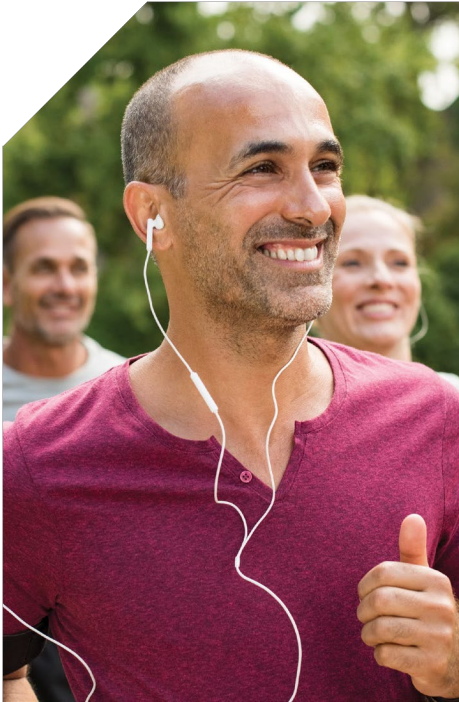




FROM



2025 FORMULARY

EFFECTIVE JANUARY 1, 2025



Ambetter.LouisianaHealthConnect.com

Formulary Introduction

FORMULARY

The Ambetter from Louisiana Healthcare Connections Formulary, 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.

Not all dosage forms or strengths of a drug may be covered.

FORMULARY CHANGES

The Ambetter from Louisiana Healthcare Connection Formulary is reviewed at least quarterly and updated monthly. Positive formulary changes, such as addition of products to the formulary, removal of utilization management restrictions (Prior Authorization, Quantity Limit, etc.) can take place monthly. Negative formulary changes, such as removal of products from the formulary and addition of utilization management techniques will take place only at the beginning of each new benefit year. If you are affected by a negative formulary change, you will be notified in writing at least 60 days in advance of such change.

USING THE FORMULARY

The Ambetter from Louisiana Healthcare Connection Formulary is structured in two parts. The first part of the formulary lists covered medications by conditions that they treat. You can utilize this section to quickly find all medications that we cover for your specific condition. The second part of the formulary lists all products alphabetically. You can use this part of the formulary to look up your specific medication by the name. Products are listed on the formulary on several tiers each corresponding to associated copay or co-insurance you may be responsible for. Drug list key below provides a general overview of tiers.

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 limits apply.

Tier 1_A - Lowest copayment for those drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) 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.

The formulary contains other important information. Utilization management restrictions such as Prior Authorization, Step Therapy, Quantity Limits, Age Limits and other restrictions are described next to each product.

Prior Authorization

Medication listed on the formulary with abbreviation PA are restricted by Prior Authorization requirement. Prior to obtaining this medication, your provider will have to submit a request to Ambetter from Louisiana Healthcare Connections to approve this product for you.

Step Therapy

Medications listed on the formulary with abbreviation ST are restricted by Step Therapy requirement. If you have tried the required product prior to requesting a fill for a medication restricted by ST, your claim will process. If we do not have a record that you tried required product, your prescriber can reach out to Ambetter from Louisiana Healthcare Connections to obtain an authorization

Quantity Limit

A Quantity Limit restricts medications listed on the formulary with abbreviation QL. We list each quantity limit in units that can be obtained per time period (i.e. 2 tablets per day).

Age Limit

Medications listed on the formulary with abbreviation AL are restricted to certain ages. We list each age limit based on FDA approval for medications.

Non-formulary

Medications listed on the formulary with abbreviation NF are non-formulary medications. To obtain access to non-formulary medications your prescriber can reach out to Ambetter from Louisiana Healthcare Connection to obtain an authorization. More information is provided in the section below.

PRIOR AUTHORIZATION FOR NON-FORMULARY DRUGS

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

DISCLOSURE ON EXCESS COST

Any savings or rebates we received on the cost of drugs purchased under this contract from drug manufacturers are used to stabilize rates. You may be subject to an excess consumer cost burden when covered prescription drugs are purchased under this contract.

EXCEPTION TO STEP THERAPY

We will grant exception to step therapy or fail first protocol when:

- (1) The prescribing physician can demonstrate to the health coverage plan, based on sound clinical evidence, that the preferred treatment required under step therapy or fail first protocol has been ineffective in the treatment of the insured's disease or medical condition.
- (2) The prescribing physician can demonstrate to the health coverage plan, based on sound clinical evidence, that the preferred treatment required under the step therapy or fail first protocol is reasonably expected to be ineffective based on the known relevant physical or mental characteristics and medical history of the insured and known characteristics of the drug regimen.
- (3) The prescribing physician can demonstrate to the health coverage plan, based on sound clinical evidence, that the preferred treatment required under the step therapy or fail first protocol will cause or will likely cause an adverse reaction or other physical harm to the insured.

To obtain exception to Step Therapy your provider can follow regular Prior Authorization process

Formulary Abbreviations:

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

Opioid Medications:

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

Introducción al Formulario

FORMULARIO

El Formulario de Ambetter from Louisiana Healthcare Connections 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.

Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento.

CAMBIOS EN EL FORMULARIO

El Formulario de Ambetter from Louisiana Healthcare Connections se revisa al menos trimestralmente y se actualiza todos los meses. Los cambios positivos en el Formulario, como la incorporación de productos al Formulario y la eliminación de restricciones de administración de la utilización (autorizaciones previas, límite de cantidad, etc.) se pueden producir una vez por mes. Los cambios negativos, como la eliminación de productos del Formulario y la incorporación de técnicas de administración de la utilización se pueden producir únicamente al comienzo de cada nuevo año de beneficios. Si usted se ve afectado por un cambio negativo en el Formulario, será notificado por escrito al menos 60 días antes de que se produzca.

USO DEL FORMULARIO

El Formulario de Ambetter from Louisiana Healthcare Connections está estructurado en dos partes. La primera parte del Formulario cita los medicamentos cubiertos por las condiciones que tratan. Puede utilizar esta sección para encontrar rápidamente todos los medicamentos que están cubiertos para su condición específica. La segunda parte del Formulario cita todos los productos alfabéticamente. Puede utilizar esta parte del Formulario para buscar su medicamento específico por nombre. Los productos aparecen en el Formulario en varios niveles, cada uno correspondiente a un copago o coseguro asociado del que usted puede ser responsable. La clave de la lista de medicamentos a continuación brinda una visión general de los niveles.

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. Se aplican ciertos límites.

Nivel 1a - El copago más bajo para aquellos medicamentos 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 1b - 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.

El Formulario contiene otra información importante. Las restricciones de administración de la utilización, como la autorización previa, la terapia escalonada, los límites de cantidad, los límites de edad y otras están descritas junto a cada producto.

Autorización previa

Los medicamentos que figuran en el Formulario con la abreviatura PA están restringidos por el requisito de autorización previa. Antes de obtener este medicamento, su proveedor deberá presentar una solicitud a Ambetter from Louisiana Healthcare Connections para que le apruebe este producto.

Terapia escalonada

Los medicamentos que figuran en el Formulario con la abreviatura ST están restringidos por el requisito de terapia escalonada. Si ha probado el producto requerido antes de solicitar un surtido para un medicamento restringido por ST, su reclamo será procesado. Si no tenemos registro de que usted haya probado el producto requerido, el profesional que expide sus recetas puede ponerse en contacto con Ambetter from Louisiana Healthcare Connections para obtener una autorización

Límite de cantidad

Un límite de cantidad restringe los medicamentos que figuran en el Formulario con la abreviatura QL. Detallamos cada límite de cantidad en unidades que se pueden obtener por período de tiempo (p.ej., 2 comprimidos por día).

Límite de edad

Los medicamentos que figuran en el Formulario con la abreviatura AL están restringidos a determinadas edades. Cada límite de edad aparece en función de la aprobación de la FDA para los medicamentos.

No incluido en el Formulario

Los medicamentos que figuran en el Formulario con la abreviatura NF son medicamentos no incluidos en el Formulario. Para obtener acceso a medicamentos no incluidos en el Formulario, el profesional que expide sus recetas puede ponerse en contacto con Ambetter from Louisiana Healthcare Connections para obtener una autorización. En la sección siguiente encontrará más información.

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 de farmacia 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.

DIVULGACIÓN SOBRE COSTO EXCEDENTE

Cualquier ahorro o reembolso que recibamos de los fabricantes sobre el costo de los medicamentos comprados bajo este contrato de medicamentos se utiliza para estabilizar las tarifas. Usted puede estar sujeto a una carga por exceso de costos para el consumidor cuando los medicamentos recetados cubiertos se compran bajo este contrato.

EXCEPCIÓN A LA TERAPIA ESCALONADA

Otorgaremos una excepción a la terapia escalonada o al protocolo *fail first* cuando:

- (1) El médico que expide sus recetas pueda demostrar al plan de cobertura médica, basado en evidencias clínicas sólidas, que el tratamiento preferido requerido en el marco de la terapia escalonada o del protocolo *fail first* ha sido ineficaz en el tratamiento de la enfermedad o condición médica del asegurado.
- (2) El médico que expide sus recetas pueda demostrar al plan de cobertura médica, basado en evidencias clínicas sólidas, que el tratamiento preferido solicitado en el marco de la terapia escalonada o del protocolo *fail first* se espera razonablemente que sea ineficaz sobre la base de las características físicas o mentales relevantes conocidas y los antecedentes médicos del asegurado y las características conocidas del régimen del medicamento.
- (3) El médico que expide sus recetas pueda demostrar al plan de cobertura médica, basado en evidencias clínicas sólidas, que el tratamiento preferido requerido en el marco de la terapia escalonada o del protocolo *fail first* causará o podría causar una reacción adversa u otro daño físico al asegurado.

Para obtener una excepción a la terapia escalonada, su proveedor puede seguir el procedimiento regular de la autorización previa

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 establezca 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
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
<i>amphetamine sulfate TABS</i>	3	PA
<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>amphetamine-dextroamphetamine CP24 3.75 MG-3.75 MG-3.75 MG-3.75 MG</i>	1B	
<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>amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-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>amphetamine-dextroamphetamine TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 ea daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B	
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 ea daily); ST
<i>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 ea daily); ST
<i>methamphetamine hcl</i>	1B	QL(5 ea daily); AL(At least 6 yrs old)
Anorexiants Non-Amphetamine		
<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>phentermine hcl CAPS</i>	1B	PA
Anti-Obesity Agents		
CONTRAVE	3	QL(4 ea daily); PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI 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)

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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 200 MG</i>	1B	QL(2 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 5 MG</i>	1B	QL(6 ea daily); AL(At least 6 yrs old)	<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1B	QL(5 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 100 MG</i>	1B	QL(1 ea daily); PA	ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
			Antirheumatic - Enzyme Inhibitors		
			<i>RINVOQ TB24</i>	4	QL(1 ea daily); PA
			<i>XELJANZ XR TB24</i>	4	QL(1 ea daily); PA
			<i>XELJANZ SOLN</i>	4	QL(20 ml daily); PA

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

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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		
OTEZLA TABS	4	QL(2 ea daily); PA
OTEZLA TBPK	4	1 package(s) per 180 day(s) retail; PA
OTEZLA TBPK	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		
ENBREL MINI SOCT	4	QL(0.146 ml daily); PA
ENBREL SURECLICK SOAJ	4	QL(0.146 ml daily); PA
ENBREL SOLN	4	QL(0.146 ml daily); PA
ENBREL SOSY 50 MG/ML	4	QL(0.286 ml daily); SP; PA
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ml daily); PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<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		

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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	New starts limited to 7 day supply; QL(6 ea daily)
<i>diflunisal TABS</i>	1B		<i>methadone hcl CONC</i>	1B	QL(10 ml daily)
<i>salsalate</i>	1B		<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>methadone hcl SOLN OR 5 MG/5ML</i>	1B	QL(100 ml daily)
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 10 MG</i>	1B	QL(10 ea daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 ea daily); PA	<i>methadone hcl TABS 5 MG</i>	1B	QL(4 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 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily); PA			
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 ea daily); PA			

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

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		
<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 FILM SL 3 MG-12 MG</i>	1B	QL(2 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
ANDROGENS-ANABOLIC - Drugs to Regulate 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	

Drug Name	Drug Tier	Requirements/Limits
<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
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)

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Drug Name	Drug Tier	Requirements/Limits
<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	
ANTIANKXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>buspirone hcl 5 MG</i>	1A	
<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	

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NUCALA SOLR	4	QL(0.1073 ea daily); PA	Steroid Inhalants		
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA	ALVESCO	3	PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA	ARNUITY ELLIPTA	2	
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA	<i>fluticasone propionate (inhalation) AEPB</i>	1B	
XOLAIR SOLR	4	QL(0.286 ea daily); PA	<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	PULMICORT FLEXHALER AEPB	2	
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA	QVAR REDIHALER	2	
Anti-Inflammatory Agents			Sympathomimetics		
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)	AIRDUO DIGIHALER 113/14	3	
Bronchodilators - Anticholinergics			AIRDUO DIGIHALER 232/14	3	
ATROVENT HFA	3	QL(0.44 gm daily)	AIRDUO DIGIHALER 55/14	3	
INCRUSE ELLIPTA	2	QL(1 ea daily)	AIRSUPRA	3	
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)	<i>albuterol sulfate AERS</i>	1B	
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)	<i>albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	1B	
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)	<i>albuterol sulfate SYRP</i>	1B	
Leukotriene Modulators			<i>albuterol sulfate TABS</i>	1B	
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)	ANORO ELLIPTA	2	QL(2 ea daily)
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)	<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)	BREO ELLIPTA	2	
<i>zafirlukast</i>	1B	QL(2 ea daily)	BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	
<i>zileuton TB12</i>	3	QL(4 ea daily); PA	BREZTRI AEROSPHERE	2	QL(0.38 gm daily)
Selective Phosphodiesterase 4 (PDE4) Inhibitors			<i>budesonide-formoterol fumarate dihydrate</i>	1B	
<i>roflumilast</i>	3	QL(1 ea daily)	DULERA	2	
			<i>fluticasone furoate-vilanterol</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone-salmeterol</i> AEPB	1B		XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)
<i>fluticasone-salmeterol</i> AERO	1B		XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
<i>formoterol fumarate</i> NEBU	1B	QL(4 ml daily)	XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
<i>ipratropium-albuterol</i> SOLN	1B	QL(18 ml daily)	Heparins And Heparinoid-Like Agents		
<i>levalbuterol hcl</i>	1B		<i>enoxaparin sodium SOLN</i> IJ 300 MG/3ML	4	QL(6 ml daily)
<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)	<i>enoxaparin sodium SOSY</i> 40 MG/0.4ML	4	QL(0.8 ml daily; 30 Day(s) limit); SP
PROAIR DIGIHALER	3		<i>enoxaparin sodium SOSY</i> 100 MG/ML, 150 MG/ML	4	QL(2 ml daily)
PROAIR RESPICLICK AEPB	3		<i>enoxaparin sodium SOSY</i> 60 MG/0.6ML	4	QL(1.2 ml daily; 30 Day(s) limit); SP
SEREVENT DISKUS	2		<i>enoxaparin sodium SOSY</i> 30 MG/0.3ML	4	QL(0.6 ml daily); SP
STIOLTO RESPIMAT	2		<i>enoxaparin sodium SOSY</i> 80 MG/0.8ML, 120 MG/0.8ML	4	QL(1.6 ml daily)
STRIVERDI RESPIMAT	2		<i>fondaparinux sodium 5</i> MG/0.4ML	4	QL(3.6 ml per 180 day(s) retail; 4 ml per 180 days mail); SP
<i>terbutaline sulfate SOLN</i>	1B		<i>fondaparinux sodium 10</i> MG/0.8ML	4	QL(7.2 ml per 180 day(s) retail; 7 ml per 180 days mail); SP
<i>terbutaline sulfate TABS</i>	1B		<i>fondaparinux sodium 2.5</i> MG/0.5ML	4	QL(4.5 ml per 180 day(s) retail; 4 ml per 180 days mail); SP
TRELEGY ELLIPTA	2	QL(2 ea daily)	<i>fondaparinux sodium 7.5</i> MG/0.6ML	4	QL(5.4 ml per 180 day(s) retail; 5 ml per 180 days mail); SP
Xanthines			FRAGMIN SOSY	4	SP; PA
<i>aminophylline SOLN</i>	1B				
<i>theophylline ELIX</i>	1B				
<i>theophylline SOLN</i>	1B	QL(56 ml daily)			
<i>theophylline TB12</i>	1B				
<i>theophylline TB24</i>	1B				
ANTICOAGULANTS - Blood Thinners					
Coumarin Anticoagulants					
<i>warfarin sodium TABS</i>	1B				
Direct Factor Xa Inhibitors					
ELIQUIS STARTER PACK TBPB	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail			
ELIQUIS TABS	2	QL(2 ea daily)			
XARELTO STARTER PACK TBPB	2	1 max fill(s) per 365 day(s) retail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B		VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B		Anticonvulsants - Misc.		
Thrombin Inhibitors			APTIOM	3	QL(2 ea daily); ST
<i>dabigatran etexilate mesylate CAPS</i>	1B		BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 ea daily); PA
ANTICONVULSANTS - Drugs to Treat Seizures			BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 ea daily); PA
AMPA Glutamate Receptor Antagonists			BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA
FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA	BRIVIACT TABS	3	QL(2 ea daily); PA
FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA	<i>carbamazepine CHEW</i>	1B	
FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA	<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)
FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA	<i>carbamazepine CP12 100 MG</i>	1B	
Anticonvulsants - Benzodiazepines			<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)
<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA	<i>carbamazepine SUSP</i>	1B	
<i>clobazam TABS</i>	1B	QL(2 ea daily); PA	<i>carbamazepine TABS</i>	1B	
<i>clonazepam TABS</i>	1A		<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail	<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 ea daily)
NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA	DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA	DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA
VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA	DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA
VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA	DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA
			EPIDIOLEX	3	PA
			<i>gabapentin CAPS</i>	1B	
			<i>gabapentin SOLN</i>	1B	QL(60 ml daily)
			<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
			<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)
			<i>lacosamide TABS</i>	1B	QL(2 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)
<i>lamotrigine TABS</i>	1B	
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)
<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)
<i>levetiracetam TB24</i>	1B	QL(4 ea daily)
<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA
<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
<i>primidone 50 MG, 250 MG</i>	1B	
<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA
<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
<i>TEGRETOL SUSP (carbamazepine)</i>	2	
<i>TEGRETOL TABS (carbamazepine)</i>	2	
<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 200 MG</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>zonisamide CAPS</i>	1B	QL(6 ea daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 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</i>	2	
<i>DILANTIN (phenytoin sodium extended)</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	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML</i>	1B		<i>citalopram hydrobromide SOLN</i>	1B	QL(20 ml daily)
<i>valproic acid CAPS</i>	1B		<i>citalopram hydrobromide TABS 40 MG</i>	1B	#, QL(1 ea daily)
ANTIDEPRESSANTS - Drugs to Treat Depression					
Alpha-2 Receptor Antagonists (Tetracyclics)					
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)	<i>citalopram hydrobromide TABS 10 MG</i>	1B	#, QL(4 ea daily)
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)	<i>citalopram hydrobromide TABS 20 MG</i>	1B	#, QL(2 ea daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	1B	QL(1 ea daily)	<i>escitalopram oxalate SOLN</i>	1B	QL(20 ml daily)
<i>mirtazapine TBDP 15 MG</i>	1B	QL(3 ea daily)	<i>escitalopram oxalate TABS 5 MG</i>	1B	+, QL(4 ea daily)
<i>mirtazapine TBDP 30 MG</i>	1B	QL(1.5 ea daily)	<i>escitalopram oxalate TABS 20 MG</i>	1B	+, QL(1 ea daily)
<i>mirtazapine TBDP 45 MG</i>	1B	QL(1 ea daily)	<i>escitalopram oxalate TABS 10 MG</i>	1B	+, QL(2 ea daily)
Antidepressants - Misc.					
<i>bupropion hcl TABS</i>	1B	+, QL(3 ea daily)	<i>fluoxetine hcl CAPS 20 MG</i>	1B	#, QL(3 ea daily)
<i>bupropion hcl TB12 100 MG</i>	1B	+, QL(4 ea daily)	<i>fluoxetine hcl CAPS 40 MG</i>	1B	#, QL(2 ea daily)
<i>bupropion hcl TB12 200 MG</i>	1B	+, QL(2 ea daily)	<i>fluoxetine hcl CAPS 10 MG</i>	1A	#, QL(1 ea daily)
<i>bupropion hcl TB12 150 MG</i>	1B	+, QL(3 ea daily)	<i>fluoxetine hcl CPDR</i>	1B	
<i>bupropion hcl TB24 150 MG</i>	1B	QL(3 ea daily)	<i>fluoxetine hcl SOLN</i>	1B	QL(20 ml daily)
<i>bupropion hcl TB24 300 MG</i>	1B	QL(1 ea daily)	<i>fluoxetine hcl TABS 10 MG, 60 MG</i>	1B	QL(1 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)					
EMSAM	3	QL(1 ea daily)	<i>fluoxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)
MARPLAN	2	QL(6 ea daily)	<i>fluvoxamine maleate TABS 100 MG</i>	1B	+, QL(3 ea daily)
<i>phenelzine sulfate</i>	1B		<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	1B	+, QL(2 ea daily)
<i>tranylcypromine sulfate</i>	1B		<i>paroxetine hcl SUSP</i>	1B	QL(30 ml daily)
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists					
SPRAVATO 56MG DOSE	4	PA	<i>paroxetine hcl TABS 40 MG</i>	1B	#, QL(1 ea daily)
SPRAVATO 84MG DOSE	4	PA	<i>paroxetine hcl TABS 30 MG</i>	1B	#, QL(2 ea daily)
Selective Serotonin Reuptake Inhibitors (SSRIs)					
			<i>paroxetine hcl TABS 20 MG</i>	1B	#, QL(3 ea daily)
			<i>paroxetine hcl TABS 10 MG</i>	1B	#, QL(6 ea daily)

