



2025 FORMULARY

EFFECTIVE JANUARY 1, 2025



[AmbetterHealth.com](https://www.AmbetterHealth.com)

Formulary Introduction

FORMULARY

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

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

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

Drug List Key:

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

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

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

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

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

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

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

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

Prior Authorization for Non-Formulary Drugs

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

Formulary Abbreviations:

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

Opioid Medications:

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

Introducción al Formulario

FORMULARIO

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

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

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

Clave de la lista de medicamentos:

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

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

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

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

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

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

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

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

Autorización previa para medicamentos no incluidos en el Formulario

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

Abreviaturas del Formulario:

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

Medicamentos opioides:

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

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XELJANZ TABS 5 MG	4	QL(2 ea daily); SP; PA	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
XELJANZ TABS 10 MG	4	QL(2 ea daily); PA			
Antirheumatic Antimetabolites					
METHOTREXATE	4	QL(1.714 ea daily); SP; PA	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
Anti-TNF-alpha - Monoclonal Antibodies					
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA			
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA PSKT	4	QL(0.143 ea daily); PA
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	SIMPONI ARIA SOLN	4	PA
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	YUFLYMA 1-PEN KIT AJKT	4	QL(0.143 ea daily); PA
CYLTEZO AJKT	4	QL(0.072 ea daily); PA	YUFLYMA 2-PEN KIT AJKT	4	QL(0.29 ea daily); PA
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	YUFLYMA 2-SYRINGE KIT PSKT	4	QL(0.143 ea daily); PA
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 ea daily); PA	YUFLYMA CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	Gold Compounds		
HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML	4	QL(0.143 ea daily); PA	RIDAURA	3	QL(3 ea daily)
HUMIRA PEN AJKT SC 80 MG/0.8ML	4	QL(0.072 ea daily); PA	Interleukin-1 Blockers		
			ARCALYST	4	QL(0.286 ea daily); SP; PA
			Interleukin-6 Receptor Inhibitors		
			KEVZARA SOAJ	4	QL(0.082 ml daily); PA
			KEVZARA SOSY	4	QL(0.082 ml daily); PA
			Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
			<i>celecoxib</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac potassium TABS 50 MG</i>	1B	
<i>diclofenac sodium TB24</i>	1B	
<i>diclofenac sodium TBEC</i>	1B	
<i>diclofenac w/ misoprostol TBEC</i>	1B	
<i>etodolac CAPS</i>	1B	
<i>etodolac TABS</i>	1B	
<i>fenoprofen calcium TABS</i>	1B	QL(4 ea daily); ST
<i>flurbiprofen TABS</i>	1B	
<i>ibuprofen SUSP 100 MG/5ML</i>	1B	RX/OTC
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<i>ibuprofen TABS 800 MG</i>	1B	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
<i>indomethacin CPCR</i>	1B	
<i>ketoprofen CAPS 50 MG</i>	1B	
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 ea daily)
<i>meclofenamate sodium CAPS</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 ea daily); ST
<i>meloxicam TABS</i>	1A	QL(1 ea daily)
<i>nabumetone</i>	1B	
<i>naproxen sodium TABS 550 MG</i>	1B	
<i>naproxen SUSP</i>	1B	PA
<i>naproxen TABS</i>	1B	
<i>naproxen TBEC 500 MG</i>	1B	QL(3 ea daily)
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
Phosphodiesterase 4 (PDE4) Inhibitors		
<i>OTEZLA TABS</i>	4	QL(2 ea daily); PA
<i>OTEZLA TBPK</i>	4	1 package(s) per 180 day(s) retail; PA
<i>OTEZLA TBPK</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	1B	QL(1 ea daily)
Soluble Tumor Necrosis Factor Receptor Agents		
<i>ENBREL MINI SOCT</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SURECLICK SOAJ</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOLN</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOSY 25 MG/0.5ML</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOSY 50 MG/ML</i>	4	QL(0.286 ml daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)
Salicylates		

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)
Opioid Partial Agonists		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl SOLN</i>	1B	
<i>buprenorphine hcl SUBL</i>	1B	QL(3 ea daily)
<i>buprenorphine PTWK</i>	1B	QL(0.143 ea daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
<i>oxandrolone</i>	1B	
Androgens		

Drug Name	Drug Tier	Requirements/Limits
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 ea daily); PA
<i>danazol CAPS</i>	1B	
METHITEST TABS	3	
<i>testosterone cypionate SOLN IM</i>	1B	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	PA
<i>hydrocortisone (intrarectal)</i>	1B	
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC
<i>hydrocortisone acetate (rectal)</i>	1B	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1B	PA
EMVERM CHEW	2	QL(2 ea daily; 6 ea per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail

Drug Name	Drug Tier	Requirements/Limits
<i>ivermectin</i>	1B	QL(9 ea per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1B	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 ea daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 ea daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1B	
NITRO-BID OINT	3	
<i>nitroglycerin CPR</i>	1B	QL(4 ea daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
ANTIANGIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 5 MG</i>	1A	
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
Benzodiazepines		
<i>alprazolam TABS 2 MG</i>	1B	QL(4 ea daily)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 ea daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN OR 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 ea daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 1 MG</i>	1A	QL(4 ea daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 ea daily)
<i>oxazepam CAPS</i>	1B	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl CP12</i>	1B	
<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML</i>	1B	
<i>amiodarone hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>dofetilide</i>	1B	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ml daily); PA
NUCALA SOAJ	4	QL(0.1073 ml daily); PA
NUCALA SOLR	4	QL(0.1073 ea daily); PA
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA
XOLAIR SOLR	4	QL(0.286 ea daily); PA
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	3	Limit 2 inhalers per month; QL(0.44 gm daily)
INCRUSE ELLIPTA	2	QL(1 ea daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)
Leukotriene Modulators		

Drug Name	Drug Tier	Requirements/Limits
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)
<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)
<i>zafirlukast</i>	1B	QL(2 ea daily)
<i>zileuton TB12</i>	3	QL(4 ea daily); PA
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
<i>roflumilast</i>	3	QL(1 ea daily)
Steroid Inhalants		
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA
ARNUITY ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA
<i>fluticasone propionate (inhalation) AEPB</i>	1B	
<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)
PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
QVAR REDHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
Sympathomimetics		
<i>albuterol sulfate AERS</i>	1B	
<i>albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML</i>	1B	QL(15 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	1B	
<i>albuterol sulfate SYRP</i>	1B	
<i>albuterol sulfate TABS</i>	1B	
ANORO ELLIPTA	2	QL(2 ea daily)
<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREZTRI AEROSPHERE	2	QL(0.38 gm daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1B	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail
DULERA	2	
<i>fluticasone furoate-vilanterol</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>fluticasone-salmeterol AERO</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B	
<i>levalbuterol hcl</i>	1B	QL(12 ml daily)
<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)
SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
STRIVERDI RESPIMAT	2	
<i>terbutaline sulfate SOLN</i>	1B	
<i>terbutaline sulfate TABS</i>	1B	
TRELEGY ELLIPTA	2	QL(2 ea daily)
Xanthines		
<i>aminophylline SOLN</i>	1B	
<i>theophylline ELIX</i>	1B	
<i>theophylline SOLN</i>	1B	QL(56 ml daily)
<i>theophylline TB12</i>	1B	
<i>theophylline TB24</i>	1B	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1B	
Direct Factor Xa Inhibitors		
ELIQUIS STARTER PACK TBPK	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail
ELIQUIS TABS	2	QL(2 ea daily)
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
Heparins And Heparinoid-Like Agents		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ml daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ml daily); SP
<i>fondaparinux sodium 5 MG/0.4ML, 7.5 MG/0.6ML, 10 MG/0.8ML</i>	4	SP
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ml per 180 day(s) retail; 4 ml per 180 days mail); SP
FRAGMIN SOSY	4	SP; PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B	
Thrombin Inhibitors		
<i>dabigatran etexilate mesylate CAPS</i>	1B	

ANTICONVULSANTS - Drugs to Treat Seizures

Drug Name	Drug Tier	Requirements/Limits
AMPA Glutamate Receptor Antagonists		
FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA
FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA
FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA
FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA
Anticonvulsants - Benzodiazepines		
<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA
<i>clobazam TABS</i>	1B	QL(2 ea daily); PA
<i>clonazepam TABS</i>	1A	
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
Anticonvulsants - Misc.		
APTIOM	3	QL(2 ea daily); ST
BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 ea daily); PA
BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 ea daily); PA
BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits
BRIVIACT TABS	3	QL(2 ea daily); PA
<i>carbamazepine CHEW</i>	1B	
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)
<i>carbamazepine CP12 100 MG</i>	1B	
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)
<i>carbamazepine SUSP</i>	1B	
<i>carbamazepine TABS</i>	1B	
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 ea daily)
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)
DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA
DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA
DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA
DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA
EPIDIOLEX	3	PA
<i>gabapentin CAPS</i>	1B	
<i>gabapentin SOLN</i>	1B	QL(60 ml daily)
<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)
<i>lacosamide TABS</i>	1B	QL(2 ea daily)
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)
<i>lamotrigine TABS</i>	1B	
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)
<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)
<i>levetiracetam TB24</i>	1B	QL(4 ea daily)
<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA
<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
<i>primidone 50 MG, 250 MG</i>	1B	
<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA
TEGRETOL SUSP (<i>carbamazepine</i>)	2	
TEGRETOL TABS (<i>carbamazepine</i>)	2	
<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>topiramate TABS 200 MG</i>	1B	QL(2 ea daily)
<i>zonisamide CAPS</i>	1B	QL(6 ea daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
GABA Modulators		
<i>tiagabine hcl</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>vigabatrin PACK</i>	4	QL(6 ea daily); SP; PA	<i>mirtazapine TBDP 15 MG</i>	1B	QL(3 ea daily)
<i>vigabatrin TABS</i>	4	QL(6 ea daily); SP; PA	<i>mirtazapine TBDP 45 MG</i>	1B	QL(1 ea daily)
Hydantoins			<i>mirtazapine TBDP 30 MG</i>	1B	QL(1.5 ea daily)
<i>DILANTIN (phenytoin sodium extended)</i>	2		Antidepressants - Misc.		
<i>DILANTIN</i>	2		<i>bupropion hcl TABS</i>	1B	+; QL(3 ea daily)
<i>DILANTIN INFATABS CHEW (phenytoin)</i>	2		<i>bupropion hcl TB12 100 MG</i>	1B	+; QL(4 ea daily)
<i>DILANTIN-125 SUSP (phenytoin)</i>	2		<i>bupropion hcl TB12 150 MG</i>	1B	+; QL(3 ea daily)
<i>fosphenytoin sodium</i>	1B		<i>bupropion hcl TB12 200 MG</i>	1B	+; QL(2 ea daily)
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B		<i>bupropion hcl TB24 300 MG</i>	1B	QL(1 ea daily)
<i>phenytoin sodium SOLN</i>	1B		<i>bupropion hcl TB24 150 MG</i>	1B	QL(3 ea daily)
<i>phenytoin CHEW</i>	1B		Monoamine Oxidase Inhibitors (MAOIs)		
<i>phenytoin SUSP</i>	1B		<i>EMSAM</i>	3	QL(1 ea daily)
Succinimides			<i>MARPLAN</i>	2	QL(6 ea daily)
<i>ethosuximide CAPS</i>	1B	QL(6 ea daily)	<i>phenelzine sulfate</i>	1B	
<i>ethosuximide SOLN</i>	1B	QL(30 ml daily)	<i>tranylcypromine sulfate</i>	1B	
<i>methsuximide</i>	1B	QL(4 ea daily)	N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
<i>ZARONTIN CAPS (ethosuximide)</i>	2	QL(6 ea daily)	<i>SPRAVATO 56MG DOSE</i>	4	PA
Valproic Acid			<i>SPRAVATO 84MG DOSE</i>	4	PA
<i>divalproex sodium TB24</i>	1B		Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>divalproex sodium TBEC</i>	1B		<i>citalopram hydrobromide SOLN</i>	1B	QL(20 ml daily)
<i>valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML</i>	1B		<i>citalopram hydrobromide TABS 40 MG</i>	1B	#; QL(1 ea daily)
<i>valproic acid CAPS</i>	1B		<i>citalopram hydrobromide TABS 10 MG</i>	1B	#; QL(4 ea daily)
ANTIDEPRESSANTS - Drugs to Treat Depression			<i>citalopram hydrobromide TABS 20 MG</i>	1B	#; QL(2 ea daily)
Alpha-2 Receptor Antagonists (Tetracyclics)			<i>escitalopram oxalate SOLN</i>	1B	QL(20 ml daily)
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)	<i>escitalopram oxalate TABS 10 MG</i>	1B	+; QL(2 ea daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	1B	QL(1 ea daily)			
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)			

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl TABS 850 MG</i>	0	QL(3 ea daily)
<i>metformin hcl TB24 750 MG</i>	1B	+; QL(3 ea daily)
<i>metformin hcl TB24 500 MG</i>	1B	+; QL(4 ea daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	+; QL(0.035 ea daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)
Incretin Mimetic Agents		
OZEMPIC SOPN	2	QL(0.108 ml daily); PA
OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily); PA
RYBELSUS TABS	2	QL(1 ea daily); PA
TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	2	QL(0.143 ml daily); PA
VICTOZA (<i>liraglutide</i>)	2	QL(0.3 ml daily); PA
Insulin		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	#, QL(1.34 ml daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	#, QL(1.34 ml daily)
INSULIN ASPART FLEXPEN SOPN	1B	#
INSULIN ASPART PENFILL SOCT	1B	#

Drug Name	Drug Tier	Requirements/Limits
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1B	#
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1B	#
INSULIN ASPART SOLN IJ	1B	#
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	#
INSULIN DEGLUDEC SOLN	2	#
NOVOLIN 70/30 FLEXPEN SUPN	2	#
NOVOLIN 70/30 SUSP	2	#
NOVOLIN N FLEXPEN SUPN	2	#
NOVOLIN N SUSP	2	#
NOVOLIN R FLEXPEN SOPN IJ	2	#
NOVOLIN R SOLN IJ	2	#
REZVOGLAR KWIKPEN	3	PA
SEMGLEE SOLN	2	#
SEMGLEE SOPN	2	#
Insulin Sensitizing Agents		
<i>pioglitazone hcl</i>	1B	+; QL(1 ea daily)
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
FARXIGA	2	QL(1 ea daily)
FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 ea daily)
JARDIANCE	2	QL(1 ea daily)
Sulfonylureas		

Drug Name	Drug Tier	Requirements/Limits
<i>glimepiride 1 MG, 2 MG</i>	1B	+; QL(4 ea daily)
<i>glimepiride 4 MG</i>	1B	+; QL(2 ea daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1B	+; QL(4 ea daily)
<i>glipizide TB24</i>	1B	+; QL(2 ea daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	+; QL(4 ea daily)
<i>glyburide TABS</i>	1B	+; QL(4 ea daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
Antidotes and Specific Antagonists		
<i>deferoxamine mesylate</i>	4	PA
DEFERAL 500 MG (<i>deferoxamine mesylate</i>)	4	PA
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	QL(2 ea per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>naltrexone hcl</i>	1B	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 ea daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	1B	QL(3.34 ml daily)
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 ea daily)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
AKYNZEO SOLR	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 ea daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol CAPS</i>	1B	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS</i>	1B	PA
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 ea daily); PA
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 ea daily); PA
<i>aprepitant MISC</i>	1B	PA
VARUBI TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>micafungin sodium</i>	1B	PA
Antifungals		
ABELCET	3	
<i>amphotericin b IV</i>	3	
<i>amphotericin b liposome</i>	3	
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1B	
<i>griseofulvin ultramicrosize</i>	1B	
<i>nystatin TABS</i>	1B	
<i>terbinafine hcl TABS</i>	1B	QL(1 ea daily)
Imidazole-Related Antifungals		
CRESEMBA CAPS OR 186 MG	3	PA
<i>fluconazole SUSR</i>	1B	
<i>fluconazole TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>itraconazole CAPS</i>	1B	QL(4 ea daily); PA
<i>itraconazole SOLN</i>	1B	QL(20 ml daily); PA
<i>ketoconazole</i>	1B	
<i>posaconazole SUSP</i>	3	QL(20 ml daily)
TOLSURA CAPS	4	PA
<i>voriconazole TABS</i>	1B	QL(4 ea daily)
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
<i>dexchlorpheniramine maleate SOLN</i>	1B	
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate SOLN</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B	
<i>clemastine fumarate SYRP</i>	1B	
<i>clemastine fumarate TABS 2.68 MG</i>	1B	
<i>diphenhydramine hcl CAPS 50 MG</i>	1A	
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1B	
Antihistamines - Non-Sedating		
<i>cetirizine hcl TABS</i>	1A	QL(1 ea daily)
<i>desloratadine TABS</i>	1B	QL(1 ea daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 ea daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ml daily); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 ea daily); RX/OTC
<i>loratadine CAPS</i>	1B	
<i>loratadine CHEW</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>loratadine SOLN</i>	1B	
<i>loratadine TABS</i>	1A	
<i>loratadine TBDP</i>	1B	
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	1B	
<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 ea daily)
<i>promethazine hcl TABS</i>	1B	
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1B	+; QL(4 ea daily)
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)
<i>cholestyramine PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)
<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)
<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)
Fibric Acid Derivatives		

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

Drug Name	Drug Tier	Requirements/Limits
Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl</i>	1B	+
<i>captopril 12.5 MG</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)
<i>enalapril maleate TABS</i>	1B	+
<i>fosinopril sodium</i>	1B	+
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B	+
<i>moexipril hcl</i>	1B	QL(2 ea daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 ea daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)
<i>ramipril CAPS</i>	1B	+
<i>trandolapril 4 MG</i>	1B	+; QL(2 ea daily)
<i>trandolapril 1 MG, 2 MG</i>	1B	+; QL(1 ea daily)
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)
EDARBI	3	QL(1 ea daily); ST
<i>irbesartan</i>	1B	+; QL(1 ea daily)
<i>losartan potassium</i>	1B	+; QL(1 ea daily)
<i>olmesartan medoxomil</i>	1B	+; QL(1 ea daily)
<i>telmisartan</i>	1B	QL(1 ea daily)
<i>valsartan TABS</i>	1B	+; QL(1 ea daily)
Antiadrenergic Antihypertensives		

