiazem hcl tab er 24hr 120 mg</i>	47
<i>diflorasone diacetate oint 0.05%</i>	145	<i>Dilt-Xr</i>	46
<i>diflunisal tab 500 mg</i>	11	<i>DIMETAPP CLD ELX /ALLERGY</i>	79
<i>difluprednate ophth emulsion 0.05%</i>	129	<i>Dimetapp Liq Nighttim</i>	79
<i>digoxin oral soln 0.05 mg/ml</i>	48	<i>DIMETAPP SYP CGH/COLD</i>	79
<i>digoxin tab 125 mcg (0.125 mg)</i>	48	<i>dimethyl fumarate capsule delayed release</i>	
<i>digoxin tab 250 mcg (0.25 mg)</i>	48	<i>120 mg</i>	75
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	48	<i>dimethyl fumarate capsule delayed release</i>	
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	72	<i>240 mg</i>	75
<i>DILANTIN CAP 30MG</i>	65	<i>dimethyl fumarate capsule dr starter pack</i>	
<i>diltiazem hcl cap er 12hr 120 mg</i>	46	<i>120 mg & 240 mg</i>	75
<i>diltiazem hcl cap er 12hr 60 mg</i>	46	<i>Diocto Syp 60/15ml</i>	121
<i>diltiazem hcl cap er 12hr 90 mg</i>	46	<i>DIPENTUM CAP 250MG</i>	101
<i>diltiazem hcl coated beads cap er 24hr 120</i>		<i>Diphenhydram Cap 50mg</i>	133
<i>mg</i>	46	<i>diphenhydramine hcl inj 50 mg/ml</i>	133
<i>diltiazem hcl coated beads cap er 24hr 180</i>		<i>diphenoxylate w/ atropine liq 2.5-0.025</i>	
<i>mg</i>	46	<i>mg/5ml</i>	25
<i>diltiazem hcl coated beads cap er 24hr 240</i>		<i>diphenoxylate w/ atropine tab 2.5-0.025</i>	
<i>mg</i>	46	mg	99
		<i>dipyridamole tab 25 mg</i>	109

<i>dipyridamole tab 50 mg</i>	109	<i>dorzolamide hcl-timolol maleate ophth soln</i>	
<i>dipyridamole tab 75 mg</i>	109	2-0.5%	130
<i>disopyramide phosphate cap 100 mg</i>	40	DOVATO TAB 50-300MG.....	16
<i>disopyramide phosphate cap 150 mg</i>	40	<i>doxazosin mesylate tab 1 mg</i>	104
<i>disulfiram tab 250 mg</i>	52	<i>doxazosin mesylate tab 2 mg</i>	104
<i>disulfiram tab 500 mg</i>	52	<i>doxazosin mesylate tab 4 mg</i>	104
DIURIL SUS 250/5ML	48	<i>doxazosin mesylate tab 8 mg</i>	104
<i>divalproex sodium cap delayed release</i>		<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	72
<i>sprinkle 125 mg</i>	65	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	72
<i>divalproex sodium tab delayed release 125</i>		<i>doxepin hcl cap 100 mg</i>	56
<i>mg</i>	65	<i>doxepin hcl cap 10 mg</i>	56
<i>divalproex sodium tab delayed release 250</i>		<i>doxepin hcl cap 150 mg</i>	56
<i>mg</i>	65	<i>doxepin hcl cap 25 mg</i>	56
<i>divalproex sodium tab delayed release 500</i>		<i>doxepin hcl cap 50 mg</i>	56
<i>mg</i>	65	<i>doxepin hcl cap 75 mg</i>	56
<i>divalproex sodium tab er 24 hr 250 mg</i>	65	<i>doxepin hcl conc 10 mg/ml</i>	56
<i>divalproex sodium tab er 24 hr 500 mg</i>	65	<i>doxepin hcl cream 5%</i>	143
<i>docetaxel for inj conc 160 mg/8ml (20</i>		<i>doxercalciferol cap 0.5 mcg</i>	98
<i>mg/ml)</i>	35	<i>doxercalciferol cap 1 mcg</i>	98
<i>docetaxel for inj conc 20 mg/ml</i>	35	<i>doxercalciferol cap 2.5 mcg</i>	98
<i>docetaxel for inj conc 80 mg/4ml (20</i>		<i>doxorubicin hcl for inj 10 mg</i>	26
<i>mg/ml)</i>	35	<i>doxorubicin hcl inj 2 mg/ml</i>	26
<i>docetaxel soln for iv infusion 160 mg/16ml</i>		<i>doxorubicin hcl liposomal susp (for iv</i>	
.....	35	<i>infusion) 2 mg/ml</i>	26
<i>docetaxel soln for iv infusion 20 mg/2ml</i> ..	35	Doxy 100	24
<i>docetaxel soln for iv infusion 80 mg/8ml</i> .	35	<i>doxycycline hyclate cap 100 mg</i>	24
<i>docusate calcium cap 240 mg</i>	121	<i>doxycycline hyclate cap 50 mg</i>	24
<i>docusate sodium cap 250 mg</i>	121	<i>doxycycline hyclate for inj 100 mg</i>	24
<i>docusate sodium liquid 150 mg/15ml</i>	121	<i>doxycycline hyclate tab 100 mg</i>	24
<i>dofetilide cap 125 mcg (0.125 mg)</i>	40	<i>doxycycline hyclate tab 20 mg</i>	24
<i>dofetilide cap 250 mcg (0.25 mg)</i>	40	<i>doxycycline monohydrate cap 100 mg</i>	24
<i>dofetilide cap 500 mcg (0.5 mg)</i>	40	<i>doxycycline monohydrate cap 50 mg</i>	24
<i>donepezil hydrochloride orally</i>		<i>doxycycline monohydrate for susp 25</i>	
<i>disintegrating tab 10 mg</i>	53	<i>mg/5ml</i>	24
<i>donepezil hydrochloride orally</i>		<i>doxycycline monohydrate tab 150 mg</i>	24
<i>disintegrating tab 5 mg</i>	53	<i>doxycycline monohydrate tab 50 mg</i>	24
<i>donepezil hydrochloride tab 10 mg</i>	53	<i>doxycycline monohydrate tab 75 mg</i>	24
<i>donepezil hydrochloride tab 23 mg</i>	53	DRAMAMINE CHW 50MG.....	99
<i>donepezil hydrochloride tab 5 mg</i>	53	<i>Dramamine Tab 25mg</i>	99
DOPTELET TAB 20MG (10 TABLETS).....	110	DRAMAMINE TAB 50MG.....	99
DOPTELET TAB 20MG (15 TABLETS).....	110	<i>dronabinol cap 10 mg</i>	99
DOPTELET TAB 20MG (30 TABLETS).....	110	<i>dronabinol cap 2.5 mg</i>	99
<i>dorzolamide hcl ophth soln 2%</i>	130	<i>dronabinol cap 5 mg</i>	99

<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	86
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	86
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	86
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	86
DROXIA CAP 200MG.....	110
DROXIA CAP 300MG.....	110
DROXIA CAP 400MG	110
DR SMITHS OIN DIAPER	148
DRY MOUTH SPR	148
<i>Dual Action Chw Complete</i>	104
DUAVEE TAB 0.45-20	93
<i>duloxetine hcl cap 20 mg</i>	56
<i>duloxetine hcl cap 30 mg</i>	56
<i>duloxetine hcl cap 60 mg</i>	56
DUPIXENT INJ 200/1.14.....	143
DUPIXENT INJ 200MG	138
DUPIXENT INJ 300/2ML	138, 143
DUREX MIS REALFEEL	86
<i>dutasteride cap 0.5 mg</i>	104
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	104
D-VI-SOL LIQ 400UNIT	149
E	
E600 CAP 600UNIT	149
<i>Easy-Lax Pls Tab 8.6-50mg</i>	120
EBGLYSS INJ 250/2ML	143, 144
<i>econazole nitrate cream 1%</i>	142
ECOTRIN M/S TAB 500MG EC	12
<i>Ed-Apap Liq 80mg/2.5</i>	11
EDURANT TAB 25MG.....	14
<i>efavirenz cap 200 mg</i>	14
<i>efavirenz cap 50 mg</i>	14
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	16
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	16
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	16
<i>efavirenz tab 600 mg</i>	14
<i>Effer-K</i>	125

ELESTRIN GEL 0.06%	93
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	73
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	73
ELIGARD INJ 22.5MG	29
ELIGARD INJ 30MG	29
ELIGARD INJ 45MG	29
ELIGARD INJ 7.5MG	29
<i>Elinest</i>	86
ELIQUIS ST P TAB 5MG	107
ELIQUIS TAB 2.5MG	107
ELIQUIS TAB 5MG	107
<i>Elite-Ob</i>	124
ELLA TAB 30MG.....	86
ELMIRON CAP 100MG.....	105
EMCYT CAP 140MG.....	26
EMFLAZA SUS 22.75/ML	91
EMGALITY INJ 100MG/ML	73
EMGALITY INJ 120MG/ML	73
EMSAM DIS 12MG/24H.....	56
EMSAM DIS 6MG/24HR	56
EMSAM DIS 9MG/24HR	56
<i>emtricitabine caps 200 mg</i>	14
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	16
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	16
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	16
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	16
EMTRIVA SOL 10MG/ML	14
EMVERM CHW 100MG	13
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	37
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	37
<i>enalapril maleate tab 10 mg</i>	37
<i>enalapril maleate tab 2.5 mg</i>	37
<i>enalapril maleate tab 20 mg</i>	37
<i>enalapril maleate tab 5 mg</i>	37
ENBREL INJ 25/0.5ML	112
ENBREL INJ 25MG	112

ENBREL INJ 50MG/ML	112	epinastine hcl ophth soln 0.05%	129
ENBREL MINI INJ 50MG/ML	112	epinephrine solution auto-injector 0.15	
ENBREL SRCLK INJ 50MG/ML	112	mg/0.15ml (1:1000)	132
ENCARE SUP 100MG	105	epinephrine solution auto-injector 0.15	
endocet tab 10-325mg	4	mg/0.3ml (1:2000)	132
endocet tab 2.5-325.....	4	epinephrine solution auto-injector 0.3	
endocet tab 5-325mg	4	mg/0.3ml (1:1000).....	132
endocet tab 7.5-325.....	4	EPIPEN 2-PAK INJ 0.3MG	132
ENFAMIL MIS EXPECTA	124	Epitol	65
ENERGIX-B INJ 10/0.5ML	118	eplerenone tab 25 mg	38
ENERGIX-B INJ 20MCG/ML.....	118	eplerenone tab 50 mg	38
enoxaparin sodium inj 300 mg/3ml.....	107	Eq Urinary Pain Relief.....	105
enoxaparin sodium inj soln pref syr 100		ERBITUX INJ 100MG.....	28
mg/ml.....	107	ERBITUX INJ 200MG	28
enoxaparin sodium inj soln pref syr 120		ergocalciferol cap 1.25 mg (50000 unit) .	127
mg/0.8ml	107	ERGOMAR SUB 2MG	72
enoxaparin sodium inj soln pref syr 150		ergotamine w/ caffeine tab 1-100 mg.....	73
mg/ml.....	107	ERIVEDGE CAP 150MG	28
enoxaparin sodium inj soln pref syr 30		ERLEADA TAB 240MG	29
mg/0.3ml	107	ERLEADA TAB 60MG	29
enoxaparin sodium inj soln pref syr 40		erlotinib hcl tab 100 mg (base equivalent) .	31
mg/0.4ml	107	erlotinib hcl tab 150 mg (base equivalent) .	31
enoxaparin sodium inj soln pref syr 60		erlotinib hcl tab 25 mg (base equivalent) ..	31
mg/0.6ml	107	E-R-O Ear Dro 6.5% Ot	149
enoxaparin sodium inj soln pref syr 80		Errin	86
mg/0.8ml	107	ERTACZO CRE 2%.....	142
Enpresse-28.....	86	ertapenem sodium for inj 1 gm (base	
Enskyce	86	equivalent)	22
entacapone tab 200 mg.....	60	Ery.....	141
entecavir tab 0.5 mg.....	20	Ery-Tab	20
entecavir tab 1 mg.....	20	Erythrocin Stearate	20
ENTRESTO CAP 15-16MG	49	erythromycin ethylsuccinate for susp 200	
ENTRESTO CAP 6-6MG	49	mg/5ml	20
ENTRESTO TAB 24-26MG	49	erythromycin ethylsuccinate for susp 400	
ENTRESTO TAB 49-51MG.....	49	mg/5ml	20
ENTRESTO TAB 97-103MG	49	erythromycin ethylsuccinate tab 400 mg .	20
Enulose.....	102	erythromycin gel 2%	141
ENVARUSUS XR TAB 0.75MG.....	117	erythromycin ophth oint 5 mg/gm	128
ENVARUSUS XR TAB 1MG	117	erythromycin soln 2%.....	141
ENVARUSUS XR TAB 4MG	117	erythromycin tab 250 mg	20
EPCLUSA PAK 150-37.5.....	20	erythromycin tab 500 mg	20
EPCLUSA PAK 200-50MG	21	erythromycin w/ delayed release particles	
EPCLUSA TAB 200-50MG.....	21	cap 250 mg	20
EPCLUSA TAB 400-100	21		

escitalopram oxalate soln 5 mg/5ml (base equiv)	56	estradiol td patch weekly 0.025 mg/24hr	95
escitalopram oxalate tab 10 mg (base equiv)	56	estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	95
escitalopram oxalate tab 20 mg (base equiv)	56	estradiol td patch weekly 0.05 mg/24hr ..	94
escitalopram oxalate tab 5 mg (base equiv)	56	estradiol td patch weekly 0.06 mg/24hr ..	94
esomeprazole magnesium cap delayed release 20 mg (base eq)	103	estradiol td patch weekly 0.075 mg/24hr	95
esomeprazole magnesium cap delayed release 40 mg (base eq)	103	estradiol td patch weekly 0.1 mg/24hr.....	94
esomeprazole magnesium for delayed release susp pack 2.5 mg	103	estradiol vaginal cream 0.1 mg/gm	95
esomeprazole magnesium for delayed release susp packet 10 mg	103	estradiol valerate im in oil 20 mg/ml	95
esomeprazole magnesium for delayed release susp packet 5 mg	103	estradiol valerate im in oil 40 mg/ml	95
estazolam tab 1 mg	72	eszopiclone tab 1 mg	72
estazolam tab 2 mg	72	eszopiclone tab 2 mg	72
estradiol & norethindrone acetate tab 0.5-0.1 mg	93	eszopiclone tab 3 mg	72
estradiol & norethindrone acetate tab 1-0.5 mg	93	ethacrynic acid tab 25 mg	48
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	93	ethambutol hcl tab 100 mg	17
estradiol tab 0.5 mg	93	ethambutol hcl tab 400 mg	17
estradiol tab 1 mg	93	ethosuximide cap 250 mg	65
estradiol tab 2 mg	94	ethosuximide soln 250 mg/5ml	65
estradiol td gel 0.25 mg/0.25gm (0.1%) ..	94	ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	86
estradiol td gel 0.5 mg/0.5gm (0.1%)	94	etodolac cap 200 mg	2
estradiol td gel 0.75 mg/0.75gm (0.1%) ..	94	etodolac cap 300 mg	2
estradiol td gel 1.25 mg/1.25gm (0.1%)	94	etodolac tab 400 mg	2
estradiol td gel 1 mg/gm (0.1%)	94	etodolac tab 500 mg	2
estradiol td patch twice weekly 0.025 mg/24hr	94	etodolac tab er 24hr 400 mg	2
estradiol td patch twice weekly 0.0375 mg/24hr	94	etodolac tab er 24hr 500 mg	2
estradiol td patch twice weekly 0.05 mg/24hr	94	etodolac tab er 24hr 600 mg	2
estradiol td patch twice weekly 0.075 mg/24hr	94	etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	86
estradiol td patch twice weekly 0.1 mg/24hr	94	etoposide cap 50 mg	36
		etoposide inj 100 mg/5ml (20 mg/ml)	36
		etoposide inj 1 gm/50ml (20 mg/ml)	36
		etoposide inj 500 mg/25ml (20 mg/ml) ...	36
		etravirine tab 100 mg	14
		etravirine tab 200 mg	14
		EUCERIN CALM LOT 0.1%	140
		EUCRISA OIN 2%	144
		EVAMIST SPR 1.53MG	95
		everolimus tab 0.25 mg	117
		everolimus tab 0.5 mg	117
		everolimus tab 0.75 mg	117
		everolimus tab 10 mg	31
		everolimus tab 1 mg	117
		everolimus tab 2.5 mg	31

<i>everolimus tab 5 mg</i>	31
<i>everolimus tab 7.5 mg</i>	31
<i>everolimus tab for oral susp 2 mg</i>	31
<i>everolimus tab for oral susp 3 mg</i>	31
<i>everolimus tab for oral susp 5 mg</i>	31
EVRYSDI SOL	74
EXCEDRIN PM TAB 500-38MG	72
EXCEDRIN TAB MIGRAINE	11
<i>exemestane tab 25 mg</i>	29
<i>Ex-Lax Ultra Tab 5mg Ec</i>	121
<i>Eye Drops Sol 0.05% Op</i>	130
<i>ezetimibe-simvastatin tab 10-10 mg</i>	43
<i>ezetimibe-simvastatin tab 10-20 mg</i>	43
<i>ezetimibe-simvastatin tab 10-40 mg</i>	43
<i>ezetimibe-simvastatin tab 10-80 mg</i>	43
<i>ezetimibe tab 10 mg</i>	41
EZFE FORTE CAP	124
F	
<i>Falmina</i>	86
<i>famciclovir tab 125 mg</i>	17
<i>famciclovir tab 250 mg</i>	17
<i>famciclovir tab 500 mg</i>	17
<i>famotidine for susp 40 mg/5ml</i>	101
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	101
<i>famotidine preservative free inj 20 mg/2ml</i>	101
<i>famotidine tab 10 mg</i>	101
<i>famotidine tab 20 mg</i>	101
<i>famotidine tab 40 mg</i>	101
FASENRA INJ 10MG/0.5	138
FASENRA INJ 30MG/ML	138
FASENRA PEN INJ 30MG/ML	138
FASTCLIX MIS LANCETS	89
FC2 FEMALE MIS CONDOM	86
<i>febuxostat tab 40 mg</i>	2
<i>febuxostat tab 80 mg</i>	2
<i>felbamate susp 600 mg/5ml</i>	65
<i>felbamate tab 400 mg</i>	65
<i>felbamate tab 600 mg</i>	65
<i>felodipine tab er 24hr 10 mg</i>	47
<i>felodipine tab er 24hr 2.5 mg</i>	47
<i>felodipine tab er 24hr 5 mg</i>	47
FEMCAP MIS 22MM	121

FEMCAP MIS 26MM	121
FEMCAP MIS 30MM	121
FEMLYV TAB 1/0.02MG	86
<i>fenofibrate cap 150 mg</i>	41
<i>fenofibrate micronized cap 134 mg</i>	41
<i>fenofibrate micronized cap 200 mg</i>	41
<i>fenofibrate micronized cap 43 mg</i>	41
<i>fenofibrate micronized cap 67 mg</i>	41
<i>fenofibrate tab 145 mg</i>	41
<i>fenofibrate tab 160 mg</i>	41
<i>fenofibrate tab 48 mg</i>	41
<i>fenofibrate tab 54 mg</i>	41
<i>fenopropfen calcium tab 600 mg</i>	2
<i>fentanyl citrate lozenge on a handle 1200</i> <i>mcg</i>	4
<i>fentanyl citrate lozenge on a handle 1600</i> <i>mcg</i>	4
<i>fentanyl citrate lozenge on a handle 200</i> <i>mcg</i>	4
<i>fentanyl citrate lozenge on a handle 400</i> <i>mcg</i>	4
<i>fentanyl citrate lozenge on a handle 600</i> <i>mcg</i>	4
<i>fentanyl citrate lozenge on a handle 800</i> <i>mcg</i>	4
<i>fentanyl td patch 72hr 100 mcg/hr</i>	4
<i>fentanyl td patch 72hr 12 mcg/hr</i>	4
<i>fentanyl td patch 72hr 25 mcg/hr</i>	4
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	4
<i>fentanyl td patch 72hr 50 mcg/hr</i>	4
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	4
<i>fentanyl td patch 72hr 75 mcg/hr</i>	4
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	4
Ferate Tab 27mg	110
FER-IN-SOL DRO 15MG/ML	110
FERPRX 2-DAY TAB 1000MG	85
FERRETTES TAB 325MG	110
FERRIPROX SOL 100MG/ML	85
Ferrocite Tab 324mg	110
FERROUS GLUC TAB 324MG	110
<i>ferrous sulfate elixir 220 mg/5ml (44</i> <i>mg/5ml elemental fe)</i>	110
<i>ferrous sulfate soln 300 mg/5ml (60</i> <i>mg/5ml elemental fe)</i>	110

