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# North Carolina State Health Plan 2024 Custom Formulary

**Effective 07/01/2024**

Please talk to your provider about prescribing formulary medications, which may help reduce your out-of-pocket costs. This list can help guide you and your doctor in selecting an appropriate medication.

The comprehensive formulary document is regularly updated. Please visit the [Plan's website](#) for the most up-to-date information. This guide was current at the time of printing and is subject to change.

**To search** for a medication name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on Search.

**USE CAUTION BEFORE PRINTING; LARGE CONTENT DOCUMENT!**

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## Member Guide to Covered Medications on the Formulary

This guide lists the approved brand name and generic prescription medications that have been reviewed by the North Carolina State Health Plan (Plan). Please refer to this formulary guide for information about medications covered by this formulary and present this guide to your provider if you require a prescription.

The prescription medications listed in the formulary or their tier placement may change from time to time due to a change in the cost of the medication and/or in the classification of the medication by the U.S. Food and Drug Administration (FDA) or nationally recognized medication databases (e.g., Medi-Span). For a more complete listing of medication coverage and costs, you may use our drug [Lookup tools](#). You may also call CVS Caremark® Customer Service at 1-888-321-3124 to verify prescription medication benefits.

A formulary is a list of prescription medications covered by a health plan. The Plan's Pharmacy & Therapeutics (P&T) Committee reviews medications at least quarterly. This includes ongoing reviews of clinical information about new medications and reviews of new safety and efficacy information about older medications. The majority of the Plan's P&T Committee is composed of practicing prescribers and pharmacists independent of the Plan. Tier placement of prescription medications in the formulary may be determined by the effectiveness and safety of the medication, the cost of the medication, and/or the classification of the medications by the FDA or nationally recognized medication databases (e.g., Medi-Span).

Please refer to <https://www.shpnc.org> for detailed information regarding your pharmacy benefits, including out-of-pocket costs, prior authorization and step therapy medication requests, and applicable exclusions.

### Formulary Tiers

The Formulary covers most medications approved by the FDA, within existing benefits. The plan design determines the member's payment obligation.

Definitions for the Tiers are as follows:

**Tier 0:** Made up of zero-cost medications including Affordable Care Act (ACA) preventive medications, insulin, and preferred Blood Glucose Meters (BGMs).

**Tier 1:** Typically includes the most cost-effective of non-specialty prescription medications; most are generic though there are a few instances in which the branded product is more cost-effective. Also includes some generic oral antiretroviral and anti-rejection immunosuppressant medications.

**Tier 2:** Typically includes preferred brand non-specialty medications and some high-cost generics. Also includes some brand oral antiretroviral and anti-rejection immunosuppressant medications and preferred Continuous Glucose Monitors (CGMs) and associated supplies.

**Tier 3:** Typically includes non-preferred brands, including branded generics (also known as single source generics), non-specialty medications. Also includes some non-preferred brand oral antiretroviral medications. Excluded, non-specialty medications that are approved via the exceptions process also take a Tier 3 copay.

**Tier 4:** The most cost-effective specialty medications.

**Tier 5:** Preferred brand specialty medications.

**Tier 6:** Non-preferred brand specialty prescription medications. Excluded, specialty medications that are approved via the exceptions process also take a Tier 6 copay.

**Tier 7:** Preferred diabetic supplies and preferred Blood Glucose Meter (BGM) supplies.

### Pharmacy Benefit Cost-Share Compare by Plan

The grid below provides a summary of the 2024 Plan Year cost-share and unique copays for each of the Plans. Additional description for unique copays and reference to other resources is found in following pages within the guide.

<b>Formulary Tier or Unique Copay</b>	<b>80/20 Plan</b>	<b>70/30 Plan</b>	<b>High Deductible Health Plan</b>
<b>Tier 0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Tier 1</b>	\$5 copay per 30-day supply	\$16 copay per 30-day supply	50% after deductible
<b>Tier 2</b>	\$30 copay per 30-day supply	\$47 copay per 30-day supply	50% after deductible
<b>Tier 3</b>	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
<b>Tier 4</b>	\$100 copay per 30-day supply	\$200 copay per 30-day supply	50% after deductible
<b>Tier 5</b>	\$250 copay per 30-day supply	\$350 copay per 30-day supply	50% after deductible
<b>Tier 6</b>	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
<b>Tier 7</b>	\$5 copay per 30-day supply	\$10 copay per 30-day supply	50% after deductible
<b>HDHP Preventive Medications (PV)</b>	not applicable	not applicable	50% bypass deductible

## Generic Medications

**In most cases, choosing a generic medication equivalent, when available, may mean significant savings to you.** We encourage you to discuss with your provider whether a generic alternative is an available treatment option. Especially for medications that are taken daily and refilled frequently, you will experience the long-term savings of a lower medication payment month after month. **If you choose a brand name prescription medication and a generic equivalent is available, you may be subject to higher out-of-pocket expense.**

## Compounded Prescriptions

Compounded prescriptions contain two or more medications mixed together. Compounded prescriptions are processed according to member benefits. To be eligible for coverage, compounded medications must contain at least one ingredient that is defined as a prescription medication and must not be a copy of a commercially available product. Compounded medications may be subject to prior authorization and benefit exclusion.

## Utilization Management: Prior Authorization, Quantity Limitations and Step Therapy Medications

Certain medications may be subject to prior authorization, quantity limitations, or step therapy programs. The Plan's P&T Committee reviews and approves the clinical criteria for these programs.

- Medications that have prior authorization requirements must be reviewed by CVS Caremark for coverage determination before coverage can be authorized.
- Certain medications may also have limitations on the quantity and days' supply for coverage. Quantities in excess of the coverage limit must be reviewed and approved by CVS Caremark coverage determination before coverage can be authorized for amounts in excess of the limits.
- For coverage of step therapy medications, the Plan requires that the member has tried non-restricted formulary alternatives medications first. Coverage for step therapy medications may be provided without the use of a non-step therapy medication if the prescriber certifies in writing that the member has previously used non-restricted medications and the non-restricted medications have been detrimental to the member's health or have been ineffective in treating the same condition and, in the opinion of the prescriber, are likely to be detrimental to the member's health or ineffective in treating the condition in the future. Clinical rationale and documentation for exception requests may be required.

The FDA is responsible for approving medications for use based on clinical data proving the medication is safe and effective for that specific use. The Plan's utilization management programs follow FDA-approved uses for these medications. However, the Plan recognizes that in many cases, "off-label" (i.e., non-FDA approved) uses of prescription medications may be acceptable. In determining the acceptability of off label uses, the Plan utilizes several sources of clinical information including but not limited to:

1. Nationally recognized clinical references including American Hospital Formulary Service Medication Information
2. The results of at least two randomized, controlled clinical studies that support a specific off-label use, and that are published in peer-reviewed professional medical journals
3. Consultations with internal and external physician experts regarding community standards. Additional searches for current supporting medical literature may be performed utilizing standard electronic databases.

## Specialty Medications

These medications, as classified by the Plan, have unique uses, treat complex medical conditions, require special dosing or monitoring, are typically prescribed by a specialist provider and/or require special patient education, training or coordination of care. Most specialty medications can be found on Tier 6, but some may be found on lower specialty Tiers 4 or 5.

Specialty medications will need to be filled with CVS Specialty® pharmacy. These medications are identified in the specialty column of the formulary guide. Call the CVS Specialty customer service number at 1-800-237-2767 to determine the steps required to fill your specialty medication prescription.

## Affordable Care Act

Please note, some medications may have \$0 cost-sharing under the Affordable Care Act (ACA) for members enrolled in the 70/30, 80/20 or HDHP plans. These medications take Tier 0. Examples of categories of medications that may be subject to \$0 cost share include aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), iron supplements, tobacco cessation, vaccines, vitamin D supplements, and some contraceptive medications and devices. You may find additional information about these medications on the [ACA Preventive List](#). These medications are identified by the notation of "**ACA**" next to qualifying medications within the formulary guide. If you do not find the medication you are searching for, consult or contact CVS Caremark customer service at 1-888-321-3124 to find out if the medication is available over the counter or is covered under your medical and/or pharmacy benefit.

## High Deductible Health Plan (HDHP) Preventive Medications

For the High Deductible Health Plan some preventive medications used to prevent or manage certain health conditions are covered without meeting a deductible. Coinsurance will still apply. These medications are identified in the guide with a "**PV**" notation.



Additional information about these medications can be found on the [HDHP Preventive Medication List](#).

## **Insulin**

The Plan will cover the full cost of insulin. This means that any covered insulin or insulin approved through the formulary exceptions (medical necessity) process will take Tier 0 and have a \$0 copay/coinsurance for members. Preferred insulin products are identified in the guide with a notation of “**\$0 copay per 30-day supply**”.

## **Non-Covered Medications**

The Plan has a custom closed formulary. In a “closed” formulary, certain drugs are not covered. This comprehensive formulary document notes drugs that are not covered by the Plan. This is applicable to the Traditional Pharmacy Benefit (which includes the 80/20 Plan and 70/30 Plan). Non-covered medications are designated in the formulary guide with an “**NC.**” A formulary exception process is available to support Plan members who, per their prescriber, have a medical necessity to remain on a non-covered drug. The exception process is administered by CVS Caremark, the Plan’s Pharmacy Benefit Manager.

## **Medical Benefit Specialty Medications**

Some specialty medications are covered under the medical benefit and are subject to office charges. These medications are usually administered by intramuscular injection or intravenous injection or infusion under provider supervision in an office, outpatient setting or through home infusion. Medical benefit specialty medications are designated in the formulary guide with an “**M.**” Members may obtain prior authorization, and providers may contact Blue Cross and Blue Shield of North Carolina Customer Service at 1-888-234-2416.

## **Preferred Blood Glucose Monitoring and Diabetic Supplies**

Diabetic testing supplies associated with the Plan’s preferred Blood Glucose Monitoring (BGM) systems take Tier 7 and will have a unique copay of \$5 per 30-day supply for the 80/20 Plan or \$10 per 30-day supply for the 70/30 Plan. This unique copay also applies to preferred insulin pens and syringes and lancets. It does not apply to Continuous Glucose Monitoring (CGM) products.

## **Using the Member Guide to the Basic Formulary**

The Medication List is organized into broad categories (e.g., ANALGESICS AND ANESTHETICS). The graphic below shows the information that is provided in each column of the medication list and is an example only. Please use the medication search function to find current information for medications on the medication list.

Drug Name	Drug Tier	Requirements/Limits
<b>ANALGESICS</b>		
<b>ANALGESICS, OTHER</b>		
OFIRMEV INJ 10MG/ML	1	PA
<b>ANESTHETICS PV</b>		
AMIDATE INJ 2MG/ML	4	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 2.5GM	5	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 500MG	5	PA, ST, QL, SP, ACA, PV
DIPRIVAN INJ	5	
DIPRIVAN INJ 100MG/ML	5	PV
DIPRIVAN INJ 200/20ML	5	
DIPRIVAN INJ 500/50ML	5	
<i>etomidate iv soln 2 mg/ml</i>	2	ST

### Document Layout Key

Column	Description
Drug Name	Lists the medication name. Generic medications are listed in lowercase, <i>italicized</i> letters. Brand name medications are CAPITALIZED. Separate medication entries are required for some dosage forms such as extended-release and delayed-release.
Drug Tier	Indicates the tier level.
Requirements/Limits	Indicates how the medication is classified or whether any Utilization Management program(s) apply. For instance, SP indicates that the medication is classified as specialty, PV indicates that the medication is considered preventive, and ST notates that step therapy applies for this medication. A full list of abbreviations can be found under the LEGEND section of this document.

### Legend

#### Abbreviation/Acronym

cap  
 chew  
 conc  
 cr  
 dr  
 ec  
 effer  
 equiv  
 er  
 inhal  
 inj

#### Definition

capsule  
 chewable  
 concentrate  
 controlled-release  
 delayed-release  
 enteric coated  
 effervescent  
 equivalent  
 extended-release  
 inhalation  
 injection

<b>Abbreviation/Acronym</b>	<b>Definition</b>
liq	liquid
lot	lotion
nebu	nebulizer
odt	orally disintegrating tablet
oint	ointment
ophth	ophthalmic
powd	powder
sl	sublingual
sol/soln	solution
sr	sustained-release
suppos	suppository
susp	suspension
tab	tablet
td	transdermal
ACA	Affordable Care Act Copay
NC	Not Covered
OTC	Over the counter
PA	Prior Authorization
PV	Preventive (HDHP)
QL	Quantity Limit
SP	Specialty
ST	Step Therapy

## **NOTICE**

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with North Carolina State Health Plan or CVS Caremark.

**When viewing the formulary via the Internet, please be advised that this document is updated periodically, and changes may appear prior to their effective date to allow for client notification.**

**NCSHP Effective 07/01/2024**

**Drug Name Drug Tier Requirements/Limits**  
**ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS**

**AMPHETAMINES**

ADDERALL TAB 5MG	NC	
ADDERALL TAB 7.5MG	NC	
ADDERALL TAB 10MG	NC	
ADDERALL TAB 12.5MG	NC	
ADDERALL TAB 15MG	NC	
ADDERALL TAB 20MG	NC	
ADDERALL TAB 30MG	NC	
ADDERALL XR CAP 5MG	NC	
ADDERALL XR CAP 10MG	NC	
ADDERALL XR CAP 15MG	NC	
ADDERALL XR CAP 20MG	NC	
ADDERALL XR CAP 25MG	NC	
ADDERALL XR CAP 30MG	NC	
ADZENYS ER SUS 1.25MG	NC	
ADZENYS XR TAB 3.1MG	NC	
ADZENYS XR TAB 6.3MG	NC	
ADZENYS XR TAB 9.4MG	NC	
ADZENYS XR TAB 12.5MG	NC	
ADZENYS XR TAB 15.7 MG	NC	
ADZENYS XR TAB 18.8MG	NC	
<i>amphetamine sulfate tab 5 mg</i>	2	PA, QL
<i>amphetamine sulfate tab 10 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	2	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	PA, QL
DESOXYN TAB 5MG	3	PA, QL
DEXEDRINE CAP 10MG CR	3	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 2.5 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate tab 7.5 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate tab 15 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 20 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 30 mg</i>	2	PA, QL
DYANAVEL XR CHW 5MG	NC	
DYANAVEL XR CHW 10MG	NC	
DYANAVEL XR CHW 15MG	NC	
DYANAVEL XR CHW 20MG	NC	
DYANAVEL XR SUS 2.5MG/ML	NC	
EVEKEO ODT TAB 5MG	NC	
EVEKEO ODT TAB 10MG	NC	
EVEKEO ODT TAB 15MG	NC	
EVEKEO ODT TAB 20MG	NC	
EVEKEO TAB 5MG	NC	
EVEKEO TAB 10MG	NC	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 50 mg</i>	2	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lisdexamfetamine dimesylate cap 50 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 60 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 60 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 70 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate cap 70 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	2	PA, QL
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	2	PA, QL
<i>methamphetamine hcl tab 5 mg</i>	2	PA, QL
MYDAYIS CAP 12.5MG	NC	
MYDAYIS CAP 25MG	NC	
MYDAYIS CAP 37.5MG	NC	
MYDAYIS CAP 50MG	NC	
<i>procentra sol 5mg/5ml</i>	2	PA, QL
VYVANSE CAP 10MG	2	PA, QL
VYVANSE CAP 20MG	2	PA, QL
VYVANSE CAP 30MG	2	PA, QL
VYVANSE CAP 40MG	2	PA, QL
VYVANSE CAP 50MG	2	PA, QL
VYVANSE CAP 60MG	2	PA, QL
VYVANSE CAP 70MG	2	PA, QL
VYVANSE CHW 10MG	2	PA, QL
VYVANSE CHW 20MG	2	PA, QL
VYVANSE CHW 30MG	2	PA, QL
VYVANSE CHW 40MG	2	PA, QL
VYVANSE CHW 50MG	2	PA, QL
VYVANSE CHW 60MG	2	PA, QL
XELSTRYM PAD 9MG/9HR	NC	
XELSTRYM PAD 13.5/9HR	NC	
XELSTRYM PAD 18MG/9HR	NC	
<i>zenzedi tab 2.5mg</i>	2	PA, QL
<i>zenzedi tab 5mg</i>	1	PA, QL
<i>zenzedi tab 7.5mg</i>	2	PA, QL
<i>zenzedi tab 10mg</i>	1	PA, QL
<i>zenzedi tab 15mg</i>	2	PA, QL
<i>zenzedi tab 20mg</i>	2	PA, QL
<i>zenzedi tab 30mg</i>	2	PA, QL
<b>ANALEPTICS</b>		
CAFCIT INJ 60MG/3ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)	1	
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	1	
DOPRAM INJ 20MG/ML	3	

