



2024 Formulary

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Ambetter.mhsindiana.com

Formulary Introduction

FORMULARY

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

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

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

Drug List Key:

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

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

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

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

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

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

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

Tier 4 - Highest copayment is for “specialty” drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management.

Prior Authorization for Non-Formulary Drugs

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

Formulary Abbreviations:

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

Opioid Medications:

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

Introducción al Formulario

FORMULARIO

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

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

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

Clave de la lista de medicamentos:

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

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

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

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

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

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

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

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

Autorización previa para medicamentos no incluidos en el Formulario

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

Abreviaturas del Formulario:

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

Medicamentos opioides:

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Stimulants - Misc.			<i>modafinil 200 MG</i>	1B	QL(2 ea daily); PA
<i>armodafinil</i>	1B	QL(1 ea daily); AL(At least 17 yrs old); PA	<i>modafinil 100 MG</i>	1B	QL(1 ea daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC					
Allergenic Extracts					
<i>GRASTEK SUBL</i>	3	PA	AMEBICIDES		
Amebicides			<i>SOLOSEC</i>	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections					
Aminoglycosides			<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
			<i>ARIKAYCE</i>	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>	1B	
			<i>gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML</i>	1B	
			<i>neomycin sulfate TABS</i>	1B	
			<i>streptomycin sulfate SOLR</i>	3	
			<i>tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML</i>	1B	
			<i>tobramycin NEBU</i>	4	QL(280 ml per 56 day(s) retail; 280 ml per 56 days mail); PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions					
Antirheumatic - Enzyme Inhibitors					
<i>RINVOQ TB24</i>			4	QL(1 ea daily); PA	
<i>XELJANZ XR TB24</i>			4	QL(1 ea daily); PA	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
XELJANZ SOLN	4	QL(20 ml daily); PA	HADLIMA SOSY	4	QL(0.086 ml daily); PA			
XELJANZ TABS 10 MG	4	QL(2 ea daily); PA	HADLIMA SOSY	4	QL(0.172 ml daily); PA			
XELJANZ TABS 5 MG	4	QL(2 ea daily); SP; PA	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
Antirheumatic Antimetabolites								
METHOTREXATE	4	QL(1.714 ea daily); SP; PA	HUMIRA PEN-CD/UC/HS STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
Anti-TNF-alpha - Monoclonal Antibodies								
ADALIMUMAB-ADAZ SOAJ	4	QL(0.086 ml daily); PA	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
ADALIMUMAB-ADAZ SOSY	4	QL(0.086 ml daily); PA	HUMIRA PEN PNKT	4	QL(0.143 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	HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily); PA			
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA	HUMIRA PEN-PS/UV STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA			
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA PSKT	4	QL(0.143 ea daily); PA			
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	SIMPONI ARIA SOLN	4	PA			
CYLTEZO AJKT	4	QL(0.029 ea daily); PA	Gold Compounds					
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	RIDAURA	3	QL(3 ea daily)			
CYLTEZO PSKT 10 MG/0.2ML	4	QL(0.072 ea daily); PA	Interleukin-1 Blockers					
CYLTEZO PSKT 40 MG/0.4ML	4	QL(0.029 ea daily); PA	ARCALYST	4	QL(0.286 ea daily); SP; PA			
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	Interleukin-6 Receptor Inhibitors					
HADLIMA PUSHTOUCH SOAJ	4	QL(0.086 ml daily); PA	KEVZARA SOAJ	4	QL(0.082 ml daily); PA			
HADLIMA PUSHTOUCH SOAJ	4	QL(0.172 ml daily); PA	KEVZARA SOSY	4	QL(0.082 ml daily); PA			
Nonsteroidal Anti-inflammatory Agents (NSAIDs)								

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
celecoxib	1B	QL(2 ea daily)	<i>tolmetin sodium TABS 600 MG</i>	1B	
<i>diclofenac potassium TABS 50 MG</i>	1B		Phosphodiesterase 4 (PDE4) Inhibitors		
<i>diclofenac sodium TB24</i>	1B		OTEZLA TABS	4	QL(2 ea daily); PA
<i>diclofenac sodium TBEC</i>	1B		OTEZLA TBPK	4	1 package(s) per 180 day(s) retail; PA
<i>diclofenac w/ misoprostol TBEC</i>	1B		Pyrimidine Synthesis Inhibitors		
<i>etodolac CAPS</i>	1B		<i>leflunomide</i>	1B	QL(1 ea daily)
<i>etodolac TABS</i>	1B		Soluble Tumor Necrosis Factor Receptor Agents		
<i>fenoprofen calcium TABS</i>	1B	QL(1 ea daily); PA	ENBREL MINI SOCT	4	QL(0.146 ml daily); PA
<i>flurbiprofen TABS</i>	1B		ENBREL SURECLICK SOAJ	4	QL(0.146 ml daily); PA
<i>ibuprofen SUSP 100 MG/5ML</i>	1B	RX/OTC	ENBREL SOLN	4	QL(0.146 ml daily); PA
<i>ibuprofen TABS 800 MG</i>	1B		ENBREL SOLR	4	QL(0.286 ea daily); SP; PA
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A		ENBREL SOSY 50 MG/ML	4	QL(0.286 ml daily); SP; PA
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B		ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ml daily); PA
<i>indomethacin CPCR</i>	1B		ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>ketoprofen CAPS 50 MG</i>	1B		Analgesic Combinations		
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 ea daily)	<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>meclofenamate sodium CAPS</i>	1B		<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 ea daily); ST	<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>meloxicam TABS</i>	1A	QL(1 ea daily)	<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>nabumetone</i>	1B		<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)
<i>naproxen sodium TABS 550 MG</i>	1B		Salicylates		
<i>naproxen SUSP</i>	1B	PA			
<i>naproxen TABS</i>	1B				
<i>naproxen TBEC 500 MG</i>	1B	QL(3 ea daily)			
<i>oxaprozin TABS</i>	1B				
<i>piroxicam CAPS</i>	1B				
<i>sulindac TABS</i>	1B				
<i>tolmetin sodium CAPS</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
aspirin CHEW	0	AL(At least 45 yrs old - Up to 79 yrs old)	meperidine hcl SOLN OR 50 MG/5ML	1B	New starts limited to 7 day supply; QL(500 ml per fill retail)
aspirin TABS 325 MG	0	AL(At least 45 yrs old - Up to 79 yrs old)	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	1B	
aspirin TBEC 325 MG	1A		meperidine hcl TABS 50 MG	1B	New starts limited to 7 day supply; QL(6 ea daily)
aspirin TBEC 81 MG	0	AL(At least 45 yrs old - Up to 79 yrs old)	methadone hcl CONC	1B	QL(10 ml daily)
diflunisal TABS	1B		methadone hcl SOLN OR 5 MG/5ML	1B	QL(100 ml daily)
salsalate	1B		methadone hcl SOLN IJ 10 MG/ML	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			methadone hcl SOLN OR 10 MG/5ML	1B	QL(50 ml daily)
Opioid Agonists			METHADONE HCL SOLN IJ	1B	
codeine sulfate TABS 30 MG	1B	New starts limited to 7 day supply	methadone hcl TABS 5 MG	1B	QL(4 ea daily)
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	methadone hcl TABS 10 MG	1B	QL(10 ea daily)
fentanyl citrate LPOP	1B	QL(4 ea daily); PA	methadone hcl TBSO	1B	QL(2 ea daily)
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	1B	QL(0.34 ea daily)	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	1B	QL(2 ea daily); PA
hydromorphone hcl LIQD	1B	New starts limited to 7 day supply	morphine sulfate SOLN OR 10 MG/5ML	1B	New starts limited to 7 day supply; QL(100 ml daily)
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML	1B		morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	1B	
hydromorphone hcl TABS	1B	New starts limited to 7 day supply; QL(8 ea daily)	morphine sulfate SOLN OR 20 MG/5ML	1B	New starts limited to 7 day supply; QL(50 ml daily)
hydromorphone hcl TB24 32 MG	1B	QL(1 ea daily); PA	morphine sulfate TABS	1B	New starts limited to 7 day supply; QL(6 ea daily)
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	1B	QL(2 ea daily); PA	morphine sulfate TBCR	1B	QL(2 ea daily)
levorphanol tartrate TABS 2 MG	1B	New starts limited to 7 day supply	NUCYNTA ER TB12	2	QL(2 ea daily); PA

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)	<i>testosterone enanthate SOLN IM</i>	1B	
Opioid Partial Agonists					
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 ea daily)	Intrarectal Steroids		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 ea daily)	<i>budesonide (intrarectal)</i>	4	PA
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 ea daily)	<i>hydrocortisone (intrarectal)</i>	1B	
<i>buprenorphine hcl SOLN</i>	1B		<i>UCERIS (budesonide (intrarectal))</i>	4	PA
<i>buprenorphine hcl SUBL</i>	1B	QL(3 ea daily)	Rectal Steroids		
<i>buprenorphine PTWK</i>	1B	QL(0.143 ea daily); PA	<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC
<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA	<i>hydrocortisone acetate (rectal)</i>	1B	
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B		Vasodilating Agents		
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)	<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply	<i>RECTIV (nitroglycerin (intra-anal))</i>	3	QL(2 gm daily)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones					
Anabolic Steroids					
<i>oxandrolone</i>	1B		Anthelmintics		
Androgens			<i>albendazole</i>	1B	PA
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 ea daily); PA	<i>EMVERM CHEW</i>	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>danazol CAPS</i>	1B		<i>ivermectin</i>	1B	QL(9 ea per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>METHITEST TABS</i>	3		<i>praziquantel</i>	1B	PA
<i>testosterone cypionate SOLN IM</i>	1B		ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
<i>TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NUCALA SOAJ	4	QL(0.1073 ml daily); PA	<i>zileuton TB12</i>	1B	QL(4 ea daily)
NUCALA SOLR	4	QL(0.1073 ea daily); PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors		
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA	<i>roflumilast</i>	3	QL(1 ea daily)
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA	Steroid Inhalants		
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA
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>	1B	QL(4 ml daily); PA
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA	<i>fluticasone propionate (inhalation) AEPB</i>	1B	
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>fluticasone propionate hfa</i>	1B	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>	1B	QL(8 ml daily)	QVAR REDIHALER	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>	1B	
INCRUSE ELLIPTA	2	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	1B	
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)	<i>albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML</i>	1B	QL(15 ml daily)
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	2	QL(1 ea daily)	<i>albuterol sulfate SYRP</i>	1B	
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)	<i>albuterol sulfate TABS</i>	1B	
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)	ANORO ELLIPTA	2	QL(2 ea daily)
Leukotriene Modulators			<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)			
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)			
<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)			
<i>zafirlukast</i>	1B	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREZTRI AEROSPHERE	2	QL(0.38 gm daily)	STRIVERDI RESPIMAT	2	
<i>budesonide-formoterol fumarate dihydrate</i>	1B	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	<i>terbutaline sulfate SOLN</i>	1B	
DULERA	2		<i>terbutaline sulfate TABS</i>	1B	
<i>fluticasone furoate-vilanterol</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	TRELEGY ELLIPTA	2	QL(2 ea daily)
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	Xanthines		
<i>fluticasone-salmeterol AERO</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>aminophylline SOLN</i>	1B	
<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)	<i>theophylline ELIX</i>	1B	
<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)	<i>theophylline SOLN</i>	1B	QL(56 ml daily)
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B		<i>theophylline TB12</i>	1B	
<i>levalbuterol hcl</i>	1B	QL(12 ml daily)	<i>theophylline TB24</i>	1B	
<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)	ANTICOAGULANTS - Blood Thinners		
			Coumarin Anticoagulants		
			<i>warfarin sodium TABS</i>	1B	
			Direct Factor Xa Inhibitors		
			ELIQUIS STARTER PACK TBPK	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail
			ELIQUIS TABS	2	QL(2 ea daily)
			XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail
			XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)
			XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
			XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
			Heparins And Heparinoid-Like Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
enoxaparin sodium SOLN IJ 300 MG/3ML	4	QL(6 ml daily)	Anticonvulsants - Benzodiazepines		
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	4	QL(2 ml daily)	clobazam SUSP	1B	QL(16 ml daily); PA
enoxaparin sodium SOSY 40 MG/0.4ML	4	QL(0.8 ml daily; 30 Day(s) limit); SP	clobazam TABS	1B	QL(2 ea daily); PA
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	4	QL(1.6 ml daily)	clonazepam TABS	1A	
enoxaparin sodium SOSY 30 MG/0.3ML	4	QL(0.6 ml daily); SP	clonazepam TBDP	1B	
enoxaparin sodium SOSY 60 MG/0.6ML	4	QL(1.2 ml daily; 30 Day(s) limit); SP	diazepam (anticonvulsant) GEL	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
fondaparinux sodium 10 MG/0.8ML	4	QL(7.2 ml per 180 day(s) retail; 7 ml per 180 days mail); SP	NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA
fondaparinux sodium 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML	4	SP	VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
FRAGMIN SOSY	4	SP; PA	VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	1B		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	1B		VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
Thrombin Inhibitors			Anticonvulsants - Misc.		
dabigatran etexilate mesylate CAPS	1B		APTIOM	3	QL(2 ea daily); ST
ANTICONVULSANTS - Drugs to Treat Seizures			BANZEL TABS 400 MG (rufinamide)	2	QL(8 ea daily); PA
AMPA Glutamate Receptor Antagonists			BANZEL TABS 200 MG (rufinamide)	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 6 MG	3	QL(2 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	carbamazepine CHEW	1B	
FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA	carbamazepine CP12 200 MG	1B	QL(6 ea daily)
			carbamazepine CP12 300 MG	1B	QL(4 ea daily)
			carbamazepine CP12 100 MG	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
<i>carbamazepine SUSP</i>	1B		<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA	
<i>carbamazepine TABS</i>	1B		<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA	
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 ea daily)	<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA	
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)	<i>primidone 50 MG, 250 MG</i>	1B		
<i>DIACOMIT CAPS 250 MG</i>	4	QL(12 ea daily); PA	<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA	
<i>DIACOMIT CAPS 500 MG</i>	4	QL(6 ea daily); PA	<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA	
<i>DIACOMIT PACK 500 MG</i>	4	QL(6 ea daily); PA	<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA	
<i>DIACOMIT PACK 250 MG</i>	4	QL(12 ea daily); PA	<i>TEGRETOL SUSP (carbamazepine)</i>	2		
<i>EPIDIOLEX</i>	3	PA	<i>TEGRETOL TABS (carbamazepine)</i>	2		
<i>gabapentin CAPS</i>	1B		<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)	
<i>gabapentin SOLN</i>	1B	QL(60 ml daily)	<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)	
<i>gabapentin TABS 600 MG, 800 MG</i>	1B		<i>topiramate CS24</i>	3	PA	
<i>lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	1B	QL(40 ml daily)	<i>topiramate TABS 100 MG, 200 MG</i>	1B	QL(2 ea daily)	
<i>lacosamide TABS</i>	1B	QL(2 ea daily)	<i>topiramate TABS 25 MG, 50 MG</i>	1B	QL(4 ea daily)	
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)	<i>zonisamide CAPS</i>	1B	QL(6 ea daily)	
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)	Carbamates			
<i>lamotrigine TABS</i>	1B		<i>felbamate SUSP</i>	1B	QL(30 ml daily)	
<i>lamotrigine TB24</i>	1B		<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)	
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)	<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)	
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)	GABA Modulators			
<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)	<i>tiagabine hcl</i>	1B		
<i>levetiracetam TABS 250 MG, 500 MG, 750 MG</i>	1B	QL(4 ea daily)	<i>vigabatrin PACK</i>	4	QL(6 ea daily); SP; PA	
<i>levetiracetam TB24</i>	1B	QL(4 ea daily)	<i>vigabatrin TABS</i>	4	QL(6 ea daily); SP; PA	
<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)	Hydantoins			
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)	<i>DILANTIN</i>	2		
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)	<i>DILANTIN (phenytoin sodium extended)</i>	2		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>paroxetine hcl TABS 10 MG, 20 MG, 40 MG</i>	1B	QL(1 ea daily)	<i>venlafaxine hcl TB24 150 MG</i>	1B	QL(2 ea daily)	
<i>paroxetine hcl TABS 30 MG</i>	1B	QL(2 ea daily)	<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)	
<i>paroxetine hcl TB24 12.5 MG</i>	1B	QL(1 ea daily)	Tricyclic Agents			
<i>paroxetine hcl TB24 25 MG, 37.5 MG</i>	1B	QL(2 ea daily)	<i>amitriptyline hcl TABS</i>	1B		
<i>sertraline hcl CONC</i>	1B	QL(10 ml daily)	<i>amoxapine</i>	1B		
<i>sertraline hcl TABS 100 MG</i>	1B	QL(2 ea daily)	<i>clomipramine hcl</i>	1B		
<i>sertraline hcl TABS 25 MG, 50 MG</i>	1B	QL(1.5 ea daily)	<i>desipramine hcl TABS</i>	1B		
Serotonin Modulators			<i>doxepin hcl CAPS</i>	1B		
<i>nefazodone hcl</i>	1B		<i>doxepin hcl CONC</i>	1B		
<i>trazodone hcl TABS</i>	1B		<i>imipramine hcl TABS</i>	1B		
<i>TRINTELLIX</i>	3	QL(1 ea daily); PA	<i>imipramine pamoate</i>	1B		
<i>VIIBRYD STARTER PACK KIT</i>	3	1 package(s) per 180 day(s) retail	<i>nortriptyline hcl CAPS</i>	1B		
<i>vilazodone hcl TABS</i>	1B	QL(1 ea daily)	<i>nortriptyline hcl SOLN</i>	1B		
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>protriptyline hcl</i>	1B		
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1B	QL(1 ea daily)	<i>trimipramine maleate CAPS</i>	1B		
<i>desvenlafaxine succinate 100 MG</i>	1B	QL(4 ea daily)	ANTIDIABETICS - Drugs to Regulate Blood Sugar			
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1B	QL(2 ea daily)	Alpha-Glucosidase Inhibitors			
<i>duloxetine hcl CPEP 40 MG</i>	1B		<i>acarbose</i>	1B	QL(3 ea daily)	
<i>FETZIMA TITRATION PACK C4PK</i>	3	PA	<i>miglitol</i>	1B	QL(3 ea daily)	
<i>FETZIMA CP24</i>	3	QL(1 ea daily); PA	Antidiabetic Combinations			
<i>venlafaxine hcl CP24 150 MG</i>	1B	QL(2 ea daily)	<i>alogliptin-metformin hcl</i>	1B	QL(2 ea daily); PA	
<i>venlafaxine hcl CP24 37.5 MG, 75 MG</i>	1B	QL(1 ea daily)	<i>alogliptin-pioglitazone 15 MG-12.5 MG, 30 MG-12.5 MG, 45 MG-12.5 MG</i>	1B	QL(2 ea daily); PA	
<i>venlafaxine hcl TABS</i>	1B	QL(3 ea daily)	<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 ea daily); PA	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	1B	QL(2 ea daily)	XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
glyburide-metformin 250 MG-1.25 MG	1B	QL(2 ea daily)	Biguanides		
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	1B	QL(4 ea daily)	metformin hcl TABS 850 MG	0	QL(3 ea daily)
GLYXAMBI	2	QL(1 ea daily)	metformin hcl TABS 500 MG	1B	QL(5 ea daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)	metformin hcl TABS 1000 MG	1B	QL(2.5 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)	metformin hcl TB24 750 MG	1B	QL(3 ea daily)
JANUMET TABS	2	QL(2 ea daily)	metformin hcl TB24 500 MG	1B	QL(4 ea daily)
pioglitazone hcl-glimepiride	1B	QL(1 ea daily)	Diabetic Other		
pioglitazone hcl-metformin hcl TABS	1B	QL(2 ea daily)	diazoxide	3	
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	1B	QL(1 ea daily)	glucagon (rdna)	1B	QL(0.035 ea daily)
saxagliptin-metformin hcl 1000 MG-2.5 MG	1B	QL(2 ea daily)	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
SOLIQUA 100/33	2	QL(0.5 ml daily); PA	alogliptin benzoate	1B	QL(1 ea daily)
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)	JANUVIA	2	QL(1 ea daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily)	saxagliptin hcl	1B	QL(1 ea daily)
SYNJARDY TABS	2	QL(2 ea daily)	Incretin Mimetic Agents		
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)	OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily); PA
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)	OZEMPIC SOPN	2	QL(0.108 ml daily); PA
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)	RYBELSUS TABS	2	QL(1 ea daily); PA
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)	TRULICITY	2	QL(0.143 ml daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ml daily)	<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ml daily)	<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors					
INSULIN ASPART FLEXPEN SOPN	1B		<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
INSULIN ASPART PENFILL SOCT	1B		FARXIGA	2	QL(1 ea daily)
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1B		FARXIGA	2	QL(1 ea daily)
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1B		JARDIANCE	2	QL(1 ea daily)
INSULIN ASPART SOLN IJ	1B		Sulfonylureas		
INSULIN DEGLUDEC FLEXTOUCH SOPN	2		<i>glimepiride 4 MG</i>	1B	QL(2 ea daily)
INSULIN DEGLUDEC SOLN	2		<i>glimepiride 1 MG, 2 MG</i>	1B	QL(1 ea daily)
LEVEMIR FLEXPEN SOPN	3	PA	<i>glipizide TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)
LEVEMIR FLEXTOUCH SOPN	3	PA	<i>glipizide TB24</i>	1B	QL(2 ea daily)
LEVEMIR SOLN	3	PA	GLUCOTROL XL TB24 (<i>glipizide</i>)	3	QL(2 ea daily)
NOVOLIN 70/30 FLEXPEN SUPN	2		<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	QL(4 ea daily)
NOVOLIN 70/30 SUSP	2		<i>glyburide TABS</i>	1B	QL(4 ea daily)
NOVOLIN N FLEXPEN SUPN	2		GLYNASE (<i>glyburide micronized</i>)	3	QL(4 ea daily)
NOVOLIN N SUSP	2		ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
NOVOLIN R FLEXPEN SOPN IJ	2		Antiperistaltic Agents		
NOVOLIN R SOLN IJ	2		<i>diphenoxylate w/ atropine LIQD</i>	1B	
Insulin Sensitizing Agents			<i>diphenoxylate w/ atropine TABS</i>	1B	
ACTOS (<i>pioglitazone hcl</i>)	3	QL(1 ea daily)	<i>loperamide hcl CAPS</i>	1B	RX/OTC
<i>pioglitazone hcl</i>	1B	QL(1 ea daily)	MOTOFEN	3	
Meglitinide Analogues			ANTIDOTES AND SPECIFIC ANTAGONISTS		
<i>nateglinide</i>	1B	QL(3 ea daily)	Antidotes - Chelating Agents		
			CHEMET	3	
			<i>deferasirox PACK</i>	4	PA
			<i>deferasirox TABS</i>	4	SP; PA
			<i>deferasirox TBSO</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
deferiprone TABS 500 MG	1B		meclizine hcl TABS 25 MG	1B	RX/OTC
Antidotes and Specific Antagonists			meclizine hcl TABS 12.5 MG	1A	RX/OTC
VISTOGARD	4	PA	scopolamine	1B	QL(0.34 ea daily)
Opioid Antagonists			trimethobenzamide hcl CAPS	1B	
naloxone hcl LIQD	1B	QL(2 ea per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC	Antiemetics - Miscellaneous		
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	1B		AKYNZEO	3	PA
naltrexone hcl	1B		doxylamine-pyridoxine TBEC	1B	QL(4 ea daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
ANTIEMETICS - Drugs to Treat Nausea and Vomiting			dronabinol CAPS	1B	
5-HT3 Receptor Antagonists			Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA	aprepitant CAPS	1B	PA
granisetron hcl SOLN IV 1 MG/ML	1B		aprepitant CAPS 40 MG, 125 MG	1B	QL(0.067 ea daily); PA
granisetron hcl TABS	1B	QL(0.34 ea daily)	aprepitant CAPS 80 MG	1B	QL(0.134 ea daily); PA
ondansetron hcl SOLN OR 4 MG/5ML	1B	QL(3.34 ml daily)	aprepitant MISC	1B	PA
ondansetron hcl SOLN IJ 4 MG/2ML	1B		VARUBI TBPK	3	PA
ondansetron hcl SOSY	1B		ANTIFUNGALS - Drugs to Treat Fungal Infections		
ondansetron hcl TABS 4 MG	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)	Antifungal - Glucan Synthesis Inhibitors		
ondansetron hcl TABS 24 MG	1B	QL(0.143 ea daily)	caspofungin acetate	1B	
ondansetron hcl TABS 8 MG	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)	ERAXIS	3	
ondansetron TBDP 8 MG	1B		micafungin sodium	1B	PA
ondansetron TBDP 4 MG	1B	QL(1 ea daily)	Antifungals		
palonosetron hcl SOLN	1B		ABELCET	3	
Antiemetics - Anticholinergic			amphotericin b IV	3	
			amphotericin b liposome	3	
			flucytosine	1B	
			griseofulvin microsize SUSP	1B	AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
griseofulvin microsize TABS	1B		diphenhydramine hcl SOLN 50 MG/ML	1B	
griseofulvin ultramicrosize	1B		Antihistamines - Non-Sedating		
nystatin TABS	1B		cetirizine hcl TABS	1A	QL(1 ea daily)
terbinafine hcl TABS	1B	QL(1 ea daily)	desloratadine TABS	1B	QL(1 ea daily)
Imidazole-Related Antifungals			desloratadine TBDP 2.5 MG	1B	QL(1 ea daily)
CRESEMBA CAPS 186 MG	3	PA	levocetirizine dihydrochloride SOLN	1B	QL(10 ml daily); RX/OTC
fluconazole SUSR	1B		levocetirizine dihydrochloride TABS	1B	QL(1 ea daily); RX/OTC
fluconazole TABS	1B		loratadine CAPS	1B	
itraconazole CAPS	1B	QL(4 ea daily); PA	loratadine CHEW	1B	
itraconazole SOLN	1B	QL(20 ml daily); PA	loratadine SOLN	1B	
ketoconazole	1B		loratadine TABS	1A	
NOXAFIL SUSP (posaconazole)	3	QL(20 ml daily)	loratadine TBDP	1B	
posaconazole SUSP	1B	QL(20 ml daily)	QUZYTIR SOLN IV	3	QL(10 ml daily); PA
TOLSURA CAPS	4	PA	Antihistamines - Phenothiazines		
voriconazole TABS	1B	QL(4 ea daily)	promethazine hcl SOLN OR 6.25 MG/5ML	1B	
ANTIHISTAMINES - Drugs to Treat Allergies					
Antihistamines - Alkylamines			promethazine hcl SUPP 50 MG	1B	
dexchlorpheniramine maleate SOLN	1B		promethazine hcl SUPP 12.5 MG, 25 MG	1B	QL(6 ea daily)
Antihistamines - Ethanolamines			promethazine hcl TABS	1B	
carbinoxamine maleate SOLN	1B		Antihistamines - Piperidines		
carbinoxamine maleate TABS 4 MG	1B		ciproheptadine hcl SYRP	1B	
clemastine fumarate SYRP	1B		ciproheptadine hcl TABS	1B	
clemastine fumarate TABS 2.68 MG	1B		ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
diphenhydramine hcl CAPS 50 MG	1A		Antihyperlipidemics - Combinations		
diphenhydramine hcl ELIX 12.5 MG/5ML	1B		ezetimibe-simvastatin	1B	QL(1 ea daily)
diphenhydramine hcl LIQD 12.5 MG/5ML	1B		Antihyperlipidemics - Misc.		
			icosapent ethyl 1 GM	1B	QL(4 ea daily); PA
			omega-3-acid ethyl esters	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trandolapril 4 MG</i>	1B	QL(2 ea daily)	<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 ea daily)
Agents for Pheochromocytoma					
<i>phenoxybenzamine hcl</i>	3	PA	<i>candesartan cilexetil- hydrochlorothiazide</i>	1B	
Angiotensin II Receptor Antagonists					
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)
<i>EDARBI</i>	3	QL(1 ea daily); ST	<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>irbesartan</i>	1B	QL(1 ea daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>losartan potassium</i>	1B	QL(1 ea daily)	<i>irbesartan- hydrochlorothiazide</i>	1B	
<i>olmesartan medoxomil</i>	1B	QL(1 ea daily)	<i>lisinopril & hydrochlorothiazide</i>	1B	
<i>telmisartan</i>	1B	QL(1 ea daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	QL(2 ea daily)
<i>valsartan TABS</i>	1B	QL(1 ea daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	QL(1 ea daily)
Antidiuretic Antihypertensives					
<i>clonidine</i>	3	QL(0.15 ea daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)
<i>clonidine hcl TABS</i>	1B	QL(8 ea daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>doxazosin mesylate</i>	1B		<i>olmesartan medoxomil- amlodipine- hydrochlorothiazide</i>	1B	ST
<i>guanfacine hcl</i>	1B		<i>olmesartan medoxomil- hydrochlorothiazide</i>	1B	
<i>methyldopa TABS</i>	1B	QL(6 ea daily)	<i>quinapril- hydrochlorothiazide</i>	1B	QL(2 ea daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)	<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)
<i>terazosin hcl</i>	1B		<i>telmisartan- hydrochlorothiazide</i>	1B	QL(1 ea daily)
Antihypertensive Combinations					
<i>amlodipine besylate- benazepril hcl</i>	1B		<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>amlodipine besylate- olmesartan medoxomil</i>	1B	ST			
<i>amlodipine besylate- valsartan</i>	1B	QL(1 ea daily)			
<i>amlodipine-valsartan- hydrochlorothiazide</i>	3				
<i>atenolol & chlorthalidone</i>	1B				
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)			
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B				

