



FROM |



2025 FORMULARY

EFFECTIVE JANUARY 1, 2025



[Ambetter.WellCareKy.com](https://www.Ambetter.WellCareKy.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.

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. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 1_B** - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 2** - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.
- Nivel 3** - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.
- Nivel 4** - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

Autorización previa para medicamentos no incluidos en el Formulario

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

Abreviaturas del Formulario:

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

Medicamentos opioides:

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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 10 MG</i>	1B	QL(5 ea daily)	ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 ea daily)	Allergenic Extracts		
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 ea daily)	<i>GRASTEK SUBL</i>	3	PA
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)	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</i>	1B	QL(1 ea daily)	<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 18 MG, 27 MG</i>	1B	QL(1 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 36 MG, 54 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)	<i>gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML</i>	1B	
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)	<i>neomycin sulfate TABS</i>	1B	
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 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 10 MG	4	QL(2 ea daily); 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 5 MG	4	QL(2 ea daily); SP; 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	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; 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	QL(0.215 ea daily); 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	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 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 SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>aspirin TBEC 325 MG</i>	1A		<i>meperidine hcl TABS 50 MG</i>	1B	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 5 MG/5ML</i>	1B	QL(100 ml daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
Opioid Agonists			<i>methadone hcl SOLN OR 10 MG/5ML</i>	1B	QL(50 ml daily)
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	METHADONE HCL SOLN IJ	1B	
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>methadone hcl TABS 5 MG</i>	1B	QL(4 ea daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 ea daily); PA	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 ea daily)
<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 TBSO</i>	1B	QL(2 ea daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 ea daily); PA	<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>hydrocodone bitartrate T24A</i>	3	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)
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply	<i>morphine sulfate SOLN OR 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ml daily)
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B		<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B	
<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)	<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 ea daily); PA	<i>morphine sulfate TBCR</i>	1B	QL(2 ea daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily); PA			

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

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)
Opioid Partial Agonists		
BRIXADI SOSY	3	
<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 NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
SUBLOCADE SOSY 100 MG/0.5ML	3	QL(0.02 ml daily); 1 max fill(s) per 26 day(s) retail
SUBLOCADE SOSY 300 MG/1.5ML	3	QL(0.06 ml daily); 1 max fill(s) per 26 day(s) retail
ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 1.4 MG-5.7 MG, 2.1 MG-8.6 MG, 2.9 MG-11.4 MG	3	QL(1 ea daily)
ZUBSOLV SUBL 0.71 MG-2.9 MG	3	QL(3 ea daily)

ANDROGENS-ANABOLIC - Drugs to Regulate

Drug Name	Drug Tier	Requirements/Limits
Hormones		
Anabolic Steroids		
<i>oxandrolone</i>	1B	
Androgens		
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	QL(3.2 gm daily); 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

Drug Name	Drug Tier	Requirements/Limits
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
<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	

Drug Name	Drug Tier	Requirements/Limits
<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)
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 0.5 MG, 2 MG</i>	1A	QL(3 ea daily)
<i>lorazepam TABS 1 MG</i>	1A	QL(4 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		

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 75 MG/0.5ML	4	QL(0.036 ml daily); PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 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	QL(0.44 gm daily)
INCRUSE ELLIPTA	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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		
<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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QVAR REDHALER	2	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
Sympathomimetics			<i>fluticasone-salmeterol AERO</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>albuterol sulfate AERS</i>	1B		<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)
<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	1B		<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)
<i>albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML</i>	1B	QL(15 ml daily)	<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B	
<i>albuterol sulfate SYRP</i>	1B		<i>levalbuterol hcl</i>	1B	QL(12 ml daily)
<i>albuterol sulfate TABS</i>	1B		<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)
ANORO ELLIPTA	2	QL(2 ea daily)	SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>arformoterol tartrate</i>	1B	QL(4 ml daily)	STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	STRIVERDI RESPIMAT	2	
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>terbutaline sulfate SOLN</i>	1B	
BREZTRI AEROSPHERE	2	QL(0.38 gm daily)	<i>terbutaline sulfate TABS</i>	1B	
<i>budesonide-formoterol fumarate dihydrate</i>	1B	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	TRELEGY ELLIPTA	2	QL(2 ea daily)
DULERA	2		Xanthines		
<i>fluticasone furoate-vilanterol</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<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					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium TABS</i>	1B		<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
Direct Factor Xa Inhibitors			Thrombin Inhibitors		
ELIQUIS STARTER PACK TBPB	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B	
ELIQUIS TABS	2	QL(2 ea daily)	Thrombin Inhibitors		
XARELTO STARTER PACK TBPB	2	1 max fill(s) per 365 day(s) retail	<i>dabigatran etexilate mesylate CAPS</i>	1B	
XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)	ANTICONVULSANTS - Drugs to Treat Seizures		
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)	AMPA Glutamate Receptor Antagonists		
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)	FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA
Heparins And Heparinoid-Like Agents			FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)	FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)	FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ml daily; 30 Day(s) limit); SP	Anticonvulsants - Benzodiazepines		
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit); SP	<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ml daily); SP	<i>clobazam TABS</i>	1B	QL(2 ea daily); PA
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)	<i>clonazepam TABS</i>	1A	
<i>fondaparinux sodium 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML</i>	4	SP	<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ml per 180 day(s) retail; 7 ml per 180 days mail); SP	NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA
FRAGMIN SOSY	4	SP; 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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA	<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)
Anticonvulsants - Misc.			<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)
APTIOM	3	QL(2 ea daily); ST	<i>lamotrigine TABS</i>	1B	
BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 ea daily); PA	<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)
BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 ea daily); PA	<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)
BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA	<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)
BRIVIACT TABS	3	QL(2 ea daily); PA	<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)
<i>carbamazepine CHEW</i>	1B		<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)	<i>levetiracetam TB24</i>	1B	QL(4 ea daily)
<i>carbamazepine CP12 100 MG</i>	1B		<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)	<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)
<i>carbamazepine SUSP</i>	1B		<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)
<i>carbamazepine TABS</i>	1B		<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>carbamazepine TB12 100 MG, 400 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>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)	<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA	<i>primidone 50 MG, 250 MG</i>	1B	
DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA	<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA
DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA	<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA
DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA	<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
EPIDIOLEX	3	PA	TEGRETOL SUSP (<i>carbamazepine</i>)	2	
<i>gabapentin CAPS</i>	1B		TEGRETOL TABS (<i>carbamazepine</i>)	2	
<i>gabapentin SOLN</i>	1B	QL(60 ml daily)	<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>gabapentin TABS 600 MG, 800 MG</i>	1B		<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)	<i>topiramate CS24</i>	3	PA
<i>lacosamide TABS</i>	1B	QL(2 ea daily)	<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>vigabatrin PACK</i>	4	QL(6 ea daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 ea daily); SP; PA
Hydantoins		
<i>DILANTIN (phenytoin sodium extended)</i>	2	
<i>DILANTIN</i>	2	
<i>DILANTIN INFATABS CHEW (phenytoin)</i>	2	
<i>DILANTIN-125 SUSP (phenytoin)</i>	2	
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	
<i>phenytoin SUSP</i>	1B	
Succinimides		
<i>ethosuximide CAPS</i>	1B	QL(6 ea daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ml daily)
<i>methsuximide</i>	1B	QL(4 ea daily)
<i>ZARONTIN CAPS (ethosuximide)</i>	2	QL(6 ea daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML</i>	1B	
<i>valproic acid CAPS</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	1B	QL(1 ea daily)
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine TBDP 45 MG</i>	1B	QL(1 ea daily)
<i>mirtazapine TBDP 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TBDP 15 MG</i>	1B	QL(3 ea daily)
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	QL(3 ea daily)
<i>bupropion hcl TB12 100 MG</i>	1B	QL(4 ea daily)
<i>bupropion hcl TB12 200 MG</i>	1B	QL(2 ea daily)
<i>bupropion hcl TB12 150 MG</i>	1B	QL(3 ea daily)
<i>bupropion hcl TB24 150 MG</i>	1B	QL(3 ea daily)
<i>bupropion hcl TB24 300 MG</i>	1B	QL(1 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
<i>EMSAM</i>	3	QL(1 ea daily)
<i>MARPLAN</i>	2	QL(6 ea daily)
<i>phenelzine sulfate</i>	1B	
<i>tranylcypromine sulfate</i>	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
<i>SPRAVATO 56MG DOSE</i>	4	PA
<i>SPRAVATO 84MG DOSE</i>	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)	<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	QL(2 ea daily)
Tricyclic Agents			<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	QL(4 ea daily)
<i>amitriptyline hcl TABS</i>	1B		GLYXAMBI	2	QL(1 ea daily)
<i>amoxapine</i>	1B		JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
<i>clomipramine hcl</i>	1B		JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
<i>desipramine hcl TABS</i>	1B		JANUMET TABS	2	QL(2 ea daily)
<i>doxepin hcl CAPS</i>	1B		<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>doxepin hcl CONC</i>	1B		<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 ea daily)
<i>imipramine hcl TABS</i>	1B		<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 ea daily)
<i>imipramine pamoate</i>	1B		<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 ea daily)
<i>nortriptyline hcl CAPS</i>	1B		SOLQUA 100/33	2	QL(0.5 ml daily); PA
<i>nortriptyline hcl SOLN</i>	1B		SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily)
<i>protriptyline hcl</i>	1B		SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
<i>trimipramine maleate CAPS</i>	1B		SYNJARDY TABS	2	QL(2 ea daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar			TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)
Alpha-Glucosidase Inhibitors			TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)
<i>acarbose</i>	1B	QL(3 ea daily)	XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(1 ea daily)
<i>miglitol</i>	1B	QL(3 ea daily)	XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(2 ea daily)
Antidiabetic Combinations			XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
<i>alogliptin-metformin hcl</i>	1B	QL(2 ea daily); PA			
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 ea daily); PA			
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 ea daily); PA			
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 ea daily)			
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	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)			
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	QL(4 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
Biguanides		
<i>metformin hcl TABS 500 MG</i>	1B	QL(5 ea daily)
<i>metformin hcl TABS 1000 MG</i>	1B	QL(2.5 ea daily)
<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 25 MG</i>	1B	
<i>alogliptin benzoate 12.5 MG</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 MG/1.5ML	2	QL(0.054 ml daily); PA
OZEMPIC SOPN	2	QL(0.108 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		

Drug Name	Drug Tier	Requirements/Limits
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	
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)

Drug Name	Drug Tier	Requirements/Limits
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
<i>FARXIGA (dapagliflozin propanediol)</i>	2	QL(1 ea daily)
<i>FARXIGA</i>	2	QL(1 ea daily)
<i>JARDIANCE</i>	2	QL(1 ea daily)
Sulfonylureas		
<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
<i>MOTOFEN</i>	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
<i>CHEMET</i>	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>VISTOGARD</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits
Opioid Antagonists		
<i>KLOXXADO LIQD</i>	3	
<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	
<i>naltrexone hcl</i>	1B	
<i>OPVEE NA</i>	3	
<i>VIVITROL</i>	3	1 max fill(s) per 30 day(s) retail
<i>ZIMHI SOSY</i>	3	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
<i>ANZEMET TABS 50 MG</i>	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 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<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 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		

Drug Name	Drug Tier	Requirements/Limits
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
<i>AKYNZEO</i>	3	PA
<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)
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 ea daily)
<i>aprepitant MISC</i>	1B	PA
<i>VARUBI TBPk</i>	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate</i>	1B	
<i>ERAXIS</i>	3	
<i>micafungin sodium</i>	1B	PA
Antifungals		
<i>ABELCET</i>	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)

Drug Name	Drug Tier	Requirements/Limits
<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		
<i>CRESEMBA CAPS OR 186 MG</i>	3	PA
<i>fluconazole SUSP</i>	1B	
<i>fluconazole TABS</i>	1B	
<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)
<i>TOLSURA CAPS</i>	4	PA
<i>voriconazole TABS</i>	1B	QL(4 ea daily)
ANTI-HISTAMINES - 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	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antihistamines - Non-Sedating			<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)
<i>cetirizine hcl TABS</i>	1A	QL(1 ea daily)	<i>cholestyramine PACK</i>	1B	QL(6 ea daily)
<i>desloratadine TABS</i>	1B	QL(1 ea daily)	<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 ea daily)	<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ml daily); RX/OTC	<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 ea daily); RX/OTC	<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)
<i>loratadine CAPS</i>	1B		<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)
<i>loratadine CHEW</i>	1B		<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)
<i>loratadine SOLN</i>	1B		Fibric Acid Derivatives		
<i>loratadine TABS</i>	1A		<i>choline fenofibrate</i>	1B	QL(1 ea daily)
<i>loratadine TBDP</i>	1B		<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1B	QL(1 ea daily)
Antihistamines - Phenothiazines			<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 ea daily)
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	1B		<i>gemfibrozil TABS</i>	1B	QL(2 ea daily)
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 ea daily)	HMG CoA Reductase Inhibitors		
<i>promethazine hcl SUPP 50 MG</i>	1B		<i>atorvastatin calcium TABS</i>	1B	QL(1 ea daily)
<i>promethazine hcl TABS</i>	1B		<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 ea daily)
Antihistamines - Piperidines			<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 ea daily)
<i>cyproheptadine hcl SYRP</i>	1B		<i>lovastatin TABS 10 MG, 20 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(1 ea daily); PV
<i>cyproheptadine hcl TABS</i>	1B		<i>lovastatin TABS 40 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(2 ea daily); PV
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			<i>pravastatin sodium</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Combinations			<i>rosuvastatin calcium TABS</i>	3	QL(1 ea daily)
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)	<i>simvastatin TABS</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Misc.			Intestinal Cholesterol Absorption Inhibitors		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA	<i>ezetimibe</i>	1B	QL(1 ea daily)
<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)			

Drug Name	Drug Tier	Requirements/Limits
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 ea daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ml daily); PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ml daily); PA
REPATHA SOSY	4	QL(0.0714 ml daily); PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)
<i>captopril 12.5 MG</i>	1B	
<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 2 MG, 8 MG</i>	1B	QL(2 ea daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>ramipril CAPS</i>	1B	
<i>trandolapril 1 MG, 2 MG</i>	1B	QL(1 ea daily)
<i>trandolapril 4 MG</i>	1B	QL(2 ea daily)
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		

Drug Name	Drug Tier	Requirements/Limits
<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		
<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	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)	<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B		<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 ea daily)
<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 ea daily)	<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>irbesartan-hydrochlorothiazide</i>	1B		Antihypertensives - Misc.		
<i>lisinopril & hydrochlorothiazide</i>	1B		VECAMYL	3	PA
<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	QL(1 ea daily)	Direct Renin Inhibitors		
<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	QL(2 ea daily)	<i>aliskiren fumarate</i>	1B	QL(1 ea daily)
<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)	Selective Aldosterone Receptor Antagonists (SARAs)		
<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B		<i>eplerenone</i>	1B	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST	Vasodilators		
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B		<i>hydralazine hcl SOLN</i>	1B	
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 ea daily)	<i>hydralazine hcl TABS</i>	1B	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 ea daily)	<i>minoxidil 2.5 MG, 10 MG</i>	1B	
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 ea daily)	ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)	Anti-infective Agents - Misc.		
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)	<i>bacitracin</i>	3	
			IMPAVIDO	3	QL(3 ea daily); PA
			<i>metronidazole TABS</i>	1B	
			<i>trimethoprim TABS</i>	1B	
			XIFAXAN 550 MG	3	QL(3 ea daily); AL(At least 12 yrs old); PA
			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
			Anti-infective Misc. - Combinations		

Drug Name	Drug Tier	Requirements/Limits
<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
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>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<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		
CAYSTON	4	QL(3 ml daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	
<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>fosfomicin 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

Drug Name	Drug Tier	Requirements/Limits
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		
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 ea daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 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