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

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)
<i>venlafaxine hcl TB24 150 MG</i>	1B	QL(2 ea daily)
Tricyclic Agents		
<i>amitriptyline hcl TABS</i>	1B	#
<i>amoxapine</i>	1B	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl TABS</i>	1B	
<i>doxepin hcl CAPS</i>	1B	
<i>doxepin hcl CONC</i>	1B	
<i>imipramine hcl TABS</i>	1B	+
<i>imipramine pamoate</i>	1B	
<i>nortriptyline hcl CAPS</i>	1B	
<i>nortriptyline hcl SOLN</i>	1B	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate CAPS</i>	1B	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 ea daily)
<i>miglitol</i>	1B	QL(3 ea daily)
Antidiabetic Combinations		
<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-10 MG</i>	2	QL(1 ea daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 ea daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	+; QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>glipizide-metformin hcl</i> 500 MG-5 MG	1B	+; QL(4 ea daily)
<i>glyburide-metformin</i> 250 MG-1.25 MG	1B	+; QL(2 ea daily)
<i>glyburide-metformin</i> 500 MG-2.5 MG, 500 MG-5 MG	1B	+; QL(4 ea daily)
GLYXAMBI	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
JANUMET TABS	2	QL(2 ea daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl</i> TABS	1B	QL(2 ea daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-5 MG, 500 MG-5 MG	1B	QL(1 ea daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-2.5 MG	1B	QL(2 ea daily)
SOLIQUA 100/33	2	QL(0.5 ml daily); PA
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily)
SYNJARDY TABS	2	QL(2 ea daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(1 ea daily)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
Biguanides		
<i>metformin hcl</i> TABS 850 MG	0	QL(3 ea daily)
<i>metformin hcl</i> TABS 1000 MG	1B	+; QL(2.5 ea daily)
<i>metformin hcl</i> TABS 500 MG	1B	+; QL(5 ea daily)
<i>metformin hcl</i> TB24 750 MG	1B	+; QL(3 ea daily)
<i>metformin hcl</i> TB24 500 MG	1B	+; QL(4 ea daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	+; QL(0.035 ea daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)
Incretin Mimetic Agents		
OZEMPIC SOPN 2 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		

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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	#
INSULIN LISPRO SOLN IJ	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		

Drug Name	Drug Tier	Requirements/Limits
<i>nateglinide</i>	1B	QL(3 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
FARXIGA	2	QL(1 ea daily)
FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 ea daily)
JARDIANCE	2	QL(1 ea daily)
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG</i>	1B	+; QL(4 ea daily)
<i>glimepiride 4 MG</i>	1B	+; QL(2 ea daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1B	+; QL(4 ea daily)
<i>glipizide TB24</i>	1B	+; QL(2 ea daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	+; QL(4 ea daily)
<i>glyburide TABS</i>	1B	+; QL(4 ea daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	QL(2 ea per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 ea daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	1B	QL(3.34 ml daily)
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 ea daily)
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
<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 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 CAPS</i>	1B	PA
<i>aprepitant MISC</i>	1B	PA
VARUBI TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>micafungin sodium</i>	1B	PA
Antifungals		
ABELCET	3	
<i>amphotericin b IV</i>	3	
<i>amphotericin b liposome</i>	3	
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1B	
<i>griseofulvin ultramicrosize</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<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)
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
<i>dexchlorpheniramine maleate SOLN</i>	1B	
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate SOLN</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B	
<i>clemastine fumarate SYRP</i>	1B	
<i>clemastine fumarate TABS 2.68 MG</i>	1B	
<i>diphenhydramine hcl CAPS 50 MG</i>	1A	
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ml daily)
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1B	
Antihistamines - Non-Sedating		
<i>cetirizine hcl TABS</i>	1A	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>desloratadine TABS</i>	1B	QL(1 ea daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 ea daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ml daily); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 ea daily); RX/OTC
<i>loratadine CAPS</i>	1B	
<i>loratadine CHEW</i>	1B	
<i>loratadine SOLN</i>	1B	
<i>loratadine TABS</i>	1A	
<i>loratadine TBDP</i>	1B	
<i>QUZYTIR SOLN IV</i>	3	PA
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	1B	
<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 ea daily)
<i>promethazine hcl TABS</i>	1B	
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1B	+; QL(4 ea daily)
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>cholestyramine PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)
<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)
<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	+; QL(1 ea daily)
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	QL(1 ea daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	+; QL(1 ea daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	+; QL(1 ea daily)
<i>gemfibrozil TABS</i>	1B	+; QL(2 ea daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1B	+; QL(1 ea daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 ea daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 ea daily)
<i>lovastatin TABS 40 MG</i>	1B	+; QL(2 ea daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1B	+; QL(1 ea daily); PV
<i>pravastatin sodium</i>	1B	+; QL(1 ea daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 ea daily)
<i>simvastatin TABS</i>	1B	+; QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	+; QL(1 ea daily)
Nicotinic Acid Derivatives		

Drug Name	Drug Tier	Requirements/Limits
<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 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)
<i>ramipril CAPS</i>	1B	+
<i>trandolapril 4 MG</i>	1B	+; QL(2 ea daily)
<i>trandolapril 1 MG, 2 MG</i>	1B	+; QL(1 ea daily)
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EDARBI	3	QL(1 ea daily); ST	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)
<i>irbesartan</i>	1B	+; QL(1 ea daily)	<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>losartan potassium</i>	1B	+; QL(1 ea daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>olmesartan medoxomil</i>	1B	+; QL(1 ea daily)	<i>irbesartan-hydrochlorothiazide</i>	1B	+
<i>telmisartan</i>	1B	QL(1 ea daily)	<i>lisinopril & hydrochlorothiazide</i>	1B	+
<i>valsartan TABS</i>	1B	+; QL(1 ea daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	+; QL(2 ea daily)
Antiadrenergic Antihypertensives			<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	+; QL(1 ea daily)
<i>clonidine</i>	3	QL(0.15 ea daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>clonidine hcl TABS</i>	1B	+; QL(8 ea daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)
<i>doxazosin mesylate</i>	1B		<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>guanfacine hcl</i>	1B		<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
<i>methyldopa TABS</i>	1B	QL(6 ea daily)	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 ea daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 ea daily)
<i>terazosin hcl</i>	1B		<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 ea daily)
Antihypertensive Combinations			<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)
<i>amlodipine besylate-benazepril hcl</i>	1B		<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
<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-20 MG, 6.25 MG-5 MG</i>	1B				
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)			
<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 ea daily)			
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B				

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

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 IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B	
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)
Leprostatics		
<i>dapsone</i>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	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		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
<i>lincomycin hcl</i>	1B				
Monobactams					
<i>aztreonam 1 GM</i>	1B		Antimalarials		
CAYSTON	4	QL(3 ml daily); PA	<i>chloroquine phosphate TABS 500 MG</i>	1B	
Oxazolidinones			<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>linezolid SUSR</i>	1B		<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 ea daily)
<i>linezolid TABS</i>	1B	QL(2 ea daily); PA	<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 ea daily)
SIVEXTRO TABS	3	PA	<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 ea daily)
Polymyxins			KRINTAFEL	3	QL(2 ea per 30 day(s) retail)
<i>polymyxin b sulfate SOLR</i>	1B		<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
Urinary Anti-infectives			<i>primaquine phosphate TABS</i>	3	
<i>fosfomycin tromethamine</i>	1B		<i>pyrimethamine</i>	1B	QL(3 ea daily); PA
<i>methenamine hippurate</i>	1B		<i>quinine sulfate CAPS 324 MG</i>	1B	PA
<i>nitrofurantoin</i>	1B		ANTIMYASTHENIC/CHOLINERGIC AGENTS		
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B		Antimyasthenic/Cholinergic Agents		
<i>nitrofurantoin monohyd macro</i>	1B		FIRDAPSE	4	PA
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			

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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	

Drug Name	Drug Tier	Requirements/Limits
GLEOSTINE 10 MG	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA
LEUKERAN	4	SP; PA
<i>melphalan</i>	1B	
<i>melphalan hcl IV</i>	1B	
MYLERAN TABS	4	SP; PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA
TEMODAR SOLR	4	
<i>temozolomide CAPS</i>	4	SP; PA
<i>thiotepa 15 MG</i>	4	SP; PA
ZANOSAR	4	SP; PA
Antimetabolites		
<i>azacitidine SUSR</i>	4	SP; PA
<i>capecitabine</i>	4	SP; PA
<i>clofarabine</i>	4	SP; PA
<i>cytarabine SOLN</i>	4	SP; PA
<i>decitabine</i>	4	SP; PA
<i>floxuridine</i>	4	SP; PA
<i>fludarabine phosphate SOLN</i>	4	SP; PA
<i>fludarabine phosphate SOLR</i>	4	SP; PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
<i>mercaptopurine TABS</i>	1B	
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>methotrexate sodium SOLR</i>	1B	SP
<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>nelarabine</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
<i>pralatrexate 20 MG/ML</i>	4	SP; PA
TABLOID	4	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
Antineoplastic - Angiogenesis Inhibitors		
INLYTA	4	QL(2 ea daily); SP; PA
LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA
LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA
LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA
LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA
MVASI	4	PA
ZALTRAP 100 MG/4ML	4	SP; PA
ZIRABEV	4	PA
Antineoplastic - Antibodies		
ADCETRIS	4	SP; PA
ARZERRA	4	SP; PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	SP; PA
TRAZIMERA	4	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
TAGRISSEO 80 MG	4	QL(1 ea daily); PA
TAGRISSEO 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); 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

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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); SP; 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(0.0358 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>toremifene citrate</i>	1B	
TRELSTAR MIXJECT	4	SP; PA
XTANDI CAPS	4	QL(4 ea daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 ea daily); PA
XTANDI TABS 80 MG	4	QL(2 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
Antineoplastic - XPO1 Inhibitors		

Drug Name	Drug Tier	Requirements/Limits
XPOVIO	4	PA
XPOVIO 60 MG TWICE WEEKLY	4	PA
XPOVIO 80 MG TWICE WEEKLY	4	PA
Antineoplastic Antibiotics		
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
<i>dactinomycin</i>	4	SP; PA
<i>doxorubicin hcl liposomal IV 2 MG/ML</i>	4	SP; PA
<i>doxorubicin hcl SOLN</i>	4	SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA
<i>valrubicin</i>	4	SP; PA
Antineoplastic Combinations		
KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA
KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA
KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA
Antineoplastic Enzyme Inhibitors		
ALECENSA	4	QL(4 ea daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA
ALUNBRIG TBPK	4	QL(1 ea daily); PA
BALVERSA	4	PA
<i>bortezomib SOLR IJ</i>	4	SP; PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	KISQALI	4	QL(2.5 ea daily); PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	KOSELUGO	4	PA
BRAFTOVI 75 MG	4	QL(6 ea daily); SP; PA	KYPROLIS	4	PA
BRUKINSA	4	PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
CABOMETYX TABS	4	QL(1 ea daily); PA	LORBRENA	4	QL(1 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	LYNPARZA TABS	4	QL(4 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	MEKINIST SOLR	4	QL(40 ml daily); PA
CAPRELSA	4	QL(1 ea daily); SP; PA	MEKINIST TABS 2 MG	4	QL(1 ea daily); PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	MEKINIST TABS 0.5 MG	4	QL(3 ea daily); PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	MEKTOVI	4	QL(6 ea daily); SP; PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	NINLARO	4	QL(0.143 ea daily); PA
COPIKTRA	4	PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
<i>dasatinib</i>	4	QL(1 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA	PIQRAY 200MG DAILY DOSE	4	QL(1 ea daily); PA
IBRANCE CAPS	4	QL(1 ea daily); PA	PIQRAY 250MG DAILY DOSE	4	QL(1 ea daily); PA
IBRANCE TABS	4	QL(1 ea daily); PA	PIQRAY 300MG DAILY DOSE	4	QL(1 ea daily); PA
ICLUSIG	4	QL(1 ea daily); PA	QINLOCK	4	PA
<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA	RETEVMO CAPS	4	PA
IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA	<i>romidepsin SOLR</i>	4	SP; PA
IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA	ROZLYTREK CAPS	4	PA
IMBRUVICA SUSP	4	QL(8 ml daily); PA	RUBRACA	4	QL(4 ea daily); PA
IMBRUVICA TABS	4	QL(1 ea daily); PA	SCSEMBLIX 100 MG	4	QL(4 ea daily); PA
INREBIC	4	PA	SCSEMBLIX 20 MG, 40 MG	4	QL(2 ea daily); PA
JAKAFI	4	QL(2 ea daily); SP; PA	<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA
KISQALI	4	QL(2 ea daily); PA	SPRYCEL (<i>dasatinib</i>)	4	QL(1 ea daily); SP; PA
			STIVARGA	4	QL(4 ea daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA
TABRECTA	4	PA
TAFINLAR CAPS	4	QL(4 ea daily); PA
TAFINLAR TBSO	4	QL(30 ea daily); PA
TALZENNA	4	QL(1 ea daily); PA
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA
TASIGNA 50 MG	4	QL(4 ea daily); PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA
TIBSOVO	4	PA
TURALIO	4	PA
VERZENIO	4	QL(2 ea daily); PA
VITRAKVI CAPS	4	PA
VITRAKVI SOLN	4	PA
XALKORI CAPS	4	QL(2 ea daily); SP; PA
XOSPATA	4	PA
ZEJULA CAPS	4	QL(3 ea daily); PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
ZELBORAF	4	QL(8 ea daily); SP; PA
ZOLINZA	4	QL(4 ea daily); SP; PA
ZYDELIG	4	QL(2 ea daily); PA
Antineoplastic Enzymes		
ONCASPAR	4	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA

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	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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>paclitaxel protein-bound particles</i>	4	SP; PA	<i>carbidopa-levodopa TABS</i>	1B	
<i>vincristine sulfate</i>	4	SP; PA	<i>carbidopa-levodopa TBCR</i>	1B	
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA	<i>carbidopa-levodopa TBDP</i>	1B	
Topoisomerase I Inhibitors			NEUPRO	2	
HYCAMTIN CAPS	4	SP; PA	<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA	<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>topotecan hcl SOLN</i>	4		<i>ropinirole hydrochloride TABS</i>	1B	
<i>topotecan hcl SOLR</i>	4		<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
Antiparkinson Adjunctive Therapy			Antiparkinson Monoamine Oxidase Inhibitors		
<i>carbidopa</i>	1B		<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA
Antiparkinson Anticholinergics			<i>selegiline hcl CAPS</i>	1B	
<i>benztropine mesylate SOLN</i>	1B		<i>selegiline hcl TABS</i>	1B	
<i>benztropine mesylate TABS</i>	1B		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
<i>trihexyphenidyl hcl SOLN</i>	1B		Antimanic Agents		
<i>trihexyphenidyl hcl TABS</i>	1B		<i>lithium</i>	1B	
Antiparkinson COMT Inhibitors			<i>lithium carbonate CAPS</i>	1B	
<i>entacapone</i>	1B	QL(8 ea daily)	<i>lithium carbonate TABS</i>	1B	
<i>tolcapone</i>	1B		<i>lithium carbonate TBCR</i>	1B	
Antiparkinson Dopaminergics			Antipsychotics - Misc.		
<i>amantadine hcl CAPS</i>	1B		EQUETRO 100 MG	3	QL(2 ea daily); ST
<i>amantadine hcl SOLN</i>	1B		EQUETRO 200 MG	3	QL(8 ea daily); ST
<i>amantadine hcl TABS</i>	1B		EQUETRO 300 MG	3	QL(4 ea daily); ST
<i>apomorphine hydrochloride SOCT</i>	4	PA	<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)
<i>bromocriptine mesylate CAPS</i>	1B		<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B				
<i>carbidopa-levodopa-entacapone</i>	1B				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
Benzisoxazoles			<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)
FANAPT	2	QL(2 ea daily); PA	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)
FANAPT TITRATION PACK	2	PA	<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)	<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)	<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
PERSERIS PRSY	2	QL(0.072 ea daily); PA	Phenothiazines		
<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA	<i>chlorpromazine hcl SOLN</i>	3	
<i>risperidone SOLN</i>	1B	QL(8 ml daily)	<i>chlorpromazine hcl TABS</i>	1B	
<i>risperidone TABS</i>	1B	QL(4 ea daily)	<i>fluphenazine hcl CONC</i>	1B	
<i>risperidone TBDP</i>	1B	QL(4 ea daily)	<i>fluphenazine hcl ELIX</i>	1B	
Butyrophenones			<i>fluphenazine hcl SOLN</i>	1B	
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)	<i>fluphenazine hcl TABS</i>	1B	
<i>haloperidol lactate CONC</i>	1B		<i>perphenazine TABS</i>	1B	
<i>haloperidol lactate SOLN</i>	1B		<i>prochlorperazine</i>	1B	
<i>haloperidol TABS</i>	1B		<i>prochlorperazine maleate TABS</i>	1B	
Dibenzapines			<i>thioridazine hcl</i>	1B	
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA	<i>trifluoperazine hcl TABS</i>	1B	
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA	Quinolinone Derivatives		
<i>clozapine TABS</i>	1B		<i>aripiprazole SOLN OR</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)	<i>aripiprazole TABS</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)	REXULTI	3	PA
<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)	Thioxanthenes		
<i>loxapine succinate</i>	1B		<i>thiothixene</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)	ANTIVIRALS - Drugs to Treat Viral Infections		
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)	Antiretrovirals		
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)			