<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	110	<i>fluocinolone acetonide oil 0.01% (body oil)</i>	145
FERROUS SULF TAB 140MG.....	110	<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	145
FERROUS SULF TAB 324MG EC	110	<i>fluocinolone acetonide oint 0.025%</i>	145
<i>Ferrous Sulf Tab 325mg</i>	110	<i>fluocinolone acetonide soln 0.01%</i>	145
FERROUS SUL LIQ 220/5ML	110	<i>fluocinonide cream 0.05%</i>	145
<i>fesoterodine fumarate tab er 24hr 4 mg</i> .	106	<i>fluocinonide gel 0.05%</i>	145
<i>fesoterodine fumarate tab er 24hr 8 mg</i> .	106	<i>fluocinonide oint 0.05%</i>	145
FETZIMA CAP 120MG.....	56	<i>fluocinonide soln 0.05%</i>	145
FETZIMA CAP 20MG	56	<i>fluorouracil cream 5%</i>	141
FETZIMA CAP 40MG	56	<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i> 27	
FETZIMA CAP 80MG	56	<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	27
FETZIMA CAP TITRATIO	56	<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	27
FEVERALL INF SUP 80MG.....	11	<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	27
FIASP FLEX INJ TOUCH	82	<i>fluorouracil soln 2%</i>	141
FIASP INJ 100/ML.....	82	<i>fluorouracil soln 5%</i>	141
FIASP PENFIL INJ U-100	82	<i>fluoxetine hcl cap 10 mg</i>	56
FIASP PMPCRT INJ U-100	83	<i>fluoxetine hcl cap 20 mg</i>	56
FIBERCON TAB 625MG.....	120	<i>fluoxetine hcl cap 40 mg</i>	57
<i>fiber oral powder</i>	120	<i>fluoxetine hcl cap delayed release 90 mg</i> 57	
FINACEA AER 15%.....	147	<i>fluoxetine hcl solution 20 mg/5ml</i>	57
<i>finasteride tab 5 mg</i>	104	<i>fluoxetine hcl tab 10 mg</i>	57
FINGERSTIX MIS LANCETS	121	<i>fluoxetine hcl tab 20 mg</i>	57
<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	75	<i>fluphenazine decanoate inj 25 mg/ml</i>	62
<i>flecainide acetate tab 100 mg</i>	40	<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	62
<i>flecainide acetate tab 150 mg</i>	40	<i>fluphenazine hcl inj 2.5 mg/ml</i>	62
<i>flecainide acetate tab 50 mg</i>	40	<i>fluphenazine hcl oral conc 5 mg/ml</i>	62
FLEET ENE ENEMA.....	120	<i>fluphenazine hcl tab 10 mg</i>	62
FLUAD INJ 2024-25.....	118	<i>fluphenazine hcl tab 1 mg</i>	62
<i>fluconazole for susp 10 mg/ml</i>	13	<i>fluphenazine hcl tab 2.5 mg</i>	62
<i>fluconazole for susp 40 mg/ml</i>	13	<i>fluphenazine hcl tab 5 mg</i>	62
<i>fluconazole tab 100 mg</i>	13	<i>flurbiprofen sodium ophth soln 0.03%</i>	129
<i>fluconazole tab 150 mg</i>	13	<i>flurbiprofen tab 100 mg</i>	2
<i>fluconazole tab 200 mg</i>	13	<i>flurbiprofen tab 50 mg</i>	2
<i>fluconazole tab 50 mg</i>	13	<i>fluticas hfa aer 110mcg</i>	25
<i>fludarabine phosphate for inj 50 mg</i>	27	<i>fluticas hfa aer 220mcg</i>	25
<i>fludarabine phosphate inj 25 mg/ml</i>	27	<i>fluticas hfa aer 44mcg</i>	25
<i>fludrocortisone acetate tab 0.1 mg</i>	91	<i>fluticasone propionate cream 0.05%</i>	145
FLUMIST NASA LIQ 2024-25.....	118	<i>fluticasone propionate lotion 0.05%</i>	145
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	137		
<i>fluocinolone acetonide (otic) oil 0.01%</i> ...	149		
<i>fluocinolone acetonide cream 0.01%</i>	145		
<i>fluocinolone acetonide cream 0.025%</i> ...	145		

<i>fluticasone propionate nasal susp 50 mcg/act</i>	137
<i>fluticasone propionate oint 0.005%</i>	145
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	139
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	139
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	139
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	42
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	42
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	42
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	57
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	57
<i>fluvoxamine maleate tab 100 mg</i>	53
<i>fluvoxamine maleate tab 25 mg</i>	53
<i>fluvoxamine maleate tab 50 mg</i>	53
<i>folic acid cap 0.8 mg</i>	127
<i>folic acid tab 1 mg</i>	127
<i>folic acid tab 400 mcg</i>	127
<i>folic acid tab 800 mcg</i>	127
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	107
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	107
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	107
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	107
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	134
FOSAMAX + D TAB 70-2800	84
FOSAMAX + D TAB 70-5600	84
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	15
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	13
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	37
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	37
<i>fosinopril sodium tab 10 mg</i>	37
<i>fosinopril sodium tab 20 mg</i>	37
<i>fosinopril sodium tab 40 mg</i>	37
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	65
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	65
FRAGMIN INJ 10000/ML	107
FRAGMIN INJ 12500UNT	107
FRAGMIN INJ 15000UNT	107
FRAGMIN INJ 18000UNT	107
FRAGMIN INJ 2500/0.2	107
FRAGMIN INJ 2500/ML	107
FRAGMIN INJ 5000/0.2	107
FRAGMIN INJ 7500/0.3	107
FRAGMIN INJ 95000UNT	107
FREE LIBRE2 KIT PLUS/SEN	89
FREE LIBRE3 KIT PLUS/SEN	89
FREESTYLE MIS READER	121
FREESTY LIBR KIT 2 SENSOR	89
FREESTY LIBR KIT 3 SENSOR	89
FREESTY LIBR KIT SENSOR	89
FREESTY LIBR MIS 2 READER	121
FREESTY LIBR MIS READER	121
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	73
<i>fulvestrant inj soln pref syr 250 mg/5ml</i> ...	29
<i>furosemide inj 10 mg/ml</i>	48
<i>furosemide oral soln 10 mg/ml</i>	48
<i>furosemide oral soln 8 mg/ml</i>	48
<i>furosemide tab 20 mg</i>	48
<i>furosemide tab 40 mg</i>	48
<i>furosemide tab 80 mg</i>	48
FUZEON INJ 90MG	15
FYCOMPA SUS 0.5MG/ML	65
FYCOMPA TAB 10MG	65
FYCOMPA TAB 12MG	65
FYCOMPA TAB 2MG	65
FYCOMPA TAB 4MG	65
FYCOMPA TAB 6MG	65
FYCOMPA TAB 8MG	65
FYLNETRA INJ 6MG/0.6	108
G	
<i>gabapentin cap 100 mg</i>	65

<i>gabapentin cap 300 mg</i>	65	<i>Glatopa</i>	75
<i>gabapentin cap 400 mg</i>	65	<i>GLEOSTINE CAP 100MG</i>	26
<i>gabapentin oral soln 250 mg/5ml</i>	65	<i>GLEOSTINE CAP 10MG</i>	26
<i>gabapentin tab 600 mg</i>	65	<i>GLEOSTINE CAP 40MG</i>	26
<i>gabapentin tab 800 mg</i>	65	<i>GLIADEL WAF 7.7MG</i>	26
<i>galantamine hydrobromide cap er 24hr 16</i> <i>mg</i>	53	<i>glimepiride tab 1 mg</i>	84
<i>galantamine hydrobromide cap er 24hr 24</i> <i>mg</i>	53	<i>glimepiride tab 2 mg</i>	84
<i>galantamine hydrobromide cap er 24hr 8</i> <i>mg</i>	53	<i>glimepiride tab 4 mg</i>	84
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	53	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	81
<i>galantamine hydrobromide tab 12 mg</i>	53	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	81
<i>galantamine hydrobromide tab 4 mg</i>	53	<i>glipizide-metformin hcl tab 5-500 mg</i>	81
<i>galantamine hydrobromide tab 8 mg</i>	53	<i>glipizide tab 10 mg</i>	84
<i>GANIRELIX AC INJ 250/0.5</i>	90	<i>glipizide tab 5 mg</i>	84
<i>GARDASIL 9 INJ</i>	118	<i>glipizide tab er 24hr 10 mg</i>	84
<i>GAS-X CHW 80MG</i>	101	<i>glipizide tab er 24hr 2.5 mg</i>	84
<i>gatifloxacin ophth soln 0.5%</i>	128	<i>glipizide tab er 24hr 5 mg</i>	84
<i>Gavilyte-C</i>	120	<i>glucagon (rdna) for inj kit 1 mg</i>	92
<i>Gavilyte-G</i>	120	<i>GLUCOSE CHW 4GM</i>	92
<i>GAZYVA INJ 25MG/ML</i>	29	<i>GLUCOSE URINE TEST STRIPS</i>	121
<i>gemcitabine hcl for inj 1 gm</i>	27	<i>GLYCERIN SUP 2GM</i>	120
<i>gemcitabine hcl for inj 200 mg</i>	27	<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i> ..	99
<i>gemcitabine hcl for inj 2 gm</i>	27	<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	99
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml)</i> <i>(base equiv)</i>	27	<i>glycopyrrolate oral soln 1 mg/5ml</i>	99
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i> <i>mg/ml) (base equiv)</i>	27	<i>glycopyrrolate tab 1 mg</i>	99
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i> <i>mg/ml) (base equiv)</i>	27	<i>glycopyrrolate tab 2 mg</i>	99
<i>gemfibrozil tab 600 mg</i>	41	<i>GLYXAMBI TAB 10-5 MG</i>	84
<i>Gemmily</i>	86	<i>GLYXAMBI TAB 25-5 MG</i>	84
<i>Generlac</i>	102	<i>Gnp Suphedrn Liq 15mg/5ml</i>	139
<i>Gengraf</i>	117	<i>GONAL-F INJ 1050UNIT</i>	90
<i>gentamicin sulfate cream 0.1%</i>	141	<i>GONAL-F INJ 450UNIT</i>	90
<i>gentamicin sulfate inj 40 mg/ml</i>	13	<i>GONAL-F RFF INJ 300/0.5</i>	90
<i>gentamicin sulfate oint 0.1%</i>	142	<i>GONAL-F RFF INJ 450/0.75</i>	90
<i>gentamicin sulfate ophth soln 0.3%</i>	128	<i>GONAL-F RFF INJ 75UNIT</i>	90
<i>Gentle Laxat Sup 10mg</i>	121	<i>GONAL-F RFF INJ 900/1.5</i>	90
<i>GENVOYA TAB</i>	17	<i>Goodsense Aspirin</i>	12
<i>glatiramer acetate soln prefilled syringe 40</i> <i>mg/ml</i>	75	<i>Goodsense Nicotine Polacr</i>	78, 131
		<i>GOOD START LIQ W/IRON</i>	80
		<i>GOOD START POW NATURAL</i>	80
		<i>Gordon-Vit E Cre 1500unit</i>	146
		<i>granisetron hcl inj 1 mg/ml</i>	99
		<i>granisetron hcl tab 1 mg</i>	99
		<i>griseofulvin microsize susp 125 mg/5ml</i> ...	13
		<i>griseofulvin microsize tab 500 mg</i>	13

<i>griseofulvin ultramicrosize tab 125 mg</i>	13
<i>griseofulvin ultramicrosize tab 250 mg</i>	13
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	79, 135
<i>guaifenesin tab 200 mg</i>	79
<i>guanfacine hcl tab 1 mg</i>	49
<i>guanfacine hcl tab 2 mg</i>	49
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	70
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	70
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	70
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	70
<i>Gummy Vit/ Chw Minerals</i>	124
<i>GVOKE HYPO 1 INJ 0.5/.1ML</i>	92
<i>GVOKE HYPO 1 INJ 1MG/.2ML</i>	92
<i>GVOKE KIT SOL 1MG/0.2M</i>	92
<i>GVOKE PFS INJ</i>	92
<i>GYNAZOLE-1 CRE 2%</i>	106
<i>GYNE-LOTRIM CRE 1% VAG</i>	106
<i>GYNE-LOTRIMI CRE 3</i>	106
<i>GYNOL II GEL 3%</i>	105
H	
<i>halobetasol propionate cream 0.05%</i>	145
<i>halobetasol propionate oint 0.05%</i>	145
<i>haloperidol decanoate im soln 100 mg/ml</i>	62
<i>haloperidol decanoate im soln 50 mg/ml</i>	62
<i>haloperidol lactate inj 5 mg/ml</i>	62
<i>haloperidol lactate oral conc 2 mg/ml</i>	62
<i>haloperidol tab 0.5 mg</i>	62
<i>haloperidol tab 10 mg</i>	62
<i>haloperidol tab 1 mg</i>	62
<i>haloperidol tab 20 mg</i>	62
<i>haloperidol tab 2 mg</i>	62
<i>haloperidol tab 5 mg</i>	62
<i>HARVONI PAK</i>	21
<i>HARVONI PAK 45-200MG</i>	21
<i>HARVONI TAB 45-200MG</i>	21
<i>HARVONI TAB 90-400MG</i>	21
<i>HAVRIX INJ 1440UNIT</i>	118
<i>HAVRIX INJ 720UNIT</i>	118

<i>HEALTHY KIDS CHW GUMMIES</i>	124
<i>Heather</i>	86
<i>HELIDAC MIS THERAPY</i>	104
<i>HEMLIBRA INJ 105/0.7</i>	109
<i>HEMLIBRA INJ 150/ML</i>	109
<i>HEMLIBRA INJ 300/2ML</i>	109
<i>HEMLIBRA INJ 30MG/ML</i>	109
<i>HEMLIBRA INJ 60/0.4</i>	109
<i>HEMLIBRA SOL 12/0.4ML</i>	109
<i>Hemorrhoidal Cre</i>	12
<i>Hemorrhoidal Gel 0.25-50%</i>	12
<i>Hemorrhoidal Sup</i>	12
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	108
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	107
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	108
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	107
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	108
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	108
<i>HIBERIX SOL 10MCG</i>	119
<i>HIBICLENS SOL 4%</i>	140
<i>HOLD CHAMBER MIS MEDIUM</i>	137
<i>HUMATROPE INJ 12MG</i>	93
<i>HUMATROPE INJ 24MG</i>	93
<i>HUMATROPE INJ 6MG</i>	93
<i>HUMATROPEN MIS FOR 12MG</i>	122
<i>HUMATROPEN MIS FOR 24MG</i>	122
<i>HUMATROPEN MIS FOR 6MG</i>	122
<i>HUMULIN INJ 70/30</i>	83
<i>HUMULIN INJ 70/30KWP</i>	83
<i>HUMULIN N INJ U-100</i>	83
<i>HUMULIN N INJ U-100KWP</i>	83
<i>HUMULIN R INJ U-100</i>	83
<i>HUMULIN R INJ U-500</i>	83
<i>HURRICAIN SOL 20%</i>	148
<i>hydralazine hcl tab 100 mg</i>	49
<i>hydralazine hcl tab 10 mg</i>	49
<i>hydralazine hcl tab 25 mg</i>	49
<i>hydralazine hcl tab 50 mg</i>	49

<i>hydrochlorothiazide cap 12.5 mg</i>	48	<i>hydrocortisone oint 1%</i>	145
<i>hydrochlorothiazide tab 12.5 mg</i>	48	<i>hydrocortisone oint 2.5%</i>	145
<i>hydrochlorothiazide tab 25 mg</i>	48	<i>hydrocortisone perianal cream 1%</i>	104
<i>hydrochlorothiazide tab 50 mg</i>	48	<i>hydrocortisone perianal cream 2.5%</i>	104
<i>hydrocodone-acetaminophen soln 7.5-325</i>		<i>hydrocortisone sodium succinate pf for inj</i>	
<i>mg/15ml</i>	5	<i>100 mg</i>	91
<i>hydrocodone-acetaminophen tab 10-325</i>		<i>hydrocortisone tab 10 mg</i>	91
<i>mg</i>	5	<i>hydrocortisone tab 20 mg</i>	91
<i>hydrocodone-acetaminophen tab 2.5-325</i>		<i>hydrocortisone tab 5 mg</i>	91
<i>mg</i>	5	<i>hydrocortisone valerate cream 0.2%</i>	145
<i>hydrocodone-acetaminophen tab 5-325</i>		<i>hydrocortisone valerate oint 0.2%</i>	145
<i>mg</i>	5	<i>hydrocortisone w/ acetic acid otic soln 1-</i>	
<i>hydrocodone-acetaminophen tab 7.5-325</i>		<i>2%</i>	149
<i>mg</i>	5	<i>Hydromet</i>	135
<i>hydrocodone bitart-homatropine</i>		<i>hydromorphone hcl inj 2 mg/ml</i>	5
<i>methylbromide tab 5-1.5 mg</i>	135	<i>hydromorphone hcl tab 2 mg</i>	5
<i>hydrocodone bitart-homatropine</i>		<i>hydromorphone hcl tab 4 mg</i>	5
<i>methylbrom soln 5-1.5 mg/5ml</i>	135	<i>hydromorphone hcl tab 8 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter</i>		<i>hydromorphone hcl tab er 24hr 12 mg</i>	6
<i>100 mg</i>	5	<i>hydromorphone hcl tab er 24hr 16 mg</i>	6
<i>hydrocodone bitartrate tab er 24hr deter</i>		<i>hydromorphone hcl tab er 24hr 32 mg</i>	6
<i>120 mg</i>	5	<i>hydromorphone hcl tab er 24hr 8 mg</i>	6
<i>hydrocodone bitartrate tab er 24hr deter 20</i>		<i>hydroxychloroquine sulfate tab 200 mg</i> ..	116
<i>mg</i>	5	<i>hydroxyurea cap 500 mg</i>	34
<i>hydrocodone bitartrate tab er 24hr deter 30</i>		<i>hydroxyzine hcl im soln 25 mg/ml</i>	133
<i>mg</i>	5	<i>hydroxyzine hcl im soln 50 mg/ml</i>	133
<i>hydrocodone bitartrate tab er 24hr deter 40</i>		<i>hydroxyzine hcl syrup 10 mg/5ml</i>	133
<i>mg</i>	5	<i>hydroxyzine hcl tab 10 mg</i>	133
<i>hydrocodone bitartrate tab er 24hr deter 60</i>		<i>hydroxyzine hcl tab 25 mg</i>	133
<i>mg</i>	5	<i>hydroxyzine hcl tab 50 mg</i>	133
<i>hydrocodone bitartrate tab er 24hr deter 80</i>		<i>hydroxyzine pamoate cap 100 mg</i>	134
<i>mg</i>	5	<i>hydroxyzine pamoate cap 25 mg</i>	133
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	5	<i>hydroxyzine pamoate cap 50 mg</i>	134
<i>hydrocod polst-chlorphen polst er susp 10-</i>		<i>HYPO NEEDLE MIS 23GX1</i>	122
<i>8 mg/5ml</i>	135	<i>HYPO NEEDLE MIS 25GX5/8</i>	122
<i>hydrocortisone butyrate cream 0.1%</i>	145	<i>HYRIMOZ-CROH INJ UC SP</i>	113
<i>hydrocortisone butyrate oint 0.1%</i>	145	<i>HYRIMOZ INJ 10/0.1ML</i>	112
<i>hydrocortisone butyrate soln 0.1%</i>	145	<i>HYRIMOZ INJ 20/0.2ML</i>	113
<i>hydrocortisone cream 0.5%</i>	145	<i>HYRIMOZ INJ 40/0.4ML</i>	113
<i>hydrocortisone cream 1%</i>	145	<i>HYRIMOZ INJ 40/0.8ML</i>	113
<i>hydrocortisone cream 2.5%</i>	145	<i>HYRIMOZ INJ 80/0.8ML</i>	113
<i>hydrocortisone enema 100 mg/60ml</i>	101	<i>HYRIMOZ-PED INJ CROHNS</i>	113
<i>hydrocortisone lotion 2.5%</i>	145	<i>HYRIMOZ-PLAQ INJ PSOR/UVE</i>	113
<i>hydrocortisone oint 0.5%</i>	145	<i>HYRIMOZ SENS INJ 80/0.8ML</i>	113