Drug Name	Drug Tier	Requirements/Limits
<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		
<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
TRECTOR	3	QL(4 ea daily)
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
<i>bendamustine hcl SOLR</i>	4	SP; PA
<i>busulfan SOLN</i>	4	SP; PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>carmustine</i>	4	SP; 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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLEOSTINE 40 MG, 100 MG	4	PA	<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
GLEOSTINE 10 MG	4	SP; PA	<i>pralatrexate 20 MG/ML</i>	4	SP; PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	TABLOID	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
LEUKERAN	4	SP; PA	Antineoplastic - Angiogenesis Inhibitors		
<i>melphalan</i>	1B		INLYTA	4	QL(2 ea daily); SP; PA
<i>melphalan hcl IV</i>	1B		LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA
MYLERAN TABS	4	SP; PA	LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA	LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA
TEMODAR SOLR	4	SP; PA	LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA
<i>temozolomide CAPS</i>	4	SP; PA	LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA
<i>thiotepa 15 MG</i>	4	SP; PA	LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA
ZANOSAR	4	SP; PA	LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA
Antimetabolites			LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA
<i>azacitidine SUSR</i>	4	SP; PA	MVASI	4	PA
<i>capecitabine</i>	4	SP; PA	ZALTRAP 100 MG/4ML	4	SP; PA
<i>clofarabine</i>	4	SP; PA	ZIRABEV	4	PA
<i>cytarabine SOLN</i>	4	SP; PA	Antineoplastic - Antibodies		
<i>decitabine</i>	4	SP; PA	ADCETRIS	4	SP; PA
<i>floxuridine</i>	4	SP; PA	ARZERRA	4	SP; PA
<i>fludarabine phosphate SOLN</i>	4	SP; PA	RUXIENCE	4	PA
<i>fludarabine phosphate SOLR</i>	4	SP; PA	TRUXIMA	4	PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA	YERVOY	4	SP; PA
<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA	Antineoplastic - Anti-HER2 Agents		
<i>mercaptopurine TABS</i>	1B		KANJINTI	4	PA
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B		OGIVRI	4	PA
<i>methotrexate sodium SOLR</i>	1B	SP	PERJETA	4	SP; PA
<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP	TRAZIMERA	4	PA
<i>nelarabine</i>	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits
TUKYSA	4	PA
Antineoplastic - EGFR Inhibitors		
ERBITUX	4	SP; PA
<i>erlotinib hcl</i>	4	QL(1 ea daily); SP; PA
<i>gefitinib</i>	4	QL(2 ea daily); PA
GILOTRIF	4	QL(1 ea daily); PA
TAGRISSE 80 MG	4	QL(1 ea daily); PA
TAGRISSE 40 MG	4	QL(2 ea daily); PA
VECTIBIX 100 MG/5ML	4	SP; PA
VIZIMPRO	4	QL(1 ea daily); PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 ea daily); SP; PA
ODOMZO	4	QL(1 ea daily); PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); SP; PA
<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); SP; PA
<i>anastrozole</i>	1B	QL(1 ea daily)
<i>bicalutamide</i>	1B	QL(1 ea daily); SP
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA
EMCYT	4	SP; PA
ERLEADA 240 MG	4	QL(1 ea daily); PA
ERLEADA 60 MG	4	QL(4 ea daily); PA
<i>exemestane</i>	4	QL(1 ea daily); SP
FIRMAGON	4	QL(0.143 ea daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>flutamide</i>	4	QL(6 ea daily); SP; PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); PA
<i>letrozole</i>	1B	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 ea daily); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); SP; PA
LYSODREN	4	SP; PA
<i>megestrol acetate SUSP</i>	1B	
<i>megestrol acetate TABS</i>	1B	
<i>nilutamide</i>	1B	QL(2 ea daily)
NUBEQA	4	QL(4 ea daily); PA
<i>tamoxifen citrate TABS</i>	0	
<i>tamoxifen citrate TABS</i>	0	
<i>toremifene citrate</i>	1B	
TRELSTAR MIXJECT	4	SP; PA
XTANDI CAPS	4	QL(4 ea daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 ea daily); PA
XTANDI TABS 40 MG	4	QL(4 ea daily); PA
YONSA	4	QL(4 ea daily); PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); SP; PA
Antineoplastic - Immunomodulators		
POMALYST	4	QL(1 ea daily); PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antineoplastic - XPO1 Inhibitors			BOSULIF TABS 400 MG	4	QL(1 ea daily); PA
XPOVIO	4	PA	BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA
XPOVIO 60 MG TWICE WEEKLY	4	PA	BRAFTOVI 75 MG	4	QL(6 ea daily); SP; PA
XPOVIO 80 MG TWICE WEEKLY	4	PA	BRUKINSA	4	PA
Antineoplastic Antibiotics			CABOMETYX TABS	4	QL(1 ea daily); PA
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA	CALQUENCE	4	QL(2 ea daily); PA
<i>dactinomycin</i>	4	SP; PA	CALQUENCE	4	QL(2 ea daily); PA
<i>doxorubicin hcl liposomal IV 2 MG/ML</i>	4	SP; PA	CAPRELSA	4	QL(1 ea daily); SP; PA
<i>doxorubicin hcl SOLN</i>	4	SP; PA	COMETRIQ KIT	4	QL(3 ea daily); SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA	COMETRIQ KIT	4	QL(2 ea daily); SP; PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA	COMETRIQ KIT	4	QL(4 ea daily); SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA	COPIKTRA	4	PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA	<i>dasatinib</i>	4	QL(1 ea daily); SP; PA
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA	<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA
<i>valrubicin</i>	4	SP; PA	IBRANCE CAPS	4	QL(1 ea daily); PA
Antineoplastic Combinations			IBRANCE TABS	4	QL(1 ea daily); PA
KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA	ICLUSIG	4	QL(1 ea daily); PA
KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA	<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA
KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA	IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA
Antineoplastic Enzyme Inhibitors			IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA
ALECENSA	4	QL(4 ea daily); PA	IMBRUVICA SUSP	4	QL(8 ml daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
ALUNBRIG TBPK	4	QL(1 ea daily); PA	INREBIC	4	PA
BALVERSA	4	PA	JAKAFI	4	QL(2 ea daily); SP; PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	KISQALI	4	QL(2.5 ea daily); PA
BOORTEZOMIB SOLR IV 3.5 MG	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KISQALI	4	QL(2 ea daily); PA	<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA
KOSELUGO	4	PA	TABRECTA	4	PA
KYPROLIS	4	PA	TAFINLAR CAPS	4	QL(4 ea daily); PA
<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA	TALZENNA	4	QL(1 ea daily); PA
LORBRENA	4	QL(1 ea daily); PA	TALZENNA	4	QL(1 ea daily); PA
LYNPARZA TABS	4	QL(4 ea daily); PA	TASIGNA 50 MG	4	QL(4 ea daily); PA
MEKINIST TABS 0.5 MG	4	QL(3 ea daily); PA	TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA
MEKINIST TABS 2 MG	4	QL(1 ea daily); PA	TAZVERIK	4	PA
MEKTOVI	4	QL(6 ea daily); SP; PA	<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA
NINLARO	4	QL(0.143 ea daily); PA	TIBSOVO	4	PA
<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA	TURALIO	4	AC; PA
PEMAZYRE	4	QL(1 ea daily); PA	TURALIO	4	PA
PIQRAY 200MG DAILY DOSE	4	QL(1 ea daily); PA	VERZENIO	4	QL(2 ea daily); PA
PIQRAY 250MG DAILY DOSE	4	QL(1 ea daily); PA	VITRAKVI CAPS	4	PA
PIQRAY 300MG DAILY DOSE	4	QL(1 ea daily); PA	VITRAKVI SOLN	4	PA
QINLOCK	4	PA	XALKORI CAPS	4	QL(2 ea daily); SP; PA
RETEVMO CAPS	4	PA	XOSPATA	4	PA
<i>romidepsin SOLR</i>	4	SP; PA	ZEJULA CAPS	4	QL(3 ea daily); PA
ROZLYTREK CAPS	4	PA	ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
RUBRACA	4	QL(4 ea daily); PA	ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
SCEMBLIX 100 MG	4	QL(4 ea daily); PA	ZELBORAF	4	QL(8 ea daily); SP; PA
SCEMBLIX 20 MG, 40 MG	4	QL(2 ea daily); PA	ZOLINZA	4	QL(4 ea daily); SP; PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA	ZYDELIG	4	QL(2 ea daily); PA
SPRYCEL (<i>dasatinib</i>)	4	QL(1 ea daily); SP; PA	Antineoplastic Enzymes		
STIVARGA	4	QL(4 ea daily); SP; PA	ONCASPAR	4	SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA	Antineoplastics Misc.		
			ACTIMMUNE 100 MCG/0.5ML	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<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
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
<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
JEVTANA	4	SP; PA
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<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
Topoisomerase I Inhibitors		
HYCAMTIN CAPS	4	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLR</i>	4	SP; PA
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)
<i>tolcapone</i>	1B	
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	

Drug Name	Drug Tier	Requirements/Limits
<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)
<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 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)
<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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
<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 2.5 MG</i>	1B	QL(4 ea daily); PA
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
<i>clozapine TBDP 25 MG</i>	1B	QL(3 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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)	<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)	<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)	<i>abacavir sulfate TABS</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)	APTIVUS CAPS	3	QL(4 ea daily)
<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)	<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)
<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)	<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)
Phenothiazines			BIKTARVY	3	QL(1 ea daily)
<i>chlorpromazine hcl SOLN</i>	3		CIMDUO	3	QL(1 ea daily); ST
<i>chlorpromazine hcl TABS</i>	1B		COMPLERA	3	QL(1 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		<i>darunavir TABS 600 MG</i>	1B	QL(2 ea daily)
<i>fluphenazine hcl SOLN</i>	1B		DELSTRIGO	3	QL(1 ea daily)
<i>fluphenazine hcl TABS</i>	1B		DOVATO	3	QL(1 ea daily)
<i>perphenazine TABS</i>	1B		EDURANT	3	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 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)
REXULTI	3	PA	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
Thioxanthenes			EMTRIVA SOLN	3	QL(24 ml daily)
<i>thiothixene</i>	1B		<i>etravirine 100 MG</i>	1B	QL(4 ea daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>etravirine 200 MG</i>	1B	QL(2 ea daily)
Antiretrovirals			EVOTAZ	3	QL(1 ea daily)
			<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FUZEON SOLR	4	SP; PA	<i>tenofovir disoproxil fumarate</i> TABS	1B	
GENVOYA	3	QL(1 ea daily)	TIVICAY TABS	3	QL(2 ea daily)
INTELENCE 25 MG	3	QL(8 ea daily)	TRIUMEQ TABS	3	QL(1 ea daily)
ISENTRESS HD TABS	3	QL(2 ea daily)	TRIZIVIR	3	QL(2 ea daily)
ISENTRESS CHEW	3	QL(6 ea daily)	TYBOST	3	QL(1 ea daily)
ISENTRESS TABS	3	QL(2 ea daily)	VIRACEPT TABS 250 MG	3	QL(10 ea daily)
JULUCA	3	QL(1 ea daily)	VIRACEPT TABS 625 MG	3	QL(4 ea daily)
<i>lamivudine</i> SOLN	1B	QL(30 ml daily)	VIREAD POWD	3	QL(7.5 gm daily)
<i>lamivudine</i> TABS 300 MG	1B	QL(1 ea daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 ea daily)
<i>lamivudine</i> TABS 150 MG	1B	QL(2 ea daily)	<i>zidovudine</i> CAPS	1B	QL(6 ea daily)
<i>lamivudine-zidovudine</i>	1B	QL(2 ea daily)	<i>zidovudine</i> SYRP	1B	QL(60 ml daily)
LEXIVA SUSP	3	QL(56 ml daily)	<i>zidovudine</i> TABS	1B	QL(2 ea daily)
<i>lopinavir-ritonavir</i> SOLN	1B	QL(12.5 ml daily)	CMV Agents		
<i>lopinavir-ritonavir</i> TABS	1B	QL(4 ea daily)	<i>cidofovir</i>	3	
<i>maraviroc</i> TABS 300 MG	1B	QL(4 ea daily)	<i>ganciclovir sodium</i> SOLR	1B	
<i>maraviroc</i> TABS 150 MG	1B	QL(2 ea daily)	<i>valganciclovir hcl</i> TABS	1B	QL(4 ea daily); PA
<i>nevirapine</i> SUSP	1B	QL(40 ml daily)	Hepatitis Agents		
<i>nevirapine</i> TABS	1B	QL(2 ea daily)	<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP; PA
<i>nevirapine</i> TB24 100 MG	1B	QL(3 ea daily)	<i>entecavir</i> TABS	4	QL(1 ea daily); SP; PA
<i>nevirapine</i> TB24 400 MG	1B	QL(1 ea daily)	EPIVIR HBV SOLN	4	QL(60 ml daily); SP; PA
NORVIR CAPS	2	QL(12 ea daily)	<i>lamivudine (hbv)</i> TABS	1B	QL(3 ea daily); SP
NORVIR PACK	3	QL(12 ea daily)	PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA
NORVIR SOLN	3	QL(15 ml daily)	PEGASYS SOSY	4	QL(0.072 ml daily); PA
ODEFSEY	3	QL(1 ea daily)	<i>ribavirin (hepatitis c)</i> CAPS	1B	QL(7 ea daily)
PIFELTRO	3	QL(1 ea daily)	<i>ribavirin (hepatitis c)</i> TABS 200 MG	1B	QL(7 ea daily)
PREZCOBIX	3	QL(1 ea daily)	SOFOSBUVIR/VELPATA SVIR TABS	4	QL(1 ea daily); PA
PREZISTA SUSP	3	QL(12 ml daily)	VOSEVI	4	QL(1 ea daily); PA
PREZISTA TABS 75 MG, 150 MG	3	QL(2 ea daily)	Herpes Agents		
RETROVIR IV INFUSION SOLN	3				
<i>ritonavir</i> TABS	1B	QL(12 ea daily)			
SELZENTRY SOLN	3	QL(30 ml daily)			
SELZENTRY TABS 25 MG, 75 MG	3	QL(2 ea daily)			
<i>stavudine</i> CAPS	1B	QL(2 ea daily)			
STRIBILD	3	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir CAPS</i>	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)
<i>acyclovir SUSP</i>	1B	QL(13.34 ml daily)
<i>acyclovir TABS OR</i>	1B	QL(5 ea daily)
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 ea daily)
<i>famciclovir 500 MG</i>	1B	QL(4 ea daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 ea daily)
<i>valacyclovir hcl 1 GM, 1000 MG</i>	1B	QL(4 ea daily)
Influenza Agents		
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days. ; 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>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
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1B	
<i>carvedilol phosphate</i>	3	QL(1 ea daily)
<i>labetalol hcl SOLN</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 ea daily)
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	1B	
<i>atenolol TABS</i>	1B	
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	
<i>metoprolol succinate TB24 200 MG</i>	1B	QL(2 ea daily)
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	
<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
Beta Blockers Non-Selective		
HEMANGEOL SOLN OR	4	QL(75 ml daily); PA
<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>nadolol TABS 80 MG</i>	1B	
<i>pindolol TABS</i>	1B	
<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl TABS</i>	1B	
<i>sotalol hcl (afib/afI)</i>	1B	
<i>sotalol hcl TABS 240 MG</i>	1B	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>timolol maleate TABS</i>	1B	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate TABS</i>	1B		<i>digoxin SOLN OR 0.05 MG/ML</i>	1B	
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B		<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)	LANOXIN SOLN IJ (<i>digoxin</i>)	2	
<i>diltiazem hcl extended release beads</i>	1B		LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	
<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>diltiazem hcl CP24</i>	1B		Cardiovascular Agents Misc. - Combinations		
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B		<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 ea daily)
DILTIAZEM HCL SOLR	1B		<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
<i>diltiazem hcl TABS</i>	1B		Impotence Agents		
<i>diltiazem hcl TB24</i>	1B		<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA
<i>felodipine</i>	1B		STENDRA	3	QL(0.134 ea daily)
<i>isradipine CAPS</i>	1B		<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA
<i>nicardipine hcl CAPS</i>	1B		Prostaglandin Vasodilators		
<i>nicardipine hcl SOLN</i>	1B		<i>epoprostenol sodium</i>	4	PA
<i>nifedipine CAPS 10 MG</i>	1B		ORENITRAM TBCR	4	PA
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)	<i>treprostinil SOLN IJ</i>	4	SP; PA
<i>nifedipine TB24</i>	1B		TYVASO REFILL KIT SOLN IN	4	PA
<i>nifedipine TB24 60 MG</i>	1B	QL(2 ea daily)	TYVASO STARTER KIT SOLN IN	4	PA
<i>nifedipine TB24 90 MG</i>	1B	QL(1 ea daily)	TYVASO SOLN IN	4	PA
<i>nimodipine CAPS</i>	1B		Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>nisoldipine</i>	1B		<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)	<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA
<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					