### **ANOREXIANTS NON-AMPHETAMINE**

ADIPEX-P CAP 37.5MG	3	PA; PV
ADIPEX-P TAB 37.5MG	3	PA; PV
benzphetamine hcl tab 25 mg	1	PA; PV
benzphetamine hcl tab 50 mg	1	PA; PV
diethylpropion hcl tab 25 mg	1	PA; PV
diethylpropion hcl tab er 24hr 75 mg	1	PA; PV
LOMAIRA TAB 8MG	NC	
phendimetrazine tartrate tab 35 mg	1	PA; PV
phentermine hcl cap 15 mg	1	PA; PV
phentermine hcl cap 30 mg	1	PA; PV
phentermine hcl cap 37.5 mg	1	PA; PV
phentermine hcl tab 37.5 mg	1	PA; PV
PLENITY CAP	NC	
QSYMIA CAP 3.75-23	2	PA; PV
QSYMIA CAP 7.5-46MG	2	PA; PV
QSYMIA CAP 11.25-69	2	PA; PV
QSYMIA CAP 15-92MG	2	PA; PV

### **ANTI-OBESITY AGENTS**

CONTRACE TAB 8-90MG	NC	
IMCIVREE INJ 10MG/ML	NC	
orlistat cap 120 mg	2	PA; PV
XENICAL CAP 120MG	NC	

### **ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS**

atomoxetine hcl cap 10 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 18 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 25 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 40 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 60 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 80 mg (base equiv)	1	PA, QL
atomoxetine hcl cap 100 mg (base equiv)	1	PA, QL
clonidine hcl tab er 12hr 0.1 mg	1	
guanfacine hcl tab er 24hr 1 mg (base equiv)	1	
guanfacine hcl tab er 24hr 2 mg (base equiv)	1	
guanfacine hcl tab er 24hr 3 mg (base equiv)	1	
guanfacine hcl tab er 24hr 4 mg (base equiv)	1	
INTUNIV TAB 1MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
INTUNIV TAB 2MG	NC	
INTUNIV TAB 3MG	NC	
INTUNIV TAB 4MG	NC	
QELBREE CAP 100MG ER	2	PA, QL
QELBREE CAP 150MG ER	2	PA, QL
QELBREE CAP 200MG ER	2	PA, QL
STRATTERA CAP 10MG	3	PA, QL
STRATTERA CAP 18MG	3	PA, QL
STRATTERA CAP 25MG	3	PA, QL
STRATTERA CAP 40MG	3	PA, QL
STRATTERA CAP 60MG	3	PA, QL
STRATTERA CAP 80MG	3	PA, QL
STRATTERA CAP 100MG	3	PA, QL
<b>DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)</b>		
SUNOSI TAB 75MG	2	PA, QL
SUNOSI TAB 150MG	2	PA, QL
<b>HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS</b>		
WAKIX TAB 4.45MG	5	SP, PA, QL
WAKIX TAB 17.8MG	5	SP, PA, QL
<b>STIMULANTS - MISC.</b>		
ADHANSIA XR CAP 25MG	NC	
ADHANSIA XR CAP 35MG	NC	
ADHANSIA XR CAP 45MG	NC	
ADHANSIA XR CAP 55MG	NC	
ADHANSIA XR CAP 70MG	NC	
ADHANSIA XR CAP 85MG	NC	
APTENSIO XR CAP 10MG	NC	
APTENSIO XR CAP 15MG	NC	
APTENSIO XR CAP 20MG	NC	
APTENSIO XR CAP 30MG	NC	
APTENSIO XR CAP 40MG	NC	
APTENSIO XR CAP 50MG	NC	
APTENSIO XR CAP 60MG	NC	
<i>armodafinil tab 50 mg</i>	1	PA, QL
<i>armodafinil tab 150 mg</i>	1	PA, QL
<i>armodafinil tab 200 mg</i>	2	PA, QL
<i>armodafinil tab 250 mg</i>	1	PA, QL
AZSTARYS CAP 26.1-5.2	2	PA, QL
AZSTARYS CAP 39.2-7.8	2	PA, QL
AZSTARYS CAP 52.3-10.	2	PA, QL
CONCERTA TAB 18MG	NC	
CONCERTA TAB 27MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CONCERTA TAB 36MG	NC	
CONCERTA TAB 54MG	NC	
COTEMPLA XR TAB 8.6MG	NC	
COTEMPLA XR TAB 17.3MG	NC	
COTEMPLA XR TAB 25.9MG	NC	
DAYTRANA DIS 10MG/9HR	NC	
DAYTRANA DIS 15MG/9HR	NC	
DAYTRANA DIS 20MG/9HR	NC	
DAYTRANA DIS 30MG/9HR	NC	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 10 mg</i>	1	PA, QL
FOCALIN TAB 2.5MG	3	PA, QL
FOCALIN TAB 5MG	3	PA, QL
FOCALIN TAB 10MG	3	PA, QL
FOCALIN XR CAP 5MG	NC	
FOCALIN XR CAP 10MG	NC	
FOCALIN XR CAP 15MG	NC	
FOCALIN XR CAP 20MG	NC	
FOCALIN XR CAP 25MG	NC	
FOCALIN XR CAP 30MG	NC	
FOCALIN XR CAP 35MG	NC	
FOCALIN XR CAP 40MG	NC	
JORNAY PM CAP 20MG ER	NC	
JORNAY PM CAP 40MG ER	NC	
JORNAY PM CAP 60MG ER	NC	
JORNAY PM CAP 80MG ER	NC	
JORNAY PM CAP 100MG ER	NC	
METADATE CD CAP 10MG	NC	
METADATE CD CAP 20MG	NC	
METADATE CD CAP 30MG	NC	
METADATE CD CAP 40MG	NC	
METADATE CD CAP 50MG	NC	
METADATE CD CAP 60MG	NC	
METHYLIN SOL 5MG/5ML	3	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
METHYLIN SOL 10MG/5ML	3	PA, QL
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 10 mg</i>	2	PA, QL
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	PA, QL
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	PA, QL
<i>methylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 10 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 10 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methylphenidate td patch 10 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 15 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 20 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 30 mg/9hr</i>	2	PA, QL
<i>modafinil tab 100 mg</i>	1	PA, QL
<i>modafinil tab 200 mg</i>	1	PA, QL
NUVIGIL TAB 50MG	NC	
NUVIGIL TAB 150MG	NC	
NUVIGIL TAB 200MG	NC	
NUVIGIL TAB 250MG	NC	
PROVIGIL TAB 100MG	NC	
PROVIGIL TAB 200MG	NC	
QUILLICHEW CHW 20MG ER	NC	
QUILLICHEW CHW 30MG ER	NC	
QUILLICHEW CHW 40MG ER	NC	
QUILLIVANT SUS 25MG/5ML	NC	
RELEXXII TAB 72MG ER	NC	
RITALIN LA CAP 10MG	3	PA, QL
RITALIN LA CAP 20MG	3	PA, QL
RITALIN LA CAP 30MG	3	PA, QL
RITALIN LA CAP 40MG	3	PA, QL
RITALIN TAB 5MG	3	PA, QL
RITALIN TAB 10MG	3	PA, QL
RITALIN TAB 20MG	3	PA, QL

## **ALLERGENIC EXTRACTS/BIOLOGICALS MISC**

### **ALLERGENIC EXTRACTS**

GRASTEK SUB 2800BAU	2	PA; PV
ODACTRA SUB	3	PA; PV
ORALAIR SUB 300 IR	2	PA; PV
PALFORZIA CAP ESCALAT	NC	
PALFORZIA CAP LEVEL 1	NC	
PALFORZIA CAP LEVEL 2	NC	
PALFORZIA CAP LEVEL 3	NC	
PALFORZIA CAP LEVEL 4	NC	
PALFORZIA CAP LEVEL 5	NC	
PALFORZIA CAP LEVEL 6	NC	
PALFORZIA CAP LEVEL 7	NC	
PALFORZIA CAP LEVEL 8	NC	
PALFORZIA CAP LEVEL 9	NC	
PALFORZIA CAP LEVEL 10	NC	
PALFORZIA POW LEVEL 11	NC	
RAGWITEK SUB	2	PA; PV

Drug Name	Drug Tier	Requirements/Limits
<b>ALTERNATIVE MEDICINES</b>		
<b>ALTERNATIVE MEDICINE - A'S</b>		
ALPHA-LIPOIC SOL ACID	3	
<b>AMINOGLYCOSIDES</b>		
<b>AMINOGLYCOSIDES</b>		
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	1	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
ARIKAYCE SUS	6	SP, PA
BETHKIS NEB 300/4ML	NC	
<i>gentamicin in saline inj 0.8 mg/ml</i>	1	
<i>gentamicin in saline inj 1 mg/ml</i>	1	
<i>gentamicin in saline inj 1.2 mg/ml</i>	1	
<i>gentamicin in saline inj 1.6 mg/ml</i>	1	
<i>gentamicin in saline inj 2 mg/ml</i>	1	
<i>gentamicin sulfate inj 10 mg/ml</i>	1	
<i>gentamicin sulfate inj 40 mg/ml</i>	1	
HUMATIN CAP 250MG	NC	
KITABIS PAK NEB 300/5ML	NC	
<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	1	
<i>streptomycin sulfate for inj 1 gm</i>	1	
TOBI NEB 300/5ML	NC	
TOBI PODHALR CAP 28MG	NC	
<i>tobramycin nebu soln 300 mg/4ml</i>	4	SP, PA, QL
<i>tobramycin nebu soln 300 mg/5ml</i>	4	SP, PA, QL
<i>tobramycin sulfate for inj 1.2 gm</i>	2	
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	2	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	1	
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	1	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	2	
ZEMDRI INJ 500MG/10	3	
<b>ANALGESICS - ANTI-INFLAMMATORY</b>		
<b>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</b>		
ABRILADA 1PN INJ 40/0.8ML	NC	
ABRILADA INJ 20/0.4ML	NC	
ABRILADA INJ 40/0.8ML	NC	
ADALIMU-AATY KIT 20/0.2ML	NC	
ADALIMU-AATY KIT 40/0.4ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADALIMU-ADAZ INJ 40/0.4ML	5	SP, PA; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
ADALIMU-ADBM KIT 40/0.4ML	NC	
ADALIMU-FKJP KIT 20/0.4ML	NC	
AMJEVITA INJ 10/0.2ML	NC	
AMJEVITA INJ 20/0.2ML	NC	
AMJEVITA INJ 20/0.4ML	NC	
AMJEVITA INJ 40/0.4ML	NC	
AMJEVITA INJ 40/0.8ML	NC	
AMJEVITA INJ 80/0.8ML	NC	
CYLTEZO INJ 10/0.2ML	NC	
CYLTEZO INJ 20/0.4ML	NC	
CYLTEZO INJ 40/0.8ML	NC	
CYLTEZO KIT 40/0.4ML	NC	
CYLTEZO KIT CROHNS	NC	
CYLTEZO PSOR KIT 40/0.4ML	NC	
HADLIMA INJ 40/0.4ML	NC	
HADLIMA INJ 40/0.8ML	NC	
HADLIMA PUSH INJ 40/0.4ML	NC	
HADLIMA PUSH INJ 40/0.8ML	NC	
HULIO INJ 40/0.8ML	NC	
HULIO KIT 20/0.4ML	NC	
HUMIRA INJ 10/0.1ML	NC	
HUMIRA INJ 20/0.2ML	NC	
HUMIRA INJ 40/0.4ML	NC	
HUMIRA KIT 40MG/0.8	NC	
HUMIRA PEDIA INJ CROHNS	NC	
HUMIRA PEN INJ 40/0.4ML	NC	
HUMIRA PEN INJ 40MG/0.8	NC	
HUMIRA PEN INJ 80/0.8ML	NC	
HUMIRA PEN KIT PS/UV	NC	
HYRIMOZ INJ 10/0.1ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HYRIMOZ INJ 20/0.2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ INJ 40/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ SENS INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ-CROH INJ UC SP	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
HYRIMOZ-PED INJ CROHNS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HYRIMOZ-PLAQ INJ PSORIASI	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis
IDACIO 2-PEN INJ 40/0.8ML	NC	
IDACIO 2-SYR INJ 40/0.8ML	NC	
SIMLANDI 1PN KIT 40/0.4ML	NC	
SIMLANDI 2PN INJ 40/0.4ML	NC	
SIMPONI ARIA SOL 50MG/4ML	5	SP, PA, QL
SIMPONI INJ 50/0.5ML	NC	
SIMPONI INJ 100MG/ML	NC	
YUFLYMA 1PEN KIT 80/0.8ML	NC	
YUSIMRY INJ 40/0.8ML	NC	

### **ANTIRHEUMATIC - ENZYME INHIBITORS**

OLUMIANT TAB 2MG	NC	
RINVOQ TAB 15MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 30MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 45MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
XELJANZ SOL 1MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ TAB 5MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XELJANZ TAB 10MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 11MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 22MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis

### **ANTIRHEUMATIC ANTIMETABOLITES**

OTREXUP INJ 10MG	NC	
OTREXUP INJ 12.5/0.4	NC	
OTREXUP INJ 15MG	NC	
OTREXUP INJ 17.5/0.4	NC	
OTREXUP INJ 20MG	NC	
OTREXUP INJ 22.5/0.4	NC	
OTREXUP INJ 25MG	NC	
RASUVO INJ 7.5MG	5	SP, PA, QL
RASUVO INJ 10MG	5	SP, PA, QL
RASUVO INJ 12.5MG	5	SP, PA, QL
RASUVO INJ 15MG	5	SP, PA, QL
RASUVO INJ 17.5MG	5	SP, PA, QL
RASUVO INJ 22.5MG	5	SP, PA, QL
RASUVO INJ 25MG	5	SP, PA, QL
RASUVO INJ 30MG	5	SP, PA, QL
REDITREX INJ 7.5/.3ML	NC	
REDITREX INJ 10/.4ML	NC	
REDITREX INJ 12.5/0.5	NC	
REDITREX INJ 15/.6ML	NC	
REDITREX INJ 17.5/0.7	NC	
REDITREX INJ 20/.8ML	NC	
REDITREX INJ 22.5/0.9	NC	
REDITREX INJ 25MG/ML	NC	