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Drug Name	Drug Tier	Requirements/Limits
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 ea daily)
APTIVUS CAPS	3	QL(4 ea daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)
BIKTARVY	3	QL(1 ea daily)
CIMDUO	3	QL(1 ea daily); ST
COMPLERA	3	QL(1 ea daily)
<i>darunavir TABS</i>	1B	
DELSTRIGO	3	QL(1 ea daily)
DOVATO	3	QL(1 ea daily)
EDURANT	3	QL(1 ea daily)
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 ea daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz TABS</i>	1B	QL(1 ea daily)
<i>emtricitabine CAPS</i>	1B	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)
EMTRIVA SOLN	3	QL(24 ml daily)
<i>etravirine 200 MG</i>	1B	QL(2 ea daily)
<i>etravirine 100 MG</i>	1B	QL(4 ea daily)
EVOTAZ	3	QL(1 ea daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)
FUZEON SOLR	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
GENVOYA	3	QL(1 ea daily)
INTELENCE 25 MG	3	QL(8 ea daily)
ISENTRESS HD TABS	3	QL(2 ea daily)
ISENTRESS CHEW	3	QL(6 ea daily)
ISENTRESS TABS	3	QL(2 ea daily)
JULUCA	3	QL(1 ea daily)
<i>lamivudine SOLN</i>	1B	QL(30 ml daily)
<i>lamivudine TABS 150 MG</i>	1B	QL(2 ea daily)
<i>lamivudine TABS 300 MG</i>	1B	QL(1 ea daily)
<i>lamivudine-zidovudine</i>	1B	QL(2 ea daily)
LEXIVA SUSP	3	QL(56 ml daily)
<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ml daily)
<i>lopinavir-ritonavir TABS</i>	1B	QL(4 ea daily)
<i>maraviroc TABS 150 MG</i>	1B	QL(2 ea daily)
<i>maraviroc TABS 300 MG</i>	1B	QL(4 ea daily)
<i>nevirapine SUSP</i>	1B	QL(40 ml daily)
<i>nevirapine TABS</i>	1B	QL(2 ea daily)
<i>nevirapine TB24 100 MG</i>	1B	QL(3 ea daily)
<i>nevirapine TB24 400 MG</i>	1B	QL(1 ea daily)
NORVIR CAPS	2	QL(12 ea daily)
NORVIR PACK	3	QL(12 ea daily)
NORVIR SOLN	3	QL(15 ml daily)
ODEFSEY	3	QL(1 ea daily)
PIFELTRO	3	QL(1 ea daily)
PREZCOBIX	3	QL(1 ea daily)
PREZISTA SUSP	3	QL(12 ml daily)
PREZISTA TABS 75 MG, 150 MG	3	QL(2 ea daily)
RETROVIR IV INFUSION SOLN	3	
<i>ritonavir TABS</i>	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 CAPS</i>	1B	QL(2 ea daily)
STRIBILD	3	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>tenofovir disoproxil fumarate</i> TABS	1B	
TIVICAY TABS	3	QL(2 ea daily)
TRIUMEQ TABS	3	QL(1 ea daily)
TRIZIVIR	3	QL(2 ea daily)
TYBOST	3	QL(1 ea daily)
VIRACEPT TABS 625 MG	3	QL(4 ea daily)
VIRACEPT TABS 250 MG	3	QL(10 ea daily)
VIREAD POWD	3	QL(7.5 gm daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 ea daily)
<i>zidovudine</i> CAPS	1B	QL(6 ea daily)
<i>zidovudine</i> SYRP	1B	QL(60 ml daily)
<i>zidovudine</i> TABS	1B	QL(2 ea daily)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium</i> SOLR	1B	
<i>valganciclovir hcl</i> TABS	1B	QL(4 ea daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP
<i>entecavir</i> TABS	4	QL(1 ea daily); SP
EPIVIR HBV SOLN	4	QL(60 ml daily); SP; PA
<i>lamivudine (hbv)</i> TABS	1B	QL(3 ea daily); SP
PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ml daily); PA
<i>ribavirin (hepatitis c)</i> CAPS	1B	QL(7 ea daily)
<i>ribavirin (hepatitis c)</i> TABS 200 MG	1B	QL(7 ea daily)
SOFOSBUVIR/VELPATA SVIR TABS	1B	QL(1 ea daily); PA
SOVALDI TABS 200 MG	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
SOVALDI TABS 400 MG	4	QL(1 ea daily); SP; PA
VOSEVI	4	QL(1 ea daily); PA
Herpes Agents		
<i>acyclovir</i> CAPS	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)
<i>acyclovir</i> SUSP	1B	QL(13.34 ml daily)
<i>acyclovir</i> TABS OR	1B	QL(5 ea daily)
<i>famciclovir</i> 500 MG	1B	QL(4 ea daily)
<i>famciclovir</i> 125 MG, 250 MG	1B	QL(3 ea daily)
<i>valacyclovir hcl</i> 1 GM, 1000 MG	1B	QL(4 ea daily)
<i>valacyclovir hcl</i> 500 MG	1B	QL(2 ea daily)
Influenza Agents		
<i>oseltamivir phosphate</i> CAPS	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</i> SUSR	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</i> TABS	1B	QL(2 ea daily)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1B	+

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Drug Name	Drug Tier	Requirements/Limits
<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	+
<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 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
Beta Blockers Non-Selective		
<i>HEMANGEOL SOLN OR</i>	4	QL(75 ml daily); PA
<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
<i>nadolol TABS 80 MG</i>	1B	
<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<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/af)</i>	1B	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>sotalol hcl TABS 240 MG</i>	1B	
<i>timolol maleate TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	+
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	+
<i>diltiazem hcl extended release beads 420 MG</i>	1B	
<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
<i>diltiazem hcl CP24</i>	1B	+
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<i>DILTIAZEM HCL SOLR</i>	1B	
<i>diltiazem hcl TABS</i>	1B	+
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	+
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)
<i>nifedipine TB24 90 MG</i>	1B	+; QL(1 ea daily)
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 30 MG</i>	1B	+
<i>nifedipine TB24 60 MG</i>	1B	+; QL(2 ea daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B	
<i>verapamil hcl TABS</i>	1B	+
<i>verapamil hcl TBCR</i>	1B	+

CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm

Cardiac Glycosides

<i>digoxin SOLN OR 0.05 MG/ML</i>	1B	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (<i>digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	

CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions

Cardiovascular Agents Misc. - Combinations

<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 ea daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	

Impotence Agents

<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA
STENDRA	3	QL(0.134 ea daily)
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA

Prostaglandin Vasodilators

<i>epoprostenol sodium</i>	4	PA
ORENITRAM TBCR	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
TYVASO REFILL KIT SOLN IN	4	PA
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA

Pulmonary Hypertension - Endothelin Receptor Antagonists

<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA
<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA
OPSUMIT	4	QL(1 ea daily); PA
TRACLEER TBSO	4	QL(2 ea daily); 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 TBPk	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

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Drug Name	Drug Tier	Requirements/ Limits
Stimulator		
ADEMPAS	4	QL(3 ea daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl</i> TABS	3	QL(2 ea daily); PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 ea daily); PA
VYNDAQEL	4	QL(4 ea daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil</i> CAPS	1B	
<i>cefadroxil</i> SUSR	1B	
<i>cefadroxil</i> TABS	1B	
<i>cefazolin sodium</i> SOLR IJ 1 GM, 10 GM, 500 MG	1B	
<i>cephalexin</i> CAPS	1B	
<i>cephalexin</i> SUSR	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor</i> CAPS	1B	
<i>cefaclor</i> SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	1B	
<i>cefotetan disodium</i> IJ 1 GM, 2 GM	1B	
<i>cefoxitin sodium</i> IV 1 GM, 2 GM	1B	
<i>cefprozil</i> SUSR	1B	
<i>cefprozil</i> TABS	1B	
<i>cefuroxime axetil</i> TABS	1B	
<i>cefuroxime sodium</i> IJ 750 MG	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir</i> CAPS	1B	
<i>cefdinir</i> SUSR	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>cefixime</i> CAPS	1B	
<i>cefixime</i> SUSR	1B	ST
<i>cefotaxime sodium</i> IJ 1 GM, 2 GM	1B	
<i>cefpodoxime proxetil</i> SUSR	1B	
<i>cefpodoxime proxetil</i> TABS	1B	
<i>ceftazidime</i> IJ 1 GM, 6 GM	1B	
<i>ceftriaxone sodium</i> IJ 250 MG	1A	
<i>ceftriaxone sodium</i> IJ 1 GM, 2 GM, 500 MG	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl</i> SOLR IV 2 GM	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</i> TABS	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	

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Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
LO LOESTRIN FE TABS	0	
NATAZIA	0	
NEXTSTELLIS	0	
<i>norethin acet & estrad-fe CAPS</i>	0	
<i>norethin acet & estrad-fe CHEW</i>	0	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>norethindrone & eth estradiol</i>	0	
<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; 9 ea per 84 days mail)

Drug Name	Drug Tier	Requirements/Limits
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	0	
Emergency Contraceptives		
ELLA	0	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Implants		
NEXPLANON	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ml per 90 day(s) retail)
Progestin Contraceptives - IUD		
KYLEENA	0	
LILETTA 20.1 MCG/DAY	0	
MIRENA	0	
SKYLA	0	
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		

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

Drug Name	Drug Tier	Requirements/Limits
<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 150 MG</i>	1B	QL(4 ea daily)
<i>benzonatate 200 MG</i>	1B	QL(3 ea daily)
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B	
TUZISTRA XR	2	PA
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 gm daily); RX/OTC	COSENTYX SOSY 150 MG/ML	4	QL(0.072 ml daily); PA
Antineoplastic or Premalignant Lesion Agents - Topical			COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily); PA
<i>bexarotene (topical)</i>	4	SP; PA	<i>methoxsalen rapid</i>	1B	QL(4 ea daily)
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 gm daily); PA	SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 gm daily)	SKYRIZI PSKT	4	QL(0.025 ea daily); PA
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ml daily)	SKYRIZI SOSY	4	QL(0.025 ml daily); PA
PANRETIN	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ml daily); PA
Antipruritics - Topical			STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily); PA
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 gm per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	STELARA SOSY 90 MG/ML	4	QL(0.018 ml daily); SP; PA
Antipsoriatics			<i>tazarotene CREA 0.1 %</i>	1B	QL(1 gm daily)
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)	TREMFYA SOAJ	4	QL(0.018 ml daily); PA
<i>acitretin 25 MG</i>	1B	QL(2 ea daily)	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ml daily); PA
<i>calcipotriene CREA</i>	1B	QL(4 gm daily); PA	Antiseborrheic Products		
<i>calcipotriene OINT</i>	1B	QL(4 gm daily); PA	<i>selenium sulfide LOTN 2.5 %</i>	1B	
<i>calcipotriene SOLN</i>	1B	QL(4 ml daily); PA	Antivirals - Topical		
<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)	<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ml daily); PA	<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
COSENTYX UNOREADY SOAJ	4	QL(0.072 ml daily); PA	<i>penciclovir</i>	3	QL(0.18 gm daily)
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA	Burn Products		
			<i>mafenide acetate PACK</i>	3	
			<i>silver sulfadiazine</i>	1B	QL(20 gm daily)
			SULFAMYLON CREA	3	
			Corticosteroids - Topical		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>amcinonide OINT</i>	3		<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)	<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>betamethasone dipropionate (topical) LOTN</i>	1B		<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)	<i>clocortolone pivalate</i>	3	QL(3 gm daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)	CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)	<i>desonide CREA</i>	1B	QL(4 gm daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)	<i>desonide LOTN</i>	1B	QL(4 ml daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)	<i>desonide OINT</i>	1B	QL(3 gm daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)	<i>desoximetasone GEL</i>	1B	QL(3 gm daily)
<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST	<i>diflorasone diacetate CREA</i>	1B	PA
			<i>diflorasone diacetate OINT</i>	1B	PA
			<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
			<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 gm daily)
			<i>fluocinolone acetonide OIL</i>	1B	QL(8 ml daily)
			<i>fluocinolone acetonide OINT</i>	1B	QL(4 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ml daily)
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)
<i>fluocinonide GEL</i>	1B	
<i>fluocinonide OINT</i>	1B	QL(2 gm daily)
<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)
<i>flurandrenolide CREA</i>	2	QL(2 gm daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ml daily)
<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 gm daily)
<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)
<i>halobetasol propionate OINT</i>	1B	QL(3.5 gm daily)
HALOG OINT	3	PA
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 ea daily); RX/OTC
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC
<i>hydrocortisone butyrate CREA</i>	1B	QL(3 gm daily)
<i>hydrocortisone butyrate OINT</i>	1B	QL(3 gm daily)
<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ml daily)
<i>hydrocortisone valerate CREA</i>	1B	
<i>hydrocortisone valerate OINT</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>mometasone furoate CREA</i>	1B	QL(3 gm daily)
<i>mometasone furoate OINT</i>	1B	QL(4 gm daily)
<i>mometasone furoate SOLN</i>	1B	QL(5 ml daily)
<i>prednicarbate OINT</i>	1B	
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)
Eczema Agents		
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 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 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

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Drug Name	Drug Tier	Requirements/Limits
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
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 1 %</i>	1B	QL(5 gm daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) LOTN</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
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)
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	#

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Drug Name	Drug Tier	Requirements/Limits
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	#, QL(3.34 ea daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP	1B	#, QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	#, QL(3.34 ea daily); RX/OTC

DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes

Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 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)

Drug Name	Drug Tier	Requirements/Limits
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 ea daily)
<i>ethacrynic acid</i>	1B	QL(16 ea daily)
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B	
<i>furosemide TABS</i>	1B	
<i>torseamide TABS</i>	1B	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 ea daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1B	
DIURIL SUSP	2	QL(20 ml daily)
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 ea daily)
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 ea daily)
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 ea daily)
<i>metolazone</i>	1B	QL(2 ea daily)

ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate

Drug Name	Drug Tier	Requirements/Limits
Hormones		
Bone Density Regulators		
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA
<i>risedronate sodium TBEC</i>	1B	PA
<i>teriparatide SOPN</i>	4	QL(0.09 ml daily); SP; PA
TYMLOS	4	PA
XGEVA SOLN	4	SP; PA
<i>zoledronic acid CONC</i>	4	SP; PA
<i>zoledronic acid SOLN</i>	4	SP; PA
Corticotropin		
ACTHAR GEL	3	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	PA
<i>clomiphene citrate TABS</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
GnRH/LHRH Antagonists		
<i>ganirelix acetate</i>	4	PA
ORILISSA	2	PA
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA 2 MG	4	PA
EGRIFTA SV	4	PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	PA
GENOTROPIN CART SC	4	PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPRO SOPN 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	

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Drug Name	Drug Tier	Requirements/Limits
<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
<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 0.1 MG</i>	1B	QL(6 ea daily)
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SIGNIFOR	4	PA

Drug Name	Drug Tier	Requirements/Limits
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		
ACTIVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	3	
ANGELIQ	3	
BIJUVA	3	
CLIMARA PRO	3	
COMBIPATCH PTTW	3	
DUAVEE	3	
<i>esterified estrogens & methyltestosterone</i>	3	
<i>estradiol & norethindrone acetate TABS</i>	3	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREFEST	3	
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	

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

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

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

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

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

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

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

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

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Drug Name	Drug Tier	Requirements/Limits
<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		
OSMOPREP	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)
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 ea daily)
<i>docusate sodium CAPS 250 MG</i>	1A	
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	

Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 ea daily)
<i>azithromycin TABS 250 MG</i>	1B	QL(6 ea per fill retail; 6 per fill mail)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 ea per fill retail; 4 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		
DIFICID TABS	2	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC	0	
CAYA DPRH	0	
DUREX EXTRA SENSITIVE THIN DEVI	0	
DUREX EXTRA SENSITIVE THIN MISC	0	
DUREX TROPICAL MISC	0	
FANTASY LUBRICATED/SPERMICI DE MISC	0	
FANTASY LUBRICATED MISC	0	

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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		SELECT LANCETS	1	6.66/day
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0		TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	#
Diabetic Supplies			Parenteral Therapy Supplies		
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA	SELECT INSULIN SYRINGES	1B	5/day
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA	SELECT INSULIN SYRINGES	1	5/day
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
			Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AIMOVIG	2	QL(0.04 ml daily); PA	<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
EMGALITY SOAJ	2	QL(0.07 ml daily); PA	<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA	<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA	<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
UBRELVY	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail); ST	<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
Migraine Combinations			<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)	<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)	<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
Migraine Products			<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B		<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)	<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST
ERGOMAR SUBL	3	QL(0.667 ea daily)	<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
Serotonin Agonists			<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	MINERALS & ELECTROLYTES		
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 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			

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

Drug Name	Drug Tier	Requirements/Limits
<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 20 MG</i>	4	QL(1 ea daily); PA
<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA
THALOMID	4	QL(3 ea daily); SP; PA
Immunosuppressive Agents		
ATGAM IV 50 MG/ML	4	SP; PA
AZATHIOPRINE	1B	
<i>azathioprine TABS</i>	1B	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
<i>cyclosporine CAPS</i>	1B	
<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
ENSPRYNG	4	PA
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); SP; PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA
<i>mycophenolate mofetil CAPS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<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		
<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	

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Drug Name	Drug Tier	Requirements/Limits
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)
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

Drug Name	Drug Tier	Requirements/Limits
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 PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC
ONE VITE WOMENS PRENATALVITAMIN 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 ANDMINERAL 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
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)
PRENATAL VITAMIN TABS	2	QL(1 ea daily)
PRENATAL TABS	2	QL(1 ea daily)
PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
PRENATRYL TABS	2	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
QC PRENATAL TABS	2	QL(1 ea daily)
RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
RA PRENATAL TABS	2	QL(1 ea daily)
SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)
THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC
TRICARE TABS	2	QL(1 ea daily); RX/OTC
VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen TABS 10 MG, 20 MG</i>	1B	
<i>carisoprodol TABS</i>	1B	
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
<i>tizanidine hcl CAPS</i>	1B	
<i>tizanidine hcl TABS</i>	1B	
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		

Drug Name	Drug Tier	Requirements/Limits
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	RX/OTC
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to 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, 100 MG/10ML</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX 4.25%/DEXTROSE 10%	3	
CLINIMIX 4.25%/DEXTROSE 5%	3	