Drug Name	Drug Tier	Requirements/Limits
<i>clonidine</i>	3	QL(0.15 ea daily)
<i>clonidine hcl TABS</i>	1B	+; QL(8 ea daily)
<i>doxazosin mesylate</i>	1B	
<i>guanfacine hcl</i>	1B	
<i>methyldopa TABS</i>	1B	QL(6 ea daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)
<i>terazosin hcl</i>	1B	
Antihypertensive Combinations		
<i>amlodipine besylate-benazepril hcl</i>	1B	
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST
<i>amlodipine besylate-valsartan</i>	1B	QL(1 ea daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3	
<i>atenolol & chlorthalidone</i>	1B	
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B	
<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 ea daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)
<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>irbesartan-hydrochlorothiazide</i>	1B	+

Drug Name	Drug Tier	Requirements/Limits
<i>lisinopril & hydrochlorothiazide</i>	1B	+
<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	+; QL(1 ea daily)
<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	+; QL(2 ea daily)
<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)
<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 ea daily)
<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 ea daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
Antihypertensives - Misc.		
VECAMYL	3	PA

Drug Name	Drug Tier	Requirements/Limits
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	1B	QL(1 ea daily)
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1B	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1B	
<i>hydralazine hcl TABS</i>	1B	+
<i>minoxidil 2.5 MG, 10 MG</i>	1B	+
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>bacitracin</i>	3	
IMPAVIDO	3	QL(3 ea daily); PA
<i>metronidazole TABS</i>	1B	
<i>trimethoprim TABS</i>	1B	
XIFAXAN 200 MG	3	QL(3 ea daily; 9 ea per 3 day(s) retail; 9 ea per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 ea daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
Carbapenems		
<i>ertapenem sodium IJ</i>	1B	
<i>imipenem-cilastatin IV</i>	1B	
<i>meropenem</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	
Glycopeptides		
<i>vancomycin hcl CAPS</i>	1B	QL(4 ea daily; 40 ea per fill retail)
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B	
Leprostatics		
<i>dapsone</i>	3	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
<i>lincomycin hcl</i>	1B	
Monobactams		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ml daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>linezolid TABS</i>	1B	QL(2 ea daily); PA
SIVEXTRO TABS	3	PA
Polymyxins		
<i>polymyxin b sulfate SOLR</i>	1B	
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	1B	
<i>methenamine hippurate</i>	1B	
<i>nitrofurantoin</i>	1B	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohyd macro</i>	1B	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 ea per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antimalarials		

Drug Name	Drug Tier	Requirements/Limits
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 ea daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 ea daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 ea daily)
KRINTAFEL	3	QL(2 ea per 30 day(s) retail)
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 ea daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	4	PA
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN OR</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>cycloserine</i>	1B	QL(4 ea daily)
<i>ethambutol hcl TABS</i>	1B	
<i>isoniazid SOLN</i>	1B	
<i>isoniazid SYRP</i>	1B	
<i>isoniazid TABS</i>	1B	
PASER PACK	3	QL(3 ea daily)
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
<i>rifampin CAPS</i>	1B	
<i>rifampin SOLR</i>	1B	
SIRTURO	3	PA
TRECATOR	3	QL(4 ea daily)
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
BELRAPZO SOLN	4	PA
<i>bendamustine hcl SOLR</i>	4	SP; PA
BENDAMUSTINE HYDROCHLORIDE SOLN	4	PA
BENDEKA SOLN	4	PA
<i>busulfan SOLN</i>	4	SP; PA
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML</i>	4	PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>carmustine</i>	4	SP; PA
<i>cisplatin SOLN 50 MG/50ML</i>	4	PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1B	PA
<i>cyclophosphamide SOLR IJ</i>	4	SP; PA
EVOMELA IV	4	PA
GLEOSTINE 40 MG, 100 MG	4	PA

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA	TUKYSA	4	PA
LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA	Antineoplastic - EGFR Inhibitors		
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA	ERBITUX	4	SP; PA
MVASI	4	PA	<i>erlotinib hcl</i>	4	QL(1 ea daily); SP; PA
ZALTRAP 100 MG/4ML	4	SP; PA	<i>gefitinib</i>	4	QL(2 ea daily); PA
ZIRABEV	4	PA	GILOTRIF	4	QL(1 ea daily); PA
Antineoplastic - Antibodies			PORTRAZZA	4	PA
ADCETRIS	4	SP; PA	TAGRISSO 40 MG	4	QL(2 ea daily); PA
ARZERRA	4	SP; PA	TAGRISSO 80 MG	4	QL(1 ea daily); PA
BAVENCIO	4	PA	VECTIBIX 100 MG/5ML	4	SP; PA
BESPOUSA	4	PA	VECTIBIX 400 MG/20ML	4	PA
BLINCYTO	4	PA	VIZIMPRO	4	QL(1 ea daily); PA
DARZALEX	4	PA	Antineoplastic - Hedgehog Pathway Inhibitors		
EMPLICITI	4	PA	DAURISMO	4	PA
GAZYVA	4	PA	ERIVEDGE	4	QL(1 ea daily); SP; PA
IMFINZI	4	PA	ODOMZO	4	QL(1 ea daily); PA
KADCYLA	4	PA	Antineoplastic - Hormonal and Related Agents		
KEYTRUDA	4	PA	<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); PA
LIBTAYO	4	PA	<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); SP; PA
LUMOXITI	4	PA	<i>anastrozole</i>	1B	QL(1 ea daily)
MYLOTARG	4	PA	<i>bicalutamide</i>	1B	QL(1 ea daily); SP
OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	4	PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
POTELIGEO	4	PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA
RUXIENCE	4	PA	EMCYT	4	SP; PA
TECENTRIQ 1200 MG/20ML	4	PA	ERLEADA 60 MG	4	QL(4 ea daily); PA
TRUXIMA	4	PA	ERLEADA 240 MG	4	QL(1 ea daily); PA
YERVOY	4	SP; PA	<i>exemestane</i>	4	QL(1 ea daily); SP
Antineoplastic - Anti-HER2 Agents					
KANJINTI	4	PA			
OGIVRI	4	PA			
PERJETA	4	SP; PA			
TRAZIMERA	4	PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FIRMAGON	4	QL(0.143 ea daily); SP; PA	AYVAKIT	4	QL(1 ea daily); PA
<i>flutamide</i>	4	QL(6 ea daily); SP; PA	Antineoplastic - XPO1 Inhibitors		
<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); SP; PA	XPOVIO	4	PA
<i>letrozole</i>	1B		XPOVIO 60 MG TWICE WEEKLY	4	PA
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA	XPOVIO 80 MG TWICE WEEKLY	4	PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 ea daily); SP; PA	Antineoplastic Antibiotics		
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA	<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); SP; PA	<i>dactinomycin</i>	4	SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); SP; PA	<i>daunorubicin hcl SOLN</i>	4	PA
LYSODREN	4	SP; PA	DAUNORUBICIN HYDROCHLORIDE SOLN 50 MG/10ML	4	PA
<i>megestrol acetate SUSP</i>	1B		<i>doxorubicin hcl liposomal IV 2 MG/ML</i>	4	SP; PA
<i>megestrol acetate TABS</i>	1B		<i>doxorubicin hcl SOLN</i>	4	SP; PA
<i>nilutamide</i>	1B	QL(2 ea daily)	<i>doxorubicin hcl SOLR 10 MG</i>	4	PA
NUBEQA	4	QL(4 ea daily); PA	<i>doxorubicin hcl SOLR 50 MG</i>	4	SP; PA
<i>tamoxifen citrate TABS</i>	0		<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>tamoxifen citrate TABS</i>	0		<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA
<i>toremifene citrate</i>	1B		<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA
TRELSTAR MIXJECT	4	SP; PA	<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA
XTANDI CAPS	4	QL(4 ea daily); SP; PA	<i>valrubicin</i>	4	SP; PA
XTANDI TABS 80 MG	4	QL(2 ea daily); PA	Antineoplastic Combinations		
XTANDI TABS 40 MG	4	QL(4 ea daily); PA	KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA
YONSA	4	QL(4 ea daily); PA	KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA	KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA
ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); SP; PA	VYXEOS	4	PA
Antineoplastic - Immunomodulators			Antineoplastic Enzyme Inhibitors		
POMALYST	4	QL(1 ea daily); PA			
Antineoplastic - PDGFR-alpha Inhibitors					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALECENSA	4	QL(4 ea daily); PA	IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA	IMBRUVICA SUSP	4	QL(8 ml daily); PA
ALUNBRIG TBPk	4	QL(1 ea daily); PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
BALVERSA	4	PA	INREBIC	4	PA
BELEODAQ	4	PA	JAKAFI	4	QL(2 ea daily); SP; PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	KISQALI	4	QL(2 ea daily); PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	KISQALI	4	QL(2.5 ea daily); PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	KOSELUGO	4	PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	KYPROLIS	4	PA
BRAFTOVI 75 MG	4	QL(6 ea daily); SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
BRUKINSA	4	PA	LORBRENA	4	QL(1 ea daily); PA
CABOMETYX TABS	4	QL(1 ea daily); PA	LYNPARZA TABS	4	QL(4 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	MEKINIST TABS 0.5 MG	4	QL(3 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	MEKINIST TABS 2 MG	4	QL(1 ea daily); PA
CAPRELSA	4	QL(1 ea daily); SP; PA	MEKTOVI	4	QL(6 ea daily); SP; PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	NINLARO	4	QL(0.143 ea daily); PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
COPIKTRA	4	PA	PIQRAY 200MG DAILY DOSE	4	QL(1 ea daily); PA
<i>dasatinib</i>	4	QL(1 ea daily); SP; PA	PIQRAY 250MG DAILY DOSE	4	QL(1 ea daily); PA
<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA	PIQRAY 300MG DAILY DOSE	4	QL(1 ea daily); PA
IBRANCE CAPS	4	QL(1 ea daily); PA	QINLOCK	4	PA
IBRANCE TABS	4	QL(1 ea daily); PA	RETEVMO CAPS	4	PA
ICLUSIG	4	QL(1 ea daily); PA	<i>romidepsin SOLR</i>	4	SP; PA
<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA	ROZLYTREK CAPS	4	PA
IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA	RUBRACA	4	QL(4 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
SCEMBLIX 100 MG	4	QL(4 ea daily); PA
SCEMBLIX 20 MG, 40 MG	4	QL(2 ea daily); PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA
SPRYCEL (<i>dasatinib</i>)	4	QL(1 ea daily); SP; PA
STIVARGA	4	QL(4 ea daily); SP; PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA
TABRECTA	4	PA
TAFINLAR CAPS	4	QL(4 ea daily); PA
TALZENNA	4	QL(1 ea daily); PA
TALZENNA	4	QL(1 ea daily); PA
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA
TASIGNA 50 MG	4	QL(4 ea daily); PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA
TIBSOVO	4	PA
TURALIO	4	PA
TURALIO	4	AC; PA
VERZENIO	4	QL(2 ea daily); PA
VITRAKVI CAPS	4	PA
VITRAKVI SOLN	4	PA
XALKORI CAPS	4	QL(2 ea daily); SP; PA
XOSPATA	4	PA
ZEJULA CAPS	4	QL(3 ea daily); PA
ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
ZELBORAF	4	QL(8 ea daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits
ZOLINZA	4	QL(4 ea daily); SP; PA
ZYDELIG	4	QL(2 ea daily); PA
Antineoplastic Enzymes		
ONCASPAR	4	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
<i>dacarbazine SOLR 200 MG</i>	4	SP; PA
<i>hydroxyurea</i>	1B	
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
TICE BCG	4	PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
ELITEK	4	PA
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
KHAPZORY	4	PA
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
<i>mesna SOLN</i>	4	PA
MESNEX SOLN (<i>mesna</i>)	4	PA
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA
<i>eribulin mesylate</i>	4	SP; PA
ETOPOPHOS	4	SP; PA
<i>etoposide CAPS</i>	4	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA
HALAVEN (<i>eribulin mesylate</i>)	4	SP; PA
IXEMPRA KIT 15 MG	4	SP; PA
IXEMPRA KIT 45 MG	4	PA
JEVTANA	4	SP; PA
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA
<i>paclitaxel 6 MG/ML, 30 MG/5ML, 300 MG/50ML</i>	4	PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
<i>vinorelbine tartrate 50 MG/5ML</i>	4	PA
Oncolytic Viral Agents		
IMLYGIC	4	PA
Topoisomerase I Inhibitors		
CAMPTOSAR 300 MG/15ML (<i>irinotecan hcl</i>)	4	PA
HYCAMTIN CAPS	4	SP; PA
<i>irinotecan hcl 300 MG/15ML</i>	4	PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
ONIVYDE	4	PA
<i>topotecan hcl SOLN</i>	4	PA
TOPOTECAN HCL SOLN	4	PA
<i>topotecan hcl SOLR</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1B	
<i>benztropine mesylate TABS</i>	1B	
<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>trihexyphenidyl hcl TABS</i>	1B	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1B	QL(8 ea daily)
TASMAR (<i>tolcapone</i>)	3	
<i>tolcapone</i>	3	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1B	
<i>amantadine hcl SOLN</i>	1B	
<i>amantadine hcl TABS</i>	1B	
<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>bromocriptine mesylate CAPS</i>	1B	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>carbidopa-levodopa-entacapone</i>	1B	
<i>carbidopa-levodopa TABS</i>	1B	
<i>carbidopa-levodopa TBCR</i>	1B	
<i>carbidopa-levodopa TBDP</i>	1B	
NEUPRO	2	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1B	
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
Antipsychotics - Misc.		
EQUETRO 200 MG	3	QL(8 ea daily); ST
EQUETRO 100 MG	3	QL(2 ea daily); ST
EQUETRO 300 MG	3	QL(4 ea daily); ST
<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)
<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 ea daily); PA
FANAPT TITRATION PACK	2	PA

Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)
PERSERIS PRSY	2	QL(0.072 ea daily); PA
<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA
<i>risperidone SOLN</i>	1B	QL(8 ml daily)
<i>risperidone TABS</i>	1B	QL(4 ea daily)
<i>risperidone TBDP</i>	1B	QL(4 ea daily)
Butyrophenones		
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)
<i>haloperidol lactate CONC</i>	1B	
<i>haloperidol lactate SOLN</i>	1B	
<i>haloperidol TABS</i>	1B	
Dibenzapines		
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)	<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)
<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)	BIKTARVY	2	QL(1 ea daily)
<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)	CIMDUO	2	QL(1 ea daily)
Phenothiazines			COMBIVIR (<i>lamivudine-zidovudine</i>)	3	
<i>chlorpromazine hcl SOLN</i>	3		COMPLERA	2	QL(1 ea daily)
<i>chlorpromazine hcl TABS</i>	1B		<i>darunavir TABS 600 MG</i>	1B	QL(2 ea daily)
<i>fluphenazine hcl CONC</i>	1B		<i>darunavir TABS 800 MG</i>	1B	QL(1 ea daily)
<i>fluphenazine hcl ELIX</i>	1B		DELSTRIGO	2	QL(1 ea daily)
<i>fluphenazine hcl SOLN</i>	1B		DESCOVY 200 MG-25 MG	2	QL(1 ea daily); PA
<i>fluphenazine hcl TABS</i>	1B		DOVATO	2	QL(1 ea daily)
<i>perphenazine TABS</i>	1B		EDURANT	2	QL(1 ea daily)
<i>prochlorperazine</i>	1B		<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>prochlorperazine maleate TABS</i>	1B		<i>efavirenz CAPS 50 MG</i>	1B	QL(3 ea daily)
<i>thioridazine hcl</i>	1B		<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>trifluoperazine hcl TABS</i>	1B		<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
Quinolinone Derivatives			<i>efavirenz TABS</i>	1B	QL(1 ea daily)
<i>aripiprazole SOLN OR</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)	<i>emtricitabine CAPS</i>	1B	QL(1 ea daily)
<i>aripiprazole TABS</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
REXULTI	3	PA	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)
Thioxanthenes			EMTRIVA CAPS (<i>emtricitabine</i>)	3	QL(1 ea daily)
<i>thiothixene</i>	1B		EMTRIVA SOLN	2	QL(24 ml daily)
ANTIVIRALS - Drugs to Treat Viral Infections					
Antiretrovirals					
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)	EPIVIR SOLN (<i>lamivudine</i>)	3	QL(30 ml daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)	EPIVIR TABS 150 MG (<i>lamivudine</i>)	3	QL(2 ea daily)
<i>abacavir sulfate TABS</i>	1B		EPIVIR TABS 300 MG (<i>lamivudine</i>)	3	QL(1 ea daily)
APTIVUS CAPS	2	QL(4 ea daily)			
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)			