Drug Name	Drug Tier	Requirements/Limits
<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA
OPSUMIT	4	QL(1 ea daily); PA
TRACLEER TBSO	4	QL(2 ea daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ml daily); PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION PACK TBPB	4	1 max fill(s) per 180 day(s) retail; PA
UPTRAVI TABS 200 MCG	4	PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	4	QL(3 ea daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	3	QL(2 ea daily); PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 ea daily); PA
VYNDAQEL	4	QL(4 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	
<i>cefuroxime sodium IJ 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1B	
<i>cefdinir SUSR</i>	1B	
<i>cefixime CAPS</i>	1B	
<i>cefixime SUSR</i>	1B	ST
<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B	
<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefpodoxime proxetil TABS</i>	1B	
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium IJ 250 MG</i>	1A	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl SOLR IV 2 GM</i>	1B	
Cephalosporins - 5th Generation		
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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(1 ml per 90 day(s) retail)
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	
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 0.5 MG, 0.75 MG</i>	1A	
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 TBDP</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 250 MG	3	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide 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 200 MG</i>	1B	QL(3 ea daily)
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitartrate-homatropine methylbromide TABS</i>	3	PA	<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
Cough/Cold/Allergy Combinations			<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B		<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old)
TUZISTRA XR	2	PA	<i>benzoyl peroxide LIQD 4 %, 7 %, 10 %</i>	1B	AL(At least 12 yrs old)
Misc. Respiratory Inhalants			<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
HYPERSAL NEBU	1B		<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 gm daily)
NEBUSAL NEBU	1B		<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B		<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ml daily); AL(At least 12 yrs old)
Mucolytics			<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>acetylcysteine SOLN</i>	1B		<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
DERMATOLOGICALS - Drugs to Treat Skin Conditions			<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
Acne Products			<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST	DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old); ST	<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); ST; RX/OTC	<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST	<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC	PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC	<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA	<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST	<i>ciclopirox GEL</i>	1B	QL(3.35 gm daily)
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)	<i>ciclopirox SHAM</i>	1B	QL(10 ml daily)
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1B	AL(At least 12 yrs old)	<i>ciclopirox SOLN</i>	1B	QL(0.22 ml daily)
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC
<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 (topical) SOLN</i>	1B	QL(10 ml daily); RX/OTC
<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>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 gm daily)
Agents for External Genital and Perianal Warts			<i>clotrimazole w/ betamethasone LOTN</i>	1B	
VEREGEN	3	QL(1 gm daily)	<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)
Antibiotics - Topical			ERTACZO	3	QL(2.15 gm daily)
ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)	<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)	<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)
<i>gentamicin sulfate (topical) OINT</i>	1B		<i>luliconazole</i>	1B	PA
<i>mupirocin OINT</i>	1B	QL(6 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
NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA	<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
Antifungals - Topical			<i>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC	<i>nystatin (topical) OINT</i>	1B	QL(6 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 (topical) POWD EX</i>	1B	QL(10 gm daily)
<i>ciclopirox olamine SUSP</i>	1B		<i>nystatin-triamcinolone CREA</i>	1B	QL(10 gm daily)
			<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<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
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		

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl (antipruritic)</i>	3	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 25 MG</i>	1B	QL(2 ea daily)
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 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(0.072 ml daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TREMFYA SOAJ	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)
Antiseborrheic Products			<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)
<i>selenium sulfide LOTN 2.5 %</i>	1B		<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)
Antivirals - Topical			<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)
<i>penciclovir</i>	3	QL(0.18 gm daily)	<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)
Burn Products			<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
<i>mafenide acetate PACK</i>	3		<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>silver sulfadiazine</i>	1B	QL(20 gm daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
SULFAMYLON CREA	3		<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
Corticosteroids - Topical			<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)	<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)	<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>amcinonide LOTN</i>	3		<i>clocortolone pivalate</i>	3	QL(3 gm daily)
<i>amcinonide OINT</i>	3		CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)			
<i>betamethasone dipropionate (topical) LOTN</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>desonide CREA</i>	1B	QL(4 gm daily)	<i>halobetasol propionate OINT</i>	1B	QL(3.5 gm daily)
<i>desonide LOTN</i>	1B	QL(4 ml daily)	HALOG OINT	3	PA
<i>desonide OINT</i>	1B	QL(3 gm daily)	<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 ea daily); RX/OTC
<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)	<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B	
<i>desoximetasone GEL</i>	1B	QL(3 gm daily)	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC
<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)	<i>hydrocortisone butyrate CREA</i>	1B	QL(3 gm daily)
<i>diflorasone diacetate CREA</i>	1B	PA	<i>hydrocortisone butyrate OINT</i>	1B	QL(3 gm daily)
<i>diflorasone diacetate OINT</i>	1B	PA	<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ml daily)
<i>fluocinolone acetonide CREA 0.01 %</i>	1B		<i>hydrocortisone valerate CREA</i>	1B	
<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 gm daily)	<i>hydrocortisone valerate OINT</i>	1B	
<i>fluocinolone acetonide OIL</i>	1B	QL(8 ml daily)	<i>mometasone furoate CREA</i>	1B	QL(3 gm daily)
<i>fluocinolone acetonide OINT</i>	1B	QL(4 gm daily)	<i>mometasone furoate OINT</i>	1B	QL(4 gm daily)
<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ml daily)	<i>mometasone furoate SOLN</i>	1B	QL(5 ml daily)
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)	<i>prednicarbate OINT</i>	1B	
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)	<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)	<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)
<i>fluocinonide GEL</i>	1B		<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)
<i>fluocinonide OINT</i>	1B	QL(2 gm daily)	<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)
<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)	<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>flurandrenolide CREA</i>	2	QL(2 gm daily)	<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ml daily)	<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)
<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 gm daily)	Eczema Agents		
<i>fluticasone propionate LOTN</i>	1B	QL(6 ml daily)			
<i>fluticasone propionate OINT</i>	1B	QL(4 gm daily)			
<i>halcinonide CREA</i>	1B	PA			
<i>halobetasol propionate CREA</i>	1B	QL(3.5 gm daily)			

Drug Name	Drug Tier	Requirements/Limits
DUPIXENT SOAJ SC 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOAJ SC 300 MG/2ML	4	QL(0.29 ml daily); PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox SOLN</i>	1B	
Local Anesthetics - Topical		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ml daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ml daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 gm daily)
<i>lidocaine PTCH 5 %</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
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
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 gm daily); PA
Rosacea Agents		
<i>azelaic acid GEL</i>	1B	QL(1.67 gm daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA
<i>metronidazole (topical) CREA</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)
<i>metronidazole (topical) LOTN</i>	1B	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1B	PA
<i>ivermectin (pediculicide)</i>	1B	PA
<i>malathion</i>	1B	
<i>permethrin CREA</i>	1B	
<i>permethrin LIQD EX</i>	1B	
<i>spinosad</i>	1B	PA
Wound Care Products		
REGRANEX	3	QL(0.5 gm daily)
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)

Drug Name	Drug Tier	Requirements/Limits
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
Diagnostic Tests		
CHEMSTRIP-K STRP	1B	
FORA GTEL BLOOD KETONE TEST STRIPS	1B	
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B	
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	Limit 100 per month; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization

Drug Name	Drug Tier	Requirements/Limits
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
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1B	QL(6 ea daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ethacrynic acid</i>	1B	QL(16 ea daily)	<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B		PAMIDRONATE DISODIUM SOLN	4	SP; PA
<i>furosemide TABS</i>	1B		PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>torseamide TABS</i>	1B		<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA
Potassium Sparing Diuretics			<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA
<i>amiloride hcl TABS</i>	1B		<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA
<i>spironolactone TABS</i>	1B		<i>risedronate sodium TBEC</i>	1B	PA
<i>triamterene CAPS</i>	1B	QL(3 ea daily)	<i>teriparatide SOPN</i>	4	QL(0.09 ml daily); SP; PA
Thiazides and Thiazide-Like Diuretics			TYMLOS	4	PA
<i>chlorthalidone 25 MG, 50 MG</i>	1B		XGEVA SOLN	4	SP; PA
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)	<i>zoledronic acid CONC</i>	4	SP; PA
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 ea daily)	<i>zoledronic acid SOLN</i>	4	SP; PA
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 ea daily)	Corticotropin		
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 ea daily)	ACTHAR GEL	3	PA
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 ea daily)	Fertility Regulators		
<i>metolazone</i>	1B	QL(2 ea daily)	CHORIONIC GONADOTROPIN IM	4	PA
ENDOCRINE AND METABOLIC AGENTS - MISC.			GnRH/LHRH Antagonists		
- Drugs to Treat Bone Disease and Regulate Hormones			<i>ganirelix acetate</i>	4	PA
Bone Density Regulators			ORLISSA	2	PA
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)	Growth Hormone Releasing Hormones (GHRH)		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)	EGRIFTA 2 MG	4	PA
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)	EGRIFTA SV	4	PA
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA	Growth Hormones		
<i>ibandronate sodium SOLN</i>	4	SP; PA	GENOTROPIN MINIQUICK PRSY	4	PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)	GENOTROPIN CART SC	4	PA
			HUMATROPE CART IJ	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; 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
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
SYNAREL	4	SP; PA
Metabolic Modifiers		
ALDURAZYME	4	SP; PA
<i>betaine</i>	4	SP; PA
<i>calcitriol CAPS</i>	1B	
<i>calcitriol SOLN IV</i>	1B	
<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA
<i>doxercalciferol CAPS</i>	1B	
<i>doxercalciferol SOLN</i>	1B	
ELAPRASE	4	SP; PA
LUMIZYME	4	SP; PA
MYALEPT	4	PA
<i>nitisinone CAPS</i>	4	PA
<i>paricalcitol CAPS</i>	1B	
<i>paricalcitol SOLN</i>	1B	
PHEBURANE PLLT	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>sapropterin dihydrochloride PACK</i>	4	PA
<i>sapropterin dihydrochloride TABS</i>	4	PA
<i>sodium phenylbutyrate POWD</i>	1B	PA
<i>sodium phenylbutyrate TABS</i>	1B	PA
STRENSIQ	4	PA
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	1B	
<i>desmopressin acetate spray refrigerated</i>	1B	
<i>desmopressin acetate SOLN IJ</i>	1B	PA
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SIGNIFOR	4	PA
Vasopressin Receptor Antagonists		
JYNARQUE TBPB	4	SP; PA
<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
BIJUVA	3	PA
CLIMARA PRO	3	
DUAVEE	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 ea daily)
Estrogens		
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<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>estradiol GEL 0.06 %</i>	3	
<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
ESTROGEL GEL (<i>estradiol</i>)	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	

Drug Name	Drug Tier	Requirements/Limits
<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		
<i>lubiprostone</i>	1B	QL(2 ea daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
<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)

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine TBEC 1.2 GM</i>	3	
RENFLXIS	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	
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	
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

Drug Name	Drug Tier	Requirements/Limits
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)
<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		

Drug Name	Drug Tier	Requirements/Limits
<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
ALTUVIIIO	4	PA
BENEFIX KIT	4	PA
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		

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP; PA	<i>ferrous sulfate TABS 65 MG, 325 MG</i>	0	
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA	<i>ferrous sulfate TBEC 325 MG</i>	0	
DOPTELET	4	QL(3 ea daily); PA	Stem Cell Mobilizers		
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	<i>plerixafor</i>	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA	HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
MIRCERA	4	PA	Hemostatics - Systemic		
MULPLETA	4	QL(1 ea daily); PA	<i>aminocaproic acid TABS</i>	1B	PA
NYVEPRIA	4	PA	<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	<i>tranexamic acid TABS</i>	1B	
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
PROCRIT 40000 UNIT/ML	4	SP; PA	Barbiturate Hypnotics		
PROMACTA PACK	4	QL(1 ea daily); PA	<i>phenobarbital ELIX</i>	1B	
PROMACTA TABS	4	QL(1 ea daily); PA	<i>phenobarbital TABS</i>	1B	
RETACRIT	4	PA	Hypnotics - Tricyclic Agents		
UDENYCA ONBODY SOSY	4	PA	<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
UDENYCA SOAJ	4	PA	Non-Barbiturate Hypnotics		
UDENYCA SOSY	4	PA	<i>estazolam</i>	1B	
ZARXIO	4	PA	<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST
Hematopoietic Mixtures			<i>flurazepam hcl</i>	1B	PA
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)	<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)
Iron			<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)
<i>ferrous sulfate SOLN 15 MG/ML</i>	0	AL(Up to 1 yrs old)	<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)

Drug Name	Drug Tier	Requirements/Limits
<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		
<i>BELSOMRA</i>	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		
<i>calcium polycarbophil TABS</i>	1B	
Laxative Combinations		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</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>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1B	
Saline Laxatives		
<i>OSMOPREP</i>	3	PA
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1A	
<i>bisacodyl TBEC</i>	1A	
Surfactant Laxatives		
<i>docusate calcium</i>	1A	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>docusate sodium CAPS 250 MG</i>	1A	
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 ea daily)
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1B	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	1B	
<i>azithromycin SOLR</i>	1B	
<i>azithromycin SUSR</i>	1B	
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 ea daily)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 ea per fill retail; 4 per fill mail)
<i>azithromycin TABS 250 MG</i>	1B	QL(6 ea per fill retail; 6 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
Erythromycins		
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1B	
<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>erythromycin ethylsuccinate TABS</i>	3	
Fidaxomicin		
<i>DIFICID TABS</i>	2	
MEDICAL DEVICES AND SUPPLIES		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Contraceptives			KIMONO SENSATION LUBRICATED MISC	0	
AIMSCO LUBRICATED MISC	0		KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	
CAYA DPRH	0		KIMONO SPECIAL DEVI	0	
DUREX EXTRA SENSITIVE THIN DEVI	0		K-Y ME & YOU EXTRA LUBRICATED DEVI	0	
DUREX EXTRA SENSITIVE THIN MISC	0		K-Y ME & YOU INTENSE DEVI	0	
DUREX TROPICAL MISC	0		MAXX LUBRICATED MISC	0	
FANTASY LUBRICATED/SPERMICIDE MISC	0		MAXX PLUS SPERMICIDE LUBRICATED MISC	0	
FANTASY LUBRICATED MISC	0		OMNIFLEX DIAPHRAGM	0	
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	REALITY LATEX CONDOMS/LUBRICATED MISC	0	
FEMCAP DEVI	0		REALITY LATEX/ULTRA TEXTURED DEVI	0	
KAMELEON LUBRICATED MISC	0		REALITY LATEX/ULTRA THIN DEVI	0	
KIMONO COLORS DEVI	0		TROJAN MAGNUM MISC	0	
KIMONO LUBRICATED MISC	0		TROJAN ULTRA THIN LUBRICATED MISC	0	
KIMONO MAXX/LARGE FLARE MISC	0		TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	0	
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0		TROJAN-ENZ LUBRICATED MISC	0	
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0		TROJAN-ENZ W/SPERMICIDAL MISC	0	
KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0		TRUE COVER DEVI	0	
KIMONO PS LUBRICATED MISC	0		TRUSTEX COLOR CONDOMS + LUBE MISC	0	
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0		TRUSTEX LUBRICATED EXTRALARGE MISC	0	
			TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	
			TRUSTEX LUBRICATED/RIBBED/STUDDED MISC	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0		Diabetic Supplies		
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0		FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
TRUSTEX LUBRICATED/SPERMICIDE MISC	0		FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX LUBRICATED MISC	0		FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0		FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	0		FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0		FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0		FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED MISC	0		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		ONETOUCH DELICA SAFETY LANCING DEVICE	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0		RELION 2-IN-1 LANCET DEVICES 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0		RELION 2-IN-1 LANCING DEVICE 25G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0		RELION 2-IN-1 LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0		SELECT LANCETS	1B	6.66/day
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0		TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0				

Drug Name	Drug Tier	Requirements/Limits
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 100 MG/ML	2	QL(0.1 ml daily); PA
EMGALITY SOSY 120 MG/ML	2	QL(0.07 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		
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST

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>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST	<i>potassium chloride in dextrose 5 %-20 MEQ/L</i>	1B	
<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>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-0.9 %</i>	1B	
<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1B	
MINERALS & ELECTROLYTES			POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	1B	
Bicarbonates			POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	1B	
<i>sodium acetate SOLN</i>	1B		<i>ringer's</i>	1B	
SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B		Fluoride		
Calcium			<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	0	QL(1 ea daily)
<i>calcium chloride (dihydrate) SOLN</i>	1B		Magnesium		
Electrolyte Mixtures			<i>magnesium sulfate IJ 50 %</i>	1B	
<i>dextrose in lactated ringers</i>	1B		Phosphate		
<i>electrolyte-148</i>	1B		<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	1B	
<i>electrolyte-a</i>	1B		Potassium		
IONOSOL-MB/DEXTROSE 5%	1B		<i>potassium acetate SOLN 2 MEQ/ML</i>	1B	
ISOLYTE-P/DEXTROSE 5%	1B		<i>potassium bicarbonate TBEF</i>	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				
PLASMA-LYTE A (<i>electrolyte-a</i>)	1B				
PLASMA-LYTE-148 (<i>electrolyte-148</i>)	1B				