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Drug Name	Drug Tier	Requirements/Limits
CLINIMIX E 5%/DEXTROSE 20%	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
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	
BESIVANCE	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) OINT</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<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	
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-polymy-dexameth OINT</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyx-dexameth SUSP</i>	1B	
<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)
PRED MILD	3	PA
PRED-G SUSP	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	
ZYLET	3	PA
Ophthalmic Surgical Aids		
HEALON PRO SOSY	3	PA
PROVISC SOSY	3	PA
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	
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	
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ml daily); ST

Drug Name	Drug Tier	Requirements/Limits
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<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		
<i>fluocinolone acetamide (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 30 GM/300ML	4	PA

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Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMUNEX-C	4	SP; PA
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IJ 1 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
<i>penicillin g potassium 5000000 UNIT</i>	1B	
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	

Drug Name	Drug Tier	Requirements/Limits
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>nafcillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>megestrol acetate (appetite)</i>	1B	PA
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1B	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lofexidine hcl</i>	1B	QL(224 ea per 14 day(s) retail); 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
LUCEMYRA (<i>lofexidine hcl</i>)	3	QL(224 ea per 14 day(s) retail); PA	AUSTEDO XR TB24	4	QL(1 ea daily); PA
Antidementia Agents			Multiple Sclerosis Agents		
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 ea daily)	AVONEX PEN AJKT	4	QL(0.0714 ml daily); SP; PA
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 ea daily)	AVONEX PSKT	4	QL(0.0714 ml daily); SP; PA
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 ea daily)	BETASERON KIT	4	QL(0.5 ea daily); SP; PA
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 ea daily)	<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA
<i>galantamine hydrobromide CP24</i>	1B	QL(1 ea daily)	<i>dimethyl fumarate CDPK</i>	1B	QL(2 ea daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ml daily)	<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 ea daily)	<i>ingolimod hcl</i>	4	QL(1 ea daily)
<i>memantine hcl TABS</i>	1B	QL(2 ea daily)	<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ml daily)
<i>memantine hcl TABS</i>	1B		<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ml daily)
<i>rivastigmine tartrate CAPS</i>	1B		LEMTRADA	4	QL(1.2 ml daily); PA
Combination Psychotherapeutics			PLEGRIDY STARTER PACK SOAJ SC	4	QL(0.036 ml daily); PA
<i>chlordiazepoxide-amitriptyline</i>	1B		PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)	PLEGRIDY SOAJ SC 125 MCG/0.5ML	4	QL(0.036 ml daily); PA
Fibromyalgia Agents			PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA	Movement Disorder Drug Therapy		
SAVELLA TABS	2	QL(2 ea daily); PA	AUSTEDO PATIENT TITRATION KIT TBPB		
Movement Disorder Drug Therapy			4		
AUSTEDO PATIENT TITRATION KIT TBPB			1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA		

Drug Name	Drug Tier	Requirements/Limits
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		
NUDEXTA	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	
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)

Drug Name	Drug Tier	Requirements/Limits
<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	QL(1 ea daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 ea daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Fluorocyclines		
XERAVA	4	PA
Glycylcyclines		
<i>tigecycline</i>	1B	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
<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		
<i>ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG</i>	2	
<i>ARMOUR THYROID TABS</i>	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
<i>NP THYROID 120 TABS</i>	1B	QL(1 ea daily)
<i>NP THYROID 15 TABS</i>	1B	QL(1 ea daily)
<i>NP THYROID 30 TABS</i>	1B	QL(1 ea daily)
<i>NP THYROID 60 TABS</i>	1B	QL(1 ea daily)
<i>NP THYROID 90 TABS</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
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	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>glycopyrrolate TABS 1 MG</i>	1B	
<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 40 MG/4ML, 200 MG/20ML</i>	1B	
<i>famotidine SOLN 20 MG/2ML</i>	1A	
<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
NEXIUM 24HR TBEC (esomeprazole magnesium)	1B	QL(2 ea daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)
<i>omeprazole CPDR</i>	1B	QL(2 ea daily)
<i>omeprazole TBEC</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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		
<i>bethanechol chloride 25 MG</i>	1B	
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Urinary Antispasmodics - Direct Muscle Relaxants			AFLURIA QUADRIVALENT 2023-2024 SUSP	0	1 max fill(s) per 180 day(s) retail
<i>flavoxate hcl</i>	1B		AFLURIA QUADRIVALENT 2023-2024 SUSY	0	1 max fill(s) per 180 day(s) retail
VACCINES			AREXVY	0	
Bacterial Vaccines			AUDENZ EMUL IM	0	1 max fill(s) per 180 day(s) retail
ACTHIB SOLR IM	0		AUDENZ PRSY IM	0	1 max fill(s) per 180 day(s) retail
BEXSERO	0		COMIRNATY 2023-24 SUSP	0	
HIBERIX SOLR IJ	0		COMIRNATY 2023-24 SUSY	0	
MENACTRA	0		COMIRNATY 2024-25 SUSY	0	
MENQUADFI	0		COMIRNATY SUSP	0	
MENVEO SOLN	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
MENVEO SOLR	0		ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
PEDVAX HIB SUSP	0		FLUAD 2024-2025	0	1 max fill(s) per 180 day(s) retail
PNEUMOVAX 23 IJ 25 MCG/0.5ML	0		FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	0		FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail
PREVNAR 13	0		FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail	FLUARIX QUADRIVALENT 2022-2023 SUSP	0	1 max fill(s) per 180 day(s) retail
TRUMENBA	0		FLUARIX QUADRIVALENT 2022-2023 SUSY	0	1 max fill(s) per 180 day(s) retail
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			
AFLURIA QUADRIVALENT 2022-2023 SUSP	0	1 max fill(s) per 180 day(s) retail			
AFLURIA QUADRIVALENT 2022-2023 SUSY	0	1 max fill(s) per 180 day(s) retail			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUARIX QUADRIVALENT 2023-2024 SUSY	0	1 max fill(s) per 180 day(s) retail	FLULAVAL QUADRIVALENT 2022-2023 SUSY	0	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	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
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSP	0	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	FLUZONE QUADRIVALENT 2022-2023 SUSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GARDASIL 9 SUSY	0	3 max fill(s) per 365 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0	
HAVRIX	0		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	0	
IPOL INACTIVATED IPV	0		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0	
JANSSEN COVID-19 VACCINE	0		PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0	
M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	0	
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y	0	
MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	0	
MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/SUSP	0	
MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	0		PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
MODERNA COVID-19 VACCINE/6MO-5Y SUSP	0		PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
MODERNA COVID-19 VACCINE SUSP	0		RECOMBIVAX HB SUSP	0	
NOVAVAX COVID-19 VACCINE/2023-24 SUSP	0		RECOMBIVAX HB SUSY	0	
NOVAVAX COVID-19 VACCINE/2024-25 SUSY	0		ROTARIX SUSP	0	
NOVAVAX COVID-19 VACCINE SUSP	0		ROTARIX SUSR	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		ROTATEQ SOLN	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	0				

Drug Name	Drug Tier	Requirements/Limits
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	
VAQTA	0	
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(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV

Drug Name	Drug Tier	Requirements/Limits
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING	3	
FEMRING	3	
PREMARIN	2	QL(1.5 gm daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN OR</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		

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Drug Name	Drug Tier	Requirements/ Limits
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ml daily)
NIACIN TR TBCR	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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abacavir sulfate SOLN	30	ACTIVELLA TABS 1 MG-0.5 MG (estradiol & norethindrone acetate) 45	AIRDUO DIGIHALER 113/14	9
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abacavir sulfate-lamivudine	30	acyclovir SUSP	AIRDUO DIGIHALER 55/14	9
ABELCET	17	acyclovir TABS OR	AIRSUPRA	9
abiraterone acetate 250 MG	24	acyclovir topical CREA	AKYNZEO	17
abiraterone acetate 500 MG	24	acyclovir topical OINT	albendazole	7
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ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	48	atomoxetine hcl 60 MG, 80 MG, 100 MG	1	azithromycin SOLR	50
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	48	atorvastatin calcium TABS	19	azithromycin SUSR	50
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buspironone hcl 5 MG	8	calcitriol CAPS	44	carbinoxamine maleate TABS 4 MG	18
buspironone hcl 7.5 MG, 10 MG, 15 MG, 30 MG	8	calcitriol SOLN IV	45	carboplatin SOLN 50 MG/5ML	23
busulfan SOLN	23	calcium acetate (phosphate binder) CAPS	47	carisoprodol TABS	57
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butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	4	calcium polycarbophil TABS	49	carvedilol	31
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butalbital-aspirin-caffeine w/cod	6	CAPRELSA	26	cefaclor CAPS	34
butenafine hcl	38	captopril 12.5 MG	19	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	34
butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	7	captopril 25 MG, 50 MG, 100 MG	19	cefadroxil CAPS	34
		carbamazepine CHEW	11	cefadroxil SUSR	34
		carbamazepine CP12 100 MG	11	cefadroxil TABS	34
		carbamazepine CP12 200 MG	11	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	34
		carbamazepine CP12 300 MG	11	cefdinir CAPS	34

cefdinir SUSR	34	chlordiazepoxide-amitriptyline	61	CIMDUO	30
cefepime hcl SOLR IV 2 GM	34	chlorhexidine gluconate (mouth-throat)	55	cimetidine TABS	64
cefixime CAPS	34	chloroquine phosphate TABS 250 MG	22	cinacalcet hcl	45
cefixime SUSR	34	chloroquine phosphate TABS 500 MG	22	ciprofloxacin hcl (ophth) SOLN	58
cefotaxime sodium IJ 1 GM, 2 GM	34	chlorpromazine hcl SOLN	29	ciprofloxacin hcl (otic)	59
cefotetan disodium IJ 1 GM, 2 GM	34	chlorpromazine hcl TABS	29	ciprofloxacin hcl TABS	46
cefoxitin sodium IV 1 GM, 2 GM ...	34	chlorthalidone 25 MG, 50 MG	43	ciprofloxacin in d5w 5 %-200 MG/100ML	46
cefpodoxime proxetil SUSR	34	chlorzoxazone TABS 500 MG	57	ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML	46
cefpodoxime proxetil TABS	34	chlorzoxazone TABS 750 MG	57	ciprofloxacin-dexamethasone	59
cefprozil SUSR	34	CHOLBAM	46	ciprofloxacin-fluocinolone acetonide .	59
cefprozil TABS	34	cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT	68	cisplatin SOLN 100 MG/100ML	23
ceftazidime IJ 1 GM, 6 GM	34	cholecalciferol TABS 10 MCG, 400 UNIT	68	citalopram hydrobromide SOLN ...	13
ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG	34	cholestyramine light PACK	18	citalopram hydrobromide TABS 10 MG	13
ceftriaxone sodium IJ 250 MG	34	cholestyramine light POWD	18	citalopram hydrobromide TABS 20 MG	13
cefuroxime axetil TABS	34	cholestyramine PACK	19	citalopram hydrobromide TABS 40 MG	13
cefuroxime sodium IJ 750 MG	34	cholestyramine POWD	19	clarithromycin SUSR	50
celecoxib	3	choline fenofibrate	19	clarithromycin TABS	50
cephalexin CAPS	34	CHORIONIC GONADOTROPIN IM 44		clarithromycin TB24	50
cephalexin SUSR	34	ciclopirox GEL	38	CLASSIC PRENATAL TABS	56
CERDELGA	48	ciclopirox olamine CREA	38	clemastine fumarate SYRP	18
CEREZYME 400 UNIT	48	ciclopirox olamine SUSP	38	clemastine fumarate TABS 2.68 MG .	18
cetirizine hcl TABS	18	ciclopirox SHAM	38	CLIMARA PRO	45
cevimeline hcl	56	ciclopirox SOLN	38	clindamycin hcl	21
CHEMET	16	cidofovir	31	clindamycin palmitate hydrochloride .	21
CHEMSTRIP-K STRP	42	cilostazol	48	clindamycin phosphate (topical)	
chloramphenicol sodium succinate 21					
chlordiazepoxide hcl CAPS	8				
chlordiazepoxide hcl-clidinium bromide	63				

FOAM	37	clobetasol propionate SOLN 0.05 % .	40	colesevelam hcl PACK	19
clindamycin phosphate (topical) GEL	37	clocortolone pivalate	40	colesevelam hcl TABS	19
clindamycin phosphate (topical)		clofarabine	23	colestipol hcl GRAN	19
LOTN	37	clomiphene citrate TABS	44	colestipol hcl PACK	19
clindamycin phosphate (topical)		clomipramine hcl	14	colestipol hcl TABS	19
SOLN	37	clonazepam TABS	11	COMBIPATCH PTTW	45
clindamycin phosphate (topical)		clonidine	20	COMETRIQ KIT	26
SWAB	37	clonidine hcl (adhd) TB12	1	COMIRNATY 2023-24 SUSP	65
clindamycin phosphate SOLN IJ 9		clonidine hcl TABS	20	COMIRNATY 2023-24 SUSY	65
GM/60ML, 300 MG/2ML, 600		clopidogrel bisulfate 300 MG	48	COMIRNATY 2024-25 SUSY	65
MG/4ML, 900 MG/6ML, 9000		clopidogrel bisulfate 75 MG	48	COMIRNATY SUSP	65
MG/60ML	22	clorazepate dipotassium TABS	8	COMPLERA	30
clindamycin phosphate vaginal CREA		clotrimazole (topical) CREA	38	CONTRACE	1
.....	68	clotrimazole (topical) SOLN	38	COPIKTRA	26
clindamycin phosphate-benzoyl		clotrimazole	55	CORDRAN TAPE	40
peroxide (refrigerate)	37	clotrimazole vaginal CREA 1 %	68	CORTISPORIN-TC	59
clindamycin phosphate-benzoyl		clotrimazole w/ betamethasone		COSENTYX SENSOREADY PEN	
peroxide GEL 5 %-1 %	37	CREA	38	SOAJ	39
clindamycin phosphate-tretinoin ..	37	clotrimazole w/ betamethasone		COSENTYX SOSY 150 MG/ML	39
CLINIMIX 4.25%/DEXTROSE 10%		LOTN	38	COSENTYX SOSY 75 MG/0.5ML	39
57		clozapine TABS	29	COSENTYX UNOREADY SOAJ	39
CLINIMIX 4.25%/DEXTROSE 5%	57	clozapine TBDP 100 MG	29	CREON CPEP	43
CLINIMIX E 5%/DEXTROSE 20%		clozapine TBDP 12.5 MG, 150 MG		CRESEMBA CAPS OR 186 MG	18
58		29		cromolyn sodium (ophth)	59
clobazam SUSP	11	clozapine TBDP 25 MG	29	cromolyn sodium NEBU	9
clobazam TABS	11	COARTEM	22	crotamiton LOTN	42
clobetasol propionate CREA 0.05 % .		codeine sulfate TABS 30 MG	5	CVS PRENATAL TABS 100 MG-2.6	
40		CODEINE SULFATE TABS	5	MG-800 MCG-400 UNIT-4 MCG-1.7	
clobetasol propionate emollient base		colchicine TABS	47	MG-18 MG-27 MG-1.5 MG-25 MG-	
0.05 %	40	colchicine w/ probenecid	47	263 MG-11 UNIT-4000 UNIT	56
clobetasol propionate FOAM	40			cyanocobalamin SOLN IJ 1000	
clobetasol propionate GEL 0.05 %	40			MCG/ML	48
clobetasol propionate OINT 0.05 %					
40					

cyclobenzaprine hcl TABS 5 MG, 10 MG	57	dalfampridine	61	desmopressin acetate SOLN IJ	45
cyclophosphamide CAPS	23	danazol CAPS	7	DESMOPRESSIN ACETATE SOLN NA	45
cyclophosphamide SOLR IJ	23	dantrolene sodium CAPS	57	desmopressin acetate spray	45
cycloserine	23	dapagliflozin propanediol	16	desmopressin acetate spray refrigerated	45
cyclosporine (ophth) EMUL	58	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	14	desmopressin acetate TABS 0.1 MG	45
cyclosporine CAPS	55	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	14	desmopressin acetate TABS 0.2 MG	45
cyclosporine modified (for microemulsion) CAPS	55	dapsone	21	desogestrel & ethinyl estradiol	34
cyclosporine modified (for microemulsion) SOLN	55	DAPTACEL	63	desogestrel-ethinyl estradiol (biphasic)	34
cyclosporine SOLN IV 50 MG/ML .	55	daptomycin 500 MG	21	desogestrel-ethinyl estradiol (triphasic)	34
CYLTEZO AJKT	3	darifenacin hydrobromide	64	desonide CREA	40
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	3	darunavir TABS	30	desonide LOTN	40
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	dasatinib	26	desonide OINT	40
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	3	DAURISMO	24	desoximetasone CREA 0.25 %	40
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	3	DEBACTEROL	55	desoximetasone GEL	40
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ...	3	decitabine	23	desoximetasone OINT 0.25 %	40
cyproheptadine hcl SYRP	18	deferasirox PACK	16	desvenlafaxine succinate 100 MG .	14
cyproheptadine hcl TABS	18	deferasirox TABS	16	desvenlafaxine succinate 25 MG, 50 MG	14
CYSTAGON CAPS	47	deferasirox TBSO	16	dexamethasone ELIX	36
CYSTARAN	59	deflazacort SUSP	36	DEXAMETHASONE INTENSOL CONC	36
cytarabine SOLN	23	deflazacort TABS	36	dexamethasone sodium phosphate (ophth)	58
dabigatran etexilate mesylate CAPS .	11	DELSTRIGO	30	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	36
dacarbazine SOLR 200 MG	27	demeclocycline hcl TABS	62	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	36
dactinomycin	25	DEPO-ESTRADIOL	45		
		DEPO-MEDROL SUSP	36		
		DEPO-SUBQ PROVERA 104 SUSY SC	35		
		desipramine hcl TABS	14		
		desloratadine TABS	18		
		desloratadine TBDP 2.5 MG	18		

dexamethasone SOLN	36	EX	39	diltiazem hcl coated beads CP24 180 MG, 240 MG	32
dexamethasone TABS 0.5 MG, 0.75 MG	36	diclofenac sodium (ophth)	59	diltiazem hcl CP12	32
dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	36	diclofenac sodium (topical) GEL EX	39	diltiazem hcl CP24	32
dexchlorpheniramine maleate SOLN	18	diclofenac sodium TB24	4	diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	32
dexlansoprazole	64	diclofenac sodium TBEC	4	diltiazem hcl extended release beads 420 MG	32
dexmethylphenidate hcl CP24	1	diclofenac w/ misoprostol TBEC	4	diltiazem hcl SOLN 50 MG/10ML	32
dexmethylphenidate hcl TABS	2	dicloxacillin sodium	60	DILTIAZEM HCL SOLR	32
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicyclomine hcl CAPS	63	diltiazem hcl TABS	32
dextroamphetamine sulfate CP24 5 MG	1	dicyclomine hcl SOLN OR	63	diltiazem hcl TB24	32
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	1	dicyclomine hcl TABS	63	dimethyl fumarate CDPK	61
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	DIFFERIN LOTN	37	dimethyl fumarate CPDR	61
dextrose in lactated ringers	54	DIFICID TABS	50	DIPENTUM	46
DIACOMIT CAPS 250 MG	11	diflorasone diacetate CREA	40	diphenhydramine hcl CAPS 50 MG 18	18
DIACOMIT CAPS 500 MG	11	diflorasone diacetate OINT	40	diphenhydramine hcl ELIX 12.5 MG/5ML	18
DIACOMIT PACK 250 MG	11	diflunisal TABS	5	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	18
DIACOMIT PACK 500 MG	11	difluprednate	58	diphenhydramine hcl SOLN 50 MG/ML	18
diazepam (anticonvulsant) GEL	11	digoxin SOLN OR 0.05 MG/ML	33	diphenoxylate w/ atropine LIQD	16
diazepam CONC	8	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG	33	diphenoxylate w/ atropine TABS	16
diazepam SOLN OR 5 MG/5ML	8	dihydroergotamine mesylate SOLN IJ 1 MG/ML	53	DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	63
diazepam TABS	8	dihydroergotamine mesylate SOLN NA 4 MG/ML	53	dipyridamole	48
diazoxide	15	DILANTIN (phenytoin sodium extended)	12	disopyramide phosphate CAPS	8
dichlorphenamide	43	DILANTIN	12	disulfiram	60
diclofenac epolamine PTCH EX	38	DILANTIN INFATABS CHEW (phenytoin)	12	DIURIL SUSP	43
diclofenac potassium TABS 50 MG	4	DILANTIN-125 SUSP (phenytoin)	12		
diclofenac sodium (actinic keratoses)		diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	32		