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
CAYSTON	4	QL(3 ml daily); PA	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	
Oxazolidinones				Antimalarials		
<i>linezolid</i> SUSR	1B		<i>chloroquine phosphate</i> TABS 250 MG	1B	QL(3 ea daily)	
<i>linezolid</i> TABS	1B	QL(2 ea daily); PA	<i>chloroquine phosphate</i> TABS 500 MG	1B		
SIVEXTRO TABS	3	PA	<i>hydroxychloroquine sulfate</i> 200 MG	1B	QL(3 ea daily)	
ZYVOX SUSR (<i>linezolid</i>)	3		<i>hydroxychloroquine sulfate</i> 100 MG	1B	QL(4 ea daily)	
Polymyxins				<i>hydroxychloroquine sulfate</i> 400 MG	1B	QL(1 ea daily)
<i>polymyxin b sulfate</i> SOLR	1B		KRINTAFEL	3	QL(2 ea per 30 day(s) retail)	
Urinary Anti-infectives				<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>fosfomycin tromethamine</i>	1B		<i>primaquine phosphate</i> TABS	3		
<i>methenamine hippurate</i>	1B		<i>pyrimethamine</i>	1B	QL(3 ea daily); PA	
<i>nitrofurantoin</i>	1B		<i>quinine sulfate</i> CAPS 324 MG	1B	PA	
<i>nitrofurantoin</i> macrocrystal 50 MG, 100 MG	1B		ANTIMYASTHENIC/CHOLINERGIC AGENTS			
<i>nitrofurantoin monohyd macro</i>	1B		Antimyasthenic/Cholinergic Agents			
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)				FIRDAPSE	4	PA
Antimalarial Combinations						
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>neostigmine methylsulfate SOSY</i>	3	PA	GLEOSTINE 40 MG, 100 MG	4	PA
<i>pyridostigmine bromide SOLN OR</i>	1B		GLEOSTINE 10 MG	4	SP; PA
<i>pyridostigmine bromide TABS 60 MG</i>	1B		<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA
<i>pyridostigmine bromide TBCR</i>	1B		<i>ifosfamide SOLR</i>	4	SP; PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)					
Antimycobacterial Agents					
<i>cycloserine</i>	1B	QL(4 ea daily)	<i>LEUKERAN</i>	4	SP; PA
<i>ethambutol hcl TABS</i>	1B		<i>melphalan</i>	1B	
<i>isoniazid SOLN</i>	1B		<i>melphalan hcl IV</i>	1B	
<i>isoniazid SYRP</i>	1B		MYLERAN TABS	4	SP; PA
<i>isoniazid TABS</i>	1B		<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA
PASER PACK	3	QL(3 ea daily)	TEMODAR SOLR	4	SP; PA
PRIFTIN	3		<i>temozolomide CAPS</i>	4	SP; PA
<i>pyrazinamide</i>	1B		<i>thiotepa 15 MG</i>	4	SP; PA
<i>rifabutin</i>	1B	PA	ZANOSAR	4	SP; PA
<i>rifampin CAPS</i>	1B		Antimetabolites		
<i>rifampin SOLR</i>	1B		<i>azacitidine SUSR</i>	4	SP; PA
SIRTURO	3	PA	<i>capecitabine</i>	4	SP; PA
TRECATOR	3	QL(4 ea daily)	<i>clofarabine</i>	4	SP; PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>cytarabine SOLN</i>	4	SP; PA
Alkylating Agents			<i>decitabine</i>	4	SP; PA
<i>bendamustine hcl SOLR</i>	4	SP; PA	<i>floxuridine</i>	4	SP; PA
<i>busulfan SOLN</i>	4	SP; PA	<i>fludarabine phosphate SOLN</i>	4	SP; PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA	<i>fludarabine phosphate SOLR</i>	4	SP; PA
<i>carmustine</i>	4	SP; PA	<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA	<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1B	PA	<i>mercaptopurine TABS</i>	1B	
<i>cyclophosphamide SOLR IJ</i>	4	SP; PA	<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
			<i>methotrexate sodium SOLR</i>	1B	SP
			<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
			<i>nelarabine</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
pemetrexed disodium <i>SOLR 500 MG</i>	4	SP; PA	TUKYSA	4	PA	
pralatrexate 20 MG/ML	4	SP; PA	Antineoplastic - EGFR Inhibitors			
TABLOID	4	SP; PA	ERBITUX	4	SP; PA	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA	erlotinib hcl	4	QL(1 ea daily); SP; PA	
Antineoplastic - Angiogenesis Inhibitors						
INLYTA	4	QL(2 ea daily); SP; PA	gefitinib	4	QL(2 ea daily); PA	
LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA	GILOTRIF	4	QL(1 ea daily); PA	
LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA	IRESSA (gefitinib)	4	QL(2 ea daily); PA	
LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA	TAGRISSO 40 MG	4	QL(2 ea daily); PA	
LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA	TAGRISSO 80 MG	4	QL(1 ea daily); PA	
LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA	VECTIBIX 100 MG/5ML	4	SP; PA	
LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA	VIZIMPRO	4	QL(1 ea daily); PA	
LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA	Antineoplastic - Hedgehog Pathway Inhibitors			
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA	DAURISMO	4	PA	
MVASI	4	PA	ERIVEDGE	4	QL(1 ea daily); SP; PA	
ZALTRAP 100 MG/4ML	4	SP; PA	ODOMZO	4	QL(1 ea daily); PA	
ZIRABEV	4	PA	Antineoplastic - Hormonal and Related Agents			
Antineoplastic - Antibodies						
ADCETRIS	4	SP; PA	abiraterone acetate 500 MG	4	QL(2 ea daily); PA	
ARZERRA	4	SP; PA	abiraterone acetate 250 MG	4	QL(4 ea daily); SP; PA	
RUXIENCE	4	PA	anastrozole	1B	QL(1 ea daily)	
TRUXIMA	4	PA	bicalutamide	1B	QL(1 ea daily); SP	
YEROVY	4	SP; PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA	
Antineoplastic - Anti-HER2 Agents						
KANJINTI	4	PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA	
OGIVRI	4	PA	EMCYT	4	SP; PA	
PERJETA	4	SP; PA	ERLEADA 60 MG	4	QL(4 ea daily); PA	
TRAZIMERA	4	PA	ERLEADA 240 MG	4	QL(1 ea daily); PA	
			exemestane	4	QL(1 ea daily); SP	

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BORTEZOMIB SOLR IV 3.5 MG	4	SP; PA	KYPROLIS	4	PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	LORBRENA	4	QL(1 ea daily); PA
BRAFTOVI 75 MG	4	SP; PA	LYNPARZA TABS	4	QL(4 ea daily); PA
BRUKINSA	4	PA	MEKINIST TABS	4	PA
CABOMETYX TABS	4	QL(1 ea daily); PA	MEKTOVI	4	SP; PA
CALQUENCE	4	QL(2 ea daily); PA	NINLARO	4	QL(0.143 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
CAPRELSA	4	QL(1 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	PIQRAY 200MG DAILY DOSE	4	PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	PIQRAY 250MG DAILY DOSE	4	PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	PIQRAY 300MG DAILY DOSE	4	PA
COPIKTRA	4	PA	QINLOCK	4	PA
everolimus TABS	4	QL(1 ea daily); SP; PA	RETEVMO	4	PA
IBRANCE CAPS	4	QL(1 ea daily); PA	<i>romidepsin SOLR</i>	4	SP; PA
IBRANCE TABS	4	QL(1 ea daily); PA	ROZLYTREK CAPS	4	PA
ICLUSIG	4	QL(1 ea daily); PA	RUBRACA	4	QL(4 ea daily); PA
<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA	SCEMBLIX 40 MG	4	QL(10 ea daily); PA
IMBRUWICA CAPS 70 MG	4	QL(1 ea daily); PA	SCEMBLIX 20 MG	4	QL(2 ea daily); PA
IMBRUWICA CAPS 140 MG	4	QL(3 ea daily); PA	<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA
IMBRUWICA SUSP	4	QL(8 ml daily); PA	SPRYCEL	4	QL(1 ea daily); SP; PA
IMBRUWICA TABS	4	QL(1 ea daily); PA	STIVARGA	4	QL(4 ea daily); SP; PA
INREBIC	4	PA	<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA
JAKAFI	4	QL(2 ea daily); SP; PA	<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA
KISQALI	4	PA	TABRECTA	4	PA
KOSELUGO	4	PA	TAFINLAR CAPS	4	PA
			TALZENNA	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA	SYNRIBO	4	SP; PA
TASIGNA 50 MG	4	QL(4 ea daily); PA	<i>tretinooin (chemotherapy)</i>	1B	
TAZVERIK	4	PA	UVADEX	4	SP; PA
<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA	Chemotherapy Adjuncts		
TIBSOVO	4	PA	KEPIVANCE 6.25 MG	4	SP; PA
TURALIO	4	PA	Chemotherapy Rescue/Antidote/Protective Agents		
VERZENIO	4	PA	<i>leucovorin calcium SOLR</i>	1B	
VITRAKVI CAPS	4	PA	<i>leucovorin calcium TABS</i>	1B	
VITRAKVI SOLN	4	PA	VORAXAZE	4	SP; PA
VOTRIENT (pazopanib hcl)	4	QL(4 ea daily); SP; PA	Mitotic Inhibitors		
XALKORI CAPS	4	QL(2 ea daily); SP; PA	<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
XOSPATA	4	PA	<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA
ZEJULA CAPS	4	QL(3 ea daily); PA	<i>eribulin mesylate</i>	4	SP; PA
ZELBORAF	4	SP; PA	ETOPOPHOS	4	SP; PA
ZOLINZA	4	QL(4 ea daily); SP; PA	<i>etoposide CAPS</i>	4	SP; PA
ZYDELIG	4	QL(2 ea daily); PA	<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA
Antineoplastic Enzymes			HALAVEN (eribulin mesylate)	4	SP; PA
ONCASPAR	4	SP; PA	IXEMPRA KIT 15 MG	4	SP; PA
Antineoplastics Misc.			JEVTANA	4	SP; PA
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA	<i>paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA	<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA	<i>vincristine sulfate</i>	4	SP; PA
<i>dacarbazine SOLR 200 MG</i>	4	SP; PA	<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
<i>hydroxyurea</i>	1B		Topoisomerase I Inhibitors		
INTRON A SOLR 18000000 UNIT	4	SP; PA	HYCAMTIN CAPS	4	SP; PA
MATULANE	4	SP; PA	<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
NIPENT	4	SP; PA	<i>topotecan hcl SOLR</i>	4	SP; PA
PHOTOFRIN	4	SP; PA	ANTIPARKINSON AND RELATED THERAPY		
PROLEUKIN	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AGENTS - Drugs to Treat Parkinson's Disease					
Antiparkinson Adjunctive Therapy					
<i>carbidopa</i>	1B		<i>ropinirole hydrochloride TABS</i>	1B	
Antiparkinson Anticholinergics					
<i>benztropine mesylate SOLN</i>	1B		<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
<i>benztropine mesylate TABS</i>	1B		<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
Antiparkinson COMT Inhibitors					
<i>entacapone</i>	1B	QL(8 ea daily)	Antiparkinson Monoamine Oxidase Inhibitors		
TASMAR (<i>tolcapone</i>)	3		<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA
<i>tolcapone</i>	3		<i>selegiline hcl CAPS</i>	1B	
Antiparkinson Dopaminergics			<i>selegiline hcl TABS</i>	1B	
<i>amantadine hcl CAPS</i>	1B		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
<i>amantadine hcl SOLN</i>	1B		Antimanic Agents		
<i>amantadine hcl TABS</i>	1B		<i>lithium</i>	1B	
<i>apomorphine hydrochloride SOCT</i>	4	PA	<i>lithium carbonate CAPS</i>	1B	
<i>bromocriptine mesylate CAPS</i>	1B		<i>lithium carbonate TABS</i>	1B	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B		<i>lithium carbonate TBCR</i>	1B	
<i>carbidopa-levodopa-entacapone</i>	1B		Antipsychotics - Misc.		
<i>carbidopa-levodopa TABS</i>	1B		<i>EQUETRO 300 MG</i>	3	QL(4 ea daily)
<i>carbidopa-levodopa TBCR</i>	1B		<i>EQUETRO 100 MG</i>	3	QL(2 ea daily)
<i>carbidopa-levodopa TBDP</i>	1B		<i>EQUETRO 200 MG</i>	3	QL(8 ea daily)
NEUPRO	2		<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)	<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B		<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	2	QL(0.072 ea daily); PA	<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA	<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
<i>risperidone SOLN</i>	1B	QL(8 ml daily)	Phenothiazines		
<i>risperidone TABS 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG</i>	1B	QL(2 ea daily)	<i>chlorpromazine hcl SOLN</i>	3	
<i>risperidone TABS 4 MG</i>	1B	QL(4 ea daily)	<i>chlorpromazine hcl TABS</i>	1B	
<i>risperidone TBDP</i>	1B	QL(4 ea daily)	<i>fluphenazine hcl CONC</i>	1B	
Butyrophenones			<i>fluphenazine hcl ELIX</i>	1B	
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)	<i>fluphenazine hcl SOLN</i>	1B	
<i>haloperidol lactate CONC</i>	1B		<i>fluphenazine hcl TABS</i>	1B	
<i>haloperidol lactate SOLN</i>	1B		<i>perphenazine TABS</i>	1B	
<i>haloperidol TABS</i>	1B		<i>prochlorperazine</i>	1B	
Dibenzapines			<i>prochlorperazine maleate TABS</i>	1B	
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA	<i>thioridazine hcl</i>	1B	
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA	<i>trifluoperazine hcl TABS</i>	1B	
<i>clozapine TABS</i>	1B		Quinolinone Derivatives		
<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)	<i>ariPIPrazole SOLN OR</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)	<i>ariPIPrazole TABS</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)	<i>REXULTI</i>	3	PA
<i>loxapine succinate</i>	1B		Thioxanthenes		
<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)	<i>thiothixene</i>	1B	
<i>olanzapine TABS 15 MG, 20 MG</i>	1B	QL(2 ea daily)	ANTIVIRALS - Drugs to Treat Viral Infections		
<i>olanzapine TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG</i>	1B	QL(1 ea daily)	Antiretrovirals		
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)	<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)	<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)	<i>abacavir sulfate TABS</i>	1B	QL(2 ea daily)
			<i>APTIVUS CAPS</i>	3	QL(4 ea daily)
			<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)
			<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BIKTARVY	3	QL(1 ea daily)	<i>lamivudine TABS 150 MG</i>	1B	QL(2 ea daily)
CIMDUO	3	QL(1 ea daily); ST	<i>lamivudine TABS 300 MG</i>	1B	QL(1 ea daily)
COMPLERA	3	QL(1 ea daily)	<i>lamivudine-zidovudine</i>	1B	QL(2 ea daily)
<i>darunavir TABS 600 MG</i>	3	QL(2 ea daily)	LEXIVA SUSP	3	QL(56 ml daily)
<i>darunavir TABS 800 MG</i>	3	QL(1 ea daily)	<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ml daily)
DELSTRIGO	3	QL(1 ea daily)	<i>lopinavir-ritonavir TABS</i>	1B	QL(4 ea daily)
DOVATO	3	QL(1 ea daily)	<i>maraviroc TABS 300 MG</i>	1B	QL(4 ea daily)
EDURANT	3	QL(1 ea daily)	<i>maraviroc TABS 150 MG</i>	1B	QL(2 ea daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)	<i>nevirapine SUSP</i>	1B	QL(40 ml daily)
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 ea daily)	<i>nevirapine TABS</i>	1B	QL(2 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)	<i>nevirapine TB24 100 MG</i>	1B	QL(3 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)	<i>nevirapine TB24 400 MG</i>	1B	QL(1 ea daily)
<i>efavirenz TABS</i>	1B	QL(1 ea daily)	NORVIR CAPS	2	QL(12 ea daily)
<i>emtricitabine CAPS</i>	1B	QL(1 ea daily)	NORVIR PACK	3	QL(12 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)	NORVIR SOLN	3	QL(15 ml daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)	ODEFSEY	3	QL(1 ea daily)
EMTRIVA SOLN	3	QL(24 ml daily)	PIFELTRO	3	QL(1 ea daily)
<i>etravirine 200 MG</i>	1B	QL(2 ea daily)	PREZCOBIX	3	QL(1 ea daily)
<i>etravirine 100 MG</i>	1B	QL(4 ea daily)	PREZISTA SUSP	3	QL(12 ml daily)
EVOTAZ	3	QL(1 ea daily)	PREZISTA TABS (darunavir)	3	QL(2 ea daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)	PREZISTA TABS 800 MG (darunavir)	3	QL(1 ea daily)
FUZEON SOLR	4	SP; PA	PREZISTA TABS 75 MG, 150 MG, 600 MG	3	QL(2 ea daily)
GENVOYA	3	QL(1 ea daily)	RETROVIR IV INFUSION SOLN	3	
INTELENCE 25 MG	3	QL(8 ea daily)	<i>ritonavir TABS</i>	1B	QL(12 ea daily)
ISENTRESS HD TABS	3	QL(2 ea daily)	RUKOBIA	4	PA
ISENTRESS CHEW	3	QL(6 ea daily)	SELZENTRY SOLN	3	QL(30 ml daily)
ISENTRESS TABS	3	QL(2 ea daily)	SELZENTRY TABS 25 MG, 75 MG	3	QL(2 ea daily)
JULUCA	3	QL(1 ea daily)	<i>stavudine CAPS</i>	1B	QL(2 ea daily)
<i>lamivudine SOLN</i>	1B	QL(30 ml daily)	STRIBILD	3	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRIZIVIR	3	QL(2 ea daily)	<i>acyclovir CAPS</i>	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)
TYBOST	3	QL(1 ea daily)	<i>acyclovir SUSP</i>	1B	QL(13.34 ml daily)
VIRACEPT TABS 625 MG	3	QL(4 ea daily)	<i>acyclovir TABS OR</i>	1B	QL(5 ea daily)
VIRACEPT TABS 250 MG	3	QL(10 ea daily)	<i>famciclovir 500 MG</i>	1B	QL(4 ea daily)
VIREAD POWD	3	QL(7.5 gm daily)	<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 ea daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 ea daily)	<i>valacyclovir hcl 500 MG</i>	1B	QL(2 ea daily)
<i>zidovudine CAPS</i>	1B	QL(6 ea daily)	<i>valacyclovir hcl 1 GM, 1000 MG</i>	1B	QL(4 ea daily)
<i>zidovudine SYRP</i>	1B	QL(60 ml daily)			
<i>zidovudine TABS</i>	1B	QL(2 ea daily)			
CMV Agents					
<i>cidofovir</i>	3		Influenza Agents		
<i>ganciclovir sodium SOLR</i>	1B		<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days. ; QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>valganciclovir hcl TABS</i>	1B	QL(4 ea daily); PA	<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(120 ml per fill retail); 1 max fill(s) per 90 day(s) retail
Hepatitis Agents					
<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP; PA	<i>RELENZA DISKHALER</i>	2	1 package(s) per 30 day(s) retail
BARACLUE SOLN	4	QL(20 ml daily); SP; PA	<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)
<i>entecavir TABS</i>	4	QL(1 ea daily); SP; PA	BETA BLOCKERS - Drugs to Treat High Blood Pressure		
EPIVIR HBV SOLN	4	QL(60 ml daily); SP; PA	Alpha-Beta Blockers		
<i>lamivudine (hbv) TABS</i>	1B	QL(3 ea daily); SP	<i>carvedilol</i>	1B	
LEDIPASVIR/SOFOSBUVIR TABS	4	QL(1 ea daily); PA	<i>carvedilol phosphate</i>	3	QL(1 ea daily)
PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA	<i>labetalol hcl SOLN</i>	1B	
PEGASYS SOSY	4	QL(0.072 ml daily); PA	<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 ea daily)
<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 ea daily)			
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1B	QL(7 ea daily)			
SOFOSBUVIR/VELPATA SVIR TABS	1B	QL(1 ea daily); PA			
ZEPATIER	4	QL(1 ea daily); PA			
Herpes Agents					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
labetalol hcl TABS 100 MG, 200 MG	1B		amlodipine besylate TABS	1B	
Beta Blockers Cardio-Selective					
acebutolol hcl CAPS	1B		diltiazem hcl coated beads CP24 180 MG, 240 MG	1B	QL(2 ea daily)
atenolol TABS	1B		diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	1B	
betaxolol hcl	1B		diltiazem hcl extended release beads	1B	
bisoprolol fumarate	1B		diltiazem hcl CP12	1B	QL(2 ea daily)
metoprolol succinate TB24 200 MG	1B	QL(2 ea daily)	diltiazem hcl CP24	1B	
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	1B		diltiazem hcl SOLN 50 MG/10ML	1B	
metoprolol tartrate SOLN IV 5 MG/5ML	1B		DILTIAZEM HCL SOLR	1B	
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	1B		diltiazem hcl TABS	1B	
nebivolol hcl 20 MG	3	QL(2 ea daily)	diltiazem hcl TB24	1B	
nebivolol hcl 2.5 MG, 5 MG, 10 MG	3	QL(1 ea daily)	felodipine	1B	
Beta Blockers Non-Selective			isradipine CAPS	1B	
HEMANGEOL SOLN OR	4	QL(75 ml daily); PA	nicardipine hcl CAPS	1B	
nadolol TABS 20 MG	1B	QL(3 ea daily)	nicardipine hcl SOLN	1B	
nadolol TABS 80 MG	1B		nifedipine CAPS 10 MG	1B	
nadolol TABS 40 MG	1B	QL(6 ea daily)	nifedipine CAPS 20 MG	1B	QL(9 ea daily)
pindolol TABS	1B		nifedipine TB24 90 MG	1B	QL(1 ea daily)
propranolol hcl CP24	1B	QL(2 ea daily)	nifedipine TB24	1B	
propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	1B		nifedipine TB24 60 MG	1B	QL(2 ea daily)
propranolol hcl TABS	1B		nimodipine CAPS	1B	
sotalol hcl (afib/afl)	1B		nisoldipine	1B	
sotalol hcl TABS 80 MG, 120 MG, 160 MG	1B	QL(2 ea daily)	verapamil hcl CP24 100 MG, 200 MG, 300 MG	1B	
sotalol hcl TABS 240 MG	1B		verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	1B	QL(1 ea daily)
timolol maleate TABS	1B		verapamil hcl SOLN 2.5 MG/ML	1B	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure					
Calcium Channel Blockers					
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm					
Cardiac Glycosides					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
digoxin SOLN OR 0.05 MG/ML	1B		bosentan TABS 62.5 MG	4	QL(2 ea daily); PA
digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG	1B		OPSUMIT	4	QL(1 ea daily); PA
LANOXIN SOLN IJ (digoxin)	2		TRACLEER TBSO	4	QL(2 ea daily); SP; PA
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	2		Pulmonary Hypertension - Phosphodiesterase Inhibitors		
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions			<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); SP; PA
Cardiovascular Agents Misc. - Combinations			<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ml daily); PA
<i>amlodipine besylate- atorvastatin calcium</i>	1B	QL(1 ea daily)	<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA
<i>isosorbide dinitrate- hydralazine hcl</i>	1B		<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA
Impotence Agents			Pulmonary Hypertension - Prostacyclin Receptor Agonist		
<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA	UPTRAVI TITRATION PACK TBPK	4	1 max fill(s) per 180 day(s) retail; PA
STENDRA	3	QL(0.134 ea daily)	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA	UPTRAVI TABS 200 MCG	4	PA
Prostaglandin Vasodilators			Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
<i>epoprostenol sodium</i>	4	PA	ADEMPAS	4	QL(3 ea daily); PA
ORENITRAM TBCR	4	PA	Sinus Node Inhibitors		
<i>treprostinil SOLN IJ</i>	4	SP; PA	CORLANOR SOLN	3	QL(15 ml daily); PA
TYVASO REFILL SOLN IN	4	PA	CORLANOR TABS	3	QL(2 ea daily); PA
TYVASO STARTER SOLN IN	4	PA	Transthyretin Stabilizers		
TYVASO SOLN IN	4	PA	VYNDAMAX	4	QL(1 ea daily); PA
Pulmonary Hypertension - Endothelin Receptor Antagonists					
<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA			
<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA			