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

Drug Name	Drug Tier	Requirements/Limits
SUSTIVA CAPS 200 MG (<i>efavirenz</i>)	3	QL(2 ea daily)
SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	3	QL(1 ea daily)
SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	3	QL(1 ea daily)
SYMTUZA	2	QL(1 ea daily)
<i>tenofovir disoproxil fumarate</i> TABS	1B	
TIVICAY PD TBSO	2	
TIVICAY TABS	2	QL(2 ea daily)
TRIUMEQ PD TBSO	2	
TRIUMEQ TABS	2	QL(1 ea daily)
TRIZIVIR	3	QL(2 ea daily)
TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	3	QL(1 ea daily)
TYBOST	2	QL(1 ea daily)
VIRACEPT TABS 625 MG	2	QL(4 ea daily)
VIRACEPT TABS 250 MG	2	QL(10 ea daily)
VIREAD POWD	2	QL(7.5 gm daily)
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	3	
VIREAD TABS 150 MG, 200 MG, 250 MG	2	QL(1 ea daily)
ZIAGEN SOLN (<i>abacavir sulfate</i>)	3	QL(32 ml daily)
ZIAGEN TABS (<i>abacavir sulfate</i>)	3	
<i>zidovudine</i> CAPS	1B	
<i>zidovudine</i> SYRP	1B	
<i>zidovudine</i> TABS	1B	
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium</i> SOLR	1B	
<i>valganciclovir hcl</i> TABS	1B	QL(4 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP; PA
<i>entecavir</i> TABS	4	QL(1 ea daily); SP; PA
EPIVIR HBV SOLN	2	QL(60 ml daily); SP; PA
EPIVIR HBV TABS (<i>lamivudine (hbv)</i>)	3	QL(3 ea daily); SP
<i>lamivudine (hbv)</i> TABS	1B	QL(3 ea daily); SP
PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ml daily); PA
<i>ribavirin (hepatitis c)</i> CAPS	1B	QL(7 ea daily)
<i>ribavirin (hepatitis c)</i> TABS 200 MG	1B	QL(7 ea daily)
SOFOSBUVIR/VELPATA SVIR TABS	1B	QL(1 ea daily); PA
VOSEVI	4	QL(1 ea daily); PA
Herpes Agents		
<i>acyclovir</i> CAPS	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)
<i>acyclovir</i> SUSP	1B	QL(13.34 ml daily)
<i>acyclovir</i> TABS OR	1B	QL(5 ea daily)
<i>famciclovir</i> 500 MG	1B	QL(4 ea daily)
<i>famciclovir</i> 125 MG, 250 MG	1B	QL(3 ea daily)
<i>valacyclovir hcl</i> 500 MG	1B	QL(2 ea daily)
<i>valacyclovir hcl</i> 1 GM, 1000 MG	1B	QL(4 ea daily)
Influenza Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate CAPS</i>	1B	QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ml per fill retail); 1 max fill(s) per 90 day(s) retail	<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	Beta Blockers Non-Selective		
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)	HEMANGEOL SOLN OR	4	QL(75 ml daily); PA
BETA BLOCKERS - Drugs to Treat High Blood Pressure			<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
Alpha-Beta Blockers			<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>carvedilol</i>	1B	+	<i>nadolol TABS 80 MG</i>	1B	
<i>carvedilol phosphate</i>	3	QL(1 ea daily)	<i>pindolol TABS</i>	1B	
<i>labetalol hcl SOLN</i>	1B		<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>labetalol hcl TABS 300 MG</i>	1B	++; QL(8 ea daily)	<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	+	<i>propranolol hcl TABS</i>	1B	
Beta Blockers Cardio-Selective			<i>sotalol hcl (afib/afI)</i>	1B	
<i>acebutolol hcl CAPS</i>	1B		<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>atenolol TABS</i>	1B	+	<i>sotalol hcl TABS 240 MG</i>	1B	
<i>betaxolol hcl</i>	1B		<i>timolol maleate TABS</i>	1B	
<i>bisoprolol fumarate</i>	1B	+	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	+	Calcium Channel Blockers		
<i>metoprolol succinate TB24 200 MG</i>	1B	++; QL(2 ea daily)	<i>amlodipine besylate TABS</i>	1B	+
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B		<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	+	<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)
			<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	+
			<i>diltiazem hcl extended release beads 420 MG</i>	1B	
			<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
			<i>diltiazem hcl CP24</i>	1B	+
			<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
DILTIAZEM HCL SOLR	1B	
<i>diltiazem hcl TABS</i>	1B	+
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	+
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 60 MG</i>	1B	+; QL(2 ea daily)
<i>nifedipine TB24 30 MG</i>	1B	+
<i>nifedipine TB24 90 MG</i>	1B	+; QL(1 ea daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B	
<i>verapamil hcl TABS</i>	1B	+
<i>verapamil hcl TBCR</i>	1B	+
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	1B	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (<i>digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	

Drug Name	Drug Tier	Requirements/Limits
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 ea daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
Impotence Agents		
<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA
STENDRA	3	QL(0.134 ea daily)
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
ORENITRAM TBCR	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	4	PA
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA
<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA
OPSUMIT	4	QL(1 ea daily); PA
TRACLEER TBSO	4	QL(2 ea daily); PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); SP; PA	<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ml daily); PA	<i>cephalexin CAPS</i>	1B	
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA	<i>cephalexin SUSR</i>	1B	
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA	Cephalosporins - 2nd Generation		
Pulmonary Hypertension - Prostacyclin Receptor Agonist			<i>cefaclor CAPS</i>	1B	
UPTRAVI TITRATION PACK TBPK	4	1 max fill(s) per 180 day(s) retail; PA	<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA	<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
UPTRAVI TABS 200 MCG	4	PA	<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator			<i>cefprozil SUSR</i>	1B	
ADEMPAS	4	QL(3 ea daily); PA	<i>cefprozil TABS</i>	1B	
Sinus Node Inhibitors			<i>cefuroxime axetil TABS</i>	1B	
<i>ivabradine hcl TABS</i>	3	QL(2 ea daily); PA	<i>cefuroxime sodium IJ 750 MG</i>	1B	
Transthyretin Stabilizers			Cephalosporins - 3rd Generation		
VYNDAMAX	4	QL(1 ea daily); PA	<i>cefdinir CAPS</i>	1B	
VYNDAQEL	4	QL(4 ea daily); PA	<i>cefdinir SUSR</i>	1B	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections			<i>cefixime CAPS</i>	1B	
Cephalosporins - 1st Generation			<i>cefixime SUSR</i>	1B	ST
<i>cefadroxil CAPS</i>	1B		<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B	
<i>cefadroxil SUSR</i>	1B		<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B		<i>cefpodoxime proxetil TABS</i>	1B	
			<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
			<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B	
			<i>ceftriaxone sodium IJ 250 MG</i>	1A	
			Cephalosporins - 4th Generation		
			<i>cefepime hcl SOLR IV 2 GM</i>	1B	
			Cephalosporins - 5th Generation		

Drug Name	Drug Tier	Requirements/Limits
TEFLARO	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	
<i>ethynodiol diacet & eth estrad</i>	0	
<i>levonorgestrel & eth estradiol TABS</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
LO LOESTRIN FE TABS	0	
NATAZIA	0	
NEXTSTELLIS	0	
<i>norethin acet & estrad-fe CAPS</i>	0	
<i>norethin acet & estrad-fe CHEW</i>	0	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>norethindrone & eth estradiol</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone & ethinyl estradiol-fe</i>	0	
<i>norethindrone acet & eth estra TABS</i>	0	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>norgestimate-ethinyl estradiol</i>	0	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
TYBLUME CHEW	0	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	0	
TWIRLA	0	QL(3 ea per 28 day(s) retail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
Emergency Contraceptives		
ELLA	0	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	

Drug Name	Drug Tier	Requirements/Limits
OPILL	0	
SLYND	0	QL(1 ea daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1B	QL(3 ea daily)
<i>deflazacort SUSP</i>	4	PA
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1B	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1B	
<i>dexamethasone ELIX</i>	1B	
<i>dexamethasone SOLN</i>	1B	
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	
EMFLAZA SUSP (<i>deflazacort</i>)	4	PA
<i>hydrocortisone sod succinate 100 MG</i>	1B	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPk</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBPk</i>	3	
<i>prednisolone SOLN</i>	1B	
<i>prednisolone TABS</i>	1B	
<i>prednisone SOLN</i>	1B	
<i>prednisone TABS 1 MG, 5 MG</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TBPk</i>	1B	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetamide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)
<i>benzonatate 200 MG</i>	1B	QL(3 ea daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUEr</i>	1B	
TUZISTRA XR	2	PA
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	

Drug Name	Drug Tier	Requirements/Limits
NEBUSAL NEBU	1B	
sodium chloride (inhalant) NEBU 7 %	1B	
Mucolytics		
acetylcysteine SOLN	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	1B	AL(At least 12 yrs old); ST
adapalene CREA	1B	AL(At least 12 yrs old); ST
adapalene GEL 0.3 %	1B	AL(At least 12 yrs old); ST
adapalene GEL 0.1 %	1B	AL(At least 12 yrs old); ST; RX/OTC
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC
benzoyl peroxide-erythromycin GEL	1B	AL(At least 12 yrs old); PA
benzoyl peroxide FOAM 5.3 %, 9.8 %	1B	AL(At least 12 yrs old); RX/OTC
benzoyl peroxide GEL 5 %	1B	QL(3 gm daily); AL(At least 12 yrs old)
benzoyl peroxide GEL 10 %	1B	AL(At least 12 yrs old)
benzoyl peroxide LIQD 4 %, 7 %, 10 %	1B	AL(At least 12 yrs old)
clindamycin phosphate (topical) FOAM	1B	AL(At least 12 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
clindamycin phosphate (topical) GEL	1B	QL(8 gm daily)
clindamycin phosphate (topical) LOTN	1B	AL(At least 12 yrs old)
clindamycin phosphate (topical) SOLN	1B	QL(4 ml daily); AL(At least 12 yrs old)
clindamycin phosphate (topical) SWAB	1B	AL(At least 12 yrs old)
clindamycin phosphate-benzoyl peroxide (refrigerate)	1B	AL(At least 12 yrs old); PA
clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	1B	AL(At least 12 yrs old); PA
clindamycin phosphate-tretinoin	1B	AL(At least 12 yrs old); ST
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
erythromycin (acne aid) PADS	1B	AL(At least 12 yrs old)
erythromycin (acne aid) SOLN	1B	AL(At least 12 yrs old)
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	3	AL(At least 12 yrs old); PA
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
sulfacetamide sodium (acne)	1B	AL(At least 12 yrs old)
sulfacetamide sodium w/ sulfur CREA 10 %-5 %	1B	AL(At least 12 yrs old)
sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	1B	AL(At least 12 yrs old); ST
sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	1B	AL(At least 12 yrs old)
sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	1B	AL(At least 12 yrs old)
tretinoin microsphere 0.1 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole w/ betamethasone LOTN</i>	1B	
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)
Agents for External Genital and Perianal Warts			ERTACZO	3	QL(2.15 gm daily)
VEREGEN	3	QL(1 gm daily)	<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)
Antibiotics - Topical			<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)
ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)	<i>luliconazole</i>	1B	PA
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)	<i>naftifine hcl CREA 2 %</i>	1B	QL(2 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>gentamicin sulfate (topical) OINT</i>	1B		<i>naftifine hcl CREA 1 %</i>	1B	QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>mupirocin OINT</i>	1B	QL(6 gm daily)	<i>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA	<i>nystatin (topical) OINT</i>	1B	QL(6 gm daily)
Antifungals - Topical			<i>nystatin (topical) POWD EX</i>	1B	QL(10 gm daily)
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC	<i>nystatin-triamcinolone CREA</i>	1B	QL(10 gm daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 gm per fill retail); 1 max fill(s) per 30 day(s) retail	<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)
<i>ciclopirox olamine SUSP</i>	1B		<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>ciclopirox GEL</i>	1B	QL(3.35 gm daily)			
<i>ciclopirox SHAM</i>	1B	QL(10 ml daily)			
<i>ciclopirox SOLN</i>	1B	QL(0.22 ml daily)			
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC			
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ml daily); RX/OTC			
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 gm daily)			

Drug Name	Drug Tier	Requirements/Limits
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ml daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1B	
<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 ea daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 gm daily); RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 gm daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 gm daily)
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ml daily)
PANRETIN	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 gm per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>acitretin 25 MG</i>	1B	QL(2 ea daily)
<i>calcipotriene CREA</i>	1B	QL(4 gm daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 gm daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ml daily); PA
<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ml daily); PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ml daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.072 ml daily); PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA
<i>methoxsalen rapid</i>	1B	QL(4 ea daily)
SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA
SKYRIZI PSKT	4	QL(0.025 ea daily); PA
SKYRIZI SOSY	4	QL(0.025 ml daily); PA
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ml daily); PA
STELARA SOSY 90 MG/ML	4	QL(0.018 ml daily); SP; PA
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily); PA
<i>tazarotene CREA 0.1 %</i>	1B	QL(1 gm daily)
TREMFYA SOAJ	4	QL(0.018 ml daily); PA
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ml daily); PA
Antiseborrheic Products		
<i>selenium sulfide LOTN 2.5 %</i>	1B	
Antivirals - Topical		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)
<i>penciclovir</i>	3	QL(0.18 gm daily)	<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)
Burn Products			<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)
<i>mafenide acetate PACK</i>	3		<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)
<i>silver sulfadiazine</i>	1B	QL(20 gm daily)	<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
SULFAMYLON CREA	3		<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
Corticosteroids - Topical			<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)	<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)	<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>amcinonide OINT</i>	3		<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)	<i>clocortolone pivalate</i>	3	QL(3 gm daily)
<i>betamethasone dipropionate (topical) LOTN</i>	1B		CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)	<i>desonide CREA</i>	1B	QL(4 gm daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)	<i>desonide LOTN</i>	1B	QL(4 ml daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)	<i>desonide OINT</i>	1B	QL(3 gm daily)
			<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)
			<i>desoximetasone GEL</i>	1B	QL(3 gm daily)
			<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diflorasone diacetate</i> CREA	1B	PA	<i>hydrocortisone (topical)</i> OINT 1 %, 2.5 %	1B	QL(15.15 gm daily); RX/OTC
<i>diflorasone diacetate</i> OINT	1B	PA	<i>hydrocortisone butyrate</i> CREA	1B	QL(3 gm daily)
<i>fluocinolone acetonide</i> CREA 0.01 %	1B		<i>hydrocortisone butyrate</i> OINT	1B	QL(3 gm daily)
<i>fluocinolone acetonide</i> CREA 0.025 %	1B	QL(4 gm daily)	<i>hydrocortisone butyrate</i> SOLN	1B	QL(5 ml daily)
<i>fluocinolone acetonide</i> OIL	1B	QL(8 ml daily)	<i>hydrocortisone valerate</i> CREA	1B	
<i>fluocinolone acetonide</i> OINT	1B	QL(4 gm daily)	<i>hydrocortisone valerate</i> OINT	1B	
<i>fluocinolone acetonide</i> SOLN	1B	QL(4 ml daily)	<i>mometasone furoate</i> CREA	1B	QL(3 gm daily)
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)	<i>mometasone furoate</i> OINT	1B	QL(4 gm daily)
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)	<i>mometasone furoate</i> SOLN	1B	QL(5 ml daily)
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)	<i>prednicarbate</i> OINT	1B	
<i>fluocinonide GEL</i>	1B		<i>triamcinolone acetonide (topical)</i> CREA 0.5 %	1B	QL(5 gm daily)
<i>fluocinonide OINT</i>	1B	QL(2 gm daily)	<i>triamcinolone acetonide (topical)</i> CREA 0.1 %	1B	QL(3.34 gm daily)
<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)	<i>triamcinolone acetonide (topical)</i> CREA 0.025 %	1B	QL(15.15 gm daily)
<i>flurandrenolide CREA</i>	2	QL(2 gm daily)	<i>triamcinolone acetonide (topical)</i> LOTN 0.1 %	1B	QL(6 ml daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ml daily)	<i>triamcinolone acetonide (topical)</i> LOTN 0.025 %	1B	
<i>fluticasone propionate</i> CREA 0.05 %	1B	QL(4 gm daily)	<i>triamcinolone acetonide (topical)</i> OINT 0.5 %	1B	QL(6 gm daily)
<i>fluticasone propionate</i> LOTN	1B	QL(6 ml daily)	<i>triamcinolone acetonide (topical)</i> OINT 0.025 %, 0.1 %	1B	QL(15.15 gm daily)
<i>fluticasone propionate</i> OINT	1B	QL(4 gm daily)	Eczema Agents		
<i>halcinonide CREA</i>	1B	PA	DUPIXENT SOAJ SC 200 MG/1.14ML	4	QL(0.082 ml daily); PA
<i>halobetasol propionate</i> CREA	1B	QL(3.5 gm daily)	DUPIXENT SOAJ SC 300 MG/2ML	4	QL(0.29 ml daily); PA
<i>halobetasol propionate</i> OINT	1B	QL(3.5 gm daily)	DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA
HALOG OINT	3	PA			
<i>hydrocortisone (topical)</i> CREA 1 %, 2.5 %	1B	QL(15.15 ea daily); RX/OTC			
<i>hydrocortisone (topical)</i> LOTN 2.5 %	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA	Rosacea Agents		
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA	<i>azelaic acid GEL</i>	1B	QL(1.67 gm daily)
Emollients			<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC	<i>metronidazole (topical) CREA</i>	1B	QL(3 gm daily)
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC	<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)
Enzymes - Topical			<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)
SANTYL OINT	3	PA	<i>metronidazole (topical) LOTN</i>	1B	
Immunomodulating Agents - Topical			Scabicides & Pediculicides		
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)	<i>crotamiton LOTN</i>	1B	PA
Immunosuppressive Agents - Topical			<i>ivermectin (pediculicide)</i>	1B	PA
<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA	<i>malathion</i>	1B	
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA	<i>permethrin CREA</i>	1B	
Keratolytic/Antimitotic/Vesicant Agents			<i>permethrin LIQD EX</i>	1B	
<i>podofilox SOLN</i>	1B		<i>spinosad</i>	1B	PA
Local Anesthetics - Topical			Wound Care Products		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)	REGANEX	3	QL(0.5 gm daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ml daily)	DIAGNOSTIC PRODUCTS		
<i>lidocaine hcl SOLN</i>	1B	QL(10 ml daily)	Diagnostic Drugs		
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 gm daily)	GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)
<i>lidocaine PTCH 5 %</i>	1B	PA	THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
SYNERA PTCH	3	QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	Diagnostic Tests		
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			CHEMSTRIP-K STRP	1B	#
EUCRISA	3	QL(2 gm daily); PA	FORA GTEL BLOOD KETONE TEST STRIPS	1B	#
			FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B	#

Drug Name	Drug Tier	Requirements/Limits
GOJJI BLOOD KETONE TEST STRIPS	1B	#
KETONE TEST STRIPS STRP	1B	#
KETONE STRP	1B	#
KETOSTIX STRP	1B	#
NOVA MAX PLUS KETONE TESTSTRIPS	1B	#
PRECISION XTRA	1B	#
RELION KETONE TEST STRIPS STRP	1B	#
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	#; QL(3.34 ea daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP	1B	#; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	#; QL(3.34 ea daily); RX/OTC

DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes

Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization

DIURETICS - Drugs to Treat Heart, Circulation

Drug Name	Drug Tier	Requirements/Limits
Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1B	QL(6 ea daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 ea daily)
<i>ethacrynic acid</i>	1B	QL(16 ea daily)
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B	
<i>furosemide TABS</i>	1B	
<i>torseamide TABS</i>	1B	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 ea daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1B	
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 ea daily)
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 ea daily)
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 ea daily)
<i>metolazone</i>	1B	QL(2 ea daily)
ENDOCRINE AND METABOLIC AGENTS - MISC.		
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA
<i>risedronate sodium TBEC</i>	1B	PA
<i>teriparatide SOPN</i>	4	QL(0.09 ml daily); SP; PA
TYMLOS	4	PA

