



North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES

A Division of the Department of State Treasurer

North Carolina State Health Plan 2025 Custom Formulary

Effective 05/01/2025

Please talk to your provider about prescribing formulary medications, which may help reduce your out-of-pocket costs. This list can help guide you and your doctor in selecting an appropriate medication.

The comprehensive formulary document is regularly updated. Please visit the [Plan's website](#) for the most up-to-date information. This guide was current at the time of printing and is subject to change.

To search for a medication name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on Search.

USE CAUTION BEFORE PRINTING; LARGE CONTENT DOCUMENT!

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Member Guide to Covered Medications on the Formulary

This guide lists the approved brand name and generic prescription medications that have been reviewed by the North Carolina State Health Plan (Plan). Please refer to this formulary guide for information about medications covered by this formulary and present this guide to your provider if you require a prescription.

The prescription medications listed in the formulary, or their tier placement may change from time to time due to a change in the cost of the medication and/or in the classification of the medication by the U.S. Food and Drug Administration (FDA) or nationally recognized medication databases (e.g., Medi-Span). For a more complete listing of medication coverage and costs, you may use our drug [Lookup tools](#). You may also call CVS Caremark® Customer Service at 1-888-321-3124 to verify prescription medication benefits.

A formulary is a list of prescription medications covered by a health plan. The Plan's Pharmacy & Therapeutics (P&T) Committee reviews medications at least quarterly. This includes ongoing reviews of clinical information about new medications and reviews of new safety and efficacy information about older medications. The majority of the Plan's P&T Committee is composed of practicing prescribers and pharmacists independent of the Plan. Tier placement of prescription medications in the formulary may be determined by the effectiveness and safety of the medication, the cost of the medication, and/or the classification of the medications by the FDA or nationally recognized medication databases (e.g., Medi-Span).

Please refer to <https://www.shpnc.org> for detailed information regarding your pharmacy benefits, including out-of-pocket costs, prior authorization and step therapy medication requests, and applicable exclusions.

Formulary Tiers

The Formulary covers most medications approved by the FDA, within existing benefits. The plan design determines the member's payment obligation.

Definitions for the Tiers are as follows:

Tier 0: Made up of zero-cost medications including Affordable Care Act (ACA) preventive medications, insulin, and preferred Blood Glucose Meters (BGMs).

Tier 1: Typically includes the most cost-effective of non-specialty prescription medications; most are generic though there are a few instances in which the branded product is more cost-effective. Also includes some specialty generic oral antiretroviral and anti-rejection immunosuppressant medications.

Tier 2: Typically includes preferred brand non-specialty medications and some high-cost generics. Also includes some specialty brand oral antiretroviral and anti-rejection immunosuppressant medications and preferred Continuous Glucose Monitors (CGMs) and associated supplies.

Tier 3: Typically includes non-preferred brands, including branded generics (also known as single source generics), non-specialty medications and compounds. Also includes some non-preferred specialty brand oral antiretroviral medications. Excluded, non-specialty medications that are approved via the exceptions process also take a Tier 3 copay.

Tier 4: Typically includes the most cost-effective specialty medications including generics and some biosimilars.

Tier 5: Typically includes preferred brand specialty medications and some biosimilar medications. Also includes some high-cost non-specialty medications.

Tier 6: Non-preferred brand specialty prescription medications. Excluded, specialty medications that are approved via the exceptions process also take a Tier 6 copay.

Tier 7: Preferred diabetic supplies and preferred Blood Glucose Meter (BGM) supplies.

Pharmacy Benefit Cost-Share Compare by Plan

The grid below provides a summary of the 2025 Plan Year cost-share and unique copays for each of the Plans. Additional description for unique copays and reference to other resources is found in following pages within the guide.

Formulary Tier or Unique Copay	80/20 Plan	70/30 Plan	High Deductible Health Plan
Tier 0	\$0	\$0	\$0
Tier 1	\$5 copay per 30-day supply	\$16 copay per 30-day supply	50% after deductible
Tier 2	\$30 copay per 30-day supply	\$47 copay per 30-day supply	50% after deductible
Tier 3	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
Tier 4	\$100 copay per 30-day supply	\$200 copay per 30-day supply	50% after deductible
Tier 5	\$250 copay per 30-day supply	\$350 copay per 30-day supply	50% after deductible
Tier 6	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
Tier 7	\$5 copay per 30-day supply	\$10 copay per 30-day supply	50% after deductible
HDHP Preventive Medications (PV)	not applicable	not applicable	50% bypass deductible

Generic Medications

In most cases, choosing a generic medication equivalent, when available, may mean significant savings to you. We encourage you to discuss with your provider whether a generic alternative is an available treatment option. Especially for medications that are taken daily and refilled frequently, you will experience the long-term savings of a lower medication payment month after month. **If you choose a brand name prescription medication and a generic equivalent is available, you may be subject to higher out-of-pocket expense.**

Compounded Prescriptions

Compounded prescriptions contain two or more medications mixed together. Compounded prescriptions are processed according to member benefits. To be eligible for coverage, compounded medications must contain at least one ingredient that is defined as a prescription medication and must not be a copy of a commercially available product. Compounded medications may be subject to prior authorization and benefit exclusion.

Utilization Management: Prior Authorization, Quantity Limitations and Step Therapy Medications

Certain medications may be subject to prior authorization, quantity limitations, or step therapy programs. The Plan's P&T Committee reviews and approves the clinical criteria for these programs.

- Medications that have prior authorization requirements must be reviewed by CVS Caremark for coverage determination before coverage can be authorized.
- Certain medications may also have limitations on the quantity and days' supply for coverage. Quantities in excess of the coverage limit must be reviewed and approved by CVS Caremark coverage determination before coverage can be authorized for amounts in excess of the limits.
- For coverage of step therapy medications, the Plan requires that the member has tried non-restricted formulary alternatives medications first. Coverage for step therapy medications may be provided without the use of a non-step therapy medication if the prescriber certifies in writing that the member has previously used non-restricted medications and the non-restricted medications have been detrimental to the member's health or have been ineffective in treating the same condition and, in the opinion of the prescriber, are likely to be detrimental to the member's health or ineffective in treating the condition in the future. Clinical rationale and documentation for exception requests may be required.

The FDA is responsible for approving medications for use based on clinical data proving the medication is safe and effective for that specific use. The Plan's utilization management programs follow FDA-approved uses for these medications. However, the Plan recognizes that in many cases, "off-label" (i.e., non-FDA approved) uses of prescription medications may be acceptable. In determining the acceptability of off label uses, the Plan utilizes several sources of clinical information including but not limited to:

1. Nationally recognized clinical references including American Hospital Formulary Service Medication Information
2. The results of at least two randomized, controlled clinical studies that support a specific off-label use, and that are published in peer-reviewed professional medical journals
3. Consultations with internal and external physician experts regarding community standards. Additional searches for current supporting medical literature may be performed utilizing standard electronic databases.

Specialty Medications

These medications, as classified by the Plan, have unique uses, treat complex medical conditions, require special dosing or monitoring, are typically prescribed by a specialist provider and/or require special patient education, training, or coordination of care. Most specialty medications can be found on Tier 6, but some may be found on lower specialty Tiers 4 or 5.

Specialty medications will need to be filled with CVS Specialty® pharmacy. These medications are identified in the specialty column of the formulary guide. Call the CVS Specialty customer service number at 1-800-237-2767 to determine the steps required to fill your specialty medication prescription.

Affordable Care Act

Please note, some medications may have \$0 cost-sharing under the Affordable Care Act (ACA) for members enrolled in the 70/30, 80/20 or HDHP plans. These medications take Tier 0. Examples of categories of medications that may be subject to \$0 cost share include aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), iron supplements, tobacco cessation, vaccines, vitamin D supplements, and some contraceptive medications and devices. You may find additional information about these medications on the [ACA Preventive List](#). These medications are identified by the notation of "**ACA**" next to qualifying medications within the formulary guide. If you do not find the medication you are searching for, consult or contact CVS Caremark customer service at 1-888-321-3124 to find out if the medication is available over the counter or is covered under your medical and/or pharmacy benefit.

High Deductible Health Plan (HDHP) Preventive Medications

For the High Deductible Health Plan some preventive medications used to prevent or manage certain health conditions are covered without meeting a deductible. Coinsurance will still apply. These medications are identified in the guide with a "**PV**" notation. Additional information about these medications can be found on the [HDHP Preventive Medication List](#).

Insulin

The Plan will cover the full cost of insulin. This means that any covered insulin or insulin approved through the formulary exceptions (medical necessity) process will take Tier 0 and have a \$0 copay/coinsurance for members. Preferred insulin products are identified in the guide with a notation of “**\$0 copay per 30-day supply**”.

Non-Covered Medications

The Plan has a custom closed formulary. In a “closed” formulary, certain drugs are not covered. This comprehensive formulary document notes drugs that are not covered by the Plan. This is applicable to the Traditional Pharmacy Benefit (which includes the 80/20 Plan and 70/30 Plan). Non-covered medications are designated in the formulary guide with an “**NC**.” A formulary exception process is available to support Plan members who, per their prescriber, have a medical necessity to remain on a non-covered drug. The exception process is administered by CVS Caremark, the Plan’s Pharmacy Benefit Manager.

Medical Benefit Specialty Medications

Some specialty medications are covered under the medical benefit and are subject to office charges. These medications are usually administered by intramuscular injection or intravenous injection or infusion under provider supervision in an office, outpatient setting or through home infusion. Medical benefit specialty medications are designated in the formulary guide with an “**M**.” Members may obtain prior authorization, and providers may contact Aetna Customer Service at 1-833-690-1037.

Preferred Blood Glucose Monitoring and Diabetic Supplies

Diabetic testing supplies associated with the Plan’s preferred Blood Glucose Monitoring (BGM) systems take Tier 7 and will have a unique copay of \$5 per 30-day supply for the 80/20 Plan or \$10 per 30-day supply for the 70/30 Plan. This unique copay also applies to preferred insulin pens and syringes and lancets. It does not apply to Continuous Glucose Monitoring (CGM) products.

Using the Member Guide to the Basic Formulary

The Medication List is organized into broad categories (e.g., ANALGESICS AND ANESTHETICS). The graphic below shows the information that is provided in each column of the medication list and is an example only. Please use the medication search function to find current information for medications on the medication list.

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
ANALGESICS, OTHER		
OFIRMEV INJ 10MG/ML	1	PA
ANESTHETICS PV		
AMIDATE INJ 2MG/ML	4	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 2.5GM	5	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 500MG	5	PA, ST, QL, SP, ACA, PV
DIPRIVAN INJ	5	
DIPRIVAN INJ 100MG/ML	5	PV
DIPRIVAN INJ 200/20ML	5	
DIPRIVAN INJ 500/50ML	5	
<i>etomidate iv soln 2 mg/ml</i>	2	ST

Document Layout Key

Column	Description
Drug Name	Lists the medication name. Generic medications are listed in lowercase, <i>italicized</i> letters. Brand name medications are CAPITALIZED. Separate medication entries are required for some dosage forms such as extended-release and delayed-release.
Drug Tier	Indicates the tier level.
Requirements/Limits	Indicates how the medication is classified or whether any Utilization Management program(s) apply. For instance, SP indicates that the medication is classified as specialty, PV indicates that the medication is considered preventive, and ST notates that step therapy applies for this medication. A full list of abbreviations can be found under the LEGEND section of this document.

Legend

Abbreviation/Acronym

cap
chew
conc
cr
dr
ec
effer
equiv

Definition

capsule
chewable
concentrate
controlled-release
delayed-release
enteric coated
effervescent
equivalent

Abbreviation/Acronym**Definition**

er	extended-release
inhal	inhalation
inj	injection
liq	liquid
lot	lotion
nebu	nebulizer
odt	orally disintegrating tablet
oint	ointment
ophth	ophthalmic
powd	powder
sl	sublingual
sol/soln	solution
sr	sustained-release
suppos	suppository
susp	suspension
tab	tablet
td	transdermal
ACA	Affordable Care Act Copay
NC	Not Covered
OTC	Over the counter
PA	Prior Authorization
PV	Preventive (HDHP)
QL	Quantity Limit
SP	Specialty
ST	Step Therapy

NOTICE

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with North Carolina State Health Plan or CVS Caremark.

When viewing the formulary via the Internet, please be advised that this document is updated periodically, and changes may appear prior to their effective date to allow for client notification.

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

ADDERALL TAB 5MG	NC	
ADDERALL TAB 7.5MG	NC	
ADDERALL TAB 10MG	NC	
ADDERALL TAB 12.5MG	NC	
ADDERALL TAB 15MG	NC	
ADDERALL TAB 20MG	NC	
ADDERALL TAB 30MG	NC	
ADDERALL XR CAP 5MG	NC	
ADDERALL XR CAP 10MG	NC	
ADDERALL XR CAP 15MG	NC	
ADDERALL XR CAP 20MG	NC	
ADDERALL XR CAP 25MG	NC	
ADDERALL XR CAP 30MG	NC	
ADZENYS ER SUS 1.25MG	NC	
ADZENYS XR TAB 3.1MG	NC	
ADZENYS XR TAB 6.3MG	NC	
ADZENYS XR TAB 9.4MG	NC	
ADZENYS XR TAB 12.5MG	NC	
ADZENYS XR TAB 15.7 MG	NC	
ADZENYS XR TAB 18.8MG	NC	
<i>amphetamine sulfate tab 5 mg</i>	1	PA, QL
<i>amphetamine sulfate tab 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	PA, QL
DESOXYN TAB 5MG	3	PA, QL
DEXEDRINE CAP 10MG CR	3	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 2.5 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate tab 7.5 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate tab 15 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 20 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 30 mg</i>	2	PA, QL
DYANAVEL XR SUS 2.5MG/ML	NC	
DYANAVEL XR TAB 5MG	NC	
DYANAVEL XR TAB 10MG	NC	
DYANAVEL XR TAB 15MG	NC	
DYANAVEL XR TAB 20MG	NC	
EVEKEO ODT TAB 5MG	NC	
EVEKEO ODT TAB 10MG	NC	
EVEKEO ODT TAB 15MG	NC	
EVEKEO ODT TAB 20MG	NC	
EVEKEO TAB 5MG	NC	
EVEKEO TAB 10MG	NC	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 50 mg</i>	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>lisdexamfetamine dimesylate cap 50 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 60 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 60 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 70 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 70 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	2	PA, QL
<i>methamphetamine hcl tab 5 mg</i>	2	PA, QL
MYDAYIS CAP 12.5MG	NC	
MYDAYIS CAP 25MG	NC	
MYDAYIS CAP 37.5MG	NC	
MYDAYIS CAP 50MG	NC	
<i>procentra sol 5mg/5ml</i>	2	PA, QL
VYVANSE CAP 10MG	3	PA, QL
VYVANSE CAP 20MG	3	PA, QL
VYVANSE CAP 30MG	3	PA, QL
VYVANSE CAP 40MG	3	PA, QL
VYVANSE CAP 50MG	3	PA, QL
VYVANSE CAP 60MG	3	PA, QL
VYVANSE CAP 70MG	3	PA, QL
VYVANSE CHW 10MG	3	PA, QL
VYVANSE CHW 20MG	3	PA, QL
VYVANSE CHW 30MG	3	PA, QL
VYVANSE CHW 40MG	3	PA, QL
VYVANSE CHW 50MG	3	PA, QL
VYVANSE CHW 60MG	3	PA, QL
XELSTRYM PAD 9MG/9HR	NC	
XELSTRYM PAD 13.5/9HR	NC	
XELSTRYM PAD 18MG/9HR	NC	
<i>zenzedi tab 2.5mg</i>	2	PA, QL
<i>zenzedi tab 5mg</i>	1	PA, QL
<i>zenzedi tab 7.5mg</i>	2	PA, QL
<i>zenzedi tab 10mg</i>	1	PA, QL
<i>zenzedi tab 15mg</i>	2	PA, QL
<i>zenzedi tab 20mg</i>	2	PA, QL
<i>zenzedi tab 30mg</i>	2	PA, QL
ANALEPTICS		
CAFCIT INJ 60MG/3ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	1	
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	
DOPRAM INJ 20MG/ML	3	
ANOREXIANTS NON-AMPHETAMINE		
ADIPEX-P CAP 37.5MG	3	PA; PV
ADIPEX-P TAB 37.5MG	3	PA; PV
<i>benzphetamine hcl tab 25 mg</i>	1	PA; PV
<i>benzphetamine hcl tab 50 mg</i>	1	PA; PV
<i>diethylpropion hcl tab 25 mg</i>	1	PA; PV
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	PA; PV
LOMAIRA TAB 8MG	NC	
<i>phendimetrazine tartrate tab 35 mg</i>	1	PA; PV
<i>phentermine hcl cap 15 mg</i>	1	PA; PV
<i>phentermine hcl cap 30 mg</i>	1	PA; PV
<i>phentermine hcl cap 37.5 mg</i>	1	PA; PV
<i>phentermine hcl tab 37.5 mg</i>	1	PA; PV
PLENITY CAP	NC	
QSYMIA CAP 3.75-23	2	PA; PV
QSYMIA CAP 7.5-46MG	2	PA; PV
QSYMIA CAP 11.25-69	2	PA; PV
QSYMIA CAP 15-92MG	2	PA; PV
ANTI-OBESITY AGENTS		
CONTRACE TAB 8-90MG	NC	
IMCIVREE INJ 10MG/ML	NC	
<i>orlistat cap 120 mg</i>	2	PA; PV
XENICAL CAP 120MG	NC	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	PA, QL
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
INTUNIV TAB 1MG	NC	

Drug Name	Drug Tier	Requirements/Limits
INTUNIV TAB 2MG	NC	
INTUNIV TAB 3MG	NC	
INTUNIV TAB 4MG	NC	
ONYDA XR SUS 0.1MG/ML	3	PA
QELBREE CAP 100MG ER	2	PA, QL
QELBREE CAP 150MG ER	2	PA, QL
QELBREE CAP 200MG ER	2	PA, QL
STRATTERA CAP 10MG	3	PA, QL
STRATTERA CAP 18MG	3	PA, QL
STRATTERA CAP 25MG	3	PA, QL
STRATTERA CAP 40MG	3	PA, QL
STRATTERA CAP 60MG	3	PA, QL
STRATTERA CAP 80MG	3	PA, QL
STRATTERA CAP 100MG	3	PA, QL
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI TAB 75MG	2	PA, QL
SUNOSI TAB 150MG	2	PA, QL
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX TAB 4.45MG	5	SP, PA, QL
WAKIX TAB 17.8MG	5	SP, PA, QL
STIMULANTS - MISC.		
ADHANSIA XR CAP 25MG	NC	
ADHANSIA XR CAP 35MG	NC	
ADHANSIA XR CAP 45MG	NC	
ADHANSIA XR CAP 55MG	NC	
ADHANSIA XR CAP 70MG	NC	
ADHANSIA XR CAP 85MG	NC	
APTENSIO XR CAP 10MG	NC	
APTENSIO XR CAP 15MG	NC	
APTENSIO XR CAP 20MG	NC	
APTENSIO XR CAP 30MG	NC	
APTENSIO XR CAP 40MG	NC	
APTENSIO XR CAP 50MG	NC	
APTENSIO XR CAP 60MG	NC	
armodafinil tab 50 mg	1	PA, QL
armodafinil tab 150 mg	1	PA, QL
armodafinil tab 200 mg	1	PA, QL
armodafinil tab 250 mg	1	PA, QL
AZSTARYS CAP 26.1-5.2	2	PA, QL
AZSTARYS CAP 39.2-7.8	2	PA, QL
AZSTARYS CAP 52.3-10.	2	PA, QL
CONCERTA TAB 18MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CONCERTA TAB 27MG	NC	
CONCERTA TAB 36MG	NC	
CONCERTA TAB 54MG	NC	
COTEMPLA XR TAB 8.6MG	NC	
COTEMPLA XR TAB 17.3MG	NC	
COTEMPLA XR TAB 25.9MG	NC	
DAYTRANA DIS 10MG/9HR	NC	
DAYTRANA DIS 15MG/9HR	NC	
DAYTRANA DIS 20MG/9HR	NC	
DAYTRANA DIS 30MG/9HR	NC	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 10 mg</i>	1	PA, QL
FOCALIN TAB 2.5MG	3	PA, QL
FOCALIN TAB 5MG	3	PA, QL
FOCALIN TAB 10MG	3	PA, QL
FOCALIN XR CAP 5MG	NC	
FOCALIN XR CAP 10MG	NC	
FOCALIN XR CAP 15MG	NC	
FOCALIN XR CAP 20MG	NC	
FOCALIN XR CAP 25MG	NC	
FOCALIN XR CAP 30MG	NC	
FOCALIN XR CAP 35MG	NC	
FOCALIN XR CAP 40MG	NC	
JORNAY PM CAP 20MG ER	NC	
JORNAY PM CAP 40MG ER	NC	
JORNAY PM CAP 60MG ER	NC	
JORNAY PM CAP 80MG ER	NC	
JORNAY PM CAP 100MG ER	NC	
METADATE CD CAP 10MG	NC	
METADATE CD CAP 20MG	NC	
METADATE CD CAP 30MG	NC	
METADATE CD CAP 40MG	NC	
METADATE CD CAP 50MG	NC	
METADATE CD CAP 60MG	NC	

Drug Name	Drug Tier	Requirements/Limits
METHYLIN SOL 5MG/5ML	3	PA, QL
METHYLIN SOL 10MG/5ML	3	PA, QL
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 10 mg</i>	1	PA, QL
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	PA, QL
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	PA, QL
<i>methylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 10 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 10 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i>	2	PA, QL
<i>methylphenidate td patch 10 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 15 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 20 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 30 mg/9hr</i>	2	PA, QL
<i>modafinil tab 100 mg</i>	1	PA, QL
<i>modafinil tab 200 mg</i>	1	PA, QL
NUVIGIL TAB 50MG	NC	
NUVIGIL TAB 150MG	NC	
NUVIGIL TAB 200MG	NC	
NUVIGIL TAB 250MG	NC	
PROVIGIL TAB 100MG	NC	
PROVIGIL TAB 200MG	NC	
QUILLICHEW CHW 20MG ER	NC	
QUILLICHEW CHW 30MG ER	NC	
QUILLICHEW CHW 40MG ER	NC	
QUILLIVANT SUS 25MG/5ML	NC	
RELEXXII TAB 72MG ER	NC	
RITALIN LA CAP 10MG	3	PA, QL
RITALIN LA CAP 20MG	3	PA, QL
RITALIN LA CAP 30MG	3	PA, QL
RITALIN LA CAP 40MG	3	PA, QL
RITALIN TAB 5MG	3	PA, QL
RITALIN TAB 10MG	3	PA, QL
RITALIN TAB 20MG	3	PA, QL

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

ALLERGENIC EXTRACTS

GRASTEK SUB 2800BAU	2	PA; PV
ODACTRA SUB	3	PA; PV
ORALAIR SUB 300 IR	2	PA; PV
PALFORZIA CAP ESCALAT	NC	
PALFORZIA CAP LEVEL 1	NC	
PALFORZIA CAP LEVEL 2	NC	
PALFORZIA CAP LEVEL 3	NC	
PALFORZIA CAP LEVEL 4	NC	
PALFORZIA CAP LEVEL 5	NC	
PALFORZIA CAP LEVEL 6	NC	
PALFORZIA CAP LEVEL 7	NC	
PALFORZIA CAP LEVEL 8	NC	
PALFORZIA CAP LEVEL 9	NC	
PALFORZIA CAP LEVEL 10	NC	
PALFORZIA POW LEVEL 11	NC	

Drug Name	Drug Tier	Requirements/Limits
RAGWITEK SUB	2	PA; PV
ALTERNATIVE MEDICINES		
ALTERNATIVE MEDICINE - A'S		
ALPHA-LIPOIC SOL ACID	3	
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
amikacin sulfate inj 1 gm/4ml (250 mg/ml)	1	
amikacin sulfate inj 500 mg/2ml (250 mg/ml)	1	
ARIKAYCE SUS	6	SP, PA
BETHKIS NEB 300/4ML	NC	SP
gentamicin in saline inj 0.8 mg/ml	1	
gentamicin in saline inj 1 mg/ml	1	
gentamicin in saline inj 1.2 mg/ml	1	
gentamicin in saline inj 1.6 mg/ml	1	
gentamicin in saline inj 2 mg/ml	1	
gentamicin sulfate inj 10 mg/ml	1	
gentamicin sulfate inj 40 mg/ml	1	
HUMATIN CAP 250MG	NC	
KITABIS PAK NEB 300/5ML	NC	SP
neomycin sulfate tab 500 mg	1	
paromomycin sulfate cap 250 mg	1	
streptomycin sulfate for inj 1 gm	1	
TOBI NEB 300/5ML	NC	SP
TOBI PODHALR CAP 28MG	NC	SP
tobramycin nebu soln 300 mg/4ml	4	SP, PA, QL
tobramycin nebu soln 300 mg/5ml	4	SP, PA, QL
tobramycin sulfate for inj 1.2 gm	2	
tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)	2	
tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)	1	
tobramycin sulfate inj 10 mg/ml (base equivalent)	1	
tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)	1	
ZEMDRI INJ 500MG/10	3	
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ABRILADA 1PN INJ 40/0.8ML	NC	SP
ABRILADA INJ 20/0.4ML	NC	SP
ABRILADA INJ 40/0.8ML	NC	SP
ADALIMU-AATY KIT 20/0.2ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
ADALIMU-AATY KIT 40/0.4ML	NC	SP
ADALIMU-ADAZ INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
ADALIMU-FKJP KIT 20/0.4ML	NC	SP
AMJEVITA INJ 10/0.2ML	NC	SP
AMJEVITA INJ 20/0.2ML	NC	SP
AMJEVITA INJ 20/0.4ML	NC	SP
AMJEVITA INJ 40/0.4ML	NC	SP
AMJEVITA INJ 40/0.8ML	NC	SP
AMJEVITA INJ 80/0.8ML	NC	SP
CYLTEZO INJ 10/0.2ML	NC	SP
CYLTEZO INJ 20/0.4ML	NC	SP
CYLTEZO INJ 40/0.8ML	NC	SP
HADLIMA INJ 40/0.4ML	NC	SP
HADLIMA INJ 40/0.8ML	NC	SP
HADLIMA PUSH INJ 40/0.4ML	NC	SP
HADLIMA PUSH INJ 40/0.8ML	NC	SP
HULIO INJ 40/0.8ML	NC	SP
HULIO KIT 20/0.4ML	NC	SP
HUMIRA INJ 10/0.1ML	NC	SP
HUMIRA INJ 20/0.2ML	NC	SP
HUMIRA INJ 40/0.4ML	NC	SP
HUMIRA KIT 40MG/0.8	NC	SP
HUMIRA PEDIA INJ CROHNS	NC	SP
HUMIRA PEN INJ 40/0.4ML	NC	SP
HUMIRA PEN INJ 40MG/0.8	NC	SP
HUMIRA PEN INJ 80/0.8ML	NC	SP
HUMIRA PEN KIT PS/UV	NC	SP
HYRIMOZ INJ 10/0.1ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ INJ 20/0.2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 40/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ SENS INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ-CROH INJ UC SP	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-PED INJ CROHNS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-PLAQ INJ PSOR/UVE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-PLAQ INJ PSORIASI	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
IDACIO 2-PEN INJ 40/0.8ML	NC	SP
IDACIO 2-SYR INJ 40/0.8ML	NC	SP
SIMLANDI 1PN KIT 40/0.4ML	NC	SP
SIMLANDI 1PN KIT 80/0.8ML	NC	SP
SIMLANDI 2PN INJ 40/0.4ML	NC	SP
SIMLANDI KIT 20/0.2ML	NC	SP
SIMLANDI KIT 80/0.8ML	NC	SP
SIMPONI ARIA SOL 50MG/4ML	5	SP, PA, QL
SIMPONI INJ 50/0.5ML	NC	SP
SIMPONI INJ 100MG/ML	NC	SP
YUFLYMA 1PEN KIT 80/0.8ML	NC	SP
YUSIMRY INJ 40/0.8ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT TAB 2MG	NC	SP
RINVOQ LQ SOL 1MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 15MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 30MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 45MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
XELJANZ SOL 1MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ TAB 5MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
XELJANZ TAB 10MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 11MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 22MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP INJ 10MG	NC	SP
OTREXUP INJ 12.5/0.4	NC	SP
OTREXUP INJ 15MG	NC	SP
OTREXUP INJ 17.5/0.4	NC	SP
OTREXUP INJ 20MG	NC	SP
OTREXUP INJ 22.5/0.4	NC	SP
OTREXUP INJ 25MG	NC	SP
RASUVO INJ 7.5MG	5	SP, PA, QL
RASUVO INJ 10MG	5	SP, PA, QL
RASUVO INJ 12.5MG	5	SP, PA, QL
RASUVO INJ 15MG	5	SP, PA, QL
RASUVO INJ 17.5MG	5	SP, PA, QL
RASUVO INJ 22.5MG	5	SP, PA, QL
RASUVO INJ 25MG	5	SP, PA, QL
RASUVO INJ 30MG	5	SP, PA, QL
REDITREX INJ 7.5/.3ML	NC	SP
REDITREX INJ 10/.4ML	NC	SP
REDITREX INJ 12.5/0.5	NC	SP
REDITREX INJ 15/.6ML	NC	SP
REDITREX INJ 17.5/0.7	NC	SP
REDITREX INJ 20/.8ML	NC	SP
REDITREX INJ 22.5/0.9	NC	SP
REDITREX INJ 25MG/ML	NC	SP
GOLD COMPOUNDS		
RIDAURA CAP 3MG	3	
INTERLEUKIN-1 BLOCKERS		
ARCALYST INJ 220MG	NC	SP
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET INJ	NC	SP
INTERLEUKIN-1BETA BLOCKERS		
ILARIS INJ 150MG/ML	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA INJ 80MG/4ML	NC	SP
ACTEMRA INJ 162/0.9	NC	SP
ACTEMRA INJ 200/10ML	NC	SP
ACTEMRA INJ 400/20ML	NC	SP
KEVZARA INJ 150/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
TYENNE INJ 80MG/4ML	NC	SP
TYENNE INJ 200/10ML	NC	SP
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
ANAPROX DS TAB 550MG	3	
ARTHROTEC 50 TAB	NC	
ARTHROTEC 75 TAB	NC	
CALDOLOR INJ 4MG/ML	3	
CALDOLOR INJ 800/8ML	3	
<i>cataflam tab 50mg</i>	1	
CELEBREX CAP 50MG	NC	
CELEBREX CAP 100MG	NC	
CELEBREX CAP 200MG	NC	
CELEBREX CAP 400MG	NC	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
COMBOGESIC INJ 300-1000	NC	
DAYPRO TAB 600MG	3	
<i>diclofenac potassium tab 25 mg</i>	NC	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	
DUEXIS TAB 800-26.6	NC	
EC-NAPROSYN TAB 375MG	3	
EC-NAPROSYN TAB 500MG	3	
<i>ec-naproxen tab 375mg</i>	1	
<i>ec-naproxen tab 500mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
<i>fenoprofen calcium cap 400 mg</i>	NC	
<i>fenoprofen calcium tab 600 mg</i>	NC	
FENOPROFEN CAP 200MG	NC	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibu tab 400mg</i>	1	
<i>ibu tab 600mg</i>	1	
<i>ibu tab 800mg</i>	1	
<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>ibuprofen-famotidine tab 800-26.6 mg</i>	NC	
INDOCIN SUP 50MG	NC	
INDOCIN SUS 25MG/5ML	NC	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>indomethacin sodium iv for soln 1 mg</i>	1	
INDOMETHACIN SUP 100MG	3	
<i>indomethacin suppos 50 mg</i>	1	
<i>indomethacin susp 25 mg/5ml</i>	1	
<i>ketoprofen cap 25 mg</i>	NC	
<i>ketoprofen cap 50 mg</i>	3	
<i>ketoprofen cap er 24hr 200 mg</i>	NC	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
<i>ketorolac tromethamine inj 15 mg/ml</i>	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam cap 5 mg</i>	NC	
<i>meloxicam cap 10 mg</i>	NC	
<i>meloxicam susp 7.5 mg/5ml</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON CAP 400MG	3	
NALFON TAB 600MG	3	
NAPRELAN TAB 375MG CR	NC	
NAPRELAN TAB 500MG CR	NC	
NAPRELAN TAB 750MG CR	NC	
NAPROSYN SUS 125/5ML	3	
NAPROSYN TAB 500MG	3	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	NC	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	NC	
<i>naproxen susp 125 mg/5ml</i>	NC	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	NC	
<i>naproxen-esomeprazole magnesium tab dr 500-20 mg</i>	NC	
NEOPROFEN SOL 10MG/ML	3	
NUDROXIPAK KIT DSDR-50	NC	
NUDROXIPAK KIT DSDR-75	NC	
NUDROXIPAK KIT E-400	NC	
NUDROXIPAK KIT I-800	NC	
NUDROXIPAK KIT M-15	NC	
NUDROXIPAK KIT N-500	NC	
<i>oxaprozin cap 300 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
PREVIDOLRX PAK ANALGESI	NC	

Drug Name	Drug Tier	Requirements/Limits
RELAFEN DS TAB 1000MG	NC	
<i>relafen tab 500mg</i>	NC	
<i>relafen tab 750mg</i>	NC	
SPRIX SPR 15.75MG	NC	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
TRESNI SUP 100MG	3	
VIMOVO TAB 375-20MG	NC	
VIMOVO TAB 500-20MG	NC	
VIVLODEX CAP 5MG	NC	
VIVLODEX CAP 10MG	NC	
ZIPSOR CAP 25MG	NC	
ZORVOLEX CAP 18MG	NC	
ZORVOLEX CAP 35MG	NC	
ZYNRELEF INJ 200-6MG	3	
ZYNRELEF INJ 400-12MG	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 10/20/30	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 20MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 30MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
PYRIMIDINE SYNTHESIS INHIBITORS		
ARAVA TAB 10MG	3	
ARAVA TAB 20MG	3	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA CLCK INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 50/0.4ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 87.5/0.7	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 250MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25/0.5ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 25MG	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL MINI INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL SRCLK INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions

ANALGESICS - NONNARCOTIC

ANALGESIC COMBINATIONS

ALLZITAL TAB 25-325MG	NC	
<i>bac tab</i>	1	QL
BUT/ASA/CAF TAB	NC	
BUTAL/APAP CAP 50-300MG	NC	
<i>butalbital-acetaminophen cap 50-300 mg</i>	NC	
<i>butalbital-acetaminophen tab 25-325 mg</i>	NC	
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	NC	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL
<i>esgic cap</i>	NC	
ESGIC TAB	3	QL
FIORICET CAP	NC	
<i>tencon tab 50-325mg</i>	1	QL
<i>vanatol lq sol</i>	NC	
<i>vtol lq sol</i>	NC	
<i>zebutal cap</i>	NC	
ANALGESICS - SODIUM CHANNEL PAIN SIGNAL INHIBITORS		
JOURNAVX TAB 50MG	NC	
ANALGESICS OTHER		
<i>acetaminophen iv soln 10 mg/ml</i>	2	
<i>clonidine hcl inj (for epidural infusion) 100 mcg/ml</i>	1	
<i>clonidine hcl inj (for epidural infusion) 500 mcg/ml</i>	1	
DURACLON INJ	3	
LOTREXONE CAP 1.5MG	NC	
LOTREXONE CAP 4.5MG	NC	
ANALGESICS-PEPTIDE CHANNEL BLOCKERS		
PRIALT INJ 25MCG/ML	6	SP
PRIALT INJ 100MCG	6	SP
PRIALT INJ 500MCG	6	SP
SALICYLATES		
<i>aspirin adlt tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin chew tab 81 mg</i>	0	OTC; ACA, PV
<i>aspirin chld chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin ec tab 81mg</i>	0	OTC; ACA, PV
<i>aspirin low chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin tab delayed release 81 mg</i>	0	OTC; ACA, PV
<i>aspirin tab delayed release 81 mg</i>	0	OTC; ACA, PV
<i>aspirin-81 chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low tab 81mg ec</i>	0	OTC; ACA, PV
<i>child asa chw 81mg</i>	0	OTC; ACA, PV
<i>cvs aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>diflunisal tab 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
DOLOBID TAB 250MG	3	
<i>ecotrin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>eq aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>eql aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>ft aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>ft aspirin tab 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>goodsense tab 81mg ec</i>	0	OTC; ACA, PV
<i>hm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>kls aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>kp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>mm aspirin tab low dose</i>	0	OTC; ACA, PV
<i>qc aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>qc child asa chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>salsalate tab 750 mg</i>	1	
<i>sb child asa chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>st joseph chw low 81mg</i>	0	OTC; ACA, PV
<i>st joseph tab low 81mg</i>	0	OTC; ACA, PV

ANALGESICS - OPIOID

OPIOID AGONISTS

ACTIQ LOZ 200MCG	3	PA, QL
ACTIQ LOZ 400MCG	3	PA, QL
ACTIQ LOZ 600MCG	3	PA, QL
ACTIQ LOZ 800MCG	3	PA, QL
ACTIQ LOZ 1200MCG	3	PA, QL
ACTIQ LOZ 1600MCG	3	PA, QL
ALFENTANIL INJ 1000/2ML	3	
ALFENTANIL INJ 2500/5ML	3	
ARYMO ER TAB 15MG	NC	
ARYMO ER TAB 30MG	NC	
ARYMO ER TAB 60MG	NC	
CODEINE SULF TAB 15MG	3	PA, QL
CODEINE SULF TAB 60MG	3	PA, QL
<i>codeine sulfate tab 30 mg</i>	1	PA, QL
CONZIP CAP 100MG	3	ST, PA, QL
CONZIP CAP 200MG	3	ST, PA, QL
CONZIP CAP 300MG	3	ST, PA, QL
DEMEROL INJ 25MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
DEMEROL INJ 50MG/ML	3	
DEMEROL INJ 75MG/ML	3	
DEMEROL INJ 100MG/ML	3	
DILAUDID INJ 0.2MG/ML	3	
DILAUDID INJ 1MG/ML	NC	
DILAUDID INJ 2MG/ML	NC	
DILAUDID LIQ 1MG/ML	3	PA, QL
DILAUDID TAB 2MG	3	PA, QL
DILAUDID TAB 4MG	3	PA, QL
DILAUDID TAB 8MG	3	PA, QL
DSUVIA SUB 30MCG	NC	
DURAMORPH INJ 0.5MG/ML	3	
DURAMORPH INJ 1MG/ML	3	
FENTANYL CIT INJ 50MCG/ML	3	
FENTANYL CIT INJ 100MCG	3	
FENTANYL CIT INJ 250MCG	3	
FENTANYL CIT SOL 10MCG/ML	NC	
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	2	PA, QL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	PA, QL
<i>fentanyl citrate pf soln prefilled syringe 50 mcg/ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 50 mcg/ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 500 mcg/10ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	1	
FENTANYL INJ 50MCG/ML	NC	
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	ST, PA, QL
FENTANYL/NACL INJ 1000/50	3	
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	1	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	1	ST, PA, QL
HYDROMO/NACL INJ 2MG/ML	NC	
HYDROMO/NACL INJ 20/100ML	3	
HYDROMORPHON INJ 0.2MG/ML	3	
HYDROMORPHON INJ 1MG/ML	3	
HYDROMORPHON INJ 2MG/ML	3	
HYDROMORPHON INJ 4MG/ML	3	
HYDROMORPHON INJ 10MG/ML	3	
HYDROMORPHON INJ 30/30ML	3	
HYDROMORPHON SOL 0.2MG/ML	3	
<i>hydromorphone hcl inj 0.2 mg/ml</i>	1	
<i>hydromorphone hcl inj 1 mg/ml</i>	1	
<i>hydromorphone hcl inj 2 mg/ml</i>	1	
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	PA, QL
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	1	
<i>hydromorphone hcl tab 2 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab 4 mg</i>	1	PA, QL
<i>hydromorphone hcl tab 8 mg</i>	1	PA, QL
<i>hydromorphone hcl tab er 24hr 8 mg</i>	1	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 12 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 16 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 32 mg</i>	2	ST, PA, QL
HYSINGLA ER TAB 20 MG	NC	
HYSINGLA ER TAB 30 MG	NC	
HYSINGLA ER TAB 40 MG	NC	
HYSINGLA ER TAB 60 MG	NC	
HYSINGLA ER TAB 80 MG	NC	
HYSINGLA ER TAB 100 MG	NC	
HYSINGLA ER TAB 120 MG	NC	
INFUMORPH INJ 10MG/ML	3	
INFUMORPH INJ 25MG/ML	3	
IONSYS PAD 40MCG/AC	NC	
LAZANDA SPR 100MCG	NC	
LAZANDA SPR 300MCG	NC	
LAZANDA SPR 400MCG	NC	
<i>levorphanol tartrate tab 2 mg</i>	NC	
<i>meperidine hcl inj 25 mg/ml</i>	1	
<i>meperidine hcl inj 50 mg/ml</i>	1	
<i>meperidine hcl inj 100 mg/ml</i>	1	
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	PA, QL
<i>meperidine hcl tab 50 mg</i>	2	PA, QL
METHADO/NACL INJ 1MG/ML	3	
METHADO/NACL INJ 5MG/5ML	3	
METHADO/NACL INJ 10MG/ML	3	
<i>methadone con 10mg/ml</i>	1	ST, PA, QL
<i>methadone hcl conc 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl inj 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl soln 5 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl soln 10 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl tab 5 mg</i>	1	ST, PA, QL
<i>methadone hcl tab 10 mg</i>	1	ST, PA, QL
<i>methadone hcl tab for oral susp 40 mg</i>	1	
METHADONE INJ 10MG/ML	3	ST, PA, QL
METHADOSE CON 10MG/ML	3	SP, PA, QL
METHADOSE SF CON 10MG/ML	3	SP, PA, QL
<i>methadose tab 40mg</i>	1	SP, PA, QL
<i>mitigo inj 10mg/ml</i>	1	
<i>mitigo inj 25mg/ml</i>	1	
MORPHABOND TAB 15MG ER	NC	

Drug Name	Drug Tier	Requirements/Limits
MORPHABOND TAB 30MG ER	NC	
MORPHABOND TAB 60MG ER	NC	
MORPHABOND TAB 100MG ER	NC	
MORPHIN/NACL INJ 1MG/ML	3	
MORPHIN/NACL INJ 2MG-0.9%	NC	
MORPHIN/NACL INJ 4MG-0.9%	NC	
MORPHIN/NACL INJ 100/100	3	
MORPHINE SUL INJ 1MG/ML	3	
MORPHINE SUL INJ 2MG2/ML	3	
MORPHINE SUL INJ 2MG/ML	3	
MORPHINE SUL INJ 2MG/ML	NC	
MORPHINE SUL INJ 4MG/ML	3	
MORPHINE SUL INJ 8MG/ML	3	
MORPHINE SUL INJ 10MG/ML	3	
MORPHINE SUL INJ 250/50ML	3	
MORPHINE SUL INJ NACL	3	
MORPHINE SUL SOL 50MG/ML	3	
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 45 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 60 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 90 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 120 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 10 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 20 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 30 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 50 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 60 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 80 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 100 mg</i>	2	ST, PA, QL
<i>morphine sulfate inj pf 0.5 mg/ml</i>	1	
<i>morphine sulfate inj pf 1 mg/ml</i>	1	
<i>morphine sulfate iv soln 4 mg/ml</i>	1	
<i>morphine sulfate iv soln 8 mg/ml</i>	1	
<i>morphine sulfate iv soln 10 mg/ml</i>	1	
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	PA, QL
<i>morphine sulfate tab 15 mg</i>	1	PA, QL
<i>morphine sulfate tab 30 mg</i>	1	PA, QL
<i>morphine sulfate tab er 15 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 30 mg</i>	1	ST, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab er 60 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 100 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 200 mg</i>	2	ST, PA, QL
MS CONTIN TAB 15MG ER	3	ST, PA, QL
MS CONTIN TAB 30MG ER	3	ST, PA, QL
MS CONTIN TAB 60MG ER	3	ST, PA, QL
MS CONTIN TAB 100MG ER	3	ST, PA, QL
MS CONTIN TAB 200MG ER	3	ST, PA, QL
NUCYNTA ER TAB 50MG	NC	
NUCYNTA ER TAB 100MG	NC	
NUCYNTA ER TAB 150MG	NC	
NUCYNTA ER TAB 200MG	NC	
NUCYNTA ER TAB 250MG	NC	
NUCYNTA TAB 50MG	NC	
NUCYNTA TAB 75MG	NC	
NUCYNTA TAB 100MG	NC	
OXAYDO TAB 7.5MG	NC	
<i>oxycodone hcl cap 5 mg</i>	1	PA, QL
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	PA, QL
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA, QL
<i>oxycodone hcl tab 5 mg</i>	1	PA, QL
<i>oxycodone hcl tab 10 mg</i>	1	PA, QL
<i>oxycodone hcl tab 15 mg</i>	1	PA, QL
<i>oxycodone hcl tab 20 mg</i>	1	PA, QL
<i>oxycodone hcl tab 30 mg</i>	1	PA, QL
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	2	ST, PA, QL
OXYCONTIN TAB 10MG ER	NC	
OXYCONTIN TAB 15MG ER	NC	
OXYCONTIN TAB 20MG ER	NC	
OXYCONTIN TAB 30MG ER	NC	
OXYCONTIN TAB 40MG ER	NC	
OXYCONTIN TAB 60MG ER	NC	
OXYCONTIN TAB 80MG ER	NC	
<i>oxymorphone hcl tab 5 mg</i>	1	PA, QL
<i>oxymorphone hcl tab 10 mg</i>	1	PA, QL
<i>oxymorphone hcl tab er 12hr 5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 10 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 15 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 20 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 30 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 40 mg</i>	NC	
<i>remifentanil hcl for iv soln 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>remifentanil hcl for iv soln 2 mg</i>	1	
<i>remifentanil hcl for iv soln 5 mg</i>	1	
ROXICODONE TAB 15MG	3	PA, QL
ROXICODONE TAB 30MG	3	PA, QL
ROXYBOND TAB 5MG	NC	
ROXYBOND TAB 15MG	NC	
ROXYBOND TAB 30MG	NC	
SUBSYS SPR 100MCG	NC	
SUBSYS SPR 200MCG	NC	
SUBSYS SPR 400MCG	NC	
SUBSYS SPR 600MCG	NC	
SUBSYS SPR 800MCG	NC	
SUBSYS SPR 1200MCG	NC	
SUBSYS SPR 1600MCG	NC	
<i>sufentanil citrate inj 50 mcg/ml</i>	1	
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i>	1	
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i>	1	
SUFENTANIL INJ 50MCG/ML	3	
SUFENTANIL INJ 100/2ML	3	
SUFENTANIL INJ 250/5ML	3	
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 150 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	NC	
<i>tramadol hcl oral soln 5 mg/ml</i>	2	
<i>tramadol hcl tab 25 mg</i>	2	PA, QL
<i>tramadol hcl tab 50 mg</i>	1	PA, QL
<i>tramadol hcl tab 100 mg</i>	NC	
<i>tramadol hcl tab er 24hr 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 300 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	2	ST, PA, QL
ULTIVA INJ 1MG	3	
ULTIVA INJ 2MG	3	

Drug Name	Drug Tier	Requirements/Limits
ULTIVA INJ 5MG	3	
XTAMPZA ER CAP 9MG	NC	
XTAMPZA ER CAP 13.5MG	NC	
XTAMPZA ER CAP 18MG	NC	
XTAMPZA ER CAP 27MG	NC	
XTAMPZA ER CAP 36MG	NC	
ZOHYDRO ER CAP 10MG	NC	
ZOHYDRO ER CAP 15MG	NC	
ZOHYDRO ER CAP 20MG	NC	
ZOHYDRO ER CAP 30MG	NC	
ZOHYDRO ER CAP 40MG	NC	
ZOHYDRO ER CAP 50MG	NC	

OPIOID COMBINATIONS

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	QL
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	QL
<i>acetaminophen-cafeine-dihydrocodeine cap 320.5-30-16 mg</i>	2	QL
<i>ascomp/cod cap 30mg</i>	1	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	2	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	QL
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	QL
<i>endocet tab 2.5-325</i>	1	PA, QL
<i>endocet tab 5-325mg</i>	1	PA, QL
<i>endocet tab 7.5-325</i>	1	PA, QL
<i>endocet tab 10-325mg</i>	1	PA, QL
FENT/ROPIVAC INJ 0.4/200	NC	
FENT/ROPIVAC INJ NACL	NC	
FENTANYL CIT INJ BUPIVACA	NC	
FIORICET CAP CODEINE	3	QL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2	PA, QL
LORTAB ELX 10-300MG	3	PA, QL
NALOCET TAB 2.5-300	NC	
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA, QL
PERCOCET TAB 2.5-325	NC	
PERCOCET TAB 5-325MG	NC	
PERCOCET TAB 7.5-325	NC	
PERCOCET TAB 10-325MG	NC	
PRIMLEV TAB 5-300MG	NC	
PRIMLEV TAB 7.5-300	NC	
PRIMLEV TAB 10-300MG	NC	
SEGLENTIS TAB 56-44MG	NC	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL
<i>trezix cap</i>	2	QL
ULTRACET TAB 37.5-325	3	QL

OPIOID PARTIAL AGONISTS

BELBUCA MIS 75MCG	2	ST, PA, QL
BELBUCA MIS 150MCG	2	ST, PA, QL
BELBUCA MIS 300MCG	2	ST, PA, QL
BELBUCA MIS 450MCG	2	ST, PA, QL
BELBUCA MIS 600MCG	2	ST, PA, QL
BELBUCA MIS 750MCG	2	ST, PA, QL
BELBUCA MIS 900MCG	2	ST, PA, QL
BRIXADI SOL 8/0.16ML	3	PV
BRIXADI SOL 16/0.32	3	PV
BRIXADI SOL 24/0.48	3	PV
BRIXADI SOL 32/0.64	3	PV
BRIXADI SOL 64/0.18	3	PV
BRIXADI SOL 96/0.27	3	PV
BRIXADI SOL 128/0.36	3	PV
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	1	
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	PA; PV
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	PA; PV
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	PV
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	ST, PA, QL
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	ST, PA, QL
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	ST, PA, QL
<i>buprenorphine td patch weekly 15 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 20 mcg/hr</i>	2	ST, PA, QL
<i>butorphanol tartrate inj 1 mg/ml</i>	1	
<i>butorphanol tartrate inj 2 mg/ml</i>	1	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	PA, QL
BUTRANS DIS 5MCG/HR	NC	
BUTRANS DIS 7.5/HR	NC	
BUTRANS DIS 10MCG/HR	NC	
BUTRANS DIS 15MCG/HR	NC	
BUTRANS DIS 20MCG/HR	NC	
<i>nalbuphine hcl inj 10 mg/ml</i>	2	
<i>nalbuphine hcl inj 20 mg/ml</i>	2	
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	1	PA, QL
PROBUPHINE IMP KIT 74.2	NC	
SUBLOCADE INJ 100/0.5	3	PV
SUBLOCADE INJ 300/1.5	3	PV
SUBOXONE MIS 2-0.5MG	NC	
SUBOXONE MIS 4-1MG	NC	
SUBOXONE MIS 8-2MG	NC	
SUBOXONE MIS 12-3MG	NC	
ZUBSOLV SUB 0.7-0.18	2	PV
ZUBSOLV SUB 1.4-0.36	2	PV
ZUBSOLV SUB 2.9-0.71	2	PV
ZUBSOLV SUB 5.7-1.4	2	PV
ZUBSOLV SUB 8.6-2.1	2	PV
ZUBSOLV SUB 11.4-2.9	2	PV

ANDROGENS-ANABOLIC

ANDROGENS

ANDROGEL GEL 1%(25MG)	NC
ANDROGEL GEL 1%(50MG)	NC

Drug Name	Drug Tier	Requirements/Limits
ANDROGEL GEL 1.62%	NC	
AVEED INJ 750/3ML	6	SP, PA
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	2	
<i>depo-testost inj 100mg/ml</i>	3	PA
<i>depo-testost inj 200mg/ml</i>	3	PA
FORTESTA GEL 10MG/ACT	NC	
JATENZO CAP 158MG	3	
JATENZO CAP 198MG	3	
JATENZO CAP 237MG	3	
KYZATREX CAP 100MG	NC	
KYZATREX CAP 150MG	NC	
KYZATREX CAP 200MG	NC	
<i>methitest tab 10mg</i>	1	PA
<i>methyltestosterone cap 10 mg</i>	1	PA
NATESTO GEL 5.5MG	2	PA
TESTIM GEL 1%(50MG)	NC	
TESTOPEL MIS PELLETS	3	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	PA
TESTOSTERONE MIS 25MG	3	PA
TESTOSTERONE MIS 50MG	3	PA
TESTOSTERONE MIS 100MG	3	PA
TESTOSTERONE MIS 200MG	3	PA
<i>testosterone td gel 10mg/act (2%)</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	2	PA; Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td gel 12.5 mg/act (1%)</i>	NC	Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	2	PA
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	PA
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	2	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	PA; Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td soln 30 mg/act</i>	2	PA
TLANDO CAP 112.5 MG	NC	
VOGELXO GEL 1%(50MG)	NC	

Drug Name	Drug Tier	Requirements/Limits
VOGELXO GEL PUMP 1%	NC	
XYOSTED INJ 50/0.5ML	3	PA
XYOSTED INJ 75/0.5ML	3	PA
XYOSTED INJ 100/0.5	3	PA

ANORECTAL AND RELATED PRODUCTS

INTRARECTAL STEROIDS

<i>budesonide rectal foam 2 mg/act</i>	2	
CORTENEMA ENE 100MG	3	
CORTIFOAM AER 90MG	2	
<i>hydrocortisone enema 100 mg/60ml</i>	2	
UCERIS AER 2MG/ACT	3	

RECTAL COMBINATIONS

ANALPRAM-HC CRE 1-1%	3	
ANALPRAM-HC LOT 2.5%	3	
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	
PROCORT CRE	3	
PROCTOFOAM AER HC 1%	2	

RECTAL STEROIDS

<i>anucort-hc sup 25mg</i>	1	
ANUSOL-HC CRE 2.5%	3	
<i>hydrocortisone perianal cream 1%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>procto-med cre hc 2.5%</i>	1	
<i>procto-pak cre 1%</i>	1	
<i>proctocort cre 1%</i>	1	
PROCTOCORT SUP 30MG	3	
<i>proctosol hc cre 2.5%</i>	1	
<i>proctozone cre -hc 2.5%</i>	1	

VASODILATING AGENTS

<i>nitroglycerin oint 0.4%</i>	2	
RECTIV OIN 0.4%	3	

ANTHELMINTICS

ANTHELMINTICS

<i>albendazole tab 200 mg</i>	2	PA, QL
BENZNIDAZOLE TAB 12.5MG	3	
BENZNIDAZOLE TAB 100MG	3	
BILTRICIDE TAB 600MG	3	PA, QL
EMVERM CHW 100MG	2	PA, QL
<i>ivermectin tab 3 mg</i>	1	
<i>praziquantel tab 600 mg</i>	2	QL
STROMECTOL TAB 3MG	3	

Drug Name	Drug Tier	Requirements/Limits

ANTI-INFECTIVE AGENTS - MISC.

ANTI-INFECTIVE AGENTS - MISC.

AEMCOLO TAB 194MG	3
<i>bacitracin intramuscular for soln 50000 unit</i>	1
FIRST-METRON SUS 100MG/ML	NC
FLAGYL CAP 375MG	3
IMPAVIDO CAP 50MG	3
LIKMEZ SUS 500/5ML	NC
METRONIDAZOL INJ 500MG	3
<i>metronidazole cap 375 mg</i>	2
<i>metronidazole iv soln 500 mg/100ml</i>	1
<i>metronidazole tab 250 mg</i>	1
<i>metronidazole tab 500 mg</i>	1
NEBUPENT INH 300MG	3
PENTAM 300 INJ 300MG	3
<i>pentamidine isethionate for inj soln 300 mg</i>	1
<i>pentamidine isethionate for nebulization soln 300 mg</i>	1
<i>tinidazole tab 250 mg</i>	1
<i>tinidazole tab 500 mg</i>	2
<i>trimethoprim tab 100 mg</i>	1
XIFAXAN TAB 200MG	3
XIFAXAN TAB 550MG	2

ANTI-INFECTIVE MISC. - COMBINATIONS

BACTRIM DS TAB 800-160	3
BACTRIM TAB 400-80MG	3
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1
<i>sulfatrim pd sus 200-40/5</i>	1
<i>uro-sp cap 118mg</i>	1
XACDURO INJ 1-1GM	3

ANTIPROTOZOAL AGENTS

<i>atovaquone susp 750 mg/5ml</i>	2
LAMPIT TAB 30MG	3
LAMPIT TAB 120MG	3
MEPRON SUS	3
<i>nitazoxanide tab 500 mg</i>	2

Drug Name	Drug Tier	Requirements/Limits
CARBAPENEMS		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	2	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
INVANZ INJ 1GM	3	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	2	
PRIMAXIN IV INJ 500MG	3	
RECARBRIO INJ 1.25GM	3	
VABOMERE INJ 2GM(1-1)	3	
CHLORAMPHENICOLS		
<i>chloramphenicol sodium succinate for iv inj 1 gm</i>	1	
CYCLIC LIPOPEPTIDES		
CUBICIN RF INJ 500MG	3	
<i>daptomycin for iv soln 350 mg</i>	2	
<i>daptomycin for iv soln 500 mg</i>	2	
DAPTOMYCIN INJ 350MG	3	
DAPTOMYCIN INJ 500MG	3	
GLYCOPEPTIDES		
DALVANCE SOL 500MG	3	
FIRVANQ SOL 25MG/ML	NC	
FIRVANQ SOL 50MG/ML	NC	
KIMYRSA INJ 1200MG	NC	
ORBACTIV SOL 400MG	3	
VANCOCIN CAP 125MG	3	
VANCOCIN CAP 250MG	3	
VANCOMY/NACL INJ 1.5/250	3	
VANCOMY/NACL INJ 1.5/500	3	
VANCOMY/NACL INJ 1.25/250	3	
VANCOMY/NACL INJ 1.75/250	3	
VANCOMY/NACL INJ 1/250ML	3	
VANCOMY/NACL INJ 2/500ML	3	
VANCOMY/NACL INJ 750/150	3	
VANCOMYC/D5W INJ 1.5/250	3	
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
VANCOMYC/D5W INJ 1GM	3	
VANCOMYC/D5W INJ 500MG	3	
VANCOMYC/D5W INJ 750MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	2	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 100 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	1	
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	2	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	2	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 1.5/300	3	
VANCOMYCIN INJ 1.5GM	3	
VANCOMYCIN INJ 1.25/250	3	
VANCOMYCIN INJ 1.25GM	3	
VANCOMYCIN INJ 1.75GM	3	
VANCOMYCIN INJ 1GM/200M	3	
VANCOMYCIN INJ 2GM	3	
VANCOMYCIN INJ 5GM	3	
VANCOMYCIN INJ 10GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750/250	3	
VANCOMYCIN INJ 750MG	3	
VANCOMYCIN SOL 1.75GM	3	
VANCOMYCIN SOL 2G/400ML	3	
VIBATIV INJ 750MG	3	
LEPROSTATICS		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
LINCOSAMIDES		
CLEOCIN CAP 75MG	3	

Drug Name	Drug Tier	Requirements/Limits
CLEOCIN CAP 150MG	3	
CLEOCIN CAP 300MG	3	
CLEOCIN PED SOL 75MG/5ML	3	
CLEOCIN PHOS INJ 9GM/60ML	3	
CLEOCIN PHOS INJ 300/2ML	3	
CLEOCIN PHOS INJ 600/4ML	3	
CLEOCIN PHOS INJ 900/6ML	3	
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	1	
<i>clindamycin phosphate inj 9 gm/60ml</i>	1	
<i>clindamycin phosphate inj 300 mg/2ml</i>	1	
<i>clindamycin phosphate inj 600 mg/4ml</i>	1	
<i>clindamycin phosphate inj 900 mg/6ml</i>	1	
LINCOCIN INJ 300MG/ML	3	
LINCOCIN INJ 600/2ML	3	
<i>lincomycin hcl inj 300 mg/ml</i>	1	
MONOBACTAMS		
AZACTAM INJ 1GM	3	
AZACTAM INJ 2GM	3	
<i>aztreonam for inj 1 gm</i>	1	
<i>aztreonam for inj 2 gm</i>	1	
CAYSTON INH 75MG	NC	
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	2	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	2	
<i>linezolid tab 600 mg</i>	1	
SIVEXTRO INJ 200MG	3	PA
SIVEXTRO TAB 200MG	3	PA
ZYVOX SOL 2MG/ML	3	
ZYVOX SUS 100MG/5M	3	
ZYVOX TAB 600MG	3	
POLYMYXINS		
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
COLY-MYCIN M INJ 150MG	3	
<i>polymyxin b sulfate for inj 500000 unit</i>	1	
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	2	
HIPREX TAB 1GM	3	
MACROBID CAP 100MG	3	
MACRODANTIN CAP 25MG	NC	
MACRODANTIN CAP 50MG	NC	
MACRODANTIN CAP 100MG	NC	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>methenamine mandelate tab 0.5 gm</i>	1	
<i>methenamine mandelate tab 1 gm</i>	1	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	2	
<i>nitrofurantoin susp 25 mg/5ml</i>	NC	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
RANEXA TAB 500MG	3	
RANEXA TAB 1000MG	3	
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	
NITRATES		
GONITRO POW 400MCG	NC	
ISORDIL TAB 5MG	3	PV
ISORDIL TAB 40MG	3	PV
<i>isosorbide dinitrate tab 5 mg</i>	1	PV
<i>isosorbide dinitrate tab 10 mg</i>	1	PV
<i>isosorbide dinitrate tab 20 mg</i>	1	PV
<i>isosorbide dinitrate tab 30 mg</i>	1	PV
<i>isosorbide dinitrate tab 40 mg</i>	NC	
<i>isosorbide mononitrate tab 10 mg</i>	1	PV
<i>isosorbide mononitrate tab 20 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	PV
NITRO-BID OIN 2%	3	PV
NITRO-DUR DIS 0.1MG/HR	3	PV

Drug Name	Drug Tier	Requirements/Limits
NITRO-DUR DIS 0.2MG/HR	3	PV
NITRO-DUR DIS 0.3MG/HR	3	PV
NITRO-DUR DIS 0.4MG/HR	3	PV
NITRO-DUR DIS 0.6MG/HR	3	PV
NITRO-DUR DIS 0.8MG/HR	3	PV
NITROGLYCER INJ 5MG/ML	3	
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>	1	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	PV
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	1	PV
NITROLINGUAL SPR 400MCG	3	PV
NITROMIST AER 400MCG	3	PV
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	1	
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone hcl tab 30 mg</i>	1	
<i>droperidol inj 2.5 mg/ml</i>	1	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	2	
<i>hydroxyzine hcl im soln 50 mg/ml</i>	2	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
<i>meprobamate tab 200 mg</i>	2	
<i>meprobamate tab 400 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
BENZODIAZEPINES		
ALPRAZOLAM CON 1 MG/ML	3	
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	
<i>alprazolam orally disintegrating tab 1 mg</i>	1	
<i>alprazolam orally disintegrating tab 2 mg</i>	1	
<i>alprazolam tab 0.5 mg</i>	1	
<i>alprazolam tab 0.5mg xr</i>	1	
<i>alprazolam tab 0.25 mg</i>	1	
<i>alprazolam tab 1 mg</i>	1	
<i>alprazolam tab 1mg xr</i>	1	
<i>alprazolam tab 2 mg</i>	1	
<i>alprazolam tab 2mg xr</i>	1	
<i>alprazolam tab 3mg xr</i>	1	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
ATIVAN INJ 2MG/ML	NC	
ATIVAN INJ 4MG/ML	NC	
ATIVAN TAB 0.5MG	NC	
ATIVAN TAB 1MG	NC	
ATIVAN TAB 2MG	NC	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>clorazepate dipotassium tab 3.75 mg</i>	1	
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>diazepam conc 5 mg/ml</i>	2	
<i>diazepam inj 5 mg/ml</i>	2	
DIAZEPAM INJ 5MG/ML	3	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam tab 10 mg</i>	1	
<i>lorazepam conc 2 mg/ml</i>	1	
<i>lorazepam inj 2 mg/ml</i>	1	
<i>lorazepam inj 4 mg/ml</i>	1	
<i>lorazepam tab 0.5 mg</i>	1	
<i>lorazepam tab 1 mg</i>	1	
<i>lorazepam tab 2 mg</i>	1	
LOREEV XR CAP 1.5MG	3	

Drug Name	Drug Tier	Requirements/Limits
LOREEV XR CAP 1MG	3	
LOREEV XR CAP 2MG	3	
LOREEV XR CAP 3MG	3	
<i>oxazepam cap 10 mg</i>	1	
<i>oxazepam cap 15 mg</i>	1	
<i>oxazepam cap 30 mg</i>	1	
TRANXENE T TAB 7.5MG	3	
VALIUM TAB 2MG	3	
VALIUM TAB 5MG	3	
VALIUM TAB 10MG	3	
XANAX TAB 0.5MG	NC	
XANAX TAB 0.25MG	NC	
XANAX TAB 1MG	NC	
XANAX TAB 2MG	NC	
XANAX XR TAB 0.5MG	NC	
XANAX XR TAB 1MG	NC	
XANAX XR TAB 2MG	NC	
XANAX XR TAB 3MG	NC	

ANTIARRHYTHMICS

ANTIARRHYTHMICS - MISC.

<i>adenosine iv soln 6 mg/2ml</i>	1	
<i>adenosine iv soln 12 mg/4ml</i>	1	

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate cap 100 mg</i>	2	PV
<i>disopyramide phosphate cap 150 mg</i>	1	PV
NORPACE CAP 100MG	NC	
NORPACE CAP 100MG CR	3	PV
NORPACE CAP 150MG	NC	
NORPACE CAP 150MG CR	3	PV
<i>procainamide hcl inj 100 mg/ml</i>	1	
<i>procainamide hcl inj 500 mg/ml</i>	1	
<i>quinidine gluconate tab er 324 mg</i>	2	

ANTIARRHYTHMICS TYPE I-B

<i>lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)</i>	1	
<i>lidocaine hcl (cardiac) iv soln pref syr 50 mg/5ml (1%)</i>	1	
<i>lidocaine hcl (cardiac) iv soln pref syr 100 mg/5ml (2%)</i>	2	
<i>lidocaine hcl(cardiac) iv pf soln pref syr 100 mg/5ml (2%)</i>	1	
LIDOCAINE INJ 20MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	1	
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	1	
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate tab 50 mg</i>	1	PV
<i>flecainide acetate tab 100 mg</i>	1	PV
<i>flecainide acetate tab 150 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 225 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 325 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 425 mg</i>	2	PV
<i>propafenone hcl tab 150 mg</i>	1	PV
<i>propafenone hcl tab 225 mg</i>	1	PV
<i>propafenone hcl tab 300 mg</i>	1	PV
RYTHMOL SR CAP 225MG	3	
RYTHMOL SR CAP 325MG	3	
RYTHMOL SR CAP 425MG	3	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	1	
<i>amiodarone hcl tab 100 mg</i>	1	PV
<i>amiodarone hcl tab 200 mg</i>	1	PV
<i>amiodarone hcl tab 400 mg</i>	1	PV
CORVERT INJ 1MG/10ML	3	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	4	SP; PV
<i>dofetilide cap 250 mcg (0.25 mg)</i>	4	SP; PV
<i>dofetilide cap 500 mcg (0.5 mg)</i>	4	SP; PV
<i>ibutilide fumarate inj 1 mg/10ml</i>	1	
MULTAQ TAB 400MG	2	
NEXTERONE INJ	NC	
<i>pacerone tab 100mg</i>	1	PV
<i>pacerone tab 200mg</i>	1	PV
<i>pacerone tab 400mg</i>	1	PV
TIKOSYN CAP 125MCG	6	SP; PV
TIKOSYN CAP 250MCG	6	SP; PV
TIKOSYN CAP 500MCG	6	SP; PV
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
CINQAIR INJ	NC	
FASENRA INJ 10MG/0.5	5	SP, PA, QL; PV
FASENRA INJ 30MG/ML	5	SP, PA, QL; PV
FASENRA PEN INJ 30MG/ML	5	SP, PA, QL; PV
NUCALA INJ 40MG/0.4	5	SP, PA, QL; PV
NUCALA INJ 100MG	NC	
NUCALA INJ 100MG/ML	5	SP, PA, QL; PV
TEZSPIRE INJ 210MG	5	SP, PA, QL
TEZSPIRE SOL 210MG	5	SP, PA, QL
XOLAIR INJ 75/0.5	5	SP, PA, QL; PV
XOLAIR INJ 150MG/ML	5	SP, PA, QL; PV
XOLAIR INJ 300/2ML	5	SP, PA, QL; PV
XOLAIR SOL 150MG	5	SP, PA, QL; PV
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	NC	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
LONHALA MAGN SOL 25MCG	NC	
SEEBRI NEOHA CAP 15.6MCG	NC	
SPIRIVA AER 1.25MCG	2	PV
SPIRIVA CAP HANDIHLR	1	
SPIRIVA SPR 2.5MCG	2	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	NC	
TUDORZA PRES AER 400/ACT	NC	
YUPELRI SOL	2	
LEUKOTRIENE MODULATORS		
ACCOLATE TAB 10MG	3	PV
ACCOLATE TAB 20MG	3	PV
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	PV
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	PV
SINGULAIR CHW 4MG	NC	
SINGULAIR CHW 5MG	NC	
SINGULAIR GRA 4MG	NC	
SINGULAIR TAB 10MG	NC	
<i>zafirlukast tab 10 mg</i>	1	PV
<i>zafirlukast tab 20 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>zileuton tab er 12hr 600 mg</i>	NC	
ZYFLO TAB 600MG	NC	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP TAB 250MCG	NC	
DALIRESP TAB 500MCG	NC	
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
STEROID INHALANTS		
ALVESCO AER 80MCG	NC	
ALVESCO AER 160MCG	NC	
ARNUITY ELPT INH 50MCG	NC	
ARNUITY ELPT INH 100MCG	NC	
ARNUITY ELPT INH 200MCG	NC	
ASMANEX 7 AER 110MCG	NC	
ASMANEX 14 AER 220MCG	NC	
ASMANEX 30 AER 110MCG	NC	
ASMANEX 30 AER 220MCG	NC	
ASMANEX 60 AER 220MCG	NC	
ASMANEX 120 AER 220MCG	NC	
ASMANEX HFA AER 100 MCG	2	QL
ASMANEX HFA AER 200 MCG	2	QL
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 1 mg/2ml</i>	2	PA, QL; PV
FLOVENT DISK AER 50MCG	NC	
FLOVENT DISK AER 100MCG	NC	
FLOVENT DISK AER 250MCG	NC	
FLOVENT HFA AER 44MCG	NC	
FLOVENT HFA AER 110MCG	NC	
FLOVENT HFA AER 220MCG	NC	
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	1	QL
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	1	QL
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	2	QL
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	NC	
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	NC	
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	NC	
PULMICORT INH 90MCG	2	QL; PV
PULMICORT INH 180MCG	2	QL; PV
PULMICORT SUS 0.5MG/2	3	PA, QL; PV
PULMICORT SUS 0.25MG/2	3	PA, QL; PV
PULMICORT SUS 1MG/2ML	3	PA, QL; PV

Drug Name	Drug Tier	Requirements/Limits
QVAR REDIHA AER 80MCG	NC	
QVAR REDIHAL AER 40MCG	NC	
SYMPATHOMIMETICS		
ADVAIR DISKU AER 100/50	NC	
ADVAIR DISKU AER 250/50	NC	
ADVAIR DISKU AER 500/50	NC	
ADVAIR HFA AER 45/21	NC	
ADVAIR HFA AER 115/21	NC	
ADVAIR HFA AER 230/21	NC	
AIRDUO RESPI INH 55-14	NC	
AIRDUO RESPI INH 113-14	NC	
AIRDUO RESPI INH 232-14	NC	
AIRSUPRA AER 90-80MCG	2	QL
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	2	
<i>albuterol sulfate tab 4 mg</i>	1	
ANORO ELLIPT AER 62.5-25	2	QL
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	2	QL; PV
BEVESPI AER 9-4.8MCG	NC	
BREO ELLIPTA INH 50-25MCG	2	QL; PV
BREO ELLIPTA INH 100-25	2	QL; PV
BREO ELLIPTA INH 200-25	2	QL; PV
<i>breyndra aer 80/4.5</i>	1	QL; PV
<i>breyndra aer 160/4.5</i>	1	QL; PV
BREZTRI AERO AER SPHERE	2	QL
BROVANA NEB 15MCG	3	QL; PV
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	QL; PV
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	QL; PV
COMBIVENT AER 20-100	3	
DUAKLIR AER 400/12	NC	
DULERA AER 50-5MCG	NC	

Drug Name	Drug Tier	Requirements/Limits
DULERA AER 100-5MCG	NC	
DULERA AER 200-5MCG	NC	
<i>fluticasone furoate-vilanterol aero powd ba 200-25 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	QL; PV
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	QL; PV
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	QL; PV; (except NDC 66993058697 is NC)
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	1	QL; PV; (except NDC 66993008696 is NC)
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	1	QL; PV; (except NDC 66993008796 is NC)
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	1	QL; PV; (except NDC 66993008896 is NC)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	2	QL
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1	QL
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	QL
PERFOROMIST NEB 20MCG	3	QL
PROAIR HFA AER	NC	
PROAIR RESPI AER	NC	
PROVENTIL AER HFA	NC	
SEREVENT DIS AER 50MCG	2	QL
STIOLTO AER 2.5-2.5	2	QL
STRIVERDI AER 2.5MCG	2	QL
SYMBICORT AER 80-4.5	NC	
SYMBICORT AER 160-4.5	NC	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
TRELEGY AER 100MCG	2	QL; PV

Drug Name	Drug Tier	Requirements/Limits
TRELEGY AER 200MCG	2	QL; PV
UTIBRON CAP NEOHALER	NC	
VENTOLIN HFA AER	NC	
<i>wixela inhub aer 100/50</i>	1	QL; PV
<i>wixela inhub aer 250/50</i>	1	QL; PV
<i>wixela inhub aer 500/50</i>	1	QL; PV
XOPENEX CONC NEB 1.25/0.5	3	QL
XOPENEX HFA AER	NC	
XOPENEX NEB 0.31MG	3	QL
XOPENEX NEB 0.63MG	3	QL
XOPENEX NEB 1.25/3ML	3	QL

XANTHINES

<i>aminophylline inj 25 mg/ml</i>	1	
<i>elixophyllin elx 80/15ml</i>	1	
THEO-24 CAP 100MG CR	NC	
THEO-24 CAP 200MG CR	NC	
THEO-24 CAP 300MG CR	NC	
THEO-24 CAP 400MG ER	NC	
<i>theophylline elixir 80 mg/15ml</i>	1	
<i>theophylline soln 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	

ANTICOAGULANTS

COUMARIN ANTICOAGULANTS

COUMADIN TAB 1MG	NC	
COUMADIN TAB 2.5MG	NC	
COUMADIN TAB 2MG	NC	
COUMADIN TAB 3MG	NC	
COUMADIN TAB 4MG	NC	
COUMADIN TAB 5MG	NC	
COUMADIN TAB 6MG	NC	
COUMADIN TAB 7.5MG	NC	
COUMADIN TAB 10MG	NC	
<i>jantoven tab 1mg</i>	1	PV
<i>jantoven tab 2.5mg</i>	1	PV
<i>jantoven tab 2mg</i>	1	PV
<i>jantoven tab 3mg</i>	1	PV
<i>jantoven tab 4mg</i>	1	PV
<i>jantoven tab 5mg</i>	1	PV
<i>jantoven tab 6mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>jantoven tab 7.5mg</i>	1	PV
<i>jantoven tab 10mg</i>	1	PV
<i>warfarin sodium tab 1 mg</i>	1	PV
<i>warfarin sodium tab 2 mg</i>	1	PV
<i>warfarin sodium tab 2.5 mg</i>	1	PV
<i>warfarin sodium tab 3 mg</i>	1	PV
<i>warfarin sodium tab 4 mg</i>	1	PV
<i>warfarin sodium tab 5 mg</i>	1	PV
<i>warfarin sodium tab 6 mg</i>	1	PV
<i>warfarin sodium tab 7.5 mg</i>	1	PV
<i>warfarin sodium tab 10 mg</i>	1	PV
DIRECT FACTOR XA INHIBITORS		
BEVYXXA CAP 40MG	NC	
BEVYXXA CAP 80MG	NC	
ELIQUIS ST P TAB 5MG	2	PV
ELIQUIS TAB 2.5MG	2	PV
ELIQUIS TAB 5MG	2	PV
<i>rivaroxaban tab 2.5 mg</i>	1	
SAVAYSA TAB 15MG	NC	
SAVAYSA TAB 30MG	NC	
SAVAYSA TAB 60MG	NC	
XARELTO STAR TAB 15/20MG	2	PV
XARELTO SUS 1MG/ML	2	PV
XARELTO TAB 2.5MG	2	PV
XARELTO TAB 10MG	2	PV
XARELTO TAB 15MG	2	PV
XARELTO TAB 20MG	2	PV
HEPARINS AND HEPARINOID-LIKE AGENTS		
ARIXTRA INJ 2.5/0.5	3	PV
ARIXTRA INJ 5/0.4ML	3	PV
ARIXTRA INJ 7.5/0.6	3	PV
ARIXTRA INJ 10/0.8ML	3	PV
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	2	PV
FRAGMIN INJ 2500/0.2	3	PV
FRAGMIN INJ 2500/ML	3	PV
FRAGMIN INJ 5000/0.2	3	PV
FRAGMIN INJ 7500/0.3	3	PV
FRAGMIN INJ 10000/ML	3	PV
FRAGMIN INJ 12500UNT	3	PV
FRAGMIN INJ 15000UNT	3	PV
FRAGMIN INJ 18000UNT	3	PV
FRAGMIN INJ 95000UNT	3	PV
HEP SOD/D5W INJ 100/ML	NC	
HEP SOD/D5W INJ 20000UNT	NC	
HEP SOD/D5W INJ 25000UNT	NC	
HEP SOD/DEXT INJ 25000UNT	NC	
HEP SOD/NACL INJ 12500UNT	3	
HEP SOD/NACL INJ 25000UNT	NC	
<i>heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%</i>	1	
<i>heparin sod (porcine)-nacl iv soln 2000 unit/l-0.9%</i>	1	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	NC	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	2	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	2	
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	NC	
LOVENOX INJ 30/0.3ML	3	PV
LOVENOX INJ 40/0.4ML	3	PV
LOVENOX INJ 60/0.6ML	3	PV
LOVENOX INJ 80/0.8ML	3	PV

Drug Name	Drug Tier	Requirements/Limits
LOVENOX INJ 100MG/ML	3	PV
LOVENOX INJ 120/0.8	3	PV
LOVENOX INJ 150MG/ML	3	PV
LOVENOX INJ 300/3ML	3	PV

IN VITRO/LOCK ANTICOAGULANTS

ACD FORMULA SOL A	3	
ANTICOAGULNT SOL SOD CITR	3	
NOCLOT-50 SOL ACD-A	3	
TRICITRASOL CON	3	

THROMBIN INHIBITORS

ANGIOMAX INJ 250MG	3	
ARGATROBAN INJ 50/50ML	3	
ARGATROBAN INJ 50MG/50M	3	
ARGATROBAN INJ 100MG/ML	3	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	1	
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i>	1	
BIVALIR/NACL INJ 250/50	NC	
BIVALIR/NACL INJ 500/100	NC	
<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	1	
<i>bivalirudin trifluoroacetate iv soln 250 mg/50ml (base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	1	PV
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	1	PV
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	1	PV
PRADAXA CAP 75MG	NC	
PRADAXA CAP 110MG	NC	
PRADAXA CAP 150MG	NC	

ANTICONVULSANTS

AMPA GLUTAMATE RECEPTOR ANTAGONISTS

FYCOMPA SUS 0.5MG/ML	2	PV
FYCOMPA TAB 2MG	2	PV
FYCOMPA TAB 4MG	2	PV
FYCOMPA TAB 6MG	2	PV
FYCOMPA TAB 8MG	2	PV
FYCOMPA TAB 10MG	2	PV
FYCOMPA TAB 12MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam suspension 2.5 mg/ml</i>	1	PA; PV
<i>clobazam tab 10 mg</i>	1	PA; PV
<i>clobazam tab 20 mg</i>	2	PA; PV
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 1 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 2 mg</i>	1	PV
<i>clonazepam tab 0.5 mg</i>	1	PV
<i>clonazepam tab 1 mg</i>	1	PV
<i>clonazepam tab 2 mg</i>	1	PV
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
KLONOPIN TAB 0.5MG	3	PV
KLONOPIN TAB 1MG	3	PV
KLONOPIN TAB 2MG	3	PV
NAYZILAM SPR 5MG	2	
ONFI SUS 2.5MG/ML	NC	
ONFI TAB 10MG	NC	
ONFI TAB 20MG	NC	
VALTOCO SPR 5MG	2	
VALTOCO SPR 10MG	2	
VALTOCO SPR 15MG	2	
VALTOCO SPR 20MG	2	
ANTICONVULSANTS - MISC.		
APTiom TAB 200MG	2	PV
APTiom TAB 400MG	2	PV
APTiom TAB 600MG	2	PV
APTiom TAB 800MG	2	PV
BANZEL SUS 40MG/ML	NC	
BANZEL TAB 200MG	NC	
BANZEL TAB 400MG	NC	
BRIVIACT INJ 50MG/5ML	2	PV
BRIVIACT SOL 10MG/ML	2	PV
BRIVIACT TAB 10MG	2	PV
BRIVIACT TAB 25MG	2	PV
BRIVIACT TAB 50MG	2	PV
BRIVIACT TAB 75MG	2	PV
BRIVIACT TAB 100MG	2	PV
<i>carbamazepine cap er 12hr 100 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine cap er 12hr 200 mg</i>	1	PV
<i>carbamazepine cap er 12hr 300 mg</i>	1	PV
<i>carbamazepine chew tab 100 mg</i>	1	PV
<i>carbamazepine susp 100 mg/5ml</i>	1	PV
<i>carbamazepine tab 200 mg</i>	1	PV
<i>carbamazepine tab er 12hr 100 mg</i>	1	PV
<i>carbamazepine tab er 12hr 200 mg</i>	1	PV
<i>carbamazepine tab er 12hr 400 mg</i>	1	PV
CARBATROL CAP 100MG	3	PV
CARBATROL CAP 200MG	3	PV
CARBATROL CAP 300MG	3	PV
DIACOMIT CAP 250MG	NC	SP
DIACOMIT CAP 500MG	NC	SP
DIACOMIT PAK 250MG	NC	SP
DIACOMIT PAK 500MG	NC	SP
ELEPSIA XR TAB 1000MG	NC	
ELEPSIA XR TAB 1500MG	NC	
EPIDIOLEX SOL 100MG/ML	6	SP, PA, QL; PV
<i>epitol tab 200mg</i>	1	PV
FINTEPLA SOL 2.2MG/ML	NC	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
GABARONE TAB 100MG	NC	
GABARONE TAB 400MG	NC	
KEPPRA INJ 500/5ML	NC	
KEPPRA SOL 100MG/ML	NC	
KEPPRA TAB 250MG	NC	
KEPPRA TAB 500MG	NC	
KEPPRA TAB 750MG	NC	
KEPPRA TAB 1000MG	NC	
KEPPRA XR TAB 500MG	NC	
KEPPRA XR TAB 750MG	NC	
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	1	PV
<i>lacosamide oral solution 10 mg/ml</i>	2	PV
<i>lacosamide tab 50 mg</i>	1	PV
<i>lacosamide tab 100 mg</i>	1	PV
<i>lacosamide tab 150 mg</i>	1	PV
<i>lacosamide tab 200 mg</i>	1	PV
LAMICTAL CHW 5MG	NC	

Drug Name	Drug Tier	Requirements/Limits
LAMICTAL CHW 25MG	NC	
LAMICTAL KIT START 35	NC	
LAMICTAL KIT START 49	NC	
LAMICTAL KIT START 98	NC	
LAMICTAL ODT KIT	NC	
LAMICTAL ODT TAB 25MG	NC	
LAMICTAL ODT TAB 50MG	NC	
LAMICTAL ODT TAB 100MG	NC	
LAMICTAL ODT TAB 200MG	NC	
LAMICTAL TAB 25MG	NC	
LAMICTAL TAB 100MG	NC	
LAMICTAL TAB 150MG	NC	
LAMICTAL TAB 200MG	NC	
LAMICTAL XR KIT	NC	
<i>lamotrigine orally disintegrating tab 25 mg</i>	1	PV
<i>lamotrigine orally disintegrating tab 50 mg</i>	1	PV
<i>lamotrigine orally disintegrating tab 100 mg</i>	1	PV
<i>lamotrigine orally disintegrating tab 200 mg</i>	1	PV
<i>lamotrigine tab 25 mg</i>	1	PV
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	2	PV
<i>lamotrigine tab 35 x 25 mg starter kit</i>	2	PV
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	2	PV
<i>lamotrigine tab 100 mg</i>	1	PV
<i>lamotrigine tab 150 mg</i>	1	PV
<i>lamotrigine tab 200 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	PV
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	2	PV
<i>lamotrigine tab er 24hr 25 mg</i>	1	PV
<i>lamotrigine tab er 24hr 25 mg</i>	NC	(applies to NDC 31722024030 only)
<i>lamotrigine tab er 24hr 50 mg</i>	1	PV
<i>lamotrigine tab er 24hr 50 mg</i>	NC	(applies to NDC 31722024130 only)
<i>lamotrigine tab er 24hr 100 mg</i>	1	PV
<i>lamotrigine tab er 24hr 100 mg</i>	NC	(applies to NDC 31722024230 only)
<i>lamotrigine tab er 24hr 200 mg</i>	1	PV
<i>lamotrigine tab er 24hr 200 mg</i>	NC	(applies to NDC 31722024330 only)

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab er 24hr 250 mg</i>	2	PV
<i>lamotrigine tab er 24hr 250 mg</i>	NC	(applies to NDC 31722024430 only)
<i>lamotrigine tab er 24hr 300 mg</i>	1	PV
<i>lamotrigine tab er 24hr 300 mg</i>	NC	(applies to NDC 31722024530 only)
LEVETIRACETA INJ 5MG/ML	3	
LEVETIRACETA INJ 10MG/ML	3	
LEVETIRACETA INJ 15MG/ML	3	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	PV
<i>levetiracetam tab 250 mg</i>	1	PV
<i>levetiracetam tab 500 mg</i>	1	PV
<i>levetiracetam tab 750 mg</i>	1	PV
<i>levetiracetam tab 1000 mg</i>	1	PV
<i>levetiracetam tab er 24hr 500 mg</i>	1	PV
<i>levetiracetam tab er 24hr 750 mg</i>	1	PV
LYRICA CAP 25MG	NC	
LYRICA CAP 50MG	NC	
LYRICA CAP 75MG	NC	
LYRICA CAP 100MG	NC	
LYRICA CAP 150MG	NC	
LYRICA CAP 200MG	NC	
LYRICA CAP 225MG	NC	
LYRICA CAP 300MG	NC	
LYRICA SOL 20MG/ML	NC	
MOTPOLY XR CAP 100MG	NC	
MOTPOLY XR CAP 150MG	NC	
MOTPOLY XR CAP 200MG	NC	
MYSOLINE TAB 50MG	3	PV
MYSOLINE TAB 250MG	3	PV
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	PV
<i>oxcarbazepine tab 150 mg</i>	1	PV
<i>oxcarbazepine tab 300 mg</i>	1	PV
<i>oxcarbazepine tab 600 mg</i>	1	PV
<i>oxcarbazepine tab er 24hr 150 mg</i>	1	PV
<i>oxcarbazepine tab er 24hr 300 mg</i>	1	PV
<i>oxcarbazepine tab er 24hr 600 mg</i>	1	PV
OXTELLAR XR TAB 150MG	2	PV
OXTELLAR XR TAB 300MG	2	PV
OXTELLAR XR TAB 600MG	2	PV
<i>pregabalin cap 25 mg</i>	1	
<i>pregabalin cap 50 mg</i>	1	
<i>pregabalin cap 75 mg</i>	1	
<i>pregabalin cap 100 mg</i>	1	
<i>pregabalin cap 150 mg</i>	1	
<i>pregabalin cap 200 mg</i>	1	
<i>pregabalin cap 225 mg</i>	1	
<i>pregabalin cap 300 mg</i>	1	
<i>pregabalin soln 20 mg/ml</i>	2	
<i>primidone tab 50 mg</i>	1	PV
<i>primidone tab 250 mg</i>	1	PV
QUDEXY XR CAP 25/24HR	3	PV
QUDEXY XR CAP 50/24HR	3	PV
QUDEXY XR CAP 100/24HR	3	PV
QUDEXY XR CAP 150/24HR	3	PV
QUDEXY XR CAP 200/24HR	3	PV
<i>roweepra tab 500mg</i>	1	PV
<i>rufinamide susp 40 mg/ml</i>	2	PV
<i>rufinamide tab 200 mg</i>	2	PV
<i>rufinamide tab 400 mg</i>	2	PV
<i>subvenite kit start 35</i>	2	PV
<i>subvenite kit start 49</i>	2	PV
<i>subvenite kit start 98</i>	2	PV
<i>subvenite tab 25mg</i>	1	PV
<i>subvenite tab 100mg</i>	1	PV
<i>subvenite tab 150mg</i>	1	PV
<i>subvenite tab 200mg</i>	1	PV
TEGRETOL SUS 100/5ML	NC	
TEGRETOL TAB 200MG	NC	
TEGRETOL-XR TAB 100MG	NC	
TEGRETOL-XR TAB 200MG	NC	
TEGRETOL-XR TAB 400MG	NC	
TOPAMAX SPR CAP 15MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
TOPAMAX SPR CAP 25MG	3	PV
TOPAMAX TAB 25MG	3	PV
TOPAMAX TAB 50MG	3	PV
TOPAMAX TAB 100MG	3	PV
TOPAMAX TAB 200MG	3	PV
<i>topiramate cap er 24hr 25 mg</i>	2	
<i>topiramate cap er 24hr 50 mg</i>	2	
<i>topiramate cap er 24hr 100 mg</i>	2	
<i>topiramate cap er 24hr 200 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 25 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 200 mg</i>	NC	
<i>topiramate sprinkle cap 15 mg</i>	1	PV
<i>topiramate sprinkle cap 25 mg</i>	1	PV
<i>topiramate tab 25 mg</i>	1	PV
<i>topiramate tab 50 mg</i>	1	PV
<i>topiramate tab 100 mg</i>	1	PV
<i>topiramate tab 200 mg</i>	1	PV
TRILEPTAL SUS 300/5ML	NC	
TRILEPTAL TAB 150MG	NC	
TRILEPTAL TAB 300MG	NC	
TRILEPTAL TAB 600MG	NC	
TROKENDI XR CAP 25MG	3	PV
TROKENDI XR CAP 50MG	3	PV
TROKENDI XR CAP 100MG	3	PV
TROKENDI XR CAP 200MG	3	PV
VIMPAT INJ 200MG/20	NC	
VIMPAT SOL 10MG/ML	NC	
VIMPAT TAB 50MG	NC	
VIMPAT TAB 100MG	NC	
VIMPAT TAB 150MG	NC	
VIMPAT TAB 200MG	NC	
ZONEGRAN CAP 25MG	NC	
ZONEGRAN CAP 100MG	NC	
<i>zonisamide cap 25 mg</i>	1	PV
<i>zonisamide cap 50 mg</i>	1	PV
<i>zonisamide cap 100 mg</i>	1	PV
CARBAMATES		
<i>felbamate susp 600 mg/5ml</i>	1	PV
<i>felbamate tab 400 mg</i>	1	PV
<i>felbamate tab 600 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
FELBATOL TAB 400MG	3	PV
FELBATOL TAB 600MG	3	PV
XCOPRI PAK 12.5-25	2	PV
XCOPRI PAK 50-100MG	2	PV
XCOPRI PAK 100-150	2	PV
XCOPRI PAK 150-200	2	PV
XCOPRI TAB 25MG	2	PV
XCOPRI TAB 50MG	2	PV
XCOPRI TAB 100MG	2	PV
XCOPRI TAB 150MG	2	PV
XCOPRI TAB 200MG	2	PV
GABA MODULATORS		
GABITRIL TAB 2MG	2	PV
GABITRIL TAB 4MG	2	PV
GABITRIL TAB 12MG	2	PV
GABITRIL TAB 16MG	2	PV
SABRIL POW 500MG	NC	SP
SABRIL TAB 500MG	NC	SP
<i>tiagabine hcl tab 2 mg</i>	1	PV
<i>tiagabine hcl tab 4 mg</i>	2	PV
<i>tiagabine hcl tab 12 mg</i>	2	PV
<i>tiagabine hcl tab 16 mg</i>	1	PV
<i>vigabatrin powd pack 500 mg</i>	4	SP, PA, QL; PV
<i>vigabatrin tab 500 mg</i>	4	SP, PA, QL; PV
<i>vigadrone pow 500mg</i>	4	SP, PA, QL; PV
VIGAFYDE SOL 100MG/ML	NC	SP
<i>vigpoder pow 500mg</i>	4	SP, PA, QL; PV
HYDANTOINS		
CEREBYX INJ 100/2ML	3	
CEREBYX INJ 500/10ML	3	
DILANTIN CAP 30MG	NC	
DILANTIN CAP 100MG	NC	
DILANTIN CHW 50MG	NC	
DILANTIN-125 SUS 125/5ML	NC	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	1	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	1	
<i>phenytek cap 200mg</i>	1	PV
<i>phenytek cap 300mg</i>	1	PV
<i>phenytoin chew tab 50 mg</i>	1	PV
<i>phenytoin sodium extended cap 100 mg</i>	1	PV
<i>phenytoin sodium extended cap 200 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin sodium extended cap 300 mg</i>	1	PV
<i>phenytoin sodium inj 50 mg/ml</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	PV
SUCCINIMIDES		
CELONTIN CAP 300MG	3	PV
<i>ethosuximide cap 250 mg</i>	1	PV
<i>ethosuximide soln 250 mg/5ml</i>	1	PV
<i>methsuximide cap 300 mg</i>	2	PV
ZARONTIN CAP 250MG	3	PV
ZARONTIN SOL 250/5ML	3	PV
VALPROIC ACID		
DEPAKOTE ER TAB 250MG	NC	
DEPAKOTE ER TAB 500MG	NC	
DEPAKOTE SPR CAP 125MG	NC	
DEPAKOTE TAB 125MG DR	NC	
DEPAKOTE TAB 250MG DR	NC	
DEPAKOTE TAB 500MG DR	NC	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 250 mg</i>	1	PV
<i>divalproex sodium tab delayed release 500 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	PV
<i>valproate sodium inj 100 mg/ml</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	PV
<i>valproic acid cap 250 mg</i>	1	PV
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine orally disintegrating tab 15 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	PV
<i>mirtazapine tab 7.5 mg</i>	1	PV
<i>mirtazapine tab 15 mg</i>	1	PV
<i>mirtazapine tab 30 mg</i>	1	PV
<i>mirtazapine tab 45 mg</i>	1	PV
REMERON SLTB TAB 15MG	3	PV
REMERON SLTB TAB 30MG	3	PV
REMERON SLTB TAB 45MG	3	PV
REMERON TAB 15MG	3	PV
REMERON TAB 30MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
ANTIDEPRESSANT COMBINATIONS		
AUVELITY TAB 45-105MG	NC	
ANTIDEPRESSANTS - MISC.		
APLENZIN TAB 174MG	NC	
APLENZIN TAB 348MG	NC	
APLENZIN TAB 522MG	NC	
<i>bupropion hcl tab 75 mg</i>	1	PV
<i>bupropion hcl tab 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 200 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 300 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 450 mg</i>	NC	
FORFIVO XL TAB 450MG	3	PV
WELLBUTRIN TAB 100MG SR	3	PV
WELLBUTRIN TAB 150MG SR	3	PV
WELLBUTRIN TAB 200MG SR	3	PV
WELLBUTRIN TAB XL 150MG	NC	
WELLBUTRIN TAB XL 300MG	NC	
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZURZUVAE CAP 20MG	6	SP, PA
ZURZUVAE CAP 25MG	6	SP, PA
ZURZUVAE CAP 30MG	6	SP, PA
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM DIS 6MG/24HR	3	PV
EMSAM DIS 9MG/24HR	3	PV
EMSAM DIS 12MG/24H	3	PV
MARPLAN TAB 10MG	3	PV
NARDIL TAB 15MG	3	PV
PARNATE TAB 10MG	3	PV
<i>phenelzine sulfate tab 15 mg</i>	1	PV
<i>tranylcypromine sulfate tab 10 mg</i>	2	PV
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO SOL 56MG DOS	3	PA
SPRAVATO SOL 84MG DOS	3	PA
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
CELEXA TAB 10MG	3	PV
CELEXA TAB 20MG	3	PV
CELEXA TAB 40MG	3	PV
CITALOPRAM CAP 30MG	3	PV
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	PV
<i>fluoxetine hcl cap 10 mg</i>	1	PV
<i>fluoxetine hcl cap 20 mg</i>	1	PV
<i>fluoxetine hcl cap 40 mg</i>	1	PV
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	PV
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	PV
<i>fluoxetine hcl tab 10 mg</i>	1	PV
<i>fluoxetine hcl tab 20 mg</i>	1	PV
<i>fluoxetine hcl tab 60 mg</i>	NC	
FLUOXETINE TAB 60MG	NC	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	2	PV
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	PV
<i>fluvoxamine maleate tab 25 mg</i>	1	PV
<i>fluvoxamine maleate tab 50 mg</i>	1	PV
<i>fluvoxamine maleate tab 100 mg</i>	1	PV
LEXAPRO TAB 5MG	NC	
LEXAPRO TAB 10MG	NC	
LEXAPRO TAB 20MG	NC	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	2	PV
<i>paroxetine hcl tab 10 mg</i>	1	PV
<i>paroxetine hcl tab 20 mg</i>	1	PV
<i>paroxetine hcl tab 30 mg</i>	1	PV
<i>paroxetine hcl tab 40 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	NC	(applies to NDC 60505367503 only)
PAXIL CR TAB 12.5MG	NC	
PAXIL CR TAB 25MG	NC	
PAXIL CR TAB 37.5MG	NC	
PAXIL SUS 10MG/5ML	NC	
PAXIL TAB 10MG	NC	