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

Drug Name	Drug Tier	Requirements/Limits
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
<i>ceftriaxone sodium IJ 250 MG</i>	1A	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl SOLR IV 2 GM</i>	1B	
Cephalosporins - 5th Generation		
<i>TEFLARO</i>	3	
CHEMICALS		
Bulk Chemicals - C's		
<i>CLINDAMYCIN PHOSPHATE POWD</i>	1B	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>BALCOLTRA (levonorgestrel-ethynodiol-ethynodiol-iron)</i>	0	
<i>desogestrel & ethynodiol</i>	0	
<i>desogestrel-ethynodiol (biphasic)</i>	0	
<i>desogestrel-ethynodiol (triphasic)</i>	0	
<i>drospirenone-ethynodiol</i>	0	
<i>drospirenone-ethynodiol-levomefolate calcium</i>	0	
<i>ethynodiol diacet & ethynodiol</i>	0	
<i>levonorgestrel & ethynodiol TABS</i>	0	
<i>levonorgestrel-ethynodiol (triphasic)</i>	0	
<i>levonorgestrel-ethynodiol (91-day) 0.03 MG-0.15 MG</i>	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0				
<i>levonorgestrel-ethinyl estradiol-iron</i>	0		Emergency Contraceptives		
LO LOESTRIN FE TABS	0		ELLA	0	
NATAZIA	0		<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
NEXTSTELLIS	0				
<i>norethin acet & estrad-fe CAPS</i>	0		Progestin Contraceptives - Injectable		
<i>norethin acet & estrad-fe CHEW</i>	0		DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>norethindrone & eth estradiol</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>norethindrone & ethinyl estradiol-fe</i>	0				
<i>norethindrone acet & eth estra</i>	0		Progestin Contraceptives - Oral		
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0		<i>norethindrone (contraceptive)</i>	0	
<i>norethindrone-eth estradiol (triphasic)</i>	0		OPILL	0	
<i>norgestimate-ethinyl estradiol</i>	0		SLYND	0	QL(1 ea daily)
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0				
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0		CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
TYBLUME CHEW	0		Glucocorticosteroids		
Combination Contraceptives - Transdermal			<i>budesonide CPEP</i>	1B	QL(3 ea daily)
<i>norelgestromin-ethinyl estradiol</i>	0		<i>deflazacort SUSP</i>	4	PA
TWIRLA	0	QL(3 ea per 28 day(s) retail)	<i>deflazacort TABS</i>	4	PA
Combination Contraceptives - Vaginal			<i>DEPO-MEDROL SUSP</i>	3	
ANNOVERA	0	PA	<i>DEXAMETHASONE INTENSOL CONC</i>	1B	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)	<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
dexamethasone TABS 0.5 MG, 0.75 MG	1A		Antitussives		
EMFLAZA SUSP	4	PA	benzonatate 100 MG	1B	QL(6 ea daily)
EMFLAZA TABS (deflazacort)	4	PA	benzonatate 200 MG	1B	QL(3 ea daily)
hydrocortisone TABS	1B		benzonatate 150 MG	1B	QL(4 ea daily)
MEDROL TABS	3		Cough/Cold/Allergy Combinations		
methylprednisolone acetate SUSP	1B		hydrocodone polistirex-chlorpheniramine polistirex SUER	1B	
methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	1B		TUZISTRA XR	2	PA
methylprednisolone TABS	1B		Misc. Respiratory Inhalants		
methylprednisolone TBPK	1B		HYPERSAL NEBU	1B	
prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML	1B		NEBUSAL NEBU	1B	
prednisolone sodium phosphate TBDP	3		sodium chloride (inhalant) NEBU 7 %	1B	
prednisolone SOLN	1B		Mucolytics		
prednisolone TABS	1B		acetylcysteine SOLN	1B	
prednisone SOLN	1B		DERMATOLOGICALS - Drugs to Treat Skin Conditions		
prednisone TABS 1 MG, 5 MG	1B		Acne Products		
prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	1A		adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	1B	AL(At least 12 yrs old); ST
prednisone TBPK	1B		adapalene CREA	1B	AL(At least 12 yrs old); ST
SOLU-CORTEF 250 MG	3		adapalene GEL	1B	AL(At least 12 yrs old); ST; RX/OTC
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail	AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST
SOLU-MEDROL 2 GM	3		BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	1B		benzoyl peroxide-erythromycin GEL	1B	AL(At least 12 yrs old); PA
Mineralocorticoids			benzoyl peroxide FOAM 5.3 %, 9.8 %	1B	AL(At least 12 yrs old); RX/OTC
fludrocortisone acetate TABS	1B				
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
benzoyl peroxide GEL 10 %	1B	AL(At least 12 yrs old)	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	1B	AL(At least 12 yrs old)
benzoyl peroxide GEL 5 %	1B	QL(3 gm daily); AL(At least 12 yrs old)	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	1B	AL(At least 12 yrs old)
benzoyl peroxide LIQD 4 %, 7 %, 10 %	1B	AL(At least 12 yrs old)	tretinoin microsphere 0.1 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) FOAM	1B	AL(At least 12 yrs old); PA	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) GEL	1B	QL(8 gm daily)	tretinoin GEL 0.01 %, 0.025 %	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
clindamycin phosphate (topical) LOTN	1B	AL(At least 12 yrs old)	Agents for External Genital and Perianal Warts		
clindamycin phosphate (topical) SOLN	1B	QL(4 ml daily); AL(At least 12 yrs old)	VEREGEN	3	QL(1 gm daily)
clindamycin phosphate (topical) SWAB	1B	AL(At least 12 yrs old)	Antibiotics - Topical		
clindamycin phosphate-benzoyl peroxide (refrigerate)	1B	AL(At least 12 yrs old); PA	ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)
clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	1B	AL(At least 12 yrs old); PA	gentamicin sulfate (topical) CREA	1B	QL(1 gm daily)
clindamycin phosphate-tretinoin	1B	AL(At least 12 yrs old); ST	gentamicin sulfate (topical) OINT	1B	
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST	mupirocin OINT	1B	QL(6 gm daily)
erythromycin (acne aid) PADS	1B	AL(At least 12 yrs old)	NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA
erythromycin (acne aid) SOLN	1B	AL(At least 12 yrs old)	Antifungals - Topical		
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	3	AL(At least 12 yrs old); PA	butenafine hcl	1B	QL(6 gm daily); RX/OTC
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC	ciclopirox olamine CREA	1B	QL(90 gm per fill retail); 1 max fill(s) per 30 day(s) retail
sulfacetamide sodium (acne)	1B	AL(At least 12 yrs old)	ciclopirox olamine SUSP	1B	
sulfacetamide sodium w/ sulfur CREA 10 %-5 %	1B	AL(At least 12 yrs old); ST; PA	ciclopirox GEL	1B	QL(3.35 gm daily)
sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	1B	AL(At least 12 yrs old); ST	ciclopirox SHAM	1B	QL(10 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
ciclopirox SOLN	1B	QL(0.22 ml daily)	oxiconazole nitrate CREA	1B	Limit 1 Fill per 180 days; QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	
clotrimazole (topical) CREA	1B	QL(4.5 gm daily); RX/OTC	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	
clotrimazole (topical) SOLN	1B	QL(10 ml daily); RX/OTC	sulconazole nitrate CREA	1B		
clotrimazole w/ betamethasone CREA	1B	QL(8 gm daily)	sulconazole nitrate SOLN	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	
clotrimazole w/ betamethasone LOTN	1B		tavaborole	1B	PA	
econazole nitrate CREA	1B	QL(85 gm per fill retail; 85 per fill mail)	Anti-inflammatory Agents - Topical			
ERTACZO	3	QL(2.15 gm daily)	diclofenac epolamine PTCH EX	1B	QL(2 ea daily); PA	
ketoconazole (topical) CREA	1B	QL(10 gm daily)	diclofenac sodium (topical) GEL EX	1B	QL(3.34 gm daily); RX/OTC	
ketoconazole (topical) SHAM 2 %	1B	QL(20 ml daily)	Antineoplastic or Premalignant Lesion Agents - Topical			
luliconazole	1B	PA	bexarotene (topical)	4	SP; PA	
naftifine hcl CREA 1 %	1B	QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	diclofenac sodium (actinic keratoses) EX	1B	PA	
naftifine hcl CREA 2 %	1B	QL(2 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	fluorouracil (topical) CREA 5 %	1B	QL(4 gm daily)	
nystatin (topical) CREA	1B	QL(10 gm daily)	fluorouracil (topical) SOLN	1B	QL(2 ml daily)	
nystatin (topical) OINT	1B	QL(6 gm daily)	PANRETIN	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	
nystatin (topical) POWD EX	1B	QL(10 gm daily)	Antipruritics - Topical			
nystatin-triamcinolone CREA	1B	QL(10 gm daily)				
nystatin-triamcinolone OINT	1B	QL(4 gm daily)				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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	<i>tazarotene CREA</i>	1B	QL(1 gm daily)
			TREMFYA SOPN	4	QL(0.018 ml daily); PA
			TREMFYA SOSY	4	QL(0.018 ml daily); PA
Antiseborrheic Products					
<i>selenium sulfide LOTN 2.5 %</i>	1B		Antivirals - Topical		
			<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
			<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
			<i>penciclovir</i>	3	QL(0.18 gm daily)
Burn Products					
			<i>mafenide acetate PACK</i>	3	
			<i>silver sulfadiazine</i>	1B	QL(20 gm daily)
			SULFAMYLYON CREA	3	
Corticosteroids - Topical					
			<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)
			<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)
			<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
			<i>amcinonide LOTN</i>	3	
			<i>amcinonide OINT</i>	3	
			<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>betamethasone dipropionate (topical) LOTN</i>	1B		<i>CORDRAN TAPE</i>	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)	<i>desonide CREA</i>	1B	QL(4 gm daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)	<i>desonide LOTN</i>	1B	QL(4 ml daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)	<i>desonide OINT</i>	1B	QL(3 gm daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)	<i>desoximetasone GEL</i>	1B	QL(3 gm daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)	<i>diflorasone diacetate CREA</i>	1B	PA
<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)	<i>diflorasone diacetate OINT</i>	1B	PA
<i>calcipotriene- betamethasone dipropionate OINT</i>	1B	ST	<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
<i>calcipotriene- betamethasone dipropionate SUSP</i>	1B	ST	<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 gm daily)
<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA	<i>fluocinolone acetonide OIL</i>	1B	QL(8 ml daily)
<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA	<i>fluocinolone acetonide OINT</i>	1B	QL(4 gm daily)
<i>clobetasol propionate FOAM</i>	1B	PA	<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ml daily)
<i>clobetasol propionate GEL 0.05 %</i>	1B	PA	<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)
<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA	<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)
<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA	<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)
<i>clocortolone pivalate</i>	3	QL(3 gm daily)	<i>fluocinonide GEL</i>	1B	
			<i>fluocinonide OINT</i>	1B	QL(2 gm daily)
			<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)
			<i>flurandrenolide CREA</i>	2	
			<i>flurandrenolide LOTN</i>	2	
			<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 gm daily)
			<i>fluticasone propionate LOTN</i>	1B	QL(6 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>fluticasone propionate OINT</i>	1B	QL(4 gm daily)	<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)	
<i>halcinonide CREA</i>	1B	PA	<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)	
<i>halobetasol propionate CREA</i>	1B	QL(3.5 gm daily)	Eczema Agents			
<i>halobetasol propionate OINT</i>	1B	QL(3.5 gm daily)	DUPIXENT SOPN 300 MG/2ML	4	QL(0.29 ml daily); PA	
<i>HALOG OINT</i>	3	PA	DUPIXENT SOPN 200 MG/1.14ML	4	QL(0.082 ml daily); PA	
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC	DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA	
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B		DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC	DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA	
<i>hydrocortisone butyrate CREA</i>	1B	QL(3 gm daily)	Emollients			
<i>hydrocortisone butyrate OINT</i>	1B	QL(3 gm daily)	<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC	
<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ml daily)	<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC	
<i>hydrocortisone valerate CREA</i>	1B		Enzymes - Topical			
<i>hydrocortisone valerate OINT</i>	1B		SANTYL OINT	3	PA	
<i>mometasone furoate CREA</i>	1B	QL(3 gm daily)	Immunomodulating Agents - Topical			
<i>mometasone furoate OINT</i>	1B	QL(4 gm daily)	<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)	
<i>mometasone furoate SOLN</i>	1B	QL(5 ml daily)	Immunosuppressive Agents - Topical			
<i>prednicarbate OINT</i>	1B		<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA	
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)	<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA	
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)	Keratolytic/Antimitotic/Vesicant Agents			
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)	<i>podofilox SOLN</i>	1B		
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B		Local Anesthetics - Topical			
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)	<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)	
			<i>lidocaine hcl PRSY</i>	1B	QL(4 ml daily)	
			<i>lidocaine hcl SOLN</i>	1B	QL(10 ml daily)	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 gm 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	
<i>lidocaine PTCH 5 %</i>	1B	PA	Diagnostic Tests			
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	CHEMSTRIP-K STRP	1B		
Phosphodiesterase 4 (PDE4) Inhibitors - Topical						
EUCRISA	3	QL(2 gm daily); PA	FORA GTEL BLOOD KETONE TEST STRIPS	1B		
Rosacea Agents						
<i>azelaic acid GEL</i>	1B	QL(1.67 gm daily)	FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B		
<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA	GOJJI BLOOD KETONE TEST STRIPS	1B		
<i>metronidazole (topical) CREA</i>	1B	QL(3 gm daily)	KETONE TEST STRIPS STRP	1B		
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)	KETONE STRP	1B		
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)	KETOSTIX STRP	1B		
<i>metronidazole (topical) LOTN</i>	1B		NOVA MAX PLUS KETONE TESTSTRIPS	1B		
Scabicides & Pediculicides						
<i>crotamiton LOTN</i>	1B	PA	PRECISION XTRA	1B		
<i>ivermectin (pediculicide)</i>	1B	PA; RX/OTC	PTS PANELS KETONE TEST	1B		
<i>malathion</i>	1B		RELION KETONE TEST STRIPS STRP	1B		
<i>permethrin CREA</i>	1B		RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC	
<i>permethrin LIQD EX</i>	1B		TRUE METRIX BLOOD GLUCOSetest STRIPS STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC	
<i>spinosad</i>	1B	PA	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC	
Wound Care Products						
REGRANEX	3	QL(0.5 gm daily)	TRUETRACK TEST STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC	
DIAGNOSTIC PRODUCTS						
Diagnostic Drugs						
GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)	DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			
			Digestive Enzymes			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CREON CPEP	2	Non-FDA approved uses require Prior Authorization	<i>amiloride & hydrochlorothiazide</i>	1B	
PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	3	Non-FDA approved uses require Prior Authorization	<i>spironolactone & hydrochlorothiazide</i>	1B	
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	<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2		<i>triamterene & hydrochlorothiazide TABS</i>	1B	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure					
Carbonic Anhydrase Inhibitors					
<i>acetazolamide sodium</i>	1B		<i>amiloride hcl TABS</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)	<i>spironolactone TABS</i>	1B	
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)	<i>triamterene CAPS</i>	1B	QL(3 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)	Thiazides and Thiazide-Like Diuretics		
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA	<i>chlorthalidone 25 MG, 50 MG</i>	1B	
<i>methazolamide TABS</i>	1B	QL(6 ea daily)	<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)
Diuretic Combinations					
ENDOCRINE AND METABOLIC AGENTS - MISC.					
- Drugs to Treat Bone Disease and Regulate Hormones					
Bone Density Regulators					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)	CHORIONIC GONADOTROPIN IM	4	PA
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)	<i>clomiphene citrate TABS</i>	3	PA
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)	GnRH/LHRH Antagonists		
<i>FORTEO SOPN (teriparatide (recombinant))</i>	4	QL(0.09 ml daily); SP; PA	<i>ganirelix acetate</i>	4	PA
<i>FOSAMAX PLUS D</i>	3	QL(0.143 ea daily); PA	<i>ORILISSA</i>	2	PA
<i>ibandronate sodium SOLN</i>	4	SP; PA	Growth Hormone Receptor Antagonists		
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)	SOMAVERT 10 MG, 15 MG, 20 MG	4	SP; PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA	Growth Hormone Releasing Hormones (GHRH)		
<i>PAMIDRONATE DISODIUM SOLN</i>	4	SP; PA	EGRIFTA 2 MG	4	PA
<i>PROLIA SOSY</i>	4	1 max fill(s) per 180 day(s) retail; SP; PA	EGRIFTA SV	4	PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA	Growth Hormones		
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA	HUMATROPE CART IJ	4	SP; PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA	NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
<i>risedronate sodium TBEC</i>	1B	PA	NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA
<i>teriparatide (recombinant) SOPN</i>	4	QL(0.09 ml daily); SP; PA	ZORBTIVE SC	4	SP; PA
<i>TERIPARATIDE SOPN</i>	4	QL(0.09 ml daily); PA	Hormone Receptor Modulators		
<i>TYMLOS</i>	4	PA	OSPHENA	3	PA
<i>XGEVA SOLN</i>	4	SP; PA	<i>raloxifene hcl</i>	0	QL(1 ea daily)
<i>zoledronic acid CONC</i>	4	SP; PA	Insulin-Like Growth Factors (Somatomedins)		
<i>zoledronic acid SOLN</i>	4	SP; PA	INCRELEX	4	SP; PA
Corticotropin			LHRH/GnRH Agonist Analog Pituitary Suppressants		
ACTHAR	3	PA	FENSOLVI SC	4	SP; PA
Fertility Regulators			LUPRON DEPOT-PED (1-MONTH)	4	SP; PA
			LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
			LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA
			SYNAREL	4	SP; PA
			Metabolic Modifiers		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALDURAZYME	4	SP; PA	Prolactin Inhibitors		
<i>betaine</i>	4	SP; PA	<i>cabergoline</i>	1B	
<i>calcitriol CAPS</i>	1B		Somatostatic Agents		
<i>calcitriol SOLN IV</i>	1B		<i>octreotide acetate SOLN</i>	4	SP; PA
<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA	SANDOSTATIN LAR DEPOT KIT	4	PA
<i>doxercalciferol CAPS</i>	1B		SIGNIFOR	4	PA
<i>doxercalciferol SOLN</i>	1B		Vasopressin Receptor Antagonists		
ELAPRASE	4	SP; PA	<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
GALAFOLD	4	QL(0.5 ea daily); PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
LUMIZYME	4	SP; PA	Estrogen Combinations		
MYALEPT	4	PA	CLIMARA PRO	3	
NAGLAZYME	4	SP; PA	DUAVEE	3	PA
<i>nitisinone CAPS</i>	4	PA	<i>norethindrone acetate-ethynodiol</i>	1B	
<i>paricalcitol CAPS</i>	1B		PREMPHASE	2	
<i>paricalcitol SOLN</i>	1B		PREMPRO	2	QL(1 ea daily)
PHEBURANE PLLT	4	PA	Estrogens		
<i>sapropterin dihydrochloride PACK</i>	4	PA	DELESTROGEN 10 MG/ML (<i>estradiol valerate</i>)	1B	
<i>sapropterin dihydrochloride TABS</i>	4	PA	DEPO-ESTRADIOL	3	
<i>sodium phenylbutyrate POWD</i>	1B	PA	ELESTRIN GEL	3	
<i>sodium phenylbutyrate TABS</i>	1B	PA	<i>estradiol valerate</i>	1B	
Posterior Pituitary Hormones			<i>estradiol GEL 0.06 %</i>	3	
<i>desmopressin acetate spray</i>	1B		<i>estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM</i>	1B	
<i>desmopressin acetate spray refrigerated</i>	1B		<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)
<i>desmopressin acetate SOLN IJ</i>	1B	PA	<i>estradiol PTWK</i>	1B	
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA	<i>estradiol TABS</i>	1B	
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)	ESTROGEL GEL (<i>estradiol</i>)	3	
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)			
STIMATE SOLN NA	4	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EVAMIST SOLN	3		<i>lubiprostone</i>	1B	QL(2 ea daily)
MENEST	3		Gastrointestinal Stimulants		
MENOSTAR PTWK	3		<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
PREMARIN SOLR	2		<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
PREMARIN TABS	2	QL(1 ea daily)	<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			Inflammatory Bowel Agents		
Fluoroquinolones			<i>balsalazide disodium CAPS</i>	1B	QL(9 ea daily)
BAXDELA SOLR	3	PA	<i>DIPENTUM</i>	2	
BAXDELA TABS	3	PA	<i>INFLECTRA SOLR</i>	4	PA
<i>ciprofloxacin hcl TABS</i>	1B		<i>mesalamine CP24</i>	1B	
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3		<i>mesalamine CPDR</i>	1B	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 max fill(s) per 30 day(s) retail	<i>mesalamine ENEM</i>	3	
CIPRO SUSR	2	2 max fill(s) per 30 day(s) retail	<i>mesalamine SUPP</i>	3	
<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B		<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)
<i>levofloxacin SOLN OR</i>	1B		<i>mesalamine TBEC 1.2 GM</i>	3	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B		<i>RENFLEXIS</i>	4	PA
<i>levofloxacin TABS 500 MG</i>	1A		<i>SKYRIZI SOCT</i>	4	QL(0.043 ml daily); PA
<i>moxifloxacin hcl in sodium chloride</i>	1B		<i>SKYRIZI SOLN</i>	4	QL(0.36 ml daily); PA
<i>moxifloxacin hcl TABS</i>	1B		<i>STELARA 130 MG/26ML</i>	4	QL(3.47 ml daily); PA
<i>ofloxacin 300 MG, 400 MG</i>	1B		<i>sulfasalazine TABS</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs			<i>sulfasalazine TBEC</i>	1B	
Bile Acid Synthesis Disorder Agents			Intestinal Acidifiers		
CHOLBAM	4	SP; PA	<i>lactulose (encephalopathy)</i>	1B	
Gallstone Solubilizing Agents			Irritable Bowel Syndrome (IBS) Agents		
<i>ursodiol CAPS</i>	1B	QL(3 ea daily)	<i>alosetron hcl</i>	1B	QL(2 ea daily)
<i>ursodiol TABS</i>	1B		<i>LINZESS</i>	2	QL(1 ea daily)
Gastrointestinal Chloride Channel Activators			Peripheral Opioid Receptor Antagonists		
			<i>alvimopan</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
MOVANTIK	3	QL(1 ea daily); PA
Phosphate Binder Agents		
calcium acetate (phosphate binder) CAPS	1B	
calcium acetate (phosphate binder) TABS	1B	RX/OTC
lanthanum carbonate CHEW	1B	
PHOSLYRA SOLN	2	
RENAGEL (sevelamer hcl)	3	QL(17 ea daily)
sevelamer carbonate PACK	1B	
sevelamer carbonate TABS	1B	
sevelamer hcl 800 MG	1B	QL(17 ea daily)
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS -		
Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
potassium citrate (alkalinizer) TBCR	1B	
sodium citrate & citric acid	1B	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
acetic acid 0.25 %	1B	
glycine (gu irrigant) SOLN 1.5 %	1B	
sodium chloride (gu irrigant) 0.9 %	1B	
SORBITOL 3 %	1B	
SORBITOL/MANNITOL IRRIGATION	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 ea daily)