### **GOLD COMPOUNDS**

RIDAURA CAP 3MG	3	
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### **INTERLEUKIN-1 BLOCKERS**

ARCALYST INJ 220MG	NC	
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### **INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)**

KINERET INJ	NC	
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### **INTERLEUKIN-1BETA BLOCKERS**

ILARIS INJ 150MG/ML	6	SP, PA
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>		
ACTEMRA INJ 80MG/4ML	NC	
ACTEMRA INJ 162/0.9	NC	
ACTEMRA INJ 200/10ML	NC	
ACTEMRA INJ 400/20ML	NC	
KEVZARA INJ 150/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
TOFIDENCE INJ 80MG/4ML	NC	
TOFIDENCE INJ 200/10ML	NC	
TOFIDENCE INJ 400/20ML	NC	
TYENNE INJ 80MG/4ML	NC	
TYENNE INJ 200/10ML	NC	
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>		
ANAPROX DS TAB 550MG	3	
ARTHROTEC 50 TAB	NC	
ARTHROTEC 75 TAB	NC	
CALDOLOR INJ 4MG/ML	3	
CALDOLOR INJ 800/8ML	3	
<i>cataflam tab 50mg</i>	1	
CELEBREX CAP 50MG	NC	
CELEBREX CAP 100MG	NC	
CELEBREX CAP 200MG	NC	
CELEBREX CAP 400MG	NC	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
COMBOGESIC INJ 300-1000	NC	
DAYPRO TAB 600MG	3	
<i>diclofenac potassium tab 25 mg</i>	NC	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	
DUEXIS TAB 800-26.6	NC	
EC-NAPROSYN TAB 375MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EC-NAPROSYN TAB 500MG	3	
<i>ec-naproxen tab 375mg</i>	1	(applies to the 375 mg strength)
<i>ec-naproxen tab 500mg</i>	2	(applies to the 500 mg strength)
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
<i>fenoprofen calcium cap 400 mg</i>	NC	
<i>fenoprofen calcium tab 600 mg</i>	NC	
FENOPROFEN CAP 200MG	NC	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibu tab 400mg</i>	1	
<i>ibu tab 600mg</i>	1	
<i>ibu tab 800mg</i>	1	
<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>ibuprofen-famotidine tab 800-26.6 mg</i>	NC	
INDOCIN SUP 50MG	NC	
INDOCIN SUS 25MG/5ML	NC	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>indomethacin sodium iv for soln 1 mg</i>	1	
INDOMETHACIN SUP 100MG	3	
<i>indomethacin suppos 50 mg</i>	1	
<i>indomethacin susp 25 mg/5ml</i>	1	
<i>ketoprofen cap 25 mg</i>	NC	
<i>ketoprofen cap 50 mg</i>	3	
<i>ketoprofen cap er 24hr 200 mg</i>	NC	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
<i>ketorolac tromethamine inj 15 mg/ml</i>	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	2	
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam cap 5 mg</i>	NC	
<i>meloxicam cap 10 mg</i>	NC	
<i>meloxicam susp 7.5 mg/5ml</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON CAP 400MG	3	ST
NALFON TAB 600MG	3	ST
NAPRELAN TAB 375MG CR	NC	
NAPRELAN TAB 500MG CR	NC	
NAPRELAN TAB 750MG CR	NC	
NAPROSYN SUS 125/5ML	3	
NAPROSYN TAB 500MG	3	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	NC	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	NC	
<i>naproxen susp 125 mg/5ml</i>	NC	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	2	
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	NC	
<i>naproxen-esomeprazole magnesium tab dr 500-20 mg</i>	NC	
NEOPROFEN SOL 10MG/ML	3	
NUDROXIPAK KIT DSDR-50	NC	
NUDROXIPAK KIT DSDR-75	NC	
NUDROXIPAK KIT E-400	NC	
NUDROXIPAK KIT I-800	NC	
NUDROXIPAK KIT M-15	NC	
NUDROXIPAK KIT N-500	NC	
<i>oxaprozin cap 300 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
PREVIDOLRX PAK ANALGESI	NC	
RELAFEN DS TAB 1000MG	NC	
<i>relafen tab 500mg</i>	NC	
<i>relafen tab 750mg</i>	NC	
SPRIX SPR 15.75MG	NC	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
TOLECTIN 600 TAB 600MG	NC	
<i>tolmetin sodium cap 400 mg</i>	1	
VIMOVO TAB 375-20MG	NC	
VIMOVO TAB 500-20MG	NC	
VIVLODEX CAP 5MG	NC	
VIVLODEX CAP 10MG	NC	
ZIPSOR CAP 25MG	NC	
ZORVOLEX CAP 18MG	NC	
ZORVOLEX CAP 35MG	NC	
ZYNRELEF INJ 200-6MG	3	
ZYNRELEF INJ 400-12MG	3	
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
OTEZLA TAB 10/20/30	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 30MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
<b>PYRIMIDINE SYNTHESIS INHIBITORS</b>		
ARAVA TAB 10MG	3	
ARAVA TAB 20MG	3	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
<b>SELECTIVE COSTIMULATION MODULATORS</b>		
ORENCIA CLCK INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 50/0.4ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 87.5/0.7	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 250MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</b>		
ENBREL INJ 25/0.5ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 25MG	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL MINI INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL SRCLK INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions

**ANALGESICS - NONNARCOTIC**

**ANALGESIC COMBINATIONS**

ALLZITAL TAB 25-325MG	NC	
<i>bac tab</i>	1	QL
BUT/ASA/CAF TAB	NC	
BUTAL/APAP CAP 50-300MG	NC	
<i>butalbital-acetaminophen cap 50-300 mg</i>	NC	
<i>butalbital-acetaminophen tab 25-325 mg</i>	NC	
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	NC	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL
<i>esgic cap</i>	NC	
ESGIC TAB	3	QL
FIORICET CAP	NC	
<i>tencon tab 50-325mg</i>	1	QL
<i>vanatol lq sol</i>	NC	
<i>vtol lq sol</i>	NC	
<i>zebutal cap</i>	NC	

### **ANALGESICS OTHER**

<i>acetaminophen iv soln 10 mg/ml</i>	2	
<i>clonidine hcl inj (for epidural infusion) 100 mcg/ml</i>	1	
<i>clonidine hcl inj (for epidural infusion) 500 mcg/ml</i>	1	
DURACLON INJ	3	
LOTREXONE CAP 1.5MG	NC	
LOTREXONE CAP 4.5MG	NC	

### **ANALGESICS-PEPTIDE CHANNEL BLOCKERS**

PRIALT INJ 25MCG/ML	6	SP
PRIALT INJ 100MCG	6	SP
PRIALT INJ 500MCG	6	SP

### **SALICYLATES**

<i>aspirin adlt tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin chew tab 81 mg</i>	0	OTC; ACA, PV
<i>aspirin chld chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin low chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin tab delayed release 81 mg</i>	0	OTC; ACA, PV
<i>aspirin tab delayed release 81 mg</i>	0	OTC; ACA, PV
<i>aspirin-81 chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low tab 81mg ec</i>	0	OTC; ACA, PV
<i>child asa chw 81mg</i>	0	OTC; ACA, PV
<i>cvs aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>diflunisal tab 500 mg</i>	1	
<i>ecotrin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>eq aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>eql aspirin chw 81mg</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ft aspirin tab 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>goodsense tab 81mg ec</i>	0	OTC; ACA, PV
<i>hm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>kls aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>kp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>mm aspirin tab low dose</i>	0	OTC; ACA, PV
<i>qc aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>qc child asa chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>salsalate tab 750 mg</i>	1	
<i>sb child asa chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>sm child asa chw 81mg</i>	0	OTC; ACA, PV
<i>st joseph chw low 81mg</i>	0	OTC; ACA, PV
<i>st joseph tab low 81mg</i>	0	OTC; ACA, PV

## **ANALGESICS - OPIOID**

### **OPIOID AGONISTS**

ACTIQ LOZ 200MCG	3	PA, QL
ACTIQ LOZ 400MCG	3	PA, QL
ACTIQ LOZ 600MCG	3	PA, QL
ACTIQ LOZ 800MCG	3	PA, QL
ACTIQ LOZ 1200MCG	3	PA, QL
ACTIQ LOZ 1600MCG	3	PA, QL
ALFENTANIL INJ 1000/2ML	3	
ALFENTANIL INJ 2500/5ML	3	
ARYMO ER TAB 15MG	NC	
ARYMO ER TAB 30MG	NC	
ARYMO ER TAB 60MG	NC	
CODEINE SULF TAB 15MG	3	PA, QL
CODEINE SULF TAB 60MG	3	PA, QL
<i>codeine sulfate tab 30 mg</i>	1	PA, QL
CONZIP CAP 100MG	3	ST, PA, QL
CONZIP CAP 200MG	3	ST, PA, QL
CONZIP CAP 300MG	3	ST, PA, QL
DEMEROL INJ 25MG/ML	3	
DEMEROL INJ 50MG/ML	3	
DEMEROL INJ 75MG/ML	3	
DEMEROL INJ 100MG/ML	3	
DILAUDID INJ 0.2MG/ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DILAUDID INJ 1MG/ML	NC	
DILAUDID INJ 2MG/ML	NC	
DILAUDID LIQ 1MG/ML	3	PA, QL
DILAUDID TAB 2MG	3	PA, QL
DILAUDID TAB 4MG	3	PA, QL
DILAUDID TAB 8MG	3	PA, QL
DSUVIA SUB 30MCG	NC	
<i>duramorph inj 0.5mg/ml</i>	1	
<i>duramorph inj 1mg/ml</i>	1	
FENTANY/NACL INJ 1000MCG	3	
FENTANYL CIT INJ 50MCG/ML	3	
FENTANYL CIT INJ 100MCG	3	
FENTANYL CIT INJ 250MCG	3	
FENTANYL CIT SOL 10MCG/ML	NC	
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	2	PA, QL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	PA, QL
<i>fentanyl citrate pf soln prefilled syringe 50 mcg/ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 50 mcg/ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 500 mcg/10ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FENTANYL INJ 50MCG/ML	NC	
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 100 mcg/hr</i>	2	ST, PA, QL
FENTORA TAB 100MCG	3	PA, QL
FENTORA TAB 200MCG	3	PA, QL
FENTORA TAB 400MCG	3	PA, QL
FENTORA TAB 600MCG	3	PA, QL
FENTORA TAB 800MCG	3	PA, QL
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	1	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	1	ST, PA, QL
HYDROMO/NACL INJ 2MG/ML	NC	
HYDROMO/NACL INJ 20/100ML	3	
HYDROMORPHON INJ 0.2MG/ML	3	
HYDROMORPHON INJ 1MG/ML	3	
HYDROMORPHON INJ 2MG/ML	3	
HYDROMORPHON INJ 4MG/ML	3	
HYDROMORPHON INJ 10MG/ML	3	
HYDROMORPHON INJ 30/30ML	3	
HYDROMORPHON SOL 0.2MG/ML	3	
<i>hydromorphone hcl inj 1 mg/ml</i>	1	
<i>hydromorphone hcl inj 2 mg/ml</i>	1	
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	PA, QL
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydromorphone hcl tab 2 mg</i>	1	PA, QL
<i>hydromorphone hcl tab 4 mg</i>	1	PA, QL
<i>hydromorphone hcl tab 8 mg</i>	1	PA, QL
<i>hydromorphone hcl tab er 24hr 8 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 12 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 16 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 32 mg</i>	2	ST, PA, QL
HYSINGLA ER TAB 20 MG	NC	
HYSINGLA ER TAB 30 MG	NC	
HYSINGLA ER TAB 40 MG	NC	
HYSINGLA ER TAB 60 MG	NC	
HYSINGLA ER TAB 80 MG	NC	
HYSINGLA ER TAB 100 MG	NC	
HYSINGLA ER TAB 120 MG	NC	
INFUMORPH INJ 10MG/ML	3	
INFUMORPH INJ 25MG/ML	3	
IONSYS PAD 40MCG/AC	NC	
LAZANDA SPR 100MCG	NC	
LAZANDA SPR 300MCG	NC	
LAZANDA SPR 400MCG	NC	
<i>levorphanol tartrate tab 2 mg</i>	NC	
<i>meperidine hcl inj 25 mg/ml</i>	1	
<i>meperidine hcl inj 50 mg/ml</i>	1	
<i>meperidine hcl inj 100 mg/ml</i>	1	
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	PA, QL
<i>meperidine hcl tab 50 mg</i>	2	PA, QL
METHADO/NACL INJ 1MG/ML	3	
<i>methadone con 10mg/ml</i>	1	ST, PA, QL
<i>methadone hcl conc 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl inj 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl soln 5 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl soln 10 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl tab 5 mg</i>	1	ST, PA, QL
<i>methadone hcl tab 10 mg</i>	1	ST, PA, QL
<i>methadone hcl tab for oral susp 40 mg</i>	1	
METHADONE INJ 10MG/ML	3	ST, PA, QL
METHADOSE CON 10MG/ML	3	SP, PA, QL
METHADOSE SF CON 10MG/ML	3	SP, PA, QL
<i>methadose tab 40mg</i>	1	SP, PA, QL
<i>mitigo inj 10mg/ml</i>	1	
<i>mitigo inj 25mg/ml</i>	1	
MORPHABOND TAB 15MG ER	NC	
MORPHABOND TAB 30MG ER	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MORPHABOND TAB 60MG ER	NC	
MORPHABOND TAB 100MG ER	NC	
MORPHIN/NAACL INJ 1MG/ML	3	
MORPHIN/NAACL INJ 2MG-0.9%	NC	
MORPHIN/NAACL INJ 4MG-0.9%	NC	
MORPHIN/NAACL INJ 100/100	3	
MORPHINE SUL INJ 1MG/ML	3	
MORPHINE SUL INJ 2MG2/ML	3	
MORPHINE SUL INJ 2MG/ML	3	
MORPHINE SUL INJ 2MG/ML	NC	
MORPHINE SUL INJ 4MG/ML	3	
MORPHINE SUL INJ 8MG/ML	3	
MORPHINE SUL INJ 10MG/ML	3	
MORPHINE SUL INJ 250MG/50	3	
MORPHINE SUL INJ NAACL	3	
MORPHINE SUL SOL 50MG/ML	3	
<i>morphine sulfate beads cap er 24hr 30 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 45 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 60 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 90 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 120 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 10 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 20 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 30 mg</i>	1	ST, PA, QL
<i>morphine sulfate cap er 24hr 50 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 60 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 80 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 100 mg</i>	2	ST, PA, QL
<i>morphine sulfate inj pf 0.5 mg/ml</i>	1	
<i>morphine sulfate inj pf 1 mg/ml</i>	1	
<i>morphine sulfate iv soln 4 mg/ml</i>	1	
<i>morphine sulfate iv soln 8 mg/ml</i>	1	
<i>morphine sulfate iv soln 10 mg/ml</i>	1	
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	PA, QL
<i>morphine sulfate tab 15 mg</i>	1	PA, QL
<i>morphine sulfate tab 30 mg</i>	1	PA, QL
<i>morphine sulfate tab er 15 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 30 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 60 mg</i>	1	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>morphine sulfate tab er 100 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 200 mg</i>	2	ST, PA, QL
MS CONTIN TAB 15MG ER	3	ST, PA, QL
MS CONTIN TAB 30MG ER	3	ST, PA, QL
MS CONTIN TAB 60MG ER	3	ST, PA, QL
MS CONTIN TAB 100MG ER	3	ST, PA, QL
MS CONTIN TAB 200MG ER	3	ST, PA, QL
NUCYNTA ER TAB 50MG	NC	
NUCYNTA ER TAB 100MG	NC	
NUCYNTA ER TAB 150MG	NC	
NUCYNTA ER TAB 200MG	NC	
NUCYNTA ER TAB 250MG	NC	
NUCYNTA TAB 50MG	NC	
NUCYNTA TAB 75MG	NC	
NUCYNTA TAB 100MG	NC	
OXAYDO TAB 7.5MG	NC	
<i>oxycodone hcl cap 5 mg</i>	1	PA, QL
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	PA, QL
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA, QL
<i>oxycodone hcl tab 5 mg</i>	1	PA, QL
<i>oxycodone hcl tab 10 mg</i>	1	PA, QL
<i>oxycodone hcl tab 15 mg</i>	1	PA, QL
<i>oxycodone hcl tab 20 mg</i>	1	PA, QL
<i>oxycodone hcl tab 30 mg</i>	1	PA, QL
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	2	ST, PA, QL
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	2	ST, PA, QL
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	2	ST, PA, QL
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	2	ST, PA, QL
OXYCONTIN TAB 10MG ER	NC	
OXYCONTIN TAB 15MG ER	NC	
OXYCONTIN TAB 20MG ER	NC	
OXYCONTIN TAB 30MG ER	NC	
OXYCONTIN TAB 40MG ER	NC	
OXYCONTIN TAB 60MG ER	NC	
OXYCONTIN TAB 80MG ER	NC	
<i>oxymorphone hcl tab 5 mg</i>	1	PA, QL
<i>oxymorphone hcl tab 10 mg</i>	1	PA, QL
<i>oxymorphone hcl tab er 12hr 5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 10 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 15 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 20 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 30 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>oxymorphone hcl tab er 12hr 40 mg</i>	NC	
<i>remifentanil hcl for iv soln 1 mg</i>	1	
<i>remifentanil hcl for iv soln 2 mg</i>	1	
<i>remifentanil hcl for iv soln 5 mg</i>	1	
ROXICODONE TAB 15MG	3	PA, QL
ROXICODONE TAB 30MG	3	PA, QL
ROXYBOND TAB 5MG	NC	
ROXYBOND TAB 15MG	NC	
ROXYBOND TAB 30MG	NC	
SUBSYS SPR 100MCG	NC	
SUBSYS SPR 200MCG	NC	
SUBSYS SPR 400MCG	NC	
SUBSYS SPR 600MCG	NC	
SUBSYS SPR 800MCG	NC	
SUBSYS SPR 1200MCG	NC	
SUBSYS SPR 1600MCG	NC	
<i>sufentanil citrate inj 50 mcg/ml</i>	1	
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i>	1	
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i>	1	
SUFENTANIL INJ 50MCG/ML	3	
SUFENTANIL INJ 100/2ML	3	
SUFENTANIL INJ 250/5ML	3	
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 150 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	NC	
<i>tramadol hcl oral soln 5 mg/ml</i>	2	
<i>tramadol hcl tab 25 mg</i>	2	PA, QL
<i>tramadol hcl tab 50 mg</i>	1	PA, QL
<i>tramadol hcl tab 100 mg</i>	NC	
<i>tramadol hcl tab er 24hr 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 300 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	2	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ULTIVA INJ 1MG	3	
ULTIVA INJ 2MG	3	
ULTIVA INJ 5MG	3	
XTAMPZA ER CAP 9MG	NC	
XTAMPZA ER CAP 13.5MG	NC	
XTAMPZA ER CAP 18MG	NC	
XTAMPZA ER CAP 27MG	NC	
XTAMPZA ER CAP 36MG	NC	
ZOHYDRO ER CAP 10MG	NC	
ZOHYDRO ER CAP 15MG	NC	
ZOHYDRO ER CAP 20MG	NC	
ZOHYDRO ER CAP 30MG	NC	
ZOHYDRO ER CAP 40MG	NC	
ZOHYDRO ER CAP 50MG	NC	