Drug Name	Drug Tier	Requirements/Limits
PAXIL TAB 20MG	NC	
PAXIL TAB 30MG	NC	
PAXIL TAB 40MG	NC	
PEXEVA TAB 10MG	NC	
PEXEVA TAB 20MG	NC	
PEXEVA TAB 30MG	NC	
PEXEVA TAB 40MG	NC	
PROZAC CAP 10MG	NC	
PROZAC CAP 20MG	NC	
PROZAC CAP 40MG	NC	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	PV
<i>sertraline hcl tab 25 mg</i>	1	PV
<i>sertraline hcl tab 50 mg</i>	1	PV
<i>sertraline hcl tab 100 mg</i>	1	PV
ZOLOFT CON 20MG/ML	NC	
ZOLOFT TAB 25MG	NC	
ZOLOFT TAB 50MG	NC	
ZOLOFT TAB 100MG	NC	

SEROTONIN MODULATORS

<i>nefazodone hcl tab 50 mg</i>	1	PV
<i>nefazodone hcl tab 100 mg</i>	2	PV
<i>nefazodone hcl tab 150 mg</i>	1	PV
<i>nefazodone hcl tab 200 mg</i>	1	PV
<i>nefazodone hcl tab 250 mg</i>	2	PV
RALDESY SOL 10MG/ML	NC	
<i>trazodone hcl tab 50 mg</i>	1	PV
<i>trazodone hcl tab 100 mg</i>	1	PV
<i>trazodone hcl tab 150 mg</i>	1	PV
<i>trazodone hcl tab 300 mg</i>	1	PV
TRINTELLIX TAB 5MG	2	PV
TRINTELLIX TAB 10MG	2	PV
TRINTELLIX TAB 20MG	2	PV
VIIBRYD KIT STARTER	NC	
VIIBRYD TAB 10MG	NC	
VIIBRYD TAB 20MG	NC	
VIIBRYD TAB 40MG	NC	
<i>vilazodone hcl tab 10 mg</i>	1	PV
<i>vilazodone hcl tab 20 mg</i>	1	PV
<i>vilazodone hcl tab 40 mg</i>	1	PV

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

CYMBALTA CAP 20MG	NC	
CYMBALTA CAP 30MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CYMBALTA CAP 60MG	NC	
DESVENLAFAX TAB 50MG ER	3	PV
DESVENLAFAX TAB 100MG ER	3	PV
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	PV
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	PV
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	PV
DRIZALMA CAP 20MG DR	NC	
DRIZALMA CAP 30MG DR	NC	
DRIZALMA CAP 40MG DR	NC	
DRIZALMA CAP 60MG DR	NC	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	PV
EFFEXOR XR CAP 37.5MG	NC	
EFFEXOR XR CAP 75MG	NC	
EFFEXOR XR CAP 150MG	NC	
FETZIMA CAP 20MG	3	PV
FETZIMA CAP 40MG	3	PV
FETZIMA CAP 80MG	3	PV
FETZIMA CAP 120MG	3	PV
FETZIMA CAP TITRATIO	3	PV
PRISTIQ TAB 25MG	NC	
PRISTIQ TAB 50MG	NC	
PRISTIQ TAB 100MG	NC	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	1	PV
VENLAFAXINE TAB 112.5MG	NC	
TRICYCLIC AGENTS		
<i>amitriptyline hcl tab 10 mg</i>	1	PV
<i>amitriptyline hcl tab 25 mg</i>	1	PV
<i>amitriptyline hcl tab 50 mg</i>	1	PV
<i>amitriptyline hcl tab 75 mg</i>	1	PV
<i>amitriptyline hcl tab 100 mg</i>	1	PV
<i>amitriptyline hcl tab 150 mg</i>	1	PV
<i>amoxapine tab 25 mg</i>	1	PV
<i>amoxapine tab 50 mg</i>	1	PV
<i>amoxapine tab 100 mg</i>	1	PV
<i>amoxapine tab 150 mg</i>	1	PV
ANAFRANIL CAP 25MG	3	PV
ANAFRANIL CAP 50MG	3	PV
ANAFRANIL CAP 75MG	3	PV
<i>clomipramine hcl cap 25 mg</i>	1	PV
<i>clomipramine hcl cap 50 mg</i>	1	PV
<i>clomipramine hcl cap 75 mg</i>	1	PV
<i>desipramine hcl tab 10 mg</i>	1	PV
<i>desipramine hcl tab 25 mg</i>	1	PV
<i>desipramine hcl tab 50 mg</i>	1	PV
<i>desipramine hcl tab 75 mg</i>	1	PV
<i>desipramine hcl tab 100 mg</i>	1	PV
<i>desipramine hcl tab 150 mg</i>	1	PV
<i>doxepin hcl cap 10 mg</i>	1	PV
<i>doxepin hcl cap 25 mg</i>	1	PV
<i>doxepin hcl cap 50 mg</i>	1	PV
<i>doxepin hcl cap 75 mg</i>	1	PV
<i>doxepin hcl cap 100 mg</i>	1	PV
<i>doxepin hcl cap 150 mg</i>	1	PV
<i>doxepin hcl conc 10 mg/ml</i>	1	PV
<i>imipramine hcl tab 10 mg</i>	1	PV
<i>imipramine hcl tab 25 mg</i>	1	PV
<i>imipramine hcl tab 50 mg</i>	1	PV
<i>imipramine pamoate cap 75 mg</i>	2	PV
<i>imipramine pamoate cap 100 mg</i>	2	PV
<i>imipramine pamoate cap 125 mg</i>	1	PV
<i>imipramine pamoate cap 150 mg</i>	2	PV
NORPRAMIN TAB 10MG	3	PV
NORPRAMIN TAB 25MG	3	PV
<i>nortriptyline hcl cap 10 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl cap 25 mg</i>	1	PV
<i>nortriptyline hcl cap 50 mg</i>	1	PV
<i>nortriptyline hcl cap 75 mg</i>	1	PV
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	PV
PAMELOR CAP 10MG	3	PV
PAMELOR CAP 25MG	3	PV
PAMELOR CAP 50MG	3	PV
PAMELOR CAP 75MG	3	PV
<i>protriptyline hcl tab 5 mg</i>	1	PV
<i>protriptyline hcl tab 10 mg</i>	2	PV
<i>trimipramine maleate cap 25 mg</i>	1	PV
<i>trimipramine maleate cap 50 mg</i>	1	PV
<i>trimipramine maleate cap 100 mg</i>	1	PV

ANTIDIABETICS

ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose tab 25 mg</i>	1	PV
<i>acarbose tab 50 mg</i>	1	PV
<i>acarbose tab 100 mg</i>	1	PV
<i>miglitol tab 25 mg</i>	2	PV
<i>miglitol tab 50 mg</i>	1	PV
<i>miglitol tab 100 mg</i>	1	PV
PRECOSE TAB 25MG	3	PV
PRECOSE TAB 50MG	3	PV
PRECOSE TAB 100MG	3	PV

ANTIDIABETIC - AMYLIN ANALOGS

SYMLINPEN 60 INJ 1000MCG	2	PV
SYMLNPEN 120 INJ 1000MCG	2	PV

ANTIDIABETIC COMBINATIONS

ACTOPLUS MET TAB 15-500MG	3	PV
ACTOPLUS MET TAB 15-850MG	3	PV
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	NC	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-15 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-45 mg</i>	NC	
<i>dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg</i>	NC	
<i>dapagliflozin prop-metformin hcl tab er 24hr 10-1000 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
DUETACT TAB 30-2MG	3	PV
DUETACT TAB 30-4MG	3	PV
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	PV
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	PV
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	PV
<i>glyburide-metformin tab 1.25-250 mg</i>	1	PV
<i>glyburide-metformin tab 2.5-500 mg</i>	1	PV
<i>glyburide-metformin tab 5-500 mg</i>	1	PV
GLYXAMBI TAB 10-5 MG	2	PV
GLYXAMBI TAB 25-5 MG	2	PV
INVOKAMET TAB 50-500MG	NC	
INVOKAMET TAB 50-1000	NC	
INVOKAMET TAB 150-500	NC	
INVOKAMET TAB 150-1000	NC	
INVOKAMET XR TAB 50-500MG	NC	
INVOKAMET XR TAB 50-1000	NC	
INVOKAMET XR TAB 150-500	NC	
INVOKAMET XR TAB 150-1000	NC	
JANUMET TAB 50-500MG	2	PV
JANUMET TAB 50-1000	2	PV
JANUMET XR TAB 50-500MG	2	PV
JANUMET XR TAB 50-1000	2	PV
JANUMET XR TAB 100-1000	2	PV
JENTADUETO TAB 2.5-500	NC	
JENTADUETO TAB 2.5-850	NC	
JENTADUETO TAB 2.5-1000	NC	
JENTADUETO TAB XR	NC	
KAZANO 12.5- TAB 500MG	NC	
KAZANO 12.5- TAB 1000MG	NC	
KOMBIGLYZ XR TAB 2.5-1000	NC	
KOMBIGLYZ XR TAB 5-500MG	NC	
KOMBIGLYZ XR TAB 5-1000MG	NC	
OSENI TAB 12.5-15	NC	
OSENI TAB 12.5-30	NC	
OSENI TAB 12.5-45	NC	
OSENI TAB 25-15MG	NC	
OSENI TAB 25-30MG	NC	
OSENI TAB 25-45MG	NC	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	2	PV
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	2	PV
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	PV
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	PV
QTERN TAB 5-5MG	NC	

Drug Name	Drug Tier	Requirements/Limits
QTERN TAB 10-5MG	NC	
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	2	
saxagliptin-metformin hcl tab er 24hr 5-500 mg	2	
saxagliptin-metformin hcl tab er 24hr 5-1000 mg	1	
SEGLUROMET TAB 2.5-500	NC	
SEGLUROMET TAB 2.5-1000	NC	
SEGLUROMET TAB 7.5-500	NC	
SEGLUROMET TAB 7.5-1000	NC	
SITAG/METFOR TAB 50-500MG	NC	
SITAG/METFOR TAB 50-1000	NC	
SOLIQUA INJ 100/33	0	\$0 Copay per 30-day supply
STEGLUJAN TAB 5-100MG	NC	
STEGLUJAN TAB 15-100MG	NC	
SYNJARDY TAB	2	PV
SYNJARDY TAB 5-500MG	2	PV
SYNJARDY TAB 5-1000MG	2	PV
SYNJARDY TAB 12.5-500	2	PV
SYNJARDY XR TAB	2	PV
SYNJARDY XR TAB 5-1000MG	2	PV
SYNJARDY XR TAB 10-1000	2	PV
SYNJARDY XR TAB 25-1000	2	PV
TRIJARDY XR TAB	2	PV
XIGDUO XR TAB 2.5-1000	2	PV
XIGDUO XR TAB 5-500MG	2	PV
XIGDUO XR TAB 5-1000MG	2	PV
XIGDUO XR TAB 10-500MG	2	PV
XIGDUO XR TAB 10-1000	2	PV
XULTOPHY INJ 100/3.6	0	\$0 Copay per 30-day supply
ZITUVIMET TAB 50-500MG	2	PV
ZITUVIMET TAB 50-1000	2	PV
ZITUVIMET XR TAB 50-500MG	2	PV
ZITUVIMET XR TAB 50-1000	2	PV
ZITUVIMET XR TAB 100-1000	2	PV
BIGUANIDES		
FORTAMET TAB 500MG	NC	
FORTAMET TAB 1000MG	NC	
GLUMETZA TAB 500MG	NC	
GLUMETZA TAB 1000MG	NC	
metformin hcl oral soln 500 mg/5ml	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl tab 500 mg</i>	1	PV
<i>metformin hcl tab 625 mg</i>	NC	
<i>metformin hcl tab 850 mg</i>	0	ACA, PV
<i>metformin hcl tab 1000 mg</i>	1	PV
<i>metformin hcl tab er 24hr 500 mg</i>	1	PV
<i>metformin hcl tab er 24hr 750 mg</i>	1	PV
<i>metformin hcl tab er 24hr modified release 500 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	NC	(generic for FORTAMET)
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	NC	(generic for FORTAMET)
RIOMET SOL 500/5ML	NC	

DIABETIC OTHER

BAQSIMI ONE POW 3MG/DOSE	2	
BAQSIMI TWO POW 3MG/DOSE	2	
<i>diazoxide susp 50 mg/ml</i>	2	
GLUCAGEN INJ HYPOKIT	NC	
<i>glucagon (rdna) for inj kit 1 mg</i>	2	
GLUCAGON KIT 1MG	NC	
GVOKE HYPO 1 INJ 0.5/.1ML	2	
GVOKE HYPO 1 INJ 1MG/.2ML	2	
GVOKE HYPO 2 INJ 0.5/.1ML	2	
GVOKE HYPO 2 INJ 1MG/.2ML	2	
GVOKE KIT SOL 1MG/0.2M	2	
GVOKE PFS INJ	2	
KORLYM TAB 300MG	NC	
PROGLYCEM SUS 50MG/ML	3	
ZEGALOGUE INJ 0.6/0.6	2	

DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	NC	
JANUVIA TAB 25MG	2	PV
JANUVIA TAB 50MG	2	PV
JANUVIA TAB 100MG	2	PV
NESINA TAB 6.25MG	NC	
NESINA TAB 12.5MG	NC	
NESINA TAB 25MG	NC	
ONGLYZA TAB 2.5MG	NC	
ONGLYZA TAB 5MG	NC	
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	2	PV
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
SITAGLIPTIN TAB 25MG	NC	
SITAGLIPTIN TAB 50MG	NC	
SITAGLIPTIN TAB 100MG	NC	
TRADJENTA TAB 5MG	NC	
ZITUVIO TAB 25MG	2	PV
ZITUVIO TAB 50MG	2	PV
ZITUVIO TAB 100MG	2	PV
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET TAB 0.8MG	3	
INCRETIN MIMETIC AGENTS		
ADLYXIN INJ 10/20MCG	NC	
ADLYXIN INJ 20MCG	NC	
BYDUREON PEN INJ 2MG	NC	
BYETTA INJ 5MCG	NC	
BYETTA INJ 10MCG	NC	
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	1	PA, QL; PV
MOUNJARO INJ 2.5/0.5	2	PA, QL; PV
MOUNJARO INJ 5MG/0.5	2	PA, QL; PV
MOUNJARO INJ 7.5/0.5	2	PA, QL; PV
MOUNJARO INJ 10MG/0.5	2	PA, QL; PV
MOUNJARO INJ 12.5/0.5	2	PA, QL; PV
MOUNJARO INJ 15MG/0.5	2	PA, QL; PV
OZEMPIC INJ 2/1.5ML	2	PA, QL; PV
OZEMPIC INJ 4MG/3ML	2	PA, QL; PV
OZEMPIC INJ 8MG/3ML	2	PA, QL; PV
RYBELSUS TAB 3MG	2	PA, QL; PV
RYBELSUS TAB 7MG	2	PA, QL; PV
RYBELSUS TAB 14MG	2	PA, QL; PV
TRULICITY INJ 0.75/0.5	2	PA, QL; PV
TRULICITY INJ 1.5/0.5	2	PA, QL; PV
TRULICITY INJ 3/0.5	2	PA, QL; PV
TRULICITY INJ 4.5/0.5	2	PA, QL; PV
VICTOZA INJ 18MG/3ML	NC	
INSULIN		
AFREZZA POW 4-8 UNIT	NC	
AFREZZA POW 4-8-12	NC	
AFREZZA POW 4UNIT	NC	
APIDRA INJ SOLOSTAR	NC	
APIDRA INJ U-100	NC	
BASAGLAR INJ 100UNIT	NC	

Drug Name	Drug Tier	Requirements/Limits
FIASP FLEX INJ TOUCH	0	\$0 Copay per 30-day supply
FIASP INJ 100/ML	0	\$0 Copay per 30-day supply
FIASP PENFIL INJ U-100	0	\$0 Copay per 30-day supply
GLARGIN YFGN INJ 100U/ML	0	\$0 copay per 30-day supply
GLARGIN YFGN SOL 100U/ML	0	\$0 copay per 30-day supply
HUMALOG INJ 100/ML	NC	
HUMALOG KWIK INJ 100/ML	NC	
HUMALOG KWIK INJ 200/ML	NC	
HUMALOG MIX INJ 50/50	NC	
HUMALOG MIX INJ 50/50KWP	NC	
HUMALOG MIX INJ 75/25KWP	NC	
HUMALOG MIX SUS 75/25	NC	
HUMULIN BR INJ U-100	NC	OTC
HUMULIN INJ 70/30	NC	OTC
HUMULIN INJ 70/30KWP	NC	OTC
HUMULIN N INJ U-100	NC	OTC
HUMULIN N INJ U-100KWP	NC	OTC
HUMULIN N PN INJ U-100	NC	OTC
HUMULIN PEN INJ 70/30	NC	OTC
HUMULIN R INJ U-100	NC	OTC
HUMULIN R INJ U-500	0	\$0 Copay per 30-day supply
INS ASP PROT INJ FLEXPEN	NC	
INS DEGL FLX INJ 100UNIT	NC	
INS DEGL FLX INJ 200UNIT	NC	
INSULIN DEGL INJ 100UNIT	NC	
LANTUS INJ 100/ML	0	\$0 Copay per 30-day supply
LANTUS SOLOS INJ 100/ML	0	\$0 Copay per 30-day supply
LEVEMIR INJ	NC	
LEVEMIR INJ FLEXTouc	NC	
LYUMJEV INJ 100UT/ML	NC	
LYUMJEV KWPN INJ 100UT/ML	NC	
LYUMJEV KWPN INJ 200UT/ML	NC	
LYUMJEV TMPO INJ 100UT/ML	NC	
NOVOLIN INJ 70/30	0	OTC; \$0 Copay per 30-day supply

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN INJ 70/30 FP	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLIN R INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply
NOVOLIN R INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLOG INJ 100/ML	0	\$0 Copay per 30-day supply
NOVOLOG INJ FLEXPEN	0	\$0 Copay per 30-day supply
NOVOLOG INJ PENFILL	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ 70/30	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ FLEXPEN	0	\$0 Copay per 30-day supply
REZVOGLAR INJ 100UT/ML	NC	
SEMGLEE INJ 100U/ML	NC	
TOUJEO MAX INJ 300/ML	0	\$0 Copay per 30-day supply
TOUJEO SOLO INJ 300/ML	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 100UNIT	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 200UNIT	0	\$0 Copay per 30-day supply
TRESIBA INJ 100UNIT	0	\$0 Copay per 30-day supply

INSULIN SENSITIZING AGENTS

ACTOS TAB 15MG	NC	
ACTOS TAB 30MG	NC	
ACTOS TAB 45MG	NC	
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	PV

MEGLITINIDE ANALOGUES

<i>nateglinide tab 60 mg</i>	1	PV
<i>nateglinide tab 120 mg</i>	1	PV
<i>repaglinide tab 0.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>repaglinide tab 1 mg</i>	1	PV
<i>repaglinide tab 2 mg</i>	1	PV
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
BRENZAVVY TAB 20MG	NC	
<i>dapagliflozin propanediol tab 5 mg (base equivalent)</i>	NC	
<i>dapagliflozin propanediol tab 10 mg (base equivalent)</i>	NC	
FARXIGA TAB 5MG	2	PV
FARXIGA TAB 10MG	2	PV
INVOKANA TAB 100MG	NC	
INVOKANA TAB 300MG	NC	
JARDIANCE TAB 10MG	2	PV
JARDIANCE TAB 25MG	2	PV
STEGLATRO TAB 5MG	NC	
STEGLATRO TAB 15MG	NC	
SULFONYLUREAS		
AMARYL TAB 1MG	3	PV
AMARYL TAB 2MG	3	PV
AMARYL TAB 4MG	3	PV
<i>glimepiride tab 1 mg</i>	1	PV
<i>glimepiride tab 2 mg</i>	1	PV
<i>glimepiride tab 3 mg</i>	1	PV
<i>glimepiride tab 4 mg</i>	1	PV
<i>glipizide tab 2.5 mg</i>	1	PV
<i>glipizide tab 5 mg</i>	1	PV
<i>glipizide tab 10 mg</i>	1	PV
<i>glipizide tab er 24hr 2.5 mg</i>	1	PV
<i>glipizide tab er 24hr 5 mg</i>	1	PV
<i>glipizide tab er 24hr 10 mg</i>	1	PV
<i>glipizide xl tab 2.5mg</i>	1	PV
<i>glipizide xl tab 5mg</i>	1	PV
<i>glipizide xl tab 10mg</i>	1	PV
GLUCOTROL XL TAB 2.5MG	3	PV
GLUCOTROL XL TAB 5MG	3	PV
GLUCOTROL XL TAB 10MG	3	PV
<i>glyburide micronized tab 1.5 mg</i>	1	PV
<i>glyburide micronized tab 3 mg</i>	1	PV
<i>glyburide micronized tab 6 mg</i>	1	PV
<i>glyburide tab 1.25 mg</i>	1	PV
<i>glyburide tab 2.5 mg</i>	1	PV
<i>glyburide tab 5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI TAB 125MG	NC	
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
DERMACINRX CAP PROBISOL	3	
<i>lactojen cap</i>	NC	
SUREBIOTIC CAP PROB SUP	3	
VISBIOME GI PAK CARE	3	
ZELAC CAP	3	
ANTIDIARRHEAL/PROBIOTIC COMBINATIONS		
RESTORA RX CAP 60-1.25	3	
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
LOMOTIL TAB 2.5MG	3	
<i>loperamide hcl cap 2 mg</i>	1	
MOTOFEN TAB 1-0.025	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET CAP 100MG	3	
<i>deferasirox granules packet 90 mg</i>	4	SP, PA
<i>deferasirox granules packet 180 mg</i>	4	SP, PA
<i>deferasirox granules packet 360 mg</i>	4	SP, PA
<i>deferasirox tab 90 mg</i>	4	SP, PA
<i>deferasirox tab 180 mg</i>	4	SP, PA
<i>deferasirox tab 360 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 125 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	4	SP, PA
<i>deferiprone tab 500 mg</i>	4	SP, PA
<i>deferiprone tab 1000 mg</i>	4	SP, PA
EXJADE TAB 125MG	NC	SP
EXJADE TAB 250MG	NC	SP
EXJADE TAB 500MG	NC	SP
FERPRX 2-DAY TAB 1000MG	NC	
FERRIPROX SOL 100MG/ML	NC	SP
FERRIPROX TAB 500MG	NC	SP
FERRIPROX TAB 1000MG	NC	SP
JADENU SPRKL GRA 90MG	NC	SP
JADENU SPRKL GRA 180MG	NC	SP
JADENU SPRKL GRA 360MG	NC	SP
JADENU TAB 90MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
JADENU TAB 180MG	NC	SP
JADENU TAB 360MG	NC	SP
PENTETATE CA SOL 200MG/ML	3	
PENTETATE ZI SOL 200MG/ML	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ACETADOTE INJ 200MG/ML	3	
<i>acetylcysteine inj 200 mg/ml</i>	1	
ANDEXXA SOL 200MG	3	
BAL IN OIL INJ 100MG/ML	3	
BRIDION INJ 200/2ML	NC	
BRIDION INJ 500/5ML	NC	
CALCIUM DISO INJ 1GM/5ML	3	
CYANOKIT INJ 5GM	3	
<i>deferoxamine mesylate for inj 2 gm</i>	4	SP, PA
<i>deferoxamine mesylate for inj 500 mg</i>	4	SP, PA
DESFERAL INJ 500MG	NC	
DIGIFAB INJ 40MG	3	
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	1	
PRAXBIND INJ 2.5/50	3	
PROTOPAM CHL INJ 1GM	3	
PROVAYBLUE INJ	NC	
RADIOGARDASE CAP 0.5GM	3	
SOD NITRITE INJ 30MG/ML	3	
SOD THIOSULF INJ 25%	3	
<i>sodium thiosulfate iv soln 250 mg/ml (25%)</i>	1	
VISTOGARD PAK 10GM	2	SP, QL
BENZODIAZEPINE ANTAGONISTS		
<i>flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)</i>	1	
<i>flumazenil iv soln 1 mg/10ml (0.1 mg/ml)</i>	1	
OPIOID ANTAGONISTS		
KLOXXADO SPR 8MG	3	
NALMEFENE INJ 1MG/ML	3	
<i>naloxone hcl inj 0.4 mg/ml</i>	1	
<i>naloxone hcl inj 4 mg/10ml</i>	1	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	1	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	
<i>naltrexone hcl tab 50 mg</i>	1	PV
NARCAN SPR 4MG	3	
OPVEE SPR 2.7/0.1	NC	
REXTOVY SPR 4/0.25ML	NC	

Drug Name	Drug Tier	Requirements/Limits
VIVITROL INJ 380MG	3	PA, QL; PV
ZIMHI SOL	NC	

ANTIEMETICS

5-HT3 RECEPTOR ANTAGONISTS

ANZEMET TAB 50MG	3	PA, QL
<i>granisetron hcl inj 1 mg/ml</i>	1	PA, QL
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	1	PA, QL
<i>granisetron hcl tab 1 mg</i>	1	PA, QL
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	1	PA, QL
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	1	PA, QL
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	1	PA, QL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	QL
<i>ondansetron hcl tab 4 mg</i>	1	PA, QL
<i>ondansetron hcl tab 8 mg</i>	1	PA, QL
<i>ondansetron hcl tab 24 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 4 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 8 mg</i>	1	PA, QL
<i>palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)</i>	1	PA, QL
PALONOSETRON INJ 0.25/2ML	3	PA, QL
POSFREA INJ 0.25/5ML	3	
SANCUSO DIS 3.1MG	2	PA, QL
SUSTOL INJ 10/0.4ML	NC	

ANTIEMETICS - ANTICHOLINERGIC

DIMENHYDRIN INJ 50MG/ML	3	
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
TIGAN INJ 100MG/ML	3	
TRANSDERM-SC DIS 1.5MG	NC	
TRANSDERM-SC DIS 1MG/3DAY	NC	
<i>trimethobenzamide hcl cap 300 mg</i>	1	

ANTIEMETICS - ANTIDOPAMINERGIC

BARHEMSYS INJ 10MG/4ML	NC	

ANTIEMETICS - MISCELLANEOUS

AKYNZEO CAP 300-0.5	3	PA, QL
AKYNZEO INJ	3	PA, QL
AKYNZEO INJ 235-0.25	3	QL
BONJESTA TAB 20-20MG	3	
DICLEGIS TAB 10-10MG	3	
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dronabinol cap 2.5 mg</i>	1	PA, QL
<i>dronabinol cap 5 mg</i>	1	PA, QL
<i>dronabinol cap 10 mg</i>	1	PA, QL
MARINOL CAP 2.5MG	3	PA, QL
MARINOL CAP 5MG	3	PA, QL
MARINOL CAP 10MG	3	PA, QL
SYNDROS SOL 5MG/ML	NC	

SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS

APONVIE INJ 32/4.4ML	NC	
<i>aprepitant capsule 40 mg</i>	2	PA, QL
<i>aprepitant capsule 80 mg</i>	2	PA, QL
<i>aprepitant capsule 125 mg</i>	1	PA, QL
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	PA, QL
EMEND BIPACK PAK 80MG	3	PA, QL
EMEND SOL 150MG	3	PA, QL
EMEND SUS 125MG	3	PA, QL
EMEND TRIPAC PAK 125 & 80	3	PA, QL
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	2	PA, QL
VARUBI TAB 90MG	3	PA, QL

ANTIFUNGALS

ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS

BREXAFEMME TAB 150MG	3	ST, PA, QL
CANCIDAS INJ 50MG	3	
CANCIDAS INJ 70MG	3	
<i>caspofungin acetate for iv soln 50 mg</i>	1	
<i>caspofungin acetate for iv soln 70 mg</i>	1	
CASPOFUNGIN INJ 50MG	3	
CASPOFUNGIN INJ 70MG	3	
ERAXIS INJ 50MG	3	
ERAXIS INJ 100MG	3	
MICAFUNGIN INJ 50MG	3	
MICAFUNGIN INJ 100MG	3	
<i>micafungin sodium for iv soln 50 mg</i>	1	
<i>micafungin sodium for iv soln 100 mg</i>	2	
MYCAMINE INJ 100MG	3	
REZZAYO INJ 200MG	3	

ANTIFUNGALS

ABELCET INJ 5MG/ML	3	
AMBISOME INJ 50MG	3	
<i>amphotericin b for iv soln 50 mg</i>	2	
ANCOBON CAP 250MG	3	

Drug Name	Drug Tier	Requirements/Limits
ANCOBON CAP 500MG	3	
<i>flucytosine cap 250 mg</i>	2	
<i>flucytosine cap 500 mg</i>	NC	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	

IMIDAZOLE-RELATED ANTIFUNGALS

CRESEMBA CAP 186MG	NC	
CRESEMBA INJ 372MG	3	
DIFLUCAN SUS 40MG/ML	3	
DIFLUCAN TAB 50MG	3	
DIFLUCAN TAB 100MG	3	
DIFLUCAN TAB 200MG	3	
<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	1	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	1	
FLUCONAZOLE SOL /NACL	3	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>itraconazole cap 100 mg</i>	1	
<i>itraconazole oral soln 10 mg/ml</i>	2	
<i>ketoconazole tab 200 mg</i>	1	
NOXAFIL INJ 300/16.7	NC	
NOXAFIL SUS 40MG/ML	NC	
NOXAFIL TAB 100MG	NC	
<i>posaconazole susp 40 mg/ml</i>	2	QL
<i>posaconazole tab delayed release 100 mg</i>	NC	
SPORANOX CAP 100MG	3	
SPORANOX CAP PULSEPAK	3	
SPORANOX SOL 10MG/ML	3	
VFEND IV INJ 200MG	3	PA
VFEND SUS 40MG/ML	3	PA
VFEND TAB 50MG	3	PA
VIVJOA CAP 150MG	3	PA, QL
<i>voriconazole for inj 200 mg</i>	2	PA
<i>voriconazole for susp 40 mg/ml</i>	2	PA
VORICONAZOLE INJ 200MG	3	PA

Drug Name	Drug Tier	Requirements/Limits
voriconazole tab 50 mg	2	PA
voriconazole tab 200 mg	2	PA

ANTI-HISTAMINES

ANTI-HISTAMINES - ALKYLAMINES

dexchlorpheniramine maleate oral soln 2 mg/5ml	NC
ryclora sol 2mg/5ml	NC

ANTI-HISTAMINES - ETHANOLAMINES

CARBINOXAMIN TAB 6MG	NC
carbinoxamine maleate extended release susp 4 mg/5ml	1
carbinoxamine maleate soln 4 mg/5ml	2
carbinoxamine maleate tab 4 mg	1
clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	1
clemastine fumarate tab 2.68 mg	1
diphen elx 12.5/5ml	NC
diphenhydramine hcl elixir 12.5 mg/5ml	2
diphenhydramine hcl inj 50 mg/ml	1
KARBINAL ER SUS 4MG/5ML	3
RYVENT TAB 6MG	NC

ANTI-HISTAMINES - NON-SEDATING

cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	1
CLARINEX TAB 5MG	3
desloratadine tab 5 mg	1
desloratadine tab orally disintegrating 2.5 mg	1
desloratadine tab orally disintegrating 5 mg	1
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	1
levocetirizine dihydrochloride tab 5 mg	1

ANTI-HISTAMINES - PHENOTHIAZINES

PHENERGAN INJ 25MG/ML	3
PHENERGAN INJ 50MG/ML	3
promethazine hcl inj 25 mg/ml	1
promethazine hcl inj 50 mg/ml	2
promethazine hcl oral soln 6.25 mg/5ml	1
promethazine hcl suppos 12.5 mg	2
promethazine hcl suppos 25 mg	2
promethazine hcl tab 12.5 mg	1
promethazine hcl tab 25 mg	1
promethazine hcl tab 50 mg	1
promethegan sup 12.5mg	2

Drug Name	Drug Tier	Requirements/Limits
<i>promethegan sup 25mg</i>	2	
<i>promethegan sup 50mg</i>	2	
ANTI HISTAMINES - PIPERIDINES		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL TAB 180MG	2	ST, PA
ANGIOPOIETIN-LIKE PROTEIN INHIBITORS		
EVKEEZA INJ 345/2.3	6	SP, PA, QL
EVKEEZA INJ 1200/8	6	SP, PA, QL
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	PV
NEXLIZET TAB 180/10MG	2	ST, PA
OMEGA-3/D-3 KIT WELLNESS	NC	
ROSZET TAB 5-10MG	NC	
ROSZET TAB 10-10MG	NC	
ROSZET TAB 20-10MG	NC	
ROSZET TAB 40-10MG	NC	
SURE RESULT KIT O3D3 SYS	NC	
VYTORIN TAB 10-10MG	3	PV
VYTORIN TAB 10-20MG	3	PV
VYTORIN TAB 10-40MG	3	PV
VYTORIN TAB 10-80MG	3	PV
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl cap 0.5 gm</i>	NC	
<i>icosapent ethyl cap 1 gm</i>	NC	
LOVAZA CAP 1GM	NC	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA; PV
VASCEPA CAP 0.5GM	1	PA; PV
VASCEPA CAP 1GM	1	PA; PV
BILE ACID SEQUESTRANTS		
<i>cholestyramine light powder 4 gm/dose</i>	1	PV
<i>cholestyramine light powder packets 4 gm</i>	1	PV
<i>cholestyramine powder 4 gm/dose</i>	1	PV
<i>cholestyramine powder packets 4 gm</i>	1	PV
<i>colesevelam hcl packet for susp 3.75 gm</i>	2	PV
<i>colesevelam hcl tab 625 mg</i>	1	PV
COLESTID GRA 5GM	3	PV

Drug Name	Drug Tier	Requirements/Limits
COLESTID TAB 1GM	3	PV
<i>colestipol hcl granule packets 5 gm</i>	1	PV
<i>colestipol hcl granules 5 gm</i>	1	PV
<i>colestipol hcl tab 1 gm</i>	1	PV
<i>prevalite pow 4gm</i>	1	PV
<i>prevalite pow 4gm pk</i>	1	PV
QUESTRAN POW 4GM	3	PV
QUESTRAN POW 4GM LITE	3	PV
WELCHOL PAK 3.75GM	3	PV
WELCHOL TAB 625MG	3	PV

FIBRIC ACID DERIVATIVES

ANTARA CAP 30MG	3	ST; PV
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	PV
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	PV
<i>fenofibrate cap 50 mg</i>	NC	
<i>fenofibrate cap 150 mg</i>	1	PV
<i>fenofibrate micronized cap 30 mg</i>	NC	
<i>fenofibrate micronized cap 43 mg</i>	1	PV
<i>fenofibrate micronized cap 67 mg</i>	1	PV
<i>fenofibrate micronized cap 90 mg</i>	NC	
<i>fenofibrate micronized cap 130 mg</i>	NC	
<i>fenofibrate micronized cap 134 mg</i>	1	PV
<i>fenofibrate micronized cap 200 mg</i>	1	PV
<i>fenofibrate tab 40 mg</i>	NC	
<i>fenofibrate tab 48 mg</i>	1	PV
<i>fenofibrate tab 54 mg</i>	1	PV
<i>fenofibrate tab 120 mg</i>	NC	
<i>fenofibrate tab 145 mg</i>	1	PV
<i>fenofibrate tab 160 mg</i>	1	PV
<i>fenofibric acid tab 35 mg</i>	1	PV
FENOGLIDE TAB 40MG	3	PV
FENOGLIDE TAB 120MG	NC	
FIBRICOR TAB 35MG	3	PV
FIBRICOR TAB 105MG	3	PV
<i>gemfibrozil tab 600 mg</i>	1	PV
LIPOFEN CAP 50MG	3	PV
LIPOFEN CAP 150MG	3	PV
LOPID TAB 600MG	3	PV
TRICOR TAB 48MG	NC	
TRICOR TAB 145MG	NC	
TRILIPIX CAP 45MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
TRILIPIX CAP 135MG	3	PV
HMG COA REDUCTASE INHIBITORS		
ADVICOR TAB 500-20MG	NC	
ADVICOR TAB 750-20MG	NC	
ADVICOR TAB 1000-20	NC	
ADVICOR TAB 1000-40	NC	
ALTOPREV TAB 20MG ER	NC	
ALTOPREV TAB 40MG ER	NC	
ALTOPREV TAB 60MG ER	NC	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	0	ACA, PV
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	PV
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	PV
CRESTOR TAB 5MG	NC	
CRESTOR TAB 10MG	NC	
CRESTOR TAB 20MG	NC	
CRESTOR TAB 40MG	NC	
EZALLOR SPR CAP 5MG	NC	
EZALLOR SPR CAP 10MG	NC	
EZALLOR SPR CAP 20MG	NC	
EZALLOR SPR CAP 40MG	NC	
FLOLIPID SUS 20MG/5ML	NC	
FLOLIPID SUS 40MG/5ML	NC	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	0	ACA, PV
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	0	ACA, PV
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	0	ACA, PV
LESCOL XL TAB 80MG	NC	
LIPITOR TAB 10MG	NC	
LIPITOR TAB 20MG	NC	
LIPITOR TAB 40MG	NC	
LIPITOR TAB 80MG	NC	
LIVALO TAB 1MG	NC	
LIVALO TAB 2MG	NC	
LIVALO TAB 4MG	NC	
<i>lovastatin tab 10 mg</i>	0	ACA, PV
<i>lovastatin tab 20 mg</i>	0	ACA, PV
<i>lovastatin tab 40 mg</i>	0	ACA, PV
<i>pitavastatin calcium tab 1 mg</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>pitavastatin calcium tab 2 mg</i>	0	ACA, PV
<i>pitavastatin calcium tab 4 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 10 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 20 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 40 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 80 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 5 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 10 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 20 mg</i>	1	PV
<i>rosuvastatin calcium tab 40 mg</i>	1	PV
SIMVASTATIN SUS 20MG/5ML	NC	
<i>simvastatin tab 5 mg</i>	0	ACA, PV
<i>simvastatin tab 10 mg</i>	0	ACA, PV
<i>simvastatin tab 20 mg</i>	0	ACA, PV
<i>simvastatin tab 40 mg</i>	0	ACA, PV
<i>simvastatin tab 80 mg</i>	1	PV
ZOCOR TAB 10MG	3	PV
ZOCOR TAB 20MG	3	PV
ZOCOR TAB 40MG	3	PV
ZYPITAMAG TAB 1MG	NC	
ZYPITAMAG TAB 2MG	NC	
ZYPITAMAG TAB 4MG	NC	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	PV
ZETIA TAB 10MG	NC	
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
JUXTAPID CAP 5MG	NC	
JUXTAPID CAP 10MG	NC	
JUXTAPID CAP 20MG	NC	
JUXTAPID CAP 30MG	NC	
NICOTINIC ACID DERIVATIVES		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	NC	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	PV
<i>niacor tab 500mg</i>	NC	
NIASPAN TAB 1000 ER	3	PV
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
LEQVIO SOL	NC	
PRALUENT INJ 75MG/ML	NC	
PRALUENT INJ 150MG/ML	NC	
REPATHA INJ 140MG/ML	2	PA, QL; PV

Drug Name	Drug Tier	Requirements/Limits
REPATHA PUSH INJ 420/3.5	2	PA, QL; PV
REPATHA SURE INJ 140MG/ML	2	PA, QL; PV

ANTIHYPERTENSIVES

ACE INHIBITORS

ACCUPRIL TAB 5MG	3	PV
ACCUPRIL TAB 10MG	3	PV
ACCUPRIL TAB 20MG	3	PV
ACCUPRIL TAB 40MG	3	PV
ALTACE CAP 1.25MG	3	PV
ALTACE CAP 2.5MG	3	PV
ALTACE CAP 5MG	3	PV
ALTACE CAP 10MG	3	PV
<i>benazepril hcl tab 5 mg</i>	1	PV
<i>benazepril hcl tab 10 mg</i>	1	PV
<i>benazepril hcl tab 20 mg</i>	1	PV
<i>benazepril hcl tab 40 mg</i>	1	PV
<i>captopril tab 12.5 mg</i>	1	PV
<i>captopril tab 25 mg</i>	1	PV
<i>captopril tab 50 mg</i>	1	PV
<i>captopril tab 100 mg</i>	1	PV
<i>enalapril maleate oral soln 1 mg/ml</i>	2	PV
<i>enalapril maleate tab 2.5 mg</i>	1	PV
<i>enalapril maleate tab 5 mg</i>	1	PV
<i>enalapril maleate tab 10 mg</i>	1	PV
<i>enalapril maleate tab 20 mg</i>	1	PV
<i>enalaprilat iv soln 1.25 mg/ml</i>	1	
EPANED SOL 1MG/ML	NC	
<i>fosinopril sodium tab 10 mg</i>	1	PV
<i>fosinopril sodium tab 20 mg</i>	1	PV
<i>fosinopril sodium tab 40 mg</i>	1	PV
<i>lisinopril tab 2.5 mg</i>	1	PV
<i>lisinopril tab 5 mg</i>	1	PV
<i>lisinopril tab 10 mg</i>	1	PV
<i>lisinopril tab 20 mg</i>	1	PV
<i>lisinopril tab 30 mg</i>	1	PV
<i>lisinopril tab 40 mg</i>	1	PV
LOTENSIN TAB 10MG	3	PV
LOTENSIN TAB 20MG	3	PV
LOTENSIN TAB 40MG	3	PV
<i>moexipril hcl tab 7.5 mg</i>	1	PV
<i>moexipril hcl tab 15 mg</i>	1	PV
<i>perindopril erbumine tab 2 mg</i>	1	PV
<i>perindopril erbumine tab 4 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>perindopril erbumine tab 8 mg</i>	1	PV
QBRELIS SOL 1MG/ML	3	PV
<i>quinapril hcl tab 5 mg</i>	1	PV
<i>quinapril hcl tab 10 mg</i>	1	PV
<i>quinapril hcl tab 20 mg</i>	1	PV
<i>quinapril hcl tab 40 mg</i>	1	PV
<i>ramipril cap 1.25 mg</i>	1	PV
<i>ramipril cap 2.5 mg</i>	1	PV
<i>ramipril cap 5 mg</i>	1	PV
<i>ramipril cap 10 mg</i>	1	PV
<i>trandolapril tab 1 mg</i>	1	PV
<i>trandolapril tab 2 mg</i>	1	PV
<i>trandolapril tab 4 mg</i>	1	PV
VASOTEC TAB 2.5MG	3	PV
VASOTEC TAB 5MG	3	PV
VASOTEC TAB 10MG	3	PV
VASOTEC TAB 20MG	3	PV
ZESTRIL TAB 2.5MG	3	PV
ZESTRIL TAB 5MG	3	PV
ZESTRIL TAB 10MG	3	PV
ZESTRIL TAB 20MG	3	PV
ZESTRIL TAB 30MG	3	PV
ZESTRIL TAB 40MG	3	PV
AGENTS FOR PHEOCHROMOCYTOMA		
DEMSEER CAP 250MG	3	PA
DIBENZYLINE CAP 10MG	3	
<i>metirosine cap 250 mg</i>	1	PA
<i>phenoxybenzamine hcl cap 10 mg</i>	2	
<i>phentolamine mesylate for inj 5 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND TAB 4MG	NC	
ATACAND TAB 8MG	NC	
ATACAND TAB 16MG	NC	
ATACAND TAB 32MG	NC	
AVAPRO TAB 75MG	3	PV
AVAPRO TAB 150MG	3	PV
AVAPRO TAB 300MG	3	PV
BENICAR TAB 5MG	NC	
BENICAR TAB 20MG	NC	
BENICAR TAB 40MG	NC	
<i>candesartan cilexetil tab 4 mg</i>	1	PV
<i>candesartan cilexetil tab 8 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>candesartan cilexetil tab 16 mg</i>	1	PV
<i>candesartan cilexetil tab 32 mg</i>	1	PV
COZAAR TAB 25MG	NC	
COZAAR TAB 50MG	NC	
COZAAR TAB 100MG	NC	
DIOVAN TAB 40MG	NC	
DIOVAN TAB 80MG	NC	
DIOVAN TAB 160MG	NC	
DIOVAN TAB 320MG	NC	
EDARBI TAB 40MG	NC	
EDARBI TAB 80MG	NC	
<i>irbesartan tab 75 mg</i>	1	PV
<i>irbesartan tab 150 mg</i>	1	PV
<i>irbesartan tab 300 mg</i>	1	PV
<i>losartan potassium tab 25 mg</i>	1	PV
<i>losartan potassium tab 50 mg</i>	1	PV
<i>losartan potassium tab 100 mg</i>	1	PV
MICARDIS TAB 20MG	NC	
MICARDIS TAB 40MG	NC	
MICARDIS TAB 80MG	NC	
<i>olmesartan medoxomil tab 5 mg</i>	1	PV
<i>olmesartan medoxomil tab 20 mg</i>	1	PV
<i>olmesartan medoxomil tab 40 mg</i>	1	PV
<i>telmisartan tab 20 mg</i>	1	PV
<i>telmisartan tab 40 mg</i>	1	PV
<i>telmisartan tab 80 mg</i>	1	PV
<i>valsartan oral soln 4 mg/ml</i>	NC	
<i>valsartan tab 40 mg</i>	1	PV
<i>valsartan tab 80 mg</i>	1	PV
<i>valsartan tab 160 mg</i>	1	PV
<i>valsartan tab 320 mg</i>	1	PV

ANTIADRENERGIC ANTIHYPERTENSIVES

CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
CATAPRES-TTS DIS 0.1/24HR	3	PV
CATAPRES-TTS DIS 0.2/24HR	3	PV
CATAPRES-TTS DIS 0.3/24HR	3	PV
<i>clonidine hcl tab 0.1 mg</i>	1	PV
<i>clonidine hcl tab 0.2 mg</i>	1	PV
<i>clonidine hcl tab 0.3 mg</i>	1	PV
<i>clonidine tab er 24hr 0.17 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	PV
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	PV
<i>guanfacine hcl tab 2 mg</i>	1	PV
<i>methyldopa tab 250 mg</i>	2	
MINIPRESS CAP 1MG	3	
NEXICLON XR TAB 0.17MG	NC	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	

ANTIHYPERTENSIVE COMBINATIONS

ACCURETIC TAB 10-12.5	3	PV
ACCURETIC TAB 20-12.5	3	PV
ACCURETIC TAB 20-25MG	3	PV
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	2	PV
ATACAND HCT TAB 16-12.5	NC	
ATACAND HCT TAB 32-12.5	NC	
ATACAND HCT TAB 32-25MG	NC	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	PV
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	PV
AVALIDE TAB 150-12.5	3	PV
AVALIDE TAB 300-12.5	3	PV
AZOR TAB 5-20MG	NC	
AZOR TAB 5-40MG	NC	
AZOR TAB 10-20MG	NC	
AZOR TAB 10-40MG	NC	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	PV
BENICAR HCT TAB 20-12.5	NC	
BENICAR HCT TAB 40-12.5	NC	
BENICAR HCT TAB 40-25MG	NC	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	PV
DIOVAN HCT TAB 80-12.5	NC	
DIOVAN HCT TAB 160-12.5	NC	
DIOVAN HCT TAB 160-25MG	NC	
DIOVAN HCT TAB 320-12.5	NC	
DIOVAN HCT TAB 320-25MG	NC	
DUTOPROL TAB 25-12.5	NC	
DUTOPROL TAB 50-12.5	NC	
DUTOPROL TAB 100-12.5	NC	
EDARBYCLOR TAB 40-12.5	NC	
EDARBYCLOR TAB 40-25MG	NC	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	PV
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	PV
EXFORGE TAB 5-160MG	NC	
EXFORGE TAB 5-320MG	NC	
EXFORGE TAB 10-160MG	NC	
EXFORGE TAB 10-320MG	NC	
EXFORGEH/5- TAB 160-12.5	NC	
EXFORGEH/5- TAB 160-25	NC	
EXFORGEH/10- TAB 160-12.5	NC	
EXFORGEH/10- TAB 160-25	NC	
EXFORGEH/10- TAB 320-25	NC	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
HYZAAR TAB 50-12.5	NC	
HYZAAR TAB 100-12.5	NC	
HYZAAR TAB 100-25	NC	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	PV
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
LOTENSIN HCT TAB 10-12.5	3	PV
LOTENSIN HCT TAB 20-12.5	3	PV
LOTENSIN HCT TAB 20-25MG	3	PV
LOTREL CAP 5-10MG	3	PV
LOTREL CAP 5-20MG	3	PV
LOTREL CAP 10-20MG	3	PV
LOTREL CAP 10-40MG	3	PV
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	PV
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	PV
MICARDIS HCT TAB 40/12.5	NC	
MICARDIS HCT TAB 80-25MG	NC	
MICARDIS HCT TAB 80/12.5	NC	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	PV
PRESTALIA TAB 3.5-2.5	NC	
PRESTALIA TAB 7-5MG	NC	
PRESTALIA TAB 14-10MG	NC	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	PV
TEKTURN HCT TAB 150-12.5	2	PV
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	PV
TENORETIC TAB 50	3	PV
TENORETIC TAB 100	3	PV
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	2	PV
TRIBENZOR20- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-25MG	3	PV
TRIBENZOR40- TAB 10-12.5	3	PV
TRIBENZOR40- TAB 10-25MG	3	PV
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	PV
VASERETIC TAB 10-25MG	3	PV
ZESTORETIC TAB 10-12.5	NC	
ZESTORETIC TAB 20-12.5	NC	
ZESTORETIC TAB 20-25MG	NC	
ZIAC TAB 2.5/6.25	3	
ZIAC TAB 5-6.25MG	3	
ZIAC TAB 10/6.25	3	
ANTIHYPERTENSIVES - MISC.		
VECAMYL TAB 2.5MG	3	PV
DIRECT RENIN INHIBITORS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	PV
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	PV
TEKTURN TAB 150MG	3	PV
TEKTURN TAB 300MG	3	PV
ENDOTHELIN RECEPTOR ANTAGONISTS		
TRYVIO TAB 12.5MG	3	PA
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>epplerenone tab 25 mg</i>	1	
<i>epplerenone tab 50 mg</i>	1	
INSPIRA TAB 25MG	3	
INSPIRA TAB 50MG	3	
VASODILATORS		
<i>hydralazine hcl inj 20 mg/ml</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>hydralazine hcl tab 25 mg</i>	1	PV
<i>hydralazine hcl tab 50 mg</i>	1	PV
<i>hydralazine hcl tab 100 mg</i>	1	PV
<i>minoxidil tab 2.5 mg</i>	1	PV
<i>minoxidil tab 10 mg</i>	1	PV
NIPRIDE RTU INJ 20/100ML	NC	
NIPRIDE RTU INJ 50/100ML	NC	
<i>nitroprusside sodium iv soln 25 mg/ml</i>	1	

ANTIMALARIALS

ANTIMALARIAL COMBINATIONS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	PV
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	PV
COARTEM TAB 20-120MG	3	
MALARONE TAB 62.5-25	3	PV
MALARONE TAB 250-100	3	PV

ANTIMALARIALS

ARAKODA TAB 100MG	NC	
ARTESUNATE SOL 110MG	3	
<i>chloroquine phosphate tab 250 mg</i>	1	PV
<i>chloroquine phosphate tab 500 mg</i>	1	PV
DARAPRIM TAB 25MG	NC	
<i>hydroxychloroquine sulfate tab 100 mg</i>	3	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>hydroxychloroquine sulfate tab 300 mg</i>	3	
<i>hydroxychloroquine sulfate tab 400 mg</i>	3	
KRINTAFEL TAB 150MG	NC	
<i>mefloquine hcl tab 250 mg</i>	1	PV
PLAQUENIL TAB 200MG	3	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	PV
PRIMAQUINE TAB 26.3MG	3	PV
<i>pyrimethamine tab 25 mg</i>	2	
QUALAQUIN CAP 324MG	3	
<i>quinine sulfate cap 324 mg</i>	1	
SOVUNA TAB 200MG	NC	
SOVUNA TAB 300MG	NC	

ANTIMYASTHENIC/CHOLINERGIC AGENTS

ANTIMYASTHENIC/CHOLINERGIC AGENTS

BLOXIVERZ INJ 5MG/10ML	3	
BLOXIVERZ INJ 10/10ML	3	
FIRDAPSE TAB 10MG	6	SP, PA, QL
MESTINON SOL 60MG/5ML	3	

Drug Name	Drug Tier	Requirements/Limits
MESTINON TAB 60MG	3	
MESTINON TAB TIMESPAN	3	
NEOSTIG METH INJ 5MG/10ML	3	
NEOSTIG METH INJ 10/10ML	3	
<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i>	1	
<i>neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)</i>	1	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	2	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	2	
REGONOL INJ 5MG/ML	3	

ANTIMYCOBACTERIAL AGENTS

ANTIMYCOBACTERIAL AGENTS

<i>cycloserine cap 250 mg</i>	1	
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid inj 100 mg/ml</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
PASER GRA 4GM	3	
PRETOMANID TAB 200MG	3	
PRIFTIN TAB 150MG	3	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	2	
RIFADIN INJ 600 MG	3	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin for inj 600 mg</i>	1	
SIRTURO TAB 20MG	3	
SIRTURO TAB 100MG	3	
TRECATOR TAB 250MG	3	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

ALKERAN TAB 2MG	3	
BELRAPZO SOL 100/4ML	NC	SP
BENDEKA INJ 100/4ML	6	SP, PA
<i>busulfan inj 6 mg/ml</i>	1	
BUSULFEX INJ 6MG/ML	3	
<i>carboplatin iv soln 50 mg/5ml</i>	1	
<i>carboplatin iv soln 150 mg/15ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits	
<i>carboplatin iv soln 450 mg/45ml</i>	1		
<i>carboplatin iv soln 600 mg/60ml</i>	1		
<i>carmustine for inj 100 mg</i>	1		
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	1		
CISPLATIN INJ 50MG	3		
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	1		
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	1		
CYCLOPHOSPH INJ 1GM	3		
CYCLOPHOSPH INJ 1GM/2ML	3		
CYCLOPHOSPH INJ 2GM/4ML	3		
CYCLOPHOSPH INJ 500/5ML	3		
CYCLOPHOSPH INJ 1000MG	3		
CYCLOPHOSPH INJ 2000MG	3		
CYCLOPHOSPH TAB 25MG	3		
CYCLOPHOSPH TAB 50MG	3		
CYCLOPHOSPHA INJ 2GM/10ML	3		
CYCLOPHOSPHA INJ 500MG	3		
<i>cyclophosphamide cap 25 mg</i>	2		
<i>cyclophosphamide cap 50 mg</i>	2		
<i>cyclophosphamide for inj 1 gm</i>	1		
<i>cyclophosphamide for inj 2 gm</i>	1		
<i>cyclophosphamide for inj 500 mg</i>	1		
<i>cyclophosphamide iv soln 500 mg/2.5ml (200 mg/ml)</i>	1		
EVOMELA INJ 50MG	NC	SP	
GLEOSTINE CAP 10MG	5	SP	
GLEOSTINE CAP 40MG	5	SP	
GLEOSTINE CAP 100MG	5	SP	
GLIADEL WAF 7.7MG	3		
GRAFAPEX INJ 1GM	NC	SP	
GRAFAPEX INJ 5GM	NC	SP	
IFEX INJ 1GM	3		
IFEX INJ 3GM	3		
<i>ifosfamide for inj 1 gm</i>	1		
IFOSFAMIDE INJ 3GM	3		
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	1		
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	1		
IVRA INJ 90MG/ML	NC		
LEUKERAN TAB 2MG	3		
<i>melphalan hcl for inj 50 mg (base equiv)</i>	1		
<i>melphalan tab 2 mg</i>	2		
MYLERAN TAB 2MG	3		
<i>oxaliplatin for iv inj 50 mg</i>	1		

Drug Name	Drug Tier	Requirements/Limits
<i>oxaliplatin for iv inj 100 mg</i>	1	
<i>oxaliplatin iv soln 50 mg/10ml</i>	1	
<i>oxaliplatin iv soln 100 mg/20ml</i>	1	
<i>oxaliplatin iv soln 200 mg/40ml</i>	1	
<i>paraplatin inj 50mg/5ml</i>	1	
<i>paraplatin inj 150/15ml</i>	1	
<i>paraplatin inj 1000mg</i>	1	
PEPAXTO INJ 20MG	NC	
TEMODAR CAP 250MG	6	SP, ST, PA
TEMODAR INJ 100MG	6	SP, ST, PA
<i>temozolomide cap 5 mg</i>	4	SP, PA
<i>temozolomide cap 20 mg</i>	4	SP, PA
<i>temozolomide cap 100 mg</i>	4	SP, PA
<i>temozolomide cap 140 mg</i>	4	SP, PA
<i>temozolomide cap 180 mg</i>	4	SP, PA
<i>temozolomide cap 250 mg</i>	4	SP, PA
TEPADINA INJ 15MG	6	SP, PA
TEPADINA INJ 100MG	6	SP, PA
<i>thiotepa for inj 15 mg</i>	4	SP, PA
<i>thiotepa for inj 100 mg</i>	4	SP, PA
TREANDA INJ 25MG	6	SP, PA
TREANDA INJ 100MG	6	SP, PA
VIVIMUSTA INJ 100/4ML	NC	SP
YONDELIS INJ 1MG	6	SP
ZANOSAR INJ 1GM	3	
ANTIMETABOLITES		
ALIMTA INJ 100MG	NC	SP
ALIMTA INJ 500MG	NC	SP
ARRANON INJ 5MG/ML	3	
<i>azacitidine for inj 100 mg</i>	4	SP, PA
<i>capecitabine tab 150 mg</i>	4	SP, PA, QL
<i>capecitabine tab 500 mg</i>	4	SP, PA, QL
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>clofarabine iv soln 1 mg/ml</i>	1	
<i>cytarabine inj 20 mg/ml</i>	1	
<i>cytarabine inj pf 20 mg/ml</i>	1	
<i>cytarabine inj pf 100 mg/ml</i>	1	
<i>decitabine for inj 50 mg</i>	4	SP, PA, QL
<i>floxuridine for inj 0.5 gm</i>	1	
<i>fludarabine phosphate for inj 50 mg</i>	1	
<i>fludarabine phosphate inj 25 mg/ml</i>	1	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	1	
FOLOTYN INJ 20MG/ML	6	SP, PA
FOLOTYN INJ 40MG/2ML	6	SP, PA
<i>gemcitabine hcl for inj 1 gm</i>	1	
<i>gemcitabine hcl for inj 2 gm</i>	1	
<i>gemcitabine hcl for inj 200 mg</i>	1	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml)</i> <i>(base equiv)</i>	1	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml)</i> <i>(base equiv)</i>	1	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml)</i> <i>(base equiv)</i>	1	
GEMCITABINE INJ 1.5GM/15	3	
GEMCITABINE INJ 1GM	3	
GEMCITABINE INJ 1GM/10ML	3	
GEMCITABINE INJ 2GM	3	
GEMCITABINE INJ 2GM/20ML	3	
GEMCITABINE INJ 200MG	3	
INFUGEM SOL 1200MG	NC	SP
INFUGEM SOL 1300MG	NC	SP
INFUGEM SOL 1400MG	NC	SP
INFUGEM SOL 1500MG	NC	SP
INFUGEM SOL 1600MG	NC	SP
INFUGEM SOL 1700MG	NC	SP
INFUGEM SOL 1800MG	NC	SP
INFUGEM SOL 2000MG	NC	SP
INFUGEM SOL 2200MG	NC	SP
JYLAMVO SOL 2MG/ML	NC	SP
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	4	SP, PA
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nelarabine iv soln 5 mg/ml</i>	1	
ONUREG TAB 200MG	6	SP, PA, QL
ONUREG TAB 300MG	6	SP, PA, QL
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i>	1	
PEMETREXED INJ 850/34ML	NC	
PEMETREXED SOL 1GM/40ML	NC	
PEMETREXED SOL 100/4ML	NC	
PEMETREXED SOL 500/20ML	NC	
PEMFEXY SOL 500/20ML	NC	
PURIXAN SUS 20MG/ML	6	SP, PA
TABLOID TAB 40MG	3	
TREXALL TAB 5MG	2	
TREXALL TAB 7.5MG	2	
TREXALL TAB 10MG	2	
TREXALL TAB 15MG	2	
VIDAZA INJ 100MG	6	SP, PA
XATMEP SOL 2.5MG/ML	3	
XELODA TAB 150MG	6	SP, ST, PA, QL
XELODA TAB 500MG	6	SP, ST, PA, QL

ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS

ALYMSYS SOL 100/4ML	NC	SP
ALYMSYS SOL 400/16ML	NC	SP
AVASTIN INJ	NC	SP
AVASTIN INJ 400/16ML	NC	SP
CYRAMZA INJ 100/10ML	6	SP, PA
CYRAMZA INJ 500/50ML	6	SP, PA
FRUZAQLA CAP 1MG	NC	SP
FRUZAQLA CAP 5MG	NC	SP
INLYTA TAB 1MG	5	SP, PA, QL
INLYTA TAB 5MG	5	SP, PA, QL
LENVIMA CAP 4MG	5	SP, PA, QL
LENVIMA CAP 8 MG	5	SP, PA, QL
LENVIMA CAP 10 MG	5	SP, PA, QL
LENVIMA CAP 12MG	5	SP, PA, QL
LENVIMA CAP 14 MG	5	SP, PA, QL
LENVIMA CAP 18 MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
LENVIMA CAP 20 MG	5	SP, PA, QL
LENVIMA CAP 24 MG	5	SP, PA, QL
MVASI INJ 100MG	NC	SP
MVASI INJ 400MG	NC	SP
VEGZELMA SOL 100/4ML	NC	SP
VEGZELMA SOL 400/16ML	NC	SP
ZALTRAP INJ 100/4ML	6	SP, PA
ZALTRAP INJ 200/8ML	6	SP, PA
ZIRABEV INJ 100/4ML	4	SP, PA
ZIRABEV INJ 400/16ML	4	SP, PA

ANTINEOPLASTIC - ANTI-HER2 AGENTS

HERCEPTIN INJ 150MG	NC	SP
HERZUMA INJ 150MG	NC	SP
HERZUMA INJ 420MG	NC	SP
KANJINTI INJ 420MG	5	SP, PA
KANJINTI SOL 150MG	5	SP, PA
OGIVRI INJ 150MG	5	SP, PA
OGIVRI INJ 420MG	5	SP, PA
ONTRUZANT INJ 150MG	NC	SP
ONTRUZANT INJ 420MG	NC	SP
PERJETA INJ 420/14ML	5	SP, PA
TRAZIMERA INJ 150MG	5	SP, PA
TRAZIMERA INJ 420MG	5	SP, PA
TUKYSA TAB 50MG	6	SP, PA, QL
TUKYSA TAB 150MG	6	SP, PA, QL

ANTINEOPLASTIC - ANTIBODIES

ADCETRIS INJ 50MG	6	SP, PA
ARZERRA CON 100/5ML	6	SP, PA
BAVENCIO INJ 20MG/ML	6	SP, PA
BESPONSA INJ 0.9MG	6	SP, PA
BIZENGRI INJ 750 DOSE	NC	SP
BLINCYTO INJ 35MCG	6	SP, PA
COLUMVI INJ 2.5MG	NC	SP
COLUMVI INJ 10/10ML	NC	SP
DARZALEX SOL 100/5ML	6	PA
DARZALEX SOL 400/20ML	6	PA
DARZALEX SOL 400MG/20	6	SP, PA
ELAHERE INJ 5MG/ML	6	SP, PA
ELREXFIO INJ 44/1.1ML	NC	SP
ELREXFIO INJ 76/1.9ML	NC	SP
EMPLICITI INJ 300MG	6	SP, PA
EMPLICITI INJ 400MG	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ENHERTU INJ 100MG	6	SP, PA
GAZYVA INJ 25MG/ML	6	SP, PA
IMDELLTRA INJ 1MG	6	SP, PA
IMDELLTRA INJ 10MG	6	SP, PA
IMFINZI INJ 120/2.4	6	SP, PA
IMFINZI INJ 500/10	6	SP, PA
IMJUDO INJ 25/1.25	6	SP, PA
IMJUDO INJ 300/15ML	6	SP, PA
JEMPERLI SOL 500/10ML	NC	SP
KADCYLA INJ 100MG	6	SP, PA
KADCYLA INJ 160MG	6	SP, PA
KEYTRUDA INJ 100MG/4M	6	SP, PA
KIMMTRAK SOL 100MCG	6	SP, PA, QL
LIBTAYO INJ 350/7ML	6	SP, PA, QL
LUNSUMIO INJ 1MG/ML	NC	SP
LUNSUMIO INJ 30MG/30	NC	SP
MONJUVI INJ 200MG	NC	SP
MYLOTARG INJ 4.5MG	6	SP, PA
OPDIVO INJ 40MG/4ML	6	SP, PA
OPDIVO INJ 100/10ML	6	SP, PA
OPDIVO INJ 120/12ML	6	SP, PA
OPDIVO INJ 240/24ML	6	SP, PA
PADCEV INJ 20MG	6	SP, PA, QL
PADCEV INJ 30MG	6	SP, PA, QL
POLIVY INJ 30MG	6	SP, PA
POLIVY INJ 140MG	6	SP, PA
POTELIGEO INJ 20MG/5ML	6	SP, PA
RITUXAN INJ 100MG	NC	SP
RITUXAN INJ 500MG	NC	SP
RUXIENCE INJ 100/10ML	4	SP, PA
RUXIENCE INJ 500/50ML	4	SP, PA
SARCLISA SOL 100/5ML	6	SP, PA
SARCLISA SOL 500/25ML	6	SP, PA
TALVEY INJ 3/1.5ML	NC	SP
TALVEY INJ 40MG/ML	NC	SP
TECENTRIQ INJ 840/14	6	SP, PA
TECENTRIQ INJ 1200/20	6	SP, PA
TEVIMBRA INJ 100/10ML	NC	SP
TIVDAK INJ 40MG	6	SP, PA, QL
TRUXIMA INJ 100/10ML	NC	SP
TRUXIMA INJ 500/50ML	NC	SP
UNITUXIN INJ	6	SP
YERVOY INJ 50/10ML	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
YERVOY INJ 200/40ML	6	SP, PA
ZEVALIN KIT Y-90	3	
ZYNLONTA SOL 10MG	NC	SP
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	6	SP, PA, QL
VENCLEXTA TAB 50MG	6	SP, PA, QL
VENCLEXTA TAB 100MG	6	SP, PA, QL
VENCLEXTA TAB START PK	6	SP, PA, QL
ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY		
AMTAGVI INJ	NC	
KYMRIAH SUS	NC	
PROVENGE INJ	NC	
YESCARTA INJ	NC	
ANTINEOPLASTIC - EGFR INHIBITORS		
ERBITUX INJ 100MG	6	SP, PA
ERBITUX INJ 200MG	6	SP, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	4	SP, PA, QL
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	4	SP, PA, QL
GILOTRIF TAB 20MG	6	SP, PA, QL
GILOTRIF TAB 30MG	6	SP, PA, QL
GILOTRIF TAB 40MG	6	SP, PA, QL
IRESSA TAB 250MG	NC	SP
PORTRAZZA INJ 800/50ML	6	SP, PA
TAGRISSE TAB 40MG	5	SP, PA, QL
TAGRISSE TAB 80MG	5	SP, PA, QL
TARCEVA TAB 100MG	6	SP, ST, PA, QL
TARCEVA TAB 150MG	6	SP, ST, PA, QL
VECTIBIX INJ 100MG	6	SP, PA
VECTIBIX INJ 400MG	6	SP, PA
VIZIMPRO TAB 15MG	NC	SP
VIZIMPRO TAB 30MG	NC	SP
VIZIMPRO TAB 45MG	NC	SP
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO TAB 25MG	NC	SP
DAURISMO TAB 100MG	NC	SP
ERIVEDGE CAP 150MG	5	SP, PA, QL
ODOMZO CAP 200MG	5	SP, PA, QL
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	4	SP, PA, QL
<i>abiraterone acetate tab 500 mg</i>	4	SP, PA, QL
<i>anastrozole tab 1 mg</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
ARIMIDEX TAB 1MG	3	PV
AROMASIN TAB 25MG	3	PV
<i>bicalutamide tab 50 mg</i>	1	
CAMCEVI INJ 42MG	NC	SP
CASODEX TAB 50MG	3	
ELIGARD INJ 7.5MG	5	SP, PA
ELIGARD INJ 22.5MG	5	SP, PA
ELIGARD INJ 30MG	5	SP, PA
ELIGARD INJ 45MG	5	SP, PA
ERLEADA TAB 60MG	5	SP, PA, QL
ERLEADA TAB 240MG	5	SP, PA, QL
<i>exemestane tab 25 mg</i>	0	ACA, PV
FARESTON TAB 60MG	3	
FASLODEX INJ 250/5ML	6	SP, PA
FEMARA TAB 2.5MG	3	PV
FIRMAGON INJ 80MG	NC	SP
FIRMAGON INJ 120MG	NC	SP
<i>flutamide cap 125 mg</i>	1	
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	4	SP, PA
<i>letrozole tab 2.5 mg</i>	1	PV
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	4	SP, PA
LUPRON DEPOT INJ 3.75MG	6	SP, PA, QL
LUPRON DEPOT INJ 7.5MG	NC	SP
LUPRON DEPOT INJ 11.25MG	6	SP, PA, QL
LUPRON DEPOT INJ 22.5MG	NC	SP
LUPRON DEPOT INJ 30MG	NC	SP
LUPRON DEPOT INJ 45MG	NC	SP
LYSODREN TAB 500MG	5	SP
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
NILANDRON TAB 150MG	NC	SP
<i>nilutamide tab 150 mg</i>	1	
NUBEQA TAB 300MG	5	SP, PA, QL
ORGOVYX TAB 120MG	6	SP, PA, QL
ORSERDU TAB 86MG	NC	SP
ORSERDU TAB 345MG	NC	SP
SOLTAMOX SOL 10MG/5ML	3	PV
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	0	ACA, PV
<i>toremifene citrate tab 60 mg (base equivalent)</i>	2	
TRELSTAR MIX INJ 3.75MG	NC	SP
TRELSTAR MIX INJ 11.25MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
TRELSTAR MIX INJ 22.5MG	NC	SP
XTANDI CAP 40MG	5	SP, PA, QL
XTANDI TAB 40MG	5	SP, PA, QL
XTANDI TAB 80MG	5	SP, PA, QL
YONSA TAB 125MG	5	SP, PA, QL
ZOLADEX IMP 3.6MG	NC	SP
ZOLADEX IMP 10.8MG	NC	SP
ZYTIGA TAB 250MG	NC	SP
ZYTIGA TAB 500MG	NC	SP
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	6	SP, PA, QL
POMALYST CAP 2MG	6	SP, PA, QL
POMALYST CAP 3MG	6	SP, PA, QL
POMALYST CAP 4MG	6	SP, PA, QL
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ TAB 25MG	NC	SP
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 40MG	6	SP, PA, QL
XPOVIO PAK 50MG	6	SP, PA, QL
XPOVIO PAK 60MG	6	SP, PA, QL
XPOVIO PAK 80MG	6	SP, PA, QL
ANTINEOPLASTIC ANTIBIOTICS		
<i>adriamycin inj 50mg</i>	1	
<i>bleomycin sulfate for inj 15 unit</i>	1	
<i>bleomycin sulfate for inj 30 unit</i>	1	
<i>dactinomycin for inj 0.5 mg</i>	1	
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	1	
<i>daunorubicin hcl iv soln 50 mg/10ml (base equiv)</i>	1	
DAUNORUBICIN INJ 20MG/4ML	3	
DAUNORUBICIN INJ 50/10ML	3	
DOXIL INJ 20/10ML	3	
DOXIL INJ 50/25ML	3	
<i>doxorubicin hcl for inj 10 mg</i>	1	
<i>doxorubicin hcl for inj 50 mg</i>	1	
<i>doxorubicin hcl inj 2 mg/ml</i>	1	
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	1	
DOXORUBICIN INJ 2MG/ML	3	
DOXORUBICIN INJ 10/5ML	3	
DOXORUBICIN INJ 10MG/5ML	3	
DOXORUBICIN INJ 20/10ML	3	

Drug Name	Drug Tier	Requirements/Limits
DOXORUBICIN INJ 50/25ML	3	
DOXORUBICIN INJ 200/100	3	
ELLENCE INJ 2MG/ML	3	
IDAMYCIN PFS INJ 5MG/5ML	3	
IDAMYCIN PFS INJ 10/10ML	3	
IDAMYCIN PFS INJ 20/20ML	3	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	1	
<i>mitomycin for iv soln 5 mg</i>	1	
<i>mitomycin for iv soln 20 mg</i>	1	
<i>mitomycin for iv soln 40 mg</i>	1	
MITOMYCIN SOL 20MG	NC	
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	4	SP, PA
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	4	SP, PA
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	4	SP, PA
<i>mutamycin inj 5mg</i>	1	
<i>mutamycin inj 20mg</i>	1	
<i>mutamycin inj 40mg</i>	1	
<i>valrubicin soln for intravesical instillation 40 mg/ml</i>	4	SP
VALSTAR SOL 40MG/ML	6	SP
ANTINEOPLASTIC COMBINATIONS		
HERCEP HYLEC SOL 60-10000	NC	SP
INQOVI TAB 35-100MG	6	SP, PA, QL
LONSURF TAB 15-6.14	5	SP, PA, QL
LONSURF TAB 20-8.19	5	SP, PA, QL
OPDIVO INJ QVANTIG	NC	SP
OPDUALAG SOL	NC	SP
PHESGO SOL	5	SP, PA
RITUXAN INJ HYCELA	6	SP, PA
VYXEOS INJ 44-100MG	6	SP, PA
ANTINEOPLASTIC ENZYME INHIBITORS		
AFINITOR DIS TAB 2MG	NC	SP
AFINITOR DIS TAB 3MG	NC	SP
AFINITOR DIS TAB 5MG	NC	SP
AFINITOR TAB 2.5MG	NC	SP
AFINITOR TAB 5MG	NC	SP
AFINITOR TAB 7.5MG	NC	SP
AFINITOR TAB 10MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
ALECENSA CAP 150MG	5	SP, PA, QL
ALIQOPA INJ 60MG	NC	SP
ALUNBRIG PAK	5	SP, PA, QL
ALUNBRIG TAB 30MG	5	SP, PA, QL
ALUNBRIG TAB 90MG	5	SP, PA, QL
ALUNBRIG TAB 180MG	5	SP, PA, QL
AUGTYRO CAP 40MG	5	SP, PA, QL
AUGTYRO CAP 160MG	5	SP, PA, QL
BALVERSA TAB 3MG	6	SP, PA, QL
BALVERSA TAB 4MG	6	SP, PA, QL
BALVERSA TAB 5MG	6	SP, PA, QL
BELEODAQ INJ 500MG	6	SP, PA
<i>bortezomib for inj 3.5 mg</i>	4	SP, PA
BORTEZOMIB INJ 3.5/1.4	NC	SP
BORTEZOMIB INJ 3.5MG	NC	SP
BOSULIF CAP 50MG	5	SP, PA, QL
BOSULIF CAP 100MG	5	SP, PA, QL
BOSULIF TAB 100MG	5	SP, PA, QL
BOSULIF TAB 400MG	5	SP, PA, QL
BOSULIF TAB 500MG	5	SP, PA, QL
BRAFTOVI CAP 75MG	5	SP, PA, QL
BRUKINSA CAP 80MG	5	SP, PA, QL
CABOMETYX TAB 20MG	5	SP, PA, QL
CABOMETYX TAB 40MG	5	SP, PA, QL
CABOMETYX TAB 60MG	5	SP, PA, QL
CALQUENCE CAP 100MG	6	SP, PA, QL
CALQUENCE TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 300MG	6	SP, PA, QL
COMETRIQ KIT 60MG	6	SP, PA, QL
COMETRIQ KIT 100MG	6	SP, PA, QL
COMETRIQ KIT 140MG	6	SP, PA, QL
COPIKTRA CAP 15MG	5	SP, PA, QL
COPIKTRA CAP 25MG	5	SP, PA, QL
COTELLIC TAB 20MG	NC	SP
<i>dasatinib tab 20 mg</i>	4	SP, PA, QL
<i>dasatinib tab 50 mg</i>	4	SP, PA, QL
<i>dasatinib tab 70 mg</i>	4	SP, PA, QL
<i>dasatinib tab 80 mg</i>	4	SP, PA, QL
<i>dasatinib tab 100 mg</i>	4	SP, PA, QL
<i>dasatinib tab 140 mg</i>	4	SP, PA, QL
<i>everolimus tab 2.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 5 mg</i>	4	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>everolimus tab 7.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 10 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 2 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 3 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 5 mg</i>	4	SP, PA, QL
FARYDAK CAP 10MG	NC	SP
FARYDAK CAP 15MG	NC	SP
FARYDAK CAP 20MG	NC	SP
FOTIVDA CAP 0.89MG	NC	SP
FOTIVDA CAP 1.34MG	NC	SP
FYARRO SUS 100MG	6	SP, PA
GAVRETO CAP 100MG	5	SP, PA, QL
GLEEVEC TAB 100MG	NC	SP
GLEEVEC TAB 400MG	NC	SP
GOMEKLI CAP 1MG	NC	SP
GOMEKLI CAP 2MG	NC	SP
GOMEKLI TAB 1MG	NC	SP
IBRANCE CAP 75MG	5	SP, PA, QL
IBRANCE CAP 100MG	5	SP, PA, QL
IBRANCE CAP 125MG	5	SP, PA, QL
IBRANCE TAB 75MG	5	SP, PA, QL
IBRANCE TAB 100MG	5	SP, PA, QL
IBRANCE TAB 125MG	5	SP, PA, QL
ICLUSIG TAB 10MG	NC	SP
ICLUSIG TAB 15MG	NC	SP
ICLUSIG TAB 30MG	NC	SP
ICLUSIG TAB 45MG	NC	SP
IDHIFA TAB 50MG	6	SP, PA, QL
IDHIFA TAB 100MG	6	SP, PA, QL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	4	SP, PA
IMBRUVICA CAP 70MG	NC	SP
IMBRUVICA CAP 140MG	NC	SP
IMBRUVICA SUS 70MG/ML	NC	SP
IMBRUVICA TAB 140MG	NC	SP
IMBRUVICA TAB 280MG	NC	SP
IMBRUVICA TAB 420MG	NC	SP
IMBRUVICA TAB 560MG	NC	SP
INREBIC CAP 100MG	NC	SP
ISTODAX INJ 10MG	6	SP, PA
ITOVEBI TAB 3MG	6	SP, PA, QL
ITOVEBI TAB 9MG	6	SP, PA, QL
JAKAFI TAB 5MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
JAKAFI TAB 10MG	NC	SP
JAKAFI TAB 15MG	NC	SP
JAKAFI TAB 20MG	NC	SP
JAKAFI TAB 25MG	NC	SP
JAYPIRCA TAB 50MG	NC	SP
JAYPIRCA TAB 100MG	NC	SP
KISQALI TAB 200DOSE	5	SP, PA, QL
KISQALI TAB 400DOSE	5	SP, PA, QL
KISQALI TAB 600DOSE	5	SP, PA, QL
KOSELUGO CAP 10MG	6	SP, PA, QL
KOSELUGO CAP 25MG	6	SP, PA, QL
KRAZATI TAB 200MG	5	SP, PA, QL
KYPROLIS SOL 10MG	NC	SP
KYPROLIS SOL 30MG	NC	SP
KYPROLIS SOL 60MG	NC	SP
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	4	SP, PA, QL
LORBRENA TAB 25MG	6	SP, PA, QL
LORBRENA TAB 100MG	6	SP, PA, QL
LUMAKRAS TAB 120MG	5	SP, PA, QL
LUMAKRAS TAB 240MG	5	SP, PA, QL
LUMAKRAS TAB 320MG	5	SP, PA, QL
LYNPARZA TAB 100MG	5	SP, PA, QL
LYNPARZA TAB 150MG	5	SP, PA, QL
LYTGOBI TAB 4MG	NC	SP
MEKINIST SOL 0.05/ML	5	SP, PA, QL
MEKINIST TAB 0.5MG	5	SP, PA, QL
MEKINIST TAB 2MG	5	SP, PA, QL
MEKTOVI TAB 15MG	5	SP, PA, QL
NERLYNX TAB 40MG	6	SP, PA, QL
NEXAVAR TAB 200MG	NC	SP
NINLARO CAP 2.3MG	5	SP, PA, QL
NINLARO CAP 3MG	5	SP, PA, QL
NINLARO CAP 4MG	5	SP, PA, QL
OGSIVEO TAB 100MG	NC	SP
<i>pazopanib hcl tab 200 mg (base equiv)</i>	4	SP, PA, QL
PEMAZYRE TAB 4.5MG	NC	SP
PEMAZYRE TAB 9MG	NC	SP
PEMAZYRE TAB 13.5MG	NC	SP
PIQRAY 200MG TAB DOSE	5	SP, PA, QL
PIQRAY 250MG TAB DOSE	5	SP, PA, QL
PIQRAY 300MG TAB DOSE	5	SP, PA, QL
QINLOCK TAB 50MG	NC	SP
RETEVMO CAP 40MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
RETEVMO CAP 80MG	5	SP, PA, QL
RETEVMO TAB 40MG	5	SP, PA, QL
RETEVMO TAB 80MG	5	SP, PA, QL
RETEVMO TAB 120MG	5	SP, PA, QL
RETEVMO TAB 160MG	5	SP, PA, QL
<i>romidepsin for iv inj 10 mg</i>	4	SP, PA
ROMVIMZA CAP 14MG	NC	SP
ROMVIMZA CAP 20MG	NC	SP
ROMVIMZA CAP 30MG	NC	SP
ROZLYTREK CAP 100MG	5	SP, PA, QL
ROZLYTREK CAP 200MG	5	SP, PA, QL
ROZLYTREK PAK 50MG	5	SP, PA, QL
RUBRACA TAB 200MG	NC	SP
RUBRACA TAB 250MG	NC	SP
RUBRACA TAB 300MG	NC	SP
RYDAPT CAP 25MG	6	SP, PA, QL
SCEMBLIX TAB 20MG	5	SP, PA, QL
SCEMBLIX TAB 40MG	5	SP, PA, QL
SCEMBLIX TAB 100MG	5	SP, PA, QL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	4	SP, PA, QL
SPRYCEL TAB 20MG	NC	SP
SPRYCEL TAB 50MG	NC	SP
SPRYCEL TAB 70MG	NC	SP
SPRYCEL TAB 80MG	NC	SP
SPRYCEL TAB 100MG	NC	SP
SPRYCEL TAB 140MG	NC	SP
STIVARGA TAB 40MG	5	SP, PA, QL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 50 mg (base equivalent)</i>	4	SP, PA, QL
SUTENT CAP 12.5MG	NC	SP
SUTENT CAP 25MG	NC	SP
SUTENT CAP 37.5MG	NC	SP
SUTENT CAP 50MG	NC	SP
TABRECTA TAB 150MG	NC	SP
TABRECTA TAB 200MG	NC	SP
TAFINLAR CAP 50MG	5	SP, PA, QL
TAFINLAR CAP 75MG	5	SP, PA, QL
TAFINLAR TAB 10MG	5	SP, PA, QL
TALZENNA CAP 0.1MG	NC	SP
TALZENNA CAP 0.5MG	NC	SP
TALZENNA CAP 0.25MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
TALZENNA CAP 0.35MG	NC	SP
TALZENNA CAP 0.75MG	NC	SP
TALZENNA CAP 1MG	NC	SP
TASIGNA CAP 50MG	NC	SP
TASIGNA CAP 150MG	NC	SP
TASIGNA CAP 200MG	NC	SP
TAZVERIK TAB 200MG	NC	SP
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	SP, PA, QL
TEPMETKO TAB 225MG	NC	SP
TIBSOVO TAB 250MG	6	SP, PA, QL
TORISEL INJ 25MG/ML	6	SP, ST, PA, QL
<i>torpenz tab 2.5mg</i>	4	SP, PA, QL
<i>torpenz tab 5mg</i>	4	SP, PA, QL
<i>torpenz tab 7.5mg</i>	4	SP, PA, QL
<i>torpenz tab 10mg</i>	4	SP, PA, QL
TRUQAP PAK 160MG	5	SP, PA, QL
TRUQAP PAK 200MG	5	SP, PA, QL
TRUQAP TAB 160MG	5	SP, PA, QL
TRUQAP TAB 200MG	5	SP, PA, QL
TURALIO CAP 200MG	NC	SP
TYKERB TAB 250MG	6	SP, PA, QL
UKONIQ TAB 200MG	NC	SP
VANFLYTA TAB 17.7MG	6	SP, PA, QL
VANFLYTA TAB 26.5MG	6	SP, PA, QL
VELCADE INJ 3.5MG	6	SP, PA
VERZENIO TAB 50MG	6	SP, PA, QL
VERZENIO TAB 100MG	6	SP, PA, QL
VERZENIO TAB 150MG	6	SP, PA, QL
VERZENIO TAB 200MG	6	SP, PA, QL
VITRAKVI CAP 25MG	5	SP, PA, QL
VITRAKVI CAP 100MG	5	SP, PA, QL
VITRAKVI SOL 20MG/ML	5	SP, PA, QL
VONJO CAP 100MG	6	SP, PA, QL
VORANIGO TAB 10MG	6	SP, PA, QL
VORANIGO TAB 40MG	6	SP, PA, QL
VOTRIENT TAB 200MG	NC	SP
XALKORI CAP 20MG	6	SP, PA, QL
XALKORI CAP 50MG	6	SP, PA, QL
XALKORI CAP 150MG	6	SP, PA, QL
XALKORI CAP 200MG	NC	SP
XALKORI CAP 250MG	NC	SP
XOSPATA TAB 40MG	5	SP, PA, QL
ZEJULA CAP 100MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
ZEJULA TAB 100MG	5	SP, PA, QL
ZEJULA TAB 200MG	5	SP, PA, QL
ZEJULA TAB 300MG	5	SP, PA, QL
ZELBORAF TAB 240MG	NC	SP
ZOLINZA CAP 100MG	6	SP, PA, QL
ZYDELIG TAB 100MG	5	SP, PA, QL
ZYDELIG TAB 150MG	5	SP, PA, QL
ZYKADIA TAB 150MG	5	SP, PA, QL
ANTINEOPLASTIC ENZYMES		
ASPARLAS INJ 3750/5ML	6	SP, PA
ONCASPAR INJ 750/ML	6	SP, PA
RYLAZE INJ 10/0.5ML	6	SP, PA, QL
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
LUTATHERA INJ 370MBQ	NC	SP
XOFIGO INJ 1100KBQ	NC	SP
ANTINEOPLASTICS MISC.		
ACTIMMUNE INJ 2MU/0.5	6	SP, PA
<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	4	
BESREMI SOL 500MCG	5	SP, PA, QL
<i>bexarotene cap 75 mg</i>	4	SP, PA
<i>dacarbazine for inj 100 mg</i>	1	
<i>dacarbazine for inj 200 mg</i>	1	
ELZONRIS SOL 1000MCG	NC	SP
HYDREA CAP 500MG	3	
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A INJ 10MU	6	SP, PA
INTRON A INJ 50MU	6	SP, PA
MATULANE CAP 50MG	3	
NIPENT INJ 10MG	3	
PHOTOFRIN INJ 75MG	3	
PROLEUKIN INJ 22MU	6	SP, PA
TARGRETIN CAP 75MG	NC	SP
TICE BCG INJ	3	
<i>tretinoin cap 10 mg</i>	2	
TRISENOX INJ 12MG/6ML	6	
UVADEX SOL 20MCG/ML	3	
CHEMOTHERAPY ADJUNCTS		
ELITEK INJ 1.5MG	3	
ELITEK INJ 7.5MG	3	
KEPIVANCE INJ 5.16MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
COSELA INJ 300MG	NC	SP
dexrazoxane hcl for inj 250 mg (base equivalent)	1	
dexrazoxane hcl for inj 500 mg (base equivalent)	1	
IWILFIN TAB 192MG	6	SP, PA, QL
KHAPZORY SOL 175MG	NC	SP
KHAPZORY SOL 300MG	NC	SP
leucovorin calcium for inj 50 mg	1	
leucovorin calcium for inj 100 mg	1	
leucovorin calcium for inj 200 mg	1	
leucovorin calcium for inj 350 mg	1	
leucovorin calcium for inj 500 mg	1	
leucovorin calcium inj 100 mg/10ml (10 mg/ml)	1	
leucovorin calcium inj 500 mg/50ml (10 mg/ml)	1	
leucovorin calcium tab 5 mg	1	
leucovorin calcium tab 10 mg	1	
leucovorin calcium tab 15 mg	1	
leucovorin calcium tab 25 mg	1	
levoleucovorin calcium for iv inj 50 mg (base equiv)	4	SP, PA
levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)	4	SP, PA
levoleucovorin calcium iv soln pf 250 mg/25ml (base equiv)	4	SP, PA
mesna inj 100 mg/ml	1	
MESNEX INJ 1GM	3	
MESNEX TAB 400MG	3	
PEDMARK INJ 12.5GM	3	
TOTECT INJ 500MG	NC	SP
VORAXAZE INJ 1000UNIT	6	SP
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	6	SP
docetaxel for inj conc 20 mg/ml	1	
docetaxel for inj conc 80 mg/4ml (20 mg/ml)	1	
docetaxel for inj conc 160 mg/8ml (20 mg/ml)	1	
DOCETAXEL INJ 20MG/2ML	3	
DOCETAXEL INJ 20MG/ML	3	
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 80MG/8ML	3	
DOCETAXEL INJ 160/8ML	3	
DOCETAXEL INJ 160/16ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	1	
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	1	
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	1	
<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	4	SP, PA
ETOPOPHOS INJ 100MG	3	
<i>etoposide cap 50 mg</i>	2	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	1	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	1	
HALAVEN INJ 1MG/2ML	6	SP, PA
IXEMPRA KIT INJ 15MG	6	SP, PA
IXEMPRA KIT INJ 45MG	6	SP, PA
JEVTANA INJ 60/1.5ML	6	SP, PA
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	1	
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	1	
<i>toposar inj 1gm/50ml</i>	1	
<i>toposar inj 100/5ml</i>	1	
<i>toposar inj 500/25ml</i>	1	
<i>vinblastine sulfate inj 1 mg/ml</i>	1	
<i>vincristine sulfate iv soln 1 mg/ml</i>	1	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	1	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	1	
ONCOLYTIC VIRAL AGENTS		
IMLYGIC INJ	6	SP, PA
TOPOISOMERASE I INHIBITORS		
CAMPTOSAR INJ 40MG/2ML	3	
CAMPTOSAR INJ 100/5ML	3	
CAMPTOSAR INJ 300/15ML	3	
DATROWAY INJ 100MG	NC	SP
HYCAMTIN CAP 0.25MG	6	SP, PA
HYCAMTIN CAP 1MG	6	SP, PA
HYCAMTIN INJ 4MG	3	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	1	
ONIVYDE INJ 4.3MG/ML	6	SP
<i>topotecan hcl for inj 4 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	1	
TOPOTECAN INJ 4MG/4ML	3	
TRODELVY SOL 180MG	6	SP, PA

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON ADJUNCTIVE THERAPY

<i>carbidopa tab 25 mg</i>	2	
LODOSYN TAB 25MG	3	
NOURIANZ TAB 20MG	NC	SP
NOURIANZ TAB 40MG	NC	SP

ANTIPARKINSON ANTICHOLINERGICS

<i>benztropine mesylate inj 1 mg/ml</i>	1	
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	

ANTIPARKINSON COMT INHIBITORS

COMTAN TAB 200MG	3	
<i>entacapone tab 200 mg</i>	1	
ONGENTYS CAP 25MG	NC	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	

ANTIPARKINSON DOPAMINERGICS

<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	NC	SP
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	4	PA, QL
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
DHIVY TAB 25-100MG	3	
DUOPA SUS 4.63-20	6	SP, PA
GOCOVRI CAP 68.5MG	NC	
GOCOVRI CAP 137MG	NC	
INBRIJA CAP 42MG	5	SP, PA, QL
KYNMOBI MIS 10MG	5	SP, PA, QL
KYNMOBI MIS 15MG	5	SP, PA, QL
KYNMOBI MIS 20MG	5	SP, PA, QL
KYNMOBI MIS 25MG	5	SP, PA, QL
KYNMOBI MIS 30MG	5	SP, PA, QL
MIRAPEX ER TAB 0.75MG	3	
MIRAPEX ER TAB 0.375MG	3	
MIRAPEX ER TAB 2.25MG	3	
MIRAPEX ER TAB 3.75MG	3	
MIRAPEX ER TAB 3MG	3	
NEUPRO DIS 1MG/24HR	2	
NEUPRO DIS 2MG/24HR	2	
NEUPRO DIS 3MG/24HR	2	
NEUPRO DIS 4MG/24HR	2	
NEUPRO DIS 6MG/24HR	2	
NEUPRO DIS 8MG/24HR	2	
ONAPGO INJ 98/20ML	NC	SP
OSMOLEX ER TAB 129MG	NC	
OSMOLEX ER TAB 193MG	NC	
OSMOLEX ER TAB 258MG	NC	
PARLODEL CAP 5MG	3	
PARLODEL TAB 2.5MG	3	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	2	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
RYTARY CAP 95MG	2	
RYTARY CAP 145MG	2	
RYTARY CAP 195MG	2	
RYTARY CAP 245MG	2	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
STALEVO 50 TAB	3	
STALEVO 75 TAB	3	
STALEVO 100 TAB	3	
STALEVO 125 TAB	3	

Drug Name	Drug Tier	Requirements/Limits
STALEVO 200 TAB	3	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
XADAGO TAB 50MG	NC	
XADAGO TAB 100MG	NC	
ZELAPAR TAB 1.25MG	3	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
<i>lithium oral solution 8 meq/5ml</i>	1	
LITHOBID TAB 300MG CR	3	
ANTIPSYCHOTICS - MISC.		
CAPLYTA CAP 10.5MG	3	PA; PV
CAPLYTA CAP 21MG	3	PA; PV
CAPLYTA CAP 42MG	3	PA; PV
EQUETRO CAP 100MG	3	PV
EQUETRO CAP 200MG	3	PV
EQUETRO CAP 300MG	3	PV
GEODON CAP 20MG	3	PV
GEODON CAP 40MG	3	PV
GEODON CAP 60MG	3	PV
GEODON CAP 80MG	3	PV
GEODON INJ 20MG	3	
LATUDA TAB 20MG	NC	
LATUDA TAB 40MG	NC	
LATUDA TAB 60MG	NC	
LATUDA TAB 80MG	NC	
LATUDA TAB 120MG	NC	
<i>lurasidone hcl tab 20 mg</i>	2	PA; PV
<i>lurasidone hcl tab 40 mg</i>	2	PA; PV
<i>lurasidone hcl tab 60 mg</i>	2	PA; PV
<i>lurasidone hcl tab 80 mg</i>	2	PA; PV

Drug Name	Drug Tier	Requirements/Limits
<i>lurasidone hcl tab 120 mg</i>	2	PA; PV
NUPLAZID CAP 34MG	6	SP, PA, QL
NUPLAZID TAB 10MG	6	SP, PA, QL
VRAYLAR CAP 1.5MG	2	PA; PV
VRAYLAR CAP 3MG	2	PA; PV
VRAYLAR CAP 4.5MG	2	PA; PV
VRAYLAR CAP 6MG	2	PA; PV
<i>ziprasidone hcl cap 20 mg</i>	1	PV
<i>ziprasidone hcl cap 40 mg</i>	1	PV
<i>ziprasidone hcl cap 60 mg</i>	1	PV
<i>ziprasidone hcl cap 80 mg</i>	1	PV
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	

