



FROM



# 2025 FORMULARY

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[Ambetter.WellCareNewJersey.com](https://www.Ambetter.WellCareNewJersey.com)

# Formulary Introduction

## FORMULARY

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

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

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

### Drug List Key:

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

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

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

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

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

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

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

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

## Prior Authorization for Non-Formulary Drugs

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

## Formulary Abbreviations:

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

## Opioid Medications:

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

# Introducción al Formulario

## FORMULARIO

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

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

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

Clave de la lista de medicamentos:

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

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

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

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

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

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

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

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

## Autorización previa para medicamentos no incluidos en el Formulario

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

### Abreviaturas del Formulario:

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

### Medicamentos opioides:

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>armodafinil</i>	1	QL(1 ea daily); AL(At least 17 yrs old); PA
<i>dexmethylphenidate hcl CP24</i>	1	QL(1 ea daily)
<i>dexmethylphenidate hcl TABS</i>	1	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 10 MG</i>	1	QL(5 ea daily)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1	QL(2 ea daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1	QL(6 ea daily)
<i>methylphenidate hcl CP24 30 MG</i>	1	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	1	QL(1 ea daily)
<i>methylphenidate hcl CPCR</i>	1	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN</i>	1	QL(30 ml daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1	QL(5 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	1	QL(6 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	QL(3 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1	QL(2 ea daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate PTCH</i>	1	QL(1 ea daily); PA
<i>modafinil 100 MG</i>	1	QL(1 ea daily); PA
<i>modafinil 200 MG</i>	1	QL(2 ea daily); PA
<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
Allergenic Extracts		
GRASTEK SUBL	3	PA
<b>AMEBICIDES</b>		
Amebicides		
SOLOSEC	3	PA
<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1	
ARIKAYCE	4	PA
<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>	1	
<i>gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML</i>	1	
<i>neomycin sulfate TABS</i>	1	
<i>streptomycin sulfate SOLR</i>	3	
<i>tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML</i>	1	
<i>tobramycin NEBU</i>	4	QL(280 ml per 56 day(s) retail; 280 ml per 56 days mail); PA
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
XELJANZ XR TB24	4	QL(1 ea daily); PA	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	
XELJANZ SOLN	4	QL(20 ml daily); PA		HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
XELJANZ TABS	4	QL(2 ea daily); PA			HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML	4
Antirheumatic Antimetabolites			HUMIRA PSKT	4		QL(0.143 ea daily); PA
METHOTREXATE	4	QL(1.714 ea daily); PA	SIMPONI ARIA SOLN	4	PA	
Anti-TNF-alpha - Monoclonal Antibodies			YUFLYMA 1-PEN KIT AJKT	4	QL(0.143 ea daily); PA	
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA	YUFLYMA 2-PEN KIT AJKT	4	QL(0.29 ea daily); 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 2-SYRINGE KIT PSKT	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 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 STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	Gold Compounds			
CYLTEZO AJKT	4	QL(0.072 ea daily); PA	RIDAURA	3	QL(3 ea daily)	
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	Interleukin-1 Blockers			
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 ea daily); PA	ARCALYST	4	QL(0.286 ea daily); PA	
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	Interleukin-6 Receptor Inhibitors			
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	KEVZARA SOAJ	4	QL(0.082 ml daily); PA	
HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML	4	QL(0.143 ea daily); PA	KEVZARA SOSY	4	QL(0.082 ml daily); PA	
HUMIRA PEN AJKT SC 80 MG/0.8ML	4	QL(0.072 ea daily); PA	Nonsteroidal Anti-inflammatory Agents (NSAIDs)			
			<i>celecoxib</i>	1	QL(2 ea daily)	

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

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

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>	1	New starts limited to 7 day supply
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1	
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN OR 50 MG/5ML</i>	1	New starts limited to 7 day supply; QL(500 ml per fill retail)
<i>diflunisal TABS</i>	1		<i>meperidine hcl TABS 50 MG</i>	1	New starts limited to 7 day supply; QL(6 ea daily)
<i>salsalate</i>	1		<i>methadone hcl CONC</i>	1	QL(10 ml daily)
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>			<i>methadone hcl SOLN OR 10 MG/5ML</i>	1	QL(50 ml daily)
<b>Opioid Agonists</b>			<i>methadone hcl SOLN OR 5 MG/5ML</i>	1	QL(100 ml daily)
<i>codeine sulfate TABS 30 MG</i>	1	New starts limited to 7 day supply	<i>methadone hcl SOLN IJ 10 MG/ML</i>	1	
CODEINE SULFATE TABS	1	New starts limited to 7 day supply	METHADONE HCL SOLN IJ	1	
<i>fentanyl citrate LPOP</i>	1	QL(4 ea daily); PA	<i>methadone hcl TABS 10 MG</i>	1	QL(10 ea daily)
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1	QL(0.34 ea daily)	<i>methadone hcl TABS 5 MG</i>	1	QL(4 ea daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 ea daily); PA	<i>methadone hcl TBSO</i>	1	QL(2 ea daily)
<i>hydrocodone bitartrate T24A</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>	1	QL(2 ea daily); PA
<i>hydromorphone hcl LIQD</i>	1	New starts limited to 7 day supply	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1	
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1		<i>morphine sulfate SOLN OR 10 MG/5ML</i>	1	New starts limited to 7 day supply; QL(100 ml daily)
<i>hydromorphone hcl TABS</i>	1	New starts limited to 7 day supply; QL(8 ea daily)	<i>morphine sulfate SOLN OR 20 MG/5ML</i>	1	New starts limited to 7 day supply; QL(50 ml daily)
<i>hydromorphone hcl TB24 32 MG</i>	1	QL(1 ea daily); PA	<i>morphine sulfate TABS</i>	1	New starts limited to 7 day supply; QL(6 ea daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1	QL(2 ea daily); PA			

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

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol-acetaminophen</i>	1	New starts limited to 7 day supply; QL(8 ea daily)
<b>Opioid Partial Agonists</b>		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1	QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1	QL(3 ea daily)
<i>buprenorphine hcl SOLN</i>	1	
<i>buprenorphine hcl SUBL</i>	1	QL(3 ea daily)
<i>buprenorphine PTWK</i>	1	QL(0.143 ea daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1	
<i>butorphanol tartrate NA 10 MG/ML</i>	1	QL(0.34 ml daily); PA
<i>nalbuphine hcl</i>	1	QL(8 ml daily)
<i>pentazocine w/ naloxone hcl</i>	1	New starts limited to 7 day supply
<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
<b>Anabolic Steroids</b>		
<i>oxandrolone</i>	1	
<b>Androgens</b>		
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 ea daily); PA
<i>danazol CAPS</i>	1	
METHITEST TABS	3	
<i>testosterone cypionate SOLN IM</i>	1	
<i>testosterone enanthate SOLN IM</i>	1	
<b>ANORECTAL AND RELATED PRODUCTS -</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Rectal Drugs to Treat Pain, Swelling and Itching</b>		
<b>Intrarectal Steroids</b>		
<i>budesonide (intrarectal)</i>	4	QL(3.2 gm daily); PA
<i>hydrocortisone (intrarectal)</i>	1	
<b>Rectal Steroids</b>		
<i>hydrocortisone (rectal) EX</i>	1	RX/OTC
<i>hydrocortisone acetate (rectal)</i>	1	
<b>Vasodilating Agents</b>		
<i>nitroglycerin (intra-anal)</i>	1	QL(2 gm daily)
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>		
<b>Anthelmintics</b>		
<i>albendazole</i>	1	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>	1	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>	1	PA
<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
<b>Antianginals-Other</b>		
<i>ranolazine TB12 500 MG</i>	1	QL(3 ea daily)
<i>ranolazine TB12 1000 MG</i>	1	QL(2 ea daily)
<b>Nitrates</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1	
<i>isosorbide mononitrate TABS</i>	1	
<i>isosorbide mononitrate TB24</i>	1	
NITRO-BID OINT	3	
<i>nitroglycerin CPR</i>	1	QL(4 ea daily)
<i>nitroglycerin PT24</i>	1	
NITROGLYCERIN SOLN IV	1	
<i>nitroglycerin SUBL</i>	1	
<b>ANTIANGIENOSIS AGENTS - Drugs to Treat Anxiety</b>		
Antianxiety Agents - Misc.		
<i>buspirone hcl</i>	1	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1	
<i>hydroxyzine hcl SYRP</i>	1	
<i>hydroxyzine hcl TABS</i>	1	
<i>hydroxyzine pamoate CAPS</i>	1	
<i>meprobamate</i>	1	QL(6 ea daily)
Benzodiazepines		
<i>alprazolam TABS</i>	1	QL(4 ea daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam TBP</i>	1	
<i>clordiazepoxide hcl CAPS</i>	1	
<i>clorazepate dipotassium TABS</i>	1	
<i>diazepam CONC</i>	1	
<i>diazepam SOLN OR 5 MG/5ML</i>	1	
<i>diazepam TABS</i>	1	QL(4 ea daily)
<i>lorazepam CONC</i>	1	
<i>lorazepam TABS 1 MG</i>	1	QL(4 ea daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>oxazepam CAPS</i>	1	
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1	
<i>procainamide hcl SOLN 500 MG/ML</i>	1	
<i>quinidine sulfate TABS</i>	1	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1	
<i>propafenone hcl CP12</i>	1	
<i>propafenone hcl TABS</i>	1	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML</i>	1	
<i>amiodarone hcl TABS</i>	1	
<i>dofetilide</i>	1	
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ml daily); PA
NUCALA SOAJ	4	QL(0.1073 ml daily); PA
NUCALA SOLR	4	QL(0.1073 ea daily); PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA	ARNUITY ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
XOLAIR SOLR	4	QL(0.286 ea daily); PA	<i>budesonide (inhalation) SUSP</i>	1	QL(4 ml daily); PA
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>fluticasone propionate (inhalation) AEPB</i>	1	
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA	<i>fluticasone propionate hfa</i>	1	QL(0.8 gm daily)
Anti-Inflammatory Agents			PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>cromolyn sodium NEBU</i>	1	QL(8 ml daily)	QVAR REDHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
Bronchodilators - Anticholinergics			Sympathomimetics		
ATROVENT HFA	3	QL(0.44 gm daily)	<i>albuterol sulfate AERS</i>	1	
INCRUSE ELLIPTA	2	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML</i>	1	QL(15 ml daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1	QL(15 ml daily)	<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	1	
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)	<i>albuterol sulfate SYRP</i>	1	
<i>tiotropium bromide monohydrate CAPS</i>	1	QL(1 ea daily)	<i>albuterol sulfate TABS</i>	1	
Leukotriene Modulators			ANORO ELLIPTA	2	QL(2 ea daily)
<i>montelukast sodium CHEW</i>	1	QL(1 ea daily)	<i>arformoterol tartrate</i>	1	QL(4 ml daily)
<i>montelukast sodium PACK</i>	1	QL(1 ea daily)	BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>montelukast sodium TABS</i>	1	QL(1 ea daily)	BREO ELLIPTA ( <i>fluticasone furoate-vilanterol</i> )	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>zafirlukast</i>	1	QL(2 ea daily)	BREZTRI AEROSPHERE	2	QL(0.38 gm daily)
<i>zileuton TB12</i>	3	QL(4 ea daily); PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors		
Steroid Inhalants			<i>roflumilast</i>	3	QL(1 ea daily)
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA	Steroid Inhalants		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>budesonide-formoterol fumarate dihydrate</i>	1	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	<i>terbutaline sulfate TABS</i>	1	
DULERA	2		TRELEGY ELLIPTA	2	QL(2 ea daily)
<i>fluticasone furoate-vilanterol</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<b>Xanthines</b>		
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>aminophylline SOLN</i>	1	
<i>fluticasone-salmeterol AERO</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>theophylline ELIX</i>	1	
<i>formoterol fumarate NEBU</i>	1	QL(4 ml daily)	<i>theophylline SOLN</i>	1	QL(56 ml daily)
<i>ipratropium-albuterol SOLN</i>	1	QL(18 ml daily)	<i>theophylline TB12</i>	1	
<i>levalbuterol hcl</i>	1	QL(12 ml daily)	<i>theophylline TB24</i>	1	
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1		<b>ANTICOAGULANTS - Blood Thinners</b>		
<i>levalbuterol tartrate</i>	1	QL(0.5 gm daily)	<b>Coumarin Anticoagulants</b>		
SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>warfarin sodium TABS</i>	1	
STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<b>Direct Factor Xa Inhibitors</b>		
STRIVERDI RESPIMAT	2		ELIQUIS STARTER PACK TBPK	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>terbutaline sulfate SOLN</i>	1		ELIQUIS TABS	2	QL(2 ea daily)
			XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail
			XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)
			XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
			XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
			<b>Heparins And Heparinoid-Like Agents</b>		
			<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)
			<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ml daily; 30 Day(s) limit)
			<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)
			<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)	<i>clobazam SUSP</i>	1	QL(16 ml daily); PA
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit)	<i>clobazam TABS</i>	1	QL(2 ea daily); PA
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ml per 180 day(s) retail; 5 ml per 180 days mail)	<i>clonazepam TABS</i>	1	
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ml per 180 day(s) retail; 7 ml per 180 days mail)	<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ml per 180 day(s) retail; 4 ml per 180 days mail)	NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ml per 180 day(s) retail; 4 ml per 180 days mail)	VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
FRAGMIN SOSY	4	PA	VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1		VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1		VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
Thrombin Inhibitors			Anticonvulsants - Misc.		
<i>dabigatran etexilate mesylate CAPS</i>	1		APTIOM	3	QL(2 ea daily); PA
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>			BANZEL TABS 400 MG ( <i>rufinamide</i> )	2	QL(8 ea daily); PA
AMPA Glutamate Receptor Antagonists			BANZEL TABS 200 MG ( <i>rufinamide</i> )	2	QL(2 ea daily); PA
FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA	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 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA	<i>carbamazepine CHEW</i>	1	
FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA	<i>carbamazepine CP12 100 MG</i>	1	
Anticonvulsants - Benzodiazepines			<i>carbamazepine CP12 200 MG</i>	1	QL(6 ea daily)
			<i>carbamazepine CP12 300 MG</i>	1	QL(4 ea daily)
			<i>carbamazepine SUSP</i>	1	
			<i>carbamazepine TABS</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine TB12 100 MG, 400 MG</i>	1	QL(4 ea daily)	<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>carbamazepine TB12 200 MG</i>	1	QL(6 ea daily)	<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA	<i>primidone 50 MG, 250 MG</i>	1	
DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA	<i>rufinamide SUSP</i>	1	QL(80 ml daily); PA
DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA	<i>rufinamide TABS 200 MG</i>	1	QL(2 ea daily); PA
DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA	<i>rufinamide TABS 400 MG</i>	1	QL(8 ea daily); PA
EPIDIOLEX	3	PA	TEGRETOL SUSP ( <i>carbamazepine</i> )	2	
<i>gabapentin CAPS</i>	1		TEGRETOL TABS ( <i>carbamazepine</i> )	2	
<i>gabapentin SOLN</i>	1	QL(60 ml daily)	<i>topiramate CPSP 25 MG</i>	1	QL(8 ea daily)
<i>gabapentin TABS 600 MG, 800 MG</i>	1		<i>topiramate CPSP 15 MG</i>	1	QL(6 ea daily)
<i>lacosamide SOLN IV 200 MG/20ML</i>	1	QL(40 ml daily)	<i>topiramate CS24</i>	3	PA
<i>lacosamide TABS</i>	1	QL(2 ea daily)	<i>topiramate TABS 200 MG</i>	1	QL(2 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1	QL(20 ea daily)	<i>topiramate TABS 50 MG</i>	1	QL(6 ea daily)
<i>lamotrigine CHEW 5 MG</i>	1	QL(100 ea daily)	<i>topiramate TABS 25 MG, 100 MG</i>	1	QL(4 ea daily)
<i>lamotrigine TABS</i>	1		<i>zonisamide CAPS</i>	1	QL(6 ea daily)
<i>lamotrigine TBDP</i>	1	QL(1 ea daily)	Carbamates		
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1	QL(30 ml daily)	<i>felbamate SUSP</i>	1	QL(30 ml daily)
<i>levetiracetam TABS 500 MG</i>	1	QL(6 ea daily)	<i>felbamate TABS 400 MG</i>	1	QL(9 ea daily)
<i>levetiracetam TABS 250 MG, 750 MG</i>	1	QL(4 ea daily)	<i>felbamate TABS 600 MG</i>	1	QL(6 ea daily)
<i>levetiracetam TABS 1000 MG</i>	1	QL(3 ea daily)	GABA Modulators		
<i>levetiracetam TB24</i>	1	QL(4 ea daily)	<i>tiagabine hcl</i>	1	
<i>oxcarbazepine SUSP</i>	1	QL(40 ml daily)	<i>vigabatrin PACK</i>	4	QL(6 ea daily); PA
<i>oxcarbazepine TABS 600 MG</i>	1	QL(4 ea daily)	<i>vigabatrin TABS</i>	4	QL(6 ea daily); PA
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1	QL(3 ea daily)	Hydantoins		
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA	DILANTIN	2	
			DILANTIN ( <i>phenytoin sodium extended</i> )	2	
			DILANTIN INFATABS CHEW ( <i>phenytoin</i> )	2	

Drug Name	Drug Tier	Requirements/Limits
DILANTIN-125 SUSP (phenytoin)	2	
fosphenytoin sodium	1	
phenytoin sodium extended 100 MG, 200 MG, 300 MG	1	
phenytoin sodium SOLN	1	
phenytoin CHEW	1	
phenytoin SUSP	1	
Succinimides		
ethosuximide CAPS	1	QL(6 ea daily)
ethosuximide SOLN	1	QL(30 ml daily)
methsuximide	1	QL(4 ea daily)
ZARONTIN CAPS (ethosuximide)	2	QL(6 ea daily)
Valproic Acid		
divalproex sodium TB24	1	
divalproex sodium TBEC	1	
valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML	1	
valproic acid CAPS	1	
<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>		
Alpha-2 Receptor Antagonists (Tetracyclics)		
mirtazapine TABS 7.5 MG, 45 MG	1	QL(1 ea daily)
mirtazapine TABS 30 MG	1	QL(1.5 ea daily)
mirtazapine TABS 15 MG	1	QL(3 ea daily)
mirtazapine TBDP 15 MG	1	QL(3 ea daily)
mirtazapine TBDP 30 MG	1	QL(1.5 ea daily)
mirtazapine TBDP 45 MG	1	QL(1 ea daily)
Antidepressants - Misc.		
bupropion hcl TABS	1	+; QL(3 ea daily)
bupropion hcl TB12 150 MG	1	+; QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
bupropion hcl TB12 100 MG	1	+; QL(4 ea daily)
bupropion hcl TB12 200 MG	1	+; QL(2 ea daily)
bupropion hcl TB24 300 MG	1	QL(1 ea daily)
bupropion hcl TB24 150 MG	1	QL(3 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 ea daily)
MARPLAN	2	QL(6 ea daily)
phenelzine sulfate	1	
tranylcypromine sulfate	1	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO 56MG DOSE	4	PA
SPRAVATO 84MG DOSE	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
citalopram hydrobromide SOLN	1	QL(20 ml daily)
citalopram hydrobromide TABS 20 MG	1	#; QL(2 ea daily)
citalopram hydrobromide TABS 10 MG	1	#; QL(4 ea daily)
citalopram hydrobromide TABS 40 MG	1	#; QL(1 ea daily)
escitalopram oxalate SOLN	1	QL(20 ml daily)
escitalopram oxalate TABS 10 MG	1	+; QL(2 ea daily)
escitalopram oxalate TABS 20 MG	1	+; QL(1 ea daily)
escitalopram oxalate TABS 5 MG	1	+; QL(4 ea daily)
fluoxetine hcl CAPS 40 MG	1	#; QL(2 ea daily)
fluoxetine hcl CAPS 10 MG	1	#; QL(1 ea daily)

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

Drug Name	Drug Tier	Requirements/Limits
<i>acarbose</i>	1	QL(3 ea daily)
<i>miglitol</i>	1	QL(3 ea daily)
<b>Antidiabetic Combinations</b>		
<i>alogliptin-metformin hcl</i>	1	QL(2 ea daily); PA
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1	QL(1 ea daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1	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 500 MG-5 MG</i>	1	+; QL(4 ea daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1	+; QL(2 ea daily)
<i>glyburide-metformin 250 MG-1.25 MG</i>	1	+; QL(2 ea daily)
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1	+; QL(4 ea daily)
GLYXAMBI	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
JANUMET TABS	2	QL(2 ea daily)
<i>pioglitazone hcl-glimepiride</i>	1	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl TABS</i>	1	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
SOLQUA 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(1 ea daily)
XIGDUO XR ( <i>dapagliflozin propanediol-metformin hcl</i> )	2	QL(2 ea daily)
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
<b>Biguanides</b>		
<i>metformin hcl TABS 1000 MG</i>	1	+; QL(2.5 ea daily)
<i>metformin hcl TABS 500 MG</i>	1	+; QL(5 ea daily)
<i>metformin hcl TABS 850 MG</i>	0	QL(3 ea daily)
<i>metformin hcl TB24 500 MG</i>	1	+; QL(4 ea daily)
<i>metformin hcl TB24 750 MG</i>	1	+; QL(3 ea daily)
<b>Diabetic Other</b>		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1	+; QL(0.035 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>		
<i>alogliptin benzoate</i>	1	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1	QL(1 ea daily)
<b>Incretin Mimetic Agents</b>		
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
<b>Insulin</b>		
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	1	#
INSULIN ASPART PENFILL SOCT	1	#
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1	#
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1	#
INSULIN ASPART SOLN IJ	1	#
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	#
INSULIN DEGLUDEC SOLN	2	#