### **OPIOID COMBINATIONS**

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	QL
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	QL
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i>	2	QL
<i>ascomp/cod cap 30mg</i>	1	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	2	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	QL
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	QL
<i>endocet tab 2.5-325</i>	2	PA, QL
<i>endocet tab 5-325mg</i>	1	PA, QL
<i>endocet tab 7.5-325</i>	1	PA, QL
<i>endocet tab 10-325mg</i>	1	PA, QL
FENT/ROPIVAC INJ 0.4/200	NC	
FENT/ROPIVAC INJ NAACL	NC	
FENTANYL CIT INJ BUPIVACA	NC	
FIORICET CAP CODEINE	3	QL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	NC	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	2	PA, QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2	PA, QL
LORTAB ELX 10-300MG	3	PA, QL
NALOCET TAB 2.5-300	NC	
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	PA, QL
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA, QL
PERCOCET TAB 2.5-325	NC	
PERCOCET TAB 5-325MG	NC	
PERCOCET TAB 7.5-325	NC	
PERCOCET TAB 10-325MG	NC	
PRIMLEV TAB 5-300MG	NC	
PRIMLEV TAB 7.5-300	NC	
PRIMLEV TAB 10-300MG	NC	
SEGLENTIS TAB 56-44MG	NC	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL
<i>trezix cap</i>	2	QL
ULTRACET TAB 37.5-325	3	QL

### **OPIOID PARTIAL AGONISTS**

BELBUCA MIS 75MCG	2	ST, PA, QL
BELBUCA MIS 150MCG	2	ST, PA, QL
BELBUCA MIS 300MCG	2	ST, PA, QL
BELBUCA MIS 450MCG	2	ST, PA, QL
BELBUCA MIS 600MCG	2	ST, PA, QL
BELBUCA MIS 750MCG	2	ST, PA, QL
BELBUCA MIS 900MCG	2	ST, PA, QL
BRIXADI SOL 8/0.16ML	NC	
BRIXADI SOL 16/0.32	NC	
BRIXADI SOL 24/0.48	NC	
BRIXADI SOL 32/0.64	NC	
BRIXADI SOL 64/0.18	NC	
BRIXADI SOL 96/0.27	NC	
BRIXADI SOL 128/0.36	NC	
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	1	
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	PA; PV
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	PV
<i>buprenorphine td patch weekly 5 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 10 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 15 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 20 mcg/hr</i>	2	ST, PA, QL
<i>butorphanol tartrate inj 1 mg/ml</i>	1	
<i>butorphanol tartrate inj 2 mg/ml</i>	1	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	PA, QL
BUTRANS DIS 5MCG/HR	NC	
BUTRANS DIS 7.5/HR	NC	
BUTRANS DIS 10MCG/HR	NC	
BUTRANS DIS 15MCG/HR	NC	
BUTRANS DIS 20MCG/HR	NC	
<i>nalbuphine hcl inj 10 mg/ml</i>	2	
<i>nalbuphine hcl inj 20 mg/ml</i>	2	
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	1	PA, QL
PROBUPHINE IMP KIT 74.2	NC	
SUBLOCADE INJ 100/0.5	3	PV
SUBLOCADE INJ 300/1.5	3	PV
SUBOXONE MIS 2-0.5MG	NC	
SUBOXONE MIS 4-1MG	NC	
SUBOXONE MIS 8-2MG	NC	
SUBOXONE MIS 12-3MG	NC	
ZUBSOLV SUB 0.7-0.18	2	PV
ZUBSOLV SUB 1.4-0.36	2	PV
ZUBSOLV SUB 2.9-0.71	2	PV
ZUBSOLV SUB 5.7-1.4	2	PV
ZUBSOLV SUB 8.6-2.1	2	PV
ZUBSOLV SUB 11.4-2.9	2	PV

## **ANDROGENS-ANABOLIC**



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANDROGENS</b>		
ANDRODERM DIS 2MG/24HR	3	PA
ANDRODERM DIS 4MG/24HR	3	PA
ANDROGEL GEL 1%(25MG)	NC	
ANDROGEL GEL 1%(50MG)	NC	
ANDROGEL GEL 1.62%	NC	
AVEED INJ 750/3ML	6	SP, PA
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	2	
<i>depo-testost inj 100mg/ml</i>	3	PA
<i>depo-testost inj 200mg/ml</i>	3	PA
FORTESTA GEL 10MG/ACT	NC	
JATENZO CAP 158MG	3	
JATENZO CAP 198MG	3	
JATENZO CAP 237MG	3	
KYZATREX CAP 100MG	NC	
KYZATREX CAP 150MG	NC	
KYZATREX CAP 200MG	NC	
METHITEST TAB 10MG	3	PA
<i>methyltestosterone cap 10 mg</i>	1	PA
NATESTO GEL 5.5MG	2	PA
TESTIM GEL 1%(50MG)	NC	
TESTOPEL MIS PELLETS	3	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	PA
TESTOSTERONE MIS 25MG	3	PA
TESTOSTERONE MIS 37.5MG	NC	
TESTOSTERONE MIS 50MG	3	PA
TESTOSTERONE MIS 87.5MG	NC	
TESTOSTERONE MIS 100MG	3	PA
TESTOSTERONE MIS 200MG	3	PA
<i>testosterone td gel 10mg/act (2%)</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	2	PA; Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td gel 12.5 mg/act (1%)</i>	NC	Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	2	PA
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	2	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	PA; Authorized generics for Testim and Vogelxo are not covered
<i>testosterone td soln 30 mg/act</i>	2	PA
TLANDO CAP 112.5 MG	NC	
VOGELXO GEL 1%(50MG)	NC	
VOGELXO GEL PUMP 1%	NC	
XYOSTED INJ 50/0.5	3	PA
XYOSTED INJ 75/0.5	3	PA
XYOSTED INJ 100/0.5	3	PA

## **ANORECTAL AND RELATED PRODUCTS**

### **INTRARECTAL STEROIDS**

<i>budesonide rectal foam 2 mg/act</i>	2	
CORTENEMA ENE 100MG	3	
CORTIFOAM AER 90MG	2	
<i>hydrocortisone enema 100 mg/60ml</i>	2	
UCERIS AER 2MG/ACT	3	

### **RECTAL COMBINATIONS**

ANALPRAM-HC CRE 1-1%	3	
ANALPRAM-HC LOT 2.5%	3	
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	
PROCORT CRE	3	
PROCTOFOAM AER HC 1%	2	

### **RECTAL STEROIDS**

<i>anucort-hc sup 25mg</i>	1	
ANUSOL-HC CRE 2.5%	3	
<i>hemmorex-hc sup 30mg</i>	2	
<i>hydrocortisone perianal cream 1%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>procto-med cre hc 2.5%</i>	1	
<i>procto-pak cre 1%</i>	1	
<i>proctocort cre 1%</i>	1	
PROCTOCORT SUP 30MG	3	
<i>proctosol hc cre 2.5%</i>	1	
<i>proctozone cre -hc 2.5%</i>	1	

### **VASODILATING AGENTS**

<i>nitroglycerin oint 0.4%</i>	2	
RECTIV OIN 0.4%	3	

## **ANTHELMINTICS**

Drug Name	Drug Tier	Requirements/Limits
<b>ANTHELMINTICS</b>		
<i>albendazole tab 200 mg</i>	2	PA, QL
BENZNIDAZOLE TAB 12.5MG	3	
BENZNIDAZOLE TAB 100MG	3	
BILTRICIDE TAB 600MG	3	PA, QL
EMVERM CHW 100MG	2	PA, QL
<i>ivermectin tab 3 mg</i>	1	
<i>praziquantel tab 600 mg</i>	2	QL
STROMECTOL TAB 3MG	3	

**ANTI-INFECTIVE AGENTS - MISC.**

**ANTI-INFECTIVE AGENTS - MISC.**

AEMCOLO TAB 194MG	3	
<i>bacitracin intramuscular for soln 50000 unit</i>	1	
FIRST-METRON SUS 100MG/ML	NC	
FLAGYL CAP 375MG	3	
IMPAVIDO CAP 50MG	3	
LIKMEZ SUS 500/5ML	NC	
METRONIDAZOL INJ 500MG	3	
<i>metronidazole cap 375 mg</i>	2	
<i>metronidazole iv soln 500 mg/100ml</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
NEBUPENT INH 300MG	3	
PENTAM 300 INJ 300MG	3	
<i>pentamidine isethionate for inj soln 300 mg</i>	1	
<i>pentamidine isethionate for nebulization soln 300 mg</i>	NC	
<i>tinidazole tab 250 mg</i>	2	
<i>tinidazole tab 500 mg</i>	2	
<i>trimethoprim tab 100 mg</i>	1	
XIFAXAN TAB 200MG	3	
XIFAXAN TAB 550MG	2	