BENZISOXAZOLES

ERZOFRI INJ 39/0.25	3	
ERZOFRI INJ 78/0.5ML	3	
ERZOFRI INJ 117/0.75	3	
ERZOFRI INJ 156MG/ML	3	
ERZOFRI INJ 234/1.5	3	
FANAPT PAK	NC	
FANAPT TAB 1MG	NC	
FANAPT TAB 2MG	NC	
FANAPT TAB 4MG	NC	
FANAPT TAB 6MG	NC	
FANAPT TAB 8MG	NC	
FANAPT TAB 10MG	NC	
FANAPT TAB 12MG	NC	
INVEGA HAFYE INJ 1092MG	3	
INVEGA HAFYE INJ 1560MG	3	
INVEGA SUST INJ 39/0.25	3	PV
INVEGA SUST INJ 78/0.5ML	3	PV
INVEGA SUST INJ 117/0.75	3	PV
INVEGA SUST INJ 156MG/ML	3	PV
INVEGA SUST INJ 234/1.5	3	PV
INVEGA TAB 3MG	3	PV
INVEGA TAB 6MG	3	PV
INVEGA TAB 9MG	3	PV
INVEGA TRINZ INJ 273MG	NC	
INVEGA TRINZ INJ 410MG	NC	
INVEGA TRINZ INJ 546MG	NC	
INVEGA TRINZ INJ 819MG	NC	
<i>paliperidone tab er 24hr 1.5 mg</i>	1	PV
<i>paliperidone tab er 24hr 3 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone tab er 24hr 6 mg</i>	1	PV
<i>paliperidone tab er 24hr 9 mg</i>	2	PV
PERSERIS INJ 90MG	2	PV
PERSERIS INJ 120MG	2	PV
RISPERDAL INJ 12.5MG	3	PV
RISPERDAL INJ 25MG	3	PV
RISPERDAL INJ 37.5MG	3	PV
RISPERDAL INJ 50MG	3	PV
RISPERDAL SOL 1MG/ML	3	PV
RISPERDAL TAB 0.5MG	3	PV
RISPERDAL TAB 1MG	3	PV
RISPERDAL TAB 2MG	3	PV
RISPERDAL TAB 3MG	3	PV
RISPERDAL TAB 4MG	3	PV
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 25 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 50 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	PV
<i>risperidone orally disintegrating tab 1 mg</i>	1	PV
<i>risperidone orally disintegrating tab 2 mg</i>	1	PV
<i>risperidone orally disintegrating tab 3 mg</i>	1	PV
<i>risperidone orally disintegrating tab 4 mg</i>	2	PV
<i>risperidone soln 1 mg/ml</i>	1	PV
<i>risperidone tab 0.5 mg</i>	1	PV
<i>risperidone tab 0.25 mg</i>	1	PV
<i>risperidone tab 1 mg</i>	1	PV
<i>risperidone tab 2 mg</i>	1	PV
<i>risperidone tab 3 mg</i>	1	PV
<i>risperidone tab 4 mg</i>	1	PV
RYKINDO INJ 25MG	NC	
RYKINDO INJ 37.5MG	NC	
RYKINDO INJ 50MG	NC	
UZEDY INJ 50MG	NC	
UZEDY INJ 75MG	NC	
UZEDY INJ 100MG	NC	
UZEDY INJ 125MG	NC	
UZEDY INJ 150MG	NC	

Drug Name	Drug Tier	Requirements/Limits
UZEDY INJ 200MG	NC	
UZEDY INJ 250MG	NC	
BUTYROPHENONES		
HALDOL DECAN INJ 50MG/ML	3	PV
HALDOL DECAN INJ 100MG/ML	3	PV
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	PV
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	PV
<i>haloperidol lactate inj 5 mg/ml</i>	1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	PV
<i>haloperidol tab 0.5 mg</i>	1	PV
<i>haloperidol tab 1 mg</i>	1	PV
<i>haloperidol tab 2 mg</i>	1	PV
<i>haloperidol tab 5 mg</i>	1	PV
<i>haloperidol tab 10 mg</i>	1	PV
<i>haloperidol tab 20 mg</i>	1	PV
DIBENZAPINES		
ADASUVE INH 10MG	3	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	2	PA; PV
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	1	PA; PV
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	PA; PV
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	PV
<i>clozapine orally disintegrating tab 25 mg</i>	1	PV
<i>clozapine orally disintegrating tab 100 mg</i>	2	PV
<i>clozapine orally disintegrating tab 150 mg</i>	2	PV
<i>clozapine orally disintegrating tab 200 mg</i>	1	PV
<i>clozapine tab 25 mg</i>	1	PV
<i>clozapine tab 50 mg</i>	1	PV
<i>clozapine tab 100 mg</i>	1	PV
<i>clozapine tab 200 mg</i>	1	PV
CLOZARIL TAB 25MG	3	PV
CLOZARIL TAB 100MG	3	PV
<i>loxapine succinate cap 5 mg</i>	1	PV
<i>loxapine succinate cap 10 mg</i>	1	PV
<i>loxapine succinate cap 25 mg</i>	1	PV
<i>loxapine succinate cap 50 mg</i>	1	PV
<i>olanzapine for im inj 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 10 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 15 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 20 mg</i>	1	PV
<i>olanzapine tab 2.5 mg</i>	1	PV
<i>olanzapine tab 5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine tab 7.5 mg</i>	1	PV
<i>olanzapine tab 10 mg</i>	1	PV
<i>olanzapine tab 15 mg</i>	1	PV
<i>olanzapine tab 20 mg</i>	1	PV
<i>quetiapine fumarate tab 25 mg</i>	1	PV
<i>quetiapine fumarate tab 50 mg</i>	1	PV
<i>quetiapine fumarate tab 100 mg</i>	1	PV
<i>quetiapine fumarate tab 150 mg</i>	1	PV
<i>quetiapine fumarate tab 200 mg</i>	1	PV
<i>quetiapine fumarate tab 300 mg</i>	1	PV
<i>quetiapine fumarate tab 400 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	PV
SAPHRIS SUB 2.5MG	3	PA; PV
SAPHRIS SUB 5MG	3	PA; PV
SAPHRIS SUB 10MG	3	PA; PV
SECUADO DIS 3.8MG	NC	
SECUADO DIS 5.7MG	NC	
SECUADO DIS 7.6MG	NC	
SEROQUEL TAB 25MG	3	PV
SEROQUEL TAB 50MG	3	PV
SEROQUEL TAB 100MG	3	PV
SEROQUEL TAB 200MG	3	PV
SEROQUEL TAB 300MG	3	PV
SEROQUEL TAB 400MG	3	PV
SEROQUEL XR TAB 50MG	NC	
SEROQUEL XR TAB 150MG	NC	
SEROQUEL XR TAB 200MG	NC	
SEROQUEL XR TAB 300MG	NC	
SEROQUEL XR TAB 400MG	NC	
VERSACLOZ SUS 50MG/ML	3	PV
ZYPREXA INJ 10MG	3	
ZYPREXA RELP INJ 210MG	3	
ZYPREXA RELP INJ 300MG	3	
ZYPREXA RELP INJ 405MG	3	
ZYPREXA TAB 2.5MG	3	PV
ZYPREXA TAB 5MG	3	PV
ZYPREXA TAB 7.5MG	3	PV
ZYPREXA TAB 10MG	3	PV
ZYPREXA TAB 15MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
ZYPREXA TAB 20MG	3	PV
ZYPREXA ZYDI TAB 5MG	3	PV
ZYPREXA ZYDI TAB 10MG	3	PV
ZYPREXA ZYDI TAB 15MG	3	PV
ZYPREXA ZYDI TAB 20MG	3	PV
DIHYDROINDOLONES		
<i>molindone hcl tab 5 mg</i>	1	PV
<i>molindone hcl tab 10 mg</i>	1	PV
<i>molindone hcl tab 25 mg</i>	1	PV
PHENOTHIAZINES		
<i>chlorpromazine hcl inj 25 mg/ml</i>	2	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	2	
<i>chlorpromazine hcl tab 10 mg</i>	1	PV
<i>chlorpromazine hcl tab 25 mg</i>	1	PV
<i>chlorpromazine hcl tab 50 mg</i>	1	PV
<i>chlorpromazine hcl tab 100 mg</i>	1	PV
<i>chlorpromazine hcl tab 200 mg</i>	2	PV
<i>compro sup 25mg</i>	2	
<i>fluphenazine decanoate inj 25 mg/ml</i>	1	PV
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	PV
<i>fluphenazine hcl inj 2.5 mg/ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	PV
<i>fluphenazine hcl tab 1 mg</i>	1	PV
<i>fluphenazine hcl tab 2.5 mg</i>	1	PV
<i>fluphenazine hcl tab 5 mg</i>	1	PV
<i>fluphenazine hcl tab 10 mg</i>	1	PV
<i>perphenazine tab 2 mg</i>	1	PV
<i>perphenazine tab 4 mg</i>	1	PV
<i>perphenazine tab 8 mg</i>	1	PV
<i>perphenazine tab 16 mg</i>	1	PV
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>thioridazine hcl tab 10 mg</i>	1	PV
<i>thioridazine hcl tab 25 mg</i>	1	PV
<i>thioridazine hcl tab 50 mg</i>	1	PV
<i>thioridazine hcl tab 100 mg</i>	1	PV
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	PV
QUINOLINONE DERIVATIVES		
ABILIFY ASIM INJ 720MG	2	PV
ABILIFY ASIM INJ 960MG	2	PV
ABILIFY MAIN INJ 300MG	2	PV
ABILIFY MAIN INJ 400MG	2	PV
ABILIFY MYCI TAB 2MG MANT	NC	
ABILIFY MYCI TAB 2MG STRT	NC	
ABILIFY MYCI TAB 5MG MANT	NC	
ABILIFY MYCI TAB 5MG STRT	NC	
ABILIFY MYCI TAB 10MG MNT	NC	
ABILIFY MYCI TAB 10MG STR	NC	
ABILIFY MYCI TAB 15MG MNT	NC	
ABILIFY MYCI TAB 15MG STR	NC	
ABILIFY MYCI TAB 20MG MNT	NC	
ABILIFY MYCI TAB 20MG STR	NC	
ABILIFY MYCI TAB 30MG MNT	NC	
ABILIFY MYCI TAB 30MG STR	NC	
ABILIFY TAB 2MG	NC	
ABILIFY TAB 5MG	NC	
ABILIFY TAB 10MG	NC	
ABILIFY TAB 15MG	NC	
ABILIFY TAB 20MG	NC	
ABILIFY TAB 30MG	NC	
<i>aripiprazole oral solution 1 mg/ml</i>	2	PV
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	PV
<i>aripiprazole orally disintegrating tab 15 mg</i>	2	PV
<i>aripiprazole tab 2 mg</i>	1	PV
<i>aripiprazole tab 5 mg</i>	1	PV
<i>aripiprazole tab 10 mg</i>	1	PV
<i>aripiprazole tab 15 mg</i>	1	PV
<i>aripiprazole tab 20 mg</i>	1	PV
<i>aripiprazole tab 30 mg</i>	1	PV
ARISTADA INJ 441MG/1.	3	PV
ARISTADA INJ 662MG/2	3	PV
ARISTADA INJ 882MG/3	3	PV
ARISTADA INJ 1064MG	3	PV
ARISTADA INJ INITIO	3	PV
OPIPZA MIS 2MG	NC	
OPIPZA MIS 5MG	NC	
OPIPZA MIS 10MG	NC	
REXULTI TAB 0.5MG	3	PA; PV
REXULTI TAB 0.25MG	3	PA; PV

Drug Name	Drug Tier	Requirements/Limits
REXULTI TAB 1MG	3	PA; PV
REXULTI TAB 2MG	3	PA; PV
REXULTI TAB 3MG	3	PA; PV
REXULTI TAB 4MG	3	PA; PV

THIOXANTHENES

<i>thiothixene cap 1 mg</i>	1	PV
<i>thiothixene cap 2 mg</i>	1	PV
<i>thiothixene cap 5 mg</i>	1	PV
<i>thiothixene cap 10 mg</i>	1	PV

ANTISEPTICS & DISINFECTANTS

ANTISEPTICS & DISINFECTANTS

FORMALDEHYDE SOL 37%	3	
<i>formaldehyde solution 10%</i>	1	
GLUTARALDEHY SOL 25%	3	
<i>hydrogen peroxide soln 30%</i>	1	

CHLORINE ANTISEPTICS

ANASEPT SPR	NC	OTC
BENZALKONIUM SOL 50%	3	
BENZALKONIUM SOL NF	3	
CHLORHEX GLU SOL 20%	3	

IODINE ANTISEPTICS

IODINE TIN 2%	3	
LUGOLS SOL IODINE	3	

ANTIVIRALS

ANTIRETROVIRALS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	SP, QL
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	SP, QL
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	SP, QL
APRETUDE SUS 600MG ER	0	SP, QL; ACA, PV
APTIVUS CAP 250MG	NC	SP
APTIVUS SOL	NC	SP
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	SP, QL
ATRIPLA TAB	NC	SP
BIKTARVY TAB	2	SP, QL
CABENUVA SUS 400-600	6	SP, PA, QL
CABENUVA SUS 600-900	6	SP, PA, QL
CIMDUO TAB 300-300	2	SP, PA, QL
COMPLERA TAB	NC	SP
DELSTRIGO TAB	NC	SP
DESCOVY TAB 120-15MG	2	SP, QL; PV

Drug Name	Drug Tier	Requirements/Limits
DESCOVY TAB 200/25MG	0	SP, QL; ACA, PV
DOVATO TAB 50-300MG	2	SP, QL
EDURANT TAB 25MG	NC	SP
<i>efavirenz tab 600 mg</i>	1	SP, QL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	SP, QL
<i>emtricitabine caps 200 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	0	SP, QL; ACA, PV
EMTRIVA CAP 200MG	2	SP, QL
EMTRIVA SOL 10MG/ML	2	SP, QL
EPIVIR SOL 10MG/ML	2	SP, QL
EPIVIR TAB 150MG	2	SP, QL
EPIVIR TAB 300MG	2	SP, QL
<i>etravirine tab 100 mg</i>	1	SP, QL
<i>etravirine tab 200 mg</i>	1	SP, QL
EVOTAZ TAB 300-150	3	SP, QL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	SP, QL
FUZEON INJ 90MG	6	SP, PA, QL
GENVOYA TAB	2	SP, QL
INTELENCE TAB 25MG	NC	SP
INTELENCE TAB 100MG	NC	SP
INTELENCE TAB 200MG	NC	SP
INVIRASE TAB 500MG	NC	SP
ISENTRESS CHW 25MG	2	SP, QL
ISENTRESS CHW 100MG	2	SP, QL
ISENTRESS HD TAB 600MG	2	SP, QL
ISENTRESS POW 100MG	2	SP, QL
ISENTRESS TAB 400MG	2	SP, QL
JULUCA TAB 50-25MG	3	SP, QL
KALETRA SOL	NC	SP
KALETRA TAB 100-25MG	NC	SP
KALETRA TAB 200-50MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
<i>lamivudine oral soln 10 mg/ml</i>	1	SP, QL
<i>lamivudine tab 150 mg</i>	1	SP, QL
<i>lamivudine tab 300 mg</i>	1	SP, QL
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	SP, QL
LEXIVA SUS 50MG/ML	NC	SP
LEXIVA TAB 700MG	NC	SP
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	SP, QL
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	SP, QL
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	SP, QL
<i>maraviroc tab 150 mg</i>	1	SP, QL
<i>maraviroc tab 300 mg</i>	1	SP, QL
<i>nevirapine susp 50 mg/5ml</i>	1	SP, QL
<i>nevirapine tab 200 mg</i>	1	SP, QL
<i>nevirapine tab er 24hr 400 mg</i>	1	SP, QL
NORVIR POW 100MG	NC	SP
NORVIR SOL 80MG/ML	NC	SP
NORVIR TAB 100MG	NC	SP
ODEFSEY TAB	2	SP, QL
PIFELTRO TAB 100MG	NC	SP
PREZCOBIX TAB 800-150	3	SP, QL
PREZISTA SUS 100MG/ML	NC	SP
PREZISTA TAB 75MG	NC	SP
PREZISTA TAB 150MG	NC	SP
PREZISTA TAB 600MG	NC	SP
PREZISTA TAB 800MG	NC	SP
RETROVIR CAP 100MG	2	SP, QL
RETROVIR INJ 10MG/ML	2	SP, QL
RETROVIR SYP 50MG/5ML	2	SP, QL
REYATAZ CAP 200MG	NC	SP
REYATAZ CAP 300MG	NC	SP
REYATAZ POW 50MG	NC	SP
<i>ritonavir tab 100 mg</i>	1	SP
RUKOBIA TAB 600MG ER	6	SP, QL
SELZENTRY SOL 20MG/ML	NC	SP
SELZENTRY TAB 25MG	NC	SP
SELZENTRY TAB 75MG	NC	SP
SELZENTRY TAB 150MG	NC	SP
SELZENTRY TAB 300MG	NC	SP
STRIBILD TAB	NC	SP
SUNLENCA INJ	NC	SP
SUNLENCA TAB 300MG	NC	SP
SUSTIVA CAP 50MG	2	SP, QL

Drug Name	Drug Tier	Requirements/Limits
SUSTIVA CAP 200MG	2	SP, QL
SYMFI LO TAB	3	SP, QL
SYMFI TAB	3	SP, QL
SYMTUZA TAB	2	SP, QL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	SP, QL
TIVICAY PD TAB 5MG	2	SP, QL
TIVICAY TAB 50MG	2	SP, QL
TRIUMEQ PD TAB	2	SP, QL
TRIUMEQ TAB	2	SP, QL
TROGARZO INJ 150MG/ML	6	SP
TRUVADA TAB 100-150	NC	SP
TRUVADA TAB 133-200	NC	SP
TRUVADA TAB 167-250	NC	SP
TRUVADA TAB 200-300	NC	SP
TYBOST TAB 150MG	2	SP, QL
VIRACEPT TAB 250MG	NC	SP
VIRACEPT TAB 625MG	NC	SP
VIREAD POW 40MG/GM	3	SP, QL
VIREAD TAB 150MG	3	SP, QL
VIREAD TAB 200MG	3	SP, QL
VIREAD TAB 250MG	3	SP, QL
VIREAD TAB 300MG	3	SP, QL
ZIAGEN SOL 20MG/ML	2	SP, QL
<i>zidovudine cap 100 mg</i>	1	SP, QL
<i>zidovudine syrup 10 mg/ml</i>	1	SP, QL
<i>zidovudine tab 300 mg</i>	1	SP, QL

ANTIVIRAL COMBINATIONS

PAXLOVID TAB 150-100	5	QL
PAXLOVID TAB 300-100	5	QL

CMV AGENTS

<i>cidofovir iv inj 75 mg/ml</i>	2	
<i>foscarnet sodium inj 6000 mg/250ml (24 mg/ml)</i>	1	
FOSCAVIR INJ 24MG/ML	3	
<i>ganciclovir sodium for inj 500 mg</i>	1	
LIVTENCITY TAB 200MG	6	SP, QL
PREVYMIS INJ 240/12	3	
PREVYMIS INJ 480/24	3	
PREVYMIS PAK 20MG	3	
PREVYMIS PAK 120MG	3	
PREVYMIS TAB 240MG	3	
PREVYMIS TAB 480MG	3	
VALCYTE SOL 50MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
VALCYTE TAB 450MG	NC	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	2	QL
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	2	QL

HEPATITIS AGENTS

<i>adefovir dipivoxil tab 10 mg</i>	4	SP
BARACLUDE SOL	6	SP, QL
BARACLUDE TAB 0.5MG	NC	SP
BARACLUDE TAB 1MG	NC	SP
<i>entecavir tab 0.5 mg</i>	4	SP, QL
<i>entecavir tab 1 mg</i>	4	SP, QL
EPCLUSA PAK 150-37.5	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA PAK 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 400-100	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPIVIR HBV SOL 5MG/ML	NC	SP
EPIVIR HBV TAB 100MG	NC	SP
HARVONI PAK	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI PAK 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 90-400MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HEPSERA TAB 10MG	NC	SP
<i>lamivudine tab 100 mg (hbv)</i>	4	SP
LEDIP-SOFOSB TAB 90-400MG	NC	SP
MAVYRET TAB 100-40MG	NC	SP
PEGASYS INJ	NC	SP
PEGASYS INJ 180MCG/M	NC	SP
PEGASYS INJ PROCLICK	NC	SP
PEGASYS KIT 180MCG/M	NC	SP
<i>ribavirin cap 200 mg</i>	4	SP, PA, QL
<i>ribavirin tab 200 mg</i>	4	SP, PA, QL
SOFOS/VELPAT TAB 400-100	NC	SP
SOVALDI PAK 150MG	6	SP, PA, QL
SOVALDI PAK 200MG	6	SP, PA, QL
SOVALDI TAB 200MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
SOVALDI TAB 400MG	6	SP, PA, QL
VEMLIDY TAB 25MG	5	SP
VIEKIRA PAK TAB	NC	SP
VOSEVI TAB	5	SP, PA, QL; for use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3)
ZEPATIER TAB 50-100MG	NC	SP

HERPES AGENTS

<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
SITAVIG TAB 50MG	NC	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
VALTREX TAB 1GM	NC	
VALTREX TAB 500MG	NC	
ZOVIRAX SUS 200/5ML	3	

INFLUENZA AGENTS

<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	PA, QL
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	PA, QL
RAPIVAB INJ 200MG/20	3	
RELENZA MIS DISKHALE	2	PA, QL
<i>rimantadine hydrochloride tab 100 mg</i>	1	
TAMIFLU CAP 30MG	3	PA, QL
TAMIFLU CAP 45MG	3	PA, QL
TAMIFLU CAP 75MG	3	PA, QL
TAMIFLU SUS 6MG/ML	3	PA, QL
XOFLUZA TAB 20MG	NC	
XOFLUZA TAB 40MG	NC	

Drug Name	Drug Tier	Requirements/Limits
MISC. ANTIVIRALS		
REMDESIVIR INJ 100MG	3	PA, QL
TEMBEXA SUS 10MG/ML	3	
TEMBEXA TAB 100MG	3	
TPOXX CAP 200MG	3	
TPOXX INJ	3	
VEKLURY INJ 100MG	3	PA, QL
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol phosphate cap er 24hr 10 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 20 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 40 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 80 mg</i>	1	PV
<i>carvedilol tab 3.125 mg</i>	1	PV
<i>carvedilol tab 6.25 mg</i>	1	PV
<i>carvedilol tab 12.5 mg</i>	1	PV
<i>carvedilol tab 25 mg</i>	1	PV
COREG CR CAP 10MG	NC	
COREG CR CAP 20MG	NC	
COREG CR CAP 40MG	NC	
COREG CR CAP 80MG	NC	
COREG TAB 3.125MG	3	PV
COREG TAB 6.25MG	3	PV
COREG TAB 12.5MG	3	PV
COREG TAB 25MG	3	PV
<i>labetalol hcl iv soln 5 mg/ml</i>	1	
<i>labetalol hcl tab 100 mg</i>	1	PV
<i>labetalol hcl tab 200 mg</i>	1	PV
<i>labetalol hcl tab 300 mg</i>	1	PV
LABETALOL INJ 20/4ML	3	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl cap 200 mg</i>	1	PV
<i>acebutolol hcl cap 400 mg</i>	1	PV
<i>atenolol tab 25 mg</i>	1	PV
<i>atenolol tab 50 mg</i>	1	PV
<i>atenolol tab 100 mg</i>	1	PV
<i>betaxolol hcl tab 10 mg</i>	1	PV
<i>betaxolol hcl tab 20 mg</i>	1	PV
<i>bisoprolol fumarate tab 5 mg</i>	1	PV
<i>bisoprolol fumarate tab 10 mg</i>	1	PV
BREVIBLOC DS SOL 2000MG	3	
BREVIBLOC INJ 10MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
BREVIBLOC PM SOL 2500MG	3	
BREVIBLOC SOL	3	
BREVIBLOC SOL 10MG/ML	3	
BREVIBLOC SOL 2000MG	3	
BREVIBLOC SOL 2500MG	3	
BYSTOLIC TAB 2.5MG	NC	
BYSTOLIC TAB 5MG	NC	
BYSTOLIC TAB 10MG	NC	
BYSTOLIC TAB 20MG	NC	
<i>esmolol hcl inj 100 mg/10ml</i>	1	
ESMOLOL HCL SOL 2000/100	3	
ESMOLOL HCL SOL 2500/250	3	
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	1	
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	1	
KAPSPARGO CAP 25MG	NC	
KAPSPARGO CAP 50MG	NC	
KAPSPARGO CAP 100MG	NC	
KAPSPARGO CAP 200MG	NC	
LOPRESSOR TAB 50MG	3	PV
LOPRESSOR TAB 100MG	3	PV
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	PV
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	PV
<i>metoprolol tartrate tab 37.5 mg</i>	1	PV
<i>metoprolol tartrate tab 50 mg</i>	1	PV
<i>metoprolol tartrate tab 75 mg</i>	1	PV
<i>metoprolol tartrate tab 100 mg</i>	1	PV
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	PV
RAPIBLYK INJ 280MG	NC	
TENORMIN TAB 25MG	3	PV
TENORMIN TAB 50MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
TENORMIN TAB 100MG	3	PV
TOPROL XL TAB 25MG	NC	
TOPROL XL TAB 50MG	NC	
TOPROL XL TAB 100MG	NC	
TOPROL XL TAB 200MG	NC	

BETA BLOCKERS NON-SELECTIVE

BETAPACE AF TAB 80MG	NC	
BETAPACE AF TAB 120MG	NC	
BETAPACE AF TAB 160MG	NC	
BETAPACE TAB 80MG	NC	
BETAPACE TAB 120MG	NC	
BETAPACE TAB 160MG	NC	
CORGARD TAB 80MG	3	PV
HEMANGEOL SOL 4.28/ML	3	
INDERAL LA CAP 60MG	NC	
INDERAL LA CAP 80MG	NC	
INDERAL LA CAP 120MG	NC	
INDERAL LA CAP 160MG	NC	
INDERAL XL CAP 80MG	NC	
INDERAL XL CAP 120MG	NC	
INNOPRAN XL CAP 80MG	NC	
INNOPRAN XL CAP 120MG	NC	
<i>nadolol tab 20 mg</i>	1	PV
<i>nadolol tab 40 mg</i>	1	PV
<i>nadolol tab 80 mg</i>	1	PV
<i>pindolol tab 5 mg</i>	1	PV
<i>pindolol tab 10 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 60 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 80 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 120 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 160 mg</i>	1	PV
<i>propranolol hcl inj 1 mg/ml</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	PV
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	PV
<i>propranolol hcl tab 10 mg</i>	1	PV
<i>propranolol hcl tab 20 mg</i>	1	PV
<i>propranolol hcl tab 40 mg</i>	1	PV
<i>propranolol hcl tab 60 mg</i>	1	PV
<i>propranolol hcl tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	PV
SOTALOL HCL INJ 150/10ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl tab 80 mg</i>	1	PV
<i>sotalol hcl tab 120 mg</i>	1	PV
<i>sotalol hcl tab 160 mg</i>	1	PV
<i>sotalol hcl tab 240 mg</i>	1	PV
SOTYLIZE SOL 5MG/ML	3	PV
<i>timolol maleate tab 5 mg</i>	1	PV
<i>timolol maleate tab 10 mg</i>	1	PV
<i>timolol maleate tab 20 mg</i>	1	PV

CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKER COMBINATIONS

CONSENSI TAB 2.5-200	NC
CONSENSI TAB 5-200MG	NC
CONSENSI TAB 10-200MG	NC

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	PV
CALAN SR TAB 120MG	3	PV
CALAN SR TAB 180MG	3	PV
CALAN SR TAB 240MG	3	PV
CARDENE IV INJ 40/200ML	3	
CARDENE IV SOL 20/200ML	3	
CARDIZEM CD CAP 120MG/24	NC	
CARDIZEM CD CAP 180MG/24	NC	
CARDIZEM CD CAP 240MG/24	NC	
CARDIZEM CD CAP 360MG/24	NC	
CARDIZEM LA TAB 120MG	NC	
CARDIZEM LA TAB 180MG	NC	
CARDIZEM LA TAB 240MG	NC	
CARDIZEM LA TAB 300MG/24	NC	
CARDIZEM LA TAB 360MG	NC	
CARDIZEM LA TAB 420MG/24	NC	
CARDIZEM TAB 30MG	NC	
CARDIZEM TAB 60MG	NC	
CARDIZEM TAB 120MG	NC	
<i>cartia xt cap 120/24hr</i>	1	PV
<i>cartia xt cap 180/24hr</i>	1	PV
<i>cartia xt cap 240/24hr</i>	1	PV
<i>cartia xt cap 300/24hr</i>	1	PV
CLEVIPREX EMU 0.5MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
CONJUPRI TAB 2.5MG	NC	
dilt-xr cap 120mg	1	PV
dilt-xr cap 180mg	1	PV
dilt-xr cap 240mg	1	PV
diltiazem hcl cap er 12hr 60 mg	1	PV
diltiazem hcl cap er 12hr 90 mg	1	PV
diltiazem hcl cap er 12hr 120 mg	1	PV
diltiazem hcl cap er 24hr 120 mg	1	PV
diltiazem hcl cap er 24hr 180 mg	1	PV
diltiazem hcl cap er 24hr 240 mg	1	PV
diltiazem hcl coated beads cap er 24hr 120 mg	1	PV
diltiazem hcl coated beads cap er 24hr 180 mg	1	PV
diltiazem hcl coated beads cap er 24hr 240 mg	1	PV
diltiazem hcl coated beads cap er 24hr 300 mg	1	PV
diltiazem hcl coated beads cap er 24hr 360 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 120 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 180 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 240 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 300 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 360 mg	1	PV
diltiazem hcl extended release beads cap er 24hr 420 mg	1	PV
diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)	1	
diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)	1	
diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)	1	
diltiazem hcl tab 30 mg	1	PV
diltiazem hcl tab 60 mg	1	PV
diltiazem hcl tab 90 mg	1	PV
diltiazem hcl tab 120 mg	1	PV
diltiazem hcl tab er 24hr 180 mg	NC	
diltiazem hcl tab er 24hr 240 mg	NC	
diltiazem hcl tab er 24hr 300 mg	NC	
diltiazem hcl tab er 24hr 360 mg	NC	
diltiazem hcl tab er 24hr 420 mg	NC	
DILTIAZEM INJ 100MG	3	
felodipine tab er 24hr 2.5 mg	1	PV
felodipine tab er 24hr 5 mg	1	PV
felodipine tab er 24hr 10 mg	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>isradipine cap 2.5 mg</i>	1	PV
<i>isradipine cap 5 mg</i>	1	PV
KATERZIA SUS 1MG/ML	NC	
<i>levamlodipine maleate tab 2.5 mg</i>	1	
<i>levamlodipine maleate tab 5 mg</i>	1	
<i>matzim la tab 180mg/24</i>	NC	
<i>matzim la tab 240mg/24</i>	NC	
<i>matzim la tab 300mg/24</i>	NC	
<i>matzim la tab 360mg/24</i>	NC	
<i>matzim la tab 420mg/24</i>	NC	
<i>nicardipine hcl cap 20 mg</i>	2	PV; (except NDCs 35573045785, 62559020590 and 68462012090 are not covered)
<i>nicardipine hcl cap 30 mg</i>	2	PV
<i>nicardipine hcl iv soln 2.5 mg/ml</i>	1	
<i>nifedipine cap 10 mg</i>	1	PV
<i>nifedipine cap 20 mg</i>	1	PV
<i>nifedipine tab er 24hr 30 mg</i>	1	PV
<i>nifedipine tab er 24hr 60 mg</i>	1	PV
<i>nifedipine tab er 24hr 90 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	PV
<i>nimodipine cap 30 mg</i>	2	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	PV
<i>nisoldipine tab er 24hr 17 mg</i>	2	PV
<i>nisoldipine tab er 24hr 20 mg</i>	2	PV
<i>nisoldipine tab er 24hr 25.5 mg</i>	1	PV
<i>nisoldipine tab er 24hr 30 mg</i>	1	PV
<i>nisoldipine tab er 24hr 34 mg</i>	2	PV
<i>nisoldipine tab er 24hr 40 mg</i>	2	PV
NORLIQVA SOL 1MG/ML	NC	
NORVASC TAB 2.5MG	NC	
NORVASC TAB 5MG	NC	
NORVASC TAB 10MG	NC	
NYMALIZE SOL	3	
PROCARDIA XL TAB 30MG CR	3	PV
PROCARDIA XL TAB 60MG CR	3	PV
PROCARDIA XL TAB 90MG CR	3	PV
SULAR TAB 8.5MG ER	3	PV
SULAR TAB 17MG ER	3	PV

Drug Name	Drug Tier	Requirements/Limits
SULAR TAB 34MG ER	3	PV
<i>tiadylt cap 120mg/24</i>	1	PV
<i>tiadylt cap 180mg/24</i>	1	PV
<i>tiadylt cap 240mg/24</i>	1	PV
<i>tiadylt cap 300mg/24</i>	1	PV
<i>tiadylt cap 360mg/24</i>	1	PV
<i>tiadylt cap 420mg/24</i>	1	PV
TIAZAC CAP 120MG/24	3	PV
TIAZAC CAP 180MG/24	3	PV
TIAZAC CAP 240MG/24	3	PV
TIAZAC CAP 300MG/24	3	PV
TIAZAC CAP 360MG/24	3	PV
TIAZAC CAP 420MG/24	3	PV
<i>verapamil hcl cap er 24hr 100 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 120 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 180 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 200 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 240 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 300 mg</i>	2	PV
<i>verapamil hcl cap er 24hr 360 mg</i>	1	PV
<i>verapamil hcl iv soln 2.5 mg/ml</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	PV
<i>verapamil hcl tab 80 mg</i>	1	PV
<i>verapamil hcl tab 120 mg</i>	1	PV
<i>verapamil hcl tab er 120 mg</i>	1	PV
<i>verapamil hcl tab er 180 mg</i>	1	PV
<i>verapamil hcl tab er 240 mg</i>	1	PV
VERELAN CAP 120MG SR	3	PV
VERELAN CAP 180MG SR	3	PV
VERELAN CAP 240MG SR	3	PV
VERELAN CAP 360MG SR	3	PV
VERELAN PM CAP 100MG ER	3	PV
VERELAN PM CAP 200MG ER	3	PV
VERELAN PM CAP 300MG ER	3	PV

CARDIOTONICS

CARDIAC GLYCOSIDES

<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digoxin inj 0.25 mg/ml</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	2	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LANOXIN INJ 0.5/2ML	3	
LANOXIN INJ 0.25MG/1	3	
LANOXIN PED INJ 0.1MG/ML	3	
LANOXIN TAB 0.25MG	NC	
LANOXIN TAB 0.125MG	NC	
LANOXIN TAB 0.0625MG	3	

INOTROPES

<i>dobutamine hcl inj 12.5 mg/ml</i>	1	
<i>dopamine hcl inj 40 mg/ml</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	1	
<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	1	
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	1	
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	1	

CARDIOVASCULAR AGENTS - MISC.

CARDIAC MYOSIN INHIBITORS

CAMZYOS CAP 2.5MG	6	SP, PA, QL
CAMZYOS CAP 5MG	6	SP, PA, QL
CAMZYOS CAP 10MG	6	SP, PA, QL
CAMZYOS CAP 15MG	6	SP, PA, QL

CARDIOPLEGIC SOLUTIONS

ADENOCAINE INJ 40ML	3	
CARDIOPL IND SOL 4:1	3	
CARDIOPL IND SOL 8:1	3	
CARDIOPL IND SOL LOW DEX8	3	
CARDIOPL IND SOL NON-EN 8	3	
CARDIOPL IND SOL PLASMA 4	3	
CARDIOPL IND SOL PLS/TROM	3	
CARDIOPL MN SOL 8:1	3	
CARDIOPL MN SOL PLS/TROM	3	
CARDIOPL REP SOL 4:1	3	
CARDIOPLE MN SOL LOW TROM	3	
CARDIOPLEGI INJ DEL NIDO	3	
CARDIOPLEGI SOL DEL NIDO	3	
CARDIOPLEGIA SOL MAIN 4:1	3	
CARDIOPLEGIC SOL	3	
<i>cardioplegic soln</i>	1	
MICROPLEGIA INJ MSA/MSG	3	

Drug Name	Drug Tier	Requirements/Limits
PLEGISOL SOL	3	
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	PV
BIDIL TAB	3	
CADUET TAB 5-10MG	3	PV
CADUET TAB 5-20MG	3	PV
CADUET TAB 5-40MG	3	PV
CADUET TAB 5-80MG	3	PV
CADUET TAB 10-10MG	3	PV
CADUET TAB 10-20MG	3	PV
CADUET TAB 10-40MG	3	PV
CADUET TAB 10-80MG	3	PV
ENTRESTO CAP 6-6MG	2	PA; PV
ENTRESTO CAP 15-16MG	2	PA; PV
ENTRESTO TAB 24-26MG	2	PA; PV
ENTRESTO TAB 49-51MG	2	PA; PV
ENTRESTO TAB 97-103MG	2	PA; PV
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	1	
OPSYNVI TAB 10-20MG	NC	
OPSYNVI TAB 10-40MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS		
INPEFA TAB 400MG	NC	
IMPOTENCE AGENTS		
CIALIS TAB 2.5MG	NC	
CIALIS TAB 5MG	NC	
CIALIS TAB 10MG	NC	
CIALIS TAB 20MG	NC	
tadalafil tab 2.5 mg	1	ST, QL
tadalafil tab 5 mg	1	ST, QL
PROSTAGLANDIN VASODILATORS		
epoprostenol sodium for inj 0.5 mg	4	SP, PA
epoprostenol sodium for inj 1.5 mg	4	SP, PA
FLOLAN INJ 0.5MG	6	SP, PA
FLOLAN INJ 1.5MG	6	SP, PA
ORENITRAM TAB 0.25MG	5	SP, PA
ORENITRAM TAB 0.125MG	5	SP, PA
ORENITRAM TAB 1MG	5	SP, PA
ORENITRAM TAB 2.5MG	5	SP, PA
ORENITRAM TAB 5MG	5	SP, PA
ORENITRAM TAB MONTH 1	5	SP, PA
ORENITRAM TAB MONTH 2	5	SP, PA
ORENITRAM TAB MONTH 3	5	SP, PA
REMODULIN INJ 1MG/ML	NC	
REMODULIN INJ 2.5MG/ML	NC	
REMODULIN INJ 5MG/ML	NC	
REMODULIN INJ 10MG/ML	NC	
treprostinil inj soln 20 mg/20ml (1 mg/ml)	4	SP, PA
treprostinil inj soln 50 mg/20ml (2.5 mg/ml)	4	SP, PA
treprostinil inj soln 100 mg/20ml (5 mg/ml)	4	SP, PA
treprostinil inj soln 200 mg/20ml (10 mg/ml)	4	SP, PA
TYVASO DPI POW 16-32-48	6	SP, PA, QL
TYVASO DPI POW 16-32MCG	6	SP, PA, QL
TYVASO DPI POW 16MCG	6	SP, PA, QL
TYVASO DPI POW 32-48MCG	6	SP, PA, QL
TYVASO DPI POW 32MCG	6	SP, PA, QL
TYVASO DPI POW 48MCG	6	SP, PA, QL
TYVASO DPI POW 64MCG	6	SP, PA, QL
TYVASO RF KT SOL 0.6MG/ML	6	SP, PA, QL
TYVASO SOL 0.6MG/ML	6	SP, PA, QL
TYVASO ST KT SOL 0.6MG/ML	6	SP, PA, QL
VELETRI INJ 0.5MG	6	SP, PA
VELETRI INJ 1.5MG	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
VENTAVIS SOL 10MCG/ML	6	SP, PA, QL
VENTAVIS SOL 20MCG/ML	6	SP, PA, QL
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR INJ 45MG	NC	SP
WINREVAIR INJ 60MG	NC	SP
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan tab 5 mg</i>	4	SP, PA, QL
<i>ambrisentan tab 10 mg</i>	4	SP, PA, QL
<i>bosentan tab 62.5 mg</i>	4	SP, PA, QL
<i>bosentan tab 125 mg</i>	4	SP, PA, QL
LETAIRIS TAB 5MG	NC	SP
LETAIRIS TAB 10MG	NC	SP
OPSUMIT TAB 10MG	5	SP, PA, QL
TRACLEER TAB 32MG	NC	SP
TRACLEER TAB 62.5MG	NC	SP
TRACLEER TAB 125MG	NC	SP
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
ADCIRCA TAB 20MG	NC	SP
<i>alyq tab 20mg</i>	4	SP, PA, QL
LIQREV SUS 10MG/ML	NC	SP
REVATIO INJ	NC	SP
REVATIO SUS 10MG/ML	NC	SP
REVATIO TAB 20MG	NC	SP
<i>sildenafil citrate for suspension 10 mg/ml</i>	4	SP, PA, QL
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	4	SP, PA
<i>sildenafil citrate tab 20 mg</i>	4	SP, PA, QL
<i>tadalafil tab 20 mg (pah)</i>	4	SP, PA, QL
TADLIQ SUS 20MG/5ML	5	SP, PA, QL
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI INJ 1800MCG	5	SP, PA, QL
UPTRAVI PACK TAB 200/800	5	SP, PA, QL
UPTRAVI TAB 200MCG	5	SP, PA, QL
UPTRAVI TAB 400MCG	5	SP, PA, QL
UPTRAVI TAB 600MCG	5	SP, PA, QL
UPTRAVI TAB 800MCG	5	SP, PA, QL
UPTRAVI TAB 1000MCG	5	SP, PA, QL
UPTRAVI TAB 1200MCG	5	SP, PA, QL
UPTRAVI TAB 1400MCG	5	SP, PA, QL
UPTRAVI TAB 1600MCG	5	SP, PA, QL
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS TAB 0.5MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TAB 1.5MG	5	SP, PA, QL
ADEMPAS TAB 1MG	5	SP, PA, QL
ADEMPAS TAB 2.5MG	5	SP, PA, QL
ADEMPAS TAB 2MG	5	SP, PA, QL
SINUS NODE INHIBITORS		
CORLANOR SOL 5MG/5ML	3	PA
CORLANOR TAB 5MG	3	PA
CORLANOR TAB 7.5MG	3	PA
<i>ivabradine hcl tab 5 mg (base equiv)</i>	2	PA
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	2	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP 61MG	6	SP, PA, QL
VYNDAQEL CAP 20MG	NC	
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
CEPHALOSPORINS		
CEPHALOSPORIN COMBINATIONS		
AVYCAZ INJ 2-0.5GM	3	
ZERBAXA INJ 1.5GM	3	
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	2	
CEFAZOL/DEX SOL 1GM	3	
CEFAZOL/DEX SOL 2GM	3	
CEFAZOLIN INJ 1GM/50ML	3	
CEFAZOLIN INJ 2GM	3	
CEFAZOLIN INJ 3GM	3	
CEFAZOLIN INJ 100GM	3	
CEFAZOLIN INJ 300GM	3	
<i>cefazolin sodium for inj 1 gm</i>	1	
<i>cefazolin sodium for inj 2 gm</i>	1	
<i>cefazolin sodium for inj 3 gm</i>	1	
<i>cefazolin sodium for inj 10 gm</i>	2	
<i>cefazolin sodium for inj 500 mg</i>	1	
<i>cefazolin sodium for iv soln 1 gm</i>	1	
CEFAZOLIN SOL	NC	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cephalexin cap 750 mg</i>	2	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin tab 500 mg</i>	2	
CEPHALOSPORINS - 2ND GENERATION		
<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	2	
CEFACLOR ER TAB 500MG	3	
<i>cefaclor for susp 250 mg/5ml</i>	1	
<i>cefotetan disodium for inj 1 gm</i>	1	
<i>cefotetan disodium for inj 2 gm</i>	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
<i>cefoxitin sodium for iv soln 1 gm</i>	1	
<i>cefoxitin sodium for iv soln 2 gm</i>	1	
<i>cefoxitin sodium for iv soln 10 gm</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	
<i>cefuroxime sodium for inj 750 mg</i>	1	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	1	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefixime cap 400 mg</i>	2	
<i>cefixime for susp 100 mg/5ml</i>	2	
<i>cefixime for susp 200 mg/5ml</i>	2	
<i>cefotaxime sodium for inj 1 gm</i>	1	
<i>cefotaxime sodium for inj 2 gm</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
<i>ceftazidime for inj 1 gm</i>	1	
<i>ceftazidime for inj 6 gm</i>	2	
<i>ceftazidime for iv soln 2 gm</i>	2	
CEFTAZIDIME/ SOL D5W 1GM	3	

Drug Name	Drug Tier	Requirements/Limits
CEFTAZIDIME/ SOL D5W 2GM	3	
CEFTRIAX/DEX INJ 1GM	3	
CEFTRIAX/DEX INJ 2GM	3	
CEFTRIAXONE INJ 100GM	3	
<i>ceftriaxone sodium for inj 1 gm</i>	1	
<i>ceftriaxone sodium for inj 2 gm</i>	2	
<i>ceftriaxone sodium for inj 10 gm</i>	2	
<i>ceftriaxone sodium for inj 250 mg</i>	1	
<i>ceftriaxone sodium for inj 500 mg</i>	1	
<i>ceftriaxone sodium for iv soln 1 gm</i>	1	
<i>ceftriaxone sodium for iv soln 2 gm</i>	1	
<i>ceftriaxone sodium in dextrose inj 20 mg/ml</i>	1	
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	1	
<i>tazicef inj 1gm</i>	1	
TAZICEF INJ 1GM/50ML	3	
<i>tazicef inj 2gm</i>	2	
<i>tazicef inj 6gm</i>	2	
CEPHALOSPORINS - 4TH GENERATION		
<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for iv soln 2 gm</i>	1	
<i>cefepime hcl for iv soln 2 gm</i>	2	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2G/100ML	3	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO INJ 400MG	3	
TEFLARO INJ 600MG	3	
CEPHALOSPORINS - SIDEROPHORES		
FETROJA INJ 1GM	3	
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>afirmelle tab 0.1-0.02</i>	0	ACA, PV
<i>altavera tab</i>	0	ACA, PV
<i>alyacen tab 1/35</i>	0	ACA, PV
<i>alyacen tab 7/7/7</i>	0	ACA, PV
<i>amethia tab</i>	0	ACA, PV
<i>amethyst tab 90-20mcg</i>	0	ACA, PV
<i>apri tab</i>	0	ACA, PV
<i>aranelle tab</i>	0	ACA, PV
<i>ashlyna tab</i>	0	ACA, PV
<i>aubra eq tab 0.1-0.02</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>aubra tab 0.1-0.02</i>	0	ACA, PV
<i>aurovela 24 tab fe 1/20</i>	0	ACA, PV
<i>aurovela fe tab 1.5/30</i>	0	ACA, PV
<i>aurovela fe tab 1/20</i>	0	ACA, PV
<i>aurovela tab 1.5/30</i>	0	ACA, PV
<i>aurovela tab 1/20</i>	0	ACA, PV
<i>aviane tab</i>	0	ACA, PV
<i>ayuna tab</i>	0	ACA, PV
<i>azurette tab</i>	0	ACA, PV
BALCOLTRA TAB 0.1-20	NC	
<i>balziva tab</i>	0	ACA, PV
BEYAZ TAB	NC	
<i>blisovi 24 tab fe 1/20</i>	0	ACA, PV
<i>blisovi fe tab 1.5/30</i>	0	ACA, PV
<i>blisovi fe tab 1/20</i>	0	ACA, PV
<i>briellyn tab</i>	0	ACA, PV
<i>camrese lo tab</i>	0	ACA, PV
<i>camrese tab</i>	0	ACA, PV
<i>charlotte 24 chw fe 1/20</i>	0	ACA, PV
<i>chateal eq tab 0.15/30</i>	0	ACA, PV
<i>chateal tab 0.15/30</i>	0	ACA, PV
<i>cryselle-28 tab 28 tabs</i>	0	ACA, PV
<i>cyred eq tab</i>	0	ACA, PV
<i>cyred tab</i>	0	ACA, PV
<i>dasetta tab 1/35</i>	0	ACA, PV
<i>dasetta tab 7/7/7</i>	0	ACA, PV
<i>daysee tab</i>	0	ACA, PV
<i>delyla tab 0.1-0.02</i>	0	ACA, PV
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	ACA, PV
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<i>dolishale tab 90-20mcg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	ACA, PV
<i>elimest tab</i>	0	ACA, PV
<i>enpresse-28 tab</i>	0	ACA, PV
<i>enskyce tab</i>	0	ACA, PV
<i>estarylla tab 0.25-35</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	0	ACA, PV
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	0	ACA, PV
<i>falmina tab</i>	0	ACA, PV
FEMLYV TAB 1/0.02MG	0	ACA, PV
<i>femynor tab 0.25-35</i>	0	ACA, PV
<i>finzala chw fe 1/20</i>	0	ACA, PV
<i>gemmily cap 1/20</i>	0	ACA, PV
<i>hailey 24 tab fe</i>	0	ACA, PV
<i>hailey fe tab 1.5/30</i>	0	ACA, PV
<i>hailey fe tab 1/20</i>	0	ACA, PV
<i>hailey tab 1.5/30</i>	0	ACA, PV
<i>iclevia tab</i>	0	ACA, PV
<i>introvale tab</i>	0	ACA, PV
<i>isibloom tab</i>	0	ACA, PV
<i>jaimiess tab</i>	0	ACA, PV
<i>jasmiel tab 3-0.02mg</i>	0	ACA, PV
<i>jolessa tab</i>	0	ACA, PV
<i>joyeaux tab 0.1-20</i>	0	ACA, PV
<i>juleber tab</i>	0	ACA, PV
<i>junel 1.5/30 tab</i>	0	ACA, PV
<i>junel 1/20 tab</i>	0	ACA, PV
<i>junel fe 24 tab 1/20</i>	0	ACA, PV
<i>junel fe tab 1.5/30</i>	0	ACA, PV
<i>junel fe tab 1/20</i>	0	ACA, PV
<i>kaitlib fe chw</i>	0	ACA, PV
<i>kalliga tab</i>	0	ACA, PV
<i>kariva tab 28 day</i>	0	ACA, PV
<i>kelnor 1/50 tab</i>	0	ACA, PV
<i>kelnor tab 1/35</i>	0	ACA, PV
<i>kurvelo tab 0.15/30</i>	0	ACA, PV
<i>larin 24 tab fe 1/20</i>	0	ACA, PV
<i>larin fe tab 1.5/30</i>	0	ACA, PV
<i>larin fe tab 1/20</i>	0	ACA, PV
<i>larin tab 1.5/30</i>	0	ACA, PV
<i>larin tab 1/20</i>	0	ACA, PV
<i>layolis fe chw</i>	0	ACA, PV
<i>leena tab</i>	0	ACA, PV
<i>lessina tab</i>	0	ACA, PV
<i>levonest tab</i>	0	ACA, PV
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	0	ACA, PV
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	0	ACA, PV
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	0	ACA, PV
<i>levora-28 tab 0.15/30</i>	0	ACA, PV
LO LOESTRIN TAB 1-10-10	0	ACA, PV
<i>lo-zumandimi tab 3-0.02mg</i>	0	ACA, PV
<i>loestrin 21 tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1/20</i>	0	ACA, PV
<i>loestrin tab 1/20-21</i>	0	ACA, PV
<i>lojaimiess tab</i>	0	ACA, PV
<i>loryna tab 3-0.02mg</i>	0	ACA, PV
LOSEASONIQUE TAB	3	ACA, PV
<i>low-ogestrel tab</i>	0	ACA, PV
<i>lutra tab</i>	0	ACA, PV
<i>marlissa tab 0.15/30</i>	0	ACA, PV
<i>merzee cap 1/20</i>	0	ACA, PV
<i>microgestin tab 1.5/30</i>	0	ACA, PV
<i>microgestin tab 1/20</i>	0	ACA, PV
<i>microgestin tab fe1.5/30</i>	0	ACA, PV
<i>microgestin tab fe 1/20</i>	0	ACA, PV
<i>mili tab 0.25/35</i>	0	ACA, PV
MINASTRIN 24 CHW FE	NC	
<i>mono-lynyah tab 0.25-35</i>	0	ACA, PV
NATAZIA TAB	0	ACA, PV
<i>necon tab 0.5/35</i>	0	ACA, PV
NEXTSTELLIS TAB 3-14.2MG	0	ACA, PV
<i>nikki tab 3-0.02mg</i>	0	ACA, PV
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	ACA, PV
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	0	ACA, PV
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	0	ACA, PV
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	ACA, PV
<i>nortrel tab 0.5/35</i>	0	ACA, PV
<i>nortrel tab 1/35</i>	0	ACA, PV
<i>nortrel tab 7/7/7</i>	0	ACA, PV
<i>nylia tab 1/35</i>	0	ACA, PV
<i>nylia tab 7/7/7</i>	0	ACA, PV
<i>ocella tab 3-0.03mg</i>	0	ACA, PV
ORTHO TRI- TAB CYCLN LO	NC	
<i>philith tab 0.4-35</i>	0	ACA, PV
<i>pimtrea tab</i>	0	ACA, PV
<i>portia-28 tab</i>	0	ACA, PV
<i>reclipsen tab</i>	0	ACA, PV
<i>rivelsa tab</i>	0	ACA, PV
SAFYRAL TAB	3	ACA, PV
SEASONIQUE TAB	NC	
<i>setlakin tab</i>	0	ACA, PV
<i>simliya tab 28 day</i>	0	ACA, PV
<i>simpesse tab</i>	0	ACA, PV
<i>sprintec 28 tab 28 day</i>	0	ACA, PV
<i>sronyx tab</i>	0	ACA, PV
<i>syeda tab 3-0.03mg</i>	0	ACA, PV
<i>tarina 24 fe tab</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>tarina fe tab 1/20</i>	0	ACA, PV
<i>tarina fe tab 1/20 eq</i>	0	ACA, PV
<i>taysofy cap 1/20</i>	0	ACA, PV
TAYTULLA CAP 1MG/20MC	NC	
<i>tilia fe tab</i>	0	ACA, PV
<i>tri femynor tab</i>	0	ACA, PV
<i>tri-estaryll tab</i>	0	ACA, PV
<i>tri-legest tab fe</i>	0	ACA, PV
<i>tri-linyah tab</i>	0	ACA, PV
<i>tri-lo tab estaryll</i>	0	ACA, PV
<i>tri-lo- tab marzia</i>	0	ACA, PV
<i>tri-lo- tab sprintec</i>	0	ACA, PV
<i>tri-lo-mili tab</i>	0	ACA, PV
<i>tri-mili tab</i>	0	ACA, PV
<i>tri-sprintec tab</i>	0	ACA, PV
<i>tri-vylibra tab</i>	0	ACA, PV
<i>tri-vylibra tab lo</i>	0	ACA, PV
<i>trivora-28 tab</i>	0	ACA, PV
<i>turqoz tab</i>	0	ACA, PV
TYBLUME CHW 0.1-0.02	NC	
<i>tydemy tab</i>	0	ACA, PV
<i>velivet pak</i>	0	ACA, PV
<i>vestura tab 3-0.02mg</i>	0	ACA, PV
<i>vienva tab 0.1-20</i>	0	ACA, PV
<i>viorele tab</i>	0	ACA, PV
<i>volnea tab</i>	0	ACA, PV
<i>vyfemla tab 0.4-35</i>	0	ACA, PV
<i>vylibra tab 0.25-35</i>	0	ACA, PV
<i>wera tab 0.5/35</i>	0	ACA, PV
<i>wymzya fe chw 0.4mg-35</i>	0	ACA, PV
YASMIN 28 TAB 3-0.03MG	NC	
YAZ TAB 3-0.02MG	NC	
<i>zovia 1/35 tab</i>	0	ACA, PV
<i>zumandimine tab 3-0.03mg</i>	0	ACA, PV
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	0	ACA, PV
TWIRLA DIS 120-30	NC	
<i>xulane dis 150-35</i>	0	ACA, PV
<i>zafemy dis 150/35</i>	0	ACA, PV
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA MIS	0	QL; ACA
<i>eluryng mis</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	NC	
NUVARING MIS	0	ACA, PV
COPPER CONTRACEPTIVES - IUD		
PARAGARD IUD T380A	0	ACA, PV
EMERGENCY CONTRACEPTIVES		
aftera tab 1.5mg	0	OTC; ACA, PV
afterpill tab 1.5mg	0	OTC; ACA, PV
econtra ez tab 1.5mg	0	OTC; ACA, PV
econtra os tab 1.5mg	0	OTC; ACA, PV
ELLA TAB 30MG	0	ACA, PV
levonorgestrel tab 1.5 mg	0	OTC; ACA, PV
my choice tab 1.5mg	0	OTC; ACA, PV
my way tab 1.5mg	0	OTC; ACA, PV
new day tab 1.5mg	0	OTC; ACA, PV
opcicon tab 1.5mg	0	OTC; ACA, PV
option 2 tab 1.5mg	0	OTC; ACA, PV
react tab 1.5mg	0	OTC; ACA, PV
take action tab 1.5mg	0	OTC; ACA, PV
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON IMP 68MG	0	ACA, PV
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA INJ 150MG/ML	3	ACA, PV
DEPO-SQ PROV INJ 104	3	QL; ACA, PV
medroxyprogesterone acetate im susp 150 mg/ml	0	QL; ACA, PV
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	0	QL; ACA, PV
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA IUD 19.5MG	0	ACA, PV
LILETTA IUD 52MG	0	ACA, PV
MIRENA IUD SYSTEM	0	ACA, PV
SKYLA IUD 13.5MG	0	ACA, PV
PROGESTIN CONTRACEPTIVES - ORAL		
camila tab 0.35mg	0	ACA, PV
deblitane tab 0.35mg	0	ACA, PV
emzahh tab 0.35mg	0	ACA, PV
errin tab 0.35mg	0	ACA, PV
heather tab 0.35mg	0	ACA, PV
incassia tab 0.35mg	0	ACA, PV
jencycla tab 0.35mg	0	ACA, PV
lyleq tab 0.35mg	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>lyza tab 0.35mg</i>	0	ACA, PV
<i>nora-be tab 0.35mg</i>	0	ACA, PV
<i>norethindrone tab 0.35 mg</i>	0	ACA, PV
<i>norlyroc tab 0.35mg</i>	0	ACA, PV
OPILL TAB 0.075MG	0	OTC; ACA, PV
<i>sharobel tab 0.35mg</i>	0	ACA, PV
SLYND TAB 4MG	NC	

CORTICOSTEROIDS

GLUCOCORTICOSTEROIDS

AGAMREE SUS 40MG/ML	NC	
BETA-PHOS/AC INJ 3-3MG/ML	NC	
BETAMETH COM INJ 7MG/ML	NC	
BETAMETH SOD INJ 6MG/ML	3	
BETAMETH SOD INJ 12MG/2ML	3	
<i>betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>	2	(applies to NDC 71283062002 only)
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	NC	
CELESTONE INJ SOLUSPAN	NC	
CORTEF TAB 5MG	3	
CORTEF TAB 10MG	3	
CORTEF TAB 20MG	3	
<i>deflazacort susp 22.75 mg/ml</i>	4	SP, PA
<i>deflazacort tab 6 mg</i>	4	SP, PA
<i>deflazacort tab 18 mg</i>	4	SP, PA
<i>deflazacort tab 30 mg</i>	4	SP, PA
<i>deflazacort tab 36 mg</i>	4	SP, PA
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
DEXAMETH LA INJ 16MG/ML	3	
DEXAMETH PHO INJ 4MG/ML	3	
DEXAMETH PHO INJ 10MG/ML	3	
DEXAMETHASON CON 1MG/ML	3	
DEXAMETHASON INJ 8MG/ML	3	
DEXAMETHASON SUS 8-4MG/ML	3	
DEXAMETHASON SUS 8MG/ML	3	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	1	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	1	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	2	
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	2	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	2	
DEXONTO 0.4% SOL 20MG/5ML	NC	
<i>dexpak pak 6 day</i>	NC	
<i>dexpak pak 10 day</i>	NC	
<i>dexpak pak 13 day</i>	NC	
EMFLAZA SUS 22.75/ML	NC	
EMFLAZA TAB 6MG	NC	
EMFLAZA TAB 18MG	NC	
EMFLAZA TAB 30MG	NC	
EMFLAZA TAB 36MG	NC	
EOHILIA SUS 2MG/10ML	NC	
<i>hidex 6-day pak 1.5mg</i>	2	
<i>hydrocortisone sodium succinate pf for inj 100 mg</i>	1	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
KENALOG-10 INJ 10MG/ML	3	
KENALOG-40 INJ 40MG/ML	3	
KENALOG-80 INJ 80MG/ML	3	
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	
MEDROL TAB 8MG	3	
MEDROL TAB 16MG	3	
METHY-BUPIVA SUS 8-5MG/ML	NC	
METHYL-BUPIV SUS 40-5MG	NC	
METHYLPR ACE INJ 40MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
METHYLPR ACE INJ 80MG/ML	3	
METHYLPREDNI INJ 80MG/ML	3	
METHYLPREDNI SUS 50MG/ML	NC	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	1	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 500 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	2	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
MILLIPRED DP PAK 5MG	NC	
MILLIPRED TAB 5MG	NC	
ORAPRED ODT TAB 10MG	3	
ORAPRED ODT TAB 15MG	3	
ORAPRED ODT TAB 30MG	3	
PEDIAPRED SOL 5MG/5ML	3	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	2	
<i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i>	NC	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	NC	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone soln 15 mg/5ml</i>	1	
<i>prednisolone tab 5 mg</i>	2	
PREDNISONE CON 5MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone oral soln 5 mg/5ml</i>	2	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
RAYOS TAB 1MG	NC	
RAYOS TAB 2MG	NC	
RAYOS TAB 5MG	NC	
SOLU-CORTEF INJ 100MG	3	
SOLU-CORTEF INJ 250MG	3	
SOLU-CORTEF INJ 500MG	3	
SOLU-CORTEF INJ 1000MG	3	
SOLU-MEDROL INJ 1GM	3	
SOLU-MEDROL INJ 2GM	3	
SOLU-MEDROL INJ 40MG	3	
SOLU-MEDROL INJ 125MG	3	
SOLU-MEDROL INJ 500MG	3	
SOLU-MEDROL INJ 1000MG	3	
TARPEYO CAP 4MG	NC	
TRIAM-BUPIVA SUS 40-5MG	NC	
TRIAMCIN ACE INJ 40MG/ML	3	
TRIAMCINOLON INJ 40MG/ML	3	
TRIAMCINOLON INJ 80MG/2ML	3	
TRIAMCINOLON INJ 80MG/ML	3	
<i>tiamcinolone acetonide inj susp 40 mg/ml</i>	1	
UCERIS TAB 9MG	1	
ZILRETTA INJ 32MG	NC	

MINERALOCORTICIDS

<i>fludrocortisone acetate tab 0.1 mg</i>	1	

COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	NC	
<i>benzonatate cap 200 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	
<i>hydromet syp 5-1.5/5</i>	1	
COUGH/COLD/ALLERGY COMBINATIONS		
<i>CLARINEX-D TAB 2.5-120</i>	3	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	OTC
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	
<i>prometh vc syp 6.25-5/5</i>	1	
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	2	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	NC	(applies to NDCs 62135030247 and 62135030248 only)
EXPECTORANTS		
<i>potassium iodide oral soln 1 gm/ml</i>	1	
<i>SSKI SOL 1GM/ML</i>	3	
MISC. RESPIRATORY INHALANTS		
<i>HYPERSAL NEB 3.5%</i>	3	
<i>HYPERSAL NEB 7%</i>	3	
<i>NEBUSAL NEB 6%</i>	3	
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	
MUCOLYTICS		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>ABSORICA CAP 10MG</i>	NC	
<i>ABSORICA CAP 20MG</i>	NC	
<i>ABSORICA CAP 25MG</i>	NC	
<i>ABSORICA CAP 30MG</i>	NC	
<i>ABSORICA CAP 35MG</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
ABSORICA CAP 40MG	NC	
ABSORICA LD CAP 8MG	NC	
ABSORICA LD CAP 16MG	NC	
ABSORICA LD CAP 24MG	NC	
ABSORICA LD CAP 32MG	NC	
ACANYA GEL 1.2-2.5%	NC	
<i>accutane cap 10mg</i>	1	PA
<i>accutane cap 20mg</i>	1	PA
<i>accutane cap 30mg</i>	2	PA
<i>accutane cap 40mg</i>	1	PA
ACZONE GEL 5%	NC	
ACZONE GEL 7.5%	NC	
ADAPAL/BEN P PAD 0.1-2.5%	NC	
<i>adapalene cream 0.1%</i>	1	PA
<i>adapalene gel 0.1%</i>	1	PA
<i>adapalene gel 0.3%</i>	1	PA
<i>adapalene pads 0.1%</i>	NC	
ADAPALENE SOL 0.1%	3	
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	PA
AKLIEF CRE 0.005%	2	PA
ALTRENO LOT 0.05%	NC	
<i>amnestem cap 10mg</i>	1	PA
<i>amnestem cap 20mg</i>	1	PA
<i>amnestem cap 40mg</i>	1	PA
AMZEEQ AER 4%	NC	
ARAZLO LOT 0.045%	NC	
ATRALIN GEL 0.05%	3	PA
<i>avita gel 0.025%</i>	1	PA
AZELEX CRE 20%	NC	
BENZAC AC LIQ 5% WASH	3	ST, PA
BENZACLIN GEL 1-5%	NC	
BENZACLIN GEL 1-5%PUMP	NC	
BENZAMYCIN GEL 5-3%	3	
BENZEPRO AER 5.3%	3	
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide gel 8%</i>	1	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i>	1	
<i>claravis cap 10mg</i>	1	PA
<i>claravis cap 20mg</i>	1	PA
<i>claravis cap 30mg</i>	2	PA
<i>claravis cap 40mg</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
CLEOCIN-T LOT 1%	3	ST, PA
<i>clindacin mis etz 1%</i>	2	
<i>clindacin-p pad 1%</i>	2	
CLINDAGEL GEL 1%	3	ST, PA
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	1	PA
<i>clindamycin phosphate gel 1% (once-daily)</i>	3	
<i>clindamycin phosphate gel 1% (once-daily)</i>	NC	(applies to NDC 69238203107 only)
<i>clindamycin phosphate gel 1% (twice-daily)</i>	1	PA
<i>clindamycin phosphate gel 1% (twice-daily)</i>	NC	(applies to NDC 69238203107 only)
<i>clindamycin phosphate lotion 1%</i>	1	PA
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	2	
<i>clindamycin phosphate-benzoyl peroxide gel 1- 5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	1	
<i>clindamycin phosphate-tretinoin gel 1.2- 0.025%</i>	1	PA
<i>dapsone gel 5%</i>	1	
<i>dapsone gel 7.5%</i>	1	
DIFFERIN CRE 0.1%	3	PA
DIFFERIN GEL 0.3%	3	PA
DIFFERIN LOT 0.1%	NC	
EPIDUO FORTE GEL 0.3-2.5%	2	ST, PA
EPIDUO GEL 0.1-2.5%	2	ST, PA
EPSOLAY CRE 5%	NC	
<i>ery pad 2%</i>	1	
ERYGEL GEL 2%	3	ST, PA
<i>erythromycin gel 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
EVOCLIN AER 1%	3	ST, PA
FABIOR AER 0.1%	NC	
<i>isotretinoin cap 10 mg</i>	1	PA
<i>isotretinoin cap 20 mg</i>	1	PA
<i>isotretinoin cap 25 mg</i>	NC	
<i>isotretinoin cap 30 mg</i>	2	PA
<i>isotretinoin cap 35 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>isotretinoin cap 40 mg</i>	1	PA
KLARON LOT 10%	3	ST, PA
<i>myorisan cap 10mg</i>	1	PA
<i>myorisan cap 20mg</i>	1	PA
<i>myorisan cap 30mg</i>	2	PA
<i>myorisan cap 40mg</i>	1	PA
<i>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	3	ST, PA
PR BENZOYL LIQ 7% WASH	1	
<i>resorcinol-sulfur lotion 2-5%</i>	1	
RETIN-A CRE 0.1%	3	PA
RETIN-A CRE 0.05%	3	PA
RETIN-A CRE 0.025%	3	PA
RETIN-A GEL 0.01%	3	PA
RETIN-A GEL 0.025%	3	PA
RETIN-A MICR GEL 0.1%	NC	
RETIN-A MICR GEL 0.1%	NC	
RETIN-A MICR GEL 0.1%PUMP	NC	
RETIN-A MICR GEL 0.04%	NC	
RETIN-A MICR GEL 0.04%PMP	NC	
RETIN-A MICR GEL 0.06%PMP	NC	
RETIN-A MICR GEL 0.08%PMP	NC	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	PA
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	2	
<i>sulfamez emu 10-1%</i>	1	
<i>tretinoin cream 0.1%</i>	1	PA
<i>tretinoin cream 0.05%</i>	1	PA
<i>tretinoin cream 0.025%</i>	1	PA
<i>tretinoin gel 0.01%</i>	1	PA
<i>tretinoin gel 0.05%</i>	1	PA
<i>tretinoin gel 0.025%</i>	1	PA
<i>tretinoin microsphere gel 0.1%</i>	2	PA
<i>tretinoin microsphere gel 0.04%</i>	2	PA
<i>tretinoin microsphere gel 0.08%</i>	2	
TWYNEO CRE 0.1-3%	2	ST, PA
VELTIN GEL	NC	
WINLEVI CRE 1%	2	ST, PA, QL
ZACLIR LOT 8%	3	ST, PA
<i>zenatane cap 10mg</i>	1	PA
<i>zenatane cap 20mg</i>	1	PA
<i>zenatane cap 30mg</i>	2	PA
<i>zenatane cap 40mg</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
ZIANA GEL	NC	
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN OIN 15%	NC	
ANALGESICS - TOPICAL		
MUSCUSOLICE CRE 2%	NC	
PRAKETAMIDE CRE 5%	NC	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
arthr pain gel 1%	1	PA, OTC
diclofenac epolamine patch 1.3%	1	PA, QL
diclofenac sodium gel 1% (1.16% diethylamine equiv)	1	
diclofenac sodium gel 1% (1.16% diethylamine equiv)	1	PA, QL
diclofenac sodium soln 1.5%	1	PA, QL
diclofenac sodium soln 2%	NC	
DICLOFONO GEL 1.6%	NC	
FLECTOR DIS 1.3%	3	PA, QL
PENNSAID SOL 2%	NC	
ANTIBIOTICS - TOPICAL		
ALTABAX OIN 1%	NC	
CENTANY OIN 2%	3	
gentamicin sulfate cream 0.1%	1	
gentamicin sulfate oint 0.1%	1	
mupirocin calcium cream 2%	NC	
mupirocin oint 2%	1	
NEO-SYNALAR CRE	NC	
ANTIFUNGALS - TOPICAL		
ciclodan sol 8%	1	PA
ciclopirox gel 0.77%	1	
ciclopirox olamine cream 0.77% (base equiv)	1	
ciclopirox olamine susp 0.77% (base equiv)	1	
ciclopirox shampoo 1%	1	
ciclopirox solution 8%	1	PA
clotrimazole cream 1%	1	
clotrimazole soln 1%	1	
clotrimazole w/ betamethasone cream 1-0.05%	1	
clotrimazole w/ betamethasone lotion 1-0.05%	1	
econazole nitrate cream 1%	1	
ECOZA AER 1%	3	
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	
EXELDERM SOL 1%	3	

Drug Name	Drug Tier	Requirements/Limits
EXTINA AER 2%	3	
FUNGIMEZ SOL	3	
<i>iodoquimez cre 1-1.9%</i>	1	
JUBLIA SOL 10%	NC	
KERYDIN SOL 5%	NC	
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	NC	
<i>ketoconazole shampoo 2%</i>	1	
<i>ketodan aer 2%</i>	NC	
<i>klayesta pow 100000</i>	1	
LOPROX SUS 0.77%	NC	
<i>luliconazole cream 1%</i>	NC	
LUZU CRE 1%	3	
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	2	
<i>naftifine hcl cream 1%</i>	2	
<i>naftifine hcl cream 2%</i>	1	
<i>naftifine hcl gel 2%</i>	2	
NAFTIN GEL 2%	2	
<i>nyamyc pow 100000</i>	1	
<i>nystatin cream 100000 unit/gm</i>	1	
<i>nystatin oint 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
<i>nystop pow 100000</i>	1	
<i>oxiconazole nitrate cream 1%</i>	1	QL
OXISTAT LOT 1%	3	PA, QL
<i>sulconazole nitrate cream 1%</i>	2	
<i>sulconazole nitrate solution 1%</i>	2	
<i>tavaborole soln 5%</i>	NC	
VUSION OIN	3	
XOLEGEL GEL 2%	NC	
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
AMELUZ GEL 10%	NC	SP
<i>bexarotene gel 1%</i>	4	SP, PA
CARAC CRE 0.5%	NC	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA
EFUDEX CRE 5%	3	
<i>fluorouracil cream 0.5%</i>	NC	
<i>fluorouracil cream 5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
KLISYRI OIN 1% (250)	NC	
LEVULAN KERA SOL 20%	3	
PANRETIN GEL 0.1%	3	
TARGRETIN GEL 1%	NC	SP
VALCHLOR GEL 0.016%	6	SP, PA, QL
ANTIPRURITICS - TOPICAL		
<i>doxepin hcl cream 5%</i>	NC	
PRUDOXIN CRE 5%	3	ST, PA, QL
ZONALON CRE 5%	3	ST, PA, QL
ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	1	PA
<i>acitretin cap 17.5 mg</i>	2	PA
<i>acitretin cap 25 mg</i>	1	PA
BIMZELX INJ 160MG/ML	5	SP, PA, QL; Preferred for Psoriasis
BIMZELX INJ 320MG/2	5	SP, PA, QL; Preferred for Psoriasis
<i>calcipotriene cream 0.005%</i>	NC	
<i>calcipotriene foam 0.005%</i>	NC	
<i>calcipotriene oint 0.005%</i>	1	PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	PA
<i>calcitrene oin 0.005%</i>	1	PA
<i>calcitriol oint 3 mcg/gm</i>	NC	
COSENTYX INJ 75MG/0.5	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis; for pediatric patients less than 50 kg;
COSENTYX INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
COSENTYX INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX UNO INJ 300/2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
DOVONEX CRE 0.005%	3	PA
ILUMYA INJ 100MG/ML	5	SP, PA, QL
<i>methoxsalen rapid cap 10 mg</i>	1	
OTULFI INJ 45/0.5ML	NC	SP
OTULFI INJ 90MG/ML	NC	SP
PYZCHIVA INJ 45/0.5ML	NC	SP
PYZCHIVA INJ 90MG/ML	NC	SP
SELARSDI INJ 45/0.5ML	NC	SP
SELARSDI INJ 90MG/ML	NC	SP
SILIQ INJ 210/1.5	NC	SP
SKYRIZI INJ 150DOSE	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SKYRIZI INJ 150MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SORILUX AER 0.005%	NC	
SOTYKTU TAB 6MG	5	SP, PA, QL; Preferred for Psoriasis
SPEVIGO INJ 150/1ML	6	SP, PA, QL
SPEVIGO INJ 450/7.5	6	SP, PA, QL
STELARA INJ 45MG/0.5	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STELARA INJ 90MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STEQEYMA INJ 45/0.5ML	NC	SP
STEQEYMA INJ 90MG/ML	NC	SP
TALTZ INJ 20/0.25	NC	SP
TALTZ INJ 40/0.5ML	NC	SP
TALTZ INJ 80MG/ML	NC	SP
<i>tazarotene cream 0.1%</i>	1	PA
<i>tazarotene cream 0.05%</i>	1	PA
<i>tazarotene gel 0.1%</i>	1	PA
<i>tazarotene gel 0.05%</i>	1	PA
TAZORAC CRE 0.1%	NC	
TAZORAC CRE 0.05%	NC	
TAZORAC GEL 0.1%	NC	
TAZORAC GEL 0.05%	NC	
TREMFYA INJ 100MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
USTEKINUMAB SOL TTWE	NC	SP
VECTICAL OIN 3MCG/GM	NC	SP
VTAMA CRE 1%	2	PA, QL
WEZLANA INJ 45/0.5ML	NC	SP
WEZLANA INJ 90MG/ML	NC	SP
YESINTEK INJ 45/0.5ML	NC	SP
YESINTEK INJ 90MG/ML	NC	SP
ZORYVE CRE 0.3%	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
ANTISEBORRHEIC PRODUCTS		
ESKATA SOL 40%	NC	
NUTRASEB CRE	3	PA
PROMISEB CRE	3	PA
<i>selenium sulfide lotion 2.5%</i>	1	
ZORYVE MIS 0.3%	3	PA, QL
ANTIVIRALS - TOPICAL		
<i>acyclovir cream 5%</i>	NC	
<i>acyclovir oint 5%</i>	1	
DENAVIR CRE 1%	3	
<i>penciclovir cream 1%</i>	2	
XERESE CRE 5-1%	NC	
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	
BURN PRODUCTS		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
SILVADENE CRE 1%	3	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	
CORTICOSTEROIDS - TOPICAL		
<i>ala scalp lot 2%</i>	NC	
<i>ala-cort cre 1%</i>	1	
<i>ala-cort cre 2.5%</i>	1	
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
<i>amcinonide cream 0.1%</i>	1	
APEXICON E CRE 0.05%	NC	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	NC	
<i>betamethasone valerate aerosol foam 0.12%</i>	1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	
BRYHALI LOT 0.01%	2	PA
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	NC	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	NC	
CAPEX SHA 0.01%	2	PA
<i>clobetasol e cre 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate emollient base cream 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	NC	
<i>clobetasol propionate foam 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate lotion 0.05%</i>	1	
<i>clobetasol propionate oint 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate soln 0.05%</i>	1	
<i>clobetasol propionate spray 0.05%</i>	NC	
CLOBEX LOT 0.05%	3	PA
CLOBEX SHA 0.05%	3	PA
CLOBEX SPR 0.05%	NC	
<i>clocortolone pivalate cream 0.1%</i>	NC	
<i>clodan sha 0.05%</i>	1	
CLODERM CRE 0.1%	3	PA
CORDRAN 80X3 TAP 4MCG/CM	NC	
CORDRAN CRE 0.05%	NC	
CORDRAN CRE 0.025%	NC	
CORDRAN LOT 0.05%	NC	
CORDRAN OIN 0.05%	NC	
DERMA-SMOOTH OIL /FS BODY	3	PA
DERMA-SMOOTH OIL /FS SCLP	3	PA
<i>desonide cream 0.05%</i>	1	PA
<i>desonide gel 0.05%</i>	NC	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
DESOWEN CRE 0.05%	3	PA
<i>desoximetasone cream 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>desoximetasone oint 0.05%</i>	NC	
<i>desoximetasone oint 0.25%</i>	1	
<i>desoximetasone spray 0.25%</i>	1	
<i>desrx gel 0.05%</i>	NC	
<i>diflorasone diacetate cream 0.05%</i>	NC	
<i>diflorasone diacetate oint 0.05%</i>	NC	
DIPROLENE OIN 0.05%	3	PA
DUOBRII LOT	NC	
ENSTILAR AER	2	PA
EPIFOAM AER 1%	3	
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinonide cream 0.1%</i>	NC	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	NC	
<i>flurandrenolide lotion 0.05%</i>	NC	
<i>flurandrenolide oint 0.05%</i>	NC	
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halcinonide cream 0.1%</i>	NC	
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
HALOG CRE 0.1%	NC	
HALOG OIN 0.1%	NC	
HALOG SOL 0.1%	NC	
<i>hydrocortisone butyrate cream 0.1%</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	NC	
<i>hydrocortisone butyrate lotion 0.1%</i>	NC	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	1	
IMPOYZ CRE 0.025%	NC	
KENALOG AER SPRAY	3	PA
LOCOID LOT 0.1%	3	PA
MICORT-HC CRE 2.5%	NC	
<i>mometasone furoate cream 0.1%</i>	1	PA
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
<i>nolix cre 0.05%</i>	NC	
<i>nolix lot 0.05%</i>	NC	
OLUX AER 0.05%	3	PA
OLUX-E AER 0.05%	NC	
PANDEL CRE 0.1%	3	PA
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1%	3	
PRAMOSONE LOT 2.5%	3	
<i>prednicarbate oint 0.1%</i>	1	
PSORCON CRE 0.05%	NC	
SERNIVO SPR 0.05%	3	PA
SYNALAR CRE 0.025%	3	PA
SYNALAR OIN 0.025%	3	PA
TACLONEX SUS	3	PA
<i>texacort sol 2.5%</i>	1	PA
TOPICORT CRE 0.05%	3	PA
TOPICORT CRE 0.25%	3	PA
TOPICORT GEL 0.05%	3	PA
TOPICORT OIN 0.05%	3	PA
TOPICORT OIN 0.25%	3	PA
TOPICORT SPR 0.25%	3	PA
<i>tovet aer 0.05%</i>	NC	
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	NC	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>trianex oin 0.05%</i>	NC	
<i>triderm cre 0.1%</i>	1	
<i>triderm cre 0.5%</i>	1	
ULTRAVATE LOT 0.05%	NC	
VANOS CRE 0.1%	3	PA
ECZEMA AGENTS		
ADBRY INJ 150MG/ML	5	SP, PA, QL
ADBRY INJ 300/2ML	5	SP, PA, QL
CIBINQO TAB 50MG	5	SP, PA, QL
CIBINQO TAB 100MG	5	SP, PA, QL
CIBINQO TAB 200MG	5	SP, PA, QL
DUPIXENT INJ 200/1.14	5	SP, PA, QL
DUPIXENT INJ 200MG	5	SP, PA, QL
DUPIXENT INJ 300/2ML	5	SP, PA, QL
OPZELURA CRE 1.5%	2	PA, QL
EMOLLIENT/KERATOLYTIC AGENTS		
<i>urea cre 41%</i>	NC	
<i>uredeb cre 39%</i>	1	
EMOLLIENTS		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
LACTIC ACID CRE E	3	
LACTIC ACID LOT 10%	3	
ENZYMES - TOPICAL		
SANTYL OIN 250/GM	3	
HAIR GROWTH AGENTS		
LITFULO CAP 50MG	6	SP, PA
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod cream 3.75%</i>	2	
<i>imiquimod cream 5%</i>	1	
ZYCLARA CRE 3.75%	3	
ZYCLARA PUMP CRE 2.5%	3	
ZYCLARA PUMP CRE 3.75%	3	
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
ELIDEL CRE 1%	NC	
HYFTOR GEL 0.2%	NC	
<i>pimecrolimus cream 1%</i>	1	PA
PROTOPIC OIN 0.1%	3	PA
PROTOPIC OIN 0.03%	3	PA
<i>tacrolimus oint 0.1%</i>	1	PA
<i>tacrolimus oint 0.03%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
KERATOLYTIC/ANTIMITOTIC AGENTS		
CONDYLOX GEL 0.5%	3	
GORDOFILM SOL	3	
<i>podofilox gel 0.5%</i>	2	
<i>podofilox soln 0.5%</i>	1	
PYROGALL ACD OIN	3	
SALIMEZ FORT CRE 10%	3	
LINIMENTS		
TURPENTINE SOL SPIRITS	3	
LOCAL ANESTHETICS - TOPICAL		
ANACAINE OIN	3	
CRYODOSE AER TA	3	
ETHYL CHLOR AER FINE PIN	3	
ETHYL CHLOR AER FN STRM	3	
ETHYL CHLOR AER MED JET	3	
ETHYL CHLOR AER MED STRM	3	
ETHYL CHLOR AER MIST	3	
<i>ethyl chloride aerosol spray</i>	1	
GEBAUERS SPR AER /STRETCH	3	
<i>glydo gel 2%</i>	1	PA, QL
LIDOCAINE CRE TETRACAI	NC	
<i>lidocaine hcl soln 4%</i>	1	PA, QL
<i>lidocaine hcl urethral/mucosal gel 2%</i>	2	PA, QL
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	PA, QL
<i>lidocaine oint 5%</i>	1	PA, QL
<i>lidocaine patch 5%</i>	1	PA, QL
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	PA, QL
LIDODERM DIS 5%	3	PA, QL
<i>lydexa cre 4.12%</i>	NC	
PAIN EASE AER MD STRM	3	
PAIN EASE AER MIST	3	
PLIAGLIS CRE 7-7%	NC	
PRAMOX GEL 1%	NC	
QUTENZA KIT 8% 1-PCH	6	SP
QUTENZA KIT 8% 2-PCH	6	SP
QUTENZA KIT 8% 4-PCH	6	SP
<i>tridacaine pad 5%</i>	1	PA
<i>zeruvia pad 4-1%</i>	1	
ZTLIDO PAD 1.8%	3	PA, QL
MISC. DERMATOLOGICAL PRODUCTS		
ALADERM PLUS EMU	NC	

Drug Name	Drug Tier	Requirements/Limits
ALEVAMAX CRE	3	PA
ALEVICYN SG GEL ANTIPRUR	NC	
CERACADE EMU	3	PA
CERACADE EMU	NC	
CERAMAX CRE	NC	
DEXERYL CRE	3	PA
EMULSION SB EMU	3	PA
EMULSION SB EMU	NC	
ENTTY EMU SPRAY	3	PA
ENTTY EMU SPRAY	NC	
EPICERAM EMU	NC	
HPR PLUS AER	NC	
HPR PLUS CRE	3	PA
HPR PLUS CRE	NC	
HPR PLUS KIT	NC	
HYLATOPIC CRE PLUS	3	PA
KAMDOY EMU	NC	
LEVICYN GEL	3	PA
MIMYX CRE	3	PA
NEOSALUS AER	3	PA
NEOSALUS CRE	3	PA
NEOSALUS LOT	3	PA
NIVATOPIC CRE PLUS	3	PA
PHLAG SPR	3	PA
PR CREAM KIT	3	PA
PRESERA AER	3	PA
PRUCLAIR CRE	3	PA
PRUMYX CRE	3	PA
REMIGEN CREA CRE	3	PA
SEBUDERM GEL	3	PA
STRATA MARK GEL	NC	
SUVICORT EMU	NC	
SYNERDERM EMU	NC	
TETRIX CRE	3	PA
XERALUX CRE	3	PA
MISC. TOPICAL		
ACUICYN SOL	NC	
ARNICA TIN FLOWER	3	
AVENOVA SOL 0.01%	NC	
BENZOIN TIN NF	3	
BORIC ACID GRA	3	
DRYSOL SOL 20%	3	
HYCLODEX SOL 0.012%	NC	

Drug Name	Drug Tier	Requirements/Limits
HYPOCYN SOL 0.012%	NC	
QBREXZA PAD 2.4%	3	
XERAC-AC SOL 6.25%	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OIN 2%	2	ST, QL
ZORYVE CRE 0.15%	2	PA, QL
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	2	PA
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	NC	
FINACEA AER 15%	2	PA
FINACEA GEL 15%	NC	
<i>ivermectin cream 1%</i>	NC	
METROCREAM CRE 0.75%	3	
METROGEL GEL 1%	3	
METROLOTION LOT 0.75%	3	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
MIRVASO GEL 0.33%	NC	
NORITATE CRE 1%	NC	
ORACEA CAP 40MG	1	
REMYDA GEL 0.25%	NC	
RESTIMO GEL 1-1%	NC	
RHOFADE CRE 1%	NC	
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	
SOOLANTRA CRE 1%	1	PA
SCABICIDES & PEDICULICIDES		
<i>crotan lot 10%</i>	2	
ELIMITE CRE 5%	3	
<i>malathion lotion 0.5%</i>	2	
NATROBA SUS 0.9%	3	
OVIDE LOT 0.5%	3	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	2	
SULF LIME SOL	3	
SCAR TREATMENT PRODUCTS		
BEAU RX GEL	NC	

Drug Name	Drug Tier	Requirements/Limits
KELARX GEL	NC	
RECEDO GEL	NC	
SILIPAC KIT	NC	
TAR PRODUCTS		
coal tar soln 20%	1	
WOUND CARE PRODUCTS		
ACTCT FLEX 3 PAD 4"X4"	3	PA
ACTI ANTIMIC PAD 4"X4"	3	PA
ACTICOAT 7 PAD 4"X5"	3	PA
ACTICOAT MIS 4"X4"	3	PA
ALEVICYN SOL DERMAL	NC	
ALLEVYN AG MIS 6-3/4"	3	PA
ALLEVYN AG MIS 9"X9"SAC	3	PA
ALLEVYN AG PAD 3"X3"	3	PA
ALLEVYN AG PAD 4"X4"	3	PA
ALLEVYN AG PAD 5"X5"	3	PA
ALLEVYN AG PAD 7"X7"	3	PA
ALLEVYN GENT PAD 4"X4	3	PA
ALLEVYN GENT PAD 8"X8"	3	PA
AMORPH WOUND GEL DRESSING	3	PA
AQUACEL AG PAD 5"X4"	3	PA
AQUACEL FOAM PAD 7"X7"	3	PA
ARIDA GEL	3	PA
AVO CREAM EMU	3	PA
BIAFINE EMU	3	PA
BIONECT AER 0.2%	3	PA
BIONECT CRE 0.2%	3	PA
BIONECT GEL 0.2%	3	PA
BIOSTEP MIS 4"X4"	3	PA
CA ALGINATE MIS 12" ROPE	3	PA
CA ALGINATE PAD 2"X2"	3	PA
CA ALGINATE PAD 4"X4"	3	PA
CA ALGINATE PAD 4"X8"	3	PA
CURITY HYPER MIS 1/2"X15'	3	PA
CURITY NAACL PAD 6"X6-3/4	3	PA
DURAFIBER AG PAD 4"X4"	3	PA
ENDO DERMAL MIS 5X5 CM	3	PA
FILSUVEZ GEL 10%	NC	
HYDRFRA BLUE PAD RDY 2.5"	3	PA
HYDRFRA BLUE PAD RDY 4X5"	3	PA
HYDRFRA BLUE PAD RDY 8X8"	3	PA
HYDRFRA MRF PAD 2"X2.75"	3	PA

Drug Name	Drug Tier	Requirements/Limits
HYDROFERA PAD BLUE 2X2	3	PA
HYDROFERA PAD BLUE 4X4	3	PA
HYDROFERA PAD BLUE 6X6	3	PA
HYDROFERA PAD BLUE 9MM	3	PA
HYDROFERA PAD MRF4"X4"	3	PA
HYDROFERA PAD MRF 2.5"	3	PA
HYDROFRA MRF PAD 2-1/4X8"	3	PA
KERAGEL GEL WOUND	3	PA
KERAGELT GEL	3	PA
KERAMATRIX MIS 2X3CM	3	PA
KERAMATRIX MIS 5X5CM	3	PA
KERAMATRIX MIS 10X10CM	3	PA
KERASTAT CRE	3	PA
KERASTAT GEL 5%	3	PA
LEVICYN SOL DERMAL	NC	
LIDOTREX GEL 2%	NC	
LUXAMEND CRE	3	PA
MATRIX WOUND MIS BILAYER	3	PA
MICROCYN LIQ	3	PA
MIRO3D WOUND PAD 2X2X2CM	3	PA
MIRO3D WOUND PAD 3X3X2CM	3	PA
MIRO3D WOUND PAD 4X4X2CM	3	PA
MIRO3D WOUND PAD 5X5X2CM	3	PA
MIRO3D WOUND PAD 7X5X2CM	3	PA
MIRO3D WOUND PAD 10X5X2CM	3	PA
MIROTRACT MIS 3MMX5CM	3	PA
MIROTRACT MIS 3MMX9CM	3	PA
MIROTRACT MIS 5MMX5CM	3	PA
MIROTRACT MIS 5MMX9CM	3	PA
NORMLGEL AG GEL	3	PA
OMEZA COLLAG LIQ 1.6/2ML	3	PA
RADIAPLEXRX GEL	3	PA
REGRANEX GEL 0.01%	3	
RESTORE SILV PAD 2"X2"	3	PA
RESTORE SILV PAD 4"X4"	3	PA
RESTORE SILV PAD 4"X4.75"	3	PA
RESTORE SILV PAD 4"X5"	3	PA
SILVRSTAT GEL DRESSING	3	PA
SOLOX GEL	3	PA
SONAFINE EMU	3	PA
STRATA GRT GEL	NC	
VASHE CLEANS SOL	NC	
VASHE WOUND SOL THERAPY	3	PA

Drug Name	Drug Tier	Requirements/Limits
VENELEX OIN	3	PA
XEROFORM OCL PAD 1X8"	3	PA
XEROFORM OIL MIS 1"X8"	3	PA
XEROFORM OIL MIS ROLL 4X9	3	PA
XEROFORM OIL PAD 2"X2"	3	PA
XEROFORM PET PAD 4X4 DRES	3	PA
XEROFORM PET PAD 5X9 DRES	3	PA
XEROFRM GAUZ MIS 1"X8"	3	PA
XEROFRM GAUZ MIS 5"X9"	3	PA
XEROFRM GAUZ PAD 5"X9"	3	PA
XEROFRM PETR PAD 2"X2"	3	PA
XEROFRM PETR PAD 4"X4"	3	PA
XEROFRM ROLL MIS 4"X9'	3	PA

DIAGNOSTIC PRODUCTS

DIAGNOSTIC PRODUCTS, MISC.