Drug Name	Drug Tier	Requirements/Limits
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	#
<b>Insulin Sensitizing Agents</b>		
<i>pioglitazone hcl</i>	1	+; QL(1 ea daily)
<b>Meglitinide Analogues</b>		
<i>nateglinide</i>	1	QL(3 ea daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1	QL(4 ea daily)
<i>repaglinide 2 MG</i>	1	QL(8 ea daily)
<b>Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors</b>		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
FARXIGA ( <i>dapagliflozin propanediol</i> )	2	QL(1 ea daily)
FARXIGA	2	QL(1 ea daily)
JARDIANCE	2	QL(1 ea daily)
<b>Sulfonylureas</b>		
<i>glimepiride 1 MG, 2 MG</i>	1	+; QL(4 ea daily)
<i>glimepiride 4 MG</i>	1	+; QL(2 ea daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1	+; QL(4 ea daily)
<i>glipizide TB24</i>	1	+; QL(2 ea daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	+; QL(4 ea daily)
<i>glyburide TABS</i>	1	+; QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea</b>		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1	
<i>diphenoxylate w/ atropine TABS</i>	1	
<i>loperamide hcl CAPS</i>	1	RX/OTC
MOTOFEN	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	1	PA
<i>deferasirox TBSO</i>	1	PA
Antidotes and Specific Antagonists		
VISTOGARD	1	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1	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>	1	
<i>naltrexone hcl</i>	1	
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1	
<i>granisetron hcl TABS</i>	1	QL(0.34 ea daily)
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	1	QL(3.34 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1	
<i>ondansetron hcl SOSY</i>	1	
<i>ondansetron hcl TABS 24 MG</i>	1	QL(0.143 ea daily)
<i>ondansetron hcl TABS 8 MG</i>	1	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 4 MG</i>	1	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1	QL(1 ea daily)
<i>ondansetron TBDP 8 MG</i>	1	
<i>palonosetron hcl SOLN</i>	1	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC
<i>scopolamine</i>	1	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1	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>	1	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 40 MG, 125 MG</i>	1	QL(0.067 ea daily); PA
<i>aprepitant CAPS 80 MG</i>	1	QL(0.134 ea daily); PA
<i>aprepitant CAPS</i>	1	PA
<i>aprepitant MISC</i>	1	PA
VARUBI TBPK	3	PA
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Antifungal - Glucan Synthesis Inhibitors</b>			<i>carbinoxamine maleate</i> TABS 4 MG	1	
<i>caspofungin acetate</i>	1		<i>clemastine fumarate</i> SYRP	1	
ERAXIS	3		<i>clemastine fumarate</i> TABS 2.68 MG	1	
<i>micafungin sodium</i>	1	PA	<i>diphenhydramine hcl</i> CAPS 50 MG	1	
<b>Antifungals</b>			<i>diphenhydramine hcl</i> ELIX 12.5 MG/5ML	1	
ABELCET	3		<i>diphenhydramine hcl</i> LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	1	
<i>amphotericin b IV</i>	3		<i>diphenhydramine hcl</i> SOLN 50 MG/ML	1	
<i>amphotericin b liposome</i>	3		<b>Antihistamines - Non-Sedating</b>		
<i>flucytosine</i>	1		<i>cetirizine hcl</i> TABS	1	QL(1 ea daily)
<i>griseofulvin microsize</i> SUSP	1	AL(At least 2 yrs old)	CLARITIN TABS ( <i>loratadine</i> )	1	
<i>griseofulvin microsize</i> TABS	1		<i>desloratadine</i> TABS	1	QL(1 ea daily)
<i>griseofulvin ultramicrosize</i>	1		<i>desloratadine</i> TBDP 2.5 MG	1	QL(1 ea daily)
<i>nystatin</i> TABS	1		<i>levocetirizine dihydrochloride</i> SOLN	1	QL(10 ml daily); RX/OTC
<i>terbinafine hcl</i> TABS	1	QL(1 ea daily)	<i>levocetirizine dihydrochloride</i> TABS	1	QL(1 ea daily); RX/OTC
<b>Imidazole-Related Antifungals</b>			<i>loratadine</i> CAPS	1	
CRESEMBA CAPS OR 186 MG	3	PA	<i>loratadine</i> CHEW	1	
<i>fluconazole</i> SUSR	1		<i>loratadine</i> SOLN	1	
<i>fluconazole</i> TABS	1		<i>loratadine</i> TABS	1	
<i>itraconazole</i> CAPS	1	QL(4 ea daily); PA	<i>loratadine</i> TBDP	1	
<i>itraconazole</i> SOLN	1	QL(20 ml daily); PA	QUZYTIR SOLN IV	3	PA
<i>ketoconazole</i>	1		ZYRTEC ALLERGY TABS ( <i>cetirizine hcl</i> )	1	QL(1 ea daily)
<i>posaconazole</i> SUSP	3	QL(20 ml daily)	<b>Antihistamines - Phenothiazines</b>		
TOLSURA CAPS	4	PA	<i>promethazine hcl</i> SOLN OR 6.25 MG/5ML	1	
<i>voriconazole</i> TABS	1	QL(4 ea daily)	<i>promethazine hcl</i> SUPP 50 MG	1	
<b>ANTI-HISTAMINES - Drugs to Treat Allergies</b>					
<b>Antihistamines - Alkylamines</b>					
<i>dexchlorpheniramine maleate</i> SOLN	1				
<b>Antihistamines - Ethanolamines</b>					
<i>carbinoxamine maleate</i> SOLN	1				

Drug Name	Drug Tier	Requirements/Limits
<i>promethazine hcl SUPP</i> 12.5 MG, 25 MG	1	QL(6 ea daily)
<i>promethazine hcl TABS</i>	1	
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1	
<i>cyproheptadine hcl TABS</i>	1	
<b>ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol</b>		
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
NEXLETOL	1	PA
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1	+; QL(4 ea daily)
Bile Acid Sequestrants		
<i>cholestyramine light</i> PACK	1	QL(6 ea daily)
<i>cholestyramine light</i> POWD	1	QL(24 gm daily)
<i>cholestyramine</i> PACK	1	QL(6 ea daily)
<i>cholestyramine</i> POWD	1	QL(25.2 gm daily)
<i>colesevelam hcl</i> PACK	1	QL(1 ea daily); PA
<i>colesevelam hcl</i> TABS	1	QL(7 ea daily)
<i>colestipol hcl</i> GRAN	1	QL(6 gm daily)
<i>colestipol hcl</i> PACK	1	QL(6 ea daily)
<i>colestipol hcl</i> TABS	1	QL(16 ea daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1	+; QL(1 ea daily)
<i>fenofibrate micronized</i> 67 MG, 134 MG, 200 MG	1	+; QL(1 ea daily)

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>benazepril hcl</i>	1	+	<i>doxazosin mesylate</i>	1	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1	QL(3 ea daily)	<i>guanfacine hcl</i>	1	
<i>captopril 12.5 MG</i>	1		<i>methyldopa TABS</i>	1	QL(6 ea daily)
<i>enalapril maleate TABS</i>	1	+	<i>prazosin hcl CAPS</i>	1	QL(4 ea daily)
<i>fosinopril sodium</i>	1	+	<i>terazosin hcl</i>	1	
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	+	<b>Antihypertensive Combinations</b>		
<i>moexipril hcl</i>	1	QL(2 ea daily)	<i>amlodipine besylate-benazepril hcl</i>	1	
<i>perindopril erbumine 2 MG, 8 MG</i>	1	QL(2 ea daily)	<i>amlodipine besylate-olmesartan medoxomil</i>	1	PA
<i>perindopril erbumine 4 MG</i>	1		<i>amlodipine besylate-valsartan</i>	1	QL(1 ea daily)
<i>quinapril hcl 5 MG, 10 MG</i>	1	QL(2 ea daily)	<i>amlodipine-valsartan-hydrochlorothiazide</i>	3	
<i>quinapril hcl 20 MG, 40 MG</i>	1		<i>atenolol &amp; chlorthalidone</i>	1	
<i>ramipril CAPS</i>	1	+	<i>benazepril &amp; hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1	QL(1 ea daily)
<i>trandolapril 4 MG</i>	1	+; QL(2 ea daily)	<i>benazepril &amp; hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1	
<i>trandolapril 1 MG, 2 MG</i>	1	+; QL(1 ea daily)	<i>bisoprolol &amp; hydrochlorothiazide</i>	1	QL(2 ea daily)
<b>Agents for Pheochromocytoma</b>			<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
<i>phenoxybenzamine hcl</i>	3	PA	<i>enalapril maleate &amp; hydrochlorothiazide 25 MG-10 MG</i>	1	
<b>Angiotensin II Receptor Antagonists</b>			<i>enalapril maleate &amp; hydrochlorothiazide 12.5 MG-5 MG</i>	1	QL(2 ea daily)
<i>candesartan cilexetil</i>	1	QL(1 ea daily)	<i>fosinopril sodium &amp; hydrochlorothiazide</i>	1	QL(1 ea daily)
EDARBI	3	QL(1 ea daily); PA	<i>irbesartan-hydrochlorothiazide</i>	1	+
<i>irbesartan</i>	1	+; QL(1 ea daily)	<i>lisinopril &amp; hydrochlorothiazide</i>	1	+
<i>losartan potassium</i>	1	+; QL(1 ea daily)	<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-50 MG</i>	1	+; QL(2 ea daily)
<i>olmesartan medoxomil</i>	1	+; QL(1 ea daily)			
<i>telmisartan</i>	1	QL(1 ea daily)			
<i>valsartan TABS</i>	1	+; QL(1 ea daily)			
<b>Antiadrenergic Antihypertensives</b>					
<i>clonidine</i>	3	QL(0.15 ea daily)			
<i>clonidine hcl TABS</i>	1	+; QL(8 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1	+; QL(1 ea daily)
<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1	
<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-50 MG</i>	1	QL(1 ea daily)
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	PA
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 ea daily)
<i>telmisartan-amlodipine</i>	1	QL(1 ea daily)
<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 ea daily)
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 ea daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>valsartan-hydrochlorothiazide</i>	1	QL(1 ea daily)
Antihypertensives - Misc.		
VECAMYL	3	PA
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	1	QL(1 ea daily)
Selective Aldosterone Receptor Antagonists (SARAs)		

Drug Name	Drug Tier	Requirements/Limits
<i>eplerenone</i>	1	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1	
<i>hydralazine hcl TABS</i>	1	+
<i>minoxidil 2.5 MG, 10 MG</i>	1	+
<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>		
Anti-infective Agents - Misc.		
<i>bacitracin</i>	3	
IMPAVIDO	3	QL(3 ea daily); PA
<i>metronidazole TABS</i>	1	
<i>trimethoprim TABS</i>	1	
XIFAXAN	3	QL(3 ea daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
<i>sulfamethoxazole-trimethoprim TABS</i>	1	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1	
<i>nitazoxanide TABS</i>	1	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1	
<i>imipenem-cilastatin IV</i>	1	
<i>meropenem</i>	1	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>Glycopeptides</b>		
<i>vancomycin hcl CAPS</i>	1	QL(4 ea daily; 40 ea per fill retail)
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1	QL(300 ml per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1	
<b>Leprostatics</b>		
<i>dapsone</i>	1	
<b>Lincosamides</b>		
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1	
<i>lincomycin hcl</i>	1	
<b>Monobactams</b>		
<i>aztreonam 1 GM</i>	1	
CAYSTON	4	QL(3 ml daily); PA
<b>Oxazolidinones</b>		
<i>linezolid SUSR</i>	1	
<i>linezolid TABS</i>	1	QL(2 ea daily); PA
SIVEXTRO TABS	3	PA
<b>Polymyxins</b>		
<i>polymyxin b sulfate SOLR</i>	1	
<b>Urinary Anti-infectives</b>		
<i>fosfomycin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>nitrofurantoin</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
<b>ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)</b>		
<b>Antimalarial Combinations</b>		
<i>atovaquone-proguanil hcl</i>	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 ea per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<b>Antimalarials</b>		
<i>chloroquine phosphate TABS 250 MG</i>	1	QL(3 ea daily)
<i>chloroquine phosphate TABS 500 MG</i>	1	
<i>hydroxychloroquine sulfate 100 MG</i>	1	QL(4 ea daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1	QL(3 ea daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1	QL(1 ea daily)
KRINTAFEL	3	QL(2 ea per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl</i>	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1	QL(3 ea daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1	PA
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
Antimychasthenic/Cholinergic Agents		
FIRDAPSE	4	PA
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN OR</i>	1	
<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>pyridostigmine bromide TBCR</i>	1	
<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
Antimycobacterial Agents		
<i>cycloserine</i>	1	QL(4 ea daily)
<i>ethambutol hcl TABS</i>	1	
<i>isoniazid SOLN</i>	1	
<i>isoniazid SYRP</i>	1	
<i>isoniazid TABS</i>	1	
PASER PACK	3	QL(3 ea daily)
PRIFTIN	3	
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	PA
<i>rifampin CAPS</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>rifampin SOLR</i>	1	
SIRTURO	3	PA
TRECTOR	3	QL(4 ea daily)
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>		
Alkylating Agents		
<i>bendamustine hcl SOLR</i>	4	PA
<i>busulfan SOLN</i>	4	PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>carmustine</i>	4	PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1	PA
<i>cyclophosphamide SOLR IJ</i>	4	SP; PA
GLEOSTINE 10 MG	4	PA
GLEOSTINE 40 MG, 100 MG	4	PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA
<i>ifosfamide SOLR</i>	4	PA
LEUKERAN	4	PA
<i>melphalan</i>	1	
<i>melphalan hcl IV</i>	1	
MYLERAN TABS	4	PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	PA
TEMODAR SOLR	4	PA
<i>temozolomide CAPS</i>	4	PA
<i>thiotepa 15 MG</i>	4	PA
ZANOSAR	4	PA
Antimetabolites		
<i>azacitidine SUSR</i>	4	PA
<i>capecitabine</i>	4	PA
<i>clofarabine</i>	4	PA
<i>cytarabine SOLN</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>decitabine</i>	4	PA
<i>floxuridine</i>	4	SP; PA
<i>fludarabine phosphate SOLN</i>	4	SP; PA
<i>fludarabine phosphate SOLR</i>	4	PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
<i>gemcitabine hcl SOLR 200 MG</i>	4	PA
<i>gemcitabine hcl SOLR 2 GM</i>	4	SP; PA
<i>mercaptopurine TABS</i>	1	
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1	
<i>methotrexate sodium SOLR</i>	1	
<i>methotrexate sodium TABS 2.5 MG</i>	1	
<i>nelarabine</i>	4	SP; PA
<i>pemetrexed disodium SOLR 500 MG</i>	4	PA
<i>pralatrexate 20 MG/ML</i>	4	PA
TABLOID	4	PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	PA
<b>Antineoplastic - Angiogenesis Inhibitors</b>		
INLYTA	4	QL(2 ea daily); 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

Drug Name	Drug Tier	Requirements/Limits
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	PA
ZIRABEV	4	PA
<b>Antineoplastic - Antibodies</b>		
ADCETRIS	4	PA
ARZERRA	4	PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	PA
<b>Antineoplastic - Anti-HER2 Agents</b>		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	PA
TRAZIMERA	4	PA
TUKYSA	4	PA
<b>Antineoplastic - EGFR Inhibitors</b>		
ERBITUX	4	PA
<i>erlotinib hcl</i>	4	QL(1 ea daily); PA
<i>gefitinib</i>	4	QL(2 ea daily); PA
GILOTRIF	4	QL(1 ea daily); PA
TAGRISSE 80 MG	4	QL(1 ea daily); PA
TAGRISSE 40 MG	4	QL(2 ea daily); PA
VECTIBIX 100 MG/5ML	4	PA
VIZIMPRO	4	QL(1 ea daily); PA
<b>Antineoplastic - Hedgehog Pathway Inhibitors</b>		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 ea daily); PA
ODOMZO	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Antineoplastic - Hormonal and Related Agents</b>			<i>tamoxifen citrate TABS</i>	0	
<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); PA	<i>toremifene citrate</i>	1	
<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); PA	TRELSTAR MIXJECT	4	PA
<i>anastrozole</i>	1	QL(1 ea daily)	XTANDI CAPS	4	QL(4 ea daily); PA
<i>bicalutamide</i>	1	QL(1 ea daily); SP	XTANDI TABS 80 MG	4	QL(2 ea daily); PA
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	PA	XTANDI TABS 40 MG	4	QL(4 ea daily); PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); PA	YONSA	4	QL(4 ea daily); PA
EMCYT	4	PA	ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); PA
ERLEADA 60 MG	4	QL(4 ea daily); PA	ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); PA
ERLEADA 240 MG	4	QL(1 ea daily); PA	<b>Antineoplastic - Immunomodulators</b>		
<i>exemestane</i>	4	QL(1 ea daily)	POMALYST	4	QL(1 ea daily); PA
FIRMAGON	4	QL(0.143 ea daily); PA	<b>Antineoplastic - PDGFR-alpha Inhibitors</b>		
<i>flutamide</i>	4	QL(6 ea daily); SP; PA	AYVAKIT	4	QL(1 ea daily); PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); PA	<b>Antineoplastic - XPO1 Inhibitors</b>		
<i>letrozole</i>	1		XPOVIO	4	PA
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA	XPOVIO 60 MG TWICE WEEKLY	4	PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 ea daily); PA	XPOVIO 80 MG TWICE WEEKLY	4	PA
LUPRON DEPOT (3-MONTH) KIT IM	4	PA	<b>Antineoplastic Antibiotics</b>		
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); PA	<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); PA	<i>dactinomycin</i>	4	PA
LYSODREN	4	PA	<i>doxorubicin hcl liposomal IV 2 MG/ML</i>	4	PA
<i>megestrol acetate SUSP</i>	1		<i>doxorubicin hcl SOLN</i>	4	SP; PA
<i>megestrol acetate TABS</i>	1		<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	PA
<i>nilutamide</i>	1	QL(2 ea daily)	<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	PA
NUBEQA	4	QL(4 ea daily); PA	<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>tamoxifen citrate TABS</i>	0		<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA	IBRANCE CAPS	4	QL(1 ea daily); PA
<i>valrubicin</i>	4	PA	IBRANCE TABS	4	QL(1 ea daily); PA
Antineoplastic Combinations			ICLUSIG	4	QL(1 ea daily); PA
KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA	<i>imatinib mesylate</i>	4	QL(2 ea daily); PA
KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA	IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA
KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA	IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA
Antineoplastic Enzyme Inhibitors			IMBRUVICA SUSP	4	QL(8 ml daily); PA
ALECENSA	4	QL(4 ea daily); PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA	INREBIC	4	PA
ALUNBRIG TBPK	4	QL(1 ea daily); PA	JAKAFI 10 MG, 20 MG	4	QL(2 ea daily); SP; PA
BALVERSA	4	PA	JAKAFI 5 MG, 15 MG, 25 MG	4	QL(2 ea daily); PA
<i>bortezomib SOLR IJ</i>	4	PA	KISQALI	4	QL(2 ea daily); PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	KISQALI	4	QL(2.5 ea daily); PA
BOSULIF TABS	4	QL(1 ea daily); PA	KOSELUGO	4	PA
BRAFTOVI 75 MG	4	QL(6 ea daily); PA	KYPROLIS	4	PA
BRUKINSA	4	PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); 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 TABS 0.5 MG	4	QL(3 ea daily); PA
CAPRELSA	4	QL(1 ea daily); PA	MEKINIST TABS 2 MG	4	QL(1 ea daily); PA
COMETRIQ KIT	4	QL(3 ea daily); PA	MEKTOVI	4	QL(6 ea daily); PA
COMETRIQ KIT	4	QL(4 ea daily); PA	NINLARO	4	QL(0.143 ea daily); PA
COMETRIQ KIT	4	QL(2 ea daily); PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); PA
COPIKTRA	4	PA	PEMAZYRE	4	QL(1 ea daily); PA
<i>dasatinib</i>	4	QL(1 ea daily); PA	PIQRAY 200MG DAILY DOSE	4	QL(1 ea daily); PA
<i>everolimus TABS</i>	4	QL(1 ea daily); PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PIQRAY 250MG DAILY DOSE	4	QL(1 ea daily); PA	XOSPATA	4	PA
PIQRAY 300MG DAILY DOSE	4	QL(1 ea daily); PA	ZEJULA CAPS	4	QL(3 ea daily); PA
QINLOCK	4	PA	ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
RETEVMO CAPS	4	PA	ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
<i>romidepsin SOLR</i>	4	PA	ZELBORAF	4	QL(8 ea daily); PA
ROZLYTREK CAPS	4	PA	ZOLINZA	4	QL(4 ea daily); PA
RUBRACA	4	QL(4 ea daily); PA	ZYDELIG	4	QL(2 ea daily); PA
SCEMBLIX 20 MG, 40 MG	4	QL(2 ea daily); PA	<b>Antineoplastic Enzymes</b>		
SCEMBLIX 100 MG	4	QL(4 ea daily); PA	ONCASPAR	4	PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily); PA	<b>Antineoplastics Misc.</b>		
SPRYCEL ( <i>dasatinib</i> )	4	QL(1 ea daily); PA	ACTIMMUNE 100 MCG/0.5ML	4	PA
STIVARGA	4	QL(4 ea daily); PA	<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA	<i>bexarotene</i>	4	PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA	<i>dacarbazine SOLR 200 MG</i>	4	SP; PA
TABRECTA	4	PA	<i>hydroxyurea</i>	1	
TAFINLAR CAPS	4	QL(4 ea daily); PA	MATULANE	4	PA
TALZENNA	4	QL(1 ea daily); PA	PHOTOFRIN	4	PA
TALZENNA	4	QL(1 ea daily); PA	PROLEUKIN	4	PA
TASIGNA	4	QL(4 ea daily); PA	SYNRIBO	4	PA
TAZVERIK	4	PA	<i>tretinoin (chemotherapy)</i>	1	
<i>temsirolimus</i>	4	QL(0.143 ml daily); PA	UVADEX	4	PA
TIBSOVO	4	PA	<b>Chemotherapy Adjuncts</b>		
TURALIO	4	PA	KEPIVANCE 6.25 MG	4	PA
TURALIO	4	AC; PA	<b>Chemotherapy Rescue/Antidote/Protective Agents</b>		
VERZENIO	4	QL(2 ea daily); PA	<i>leucovorin calcium SOLR</i>	1	
VITRAKVI CAPS	4	PA	<i>leucovorin calcium TABS</i>	1	
VITRAKVI SOLN	4	PA	VORAXAZE	4	PA
XALKORI CAPS	4	QL(2 ea daily); PA	<b>Mitotic Inhibitors</b>		
			<i>docetaxel CONC 20 MG/ML</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA
<i>eribulin mesylate</i>	4	PA
ETOPOPHOS	4	PA
<i>etoposide CAPS</i>	4	PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA
HALAVEN ( <i>eribulin mesylate</i> )	4	PA
IXEMPRA KIT 15 MG	4	PA
JEVTANA	4	PA
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML</i>	4	SP; PA
<i>paclitaxel 150 MG/25ML</i>	4	PA
<i>paclitaxel protein-bound particles</i>	4	PA
<i>vincristine sulfate</i>	4	PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	PA
Topoisomerase I Inhibitors		
HYCANTIN CAPS	4	PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	PA
<i>topotecan hcl SOLR</i>	4	PA
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1	
<i>benztropine mesylate TABS</i>	1	
<i>trihexyphenidyl hcl SOLN</i>	1	
<i>trihexyphenidyl hcl TABS</i>	1	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1	QL(8 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>tolcapone</i>	1	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1	
<i>amantadine hcl SOLN</i>	1	
<i>amantadine hcl TABS</i>	1	
<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>bromocriptine mesylate CAPS</i>	1	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>carbidopa-levodopa TABS</i>	1	
<i>carbidopa-levodopa TBCR</i>	1	
<i>carbidopa-levodopa TBDP</i>	1	
NEUPRO	2	
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1	QL(4 ea daily)
<i>ropinirole hydrochloride TABS</i>	1	
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1	QL(1 ea daily); PA
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1	QL(2 ea daily); PA
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1	QL(1 ea daily); PA
<i>selegiline hcl CAPS</i>	1	
<i>selegiline hcl TABS</i>	1	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
Antimanic Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lithium</i>	1		<i>asenapine maleate 5 MG, 10 MG</i>	1	QL(2 ea daily); PA
<i>lithium carbonate CAPS</i>	1		<i>clozapine TABS</i>	1	
<i>lithium carbonate TABS</i>	1		<i>clozapine TBDP 150 MG</i>	1	
<i>lithium carbonate TBCR</i>	1		<i>clozapine TBDP 12.5 MG</i>	1	QL(6 ea daily)
<b>Antipsychotics - Misc.</b>			<i>clozapine TBDP 200 MG</i>	1	QL(4 ea daily)
EQUETRO 300 MG	3	QL(4 ea daily); PA	<i>clozapine TBDP 100 MG</i>	1	QL(9 ea daily)
EQUETRO 200 MG	3	QL(8 ea daily); PA	<i>clozapine TBDP 25 MG</i>	1	QL(3 ea daily)
EQUETRO 100 MG	3	QL(2 ea daily); PA	<i>loxapine succinate</i>	1	
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1	QL(1 ea daily)	<i>olanzapine SOLR</i>	1	QL(0.215 ea daily)
<i>lurasidone hcl 80 MG</i>	1	QL(2 ea daily)	<i>olanzapine TABS 2.5 MG, 5 MG</i>	1	QL(4 ea daily)
<i>ziprasidone hcl</i>	1	QL(2 ea daily); AL(At least 18 yrs old)	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1	QL(2 ea daily)
<b>Benzisoxazoles</b>			<i>olanzapine TBDP 20 MG</i>	1	QL(1 ea daily)
FANAPT	2	QL(2 ea daily); PA	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1	QL(2 ea daily)
FANAPT TITRATION PACK	2	PA	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1	QL(2 ea daily); AL(At least 10 yrs old)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1	QL(1 ea daily)	<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old)
<i>paliperidone 6 MG</i>	1	QL(2 ea daily)	<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1	QL(2 ea daily); PA
PERSERIS PRSY	2	QL(0.072 ea daily); PA	<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1	QL(1 ea daily); PA
<i>risperidone microspheres</i>	1	QL(0.072 ea daily); PA	<b>Phenothiazines</b>		
<i>risperidone SOLN</i>	1	QL(8 ml daily)	<i>chlorpromazine hcl SOLN</i>	3	
<i>risperidone TABS</i>	1	QL(4 ea daily)	<i>chlorpromazine hcl TABS</i>	1	
<i>risperidone TBDP</i>	1	QL(4 ea daily)	<i>fluphenazine hcl CONC</i>	1	
<b>Butyrophenones</b>			<i>fluphenazine hcl ELIX</i>	1	
<i>haloperidol decanoate</i>	1	QL(0.036 ml daily)	<i>fluphenazine hcl SOLN</i>	1	
<i>haloperidol lactate CONC</i>	1		<i>fluphenazine hcl TABS</i>	1	
<i>haloperidol lactate SOLN</i>	1		<i>perphenazine TABS</i>	1	
<i>haloperidol TABS</i>	1		<i>prochlorperazine</i>	1	
<b>Dibenzapines</b>			<i>prochlorperazine maleate TABS</i>	1	
<i>asenapine maleate 2.5 MG</i>	1	QL(4 ea daily); PA	<i>thioridazine hcl</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>trifluoperazine hcl TABS</i>	1		<i>efavirenz TABS</i>	1	QL(1 ea daily)
<b>Quinolinone Derivatives</b>			<i>emtricitabine CAPS</i>	1	QL(1 ea daily)
<i>aripiprazole SOLN OR</i>	1	QL(30 ml daily); AL(At least 6 yrs old)	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1	QL(1 ea daily)
<i>aripiprazole TABS</i>	1	QL(1 ea daily); AL(At least 6 yrs old)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
REXULTI	3	PA	EMTRIVA CAPS ( <i>emtricitabine</i> )	2	QL(1 ea daily)
<b>Thioxanthenes</b>			EMTRIVA SOLN	3	QL(24 ml daily)
<i>thiothixene</i>	1		<i>etravirine 100 MG</i>	1	QL(4 ea daily)
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>			<i>etravirine 200 MG</i>	1	QL(2 ea daily)
<b>Antiretrovirals</b>			EVOTAZ	3	QL(1 ea daily)
<i>abacavir sulfate-lamivudine</i>	1	QL(1 ea daily)	<i>fosamprenavir calcium TABS</i>	1	QL(4 ea daily)
<i>abacavir sulfate SOLN</i>	1	QL(32 ml daily)	FUZEON SOLR	4	PA
<i>abacavir sulfate TABS</i>	1	QL(2 ea daily)	GENVOYA	3	QL(1 ea daily)
APTIVUS CAPS	3	QL(4 ea daily)	INTELENCE 25 MG	3	QL(8 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1	QL(1 ea daily)	ISENTRESS HD TABS	3	QL(2 ea daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1	QL(2 ea daily)	ISENTRESS CHEW	3	QL(6 ea daily)
BIKTARVY	3	QL(1 ea daily)	ISENTRESS TABS	3	QL(2 ea daily)
CIMDUO	3	QL(1 ea daily); PA	JULUCA	3	QL(1 ea daily)
COMPLERA	3	QL(1 ea daily)	<i>lamivudine SOLN</i>	1	QL(30 ml daily)
<i>darunavir TABS 600 MG</i>	1	QL(2 ea daily)	<i>lamivudine TABS 150 MG</i>	1	QL(2 ea daily)
<i>darunavir TABS 800 MG</i>	1	QL(1 ea daily)	<i>lamivudine TABS 300 MG</i>	1	QL(1 ea daily)
DELSTRIGO	3	QL(1 ea daily)	<i>lamivudine-zidovudine</i>	1	QL(2 ea daily)
DOVATO	3	QL(1 ea daily)	LEXIVA SUSP	3	QL(56 ml daily)
EDURANT	3	QL(1 ea daily)	<i>lopinavir-ritonavir SOLN</i>	1	QL(12.5 ml daily)
<i>efavirenz CAPS 200 MG</i>	1	QL(2 ea daily)	<i>lopinavir-ritonavir TABS</i>	1	QL(4 ea daily)
<i>efavirenz CAPS 50 MG</i>	1	QL(3 ea daily)	<i>maraviroc TABS</i>	1	QL(2 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	QL(1 ea daily)	<i>nevirapine SUSP</i>	1	QL(40 ml daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	QL(1 ea daily)	<i>nevirapine TABS</i>	1	QL(2 ea daily)
			<i>nevirapine TB24 100 MG</i>	1	QL(3 ea daily)
			<i>nevirapine TB24 400 MG</i>	1	QL(1 ea daily)
			NORVIR CAPS	2	QL(12 ea daily)
			NORVIR PACK	3	QL(12 ea daily)