Drug Name	Drug Tier	Requirements/Limits
XGEVA SOLN	4	SP; PA
<i>zoledronic acid CONC</i>	4	SP; PA
<i>zoledronic acid SOLN</i>	4	SP; PA
Corticotropin		
ACTHAR GEL	3	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	PA
GnRH/LHRH Antagonists		
<i>ganirelix acetate</i>	4	PA
ORLISSA	2	PA
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA 2 MG	4	PA
EGRIFTA SV	4	PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	PA
GENOTROPIN CART SC	4	PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA
ZORBTIVE SC	4	SP; PA
Hormone Receptor Modulators		
OSPHENA	3	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI SC	4	SP; PA
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA	<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)
SYNAREL	4	SP; PA	Prolactin Inhibitors		
Metabolic Modifiers			<i>cabergoline</i>	1B	
ALDURAZYME	4	SP; PA	Somatostatic Agents		
<i>betaine</i>	4	SP; PA	<i>octreotide acetate SOLN</i>	4	SP; PA
<i>calcitriol CAPS</i>	1B		SIGNIFOR	4	PA
<i>calcitriol SOLN IV</i>	1B		Vasopressin Receptor Antagonists		
<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA	JYNARQUE TBPK	4	SP; PA
<i>doxercalciferol CAPS</i>	1B		<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
<i>doxercalciferol SOLN</i>	1B		ESTROGENS - Hormone Replacement/Modifying Drugs		
ELAPRASE	4	SP; PA	Estrogen Combinations		
LUMIZYME	4	SP; PA	BIJUVA	3	PA
MYALEPT	4	PA	CLIMARA PRO	3	
<i>nitisinone CAPS</i>	4	PA	DUAVEE	3	PA
<i>paricalcitol CAPS</i>	1B		<i>norethindrone acetate-ethinyl estradiol</i>	1B	
<i>paricalcitol SOLN</i>	1B		PREMPHASE	2	
PHEBURANE PLLT	4	PA	PREMPRO	2	QL(1 ea daily)
<i>sapropterin dihydrochloride PACK</i>	4	PA	Estrogens		
<i>sapropterin dihydrochloride TABS</i>	4	PA	DEPO-ESTRADIOL	3	
<i>sodium phenylbutyrate POWD</i>	1B	PA	ELESTRIN GEL	3	
<i>sodium phenylbutyrate TABS</i>	1B	PA	<i>estradiol valerate</i>	1B	
STRENSIQ	4	PA	<i>estradiol GEL 0.06 %</i>	3	
Posterior Pituitary Hormones			<i>estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM</i>	1B	
<i>desmopressin acetate spray</i>	1B		<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)
<i>desmopressin acetate spray refrigerated</i>	1B		<i>estradiol PTWK</i>	1B	
<i>desmopressin acetate SOLN IJ</i>	1B	PA	<i>estradiol TABS</i>	1B	
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits
ESTROGEL GEL (estradiol)	3	
EVAMIST SOLN	3	
MENEST	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 max fill(s) per 30 day(s) retail
<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B	
<i>levofloxacin SOLN OR</i>	1B	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Bile Acid Synthesis Disorder Agents		
CHOLBAM	4	SP; PA
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	1B	QL(3 ea daily)
<i>ursodiol TABS</i>	1B	
Gastrointestinal Chloride Channel Activators		

Drug Name	Drug Tier	Requirements/Limits
<i>lubiprostone</i>	1B	QL(2 ea daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1B	QL(9 ea daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1B	
<i>mesalamine CPDR</i>	1B	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ml daily); PA
SKYRIZI SOLN	4	QL(0.36 ml daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ml daily); PA
<i>sulfasalazine TABS</i>	1B	
<i>sulfasalazine TBEC</i>	1B	
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 ea daily)
LINZESS	2	QL(1 ea daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
MOVANTIK	3	QL(1 ea daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & citric acid</i>	1B	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	
SORBITOL/MANNITOL IRRIGATION	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 ea daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 ea daily)
<i>dutasteride</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>dutasteride-tamsulosin hcl</i>	3	PA
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG</i>	1B	
Urinary Stone Agents		
THIOLA EC TBEC 300 MG (<i>tiopronin</i>)	3	QL(10 ea daily); PA
THIOLA EC TBEC 100 MG (<i>tiopronin</i>)	3	QL(3 ea daily); PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 ea daily); PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 ea daily); PA
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1B	
<i>colchicine TABS</i>	1B	QL(1 ea daily)
<i>febuxostat</i>	1B	QL(1 ea daily); PA
Uricosurics		
<i>probenecid</i>	1B	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA	4	PA
ALPROLIX	4	PA
ALTUVIIIIO	4	PA
BENEFIX KIT	4	PA

Drug Name	Drug Tier	Requirements/Limits
ELOCTATE	4	PA
ESPEROCT	4	PA
IDELVION	4	PA
JIVI	4	PA
KOGENATE FS KIT	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
XYNTHA	4	PA
XYNTHA SOLOFUSE	4	PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOLN</i>	4	QL(9 ml daily); PA
<i>icatibant acetate SOSY</i>	4	QL(9 ml daily); PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	4	QL(2 ea daily); SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 ea daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 ea daily); PA
BRILINTA	2	QL(2 ea daily)
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>dipyridamole</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>prasugrel hcl</i>	1B	QL(1 ea daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 ea daily); PA
CEREZYME 400 UNIT	4	SP; PA
<i>miglustat</i>	4	QL(3 ea daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ml daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP; PA
ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
DOPTELET	4	QL(3 ea daily); PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
GRANIX SOLN	4	PA
GRANIX SOSY	4	PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA	4	PA
MULPLETA	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
NYVEPRIA	4	PA
PROCRIT 40000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROMACTA PACK	4	QL(1 ea daily); PA
PROMACTA TABS	4	QL(1 ea daily); PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA
Hematopoietic Mixtures		
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)
Iron		
<i>ferrous sulfate SOLN 15 MG/ML</i>	0	AL(Up to 1 yrs old)
<i>ferrous sulfate TABS 65 MG, 325 MG</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
INFED	4	PA
VENOFER	4	PA
Stem Cell Mobilizers		
<i>plerixafor</i>	4	SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)
<i>triazolam</i>	1B	
<i>zaleplon 10 MG</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)
<i>zaleplon 5 MG</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1A	QL(1 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1B	QL(1 ea daily)
Orexin Receptor Antagonists		
BELSOMRA	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>calcium polycarbophil TABS</i>	1B		<i>azithromycin PACK</i>	1B	
Laxative Combinations			<i>azithromycin SOLR</i>	1B	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B		<i>azithromycin SUSR</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM</i>	0		<i>azithromycin TABS 500 MG</i>	1B	QL(4 ea per fill retail; 4 per fill mail)
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA	<i>azithromycin TABS 250 MG</i>	1B	QL(6 ea per fill retail; 6 per fill mail)
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B		<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 ea daily)
Laxatives - Miscellaneous			Clarithromycin		
<i>lactulose SOLN</i>	1B		<i>clarithromycin SUSR</i>	1B	
Saline Laxatives			<i>clarithromycin TABS</i>	1B	
OSMOPREP	3	PA	<i>clarithromycin TB24</i>	1B	
Stimulant Laxatives			Erythromycins		
<i>bisacodyl SUPP</i>	1A		<i>erythromycin base CPEP</i>	3	
<i>bisacodyl TBEC</i>	1A		<i>erythromycin base TABS</i>	3	
Surfactant Laxatives			<i>erythromycin base TBEC</i>	1B	
<i>docusate calcium</i>	1A	QL(1 ea daily)	<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>docusate sodium CAPS 250 MG</i>	1A		<i>erythromycin ethylsuccinate TABS</i>	3	
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 ea daily)	Fidaxomicin		
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing			DIFICID TABS	2	
Local Anesthetics - Amides			MEDICAL DEVICES AND SUPPLIES		
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1B		Contraceptives		
MACROLIDES - Drugs to Treat Bacterial Infections			AIMSCO LUBRICATED MISC	0	QL(2 ea daily)
Azithromycin			CAYA DPRH	0	
			DUREX EXTRA SENSITIVE THIN DEVI	0	QL(2 ea daily)
			DUREX EXTRA SENSITIVE THIN MISC	0	QL(2 ea daily)
			DUREX TROPICAL MISC	0	QL(2 ea daily)
			FANTASY LUBRICATED/SPERMICI DE MISC	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FANTASY LUBRICATED MISC	0	QL(2 ea daily)	MAXX PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
FC2 FEMALE CONDOM	0	QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	OMNIFLEX DIAPHRAGM	0	
FEMCAP DEVI	0		REALITY LATEX CONDOMS/LUBRICATED MISC	0	QL(2 ea daily)
KAMELEON LUBRICATED MISC	0	QL(2 ea daily)	REALITY LATEX/ULTRA TEXTURED DEVI	0	QL(2 ea daily)
KIMONO COLORS DEVI	0	QL(2 ea daily)	REALITY LATEX/ULTRA THIN DEVI	0	QL(2 ea daily)
KIMONO LUBRICATED MISC	0	QL(2 ea daily)	TROJAN MAGNUM MISC	0	QL(2 ea daily)
KIMONO MAXX/LARGE FLARE MISC	0	QL(2 ea daily)	TROJAN ULTRA THIN LUBRICATED MISC	0	QL(2 ea daily)
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)	TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)	TROJAN-ENZ LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)	TROJAN-ENZ W/SPERMICIDAL MISC	0	QL(2 ea daily)
KIMONO PS LUBRICATED MISC	0	QL(2 ea daily)	TRUE COVER DEVI	0	QL(2 ea daily)
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX COLOR CONDOMS + LUBE MISC	0	QL(2 ea daily)
KIMONO SENSATION LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED EXTRALARGE MISC	0	QL(2 ea daily)
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	QL(2 ea daily)
KIMONO SPECIAL DEVI	0	QL(2 ea daily)	TRUSTEX LUBRICATED/RIBBED/STUDDERED MISC	0	QL(2 ea daily)
K-Y ME & YOU EXTRA LUBRICATED DEVI	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	QL(2 ea daily)
K-Y ME & YOU INTENSE DEVI	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0	QL(2 ea daily)
MAXX LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)
			TRUSTEX LUBRICATED MISC	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0	QL(2 ea daily)	CONTOUR HIGH CONTROL LIQD	1B	#
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	0	QL(2 ea daily)	DIATRUE GLUCOSE CONTROL SOLUTION LEVEL 3 SOLN	1B	#
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	QL(2 ea daily)	EASY PLUS II CONTROL SOLUTION HIGH SOLN	1B	#
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)	EASY STEP CONTROL SOLUTION HIGH SOLN	1B	#
TRUSTEX/RIA LUBRICATED MISC	0	QL(2 ea daily)	EASY TALK CONTROL SOLUTION HIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		EASY TALK PLUS II CONTROLHIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0		EASY TRAK GLUCOSE CONTROLSOLUTION HIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0		ELEMENT HIGH CONTROL LIQD	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0		EMBRACE GLUCOSE CONTROL SOLUTION HIGH LIQD	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0		EMBRACE TALK GLUCOSE CONTROL SOLUTION HIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0		FORA CONTROL SOLUTION HIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0		FORACARE GDH CONTROL SOLUTION HIGH SOLN	1B	#
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0		FORTISCARE CONTROL SOLUTIONS HIGH SOLN	1B	#
Diabetic Supplies			FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
ADVOCATE CONTROL SOLUTIONHIGH LIQD	1B	#	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
ADVOCATE REDI-CODE+ CONTROL SOLUTION HIGH SOLN	1B	#	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
AGAMATRIX CONTROL HIGH SOLN	1B	#			
CLEVER CHOICE GLUCOSE CONTROL HIGH LIQD	1B	#			

Drug Name	Drug Tier	Requirements/Limits
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
GLUCOCOM HIGH CONTROL LIQD	1B	#
INFINITY CONTROL SOLUTION HIGH SOLN	1B	#
LIBERTY CONTROL SOLUTION HIGH SOLN	1B	#
ONETOUCH DELICA SAFETY LANCING DEVICE	1B	#, RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	#, RX/OTC
ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	1B	#
PRODIGY CONTROL SOLUTIONHIGH SOLN	1B	#
RELION 2-IN-1 LANCET DEVICES 30G	1B	#, RX/OTC
RELION 2-IN-1 LANCING DEVICE 25G	1B	#, RX/OTC
RELION 2-IN-1 LANCING DEVICE 30G	1B	#, RX/OTC
RIGHTEST GC300 HIGH CONTROL LIQD	1B	#
SELECT LANCETS	1B	6.66/day
SOLUS V2 CONTROL HIGH SOLN	1B	#

Drug Name	Drug Tier	Requirements/Limits
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	#
UNISTRIP CONTROL SOLUTIONHIGH SOLN	1B	#
Parenteral Therapy Supplies		
SELECT INSULIN SYRINGES	1B	5/day
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ml daily); PA
EMGALITY SOAJ	2	QL(0.07 ml daily); PA
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA
UBRELVY	3	QL(10 ea per 30 day(s) retail); ST
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)
ERGOMAR SUBL	3	QL(0.667 ea daily)
Serotonin Agonists		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST	<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)	MINERALS & ELECTROLYTES		
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)	Bicarbonates		
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)	<i>sodium acetate SOLN</i>	1B	
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)	SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B	
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)	Calcium		
<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)	<i>calcium chloride (dihydrate) SOLN</i>	1B	
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	Electrolyte Mixtures		
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	<i>dextrose in lactated ringers</i>	1B	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	<i>electrolyte-148</i>	1B	
			<i>electrolyte-a</i>	1B	
			ELLIOTTS B	4	PA
			IONOSOL-MB/DEXTROSE 5%	1B	
			ISOLYTE-P/DEXTROSE 5%	1B	
			ISOLYTE-S	1B	
			KCL 0.3%/D5W/NACL 0.9% (<i>potassium chloride in dextrose & sodium chloride</i>)	1B	
			<i>lactated ringer's</i>	1B	
			NORMOSOL-M/D5W	1B	
			NORMOSOL-R	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PLASMA-LYTE A (electrolyte-a)	1B		potassium acetate SOLN 2 MEQ/ML	1B	
PLASMA-LYTE-148 (electrolyte-148)	1B		potassium bicarbonate TBEF	1B	
potassium chloride in dextrose 5 %-20 MEQ/L	1B		potassium chloride microencapsulated crystals er	1B	
potassium chloride in dextrose & sodium chloride 5 %-0.075 %- 0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %- 30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	1B		potassium chloride CPCR	1B	
potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L- 0.9 %	1B		potassium chloride PACK OR 20 MEQ	1B	PA
POTASSIUM CHLORIDE/DEXTROSE/L ACTATED RINGERS	1B		potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	1B	
POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L- 0.45 % (potassium chloride in nacl)	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride)	1B	
ringer's	1B		potassium chloride TBCR	1B	
Fluoride			Sodium		
sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	0	QL(1 ea daily)	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	1B	
Magnesium			MISCELLANEOUS THERAPEUTIC CLASSES		
magnesium sulfate IJ 50 %	1B		Chelating Agents		
Phosphate			penicillamine CAPS	1B	PA
potassium phosphates 236 MG/ML-224 MG/ML	1B		penicillamine TABS	1B	QL(8 ea daily)
Potassium			trientine hcl 250 MG	4	QL(8 ea daily); SP; PA
			Immunomodulators		
			lenalidomide 20 MG	4	QL(1 ea daily); PA
			lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	4	QL(1 ea daily); SP; PA
			THALOMID	4	QL(3 ea daily); SP; PA
			Immunosuppressive Agents		
			ATGAM IV 50 MG/ML	4	SP; PA
			AZATHIOPRINE	1B	
			azathioprine TABS	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
<i>cyclosporine CAPS</i>	1B	
<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
ENSPRYNG	4	PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); SP; PA
<i>mycophenolate mofetil CAPS</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B	
<i>mycophenolate sodium</i>	1B	
NULOJIX	4	SP; PA
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1B	
<i>tacrolimus CAPS</i>	1B	
THYMOGLOBULIN	4	SP; PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1B	
<i>lactated ringer's (irrigation)</i>	1B	
<i>ringer's irrigation</i>	1B	
<i>water for irrigation, sterile</i>	1B	
Potassium Removing Agents		
LOKELMA	3	QL(1 ea daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)
Anti-infectives - Throat		
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
DEBACTEROL	2	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
<i>pilocarpine hcl (oral)</i>	1B	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 ea daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)	PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC
GNP PRENATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)		2	QL(1 ea daily)
MASONATAL TABS	2	QL(1 ea daily)		2	QL(1 ea daily); RX/OTC
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC		2	QL(1 ea daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 ea daily)		2	QL(1 ea daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 ea daily); RX/OTC		2	QL(1 ea daily)
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC		2	QL(1 ea daily)
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)		2	QL(1 ea daily)
NEONATAL VITAMIN TABS	2	QL(1 ea daily)		2	QL(1 ea daily)
NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC		2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC	2	QL(1 ea daily)	
ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)	2	QL(1 ea daily)	
PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)	2	QL(1 ea daily)	
PRENATAL ONE DAILY TABS	2	QL(1 ea daily)	2	QL(1 ea daily)	
PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC	2	QL(1 ea daily)	
PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	2	QL(1 ea daily); RX/OTC	
PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)	2	QL(1 ea daily); RX/OTC	
PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)	2	QL(1 ea daily); RX/OTC	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms					
Central Muscle Relaxants					
<i>baclofen TABS 10 MG, 20 MG</i>				1B	
<i>carisoprodol TABS</i>				1B	

Drug Name	Drug Tier	Requirements/Limits
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
<i>tizanidine hcl CAPS</i>	1B	
<i>tizanidine hcl TABS</i>	1B	
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	RX/OTC
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to		