BREEZA ORAL SOL ABD/PELV	3	
BREEZA ORAL SOL CONTRAST	3	

DIAGNOSTIC TESTS

ACCU-CHEK TES AVIVA PL	7	OTC; PV
ACCU-CHEK TES GUIDE	7	OTC; PV
ACCU-CHEK TES SMART	7	OTC; PV
ACCUTREND TES GLUCOSE	NC	OTC
ACURA TES BLD GLUC	NC	OTC
ADVANCE TES INTUITIO	NC	OTC
ADVANCE TES MICRO-DW	NC	OTC
ADVOCATE TES	NC	OTC
ADVOCATE TES REDI-COD	NC	OTC
ADVOCATE TES REDICODE	NC	OTC
AGAMATRIX TES AMP	NC	OTC
AGAMATRIX TES JAZZ	NC	OTC
AGAMATRIX TES KEYNOTE	NC	OTC
AGAMATRIX TES PRESTO	NC	OTC
ASSURE 3 TES	NC	OTC
ASSURE 4 TES	NC	OTC
ASSURE II TES	NC	OTC
ASSURE II TES CHECK	NC	OTC
ASSURE PRISM TES MULTI	NC	OTC
ASSURE PRO TES	NC	OTC
ASSURE TES PLATINUM	NC	OTC
AT LAST TES	NC	OTC
AUTOCODE TES BLD GLUC	NC	OTC
BAYER BREEZE MIS 2 TEST	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
BG STAR TES BLD GLUC	NC	OTC
BIOSCANNER TES GLUCOSE	NC	OTC
BIOTEL CARE TES STRIPS	NC	OTC
BLOOD GLUCOS TES	NC	OTC
BLOOD GLUCOS TES PREMIUM	NC	OTC
BLOOD GLUCOS TES STRIPS	NC	OTC
BREEZE 2 MIS TEST	NC	OTC
CARESENS N TES	NC	OTC
CARESENS N TES GLUCOSE	NC	OTC
CLEVER CHEK TES	NC	OTC
CLEVER CHEK TES AUTO CD	NC	OTC
CLEVER CHEK TES VOICE	NC	OTC
CLEVER CHOIC TES MICRO	NC	OTC
CLEVR CHOICE TES AUTO-CD	NC	OTC
CONFIRM/MICR TES GLUCOSE	NC	OTC
CONTOUR TES BLD GLUC	NC	OTC
CONTOUR TES NEXT	NC	OTC
CONTROL AST TES	NC	OTC
CONTROL TES	NC	OTC
COOL BLOOD TES GLUCOSE	NC	OTC
CVS ADVANCED TES GLUCOSE	NC	OTC
CVS TRUE MET TES GLUCOSE	NC	OTC
D-CARE BLOOD TES GLUCOSE	NC	
DIATRUE PLUS TES STRIPS	NC	OTC
DUO-CARE TES	NC	OTC
EASY PLUS II TES BLD GLUC	NC	OTC
EASY PLUS TES BLD GLUC	NC	OTC
EASY STEP TES	NC	OTC
EASY TALK TES BLD GLUC	NC	OTC
EASY TOUCH TES GLUCOSE	NC	OTC
EASY TOUCH TES STRIPS	NC	OTC
EASY TRAK TES BLD GLUC	NC	OTC
EASYGLUCO TES	NC	OTC
EASYGLUCO TES PLUS	NC	OTC
EASYMAX 15 TES	NC	OTC
EASYMAX TES	NC	OTC
EASYPLUS TES BLD GLUC	NC	OTC
EASYPRO PLUS TES	NC	OTC
EASYPRO TES BLD GLUC	NC	OTC
ELEMENT TES	NC	OTC
ELEMNT COMPA TES STRIPS	NC	OTC
EMBRACE EVO TES	NC	OTC
EMBRACE PRO TES	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
EMBRACE TES BLD GLUC	NC	OTC
EQL TRUETEST TES BLD GLUC	NC	OTC
EVENCARE + TES BLD GLUC	NC	OTC
EVENCARE G2 TES	NC	OTC
EVENCARE G3 TES	NC	OTC
EVENCARE TES BLD GLUC	NC	OTC
EVENCARE TES MINI	NC	OTC
EVOLUTION TES AUTOCODE	NC	OTC
EXACTECH TES	NC	OTC
EXACTECH TES R-S-G	NC	OTC
EZ SMART PLS TES BLD GLUC	NC	OTC
EZ SMART TES BLD GLUC	NC	OTC
FIFTY50 GLUC TES 2.0	NC	OTC
FORA BLOOD TES GLUCOSE	NC	OTC
FORA D15G TES BLD GLUC	NC	OTC
FORA D20 TES BLD GLUC	NC	OTC
FORA D40/G31 TES GLUCOSE	NC	OTC
FORA G20 TES BLD GLUC	NC	OTC
FORA G30/V10 TES BLD GLUC	NC	OTC
FORA GD20 TES BLD GLUC	NC	OTC
FORA GD50 TES	NC	OTC
FORA TN'G TES TN'G VOI	NC	OTC
FORA V10 TES BLD GLUC	NC	OTC
FORA V12 TES BLD GLUC	NC	OTC
FORA V20 TES BLD GLUC	NC	OTC
FORA V30A TES BLD GLUC	NC	OTC
FORACARE TES GD40	NC	OTC
FORACARE TES PREM V10	NC	OTC
FORACARE TES TST N GO	NC	OTC
FORTISCARE TES BLD GLUC	NC	OTC
FREESTYLE TES	NC	OTC
FREESTYLE TES INSULINX	NC	OTC
FREESTYLE TES LITE	NC	OTC
FREESTYLE TES PREC NEO	NC	OTC
GE100 BLOOD TES GLUCOSE	NC	OTC
GENSTRIP 50 TES	NC	OTC
GHT TEST TES STRIPS	NC	OTC
GLUCO PERFEC TES 3	NC	OTC
GLUCOCARD 01 TES PLUS	NC	OTC
GLUCOCARD 01 TES SENSOR	NC	OTC
GLUCOCARD TES EXPRESSI	NC	OTC
GLUCOCARD TES VITAL	NC	OTC
GLUCOCARD TES X-SENSOR	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
GLUCOCOM TES	NC	OTC
GLUCONAVII TES STRIPS	NC	OTC
GLUCOSE TES STRIPS	NC	OTC
GMATE BLOOD TES GLUCOSE	NC	OTC
IHEALTH BLOO TES GLUCOSE	NC	OTC
IN TOUCH TES BLOOD	NC	OTC
INFINITY TES BLD GLUC	NC	OTC
KROGER BLOOD TES GLUCOSE	NC	OTC
KROGER TES	NC	OTC
LIBERTY NEXT TES GEN	NC	OTC
LIBERTY TES	NC	OTC
MAXIMA BLOOD TES GLUCOSE	NC	OTC
MEIJER BLOOD TES GLUCOSE	NC	OTC
MEIJER TES TRUETEST	NC	OTC
MEIJER TES TRUETRAC	NC	OTC
MICRODOT TES	NC	OTC
MYGLUCOHEALT TES BLD GLUC	NC	OTC
NEUTEK 2TEK TES STRIPS	NC	OTC
NEXGEN TES	NC	OTC
NO CODING TES BLD GLUC	NC	OTC
NOVA MAX TES GLUCOSE	NC	OTC
ON CALL PLUS TES BLD GLUC	NC	OTC
ON CALL TES EXPRESS	NC	OTC
ON CALL VIVD TES BLD GLUC	NC	OTC
ONETOUCH TES ULT BLUE	7	OTC; PV
ONETOUCH TES ULTRA	7	OTC; PV
ONETOUCH TES VERIO	7	OTC; PV
OPTIUM TES	NC	OTC
OPTIUMEZ TES	NC	OTC
OPTUMRX TES BLD GLUC	NC	OTC
PEN NEEDLES MIS 29GX12MM	NC	OTC
POCKETCHEM TES EZ	NC	OTC
PRECISION PT TES OF CARE	NC	OTC
PRECISION TES PCX	NC	OTC
PRECISION TES PCX PLUS	NC	OTC
PRECISION TES QID	NC	OTC
PRECISION TES SOF-TACT	NC	OTC
PRECISION TES XTRA	NC	OTC
PRODIGY NO TES CODING	NC	OTC
PTS PANELS TES GLUCOSE	NC	OTC
QUICKTEK TES	NC	OTC
QUINTET AC TES BLD GLUC	NC	OTC
QUINTET TES BLD GLUC	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
RA TRUETEST TES	NC	OTC
REFUAH PLUS TES BLD GLUC	NC	OTC
RELION BLOOD TES GLUCOSE	NC	OTC
RELION PLATN TES GLUCOSE	NC	OTC
RELION PRIME TES	NC	OTC
RELION PRIME TES GLUCOSE	NC	OTC
RELION TES ULTIMA	NC	OTC
REVEAL TES BLD GLUC	NC	OTC
RIGHTEST TES GS100	NC	OTC
RIGHTEST TES GS300	NC	OTC
RIGHTEST TES GS550	NC	OTC
SMART SENSE TES TEST	NC	OTC
SMARTEST TES BLD GLUC	NC	OTC
SOLUS V2 TES AUDIBLE	NC	OTC
SUPREME TES	NC	OTC
SURE EDGE TES	NC	OTC
SURE-TEST TES EASYPLUS	NC	OTC
SURECHEK TES BLD GLUC	NC	OTC
TRUE METRIX TES GLUCOSE	NC	OTC
TRUETEST TES	NC	OTC
TRUETEST TES BLD GLUC	NC	OTC
TRUETRACK TES	NC	OTC
TRUETRACK TES BLD GLUC	NC	OTC
ULTIMA TES	NC	OTC
ULTRATRAK TES ULTIMATE	NC	OTC
ULTRATRK PRO TES	NC	OTC
UNISTRIPI TES GENERIC	NC	OTC
VOCAL POINT TES BLD GLUC	NC	OTC
XPRESS TES BLD GLUC	NC	OTC

RADIOGRAPHIC CONTRAST MEDIA

<i>diatrizoate meglumine & sodium oral soln 66-10%</i>	1
<i>iopamidol inj 51%</i>	1
<i>iopamidol iv soln 61%</i>	1
<i>iopamidol iv soln 76%</i>	1

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

DIETARY MANAGEMENT PRODUCTS

PODIAPN CAP	3

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP 3000UNIT	2
CREON CAP 6000UNIT	2

Drug Name	Drug Tier	Requirements/Limits
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
SUCRAID SOL 8500/ML	6	
VIOKACE TAB 10440	2	
VIOKACE TAB 20880	2	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	1	
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
KEVEYIS TAB 50MG	6	SP, PA, QL
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
<i>ormaldi tab 50mg</i>	4	SP, PA, QL

DIURETIC COMBINATIONS

ALDACTAZIDE TAB 25/25	3	PV
ALDACTAZIDE TAB 50/50	3	PV
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	PV
MAXZIDE TAB 75-50	3	
MAXZIDE-25 TAB	3	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	PV

LOOP DIURETICS

<i>bumetanide inj 0.25 mg/ml</i>	1
<i>bumetanide tab 0.5 mg</i>	1
<i>bumetanide tab 1 mg</i>	1
<i>bumetanide tab 2 mg</i>	1
BUMEX TAB 0.5MG	3
EDECRIN TAB 25MG	3
<i>ethacrynate sodium for inj 50 mg</i>	1
<i>ethacrynic acid tab 25 mg</i>	1
<i>furosemide inj 10 mg/ml</i>	1
<i>furosemide oral soln 8 mg/ml</i>	1
<i>furosemide oral soln 10 mg/ml</i>	1
<i>furosemide tab 20 mg</i>	1
<i>furosemide tab 40 mg</i>	1
<i>furosemide tab 80 mg</i>	1
LASIX TAB 20MG	3
LASIX TAB 40MG	3
LASIX TAB 80MG	3
SOAANZ TAB 20MG	NC
SOAANZ TAB 40MG	NC
SOAANZ TAB 60MG	NC
<i>torsemide tab 5 mg</i>	1
<i>torsemide tab 10 mg</i>	1
<i>torsemide tab 20 mg</i>	1
<i>torsemide tab 100 mg</i>	1

OSMOTIC DIURETICS

<i>mannitol iv soln 20%</i>	1
<i>mannitol iv soln 25%</i>	1
<i>osmitrol inj 10%</i>	1
<i>osmitrol inj 15%</i>	1
<i>osmitrol vfx inj 20%</i>	1

POTASSIUM SPARING DIURETICS

ALDACTONE TAB 25MG	3
ALDACTONE TAB 50MG	3
ALDACTONE TAB 100MG	3
<i>amiloride hcl tab 5 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
CAROSPIR SUS 25MG/5ML	NC	
DYRENIUM CAP 50MG	NC	
DYRENIUM CAP 100MG	NC	
<i>spironolactone susp 25 mg/5ml</i>	2	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
<i>triamterene cap 100 mg</i>	1	

THIAZIDES AND THIAZIDE-LIKE DIURETICS

<i>chlorothiazide sodium for inj 500 mg</i>	1	
<i>chlorthalidone tab 25 mg</i>	1	PV
<i>chlorthalidone tab 50 mg</i>	1	PV
DIURIL SUS 250/5ML	3	PV
<i>hydrochlorothiazide cap 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 25 mg</i>	1	PV
<i>hydrochlorothiazide tab 50 mg</i>	1	PV
<i>indapamide tab 1.25 mg</i>	1	PV
<i>indapamide tab 2.5 mg</i>	1	PV
INZIRQO SUS 10MG/ML	NC	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
SOD DIURIL INJ 500MG	3	
THALITONE TAB 15MG	3	PV

ENDOCRINE AND METABOLIC AGENTS - MISC.

ADRENAL STEROID INHIBITORS

ISTURISA TAB 1MG	NC	
ISTURISA TAB 5MG	NC	
ISTURISA TAB 10MG	NC	
RECORLEV TAB 150MG	NC	

BONE DENSITY REGULATORS

ACTONEL TAB 35MG	3	PV
ACTONEL TAB 150MG	3	PV
<i>alendronate sodium oral soln 70 mg/75ml</i>	2	PV
<i>alendronate sodium tab 5 mg</i>	1	PV
<i>alendronate sodium tab 10 mg</i>	1	PV
<i>alendronate sodium tab 35 mg</i>	1	PV
<i>alendronate sodium tab 70 mg</i>	1	PV
ATELVIA TAB	3	PV
BINOSTO TAB 70MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
<i>calcitonin (salmon) inj 200 unit/ml</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	PV
EVENITY INJ 105MG	NC	
FORTEO INJ 560/2.24	6	SP, PA, QL; PV
FOSAMAX + D TAB 70-2800	3	PV
FOSAMAX + D TAB 70-5600	3	PV
FOSAMAX TAB 70MG	3	PV
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	1	PV
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	PV
MIACALCIN INJ 200/ML	NC	
MIACALCIN INJ 400/2ML	NC	
NATPARA INJ 25MCG	6	SP, PA, QL
NATPARA INJ 50MCG	6	SP, PA, QL
NATPARA INJ 75MCG	6	SP, PA, QL
NATPARA INJ 100MCG	6	SP, PA, QL
<i>pamidronate disodium iv soln 3 mg/ml</i>	1	
<i>pamidronate disodium iv soln 9 mg/ml</i>	1	
PAMIDRONATE INJ 6MG/ML	3	
PROLIA INJ 60MG/ML	5	SP, PA, QL; PV
RECLAST INJ 5/100ML	6	SP, PA; PV
<i>risedronate sodium tab 5 mg</i>	1	PV
<i>risedronate sodium tab 30 mg</i>	2	PV
<i>risedronate sodium tab 35 mg</i>	1	PV
<i>risedronate sodium tab 150 mg</i>	1	PV
<i>risedronate sodium tab delayed release 35 mg</i>	1	PV
TERIPARATIDE INJ 620/2.48	NC	
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	4	SP, PA, QL; PV
TYMLOS INJ	5	SP, PA, QL; PV
XGEVA INJ	6	SP, PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	SP, PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	SP, PA; PV
ZOLEDRONIC INJ 4/100ML	6	SP, PA
CORTICOTROPIN		
ACTHAR INJ 80UNIT	6	SP, PA, QL
ACTHAR INJ GEL	6	SP, PA, QL
CORTROPHIN INJ 80UNT/ML	6	SP, PA, QL
FERTILITY REGULATORS		
CHOR GONADOT INJ 10000UNT	NC	SP
<i>clomid tab 50mg</i>	1	PA
<i>clomiphene citrate tab 50 mg</i>	1	PA
FOLLISTIM AQ INJ 300UNIT	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
FOLLISTIM AQ INJ 600UNIT	5	SP, PA, QL
FOLLISTIM AQ INJ 900UNIT	5	SP, PA, QL
GONAL-F INJ 450UNIT	NC	SP
GONAL-F INJ 1050UNIT	NC	SP
GONAL-F RFF INJ 75UNIT	NC	SP
GONAL-F RFF INJ 300/0.5	NC	SP
GONAL-F RFF INJ 450/0.75	NC	SP
GONAL-F RFF INJ 900/1.5	NC	SP
MENOPUR INJ 75UNIT	5	SP, PA
NOVAREL INJ 5000UNIT	NC	SP
OVIDREL INJ	NC	SP
PREGNYL INJ 10000UNT	5	SP, PA, QL
GNRH/LHRH ANTAGONISTS		
<i>cetrorelix acetate for inj kit 0.25 mg</i>	4	SP, PA
<i>fyremadel sol 250/0.5</i>	NC	SP
GANIRELIX AC INJ 250/0.5	4	SP, PA
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	NC	SP
ORILISSA TAB 150MG	2	PA
ORILISSA TAB 200MG	2	PA
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ 10MG	NC	SP
SOMAVERT INJ 15MG	NC	SP
SOMAVERT INJ 20MG	NC	SP
SOMAVERT INJ 25MG	NC	SP
SOMAVERT INJ 30MG	NC	SP
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA SV INJ 2MG	6	SP, PA, QL
GROWTH HORMONES		
GENOTROPIN INJ 0.2MG	NC	SP
GENOTROPIN INJ 0.4MG	NC	SP
GENOTROPIN INJ 0.6MG	NC	SP
GENOTROPIN INJ 0.8MG	NC	SP
GENOTROPIN INJ 1.2MG	NC	SP
GENOTROPIN INJ 1.4MG	NC	SP
GENOTROPIN INJ 1.6MG	NC	SP
GENOTROPIN INJ 1.8MG	NC	SP
GENOTROPIN INJ 1MG	NC	SP
GENOTROPIN INJ 2MG	NC	SP
GENOTROPIN INJ 5MG	NC	SP
GENOTROPIN INJ 12MG	NC	SP
HUMATROPE INJ 6MG	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
HUMATROPE INJ 12MG	5	SP, PA
HUMATROPE INJ 24MG	5	SP, PA
NGENLA INJ 24/1.2ML	NC	SP
NGENLA INJ 60/1.2ML	NC	SP
NORDITROPIN INJ 5/1.5ML	5	SP, PA
NORDITROPIN INJ 10/1.5ML	5	SP, PA
NORDITROPIN INJ 15/1.5ML	5	SP, PA
NORDITROPIN INJ 30/3ML	5	SP, PA
NUTROPIN AQ INJ 10MG/2ML	NC	SP
NUTROPIN AQ INJ 20MG/2ML	NC	SP
NUTROPIN AQ INJ NUSPIN 5	NC	SP
OMNITROPE INJ 5.8MG	NC	SP
OMNITROPE INJ 5/1.5ML	NC	SP
OMNITROPE INJ 10/1.5ML	NC	SP
SAIZEN INJ 5MG	NC	SP
SAIZEN INJ 8.8MG	NC	SP
SEROSTIM INJ 4MG	6	SP, PA
SEROSTIM INJ 5MG	6	SP, PA
SEROSTIM INJ 6MG	6	SP, PA
SKYTROFA INJ 3.6MG	NC	SP
SKYTROFA INJ 3MG	NC	SP
SKYTROFA INJ 4.3MG	NC	SP
SKYTROFA INJ 5.2MG	NC	SP
SKYTROFA INJ 6.3MG	NC	SP
SKYTROFA INJ 7.6MG	NC	SP
SKYTROFA INJ 9.1MG	NC	SP
SKYTROFA INJ 11MG	NC	SP
SKYTROFA INJ 13.3MG	NC	SP
SOGROYA INJ 5MG/1.5	5	SP, PA
SOGROYA INJ 10MG/1.5	5	SP, PA
SOGROYA INJ 15MG/1.5	5	SP, PA
ZOMACTON INJ 5MG	NC	SP
ZOMACTON INJ 10MG	NC	SP
HORMONE RECEPTOR MODULATORS		
EVISTA TAB 60MG	3	PV
OSPHENA TAB 60MG	NC	
<i>raloxifene hcl tab 60 mg</i>	1	ACA, PV
INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS		
TEPEZZA INJ 500MG	6	SP, PA
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX INJ 40MG/4ML	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
FENSOLVI INJ 45MG	5	SP, PA, QL
LUPR DEP-PED INJ 3M 30MG	5	SP, PA, QL
LUPR DEP-PED INJ 7.5MG	5	SP, PA, QL
LUPR DEP-PED INJ 11.25MG	5	SP, PA, QL
LUPR DEP-PED INJ 15MG	5	SP, PA, QL
SUPPRELIN LA KIT 50MG	5	SP, PA
SYNAREL SOL 2MG/ML	3	PA
TRIPTODUR SUS 22.5MG	5	SP, PA
MENOPAUSAL SYMPTOMS SUPPRESSANTS		
VEOZAH TAB 45MG	NC	SP
METABOLIC MODIFIERS		
ALDURAZYME INJ 2.9MG/5M	6	SP, PA
AMMONUL INJ 10%	3	
<i>betaine powder for oral solution</i>	4	SP, PA
BRINEURA KIT 150/5ML	NC	SP
BUPHENYL POW	NC	SP
BUPHENYL TAB 500MG	NC	SP
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol inj 1 mcg/ml</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	1	
CARBAGLU TAB 200MG	NC	SP
<i>carglumic acid soluble tab 200 mg</i>	4	SP, PA
CARNITOR INJ 1GM/5ML	3	
CARNITOR SF SOL 1GM/10ML	NC	SP
CARNITOR SOL 1GM/10ML	NC	SP
CARNITOR TAB 330MG	NC	SP
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	4	SP, PA, QL
CITRULLINE TAB EASY 1GM	3	
CRYSVITA INJ 10MG/ML	6	PA, QL
CRYSVITA INJ 20MG/ML	6	PA, QL
CRYSVITA INJ 30MG/ML	6	PA, QL
CYSTADANE POW	NC	SP
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	1	
ELAPRASE INJ 6MG/3ML	6	SP, PA
ELFABRIO SOL 5MG/2.5	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ELFABRIO SOL 20/10ML	5	SP, PA
FABRAZYME INJ 5MG	5	SP, PA
FABRAZYME INJ 35MG	5	SP, PA
GALAFOLD CAP 123MG	5	SP, PA, QL
HECTOROL INJ 4MCG/2ML	3	
<i>javygtor pak 100mg</i>	4	SP, PA
<i>javygtor pow 500mg</i>	4	SP, PA
<i>javygtor tab 100mg</i>	4	SP, PA
KANUMA INJ 20/10ML	6	SP, PA
KUVAN POW 100MG	NC	SP
KUVAN POW 500MG	NC	SP
KUVAN TAB 100MG	NC	SP
LAMZEDE INJ 10MG	6	SP, PA
<i>levocarnitine inj 200 mg/ml</i>	1	
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
LUMIZYME INJ 50MG	6	SP, PA
MEPSEVII INJ 10MG/5ML	6	SP, PA
MYALEPT INJ 11.3MG	6	SP, PA, QL
NAGLAZYME INJ 1MG/ML	6	SP, PA
NEXVIAZYME INJ 100MG	5	SP, PA
<i>nitisinone cap 2 mg</i>	4	SP, PA
<i>nitisinone cap 5 mg</i>	4	SP, PA
<i>nitisinone cap 10 mg</i>	4	SP, PA
NITYR TAB 2MG	NC	SP
NITYR TAB 5MG	NC	SP
NITYR TAB 10MG	NC	SP
ORFADIN CAP 2MG	5	SP, PA
ORFADIN CAP 5MG	5	SP, PA
ORFADIN CAP 10MG	5	SP, PA
ORFADIN CAP 20MG	5	SP, PA
ORFADIN SUS 4MG/ML	5	SP, PA
PALYNZIQ INJ 2.5/0.5	NC	SP
PALYNZIQ INJ 10/0.5ML	NC	SP
PALYNZIQ INJ 20MG/ML	NC	SP
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	2	
<i>paricalcitol cap 4 mcg</i>	1	
<i>paricalcitol iv soln 2 mcg/ml</i>	1	
<i>paricalcitol iv soln 5 mcg/ml</i>	1	
PARSABIV INJ 2.5-0.5	NC	SP
PARSABIV INJ 5MG/ML	NC	SP
PARSABIV INJ 10MG/2ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
PHEBURANE MIS 483/GM	5	SP, PA, QL
RAVICTI LIQ 1.1GM/ML	NC	SP
RAYALDEE CAP 30MCG	3	
REVCovi INJ 1.6MG/ML	6	SP
ROCALtrol CAP 0.5MCG	2	
ROCALtrol CAP 0.25MCG	2	
ROCALtrol SOL 1MCG/ML	2	
<i>sapropterin dihydrochloride powder packet 100 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	4	SP, PA
SENSIPAR TAB 30MG	6	SP, PA, QL
SENSIPAR TAB 60MG	6	SP, PA, QL
SENSIPAR TAB 90MG	6	SP, PA, QL
<i>sodium benzoate & sodium phenylacetate iv soln 10-10%</i>	1	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	SP, PA, QL
<i>sodium phenylbutyrate tab 500 mg</i>	4	SP, PA, QL
STRENSIQ INJ 18/0.45	6	SP, PA
STRENSIQ INJ 28/0.7ML	6	SP, PA
STRENSIQ INJ 40MG/ML	6	SP, PA
STRENSIQ INJ 80/0.8ML	6	SP, PA
TRYNGOLZA INJ 80MG/0.8	NC	SP
VIMIZIM INJ 5MG/5ML	6	SP, PA
VYKAT XR TAB 25MG	NC	SP
VYKAT XR TAB 75MG	NC	SP
VYKAT XR TAB 150MG	NC	SP
XENPOZYME INJ 4MG	6	SP, PA
XENPOZYME SOL 20MG	6	SP, PA
XPHOZAH TAB 20MG	NC	SP
XPHOZAH TAB 30MG	NC	SP
XURIDEN POW 2GM	6	SP, QL
ZEMPLAR CAP 1MCG	3	
ZEMPLAR CAP 2MCG	3	
ZEMPLAR INJ 2MCG/ML	3	
ZEMPLAR INJ 5MCG/ML	3	
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA
NATRIURETIC PEPTIDES		
VOXZOGO INJ 0.4MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
VOXZOGO INJ 0.56MG	6	SP, PA, QL
VOXZOGO INJ 1.2MG	6	SP, PA, QL
POSTERIOR PITUITARY HORMONES		
DDAVP INJ 4MCG/ML	3	
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate inj 4 mcg/ml</i>	2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
NOC DURNA SUB 27.7MCG	3	
NOC DURNA SUB 55.3MCG	3	
VASOPRE/NACL INJ 100/100	NC	
VASOPRE/NACL INJ 100/250	NC	
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	1	
VASOSTRICT INJ 20UNT/ML	3	
VASOSTRICT SOL 40UNIT	3	
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	
SOMATOSTATIC AGENTS		
<i>lanreotide acetate extended release inj 120 mg/0.5ml</i>	4	SP, PA, QL
LANREOTIDE INJ 120/.5ML	6	SP, PA, QL
MYCAPSSA CAP 20MG	NC	SP
<i>octreotide acetate for im inj kit 20 mg</i>	4	SP, PA, QL
<i>octreotide acetate for im inj kit 30 mg</i>	4	SP, PA, QL
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	4	SP, PA, QL
SANDOSTATIN INJ 50MCG/ML	6	SP, PA, QL
SANDOSTATIN INJ 100MCG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
SANDOSTATIN INJ 500MCG	6	SP, PA, QL
SANDOSTATIN KIT LAR 10MG	NC	SP
SANDOSTATIN KIT LAR 20MG	NC	SP
SANDOSTATIN KIT LAR 30MG	NC	SP
SIGNIFOR INJ 0.3MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.6MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.9MG/ML	6	SP, PA, QL
SIGNIFOR LAR INJ 20MG	NC	SP
SIGNIFOR LAR INJ 40MG	NC	SP
SIGNIFOR LAR INJ 60MG	NC	SP
SOMATULINE INJ 60/0.2ML	5	SP, PA, QL
SOMATULINE INJ 90/0.3ML	5	SP, PA, QL
SOMATULINE INJ 120/.5ML	5	SP, PA, QL

VASOPRESSIN RECEPTOR ANTAGONISTS

JYNARQUE PAK 15MG	NC	SP
JYNARQUE PAK 30-15MG	NC	SP
JYNARQUE PAK 45-15MG	NC	SP
JYNARQUE PAK 60-30MG	NC	SP
JYNARQUE PAK 90-30MG	NC	SP
JYNARQUE TAB 15MG	NC	SP
JYNARQUE TAB 30MG	NC	SP
SAMSCA TAB 15MG	2	SP, PA
SAMSCA TAB 30MG	2	SP, PA
<i>tolvaptan tab 15 mg</i>	4	SP, PA
<i>tolvaptan tab 30 mg</i>	4	SP, PA

ESTROGENS

ESTROGEN COMBINATIONS

ACTIVELLA TAB 1-0.5MG	3	
ANGELIQ TAB 0.5-1MG	3	
ANGELIQ TAB 0.25-0.5	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PRO DIS WEEKLY	2	
COMBIPATCH DIS	2	
DUAVEE TAB 0.45-20	2	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>fyavolv tab 0.5-2.5</i>	1	
<i>fyavolv tab 1-5</i>	1	
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
MYFEMBREE TAB	2	PA

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
ORAHNN CAP	2	PA
PREMPHASE TAB	2	
PREMPRO TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-5	2	

ESTROGENS

ALORA DIS 0.1MG	3	
ALORA DIS 0.025MG	3	
ALORA DIS 0.075MG	3	
CLIMARA DIS 0.1MG	NC	
CLIMARA DIS 0.05MG	NC	
CLIMARA DIS 0.06MG	NC	
CLIMARA DIS 0.025MG	NC	
CLIMARA DIS 0.075MG	NC	
CLIMARA DIS 0.0375MG	NC	
DELESTROGEN INJ 10MG/ML	3	
DELESTROGEN INJ 20MG/ML	3	
DEPO-ESTRADI INJ 5MG/ML	3	
DIVIGEL GEL 0.5MG	3	
DIVIGEL GEL 0.25MG	3	
DIVIGEL GEL 0.75MG	3	
DIVIGEL GEL 1.25MG	3	
DIVIGEL GEL 1MG/GM	3	
<i>dotti dis 0.1mg</i>	1	
<i>dotti dis 0.05mg</i>	1	
<i>dotti dis 0.025mg</i>	1	
<i>dotti dis 0.075mg</i>	1	
<i>dotti dis 0.0375mg</i>	1	
ELESTRIN GEL 0.06%	3	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	
<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	1	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	
<i>estradiol valerate im in oil 40 mg/ml</i>	1	
ESTROGEL GEL 0.06%	3	
EVAMIST SPR 1.53MG	3	
<i>lyllana dis 0.1mg</i>	1	
<i>lyllana dis 0.05mg</i>	1	
<i>lyllana dis 0.025mg</i>	1	
<i>lyllana dis 0.075mg</i>	1	
<i>lyllana dis 0.0375mg</i>	1	
MENEST TAB 0.3MG	NC	
MENEST TAB 0.625MG	NC	
MENEST TAB 1.25MG	NC	
MENOSTAR DIS 14MCG	3	
MINIVELLE DIS 0.1MG	NC	
MINIVELLE DIS 0.05MG	NC	
MINIVELLE DIS 0.025MG	NC	
MINIVELLE DIS 0.075MG	NC	
MINIVELLE DIS 0.0375MG	NC	
PREMARIN INJ 25MG	3	
PREMARIN TAB 0.3MG	NC	
PREMARIN TAB 0.9MG	NC	
PREMARIN TAB 0.45MG	NC	
PREMARIN TAB 0.625MG	NC	
PREMARIN TAB 1.25MG	NC	
VIVELLE-DOT DIS 0.1MG	NC	
VIVELLE-DOT DIS 0.05MG	NC	
VIVELLE-DOT DIS 0.025MG	NC	

Drug Name	Drug Tier	Requirements/Limits
VIVELLE-DOT DIS 0.075MG	NC	
VIVELLE-DOT DIS 0.0375MG	NC	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA INJ 300MG	3	
BAXDELA TAB 450MG	3	
CIPRO (5%) SUS 250MG/5	3	
CIPRO (10%) SUS 500MG/5	3	
CIPRO TAB 250MG	3	
CIPRO TAB 500MG	3	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1	
<i>ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)</i>	2	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1	
<i>levofloxacin iv soln 25 mg/ml</i>	1	
<i>levofloxacin oral soln 25 mg/ml</i>	2	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
MOXIFLOXACIN INJ 400/250	NC	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	1	
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
MOTEGRITY TAB 1MG	NC	
MOTEGRITY TAB 2MG	NC	
<i>prucalopride succinate tab 1 mg (base equivalent)</i>	NC	
<i>prucalopride succinate tab 2 mg (base equivalent)</i>	NC	
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE TAB 3MG	3	PA

Drug Name	Drug Tier	Requirements/Limits
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM CAP 50MG	6	SP, PA
CHOLBAM CAP 250MG	6	SP, PA
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA TAB 5MG	6	SP, PA, QL
OCALIVA TAB 10MG	6	SP, PA, QL
GALLSTONE SOLUBILIZING AGENTS		
ACTIGALL CAP 300MG	2	
<i>chenodal tab 250mg</i>	6	SP, PA
CTEXLI TAB 250MG	NC	SP
URSO FORTE TAB 500MG	2	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
GASTROCROM CON 100/5ML	3	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
AMITIZA CAP 8MCG	NC	
AMITIZA CAP 24MCG	NC	
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
GASTROINTESTINAL STIMULANTS		
DEXPANTHENOL INJ 250MG/ML	3	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
REGLAN TAB 5MG	3	
REGLAN TAB 10MG	3	
HEPATOTROPICS		
REZDIFFRA TAB 60MG	NC	
REZDIFFRA TAB 80MG	NC	
REZDIFFRA TAB 100MG	NC	
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 200MCG	NC	SP
BYLVAY CAP 400MCG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
BYLVAY CAP 600MCG	NC	SP
BYLVAY CAP 1200MCG	NC	SP
LIVMARLI SOL 9.5MG/ML	6	SP, PA, QL
LIVMARLI SOL 19MG/ML	6	SP, PA, QL

INFLAMMATORY BOWEL AGENTS

APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	NC	SP
AVSOLA INJ 100MG	5	SP, PA
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	
CANASA SUP 1000MG	3	
CIMZIA KIT 200MG	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA PREFL KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA START KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
COLAZAL CAP 750MG	NC	
DELZICOL CAP 400MG	NC	
DIPENTUM CAP 250MG	3	
ENTYVIO INJ 300MG	NC	SP
ENTYVIO PEN INJ 108/0.68	NC	SP
INFLECTRA INJ 100MG	NC	SP
LIALDA TAB 1.2GM	NC	SP
<i>mesalamine cap dr 400 mg</i>	2	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	2	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	2	
<i>mesalamine suppos 1000 mg</i>	2	
<i>mesalamine tab delayed release 1.2 gm</i>	2	
<i>mesalamine tab delayed release 800 mg</i>	2	
OMVOH INJ 100MG/ML	NC	SP
OMVOH INJ 300/15ML	NC	SP
OTULFI INJ 130/26ML	NC	SP
PENTASA CAP 250MG CR	NC	
PENTASA CAP 500MG CR	NC	
PYZCHIVA INJ 130/26ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
REMICADE INJ 100MG	5	SP, PA, QL
RENFLEXIS INJ 100MG	NC	SP
ROWASA KIT 4GM	3	
SELARSDI INJ 130/26ML	NC	SP
SFROWASA ENE 4GM	3	
SKYRIZI INJ 180/1.2	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SKYRIZI INJ 360/2.4	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SKYRIZI SOL 60MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STELARA INJ 5MG/ML	5	SP, PA, QL
STEQEYMA INJ 130/26ML	NC	SP
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
TREMFYA INJ 200/2ML	5	SP, PA, QL; Preferred for Ulcerative Colitis
TREMFYA INJ 200/20ML	5	SP, PA, QL; Preferred for Ulcerative Colitis
USTEKINUMAB SOL TTWE	NC	SP
VELSIPITY TAB 2MG	5	SP, PA
WEZLANA INJ 130/26ML	NC	SP
YESINTEK INJ 130/26ML	NC	SP
ZYMFENTRA INJ 120MG/ML	NC	SP
INTESTINAL ACIDIFIERS		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10/15ml</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	2	
<i>alosetron hcl tab 1 mg (base equiv)</i>	2	
IBSRELA TAB 50MG	NC	SP
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
LOTRONEX TAB 0.5MG	3	

Drug Name	Drug Tier	Requirements/Limits
LOTRONEX TAB 1MG	3	
VIBERZI TAB 75MG	2	
VIBERZI TAB 100MG	2	
ZELNORM TAB 6MG	NC	
LIVE FECAL MICROBIOTA		
VOWST CAP	6	SP, PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
<i>alvimopan cap 12 mg</i>	1	
ENTEREG CAP 12MG	3	
MOVANTIK TAB 12.5MG	2	PA
MOVANTIK TAB 25MG	2	PA
RELISTOR INJ 8/0.4ML	NC	
RELISTOR INJ 12/0.6ML	NC	
RELISTOR TAB 150MG	NC	
SYMPROIC TAB 0.2MG	2	PA
PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR(PPAR) AGONISTS		
LIVDELZI CAP 10MG	NC	SP
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	2	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
<i>ferric citrate tab 1 gm (210 mg ferric iron)</i>	1	
FOSRENOL CHW 500MG	NC	
FOSRENOL CHW 750MG	NC	
FOSRENOL CHW 1000MG	NC	
FOSRENOL POW 750MG	NC	
FOSRENOL POW 1000MG	NC	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	NC	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	NC	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	NC	
PHOSLYRA SOL	3	
RENAGEL TAB 800MG	3	
RENVELA POW 0.8GM	NC	SP
RENVELA POW 2.4GM	NC	SP
RENVELA TAB 800MG	NC	SP
<i>sevelamer carbonate packet 0.8 gm</i>	2	
<i>sevelamer carbonate packet 2.4 gm</i>	2	
<i>sevelamer carbonate tab 800 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
sevelamer hcl tab 400 mg	1	
sevelamer hcl tab 800 mg	2	
VELPHORO CHW 500MG	NC	SP
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT 5MG	6	SP, PA, QL
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB 250MG	6	SP, PA, QL
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
AMIDATE INJ 2MG/ML	3	
DIPRIVAN INJ	3	
DIPRIVAN INJ 100/10ML	3	
DIPRIVAN INJ 200/20ML	3	
DIPRIVAN INJ 500/50ML	3	
etomidate iv soln 2 mg/ml	1	
KETALAR INJ 10MG/ML	3	
KETALAR INJ 50MG/ML	3	
KETALAR INJ 100MG/ML	3	
ketamine hcl inj 10 mg/ml	1	
ketamine hcl inj 50 mg/ml	1	
ketamine hcl inj 100 mg/ml	1	
KETAMINE INJ 10MG/ML	3	
propofol iv emul 200 mg/20ml (10 mg/ml)	1	
propofol iv emul 500 mg/50ml (10 mg/ml)	1	
propofol iv emul 1000 mg/100ml (10 mg/ml)	1	
propoven inj	1	
propoven inj 200/20ml	2	
propoven inj 500/50ml	1	
BARBITURATE ANESTHETICS		
BREVITAL SOD INJ 500MG	3	
VOLATILE ANESTHETICS		
desflurane inhal soln	1	
FORANE SOL	3	
isoflurane inhal soln	1	
sevoflurane inhal soln	1	
SUPRANE INH	3	
SUPRANE SOL	3	
terrell sol	1	
ULTANE SOL	3	
GENITOURINARY AGENTS - MISCELLANEOUS		
ACIDIFIERS		
K-PHOS TAB NO 2	3	

Drug Name	Drug Tier	Requirements/Limits
ALKALINIZERS		
cytra k gra crystals	1	
ORACIT SOL	3	
pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml	2	
potassium citrate & citric acid soln 1100-334 mg/5ml	1	
potassium citrate tab er 5 meq (540 mg)	1	
potassium citrate tab er 10 meq (1080 mg)	1	
potassium citrate tab er 15 meq (1620 mg)	1	
sodium citrate & citric acid soln 500-334 mg/5ml	1	
UROCIT-K 10 TAB	2	
UROCIT-K 15 TAB	2	
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	5	SP, PA
CYSTAGON CAP 150MG	5	SP, PA
PROCYSBI CAP 25MG	6	SP, PA, QL
PROCYSBI CAP 75MG	6	SP, PA, QL
GENITOURINARY IRRIGANTS		
acetic acid irrigation soln 0.25%	1	
argyl saline sol 0.9% irr	1	
curity salin sol 0.9% irr	1	
glycine irrigation soln 1.5%	1	
neomycin-polymyxin b gu irrigation soln	1	
RENACIDIN SOL	3	
sodium chloride irrigation soln 0.9%	1	
SORBITOL SOL 3% IRR	3	
SORBITOL-MAN SOL	3	
HYPEROXALURIA AGENTS		
OXLUMO INJ 94.5/0.5	NC	SP
RIVFLOZA INJ 80/0.5ML	NC	SP
RIVFLOZA INJ 128/0.8	NC	SP
RIVFLOZA INJ 160MG/ML	NC	SP
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP 100MG	NC	
RIMSO-50 SOL 50%	NC	
PROSTATIC HYPERTROPHY AGENTS		
alfuzosin hcl tab er 24hr 10 mg	1	
AVODART CAP 0.5MG	3	
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
ENTADFI CAP 5-5MG	NC	
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	NC	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	NC	
RAPAFLO CAP 8MG	NC	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	NC	
URINARY ANALGESICS		
<i>phenazo tab 200mg</i>	2	
URINARY STONE AGENTS		
LITHOSTAT TAB 250MG	NC	
THIOLA EC TAB 100MG	NC	SP
THIOLA EC TAB 300MG	NC	SP
THIOLA TAB 100MG	NC	SP
<i>tiopronin tab 100 mg</i>	4	SP, PA
<i>tiopronin tab delayed release 100 mg</i>	4	SP, PA
<i>tiopronin tab delayed release 300 mg</i>	4	SP, PA
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
GOUT AGENTS		
<i>allopurinol sodium for inj 500 mg</i>	1	
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
ALOPRIM INJ 500MG	3	
<i>colchicine cap 0.6 mg</i>	NC	
<i>colchicine tab 0.6 mg</i>	1	
COLCRYS TAB 0.6MG	NC	
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
KRYSTEXXA INJ 8MG/ML	6	SP, PA
MITIGARE CAP 0.6MG	1	
ULORIC TAB 40MG	NC	
ULORIC TAB 80MG	NC	
URICOSURICS		
<i>probenecid tab 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits

HEMATOLOGICAL AGENTS - MISC.

AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA

GIVLAARI INJ 189MG/ML	NC	SP

ANTIHEMOPHILIC PRODUCTS

ADVATE INJ 250UNIT	5	SP, PA; PV
ADVATE INJ 500UNIT	5	SP, PA; PV
ADVATE INJ 1000UNIT	5	SP, PA; PV
ADVATE INJ 1500UNIT	5	SP, PA; PV
ADVATE INJ 2000UNIT	5	SP, PA; PV
ADVATE INJ 3000UNIT	5	SP, PA; PV
ADVATE INJ 4000UNIT	5	SP, PA; PV
ADYNOVATE INJ 250UNIT	5	SP, PA; PV
ADYNOVATE INJ 500UNIT	5	SP, PA; PV
ADYNOVATE INJ 750UNIT	5	SP, PA; PV
ADYNOVATE INJ 1000UNIT	5	SP, PA; PV
ADYNOVATE INJ 1500UNIT	5	SP, PA; PV
ADYNOVATE INJ 2000UNIT	5	SP, PA; PV
ADYNOVATE INJ 3000UNIT	5	SP, PA; PV
AFSTYLA KIT 250UNIT	5	SP, PA; PV
AFSTYLA KIT 500UNIT	5	SP, PA; PV
AFSTYLA KIT 1000UNIT	5	SP, PA; PV
AFSTYLA KIT 1500UNIT	5	SP, PA; PV
AFSTYLA KIT 2000UNIT	5	SP, PA; PV
AFSTYLA KIT 2500UNIT	5	SP, PA; PV
AFSTYLA KIT 3000UNIT	5	SP, PA; PV
ALHEMO INJ 60/1.5ML	NC	SP
ALHEMO INJ 150/1.5	NC	SP
ALHEMO INJ 300/3ML	NC	SP
ALPHANINE SD INJ 500UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1000UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1500UNIT	6	SP, PA; PV
ALPROLIX INJ 250UNIT	5	SP, PA; PV
ALPROLIX INJ 500UNIT	5	SP, PA; PV
ALPROLIX INJ 1000UNIT	5	SP, PA; PV
ALPROLIX INJ 2000UNIT	5	SP, PA; PV
ALPROLIX INJ 3000UNIT	5	SP, PA; PV
ALPROLIX INJ 4000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 250 UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 500UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 1000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 2000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 3000UNIT	5	SP, PA; PV

Drug Name	Drug Tier	Requirements/Limits
ALTUVIII INJ 4000UNIT	5	SP, PA; PV
BENEFIX INJ 250UNIT	5	SP, PA; PV
BENEFIX INJ 500UNIT	5	SP, PA; PV
BENEFIX INJ 1000UNIT	5	SP, PA; PV
BENEFIX INJ 2000UNIT	5	SP, PA; PV
BENEFIX INJ 3000UNIT	5	SP, PA; PV
CORIFACT KIT	6	SP, PA; PV
ELOCTATE INJ 250UNIT	5	SP, PA; PV
ELOCTATE INJ 500UNIT	5	SP, PA; PV
ELOCTATE INJ 750UNIT	5	SP, PA; PV
ELOCTATE INJ 1000UNIT	5	SP, PA; PV
ELOCTATE INJ 1500UNIT	5	SP, PA; PV
ELOCTATE INJ 2000UNIT	5	SP, PA; PV
ELOCTATE INJ 3000UNIT	5	SP, PA; PV
ELOCTATE INJ 4000UNIT	5	SP, PA; PV
ELOCTATE INJ 5000UNIT	5	SP, PA; PV
ELOCTATE INJ 6000UNIT	5	SP, PA; PV
ESPEROCT INJ 500UNIT	5	SP, PA; PV
ESPEROCT INJ 1000UNIT	5	SP, PA; PV
ESPEROCT INJ 1500UNIT	5	SP, PA; PV
ESPEROCT INJ 2000UNIT	5	SP, PA; PV
ESPEROCT INJ 3000UNIT	5	SP, PA; PV
FEIBA INJ	NC	SP
FIBRYGA INJ 1GM	6	SP, PA
HEMLIBRA INJ 30MG/ML	6	SP, PA
HEMLIBRA INJ 60/0.4	6	SP, PA
HEMLIBRA INJ 105/0.7	6	SP, PA
HEMLIBRA INJ 150/ML	6	SP, PA
HEMLIBRA INJ 300/2ML	6	SP, PA
HEMLIBRA SOL 12/0.4ML	6	SP, PA
HEMOFIL M INJ 250UNIT	6	SP, PA; PV
HEMOFIL M INJ 500UNIT	6	SP, PA; PV
HEMOFIL M INJ 1000UNIT	6	SP, PA; PV
HEMOFIL M INJ 1700UNIT	6	SP, PA; PV
HUMATE-P SOL 250-600	6	SP, PA; PV
HUMATE-P SOL 500-1200	6	SP, PA; PV
HUMATE-P SOL 2400UNIT	6	SP, PA; PV
IDELVION SOL 250UNIT	6	SP, PA; PV
IDELVION SOL 500UNIT	6	SP, PA; PV
IDELVION SOL 1000UNIT	6	SP, PA; PV
IDELVION SOL 2000UNIT	6	SP, PA; PV
IDELVION SOL 3500UNIT	6	SP, PA; PV
IXINITY INJ 250UNIT	NC	SP

Drug Name	Drug Tier	Requirements/Limits
IXINITY INJ 500UNIT	NC	SP
IXINITY INJ 1000UNIT	NC	SP
IXINITY INJ 1500UNIT	NC	SP
IXINITY INJ 2000UNIT	NC	SP
IXINITY INJ 3000UNIT	NC	SP
JIVI INJ 500 UNIT	5	SP, PA; PV
JIVI INJ 1000UNIT	5	SP, PA; PV
JIVI INJ 2000UNIT	5	SP, PA; PV
JIVI INJ 3000UNIT	5	SP, PA; PV
JIVI INJ 4000UNIT	5	SP, PA; PV
KOATE INJ 250UNIT	6	SP, PA; PV
KOATE INJ 500 UNIT	6	SP, PA; PV
KOATE INJ 1000UNIT	6	SP, PA; PV
KOATE-DVI INJ 500UNIT	6	SP, PA; PV
KOATE-DVI INJ 1000UNIT	6	SP, PA; PV
KOGENATE FS INJ 250UNIT	5	SP, PA; PV
KOGENATE FS INJ 500UNIT	5	SP, PA; PV
KOGENATE FS INJ 1000UNIT	5	SP, PA; PV
KOGENATE FS INJ 2000UNIT	5	SP, PA; PV
KOGENATE FS INJ 3000UNIT	5	SP, PA; PV
KOVALTRY INJ 250UNIT	5	SP, PA; PV
KOVALTRY INJ 500UNIT	5	SP, PA; PV
KOVALTRY INJ 1000UNIT	5	SP, PA; PV
KOVALTRY INJ 2000UNIT	5	SP, PA; PV
KOVALTRY INJ 3000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 250UNIT	5	SP, PA; PV
NOVOEIGHT INJ 500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 2000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 3000UNIT	5	SP, PA; PV
NOVOSEVEN RT INJ 1MG	5	SP, PA; PV
NOVOSEVEN RT INJ 2MG	5	SP, PA; PV
NOVOSEVEN RT INJ 5MG	5	SP, PA; PV
NOVOSEVEN RT INJ 8MG	5	SP, PA; PV
NUWIQ INJ 250UNIT	5	SP, PA; PV
NUWIQ INJ 500UNIT	5	SP, PA; PV
NUWIQ INJ 1000UNIT	5	SP, PA; PV
NUWIQ INJ 1500UNIT	5	SP, PA; PV
NUWIQ INJ 2000UNIT	5	SP, PA; PV
NUWIQ INJ 2500UNIT	5	SP, PA; PV
NUWIQ INJ 3000UNIT	5	SP, PA; PV
NUWIQ INJ 4000UNIT	5	SP, PA; PV

Drug Name	Drug Tier	Requirements/Limits
NUWIQ KIT 250UNIT	5	SP, PA; PV
NUWIQ KIT 500UNIT	5	SP, PA; PV
NUWIQ KIT 1000UNIT	5	SP, PA; PV
NUWIQ KIT 1500UNIT	5	SP, PA; PV
NUWIQ KIT 2000UNIT	5	SP, PA; PV
NUWIQ KIT 2500UNIT	5	SP, PA; PV
NUWIQ KIT 3000UNIT	5	SP, PA; PV
NUWIQ KIT 4000UNIT	5	SP, PA; PV
OBIZUR INJ 500 UNIT	6	SP, PA
PROFILNINE INJ 500UNIT	6	SP, PA; PV
PROFILNINE INJ 1000UNIT	6	SP, PA; PV
PROFILNINE INJ 1500UNIT	6	SP, PA; PV
QFITLIA INJ 20/0.2ML	NC	SP
QFITLIA INJ 50/0.5ML	NC	SP
REBINYN INJ 3000UNIT	5	SP, PA
REBINYN SOL 500UNIT	5	SP, PA
REBINYN SOL 1000UNIT	5	SP, PA
REBINYN SOL 2000UNIT	5	SP, PA
RECOMBINATE INJ	6	SP, PA; PV
RECOMBINATE INJ 220-400	6	SP, PA; PV
RECOMBINATE INJ 401-800	6	SP, PA; PV
RECOMBINATE INJ 801-1240	6	SP, PA; PV
RIASTAP SOL 1GM	6	SP, PA
RIXUBIS INJ 250 UNIT	NC	SP
RIXUBIS INJ 500UNIT	NC	SP
RIXUBIS INJ 1000UNIT	NC	SP
RIXUBIS INJ 2000UNIT	NC	SP
RIXUBIS INJ 3000UNIT	NC	SP
SEVENFACT INJ 1MG	5	SP, PA; PV
SEVENFACT INJ 5MG	5	SP, PA; PV
TRETTEN INJ	6	SP, PA; PV
VONVENDI INJ 650UNIT	NC	SP
VONVENDI INJ 1300UNIT	NC	SP
WILATE INJ	6	SP, PA
XYNTHA INJ 250UNIT	5	SP, PA; PV
XYNTHA INJ 500UNIT	5	SP, PA; PV
XYNTHA INJ 1000UNIT	5	SP, PA; PV
XYNTHA INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 500UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 1000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 3000UNIT	5	SP, PA; PV
XYNTHA SOLOF KIT 250UNIT	5	SP, PA; PV

Drug Name	Drug Tier	Requirements/Limits
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR INJ 30MG/3ML	NC	SP
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	SP, PA, QL
<i>sajazir inj 30mg/3ml</i>	4	SP, PA, QL
COMPLEMENT INHIBITORS		
BERINERT INJ 500UNIT	NC	SP
BKEMV INJ 300/30ML	NC	SP
CINRYZE SOL 500 UNIT	NC	SP
EMPAVELI INJ 1080MG	5	SP, PA, QL
ENJAYMO SOL	NC	SP
FABHALTA CAP 200MG	6	SP, PA, QL
HAEGARDA INJ 2000UNIT	6	SP, PA, QL; PV
HAEGARDA INJ 3000UNIT	6	SP, PA, QL; PV
PIASKY INJ 340/2ML	NC	SP
RUCONEST INJ 2100UNIT	6	SP, PA, QL
SOLIRIS INJ 10MG/ML	NC	SP
TAVNEOS CAP 10MG	6	SP, PA, QL
ULTOMIRIS INJ 100MG/ML	NC	SP
ULTOMIRIS INJ 300/30ML	NC	SP
VEOPOZ INJ 400/2ML	6	SP, PA
VOYDEYA TAB 50-100MG	NC	SP
VOYDEYA TAB 100MG	NC	SP
ZILBRYSQ INJ 16.6MG	NC	SP
ZILBRYSQ INJ 23MG	NC	SP
ZILBRYSQ INJ 32.4MG	NC	SP
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	5	SP, PA, QL
TAVALISSE TAB 150MG	5	SP, PA, QL
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
HUMAN PROTEIN C		
CEPROTIN INJ 500 UNIT	6	SP
CEPROTIN INJ 1000UNIT	6	SP
PLASMA EXPANDERS		
<i>hetastarch (hes /0.7 or /0.75) 6% in nacl 0.9% iv soln</i>	1	
HEXTEND SOL 6%	3	
<i>lmd 10%/d5w inj</i>	1	
<i>lmd 10%/nacl inj 0.9%</i>	1	
PLASMA KALLIKREIN INHIBITORS		
KALBITOR INJ 10MG/ML	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
ORLADEYO CAP 110MG	5	SP, PA, QL; PV
ORLADEYO CAP 150MG	5	SP, PA, QL; PV
TAKHZYRO INJ 150MG/ML	5	SP, PA, QL; PV
TAKHZYRO INJ 300/2ML	5	SP, PA, QL; PV
PLASMA PROTEINS		
RYPLAZIM SOL 68.8MG	6	SP, PA
PLATELET AGGREGATION INHIBITORS		
AGGRASTAT INJ 3.75/15	NC	
AGGRASTAT INJ 5/100ML	3	
AGGRASTAT INJ 12.5/250	3	
AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	2	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	PV
BRILINTA TAB 60MG	2	PV
BRILINTA TAB 90MG	2	PV
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	PV
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	2	PV
<i>dipyridamole tab 25 mg</i>	1	PV
<i>dipyridamole tab 50 mg</i>	1	PV
<i>dipyridamole tab 75 mg</i>	1	PV
DURLAZA CAP 162.5MG	NC	
EFFIENT TAB 5MG	3	PV
EFFIENT TAB 10MG	3	PV
<i>eptifibatide iv soln 20 mg/10ml (2 mg/ml)</i>	1	
<i>eptifibatide iv soln 75 mg/100ml (0.75 mg/ml)</i>	1	
<i>eptifibatide iv soln 200 mg/100ml (2 mg/ml)</i>	1	
KENGREAL SOL 50MG	NC	
PLAVIX TAB 75MG	NC	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	PV
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	PV
YOSPRALA TAB 81-40MG	NC	SP
YOSPRALA TAB 325-40MG	NC	SP
ZONTIVITY TAB 2.08MG	NC	SP
PROTAMINE		
<i>protamine sulfate inj 10 mg/ml</i>	1	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND TAB 5MG	NC	SP
PYRUKYND TAB 5MG TP	NC	SP
PYRUKYND TAB 20MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
PYRUKYND TAB 20MGX5MG	NC	SP
PYRUKYND TAB 50MG	NC	SP
PYRUKYND TAB 50MGX20M	NC	SP
THROMBOLYTIC AGENT - MISC		
DEFITELIO INJ 200/2.5	NC	
THROMBOLYTIC ENZYMES		
ACTIVASE INJ 50MG	3	
ACTIVASE INJ 100MG	3	
CATHFLO ACTI INJ 2MG	3	
TNKASE KIT 50MG	3	
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA CAP 84MG	5	SP, PA, QL
CEREZYME INJ 400UNIT	5	SP, PA, QL
ELELYSO INJ 200UNIT	NC	SP
<i>miglustat cap 100 mg</i>	4	SP, PA, QL
<i>yargesa cap 100mg</i>	4	SP, PA
ZAVESCA CAP 100MG	6	SP, PA, QL
AGENTS FOR SICKLE CELL DISEASE		
ADAKVEO INJ 100/10ML	6	SP, PA
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ENDARI POW 5GM	5	SP, PA, QL
<i>glutamine (sickle cell) powd pack 5 gm</i>	4	SP, PA, QL
OXBRYTA TAB 500MG	NC	SP
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	
COBALAMINS		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	2	
<i>dodex inj</i>	1	
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	1	
NASCOBAL SPR 500MCG	NC	
FOLIC ACID/FOLATES		
<i>fa-8 cap 800mcg</i>	0	OTC; ACA, PV
<i>folate tab 400mcg</i>	0	OTC; ACA, PV
<i>folic acid cap 0.8 mg</i>	0	OTC; ACA, PV
<i>folic acid inj 5 mg/ml</i>	1	
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>folic acid tab 800mcg</i>	0	OTC; ACA, PV
<i>ft folic aci tab 400mcg</i>	0	OTC; ACA, PV
<i>sm folic acd tab 400mcg</i>	0	OTC; ACA, PV
<i>yl folic aci tab 400mcg</i>	0	OTC; ACA, PV

HEMATOPOIETIC GROWTH FACTORS

ALVAIZ TAB 9MG	NC	SP
ALVAIZ TAB 18MG	NC	SP
ALVAIZ TAB 36MG	NC	SP
ALVAIZ TAB 54MG	NC	SP
ARANESP INJ 10MCG	5	SP, PA, QL
ARANESP INJ 25MCG	5	SP, PA, QL
ARANESP INJ 40MCG	5	SP, PA, QL
ARANESP INJ 60MCG	5	SP, PA, QL
ARANESP INJ 100MCG	5	SP, PA, QL
ARANESP INJ 150MCG	5	SP, PA, QL
ARANESP INJ 200MCG	5	SP, PA, QL
ARANESP INJ 300MCG	5	SP, PA, QL
ARANESP INJ 500MCG	5	SP, PA, QL
DOPTLET TAB 20MG	5	SP, PA, QL
EPOGEN INJ 2000/ML	NC	SP
EPOGEN INJ 3000/ML	NC	SP
EPOGEN INJ 4000/ML	NC	SP
EPOGEN INJ 10000/ML	NC	SP
EPOGEN INJ 20000/ML	NC	SP
FULPHILA INJ 6/0.6ML	NC	SP
FYLNETRA INJ 6MG/0.6	5	SP, PA, QL
GRANIX INJ 300/0.5	NC	SP
GRANIX INJ 300/1ML	NC	SP
GRANIX INJ 480/0.8	NC	SP
GRANIX INJ 480/1.6	NC	SP
LEUKINE INJ 250MCG	NC	SP
MIRCERA INJ 30MCG	NC	SP
MIRCERA INJ 50MCG	NC	SP
MIRCERA INJ 75MCG	NC	SP
MIRCERA INJ 100MCG	NC	SP
MIRCERA INJ 150MCG	NC	SP
MIRCERA INJ 200MCG	NC	SP
MULPLETA TAB 3MG	6	SP, PA, QL
NEULASTA INJ 6MG/0.6M	NC	SP
NEULASTA KIT 6MG/0.6M	NC	SP
NEUPOGEN INJ 300/0.5	NC	SP
NEUPOGEN INJ 300/ML	NC	SP
NEUPOGEN INJ 300MCG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
NEUPOGEN INJ 480/0.8	NC	SP
NEUPOGEN INJ 480/1.6	NC	SP
NEUPOGEN INJ 480MCG	NC	SP
NIVESTYM INJ 300/0.5	4	SP, PA
NIVESTYM INJ 300MCG	4	SP, PA
NIVESTYM INJ 480/0.8	4	SP, PA
NIVESTYM INJ 480MCG	4	SP, PA
NPLATE INJ 125MCG	NC	SP
NPLATE INJ 250MCG	NC	SP
NPLATE INJ 500MCG	NC	SP
NYVEPRIA INJ 6/0.6ML	5	SP, PA, QL
PROCRIT INJ 2000/ML	5	SP, PA, QL
PROCRIT INJ 3000/ML	5	SP, PA, QL
PROCRIT INJ 4000/ML	5	SP, PA, QL
PROCRIT INJ 10000/ML	5	SP, PA, QL
PROCRIT INJ 20000/ML	5	SP, PA, QL
PROCRIT INJ 40000/ML	5	SP, PA, QL
PROMACTA POW 12.5MG	5	SP, PA, QL
PROMACTA POW 25MG	5	SP, PA, QL
PROMACTA TAB 12.5MG	5	SP, PA, QL
PROMACTA TAB 25MG	5	SP, PA, QL
PROMACTA TAB 50MG	5	SP, PA, QL
PROMACTA TAB 75MG	5	SP, PA, QL
REBLOZYL INJ 25MG	NC	SP
REBLOZYL INJ 75MG	NC	SP
RELEUKO INJ 300MCG	NC	SP
RELEUKO INJ 480MCG	NC	SP
RETACRIT INJ 2000UNIT	4	SP, PA
RETACRIT INJ 3000UNIT	4	SP, PA
RETACRIT INJ 4000UNIT	4	SP, PA
RETACRIT INJ 10000UNT	4	SP, PA
RETACRIT INJ 20000UNI	4	SP, PA
RETACRIT INJ 40000UNT	4	SP, PA
ROLVEDON INJ 13.2MG	NC	SP
UDENYCA INJ 6MG/.6ML	NC	SP
UDENYCA ONBO INJ 6/0.6ML	NC	SP
VAFSEO TAB 150MG	NC	SP
VAFSEO TAB 300MG	NC	SP
ZARXIO INJ 300/0.5	NC	SP
ZARXIO INJ 480/0.8	NC	SP
HEMATOPOIETIC MIXTURES		
ACTIVE FE TAB 75-1.25	3	
CORVITE 150 TAB	3	

Drug Name	Drug Tier	Requirements/Limits
CORVITE FE TAB	3	
<i>ferottrinsic cap</i>	1	
<i>foltrin cap</i>	1	
FUSION PAK SPRINKLE	NC	SP
FUSION PLUS CAP	3	
HEMATINIC/FA TAB	1	
HEMATRON-AF TAB	3	
<i>hemocyte-f tab</i>	1	
ICAR-C PLUS TAB	3	
<i>k-tan plus cap</i>	1	
MULTIGEN PLS TAB	3	
MULTIGEN TAB	3	
MULTIGEN TAB FOLIC	3	
NUFERA TAB	3	
TARON FORTE CAP	3	
<i>tricon cap</i>	1	
<i>trigels-f cap forte</i>	1	

IRON

FERAHEME INJ 510/17ML	3	
FERRLECIT INJ 12.5MG/M	3	
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml)</i> <i>(elemental fe)</i>	2	
INFED INJ 50MG/ML	3	
INJECTAFER INJ 100/2ML	3	
INJECTAFER INJ 750/15ML	3	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5</i> <i>mg/ml (fe eq)</i>	2	
TRIFERIC INJ AVNU	3	
VENOFER INJ 20MG/ML	3	

STEM CELL MOBILIZERS

MOZOBIL INJ	6	SP, PA
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20</i> <i>mg/ml)</i>	4	SP, PA
XOLREMDI CAP 100MG	NC	SP

HEMOSTATICS

HEMOSTATICS - SYSTEMIC

<i>aminocaproic acid inj 250 mg/ml</i>	1	
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	2	
<i>aminocaproic acid tab 500 mg</i>	2	
<i>aminocaproic acid tab 1000 mg</i>	2	
CYKLOKAPRON INJ 100MG/ML	3	
LYSTEDA TAB 650MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	1	
HEMOSTATICS - TOPICAL		
ARTISS SOL 2ML	3	
ARTISS SOL 4ML	3	
ARTISS SOL 10ML	3	
RECOTHROM SOL 5000UNIT	3	
RECOTHROM SOL 20000UNT	3	
TACHOSIL PAD 4.8X4.8	3	
TACHOSIL PAD 9.5X4.8	3	
THROMBIN KIT 5000UNIT	3	
THROMBIN-JMI KIT 5000UNIT	3	
THROMBIN-JMI KIT 20000UNT	3	
THROMBIN-JMI SOL 5000UNIT	3	
THROMBIN-JMI SOL 20000UNT	3	
THROMBOGEN KIT 10000UNT	3	
THROMBOGEN SOL 1000UNIT	3	
THROMBOGEN SOL 10000UNT	3	
TISSEEL KIT 2ML	3	
TISSEEL KIT 4ML	3	
TISSEEL KIT 10ML	3	
TISSEEL SOL 2ML	3	
TISSEEL SOL 4ML	3	
TISSEEL SOL 10ML	3	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
NEMBUTAL SOD INJ 50MG/ML	3	
<i>pentobarbital sodium inj 50 mg/ml</i>	1	
<i>phenobarbital elixir 20 mg/5ml</i>	1	PV
<i>phenobarbital sodium inj 65 mg/ml</i>	1	
<i>phenobarbital sodium inj 130 mg/ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	PV
<i>phenobarbital tab 16.2 mg</i>	1	PV
<i>phenobarbital tab 30 mg</i>	1	PV
<i>phenobarbital tab 32.4 mg</i>	1	PV
<i>phenobarbital tab 60 mg</i>	1	PV
<i>phenobarbital tab 64.8 mg</i>	1	PV
<i>phenobarbital tab 97.2 mg</i>	1	PV
<i>phenobarbital tab 100 mg</i>	1	PV
SEZABY INJ 100MG	3	

Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS - TRICYCLIC AGENTS		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	2	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	2	
SILENOR TAB 3MG	NC	
SILENOR TAB 6MG	NC	
NON-BARBITURATE HYPNOTICS		
AMBIEN CR TAB 6.25MG	3	PA, QL
AMBIEN CR TAB 12.5MG	3	PA, QL
AMBIEN TAB 5MG	3	PA, QL
AMBIEN TAB 10MG	3	PA, QL
DEXMEDE/NACL INJ 20/5ML	3	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 80 mcg/20ml</i>	1	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	1	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i>	1	
<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i>	1	
EDLUAR SUB 5MG	NC	
EDLUAR SUB 10MG	NC	
<i>estazolam tab 1 mg</i>	1	PA, QL
<i>estazolam tab 2 mg</i>	1	PA, QL
<i>eszopiclone tab 1 mg</i>	1	PA, QL
<i>eszopiclone tab 2 mg</i>	1	PA, QL
<i>eszopiclone tab 3 mg</i>	1	PA, QL
<i>flurazepam hcl cap 15 mg</i>	1	PA, QL
<i>flurazepam hcl cap 30 mg</i>	1	PA, QL
HALCION TAB 0.25MG	3	PA, QL
IGALMI MIS 120MCG	NC	
IGALMI MIS 180MCG	NC	
INTERMEZZO SUB 1.75MG	NC	
INTERMEZZO SUB 3.5MG	NC	
LUNESTA TAB 1MG	NC	
LUNESTA TAB 2MG	NC	
LUNESTA TAB 3MG	NC	
MIDAZOL/NACL SOL 5MG/5ML	NC	
<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	1	
<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	1	
PRECEDEX INJ 80/20ML	3	
PRECEDEX INJ 100MCG	3	
PRECEDEX INJ 200/50ML	3	
PRECEDEX INJ 400/100	3	
PRECEDEX INJ 1000/250	3	
<i>quazepam tab 15 mg</i>	NC	
RESTORIL CAP 7.5MG	3	PA, QL
RESTORIL CAP 15MG	3	PA, QL
RESTORIL CAP 22.5MG	3	PA, QL
RESTORIL CAP 30MG	3	PA, QL
<i>temazepam cap 7.5 mg</i>	1	PA, QL
<i>temazepam cap 15 mg</i>	1	PA, QL
<i>temazepam cap 22.5 mg</i>	1	PA, QL
<i>temazepam cap 30 mg</i>	1	PA, QL
<i>triazolam tab 0.25 mg</i>	1	PA, QL
<i>triazolam tab 0.125 mg</i>	1	PA, QL
<i>zaleplon cap 5 mg</i>	1	PA, QL
<i>zaleplon cap 10 mg</i>	1	PA, QL
<i>zolpidem tartrate sl tab 1.75 mg</i>	NC	
<i>zolpidem tartrate sl tab 3.5 mg</i>	NC	
<i>zolpidem tartrate tab 5 mg</i>	1	PA, QL
<i>zolpidem tartrate tab 10 mg</i>	1	PA, QL
<i>zolpidem tartrate tab er 6.25 mg</i>	1	PA, QL
<i>zolpidem tartrate tab er 12.5 mg</i>	1	PA, QL
ZOLPIMIST SPR 5MG	NC	
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA TAB 5MG	2	PA, QL
BELSOMRA TAB 10MG	2	PA, QL
BELSOMRA TAB 15MG	2	PA, QL
BELSOMRA TAB 20MG	2	PA, QL
DAYVIGO TAB 5MG	2	PA, QL
DAYVIGO TAB 10MG	2	PA, QL
QUVIVIQ TAB 25MG	2	PA, QL
QUVIVIQ TAB 50MG	2	PA, QL
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ CAP 20MG	6	SP, PA, QL
HETLIOZ LQ SUS 4MG/ML	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>ramelteon tab 8 mg</i>	1	QL
ROZEREM TAB 8MG	NC	
<i>tasimelteon capsule 20 mg</i>	4	SP, PA, QL

LAXATIVES

LAXATIVE COMBINATIONS

<i>gavilyte-c sol</i>	2	PV
<i>gavilyte-g sol</i>	2	PV
<i>gavilyte-n sol flav pk</i>	2	PV
GOLYTELY SOL	NC	
MOVIPREP SOL	NC	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	PV
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	PV
PEG-PREP KIT	0	ACA, PV
<i>peg/nasul/c/ sol nacl/pot</i>	NC	
PLENVU SOL	NC	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	0	ACA, PV
SUFLAVE SOL	NC	
SUPREP BOWEL SOL PREP KIT	NC	
SUTAB TAB	NC	

LAXATIVES - MISCELLANEOUS

<i>constulose sol 10gm/15</i>	1	
<i>kristalose pak 10gm</i>	1	
<i>kristalose pak 20gm</i>	1	
<i>lactulose oral crystal packet 10 gm</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	

LUBRICANT LAXATIVES

<i>mineral oil</i>	1	

SALINE LAXATIVES

OSMOPREP TAB 1.5GM	NC	

LOCAL ANESTHETICS-PARENTERAL

LOCAL ANESTHETIC COMBINATIONS

<i>articadent inj dental</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf)</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	1	
LIDO/TETRA INJ 0.4-0.2%	3	
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 1.5% w/ epinephrine-1:200000 (pf)</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:200000 (pf)</i>	1	
<i>marcaine/epi inj 0.5%</i>	1	
MARCAINE/EPI INJ 0.5%	3	
MARCAINE/EPI INJ 0.25%	3	
ORABLOC INJ	3	
<i>sensorcaine inj -mpf/epi</i>	1	
SENSORCAINE INJ -MPF/EPI	1	
SENSORCAINE INJ -MPF/EPI	3	
<i>sensorcaine/ inj epi 0.5%</i>	1	
<i>sensorcaine/ inj epi 0.25</i>	1	
XYLO-MPF/EPI INJ 1%	3	
XYLO-MPF/EPI INJ 1.5%	3	
XYLO-MPF/EPI INJ 2%	3	
XYLO/EPI 1%- INJ 1:100000	3	
XYLO/EPI INJ 0.5%	3	
XYLO/EPI INJ 2%	3	

LOCAL ANESTHETICS - AMIDES

<i>bupivacaine hcl inj 0.5%</i>	1	
<i>bupivacaine hcl inj 0.25%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	1	
BUPIVACAINE INJ 0.5%	3	
BUPIVACAINE INJ 0.25%	3	
BUPIVACAINE INJ 0.125%	3	
BUPIVACAINE INJ 2.5MG/ML	3	
BUPIVACAINE INJ 5MG/ML	3	
<i>bupivacaine inj spinal</i>	1	
EXPAREL INJ 1.3%	3	
LIDOCAINE HC INJ 200/10ML	NC	
<i>lidocaine hcl local inj 0.5%</i>	1	
<i>lidocaine hcl local inj 1%</i>	1	
<i>lidocaine hcl local inj 2%</i>	2	
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 4%</i>	1	
LIDOCAINE INJ 1%	3	

Drug Name	Drug Tier	Requirements/Limits
LIDOCAINE INJ 2%	3	
LIDOCAINE INJ 10MG/ML	3	PA
LIDOCAINE INJ 100/5ML	3	PA
MARCAINE INJ 0.5%	3	
MARCAINE INJ 0.25%	3	
MARCAINE INJ 0.75%	3	
MARCAINE INJ SPINAL	3	
NAROPIN INJ 2MG/ML	3	
NAROPIN INJ 5MG/ML	3	
NAROPIN INJ 7.5MG/ML	3	
NAROPIN INJ 10MG/ML	3	
<i>polocaine inj 1%</i>	1	
<i>polocaine inj 2%</i>	1	
<i>polocaine inj -mpf 1%</i>	1	
<i>polocaine inj -mpf 2%</i>	1	
<i>polocaine inj mpf 1.5%</i>	1	
POSIMIR SOL 660/5ML	NC	
<i>ropivacaine hcl inj 2 mg/ml</i>	1	
<i>ropivacaine hcl inj 5 mg/ml</i>	1	
<i>ropivacaine hcl inj 7.5 mg/ml</i>	1	
<i>ropivacaine hcl inj 10 mg/ml</i>	1	
ROPIVACAINE INJ 0.5%	NC	
ROPIVACAINE INJ 2MG/ML	3	
<i>sensorcaine inj 0.5%</i>	1	
<i>sensorcaine inj 0.25%</i>	1	
<i>sensorcaine inj mpf0.25%</i>	1	
<i>sensorcaine inj mpf0.75%</i>	1	
<i>sensorcaine inj mpf 0.5%</i>	1	
XYLOCAINE INJ 0.5%	3	
XYLOCAINE INJ 1%	3	
XYLOCAINE INJ 2%	3	
XYLOCAINE INJ -MPF 1%	3	
XYLOCAINE INJ -MPF 2%	3	
XYLOCAINE INJ MPF 0.5%	3	
XYLOCAINE INJ MPF 1.5%	3	
LOCAL ANESTHETICS - ESTERS		
<i>chloroprocaine hcl preservative free (pf) inj 2%</i>	1	
<i>chloroprocaine hcl preservative free (pf) inj 3%</i>	1	
NESACAINE INJ 1%	3	
NESACAINE INJ 2%	3	
NESACAINE INJ -MPF 2%	3	
NESACAINE INJ -MPF 3%	3	

MACROLIDES

Drug Name	Drug Tier	Requirements/Limits
AZITHROMYCIN		
<i>azithromycin for susp 100 mg/5ml</i>	1	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin iv for soln 500 mg</i>	1	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
ZITHROMAX INJ 500MG	3	
ZITHROMAX POW 1GM PAK	3	
ZITHROMAX SUS 100/5ML	3	
ZITHROMAX SUS 200/5ML	3	
ZITHROMAX TAB 250MG	3	
ZITHROMAX TAB 500MG	3	
ZITHROMAX TAB TRI-PAK	3	
ZITHROMAX TAB Z-PAK	3	
CLARITHROMYCIN		
<i>clarithromycin for susp 125 mg/5ml</i>	2	
<i>clarithromycin for susp 250 mg/5ml</i>	2	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	2	
ERYTHROMYCINS		
<i>e.e.s. 400 tab 400mg</i>	2	
E.E.S. GRAN SUS 200/5ML	NC	
<i>ery-tab tab 250mg ec</i>	2	
<i>ery-tab tab 333mg ec</i>	2	
<i>ery-tab tab 500mg ec</i>	2	
ERYPED SUS 200/5ML	NC	
ERYPED SUS 400/5ML	NC	
<i>erythrocin inj 500mg</i>	1	
ERYTHROCIN INJ 500MG	3	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate tab 400 mg</i>	2	
<i>erythromycin lactobionate for inj 500 mg</i>	1	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin tab delayed release 250 mg</i>	2	
<i>erythromycin tab delayed release 333 mg</i>	2	
<i>erythromycin tab delayed release 500 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	
FIDAXOMICIN		
DIFICID SUS	2	
DIFICID TAB 200MG	2	
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
AIMSCO MIS LUBRICAT	0	OTC; ACA
CAYA DPR	0	QL; ACA, PV
COLOR CONDOM MIS + LUBE	0	OTC; ACA
CONDOMS MIS	0	OTC; ACA
DUREX MIS REALFEEL	0	OTC; ACA
DUREX MIS TROPICAL	0	OTC; ACA
FANTASY LUBR MIS	0	OTC; ACA
FANTASY LUBR MIS COLORS	0	OTC; ACA
FANTASY LUBR MIS SPERMICI	0	OTC; ACA
FANTASY MIS LUBRICAT	0	OTC; ACA
FC2 FEMALE MIS CONDOM	0	OTC; ACA
FEMCAP MIS 22MM	0	ACA
FEMCAP MIS 26MM	0	ACA
FEMCAP MIS 30MM	0	ACA
KAMELEON LUB MIS COLORS	0	OTC; ACA
KAMELEON MIS TRI-COLR	0	OTC; ACA
KIMONO COLOR MIS	0	OTC; ACA
KIMONO MAXX MIS LG FLARE	0	OTC; ACA
KIMONO MICRO MIS THIN	0	OTC; ACA
KIMONO MICRO MIS THIN +	0	OTC; ACA
KIMONO MICRO MIS THIN PLS	0	OTC; ACA
KIMONO MIS LUBRICAT	0	OTC; ACA
KIMONO MIS SENSATIO	0	OTC; ACA
KIMONO PLUS MIS LUBRICAT	0	OTC; ACA
KIMONO PLUS MIS SPERMICI	0	OTC; ACA
KIMONO PS MIS LUBRICAT	0	OTC; ACA
KIMONO PS MIS PLUS	0	OTC; ACA
KIMONO SENSE MIS PLUS	0	OTC; ACA
KIMONO SPEC MIS	0	OTC; ACA
MAXX MIS LUBRICAT	0	OTC; ACA
MAXX PLUS MIS SPERMICI	0	OTC; ACA
NATURAL COND MIS + LUBE	0	OTC; ACA
OMNIFLEX DPR	0	ACA
REALITY MIS LUBRICAT	0	OTC; ACA
REALITY ULTR MIS TEXTURED	0	OTC; ACA

Drug Name	Drug Tier	Requirements/Limits
REALITY ULTR MIS THIN	0	OTC; ACA
TROJAN MAGN MIS	0	OTC; ACA
TROJAN MIS ENZ	0	OTC; ACA
TROJAN ULTRA MIS RIBBED	0	OTC; ACA
TROJAN ULTRA MIS THIN	0	OTC; ACA
TROJAN-ENZ MIS LUBRICAT	0	OTC; ACA
TROJAN-ENZ MIS W/SPERMI	0	OTC; ACA
TRUE COVER MIS CONDOM	0	OTC; ACA
TRUSTEX LUBR MIS ASSORTED	0	OTC; ACA
TRUSTEX LUBR MIS BANANA	0	OTC; ACA
TRUSTEX LUBR MIS CHOC	0	OTC; ACA
TRUSTEX LUBR MIS COLA	0	OTC; ACA
TRUSTEX LUBR MIS COLORS	0	OTC; ACA
TRUSTEX LUBR MIS EX LARGE	0	OTC; ACA
TRUSTEX LUBR MIS EX STR	0	OTC; ACA
TRUSTEX LUBR MIS GRAPE	0	OTC; ACA
TRUSTEX LUBR MIS MINT	0	OTC; ACA
TRUSTEX LUBR MIS RIB/STUD	0	OTC; ACA
TRUSTEX LUBR MIS SPERMICI	0	OTC; ACA
TRUSTEX LUBR MIS STRWBRY	0	OTC; ACA
TRUSTEX LUBR MIS VANILLA	0	OTC; ACA
TRUSTEX MIS BANANA	0	OTC; ACA
TRUSTEX MIS CHOCOLAT	0	OTC; ACA
TRUSTEX MIS FLAVORS	0	OTC; ACA
TRUSTEX MIS MINT	0	OTC; ACA
TRUSTEX MIS STRWBRY	0	OTC; ACA
TRUSTEX MIS VANILLA	0	OTC; ACA
TRUSTEX/RIA MIS LUBRICAT	0	OTC; ACA
TRUSTEX/RIA MIS NON-LUB	0	OTC; ACA
TRUSTEX/RIA MIS SPERMICI	0	OTC; ACA
TRUSTX NON-9 MIS RIB/STUD	0	OTC; ACA
WIDE-SEAL DPR KIT 60	0	ACA
WIDE-SEAL DPR KIT 65	0	ACA
WIDE-SEAL DPR KIT 70	0	ACA
WIDE-SEAL DPR KIT 75	0	ACA
WIDE-SEAL DPR KIT 80	0	ACA
WIDE-SEAL DPR KIT 85	0	ACA
WIDE-SEAL DPR KIT 90	0	ACA
WIDE-SEAL DPR KIT 95	0	ACA
DIABETIC SUPPLIES		
ACTI-LANCE MIS 28G	3	OTC; PV
ACTI-LANCE MIS LITE 28G	3	OTC; PV
ACTI-LANCE MIS SPEC 17G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
ACTI-LANCE MIS UNIV 23G	3	OTC; PV
ADVATE SAFE MIS LANC 26G	3	OTC; PV
ADVOCATE MIS LANC 30G	3	OTC; PV
ADVOCATE MIS LANCETS	3	OTC; PV
AGAMATRIX MIS 33G	3	OTC; PV
AQUALANCE MIS 30G	3	OTC; PV
ASSURE CMFRT MIS 28G	3	OTC; PV
ASSURE LANCE MIS 21G	3	OTC; PV
ASSURE LANCE MIS LOW FLOW	3	OTC; PV
ASSURE LANCE MIS MICRO	3	OTC; PV
ASSURE LANCE MIS SAFE 25G	3	OTC; PV
ASSURE LANCE MIS SAFE 30G	3	OTC; PV
AURORA LANCE MIS 30G	3	OTC; PV
AURORA LANCE MIS THIN 23G	3	OTC; PV
AUTO LANCET MIS	3	OTC; PV
AUTOLET PLAT MIS 1.8MM	3	OTC; PV
AUTOLET PLAT MIS 2.4MM	3	OTC; PV
AUTOLET PLAT MIS 3.0MM	3	OTC; PV
BD MICROTAIN MIS LANCETS	3	PV
BD MICROTAIN MIS LANCETS	3	OTC; PV
CAREONE LANC MIS 30G	3	OTC; PV
CAREONE LANC MIS THIN 23G	3	OTC; PV
CARESENS 30G MIS LANCETS	3	OTC; PV
CARETOUCH MIS TWIST 30	3	OTC; PV
CGMS CABLE MIS	NC	
CGMS MIS SOFTWARE	NC	
CLEANLET 28G MIS LANCETS	3	OTC; PV
CLEVER CHECK MIS	3	OTC; PV
CLEVER CHECK MIS 30G	3	OTC; PV
COAGUCHEK MIS LANCETS	3	OTC; PV
COMFORT ASSU MIS LANC 28G	3	OTC; PV
COMFORT ASSU MIS LANC 33G	3	OTC; PV
COMFORTOUCH MIS LANCET	3	OTC; PV
CVS LANCETS MIS 21G	3	OTC; PV
CVS LANCETS MIS 30G	3	OTC; PV
CVS LANCETS MIS 33G	3	OTC; PV
CVS LANCETS MIS ORIGINAL	3	OTC; PV
CVS LANCETS MIS THIN 26G	3	OTC; PV
CVS LANCETS MIS THIN 30G	3	OTC; PV
CVS LANCETS MIS THIN 33G	3	OTC; PV
DEXCOM G5 MIS RECEIVER	2	PA
DEXCOM G5 MIS TRANSMIT	2	PA
DEXCOM G6 MIS RECEIVER	2	PA

Drug Name	Drug Tier	Requirements/Limits
DEXCOM G6 MIS SENSOR	2	PA
DEXCOM G6 MIS TRANSMIT	2	PA
DEXCOM G7 MIS RECEIVER	2	PA
DEXCOM G7 MIS SENSOR	2	PA
DIATHRIVE MIS UT 30G	3	OTC; PV
DROPLET LANC MIS 30G	3	OTC; PV
E-Z JECT MIS 21G	3	OTC; PV
E-Z JECT MIS 21G COLR	3	OTC; PV
E-Z JECT MIS 30G	3	OTC; PV
E-Z JECT MIS 32G COLR	3	OTC; PV
E-Z JECT MIS LANC 21G	3	OTC; PV
E-Z JECT MIS THIN 26G	3	OTC; PV
E-ZJECT LANC MIS 33G	3	OTC; PV
EASY COMFORT MIS 30G	3	OTC; PV
EASY COMFORT MIS LANC/30G	3	OTC; PV
EASY TOUCH MIS LANC/21G	3	OTC; PV
EASY TOUCH MIS LANC/23G	3	OTC; PV
EASY TOUCH MIS LANC/26G	3	OTC; PV
EASY TOUCH MIS LANC/28G	3	OTC; PV
EASY TOUCH MIS LANC/30G	3	OTC; PV
EASY TOUCH MIS LANC/32G	3	OTC; PV
EASY TOUCH MIS LANC/33G	3	OTC; PV
EMBRACE LANC MIS 21G	3	OTC; PV
EMBRACE LANC MIS 28G	3	OTC; PV
EMBRACE LANC MIS THIN 30G	3	OTC; PV
ENLITE GLUCO MIS SENSOR	NC	
EQL LANCETS MIS 21G COLR	3	OTC; PV
EQL LANCETS MIS 33G COLR	3	OTC; PV
EQL LANCETS MIS THIN 26G	3	OTC; PV
EQL LANCETS MIS THIN 30G	3	OTC; PV
EVERSENSE365 MIS SENSOR	NC	
EVERSENSE365 MIS TRANSMTR	NC	
EVERSENSE MIS SENSOR	NC	
EVERSENSE MIS TRANSMTR	NC	
EZ-LETS 21G MIS LANCETS	3	OTC; PV
EZ-LETS 26G MIS LANCETS	3	OTC; PV
EZ-LETS 28G MIS LANCETS	3	OTC; PV
EZ-LETS 30G MIS LANCETS	3	OTC; PV
FASTCLIX MIS LANCETS	7	OTC; PV
FIFTY50 SAFE MIS LANCETS	3	OTC; PV
FINGERSTIX MIS LANCETS	3	OTC; PV
FORA LANCETS MIS 30G	3	OTC; PV
FORA MIS LANCETS	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
FREE LIBRE2 KIT PLUS/SEN	NC	
FREESTY LIBR KIT 2 SENSOR	NC	
FREESTY LIBR KIT 3 SENSOR	NC	
FREESTY LIBR KIT SENSOR	NC	
FREESTY LIBR MIS 2 READER	NC	
FREESTY LIBR MIS 3 READER	NC	
FREESTY LIBR MIS READER	NC	
FREESTYLE KIT SENSOR	NC	
FREESTYLE MIS LANCETS	3	OTC; PV
FREESTYLE MIS READER	NC	
G5/G4 MIS SENSOR	2	PA
GLOBAL 28G MIS LANCETS	3	OTC; PV
GLOBAL 30G MIS LANCETS	3	OTC; PV
GLUCOCOM MIS 28G	3	OTC; PV
GLUCOCOM MIS 30G	3	OTC; PV
GLUCOCOM MIS 33G	3	OTC; PV
GNP LANCETS MIS 21G	3	OTC; PV
GNP LANCETS MIS 28G	3	OTC; PV
GNP LANCETS MIS 30G	3	OTC; PV
GNP LANCETS MIS 33G	3	OTC; PV
GNP LANCETS MIS THIN 26G	3	OTC; PV
GOODSENSE MIS LANC 30G	3	OTC; PV
GUARDIAN CON MIS TRANSMIT	NC	
GUARDIAN MIS LINK 3	NC	
GUARDIAN MIS SENSOR 3	NC	
GUARDIAN MIS TRANSMTR	NC	
GUARDIAN RT KIT	NC	
GUARDIAN RT KIT STARTER	NC	
GUARDIAN RT KIT SYST PED	NC	
GUARDIAN RT KIT SYSTEM	NC	
GUARDIAN RT MIS CHARGER	NC	
GUARDIAN RT MIS REPL PED	NC	
GUARDIAN RT MIS REPLACE	NC	
GUARDIAN RT MIS SOFTWARE	NC	
GUARDIAN RT MIS TST PLUG	NC	
HAEMOLANCE MIS HIGH FLO	3	OTC; PV
HAEMOLANCE MIS LOW FLOW	3	OTC; PV
HAEMOLANCE MIS PLUS	3	OTC; PV
HAEMOLANCE MIS PLUS LOW	3	OTC; PV
HAEMOLANCE MIS PLUS MAX	3	OTC; PV
HAEMOLANCE MIS PLUS PED	3	OTC; PV
HAEMOLANCE MIS RETRACT	3	OTC; PV
IN TOUCH LAN MIS 30G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
INCONTROL MIS LANC 28G	3	OTC; PV
INCONTROL MIS LANC 30G	3	OTC; PV
INCONTROL MIS LANC 33G	3	OTC; PV
KINNEY MIS LANCETS	3	OTC; PV
KINNEY THIN MIS LANCETS	3	OTC; PV
KROGER LANCE MIS	3	OTC; PV
KROGER LANCE MIS 26G	3	OTC; PV
KROGER LANCE MIS THIN	3	OTC; PV
KROGER LANCE MIS THIN 30G	3	OTC; PV
LANCET MICRO MIS THIN 33G	3	OTC; PV
LANCET STAND MIS 21G	3	OTC; PV
LANCET SUPER MIS THIN 30G	3	OTC; PV
LANCET ULTRA MIS THIN 30G	3	OTC; PV
LANCETS MICR MIS THIN 33G	3	OTC; PV
LANCETS MIS	3	OTC; PV
LANCETS MIS 21G	3	OTC; PV
LANCETS MIS 21G COLR	3	OTC; PV
LANCETS MIS 26G	3	OTC; PV
LANCETS MIS 28G THIN	3	OTC; PV
LANCETS MIS 30G	3	OTC; PV
LANCETS MIS 33G	3	OTC; PV
LANCETS MIS ORIGINAL	3	OTC; PV
LANCETS MIS THIN	3	OTC; PV
LANCETS MIS THIN 26G	3	OTC; PV
LANCETS MIS THIN 30G	3	OTC; PV
LANCETS SUPR MIS THIN 28G	3	OTC; PV
LANCETS THIN MIS	3	OTC; PV
LANCETS THIN MIS 26G	3	OTC; PV
LANCETS ULTR MIS THIN	3	OTC; PV
LITE TOUCH MIS LANCETS	3	OTC; PV
LITETOUCH MIS LANCETS	3	OTC; PV
LONGS LANCET MIS STANDARD	3	OTC; PV
LONGS LANCET MIS THIN	3	OTC; PV
LONGS LANCET MIS ULTRA TH	3	OTC; PV
MEDICHOICE MIS LANCET	3	OTC; PV
MEDLANCE MIS 30G PLUS	3	OTC; PV
MEDLANCE MIS PLUS 30G	3	OTC; PV
MEDLANCE PLS MIS 0.8MM	3	OTC; PV
MEDLANCE PLS MIS EXTR 21G	3	OTC; PV
MEDLANCE PLS MIS LITE 25G	3	OTC; PV
MEDLANCE PLS MIS UNIV 21G	3	OTC; PV
MEIJER LANCE MIS COLOR	3	OTC; PV
MEIJER LANCE MIS UNIV 21G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
MEIJER LANCE MIS UNIV 30G	3	OTC; PV
MEIJER LANCE MIS UNIVERSA	3	OTC; PV
MEIJER MIS LANCETS	3	OTC; PV
MICRO THIN MIS LANC 33G	3	OTC; PV
MICROLET MIS LANCETS	3	OTC; PV
MINILINK RT MIS TRANSMIT	NC	
MINIMED 630G MIS TRANSMIT	NC	
MONOLET MIS LANCETS	3	OTC; PV
MONOLET OPD MIS LANCETS	3	OTC; PV
MONOLETTOR MIS LANCETS	3	OTC; PV
MYGLUCOHEALT MIS LANC 30G	3	OTC; PV
NOVA SAFETY MIS LANC 23G	3	OTC; PV
NOVA SAFETY MIS LANC 28G	3	OTC; PV
NOVA SURE MIS LANCETS	3	OTC; PV
OMNIPOD 5 DX KIT INT G7G6	2	PV
OMNIPOD 5 DX MIS POD G7G6	2	PV
OMNIPOD 5 LB KIT INTRO G6	2	PV
OMNIPOD 5 LB MIS PODS G6	2	PV
OMNIPOD DASH MIS PODS	2	PV
OMNIPOD MIS CLASSIC	2	PV
OMNIPOD PDM KIT CLASSIC	2	PV
ON-THE-GO MIS LANC 30G	3	OTC; PV
ONETOUCH DEL MIS PLUS 30G	7	OTC; PV
ONETOUCH DEL MIS PLUS 33G	7	OTC; PV
ONETOUCH FP MIS LANCETS	7	OTC; PV
ONETOUCH MIS 30G	7	OTC; PV
ONETOUCH MIS LANCETS	7	OTC; PV
ONETOUCH US MIS LANCETS	7	OTC; PV
PARADIGM REA MIS TRANSMIT	NC	
PERFECT 28G MIS LANCETS	3	OTC; PV
PERFECT 30G MIS LANCETS	3	OTC; PV
PERFECT POIN MIS LANC 28G	3	OTC; PV
PERFECT POIN MIS LANC 30G	3	OTC; PV
PHARMACY COU MIS LANCETS	3	OTC; PV
PIP LANCETS MIS 30G	3	OTC; PV
PRO COMFORT MIS 31G	3	OTC; PV
PRO COMFORT MIS LANCETS	3	OTC; PV
PRODIGY MIS 26G	3	OTC; PV
PRODIGY MIS 28G	3	OTC; PV
PX LANCETS MIS 28G	3	OTC; PV
PX LANCETS MIS 33G	3	OTC; PV
QC LANCETS MIS 28G	3	OTC; PV
QC LANCETS MIS 30G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
RA E-ZJECT MIS 28G	3	OTC; PV
RA E-ZJECT MIS THIN 26G	3	OTC; PV
RA E-ZJECT MIS THIN 28G	3	OTC; PV
RA E-ZJECT MIS ULT THIN	3	OTC; PV
REAL-TIME KIT	NC	
RELION LANCE MIS THIN 26G	3	OTC; PV
RELION LANCE MIS THIN 30G	3	OTC; PV
RELION MICRO MIS THIN 33G	3	OTC; PV
RELION ULTRA MIS THIN PLS	3	OTC; PV
RIGHTEST ALT MIS ADAPTOR	3	OTC; PV
RIGHTEST MIS GL300	3	OTC; PV
SAFE-T-PRO MIS LANCETS	3	OTC; PV
SAFE-T-PRO MIS PLUS	3	OTC; PV
SAFETY 21G MIS LANCETS	3	OTC; PV
SAFETY 28G MIS LANCETS	3	OTC; PV
SAFETY MIS LANCETS	3	OTC; PV
SAPSCARE MIS TWIST	3	OTC; PV
SB LANCETS MIS THIN	3	OTC; PV
SB LANCETS MIS ULTR THN	3	OTC; PV
SINGLE-LET MIS 23G	3	OTC; PV
SM LANCETS MIS 33G	3	OTC; PV
SMART SENSE MIS LANC 21G	3	OTC; PV
SMART SENSE MIS LANC 26G	3	OTC; PV
SMART SENSE MIS LANC 30G	3	OTC; PV
SMART SENSE MIS LANC 33G	3	OTC; PV
SMARTEST MIS LANCETS	3	OTC; PV
SOF-SENSOR MIS	NC	
SOFTCLIX MIS LANCETS	7	OTC; PV
SOLUS V2 MIS LANC 28G	3	OTC; PV
SOLUS V2 MIS LANC 30G	3	OTC; PV
STERILANCE MIS TL 28G	3	OTC; PV
STERILANCE MIS TL 30G	3	OTC; PV
STERILANCE MIS TL 32G	3	OTC; PV
SUPER THIN MIS LANC 28G	3	OTC; PV
SUPER THIN MIS LANCETS	3	OTC; PV
SURE COMFORT MIS LANCETS	3	OTC; PV
SUREFLEX MIS LANCETS	3	OTC; PV
SURELITE MIS LANCETS	3	OTC; PV
TECHLITE AST MIS LANCETS	3	OTC; PV
TECHLITE MIS LANC 26G	3	OTC; PV
TECHLITE MIS LANCETS	3	OTC; PV
TGT LANCET MIS 26G	3	OTC; PV
TGT LANCET MIS 30G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
TGT LANCET MIS 33G	3	OTC; PV
THIN LANCETS MIS 26G	3	OTC; PV
THIN LANCETS MIS 30G	3	OTC; PV
TOPCARE MIS LANC 33G	3	OTC; PV
TRAVEL LANCE MIS ADV 28G	3	OTC; PV
TRUPLUS LANC MIS 26G	3	OTC; PV
TRUPLUS LANC MIS 28G	3	OTC; PV
TRUPLUS LANC MIS 33G	3	OTC; PV
TWIIIST KIT REFILL	2	PV
TWIIIST KIT STARTER	2	PV
TWIIIST REFIL KIT INFUSION	2	PV
ULTILET MIS 26G	3	OTC; PV
ULTILET MIS 28G	3	OTC; PV
ULTILET MIS 30G	3	OTC; PV
ULTILET MIS 33G	3	OTC; PV
ULTILET MIS LANCETS	3	OTC; PV
ULTILET MIS SAFETY	3	OTC; PV
ULTRA THIN MIS 28G	3	OTC; PV
ULTRA THIN MIS 30G	3	OTC; PV
ULTRA THIN MIS 31G	3	OTC; PV
ULTRA THIN MIS 33G	3	OTC; PV
ULTRA THIN MIS LANC 28G	3	OTC; PV
ULTRA THIN MIS LANC 30G	3	OTC; PV
ULTRA THIN MIS LANCETS	3	OTC; PV
UNILET EX II MIS 28G	3	OTC; PV
UNILET EXCEL MIS 23G	3	OTC; PV
UNILET G.P MIS SUPR 23G	3	OTC; PV
UNILET G.P. MIS 21G	3	OTC; PV
UNILET GP 28 MIS ULT THIN	3	OTC; PV
UNILET LANC MIS 33G	3	OTC; PV
UNILET LANCE MIS 21G	3	OTC; PV
UNILET LANCE MIS 28G	3	OTC; PV
UNILET LANCE MIS 33G	3	OTC; PV
UNILET LANCT MIS 28G	3	OTC; PV
UNILET LANCT MIS 30G	3	OTC; PV
UNILET LANCT MIS 33G	3	OTC; PV
UNILET MIS 21G	3	OTC; PV
UNILET SUPER MIS 23G	3	OTC; PV
UNILET SUPER MIS G.P. 23G	3	OTC; PV
UNISTIK 1 MIS 2.4MM	3	OTC; PV
UNISTIK 1 MIS 3.0MM	3	OTC; PV
UNISTIK 2 MIS	3	OTC; PV
UNISTIK 2 MIS 1.8MM	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
UNISTIK 2 MIS 2.4MM	3	OTC; PV
UNISTIK 2 MIS COMFORT	3	OTC; PV
UNISTIK 2 MIS EXTRA	3	OTC; PV
UNISTIK 2 MIS NEONATAL	3	OTC; PV
UNISTIK 2 MIS NORMAL	3	OTC; PV
UNISTIK 2 MIS SUPER	3	OTC; PV
UNISTIK 3 MIS 1.8MM	3	OTC; PV
UNISTIK 3 MIS COMFORT	3	OTC; PV
UNISTIK 3 MIS EXTRA	3	OTC; PV
UNISTIK 3 MIS GENT 30G	3	OTC; PV
UNISTIK 3 MIS NEONATAL	3	OTC; PV
UNISTIK 3 MIS NORMAL	3	OTC; PV
UNISTIK 23G MIS NORMAL	3	OTC; PV
UNISTIK CZT MIS COMFORT	3	OTC; PV
UNISTIK CZT MIS NORMAL	3	OTC; PV
UNISTIK SAFE MIS LANC 28G	3	OTC; PV
UNISTIK SAFE MIS LANC 30G	3	OTC; PV
UNISTIK TOUC MIS LANC 21G	3	OTC; PV
UNISTIK TOUC MIS LANC 23G	3	OTC; PV
UNISTIK TOUC MIS LANC 28G	3	OTC; PV
UNISTIK TOUC MIS LANC 30G	3	OTC; PV
UNIVERSAL 1 MIS 33G	3	OTC; PV
UNIVERSAL 1 MIS LANC 26G	3	OTC; PV
UNIVERSAL 1 MIS LANC 30G	3	OTC; PV
V-GO 20 KIT	NC	
V-GO 30 KIT	NC	
V-GO 40 KIT	NC	
VERIFINE LAN MIS MINI 21G	3	OTC; PV
VERIFINE LAN MIS MINI 23G	3	OTC; PV
VERIFINE LAN MIS MINI 28G	3	OTC; PV
VERIFINE LAN MIS MINI 30G	3	OTC; PV