I	
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	84
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	84
IBRANCE CAP 100MG	36
IBRANCE CAP 125MG	36
IBRANCE CAP 75MG	36
IBRANCE TAB 100MG	36
IBRANCE TAB 125MG	36
IBRANCE TAB 75MG	36
<i>Ibuprofen Jr Chw 100mg</i>	2
<i>ibuprofen susp 100 mg/5ml</i>	2
<i>ibuprofen tab 400 mg</i>	2
<i>ibuprofen tab 600 mg</i>	2
<i>ibuprofen tab 800 mg</i>	2
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	116
<i>icosapent ethyl cap 0.5 gm</i>	43
<i>icosapent ethyl cap 1 gm</i>	44
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	26
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	26
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	26
IDHIFA TAB 100MG	34
IDHIFA TAB 50MG	34
<i>ifosfamide for inj 1 gm</i>	26
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	26
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	26
ILEVRO DRO 0.3% OP	129
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	31
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	31
<i>imipramine hcl tab 10 mg</i>	57
<i>imipramine hcl tab 25 mg</i>	57
<i>imipramine hcl tab 50 mg</i>	57
<i>imipramine pamoate cap 100 mg</i>	57
<i>imipramine pamoate cap 125 mg</i>	57
<i>imipramine pamoate cap 150 mg</i>	57
<i>imipramine pamoate cap 75 mg</i>	57
<i>imiquimod cream 5%</i>	141
IMODIUM A-D CAP 2MG	25
IMODIUM A-D SOL 1MG/7.5	25
IMODIUM A-D TAB 2MG	25
IMVEXXY MAIN SUP 10MCG	95
IMVEXXY MAIN SUP 4MCG	95
IMVEXXY STRT SUP 10MCG	95
IMVEXXY STRT SUP 4MCG	95
<i>Inatal Gt</i>	127
INBRIJA CAP 42MG	60
INCRELEX INJ 40MG/4ML	96
<i>indapamide tab 1.25 mg</i>	48
<i>indapamide tab 2.5 mg</i>	48
INFANRIX INJ	119
INFLIXIMAB INJ 100MG	111
INLYTA TAB 1MG	31
INLYTA TAB 5MG	31
INSULIN PEN NEEDLES	121
INSULIN PEN NEEDLES/SYRINGES	122
INTELENCE TAB 25MG	15
INTRAROSA SUP 6.5MG	96
<i>Introvale</i>	86
IONIL LIQ	148
IONIL-T SHA 1%	149
IOPIDINE SOL 1% OP	131
IPOL INJ INACTIVE	119
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	132
<i>ipratropium bromide inhal soln 0.02%</i>	132
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	132
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	132
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	39
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	39
<i>irbesartan tab 150 mg</i>	40
<i>irbesartan tab 300 mg</i>	40
<i>irbesartan tab 75 mg</i>	40
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	36
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	36
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	36
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	36
IRON CHW PEDIATRI	110

ISENTRESS CHW 100MG.....	15
ISENTRESS CHW 25MG	15
ISENTRESS HD TAB 600MG	15
ISENTRESS POW 100MG.....	15
ISENTRESS TAB 400MG.....	15
<i>isoniazid inj 100 mg/ml.....</i>	<i>17</i>
<i>isoniazid syrup 50 mg/5ml</i>	<i>17</i>
<i>isoniazid tab 100 mg</i>	<i>17</i>
<i>isoniazid tab 300 mg</i>	<i>17</i>
<i>isosorbide dinitrate-hydralazine hcl tab 20- 37.5 mg.....</i>	<i>49</i>
<i>isosorbide dinitrate tab 10 mg</i>	<i>50</i>
<i>isosorbide dinitrate tab 20 mg</i>	<i>50</i>
<i>isosorbide dinitrate tab 30 mg</i>	<i>50</i>
<i>isosorbide dinitrate tab 5 mg</i>	<i>50</i>
<i>isosorbide mononitrate tab 10 mg</i>	<i>50</i>
<i>isosorbide mononitrate tab 20 mg</i>	<i>50</i>
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	<i>50</i>
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	<i>50</i>
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	<i>50</i>
<i>isotretinoin cap 10 mg</i>	<i>141</i>
<i>isotretinoin cap 20 mg</i>	<i>141</i>
<i>isotretinoin cap 30 mg</i>	<i>141</i>
<i>isotretinoin cap 40 mg</i>	<i>141</i>
<i>isradipine cap 2.5 mg</i>	<i>47</i>
<i>isradipine cap 5 mg</i>	<i>47</i>
ITOVEBI TAB 3MG	31
ITOVEBI TAB 9MG	31
itraconazole cap 100 mg	13
itraconazole oral soln 10 mg/ml.....	13
<i>ivabradine hcl tab 5 mg (base equiv)</i>	<i>49</i>
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	<i>49</i>
<i>ivermectin cream 1%</i>	<i>147</i>
<i>ivermectin tab 3 mg</i>	<i>13</i>
IV PREP WIPE PAD	142
J	
JAKAFI TAB 10MG	31
JAKAFI TAB 15MG	31
JAKAFI TAB 20MG.....	32
JAKAFI TAB 25MG	32
JAKAFI TAB 5MG.....	31

<i>Jantoven</i>	<i>108</i>
JANUMET TAB 50-1000	81
JANUMET TAB 50-500MG	81
JANUMET XR TAB 100-1000	81
JANUMET XR TAB 50-1000	81
JANUMET XR TAB 50-500MG	81
JANUVIA TAB 100MG.....	82
JANUVIA TAB 25MG.....	82
JANUVIA TAB 50MG	82
JARDIANCE TAB 10MG.....	84
JARDIANCE TAB 25MG	84
<i>Jinteli</i>	<i>95</i>
<i>Jolessa.....</i>	<i>86</i>
JUBLIA SOL 10%.....	142
<i>Junel 1/20.....</i>	<i>86</i>
<i>Junel 1.5/30</i>	<i>86</i>
<i>Junel Fe 1/20</i>	<i>86</i>
<i>Junel Fe 1.5/30</i>	<i>86</i>
<i>Junel Fe 24.....</i>	<i>86</i>
JYNNEOS INJ	119
K	
KADCYLA INJ 100MG.....	28
KADCYLA INJ 160MG.....	28
KALYDECO GRA 13.4MG	135
KALYDECO GRA 5.8MG	135
KALYDECO PAK 25MG.....	135
KALYDECO PAK 50MG.....	135
KALYDECO PAK 75MG.....	136
KALYDECO TAB 150MG	136
<i>Kariva</i>	<i>86</i>
<i>Kelnor 1/35</i>	<i>87</i>
KERENDIA TAB 10MG.....	38
KERENDIA TAB 20MG.....	38
KERI NRSHING LOT SHEA BTR.....	80
<i>ketoconazole cream 2%</i>	<i>142</i>
<i>ketoconazole shampoo 2%.....</i>	<i>143</i>
KETONE TES	89
KETONE TEST TES.....	89
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	<i>2</i>
<i>ketorolac tromethamine inj 15 mg/ml.....</i>	<i>2</i>
<i>ketorolac tromethamine inj 30 mg/ml.....</i>	<i>2</i>
<i>ketorolac tromethamine ophth soln 0.4%</i>	<i>129</i>

<i>ketorolac tromethamine ophth soln 0.5%</i>	129
<i>ketorolac tromethamine tab 10 mg</i>	2
KEVZARA INJ 150/1.14	113
KEVZARA INJ 200/1.14	113
KEYTRUDA INJ 100MG/4ML	28
<i>Kidkare Liq Cgh/cold</i>	79
KINRIX INJ	119
KISQALI TAB 200DOSE	32
KISQALI TAB 400DOSE	32
KISQALI TAB 600DOSE	32
<i>Klor-Con 10</i>	125
<i>Klor-Con 8</i>	125
<i>Klor-Con M15</i>	125
<i>Kobee Tab</i>	123
<i>Konsyl Daily Pow 28.3%</i>	120
KPN PRENATAL TAB	124
KRINTAFEL TAB 150MG	14
<i>Kurvelo</i>	87
KYLEENA IUD 19.5MG	87
L	
<i>labetalol hcl tab 100 mg</i>	45
<i>labetalol hcl tab 200 mg</i>	45
<i>labetalol hcl tab 300 mg</i>	45
LAC-HYDRIN LOT FIVE	146
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	65
<i>lacosamide oral solution 10 mg/ml</i>	65
<i>lacosamide tab 100 mg</i>	65
<i>lacosamide tab 150 mg</i>	66
<i>lacosamide tab 200 mg</i>	66
<i>lacosamide tab 50 mg</i>	65
<i>lactic acid (ammonium lactate) cream 12%</i>	146
<i>lactulose solution 10 gm/15ml</i>	102
<i>Lamisil Af Aer 1%</i>	142
LAMISIL AT CRE 1%	142
<i>lamivudine oral soln 10 mg/ml</i>	15
<i>lamivudine tab 100 mg (hbv)</i>	20
<i>lamivudine tab 150 mg</i>	15
<i>lamivudine tab 300 mg</i>	15
<i>lamivudine-zidovudine tab 150-300 mg</i>	17
<i>lamotrigine orally disintegrating tab 100 mg</i>	66

<i>lamotrigine orally disintegrating tab 200 mg</i>	66
<i>lamotrigine orally disintegrating tab 25 mg</i>	66
<i>lamotrigine orally disintegrating tab 50 mg</i>	66
<i>lamotrigine tab 100 mg</i>	66
<i>lamotrigine tab 150 mg</i>	66
<i>lamotrigine tab 200 mg</i>	66
<i>lamotrigine tab 25 mg</i>	66
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	66
<i>lamotrigine tab 35 x 25 mg starter kit</i>	66
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	66
<i>lamotrigine tab chewable dispersible 25 mg</i>	66
<i>lamotrigine tab chewable dispersible 5 mg</i>	66
<i>lamotrigine tab er 24hr 100 mg</i>	66
<i>lamotrigine tab er 24hr 200 mg</i>	66
<i>lamotrigine tab er 24hr 250 mg</i>	66
<i>lamotrigine tab er 24hr 25 mg</i>	66
<i>lamotrigine tab er 24hr 300 mg</i>	66
<i>lamotrigine tab er 24hr 50 mg</i>	66
<i>lansoprazole cap delayed release 15 mg</i>	103
<i>lansoprazole cap delayed release 30 mg</i>	103
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	97
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	96
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	97
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	32
<i>Larin 1.5/30</i>	87
<i>latanoprost ophth soln 0.005%</i>	131
L-CARNITINE TAB 500MG	127
<i>Leena</i>	87
<i>leflunomide tab 10 mg</i>	116
<i>leflunomide tab 20 mg</i>	116
LENVIMA CAP 10 MG	32
LENVIMA CAP 12MG	32
LENVIMA CAP 14 MG	32

LENVIMA CAP 18 MG	32	levetiracetam tab er 24hr 500 mg	66
LENVIMA CAP 20 MG.....	32	levetiracetam tab er 24hr 750 mg	66
LENVIMA CAP 24 MG.....	32	levobunolol hcl ophth soln 0.5%	129
LENVIMA CAP 4MG.....	32	levocarnitine cap 250 mg	127
LENVIMA CAP 8 MG.....	32	levocetirizine dihydrochloride soln 2.5	
Lessina	87	mg/5ml (0.5 mg/ml).....	134
letrozole tab 2.5 mg	29	levocetirizine dihydrochloride tab 5 mg ..	134
leucovorin calcium for inj 100 mg	35	levofloxacin iv soln 25 mg/ml.....	20
leucovorin calcium for inj 200 mg.....	35	levofloxacin oral soln 25 mg/ml.....	20
leucovorin calcium for inj 350 mg.....	36	levofloxacin tab 250 mg	20
leucovorin calcium for inj 500 mg	36	levofloxacin tab 500 mg.....	20
leucovorin calcium for inj 50 mg	35	levofloxacin tab 750 mg	20
leucovorin calcium tab 10 mg.....	36	Levonest	87
leucovorin calcium tab 15 mg.....	36	levonorgestrel & ethinyl estradiol (91-day)	
leucovorin calcium tab 25 mg	36	tab 0.15-0.03 mg	87
leucovorin calcium tab 5 mg	36	levonorgestrel & ethinyl estradiol tab 0.15	
LEUKERAN TAB 2MG	26	mg-30 mcg.....	87
leuprolide acetate inj kit 1 mg/0.2ml (5		levonorgestrel & ethinyl estradiol tab 0.1	
mg/ml)	29	mg-20 mcg.....	87
levalbuterol hcl soln nebu 0.31 mg/3ml		levonorgestrel-ethinyl estradiol-fe tab 0.1	
(base equiv)	134	mg-20 mcg (21)	87
levalbuterol hcl soln nebu 0.63 mg/3ml		levonorg-eth est tab 0.1-0.02mg(84) & eth	
(base equiv)	135	est tab 0.01mg(7)	87
levalbuterol hcl soln nebu 1.25 mg/3ml		Levora 0.15/30-28.....	87
(base equiv)	135	levothyroxine sodium tab 100 mcg.....	97
levalbuterol hcl soln nebu conc 1.25		levothyroxine sodium tab 112 mcg.....	97
mg/0.5ml (base equiv).....	135	levothyroxine sodium tab 125 mcg	97
levalbuterol tartrate inhal aerosol 45		levothyroxine sodium tab 137 mcg	97
mcg/act (base equiv)	135	levothyroxine sodium tab 150 mcg.....	97
LEVEMIR INJ.....	83	levothyroxine sodium tab 175 mcg	97
LEVEMIR INJ FLEXPEN	83	levothyroxine sodium tab 200 mcg	97
levetiracetam inj 500 mg/5ml (100 mg/ml)		levothyroxine sodium tab 25 mcg.....	97
.....	66	levothyroxine sodium tab 300 mcg.....	97
levetiracetam in sodium chloride iv soln		levothyroxine sodium tab 50 mcg	97
1000 mg/100ml	66	levothyroxine sodium tab 75 mcg.....	97
levetiracetam in sodium chloride iv soln		levothyroxine sodium tab 88 mcg	97
1500 mg/100ml	66	Levoxyl.....	97
levetiracetam in sodium chloride iv soln		Lice Killing Sha 0.33-4%.....	147
500 mg/100ml.....	66	Lice Trtmnt Liq 1%.....	147
levetiracetam oral soln 100 mg/ml	66	lidocaine hcl (cardiac) iv pf soln pref syr 50	
levetiracetam tab 1000 mg.....	66	mg/5ml(1%).....	40
levetiracetam tab 250 mg.....	66	lidocaine hcl (cardiac) iv soln pref syr 100	
levetiracetam tab 500 mg	66	mg/5ml (2%)	40
levetiracetam tab 750 mg.....	66	lidocaine hcl laryngotracheal soln 4%.....	148

<i>lidocaine hcl local inj 0.5%</i>	12
<i>lidocaine hcl local inj 1%</i>	12
<i>lidocaine hcl local inj 2%</i>	12
<i>lidocaine hcl local preservative free (pf) inj</i> <i>0.5%</i>	12
<i>lidocaine hcl local preservative free (pf) inj</i> <i>1%</i>	12
<i>lidocaine hcl local preservative free (pf) inj</i> <i>2%</i>	12
<i>lidocaine hcl soln 4%</i>	146
<i>lidocaine hcl urethral/mucosal gel prefilled</i> <i>syringe 2%</i>	146
<i>lidocaine hcl viscous soln 2%</i>	148
<i>lidocaine oint 5%</i>	146
<i>Lidocaine Pain Relief Pat</i>	146
<i>lidocaine patch 5%</i>	146
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	146
<i>LILETTA IUD 52MG</i>	87
<i>linezolid for susp 100 mg/5ml</i>	22
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	22
<i>linezolid tab 600 mg</i>	22
<i>LINZESS CAP 145MCG</i>	102
<i>LINZESS CAP 290MCG</i>	102
<i>LINZESS CAP 72MCG</i>	101
<i>liothyronine sodium tab 25 mcg</i>	97
<i>liothyronine sodium tab 50 mcg</i>	97
<i>liothyronine sodium tab 5 mcg</i>	97
<i>LIQUID C 500 LIQ 500/15ML</i>	149
<i>liraglutide soln pen-injector 18 mg/3ml (6</i> <i>mg/ml)</i>	82
<i>lisdexamphetamine dimesylate cap 10 mg</i>	70
<i>lisdexamphetamine dimesylate cap 20 mg</i>	70
<i>lisdexamphetamine dimesylate cap 30 mg</i>	70
<i>lisdexamphetamine dimesylate cap 40 mg</i>	70
<i>lisdexamphetamine dimesylate cap 50 mg</i>	70
<i>lisdexamphetamine dimesylate cap 60 mg</i>	70
<i>lisdexamphetamine dimesylate cap 70 mg</i>	70
<i>lisdexamphetamine dimesylate chew tab 10</i> <i>mg</i>	70
<i>lisdexamphetamine dimesylate chew tab 20</i> <i>mg</i>	70
<i>lisdexamphetamine dimesylate chew tab 30</i> <i>mg</i>	70

<i>lisdexamphetamine dimesylate chew tab 40</i> <i>mg</i>	70
<i>lisdexamphetamine dimesylate chew tab 50</i> <i>mg</i>	70
<i>lisdexamphetamine dimesylate chew tab 60</i> <i>mg</i>	70
<i>lisinopril & hydrochlorothiazide tab 10-12.5</i> <i>mg</i>	37
<i>lisinopril & hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	37
<i>lisinopril & hydrochlorothiazide tab 20-25</i> <i>mg</i>	37
<i>lisinopril tab 10 mg</i>	37
<i>lisinopril tab 2.5 mg</i>	37
<i>lisinopril tab 20 mg</i>	37
<i>lisinopril tab 30 mg</i>	37
<i>lisinopril tab 40 mg</i>	37
<i>lisinopril tab 5 mg</i>	37
<i>lithium carbonate cap 150 mg</i>	74
<i>lithium carbonate cap 300 mg</i>	74
<i>lithium carbonate cap 600 mg</i>	74
<i>lithium carbonate tab 300 mg</i>	74
<i>lithium carbonate tab er 300 mg</i>	74
<i>lithium carbonate tab er 450 mg</i>	74
<i>lithium oral solution 8 meq/5ml</i>	74
<i>LITTLE REMED DRO 0.125%</i>	139
<i>LMX 4 CRE 4%</i>	146
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i>	78
<i>LO LOESTRIN TAB 1-10-10</i>	87
<i>lopinavir-ritonavir soln 400-100 mg/5ml</i> <i>(80-20 mg/ml)</i>	17
<i>lopinavir-ritonavir tab 100-25 mg</i>	17
<i>lopinavir-ritonavir tab 200-50 mg</i>	17
<i>loratadine tab 10 mg</i>	134
<i>lorazepam conc 2 mg/ml</i>	53
<i>lorazepam tab 0.5 mg</i>	53
<i>lorazepam tab 1 mg</i>	53
<i>lorazepam tab 2 mg</i>	53
<i>LORBRENA TAB 100MG</i>	32
<i>LORBRENA TAB 25MG</i>	32
<i>Loryna</i>	87
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-12.5 mg</i>	39

<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	39
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	39
<i>losartan potassium tab 100 mg</i>	40
<i>losartan potassium tab 25 mg</i>	40
<i>losartan potassium tab 50 mg</i>	40
<i>loteprednol etabonate ophth susp 0.5%</i>	129
<i>LOTRIMIN ULT CRE 1%</i>	142
<i>lovastatin tab 10 mg</i>	42
<i>lovastatin tab 20 mg</i>	42
<i>lovastatin tab 40 mg</i>	42
<i>Low-Ogestrel</i>	87
<i>loxapine succinate cap 10 mg</i>	62
<i>loxapine succinate cap 25 mg</i>	62
<i>loxapine succinate cap 50 mg</i>	62
<i>loxapine succinate cap 5 mg</i>	62
<i>lubiprostone cap 24 mcg</i>	102
<i>lubiprostone cap 8 mcg</i>	102
<i>luliconazole cream 1%</i>	142
<i>LUMIGAN SOL 0.01% OP</i>	131
<i>LUPR DEP-PED INJ 11.25MG</i>	85
<i>LUPR DEP-PED INJ 15MG</i>	85
<i>LUPR DEP-PED INJ 3M 30MG</i>	85
<i>LUPR DEP-PED INJ 7.5MG</i>	85
<i>LUPRON DEPOT INJ 45MG</i>	85
<i>lurasidone hcl tab 120 mg</i>	62
<i>lurasidone hcl tab 20 mg</i>	62
<i>lurasidone hcl tab 40 mg</i>	62
<i>lurasidone hcl tab 60 mg</i>	62
<i>lurasidone hcl tab 80 mg</i>	62
<i>Lutera</i>	87
<i>LYNPARZA TAB 100MG</i>	34
<i>LYNPARZA TAB 150MG</i>	34
<i>LYSODREN TAB 500MG</i>	29
M	
<i>Maalox Advan Sus Max St</i>	12
<i>magnesium citrate soln</i>	120
<i>MAGNESIUM GL TAB 500MG</i>	125
<i>magnesium gluconate tab 27.5 mg (elemental mg)</i>	125
<i>magnesium oxide tab 250 mg (mg supplement)</i>	123