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
ALPROLIX	4	PA	<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)	
ALTUVIPIO	4	PA	<i>dipyridamole</i>	1B		
BENEFIX KIT	4	PA	<i>prasugrel hcl</i>	1B	QL(1 ea daily)	
ELOCTATE	4	PA	ZONTIVITY	3	PA	
ESPEROCT	4	PA	HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders			
IDELVION	4	PA	Agents for Gaucher Disease			
JIVI	4	PA	CERDELGA	4	QL(2 ea daily); PA	
KOGENATE FS KIT	4	PA	CEREZYME 400 UNIT	4	SP; PA	
KOVALTRY	4	PA	<i>miglustat</i>	4	QL(3 ea daily); SP; PA	
NOVOEIGHT	4	PA	Agents for Sickle Cell Disease			
XYNTHA	4	PA	DROXIA CAPS	3		
XYNTHA SOLOFUSE	4	PA	OXBRYTA TABS 500 MG	4	PA	
Bradykinin B2 Receptor Antagonists						
<i>icatibant acetate SOLN</i>	4	QL(9 ml daily); PA	Cobalamins			
<i>icatibant acetate SOSY</i>	4	QL(9 ml daily); PA	<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ml daily)	
Complement Inhibitors						
HAEGARDA SOLR SC	4	PA	Folic Acid/Folates			
Hematologic - Tyrosine Kinase Inhibitors						
TAVALISSE	4	QL(2 ea daily); SP; PA	<i>folic acid TABS</i>	0		
Hematorheologic Agents			Hematopoietic Growth Factors			
<i>pentoxifylline</i>	1B	QL(3 ea daily)	<i>ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML</i>	4	SP; PA	
Plasma Kallikrein Inhibitors			<i>ARANESP ALBUMIN FREE SOLN 25 MCG/ML</i>	4	SP	
ORLADEYO	4	PA	<i>ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML</i>	4	SP; PA	
TAKHZYRO SOLN	4	PA	DOPTELET	4	QL(3 ea daily); PA	
TAKHZYRO SOSY	4	PA	<i>EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	4	SP; PA	
Platelet Aggregation Inhibitors			<i>LEUKINE SOLR IJ</i>	4	SP; PA	
<i>anagrelide hcl</i>	1B					
<i>aspirin-dipyridamole</i>	1B	QL(2 ea daily); PA				
BRILINTA	2	QL(2 ea daily)				
CABLIVI	4	PA				
<i>cilostazol</i>	1B					
<i>clopidogrel bisulfate 300 MG</i>	1B					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MIRCERA	4	PA	<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
MULPLETA	4	QL(1 ea daily); PA	<i>tranexamic acid TABS</i>	1B	
PROCIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
PROCIT 40000 UNIT/ML	4	SP; PA	Barbiturate Hypnotics		
PROCIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA	<i>phenobarbital ELIX</i>	1B	
PROMACTA PACK	4	QL(1 ea daily); PA	<i>phenobarbital TABS</i>	1B	
PROMACTA TABS	4	QL(1 ea daily); PA	Hypnotics - Tricyclic Agents		
RETACRIT	4	PA	<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
UDENYCA ONBODY SOSY	4	PA	Non-Barbiturate Hypnotics		
UDENYCA SOAJ	4	PA	<i>estazolam</i>	1B	
UDENYCA SOSY	4	PA	<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST
ZARXIO	4	PA	<i>flurazepam hcl</i>	1B	QL(1 ea daily)
ZIEXTENZO	4	PA	<i>quazepam</i>	3	PA
Hematopoietic Mixtures			<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)	<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)
Iron			<i>triazolam</i>	1B	
<i>ferrous sulfate SOLN 15 MG/ML</i>	0	AL(Up to 1 yrs old)	<i>zaleplon 10 MG</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)
<i>ferrous sulfate TABS 65 MG, 325 MG</i>	0		<i>zaleplon 5 MG</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
<i>ferrous sulfate TBEC 325 MG</i>	0		<i>zolpidem tartrate TABS</i>	1A	QL(1 ea daily); AL(At least 18 yrs old)
Stem Cell Mobilizers			<i>zolpidem tartrate TBCR</i>	1B	QL(1 ea daily)
<i>MOZOBIL (plerixafor)</i>	4	SP; PA	Orexin Receptor Antagonists		
<i>plerixafor</i>	4	SP; PA	<i>BELSOMRA</i>	3	PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders			Selective Melatonin Receptor Agonists		
Hemostatics - Systemic			<i>ramelteon</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
<i>aminocaproic acid TABS</i>	1B	PA	LAXATIVES - Bowel Treatment Drugs		

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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED MISC	0	QL(2 ea daily)	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	QL(2 ea daily)	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)	FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
TRUSTEX/RIA LUBRICATED MISC	0	QL(2 ea daily)	ONETOUCH DELICA SAFETY LANCING DEVICE	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0		RELION 2-IN-1 LANCET DEVICES 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0		RELION 2-IN-1 LANCING DEVICE 25G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0		RELION 2-IN-1 LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0		SELECT LANCETS	1B	6.66/day
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0		TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0		Parenteral Therapy Supplies		
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0		SELECT INSULIN SYRINGES	1B	5/day
Diabetic Supplies			MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA	AIMOVIG	2	QL(0.04 ml daily); PA
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA	EMGALITY SOAJ	2	QL(0.07 ml daily); PA
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea 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

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Electrolyte Mixtures					
dextrose in lactated ringers	1B		POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L- 0.45 % (<i>potassium chloride in nacl</i>)	1B	
electrolyte-148	1B		ringer's	1B	
electrolyte-a	1B		Fluoride		
IONOSOL- MB/DEXTROSE 5%	1B		sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	0	QL(1 ea daily)
ISOLYTE-P/DEXTROSE 5%	1B		Magnesium		
ISOLYTE-S	1B		magnesium sulfate IJ 50 %	1B	
KCL 0.3%/D5W/NACL 0.9% (<i>potassium chloride in dextrose & sodium chloride</i>)	1B		Phosphate		
<i>lactated ringer's</i>	1B		potassium phosphates 236 MG/ML-224 MG/ML	1B	
NORMOSOL-M/D5W	1B		Potassium		
NORMOSOL-R	1B		potassium acetate SOLN 2 MEQ/ML	1B	
PLASMA-LYTE A (electrolyte-a)	1B		potassium bicarbonate TBEF	1B	
PLASMA-LYTE-148 (electrolyte-148)	1B		potassium chloride microencapsulated crystals er	1B	
<i>potassium chloride in dextrose 5 %-20 MEQ/L</i>	1B		potassium chloride CPCR	1B	
<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %- 0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %- 30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1B		potassium chloride PACK OR 20 MEQ	1B	PA
<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L- 0.9 %</i>	1B		potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	1B	
POTASSIUM CHLORIDE/DEXTROSE/L ACTATED RINGERS	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B	
Sodium			potassium chloride TBCR	1B	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>			Sodium		
MISCELLANEOUS THERAPEUTIC CLASSES					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Chelating Agents					
<i>penicillamine CAPS</i>	1B	PA	SIMULECT	3	
<i>penicillamine TABS</i>	1B	QL(8 ea daily)	<i>sirolimus TABS</i>	1B	
<i>trientine hcl 250 MG</i>	4	QL(8 ea daily); SP; PA	<i>tacrolimus CAPS</i>	1B	
Immunomodulators					
<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA	THYMOGLOBULIN	4	SP; PA
<i>lenalidomide 20 MG</i>	4	QL(1 ea daily); PA	Irrigation Solutions		
<i>THALOMID</i>	4	QL(3 ea daily); SP; PA	<i>irrigation solutions, physiological</i>	1B	
Immunosuppressive Agents			<i>lactated ringer's (irrigation)</i>	1B	
<i>ATGAM</i>	4	SP; PA	<i>ringer's irrigation</i>	1B	
<i>AZATHIOPRINE</i>	1B		<i>water for irrigation, sterile</i>	1B	
<i>azathioprine TABS</i>	1B		Potassium Removing Agents		
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B		LOKELMA	3	QL(1 ea daily); PA
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B		<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>cyclosporine CAPS</i>	1B		<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	1B	
<i>cyclosporine SOLN IV 50 MG/ML</i>	1B		MOUTH/THROAT/DENTAL AGENTS		
<i>ENSPRYNG</i>	4	PA	Anesthetics Topical Oral		
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); SP; PA	<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA	<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)
<i>mycophenolate mofetil CAPS</i>	1B		Anti-infectives - Throat		
<i>mycophenolate mofetil TABS</i>	1B		<i>clotrimazole</i>	1B	
<i>mycophenolate sodium</i>	1B		<i>nystatin (mouth-throat)</i>	1B	
<i>NULOJIX</i>	4	SP; PA	Antiseptics - Mouth/Throat		
<i>PROGRAF PACK</i>	2	PA	<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
<i>PROGRAF SOLN</i>	2		<i>DEBACTEROL</i>	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Throat Products - Misc.					
cevimeline hcl	1B		PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)
pilocarpine hcl (oral)	1B		PRENATAL ONE DAILY TABS	2	QL(1 ea daily)
MULTIVITAMINS					
Prenatal Vitamins					
CLASSIC PRENATAL TABS	2	QL(1 ea daily)	PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC
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)	PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)	PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)
GNP PRENATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)	PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC
MASONATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMINS TABS 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)
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATAL VITAMIN TABS	2	QL(1 ea daily)
MULTI PRENATAL TABS	2	QL(1 ea daily)	PRENATAL TABS	2	QL(1 ea daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 ea daily); RX/OTC	PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATRYL TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
NEONATAL VITAMIN TABS	2	QL(1 ea daily)	QC PRENATAL TABS	2	QL(1 ea daily)
NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC	RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC	RA PRENATAL TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)	SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)
			THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC
			TRICARE TABS	2	QL(1 ea daily); RX/OTC
			VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC	<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC			
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms								
Central Muscle Relaxants								
<i>baclofen TABS 10 MG, 20 MG</i>	1B		<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC			
<i>carisoprodol TABS</i>	1B		<i>triamcinolone acetonide (nasal) AERO</i>	1B				
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)	XHANCE EXHU	3	PA			
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)	NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles					
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)	ALS Agents					
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)	<i>riluzole TABS</i>	3				
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B		Neuromuscular Blocking Agent - Neurotoxins					
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)	XEOMIN	3	PA			
<i>tizanidine hcl CAPS</i>	1B		Nondepolarizing Muscle Relaxants					
<i>tizanidine hcl TABS</i>	1B		<i>atracurium besylate 100 MG/10ML</i>	3	PA			
Direct Muscle Relaxants								
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)	NUTRIENTS					
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus								
Nasal Antiallergy								
<i>azelastine hcl</i>	1B	RX/OTC	<i>CLINIMIX 4.25%/DEXTROSE 10%</i>	3				
<i>olopatadine hcl (nasal)</i>	1B		<i>CLINIMIX 4.25%/DEXTROSE 5%</i>	3				
Nasal Anticholinergics								
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)	<i>CLINIMIX E 5%/DEXTROSE 20%</i>	3				
<i>ipratropium bromide (nasal) 0.06 %</i>	1B		OPHTHALMIC AGENTS - Drugs to Treat the Eye					
Nasal Steroids								
<i>budesonide (nasal)</i>	1B		Beta-blockers - Ophthalmic					
<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail	<i>betaxolol hcl (ophth) SOLN</i>	1B				
			<i>brimonidine tartrate-timolol maleate</i>	1B				
			<i>carteolol hcl (ophth)</i>	1B				
			<i>dorzolamide hcl-timolol maleate</i>	1B				
			<i>levobunolol hcl 0.5 %</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate (ophth)</i> <i>SOLG</i>	1B		<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>timolol maleate (ophth)</i> <i>SOLN</i>	1B		<i>ofloxacin (ophth)</i>	1B	
Cycloplegic Mydriatics					
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)	<i>polymyxin b-trimethoprim</i>	1B	
<i>tropicamide SOLN 1 %</i>	1B		<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
Miotics					
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B		<i>tobramycin (ophth) SOLN</i>	1B	
Ophthalmic Adrenergic Agents					
<i>apraclonidine hcl</i>	1B		<i>trifluridine</i>	1B	
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B		<i>ZIRGAN GEL</i>	2	
<i>IOPIDINE</i>	3		Ophthalmic Immunomodulators		
Ophthalmic Anti-infectives					
<i>AZASITE</i>	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)	<i>cyclosporine (ophth) EMUL</i>	3	PA
<i>bacitracin (ophthalmic)</i>	3		Ophthalmic Local Anesthetics		
<i>BESIVANCE</i>	3	PA	<i>proparacaine hcl</i>	1B	
<i>ciprofloxacin hcl (ophth)</i> <i>SOLN</i>	1B		Ophthalmic Steroids		
<i>erythromycin (ophth)</i>	1B		<i>ALREX SUSP (loteprednol etabonate)</i>	3	PA
<i>gatifloxacin (ophth)</i>	1B		<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
<i>gentamicin sulfate (ophth)</i> <i>OINT</i>	1B		<i>difluprednate</i>	1B	PA
<i>gentamicin sulfate (ophth)</i> <i>SOLN</i>	1B		<i>fluorometholone (ophth) SUSP</i>	1B	
<i>KLARITY-A</i>	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)	<i>FML FORTE SUSP</i>	3	PA
<i>levofloxacin (ophth) 0.5 %</i>	1B		<i>FML OINT</i>	3	PA
<i>moxifloxacin hcl (ophth)</i> <i>SOLN OP</i>	1B		<i>LOTEMAX OINT</i>	3	PA
<i>NATACYN</i>	2		<i>loteprednol etabonate GEL</i>	1B	PA
			<i>loteprednol etabonate SUSP</i>	1B	PA
			<i>MAXIDEX SUSP OP</i>	3	PA
			<i>neomycin-polymy-dexameth OINT</i>	1B	
			<i>neomycin-polymy-dexameth SUSP</i>	1B	
			<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)
			<i>PRED MILD</i>	3	PA
			<i>PRED-G SUSP</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone acetate (ophth)</i>	1B		Otic Agents - Miscellaneous		
PREDNISOLONE SODIUM PHOSPHATE	3		<i>acetic acid (otic)</i>	1B	QL(0.5 ml daily)
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA	Otic Anti-infectives		
<i>tobramycin-dexamethasone SUSP</i>	1B		<i>ciprofloxacin hcl (otic)</i>	1B	
ZYLET	3	PA	<i>ofloxacin (otic)</i>	1B	
Ophthalmics - Misc.			Otic Combinations		
ALOCRIL	3	PA	<i>ciprofloxacin-dexamethasone</i>	1B	PA
ALOMIDE	3	PA	<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 ea daily); PA
<i>azelastine hcl (ophth)</i>	1B		CORTISPORIN-TC	3	
<i>bepotastine besilate</i>	3	PA	<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ml daily)
<i>brinzolamide</i>	1B		<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B		Otic Steroids		
<i>cromolyn sodium (ophth)</i>	1B		<i>fluocinolone acetonide (otic)</i>	1B	
CYSTARAN	2	QL(2.143 ml daily); PA	<i>hydrocortisone w/acetic acid</i>	1B	
<i>diclofenac sodium (ophth)</i>	1B		PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
<i>dorzolamide hcl</i>	1B		Immune Serums		
<i>epinastine hcl (ophth)</i>	1B		GAMMAGARD LIQUID 30 GM/300ML	4	PA
<i>flurbiprofen sodium</i>	1B		GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
<i>ketorolac tromethamine (ophth)</i>	1B		GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP; PA
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B		GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
LASTACAFT	3	PA	GAMUNEX-C	4	SP; PA
NEVANAC	3	PA	Passive Immunizing Agents - Combinations		
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC			
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC			
Prostaglandins - Ophthalmic					
<i>bimatoprost SOLN</i>	3				
<i>latanoprost SOLN</i>	1B				
<i>tafluprost</i>	1B				
<i>travoprost SOLN</i>	1B				
OTIC AGENTS - Drugs to Treat the Ear					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
HYQVIA	4	PA	<i>piperacillin sodium-tazobactam sodium</i>	1B				
PENICILLINS - Drugs to Treat Bacterial Infections								
Aminopenicillins								
<i>amoxicillin CAPS</i>	1A		<i>dicloxacillin sodium</i>	1B				
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B		<i>nafcillin sodium IV 10 GM</i>	1B				
<i>amoxicillin SUSR 125 MG/5ML</i>	1A		<i>oxacillin sodium IV 10 GM</i>	1B				
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B		PROGESTINS - Hormone Replacement/Modifying Drugs					
<i>amoxicillin TABS</i>	1B		Progestins					
<i>ampicillin sodium IJ 1 GM</i>	1B		<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B				
<i>ampicillin CAPS 500 MG</i>	1B		<i>medroxyprogesterone acetate 10 MG</i>	1A				
Natural Penicillins			<i>megestrol acetate (appetite)</i>	1B	PA			
<i>penicillin g potassium 5000000 UNIT</i>	1B		<i>norethindrone acetate TABS</i>	0				
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B		<i>progesterone CAPS</i>	1B				
PENICILLIN G PROCAINE	3		PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions					
<i>penicillin g sodium</i>	3		Agents for Chemical Dependency					
<i>penicillin v potassium SOLR</i>	1B		<i>acamprosate calcium</i>	1B				
<i>penicillin v potassium TABS</i>	1B		<i>disulfiram</i>	1B				
Penicillin Combinations			<i>LUCEMYRA</i>	3	QL(224 ea per 14 day(s) retail); PA			
<i>amoxicillin & pot clavulanate CHEW</i>	1B		Antidementia Agents					
<i>amoxicillin & pot clavulanate SUSR</i>	1B		<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 ea daily)			
<i>amoxicillin & pot clavulanate TABS</i>	1B		<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 ea daily)			
<i>amoxicillin & pot clavulanate TB12</i>	1B		<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 ea daily)			
<i>ampicillin & sulbactam sodium IV 10 GM-5 GM</i>	1B		<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 ea daily)			
			<i>galantamine hydrobromide CP24</i>	1B	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ml daily)	<i>glatiramer acetate SOSY 40 MG/ML</i>	3	QL(0.43 ml daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 ea daily)	<i>glatiramer acetate SOSY 20 MG/ML</i>	3	QL(1 ml daily)
<i>memantine hcl TABS</i>	1B		<i>KESIMPTA</i>	4	QL(0.0144 ml daily); PA
<i>memantine hcl TABS</i>	1B	QL(2 ea daily)	<i>PLEGRIDY STARTER PACK SOPN</i>	4	QL(0.036 ml daily); PA
<i>rivastigmine tartrate CAPS</i>	1B		<i>PLEGRIDY STARTER PACK SOSY SC</i>	4	QL(0.036 ml daily); PA
Combination Psychotherapeutics			<i>PLEGRIDY SOPN</i>	4	QL(0.036 ml daily); PA
<i>chlordiazepoxide-amitriptyline</i>	1B		<i>PLEGRIDY SOSY SC</i>	4	QL(0.036 ml daily); PA
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)	<i>REBIF REBIDOSE TITRATIONPACK SOAJ</i>	4	1 max fill(s) per 365 day(s) retail; SP; PA
Fibromyalgia Agents			<i>REBIF REBIDOSE SOAJ</i>	4	QL(0.214 ml daily); SP; PA
<i>SAVELLA TITRATION PACK MISC</i>	2	1 max fill(s) per 365 day(s) retail; PA	<i>REBIF TITRATION PACK SOSY</i>	4	1 max fill(s) per 365 day(s) retail; SP; PA
<i>SAVELLA TABS</i>	2	QL(2 ea daily); PA	<i>REBIF SOSY</i>	4	QL(0.214 ml daily); SP; PA
Movement Disorder Drug Therapy			<i>teriflunomide</i>	4	QL(1 ea daily)
<i>AUSTEDO TABS</i>	4	QL(4 ea daily); PA	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>INGREZZA CAPS</i>	4	QL(1 ea daily); PA	<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA
<i>INGREZZA CPPK</i>	4	1 max fill(s) per 180 day(s) retail; PA	<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA	Pseudobulbar Affect (PBA) Agents		
Multiple Sclerosis Agents			<i>NUEDEXTA</i>	3	QL(2 ea daily); PA
<i>AVONEX PEN AJKT</i>	4	QL(0.0714 ml daily); SP; PA	Psychotherapeutic and Neurological Agents - Misc.		
<i>AVONEX PSKT</i>	4	QL(0.0714 ml daily); SP; PA	<i>ergoloid mesylates TABS</i>	1B	
<i>BETASERON KIT</i>	4	QL(0.0357 ea daily); SP; PA	<i>pimozide</i>	1B	
<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA	Smoking Deterrents		
<i>dimethyl fumarate CDPK</i>	1B	QL(2 ea daily)	<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)
<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)			
<i>EXTAVIA KIT</i>	4	QL(0.0357 ea daily); SP; PA			
<i>fingolimod hcl</i>	4	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nicotine polacrilex GUM</i>	0		Infections		
<i>nicotine polacrilex LOZG</i>	0		Sulfonamides		
NICOTINE TRANSDERMAL SYSTEM KIT	0		<i>sulfadiazine TABS</i>	1B	
<i>nicotine MISC XX</i>	0	QL(1 ea daily)	TETRACYCLINES - Drugs to Treat Bacterial Infections		
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 ea daily)	Fluorocyclines		
NICOTROL INHALER INHA	0		XERAVA	4	PA
NICOTROL NS SOLN	0		Glycylcyclines		
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)	<i>tigecycline</i>	1B	
<i>varenicline tartrate TBPK</i>	0		Tetracyclines		
Transthyretin Amyloidosis Agents			<i>demeclercycline hcl TABS</i>	1B	
TEGSEDI	4	PA	<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
Alpha-Proteinase Inhibitor (Human)			<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
PROLASTIN-C SOLN	4	PA	<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
Cystic Fibrosis Agents			<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
KALYDECO TABS	4	QL(2 ea daily); SP; PA	<i>doxycycline hyclate SOLR</i>	1B	
ORKAMBI PACK	4	QL(2 ea daily); PA	<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
ORKAMBI TABS	4	QL(4 ea daily); PA	<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
PULMOZYME	4	QL(2.5 ml daily); SP; PA	<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
TRIKAFTA TBPK	4	QL(3 ea daily); PA	<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)
Pulmonary Fibrosis Agents			THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
OFEV	4	QL(2 ea daily); PA	Antithyroid Agents		
<i>pirfenidone CAPS</i>	4		<i>methimazole TABS</i>	1B	
<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA	<i>propylthiouracil</i>	1B	
<i>pirfenidone TABS 267 MG, 801 MG</i>	4		Thyroid Hormones		
SULFONAMIDES - Drugs to Treat Bacterial Infections					