Drug Name	Drug Tier	Requirements/Limits
Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX 4.25%/DEXTROSE 10%	3	
CLINIMIX 4.25%/DEXTROSE 5%	3	
CLINIMIX E 5%/DEXTROSE 20%	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Adrenergic Agents			<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
<i>apraclonidine hcl</i>	1B		<i>difluprednate</i>	1B	PA
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B		<i>fluorometholone (ophth) SUSP</i>	1B	
IOPIDINE	3		FML FORTE SUSP	3	PA
Ophthalmic Anti-infectives			FML OINT	3	PA
<i>bacitracin (ophthalmic)</i>	3		LOTEMAX OINT	3	PA
BESIVANCE	3	PA	<i>loteprednol etabonate GEL</i>	1B	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B		<i>loteprednol etabonate SUSP</i>	1B	PA
<i>erythromycin (ophth)</i>	1B		MAXIDEX SUSP OP	3	PA
<i>gatifloxacin (ophth)</i>	1B		<i>neomycin-polymyx-dexameth OINT</i>	1B	
<i>gentamicin sulfate (ophth) OINT</i>	1B		<i>neomycin-polymyx-dexameth SUSP</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B		<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)
<i>levofloxacin (ophth) 0.5 %</i>	1B		PRED MILD	3	PA
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B		PRED-G SUSP	3	PA
NATACYN	2		<i>prednisolone acetate (ophth)</i>	1B	
<i>neomycin-bacitracin zn-polymyxin</i>	1B		PREDNISOLONE SODIUM PHOSPHATE	3	
<i>ofloxacin (ophth)</i>	1B		<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>polymyxin b-trimethoprim</i>	1B		<i>tobramycin-dexamethasone SUSP</i>	1B	
<i>sulfacetamide sodium (ophth) SOLN</i>	1B		ZYLET	3	PA
<i>tobramycin (ophth) SOLN</i>	1B		Ophthalmics - Misc.		
<i>trifluridine</i>	1B		ALOCRIAL	3	PA
ZIRGAN GEL	2		ALOMIDE	3	PA
Ophthalmic Immunomodulators			<i>azelastine hcl (ophth)</i>	1B	
<i>cyclosporine (ophth) EMUL</i>	3	PA	<i>bepotastine besilate</i>	3	PA
Ophthalmic Local Anesthetics			<i>brinzolamide</i>	1B	
<i>proparacaine hcl</i>	1B		<i>bromfenac sodium (ophth)</i>	1B	
Ophthalmic Steroids			<i>cromolyn sodium (ophth)</i>	1B	
ALREX SUSP (<i>loteprednol etabonate</i>)	3	PA	CYSTARAN	2	QL(2.143 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	
LASTACRAFT	3	PA
NEVANAC	3	QL(0.2 ml daily); ST
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<i>travoprost SOLN</i>	1B	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ml daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	PA
<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 ea daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ml daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
Otic Steroids		

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD LIQUID 30 GM/300ML	4	PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMUNEX-C	4	SP; PA
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IJ 1 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
<i>penicillin g potassium 5000000 UNIT</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
PENICILLIN G PROCAINE	3	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>nafcillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>megestrol acetate (appetite)</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1B	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	
<i>lofexidine hcl</i>	1B	QL(224 ea per 14 day(s) retail); PA
LUCEMYRA (<i>lofexidine hcl</i>)	3	QL(224 ea per 14 day(s) retail); PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 ea daily)
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 ea daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 ea daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 ea daily)
<i>galantamine hydrobromide CP24</i>	1B	QL(1 ea daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ml daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 ea daily)
<i>memantine hcl TABS</i>	1B	
<i>memantine hcl TABS</i>	1B	QL(2 ea daily)
<i>rivastigmine tartrate CAPS</i>	1B	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)
Fibromyalgia Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA	LEMTRADA	4	QL(3.25 ml daily); PA
SAVELLA TABS	2	QL(2 ea daily); PA	PLEGRIDY STARTER PACK SOAJ SC	4	QL(0.036 ml daily); PA
Movement Disorder Drug Therapy			PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA
AUSTEDO PATIENT TITRATION KIT TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	PLEGRIDY SOAJ SC 125 MCG/0.5ML	4	QL(0.036 ml daily); PA
AUSTEDO XR PATIENT TITRATION KIT TEPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
AUSTEDO XR TB24	4	QL(1 ea daily); PA	REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
AUSTEDO TABS	4	QL(4 ea daily); PA	REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); SP; PA
INGREZZA CAPS	4	QL(1 ea daily); PA	REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA	REBIF SOSY	4	QL(0.214 ml daily); SP; PA
INGREZZA CPSP	4	QL(1 ea daily); PA	<i>teriflunomide</i>	4	QL(1 ea daily)
<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
Multiple Sclerosis Agents			<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
AVONEX PEN AJKT	4	QL(0.0714 ml daily); SP; PA	<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA
AVONEX PSKT	4	QL(0.0714 ml daily); SP; PA	Pseudobulbar Affect (PBA) Agents		
BETASERON KIT	4	QL(0.0357 ea daily); SP; PA	NUEDEXTA	3	QL(2 ea daily); PA
<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA	Psychotherapeutic and Neurological Agents - Misc.		
<i>dimethyl fumarate CDPK</i>	1B	QL(2 ea daily)	<i>ergoloid mesylates TABS</i>	1B	
<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)	<i>pimozide</i>	1B	
<i> fingolimod hcl</i>	4	QL(1 ea daily)	Smoking Deterrents		
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ml daily)	<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ml daily)	<i>nicotine polacrilex GUM</i>	0	
			<i>nicotine polacrilex LOZG</i>	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NICOTINE TRANSDERMAL SYSTEM KIT	0		Glycylcyclines		
<i>nicotine MISC XX</i>	0	QL(1 ea daily)	<i>tigecycline</i>	1B	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 ea daily)	Tetracyclines		
NICOTROL INHALER INHA	0		<i>demeclocycline hcl TABS</i>	1B	
NICOTROL NS SOLN	0		<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)	<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>varenicline tartrate TBPk</i>	0		<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
Alpha-Proteinase Inhibitor (Human)			<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
PROLASTIN-C SOLN	4	PA	<i>doxycycline hyclate SOLR</i>	1B	
Cystic Fibrosis Agents			<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
KALYDECO TABS	4	QL(2 ea daily); SP; PA	<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
ORKAMBI PACK	4	QL(2 ea daily); PA	<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
ORKAMBI TABS	4	QL(4 ea daily); PA	<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)
PULMOZYME	4	QL(2.5 ml daily); SP; PA	THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
TRIKAFTA TBPk	4	QL(3 ea daily); PA	Antithyroid Agents		
Pulmonary Fibrosis Agents			<i>methimazole TABS</i>	1B	
OFEV	4	QL(2 ea daily); PA	<i>propylthiouracil</i>	1B	
<i>pirfenidone CAPS</i>	4		Thyroid Hormones		
<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
SULFONAMIDES - Drugs to Treat Bacterial Infections			ARMOUR THYROID TABS	2	QL(1 ea daily)
Sulfonamides			<i>levothyroxine sodium TABS</i>	1B	
<i>sulfadiazine TABS</i>	1B		<i>liothyronine sodium SOLN</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections			<i>liothyronine sodium TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
NP THYROID 120 TABS	1B	QL(1 ea daily)
NP THYROID 15 TABS	1B	QL(1 ea daily)
NP THYROID 30 TABS	1B	QL(1 ea daily)
NP THYROID 60 TABS	1B	QL(1 ea daily)
NP THYROID 90 TABS	1B	QL(1 ea daily)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
KINRIX SUSY	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN OR</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)
<i>methscopolamine bromide</i>	1B	
H-2 Antagonists		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>famotidine SOLN 20 MG/2ML</i>	1A	
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B	
<i>famotidine SUSR</i>	1B	QL(10 ml daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC
<i>nizatidine CAPS</i>	1B	
<i>ranitidine hcl TABS 150 MG</i>	1B	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1B	QL(40 ml daily)
<i>sucralfate TABS</i>	1B	QL(4 ea daily)
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 ea daily)
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1B	
NEXIUM 24HR TBEC (<i>esomeprazole magnesium</i>)	1B	QL(2 ea daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)
<i>omeprazole CPDR</i>	1B	QL(2 ea daily)
<i>omeprazole TBEC</i>	1B	QL(2 ea daily)
<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)
<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Ulcer Therapy Combinations			MENVEO SOLR	0	
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail	PNEUMOVAX 23 IJ 25 MCG/0.5ML	0	
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC	PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	0	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms			PREVNAR 13	0	
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)			PREVNAR 20	0	1 max fill(s) per 999 day(s) retail
<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)	VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail
<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA	Viral Vaccines		
<i>oxybutynin chloride SOLN</i>	1B		ABRYSVO	0	
<i>oxybutynin chloride TABS 5 MG</i>	1B		AFLURIA 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail
<i>oxybutynin chloride TB24</i>	1B		AFLURIA 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA	AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)	AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>tolterodine tartrate TABS</i>	1B		AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>trospium chloride CP24</i>	1B	QL(1 ea daily)	AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>trospium chloride TABS</i>	1B	QL(3 ea daily)	AREXVY	0	
Urinary Antispasmodics - Cholinergic Agonists			COMIRNATY 2023-24 SUSP	0	
<i>bethanechol chloride 25 MG</i>	1B				
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)			
Urinary Antispasmodics - Direct Muscle Relaxants					
<i>flavoxate hcl</i>	1B				
VACCINES					
Bacterial Vaccines					
MENACTRA	0				
MENQUADFI	0				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMIRNATY 2023-24 SUSY	0		FLUBLOK QUADRIVALENT 2023-2024	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY 2024-25 SUSY	0		FLUCELVAX 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail
COMIRNATY SUSP	0		FLUCELVAX 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUAD 2024-2025	0	1 max fill(s) per 180 day(s) retail	FLUCELVAX QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLULAVAL 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLULAVAL QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLULAVAL QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK 2024-2025 SOSY	0	1 max fill(s) per 180 day(s) retail	FLUMIST NASAL VACCINE 2024-2025	0	1 max fill(s) per 180 day(s) retail
FLUBLOK QUADRIVALENT 2022-2023	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	HAVRIX	0	1 max fill(s) per 365 day(s) retail
FLUZONE 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail	HEPLISAV-B SOSY	0	2 max fill(s) per 365 day(s) retail
FLUZONE 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	IPOL INACTIVATED IPV	0	1 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail	JANSSEN COVID-19 VACCINE	0	
FLUZONE HIGH-DOSE PF 2022-2023	0	1 max fill(s) per 180 day(s) retail	M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE PF 2023-2024	0	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0	
FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	0	
FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	0	
FLUZONE QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	0	
FLUZONE QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE6MO-5Y SUSP	0	
GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail	MODERNA COVID-19 VACCINE SUSP	0	
GARDASIL 9 SUSY	0	3 max fill(s) per 365 day(s) retail	NOVAVAX COVID-19 VACCINE/2023-24 SUSP	0	
			NOVAVAX COVID-19 VACCINE/2024-25 SUSY	0	
			NOVAVAX COVID-19 VACCINE SUSP	0	
			PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0	
			PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	0	
			PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0		SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	0		SPIKEVAX COVID-19 VACCINE SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6 M-4Y	0		TWINRIX SUSY	0	3 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	0		VAQTA	0	1 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE SUSP	0		VARIVAX SUSR IJ 1350 PFU/0.5ML	0	2 max fill(s) per 365 day(s) retail
PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail	VAGINAL AND RELATED PRODUCTS		
PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail	Spermicides		
RECOMBIVAX HB SUSP	0	1 max fill(s) per 365 day(s) retail	TODAY SPONGE MISC	0	
RECOMBIVAX HB SUSY	0	1 max fill(s) per 365 day(s) retail	Vaginal Anti-infectives		
ROTARIX SUSP	0		<i>clindamycin phosphate vaginal CREA</i>	1B	
ROTARIX SUSR	0	1 max fill(s) per 365 day(s) retail	<i>clotrimazole vaginal CREA 1 %</i>	1B	
ROTATEQ SOLN	0	1 max fill(s) per 365 day(s) retail	GYNAZOLE-1	3	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
			<i>metronidazole vaginal</i>	1B	
			<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
			<i>terconazole vaginal CREA</i>	1B	
			<i>terconazole vaginal CREA</i>	1B	
			<i>terconazole vaginal SUPP</i>	1B	
			Vaginal Anti-inflammatory Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)
<i>estradiol vaginal TABS</i>	1B	
FEMRING	3	PA
PREMARIN	2	QL(1.5 gm daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN OR</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
NIACIN TR TBCR	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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cefdinir CAPS	36	chlordiazepoxide hcl-clidinium bromide	66	cidofovir	33
cefdinir SUSR	36	chlordiazepoxide-amitriptyline	63	cilostazol	50
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clemastine fumarate SYRP	18	clobazam TABS	11	clozapine TBDP 12.5 MG, 150 MG 30	
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flurandrenolide CREA	43	FLUZONE QUADRIVALENT 2022-2023 SUSY	69	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	54
flurandrenolide LOTN	43	FLUZONE QUADRIVALENT 2023-2024 SUSP	69	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	54
flurazepam hcl	51	FLUZONE QUADRIVALENT 2023-2024 SUSY	69	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	54
flurbiprofen sodium	62	FML FORTE SUSP	61	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	55
flurbiprofen TABS	4	FML OINT	61	FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	55
flutamide	26	folic acid TABS	50	FREESTYLE LIBRE 3/READER/GLUCOSE	
fluticasone furoate-vilanterol	10	FOLOTYN 40 MG/2ML	24		
fluticasone propionate (inhalation) AEPB	9	fondaparinux sodium 2.5 MG/0.5ML .	11		
fluticasone propionate (nasal) SUSP .	60	fondaparinux sodium 5 MG/0.4ML,	7.5 MG/0.6ML, 10 MG/0.8ML		
fluticasone propionate CREA 0.05 %	43				
fluticasone propionate hfa	9				
fluticasone propionate LOTN	43				
fluticasone propionate OINT	43				
fluticasone-salmeterol AEPB 100					

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

GRASTEK SUBL	2	HUMIRA PEN AJKT SC 80 MG/0.8ML	3	325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6
griseofulvin microsize SUSP	18	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML	3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	7
griseofulvin microsize TABS	18	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	3	hydrocodone-ibuprofen 7.5 MG-200 MG	6
griseofulvin ultramicrosize	18	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML	3	hydrocortisone (intrarectal)	7
guanfacine hcl (adhd)	1	HUMIRA PSKT	3	hydrocortisone (rectal) EX	7
guanfacine hcl	20	HUMULIN R U-500 (CONCENTRATED) SOLN SC	16	hydrocortisone (topical) CREA 1 %, 2.5 %	43
GYNAZOLE-1	70	HUMULIN R U-500 KWIKPEN SOPN SC	16	hydrocortisone (topical) LOTN 2.5 % .	43
HAEGARDA SOLR SC	50	HYCAMTIN CAPS	29	hydrocortisone (topical) OINT 1 %, 2.5 %	43
HALAVEN (eribulin mesylate)	29	hydralazine hcl SOLN	21	hydrocortisone acetate (rectal)	7
halcinonide CREA	43	hydralazine hcl TABS	21	hydrocortisone butyrate CREA	43
halobetasol propionate CREA	43	hydrochlorothiazide CAPS	45	hydrocortisone butyrate OINT	43
halobetasol propionate OINT	43	hydrochlorothiazide TABS 12.5 MG 46		hydrocortisone butyrate SOLN	43
HALOG OINT	43	hydrochlorothiazide TABS 25 MG, 50 MG	46	hydrocortisone sod succinate 100 MG	38
haloperidol decanoate	30	hydrocodone bitartrate T24A	5	hydrocortisone TABS	38
haloperidol lactate CONC	30	hydrocodone polistirex- chlorpheniramine polistirex SUER .	38	hydrocortisone vaginal	71
haloperidol lactate SOLN	30	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	6	hydrocortisone valerate CREA	43
haloperidol TABS	30	hydrocodone-acetaminophen SOLN .	6	hydrocortisone valerate OINT	43
HAVRIX	69	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	6	hydrocortisone w/acetic acid	62
HEMANGEOL SOLN OR	34	hydrocodone-acetaminophen TABS		hydromorphone hcl LIQD	5
heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	11			hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	5
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11				5	
HEPLISAV-B SOSY	69			hydromorphone hcl TABS	5
HUMATROPE CART IJ	46			hydromorphone hcl TB24 32 MG ...	5
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	3			hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	5
HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML	3				

hydroxychloroquine sulfate 100 MG 23	ifosfamide SOLR24	INSULIN ASPART PENFILL SOCT 16
hydroxychloroquine sulfate 200 MG 23	IFOSFAMIDE SOLR24	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN16
hydroxychloroquine sulfate 400 MG 23	imatinib mesylate27	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP16
hydroxyurea28	IMBRUVICA CAPS 140 MG27	INSULIN ASPART SOLN IJ 16
hydroxyzine hcl SOLN 50 MG/ML ..8	IMBRUVICA CAPS 70 MG27	INSULIN DEGLUDEC FLEXTOUCH SOPN 16
hydroxyzine hcl SYRP8	IMBRUVICA SUSP27	INSULIN DEGLUDEC SOLN 16
hydroxyzine hcl TABS8	IMBRUVICA TABS27	INTELENCE 100 MG (etravirine) ..32
hydroxyzine pamoate CAPS8	IMFINZI25	INTELENCE 200 MG (etravirine) ..32
HYPERSAL NEBU38	imipenem-cilastatin IV22	INTELENCE 25 MG32
HYQVIA62	imipramine hcl TABS14	IONOSOL-MB/DEXTROSE 5% ...56
HYSINGLA ER T24A5	imipramine pamoate14	IOPIDINE61
ibandronate sodium SOLN46	imiquimod 5 %44	IPOL INACTIVATED IPV69
ibandronate sodium TABS46	IMLYGIC29	ipratropium bromide (nasal) 0.03 % 60
IBRANCE CAPS27	IMPAVIDO21	ipratropium bromide (nasal) 0.06 % 60
IBRANCE TABS27	INCRELEX46	ipratropium bromide SOLN 0.02 % .9
ibuprofen SUSP 100 MG/5ML4	INCRUSE ELLIPTA9	ipratropium-albuterol SOLN10
ibuprofen TABS 400 MG, 600 MG ..4	indapamide TABS 1.25 MG46	irbesartan20
ibuprofen TABS 800 MG4	indapamide TABS 2.5 MG46	irbesartan-hydrochlorothiazide20
icatibant acetate SOLN50	indomethacin CAPS 25 MG, 50 MG 4	irinotecan hcl 300 MG/15ML29
icatibant acetate SOSY50	indomethacin CPCR4	irinotecan hcl 40 MG/2ML, 100 MG/5ML29
ICLUSIG27	INFED51	irrigation solutions, physiological ..58
icosapent ethyl 1 GM19	INFINITY CONTROL SOLUTION HIGH SOLN55	ISENTRESS CHEW32
idarubicin hcl 20 MG/20ML26	INFLECTRA SOLR48	ISENTRESS HD TABS32
idarubicin hcl 5 MG/5ML, 10 MG/10ML26	INGREZZA CAPS64	ISENTRESS PACK32
IDELVION50	INGREZZA CPPK64	
IFEX SOLR24	INGREZZA CPSP64	
ifosfamide SOLN 1 GM/20ML24	INLYTA24	
	INREBIC27	
	INSULIN ASPART FLEXPEN SOPN . 16	