<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	125
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	125
<i>magnesium sulfate inj 50%</i>	125
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	125
<i>Magnesium Tab 250mg</i>	125
<i>malathion lotion 0.5%</i>	147
<i>Mandelay Gel Max Str</i>	146
<i>mannitol iv soln 20%</i>	48
<i>mannitol iv soln 25%</i>	48
<i>maraviroc tab 150 mg</i>	15
<i>maraviroc tab 300 mg</i>	15
<i>Marlissa</i>	87
<i>MARPLAN TAB 10MG</i>	57
<i>MATULANE CAP 50MG</i>	26
<i>Matzim La</i>	47
<i>Maxilube Gel</i>	148
<i>Mccarnitine Tab 330mg</i>	96
<i>MCT OIL</i>	126
<i>meclizine hcl tab 12.5 mg</i>	99
<i>meclizine hcl tab 25 mg</i>	100
<i>meclofenamate sodium cap 100 mg</i>	2
<i>meclofenamate sodium cap 50 mg</i>	2
<i>Medicated Oin Chst Rub</i>	80
<i>Medi Pad</i>	148
<i>MEDROL TAB 2MG</i>	91
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	87
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	87
<i>medroxyprogesterone acetate tab 10 mg</i>	97
<i>medroxyprogesterone acetate tab 2.5 mg</i>	97
<i>medroxyprogesterone acetate tab 5 mg</i>	97
<i>mefenamic acid cap 250 mg</i>	2
<i>mefloquine hcl tab 250 mg</i>	14
<i>megestrol acetate susp 40 mg/ml</i>	97
<i>megestrol acetate susp 625 mg/5ml</i>	97
<i>megestrol acetate tab 20 mg</i>	29
<i>megestrol acetate tab 40 mg</i>	29
<i>MEKINIST SOL 0.05/ML</i>	32
<i>MEKINIST TAB 0.5MG</i>	32

MEKINIST TAB 2MG	32	metformin hcl tab 1000 mg	81
MELATONIN LIQ 1MG/4ML	1	metformin hcl tab 500 mg	81
Melatonin Sub 5mg	1	metformin hcl tab 850 mg	81
Melatonin Tab 10mg Cr	1	metformin hcl tab er 24hr 500 mg	81
melatonin tab 1 mg	1	metformin hcl tab er 24hr 750 mg	81
Melatonin Tab 3mg	1	methadone hcl conc 10 mg/ml	6
melatonin tab 5 mg	1	methadone hcl soln 10 mg/5ml	6
meloxicam tab 15 mg	2	methadone hcl soln 5 mg/5ml	6
meloxicam tab 7.5 mg	2	methadone hcl tab 10 mg	6
mephalan hcl for inj 50 mg (base equiv) ..	26	methadone hcl tab 5 mg	6
memantine hcl cap er 24hr 14 mg	54	methadone hcl tab for oral susp 40 mg	6
memantine hcl cap er 24hr 21 mg	54	Methadone Hydrochloride I	6
memantine hcl cap er 24hr 28 mg	54	Methadose	6
memantine hcl cap er 24hr 7 mg	53	methamphetamine hcl tab 5 mg	70
memantine hcl oral solution 2 mg/ml	54	methazolamide tab 25 mg	48
memantine hcl tab 10 mg	54	methazolamide tab 50 mg	48
memantine hcl tab 28 x 5 mg & 21 x 10 mg		methenamine hippurate tab 1 gm	22
titration pack	54	methimazole tab 10 mg	97
memantine hcl tab 5 mg	54	methimazole tab 5 mg	97
MENEST TAB 0.3MG	95	methocarbamol tab 500 mg	75
MENEST TAB 0.625MG	95	methocarbamol tab 750 mg	76
MENEST TAB 1.25MG	95	methotrexate sodium for inj 1 gm	27
MENEST TAB 2.5MG	95	methotrexate sodium inj 250 mg/10ml (25	
MENQUADFI INJ	119	mg/ml)	27
MENVEO INJ	119	methotrexate sodium inj 50 mg/2ml (25	
MENVEO SOL	119	mg/ml)	27
meprobamate tab 200 mg	53	methotrexate sodium inj pf 1000 mg/40ml	
meprobamate tab 400 mg	53	(25 mg/ml)	28
mercaptopurine tab 50 mg	27	methotrexate sodium inj pf 250 mg/10ml	
Meribin Cap 5mg	149	(25 mg/ml)	27
meropenem iv for soln 1 gm	22	methotrexate sodium inj pf 50 mg/2ml (25	
meropenem iv for soln 500 mg	22	mg/ml)	27
mesalamine cap dr 400 mg	101	methotrexate sodium tab 2.5 mg (base	
mesalamine cap er 24hr 0.375 gm	101	equiv)	116
mesalamine enema 4 gm	101	methoxsalen rapid cap 10 mg	143
mesalamine rectal enema 4 gm & cleanser		methscopolamine bromide tab 2.5 mg	99
wipe kit	101	methscopolamine bromide tab 5 mg	99
mesalamine suppos 1000 mg	101	methsuximide cap 300 mg	66
mesalamine tab delayed release 1.2 gm ..	101	methyldopa tab 250 mg	49
mesalamine tab delayed release 800 mg	101	methyldopa tab 500 mg	50
mesna inj 100 mg/ml	36	methylphenidate hcl cap er 10 mg (cd) ...	70
mesna tab 400 mg	36	methylphenidate hcl cap er 20 mg (cd) ...	70
MESNEX TAB 400MG	36	methylphenidate hcl cap er 24hr 20 mg (la)	
metaxalone tab 800 mg	75	.....	70

<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	71	<i>metoclopramide hcl orally disintegrating</i> <i>tab 5 mg (base eq)</i>	100
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	71	<i>metoclopramide hcl soln 5 mg/5ml (10</i> <i>mg/10ml) (base equiv).....</i>	100
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	71	<i>metoclopramide hcl tab 10 mg (base</i> <i>equivalent).....</i>	100
<i>methylphenidate hcl cap er 30 mg (cd).....</i>	71	<i>metoclopramide hcl tab 5 mg (base</i> <i>equivalent).....</i>	100
<i>methylphenidate hcl cap er 40 mg (cd).....</i>	71	<i>metolazone tab 10 mg</i>	49
<i>methylphenidate hcl cap er 50 mg (cd).....</i>	71	<i>metolazone tab 2.5 mg.....</i>	48
<i>methylphenidate hcl cap er 60 mg (cd).....</i>	71	<i>metolazone tab 5 mg.....</i>	48
<i>methylphenidate hcl chew tab 10 mg</i>	71	<i>metoprolol & hydrochlorothiazide tab 100-</i> <i>25 mg</i>	44
<i>methylphenidate hcl chew tab 2.5 mg.....</i>	71	<i>metoprolol & hydrochlorothiazide tab 100-</i> <i>50 mg</i>	44
<i>methylphenidate hcl chew tab 5 mg</i>	71	<i>metoprolol & hydrochlorothiazide tab 50-25</i> <i>mg</i>	44
<i>methylphenidate hcl soln 10 mg/5ml.....</i>	71	<i>metoprolol succinate tab er 24hr 100 mg</i> <i>(tartrate equiv).....</i>	45
<i>methylphenidate hcl soln 5 mg/5ml</i>	71	<i>metoprolol succinate tab er 24hr 200 mg</i> <i>(tartrate equiv).....</i>	45
<i>methylphenidate hcl tab 10 mg</i>	71	<i>metoprolol succinate tab er 24hr 25 mg</i> <i>(tartrate equiv).....</i>	45
<i>methylphenidate hcl tab 20 mg</i>	71	<i>metoprolol succinate tab er 24hr 50 mg</i> <i>(tartrate equiv).....</i>	45
<i>methylphenidate hcl tab 5 mg</i>	71	<i>metoprolol tartrate tab 100 mg</i>	45
<i>methylphenidate hcl tab er 10 mg</i>	71	<i>metoprolol tartrate tab 25 mg</i>	45
<i>methylphenidate hcl tab er 20 mg.....</i>	71	<i>metoprolol tartrate tab 50 mg.....</i>	45
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 18 mg</i>	71	<i>metronidazole cap 375 mg</i>	22
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 27 mg.....</i>	71	<i>metronidazole cream 0.75%</i>	147
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 36 mg.....</i>	71	<i>metronidazole gel 0.75%</i>	147
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 54 mg.....</i>	71	<i>metronidazole gel 1%.....</i>	147
<i>methylprednisolone acetate inj susp 40</i> <i>mg/ml</i>	91	<i>metronidazole iv soln 500 mg/100ml.....</i>	22
<i>methylprednisolone acetate inj susp 80</i> <i>mg/ml</i>	91	<i>metronidazole lotion 0.75%</i>	147
<i>methylprednisolone sod succ for inj 1000</i> <i>mg (base equiv).....</i>	91	<i>metronidazole tab 250 mg</i>	22
<i>methylprednisolone sod succ for inj 125 mg</i> <i>(base equiv)</i>	91	<i>metronidazole tab 500 mg.....</i>	22
<i>methylprednisolone tab 16 mg.....</i>	92	<i>metronidazole vaginal gel 0.75%.....</i>	106
<i>methylprednisolone tab 32 mg</i>	92	<i>Miconazole 1 kit 1200-2%.....</i>	106
<i>methylprednisolone tab 4 mg</i>	92	<i>Miconazole 3</i>	106
<i>methylprednisolone tab 8 mg</i>	92	<i>Miconazole 7 Cre Tube/kit</i>	106
<i>methylprednisolone tab therapy pack 4 mg</i> <i>(21)</i>	92	<i>Miconazole 7 Sup 100mg</i>	106
<i>metoclopramide hcl inj 5 mg/ml (base</i> <i>equivalent).....</i>	100	<i>Miconazole Cre 2%</i>	142
		<i>Microgestin 1.5/30</i>	87
		<i>midodrine hcl tab 10 mg.....</i>	50

<i>midodrine hcl tab 2.5 mg</i>	50	<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2</i>	
<i>midodrine hcl tab 5 mg</i>	50	<i>mg/ml)</i>	27
<i>miglitol tab 100 mg</i>	81	<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i>	
<i>miglitol tab 25 mg</i>	81	<i>mg/ml)</i>	27
<i>miglitol tab 50 mg</i>	81	<i>modafinil tab 100 mg</i>	76
<i>Milk Of Magn Sus Frsh Mnt</i>	121	<i>modafinil tab 200 mg</i>	76
<i>Mimvey</i>	95	<i>MODERNA INJ 2024-25</i>	119
<i>mineral oil</i>	120	<i>MODERNA INJ 6MO-11Y</i>	119
<i>Minerin Cre</i>	148	<i>moexipril hcl tab 15 mg</i>	37
<i>minocycline hcl cap 100 mg</i>	24	<i>moexipril hcl tab 7.5 mg</i>	37
<i>minocycline hcl cap 50 mg</i>	24	<i>MOISTURE EYE DRO</i>	130
<i>minocycline hcl cap 75 mg</i>	24	<i>mometasone furoate cream 0.1%</i>	145
<i>minocycline hcl tab 100 mg</i>	24	<i>mometasone furoate nasal susp 50</i>	
<i>minocycline hcl tab 50 mg</i>	24	<i>mcg/act</i>	137
<i>minocycline hcl tab 75 mg</i>	24	<i>mometasone furoate oint 0.1%</i>	145
<i>minoxidil tab 10 mg</i>	50	<i>mometasone furoate solution 0.1% (lotion)</i>	
<i>minoxidil tab 2.5 mg</i>	50	.....	145
<i>mirabegron tab er 24 hr 25 mg</i>	106	<i>MONOJECT S/P MIS 35ML/REG</i>	122
<i>mirabegron tab er 24 hr 50 mg</i>	106	<i>Monoject Sodium Chloride</i>	125
<i>MIRCERA INJ 100MCG</i>	108	<i>Mono-Linyah</i>	87
<i>MIRCERA INJ 120MCG</i>	108	<i>montelukast sodium chew tab 4 mg (base</i>	
<i>MIRCERA INJ 150MCG</i>	108	<i>equiv)</i>	136
<i>MIRCERA INJ 200MCG</i>	108	<i>montelukast sodium chew tab 5 mg (base</i>	
<i>MIRCERA INJ 30MCG</i>	108	<i>equiv)</i>	136
<i>MIRCERA INJ 50MCG</i>	108	<i>montelukast sodium oral granules packet 4</i>	
<i>MIRCERA INJ 75MCG</i>	108	<i>mg (base equiv)</i>	136
<i>MIRENA IUD SYSTEM</i>	87	<i>montelukast sodium tab 10 mg (base equiv)</i>	
<i>mirtazapine orally disintegrating tab 15 mg</i>		.....	136
.....	57	<i>morphine sulfate beads cap er 24hr 120 mg</i>	
<i>mirtazapine orally disintegrating tab 30 mg</i>		.....	6
.....	57	<i>morphine sulfate beads cap er 24hr 30 mg</i>	6
<i>mirtazapine orally disintegrating tab 45 mg</i>		<i>morphine sulfate beads cap er 24hr 45 mg</i>	6
.....	57	<i>morphine sulfate beads cap er 24hr 60 mg</i>	6
<i>mirtazapine tab 15 mg</i>	57	<i>morphine sulfate beads cap er 24hr 75 mg</i>	6
<i>mirtazapine tab 30 mg</i>	57	<i>morphine sulfate beads cap er 24hr 90 mg</i>	6
<i>mirtazapine tab 45 mg</i>	57	<i>morphine sulfate cap er 24hr 100 mg</i>	7
<i>mirtazapine tab 7.5 mg</i>	57	<i>morphine sulfate cap er 24hr 10 mg</i>	6
<i>misoprostol tab 100 mcg</i>	102	<i>morphine sulfate cap er 24hr 20 mg</i>	6
<i>misoprostol tab 200 mcg</i>	102	<i>morphine sulfate cap er 24hr 30 mg</i>	6
<i>mitomycin for iv soln 20 mg</i>	27	<i>morphine sulfate cap er 24hr 50 mg</i>	7
<i>mitomycin for iv soln 40 mg</i>	27	<i>morphine sulfate cap er 24hr 60 mg</i>	7
<i>mitomycin for iv soln 5 mg</i>	26	<i>morphine sulfate cap er 24hr 80 mg</i>	7
<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i>		<i>morphine sulfate iv soln 10 mg/ml</i>	7
<i>mg/ml)</i>	27	<i>morphine sulfate iv soln 4 mg/ml</i>	7

<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	7
<i>morphine sulfate oral soln 10 mg/5ml</i>	7
<i>morphine sulfate oral soln 20 mg/5ml</i>	7
<i>morphine sulfate tab 15 mg</i>	7
<i>morphine sulfate tab 30 mg</i>	7
<i>morphine sulfate tab er 100 mg</i>	7
<i>morphine sulfate tab er 15 mg</i>	7
<i>morphine sulfate tab er 200 mg</i>	7
<i>morphine sulfate tab er 30 mg</i>	7
<i>morphine sulfate tab er 60 mg</i>	7
<i>Motion Sick Chw 25mg</i>	100
<i>MOTOFEN TAB 1-0.025</i>	25
<i>MOTRIN CHILD SUS 100/5ML</i>	2
<i>Motrin Ib Tab 200mg</i>	2
<i>MOTRIN INFAN DRO 50/1.25</i>	2
<i>MOUNJARO INJ 10MG/0.5</i>	82
<i>MOUNJARO INJ 12.5/0.5</i>	82
<i>MOUNJARO INJ 15MG/0.5</i>	82
<i>MOUNJARO INJ 2.5/0.5</i>	82
<i>MOUNJARO INJ 5MG/0.5</i>	82
<i>MOUNJARO INJ 7.5/0.5</i>	82
<i>MOVANTIK TAB 12.5MG</i>	102
<i>MOVANTIK TAB 25MG</i>	102
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	128
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	128
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	20
<i>MRESVIA INJ 50MCG</i>	119
<i>MTERYTI TAB</i>	124
<i>MTERYTI TAB FOLIC 5</i>	124
<i>Mucus+chst Liq 100/5ml</i>	79
<i>Mucus-D Tab 60-600mg</i>	79
<i>Mucus Relief Tab 1200mg</i>	79
<i>Mucus Relief Tab 400mg</i>	79
<i>Mucus Relief Tab 600mg Er</i>	79
<i>Mucus Relief Tab Dm Cough</i>	79
<i>MULTAQ TAB 400MG</i>	40
<i>MULTISTIX 10 TES SG</i>	122
<i>Multivitamin/fluoride</i>	127
<i>Multi-Vitamin/fluoride/ir</i>	127
<i>Multi-Vitamin/fluoride Dr</i>	127
<i>Multivitamin Dro Pediatr</i>	124

<i>mupirocin oint 2%</i>	142
<i>Muscle Rub Cre Ultra St</i>	146
<i>MUSE SUP 1000MCG</i>	105
<i>MUSE SUP 250MCG</i>	105
<i>MUSE SUP 500MCG</i>	105
<i>MYALEPT INJ 11.3MG</i>	96
<i>mycophenolate mofetil cap 250 mg</i>	117
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	117
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	117
<i>mycophenolate mofetil tab 500 mg</i>	117
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	117
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	117
<i>MYFORTIC TAB 180MG</i>	117
<i>MYFORTIC TAB 360MG</i>	117
<i>MYOFLEX CRE 10%</i>	146
<i>MYRBETRIQ SUS 8MG/ML</i>	106
N	
<i>nabumetone tab 500 mg</i>	2
<i>nabumetone tab 750 mg</i>	3
<i>nadolol tab 20 mg</i>	45
<i>nadolol tab 40 mg</i>	45
<i>nadolol tab 80 mg</i>	45
<i>naftifine hcl cream 1%</i>	142
<i>naftifine hcl cream 2%</i>	142
<i>nalbuphine hcl inj 10 mg/ml</i>	7
<i>nalbuphine hcl inj 20 mg/ml</i>	7
<i>naloxone hcl inj 0.4 mg/ml</i>	77
<i>naloxone hcl inj 4 mg/10ml</i>	77
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	77
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	77
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	77
<i>naltrexone hcl tab 50 mg</i>	77
<i>NANOVM T/F POW</i>	124
<i>NAPHCON-A SOL OP</i>	130
<i>Naproxen Sod Tab 220mg</i>	3
<i>naproxen tab 250 mg</i>	3
<i>naproxen tab 375 mg</i>	3
<i>naproxen tab 500 mg</i>	3
<i>naratriptan hcl tab 1 mg (base equiv)</i>	73

<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	73	NEUPRO DIS 3MG/24HR	60
NARCAN SPR 4MG	77	NEUPRO DIS 4MG/24HR	60
NASALCROM SPR 5.2/ACT	137	NEUPRO DIS 6MG/24HR	60
<i>Nasal Relief Tab Night</i>	79	NEUPRO DIS 8MG/24HR	60
NATACYN SUS 5% OP	128	NEVANAC SUS 0.1% OP	129
NATAZIA TAB	87	<i>nevirapine susp 50 mg/5ml</i>	15
<i>nateglinide tab 120 mg</i>	83	<i>nevirapine tab 200 mg</i>	15
<i>nateglinide tab 60 mg</i>	83	<i>nevirapine tab er 24hr 400 mg</i>	15
<i>Naturl Fiber Pow 58.6%</i>	120	NEXIUM GRA 2.5MG DR	103
NAYZILAM SPR 5MG	66	NEXIUM GRA 5MG DR	104
<i>nebivolol hcl tab 10 mg (base equivalent) ..</i>	45	NEXLETOL TAB 180MG	41
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	45	NEXPLANON IMP 68MG	87
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	45	NEXTSTELLIS TAB 3-14.2MG	87
<i>nebivolol hcl tab 5 mg (base equivalent) ..</i>	45	<i>niacin cap er 250 mg</i>	150
Necon 0.5/35-28	87	<i>niacin tab 100 mg</i>	150
<i>nefazodone hcl tab 100 mg</i>	57	<i>niacin tab 250 mg</i>	150
<i>nefazodone hcl tab 150 mg</i>	57	<i>Niacin Tab 500mg</i>	150
<i>nefazodone hcl tab 200 mg</i>	57	<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	43
<i>nefazodone hcl tab 250 mg</i>	58	<i>niacin tab er 500 mg (antihyperlipidemic)</i>	43
<i>nefazodone hcl tab 50 mg</i>	57	<i>niacin tab er 750 mg (antihyperlipidemic)</i>	43
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i>		NIACIN TR TAB 1000MG	150
<i>400unt-10000unt op oin</i>	128	<i>nicardipine hcl cap 20 mg</i>	47
<i>neomycin-polymy-gramicid op sol 1.75-</i>		<i>nicardipine hcl cap 30 mg</i>	47
<i>10000-0.025mg-unt-mg/ml</i>	128	<i>nicotine polacrilex gum 2 mg</i>	78
<i>neomycin-polymyxin-dexamethasone</i>		<i>nicotine polacrilex gum 4 mg</i>	78
<i>ophth oint 0.1%</i>	128	<i>nicotine polacrilex lozenge 2 mg</i>	78
<i>neomycin-polymyxin-dexamethasone</i>		Nicotine Step 3	131
<i>ophth susp 0.1%</i>	128	<i>nicotine td patch 24hr 14 mg/24hr</i>	131
<i>neomycin-polymyxin-hc ophth susp</i>	128	<i>nicotine td patch 24hr 21 mg/24hr</i>	131
<i>neomycin-polymyxin-hc otic soln 1%</i>	149	<i>nicotine td patch 24hr 7 mg/24hr</i>	131
<i>neomycin-polymyxin-hc otic susp 3.5</i>		NICOTROL INH	131
<i>mg/ml-10000 unit/ml-1%</i>	149	NICOTROL NS SPR 10MG/ML	131
<i>neomycin sulfate tab 500 mg</i>	13	<i>nifedipine tab er 24hr 30 mg</i>	47
NEORAL CAP 100MG	117	<i>nifedipine tab er 24hr 60 mg</i>	47
NEORAL CAP 25MG	117	<i>nifedipine tab er 24hr 90 mg</i>	47
NEORAL SOL 100MG/ML	117	<i>nifedipine tab er 24hr osmotic release 30</i>	
<i>Neosporin+pn Oin Relf Max</i>	142	<i>mg</i>	47
NEOSPORIN CRE PLUS	142	<i>nifedipine tab er 24hr osmotic release 60</i>	
NEOSPORIN OIN ORIGINAL	142	<i>mg</i>	47
NEO-SYNEPHRI SPR 0.05%	139	<i>nifedipine tab er 24hr osmotic release 90</i>	
NEO-SYNEPHRI SPR 0.5%	139	<i>mg</i>	47
NEUPRO DIS 1MG/24HR	60	Nikki	87
NEUPRO DIS 2MG/24HR	60	<i>nilutamide tab 150 mg</i>	29