Drug Name	Drug Tier	Requirements/ Limits
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID 120 TABS	1B	QL(1 ea daily)
NP THYROID 15 TABS	1B	QL(1 ea daily)
NP THYROID 30 TABS	1B	QL(1 ea daily)
NP THYROID 60 TABS	1B	QL(1 ea daily)
NP THYROID 90 TABS	1B	QL(1 ea daily)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
DIPHTHERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC INJ	0	
TETANUS/DIPHTHERIA TOXOIDS-ADSORBED ADULT SUSP	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		

Drug Name	Drug Tier	Requirements/ Limits
Antispasmodics		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN OR</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)
<i>methscopolamine bromide</i>	1B	
H-2 Antagonists		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	
<i>famotidine SOLN 20 MG/2ML</i>	1A	
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B	
<i>famotidine SUSR</i>	1B	QL(10 ml daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	
<i>nizatidine CAPS</i>	1B	
<i>ranitidine hcl TABS 150 MG</i>	1B	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1B	QL(40 ml daily)
<i>sucralfate TABS</i>	1B	QL(4 ea daily)
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	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>	1B		
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 ea daily)	<i>oxybutynin chloride TB24</i>	1B		
<i>lansoprazole CPDR 15 MG</i>	1B	QL(1 ea daily); RX/OTC	<i>solifenacina succinate TABS</i>	1B	QL(1 ea daily); PA	
<i>lansoprazole CPDR 30 MG</i>	1B		<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)	
<i>NEXIUM 24HR TBEC (esomeprazole magnesium)</i>	1B	QL(2 ea daily)	<i>tolterodine tartrate TABS</i>	1B		
<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)	<i>trospium chloride CP24</i>	1B	QL(1 ea daily)	
<i>omeprazole CPDR</i>	1B	QL(2 ea daily)	<i>trospium chloride TABS</i>	1B	QL(3 ea daily)	
<i>omeprazole TBEC</i>	1B	QL(2 ea daily)	Urinary Antispasmodics - Cholinergic Agonists			
<i>pantoprazole sodium TBEC 40 MG</i>	1B		<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)	
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)	<i>bethanechol chloride 25 MG</i>	1B		
<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)	Urinary Antispasmodics - Direct Muscle Relaxants			
Ulcer Drugs - Prostaglandins						
<i>misoprostol</i>	1B	QL(4 ea daily)	<i>flavoxate hcl</i>	1B		
Ulcer Therapy Combinations						
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail	VACCINES			
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC	Bacterial Vaccines			
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms						
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)						
<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)	<i>ACTHIB SOLR IM</i>	0		
<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA	<i>BEXSERO</i>	0		
<i>oxybutynin chloride SOLN</i>	1B		<i>HIBERIX SOLR IJ</i>	0		
			<i>MENACTRA</i>	0		
			<i>MENQUADFI</i>	0		
			<i>MENVEO SOLR</i>	0		
			<i>PEDVAX HIB SUSP</i>	0		
			<i>PNEUMOVAX 23</i>	0		
			<i>PNEUMOVAX 23/1 DOSE</i>	0		
			<i>PREVNAR 13</i>	0		
			<i>PREVNAR 20</i>	0	1 max fill(s) per 999 day(s) retail	
			<i>TRUMENBA</i>	0		
			<i>VAXNEUVANCE</i>	0	4 max fill(s) per 999 day(s) retail	
Viral Vaccines						
			<i>ABRYSVO</i>	0		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AFLURIA QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2021-2022 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 QUADRIVALENT 2021-2022 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 QUADRIVALENT 2021-2022	0	Limit 1 dose per season; 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 QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY SUSP	0		FLUCELVAX QUADRIVALENT 2021-2022 SUSY	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			
FLUAD QUADRIVALENT 2021-2022	0	1 max fill(s) per 180 day(s) retail			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 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 QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULALVAL QUADRIVALENT 2021-2022 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
FLULALVAL QUADRIVALENT 2022-2023 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
FLULALVAL QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail
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 HIGH-DOSE PF 2021-2022	0	1 max fill(s) per 180 day(s) retail	HAVRIX	0	2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
FLUZONE HIGH-DOSE PF 2022-2023	0	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 PF 2023-2024	0	1 max fill(s) per 180 day(s) retail	IPOL INACTIVATED IPV	0	
			M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	0		SPIKEVAX COVID-19 VACCINE SUSP	0	
MODERNA COVID-19 VACCINE SUSP	0		TWINRIX SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		VAQTA	0	2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0		VARIVAX INJ	0	2 max fill(s) per 365 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0		VAGINAL AND RELATED PRODUCTS		
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0		Miscellaneous Vaginal Products		
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0		INTRAROSA	3	QL(1 ea daily); PA
PFIZER-BIONTECH COVID-19VACCINE SUSP	0		Spermicides		
PREHEVBRIOD	0	3 max fill(s) per 365 day(s) retail	TODAY SPONGE MISC	0	
PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail	Vaginal Anti-infectives		
RECOMBIVAX HB SUSP	0		<i>clindamycin phosphate vaginal CREA</i>	1B	
RECOMBIVAX HB SUSY	0		<i>clotrimazole vaginal CREA 1 %</i>	1B	
ROTARIX SUSP	0		GYNIAZOLE-1	3	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
ROTARIX SUSR	0		<i>metronidazole vaginal</i>	1B	
ROTATEQ SOLN	0		<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)	<i>terconazole vaginal CREA</i>	1B	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0		<i>terconazole vaginal CREA</i>	1B	
			<i>terconazole vaginal SUPP</i>	1B	
			Vaginal Anti-inflammatory Agents		
			<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
			Vaginal Contraceptive - pH Modulators		
			PHEXXI	0	PV
			Vaginal Estrogens		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)	<i>niacinamide TABS 500 MG</i>	1A	
<i>estradiol vaginal TABS</i>	1B		<i>niacin CPCR 250 MG, 500 MG</i>	1A	
FEMRING	3	PA	<i>niacin TABS</i>	1A	
PREMARIN	2	QL(1.5 gm daily)	<i>niacin TBCR</i>	1A	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
Anaphylaxis Therapy Agents					
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail			
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail			
Vasopressors					
<i>midodrine hcl</i>	1B				
VITAMINS					
Oil Soluble Vitamins					
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A				
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0				
<i>ergocalciferol CAPS</i>	0				
<i>ergocalciferol SOLN OR</i>	1B				
<i>VITAMIN D2 TABS 400 UNIT</i>	0	AL(At least 65 yrs old)			
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		colestipol hcl GRAN	19	cyclophosphamide SOLR IJ	23
		colestipol hcl PACK	19	cycloserine	23
		colestipol hcl TABS	19	cyclosporine (ophth) EMUL	58

cyclosporine CAPS	55	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	14	desmopressin acetate spray	45
cyclosporine modified (for microemulsion) CAPS	55	dapsone	21	desmopressin acetate spray refrigerated	45
cyclosporine modified (for microemulsion) SOLN	55	DAPTACEL	63	desmopressin acetate TABS 0.1 MG 45	
cyclosporine SOLN IV 50 MG/ML .	55	daptomycin 500 MG	21	desmopressin acetate TABS 0.2 MG 45	
CYLTEZO AJKT	3	darifenacin hydrobromide	64	desogestrel & ethinyl estradiol	34
CYLTEZO PSKT 10 MG/0.2ML	3	darunavir TABS 600 MG	30	desogestrel-ethinyl estradiol (biphasic)	34
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	DAURISMO	24	desogestrel-ethinyl estradiol (triphasic)	34
CYLTEZO PSKT 40 MG/0.4ML	3	DEBACTEROL	55	desonide CREA	40
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	3	decitabine	23	desonide LOTN	40
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	3	deferasirox PACK	16	desonide OINT	40
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ...	3	deferasirox TABS	16	desoximetasone CREA 0.25 %	40
cyproheptadine hcl SYRP	18	deferasirox TBSO	16	desoximetasone GEL	40
cyproheptadine hcl TABS	18	deferiprone TABS 500 MG	17	desoximetasone OINT 0.25 %	40
CYSTAGON CAPS	47	deflazacort SUSP	35	desvenlafaxine succinate 100 MG .	14
CYSTARAN	59	deflazacort TABS	35	desvenlafaxine succinate 25 MG, 50 MG	14
cytarabine SOLN	23	DELESTROGEN 10 MG/ML (estradiol valerate)	45	dexamethasone ELIX	35
dabigatran etexilate mesylate CAPS . 11		DELSTRIGO	30	DEXAMETHASONE INTENSOL CONC	35
dacarbazine SOLR 200 MG	27	demeclocycline hcl TABS	62	dexamethasone sodium phosphate (ophth)	58
dactinomycin	25	DEPO-ESTRADIOL	45	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	35
dalfampridine	61	DEPO-MEDROL SUSP	35	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	35
danazol CAPS	7	DEPO-SUBQ PROVERA 104 SUSY SC	35	dexamethasone SOLN	35
dantrolene sodium CAPS	57	desipramine hcl TABS	14	dexamethasone TABS 0.5 MG, 0.75 MG	36
dapagliflozin propanediol	16	desloratadine TABS	18		
dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	14	desloratadine TBDP 2.5 MG	18		
		desmopressin acetate SOLN IJ ...	45		
		DESMOPRESSIN ACETATE SOLN NA	45		

dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	35	diclofenac sodium (topical) GEL EX 38	diltiazem hcl CP12	32
dexchlorpheniramine maleate SOLN . 18		diclofenac sodium TB24	diltiazem hcl CP24	32
dexlansoprazole	63	diclofenac sodium TBEC	diltiazem hcl extended release beads	32
dexmethylphenidate hcl CP24	2	diclofenac w/ misoprostol TBEC	diltiazem hcl SOLN 50 MG/10ML ..	32
dexmethylphenidate hcl TABS	2	dicloxacillin sodium	DILTIAZEM HCL SOLR	32
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicyclomine hcl CAPS	diltiazem hcl TABS	32
dextroamphetamine sulfate CP24 5 MG	1	dicyclomine hcl SOLN OR	diltiazem hcl TB24	32
dextroamphetamine sulfate SOLN ..	1	dicyclomine hcl TABS	dimethyl fumarate CDPK	61
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1		DIFFERIN LOTN	dimethyl fumarate CPDR	61
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	DIFCID TABS	DIPENTUM	46
dextrose in lactated ringers	54	diflorasone diacetate CREA	diphenhydramine hcl CAPS 50 MG 18	
DIACOMIT CAPS 250 MG	12	diflorasone diacetate OINT	diphenhydramine hcl ELIX 12.5 MG/5ML	18
DIACOMIT CAPS 500 MG	12	diflunisal TABS	diphenhydramine hcl LIQD 12.5 MG/5ML	18
DIACOMIT PACK 250 MG	12	difluprednate	diphenhydramine hcl SOLN 50 MG/ML	18
DIACOMIT PACK 500 MG	12	digoxin SOLN OR 0.05 MG/ML	diphenoxylate w/ atropine LIQD ..	16
diazepam (anticonvulsant) GEL ...	11	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG	diphenoxylate w/ atropine TABS ..	16
diazepam CONC	8	1 MG/ML	DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP ..	63
diazepam SOLN OR 5 MG/5ML	8	53	dipyridamole	48
diazepam TABS	8	DILANTIN (phenytoin sodium extended)	disopyramide phosphate CAPS	8
diazoxide	15	12	disulfiram	60
dichlorphenamide	43	DILANTIN INFATABS CHEW (phenytoin)	divalproex sodium TB24	13
diclofenac epolamine PTCH EX ...	38	13	divalproex sodium TBEC	13
diclofenac potassium TABS 50 MG .	4	DILANTIN-125 SUSP (phenytoin) ..	docetaxel CONC 20 MG/ML	27
diclofenac sodium (actinic keratoses) EX	38	32	docetaxel SOLN 20 MG/2ML	27
diclofenac sodium (ophth)	59	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	docusate calcium	50
		180 MG, 240 MG	docusate sodium CAPS 100 MG ..	50

docusate sodium CAPS 250 MG	50	doxycycline hyclate CAPS	62	efavirenz CAPS 200 MG	30
dofetilide	8	doxycycline hyclate SOLR	62	efavirenz CAPS 50 MG	30
donepezil hydrochloride TABS 10 MG	60	doxycycline hyclate TABS 20 MG, 100 MG	62	efavirenz TABS	30
donepezil hydrochloride TABS 5 MG, 23 MG	60	doxylamine-pyridoxine TBEC	17	efavirenz-emtricitabine-tenofovir disoproxil fumarate	30
donepezil hydrochloride TBDP 10 MG	60	dronabinol CAPS	17	efavirenz-lamivudine-tenofovir disoproxil fumarate	30
donepezil hydrochloride TBDP 5 MG 60		drospirenone-ethinyl estradiol	34	EGRIFTA 2 MG	44
DOPTELET	48	drospirenone-ethinyl estradiol-levomefolate calcium	34	EGRIFTA SV	44
dorzolamide hcl	59	DROXIA CAPS	48	ELAPRASE	45
dorzolamide hcl-timolol maleate ..	57	DUAVEE	45	electrolyte-148	54
DOVATO	30	DULERA	10	electrolyte-a	54
doxazosin mesylate	20	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	14	ELESTRIN GEL	45
doxepin hcl (antipruritic)	39	duloxetine hcl CPEP 40 MG	14	eletriptan hydrobromide	53
doxepin hcl (sleep)	49	DUPIXENT SOPN 200 MG/1.14ML 41		ELIGARD KIT SC 7.5 MG	24
doxepin hcl CAPS	14	DUPIXENT SOPN 300 MG/2ML ..	41	ELIGARD SC 22.5 MG, 30 MG, 45 MG	24
doxepin hcl CONC	14	DUPIXENT SOSY 100 MG/0.67ML 41		ELIQUIS STARTER PACK TBPK ..	10
doxercalciferol CAPS	45	DUPIXENT SOSY 200 MG/1.14ML 41		ELIQUIS TABS	10
doxercalciferol SOLN	45	DUPIXENT SOSY 300 MG/2ML ..	41	ELLA	35
doxorubicin hcl liposomal	25	DUREX EXTRA SENSITIVE THIN MISC	50	ELMIRON CAPS	47
doxorubicin hcl SOLN	25	DEVI	50	ELOCTATE	48
doxorubicin hcl SOLR 10 MG, 50 MG	25	DUREX EXTRA SENSITIVE THIN MISC	50	EMCYT	24
doxycycline (monohydrate) CAPS 50 MG, 100 MG	62	DUREX TROPICAL MISC	50	EMFLAZA SUSP	36
doxycycline (monohydrate) CAPS 75 MG	62	dutasteride	47	EMFLAZA TABS (deflazacort)	36
doxycycline (monohydrate) TABS 100 MG	62	dutasteride-tamsulosin hcl	47	EMGALITY SOAJ	52
doxycycline (monohydrate) TABS 50 MG, 75 MG	62	econazole nitrate CREA	38	EMGALITY SOSY 100 MG/ML ..	52
		EDARBI	20	EMGALITY SOSY 120 MG/ML ..	52
		EDURANT	30	EMSAM	13
				emtricitabine CAPS	30
				emtricitabine-tenofovir disoproxil	

fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	30	entecavir TABS	31	erythromycin (acne aid) PADS	37
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	30	EPIDIOLEX	12	erythromycin (acne aid) SOLN	37
EMTRIVA SOLN	30	epinastine hcl (ophth)	59	erythromycin (ophth)	58
EMVERM CHEW	7	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	68	erythromycin base CPEP	50
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	68	erythromycin base TABS	50
enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		EPIVIR HBV SOLN	31	erythromycin base TBEC	50
enalapril maleate TABS	19	eplerenone	21	erythromycin ethylsuccinate SUSR 50	
ENBREL MINI SOCT	4	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	48	erythromycin ethylsuccinate TABS 50	
ENBREL SOLN	4	epoprostenol sodium	33	escitalopram oxalate SOLN	13
ENBREL SOLR	4	EQL PRENATAL FORMULA TABS 56		escitalopram oxalate TABS 10 MG 13	
ENBREL SOSY 25 MG/0.5ML	4	EQUETRO 100 MG	28	escitalopram oxalate TABS 20 MG 13	
ENBREL SOSY 50 MG/ML	4	EQUETRO 200 MG	28	escitalopram oxalate TABS 5 MG . 13	
ENBREL SURECLICK SOAJ	4	EQUETRO 300 MG	28	esomeprazole magnesium CPDR 20 MG	63
ENGERIX-B SUSP 20 MCG/ML ...	65	ERAXIS	17	esomeprazole magnesium CPDR 40 MG	64
ENGERIX-B SUSY	65	ERBITUX	24	esomeprazole magnesium TBEC	64
exoxaparin sodium SOLN IJ 300 MG/3ML	11	ergocalciferol CAPS	68	ESPEROCT	48
exoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11	ergocalciferol SOLN OR	68	estazolam	49
exoxaparin sodium SOSY 30 MG/0.3ML	11	ergoloid mesylates TABS	61	estradiol GEL 0.06 %	45
exoxaparin sodium SOSY 40 MG/0.4ML	11	ERGOMAR SUBL	53	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	45
exoxaparin sodium SOSY 60 MG/0.6ML	11	ergotamine w/ caffeine TABS	53	estradiol PTTW	45
exoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11	eribulin mesylate	27	estradiol PTWK	45
ENSPRYNG	55	ERIVEDGE	24	estradiol TABS	45
entacapone	28	ERLEADA 240 MG	24	estradiol vaginal CREA	68
		ERLEADA 60 MG	24	estradiol vaginal TABS	68
		erlotinib hcl	24	estradiol valerate	45
		ERTACZO	38		
		ertapenem sodium IJ	21		