PARENTERAL THERAPY SUPPLIES

AUTOSHIELD MIS 30GX5MM	7	OTC; PV
BD PEN NEEDL MIS 29GX12.7	7	OTC; PV
BD PEN NEEDL MIS 31GX5MM	7	OTC; PV
BD PEN NEEDL MIS 31GX8MM	7	OTC; PV
BD PEN NEEDL MIS 32GX4MM	7	OTC; PV
BD PEN NEEDL MIS 32GX6MM	7	OTC; PV
INS SYR U500 MIS 31GX6MM	7	PV
INSULIN SYRG MIS 0.3/29G	7	OTC; PV
INSULIN SYRG MIS 0.3/30G	7	OTC; PV
INSULIN SYRG MIS 0.3/31G	7	PV
INSULIN SYRG MIS 0.3/31G	7	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRG MIS 0.5/28G	7	OTC; PV
INSULIN SYRG MIS 0.5/29G	7	OTC; PV
INSULIN SYRG MIS 0.5/30G	7	OTC; PV
INSULIN SYRG MIS 0.5/31G	7	OTC; PV
INSULIN SYRG MIS 1ML	7	OTC; PV
INSULIN SYRG MIS 1ML/27G	7	OTC; PV
INSULIN SYRG MIS 1ML/28G	7	OTC; PV
INSULIN SYRG MIS 1ML/29G	7	OTC; PV
INSULIN SYRG MIS 1ML/30G	7	OTC; PV
INSULIN SYRG MIS 1ML/31G	7	OTC; PV
INSULIN SYRG MIS 2/27.5G	7	OTC; PV
LUER-LOK SYR MIS 1ML/20G	7	OTC; PV

MIGRAINE PRODUCTS

CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

AIMOVIG INJ 70MG/ML	NC	
AIMOVIG INJ 140MG/ML	NC	
AJOVY INJ 225/1.5	2	ST, PA, QL; (autoinjector)
AJOVY INJ 225/1.5	2	ST, PA, QL; (prefilled syringe)
EMGALITY INJ 100MG/ML	2	ST, PA, QL
EMGALITY INJ 120MG/ML	2	ST, PA, QL
EMGALITY INJ 120MG/ML	2	ST, PA, QL; (prefilled syringe)
NURTEC TAB 75MG ODT	2	ST, PA, QL
QULIPTA TAB 10MG	2	ST, PA, QL
QULIPTA TAB 30MG	2	ST, PA, QL
QULIPTA TAB 60MG	2	ST, PA, QL
UBRELVY TAB 50MG	2	ST, PA, QL
UBRELVY TAB 100MG	2	ST, PA, QL
VYEPTI INJ 100MG/ML	NC	

MIGRAINE COMBINATIONS

CAFERGOT TAB 1-100MG	NC	
<i>ergotamine w/ caffeine tab 1-100 mg</i>	NC	
<i>migergot sup 2/100</i>	NC	
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	NC	
TREXIMET TAB 10-60MG	NC	
TREXIMET TAB 85-500MG	NC	

MIGRAINE PRODUCTS

<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	NC	
ERGOMAR SUB 2MG	3	

Drug Name	Drug Tier	Requirements/Limits
MIGRANAL SPR 4MG/ML	3	QL
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POW 50MG	NC	
<i>diclofenac potassium (migraine) packet 50 mg</i>	NC	
SEROTONIN AGONISTS		
<i>almotriptan malate tab 6.25 mg</i>	2	PA, QL
<i>almotriptan malate tab 12.5 mg</i>	2	PA, QL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	PA, QL
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	PA, QL
FROVA TAB 2.5MG	3	ST, PA, QL
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	2	PA, QL
IMITREX INJ 4MG/0.5	3	PA, QL
IMITREX INJ 6MG/0.5	3	PA, QL
IMITREX TAB 25MG	3	PA, QL
IMITREX TAB 50MG	3	PA, QL
IMITREX TAB 100MG	3	PA, QL
MAXALT TAB 10MG	NC	
MAXALT-MLT TAB 10MG	NC	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	PA, QL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	PA, QL
ONZETRA XSAI MIS 11MG	2	PA, QL, ST
RELPAX TAB 20MG	3	PA, QL
RELPAX TAB 40MG	3	PA, QL
REYVOW TAB 50MG	3	ST, PA, QL
REYVOW TAB 100MG	3	ST, PA, QL
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	PA, QL
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	PA, QL
<i>sumatriptan nasal spray 5 mg/act</i>	2	PA, QL
<i>sumatriptan nasal spray 20 mg/act</i>	2	PA, QL
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	PA, QL
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
sumatriptan succinate solution cartridge 4 mg/0.5ml	2	PA, QL
sumatriptan succinate solution cartridge 6 mg/0.5ml	2	PA, QL
sumatriptan succinate tab 25 mg	1	PA, QL
sumatriptan succinate tab 50 mg	1	PA, QL
sumatriptan succinate tab 100 mg	1	PA, QL
TOSYMRA SOL 10MG	NC	
ZEMBRACE SYM INJ 3/0.5ML	2	PA, QL, ST
zolmitriptan nasal spray 2.5 mg/spray unit	2	PA, QL
zolmitriptan nasal spray 5 mg/spray unit	2	PA, QL
zolmitriptan orally disintegrating tab 2.5 mg	1	PA, QL
zolmitriptan orally disintegrating tab 5 mg	1	PA, QL
zolmitriptan tab 2.5 mg	1	PA, QL
zolmitriptan tab 5 mg	1	PA, QL
ZOMIG SPR 2.5MG	3	PA, QL
ZOMIG SPR 5MG	3	PA, QL
zomig tab 2.5mg	1	PA, QL
ZOMIG TAB 2.5MG	3	PA, QL
zomig tab 5mg	1	PA, QL
ZOMIG TAB 5MG	3	PA, QL

MINERALS & ELECTROLYTES

BICARBONATES

SOD ACETATE INJ 2MEQ/ML	3	
SOD BICARB INJ 8.4%	3	
SOD BICARB SOL D5W	NC	
sodium acetate inj 2 meq/ml	1	
sodium acetate inj 4 meq/ml	1	
sodium bicarbonate iv soln 4.2%	1	
sodium bicarbonate iv soln 7.5%	1	
sodium bicarbonate iv soln 8.4%	1	
THAM INJ 30MEQ	3	

CALCIUM

CALCIFOL WAF	3	
CALCIUM CHLO INJ 10%	3	
calcium chloride inj 10%	1	
CALCIUM GLUC INJ 10%	3	
calcium gluconate inj 10%	1	

ELECTROLYTE MIXTURES

D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.3%	3	

Drug Name	Drug Tier	Requirements/Limits
D10W/NACL INJ 0.2%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% in lactated ringers</i>	1	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.33%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	1	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	1	
DW5-NACL INJ 0.225%	3	
ELLIOTTS B INJ	3	
IONOSOL-MB INJ D5W	3	
ISOLYTE-P INJ /D5W	3	
ISOLYTE-S INJ	3	
ISOLYTE-S INJ PH 7.4	3	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	3	
<i>lactated ringer's solution</i>	1	
NORMOSOL -M INJ /D5W	3	
NORMOSOL -R INJ	3	
NORMOSOL-R INJ PH 7.4	3	
NORMOSOL-R SOL /5% DSW	3	
PLASMA-LYTE INJ -A	3	
POT CHL/NACL INJ 20MEQ/L	3	
POT CHL/NACL INJ 40MEQ/L	3	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	1	
<i>ringer's solution</i>	1	
TPN ELECTROL INJ	3	
FLUORIDE		
FLORIVA DRO 0.25MG	3	PV
<i>fluoritab dro 0.125mg</i>	0	ACA, PV
<i>nafrinse chw 1mg f</i>	1	PV
<i>nafrinse dro 0.125mg</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	ACA, PV
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	PV
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	0	ACA, PV
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	PV
IODINE PRODUCTS		
<i>iodine solution strong 5% (lugol's)</i>	1	
MAGNESIUM		
MAGNESIUM SU INJ 2GM/50ML	3	
MAGNESIUM SU INJ 4G/100ML	3	
MAGNESIUM SU INJ 20/500ML	3	
MAGNESIUM SU INJ 40G/1000	3	
MAGNESIUM SU INJ 80MG/ML	3	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	1	
<i>magnesium sulfate inj 50%</i>	1	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	1	
MG SO4/D5W INJ 10MG/ML	3	
MANGANESE		
<i>manganese chloride inj 0.1 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PHOSPHATE		
GLYCOPHOS SOL 1MM/ML	3	
K-PHOS TAB	3	
K-PHOS TAB NEUTRAL	3	
<i>phospha 250 tab neutral</i>	1	
<i>phospho-trin tab 250 neut</i>	1	
<i>phospho-trin tab k500</i>	1	
<i>pot phos monobasic w/sod phos di & monobas tab 155-852-130mg</i>	1	
POTASSIUM INJ PHOSPHAT	3	
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	1	
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	1	
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	1	
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i>	3	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	1	
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i>	1	
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i>	3	
<i>wes-phos 250 tab neutral</i>	1	
POTASSIUM		
EFFER-K TAB 10MEQ	3	
EFFER-K TAB 20MEQ	3	
<i>effer-k tab 25meq ef</i>	1	
<i>k-prime tab 25meq ef</i>	1	
K-TAB TAB 20MEQ	3	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<i>klor-con pak 20meq</i>	1	
<i>klor-con/ef tab 25meq</i>	1	
POT ACETATE INJ 2MEQ/ML	1	
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
<i>potassium acetate inj 2 meq/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride inj 2 meq/ml</i>	1	
<i>potassium chloride inj 10 meq/50ml</i>	1	
<i>potassium chloride inj 10 meq/100ml</i>	1	
<i>potassium chloride inj 20 meq/50ml</i>	1	
<i>potassium chloride inj 20 meq/100ml</i>	1	
<i>potassium chloride inj 40 meq/100ml</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride powder packet 20 meq</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 15 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
POTASSIUM INJ 100MEQ	3	
SODIUM		
SOD CHLORIDE INJ 0.9%	3	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	
<i>sodium chloride iv soln 0.9%</i>	1	
<i>sodium chloride iv soln 0.45%</i>	1	
<i>sodium chloride iv soln 3%</i>	1	
<i>sodium chloride iv soln 4 meq/ml (23.4%)</i>	1	
<i>sodium chloride iv soln 5%</i>	1	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	1	
TRACE MINERALS		
CHROMIUM CL INJ 4MCG/ML	3	
COPPER INJ 0.4MG/ML	3	
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	1	
MULTRY INJ	3	
SELENIOUS AC SOL 12MCG/2M	3	
ZINC		
GALZIN CAP 25MG	3	
GALZIN CAP 50MG	3	
WILZIN CAP 25MG	3	

Drug Name	Drug Tier	Requirements/Limits
ZINC CHLORID INJ 1MG/ML	1	
ZINC SULFATE INJ 1MG/ML	3	
<i>zinc sulfate inj 3 mg/ml</i>	1	
ZINC SULFATE INJ 3MG/ML	3	
<i>zinc sulfate inj 5 mg/ml</i>	1	
ZINC SULFATE INJ 5MG/ML	3	

MISCELLANEOUS THERAPEUTIC CLASSES

CHELATING AGENTS

CUPRIMINE CAP 250MG	NC	SP
CUVRIOR TAB 300MG	NC	SP
DEPEN TITRA TAB 250MG	6	SP
EDETATE DISO INJ 150MG/ML	3	
<i>penicillamine cap 250 mg</i>	4	SP
<i>penicillamine tab 250 mg</i>	4	SP
SYPRINE CAP 250MG	NC	SP
<i>trientine hcl cap 250 mg</i>	4	SP

CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS

PRISMASOL SOL 0/0/1.2	3	
PRISMASOL SOL 0/2.5	3	
PRISMASOL SOL 2/0	3	
PRISMASOL SOL 2/3.5	3	
PRISMASOL SOL 4/0/1.2	3	
PRISMASOL SOL 4/2.5	3	
PRISMASOL SOL B22GK4/0	3	
TRISOD CITRA SOL 0.5%CRRT	3	

ENZYMES

HYLENEX INJ 150 UNIT	3	
XIAFLEX INJ 0.9MG	3	SP, PA

IMMUNOMODULATORS

JOENJA TAB 70MG	NC	SP
<i>lenalidomide cap 5 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 10 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 15 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 20 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 25 mg</i>	4	SP, PA, QL
<i>lenalidomide caps 2.5 mg</i>	4	SP, PA, QL
NIKTIMVO INJ 9/0.18ML	NC	SP
NIKTIMVO INJ 22/0.44	NC	SP
REVLIMID CAP 2.5MG	5	SP, PA, QL
REVLIMID CAP 5MG	5	SP, PA, QL
REVLIMID CAP 10MG	5	SP, PA, QL
REVLIMID CAP 15MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
REVLIMID CAP 20MG	5	SP, PA, QL
REVLIMID CAP 25MG	5	SP, PA, QL
REZUROCK TAB 200MG	NC	SP
RYSTIGGO INJ 280/2ML	6	SP, PA, QL
RYSTIGGO INJ 420/3ML	6	SP, PA, QL
RYSTIGGO INJ 560/4ML	6	SP, PA, QL
RYSTIGGO INJ 840/6ML	6	SP, PA, QL
THALOMID CAP 50MG	5	SP, PA, QL
THALOMID CAP 100MG	5	SP, PA, QL
THALOMID CAP 150MG	5	SP, PA, QL
THALOMID CAP 200MG	5	SP, PA, QL
VYVGART INJ 400/20ML	5	SP, PA, QL
VYVGART INJ HYTRULO	5	SP, PA, QL

IMMUNOSUPPRESSIVE AGENTS

ASTAGRAF XL CAP 0.5MG	3	SP; PV
ASTAGRAF XL CAP 1MG	3	SP; PV
ASTAGRAF XL CAP 5MG	3	SP; PV
ATGAM INJ 250MG	2	
<i>azasan tab 75 mg</i>	1	
<i>azasan tab 100mg</i>	1	
AZATHIOPRINE INJ 100MG	NC	SP
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	1	
<i>azathioprine tab 100 mg</i>	1	
CELLCEPT CAP 250MG	3	SP; PV
CELLCEPT IV INJ 500MG	3	SP; PV
CELLCEPT SUS 200MG/ML	3	SP; PV
CELLCEPT TAB 500MG	3	SP; PV
<i>cyclosporine cap 25 mg</i>	1	SP; PV
<i>cyclosporine cap 100 mg</i>	1	SP; PV
<i>cyclosporine modified cap 25 mg</i>	1	SP; PV
<i>cyclosporine modified cap 50 mg</i>	1	SP; PV
<i>cyclosporine modified cap 100 mg</i>	1	SP; PV
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	SP; PV
ENSPRYNG INJ	5	SP, PA, QL
ENVARUSUS XR TAB 0.75MG	3	SP; PV
ENVARUSUS XR TAB 1MG	3	SP; PV
ENVARUSUS XR TAB 4MG	3	SP; PV
<i>everolimus tab 0.5 mg</i>	1	SP; PV
<i>everolimus tab 0.25 mg</i>	1	SP; PV
<i>everolimus tab 0.75 mg</i>	1	SP; PV
<i>everolimus tab 1 mg</i>	1	SP; PV
<i>gengraf cap 25mg</i>	1	SP; PV

Drug Name	Drug Tier	Requirements/Limits
<i>gengraf cap 100mg</i>	1	SP; PV
<i>gengraf sol 100mg/ml</i>	1	SP; PV
IMURAN TAB 50MG	3	
<i>mycophenolate mofetil cap 250 mg</i>	1	SP; PV
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	SP; PV
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	1	SP; PV
<i>mycophenolate mofetil tab 500 mg</i>	1	SP; PV
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	SP; PV
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	SP; PV
MYFORTIC TAB 180MG	3	SP; PV
MYFORTIC TAB 360MG	3	SP; PV
NEORAL CAP 25MG	2	SP; PV
NEORAL CAP 100MG	2	SP; PV
NEORAL SOL 100MG/ML	2	SP; PV
NULOJIX INJ 250MG	2	SP; PV
PROGRAF CAP 0.5MG	3	SP; PV
PROGRAF CAP 1MG	3	SP; PV
PROGRAF CAP 5MG	3	SP; PV
PROGRAF GRA 0.2MG	3	SP; PV
PROGRAF GRA 1MG	3	SP; PV
PROGRAF INJ 5MG/ML	3	SP; PV
RAPAMUNE SOL 1MG/ML	3	SP; PV
RAPAMUNE TAB 0.5MG	3	SP; PV
RAPAMUNE TAB 1MG	3	SP; PV
RAPAMUNE TAB 2MG	3	SP; PV
SANDIMMUNE CAP 25MG	2	SP; PV
SANDIMMUNE CAP 100MG	2	SP; PV
SANDIMMUNE INJ 50MG/ML	2	SP; PV
SIMULECT INJ 10MG	2	
SIMULECT INJ 20MG	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	SP; PV
<i>sirolimus tab 0.5 mg</i>	1	SP; PV
<i>sirolimus tab 1 mg</i>	1	SP; PV
<i>sirolimus tab 2 mg</i>	1	SP; PV
<i>tacrolimus cap 0.5 mg</i>	1	SP; PV
<i>tacrolimus cap 1 mg</i>	1	SP; PV
<i>tacrolimus cap 5 mg</i>	1	SP; PV
THYMOGLOBULN INJ 25MG	2	
UPLIZNA SOL 100MG	NC	SP
ZORTRESS TAB 0.5MG	3	SP; PV

Drug Name	Drug Tier	Requirements/Limits
ZORTRESS TAB 0.25MG	3	SP; PV
ZORTRESS TAB 0.75MG	3	SP; PV
ZORTRESS TAB 1MG	3	SP; PV
IRRIGATION SOLUTIONS		
<i>argyl saline sol 100ml</i>	1	
<i>lactated ringer's for irrigation</i>	1	
<i>physiolyte sol</i>	1	
<i>physiosol sol irrigat</i>	1	
<i>ringer's solution for irrigation</i>	1	
<i>tis-u-sol sol</i>	1	
<i>water for irrigation, sterile irrigation soln</i>	1	
LYMPHATIC AGENTS		
SYLVANT SOL 100MG	3	SP, PA
SYLVANT SOL 400MG	3	SP, PA
MISC NATURAL PRODUCTS		
IMUBOLIC CAP	NC	
MISCELLANEOUS THERAPEUTIC CLASSES		
NEXAVIR INJ	3	
PATIENT ASSESSMENT SERVICES		
EUA PATIENT MIS ASSESS	3	
PERITONEAL DIALYSIS SOLUTIONS		
DELFLEX-LC SOL 1.5% DEX	3	
DELFLEX-LC/ SOL 2.5% DEX	3	
DELFLEX-LC/ SOL 4.25 DEX	3	
DELFLEX-SM/ SOL 1.5% DEX	3	
DELFLEX-SM/ SOL 2.5% DEX	3	
DIANEAL LOW SOL CALCIUM	3	
DIANEAL PD-2 SOL 1.5% DEX	3	
DIANEAL PD-2 SOL 2.5% DEX	3	
DIANEAL PD-2 SOL 4.25%DEX	3	
DIANEAL SOL LOW CALC	3	
EXTRANEAL SOL	3	
ULTRABAG/ SOL DIANEAL	3	
ULTRABAG/PD2 SOL DIANEAL	3	
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS		
VIJOICE TAB 50MG	NC	SP
VIJOICE TAB 125MG	NC	SP
VIJOICE TAB 250MG	NC	SP
POTASSIUM REMOVING AGENTS		
LOKELMA PAK 5GM	NC	
LOKELMA PAK 10GM	NC	
<i>sodium polystyrene sulfonate powder</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sps sus 15gm/60</i>	2	
<i>sps sus 30gm/120</i>	2	
VELTASSA POW 1GM	2	
VELTASSA POW 8.4GM	2	
VELTASSA POW 16.8GM	2	
VELTASSA POW 25.2GM	2	
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP 50MG	6	SP, PA, QL
ZOKINVY CAP 75MG	6	SP, PA, QL
PROSTAGLANDINS		
<i>alprostadil inj 500 mcg/ml</i>	1	
PROSTIN VR INJ 500MCG	3	
SCLEROSING AGENTS		
ASCLERA INJ 0.5%	3	
ASCLERA INJ 1%	3	
ETHAMOLIN INJ 5%	3	
<i>sodium tetradecyl sulfate inj 3%</i>	1	
<i>sotradecol inj 1%</i>	1	
<i>sotradecol inj 3%</i>	1	
VARITHENA AER 10MG/ML	6	SP
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 120MG	6	SP, PA, QL
BENLYSTA INJ 200MG/ML	6	SP, PA, QL
BENLYSTA INJ 400MG	6	SP, PA, QL
UREMIC PRURITUS AGENTS		
KORSUVA INJ 50MCG/ML	NC	
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl laryngotracheal soln 4%</i>	2	
<i>lidocaine hcl viscous soln 2%</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	
<i>nystatin susp 100000 unit/ml</i>	1	
ORAVIG TAB 50MG	3	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
PERIDEX SOL 0.12%	3	
<i>periogard sol 0.12%</i>	1	
PERIODONTAL PRODUCTS		
ARESTIN MIS 1MG	3	

Drug Name	Drug Tier	Requirements/Limits
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq pst 0.1%</i>	1	
<i>oralone dent pst 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
THROAT PRODUCTS - MISC.		
AQUORAL SPR	3	
BOCASAL POW	3	
CAPHOSOL SOL	3	
<i>cevimeline hcl cap 30 mg</i>	1	
EPISIL LIQ	2	
EVOXAC CAP 30MG	3	
GELCLAIR GEL	3	PA
GELX GEL	3	PA
MUCOTROL WAF	3	PA
MUGARD LIQ	5	SP, PA
NEUTRASAL POW	NC	
NUMOISYN LIQ	3	
NUMOISYN LOZ	3	
ORAFATE PST 10%	3	PA
ORAMAGICRX SUS	3	PA
ORAPEUTIC GEL	3	PA
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
PROTHELIAL PST 10%	3	PA
SALAGEN TAB 5MG	3	
SALAGEN TAB 7.5MG	3	
SALIVAMAX POW	NC	
SILATRIX GEL 10%	3	PA
MULTIVITAMINS		
B-COMPLEX W/ FOLIC ACID		
FOLIC-K CAP	NC	
NEPHRO-VITE TAB RX	NC	
MULTIPLE VITAMINS W/ MINERALS		
BACMIN TAB	NC	
DAYAVITE TAB	NC	
DERMACINRX TAB RIBOT-E	NC	
DEXATRAM CAP	NC	
DIALYVITE TAB SUPREM D	NC	
FOLAMED DHA CAP	NC	
FOLITIN-Z TAB	NC	
HYLAZINC TAB	NC	
KEYFOLIC TAB	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>multipro cap</i>	1	
NUTRICAP TAB	NC	
OCUVEL CAP 0.5MG	NC	
ONEVITE TAB	NC	
REQ 49+ TAB	NC	
SIDEROL TAB	NC	
STROVITE FOR TAB	NC	
STROVITE ONE TAB	NC	
THRIVITE 19 TAB	NC	
UDAMIN SP TAB	NC	
VENEXA FE TAB	NC	
VENEXA TAB	NC	
VENTRIXYL FE TAB	NC	
VENTRIXYL TAB	NC	
VITAROCA PLU TAB	NC	
VITRAMYN TAB	NC	
VITRANOL FE TAB	NC	
VITRANOL TAB	NC	
VITREXYL TAB	NC	
VITREXYL TAB IRON	NC	
ZINTREXYL-C TAB	NC	
MULTIPLE VITAMINS W/ MINERALS & FLUORIDE-IRON-FOLIC ACID		
QUFLORA FE CHW	NC	
MULTIVITAMINS		
VITLIPID N INJ ADULT	3	
PED MULTI VITAMINS W/FL & FE		
<i>multi-vit/fl dro /fe 0.25</i>	1	PV
POLY-VI-FLOR CHW W/IRON	NC	
POLY-VI-FLOR SUS /IRON	NC	OTC
PED MV W/ FLUORIDE		
FLORIVA DRO PLUS	NC	
<i>multi vit/fl chw 0.25mg</i>	1	
<i>multi-vit/fl dro 0.5mg/ml</i>	1	PV
<i>multivit/fl chw 0.5mg</i>	1	PV
<i>multivit/fl chw 0.25mg</i>	1	PV
<i>multivit/fl chw 1mg</i>	1	PV
<i>multivit/fl dro 0.25mg</i>	1	PV
POLY-VI-FLOR CHW 0.5MG	NC	
POLY-VI-FLOR CHW 0.25MG	NC	
POLY-VI-FLOR CHW 1MG	NC	
POLY-VI-FLOR MIS FS 0.5MG	NC	
POLY-VI-FLOR MIS FS 0.25	NC	

Drug Name	Drug Tier	Requirements/Limits
POLY-VI-FLOR SUS 0.25/ML	NC	
QUFLORA CHW	NC	
QUFLORA PED DRO 0.5MG/ML	NC	
QUFLORA PED DRO 0.25MG	NC	
TRI-VI-FLOR SUS 0.5MG/ML	NC	
TRI-VI-FLOR SUS 0.25/ML	NC	
TRI-VI-FLORO SUS 0.5MG/ML	NC	
TRI-VI-FLORO SUS 0.25/ML	NC	
<i>tri-vit/fluor dro 0.5mg</i>	1	PV
<i>tri-vit/fluor dro 0.25mg</i>	1	PV
PEDIATRIC MULTIPLE VITAMINS		
VITLIPID N INJ INFANT	3	
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA CHW 0.5MG	NC	
FLORIVA CHW 0.25MG	NC	
FLORIVA CHW 1MG	NC	
TEXAVITE LQ LIQ	NC	
PRENATAL VITAMINS		
ATABEX EC TAB	NC	
C-NATE DHA CAP 28-1-200	NC	
CITRANATAL CAP HARMONY	NC	
CITRANATAL CAP MEDLEY	NC	
CITRANATAL MIS 90 DHA	NC	
CITRANATAL MIS B-CALM	NC	
CITRANATAL PAK ASSURE	NC	
CITRANATAL PAK DHA	NC	
CITRANATAL PAK ESSENCE	NC	
CITRANATAL TAB BLOOM	NC	
CITRANATAL TAB RX	NC	
CO-NATAL FA TAB 29-1MG	NC	
COMPLETE NAT PAK DHA	NC	
COMPLETENATE CHW	NC	
CONCEPT DHA CAP	NC	
CONCEPT OB CAP	NC	
DUET DHA 400 MIS 25-1-400	NC	
DUET DHA MIS BALANCED	NC	
<i>elite-ob tab</i>	1	PV
ENBRACE HR CAP	NC	
FOLET DHA PAK	NC	
FOLET ONE CAP 38-1-225	NC	
FOLIVANE-OB CAP	NC	
<i>inatal gt tab</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
KOSHR PRENAT TAB 30-1MG	NC	
MARNATAL-F CAP	NC	
MYNATAL CAP	NC	
MYNATAL PLUS TAB	NC	
MYNATAL-Z TAB	NC	
NATACHEW CHW	NC	
NATALVIT TAB 75-1MG	NC	
NEEVO DHA CAP 27-1.13	NC	
NEONATAL TAB COMPLETE	NC	
NESTABS DHA PAK	NC	
NESTABS ONE CAP	NC	
NESTABS TAB	NC	
O-CAL TAB PRENATAL	NC	
OB COMPLETE CAP ONE	NC	
OB COMPLETE CAP PETITE	NC	
OB COMPLETE TAB	NC	
OB COMPLETE TAB PREMIER	NC	
OB COMPLETE/ CAP DHA	NC	
OBSTETRIX EC TAB	NC	
OBSTETRIX EC TAB	NC	OTC
OBSTETRIX MIS DHA	NC	OTC
PNV FOLIC AC TAB + IRON	NC	
PNV PRENATAL TAB PLUS	NC	
PNV TABS TAB 29-1MG	NC	
<i>pnv-dha cap</i>	1	PV
PNV-DHA CAP DOCUSATE	NC	
PNV-OMEGA CAP	NC	
<i>pnv-select tab</i>	1	PV
PREMESISRX TAB	NC	
PRENA1 CHW	NC	
PRENA1 PEARL CAP	NC	
PRENA 1 TRUE MIS	NC	
PRENAISSANCE CAP	NC	
PRENAISSANCE CAP PLUS	NC	
<i>prenatabs rx tab</i>	1	OTC; PV
PRENATAL 19 CHW 29-1MG	NC	
<i>prenatal 19 chw tab</i>	1	PV
PRENATAL 19 TAB 29-1MG	NC	
PRENATAL DHA PAK 27-1-250	NC	
PRENATAL TAB 27-1MG	NC	
PRENATAL TAB PLUS	NC	
PRENATAL VIT TAB LOW IRON	NC	
PRENATAL+FE TAB 29-1MG	NC	

Drug Name	Drug Tier	Requirements/Limits
PRENATAL-U CAP 106.5-1	NC	
PRENATE AM TAB 1MG	NC	
PRENATE CAP ENHANCE	NC	
PRENATE CAP ESSENT	NC	
PRENATE CAP PIXIE	NC	
PRENATE CAP RESTORE	NC	
PRENATE CHW 0.6-0.4	NC	
PRENATE DHA CAP	NC	
PRENATE MINI CAP	NC	
PRENATE TAB ELITE	NC	
PRENATOL-M TAB 27-1.2MG	NC	
PRENATRIX TAB	NC	
PREPLUS TAB 27-1MG	NC	
PRETAB TAB 29-1MG	NC	
PRIMACARE CAP	NC	
PROVIDA OB CAP	NC	
REDICHEW RX CHW	NC	
RELNATE DHA CAP	NC	
SE-NATAL 19 CHW	NC	
SE-NATAL 19 TAB	NC	
SELECT-OB CHW	NC	
SELECT-OB+ PAK DHA	NC	
TARON-C DHA CAP	NC	
TARON-PREX CAP	NC	
THRIVITE RX TAB 29-1MG	NC	
TRI-TABS DHA MIS	NC	
TRICARE PRE CAP 27-1-500	NC	
TRICARE TAB PRENATAL	NC	
TRINATAL RX TAB 1	NC	
<i>trinate tab</i>	1	PV
TRISTART DHA CAP	NC	
TRISTART ONE CAP 35-1-215	NC	
VINATE DHA CAP 27-1.13	NC	
VINATE II TAB	NC	
VINATE M TAB	NC	
VINATE ONE TAB	NC	
VIRT-C DHA CAP	NC	
VIRT-NATE CAP DHA	NC	
VIRT-PN DHA CAP	NC	
VIRT-PN PLUS CAP	NC	
VITAFOL CAP ULTRA	NC	
VITAFOL CHW GUMMIES	NC	
VITAFOL FE+ CAP	NC	

Drug Name	Drug Tier	Requirements/Limits
VITAFOL-NANO TAB	NC	
VITAFOL-OB PAK +DHA	NC	
VITAFOL-OB TAB 65-1MG	NC	
VITAFOL-ONE CAP	NC	
VITAMEDMD CAP ONE RX	NC	
VITAPEARL CAP	NC	
VITATRUE MIS	NC	
VIVA DHA CAP	NC	
VOL-PLUS TAB	NC	
VOL-TAB RX TAB	NC	
VP-HEME OB MIS + DHA	NC	
VP-PNV-DHA CAP	NC	
ZATEAN-PN CAP DHA	NC	
ZATEAN-PN CAP PLUS	NC	

MUSCULOSKELETAL THERAPY AGENTS

ARTICULAR CARTILAGE REPAIR THERAPY

MACI MIS	NC

CENTRAL MUSCLE RELAXANTS

AMRIX CAP 15MG	NC
AMRIX CAP 30MG	NC
<i>baclofen intrathecal inj 10 mg/20ml (500 mcg/ml)</i>	1
<i>baclofen intrathecal inj 20 mg/20ml (1000 mcg/ml)</i>	1
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	1
<i>baclofen oral soln 5 mg/5ml</i>	2
<i>baclofen oral soln 10 mg/5ml</i>	2
<i>baclofen tab 10 mg</i>	1
<i>baclofen tab 20 mg</i>	1
<i>carisoprodol tab 250 mg</i>	NC
<i>carisoprodol tab 350 mg</i>	1
<i>chlorzoxazone tab 250 mg</i>	1
<i>chlorzoxazone tab 375 mg</i>	NC
<i>chlorzoxazone tab 500 mg</i>	1
<i>chlorzoxazone tab 750 mg</i>	NC
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	NC
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	NC
<i>cyclobenzaprine hcl tab 5 mg</i>	1
<i>cyclobenzaprine hcl tab 7.5 mg</i>	NC
<i>cyclobenzaprine hcl tab 10 mg</i>	1
<i>fexmid tab 7.5mg</i>	NC
FLEQSUVY SUS 25MG/5ML	NC

Drug Name	Drug Tier	Requirements/Limits
GABLOFEN INJ 50MCG/ML	3	
GABLOFEN INJ 10000/20	3	
GABLOFEN INJ 20000/20	3	
GABLOFEN INJ 40000/20	3	
LIORESAL INT INJ 0.05MG/1	3	
LIORESAL INT INJ 10MG/5ML	3	
LIORESAL INT INJ 10MG/20	3	
LIORESAL INT INJ 40MG/20	3	
<i>lorzone tab 375mg</i>	NC	
<i>lorzone tab 750mg</i>	NC	
LYVISPAH GRA 5MG	2	
LYVISPAH GRA 10MG	2	
LYVISPAH GRA 20MG	2	
<i>metaxalone tab 400 mg</i>	NC	
<i>metaxalone tab 800 mg</i>	1	
<i>metaxalone tab 800 mg</i>	NC	
<i>methocarbamol inj 1000 mg/10ml</i>	2	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
<i>orphenadrine citrate inj 30 mg/ml</i>	1	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
ROBAXIN INJ 100MG/ML	3	
SOMA TAB 250MG	3	
SOMA TAB 350MG	3	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
ZANAFLEX CAP 2MG	3	
ZANAFLEX CAP 4MG	3	
ZANAFLEX CAP 6MG	3	
ZANAFLEX TAB 4MG	3	
DIRECT MUSCLE RELAXANTS		
DANTRIUM CAP 25MG	3	
DANTRIUM IV INJ 20MG	3	
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
<i>dantrolene sodium for iv soln 20 mg</i>	1	
<i>revonto inj 20mg</i>	1	
RYANODEX INJ 250MG	3	

Drug Name	Drug Tier	Requirements/Limits
MUSCLE RELAXANT COMBINATIONS		
<i>norgesic tab</i>	NC	
<i>norgesic tab forte</i>	NC	
<i>orphenadrine w/ aspirin & caffeine tab 25-385-30 mg</i>	NC	
<i>orphenadrine w/ aspirin & caffeine tab 50-770-60 mg</i>	NC	
<i>orphengesic tab forte</i>	NC	
VISCOSUPPLEMENTS		
DUROLANE INJ 60MG/3ML	2	PA
EUFLEXXA INJ 10MG/ML	2	PA
GEL-ONE INJ 30MG/3ML	NC	
GELSYN-3 INJ 16.8/2ML	2	PA
GENVISC 850 INJ 25/2.5	3	PA
HYALGAN INJ 20MG/2ML	NC	
HYMOVIS INJ 24MG/3ML	NC	
MONOVISC INJ 88MG/4ML	NC	
ORTHOVISC INJ 15MG/ML	NC	
SUPARTZ FX INJ 25/2.5ML	2	PA
SYNVISC INJ 8MG/ML	NC	
SYNVISC ONE INJ 8MG/ML	NC	
VISCO-3 INJ 25/2.5ML	NC	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	
DYMISTA SPR 137-50	NC	
RYALTRIS SPR 665-25	3	
NASAL AGENTS - MISC.		
NOZIN NASAL KIT SANITIZE	3	OTC
NOZIN NASAL MIS SANITIZE	3	OTC
NASAL ANESTHETICS		
COCAINE HCL SOL 40MG/ML	NC	
GOPRELTO SOL 40MG/ML	NC	
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	1	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL STEROIDS		
BECONASE AQ SUS 0.042%	NC	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	
OMNARIS SPR	NC	
QNASL AER 80MCG	NC	
QNASL CHILD SPR 40MCG	NC	
SINUVA IMP 1350MCG	NC	
VERAMYST SPR 27.5MCG	NC	
XHANCE MIS 93MCG	3	
ZETONNA AER 37MCG	NC	
SYMPATHOMIMETIC DECONGESTANTS		
ADRENALIN SOL 1:1000	3	
<i>epinephrine hcl nasal soln 0.1%</i>	1	
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>edaravone inj 30 mg/100ml (0.3 mg/ml)</i>	4	SP, PA, QL
RADICAVA INJ 30MG	6	SP, PA, QL
RADICAVA ORS SUS 105/5ML	5	SP, PA, QL
RADICAVA ORS SUS STARTER	5	SP, PA, QL
RELYVRIO PAK 3-1GM	NC	SP
<i>riluzole tab 50 mg</i>	1	
TEGLUTIK SUS 50/10ML	NC	
DEPOLARIZING MUSCLE RELAXANTS		
ANECTINE INJ 20MG/ML	3	
ANECTINE INJ 200/10ML	3	
QUELICIN INJ 20MG/ML	3	
SUCCINYLCHOL INJ 20MG/ML	3	
<i>succinylcholine chloride inj 20 mg/ml</i>	1	
FRIEDRICH'S ATAXIA AGENTS		
SKYCLARYS CAP 50MG	6	SP, PA
MUSCULAR DYSTROPHY AGENTS		
EXONDYS 51 SOL 100/2ML	6	SP, PA, QL
EXONDYS 51 SOL 500/10ML	6	SP, PA, QL
VILTEPSO SOL	NC	SP
VYONDYS 53 INJ 100/2ML	NC	SP
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX INJ 100UNIT	NC	
BOTOX INJ 200UNIT	NC	

Drug Name	Drug Tier	Requirements/Limits
DAXXIFY INJ 100U	2	PA
DYSPOIN INJ 300UNIT	NC	
DYSPOIN INJ 500UNIT	NC	
MYOBLOC INJ 2500/0.5	NC	
MYOBLOC INJ 5000/ML	NC	
MYOBLOC INJ 10000/2	NC	
XEOMIN INJ 50 UNIT	2	PA
XEOMIN INJ 100UNIT	2	PA
XEOMIN INJ 200UNIT	2	PA

NONDEPOLARIZING MUSCLE RELAXANTS

<i>atracurium besylate iv soln 100 mg/10ml</i>	1	
<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	1	
<i>cisatracurium besylate (pf) iv soln 10 mg/5ml (2 mg/ml)</i>	1	
<i>cisatracurium besylate (pf) iv soln 200 mg/20ml (10 mg/ml)</i>	1	
<i>cisatracurium besylate iv soln 20 mg/10ml (2 mg/ml)</i>	1	
ROCURON BRO SOL 100/10ML	NC	
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	1	
<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i>	1	
<i>vecuronium bromide for inj 10 mg</i>	1	
<i>vecuronium bromide for inj 20 mg</i>	1	

RETT SYNDROME AGENTS

DAYBUE SOL 200MG/ML	6	SP, PA, QL

SPINAL MUSCULAR ATROPHY AGENTS (SMA)

EVRYSDI SOL	6	SP, PA, QL
SPINRAZA INJ 12MG/5ML	NC	

NUTRIENTS

CARBOHYDRATES

<i>dextrose inj 5%</i>	1	
<i>dextrose inj 10%</i>	1	
DEXTROSE INJ 20%	3	
<i>dextrose inj 25%</i>	1	
DEXTROSE INJ 25%	3	
DEXTROSE INJ 30%	3	
DEXTROSE INJ 40%	3	
<i>dextrose inj 50%</i>	1	
DEXTROSE INJ 50%	3	

Drug Name	Drug Tier	Requirements/Limits
<i>dextrose inj 70%</i>	1	
LIPIDS		
CLINOLIPID EMU 20%	3	
INTRALIPID INJ 20%	NC	
INTRALIPID INJ 30%	3	
NEOKE MCT70 POW	NC	
NUTRILIPID EMU 20%	NC	
SMOFLIPID EMU	3	
LIPOTROPICS		
LECITHIN GRA	3	
PROTEIN-CARBOHYDRATE-LIPID COMBINATIONS		
PERIKABIVEN EMU	3	
PROTEINS		
AMINO ACID INJ 5%	3	
AMINO/DEXTRO SOL CAL/HEPA	3	
<i>aminoam cap rms</i>	1	
<i>aminorelief cap rms</i>	1	
<i>aminosyn ii sol 15%</i>	1	
AMINOSYN INJ 10%	3	
AMINOSYN-PF INJ 7%	3	
AMINOSYN-PF INJ 10%	3	
CLINIMIX E INJ 2.75/D5W	3	
CLINIMIX E INJ 4.25/D5W	3	
CLINIMIX E INJ 4.25/D10	3	
CLINIMIX E INJ 5%/D15W	3	
CLINIMIX E INJ 5%/D20W	3	
CLINIMIX INJ 4.25/D5W	3	
CLINIMIX INJ 4.25/D10	3	
CLINIMIX INJ 5%/D15W	3	
CLINIMIX INJ 5%/D20W	3	
CLINIMIX INJ 8/10	3	
CLINIMIX INJ 8/14	3	
<i>clinisol sf inj 15%</i>	1	
ELCYS INJ 50MG/ML	3	
<i>plenamine inj 15%</i>	1	
PREMASOL SOL 10%	3	
PROSOL INJ 20%	3	
TRAVASOL INJ 10%	3	
TROPHAMINE INJ 10%	3	
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT MIS 5MG OP	NC	

Drug Name	Drug Tier	Requirements/Limits
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	NC	
BETIMOL SOL 0.25%	NC	
BETOPTIC-S SUS 0.25% OP	2	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	1	
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	NC	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 2-0.5%OP	3	
DORZOL/TIMOL SOL 2-0.5%OP	NC	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	1	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	1	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
TIM/BRIM/DOR SOL	NC	
TIM/BRIM/DOR SOL /BIMATOP	NC	
TIM/DORZ/LAT SOL	NC	
TIMOL/BRIM SOL DORZ/LAT	NC	
TIMOL/BRIMO/ SOL DORZOL	NC	
TIMOL/LATAN SOL	NC	
TIMOLOL MAL/ SOL BIMATOPR	NC	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
<i>timolol maleate preservative free ophth soln 0.5%</i>	2	
<i>timolol maleate preservative free ophth soln 0.25%</i>	1	
<i>timolol ophth soln 0.5%</i>	1	
TIMOPTIC OCU SOL 0.25% OP	NC	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	
TIMOPTIC-XE SOL 0.25% OP	3	
CYCLOPLEGIC MYDRIATICS		
<i>altafrin sol 2.5% op</i>	1	
<i>altafrin sol 10% op</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ATROPINE SUL SOL 1% OP	3	
<i>atropine sulfate ophth soln 1%</i>	1	
CYCLOGYL SOL 0.5% OP	3	
CYCLOGYL SOL 1% OP	3	
CYCLOGYL SOL 2% OP	3	
CYCLOMYDRIL SOL OP	3	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</i>	1	
MYDRIACYL SOL 1% OP	3	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
MIOTICS		
MIOCHOL-E SOL 1:100	3	
MIOSTAT INJ 0.01% OP	3	
PHOSPHOLINE SOL 0.125%OP	3	
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
QLOSI SOL 0.4%	NC	
OPHTHALMIC - ANGIOGENESIS INHIBITORS		
BEOVU INJ 6/0.05ML	NC	SP
BEVACIZUMAB INJ 2.75MG	NC	SP
BEVACIZUMAB INJ 3.75MG	NC	SP
BYOOVIZ INJ 0.5MG	5	SP, PA
CIMERLI INJ 0.3MG	5	SP, PA
CIMERLI INJ 0.5MG	5	SP, PA
EYLEA INJ 2/0.05ML	NC	SP
LUCENTIS INJ 0.3MG	NC	SP
LUCENTIS INJ 0.5MG	NC	SP
LUCENTIS SOL 0.3MG	NC	SP
LUCENTIS SOL 0.5MG	NC	SP
SUSVIMO INJ 10/0.1ML	3	PA
OPHTHALMIC ADRENERGIC AGENTS		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	2	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
BRIMO/DORZO SOL 0.15-2%	NC	
<i>brimonidine tartrate ophth soln 0.1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
IOPIDINE SOL 1% OP	3	
SIMBRINZA SUS 1-0.2%	2	
OPHTHALMIC ANTI-INFECTIVES		
<i>ak-poly-bac oin op</i>	1	
AZASITE SOL 1%	NC	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUS 0.6%	2	
BETADINE SOL 5% OP	3	
CILOXAN OIN 0.3% OP	NC	
CILOXAN SOL 0.3% OP	NC	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
ERYTHROMYCIN OIN 5MG/GM	3	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentak oin 0.3% op</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
<i>levofloxacin ophth soln 1.5%</i>	1	
MITOSOL KIT 0.2MG	3	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
MOXIFLOXACIN SOL 1MG/ML	NC	
MOXIFLOXACIN SOL 5MG/ML	NC	
NATACYN SUS 5% OP	3	
<i>neo-polycin oin op</i>	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
OCUFLOX DRO 0.3% OP	3	
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>polycin oin op</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
POVIDONE IOD SOL 5%	3	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
TOBREX OIN 0.3% OP	3	
<i>trifluridine ophth soln 1%</i>	2	
VIGAMOX DRO 0.5%	3	
XDEMYVY DRO 0.25%	NC	
ZIRGAN GEL 0.15%	NC	
OPHTHALMIC COMPLEMENT INHIBITORS		
IZERVAY SOL 2/0.1ML	NC	SP
SYFOVRE INJ 15/0.1ML	NC	SP
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine (ophth) emulsion 0.05%</i>	NC	
RESTASIS EMU 0.05% OP	1	PA, QL
RESTASIS MUL EMU 0.05% OP	2	PA, QL
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	2	PA
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA SOL 0.02%	NC	
ROCKLATAN DRO	NC	
OPHTHALMIC LOCAL ANESTHETICS		
AKTEN GEL 3.5%	3	
ALCAINE SOL 0.5% OP	3	
<i>altacaine sol 0.5% op</i>	1	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE SOL 20MCG/ML	6	SP, QL
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE INJ 15MG	6	SP, PA
OPHTHALMIC PHOTOENHANCERS		
PHOTREXA VIS SOL 0.146-20	NC	
PHOTREXA/PHO SOL VISC KIT	NC	
OPHTHALMIC STEROIDS		
ALREX SUS 0.2%	NC	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	3	
CLOBETASOL SUS 0.05%	3	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
DEXTENZA MIS 0.4MG	NC	
DEXYCU SUS 9%	NC	
<i>difluprednate ophth emulsion 0.05%</i>	1	
DUREZOL EMU 0.05%	3	

Drug Name	Drug Tier	Requirements/Limits
EYSUVIS DRO 0.25%	3	PA, QL
FLAREX SUS 0.1% OP	NC	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML FORTE SUS 0.25% OP	NC	
FML LIQUIFLM SUS 0.1% OP	NC	
FML OIN 0.1% OP	NC	
ILUVIEN IMP 0.19MG	6	SP
INVELTYS SUS 1%	NC	
LOTEMAX GEL 0.5%	NC	
LOTEMAX OIN 0.5%	NC	
LOTEMAX SM GEL 0.38%	NC	
LOTEMAX SUS 0.5%	NC	
<i>loteprednol etabonate ophth gel 0.5%</i>	1	
<i>loteprednol etabonate ophth susp 0.2%</i>	2	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
MAXIDEX SUS 0.1% OP	NC	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
<i>neo-polycin oin hc 1%op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
OZURDEX IMP 0.7MG	6	SP
PRED FORTE SUS 1% OP	NC	
PRED MILD SUS 0.12% OP	NC	
PRED SOD PHO SOL 1% OP	3	
PRED-G S.O.P OIN OP	3	
PRED-G SUS OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE SUS 1%	3	
RETISERT IMP 0.59MG	6	SP
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	NC	
TOBRADEX SUS 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
TRIESENCE INJ 40MG/ML	3	
TRIMOXI+ INJ	NC	
XIPERE SUS 40MG/ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
YUTIQ IMP 0.18MG	NC	SP
ZYLET SUS 0.5-0.3%	NC	
OPHTHALMIC SURGICAL AIDS		
AMVISC INJ 12MG/ML	3	
AMVISC PLUS INJ 16MG/ML	3	
GELFILM MIS OP	3	
HEALON5 PRO INJ 23MG/ML	3	
HEALON DUET INJ PRO	3	
HEALON GV INJ 18MG PRO	3	
HEALON PRO INJ 10MG/ML	3	
MEMBRANEBLUE INJ 0.15%	3	
NUVISC INJ 12MG/ML	3	
OMIDRIA INJ 1-0.3%	3	
PROVISC INJ 1%	3	
VISIONBLUE INJ 0.06%	3	
OPHTHALMICS - MISC.		
ACULAR LS SOL 0.4%	3	
ACULAR SOL 0.5% OP	3	
ACUVAIL SOL 0.45%	NC	
<i>ak-fluor inj 10% op</i>	1	
AK-FLUOR INJ 25% OP	3	
ALOCIL SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>altafluor-be sol 0.25-0.4</i>	1	
<i>azelastine hcl ophth soln 0.05%</i>	1	
AZOPT SUS 1% OP	3	
<i>bepotastine besilate ophth soln 1.5%</i>	1	
BEPREVE DRO 1.5% OP	3	
<i>brinzolamide ophth susp 1%</i>	1	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	
BROMSITE DRO 0.075%OP	NC	
BSS PLUS SOL OP	3	
BSS SOL OP	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
CYSTARAN SOL 0.44%	6	SP, PA, QL
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2% OP	3	

Drug Name	Drug Tier	Requirements/Limits
<i>epinastine hcl ophth soln 0.05%</i>	1	
FLUOR-I-STRI TES 1MG OP	1	
FLUORE/BENOX SOL 0.3-0.4%	3	
<i>fluorescein sodium iv soln 10%</i>	1	
<i>fluorescein w/ benoxinate ophth soln 0.25-0.4%</i>	1	
<i>fluorescein w/ proparacaine ophth soln 0.25-0.5%</i>	1	
FLUORESCITE INJ 10% OP	3	
FLURA-SAFE SOL	3	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
ILEVRO DRO 0.3% OP	2	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
LASTACFT SOL 0.25%	NC	
MIEBO DRO 1.3GM/ML	NC	
NEVANAC SUS 0.1%	NC	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PAREMYD SOL 1-0.25%	3	
PROLENSA DRO 0.07% OP	2	
TRUSOPT SOL 2% OP	3	
UPNEEQ SOL 0.1%	NC	
ZERVIAE DRO 0.24%	NC	

PROSTAGLANDINS - OPHTHALMIC

<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
LATANOPROST SOL 0.005%	NC	
LUMIGAN SOL 0.01% OP	NC	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
TRAVATAN Z DRO 0.004%	NC	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
VYZULTA SOL 0.024%	NC	
XALATAN SOL 0.005%	3	
ZIOPTAN DRO 0.0015%	2	ST

OTIC AGENTS

OTIC AGENTS - MISCELLANEOUS

<i>acetic acid otic soln 2%</i>	1	

OTIC ANTI-INFECTIVES

CETRAXAL SOL 0.2%	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIPRIO SUS 60MG/ML	NC	
OTIC COMBINATIONS		
CIPRO HC SUS OTIC	NC	
CIPRODEX SUS 0.3-0.1%	NC	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	NC	
CORTISPORIN SUS -TC OTIC	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
OTOVEL DRO	NC	
OTIC STEROIDS		
DERMOTIC OIL 0.01%	3	
<i>flac oil 0.01%</i>	1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
OXYTOCICS		
ABORTIFACIENTS/AGENTS FOR CERVICAL RIPENING		
<i>carboprost tromethamine im soln 250 mcg/ml</i>	1	
CERVIDIL VAG MIS 10MG INS	3	
HEMABATE INJ 250MCG	3	
PREPIDIL GEL 0.5MG/3G	3	
OXYTOCICS		
<i>methergine tab 0.2mg</i>	2	
<i>methylergonovine maleate inj 0.2 mg/ml</i>	1	
<i>methylergonovine maleate tab 0.2 mg</i>	2	
<i>oxytocin inj 10 unit/ml</i>	1	
PITOCIN INJ 10UNT/ML	3	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ANTITOXINS-ANTIVENINS		
ANASCORP INJ	3	
ANAVIP INJ	6	SP
ANTIVENIN KIT LAT MACT	3	
ANTIVENIN NA INJ CORAL SN	3	
CROFAB INJ	3	
IMMUNE SERUMS		
ALYGLO INJ 5GM/50ML	NC	
ALYGLO INJ 10/100ML	NC	

Drug Name	Drug Tier	Requirements/Limits
ALYGLO INJ 20/200ML	NC	
BIVIGAM INJ 10%	M	
CARIMUNE NF INJ 6GM	M	
CUTAQUIG SOL 1.65GM	5	SP, PA
CUTAQUIG SOL 1GM	5	SP, PA
CUTAQUIG SOL 2GM	5	SP, PA
CUTAQUIG SOL 3.3GM	5	SP, PA
CUTAQUIG SOL 4GM	5	SP, PA
CUTAQUIG SOL 8GM	5	SP, PA
CUVITRU INJ 2GM/10ML	M	
CUVITRU INJ 4GM/20ML	M	
CUVITRU INJ 8GM/40ML	M	
CUVITRU SOL 1GM/5ML	M	
CYTOGAM INJ	6	PV
GAMMAGARD INJ 1GM/10ML	5	SP, PA
GAMMAGARD INJ 2.5GM/25	5	SP, PA
GAMMAGARD INJ 5GM/50ML	5	SP, PA
GAMMAGARD INJ 10GM/100	5	SP, PA
GAMMAGARD INJ 20GM/200	5	SP, PA
GAMMAGARD INJ 30GM/300	5	SP, PA
GAMMAGARD SD INJ 5GM HU	5	SP, PA
GAMMAGARD SD INJ 10GM HU	5	SP, PA
GAMMAKED INJ 1GM/10ML	5	SP, PA
GAMMAKED INJ 5GM/50ML	5	SP, PA
GAMMAKED INJ 10GM/100	5	SP, PA
GAMMAKED INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 1GM/10ML	5	SP, PA
GAMUNEX-C INJ 2.5GM/25	5	SP, PA
GAMUNEX-C INJ 5GM/50ML	5	SP, PA
GAMUNEX-C INJ 10GM/100	5	SP, PA
GAMUNEX-C INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 40/400ML	5	SP, PA
HEPAGAM B INJ	M	
HIZENTRA INJ 1GM/5ML	5	SP, PA
HIZENTRA INJ 1GM/5ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 4GM/20ML	5	SP, PA
HIZENTRA INJ 10/50ML	5	SP, PA
HIZENTRA SOL 20%	5	SP, PA
HYPERHEP B INJ	M	
HYPERRAB INJ 300UNIT	3	PV
HYPERRAB INJ 1500UNIT	3	PV

Drug Name	Drug Tier	Requirements/Limits
HYPERRHO S/D INJ 50MCG	M	
HYPERRHO S/D INJ 300MCG	M	
HYPERTET INJ 250/ML	3	PV
IMOGAM RABIE INJ 300/2ML	3	PV
KEDRAB SOL 150UNITS	3	PV
KEDRAB SOL 300/2ML	3	PV
MICRHOGAM PL INJ 50MCG	M	
NABI-HB INJ	M	
PANZYGA SOL 1GM/10ML	M	
PANZYGA SOL 2.5/25ML	M	
PANZYGA SOL 5GM/50ML	M	
PANZYGA SOL 10/100ML	M	
PANZYGA SOL 20/200ML	M	
PANZYGA SOL 30/300ML	M	
RHOGAM PLUS INJ 300MCG	M	
RHOPHYLAC INJ 1500/2ML	M	
VARIZIG INJ 125/1.2	M	
VARIZIG INJ 125UNIT	M	
WINRHO SDF INJ 1500UNIT	M	
WINRHO SDF INJ 2500UNIT	M	
WINRHO SDF INJ 5000UNIT	M	
WINRHO SDF INJ 15000UNT	M	

MONOCLONAL ANTIBODIES

BEBTELOVIMAB SOL 175/2ML	3	
BEYFORTUS INJ 50/0.5ML	3	ACA, PV
BEYFORTUS INJ 100MG/ML	3	ACA, PV
EVUSHELD SOL	3	
SYNAGIS INJ 50/0.5ML	6	SP, PA; PV
SYNAGIS INJ 50MG	6	SP, PA; PV
SYNAGIS INJ 100MG/ML	6	SP, PA; PV
ZINPLAVA SOL 25MG/ML	NC	SP

PASSIVE IMMUNIZING AGENTS - COMBINATIONS

HYQVIA INJ 2.5-200	NC	SP
HYQVIA INJ 5-400	NC	SP
HYQVIA INJ 10-800	NC	SP
HYQVIA INJ 20-1600	NC	SP
HYQVIA INJ 30-2400	NC	SP

PENICILLINS

AMINOPENICILLINS

<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin cap 500 mg</i>	1	
<i>ampicillin sodium for inj 1 gm</i>	1	
<i>ampicillin sodium for inj 2 gm</i>	2	
<i>ampicillin sodium for inj 125 mg</i>	1	
<i>ampicillin sodium for inj 250 mg</i>	1	
<i>ampicillin sodium for inj 500 mg</i>	1	
<i>ampicillin sodium for iv soln 1 gm</i>	1	
<i>ampicillin sodium for iv soln 2 gm</i>	1	
<i>ampicillin sodium for iv soln 10 gm</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A INJ 600000	3	
BICILLIN L-A INJ 1200000	3	
BICILLIN L-A INJ 2400000	3	
EXTENCILLINE INJ 1200000	3	
EXTENCILLINE INJ 2400000	3	
LENTOCILIN INJ 1200000	3	
PEN G PROC INJ 600000	3	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
<i>penicillin g potassium for inj 5000000 unit</i>	2	
<i>penicillin g potassium for inj 20000000 unit</i>	1	
<i>penicillin g sodium for inj 5000000 unit</i>	1	
<i>penicillin v potassium for soln 125 mg/5ml</i>	1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
<i>pfizerpen inj 5mu</i>	2	
PENICILLIN COMBINATIONS		
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	2	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
AUGMENTIN SUS ES-600	3	
AUGMENTIN TAB 500MG	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	
UNASYN INJ 15GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
NAFCILLIN INJ 2GM/100	3	
<i>nafcillin sodium for inj 1 gm</i>	1	
<i>nafcillin sodium for inj 2 gm</i>	1	
<i>nafcillin sodium for iv soln 1 gm</i>	1	
<i>nafcillin sodium for iv soln 2 gm</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nafcillin sodium for iv soln 10 gm</i>	NC	
OXACILLIN INJ 2GM	3	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	1	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	1	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	1	

PROGESTINS

PROGESTINS

<i>gallifrey tab 5mg</i>	1	
<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	4	SP, PA, QL
MAKENA INJ 250MG/ML	6	SP, PA, QL
MAKENA INJ 275MG	6	SP, PA, QL
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>megestrol acetate susp 625 mg/5ml</i>	2	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	
PROMETRIUM CAP 100MG	NC	
PROMETRIUM CAP 200MG	NC	
PROVERA TAB 2.5MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

AGENTS FOR CHEMICAL DEPENDENCY

<i>acamprosate calcium tab delayed release 333 mg</i>	1	PV
<i>disulfiram tab 250 mg</i>	1	PV
<i>disulfiram tab 500 mg</i>	1	PV
LUCEMYRA TAB 0.18MG	NC	

ANTI-CATAPLECTIC AGENTS

LUMRYZ PAK 6GM	5	SP, PA, QL
LUMRYZ PAK 7.5GM	5	SP, PA, QL
LUMRYZ PAK 9GM	5	SP, PA, QL
LUMRYZ PKG 4.5GM	5	SP, PA, QL
XYREM SOL 500MG/ML	NC	
XYWAV SOL 0.5GM/ML	5	SP, PA, QL

ANTIDEMENTIA AGENTS

ADLARITY DIS 5MG/DAY	NC	

Drug Name	Drug Tier	Requirements/Limits
ADLARITY DIS 10MG/DAY	NC	
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	
ARICEPT TAB 23MG	3	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	
EXELON DIS 13.3/24	3	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	2	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	1	
<i>memantine hcl cap er 24hr 21 mg</i>	2	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	2	
NAMENDA TAB 5-10MG	3	
NAMENDA TAB 5MG	3	
NAMENDA TAB 10MG	3	
NAMZARIC CAP	2	
NAMZARIC CAP 7-10MG	2	
NAMZARIC CAP 14-10MG	2	
NAMZARIC CAP 21-10MG	2	
NAMZARIC CAP 28-10MG	2	
RAZADYNE ER CAP 8MG	3	
RAZADYNE ER CAP 16MG	3	
RAZADYNE ER CAP 24MG	3	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	1	
ZUNVEYL TAB 5MG	NC	
ZUNVEYL TAB 10MG	NC	
ZUNVEYL TAB 15MG	NC	

COMBINATION PSYCHOTHERAPEUTICS

<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
LYBALVI TAB 5-10MG	3	PA; PV
LYBALVI TAB 10-10MG	3	PA; PV
LYBALVI TAB 15-10MG	3	PA; PV
LYBALVI TAB 20-10MG	3	PA; PV
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	2	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	

FIBROMYALGIA AGENTS

SAVELLA MIS TITR PAK	3	
SAVELLA TAB 12.5MG	3	
SAVELLA TAB 25MG	3	
SAVELLA TAB 50MG	3	
SAVELLA TAB 100MG	3	

MOVEMENT DISORDER DRUG THERAPY

AUSTEDO TAB 6MG	5	SP, PA, QL
AUSTEDO TAB 9MG	5	SP, PA, QL
AUSTEDO TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 6MG	5	SP, PA, QL
AUSTEDO XR TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 18MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
AUSTEDO XR TAB 24MG	5	SP, PA, QL
AUSTEDO XR TAB 30MG ER	5	SP, PA, QL
AUSTEDO XR TAB 36MG ER	5	SP, PA, QL
AUSTEDO XR TAB 42MG ER	5	SP, PA, QL
AUSTEDO XR TAB 48MG ER	5	SP, PA, QL
AUSTEDO XR TAB TITR KIT	5	SP, PA, QL
INGREZZA CAP 40-80MG	5	SP, PA, QL
INGREZZA CAP 40MG	5	SP, PA, QL
INGREZZA CAP 60MG	5	SP, PA, QL
INGREZZA CAP 80MG	5	SP, PA, QL
<i>tetrabenazine tab 12.5 mg</i>	4	SP, PA, QL
<i>tetrabenazine tab 25 mg</i>	4	SP, PA, QL
XENAZINE TAB 12.5MG	NC	SP
XENAZINE TAB 25MG	NC	SP

MULTIPLE SCLEROSIS AGENTS

AMPYRA TAB 10MG	6	SP, ST, PA, QL
AUBAGIO TAB 7MG	NC	SP
AUBAGIO TAB 14MG	NC	SP
AVONEX PEN KIT 30MCG	5	SP, PA, QL; PV
AVONEX PREFL KIT 30MCG	5	SP, PA, QL; PV
BETASERON INJ 0.3MG	5	SP, PA, QL; PV
COPAXONE INJ 40MG/ML	5	SP, PA, QL; PV
<i>dalfampridine tab er 12hr 10 mg</i>	4	SP, PA, QL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	1	SP, PA, QL; PV
<i>dimethyl fumarate capsule delayed release 240 mg</i>	1	SP, PA, QL; PV
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	1	SP, PA, QL; PV
EXTAVIA INJ 0.3MG	NC	SP
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	4	SP, PA, QL; PV
GILENYA CAP 0.5MG	NC	SP
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	4	SP, PA, QL; PV
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 20mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 40mg/ml</i>	4	SP, PA, QL; PV
KESIMPTA INJ 20/.4ML	5	SP, PA, QL; PV
LEMTRADA INJ 12/1.2ML	NC	SP
MAVENCLAD PAK 10MG(4)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(5)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(6)	6	SP, PA, QL; PV

Drug Name	Drug Tier	Requirements/Limits
MAVENCLAD PAK 10MG(7)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(8)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(9)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(10)	6	SP, PA, QL; PV
MAYZENT PAK STARTER	5	SP, PA, QL; PV
MAYZENT TAB 0.25MG	5	SP, PA, QL; PV
MAYZENT TAB 1MG	5	SP, PA, QL; PV
MAYZENT TAB 2MG	5	SP, PA, QL; PV
OCREVUS INJ 300/10ML	5	SP, PA, QL; PV
PLEGRIDY INJ	6	SP, PA, QL; PV
PLEGRIDY INJ PEN	6	SP, PA, QL; PV
PLEGRIDY INJ STARTER	6	SP, PA, QL; PV
PLEGRIDY PEN INJ STARTER	6	SP, PA, QL; PV
PONVORY TAB 20MG	6	SP, PA, QL
PONVORY TAB STARTER	6	SP, PA, QL; PV
REBIF INJ 22/0.5	5	SP, PA, QL; PV
REBIF INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 22/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ TITRATN	5	SP, PA, QL; PV
REBIF TITRTN INJ PACK	5	SP, PA, QL; PV
TASCENSO ODT TAB 0.25MG	NC	SP
TECFIDERA CAP 120MG	NC	SP
TECFIDERA CAP 240MG	NC	SP
TECFIDERA CAP STARTER	NC	SP
TYSABRI INJ 300/15ML	5	SP, PA, QL; PV
VUMERITY CAP 231MG	NC	SP
ZEPOSIA 7DAY CAP STR PACK	5	SP, PA, QL; PV; Preferred for Multiple Sclerosis and Ulcerative Colitis
ZEPOSIA CAP 0.92MG	5	SP, PA, QL; PV; Preferred for Multiple Sclerosis and Ulcerative Colitis
ZEPOSIA CAP STR KIT	5	SP, PA, QL; PV; Preferred for Multiple Sclerosis and Ulcerative Colitis
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
<i>gabapentin (once-daily) tab 300 mg</i>	2	
<i>gabapentin (once-daily) tab 600 mg</i>	2	
GRALISE TAB 300MG	2	
GRALISE TAB 450MG	2	
GRALISE TAB 600MG	2	
GRALISE TAB 750MG	2	

Drug Name	Drug Tier	Requirements/Limits
GRALISE TAB 900MG	2	
LYRICA CR TAB 82.5MG	3	
LYRICA CR TAB 165MG	3	
LYRICA CR TAB 330MG	3	
pregabalin tab er 24hr 82.5 mg	1	
pregabalin tab er 24hr 165 mg	2	
pregabalin tab er 24hr 330 mg	1	
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA CAP 20-10MG	2	PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ergoloid mesylates tab 1 mg	1	
pimozide tab 1 mg	1	
pimozide tab 2 mg	1	
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT TAB 300MG ER	2	
HORIZANT TAB 600MG ER	2	
SMOKING DETERRENTS		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	0	ACA, PV
cvs nicotine dis 7mg/24hr	0	OTC; ACA, PV
cvs nicotine dis 14mg/24h	0	OTC; ACA, PV
cvs nicotine dis 21mg/24h	0	OTC; ACA, PV
cvs nicotine gum 2mg cinn	0	OTC; ACA, PV
cvs nicotine gum 2mg mint	0	OTC; ACA, PV
cvs nicotine gum 2mg orig	0	OTC; ACA, PV
cvs nicotine gum 2mgfruit	0	OTC; ACA, PV
cvs nicotine gum 4mg	0	OTC; ACA, PV
cvs nicotine gum 4mg cinn	0	OTC; ACA, PV
cvs nicotine gum 4mg mint	0	OTC; ACA, PV
cvs nicotine gum 4mg orig	0	OTC; ACA, PV
cvs nicotine gum 4mgfruit	0	OTC; ACA, PV
cvs nicotine loz 2mg	0	OTC; ACA, PV
cvs nicotine loz 2mg mint	0	OTC; ACA, PV
cvs nicotine loz 4mg cinn	0	OTC; ACA, PV
cvs nicotine loz 4mg mint	0	OTC; ACA, PV
eq nicotine dis 7mg/24hr	0	OTC; ACA, PV
eq nicotine dis 14mg/24h	0	OTC; ACA, PV
eq nicotine dis 21mg/24h	0	OTC; ACA, PV
eq nicotine gum 2mg cinn	0	OTC; ACA, PV
eq nicotine gum 2mg mint	0	OTC; ACA, PV
eq nicotine gum 2mgfruit	0	OTC; ACA, PV
eq nicotine gum 4mg cinn	0	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>eq nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mgfruit</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>ft nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>ft nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>ft nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ft nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>ft nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>ft nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>ft nicotine loz 4mg</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg cher</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>habitrol dis 21mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>kls quit2 gum 2mg</i>	0	OTC; ACA, PV
<i>kls quit2 loz 2mg</i>	0	OTC; ACA, PV
<i>kls quit4 gum 4mg</i>	0	OTC; ACA, PV
<i>kls quit4 loz 4mg</i>	0	OTC; ACA, PV
<i>nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine dis step 1</i>	0	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>nicotine pol gum 4mg mint</i>	0	OTC; ACA, PV
<i>nicotine pol loz 2mg mini</i>	0	OTC; ACA, PV
<i>nicotine pol loz 4mg chry</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 4 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 4 mg</i>	0	OTC; ACA, PV
<i>nicotine td dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td dis 14mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis 21mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis step 1</i>	0	OTC; ACA, PV
<i>nicotine td dis step 3</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	OTC; ACA, PV
NICOTROL INH	3	ACA, PV
NICOTROL NS SPR 10MG/ML	3	ACA, PV
<i>qc nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>qc nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>sm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg chry</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>thrive gum 2mg mint</i>	0	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 1 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	0	ACA, PV

TRANSTHYRETIN AMYLOIDOSIS AGENTS

ONPATTRO SOL 10MG/5ML	6	SP, PA, QL
WAINUA INJ 45/0.8ML	NC	SP

VASOMOTOR SYMPTOM AGENTS

<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	NC	

RESPIRATORY AGENTS - MISC.

ALPHA-PROTEINASE INHIBITOR (HUMAN)

ARALAST NP INJ 500MG	NC	SP
ARALAST NP INJ 1000MG	NC	SP
GLASSIA INJ	NC	SP
PROLASTIN-C INJ 1000MG	5	SP, PA
ZEMAIRA INJ 1000MG	5	SP, PA
ZEMAIRA INJ 4000MG	5	SP, PA
ZEMAIRA INJ 5000MG	5	SP, PA

CYSTIC FIBROSIS AGENTS

ALYFTREK TAB 4-20-50	NC	SP
BRONCHITOL CAP 40MG	NC	SP
KALYDECO GRA 5.8MG	6	SP, PA, QL
KALYDECO GRA 13.4MG	6	SP, PA, QL
KALYDECO PAK 25MG	6	SP, PA, QL
KALYDECO PAK 50MG	6	SP, PA, QL
KALYDECO PAK 75MG	6	SP, PA, QL
KALYDECO TAB 150MG	6	SP, PA, QL
ORKAMBI GRA 75-94MG	6	SP, PA, QL
ORKAMBI GRA 100-125	6	SP, PA, QL
ORKAMBI GRA 150-188	6	SP, PA, QL
ORKAMBI TAB 100-125	6	SP, PA, QL
ORKAMBI TAB 200-125	6	SP, PA, QL
PULMOZYME SOL 1MG/ML	6	SP, PA, QL
SYMDEKO TAB 50-75MG	6	SP, PA, QL
SYMDEKO TAB 100-150	6	SP, PA, QL
TRIKAFTA PAK 59.5MG	6	SP, PA, QL
TRIKAFTA PAK 75MG	6	SP, PA, QL
TRIKAFTA TAB	6	SP, PA, QL

PLEURAL SCLEROSING AGENTS

SCLEROSOL AER INTRAPLE	3	
STERIL TALC SUS 5GM	3	
STERITALC POW 2GM	3	

Drug Name	Drug Tier	Requirements/Limits
STERITALC POW 3GM	3	
STERITALC POW 4GM	3	
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	NC	SP
ESBRIET TAB 267MG	NC	SP
ESBRIET TAB 801MG	NC	SP
OFEV CAP 100MG	5	SP, PA, QL
OFEV CAP 150MG	5	SP, PA, QL
<i>pirfenidone cap 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 801 mg</i>	4	SP, PA, QL
RESPIRATORY AGENTS - MISC.		
CUROSURF SUS 120/1.5	3	
CUROSURF SUS 240/3ML	3	
INFASURF SUS 35MG/ML	3	
SURVANTA INH	3	
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine tab 500 mg</i>	2	(except NDC 42806075760 which is not covered)
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA INJ 100MG	3	PA
NUZYRA TAB 150MG	3	PA
FLUOROCYCLINES		
XERAVA INJ 50MG	3	
XERAVA INJ 100MG	3	
GLYCYLCYCLINES		
<i>tigecycline for iv soln 50 mg</i>	1	
TIGECYCLINE INJ 50MG	3	
TYGACIL INJ 50MG	NC	
TETRACYCLINES		
ACTICLATE TAB 75MG	NC	
ACTICLATE TAB 150MG	NC	
<i>avidoxy tab 100mg</i>	1	
<i>coremino tab 45mg</i>	NC	
<i>coremino tab 90mg</i>	NC	
<i>coremino tab 135mg</i>	NC	
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
DORYX MPC TAB 120MG	NC	

Drug Name	Drug Tier	Requirements/Limits
DORYX TAB 50MG	NC	
DORYX TAB 80MG	NC	
DORYX TAB 200MG	NC	
<i>doxy 100 inj 100mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate for inj 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 50 mg</i>	NC	
<i>doxycycline hyclate tab 75 mg</i>	NC	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 50 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 75 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 80 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 100 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 200 mg</i>	NC	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	NC	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	NC	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	1	
MINOCIN CAP 50MG	NC	
MINOCIN INJ 100MG	3	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl cap er 24hr 45 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 90 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 135 mg (base equivalent)</i>	NC	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>minocycline hcl tab er 24hr 45 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl tab er 24hr 55 mg</i>	NC	
<i>minocycline hcl tab er 24hr 65 mg</i>	NC	
<i>minocycline hcl tab er 24hr 80 mg</i>	NC	
<i>minocycline hcl tab er 24hr 90 mg</i>	NC	
<i>minocycline hcl tab er 24hr 105 mg</i>	NC	
<i>minocycline hcl tab er 24hr 115 mg</i>	NC	
<i>minocycline hcl tab er 24hr 135 mg</i>	NC	
MINOLIRA TAB 105MG	NC	
MINOLIRA TAB 135MG	NC	
<i>mondoxylene nl cap 75mg</i>	NC	
<i>mondoxylene nl cap 100mg</i>	1	
MORGIDOX KIT 1X50MG	NC	
<i>okebo cap 75mg</i>	NC	
SEYSARA TAB 100MG	NC	
SEYSARA TAB 150MG	NC	
<i>targadox tab 50mg</i>	NC	
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	1	
TETRACYCLINE TAB 250MG	3	
TETRACYCLINE TAB 500MG	3	
VIBRAMYCIN SYP 50MG/5ML	3	
XIMINO CAP 45MG ER	NC	
XIMINO CAP 90MG ER	NC	
XIMINO CAP 135MG ER	NC	

THYROID AGENTS

ANTITHYROID AGENTS

<i>methimazole tab 5 mg</i>	1
<i>methimazole tab 10 mg</i>	1
<i>propylthiouracil tab 50 mg</i>	1

THYROID HORMONES

ADTHYZA TAB 15MG	NC
ADTHYZA TAB 16.25MG	NC
ADTHYZA TAB 30MG	NC
ADTHYZA TAB 32.5MG	NC
ADTHYZA TAB 60MG	NC
ADTHYZA TAB 65MG	NC
ADTHYZA TAB 90MG	NC
ADTHYZA TAB 97.5MG	NC
ADTHYZA TAB 120MG	NC
ADTHYZA TAB 130MG	NC
ARMOUR THYRO TAB 15MG	3
ARMOUR THYRO TAB 30MG	3

Drug Name	Drug Tier	Requirements/Limits
ARMOUR THYRO TAB 60MG	3	
ARMOUR THYRO TAB 90MG	3	
ARMOUR THYRO TAB 120MG	3	
ARMOUR THYRO TAB 180MG	3	
ARMOUR THYRO TAB 240MG	3	
ARMOUR THYRO TAB 300MG	3	
CYTOMEL TAB 5MCG	NC	
CYTOMEL TAB 25MCG	NC	
CYTOMEL TAB 50MCG	NC	
<i>euthyrox tab 25mcg</i>	1	
<i>euthyrox tab 50mcg</i>	1	
<i>euthyrox tab 75mcg</i>	1	
<i>euthyrox tab 88mcg</i>	1	
<i>euthyrox tab 100mcg</i>	1	
<i>euthyrox tab 112mcg</i>	1	
<i>euthyrox tab 125mcg</i>	1	
<i>euthyrox tab 137mcg</i>	1	
<i>euthyrox tab 150mcg</i>	1	
<i>euthyrox tab 175mcg</i>	1	
<i>euthyrox tab 200mcg</i>	1	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	
<i>levo-t tab 88mcg</i>	1	
<i>levo-t tab 100mcg</i>	1	
<i>levo-t tab 112mcg</i>	1	
<i>levo-t tab 125mcg</i>	1	
<i>levo-t tab 137mcg</i>	1	
<i>levo-t tab 150mcg</i>	1	
<i>levo-t tab 175mcg</i>	1	
<i>levo-t tab 200mcg</i>	1	
<i>levo-t tab 300 mcg</i>	1	
LEVOTHYROXIN INJ 100MCG	3	
LEVOTHYROXIN INJ 200MCG	3	
LEVOTHYROXIN INJ 500MCG	3	
<i>levothyroxine sodium cap 13 mcg</i>	NC	
<i>levothyroxine sodium cap 25 mcg</i>	NC	
<i>levothyroxine sodium cap 50 mcg</i>	NC	
<i>levothyroxine sodium cap 75 mcg</i>	NC	
<i>levothyroxine sodium cap 88 mcg</i>	NC	
<i>levothyroxine sodium cap 100 mcg</i>	NC	
<i>levothyroxine sodium cap 112 mcg</i>	NC	
<i>levothyroxine sodium cap 125 mcg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>levothyroxine sodium cap 137 mcg</i>	NC	
<i>levothyroxine sodium cap 150 mcg</i>	NC	
<i>levothyroxine sodium cap 175 mcg</i>	NC	
<i>levothyroxine sodium cap 200 mcg</i>	NC	
<i>levothyroxine sodium for iv inj 100 mcg</i>	1	
<i>levothyroxine sodium for iv inj 200 mcg</i>	1	
<i>levothyroxine sodium for iv inj 500 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</i>	1	
<i>liothyronine sodium iv soln 10 mcg/ml</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
NATURE THROI TAB 162.5MG	NC	
NATURE-THROI TAB 16.25MG	NC	
NATURE-THROI TAB 32.5MG	NC	
NATURE-THROI TAB 48.75MG	NC	
NATURE-THROI TAB 65MG	NC	
NATURE-THROI TAB 81.25MG	NC	
NATURE-THROI TAB 97.5MG	NC	
NATURE-THROI TAB 113.75MG	NC	
NATURE-THROI TAB 130MG	NC	

Drug Name	Drug Tier	Requirements/Limits
NATURE-THROI TAB 146.25MG	NC	
NATURE-THROI TAB 195MG	NC	
NATURE-THROI TAB 260MG	NC	
NATURE-THROI TAB 325MG	NC	
NP THYROID TAB 15MG	3	
NP THYROID TAB 30MG	3	
NP THYROID TAB 60MG	3	
NP THYROID TAB 90MG	3	
NP THYROID TAB 120MG	3	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
SYNTHROID TAB 75MCG	2	
SYNTHROID TAB 88MCG	2	
SYNTHROID TAB 100MCG	2	
SYNTHROID TAB 112MCG	2	
SYNTHROID TAB 125MCG	2	
SYNTHROID TAB 137MCG	2	
SYNTHROID TAB 150MCG	2	
SYNTHROID TAB 175MCG	2	
SYNTHROID TAB 200MCG	2	
SYNTHROID TAB 300MCG	2	
THYQUIDITY SOL 100MCG	NC	
THYROID TAB 15MG	NC	
THYROID TAB 120MG	NC	
TIROSINT CAP 13MCG	NC	
TIROSINT CAP 25MCG	NC	
TIROSINT CAP 50MCG	NC	
TIROSINT CAP 75MCG	NC	
TIROSINT CAP 88MCG	NC	
TIROSINT CAP 100MCG	NC	
TIROSINT CAP 112MCG	NC	
TIROSINT CAP 125MCG	NC	
TIROSINT CAP 137MCG	NC	
TIROSINT CAP 150MCG	NC	
TIROSINT CAP 175MCG	NC	
TIROSINT CAP 200MCG	NC	
TRIOSTAT INJ 10MCG/ML	3	
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 137mcg</i>	1	
<i>unithroid tab 150mcg</i>	1	
<i>unithroid tab 175mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	
WESTHROID TAB 32.5MG	NC	
WESTHROID TAB 65MG	NC	
WESTHROID TAB 97.5MG	NC	
WESTHROID TAB 130MG	NC	
WESTHROID TAB 195MG	NC	
WP THYROID TAB 16.25MG	NC	
WP THYROID TAB 32.5MG	NC	
WP THYROID TAB 48.75MG	NC	
WP THYROID TAB 65MG	NC	
WP THYROID TAB 81.25MG	NC	
WP THYROID TAB 97.5MG	NC	
WP THYROID TAB 113.75MG	NC	
WP THYROID TAB 130MG	NC	

TOXOIDS

TOXOID COMBINATIONS

ADACEL INJ	3	ACA, PV
BOOSTRIX INJ	3	ACA, PV
DAPTACEL INJ	0	ACA, PV
DIP/TET PED INJ 25-5LFU	3	ACA, PV
INFANRIX INJ	0	ACA, PV
KINRIX INJ	0	ACA, PV
PEDIARIX INJ 0.5ML	0	ACA, PV
PENTACEL INJ	0	ACA, PV
QUADRACEL INJ	0	ACA, PV
QUADRACEL INJ 0.5ML	0	ACA, PV
TDVAX INJ 2-2 LF	3	ACA, PV
TENIVAC INJ 5-2LF	3	ACA, PV
TET/DIP TOX INJ 2-2 LF	3	ACA, PV
VAXELIS INJ	0	ACA, PV

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTISPASMODICS

ANASPAZ TAB 0.125MG	3	
ATROPINE SUL INJ 0.1MG/ML	3	
ATROPINE SUL INJ 0.05MG/1	3	
ATROPINE SUL INJ 1/2.5ML	NC	
ATROPINE SUL INJ 8MG/20ML	3	

Drug Name	Drug Tier	Requirements/Limits
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	1	
<i>atropine sulfate iv soln 0.4 mg/ml</i>	1	
<i>atropine sulfate iv soln 1 mg/ml</i>	1	
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	1	
BELLA/OPIUM SUP 16.2-30	3	
BELLA/OPIUM SUP 16.2-60	3	
BENTYL INJ 10MG/ML	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	2	
CUVPOSA SOL 1MG/5ML	3	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl inj 10 mg/ml</i>	2	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
<i>ed-spaz tab 0.125mg</i>	1	
GLYCOPYRROLA INJ 0.6/3ML	NC	
GLYCOPYRROLA INJ 1MG/5ML	NC	
GLYCOPYRROLA TAB 1.5MG	NC	
<i>glycopyrrolate inj 0.2 mg/ml</i>	1	
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate oral soln 1 mg/5ml</i>	1	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	NC	
<i>hyosyne dro 0.125/ml</i>	1	
<i>hyosyne elx 0.125/5</i>	1	
LEVBIID TAB 0.375 ER	3	
LEVSIN TAB 0.125MG	3	
LEVSIN/SL SUB 0.125MG	3	
LIBRAX CAP 5-2.5MG	NC	
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sr tab 0.375mg</i>	NC	
<i>oscimin sub 0.125mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>oscimin tab 0.125mg</i>	1	
ROBINUL FORT TAB 2MG	NC	
ROBINUL TAB 1MG	NC	
<i>symax-sr tab 0.375mg</i>	NC	
H-2 ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	1	
<i>famotidine inj 40 mg/4ml</i>	1	
<i>famotidine inj 200 mg/20ml</i>	1	
<i>famotidine preservative free inj 20 mg/2ml</i>	1	
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	
MISC. ANTI-ULCER		
CARAFATE SUS 1GM/10ML	NC	
SUCRALFATE SUS 1GM/10ML	NC	
<i>sucralfate susp 1 gm/10ml</i>	NC	
<i>sucralfate tab 1 gm</i>	1	
<i>sucralfate tab 1 gm</i>	NC	(applies to NDCs 62135043601 and 62135043690)
PROTON PUMP INHIBITORS		
ACIPHEX SPR CAP 5MG	NC	
ACIPHEX SPR CAP 10MG	NC	
ACIPHEX TAB 20MG	NC	
DEXILANT CAP 30MG DR	NC	
DEXILANT CAP 60MG DR	NC	
<i>dexlansoprazole cap delayed release 30 mg</i>	NC	
<i>dexlansoprazole cap delayed release 60 mg</i>	NC	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	2	
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	1	
<i>lansoprazole cap delayed release 15 mg</i>	1	
<i>lansoprazole cap delayed release 30 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	NC	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	NC	
NEXIUM CAP 20MG	NC	
NEXIUM CAP 40MG	NC	
NEXIUM GRA 2.5MG DR	NC	
NEXIUM GRA 5MG DR	NC	
NEXIUM GRA 10MG DR	NC	
NEXIUM GRA 20MG DR	NC	
NEXIUM GRA 40MG DR	NC	
NEXIUM I.V. INJ 40MG	3	
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
<i>pantoprazole sodium for delayed release susp packet 40 mg</i>	NC	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	1	
PREVACID CAP 15MG DR	NC	
PREVACID CAP 30MG DR	NC	
PREVACID TAB 15MG STB	NC	
PREVACID TAB 30MG STB	NC	
PRILOSEC POW 2.5MG	NC	
PRILOSEC POW 10MG	NC	
PROTONIX INJ 40MG	3	
PROTONIX PAK 40MG	NC	
PROTONIX TAB 20MG	NC	
PROTONIX TAB 40MG	NC	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
VOQUEZNA TAB 10MG	NC	
VOQUEZNA TAB 20MG	NC	

Drug Name	Drug Tier	Requirements/Limits
ULCER DRUGS - PROSTAGLANDINS		
CYTOTEC TAB 100MCG	3	
CYTOTEC TAB 200MCG	3	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
ULCER THERAPY COMBINATIONS		
<i>amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg</i>	2	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	
KONVOMEK SUS 2-84/ML	NC	
OMECLAMOX- MIS PAK	3	
<i>omeppi cap 40-1100</i>	NC	
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	NC	
PYLERA CAP	3	
TALICIA CAP	2	
VOQUEZNA PAK DUAL PAK	3	
VOQUEZNA PAK TRIP PK	3	
ZEGERID CAP 20-1100	NC	
ZEGERID CAP 40-1100	NC	
ZEGERID POW 20-1680	NC	
ZEGERID POW 40-1680	NC	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
DETROL LA CAP 2MG	NC	
DETROL LA CAP 4MG	NC	
DETROL TAB 1MG	3	
DETROL TAB 2MG	3	
DITROPAN XL TAB 5MG	3	
DITROPAN XL TAB 10MG	3	
ENABLEX TAB 7.5MG	NC	
ENABLEX TAB 15MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	1	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	1	
GELNIQUE GEL 10%	3	ST
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
OXYTROL DIS 3.9MG/24	NC	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	NC	
TOVIAZ TAB 8MG	NC	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
VESICARE LS SUS 5MG/5ML	3	
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	

URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS

GEMTESA TAB 75MG	2	ST
<i>mirabegron tab er 24 hr 25 mg</i>	2	
<i>mirabegron tab er 24 hr 50 mg</i>	2	
MYRBETRIQ SUS 8MG/ML	NC	
MYRBETRIQ TAB 25MG	NC	
MYRBETRIQ TAB 50MG	NC	

URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS

<i>bethanechol chloride tab 5 mg</i>	1	
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	

URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS

<i>flavoxate hcl tab 100 mg</i>	1	

VACCINES

BACTERIAL VACCINES

ACTHIB INJ	0	ACA, PV
BCG VACCINE INJ 50MG	3	PV
BEXSERO INJ	0	ACA, PV
BIOTHRAX INJ	3	PV
CAPVAXIVE INJ 0.5ML	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
HIBERIX SOL 10MCG	0	ACA, PV
MENQUADFI INJ	0	ACA, PV
MENVEO INJ	0	ACA, PV
PEDVAX HIB INJ	0	ACA, PV
PENBRAYA INJ	0	ACA, PV
PREVNAR 20 INJ	0	ACA, PV
TRUMENBA INJ	0	ACA, PV
TYPHIM VI INJ	3	PV
VAXCHORA SUS	3	PV
VAXNEUVANCE INJ	0	ACA, PV
VIVOTIF CAP EC	3	PV

VIRAL VACCINES

ABRYSVO INJ	0	ACA, PV
ABRYSVO INJ 120MCG	0	ACA, PV
AFLURIA INJ 2024-25	0	ACA, PV
AFLURIA QUAD INJ 2022-23	0	ACA, PV
AREXVY INJ 120MCG	0	ACA, PV
AUDENZ INJ	0	ACA, PV
COMIRNATY INJ 30/0.3ML	0	ACA, PV
COMIRNATY INJ 2024-25	0	ACA, PV
DENG VAXIA SUS	0	ACA, PV
ENGRIX-B INJ 10/0.5ML	0	ACA, PV
ENGRIX-B INJ 20MCG/ML	0	ACA, PV
ERVEBO INJ	3	PV
FLUAD INJ 2024-25	0	ACA, PV
FLUAD QUADRI INJ 2022-23	0	ACA, PV
FLUARIX INJ 2024-25	0	ACA, PV
FLUARIX QUAD INJ 2022-23	0	ACA, PV
FLUBLOK INJ 2024-25	0	ACA, PV
FLUBLOK QUAD INJ 2022-23	0	ACA, PV
FLUCELVAX INJ 2024-25	0	ACA, PV
FLUCLVX QUAD INJ 2022-23	0	ACA, PV
FLULAVAL INJ 2024-25	0	ACA, PV
FLULAVAL QUA INJ 2022-23	0	ACA, PV
FLUMIST NASA LIQ 2024-25	0	ACA, PV
FLUMIST QUAD SUS 2022-23	0	ACA, PV
FLUZONE HD INJ 2024-25	0	ACA, PV
FLUZONE INJ 2024-25	0	ACA, PV
GARDASIL 9 INJ	0	ACA, PV
HAVRIX INJ 720UNIT	0	ACA, PV
HAVRIX INJ 1440UNIT	0	ACA, PV
HEPLISAV-B INJ 20/0.5ML	0	ACA, PV
IMOVAX RABIE INJ 2.5/ML	3	PV

Drug Name	Drug Tier	Requirements/Limits
IPOLE INJ INACTIVE	0	ACA, PV
IXCHIQ INJ	3	PV
IXIARO INJ	3	PV
JYNNEOS INJ	0	ACA, PV
M-M-R II INJ	0	ACA, PV
MODERNA INJ 2024-25	0	ACA, PV
MODERNA VAC INJ 50/0.5ML	0	ACA, PV
MODERNA VAC INJ COVID-19	0	ACA, PV
MODERNA VACC INJ 6M-5Y	0	ACA, PV
MRESVIA INJ 50MCG	0	PA; ACA, PV
NOVAVAX INJ 2024-25	0	ACA, PV
NOVAVAX VAC INJ COVID-19	0	ACA, PV
PFIZER 5-11Y INJ 2024-25	0	ACA, PV
PFIZER 6M-4Y INJ 2024-25	0	ACA, PV
PFIZER VACC INJ 5-11Y	0	ACA, PV
PFIZER VACC INJ 6M-4Y	0	ACA, PV
PFIZER VACC INJ ADLT RTU	0	ACA, PV
PFIZER VACC INJ COVID-19	0	ACA, PV
PREHEVBRIO SUS 10MCG/ML	0	ACA, PV
PRIORIX INJ	0	ACA, PV
PROQUAD INJ	0	ACA, PV
RABAVERT INJ	3	PV
RECOMBIVA HB INJ 5MCG/0.5	0	ACA, PV
RECOMBIVA HB INJ 10MCG/ML	0	ACA, PV
RECOMBIVA-HB INJ 40MCG/ML	0	ACA, PV
ROTATEQ SOL	0	ACA, PV
SHINGRIX INJ 50/0.5ML	0	ACA, PV
SPIKEVAX INJ 2024-25	0	ACA, PV
SPIKEVAX INJ COVID-19	0	ACA, PV
STAMARIL INJ	3	PV
TICOVAC INJ	3	PV
TWINRIX INJ	0	ACA, PV
VAQTA INJ 25/0.5ML	0	ACA, PV
VAQTA INJ 50UNT/ML	0	ACA, PV
VARIVAX INJ	0	ACA, PV
YF-VAX INJ	3	PV

VAGINAL AND RELATED PRODUCTS

MISCELLANEOUS VAGINAL PRODUCTS

INTRAROSA SUP 6.5MG	NC

SPERMICIDES

ENCARE SUP 100MG	0	OTC; ACA
GYNOL II GEL 3%	0	OTC; ACA

Drug Name	Drug Tier	Requirements/Limits
SHUR-SEAL GEL 2%	0	OTC; ACA
TODAY SPONGE MIS	0	OTC; ACA
VCF VAGINAL GEL CONTRACE	0	OTC; ACA
VCF VAGINAL MIS CONTRACP	0	OTC; ACA

VAGINAL ANTI-INFECTIVES

CLEOCIN CRE 2% VAG	3	
CLEOCIN SUP 100MG	3	
<i>clindamycin phosphate vaginal cream 2%</i>	1	
CLINDESSE CRE 2%	3	
GYNAZOLE-1 CRE 2%	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole 3 sup 200mg</i>	2	
NUVESSA GEL 1.3%	NC	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	2	
XACIATO GEL 2%	3	

VAGINAL CONTRACEPTIVE - PH MODULATORS

PHEXXI GEL	0	ACA

VAGINAL ESTROGENS

ESTRACE VAG CRE 0.01%	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estradiol vaginal tab 10 mcg</i>	NC	
ESTRING MIS 2MG	NC	
FEMRING MIS 0.1MG/24	NC	
FEMRING MIS 0.05/24H	NC	
IMVEXXY MAIN SUP 4MCG	2	
IMVEXXY MAIN SUP 10MCG	2	
IMVEXXY STRT SUP 4MCG	2	
IMVEXXY STRT SUP 10MCG	2	
PREMARIN VAG CRE 0.625MG	NC	
VAGIFEM TAB 10MCG	1	
<i>yuvaferm tab 10mcg</i>	NC	

VAGINAL PROGESTINS

CRINONE GEL 4% VAG	2	PA
CRINONE GEL 8% VAG	2	PA
ENDOMETRIN SUP 100MG	2	PA

VASOPRESSORS

ANAPHYLAXIS THERAPY AGENTS

ADRENALIN INJ 1MG/ML	NC	
ADRENALIN INJ 30/30ML	NC	
AUVI-Q INJ 0.1MG	2	

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	2	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	2	(NDCs 00093-xxxx-xx and 49502-xxxx-xx are not covered)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	2	(NDCs 00093-xxxx-xx and 49502-xxxx-xx are not covered)
EPIPEN 2-PAK INJ 0.3MG	NC	
EPIPEN-JR INJ 0.15MG	NC	
SYMJEPI INJ 0.3MG	NC	
SYMJEPI INJ 0.15MG	NC	

NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

<i>droxidopa cap 100 mg</i>	4	SP, PA, QL
<i>droxidopa cap 200 mg</i>	4	SP, PA, QL
<i>droxidopa cap 300 mg</i>	4	SP, PA, QL
NORTHERA CAP 100MG	NC	SP
NORTHERA CAP 200MG	NC	SP
NORTHERA CAP 300MG	NC	SP

VASOPRESSORS

AKOVAZ SOL 50MG/ML	NC	
EPHEDRI/NACL SOL 15MG/3ML	3	PA
EPHEDRINE SU INJ 50MG/ML	3	
<i>ephedrine sulfate iv soln 50 mg/ml</i>	1	
EPINEPH/NACL SOL 2/250ML	NC	
EPINEPHR/D5W INJ 100/10ML	3	
EPINEPHR/D5W SOL 2/250-5%	NC	
EPINEPHRINE INJ 0.1MG/10	3	
EPINEPHRINE INJ 0.1MG/ML	3	
EPINEPHRINE INJ 0.2MG	3	
EPINEPHRINE INJ 1MG/10ML	3	
EPINEPHRINE INJ 1MG/ML	3	
EPINEPHRINE INJ 5MG/5ML	3	
EPINEPHRINE SOL 30/30ML	3	
GIAPREZA INJ 2.5MG	NC	
IMMPHENTIV INJ	NC	
LEVOPHED INJ 1MG/ML	3	
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	
NOREPIN/D5W INJ 16/250ML	3	
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	1	
PHENYL/NACL INJ 80/250ML	3	