Drug Name	Drug Tier	Requirements/ Limits
<i>potassium chloride microencapsulated crystals er</i>	1B	
<i>potassium chloride CPCR</i>	1B	
<i>potassium chloride PACK OR 20 MEQ</i>	1B	PA
<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B	
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B	
<i>potassium chloride TBCR</i>	1B	
Sodium		
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1B	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
<i>penicillamine CAPS</i>	1B	PA
<i>penicillamine TABS</i>	1B	QL(8 ea daily)
<i>trientine hcl 250 MG</i>	4	QL(8 ea daily); SP; PA
Immunomodulators		
<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA
<i>lenalidomide 20 MG</i>	4	QL(1 ea daily); PA
THALOMID	4	QL(3 ea daily); SP; PA
Immunosuppressive Agents		
ATGAM IV 50 MG/ML	4	SP; PA
AZATHIOPRINE	1B	
<i>azathioprine TABS</i>	1B	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<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	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		

Drug Name	Drug Tier	Requirements/Limits
<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)
EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)
GNP PRENATAL TABS	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
MASONATAL TABS	2	QL(1 ea daily)
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 ea daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 ea daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)
NEONATAL VITAMIN TABS	2	QL(1 ea daily)
NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC
ONE VITE WOMENS PRENATAL VITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC
ONE VITE WOMENS PRENATAL VITAMIN TABS	2	QL(1 ea daily)
PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)
PRENATAL ONE DAILY TABS	2	QL(1 ea daily)
PRENATAL PLUS VITAMIN AND MINERAL TABS	2	QL(1 ea daily); RX/OTC
PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)
PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)
PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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)	<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)
PRENATAL VITAMIN TABS	2	QL(1 ea daily)	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
PRENATAL TABS	2	QL(1 ea daily)	<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
PRENATRIX TABS	2	QL(1 ea daily); RX/OTC	<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
PRENATRYL TABS	2	QL(1 ea daily); RX/OTC	<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)	<i>tizanidine hcl CAPS</i>	1B	
QC PRENATAL TABS	2	QL(1 ea daily)	<i>tizanidine hcl TABS</i>	1B	
RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)	Direct Muscle Relaxants		
RA PRENATAL TABS	2	QL(1 ea daily)	<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)	Muscle Relaxant Combinations		
THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC	<i>orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG</i>	3	PA
TRICARE TABS	2	QL(1 ea daily); RX/OTC	NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC	Nasal Antiallergy		
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC	<i>azelastine hcl</i>	1B	RX/OTC
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			<i>olopatadine hcl (nasal)</i>	1B	
Central Muscle Relaxants			Nasal Anticholinergics		
<i>baclofen TABS 10 MG, 20 MG</i>	1B		<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
<i>carisoprodol TABS</i>	1B		<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)	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

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to 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	

Drug Name	Drug Tier	Requirements/Limits
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		
<i>apraclonidine hcl</i>	1B	
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B	
IOPIDINE	3	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	3	
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) OINT</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B	
<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	
NATACYN	2	
<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>ofloxacin (ophth)</i>	1B	
<i>polymyxin b-trimethoprim</i>	1B	
<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tobramycin (ophth) SOLN</i>	1B	
<i>trifluridine</i>	1B	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
<i>cyclosporine (ophth) EMUL</i>	3	PA
Ophthalmic Local Anesthetics		
<i>proparacaine hcl</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
Ophthalmic Steroids		
ALREX SUSP (<i>loteprednol etabonate</i>)	3	PA
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
<i>difluprednate</i>	1B	PA
<i>fluorometholone (ophth) SUSP</i>	1B	
FML FORTE SUSP	3	PA
FML OINT	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1B	PA
<i>loteprednol etabonate SUSP</i>	1B	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-polymyx-dexameth OINT</i>	1B	
<i>neomycin-polymyx-dexameth SUSP</i>	1B	
<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)
PRED MILD	3	PA
<i>prednisolone acetate (ophth)</i>	1B	
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1B	
Ophthalmics - Misc.		
ALOCRIAL	3	PA
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1B	
<i>bepotastine besilate</i>	3	PA
<i>brinzolamide</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
CYSTARAN	2	QL(2.143 ml daily); PA
<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 acetamide</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 125 MG/5ML</i>	1A	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<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>naftillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>megestrol acetate (appetite)</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate</i> TABS	0	
<i>progesterone</i> CAPS	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)
LUCEMYRA (<i>lofexidine hcl</i>)	3	QL(224 ea per 14 day(s) retail)
Antidementia Agents		
<i>donepezil hydrochloride</i> TABS 5 MG, 23 MG	1B	QL(1 ea daily)
<i>donepezil hydrochloride</i> TABS 10 MG	1B	QL(2 ea daily)
<i>donepezil hydrochloride</i> TBDP 5 MG	1B	QL(1 ea daily)
<i>donepezil hydrochloride</i> TBDP 10 MG	1B	QL(2 ea daily)
<i>galantamine hydrobromide</i> CP24	1B	QL(1 ea daily)
<i>galantamine hydrobromide</i> SOLN	1B	QL(6 ml daily)
<i>galantamine hydrobromide</i> TABS	1B	QL(2 ea daily)
<i>memantine hcl</i> TABS	1B	
<i>memantine hcl</i> TABS	1B	QL(2 ea daily)
<i>rivastigmine tartrate</i> CAPS	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
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
SAVELLA TABS	2	QL(2 ea daily); PA
Movement Disorder Drug Therapy		
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
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
AUSTEDO XR TB24	4	QL(1 ea daily); PA
AUSTEDO TABS	4	QL(4 ea daily); PA
INGREZZA CAPS	4	QL(1 ea daily); PA
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA
INGREZZA CPSP	4	QL(1 ea daily); PA
<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	4	QL(0.0714 ml daily); SP; PA
AVONEX PSKT	4	QL(0.0714 ml daily); SP; PA
BETASERON KIT	4	QL(0.5 ea daily); SP; PA
<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA
<i>dimethyl fumarate</i> CDPK	1B	QL(2 ea daily)
<i>dimethyl fumarate</i> CPDR	1B	QL(2 ea daily)
<i> fingolimod hcl</i>	4	QL(1 ea daily)
<i>glatiramer acetate</i> SOSY 20 MG/ML	4	QL(1 ml daily)
<i>glatiramer acetate</i> SOSY 40 MG/ML	4	QL(0.43 ml daily)

Drug Name	Drug Tier	Requirements/Limits
LEMTRADA	4	QL(1.2 ml daily); PA
PLEGRIDY STARTER PACK SOAJ SC	4	QL(0.036 ml daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA
PLEGRIDY SOAJ SC 125 MCG/0.5ML	4	QL(0.036 ml daily); PA
PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); SP; PA
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ml daily); SP; PA
<i>teriflunomide</i>	4	QL(1 ea daily)
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	3	QL(2 ea daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	

Drug Name	Drug Tier	Requirements/Limits
NICOTINE TRANSDERMAL SYSTEM KIT	0	
<i>nicotine MISC XX</i>	0	QL(1 ea daily)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 ea daily)
NICOTROL INHALER INHA	0	
NICOTROL NS SOLN	0	
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)
<i>varenicline tartrate TBPK</i>	0	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 ea daily); SP; PA
ORKAMBI PACK	4	QL(2 ea daily); PA
ORKAMBI TABS	4	QL(4 ea daily); PA
PULMOZYME	4	QL(2.5 ml daily); SP; PA
TRIKAFTA TBPK	4	QL(3 ea daily); PA
Pulmonary Fibrosis Agents		
OFEV	4	QL(2 ea daily); PA
<i>pirfenidone CAPS</i>	4	
<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/Limits
Glycylcyclines		
<i>tigecycline</i>	1B	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate SOLR</i>	1B	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<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	
DAPTACEL	0	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC INJ	0	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 30 MG</i>	1B	
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>NEXIUM 24HR TBEC (esomeprazole magnesium)</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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)
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)
<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA
<i>oxybutynin chloride SOLN</i>	1B	
<i>oxybutynin chloride TABS 5 MG</i>	1B	
<i>oxybutynin chloride TB24</i>	1B	
<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA
<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)
<i>tolterodine tartrate TABS</i>	1B	
<i>tropium chloride CP24</i>	1B	QL(1 ea daily)
<i>tropium chloride TABS</i>	1B	QL(3 ea daily)
Urinary Antispasmodics - Cholinergic Agonists		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>bethanechol chloride 25 MG</i>	1B		AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)	AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
Urinary Antispasmodics - Direct Muscle Relaxants			AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>flavoxate hcl</i>	1B		AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
VACCINES			AREXVY	0	
Bacterial Vaccines			COMIRNATY 2023-24 SUSP	0	
ACTHIB SOLR IM	0		COMIRNATY 2023-24 SUSY	0	
BEXSERO	0		COMIRNATY 2024-25 SUSY	0	
HIBERIX SOLR IJ	0		COMIRNATY SUSP	0	
MENACTRA	0		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
MENQUADFI	0		ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
MENVEO SOLR	0		FLUAD 2024-2025	0	1 max fill(s) per 180 day(s) retail
PEDVAX HIB SUSP	0		FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail
PNEUMOVAX 23 IJ 25 MCG/0.5ML	0		FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	0				
PREVNAR 13	0				
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail			
TRUMENBA	0				
VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail			
Viral Vaccines					
ABRYSVO	0				
AFLURIA 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail			
AFLURIA 2024-2025 SUSY	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
FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 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 QUADRIVALENT 2022-2023 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 2023-2024 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
FLUBLOK 2024-2025 SOSY	0	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 QUADRIVALENT 2022-2023	0	Limit 1 dose per season; 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 2023-2024	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail	FLUZONE 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail	FLUZONE 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE PF 2022-2023	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	FLUZONE HIGH-DOSE PF 2023-2024	0	1 max fill(s) per 180 day(s) retail
			FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail

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

Drug Name	Drug Tier	Requirements/Limits
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	0	
PFIZER-BIONTECH COVID-19VACCINE SUSP	0	
PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
RECOMBIVAX HB SUSP	0	1 max fill(s) per 365 day(s) retail
RECOMBIVAX HB SUSY	0	1 max fill(s) per 365 day(s) retail
ROTARIX SUSP	0	
ROTARIX SUSR	0	1 max fill(s) per 365 day(s) retail
ROTATEQ SOLN	0	1 max fill(s) per 365 day(s) retail
SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	0	
SPIKEVAX COVID-19 VACCINE SUSP	0	
TWINRIX SUSY	0	1 max fill(s) per 365 day(s) retail
VAQTA	0	1 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
VARIVAX SUSR IJ 1350 PFU/0.5ML	0	2 max fill(s) per 365 day(s) retail
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	0	
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	1B	
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(2.5 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 SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<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		

Drug Name	Drug Tier	Requirements/ Limits
<i>epinephrine (anaphylaxis)</i> SOAJ 0.15 MG/0.3ML	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)</i> SOAJ 0.3 MG/0.3ML	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	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
NIACIN TR TBCR	1B	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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daptomycin 500 MG	22	desmopressin acetate TABS 0.1 MG 45		dextroamphetamine sulfate CP24 10 MG, 15 MG	1
darifenacin hydrobromide	64	desmopressin acetate TABS 0.2 MG 45		dextroamphetamine sulfate CP24 5 MG	1
darunavir TABS 600 MG	30	desogestrel & ethinyl estradiol ...	35	dextroamphetamine sulfate TABS 2.5	
darunavir TABS 800 MG	30	desogestrel-ethinyl estradiol (biphasic)	35		
dasatinib	26	desogestrel-ethinyl estradiol (triphasic)	35		

MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1	diflorasone diacetate CREA 41	diphenhydramine hcl CAPS 50 MG 18
dextroamphetamine sulfate TABS 5 MG, 10 MG 1	diflorasone diacetate OINT 41	diphenhydramine hcl ELIX 12.5 MG/5ML 18
dextrose in lactated ringers 54	difluprednate 59	diphenhydramine hcl LIQD 12.5 MG/5ML 18
DIACOMIT CAPS 250 MG 12	digoxin SOLN OR 0.05 MG/ML 33	diphenhydramine hcl SOLN 50 MG/ML 18
DIACOMIT CAPS 500 MG 12	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG 33	diphenoxylate w/ atropine LIQD ... 17
DIACOMIT PACK 250 MG 12	dihydroergotamine mesylate SOLN IJ 1 MG/ML 53	diphenoxylate w/ atropine TABS ... 17
DIACOMIT PACK 500 MG 12	dihydroergotamine mesylate SOLN NA 4 MG/ML 53	DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP ... 63
diazepam (anticonvulsant) GEL ... 11	DILANTIN (phenytoin sodium extended) 13	dipyridamole 48
diazepam CONC 8	DILANTIN 13	disopyramide phosphate CAPS 8
diazepam SOLN OR 5 MG/5ML 8	DILANTIN INFATABS CHEW (phenytoin) 13	disulfiram 61
diazepam TABS 8	DILANTIN-125 SUSP (phenytoin) . 13	divalproex sodium TB24 13
diazoxide 16	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG 33	divalproex sodium TBEC 13
dichlorphenamide 43	diltiazem hcl coated beads CP24 180 MG, 240 MG 33	docetaxel CONC 20 MG/ML 28
diclofenac epolamine PTCH EX ... 39	diltiazem hcl CP12 33	docetaxel SOLN 20 MG/2ML 28
diclofenac potassium TABS 50 MG . 4	diltiazem hcl CP24 33	docusate calcium 50
diclofenac sodium (actinic keratoses) EX 39	diltiazem hcl extended release beads 33	docusate sodium CAPS 100 MG .. 50
diclofenac sodium (ophth) 59	diltiazem hcl SOLN 50 MG/10ML .. 33	docusate sodium CAPS 250 MG .. 50
diclofenac sodium (topical) GEL EX 39	DILTIAZEM HCL SOLR 33	dofetilide 9
diclofenac sodium TB24 4	diltiazem hcl TABS 33	donepezil hydrochloride TABS 10 MG 61
diclofenac sodium TBEC 4	diltiazem hcl TB24 33	donepezil hydrochloride TABS 5 MG, 23 MG 61
diclofenac w/ misoprostol TBEC 4	dimethyl fumarate CDPK 61	donepezil hydrochloride TBDP 10 MG 61
dicloxacillin sodium 60	dimethyl fumarate CPDR 61	donepezil hydrochloride TBDP 5 MG 61
dicyclomine hcl CAPS 63	DIPENTUM 46	DOPTelet 49
dicyclomine hcl SOLN OR 63		dorzolamide hcl 59
dicyclomine hcl TABS 64		
DIFFERIN LOTN 37		
DIFICID TABS 50		

doxercalciferol CAPS	45	DULERA	10	electrolyte-a	54
doxercalciferol SOLN	45	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	14	ELESTRIN GEL	46
doxorubicin hcl liposomal IV 2 MG/ML	26	duloxetine hcl CPEP 40 MG	14	eletriptan hydrobromide	53
doxorubicin hcl SOLN	26	DUPIXENT SOAJ SC 200 MG/1.14ML	42	ELIGARD KIT SC 7.5 MG	25
doxorubicin hcl SOLR 10 MG, 50 MG	26	DUPIXENT SOAJ SC 300 MG/2ML	42	ELIGARD SC 22.5 MG, 30 MG, 45 MG	25
doxycycline (monohydrate) CAPS 50 MG, 100 MG	63	DUPIXENT SOSY 100 MG/0.67ML	42	ELIQUIS STARTER PACK TBPK	11
doxycycline (monohydrate) CAPS 75 MG	63	DUPIXENT SOSY 200 MG/1.14ML	42	ELIQUIS TABS	11
doxycycline (monohydrate) TABS 100 MG	63	DUPIXENT SOSY 300 MG/2ML	42	ELLA	35
doxycycline (monohydrate) TABS 50 MG, 75 MG	63	DUREX EXTRA SENSITIVE THIN DEVI	51	ELMIRON CAPS	47
doxycycline hyclate CAPS	63	DUREX EXTRA SENSITIVE THIN MISC	51	ELOCTATE	48
doxycycline hyclate SOLR	63	DUREX TROPICAL MISC	51	EMCYT	25
doxycycline hyclate TABS 20 MG, 100 MG	63	dutasteride	47	EMFLAZA SUSP (deflazacort)	36
doxylamine-pyridoxine TBEC	18	econazole nitrate CREA	38	EMGALITY SOAJ	53
dronabinol CAPS	18	EDARBI	20	EMGALITY SOSY 100 MG/ML	53
drospirenone-ethinyl estradiol	35	EDURANT	30	EMGALITY SOSY 120 MG/ML	53
drospirenone-ethinyl estradiol-levomefolate calcium	35	efavirenz CAPS 200 MG	30	EMSAM	13
DROXIA CAPS	48	efavirenz CAPS 50 MG	30	emtricitabine CAPS	30
DUAVEE	45	efavirenz TABS	30	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	30
		efavirenz-emtricitabine-tenofovir disoproxil fumarate	30	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	30
		efavirenz-lamivudine-tenofovir disoproxil fumarate	30	EMTRIVA SOLN	30
		EGRIFTA 2 MG	44	EMVERM CHEW	8
		EGRIFTA SV	44	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG	21
		ELAPRASE	45	enalapril maleate & hydrochlorothiazide 25 MG-10 MG	21
		electrolyte-148	54	enalapril maleate TABS	20
				ENBREL MINI SOCT	4