ISENTRESS TABS	32	JIVI	50	KIMONO MAXX/LARGE FLARE MISC	53
ISOLYTE-P/DEXTROSE 5%	56	JULUCA	32	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	53
ISOLYTE-S	56	JYNARQUE TBPK	47	KIMONO PLUS SPERMICIDE LUBRICATED MISC	53
isoniazid SOLN	23	KADCYLA	25	KIMONO PLUS SPERMICIDE/LUBRICATED MISC	53
isoniazid SYRP	23	KALETRA SOLN (lopinavir-ritonavir) . 32		KIMONO PLUS SPERMICIDE/LUBRICATED MISC	53
isoniazid TABS	23	KALETRA TABS (lopinavir-ritonavir) . 32		KIMONO PS LUBRICATED MISC .53	
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	8	KALYDECO TABS	65	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	53
isosorbide dinitrate-hydralazine hcl 35		KAMELEON LUBRICATED MISC .53		KIMONO SENSATION LUBRICATED MISC	53
isosorbide mononitrate TABS	8	KANJINTI	25	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	53
isosorbide mononitrate TB24	8	KCL 0.3%/D5W/NAACL 0.9% (potassium chloride in dextrose & sodium chloride)	56	KIMONO SPECIAL DEVI	53
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	39	KEPIVANCE 6.25 MG	28	KINRIX SUSY	66
isradipine CAPS	35	ketoconazole (topical) CREA	40	KISQALI	27
itraconazole CAPS	18	ketoconazole (topical) SHAM 2 % .40		KISQALI FEMARA 200 DOSE	26
itraconazole SOLN	18	ketoconazole	18	KISQALI FEMARA 400 DOSE	26
ivabradine hcl TABS	36	KETONE STRP	45	KISQALI FEMARA 600 DOSE	26
ivermectin (pediculicide)	44	KETONE TEST STRIPS STRP ...	45	KOGENATE FS KIT	50
ivermectin	8	ketoprofen CAPS 50 MG	4	KOSELUGO	27
IXEMPRA KIT 15 MG	29	ketorolac tromethamine (ophth) ..	62	KOVALTRY	50
IXEMPRA KIT 45 MG	29	ketorolac tromethamine TABS	4	KP PRENATAL MULTIVITAMINS TABs	59
JAKAFI	27	KETOSTIX STRP	45	KRINTAFEL	23
JANSSEN COVID-19 VACCINE ..	69	ketotifen fumarate (ophth) 0.035 % 62		K-Y ME & YOU EXTRA LUBRICATED DEVI	53
JANUMET TABS	15	KEVZARA SOAJ	3	K-Y ME & YOU INTENSE DEVI ...	53
JANUMET XR TB24 1000 MG-100 MG	15	KEVZARA SOSY	3		
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	15	KEYTRUDA	25		
JANUVIA	16	KHAPZORY	28		
JARDIANCE	16	KIMONO COLORS DEVI	53		
JEVTANA	29	KIMONO LUBRICATED MISC	53		

KYPROLIS	27	LASTACRAFT	62	levetiracetam TB24	12
labetalol hcl SOLN	34	latanoprost SOLN	62	levobunolol hcl 0.5 %	60
labetalol hcl TABS 100 MG, 200 MG . 34		leflunomide	4	levocetirizine dihydrochloride SOLN 18	
labetalol hcl TABS 300 MG	34	LEMTRADA	64	levocetirizine dihydrochloride TABS 18	
lacosamide SOLN IV 200 MG/20ML . 12		lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	57	levofloxacin (ophth) 0.5 %	61
lacosamide TABS	12	lenalidomide 20 MG	57	levofloxacin in d5w 5 %-500 MG/100ML	48
lactated ringer's (irrigation)	58	LENVIMA 10 MG DAILY DOSE ..	24	levofloxacin SOLN OR	48
lactated ringer's	56	LENVIMA 12MG DAILY DOSE ..	24	levofloxacin TABS 250 MG, 750 MG . 48	
lactic acid (ammonium lactate) CREA	44	LENVIMA 14 MG DAILY DOSE ..	24	levofloxacin TABS 500 MG	48
lactic acid (ammonium lactate) LOTN 12 %	44	LENVIMA 18 MG DAILY DOSE ..	24	levonorgestrel & eth estradiol TABS 37	
lactulose (encephalopathy)	48	LENVIMA 20 MG DAILY DOSE ..	24	levonorgestrel (emergency oc) 1.5 MG	37
lactulose SOLN	52	LENVIMA 24 MG DAILY DOSE ..	25	levonorgestrel-eth estradiol (triphasic)	37
lamivudine (hbv) TABS	33	LENVIMA 4 MG DAILY DOSE	25	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	37
lamivudine SOLN	32	LENVIMA 8 MG DAILY DOSE	25	levonorgestrel-ethinyl estradiol (continuous)	37
lamivudine TABS 150 MG	32	letrozole	26	levonorgestrel-ethinyl estradiol-iron 37	
lamivudine TABS 300 MG	32	leucovorin calcium SOLR	28	levorphanol tartrate TABS 2 MG	5
lamivudine-zidovudine	32	leucovorin calcium TABS	28	levothyroxine sodium TABS	65
lamotrigine CHEW 25 MG	12	LEUKERAN	24	LEXIVA SUSP	32
lamotrigine CHEW 5 MG	12	LEUKINE SOLR IJ	50	LEXIVA TABS (fosamprenavir calcium)	32
lamotrigine TABS	12	leuprolide acetate KIT IJ 1 MG/0.2ML	26	LIBERTY CONTROL SOLUTION HIGH SOLN	55
lamotrigine TBDP	12	levabuterol hcl	10	LIBTAYO	25
LANOXIN SOLN IJ (digoxin)	35	levabuterol hcl 1.25 MG/0.5ML	10	lidocaine hcl (local anesth.) SOLN	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	35	levabuterol tartrate	10		
lansoprazole CPDR 15 MG	66	levetiracetam SOLN IV 500 MG/5ML 12			
lansoprazole CPDR 30 MG	66	levetiracetam TABS 1000 MG	12		
lanthanum carbonate CHEW	49	levetiracetam TABS 250 MG, 750 MG	12		
lapatinib ditosylate	27	levetiracetam TABS 500 MG	12		

0.5 %, 1 %, 2 %	52	loratadine CHEW	18	LUPRON DEPOT-PED (1-MONTH)	46
lidocaine hcl (mouth-throat) 2 %	58	loratadine SOLN	19	LUPRON DEPOT-PED (3-MONTH)	11.25 MG
lidocaine hcl (mouth-throat) 4 %	58	loratadine TABS	19	LUPRON DEPOT-PED (3-MONTH)	30 MG
lidocaine hcl GEL 2 %	44	loratadine TBDP	19	lurasidone hcl 20 MG, 40 MG, 60	MG, 120 MG
lidocaine hcl PRSY	44	lorazepam CONC	8	lurasidone hcl 80 MG	30
lidocaine hcl SOLN	44	lorazepam TABS 0.5 MG, 2 MG	8	LYNPARZA TABS	27
lidocaine PTCH 5 %	44	lorazepam TABS 1 MG	8	LYSODREN	26
lidocaine-prilocaine CREA	44	LORBRENA	27	mafenide acetate PACK	42
lincomycin hcl	22	losartan potassium &		magnesium sulfate IJ 50 %	57
linezolid SUSR	22	hydrochlorothiazide 12.5 MG-100		malathion	44
linezolid TABS	22	MG, 25 MG-100 MG	21	maraviroc TABS 150 MG	32
LINZESS	48	losartan potassium &		maraviroc TABS 300 MG	32
liothyronine sodium SOLN	65	hydrochlorothiazide 12.5 MG-50 MG	21	MARPLAN	13
liothyronine sodium TABS	65	losartan potassium	20	MASONATAL TABS	59
lisdexamfetamine dimesylate CAPS 1		LOTEMAX OINT	61	MATULANE	28
lisdexamfetamine dimesylate CHEW	1	loteprednol etabonate GEL	61	MAXIDEX SUSP OP	61
lisinopril & hydrochlorothiazide	21	loteprednol etabonate SUSP	61	MAXX LUBRICATED MISC	53
lisinopril TABS 2.5 MG, 5 MG, 10		lovastatin TABS 10 MG, 20 MG	19	MAXX PLUS SPERMICIDE	
MG, 20 MG, 30 MG, 40 MG	20	lovastatin TABS 40 MG	19	LUBRICATED MISC	53
lithium	30	loxapine succinate	30	meclizine hcl TABS 12.5 MG	17
lithium carbonate CAPS	30	lubiprostone	48	meclizine hcl TABS 25 MG	17
lithium carbonate TABS	30	LUCEMYRA (lofexidine hcl)	63	meclofenamate sodium CAPS	4
lithium carbonate TBCR	30	luliconazole	40	MEDROL TABS	38
LO LOESTRIN FE TABS	37	LUMIZYME	47	medroxyprogesterone acetate	
lofexidine hcl	63	LUMOXITI	25	(contraceptive) SUSP IM	37
LOKELMA	58	LUPRON DEPOT (1-MONTH) KIT IM	26	medroxyprogesterone acetate	
loperamide hcl CAPS	17	LUPRON DEPOT (3-MONTH) KIT IM	26	(contraceptive) SUSY IM	37
lopinavir-ritonavir SOLN	32	LUPRON DEPOT (4-MONTH) IM	26	medroxyprogesterone acetate 10 MG	
lopinavir-ritonavir TABS	32	LUPRON DEPOT (6-MONTH) IM	26		63
loratadine CAPS	18				

medroxyprogesterone acetate 2.5 MG, 5 MG	63	mesalamine TBEC 1.2 GM	48	methotrexate sodium TABS 2.5 MG 24	
mefenamic acid CAPS	4	mesalamine TBEC 800 MG	48	methoxsalen rapid	41
mefloquine hcl	23	mesna SOLN	28	methscopolamine bromide	66
megestrol acetate (appetite)	63	MESNEX SOLN (mesna)	28	methsuximide	13
megestrol acetate SUSP	26	metaxalone 800 MG	60	methyl dopa TABS	20
megestrol acetate TABS	26	metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 10 MG ..	2
MEKINIST TABS 0.5 MG	27	metformin hcl TABS 500 MG	15	methylphenidate hcl CHEW 2.5 MG 2	
MEKINIST TABS 2 MG	27	metformin hcl TABS 850 MG	16	methylphenidate hcl CHEW 5 MG ..	2
MEKTOVI	27	metformin hcl TB24 500 MG	16	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG	2
meloxicam TABS	4	metformin hcl TB24 750 MG	16	methylphenidate hcl CP24 30 MG ..	2
melphalan	24	methadone hcl CONC	5	methylphenidate hcl CP24	2
melphalan hcl IV	24	methadone hcl SOLN IJ 10 MG/ML ..	5	methylphenidate hcl CP24	2
memantine hcl TABS	63	METHADONE HCL SOLN IJ	5	methylphenidate hcl CPRC	2
MENACTRA	67	methadone hcl SOLN OR 10 MG/5ML ..	5	methylphenidate hcl SOLN	2
MENEST	48	methadone hcl SOLN OR 5 MG/5ML 5	5	methylphenidate hcl TABS 10 MG, 20 MG	2
MENOSTAR PTWK	48	methadone hcl TABS 10 MG	5	methylphenidate hcl TABS 5 MG ...	2
MENQUADFI	67	methadone hcl TABS 5 MG	5	methylphenidate hcl TB24 18 MG, 27 MG	2
MENVEO SOLR	67	methadone hcl TBSO	5	methylphenidate hcl TB24 36 MG, 54 MG	2
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5	methamphetamine hcl	1	methylphenidate hcl TBCR 10 MG, 20 MG	2
meperidine hcl SOLN OR 50 MG/5ML	5	methazolamide TABS	45	methylphenidate hcl TBCR 18 MG, 27 MG	2
meperidine hcl TABS 50 MG	5	methenamine hippurate	22	methylphenidate hcl TBCR 36 MG, 54 MG	2
meprobamate	8	methimazole TABS	65	methylphenidate PTCH	2
mercaptopurine TABS	24	METHITEST TABS	7	methylprednisolone acetate SUSP 38	
meropenem	22	methocarbamol TABS 500 MG, 750 MG	60	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	38
mesalamine CP24	48	METHOTREXATE	3	methylprednisolone TABS	38
mesalamine CPDR	48	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	24		
mesalamine ENEM	48	methotrexate sodium SOLR	24		
mesalamine SUPP	48				

methylprednisolone TBPK	38	minocycline hcl CAPS	65	60
metoclopramide hcl SOLN IJ 5 MG/ML	48	minocycline hcl TABS	65	mometasone furoate CREA
metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	48	minoxidil 2.5 MG, 10 MG	21	mometasone furoate OINT
metoclopramide hcl TABS	48	MIRCERA	50	mometasone furoate SOLN
metolazone	46	mirtazapine TABS 15 MG	13	montelukast sodium CHEW
metoprolol & hydrochlorothiazide TABs 25 MG-100 MG, 50 MG-100 MG	21	mirtazapine TABS 30 MG	13	montelukast sodium PACK
metoprolol & hydrochlorothiazide TABs 25 MG-50 MG	21	mirtazapine TABS 7.5 MG, 45 MG	13	montelukast sodium TABS
metoprolol succinate TB24 200 MG 34		mirtazapine TBDP 15 MG	13	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	34	mirtazapine TBDP 30 MG	13	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML
metoprolol tartrate SOLN IV 5 MG/5ML	34	mirtazapine TBDP 45 MG	13	morphine sulfate SOLN OR 10 MG/5ML
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	34	misoprostol	66	morphine sulfate SOLN OR 20 MG/5ML
metronidazole (topical) CREA	44	mitomycin SOLR IV 20 MG	26	morphine sulfate TABS 15 MG
metronidazole (topical) GEL 0.75 % 44		mitoxantrone hcl 2 MG/ML	26	morphine sulfate TABS 30 MG
metronidazole (topical) GEL 1 % ..	44	M-M-R II SOLR	69	morphine sulfate TBCR
metronidazole (topical) LOTN	44	M-NATAL PLUS TABS	59	MOTOFEN
metronidazole TABS	21	modafinil 100 MG	2	MOVANTIK
metronidazole vaginal	70	modafinil 200 MG	2	moxifloxacin hcl (ophth) SOLN OP
mexiletine hcl	8	MODERNA COVID-19 VACCINE SUSP	69	61
micafungin sodium	18	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP .	69	moxifloxacin hcl in sodium chloride
miconazole nitrate vaginal SUPP 200 MG	70	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY .	69	48
midodrine hcl	71	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y ...	69	moxifloxacin hcl TABS
miglitol	15	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5 .	69	48
miglustat	50	MODERNA COVID-19 VACCINE6MO-5Y SUSP	69	MULPLETA
		moexipril hcl	20	MULTI PRENATAL TABS
		mometasone furoate (nasal) SUSP		mupirocin OINT
				MVASI
				MYALEPT
				mycophenolate mofetil CAPS
				mycophenolate mofetil TABS

mycophenolate sodium	58	neomycin-bacitracin zn-polymyxin	61	NIACIN TR TBCR	71
MYLERAN TABS	24	neomycin-polymy-dexameth OINT	61	niacinamide TABS 100 MG	71
MYLOTARG	25	neomycin-polymy-dexameth SUSP	61	niacinamide TABS 500 MG	71
nabumetone	4			nicardipine hcl CAPS	35
nadolol TABS 20 MG	34	neomycin-polymyxin-hc (ophth) ...	61	nicardipine hcl SOLN	35
nadolol TABS 40 MG	34	neomycin-polymyxin-hc (otic) SOLN .	62	nicotine MISC XX	65
nadolol TABS 80 MG	34	neomycin-polymyxin-hc (otic) SUSP .	62	nicotine polacrilex GUM	64
nafcillin sodium IV 10 GM	63			nicotine polacrilex LOZG	64
naftifine hcl CREA 1 %	40	NEONATAL COMPLETE TABS 120		nicotine PT24 TD 7 MG/24HR, 14	
naftifine hcl CREA 2 %	40	MG-10 MG-9.2 MG-1000 MCG-10		MG/24HR, 21 MG/24HR	65
nalbuphine hcl	7	MCG-12 MCG-3 MG-5 MG-20 MG-		NICOTINE TRANSDERMAL	
naloxone hcl LIQD	17	27 MG-200 MG-1.84 MG-25 MG-2		SYSTEM KIT	65
naloxone hcl SOLN 0.4 MG/ML, 4		MG-1200 MCG-2 MG-0.2 MG	59	NICOTROL INHALER INHA	65
MG/10ML	17	NEONATAL PLUS TABS	59	NICOTROL NS SOLN	65
naltrexone hcl	17	NEONATAL PRENATAL VITAMIN		nifedipine CAPS 10 MG	35
naproxen sodium TABS 550 MG ...	4	TABS	59	nifedipine CAPS 20 MG	35
naproxen SUSP	4	NEONATAL VITAMIN TABS	59	nifedipine TB24 30 MG	35
naproxen TABS	4	neostigmine methylsulfate SOSY .	23	nifedipine TB24 60 MG	35
naproxen TBEC 500 MG	4	NEO-SYNALAR	40	nifedipine TB24 90 MG	35
naratriptan hcl	56	NEUPRO	29	nifedipine TB24	35
NATACYN	61	NEVANAC	62	nilutamide	26
NATAZIA	37	nevirapine SUSP	32	nimodipine CAPS	35
nateglinide	16	nevirapine TABS	32	NINLARO	27
NAYZILAM	11	nevirapine TB24 100 MG	32	NIPENT	28
nebivolol hcl 2.5 MG, 5 MG, 10 MG		nevirapine TB24 400 MG	32	nisoldipine	35
34		NEXIUM 24HR TBEC (esomeprazole		nitazoxanide TABS	21
nebivolol hcl 20 MG	34	magnesium)	66	nitisinone CAPS	47
NEBUSAL NEBU	39	NEXTSTELLIS	37	NITRO-BID OINT	8
nefazodone hcl	14	niacin (antihyperlipidemic) TBCR ..	19	nitrofurantoin	22
nelarabine	24	niacin CPCR 250 MG, 500 MG ...	71	nitrofurantoin macrocrystal 50 MG,	
neomycin sulfate TABS	2	niacin TABS	71	100 MG	22
		niacin TBCR	71		