Drug Name	Drug Tier	Requirements/Limits
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>	1	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>	1	QL(2 ea daily)
STRIBILD	3	QL(1 ea daily)
<i>tenofovir disoproxil fumarate TABS</i>	1	
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 250 MG	3	QL(10 ea daily)
VIRACEPT TABS 625 MG	3	QL(4 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 CAPS</i>	1	QL(6 ea daily)
<i>zidovudine SYRP</i>	1	QL(60 ml daily)
<i>zidovudine TABS</i>	1	QL(2 ea daily)
<b>CMV Agents</b>		
<i>cidofovir</i>	3	
<i>ganciclovir sodium SOLR</i>	1	
<i>valganciclovir hcl TABS</i>	1	QL(4 ea daily); PA
<b>Hepatitis Agents</b>		
<i>adefovir dipivoxil</i>	4	QL(1 ea daily); PA

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>nicardipine hcl SOLN</i>	1	
<i>nifedipine CAPS 10 MG</i>	1	
<i>nifedipine CAPS 20 MG</i>	1	QL(9 ea daily)
<i>nifedipine TB24</i>	1	
<i>nifedipine TB24 60 MG</i>	1	+; QL(2 ea daily)
<i>nifedipine TB24 30 MG</i>	1	+
<i>nifedipine TB24 90 MG</i>	1	+; QL(1 ea daily)
<i>nimodipine CAPS</i>	1	
<i>nisoldipine</i>	1	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1	QL(1 ea daily)
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1	
<i>verapamil hcl TABS</i>	1	+
<i>verapamil hcl TBCR</i>	1	+
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	1	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1	
<i>LANOXIN SOLN IJ (digoxin)</i>	2	
<i>LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)</i>	2	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate-hydralazine hcl</i>	1	
Impotence Agents		
<i>sildenafil citrate</i>	1	QL(0.1334 ea daily); PA
<i>tadalafil 5 MG</i>	1	BPH Only; QL(1 ea daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
<i>ORENITRAM TBCR</i>	4	PA
<i>treprostinil SOLN IJ</i>	4	PA
<i>TYVASO REFILL KIT SOLN IN</i>	4	PA
<i>TYVASO STARTER KIT SOLN IN</i>	4	PA
<i>TYVASO SOLN IN</i>	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 ea daily); PA
<i>bosentan TABS</i>	4	QL(2 ea daily); PA
<i>OPSUMIT</i>	4	QL(1 ea daily); PA
<i>TRACLEER TBSO</i>	4	QL(2 ea daily); PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); 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); PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); PA
Pulmonary Hypertension - Prostacyclin Receptor		

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

Drug Name	Drug Tier	Requirements/Limits
<i>cefepime</i> SOLR IV 2 GM	1	
<b>Cephalosporins - 5th Generation</b>		
TEFLARO	3	
<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>		
<b>Combination Contraceptives - Oral</b>		
<i>desogestrel &amp; ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	
<i>ethynodiol diacet &amp; eth estrad</i>	0	
<i>levonorgestrel &amp; eth estradiol TABS</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
LO LOESTRIN FE TABS	0	
NATAZIA	0	
NEXTSTELLIS	0	
<i>norethin acet &amp; estrad-fe CAPS</i>	0	
<i>norethin acet &amp; estrad-fe CHEW</i>	0	
<i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>norethindrone &amp; eth estradiol</i>	0	
<i>norethindrone &amp; ethinyl estradiol-fe</i>	0	
<i>norethindrone acet &amp; 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 &amp; ethinyl estradiol 30 MCG-0.3 MG</i>	0	

Drug Name	Drug Tier	Requirements/Limits
TYBLUME CHEW	0	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	0	
TWIRLA	0	QL(3 ea per 28 day(s) retail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
Emergency Contraceptives		
ELLA	0	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	1 max fill(s) 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 - Oral		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 ea daily)
<b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b>		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1	QL(3 ea daily)
<i>deflazacort SUSP</i>	4	PA
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1	
<i>dexamethasone ELIX</i>	1	
<i>dexamethasone SOLN</i>	1	
<i>dexamethasone TABS</i>	1	
EMFLAZA SUSP ( <i>deflazacort</i> )	4	PA
<i>hydrocortisone sod succinate 100 MG</i>	1	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1	
<i>methylprednisolone TABS</i>	1	
<i>methylprednisolone TBPK</i>	1	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1	
<i>prednisolone sodium phosphate TBDP</i>	3	
<i>prednisolone SOLN</i>	1	
<i>prednisolone TABS</i>	1	
<i>prednisone SOLN</i>	1	
<i>prednisone TABS</i>	1	
<i>prednisone TBPK</i>	1	
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	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1	
<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
Antitussives		
<i>benzonatate 150 MG</i>	1	QL(4 ea daily)
<i>benzonatate 200 MG</i>	1	QL(3 ea daily)
<i>benzonatate 100 MG</i>	1	QL(6 ea daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1	
TUZISTRA XR	2	PA
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1	
NEBUSAL NEBU	1	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1	
Mucolytics		
<i>acetylcysteine SOLN</i>	1	
<b>DERMATOLOGICALS - Drugs to Treat Skin Conditions</b>		
Acne Products		
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1	AL(At least 12 yrs old); PA
<i>adapalene CREA</i>	1	AL(At least 12 yrs old); ST
<i>adapalene GEL 0.1 %</i>	1	AL(At least 12 yrs old); ST; RX/OTC
<i>adapalene GEL 0.3 %</i>	1	AL(At least 12 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); PA	<i>erythromycin (acne aid) PADS</i>	1	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>	1	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>	1	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>	1	AL(At least 12 yrs old); RX/OTC	<i>sulfacetamide sodium (acne)</i>	1	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	1	QL(3 gm daily); AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1	AL(At least 12 yrs old); PA
<i>benzoyl peroxide LIQD 4 %, 7 %, 10 %</i>	1	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1	AL(At least 12 yrs old); PA	<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	1	QL(8 gm daily); AL(At least 12 yrs old)	<i>tretinoin microsphere 0.1 %</i>	1	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) LOTN</i>	1	AL(At least 12 yrs old)	<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) SOLN</i>	1	QL(4 ml daily); AL(At least 12 yrs old)	<i>tretinoin GEL 0.01 %, 0.025 %</i>	1	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) SWAB</i>	1	AL(At least 12 yrs old)	<b>Agents for External Genital and Perianal Warts</b>		
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	AL(At least 12 yrs old); PA	VEREGEN	3	QL(1 gm daily)
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1	AL(At least 12 yrs old); PA	<b>Antibiotics - Topical</b>		
<i>clindamycin phosphate-tretinoin</i>	1	AL(At least 12 yrs old); PA	ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)
DIFFERIN LOTN	2	AL(At least 12 yrs old); PA	<i>gentamicin sulfate (topical) CREA</i>	1	QL(1 gm daily)
			<i>gentamicin sulfate (topical) OINT</i>	1	
			<i>mupirocin OINT</i>	1	QL(6 gm daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA	<i>naftifine hcl CREA 1 %</i>	1	QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antifungals - Topical			<i>nystatin (topical) CREA</i>	1	QL(10 gm daily)
<i>butenafine hcl</i>	1	QL(6 gm daily); RX/OTC	<i>nystatin (topical) OINT</i>	1	QL(6 gm daily)
<i>ciclopirox olamine CREA</i>	1	QL(90 gm per fill retail); 1 max fill(s) per 30 day(s) retail	<i>nystatin (topical) POWD EX</i>	1	QL(10 gm daily)
<i>ciclopirox olamine SUSP</i>	1		<i>nystatin-triamcinolone CREA</i>	1	QL(10 gm daily)
<i>ciclopirox GEL</i>	1	QL(3.35 gm daily)	<i>nystatin-triamcinolone OINT</i>	1	QL(4 gm daily)
<i>ciclopirox SHAM</i>	1	QL(10 ml daily)	<i>oxiconazole nitrate CREA</i>	1	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 SOLN</i>	1	QL(0.22 ml daily)	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>clotrimazole (topical) CREA</i>	1	QL(4.5 gm daily); RX/OTC	<i>sulconazole nitrate CREA</i>	1	
<i>clotrimazole (topical) SOLN</i>	1	QL(10 ml daily); RX/OTC	<i>sulconazole nitrate SOLN</i>	1	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>clotrimazole w/ betamethasone CREA</i>	1	QL(8 gm daily)	<i>tavaborole</i>	1	PA
<i>clotrimazole w/ betamethasone LOTN</i>	1		Anti-inflammatory Agents - Topical		
<i>econazole nitrate CREA</i>	1	QL(85 gm per fill retail; 85 per fill mail)	<i>diclofenac epolamine PTCH EX</i>	1	QL(2 ea daily); PA
ERTACZO	3	QL(2.15 gm daily)	<i>diclofenac sodium (topical) GEL EX</i>	1	QL(3.34 gm daily); RX/OTC
<i>ketoconazole (topical) CREA</i>	1	QL(10 gm daily)	Antineoplastic or Premalignant Lesion Agents - Topical		
<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(20 ml daily)	<i>bexarotene (topical)</i>	4	PA
<i>luliconazole</i>	1	PA			
<i>naftifine hcl CREA 2 %</i>	1	QL(2 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (actinic keratoses) EX</i>	1	QL(3.34 gm daily); PA	SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(4 gm daily)	SKYRIZI PSKT	4	QL(0.025 ea daily); PA
<i>fluorouracil (topical) SOLN</i>	1	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>	1	QL(1 gm daily)
<i>acitretin 10 MG, 17.5 MG</i>	1	QL(1 ea daily)	TREMFYA SOAJ	4	QL(0.018 ml daily); PA
<i>acitretin 25 MG</i>	1	QL(2 ea daily)	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ml daily); PA
<i>calcipotriene CREA</i>	1	QL(4 gm daily); PA	Antiseborrheic Products		
<i>calcipotriene OINT</i>	1	QL(4 gm daily); PA	<i>selenium sulfide LOTN 2.5 %</i>	1	
<i>calcipotriene SOLN</i>	1	QL(4 ml daily); PA	Antivirals - Topical		
<i>calcitriol (topical)</i>	1	QL(3.34 gm daily)	<i>acyclovir topical CREA</i>	1	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>	1	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 150 MG/ML	4	QL(0.072 ml daily); PA	Burn Products		
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily); PA	<i>mafenide acetate PACK</i>	3	
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA	<i>silver sulfadiazine</i>	1	QL(20 gm daily)
<i>methoxsalen rapid</i>	1	QL(4 ea daily)	SULFAMYLLON CREA	3	
			Corticosteroids - Topical		
			<i>alclometasone dipropionate CREA</i>	1	QL(2 gm daily)
			<i>alclometasone dipropionate OINT</i>	1	QL(3 gm daily)

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

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinonide CREA 0.1 %</i>	1	QL(4 gm daily)
<i>fluocinonide GEL</i>	1	
<i>fluocinonide OINT</i>	1	QL(2 gm daily)
<i>fluocinonide SOLN</i>	1	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>	1	QL(4 gm daily)
<i>fluticasone propionate LOTN</i>	1	QL(6 ml daily)
<i>fluticasone propionate OINT</i>	1	QL(4 gm daily)
<i>halcinonide CREA</i>	1	PA
<i>halobetasol propionate CREA</i>	1	QL(3.5 gm daily)
<i>halobetasol propionate OINT</i>	1	QL(3.5 gm daily)
HALOG OINT	3	PA
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1	QL(15.15 ea daily); RX/OTC
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1	QL(15.15 gm daily); RX/OTC
<i>hydrocortisone butyrate CREA</i>	1	QL(3 gm daily)
<i>hydrocortisone butyrate OINT</i>	1	QL(3 gm daily)
<i>hydrocortisone butyrate SOLN</i>	1	QL(5 ml daily)
<i>hydrocortisone valerate CREA</i>	1	
<i>hydrocortisone valerate OINT</i>	1	
<i>mometasone furoate CREA</i>	1	QL(3 gm daily)
<i>mometasone furoate OINT</i>	1	QL(4 gm daily)
<i>mometasone furoate SOLN</i>	1	QL(5 ml daily)
<i>prednicarbate OINT</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1	QL(3.34 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1	QL(15.15 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(5 gm daily)
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1	QL(6 ml daily)
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1	
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1	QL(6 gm daily)
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1	QL(15.15 gm daily)
<b>Eczema Agents</b>		
DUPIXENT SOAJ SC 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOAJ SC 300 MG/2ML	4	QL(0.29 ml daily); PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA
<b>Emollients</b>		
<i>lactic acid (ammonium lactate) CREA</i>	1	QL(12.9 gm daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC
<b>Enzymes - Topical</b>		
SANTYL OINT	3	PA
<b>Immunomodulating Agents - Topical</b>		
<i>imiquimod 5 %</i>	1	QL(12 ea per fill retail; 12 per fill mail)
<b>Immunosuppressive Agents - Topical</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>pimecrolimus</i>	1	QL(3 gm daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1	AL(At least 2 yrs old); PA
<b>Keratolytic/Antimitotic/Vesicant Agents</b>		
<i>podofilox SOLN</i>	1	
<b>Local Anesthetics - Topical</b>		
<i>lidocaine hcl GEL 2 %</i>	1	QL(4 ml daily)
<i>lidocaine hcl PRSY</i>	1	QL(4 ml daily)
<i>lidocaine hcl SOLN</i>	1	QL(10 ml daily)
<i>lidocaine-prilocaine CREA</i>	1	QL(1 gm daily)
<i>lidocaine PTCH 5 %</i>	1	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
<b>Phosphodiesterase 4 (PDE4) Inhibitors - Topical</b>		
EUCRISA	3	QL(2 gm daily); PA
<b>Rosacea Agents</b>		
<i>azelaic acid GEL</i>	1	QL(1.67 gm daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA
<i>metronidazole (topical) CREA</i>	1	QL(3 gm daily)
<i>metronidazole (topical) GEL 1 %</i>	1	QL(5 gm daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(3 gm daily)
<i>metronidazole (topical) LOTN</i>	1	
<b>Scabicides &amp; Pediculicides</b>		
<i>crotamiton LOTN</i>	1	PA
<i>ivermectin (pediculicide)</i>	1	PA
<i>malathion</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>permethrin CREA</i>	1	
<i>permethrin LIQD EX</i>	1	
<i>spinosad</i>	1	PA
<b>Wound Care Products</b>		
REGRANEX	3	QL(0.5 gm daily)
<b>DIAGNOSTIC PRODUCTS</b>		
<b>Diagnostic Drugs</b>		
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
<b>Diagnostic Tests</b>		
CHEMSTRIP-K STRP	1	#
FORA GTEL BLOOD KETONE TEST STRIPS	1	#
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1	#
GOJJI BLOOD KETONE TEST STRIPS	1	#
KETONE TEST STRIPS STRP	1	#
KETONE STRP	1	#
KETOSTIX STRP	1	#
NOVA MAX PLUS KETONE TESTSTRIPS	1	#
PRECISION XTRA	1	#
RELION KETONE TEST STRIPS STRP	1	#
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP	1	#; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1	#; QL(3.34 ea daily); RX/OTC
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Enzymes</b>		
Digestive Enzymes		
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1	
<i>acetazolamide CP12</i>	1	QL(2 ea daily)
<i>acetazolamide TABS 250 MG</i>	1	QL(4 ea daily)
<i>acetazolamide TABS 125 MG</i>	1	QL(8 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1	QL(6 ea daily)
Diuretic Combinations		
<i>amiloride &amp; hydrochlorothiazide</i>	1	
<i>spironolactone &amp; hydrochlorothiazide</i>	1	
<i>triamterene &amp; hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	
<i>triamterene &amp; hydrochlorothiazide TABS</i>	1	
Loop Diuretics		