Drug Name	Drug Tier	Requirements/Limits
PHENYLEP HCL INJ 0.8/10ML	3	
PHENYLEP HCL INJ 1MG/10ML	3	
PHENYLEPHRIN INJ 0.4/10ML	3	
PHENYLEPHRIN INJ 0.8MG/10	3	
PHENYLEPHRIN INJ 1MG/10ML	3	
PHENYLEPHRIN INJ 10MG/ML	3	
<i>phenylephrine hcl iv soln 10 mg/ml</i>	1	
REZIPRES INJ	3	
REZIPRES SOL	NC	
VAZCULEP INJ 10MG/ML	3	

VITAMINS

OIL SOLUBLE VITAMINS

AQUASOL A INJ 50000/ML	3	
DRISDOL CAP 50000UNT	3	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
MEPHYTON TAB 5MG	3	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	
<i>phytonadione inj 10 mg/ml</i>	2	
<i>phytonadione tab 5 mg</i>	2	
WHEAT GERM OIL	3	

WATER SOLUBLE VITAMINS

<i>pyridoxine hcl inj 100 mg/ml</i>	1	
PYRIDOXINE INJ 100MG/ML	3	
<i>thiamine hcl inj 100 mg/ml</i>	1	

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<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	130
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<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	130
ABELCET INJ 5MG/ML	85
ABILIFY ASIM INJ 720MG	129
ABILIFY ASIM INJ 960MG	129
ABILIFY MAIN INJ 300MG	129
ABILIFY MAIN INJ 400MG	129
ABILIFY MYCI TAB 10MG MNT	129
ABILIFY MYCI TAB 10MG STR	129
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ABRILADA INJ 20/0.4ML	20
ABRILADA INJ 40/0.8ML	20
ABRYSVO INJ	288
ABRYSVO INJ 120MCG	288
ABSORICA CAP 10MG	160
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ACCU-CHEK TES AVIVA PL	179
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ACCUPRIL TAB 40MG	92
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ACCURETIC TAB 20-25MG	95
<i>accutane cap 10mg</i>	161
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<i>accutane cap 30mg</i>	161
<i>accutane cap 40mg</i>	161
ACCUTREND TES GLUCOSE	179
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<i>acebutolol hcl cap 200 mg</i>	136
<i>acebutolol hcl cap 400 mg</i>	136
ACETADOTE INJ 200MG/ML	83
<i>acetaminophen iv soln 10 mg/ml</i>	31
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	39
<i>acetaminophen w/ codeine tab 300-15 mg</i>	39
<i>acetaminophen w/ codeine tab 300-30 mg</i>	39
<i>acetaminophen w/ codeine tab 300-60 mg</i>	39

<i>acetaminophen-caffeine-dihydrocodeine</i>		
cap 320.5-30-16 mg	39	
acetazolamide cap er 12hr 500 mg	184	
acetazolamide sodium for inj 500 mg	184	
acetazolamide tab 125 mg	184	
acetazolamide tab 250 mg	184	
acetic acid irrigation soln 0.25%	203	
acetic acid otic soln 2%	262	
acetylcysteine inhal soln 10%	160	
acetylcysteine inhal soln 20%	160	
acetylcysteine inj 200 mg/ml	83	
ACIPHEX SPR CAP 10MG	284	
ACIPHEX SPR CAP 5MG	284	
ACIPHEX TAB 20MG	284	
acitretin cap 10 mg	166	
acitretin cap 17.5 mg	166	
acitretin cap 25 mg	166	
ACTCT FLEX 3 PAD 4	177	
ACTEMRA INJ 162/0.9	26	
ACTEMRA INJ 200/10ML	26	
ACTEMRA INJ 400/20ML	26	
ACTEMRA INJ 80MG/4ML	26	
ACTHAR INJ 80UNIT	187	
ACTHAR INJ GEL	187	
ACTHIB INJ	288	
ACTI ANTIMIC PAD 4	177	
ACTICLATE TAB 150MG	276	
ACTICLATE TAB 75MG	276	
ACTICOAT 7 PAD 4	177	
ACTICOAT MIS 4	177	
ACTIGALL CAP 300MG	198	
ACTI-LANCE MIS 28G	224	
ACTI-LANCE MIS LITE 28G	224	
ACTI-LANCE MIS SPEC 17G	224	
ACTI-LANCE MIS UNIV 23G	224	
ACTIMMUNE INJ 2MU/0.5	117	
ACTIQ LOZ 1200MCG	32	
ACTIQ LOZ 1600MCG	32	
ACTIQ LOZ 200MCG	32	
ACTIQ LOZ 400MCG	32	
ACTIQ LOZ 600MCG	32	
ACTIQ LOZ 800MCG	32	
ACTIVASE INJ 100MG	211	
ACTIVASE INJ 50MG	211	
ACTIVE FE TAB 75-1.25	214	
ACTIVELLA TAB 1-0.5MG	194	
ACTONEL TAB 150MG	186	
ACTONEL TAB 35MG	186	
ACTOPLUS MET TAB 15-500MG	74	
ACTOPLUS MET TAB 15-850MG	74	
ACTOS TAB 15MG	80	
ACTOS TAB 30MG	80	
ACTOS TAB 45MG	80	
ACUICYN SOL	175	
ACULAR LS SOL 0.4%	260	
ACULAR SOL 0.5% OP	260	
ACURA TES BLD GLUC	179	
ACUVAIL SOL 0.45%	260	
acyclovir cap 200 mg	135	
acyclovir cream 5%	169	
acyclovir oint 5%	169	
acyclovir sodium iv soln 50 mg/ml	135	
acyclovir susp 200 mg/5ml	135	
acyclovir tab 400 mg	135	
acyclovir tab 800 mg	135	
ACZONE GEL 5%	161	
ACZONE GEL 7.5%	161	
ADACEL INJ	282	
ADAKVEO INJ 100/10ML	211	
ADALIMU-AATY KIT 20/0.2ML	20	
ADALIMU-AATY KIT 40/0.4ML	21	
ADALIMU-ADAZ INJ 40/0.4ML	21	
ADALIMU-FKJP KIT 20/0.4ML	21	
ADAPAL/BEN P PAD 0.1-2.5%	161	
adapalene cream 0.1%	161	
adapalene gel 0.1%	161	
adapalene gel 0.3%	161	
adapalene pads 0.1%	161	
ADAPALENE SOL 0.1%	161	
adapalene-benzoyl peroxide gel 0.1-2.5%	161	
adapalene-benzoyl peroxide gel 0.3-2.5%	161	
ADASUVE INH 10MG	126	
ADBRY INJ 150MG/ML	173	
ADBRY INJ 300/2ML	173	
ADCETRIS INJ 50MG	106	
ADCIRCA TAB 20MG	146	

AFINITOR DIS TAB 2MG	111	<i>ak-poly-bac oin op</i>	257
AFINITOR DIS TAB 3MG	111	AKTEN GEL 3.5%	258
AFINITOR DIS TAB 5MG	111	AKYNZEO CAP 300-0.5	84
AFINITOR TAB 10MG	111	AKYNZEO INJ	84
AFINITOR TAB 2.5MG	111	AKYNZEO INJ 235-0.25	84
AFINITOR TAB 5MG	111	<i>ala scalp lot 2%</i>	169
AFINITOR TAB 7.5MG	111	<i>ala-cort cre 1%</i>	169
<i>afirmelle tab 0.1-0.02</i>	149	<i>ala-cort cre 2.5%</i>	169
AFLURIA INJ 2024-25	288	ALADERM PLUS EMU	175
AFLURIA QUAD INJ 2022-23	288	<i>albendazole tab 200 mg</i>	43
AFREZZA POW 4-8 UNIT	78	<i>albuterol sulfate inhal aero 108 mcg/act</i> <i>(90mcg base equiv)</i>	55
AFREZZA POW 4-8-12	78	<i>albuterol sulfate soln nebu 0.083% (2.5</i> <i>mg/3ml)</i>	55
AFSTYLA KIT 1000UNIT	205	<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	55
AFSTYLA KIT 1500UNIT	205	<i>albuterol sulfate soln nebu 0.63 mg/3ml</i> <i>(base equiv)</i>	55
AFSTYLA KIT 2000UNIT	205	<i>albuterol sulfate soln nebu 1.25 mg/3ml</i> <i>(base equiv)</i>	55
AFSTYLA KIT 2500UNIT	205	<i>albuterol sulfate syrup 2 mg/5ml</i>	55
AFSTYLA KIT 250UNIT	205	<i>albuterol sulfate tab 2 mg</i>	55
AFSTYLA KIT 3000UNIT	205	<i>albuterol sulfate tab 4 mg</i>	55
AFSTYLA KIT 500UNIT	205	ALCAINE SOL 0.5% OP	258
<i>aftera tab 1.5mg</i>	155	<i>alclometasone dipropionate cream 0.05%</i>	169
<i>afterpill tab 1.5mg</i>	155	<i>alclometasone dipropionate oint 0.05%</i>	169
AGAMATRIX MIS 33G	224	ALDACTAZIDE TAB 25/25	184
AGAMATRIX TES AMP	179	ALDACTAZIDE TAB 50/50	184
AGAMATRIX TES JAZZ	179	ALDACTONE TAB 100MG	186
AGAMATRIX TES KEYNOTE	179	ALDACTONE TAB 25MG	185
AGAMATRIX TES PRESTO	179	ALDACTONE TAB 50MG	185
AGAMREE SUS 40MG/ML	156	ALDURAZYME INJ 2.9MG/5M	190
AGGRASTAT INJ 12.5/250	210	ALECENSA CAP 150MG	112
AGGRASTAT INJ 3.75/15	210	<i>alendronate sodium oral soln 70 mg/75ml</i>	186
AGGRASTAT INJ 5/100ML	210	<i>alendronate sodium tab 10 mg</i>	186
AGRYLIN CAP 0.5MG	210	<i>alendronate sodium tab 35 mg</i>	186
AIMOVIG INJ 140MG/ML	232	<i>alendronate sodium tab 5 mg</i>	186
AIMOVIG INJ 70MG/ML	232	<i>alendronate sodium tab 70 mg</i>	186
AIMSCO MIS LUBRICAT	222	ALEVAMAX CRE	175
AIRDUO RESPI INH 113-14	55	ALEVICYN SG GEL ANTIPRUR	175
AIRDUO RESPI INH 232-14	55	ALEVICYN SOL DERMAL	177
AIRDUO RESPI INH 55-14	55	ALFENTANIL INJ 1000/2ML	32
AIRSUPRA AER 90-80MCG	55		
AJOVY INJ 225/1.5	232		
<i>ak-fluor inj 10% op</i>	260		
AK-FLUOR INJ 25% OP	260		
AKLIEF CRE 0.005%	161		
AKOVAZ SOL 50MG/ML	291		

ALFENTANIL INJ 2500/5ML	32
<i>alfuzosin hcl tab er 24hr 10 mg</i>	203
ALHEMO INJ 150/1.5	205
ALHEMO INJ 300/3ML	205
ALHEMO INJ 60/1.5ML	205
ALIMTA INJ 100MG.....	103
ALIMTA INJ 500MG.....	103
ALIQOPA INJ 60MG.....	112
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	99
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	99
ALKERAN TAB 2MG.....	101
ALLEVYN AG MIS 6-3/4	177
ALLEVYN AG MIS 9	177
ALLEVYN AG PAD 3	177
ALLEVYN AG PAD 4	177
ALLEVYN AG PAD 5	177
ALLEVYN AG PAD 7	177
ALLEVYN GENT PAD 4	177
ALLEVYN GENT PAD 8	177
<i>allopurinol sodium for inj 500 mg</i>	204
<i>allopurinol tab 100 mg</i>	204
<i>allopurinol tab 300 mg</i>	204
ALLZITAL TAB 25-325MG.....	30
<i>almotriptan malate tab 12.5 mg</i>	233
<i>almotriptan malate tab 6.25 mg</i>	233
ALOCRI SOL 2%	260
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	77
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	77
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	77
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	74
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	74
<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	74
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	74
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	74
<i>alogliptin-pioglitazone tab 25-15 mg</i>	74
<i>alogliptin-pioglitazone tab 25-30 mg</i>	74
<i>alogliptin-pioglitazone tab 25-45 mg</i>	74
ALOMIDE SOL 0.1% OP	260

ALOPRIM INJ 500MG	204
ALORA DIS 0.025MG	195
ALORA DIS 0.075MG	195
ALORA DIS 0.1MG.....	195
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	200
<i>alosetron hcl tab 1 mg (base equiv)</i>	200
ALPHAGAN P SOL 0.1%	256
ALPHAGAN P SOL 0.15%	256
ALPHA-LIPOIC SOL ACID	20
ALPHANINE SD INJ 1000UNIT	205
ALPHANINE SD INJ 1500UNIT	205
ALPHANINE SD INJ 500UNIT	205
ALPRAZOLAM CON 1 MG/ML	50
<i>alprazolam orally disintegrating tab 0.25 mg</i>	50
<i>alprazolam orally disintegrating tab 0.5 mg</i>	50
<i>alprazolam orally disintegrating tab 1 mg</i>	50
<i>alprazolam orally disintegrating tab 2 mg</i>	50
<i>alprazolam tab 0.25 mg</i>	50
<i>alprazolam tab 0.5 mg</i>	50
<i>alprazolam tab 0.5mg xr</i>	50
<i>alprazolam tab 1 mg</i>	50
<i>alprazolam tab 1mg xr</i>	50
<i>alprazolam tab 2 mg</i>	50
<i>alprazolam tab 2mg xr</i>	50
<i>alprazolam tab 3mg xr</i>	50
<i>alprazolam tab er 24hr 0.5 mg</i>	50
<i>alprazolam tab er 24hr 1 mg</i>	50
<i>alprazolam tab er 24hr 2 mg</i>	50
<i>alprazolam tab er 24hr 3 mg</i>	50
ALPROLIX INJ 1000UNIT	205
ALPROLIX INJ 2000UNIT	205
ALPROLIX INJ 250UNIT	205
ALPROLIX INJ 3000UNIT	205
ALPROLIX INJ 4000UNIT	205
ALPROLIX INJ 500UNIT	205
<i>alprostadi inj 500 mcg/ml</i>	243
ALREX SUS 0.2%	258
ALTABAX OIN 1%	164
<i>altacaine sol 0.5% op</i>	258
ALTACE CAP 1.25MG	92
ALTACE CAP 10MG	92
ALTACE CAP 2.5MG	92

ALTACE CAP 5MG	92	AMBIEN TAB 5MG	216
altafluor-be sol 0.25-0.4	260	AMBISOME INJ 50MG	85
altafrin sol 10% op	256	ambrisentan tab 10 mg	146
altafrin sol 2.5% op.....	256	ambrisentan tab 5 mg	146
altavera tab.....	149	amcinonide cream 0.1%	169
ALTOPREV TAB 20MG ER.....	90	AMELUZ GEL 10%.....	165
ALTOPREV TAB 40MG ER.....	90	amethia tab.....	149
ALTOPREV TAB 60MG ER.....	90	amethyst tab 90-20mcg	149
ALTRENO LOT 0.05%.....	161	AMIDATE INJ 2MG/ML.....	202
ALTUVIIIIO INJ 1000UNIT	206	amikacin sulfate inj 1 gm/4ml (250 mg/ml)	
ALTUVIIIIO INJ 2000UNIT	206	.....	20
ALTUVIIIIO INJ 250 UNIT	205	amikacin sulfate inj 500 mg/2ml (250	
ALTUVIIIIO INJ 3000UNIT	206	mg/ml).....	20
ALTUVIIIIO INJ 4000UNIT.....	206	amiloride & hydrochlorothiazide tab 5-50	
ALTUVIIIIO INJ 500UNIT	205	mg	184
ALUNBRIG PAK.....	112	amiloride hcl tab 5 mg.....	186
ALUNBRIG TAB 180MG	112	AMINO ACID INJ 5%.....	254
ALUNBRIG TAB 30MG	112	AMINO/DEXTRO SOL CAL/HEPA.....	254
ALUNBRIG TAB 90MG.....	112	aminoam cap rms	254
ALVAIZ TAB 18MG.....	212	aminocaproic acid inj 250 mg/ml.....	214
ALVAIZ TAB 36MG	212	aminocaproic acid oral soln 0.25 gm/ml	214
ALVAIZ TAB 54MG	212	aminocaproic acid tab 1000 mg	215
ALVAIZ TAB 9MG	212	aminocaproic acid tab 500 mg	215
ALVESCO AER 160MCG	54	aminophylline inj 25 mg/ml	57
ALVESCO AER 80MCG.....	54	aminorelief cap rms.....	254
alvimopan cap 12 mg	201	aminosyn ii sol 15%	254
alyacen tab 1/35.....	149	AMINOSYN INJ 10%	254
alyacen tab 7/7/7	149	AMINOSYN-PF INJ 10%	254
ALYFTREK TAB 4-20-50	275	AMINOSYN-PF INJ 7%	254
ALYGLO INJ 10/100ML.....	263	amiodarone hcl inj 150 mg/3ml (50 mg/ml)	
ALYGLO INJ 20/200ML	263	.....	52
ALYGLO INJ 5GM/50ML.....	263	amiodarone hcl inj 450 mg/9ml (50 mg/ml)	
ALYMSYS SOL 100/4ML	105	.....	52
ALYMSYS SOL 400/16ML.....	105	amiodarone hcl inj 900 mg/18ml (50	
alyq tab 20mg	146	mg/ml).....	52
amantadine hcl cap 100 mg	120	amiodarone hcl tab 100 mg.....	52
amantadine hcl soln 50 mg/5ml.....	120	amiodarone hcl tab 200 mg	52
amantadine hcl tab 100 mg	120	amiodarone hcl tab 400 mg	52
AMARYL TAB 1MG	81	AMITIZA CAP 24MCG	198
AMARYL TAB 2MG.....	81	AMITIZA CAP 8MCG	198
AMARYL TAB 4MG.....	81	amitriptyline hcl tab 10 mg	73
AMBIEN CR TAB 12.5MG.....	216	amitriptyline hcl tab 100 mg	73
AMBIEN CR TAB 6.25MG	216	amitriptyline hcl tab 150 mg	73
AMBIEN TAB 10MG	216	amitriptyline hcl tab 25 mg	73

<i>amitriptyline hcl tab 50 mg</i>	73
<i>amitriptyline hcl tab 75 mg</i>	73
<i>AMJEVITA INJ 10/0.2ML</i>	21
<i>AMJEVITA INJ 20/0.2ML</i>	21
<i>AMJEVITA INJ 20/0.4ML</i>	21
<i>AMJEVITA INJ 40/0.4ML</i>	21
<i>AMJEVITA INJ 40/0.8ML</i>	21
<i>AMJEVITA INJ 80/0.8ML</i>	21
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	139
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	139
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	139
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	144
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	144
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-80 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-10240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-20480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-40960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-81920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-163840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-327680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-655360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1310720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2621440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5242880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-10485760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-20971520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-41943040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-83886080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-167772160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-335544320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-671088640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1342177280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2684354560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5368709120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-10737418240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-21474836480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-42949672960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-85899345920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-171798691840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-343597383680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-687194767360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1374389534720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2748779069440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5497558138880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-10995116277760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-21990232555520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-43980465111040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-87960930222080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-175921860444160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-351843720888320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-703687441776640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1407374883553280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2814749767106560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5629499534213120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-11258999068426240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-22517998136852480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-45035996273704960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-90071992547409920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-180143985094819840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-360287970189639680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-720575940379279360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1441151880758558720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2882303761517117440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5764607523034234880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-11529215046068469760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-23058430092136939520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-46116860184273879040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-92233720368547758080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-184467440737095516160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-368934881474191032320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-737869762948382064640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1475739525896764129280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-2951479051793528258560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-5902958103587056517120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-11805916207174113034240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-23611832414348226068480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-47223664828696452136960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-94447329657392904273920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-188894659314785808547840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-377789318629571617095680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-755578637259143234191360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1511157274518286468382720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3022314549036572936765440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6044629098073145873530880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-12089258196146291747061760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-24178516392292583494123520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-48357032784585166988247040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-96714065569170333976494080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-193428131138340667952988160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-386856262276681335905976320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-773712524553362671811952640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1547425049106725343623905280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3094850098213450687247810560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6189700196426901374495621120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-12379400392853802748991242240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-24758800785707605497982484480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-49517601571415210995964968960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-99035203142830421991929937920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-198070406285660843983859875840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-396140812571321687967719751680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-792281625142643375935439503360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1584563250285286751870879006720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3169126500570573503741758013440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6338253001141147007483516026880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-12676506002282294014967032053760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-25353012004564588029934064107520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-50706024009129176059868128215040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-101412048018258352119736256430080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-202824096036516704239472512860160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-405648192073033408478945025720320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-811296384146066816957890051440640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1622592768292133633915780102881280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3245185536584267267831560205762560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6490371073168534535663120411525120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-12980742146337069071326240823050240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-25961484292674138142652481646100480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-51922968585348276285304963292200960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-103845937170696552570609926584401920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-207691874341393105141219853168803840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-415383748682786210282439706337607680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-830767497365572420564879412675215360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1661534994731144841129758825350430720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3323069989462289682259517650700861440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6646139978924579364519035301401722880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-13292279957849158729038070602803445760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-26584559915698317458076141205606891520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-53169119831396634916152282411213783040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-106338239662793269832304564822427566080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-212676479325586539664609129644855132160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-425352958651173079329218259289710264320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-850705917302346158658436518579420528640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1701411834604692317316873037158841057280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3402823669209384634633746074317682114560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6805647338418769269267492148635364229120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-13611294676837538538534984297270728458240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-27222589353675077077069968594541456916480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-54445178707350154154139937189082913832960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-108890357414700308308279874378165827665920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-217780714829400616616559748756331655331840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-435561429658801233233119497512663310663680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-871122859317602466466238995025326621327360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1742245718635204932932477990050653242654720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3484491437270409865864955980101306485309440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-6968982874540819731729911960202612970618880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-13937965749081639463459823920405225941237760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-27875931498163278926919647840810451882475520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-55751862996326557853839295681620903764951040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-111503725992653115707678591363241807529902080 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-223007451985306231415357182726483615059804160 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-446014903970612462830714365452967230119608320 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-892029807941224925661428730905934460239216640 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1784059615882449851322857461811868920478433280 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3568119231764899702645714923623737840956866560 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-7136238463529799405291429847247475681913733120 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-14272476927059598810582859694494951363827466240 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-28544953854119197621165719388989902727654932480 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-57089907708238395242331438777979805455309864960 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-114179815416476790484662877555959610910619729920 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-228359630832953580969325755111919221821239459840 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-456719261665907161938651510223838443642478919680 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-913438523331814323877303020447676887284957839360 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1826877046663628647754606040895353774569915678720 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-3653754093327257295509212081790707549139831357440 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-7307508186654514591018424163581415098279662714880 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-14615016373309029182036848327162830196559325429760 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-29230032746618058364073696654325660393118650859520 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-58460065493236116728147393308651320786237301719040 mg</i>	95
<i>amlodipine besylate-benazepril hcl cap 5-1169201309864722334562947866173026415724746034380</i>	

amoxicillin & k clavulanate for susp 200-28.5 mg/5ml.....	265
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml.....	266
amoxicillin & k clavulanate for susp 400-57 mg/5ml	266
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml.....	266
amoxicillin & k clavulanate tab 250-125 mg	266
amoxicillin & k clavulanate tab 500-125 mg	266
amoxicillin & k clavulanate tab 875-125 mg	266
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	266
amoxicillin (trihydrate) cap 250 mg	265
amoxicillin (trihydrate) cap 500 mg	265
amoxicillin (trihydrate) chew tab 125 mg	265
amoxicillin (trihydrate) chew tab 250 mg	265
amoxicillin (trihydrate) for susp 125 mg/5ml	265
amoxicillin (trihydrate) for susp 200 mg/5ml	265
amoxicillin (trihydrate) for susp 250 mg/5ml	265
amoxicillin (trihydrate) for susp 400 mg/5ml	265
amoxicillin (trihydrate) tab 500 mg.....	265
amoxicillin (trihydrate) tab 875 mg	265
amphetamine sulfate tab 10 mg	12
amphetamine sulfate tab 5 mg.....	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg.....	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg	12
amphetamine-dextroamphetamine cap er 24hr 10 mg	12

amphetamine-dextroamphetamine cap er 24hr 15 mg	12
amphetamine-dextroamphetamine cap er 24hr 20 mg.....	12
amphetamine-dextroamphetamine cap er 24hr 25 mg.....	12
amphetamine-dextroamphetamine cap er 24hr 30 mg	13
amphetamine-dextroamphetamine cap er 24hr 5 mg	12
amphetamine-dextroamphetamine tab 10 mg	13
amphetamine-dextroamphetamine tab 12.5 mg	13
amphetamine-dextroamphetamine tab 15 mg	13
amphetamine-dextroamphetamine tab 20 mg	13
amphetamine-dextroamphetamine tab 30 mg	13
amphetamine-dextroamphetamine tab 5 mg	13
amphetamine-dextroamphetamine tab 7.5 mg	13
amphotericin b for iv soln 50 mg	85
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm	266
ampicillin & sulbactam sodium for inj 3 (2-1) gm	266
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	266
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm.....	266
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	266
ampicillin cap 500 mg.....	265
ampicillin sodium for inj 1 gm	265
ampicillin sodium for inj 125 mg.....	265
ampicillin sodium for inj 2 gm	265
ampicillin sodium for inj 250 mg.....	265
ampicillin sodium for inj 500 mg	265
ampicillin sodium for iv soln 1 gm	265
ampicillin sodium for iv soln 10 gm.....	265
ampicillin sodium for iv soln 2 gm	265

AMPYRA TAB 10MG.....	270	APLENZIN TAB 174MG	69
AMRIX CAP 15MG	249	APLENZIN TAB 348MG.....	69
AMRIX CAP 30MG.....	249	APLENZIN TAB 522MG.....	69
AMTAGVI INJ.....	108	APOKYN INJ 10MG/ML	120
AMVISC INJ 12MG/ML	260	<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	120
AMVISC PLUS INJ 16MG/ML.....	260	APONVIE INJ 32/4.4ML	85
AMZEEQ AER 4%	161	<i>apraclonidine hcl ophth soln 0.5% (base</i> <i>equivalent)</i>	257
ANACAINE OIN	174	<i>aprepitant capsule 125 mg</i>	85
ANAFRANIL CAP 25MG	73	<i>aprepitant capsule 40 mg</i>	85
ANAFRANIL CAP 50MG	73	<i>aprepitant capsule 80 mg</i>	85
ANAFRANIL CAP 75MG	73	<i>aprepitant capsule therapy pack 80 & 125</i> <i>mg</i>	85
<i>anagrelide hcl cap 0.5 mg</i>	210	APRETUDE SUS 600MG ER	130
<i>anagrelide hcl cap 1 mg</i>	210	<i>apri tab</i>	149
ANALPRAM-HC CRE 1-1%	43	APRISO CAP 0.375GM.....	199
ANALPRAM-HC LOT 2.5%	43	APTENSIO XR CAP 10MG	16
ANAPROX DS TAB 550MG	26	APTENSIO XR CAP 15MG	16
ANASCORP INJ	262	APTENSIO XR CAP 20MG	16
ANASEPT SPR.....	130	APTENSIO XR CAP 30MG	16
ANASPAZ TAB 0.125MG.....	282	APTENSIO XR CAP 40MG	16
<i>anastrozole tab 1 mg</i>	108	APTENSIO XR CAP 50MG	16
ANAVIP INJ	262	APTENSIO XR CAP 60MG	16
ANCOBON CAP 250MG	85	APTIOM TAB 200MG	61
ANCOBON CAP 500MG.....	86	APTIOM TAB 400MG	61
ANDEXXA SOL 200MG.....	83	APTIOM TAB 600MG	61
ANDROGEL GEL 1%(25MG)	41	APTIOM TAB 800MG	61
ANDROGEL GEL 1%(50MG).....	41	APTIVUS CAP 250MG.....	130
ANDROGEL GEL 1.62%.....	42	APTIVUS SOL	130
ANECTINE INJ 200/10ML	252	AQUACEL AG PAD 5	177
ANECTINE INJ 20MG/ML	252	AQUACEL FOAM PAD 7	177
ANGELIQ TAB 0.25-0.5	194	AQUALANCE MIS 30G	224
ANGELIQ TAB 0.5-1MG	194	AQUASOL A INJ 50000/ML	292
ANGIOMAX INJ 250MG	60	AQUORAL SPR.....	244
ANNOVERA MIS	154	ARAKODA TAB 100MG	100
ANORO ELLIPT AER 62.5-25	55	ARALAST NP INJ 1000MG	275
ANTARA CAP 30MG	89	ARALAST NP INJ 500MG.....	275
ANTICOAGULNT SOL SOD CITR.....	60	<i>aranelle tab</i>	149
ANTIVENIN KIT LAT MACT	262	ARANESP INJ 100MCG.....	212
ANTIVENIN NA INJ CORAL SN	262	ARANESP INJ 10MCG	212
<i>anucort-hc sup 25mg</i>	43	ARANESP INJ 150MCG.....	212
ANUSOL-HC CRE 2.5%	43	ARANESP INJ 200MCG	212
ANZEMET TAB 50MG	84	ARANESP INJ 25MCG	212
APEXICON E CRE 0.05%.....	169		
APIDRA INJ SOLOSTAR	78		
APIDRA INJ U-100	78		

ARANESP INJ 300MCG.....	212	ARIXTRA INJ 5/0.4ML	58
ARANESP INJ 40MCG.....	212	ARIXTRA INJ 7.5/0.6.....	58
ARANESP INJ 500MCG.....	212	<i>armodafinil tab 150 mg</i>	16
ARANESP INJ 60MCG.....	212	<i>armodafinil tab 200 mg</i>	16
ARAVA TAB 10MG.....	29	<i>armodafinil tab 250 mg</i>	16
ARAVA TAB 20MG	29	<i>armodafinil tab 50 mg</i>	16
ARAZLO LOT 0.045%.....	161	ARMOUR THYRO TAB 120MG	279
ARCALYST INJ 220MG.....	25	ARMOUR THYRO TAB 15MG.....	279
ARESTIN MIS 1MG.....	244	ARMOUR THYRO TAB 180MG	279
AREXVY INJ 120MCG	288	ARMOUR THYRO TAB 240MG	279
<i>arformoterol tartrate soln nebu 15 mcg/2ml</i> <i>(base equiv)</i>	55	ARMOUR THYRO TAB 300MG	279
ARGATROBAN INJ 100MG/ML	60	ARMOUR THYRO TAB 30MG.....	279
<i>argatroban inj 250 mg/2.5ml (concentrate</i> <i>for iv infusion)</i>	60	ARMOUR THYRO TAB 60MG.....	279
ARGATROBAN INJ 50/50ML	60	ARMOUR THYRO TAB 90MG.....	279
ARGATROBAN INJ 50MG/50M	60	ARNICA TIN FLOWER	175
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i> 60		ARNUITY ELPT INH 100MCG	54
<i>argyl saline sol 0.9% irr</i>	203	ARNUITY ELPT INH 200MCG	54
<i>argyl saline sol 100ml</i>	242	ARNUITY ELPT INH 50MCG.....	54
ARICEPT TAB 10MG.....	268	AROMASIN TAB 25MG	109
ARICEPT TAB 23MG	268	ARRANON INJ 5MG/ML.....	103
ARICEPT TAB 5MG.....	268	<i>arsenic trioxide iv soln 10 mg/10ml (1</i> <i>mg/ml)</i>	117
ARIDA GEL.....	177	<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	117
ARIKAYCE SUS	20	ARTESUNATE SOL 110MG.....	100
ARIMIDEX TAB 1MG.....	109	<i>arthr pain gel 1%</i>	164
<i>aripiprazole oral solution 1 mg/ml</i>	129	ARTHROTEC 50 TAB.....	26
<i>aripiprazole orally disintegrating tab 10 mg</i>	129	ARTHROTEC 75 TAB.....	26
<i>aripiprazole orally disintegrating tab 15 mg</i>	129	<i>articadent inj dental</i>	218
<i>aripiprazole tab 10 mg</i>	129	ARTISS SOL 10ML.....	215
<i>aripiprazole tab 15 mg</i>	129	ARTISS SOL 2ML	215
<i>aripiprazole tab 2 mg</i>	129	ARTISS SOL 4ML	215
<i>aripiprazole tab 20 mg</i>	129	ARYMO ER TAB 15MG.....	32
<i>aripiprazole tab 30 mg</i>	129	ARYMO ER TAB 30MG.....	32
<i>aripiprazole tab 5 mg</i>	129	ARYMO ER TAB 60MG.....	32
ARISTADA INJ 1064MG.....	129	ARZERRA CON 100/5ML	106
ARISTADA INJ 441MG/1.....	129	ASACOL HD TAB 800MG	199
ARISTADA INJ 662MG/2.....	129	ASCLERA INJ 0.5%	243
ARISTADA INJ 882MG/3.....	129	ASCLERA INJ 1%	243
ARISTADA INJ INITIO	129	<i>ascomp/cod cap 30mg</i>	39
ARIXTRA INJ 10/0.8ML	58	<i>asenapine maleate sl tab 10 mg (base</i> <i>equiv)</i>	126
ARIXTRA INJ 2.5/0.5	58	<i>asenapine maleate sl tab 2.5 mg (base</i> <i>equiv)</i>	126

<i>asenapine maleate sl tab 5 mg (base equiv)</i>	ATACAND TAB 16MG.....	93
.....	ATACAND TAB 32MG.....	93
<i>ashlyna tab</i>	ATACAND TAB 4MG	93
ASMANEX 120 AER 220MCG.....	ATACAND TAB 8MG	93
ASMANEX 14 AER 220MCG.....	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	130
ASMANEX 30 AER 110MCG .....	.....	130
ASMANEX 30 AER 220MCG	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	130
ASMANEX 60 AER 220MCG.....	.....	130
ASMANEX 7 AER 110MCG.....	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	130
ASMANEX HFA AER 100 MCG	ATELVIA TAB.....	187
ASMANEX HFA AER 200 MCG.....	<i>atenolol & chlorthalidone tab 100-25 mg</i> .	96
ASPARLAS INJ 3750/5ML	<i>atenolol & chlorthalidone tab 50-25 mg</i> ...	96
<i>aspirin adlt tab 81mg ec</i>	<i>atenolol tab 100 mg</i>	136
<i>aspirin chew tab 81 mg</i>	<i>atenolol tab 25 mg</i>	136
<i>aspirin chld chw 81mg</i>	<i>atenolol tab 50 mg</i>	136
<i>aspirin ec tab 81mg</i>	ATGAM INJ 250MG.....	240
<i>aspirin low chw 81mg</i>	ATIVAN INJ 2MG/ML.....	50
<i>aspirin low tab 81mg</i>	ATIVAN INJ 4MG/ML.....	50
<i>aspirin low tab 81mg ec</i>	ATIVAN TAB 0.5MG	50
<i>aspirin tab delayed release 81 mg</i>	ATIVAN TAB 1MG	50
<i>aspirin-81 chw 81mg</i>	ATIVAN TAB 2MG.....	50
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	<i>atomoxetine hcl cap 10 mg (base equiv)</i> ...	15
.....	<i>atomoxetine hcl cap 100 mg (base equiv)</i> 15	
ASSURE 3 TES.....	<i>atomoxetine hcl cap 18 mg (base equiv)</i> ...	15
ASSURE 4 TES.....	<i>atomoxetine hcl cap 25 mg (base equiv)</i> ..	15
ASSURE CMFRT MIS 28G.....	<i>atomoxetine hcl cap 40 mg (base equiv)</i> ..	15
ASSURE II TES	<i>atomoxetine hcl cap 60 mg (base equiv)</i> ..	15
ASSURE II TES CHECK.....	<i>atomoxetine hcl cap 80 mg (base equiv)</i> ..	15
ASSURE LANCE MIS 21G.....	<i>atorvastatin calcium tab 10 mg (base</i>	
ASSURE LANCE MIS LOW FLOW.....	<i>equivalent)</i>	90
ASSURE LANCE MIS MICRO.....	<i>atorvastatin calcium tab 20 mg (base</i>	
ASSURE LANCE MIS SAFE 25G.....	<i>equivalent)</i>	90
ASSURE LANCE MIS SAFE 30G.....	<i>atorvastatin calcium tab 40 mg (base</i>	
ASSURE PRISM TES MULTI.....	<i>equivalent)</i>	90
ASSURE PRO TES	<i>atorvastatin calcium tab 80 mg (base</i>	
ASSURE TES PLATINUM	<i>equivalent)</i>	90
ASTAGRAF XL CAP 0.5MG	<i>atovaquone susp 750 mg/5ml</i>	44
ASTAGRAF XL CAP 1MG	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	100
ASTAGRAF XL CAP 5MG.....	.....	100
AT LAST TES	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	100
ATABEX EC TAB .....	.....	100
ATACAND HCT TAB 16-12.5	<i>atracurium besylate iv soln 100 mg/10ml</i>	253
ATACAND HCT TAB 32-12.5.....	.....	253
ATACAND HCT TAB 32-25MG.....		

<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	253	AUSTEDO XR TAB 6MG.....	270
ATRALIN GEL 0.05%	161	AUSTEDO XR TAB TITR KIT	270
ATRIPLA TAB	130	AUTO LANCET MIS	224
ATROPINE SUL INJ 0.05MG/1.....	283	AUTOCODE TES BLD GLUC	180
ATROPINE SUL INJ 0.1MG/ML.....	283	AUTOLET PLAT MIS 1.8MM	224
ATROPINE SUL INJ 1/2.5ML	283	AUTOLET PLAT MIS 2.4MM.....	224
ATROPINE SUL INJ 8MG/20ML.....	283	AUTOLET PLAT MIS 3.0MM.....	224
ATROPINE SUL SOL 1% OP.....	256	AUTOSHIELD MIS 30GX5MM.....	231
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	283	AUVELITY TAB 45-105MG.....	69
<i>atropine sulfate iv soln 0.4 mg/ml</i>	283	AUVI-Q INJ 0.1MG	291
<i>atropine sulfate iv soln 1 mg/ml</i>	283	AVALIDE TAB 150-12.5.....	96
<i>atropine sulfate ophth soln 1%</i>	256	AVALIDE TAB 300-12.5.....	96
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	283	AVAPRO TAB 150MG	93
ATROVENT HFA AER 17MCG	53	AVAPRO TAB 300MG	93
AUBAGIO TAB 14MG.....	270	AVAPRO TAB 75MG.....	93
AUBAGIO TAB 7MG	270	AVASTIN INJ	105
<i>aubra eq tab 0.1-0.02</i>	149	AVASTIN INJ 400/16ML.....	105
<i>aubra tab 0.1-0.02</i>	150	AVEED INJ 750/3ML.....	42
AUDENZ INJ	288	AVENOVA SOL 0.01%.....	175
AUGMENTIN SUS ES-600	266	<i>aviane tab</i>	150
AUGMENTIN TAB 500MG.....	266	<i>avidoxy tab 100mg</i>	276
AUGTYRO CAP 160MG.....	112	<i>avita gel 0.025%</i>	161
AUGTYRO CAP 40MG	112	AVO CREAM EMU.....	177
AURORA LANCE MIS 30G.....	224	AVODART CAP 0.5MG.....	204
AURORA LANCE MIS THIN 23G	224	AVONEX PEN KIT 30MCG.....	270
<i>aurovela 24 tab fe 1/20</i>	150	AVONEX PREFL KIT 30MCG.....	270
<i>aurovela fe tab 1.5/30</i>	150	AVSOLA INJ 100MG.....	199
<i>aurovela fe tab 1/20</i>	150	AVYCAZ INJ 2-0.5GM.....	147
<i>aurovela tab 1.5/30</i>	150	<i>ayuna tab</i>	150
<i>aurovela tab 1/20</i>	150	<i>azacitidine for inj 100 mg</i>	103
AURYXIA TAB 210MG	201	AZACTAM INJ 1GM	47
AUSTEDO TAB 12MG	270	AZACTAM INJ 2GM.....	47
AUSTEDO TAB 6MG.....	269	<i>azasan tab 100mg</i>	240
AUSTEDO TAB 9MG.....	269	<i>azasan tab 75 mg</i>	240
AUSTEDO XR TAB 12MG	270	AZASITE SOL 1%.....	257
AUSTEDO XR TAB 18MG	270	AZATHIOPRINE INJ 100MG	240
AUSTEDO XR TAB 24MG.....	270	<i>azathioprine tab 100 mg</i>	240
AUSTEDO XR TAB 30MG ER.....	270	<i>azathioprine tab 50 mg</i>	240
AUSTEDO XR TAB 36MG ER.....	270	<i>azathioprine tab 75 mg</i>	240
AUSTEDO XR TAB 42MG ER.....	270	<i>azelaic acid gel 15%</i>	176
AUSTEDO XR TAB 48MG ER.....	270	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	251
		<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	251

<i>azelastine hcl ophth soln 0.05%</i>	260
<i>azelastine hcl-fluticasone prop nasal spray</i> <i>137-50 mcg/act</i>	251
AZELEX CRE 20%.....	161
AZILECT TAB 0.5MG.....	123
AZILECT TAB 1MG.....	123
<i>azithromycin for susp 100 mg/5ml</i>	221
<i>azithromycin for susp 200 mg/5ml</i>	221
<i>azithromycin iv for soln 500 mg</i>	221
<i>azithromycin tab 250 mg</i>	221
<i>azithromycin tab 500 mg</i>	221
<i>azithromycin tab 600 mg</i>	221
AZOPT SUS 1% OP	260
AZOR TAB 10-20MG	96
AZOR TAB 10-40MG	96
AZOR TAB 5-20MG.....	96
AZOR TAB 5-40MG.....	96
AZSTARYS CAP 26.1-5.2	16
AZSTARYS CAP 39.2-7.8.....	16
AZSTARYS CAP 52.3-10.....	16
<i>aztreonam for inj 1 gm</i>	47
<i>aztreonam for inj 2 gm</i>	47
AZULFIDINE TAB 500MG	199
AZULFIDINE TAB 500MG EN	199
<i>azurette tab</i>	150
B	
<i>bac tab</i>	30
<i>bacitracin intramuscular for soln 50000 unit</i>	44
<i>bacitracin ophth oint 500 unit/gm</i>	257
<i>bacitracin-polymyxin b ophth oint</i>	257
<i>bacitracin-polymyxin-neomycin-hc ophth</i> <i>oint 1%</i>	258
<i>baclofen intrathecal inj 10 mg/20ml (500</i> <i>mcg/ml)</i>	249
<i>baclofen intrathecal inj 20 mg/20ml (1000</i> <i>mcg/ml)</i>	249
<i>baclofen intrathecal inj 40 mg/20ml (2000</i> <i>mcg/ml)</i>	249
<i>baclofen oral soln 10 mg/5ml</i>	249
<i>baclofen oral soln 5 mg/5ml</i>	249
<i>baclofen tab 10 mg</i>	249
<i>baclofen tab 20 mg</i>	249
BACMIN TAB.....	244

BACTRIM DS TAB 800-160	44
BACTRIM TAB 400-80MG	44
BAL IN OIL INJ 100MG/ML	83
BALCOLTRA TAB 0.1-20.....	150
<i>balsalazide disodium cap 750 mg</i>	199
BALVERSA TAB 3MG	112
BALVERSA TAB 4MG	112
BALVERSA TAB 5MG	112
<i>balziva tab</i>	150
BANZEL SUS 40MG/ML	61
BANZEL TAB 200MG	61
BANZEL TAB 400MG	61
BAQSIMI ONE POW 3MG/DOSE	77
BAQSIMI TWO POW 3MG/DOSE	77
BARACLUDE SOL	134
BARACLUDE TAB 0.5MG	134
BARACLUDE TAB 1MG.....	134
BARHEMSYS INJ 10MG/4ML	84
BASAGLAR INJ 100UNIT	78
BAVENCIO INJ 20MG/ML.....	106
BAXDELA INJ 300MG.....	197
BAXDELA TAB 450MG.....	197
BAYER BREEZE MIS 2 TEST	180
<i>bayer low chw 81mg</i>	31
<i>bayer low tab 81mg ec</i>	31
BCG VACCINE INJ 50MG.....	288
BD MICROTAIN MIS LANCETS.....	224
BD PEN NEEDL MIS 29GX12.7	231
BD PEN NEEDL MIS 31GX5MM.....	231
BD PEN NEEDL MIS 31GX8MM.....	231
BD PEN NEEDL MIS 32GX4MM.....	231
BD PEN NEEDL MIS 32GX6MM.....	231
BEAU RX GEL.....	177
BEBTELOVIMAB SOL 175/2ML.....	264
BECONASE AQ SUS 0.042%	252
BELBUCA MIS 150MCG	40
BELBUCA MIS 300MCG	40
BELBUCA MIS 450MCG	40
BELBUCA MIS 600MCG	40
BELBUCA MIS 750MCG.....	40
BELBUCA MIS 75MCG	40
BELBUCA MIS 900MCG	40
BELEODAQ INJ 500MG.....	112
BELLA/OPIUM SUP 16.2-30	283

BELLA/OPIUM SUP 16.2-60	283	<i>benzonatate cap 100 mg</i>	159
BELRAPZO SOL 100/4ML	101	<i>benzonatate cap 150 mg</i>	159
BELSOMRA TAB 10MG	217	<i>benzonatate cap 200 mg</i>	159
BELSOMRA TAB 15MG	217	<i>benzoyl peroxide foam 9.8%</i>	161
BELSOMRA TAB 20MG	217	<i>benzoyl peroxide gel 8%</i>	161
BELSOMRA TAB 5MG	217	<i>benzoyl peroxide-erythromycin gel 5-3%</i>	161
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	96	<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i>	161
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	96	<i>benzphetamine hcl tab 25 mg</i>	15
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	96	<i>benzphetamine hcl tab 50 mg</i>	15
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	96	<i>benztropine mesylate inj 1 mg/ml</i>	120
<i>benazepril hcl tab 10 mg</i>	92	<i>benztropine mesylate tab 0.5 mg</i>	120
<i>benazepril hcl tab 20 mg</i>	92	<i>benztropine mesylate tab 1 mg</i>	120
<i>benazepril hcl tab 40 mg</i>	92	<i>benztropine mesylate tab 2 mg</i>	120
<i>benazepril hcl tab 5 mg</i>	92	BEOVU INJ 6/0.05ML	256
BENDEKA INJ 100/4ML	101	<i>bepotastine besilate ophth soln 1.5%</i>	260
BENEFIX INJ 1000UNIT	206	BEPREVE DRO 1.5% OP	260
BENEFIX INJ 2000UNIT	206	BERINERT INJ 500UNIT	209
BENEFIX INJ 250UNIT	206	BESIVANCE SUS 0.6%	257
BENEFIX INJ 3000UNIT	206	BESPONSA INJ 0.9MG	106
BENEFIX INJ 500UNIT	206	BESREMI SOL 500MCG	117
BENICAR HCT TAB 20-12.5	96	BETADINE SOL 5% OP	257
BENICAR HCT TAB 40-12.5	96	<i>betaine powder for oral solution</i>	190
BENICAR HCT TAB 40-25MG	96	BETAMETH COM INJ 7MG/ML	156
BENICAR TAB 20MG	93	BETAMETH SOD INJ 12MG/2ML	156
BENICAR TAB 40MG	93	BETAMETH SOD INJ 6MG/ML	156
BENICAR TAB 5MG	93	<i>betamethasone dipropionate augmented cream 0.05%</i>	169
BENLYSTA INJ 120MG	243	<i>betamethasone dipropionate augmented gel 0.05%</i>	169
BENLYSTA INJ 200MG/ML	243	<i>betamethasone dipropionate augmented lotion 0.05%</i>	169
BENLYSTA INJ 400MG	243	<i>betamethasone dipropionate augmented oint 0.05%</i>	169
BENTYL INJ 10MG/ML	283	<i>betamethasone dipropionate cream 0.05%</i>	169
BENZAC AC LIQ 5% WASH	161	<i>betamethasone dipropionate lotion 0.05%</i>	169
BENZACLIN GEL 1-5%	161	<i>betamethasone dipropionate oint 0.05%</i>	169
BENZACLIN GEL 1-5%PUMP	161	<i>betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>	156
BENZALKONIUM SOL 50%	130		
BENZALKONIUM SOL NF	130		
BENZAMYCIN GEL 5-3%	161		
BENZEPRO AER 5.3%	161		
BENZNIDAZOLE TAB 100MG	43		
BENZNIDAZOLE TAB 12.5MG	43		
BENZOIN TIN NF	175		

<i>betamethasone valerate aerosol foam</i>		BICILLIN L-A INJ 2400000	265
0.12%	169	BICILLIN L-A INJ 600000	265
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	169	BIDIL TAB	144
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	170	BIJUVA CAP 1-100MG	194
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	170	BIKTARVY TAB	130
BETAPACE AF TAB 120MG	138	BILTRICIDE TAB 600MG	43
BETAPACE AF TAB 160MG	138	<i>bimatoprost ophth soln 0.03%</i>	261
BETAPACE AF TAB 80MG	138	BIMZELX INJ 160MG/ML	166
BETAPACE TAB 120MG	138	BIMZELX INJ 320MG/2	166
BETAPACE TAB 160MG	138	BINOSTO TAB 70MG	187
BETAPACE TAB 80MG	138	BIONECT AER 0.2%	177
BETA-PHOS/AC INJ 3-3MG/ML	156	BIONECT CRE 0.2%	177
BETASERON INJ 0.3MG	270	BIONECT GEL 0.2%	177
<i>betaxolol hcl ophth soln 0.5%</i>	255	BIOSCANNER TES GLUCOSE	180
<i>betaxolol hcl tab 10 mg</i>	136	BIOSTEP MIS 4	177
<i>betaxolol hcl tab 20 mg</i>	136	BIOTEL CARE TES STRIPS	180
<i>bethanechol chloride tab 10 mg</i>	287	BIOTHRAX INJ	288
<i>bethanechol chloride tab 25 mg</i>	287	<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	286
<i>bethanechol chloride tab 5 mg</i>	287	<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	96
<i>bethanechol chloride tab 50 mg</i>	287	<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	96
BETHKIS NEB 300/4ML	20	<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	96
BETIMOL SOL 0.25%	255	<i>bisoprolol fumarate tab 10 mg</i>	136
BETIMOL SOL 0.5%	255	<i>bisoprolol fumarate tab 5 mg</i>	136
BETOPTIC-S SUS 0.25% OP	255	BIVALIR/NACL INJ 250/50	60
BEVACIZUMAB INJ 2.75MG	256	BIVALIR/NACL INJ 500/100	60
BEVACIZUMAB INJ 3.75MG	256	<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	60
BEVESPI AER 9-4.8MCG	55	<i>bivalirudin trifluoroacetate iv soln 250 mg/50ml (base eq)</i>	60
BEVYXXA CAP 40MG	58	BIVIGAM INJ 10%	263
BEVYXXA CAP 80MG	58	BIZENGRI INJ 750 DOSE	106
<i>bexarotene cap 75 mg</i>	117	BKEMV INJ 300/30ML	209
<i>bexarotene gel 1%</i>	165	<i>bleomycin sulfate for inj 15 unit</i>	110
BEXSERO INJ	288	<i>bleomycin sulfate for inj 30 unit</i>	110
BEYAZ TAB	150	BLEPHAMIDE OIN S.O.P.	258
BEYFORTUS INJ 100MG/ML	264	BLINCYTO INJ 35MCG	106
BEYFORTUS INJ 50/0.5ML	264	<i>blisovi 24 tab fe 1/20</i>	150
BG STAR TES BLD GLUC	180	<i>blisovi fe tab 1.5/30</i>	150
BIAFINE EMU	177	<i>blisovi fe tab 1/20</i>	150
<i>bicalutamide tab 50 mg</i>	109	BLOOD GLUCOS TES	180
BICILLIN C-R INJ 1200000	266		
BICILLIN C-R INJ 900/300	266		
BICILLIN L-A INJ 1200000	265		

BLOOD GLUCOS TES PREMIUM	180	BRILINTA TAB 90MG	210
BLOOD GLUCOS TES STRIPS	180	BRIMO/DORZO SOL 0.15-2%	257
BLOXIVERZ INJ 10/10ML	100	<i>brimonidine tartrate gel 0.33% (base</i>	
BLOXIVERZ INJ 5MG/10ML	100	<i>equivalent)</i>	176
BOCASAL POW	244	<i>brimonidine tartrate ophth soln 0.1%</i>	257
BONJESTA TAB 20-20MG	84	<i>brimonidine tartrate ophth soln 0.15% ...</i>	257
BOOSTRIX INJ	282	<i>brimonidine tartrate ophth soln 0.2%</i>	257
BORIC ACID GRA	176	<i>brimonidine tartrate-timolol maleate ophth</i>	
<i>bortezomib for inj 3.5 mg</i>	112	<i>soln 0.2-0.5%</i>	255
BORTEZOMIB INJ 3.5/1.4	112	BRINEURA KIT 150/5ML	190
BORTEZOMIB INJ 3.5MG	112	<i>brinzolamide ophth susp 1%</i>	260
<i>bosentan tab 125 mg</i>	146	BRIVIACT INJ 50MG/5ML	61
<i>bosentan tab 62.5 mg</i>	146	BRIVIACT SOL 10MG/ML	61
BOSULIF CAP 100MG	112	BRIVIACT TAB 100MG	61
BOSULIF CAP 50MG	112	BRIVIACT TAB 10MG	61
BOSULIF TAB 100MG	112	BRIVIACT TAB 25MG	61
BOSULIF TAB 400MG	112	BRIVIACT TAB 50MG	61
BOSULIF TAB 500MG	112	BRIVIACT TAB 75MG	61
BOTOX INJ 100UNIT	253	BRIXADI SOL 128/0.36	40
BOTOX INJ 200UNIT	253	BRIXADI SOL 16/0.32	40
BRAFTOVI CAP 75MG	112	BRIXADI SOL 24/0.48	40
BREEZA ORAL SOL ABD/PELV	179	BRIXADI SOL 32/0.64	40
BREEZA ORAL SOL CONTRAST	179	BRIXADI SOL 64/0.18	40
BREEZE 2 MIS TEST	180	BRIXADI SOL 8/0.16ML	40
BRENZAVVY TAB 20MG	81	BRIXADI SOL 96/0.27	40
BREO ELLIPTA INH 100-25	55	<i>bromfenac sodium ophth soln 0.07% (base</i>	
BREO ELLIPTA INH 200-25	55	<i>equivalent)</i>	260
BREO ELLIPTA INH 50-25MCG	55	<i>bromfenac sodium ophth soln 0.075%</i>	
BREVIBLOC DS SOL 2000MG	136	<i>(base equivalent)</i>	260
BREVIBLOC INJ 10MG/ML	136	<i>bromfenac sodium ophth soln 0.09% (base</i>	
BREVIBLOC PM SOL 2500MG	137	<i>equiv) (once-daily)</i>	260
BREVIBLOC SOL	137	<i>bromocriptine mesylate cap 5 mg (base</i>	
BREVIBLOC SOL 10MG/ML	137	<i>equivalent)</i>	120
BREVIBLOC SOL 2000MG	137	<i>bromocriptine mesylate tab 2.5 mg (base</i>	
BREVIBLOC SOL 2500MG	137	<i>equivalent)</i>	120
BREVITAL SOD INJ 500MG	202	BROMSITE DRO 0.075%OP	260
BREXAFEMME TAB 150MG	85	BRONCHITOL CAP 40MG	275
<i>breyna aer 160/4.5</i>	55	BROVANA NEB 15MCG	55
<i>breyna aer 80/4.5</i>	55	BRUKINSA CAP 80MG	112
BREZTRI AERO AER SPHERE	55	BRYHALI LOT 0.01%	170
BRIDION INJ 200/2ML	83	BSS PLUS SOL OP	260
BRIDION INJ 500/5ML	83	BSS SOL OP	260
<i>briellyn tab</i>	150	<i>budesonide delayed release particles cap 3</i>	
BRILINTA TAB 60MG	210	<i>mg</i>	156

<i>budesonide inhalation susp 0.25 mg/2ml</i>	54	<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	41
<i>budesonide inhalation susp 0.5 mg/2ml..</i>	54	<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	40
<i>budesonide inhalation susp 1 mg/2ml</i>	54	<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	41
<i>budesonide rectal foam 2 mg/act.....</i>	43	<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	41
<i>budesonide tab er 24hr 9 mg.....</i>	156	<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	41
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	55	<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	41
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act.....</i>	55	<i>buprenorphine td patch weekly 10 mcg/hr</i>	41
<i>bumetanide inj 0.25 mg/ml.....</i>	185	<i>buprenorphine td patch weekly 15 mcg/hr</i>	41
<i>bumetanide tab 0.5 mg</i>	185	<i>buprenorphine td patch weekly 20 mcg/hr</i>	41
<i>bumetanide tab 1 mg</i>	185	<i>buprenorphine td patch weekly 5 mcg/hr</i>	41
<i>bumetanide tab 2 mg.....</i>	185	<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	41
<i>BUMEX TAB 0.5MG.....</i>	185	<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....</i>	272
<i>BUPHENYL POW</i>	190	<i>bupropion hcl tab 100 mg.....</i>	69
<i>BUPHENYL TAB 500MG</i>	190	<i>bupropion hcl tab 75 mg.....</i>	69
<i>bupivacaine hcl inj 0.25%</i>	219	<i>bupropion hcl tab er 12hr 100 mg</i>	69
<i>bupivacaine hcl inj 0.5%</i>	219	<i>bupropion hcl tab er 12hr 150 mg</i>	69
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	219	<i>bupropion hcl tab er 12hr 200 mg</i>	69
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	219	<i>bupropion hcl tab er 24hr 150 mg</i>	69
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	219	<i>bupropion hcl tab er 24hr 300 mg.....</i>	69
<i>BUPIVACAINE INJ 0.125%</i>	219	<i>bupropion hcl tab er 24hr 450 mg.....</i>	69
<i>BUPIVACAINE INJ 0.25%.....</i>	219	<i>buspirone hcl tab 10 mg.....</i>	49
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	218	<i>buspirone hcl tab 15 mg.....</i>	49
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf).....</i>	219	<i>buspirone hcl tab 30 mg</i>	49
<i>BUPIVACAINE INJ 0.5%.....</i>	219	<i>buspirone hcl tab 5 mg</i>	49
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	218	<i>buspirone hcl tab 7.5 mg</i>	49
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf).....</i>	218	<i>busulfan inj 6 mg/ml.....</i>	101
<i>BUPIVACAINE INJ 2.5MG/ML.....</i>	219	<i>BUSULFEX INJ 6MG/ML.....</i>	101
<i>BUPIVACAINE INJ 5MG/ML</i>	219	<i>BUT/ASA/CAF TAB</i>	30
<i>bupivacaine inj spinal.....</i>	219	<i>BUTAL/APAP CAP 50-300MG</i>	30
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv).....</i>	40	<i>butalbital-acetaminophen cap 50-300 mg</i>	30
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	40	<i>butalbital-acetaminophen tab 25-325 mg30</i>	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	40		

<i>butalbital-acetaminophen tab 50-325 mg</i>	30
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	39
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	39
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	30
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	30
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	31
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	39
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	31
<i>butorphanol tartrate inj 1 mg/ml</i>	41
<i>butorphanol tartrate inj 2 mg/ml</i>	41
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	41
BUTRANS DIS 10MCG/HR	41
BUTRANS DIS 15MCG/HR	41
BUTRANS DIS 20MCG/HR	41
BUTRANS DIS 5MCG/HR	41
BUTRANS DIS 7.5/HR	41
BYDUREON PEN INJ 2MG	78
BYETTA INJ 10MCG	78
BYETTA INJ 5MCG	78
BYLVAY CAP 1200MCG	199
BYLVAY CAP 200MCG	199
BYLVAY CAP 400MCG	199
BYLVAY CAP 600MCG	199
BYOOVIZ INJ 0.5MG	256
BYSTOLIC TAB 10MG	137
BYSTOLIC TAB 2.5MG	137
BYSTOLIC TAB 20MG	137
BYSTOLIC TAB 5MG	137
C	
CA ALGINATE MIS 12	177
CA ALGINATE PAD 2	177
CA ALGINATE PAD 4	177
CABENUVA SUS 400-600	130
CABENUVA SUS 600-900	130
<i>cabergoline tab 0.5 mg</i>	193
CABOMETYX TAB 20MG	112

CABOMETYX TAB 40MG	112
CABOMETYX TAB 60MG	112
CADUET TAB 10-10MG	144
CADUET TAB 10-20MG	144
CADUET TAB 10-40MG	144
CADUET TAB 10-80MG	144
CADUET TAB 5-10MG	144
CADUET TAB 5-20MG	144
CADUET TAB 5-40MG	144
CADUET TAB 5-80MG	144
CAFCIT INJ 60MG/3ML	14
CAFERGOT TAB 1-100MG	232
<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	15
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	15
CALAN SR TAB 120MG	139
CALAN SR TAB 180MG	139
CALAN SR TAB 240MG	139
CALCIFOL WAF	234
<i>calcipotriene cream 0.005%</i>	166
<i>calcipotriene foam 0.005%</i>	166
<i>calcipotriene oint 0.005%</i>	166
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	166
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	170
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	170
<i>calcitonin (salmon) inj 200 unit/ml</i>	187
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	187
<i>calcitrene oin 0.005%</i>	166
<i>calcitriol cap 0.25 mcg</i>	190
<i>calcitriol cap 0.5 mcg</i>	190
<i>calcitriol inj 1 mcg/ml</i>	190
<i>calcitriol oint 3 mcg/gm</i>	166
<i>calcitriol oral soln 1 mcg/ml</i>	190
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	201
<i>calcium acetate (phosphate binder) tab 667 mg</i>	201
CALCIUM CHLO INJ 10%	234
<i>calcium chloride inj 10%</i>	234
CALCIUM DISO INJ 1GM/5ML	83

CALCIUM GLUC INJ 10%	234	CAPVAXIVE INJ 0.5ML	288
<i>calcium gluconate inj 10%</i>	234	CARAC CRE 0.5%.....	165
CALDOLOR INJ 4MG/ML.....	26	CARAFATE SUS 1GM/10ML	284
CALDOLOR INJ 800/8ML.....	26	CARBAGLU TAB 200MG	190
CALQUENCE CAP 100MG.....	112	<i>carbamazepine cap er 12hr 100 mg</i>	61
CALQUENCE TAB 100MG	112	<i>carbamazepine cap er 12hr 200 mg</i>	62
CAMBIA POW 50MG	233	<i>carbamazepine cap er 12hr 300 mg</i>	62
CAMCEVI INJ 42MG	109	<i>carbamazepine chew tab 100 mg</i>	62
<i>camila tab 0.35mg</i>	155	<i>carbamazepine susp 100 mg/5ml</i>	62
CAMPTOSAR INJ 100/5ML	119	<i>carbamazepine tab 200 mg</i>	62
CAMPTOSAR INJ 300/15ML	119	<i>carbamazepine tab er 12hr 100 mg</i>	62
CAMPTOSAR INJ 40MG/2ML.....	119	<i>carbamazepine tab er 12hr 200 mg</i>	62
<i>camrese lo tab</i>	150	<i>carbamazepine tab er 12hr 400 mg</i>	62
<i>camrese tab</i>	150	CARBATROL CAP 100MG	62
CAMZYOS CAP 10MG.....	143	CARBATROL CAP 200MG.....	62
CAMZYOS CAP 15MG.....	143	CARBATROL CAP 300MG.....	62
CAMZYOS CAP 2.5MG	143	<i>carbidopa & levodopa orally disintegrating</i>	
CAMZYOS CAP 5MG	143	<i>tab 10-100 mg</i>	120
CANASA SUP 1000MG	199	<i>carbidopa & levodopa orally disintegrating</i>	
CANCIDAS INJ 50MG.....	85	<i>tab 25-100 mg</i>	120
CANCIDAS INJ 70MG.....	85	<i>carbidopa & levodopa orally disintegrating</i>	
<i>candesartan cilexetil tab 16 mg</i>	94	<i>tab 25-250 mg</i>	120
<i>candesartan cilexetil tab 32 mg</i>	94	<i>carbidopa & levodopa tab 10-100 mg</i>	120
<i>candesartan cilexetil tab 4 mg</i>	93	<i>carbidopa & levodopa tab 25-100 mg</i>	120
<i>candesartan cilexetil tab 8 mg</i>	93	<i>carbidopa & levodopa tab 25-250 mg</i>	121
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa & levodopa tab er 25-100 mg</i> .	121
<i>tab 16-12.5 mg</i>	96	<i>carbidopa & levodopa tab er 50-200 mg</i>	121
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa tab 25 mg</i>	120
<i>tab 32-12.5 mg</i>	96	<i>carbidopa-levodopa-entacapone tabs 12.5-</i>	
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>50-200 mg</i>	121
<i>tab 32-25 mg</i>	97	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>capecitabine tab 150 mg</i>	103	<i>18.75-75-200 mg</i>	121
<i>capecitabine tab 500 mg</i>	103	<i>carbidopa-levodopa-entacapone tabs 25-</i>	
CAPEX SHA 0.01%	170	<i>100-200 mg</i>	121
CAPHOSOL SOL	244	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPLYTA CAP 10.5MG.....	123	<i>31.25-125-200 mg</i>	121
CAPLYTA CAP 21MG	123	<i>carbidopa-levodopa-entacapone tabs 37.5-</i>	
CAPLYTA CAP 42MG	123	<i>150-200 mg</i>	121
CAPRELSA TAB 100MG.....	112	<i>carbidopa-levodopa-entacapone tabs 50-</i>	
CAPRELSA TAB 300MG	112	<i>200-200 mg</i>	121
<i>captopril tab 100 mg</i>	92	CARBINOXAMIN TAB 6MG.....	87
<i>captopril tab 12.5 mg</i>	92	<i>carbinoxamine maleate extended release</i>	
<i>captopril tab 25 mg</i>	92	<i>susp 4 mg/5ml</i>	87
<i>captopril tab 50 mg</i>	92	<i>carbinoxamine maleate soln 4 mg/5ml</i>	87

<i>carbinoxamine maleate tab 4 mg</i>	87	CAREONE LANC MIS THIN 23G	224
<i>carboplatin iv soln 150 mg/15ml</i>	101	CARESENS 30G MIS LANCETS	224
<i>carboplatin iv soln 450 mg/45ml</i>	102	CARESENS N TES	180
<i>carboplatin iv soln 50 mg/5ml</i>	101	CARESENS N TES GLUCOSE	180
<i>carboplatin iv soln 600 mg/60ml</i>	102	CARETOUCH MIS TWIST 30	224
<i>carboprost tromethamine im soln 250</i> <i>mcg/ml</i>	262	<i>carglumic acid soluble tab 200 mg</i>	190
CARDENE IV INJ 40/200ML.....	139	CARIMUNE NF INJ 6GM	263
CARDENE IV SOL 20/200ML	139	<i>carisoprodol tab 250 mg</i>	249
CARDIOPL IND SOL 4:1	143	<i>carisoprodol tab 350 mg</i>	249
CARDIOPL IND SOL 8:1	143	<i>carmustine for inj 100 mg</i>	102
CARDIOPL IND SOL LOW DEX8.....	143	CARNITOR INJ 1GM/5ML.....	190
CARDIOPL IND SOL NON-EN 8.....	143	CARNITOR SF SOL 1GM/10ML	190
CARDIOPL IND SOL PLASMA 4	143	CARNITOR SOL 1GM/10ML.....	190
CARDIOPL IND SOL PLS/TROM	143	CARNITOR TAB 330MG.....	190
CARDIOPL MN SOL 8:1.....	143	CAROSPIR SUS 25MG/5ML.....	186
CARDIOPL MN SOL PLS/TROM.....	143	<i>carteolol hcl ophth soln 1%</i>	255
CARDIOPL REP SOL 4:1.....	143	<i>cartia xt cap 120/24hr</i>	139
CARDIOPL MN SOL LOW TROM	143	<i>cartia xt cap 180/24hr</i>	139
CARDIOPLEGI INJ DEL NIDO	143	<i>cartia xt cap 240/24hr</i>	139
CARDIOPLEGI SOL DEL NIDO	143	<i>cartia xt cap 300/24hr</i>	139
CARDIOPLEGIC SOL	143	<i>carvedilol phosphate cap er 24hr 10 mg</i>	136
<i>cardioplegic soln</i>	143	<i>carvedilol phosphate cap er 24hr 20 mg</i>	136
CARDIZEM CD CAP 120MG/24	139	<i>carvedilol phosphate cap er 24hr 40 mg</i>	136
CARDIZEM CD CAP 180MG/24.....	139	<i>carvedilol phosphate cap er 24hr 80 mg</i>	136
CARDIZEM CD CAP 240MG/24	139	<i>carvedilol tab 12.5 mg</i>	136
CARDIZEM CD CAP 360MG/24	139	<i>carvedilol tab 25 mg</i>	136
CARDIZEM LA TAB 120MG	139	<i>carvedilol tab 3.125 mg</i>	136
CARDIZEM LA TAB 180MG	139	<i>carvedilol tab 6.25 mg</i>	136
CARDIZEM LA TAB 240MG	139	CASODEX TAB 50MG	109
CARDIZEM LA TAB 300MG/24	139	<i>caspofungin acetate for iv soln 50 mg</i>	85
CARDIZEM LA TAB 360MG	139	<i>caspofungin acetate for iv soln 70 mg</i>	85
CARDIZEM LA TAB 420MG/24	139	CASPOFUNGIN INJ 50MG	85
CARDIZEM TAB 120MG	139	CASPOFUNGIN INJ 70MG	85
CARDIZEM TAB 30MG	139	<i>cataflam tab 50mg</i>	26
CARDIZEM TAB 60MG	139	CATAPRES-TTS DIS 0.1/24HR.....	94
CARDURA TAB 1MG.....	94	CATAPRES-TTS DIS 0.2/24HR.....	94
CARDURA TAB 2MG	94	CATAPRES-TTS DIS 0.3/24HR.....	94
CARDURA TAB 4MG	94	CATHFLO ACTI INJ 2MG.....	211
CARDURA TAB 8MG	94	CAYA DPR	222
CARDURA XL TAB 4MG	204	CAYSTON INH 75MG	47
CARDURA XL TAB 8MG	204	<i>cefaclor cap 250 mg</i>	148
CAREONE LANC MIS 30G.....	224	<i>cefaclor cap 500 mg</i>	148
		CEFACLOR ER TAB 500MG	148
		<i>cefaclor for susp 250 mg/5ml</i>	148

<i>cefadroxil cap 500 mg</i>	147	<i>cefpodoxime proxetil tab 200 mg</i>	148
<i>cefadroxil for susp 250 mg/5ml</i>	147	<i>cefprozil for susp 125 mg/5ml</i>	148
<i>cefadroxil for susp 500 mg/5ml</i>	147	<i>cefprozil for susp 250 mg/5ml</i>	148
<i>cefadroxil tab 1 gm</i>	147	<i>cefprozil tab 250 mg</i>	148
CEFAZOL/DEX SOL 1GM	147	<i>cefprozil tab 500 mg</i>	148
CEFAZOL/DEX SOL 2GM	147	<i>ceftazidime for inj 1 gm</i>	148
CEFAZOLIN INJ 100GM.....	147	<i>ceftazidime for inj 6 gm</i>	148
CEFAZOLIN INJ 1GM/50ML.....	147	<i>ceftazidime for iv soln 2 gm</i>	148
CEFAZOLIN INJ 2GM	147	CEFTAZIDIME/ SOL D5W 1GM	148
CEFAZOLIN INJ 300GM	147	CEFTAZIDIME/ SOL D5W 2GM	149
CEFAZOLIN INJ 3GM	147	CEFTRIAX/DEX INJ 1GM	149
<i>cefazolin sodium for inj 1 gm</i>	147	CEFTRIAX/DEX INJ 2GM.....	149
<i>cefazolin sodium for inj 10 gm</i>	147	CEFTRIAXONE INJ 100GM.....	149
<i>cefazolin sodium for inj 2 gm</i>	147	<i>ceftriaxone sodium for inj 1 gm</i>	149
<i>cefazolin sodium for inj 3 gm</i>	147	<i>ceftriaxone sodium for inj 10 gm</i>	149
<i>cefazolin sodium for inj 500 mg</i>	147	<i>ceftriaxone sodium for inj 2 gm</i>	149
<i>cefazolin sodium for iv soln 1 gm</i>	147	<i>ceftriaxone sodium for inj 250 mg</i>	149
CEFAZOLIN SOL	147	<i>ceftriaxone sodium for inj 500 mg</i>	149
<i>cefdinir cap 300 mg</i>	148	<i>ceftriaxone sodium for iv soln 1 gm</i>	149
<i>cefdinir for susp 125 mg/5ml</i>	148	<i>ceftriaxone sodium for iv soln 2 gm</i>	149
<i>cefdinir for susp 250 mg/5ml</i>	148	<i>ceftriaxone sodium in dextrose inj 20</i> <i>mg/ml</i>	149
<i>cefepime hcl for inj 1 gm</i>	149	<i>ceftriaxone sodium in dextrose inj 40</i> <i>mg/ml</i>	149
<i>cefepime hcl for iv soln 2 gm</i>	149	<i>cefuroxime axetil tab 250 mg</i>	148
CEFEPIME INJ 1GM	149	<i>cefuroxime axetil tab 500 mg</i>	148
CEFEPIME INJ 2G/100ML	149	<i>cefuroxime sodium for inj 750 mg</i>	148
CEFEPIME/DEX INJ 1GM.....	149	<i>cefuroxime sodium for iv soln 1.5 gm</i>	148
CEFEPIME/DEX INJ 2GM	149	CELEBREX CAP 100MG	26
<i>cefixime cap 400 mg</i>	148	CELEBREX CAP 200MG	26
<i>cefixime for susp 100 mg/5ml</i>	148	CELEBREX CAP 400MG	26
<i>cefixime for susp 200 mg/5ml</i>	148	CELEBREX CAP 50MG.....	26
<i>cefotaxime sodium for inj 1 gm</i>	148	<i>celecoxib cap 100 mg</i>	26
<i>cefotaxime sodium for inj 2 gm</i>	148	<i>celecoxib cap 200 mg</i>	26
<i>cefotetan disodium for inj 1 gm</i>	148	<i>celecoxib cap 400 mg</i>	26
<i>cefotetan disodium for inj 2 gm</i>	148	<i>celecoxib cap 50 mg</i>	26
CEFOXITIN INJ 1GM	148	CELESTONE INJ SOLUSPAN	156
CEFOXITIN INJ 2GM	148	CELEXA TAB 10MG.....	69
<i>cefoxitin sodium for iv soln 1 gm</i>	148	CELEXA TAB 20MG	69
<i>cefoxitin sodium for iv soln 10 gm</i>	148	CELEXA TAB 40MG.....	69
<i>cefoxitin sodium for iv soln 2 gm</i>	148	CELLCEPT CAP 250MG.....	240
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	148	CELLCEPT IV INJ 500MG.....	240
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	148	CELLCEPT SUS 200MG/ML.....	240
<i>cefpodoxime proxetil tab 100 mg</i>	148	CELLCEPT TAB 500MG.....	240

CELONTIN CAP 300MG	68	<i>chloroprocaine hcl preservative free (pf) inj</i>	
CENTANY OIN 2%.....	164	2%.....	220
<i>cephalexin cap 250 mg</i>	147	<i>chloroprocaine hcl preservative free (pf) inj</i>	
<i>cephalexin cap 500 mg</i>	147	3%.....	220
<i>cephalexin cap 750 mg</i>	148	<i>chloroquine phosphate tab 250 mg</i>	100
<i>cephalexin for susp 125 mg/5ml</i>	148	<i>chloroquine phosphate tab 500 mg</i>	100
<i>cephalexin for susp 250 mg/5ml</i>	148	<i>chlorothiazide sodium for inj 500 mg</i>	186
<i>cephalexin tab 250 mg</i>	148	<i>chlorpromazine hcl inj 25 mg/ml</i>	128
<i>cephalexin tab 500 mg</i>	148	<i>chlorpromazine hcl inj 50 mg/2ml</i>	128
CEPROTIN INJ 1000UNIT	209	<i>chlorpromazine hcl tab 10 mg</i>	128
CEPROTIN INJ 500 UNIT	209	<i>chlorpromazine hcl tab 100 mg</i>	128
CERACADE EMU.....	175	<i>chlorpromazine hcl tab 200 mg</i>	128
CERAMAX CRE	175	<i>chlorpromazine hcl tab 25 mg</i>	128
CERDELGA CAP 84MG.....	211	<i>chlorpromazine hcl tab 50 mg</i>	128
CEREBYX INJ 100/2ML	67	<i>chlorthalidone tab 25 mg</i>	186
CEREBYX INJ 500/10ML.....	67	<i>chlorthalidone tab 50 mg</i>	186
CEREZYME INJ 400UNIT	211	<i>chlorzoxazone tab 250 mg</i>	249
CERVIDIL VAG MIS 10MG INS	262	<i>chlorzoxazone tab 375 mg</i>	249
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>		<i>chlorzoxazone tab 500 mg</i>	249
.....	87	<i>chlorzoxazone tab 750 mg</i>	249
CETRAXAL SOL 0.2%	262	CHOLBAM CAP 250MG	198
<i>cetorelix acetate for inj kit 0.25 mg</i>	188	CHOLBAM CAP 50MG.....	198
<i>cevimeline hcl cap 30 mg</i>	244	<i>cholestyramine light powder 4 gm/dose</i> .88	
CGMS CABLE MIS	224	<i>cholestyramine light powder packets 4 gm</i>	
CGMS MIS SOFTWARE	224	.....	88
<i>charlotte 24 chw fe 1/20</i>	150	<i>cholestyramine powder 4 gm/dose</i>	88
<i>chateal eq tab 0.15/30</i>	150	<i>cholestyramine powder packets 4 gm</i>	88
<i>chateal tab 0.15/30</i>	150	<i>choline fenofibrate cap dr 135 mg</i>	
CHEMET CAP 100MG	82	(fenofibric acid equiv)	89
<i>chenodal tab 250mg</i>	198	<i>choline fenofibrate cap dr 45 mg (fenofibric</i>	
<i>child asa chw 81mg</i>	31	acid equiv)	89
<i>chloramphenicol sodium succinate for iv inj</i>		CHOR GONADOT INJ 10000UNT	187
1 gm	45	CHROMIUM CL INJ 4MCG/ML	238
<i>chlordiazepoxide hcl cap 10 mg</i>	50	CIALIS TAB 10MG	145
<i>chlordiazepoxide hcl cap 25 mg</i>	50	CIALIS TAB 2.5MG.....	145
<i>chlordiazepoxide hcl cap 5 mg</i>	50	CIALIS TAB 20MG	145
<i>chlordiazepoxide hcl-clidinium bromide</i>		CIALIS TAB 5MG.....	145
cap 5-2.5 mg	283	CIBINQO TAB 100MG.....	173
<i>chlordiazepoxide-amitriptyline tab 10-25</i>		CIBINQO TAB 200MG	173
mg	269	CIBINQO TAB 50MG	173
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i>		<i>ciclodan sol 8%</i>	164
mg	269	<i>ciclopirox gel 0.77%</i>	164
CHLORHEX GLU SOL 20%.....	130	<i>ciclopirox olamine cream 0.77% (base</i>	
<i>chlorhexidine gluconate soln 0.12%</i>	243	equiv)	164

<i>ciclopirox olamine susp 0.77% (base equiv)</i>	
.....	164
<i>ciclopirox shampoo 1%</i>	164
<i>ciclopirox solution 8%</i>	164
<i>cidofovir iv inj 75 mg/ml</i>	133
<i>cilostazol tab 100 mg</i>	210
<i>cilostazol tab 50 mg</i>	210
CILOXAN OIN 0.3% OP	257
CILOXAN SOL 0.3% OP	257
CIMDUO TAB 300-300.....	130
CIMERLI INJ 0.3MG	256
CIMERLI INJ 0.5MG	256
<i>cimetidine hcl soln 300 mg/5ml</i>	284
<i>cimetidine tab 200 mg</i>	284
<i>cimetidine tab 300 mg</i>	284
<i>cimetidine tab 400 mg</i>	284
<i>cimetidine tab 800 mg</i>	284
CIMZIA KIT 200MG	199
CIMZIA PREFL KIT 200MG/ML	199
CIMZIA START KIT 200MG/ML.....	199
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	190
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	190
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	190
CINQAIR INJ.....	53
CINRYZE SOL 500 UNIT	209
CIPRO (10%) SUS 500MG/5	197
CIPRO (5%) SUS 250MG/5	197
CIPRO HC SUS OTIC	262
CIPRO TAB 250MG	197
CIPRO TAB 500MG	197
CIPRODEX SUS 0.3-0.1%	262
<i>ciprofloxacin 200 mg/100ml in d5w</i>	197
<i>ciprofloxacin 400 mg/200ml in d5w</i>	197
<i>ciprofloxacin for oral susp 250 mg/5ml</i> <i>(5%) (5 gm/100ml)</i>	197
<i>ciprofloxacin hcl ophth soln 0.3% (base</i> <i>equivalent)</i>	257
<i>ciprofloxacin hcl otic soln 0.2% (base</i> <i>equivalent)</i>	262
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	197
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	197
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	197
<i>ciprofloxacin-dexamethasone otic susp</i> <i>0.3-0.1%</i>	262
<i>ciprofloxacin-fluocinolone acetone (pf) otic</i> <i>soln 0.3-0.025%</i>	262
<i>cisatracurium besylate (pf) iv soln 10</i> <i>mg/5ml (2 mg/ml)</i>	253
<i>cisatracurium besylate (pf) iv soln 200</i> <i>mg/20ml (10 mg/ml)</i>	253
<i>cisatracurium besylate iv soln 20 mg/10ml</i> <i>(2 mg/ml)</i>	253
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	102
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	102
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	102
CISPLATIN INJ 50MG	102
CITALOPRAM CAP 30MG	69
<i>citalopram hydrobromide oral soln 10</i> <i>mg/5ml</i>	69
<i>citalopram hydrobromide tab 10 mg (base</i> <i>equiv)</i>	70
<i>citalopram hydrobromide tab 20 mg (base</i> <i>equiv)</i>	70
<i>citalopram hydrobromide tab 40 mg (base</i> <i>equiv)</i>	70
CITRANATAL CAP HARMONY	246
CITRANATAL CAP MEDLEY	246
CITRANATAL MIS 90 DHA	246
CITRANATAL MIS B-CALM	246
CITRANATAL PAK ASSURE	246
CITRANATAL PAK DHA	246
CITRANATAL PAK ESSENCE	246
CITRANATAL TAB BLOOM	246
CITRANATAL TAB RX	246
CITRULLINE TAB EASY 1GM	190
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i> .	103
<i>claravis cap 10mg</i>	161
<i>claravis cap 20mg</i>	161
<i>claravis cap 30mg</i>	161
<i>claravis cap 40mg</i>	161
CLARINEX TAB 5MG	87
CLARINEX-D TAB 2.5-120	160
<i>clarithromycin for susp 125 mg/5ml</i>	221
<i>clarithromycin for susp 250 mg/5ml</i>	221

<i>clarithromycin tab 250 mg</i>	221	<i>clindamycin phosphate gel 1% (twice-daily)</i>	162
<i>clarithromycin tab 500 mg</i>	221	<i>clindamycin phosphate in d5w iv soln 300</i> <i>mg/50ml</i>	47
<i>clarithromycin tab er 24hr 500 mg</i>	221	<i>clindamycin phosphate in d5w iv soln 600</i> <i>mg/50ml</i>	47
CLEANLET 28G MIS LANCETS.....	224	<i>clindamycin phosphate in d5w iv soln 900</i> <i>mg/50ml</i>	47
<i>clemastine fumarate syrup 0.67 mg/5ml</i> <i>(0.5 mg/5ml base eq)</i>	87	<i>clindamycin phosphate inj 300 mg/2ml...</i>	47
<i>clemastine fumarate tab 2.68 mg</i>	87	<i>clindamycin phosphate inj 600 mg/4ml...</i>	47
CLEOCIN CAP 150MG	47	<i>clindamycin phosphate inj 9 gm/60ml.....</i>	47
CLEOCIN CAP 300MG.....	47	<i>clindamycin phosphate inj 900 mg/6ml ..</i>	47
CLEOCIN CAP 75MG	46	<i>clindamycin phosphate lotion 1%.....</i>	162
CLEOCIN CRE 2% VAG.....	290	<i>clindamycin phosphate soln 1%</i>	162
CLEOCIN PED SOL 75MG/5ML.....	47	<i>clindamycin phosphate swab 1%</i>	162
CLEOCIN PHOS INJ 300/2ML.....	47	<i>clindamycin phosphate vaginal cream 2%</i>	290
CLEOCIN PHOS INJ 600/4ML	47	<i>clindamycin phosphate-benzoyl peroxide</i> <i>gel 1.2-2.5%</i>	162
CLEOCIN PHOS INJ 900/6ML	47	<i>clindamycin phosphate-benzoyl peroxide</i> <i>gel 1.2-3.75%</i>	162
CLEOCIN PHOS INJ 9GM/60ML	47	<i>clindamycin phosphate-benzoyl peroxide</i> <i>gel 1-5%</i>	162
CLEOCIN SUP 100MG.....	290	<i>clindamycin phosphate-tretinoin gel 1.2-</i> <i>0.025%.....</i>	162
CLEOCIN-T LOT 1%	162	<i>clindamycin phosph-benzoyl peroxide</i> <i>(refrig) gel 1.2 (1)-5%</i>	162
CLEVER CHECK MIS	224	CLINDESSE CRE 2%.....	290
CLEVER CHECK MIS 30G.....	224	CLINIMIX E INJ 2.75/D5W	254
CLEVER CHEK TES.....	180	CLINIMIX E INJ 4.25/D10	254
CLEVER CHEK TES AUTO CD	180	CLINIMIX E INJ 4.25/D5W	254
CLEVER CHEK TES VOICE	180	CLINIMIX E INJ 5%/D15W.....	254
CLEVER CHOIC TES MICRO	180	CLINIMIX E INJ 5%/D20W.....	254
CLEVIPREX EMU 0.5MG/ML	139	CLINIMIX INJ 4.25/D10	254
CLEVR CHOICE TES AUTO-CD	180	CLINIMIX INJ 4.25/D5W	254
CLIMARA DIS 0.025MG.....	195	CLINIMIX INJ 5%/D15W.....	254
CLIMARA DIS 0.0375MG	195	CLINIMIX INJ 5%/D20W	254
CLIMARA DIS 0.05MG.....	195	CLINIMIX INJ 8/10.....	254
CLIMARA DIS 0.06MG.....	195	CLINIMIX INJ 8/14.....	254
CLIMARA DIS 0.075MG.....	195	<i>clinisol sf inj 15%</i>	254
CLIMARA DIS 0.1MG.....	195	CLINOLIPID EMU 20%	254
CLIMARA PRO DIS WEEKLY	194	<i>clobazam suspension 2.5 mg/ml.....</i>	61
<i>clindacin mis etz 1%</i>	162	<i>clobazam tab 10 mg</i>	61
<i>clindacin-p pad 1%</i>	162	<i>clobazam tab 20 mg</i>	61
CLINDAGEL GEL 1%.....	162		
<i>clindamycin hcl cap 150 mg</i>	47		
<i>clindamycin hcl cap 300 mg</i>	47		
<i>clindamycin hcl cap 75 mg</i>	47		
<i>clindamycin palmitate hcl for soln 75</i> <i>mg/5ml (base equiv)</i>	47		
<i>clindamycin phosphate foam 1%</i>	162		
<i>clindamycin phosphate gel 1% (once-daily)</i>	162		

<i>clobetasol e cre 0.05%</i>	170	<i>clonidine hcl tab 0.3 mg</i>	94
<i>clobetasol propionate cream 0.05%</i>	170	<i>clonidine hcl tab er 12hr 0.1 mg</i>	15
<i>clobetasol propionate emollient base cream</i>		<i>clonidine tab er 24hr 0.17 mg</i>	94
<i>0.05%</i>	170	<i>clonidine td patch weekly 0.1 mg/24hr</i>	95
<i>clobetasol propionate emulsion foam</i>		<i>clonidine td patch weekly 0.2 mg/24hr</i>	95
<i>0.05%</i>	170	<i>clonidine td patch weekly 0.3 mg/24hr</i>	95
<i>clobetasol propionate foam 0.05%</i>	170	<i>clopidogrel bisulfate tab 300 mg (base</i>	
<i>clobetasol propionate gel 0.05%</i>	170	<i>equiv)</i>	210
<i>clobetasol propionate lotion 0.05%</i>	170	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	
<i>clobetasol propionate oint 0.05%</i>	170	.....	210
<i>clobetasol propionate shampoo 0.05%</i> ..	170	<i>clorazepate dipotassium tab 15 mg</i>	50
<i>clobetasol propionate soln 0.05%</i>	170	<i>clorazepate dipotassium tab 3.75 mg</i>	50
<i>clobetasol propionate spray 0.05%</i>	170	<i>clorazepate dipotassium tab 7.5 mg</i>	50
CLOBETASOL SUS 0.05%	258	<i>clotrimazole cream 1%</i>	164
CLOBEX LOT 0.05%	170	<i>clotrimazole soln 1%</i>	164
CLOBEX SHA 0.05%	170	<i>clotrimazole troche 10 mg</i>	243
CLOBEX SPR 0.05%	170	<i>clotrimazole w/ betamethasone cream 1-</i>	
<i>clocortolone pivalate cream 0.1%</i>	170	<i>0.05%</i>	164
<i>clodan sha 0.05%</i>	170	<i>clotrimazole w/ betamethasone lotion 1-</i>	
CLODERM CRE 0.1%	170	<i>0.05%</i>	164
<i>clofarabine iv soln 1 mg/ml</i>	103	<i>clozapine orally disintegrating tab 100 mg</i>	
<i>clomid tab 50mg</i>	187	.....	126
<i>clomiphene citrate tab 50 mg</i>	188	<i>clozapine orally disintegrating tab 12.5 mg</i>	
<i>clomipramine hcl cap 25 mg</i>	73	.....	126
<i>clomipramine hcl cap 50 mg</i>	73	<i>clozapine orally disintegrating tab 150 mg</i>	
<i>clomipramine hcl cap 75 mg</i>	73	.....	126
<i>clonazepam orally disintegrating tab 0.125</i>		<i>clozapine orally disintegrating tab 200 mg</i>	
<i>mg</i>	61	.....	126
<i>clonazepam orally disintegrating tab 0.25</i>		<i>clozapine orally disintegrating tab 25 mg</i>	
<i>mg</i>	61	.....	126
<i>clonazepam orally disintegrating tab 0.5 mg</i>		<i>clozapine tab 100 mg</i>	126
.....	61	<i>clozapine tab 200 mg</i>	126
<i>clonazepam orally disintegrating tab 1 mg</i>	61	<i>clozapine tab 25 mg</i>	126
<i>clonazepam orally disintegrating tab 2 mg</i>		<i>clozapine tab 50 mg</i>	126
.....	61	CLOZARIL TAB 100MG	126
<i>clonazepam tab 0.5 mg</i>	61	CLOZARIL TAB 25MG	126
<i>clonazepam tab 1 mg</i>	61	C-NATE DHA CAP 28-1-200	246
<i>clonazepam tab 2 mg</i>	61	COAGUCHEK MIS LANCETS	224
<i>clonidine hcl inj (for epidural infusion) 100</i>		<i>coal tar soln 20%</i>	177
<i>mcg/ml</i>	31	COARTEM TAB 20-120MG	100
<i>clonidine hcl inj (for epidural infusion) 500</i>		COCAINE HCL SOL 40MG/ML	251
<i>mcg/ml</i>	31	CODEINE SULF TAB 15MG	32
<i>clonidine hcl tab 0.1 mg</i>	94	CODEINE SULF TAB 60MG	32
<i>clonidine hcl tab 0.2 mg</i>	94	<i>codeine sulfate tab 30 mg</i>	32

COLAZAL CAP 750MG	199
<i>colchicine cap 0.6 mg</i>	204
<i>colchicine tab 0.6 mg</i>	204
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	204
COLCRYS TAB 0.6MG	204
<i>colesevelam hcl packet for susp 3.75 gm</i>	88
<i>colesevelam hcl tab 625 mg</i>	88
COLESTID GRA 5GM	88
COLESTID TAB 1GM	89
<i>colestipol hcl granule packets 5 gm</i>	89
<i>colestipol hcl granules 5 gm</i>	89
<i>colestipol hcl tab 1 gm</i>	89
<i>colistimethate sod for inj 150 mg (colistin</i> <i>base activity)</i>	47
COLOR CONDOM MIS + LUBE	222
COLUMVI INJ 10/10ML	106
COLUMVI INJ 2.5MG	106
COLY-MYCIN M INJ 150MG	48
COMBIGAN SOL 0.2/0.5%	255
COMBIPATCH DIS	194
COMBIVENT AER 20-100	55
COMBOGESIC INJ 300-1000	26
COMETRIQ KIT 100MG	112
COMETRIQ KIT 140MG	112
COMETRIQ KIT 60MG	112
COMFORT ASSU MIS LANC 28G	224
COMFORT ASSU MIS LANC 33G	224
COMFORTOUCH MIS LANCET	224
COMIRNATY INJ 2024-25	288
COMIRNATY INJ 30/0.3ML	288
COMPLERA TAB	130
COMPLETE NAT PAK DHA	246
COMPLETENATE CHW	246
<i>compro sup 25mg</i>	128
COMTAN TAB 200MG	120
CO-NATAL FA TAB 29-1MG	246
CONCEPT DHA CAP	246
CONCEPT OB CAP	246
CONCERTA TAB 18MG	16
CONCERTA TAB 27MG	17
CONCERTA TAB 36MG	17
CONCERTA TAB 54MG	17
CONDOMS MIS	222

CONDYLOX GEL 0.5%	174
CONFIRM/MICR TES GLUCOSE	180
CONJUPRI TAB 2.5MG	140
CONSENSI TAB 10-200MG	139
CONSENSI TAB 2.5-200	139
CONSENSI TAB 5-200MG	139
<i>constulose sol 10gm/15</i>	218
CONTOUR TES BLD GLUC	180
CONTOUR TES NEXT	180
CONTRACE TAB 8-90MG	15
CONTROL AST TES	180
CONTROL TES	180
CONZIP CAP 100MG	32
CONZIP CAP 200MG	32
CONZIP CAP 300MG	32
COOL BLOOD TES GLUCOSE	180
COPAXONE INJ 40MG/ML	270
COPIKTRA CAP 15MG	112
COPIKTRA CAP 25MG	112
COPPER INJ 0.4MG/ML	238
CORDRAN 80X3 TAP 4MCG/CM	170
CORDRAN CRE 0.025%	170
CORDRAN CRE 0.05%	170
CORDRAN LOT 0.05%	170
CORDRAN OIN 0.05%	170
COREG CR CAP 10MG	136
COREG CR CAP 20MG	136
COREG CR CAP 40MG	136
COREG CR CAP 80MG	136
COREG TAB 12.5MG	136
COREG TAB 25MG	136
COREG TAB 3.125MG	136
COREG TAB 6.25MG	136
<i>coremino tab 135mg</i>	277
<i>coremino tab 45mg</i>	276
<i>coremino tab 90mg</i>	276
CORGARD TAB 80MG	138
CORIFACT KIT	206
CORLANOR SOL 5MG/5ML	147
CORLANOR TAB 5MG	147
CORLANOR TAB 7.5MG	147
CORTEF TAB 10MG	156
CORTEF TAB 20MG	156
CORTEF TAB 5MG	156

CORTENEMA ENE 100MG	43
CORTIFOAM AER 90MG	43
CORTISPORIN SUS -TC OTIC	262
CORTROPHIN INJ 80UNT/ML	187
CORVERT INJ 1MG/10ML	52
CORVITE 150 TAB.....	214
CORVITE FE TAB	214
COSELA INJ 300MG	118
COSENTYX INJ 150MG/ML	166
COSENTYX INJ 300DOSE.....	167
COSENTYX INJ 75MG/0.5.....	166
COSENTYX PEN INJ 150MG/ML.....	167
COSENTYX PEN INJ 300DOSE	167
COSENTYX UNO INJ 300/2ML	167
COSOPT PF SOL 2%-0.5%	255
COSOPT SOL 2-0.5%OP	255
COTELLIC TAB 20MG.....	112
COTEMPLA XR TAB 17.3MG	17
COTEMPLA XR TAB 25.9MG	17
COTEMPLA XR TAB 8.6MG	17
COUMADIN TAB 10MG.....	57
COUMADIN TAB 1MG	57
COUMADIN TAB 2.5MG	57
COUMADIN TAB 2MG.....	57
COUMADIN TAB 3MG	57
COUMADIN TAB 4MG	57
COUMADIN TAB 5MG	57
COUMADIN TAB 6MG	57
COUMADIN TAB 7.5MG	57
COZAAR TAB 100MG.....	94
COZAAR TAB 25MG.....	94
COZAAR TAB 50MG	94
CREON CAP 12000UNT.....	184
CREON CAP 24000UNT	184
CREON CAP 3000UNIT	184
CREON CAP 36000UNT	184
CREON CAP 6000UNIT	184
CRESEMBA CAP 186MG.....	86
CRESEMBA INJ 372MG.....	86
CRESTOR TAB 10MG	90
CRESTOR TAB 20MG.....	90
CRESTOR TAB 40MG	90
CRESTOR TAB 5MG.....	90
CRINONE GEL 4% VAG	290