<i>nimodipine cap 30 mg</i>	47	<i>Nora-Be</i>	87
NIPENT INJ 10MG	28	NORDIPEN 5 MIS DEVICE	122
<i>nisoldipine tab er 24hr 17 mg</i>	47	NORDIPEN DEL MIS SYSTEM	122
<i>nisoldipine tab er 24hr 20 mg</i>	47	NORDITROPIN INJ 10/1.5ML.....	93
<i>nisoldipine tab er 24hr 25.5 mg</i>	47	NORDITROPIN INJ 15/1.5ML.....	93
<i>nisoldipine tab er 24hr 30 mg</i>	47	NORDITROPIN INJ 30/3ML	93
<i>nisoldipine tab er 24hr 34 mg</i>	47	NORDITROPIN INJ 5/1.5ML	93
<i>nisoldipine tab er 24hr 40 mg</i>	47	<i>norethindrone & ethinyl estradiol-fe chew</i>	
<i>nisoldipine tab er 24hr 8.5 mg</i>	47	<i>tab 0.4 mg-35 mcg</i>	87
<i>nitazoxanide tab 500 mg</i>	22	<i>norethindrone & ethinyl estradiol-fe chew</i>	
<i>nitisinone cap 10 mg</i>	93	<i>tab 0.8 mg-25 mcg</i>	87
<i>nitisinone cap 20 mg</i>	93	<i>norethindrone ace & ethinyl estradiol tab 1</i>	
<i>nitisinone cap 2 mg</i>	93	<i>mg-20 mcg</i>	87
<i>nitisinone cap 5 mg</i>	93	<i>norethindrone ace-eth estradiol-fe chew</i>	
NITRO-BID OIN 2%.....	50	<i>tab 1 mg-20 mcg (24)</i>	88
NITRO-DUR DIS 0.3MG/HR.....	50	<i>norethindrone ace-ethinyl estradiol-fe cap 1</i>	
NITRO-DUR DIS 0.8MG/HR	50	<i>mg-20 mcg (24)</i>	88
<i>nitrofurantoin macrocrystalline cap 100 mg</i>		<i>norethindrone acetate-ethinyl estradiol tab</i>	
.....	22	<i>0.5 mg-2.5 mcg</i>	95
<i>nitrofurantoin macrocrystalline cap 25 mg</i>		<i>norethindrone acetate tab 5 mg</i>	97
.....	22	<i>norethindrone tab 0.35 mg</i>	88
<i>nitrofurantoin macrocrystalline cap 50 mg</i>		<i>Norgesic</i>	76
.....	22	<i>norgestimate & ethinyl estradiol tab 0.25</i>	
<i>nitrofurantoin monohydrate</i>		<i>mg-35 mcg</i>	88
<i>macrocrystalline cap 100 mg</i>	22	<i>norgestimate-eth estrad tab 0.18-25/0.215-</i>	
<i>nitrofurantoin susp 25 mg/5ml</i>	22	<i>25/0.25-25 mg-mcg</i>	88
<i>nitroglycerin oint 0.4%</i>	146	<i>norgestimate-eth estrad tab 0.18-35/0.215-</i>	
<i>nitroglycerin sl tab 0.3 mg</i>	50	<i>35/0.25-35 mg-mcg</i>	88
<i>nitroglycerin sl tab 0.4 mg</i>	50	NORPACE CAP 100MG CR.....	40
<i>nitroglycerin sl tab 0.6 mg</i>	50	NORPACE CAP 150MG CR.....	40
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	50	<i>Nortrel 0.5/35 (28)</i>	88
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	50	<i>Nortrel 1/35</i>	88
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	50	<i>Nortrel 7/7/7</i>	88
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	50	<i>nortriptyline hcl cap 10 mg</i>	58
<i>nitroglycerin tl soln 0.4 mg/spray (400</i>		<i>nortriptyline hcl cap 25 mg</i>	58
<i>mcg/spray)</i>	50	<i>nortriptyline hcl cap 50 mg</i>	58
NIVESTYM INJ 300/0.5	108	<i>nortriptyline hcl cap 75 mg</i>	58
NIVESTYM INJ 300MCG.....	108	<i>nortriptyline hcl soln 10 mg/5ml</i>	58
NIVESTYM INJ 480/0.8.....	108	NORVIR POW 100MG.....	15
NIVESTYM INJ 480MCG.....	109	NOVAVAX INJ 2023-24.....	119
<i>nizatidine cap 150 mg</i>	101	NOVAVAX INJ 2024-25.....	119
<i>nizatidine cap 300 mg</i>	101	NOVOLIN INJ 70/30.....	83
NIZORAL A-D SHA 1%	142	NOVOLIN INJ 70/30 FP	83
<i>Non-Aspirin Chw 80mg</i>	11	NOVOLIN N INJ 100 UNIT	83

NOVOLIN N INJ U-100	83
NOVOLIN R INJ 100 UNIT	83
NOVOLIN R INJ U-100	83
NOVOLOG INJ 100/ML	83
NOVOLOG INJ FLEXPEN	83
NOVOLOG INJ PENFILL	83
NOVOLOG MIX INJ 70/30	83
NOVOLOG MIX INJ FLEXPEN	83
NUBEQA TAB 300MG	30
NUCALA INJ 100MG	25
NUCALA INJ 100MG/ML	25
NUCALA INJ 40MG/0.4	25
NUCYNTA ER TAB 100MG	7
NUCYNTA ER TAB 150MG	8
NUCYNTA ER TAB 200MG	8
NUCYNTA ER TAB 250MG	8
NUCYNTA ER TAB 50MG	7
NUCYNTA TAB 100MG	8
NUCYNTA TAB 50MG	8
NUCYNTA TAB 75MG	8
NUEDEXTA CAP 20-10MG	78
Nu-Iron 150 Cap 150mg	110
NULOJIX INJ 250MG	117
NUPREP 5% SOL POV-IODI	140
NUTRICION TAB PORVIDA	124
NUTRIENTS TAB PRENATAL	124
Nyamyc	142
Nylia 1/35	88
nystatin cream 100000 unit/gm	142
nystatin oint 100000 unit/gm	142
nystatin susp 100000 unit/ml	148
nystatin tab 500000 unit	13
nystatin topical powder 100000 unit/gm	142
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	142
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	143
Nystop	143
NYVEPRIA INJ 6/0.6ML	109
o	
OBTREX DHA PAK	124
OBTREX TAB	124
Ocella	88

octreotide acetate inj 1000 mcg/ml (1 mg/ml)	80
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	80
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	80
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	80
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	80
octreotide acetate subcutaneous soln pref syr 100 mcg/ml	80
octreotide acetate subcutaneous soln pref syr 500 mcg/ml	80
octreotide acetate subcutaneous soln pref syr 50 mcg/ml	80
ODEFSEY TAB	17
ODOMZO CAP 200MG	34
OFEV CAP 100MG	137
OFEV CAP 150MG	137
ofloxacin ophth soln 0.3%	128
ofloxacin otic soln 0.3%	149
ofloxacin tab 300 mg	20
ofloxacin tab 400 mg	20
olanzapine for im inj 10 mg	62
olanzapine orally disintegrating tab 10 mg	63
olanzapine orally disintegrating tab 15 mg	63
olanzapine orally disintegrating tab 20 mg	63
olanzapine orally disintegrating tab 5 mg	62
olanzapine tab 10 mg	63
olanzapine tab 15 mg	63
olanzapine tab 2.5 mg	63
olanzapine tab 20 mg	63
olanzapine tab 5 mg	63
olanzapine tab 7.5 mg	63
olmesartan-amlodipine- hydrochlorothiazide tab 20-5-12.5 mg	39
olmesartan-amlodipine- hydrochlorothiazide tab 40-10-12.5 mg	39
olmesartan-amlodipine- hydrochlorothiazide tab 40-10-25 mg	39

<i>olmesartan-amlodipine-</i>	
<i>hydrochlorothiazide tab 40-5-12.5 mg ..39</i>	
<i>olmesartan-amlodipine-</i>	
<i>hydrochlorothiazide tab 40-5-25 mg ....39</i>	
<i>olmesartan medoxomil-</i>	
<i>hydrochlorothiazide tab 20-12.5 mg .....39</i>	
<i>olmesartan medoxomil-</i>	
<i>hydrochlorothiazide tab 40-12.5 mg .....39</i>	
<i>olmesartan medoxomil-</i>	
<i>hydrochlorothiazide tab 40-25 mg .....39</i>	
<i>olmesartan medoxomil tab 20 mg .....40</i>	
<i>olmesartan medoxomil tab 40 mg .....40</i>	
<i>olmesartan medoxomil tab 5 mg .....40</i>	
<i>olopatadine hcl nasal soln 0.6%.....134</i>	
<i>olopatadine hcl ophth soln 0.2% (base</i>	
<i>equivalent) .....129</i>	
<i>omega-3-acid ethyl esters cap 1 gm .....44</i>	
<i>Omega-3 Fish Cap 1200mg .....127</i>	
<i>omeprazole cap delayed release 10 mg..104</i>	
<i>omeprazole cap delayed release 20 mg..104</i>	
<i>omeprazole cap delayed release 40 mg..104</i>	
<i>omeprazole delayed release tab 20 mg..104</i>	
<i>omeprazole-sodium bicarbonate powd</i>	
<i>pack for susp 20-1680 mg.....104</i>	
<i>omeprazole-sodium bicarbonate powd</i>	
<i>pack for susp 40-1680 mg .....104</i>	
<i>OMNARIS SPR.....137</i>	
<i>OMNIFLEX DPR .....121</i>	
<i>OMNIPOD 5 DX KIT INT G7G6 .....89</i>	
<i>OMNIPOD 5 DX MIS POD G7G6 .....89</i>	
<i>OMNIPOD 5 G7 KIT INTRO .....89</i>	
<i>OMNIPOD 5 G7 MIS PODS .....89</i>	
<i>OMNIPOD DASH KIT INTRO .....89</i>	
<i>OMNIPOD DASH KIT PDM .....89</i>	
<i>OMNIPOD DASH MIS PODS.....89</i>	
<i>OMNIPOD MIS CLASSIC.....89</i>	
<i>OMNIPOD PDM KIT CLASSIC .....89</i>	
<i>ONCASPAR INJ 750/ML.....34</i>	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	
.....100	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml) 100</i>	
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	
.....100	
<i>ondansetron hcl oral soln 4 mg/5ml.....100</i>	

<i>ondansetron hcl tab 24 mg .....100</i>	
<i>ondansetron hcl tab 4 mg .....100</i>	
<i>ondansetron hcl tab 8 mg .....100</i>	
<i>ondansetron orally disintegrating tab 4 mg</i>	
.....100	
<i>ondansetron orally disintegrating tab 8 mg</i>	
.....100	
<i>ONE A DAY CAP PRENATAL.....124</i>	
<i>ONE A DAY MIS PRENATAL.....124</i>	
<i>ONETOUCH BLOOD GLUCOSE TEST KITS</i>	
.....89	
<i>ONETOUCH BLOOD GLUCOSE TEST</i>	
<i>STRIPS .....89</i>	
<i>ONETOUCH DEL MIS PLUS 30G.....89</i>	
<i>ONETOUCH DEL MIS PLUS 33G .....89</i>	
<i>ONETOUCH SOL KIT COMPLETE.....89</i>	
<i>ONETOUCH SOL KIT FIT .....89</i>	
<i>ONETOUCH SOL KIT REFILL .....90</i>	
<i>ONETOUCH SOL KIT STARTER .....90</i>	
<i>ONGENTYS CAP 25MG .....60</i>	
<i>ONGENTYS CAP 50MG .....60</i>	
<i>OPCON-A SOL OP.....130</i>	
<i>OPILL TAB 0.075MG .....88</i>	
<i>OPSUMIT TAB 10MG .....50</i>	
<i>ORAL GLUCOSE REPLACEMENT .....92</i>	
<i>Oralene Dental Paste .....148</i>	
<i>ORAVIG TAB 50MG.....148</i>	
<i>Orazinc Cap 220mg.....127</i>	
<i>ORENITRAM TAB 0.125MG .....51</i>	
<i>ORENITRAM TAB 0.25MG.....51</i>	
<i>ORENITRAM TAB 1MG .....51</i>	
<i>ORENITRAM TAB 2.5MG .....51</i>	
<i>ORENITRAM TAB 5MG .....51</i>	
<i>ORENITRAM TAB MONTH 1.....51</i>	
<i>ORENITRAM TAB MONTH 2 .....51</i>	
<i>ORENITRAM TAB MONTH 3 .....51</i>	
<i>ORFADIN SUS 4MG/ML.....93</i>	
<i>ORILISSA TAB 150MG .....90</i>	
<i>ORILISSA TAB 200MG .....90</i>	
<i>ORKAMBI GRA 100-125 .....136</i>	
<i>ORKAMBI GRA 150-188 .....136</i>	
<i>ORKAMBI GRA 75-94MG .....136</i>	
<i>ORKAMBI TAB 100-125.....136</i>	
<i>ORKAMBI TAB 200-125 .....136</i>	

<i>orphenadrine citrate inj 30 mg/ml</i>	76	<i>oxycodone hcl tab 30 mg</i>	8
<i>orphenadrine citrate tab er 12hr 100 mg</i> ...	76	<i>oxycodone hcl tab 5 mg</i>	8
<i>Os-Cal + D3 Tab 500-200</i>	123	<i>oxycodone hcl tab er 12hr deter 10 mg</i>	8
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	17	<i>oxycodone hcl tab er 12hr deter 20 mg</i>	9
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	18	<i>oxycodone hcl tab er 12hr deter 40 mg</i>	9
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	18	<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	9
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	18	<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	9
<i>Osmitrol Viaflex</i>	49	<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	9
<i>OSPHEA TAB 60MG</i>	96	<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	9
<i>OTEZLA TAB 10/20</i>	113	<i>oxymorphone hcl tab 10 mg</i>	9
<i>OTEZLA TAB 10/20/30</i>	113	<i>oxymorphone hcl tab 5 mg</i>	9
<i>OTEZLA TAB 20MG</i>	114	<i>oxymorphone hcl tab er 12hr 10 mg</i>	9
<i>OTEZLA TAB 30MG</i>	114	<i>oxymorphone hcl tab er 12hr 15 mg</i>	9
<i>OVIDREL INJ</i>	90	<i>oxymorphone hcl tab er 12hr 20 mg</i>	9
<i>oxaliplatin for iv inj 100 mg</i>	35	<i>oxymorphone hcl tab er 12hr 30 mg</i>	9
<i>oxaliplatin for iv inj 50 mg</i>	35	<i>oxymorphone hcl tab er 12hr 40 mg</i>	9
<i>oxaliplatin iv soln 100 mg/20ml</i>	35	<i>oxymorphone hcl tab er 12hr 5 mg</i>	9
<i>oxaliplatin iv soln 50 mg/10ml</i>	35	<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	9
<i>oxaprozin tab 600 mg</i>	3	<i>Oyst Shell/d Tab 500mg</i>	123
<i>oxazepam cap 10 mg</i>	53	<i>OZEMPIC INJ 2MG/3ML</i>	82
<i>oxazepam cap 15 mg</i>	53	<i>OZEMPIC INJ 4MG/3ML</i>	82
<i>oxazepam cap 30 mg</i>	53	<i>OZEMPIC INJ 8MG/3ML</i>	82
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	66	P	
<i>oxcarbazepine tab 150 mg</i>	66	<i>Pacerone</i>	40
<i>oxcarbazepine tab 300 mg</i>	66	<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	35
<i>oxcarbazepine tab 600 mg</i>	66	<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	35
<i>oxiconazole nitrate cream 1%</i>	143	<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	35
<i>oxybutynin chloride solution 5 mg/5ml</i> ...106		<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i> ..	35
<i>oxybutynin chloride tab 5 mg</i>	106	<i>PADCEV INJ 20MG</i>	28
<i>oxybutynin chloride tab er 24hr 10 mg</i>	106	<i>PADCEV INJ 30MG</i>	28
<i>oxybutynin chloride tab er 24hr 15 mg</i>	106	<i>Pain/fever Sup 120mg</i>	11
<i>oxybutynin chloride tab er 24hr 5 mg</i>	106	<i>paliperidone tab er 24hr 1.5 mg</i>	63
<i>oxycodone hcl cap 5 mg</i>	8	<i>paliperidone tab er 24hr 3 mg</i>	63
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	8	<i>paliperidone tab er 24hr 6 mg</i>	63
<i>oxycodone hcl soln 5 mg/5ml</i>	8	<i>paliperidone tab er 24hr 9 mg</i>	63
<i>oxycodone hcl tab 10 mg</i>	8	<i>pamidronate disodium iv soln 3 mg/ml</i>	85
<i>oxycodone hcl tab 15 mg</i>	8	<i>PANOXYL-4 LIQ CREM WSH</i>	141
<i>oxycodone hcl tab 20 mg</i>	8		

<i>Panoxyl Wash Liq 10%</i>	141
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	104
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	104
<i>PARAGARD IUD T380A</i>	88
<i>Paraplatin</i>	35
<i>paricalcitol cap 1 mcg</i>	98
<i>paricalcitol cap 2 mcg</i>	98
<i>paricalcitol cap 4 mcg</i>	98
<i>paroxetine hcl tab 10 mg</i>	58
<i>paroxetine hcl tab 20 mg</i>	58
<i>paroxetine hcl tab 30 mg</i>	58
<i>paroxetine hcl tab 40 mg</i>	58
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	58
<i>paroxetine hcl tab er 24hr 25 mg</i>	58
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	58
<i>PAXLOVID TAB 150-100</i>	18
<i>PAXLOVID TAB 300-100</i>	18
<i>pazopanib hcl tab 200 mg (base equiv)</i>	32
<i>PEDIATRIC RESPIRATORY MASK</i>	122, 137
<i>Pedi-Boro Pow Soak Pak</i>	148
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	102
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	102
<i>PEGASYS INJ</i>	21
<i>PEGASYS INJ 180MCG/ML</i>	21
<i>PEG-PREP KIT</i>	102
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	28
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	28
<i>PENBRAYA INJ</i>	119
<i>penciclovir cream 1%</i>	147
<i>penicillamine tab 250 mg</i>	85
<i>penicillin g potassium for inj 20000000 unit</i>	24
<i>penicillin g potassium for inj 5000000 unit</i>	24
<i>penicillin g sodium for inj 5000000 unit</i> ...	24
<i>penicillin v potassium for soln 125 mg/5ml</i>	24

<i>penicillin v potassium for soln 250 mg/5ml</i>	24
<i>penicillin v potassium tab 250 mg</i>	24
<i>penicillin v potassium tab 500 mg</i>	24
<i>PENTACEL INJ</i>	119
<i>pentamidine isethionate for inj soln 300 mg</i>	22
<i>pentamidine isethionate for nebulization soln 300 mg</i>	22
<i>pentoxifylline tab er 400 mg</i>	109
<i>perindopril erbumine tab 2 mg</i>	38
<i>perindopril erbumine tab 4 mg</i>	38
<i>perindopril erbumine tab 8 mg</i>	38
<i>Periogard</i>	148
<i>permethrin cream 5%</i>	147
<i>PEROXYL SOL</i>	148
<i>perphenazine-amitriptyline tab 2-10 mg</i> ...	78
<i>perphenazine-amitriptyline tab 2-25 mg</i> ..	78
<i>perphenazine-amitriptyline tab 4-10 mg</i> ...	78
<i>perphenazine-amitriptyline tab 4-25 mg</i> ..	78
<i>perphenazine-amitriptyline tab 4-50 mg</i> ..	78
<i>perphenazine tab 16 mg</i>	63
<i>perphenazine tab 2 mg</i>	63
<i>perphenazine tab 4 mg</i>	63
<i>perphenazine tab 8 mg</i>	63
<i>PERRY PRENAT CAP</i>	124
<i>PFIZER 5-11Y INJ 2024-25</i>	119
<i>PFIZER 6M-4Y INJ 2024-25</i>	119
<i>Pfizerpen</i>	24
<i>PHAZYME CAP 180MG</i>	101
<i>Phazyme Chw 125mg</i>	101
<i>PHEBURANE MIS 483/GM</i>	98
<i>phenelzine sulfate tab 15 mg</i>	58
<i>phenobarbital elixir 20 mg/5ml</i>	67
<i>phenobarbital tab 100 mg</i>	67
<i>phenobarbital tab 15 mg</i>	67
<i>phenobarbital tab 16.2 mg</i>	67
<i>phenobarbital tab 30 mg</i>	67
<i>phenobarbital tab 32.4 mg</i>	67
<i>phenobarbital tab 60 mg</i>	67
<i>phenobarbital tab 64.8 mg</i>	67
<i>phenobarbital tab 97.2 mg</i>	67
<i>phenoxybenzamine hcl cap 10 mg</i>	50
<i>phenylephrine hcl ophth soln 10%</i>	130