ENBREL SOLN	4	EQL PRENATAL FORMULA TABS 56	escitalopram oxalate TABS 20 MG 14
ENBREL SOSY 25 MG/0.5ML	4	EQUETRO 100 MG	29
ENBREL SOSY 50 MG/ML	4	EQUETRO 200 MG	29
ENBREL SURECLICK SOAJ	4	EQUETRO 300 MG	29
ENGERIX-B SUSP 20 MCG/ML ...	65	ERAXIS	18
ENGERIX-B SUSY	65	ERBITUX	25
enoxaparin sodium SOLN IJ 300 MG/3ML	11	ergocalciferol CAPS	69
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11	ergocalciferol SOLN OR	69
enoxaparin sodium SOSY 30 MG/0.3ML	11	ergoloid mesylates TABS	62
enoxaparin sodium SOSY 40 MG/0.4ML	11	ERGOMAR SUBL	53
enoxaparin sodium SOSY 60 MG/0.6ML	11	ergotamine w/ caffeine TABS	53
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11	eribulin mesylate	28
ENSPRYNG	55	ERIVEDGE	25
entacapone	28	ERLEADA 240 MG	25
entecavir TABS	31	ERLEADA 60 MG	25
EPIDIOLEX	12	erlotinib hcl	25
epinastine hcl (ophth)	59	ERTACZO	38
epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	69	ertapenem sodium IJ	22
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	69	erythromycin (acne aid) PADS	37
EPIVIR HBV SOLN	31	erythromycin (acne aid) SOLN	37
eplerenone	21	erythromycin (ophth)	58
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	49	erythromycin base CPEP	50
epoprostenol sodium	33	erythromycin base TABS	50
		erythromycin base TBEC	50
		erythromycin ethylsuccinate SUSR 50	
		erythromycin ethylsuccinate TABS 50	
		escitalopram oxalate SOLN	14
		escitalopram oxalate TABS 10 MG 14	
			escitalopram oxalate TABS 5 MG . 14
			esomeprazole magnesium CPDR 20 MG
			esomeprazole magnesium CPDR 40 MG
			esomeprazole magnesium TBEC . 64
			ESPEROCT
			estazolam
			estradiol GEL 0.06 %
			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
			estradiol PTTW
			estradiol PTWK
			estradiol TABS
			estradiol vaginal CREA
			estradiol vaginal TABS
			estradiol valerate
			ESTROGEL GEL (estradiol)
			eszopiclone
			ethacrynic acid
			ethambutol hcl TABS
			ethosuximide CAPS
			ethosuximide SOLN
			ethynodiol diacet & eth estrad
			etodolac CAPS
			etodolac TABS
			etonogestrel-ethinyl estradiol
			ETOPOPHOS
			etoposide CAPS

etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	28	FASENRA PEN SOAJ	9	FIRMAGON	25
etravirine 100 MG	30	FASENRA SOSY 30 MG/ML	9	flavoxate hcl	65
etravirine 200 MG	30	FC2 FEMALE CONDOM	51	flecainide acetate	9
EUCRISA	42	febuxostat	48	floxuridine	24
EVAMIST SOLN	46	felbamate SUSP	13	FLUAD 2024-2025	65
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	55	felbamate TABS 400 MG	13	FLUAD QUADRIVALENT 2022-2023	65
everolimus (immunosuppressant) 1 MG	55	felbamate TABS 600 MG	13	FLUAD QUADRIVALENT 2023-2024	65
everolimus TABS	26	felodipine	33	FLUARIX 2024-2025 SUSY	66
EVOTAZ	30	FEMCAP DEVI	51	FLUARIX QUADRIVALENT 2022- 2023 SUSY	66
exemestane	25	FEMRING	68	FLUARIX QUADRIVALENT 2023- 2024 SUSY	66
ezetimibe	19	fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ...	19	FLUARIX QUADRIVALENT 2023- 2024 SUSY	66
ezetimibe-simvastatin	19	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	19	FLUBLOK 2024-2025 SOSY	66
famciclovir 125 MG, 250 MG	32	fenoprofen calcium TABS	4	FLUBLOK QUADRIVALENT 2022- 2023	66
famciclovir 500 MG	32	FENSOLVI SC	45	FLUBLOK QUADRIVALENT 2023- 2024	66
famotidine in nacl SOLN	64	fentanyl citrate LPOP	5	FLUCELVAX 2024-2025 SUSP ...	66
famotidine SOLN 20 MG/2ML	64	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5	FLUCELVAX 2024-2025 SUSY ...	66
famotidine SOLN 40 MG/4ML, 200 MG/20ML	64	ferrous fumarate-folic acid	49	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	66
famotidine SUSR	64	ferrous sulfate SOLN 15 MG/ML ..	49	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	66
famotidine TABS 20 MG, 40 MG ..	64	ferrous sulfate TABS 65 MG, 325 MG	49	FLUCELVAX QUADRIVALENT 2023-2024 SUSP	66
FANAPT	29	ferrous sulfate TBEC 325 MG	49	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	66
FANAPT TITRATION PACK	29	fesoterodine fumarate	64	fluconazole SUSR	18
FANTASY LUBRICATED MISC ...	51	FETZIMA CP24	14	fluconazole TABS	18
FANTASY LUBRICATED/SPERMICIDE MISC 51		FETZIMA TITRATION PACK C4PK 14		flucytosine	18
FARXIGA (dapagliflozin propanediol)	17	finasteride	47	fludarabine phosphate SOLN	24
FARXIGA	17	fingolimod hcl	61		
		FIRDAPSE	23		

fludarabine phosphate SOLR	24	fluoxetine hcl CPDR	14	fluvoxamine maleate TABS 100 MG .	14
fludrocortisone acetate TABS	36	fluoxetine hcl SOLN	14	fluvoxamine maleate TABS 25 MG,	50 MG
FLULAVAL 2024-2025 SUSY	66	fluoxetine hcl TABS 10 MG, 60 MG	14	FLUZONE 2024-2025 SUSP	66
FLULAVAL QUADRIVALENT 2022-		fluoxetine hcl TABS 20 MG	14	FLUZONE 2024-2025 SUSY	66
2023 SUSY	66	fluphenazine hcl CONC	30	FLUZONE HIGH-DOSE 2024-2025	SUSY
FLULAVAL QUADRIVALENT 2023-		fluphenazine hcl ELIX	30	FLUZONE HIGH-DOSE PF 2022-	2023
2024 SUSY	66	fluphenazine hcl SOLN	30	FLUZONE HIGH-DOSE PF 2023-	2024
FLUMIST NASAL VACCINE 2024-		fluphenazine hcl TABS	30	FLUZONE QUADRIVALENT 2022-	2023 SUSP
2025	66	flurandrenolide CREA	41	FLUZONE QUADRIVALENT 2022-	2023 SUSY
FLUMIST QUADRIVALENT	66	flurandrenolide LOTN	41	FLUZONE QUADRIVALENT 2023-	2024 SUSP
flunisolide (nasal) 0.025 %	57	flurazepam hcl	49	FLUZONE QUADRIVALENT 2023-	2024 SUSY
fluocinolone acetonide (otic)	60	flurbiprofen sodium	59	FML FORTE SUSP	59
fluocinolone acetonide CREA 0.01 %	41	flurbiprofen TABS	4	FML OINT	59
41		flutamide	25	folic acid TABS	48
fluocinolone acetonide CREA 0.025	41	fluticasone furoate-vilanterol	10	fondaparinux sodium 10 MG/0.8ML	11
%	41	fluticasone propionate (inhalation)	9	fondaparinux sodium 2.5 MG/0.5ML,	5 MG/0.4ML, 7.5 MG/0.6ML
fluocinolone acetonide OIL	41	AEPB	9	FORA GTEL BLOOD KETONE TEST	STRIPS
fluocinolone acetonide OINT	41	fluticasone propionate (nasal) SUSP .	57	FORA TEST N' GO	ADVANCE/VOICE/6 CONNECT ..
fluocinolone acetonide SOLN	41	fluticasone propionate CREA 0.05 %	41	formoterol fumarate NEBU	10
fluocinonide CREA 0.05 %	41	41		FOSAMAX PLUS D	44
fluocinonide CREA 0.1 %	41	fluticasone propionate hfa	9	fosamprenavir calcium TABS	30
fluocinonide emulsified base	41	fluticasone propionate LOTN	41		
fluocinonide GEL	41	fluticasone propionate OINT	41		
fluocinonide OINT	41	fluticasone-salmeterol AEPB 100	MCG/ACT-50 MCG/ACT, 250		
fluocinonide SOLN	41	MCG/ACT-50 MCG/ACT, 500	MCG/ACT-50 MCG/ACT		
fluorometholone (ophth) SUSP	59	10			
fluorouracil (topical) CREA 5 % ...	39	fluticasone-salmeterol AERO	10		
fluorouracil (topical) SOLN	39	fluvastatin sodium CAPS 20 MG ...	19		
fluorouracil 500 MG/10ML	24	fluvastatin sodium CAPS 40 MG ...	19		
fluoxetine hcl CAPS 10 MG	14				
fluoxetine hcl CAPS 20 MG	14				
fluoxetine hcl CAPS 40 MG	14				

fosfomycin tromethamine	22	FYCOMPA TABS 2 MG	11	GENOTROPIN MINIQUICK PRSY	44
fosinopril sodium & hydrochlorothiazide	21	FYCOMPA TABS 4 MG	11	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
fosinopril sodium	20	FYCOMPA TABS 6 MG	11	gentamicin sulfate (ophth) OINT ...	58
fosphenytoin sodium	13	FYCOMPA TABS 8 MG, 10 MG, 12 MG	11	gentamicin sulfate (ophth) SOLN ..	58
FRAGMIN SOSY	11	gabapentin CAPS	12	gentamicin sulfate (topical) CREA ..	38
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	52	gabapentin SOLN	12	gentamicin sulfate (topical) OINT ..	38
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	52	gabapentin TABS 600 MG, 800 MG 12	12	gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML	2
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide CP24 ..	61	GENVOYA	31
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide SOLN ..	61	GILOTRIF	25
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide TABS ..	61	glatiramer acetate SOSY 20 MG/ML .	61
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60	glatiramer acetate SOSY 40 MG/ML .	61
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD LIQUID 30 GM/300ML	60	GLEOSTINE 10 MG	24
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	60	GLEOSTINE 40 MG, 100 MG	24
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	52	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60	glimepiride 1 MG, 2 MG	17
frovatriptan succinate	53	GAMUNEX-C	60	glimepiride 4 MG	17
fulvestrant SOSY	25	ganciclovir sodium SOLR	31	glipizide TABS 5 MG, 10 MG	17
furosemide SOLN OR 10 MG/ML, 40 MG/5ML	44	ganirelix acetate	44	glipizide TB24	17
furosemide TABS	44	GARDASIL 9 SUSP	67	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	15
FUZEON SOLR	31	GARDASIL 9 SUSY	67	glipizide-metformin hcl 500 MG-5 MG	15
		gatifloxacin (ophth)	58	GLUCAGEN DIAGNOSTIC	42
		gefitinib	25	glucagon (rdna)	16
		gemcitabine hcl SOLR 2 GM, 200 MG	24	glyburide micronized 1.5 MG, 3 MG, 6 MG	17
		gemfibrozil TABS	19	glyburide TABS	17
		GENOTROPIN CART SC	44	glyburide-metformin 250 MG-1.25 MG	15

glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	15	HAVRIX	67	44
glycine (gu irrigant) SOLN 1.5 % ..	47	HEMANGEOL SOLN OR	32	hydrochlorothiazide TABS 25 MG, 50 MG
glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML	64	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	11	44
glycopyrrolate TABS 1 MG	64	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11		hydrocodone bitartrate CP12
glycopyrrolate TABS 2 MG	64	HEPLISAV-B SOSY	67	5
GLYXAMBI	15	HIBERIX SOLR IJ	65	hydrocodone bitartrate T24A
GNP PRENATAL TABS	56	HUMATROPE CART IJ	44	5
GOHIBIC	48	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT ..	3	hydrocodone bitartrate-homatropine methylbromide TABS
GOJJI BLOOD KETONE TEST STRIPS	43	HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML	3	37
granisetron hcl SOLN IV 1 MG/ML	17	HUMIRA PEN AJKT SC 80 MG/0.8ML	3	hydrocodone polistirex- chlorpheniramine polistirex SUER
granisetron hcl TABS	17	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML	3	.37
GRASTEK SUBL	2	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	3	hydrocodone-acetaminophen SOLN . 6
griseofulvin microsize SUSP	18	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML	3	6
griseofulvin microsize TABS	18	HUMULIN R U-500 (CONCENTRATED) SOLN SC	16	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG
griseofulvin ultramicrosize	18	HUMULIN R U-500 KWIKPEN SOPN SC	16	6
guanfacine hcl (adhd)	1	HYCAMTIN CAPS	28	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG
guanfacine hcl	20	hydralazine hcl SOLN	21	6
GYNAZOLE-1	68	hydralazine hcl TABS	21	6
HAEGARDA SOLR SC	48	hydrochlorothiazide CAPS	44	hydrocodone-acetaminophen SOLN . 6
HALAVEN (eribulin mesylate)	28	hydrochlorothiazide TABS 12.5 MG		6
halcinonide CREA	41			hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG
halobetasol propionate CREA	41			6
halobetasol propionate OINT	41			hydrocodone-ibuprofen 7.5 MG-200 MG
HALOG OINT	41			6
haloperidol decanoate	29			hydrocortisone (intrarectal)
haloperidol lactate CONC	29			7
haloperidol lactate SOLN	29			hydrocortisone (rectal) EX
haloperidol TABS	29			7
				hydrocortisone (topical) CREA 1 %, 2.5 %
				41
				hydrocortisone (topical) LOTN 2.5 % . 41
				41
				hydrocortisone (topical) OINT 1 %, 2.5 %
				41
				hydrocortisone acetate (rectal)
				7
				hydrocortisone butyrate CREA
				41

hydrocortisone butyrate OINT 41	IBRANCE CAPS 26	indomethacin CPCR 4
hydrocortisone butyrate SOLN 41	IBRANCE TABS 26	INFANRIX 63
hydrocortisone sod succinate 100 MG 36	ibuprofen SUSP 100 MG/5ML 4	INFLECTRA SOLR 46
hydrocortisone TABS 36	ibuprofen TABS 400 MG, 600 MG .. 4	INGREZZA CAPS 61
hydrocortisone vaginal 68	ibuprofen TABS 800 MG 4	INGREZZA CPPK 61
hydrocortisone valerate CREA 41	icatibant acetate SOLN 48	INGREZZA CPSP 61
hydrocortisone valerate OINT 41	icatibant acetate SOSY 48	INLYTA 24
hydrocortisone w/acetic acid 60	ICLUSIG 26	INREBIC 26
hydromorphone hcl LIQD 5	icosapent ethyl 1 GM 19	INSULIN ASPART FLEXPEN SOPN . 16
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 5	idarubicin hcl 20 MG/20ML 26	INSULIN ASPART PENFILL SOCT 16
hydromorphone hcl TABS 5	idarubicin hcl 5 MG/5ML, 10 MG/10ML 26	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN 16
hydromorphone hcl TB24 32 MG ... 5	IDELVION 48	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP 16
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG 5	ifosfamide SOLN 1 GM/20ML 24	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP 16
hydroxychloroquine sulfate 100 MG 23	ifosfamide SOLR 24	INSULIN ASPART SOLN IJ 16
hydroxychloroquine sulfate 200 MG 23	imatinib mesylate 26	INSULIN DEGLUDEC FLEXTOUCH SOPN 16
hydroxychloroquine sulfate 400 MG 23	IMBRUVICA CAPS 140 MG 26	INSULIN DEGLUDEC SOLN 16
hydroxyurea 28	IMBRUVICA CAPS 70 MG 26	INTELENCE 25 MG 31
hydroxyzine hcl SOLN 50 MG/ML .. 8	IMBRUVICA SUSP 26	IONOSOL-MB/DEXTROSE 5% ... 54
hydroxyzine hcl SYRP 8	IMBRUVICA TABS 26	IOPIDINE 58
hydroxyzine hcl TABS 8	imipenem-cilastatin IV 22	IPOL INACTIVATED IPV 67
hydroxyzine pamoate CAPS 8	imipramine hcl TABS 15	ipratropium bromide (nasal) 0.03 % 57
HYPERSAL NEBU 37	imipramine pamoate 15	ipratropium bromide (nasal) 0.06 % 57
HYQVIA 60	imiquimod 5 % 42	ipratropium bromide SOLN 0.02 % . 9
ibandronate sodium SOLN 44	IMPAVIDO 21	ipratropium-albuterol SOLN 10
ibandronate sodium TABS 44	INCRELEX 45	irbesartan 20
	INCRUSE ELLIPTA 9	
	indapamide TABS 1.25 MG 44	
	indapamide TABS 2.5 MG 44	
	indomethacin CAPS 25 MG, 50 MG 4	