**ANTI-INFECTIVE MISC. - COMBINATIONS**

BACTRIM DS TAB 800-160	3	
BACTRIM TAB 400-80MG	3	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>sulfatrim pd sus 200-40/5</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>uro-sp cap 118mg</i>	1	
XACDURO INJ 1-1GM	3	
<b>ANTIPROTOZOAL AGENTS</b>		
ALINIA SUS 100/5ML	3	
ALINIA TAB 500MG	3	
<i>atovaquone susp 750 mg/5ml</i>	2	
LAMPIT TAB 30MG	3	
LAMPIT TAB 120MG	3	
MEPRON SUS	3	
<i>nitazoxanide tab 500 mg</i>	2	
<b>CARBAPENEMS</b>		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	2	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
INVANZ INJ 1GM	3	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	2	
PRIMAXIN IV INJ 500MG	3	
RECARBRIO INJ 1.25GM	3	
VABOMERE INJ 2GM(1-1)	3	
<b>CHLORAMPHENICOLS</b>		
<i>chloramphenicol sodium succinate for iv inj 1 gm</i>	1	
<b>CYCLIC LIPOPEPTIDES</b>		
CUBICIN RF INJ 500MG	3	
<i>daptomycin for iv soln 350 mg</i>	2	
<i>daptomycin for iv soln 500 mg</i>	2	
DAPTOMYCIN INJ 350MG	3	
DAPTOMYCIN INJ 500MG	3	
<b>GLYCOPEPTIDES</b>		
DALVANCE SOL 500MG	3	
FIRVANQ SOL 25MG/ML	NC	
FIRVANQ SOL 50MG/ML	NC	
KIMYRSA INJ 1200MG	NC	
ORBACTIV SOL 400MG	3	
VANCOCIN CAP 125MG	3	
VANCOCIN CAP 250MG	3	
VANCOMY/NAACL INJ 1.5/250	3	
VANCOMY/NAACL INJ 1.5/500	3	
VANCOMY/NAACL INJ 1.25/250	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VANCOMY/NAACL INJ 1.75/250	3	
VANCOMY/NAACL INJ 1/250ML	3	
VANCOMY/NAACL INJ 2/500ML	3	
VANCOMY/NAACL INJ 750/150	3	
VANCOMYC/D5W INJ 1.5/250	3	
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
VANCOMYC/D5W INJ 1GM	3	
VANCOMYC/D5W INJ 500MG	3	
VANCOMYC/D5W INJ 750MG	3	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	2	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 100 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	1	
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	2	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	2	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 1.5/300	3	
VANCOMYCIN INJ 1.5GM	3	
VANCOMYCIN INJ 1.25GM	3	
VANCOMYCIN INJ 1GM/200M	3	
VANCOMYCIN INJ 5GM	3	
VANCOMYCIN INJ 10GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VANCOMYCIN SOL 1.75GM	3	
VANCOMYCIN SOL 2G/400ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIBATIV INJ 750MG	3	
<b>LEPROSTATICS</b>		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
<b>LINCOSAMIDES</b>		
CLEOCIN CAP 75MG	3	
CLEOCIN CAP 150MG	3	
CLEOCIN CAP 300MG	3	
CLEOCIN PED SOL 75MG/5ML	3	
CLEOCIN PHOS INJ 9GM/60ML	3	
CLEOCIN PHOS INJ 300/2ML	3	
CLEOCIN PHOS INJ 600/4ML	3	
CLEOCIN PHOS INJ 900/6ML	3	
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	1	
<i>clindamycin phosphate inj 9 gm/60ml</i>	1	
<i>clindamycin phosphate inj 300 mg/2ml</i>	1	
<i>clindamycin phosphate inj 600 mg/4ml</i>	1	
<i>clindamycin phosphate inj 900 mg/6ml</i>	1	
LINCOCIN INJ 300MG/ML	3	
LINCOCIN INJ 600/2ML	3	
<i>lincomycin hcl inj 300 mg/ml</i>	1	
<b>MONOBACTAMS</b>		
AZACTAM INJ 1GM	3	
AZACTAM INJ 2GM	3	
<i>aztreonam for inj 1 gm</i>	1	
<i>aztreonam for inj 2 gm</i>	1	
CAYSTON INH 75MG	NC	
<b>OXAZOLIDINONES</b>		
<i>linezolid for susp 100 mg/5ml</i>	2	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	2	
<i>linezolid tab 600 mg</i>	1	
SIVEXTRO INJ 200MG	3	PA

Drug Name	Drug Tier	Requirements/Limits
SIVEXTRO TAB 200MG	3	PA
ZYVOX SOL 2MG/ML	3	
ZYVOX SUS 100MG/5M	3	
ZYVOX TAB 600MG	3	

### **POLYMYXINS**

<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	2	
COLY-MYCIN M INJ 150MG	3	
<i>polymyxin b sulfate for inj 500000 unit</i>	1	

### **URINARY ANTI-INFECTIVES**

<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	2	
HIPREX TAB 1GM	3	
MACROBID CAP 100MG	3	
MACRODANTIN CAP 25MG	NC	
MACRODANTIN CAP 50MG	NC	
MACRODANTIN CAP 100MG	NC	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>methenamine mandelate tab 0.5 gm</i>	1	
<i>methenamine mandelate tab 1 gm</i>	1	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	2	
<i>nitrofurantoin susp 25 mg/5ml</i>	NC	

### **ANTIANGINAL AGENTS**

#### **ANTIANGINALS-OTHER**

RANEXA TAB 500MG	3	
RANEXA TAB 1000MG	3	
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	

#### **NITRATES**

GONITRO POW 400MCG	NC	
ISORDIL TAB 5MG	3	PV
ISORDIL TAB 40MG	3	PV
<i>isosorbide dinitrate tab 5 mg</i>	1	PV
<i>isosorbide dinitrate tab 10 mg</i>	1	PV
<i>isosorbide dinitrate tab 20 mg</i>	1	PV
<i>isosorbide dinitrate tab 30 mg</i>	1	PV
<i>isosorbide dinitrate tab 40 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>isosorbide mononitrate tab 10 mg</i>	1	PV
<i>isosorbide mononitrate tab 20 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	PV
NITRO-BID OIN 2%	3	PV
NITRO-DUR DIS 0.1MG/HR	3	PV
NITRO-DUR DIS 0.2MG/HR	3	PV
NITRO-DUR DIS 0.3MG/HR	3	PV
NITRO-DUR DIS 0.4MG/HR	3	PV
NITRO-DUR DIS 0.6MG/HR	3	PV
NITRO-DUR DIS 0.8MG/HR	3	PV
NITROGLYCER INJ 5MG/ML	3	
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>	1	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	PV
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	2	PV
NITROLINGUAL SPR 400MCG	3	PV
NITROMIST AER 400MCG	3	PV
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	

## **ANTIANXIETY AGENTS**

### **ANTIANXIETY AGENTS - MISC.**

<i>bupirone hcl tab 5 mg</i>	1	
<i>bupirone hcl tab 7.5 mg</i>	1	
<i>bupirone hcl tab 10 mg</i>	1	
<i>bupirone hcl tab 15 mg</i>	1	
<i>bupirone hcl tab 30 mg</i>	1	
<i>droperidol inj 2.5 mg/ml</i>	1	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	2	
<i>hydroxyzine hcl im soln 50 mg/ml</i>	2	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydroxyzine hcl tab 50 mg</i>	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
<i>meprobamate tab 200 mg</i>	2	
<i>meprobamate tab 400 mg</i>	2	
VISTARIL CAP 25MG	3	

### **BENZODIAZEPINES**

ALPRAZOLAM CON 1 MG/ML	3	
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	
<i>alprazolam orally disintegrating tab 1 mg</i>	1	
<i>alprazolam orally disintegrating tab 2 mg</i>	1	
<i>alprazolam tab 0.5 mg</i>	1	
<i>alprazolam tab 0.5mg xr</i>	1	
<i>alprazolam tab 0.25 mg</i>	1	
<i>alprazolam tab 1 mg</i>	1	
<i>alprazolam tab 1mg xr</i>	1	
<i>alprazolam tab 2 mg</i>	1	
<i>alprazolam tab 2mg xr</i>	1	
<i>alprazolam tab 3mg xr</i>	1	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
ATIVAN INJ 2MG/ML	NC	
ATIVAN INJ 4MG/ML	NC	
ATIVAN TAB 0.5MG	NC	
ATIVAN TAB 1MG	NC	
ATIVAN TAB 2MG	NC	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>clorazepate dipotassium tab 3.75 mg</i>	1	
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>diazepam conc 5 mg/ml</i>	2	
<i>diazepam inj 5 mg/ml</i>	2	
DIAZEPAM INJ 5MG/ML	3	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam tab 10 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lorazepam conc 2 mg/ml</i>	1	
<i>lorazepam inj 2 mg/ml</i>	1	
<i>lorazepam inj 4 mg/ml</i>	1	
<i>lorazepam tab 0.5 mg</i>	1	
<i>lorazepam tab 1 mg</i>	1	
<i>lorazepam tab 2 mg</i>	1	
LOREEV XR CAP 1.5MG	3	
LOREEV XR CAP 1MG	3	
LOREEV XR CAP 2MG	3	
LOREEV XR CAP 3MG	3	
<i>oxazepam cap 10 mg</i>	1	
<i>oxazepam cap 15 mg</i>	1	
<i>oxazepam cap 30 mg</i>	1	
TRANXENE T TAB 7.5MG	3	
VALIUM TAB 2MG	3	
VALIUM TAB 5MG	3	
VALIUM TAB 10MG	3	
XANAX TAB 0.5MG	NC	
XANAX TAB 0.25MG	NC	
XANAX TAB 1MG	NC	
XANAX TAB 2MG	NC	
XANAX XR TAB 0.5MG	NC	
XANAX XR TAB 1MG	NC	
XANAX XR TAB 2MG	NC	
XANAX XR TAB 3MG	NC	

### **ANTIARRHYTHMICS**

#### **ANTIARRHYTHMICS - MISC.**

<i>adenosine iv soln 6 mg/2ml</i>	1	
<i>adenosine iv soln 12 mg/4ml</i>	1	

#### **ANTIARRHYTHMICS TYPE I-A**

<i>disopyramide phosphate cap 100 mg</i>	1	PV
<i>disopyramide phosphate cap 150 mg</i>	1	PV
NORPACE CAP 100MG	NC	
NORPACE CAP 100MG CR	3	PV
NORPACE CAP 150MG	NC	
NORPACE CAP 150MG CR	3	PV
<i>procainamide hcl inj 100 mg/ml</i>	1	
<i>procainamide hcl inj 500 mg/ml</i>	1	
<i>quinidine gluconate tab er 324 mg</i>	2	

#### **ANTIARRHYTHMICS TYPE I-B**

<i>lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)</i>	1	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lidocaine hcl (cardiac) iv soln pref syr 50 mg/5ml (1%)</i>	1	
<i>lidocaine hcl (cardiac) iv soln pref syr 100 mg/5ml (2%)</i>	2	
<i>lidocaine hcl(cardiac) iv pf soln pref syr 100 mg/5ml (2%)</i>	1	
LIDOCAINE INJ 20MG/ML	3	
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	1	
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	1	
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	

### **ANTIARRHYTHMICS TYPE I-C**

<i>flecainide acetate tab 50 mg</i>	1	PV
<i>flecainide acetate tab 100 mg</i>	1	PV
<i>flecainide acetate tab 150 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 225 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 325 mg</i>	1	PV
<i>propafenone hcl cap er 12hr 425 mg</i>	2	PV
<i>propafenone hcl tab 150 mg</i>	1	PV
<i>propafenone hcl tab 225 mg</i>	1	PV
<i>propafenone hcl tab 300 mg</i>	1	PV

### **ANTIARRHYTHMICS TYPE III**

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	1	
<i>amiodarone hcl tab 100 mg</i>	1	PV
<i>amiodarone hcl tab 200 mg</i>	1	PV
<i>amiodarone hcl tab 400 mg</i>	1	PV
CORVERT INJ 1MG/10ML	3	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	4	SP; PV
<i>dofetilide cap 250 mcg (0.25 mg)</i>	4	SP; PV
<i>dofetilide cap 500 mcg (0.5 mg)</i>	4	SP; PV
<i>ibutilide fumarate inj 1 mg/10ml</i>	1	
MULTAQ TAB 400MG	2	
NEXTERONE INJ	NC	
<i>pacerone tab 100mg</i>	1	PV
<i>pacerone tab 200mg</i>	1	PV
<i>pacerone tab 400mg</i>	1	PV
TIKOSYN CAP 125MCG	6	SP; PV
TIKOSYN CAP 250MCG	6	SP; PV
TIKOSYN CAP 500MCG	6	SP; PV

### **ANTIASTHMATIC AND BRONCHODILATOR AGENTS**

Drug Name	Drug Tier	Requirements/Limits
<b>ANTI-INFLAMMATORY AGENTS</b>		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	PV
<b>ANTIASTHMATIC - MONOCLONAL ANTIBODIES</b>		
CINQAIR INJ	NC	
FASENRA INJ 30MG/ML	5	SP, PA, QL; PV
FASENRA PEN INJ 30MG/ML	5	SP, PA, QL; PV
NUCALA INJ 40MG/0.4	5	SP, PA, QL; PV
NUCALA INJ 100MG	NC	
NUCALA INJ 100MG/ML	5	SP, PA, QL; PV
TEZSPIRE INJ 210MG	5	SP, PA, QL
TEZSPIRE SOL 210MG	5	SP, PA, QL
XOLAIR INJ 75/0.5	5	SP, PA, QL; PV
XOLAIR INJ 150MG/ML	5	SP, PA, QL; PV
XOLAIR INJ 300/2ML	5	SP, PA, QL; PV
XOLAIR SOL 150MG	5	SP, PA, QL; PV
<b>BRONCHODILATORS - ANTICHOLINERGICS</b>		
ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	NC	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
LONHALA MAGN SOL 25MCG	NC	
SEEBRI NEOHA CAP 15.6MCG	NC	
SPIRIVA AER 1.25MCG	2	PV
SPIRIVA CAP HANDIHLR	2	
SPIRIVA SPR 2.5MCG	2	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	2	
TUDORZA PRES AER 400/ACT	NC	
YUPELRI SOL	2	
<b>LEUKOTRIENE MODULATORS</b>		
ACCOLATE TAB 10MG	3	PV
ACCOLATE TAB 20MG	3	PV
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	PV
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	PV
SINGULAIR CHW 4MG	NC	
SINGULAIR CHW 5MG	NC	
SINGULAIR GRA 4MG	NC	
SINGULAIR TAB 10MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>zafirlukast tab 10 mg</i>	1	PV
<i>zafirlukast tab 20 mg</i>	1	PV
<i>zileuton tab er 12hr 600 mg</i>	NC	
ZYFLO TAB 600MG	NC	

### **SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS**

DALIRESP TAB 250MCG	NC	
DALIRESP TAB 500MCG	NC	
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	

### **STEROID INHALANTS**

ALVESCO AER 80MCG	NC	
ALVESCO AER 160MCG	NC	
ARNUITY ELPT INH 50MCG	NC	
ARNUITY ELPT INH 100MCG	NC	
ARNUITY ELPT INH 200MCG	NC	
ASMANEX 7 AER 110MCG	NC	
ASMANEX 14 AER 220MCG	NC	
ASMANEX 30 AER 110MCG	NC	
ASMANEX 30 AER 220MCG	NC	
ASMANEX 60 AER 220MCG	NC	
ASMANEX 120 AER 220MCG	NC	
ASMANEX HFA AER 100 MCG	NC	
ASMANEX HFA AER 200 MCG	NC	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 1 mg/2ml</i>	2	PA, QL; PV
FLOVENT DISK AER 50MCG	NC	
FLOVENT DISK AER 100MCG	NC	
FLOVENT DISK AER 250MCG	NC	
FLOVENT HFA AER 44MCG	NC	
FLOVENT HFA AER 110MCG	NC	
FLOVENT HFA AER 220MCG	NC	
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	1	QL
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	1	QL
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	2	QL
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	NC	
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	NC	
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	NC	
PULMICORT INH 90MCG	2	PA, QL; PV
PULMICORT INH 180MCG	2	PA, QL; PV
PULMICORT SUS 0.5MG/2	3	PA, QL; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PULMICORT SUS 0.25MG/2	3	PA, QL; PV
PULMICORT SUS 1MG/2ML	3	PA, QL; PV
QVAR REDIIHA AER 80MCG	NC	Covered for age 6 and under
QVAR REDIIHAL AER 40MCG	NC	Covered for age 6 and under