ESTROGEL GEL (estradiol)	45	famotidine SOLN 20 MG/2ML	63	ferrous fumarate-folic acid	49
eszopiclone	49	famotidine SOLN 40 MG/4ML, 200		ferrous sulfate SOLN 15 MG/ML ..	49
ethacrynic acid	43	MG/20ML	63	ferrous sulfate TABS 65 MG, 325 MG	
ethambutol hcl TABS	23	famotidine SUSR	63	..... .....	49
ethosuximide CAPS	13	famotidine TABS 20 MG, 40 MG ..	63	ferrous sulfate TBEC 325 MG	49
ethosuximide SOLN	13	FANAPT	28	fesoterodine fumarate	64
ethynodiol diacet & eth estrad	34	FANAPT TITRATION PACK	28	FETZIMA CP24	14
etodolac CAPS	4	FANTASY LUBRICATED MISC ..	51	FETZIMA TITRATION PACK C4PK	
etodolac TABS	4	FANTASY		14	
etonogestrel-ethinyl estradiol	35	LUBRICATED/SPERMICIDE MISC		finasteride	47
ETOPOPHOS	27	51		fingolimod hcl	61
etoposide CAPS	27	FARXIGA	16	FIRDAPSE	22
etoposide SOLN 1 GM/50ML, 100		FASENRA PEN SOAJ	8	FIRMAGON	25
MG/5ML, 500 MG/25ML	27	FASENRA SOSY 30 MG/ML	8	flavoxate hcl	64
etravirine 100 MG	30	FC2 FEMALE CONDOM	51	flecainide acetate	8
etravirine 200 MG	30	febuxostat	47	floxuridine	23
EUCRISA	42	felbamate SUSP	12	FLUAD QUADRIVALENT 2021-2022	
EVAMIST SOLN	46	felbamate TABS 400 MG	12	.....	65
everolimus (immunosuppressant)		felbamate TABS 600 MG	12	FLUAD QUADRIVALENT 2022-2023	
0.25 MG, 0.5 MG, 0.75 MG	55	felodipine	32	.....	65
everolimus (immunosuppressant) 1		FEMCAP DEVI	51	FLUAD QUADRIVALENT 2023-2024	
MG	55	FEMRING	68	.....	65
everolimus TABS	26	fenofibrate micronized 43 MG, 67		FLUARIX QUADRIVALENT 2021-	
EVOTAZ	30	MG, 130 MG, 134 MG, 200 MG ..	19	2022 SUSY	65
exemestane	24	fenofibrate TABS 48 MG, 54 MG, 145		FLUARIX QUADRIVALENT 2022-	
EXTAVIA KIT	61	MG, 160 MG	19	2023 SUSY	65
ezetimibe	19	fenoprofen calcium TABS	4	FLUARIX QUADRIVALENT 2023-	
ezetimibe-simvastatin	18	FENSOLVI SC	44	2024 SUSY	65
famciclovir 125 MG, 250 MG	31	fentanyl citrate LPOP	5	FLUBLOK QUADRIVALENT 2021-	
famciclovir 500 MG	31	fentanyl PT72 12 MCG/HR, 25		2022	65
famotidine in nacl SOLN	63	MCG/HR, 50 MCG/HR, 75 MCG/HR,		FLUBLOK QUADRIVALENT 2022-	
		100 MCG/HR	5	2023	65
				FLUBLOK QUADRIVALENT 2023-	
				2024	65

FLUCELVAX QUADRIVALENT 2021-2022 SUSP	65	fluocinonide CREA 0.05 %	40	fluticasone propionate (nasal) SUSP ..	57
FLUCELVAX QUADRIVALENT 2021-2022 SUSY	65	fluocinonide CREA 0.1 %	40	fluticasone propionate CREA 0.05 %	40
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	66	fluocinonide emulsified base	40	fluticasone propionate hfa	9
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	66	fluocinonide GEL	40	fluticasone propionate LOTN	40
FLUCELVAX QUADRIVALENT 2023-2024 SUSP	66	fluocinonide OINT	40	fluticasone propionate OINT	41
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	66	fluocinonide SOLN	40	fluticasone-salmeterol AEPB 100	
fluconazole SUSR	18	fluorometholone (ophth) SUSP	58	MCG/ACT-50 MCG/ACT, 250	
fluconazole TABS	18	fluorouracil (topical) CREA 5 % ..	38	MCG/ACT-50 MCG/ACT, 500	
flucytosine	17	fluorouracil (topical) SOLN	38	MCG/ACT-50 MCG/ACT	10
fludarabine phosphate SOLN	23	fluorouracil 500 MG/10ML	23	fluticasone-salmeterol AERO	10
fludarabine phosphate SOLR	23	fluoxetine hcl CAPS 10 MG	13	fluvastatin sodium CAPS 20 MG ...	19
fludrocortisone acetate TABS	36	fluoxetine hcl CAPS 20 MG	13	fluvastatin sodium CAPS 40 MG ...	19
FLULALVAL QUADRIVALENT 2021- 2022 SUSY	66	fluoxetine hcl CAPS 40 MG	13	fluvoxamine maleate TABS 100 MG ..	
FLULALVAL QUADRIVALENT 2022- 2023 SUSY	66	fluoxetine hcl CPDR	13	fluvoxamine maleate TABS 25 MG,	
FLULALVAL QUADRIVALENT 2023- 2024 SUSY	66	fluoxetine hcl SOLN	13	50 MG	13
FLUMIST QUADRIVALENT	66	fluoxetine hcl TABS 10 MG, 60 MG		FLUZONE HIGH-DOSE PF 2021-	
flunisolide (nasal) 0.025 %	57	13	2022	66	
fluocinolone acetonide (otic)	59	fluoxetine hcl TABS 20 MG	13	FLUZONE HIGH-DOSE PF 2022-	
fluocinolone acetonide CREA 0.01 %	40	fluphenazine hcl CONC	29	2023	66
fluocinolone acetonide CREA 0.025 %	40	fluphenazine hcl ELIX	29	FLUZONE HIGH-DOSE PF 2023-	
fluocinolone acetonide OIL	40	fluphenazine hcl SOLN	29	2024	66
fluocinolone acetonide OINT	40	fluphenazine hcl TABS	29	FLUZONE QUADRIVALENT 2021-	
fluocinolone acetonide SOLN	40	flurandrenolide CREA	40	2022 SUSP	66
		flurandrenolide LOTN	40	FLUZONE QUADRIVALENT 2021-	
		flurazepam hcl	49	2022 SUSY	66
		flurbiprofen sodium	59	FLUZONE QUADRIVALENT 2022-	
		flurbiprofen TABS	4	2023 SUSP	66
		flutamide	25	FLUZONE QUADRIVALENT 2022-	
		fluticasone furoate-vilanterol	10	2023 SUSY	66
		fluticasone propionate (inhalation)		FLUZONE QUADRIVALENT 2023-	
		AEPB	9		

2024 SUSY .....	.66	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	1MCG/ML SOLR .....	.59
FML FORTE SUSP	58			GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	.59
FML OINT	58	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMUNEX-C .....	.59
folic acid TABS .....	.48			ganciclovir sodium SOLR .....	.31
fondaparinux sodium 10 MG/0.8ML 11		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	52	ganirelix acetate .....	.44
fondaparinux sodium 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML	11	frovatriptan succinate	53	GARDASIL 9 SUSP .....	.66
FORA GTEL BLOOD KETONE TEST STRIPS .....	.42	fulvestrant SOSY	25	GARDASIL 9 SUSY .....	.66
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..	.42	furosemide SOLN OR 10 MG/ML, 40 MG/5ML	43	gatifloxacin (ophth) .....	.58
formoterol fumarate NEBU	10	furosemide TABS	43	gefitinib .....	.24
FORTEO SOPN (teriparatide (recombinant))	44	FUZEON SOLR	30	gemcitabine hcl SOLR 2 GM, 200 MG .....	.23
FOSAMAX PLUS D	44	FYCOMPA TABS 2 MG	11	gemfibrozil TABS .....	.19
fosamprenavir calcium TABS	30	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
fosfomycin tromethamine	22	FYCOMPA TABS 6 MG	11	gentamicin sulfate (ophth) OINT ...	.58
fosinopril sodium & hydrochlorothiazide	20	FYCOMPA TABS 8 MG, 10 MG, 12 MG	11	gentamicin sulfate (ophth) SOLN ..	.58
fosinopril sodium	19	gabapentin CAPS	12	gentamicin sulfate (topical) CREA ..	.37
fosphenytoin sodium	13	gabapentin SOLN	12	gentamicin sulfate (topical) OINT ..	.37
FRAGMIN SOSY	11	gabapentin TABS 600 MG, 800 MG 12		gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML .....	.2
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	52	GALAFOLD	45	GENVOYA .....	.30
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	52	galantamine hydrobromide CP24 ..	60	GILOTrif .....	.24
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide SOLN ..	61	glatiramer acetate SOSY 20 MG/ML ..	
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	52	galantamine hydrobromide TABS ..	61	61	
FREESTYLE LIBRE 2/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 ..	
		GAMMAGARD LIQUID 30 GM/300ML	59	61	
		GAMMAGARD S/D IGA LESS THAN		GLEOSTINE 10 MG .....	.23
				GLEOSTINE 40 MG, 100 MG .....	.23
				glimepiride 1 MG, 2 MG .....	.16
				glimepiride 4 MG .....	.16

glipizide TABS 5 MG, 10 MG	16	guanfacine hcl (adhd)	1	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	3
glipizide TB24	16	guanfacine hcl	20	HUMIRA PEN-PS/UV STARTER PNKT	3
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	15	GYNAZOLE-1	67	HUMIRA PSKT	3
glipizide-metformin hcl 500 MG-5 MG	14	HADLIMA PUSHTOUCH SOAJ	3	HUMULIN R U-500 (CONCENTRATED) SOLN SC	16
GLUCAGEN DIAGNOSTIC	42	HADLIMA SOSY	3	HUMULIN R U-500 KWIKPEN SOPN SC	16
glucagon (rdna)	15	HAEGARDA SOLR SC	48	HYCAMTIN CAPS	27
GLUCOTROL XL TB24 (glipizide) .	16	HALAVEN (eribulin mesylate)	27	hydralazine hcl SOLN	21
glyburide micronized 1.5 MG, 3 MG, 6 MG	16	halcinonide CREA	41	hydralazine hcl TABS	21
glyburide TABS	16	halobetasol propionate CREA	41	hydrochlorothiazide CAPS	43
glyburide-metformin 250 MG-1.25 MG	15	halobetasol propionate OINT	41	hydrochlorothiazide TABS 12.5 MG 43	
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	15	HALOG OINT	41	hydrochlorothiazide TABS 25 MG, 50 MG	43
glycine (gu irrigant) SOLN 1.5 % ..	47	haloperidol decanoate	29	hydrocodone polistirex- chlorpheniramine polistirex SUER ..	36
glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML	63	haloperidol lactate CONC	29	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	6
glycopyrrolate TABS 1 MG	63	haloperidol lactate SOLN	29	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	6
glycopyrrolate TABS 2 MG	63	haloperidol TABS	29	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6
GLYNASE (glyburide micronized) ..	16	HAVRIX	66	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	6
GLYXAMBI	15	HEMANGEOL SOLN OR	32	hydrocodone-ibuprofen 7.5 MG-200 MG	6
GNP PRENATAL TABS	56	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	11	hydrocodone (intrarectal)	7
GOJJI BLOOD KETONE TEST STRIPS	42	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11		hydrocodone (rectal) EX	7
granisetron hcl SOLN IV 1 MG/ML	17	HEPLISAV-B SOSY	66		
granisetron hcl TABS	17	HIBERIX SOLR IJ	64		
GRASTEK SUBL	2	HUMATROPE CART IJ	44		
griseofulvin microsize SUSP	17	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT ..	3		
griseofulvin microsize TABS	18	HUMIRA PEN PNKT 80 MG/0.8ML	3		
griseofulvin ultramicrosize	18	HUMIRA PEN PNKT	3		
		HUMIRA PEN-CD/UC/HS STARTER PNKT	3		

hydrocortisone (topical) CREA 1 %, 2.5 %	41	hydroxyzine pamoate CAPS	8	INCRELEX	44
hydrocortisone (topical) LOTN 2.5 % ..	41	HYPERSAL NEBU	36	INCRUSE ELLIPTA	9
hydrocortisone (topical) OINT 1 %, 2.5 %	41	HYQVIA	60	indapamide TABS 1.25 MG	43
hydrocortisone acetate (rectal)	7	ibandronate sodium SOLN	44	indapamide TABS 2.5 MG	43
hydrocortisone butyrate CREA	41	ibandronate sodium TABS	44	indomethacin CAPS 25 MG, 50 MG	4
hydrocortisone butyrate OINT	41	IBRANCE CAPS	26	indomethacin CPCR	4
hydrocortisone butyrate SOLN	41	IBRANCE TABS	26	INFANRIX	63
hydrocortisone TABS	36	ibuprofen SUSP 100 MG/5ML	4	INFLECTRA SOLR	46
hydrocortisone vaginal	67	ibuprofen TABS 400 MG, 600 MG ..	4	INGREZZA CAPS	61
hydrocortisone valerate CREA	41	ibuprofen TABS 800 MG	4	INGREZZA CPPK	61
hydrocortisone valerate OINT	41	icatibant acetate SOLN	48	INLYTA	24
hydrocortisone w/acetic acid	59	icatibant acetate SOSY	48	INREBIC	26
hydromorphone hcl LIQD	5	icosapent ethyl 1 GM	18	INSULIN ASPART FLEXPEN SOPN .	
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	5	idarubicin hcl 20 MG/20ML	25	16 INSULIN ASPART PENFILL SOCT	
hydromorphone hcl TABS	5	idarubicin hcl 5 MG/5ML, 10 MG/10ML	25	16 INSULIN ASPART PROTAMINE/INSULIN ASPART	
hydromorphone hcl TB24 32 MG ...	5	IDELVION	48	16 FLEXPEN SUPN	
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	5	ifosfamide SOLN 1 GM/20ML	23	16 INSULIN ASPART PROTAMINE/INSULIN ASPART	
hydroxychloroquine sulfate 100 MG		ifosfamide SOLR	23	SUSP	
22		imatinib mesylate	26	16 INSULIN ASPART SOLN IJ	
hydroxychloroquine sulfate 200 MG		IMBRUVICA CAPS 140 MG	26	16 INSULIN DEGLUDEC FLEXTOUCH	
22		IMBRUVICA CAPS 70 MG	26	SOPN	
hydroxychloroquine sulfate 400 MG		IMBRUVICA SUSP	26	16 INSULIN DEGLUDEC SOLN	
22		IMBRUVICA TABS	26	30 INTELENCE 25 MG	
hydroxyurea	27	imipenem-cilastatin IV	21	67 INTRAROSA	
hydroxyzine hcl SOLN 50 MG/ML ..	8	imipramine hcl TABS	14	27 INTRON A SOLR 18000000 UNIT	
hydroxyzine hcl SYRP	8	imipramine pamoate	14	54 IONOSOL-MB/DEXTROSE 5% ..	
hydroxyzine hcl TABS	8	imiquimod 5 %	41	58 IOPIDINE	
		IMPAVIDO	21	66 IPOL INACTIVATED IPV	

ipratropium bromide (nasal) 0.03 %	ivermectin	7	KEVZARA SOAJ	3
57	IXEMPRA KIT 15 MG	27	KEVZARA SOSY	3
ipratropium bromide (nasal) 0.06 %	JAKAFI	26	KIMONO COLORS DEVI	51
57	JANUMET TABS	15	KIMONO LUBRICATED MISC	51
ipratropium bromide SOLN 0.02 %	JANUMET XR TB24 1000 MG-100		KIMONO MAXX/LARGE FLARE	
.9	MG	15	MISC	51
ipratropium-albuterol SOLN	JANUMET XR TB24 1000 MG-50		KIMONO MICRO THIN PLUS	
10	MG, 500 MG-50 MG	15	SPERMICIDE LUBRICATED MISC	
irbesartan	JANUVIA	15	51	
irbesartan-hydrochlorothiazide	JARDIANCE	16	KIMONO PLUS SPERMICIDE	
20	JEVTANA	27	LUBRICATED MISC	51
IRESSA (gefitinib)	JIVI	48	KIMONO PLUS	
24	JULUCA	30	SPERMICIDE/LUBRICATED MISC	
irinotecan hcl 40 MG/2ML, 100	KALYDECO TABS	62	51	
MG/5ML	KAMELEON LUBRICATED MISC	.51	KIMONO PS LUBRICATED MISC	.51
irrigation solutions, physiological ..	KANJINTI	24	KIMONO PS PLUS	
.55	KCL 0.3%/D5W/NACL 0.9%		SPERMICIDE/LUBRICATED MISC	
ISENTRESS CHEW	(potassium chloride in dextrose &		51	
30	sodium chloride)	54	KIMONO SENSATION	
ISENTRESS HD TABS	KEPIVANCE 6.25 MG	27	LUBRICATED MISC	51
30	KESIMPTA	61	KIMONO SENSATION PLUS	
ISENTRESS TABS	ketoconazole (topical) CREA	38	SPERMICIDE LUBRICATED MISC	
30	ketoconazole (topical) SHAM 2 %	.38	51	
ISOLYTE-P/DEXTROSE 5%	ketoconazole	18	KIMONO SPECIAL DEVI	51
.54	KETONE STRP	42	KINRIX SUSY	63
ISOLYTE-S	KETONE TEST STRIPS STRP	42	KISQALI	26
.54	ketoprofen CAPS 50 MG	4	KISQALI FEMARA 200 DOSE	25
isoniazid SOLN	ketorolac tromethamine (ophth) ..	59	KISQALI FEMARA 400 DOSE	25
23	ketorolac tromethamine TABS	4	KISQALI FEMARA 600 DOSE	25
isoniazid SYRP	KETOSTIX STRP	42	KLARITY-A	58
23	ketotifen fumarate (ophth) 0.035 %		KOGENATE FS KIT	48
isoniazid TABS	59		KOSELUGO	26
23			KOVALTRY	48
isosorbide dinitrate TABS 5 MG, 10			KP PRENATAL MULTIVITAMINS	
MG, 20 MG, 30 MG				
8				
isosorbide dinitrate-hydralazine hcl				
33				
isosorbide mononitrate TABS				
8				
isosorbide mononitrate TB24				
8				
isotretinoin 10 MG, 20 MG, 30 MG,				
40 MG				
37				
isradipine CAPS				
32				
itraconazole CAPS				
18				
itraconazole SOLN				
18				
ivermectin (pediculicide)				
42				

TABS	56	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	33	levalbuterol tartrate	10
KRINTAFEL	22			LEVEMIR FLEXPEN SOPN	16
K-Y ME & YOU EXTRA LUBRICATED DEVI	51	lansoprazole CPDR 15 MG	64	LEVEMIR FLEXTOUCH SOPN	16
K-Y ME & YOU INTENSE DEVI	51	lansoprazole CPDR 30 MG	64	LEVEMIR SOLN	16
KYPROLIS	26	lapatinib ditosylate	26	levetiracetam SOLN IV 500 MG/5ML 12	
labetalol hcl SOLN	31	LASTACRAFT	59	levetiracetam TABS 1000 MG	12
labetalol hcl TABS 100 MG, 200 MG . 32		latanoprost SOLN	59	levetiracetam TABS 250 MG, 500 MG, 750 MG	12
labetalol hcl TABS 300 MG	31	LEDIPASVIR/SOFOSBUVIR TABS 31		levetiracetam TB24	12
lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML	12	leflunomide	4	levobunolol hcl 0.5 %	57
lacosamide TABS	12	lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	55	levocetirizine dihydrochloride SOLN 18	
lactated ringer's (irrigation)	55	lenalidomide 20 MG	55	levocetirizine dihydrochloride TABS 18	
lactated ringer's	54	LENVIMA 10 MG DAILY DOSE ..	24	levofloxacin (ophth) 0.5 %	58
lactic acid (ammonium lactate) CREA	41	LENVIMA 12MG DAILY DOSE ..	24	levofloxacin in d5w 5 %-500 MG/100ML	46
lactic acid (ammonium lactate) LOTN 12 %	41	LENVIMA 14 MG DAILY DOSE ..	24	levofloxacin SOLN OR	46
lactulose (encephalopathy)	46	LENVIMA 18 MG DAILY DOSE ..	24	levofloxacin TABS 250 MG, 750 MG ..	
lactulose SOLN	50	LENVIMA 20 MG DAILY DOSE ..	24	46	
lamivudine (hbv) TABS	31	LENVIMA 24 MG DAILY DOSE ..	24	levofloxacin TABS 500 MG	46
lamivudine SOLN	30	LENVIMA 4 MG DAILY DOSE ..	24	levonorgestrel & eth estradiol TABS 34	
lamivudine TABS 150 MG	30	LENVIMA 8 MG DAILY DOSE ..	24	levonorgestrel (emergency oc) 1.5 MG	35
lamivudine TABS 300 MG	30	letrozole	25	levonorgestrel-eth estradiol (triphasic)	34
lamivudine-zidovudine	30	leucovorin calcium SOLR	27	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	34
lamotrigine CHEW 25 MG	12	leucovorin calcium TABS	27	levonorgestrel-ethinyl estradiol (continuous)	35
lamotrigine CHEW 5 MG	12	LEUKERAN	23	levonorgestrel-ethinyl estradiol-iron 35	
lamotrigine TABS	12	LEUKINE SOLR IJ	48		
lamotrigine TB24	12	leuprolide acetate KIT IJ 1 MG/0.2ML	25		
lamotrigine TBDP	12	levalbuterol hcl	10		
LANOXIN SOLN IJ (digoxin)	33	levalbuterol hcl 1.25 MG/0.5ML	10		

levorphanol tartrate TABS 2 MG	5	lopinavir-ritonavir SOLN	30	LUPRON DEPOT (4-MONTH) IM ..	25
levothyroxine sodium TABS	63	lopinavir-ritonavir TABS	30	LUPRON DEPOT (6-MONTH) IM ..	25
LEXIVA SUSP	30	loratadine CAPS	18	LUPRON DEPOT-PED (1-MONTH) ..	
lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	50	loratadine CHEW	18	44	
lidocaine hcl (mouth-throat) 2 % ..	55	loratadine SOLN	18	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	44
lidocaine hcl (mouth-throat) 4 % ..	55	loratadine TABS	18	LUPRON DEPOT-PED (3-MONTH) 30 MG	44
lidocaine hcl GEL 2 %	41	loratadine TBDP	18	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	28
lidocaine hcl PRSY	41	lorazepam CONC	8	lurasidone hcl 80 MG	28
lidocaine hcl SOLN	41	lorazepam TABS 0.5 MG, 2 MG ..	8	LYNPARZA TABS	26
lidocaine PTCH 5 %	42	lorazepam TABS 1 MG	8	LYSODREN	25
lidocaine-prilocaine CREA	42	LORBRENA	26	mafенide acetate PACK	39
lincomycin hcl	21	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20	magnesium sulfate IJ 50 %	54
linezolid SUSR	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG ..		malathion	42
linezolid TABS	22	20		maraviroc TABS 150 MG	30
LINZESS	46	losartan potassium	20	maraviroc TABS 300 MG	30
liothyronine sodium SOLN	63	LOTEMAX OINT	58	MARPLAN	13
liothyronine sodium TABS	63	loteprednol etabonate GEL	58	MASONATAL TABS	56
lisdexamfetamine dimesylate CAPS 1 1		loteprednol etabonate SUSP	58	MATULANE	27
lisdexamfetamine dimesylate CHEW ..		lovastatin TABS 10 MG, 20 MG ..	19	MAXIDEX SUSP OP	58
lisinopril & hydrochlorothiazide ..	20	lovastatin TABS 40 MG	19	MAXX LUBRICATED MISC	51
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	19	loxapine succinate	29	MAXX PLUS SPERMICIDE LUBRICATED MISC	51
lithium	28	lubiprostone	46	meclizine hcl TABS 12.5 MG	17
lithium carbonate CAPS	28	LUCEMYRA	60	meclizine hcl TABS 25 MG	17
lithium carbonate TABS	28	luliconazole	38	meclofenamate sodium CAPS	4
lithium carbonate TBCR	28	LUMIZYME	45	MEDROL TABS	36
LO LOESTRIN FE TABS	35	LUPRON DEPOT (1-MONTH) KIT IM	25	medroxyprogesterone acetate (contraceptive) SUSP IM	35
LOKELMA	55	LUPRON DEPOT (3-MONTH) KIT IM	25	medroxyprogesterone acetate	
loperamide hcl CAPS	16	.....		