irbesartan-hydrochlorothiazide	21	JANUMET XR TB24 1000 MG-50	15	KIMONO MICRO THIN PLUS	
irinotecan hcl 40 MG/2ML, 100		MG, 500 MG-50 MG	15	SPERMICIDE LUBRICATED MISC	
MG/5ML	28	JANUVIA	16	51	
irrigation solutions, physiological	55	JARDIANCE	17	KIMONO PLUS SPERMICIDE	
ISENTRESS CHEW	31	JEVTANA	28	LUBRICATED MISC	51
ISENTRESS HD TABS	31	JIVI	48	KIMONO PLUS	
ISENTRESS TABS	31	JULUCA	31	SPERMICIDE/LUBRICATED MISC	
ISOLYTE-P/DEXTROSE 5%	54	JYNARQUE TBPB	45	51	
ISOLYTE-S	54	KALYDECO TABS	62	KIMONO PS LUBRICATED MISC	51
isoniazid SOLN	23	KAMELEON LUBRICATED MISC	51	KIMONO PS PLUS	
isoniazid SYRP	23	KANJINTI	24	SPERMICIDE/LUBRICATED MISC	
isoniazid TABS	23	KCL 0.3%/D5W/NACL 0.9%		51	
isosorbide dinitrate TABS 5 MG, 10		(potassium chloride in dextrose &		KIMONO SENSATION	
MG, 20 MG, 30 MG	8	sodium chloride)	54	LUBRICATED MISC	51
isosorbide dinitrate-hydralazine hcl		KEPIVANCE 6.25 MG	28	KIMONO SENSATION PLUS	
33		ketoconazole (topical) CREA	38	SPERMICIDE LUBRICATED MISC	
isosorbide mononitrate TABS	8	ketoconazole (topical) SHAM 2 %	38	51	
isosorbide mononitrate TB24	8	ketoconazole	18	KIMONO SPECIAL DEVI	51
isotretinoin 10 MG, 20 MG, 30 MG,		KETONE STRP	43	KINRIX SUSY	63
40 MG	37	KETONE TEST STRIPS STRP	43	KISQALI	26
isradipine CAPS	33	ketoprofen CAPS 50 MG	4	KISQALI	27
itraconazole CAPS	18	ketorolac tromethamine (ophth)	59	KISQALI FEMARA 200 DOSE	26
itraconazole SOLN	18	ketorolac tromethamine TABS	4	KISQALI FEMARA 400 DOSE	26
ivabradine hcl TABS	34	KETOSTIX STRP	43	KISQALI FEMARA 600 DOSE	26
ivermectin (pediculicide)	42	ketotifen fumarate (ophth) 0.035 %		KLOXXADO LIQD	17
ivermectin	8	59		KOGENATE FS KIT	48
IXEMPRA KIT 15 MG	28	KEVZARA SOAJ	3	KOSELUGO	27
JAKAFI	26	KEVZARA SOSY	3	KOVALTRY	48
JANSSEN COVID-19 VACCINE	67	KIMONO COLORS DEVI	51	KP PRENATAL MULTIVITAMINS	
JANUMET TABS	15	KIMONO LUBRICATED MISC	51	TABS	56
JANUMET XR TB24 1000 MG-100		KIMONO MAXX/LARGE FLARE		KRINTAFEL	23
MG	15	MISC	51	K-Y ME & YOU EXTRA	
				LUBRICATED DEVI	51
				K-Y ME & YOU INTENSE DEVI	51

KYPROLIS	27	LASTACRAFT	59	levetiracetam TB24	12
labetalol hcl SOLN	32	latanoprost SOLN	59	levobunolol hcl 0.5 %	58
labetalol hcl TABS 100 MG, 200 MG . 32		leflunomide	4	levocetirizine dihydrochloride SOLN 19	
labetalol hcl TABS 300 MG	32	LEMTRADA	62	levocetirizine dihydrochloride TABS 19	
lacosamide SOLN IV 200 MG/20ML . 12		lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	55	levofloxacin (ophth) 0.5 %	58
lacosamide TABS	12	lenalidomide 20 MG	55	levofloxacin in d5w 5 %-500 MG/100ML	46
lactated ringer's (irrigation)	55	LENVIMA 10 MG DAILY DOSE ..	24	levofloxacin SOLN OR	46
lactated ringer's	54	LENVIMA 12MG DAILY DOSE ..	24	levofloxacin TABS 250 MG, 750 MG . 46	
lactic acid (ammonium lactate) CREA	42	LENVIMA 14 MG DAILY DOSE ..	24	levofloxacin TABS 500 MG	46
lactic acid (ammonium lactate) LOTN 12 %	42	LENVIMA 18 MG DAILY DOSE ..	24	levonorgestrel & eth estradiol TABS 35	
lactulose (encephalopathy)	47	LENVIMA 20 MG DAILY DOSE ..	24	levonorgestrel (emergency oc) 1.5 MG	35
lactulose SOLN	50	LENVIMA 24 MG DAILY DOSE ..	24	levonorgestrel-eth estradiol (triphasic)	35
lamivudine (hbv) TABS	31	LENVIMA 4 MG DAILY DOSE ..	24	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	35
lamivudine SOLN	31	LENVIMA 8 MG DAILY DOSE ..	24	levonorgestrel-ethinyl estradiol (continuous)	35
lamivudine TABS 150 MG	31	letrozole	25	levonorgestrel-ethinyl estradiol-iron 35	
lamivudine TABS 300 MG	31	leucovorin calcium SOLR	28	levorphanol tartrate TABS 2 MG	5
lamivudine-zidovudine	31	leucovorin calcium TABS	28	levothyroxine sodium TABS	63
lamotrigine CHEW 25 MG	12	LEUKERAN	24	LEXIVA SUSP	31
lamotrigine CHEW 5 MG	12	LEUKINE SOLR IJ	49	lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	50
lamotrigine TABS	12	leuprolide acetate KIT IJ 1 MG/0.2ML	25	lidocaine hcl (mouth-throat) 2 % ...	56
lamotrigine TBDP	12	levabuterol hcl	10	lidocaine hcl (mouth-throat) 4 % ...	56
LANOXIN SOLN IJ (digoxin)	33	levabuterol hcl 1.25 MG/0.5ML ...	10	lidocaine hcl GEL 2 %	42
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	33	levabuterol tartrate	10	lidocaine hcl PRSY	42
lansoprazole CPDR 15 MG	64	levetiracetam SOLN IV 500 MG/5ML 12			
lansoprazole CPDR 30 MG	64	levetiracetam TABS 1000 MG	12		
lanthanum carbonate CHEW	47	levetiracetam TABS 250 MG, 750 MG	12		
lapatinib ditosylate	27	levetiracetam TABS 500 MG	12		

lidocaine hcl SOLN	42	lorazepam TABS 0.5 MG, 2 MG	8	MG, 120 MG	29
lidocaine PTCH 5 %	42	lorazepam TABS 1 MG	8	lurasidone hcl 80 MG	29
lidocaine-prilocaine CREA	42	LORBRENA	27	LYNPARZA TABS	27
lincomycin hcl	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	21	LYSODREN	25
linezolid SUSR	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG	21	mafenide acetate PACK	40
linezolid TABS	22	losartan potassium	20	magnesium sulfate IJ 50 %	54
LINZESS	47	LOTEMAX OINT	59	malathion	42
liothyronine sodium SOLN	63	loteprednol etabonate GEL	59	maraviroc TABS 150 MG	31
liothyronine sodium TABS	63	loteprednol etabonate SUSP	59	maraviroc TABS 300 MG	31
lisdexamfetamine dimesylate CAPS 1		lovastatin TABS 10 MG, 20 MG	19	MARPLAN	13
lisdexamfetamine dimesylate CHEW 1		lovastatin TABS 40 MG	19	MASONATAL TABS	56
lisinopril & hydrochlorothiazide	21	loxapine succinate	29	MATULANE	28
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	20	lubiprostone	46	MAXIDEX SUSP OP	59
lithium	29	LUCEMYRA (lofexidine hcl)	61	MAXX LUBRICATED MISC	51
lithium carbonate CAPS	29	luliconazole	38	MAXX PLUS SPERMICIDE LUBRICATED MISC	51
lithium carbonate TABS	29	LUMIZYME	45	meclizine hcl TABS 12.5 MG	18
lithium carbonate TBCR	29	LUPRON DEPOT (1-MONTH) KIT IM	25	meclizine hcl TABS 25 MG	18
LO LOESTRIN FE TABS	35	LUPRON DEPOT (3-MONTH) KIT IM	25	meclofenamate sodium CAPS	4
lofexidine hcl	61	LUPRON DEPOT (4-MONTH) IM	25	MEDROL TABS	36
LOKELMA	55	LUPRON DEPOT (6-MONTH) IM	25	medroxyprogesterone acetate (contraceptive) SUSP IM	36
loperamide hcl CAPS	17	LUPRON DEPOT-PED (1-MONTH)	45	medroxyprogesterone acetate (contraceptive) SUSY IM	36
lopinavir-ritonavir SOLN	31	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	45	medroxyprogesterone acetate 10 MG	60
lopinavir-ritonavir TABS	31	LUPRON DEPOT-PED (3-MONTH) 30 MG	45	medroxyprogesterone acetate 2.5 MG, 5 MG	60
loratadine CAPS	19	lurasidone hcl 20 MG, 40 MG, 60		mefenamic acid CAPS	4
loratadine CHEW	19			mefloquine hcl	23
loratadine SOLN	19			megestrol acetate (appetite)	60
loratadine TABS	19			megestrol acetate SUSP	25
loratadine TBDP	19				
lorazepam CONC	8				

megestrol acetate TABS	25	metformin hcl TB24 500 MG	16	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG	2
MEKINIST TABS 0.5 MG	27	metformin hcl TB24 750 MG	16	methylphenidate hcl CP24 30 MG ..	2
MEKINIST TABS 2 MG	27	methadone hcl CONC	5	methylphenidate hcl CP24	2
MEKTOVI	27	methadone hcl SOLN IJ 10 MG/ML	.5	methylphenidate hcl CPRC	2
meloxicam TABS	4	METHADONE HCL SOLN IJ	5	methylphenidate hcl SOLN	2
melphalan	24	methadone hcl SOLN OR 10 MG/5ML	5	methylphenidate hcl TABS 10 MG, 20 MG	2
melphalan hcl IV	24	methadone hcl SOLN OR 5 MG/5ML 5		methylphenidate hcl TABS 5 MG ...	2
memantine hcl TABS	61	methadone hcl TABS 10 MG	5	methylphenidate hcl TB24 18 MG, 27 MG	2
MENACTRA	65	methadone hcl TABS 5 MG	5	methylphenidate hcl TB24 36 MG, 54 MG	2
MENEST	46	methadone hcl TBSO	5	methylphenidate hcl TBCR 10 MG, 20 MG	2
MENOSTAR PTWK	46	methamphetamine hcl	1	methylphenidate hcl TBCR 18 MG, 27 MG	2
MENQUADFI	65	methazolamide TABS	43	methylphenidate hcl TBCR 36 MG, 54 MG	2
MENVEO SOLR	65	methenamine hippurate	22	methylphenidate PTCH	2
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5	methimazole TABS	63	methylprednisolone acetate SUSP 36	
meperidine hcl SOLN OR 50 MG/5ML	5	METHITEST TABS	7	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	36
meperidine hcl TABS 50 MG	5	methocarbamol TABS 500 MG, 750 MG	57	methylprednisolone TABS	36
meprobamate	8	METHOTREXATE	3	methylprednisolone TBPK	36
mercaptapurine TABS	24	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	24	metoclopramide hcl SOLN IJ 5 MG/ML	46
meropenem	22	methotrexate sodium SOLR	24	metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	46
mesalamine CP24	46	methotrexate sodium TABS 2.5 MG 24		metoclopramide hcl TABS	46
mesalamine CPDR	46	methoxsalen rapid	39	metolazone	44
mesalamine ENEM	46	methscopolamine bromide	64	metoprolol & hydrochlorothiazide TABs 25 MG-100 MG, 50 MG-100 MG	21
mesalamine SUPP	46	methsuximide	13		
mesalamine TBEC 1.2 GM	47	methyldopa TABS	20		
mesalamine TBEC 800 MG	46	methylphenidate hcl CHEW 10 MG	.2		
metaxalone 800 MG	57	methylphenidate hcl CHEW 2.5 MG	2		
metformin hcl TABS 1000 MG	16	methylphenidate hcl CHEW 5 MG ..	2		
metformin hcl TABS 500 MG	16				
metformin hcl TABS 850 MG	16				

nalbuphine hcl	7	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	56	NICOTINE TRANSDERMAL SYSTEM KIT	62
naloxone hcl LIQD	17	NEONATAL PLUS TABS	56	NICOTROL INHALER INHA	62
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	17	NEONATAL PRENATAL VITAMIN TABS	56	NICOTROL NS SOLN	62
naltrexone hcl	17	NEONATAL VITAMIN TABS	56	nifedipine CAPS 10 MG	33
naproxen sodium TABS 550 MG ...	4	neostigmine methylsulfate SOSY ..	23	nifedipine CAPS 20 MG	33
naproxen SUSP	4	NEO-SYNALAR	38	nifedipine TB24 60 MG	33
naproxen TABS	4	NEUPRO	29	nifedipine TB24 90 MG	33
naproxen TBEC 500 MG	4	NEVANAC	59	nifedipine TB24	33
naratriptan hcl	53	nevirapine SUSP	31	nilutamide	25
NATACYN	58	nevirapine TABS	31	nimodipine CAPS	33
NATAZIA	35	nevirapine TB24 100 MG	31	NINLARO	27
nateglinide	16	nevirapine TB24 400 MG	31	NIPENT	28
NAYZILAM	11	NEXIUM 24HR TBEC (esomeprazole magnesium)	64	nisoldipine	33
nebivolol hcl 2.5 MG, 5 MG, 10 MG 32		NEXTSTELLIS	35	nitazoxanide TABS	22
nebivolol hcl 20 MG	32	niacin (antihyperlipidemic) TBCR ..	20	nitisinone CAPS	45
NEBUSAL NEBU	37	niacin CPCR 250 MG, 500 MG ...	69	NITRO-BID OINT	8
nefazodone hcl	14	niacin TABS	69	nitrofurantoin	22
nelarabine	24	niacin TBCR	69	nitrofurantoin macrocrystal 50 MG, 100 MG	22
neomycin sulfate TABS	2	NIACIN TR TBCR	69	nitrofurantoin monohyd macro	22
neomycin-bacitracin zn-polymyxin	58	niacinamide TABS 100 MG	69	nitroglycerin (intra-anal)	7
neomycin-polymy-dexameth OINT	59	niacinamide TABS 500 MG	69	nitroglycerin CPCR	8
neomycin-polymy-dexameth SUSP	59	nicardipine hcl CAPS	33	nitroglycerin PT24	8
neomycin-polymyxin-hc (ophth) ...	59	nicardipine hcl SOLN	33	NITROGLYCERIN SOLN IV	8
neomycin-polymyxin-hc (otic) SOLN .	59	nicotine MISC XX	62	nitroglycerin SUBL	8
neomycin-polymyxin-hc (otic) SUSP .	59	nicotine polacrilex GUM	62	NIVA-PLUS TABS	56
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10		nicotine polacrilex LOZG	62	nizatidine CAPS	64
		nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	62	NORDITROPIN FLEXPPO SOPN 30 MG/3ML	45
				NORDITROPIN FLEXPPO SOPN 5	

MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	45	NOVA MAX PLUS KETONE TESTSTRIPS	43	nystatin TABS	18
norelgestromin-ethinyl estradiol ...	35	NOVAVAX COVID-19 VACCINE SUSP	67	nystatin-triamcinolone CREA	38
norethin acet & estrad-fe CAPS ...	35	NOVAVAX COVID-19 VACCINE/2023-24 SUSP	67	nystatin-triamcinolone OINT	38
norethin acet & estrad-fe CHEW ...	35	NOVAVAX COVID-19 VACCINE/2024-25 SUSY	67	NYVEPRIA	49
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	35	NOVOEIGHT	48	octreotide acetate SOLN	45
norethindrone & eth estradiol	35	NOVOLIN 70/30 FLEXPEN SUPN	16	ODEFSEY	31
norethindrone & ethinyl estradiol-fe 35		NOVOLIN 70/30 SUSP	16	ODOMZO	25
norethindrone (contraceptive)	36	NOVOLIN N FLEXPEN SUPN	16	OFEV	62
norethindrone acet & eth estra TABS 35		NOVOLIN N SUSP	16	ofloxacin (ophth)	58
norethindrone acetate TABS	61	NOVOLIN R FLEXPEN SOPN IJ ...	16	ofloxacin (otic)	59
norethindrone acetate-ethinyl estradiol	46	NOVOLIN R SOLN IJ	16	ofloxacin 300 MG, 400 MG	46
norethindrone acetate-ethinyl estradiol-fe	35	NP THYROID 120 TABS	63	OGIVRI	24
norethindrone-eth estradiol (triphasic)	35	NP THYROID 15 TABS	63	olanzapine SOLR	29
norgestimate-ethinyl estradiol (triphasic)	35	NP THYROID 30 TABS	63	olanzapine TABS 2.5 MG, 5 MG ..	29
norgestimate-ethinyl estradiol	35	NP THYROID 60 TABS	63	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	29
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	35	NP THYROID 90 TABS	63	olanzapine TBDP 20 MG	30
NORMOSOL-M/D5W	54	NUBEQA	25	olanzapine TBDP 5 MG, 10 MG, 15 MG	30
NORMOSOL-R	54	NUCALA SOAJ	9	olmesartan medoxomil	20
nortriptyline hcl CAPS	15	NUCALA SOLR	9	olmesartan medoxomil-amlodipine- hydrochlorothiazide	21
nortriptyline hcl SOLN	15	NUCALA SOSY 100 MG/ML	9	olmesartan medoxomil- hydrochlorothiazide	21
NORVIR CAPS	31	NUCALA SOSY 40 MG/0.4ML	9	olopatadine hcl (nasal)	57
NORVIR PACK	31	NUEDEXTA	62	olopatadine hcl 0.1 %	59
NORVIR SOLN	31	NULOJIX	55	olopatadine hcl 0.2 %	59
		nystatin (mouth-throat)	56	omega-3-acid ethyl esters	19
		nystatin (topical) CREA	38	omeprazole CPDR	64
		nystatin (topical) OINT	38	omeprazole magnesium CPDR	64
		nystatin (topical) POWD EX	38	omeprazole TBEC	64

omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	64	oseltamivir phosphate CAPS	32	MG, 10 MG, 15 MG, 20 MG, 30 MG	6
OMNIFLEX DIAPHRAGM	51	oseltamivir phosphate SUSR	32	OZEMPIC SOPN 2 MG/1.5ML	16
ONCASPAR	27	OSMOPREP	50	OZEMPIC SOPN	16
ondansetron hcl SOLN IJ 4 MG/2ML . 17		OSPHENA	45	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML	28
ondansetron hcl SOLN OR 4 MG/5ML	17	OTEZLA TABS	4	paclitaxel protein-bound particles .	28
ondansetron hcl SOSY	17	OTEZLA TBPK	4	paliperidone 1.5 MG, 3 MG, 9 MG .	29
ondansetron hcl TABS 24 MG	17	oxacillin sodium IV 10 GM	60	paliperidone 6 MG	29
ondansetron hcl TABS 4 MG	17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	24	palonosetron hcl SOLN	17
ondansetron hcl TABS 8 MG	17	oxandrolone	7	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	44
ondansetron TBDP 4 MG	17	oxaprozin TABS	4	PAMIDRONATE DISODIUM SOLN 44	
ondansetron TBDP 8 MG	17	oxazepam CAPS	8	PANRETIN	39
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS .	56	oxcarbazepine SUSP	12	pantoprazole sodium TBEC 20 MG 64	
ONE VITE WOMENS PRENATALVITAMIN TABS	56	oxcarbazepine TABS 150 MG, 300 MG	12	pantoprazole sodium TBEC 40 MG 64	
ONETOUCH DELICA SAFETY LANCING DEVICE	52	oxcarbazepine TABS 600 MG	12	paricalcitol CAPS	45
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	52	oxiconazole nitrate CREA	39	paricalcitol SOLN	45
OPILL	36	OXISTAT LOTN	39	paroxetine hcl SUSP	14
OPSUMIT	34	oxybutynin chloride SOLN	64	paroxetine hcl TABS 10 MG	14
OPVEE NA	17	oxybutynin chloride TABS 5 MG ..	64	paroxetine hcl TABS 20 MG	14
ORENITRAM TBCR	33	oxybutynin chloride TB24	64	paroxetine hcl TABS 30 MG	14
ORLISSA	44	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6	paroxetine hcl TABS 40 MG	14
ORKAMBI PACK	62	oxycodone hcl TABS	6	paroxetine hcl TB24 12.5 MG	14
ORKAMBI TABS	62	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6	paroxetine hcl TB24 25 MG, 37.5 MG	14
ORLADEYO	48	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	6	PASER PACK	23
orphenadrine citrate TB12	57	oxymorphone hcl TABS	6	pazopanib hcl	27
orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG	57	oxymorphone hcl TB12 40 MG	6	PEDIARIX SUSY	63
		oxymorphone hcl TB12 5 MG, 7.5		pediatric multivitamins w/fl CHEW .	56

PEDVAX HIB SUSP	65	permethrin LIQD EX	42	phenobarbital ELIX	49
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	50	perphenazine TABS	30	phenobarbital TABS	49
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM	50	perphenazine-amitriptyline	61	phenoxybenzamine hcl	20
peg 3350-potassium chloride-sod bicarbonate-sod chloride	50	PERSERIS PRSY	29	phentermine hcl CAPS	1
PEGASYS SOLN	31	PFIZER-BIONTECH COVID- 19VACCINE SUSP	68	phenytoin CHEW	13
PEGASYS SOSY	31	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y SUSP	67	phenytoin sodium extended 100 MG, 200 MG, 300 MG	13
PEMAZYRE	27	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2023-24 SUSP 67	67	phenytoin sodium SOLN	13
pemetrexed disodium SOLR 500 MG 24		PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2024-25 SUSP 67	67	phenytoin SUSP	13
peniclovir	40	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y SUSP	67	PHEXXI	68
penicillamine CAPS	55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP	67	PHOTOFRIN	28
penicillamine TABS	55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP 67	67	PIFELTRO	31
penicillin g potassium 5000000 UNIT 60		PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP	67	pilocarpine hcl (oral)	56
PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	60	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP	67	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 58	
PENICILLIN G PROCAINE	60	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..	67	pimecrolimus	42
penicillin g sodium	60	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..	67	pimozide	62
penicillin v potassium SOLR	60	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP	67	pindolol TABS	32
penicillin v potassium TABS	60	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP	67	pioglitazone hcl	16
PENTACEL	63	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP	67	pioglitazone hcl-glimepiride	15
pentazocine w/ naloxone hcl	7	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..	67	pioglitazone hcl-metformin hcl TABS . 15	
pentoxifylline	48	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/5-11Y ...	67	piperacillin sodium-tazobactam sodium	60
perindopril erbumine 2 MG, 8 MG .	20	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/5-11Y ...	67	PIQRAY 200MG DAILY DOSE ...	27
perindopril erbumine 4 MG	20	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/6M-4Y ..	67	PIQRAY 250MG DAILY DOSE ...	27
PERJETA	24	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/6M-4Y ..	67	PIQRAY 300MG DAILY DOSE ...	27
permethrin CREA	42	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/BA.4/BA.5 68	68	pirfenidone CAPS	62
		PHEBURANE PLLT	45	pirfenidone TABS 534 MG	62
		phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	47	piroxicam CAPS	4
		phendimetrazine tartrate TABS	1	PLASMA-LYTE A (electrolyte-a) ..	54
		phenelzine sulfate	13		

PRENATAL ONE DAILY TABS	56	prochlorperazine maleate TABS ...	30	pyrazinamide	23
PRENATAL PLUS TABS	56	PROCRIT 2000 UNIT/ML, 3000		pyridostigmine bromide SOLN OR	23
PRENATAL PLUS VITAMIN		UNIT/ML, 4000 UNIT/ML, 10000		pyridostigmine bromide TABS 60 MG	
ANDMINERAL TABS	56	UNIT/ML, 20000 UNIT/ML	49	.....	23
PRENATAL TABS	57	PROCRIT 40000 UNIT/ML	49	pyridostigmine bromide TBCR	23
PRENATAL VITAMIN & MINERAL		progesterone CAPS	61	pyrimethamine	23
TABS	56	PROGRAF PACK	55	QC PRENATAL TABS	57
PRENATAL VITAMIN TABS	57	PROGRAF SOLN	55	QINLOCK	27
PRENATAL VITAMIN/IRON TABS	56	PROLASTIN-C SOLN	62	QUADRACEL SUSP	63
PRENATAL VITAMINS PLUS LOW		PROLEUKIN	28	QUADRACEL SUSY	63
IRON TABS	56	PROLIA SOSY	44	quetiapine fumarate TABS 25 MG, 50	
PRENATAL VITAMINS TABS 100		PROMACTA PACK	49	MG, 100 MG, 200 MG	30
MG-800 MCG-1.84 MG-18 MG-2.6		PROMACTA TABS	49	quetiapine fumarate TABS 300 MG,	
MG-1.7 MG-27 MG-10 MCG-4.95		promethazine hcl SOLN OR 6.25		400 MG	30
MG-25 MG-200 MG-160 MG-1200		MG/5ML	19	quetiapine fumarate TB24 300 MG,	
MCG-4 MCG, 120 MG-2.6 MG-800		promethazine hcl SUPP 12.5 MG, 25		400 MG	30
MCG-400 UNIT-8 MCG-1.7 MG-20		MG	19	quetiapine fumarate TB24 50 MG,	
MG-28 MG-200 MG-1.8 MG-25 MG-		promethazine hcl SUPP 50 MG ...	19	150 MG, 200 MG	30
4000 UNIT-30 UNIT	57	promethazine hcl TABS	19	quinapril hcl 20 MG, 40 MG	20
PRENATRIX TABS	57	propafenone hcl CP12	9	quinapril hcl 5 MG, 10 MG	20
PRENATRYL TABS	57	propafenone hcl TABS	9	quinapril-hydrochlorothiazide 12.5	
PREVNAR 13	65	proparacaine hcl	58	MG-10 MG	21
PREVNAR 20	65	propranolol hcl	32	quinapril-hydrochlorothiazide 12.5	
PREZCOBIX	31	propranolol hcl CP24	32	MG-20 MG	21
PREZISTA SUSP	31	propranolol hcl SOLN OR 20		quinapril-hydrochlorothiazide 25 MG-	
PREZISTA TABS 75 MG, 150 MG	31	MG/5ML, 40 MG/5ML	32	20 MG	21
PRIFTIN	23	propranolol hcl TABS	32	quinidine sulfate TABS	8
primaquine phosphate TABS	23	propylthiouracil	63	quinine sulfate CAPS 324 MG	23
primidone 50 MG, 250 MG	12	protriptyline hcl	15	QVAR REDHALER	10
PRIORIX SUSR	68	PULMICORT FLEXHALER AEPB ..	9	RA PRENATAL	
probenecid	48	PULMOZYME	62	FORMULA/FOLICACID TABS	57
procainamide hcl SOLN 500 MG/ML .		PX PRENATAL MULTIVITAMINS		RA PRENATAL TABS	57
8		TABS	57	rabeprazole sodium TBEC	64
prochlorperazine	30				

raloxifene hcl	45	RENFLEXIS	47	risperidone TABS	29
ramelteon	50	repaglinide 0.5 MG, 1 MG	17	risperidone TBDP	29
ramipril CAPS	20	repaglinide 2 MG	17	ritonavir TABS	31
ranitidine hcl TABS 150 MG	64	REPATHA PUSHTRONEX SYSTEM SOCT	20	rivastigmine tartrate CAPS	61
ranolazine TB12 1000 MG	8	REPATHA SOSY	20	rizatriptan benzoate TABS 10 MG ..	53
ranolazine TB12 500 MG	8	REPATHA SURECLICK SOAJ	20	rizatriptan benzoate TABS 5 MG ..	53
rasagiline mesylate	29	RETACRIT	49	rizatriptan benzoate TBDP 10 MG ..	53
REALITY LATEX CONDOMS/LUBRICATED MISC ..	51	RETEVMO CAPS	27	rizatriptan benzoate TBDP 5 MG ..	53
REALITY LATEX/ULTRA TEXTURED DEVI	51	RETROVIR IV INFUSION SOLN ..	31	roflumilast	9
REALITY LATEX/ULTRA THIN DEVI 51		REXULTI	30	romidepsin SOLR	27
REBIF REBIDOSE SOAJ	62	REZVOGLAR KWIKPEN	16	ropinirole hydrochloride TABS	29
REBIF REBIDOSE TITRATIONPACK SOAJ	62	ribavirin (hepatitis c) CAPS	31	ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	29
REBIF SOSY	62	ribavirin (hepatitis c) TABS 200 MG 31		ropinirole hydrochloride TB24 8 MG, 12 MG	29
REBIF TITRATION PACK SOSY ..	62	RIDAURA	3	rosuvastatin calcium TABS	19
RECOMBIVAX HB SUSP	68	rifabutin	23	ROTARIX SUSP	68
RECOMBIVAX HB SUSY	68	rifampin CAPS	23	ROTARIX SUSR	68
REGRANEX	42	rifampin SOLR	23	ROTATEQ SOLN	68
RELENZA DISKHALER	32	riluzole TABS	58	ROZLYTREK CAPS	27
RELION 2-IN-1 LANCET DEVICES 30G	52	rimantadine hydrochloride TABS ..	32	RUBRACA	27
RELION 2-IN-1 LANCING DEVICE 25G	52	ringer's	54	rufinamide SUSP	12
RELION 2-IN-1 LANCING DEVICE 30G	52	ringer's irrigation	55	rufinamide TABS 200 MG	12
RELION KETONE TEST STRIPS STRP	43	RINVOQ TB24	2	rufinamide TABS 400 MG	12
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	43	risedronate sodium TABS 150 MG	44	RUXIENCE	24
		risedronate sodium TABS 35 MG ..	44	RYBELSUS TABS	16
		risedronate sodium TABS 5 MG, 30 MG	44	salsalate	5
		risedronate sodium TBEC	44	SANTYL OINT	42
		risperidone microspheres	29	sapropterin dihydrochloride PACK ..	45
		risperidone SOLN	29	sapropterin dihydrochloride TABS ..	45
				SAVELLA TABS	61

SAVELLA TITRATION PACK MISC 61	hypertension) SUSR 34	sodium polystyrene sulfonate POWD 55
saxagliptin hcl 16	sildenafil citrate (pulmonary hypertension) TABS 34	sodium polystyrene sulfonate SUSP CO 15 GM/60ML 55
saxagliptin-metformin hcl 1000 MG- 2.5 MG 15	sildenafil citrate 33	sodium sulfate-potassium sulfate- magnesium sulfate 50
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG 15	silodosin 47	SOFOSBUVIR/VELPATASVIR TABS 31
SCSEMBLIX 100 MG 27	silver sulfadiazine 40	solifenacin succinate TABS 64
SCSEMBLIX 20 MG, 40 MG 27	SIMPONI ARIA SOLN 3	SOLQUA 100/33 15
scopolamine 18	SIMULECT 55	SOLOSEC 2
SELECT INSULIN SYRINGES ... 53	simvastatin TABS 19	SOLU-CORTEF 100 MG, 500 MG, 1000 MG 36
SELECT LANCETS 52	sirolimus TABS 55	SOLU-CORTEF 250 MG 36
selegiline hcl CAPS 29	SIRTURO 23	SOLU-MEDROL 2 GM 36
selegiline hcl TABS 29	SIVEXTRO TABS 22	sorafenib tosylate 27
selenium sulfide LOTN 2.5 % 40	SKYRIZI PEN SOAJ 39	SORBITOL 3 % 47
SELZENTRY SOLN 31	SKYRIZI PSKT 39	SORBITOL/MANNITOL IRRIGATION 47
SELZENTRY TABS 25 MG, 75 MG 31	SKYRIZI SOCT 47	sotalol hcl (afib/afI) 32
SEMGLEE SOLN 16	SKYRIZI SOLN 47	sotalol hcl TABS 240 MG 32
SEMGLEE SOPN 16	SKYRIZI SOSY 39	sotalol hcl TABS 80 MG, 120 MG, 160 MG 32
SEREVENT DISKUS 10	SLYND 36	SPIKEVAX COVID-19 VACCINE SUSP 68
sertraline hcl CONC 14	SM PRENATAL VITAMINS TABS 57	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP 68
sertraline hcl TABS 100 MG 14	SODIUM ACETATE SOLN (sodium acetate) 54	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY 68
sertraline hcl TABS 25 MG, 50 MG 14	sodium acetate SOLN 54	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY 68
sevelamer carbonate PACK 47	sodium chloride (gu irrigant) 0.9 % 47	spinosad 42
sevelamer carbonate TABS 47	sodium chloride (inhalant) NEBU 7 % 37	SPIRIVA RESPIMAT AERS 9
SHINGRIX 68	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 % 55	spironolactone & hydrochlorothiazide
SIGNIFOR 45	sodium citrate & citric acid 47	
sildenafil citrate (pulmonary hypertension) SOLN 34	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG 54	
sildenafil citrate (pulmonary	sodium phenylbutyrate POWD 45	
hypertension) SOLN 34	sodium phenylbutyrate TABS 45	