Drug Name	Drug Tier	Requirements/Limits
<i>bumetanide SOLN 0.25 MG/ML</i>	1	
<i>bumetanide TABS</i>	1	QL(5 ea daily)
<i>ethacrynic acid</i>	1	QL(16 ea daily)
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1	
<i>furosemide TABS</i>	1	
<i>torseamide TABS</i>	1	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1	
<i>spironolactone TABS</i>	1	
<i>triamterene CAPS</i>	1	QL(3 ea daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1	
DIURIL SUSP	2	QL(20 ml daily)
<i>hydrochlorothiazide CAPS</i>	1	QL(2 ea daily)
<i>hydrochlorothiazide TABS</i>	1	QL(2 ea daily)
<i>indapamide TABS 2.5 MG</i>	1	QL(2 ea daily)
<i>indapamide TABS 1.25 MG</i>	1	QL(1 ea daily)
<i>metolazone</i>	1	QL(2 ea daily)
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>- Drugs to Treat Bone Disease and Regulate Hormones</b>		
Bone Density Regulators		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	QL(0.143 ea daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	QL(1 ea daily)
<i>calcitonin (salmon) NA</i>	1	QL(0.14 ml daily)
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA
<i>ibandronate sodium SOLN</i>	4	PA
<i>ibandronate sodium TABS</i>	1	QL(0.036 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA	NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	1	PA
PAMIDRONATE DISODIUM SOLN	4	PA	NORDITROPIN FLEXPRO SOPN 30 MG/3ML	1	PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; PA	ZORBTIVE SC	4	PA
<i>risedronate sodium TABS 35 MG</i>	1	QL(0.143 ea daily); PA	Hormone Receptor Modulators		
<i>risedronate sodium TABS 150 MG</i>	1	QL(0.036 ea daily); PA	OSPHERA	3	PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1	QL(1 ea daily); PA	<i>raloxifene hcl</i>	0	QL(1 ea daily)
<i>risedronate sodium TBEC</i>	1	PA	Insulin-Like Growth Factors (Somatomedins)		
<i>teriparatide SOPN</i>	4	QL(0.09 ml daily); SP; PA	INCRELEX	1	PA
TYMLOS	4	PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
XGEVA SOLN	4	PA	FENSOLVI SC	4	PA
<i>zoledronic acid CONC</i>	4	PA	LUPRON DEPOT-PED (1-MONTH)	4	PA
<i>zoledronic acid SOLN</i>	4	PA	LUPRON DEPOT-PED (3-MONTH) 30 MG	4	PA
Corticotropin			LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
ACTHAR GEL	3	PA	SYNAREL	4	PA
Fertility Regulators			Metabolic Modifiers		
CHORIONIC GONADOTROPIN IM	4	PA	ALDURAZYME	4	PA
GnRH/LHRH Antagonists			<i>betaine</i>	4	PA
<i>ganirelix acetate</i>	4	PA	<i>calcitriol CAPS</i>	1	
ORILISSA	2	PA	<i>calcitriol SOLN IV</i>	1	
Growth Hormone Releasing Hormones (GHRH)			<i>cinacalcet hcl</i>	4	QL(4 ea daily); PA
EGRIFTA 2 MG	4	PA	<i>doxercalciferol CAPS</i>	1	
EGRIFTA SV	4	PA	<i>doxercalciferol SOLN</i>	1	
Growth Hormones			ELAPRASE	4	PA
GENOTROPIN MINIQUICK PRSY	4	PA	LUMIZYME	4	PA
GENOTROPIN CART SC	4	PA	MYALEPT	4	PA
HUMATROPE CART IJ	1	SP; PA	<i>nitisinone CAPS</i>	4	PA
			<i>paricalcitol CAPS</i>	1	
			<i>paricalcitol SOLN</i>	1	
			PHEBURANE PLLT	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>sapropterin dihydrochloride</i> PACK	4	PA
<i>sapropterin dihydrochloride</i> TABS	4	PA
<i>sodium phenylbutyrate</i> POWD	1	PA
<i>sodium phenylbutyrate</i> TABS	1	PA
STRENSIQ	4	PA
Posterior Pituitary Hormones		
<i>desmopressin acetate</i> spray	1	
<i>desmopressin acetate</i> spray refrigerated	1	
<i>desmopressin acetate</i> SOLN IJ	1	PA
DESMOPRESSIN ACETATE SOLN NA	4	PA
<i>desmopressin acetate</i> TABS 0.1 MG	1	QL(6 ea daily)
<i>desmopressin acetate</i> TABS 0.2 MG	1	QL(8 ea daily)
Progesterone Receptor Antagonists		
<i>mifepristone</i>	1	QL(1 ea per fill retail; 1 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
Prolactin Inhibitors		
<i>cabergoline</i>	1	
Somatostatic Agents		
<i>octreotide acetate</i> SOLN	4	PA
<i>octreotide acetate</i> SOSY	4	
SIGNIFOR	4	PA
Vasopressin Receptor Antagonists		
JYNARQUE TBPB	4	SP; PA
<i>tolvaptan</i> TABS	1	QL(2 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>		
Estrogen Combinations		
BIJUVA	3	PA
CLIMARA PRO	3	
DUAVEE	3	PA
<i>norethindrone acetate-ethinyl estradiol</i>	1	
PREMPHASE	2	
PREMPRO	2	QL(1 ea daily)
Estrogens		
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1	
<i>estradiol GEL 0.06 %</i>	3	
<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>	1	
<i>estradiol PTTW</i>	1	QL(0.286 ea daily)
<i>estradiol PTWK</i>	1	
<i>estradiol</i> TABS	1	
ESTROGEL GEL ( <i>estradiol</i> )	3	
EVAMIST SOLN	3	
MENEST	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 ea daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl</i> TABS	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1	2 max fill(s) per 30 day(s) retail
<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1	
<i>levofloxacin SOLN OR</i>	1	
<i>levofloxacin TABS</i>	1	
<i>moxifloxacin hcl in sodium chloride</i>	1	
<i>moxifloxacin hcl TABS</i>	1	
<i>ofloxacin 300 MG, 400 MG</i>	1	
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
Bile Acid Synthesis Disorder Agents		
CHOLBAM	1	PA
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	1	QL(3 ea daily)
<i>ursodiol TABS</i>	1	
Gastrointestinal Chloride Channel Activators		
<i>lubiprostone</i>	1	QL(2 ea daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1	
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1	QL(60 ml daily)
<i>metoclopramide hcl TABS</i>	1	QL(6 ea daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1	QL(9 ea daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1	
<i>mesalamine CPDR</i>	1	
<i>mesalamine ENEM</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ml daily); PA
SKYRIZI SOLN	4	QL(0.36 ml daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ml daily); PA
<i>sulfasalazine TABS</i>	1	
<i>sulfasalazine TBEC</i>	1	
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1	QL(2 ea daily)
LINZESS	2	QL(1 ea daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1	
MOVANTIK	3	QL(1 ea daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1	
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC
<i>lanthanum carbonate CHEW</i>	1	
<i>sevelamer carbonate PACK</i>	1	
<i>sevelamer carbonate TABS</i>	1	
VELPHORO	3	PA
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Alkalinizers</b>		
<i>potassium citrate (alkalinizer) TBCR</i>	1	
<i>sodium citrate &amp; citric acid</i>	1	RX/OTC
<b>Cystinosis Agents</b>		
CYSTAGON CAPS	3	PA
<b>Genitourinary Irrigants</b>		
<i>acetic acid 0.25 %</i>	1	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
SORBITOL 3 %	1	
SORBITOL/MANNITOL IRRIGATION	1	
<b>Interstitial Cystitis Agents</b>		
ELMIRON CAPS	2	QL(3 ea daily)
<b>Prostatic Hypertrophy Agents</b>		
<i>alfuzosin hcl</i>	1	QL(1 ea daily)
<i>dutasteride</i>	1	QL(1 ea daily)
<i>dutasteride-tamsulosin hcl</i>	3	PA
<i>finasteride</i>	1	5 mg only
<i>silodosin</i>	1	
<i>tamsulosin hcl</i>	1	
<b>Urinary Analgesics</b>		
<i>phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG</i>	1	
<b>Urinary Stone Agents</b>		
THIOLA EC TBEC 100 MG ( <i>tiopronin</i> )	3	QL(3 ea daily); PA
THIOLA EC TBEC 300 MG ( <i>tiopronin</i> )	3	QL(10 ea daily); PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 ea daily); PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<b>GOUT AGENTS - Drugs to Treat Gout</b>		
<b>Gout Agent Combinations</b>		
<i>colchicine w/ probenecid</i>	1	
<b>Gout Agents</b>		
<i>allopurinol 100 MG, 300 MG</i>	1	
<i>colchicine TABS</i>	1	QL(1 ea daily)
<i>febuxostat</i>	1	QL(1 ea daily); PA
<b>Uricosurics</b>		
<i>probenecid</i>	1	
<b>HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders</b>		
<b>Antihemophilic Products</b>		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA	4	PA
ALPROLIX	4	PA
ALTUVIIIIO	4	PA
BENEFIX KIT	4	PA
ELOCTATE	4	PA
ESPEROCT	4	PA
IDELVION	4	PA
JIVI	4	PA
KOGENATE FS KIT	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
XYNTHA	4	PA
XYNTHA SOLOFUSE	4	PA
<b>Bradykinin B2 Receptor Antagonists</b>		
<i>icatibant acetate SOLN</i>	1	QL(9 ml daily); PA
<i>icatibant acetate SOSY</i>	1	QL(9 ml daily); PA
<b>Complement Inhibitors</b>		
GOHIBIC	4	PA

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA SOLR SC	4	PA
RUCONEST	1	QL(0.143 ea daily); PA
<b>Hemataologic - Tyrosine Kinase Inhibitors</b>		
TAVALISSE	4	QL(2 ea daily); SP; PA
<b>Hematorheologic Agents</b>		
<i>pentoxifylline</i>	1	QL(3 ea daily)
<b>Plasma Kallikrein Inhibitors</b>		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
<b>Platelet Aggregation Inhibitors</b>		
<i>anagrelide hcl</i>	1	
<i>aspirin-dipyridamole</i>	1	QL(2 ea daily); PA
BRILINTA	2	QL(2 ea daily)
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 ea daily)
<i>clopidogrel bisulfate 300 MG</i>	1	
<i>dipyridamole</i>	1	
<i>prasugrel hcl</i>	1	QL(1 ea daily)
ZONTIVITY	3	PA
<b>HEMATOPOIETIC AGENTS - Drugs to Treat</b>		
<b>Blood Disorders</b>		
<b>Agents for Gaucher Disease</b>		
CERDELGA	1	QL(2 ea daily); PA
CEREZYME 400 UNIT	1	PA
<i>miglustat</i>	4	QL(3 ea daily); PA
<b>Agents for Sickle Cell Disease</b>		
DROXIA CAPS	3	
<b>Cobalamins</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1	QL(1 ml daily)
<b>Folic Acid/Folates</b>		
<i>folic acid TABS 1 MG, 400 MCG</i>	0	
<b>Hematopoietic Growth Factors</b>		
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	PA
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	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	1	PA
MIRCERA	4	PA
MULPLETA	4	QL(1 ea daily); PA
NYVEPRIA	4	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	PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROMACTA PACK	4	QL(1 ea daily); PA
PROMACTA TABS	4	QL(1 ea daily); PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA

Drug Name	Drug Tier	Requirements/Limits
UDENYCA SOSY	4	PA
ZARXIO	1	PA
Hematopoietic Mixtures		
<i>ferrous fumarate-folic acid</i>	1	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	PA
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1	
<i>tranexamic acid TABS</i>	1	
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1	
<i>phenobarbital TABS</i>	1	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1	QL(1 ea daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL(1 ea daily); AL(At least 18 yrs old); PA
<i>flurazepam hcl</i>	1	PA
<i>temazepam</i>	1	QL(1 ea daily)
<i>triazolam</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>zaleplon 10 MG</i>	1	QL(2 ea daily); AL(At least 18 yrs old)
<i>zaleplon 5 MG</i>	1	QL(1 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1	QL(1 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1	QL(1 ea daily)
Orexin Receptor Antagonists		
BELSOMRA	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1	QL(1 ea daily); AL(At least 18 yrs old)
<b>LAXATIVES - Bowel Treatment Drugs</b>		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1	
Laxative Combinations		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1	
<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>	1	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1	
Saline Laxatives		
OSMOPREP	3	PA
Stimulant Laxatives		
<i>bisacodyl TBEC</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
DIFICID TABS	2	
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>Contraceptives</b>		
AIMSCO LUBRICATED MISC	0	QL(2 ea daily)
CAYA DPRH	0	
DUREX EXTRA SENSITIVE THIN DEVI	0	QL(2 ea daily)
DUREX EXTRA SENSITIVE THIN MISC	0	QL(2 ea daily)
DUREX TROPICAL MISC	0	QL(2 ea daily)
FANTASY LUBRICATED/SPERMICI DE MISC	0	QL(2 ea daily)
FANTASY LUBRICATED MISC	0	QL(2 ea daily)
FC2 FEMALE CONDOM	0	QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
FEMCAP DEVI	0	
KAMELEON LUBRICATED MISC	0	QL(2 ea daily)
KIMONO COLORS DEVI	0	QL(2 ea daily)
KIMONO LUBRICATED MISC	0	QL(2 ea daily)
KIMONO MAXX/LARGE FLARE MISC	0	QL(2 ea daily)
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PS LUBRICATED MISC	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED/RIBBED/STUDDERED MISC	0	QL(2 ea daily)
KIMONO SENSATION LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	QL(2 ea daily)
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0	QL(2 ea daily)
KIMONO SPECIAL DEVI	0	QL(2 ea daily)	TRUSTEX LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)
K-Y ME & YOU EXTRA LUBRICATED DEVI	0	QL(2 ea daily)	TRUSTEX LUBRICATED MISC	0	QL(2 ea daily)
K-Y ME & YOU INTENSE DEVI	0	QL(2 ea daily)	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0	QL(2 ea daily)
MAXX LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDERED MISC	0	QL(2 ea daily)
MAXX PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	QL(2 ea daily)
OMNIFLEX DIAPHRAGM	0		TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)
REALITY LATEX CONDOMS/LUBRICATED MISC	0	QL(2 ea daily)	TRUSTEX/RIA LUBRICATED MISC	0	QL(2 ea daily)
REALITY LATEX/ULTRA TEXTURED DEVI	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0	
REALITY LATEX/ULTRA THIN DEVI	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0	
TROJAN MAGNUM MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0	
TROJAN ULTRA THIN LUBRICATED MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0	
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0	
TROJAN-ENZ LUBRICATED MISC	0	QL(2 ea daily)	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0	
TROJAN-ENZ W/SPERMICIDAL MISC	0	QL(2 ea daily)			
TRUE COVER DEVI	0	QL(2 ea daily)			
TRUSTEX COLOR CONDOMS + LUBE MISC	0	QL(2 ea daily)			
TRUSTEX LUBRICATED EXTRALARGE MISC	0	QL(2 ea daily)			
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0	
Diabetic Supplies		
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
ONETOUCH DELICA SAFETY LANCING DEVICE	1	#, RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1	#, RX/OTC
RELION 2-IN-1 LANCET DEVICES 30G	1	#, RX/OTC
RELION 2-IN-1 LANCING DEVICE 25G	1	#, RX/OTC
RELION 2-IN-1 LANCING DEVICE 30G	1	#, RX/OTC
SELECT LANCETS	1	6.66/day

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

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine modified (for microemulsion) SOLN</i>	1	
<i>cyclosporine CAPS</i>	1	
<i>cyclosporine SOLN IV 50 MG/ML</i>	1	
ENSPRYNG	4	PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); PA
<i>mycophenolate mofetil CAPS</i>	1	
<i>mycophenolate mofetil TABS</i>	1	
<i>mycophenolate sodium</i>	1	
NULOJIX	4	PA
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1	
<i>tacrolimus CAPS</i>	1	
THYMOGLOBULIN	4	PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1	
<i>lactated ringer's (irrigation)</i>	1	
<i>ringer's irrigation</i>	1	
<i>water for irrigation, sterile</i>	1	
Potassium Removing Agents		
LOKELMA	3	QL(1 ea daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(4 ml daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1	
Anti-infectives - Throat		
<i>clotrimazole</i>	1	
<i>nystatin (mouth-throat)</i>	1	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
DEBACTEROL	2	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1	
<i>pilocarpine hcl (oral)</i>	1	
<b>MULTIVITAMINS</b>		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1	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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 ea daily)
MASONATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMIN TABS	2	QL(1 ea daily)
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATAL TABS	2	QL(1 ea daily)
MULTI PRENATAL TABS	2	QL(1 ea daily)	PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
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	PRENATRYL TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)	QC PRENATAL TABS	2	QL(1 ea daily)
NEONATAL VITAMIN TABS	2	QL(1 ea daily)	RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC	RA PRENATAL TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC	SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC
PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)	TRICARE TABS	2	QL(1 ea daily); RX/OTC
PRENATAL ONE DAILY TABS	2	QL(1 ea daily)	VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC
PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC	WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC
PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	<b>MUSCULOSKELETAL THERAPY AGENTS -</b>		
PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)	<b>Drugs to Treat Spasms</b>		
PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)	<b>Central Muscle Relaxants</b>		
PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC	<i>baclofen TABS 10 MG, 20 MG</i>	1	
			<i>carisoprodol TABS</i>	1	
			<i>chlorzoxazone TABS 500 MG</i>	1	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>chlorzoxazone TABS 750 MG</i>	1	QL(4 ea daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1	QL(4 ea daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1	
<i>orphenadrine citrate TB12</i>	1	QL(2 ea daily)
<i>tizanidine hcl CAPS</i>	1	
<i>tizanidine hcl TABS</i>	1	
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	1	QL(4 ea daily)
Muscle Relaxant Combinations		
<i>orphenadrine w/ aspirin &amp; caff 385 MG-30 MG-25 MG</i>	3	PA
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
Nasal Antiallergy		
<i>azelastine hcl</i>	1	RX/OTC
<i>olopatadine hcl (nasal)</i>	1	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1	
<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(1 ml daily)
Nasal Steroids		
<i>budesonide (nasal)</i>	1	
<i>flunisolide (nasal) 0.025 %</i>	1	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1	QL(1.14 gm daily); PA; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (nasal) AERO</i>	1	
XHANCE EXHU	3	PA
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>		
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
<b>NUTRIENTS</b>		
Proteins		
CLINIMIX 4.25%/DEXTROSE 10%	3	
CLINIMIX 4.25%/DEXTROSE 5%	3	
CLINIMIX E 5%/DEXTROSE 20%	3	
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1	
<i>brimonidine tartrate-timolol maleate</i>	1	
<i>carteolol hcl (ophth)</i>	1	
<i>dorzolamide hcl-timolol maleate</i>	1	
<i>levobunolol hcl 0.5 %</i>	1	
<i>timolol maleate (ophth) SOLG</i>	1	
<i>timolol maleate (ophth) SOLN</i>	1	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 0.5 %</i>	1	QL(2.5 ml daily)

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

Drug Name	Drug Tier	Requirements/Limits
<i>proparacaine hcl</i>	1	
<b>Ophthalmic Steroids</b>		
ALREX SUSP <i>(loteprednol etabonate)</i>	3	PA
<i>dexamethasone sodium phosphate (ophth)</i>	1	QL(0.4 ml daily)
<i>difluprednate</i>	1	PA
<i>fluorometholone (ophth) SUSP</i>	1	
FML FORTE SUSP	3	PA
FML OINT	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1	PA
<i>loteprednol etabonate SUSP</i>	1	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-polymy-dexameth OINT</i>	1	
<i>neomycin-polymy-dexameth SUSP</i>	1	
<i>neomycin-polymyxin-hc (ophth)</i>	1	QL(2.5 ml daily)
PRED MILD	3	PA
PRED-G SUSP	3	PA
<i>prednisolone acetate (ophth)</i>	1	
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1	
ZYLET	3	PA
<b>Ophthalmic Surgical Aids</b>		
HEALON PRO SOSY	3	PA
PROVISC SOSY	3	PA
<b>Ophthalmics - Misc.</b>		
ALOCRIAL	3	PA

Drug Name	Drug Tier	Requirements/Limits
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1	
<i>bepotastine besilate</i>	3	PA
<i>brinzolamide</i>	1	
<i>bromfenac sodium (ophth)</i>	1	
<i>cromolyn sodium (ophth)</i>	1	
CYSTARAN	2	QL(2.143 ml daily); PA
<i>diclofenac sodium (ophth)</i>	1	
<i>dorzolamide hcl</i>	1	
<i>epinastine hcl (ophth)</i>	1	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac tromethamine (ophth)</i>	1	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1	
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ml daily); PA
<i>olopatadine hcl 0.2 %</i>	1	RX/OTC
<i>olopatadine hcl 0.1 %</i>	1	QL(0.34 ml daily); RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1	
<i>tafluprost</i>	1	
<i>travoprost SOLN</i>	1	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1	QL(0.5 ml daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1	
<i>ofloxacin (otic)</i>	1	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-fluocinolone acetamide</i>	1	QL(0.5 ea daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1	QL(2 ml daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	
Otic Steroids		
<i>fluocinolone acetamide (otic)</i>	1	
<i>hydrocortisone w/acetic acid</i>	1	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
Immune Serums		
CUVITRU SOLN 1 GM/5ML, 2 GM/10ML, 4 GM/20ML, 10 GM/50ML	1	PA
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	1	PA
GAMMAGARD LIQUID 30 GM/300ML	1	PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	1	PA
GAMUNEX-C	1	PA
HIZENTRA SOLN	1	PA
HIZENTRA SOSY 10 GM/50ML	1	PA
Passive Immunizing Agents - Combinations		
HYQVIA	1	PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
Aminopenicillins		

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin CAPS</i>	1	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	
<i>amoxicillin SUSR</i>	1	
<i>amoxicillin TABS</i>	1	
<i>ampicillin sodium IJ 1 GM</i>	1	
<i>ampicillin CAPS 500 MG</i>	1	
Natural Penicillins		
<i>penicillin g potassium 5000000 UNIT</i>	1	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1	
PENICILLIN G PROCAINE	3	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1	
<i>penicillin v potassium TABS</i>	1	
Penicillin Combinations		
<i>amoxicillin &amp; pot clavulanate CHEW</i>	1	
<i>amoxicillin &amp; pot clavulanate SUSR</i>	1	
<i>amoxicillin &amp; pot clavulanate TABS</i>	1	
<i>amoxicillin &amp; pot clavulanate TB12</i>	1	
<i>ampicillin &amp; sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1	
<i>piperacillin sodium-tazobactam sodium</i>	1	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1	
<i>nafcillin sodium IV 10 GM</i>	1	
<i>oxacillin sodium IV 10 GM</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>PROGESTINS - Hormone Replacement/Modifying Drugs</b>		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	
<i>megestrol acetate (appetite)</i>	1	PA
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions</b>		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1	
<i>disulfiram</i>	1	
<i>lofexidine hcl</i>	1	QL(224 ea per 14 day(s) retail); PA
LUCEMYRA ( <i>lofexidine hcl</i> )	3	QL(224 ea per 14 day(s) retail); PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 10 MG</i>	1	QL(2 ea daily)
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1	QL(1 ea daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1	QL(2 ea daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1	QL(1 ea daily)
<i>galantamine hydrobromide CP24</i>	1	QL(1 ea daily)
<i>galantamine hydrobromide SOLN</i>	1	QL(6 ml daily)
<i>galantamine hydrobromide TABS</i>	1	QL(2 ea daily)
<i>memantine hcl TABS</i>	1	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl TABS</i>	1	
<i>rivastigmine tartrate CAPS</i>	1	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	1	
<i>perphenazine-amitriptyline</i>	1	QL(4 ea daily)
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
SAVELLA TABS	2	QL(2 ea daily); PA
Movement Disorder Drug Therapy		
AUSTEDO PATIENT TITRATION KIT TBPB	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
AUSTEDO XR PATIENT TITRATION KIT TEPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
AUSTEDO XR TB24	4	QL(1 ea daily); PA
AUSTEDO TABS	1	QL(4 ea daily); PA
INGREZZA CAPS	4	QL(1 ea daily); PA
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA
INGREZZA CPSP	4	QL(1 ea daily); PA
<i>tetrabenazine</i>	1	QL(3 ea daily); PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	4	QL(0.0714 ml daily); PA
AVONEX PSKT	4	QL(0.0714 ml daily); PA
BETASERON KIT	4	SP