(contraceptive) SUSY IM	35	mesalamine ENEM	46	methotrexate sodium TABS 2.5 MG 23	
medroxyprogesterone acetate 10 MG	60	mesalamine SUPP	46	methoxsalen rapid	39
medroxyprogesterone acetate 2.5 MG, 5 MG	60	mesalamine TBEC 1.2 GM	46	methscopolamine bromide	63
mefenamic acid CAPS	4	mesalamine TBEC 800 MG	46	methsuximide	13
mefloquine hcl	22	metaxalone 800 MG	57	methyldopa TABS	20
megestrol acetate (appetite)	60	metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW	2
megestrol acetate SUSP	25	metformin hcl TABS 500 MG	15	methylphenidate hcl CP24 10 MG, 60 MG	2
megestrol acetate TABS	25	metformin hcl TABS 850 MG	15	methylphenidate hcl CP24 20 MG, 40 MG	2
MEKINIST TABS	26	metformin hcl TB24 500 MG	15	methylphenidate hcl CP24 30 MG	2
MEKTOVI	26	metformin hcl TB24 750 MG	15	methylphenidate hcl CPCR	2
meloxicam TABS	4	methadone hcl CONC	5	methylphenidate hcl SOLN	2
melphalan	23	methadone hcl SOLN IJ 10 MG/ML ..	5	methylphenidate hcl TABS	2
melphalan hcl IV	23	METHADONE HCL SOLN IJ	5	methylphenidate hcl TB24 18 MG, 27 MG	2
memantine hcl TABS	61	methadone hcl SOLN OR 10 MG/5ML ..	5	methylphenidate hcl TB24 36 MG, 54 MG	2
MENACTRA	64	methadone hcl SOLN OR 5 MG/5ML ..	5	methylphenidate hcl TBCR 10 MG, 20 MG	2
MENEST	46	methadone hcl TABS 10 MG	5	methylphenidate hcl TBCR 18 MG, 27 MG	2
MENOSTAR PTWK	46	methadone hcl TABS 5 MG	5	methylphenidate hcl TBCR 36 MG, 54 MG	2
MENQUADFI	64	methadone hcl TBSO	5	methylphenidate hcl PTCH	2
MENVEO SOLR	64	methamphetamine hcl	1	methylprednisolone acetate SUSP	36
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5	methazolamide TABS	43	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	36
meperidine hcl SOLN OR 50 MG/5ML	5	methenamine hippurate	22	methylprednisolone TABS	36
meperidine hcl TABS 50 MG	5	methimazole TABS	62	methylprednisolone TBPK	36
meprobamate	8	METHITEST TABS	7	metoclopramide hcl SOLN IJ 5	
mercaptopurine TABS	23	methocarbamol TABS 500 MG, 750 MG	57		
meropenem	21	METHOTREXATE	3		
mesalamine CP24	46	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	23		
mesalamine CPDR	46	methotrexate sodium SOLR	23		

MG/ML	46	minocycline hcl TABS	62	morphine sulfate SOLN OR 10	
metoclopramide hcl SOLN OR 5		minoxidil 2.5 MG, 10 MG	21	MG/5ML	5
MG/5ML, 10 MG/10ML	46	MIRCERA	49	morphine sulfate SOLN OR 20	
metoclopramide hcl TABS	46	mirtazapine TABS	13	MG/5ML	5
metolazone	43	mirtazapine TBDP	13	morphine sulfate TABS	5
metoprolol & hydrochlorothiazide		misoprostol	64	morphine sulfate TBCR	5
TABS 25 MG-100 MG, 50 MG-100		mitomycin SOLR IV 20 MG	25	MOTOFEN	16
MG	20	mitoxantrone hcl 2 MG/ML	25	MOVANTIK	47
metoprolol & hydrochlorothiazide		M-M-R II SOLR	66	moxifloxacin hcl (ophth) SOLN OP	58
TABS 25 MG-50 MG	20	M-NATAL PLUS TABS	56	moxifloxacin hcl in sodium chloride	
metoprolol succinate TB24 200 MG		modafinil 100 MG	2	46	
32		modafinil 200 MG	2	moxifloxacin hcl TABS	46
metoprolol succinate TB24 25 MG,		MODERNA COVID-19 VACCINE		MOZOBIL (plerixafor)	49
50 MG, 100 MG	32	SUSP	67	MULPLETA	49
metoprolol tartrate SOLN IV 5		MODERNA COVID-19		MULTI PRENATAL TABS	56
MG/5ML	32	VACCINE/6MO-11Y/2023-24 SUSP .		mupirocin OINT	37
metoprolol tartrate TABS 25 MG, 50		67		MVASI	24
MG, 100 MG	32	MODERNA COVID-19		MYALEPT	45
metronidazole (topical) CREA	42	VACCINE6MO-5Y SUSP	67	mycophenolate mofetil CAPS	55
metronidazole (topical) GEL 0.75 %		moexipril hcl	19	mycophenolate mofetil TABS	55
42		mometasone furoate (nasal) SUSP		mycophenolate sodium	55
metronidazole (topical) GEL 1 % ..	42	57		MYLERAN TABS	23
metronidazole (topical) LOTN	42	mometasone furoate CREA	41	nabumetone	4
metronidazole TABS	21	mometasone furoate OINT	41	nadolol TABS 20 MG	32
metronidazole vaginal	67	mometasone furoate SOLN	41	nadolol TABS 40 MG	32
mexiletine hcl	8	montelukast sodium CHEW	9	nadolol TABS 80 MG	32
micafungin sodium	17	montelukast sodium PACK	9	nafcillin sodium IV 10 GM	60
miconazole nitrate vaginal SUPP 200		montelukast sodium TABS	9	naftifine hcl CREA 1 %	38
MG	67	morphine sulfate CP24 10 MG, 20		naftifine hcl CREA 2 %	38
midodrine hcl	68	MG, 30 MG, 50 MG, 60 MG, 80 MG,		NAGLAZYME	45
miglitol	14	100 MG	5	nalbuphine hcl	7
miglustat	48	morphine sulfate SOLN IJ 0.5			
minocycline hcl CAPS	62	MG/ML, 1 MG/ML	5		

naloxone hcl LIQD	17	MG-1200 MCG-2 MG-0.2 MG	56	SYSTEM KIT	62
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	17	NEONATAL PLUS TABS	56	NICOTROL INHALER INHA	62
naltrexone hcl	17	NEONATAL PRENATAL VITAMIN TABS	56	NICOTROL NS SOLN	62
naproxen sodium TABS 550 MG ...	4	NEONATAL VITAMIN TABS	56	nifedipine CAPS 10 MG	32
naproxen SUSP	4	neostigmine methylsulfate SOSY ..	23	nifedipine CAPS 20 MG	32
naproxen TABS	4	NEO-SYNALAR	37	nifedipine TB24 60 MG	32
naproxen TBEC 500 MG	4	NEUPRO	28	nifedipine TB24 90 MG	32
naratriptan hcl	53	NEVANAC	59	nifedipine TB24	32
NATACYN	58	nevirapine SUSP	30	nilutamide	25
NATAZIA	35	nevirapine TABS	30	nimodipine CAPS	32
nateglinide	16	nevirapine TB24 100 MG	30	NINLARO	26
NAYZILAM	11	nevirapine TB24 400 MG	30	NIPENT	27
nebivolol hcl 2.5 MG, 5 MG, 10 MG 32		NEXIUM 24HR TBEC (esomeprazole magnesium)	64	nisoldipine	32
nebivolol hcl 20 MG	32	NEXTSTELLIS	35	nitazoxanide TABS	21
NEBUSAL NEBU	36	niacin (antihyperlipidemic) TBCR ..	19	nitisinone CAPS	45
nefazodone hcl	14	niacin CPCR 250 MG, 500 MG	68	NITRO-BID OINT	8
nelarabine	23	niacin TABS	68	nitrofurantoin	22
neomycin sulfate TABS	2	niacin TBCR	68	nitrofurantoin macrocrystal 50 MG, 100 MG	22
neomycin-bacitracin zn-polymyxin	58	NIACIN TR TBCR	68	nitrofurantoin monohyd macro	22
neomycin-polmy-dexameth OINT	58	niacinamide TABS 100 MG	68	nitroglycerin (intra-anal)	7
neomycin-polmy-dexameth SUSP	58	niacinamide TABS 500 MG	68	nitroglycerin CPCR	8
neomycin-polmyxin-hc (ophth)	58	nicardipine hcl CAPS	32	nitroglycerin PT24	8
neomycin-polmyxin-hc (otic) SOLN	59	nicardipine hcl SOLN	32	NITROGLYCERIN SOLN IV	8
neomycin-polmyxin-hc (otic) SUSP	59	nicotine MISC XX	62	nitroglycerin SUBL	8
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		nicotine polacrilex GUM	62	NIVA-PLUS TABS	56
		nicotine polacrilex LOZG	62	nizatidine CAPS	63
		nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	62	NORDITROPIN FLEXPRO SOPN 30 MG/3ML	44
		NICOTINE TRANSDERMAL		NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15	

MG/1.5ML	44	NOVOEIGHT	48	ODEFSEY	30
norelgestromin-ethinyl estradiol ..	35	NOVOLIN 70/30 FLEXPEN SUPN	16	ODOMZO	24
norethin acet & estrad-fe CAPS ..	35	NOVOLIN 70/30 SUSP	16	OFEV	62
norethin acet & estrad-fe CHEW ..	35	NOVOLIN N FLEXPEN SUPN	16	ofloxacin (ophth)	58
norethin acet & estrad-fe TABS 1		NOVOLIN N SUSP	16	ofloxacin (otic)	59
MG-20 MCG-75 MG, 1.5 MG-30		NOVOLIN R FLEXPEN SOPN IJ ..	16	ofloxacin 300 MG, 400 MG	46
MCG-75 MG	35	NOVOLIN R SOLN IJ	16	OGIVRI	24
norethindrone & eth estradiol ..	35	NOXAFIL SUSP (posaconazole) ..	18	olanzapine SOLR	29
norethindrone & ethinyl estradiol-fe	35	NP THYROID 120 TABS	63	olanzapine TABS 15 MG, 20 MG ..	29
norethindrone (contraceptive) ..	35	NP THYROID 15 TABS	63	olanzapine TABS 2.5 MG, 5 MG, 7.5	
norethindrone acet & eth estra ..	35	NP THYROID 30 TABS	63	MG, 10 MG	29
norethindrone acetate TABS	60	NP THYROID 60 TABS	63	olanzapine TBDP 20 MG	29
norethindrone acetate-ethinyl		NP THYROID 90 TABS	63	olanzapine TBDP 5 MG, 10 MG, 15	
estradiol	45	NUBEQA	25	MG	29
norethindrone acetate-ethinyl		NUCALA SOAJ	9	olmesartan medoxomil	20
estradiol-fe	35	NUCALA SOLR	9	olmesartan medoxomil-amlodipine-	
norethindrone-eth estradiol (triphasic)	35	NUCALA SOSY 100 MG/ML	9	hydrochlorothiazide	20
.....		NUCALA SOSY 40 MG/0.4ML	9	olmesartan medoxomil-	
norgestimate-ethinyl estradiol		NUCYNTA ER TB12	5	hydrochlorothiazide	20
(triphasic)	35	NUCYNTA TABS	6	olopatadine hcl (nasal)	57
norgestimate-ethinyl estradiol ..	35	NUEDEXTA	61	olopatadine hcl 0.1 %	59
norgestrel & ethinyl estradiol 30		NULOJIX	55	olopatadine hcl 0.2 %	59
MCG-0.3 MG	35	nystatin (mouth-throat)	55	omega-3-acid ethyl esters	18
NORMOSOL-M/D5W	54	nystatin (topical) CREA	38	omeprazole CPDR	64
NORMOSOL-R	54	nystatin (topical) OINT	38	omeprazole magnesium CPDR ..	64
nortriptyline hcl CAPS	14	nystatin (topical) POWD EX	38	omeprazole TBEC	64
nortriptyline hcl SOLN	14	nystatin TABS	18	omeprazole-sodium bicarbonate	
NORVIR CAPS	30	nystatin-triamcinolone CREA	38	CAPS 1100 MG-20 MG	64
NORVIR PACK	30	nystatin-triamcinolone OINT	38	OMNIFLEX DIAPHRAGM	51
NORVIR SOLN	30	octreotide acetate SOLN	45	ONCASPAR	27
NOVA MAX PLUS KETONE		17	ondansetron hcl SOLN IJ 4 MG/2ML ..		
TESTSTRIPS	42				

ondansetron hcl SOLN OR 4 MG/5ML	17	MG/20ML	23	paliperidone 6 MG	28
ondansetron hcl SOSY	17	oxandrolone	7	palonosetron hcl SOLN	17
ondansetron hcl TABS 24 MG	17	oxaprozin TABS	4	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	44
ondansetron hcl TABS 4 MG	17	oxazepam CAPS	8	PAMIDRONATE DISODIUM SOLN 44	
ondansetron hcl TABS 8 MG	17	OXBRYTA TABS 500 MG	48	PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200	
ondansetron TBDP 4 MG	17	oxcarbazepine SUSP	12	UNIT-8800 UNIT-2600 UNIT, 24600	
ondansetron TBDP 8 MG	17	oxcarbazepine TABS 150 MG, 300 MG	12	UNIT-14200 UNIT-4200 UNIT, 61500	
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	56	oxcarbazepine TABS 600 MG	12	UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000	
ONE VITE WOMENS PRENATALVITAMIN TABS	56	oxiconazole nitrate CREA	38	UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	43
ONETOUCH DELICA SAFETY LANCING DEVICE	52	OXISTAT LOTN	38	PANRETIN	38
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	52	oxybutynin chloride SOLN	64	pantoprazole sodium TBEC 20 MG	
OPILL	35	oxybutynin chloride TABS 5 MG	64	oxybutynin chloride TB24	64
OPSUMIT	33	oxybutynin chloride TB24	64	oxybutynin chloride 40 MG, 80 MG	6
ORENITRAM TBCR	33	oxycodone hcl w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6	paricalcitol CAPS	45
ORILISSA	44	oxycodone hcl w/ acetaminophen TABS 325 MG-2.5 MG	6	paricalcitol SOLN	45
ORKAMBI PACK	62	oxymorphone hcl TABS	6	paroxetine hcl SUSP	13
ORKAMBI TABS	62	oxymorphone hcl TB12 40 MG	6	paroxetine hcl TABS 10 MG, 20 MG, 40 MG	14
ORLADEYO	48	oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG	6	paroxetine hcl TABS 30 MG	14
orphenadrine citrate TB12	57	OZEMPIC SOPN 2 MG/1.5ML	15	paroxetine hcl TB24 12.5 MG	14
oseltamivir phosphate CAPS	31	OZEMPIC SOPN	15	paroxetine hcl TB24 25 MG, 37.5 MG	14
oseltamivir phosphate SUSR	31	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML	27	PASER PACK	23
OSMOPREP	50	paclitaxel protein-bound particles	27	pazopanib hcl	26
OSPHENA	44	paliperidone 1.5 MG, 3 MG, 9 MG	28	PEDIARIX SUSY	63
OTEZLA TABS	4	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	50	PEDVAX HIB SUSP	64
OTEZLA TBPK	4	peg 3350-kcl-sod bicarb-sod			
oxacillin sodium IV 10 GM	60				
oxaliplatin SOLN 50 MG/10ML, 100					

chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM	PERSERIS PRSY	28	pilocarpine hcl (oral)	56
.....50	PFIZER-BIONTECH COVID-19VACCINE SUSP	67	pilocarpine hcl SOLN 1 %, 2 %, 4 % .	
peg 3350-potassium chloride-sod bicarbonate-sod chloride	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	67	pimecrolimus	41
PEGASYS SOLN	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	67	pimozide	61
PEGASYS SOSY	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	67	pindolol TABS	32
PEMAZYRE	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	67	pioglitazone hcl	16
pemetrexed disodium SOLR 500 MG 24	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP ..	67	pioglitazone hcl-glimepiride	15
penciclovir	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP ..	67	pioglitazone hcl-metformin hcl TABS .	
penicillamine CAPS	PHEBURANE PLLT	45	piperacillin sodium-tazobactam sodium	60
penicillamine TABS	phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	47	PIQRAY 200MG DAILY DOSE ...	26
penicillin g potassium 5000000 UNIT 60	phendimetrazine tartrate TABS	1	PIQRAY 250MG DAILY DOSE ...	26
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	phenelzine sulfate	13	PIQRAY 300MG DAILY DOSE ...	26
PENICILLIN G PROCAINE	phenobarbital ELIX	49	pirfenidone CAPS	62
penicillin g sodium	phenobarbital TABS	49	pirfenidone TABS 267 MG, 801 MG	
penicillin v potassium SOLR	phenoxybenzamine hcl	20	62	
penicillin v potassium TABS	phentermine hcl CAPS	1	pirfenidone TABS 534 MG	62
PENTACEL	phenytoin CHEW	13	piroxicam CAPS	4
pentazocine w/ naloxone hcl	phenytoin sodium extended 100 MG, 200 MG, 300 MG	13	PLASMA-LYTE A (electrolyte-a) ..	54
pentoxifylline	phenytoin sodium SOLN	13	PLASMA-LYTE-148 (electrolyte-148)	
perindopril erbumine 2 MG, 8 MG .	phenytoin SUSP	13	54	
19	PHEXXI	67	PLEGRIDY SOPN	61
perindopril erbumine 4 MG	PHOSLYRA SOLN	47	PLEGRIDY SOSY SC	61
19	PHOTOFRIN	27	PLEGRIDY STARTER PACK SOPN .	
PERJETA	PIFELTRO	30	61	
24	plerixafor	49	PLEGRIDY STARTER PACK SOSY	
permethrin CREA	SC	61	SC	
42	PNEUMOVAX 23	64		
permethrin LIQD EX	PNEUMOVAX 23/1 DOSE	64		
42				
perphenazine TABS				
29				
perphenazine-amitriptyline				
61				

podofilox SOLN	41	CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	54	prednisone TABS 1 MG, 5 MG	36
polymyxin b sulfate SOLR	22	potassium citrate (alkalinizer) TBCR .		prednisone TABS 2.5 MG, 10 MG, 20	
polymyxin b-trimethoprim	58	47		MG, 50 MG	36
POMALYST	25	potassium phosphates 236 MG/ML-		prednisone TBPK	36
posaconazole SUSP	18	224 MG/ML	54	pregabalin (once-daily) 330 MG ...	61
potassium acetate SOLN 2 MEQ/ML .		PR BENZOYL PEROXIDE WASH		pregabalin (once-daily) 82.5 MG, 165	
54		LIQD	37	MG	61
potassium bicarbonate TBEF	54	pralatrexate 20 MG/ML	24	pregabalin CAPS 225 MG, 300 MG	
potassium chloride CPCR	54	pramipexole dihydrochloride TABS		12	
potassium chloride in dextrose &		0.125 MG	28	pregabalin CAPS 25 MG, 50 MG, 75	
sodium chloride 5 %-0.075 %-0.45		pramipexole dihydrochloride TABS		MG, 100 MG, 150 MG, 200 MG ...	12
%, 5 %-0.15 %-0.9 %, 5 %-10		0.25 MG, 0.5 MG, 0.75 MG, 1 MG,		pregabalin SOLN	12
MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2		1.5 MG	28	PREHEVBRIO	67
%, 5 %-20 MEQ/L-0.45 %, 5 %-20		prasugrel hcl	48	PREMARIN	68
MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45		pravastatin sodium	19	PREMARIN SOLR	46
%, 5 %-40 MEQ/L-0.45 %, 5 %-40		praziquantel	7	PREMARIN TABS	46
MEQ/L-0.9 %	54	prazosin hcl CAPS	20	PREMIUM CONDOMS	
potassium chloride in dextrose 5 %-		PRECISION XTRA	42	LUBRICATED MISC	51
20 MEQ/L	54	PRED MILD	58	PREMPHASE	45
potassium chloride in nacl 20 MEQ/L-		PRED-G SUSP	58	PREMPRO	45
0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-		prednicarbate OINT	41	PRENATAL MULTIVITAMIN TABS	
0.9 %	54	prednisolone acetate (ophth)	59	56	
potassium chloride		PREDNISOLONE SODIUM		PRENATAL ONE DAILY TABS ...	56
microencapsulated crystals er	54	PHOSPHATE	59	PRENATAL PLUS TABS	56
potassium chloride PACK OR 20		prednisolone sodium phosphate		PRENATAL PLUS VITAMIN	
MEQ	54	SOLN 5 MG/5ML, 6.7 MG/5ML, 10		ANDMINERAL TABS	56
POTASSIUM CHLORIDE SOLN IV		MG/5ML, 15 MG/5ML, 25 MG/5ML		PRENATAL TABS	56
10 MEQ/50ML (potassium chloride)		36		PRENATAL VITAMIN & MINERAL	
54		prednisolone sodium phosphate		TABS	56
potassium chloride SOLN IV 2		TBDP	36	PRENATAL VITAMIN TABS	56
MEQ/ML, 10 MEQ/50ML, 20		prednisolone SOLN	36	PRENATAL VITAMIN/IRON TABS	56
MEQ/50ML	54	prednisolone TABS	36	PRENATAL VITAMINS PLUS LOW	
potassium chloride TBCR	54	prednisone SOLN	36	IRON TABS	56
POTASSIUM					
CHLORIDE/DEXTROSE/LACTATED					
RINGERS	54				
POTASSIUM CHLORIDE/SODIUM					