<i>phenylephrine hcl ophth soln 2.5%</i>	130	<i>pitavastatin calcium tab 1 mg</i>	42
<i>Phenytoin Infatabs</i>	67	<i>pitavastatin calcium tab 2 mg</i>	42
<i>phenytoin sodium extended cap 100 mg</i> .	67	<i>pitavastatin calcium tab 4 mg</i>	42
<i>phenytoin sodium extended cap 200 mg</i> .	67	<i>PLENVU SOL</i>	120
<i>phenytoin sodium extended cap 300 mg</i> .	67	<i>PNEUMOVAX 23 INJ 25/0.5</i>	119
<i>phenytoin sodium inj 50 mg/ml</i>	67	<i>Pnv-Dha</i>	127
<i>phenytoin susp 125 mg/5ml</i>	67	<i>Pnv-Select</i>	127
<i>PHEXXI GEL</i>	105	<i>podofilox gel 0.5%</i>	147
<i>PHOS FLUR SOL 0.044%</i>	148	<i>podofilox soln 0.5%</i>	147
<i>PHOS-NAK POW CONCENTR</i>	125	<i>POLIVY INJ 140MG</i>	34
<i>PHOSPHOLINE SOL 0.125%OP</i>	130	<i>POLIVY INJ 30MG</i>	34
<i>PHOTOFRIN INJ 75MG</i>	34	<i>Polycin</i>	128
<i>Physiolyte</i>	131	<i>polyethylene glycol 3350 oral powder 17</i>	
<i>Physiosol Irrigation</i>	131	<i>gm/scoop</i>	102
<i>phytonadione tab 5 mg</i>	127	<i>polymyxin b sulfate for inj 500000 unit</i>	22
<i>pilocarpine hcl ophth soln 1%</i>	130	<i>polymyxin b-trimethoprim ophth soln</i>	
<i>pilocarpine hcl tab 5 mg</i>	148	<i>10000 unit/ml-0.1%</i>	128
<i>pilocarpine hcl tab 7.5 mg</i>	148	<i>POLYSPORIN OIN</i>	142
<i>pimecrolimus cream 1%</i>	144	<i>POLY-VI-SOL SOL 50MG/ML</i>	124
<i>pimozide tab 1 mg</i>	78	<i>POLY-VI-SOL SOL IRON</i>	124
<i>pimozide tab 2 mg</i>	78	<i>POMALYST CAP 1MG</i>	28
<i>pindolol tab 10 mg</i>	45	<i>POMALYST CAP 2MG</i>	28
<i>pindolol tab 5 mg</i>	45	<i>POMALYST CAP 3MG</i>	28
<i>Pinworm Med Sus 144mg/ml</i>	12	<i>POMALYST CAP 4MG</i>	28
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i> .	83	<i>Portia-28</i>	88
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i> .	83	<i>posaconazole susp 40 mg/ml</i>	14
<i>pioglitazone hcl-metformin hcl tab 15-500</i>		<i>posaconazole tab delayed release 100 mg</i>	
<i>mg</i>	83	.....	14
<i>pioglitazone hcl-metformin hcl tab 15-850</i>		<i>potassium chloride cap er 10 meq</i>	126
<i>mg</i>	83	<i>potassium chloride cap er 8 meq</i>	126
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	83	<i>potassium chloride inj 2 meq/ml</i>	126
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	83	<i>potassium chloride microencapsulated crys</i>	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	83	<i>er tab 10 meq</i>	126
<i>piperacillin sod-tazobactam na for inj 3.375</i>		<i>potassium chloride microencapsulated crys</i>	
<i>gm (3-0.375 gm)</i>	24	<i>er tab 20 meq</i>	126
<i>piperacillin sod-tazobactam sod for inj 2.25</i>		<i>potassium chloride oral soln 10% (20</i>	
<i>gm (2-0.25 gm)</i>	24	<i>meq/15ml)</i>	126
<i>piperacillin sod-tazobactam sod for inj 40.5</i>		<i>potassium chloride oral soln 20% (40</i>	
<i>gm (36-4.5 gm)</i>	24	<i>meq/15ml)</i>	126
<i>pirfenidone cap 267 mg</i>	137	<i>potassium chloride tab er 10 meq</i>	126
<i>pirfenidone tab 267 mg</i>	137	<i>potassium chloride tab er 15 meq</i>	126
<i>pirfenidone tab 801 mg</i>	137	<i>potassium chloride tab er 20 meq (1500</i>	
<i>piroxicam cap 10 mg</i>	3	<i>mg)</i>	126
<i>piroxicam cap 20 mg</i>	3		

potassium chloride tab er 8 meq (600 mg)		prazosin hcl cap 2 mg	38
.....	126	prazosin hcl cap 5 mg	38
potassium citrate tab er 10 meq (1080 mg)		prednisolone acetate ophth susp 1%	129
.....	106	prednisolone sodium phosphate oral soln	
potassium citrate tab er 15 meq (1620 mg)		25 mg/5ml (base eq)	92
.....	106	prednisolone sod phos orally disintegr tab	
potassium citrate tab er 5 meq (540 mg)	106	10 mg (base eq)	92
povidone-iodine oint 10%	140	prednisolone sod phos orally disintegr tab	
povidone-iodine soln 10%	140	15 mg (base eq)	92
POVIDONE-IOD SOL 0.75%	140	prednisolone sod phos orally disintegr tab	
POVIDONE-IOD SOL 1%	140	30 mg (base eq)	92
Povidone-Iod Sol 7.5%	140	prednisolone sod phosphate oral soln 15	
PRADAXA CAP 75MG	108	mg/5ml (base equiv)	92
pramipexole dihydrochloride tab 0.125 mg		prednisolone sod phosph oral soln 6.7	
.....	60	mg/5ml (5 mg/5ml base)	92
pramipexole dihydrochloride tab 0.25 mg		prednisolone soln 15 mg/5ml	92
.....	60	PREDNISONE CON 5MG/ML	92
pramipexole dihydrochloride tab 0.5 mg	60	prednisone oral soln 5 mg/5ml	92
pramipexole dihydrochloride tab 0.75 mg		prednisone tab 10 mg	92
.....	60	prednisone tab 1 mg	92
pramipexole dihydrochloride tab 1.5 mg	60	prednisone tab 2.5 mg	92
pramipexole dihydrochloride tab 1 mg	60	prednisone tab 20 mg	92
pramipexole dihydrochloride tab er 24hr		prednisone tab 50 mg	92
0.375 mg	61	prednisone tab 5 mg	92
pramipexole dihydrochloride tab er 24hr		prednisone tab therapy pack 10 mg (21)	92
0.75 mg	60	prednisone tab therapy pack 10 mg (48)	92
pramipexole dihydrochloride tab er 24hr 1.5		prednisone tab therapy pack 5 mg (21)	92
mg	61	prednisone tab therapy pack 5 mg (48)	92
pramipexole dihydrochloride tab er 24hr		PRED SOD PHO SOL 1% OP	129
2.25 mg	61	pregabalin cap 100 mg	67
pramipexole dihydrochloride tab er 24hr		pregabalin cap 150 mg	67
3.75 mg	61	pregabalin cap 200 mg	67
pramipexole dihydrochloride tab er 24hr 3		pregabalin cap 225 mg	67
mg	61	pregabalin cap 25 mg	67
pramipexole dihydrochloride tab er 24hr		pregabalin cap 300 mg	67
4.5 mg	61	pregabalin cap 50 mg	67
prasugrel hcl tab 10 mg (base equiv)	109	pregabalin cap 75 mg	67
prasugrel hcl tab 5 mg (base equiv)	109	pregabalin soln 20 mg/ml	67
pravastatin sodium tab 10 mg	42	PREHEVBRIO SUS 10MCG/ML	119
pravastatin sodium tab 20 mg	42	PREMARIN TAB 0.3MG	95
pravastatin sodium tab 40 mg	42	PREMARIN TAB 0.45MG	95
pravastatin sodium tab 80 mg	42	PREMARIN TAB 0.625MG	96
praziquantel tab 600 mg	13	PREMARIN TAB 0.9MG	95
prazosin hcl cap 1 mg	38	PREMARIN TAB 1.25MG	96

PREMARIN VAG CRE 0.625MG	96	PROGRAF CAP 5MG	117
PRENATAL+DHA MIS	125	PROGRAF GRA 0.2MG.....	117
<i>Prenatal 19</i>	127	PROGRAF GRA 1MG.....	117
PRENATAL 1 CAP	124	PROGRAF INJ 5MG/ML	117
PRENATAL CAP FORMULA	124	PROLASTIN-C INJ 1000MG.....	131
PRENATAL CAP OMEGA-3	124	PROLIA INJ 60MG/ML.....	85
PRENATAL DHA PAK MULTI	125	<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	
PRENATAL FRM TAB A-FREE	125	.....	135
PRENATAL GUM CHW 0.4-32.5.....	125	<i>promethazine hcl inj 25 mg/ml.....</i>	100
PRENATAL MUL CAP +DHA	125	<i>promethazine hcl inj 50 mg/ml</i>	100
PRENATAL MUL CAP DHA.....	125	<i>promethazine hcl oral soln 6.25 mg/5ml</i>	100
PRENATAL MULTIVITAMINS.....	125	<i>promethazine hcl suppos 12.5 mg</i>	100
PRENATAL TAB	125	<i>promethazine hcl suppos 25 mg</i>	100
PRENATAL TAB 27-0.8MG	125	<i>promethazine hcl tab 12.5 mg.....</i>	100
PRENATAL TAB COMPLETE.....	125	<i>promethazine hcl tab 25 mg</i>	100
PRENATAL TAB FORMULA.....	125	<i>promethazine hcl tab 50 mg.....</i>	100
PRENATL MULT CAP + DHA.....	125	<i>Promethazine Vc.....</i>	135
<i>Preparation Pad H</i>	148	<i>promethazine w/ codeine syrup 6.25-10</i>	
PRETOMANID TAB 200MG.....	17	<i>mg/5ml.....</i>	135
<i>Prevalite</i>	41	<i>Promethegan</i>	100
PREVNAR 20 INJ.....	119	<i>propafenone hcl cap er 12hr 225 mg.....</i>	40
PREZCOBIX TAB 800-150	17	<i>propafenone hcl cap er 12hr 325 mg.....</i>	40
PREZISTA SUS 100MG/ML.....	15	<i>propafenone hcl cap er 12hr 425 mg.....</i>	40
PREZISTA TAB 150MG	15	<i>propafenone hcl tab 150 mg.....</i>	40
PREZISTA TAB 75MG	15	<i>propafenone hcl tab 225 mg</i>	40
PRIFTIN TAB 150MG.....	17	<i>propafenone hcl tab 300 mg.....</i>	40
PRILOSEC OTC TAB 20MG.....	104	<i>proparacaine hcl ophth soln 0.5%</i>	130
<i>primaquine phosphate tab 26.3 mg (15 mg</i>		<i>propranolol hcl cap er 24hr 120 mg</i>	45
<i>base)</i>	14	<i>propranolol hcl cap er 24hr 160 mg.....</i>	45
<i>primidone tab 250 mg</i>	67	<i>propranolol hcl cap er 24hr 60 mg</i>	45
<i>primidone tab 50 mg</i>	67	<i>propranolol hcl cap er 24hr 80 mg</i>	45
PRIORIX INJ	119	<i>propranolol hcl oral soln 20 mg/5ml</i>	45
<i>probenecid tab 500 mg</i>	2	<i>propranolol hcl oral soln 40 mg/5ml</i>	45
<i>procainamide hcl inj 100 mg/ml</i>	40	<i>propranolol hcl tab 10 mg</i>	45
<i>prochlorperazine maleate tab 10 mg (base</i>		<i>propranolol hcl tab 20 mg.....</i>	45
<i>equivalent)</i>	100	<i>propranolol hcl tab 40 mg.....</i>	45
<i>prochlorperazine maleate tab 5 mg (base</i>		<i>propranolol hcl tab 60 mg</i>	45
<i>equivalent)</i>	100	<i>propranolol hcl tab 80 mg.....</i>	45
<i>prochlorperazine suppos 25 mg</i>	100	<i>propylthiouracil tab 50 mg.....</i>	97
<i>Proctozone-Hc</i>	104	PROQUAD INJ	119
<i>progesterone cap 100 mg</i>	97	<i>protriptyline hcl tab 10 mg</i>	58
<i>progesterone cap 200 mg</i>	97	<i>protriptyline hcl tab 5 mg</i>	58
PROGRAF CAP 0.5MG.....	117	<i>pseudoephed-bromphen-dm syrup 30-2-10</i>	
PROGRAF CAP 1MG.....	117	<i>mg/5ml</i>	79

<i>Pseudoephedrine Hcl Tab 60 mg</i>	139
<i>pyrazinamide tab 500 mg</i>	17
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	76
<i>pyridostigmine bromide tab 60 mg</i>	76
<i>pyridostigmine bromide tab er 180 mg</i>	76
<i>pyrimethamine tab 25 mg</i>	22

Q

QUADRACEL INJ.....	119
QUADRACEL INJ 0.5ML.....	119
<i>Quenalin Syp 12.5/5ml</i>	134
<i>quetiapine fumarate tab 100 mg</i>	63
<i>quetiapine fumarate tab 200 mg</i>	63
<i>quetiapine fumarate tab 25 mg</i>	63
<i>quetiapine fumarate tab 300 mg</i>	63
<i>quetiapine fumarate tab 400 mg</i>	63
<i>quetiapine fumarate tab 50 mg</i>	63
<i>quetiapine fumarate tab er 24hr 150 mg</i> ..	63
<i>quetiapine fumarate tab er 24hr 200 mg</i> ..	63
<i>quetiapine fumarate tab er 24hr 300 mg</i> ..	63
<i>quetiapine fumarate tab er 24hr 400 mg</i> ..	63
<i>quetiapine fumarate tab er 24hr 50 mg</i>	63
<i>quinapril hcl tab 10 mg</i>	38
<i>quinapril hcl tab 20 mg</i>	38
<i>quinapril hcl tab 40 mg</i>	38
<i>quinapril hcl tab 5 mg</i>	38
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	37
<i>quinine sulfate cap 324 mg</i>	14
QULIPTA TAB 10MG.....	73
QULIPTA TAB 30MG.....	73
QULIPTA TAB 60MG.....	73

R

<i>rabeprazole sodium ec tab 20 mg</i>	104
<i>raloxifene hcl tab 60 mg</i>	96
<i>ramelteon tab 8 mg</i>	72
<i>ramipril cap 1.25 mg</i>	38
<i>ramipril cap 10 mg</i>	38
<i>ramipril cap 2.5 mg</i>	38
<i>ramipril cap 5 mg</i>	38
<i>ranolazine tab er 12hr 1000 mg</i>	50
<i>ranolazine tab er 12hr 500 mg</i>	50
RAPAMUNE SOL 1MG/ML.....	117
RAPAMUNE TAB 0.5MG.....	117

RAPAMUNE TAB 1MG.....	117
RAPAMUNE TAB 2MG.....	117
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	61
<i>rasagiline mesylate tab 1 mg (base equiv)</i> ..	61
<i>Reclipsen</i>	88
RECOMBIVA HB INJ 10MCG/ML.....	119
RECOMBIVA HB INJ 5MCG/0.5.....	119
REFRESH LIQU DRO 1% OP.....	130
REFRESH OPTI DRO 0.5-0.9%.....	130
<i>Refresh P.m. Oin Op</i>	130
REFRESH TEAR DRO 0.5% OP.....	130
<i>Regenecare Gel Ha 2%</i>	146
REGRANEX GEL 0.01%.....	147
<i>Rehydralyte Sol</i>	125
RELENZA MIS DISKHALE.....	18
<i>Relief Eye Sol Drops</i>	130
RELION KETON TES.....	122
<i>Reno Cap</i>	123
<i>repaglinide tab 0.5 mg</i>	83
<i>repaglinide tab 1 mg</i>	83
<i>repaglinide tab 2 mg</i>	83
REPATHA INJ 140MG/ML.....	44
REPATHA PUSH INJ 420/3.5.....	44
REPATHA SURE INJ 140MG/ML.....	44
RESTASIS EMU 0.05% OP.....	130
RESTASIS MUL EMU 0.05% OP.....	130
RETACRIT INJ 10000UNT.....	109
RETACRIT INJ 20000UNI.....	109
RETACRIT INJ 2000UNIT.....	109
RETACRIT INJ 3000UNIT.....	109
RETACRIT INJ 40000UNT.....	109
RETACRIT INJ 4000UNIT.....	109
RETROVIR INJ 10MG/ML.....	15
REVLIMID CAP 10MG.....	28
REVLIMID CAP 15MG.....	29
REVLIMID CAP 2.5MG.....	28
REVLIMID CAP 20MG.....	29
REVLIMID CAP 25MG.....	29
REVLIMID CAP 5MG.....	28
REYATAZ POW 50MG.....	15
<i>Rhinocort Sus Allergy</i>	137
<i>ribavirin cap 200 mg</i>	21
<i>ribavirin tab 200 mg</i>	21

<i>rifabutin cap 150 mg</i>	17	<i>rizatriptan benzoate oral disintegrating tab</i>	
<i>rifampin cap 150 mg</i>	17	10 mg (base eq)	73
<i>rifampin cap 300 mg</i>	17	<i>rizatriptan benzoate oral disintegrating tab</i>	
<i>rifampin for inj 600 mg</i>	17	5 mg (base eq)	73
<i>riluzole tab 50 mg</i>	52	<i>rizatriptan benzoate tab 10 mg (base</i>	
<i>rimantadine hydrochloride tab 100 mg</i>	18	equivalent)	73
<i>RINVOQ LQ SOL 1MG/ML</i>	114	<i>rizatriptan benzoate tab 5 mg (base</i>	
<i>RINVOQ TAB 15MG ER</i>	114	equivalent)	73
<i>RINVOQ TAB 30MG ER</i>	114	<i>Robit Cgh Dm Cap 10-200mg</i>	79
<i>RINVOQ TAB 45MG ER</i>	114	<i>Robitussin Cap Cold+flu</i>	79
<i>risedronate sodium tab 150 mg</i>	85	<i>Robitussin Liq</i>	79
<i>risedronate sodium tab 30 mg</i>	85	<i>ROBITUSSIN LIQ CGH/CONG</i>	79
<i>risedronate sodium tab 35 mg</i>	85	<i>ROBITUSSIN LIQ TO GO CF</i>	79
<i>risedronate sodium tab 5 mg</i>	85	<i>Robitussin Sus 30mg/5ml</i>	78
<i>risedronate sodium tab delayed release 35</i>		<i>ROBITUSSIN SYP 7.5/5ML</i>	78
<i>mg</i>	85	<i>ROBITUSSIN DM SYP</i>	79
<i>risperidone orally disintegrating tab 0.25</i>		<i>roflumilast tab 250 mcg</i>	137
<i>mg</i>	63	<i>roflumilast tab 500 mcg</i>	137
<i>risperidone orally disintegrating tab 0.5 mg</i>		<i>ropinirole hydrochloride tab 0.25 mg</i>	61
.....	63	<i>ropinirole hydrochloride tab 0.5 mg</i>	61
<i>risperidone orally disintegrating tab 1 mg</i>	63	<i>ropinirole hydrochloride tab 1 mg</i>	61
<i>risperidone orally disintegrating tab 2 mg</i>	63	<i>ropinirole hydrochloride tab 2 mg</i>	61
<i>risperidone orally disintegrating tab 3 mg</i>	63	<i>ropinirole hydrochloride tab 3 mg</i>	61
<i>risperidone orally disintegrating tab 4 mg</i>	63	<i>ropinirole hydrochloride tab 4 mg</i>	61
<i>risperidone soln 1 mg/ml</i>	63	<i>ropinirole hydrochloride tab 5 mg</i>	61
<i>risperidone tab 0.25 mg</i>	63	<i>rosuvastatin calcium tab 10 mg</i>	42
<i>risperidone tab 0.5 mg</i>	63	<i>rosuvastatin calcium tab 20 mg</i>	43
<i>risperidone tab 1 mg</i>	63	<i>rosuvastatin calcium tab 40 mg</i>	43
<i>risperidone tab 2 mg</i>	63	<i>rosuvastatin calcium tab 5 mg</i>	42
<i>risperidone tab 3 mg</i>	63	<i>ROTARIX SUS</i>	120
<i>risperidone tab 4 mg</i>	63	<i>ROTATEQ SOL</i>	120
<i>ritonavir tab 100 mg</i>	15	<i>rufinamide susp 40 mg/ml</i>	67
<i>rivastigmine tartrate cap 1.5 mg (base</i>		<i>rufinamide tab 200 mg</i>	67
<i>equivalent)</i>	54	<i>rufinamide tab 400 mg</i>	67
<i>rivastigmine tartrate cap 3 mg (base</i>		<i>Ryclora</i>	134
<i>equivalent)</i>	54	<i>RYDAPT CAP 25MG</i>	32
<i>rivastigmine tartrate cap 4.5 mg (base</i>		S	
<i>equivalent)</i>	54	<i>Salactic Fil Sol 17%</i>	147
<i>rivastigmine tartrate cap 6 mg (base</i>		<i>SANCUSO DIS 3.1MG</i>	101
<i>equivalent)</i>	54	<i>SANDIMMUNE CAP 100MG</i>	118
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	54	<i>SANDIMMUNE CAP 25MG</i>	118
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	54	<i>SANDIMMUNE INJ 50MG/ML</i>	118
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	54	<i>SANDIMMUNE SOL 100MG/ML</i>	118
<i>Rivelsa</i>	88		