divalproex sodium TB24	12	doxycycline (monohydrate) CAPS 50 MG, 100 MG	63	DUREX EXTRA SENSITIVE THIN MISC	50
divalproex sodium TBEC	12	doxycycline (monohydrate) CAPS 75 MG	63	DUREX TROPICAL MISC	50
docetaxel CONC 20 MG/ML	27	doxycycline (monohydrate) TABS 100 MG	63	dutasteride	47
docetaxel SOLN 20 MG/2ML	27	doxycycline (monohydrate) TABS 50 MG, 75 MG	63	dutasteride-tamsulosin hcl	47
docusate calcium	50	doxycycline hyclate CAPS	63	econazole nitrate CREA	38
docusate sodium CAPS 100 MG ..	50	doxycycline hyclate SOLR	63	EDARBI	20
docusate sodium CAPS 250 MG ..	50	doxycycline hyclate TABS 20 MG, 100 MG	63	EDURANT	30
dofetilide	8	doxylamine-pyridoxine TBEC	17	efavirenz CAPS 200 MG	30
donepezil hydrochloride TABS 10 MG	61	dronabinol CAPS	17	efavirenz CAPS 50 MG	30
donepezil hydrochloride TABS 5 MG, 23 MG	61	drospirenone-ethinyl estradiol	34	efavirenz TABS	30
donepezil hydrochloride TBDP 10 MG	61	drospirenone-ethinyl estradiol-levomefolate calcium	34	efavirenz-emtricitabine-tenofovir disoproxil fumarate	30
donepezil hydrochloride TBDP 5 MG 61		DROXIA CAPS	48	efavirenz-lamivudine-tenofovir disoproxil fumarate	30
DOPTELET	48	DUAVEE	45	EGRIFTA 2 MG	44
dorzolamide hcl	59	DULERA	9	EGRIFTA SV	44
dorzolamide hcl-timolol maleate ..	58	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	14	ELAPRASE	45
DOVATO	30	duloxetine hcl CPEP 40 MG	14	electrolyte-148	54
doxazosin mesylate	20	DUPIXENT SOAJ SC 200 MG/1.14ML	41	electrolyte-a	54
doxepin hcl (antipruritic)	39	DUPIXENT SOAJ SC 300 MG/2ML 41		ELESTRIN GEL	45
doxepin hcl (sleep)	49	DUPIXENT SOSY 100 MG/0.67ML 41		eletriptan hydrobromide	53
doxepin hcl CAPS	14	DUPIXENT SOSY 200 MG/1.14ML 41		ELIGARD KIT SC 7.5 MG	24
doxepin hcl CONC	14	DUPIXENT SOSY 300 MG/2ML ..	41	ELIGARD SC 22.5 MG, 30 MG, 45 MG	24
doxercalciferol CAPS	45	DUREX EXTRA SENSITIVE THIN DEVI	50	ELIQUIS STARTER PACK TBPK ..	10
doxercalciferol SOLN	45			ELIQUIS TABS	10
doxorubicin hcl liposomal IV 2 MG/ML	25			ELLA	35
doxorubicin hcl SOLN	25			ELMIRON CAPS	47
doxorubicin hcl SOLR 10 MG, 50 MG	25			ELOCTATE	48
				EMCYT	24

EMFLAZA SUSP (deflazacort) .....36	MG/0.4ML .....10	eribulin mesylate 27
EMGALITY SOAJ .....53	enoxaparin sodium SOSY 60 MG/0.6ML .....10	ERIVEDGE .....24
EMGALITY SOSY 100 MG/ML ....53	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML 10	ERLEADA 240 MG 24
EMGALITY SOSY 120 MG/ML ....53	ENSPRYNG .....55	ERLEADA 60 MG .....24
EMSAM .....13	entacapone .....28	erlotinib hcl 24
emtricitabine CAPS .....30	entecavir TABS 31	ERTACZO .....38
emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG .....30	EPIDIOLEX .....11	ertapenem sodium IJ 21
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG .....30	epinastine hcl (ophth) 59	erythromycin (acne aid) PADS 37
EMTRIVA SOLN .....30	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML .....68	erythromycin (acne aid) SOLN 37
EMVERM CHEW .....7	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....68	erythromycin (ophth) 58
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20	EPIVIR HBV SOLN 31	erythromycin base CPEP .....50
enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20	eplerenone 21	erythromycin base TABS 50
enalapril maleate TABS .....19	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....48	erythromycin base TBEC 50
ENBREL MINI SOCT 4	epoprostenol sodium .....33	erythromycin ethylsuccinate SUSR 50
ENBREL SOLN 4	EQL PRENATAL FORMULA TABS 56	erythromycin ethylsuccinate TABS 50
ENBREL SOSY 25 MG/0.5ML .....4	EQUETRO 100 MG .....28	escitalopram oxalate SOLN .....13
ENBREL SOSY 50 MG/ML 4	EQUETRO 200 MG .....28	escitalopram oxalate TABS 10 MG 13
ENBREL SURECLICK SOAJ .....4	EQUETRO 300 MG .....28	escitalopram oxalate TABS 20 MG 13
ENGERIX-B SUSP 20 MCG/ML ...65	ERAXIS .....17	escitalopram oxalate TABS 5 MG . 13
ENGERIX-B SUSY .....65	ERBITUX .....24	esomeprazole magnesium CPDR 20 MG 64
enoxaparin sodium SOLN IJ 300 MG/3ML .....10	ergocalciferol CAPS .....68	esomeprazole magnesium CPDR 40 MG 64
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML 10	ergocalciferol SOLN OR .....68	esomeprazole magnesium TBEC .64
enoxaparin sodium SOSY 30 MG/0.3ML .....10	ergoloid mesylates TABS .....62	ESPEROCT 48
enoxaparin sodium SOSY 40	ERGOMAR SUBL .....53	estazolam 49
	ergotamine w/ caffeine TABS .....53	esterified estrogens & methyltestosterone .....45
		estradiol & norethindrone acetate

TABS	45	0.25 MG, 0.5 MG, 0.75 MG	55	felodipine	32
estradiol GEL 0.06 %	45	everolimus (immunosuppressant) 1		FEMCAP DEVI	51
estradiol GEL 0.25 MG/0.25GM, 0.5		MG	55	FEMRING	68
MG/0.5GM, 0.75 MG/0.75GM, 1		everolimus TABS	26	fenofibrate micronized 43 MG, 130	
MG/GM, 1.25 MG/1.25GM	45	EVOTAZ	30	MG	19
estradiol PTTW	45	exemestane	24	fenofibrate micronized 67 MG, 134	
estradiol PTWK	45	ezetimibe	19	MG, 200 MG	19
estradiol TABS	45	ezetimibe-simvastatin	18	fenofibrate TABS 48 MG, 54 MG, 145	
estradiol vaginal CREA	68	famciclovir 125 MG, 250 MG	31	MG, 160 MG	19
estradiol vaginal TABS	68	famciclovir 500 MG	31	fenoprofen calcium TABS	4
estradiol valerate	45	famotidine in nacl SOLN	64	FENSOLVI SC	44
ESTRING RING	68	famotidine SOLN 20 MG/2ML	64	fentanyl citrate LPOP	5
ESTROGEL GEL (estradiol)	46	famotidine SOLN 40 MG/4ML, 200		fentanyl PT72 12 MCG/HR, 25	
eszopiclone	49	MG/20ML	64	MCG/HR, 50 MCG/HR, 75 MCG/HR,	
ethacrynic acid	43	famotidine SUSR	64	100 MCG/HR	5
ethambutol hcl TABS	23	famotidine TABS 20 MG, 40 MG ..	64	ferrous fumarate-folic acid	49
ethosuximide CAPS	12	FANAPT	29	ferrous sulfate SOLN 15 MG/ML ..	49
ethosuximide SOLN	12	FANAPT TITRATION PACK	29	ferrous sulfate TABS 65 MG, 325 MG	
ethynodiol diacet & eth estrad	34	FANTASY LUBRICATED MISC ...	50	ferrous sulfate TBEC 325 MG	49
etodolac CAPS	4	FANTASY		fesoterodine fumarate	64
etodolac TABS	4	LUBRICATED/SPERMICIDE MISC		FETZIMA CP24	14
etonogestrel-ethinyl estradiol	35	50		FETZIMA TITRATION PACK C4PK	
ETOPOPHOS	27	FARXIGA (dapagliflozin propanediol)		14	
etoposide CAPS	27	.....	16	finasteride	47
etoposide SOLN 1 GM/50ML, 100		FARXIGA	16	fingolimod hcl	61
MG/5ML, 500 MG/25ML	27	FASENRA PEN SOAJ	8	FIRDAPSE	22
etravirine 100 MG	30	FASENRA SOSY 30 MG/ML	8	FIRMAGON	24
etravirine 200 MG	30	FC2 FEMALE CONDOM	51	flavoxate hcl	65
EUCRISA	42	febuxostat	47	flecainide acetate	8
EVAMIST SOLN	46	felbamate SUSP	12	floxuridine	23
everolimus (immunosuppressant)		felbamate TABS 400 MG	12	FLUAD 2024-2025	65
		felbamate TABS 600 MG	12		

FLUAD QUADRIVALENT 2022-2023.....65	2024 SUSY .....66	fluphenazine hcl CONC .....29
FLUAD QUADRIVALENT 2023-2024.....65	FLUMIST NASAL VACCINE 2024- 2025 .....66	fluphenazine hcl ELIX .....29
FLUARIX 2024-2025 SUSY .....65	FLUMIST QUADRIVALENT .....66	fluphenazine hcl SOLN .....29
FLUARIX QUADRIVALENT 2022- 2023 SUSY .....65	flunisolide (nasal) 0.025 %57	fluphenazine hcl TABS .....29
FLUARIX QUADRIVALENT 2023- 2024 SUSY .....66	fluocinolone acetonide (otic) .....59	flurandrenolide CREA .....41
FLUBLOK 2024-2025 SOSY .....66	fluocinolone acetonide CREA 0.01 % 40	flurandrenolide LOTN .....41
FLUBLOK QUADRIVALENT 2022- 2023 .....66	fluocinolone acetonide CREA 0.025 %40	flurazepam hcl .....49
FLUBLOK QUADRIVALENT 2023- 2024 .....66	fluocinolone acetonide OIL .....40	flurbiprofen sodium .....59
FLUCELVAX 2024-2025 SUSP ...66	fluocinolone acetonide OINT .....40	flurbiprofen TABS .....4
FLUCELVAX 2024-2025 SUSY ...66	fluocinolone acetonide SOLN .....41	flutamide .....25
FLUCELVAX QUADRIVALENT 2022-2023 SUSP .....66	fluocinolone acetonide SOLN .....41	fluticasone furoate-vilanterol .....9
FLUCELVAX QUADRIVALENT 2022-2023 SUSY .....66	fluocinonide CREA 0.05 %41	fluticasone propionate (inhalation) AEPB .....9
FLUCELVAX QUADRIVALENT 2023-2024 SUSP .....66	fluocinonide CREA 0.1 %41	fluticasone propionate (nasal) SUSP . 57
FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....66	fluocinonide emulsified base .....41	fluticasone propionate CREA 0.05 % 41
FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....66	fluocinonide GEL .....41	fluticasone propionate hfa .....9
fluconazole SUSR .....18	fluocinonide OINT .....41	fluticasone propionate LOTN .....41
fluconazole TABS .....18	fluocinonide SOLN .....41	fluticasone propionate OINT .....41
flucytosine .....17	fluorometholone (ophth) SUSP ...58	fluticasone-salmeterol AEPB .....10
fludarabine phosphate SOLN .....23	fluorouracil (topical) CREA 5 % ...39	fluticasone-salmeterol AERO .....10
fludarabine phosphate SOLR .....23	fluorouracil (topical) SOLN .....39	fluvastatin sodium CAPS 20 MG ...19
fludrocortisone acetate TABS .....36	fluorouracil 500 MG/10ML .....23	fluvastatin sodium CAPS 40 MG ...19
FLULAVAL 2024-2025 SUSY .....66	fluoxetine hcl CAPS 10 MG .....13	fluvoxamine maleate TABS 100 MG . 13
FLULAVAL QUADRIVALENT 2022- 2023 SUSY .....66	fluoxetine hcl CAPS 20 MG .....13	fluvoxamine maleate TABS 25 MG, 50 MG .....13
FLULAVAL QUADRIVALENT 2023- 2024 SUSY .....66	fluoxetine hcl CAPS 40 MG .....13	FLUZONE 2024-2025 SUSP .....66
	fluoxetine hcl CPDR .....13	FLUZONE 2024-2025 SUSY .....66
	fluoxetine hcl SOLN .....13	FLUZONE HIGH-DOSE 2024-2025 SUSY .....66
	fluoxetine hcl TABS 10 MG, 60 MG 13	
	fluoxetine hcl TABS 20 MG .....13	

FLUZONE HIGH-DOSE PF 2022-2023	66	FRAGMIN SOSY	10	gabapentin CAPS	11
FLUZONE HIGH-DOSE PF 2023-2024	66	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	52	gabapentin SOLN	11
FLUZONE QUADRIVALENT 2022-2023 SUSP	66	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	52	gabapentin TABS 600 MG, 800 MG 11	
FLUZONE QUADRIVALENT 2022-2023 SUSY	66	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide CP24 ..	61
FLUZONE QUADRIVALENT 2023-2024 SUSP	66	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide SOLN ..	61
FLUZONE QUADRIVALENT 2023-2024 SUSY	66	FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide TABS ..	61
FML FORTE SUSP	58	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60
FML OINT	58	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD LIQUID 30 GM/300ML	59
folic acid TABS	48	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	60
fondaparinux sodium 10 MG/0.8ML 10		FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60
fondaparinux sodium 2.5 MG/0.5ML 10		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	52	GAMUNEX-C	60
fondaparinux sodium 5 MG/0.4ML 10		frovatriptan succinate	53	ganciclovir sodium SOLR	31
fondaparinux sodium 7.5 MG/0.6ML 10		fulvestrant SOSY	25	ganirelix acetate	44
FORA GTEL BLOOD KETONE TEST STRIPS	42	furosemide SOLN OR 10 MG/ML, 40 MG/5ML	43	GARDASIL 9 SUSP	66
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..	42	furosemide TABS	43	GARDASIL 9 SUSY	67
formoterol fumarate NEBU	10	FUZEON SOLR	30	gatifloxacin (ophth)	58
FOSAMAX PLUS D	44	FYCOMPA TABS 2 MG	11	gefitinib	24
fosamprenavir calcium TABS	30	FYCOMPA TABS 4 MG	11	gemcitabine hcl SOLR 2 GM, 200 MG	23
fosfomycin tromethamine	22	FYCOMPA TABS 6 MG	11	gemfibrozil TABS	19
fosinopril sodium & hydrochlorothiazide	20	FYCOMPA TABS 8 MG, 10 MG, 12 MG	11	GENOTROPIN CART SC	44
fosinopril sodium	19			GENOTROPIN MINIQUICK PRSY ..	44
fosphenytoin sodium	12			gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %	2
				gentamicin sulfate (ophth) OINT ..	58

gentamicin sulfate (ophth) SOLN ..58	glycopyrrolate TABS 1 MG 64	20000 UNIT/ML 11
gentamicin sulfate (topical) CREA .38	glycopyrrolate TABS 2 MG 63	HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11
gentamicin sulfate (topical) OINT ..38	GLYXAMBI 15	HEPLISAV-B SOSY 67
gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML 2	GNP PRENATAL TABS 56	HIBERIX SOLR IJ 65
GENVOYA 30	GOHIBIC 48	HUMATROPE CART IJ 44
GILOTRIF 24	GOJJI BLOOD KETONE TEST STRIPS 42	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML 3
glatiramer acetate SOSY 20 MG/ML . 61	granisetron hcl SOLN IV 1 MG/ML 17	HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML 3
glatiramer acetate SOSY 40 MG/ML . 61	granisetron hcl TABS 17	HUMIRA PEN AJKT SC 80 MG/0.8ML 3
GLEOSTINE 10 MG 23	GRASTEK SUBL 2	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML 3
GLEOSTINE 40 MG, 100 MG 23	griseofulvin microsize SUSP 17	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML 3
glimepiride 1 MG, 2 MG 16	griseofulvin microsize TABS 17	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML 3
glimepiride 4 MG 16	griseofulvin ultramicrosize 17	HUMIRA PSKT 3
glipizide TABS 5 MG, 10 MG 16	guanfacine hcl (adhd) 1	HUMULIN R U-500 (CONCENTRATED) SOLN SC 16
glipizide TB24 16	guanfacine hcl 20	HUMULIN R U-500 KWIKPEN SOPN SC 16
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG 14	GYNAZOLE-1 68	HYCAMTIN CAPS 28
glipizide-metformin hcl 500 MG-5 MG 15	HAEGARDA SOLR SC 48	hydralazine hcl SOLN 21
GLUCAGEN DIAGNOSTIC 42	HALAVEN (eribulin mesylate) 27	hydralazine hcl TABS 21
glucagon (rdna) 15	halcinonide CREA 41	hydrochlorothiazide CAPS 43
glyburide micronized 1.5 MG, 3 MG, 6 MG 16	halobetasol propionate CREA 41	hydrochlorothiazide TABS 12.5 MG 43
glyburide TABS 16	halobetasol propionate OINT 41	hydrochlorothiazide TABS 25 MG, 50 MG 43
glyburide-metformin 250 MG-1.25 MG 15	HALOG OINT 41	
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG 15	haloperidol decanoate 29	
glycine (gu irrigant) SOLN 1.5 % .. 47	haloperidol lactate CONC 29	
glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML 63	haloperidol lactate SOLN 29	
	haloperidol TABS 29	
	HAVRIX 67	
	HEALON PRO SOSY 59	
	HEMANGEOL SOLN OR 32	
	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML,	

hydrocodone bitartrate CP12	5	hydrocortisone vaginal	68	icatibant acetate SOLN	48
hydrocodone bitartrate T24A	5	hydrocortisone valerate CREA	41	icatibant acetate SOSY	48
hydrocodone polistirex- chlorpheniramine polistirex SUER	36	hydrocortisone valerate OINT	41	ICLUSIG	26
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	6	hydrocortisone w/acetic acid	59	icosapent ethyl 1 GM	18
hydrocodone-acetaminophen SOLN	6	hydromorphone hcl LIQD	5	idarubicin hcl 20 MG/20ML	25
6		hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML	5	idarubicin hcl 5 MG/5ML, 10 MG/10ML	25
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	6	hydromorphone hcl TABS	5	IDELVION	48
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6	hydromorphone hcl TB24 32 MG	5	ifosfamide SOLN 1 GM/20ML	23
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	6	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	5	ifosfamide SOLR	23
hydrocodone-ibuprofen 7.5 MG-200 MG	6	hydroxychloroquine sulfate 100 MG 22		imatinib mesylate	26
hydrocortisone (intrarectal)	7	hydroxychloroquine sulfate 200 MG 22		IMBRUVICA CAPS 140 MG	26
hydrocortisone (rectal) EX	7	hydroxychloroquine sulfate 400 MG 22		IMBRUVICA CAPS 70 MG	26
hydrocortisone (topical) CREA 1 %, 2.5 %	41	hydroxyurea	27	IMBRUVICA SUSP	26
hydrocortisone (topical) LOTN 2.5 %	41	hydroxyzine hcl SOLN 50 MG/ML	8	IMBRUVICA TABS	26
hydrocortisone (topical) OINT 1 %, 2.5 %	41	hydroxyzine hcl SYRP	8	imipenem-cilastatin IV	21
hydrocortisone acetate (rectal)	7	hydroxyzine hcl TABS	8	imipramine hcl TABS	14
hydrocortisone butyrate CREA	41	hydroxyzine pamoate CAPS	8	imipramine pamoate	14
hydrocortisone butyrate OINT	41	HYPERSAL NEBU	36	imiquimod 5 %	42
hydrocortisone butyrate SOLN	41	HYQVIA	60	IMPAVIDO	21
hydrocortisone sod succinate 100 MG	36	ibandronate sodium SOLN	44	INCRELEX	44
hydrocortisone TABS	36	ibandronate sodium TABS	44	INCRUSE ELLIPTA	9
		IBRANCE CAPS	26	indapamide TABS 1.25 MG	43
		IBRANCE TABS	26	indapamide TABS 2.5 MG	43
		ibuprofen SUSP 100 MG/5ML	4	indomethacin CAPS 25 MG, 50 MG	4
		ibuprofen TABS 400 MG, 600 MG	4	indomethacin CPCR	4
		ibuprofen TABS 800 MG	4	INFANRIX	63
				INFLECTRA SOLR	46
				INGREZZA CAPS	61
				INGREZZA CPPK	61