Drug Name	Drug Tier	Requirements/Limits
<i>dalfampridine</i>	1	QL(2 ea daily); PA
<i>dimethyl fumarate CDPK</i>	1	QL(2 ea daily)
<i>dimethyl fumarate CPDR</i>	1	QL(2 ea daily)
<i> fingolimod hcl</i>	4	QL(1 ea daily)
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ml daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ml daily)
LEMTRADA	4	QL(1.2 ml daily); PA
PLEGRIDY STARTER PACK SOAJ SC	4	QL(0.036 ml daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.0357 ml daily); PA
PLEGRIDY SOAJ SC 125 MCG/0.5ML	4	QL(0.036 ml daily); PA
PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); 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); PA
<i>teriflunomide</i>	4	QL(1 ea daily)
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	3	QL(2 ea daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pimozide</i>	1	
<b>Smoking Deterrents</b>		
<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)
<i>varenicline tartrate TBPk</i>	0	
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
<b>Alpha-Proteinase Inhibitor (Human)</b>		
PROLASTIN-C SOLN	1	PA
<b>Cystic Fibrosis Agents</b>		
KALYDECO TABS	4	QL(2 ea daily); PA
ORKAMBI PACK	4	QL(2 ea daily); PA
ORKAMBI TABS	4	QL(4 ea daily); PA
PULMOZYME	4	QL(2.5 ml daily); PA
TRIKAFTA TBPk	4	QL(3 ea daily); PA
<b>Pulmonary Fibrosis Agents</b>		
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

Drug Name	Drug Tier	Requirements/Limits
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 ea daily); PA
<b>SULFONAMIDES - Drugs to Treat Bacterial Infections</b>		
<b>Sulfonamides</b>		
<i>sulfadiazine TABS</i>	1	
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>		
<b>Fluorocyclines</b>		
XERAVA	4	PA
<b>Glycylcyclines</b>		
<i>tigecycline</i>	1	
<b>Tetracyclines</b>		
<i>demeclocycline hcl TABS</i>	1	
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1	QL(2 ea daily)
<i>doxycycline hyclate CAPS</i>	1	QL(2 ea daily)
<i>doxycycline hyclate SOLR</i>	1	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1	QL(2 ea daily)
<i>minocycline hcl CAPS</i>	1	QL(3 ea daily)
<i>minocycline hcl TABS</i>	1	QL(3 ea daily)
<i>tetracycline hcl CAPS</i>	1	
<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>		
<b>Antithyroid Agents</b>		
<i>methimazole TABS</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>propylthiouracil</i>	1	
<b>Thyroid Hormones</b>		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1	
<i>liothyronine sodium SOLN</i>	1	
<i>liothyronine sodium TABS</i>	1	
NP THYROID 120 TABS	1	QL(1 ea daily)
NP THYROID 15 TABS	1	QL(1 ea daily)
NP THYROID 30 TABS	1	QL(1 ea daily)
NP THYROID 60 TABS	1	QL(1 ea daily)
NP THYROID 90 TABS	1	QL(1 ea daily)
<b>TOXOIDS</b>		
<b>Toxoid Combinations</b>		
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	
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Antispasmodics</b>		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1	
<i>dicyclomine hcl CAPS</i>	1	
<i>dicyclomine hcl SOLN OR</i>	1	
<i>dicyclomine hcl TABS</i>	1	
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1	
<i>glycopyrrolate TABS 2 MG</i>	1	QL(6 ea daily)
<i>glycopyrrolate TABS 1 MG</i>	1	
<i>methscopolamine bromide</i>	1	
<b>H-2 Antagonists</b>		
<i>cimetidine hcl OR 300 MG/5ML</i>	1	QL(20 ml daily)
<i>cimetidine TABS</i>	1	RX/OTC
<i>famotidine in nacl SOLN</i>	1	
<i>famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML</i>	1	
<i>famotidine SUSR</i>	1	QL(10 ml daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1	RX/OTC
<i>nizatidine CAPS</i>	1	
<i>ranitidine hcl TABS 150 MG</i>	1	
<b>Misc. Anti-Ulcer</b>		
<i>sucralfate SUSP</i>	1	QL(40 ml daily)
<i>sucralfate TABS</i>	1	QL(4 ea daily)
<b>Proton Pump Inhibitors</b>		
<i>dexlansoprazole</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	1	QL(2 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 ea daily)	<i>oxybutynin chloride TABS 5 MG</i>	1	
<i>esomeprazole magnesium TBEC</i>	1	QL(2 ea daily)	<i>oxybutynin chloride TB24</i>	1	
<i>lansoprazole CPDR 15 MG</i>	1	QL(2 ea daily); RX/OTC	<i>solifenacin succinate TABS</i>	1	QL(1 ea daily); PA
<i>lansoprazole CPDR 30 MG</i>	1		<i>tolterodine tartrate CP24</i>	1	QL(1 ea daily)
NEXIUM 24HR TBEC ( <i>esomeprazole magnesium</i> )	1	QL(2 ea daily)	<i>tolterodine tartrate TABS</i>	1	
<i>omeprazole magnesium CPDR</i>	1	QL(4 ea daily)	<i>trospium chloride CP24</i>	1	QL(1 ea daily)
<i>omeprazole CPDR</i>	1	QL(2 ea daily)	<i>trospium chloride TABS</i>	1	QL(3 ea daily)
<i>omeprazole TBEC</i>	1	QL(2 ea daily)	<b>Urinary Antispasmodics - Cholinergic Agonists</b>		
<i>pantoprazole sodium TBEC 40 MG</i>	1		<i>bethanechol chloride 25 MG</i>	1	
<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 ea daily)	<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1	QL(4 ea daily)
<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)	<b>Urinary Antispasmodics - Direct Muscle Relaxants</b>		
<b>Ulcer Drugs - Prostaglandins</b>			<i>flavoxate hcl</i>	1	
<i>misoprostol</i>	1	QL(4 ea daily)	<b>VACCINES</b>		
<b>Ulcer Therapy Combinations</b>			<b>Bacterial Vaccines</b>		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail	ACTHIB SOLR IM	0	
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1	QL(1 ea daily); RX/OTC	BEXSERO	0	
<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>			HIBERIX SOLR IJ	0	
<b>Urinary Antispasmodic - Antimuscarinics (Anticholinergic)</b>			MENACTRA	0	
<i>darifenacin hydrobromide</i>	1	QL(1 ea daily)	MENQUADFI	0	
<i>fesoterodine fumarate</i>	1	QL(1 ea daily); PA	MENVEO SOLR	0	
<i>oxybutynin chloride SOLN</i>	1		PEDVAX HIB SUSP	0	
			PNEUMOVAX 23 IJ 25 MCG/0.5ML	0	
			PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	0	
			PREVNAR 13	0	
			PREVNAR 20	0	1 max fill(s) per 999 day(s) retail
			TRUMENBA	0	
			VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail
			<b>Viral Vaccines</b>		

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	0	
MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y	0	
MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	0		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/BA.4/BA.5	0	
MODERNA COVID-19 VACCINE/6MO-5Y SUSP	0		PFIZER-BIONTECH COVID-19VACCINE SUSP	0	
MODERNA COVID-19 VACCINE SUSP	0		PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
NOVAVAX COVID-19 VACCINE/2023-24 SUSP	0		PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
NOVAVAX COVID-19 VACCINE/2024-25 SUSY	0		RECOMBIVAX HB SUSP	0	
NOVAVAX COVID-19 VACCINE SUSP	0		RECOMBIVAX HB SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		ROTARIX SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	0		ROTARIX SUSR	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0		ROTATEQ SOLN	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0		SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	0	
			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

Drug Name	Drug Tier	Requirements/Limits
<b>VAGINAL AND RELATED PRODUCTS</b>		
Spermicides		
TODAY SPONGE MISC	0	
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	1	
<i>clotrimazole vaginal CREA 1 %</i>	1	
GYNAZOLE-1	3	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
<i>metronidazole vaginal</i>	1	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	
<i>terconazole vaginal CREA</i>	1	
<i>terconazole vaginal SUPP</i>	1	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1	QL(15.15 gm daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1	QL(2 gm daily)
<i>estradiol vaginal TABS</i>	1	
FEMRING	3	PA
PREMARIN	2	QL(1.5 gm daily)
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail); 2 max fill(s) per 365 day(s) retail
Vasopressors		
<i>midodrine hcl</i>	1	
<b>VITAMINS</b>		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 50000 UNIT</i>	1	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN OR</i>	1	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
NIACIN TR TBCR	1	
<i>niacinamide TABS</i>	1	
<i>niacin CPCR 250 MG, 500 MG</i>	1	
<i>niacin TABS</i>	1	
<i>niacin TBCR</i>	1	
SLO-NIACIN TBCR 500 MG, 750 MG ( <i>niacin</i> )	1	

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darifenacin hydrobromide	64	desogestrel-ethinyl estradiol (biphasic)	34	dextrose in lactated ringers	53
darunavir TABS 600 MG	30	desogestrel-ethinyl estradiol (triphasic)	34	DIACOMIT CAPS 250 MG	12
darunavir TABS 800 MG	30	desonide CREA	40	DIACOMIT CAPS 500 MG	12
dasatinib	26	desonide LOTN	40		
DAURISMO	24	desonide OINT	40		
DEBACTEROL	55	desoximetasone CREA 0.25 %	40		
decitabine	24				
deferasirox PACK	17				

DIACOMIT PACK 250 MG	12	MCG	33	MG/5ML, 25 MG/10ML, 50 MG/20ML	18
DIACOMIT PACK 500 MG	12	dihydroergotamine mesylate SOLN IJ			
diazepam (anticonvulsant) GEL	11	1 MG/ML	52	diphenhydramine hcl SOLN 50	18
diazepam CONC	8	dihydroergotamine mesylate SOLN		MG/ML	18
diazepam SOLN OR 5 MG/5ML	8	NA 4 MG/ML	52	diphenoxylate w/ atropine LIQD	17
diazepam TABS	8	DILANTIN (phenytoin sodium		diphenoxylate w/ atropine TABS	17
diazoxide	15	extended)	12	DIPHThERIA/TETANUS TOXOIDS	
dichlorphenamide	43	DILANTIN	12	ADSORBED PEDIATRIC SUSP	63
diclofenac epolamine PTCH EX	38	DILANTIN INFATABS CHEW		dipyridamole	48
diclofenac potassium TABS 50 MG	4	(phenytoin)	12	disopyramide phosphate CAPS	8
diclofenac sodium (actinic keratoses)		DILANTIN-125 SUSP (phenytoin)	13	disulfiram	60
EX	39	diltiazem hcl coated beads CP24	120	DIURIL SUSP	43
diclofenac sodium (ophth)	59	MG, 300 MG, 360 MG	32	divalproex sodium TB24	13
diclofenac sodium (topical) GEL EX	38	diltiazem hcl coated beads CP24	180	divalproex sodium TBEC	13
diclofenac sodium TB24	4	MG, 240 MG	32	docetaxel CONC 20 MG/ML	27
diclofenac sodium TBEC	4	diltiazem hcl CP12	32	docetaxel SOLN 20 MG/2ML	28
diclofenac w/ misoprostol TBEC	4	diltiazem hcl CP24	32	docusate calcium	50
dicloxacillin sodium	60	diltiazem hcl extended release beads		docusate sodium CAPS 100 MG	50
dicyclomine hcl CAPS	63	120 MG, 180 MG, 240 MG, 300 MG,		docusate sodium CAPS 250 MG	50
dicyclomine hcl SOLN OR	63	360 MG	32	dofetilide	8
dicyclomine hcl TABS	63	diltiazem hcl extended release beads		donepezil hydrochloride TABS 10	
DIFFERIN LOTN	37	420 MG	32	MG	60
DIFICID TABS	50	diltiazem hcl SOLN 50 MG/10ML	32	donepezil hydrochloride TABS 5 MG,	60
diflorasone diacetate CREA	40	DILTIAZEM HCL SOLR	32	23 MG	60
diflorasone diacetate OINT	40	diltiazem hcl TABS	32	donepezil hydrochloride TBDP 10	
diflunisal TABS	5	diltiazem hcl TB24	32	MG	60
difluprednate	58	dimethyl fumarate CDPK	61	donepezil hydrochloride TBDP 5 MG	60
digoxin SOLN OR 0.05 MG/ML	33	dimethyl fumarate CPDR	61	60	
digoxin TABS 0.0625 MG, 0.125 MG,		DIPENTUM	46	DOPTELET	48
0.25 MG, 62.5 MCG, 125 MCG, 250		diphenhydramine hcl CAPS 50 MG		dorzolamide hcl	59
		18		dorzolamide hcl-timolol maleate	57
		diphenhydramine hcl ELIX 12.5		DOVATO	30
		MG/5ML	18		
		diphenhydramine hcl LIQD 12.5			

doxazosin mesylate	20	60 MG	14	ELESTRIN GEL	45
doxepin hcl (antipruritic)	39	duloxetine hcl CPEP 40 MG	14	eletriptan hydrobromide	53
doxepin hcl (sleep)	49	DUPIXENT SOAJ SC 200		ELIGARD KIT SC 7.5 MG	25
doxepin hcl CAPS	14	MG/1.14ML	41	ELIGARD SC 22.5 MG, 30 MG, 45	
doxepin hcl CONC	14	DUPIXENT SOAJ SC 300 MG/2ML		MG	25
doxercalciferol CAPS	44	41		ELIQUIS STARTER PACK TBPK	10
doxercalciferol SOLN	44	DUPIXENT SOSY 100 MG/0.67ML		ELIQUIS TABS	10
doxorubicin hcl liposomal IV 2		41		ELLA	35
MG/ML	25	DUPIXENT SOSY 200 MG/1.14ML		ELMIRON CAPS	47
doxorubicin hcl SOLN	25	41		ELOCTATE	47
doxorubicin hcl SOLR 10 MG, 50 MG		DUPIXENT SOSY 300 MG/2ML	41	EMCYT	25
	25	DUREX EXTRA SENSITIVE THIN		EMFLAZA SUSP (deflazacort)	36
doxycycline (monohydrate) CAPS 50		DEVI	50	EMGALITY SOAJ	52
MG, 100 MG	62	DUREX EXTRA SENSITIVE THIN		EMGALITY SOSY 100 MG/ML	52
doxycycline (monohydrate) CAPS 75		MISC	50	EMGALITY SOSY 120 MG/ML	52
MG	62	DUREX TROPICAL MISC	50	EMSAM	13
doxycycline (monohydrate) TABS		dutasteride	47	emtricitabine CAPS	30
100 MG	62	dutasteride-tamsulosin hcl	47	emtricitabine-tenofovir disoproxil	
doxycycline (monohydrate) TABS 50		econazole nitrate CREA	38	fumarate 100 MG-150 MG, 133 MG-	
MG, 75 MG	62	EDARBI	20	200 MG, 167 MG-250 MG	30
doxycycline hyclate CAPS	62	EDURANT	30	emtricitabine-tenofovir disoproxil	
doxycycline hyclate SOLR	62	efavirenz CAPS 200 MG	30	fumarate 200 MG-300 MG	30
doxycycline hyclate TABS 20 MG,		efavirenz CAPS 50 MG	30	EMTRIVA CAPS (emtricitabine)	30
100 MG	62	efavirenz TABS	30	EMTRIVA SOLN	30
doxylamine-pyridoxine TBEC	17	efavirenz-emtricitabine-tenofovir		EMVERM CHEW	7
dronabinol CAPS	17	disoproxil fumarate	30	enalapril maleate &	
drosiprenone-ethinyl estradiol	34	efavirenz-lamivudine-tenofovir		hydrochlorothiazide 12.5 MG-5 MG	
drosiprenone-ethinyl estradiol-		disoproxil fumarate	30	20	
levomefolate calcium	35	EGRIFTA 2 MG	44	enalapril maleate &	
DROXIA CAPS	48	EGRIFTA SV	44	hydrochlorothiazide 25 MG-10 MG	
DUAVEE	45	ELAPRASE	44	20	
DULERA	10	electrolyte-148	53	enalapril maleate TABS	20
duloxetine hcl CPEP 20 MG, 30 MG,		electrolyte-a	53	ENBREL MINI SOCT	4

ENBREL SOLN .....	4	EQL PRENATAL FORMULA TABS 55	escitalopram oxalate TABS 20 MG 13
ENBREL SOSY 25 MG/0.5ML .....	4	EQUETRO 100 MG .....	29
ENBREL SOSY 50 MG/ML .....	4	EQUETRO 200 MG .....	29
ENBREL SURECLICK SOAJ .....	4	EQUETRO 300 MG .....	29
ENGERIX-B SUSP 20 MCG/ML ...	65	ERAXIS .....	18
ENGERIX-B SUSY .....	65	ERBITUX .....	24
enoxaparin sodium SOLN IJ 300 MG/3ML .....	10	ergocalciferol CAPS .....	68
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....	10	ergocalciferol SOLN OR .....	68
enoxaparin sodium SOSY 30 MG/0.3ML .....	10	ergoloid mesylates TABS .....	61
enoxaparin sodium SOSY 40 MG/0.4ML .....	10	ERGOMAR SUBL .....	52
enoxaparin sodium SOSY 60 MG/0.6ML .....	11	ergotamine w/ caffeine TABS .....	52
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML .....	11	eribulin mesylate .....	28
ENSPRYNG .....	55	ERIVEDGE .....	24
entacapone .....	28	ERLEADA 240 MG .....	25
entecavir TABS .....	31	ERLEADA 60 MG .....	25
EPIDIOLEX .....	12	erlotinib hcl .....	24
epinastine hcl (ophth) .....	59	ERTACZO .....	38
epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML .....	68	ertapenem sodium IJ .....	21
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....	68	erythromycin (acne aid) PADS .....	37
EPIVIR HBV SOLN .....	31	erythromycin (acne aid) SOLN ....	37
eplerenone .....	21	erythromycin (ophth) .....	58
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	48	erythromycin base CPEP .....	50
epoprostenol sodium .....	33	erythromycin base TABS .....	50
		erythromycin base TBEC .....	50
		erythromycin ethylsuccinate SUSR 50	
		erythromycin ethylsuccinate TABS 50	
		escitalopram oxalate SOLN .....	13
		escitalopram oxalate TABS 10 MG 13	
			escitalopram oxalate TABS 5 MG . 13
			esomeprazole magnesium CPDR 20 MG .....
			esomeprazole magnesium CPDR 40 MG .....
			esomeprazole magnesium TBEC . 64
			ESPEROCT .....
			estazolam .....
			estradiol GEL 0.06 % .....
			estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM .....
			estradiol PTTW .....
			estradiol PTWK .....
			estradiol TABS .....
			estradiol vaginal CREA .....
			estradiol vaginal TABS .....
			estradiol valerate .....
			ESTROGEL GEL (estradiol) .....
			eszopiclone .....
			ethacrynic acid .....
			ethambutol hcl TABS .....
			ethosuximide CAPS .....
			ethosuximide SOLN .....
			ethynodiol diacet & eth estrad ....
			etodolac CAPS .....
			etodolac TABS .....
			etonogestrel-ethinyl estradiol ....
			ETOPOPHOS .....
			etoposide CAPS .....

etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML .....	28	FASENRA SOSY 30 MG/ML .....	8	FIRDAPSE .....	23
etravirine 100 MG .....	30	FC2 FEMALE CONDOM .....	50	FIRMAGON .....	25
etravirine 200 MG .....	30	febuxostat .....	47	flavoxate hcl .....	64
EUCRISA .....	42	felbamate SUSP .....	12	flecainide acetate .....	8
EVAMIST SOLN .....	45	felbamate TABS 400 MG .....	12	floxuridine .....	24
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG .....	55	felbamate TABS 600 MG .....	12	FLUAD 2024-2025 .....	65
everolimus (immunosuppressant) 1 MG .....	55	felodipine .....	32	FLUAD QUADRIVALENT 2022-2023 .....	65
everolimus TABS .....	26	FEMCAP DEVI .....	50	FLUAD QUADRIVALENT 2023-2024 .....	65
EVOTAZ .....	30	FEMRING .....	68	FLUARIX 2024-2025 SUSY .....	65
exemestane .....	25	fenofibrate micronized 43 MG, 130 MG .....	19	FLUARIX QUADRIVALENT 2022-2023 SUSY .....	65
ezetimibe .....	19	fenofibrate micronized 67 MG, 134 MG, 200 MG .....	19	FLUARIX QUADRIVALENT 2023-2024 SUSY .....	65
ezetimibe-simvastatin .....	19	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19	FLUBLOK 2024-2025 SOSY .....	65
famciclovir 125 MG, 250 MG .....	31	fenopropfen calcium TABS .....	4	FLUBLOK QUADRIVALENT 2022-2023 .....	65
famciclovir 500 MG .....	31	FENSOLVI SC .....	44	FLUBLOK QUADRIVALENT 2023-2024 .....	65
famotidine in nacl SOLN .....	63	fentanyl citrate LPOP .....	5	FLUCELVAX 2024-2025 SUSP ...	65
famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML .....	63	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR .....	5	FLUCELVAX 2024-2025 SUSY ...	65
famotidine SUSR .....	63	ferrous fumarate-folic acid .....	49	FLUCELVAX QUADRIVALENT 2022-2023 SUSP .....	65
famotidine TABS 20 MG, 40 MG ..	63	ferrous sulfate SOLN 15 MG/ML ..	49	FLUCELVAX QUADRIVALENT 2022-2023 SUSY .....	66
FANAPT .....	29	ferrous sulfate TABS 65 MG, 325 MG .....	49	FLUCELVAX QUADRIVALENT 2023-2024 SUSP .....	66
FANAPT TITRATION PACK .....	29	ferrous sulfate TBEC 325 MG .....	49	FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....	66
FANTASY LUBRICATED MISC ...	50	fesoterodine fumarate .....	64	fluconazole SUSR .....	18
FANTASY LUBRICATED/SPERMICIDE MISC 50	50	FETZIMA CP24 .....	14	fluconazole TABS .....	18
FARXIGA (dapagliflozin propanediol) .....	16	FETZIMA TITRATION PACK C4PK 14	14	flucytosine .....	18
FARXIGA .....	16	finasteride .....	47		
FASENRA PEN SOAJ .....	8	fingolimod hcl .....	61		

fludarabine phosphate SOLN .....24	fluoxetine hcl CAPS 40 MG .....13	fluvastatin sodium CAPS 40 MG ...19
fludarabine phosphate SOLR .....24	fluoxetine hcl CPDR .....14	fluvoxamine maleate TABS 100 MG . 14
fludrocortisone acetate TABS .....36	fluoxetine hcl SOLN .....14	fluvoxamine maleate TABS 25 MG, 50 MG .....14
FLULAVAL 2024-2025 SUSY ..... 66	fluoxetine hcl TABS 10 MG, 60 MG 14	FLUZONE 2024-2025 SUSP ..... 66
FLULAVAL QUADRIVALENT 2022- 2023 SUSY .....66	fluoxetine hcl TABS 20 MG .....14	FLUZONE 2024-2025 SUSY ..... 66
FLULAVAL QUADRIVALENT 2023- 2024 SUSY .....66	fluphenazine hcl CONC .....29	FLUZONE HIGH-DOSE 2024-2025 SUSY .....66
FLUMIST NASAL VACCINE 2024- 2025 .....66	fluphenazine hcl ELIX .....29	FLUZONE HIGH-DOSE PF 2022- 2023 .....66
FLUMIST QUADRIVALENT .....66	fluphenazine hcl SOLN .....29	FLUZONE HIGH-DOSE PF 2023- 2024 .....66
flunisolide (nasal) 0.025 % .....57	flurandrenolide CREA .....41	FLUZONE QUADRIVALENT 2022- 2023 SUSP .....66
fluocinolone acetonide (otic) .....59	flurandrenolide LOTN .....41	FLUZONE QUADRIVALENT 2022- 2023 SUSY .....66
fluocinolone acetonide CREA 0.01 % 40	flurazepam hcl .....49	FLUZONE QUADRIVALENT 2023- 2024 SUSP .....66
fluocinolone acetonide CREA 0.025 % .....40	flurbiprofen sodium .....59	FLUZONE QUADRIVALENT 2023- 2024 SUSY .....66
fluocinolone acetonide OIL .....40	flurbiprofen TABS .....4	FLUZONE QUADRIVALENT 2023- 2024 SUSP .....66
fluocinolone acetonide OINT .....40	flutamide .....25	FLUZONE QUADRIVALENT 2023- 2024 SUSY .....66
fluocinolone acetonide SOLN .....40	fluticasone furoate-vilanterol .....10	FML FORTE SUSP .....58
fluocinonide CREA 0.05 % .....40	fluticasone propionate (inhalation) AEPB .....9	FML OINT .....58
fluocinonide CREA 0.1 % .....41	fluticasone propionate (nasal) SUSP . 57	folic acid TABS 1 MG, 400 MCG ..48
fluocinonide emulsified base .....40	fluticasone propionate CREA 0.05 % 41	fondaparinux sodium 10 MG/0.8ML 11
fluocinonide GEL .....41	fluticasone propionate hfa .....9	fondaparinux sodium 2.5 MG/0.5ML . 11
fluocinonide OINT .....41	fluticasone propionate LOTN .....41	fondaparinux sodium 5 MG/0.4ML .11
fluocinonide SOLN .....41	fluticasone propionate OINT .....41	fondaparinux sodium 7.5 MG/0.6ML . 11
fluorometholone (ophth) SUSP ....58	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT .....10	FORA GTEL BLOOD KETONE TEST STRIPS .....42
fluorouracil (topical) CREA 5 % ...39	fluticasone-salmeterol AERO .....10	FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..42
fluorouracil (topical) SOLN .....39	fluvastatin sodium CAPS 20 MG ...19	
fluorouracil 500 MG/10ML .....24		
fluoxetine hcl CAPS 10 MG .....13		
fluoxetine hcl CAPS 20 MG .....14		