### **SYMPATHOMIMETICS**

ADVAIR DISKU AER 100/50	NC	
ADVAIR DISKU AER 250/50	NC	
ADVAIR DISKU AER 500/50	NC	
ADVAIR HFA AER 45/21	NC	
ADVAIR HFA AER 115/21	NC	
ADVAIR HFA AER 230/21	NC	
AIRDUO RESPI INH 55-14	NC	
AIRDUO RESPI INH 113-14	NC	
AIRDUO RESPI INH 232-14	NC	
AIRSUPRA AER 90-80MCG	2	QL
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of PROAIR HFA
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of PROVENTIL HFA
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of VENTOLIN HFA
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	2	
<i>albuterol sulfate tab 4 mg</i>	2	
ANORO ELLIPT AER 62.5-25	2	QL
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	2	QL; PV
BEVESPI AER 9-4.8MCG	NC	
BREO ELLIPTA INH 50-25MCG	2	QL; PV
BREO ELLIPTA INH 100-25	2	QL; PV
BREO ELLIPTA INH 200-25	2	QL; PV
<i>breyana aer 80/4.5</i>	NC	
<i>breyana aer 160/4.5</i>	NC	
BREZTRI AERO AER SPHERE	2	QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BROVANA NEB 15MCG	3	QL; PV
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	QL; PV
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	QL; PV
COMBIVENT AER 20-100	3	
DUAKLIR AER 400/12	NC	
DULERA AER 50-5MCG	3	QL; PV
DULERA AER 100-5MCG	3	QL; PV
DULERA AER 200-5MCG	3	QL; PV
<i>fluticasone furoate-vilanterol aero powd ba 200-25 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	QL; PV
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	QL; PV
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	QL; PV; (except NDC 66993058697 is NC)
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	1	QL; PV; (except NDC 66993008696 is NC)
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	1	QL; PV; (except NDC 66993008796 is NC)
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	1	QL; PV; (except NDC 66993008896 is NC)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	2	QL
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	2	QL
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	QL
PERFOROMIST NEB 20MCG	3	QL
PROAIR HFA AER	NC	
PROAIR RESPI AER	NC	
PROVENTIL AER HFA	NC	
SEREVENT DIS AER 50MCG	2	QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
STIOLTO AER 2.5-2.5	2	QL
STRIVERDI AER 2.5MCG	2	QL
SYMBICORT AER 80-4.5	NC	
SYMBICORT AER 160-4.5	NC	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	2	
TRELEGY AER 100MCG	2	QL; PV
TRELEGY AER 200MCG	2	QL; PV
UTIBRON CAP NEOHALER	NC	
VENTOLIN HFA AER	NC	
<i>wixela inhub aer 100/50</i>	1	QL; PV
<i>wixela inhub aer 250/50</i>	1	QL; PV
<i>wixela inhub aer 500/50</i>	1	QL; PV
XOPENEX CONC NEB 1.25/0.5	3	QL
XOPENEX HFA AER	NC	
XOPENEX NEB 0.31MG	3	QL
XOPENEX NEB 0.63MG	3	QL
XOPENEX NEB 1.25/3ML	3	QL

### **XANTHINES**

<i>aminophylline inj 25 mg/ml</i>	1	
<i>elixophyllin elx 80/15ml</i>	1	
THEO-24 CAP 100MG CR	NC	
THEO-24 CAP 200MG CR	NC	
THEO-24 CAP 300MG CR	NC	
THEO-24 CAP 400MG ER	NC	
<i>theophylline elixir 80 mg/15ml</i>	1	
<i>theophylline soln 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	

### **ANTICOAGULANTS**

#### **COUMARIN ANTICOAGULANTS**

COUMADIN TAB 1MG	NC	
COUMADIN TAB 2.5MG	NC	
COUMADIN TAB 2MG	NC	
COUMADIN TAB 3MG	NC	
COUMADIN TAB 4MG	NC	
COUMADIN TAB 5MG	NC	
COUMADIN TAB 6MG	NC	
COUMADIN TAB 7.5MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COUMADIN TAB 10MG	NC	
<i>jantoven tab 1mg</i>	1	PV
<i>jantoven tab 2.5mg</i>	1	PV
<i>jantoven tab 2mg</i>	1	PV
<i>jantoven tab 3mg</i>	1	PV
<i>jantoven tab 4mg</i>	1	PV
<i>jantoven tab 5mg</i>	1	PV
<i>jantoven tab 6mg</i>	1	PV
<i>jantoven tab 7.5mg</i>	1	PV
<i>jantoven tab 10mg</i>	1	PV
<i>warfarin sodium tab 1 mg</i>	1	PV
<i>warfarin sodium tab 2 mg</i>	1	PV
<i>warfarin sodium tab 2.5 mg</i>	1	PV
<i>warfarin sodium tab 3 mg</i>	1	PV
<i>warfarin sodium tab 4 mg</i>	1	PV
<i>warfarin sodium tab 5 mg</i>	1	PV
<i>warfarin sodium tab 6 mg</i>	1	PV
<i>warfarin sodium tab 7.5 mg</i>	1	PV
<i>warfarin sodium tab 10 mg</i>	1	PV
<b>DIRECT FACTOR XA INHIBITORS</b>		
BEVYXXA CAP 40MG	NC	
BEVYXXA CAP 80MG	NC	
ELIQUIS ST P TAB 5MG	2	PV
ELIQUIS TAB 2.5MG	2	PV
ELIQUIS TAB 5MG	2	PV
SAVAYSA TAB 15MG	NC	
SAVAYSA TAB 30MG	NC	
SAVAYSA TAB 60MG	NC	
XARELTO STAR TAB 15/20MG	2	PV
XARELTO SUS 1MG/ML	2	PV
XARELTO TAB 2.5MG	2	PV
XARELTO TAB 10MG	2	PV
XARELTO TAB 15MG	2	PV
XARELTO TAB 20MG	2	PV
<b>HEPARINS AND HEPARINOID-LIKE AGENTS</b>		
ARIXTRA INJ 2.5/0.5	3	PV
ARIXTRA INJ 5/0.4ML	3	PV
ARIXTRA INJ 7.5/0.6	3	PV
ARIXTRA INJ 10/0.8ML	3	PV
<i>enoxaparin sodium inj 300 mg/3ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	2	PV
FRAGMIN INJ 2500/0.2	2	PV
FRAGMIN INJ 5000/0.2	2	PV
FRAGMIN INJ 7500/0.3	2	PV
FRAGMIN INJ 10000/ML	2	PV
FRAGMIN INJ 12500UNT	2	PV
FRAGMIN INJ 15000UNT	2	PV
FRAGMIN INJ 18000UNT	2	PV
FRAGMIN INJ 95000UNT	2	PV
HEP SOD/D5W INJ 100/ML	NC	
HEP SOD/D5W INJ 20000UNT	NC	
HEP SOD/D5W INJ 25000UNT	NC	
HEP SOD/DEXT INJ 25000UNT	NC	
HEP SOD/NAACL INJ 12500UNT	3	
HEP SOD/NAACL INJ 25000UNT	NC	
<i>heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%</i>	1	
<i>heparin sod (porcine)-nacl iv soln 2000 unit/l-0.9%</i>	1	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	NC	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	2	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	NC	
LOVENOX INJ 30/0.3ML	3	PV
LOVENOX INJ 40/0.4ML	3	PV
LOVENOX INJ 60/0.6ML	3	PV
LOVENOX INJ 80/0.8ML	3	PV
LOVENOX INJ 100MG/ML	3	PV
LOVENOX INJ 120/0.8	3	PV
LOVENOX INJ 150MG/ML	3	PV
LOVENOX INJ 300/3ML	3	PV

### **IN VITRO/LOCK ANTICOAGULANTS**

ACD FORMULA SOL A	3	
ANTICOAGULNT SOL SOD CITR	3	
NOCLOT-50 SOL ACD-A	3	
TRICITRASOL CON	3	

### **THROMBIN INHIBITORS**

ANGIOMAX INJ 250MG	3	
ARGATROBAN INJ 50/50ML	3	
ARGATROBAN INJ 50MG/50M	3	
ARGATROBAN INJ 100MG/ML	3	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	1	
ARGATROBAN INJ 250/2.5	3	
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i>	1	
BIVALIR/NAACL INJ 250/50	NC	
BIVALIR/NAACL INJ 500/100	NC	
<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	1	
<i>bivalirudin trifluoroacetate iv soln 250 mg/50ml (base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	2	PV
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	1	PV
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	2	PV
PRADAXA CAP 75MG	NC	
PRADAXA CAP 110MG	NC	
PRADAXA CAP 150MG	NC	

### **ANTICONVULSANTS**

#### **AMPA GLUTAMATE RECEPTOR ANTAGONISTS**

FYCOMPA SUS 0.5MG/ML	2	PV
FYCOMPA TAB 2MG	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FYCOMPA TAB 4MG	2	PV
FYCOMPA TAB 6MG	2	PV
FYCOMPA TAB 8MG	2	PV
FYCOMPA TAB 10MG	2	PV
FYCOMPA TAB 12MG	2	PV

### **ANTICONVULSANTS - BENZODIAZEPINES**

<i>clobazam suspension 2.5 mg/ml</i>	1	PA; PV
<i>clobazam tab 10 mg</i>	1	PA; PV
<i>clobazam tab 20 mg</i>	1	PA; PV
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 1 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 2 mg</i>	1	PV
<i>clonazepam tab 0.5 mg</i>	1	PV
<i>clonazepam tab 1 mg</i>	1	PV
<i>clonazepam tab 2 mg</i>	1	PV
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
KLONOPIN TAB 0.5MG	3	PV
KLONOPIN TAB 1MG	3	PV
KLONOPIN TAB 2MG	3	PV
LIBERVANT MIS 5MG	NC	
LIBERVANT MIS 7.5MG	NC	
LIBERVANT MIS 10MG	NC	
LIBERVANT MIS 12.5MG	NC	
LIBERVANT MIS 15MG	NC	
NAYZILAM SPR 5MG	2	
ONFI SUS 2.5MG/ML	NC	
ONFI TAB 10MG	NC	
ONFI TAB 20MG	NC	
VALTOCO SPR 5MG	2	
VALTOCO SPR 10MG	2	
VALTOCO SPR 15MG	2	
VALTOCO SPR 20MG	2	

### **ANTICONVULSANTS - MISC.**

APTIOM TAB 200MG	2	PV
APTIOM TAB 400MG	2	PV
APTIOM TAB 600MG	2	PV
APTIOM TAB 800MG	2	PV
BANZEL SUS 40MG/ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BANZEL TAB 200MG	NC	
BANZEL TAB 400MG	NC	
BRIVIACT INJ 50MG/5ML	3	PV
BRIVIACT SOL 10MG/ML	3	PV
BRIVIACT TAB 10MG	3	PV
BRIVIACT TAB 25MG	3	PV
BRIVIACT TAB 50MG	3	PV
BRIVIACT TAB 75MG	3	PV
BRIVIACT TAB 100MG	3	PV
<i>carbamazepine cap er 12hr 100 mg</i>	1	PV
<i>carbamazepine cap er 12hr 200 mg</i>	1	PV
<i>carbamazepine cap er 12hr 300 mg</i>	1	PV
<i>carbamazepine chew tab 100 mg</i>	1	PV
<i>carbamazepine susp 100 mg/5ml</i>	1	PV
<i>carbamazepine tab 200 mg</i>	1	PV
<i>carbamazepine tab er 12hr 100 mg</i>	1	PV
<i>carbamazepine tab er 12hr 200 mg</i>	1	PV
<i>carbamazepine tab er 12hr 400 mg</i>	1	PV
CARBATROL CAP 100MG	3	PV
CARBATROL CAP 200MG	3	PV
CARBATROL CAP 300MG	3	PV
DIACOMIT CAP 250MG	NC	
DIACOMIT CAP 500MG	NC	
DIACOMIT PAK 250MG	NC	
DIACOMIT PAK 500MG	NC	
ELEPSIA XR TAB 1000MG	NC	
ELEPSIA XR TAB 1500MG	NC	
EPIDIOLEX SOL 100MG/ML	6	SP, PA, QL; PV
<i>epitol tab 200mg</i>	1	PV
FINTEPLA SOL 2.2MG/ML	NC	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
KEPPRA INJ 500/5ML	NC	
KEPPRA SOL 100MG/ML	NC	
KEPPRA TAB 250MG	NC	
KEPPRA TAB 500MG	NC	
KEPPRA TAB 750MG	NC	
KEPPRA TAB 1000MG	NC	
KEPPRA XR TAB 500MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KEPPRA XR TAB 750MG	NC	
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	1	PV
<i>lacosamide oral solution 10 mg/ml</i>	2	PV
<i>lacosamide tab 50 mg</i>	2	PV
<i>lacosamide tab 100 mg</i>	2	PV
<i>lacosamide tab 150 mg</i>	2	PV
<i>lacosamide tab 200 mg</i>	2	PV
LAMICTAL CHW 5MG	NC	
LAMICTAL CHW 25MG	NC	
LAMICTAL KIT START 35	NC	
LAMICTAL KIT START 49	NC	
LAMICTAL KIT START 98	NC	
LAMICTAL ODT KIT	NC	
LAMICTAL ODT TAB 25MG	NC	
LAMICTAL ODT TAB 50MG	NC	
LAMICTAL ODT TAB 100MG	NC	
LAMICTAL ODT TAB 200MG	NC	
LAMICTAL TAB 25MG	NC	
LAMICTAL TAB 100MG	NC	
LAMICTAL TAB 150MG	NC	
LAMICTAL TAB 200MG	NC	
LAMICTAL XR KIT	NC	
LAMICTAL XR TAB 25MG	NC	
LAMICTAL XR TAB 50MG	NC	
LAMICTAL XR TAB 100MG	NC	
LAMICTAL XR TAB 200MG	NC	
LAMICTAL XR TAB 250MG	NC	
LAMICTAL XR TAB 300MG	NC	
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	PV
<i>lamotrigine tab 25 mg</i>	1	PV
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit</i>	2	PV
<i>lamotrigine tab 35 x 25 mg starter kit</i>	2	PV
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i>	2	PV
<i>lamotrigine tab 100 mg</i>	1	PV
<i>lamotrigine tab 150 mg</i>	1	PV
<i>lamotrigine tab 200 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i>	2	PV
<i>lamotrigine tab er 24hr 25 mg</i>	1	PV
<i>lamotrigine tab er 24hr 25 mg</i>	NC	(applies to NDC 31722024030 only)
<i>lamotrigine tab er 24hr 50 mg</i>	2	PV
<i>lamotrigine tab er 24hr 50 mg</i>	NC	(applies to NDC 31722024130 only)
<i>lamotrigine tab er 24hr 100 mg</i>	2	PV
<i>lamotrigine tab er 24hr 100 mg</i>	NC	(applies to NDC 31722024230 only)
<i>lamotrigine tab er 24hr 200 mg</i>	2	PV
<i>lamotrigine tab er 24hr 200 mg</i>	NC	(applies to NDC 31722024330 only)
<i>lamotrigine tab er 24hr 250 mg</i>	2	PV
<i>lamotrigine tab er 24hr 250 mg</i>	NC	(applies to NDC 31722024430 only)
<i>lamotrigine tab er 24hr 300 mg</i>	2	PV
<i>lamotrigine tab er 24hr 300 mg</i>	NC	(applies to NDC 31722024530 only)
LEVETIR/NACL SOL 250/50ML	3	
LEVETIRACETA INJ 5MG/ML	3	
LEVETIRACETA INJ 10MG/ML	3	
LEVETIRACETA INJ 15MG/ML	3	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	PV
<i>levetiracetam tab 250 mg</i>	1	PV
<i>levetiracetam tab 500 mg</i>	1	PV
<i>levetiracetam tab 750 mg</i>	1	PV
<i>levetiracetam tab 1000 mg</i>	1	PV
<i>levetiracetam tab er 24hr 500 mg</i>	1	PV
<i>levetiracetam tab er 24hr 750 mg</i>	2	PV
LYRICA CAP 25MG	NC	
LYRICA CAP 50MG	NC	
LYRICA CAP 75MG	NC	
LYRICA CAP 100MG	NC	
LYRICA CAP 150MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LYRICA CAP 200MG	NC	
LYRICA CAP 225MG	NC	
LYRICA CAP 300MG	NC	
LYRICA SOL 20MG/ML	NC	
MOTPOLY XR CAP 100MG	NC	
MOTPOLY XR CAP 150MG	NC	
MOTPOLY XR CAP 200MG	NC	
MYSOLINE TAB 50MG	3	PV
MYSOLINE TAB 250MG	3	PV
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	PV
<i>oxcarbazepine tab 150 mg</i>	1	PV
<i>oxcarbazepine tab 300 mg</i>	1	PV
<i>oxcarbazepine tab 600 mg</i>	1	PV
OXTELLAR XR TAB 150MG	2	PV
OXTELLAR XR TAB 300MG	2	PV
OXTELLAR XR TAB 600MG	2	PV
<i>pregabalin cap 25 mg</i>	1	
<i>pregabalin cap 50 mg</i>	1	
<i>pregabalin cap 75 mg</i>	1	
<i>pregabalin cap 100 mg</i>	1	
<i>pregabalin cap 150 mg</i>	1	
<i>pregabalin cap 200 mg</i>	1	
<i>pregabalin cap 225 mg</i>	1	
<i>pregabalin cap 300 mg</i>	1	
<i>pregabalin soln 20 mg/ml</i>	2	
<i>primidone tab 50 mg</i>	1	PV
<i>primidone tab 250 mg</i>	1	PV
QUDEXY XR CAP 25/24HR	3	PV
QUDEXY XR CAP 50/24HR	3	PV
QUDEXY XR CAP 100/24HR	3	PV
QUDEXY XR CAP 150/24HR	3	PV
QUDEXY XR CAP 200/24HR	3	PV
<i>roweepra tab 500mg</i>	1	PV
<i>rufinamide susp 40 mg/ml</i>	2	PV
<i>rufinamide tab 200 mg</i>	2	PV
<i>rufinamide tab 400 mg</i>	2	PV
<i>subvenite kit start 35</i>	2	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>subvenite kit start 49</i>	2	PV
<i>subvenite kit start 98</i>	2	PV
<i>subvenite tab 25mg</i>	1	PV
<i>subvenite tab 100mg</i>	1	PV
<i>subvenite tab 150mg</i>	1	PV
<i>subvenite tab 200mg</i>	1	PV
TEGRETOL SUS 100/5ML	NC	
TEGRETOL TAB 200MG	NC	
TEGRETOL-XR TAB 100MG	NC	
TEGRETOL-XR TAB 200MG	NC	
TEGRETOL-XR TAB 400MG	NC	
TOPAMAX SPR CAP 15MG	3	PV
TOPAMAX SPR CAP 25MG	3	PV
TOPAMAX TAB 25MG	3	PV
TOPAMAX TAB 50MG	3	PV
TOPAMAX TAB 100MG	3	PV
TOPAMAX TAB 200MG	3	PV
<i>topiramate cap er 24hr 25 mg</i>	2	
<i>topiramate cap er 24hr 50 mg</i>	2	
<i>topiramate cap er 24hr 100 mg</i>	2	
<i>topiramate cap er 24hr 200 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 25 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 200 mg</i>	NC	
<i>topiramate sprinkle cap 15 mg</i>	1	PV
<i>topiramate sprinkle cap 25 mg</i>	1	PV
<i>topiramate tab 25 mg</i>	1	PV
<i>topiramate tab 50 mg</i>	1	PV
<i>topiramate tab 100 mg</i>	1	PV
<i>topiramate tab 200 mg</i>	1	PV
TRILEPTAL SUS 300MG/5M	NC	
TRILEPTAL TAB 150MG	NC	
TRILEPTAL TAB 300MG	NC	
TRILEPTAL TAB 600MG	NC	
TROKENDI XR CAP 25MG	3	PV
TROKENDI XR CAP 50MG	3	PV
TROKENDI XR CAP 100MG	3	PV
TROKENDI XR CAP 200MG	3	PV
VIMPAT INJ 200MG/20	NC	
VIMPAT SOL 10MG/ML	NC	
VIMPAT TAB 50MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIMPAT TAB 100MG	NC	
VIMPAT TAB 150MG	NC	
VIMPAT TAB 200MG	NC	
ZONEGRAN CAP 25MG	NC	
ZONEGRAN CAP 100MG	NC	
<i>zonisamide cap 25 mg</i>	1	PV
<i>zonisamide cap 50 mg</i>	1	PV
<i>zonisamide cap 100 mg</i>	1	PV