INGREZZA CPSP	61	ISENTRESS CHEW	30	JEVTANA	27
INLYTA	24	ISENTRESS HD TABS	30	JIVI	48
INREBIC	26	ISENTRESS TABS	30	JULUCA	30
INSULIN ASPART FLEXPEN SOPN . 16		ISOLYTE-P/DEXTROSE 5%	54	JYNARQUE TBPK	45
INSULIN ASPART PENFILL SOCT 16		ISOLYTE-S	54	KALYDECO TABS	62
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	16	isoniazid SOLN	23	KAMELEON LUBRICATED MISC .	51
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	16	isoniazid SYRP	23	KANJINTI	24
INSULIN ASPART SOLN IJ	16	isoniazid TABS	23	KCL 0.3%/D5W/NACL 0.9% (potassium chloride in dextrose & sodium chloride)	54
INSULIN DEGLUDEC FLEXTOUCH SOPN	16	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	8	KEPIVANCE 6.25 MG	27
INSULIN DEGLUDEC SOLN	16	isosorbide dinitrate-hydralazine hcl 33		ketoconazole (topical) CREA	38
INSULIN LISPRO SOLN IJ	16	isosorbide mononitrate TABS	8	ketoconazole (topical) SHAM 2 % .	38
INTELENCE 25 MG	30	isosorbide mononitrate TB24	8	ketoconazole	18
IONOSOL-MB/DEXTROSE 5% ..	54	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	37	KETONE STRP	42
IOPIDINE	58	isradipine CAPS	32	KETONE TEST STRIPS STRP	42
IPOL INACTIVATED IPV	67	itraconazole CAPS	18	ketoprofen CAPS 50 MG	4
ipratropium bromide (nasal) 0.03 % 57		itraconazole SOLN	18	ketorolac tromethamine (ophth) ...	59
ipratropium bromide (nasal) 0.06 % 57		ivabradine hcl TABS	34	ketorolac tromethamine TABS	4
ipratropium bromide SOLN 0.02 % .	9	ivermectin (pediculicide)	42	KETOSTIX STRP	42
ipratropium-albuterol SOLN	10	ivermectin	7	ketotifen fumarate (ophth) 0.035 % 59	
irbesartan	20	IXEMPRA KIT 15 MG	27	KEVZARA SOAJ	3
irbesartan-hydrochlorothiazide	20	JAKAFI	26	KEVZARA SOSY	3
irinotecan hcl 40 MG/2ML, 100 MG/5ML	28	JANSSEN COVID-19 VACCINE ..	67	KIMONO COLORS DEVI	51
irrigation solutions, physiological ..	55	JANUMET TABS	15	KIMONO LUBRICATED MISC	51
		JANUMET XR TB24 1000 MG-100 MG	15	KIMONO MAXX/LARGE FLARE MISC	51
		JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	15	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC 51	
		JANUVIA	15	KIMONO PLUS SPERMICIDE	
		JARDIANCE	16		

LUBRICATED MISC	51	labetalol hcl TABS 300 MG	32	LEMTRADA	61
KIMONO PLUS SPERMICIDE/LUBRICATED MISC 51		lacosamide SOLN IV 200 MG/20ML . 11		lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	55
KIMONO PS LUBRICATED MISC .51		lacosamide TABS	11	lenalidomide 20 MG	55
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC 51		lactated ringer's (irrigation)	55	LENVIMA 10 MG DAILY DOSE ...	24
KIMONO SENSATION LUBRICATED MISC	51	lactated ringer's	54	LENVIMA 12MG DAILY DOSE ...	24
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC 51		lactic acid (ammonium lactate) CREA	41	LENVIMA 14 MG DAILY DOSE ...	24
KIMONO SPECIAL DEVI	51	lactic acid (ammonium lactate) LOTN 12 %	41	LENVIMA 18 MG DAILY DOSE ...	24
KINRIX SUSY	63	lactulose (encephalopathy)	46	LENVIMA 20 MG DAILY DOSE ...	24
KISQALI	26	lactulose SOLN	50	LENVIMA 24 MG DAILY DOSE ...	24
KISQALI FEMARA 200 DOSE	25	lamivudine (hbv) TABS	31	LENVIMA 4 MG DAILY DOSE	24
KISQALI FEMARA 400 DOSE	25	lamivudine SOLN	30	LENVIMA 8 MG DAILY DOSE	24
KISQALI FEMARA 600 DOSE	25	lamivudine TABS 150 MG	30	letrozole	25
KOGENATE FS KIT	48	lamivudine TABS 300 MG	30	leucovorin calcium SOLR	27
KOSELUGO	26	lamivudine-zidovudine	30	leucovorin calcium TABS	27
KOVALTRY	48	lamotrigine CHEW 25 MG	12	LEUKERAN	23
KP PRENATAL MULTIVITAMINS TABS	56	lamotrigine CHEW 5 MG	12	LEUKINE SOLR IJ	48
KRINTAFEL	22	lamotrigine TABS	12	leuprolide acetate KIT IJ 1 MG/0.2ML	25
K-Y ME & YOU EXTRA LUBRICATED DEVI	51	lamotrigine TBDP	12	levalbuterol hcl	10
K-Y ME & YOU INTENSE DEVI ...	51	LANOXIN SOLN IJ (digoxin)	33	levalbuterol tartrate	10
KYLEENA	35	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	33	levetiracetam SOLN IV 500 MG/5ML 12	
KYPROLIS	26	lansoprazole CPDR 15 MG	64	levetiracetam TABS 1000 MG	12
labetalol hcl SOLN	32	lansoprazole CPDR 30 MG	64	levetiracetam TABS 250 MG, 750 MG	12
labetalol hcl TABS 100 MG, 200 MG . 32		lanthanum carbonate CHEW	47	levetiracetam TABS 500 MG	12
		lapatinib ditosylate	26	levetiracetam TB24	12
		LASTACFT	59	levobunolol hcl 0.5 %	58
		latanoprost SOLN	59	levocetirizine dihydrochloride SOLN 18	
		leflunomide	4	levocetirizine dihydrochloride TABS	

18	lincomycin hcl	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20
levofloxacin (ophth) 0.5 %	linezolid SUSR	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG	20
levofloxacin in d5w 5 %-500 MG/100ML	linezolid TABS	22	losartan potassium	20
levofloxacin SOLN OR	LINZESS	46	LOTEMAX OINT	58
levofloxacin TABS 250 MG, 750 MG	liothyronine sodium SOLN	63	loteprednol etabonate GEL	58
46	liothyronine sodium TABS	63	loteprednol etabonate SUSP	58
levofloxacin TABS 500 MG	lisdexamfetamine dimesylate CAPS 1	1	lovastatin TABS 10 MG, 20 MG	19
levonorgestrel & eth estradiol TABS	lisdexamfetamine dimesylate CHEW	1	lovastatin TABS 40 MG	19
34	lisinopril & hydrochlorothiazide	20	loxapine succinate	29
levonorgestrel (emergency oc) 1.5 MG	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	19	lubiprostone	46
35	lithium	28	LUCEMYRA (lofexidine hcl)	61
levonorgestrel-eth estradiol (triphasic)	lithium carbonate CAPS	28	luliconazole	38
34	lithium carbonate TABS	28	LUMIZYME	45
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	lithium carbonate TBCR	28	LUPRON DEPOT (1-MONTH) KIT IM	25
35	LO LOESTRIN FE TABS	35	LUPRON DEPOT (3-MONTH) KIT IM	25
levonorgestrel-ethinyl estradiol (continuous)	lofexidine hcl	61	LUPRON DEPOT (4-MONTH) IM	25
35	LOKELMA	55	LUPRON DEPOT (6-MONTH) IM	25
levonorgestrel-ethinyl estradiol-iron	loperamide hcl CAPS	16	LUPRON DEPOT-PED (1-MONTH)	44
35	lopinavir-ritonavir SOLN	30	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	44
levorphanol tartrate TABS 2 MG	lopinavir-ritonavir TABS	30	LUPRON DEPOT-PED (3-MONTH) 30 MG	44
5	loratadine CAPS	18	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	28
levothyroxine sodium TABS	loratadine CHEW	18	lurasidone hcl 80 MG	28
63	loratadine SOLN	18	LYNPARZA TABS	26
LEXIVA SUSP	loratadine TABS	18		
30	loratadine TBDP	18		
lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	lorazepam CONC	8		
50	lorazepam TABS 0.5 MG, 2 MG	8		
lidocaine hcl (mouth-throat) 2 %	lorazepam TABS 1 MG	8		
55	LORBRENA	26		
lidocaine hcl (mouth-throat) 4 %				
55				
lidocaine hcl GEL 2 %				
42				
lidocaine hcl PRSY				
42				
lidocaine hcl SOLN				
42				
lidocaine PTCH 5 %				
42				
lidocaine-prilocaine CREA				
42				
LILETTA 20.1 MCG/DAY				
35				

LYSODREN	25	MEKINIST TABS 2 MG	26	metformin hcl TB24 750 MG	15
mafenide acetate PACK	39	MEKTOVI	26	methadone hcl CONC	5
magnesium sulfate IJ 50 %	54	meloxicam TABS	4	methadone hcl SOLN IJ 10 MG/ML	5
malathion	42	melphalan	23	METHADONE HCL SOLN IJ	5
maraviroc TABS 150 MG	30	melphalan hcl IV	23	methadone hcl SOLN OR 10 MG/5ML	5
maraviroc TABS 300 MG	30	memantine hcl TABS	61	methadone hcl SOLN OR 5 MG/5ML 5	
MARPLAN	13	MENACTRA	65	methadone hcl TABS 10 MG	5
MASONATAL TABS	56	MENEST	46	methadone hcl TABS 5 MG	5
MATULANE	27	MENOSTAR PTWK	46	methadone hcl TABS 5 MG	5
MAXIDEX SUSP OP	58	MENQUADFI	65	methadone hcl TBSO	5
MAXX LUBRICATED MISC	51	MENVEO SOLN	65	methamphetamine hcl	1
MAXX PLUS SPERMICIDE LUBRICATED MISC	51	MENVEO SOLR	65	methazolamide TABS	43
meclizine hcl TABS 12.5 MG	17	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5	methenamine hippurate	22
meclizine hcl TABS 25 MG	17	meperidine hcl SOLN OR 50 MG/5ML	5	methimazole TABS	63
meclofenamate sodium CAPS	4	meperidine hcl TABS 50 MG	5	METHITEST TABS	7
MEDROL TABS	36	meprobamate	8	methocarbamol TABS 500 MG, 750 MG	57
medroxyprogesterone acetate (contraceptive) SUSP IM	35	mercaptopurine TABS	23	METHOTREXATE	3
medroxyprogesterone acetate (contraceptive) SUSY IM	35	meropenem	21	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	23
medroxyprogesterone acetate 10 MG	60	mesalamine CP24	46	methotrexate sodium SOLR	23
medroxyprogesterone acetate 2.5 MG, 5 MG	60	mesalamine CPDR	46	methotrexate sodium TABS 2.5 MG 23	
mefenamic acid CAPS	4	mesalamine ENEM	46	methoxsalen rapid	39
mefloquine hcl	22	mesalamine SUPP	46	methscopolamine bromide	64
megestrol acetate (appetite)	60	mesalamine TBEC 1.2 GM	46	methsuximide	12
megestrol acetate SUSP	25	mesalamine TBEC 800 MG	46	methyldopa TABS	20
megestrol acetate TABS	25	metaxalone 800 MG	57	methylphenidate hcl CHEW 10 MG ..	2
MEKINIST SOLR	26	metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 2.5 MG ..	2
MEKINIST TABS 0.5 MG	26	metformin hcl TABS 500 MG	15	methylphenidate hcl CHEW 5 MG ..	2
		metformin hcl TABS 850 MG	15	methylphenidate hcl CP24 10 MG, 20	
		metformin hcl TB24 500 MG	15		

MG, 40 MG, 60 MG	2	TABS 25 MG-50 MG	20	mirtazapine TBDP 30 MG	13
methylphenidate hcl CP24 30 MG ..	2	metoprolol succinate TB24 200 MG		mirtazapine TBDP 45 MG	13
methylphenidate hcl CP24	2	32		misoprostol	64
methylphenidate hcl CPR	2	metoprolol succinate TB24 25 MG,		mitomycin SOLR IV 20 MG	25
methylphenidate hcl SOLN	2	50 MG, 100 MG	32	mitoxantrone hcl 2 MG/ML	25
methylphenidate hcl TABS 10 MG,		metoprolol tartrate SOLN IV 5		M-M-R II SOLR	67
20 MG	2	MG/5ML	32	M-NATAL PLUS TABS	56
methylphenidate hcl TABS 5 MG ...	2	metoprolol tartrate TABS 25 MG, 50		modafinil 100 MG	2
methylphenidate hcl TB24 18 MG, 27		MG, 100 MG	32	modafinil 200 MG	2
MG	2	metronidazole (topical) CREA	42	MODERNA COVID-19 VACCINE	
methylphenidate hcl TB24 36 MG, 54		metronidazole (topical) GEL 0.75 %		SUSP	67
MG	2	42		MODERNA COVID-19	
methylphenidate hcl TBCR 10 MG,		metronidazole (topical) GEL 1 % ..	42	VACCINE/6MO-11Y/2023-24 SUSP .	
20 MG	2	metronidazole (topical) LOTN	42	67	
methylphenidate hcl TBCR 18 MG,		metronidazole TABS	21	MODERNA COVID-19	
27 MG	2	metronidazole vaginal	68	VACCINE/6MO-11Y/2024-25 SUSY .	
methylphenidate hcl TBCR 36 MG,		mexiletine hcl	8	67	
54 MG	2	micalfungin sodium	17	MODERNA COVID-19	
methylphenidate PTCH	2	miconazole nitrate vaginal SUPP 200		VACCINE/BIVALENT/6MO-5Y ...	67
methylprednisolone acetate SUSP 36		MG	68	MODERNA COVID-19	
methylprednisolone sod succ 40 MG,		midodrine hcl	68	VACCINE/BIVALENT/BA.4/BA.5 .	67
125 MG, 500 MG, 1000 MG	36	miglitol	14	MODERNA COVID-19	
methylprednisolone TABS	36	miglustat	48	VACCINE6MO-5Y SUSP	67
methylprednisolone TBPK	36	minocycline hcl CAPS	63	moexipril hcl	19
metoclopramide hcl SOLN IJ 5		minocycline hcl TABS	63	mometasone furoate (nasal) SUSP	
MG/ML	46	minoxidil 2.5 MG, 10 MG	21	57	
metoclopramide hcl SOLN OR 5		MIRCERA	48	mometasone furoate CREA	41
MG/5ML, 10 MG/10ML	46	MIRENA	35	mometasone furoate OINT	41
metoclopramide hcl TABS	46	mirtazapine TABS 15 MG	13	mometasone furoate SOLN	41
metolazone	43	mirtazapine TABS 30 MG	13	montelukast sodium CHEW	9
metoprolol & hydrochlorothiazide		mirtazapine TABS 7.5 MG, 45 MG	13	montelukast sodium PACK	9
TABS 25 MG-100 MG, 50 MG-100		MG	13	montelukast sodium TABS	9
MG	20	mirtazapine TBDP 15 MG	13	morphine sulfate CP24 10 MG, 20	
metoprolol & hydrochlorothiazide					

MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	5	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
morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	5	naloxone hcl LIQD	17	NEONATAL PLUS TABS	56
morphine sulfate SOLN OR 10 MG/5ML	5	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	17	NEONATAL PRENATAL VITAMIN TABS	56
morphine sulfate SOLN OR 20 MG/5ML	5	naltrexone hcl	17	NEONATAL VITAMIN TABS	56
morphine sulfate TABS	5	naproxen sodium TABS 550 MG ...	4	neostigmine methylsulfate SOSY ..	23
morphine sulfate TBCR	6	naproxen SUSP	4	NEO-SYNALAR	38
MOTOFEN	16	naproxen TABS	4	NEUROPRO	28
MOVANTIK	47	naproxen TBEC 500 MG	4	NEVANAC	59
moxifloxacin hcl (ophth) SOLN OP	58	naratriptan hcl	53	nevirapine SUSP	30
moxifloxacin hcl in sodium chloride 46		NATAACYN	58	nevirapine TABS	30
moxifloxacin hcl TABS	46	NATAZIA	35	nevirapine TB24 100 MG	30
MULPLETA	48	nateglinide	16	nevirapine TB24 400 MG	30
MULTI PRENATAL TABS	56	NAYZILAM	11	NEXIUM 24HR TBEC (esomeprazole magnesium)	64
mupirocin OINT	38	nebivolol hcl 2.5 MG, 5 MG, 10 MG 32		NEXPLANON	35
MVASI	24	nebivolol hcl 20 MG	32	NEXTSTELLIS	35
MYALEPT	45	NEBUSAL NEBU	36	niacin (antihyperlipidemic) TBCR ..	19
mycophenolate mofetil CAPS	55	nefazodone hcl	14	niacin CPCR 250 MG, 500 MG	69
mycophenolate mofetil TABS	55	nelarabine	23	niacin TABS	69
mycophenolate sodium	55	neomycin sulfate TABS	2	niacin TBCR	69
MYLERAN TABS	23	neomycin-bacitracin zn-polymyxin	58	NIACIN TR TBCR	69
nabumetone	4	neomycin-polymy-dexameth OINT	58	niacinamide TABS 100 MG	69
nadolol TABS 20 MG	32	neomycin-polymy-dexameth SUSP	59	niacinamide TABS 500 MG	69
nadolol TABS 40 MG	32	neomycin-polymyxin-hc (ophth) ..	59	nicardipine hcl CAPS	32
nadolol TABS 80 MG	32	neomycin-polymyxin-hc (otic) SOLN .	59	nicardipine hcl SOLN	32
nafcillin sodium IV 10 GM	60	neomycin-polymyxin-hc (otic) SUSP .	59	nicotine MISC XX	62
naftifine hcl CREA 1 %	38	NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10		nicotine polacrilex GUM	62
naftifine hcl CREA 2 %	38			nicotine polacrilex LOZG	62

nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	62	NORDITROPIN FLEXPLO SOPN 30 MG/3ML	44	NORVIR PACK	30
NICOTINE TRANSDERMAL SYSTEM KIT	62	NORDITROPIN FLEXPLO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	44	NORVIR SOLN	30
NICOTROL INHALER INHA	62	norelgestromin-ethinyl estradiol ...	35	NOVA MAX PLUS KETONE TESTSTRIPS	42
NICOTROL NS SOLN	62	norethin acet & estrad-fe CAPS ...	35	NOVAVAX COVID-19 VACCINE SUSP	67
nifedipine CAPS 10 MG	32	norethin acet & estrad-fe CHEW ...	35	NOVAVAX COVID-19 VACCINE/2023-24 SUSP	67
nifedipine CAPS 20 MG	32	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	35	NOVAVAX COVID-19 VACCINE/2024-25 SUSY	67
nifedipine TB24 30 MG	32	norethindrone & eth estradiol	35	NOVOEIGHT	48
nifedipine TB24 60 MG	32	norethindrone & ethinyl estradiol-fe 35		NOVOLIN 70/30 FLEXPEN SUPN	16
nifedipine TB24 90 MG	32	norethindrone (contraceptive)	35	NOVOLIN 70/30 SUSP	16
nifedipine TB24	32	norethindrone acet & eth estra TABS 35		NOVOLIN N FLEXPEN SUPN	16
nilutamide	25	norethindrone acetate TABS	60	NOVOLIN N SUSP	16
nimodipine CAPS	32	norethindrone acetate-ethinyl estradiol	45	NOVOLIN R FLEXPEN SOPN IJ ..	16
NINLARO	26	norethindrone acetate-ethinyl estradiol-fe	35	NOVOLIN R SOLN IJ	16
NIPENT	27	norethindrone-eth estradiol (triphasic)	35	NP THYROID 120 TABS	63
nisoldipine	32	norgestimate-ethinyl estradiol (triphasic)	35	NP THYROID 15 TABS	63
nitazoxanide TABS	21	norgestimate-ethinyl estradiol ...	35	NP THYROID 30 TABS	63
nitisinone CAPS	45	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	35	NP THYROID 60 TABS	63
NITRO-BID OINT	8	NORMOSOL-M/D5W	54	NP THYROID 90 TABS	63
nitrofurantoin	22	NORMOSOL-R	54	NUBEQA	25
nitrofurantoin macrocrystal 50 MG, 100 MG	22	nortriptyline hcl CAPS	14	NUCALA SOAJ	8
nitrofurantoin monohyd macro	22	nortriptyline hcl SOLN	14	NUCALA SOLR	9
nitroglycerin (intra-anal)	7	NORVIR CAPS	30	NUCALA SOSY 100 MG/ML	9
nitroglycerin CPCR	8			NUCALA SOSY 40 MG/0.4ML	9
nitroglycerin PT24	8			NUEDEXTA	62
NITROGLYCERIN SOLN IV	8			NULOJIX	55
nitroglycerin SUBL	8			nystatin (mouth-throat)	55
NIVA-PLUS TABS	56			nystatin (topical) CREA	38
nizatidine CAPS	64				

nystatin (topical) OINT	38	omeprazole magnesium CPDR	64	oseltamivir phosphate CAPS	31
nystatin (topical) POWD EX	38	omeprazole TBEC	64	oseltamivir phosphate SUSR	31
nystatin TABS	18	omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	64	OSMOPREP	50
nystatin-triamcinolone CREA	38	OMNIFLEX DIAPHRAGM	51	OSPHENA	44
nystatin-triamcinolone OINT	38	ONCASPAR	27	OTEZLA TABS	4
NYVEPRIA	48	ondansetron hcl SOLN IJ 4 MG/2ML 17		OTEZLA TBPK	4
octreotide acetate SOLN	45	ondansetron hcl SOLN OR 4 MG/5ML	17	oxacillin sodium IV 10 GM	60
ODEFSEY	30	ondansetron hcl SOSY	17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	23
ODOMZO	24	ondansetron hcl TABS 24 MG	17	oxandrolone	7
OFEV	62	ondansetron hcl TABS 4 MG	17	oxaprozin TABS	4
ofloxacin (ophth)	58	ondansetron hcl TABS 8 MG	17	oxazepam CAPS	8
ofloxacin (otic)	59	ondansetron TBDP 4 MG	17	oxcarbazepine SUSP	12
ofloxacin 300 MG, 400 MG	46	ondansetron TBDP 8 MG	17	oxcarbazepine TABS 150 MG, 300 MG	12
OGIVRI	24	ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	56	oxcarbazepine TABS 600 MG	12
olanzapine SOLR	29	ONE VITE WOMENS PRENATALVITAMIN TABS	56	oxiconazole nitrate CREA	38
olanzapine TABS 2.5 MG, 5 MG	29	ONETOUCH DELICA SAFETY LANCING DEVICE	52	OXISTAT LOTN	38
olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	29	ONETOUCH DELICA SAFETY LANCING DEVICE 30G	52	oxybutynin chloride SOLN	64
olanzapine TBDP 20 MG	29	OPILL	35	oxybutynin chloride TABS 5 MG	64
olanzapine TBDP 5 MG, 10 MG, 15 MG	29	OPSUMIT	33	oxybutynin chloride TB24	64
olmesartan medoxomil	20	ORENITRAM TBCR	33	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6
olmesartan medoxomil-amlodipine- hydrochlorothiazide	20	ORILISSA	44	oxycodone hcl TABS	6
olmesartan medoxomil- hydrochlorothiazide	20	ORKAMBI PACK	62	oxycodone hcl TABS	6
olopatadine hcl (nasal)	57	ORKAMBI TABS	62	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6
olopatadine hcl 0.1 %	59	ORLADEYO	48	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	6
olopatadine hcl 0.2 %	59	orphenadrine citrate TB12	57	oxymorphone hcl TABS	6
omega-3-acid ethyl esters	18			oxymorphone hcl TB12 40 MG	6
omeprazole CPDR	64			oxymorphone hcl TB12 5 MG, 7.5	

MG, 10 MG, 15 MG, 20 MG, 30 MG 6	PEDIARIX SUSY 63	PERJETA 24
OZEMPIC SOPN 2 MG/1.5ML 15	pediatric multivitamins w/fl CHEW .56	permethrin CREA 42
OZEMPIC SOPN 15	PEDVAX HIB SUSP 65	permethrin LIQD EX 42
paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML 27	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid 50	perphenazine TABS 29
paclitaxel protein-bound particles .28	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM 50	perphenazine-amitriptyline 61
paliperidone 1.5 MG, 3 MG, 9 MG .29		PERSERIS PRSY 29
paliperidone 6 MG 29	peg 3350-potassium chloride-sod bicarbonate-sod chloride 50	PFIZER-BIONTECH COVID- 19VACCINE SUSP 67
palonosetron hcl SOLN 17	PEGASYS SOLN 31	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y SUSP 67
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML 44	PEGASYS SOSY 31	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2023-24 SUSP 67
PAMIDRONATE DISODIUM SOLN 44	PEMAZYRE 26	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2024-25 SUSP 67
PANRETIN 39	pemetrexed disodium SOLR 500 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y SUSP 67
pantoprazole sodium TBEC 20 MG 64	penciclovir 39	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP 67
pantoprazole sodium TBEC 40 MG 64	penicillamine CAPS 55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP 67
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A 35	penicillamine TABS 55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP 67
paricalcitol CAPS 45	penicillin g potassium 5000000 UNIT 60	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP 67
paricalcitol SOLN 45	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML 60	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP .. 67
paroxetine hcl SUSP 13	PENICILLIN G PROCAINE 60	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/5-11Y ... 67
paroxetine hcl TABS 10 MG 13	penicillin g sodium 60	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/6M-4Y ... 67
paroxetine hcl TABS 20 MG 13	penicillin v potassium SOLR 60	PFIZER-BIONTECH COVID- 19VACCINE/BIVALENT/BA.4/BA.5 67
paroxetine hcl TABS 30 MG 13	penicillin v potassium TABS 60	PHEBURANE PLLT 45
paroxetine hcl TABS 40 MG 13	PENTACEL 63	phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG 47
paroxetine hcl TB24 12.5 MG 14	pentazocine w/ naloxone hcl 7	
paroxetine hcl TB24 25 MG, 37.5 MG 14	pentoxifylline 48	
PASER PACK 23	perindopril erbumine 2 MG, 8 MG .19	
pazopanib hcl 26	perindopril erbumine 4 MG 19	

phendimetrazine tartrate TABS	1	pirfenidone TABS 534 MG	62	20 MEQ/L	54
phenelzine sulfate	13	piroxicam CAPS	4	potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	54
phenobarbital ELIX	49	PLASMA-LYTE A (electrolyte-a) ..	54	potassium chloride microencapsulated crystals er	54
phenobarbital TABS	49	PLASMA-LYTE-148 (electrolyte-148)	54	potassium chloride PACK OR 20 MEQ	54
phenoxybenzamine hcl	19	PLEGRIDY SOAJ SC 125 MCG/0.5ML	61	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 54	
phentermine hcl CAPS	1	PLEGRIDY SOSY SC	61	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	54
phenytoin CHEW	12	PLEGRIDY STARTER PACK SOAJ SC	61	potassium chloride TBCR	55
phenytoin sodium extended 100 MG, 200 MG, 300 MG	12	PLEGRIDY STARTER PACK SOSY SC	61	POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	54
phenytoin sodium SOLN	12	plerixafor	49	POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	54
phenytoin SUSP	12	PNEUMOVAX 23 IJ 25 MCG/0.5ML . 65		potassium citrate (alkalinizer) TBCR . 47	
PHEXXI	68	PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	65	potassium phosphates 236 MG/ML-224 MG/ML	54
PHOTOFRIN	27	podofilox SOLN	42	PR BENZOYL PEROXIDE WASH LIQD	37
PIFELTRO	30	polymyxin b sulfate SOLR	22	pralatrexate 20 MG/ML	24
pilocarpine hcl (oral)	56	polymyxin b-trimethoprim	58	pramipexole dihydrochloride TABS 0.125 MG	28
pilocarpine hcl SOLN 1 %, 2 %, 4 % . 58		POMALYST	25	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	28
pimecrolimus	42	posaconazole SUSP	18	prasugrel hcl	48
pimozide	62	potassium acetate SOLN 2 MEQ/ML . 54		pravastatin sodium	19
pindolol TABS	32	potassium bicarbonate TBEF	54	praziquantel	7
pioglitazone hcl	16	potassium chloride CPCR	54		
pioglitazone hcl-glimepiride	15	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	54		
pioglitazone hcl-metformin hcl TABS . 15		potassium chloride in dextrose 5 %-			
piperacillin sodium-tazobactam sodium	60				
PIQRAY 200MG DAILY DOSE ...	26				
PIQRAY 250MG DAILY DOSE ...	26				
PIQRAY 300MG DAILY DOSE ...	26				
pirfenidone CAPS	62				
pirfenidone TABS 267 MG, 801 MG 62					

prazosin hcl CAPS	20	PREMARIN TABS	46	PRIORIX SUSR	67
PRECISION XTRA	42	PREMPHASE	45	PROAIR DIGIHALER	10
PRED MILD	59	PREMPRO	45	PROAIR RESPICLICK AEPB	10
PRED-G SUSP	59	PRENATAL MULTIVITAMIN TABS		probenecid	47
prednicarbate OINT	41	56		procainamide hcl SOLN 500 MG/ML .	
prednisolone acetate (ophth)	59	PRENATAL ONE DAILY TABS ...	56	8	
PREDNISOLONE SODIUM		PRENATAL PLUS TABS	56	prochlorperazine	29
PHOSPHATE	59	PRENATAL PLUS VITAMIN		prochlorperazine maleate TABS ...	29
prednisolone sodium phosphate		ANDMINERAL TABS	56	PROCRIT 2000 UNIT/ML, 3000	
SOLN 5 MG/5ML, 6.7 MG/5ML, 10		PRENATAL TABS	56	UNIT/ML, 4000 UNIT/ML, 10000	
MG/5ML, 15 MG/5ML, 25 MG/5ML		PRENATAL VITAMIN & MINERAL		UNIT/ML, 20000 UNIT/ML	49
36		TABS	56	PROCRIT 40000 UNIT/ML	49
prednisolone sodium phosphate		PRENATAL VITAMIN TABS	56	progesterone CAPS	60
TBDP	36	PRENATAL VITAMIN/IRON TABS	56	PROGRAF PACK	55
prednisolone SOLN	36	PRENATAL VITAMINS PLUS LOW		PROGRAF SOLN	55
prednisolone TABS	36	IRON TABS	56	PROLASTIN-C SOLN	62
prednisone SOLN	36	PRENATAL VITAMINS TABS 100		PROLEUKIN	27
prednisone TABS 1 MG, 5 MG	36	MG-800 MCG-1.84 MG-18 MG-2.6		PROLIA SOSY	44
prednisone TABS 2.5 MG, 10 MG, 20		MG-1.7 MG-27 MG-10 MCG-4.95		PROMACTA PACK	49
MG, 50 MG	36	MG-25 MG-200 MG-160 MG-1200		PROMACTA TABS	49
prednisone TBPK	36	MCG-4 MCG, 120 MG-2.6 MG-800		promethazine hcl SOLN OR 6.25	
PREFEST	45	MCG-400 UNIT-8 MCG-1.7 MG-20		MG/5ML	18
pregabalin (once-daily) 330 MG ...	62	MG-28 MG-200 MG-1.8 MG-25 MG-		promethazine hcl SUPP 12.5 MG, 25	
pregabalin (once-daily) 82.5 MG, 165		4000 UNIT-30 UNIT	56	MG	18
MG	62	PRENATRIX TABS	56	promethazine hcl SUPP 50 MG ...	18
pregabalin CAPS 225 MG, 300 MG		PRENATRYL TABS	56	promethazine hcl TABS	18
12		PREVNAR 13	65	propafenone hcl CP12	8
pregabalin CAPS 25 MG, 50 MG, 75		PREVNAR 20	65	propafenone hcl TABS	8
MG, 100 MG, 150 MG, 200 MG ...	12	PREZCOBIX	30	proparacaine hcl	58
pregabalin SOLN	12	PREZISTA SUSP	30	propranolol hcl CP24	32
PREHEVBRIO	67	PREZISTA TABS 75 MG, 150 MG	30	propranolol hcl SOLN OR 20	
PREMARIN	68	PRIFTIN	23	MG/5ML, 40 MG/5ML	32
PREMARIN SOLR	46	primaquine phosphate TABS	22		
		primidone 50 MG, 250 MG	12		

propranolol hcl TABS	32	20 MG	20	30G	52
propylthiouracil	63	quinidine sulfate TABS	8	RELION 2-IN-1 LANCING DEVICE	
protriptyline hcl	14	quinine sulfate CAPS 324 MG	22	25G	52
PROVISC SOSY	59	QUZYTIR SOLN IV	18	RELION 2-IN-1 LANCING DEVICE	
PULMICORT FLEXHALER AEPB ..	9	QVAR REDHALER	9	30G	52
PULMOZYME	62	RA PRENATAL		RELION KETONE TEST STRIPS	
PX PRENATAL MULTIVITAMINS		FORMULA/FOLICACID TABS	57	STRP	42
TABS	57	RA PRENATAL TABS	57	RELION TRUE METRIX	
pyrazinamide	23	rabeprazole sodium TBEC	64	BLOODGLUCOSE TEST STRIPS	
pyridostigmine bromide SOLN OR	23	raloxifene hcl	44	STRP	43
pyridostigmine bromide TABS 60 MG		ramelteon	49	RENFLEXIS	46
.....	23	ramipril CAPS	19	repaglinide 0.5 MG, 1 MG	16
pyridostigmine bromide TBCR	23	ranitidine hcl TABS 150 MG	64	repaglinide 2 MG	16
pyrimethamine	22	ranolazine TB12 1000 MG	8	REPATHA PUSHTRONEX SYSTEM	
QC PRENATAL TABS	57	ranolazine TB12 500 MG	7	SOCT	19
QINLOCK	26	rasagiline mesylate	28	REPATHA SOSY	19
QUADRACEL SUSP	63	REALITY LATEX		REPATHA SURECLICK SOAJ	19
QUADRACEL SUSY	63	CONDOMS/LUBRICATED MISC ..	51	RETACRIT	49
quetiapine fumarate TABS 25 MG, 50		REALITY LATEX/ULTRA		RETEVMO CAPS	26
MG, 100 MG, 200 MG	29	TEXTURED DEVI	51	RETROVIR IV INFUSION SOLN ..	30
quetiapine fumarate TABS 300 MG,		REALITY LATEX/ULTRA THIN DEVI		REXULTI	29
400 MG	29	51		REZVOGLAR KWIKPEN	16
quetiapine fumarate TB24 300 MG,		REBIF REBIDOSE SOAJ	62	ribavirin (hepatitis c) CAPS	31
400 MG	29	REBIF REBIDOSE TITRATIONPACK		ribavirin (hepatitis c) TABS 200 MG	
quetiapine fumarate TB24 50 MG,		SOAJ	62	31	
150 MG, 200 MG	29	REBIF SOSY	62	RIDAURA	3
quinapril hcl 20 MG, 40 MG	19	REBIF TITRATION PACK SOSY ..	62	rifabutin	23
quinapril hcl 5 MG, 10 MG	19	RECOMBIVAX HB SUSP	67	rifampin CAPS	23
quinapril-hydrochlorothiazide 12.5		RECOMBIVAX HB SUSY	67	rifampin SOLR	23
MG-10 MG	20	REGRANEX	42	riluzole TABS	57
quinapril-hydrochlorothiazide 12.5		RELENZA DISKHALER	31	rimantadine hydrochloride TABS ..	31
MG-20 MG	20	RELION 2-IN-1 LANCET DEVICES		ringer's	54
quinapril-hydrochlorothiazide 25 MG-					