<i>sapropterin dihydrochloride powder packet</i>		<i>silver sulfadiazine cream 1%</i>	142
100 mg	96	SIMBRINZA SUS 1-0.2%	130
<i>sapropterin dihydrochloride powder packet</i>		<i>Simethicone Dro 20/0.3ml</i>	101
500 mg	96	SIMPONI ARIA SOL 50MG/4ML	111
<i>sapropterin dihydrochloride tab 100 mg</i> ..	96	SIMPONI INJ 100MG/ML	114
SARNA LOT	147	SIMPONI INJ 50/0.5ML	114
SAVELLA MIS TITR PAK.....	71	<i>simvastatin tab 10 mg</i>	43
SAVELLA TAB 100MG.....	72	<i>simvastatin tab 20 mg</i>	43
SAVELLA TAB 12.5MG.....	71	<i>simvastatin tab 40 mg</i>	43
SAVELLA TAB 25MG	72	<i>simvastatin tab 5 mg</i>	43
SAVELLA TAB 50MG	72	<i>simvastatin tab 80 mg</i>	43
SAXENDA INJ 18MG/3ML	1	<i>Sinus Tab Max-St</i>	79
<i>Sb Itch Relf Spr 2%</i>	140	<i>sirolimus oral soln 1 mg/ml</i>	118
<i>scopolamine td patch 72hr 1 mg/3days</i> ...	101	<i>sirolimus tab 0.5 mg</i>	118
SCOT-TUSSIN LIQ DM SF	79	<i>sirolimus tab 1 mg</i>	118
<i>Sea-Omega 50 Cap 1000mg</i>	127	<i>sirolimus tab 2 mg</i>	118
SEBULEX SHA	140	SIRTURO TAB 100MG.....	17
<i>selegiline hcl cap 5 mg</i>	61	SIRTURO TAB 20MG	17
<i>selegiline hcl tab 5 mg</i>	61	SKYLA IUD 13.5MG	88
<i>selenium sulfide lotion 2.5%</i>	143	SKYRIZI INJ 150MG/ML	114
<i>selenium tab 200 mcg</i>	127	SKYRIZI INJ 180/1.2	114
SELSUN BLUE SHA DEEP CLN	147	SKYRIZI INJ 360/2.4.....	114
SELZENTRY SOL 20MG/ML.....	15	SKYRIZI PEN INJ 150MG/ML.....	115
<i>Senexon Liq 8.8mg/5</i>	121	SKYRIZI SOL 60MG/ML	111
<i>Senna Tab 8.6mg</i>	121	SLO-NIACIN TAB 500MG CR	150
SEREVENT DIS AER 50MCG	135	SLOW-MAG TAB	126
<i>sertraline hcl oral concentrate for solution</i>		SLYND TAB 4MG	88
20 mg/ml.....	58	SMART RINSE SOL BBL BLAS	148
<i>sertraline hcl tab 100 mg</i>	58	SM CALAMINE LOT.....	148
<i>sertraline hcl tab 25 mg</i>	58	<i>Sm Eye Dro</i>	131
<i>sertraline hcl tab 50 mg</i>	58	<i>Sm Fluoride Sol Mint</i>	148
<i>sevelamer carbonate packet 0.8 gm</i>	97	<i>Sm Lice Lot Treatmnt</i>	147
<i>sevelamer carbonate packet 2.4 gm</i>	97	<i>Sm Nicotine Transdermal S</i>	78
<i>sevelamer carbonate tab 800 mg</i>	97	SM ONE DAILY MIS PRENATAL	125
SHARPS CONTAINER	90	<i>Sm Vit B1 Tab 100mg</i>	150
SHINGRIX INJ 50/0.5ML.....	120	<i>sodium bicarbonate tab 650 mg</i>	12
SIGNIFOR INJ 0.3MG/ML	96	<i>sodium chloride hypertonic ophth oint 5%</i>	
SIGNIFOR INJ 0.6MG/ML.....	96	.....	130
SIGNIFOR INJ 0.9MG/ML.....	96	<i>sodium chloride hypertonic ophth soln 5%</i>	
<i>sildenafil citrate iv soln 10 mg/12.5ml (base</i>		.....	130
<i>equivalent)</i>	51	<i>sodium chloride inj 2.5 meq/ml (14.6%)</i> .	126
<i>sildenafil citrate tab 20 mg</i>	51	<i>sodium chloride irrigation soln 0.9%</i>	147
<i>silodosin cap 4 mg</i>	104	<i>sodium chloride iv soln 0.45%</i>	126
<i>silodosin cap 8 mg</i>	105	<i>sodium chloride iv soln 0.9%</i>	126

<i>sodium chloride iv soln 3%</i>	126	<i>Soothe Tab 262mg</i>	25
<i>sodium chloride iv soln 5%</i>	126	<i>sorafenib tosylate tab 200 mg (base</i>	
<i>sodium chloride preservative free (pf) inj</i>		<i>equivalent)</i>	32
0.9%	126	<i>Sore Throat Loz Cherry</i>	148
<i>sodium chloride soln nebu 0.9%</i>	137	<i>Sore Throat Spr 1.4%</i>	148
<i>sodium chloride soln nebu 10%</i>	137	<i>sotalol hcl (afib/afl) tab 120 mg</i>	41
<i>sodium chloride soln nebu 3%</i>	137	<i>sotalol hcl (afib/afl) tab 160 mg</i>	41
<i>sodium chloride soln nebu 7%</i>	137	<i>sotalol hcl (afib/afl) tab 80 mg</i>	40
<i>sodium chloride tab 1 gm</i>	126	<i>sotalol hcl tab 120 mg</i>	41
<i>sodium fluoride chew tab 0.25 mg f (from</i>		<i>sotalol hcl tab 160 mg</i>	41
0.55 mg naf)	126	<i>sotalol hcl tab 240 mg</i>	41
<i>sodium fluoride chew tab 0.5 mg f (from 1.1</i>		<i>sotalol hcl tab 80 mg</i>	41
mg naf)	126	SOVALDI PAK 150MG	21
<i>sodium fluoride chew tab 1 mg f (from 2.2</i>		SOVALDI PAK 200MG	21
mg naf)	126	SOVALDI TAB 200MG	21
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1</i>		SOVALDI TAB 400MG	21
mg/ml naf)	126	SPIKEVAX INJ 2024-25	120
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg</i>		SPIKEVAX INJ 50/0.5ML	120
naf)	126	<i>spinosad susp 0.9%</i>	147
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>		SPIRIVA AER 1.25MCG	132
.....	126	SPIRIVA SPR 2.5MCG	132
<i>sodium phenylbutyrate oral powder 3</i>		<i>spironolactone & hydrochlorothiazide tab</i>	
gm/teaspoonful.....	98	25-25 mg	49
<i>sodium phenylbutyrate tab 500 mg</i>	98	<i>spironolactone tab 100 mg</i>	38
SOD OXYBATE SOL 500MG/ML	76	<i>spironolactone tab 25 mg</i>	38
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-</i>		<i>spironolactone tab 50 mg</i>	38
3.13-1.6 gm/177ml.....	102	<i>Spot Acne Cre 2.5%</i>	141
SOFTCLIX MIS LANCETS.....	90	<i>Sprintec 28</i>	88
<i>solifenacin succinate tab 10 mg</i>	106	SPRYCEL TAB 100MG	33
<i>solifenacin succinate tab 5 mg</i>	106	SPRYCEL TAB 140MG	33
SOLQUA INJ 100/33	82	SPRYCEL TAB 20MG	33
SOLU-CORTEF INJ 1000MG.....	92	SPRYCEL TAB 50MG	33
SOLU-CORTEF INJ 100MG	92	SPRYCEL TAB 70MG	33
SOLU-CORTEF INJ 250MG	92	SPRYCEL TAB 80MG	33
SOLU-CORTEF INJ 500MG	92	<i>Sps</i>	97
SOLU-MEDROL INJ 2GM	92	<i>Sronyx</i>	88
SOMATULINE INJ 120/.5ML	80	<i>Ssd</i>	142
SOMATULINE INJ 60/0.2ML	80	STELARA INJ 45MG/0.5	115
SOMATULINE INJ 90/0.3ML	80	STELARA INJ 90MG/ML	115
SOMAVERT INJ 10MG.....	80	STENDRA TAB 100MG.....	105
SOMAVERT INJ 15MG.....	80	STENDRA TAB 200MG	105
SOMAVERT INJ 20MG	80	STENDRA TAB 50MG	105
SOMAVERT INJ 25MG	80	STIOLTO AER 2.5-2.5.....	132
SOMAVERT INJ 30MG	81	STIVARGA TAB 40MG	33

<i>Stomach Relf Chw 262mg</i>	25
<i>Stomach Relf Sus 262/15ml</i>	25
<i>Stomach Relf Sus 525/15ml</i>	25
<i>Stool Softnr Cap 100mg</i>	121
<i>Stop Lice Kit Complete</i>	147
STRIVERDI AER 2.5MCG	135
STUART ONE CAP	125
SUBLOCADE INJ 100/0.5	11
SUBLOCADE INJ 300/1.5	11
SUCRAID SOL 8500/ML.....	102
<i>sucralfate tab 1 gm</i>	103
<i>Sudafed 12hr Tab 120mg Cr</i>	139
SUDAFED CONG TAB 30MG	139
<i>Sudafed Pe Sol Cold/cgh</i>	79
SUDAFED PE TAB SIN CONG.....	139
SUFLAVE SOL	102
<i>sulconazole nitrate cream 1%</i>	143
<i>sulconazole nitrate solution 1%</i>	143
<i>sulfacetamide sodium lotion 10% (acne)</i>	141
<i>sulfacetamide sodium ophth oint 10%</i>	128
<i>sulfacetamide sodium ophth soln 10%</i>	128
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	128
<i>sulfadiazine tab 500 mg</i>	13
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	22
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	22
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	22
SULFAMYLON CRE 85MG/GM	142
<i>sulfasalazine tab 500 mg</i>	101
<i>sulfasalazine tab delayed release 500 mg</i>	101
<i>sulindac tab 150 mg</i>	3
<i>sulindac tab 200 mg</i>	3
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	74
<i>sumatriptan nasal spray 20 mg/act</i>	74
<i>sumatriptan nasal spray 5 mg/act</i>	73
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	74
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	74

<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	74
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	74
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	74
<i>sumatriptan succinate tab 100 mg</i>	74
<i>sumatriptan succinate tab 25 mg</i>	74
<i>sumatriptan succinate tab 50 mg</i>	74
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	33
<i>sunitinib malate cap 25 mg (base equivalent)</i>	33
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	33
<i>sunitinib malate cap 50 mg (base equivalent)</i>	33
SUNOSI TAB 150MG	76
SUNOSI TAB 75MG.....	76
SUPPRELIN LA KIT 50MG.....	85
SUTAB TAB.....	102
Syeda	88
SYMDEKO TAB 100-150	136
SYMDEKO TAB 50-75MG	136
SYMLINPEN 60 INJ 1000MCG	81
SYMLNPEN 120 INJ 1000MCG	81
SYMTUZA TAB	17
SYNAREL SOL 2MG/ML	90
SYNJARDY TAB	83
SYNJARDY TAB 12.5-500.....	84
SYNJARDY TAB 5-1000MG	84
SYNJARDY TAB 5-500MG	84
SYNJARDY XR TAB	84
SYNJARDY XR TAB 10-1000	84
SYNJARDY XR TAB 25-1000.....	84
SYNJARDY XR TAB 5-1000MG	84
SYNTHROID TAB 100MCG	98
SYNTHROID TAB 112MCG	98
SYNTHROID TAB 125MCG.....	98
SYNTHROID TAB 137MCG.....	98
SYNTHROID TAB 150MCG	98
SYNTHROID TAB 175MCG.....	98
SYNTHROID TAB 200MCG	98
SYNTHROID TAB 25MCG	97

SYNTHROID TAB 300MCG	98
SYNTHROID TAB 50MCG.....	98
SYNTHROID TAB 75MCG	98
SYNTHROID TAB 88MCG.....	98
Systane Dro Contacts	130
SYSTANE SOL.....	130

T

TABLOID TAB 40MG	28
tacrolimus cap 0.5 mg	118
tacrolimus cap 1 mg	118
tacrolimus cap 5 mg	118
tacrolimus oint 0.03%	144
tacrolimus oint 0.1%.....	144
tadalafil tab 2.5 mg.....	105
tadalafil tab 20 mg (pah).....	51
tadalafil tab 5 mg	105
TAFINLAR CAP 50MG	33
TAFINLAR CAP 75MG	33
TAFINLAR TAB 10MG	33
tafluprost preservative free (pf) ophth soln 0.0015%.....	131
Take Action	88
TAKHZYRO INJ 150MG/ML.....	116
TAKHZYRO INJ 300/2ML	116
TALTZ INJ 20/0.25	115
TALTZ INJ 40/0.5ML.....	115
TALTZ INJ 80MG/ML	115
tamoxifen citrate tab 10 mg (base equivalent)	30
tamoxifen citrate tab 20 mg (base equivalent)	30
tamsulosin hcl cap 0.4 mg	105
tasimelteon capsule 20 mg.....	72
TAVIST TAB 1.34MG.....	134
tazarotene cream 0.05%.....	143
tazarotene cream 0.1%.....	143
tazarotene gel 0.05%	143
tazarotene gel 0.1%.....	143
Tazicef	19
TAZORAC CRE 0.05%	143
TEARS NATURA OIN PM	130
Tears Natura Sol Free Op	130
telmisartan-amlodipine tab 40-10 mg.....	39
telmisartan-amlodipine tab 40-5 mg	39
telmisartan-amlodipine tab 80-10 mg.....	39
telmisartan-amlodipine tab 80-5 mg	39
telmisartan-hydrochlorothiazide tab 40- 12.5 mg.....	39
telmisartan-hydrochlorothiazide tab 80-12.5 mg	39
telmisartan-hydrochlorothiazide tab 80-25 mg	39
telmisartan tab 20 mg	40
telmisartan tab 40 mg	40
telmisartan tab 80 mg	40
temazepam cap 15 mg	72
temazepam cap 22.5 mg.....	72
temazepam cap 30 mg.....	72
temazepam cap 7.5 mg.....	72
TEMODAR INJ 100MG.....	26
temozolomide cap 100 mg	26
temozolomide cap 140 mg.....	26
temozolomide cap 180 mg.....	26
temozolomide cap 20 mg	26
temozolomide cap 250 mg	26
temozolomide cap 5 mg	26
tenofovir disoproxil fumarate tab 300 mg.15	
terazosin hcl cap 10 mg (base equivalent)	105
terazosin hcl cap 1 mg (base equivalent) 105	
terazosin hcl cap 2 mg (base equivalent)105	
terazosin hcl cap 5 mg (base equivalent)105	
terbinafine hcl tab 250 mg.....	14
terbutaline sulfate tab 2.5 mg	135
terbutaline sulfate tab 5 mg	135
terconazole vaginal cream 0.4%	106
terconazole vaginal cream 0.8%	106
terconazole vaginal suppos 80 mg	106
teriflunomide tab 14 mg.....	75
teriflunomide tab 7 mg	75
testosterone cypionate im inj in oil 100 mg/ml	81
testosterone cypionate im inj in oil 200 mg/ml	81
testosterone enanthate im inj in oil 200 mg/ml	81
testosterone td gel 10mg/act (2%)	81
testosterone td gel 25 mg/2.5gm (1%).....	81

<i>tetrabenazine tab 12.5 mg</i>	74	<i>timolol maleate tab 5 mg</i>	45
<i>tetrabenazine tab 25 mg</i>	74	<i>timolol ophth soln 0.5%</i>	129
<i>tetracycline hcl cap 250 mg</i>	25	TINACTIN CRE 1%	143
<i>tetracycline hcl cap 500 mg</i>	25	<i>tinidazole tab 250 mg</i>	13
<i>Tgt Apap Dro Infants</i>	11	<i>tinidazole tab 500 mg</i>	13
THALOMID CAP 100MG	29	<i>tiotropium bromide monohydrate inhal cap</i> <i>18 mcg (base equiv)</i>	132
THALOMID CAP 50MG	29	TIVICAY PD TAB 5MG	15
<i>theophylline elixir 80 mg/15ml</i>	139	TIVICAY TAB 50MG	15
<i>theophylline soln 80 mg/15ml</i>	139	<i>tizanidine hcl tab 2 mg (base equivalent)</i> .	76
<i>theophylline tab er 12hr 300 mg</i>	139	<i>tizanidine hcl tab 4 mg (base equivalent)</i> .	76
<i>theophylline tab er 12hr 450 mg</i>	139	TOBRADEX OIN 0.3-0.1%	128
<i>theophylline tab er 24hr 400 mg</i>	140	TOBRADEX ST SUS 0.3-0.05	128
<i>theophylline tab er 24hr 600 mg</i>	140	<i>tobramycin-dexamethasone ophth susp</i> <i>0.3-0.1%</i>	128
<i>Theraflu Sev Tab Cold/cgh</i>	79	<i>tobramycin nebu soln 300 mg/4ml</i>	136
<i>Thera-Gesic Cre</i>	146	<i>tobramycin nebu soln 300 mg/5ml</i>	136
THERANATAL CAP ONE	125	<i>tobramycin ophth soln 0.3%</i>	128
THERANATAL MIS COMPLETE	125	<i>tobramycin sulfate for inj 1.2 gm</i>	13
THERANATAL PAK OVAVITE	125	<i>tobramycin sulfate inj 2 gm/50ml (40</i> <i>mg/ml) (base equiv)</i>	13
THERANATAL TAB 27-1	125	<i>tobramycin sulfate inj 80 mg/2ml (40</i> <i>mg/ml) (base equiv)</i>	13
<i>Therapeutic Tab</i>	123	TODAY SPONGE MIS	105
<i>thioridazine hcl tab 100 mg</i>	64	<i>tolnaftate soln 1%</i>	143
<i>thioridazine hcl tab 10 mg</i>	63	<i>tolterodine tartrate cap er 24hr 2 mg</i>	106
<i>thioridazine hcl tab 25 mg</i>	63	<i>tolterodine tartrate cap er 24hr 4 mg</i>	106
<i>thioridazine hcl tab 50 mg</i>	64	<i>tolterodine tartrate tab 1 mg</i>	106
<i>thiothixene cap 10 mg</i>	64	<i>tolterodine tartrate tab 2 mg</i>	106
<i>thiothixene cap 1 mg</i>	64	<i>tolvaptan tab 15 mg</i>	96
<i>thiothixene cap 2 mg</i>	64	<i>tolvaptan tab 30 mg</i>	96
<i>thiothixene cap 5 mg</i>	64	<i>Tooth Sol Shield</i>	148
<i>tiagabine hcl tab 12 mg</i>	67	<i>topiramate sprinkle cap 15 mg</i>	67
<i>tiagabine hcl tab 16 mg</i>	67	<i>topiramate sprinkle cap 25 mg</i>	67
<i>tiagabine hcl tab 2 mg</i>	67	<i>topiramate sprinkle cap 50 mg</i>	67
<i>tiagabine hcl tab 4 mg</i>	67	<i>topiramate tab 100 mg</i>	67
TICE BCG INJ	29	<i>topiramate tab 200 mg</i>	67
<i>Tilia Fe</i>	88	<i>topiramate tab 25 mg</i>	67
<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	129	<i>topiramate tab 50 mg</i>	67
<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	129	<i>topotecan hcl for inj 4 mg (base equiv)</i>	36
<i>timolol maleate ophth soln 0.25%</i>	129	<i>toremifene citrate tab 60 mg (base</i> <i>equivalent)</i>	30
<i>timolol maleate ophth soln 0.5%</i>	129	<i>torsemide tab 100 mg</i>	49
<i>timolol maleate ophth soln 0.5% (once-</i> <i>daily)</i>	129	<i>torsemide tab 10 mg</i>	49
<i>timolol maleate tab 10 mg</i>	45		
<i>timolol maleate tab 20 mg</i>	45		