PRENATAL VITAMINS TABS 120	PROLEUKIN	27	QUADRACEL SUSP	63
MG-2.6 MG-800 MCG-400 UNIT-8	PROLIA SOSY	44	QUADRACEL SUSY	63
MCG-1.7 MG-20 MG-28 MG-200	PROMACTA PACK	49	quazepam	49
MG-1.8 MG-25 MG-4000 UNIT-30	PROMACTA TABS	49	quetiapine fumarate TABS 25 MG, 50	50
UNIT	promethazine hcl SOLN OR 6.25		MG, 100 MG, 200 MG, 300 MG, 400	
PRENATRIX TABS	MG/5ML	18	MG	29
PRENATRYL TABS	promethazine hcl SUPP 12.5 MG, 25		quetiapine fumarate TB24 300 MG,	
PREVNAR 13	MG	18	400 MG	29
PREVNAR 20	promethazine hcl SUPP 50 MG ...	18	quetiapine fumarate TB24 50 MG,	
PREZCOBIX	promethazine hcl TABS	18	150 MG, 200 MG	29
PREZISTA SUSP	propafenone hcl CP12	8	quinapril hcl 20 MG, 40 MG	19
PREZISTA TABS (darunavir)	propafenone hcl TABS	8	quinapril hcl 5 MG, 10 MG	19
PREZISTA TABS 75 MG, 150 MG,	proparacaine hcl	58	quinapril-hydrochlorothiazide	20
600 MG	propranolol hcl CP24	32	quinidine sulfate TABS	8
PREZISTA TABS 800 MG	propranolol hcl SOLN OR 20		quinine sulfate CAPS 324 MG	22
(darunavir)	MG/5ML, 40 MG/5ML	32	QUZYTIR SOLN IV	18
PRIFTIN	propranolol hcl TABS	32	QVAR REDIHALER	9
primaquine phosphate TABS	propylthiouracil	62	RA PRENATAL	
primidone 50 MG, 250 MG	protriptyline hcl	14	FORMULA/FOLICACID TABS	56
PRIORIX SUSR	PTS PANELS KETONE TEST	42	RA PRENATAL TABS	56
probenecid	PULMICORT FLEXHALER AEPB ..	9	rabeprazole sodium TBEC	64
procainamide hcl SOLN 500 MG/ML .	PULMOZYME	62	raloxifene hcl	44
8	PX PRENATAL MULTIVITAMINS		ramelteon	49
prochlorperazine	TABS	56	ramipril CAPS	19
prochlorperazine maleate TABS ..	pyrazinamide	23	ranitidine hcl TABS 150 MG	63
PROCRT 2000 UNIT/ML, 3000	pyridostigmine bromide SOLN OR	23	ranolazine TB12 1000 MG	8
UNIT/ML, 4000 UNIT/ML, 10000	pyridostigmine bromide TABS 60 MG		ranolazine TB12 500 MG	8
UNIT/ML, 20000 UNIT/ML .....	.....23		rasagiline mesylate	28
PROCRT 40000 UNIT/ML	pyridostigmine bromide TBCR	23	REALITY LATEX	
progesterone CAPS	pyrimethamine	22	CONDOMS/LUBRICATED MISC ..	51
PROGRAF PACK	QC PRENATAL TABS	56	REALITY LATEX/ULTRA	
PROGRAF SOLN	QINLOCK	26	TEXTURED DEVI	51
PROLASTIN-C SOLN				

REALITY LATEX/ULTRA THIN DEVI	RETROVIR IV INFUSION SOLN ..	30	rizatriptan benzoate TBDP 10 MG ..	53
51	REXULTI	29	rizatriptan benzoate TBDP 5 MG ..	53
REBIF REBIDOSE SOAJ	ribavirin (hepatitis c) CAPS	31	roflumilast	9
REBIF REBIDOSE TITRATIONPACK	ribavirin (hepatitis c) TABS 200 MG		romidepsin SOLR	26
SOAJ	31		ropinirole hydrochloride TABS	28
REBIF SOSY	RIDAURA	3	ropinirole hydrochloride TB24 2 MG,	
REBIF TITRATION PACK SOSY ..	rifabutin	23	4 MG, 6 MG	28
RECOMBIVAX HB SUSP	rifampin CAPS	23	ropinirole hydrochloride TB24 8 MG,	
RECOMBIVAX HB SUSY	rifampin SOLR	23	12 MG	28
RECTIV (nitroglycerin (intra-anal)) .	riluzole TABS	57	rosuvastatin calcium TABS	19
7	rimantadine hydrochloride TABS ..	31	ROTARIX SUSP	67
REGRANEX	ringer's	54	ROTARIX SUSR	67
RELENZA DISKHALER	ringer's irrigation	55	ROTATEQ SOLN	67
RELION 2-IN-1 LANCET DEVICES	RINVOQ TB24	2	ROZLYTREK CAPS	26
30G	risedronate sodium TABS 150 MG	44	RUBRACA	26
RELION 2-IN-1 LANCING DEVICE	risedronate sodium TABS 35 MG ..	44	rufinamide SUSP	12
25G	risedronate sodium TABS 5 MG, 30		rufinamide TABS 200 MG	12
RELION 2-IN-1 LANCING DEVICE	MG	44	rufinamide TABS 400 MG	12
30G	risedronate sodium TBEC	44	RUKOBIA	30
RELION KETONE TEST STRIPS	RISPERDAL CONSTA (risperidone		RUXIENCE	24
STRP	microspheres)	29	RYBELSUS TABS	15
RELION TRUE METRIX	risperidone microspheres	29	salsalate	5
BLOODGLUCOSE TEST STRIPS	risperidone SOLN	29	SANDOSTATIN LAR DEPOT KIT ..	45
STRP	risperidone TABS 0.25 MG, 0.5 MG,		SANTYL OINT	41
RENAGEL (sevelamer hcl)	1 MG, 2 MG, 3 MG	29	sapropterin dihydrochloride PACK ..	45
47	risperidone TABS 4 MG	29	sapropterin dihydrochloride TABS ..	45
RENFLEXIS	risperidone TBDP	29	SAVELLA TABS	61
46	ritonavir TABS	30	SAVELLA TITRATION PACK MISC	
repaglinide 0.5 MG, 1 MG	rivastigmine tartrate CAPS	61	61	
16	rizatriptan benzoate TABS 10 MG ..	53	saxagliptin hcl	15
repaglinide 2 MG	rizatriptan benzoate TABS 5 MG ..	53	saxagliptin-metformin hcl 1000 MG-	
REPATHA PUSHTRONEX SYSTEM				
SOCT				
19				
REPATHA SOSY				
19				
REPATHA SURECLICK SOAJ ..				
19				
RETACRIT				
49				
RETEVMO				
26				

2.5 MG	15	silver sulfadiazine	39	magnesium sulfate	50
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	SIMPONI ARIA SOLN	3	SOFOSBUVIR/VELPATASVIR TABS	31
SCEMBLIX 20 MG	26	SIMULECT	55	solifenacain succinate TABS	64
SCEMBLIX 40 MG	26	simvastatin TABS	19	SOLIQUA 100/33	15
scopolamine	17	sirolimus TABS	55	SOLOSEC	2
SELECT INSULIN SYRINGES	52	SIRTURO	23	SOLU-CORTEF 100 MG, 500 MG, 1000 MG	36
SELECT LANCETS	52	SIVEXTRO TABS	22	SOLU-CORTEF 250 MG	36
selegiline hcl CAPS	28	SKYRIZI PEN SOAJ	39	SOLU-MEDROL 2 GM	36
selegiline hcl TABS	28	SKYRIZI PSKT	39	SOMAVERT 10 MG, 15 MG, 20 MG ..	
selenium sulfide LOTN 2.5 %	39	SKYRIZI SOCT	46	SELZENTRY SOLN	30
SELZENTRY SOLN	30	SKYRIZI SOLN	46	SKYRIZI SOSY	39
SELZENTRY TABS 25 MG, 75 MG 30		SLYND	35	sorafenib tosylate	26
SEREVENT DISKUS	10	SM PRENATAL VITAMINS TABS .56		SORBITOL 3 %	47
sertraline hcl CONC	14	SODIUM ACETATE SOLN (sodium acetate)	53	SORBITOL/MANNITOL IRRIGATION	47
sertraline hcl TABS 100 MG	14	sodium acetate SOLN	53	sotalol hcl (afib/afl)	32
sertraline hcl TABS 25 MG, 50 MG 14		sodium chloride (gu irrigant) 0.9 %	47	sotalol hcl TABS 240 MG	32
sevelamer carbonate PACK	47	sodium chloride (inhałant) NEBU 7 %	36	sotalol hcl TABS 80 MG, 120 MG, 160 MG	32
sevelamer carbonate TABS	47	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	54	SPIKEVAX COVID-19 VACCINE SUSP	67
sevelamer hcl 800 MG	47	sodium citrate & citric acid	47	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	67
SHINGRIX	67	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	54	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	67
SIGNIFOR	45	sodium phenylbutyrate POWD	45	spinosad	42
sildenafil citrate (pulmonary hypertension) SOLN	33	sodium phenylbutyrate TABS	45	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) ..9	
sildenafil citrate (pulmonary hypertension) SUSR	33	sodium polystyrene sulfonate POWD 55		SPIRIVA RESPIMAT AERS	9
sildenafil citrate (pulmonary hypertension) TABS	33	sodium polystyrene sulfonate SUSP		spironolactone & hydrochlorothiazide	43
sildenafil citrate	33	OR 15 GM/60ML	55	spironolactone TABS	43
silodosin	47	sodium sulfate-potassium sulfate-			

SPRAVATO 56MG DOSE	13	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	37	MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15
SPRAVATO 84MG DOSE	13				
SPRYCEL	26	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	37	SYNJARDY XR TB24 1000 MG-25 MG	15
stannous fluoride CONC	55				
stavudine CAPS	30	sulfacetamide sod-prednisolone SOLN	59	SYNRIBO	27
STELARA 130 MG/26ML	46	sulfadiazine TABS	62	SYNTROID TABS (levothyroxine sodium)	63
STELARA SOLN 45 MG/0.5ML ...	39	sulfamethoxazole-trimethoprim SOLN	21	TABLOID	24
STELARA SOSY 45 MG/0.5ML ...	39			TABRECTA	26
STELARA SOSY 90 MG/ML	39	sulfamethoxazole-trimethoprim SUSP	21	tacrolimus (topical) OINT	41
STENDRA	33	sulfamethoxazole-trimethoprim TABS	21	tacrolimus CAPS	55
STIMATE SOLN NA	45			tadalafil (pulmonary hypertension) TABS	33
STIOLTO RESPIMAT	10	SULFAMYLYON CREA	39	tadalafil 5 MG	33
STIVARGA	26	sulfasalazine TABS	46	TAFINLAR CAPS	26
streptomycin sulfate SOLR	2	sulfasalazine TBEC	46	tafluprost	59
STRIBILD	30	sulindac TABS	4	TAGRISSO 40 MG	24
STRIVERDI RESPIMAT	10	sumatriptan	53	TAGRISSO 80 MG	24
SUBSYS LIQD 100 MCG	6	sumatriptan succinate SOAJ	53	TAKHYRO SOLN	48
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	6	sumatriptan succinate SOCT	53	TAKHYRO SOSY	48
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	6	sumatriptan succinate SOLN 6 MG/0.5ML	53	TALZENNA	26
sucralfate SUSP	63	sumatriptan succinate TABS	53	tamoxifen citrate TABS	25
sucralfate TABS	63	sumatriptan-naproxen sodium	53	tamsulosin hcl	47
sulconazole nitrate CREA	38	sunitinib malate 12.5 MG, 25 MG, 50 MG	26	TASIGNA 150 MG, 200 MG	27
sulconazole nitrate SOLN	38	sunitinib malate 37.5 MG	26	TASIGNA 50 MG	27
sulfacetamide sodium (acne)	37	SUNOSI 150 MG	1	TASMAR (tolcapone)	28
sulfacetamide sodium (ophth) SOLN . 58		SUNOSI 75 MG	1	tavaborole	38
		SYNAREL	44	TAVALISSE	48
sulfacetamide sodium w/ sulfur CREA 10 %-5 %	37	SYNERA PTCH	42	tazarotene CREA	39
sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	37	SYNJARDY TABS	15	TAZVERIK	27
		SYNJARDY XR TB24 1000 MG-10		TDVAX SUSP	63

TEFLARO	34	tetrabenazine	61	tobramycin (ophth) SOLN	58
TEGRETOL SUSP (carbamazepine) . 12		tetracycline hcl CAPS	62	tobramycin NEBU	2
TEGRETOL TABS (carbamazepine) . 12		THALOMID	55	tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML	2
TEGSEDI	62	theophylline ELIX	10	tobramycin-dexamethasone SUSP 59	
telmisartan	20	theophylline SOLN	10	TODAY SPONGE MISC	67
telmisartan-amlodipine	20	theophylline TB12	10	tolcapone	28
telmisartan-hydrochlorothiazide ...	20	theophylline TB24	10	tolmetin sodium CAPS	4
temazepam 15 MG, 30 MG	49	THERANATAL CORE NUTRITION TABS	56	tolmetin sodium TABS 600 MG	4
temazepam 7.5 MG, 22.5 MG	49	THIOLA EC TBEC 100 MG (tiopronin)	47	TOLSURA CAPS	18
TEMODAR SOLR	23	THIOLA EC TBEC 300 MG (tiopronin)	47	tolterodine tartrate CP24	64
temozolomide CAPS	23	thioridazine hcl	29	tolterodine tartrate TABS	64
temsirolimus	27	thiotepa 15 MG	23	tolvaptan TABS	45
TENIVAC INJ	63	thiothixene	29	topiramate CPSP 15 MG	12
tenofovir disoproxil fumarate TABS 30		THYMOGLOBULIN	55	topiramate CPSP 25 MG	12
terazosin hcl	20	THYROGEN 0.9 MG	42	topiramate CS24	12
terbinafine hcl TABS	18	tiagabine hcl	12	topiramate TABS 100 MG, 200 MG 12	
terbutaline sulfate SOLN	10	TIBSOVO	27	topiramate TABS 25 MG, 50 MG ..	12
terbutaline sulfate TABS	10	tigecycline	62	topotecan hcl SOLR	27
terconazole vaginal CREA	67	timolol maleate (ophth) SOLG	58	toremifene citrate	25
terconazole vaginal SUPP	67	timolol maleate (ophth) SOLN	58	torsemide TABS	43
teriflunomide	61	timolol maleate TABS	32	TRACLEER TBSO	33
teriparatide (recombinant) SOPN ..	44	tiopronin TBEC 100 MG	47	tramadol hcl TABS 50 MG	6
TERIPARATIDE SOPN	44	tiopronin TBEC 300 MG	47	tramadol hcl TB24	6
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7	tiotropium bromide monohydrate CAPS	9	tramadol-acetaminophen	7
testosterone cypionate SOLN IM ...	7	TIVICAY TABS	30	trandolapril 1 MG, 2 MG	19
testosterone enanthate SOLN IM ...	7	tizanidine hcl CAPS	57	trandolapril 4 MG	20
TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT SUSP	63	tizanidine hcl TABS	57	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	20

trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21	triamicinolone acetonide (topical) LOTN 0.1 %	41	tropicamide SOLN 1 %	58
tranexamic acid SOLN 1000 MG/10ML	49	triamicinolone acetonide (topical) OINT 0.025 %, 0.1 %	41	trospium chloride CP24	64
tranexamic acid TABS	49	triamicinolone acetonide (topical) OINT 0.5 %	41	trospium chloride TABS	64
tranylcypromine sulfate	13	triamicinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML		TRUE COVER DEVI	51
travoprost SOLN	59	.....	36	TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ..	42
TRAZIMERA	24	.....	36	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	52
trazodone hcl TABS	14	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP 42	
TRECATOR	23	triamterene & hydrochlorothiazide TABS	43	TRUETRACK TEST STRP	42
TRELEGY ELLIPTA	10	triamterene CAPS	43	TRULICITY	15
TRELSTAR MIXJECT	25	triazolam	49	TRUMENBA	64
TREMFYA SOPN	39	TRICARE TABS	56	TRUSTEX COLOR CONDOMS + LUBE MISC	51
TREMFYA SOSY	39	trientine hcl 250 MG	55	TRUSTEX LUBRICATED EXTRALARGE MISC	51
treprostин SOLN IJ	33	trifluoperazine hcl TABS	29	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	51
tretinoин (chemotherapy)	27	trifluridine	58	TRUSTEX LUBRICATED MISC	51
tretinoин CREA 0.025 %, 0.05 %, 0.1 %	37	trihexyphenidyl hcl SOLN	28	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	51
tretinoин GEL 0.01 %, 0.025 %	37	trihexyphenidyl hcl TABS	28	TRUSTEX LUBRICATED MISC	51
tretinoин microsphere 0.1 %	37	TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG ..	15	TRUSTEX LUBRICATED/RIBBED/STUDED 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/SPERMICIDE EXTRA LARGE MISC	51
triamicinolone acetonide (mouth)	55	TRIKAFTA TBPK	62	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	51
triamicinolone acetonide (nasal) AERO	57	trimethobenzamide hcl CAPS	17	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	51
triamicinolone acetonide (topical) CREA 0.025 %	41	trimethoprim TABS	21	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	51
triamicinolone acetonide (topical) CREA 0.1 %	41	trimipramine maleate CAPS	14	TRUSTEX LUBRICATED/SPERMICIDE MISC	
triamicinolone acetonide (topical) CREA 0.5 %	41	TRINTELLIX	14		
triamicinolone acetonide (topical) LOTN 0.025 %	41	TRIUMEQ TABS	30		
		TRIZIVIR	31	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	51
		tropicamide SOLN 0.5 %	58		

TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED MISC	52	ursodiol TABS	46	MG	14
TRUSTEX/RIA LUBRICATED MISC .	52	UVADEX	27	venlafaxine hcl TABS	14
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	52	valacyclovir hcl 1 GM, 1000 MG ..	31	venlafaxine hcl TB24 150 MG ..	14
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	52	valacyclovir hcl 500 MG	31	venlafaxine hcl TB24 37.5 MG, 75	
TRUXIMA	24	valganciclovir hcl TABS	31	MG, 225 MG	14
TUKYSA	24	valproate sodium SOLN OR 250		verapamil hcl CP24 100 MG, 200	
TURALIO	27	MG/5ML	13	MG, 300 MG	32
TUZISTRA XR	36	valproic acid CAPS	13	verapamil hcl CP24 120 MG, 180	
TWINRIX SUSY	67	valrubicin	25	MG, 240 MG, 360 MG	32
TWIRLA	35	valsartan TABS	20	verapamil hcl SOLN 2.5 MG/ML ..	32
TYBLUME CHEW	35	valsartan-hydrochlorothiazide	21	verapamil hcl TABS	32
TYBOST	31	VALTOCO 10 MG DOSE LIQD	11	verapamil hcl TBCR	32
TYMLOS	44	VALTOCO 15 MG DOSE LQPK	11	VEREGEN	37
TYVASO REFILL SOLN IN	33	VALTOCO 20 MG DOSE LQPK	11	VERZENIO	27
TYVASO SOLN IN	33	VALTOCO 5 MG DOSE LIQD	11	VICTOZA	15
TYVASO STARTER SOLN IN	33	vancomycin hcl CAPS	21	vigabatrin PACK	12
UBRELVY	53	vancomycin hcl SOLR IV 1 GM, 10		vigabatrin TABS	12
UCERIS (budesonide (intrarectal)) .	7	GM, 500 MG, 1000 MG	21	VIIBRYD STARTER PACK KIT ..	14
UDENYCA ONBODY SOSY	49	vancomycin hcl SOLR OR 25		vilazodone hcl TABS	14
UDENYCA SOAJ	49	MG/ML, 50 MG/ML, 250 MG/5ML .	21	vincristine sulfate	27
UDENYCA SOSY	49	VAQTA	67	vinorelbine tartrate 10 MG/ML ..	27
UPTRAVI TABS 200 MCG	33	varenicline tartrate TABS	62	VIRACEPT TABS 250 MG	31
UPTRAVI TABS 400 MCG, 600		varenicline tartrate TBPK	62	VIRACEPT TABS 625 MG	31
MCG, 800 MCG, 1000 MCG, 1200		VARIVAX INJ	67	VIREAD POWD	31
MCG, 1400 MCG, 1600 MCG	33	VARUBI TBPK	17	VIREAD TABS 150 MG, 200 MG,	
UPTRAVI TITRATION PACK TBPK		VAXNEUVANCE	64	250 MG	31
33		VECAMYL	21	VISTOGARD	17
ursodiol CAPS	46	VECTIBIX 100 MG/5ML	24	VITAMIN D2 TABS 400 UNIT	68
		VELPHORO	47	VITATHELY/GINGER TABS	56
		venlafaxine hcl CP24 150 MG ..	14	VITRAKVI CAPS	27
		venlafaxine hcl CP24 37.5 MG, 75		VITRAKVI SOLN	27

VIZIMPRO	24	XARELTO TABS 10 MG, 20 MG ..	10	XTANDI TABS 80 MG	25
VORAXAZE	27	XARELTO TABS 2.5 MG, 15 MG ..	10	XULTOPHY 100/3.6	15
voriconazole TABS	18	XELJANZ SOLN	3	XYNTHA	48
VOTRIENT (pazopanib hcl)	27	XELJANZ TABS 10 MG	3	XYNTHA SOLOFUSE	48
VYNDAMAX	33	XELJANZ TABS 5 MG	3	YERVOY	24
VYndaQEL	34	XELJANZ XR TB24	2	YONSA	25
VYVANSE CAPS	1	XEOMIN	57	zafirlukast	9
VYVANSE CHEW	1	XERAVA	62	zaleplon 10 MG	49
warfarin sodium TABS	10	XGEVA SOLN	44	zaleplon 5 MG	49
water for irrigation, sterile	55	XHANCE EXHU	57	ZALTRAP 100 MG/4ML	24
WELCHOL TABS (colesevelam hcl) . 19		XIFAXAN 200 MG	21	ZANOSAR	23
WESTAB PLUS TABS	57	XIFAXAN 550 MG	21	ZARONTIN CAPS (ethosuximide) .	13
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	52	XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	15	ZARXIO	49
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	52	XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	15	ZEJULA CAPS	27
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	52	XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	9	ZELBORAF	27
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	52	XOLAIR SOAJ 75 MG/0.5ML	9	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT- 15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	43
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	52	XOLAIR SOLR	9	ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT	43
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	52	XOLAIR SOSY 150 MG/ML, 300 MG/2ML	9	ZEPATIER	31
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	52	XOLAIR SOSY 75 MG/0.5ML	9	zidovudine CAPS	31
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	52	XOSPATA	27	zidovudine SYRP	31
XALKORI CAPS	27	XPOVIO	25	zidovudine TABS	31
XARELTO STARTER PACK TBPK 10		XTAMPZA ER	6	ZIEXTENZO	49
XARELTO SUSR	10	XTANDI CAPS	25	zileuton TB12	9
		XTANDI TABS 40 MG	25	ziprasidone hcl	28

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
ZORBTIVE SC	44
ZYDELIG	27
ZYLET	59
ZYVOX SUSR (linezolid)	22

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