formoterol fumarate NEBU .....	10	MG/5ML .....	43	gemcitabine hcl SOLR 200 MG ....	24
FOSAMAX PLUS D .....	43	furosemide TABS .....	43	gemfibrozil TABS .....	19
fosamprenavir calcium TABS .....	30	FUZEON SOLR .....	30	GENOTROPIN CART SC .....	44
fosfomycin tromethamine .....	22	FYCOMPA TABS 2 MG .....	11	GENOTROPIN MINIQUICK PRSY	44
fosinopril sodium & hydrochlorothiazide .....	20	FYCOMPA TABS 4 MG .....	11	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 % .....	2
fosinopril sodium .....	20	FYCOMPA TABS 6 MG .....	11	gentamicin sulfate (ophth) OINT ...	58
fosphenytoin sodium .....	13	FYCOMPA TABS 8 MG, 10 MG, 12 MG .....	11	gentamicin sulfate (ophth) SOLN ..	58
FRAGMIN SOSY .....	11	gabapentin CAPS .....	12	gentamicin sulfate (topical) CREA	37
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM .....	52	gabapentin SOLN .....	12	gentamicin sulfate (topical) OINT ..	37
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM .....	52	gabapentin TABS 600 MG, 800 MG 12		gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML .....	2
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM .....	52	galantamine hydrobromide CP24 ..	60	GENVOYA .....	30
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....	52	galantamine hydrobromide SOLN ..	60	GILOTRIF .....	24
FREESTYLE LIBRE 3/READER/FLASH GLUCOSE MONITORING SYSTEM .....	52	galantamine hydrobromide TABS ..	60	glatiramer acetate SOSY 20 MG/ML . 61	
FREESTYLE LIBRE 3/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....	52	GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	59	glatiramer acetate SOSY 40 MG/ML . 61	
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....	52	GAMMAGARD LIQUID 30 GM/300ML .....	59	GLEOSTINE 10 MG .....	23
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM .....	52	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR .....	59	GLEOSTINE 40 MG, 100 MG .....	23
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....	52	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	59	glimepiride 1 MG, 2 MG .....	16
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM .....	52	GAMUNEX-C .....	59	glimepiride 4 MG .....	16
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM .....	52	ganciclovir sodium SOLR .....	31	glipizide TABS 5 MG, 10 MG .....	16
frovatriptan succinate .....	53	ganirelix acetate .....	44	glipizide TB24 .....	16
fulvestrant SOSY .....	25	GARDASIL 9 SUSP .....	66	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG .....	15
furosemide SOLN OR 10 MG/ML, 40		GARDASIL 9 SUSY .....	66	glipizide-metformin hcl 500 MG-5 MG .....	15
		gatifloxacin (ophth) .....	58	GLUCAGEN DIAGNOSTIC .....	42
		gefitinib .....	24	glucagon (rdna) .....	15
		gemcitabine hcl SOLR 2 GM .....	24	glyburide micronized 1.5 MG, 3 MG, 6 MG .....	16

glyburide TABS .....	16	haloperidol lactate CONC .....	29	HUMULIN R U-500 KWIKPEN SOPN SC .....	16
glyburide-metformin 250 MG-1.25 MG .....	15	haloperidol lactate SOLN .....	29	HYCANTIN CAPS .....	28
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG .....	15	haloperidol TABS .....	29	hydralazine hcl SOLN .....	21
glycine (gu irrigant) SOLN 1.5 % ..	47	HAVRIX .....	66	hydralazine hcl TABS .....	21
glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML .....	63	HEALON PRO SOSY .....	58	hydrochlorothiazide CAPS .....	43
glycopyrrolate TABS 1 MG .....	63	HEMANGEOL SOLN OR .....	32	hydrochlorothiazide TABS .....	43
glycopyrrolate TABS 2 MG .....	63	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	11	hydrocodone bitartrate CP12 .....	5
GLYXAMBI .....	15	HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11		hydrocodone bitartrate T24A .....	5
GNP PRENATAL TABS .....	55	HEPLISAV-B SOSY .....	66	hydrocodone polistirex- chlorpheniramine polistirex SUER	36
GOHIBIC .....	47	HIBERIX SOLR IJ .....	64	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML .....	6
GOJJI BLOOD KETONE TEST STRIPS .....	42	HIZENTRA SOLN .....	59	hydrocodone-acetaminophen SOLN . 6	
granisetron hcl SOLN IV 1 MG/ML	17	HIZENTRA SOSY 10 GM/50ML ..	59	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG .....	6
granisetron hcl TABS .....	17	HUMATROPE CART IJ .....	44	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....	6
GRASTEK SUBL .....	2	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML .....	3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG .....	6
griseofulvin microsize SUSP .....	18	HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML .....	3	hydrocodone-ibuprofen 7.5 MG-200 MG .....	6
griseofulvin microsize TABS .....	18	HUMIRA PEN AJKT SC 80 MG/0.8ML .....	3	hydrocortisone (intrarectal) .....	7
griseofulvin ultramicrosize .....	18	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML .....	3	hydrocortisone (rectal) EX .....	7
guanfacine hcl (adhd) .....	1	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML .....	3	hydrocortisone (topical) CREA 1 %, 2.5 % .....	41
guanfacine hcl .....	20	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML .....	3	hydrocortisone (topical) LOTN 2.5 % . 41	
GYNAZOLE-1 .....	68	HUMIRA PSKT .....	3	hydrocortisone (topical) OINT 1 %, 2.5 % .....	41
HAEGARDA SOLR SC .....	48	HUMULIN R U-500 (CONCENTRATED) SOLN SC .....	16		
HALAVEN (eribulin mesylate) ....	28				
halcinonide CREA .....	41				
halobetasol propionate CREA .....	41				
halobetasol propionate OINT .....	41				
HALOG OINT .....	41				
haloperidol decanoate .....	29				

hydrocortisone acetate (rectal) .....	7	ibandronate sodium SOLN .....	43	indomethacin CAPS 25 MG, 50 MG	4
hydrocortisone butyrate CREA .....	41	ibandronate sodium TABS .....	43	indomethacin CPCR .....	4
hydrocortisone butyrate OINT .....	41	IBRANCE CAPS .....	26	INFANRIX .....	63
hydrocortisone butyrate SOLN .....	41	IBRANCE TABS .....	26	INFLECTRA SOLR .....	46
hydrocortisone sod succinate 100 MG .....	36	ibuprofen SUSP 100 MG/5ML .....	4	INGREZZA CAPS .....	61
hydrocortisone TABS .....	36	ibuprofen TABS 400 MG, 600 MG, 800 MG .....	4	INGREZZA CPPK .....	61
hydrocortisone vaginal .....	68	icatibant acetate SOLN .....	47	INGREZZA CPSP .....	61
hydrocortisone valerate CREA .....	41	icatibant acetate SOSY .....	47	INLYTA .....	24
hydrocortisone valerate OINT .....	41	ICLUSIG .....	26	INREBIC .....	26
hydrocortisone w/acetic acid .....	59	icosapent ethyl 1 GM .....	19	INSULIN ASPART FLEXPEN SOPN . 16	
hydromorphone hcl LIQD .....	5	idarubicin hcl 20 MG/20ML .....	25	INSULIN ASPART PENFILL SOCT 16	
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 5		idarubicin hcl 5 MG/5ML, 10 MG/10ML .....	25	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN .....	16
hydromorphone hcl TABS .....	5	IDELVION .....	47	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP .....	16
hydromorphone hcl TB24 32 MG ...	5	ifosfamide SOLN 1 GM/20ML .....	23	INSULIN ASPART SOLN IJ .....	16
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG .....	5	ifosfamide SOLR .....	23	INSULIN DEGLUDEC FLEXTOUCH SOPN .....	16
hydroxychloroquine sulfate 100 MG 22		imatinib mesylate .....	26	INSULIN DEGLUDEC SOLN .....	16
hydroxychloroquine sulfate 200 MG 22		IMBRUVICA CAPS 140 MG .....	26	INTELENCE 25 MG .....	30
hydroxychloroquine sulfate 400 MG 22		IMBRUVICA CAPS 70 MG .....	26	IONOSOL-MB/DEXTROSE 5% ...	53
hydroxyurea .....	27	IMBRUVICA SUSP .....	26	IOPIDINE .....	58
hydroxyzine hcl SOLN 50 MG/ML ..	8	IMBRUVICA TABS .....	26	IPOL INACTIVATED IPV .....	66
hydroxyzine hcl SYRP .....	8	imipenem-cilastatin IV .....	21	ipratropium bromide (nasal) 0.03 % 57	
hydroxyzine hcl TABS .....	8	imipramine hcl TABS .....	14	ipratropium bromide (nasal) 0.06 % 57	
hydroxyzine pamoate CAPS .....	8	imipramine pamoate .....	14	ipratropium bromide SOLN 0.02 % .	9
HYPERSAL NEBU .....	36	imiqumod 5 % .....	41	ipratropium-albuterol SOLN .....	10
HYQVIA .....	59	IMPAVIDO .....	21		
		INCRELEX .....	44		
		INCRUSE ELLIPTA .....	9		
		indapamide TABS 1.25 MG .....	43		
		indapamide TABS 2.5 MG .....	43		

irbesartan .....	20	JANUMET TABS .....	15	KIMONO LUBRICATED MISC .....	50
irbesartan-hydrochlorothiazide .....	20	JANUMET XR TB24 1000 MG-100 MG .....	15	KIMONO MAXX/LARGE FLARE MISC .....	50
irinotecan hcl 40 MG/2ML, 100 MG/5ML .....	28	JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG .....	15	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC 50	
irrigation solutions, physiological .....	55	JANUVIA .....	16	KIMONO PLUS SPERMICIDE LUBRICATED MISC .....	50
ISENTRESS CHEW .....	30	JARDIANCE .....	16	KIMONO PLUS SPERMICIDE/LUBRICATED MISC 50	
ISENTRESS HD TABS .....	30	JEVTANA .....	28	KIMONO PS LUBRICATED MISC .50	
ISENTRESS TABS .....	30	JIVI .....	47	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC 51	
ISOLYTE-P/DEXTROSE 5% .....	53	JULUCA .....	30	KIMONO SENSATION LUBRICATED MISC .....	51
ISOLYTE-S .....	53	JYNARQUE TBPK .....	45	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC 51	
isoniazid SOLN .....	23	KALYDECO TABS .....	62	KIMONO SPECIAL DEVI .....	51
isoniazid SYRP .....	23	KAMELEON LUBRICATED MISC .50		KINRIX SUSY .....	63
isoniazid TABS .....	23	KANJINTI .....	24	KISQALI .....	26
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG .....	8	KCL 0.3%/D5W/NAACL 0.9% (potassium chloride in dextrose & sodium chloride) .....	53	KISQALI FEMARA 200 DOSE ....	26
isosorbide dinitrate-hydralazine hcl 33		KEPIVANCE 6.25 MG .....	27	KISQALI FEMARA 400 DOSE ....	26
isosorbide mononitrate TABS .....	8	ketoconazole (topical) CREA .....	38	KISQALI FEMARA 600 DOSE ....	26
isosorbide mononitrate TB24 .....	8	ketoconazole (topical) SHAM 2 % .....	38	KOGENATE FS KIT .....	47
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG .....	37	ketoconazole .....	18	KOSELUGO .....	26
isradipine CAPS .....	32	KETONE STRP .....	42	KOVALTRY .....	47
itraconazole CAPS .....	18	KETONE TEST STRIPS STRP ...	42	KP PRENATAL MULTIVITAMINS TABs .....	56
itraconazole SOLN .....	18	ketoprofen CAPS 50 MG .....	4	KRINTAFEL .....	22
ivabradine hcl TABS .....	34	ketorolac tromethamine (ophth) ...	59	K-Y ME & YOU EXTRA LUBRICATED DEVI .....	51
ivermectin (pediculicide) .....	42	ketorolac tromethamine TABS .....	4		
ivermectin .....	7	KETOSTIX STRP .....	42		
IXEMPRA KIT 15 MG .....	28	ketotifen fumarate (ophth) 0.035 % 59			
JAKAFI 10 MG, 20 MG .....	26	KEVZARA SOAJ .....	3		
JAKAFI 5 MG, 15 MG, 25 MG .....	26	KEVZARA SOSY .....	3		
JANSSEN COVID-19 VACCINE .....	66	KIMONO COLORS DEVI .....	50		

K-Y ME & YOU INTENSE DEVI ... 51	lapatinib ditosylate ..... 26	levobunolol hcl 0.5 % ..... 57
KYPROLIS ..... 26	LASTACRAFT ..... 59	levocetirizine dihydrochloride SOLN 18
labetalol hcl SOLN ..... 32	latanoprost SOLN ..... 59	levocetirizine dihydrochloride TABS 18
labetalol hcl TABS 100 MG, 200 MG . 32	leflunomide ..... 4	levofloxacin (ophth) 0.5 % ..... 58
labetalol hcl TABS 300 MG ..... 32	LEMTRADA ..... 61	levofloxacin in d5w 5 %-500 MG/100ML ..... 46
lacosamide SOLN IV 200 MG/20ML . 12	lenalidomide ..... 54	levofloxacin SOLN OR ..... 46
lacosamide TABS ..... 12	LENVIMA 10 MG DAILY DOSE ... 24	levofloxacin TABS ..... 46
lactated ringer's (irrigation) ..... 55	LENVIMA 12MG DAILY DOSE ... 24	levonorgestrel & eth estradiol TABS 35
lactated ringer's ..... 53	LENVIMA 14 MG DAILY DOSE ... 24	levonorgestrel (emergency oc) 1.5 MG ..... 35
lactic acid (ammonium lactate) CREA ..... 41	LENVIMA 18 MG DAILY DOSE ... 24	levonorgestrel-eth estradiol (triphasic) ..... 35
lactic acid (ammonium lactate) LOTN 12 % ..... 41	LENVIMA 20 MG DAILY DOSE ... 24	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG ..... 35
lactulose (encephalopathy) ..... 46	LENVIMA 24 MG DAILY DOSE ... 24	levonorgestrel-ethinyl estradiol (continuous) ..... 35
lactulose SOLN ..... 49	LENVIMA 4 MG DAILY DOSE ... 24	levonorgestrel-ethinyl estradiol-iron 35
lamivudine (hbv) TABS ..... 31	LENVIMA 8 MG DAILY DOSE ... 24	levorphanol tartrate TABS 2 MG ... 5
lamivudine SOLN ..... 30	letrozole ..... 25	levothyroxine sodium TABS ..... 63
lamivudine TABS 150 MG ..... 30	leucovorin calcium SOLR ..... 27	LEXIVA SUSP ..... 30
lamivudine TABS 300 MG ..... 30	leucovorin calcium TABS ..... 27	lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 % ..... 50
lamivudine-zidovudine ..... 30	LEUKERAN ..... 23	lidocaine hcl (mouth-throat) 2 % ... 55
lamotrigine CHEW 25 MG ..... 12	LEUKINE SOLR IJ ..... 48	lidocaine hcl (mouth-throat) 4 % ... 55
lamotrigine CHEW 5 MG ..... 12	leuprolide acetate KIT IJ 1 MG/0.2ML ..... 25	lidocaine hcl GEL 2 % ..... 42
lamotrigine TABS ..... 12	levalbuterol hcl ..... 10	lidocaine hcl PRSY ..... 42
lamotrigine TBDP ..... 12	levalbuterol hcl 1.25 MG/0.5ML ... 10	lidocaine hcl SOLN ..... 42
LANOXIN SOLN IJ (digoxin) ..... 33	levalbuterol tartrate ..... 10	lidocaine PTCH 5 % ..... 42
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin) ..... 33	levetiracetam SOLN IV 500 MG/5ML 12	
lansoprazole CPDR 15 MG ..... 64	levetiracetam TABS 1000 MG ..... 12	
lansoprazole CPDR 30 MG ..... 64	levetiracetam TABS 250 MG, 750 MG ..... 12	
lanthanum carbonate CHEW ..... 46	levetiracetam TABS 500 MG ..... 12	
	levetiracetam TB24 ..... 12	

lidocaine-prilocaine CREA .....	42	LORBRENA .....	26	LYNPARZA TABS .....	26
lincomycin hcl .....	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG .....	21	LYSODREN .....	25
linezolid SUSR .....	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG . 20		mafenide acetate PACK .....	39
linezolid TABS .....	22	losartan potassium .....	20	magnesium sulfate IJ 50 % .....	54
LINZESS .....	46	LOTEMAX OINT .....	58	malathion .....	42
liothyronine sodium SOLN .....	63	loteprednol etabonate GEL .....	58	maraviroc TABS .....	30
liothyronine sodium TABS .....	63	loteprednol etabonate SUSP .....	58	MARPLAN .....	13
lisdexamfetamine dimesylate CAPS 1		lovastatin TABS 10 MG, 20 MG ...	19	MASONATAL TABS .....	56
lisdexamfetamine dimesylate CHEW . 1		lovastatin TABS 40 MG .....	19	MATULANE .....	27
lisinopril & hydrochlorothiazide ...	20	loxapine succinate .....	29	MAXIDEX SUSP OP .....	58
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG .....	20	lubiprostone .....	46	MAXX LUBRICATED MISC .....	51
lithium .....	29	LUCEMYRA (lofexidine hcl) .....	60	MAXX PLUS SPERMICIDE LUBRICATED MISC .....	51
lithium carbonate CAPS .....	29	luliconazole .....	38	meclizine hcl TABS 12.5 MG, 25 MG 17	
lithium carbonate TABS .....	29	LUMIZYME .....	44	meclofenamate sodium CAPS .....	4
lithium carbonate TBCR .....	29	LUPRON DEPOT (1-MONTH) KIT IM .....	25	MEDROL TABS .....	36
LO LOESTRIN FE TABS .....	35	LUPRON DEPOT (3-MONTH) KIT IM .....	25	medroxyprogesterone acetate (contraceptive) SUSP IM .....	35
lofexidine hcl .....	60	LUPRON DEPOT (4-MONTH) IM .	25	medroxyprogesterone acetate (contraceptive) SUSY IM .....	35
LOKELMA .....	55	LUPRON DEPOT (6-MONTH) IM .	25	medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG .....	60
loperamide hcl CAPS .....	17	LUPRON DEPOT-PED (1-MONTH) . 44		mefenamic acid CAPS .....	4
lopinavir-ritonavir SOLN .....	30	LUPRON DEPOT-PED (3-MONTH) 11.25 MG .....	44	mefloquine hcl .....	23
lopinavir-ritonavir TABS .....	30	LUPRON DEPOT-PED (3-MONTH) 30 MG .....	44	megestrol acetate (appetite) .....	60
loratadine CAPS .....	18	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG .....	29	megestrol acetate SUSP .....	25
loratadine CHEW .....	18	lurasidone hcl 80 MG .....	29	megestrol acetate TABS .....	25
loratadine SOLN .....	18			MEKINIST TABS 0.5 MG .....	26
loratadine TABS .....	18			MEKINIST TABS 2 MG .....	26
loratadine TBDP .....	18			MEKTOVI .....	26
lorazepam CONC .....	8			meloxicam TABS .....	4
lorazepam TABS 0.5 MG, 2 MG ....	8				
lorazepam TABS 1 MG .....	8				

melphalan .....	23	METHADONE HCL SOLN IJ .....	5	methylphenidate hcl CPR .....	2
melphalan hcl IV .....	23	methadone hcl SOLN OR 10 MG/5ML .....	5	methylphenidate hcl SOLN .....	2
memantine hcl TABS .....	60	methadone hcl SOLN OR 5 MG/5ML 5		methylphenidate hcl TABS 10 MG, 20 MG .....	2
memantine hcl TABS .....	61	methadone hcl TABS 10 MG .....	5	methylphenidate hcl TABS 5 MG ...	2
MENACTRA .....	64	methadone hcl TABS 5 MG .....	5	methylphenidate hcl TB24 18 MG, 27 MG .....	2
MENEST .....	45	methadone hcl TBSO .....	5	methylphenidate hcl TB24 36 MG, 54 MG .....	2
MENOSTAR PTWK .....	45	methamphetamine hcl .....	1	methylphenidate hcl TBCR 10 MG, 20 MG .....	2
MENQUADFI .....	64	methazolamide TABS .....	43	methylphenidate hcl TBCR 18 MG, 27 MG .....	2
MENVEO SOLR .....	64	methenamine hippurate .....	22	methylphenidate hcl TBCR 36 MG, 54 MG .....	2
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML .....	5	methimazole TABS .....	62	methylphenidate PTCH .....	2
meperidine hcl SOLN OR 50 MG/5ML .....	5	METHITEST TABS .....	7	methylprednisolone acetate SUSP 36	
meperidine hcl TABS 50 MG .....	5	methocarbamol TABS 500 MG, 750 MG .....	57	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG .....	36
meprobamate .....	8	METHOTREXATE .....	3	methylprednisolone TABS .....	36
mercaptapurine TABS .....	24	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML .....	24	methylprednisolone TBPK .....	36
meropenem .....	21	methotrexate sodium SOLR .....	24	metoclopramide hcl SOLN IJ 5 MG/ML .....	46
mesalamine CP24 .....	46	methotrexate sodium TABS 2.5 MG 24		metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML .....	46
mesalamine CPDR .....	46	methoxsalen rapid .....	39	metoclopramide hcl TABS .....	46
mesalamine ENEM .....	46	methscopolamine bromide .....	63	metolazone .....	43
mesalamine SUPP .....	46	methsuximide .....	13	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG .....	21
mesalamine TBEC 1.2 GM .....	46	methyldopa TABS .....	20	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG .....	21
mesalamine TBEC 800 MG .....	46	methylphenidate hcl CHEW 10 MG .2		metoprolol succinate TB24 200 MG 32	
metaxalone 800 MG .....	57	methylphenidate hcl CHEW 2.5 MG 2			
metformin hcl TABS 1000 MG .....	15	methylphenidate hcl CHEW 5 MG ..2			
metformin hcl TABS 500 MG .....	15	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG .....	2		
metformin hcl TABS 850 MG .....	15	methylphenidate hcl CP24 30 MG ..2			
metformin hcl TB24 500 MG .....	15	methylphenidate hcl CP24 .....	2		
metformin hcl TB24 750 MG .....	15				
methadone hcl CONC .....	5				
methadone hcl SOLN IJ 10 MG/ML .5					

metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....	32	mitomycin SOLR IV 20 MG .....	25	morphine sulfate SOLN OR 10 MG/5ML .....	5
metoprolol tartrate SOLN IV 5 MG/5ML .....	32	mitoxantrone hcl 2 MG/ML .....	26	morphine sulfate SOLN OR 20 MG/5ML .....	5
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG .....	32	M-M-R II SOLR .....	66	morphine sulfate TABS .....	5
metronidazole (topical) CREA .....	42	M-NATAL PLUS TABS .....	56	morphine sulfate TBCR .....	6
metronidazole (topical) GEL 0.75 % 42		modafinil 100 MG .....	2	MOTOFEN .....	17
metronidazole (topical) GEL 1 % ..	42	modafinil 200 MG .....	2	MOVANTIK .....	46
metronidazole (topical) LOTN .....	42	MODERNA COVID-19 VACCINE SUSP .....	67	moxifloxacin hcl (ophth) SOLN OP	58
metronidazole TABS .....	21	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP .	66	moxifloxacin hcl in sodium chloride 46	
metronidazole vaginal .....	68	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY .	67	moxifloxacin hcl TABS .....	46
mexiletine hcl .....	8	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y ...	67	MULPLETA .....	48
micafungin sodium .....	18	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5 .	67	MULTI PRENATAL TABS .....	56
miconazole nitrate vaginal SUPP 200 MG .....	68	MODERNA COVID-19 VACCINE6MO-5Y SUSP .....	67	mupirocin OINT .....	37
midodrine hcl .....	68	moexipril hcl .....	20	MVASI .....	24
mifepristone .....	45	mometasone furoate (nasal) SUSP 57		MYALEPT .....	44
miglitol .....	15	mometasone furoate CREA .....	41	mycophenolate mofetil CAPS .....	55
miglustat .....	48	mometasone furoate OINT .....	41	mycophenolate mofetil TABS .....	55
minocycline hcl CAPS .....	62	mometasone furoate SOLN .....	41	mycophenolate sodium .....	55
minocycline hcl TABS .....	62	montelukast sodium CHEW .....	9	MYLERAN TABS .....	23
minoxidil 2.5 MG, 10 MG .....	21	montelukast sodium PACK .....	9	nabumetone .....	4
MIRCERA .....	48	montelukast sodium TABS .....	9	nadolol TABS 20 MG .....	32
mirtazapine TABS 15 MG .....	13	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG .....	5	nadolol TABS 40 MG .....	32
mirtazapine TABS 30 MG .....	13	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML .....	5	nadolol TABS 80 MG .....	32
mirtazapine TABS 7.5 MG, 45 MG	13			nafcillin sodium IV 10 GM .....	60
mirtazapine TBDP 15 MG .....	13			naftifine hcl CREA 1 % .....	38
mirtazapine TBDP 30 MG .....	13			naftifine hcl CREA 2 % .....	38
mirtazapine TBDP 45 MG .....	13			nalbuphine hcl .....	7
misoprostol .....	64			naloxone hcl LIQD .....	17
				naloxone hcl SOLN 0.4 MG/ML, 4	

MG/10ML .....	17	NEONATAL PRENATAL VITAMIN TABS .....	56	NICOTROL NS SOLN .....	62
naltrexone hcl .....	17	NEONATAL VITAMIN TABS .....	56	nifedipine CAPS 10 MG .....	33
naproxen sodium TABS 550 MG ...	4	neostigmine methylsulfate SOSY ..	23	nifedipine CAPS 20 MG .....	33
naproxen SUSP .....	4	NEO-SYNALAR .....	38	nifedipine TB24 30 MG .....	33
naproxen TABS .....	4	NEUPRO .....	28	nifedipine TB24 60 MG .....	33
naproxen TBEC 500 MG .....	4	NEVANAC .....	59	nifedipine TB24 90 MG .....	33
naratriptan hcl .....	53	nevirapine SUSP .....	30	nifedipine TB24 .....	33
NATACYN .....	58	nevirapine TABS .....	30	nilutamide .....	25
NATAZIA .....	35	nevirapine TB24 100 MG .....	30	nimodipine CAPS .....	33
nateglinide .....	16	nevirapine TB24 400 MG .....	30	NINLARO .....	26
NAYZILAM .....	11	NEXIUM 24HR TBEC (esomeprazole magnesium) .....	64	nisoldipine .....	33
nebivolol hcl 2.5 MG, 5 MG, 10 MG 32		NEXLETOL .....	19	nitazoxanide TABS .....	21
nebivolol hcl 20 MG .....	32	NEXTSTELLIS .....	35	nitisinone CAPS .....	44
NEBUSAL NEBU .....	36	niacin (antihyperlipidemic) TBCR ..	19	NITRO-BID OINT .....	8
nefazodone hcl .....	14	niacin CPCR 250 MG, 500 MG ...	68	nitrofurantoin .....	22
nelarabine .....	24	niacin TABS .....	68	nitrofurantoin macrocrystal 50 MG, 100 MG .....	22
neomycin sulfate TABS .....	2	niacin TBCR .....	68	nitrofurantoin monohyd macro ....	22
neomycin-bacitracin zn-polymyxin	58	NIACIN TR TBCR .....	68	nitroglycerin (intra-anal) .....	7
neomycin-polymy-dexameth OINT	58	niacinamide TABS .....	68	nitroglycerin CPCR .....	8
neomycin-polymy-dexameth SUSP	58	nicardipine hcl CAPS .....	32	nitroglycerin PT24 .....	8
neomycin-polymyxin-hc (ophth) ...	58	nicardipine hcl SOLN .....	33	NITROGLYCERIN SOLN IV .....	8
neomycin-polymyxin-hc (otic) SOLN .	59	nicotine MISC XX .....	62	nitroglycerin SUBL .....	8
neomycin-polymyxin-hc (otic) SUSP .	59	nicotine polacrilex GUM .....	62	NIVA-PLUS TABS .....	56
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG- 27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG .....	56	nicotine polacrilex LOZG .....	62	nizatidine CAPS .....	63
NEONATAL PLUS TABS .....	56	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR .....	62	NORDITROPIN FLEXPPO SOPN 30 MG/3ML .....	44
		NICOTINE TRANSDERMAL SYSTEM KIT .....	62	NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML .....	44
		NICOTROL INHALER INHA .....	62	norelgestromin-ethinyl estradiol ...	35

norethin acet & estrad-fe CAPS ... 35	NOVAVAX COVID-19 VACCINE/2023-24 SUSP ..... 67	octreotide acetate SOLN ..... 45
norethin acet & estrad-fe CHEW ... 35	NOVAVAX COVID-19 VACCINE/2024-25 SUSY ..... 67	octreotide acetate SOSY ..... 45
norethin acet & estrad-fe TABS 1 MCG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG ..... 35	NOVOEIGHT ..... 47	ODEFSEY ..... 31
norethindrone & eth estradiol ..... 35	NOVOLIN 70/30 FLEXPEN SUPN 16	ODOMZO ..... 24
norethindrone & ethinyl estradiol-fe 35	NOVOLIN 70/30 SUSP ..... 16	OFEV ..... 62
norethindrone (contraceptive) ..... 35	NOVOLIN N FLEXPEN SUPN ..... 16	ofloxacin (ophth) ..... 58
norethindrone acet & eth estra TABS 35	NOVOLIN N SUSP ..... 16	ofloxacin (otic) ..... 59
norethindrone acetate TABS ..... 60	NOVOLIN R FLEXPEN SOPN IJ .. 16	ofloxacin 300 MG, 400 MG ..... 46
norethindrone acetate-ethinyl estradiol ..... 45	NOVOLIN R SOLN IJ ..... 16	OGIVRI ..... 24
norethindrone acetate-ethinyl estradiol-fe ..... 35	NP THYROID 120 TABS ..... 63	olanzapine SOLR ..... 29
norethindrone-eth estradiol (triphasic) ..... 35	NP THYROID 15 TABS ..... 63	olanzapine TABS 2.5 MG, 5 MG .. 29
norgestimate-ethinyl estradiol (triphasic) ..... 35	NP THYROID 30 TABS ..... 63	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG ..... 29
norgestimate-ethinyl estradiol ..... 35	NP THYROID 60 TABS ..... 63	olanzapine TBDP 20 MG ..... 29
norgestrel & ethinyl estradiol 30 MCG-0.3 MG ..... 35	NP THYROID 90 TABS ..... 63	olanzapine TBDP 5 MG, 10 MG, 15 MG ..... 29
NORMOSOL-M/D5W ..... 53	NUBEQA ..... 25	olmesartan medoxomil ..... 20
NORMOSOL-R ..... 53	NUCALA SOAJ ..... 8	olmesartan medoxomil-amlodipine-hydrochlorothiazide ..... 21
nortriptyline hcl CAPS ..... 14	NUCALA SOLR ..... 8	olmesartan medoxomil-hydrochlorothiazide ..... 21
nortriptyline hcl SOLN ..... 14	NUCALA SOSY 100 MG/ML ..... 8	olopatadine hcl (nasal) ..... 57
NORVIR CAPS ..... 30	NUCALA SOSY 40 MG/0.4ML ..... 8	olopatadine hcl 0.1 % ..... 59
NORVIR PACK ..... 30	NUEDEXTA ..... 61	olopatadine hcl 0.2 % ..... 59
NORVIR SOLN ..... 31	NULOJIX ..... 55	omega-3-acid ethyl esters ..... 19
NOVA MAX PLUS KETONE TESTSTRIPS ..... 42	nystatin (mouth-throat) ..... 55	omeprazole CPDR ..... 64
NOVAVAX COVID-19 VACCINE SUSP ..... 67	nystatin (topical) CREA ..... 38	omeprazole magnesium CPDR ... 64
	nystatin (topical) OINT ..... 38	omeprazole TBEC ..... 64
	nystatin (topical) POWD EX ..... 38	omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG ..... 64
	nystatin TABS ..... 18	OMNIFLEX DIAPHRAGM ..... 51
	nystatin-triamcinolone CREA ..... 38	ONCASPAR ..... 27
	nystatin-triamcinolone OINT ..... 38	
	NYVEPRIA ..... 48	

ondansetron hcl SOLN IJ 4 MG/2ML .17	OTEZLA TABS ..... 4	paclitaxel 6 MG/ML, 100 MG/16.7ML 28
ondansetron hcl SOLN OR 4 MG/5ML ..... 17	OTEZLA TBPk ..... 4	paclitaxel protein-bound particles .28
ondansetron hcl SOSY ..... 17	oxacillin sodium IV 10 GM ..... 60	paliperidone 1.5 MG, 3 MG, 9 MG .29
ondansetron hcl TABS 24 MG ..... 17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML ..... 23	paliperidone 6 MG ..... 29
ondansetron hcl TABS 4 MG ..... 17	oxandrolone ..... 7	palonosetron hcl SOLN ..... 17
ondansetron hcl TABS 8 MG ..... 17	oxaprozin TABS ..... 4	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML ..... 44
ondansetron TBPd 4 MG ..... 17	oxazepam CAPS ..... 8	PAMIDRONATE DISODIUM SOLN 44
ondansetron TBPd 8 MG ..... 17	oxcarbazepine SUSP ..... 12	PANRETIN ..... 39
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS 56	oxcarbazepine TABS 150 MG, 300 MG ..... 12	pantoprazole sodium TBEC 20 MG 64
ONE VITE WOMENS PRENATALVITAMIN TABS ..... 56	oxcarbazepine TABS 600 MG ..... 12	pantoprazole sodium TBEC 40 MG 64
ONETOUCH DELICA SAFETY LANCING DEVICE ..... 52	oxiconazole nitrate CREA ..... 38	paricalcitol CAPS ..... 44
ONETOUCH DELICA SAFETY LANCING DEVICE 30G ..... 52	OXISTAT LOTN ..... 38	paricalcitol SOLN ..... 44
OPILL ..... 35	oxybutynin chloride SOLN ..... 64	paroxetine hcl SUSP ..... 14
OPSUMIT ..... 33	oxybutynin chloride TABS 5 MG ... 64	paroxetine hcl TABS 10 MG ..... 14
ORENITRAM TBCR ..... 33	oxybutynin chloride TB24 ..... 64	paroxetine hcl TABS 20 MG ..... 14
ORILISSA ..... 44	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG ..... 6	paroxetine hcl TABS 30 MG ..... 14
ORKAMBI PACK ..... 62	oxycodone hcl TABS ..... 6	paroxetine hcl TABS 40 MG ..... 14
ORKAMBI TABS ..... 62	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG ..... 6	paroxetine hcl TB24 12.5 MG ..... 14
ORLADEYO ..... 48	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG ..... 6	paroxetine hcl TB24 25 MG, 37.5 MG ..... 14
orphenadrine citrate TB12 ..... 57	oxymorphone hcl TABS ..... 6	PASER PACK ..... 23
orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG ..... 57	oxymorphone hcl TB12 40 MG ..... 6	pazopanib hcl ..... 26
oseltamivir phosphate CAPS ..... 31	oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 6	PEDIARIX SUSY ..... 63
oseltamivir phosphate SUSP ..... 32	OZEMPIC SOPN 2 MG/1.5ML ..... 16	pediatric multivitamins w/fl CHEW .55
OSMOPREP ..... 49	OZEMPIC SOPN ..... 16	PEDVAX HIB SUSP ..... 64
OSPHENA ..... 44	paclitaxel 150 MG/25ML ..... 28	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid ..... 49

peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM .....	49	PERSERIS PRSY .....	29	phentermine hcl CAPS .....	1
peg 3350-potassium chloride-sod bicarbonate-sod chloride .....	49	PFIZER-BIONTECH COVID-19VACCINE SUSP .....	67	phenytoin CHEW .....	13
PEGASYS SOLN .....	31	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP .....	67	phenytoin sodium extended 100 MG, 200 MG, 300 MG .....	13
PEGASYS SOSY .....	31	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP .....	67	phenytoin sodium SOLN .....	13
PEMAZYRE .....	26	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP .....	67	phenytoin SUSP .....	13
pemetrexed disodium SOLR 500 MG 24		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP .....	67	PHEXXI .....	68
penciclovir .....	39	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP .....	67	PHOTOFRIN .....	27
penicillamine CAPS .....	54	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP .....	67	PIFELTRO .....	31
penicillamine TABS .....	54	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP .....	67	pilocarpine hcl (oral) .....	55
penicillin g potassium 5000000 UNIT 60		PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP .....	67	pilocarpine hcl SOLN 1 %, 2 %, 4 % .....	58
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML .....	60	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y ...	67	pimecrolimus .....	42
PENICILLIN G PROCAINE .....	60	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y ...	67	pimozide .....	62
penicillin g sodium .....	60	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/BA.4/BA.5 .....	67	pindolol TABS .....	32
penicillin v potassium SOLR .....	60	PHEBURANE PLLT .....	44	pioglitazone hcl .....	16
penicillin v potassium TABS .....	60	phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG .....	47	pioglitazone hcl-glimepiride .....	15
PENTACEL .....	63	phendimetrazine tartrate TABS .....	1	pioglitazone hcl-metformin hcl TABS .....	15
pentazocine w/ naloxone hcl .....	7	phenelzine sulfate .....	13	piperacillin sodium-tazobactam sodium .....	60
pentoxifylline .....	48	phenobarbital ELIX .....	49	PIQRAY 200MG DAILY DOSE ...	26
perindopril erbumine 2 MG, 8 MG .....	20	phenobarbital TABS .....	49	PIQRAY 250MG DAILY DOSE ...	27
perindopril erbumine 4 MG .....	20	phenoxybenzamine hcl .....	20	PIQRAY 300MG DAILY DOSE ...	27
PERJETA .....	24			pirfenidone CAPS .....	62
permethrin CREA .....	42			pirfenidone TABS 267 MG, 801 MG .....	62
permethrin LIQD EX .....	42			pirfenidone TABS 534 MG .....	62
perphenazine TABS .....	29			piroxicam CAPS .....	4
perphenazine-amitriptyline .....	61			PLASMA-LYTE A (electrolyte-a) .....	54

PLEGRIDY SOAJ SC 125 MCG/0.5ML ..... 61	potassium chloride PACK OR 20 MEQ ..... 54	prednisolone acetate (ophth) ..... 58
PLEGRIDY SOSY SC ..... 61	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 54	PREDNISOLONE SODIUM PHOSPHATE ..... 58
PLEGRIDY STARTER PACK SOAJ SC ..... 61	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML ..... 54	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML 36
PLEGRIDY STARTER PACK SOSY SC ..... 61	potassium chloride TBCR ..... 54	prednisolone sodium phosphate TBDP ..... 36
plerixafor ..... 49	POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS ..... 54	prednisolone SOLN ..... 36
PNEUMOVAX 23 IJ 25 MCG/0.5ML . 64	POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl) ..... 54	prednisolone TABS ..... 36
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML ..... 64	potassium citrate (alkalinizer) TBCR . 47	prednisone SOLN ..... 36
podofilox SOLN ..... 42	potassium phosphates 236 MG/ML- 224 MG/ML ..... 54	prednisone TABS ..... 36
polymyxin b sulfate SOLR ..... 22	PR BENZOYL PEROXIDE WASH LIQD ..... 37	prednisone TBPK ..... 36
polymyxin b-trimethoprim ..... 58	pralatrexate 20 MG/ML ..... 24	pregabalin (once-daily) 330 MG ... 61
POMALYST ..... 25	pramipexole dihydrochloride TABS 0.125 MG ..... 28	pregabalin (once-daily) 82.5 MG, 165 MG ..... 61
posaconazole SUSP ..... 18	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG ..... 28	pregabalin CAPS 225 MG, 300 MG 12
potassium acetate SOLN 2 MEQ/ML . 54	prasugrel hcl ..... 48	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 12
potassium bicarbonate TBEF ..... 54	pravastatin sodium ..... 19	pregabalin SOLN ..... 12
potassium chloride CPCR ..... 54	praziquantel ..... 7	PREHEVBRIO ..... 67
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	prazosin hcl CAPS ..... 20	PREMARIN ..... 68
potassium chloride in dextrose 5 %- 20 MEQ/L ..... 54	PRECISION XTRA ..... 42	PREMARIN SOLR ..... 45
potassium chloride in nacl 20 MEQ/L- 0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L- 0.9 % ..... 54	PRED MILD ..... 58	PREMARIN TABS ..... 45
potassium chloride microencapsulated crystals er .... 54	PRED-G SUSP ..... 58	PREMPHASE ..... 45
	prednicarbate OINT ..... 41	PREMPRO ..... 45
		PRENATAL MULTIVITAMIN TABS 56
		PRENATAL ONE DAILY TABS ... 56
		PRENATAL PLUS TABS ..... 56
		PRENATAL PLUS VITAMIN

ANDMINERAL TABS .....	56	UNIT/ML, 20000 UNIT/ML .....	48	pyridostigmine bromide SOLN OR	23
PRENATAL TABS .....	56	PROCRIT 40000 UNIT/ML .....	48	pyridostigmine bromide TABS 60 MG	.....23
PRENATAL VITAMIN & MINERAL		progesterone CAPS .....	60	pyridostigmine bromide TBCR .....	23
TABS .....	56	PROGRAF PACK .....	55	pyrimethamine .....	23
PRENATAL VITAMIN TABS .....	56	PROGRAF SOLN .....	55	QC PRENATAL TABS .....	56
PRENATAL VITAMIN/IRON TABS	56	PROLASTIN-C SOLN .....	62	QINLOCK .....	27
PRENATAL VITAMINS PLUS LOW		PROLEUKIN .....	27	QUADRACEL SUSP .....	63
IRON TABS .....	56	PROLIA SOSY .....	44	QUADRACEL SUSY .....	63
PRENATAL VITAMINS TABS 100		PROMACTA PACK .....	48	quetiapine fumarate TABS 25 MG, 50	
MG-800 MCG-1.84 MG-18 MG-2.6		PROMACTA TABS .....	48	MG, 100 MG, 200 MG .....	29
MG-1.7 MG-27 MG-10 MCG-4.95		promethazine hcl SOLN OR 6.25		quetiapine fumarate TABS 300 MG,	
MG-25 MG-200 MG-160 MG-1200		MG/5ML .....	18	400 MG .....	29
MCG-4 MCG, 120 MG-2.6 MG-800		promethazine hcl SUPP 12.5 MG, 25		quetiapine fumarate TB24 300 MG,	
MCG-400 UNIT-8 MCG-1.7 MG-20		MG .....	19	400 MG .....	29
MG-28 MG-200 MG-1.8 MG-25 MG-		promethazine hcl SUPP 50 MG ...	18	quetiapine fumarate TB24 50 MG,	
4000 UNIT-30 UNIT .....	56	promethazine hcl TABS .....	19	150 MG, 200 MG .....	29
PRENATRIX TABS .....	56	propafenone hcl CP12 .....	8	quinapril hcl 20 MG, 40 MG .....	20
PRENATRYL TABS .....	56	propafenone hcl TABS .....	8	quinapril hcl 5 MG, 10 MG .....	20
PREVNAR 13 .....	64	proparacaine hcl .....	58	quinapril-hydrochlorothiazide 12.5	
PREVNAR 20 .....	64	propranolol hcl CP24 .....	32	MG-10 MG .....	21
PREZCOBIX .....	31	propranolol hcl SOLN OR 20		quinapril-hydrochlorothiazide 12.5	
PREZISTA SUSP .....	31	MG/5ML, 40 MG/5ML .....	32	MG-20 MG .....	21
PREZISTA TABS 75 MG, 150 MG	31	propranolol hcl TABS .....	32	quinapril-hydrochlorothiazide 25 MG-	
PRIFTIN .....	23	propylthiouracil .....	63	20 MG .....	21
primaquine phosphate TABS .....	23	protriptyline hcl .....	14	quinidine sulfate TABS .....	8
primidone 50 MG, 250 MG .....	12	PROVISC SOSY .....	58	quinine sulfate CAPS 324 MG .....	23
PRIORIX SUSR .....	67	PULMICORT FLEXHALER AEPB ..	9	QUZYTIR SOLN IV .....	18
probenecid .....	47	PULMOZYME .....	62	QVAR REDHALER .....	9
procainamide hcl SOLN 500 MG/ML	8	PX PRENATAL MULTIVITAMINS		RA PRENATAL	
8		TABS .....	56	FORMULA/FOLICACID TABS .....	56
prochlorperazine .....	29	pyrazinamide .....	23	RA PRENATAL TABS .....	56
prochlorperazine maleate TABS ...	29			rabeprazole sodium TBEC .....	64
PROCRIT 2000 UNIT/ML, 3000					
UNIT/ML, 4000 UNIT/ML, 10000					

raloxifene hcl .....	44	REPATHA PUSHTRONEX SYSTEM	rivastigmine tartrate CAPS .....	61
ramelteon .....	49	SOCT .....	rizatriptan benzoate TABS 10 MG	.53
ramipril CAPS .....	20	REPATHA SOSY .....	rizatriptan benzoate TABS 5 MG	.. 53
ranitidine hcl TABS 150 MG .....	63	REPATHA SURECLICK SOAJ .....	rizatriptan benzoate TBDP 10 MG	.53
ranolazine TB12 1000 MG .....	7	RETACRIT .....	rizatriptan benzoate TBDP 5 MG	.. 53
ranolazine TB12 500 MG .....	7	RETEVMO CAPS .....	roflumilast .....	9
rasagiline mesylate .....	28	RETROVIR IV INFUSION SOLN ..	romidepsin SOLR .....	27
REALITY LATEX		REXULTI .....	ropinirole hydrochloride TABS .....	28
CONDOMS/LUBRICATED MISC ..	51	REZVOGLAR KWIKPEN .....	ropinirole hydrochloride TB24 2 MG,	
REALITY LATEX/ULTRA		ribavirin (hepatitis c) CAPS .....	4 MG, 6 MG .....	28
TEXTURED DEVI .....	51	ribavirin (hepatitis c) TABS 200 MG	ropinirole hydrochloride TB24 8 MG,	
REALITY LATEX/ULTRA THIN DEVI		31	12 MG .....	28
51		RIDAURA .....	rosuvastatin calcium TABS .....	19
REBIF REBIDOSE SOAJ .....	61	rifabutin .....	ROTARIX SUSP .....	67
REBIF REBIDOSE TITRATIONPACK		rifampin CAPS .....	ROTARIX SUSR .....	67
SOAJ .....	61	rifampin SOLR .....	ROTATEQ SOLN .....	67
REBIF SOSY .....	61	riluzole TABS .....	ROZLYTREK CAPS .....	27
REBIF TITRATION PACK SOSY ..	61	rimantadine hydrochloride TABS ..	RUBRACA .....	27
RECOMBIVAX HB SUSP .....	67	ringer's .....	RUCONEST .....	48
RECOMBIVAX HB SUSY .....	67	ringer's irrigation .....	rufinamide SUSP .....	12
REGRANEX .....	42	RINVOQ TB24 .....	rufinamide TABS 200 MG .....	12
RELENZA DISKHALER .....	32	risedronate sodium TABS 150 MG	rufinamide TABS 400 MG .....	12
RELION 2-IN-1 LANCET DEVICES		44	RUXIENCE .....	24
30G .....	52	risedronate sodium TABS 35 MG	RYBELSUS TABS .....	16
RELION 2-IN-1 LANCING DEVICE		44	salsalate .....	5
25G .....	52	risedronate sodium TABS 5 MG, 30	SANTYL OINT .....	41
RELION 2-IN-1 LANCING DEVICE		MG .....	sapropterin dihydrochloride PACK	.45
30G .....	52	44	sapropterin dihydrochloride TABS	.45
RELION KETONE TEST STRIPS		risedronate sodium TBEC .....	SAVELLA TABS .....	61
STRP .....	42	44	SAVELLA TITRATION PACK MISC	
RENFLEXIS .....	46	risperidone microspheres .....	61	
repaglinide 0.5 MG, 1 MG .....	16	risperidone SOLN .....		
repaglinide 2 MG .....	16	risperidone TABS .....		
		risperidone TBEP .....		
		ritonavir TABS .....		