<i>torse mide tab 20 mg</i>	49	TRESIBA INJ 100UNIT	83
<i>torse mide tab 5 mg</i>	49	<i>tretinoin cap 10 mg</i>	34
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	10	<i>tretinoin cream 0.025%</i>	141
<i>tramadol hcl tab 50 mg</i>	9	<i>tretinoin cream 0.05%</i>	141
<i>tramadol hcl tab er 24hr 100 mg</i>	9	<i>tretinoin cream 0.1%</i>	141
<i>tramadol hcl tab er 24hr 200 mg</i>	10	<i>tretinoin gel 0.01%</i>	141
<i>tramadol hcl tab er 24hr 300 mg</i>	10	<i>tretinoin gel 0.025%</i>	141
<i>trandolapril tab 1 mg</i>	38	<i>tretinoin gel 0.05%</i>	141
<i>trandolapril tab 2 mg</i>	38	<i>tretinoin microsphere gel 0.04%</i>	141
<i>trandolapril tab 4 mg</i>	38	<i>tretinoin microsphere gel 0.1%</i>	141
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	37	<i>triamcinolone acetoneide cream 0.025%</i>	145
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	37	<i>triamcinolone acetoneide cream 0.1%</i>	145
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	37	<i>triamcinolone acetoneide cream 0.5%</i>	145
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	37	<i>triamcinolone acetoneide dental paste 0.1%</i>	148
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	109	<i>triamcinolone acetoneide lotion 0.025%</i> ..	146
<i>tranexamic acid tab 650 mg</i>	109	<i>triamcinolone acetoneide lotion 0.1%</i>	145
<i>tranylcypromine sulfate tab 10 mg</i>	58	<i>triamcinolone acetoneide nasal aerosol suspension 55 mcg/act</i>	137
<i>travoprost ophth soln 0.004%</i> (benzalkonium free) (bak free)	131	<i>triamcinolone acetoneide oint 0.025%</i>	146
<i>trazodone hcl tab 100 mg</i>	58	<i>triamcinolone acetoneide oint 0.1%</i>	146
<i>trazodone hcl tab 150 mg</i>	58	<i>triamcinolone acetoneide oint 0.5%</i>	146
<i>trazodone hcl tab 300 mg</i>	58	TRIAMINIC SYP CGH/CNG	79
<i>trazodone hcl tab 50 mg</i>	58	TRIAMINIC SYP CHST/NSL	79
TRECTOR TAB 250MG	17	<i>Triaminic Tab 10mg</i>	134
TRELEGY AER 100MCG	132	<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	49
TRELEGY AER 200MCG	132	<i>triamterene & hydrochlorothiazide tab 37.5- 25 mg</i>	49
TREMFYA INJ 100MG/ML	115	<i>triamterene & hydrochlorothiazide tab 75- 50 mg</i>	49
TREMFYA INJ 200/20ML	111	<i>triamterene cap 100 mg</i>	49
TREMFYA INJ 200/2ML	115	<i>triamterene cap 50 mg</i>	49
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	51	<i>triazolam tab 0.125 mg</i>	72
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	51	<i>triazolam tab 0.25 mg</i>	72
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i> ..	51	<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	64
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	51	<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	64
TRESIBA FLEX INJ 100UNIT	83	<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	64
TRESIBA FLEX INJ 200UNIT	83	<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	64
		<i>trifluridine ophth soln 1%</i>	128

<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	61	TWINRIX INJ	120
<i>trihexyphenidyl hcl tab 2 mg</i>	61	TWIRLA DIS 120-30	88
<i>trihexyphenidyl hcl tab 5 mg</i>	61	TYBLUME CHW 0.1-0.02	88
TRIKAFTA PAK 59.5MG.....	136	TYBOST TAB 150MG	16
TRIKAFTA PAK 75MG	136	TYLENOL 8 HR TAB 650MG	11
TRIKAFTA TAB	136	TYLENOL CHLD SUS COLD FLU	79
<i>Tri-Linyah</i>	88	TYLENOL COLD TAB SEVERE	79
<i>trimethobenzamide hcl cap 300 mg</i>	101	TYLENOL INFA SUS 160/5ML.....	11
<i>trimethoprim tab 100 mg</i>	22	<i>Tylenol Sinu Tab 5-325mg</i>	79
<i>trimipramine maleate cap 100 mg</i>	59	TYLENOL SORE LIQ THROAT	11
<i>trimipramine maleate cap 25 mg</i>	58	TYLENOL TAB 325MG	11
<i>trimipramine maleate cap 50 mg</i>	59	TYLENOL TAB 500MG.....	11
<i>Trinate</i>	127	TYMLOS INJ	85
TRINTELLIX TAB 10MG	59	TYSABRI INJ 300/15ML	75
TRINTELLIX TAB 20MG.....	59	TYVASO RF KT SOL 0.6MG/ML	51
TRINTELLIX TAB 5MG.....	59	TYVASO SOL 0.6MG/ML.....	51
TRIPLE PASTE OIN 12.8%	148	TYVASO ST KT SOL 0.6MG/ML	51
<i>Triple Paste Oin Af 2%</i>	143	U	
TRIPTODUR SUS 22.5MG	85	UBRELVY TAB 100MG	73
<i>Tri-Sprintec</i>	88	UBRELVY TAB 50MG.....	73
TRIUMEQ PD TAB	17	<i>Unithroid</i>	98
TRIUMEQ TAB	17	UPTRAVI INJ 1800MCG	51
TRI-VI-SOL SOL A/C/D.....	124	UPTRAVI PACK TAB 200/800	51
<i>Tri-Vitamin Dro</i>	124	UPTRAVI TAB 1000MCG	51
TRI-VITAMIN DRO	124	UPTRAVI TAB 1200MCG.....	51
<i>Tri-Vite/fluoride</i>	127	UPTRAVI TAB 1400MCG.....	51
<i>Trivora-28</i>	88	UPTRAVI TAB 1600MCG.....	51
TROGARZO INJ 150MG/ML	15	UPTRAVI TAB 200MCG	51
<i>tropicamide ophth soln 0.5%</i>	130	UPTRAVI TAB 400MCG	51
<i>tropicamide ophth soln 1%</i>	130	UPTRAVI TAB 600MCG	51
<i>trospium chloride cap er 24hr 60 mg</i>	106	UPTRAVI TAB 800MCG	51
<i>trospium chloride tab 20 mg</i>	106	<i>Urea 20 Intn Cre 20%</i>	147
TRULICITY INJ 0.75/0.5.....	82	URINE GLUCOSE MONITORING SUPPLIES	
TRULICITY INJ 1.5/0.5.....	82	.....	90, 122
TRULICITY INJ 3/0.5	82	URINE TEST STRIPS.....	90, 122
TRULICITY INJ 4.5/0.5.....	82	URIN-TEK KIT	122
TRUSTEX/RIA MIS NON-LUB.....	88	<i>ursodiol cap 300 mg</i>	103
TRUSTX NON-9 MIS RIB/STUD	88	<i>ursodiol tab 250 mg</i>	103
TUKYSA TAB 150MG	33	<i>ursodiol tab 500 mg</i>	103
TUKYSA TAB 50MG.....	33	V	
<i>Tussin Chest Liq 100/5ml</i>	79	VAGISTAT-1 OIN 6.5% VAG.....	106
TWIIST KIT REFILL	90	<i>Vagistat-3 kit Combo Pk</i>	106
TWIIST KIT STARTER	90	<i>valacyclovir hcl tab 1 gm</i>	18
TWIIST REFIL KIT INFUSION	90	<i>valacyclovir hcl tab 500 mg</i>	18

<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	18	VCF VAGINAL GEL CONTRACE	105
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	18	VCF VAGINAL MIS CONTRACP	105
<i>valproate sodium inj 100 mg/ml</i>	67	<i>Velivet</i>	88
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	67	VELPHORO CHW 500MG.....	97
<i>valproic acid cap 250 mg</i>	68	VELSIPITY TAB 2MG.....	115
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	39	VENCLEXTA TAB 100MG.....	28
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	39	VENCLEXTA TAB 10MG	28
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	39	VENCLEXTA TAB 50MG	28
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	39	VENCLEXTA TAB START PK	28
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	39	<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	59
<i>valsartan tab 160 mg</i>	40	<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	59
<i>valsartan tab 320 mg</i>	40	<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	59
<i>valsartan tab 40 mg</i>	40	<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	59
<i>valsartan tab 80 mg</i>	40	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	59
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	23	<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	59
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	23	<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	59
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	23	<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	59
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	23	<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	59
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	23	<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	59
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	23	<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	59
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	23	VENTAVIS SOL 10MCG/ML.....	52
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	78	VENTAVIS SOL 20MCG/ML	52
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	78	<i>verapamil hcl cap er 24hr 100 mg</i>	47
<i>varenicline tartrate tab 1 mg (base equiv)</i>	78	<i>verapamil hcl cap er 24hr 120 mg</i>	47
VARUBI TAB 90MG.....	101	<i>verapamil hcl cap er 24hr 180 mg</i>	47
VAXELIS INJ	120	<i>verapamil hcl cap er 24hr 200 mg</i>	47
VAXNEUVANCE INJ	120	<i>verapamil hcl cap er 24hr 240 mg</i>	47
		<i>verapamil hcl cap er 24hr 300 mg</i>	47
		<i>verapamil hcl cap er 24hr 360 mg</i>	47
		<i>verapamil hcl tab 120 mg</i>	47
		<i>verapamil hcl tab 40 mg</i>	47
		<i>verapamil hcl tab 80 mg</i>	47
		<i>verapamil hcl tab er 120 mg</i>	48

<i>verapamil hcl tab er 180 mg</i>	48	<i>vitamin b-6 tab 25mg</i>	150
<i>verapamil hcl tab er 240 mg</i>	48	<i>vitamin b-6 tab 50mg</i>	150
VERZENIO TAB 100MG	33	<i>vitamin c liq 500/5ml</i>	150
VERZENIO TAB 150MG.....	33	<i>vitamin c tab 1000mg</i>	150
VERZENIO TAB 200MG.....	33	<i>vitamin c tab 250mg</i>	150
VERZENIO TAB 50MG	33	<i>Vitamin D3 Cap 1000unit</i>	149
V-GO 20 KIT.....	90	<i>Vitamin D3 Cap 2000unit</i>	149
V-GO 30 KIT.....	90	<i>Vitamin D Chw 1000unit</i>	149
V-GO 40 KIT	90	<i>Vitamin E Cap 100unit</i>	149
VIBERZI TAB 100MG	102	<i>vitamin e cap 200 unit</i>	149
VIBERZI TAB 75MG	102	<i>vitamin e cap 450 mg (1000 unit)</i>	149
VICTOZA INJ 18MG/3ML	82	<i>vitamin e soln 15 unit/0.3ml (50 unit/ml)</i> 149	
<i>vigabatrin powd pack 500 mg</i>	68	<i>vitamins a & d oint</i>	147
<i>vigabatrin tab 500 mg</i>	68	<i>Vita-Plus E Cap 400unit</i>	149
<i>vilazodone hcl tab 10 mg</i>	59	<i>Vite/iron Chw Children</i>	124
<i>vilazodone hcl tab 20 mg</i>	59	VITRAKVI CAP 100MG.....	33
<i>vilazodone hcl tab 40 mg</i>	59	VITRAKVI CAP 25MG	33
VINATE CARE CHW 40-1MG	125	VITRAKVI SOL 20MG/ML	34
<i>vinblastine sulfate inj 1 mg/ml</i>	35	VOLTAREN GEL 1% ARTHR	147
<i>vincristine sulfate iv soln 1 mg/ml</i>	35	<i>voriconazole for susp 40 mg/ml</i>	14
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	35	<i>voriconazole tab 200 mg</i>	14
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	35	<i>voriconazole tab 50 mg</i>	14
VIOKACE TAB 10440	103	VOSEVI TAB.....	21
VIOKACE TAB 20880.....	103	VOWST CAP.....	103
<i>Viorele</i>	88	VRAYLAR CAP 1.5MG.....	64
VIREAD POW 40MG/GM.....	16	VRAYLAR CAP 3MG	64
VIREAD TAB 150MG	16	VRAYLAR CAP 4.5MG.....	64
VIREAD TAB 200MG	16	VRAYLAR CAP 6MG	64
VIREAD TAB 250MG	16	<i>Vyfemla</i>	88
VISTOGARD PAK 10GM	85	W	
VIT A FISH CAP 7500UNIT	149	<i>Wal-Fex Chld Sus 30mg/5ml</i>	134
<i>vitamin a cap 2400 mcg (8000 unit)</i>	149	<i>Wal-Itin D Tab 24 Hour</i>	79
<i>vitamin a cap 3 mg (10000 unit)</i>	149	<i>Wal-Itin Sol 5mg/5ml</i>	134
<i>vitamin b-12 injection</i>	127	<i>Wal-Mucil Pow 43%</i>	120
<i>Vitamin B-12 Tab 1000mcg</i>	110	<i>Wal-Phed Pe Tab 4-10mg</i>	79
<i>vitamin b-12 tab 100mcg</i>	110	<i>Wal-Profen Cap 200mg</i>	3
<i>vitamin b-12 tab 250mcg</i>	110	<i>Wal-Profen Tab Cold/sin</i>	79
<i>vitamin b-12 tab 500mcg</i>	110	<i>Wal-Tussin Liq Cf</i>	79
<i>vitamin b-1 tab 50mg</i>	150	<i>Wal-Tussin Syp 15mg/5ml</i>	78
<i>vitamin b-2 tab 100mg</i>	150	<i>Wal-Zyr Chw 10mg</i>	134
<i>vitamin b-2 tab 25mg</i>	150	<i>Wal-Zyr Chw 5mg</i>	134
<i>Vitamin B-6 Tab 100mg</i>	150	<i>warfarin sodium tab 10 mg</i>	108
		<i>warfarin sodium tab 1 mg</i>	108
		<i>warfarin sodium tab 2.5 mg</i>	108

<i>warfarin sodium tab 2 mg</i>	108
<i>warfarin sodium tab 3 mg</i>	108
<i>warfarin sodium tab 4 mg</i>	108
<i>warfarin sodium tab 5 mg</i>	108
<i>warfarin sodium tab 6 mg</i>	108
<i>warfarin sodium tab 7.5 mg</i>	108
WEGOVY INJ 0.25MG	1
WEGOVY INJ 0.5MG	1
WEGOVY INJ 1.7MG	1
WEGOVY INJ 1MG.....	1
WEGOVY INJ 2.4MG.....	1
<i>Wera</i>	88
WIDE-SEAL DPR KIT 60	121
WIDE-SEAL DPR KIT 65.....	121
WIDE-SEAL DPR KIT 70	121
WIDE-SEAL DPR KIT 75.....	121
WIDE-SEAL DPR KIT 80	121
WIDE-SEAL DPR KIT 85.....	121
WIDE-SEAL DPR KIT 90	121
WIDE-SEAL DPR KIT 95.....	121
<i>Wixela Inhub Aer 100/50</i>	25
<i>Wixela Inhub Aer 250/50</i>	25
<i>Wixela Inhub Aer 500/50</i>	25
X	
XALKORI CAP 150MG	34
XALKORI CAP 200MG.....	34
XALKORI CAP 20MG	34
XALKORI CAP 250MG.....	34
XALKORI CAP 50MG	34
XARELTO STAR TAB 15/20MG	108
XARELTO SUS 1MG/ML.....	108
XARELTO TAB 10MG	108
XARELTO TAB 15MG.....	108
XARELTO TAB 2.5MG.....	108
XARELTO TAB 20MG.....	108
XCOPRI PAK 100-150	68
XCOPRI PAK 12.5-25	68
XCOPRI PAK 150-200	68
XCOPRI PAK 50-100MG	68
XCOPRI TAB 100MG.....	68
XCOPRI TAB 150MG	68
XCOPRI TAB 200MG	68
XCOPRI TAB 25MG.....	68
XCOPRI TAB 50MG	68

XELJANZ SOL 1MG/ML	115
XELJANZ TAB 10MG	116
XELJANZ TAB 5MG.....	115
XELJANZ XR TAB 11MG.....	116
XELJANZ XR TAB 22MG.....	116
XEPI CRE 1%	142
XOLAIR INJ 150MG/ML.....	138
XOLAIR INJ 300/2ML	138
XOLAIR INJ 75/0.5.....	138
XOLAIR SOL 150MG	138
XTAMPZA ER CAP 13.5MG.....	10
XTAMPZA ER CAP 18MG.....	10
XTAMPZA ER CAP 27MG	10
XTAMPZA ER CAP 36MG	10
XTAMPZA ER CAP 9MG	10
XTANDI CAP 40MG.....	30
XTANDI TAB 40MG	30
XTANDI TAB 80MG	30
<i>Xulane</i>	88
XULTOPHY INJ 100/3.6	82
Y	
YONSA TAB 125MG	30
YOSPRALA TAB 325-40MG.....	109
YOSPRALA TAB 81-40MG	109
<i>Yuvaferm</i>	96
Z	
ZADITOR DRO 0.035%OP.....	129
<i>zafirlukast tab 10 mg</i>	136
<i>zafirlukast tab 20 mg</i>	136
<i>zaleplon cap 10 mg</i>	72
<i>zaleplon cap 5 mg</i>	72
ZEJULA TAB 100MG	34
ZEJULA TAB 200MG	35
ZEJULA TAB 300MG	35
ZELBORAF TAB 240MG	34
ZENPEP CAP 10000UNT	103
ZENPEP CAP 15000UNT	103
ZENPEP CAP 20000UNT	103
ZENPEP CAP 25000UNT.....	103
ZENPEP CAP 3000UNIT	103
ZENPEP CAP 40000UNT	103
ZENPEP CAP 5000UNIT.....	103
ZENPEP CAP 60000UNT	103
<i>Zenzedi</i>	71

ZEPBOUND INJ 10/0.5ML	1	<i>zolmitriptan tab 2.5 mg</i>	74
ZEPBOUND INJ 12.5/0.5	1	<i>zolmitriptan tab 5 mg</i>	74
ZEPBOUND INJ 15/0.5ML.....	1	<i>zolpidem tartrate tab 10 mg</i>	72
ZEPBOUND INJ 2.5/0.5.....	1	<i>zolpidem tartrate tab 5 mg</i>	72
ZEPBOUND INJ 5/0.5ML	1	<i>zolpidem tartrate tab er 12.5 mg</i>	72
ZEPBOUND INJ 7.5/0.5.....	1	<i>zolpidem tartrate tab er 6.25 mg</i>	72
ZERVIAE DRO 0.24%	129	<i>zonisamide cap 100 mg</i>	68
<i>zidovudine cap 100 mg</i>	16	<i>zonisamide cap 25 mg</i>	68
<i>zidovudine syrup 10 mg/ml</i>	16	<i>zonisamide cap 50 mg</i>	68
<i>zidovudine tab 300 mg</i>	16	ZORTRESS TAB 0.25MG	118
<i>zileuton tab er 12hr 600 mg</i>	136	ZORTRESS TAB 0.5MG	118
<i>zinc gluconate tab 50 mg (elemental zn)</i> 127		ZORTRESS TAB 0.75MG	118
<i>zinc oxide oint 20%</i>	148	ZORTRESS TAB 1MG.....	118
<i>zinc oxide oint 40%</i>	148	ZOSTRIX NAT CRE 0.033%	146
<i>ziprasidone hcl cap 20 mg</i>	64	<i>Zovia 1/35</i>	89
<i>ziprasidone hcl cap 40 mg</i>	64	ZUBSOLV SUB 0.7-0.18	77
<i>ziprasidone hcl cap 60 mg</i>	64	ZUBSOLV SUB 1.4-0.36	77
<i>ziprasidone hcl cap 80 mg</i>	64	ZUBSOLV SUB 11.4-2.9	77
ZIRGAN GEL 0.15%.....	128	ZUBSOLV SUB 2.9-0.71	77
ZITHROMAX POW 1GM PAK.....	20	ZUBSOLV SUB 5.7-1.4.....	77
<i>zoledronic acid inj conc for iv infusion 4</i>		ZUBSOLV SUB 8.6-2.1.....	77
<i>mg/5ml</i>	85	ZYDELIG TAB 100MG	34
<i>zoledronic acid iv soln 5 mg/100ml</i>	85	ZYDELIG TAB 150MG	34
ZOLINZA CAP 100MG.....	35	ZYKADIA TAB 150MG.....	34
<i>zolmitriptan nasal spray 5 mg/spray unit</i> .74		ZYLET SUS 0.5-0.3%	128
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>		ZYNCOF SYP 20-400/5	79
.....	74	ZYRTEC ALLGY TAB 10MG	134
<i>zolmitriptan orally disintegrating tab 5 mg</i>		ZYRTEC CHILD SOL 5MG/5ML.....	134
.....	74	ZYRTEC-D TAB 5-120MG.....	79