nitrofurantoin monohyd macro	22	norgestimate-ethinyl estradiol	37	NUCALA SOAJ	9
nitroglycerin (intra-anal)	7	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	37	NUCALA SOLR	9
nitroglycerin CPR	8	NORMOSOL-M/D5W	56	NUCALA SOSY 100 MG/ML	9
nitroglycerin PT24	8	NORMOSOL-R	56	NUCALA SOSY 40 MG/0.4ML	9
NITROGLYCERIN SOLN IV	8	nortriptyline hcl CAPS	15	NUEDEXTA	64
nitroglycerin SUBL	8	nortriptyline hcl SOLN	15	NULOJIX	58
NIVA-PLUS TABS	59	NORVIR CAPS	32	nystatin (mouth-throat)	58
nizatidine CAPS	66	NORVIR PACK	32	nystatin (topical) CREA	40
NORDITROPIN FLEXPLO SOPN 30 MG/3ML	46	NORVIR SOLN	32	nystatin (topical) OINT	40
NORDITROPIN FLEXPLO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	46	NORVIR TABS (ritonavir)	32	nystatin (topical) POWD EX	40
norelgestromin-ethinyl estradiol	37	NOVA MAX PLUS KETONE TESTSTRIPS	45	nystatin TABS	18
norethin acet & estrad-fe CAPS	37	NOVAVAX COVID-19 VACCINE SUSP	69	nystatin-triamcinolone CREA	40
norethin acet & estrad-fe CHEW	37	NOVAVAX COVID-19 VACCINE/2023-24 SUSP	69	nystatin-triamcinolone OINT	40
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	37	NOVAVAX COVID-19 VACCINE/2024-25 SUSY	69	NYVEPRIA	51
norethindrone & eth estradiol	37	NOVOEIGHT	50	octreotide acetate SOLN	47
norethindrone & ethinyl estradiol-fe	37	NOVOLIN 70/30 FLEXPEN SUPN	16	ODEFSEY	32
norethindrone (contraceptive)	37	NOVOLIN 70/30 SUSP	16	ODOMZO	25
norethindrone acet & eth estra TABS	37	NOVOLIN N FLEXPEN SUPN	16	OFEV	65
norethindrone acetate TABS	63	NOVOLIN N SUSP	16	ofloxacin (ophth)	61
norethindrone acetate-ethinyl estradiol	47	NOVOLIN R FLEXPEN SOPN IJ	16	ofloxacin (otic)	62
norethindrone acetate-ethinyl estradiol-fe	37	NOVOLIN R SOLN IJ	16	ofloxacin 300 MG, 400 MG	48
norethindrone-eth estradiol (triphasic)	37	NP THYROID 120 TABS	66	OGIVRI	25
norgestimate-ethinyl estradiol (triphasic)	37	NP THYROID 15 TABS	66	olanzapine SOLR	30
		NP THYROID 30 TABS	66	olanzapine TABS 2.5 MG, 5 MG	30
		NP THYROID 60 TABS	66	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	30
		NP THYROID 90 TABS	66	olanzapine TBDP 20 MG	30
		NUBEQA	26	olanzapine TBDP 5 MG, 10 MG, 15 MG	30
				olmesartan medoxomil	20
				olmesartan medoxomil-amlodipine-	

hydrochlorothiazide	21	CONTROL SOLUTION LIQD	55	oxybutynin chloride TABS 5 MG ...	67
olmesartan medoxomil- hydrochlorothiazide	21	ONIVYDE	29	oxybutynin chloride TB24	67
olopatadine hcl (nasal)	60	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	25	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6
olopatadine hcl 0.1 %	62	OPILL	38	oxycodone hcl TABA	6
olopatadine hcl 0.2 %	62	OPSUMIT	35	oxycodone hcl TABS	6
omega-3-acid ethyl esters	19	ORENITRAM TBCR	35	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7
omeprazole CPDR	66	ORLISSA	46	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	7
omeprazole magnesium CPDR ...	66	ORKAMBI PACK	65	OXYCONTIN T12A	6
omeprazole TBEC	66	ORKAMBI TABS	65	oxymorphone hcl TABS	6
omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	67	ORLADEYO	50	oxymorphone hcl TB12 40 MG	6
OMNIFLEX DIAPHRAGM	53	orphenadrine citrate TB12	60	oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 6	6
ONCASPAR	28	oseltamivir phosphate CAPS	34	OZEMPIC SOPN 2 MG/1.5ML	16
ondansetron hcl SOLN IJ 4 MG/2ML . 17		oseltamivir phosphate SUSR	34	OZEMPIC SOPN	16
ondansetron hcl SOLN OR 4 MG/5ML	17	OSMOPREP	52	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML	29
ondansetron hcl SOSY	17	OSPHENA	46	paclitaxel 6 MG/ML, 30 MG/5ML, 300 MG/50ML	29
ondansetron hcl TABS 24 MG	17	OTEZLA TABS	4	paclitaxel protein-bound particles .	29
ondansetron hcl TABS 4 MG	17	OTEZLA TBPK	4	paliperidone 1.5 MG, 3 MG, 9 MG .	30
ondansetron hcl TABS 8 MG	17	oxacillin sodium IV 10 GM	63	paliperidone 6 MG	30
ondansetron TBDP 4 MG	17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	24	palonosetron hcl SOLN	17
ondansetron TBDP 8 MG	17	oxandrolone	7	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	46
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS .	59	oxaprozin TABS	4	PAMIDRONATE DISODIUM SOLN 46	
ONE VITE WOMENS PRENATALVITAMIN TABS	59	oxazepam CAPS	8	PANRETIN	41
ONETOUCH DELICA SAFETY LANCING DEVICE	55	oxcarbazepine SUSP	12	pantoprazole sodium TBEC 20 MG 66	
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	55	oxcarbazepine TABS 150 MG, 300 MG	12		
ONETOUCH VERIO LEVEL 4		oxcarbazepine TABS 600 MG	12		
		oxiconazole nitrate CREA	40		
		OXISTAT LOTN	41		
		oxybutynin chloride SOLN	67		

pantoprazole sodium TBEC 40 MG 66	penicillin g potassium 5000000 UNIT 62	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP70
paricalcitol CAPS47	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML 63	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP .. 70
paricalcitol SOLN47	PENICILLIN G PROCAINE 63	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/5-11Y ... 70
paroxetine hcl SUSP14	penicillin g sodium63	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/6M-4Y ...70
paroxetine hcl TABS 10 MG 14	penicillin v potassium SOLR 63	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/BA.4/BA.5 70
paroxetine hcl TABS 20 MG 14	penicillin v potassium TABS 63	PHEBURANE PLLT 47
paroxetine hcl TABS 30 MG 14	pentazocine w/ naloxone hcl 7	phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG 49
paroxetine hcl TABS 40 MG 14	pentoxifylline50	phendimetrazine tartrate TABS 1
paroxetine hcl TB24 12.5 MG14	perindopril erbumine 2 MG, 8 MG .20	phenelzine sulfate13
paroxetine hcl TB24 25 MG, 37.5 MG 14	perindopril erbumine 4 MG 20	phenobarbital ELIX 51
PASER PACK23	PERJETA25	phenobarbital TABS 51
pazopanib hcl 27	permethrin CREA 44	phenoxybenzamine hcl20
pediatric multivitamins w/fl CHEW .58	permethrin LIQD EX 44	phentermine hcl CAPS1
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid52	perphenazine TABS31	phenytoin CHEW13
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM52	perphenazine-amitriptyline 63	phenytoin sodium extended 100 MG, 200 MG, 300 MG13
peg 3350-potassium chloride-sod bicarbonate-sod chloride52	PERSERIS PRSY30	phenytoin sodium SOLN13
PEGASYS SOLN 33	PFIZER-BIONTECH COVID- 19VACCINE SUSP 70	phenytoin SUSP 13
PEGASYS SOSY33	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y SUSP 69	PHEXXI71
PEMAZYRE27	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2023-24 SUSP 69	PHOTOFRIN 28
pemetrexed disodium SOLR 100 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2024-25 SUSP 69	PIFELTRO32
pemetrexed disodium SOLR 500 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y SUSP70	pilocarpine hcl (oral)58
penciclovir42	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP70	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 60
penicillamine CAPS57		pimecrolimus 44
penicillamine TABS 57		

pimozide	64	PORTRAZZA	25	potassium phosphates 236 MG/ML- 224 MG/ML	57
pindolol TABS	34	posaconazole SUSP	18	POTELIGEO	25
pioglitazone hcl	16	potassium acetate SOLN 2 MEQ/ML . 57		PR BENZOYL PEROXIDE WASH LIQD	39
pioglitazone hcl-glimepiride	15	potassium bicarbonate TBEF	57	pralatrexate	24
pioglitazone hcl-metformin hcl TABS . 15		potassium chloride CPCR	57	pramipexole dihydrochloride TABS 0.125 MG	29
piperacillin sodium-tazobactam sodium	63	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	57	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	30
PIQRAY 200MG DAILY DOSE ...	27	potassium chloride in dextrose 5 %- 20 MEQ/L	57	prasugrel hcl	50
PIQRAY 250MG DAILY DOSE ...	27	potassium chloride in nacl 20 MEQ/L- 0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L- 0.9 %	57	pravastatin sodium	19
PIQRAY 300MG DAILY DOSE ...	27	potassium chloride microencapsulated crystals er	57	praziquantel	8
pirfenidone CAPS	65	potassium chloride PACK OR 20 MEQ	57	prazosin hcl CAPS	20
pirfenidone TABS 534 MG	65	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 57		PRECISION XTRA	45
piroxicam CAPS	4	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	57	PRED MILD	61
PLASMA-LYTE A (electrolyte-a) ..	57	potassium chloride TBCR	57	PRED-G SUSP	61
PLASMA-LYTE-148 (electrolyte-148)	57	POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	57	prednicarbate OINT	43
PLEGRIDY SOAJ SC 125 MCG/0.5ML	64	POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	57	prednisolone acetate (ophth)	61
PLEGRIDY SOSY SC	64	potassium citrate (alkalinizer) TBCR . 49		PREDNISOLONE SODIUM PHOSPHATE	61
PLEGRIDY STARTER PACK SOAJ SC	64			prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML 38	
PLEGRIDY STARTER PACK SOSY SC	64			prednisolone sodium phosphate TBDP	38
plerixafor	51			prednisolone SOLN	38
PNEUMOVAX 23 IJ 25 MCG/0.5ML . 67				prednisolone TABS	38
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	67			prednisone SOLN	38
podofilox SOLN	44			prednisone TABS 1 MG, 5 MG	38
polymyxin b sulfate SOLR	22			prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	38
polymyxin b-trimethoprim	61				
POMALYST	26				

prednisone TBPk	38	MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	59	PROLEUKIN	28
pregabalin (once-daily) 330 MG ...	64	PRENATRIX TABS	59	PROLIA SOSY	46
pregabalin (once-daily) 82.5 MG, 165 MG	64	PRENATRYL TABS	59	PROMACTA PACK	51
pregabalin CAPS 225 MG, 300 MG 12		PREVNAR 13	67	PROMACTA TABS	51
		PREVNAR 20	67	promethazine hcl SOLN OR 6.25 MG/5ML	19
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ...	12	PREZCOBIX	32	promethazine hcl SUPP 12.5 MG, 25 MG	19
pregabalin SOLN	12	PREZISTA SUSP	32	promethazine hcl SUPP 50 MG ...	19
PREHEVBRIO	70	PREZISTA TABS (darunavir)	32	promethazine hcl TABS	19
PREMARIN	71	PREZISTA TABS 75 MG, 150 MG, 600 MG	32	propafenone hcl CP12	8
PREMARIN SOLR	48	PREZISTA TABS 800 MG (darunavir)	32	propafenone hcl TABS	8
PREMARIN TABS	48	PRIFTIN	23	proparacaine hcl	61
PREMPHASE	47	primaquine phosphate TABS	23	propranolol hcl CP24	34
PREMPRO	47	primidone 50 MG, 250 MG	12	propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	34
PRENATAL MULTIVITAMIN TABS 59		PRIORIX SUSR	70	propranolol hcl TABS	34
PRENATAL ONE DAILY TABS ...	59	probenecid	49	propylthiouracil	65
PRENATAL PLUS TABS	59	procainamide hcl SOLN 500 MG/ML . 8		protriptyline hcl	15
PRENATAL PLUS VITAMIN ANDMINERAL TABS	59	prochlorperazine	31	PULMICORT FLEXHALER AEPB ..	9
PRENATAL TABS	59	prochlorperazine maleate TABS ...	31	PULMOZYME	65
PRENATAL VITAMIN & MINERAL TABS	59	PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	51	PX PRENATAL MULTIVITAMINS TABS	59
PRENATAL VITAMIN TABS	59	PROCRIT 40000 UNIT/ML	51	pyrazinamide	23
PRENATAL VITAMIN/IRON TABS 59		PRODIGY CONTROL SOLUTIONHIGH SOLN	55	pyridostigmine bromide SOLN OR 23	
PRENATAL VITAMINS PLUS LOW IRON TABS	59	progesterone CAPS	63	pyridostigmine bromide TABS 60 MG	23
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20		PROGRAF PACK	58	pyridostigmine bromide TBCR	23
		PROGRAF SOLN	58	pyrimethamine	23
		PROLASTIN-C SOLN	65	QC PRENATAL TABS	59
				QINLOCK	27
				QUADRACEL SUSP	66

QUADRACEL SUSY	66	REALITY LATEX/ULTRA TEXTURED DEVI	53	RETROVIR CAPS (zidovudine) ...	32
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG	30	REALITY LATEX/ULTRA THIN DEVI 53		RETROVIR IV INFUSION SOLN ..	32
quetiapine fumarate TABS 300 MG, 400 MG	31	REBIF REBIDOSE SOAJ	64	RETROVIR SYRP (zidovudine) ...	32
quetiapine fumarate TB24 300 MG, 400 MG	31	REBIF REBIDOSE TITRATIONPACK SOAJ	64	REXULTI	31
quetiapine fumarate TB24 50 MG, 150 MG, 200 MG	31	REBIF SOSY	64	REYATAZ CAPS 200 MG (atazanavir sulfate)	32
quinapril hcl 20 MG, 40 MG	20	REBIF TITRATION PACK SOSY ..	64	REYATAZ CAPS 300 MG (atazanavir sulfate)	32
quinapril hcl 5 MG, 10 MG	20	RECOMBIVAX HB SUSP	70	REYATAZ PACK	32
quinapril-hydrochlorothiazide 12.5 MG-10 MG	21	RECOMBIVAX HB SUSY	70	REZVOGLAR KWIKPEN	16
quinapril-hydrochlorothiazide 12.5 MG-20 MG	21	REGRANEX	44	ribavirin (hepatitis c) CAPS	33
quinapril-hydrochlorothiazide 25 MG- 20 MG	21	RELENZA DISKHALER	34	ribavirin (hepatitis c) TABS 200 MG 33	
quinidine sulfate TABS	8	RELION 2-IN-1 LANCET DEVICES 30G	55	RIDAURA	3
quinine sulfate CAPS 324 MG	23	RELION 2-IN-1 LANCING DEVICE 25G	55	rifabutin	23
QVAR REDIHALER	9	RELION 2-IN-1 LANCING DEVICE 30G	55	rifampin CAPS	23
RA PRENATAL FORMULA/FOLICACID TABS	59	RELION KETONE TEST STRIPS STRP	45	rifampin SOLR	23
RA PRENATAL TABS	59	RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	45	RIGHTEST GC300 HIGH CONTROL LIQD	55
rabeprazole sodium TBEC	66	RENFLEXIS	48	riluzole TABS	60
raloxifene hcl	46	repaglinide 0.5 MG, 1 MG	16	rimantadine hydrochloride TABS ..	34
ramelteon	51	repaglinide 2 MG	16	ringer's	57
ramipril CAPS	20	REPATHA PUSHTRONEX SYSTEM SOCT	19	ringer's irrigation	58
ranitidine hcl TABS 150 MG	66	REPATHA SOSY	19	RINVOQ TB24	2
ranolazine TB12 1000 MG	8	REPATHA SURECLICK SOAJ	19	risedronate sodium TABS 150 MG	46
ranolazine TB12 500 MG	8	RETACRIT	51	risedronate sodium TABS 35 MG .	46
rasagiline mesylate	30	RETEVMO CAPS	27	risedronate sodium TABS 5 MG, 30 MG	46
REALITY LATEX CONDOMS/LUBRICATED MISC ..	53			risedronate sodium TBEC	46
				risperidone microspheres	30
				risperidone SOLN	30
				risperidone TABS	30