ringer's irrigation	55	rufinamide TABS 200 MG	12	sertraline hcl TABS 100 MG	14
RINVOQ TB24	2	rufinamide TABS 400 MG	12	sertraline hcl TABS 25 MG, 50 MG	14
risedronate sodium TABS 150 MG	44	RUXIENCE	24	sevelamer carbonate PACK	47
risedronate sodium TABS 35 MG	44	RYBELSUS TABS	15	sevelamer carbonate TABS	47
risedronate sodium TABS 5 MG, 30 MG	44	salsalate	5	SHINGRIX	68
risedronate sodium TBEC	44	SANTYL OINT	41	SIGNIFOR	45
risperidone microspheres	29	sapropterin dihydrochloride PACK	45	sildenafil citrate (pulmonary hypertension) SOLN	33
risperidone SOLN	29	sapropterin dihydrochloride TABS	45	sildenafil citrate (pulmonary hypertension) SUSR	33
risperidone TABS	29	SAVELLA TABS	61	sildenafil citrate (pulmonary hypertension) TABS	33
risperidone TBDP	29	SAVELLA TITRATION PACK MISC	61	sildenafil citrate	33
ritonavir TABS	30	saxagliptin hcl	15	silodosin	47
rivastigmine tartrate CAPS	61	saxagliptin-metformin hcl 1000 MG-2.5 MG	15	silver sulfadiazine	39
rizatriptan benzoate TABS 10 MG	53	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	SIMPONI ARIA SOLN	3
rizatriptan benzoate TABS 5 MG	53	SCEMBLIX 100 MG	26	SIMULECT	55
rizatriptan benzoate TBDP 10 MG	53	SCEMBLIX 20 MG, 40 MG	26	simvastatin TABS	19
rizatriptan benzoate TBDP 5 MG	53	scopolamine	17	sirolimus TABS	55
roflumilast	9	SELECT INSULIN SYRINGES	52	SIRTURO	23
romidepsin SOLR	26	SELECT LANCETS	52	SIVEXTRO TABS	22
ropinirole hydrochloride TABS	28	selegiline hcl CAPS	28	SKYLA	35
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	28	selegiline hcl TABS	28	SKYRIZI PEN SOAJ	39
ropinirole hydrochloride TB24 8 MG, 12 MG	28	selenium sulfide LOTN 2.5 %	39	SKYRIZI PSKT	39
rosuvastatin calcium TABS	19	SELZENTRY SOLN	30	SKYRIZI SOCT	46
ROTARIX SUSP	67	SELZENTRY TABS 25 MG, 75 MG	30	SKYRIZI SOLN	46
ROTARIX SUSR	67	SEMGLEE SOLN	16	SKYRIZI SOSY	39
ROTATEQ SOLN	67	SEMGLEE SOPN	16	SLYND	35
ROZLYTREK CAPS	26	SEREVENT DISKUS	10	SM PRENATAL VITAMINS TABS	57
RUBRACA	26	sertraline hcl CONC	14	SODIUM ACETATE SOLN (sodium acetate)	54
rufinamide SUSP	12				

sodium acetate SOLN	54	160 MG	32	SUBSYS LIQD 100 MCG	6
sodium chloride (gu irrigant) 0.9 %	47	SOVALDI TABS 200 MG	31	SUBSYS LIQD 200 MCG, 400 MCG,	600 MCG
sodium chloride (inhalant) NEBU 7 %	36	SOVALDI TABS 400 MG	31	SUBSYS LIQD 800 MCG, 1200	MCG, 1600 MCG
sodium chloride SOLN IV 0.45 %, 0.9	55	SPIKEVAX COVID-19 VACCINE			
%, 3 %, 4 MEQ/ML, 5 %	55	SUSP	68		
sodium citrate & citric acid	47	SPIKEVAX COVID-19		sucralfate SUSP	64
sodium fluoride CHEW 0.25 MG, 0.5	54	VACCINE/2023-24 SUSP	68	sucralfate TABS	64
MG, 1 MG, 2.2 MG	54	SPIKEVAX COVID-19		sulconazole nitrate CREA	38
sodium phenylbutyrate POWD	45	VACCINE/2023-24 SUSY	68	sulconazole nitrate SOLN	38
sodium phenylbutyrate TABS	45	SPIKEVAX COVID-19		sulfacetamide sodium (acne)	37
sodium polystyrene sulfonate POWD	55	VACCINE/2024-25 SUSY	68	sulfacetamide sodium (ophth) SOLN .	58
55		spinosad	42	sulfacetamide sodium w/ sulfur	
sodium polystyrene sulfonate SUSP	55	SPIRIVA RESPIMAT AERS	9	CREA 10 %-5 %	37
CO 15 GM/60ML	55	spironolactone & hydrochlorothiazide	43	sulfacetamide sodium w/ sulfur LIQD	
sodium sulfate-potassium sulfate-	50	.....	43	10 %-5 %	37
magnesium sulfate	50	spironolactone TABS	43	sulfacetamide sodium w/ sulfur LIQD	
SOFOSBUVIR/VELPATASVIR TABS	31	SPRAVATO 56MG DOSE	13	9 %-4.5 %	37
.....	31	SPRAVATO 84MG DOSE	13	sulfacetamide sodium-sulfur in urea	
solifenacin succinate TABS	64	SPRYCEL (dasatinib)	26	vehicle EMUL 10 %-10 %-4 %	37
SOLQUA 100/33	15	stannous fluoride CONC	56	sulfacetamide sod-prednisolone	
SOLOSEC	2	stavudine CAPS	30	SOLN	59
SOLU-CORTEF 100 MG, 500 MG,	36	STELARA 130 MG/26ML	46	sulfadiazine TABS	62
1000 MG	36	STELARA SOLN 45 MG/0.5ML ...	39	sulfamethoxazole-trimethoprim SOLN	
SOLU-CORTEF 250 MG	36	STELARA SOSY 45 MG/0.5ML ...	39	.....	21
SOLU-MEDROL 2 GM	36	STELARA SOSY 90 MG/ML	39	sulfamethoxazole-trimethoprim SUSP	
sorafenib tosylate	26	STENDRA	33	.....	21
SORBITOL 3 %	47	STIOLTO RESPIMAT	10	sulfamethoxazole-trimethoprim TABS	
SORBITOL/MANNITOL IRRIGATION	47	STIVARGA	26	.....	21
.....	47	STRENSIQ	45	SULFAMYLON CREA	39
sotalol hcl (afib/af)	32	streptomycin sulfate SOLR	2	sulfasalazine TABS	46
sotalol hcl TABS 240 MG	32	STRIBILD	30	sulfasalazine TBEC	46
sotalol hcl TABS 80 MG, 120 MG,		STRIVERDI RESPIMAT	10	sulindac TABS	4
				sumatriptan	53

sumatriptan succinate SOAJ	53	TAGRISSO 40 MG	24	terbinafine hcl TABS	18
sumatriptan succinate SOCT	53	TAGRISSO 80 MG	24	terbutaline sulfate SOLN	10
sumatriptan succinate SOLN 6 MG/0.5ML	53	TAKHZYRO SOLN	48	terbutaline sulfate TABS	10
sumatriptan succinate TABS	53	TAKHZYRO SOSY	48	terconazole vaginal CREA	68
sumatriptan-naproxen sodium	53	TALZENNA	27	terconazole vaginal SUPP	68
sunitinib malate 12.5 MG, 25 MG, 50 MG	27	tamoxifen citrate TABS	25	teriflunomide	62
sunitinib malate 37.5 MG	27	tamsulosin hcl	47	teriparatide SOPN	44
SUNOSI 150 MG	1	TASIGNA 150 MG, 200 MG	27	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7
SUNOSI 75 MG	1	TASIGNA 50 MG	27	testosterone cypionate SOLN IM ...	7
SYNAREL	44	tavaborole	38	testosterone enanthate SOLN IM ...	7
SYNERA PTCH	42	TAVALISSE	48	TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT SUSP	63
SYNJARDY TABS	15	tazarotene CREA 0.1 %	39	tetrabenazine	61
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15	TAZVERIK	27	tetracycline hcl CAPS	63
SYNJARDY XR TB24 1000 MG-25 MG	15	TDVAX SUSP	63	THALOMID	55
SYNRIBO	27	TEFLARO	34	theophylline ELIX	10
SYNTHROID TABS (levothyroxine sodium)	63	TEGRETOL SUSP (carbamazepine) . 12		theophylline SOLN	10
TABLOID	24	TEGRETOL TABS (carbamazepine) . 12		theophylline TB12	10
TABRECTA	27	telmisartan	20	theophylline TB24	10
tacrolimus (topical) OINT	42	telmisartan-amlodipine	20	THERANATAL CORE NUTRITION TABS	57
tacrolimus CAPS	55	telmisartan-hydrochlorothiazide ...	20	THIOLA EC TBEC 100 MG (tiopronin)	47
tadalafil (pulmonary hypertension) TABS	33	temazepam 15 MG, 30 MG	49	THIOLA EC TBEC 300 MG (tiopronin)	47
tadalafil 5 MG	33	temazepam 7.5 MG, 22.5 MG	49	thioridazine hcl	29
TAFINLAR CAPS	27	TEMODAR SOLR	23	thiotepa 15 MG	23
TAFINLAR TBSO	27	temozolomide CAPS	23	thiothixene	29
tafluprost	59	temsirolimus	27	THYMOGLOBULIN	55
		TENIVAC INJ	63	THYROGEN 0.9 MG	42
		tenofovir disoproxil fumarate TABS 31		tiagabine hcl	12
		terazosin hcl	20		

TIBSOVO	27	topiramate TABS 50 MG	12	tretinoin GEL 0.01 %, 0.025 %	37
tigecycline	62	topotecan hcl SOLN	28	tretinoin microsphere 0.1 %	37
timolol maleate (ophth) SOLG	58	topotecan hcl SOLR	28	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	24
timolol maleate (ophth) SOLN	58	toremifene citrate	25	triamcinolone acetonide (mouth) ..	56
timolol maleate TABS	32	torsemide TABS	43	triamcinolone acetonide (nasal) AERO	57
tiopronin TBEC 100 MG	47	TRACLEER TBSO	33	triamcinolone acetonide (topical) CREA 0.025 %	41
tiopronin TBEC 300 MG	47	tramadol hcl TABS 50 MG	6	triamcinolone acetonide (topical) CREA 0.1 %	41
tiotropium bromide monohydrate CAPS	9	tramadol hcl TB24	6	triamcinolone acetonide (topical) CREA 0.5 %	41
TIVICAY TABS	31	tramadol-acetaminophen	7	triamcinolone acetonide (topical) CREA 0.5 %	41
tizanidine hcl CAPS	57	trandolapril 1 MG, 2 MG	19	triamcinolone acetonide (topical) CREA 0.5 %	41
tizanidine hcl TABS	57	trandolapril 4 MG	19	triamcinolone acetonide (topical) LOTN 0.025 %	41
tobramycin (ophth) SOLN	58	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21	triamcinolone acetonide (topical) LOTN 0.1 %	41
tobramycin NEBU	2	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	41
tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML	2	tranexamic acid SOLN 1000 MG/10ML	49	triamcinolone acetonide (topical) OINT 0.5 %	41
tobramycin-dexamethasone SUSP 59		tranexamic acid TABS	49	triamcinolone acetonide (topical) SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	36
TODAY SPONGE MISC	68	tranylcypromine sulfate	13	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43
tolcapone	28	travoprost SOLN	59	triamterene & hydrochlorothiazide TABS	43
tolmetin sodium CAPS	4	TRAZIMERA	24	triamterene CAPS	43
tolmetin sodium TABS 600 MG	4	trazodone hcl TABS	14	triazolam	49
TOLSURA CAPS	18	TRECATOR	23	TRICARE TABS	57
tolterodine tartrate CP24	64	TRELEGY ELLIPTA	10	trientine hcl 250 MG	55
tolterodine tartrate TABS	64	TRELSTAR MIXJECT	25	trifluoperazine hcl TABS	29
tolvaptan TABS	45	TREMFYA SOAJ	39	trifluridine	58
topiramate CPSP 15 MG	12	TREMFYA SOSY 100 MG/ML	39		
topiramate CPSP 25 MG	12	treprostinil SOLN IJ	33		
topiramate CS24	12	tretinoin (chemotherapy)	27		
topiramate TABS 200 MG	12	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	37		
topiramate TABS 25 MG, 100 MG ..	12				

trihexyphenidyl hcl SOLN	28	BLOOD GLUCOSE STRIPS STRP 43	TUKYSA	24
trihexyphenidyl hcl TABS	28	TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	TURALIO	27
TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG .	15	TRUMENBA	TUZISTRA XR	36
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX COLOR CONDOMS + LUBE MISC	TWINRIX SUSY	68
TRIKAFTA TBPK	62	TRUSTEX LUBRICATED EXTRALARGE MISC	TWIRLA	35
trimethobenzamide hcl CAPS	17	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	TYBLUME CHEW	35
trimethoprim TABS	21	TRUSTEX LUBRICATED MISC ...	TYBOST	31
trimipramine maleate CAPS	14	TRUSTEX LUBRICATED/RIBBED/STUDED MISC	TYMLOS	44
TRINTELLIX	14	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	TYVASO REFILL KIT SOLN IN ...	33
TRIUMEQ TABS	31	TRUSTEX LUBRICATED/SPERMICIDE MISC	TYVASO SOLN IN	33
TRIZIVIR	31	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	TYVASO STARTER KIT SOLN IN	33
TROJAN MAGNUM MISC	51	TRUSTEX LUBRICATED/SPERMICIDE MISC	UBRELVY	53
TROJAN ULTRA THIN LUBRICATED MISC	51	TRUSTEX LUBRICATED/SPERMICIDE MISC	UDENYCA ONBODY SOSY	49
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	51	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	UDENYCA SOAJ	49
TROJAN-ENZ LUBRICATED MISC 51	51	TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDED MISC	UDENYCA SOSY	49
TROJAN-ENZ W/SPERMICIDAL MISC	51	TRUSTEX/RIA LUBRICATED MISC .	UPTRAVI TABS 200 MCG	33
tropicamide SOLN 0.5 %	58	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	33
tropicamide SOLN 1 %	58	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	UPTRAVI TITRATION PACK TBPK	33
tropium chloride CP24	64	TRUXIMA	ursodiol CAPS	46
tropium chloride TABS	64		ursodiol TABS	46
TRUE COVER DEVI	51		UVADEX	27
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ...	43		valacyclovir hcl 1 GM, 1000 MG ...	31
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	52		valacyclovir hcl 500 MG	31
TRUE METRIX SELF MONITORING			valganciclovir hcl TABS	31
			valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML	13
			valproic acid CAPS	13
			valrubicin	25

valsartan TABS	20	verapamil hcl SOLN 2.5 MG/ML	33	WESTAB PLUS TABS	57
valsartan-hydrochlorothiazide	21	verapamil hcl TABS	33	WIDE-SEAL SILICONE DIAPHRAGM KIT 60	52
VALTOCO 10 MG DOSE LIQD	11	verapamil hcl TBCR	33	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	52
VALTOCO 15 MG DOSE LQPK	11	VEREGEN	37	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	52
VALTOCO 20 MG DOSE LQPK	11	VERZENIO	27	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	52
VALTOCO 5 MG DOSE LIQD	11	VICTOZA (liraglutide)	15	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	52
vancomycin hcl CAPS	21	vigabatrin PACK	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	52
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG	21	vigabatrin TABS	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	52
vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML	21	VIIBRYD STARTER PACK KIT	14	WIDE-SEAL SILICONE DIAPHRAGM KIT 95	52
VAQTA	68	vilazodone hcl TABS	14	XALKORI CAPS	27
varenicline tartrate TABS	62	vincristine sulfate	28	XARELTO STARTER PACK TBPK 10	
varenicline tartrate TBPK	62	vinorelbine tartrate 10 MG/ML	28	XARELTO SUSR	10
VARIVAX SUSR IJ 1350 PFU/0.5ML 68		VIRACEPT TABS 250 MG	31	XARELTO TABS 10 MG, 20 MG ..	10
VARUBI TBPK	17	VIRACEPT TABS 625 MG	31	XARELTO TABS 2.5 MG, 15 MG ..	10
VAXNEUVANCE	65	VIREAD POWD	31	XELJANZ SOLN	2
VECAMYL	21	VIREAD TABS 150 MG, 200 MG, 250 MG	31	XELJANZ TABS 10 MG	3
VECTIBIX 100 MG/5ML	24	VISTOGARD	17	XELJANZ TABS 5 MG	3
VELPHORO	47	VITAMIN D2 TABS 400 UNIT	68	XELJANZ XR TB24	2
venlafaxine hcl CP24 150 MG	14	VITATHELY/GINGER TABS	57	XEOMIN	57
venlafaxine hcl CP24 37.5 MG	14	VITRAKVI CAPS	27	XERAVA	62
venlafaxine hcl CP24 75 MG	14	VITRAKVI SOLN	27	XGEVA SOLN	44
venlafaxine hcl TABS	14	VIZIMPRO	24	XHANCE EXHU	57
venlafaxine hcl TB24 150 MG	14	VORAXAZE	27	XIFAXAN 200 MG	21
venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	14	voriconazole TABS	18	XIFAXAN 550 MG	21
verapamil hcl CP24 100 MG, 200 MG, 300 MG	32	VOSEVI	31		
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	33	VYNDAMAX	34		
		VYNDAQEL	34		
		warfarin sodium TABS	10		
		water for irrigation, sterile	55		

XIGDUO XR (dapagliflozin propanediol-metformin hcl)	15	zaleplon 10 MG	49	zolmitriptan SOLN	53
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	15	zaleplon 5 MG	49	zolmitriptan TABS	53
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	15	ZALTRAP 100 MG/4ML	24	zolmitriptan TBDP	53
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	9	ZANOSAR	23	zolpidem tartrate TABS	49
XOLAIR SOAJ 75 MG/0.5ML	9	ZARONTIN CAPS (ethosuximide)	12	zolpidem tartrate TBCR	49
XOLAIR SOLR	9	ZARXIO	49	zonisamide CAPS	12
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	9	ZEJULA CAPS	27	ZONTIVITY	48
XOLAIR SOSY 75 MG/0.5ML	9	ZEJULA TABS 100 MG	27	ZORBTIVE SC	44
XOSPATA	27	ZEJULA TABS 200 MG, 300 MG	27	ZYDELIG	27
XPOVIO	25	ZELBORAF	27	ZYLET	59
XPOVIO 60 MG TWICE WEEKLY 25		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	43		
XPOVIO 80 MG TWICE WEEKLY 25		ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	43		
XTANDI CAPS	25	zidovudine CAPS	31		
XTANDI TABS 40 MG	25	zidovudine SYRP	31		
XTANDI TABS 80 MG	25	zidovudine TABS	31		
XULTOPHY 100/3.6	15	zileuton TB12	9		
XYNTHA	48	ziprasidone hcl	29		
XYNTHA SOLOFUSE	48	ZIRABEV	24		
YERVOY	24	ZIRGAN GEL	58		
YONSA	25	ZOLADEX 10.8 MG	25		
YUFLYMA 1-PEN KIT AJKT	3	ZOLADEX 3.6 MG	25		
YUFLYMA 2-PEN KIT AJKT	3	zoledronic acid CONC	44		
YUFLYMA 2-SYRINGE KIT PSKT	3	zoledronic acid SOLN	44		
YUFLYMA CD/UC/HS STARTER AJKT	3	ZOLINZA	27		
zafirlukast	9				

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