CRINONE GEL 8% VAG.....	290
CROFAB INJ	263
<i>cromolyn sodium ophth soln 4%.....</i>	261
<i>cromolyn sodium oral conc 100 mg/5ml</i>	198
<i>cromolyn sodium soln nebu 20 mg/2ml...</i>	52
<i>crotan lot 10%</i>	176
CRYODOSE AER TA.....	174
<i>cryselle-28 tab 28 tabs.....</i>	150
CRYSVITA INJ 10MG/ML	190
CRYSVITA INJ 20MG/ML.....	190
CRYSVITA INJ 30MG/ML.....	190
CTEXLI TAB 250MG	198
CUBICIN RF INJ 500MG	45
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	238
CUPRIMINE CAP 250MG.....	239
CURITY HYPER MIS 1/2	177
CURITY NACL PAD 6.....	177
<i>curity salin sol 0.9% irr.....</i>	203
CUROSURF SUS 120/1.5	276
CUROSURF SUS 240/3ML	276
CUTAQUIG SOL 1.65GM	263
CUTAQUIG SOL 1GM	263
CUTAQUIG SOL 2GM	263
CUTAQUIG SOL 3.3GM	263
CUTAQUIG SOL 4GM	263
CUTAQUIG SOL 8GM	263
CUVITRU INJ 2GM/10ML	263
CUVITRU INJ 4GM/20ML.....	263
CUVITRU INJ 8GM/40ML	263
CUVITRU SOL 1GM/5ML	263
CUVPOSA SOL 1MG/5ML.....	283
CUVRIOR TAB 300MG	239
CVS ADVANCED TES GLUCOSE	180
<i>cvs aspirin tab 81mg ec.....</i>	31
CVS LANCETS MIS 21G.....	224
CVS LANCETS MIS 30G.....	224
CVS LANCETS MIS 33G.....	224
CVS LANCETS MIS ORIGINAL	224
CVS LANCETS MIS THIN 26G.....	224
CVS LANCETS MIS THIN 30G.....	224
CVS LANCETS MIS THIN 33G.....	225
<i>cvs nicotine dis 14mg/24h.....</i>	272
<i>cvs nicotine dis 21mg/24h</i>	272

<i>cvs nicotine dis 7mg/24hr</i>	272	<i>cyclophosphamide for inj 2 gm</i>	102
<i>cvs nicotine gum 2mg cinn</i>	272	<i>cyclophosphamide for inj 500 mg</i>	102
<i>cvs nicotine gum 2mg mint</i>	272	<i>cyclophosphamide iv soln 500 mg/2.5ml</i>	
<i>cvs nicotine gum 2mg orig</i>	272	<i>(200 mg/ml)</i>	102
<i>cvs nicotine gum 2mgfruit</i>	272	<i>cycloserine cap 250 mg</i>	101
<i>cvs nicotine gum 4mg</i>	272	CYCLOSET TAB 0.8MG	78
<i>cvs nicotine gum 4mg cinn</i>	272	<i>cyclosporine (ophth) emulsion 0.05%</i> ...	258
<i>cvs nicotine gum 4mg mint</i>	272	<i>cyclosporine cap 100 mg</i>	240
<i>cvs nicotine gum 4mg orig</i>	272	<i>cyclosporine cap 25 mg</i>	240
<i>cvs nicotine gum 4mgfruit</i>	272	<i>cyclosporine modified cap 100 mg</i>	240
<i>cvs nicotine loz 2mg</i>	272	<i>cyclosporine modified cap 25 mg</i>	240
<i>cvs nicotine loz 2mg mint</i>	272	<i>cyclosporine modified cap 50 mg</i>	240
<i>cvs nicotine loz 4mg cinn</i>	272	<i>cyclosporine modified oral soln 100 mg/ml</i>	
<i>cvs nicotine loz 4mg mint</i>	272	.....	240
CVS TRUE MET TES GLUCOSE.....	180	CYKLOKAPRON INJ 100MG/ML.....	215
<i>cyanocobalamin inj 1000 mcg/ml</i>	211	CYLTEZO INJ 10/0.2ML.....	21
<i>cyanocobalamin nasal spray 500</i>		CYLTEZO INJ 20/0.4ML.....	21
<i>mcg/0.1ml</i>	211	CYLTEZO INJ 40/0.8ML.....	21
CYANOKIT INJ 5GM	83	CYMBALTA CAP 20MG	71
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i> ..	249	CYMBALTA CAP 30MG	71
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i> ..	249	CYMBALTA CAP 60MG	72
<i>cyclobenzaprine hcl tab 10 mg</i>	249	<i>cyproheptadine hcl syrup 2 mg/5ml</i>	88
<i>cyclobenzaprine hcl tab 5 mg</i>	249	<i>cyproheptadine hcl tab 4 mg</i>	88
<i>cyclobenzaprine hcl tab 7.5 mg</i>	249	CYRAMZA INJ 100/10ML	105
CYCLOGYL SOL 0.5% OP	256	CYRAMZA INJ 500/50ML.....	105
CYCLOGYL SOL 1% OP	256	<i>cyred eq tab</i>	150
CYCLOGYL SOL 2% OP	256	<i>cyred tab</i>	150
CYCLOMYDRIL SOL OP	256	CYSTADANE POW	190
<i>cyclopentolate hcl ophth soln 0.5%</i>	256	CYSTAGON CAP 150MG	203
<i>cyclopentolate hcl ophth soln 1%</i>	256	CYSTAGON CAP 50MG	203
<i>cyclopentolate hcl ophth soln 2%</i>	256	CYSTARAN SOL 0.44%	261
CYCLOPHOSPH INJ 1000MG	102	<i>cytarabine inj 20 mg/ml</i>	103
CYCLOPHOSPH INJ 1GM.....	102	<i>cytarabine inj pf 100 mg/ml</i>	103
CYCLOPHOSPH INJ 1GM/2ML	102	<i>cytarabine inj pf 20 mg/ml</i>	103
CYCLOPHOSPH INJ 2000MG.....	102	CYTOGAM INJ	263
CYCLOPHOSPH INJ 2GM/4ML	102	CYTOMEL TAB 25MCG.....	279
CYCLOPHOSPH INJ 500/5ML.....	102	CYTOMEL TAB 50MCG	279
CYCLOPHOSPH TAB 25MG	102	CYTOMEL TAB 5MCG.....	279
CYCLOPHOSPH TAB 50MG	102	CYTOTEC TAB 100MCG	286
CYCLOPHOSPHA INJ 2GM/10ML	102	CYTOTEC TAB 200MCG	286
CYCLOPHOSPHA INJ 500MG	102	<i>cytra k gra crystals</i>	203
<i>cyclophosphamide cap 25 mg</i>	102	D	
<i>cyclophosphamide cap 50 mg</i>	102	D10W/NACL INJ 0.2%.....	235
<i>cyclophosphamide for inj 1 gm</i>	102	D2.5W/NACL INJ 0.45%	235

D5W/LYTES INJ #48	235
D5W/NACL INJ 0.3%	235
dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	60
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	60
dabigatran etexilate mesylate cap 75 mg (etexilate base eq)	60
dacarbazine for inj 100 mg	117
dacarbazine for inj 200 mg	117
dactinomycin for inj 0.5 mg	110
dalfampridine tab er 12hr 10 mg	270
DALIRESP TAB 250MCG	54
DALIRESP TAB 500MCG	54
DALVANCE SOL 500MG	45
danazol cap 100 mg	42
danazol cap 200 mg	42
danazol cap 50 mg	42
DANTRIUM CAP 25MG	250
DANTRIUM IV INJ 20MG	250
dantrolene sodium cap 100 mg	250
dantrolene sodium cap 25 mg	250
dantrolene sodium cap 50 mg	250
dantrolene sodium for iv soln 20 mg	250
dapagliflozin propanediol tab 10 mg (base equivalent)	81
dapagliflozin propanediol tab 5 mg (base equivalent)	81
dapagliflozin prop-metformin hcl tab er 24hr 10-1000 mg	74
dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg	74
dapsone gel 5%	162
dapsone gel 7.5%	162
dapsone tab 100 mg	46
dapsone tab 25 mg	46
DAPTACEL INJ	282
daptomycin for iv soln 350 mg	45
daptomycin for iv soln 500 mg	45
DAPTOMYCIN INJ 350MG	45
DAPTOMYCIN INJ 500MG	45
DARAPRIM TAB 25MG	100
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	286

darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	286
DARZALEX SOL 100/5ML	106
DARZALEX SOL 400/20ML	106
DARZALEX SOL 400MG/20	106
dasatinib tab 100 mg	112
dasatinib tab 140 mg	112
dasatinib tab 20 mg	112
dasatinib tab 50 mg	112
dasatinib tab 70 mg	112
dasatinib tab 80 mg	112
dasetta tab 1/35	150
dasetta tab 7/7/7	150
DATROWAY INJ 100MG	119
daunorubicin hcl iv soln 20 mg/4ml (base equiv)	110
daunorubicin hcl iv soln 50 mg/10ml (base equiv)	110
DAUNORUBICIN INJ 20MG/4ML	110
DAUNORUBICIN INJ 50/10ML	110
DAURISMO TAB 100MG	108
DAURISMO TAB 25MG	108
DAXXIFY INJ 100U	253
DAYAVITE TAB	244
DAYBUE SOL 200MG/ML	253
DAYPRO TAB 600MG	26
daysee tab	150
DAYTRANA DIS 10MG/9HR	17
DAYTRANA DIS 15MG/9HR	17
DAYTRANA DIS 20MG/9HR	17
DAYTRANA DIS 30MG/9HR	17
DAYVIGO TAB 10MG	217
DAYVIGO TAB 5MG	217
D-CARE BLOOD TES GLUCOSE	180
DDAVP INJ 4MCG/ML	193
DDAVP TAB 0.1MG	193
DDAVP TAB 0.2MG	193
deblitane tab 0.35mg	155
decitabine for inj 50 mg	103
deferasirox granules packet 180 mg	82
deferasirox granules packet 360 mg	82
deferasirox granules packet 90 mg	82
deferasirox tab 180 mg	82
deferasirox tab 360 mg	82

<i>deferasirox tab 90 mg</i>	82	DEPO-PROVERA INJ 150MG/ML	155
<i>deferasirox tab for oral susp 125 mg</i>	82	DEPO-SQ PROV INJ 104.....	155
<i>deferasirox tab for oral susp 250 mg</i>	82	<i>depo-testost inj 100mg/ml</i>	42
<i>deferasirox tab for oral susp 500 mg</i>	82	<i>depo-testost inj 200mg/ml</i>	42
<i>deferiprone tab 1000 mg</i>	82	DERMACINRX CAP PROBISOL.....	82
<i>deferiprone tab 500 mg</i>	82	DERMACINRX TAB RIBOT-E.....	244
<i>deferoxamine mesylate for inj 2 gm</i>	83	DERMA-SMOOTH OIL /FS BODY	170
<i>deferoxamine mesylate for inj 500 mg</i>	83	DERMA-SMOOTH OIL /FS SCLP.....	170
DEFITELIO INJ 200/2.5	211	DERMOTIC OIL 0.01%.....	262
<i>deflazacort susp 22.75 mg/ml</i>	156	DESCOVY TAB 120-15MG.....	130
<i>deflazacort tab 18 mg</i>	156	DESCOVY TAB 200/25MG.....	131
<i>deflazacort tab 30 mg</i>	156	DESFERAL INJ 500MG	83
<i>deflazacort tab 36 mg</i>	156	<i>desflurane inhal soln</i>	202
<i>deflazacort tab 6 mg</i>	156	<i>desipramine hcl tab 10 mg</i>	73
DELESTROGEN INJ 10MG/ML	195	<i>desipramine hcl tab 100 mg</i>	73
DELESTROGEN INJ 20MG/ML.....	195	<i>desipramine hcl tab 150 mg</i>	73
DELFLEX-LC SOL 1.5% DEX.....	242	<i>desipramine hcl tab 25 mg</i>	73
DELFLEX-LC/ SOL 2.5% DEX	242	<i>desipramine hcl tab 50 mg</i>	73
DELFLEX-LC/ SOL 4.25 DEX	242	<i>desipramine hcl tab 75 mg</i>	73
DELFLEX-SM/ SOL 1.5% DEX.....	242	<i>desloratadine tab 5 mg</i>	87
DELFLEX-SM/ SOL 2.5% DEX	242	<i>desloratadine tab orally disintegrating 2.5</i>	
DELSTRIGO TAB.....	130	<i>mg</i>	87
<i>delyla tab 0.1-0.02</i>	150	<i>desloratadine tab orally disintegrating 5 mg</i>	
DELZICOL CAP 400MG.....	199	.....	87
<i>demeclocycline hcl tab 150 mg</i>	277	<i>desmopressin acetate inj 4 mcg/ml</i>	193
<i>demeclocycline hcl tab 300 mg</i>	277	<i>desmopressin acetate nasal spray soln</i>	
DEMEROL INJ 100MG/ML	33	0.01%.....	193
DEMEROL INJ 25MG/ML	32	<i>desmopressin acetate nasal spray soln</i>	
DEMEROL INJ 50MG/ML.....	33	0.01% (refrigerated)	193
DEMEROL INJ 75MG/ML	33	<i>desmopressin acetate preservative free (pf)</i>	
DEMSER CAP 250MG.....	93	<i>inj 4 mcg/ml</i>	193
DENAVIR CRE 1%	169	<i>desmopressin acetate tab 0.1 mg</i>	193
DENG VAXIA SUS	288	<i>desmopressin acetate tab 0.2 mg</i>	193
DEPAKOTE ER TAB 250MG	68	<i>desogest-eth estrad & eth estrad tab 0.15-</i>	
DEPAKOTE ER TAB 500MG.....	68	0.02/0.01 mg(21/5).....	150
DEPAKOTE SPR CAP 125MG	68	<i>desogestrel & ethinyl estradiol tab 0.15 mg-</i>	
DEPAKOTE TAB 125MG DR	68	30 mcg	150
DEPAKOTE TAB 250MG DR.....	68	<i>desonide cream 0.05%</i>	170
DEPAKOTE TAB 500MG DR	68	<i>desonide gel 0.05%</i>	170
DEPEN TITRA TAB 250MG.....	239	<i>desonide lotion 0.05%</i>	170
DEPO-ESTRADI INJ 5MG/ML.....	195	<i>desonide oint 0.05%</i>	170
DEPO-MEDROL INJ 20MG/ML	156	DESOWEN CRE 0.05%	170
DEPO-MEDROL INJ 40MG/ML.....	156	<i>desoximetasone cream 0.05%</i>	170
DEPO-MEDROL INJ 80MG/ML.....	156	<i>desoximetasone cream 0.25%</i>	170

<i>desoximetasone gel 0.05%</i>	170	<i>dexamethasone tab 1.5 mg</i>	157
<i>desoximetasone oint 0.05%</i>	171	<i>dexamethasone tab 2 mg</i>	157
<i>desoximetasone oint 0.25%</i>	171	<i>dexamethasone tab 4 mg</i>	157
<i>desoximetasone spray 0.25%</i>	171	<i>dexamethasone tab 6 mg</i>	157
DESOXYN TAB 5MG	13	<i>dexamethasone tab therapy pack 1.5 mg</i> (21)	157
<i>desrx gel 0.05%</i>	171	<i>dexamethasone tab therapy pack 1.5 mg</i> (35)	157
DESVENLAFAX TAB 100MG ER	72	<i>dexamethasone tab therapy pack 1.5 mg</i> (51)	157
DESVENLAFAX TAB 50MG ER	72	DEXATRAN CAP	244
<i>desvenlafaxine succinate tab er 24hr 100</i> <i>mg (base equiv)</i>	72	<i>dexchlorpheniramine maleate oral soln 2</i> <i>mg/5ml</i>	87
<i>desvenlafaxine succinate tab er 24hr 25 mg</i> <i>(base equiv)</i>	72	DEXCOM G5 MIS RECEIVER	225
<i>desvenlafaxine succinate tab er 24hr 50 mg</i> <i>(base equiv)</i>	72	DEXCOM G5 MIS TRANSMIT	225
DETROL LA CAP 2MG	286	DEXCOM G6 MIS RECEIVER	225
DETROL LA CAP 4MG	286	DEXCOM G6 MIS SENSOR	225
DETROL TAB 1MG	286	DEXCOM G6 MIS TRANSMIT	225
DETROL TAB 2MG	287	DEXCOM G7 MIS RECEIVER	225
DEXAMETH LA INJ 16MG/ML	156	DEXCOM G7 MIS SENSOR	225
DEXAMETH PHO INJ 10MG/ML	156	DEXEDRINE CAP 10MG CR	13
DEXAMETH PHO INJ 4MG/ML	156	DEXERYL CRE	175
DEXAMETHASON CON 1MG/ML	156	DEXILANT CAP 30MG DR	284
DEXAMETHASON INJ 8MG/ML	156	DEXILANT CAP 60MG DR	284
DEXAMETHASON SUS 8-4MG/ML	156	<i>dexlansoprazole cap delayed release 30</i> <i>mg</i>	284
DEXAMETHASON SUS 8MG/ML	156	<i>dexlansoprazole cap delayed release 60</i> <i>mg</i>	284
<i>dexamethasone elixir 0.5 mg/5ml</i>	156	DEXMEDE/NACL INJ 20/5ML	216
<i>dexamethasone sod phosphate</i> <i>preservative free inj 10 mg/ml</i>	156	<i>dexmedetomidine hcl in nacl 0.9% iv soln</i> <i>200 mcg/50ml</i>	216
<i>dexamethasone sodium phosphate inj 10</i> <i>mg/ml</i>	156	<i>dexmedetomidine hcl in nacl 0.9% iv soln</i> <i>400 mcg/100ml</i>	216
<i>dexamethasone sodium phosphate inj 100</i> <i>mg/10ml</i>	157	<i>dexmedetomidine hcl in nacl 0.9% iv soln</i> <i>80 mcg/20ml</i>	216
<i>dexamethasone sodium phosphate inj 120</i> <i>mg/30ml</i>	157	<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i>	216
<i>dexamethasone sodium phosphate inj 20</i> <i>mg/5ml</i>	157	<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	17
<i>dexamethasone sodium phosphate inj 4</i> <i>mg/ml</i>	156	<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	17
<i>dexamethasone sodium phosphate ophth</i> <i>soln 0.1%</i>	258	<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	17
<i>dexamethasone soln 0.5 mg/5ml</i>	157		
<i>dexamethasone tab 0.5 mg</i>	157		
<i>dexamethasone tab 0.75 mg</i>	157		
<i>dexamethasone tab 1 mg</i>	157		

<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	17
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	17
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	17
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	17
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	17
<i>dexmethylphenidate hcl tab 10 mg</i>	17
<i>dexmethylphenidate hcl tab 2.5 mg</i>	17
<i>dexmethylphenidate hcl tab 5 mg</i>	17
DEXONTO 0.4% SOL 20MG/5ML	157
<i>dexpak pak 10 day</i>	157
<i>dexpak pak 13 day</i>	157
<i>dexpak pak 6 day</i>	157
DEXPANTHENOL INJ 250MG/ML	198
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	118
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	118
DEXTENZA MIS 0.4MG	259
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	13
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	13
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	13
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	13
<i>dextroamphetamine sulfate tab 10 mg</i>	13
<i>dextroamphetamine sulfate tab 15 mg</i>	13
<i>dextroamphetamine sulfate tab 2.5 mg</i>	13
<i>dextroamphetamine sulfate tab 20 mg</i>	13
<i>dextroamphetamine sulfate tab 30 mg</i>	13
<i>dextroamphetamine sulfate tab 5 mg</i>	13
<i>dextroamphetamine sulfate tab 7.5 mg</i>	13
<i>dextrose 10% w/ sodium chloride 0.45%</i>	235
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	235
<i>dextrose 5% in lactated ringers</i>	235
<i>dextrose 5% w/ sodium chloride 0.2%</i>	235

<i>dextrose 5% w/ sodium chloride 0.225%</i>	235
<i>dextrose 5% w/ sodium chloride 0.3%</i>	235
<i>dextrose 5% w/ sodium chloride 0.33%</i>	235
<i>dextrose 5% w/ sodium chloride 0.45%</i>	235
<i>dextrose 5% w/ sodium chloride 0.9%</i>	235
<i>dextrose inj 10%</i>	253
DEXTROSE INJ 20%	253
<i>dextrose inj 25%</i>	253
DEXTROSE INJ 25%	253
DEXTROSE INJ 30%	253
DEXTROSE INJ 40%	253
<i>dextrose inj 5%</i>	253
<i>dextrose inj 50%</i>	254
DEXTROSE INJ 50%	254
<i>dextrose inj 70%</i>	254
DEXYCU SUS 9%	259
DHIVY TAB 25-100MG	121
DIACOMIT CAP 250MG	62
DIACOMIT CAP 500MG	62
DIACOMIT PAK 250MG	62
DIACOMIT PAK 500MG	62
DIALYVITE TAB SUPREM D	244
DIANEAL LOW SOL CALCIUM	242
DIANEAL PD-2 SOL 1.5% DEX	242
DIANEAL PD-2 SOL 2.5% DEX	242
DIANEAL PD-2 SOL 4.25%DEX	242
DIANEAL SOL LOW CALC	242
DIATHRIVE MIS UT 30G	225
<i>diatrizoate meglumine & sodium oral soln 66-10%</i>	183
DIATRUE PLUS TES STRIPS	180
<i>diazepam conc 5 mg/ml</i>	50
<i>diazepam inj 5 mg/ml</i>	50
DIAZEPAM INJ 5MG/ML	50
<i>diazepam oral soln 1 mg/ml</i>	50
<i>diazepam rectal gel delivery system 10 mg</i>	61
<i>diazepam rectal gel delivery system 2.5 mg</i>	61
<i>diazepam rectal gel delivery system 20 mg</i>	61
<i>diazepam tab 10 mg</i>	50
<i>diazepam tab 2 mg</i>	50

<i>diazepam tab 5 mg</i>	50	DIFLUCAN TAB 100MG.....	86
<i>diazoxide susp 50 mg/ml</i>	77	DIFLUCAN TAB 200MG.....	86
DIBENZYLINE CAP 10MG.....	93	DIFLUCAN TAB 50MG.....	86
DICLEGIS TAB 10-10MG.....	84	<i>diflunisal tab 500 mg</i>	31
<i>diclofenac epolamine patch 1.3%</i>	164	<i>difluprednate ophth emulsion 0.05%</i>	259
<i>diclofenac potassium (migraine) packet 50 mg</i>	233	DIGIFAB INJ 40MG.....	83
<i>diclofenac potassium tab 25 mg</i>	26	<i>digitek tab 0.125mg</i>	142
<i>diclofenac potassium tab 50 mg</i>	26	<i>digitek tab 0.25mg</i>	142
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	165	<i>digoxin inj 0.25 mg/ml</i>	142
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	164	<i>digoxin oral soln 0.05 mg/ml</i>	142
<i>diclofenac sodium ophth soln 0.1%</i>	261	<i>digoxin tab 125 mcg (0.125 mg)</i>	142
<i>diclofenac sodium soln 1.5%</i>	164	<i>digoxin tab 250 mcg (0.25 mg)</i>	142
<i>diclofenac sodium soln 2%</i>	164	<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	142
<i>diclofenac sodium tab delayed release 25 mg</i>	26	<i>dihydroergotamine mesylate inj 1 mg/ml</i>	233
<i>diclofenac sodium tab delayed release 50 mg</i>	26	<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	233
<i>diclofenac sodium tab delayed release 75 mg</i>	26	DILANTIN CAP 100MG.....	67
<i>diclofenac sodium tab er 24hr 100 mg</i>	26	DILANTIN CAP 30MG.....	67
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	26	DILANTIN CHW 50MG.....	67
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	26	DILANTIN-125 SUS 125/5ML.....	67
DICLOFONO GEL 1.6%.....	164	DILAUDID INJ 0.2MG/ML.....	33
<i>dicloxacillin sodium cap 250 mg</i>	266	DILAUDID INJ 1MG/ML.....	33
<i>dicloxacillin sodium cap 500 mg</i>	266	DILAUDID INJ 2MG/ML.....	33
<i>dicyclomine hcl cap 10 mg</i>	283	DILAUDID LIQ 1MG/ML.....	33
<i>dicyclomine hcl inj 10 mg/ml</i>	283	DILAUDID TAB 2MG.....	33
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	283	DILAUDID TAB 4MG.....	33
<i>dicyclomine hcl tab 20 mg</i>	283	DILAUDID TAB 8MG.....	33
<i>diethylpropion hcl tab 25 mg</i>	15	<i>diltiazem hcl cap er 12hr 120 mg</i>	140
<i>diethylpropion hcl tab er 24hr 75 mg</i>	15	<i>diltiazem hcl cap er 12hr 60 mg</i>	140
DIFFERIN CRE 0.1%.....	162	<i>diltiazem hcl cap er 12hr 90 mg</i>	140
DIFFERIN GEL 0.3%.....	162	<i>diltiazem hcl cap er 24hr 120 mg</i>	140
DIFFERIN LOT 0.1%.....	162	<i>diltiazem hcl cap er 24hr 180 mg</i>	140
DIFICID SUS.....	222	<i>diltiazem hcl cap er 24hr 240 mg</i>	140
DIFICID TAB 200MG.....	222	<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	140
<i>diflorasone diacetate cream 0.05%</i>	171	<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	140
<i>diflorasone diacetate oint 0.05%</i>	171	<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	140
DIFLUCAN SUS 40MG/ML.....	86	<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	140
		<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	140

<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 120 mg</i>	140	
<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 180 mg</i>	140	
<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 240 mg</i>	140	
<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 300 mg</i>	140	
<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 360 mg</i>	140	
<i>diltiazem hcl extended release beads cap</i>		
<i>er 24hr 420 mg</i>	140	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>		
.....	140	
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>		
.....	140	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>		
.....	140	
<i>diltiazem hcl tab 120 mg</i>	140	
<i>diltiazem hcl tab 30 mg</i>	140	
<i>diltiazem hcl tab 60 mg</i>	140	
<i>diltiazem hcl tab 90 mg</i>	140	
<i>diltiazem hcl tab er 24hr 180 mg</i>	140	
<i>diltiazem hcl tab er 24hr 240 mg</i>	140	
<i>diltiazem hcl tab er 24hr 300 mg</i>	140	
<i>diltiazem hcl tab er 24hr 360 mg</i>	140	
<i>diltiazem hcl tab er 24hr 420 mg</i>	140	
<i>DILTIAZEM INJ 100MG</i>	140	
<i>dilt-xr cap 120mg</i>	140	
<i>dilt-xr cap 180mg</i>	140	
<i>dilt-xr cap 240mg</i>	140	
<i>DIMENHYDRIN INJ 50MG/ML</i>	84	
<i>dimethyl fumarate capsule delayed release</i>		
<i>120 mg</i>	270	
<i>dimethyl fumarate capsule delayed release</i>		
<i>240 mg</i>	270	
<i>dimethyl fumarate capsule dr starter pack</i>		
<i>120 mg & 240 mg</i>	270	
<i>DIOVAN HCT TAB 160-12.5</i>	97	
<i>DIOVAN HCT TAB 160-25MG</i>	97	
<i>DIOVAN HCT TAB 320-12.5</i>	97	
<i>DIOVAN HCT TAB 320-25MG</i>	97	
<i>DIOVAN HCT TAB 80-12.5</i>	97	
<i>DIOVAN TAB 160MG</i>	94	
<i>DIOVAN TAB 320MG</i>	94	
<i>DIOVAN TAB 40MG</i>	94	
<i>DIOVAN TAB 80MG</i>	94	
<i>DIP/TET PED INJ 25-5LFU</i>	282	
<i>DIPENTUM CAP 250MG</i>	199	
<i>diphen elx 12.5/5ml</i>	87	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i> ..	87	
<i>diphenhydramine hcl inj 50 mg/ml</i>	87	
<i>diphenoxylate w/ atropine liq 2.5-0.025</i>		
<i>mg/5ml</i>	82	
<i>diphenoxylate w/ atropine tab 2.5-0.025</i>		
<i>mg</i>	82	
<i>DIPRIVAN INJ</i>	202	
<i>DIPRIVAN INJ 100/10ML</i>	202	
<i>DIPRIVAN INJ 200/20ML</i>	202	
<i>DIPRIVAN INJ 500/50ML</i>	202	
<i>DIPROLENE OIN 0.05%</i>	171	
<i>dipyridamole tab 25 mg</i>	210	
<i>dipyridamole tab 50 mg</i>	210	
<i>dipyridamole tab 75 mg</i>	210	
<i>disopyramide phosphate cap 100 mg</i>	51	
<i>disopyramide phosphate cap 150 mg</i>	51	
<i>disulfiram tab 250 mg</i>	267	
<i>disulfiram tab 500 mg</i>	267	
<i>DITROPAN XL TAB 10MG</i>	287	
<i>DITROPAN XL TAB 5MG</i>	287	
<i>DIURIL SUS 250/5ML</i>	186	
<i>divalproex sodium cap delayed release</i>		
<i>sprinkle 125 mg</i>	68	
<i>divalproex sodium tab delayed release 125</i>		
<i>mg</i>	68	
<i>divalproex sodium tab delayed release 250</i>		
<i>mg</i>	68	
<i>divalproex sodium tab delayed release 500</i>		
<i>mg</i>	68	
<i>divalproex sodium tab er 24 hr 250 mg</i>	68	
<i>divalproex sodium tab er 24 hr 500 mg</i>	68	
<i>DIVIGEL GEL 0.25MG</i>	195	
<i>DIVIGEL GEL 0.5MG</i>	195	
<i>DIVIGEL GEL 0.75MG</i>	195	
<i>DIVIGEL GEL 1.25MG</i>	195	
<i>DIVIGEL GEL 1MG/GM</i>	195	
<i>dobutamine hcl inj 12.5 mg/ml</i>	143	

<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	118	<i>dotti dis 0.05mg</i>	195
<i>docetaxel for inj conc 20 mg/ml</i>	118	<i>dotti dis 0.075mg</i>	195
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	118	<i>dotti dis 0.1mg</i>	195
DOCETAXEL INJ 160/16ML	118	DOVATO TAB 50-300MG.....	131
DOCETAXEL INJ 160/8ML	118	DOVONEX CRE 0.005%	167
DOCETAXEL INJ 20MG/2ML	118	<i>doxazosin mesylate tab 1 mg</i>	95
DOCETAXEL INJ 20MG/ML.....	118	<i>doxazosin mesylate tab 2 mg</i>	95
DOCETAXEL INJ 80MG/4ML	118	<i>doxazosin mesylate tab 4 mg</i>	95
DOCETAXEL INJ 80MG/8ML	118	<i>doxazosin mesylate tab 8 mg</i>	95
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	119	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	216
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	119	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	216
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	119	<i>doxepin hcl cap 10 mg</i>	73
<i>dodex inj</i>	211	<i>doxepin hcl cap 100 mg</i>	73
<i>dofetilide cap 125 mcg (0.125 mg)</i>	52	<i>doxepin hcl cap 150 mg</i>	73
<i>dofetilide cap 250 mcg (0.25 mg)</i>	52	<i>doxepin hcl cap 25 mg</i>	73
<i>dofetilide cap 500 mcg (0.5 mg)</i>	52	<i>doxepin hcl cap 50 mg</i>	73
<i>dolishale tab 90-20mcg</i>	150	<i>doxepin hcl cap 75 mg</i>	73
DOLOBID TAB 250MG.....	32	<i>doxepin hcl conc 10 mg/ml</i>	73
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	268	<i>doxepin hcl cream 5%</i>	166
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	268	<i>doxercalciferol cap 0.5 mcg</i>	190
<i>donepezil hydrochloride tab 10 mg</i>	268	<i>doxercalciferol cap 1 mcg</i>	190
<i>donepezil hydrochloride tab 23 mg</i>	268	<i>doxercalciferol cap 2.5 mcg</i>	190
<i>donepezil hydrochloride tab 5 mg</i>	268	<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	190
<i>dopamine hcl inj 40 mg/ml</i>	143	DOXIL INJ 20/10ML	110
DOPRAM INJ 20MG/ML	15	DOXIL INJ 50/25ML.....	110
DOPTLET TAB 20MG.....	212	<i>doxorubicin hcl for inj 10 mg</i>	110
DORYX MPC TAB 120MG.....	277	<i>doxorubicin hcl for inj 50 mg</i>	110
DORYX TAB 200MG.....	277	<i>doxorubicin hcl inj 2 mg/ml</i>	110
DORYX TAB 50MG.....	277	<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	110
DORYX TAB 80MG.....	277	DOXORUBICIN INJ 10/5ML.....	110
DORZOL/TIMOL SOL 2-0.5%OP	255	DOXORUBICIN INJ 10MG/5ML	110
<i>dorzolamide hcl ophth soln 2%</i>	261	DOXORUBICIN INJ 20/10ML	110
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	255	DOXORUBICIN INJ 200/100	111
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	255	DOXORUBICIN INJ 2MG/ML	110
DORZOLAMIDE SOL 2% OP	261	DOXORUBICIN INJ 50/25ML.....	111
<i>dotti dis 0.025mg</i>	195	<i>doxy 100 inj 100mg</i>	277
<i>dotti dis 0.0375mg</i>	195	<i>doxycycline (rosacea) cap delayed release 40 mg</i>	176
		<i>doxycycline hyclate cap 100 mg</i>	277
		<i>doxycycline hyclate cap 50 mg</i>	277

<i>doxycycline hyclate for inj 100 mg</i>	277	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>doxycycline hyclate tab 100 mg</i>	277	<i>tab 3-0.02-0.451 mg</i>	150
<i>doxycycline hyclate tab 150 mg</i>	277	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>doxycycline hyclate tab 20 mg</i>	277	<i>tab 3-0.03-0.451 mg</i>	150
<i>doxycycline hyclate tab 50 mg</i>	277	DROXIA CAP 200MG	211
<i>doxycycline hyclate tab 75 mg</i>	277	DROXIA CAP 300MG	211
<i>doxycycline hyclate tab delayed release</i>		DROXIA CAP 400MG	211
<i>100 mg</i>	277	<i>droxidopa cap 100 mg</i>	291
<i>doxycycline hyclate tab delayed release</i>		<i>droxidopa cap 200 mg</i>	291
<i>150 mg</i>	277	<i>droxidopa cap 300 mg</i>	291
<i>doxycycline hyclate tab delayed release</i>		DRYSOL SOL 20%	176
<i>200 mg</i>	277	DSUVIA SUB 30MCG	33
<i>doxycycline hyclate tab delayed release 50</i>		DUAKLIR AER 400/12	55
<i>mg</i>	277	DUAVEE TAB 0.45-20	194
<i>doxycycline hyclate tab delayed release 75</i>		DUET DHA 400 MIS 25-1-400	246
<i>mg</i>	277	DUET DHA MIS BALANCED	246
<i>doxycycline hyclate tab delayed release 80</i>		DUETACT TAB 30-2MG	75
<i>mg</i>	277	DUETACT TAB 30-4MG	75
<i>doxycycline monohydrate cap 100 mg</i> ..	277	DUEXIS TAB 800-26.6	26
<i>doxycycline monohydrate cap 150 mg</i> ..	277	DULERA AER 100-5MCG	56
<i>doxycycline monohydrate cap 50 mg</i>	277	DULERA AER 200-5MCG	56
<i>doxycycline monohydrate cap 75 mg</i>	277	DULERA AER 50-5MCG	55
<i>doxycycline monohydrate for susp 25</i>		<i>duloxetine hcl enteric coated pellets cap 20</i>	
<i>mg/5ml</i>	277	<i>mg (base eq)</i>	72
<i>doxycycline monohydrate tab 100 mg</i> ...	277	<i>duloxetine hcl enteric coated pellets cap 30</i>	
<i>doxycycline monohydrate tab 150 mg</i> ...	277	<i>mg (base eq)</i>	72
<i>doxycycline monohydrate tab 50 mg</i>	277	<i>duloxetine hcl enteric coated pellets cap 40</i>	
<i>doxycycline monohydrate tab 75 mg</i>	277	<i>mg (base eq)</i>	72
<i>doxylamine-pyridoxine tab delayed release</i>		<i>duloxetine hcl enteric coated pellets cap 60</i>	
<i>10-10 mg</i>	84	<i>mg (base eq)</i>	72
DRISDOL CAP 50000UNT	292	DUOBRII LOT	171
DRIZALMA CAP 20MG DR	72	DUO-CARE TES	180
DRIZALMA CAP 30MG DR	72	DUOPA SUS 4.63-20	121
DRIZALMA CAP 40MG DR	72	DUPIXENT INJ 200/1.14	173
DRIZALMA CAP 60MG DR	72	DUPIXENT INJ 200MG	173
<i>dronabinol cap 10 mg</i>	85	DUPIXENT INJ 300/2ML	173
<i>dronabinol cap 2.5 mg</i>	85	DURACLON INJ	31
<i>dronabinol cap 5 mg</i>	85	DURAFIBER AG PAD 4	177
<i>droperidol inj 2.5 mg/ml</i>	49	DURAMORPH INJ 0.5MG/ML	33
DROPLET LANC MIS 30G	225	DURAMORPH INJ 1MG/ML	33
<i>drospirenone-ethinyl estradiol tab 3-0.02</i>		DUREX MIS REALFEEL	222
<i>mg</i>	150	DUREX MIS TROPICAL	222
<i>drospirenone-ethinyl estradiol tab 3-0.03</i>		DUREZOL EMU 0.05%	259
<i>mg</i>	150	DURLAZA CAP 162.5MG	210

DUROLANE INJ 60MG/3ML	251
<i>dutasteride cap 0.5 mg</i>	204
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	204
DUTOPROL TAB 100-12.5	97
DUTOPROL TAB 25-12.5	97
DUTOPROL TAB 50-12.5	97
DW5-NACL INJ 0.225%	235
DYANAVEL XR SUS 2.5MG/ML	13
DYANAVEL XR TAB 10MG	13
DYANAVEL XR TAB 15MG	13
DYANAVEL XR TAB 20MG	13
DYANAVEL XR TAB 5MG	13
DYMISTA SPR 137-50	251
DYRENIUM CAP 100MG	186
DYRENIUM CAP 50MG	186
DYSPORT INJ 300UNIT	253
DYSPORT INJ 500UNIT	253

E

<i>e.e.s. 400 tab 400mg</i>	221
E.E.S. GRAN SUS 200/5ML	221
EASY COMFORT MIS 30G	225
EASY COMFORT MIS LANC/30G	225
EASY PLUS II TES BLD GLUC	180
EASY PLUS TES BLD GLUC	180
EASY STEP TES	180
EASY TALK TES BLD GLUC	180
EASY TOUCH MIS LANC/21G	225
EASY TOUCH MIS LANC/23G	225
EASY TOUCH MIS LANC/26G	225
EASY TOUCH MIS LANC/28G	225
EASY TOUCH MIS LANC/30G	225
EASY TOUCH MIS LANC/32G	225
EASY TOUCH MIS LANC/33G	225
EASY TOUCH TES GLUCOSE	180
EASY TOUCH TES STRIPS	180
EASY TRAK TES BLD GLUC	180
EASYGLUCO TES	180
EASYGLUCO TES PLUS	180
EASYMAX 15 TES	180
EASYMAX TES	180
EASYPLUS TES BLD GLUC	180
EASYPRO PLUS TES	180
EASYPRO TES BLD GLUC	180

EC-NAPROSYN TAB 375MG	26
EC-NAPROSYN TAB 500MG	26
<i>ec-naproxen tab 375mg</i>	26
<i>ec-naproxen tab 500mg</i>	26
<i>econazole nitrate cream 1%</i>	164
<i>econtra ez tab 1.5mg</i>	155
<i>econtra os tab 1.5mg</i>	155
<i>ecotrin low tab 81mg ec</i>	32
ECOZA AER 1%	164
<i>edaravone inj 30 mg/100ml (0.3 mg/ml)</i>	252
EDARBI TAB 40MG	94
EDARBI TAB 80MG	94
EDARBYCLOR TAB 40-12.5	97
EDARBYCLOR TAB 40-25MG	97
EDECRIN TAB 25MG	185
EDETATE DISO INJ 150MG/ML	239
EDLUAR SUB 10MG	216
EDLUAR SUB 5MG	216
<i>ed-spaz tab 0.125mg</i>	283
EDURANT TAB 25MG	131
<i>efavirenz tab 600 mg</i>	131
<i>efavirenz-emtricitabine-tenofovir df tab</i> <i>600-200-300 mg</i>	131
<i>efavirenz-lamivudine-tenofovir df tab 400-</i> <i>300-300 mg</i>	131
<i>efavirenz-lamivudine-tenofovir df tab 600-</i> <i>300-300 mg</i>	131
EFFER-K TAB 10MEQ	237
EFFER-K TAB 20MEQ	237
<i>effe-k tab 25meq ef</i>	237
EFFEXOR XR CAP 150MG	72
EFFEXOR XR CAP 37.5MG	72
EFFEXOR XR CAP 75MG	72
EFFIENT TAB 10MG	210
EFFIENT TAB 5MG	210
EFUDEX CRE 5%	165
EGRIFTA SV INJ 2MG	188
ELAHERE INJ 5MG/ML	106
ELAPRASE INJ 6MG/3ML	191
ELCYS INJ 50MG/ML	254
ELELYSO INJ 200UNIT	211
ELEMENT TES	180
ELEMNT COMPA TES STRIPS	181
ELEPSIA XR TAB 1000MG	62

ELEPSIA XR TAB 1500MG	62	EMBRACE PRO TES.....	181
ELESTRIN GEL 0.06%.....	195	EMBRACE TES BLD GLUC.....	181
<i>eletriptan hydrobromide tab 20 mg (base</i>		EMEND BIPACK PAK 80MG.....	85
<i>equivalent)</i>	233	EMEND SOL 150MG	85
<i>eletriptan hydrobromide tab 40 mg (base</i>		EMEND SUS 125MG.....	85
<i>equivalent)</i>	233	EMEND TRIPAC PAK 125 & 80.....	85
ELFABRIO SOL 20/10ML	191	EMFLAZA SUS 22.75/ML.....	157
ELFABRIO SOL 5MG/2.5	191	EMFLAZA TAB 18MG.....	157
ELIDEL CRE 1%	173	EMFLAZA TAB 30MG.....	157
ELIGARD INJ 22.5MG	109	EMFLAZA TAB 36MG.....	157
ELIGARD INJ 30MG	109	EMFLAZA TAB 6MG	157
ELIGARD INJ 45MG	109	EMGALITY INJ 100MG/ML	232
ELIGARD INJ 7.5MG.....	109	EMGALITY INJ 120MG/ML.....	232
ELIMITE CRE 5%.....	176	EMPAVELI INJ 1080MG.....	209
<i>elinest tab</i>	150	EMPLICITI INJ 300MG.....	106
ELIQUIS ST P TAB 5MG	58	EMPLICITI INJ 400MG.....	106
ELIQUIS TAB 2.5MG	58	EMSAM DIS 12MG/24H	69
ELIQUIS TAB 5MG	58	EMSAM DIS 6MG/24HR	69
ELITEK INJ 1.5MG.....	117	EMSAM DIS 9MG/24HR	69
ELITEK INJ 7.5MG	117	<i>emtricitabine caps 200 mg</i>	131
<i>elite-ob tab</i>	246	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
<i>elixophyllin elx 80/15ml</i>	57	<i>tab 100-150 mg</i>	131
ELLA TAB 30MG.....	155	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
ELLEENCE INJ 2MG/ML.....	111	<i>tab 133-200 mg</i>	131
ELLIOTTS B INJ	235	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
ELMIRON CAP 100MG.....	203	<i>tab 167-250 mg</i>	131
ELOCTATE INJ 1000UNIT	206	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
ELOCTATE INJ 1500UNIT	206	<i>tab 200-300 mg</i>	131
ELOCTATE INJ 2000UNIT.....	206	EMTRIVA CAP 200MG.....	131
ELOCTATE INJ 250UNIT	206	EMTRIVA SOL 10MG/ML.....	131
ELOCTATE INJ 3000UNIT	206	EMULSION SB EMU.....	175
ELOCTATE INJ 4000UNIT	206	EMVERM CHW 100MG	43
ELOCTATE INJ 5000UNIT	206	<i>emzahh tab 0.35mg</i>	155
ELOCTATE INJ 500UNIT	206	ENABLEX TAB 15MG	287
ELOCTATE INJ 6000UNIT	206	ENABLEX TAB 7.5MG	287
ELOCTATE INJ 750UNIT	206	<i>enalapril maleate & hydrochlorothiazide tab</i>	
ELREXFIO INJ 44/1.1ML.....	106	<i>10-25 mg</i>	97
ELREXFIO INJ 76/1.9ML.....	106	<i>enalapril maleate & hydrochlorothiazide tab</i>	
<i>eluryng mis</i>	154	<i>5-12.5 mg</i>	97
ELZONRIS SOL 1000MCG.....	117	<i>enalapril maleate oral soln 1 mg/ml</i>	92
EMBRACE EVO TES.....	181	<i>enalapril maleate tab 10 mg</i>	92
EMBRACE LANC MIS 21G	225	<i>enalapril maleate tab 2.5 mg</i>	92
EMBRACE LANC MIS 28G.....	225	<i>enalapril maleate tab 20 mg</i>	92
EMBRACE LANC MIS THIN 30G	225	<i>enalapril maleate tab 5 mg</i>	92

<i>enalaprilat iv soln 1.25 mg/ml</i>	92	ENTRESTO CAP 15-16MG.....	144
ENBRACE HR CAP.....	246	ENTRESTO CAP 6-6MG.....	144
ENBREL INJ 25/0.5ML	30	ENTRESTO TAB 24-26MG.....	144
ENBREL INJ 25MG	30	ENTRESTO TAB 49-51MG	144
ENBREL INJ 50MG/ML	30	ENTRESTO TAB 97-103MG	144
ENBREL MINI INJ 50MG/ML	30	ENTTY EMU SPRAY	175
ENBREL SRCLK INJ 50MG/ML	30	ENTYVIO INJ 300MG	199
ENCARE SUP 100MG	290	ENTYVIO PEN INJ 108/0.68.....	199
ENDARI POW 5GM.....	211	<i>enulose sol 10gm/15</i>	200
ENDO DERMAL MIS 5X5 CM	177	ENVARUSUS XR TAB 0.75MG	240
<i>endocet tab 10-325mg</i>	39	ENVARUSUS XR TAB 1MG	240
<i>endocet tab 2.5-325</i>	39	ENVARUSUS XR TAB 4MG.....	240
<i>endocet tab 5-325mg</i>	39	EOHILIA SUS 2MG/10ML.....	157
<i>endocet tab 7.5-325</i>	39	EPANED SOL 1MG/ML	92
ENDOMETRIN SUP 100MG	290	EPCLUSA PAK 150-37.5	134
ENERGIX-B INJ 10/0.5ML	288	EPCLUSA PAK 200-50MG	134
ENERGIX-B INJ 20MCG/ML	288	EPCLUSA TAB 200-50MG	134
ENHERTU INJ 100MG	107	EPCLUSA TAB 400-100	134
ENJAYMO SOL	209	EPHEDRI/NACL SOL 15MG/3ML	291
ENLITE GLUCO MIS SENSOR	225	EPHEDRINE SU INJ 50MG/ML	291
<i>enoxaparin sodium inj 300 mg/3ml</i>	58	<i>ephedrine sulfate iv soln 50 mg/ml</i>	291
<i>enoxaparin sodium inj soln pref syr 100</i> <i>mg/ml</i>	58	EPICERAM EMU	175
<i>enoxaparin sodium inj soln pref syr 120</i> <i>mg/0.8ml</i>	59	EPIDIOLEX SOL 100MG/ML.....	62
<i>enoxaparin sodium inj soln pref syr 150</i> <i>mg/ml</i>	59	EPIDUO FORTE GEL 0.3-2.5%	162
<i>enoxaparin sodium inj soln pref syr 30</i> <i>mg/0.3ml</i>	58	EPIDUO GEL 0.1-2.5%	162
<i>enoxaparin sodium inj soln pref syr 40</i> <i>mg/0.4ml</i>	58	EPIFOAM AER 1%	171
<i>enoxaparin sodium inj soln pref syr 60</i> <i>mg/0.6ml</i>	58	<i>epinastine hcl ophth soln 0.05%</i>	261
<i>enoxaparin sodium inj soln pref syr 80</i> <i>mg/0.8ml</i>	58	EPINEPH/NACL SOL 2/250ML	291
<i>enpresse-28 tab</i>	150	EPINEPHR/D5W INJ 100/10ML.....	291
<i>enskyce tab</i>	150	EPINEPHR/D5W SOL 2/250-5%.....	291
ENSPRYNG INJ.....	240	<i>epinephrine hcl nasal soln 0.1%</i>	252
ENSTILAR AER.....	171	EPINEPHRINE INJ 0.1MG/10	291
<i>entacapone tab 200 mg</i>	120	EPINEPHRINE INJ 0.1MG/ML	291
ENTADFI CAP 5-5MG	204	EPINEPHRINE INJ 0.2MG.....	291
<i>entecavir tab 0.5 mg</i>	134	EPINEPHRINE INJ 1MG/10ML.....	291
<i>entecavir tab 1 mg</i>	134	EPINEPHRINE INJ 1MG/ML	291
ENTEREG CAP 12MG	201	<i>epinephrine inj 30 mg/30ml (1 mg/ml)</i> <i>(1:1000)</i>	291
		EPINEPHRINE INJ 5MG/5ML	291
		EPINEPHRINE SOL 30/30ML.....	291
		<i>epinephrine solution auto-injector 0.15</i> <i>mg/0.15ml (1:1000)</i>	291
		<i>epinephrine solution auto-injector 0.3</i> <i>mg/0.3ml (1:1000)</i>	291

EPIPEN 2-PAK INJ 0.3MG.....	291	EQL LANCETS MIS THIN 30G.....	225
EPIPEN-JR INJ 0.15MG	291	EQL TRUETEST TES BLD GLUC	181
EPISIL LIQ	244	EQUETRO CAP 100MG	123
<i>epitol tab 200mg</i>	62	EQUETRO CAP 200MG.....	123
EPIVIR HBV SOL 5MG/ML	134	EQUETRO CAP 300MG.....	123
EPIVIR HBV TAB 100MG.....	134	ERAXIS INJ 100MG.....	85
EPIVIR SOL 10MG/ML.....	131	ERAXIS INJ 50MG	85
EPIVIR TAB 150MG.....	131	ERBITUX INJ 100MG	108
EPIVIR TAB 300MG.....	131	ERBITUX INJ 200MG.....	108
<i>eplerenone tab 25 mg</i>	99	<i>ergocalciferol cap 1.25 mg (50000 unit)</i> 292	
<i>eplerenone tab 50 mg</i>	99	<i>ergoloid mesylates tab 1 mg</i>	272
EPOGEN INJ 10000/ML	212	ERGOMAR SUB 2MG.....	233
EPOGEN INJ 2000/ML	212	<i>ergotamine w/ caffeine tab 1-100 mg</i>	232
EPOGEN INJ 20000/ML.....	212	<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	
EPOGEN INJ 3000/ML	212	.....	119
EPOGEN INJ 4000/ML.....	212	ERIVEDGE CAP 150MG	108
<i>epoprostenol sodium for inj 0.5 mg</i>	145	ERLEADA TAB 240MG.....	109
<i>epoprostenol sodium for inj 1.5 mg</i>	145	ERLEADA TAB 60MG	109
EPSOLAY CRE 5%.....	162	<i>erlotinib hcl tab 100 mg (base equivalent)</i>	
<i>eptifibatide iv soln 20 mg/10ml (2 mg/ml)</i>		.....	108
.....	210	<i>erlotinib hcl tab 150 mg (base equivalent)</i>	
<i>eptifibatide iv soln 200 mg/100ml (2</i>		.....	108
<i>mg/ml)</i>	210	<i>erlotinib hcl tab 25 mg (base equivalent)</i> 108	
<i>eptifibatide iv soln 75 mg/100ml (0.75</i>		<i>errin tab 0.35mg</i>	155
<i>mg/ml)</i>	210	ERTACZO CRE 2%.....	164
<i>eq aspirin chw 81mg</i>	32	<i>ertapenem sodium for inj 1 gm (base</i>	
<i>eq nicotine dis 14mg/24h</i>	272	<i>equivalent)</i>	45
<i>eq nicotine dis 21mg/24h</i>	272	ERVEBO INJ.....	288
<i>eq nicotine dis 7mg/24hr</i>	272	<i>ery pad 2%</i>	162
<i>eq nicotine gum 2mg cinn</i>	273	ERYGEL GEL 2%	162
<i>eq nicotine gum 2mg mint</i>	273	ERYPED SUS 200/5ML	221
<i>eq nicotine gum 2mgfruit</i>	273	ERYPED SUS 400/5ML.....	221
<i>eq nicotine gum 4mg cinn</i>	273	<i>ery-tab tab 250mg ec</i>	221
<i>eq nicotine gum 4mg mint</i>	273	<i>ery-tab tab 333mg ec</i>	221
<i>eq nicotine gum 4mg orig</i>	273	<i>ery-tab tab 500mg ec</i>	221
<i>eq nicotine gum 4mgfruit</i>	273	<i>erythrocine inj 500mg</i>	221
<i>eq nicotine loz 2mg cinn</i>	273	ERYTHROCIN INJ 500MG.....	221
<i>eq nicotine loz 2mg mint</i>	273	<i>erythromycin ethylsuccinate for susp 200</i>	
<i>eq nicotine loz 4mg cinn</i>	273	<i>mg/5ml</i>	221
<i>eq nicotine loz 4mg mint</i>	273	<i>erythromycin ethylsuccinate for susp 400</i>	
<i>eql aspirin chw 81mg</i>	32	<i>mg/5ml</i>	221
EQL LANCETS MIS 21G COLR	225	<i>erythromycin ethylsuccinate tab 400 mg</i>	
EQL LANCETS MIS 33G COLR.....	225	.....	221
EQL LANCETS MIS THIN 26G.....	225	<i>erythromycin gel 2%</i>	162

<i>erythromycin lactobionate for inj 500 mg</i>	
.....	221
ERYTHROMYCIN OIN 5MG/GM.....	257
<i>erythromycin ophth oint 5 mg/gm</i>	257
<i>erythromycin soln 2%</i>	162
<i>erythromycin tab 250 mg</i>	221
<i>erythromycin tab 500 mg</i>	222
<i>erythromycin tab delayed release 250 mg</i>	
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<i>erythromycin tab delayed release 333 mg</i>	
.....	222
<i>erythromycin tab delayed release 500 mg</i>	
.....	222
<i>erythromycin w/ delayed release particles</i>	
cap 250 mg.....	222
ERZOFRI INJ 117/0.75	124
ERZOFRI INJ 156MG/ML	124
ERZOFRI INJ 234/1.5.....	124
ERZOFRI INJ 39/0.25.....	124
ERZOFRI INJ 78/0.5ML	124
ESBRIET CAP 267MG.....	276
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ESBRIET TAB 801MG	276
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	70
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	70
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	70
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	
.....	70
<i>esgic cap</i>	31
ESGIC TAB.....	31
ESKATA SOL 40%	169
<i>esmolol hcl inj 100 mg/10ml</i>	137
ESMOLOL HCL SOL 2000/100.....	137
ESMOLOL HCL SOL 2500/250	137
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	137
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	137
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	285
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	285
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	285
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	285
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	285
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	285
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ESPEROCT INJ 1500UNIT	206
ESPEROCT INJ 2000UNIT	206
ESPEROCT INJ 3000UNIT	206
ESPEROCT INJ 500UNIT	206
<i>estarylla tab 0.25-35</i>	150
<i>estazolam tab 1 mg</i>	216
<i>estazolam tab 2 mg</i>	216
ESTRACE TAB 0.5MG	195
ESTRACE TAB 1MG	195
ESTRACE TAB 2MG.....	195
ESTRACE VAG CRE 0.01%	290
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	194
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	194
<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	195
<i>estradiol tab 0.5 mg</i>	195
<i>estradiol tab 1 mg</i>	195
<i>estradiol tab 2 mg</i>	196
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i> 196	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	196
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i> 196	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	196
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i> ..	196
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	196
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	196
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	196
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	196

<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	196	<i>etomidate iv soln 2 mg/ml</i>	202
<i>estradiol td patch weekly 0.025 mg/24hr</i>	196	<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	155
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	196	ETOPOPHOS INJ 100MG.....	119
<i>estradiol td patch weekly 0.05 mg/24hr</i>	196	<i>etoposide cap 50 mg</i>	119
<i>estradiol td patch weekly 0.06 mg/24hr</i>	196	<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	119
<i>estradiol td patch weekly 0.075 mg/24hr</i>	196	<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	119
<i>estradiol td patch weekly 0.1 mg/24hr</i>	196	<i>etoposide inj 500 mg/25ml (20 mg/ml)</i> ..	119
<i>estradiol vaginal cream 0.1 mg/gm</i>	290	<i>etravirine tab 100 mg</i>	131
<i>estradiol vaginal tab 10 mcg</i>	290	<i>etravirine tab 200 mg</i>	131
<i>estradiol valerate im in oil 20 mg/ml</i>	196	EUA PATIENT MIS ASSESS	242
<i>estradiol valerate im in oil 40 mg/ml</i>	196	EUCRISA OIN 2%	176
ESTRING MIS 2MG	290	EUFLEXXA INJ 10MG/ML	251
ESTROGEL GEL 0.06%	196	<i>euthyrox tab 100mcg</i>	279
<i>eszopiclone tab 1 mg</i>	216	<i>euthyrox tab 112mcg</i>	279
<i>eszopiclone tab 2 mg</i>	216	<i>euthyrox tab 125mcg</i>	279
<i>eszopiclone tab 3 mg</i>	216	<i>euthyrox tab 137mcg</i>	279
<i>ethacrynate sodium for inj 50 mg</i>	185	<i>euthyrox tab 150mcg</i>	279
<i>ethacrynic acid tab 25 mg</i>	185	<i>euthyrox tab 175mcg</i>	279
<i>ethambutol hcl tab 100 mg</i>	101	<i>euthyrox tab 200mcg</i>	279
<i>ethambutol hcl tab 400 mg</i>	101	<i>euthyrox tab 25mcg</i>	279
ETHAMOLIN INJ 5%	243	<i>euthyrox tab 50mcg</i>	279
<i>ethosuximide cap 250 mg</i>	68	<i>euthyrox tab 75mcg</i>	279
<i>ethosuximide soln 250 mg/5ml</i>	68	<i>euthyrox tab 88mcg</i>	279
ETHYL CHLOR AER FINE PIN	174	EVAMIST SPR 1.53MG.....	196
ETHYL CHLOR AER FN STRM	174	EVEKEO ODT TAB 10MG	13
ETHYL CHLOR AER MED JET	174	EVEKEO ODT TAB 15MG.....	13
ETHYL CHLOR AER MED STRM	174	EVEKEO ODT TAB 20MG.....	13
ETHYL CHLOR AER MIST	174	EVEKEO ODT TAB 5MG	13
<i>ethyl chloride aerosol spray</i>	174	EVEKEO TAB 10MG	13
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	151	EVEKEO TAB 5MG	13
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	151	EVENCARE + TES BLD GLUC	181
<i>etodolac cap 200 mg</i>	27	EVENCARE G2 TES.....	181
<i>etodolac cap 300 mg</i>	27	EVENCARE G3 TES.....	181
<i>etodolac tab 400 mg</i>	27	EVENCARE TES BLD GLUC	181
<i>etodolac tab 500 mg</i>	27	EVENCARE TES MINI	181
<i>etodolac tab er 24hr 400 mg</i>	27	EVENITY INJ 105MG	187
<i>etodolac tab er 24hr 500 mg</i>	27	<i>everolimus tab 0.25 mg</i>	241
<i>etodolac tab er 24hr 600 mg</i>	27	<i>everolimus tab 0.5 mg</i>	240
		<i>everolimus tab 0.75 mg</i>	241
		<i>everolimus tab 1 mg</i>	241
		<i>everolimus tab 10 mg</i>	113
		<i>everolimus tab 2.5 mg</i>	112
		<i>everolimus tab 5 mg</i>	112

<i>everolimus tab 7.5 mg</i>	113
<i>everolimus tab for oral susp 2 mg</i>	113
<i>everolimus tab for oral susp 3 mg</i>	113
<i>everolimus tab for oral susp 5 mg</i>	113
EVERSENSE MIS SENSOR	225
EVERSENSE MIS TRANSMTR	225
EVERSENSE365 MIS SENSOR	225
EVERSENSE365 MIS TRANSMTR	225
EVISTA TAB 60MG	189
EVKEEZA INJ 1200/8	88
EVKEEZA INJ 345/2.3	88
EVOCLIN AER 1%	162
EVOLUTION TES AUTOCODE	181
EVOMELA INJ 50MG	102
EVOTAZ TAB 300-150	131
EVOXAC CAP 30MG	244
EVRYSDI SOL	253
EVUSHELD SOL	264
EXACTECH TES	181
EXACTECH TES R-S-G	181
EXELDERM CRE 1%	164
EXELDERM SOL 1%	164
EXELON DIS 13.3/24	268
EXELON DIS 4.6MG/24	268
EXELON DIS 9.5MG/24	268
<i>exemestane tab 25 mg</i>	109
EXFORGE TAB 10-160MG	97
EXFORGE TAB 10-320MG	97
EXFORGE TAB 5-160MG	97
EXFORGE TAB 5-320MG	97
EXFORGEH/10- TAB 160-12.5	97
EXFORGEH/10- TAB 160-25	97
EXFORGEH/10- TAB 320-25	97
EXFORGEH/5- TAB 160-12.5	97
EXFORGEH/5- TAB 160-25	97
EXJADE TAB 125MG	82
EXJADE TAB 250MG	82
EXJADE TAB 500MG	82
EXONDYS 51 SOL 100/2ML	252
EXONDYS 51 SOL 500/10ML	252
EXPAREL INJ 1.3%	219
EXTAVIA INJ 0.3MG	270
EXTENCILLINE INJ 1200000	265
EXTENCILLINE INJ 2400000	265

EXTINA AER 2%	165
EXTRANEAL SOL	242
EYLEA INJ 2/0.05ML	256
EYSUVIS DRO 0.25%	259
E-Z JECT MIS 21G	225
E-Z JECT MIS 21G COLR	225
E-Z JECT MIS 30G	225
E-Z JECT MIS 32G COLR	225
E-Z JECT MIS LANC 21G	225
E-Z JECT MIS THIN 26G	225
EZ SMART PLS TES BLD GLUC	181
EZ SMART TES BLD GLUC	181
EZALLOR SPR CAP 10MG	90
EZALLOR SPR CAP 20MG	90
EZALLOR SPR CAP 40MG	90
EZALLOR SPR CAP 5MG	90
<i>ezetimibe tab 10 mg</i>	91
<i>ezetimibe-simvastatin tab 10-10 mg</i>	88
<i>ezetimibe-simvastatin tab 10-20 mg</i>	88
<i>ezetimibe-simvastatin tab 10-40 mg</i>	88
<i>ezetimibe-simvastatin tab 10-80 mg</i>	88
E-ZJECT LANC MIS 33G	225
EZ-LETS 21G MIS LANCETS	225
EZ-LETS 26G MIS LANCETS	225
EZ-LETS 28G MIS LANCETS	225
EZ-LETS 30G MIS LANCETS	225

F

<i>fa-8 cap 800mcg</i>	211
FABHALTA CAP 200MG	209
FABIOR AER 0.1%	162
FABRAZYME INJ 35MG	191
FABRAZYME INJ 5MG	191
<i>falmina tab</i>	151
<i>famciclovir tab 125 mg</i>	135
<i>famciclovir tab 250 mg</i>	135
<i>famciclovir tab 500 mg</i>	135
<i>famotidine for susp 40 mg/5ml</i>	284
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	284
<i>famotidine inj 200 mg/20ml</i>	284
<i>famotidine inj 40 mg/4ml</i>	284
<i>famotidine preservative free inj 20 mg/2ml</i>	284
<i>famotidine tab 20 mg</i>	284

<i>famotidine tab 40 mg</i>	284	<i>fenofibrate cap 150 mg</i>	89
FANAPT PAK.....	124	<i>fenofibrate cap 50 mg</i>	89
FANAPT TAB 10MG.....	124	<i>fenofibrate micronized cap 130 mg</i>	89
FANAPT TAB 12MG.....	124	<i>fenofibrate micronized cap 134 mg</i>	89
FANAPT TAB 1MG	124	<i>fenofibrate micronized cap 200 mg</i>	89
FANAPT TAB 2MG.....	124	<i>fenofibrate micronized cap 30 mg</i>	89
FANAPT TAB 4MG	124	<i>fenofibrate micronized cap 43 mg</i>	89
FANAPT TAB 6MG	124	<i>fenofibrate micronized cap 67 mg</i>	89
FANAPT TAB 8MG	124	<i>fenofibrate micronized cap 90 mg</i>	89
FANTASY LUBR MIS	222	<i>fenofibrate tab 120 mg</i>	89
FANTASY LUBR MIS COLORS.....	222	<i>fenofibrate tab 145 mg</i>	89
FANTASY LUBR MIS SPERMICI.....	222	<i>fenofibrate tab 160 mg</i>	89
FANTASY MIS LUBRICAT	222	<i>fenofibrate tab 40 mg</i>	89
FARESTON TAB 60MG.....	109	<i>fenofibrate tab 48 mg</i>	89
FARXIGA TAB 10MG.....	81	<i>fenofibrate tab 54 mg</i>	89
FARXIGA TAB 5MG	81	<i>fenofibric acid tab 35 mg</i>	89
FARYDAK CAP 10MG.....	113	FENOGLIDE TAB 120MG.....	89
FARYDAK CAP 15MG.....	113	FENOGLIDE TAB 40MG	89
FARYDAK CAP 20MG.....	113	<i>fenopropfen calcium cap 400 mg</i>	27
FASENRA INJ 10MG/0.5	53	<i>fenopropfen calcium tab 600 mg</i>	27
FASENRA INJ 30MG/ML.....	53	FENOPROPFEN CAP 200MG	27
FASENRA PEN INJ 30MG/ML	53	FENSOLVI INJ 45MG.....	190
FASLODEX INJ 250/5ML	109	FENT/ROPIVAC INJ 0.4/200.....	39
FASTCLIX MIS LANCETS	225	FENT/ROPIVAC INJ NACL	39
FC2 FEMALE MIS CONDOM	222	FENTANYL CIT INJ 100MCG.....	33
<i>febuxostat tab 40 mg</i>	204	FENTANYL CIT INJ 250MCG.....	33
<i>febuxostat tab 80 mg</i>	204	FENTANYL CIT INJ 50MCG/ML.....	33
FEIBA INJ.....	206	FENTANYL CIT INJ BUPIVACA.....	39
<i>felbamate susp 600 mg/5ml</i>	66	FENTANYL CIT SOL 10MCG/ML	33
<i>felbamate tab 400 mg</i>	66	<i>fantanyl citrate buccal tab 200 mcg (base</i> <i>equiv)</i>	33
<i>felbamate tab 600 mg</i>	66	<i>fantanyl citrate buccal tab 400 mcg (base</i> <i>equiv)</i>	33
FELBATOL TAB 400MG.....	67	<i>fantanyl citrate buccal tab 600 mcg (base</i> <i>equiv)</i>	33
FELBATOL TAB 600MG.....	67	<i>fantanyl citrate buccal tab 800 mcg (base</i> <i>equiv)</i>	33
<i>felodipine tab er 24hr 10 mg</i>	140	<i>fantanyl citrate lozenge on a handle 1600</i> <i>mcg</i>	33
<i>felodipine tab er 24hr 2.5 mg</i>	140	<i>fantanyl citrate lozenge on a handle 200</i> <i>mcg</i>	33
<i>felodipine tab er 24hr 5 mg</i>	140	<i>fantanyl citrate lozenge on a handle 400</i> <i>mcg</i>	33
FEMARA TAB 2.5MG.....	109		
FEMCAP MIS 22MM.....	222		
FEMCAP MIS 26MM.....	222		
FEMCAP MIS 30MM	222		
FEMLYV TAB 1/0.02MG	151		
FEMRING MIS 0.05/24H	290		
FEMRING MIS 0.1MG/24	290		
<i>femynor tab 0.25-35</i>	151		

<i>fentanyl citrate lozenge on a handle 600 mcg</i>	33	FETZIMA CAP 40MG.....	72
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	33	FETZIMA CAP 80MG.....	72
<i>fentanyl citrate pf soln prefilled syringe 50 mcg/ml</i>	33	FETZIMA CAP TITRATIO.....	72
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	33	<i>fexmid tab 7.5mg</i>	250
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	33	FIASP FLEX INJ TOUCH.....	79
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	33	FIASP INJ 100/ML	79
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	34	FIASP PENFIL INJ U-100.....	79
<i>fentanyl citrate preservative free (pf) inj 50 mcg/ml</i>	33	FIBRICOR TAB 105MG	89
<i>fentanyl citrate preservative free (pf) inj 500 mcg/10ml</i>	33	FIBRICOR TAB 35MG	89
FENTANYL INJ 50MCG/ML.....	34	FIBRYGA INJ 1GM.....	206
<i>fentanyl td patch 72hr 100 mcg/hr</i>	34	FIFTY50 GLUC TES 2.0	181
<i>fentanyl td patch 72hr 12 mcg/hr</i>	34	FIFTY50 SAFE MIS LANCETS	226
<i>fentanyl td patch 72hr 25 mcg/hr</i>	34	FILSUVEZ GEL 10%.....	177
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	34	FINACEA AER 15%.....	176
<i>fentanyl td patch 72hr 50 mcg/hr</i>	34	FINACEA GEL 15%.....	176
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	34	<i>finasteride tab 5 mg</i>	204
<i>fentanyl td patch 72hr 75 mcg/hr</i>	34	FINGERSTIX MIS LANCETS.....	226
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	34	<i>finolimod hcl cap 0.5 mg (base equiv)</i> .	270
FENTNYL/NACL INJ 1000/50	34	FINTEPLA SOL 2.2MG/ML	62
FERAHEME INJ 510/17ML.....	214	<i>finzala chw fe 1/20</i>	151
<i>ferotinsic cap</i>	214	FIORICET CAP.....	31
FERPRX 2-DAY TAB 1000MG	82	FIORICET CAP CODEINE	39
<i>ferric citrate tab 1 gm (210 mg ferric iron)</i>	201	FIRAZYR INJ 30MG/3ML.....	209
FERRIPROX SOL 100MG/ML	82	FIRDAPSE TAB 10MG	100
FERRIPROX TAB 1000MG	82	FIRMAGON INJ 120MG.....	109
FERRIPROX TAB 500MG.....	82	FIRMAGON INJ 80MG	109
FERRLECIT INJ 12.5MG/M	214	FIRST-METRON SUS 100MG/ML	44
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml) (elemental fe)</i>	214	FIRVANQ SOL 25MG/ML	45
<i>fesoterodine fumarate tab er 24hr 4 mg</i> 287		FIRVANQ SOL 50MG/ML	45
<i>fesoterodine fumarate tab er 24hr 8 mg</i> 287		<i>flac oil 0.01%</i>	262
FETROJA INJ 1GM.....	149	FLAGYL CAP 375MG.....	44
FETZIMA CAP 120MG	72	FLAREX SUS 0.1% OP	259
FETZIMA CAP 20MG.....	72	<i>flavoxate hcl tab 100 mg</i>	287
		<i>flecainide acetate tab 100 mg</i>	52
		<i>flecainide acetate tab 150 mg</i>	52
		<i>flecainide acetate tab 50 mg</i>	52
		FLECTOR DIS 1.3%	164
		FLEQSUVY SUS 25MG/5ML.....	250
		FLOLAN INJ 0.5MG	145
		FLOLAN INJ 1.5MG.....	145
		FLOLIPID SUS 20MG/5ML	90
		FLOLIPID SUS 40MG/5ML	90
		FLOMAX CAP 0.4MG	204
		FLORIVA CHW 0.25MG	246

FLORIVA CHW 0.5MG	246	fluocinolone acetonide (otic) oil 0.01% ..	262
FLORIVA CHW 1MG	246	fluocinolone acetonide cream 0.01%	171
FLORIVA DRO 0.25MG	236	fluocinolone acetonide cream 0.025% ...	171
FLORIVA DRO PLUS.....	245	fluocinolone acetonide oil 0.01% (body oil)	
FLOVENT DISK AER 100MCG.....	54	.....	171
FLOVENT DISK AER 250MCG	54	fluocinolone acetonide oil 0.01% (scalp oil)	
FLOVENT DISK AER 50MCG.....	54	.....	171
FLOVENT HFA AER 110MCG.....	54	fluocinolone acetonide oint 0.025%	171
FLOVENT HFA AER 220MCG.....	54	fluocinolone acetonide soln 0.01%	171
FLOVENT HFA AER 44MCG.....	54	fluocinonide cream 0.05%	171
floxuridine for inj 0.5 gm	103	fluocinonide cream 0.1%	171
FLUAD INJ 2024-25	288	fluocinonide emulsified base cream 0.05%	
FLUAD QUADRI INJ 2022-23.....	288	.....	171
FLUARIX INJ 2024-25.....	288	fluocinonide gel 0.05%	171
FLUARIX QUAD INJ 2022-23	288	fluocinonide oint 0.05%	171
FLUBLOK INJ 2024-25	288	fluocinonide soln 0.05%	171
FLUBLOK QUAD INJ 2022-23.....	288	FLUORE/BENOX SOL 0.3-0.4%	261
FLUCELVAX INJ 2024-25.....	288	fluorescein sodium iv soln 10%	261
FLUCLVX QUAD INJ 2022-23.....	288	fluorescein w/ benoxinate ophth soln 0.25-	
fluconazole for susp 10 mg/ml.....	86	0.4%	261
fluconazole for susp 40 mg/ml.....	86	fluorescein w/ proparacaine ophth soln	
fluconazole in nacl 0.9% inj 200 mg/100ml		0.25-0.5%	261
.....	86	FLUORESCITE INJ 10% OP.....	261
fluconazole in nacl 0.9% inj 400 mg/200ml		FLUOR-I-STRI TES 1MG OP	261
.....	86	fluoritab dro 0.125mg	236
FLUCONAZOLE SOL /NACL	86	fluorometholone ophth susp 0.1%	259
fluconazole tab 100 mg.....	86	fluorouracil cream 0.5%	165
fluconazole tab 150 mg	86	fluorouracil cream 5%	165
fluconazole tab 200 mg	86	fluorouracil iv soln 1 gm/20ml (50 mg/ml)	
fluconazole tab 50 mg	86	.....	103
flucytosine cap 250 mg	86	fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)	
flucytosine cap 500 mg	86	.....	103
fludarabine phosphate for inj 50 mg.....	103	fluorouracil iv soln 5 gm/100ml (50 mg/ml)	
fludarabine phosphate inj 25 mg/ml.....	103	.....	104
fludrocortisone acetate tab 0.1 mg	159	fluorouracil iv soln 500 mg/10ml (50	
FLULAVAL INJ 2024-25	288	mg/ml).....	104
FLULAVAL QUA INJ 2022-23	288	fluorouracil soln 2%.....	166
flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)		fluorouracil soln 5%	166
.....	83	fluoxetine hcl cap 10 mg	70
flumazenil iv soln 1 mg/10ml (0.1 mg/ml) .	83	fluoxetine hcl cap 20 mg	70
FLUMIST NASA LIQ 2024-25.....	288	fluoxetine hcl cap 40 mg	70
FLUMIST QUAD SUS 2022-23	288	fluoxetine hcl cap delayed release 90 mg	70
flunisolide nasal soln 25 mcg/act (0.025%)		fluoxetine hcl solution 20 mg/5ml.....	70
.....	252	fluoxetine hcl tab 10 mg	70

<i>fluoxetine hcl tab 20 mg</i>	70
<i>fluoxetine hcl tab 60 mg</i>	70
FLUOXETINE TAB 60MG	70
<i>fluphenazine decanoate inj 25 mg/ml</i>	128
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	128
<i>fluphenazine hcl inj 2.5 mg/ml</i>	128
<i>fluphenazine hcl oral conc 5 mg/ml</i>	128
<i>fluphenazine hcl tab 1 mg</i>	128
<i>fluphenazine hcl tab 10 mg</i>	128
<i>fluphenazine hcl tab 2.5 mg</i>	128
<i>fluphenazine hcl tab 5 mg</i>	128
<i>flurandrenolide cream 0.05%</i>	171
<i>flurandrenolide lotion 0.05%</i>	171
<i>flurandrenolide oint 0.05%</i>	171
FLURA-SAFE SOL	261
<i>flurazepam hcl cap 15 mg</i>	216
<i>flurazepam hcl cap 30 mg</i>	216
<i>flurbiprofen sodium ophth soln 0.03%</i>	261
<i>flurbiprofen tab 100 mg</i>	27
<i>flurbiprofen tab 50 mg</i>	27
<i>flutamide cap 125 mg</i>	109
<i>fluticasone furoate-vilanterol aero powd ba</i> <i>200-25 mcg/act</i>	56
<i>fluticasone propionate aer pow ba 100</i> <i>mcg/act</i>	54
<i>fluticasone propionate aer pow ba 250</i> <i>mcg/act</i>	54
<i>fluticasone propionate aer pow ba 50</i> <i>mcg/act</i>	54
<i>fluticasone propionate cream 0.05%</i>	171
<i>fluticasone propionate hfa inhal aer 110</i> <i>mcg/act</i>	54
<i>fluticasone propionate hfa inhal aer 220</i> <i>mcg/act</i>	54
<i>fluticasone propionate hfa inhal aero 44</i> <i>mcg/act</i>	54
<i>fluticasone propionate lotion 0.05%</i>	171
<i>fluticasone propionate nasal susp 50</i> <i>mcg/act</i>	252
<i>fluticasone propionate oint 0.005%</i>	171
<i>fluticasone-salmeterol aer powder ba 100-</i> <i>50 mcg/act</i>	56
<i>fluticasone-salmeterol aer powder ba 250-</i> <i>50 mcg/act</i>	56

<i>fluticasone-salmeterol aer powder ba 500-</i> <i>50 mcg/act</i>	56
<i>fluticasone-salmeterol inhal aerosol 115-21</i> <i>mcg/act</i>	56
<i>fluticasone-salmeterol inhal aerosol 230-21</i> <i>mcg/act</i>	56
<i>fluticasone-salmeterol inhal aerosol 45-21</i> <i>mcg/act</i>	56
<i>fluvastatin sodium cap 20 mg (base</i> <i>equivalent)</i>	90
<i>fluvastatin sodium cap 40 mg (base</i> <i>equivalent)</i>	90
<i>fluvastatin sodium tab er 24 hr 80 mg (base</i> <i>equivalent)</i>	90
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	70
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	70
<i>fluvoxamine maleate tab 100 mg</i>	70
<i>fluvoxamine maleate tab 25 mg</i>	70
<i>fluvoxamine maleate tab 50 mg</i>	70
FLUZONE HD INJ 2024-25	288
FLUZONE INJ 2024-25	289
FML FORTE SUS 0.25% OP	259
FML LIQUIFLM SUS 0.1% OP	259
FML OIN 0.1% OP	259
FOCALIN TAB 10MG.....	17
FOCALIN TAB 2.5MG	17
FOCALIN TAB 5MG	17
FOCALIN XR CAP 10MG	17
FOCALIN XR CAP 15MG	17
FOCALIN XR CAP 20MG.....	17
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FOCALIN XR CAP 35MG.....	17
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<i>folate tab 400mcg</i>	211
FOLET DHA PAK	246
FOLET ONE CAP 38-1-225	246
<i>folic acid cap 0.8 mg</i>	212
<i>folic acid inj 5 mg/ml</i>	212
<i>folic acid tab 1 mg</i>	212
<i>folic acid tab 400 mcg</i>	212
<i>folic acid tab 800mcg</i>	212

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FOLLISTIM AQ INJ 300UNIT	188	FOSAMAX + D TAB 70-2800	187
FOLLISTIM AQ INJ 600UNIT	188	FOSAMAX + D TAB 70-5600	187
FOLLISTIM AQ INJ 900UNIT	188	FOSAMAX TAB 70MG.....	187
FOLOTYN INJ 20MG/ML	104	<i>fosamprenavir calcium tab 700 mg (base</i>	
FOLOTYN INJ 40MG/2ML	104	<i>equiv)</i>	131
<i>foltrin cap</i>	214	<i>fosaprepitant dimeglumine for iv infusion</i>	
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	83	<i>150 mg (base eq)</i>	85
<i>fondaparinux sodium subcutaneous inj 10</i>		<i>foscarnet sodium inj 6000 mg/250ml (24</i>	
<i>mg/0.8ml</i>	59	<i>mg/ml)</i>	133
<i>fondaparinux sodium subcutaneous inj 2.5</i>		FOSCAVIR INJ 24MG/ML.....	133
<i>mg/0.5ml</i>	59	<i>fosfomycin tromethamine powd pack 3 gm</i>	
<i>fondaparinux sodium subcutaneous inj 5</i>		<i>(base equivalent)</i>	48
<i>mg/0.4ml</i>	59	<i>fosinopril sodium & hydrochlorothiazide tab</i>	
<i>fondaparinux sodium subcutaneous inj 7.5</i>		<i>10-12.5 mg</i>	97
<i>mg/0.6ml</i>	59	<i>fosinopril sodium & hydrochlorothiazide tab</i>	
FORA BLOOD TES GLUCOSE	181	<i>20-12.5 mg</i>	97
FORA D15G TES BLD GLUC	181	<i>fosinopril sodium tab 10 mg</i>	92
FORA D20 TES BLD GLUC	181	<i>fosinopril sodium tab 20 mg</i>	92
FORA D40/G31 TES GLUCOSE.....	181	<i>fosinopril sodium tab 40 mg</i>	92
FORA G20 TES BLD GLUC	181	<i>fosphenytoin sodium inj 100 mg/2ml</i>	
FORA G30/V10 TES BLD GLUC	181	<i>(phenytoin equiv)</i>	67
FORA GD20 TES BLD GLUC.....	181	<i>fosphenytoin sodium inj 500 mg/10ml</i>	
FORA GD50 TES	181	<i>(phenytoin equiv)</i>	67
FORA LANCETS MIS 30G.....	226	FOSRENOL CHW 1000MG	201
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FORA V10 TES BLD GLUC	181	FOSRENOL POW 1000MG	201
FORA V12 TES BLD GLUC.....	181	FOSRENOL POW 750MG	201
FORA V20 TES BLD GLUC.....	181	FOTIVDA CAP 0.89MG	113
FORA V30A TES BLD GLUC	181	FOTIVDA CAP 1.34MG	113
FORACARE TES GD40	181	FRAGMIN INJ 10000/ML	59
FORACARE TES PREM V10	181	FRAGMIN INJ 12500UNT.....	59
FORACARE TES TST N GO	181	FRAGMIN INJ 15000UNT	59
FORANE SOL.....	202	FRAGMIN INJ 18000UNT	59
FORFIVO XL TAB 450MG	69	FRAGMIN INJ 2500/0.2	59
FORMALDEHYDE SOL 37%	130	FRAGMIN INJ 2500/ML	59
<i>formaldehyde solution 10%</i>	130	FRAGMIN INJ 5000/0.2	59
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>		FRAGMIN INJ 7500/0.3	59
.....	56	FRAGMIN INJ 95000UNT	59
FORTAMET TAB 1000MG	76	FREE LIBRE2 KIT PLUS/SEN	226
FORTAMET TAB 500MG	76	FREESTY LIBR KIT 2 SENSOR	226

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FREESTYLE TES LITE	181
FREESTYLE TES PREC NEO	181
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<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	<i>233</i>
FRUZAQLA CAP 1MG.....	105
FRUZAQLA CAP 5MG	105
<i>ft aspirin chw 81mg</i>	<i>32</i>
<i>ft aspirin tab 81mg</i>	<i>32</i>
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<i>hydrochlorothiazide cap 12.5 mg</i>	186	<i>mg</i>	39
<i>hydrochlorothiazide tab 12.5 mg</i>	186	<i>hydrocodone-acetaminophen tab 5-325</i>	
<i>hydrochlorothiazide tab 25 mg</i>	186	<i>mg</i>	39
<i>hydrochlorothiazide tab 50 mg</i>	186	<i>hydrocodone-acetaminophen tab 7.5-300</i>	
<i>hydrocod polst-chlorphen polst er susp 10-</i>		<i>mg</i>	39
<i>8 mg/5ml</i>	160	<i>hydrocodone-acetaminophen tab 7.5-325</i>	
<i>hydrocodone bitart-homatropine</i>		<i>mg</i>	39
<i>methylbrom soln 5-1.5 mg/5ml</i>	159	<i>hydrocodone-ibuprofen tab 10-200 mg</i> ...	40
<i>hydrocodone bitart-homatropine</i>		<i>hydrocodone-ibuprofen tab 5-200 mg</i>	40
<i>methylbromide tab 5-1.5 mg</i>	160	<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> .	40
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	34	<i>hydrocortisone acetate w/ pramoxine</i>	
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	34	<i>perianal cream 1-1%</i>	43
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>		<i>hydrocortisone butyrate cream 0.1%</i>	171
.....	34	<i>hydrocortisone butyrate hydrophilic lipo</i>	
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>		<i>base cream 0.1%</i>	171
.....	34	<i>hydrocortisone butyrate lotion 0.1%</i>	171
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>		<i>hydrocortisone butyrate oint 0.1%</i>	171
.....	34	<i>hydrocortisone butyrate soln 0.1%</i>	171
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>		<i>hydrocortisone cream 1%</i>	171
.....	34	<i>hydrocortisone cream 2.5%</i>	171
<i>hydrocodone bitartrate tab er 24hr deter</i>		<i>hydrocortisone enema 100 mg/60ml</i>	43
<i>100 mg</i>	34	<i>hydrocortisone lotion 2.5%</i>	171
<i>hydrocodone bitartrate tab er 24hr deter</i>		<i>hydrocortisone oint 1%</i>	172
<i>120 mg</i>	34	<i>hydrocortisone oint 2.5%</i>	172
<i>hydrocodone bitartrate tab er 24hr deter 20</i>		<i>hydrocortisone perianal cream 1%</i>	43
<i>mg</i>	34	<i>hydrocortisone perianal cream 2.5%</i>	43
<i>hydrocodone bitartrate tab er 24hr deter 30</i>		<i>hydrocortisone sodium succinate pf for inj</i>	
<i>mg</i>	34	<i>100 mg</i>	157
<i>hydrocodone bitartrate tab er 24hr deter 40</i>		<i>hydrocortisone tab 10 mg</i>	157
<i>mg</i>	34	<i>hydrocortisone tab 20 mg</i>	157
<i>hydrocodone bitartrate tab er 24hr deter 60</i>		<i>hydrocortisone tab 5 mg</i>	157
<i>mg</i>	34	<i>hydrocortisone valerate cream 0.2%</i>	172
<i>hydrocodone bitartrate tab er 24hr deter 80</i>		<i>hydrocortisone valerate oint 0.2%</i>	172
<i>mg</i>	34	HYDROFERA PAD BLUE 2X2.....	178
<i>hydrocodone-acetaminophen soln 10-325</i>		HYDROFERA PAD BLUE 4X4	178
<i>mg/15ml</i>	39	HYDROFERA PAD BLUE 6X6	178
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HYDROFERA PAD MRF 2.5	178	<i>hydroxyzine pamoate cap 50 mg</i>	49
HYDROFERA PAD MRF4	178	HYFTOR GEL 0.2%	173
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<i>hydrogen peroxide soln 30%</i>	130	HYLAZINC TAB	245
<i>hydromet syp 5-1.5/5</i>	160	HYLENEX INJ 150 UNIT	239
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HYDROMO/NACL INJ 2MG/ML	34	<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	283
HYDROMORPHON INJ 0.2MG/ML.....	34	<i>hyoscyamine sulfate sl tab 0.125 mg</i>	283
HYDROMORPHON INJ 10MG/ML	34	<i>hyoscyamine sulfate soln 0.125 mg/ml</i> ..	283
HYDROMORPHON INJ 1MG/ML.....	34	<i>hyoscyamine sulfate tab 0.125 mg</i>	283
HYDROMORPHON INJ 2MG/ML	34	<i>hyoscyamine sulfate tab disint 0.125 mg</i>	283
HYDROMORPHON INJ 30/30ML	34	<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	283
HYDROMORPHON INJ 4MG/ML.....	34	<i>hyosyne dro 0.125/ml</i>	283
HYDROMORPHON SOL 0.2MG/ML	34	<i>hyosyne elx 0.125/5</i>	283
<i>hydromorphone hcl inj 0.2 mg/ml</i>	34	HYPERHEP B INJ	264
<i>hydromorphone hcl inj 1 mg/ml</i>	34	HYPERRAB INJ 1500UNIT	264
<i>hydromorphone hcl inj 2 mg/ml</i>	34	HYPERRAB INJ 300UNIT	264
<i>hydromorphone hcl liqd 1 mg/ml</i>	34	HYPERRHO S/D INJ 300MCG.....	264
<i>hydromorphone hcl preservative free (pf)</i> <i>inj 10 mg/ml</i>	34	HYPERRHO S/D INJ 50MCG	264
<i>hydromorphone hcl tab 2 mg</i>	34	HYPERSAL NEB 3.5%	160
<i>hydromorphone hcl tab 4 mg</i>	35	HYPERSAL NEB 7%.....	160
<i>hydromorphone hcl tab 8 mg</i>	35	HYPERTET INJ 250/ML	264
<i>hydromorphone hcl tab er 24hr 12 mg</i>	35	HYPOCYN SOL 0.012%	176
<i>hydromorphone hcl tab er 24hr 16 mg</i>	35	HYQVIA INJ 10-800.....	264
<i>hydromorphone hcl tab er 24hr 32 mg</i>	35	HYQVIA INJ 2.5-200	264
<i>hydromorphone hcl tab er 24hr 8 mg</i>	35	HYQVIA INJ 20-1600	264
<i>hydroxocobalamin acetate inj 1000 mcg/ml</i> <i>(base equivalent)</i>	211	HYQVIA INJ 30-2400.....	264
<i>hydroxychloroquine sulfate tab 100 mg</i> . 100		HYQVIA INJ 5-400	264
<i>hydroxychloroquine sulfate tab 200 mg</i> 100		HYRIMOZ INJ 10/0.1ML.....	21
<i>hydroxychloroquine sulfate tab 300 mg</i> 100		HYRIMOZ INJ 20/0.2ML.....	22
<i>hydroxychloroquine sulfate tab 400 mg</i> 100		HYRIMOZ INJ 40/0.4ML	22
<i>hydroxyprogesterone caproate im in oil 250</i> <i>mg/ml</i>	267	HYRIMOZ INJ 40/0.8ML	22
<i>hydroxyurea cap 500 mg</i>	117	HYRIMOZ INJ 80/0.8ML	22
<i>hydroxyzine hcl im soln 25 mg/ml</i>	49	HYRIMOZ SENS INJ 80/0.8ML.....	22
<i>hydroxyzine hcl im soln 50 mg/ml</i>	49	HYRIMOZ-CROH INJ UC SP	23
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	49	HYRIMOZ-PED INJ CROHNS.....	23
<i>hydroxyzine hcl tab 10 mg</i>	49	HYRIMOZ-PLAQ INJ PSOR/UVE	23
<i>hydroxyzine hcl tab 25 mg</i>	49	HYRIMOZ-PLAQ INJ PSORIASI	23
<i>hydroxyzine hcl tab 50 mg</i>	49	HYSINGLA ER TAB 100 MG	35
<i>hydroxyzine pamoate cap 100 mg</i>	49	HYSINGLA ER TAB 120 MG	35
<i>hydroxyzine pamoate cap 25 mg</i>	49	HYSINGLA ER TAB 20 MG.....	35
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<i>ibandronate sodium tab 150 mg (base equivalent)</i>	187
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<i>ibu tab 400mg</i>	27
<i>ibu tab 600mg</i>	27
<i>ibu tab 800mg</i>	27
<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	27
<i>ibuprofen susp 100 mg/5ml</i>	27
<i>ibuprofen tab 400 mg</i>	27
<i>ibuprofen tab 600 mg</i>	27
<i>ibuprofen tab 800 mg</i>	27
<i>ibuprofen-famotidine tab 800-26.6 mg ...</i>	27
<i>ibutilide fumarate inj 1 mg/10ml</i>	52
ICAR-C PLUS TAB	214
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	209
<i>iclevia tab</i>	151
ICLUSIG TAB 10MG	113
ICLUSIG TAB 15MG	113
ICLUSIG TAB 30MG	113
ICLUSIG TAB 45MG	113
<i>icosapent ethyl cap 0.5 gm</i>	88
<i>icosapent ethyl cap 1 gm</i>	88
IDACIO 2-PEN INJ 40/0.8ML	23
IDACIO 2-SYR INJ 40/0.8ML	23
IDAMYCIN PFS INJ 10/10ML	111
IDAMYCIN PFS INJ 20/20ML	111
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<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	111
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	111
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml) ...</i>	111
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<i>imipramine hcl tab 50 mg</i>	73	INDOCIN SUP 50MG	27
<i>imipramine pamoate cap 100 mg</i>	73	INDOCIN SUS 25MG/5ML.....	27
<i>imipramine pamoate cap 125 mg</i>	73	<i>indomethacin cap 25 mg</i>	27
<i>imipramine pamoate cap 150 mg</i>	73	<i>indomethacin cap 50 mg</i>	27
<i>imipramine pamoate cap 75 mg</i>	73	<i>indomethacin cap er 75 mg</i>	27
<i>imiquimod cream 3.75%</i>	173	<i>indomethacin sodium iv for soln 1 mg</i>	27
<i>imiquimod cream 5%</i>	173	INDOMETHACIN SUP 100MG.....	27
IMITREX INJ 4MG/0.5	233	<i>indomethacin suppos 50 mg</i>	27
IMITREX INJ 6MG/0.5	233	<i>indomethacin susp 25 mg/5ml</i>	27
IMITREX TAB 100MG	233	INFANRIX INJ	282
IMITREX TAB 25MG	233	INFASURF SUS 35MG/ML	276
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IMJUDO INJ 25/1.25	107	INFINITY TES BLD GLUC	182
IMJUDO INJ 300/15ML	107	INFLECTRA INJ 100MG	199
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IMMPHENTIV INJ	291	INFUGEM SOL 1300MG	104
IMOGAM RABIE INJ 300/2ML	264	INFUGEM SOL 1400MG	104
IMOVAX RABIE INJ 2.5/ML.....	289	INFUGEM SOL 1500MG	104
IMPAVIDO CAP 50MG.....	44	INFUGEM SOL 1600MG	104
IMPOYZ CRE 0.025%	172	INFUGEM SOL 1700MG	104
IMUBOLIC CAP	242	INFUGEM SOL 1800MG	104
IMURAN TAB 50MG.....	241	INFUGEM SOL 2000MG	104
IMVEXXY MAIN SUP 10MCG	290	INFUGEM SOL 2200MG.....	104
IMVEXXY MAIN SUP 4MCG.....	290	INFUMORPH INJ 10MG/ML	35
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IMVEXXY STRT SUP 4MCG.....	290	INGREZZA CAP 40-80MG.....	270
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<i>inatal gt tab</i>	247	INGREZZA CAP 80MG	270
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<i>indapamide tab 1.25 mg</i>	186	INQOVI TAB 35-100MG	111
<i>indapamide tab 2.5 mg</i>	186	INREBIC CAP 100MG	113
INDERAL LA CAP 120MG	138	INS ASP PROT INJ FLEXPEN	79
INDERAL LA CAP 160MG	138	INS DEGL FLX INJ 100UNIT	79
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INSPIRA TAB 25MG	99	INVEGA TRINZ INJ 410MG	124
INSPIRA TAB 50MG	99	INVEGA TRINZ INJ 546MG	124
INSULIN DEGL INJ 100UNIT	79	INVEGA TRINZ INJ 819MG	124
INSULIN SYRG MIS 0.3/29G	232	INVELTYS SUS 1%	259
INSULIN SYRG MIS 0.3/30G	232	INVIRASE TAB 500MG	131
INSULIN SYRG MIS 0.3/31G	232	INVOKAMET TAB 150-1000	75
INSULIN SYRG MIS 0.5/28G	232	INVOKAMET TAB 150-500	75
INSULIN SYRG MIS 0.5/29G	232	INVOKAMET TAB 50-1000	75
INSULIN SYRG MIS 0.5/30G	232	INVOKAMET TAB 50-500MG	75
INSULIN SYRG MIS 0.5/31G	232	INVOKAMET XR TAB 150-1000	75
INSULIN SYRG MIS 1ML	232	INVOKAMET XR TAB 150-500	75
INSULIN SYRG MIS 1ML/27G	232	INVOKAMET XR TAB 50-1000	75
INSULIN SYRG MIS 1ML/28G	232	INVOKAMET XR TAB 50-500MG	75
INSULIN SYRG MIS 1ML/29G	232	INVOKANA TAB 100MG	81
INSULIN SYRG MIS 1ML/30G	232	INVOKANA TAB 300MG	81
INSULIN SYRG MIS 1ML/31G	232	INZIRQO SUS 10MG/ML	186
INSULIN SYRG MIS 2/27.5G	232	<i>iodine solution strong 5% (lugol's)</i>	236
INTELENCE TAB 100MG	131	IODINE TIN 2%	130
INTELENCE TAB 200MG	131	<i>iodoquimez cre 1-1.9%</i>	165
INTELENCE TAB 25MG	131	IONOSOL-MB INJ D5W	235
INTERMEZZO SUB 1.75MG	216	IONSYS PAD 40MCG/AC	35
INTERMEZZO SUB 3.5MG	216	<i>iopamidol inj 51%</i>	183
INTRALIPID INJ 20%	254	<i>iopamidol iv soln 61%</i>	183
INTRALIPID INJ 30%	254	<i>iopamidol iv soln 76%</i>	183
INTRAROSA SUP 6.5MG	290	IOPIDINE SOL 1% OP	257
INTRON A INJ 10MU	117	IPOL INJ INACTIVE	289
INTRON A INJ 50MU	117	<i>ipratropium bromide inhal soln 0.02%</i>	53
<i>introvale tab</i>	151	<i>ipratropium bromide nasal soln 0.03% (21</i> <i>mcg/spray)</i>	252
INTUNIV TAB 1MG	15	<i>ipratropium bromide nasal soln 0.06% (42</i> <i>mcg/spray)</i>	252
INTUNIV TAB 2MG	16	<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i> <i>mg/3ml</i>	56
INTUNIV TAB 3MG	16	<i>irbesartan tab 150 mg</i>	94
INTUNIV TAB 4MG	16	<i>irbesartan tab 300 mg</i>	94
INVANZ INJ 1GM	45	<i>irbesartan tab 75 mg</i>	94
INVEGA HAFYE INJ 1092MG	124	<i>irbesartan-hydrochlorothiazide tab 150-12.5</i> <i>mg</i>	97
INVEGA HAFYE INJ 1560MG	124	<i>irbesartan-hydrochlorothiazide tab 300-</i> <i>12.5 mg</i>	97
INVEGA SUST INJ 117/0.75	124	IRESSA TAB 250MG	108
INVEGA SUST INJ 156MG/ML	124	<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	119
INVEGA SUST INJ 234/1.5	124	<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	119
INVEGA SUST INJ 39/0.25	124		
INVEGA SUST INJ 78/0.5ML	124		
INVEGA TAB 3MG	124		
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<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	119
ISENTRESS CHW 100MG	131
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ISENTRESS HD TAB 600MG	131
ISENTRESS POW 100MG	131
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<i>isibloom tab</i>	151
<i>isoflurane inhal soln</i>	202
ISOLYTE-P INJ /D5W	235
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ISOLYTE-S INJ PH 7.4	235
<i>isoniazid inj 100 mg/ml</i>	101
<i>isoniazid syrup 50 mg/5ml</i>	101
<i>isoniazid tab 100 mg</i>	101
<i>isoniazid tab 300 mg</i>	101
<i>isoproterenol hcl inj 0.2 mg/ml</i>	56
ISORDIL TAB 40MG	48
ISORDIL TAB 5MG	48
<i>isosorbide dinitrate tab 10 mg</i>	48
<i>isosorbide dinitrate tab 20 mg</i>	48
<i>isosorbide dinitrate tab 30 mg</i>	48
<i>isosorbide dinitrate tab 40 mg</i>	48
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<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	144
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<i>isotretinoin cap 35 mg</i>	162
<i>isotretinoin cap 40 mg</i>	163
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<i>isradipine cap 5 mg</i>	141
ISTALOL SOL 0.5% OP	255