risperidone TBDP	30	SAVELLA TABS	64	SIGNIFOR	47
ritonavir TABS	32	SAVELLA TITRATION PACK MISC 64		sildenafil citrate (pulmonary hypertension) SOLN	36
rivastigmine tartrate CAPS	63	saxagliptin hcl	16	sildenafil citrate (pulmonary hypertension) SUSR	36
rizatriptan benzoate TABS 10 MG .	56	saxagliptin-metformin hcl 1000 MG- 2.5 MG	15	sildenafil citrate (pulmonary hypertension) TABS	36
rizatriptan benzoate TABS 5 MG ..	56	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	sildenafil citrate	35
rizatriptan benzoate TBDP 10 MG .	56	SCEMBLIX 100 MG	28	silodosin	49
rizatriptan benzoate TBDP 5 MG ..	56	SCEMBLIX 20 MG, 40 MG	28	silver sulfadiazine	42
roflumilast	9	scopolamine	17	SIMPONI ARIA SOLN	3
romidepsin SOLR	27	SELECT INSULIN SYRINGES ...	55	SIMULECT	58
ropinirole hydrochloride TABS	30	SELECT LANCETS	55	simvastatin TABS	19
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	30	selegiline hcl CAPS	30	sirolimus TABS	58
ropinirole hydrochloride TB24 8 MG, 12 MG	30	selegiline hcl TABS	30	SIRTURO	23
rosuvastatin calcium TABS	19	selenium sulfide LOTN 2.5 %	41	SIVEXTRO TABS	22
ROTARIX SUSP	70	SELZENTRY SOLN	32	SKYRIZI PEN SOAJ	41
ROTARIX SUSR	70	SELZENTRY TABS (maraviroc) ...	32	SKYRIZI PSKT	41
ROTATEQ SOLN	70	SELZENTRY TABS 25 MG, 75 MG, 150 MG	32	SKYRIZI SOCT	48
ROXYBOND TABA	6	SELZENTRY TABS 300 MG (maraviroc)	32	SKYRIZI SOLN	48
ROZLYTREK CAPS	27	SEMGLEE SOLN	16	SKYRIZI SOSY	41
RUBRACA	27	SEMGLEE SOPN	16	SLYND	38
rufinamide SUSP	12	SEREVENT DISKUS	10	SM PRENATAL VITAMINS TABS .	59
rufinamide TABS 200 MG	12	sertraline hcl CONC	14	SODIUM ACETATE SOLN (sodium acetate)	56
rufinamide TABS 400 MG	12	sertraline hcl TABS 100 MG	14	sodium acetate SOLN	56
RUKOBIA	32	sertraline hcl TABS 25 MG, 50 MG 14		sodium chloride (gu irrigant) 0.9 %	49
RUXIENCE	25	sevelamer carbonate PACK	49	sodium chloride (inhalant) NEBU 7 %	39
RYBELSUS TABS	16	sevelamer carbonate TABS	49	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	57
salsalate	5	SHINGRIX	70	sodium citrate & citric acid	49
SANTYL OINT	44				
sapropterin dihydrochloride PACK .	47				
sapropterin dihydrochloride TABS .	47				

sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	57	VACCINE/2023-24 SUSY	70	sulconazole nitrate CREA	41
sodium phenylbutyrate POWD	47	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	70	sulconazole nitrate SOLN	41
sodium phenylbutyrate TABS	47	spinosad	44	sulfacetamide sodium (acne)	39
sodium polystyrene sulfonate POWD 58		SPIRIVA RESPIMAT AERS	9	sulfacetamide sodium (ophth) SOLN .	61
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	58	spironolactone & hydrochlorothiazide	45	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	39
sodium sulfate-potassium sulfate-magnesium sulfate	52	spironolactone TABS	45	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	39
SOFOSBUVIR/VELPATASVIR TABS	33	SPRAVATO 56MG DOSE	13	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	39
solifenacin succinate TABS	67	SPRAVATO 84MG DOSE	13	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	39
SOLQUA 100/33	15	SPRYCEL (dasatinib)	28	sulfacetamide sod-prednisolone SOLN	61
SOLOSEC	2	stannous fluoride CONC	58	sulfadiazine TABS	65
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	38	stavudine CAPS	32	sulfamethoxazole-trimethoprim SOLN	21
SOLU-CORTEF 250 MG	38	STELARA 130 MG/26ML	48	sulfamethoxazole-trimethoprim SUSP	21
SOLU-MEDROL 2 GM	38	STELARA SOLN 45 MG/0.5ML ...	41	sulfamethoxazole-trimethoprim TABS	21
SOLUS V2 CONTROL HIGH SOLN 55		STELARA SOSY 45 MG/0.5ML ...	41	SULFAMYLON CREA	42
sorafenib tosylate	28	STELARA SOSY 90 MG/ML	41	sulfasalazine TABS	48
SORBITOL 3 %	49	STENDRA	35	sulfasalazine TBEC	48
SORBITOL/MANNITOL IRRIGATION	49	STIOLTO RESPIMAT	10	sulindac TABS	4
sotalol hcl (afib/af)	34	STIVARGA	28	sumatriptan	56
sotalol hcl TABS 240 MG	34	STRENSIQ	47	sumatriptan succinate SOAJ	56
sotalol hcl TABS 80 MG, 120 MG, 160 MG	34	streptomycin sulfate SOLR	2	sumatriptan succinate SOCT	56
SPIKEVAX COVID-19 VACCINE SUSP	70	STRIBILD	32	sumatriptan succinate SOLN 6 MG/0.5ML	56
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	70	STRIVERDI RESPIMAT	10	sumatriptan succinate TABS	56
SPIKEVAX COVID-19		SUBSYS LIQD 100 MCG	6	sumatriptan-naproxen sodium	55
		SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	6		
		SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	6		
		sucrafate SUSP	66		
		sucrafate TABS	66		

sunitinib malate 12.5 MG, 25 MG, 50 MG	28	TAFINLAR CAPS	28	33	
sunitinib malate 37.5 MG	28	tafluprost	62	TEPADINA 100 MG (thiotepa)	24
SUNLENCA TBPK	32	TAGRISSE 40 MG	25	terazosin hcl	20
SUNOSI 150 MG	1	TAGRISSE 80 MG	25	terbinafine hcl TABS	18
SUNOSI 75 MG	1	TAKHZYRO SOLN	50	terbutaline sulfate SOLN	10
SUSTIVA CAPS 200 MG (efavirenz) .	33	TAKHZYRO SOSY	50	terbutaline sulfate TABS	10
SUSTIVA CAPS 50 MG (efavirenz)	32	TALZENNA	28	terconazole vaginal CREA	70
SYMFI (efavirenz-lamivudine-tenofovir disoproxil fumarate)	33	tamoxifen citrate TABS	26	terconazole vaginal SUPP	70
SYMFI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate)	33	tamsulosin hcl	49	teriflunomide	64
SYMTUZA	33	TASIGNA 150 MG, 200 MG	28	teriparatide SOPN	46
SYNAREL	47	TASIGNA 50 MG	28	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7
SYNERA PTCH	44	TASMAR (tolcapone)	29	testosterone cypionate SOLN IM ...	7
SYNJARDY TABS	15	tavorole	41	testosterone enanthate SOLN IM ...	7
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15	TAVALISSE	50	tetrabenazine	64
SYNJARDY XR TB24 1000 MG-25 MG	15	tazarotene CREA 0.1 %	41	tetracycline hcl CAPS	65
SYNRIBO	28	TAZVERIK	28	THALOMID	57
SYNTHROID TABS (levothyroxine sodium)	66	TECENTRIQ 1200 MG/20ML	25	theophylline ELIX	10
TABLOID	24	TEFLARO	37	theophylline SOLN	10
TABRECTA	28	TEGRETOL SUSP (carbamazepine) .	12	theophylline TB12	10
tacrolimus (topical) OINT	44	TEGRETOL TABS (carbamazepine) .	12	theophylline TB24	10
tacrolimus CAPS	58	telmisartan	20	THERANATAL CORE NUTRITION TABS	59
tadalafil (pulmonary hypertension) TABS	36	telmisartan-amlodipine	21	THIOLA EC TBEC 100 MG (tiopronin)	49
tadalafil 5 MG	35	telmisartan-hydrochlorothiazide ..	21	THIOLA EC TBEC 300 MG (tiopronin)	49
		temazepam 15 MG, 30 MG	51	thioridazine hcl	31
		temazepam 7.5 MG, 22.5 MG	51	thiotepa 100 MG	24
		TEMODAR SOLR	24	thiotepa 15 MG	24
		temozolomide CAPS	24	thiothixene	31
		temsirrolimus	28		
		tenofovir disoproxil fumarate TABS			

THYMOGLOBULIN	58	topiramate CPSP 15 MG	12	TREMFYA SOAJ	41
THYROGEN 0.9 MG	44	topiramate CPSP 25 MG	12	TREMFYA SOSY 100 MG/ML	41
tiagabine hcl	12	topiramate CS24	12	treprostinil SOLN IJ	35
TIBSOVO	28	topiramate TABS 200 MG	12	tretinoin (chemotherapy)	28
TICE BCG	28	topiramate TABS 25 MG, 100 MG	12	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	40
tigecycline	65	topiramate TABS 50 MG	12	tretinoin GEL 0.01 %, 0.025 %	40
timolol maleate (ophth) SOLG	60	topotecan hcl SOLN	29	tretinoin microsphere 0.1 %	39
timolol maleate (ophth) SOLN	60	TOPOTECAN HCL SOLN	29	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	24
timolol maleate TABS	34	topotecan hcl SOLR	29	triamcinolone acetonide (mouth)	58
tiopronin TBEC 100 MG	49	toremifene citrate	26	triamcinolone acetonide (nasal) AERO	60
tiopronin TBEC 300 MG	49	torsemide TABS	45	triamcinolone acetonide (topical) CREA 0.025 %	43
tiotropium bromide monohydrate CAPS	9	TRACLEER TBSO	35	triamcinolone acetonide (topical) CREA 0.1 %	43
TIVICAY PD TBSO	33	tramadol hcl TABS 50 MG	6	triamcinolone acetonide (topical) CREA 0.5 %	43
TIVICAY TABS	33	tramadol hcl TB24	6	triamcinolone acetonide (topical) LOTN 0.025 %	43
tizanidine hcl CAPS	60	tramadol-acetaminophen	7	triamcinolone acetonide (topical) LOTN 0.1 %	43
tizanidine hcl TABS	60	trandolapril 1 MG, 2 MG	20	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	43
tobramycin (ophth) SOLN	61	trandolapril 4 MG	20	triamcinolone acetonide (topical) OINT 0.5 %	43
tobramycin NEBU	2	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21	triamcinolone acetonide (topical) OINT 0.5 %	43
tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML	2	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21	triamcinolone acetonide (topical) OINT 0.5 %	43
tobramycin-dexamethasone SUSP 61		tranexamic acid SOLN 1000 MG/10ML	51	triamcinolone acetonide (topical) OINT 0.5 %	43
TODAY SPONGE MISC	70	tranexamic acid TABS	51	triamcinolone acetonide (topical) OINT 0.5 %	43
tolcapone	29	tranylcypromine sulfate	13	triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	38
tolmetin sodium CAPS	4	travoprost SOLN	62	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	45
tolmetin sodium TABS 600 MG	4	TRAZIMERA	25	triamterene & hydrochlorothiazide TABS	45
TOLSURA CAPS	18	trazodone hcl TABS	14	triamterene CAPS	45
tolterodine tartrate CP24	67	TRECTOR	23		
tolterodine tartrate TABS	67	TRELEGY ELLIPTA	10		
tolvaptan TABS	47	TRELSTAR MIXJECT	26		

triazolam	51	tropium chloride TABS	67	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	54
TRICARE TABS	59	TRUE COVER DEVI	53	TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	54
trientine hcl 250 MG	57	TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ..	45	TRUVADA (emtricitabine-tenofovir disoproxil fumarate)	33
trifluoperazine hcl TABS	31	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	55	TRUXIMA	25
trifluridine	61	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	45	TUKYSA	25
trihexyphenidyl hcl SOLN	29	TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5	16	TURALIO	28
trihexyphenidyl hcl TABS	29	MG/0.5ML	16	TUZISTRA XR	38
TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG .	15	TRUSTEX COLOR CONDOMS + LUBE MISC	53	TWINRIX SUSY	70
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX LUBRICATED EXTRALARGE MISC	53	TWIRLA	37
TRIKAFTA TBPK	65	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	53	TYBLUME CHEW	37
trimethobenzamide hcl CAPS	17	TRUSTEX LUBRICATED MISC ..	53	TYBOST	33
trimethoprim TABS	21	TRUSTEX LUBRICATED/RIBBED/STUDDED	53	TYMLOS	46
trimipramine maleate CAPS	15	MISC	53	TYVASO REFILL KIT SOLN IN ...	35
TRINTELLIX	14	TRUSTEX LUBRICATED/SPERMICIDE EXTRA	53	TYVASO SOLN IN	35
TRIUMEQ PD TBSO	33	LARGE MISC	53	TYVASO STARTER KIT SOLN IN	35
TRIUMEQ TABS	33	TRUSTEX LUBRICATED/SPERMICIDE MISC	53	UBRELVY	55
TRIZIVIR	33	TRUSTEX LUBRICATED/SPERMICIDE EXTRA	53	UDENYCA ONBODY SOSY	51
TROJAN MAGNUM MISC	53	LARGE MISC	53	UDENYCA SOAJ	51
TROJAN ULTRA THIN LUBRICATED MISC	53	TRUSTEX LUBRICATED/SPERMICIDE EXTRA	53	UDENYCA SOSY	51
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	53	STRENGTH MISC	53	UNISTRIP CONTROL SOLUTIONHIGH SOLN	55
TROJAN-ENZ LUBRICATED MISC 53		TRUSTEX LUBRICATED/SPERMICIDE MISC	53	UPTRAVI TABS 200 MCG	36
TROJAN-ENZ W/SPERMICIDAL MISC	53	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	54	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	36
tropicamide SOLN 0.5 %	60	TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDDED MISC	54	UPTRAVI TITRATION PACK TBPK	36
tropicamide SOLN 1 %	60	TRUSTEX/RIA LUBRICATED MISC .	54	ursodiol CAPS	48
tropium chloride CP24	67			ursodiol TABS	48

UVADEX	28	venlafaxine hcl CP24 37.5 MG	14	VITAMIN D2 TABS 400 UNIT	71
valacyclovir hcl 1 GM, 1000 MG	33	venlafaxine hcl CP24 75 MG	14	VITATHELY/GINGER TABS	59
valacyclovir hcl 500 MG	33	venlafaxine hcl TABS	14	VITRAKVI CAPS	28
valganciclovir hcl TABS	33	venlafaxine hcl TB24 150 MG	14	VITRAKVI SOLN	28
valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML	13	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	14	VIVIMUSTA SOLN	24
valproic acid CAPS	13	VENOFER	51	VIZIMPRO	25
valrubicin	26	verapamil hcl CP24 100 MG, 200 MG, 300 MG	35	VORAXAZE	28
valsartan TABS	20	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	35	voriconazole TABS	18
valsartan-hydrochlorothiazide	21	verapamil hcl SOLN 2.5 MG/ML	35	VOSEVI	33
VALTOCO 10 MG DOSE LIQD	11	verapamil hcl TABS	35	VYNDAMAX	36
VALTOCO 15 MG DOSE LQPK	11	verapamil hcl TBCR	35	VYNDAQEL	36
VALTOCO 20 MG DOSE LQPK	11	VEREGEN	40	VYXEOS	26
VALTOCO 5 MG DOSE LIQD	11	VERZENIO	28	warfarin sodium TABS	10
vancomycin hcl CAPS	22	VICTOZA (liraglutide)	16	water for irrigation, sterile	58
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG	22	vigabatrin PACK	13	WESTAB PLUS TABS	59
vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML	22	vigabatrin TABS	13	WIDE-SEAL SILICONE DIAPHRAGM KIT 60	54
VAQTA	70	VIIBRYD STARTER PACK KIT	14	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	54
varenicline tartrate TABS	65	vilazodone hcl TABS	14	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	54
varenicline tartrate TBPK	65	vincristine sulfate	29	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	54
VARIVAX SUSR IJ 1350 PFU/0.5ML 70		vinorelbine tartrate 10 MG/ML	29	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	54
VARUBI TBPK	18	vinorelbine tartrate 50 MG/5ML	29	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	54
VAXNEUVANCE	67	VIRACEPT TABS 250 MG	33	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	54
VECAMYL	21	VIRACEPT TABS 625 MG	33	WIDE-SEAL SILICONE DIAPHRAGM KIT 95	54
VECTIBIX 100 MG/5ML	25	VIREAD POWD	33	XALKORI CAPS	28
VECTIBIX 400 MG/20ML	25	VIREAD TABS (tenofovir disoproxil fumarate)	33	XARELTO STARTER PACK TBPK	
VELPHORO	49	VIREAD TABS 150 MG, 200 MG, 250 MG	33		
venlafaxine hcl CP24 150 MG	14	VISTOGARD	17		

10	XTAMPZA ER	6	UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	45
XARELTO SUSR	11	XTANDI CAPS	26	
XARELTO TABS 10 MG, 20 MG ..	11	XTANDI TABS 40 MG	26	ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT
XARELTO TABS 2.5 MG, 15 MG ..	11	XTANDI TABS 80 MG	26	45
XELJANZ SOLN	2	XULTOPHY 100/3.6	15	ZIAGEN SOLN (abacavir sulfate) ..
XELJANZ TABS 10 MG	3	XYNTHA	50	33
XELJANZ TABS 5 MG	3	XYNTHA SOLOFUSE	50	ZIAGEN TABS (abacavir sulfate) ..
XELJANZ XR TB24	2	YERVOY	25	33
XEOMIN	60	YONDELIS	24	zidovudine CAPS
XGEVA SOLN	46	YONSA	26	33
XHANCE EXHU	60	YUFLYMA 1-PEN KIT AJKT	3	zidovudine SYRP
XIFAXAN 200 MG	21	YUFLYMA 2-PEN KIT AJKT	3	33
XIFAXAN 550 MG	21	YUFLYMA 2-SYRINGE KIT PSKT ..	3	zidovudine TABS
XIGDUO XR (dapagliflozin propanediol-metformin hcl)	15	YUFLYMA CD/UC/HS STARTER AJKT	3	33
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	15	zafirlukast	9	zileuton TB12
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	15	zaleplon 10 MG	51	9
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	9	zaleplon 5 MG	51	ziprasidone hcl
XOLAIR SOAJ 75 MG/0.5ML	9	ZALTRAP 100 MG/4ML	25	30
XOLAIR SOLR	9	ZANOSAR	24	ZIRABEV
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	9	ZARONTIN CAPS (ethosuximide) ..	13	25
XOLAIR SOSY 75 MG/0.5ML	9	ZARXIO	51	ZIRGAN GEL
XOSPATA	28	ZEJULA CAPS	28	61
XPOVIO	26	ZEJULA TABS 100 MG	28	ZOLADEX 10.8 MG
XPOVIO 60 MG TWICE WEEKLY	26	ZEJULA TABS 200 MG, 300 MG ..	28	26
XPOVIO 80 MG TWICE WEEKLY	26	ZELBORAF	28	ZOLADEX 3.6 MG
		ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000		46

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