43	sulfacetamide sodium (acne)	37	SUNOSI 150 MG	1
spironolactone TABS	44	sulfacetamide sodium (ophth) SOLN .	SUNOSI 75 MG	1
SPRAVATO 56MG DOSE	13	58	SYNAREL	45
SPRAVATO 84MG DOSE	13	sulfacetamide sodium w/ sulfur	SYNERA PTCH	42
SPRYCEL (dasatinib)	27	CREA 10 %-5 %	37	SYNJARDY TABS
stannous fluoride CONC	56	sulfacetamide sodium w/ sulfur LIQD	15	SYNJARDY XR TB24 1000 MG-10
stavudine CAPS	31	10 %-5 %	38	MG, 1000 MG-12.5 MG, 1000 MG-5
STELARA 130 MG/26ML	47	sulfacetamide sodium w/ sulfur LIQD	15	MG
STELARA SOLN 45 MG/0.5ML	39	9 %-4.5 %	38	SYNJARDY XR TB24 1000 MG-25
STELARA SOSY 45 MG/0.5ML	39	sulfacetamide sodium-sulfur in urea	15	MG
STELARA SOSY 90 MG/ML	39	vehicle EMUL 10 %-10 %-4 %	38	SYNRIBO
STENDRA	33	sulfacetamide sod-prednisolone	28	SYNTHROID TABS (levothyroxine
STIOLTO RESPIMAT	10	SOLN	59	sodium)
STIVARGA	27	sulfadiazine TABS	62	TABLOID
STRENSIQ	45	sulfamethoxazole-trimethoprim SOLN	22	TABRECTA
streptomycin sulfate SOLR	2	. . . . .	22	tacrolimus (topical) OINT
STRIBILD	31	sulfamethoxazole-trimethoprim SUSP	22	tacrolimus CAPS
STRIVERDI RESPIMAT	10	. . . . .	22	55
SUBLOCADE SOSY 100 MG/0.5ML .	7	sulfamethoxazole-trimethoprim TABS	22	tadalafil (pulmonary hypertension)
7		. . . . .	22	TABS
SUBLOCADE SOSY 300 MG/1.5ML .	7	SULFAMYLON CREA	40	tadalafil 5 MG
7		sulfasalazine TABS	47	33
SUBSYS LIQD 100 MCG	6	sulfasalazine TBEC	47	TAFINLAR CAPS
SUBSYS LIQD 200 MCG, 400 MCG,	6	600 MCG	4	tafluprost
600 MCG	6	sumatriptan	53	59
SUBSYS LIQD 800 MCG, 1200	6	sumatriptan succinate SOAJ	53	TAGRISSO 40 MG
MCG, 1600 MCG	6	sumatriptan succinate SOCT	53	25
sucralfate SUSP	64	sumatriptan succinate SOLN 6	53	TAGRISSO 80 MG
sucralfate TABS	64	MG/0.5ML	53	25
sulconazole nitrate CREA	39	sumatriptan succinate TABS	53	TAKHZYRO SOLN
sulconazole nitrate SOLN	39	sumatriptan-naproxen sodium	53	48
		sunitinib malate 12.5 MG, 25 MG, 50	27	TAKHZYRO SOSY
		MG	27	48
		sunitinib malate 37.5 MG	27	TALZENNA
			27	27
			27	tamoxifen citrate TABS
			27	25
			27	tamsulosin hcl
			27	47
			27	TASIGNA 150 MG, 200 MG
			27	27
			27	TASIGNA 50 MG
			27	27
			27	tavorole
			27	39

TAVALISSE	48	testosterone enanthate SOLN IM ...	7	tizanidine hcl CAPS	57
tazarotene CREA 0.1 %	39	TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT SUSP	63	tizanidine hcl TABS	57
TAZVERIK	27	tetrabenazine	61	tobramycin (ophth) SOLN	58
TDVAX SUSP	63	tetracycline hcl CAPS	63	tobramycin NEBU	2
TEFLARO	35	THALOMID	55	tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML ...	2
TEGRETOL SUSP (carbamazepine) . 12		theophylline ELIX	10	tobramycin-dexamethasone SUSP 59	
TEGRETOL TABS (carbamazepine) . 12		theophylline SOLN	10	TODAY SPONGE MISC	68
telmisartan	20	theophylline TB12	10	tolcapone	28
telmisartan-amlodipine	21	theophylline TB24	10	tolmetin sodium CAPS	4
telmisartan-hydrochlorothiazide ..	21	THERANATAL CORE NUTRITION TABS	57	tolmetin sodium TABS 600 MG	4
temazepam 15 MG, 30 MG	49	THIOLA EC TBEC 100 MG (tiopronin)	47	TOLSURA CAPS	18
temazepam 7.5 MG, 22.5 MG	49	THIOLA EC TBEC 300 MG (tiopronin)	47	tolterodine tartrate CP24	64
TEMODAR SOLR	24	thioridazine hcl	30	tolterodine tartrate TABS	64
temozolomide CAPS	24	thiotepa 15 MG	24	tolvaptan TABS	45
temsirolimus	27	thiothixene	30	topiramate CPSP 15 MG	12
TENIVAC INJ	63	THYMOGLOBULIN	55	topiramate CPSP 25 MG	12
tenofovir disoproxil fumarate TABS 31		THYROGEN 0.9 MG	43	topiramate CS24	12
terazosin hcl	20	tiagabine hcl	13	topiramate TABS 200 MG	13
terbinafine hcl TABS	18	TIBSOVO	27	topiramate TABS 25 MG, 100 MG .	13
terbutaline sulfate SOLN	10	tigecycline	63	topiramate TABS 50 MG	12
terbutaline sulfate TABS	10	timolol maleate (ophth) SOLG	58	topotecan hcl SOLR	28
terconazole vaginal CREA	68	timolol maleate (ophth) SOLN	58	toremifene citrate	25
terconazole vaginal SUPP	68	timolol maleate TABS	32	torsemide TABS	44
teriflunomide	62	tiopronin TBEC 100 MG	47	TRACLEER TBSO	34
teriparatide SOPN	44	tiopronin TBEC 300 MG	47	tramadol hcl TABS 50 MG	6
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7	tiotropium bromide monohydrate CAPS	9	tramadol hcl TB24	6
testosterone cypionate SOLN IM ...	7	TIVICAY TABS	31	tramadol-acetaminophen	7
				trandolapril 1 MG, 2 MG	20
				trandolapril 4 MG	20

trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21	triamcinolone acetonide (topical) LOTN 0.025 %	41	TRIZIVIR	31
trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21	triamcinolone acetonide (topical) LOTN 0.1 %	41	TROJAN MAGNUM MISC	51
tranexamic acid SOLN 1000 MG/10ML	49	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	41	TROJAN ULTRA THIN LUBRICATED MISC	51
tranexamic acid TABS	49	triamcinolone acetonide (topical) OINT 0.5 %	41	TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	51
tranylcypromine sulfate	13	triamcinolone acetonide (topical) OINT 0.5 %	41	TROJAN-ENZ LUBRICATED MISC	51
travoprost SOLN	59	triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	36	TROJAN-ENZ W/SPERMICIDAL MISC	51
TRAZIMERA	24	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43	tropicamide SOLN 0.5 %	58
trazodone hcl TABS	14	triamterene & hydrochlorothiazide TABS	43	tropicamide SOLN 1 %	58
TRECTOR	23	triamterene CAPS	44	tropium chloride CP24	64
TRELEGY ELLIPTA	10	triazolam	49	tropium chloride TABS	64
TRELSTAR MIXJECT	25	TRICARE TABS	57	TRUE COVER DEVI	51
TREMFYA SOAJ	40	trientine hcl 250 MG	55	TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ..	43
TREMFYA SOSY 100 MG/ML	40	trifluoperazine hcl TABS	30	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	52
treprostinil SOLN IJ	33	trifluridine	58	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	43
tretinoin (chemotherapy)	28	trihexyphenidyl hcl SOLN	28	TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	16
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	38	trihexyphenidyl hcl TABS	28	TRUMENBA	65
tretinoin GEL 0.01 %, 0.025 %	38	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	15	TRUSTEX COLOR CONDOMS + LUBE MISC	51
tretinoin microsphere 0.1 %	38	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX LUBRICATED EXTRALARGE MISC	51
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	24	TRIKAFTA TBPB	62	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	51
triamcinolone acetonide (mouth) ..	56	trimethobenzamide hcl CAPS	18	TRUSTEX LUBRICATED MISC ...	52
triamcinolone acetonide (nasal) AERO	58	trimethoprim TABS	21	TRUSTEX	
triamcinolone acetonide (topical) CREA 0.025 %	41	trimipramine maleate CAPS	15		
triamcinolone acetonide (topical) CREA 0.1 %	41	TRINTELLIX	14		
triamcinolone acetonide (topical) CREA 0.5 %	41	TRIUMEQ TABS	31		

LUBRICATED/RIBBED/STUDDED MISC .....51	UBRELVY 53	varenicline tartrate TABS 62
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC 52	UDENYCA ONBODY SOSY 49	varenicline tartrate TBPK 62
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC 52	UDENYCA SOAJ 49	VARIVAX SUSR IJ 1350 PFU/0.5ML 68
TRUSTEX LUBRICATED/SPERMICIDE MISC 52	UDENYCA SOSY 49	VARUBI TBPK 18
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC 52	UPTRAVI TABS 200 MCG 34	VAXNEUVANCE 65
TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDDED MISC 52	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG 34	VECAMYL 21
TRUSTEX/RIA LUBRICATED MISC . 52	UPTRAVI TITRATION PACK TBPK 34	VECTIBIX 100 MG/5ML 25
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC 52	ursodiol CAPS 46	venlafaxine hcl CP24 150 MG 14
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC 52	ursodiol TABS 46	venlafaxine hcl CP24 37.5 MG 14
TRUXIMA 24	UVADEX 28	venlafaxine hcl CP24 75 MG 14
TUKYSA 25	valacyclovir hcl 1 GM, 1000 MG ... 32	venlafaxine hcl TABS 14
TURALIO 27	valacyclovir hcl 500 MG 32	venlafaxine hcl TB24 150 MG 14
TUZISTRA XR 37	valganciclovir hcl TABS 31	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG 15
TWINRIX SUSY 68	valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML 13	verapamil hcl CP24 100 MG, 200 MG, 300 MG 33
TWIRLA 35	valproic acid CAPS 13	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG 33
TYBLUME CHEW 35	valrubicin 26	verapamil hcl SOLN 2.5 MG/ML ... 33
TYBOST 31	valsartan TABS 20	verapamil hcl TABS 33
TYMLOS 44	valsartan-hydrochlorothiazide 21	verapamil hcl TBCR 33
TYVASO REFILL KIT SOLN IN ... 33	VALTOCO 10 MG DOSE LIQD ... 11	VEREGEN 38
TYVASO SOLN IN 33	VALTOCO 15 MG DOSE LQPK ... 11	VERZENIO 27
TYVASO STARTER KIT SOLN IN . 33	VALTOCO 20 MG DOSE LQPK ... 11	VICTOZA (liraglutide) 16
	VALTOCO 5 MG DOSE LIQD 12	vigabatrin PACK 13
	vancomycin hcl CAPS 22	vigabatrin TABS 13
	vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG 22	VIIBRYD STARTER PACK KIT 14
	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML . 22	vilazodone hcl TABS 14
	VAQTA 68	vincristine sulfate 28
		vinorelbine tartrate 10 MG/ML 28

VIRACEPT TABS 250 MG	31	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	52	XPOVIO	26
VIRACEPT TABS 625 MG	31	WIDE-SEAL SILICONE DIAPHRAGM KIT 95	52	XPOVIO 60 MG TWICE WEEKLY	26
VIREAD POWD	31	XALKORI CAPS	27	XPOVIO 80 MG TWICE WEEKLY	26
VIREAD TABS 150 MG, 200 MG, 250 MG	31	XARELTO STARTER PACK TBPK 11		XTANDI CAPS	25
VISTOGARD	17	XARELTO SUSR	11	XTANDI TABS 40 MG	25
VITAMIN D2 TABS 400 UNIT	69	XARELTO TABS 10 MG, 20 MG ..	11	XTANDI TABS 80 MG	25
VITATHELY/GINGER TABS	57	XARELTO TABS 2.5 MG, 15 MG ..	11	XULTOPHY 100/3.6	16
VITRAKVI CAPS	27	XELJANZ SOLN	2	XYNTHA	48
VITRAKVI SOLN	27	XELJANZ TABS 10 MG	3	XYNTHA SOLOFUSE	48
VIVITROL	17	XELJANZ TABS 5 MG	3	YERVOY	24
VIZIMPRO	25	XELJANZ XR TB24	2	YONSA	25
VORAXAZE	28	XEOMIN	58	YUFLYMA 1-PEN KIT AJKT	3
voriconazole TABS	18	XGEVA SOLN	44	YUFLYMA 2-PEN KIT AJKT	3
VOSEVI	31	XHANCE EXHU	58	YUFLYMA 2-SYRINGE KIT PSKT ..	3
VYNDAMAX	34	XIFAXAN 200 MG	21	YUFLYMA CD/UC/HS STARTER	
VYNDAQEL	34	XIFAXAN 550 MG	21	AJKT	3
warfarin sodium TABS	11	XIGDUO XR (dapagliflozin		zafirlukast	9
water for irrigation, sterile	55	propanediol-metformin hcl)	15	zaleplon 10 MG	49
WESTAB PLUS TABS	57	XIGDUO XR 1000 MG-10 MG, 500		zaleplon 5 MG	49
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	52	MG-10 MG, 500 MG-5 MG	16	ZALTRAP 100 MG/4ML	24
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	52	XIGDUO XR 1000 MG-2.5 MG, 1000		ZANOSAR	24
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	52	MG-5 MG	15	ZARONTIN CAPS (ethosuximide) .	13
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	52	XOLAIR SOAJ 150 MG/ML, 300		ZARXIO	49
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	52	MG/2ML	9	ZEJULA CAPS	27
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	52	XOLAIR SOAJ 75 MG/0.5ML	9	ZEJULA TABS 100 MG	27
		XOLAIR SOLR	9	ZEJULA TABS 200 MG, 300 MG ..	27
		XOLAIR SOSY 150 MG/ML, 300		ZELBORAF	27
		MG/2ML	9	ZENPEP CPEP 105000 UNIT-79000	
		XOLAIR SOSY 75 MG/0.5ML	9	UNIT-25000 UNIT, 14000 UNIT-	
		XOSPATA	27	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	ZYDELIG	27
ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT		43
zidovudine CAPS		31
zidovudine SYRP		31
zidovudine TABS		31
zileuton TB12		9
ZIMHI SOSY		17
ziprasidone hcl		29
ZIRABEV		24
ZIRGAN GEL		58
ZOLADEX 10.8 MG		25
ZOLADEX 3.6 MG		25
zoledronic acid CONC		44
zoledronic acid SOLN		44
ZOLINZA		27
zolmitriptan SOLN		54
zolmitriptan TABS		54
zolmitriptan TBDP		54
zolpidem tartrate TABS		50
zolpidem tartrate TBCR		50
zonisamide CAPS		13
ZONTIVITY		48
ZORBATIVE SC		45
ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 1.4 MG-5.7 MG, 2.1 MG-8.6 MG, 2.9 MG-11.4 MG ..		7
ZUBSOLV SUBL 0.71 MG-2.9 MG ..		7

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