ISTODAX INJ 10MG	113
ISTURISA TAB 10MG	186
ISTURISA TAB 1MG	186
ISTURISA TAB 5MG	186
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ITOVEBI TAB 9MG	113
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<i>itraconazole oral soln 10 mg/ml</i>	86
<i>ivabradine hcl tab 5 mg (base equiv)</i>	147
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	147
<i>ivermectin cream 1%</i>	176
<i>ivermectin tab 3 mg</i>	43
IVRA INJ 90MG/ML	102
IWILFIN TAB 192MG	118
IXCHIQ INJ	289
IXEMPRA KIT INJ 15MG	119
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IXIARO INJ	289
IXINITY INJ 1000UNIT	207
IXINITY INJ 1500UNIT	207
IXINITY INJ 2000UNIT	207
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JAKAFI TAB 15MG	114
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<i>jasmiel tab 3-0.02mg</i>	151	JYNARQUE PAK 15MG.....	194
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<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	152	<i>levothyroxine sodium cap 50 mcg</i>	279
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<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	152	<i>levothyroxine sodium for iv inj 100 mcg</i>	280
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	152	<i>levothyroxine sodium for iv inj 200 mcg</i>	280
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	152	<i>levothyroxine sodium for iv inj 500 mcg</i>	280
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	152	<i>levothyroxine sodium tab 100 mcg</i>	280
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	152	<i>levothyroxine sodium tab 112 mcg</i>	280
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<i>levorphanol tartrate tab 2 mg</i>	35	<i>levothyroxine sodium tab 150 mcg</i>	280
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<i>levo-t tab 112mcg</i>	279	<i>levothyroxine sodium tab 200 mcg</i>	280
<i>levo-t tab 125mcg</i>	279	<i>levothyroxine sodium tab 25 mcg</i>	280
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<i>levo-t tab 150mcg</i>	279	<i>levothyroxine sodium tab 50 mcg</i>	280
<i>levo-t tab 175mcg</i>	279	<i>levothyroxine sodium tab 75 mcg</i>	280
<i>levo-t tab 200mcg</i>	279	<i>levothyroxine sodium tab 88 mcg</i>	280
<i>levo-t tab 25mcg</i>	279	<i>levoxyl tab 100mcg</i>	280
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<i>levo-t tab 50mcg</i>	279	<i>levoxyl tab 125mcg</i>	280
<i>levo-t tab 75mcg</i>	279	<i>levoxyl tab 137mcg</i>	280
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<i>levothyroxine sodium cap 112 mcg</i>	280	<i>levoxyl tab 75mcg</i>	280
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<i>metformin hcl tab er 24hr 500 mg</i>	77
<i>metformin hcl tab er 24hr 750 mg</i>	77
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	77
<i>metformin hcl tab er 24hr modified release 500 mg</i>	77
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	77
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	77
METHADO/NACL INJ 10MG/ML.....	35
METHADO/NACL INJ 1MG/ML	35
METHADO/NACL INJ 5MG/5ML	35
<i>methadone con 10mg/ml</i>	35
<i>methadone hcl conc 10 mg/ml</i>	35
<i>methadone hcl inj 10 mg/ml</i>	35
<i>methadone hcl soln 10 mg/5ml</i>	35
<i>methadone hcl soln 5 mg/5ml</i>	35
<i>methadone hcl tab 10 mg</i>	35
<i>methadone hcl tab 5 mg</i>	35
<i>methadone hcl tab for oral susp 40 mg</i>	35
METHADONE INJ 10MG/ML.....	35
METHADOSE CON 10MG/ML.....	35
METHADOSE SF CON 10MG/ML	35
<i>methadose tab 40mg</i>	35
<i>methamphetamine hcl tab 5 mg</i>	14
<i>methazolamide tab 25 mg</i>	184
<i>methazolamide tab 50 mg</i>	184
<i>methenamine hippurate tab 1 gm</i>	48
<i>methenamine mandelate tab 0.5 gm</i>	48
<i>methenamine mandelate tab 1 gm</i>	48
<i>methergine tab 0.2mg</i>	262
<i>methimazole tab 10 mg</i>	278
<i>methimazole tab 5 mg</i>	278

methitest tab 10mg 42
methocarbamol inj 1000 mg/10ml 250
methocarbamol tab 500 mg 250
methocarbamol tab 750 mg 250
methotrexate sodium for inj 1 gm..... 104
methotrexate sodium inj 250 mg/10ml (25 mg/ml) 104
methotrexate sodium inj 50 mg/2ml (25 mg/ml) 104
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml) 104
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml) 104
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml) 104
methotrexate sodium tab 2.5 mg (base equiv)..... 104
methoxsalen rapid cap 10 mg 167
methscopolamine bromide tab 2.5 mg ..283
methscopolamine bromide tab 5 mg 284
methsuximide cap 300 mg 68
METHY-BUPIVA SUS 8-5MG/ML.....157
METHYL-BUPIV SUS 40-5MG 157
methyl dopa tab 250 mg 95
methylergonovine maleate inj 0.2 mg/ml 262
methylergonovine maleate tab 0.2 mg ..262
METHYLIN SOL 10MG/5ML..... 18
METHYLIN SOL 5MG/5ML 18
methylphenidate hcl cap er 10 mg (cd) 18
methylphenidate hcl cap er 20 mg (cd) 18
methylphenidate hcl cap er 24hr 10 mg (la) 18
methylphenidate hcl cap er 24hr 10 mg (xr) 18
methylphenidate hcl cap er 24hr 15 mg (xr) 18
methylphenidate hcl cap er 24hr 20 mg (la) 18
methylphenidate hcl cap er 24hr 20 mg (xr) 18
methylphenidate hcl cap er 24hr 30 mg (la) 18

methylphenidate hcl cap er 24hr 30 mg (xr) 18
methylphenidate hcl cap er 24hr 40 mg (la) 18
methylphenidate hcl cap er 24hr 40 mg (xr) 18
methylphenidate hcl cap er 24hr 50 mg (xr) 18
methylphenidate hcl cap er 24hr 60 mg (la) 18
methylphenidate hcl cap er 24hr 60 mg (xr) 18
methylphenidate hcl cap er 30 mg (cd) 18
methylphenidate hcl cap er 40 mg (cd) 18
methylphenidate hcl cap er 50 mg (cd) 18
methylphenidate hcl cap er 60 mg (cd) 18
methylphenidate hcl chew tab 10 mg 18
methylphenidate hcl chew tab 2.5 mg.....18
methylphenidate hcl chew tab 5 mg 18
methylphenidate hcl soln 10 mg/5ml.....18
methylphenidate hcl soln 5 mg/5ml 18
methylphenidate hcl tab 10 mg 18
methylphenidate hcl tab 20 mg 18
methylphenidate hcl tab 5 mg 18
methylphenidate hcl tab er 10 mg 18
methylphenidate hcl tab er 20 mg 18
methylphenidate hcl tab er 24hr 18 mg 18
methylphenidate hcl tab er 24hr 27 mg....18
methylphenidate hcl tab er 24hr 36 mg 18
methylphenidate hcl tab er 24hr 54 mg 18
methylphenidate hcl tab er osmotic release (osm) 18 mg 18
methylphenidate hcl tab er osmotic release (osm) 27 mg.....18
methylphenidate hcl tab er osmotic release (osm) 36 mg 18
methylphenidate hcl tab er osmotic release (osm) 54 mg 18
methylphenidate hcl tab er osmotic release (osm) 72 mg.....19
methylphenidate td patch 10 mg/9hr 19
methylphenidate td patch 15 mg/9hr 19
methylphenidate td patch 20 mg/9hr 19
methylphenidate td patch 30 mg/9hr 19

METHYLPR ACE INJ 40MG/ML	157	<i>metoprolol succinate tab er 24hr 200 mg</i>	
METHYLPR ACE INJ 80MG/ML	158	(tartrate equiv).....	137
METHYLPREDNI INJ 80MG/ML.....	158	<i>metoprolol succinate tab er 24hr 25 mg</i>	
METHYLPREDNI SUS 50MG/ML	158	(tartrate equiv).....	137
<i>methylprednisolone acetate inj susp 40</i>		<i>metoprolol succinate tab er 24hr 50 mg</i>	
<i>mg/ml.....</i>	158	(tartrate equiv).....	137
<i>methylprednisolone acetate inj susp 80</i>		<i>metoprolol tartrate iv soln 5 mg/5ml</i>	137
<i>mg/ml.....</i>	158	<i>metoprolol tartrate tab 100 mg</i>	137
<i>methylprednisolone sod succ for inj 1000</i>		<i>metoprolol tartrate tab 25 mg</i>	137
<i>mg (base equiv)</i>	158	<i>metoprolol tartrate tab 37.5 mg.....</i>	137
<i>methylprednisolone sod succ for inj 125 mg</i>		<i>metoprolol tartrate tab 50 mg</i>	137
<i>(base equiv)</i>	158	<i>metoprolol tartrate tab 75 mg</i>	137
<i>methylprednisolone sod succ for inj 40 mg</i>		METROCREAM CRE 0.75%.....	176
<i>(base equiv)</i>	158	METROGEL GEL 1%.....	176
<i>methylprednisolone sod succ for inj 500 mg</i>		METROLOTION LOT 0.75%	176
<i>(base equiv)</i>	158	METRONIDAZOL INJ 500MG	44
<i>methylprednisolone tab 16 mg</i>	158	<i>metronidazole cap 375 mg.....</i>	44
<i>methylprednisolone tab 32 mg</i>	158	<i>metronidazole cream 0.75%</i>	176
<i>methylprednisolone tab 4 mg</i>	158	<i>metronidazole gel 0.75%</i>	176
<i>methylprednisolone tab 8 mg</i>	158	<i>metronidazole gel 1%.....</i>	176
<i>methylprednisolone tab therapy pack 4 mg</i>		<i>metronidazole iv soln 500 mg/100ml</i>	44
<i>(21)</i>	158	<i>metronidazole lotion 0.75%</i>	176
<i>methyltestosterone cap 10 mg</i>	42	<i>metronidazole tab 250 mg</i>	44
<i>metoclopramide hcl inj 5 mg/ml (base</i>		<i>metronidazole tab 500 mg</i>	44
<i>equivalent)</i>	198	<i>metronidazole vaginal gel 0.75%</i>	290
<i>metoclopramide hcl orally disintegrating</i>		<i>metyrosine cap 250 mg</i>	93
<i>tab 5 mg (base eq).....</i>	198	<i>mexiletine hcl cap 150 mg</i>	52
<i>metoclopramide hcl soln 5 mg/5ml (10</i>		<i>mexiletine hcl cap 200 mg</i>	52
<i>mg/10ml) (base equiv).....</i>	198	<i>mexiletine hcl cap 250 mg</i>	52
<i>metoclopramide hcl tab 10 mg (base</i>		MG SO4/D5W INJ 10MG/ML.....	237
<i>equivalent)</i>	198	MIACALCIN INJ 200/ML	187
<i>metoclopramide hcl tab 5 mg (base</i>		MIACALCIN INJ 400/2ML	187
<i>equivalent)</i>	198	MICAFUNGIN INJ 100MG.....	85
<i>metolazone tab 10 mg.....</i>	186	MICAFUNGIN INJ 50MG	85
<i>metolazone tab 2.5 mg</i>	186	<i>micafungin sodium for iv soln 100 mg</i>	85
<i>metolazone tab 5 mg</i>	186	<i>micafungin sodium for iv soln 50 mg</i>	85
<i>metoprolol & hydrochlorothiazide tab 100-</i>		MICARDIS HCT TAB 40/12.5	98
<i>25 mg</i>	98	MICARDIS HCT TAB 80/12.5	98
<i>metoprolol & hydrochlorothiazide tab 100-</i>		MICARDIS HCT TAB 80-25MG.....	98
<i>50 mg</i>	98	MICARDIS TAB 20MG.....	94
<i>metoprolol & hydrochlorothiazide tab 50-25</i>		MICARDIS TAB 40MG.....	94
<i>mg.....</i>	98	MICARDIS TAB 80MG.....	94
<i>metoprolol succinate tab er 24hr 100 mg</i>		<i>miconazole 3 sup 200mg</i>	290
(tartrate equiv)	137		

<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	165	<i>miglitol tab 25 mg</i>	74
MICORT-HC CRE 2.5%	172	<i>miglitol tab 50 mg</i>	74
MICRHOGAM PL INJ 50MCG	264	<i>miglustat cap 100 mg</i>	211
MICRO THIN MIS LANC 33G	228	MIGRANAL SPR 4MG/ML	233
MICROCYN LIQ	178	<i>mili tab 0.25/35</i>	152
MICRODOT TES	182	MILLIPRED DP PAK 5MG	158
<i>microgestin tab 1.5/30</i>	152	MILLIPRED TAB 5MG	158
<i>microgestin tab 1/20</i>	152	<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	143
<i>microgestin tab fe 1/20</i>	152	<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	143
<i>microgestin tab fe1.5/30</i>	152	<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	143
MICROLET MIS LANCETS	228	<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	143
MICROPLEGIA INJ MSA/MSG	143	<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	143
MIDAZOL/NACL SOL 5MG/5ML	216	<i>mimvey tab 1-0.5mg</i>	195
<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	217	MIMYX CRE	175
<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	216	MINASTRIN 24 CHW FE	152
<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	216	<i>mineral oil</i>	218
<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	217	MINILINK RT MIS TRANSMIT	228
<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	216	MINIMED 630G MIS TRANSMIT	228
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	216	MINIPRESS CAP 1MG	95
<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	217	MINIVELLE DIS 0.025MG	196
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	217	MINIVELLE DIS 0.0375MG	196
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	217	MINIVELLE DIS 0.05MG	196
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	217	MINIVELLE DIS 0.075MG	196
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	217	MINIVELLE DIS 0.1MG	196
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	217	MINOCIN CAP 50MG	277
<i>midodrine hcl tab 10 mg</i>	292	MINOCIN INJ 100MG	277
<i>midodrine hcl tab 2.5 mg</i>	291	<i>minocycline hcl cap 100 mg</i>	277
<i>midodrine hcl tab 5 mg</i>	292	<i>minocycline hcl cap 50 mg</i>	277
MIEBO DRO 1.3GM/ML	261	<i>minocycline hcl cap 75 mg</i>	277
<i>migergot sup 2/100</i>	232	<i>minocycline hcl cap er 24hr 135 mg (base equivalent)</i>	277
<i>miglitol tab 100 mg</i>	74	<i>minocycline hcl cap er 24hr 45 mg (base equivalent)</i>	277
		<i>minocycline hcl cap er 24hr 90 mg (base equivalent)</i>	277
		<i>minocycline hcl tab 100 mg</i>	278
		<i>minocycline hcl tab 50 mg</i>	278
		<i>minocycline hcl tab 75 mg</i>	278
		<i>minocycline hcl tab er 24hr 105 mg</i>	278

<i>minocycline hcl tab er 24hr 115 mg</i>	278	<i>mirtazapine tab 30 mg</i>	68
<i>minocycline hcl tab er 24hr 135 mg</i>	278	<i>mirtazapine tab 45 mg</i>	68
<i>minocycline hcl tab er 24hr 45 mg</i>	278	<i>mirtazapine tab 7.5 mg</i>	68
<i>minocycline hcl tab er 24hr 55 mg</i>	278	MIRVASO GEL 0.33%.....	176
<i>minocycline hcl tab er 24hr 65 mg</i>	278	<i>misoprostol tab 100 mcg</i>	286
<i>minocycline hcl tab er 24hr 80 mg</i>	278	<i>misoprostol tab 200 mcg</i>	286
<i>minocycline hcl tab er 24hr 90 mg</i>	278	MITIGARE CAP 0.6MG.....	204
MINOLIRA TAB 105MG.....	278	<i>mitigo inj 10mg/ml</i>	35
MINOLIRA TAB 135MG	278	<i>mitigo inj 25mg/ml</i>	35
<i>minoxidil tab 10 mg</i>	100	<i>mitomycin for iv soln 20 mg</i>	111
<i>minoxidil tab 2.5 mg</i>	100	<i>mitomycin for iv soln 40 mg</i>	111
MIOCHOL-E SOL 1:100	256	<i>mitomycin for iv soln 5 mg</i>	111
MIOSTAT INJ 0.01% OP	256	MITOMYCIN SOL 20MG	111
<i>mirabegron tab er 24 hr 25 mg</i>	287	MITOSOL KIT 0.2MG.....	257
<i>mirabegron tab er 24 hr 50 mg</i>	287	<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i> <i>mg/ml)</i>	111
MIRAPEX ER TAB 0.375MG	121	<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2</i> <i>mg/ml)</i>	111
MIRAPEX ER TAB 0.75MG	121	<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i> <i>mg/ml)</i>	111
MIRAPEX ER TAB 2.25MG.....	121	<i>mm aspirin tab low dose</i>	32
MIRAPEX ER TAB 3.75MG	121	M-M-R II INJ	289
MIRAPEX ER TAB 3MG	121	<i>modafinil tab 100 mg</i>	19
MIRCERA INJ 100MCG.....	212	<i>modafinil tab 200 mg</i>	19
MIRCERA INJ 150MCG	212	MODERNA INJ 2024-25	289
MIRCERA INJ 200MCG	212	MODERNA VAC INJ 50/0.5ML.....	289
MIRCERA INJ 30MCG.....	212	MODERNA VAC INJ COVID-19	289
MIRCERA INJ 50MCG	212	MODERNA VACC INJ 6M-5Y.....	289
MIRCERA INJ 75MCG.....	212	<i>moexipril hcl tab 15 mg</i>	92
MIRENA IUD SYSTEM	155	<i>moexipril hcl tab 7.5 mg</i>	92
MIRO3D WOUND PAD 10X5X2CM	178	<i>molindone hcl tab 10 mg</i>	128
MIRO3D WOUND PAD 2X2X2CM	178	<i>molindone hcl tab 25 mg</i>	128
MIRO3D WOUND PAD 3X3X2CM	178	<i>molindone hcl tab 5 mg</i>	128
MIRO3D WOUND PAD 4X4X2CM.....	178	<i>mometasone furoate cream 0.1%</i>	172
MIRO3D WOUND PAD 5X5X2CM.....	178	<i>mometasone furoate nasal susp 50</i> <i>mcg/act</i>	252
MIRO3D WOUND PAD 7X5X2CM.....	178	<i>mometasone furoate oint 0.1%</i>	172
MIROTRACT MIS 3MMX5CM.....	178	<i>mometasone furoate solution 0.1% (lotion)</i>	172
MIROTRACT MIS 3MMX9CM.....	178	<i>mondoxylene nl cap 100mg</i>	278
MIROTRACT MIS 5MMX5CM.....	178	<i>mondoxylene nl cap 75mg</i>	278
MIROTRACT MIS 5MMX9CM.....	178	MONJUVI INJ 200MG.....	107
<i>mirtazapine orally disintegrating tab 15 mg</i>	68	MONOLET MIS LANCETS.....	228
<i>mirtazapine orally disintegrating tab 30 mg</i>	68	MONOLET OPD MIS LANCETS.....	228
<i>mirtazapine orally disintegrating tab 45 mg</i>	68		
<i>mirtazapine tab 15 mg</i>	68		

MONOLETTOR MIS LANCETS.....	228	<i>morphine sulfate cap er 24hr 30 mg</i>	36
<i>mono-lynyah tab 0.25-35</i>	152	<i>morphine sulfate cap er 24hr 50 mg</i>	36
MONOVISC INJ 88MG/4ML	251	<i>morphine sulfate cap er 24hr 60 mg</i>	36
<i>montelukast sodium chew tab 4 mg (base</i>		<i>morphine sulfate cap er 24hr 80 mg</i>	36
<i>equiv).....</i>	53	<i>morphine sulfate inj pf 0.5 mg/ml</i>	36
<i>montelukast sodium chew tab 5 mg (base</i>		<i>morphine sulfate inj pf 1 mg/ml</i>	36
<i>equiv).....</i>	53	<i>morphine sulfate iv soln 10 mg/ml</i>	36
<i>montelukast sodium oral granules packet 4</i>		<i>morphine sulfate iv soln 4 mg/ml</i>	36
<i>mg (base equiv)</i>	53	<i>morphine sulfate iv soln 8 mg/ml</i>	36
<i>montelukast sodium tab 10 mg (base equiv)</i>		<i>morphine sulfate oral soln 10 mg/5ml</i>	36
<i>.....</i>	53	<i>morphine sulfate oral soln 100 mg/5ml (20</i>	
MORGIDOX KIT 1X50MG.....	278	<i>mg/ml).....</i>	36
MORPHABOND TAB 100MG ER.....	36	<i>morphine sulfate oral soln 20 mg/5ml.....</i>	36
MORPHABOND TAB 15MG ER	35	<i>morphine sulfate tab 15 mg</i>	36
MORPHABOND TAB 30MG ER	36	<i>morphine sulfate tab 30 mg</i>	36
MORPHABOND TAB 60MG ER	36	<i>morphine sulfate tab er 100 mg</i>	37
MORPHIN/NACL INJ 100/100	36	<i>morphine sulfate tab er 15 mg</i>	36
MORPHIN/NACL INJ 1MG/ML.....	36	<i>morphine sulfate tab er 200 mg</i>	37
MORPHIN/NACL INJ 2MG-0.9%.....	36	<i>morphine sulfate tab er 30 mg.....</i>	36
MORPHIN/NACL INJ 4MG-0.9%	36	<i>morphine sulfate tab er 60 mg</i>	37
MORPHINE SUL INJ 10MG/ML	36	MOTTEGRITY TAB 1MG	197
MORPHINE SUL INJ 1MG/ML.....	36	MOTTEGRITY TAB 2MG.....	197
MORPHINE SUL INJ 250/50ML	36	MOTOFEN TAB 1-0.025	82
MORPHINE SUL INJ 2MG/ML	36	MOTPOLY XR CAP 100MG.....	64
MORPHINE SUL INJ 2MG2/ML.....	36	MOTPOLY XR CAP 150MG.....	64
MORPHINE SUL INJ 4MG/ML	36	MOTPOLY XR CAP 200MG.....	64
MORPHINE SUL INJ 8MG/ML	36	MOUNJARO INJ 10MG/0.5.....	78
MORPHINE SUL INJ NACL.....	36	MOUNJARO INJ 12.5/0.5	78
MORPHINE SUL SOL 50MG/ML	36	MOUNJARO INJ 15MG/0.5	78
<i>morphine sulfate beads cap er 24hr 120 mg</i>		MOUNJARO INJ 2.5/0.5.....	78
<i>.....</i>	36	MOUNJARO INJ 5MG/0.5	78
<i>morphine sulfate beads cap er 24hr 30 mg</i>		MOUNJARO INJ 7.5/0.5.....	78
<i>.....</i>	36	MOVANTIK TAB 12.5MG.....	201
<i>morphine sulfate beads cap er 24hr 45 mg</i>		MOVANTIK TAB 25MG	201
<i>.....</i>	36	MOVIPREP SOL.....	218
<i>morphine sulfate beads cap er 24hr 60 mg</i>		<i>moxifloxacin hcl 400 mg/250ml in sodium</i>	
<i>.....</i>	36	<i>chloride 0.8% inj</i>	197
<i>morphine sulfate beads cap er 24hr 75 mg</i>		<i>moxifloxacin hcl ophth soln 0.5% (base eq)</i>	
<i>.....</i>	36	<i>(2 times daily)</i>	257
<i>morphine sulfate beads cap er 24hr 90 mg</i>		<i>moxifloxacin hcl ophth soln 0.5% (base</i>	
<i>.....</i>	36	<i>equiv)</i>	257
<i>morphine sulfate cap er 24hr 10 mg</i>	36	<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	
<i>morphine sulfate cap er 24hr 100 mg</i>	36	<i>.....</i>	197
<i>morphine sulfate cap er 24hr 20 mg.....</i>	36	MOXIFLOXACIN INJ 400/250.....	197

MOXIFLOXACIN SOL 1MG/ML	257
MOXIFLOXACIN SOL 5MG/ML	257
MOZOBIL INJ	214
MRESVIA INJ 50MCG	289
MS CONTIN TAB 100MG ER	37
MS CONTIN TAB 15MG ER	37
MS CONTIN TAB 200MG ER	37
MS CONTIN TAB 30MG ER	37
MS CONTIN TAB 60MG ER	37
MUCOTROL WAF	244
MUGARD LIQ	244
MULPLETA TAB 3MG	212
MULTAQ TAB 400MG	52
<i>multi vit/fl chw 0.25mg</i>	245
MULTIGEN PLS TAB	214
MULTIGEN TAB	214
MULTIGEN TAB FOLIC	214
<i>multipro cap</i>	245
<i>multivit/fl chw 0.25mg</i>	245
<i>multivit/fl chw 0.5mg</i>	245
<i>multivit/fl chw 1mg</i>	245
<i>multi-vit/fl dro /fe 0.25</i>	245
<i>multivit/fl dro 0.25mg</i>	245
<i>multi-vit/fl dro 0.5mg/ml</i>	245
MULTRYS INJ	238
<i>mupirocin calcium cream 2%</i>	164
<i>mupirocin oint 2%</i>	164
MUSCUSOLICE CRE 2%	164
<i>mutamycin inj 20mg</i>	111
<i>mutamycin inj 40mg</i>	111
<i>mutamycin inj 5mg</i>	111
MVASI INJ 100MG	106
MVASI INJ 400MG	106
<i>my choice tab 1.5mg</i>	155
<i>my way tab 1.5mg</i>	155
MYALEPT INJ 11.3MG	191
MYCAMINE INJ 100MG	85
MYCAPSSA CAP 20MG	193
<i>mycophenolate mofetil cap 250 mg</i>	241
<i>mycophenolate mofetil for oral susp 200</i> <i>mg/ml</i>	241
<i>mycophenolate mofetil hcl for iv soln 500</i> <i>mg (base equiv)</i>	241
<i>mycophenolate mofetil tab 500 mg</i>	241

<i>mycophenolate sodium tab dr 180 mg</i> <i>(mycophenolic acid equiv)</i>	241
<i>mycophenolate sodium tab dr 360 mg</i> <i>(mycophenolic acid equiv)</i>	241
MYDAYIS CAP 12.5MG	14
MYDAYIS CAP 25MG	14
MYDAYIS CAP 37.5MG	14
MYDAYIS CAP 50MG	14
MYDRIACYL SOL 1% OP	256
MYFEMBREE TAB	195
MYFORTIC TAB 180MG	241
MYFORTIC TAB 360MG	241
MYGLUCOHEALT MIS LANC 30G	228
MYGLUCOHEALT TES BLD GLUC	182
MYLERAN TAB 2MG	102
MYLOTARG INJ 4.5MG	107
MYNATAL CAP	247
MYNATAL PLUS TAB	247
MYNATAL-Z TAB	247
MYOBLOC INJ 10000/2	253
MYOBLOC INJ 2500/0.5	253
MYOBLOC INJ 5000/ML	253
<i>myorisan cap 10mg</i>	163
<i>myorisan cap 20mg</i>	163
<i>myorisan cap 30mg</i>	163
<i>myorisan cap 40mg</i>	163
MYRBETRIQ SUS 8MG/ML	287
MYRBETRIQ TAB 25MG	287
MYRBETRIQ TAB 50MG	287
MYSOLINE TAB 250MG	64
MYSOLINE TAB 50MG	64
MYTESI TAB 125MG	82

N

NABI-HB INJ	264
<i>nabumetone tab 500 mg</i>	28
<i>nabumetone tab 750 mg</i>	28
<i>nadolol tab 20 mg</i>	138
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<i>nafrinse chw 1mg f</i>	236	<i>naproxen tab 500 mg</i>	28
<i>nafrinse dro 0.125mg</i>	236	<i>naproxen tab ec 375 mg</i>	28
<i>naftifine hcl cream 1%</i>	165	<i>naproxen tab ec 500 mg</i>	28
<i>naftifine hcl cream 2%</i>	165	<i>naproxen-esomeprazole magnesium tab dr</i>	
<i>naftifine hcl gel 2%</i>	165	<i>375-20 mg</i>	28
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<i>nalbuphine hcl inj 10 mg/ml</i>	41	<i>naratriptan hcl tab 1 mg (base equiv)</i>	233
<i>nalbuphine hcl inj 20 mg/ml</i>	41	<i>naratriptan hcl tab 2.5 mg (base equiv)</i> ..	233
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<i>naloxone hcl inj 0.4 mg/ml</i>	83	NAROPIN INJ 5MG/ML	220
<i>naloxone hcl inj 4 mg/10ml</i>	83	NAROPIN INJ 7.5MG/ML	220
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	83	NASCOBAL SPR 500MCG	211
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<i>naltrexone hcl tab 50 mg</i>	83	<i>nateglinide tab 60 mg</i>	80
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NAPRELAN TAB 500MG CR	28	NATURE-THROI TAB 130MG	281
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<i>nebivolol hcl tab 20 mg (base equivalent)</i>	137
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<i>nefazodone hcl tab 150 mg</i>	71
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<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	257
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<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	259
<i>neomycin-polymyxin-hc ophth susp</i>	259
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<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	262
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NEORAL CAP 100MG	241
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NEORAL SOL 100MG/ML	241
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NEXIUM GRA 20MG DR.....	285	<i>nifedipine tab er 24hr 30 mg</i>	141
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NEXLETOL TAB 180MG	88	<i>nifedipine tab er 24hr osmotic release 60</i> <i>mg</i>	141
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<i>nicardipine hcl iv soln 2.5 mg/ml</i>	141	<i>nisoldipine tab er 24hr 20 mg</i>	141
<i>nicotine dis 7mg/24hr</i>	274	<i>nisoldipine tab er 24hr 25.5 mg</i>	141
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macrocrystalline cap 100 mg	48	150-35 mcg/24hr	154
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NORMOSOL-R INJ PH 7.4	235	NOVOLIN R INJ 100 UNIT	80
NORMOSOL-R SOL /5% DSW	235	NOVOLIN R INJ U-100	80
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NUFERA TAB	214	<i>nystatin oint 100000 unit/gm</i>	165
<i>nulev tab 0.125mg</i>	284	<i>nystatin susp 100000 unit/ml</i>	243
NULOJIX INJ 250MG	241	<i>nystatin tab 500000 unit</i>	86
NUMOISYN LIQ	244	<i>nystatin topical powder 100000 unit/gm</i>	165
NUMOISYN LOZ	244	<i>nystatin-triamcinolone cream 100000-0.1</i> <i>unit/gm-%</i>	165
NUPLAZID CAP 34MG	124	<i>nystatin-triamcinolone oint 100000-0.1</i> <i>unit/gm-%</i>	165
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NUVIGIL TAB 150MG	19	OBSTETRIX MIS DHA	247
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NUVIGIL TAB 250MG	19	OCALIVA TAB 10MG	198
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octreotide acetate subcutaneous soln pref syr 50 mcg/ml	193	olmesartan medoxomil- hydrochlorothiazide tab 20-12.5 mg	98
octreotide acetate subcutaneous soln pref syr 500 mcg/ml	193	olmesartan medoxomil- hydrochlorothiazide tab 40-12.5 mg	98
OCUFLOX DRO 0.3% OP	257	olmesartan medoxomil- hydrochlorothiazide tab 40-25 mg	98
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ODACTRA SUB	19	olmesartan-amlodipine- hydrochlorothiazide tab 40-10-12.5 mg	98
ODEFSEY TAB	132	olmesartan-amlodipine- hydrochlorothiazide tab 40-10-25 mg ..	98
ODOMZO CAP 200MG	108	olmesartan-amlodipine- hydrochlorothiazide tab 40-5-12.5 mg .	98
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ofloxacin ophth soln 0.3%	257	olopatadine hcl ophth soln 0.2% (base equivalent)	261
ofloxacin otic soln 0.3%	262	OLUMIANT TAB 2MG	24
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<i>susp 100 mg</i>	<i>pantoprazole sodium ec tab 40 mg (base</i>	
PADCEV INJ 20MG	<i>equiv)</i>	285
PADCEV INJ 30MG	<i>pantoprazole sodium for delayed release</i>	
PAIN EASE AER MD STRM	<i>susp packet 40 mg</i>	285
PAIN EASE AER MIST	<i>pantoprazole sodium for iv soln 40 mg</i>	
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<i>paliperidone tab er 24hr 3 mg</i>	<i>paricalcitol cap 1 mcg</i>	191
<i>paliperidone tab er 24hr 6 mg</i>	<i>paricalcitol cap 2 mcg</i>	191
<i>paliperidone tab er 24hr 9 mg</i>	<i>paricalcitol cap 4 mcg</i>	191
<i>palonosetron hcl iv soln 0.25 mg/5ml (base</i>	<i>paricalcitol iv soln 2 mcg/ml</i>	191
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PALYNZIQ INJ 20MG/ML	<i>paromomycin sulfate cap 250 mg</i>	20
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PAMELOR CAP 25MG	<i>equiv)</i>	70
PAMELOR CAP 50MG	<i>paroxetine hcl tab 10 mg</i>	70
PAMELOR CAP 75MG	<i>paroxetine hcl tab 20 mg</i>	70
<i>pamidronate disodium iv soln 3 mg/ml ...</i>	<i>paroxetine hcl tab 30 mg</i>	70
<i>187</i>	<i>paroxetine hcl tab 40 mg</i>	70
<i>pamidronate disodium iv soln 9 mg/ml ...</i>	<i>paroxetine hcl tab er 24hr 12.5 mg</i>	70
<i>187</i>	<i>paroxetine hcl tab er 24hr 25 mg</i>	70
PAMIDRONATE INJ 6MG/ML	<i>paroxetine hcl tab er 24hr 37.5 mg</i>	70
PANCREAZE CAP 10500UNT	<i>paroxetine mesylate cap 7.5 mg (base</i>	
PANCREAZE CAP 16800UNT	<i>equiv)</i>	275
PANCREAZE CAP 21000UNT	PARSABIV INJ 10MG/2ML	192
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PAXIL TAB 10MG	70	<i> penicillamine tab 250 mg</i>	<i>239</i>
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<i> (base equiv)</i>	<i>105</i>	PERCOCET TAB 7.5-325	40
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<i>perindopril erbumine tab 2 mg</i>	92	<i>phenobarbital tab 16.2 mg</i>	215
<i>perindopril erbumine tab 4 mg</i>	92	<i>phenobarbital tab 30 mg</i>	215
<i>perindopril erbumine tab 8 mg</i>	93	<i>phenobarbital tab 32.4 mg</i>	215
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<i>permethrin cream 5%</i>	176	<i>phenobarbital tab 97.2 mg</i>	216
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<i>perphenazine tab 2 mg</i>	128	<i>phentermine hcl cap 15 mg</i>	15
<i>perphenazine tab 4 mg</i>	128	<i>phentermine hcl cap 30 mg</i>	15
<i>perphenazine tab 8 mg</i>	128	<i>phentermine hcl cap 37.5 mg</i>	15
<i>perphenazine-amitriptyline tab 2-10 mg</i>	269	<i>phentermine hcl tab 37.5 mg</i>	15
<i>perphenazine-amitriptyline tab 2-25 mg</i>	269	<i>phentolamine mesylate for inj 5 mg</i>	93
<i>perphenazine-amitriptyline tab 4-10 mg</i>	269	PHENYL/NACL INJ 80/250ML	292
<i>perphenazine-amitriptyline tab 4-25 mg</i>	269	PHENYLEP HCL INJ 0.8/10ML	292
<i>perphenazine-amitriptyline tab 4-50 mg</i>	269	PHENYLEP HCL INJ 1MG/10ML	292
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<i>quetiapine fumarate tab 300 mg</i>	127
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<i>quinapril-hydrochlorothiazide tab 10-12.5</i> <i>mg</i>	98
<i>quinapril-hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	98

<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	98
<i>quinidine gluconate tab er 324 mg</i>	51
<i>quinine sulfate cap 324 mg</i>	100
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<i>ramipril cap 10 mg</i>	93
<i>ramipril cap 2.5 mg</i>	93
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RAPAMUNE SOL 1MG/ML	241
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RASUVO INJ 10MG	25
RASUVO INJ 12.5MG	25
RASUVO INJ 15MG	25
RASUVO INJ 17.5MG	25
RASUVO INJ 22.5MG	25
RASUVO INJ 25MG	25
RASUVO INJ 30MG	25
RASUVO INJ 7.5MG	25
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RECOMBINATE INJ 801-1240	208	RELYVRIO PAK 3-1GM	252
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RECOMBIVA HB INJ 5MCG/0.5	289	REMERON SLTB TAB 15MG	68
RECOMBIVA-HB INJ 40MCG/ML	289	REMERON SLTB TAB 30MG	68
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RECOTHROM SOL 20000UNT	215	REMERON TAB 15MG	68
RECOTHROM SOL 5000UNIT	215	REMERON TAB 30MG	68
RECTIV OIN 0.4%	43	REMICADE INJ 100MG	200
REDICHEW RX CHW	248	<i>remifentanil hcl for iv soln 1 mg</i>	37
REDITREX INJ 10/.4ML	25	<i>remifentanil hcl for iv soln 2 mg</i>	38
REDITREX INJ 12.5/0.5	25	<i>remifentanil hcl for iv soln 5 mg</i>	38
REDITREX INJ 15/.6ML	25	REMIGEN CREA CRE	175
REDITREX INJ 17.5/0.7	25	REMODULIN INJ 10MG/ML	145
REDITREX INJ 20/.8ML	25	REMODULIN INJ 1MG/ML	145
REDITREX INJ 22.5/0.9	25	REMODULIN INJ 2.5MG/ML	145
REDITREX INJ 25MG/ML	25	REMODULIN INJ 5MG/ML	145
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REGRANEX GEL 0.01%	178	RENVELA POW 2.4GM	201
RELAFEN DS TAB 1000MG	29	RENVELA TAB 800MG	201
<i>relafen tab 500mg</i>	29	<i>repaglinide tab 0.5 mg</i>	80
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RELEUKO INJ 480MCG	213	REPATHA PUSH INJ 420/3.5	92
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<i>resorcinol-sulfur lotion 2-5%</i>	163	REVLIMID CAP 15MG	240
RESTASIS EMU 0.05% OP	258	REVLIMID CAP 2.5MG	240
RESTASIS MUL EMU 0.05% OP	258	REVLIMID CAP 20MG	240
RESTIMO GEL 1-1%	176	REVLIMID CAP 25MG	240
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RESTORIL CAP 7.5MG	217	REXULTI TAB 1MG	130
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RETACRIT INJ 20000UNI	213	REXULTI TAB 3MG	130
RETACRIT INJ 2000UNIT	213	REXULTI TAB 4MG	130
RETACRIT INJ 3000UNIT	213	REYATAZ CAP 200MG	132
RETACRIT INJ 40000UNT	213	REYATAZ CAP 300MG	132
RETACRIT INJ 4000UNIT	213	REYATAZ POW 50MG	132
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RETEVMO CAP 80MG	115	REYVOW TAB 50MG	233
RETEVMO TAB 120MG	115	REZDIFFRA TAB 100MG	198
RETEVMO TAB 160MG	115	REZDIFFRA TAB 60MG	198
RETEVMO TAB 40MG	115	REZDIFFRA TAB 80MG	198
RETEVMO TAB 80MG	115	REZIPRES INJ	292
RETIN-A CRE 0.025%	163	REZIPRES SOL	292
RETIN-A CRE 0.05%	163	REZUROCK TAB 200MG	240
RETIN-A CRE 0.1%	163	REZVOGLAR INJ 100UT/ML	80
RETIN-A GEL 0.01%	163	REZZAYO INJ 200MG	85
RETIN-A GEL 0.025%	163	RHOFADE CRE 1%	176
RETIN-A MICR GEL 0.04%	163	RHOGAM PLUS INJ 300MCG	264
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RETROVIR CAP 100MG	132	<i>rifabutin cap 150 mg</i>	101
RETROVIR INJ 10MG/ML	132	RIFADIN INJ 600 MG	101
RETROVIR SYP 50MG/5ML	132	<i>rifampin cap 150 mg</i>	101
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REVATIO SUS 10MG/ML	146	<i>rifampin for inj 600 mg</i>	101
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RIGHTEST TES GS550	183	<i>risperidone orally disintegrating tab 4 mg</i>	125
<i>riluzole tab 50 mg</i>	252	<i>risperidone soln 1 mg/ml</i>	125
<i>rimantadine hydrochloride tab 100 mg</i> ...	135	<i>risperidone tab 0.25 mg</i>	125
RIMSO-50 SOL 50%	203	<i>risperidone tab 0.5 mg</i>	125
<i>ringer's solution</i>	236	<i>risperidone tab 1 mg</i>	125
<i>ringer's solution for irrigation</i>	242	<i>risperidone tab 2 mg</i>	125
RINVOQ LQ SOL 1MG/ML	24	<i>risperidone tab 3 mg</i>	125
RINVOQ TAB 15MG ER	24	<i>risperidone tab 4 mg</i>	125
RINVOQ TAB 30MG ER	24	RITALIN LA CAP 10MG	19
RINVOQ TAB 45MG ER	24	RITALIN LA CAP 20MG	19
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<i>risedronate sodium tab 150 mg</i>	187	RITALIN LA CAP 40MG	19
<i>risedronate sodium tab 30 mg</i>	187	RITALIN TAB 10MG	19
<i>risedronate sodium tab 35 mg</i>	187	RITALIN TAB 20MG	19
<i>risedronate sodium tab 5 mg</i>	187	RITALIN TAB 5MG	19
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RISPERDAL INJ 12.5MG	125	RITUXAN INJ 500MG	107
RISPERDAL INJ 25MG	125	RITUXAN INJ HYCELA	111
RISPERDAL INJ 37.5MG	125	<i>rivaroxaban tab 2.5 mg</i>	58
RISPERDAL INJ 50MG	125	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
RISPERDAL SOL 1MG/ML	125	<i>equivalent)</i>	269
RISPERDAL TAB 0.5MG	125	<i>rivastigmine tartrate cap 3 mg (base</i>	
RISPERDAL TAB 1MG	125	<i>equivalent)</i>	269
RISPERDAL TAB 2MG	125	<i>rivastigmine tartrate cap 4.5 mg (base</i>	
RISPERDAL TAB 3MG	125	<i>equivalent)</i>	269
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<i>risperidone microspheres for im extended</i>		<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	269
<i>rel susp 25 mg</i>	125	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	269
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<i>rel susp 37.5 mg</i>	125	RIVFLOZA INJ 128/0.8	203
<i>risperidone microspheres for im extended</i>		RIVFLOZA INJ 160MG/ML	203
<i>rel susp 50 mg</i>	125	RIVFLOZA INJ 80/0.5ML	203
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<i>mg</i>	125	RIXUBIS INJ 2000UNIT	208
<i>risperidone orally disintegrating tab 0.5 mg</i>		RIXUBIS INJ 250 UNIT	208
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<i>risperidone orally disintegrating tab 1 mg</i>		RIXUBIS INJ 500UNIT	208
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<i>rizatriptan benzoate oral disintegrating tab</i> <i>10 mg (base eq).....</i>	233
<i>rizatriptan benzoate oral disintegrating tab</i> <i>5 mg (base eq)</i>	233
<i>rizatriptan benzoate tab 10 mg (base</i> <i>equivalent)</i>	233
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<i>rocuronium bromide iv soln 100 mg/10ml</i> <i>(10 mg/ml)</i>	253
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<i>roflumilast tab 250 mcg.....</i>	54
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<i>romidepsin for iv inj 10 mg.....</i>	115
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<i>ropinirole hydrochloride tab 0.5 mg</i>	122
<i>ropinirole hydrochloride tab 1 mg</i>	122
<i>ropinirole hydrochloride tab 2 mg.....</i>	122
<i>ropinirole hydrochloride tab 3 mg.....</i>	122
<i>ropinirole hydrochloride tab 4 mg.....</i>	122
<i>ropinirole hydrochloride tab 5 mg.....</i>	122
<i>ropinirole hydrochloride tab er 24hr 12 mg</i> <i>(base equivalent)</i>	122
<i>ropinirole hydrochloride tab er 24hr 2 mg</i> <i>(base equivalent)</i>	122
<i>ropinirole hydrochloride tab er 24hr 4 mg</i> <i>(base equivalent)</i>	122
<i>ropinirole hydrochloride tab er 24hr 6 mg</i> <i>(base equivalent)</i>	122
<i>ropinirole hydrochloride tab er 24hr 8 mg</i> <i>(base equivalent)</i>	122

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<i>ropivacaine hcl inj 2 mg/ml</i>	220
<i>ropivacaine hcl inj 5 mg/ml</i>	220
<i>ropivacaine hcl inj 7.5 mg/ml</i>	220
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<i>rosadan gel 0.75%</i>	176
<i>rosuvastatin calcium tab 10 mg</i>	91
<i>rosuvastatin calcium tab 20 mg</i>	91
<i>rosuvastatin calcium tab 40 mg</i>	91
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<i>rufinamide tab 200 mg</i>	65
<i>rufinamide tab 400 mg</i>	65
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RYKINDO INJ 37.5MG	125
RYKINDO INJ 50MG	125
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<i>sapropterin dihydrochloride powder packet</i> <i>500 mg</i>	192
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<i>saxagliptin-metformin hcl tab er 24hr 5-</i> <i>1000 mg</i>	76
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SELECT-OB+ PAK DHA	248	<i>sertraline hcl tab 25 mg</i>	<i>71</i>
<i>selegiline hcl cap 5 mg</i>	<i>123</i>	<i>sertraline hcl tab 50 mg</i>	<i>71</i>
<i>selegiline hcl tab 5 mg</i>	<i>123</i>	<i>setlakin tab</i>	<i>153</i>
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<i>selenium sulfide lotion 2.5%</i>	<i>169</i>	<i>sevelamer carbonate packet 2.4 gm</i>	<i>202</i>
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SEROQUEL TAB 300MG.....	127	<i>sildenafil citrate iv soln 10 mg/12.5ml (base</i>	
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<i>silodosin cap 4 mg</i>	204	SIVEXTRO INJ 200MG.....	47
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SIMPONI INJ 100MG/ML	23	SKYTROFA INJ 4.3MG	189
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SIMULECT INJ 10MG	241	SKYTROFA INJ 6.3MG	189
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<i>simvastatin tab 20 mg</i>	91	<i>sm aspirin chw 81mg</i>	32
<i>simvastatin tab 40 mg</i>	91	<i>sm aspirin tab 81mg ec</i>	32
<i>simvastatin tab 5 mg</i>	91	<i>sm folic acd tab 400mcg</i>	212
<i>simvastatin tab 80 mg</i>	91	SM LANCETS MIS 33G.....	229
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SINEMET TAB 25-100MG.....	122	<i>sm nicotine dis 21mg/24h</i>	274
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SINGULAIR CHW 5MG	53	<i>sm nicotine gum 2mg mint</i>	274
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SINGULAIR TAB 10MG.....	53	<i>sm nicotine gum 4mg mint</i>	274
SINUVA IMP 1350MCG	252	<i>sm nicotine loz 2mg chry</i>	274
<i>sirolimus oral soln 1 mg/ml</i>	241	<i>sm nicotine loz 2mg cinn</i>	274
<i>sirolimus tab 0.5 mg</i>	241	<i>sm nicotine loz 2mg mint</i>	274
<i>sirolimus tab 1 mg</i>	241	<i>sm nicotine loz 4mg</i>	275
<i>sirolimus tab 2 mg</i>	241	<i>sm nicotine loz 4mg cinn</i>	275
SIRTURO TAB 100MG	101	<i>sm nicotine loz 4mg mint</i>	275
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SMARTEST MIS LANCETS	229	sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	236
SMARTEST TES BLD GLUC	183	sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	236
SMOFLIPID EMU	254	sodium fluoride tab 0.5 mg f (from 1.1 mg naf)	236
SOAANZ TAB 20MG	185	sodium fluoride tab 1 mg f (from 2.2 mg naf)	236
SOAANZ TAB 40MG	185	sodium phenylbutyrate oral powder 3 gm/teaspoonful	192
SOAANZ TAB 60MG	185	sodium phenylbutyrate tab 500 mg	192
SOD ACETATE INJ 2MEQ/ML	234	sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)	237
SOD BICARB INJ 8.4%	234	sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)	237
SOD BICARB SOL D5W	234	sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)	237
SOD CHLORIDE INJ 0.9%	238	sodium polystyrene sulfonate powder ...	243
SOD DIURIL INJ 500MG	186	sodium tetradecyl sulfate inj 3%	243
sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)	214	sodium thiosulfate iv soln 250 mg/ml (25%)	83
SOD NITRITE INJ 30MG/ML	83	SOFOS/VELPAT TAB 400-100	134
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	218	SOF-SENSOR MIS	229
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sodium acetate inj 2 meq/ml	234	SOGROYA INJ 10MG/1.5	189
sodium acetate inj 4 meq/ml	234	SOGROYA INJ 15MG/1.5	189
sodium benzoate & sodium phenylacetate iv soln 10-10%	192	SOGROYA INJ 5MG/1.5	189
sodium bicarbonate iv soln 4.2%	234	solifenacin succinate tab 10 mg	287
sodium bicarbonate iv soln 7.5%	234	solifenacin succinate tab 5 mg	287
sodium bicarbonate iv soln 8.4%	234	SOLIQUA INJ 100/33	76
sodium chloride inj 2.5 meq/ml (14.6%)	238	SOLIRIS INJ 10MG/ML	209
sodium chloride irrigation soln 0.9%	203	SOLOX GEL	178
sodium chloride iv soln 0.45%	238	SOLTAMOX SOL 10MG/5ML	109
sodium chloride iv soln 0.9%	238	SOLU-CORTEF INJ 1000MG	159
sodium chloride iv soln 3%	238	SOLU-CORTEF INJ 100MG	159
sodium chloride iv soln 4 meq/ml (23.4%)	238	SOLU-CORTEF INJ 250MG	159
sodium chloride iv soln 5%	238	SOLU-CORTEF INJ 500MG	159
sodium chloride preservative free (pf) inj 0.9%	238	SOLU-CORTEF INJ 1000MG	159
sodium chloride soln nebu 0.9%	160	SOLU-MEDROL INJ 1000MG	159
sodium chloride soln nebu 10%	160	SOLU-MEDROL INJ 125MG	159
sodium chloride soln nebu 3%	160	SOLU-MEDROL INJ 1GM	159
sodium chloride soln nebu 7%	160	SOLU-MEDROL INJ 2GM	159
sodium citrate & citric acid soln 500-334 mg/5ml	203	SOLU-MEDROL INJ 40MG	159
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	236		

SOLU-MEDROL INJ 500MG	159	SPINRAZA INJ 12MG/5ML	253
SOLUS V2 MIS LANC 28G	229	SPIRIVA AER 1.25MCG	53
SOLUS V2 MIS LANC 30G	229	SPIRIVA CAP HANDIHLR.....	53
SOLUS V2 TES AUDIBLE.....	183	SPIRIVA SPR 2.5MCG	53
SOMA TAB 250MG.....	250	<i>spironolactone & hydrochlorothiazide tab</i>	
SOMA TAB 350MG	250	25-25 mg	185
SOMATULINE INJ 120/.5ML	194	<i>spironolactone susp 25 mg/5ml</i>	186
SOMATULINE INJ 60/0.2ML	194	<i>spironolactone tab 100 mg</i>	186
SOMATULINE INJ 90/0.3ML	194	<i>spironolactone tab 25 mg</i>	186
SOMAVERT INJ 10MG	188	<i>spironolactone tab 50 mg</i>	186
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SOMAVERT INJ 20MG.....	188	SPORANOX CAP PULSEPAK	86
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SONAFINE EMU	178	SPRAVATO SOL 84MG DOS	69
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<i>sorafenib tosylate tab 200 mg (base</i>		SPRIX SPR 15.75MG	29
<i>equivalent)</i>	115	SPRYCEL TAB 100MG.....	115
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<i>sotalol hcl (afib/afl) tab 120 mg</i>	138	SPRYCEL TAB 70MG	115
<i>sotalol hcl (afib/afl) tab 160 mg</i>	138	SPRYCEL TAB 80MG	115
<i>sotalol hcl (afib/afl) tab 80 mg</i>	138	<i>sps sus 15gm/60</i>	243
SOTALOL HCL INJ 150/10ML.....	138	<i>sps sus 30gm/120</i>	243
<i>sotalol hcl tab 120 mg</i>	139	<i>sronyx tab</i>	153
<i>sotalol hcl tab 160 mg</i>	139	<i>ssd cre 1%</i>	169
<i>sotalol hcl tab 240 mg</i>	139	SSKI SOL 1GM/ML.....	160
<i>sotalol hcl tab 80 mg</i>	139	<i>st joseph chw low 81mg</i>	32
<i>sotradecol inj 1%</i>	243	<i>st joseph tab low 81mg</i>	32
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SOVUNA TAB 300MG.....	100	STEGLUJAN TAB 15-100MG	76
SPEVIGO INJ 150/1ML.....	168	STEGLUJAN TAB 5-100MG.....	76
SPEVIGO INJ 450/7.5.....	168	STELARA INJ 45MG/0.5	168
SPIKEVAX INJ 2024-25.....	289	STELARA INJ 5MG/ML.....	200
SPIKEVAX INJ COVID-19.....	289	STELARA INJ 90MG/ML	168
<i>spinosad susp 0.9%</i>	176	STEQEYMA INJ 130/26ML	200

STEQEYMA INJ 45/0.5ML	168	<i>subvenite kit start 49</i>	65
STEQEYMA INJ 90MG/ML	168	<i>subvenite kit start 98</i>	65
STERIL TALC SUS 5GM	276	<i>subvenite tab 100mg</i>	65
STERILANCE MIS TL 28G	229	<i>subvenite tab 150mg</i>	65
STERILANCE MIS TL 30G	229	<i>subvenite tab 200mg</i>	65
STERILANCE MIS TL 32G	229	<i>subvenite tab 25mg</i>	65
STERITALC POW 2GM	276	SUCCINYLCOL INJ 20MG/ML	252
STERITALC POW 3GM	276	<i>succinylcholine chloride inj 20 mg/ml</i>	252
STERITALC POW 4GM	276	SUCRAID SOL 8500/ML	184
STIOLTO AER 2.5-2.5	56	SUCRALFATE SUS 1GM/10ML	284
STIVARGA TAB 40MG	115	<i>sucralfate susp 1 gm/10ml</i>	284
STRATA GRT GEL	179	<i>sucralfate tab 1 gm</i>	284
STRATA MARK GEL	175	<i>sufentanil citrate inj 100 mcg/2ml (50</i> <i>mcg/ml)</i>	38
STRATTERA CAP 100MG	16	<i>sufentanil citrate inj 250 mcg/5ml (50</i> <i>mcg/ml)</i>	38
STRATTERA CAP 10MG	16	<i>sufentanil citrate inj 50 mcg/ml</i>	38
STRATTERA CAP 18MG	16	SUFENTANIL INJ 100/2ML	38
STRATTERA CAP 25MG	16	SUFENTANIL INJ 250/5ML	38
STRATTERA CAP 40MG	16	SUFENTANIL INJ 50MCG/ML	38
STRATTERA CAP 60MG	16	SUFLAVE SOL	218
STRATTERA CAP 80MG	16	SULAR TAB 17MG ER	141
STRENSIQ INJ 18/0.45	192	SULAR TAB 34MG ER	142
STRENSIQ INJ 28/0.7ML	192	SULAR TAB 8.5MG ER	141
STRENSIQ INJ 40MG/ML	192	<i>sulconazole nitrate cream 1%</i>	165
STRENSIQ INJ 80/0.8ML	192	<i>sulconazole nitrate solution 1%</i>	165
<i>streptomycin sulfate for inj 1 gm</i>	20	SULF LIME SOL	177
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STRIVERDI AER 2.5MCG	56	<i>sulfacetamide sodium ophth oint 10%</i> ...	258
STROMECTOL TAB 3MG	43	<i>sulfacetamide sodium ophth soln 10%</i> ...	258
STROVITE FOR TAB	245	<i>sulfacetamide sodium w/ sulfur cleanser</i> <i>9.8-4.8%</i>	163
STROVITE ONE TAB	245	<i>sulfacetamide sodium-prednisolone ophth</i> <i>soln 10-0.23(0.25)%</i>	259
SUBLOCADE INJ 100/0.5	41	<i>sulfadiazine tab 500 mg</i>	276
SUBLOCADE INJ 300/1.5	41	<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	44
SUBOXONE MIS 12-3MG	41	<i>sulfamethoxazole-trimethoprim susp 200-</i> <i>40 mg/5ml</i>	44
SUBOXONE MIS 2-0.5MG	41	<i>sulfamethoxazole-trimethoprim tab 400-80</i> <i>mg</i>	44
SUBOXONE MIS 4-1MG	41	<i>sulfamethoxazole-trimethoprim tab 800-</i> <i>160 mg</i>	44
SUBOXONE MIS 8-2MG	41	<i>sulfamez emu 10-1%</i>	163
SUBSYS SPR 100MCG	38		
SUBSYS SPR 1200MCG	38		
SUBSYS SPR 1600MCG	38		
SUBSYS SPR 200MCG	38		
SUBSYS SPR 400MCG	38		
SUBSYS SPR 600MCG	38		
SUBSYS SPR 800MCG	38		
<i>subvenite kit start 35</i>	65		

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sulfasalazine tab delayed release 500 mg	200
sulfatrim pd sus 200-40/5	44
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sulindac tab 200 mg	29
sumatriptan nasal spray 20 mg/act	233
sumatriptan nasal spray 5 mg/act	233
sumatriptan succinate inj 6 mg/0.5ml....	233
sumatriptan succinate solution auto- injector 4 mg/0.5ml.....	234
sumatriptan succinate solution auto- injector 6 mg/0.5ml.....	234
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sumatriptan succinate solution cartridge 6 mg/0.5ml	234
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sumatriptan succinate tab 25 mg.....	234
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sunitinib malate cap 12.5 mg (base equivalent)	115
sunitinib malate cap 25 mg (base equivalent)	115
sunitinib malate cap 37.5 mg (base equivalent)	115
sunitinib malate cap 50 mg (base equivalent)	115
SUNLENCA INJ	132
SUNLENCA TAB 300MG	132
SUNOSI TAB 150MG	16
SUNOSI TAB 75MG	16
SUPARTZ FX INJ 25/2.5ML	251
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SURVANTA INH	276
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SUSTOL INJ 10/0.4ML	84
SUSVIMO INJ 10/0.1ML	256
SUTAB TAB.....	218
SUTENT CAP 12.5MG	115
SUTENT CAP 25MG	115
SUTENT CAP 37.5MG	115
SUTENT CAP 50MG	115
SUVICORT EMU	175
syeda tab 3-0.03mg	153
SYFOVRE INJ 15/0.1ML	258
SYLVANT SOL 100MG	242
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symax-sr tab 0.375mg	284
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SYMBICORT AER 80-4.5	56
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SYMBYAX CAP 6-25MG	269
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SYMJEPI INJ 0.3MG.....	291
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SYMLNPEN 120 INJ 1000MCG.....	74
SYMPROIC TAB 0.2MG	201
SYMTUZA TAB	133
SYNAGIS INJ 100MG/ML	264
SYNAGIS INJ 50/0.5ML	264
SYNAGIS INJ 50MG	264
SYNALAR CRE 0.025%.....	172
SYNALAR OIN 0.025%	172
SYNAREL SOL 2MG/ML	190
SYNDROS SOL 5MG/ML	85

SYNERDERM EMU.....	175
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<i>tacrolimus cap 1 mg</i>	<i>241</i>
<i>tacrolimus cap 5 mg.....</i>	<i>242</i>
<i>tacrolimus oint 0.03%</i>	<i>174</i>
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<i>tadalafil tab 2.5 mg.....</i>	<i>145</i>
<i>tadalafil tab 20 mg (pah)</i>	<i>146</i>
<i>tadalafil tab 5 mg</i>	<i>145</i>
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<i>0.0015%</i>	<i>261</i>
TAGRISSO TAB 40MG	108
TAGRISSO TAB 80MG	108
<i>take action tab 1.5mg</i>	<i>155</i>
TAKHZYRO INJ 150MG/ML	210
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TALZENNA CAP 0.25MG.....	115
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TALZENNA CAP 0.5MG.....	115
TALZENNA CAP 0.75MG.....	116
TALZENNA CAP 1MG	116
TAMIFLU CAP 30MG.....	135
TAMIFLU CAP 45MG.....	135
TAMIFLU CAP 75MG.....	135
TAMIFLU SUS 6MG/ML	135
<i>tamoxifen citrate tab 10 mg (base</i>	
<i>equivalent)</i>	<i>109</i>
<i>tamoxifen citrate tab 20 mg (base</i>	
<i>equivalent)</i>	<i>109</i>
<i>tamsulosin hcl cap 0.4 mg.....</i>	<i>204</i>
TARCEVA TAB 100MG	108
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<i>targadox tab 50mg</i>	<i>278</i>
TARGRETIN CAP 75MG.....	117
TARGRETIN GEL 1%	166
<i>tarina 24 fe tab</i>	<i>153</i>
<i>tarina fe tab 1/20</i>	<i>154</i>
<i>tarina fe tab 1/20 eq.....</i>	<i>154</i>
TARON FORTE CAP.....	214
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TASIGNA CAP 150MG.....	116
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<i>tasimelteon capsule 20 mg</i>	218	<i>telmisartan-amlodipine tab 40-10 mg</i>	98
TASMAR TAB 100MG	120	<i>telmisartan-amlodipine tab 40-5 mg</i>	98
<i>tavaborole soln 5%</i>	165	<i>telmisartan-amlodipine tab 80-10 mg</i>	98
TAVALISSE TAB 100MG	209	<i>telmisartan-amlodipine tab 80-5 mg</i>	98
TAVALISSE TAB 150MG	209	<i>telmisartan-hydrochlorothiazide tab 40-</i>	
TAVNEOS CAP 10MG.....	209	<i>12.5 mg</i>	98
<i>taysofy cap 1/20</i>	154	<i>telmisartan-hydrochlorothiazide tab 80-12.5</i>	
TAYTULLA CAP 1MG/20MC	154	<i>mg</i>	99
<i>tazarotene cream 0.05%</i>	168	<i>telmisartan-hydrochlorothiazide tab 80-25</i>	
<i>tazarotene cream 0.1%</i>	168	<i>mg</i>	99
<i>tazarotene gel 0.05%</i>	168	<i>temazepam cap 15 mg</i>	217
<i>tazarotene gel 0.1%</i>	168	<i>temazepam cap 22.5 mg</i>	217
<i>tazicef inj 1gm</i>	149	<i>temazepam cap 30 mg</i>	217
TAZICEF INJ 1GM/50ML	149	<i>temazepam cap 7.5 mg</i>	217
<i>tazicef inj 2gm</i>	149	TEMBEXA SUS 10MG/ML.....	136
<i>tazicef inj 6gm</i>	149	TEMBEXA TAB 100MG.....	136
TAZORAC CRE 0.05%	168	TEMODAR CAP 250MG.....	103
TAZORAC CRE 0.1%	168	TEMODAR INJ 100MG	103
TAZORAC GEL 0.05%.....	168	<i>temozolomide cap 100 mg</i>	103
TAZORAC GEL 0.1%.....	168	<i>temozolomide cap 140 mg</i>	103
TAZVERIK TAB 200MG.....	116	<i>temozolomide cap 180 mg</i>	103
TDVAX INJ 2-2 LF.....	282	<i>temozolomide cap 20 mg</i>	103
TECENTRIQ INJ 1200/20	107	<i>temozolomide cap 250 mg</i>	103
TECENTRIQ INJ 840/14.....	107	<i>temozolomide cap 5 mg</i>	103
TECFIDERA CAP 120MG.....	271	<i>temsirolimus soln for iv infusion 25 mg/ml</i>	
TECFIDERA CAP 240MG.....	271	.....	116
TECFIDERA CAP STARTER	271	<i>tencon tab 50-325mg</i>	31
TECHLITE AST MIS LANCETS	229	TENIVAC INJ 5-2LF	282
TECHLITE MIS LANC 26G	230	<i>tenofovir disoproxil fumarate tab 300 mg</i>	
TECHLITE MIS LANCETS	230	.....	133
TEFLARO INJ 400MG	149	TENORETIC TAB 100.....	99
TEFLARO INJ 600MG	149	TENORETIC TAB 50	99
TEGLUTIK SUS 50/10ML	252	TENORMIN TAB 100MG	138
TEGRETOL SUS 100/5ML.....	65	TENORMIN TAB 25MG	137
TEGRETOL TAB 200MG	65	TENORMIN TAB 50MG.....	137
TEGRETOL-XR TAB 100MG	65	TEPADINA INJ 100MG	103
TEGRETOL-XR TAB 200MG.....	65	TEPADINA INJ 15MG.....	103
TEGRETOL-XR TAB 400MG	65	TEPEZZA INJ 500MG.....	189
TEKTRNA HCT TAB 150-12.5	98	TEPMETKO TAB 225MG.....	116
TEKTRNA TAB 150MG	99	<i>terazosin hcl cap 1 mg (base equivalent)</i> ..	95
TEKTRNA TAB 300MG.....	99	<i>terazosin hcl cap 10 mg (base equivalent)</i>	95
<i>telmisartan tab 20 mg</i>	94	<i>terazosin hcl cap 2 mg (base equivalent)</i> .	95
<i>telmisartan tab 40 mg</i>	94	<i>terazosin hcl cap 5 mg (base equivalent)</i> .	95
<i>telmisartan tab 80 mg</i>	94	<i>terbinafine hcl tab 250 mg</i>	86

<i>terbutaline sulfate inj 1 mg/ml</i>	56	TEZSPIRE INJ 210MG	53
<i>terbutaline sulfate tab 2.5 mg</i>	56	TEZSPIRE SOL 210MG	53
<i>terbutaline sulfate tab 5 mg</i>	56	TGT LANCET MIS 26G	230
<i>terconazole vaginal cream 0.4%</i>	290	TGT LANCET MIS 30G	230
<i>terconazole vaginal cream 0.8%</i>	290	TGT LANCET MIS 33G	230
<i>terconazole vaginal suppos 80 mg</i>	290	THALITONE TAB 15MG	186
TERIPARATIDE INJ 620/2.48	187	THALOMID CAP 100MG	240
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	187	THALOMID CAP 150MG	240
<i>terrell sol</i>	202	THALOMID CAP 200MG	240
TESTIM GEL 1%(50MG)	42	THALOMID CAP 50MG	240
TESTOPEL MIS PELLETS	42	THAM INJ 30MEQ	234
<i>testosterone cypionate im inj in oil 100</i> <i>mg/ml</i>	42	THEO-24 CAP 100MG CR	57
<i>testosterone cypionate im inj in oil 200</i> <i>mg/ml</i>	42	THEO-24 CAP 200MG CR	57
<i>testosterone enanthate im inj in oil 200</i> <i>mg/ml</i>	42	THEO-24 CAP 300MG CR	57
TESTOSTERONE MIS 100MG	42	THEO-24 CAP 400MG ER	57
TESTOSTERONE MIS 200MG	42	<i>theophylline elixir 80 mg/15ml</i>	57
TESTOSTERONE MIS 25MG	42	<i>theophylline soln 80 mg/15ml</i>	57
TESTOSTERONE MIS 50MG	42	<i>theophylline tab er 12hr 300 mg</i>	57
<i>testosterone td gel 10mg/act (2%)</i>	42	<i>theophylline tab er 12hr 450 mg</i>	57
<i>testosterone td gel 12.5 mg/act (1%)</i>	42	<i>theophylline tab er 24hr 400 mg</i>	57
<i>testosterone td gel 20.25 mg/1.25gm</i> <i>(1.62%)</i>	42	<i>theophylline tab er 24hr 600 mg</i>	57
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	42	<i>thiamine hcl inj 100 mg/ml</i>	292
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	42	THIN LANCETS MIS 26G	230
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	42	THIN LANCETS MIS 30G	230
<i>testosterone td gel 50 mg/5gm (1%)</i>	42	THIOLA EC TAB 100MG	204
<i>testosterone td soln 30 mg/act</i>	42	THIOLA EC TAB 300MG	204
TET/DIP TOX INJ 2-2 LF	282	THIOLA TAB 100MG	204
<i>tetrabenazine tab 12.5 mg</i>	270	<i>thioridazine hcl tab 10 mg</i>	128
<i>tetrabenazine tab 25 mg</i>	270	<i>thioridazine hcl tab 100 mg</i>	128
<i>tetracaine hcl ophth soln 0.5%</i>	258	<i>thioridazine hcl tab 25 mg</i>	128
<i>tetracycline hcl cap 250 mg</i>	278	<i>thioridazine hcl tab 50 mg</i>	128
<i>tetracycline hcl cap 500 mg</i>	278	<i>thiotepa for inj 100 mg</i>	103
TETRACYCLINE TAB 250MG	278	<i>thiotepa for inj 15 mg</i>	103
TETRACYCLINE TAB 500MG	278	<i>thiothixene cap 1 mg</i>	130
TETRIX CRE	175	<i>thiothixene cap 10 mg</i>	130
TEVIMBRA INJ 100/10ML	107	<i>thiothixene cap 2 mg</i>	130
<i>texacort sol 2.5%</i>	172	<i>thiothixene cap 5 mg</i>	130
TEXAVITE LQ LIQ	246	<i>thrive gum 2mg mint</i>	275
		THRIVITE 19 TAB	245
		THRIVITE RX TAB 29-1MG	248
		THROMBIN KIT 5000UNIT	215
		THROMBIN-JMI KIT 20000UNT	215
		THROMBIN-JMI KIT 5000UNIT	215
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THROMBIN-JMI SOL 5000UNIT	215
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THYROID TAB 15MG	281
<i>tiadylt cap 120mg/24</i>	<i>142</i>
<i>tiadylt cap 180mg/24</i>	<i>142</i>
<i>tiadylt cap 240mg/24</i>	<i>142</i>
<i>tiadylt cap 300mg/24</i>	<i>142</i>
<i>tiadylt cap 360mg/24</i>	<i>142</i>
<i>tiadylt cap 420mg/24</i>	<i>142</i>
<i>tiagabine hcl tab 12 mg</i>	<i>67</i>
<i>tiagabine hcl tab 16 mg</i>	<i>67</i>
<i>tiagabine hcl tab 2 mg.....</i>	<i>67</i>
<i>tiagabine hcl tab 4 mg</i>	<i>67</i>
TIAZAC CAP 120MG/24	142
TIAZAC CAP 180MG/24	142
TIAZAC CAP 240MG/24.....	142
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TICE BCG INJ	117
TICOVAC INJ	289
TIGAN INJ 100MG/ML.....	84
<i>tigecycline for iv soln 50 mg</i>	<i>276</i>
TIGECYCLINE INJ 50MG.....	276
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TIKOSYN CAP 250MCG	52
TIKOSYN CAP 500MCG.....	52
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TIM/BRIM/DOR SOL	255
TIM/BRIM/DOR SOL /BIMATOP	255
TIM/DORZ/LAT SOL	255
TIMOL/BRIM SOL DORZ/LAT	255
TIMOL/BRIMO/ SOL DORZOL.....	255
TIMOL/LATAN SOL.....	255
TIMOLOL MAL/ SOL BIMATOPR	255
<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	<i>255</i>

<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	<i>255</i>
<i>timolol maleate ophth soln 0.25%.....</i>	<i>255</i>
<i>timolol maleate ophth soln 0.5%.....</i>	<i>255</i>
<i>timolol maleate ophth soln 0.5% (once-</i> <i>daily)</i>	<i>255</i>
<i>timolol maleate preservative free ophth soln</i> <i>0.25%</i>	<i>255</i>
<i>timolol maleate preservative free ophth soln</i> <i>0.5%</i>	<i>255</i>
<i>timolol maleate tab 10 mg</i>	<i>139</i>
<i>timolol maleate tab 20 mg.....</i>	<i>139</i>
<i>timolol maleate tab 5 mg</i>	<i>139</i>
<i>timolol ophth soln 0.5%</i>	<i>255</i>
TIMOPTIC OCU SOL 0.25% OP	255
TIMOPTIC SOL 0.25% OP	255
TIMOPTIC SOL 0.5% OP	255
TIMOPTIC-XE SOL 0.25% OP	255
TIMOPTIC-XE SOL 0.5% OP	255
<i>tinidazole tab 250 mg.....</i>	<i>44</i>
<i>tinidazole tab 500 mg</i>	<i>44</i>
<i>tiopronin tab 100 mg</i>	<i>204</i>
<i>tiopronin tab delayed release 100 mg.....</i>	<i>204</i>
<i>tiopronin tab delayed release 300 mg....</i>	<i>204</i>
<i>tiotropium bromide monohydrate inhal cap</i> <i>18 mcg (base equiv).....</i>	<i>53</i>
TIROSINT CAP 100MCG	281
TIROSINT CAP 112MCG	281
TIROSINT CAP 125MCG.....	281
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TISSEEL KIT 2ML	215
TISSEEL KIT 4ML	215
TISSEEL SOL 10ML	215
TISSEEL SOL 2ML	215
TISSEEL SOL 4ML.....	215

<i>tis-u-sol sol</i>	242	<i>tolvaptan tab 30 mg</i>	194
TIVDAK INJ 40MG.....	107	TOPAMAX SPR CAP 15MG.....	65
TIVICAY PD TAB 5MG.....	133	TOPAMAX SPR CAP 25MG.....	66
TIVICAY TAB 50MG	133	TOPAMAX TAB 100MG.....	66
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	250	TOPAMAX TAB 200MG.....	66
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	250	TOPAMAX TAB 25MG.....	66
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	250	TOPAMAX TAB 50MG	66
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	250	TOPCARE MIS LANC 33G	230
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	250	TOPICORT CRE 0.05%	172
TLANDO CAP 112.5 MG	42	TOPICORT CRE 0.25%	172
TNKASE KIT 50MG.....	211	TOPICORT GEL 0.05%	172
TOBI NEB 300/5ML	20	TOPICORT OIN 0.05%	172
TOBI PODHALR CAP 28MG.....	20	TOPICORT OIN 0.25%	172
TOBRADEX OIN 0.3-0.1%	259	TOPICORT SPR 0.25%.....	172
TOBRADEX ST SUS 0.3-0.05.....	259	<i>topiramate cap er 24hr 100 mg</i>	66
TOBRADEX SUS 0.3-0.1%	259	<i>topiramate cap er 24hr 200 mg</i>	66
<i>tobramycin nebu soln 300 mg/4ml</i>	20	<i>topiramate cap er 24hr 25 mg</i>	66
<i>tobramycin nebu soln 300 mg/5ml</i>	20	<i>topiramate cap er 24hr 50 mg</i>	66
<i>tobramycin ophth soln 0.3%</i>	258	<i>topiramate cap er 24hr sprinkle 100 mg</i> ...	66
<i>tobramycin sulfate for inj 1.2 gm</i>	20	<i>topiramate cap er 24hr sprinkle 150 mg</i> ...	66
<i>tobramycin sulfate inj 1.2 gm/30ml (40</i> <i>mg/ml) (base equiv)</i>	20	<i>topiramate cap er 24hr sprinkle 200 mg</i> ..	66
<i>tobramycin sulfate inj 10 mg/ml (base</i> <i>equivalent)</i>	20	<i>topiramate cap er 24hr sprinkle 25 mg</i>	66
<i>tobramycin sulfate inj 2 gm/50ml (40</i> <i>mg/ml) (base equiv)</i>	20	<i>topiramate cap er 24hr sprinkle 50 mg</i>	66
<i>tobramycin sulfate inj 80 mg/2ml (40</i> <i>mg/ml) (base equiv)</i>	20	<i>topiramate sprinkle cap 15 mg</i>	66
<i>tobramycin-dexamethasone ophth susp</i> <i>0.3-0.1%</i>	260	<i>topiramate sprinkle cap 25 mg</i>	66
TOBREX OIN 0.3% OP	258	<i>topiramate tab 100 mg</i>	66
TODAY SPONGE MIS.....	290	<i>topiramate tab 200 mg</i>	66
<i>tolcapone tab 100 mg</i>	120	<i>topiramate tab 25 mg</i>	66
<i>tolmetin sodium cap 400 mg</i>	29	<i>topiramate tab 50 mg</i>	66
<i>tolterodine tartrate cap er 24hr 2 mg</i>	287	<i>toposar inj 100/5ml</i>	119
<i>tolterodine tartrate cap er 24hr 4 mg</i>	287	<i>toposar inj 1gm/50ml</i>	119
<i>tolterodine tartrate tab 1 mg</i>	287	<i>toposar inj 500/25ml</i>	119
<i>tolterodine tartrate tab 2 mg</i>	287	<i>topotecan hcl for inj 4 mg (base equiv)</i> ...	119
<i>tolvaptan tab 15 mg</i>	194	<i>topotecan hcl inj 4 mg/4ml (base equiv) (for</i> <i>infusion)</i>	120
		TOPOTECAN INJ 4MG/4ML	120
		TOPROL XL TAB 100MG.....	138
		TOPROL XL TAB 200MG	138
		TOPROL XL TAB 25MG.....	138
		TOPROL XL TAB 50MG	138
		<i>toremifene citrate tab 60 mg (base</i> <i>equivalent)</i>	109
		TORISEL INJ 25MG/ML	116
		<i>torpenz tab 10mg</i>	116

<i>torpenz tab 2.5mg</i>	116	<i>trandolapril tab 1 mg</i>	93
<i>torpenz tab 5mg</i>	116	<i>trandolapril tab 2 mg</i>	93
<i>torpenz tab 7.5mg</i>	116	<i>trandolapril tab 4 mg</i>	93
<i>torsemid tab 10 mg</i>	185	<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	99
<i>torsemid tab 100 mg</i>	185	<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	99
<i>torsemid tab 20 mg</i>	185	<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	99
<i>torsemid tab 5 mg</i>	185	<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	99
TOSYMRA SOL 10MG	234	<i>tranexamic acid iv soln 1000 mg/10ml (100</i> <i>mg/ml)</i>	215
TOTECT INJ 500MG	118	<i>tranexamic acid tab 650 mg</i>	215
TOUJEO MAX INJ 300/ML	80	TRANSDERM-SC DIS 1.5MG	84
TOUJEO SOLO INJ 300/ML	80	TRANSDERM-SC DIS 1MG/3DAY	84
<i>tovet aer 0.05%</i>	172	TRANXENE T TAB 7.5MG	51
TOVIAZ TAB 4MG	287	<i>tranylcypromine sulfate tab 10 mg</i>	69
TOVIAZ TAB 8MG	287	TRAVASOL INJ 10%	254
TPN ELECTROL INJ	236	TRAVATAN Z DRO 0.004%	261
TPOXX CAP 200MG	136	TRAVEL LANCE MIS ADV 28G	230
TPOXX INJ	136	<i>travoprost ophth soln 0.004%</i> <i>(benzalkonium free) (bak free)</i>	261
TRACLEER TAB 125MG	146	TRAZIMERA INJ 150MG	106
TRACLEER TAB 32MG	146	TRAZIMERA INJ 420MG	106
TRACLEER TAB 62.5MG	146	<i>trazodone hcl tab 100 mg</i>	71
TRADJENTA TAB 5MG	78	<i>trazodone hcl tab 150 mg</i>	71
<i>tramadol hcl cap er 24hr biphasic release</i> <i>100 mg</i>	38	<i>trazodone hcl tab 300 mg</i>	71
<i>tramadol hcl cap er 24hr biphasic release</i> <i>150 mg</i>	38	<i>trazodone hcl tab 50 mg</i>	71
<i>tramadol hcl cap er 24hr biphasic release</i> <i>200 mg</i>	38	TREANDA INJ 100MG	103
<i>tramadol hcl cap er 24hr biphasic release</i> <i>300 mg</i>	38	TREANDA INJ 25MG	103
<i>tramadol hcl oral soln 5 mg/ml</i>	38	TRECATOR TAB 250MG	101
<i>tramadol hcl tab 100 mg</i>	38	TRELEGY AER 100MCG	56
<i>tramadol hcl tab 25 mg</i>	38	TRELEGY AER 200MCG	57
<i>tramadol hcl tab 50 mg</i>	38	TRELSTAR MIX INJ 11.25MG	109
<i>tramadol hcl tab er 24hr 100 mg</i>	38	TRELSTAR MIX INJ 22.5MG	110
<i>tramadol hcl tab er 24hr 200 mg</i>	38	TRELSTAR MIX INJ 3.75MG	109
<i>tramadol hcl tab er 24hr 300 mg</i>	38	TREMFYA INJ 100MG/ML	168
<i>tramadol hcl tab er 24hr biphasic release</i> <i>100 mg</i>	38	TREMFYA INJ 200/20ML	200
<i>tramadol hcl tab er 24hr biphasic release</i> <i>200 mg</i>	38	TREMFYA INJ 200/2ML	200
<i>tramadol hcl tab er 24hr biphasic release</i> <i>300 mg</i>	38	<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	145
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	40	<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	145

<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	145	<i>triamcinolone acetone oint 0.05%</i>	172
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	145	<i>triamcinolone acetone oint 0.1%</i>	172
TRESIBA FLEX INJ 100UNIT	80	<i>triamcinolone acetone oint 0.5%</i>	172
TRESIBA FLEX INJ 200UNIT	80	<i>triamterene & hydrochlorothiazide cap</i>	
TRESIBA INJ 100UNIT	80	37.5-25 mg.....	185
TRESNI SUP 100MG	29	<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	185
<i>tretinoin cap 10 mg</i>	117	<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	185
<i>tretinoin cream 0.025%</i>	163	<i>triamterene cap 100 mg</i>	186
<i>tretinoin cream 0.05%</i>	163	<i>triamterene cap 50 mg</i>	186
<i>tretinoin cream 0.1%</i>	163	<i>trianex oin 0.05%</i>	173
<i>tretinoin gel 0.01%</i>	163	<i>triazolam tab 0.125 mg</i>	217
<i>tretinoin gel 0.025%</i>	163	<i>triazolam tab 0.25 mg</i>	217
<i>tretinoin gel 0.05%</i>	163	TRIBENZOR20- TAB 5-12.5MG.....	99
<i>tretinoin microsphere gel 0.04%</i>	163	TRIBENZOR40- TAB 10-12.5	99
<i>tretinoin microsphere gel 0.08%</i>	163	TRIBENZOR40- TAB 10-25MG	99
<i>tretinoin microsphere gel 0.1%</i>	163	TRIBENZOR40- TAB 5-12.5MG.....	99
TRETEN INJ.....	208	TRIBENZOR40- TAB 5-25MG	99
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TREXALL TAB 5MG	105	TRICITRASOL CON.....	60
TREXALL TAB 7.5MG.....	105	<i>tricon cap</i>	214
TREXIMET TAB 10-60MG.....	232	TRICOR TAB 145MG.....	89
TREXIMET TAB 85-500MG.....	232	TRICOR TAB 48MG	89
<i>trezix cap</i>	40	<i>tridacaine pad 5%</i>	174
<i>tri femynor tab</i>	154	<i>triderm cre 0.1%</i>	173
TRIAM-BUPIVA SUS 40-5MG.....	159	<i>triderm cre 0.5%</i>	173
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<i>vincristine sulfate iv soln 1 mg/ml</i>	119	VITREXYL TAB IRON	245
<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	119	VIVA DHA CAP	249
<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	119	VIVELLE-DOT DIS 0.025MG	197
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<i>warfarin sodium tab 10 mg</i>	58
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WINRHO SDF INJ 1500UNIT	264	XCOPRI PAK 50-100MG	67
WINRHO SDF INJ 2500UNIT	264	XCOPRI TAB 100MG	67
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<i>wixela inhub aer 100/50</i>	57	XCOPRI TAB 200MG.....	67
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WP THYROID TAB 16.25MG	282	XELJANZ TAB 10MG	25
WP THYROID TAB 32.5MG	282	XELJANZ TAB 5MG	24
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XEROFORM OIL MIS 1.....	179	XPOVIO PAK 50MG.....	110
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XEROFRM PETR PAD 2.....	179	XTAMPZA ER CAP 9MG	39
XEROFRM PETR PAD 4.....	179	XTANDI CAP 40MG.....	110
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XHANCE MIS 93MCG	252	<i>xulane dis 150-35</i>	154
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XIFAXAN TAB 550MG	44	XYLO/EPI 1%- INJ 1:100000	219
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XIGDUO XR TAB 5-1000MG	76	XYLOCAINE INJ 1%	220
XIGDUO XR TAB 5-500MG	76	XYLOCAINE INJ 2%	220
XIIDRA DRO 5%.....	258	XYLOCAINE INJ MPF 0.5%.....	220
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XIMINO CAP 45MG ER	278	XYLOCAINE INJ MPF 1.5%.....	220
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XIPERE SUS 40MG/ML.....	260	XYLO-MPF/EPI INJ 1%	219
XOFIGO INJ 1100KBQ	117	XYLO-MPF/EPI INJ 1.5%	219
XOFLUZA TAB 20MG.....	135	XYLO-MPF/EPI INJ 2%.....	219
XOFLUZA TAB 40MG.....	135	XYNTHA INJ 1000UNIT	208
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XYNTHA INJ 250UNIT	208
XYNTHA INJ 500UNIT	208
XYNTHA SOLOF INJ 1000UNIT	208
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XYNTHA SOLOF INJ 500UNIT	208
XYNTHA SOLOF KIT 250UNIT	209
XYOSTED INJ 100/0.5	43
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YERVOY INJ 200/40ML	108
YERVOY INJ 50/10ML	107
YESCARTA INJ	108
YESINTEK INJ 130/26ML	200
YESINTEK INJ 45/0.5ML	168
YESINTEK INJ 90MG/ML	168
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<i>yl folic aci tab 400mcg</i>	212
YONDELIS INJ 1MG	103
YONSA TAB 125MG	110
YOSPRALA TAB 325-40MG	210
YOSPRALA TAB 81-40MG	210
YUFLYMA 1PEN KIT 80/0.8ML	23
YUPELRI SOL	53
YUSIMRY INJ 40/0.8ML	23
YUTIQ IMP 0.18MG	260
<i>yuvaferm tab 10mcg</i>	290

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<i>zafirlukast tab 10 mg</i>	53
<i>zafirlukast tab 20 mg</i>	53
<i>zaleplon cap 10 mg</i>	217
<i>zaleplon cap 5 mg</i>	217
ZALTRAP INJ 100/4ML	106
ZALTRAP INJ 200/8ML	106
ZANAFLEX CAP 2MG	250
ZANAFLEX CAP 4MG	250

ZANAFLEX CAP 6MG	250
ZANAFLEX TAB 4MG	250
ZANOSAR INJ 1GM	103
ZARONTIN CAP 250MG	68
ZARONTIN SOL 250/5ML	68
ZARXIO INJ 300/0.5	213
ZARXIO INJ 480/0.8	214
ZATEAN-PN CAP DHA	249
ZATEAN-PN CAP PLUS	249
ZAVESCA CAP 100MG	211
<i>zebutal cap</i>	31
ZEGALOGUE INJ 0.6/0.6	77
ZEGERID CAP 20-1100	286
ZEGERID CAP 40-1100	286
ZEGERID POW 20-1680	286
ZEGERID POW 40-1680	286
ZEJULA CAP 100MG	116
ZEJULA TAB 100MG	117
ZEJULA TAB 200MG	117
ZEJULA TAB 300MG	117
ZELAC CAP	82
ZELAPAR TAB 1.25MG	123
ZELBORAF TAB 240MG	117
ZELNORM TAB 6MG	201
ZEMAIRA INJ 1000MG	275
ZEMAIRA INJ 4000MG	275
ZEMAIRA INJ 5000MG	275
ZEMBRACE SYM INJ 3/0.5ML	234
ZEMDRI INJ 500MG/10	20
ZEMPLAR CAP 1MCG	192
ZEMPLAR CAP 2MCG	192
ZEMPLAR INJ 2MCG/ML	192
ZEMPLAR INJ 5MCG/ML	192
<i>zenatane cap 10mg</i>	163
<i>zenatane cap 20mg</i>	163
<i>zenatane cap 30mg</i>	163
<i>zenatane cap 40mg</i>	163
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<i>zenzedi tab 10mg</i>	14	<i>zinc sulfate inj 5 mg/ml</i>	239
<i>zenzedi tab 15mg</i>	14	ZINC SULFATE INJ 5MG/ML	239
<i>zenzedi tab 2.5mg</i>	14	ZINPLAVA SOL 25MG/ML.....	264
<i>zenzedi tab 20mg</i>	14	ZINTREXYL-C TAB.....	245
<i>zenzedi tab 30mg</i>	14	ZIOPTAN DRO 0.0015%	261
<i>zenzedi tab 5mg</i>	14	<i>ziprasidone hcl cap 20 mg</i>	124
<i>zenzedi tab 7.5mg</i>	14	<i>ziprasidone hcl cap 40 mg</i>	124
ZEPATIER TAB 50-100MG	135	<i>ziprasidone hcl cap 60 mg</i>	124
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ZEPOSIA CAP 0.92MG.....	271	<i>ziprasidone mesylate for inj 20 mg (base</i> <i>equivalent)</i>	124
ZEPOSIA CAP STR KIT	271	ZIPSOR CAP 25MG.....	29
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<i>zeruvia pad 4-1%</i>	174	ZIRABEV INJ 400/16ML.....	106
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ZESTORETIC TAB 20-25MG	99	ZITHROMAX SUS 100/5ML	221
ZESTRIL TAB 10MG	93	ZITHROMAX SUS 200/5ML	221
ZESTRIL TAB 2.5MG	93	ZITHROMAX TAB 250MG.....	221
ZESTRIL TAB 20MG	93	ZITHROMAX TAB 500MG	221
ZESTRIL TAB 30MG	93	ZITHROMAX TAB TRI-PAK.....	221
ZESTRIL TAB 40MG	93	ZITHROMAX TAB Z-PAK	221
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ZETIA TAB 10MG	91	ZITUVIMET TAB 50-500MG.....	76
ZETONNA AER 37MCG.....	252	ZITUVIMET XR TAB 100-1000.....	76
ZEVALIN KIT Y-90	108	ZITUVIMET XR TAB 50-1000	76
ZIAC TAB 10/6.25	99	ZITUVIMET XR TAB 50-500MG.....	76
ZIAC TAB 2.5/6.25	99	ZITUVIO TAB 100MG.....	78
ZIAC TAB 5-6.25MG.....	99	ZITUVIO TAB 25MG.....	78
ZIAGEN SOL 20MG/ML	133	ZITUVIO TAB 50MG.....	78
ZIANA GEL	164	ZOCOR TAB 10MG.....	91
<i>zidovudine cap 100 mg</i>	133	ZOCOR TAB 20MG	91
<i>zidovudine syrup 10 mg/ml</i>	133	ZOCOR TAB 40MG	91
<i>zidovudine tab 300 mg</i>	133	ZOHYDRO ER CAP 10MG	39
ZILBRYSQ INJ 16.6MG.....	209	ZOHYDRO ER CAP 15MG.....	39
ZILBRYSQ INJ 23MG.....	209	ZOHYDRO ER CAP 20MG.....	39
ZILBRYSQ INJ 32.4MG	209	ZOHYDRO ER CAP 30MG.....	39
<i>zileuton tab er 12hr 600 mg</i>	54	ZOHYDRO ER CAP 40MG.....	39
ZILRETTA INJ 32MG	159	ZOHYDRO ER CAP 50MG.....	39
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ZINC CHLORID INJ 1MG/ML	239	ZOKINVY CAP 75MG.....	243
ZINC SULFATE INJ 1MG/ML	239	ZOLADEx IMP 10.8MG.....	110
<i>zinc sulfate inj 3 mg/ml</i>	239		

ZOLADEX IMP 3.6MG	110	ZORTRESS TAB 0.75MG.....	242
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zoledronic acid iv soln 5 mg/100ml	187	ZORVOLEX CAP 18MG.....	29
ZOLEDRONIC INJ 4/100ML	187	ZORVOLEX CAP 35MG	29
ZOLINZA CAP 100MG.....	117	ZORYVE CRE 0.15%.....	176
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zolmitriptan nasal spray 5 mg/spray unit	234	ZORYVE MIS 0.3%.....	169
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zolmitriptan tab 2.5 mg	234	ZOSYN SOL 4-0.50GM	266
zolmitriptan tab 5 mg	234	zovia 1/35 tab	154
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ZOLOFT TAB 100MG.....	71	ZOVIRAX OIN 5%.....	169
ZOLOFT TAB 25MG.....	71	ZOVIRAX SUS 200/5ML	135
ZOLOFT TAB 50MG	71	ZTLIDO PAD 1.8%	174
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zolpidem tartrate tab 10 mg	217	ZUBSOLV SUB 11.4-2.9.....	41
zolpidem tartrate tab 5 mg.....	217	ZUBSOLV SUB 2.9-0.71.....	41
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ZOMACTON INJ 5MG.....	189	ZUNVEYL TAB 15MG	269
ZOMIG SPR 2.5MG	234	ZUNVEYL TAB 5MG.....	269
ZOMIG SPR 5MG	234	ZURZUVAE CAP 20MG	69
zomig tab 2.5mg	234	ZURZUVAE CAP 25MG.....	69
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zomig tab 5mg	234	ZYCLARA CRE 3.75%.....	173
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ZONEGRAN CAP 25MG.....	66	ZYDELIG TAB 150MG	117
zonisamide cap 100 mg	66	ZYFLO TAB 600MG	54
zonisamide cap 25 mg.....	66	ZYKADIA TAB 150MG	117
zonisamide cap 50 mg.....	66	ZYLET SUS 0.5-0.3%.....	260
ZONTIVITY TAB 2.08MG	210	ZYMFENTRA INJ 120MG/ML	200
ZORTRESS TAB 0.25MG	242	ZYNLONTA SOL 10MG.....	108
ZORTRESS TAB 0.5MG.....	242	ZYNRELEF INJ 200-6MG.....	29
		ZYNRELEF INJ 400-12MG	29
		ZYPITAMAG TAB 1MG	91
		ZYPITAMAG TAB 2MG.....	91
		ZYPITAMAG TAB 4MG.....	91
		ZYPREXA INJ 10MG	127

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ZYPREXA TAB 10MG.....	127
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ZYVOX SUS 100MG/5M.....	47
ZYVOX TAB 600MG	47