### **CARBAMATES**

<i>felbamate susp 600 mg/5ml</i>	1	PV
<i>felbamate tab 400 mg</i>	1	PV
<i>felbamate tab 600 mg</i>	2	PV
FELBATOL TAB 400MG	3	PV
FELBATOL TAB 600MG	3	PV
XCOPRI PAK 12.5-25	2	PV
XCOPRI PAK 50-100MG	2	PV
XCOPRI PAK 100-150	2	PV
XCOPRI PAK 150-200	2	PV
XCOPRI TAB 50MG	2	PV
XCOPRI TAB 100MG	2	PV
XCOPRI TAB 150MG	2	PV
XCOPRI TAB 200MG	2	PV

### **GABA MODULATORS**

GABITRIL TAB 2MG	2	PV
GABITRIL TAB 4MG	2	PV
GABITRIL TAB 12MG	2	PV
GABITRIL TAB 16MG	2	PV
SABRIL POW 500MG	NC	
SABRIL TAB 500MG	NC	
<i>tiagabine hcl tab 2 mg</i>	1	PV
<i>tiagabine hcl tab 4 mg</i>	2	PV
<i>tiagabine hcl tab 12 mg</i>	2	PV
<i>tiagabine hcl tab 16 mg</i>	1	PV
<i>vigabatrin powd pack 500 mg</i>	4	SP, PA, QL; PV
<i>vigabatrin tab 500 mg</i>	4	SP, PA, QL; PV
<i>vigadrone pow 500mg</i>	4	SP, PA, QL; PV
<i>vigpoder pow 500mg</i>	4	SP, PA, QL; PV

### **HYDANTOINS**

CEREBYX INJ 100/2ML	3	
CEREBYX INJ 500/10ML	3	
DILANTIN CAP 30MG	NC	
DILANTIN CAP 100MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DILANTIN CHW 50MG	NC	
DILANTIN-125 SUS 125/5ML	NC	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	1	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	1	
<i>phenytek cap 200mg</i>	1	PV
<i>phenytek cap 300mg</i>	1	PV
<i>phenytoin chew tab 50 mg</i>	1	PV
<i>phenytoin sodium extended cap 100 mg</i>	1	PV
<i>phenytoin sodium extended cap 200 mg</i>	1	PV
<i>phenytoin sodium extended cap 300 mg</i>	1	PV
<i>phenytoin sodium inj 50 mg/ml</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	PV

### **SUCCINIMIDES**

CELONTIN CAP 300MG	3	PV
<i>ethosuximide cap 250 mg</i>	1	PV
<i>ethosuximide soln 250 mg/5ml</i>	1	PV
<i>methsuximide cap 300 mg</i>	2	PV
ZARONTIN CAP 250MG	3	PV
ZARONTIN SOL 250/5ML	3	PV

### **VALPROIC ACID**

DEPAKOTE ER TAB 250MG	NC	
DEPAKOTE ER TAB 500MG	NC	
DEPAKOTE SPR CAP 125MG	NC	
DEPAKOTE TAB 125MG DR	NC	
DEPAKOTE TAB 250MG DR	NC	
DEPAKOTE TAB 500MG DR	NC	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 250 mg</i>	1	PV
<i>divalproex sodium tab delayed release 500 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	PV
<i>valproate sodium inj 100 mg/ml</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	PV
<i>valproic acid cap 250 mg</i>	1	PV

### **ANTIDEPRESSANTS**

#### **ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)**

<i>mirtazapine orally disintegrating tab 15 mg</i>	1	PV
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	PV
<i>mirtazapine tab 7.5 mg</i>	1	PV
<i>mirtazapine tab 15 mg</i>	1	PV
<i>mirtazapine tab 30 mg</i>	1	PV
<i>mirtazapine tab 45 mg</i>	1	PV
REMERON SLTB TAB 15MG	3	PV
REMERON SLTB TAB 30MG	3	PV
REMERON SLTB TAB 45MG	3	PV
REMERON TAB 15MG	3	PV
REMERON TAB 30MG	3	PV

### **ANTIDEPRESSANT COMBINATIONS**

AUVELITY TAB 45-105MG	NC	
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### **ANTIDEPRESSANTS - MISC.**

APLENZIN TAB 174MG	NC	
APLENZIN TAB 348MG	NC	
APLENZIN TAB 522MG	NC	
<i>bupropion hcl tab 75 mg</i>	1	PV
<i>bupropion hcl tab 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 200 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 300 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 450 mg</i>	NC	
FORFIVO XL TAB 450MG	3	PV
WELLBUTRIN TAB 100MG SR	3	PV
WELLBUTRIN TAB 150MG SR	3	PV
WELLBUTRIN TAB 200MG SR	3	PV
WELLBUTRIN TAB XL 150MG	NC	
WELLBUTRIN TAB XL 300MG	NC	

### **GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID**

ZURZUVAE CAP 20MG	NC	
ZURZUVAE CAP 25MG	NC	
ZURZUVAE CAP 30MG	NC	

### **MONOAMINE OXIDASE INHIBITORS (MAOIS)**

EMSAM DIS 6MG/24HR	3	PV
EMSAM DIS 9MG/24HR	3	PV
EMSAM DIS 12MG/24H	3	PV
MARPLAN TAB 10MG	3	PV
NARDIL TAB 15MG	3	PV
PARNATE TAB 10MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>phenelzine sulfate tab 15 mg</i>	1	PV
<i>tranylcypromine sulfate tab 10 mg</i>	2	PV
<b>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</b>		
SPRAVATO SOL 56MG DOS	3	PA
SPRAVATO SOL 84MG DOS	3	PA
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
CELEXA TAB 10MG	3	PV
CELEXA TAB 20MG	3	PV
CELEXA TAB 40MG	3	PV
CITALOPRAM CAP 30MG	3	PV
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	PV
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	PV
<i>fluoxetine hcl cap 10 mg</i>	1	PV
<i>fluoxetine hcl cap 20 mg</i>	1	PV
<i>fluoxetine hcl cap 40 mg</i>	1	PV
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	PV
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	PV
<i>fluoxetine hcl tab 10 mg</i>	1	PV
<i>fluoxetine hcl tab 20 mg</i>	1	PV
FLUOXETINE TAB 60MG	3	PV
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	2	PV
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	2	PV
<i>fluvoxamine maleate tab 25 mg</i>	1	PV
<i>fluvoxamine maleate tab 50 mg</i>	1	PV
<i>fluvoxamine maleate tab 100 mg</i>	1	PV
LEXAPRO TAB 5MG	NC	
LEXAPRO TAB 10MG	NC	
LEXAPRO TAB 20MG	NC	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	2	PV
<i>paroxetine hcl tab 10 mg</i>	1	PV
<i>paroxetine hcl tab 20 mg</i>	1	PV
<i>paroxetine hcl tab 30 mg</i>	1	PV
<i>paroxetine hcl tab 40 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	NC	(applies to NDC 60505367503 only)
PAXIL CR TAB 12.5MG	NC	
PAXIL CR TAB 25MG	NC	
PAXIL CR TAB 37.5MG	NC	
PAXIL SUS 10MG/5ML	NC	
PAXIL TAB 10MG	NC	
PAXIL TAB 20MG	NC	
PAXIL TAB 30MG	NC	
PAXIL TAB 40MG	NC	
PEXEVA TAB 10MG	NC	
PEXEVA TAB 20MG	NC	
PEXEVA TAB 30MG	NC	
PEXEVA TAB 40MG	NC	
PROZAC CAP 10MG	NC	
PROZAC CAP 20MG	NC	
PROZAC CAP 40MG	NC	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	PV
<i>sertraline hcl tab 25 mg</i>	1	PV
<i>sertraline hcl tab 50 mg</i>	1	PV
<i>sertraline hcl tab 100 mg</i>	1	PV
ZOLOFT CON 20MG/ML	NC	
ZOLOFT TAB 25MG	NC	
ZOLOFT TAB 50MG	NC	
ZOLOFT TAB 100MG	NC	
<b>SEROTONIN MODULATORS</b>		
<i>nefazodone hcl tab 50 mg</i>	2	PV
<i>nefazodone hcl tab 100 mg</i>	2	PV
<i>nefazodone hcl tab 150 mg</i>	1	PV
<i>nefazodone hcl tab 200 mg</i>	1	PV
<i>nefazodone hcl tab 250 mg</i>	2	PV
<i>trazodone hcl tab 50 mg</i>	1	PV
<i>trazodone hcl tab 100 mg</i>	1	PV
<i>trazodone hcl tab 150 mg</i>	1	PV
<i>trazodone hcl tab 300 mg</i>	1	PV
TRINTELLIX TAB 5MG	2	PV
TRINTELLIX TAB 10MG	2	PV
TRINTELLIX TAB 20MG	2	PV
VIIBRYD KIT STARTER	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIIBRYD TAB 10MG	NC	
VIIBRYD TAB 20MG	NC	
VIIBRYD TAB 40MG	NC	
<i>vilazodone hcl tab 10 mg</i>	1	PV
<i>vilazodone hcl tab 20 mg</i>	1	
<i>vilazodone hcl tab 40 mg</i>	1	PV
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
CYMBALTA CAP 20MG	NC	
CYMBALTA CAP 30MG	NC	
CYMBALTA CAP 60MG	NC	
DESVENLAFAX TAB 50MG ER	3	PV
DESVENLAFAX TAB 100MG ER	3	PV
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	PV
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	PV
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	PV
DRIZALMA CAP 20MG DR	NC	
DRIZALMA CAP 30MG DR	NC	
DRIZALMA CAP 40MG DR	NC	
DRIZALMA CAP 60MG DR	NC	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	PV
EFFEXOR XR CAP 37.5MG	NC	
EFFEXOR XR CAP 75MG	NC	
EFFEXOR XR CAP 150MG	NC	
FETZIMA CAP 20MG	3	PV
FETZIMA CAP 40MG	3	PV
FETZIMA CAP 80MG	3	PV
FETZIMA CAP 120MG	3	PV
FETZIMA CAP TITRATIO	3	PV
PRISTIQ TAB 25MG	NC	
PRISTIQ TAB 50MG	NC	
PRISTIQ TAB 100MG	NC	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	1	PV
VENLAFAXINE TAB 112.5MG	NC	