saxagliptin hcl	16	hypertension) TABS	33	sodium polystyrene sulfonate POWD	55
saxagliptin-metformin hcl 1000 MG-2.5 MG	15	sildenafil citrate	33	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	55
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	silodosin	47	sodium sulfate-potassium sulfate-magnesium sulfate	49
SCSEMBLIX 100 MG	27	SIMPONI ARIA SOLN	3	SOFOSBUVIR/VELPATASVIR TABS	31
SCSEMBLIX 20 MG, 40 MG	27	SIMULECT	55	solifenacin succinate TABS	64
scopolamine	17	simvastatin TABS	19	SOLQUA 100/33	15
SELECT INSULIN SYRINGES	52	sirolimus TABS	55	SOLOSEC	2
SELECT LANCETS	52	SIRTURO	23	SOLU-CORTEF 100 MG, 500 MG, 1000 MG	36
selegiline hcl CAPS	28	SIVEXTRO TABS	22	SOLU-CORTEF 250 MG	36
selegiline hcl TABS	28	SKYRIZI PEN SOAJ	39	SOLU-MEDROL 2 GM	36
selenium sulfide LOTN 2.5 %	39	SKYRIZI PSKT	39	sorafenib tosylate	27
SELZENTRY SOLN	31	SKYRIZI SOCT	46	SORBITOL 3 %	47
SELZENTRY TABS 25 MG, 75 MG	31	SKYRIZI SOLN	46	SORBITOL/MANNITOL IRRIGATION	47
SEMGLEE SOLN	16	SKYRIZI SOSY	39	sotalol hcl (afib/afI)	32
SEMGLEE SOPN	16	SLO-NIACIN TBCR 500 MG, 750 MG (niacin)	68	sotalol hcl TABS 240 MG	32
SEREVENT DISKUS	10	SLYND	35	sotalol hcl TABS 80 MG, 120 MG, 160 MG	32
sertraline hcl CONC	14	SM PRENATAL VITAMINS TABS	56	SOVALDI TABS	31
sertraline hcl TABS 100 MG	14	SODIUM ACETATE SOLN (sodium acetate)	53	SPIKEVAX COVID-19 VACCINE SUSP	67
sertraline hcl TABS 25 MG, 50 MG	14	sodium acetate SOLN	53	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	67
sevelamer carbonate PACK	46	sodium chloride (gu irrigant) 0.9 %	47	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	67
sevelamer carbonate TABS	46	sodium chloride (inhalant) NEBU 7 %	36	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	67
SHINGRIX	67	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	54	spinosad	42
SIGNIFOR	45	sodium citrate & citric acid	47	SPIRIVA RESPIMAT AERS	9
sildenafil citrate (pulmonary hypertension) SOLN	33	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	54		
sildenafil citrate (pulmonary hypertension) SUSR	33	sodium phenylbutyrate POWD	45		
sildenafil citrate (pulmonary hypertension) TABS	33	sodium phenylbutyrate TABS	45		

spironolactone & hydrochlorothiazide .....	43	sulfacetamide sodium w/ sulfur LIQD 10 %-5 % .....	37	SYNJARDY TABS .....	15
spironolactone TABS .....	43	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 % .....	37	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG .....	15
SPRAVATO 56MG DOSE .....	13	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 % .....	37	SYNJARDY XR TB24 1000 MG-25 MG .....	15
SPRAVATO 84MG DOSE .....	13	sulfacetamide sod-prednisolone SOLN .....	58	SYNRIBO .....	27
SPRYCEL (dasatinib) .....	27	sulfadiazine TABS .....	62	TABLOID .....	24
stannous fluoride CONC .....	55	sulfamethoxazole-trimethoprim SOLN .....	21	TABRECTA .....	27
stavudine CAPS .....	31	sulfamethoxazole-trimethoprim SUSP .....	21	tacrolimus (topical) OINT .....	42
STELARA 130 MG/26ML .....	46	sulfamethoxazole-trimethoprim TABS .....	21	tacrolimus CAPS .....	55
STELARA SOLN 45 MG/0.5ML ...	39	SULFAMILYLON CREA .....	39	tadalafil (pulmonary hypertension) TABS .....	33
STELARA SOSY 45 MG/0.5ML ...	39	sulfasalazine TABS .....	46	tadalafil 5 MG .....	33
STELARA SOSY 90 MG/ML .....	39	sulfasalazine TBEC .....	46	TAFINLAR CAPS .....	27
STIOLTO RESPIMAT .....	10	sulindac TABS .....	4	tafluprost .....	59
STIVARGA .....	27	sumatriptan .....	53	TAGRISSO 40 MG .....	24
STRENSIQ .....	45	sumatriptan succinate SOAJ .....	53	TAGRISSO 80 MG .....	24
streptomycin sulfate SOLR .....	2	sumatriptan succinate SOCT .....	53	TAKHZYRO SOLN .....	48
STRIBILD .....	31	sumatriptan succinate SOLN 6 MG/0.5ML .....	53	TAKHZYRO SOSY .....	48
STRIVERDI RESPIMAT .....	10	sumatriptan succinate TABS .....	53	TALZENNA .....	27
SUBSYS LIQD 100 MCG .....	6	sumatriptan-naproxen sodium ...	52	tamoxifen citrate TABS .....	25
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG .....	6	sunitinib malate 12.5 MG, 25 MG, 50 MG .....	27	tamsulosin hcl .....	47
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG .....	6	sunitinib malate 37.5 MG .....	27	TASIGNA .....	27
sucralfate SUSP .....	63	SUNOSI 150 MG .....	1	tavorole .....	38
sucralfate TABS .....	63	SUNOSI 75 MG .....	1	TAVALISSE .....	48
sulconazole nitrate CREA .....	38	SYNAREL .....	44	tazarotene CREA 0.1 % .....	39
sulconazole nitrate SOLN .....	38	SYNERA PTCH .....	42	TAZVERIK .....	27
sulfacetamide sodium (acne) .....	37			TDVAX SUSP .....	63
sulfacetamide sodium (ophth) SOLN . 58				TEFLARO .....	34
sulfacetamide sodium w/ sulfur CREA 10 %-5 % .....	37			TEGRETOL SUSP (carbamazepine) . 12	

TEGRETOL TABS (carbamazepine) . 12	THERANATAL CORE NUTRITION TABS .....56	tolmetin sodium CAPS ..... 4 tolmetin sodium TABS 600 MG ..... 4
telmisartan .....20	THIOLA EC TBEC 100 MG (tiopronin) ..... 47	TOLSURA CAPS .....18
telmisartan-amlodipine .....21	THIOLA EC TBEC 300 MG (tiopronin) ..... 47	tolterodine tartrate CP24 .....64 tolterodine tartrate TABS ..... 64
telmisartan-hydrochlorothiazide ...21	thioridazine hcl ..... 29	tolvaptan TABS ..... 45
temazepam .....49	thiotepa 15 MG .....23	topiramate CPSP 15 MG .....12 topiramate CPSP 25 MG .....12
TEMODAR SOLR .....23	thiothixene .....30	topiramate CS24 .....12
temozolomide CAPS .....23	THYMOGLOBULIN .....55	topiramate TABS 200 MG ..... 12
temsirolimus .....27	THYROGEN 0.9 MG .....42	topiramate TABS 25 MG, 100 MG .12
TENIVAC INJ ..... 63	tiagabine hcl .....12	topiramate TABS 50 MG .....12
tenofovir disoproxil fumarate TABS 31	TIBSOVO .....27	topotecan hcl SOLR ..... 28
terazosin hcl .....20	tigecycline ..... 62	toremifene citrate .....25
terbinafine hcl TABS ..... 18	timolol maleate (ophth) SOLG ..... 57	torsemide TABS ..... 43
terbutaline sulfate SOLN .....10	timolol maleate (ophth) SOLN ..... 57	TRACLEER TBSO .....33
terbutaline sulfate TABS ..... 10	timolol maleate TABS .....32	tramadol hcl TABS 50 MG ..... 6
terconazole vaginal CREA .....68	tiopronin TBEC 100 MG ..... 47	tramadol hcl TB24 .....6
terconazole vaginal SUPP .....68	tiopronin TBEC 300 MG ..... 47	tramadol-acetaminophen .....7
teriflunomide .....61	tiotropium bromide monohydrate CAPS .....9	trandolapril 1 MG, 2 MG ..... 20
teriparatide SOPN .....44	TIVICAY TABS .....31	trandolapril 4 MG ..... 20
testosterone cypionate SOLN IM ... 7	tizanidine hcl CAPS .....57	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG ..... 21
testosterone enanthate SOLN IM ...7	tizanidine hcl TABS ..... 57	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG ..... 21
TETANUS/DIPHThERIA TOXOIDS- ADSORBED ADULT SUSP .....63	tobramycin (ophth) SOLN .....58	tranexamic acid SOLN 1000 MG/10ML ..... 49
tetrabenazine .....61	tobramycin NEBU ..... 2	tranexamic acid TABS .....49
tetracycline hcl CAPS .....62	tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML ...2	tranylcypromine sulfate .....13
THALOMID .....54	tobramycin-dexamethasone SUSP 58	travoprost SOLN .....59
theophylline ELIX ..... 10	TODAY SPONGE MISC .....68	TRAZIMERA ..... 24
theophylline SOLN ..... 10	tolcapone .....28	
theophylline TB12 .....10		
theophylline TB24 .....10		

trazodone hcl TABS .....	14	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG .....	43	tropicamide SOLN 0.5 % .....	57
TRECATOR .....	23	triamterene & hydrochlorothiazide TABS .....	43	tropicamide SOLN 1 % .....	58
TRELEGY ELLIPTA .....	10	triamterene CAPS .....	43	tropium chloride CP24 .....	64
TRELSTAR MIXJECT .....	25	triazolam .....	49	tropium chloride TABS .....	64
TREMFYA SOAJ .....	39	TRICARE TABS .....	56	TRUE COVER DEVI .....	51
TREMFYA SOSY 100 MG/ML .....	39	trientine hcl 250 MG .....	54	TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ..	42
treprostinil SOLN IJ .....	33	trifluoperazine hcl TABS .....	30	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN .....	52
tretinoin (chemotherapy) .....	27	trifluridine .....	58	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	42
tretinoin CREA 0.025 %, 0.05 %, 0.1 % .....	37	trihexyphenidyl hcl SOLN .....	28	TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML .....	16
tretinoin GEL 0.01 %, 0.025 % .....	37	trihexyphenidyl hcl TABS .....	28	TRUMENBA .....	64
tretinoin microsphere 0.1 % .....	37	TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG	15	TRUSTEX COLOR CONDOMS + LUBE MISC .....	51
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG .....	24	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG .....	15	TRUSTEX LUBRICATED EXTRALARGE MISC .....	51
triamcinolone acetonide (mouth) ..	55	TRIKAFTA TBPK .....	62	TRUSTEX LUBRICATED EXTRASTRENGTH MISC .....	51
triamcinolone acetonide (nasal) AERO .....	57	trimethobenzamide hcl CAPS .....	17	TRUSTEX LUBRICATED MISC ...	51
triamcinolone acetonide (topical) CREA 0.025 % .....	41	trimethoprim TABS .....	21	TRUSTEX LUBRICATED/RIBBED/STUDED MISC .....	51
triamcinolone acetonide (topical) CREA 0.1 % .....	41	trimipramine maleate CAPS .....	14	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC .....	51
triamcinolone acetonide (topical) CREA 0.5 % .....	41	TRINTELLIX .....	14	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide (topical) LOTN 0.025 % .....	41	TRIUMEQ TABS .....	31	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC .....	51
triamcinolone acetonide (topical) LOTN 0.1 % .....	41	TRIZIVIR .....	31	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 % .....	41	TROJAN MAGNUM MISC .....	51	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide (topical) OINT 0.5 % .....	41	TROJAN ULTRA THIN LUBRICATED MISC .....	51	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML .....	36	TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC .....	51	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
		TROJAN-ENZ LUBRICATED MISC 51		TRUSTEX LUBRICATED/SPERMICIDE MISC	51
		TROJAN-ENZ W/SPERMICIDAL MISC .....	51	TRUSTEX NATURAL CONDOMS	

+LUBE/LUBRICATED MISC .....	51	ursodiol TABS .....	46	venlafaxine hcl CP24 37.5 MG .....	14
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC .....	51	UVADEX .....	27	venlafaxine hcl CP24 75 MG .....	14
TRUSTEX/RIA LUBRICATED MISC .....	51	valacyclovir hcl 1 GM, 1000 MG .....	31	venlafaxine hcl TABS .....	14
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC .....	51	valacyclovir hcl 500 MG .....	31	venlafaxine hcl TB24 150 MG .....	14
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC .....	51	valganciclovir hcl TABS .....	31	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG .....	14
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC .....	51	valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML .....	13	verapamil hcl CP24 100 MG, 200 MG, 300 MG .....	33
TRUXIMA .....	24	valproic acid CAPS .....	13	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG .....	33
TUKYSA .....	24	valrubicin .....	26	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG .....	33
TURALIO .....	27	valsartan TABS .....	20	verapamil hcl SOLN 2.5 MG/ML .....	33
TUZISTRA XR .....	36	valsartan-hydrochlorothiazide .....	21	verapamil hcl TABS .....	33
TWINRIX SUSY .....	67	VALTOCO 10 MG DOSE LIQD .....	11	verapamil hcl TBCR .....	33
TWIRLA .....	35	VALTOCO 15 MG DOSE LQPK .....	11	VEREGEN .....	37
TYBLUME CHEW .....	35	VALTOCO 20 MG DOSE LQPK .....	11	VERZENIO .....	27
TYBOST .....	31	VALTOCO 5 MG DOSE LIQD .....	11	VICTOZA (liraglutide) .....	16
TYMLOS .....	44	vancomycin hcl CAPS .....	22	vigabatrin PACK .....	12
TYVASO REFILL KIT SOLN IN .....	33	vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG .....	22	vigabatrin TABS .....	12
TYVASO SOLN IN .....	33	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML .....	22	VIIBRYD STARTER PACK KIT .....	14
TYVASO STARTER KIT SOLN IN .....	33	VAQTA .....	67	vilazodone hcl TABS .....	14
UBRELVY .....	52	varenicline tartrate TABS .....	62	vincristine sulfate .....	28
UDENYCA ONBODY SOSY .....	48	varenicline tartrate TBPK .....	62	vinorelbine tartrate 10 MG/ML .....	28
UDENYCA SOAJ .....	48	VARIVAX SUSR IJ 1350 PFU/0.5ML .....	67	VIRACEPT TABS 250 MG .....	31
UDENYCA SOSY .....	49	VARUBI TBPK .....	17	VIRACEPT TABS 625 MG .....	31
UPTRAVI TABS 200 MCG .....	34	VAXNEUVANCE .....	64	VIREAD POWD .....	31
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG .....	34	VECAMYL .....	21	VIREAD TABS 150 MG, 200 MG, 250 MG .....	31
UPTRAVI TITRATION PACK TBPK .....	34	VECTIBIX 100 MG/5ML .....	24	VISTOGARD .....	17
ursodiol CAPS .....	46	VELPHORO .....	46	VITAMIN D2 TABS 400 UNIT .....	68
		venlafaxine hcl CP24 150 MG .....	14	VITATHELY/GINGER TABS .....	56
				VITRAKVI CAPS .....	27

VITRAKVI SOLN .....	27	XELJANZ TABS .....	3	YERVOY .....	24
VIZIMPRO .....	24	XELJANZ XR TB24 .....	3	YONSA .....	25
VORAXAZE .....	27	XEOMIN .....	57	YUFLYMA 1-PEN KIT AJKT .....	3
voriconazole TABS .....	18	XERAVA .....	62	YUFLYMA 2-PEN KIT AJKT .....	3
VOSEVI .....	31	XGEVA SOLN .....	44	YUFLYMA 2-SYRINGE KIT PSKT ..	3
VYNDAMAX .....	34	XHANCE EXHU .....	57	YUFLYMA CD/UC/HS STARTER	
VYNDAQEL .....	34	XIFAXAN .....	21	AJKT .....	3
warfarin sodium TABS .....	10	XIGDUO XR (dapagliflozin		zafirlukast .....	9
water for irrigation, sterile .....	55	propanediol-metformin hcl) .....	15	zaleplon 10 MG .....	49
WESTAB PLUS TABS .....	56	XIGDUO XR 1000 MG-10 MG, 500		zaleplon 5 MG .....	49
WIDE-SEAL SILICONE		MG-10 MG, 500 MG-5 MG .....	15	ZALTRAP 100 MG/4ML .....	24
DIAPHRAGM KIT 60 .....	51	XIGDUO XR 1000 MG-2.5 MG, 1000		ZANOSAR .....	23
WIDE-SEAL SILICONE		MG-5 MG .....	15	ZARONTIN CAPS (ethosuximide) .	13
DIAPHRAGM KIT 65 .....	51	XOLAIR SOAJ 150 MG/ML, 300		ZARXIO .....	49
WIDE-SEAL SILICONE		MG/2ML .....	8	ZEJULA CAPS .....	27
DIAPHRAGM KIT 70 .....	51	XOLAIR SOAJ 75 MG/0.5ML .....	9	ZEJULA TABS 100 MG .....	27
WIDE-SEAL SILICONE		XOLAIR SOLR .....	9	ZEJULA TABS 200 MG, 300 MG ..	27
DIAPHRAGM KIT 75 .....	51	XOLAIR SOSY 150 MG/ML, 300		ZELBORAF .....	27
WIDE-SEAL SILICONE		MG/2ML .....	9	ZENPEP CPEP 105000 UNIT-79000	
DIAPHRAGM KIT 80 .....	51	XOLAIR SOSY 75 MG/0.5ML .....	9	UNIT-25000 UNIT, 14000 UNIT-	
WIDE-SEAL SILICONE		XOSPATA .....	27	10000 UNIT-3000 UNIT, 168000	
DIAPHRAGM KIT 85 .....	51	XPOVIO .....	25	UNIT-126000 UNIT-40000 UNIT,	
WIDE-SEAL SILICONE		XPOVIO 60 MG TWICE WEEKLY		24000 UNIT-17000 UNIT-5000 UNIT,	
DIAPHRAGM KIT 90 .....	52	25		42000 UNIT-32000 UNIT-10000	
WIDE-SEAL SILICONE		XPOVIO 80 MG TWICE WEEKLY		UNIT, 63000 UNIT-47000 UNIT-	
DIAPHRAGM KIT 95 .....	52	25		15000 UNIT, 84000 UNIT-63000	
XALKORI CAPS .....	27	XTANDI CAPS .....	25	UNIT-20000 UNIT .....	43
XARELTO STARTER PACK TBPK		XTANDI TABS 40 MG .....	25	ZENPEP CPEP 252600 UNIT-	
10		XTANDI TABS 80 MG .....	25	189600 UNIT-60000 UNIT .....	43
XARELTO SUSR .....	10	XULTOPHY 100/3.6 .....	15	zidovudine CAPS .....	31
XARELTO TABS 10 MG, 20 MG ..	10	XYNTHA .....	47	zidovudine SYRP .....	31
XARELTO TABS 2.5 MG, 15 MG ..	10	XYNTHA SOLOFUSE .....	47	zidovudine TABS .....	31
XELJANZ SOLN .....	3			zileuton TB12 .....	9

ziprasidone hcl .....	29
ZIRABEV .....	24
ZIRGAN GEL .....	58
ZOLADEX 10.8 MG .....	25
ZOLADEX 3.6 MG .....	25
zoledronic acid CONC .....	44
zoledronic acid SOLN .....	44
ZOLINZA .....	27
zolmitriptan SOLN .....	53
zolmitriptan TABS .....	53
zolmitriptan TBDP .....	53
zolpidem tartrate TABS .....	49
zolpidem tartrate TBCR .....	49
zonisamide CAPS .....	12
ZONTIVITY .....	48
ZORBITIVE SC .....	44
ZYDELIG .....	27
ZYLET .....	58
ZYRTEC ALLERGY TABS (cetirizine hcl) .....	18

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