### **TRICYCLIC AGENTS**

<i>amitriptyline hcl tab 10 mg</i>	1	PV
<i>amitriptyline hcl tab 25 mg</i>	1	PV
<i>amitriptyline hcl tab 50 mg</i>	1	PV
<i>amitriptyline hcl tab 75 mg</i>	1	PV
<i>amitriptyline hcl tab 100 mg</i>	1	PV
<i>amitriptyline hcl tab 150 mg</i>	1	PV
<i>amoxapine tab 25 mg</i>	1	PV
<i>amoxapine tab 50 mg</i>	1	PV
<i>amoxapine tab 100 mg</i>	1	PV
<i>amoxapine tab 150 mg</i>	1	PV
ANAFRANIL CAP 25MG	3	PV
ANAFRANIL CAP 50MG	3	PV
ANAFRANIL CAP 75MG	3	PV
<i>clomipramine hcl cap 25 mg</i>	1	PV
<i>clomipramine hcl cap 50 mg</i>	1	PV
<i>clomipramine hcl cap 75 mg</i>	1	PV
<i>desipramine hcl tab 10 mg</i>	1	PV
<i>desipramine hcl tab 25 mg</i>	1	PV
<i>desipramine hcl tab 50 mg</i>	1	PV
<i>desipramine hcl tab 75 mg</i>	1	PV
<i>desipramine hcl tab 100 mg</i>	1	PV
<i>desipramine hcl tab 150 mg</i>	1	PV
<i>doxepin hcl cap 10 mg</i>	1	PV
<i>doxepin hcl cap 25 mg</i>	1	PV
<i>doxepin hcl cap 50 mg</i>	1	PV
<i>doxepin hcl cap 75 mg</i>	1	PV
<i>doxepin hcl cap 100 mg</i>	1	PV
<i>doxepin hcl cap 150 mg</i>	1	PV
<i>doxepin hcl conc 10 mg/ml</i>	1	PV
<i>imipramine hcl tab 10 mg</i>	1	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>imipramine hcl tab 25 mg</i>	1	PV
<i>imipramine hcl tab 50 mg</i>	1	PV
<i>imipramine pamoate cap 75 mg</i>	2	PV
<i>imipramine pamoate cap 100 mg</i>	2	PV
<i>imipramine pamoate cap 125 mg</i>	1	PV
<i>imipramine pamoate cap 150 mg</i>	2	PV
NORPRAMIN TAB 10MG	3	PV
NORPRAMIN TAB 25MG	3	PV
<i>nortriptyline hcl cap 10 mg</i>	1	PV
<i>nortriptyline hcl cap 25 mg</i>	1	PV
<i>nortriptyline hcl cap 50 mg</i>	1	PV
<i>nortriptyline hcl cap 75 mg</i>	1	PV
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	PV
PAMELOR CAP 10MG	3	PV
PAMELOR CAP 25MG	3	PV
PAMELOR CAP 50MG	3	PV
PAMELOR CAP 75MG	3	PV
<i>protriptyline hcl tab 5 mg</i>	2	PV
<i>protriptyline hcl tab 10 mg</i>	2	PV
<i>trimipramine maleate cap 25 mg</i>	1	PV
<i>trimipramine maleate cap 50 mg</i>	1	PV
<i>trimipramine maleate cap 100 mg</i>	1	PV

## **ANTIDIABETICS**

### **ALPHA-GLUCOSIDASE INHIBITORS**

<i>acarbose tab 25 mg</i>	1	PV
<i>acarbose tab 50 mg</i>	1	PV
<i>acarbose tab 100 mg</i>	1	PV
<i>miglitol tab 25 mg</i>	1	PV
<i>miglitol tab 50 mg</i>	2	PV
<i>miglitol tab 100 mg</i>	1	PV
PRECOSE TAB 25MG	3	PV
PRECOSE TAB 50MG	3	PV
PRECOSE TAB 100MG	3	PV

### **ANTIDIABETIC - AMYLIN ANALOGS**

SYMLINPEN 60 INJ 1000MCG	2	PV
SYMLNPEN 120 INJ 1000MCG	2	PV

### **ANTIDIABETIC COMBINATIONS**

ACTOPLUS MET TAB 15-500MG	3	PV
ACTOPLUS MET TAB 15-850MG	3	PV
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	NC	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-15 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-45 mg</i>	NC	
<i>dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg</i>	NC	
<i>dapagliflozin prop-metformin hcl tab er 24hr 10-1000 mg</i>	NC	
DUETACT TAB 30-2MG	3	PV
DUETACT TAB 30-4MG	3	PV
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	PV
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	PV
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	PV
<i>glyburide-metformin tab 1.25-250 mg</i>	1	PV
<i>glyburide-metformin tab 2.5-500 mg</i>	1	PV
<i>glyburide-metformin tab 5-500 mg</i>	1	PV
GLYXAMBI TAB 10-5 MG	2	PV
GLYXAMBI TAB 25-5 MG	2	PV
INVOKAMET TAB 50-500MG	NC	
INVOKAMET TAB 50-1000	NC	
INVOKAMET TAB 150-500	NC	
INVOKAMET TAB 150-1000	NC	
INVOKAMET XR TAB 50-500MG	NC	
INVOKAMET XR TAB 50-1000	NC	
INVOKAMET XR TAB 150-500	NC	
INVOKAMET XR TAB 150-1000	NC	
JANUMET TAB 50-500MG	2	PV
JANUMET TAB 50-1000	2	PV
JANUMET XR TAB 50-500MG	2	PV
JANUMET XR TAB 50-1000	2	PV
JANUMET XR TAB 100-1000	2	PV
JENTADUETO TAB 2.5-500	NC	
JENTADUETO TAB 2.5-850	NC	
JENTADUETO TAB 2.5-1000	NC	
JENTADUETO TAB XR	NC	
KAZANO 12.5- TAB 500MG	NC	
KAZANO 12.5- TAB 1000MG	NC	
KOMBIGLYZ XR TAB 2.5-1000	NC	
KOMBIGLYZ XR TAB 5-500MG	NC	
KOMBIGLYZ XR TAB 5-1000MG	NC	
OSENI TAB 12.5-15	NC	
OSENI TAB 12.5-30	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OSENI TAB 12.5-45	NC	
OSENI TAB 25-15MG	NC	
OSENI TAB 25-30MG	NC	
OSENI TAB 25-45MG	NC	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	2	PV
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	2	PV
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	2	PV
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	2	PV
QTERN TAB 5-5MG	NC	
QTERN TAB 10-5MG	NC	
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	2	
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	1	
SEGLUROMET TAB 2.5-500	NC	
SEGLUROMET TAB 2.5-1000	NC	
SEGLUROMET TAB 7.5-500	NC	
SEGLUROMET TAB 7.5-1000	NC	
SOLQUA INJ 100/33	0	\$0 Copay per 30-day supply
STEGLUJAN TAB 5-100MG	NC	
STEGLUJAN TAB 15-100MG	NC	
SYNJARDY TAB	2	PV
SYNJARDY TAB 5-500MG	2	PV
SYNJARDY TAB 5-1000MG	2	PV
SYNJARDY TAB 12.5-500	2	PV
SYNJARDY XR TAB	2	PV
SYNJARDY XR TAB 5-1000MG	2	PV
SYNJARDY XR TAB 10-1000	2	PV
SYNJARDY XR TAB 25-1000	2	PV
TRIJARDY XR TAB	2	PV
XIGDUO XR TAB 2.5-1000	2	PV
XIGDUO XR TAB 5-500MG	2	PV
XIGDUO XR TAB 5-1000MG	2	PV
XIGDUO XR TAB 10-500MG	2	PV
XIGDUO XR TAB 10-1000	2	PV
XULTOPHY INJ 100/3.6	0	\$0 Copay per 30-day supply
<b>BIGUANIDES</b>		
FORTAMET TAB 500MG	NC	
FORTAMET TAB 1000MG	NC	
GLUMETZA TAB 500MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLUMETZA TAB 1000MG	NC	
<i>metformin hcl oral soln 500 mg/5ml</i>	2	PV
<i>metformin hcl tab 500 mg</i>	1	PV
<i>metformin hcl tab 625 mg</i>	NC	
<i>metformin hcl tab 850 mg</i>	0	ACA, PV
<i>metformin hcl tab 1000 mg</i>	1	PV
<i>metformin hcl tab er 24hr 500 mg</i>	1	PV
<i>metformin hcl tab er 24hr 750 mg</i>	1	PV
<i>metformin hcl tab er 24hr modified release 500 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	NC	(generic for FORTAMET)
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	NC	(generic for FORTAMET)
RIOMET SOL 500/5ML	NC	
<b>DIABETIC OTHER</b>		
BAQSIMI ONE POW 3MG/DOSE	2	
BAQSIMI TWO POW 3MG/DOSE	2	
<i>diazoxide susp 50 mg/ml</i>	2	
GLUCAGEN INJ HYPOKIT	NC	
<i>glucagon (rdna) for inj kit 1 mg</i>	2	
GLUCAGON KIT 1MG	NC	
GVOKE HYPO 1 INJ 1MG/.2ML	2	
GVOKE HYPO 1 INJ .5/.1ML	2	
GVOKE HYPO 2 INJ 1MG/.2ML	2	
GVOKE HYPO 2 INJ .5/.1ML	2	
GVOKE KIT SOL 1MG/0.2M	2	
GVOKE PFS INJ	2	
KORLYM TAB 300MG	NC	
PROGLYCEM SUS 50MG/ML	3	
ZEGALOGUE INJ 0.6/0.6	2	
<b>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</b>		
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	NC	
JANUVIA TAB 25MG	2	PV
JANUVIA TAB 50MG	2	PV
JANUVIA TAB 100MG	2	PV
NESINA TAB 6.25MG	NC	
NESINA TAB 12.5MG	NC	
NESINA TAB 25MG	NC	
ONGLYZA TAB 2.5MG	NC	
ONGLYZA TAB 5MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
saxagliptin hcl tab 2.5 mg (base equiv)	2	PV
saxagliptin hcl tab 5 mg (base equiv)	1	PV
TRADJENTA TAB 5MG	NC	
<b>DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC</b>		
CYCLOSET TAB 0.8MG	3	
<b>INCRETIN MIMETIC AGENTS</b>		
ADLYXIN INJ 10/20MCG	NC	
ADLYXIN INJ 20MCG	NC	
BYDUREON PEN INJ 2MG	NC	
BYETTA INJ 5MCG	NC	
BYETTA INJ 10MCG	NC	
MOUNJARO INJ 2.5/0.5	2	PA, QL; PV
MOUNJARO INJ 5MG/0.5	2	PA, QL; PV
MOUNJARO INJ 7.5/0.5	2	PA, QL; PV
MOUNJARO INJ 10MG/0.5	2	PA, QL; PV
MOUNJARO INJ 12.5/0.5	2	PA, QL; PV
MOUNJARO INJ 15MG/0.5	2	PA, QL; PV
OZEMPIC INJ 2/1.5ML	2	PA, QL; PV
OZEMPIC INJ 4MG/3ML	2	PA, QL; PV
OZEMPIC INJ 8MG/3ML	2	PA, QL; PV
RYBELSUS TAB 3MG	2	PA, QL; PV
RYBELSUS TAB 7MG	2	PA, QL; PV
RYBELSUS TAB 14MG	2	PA, QL; PV
TRULICITY INJ 0.75/0.5	2	PA, QL; PV
TRULICITY INJ 1.5/0.5	2	PA, QL; PV
TRULICITY INJ 3/0.5	2	PA, QL; PV
TRULICITY INJ 4.5/0.5	2	PA, QL; PV
VICTOZA INJ 18MG/3ML	2	PA, QL; PV
<b>INSULIN</b>		
AFREZZA POW 4-8 UNIT	NC	
AFREZZA POW 4-8-12	NC	
AFREZZA POW 4UNIT	NC	
APIDRA INJ SOLOSTAR	NC	
APIDRA INJ U-100	NC	
BASAGLAR INJ 100UNIT	NC	
FIASP FLEX INJ TOUCH	0	\$0 Copay per 30-day supply
FIASP INJ 100/ML	0	\$0 Copay per 30-day supply
FIASP PENFIL INJ U-100	0	\$0 Copay per 30-day supply
GLARGIN YFGN INJ 100U/ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLARGIN YFGN SOL 100U/ML	NC	
HUMALOG INJ 100/ML	NC	
HUMALOG KWIK INJ 100/ML	NC	
HUMALOG KWIK INJ 200/ML	NC	
HUMALOG MIX INJ 50/50	NC	
HUMALOG MIX INJ 50/50KWP	NC	
HUMALOG MIX INJ 75/25KWP	NC	
HUMALOG MIX SUS 75/25	NC	
HUMULIN BR INJ U-100	NC	OTC
HUMULIN INJ 70/30	NC	OTC
HUMULIN INJ 70/30KWP	NC	OTC
HUMULIN N INJ U-100	NC	OTC
HUMULIN N INJ U-100KWP	NC	OTC
HUMULIN N PN INJ U-100	NC	OTC
HUMULIN PEN INJ 70/30	NC	OTC
HUMULIN R INJ U-100	NC	OTC
HUMULIN R INJ U-500	0	\$0 Copay per 30-day supply
INS ASP PROT INJ FLEXPEN	NC	
INS DEGL FLX INJ 100UNIT	NC	
INS DEGL FLX INJ 200UNIT	NC	
INSULIN DEGL INJ 100UNIT	NC	
LANTUS INJ 100/ML	0	\$0 Copay per 30-day supply
LANTUS SOLOS INJ 100/ML	0	\$0 Copay per 30-day supply
LEVEMIR INJ	NC	
LEVEMIR INJ FLEXTUOC	NC	
LYUMJEV INJ 100OUT/ML	NC	
LYUMJEV KWPN INJ 100OUT/ML	NC	
LYUMJEV KWPN INJ 200OUT/ML	NC	
LYUMJEV TMPO INJ 100OUT/ML	NC	
NOVOLIN INJ 70/30	0	OTC; \$0 Copay per 30-day supply
NOVOLIN INJ 70/30 FP	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLIN R INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NOVOLIN R INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLOG INJ 100/ML	0	\$0 Copay per 30-day supply
NOVOLOG INJ FLEXPEN	0	\$0 Copay per 30-day supply
NOVOLOG INJ PENFILL	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ 70/30	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ FLEXPEN	0	\$0 Copay per 30-day supply
REZVOGLAR INJ 100UT/ML	NC	
SEMGLEE INJ 100U/ML	NC	
SEMGLEE SOL 100U/ML	NC	
TOUJEO MAX INJ 300/ML	0	\$0 Copay per 30-day supply
TOUJEO SOLO INJ 300/ML	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 100UNIT	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 200UNIT	0	\$0 Copay per 30-day supply
TRESIBA INJ 100UNIT	0	\$0 Copay per 30-day supply

### **INSULIN SENSITIZING AGENTS**

ACTOS TAB 15MG	NC	
ACTOS TAB 30MG	NC	
ACTOS TAB 45MG	NC	
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	PV

### **MEGLITINIDE ANALOGUES**

<i>nateglinide tab 60 mg</i>	1	PV
<i>nateglinide tab 120 mg</i>	1	PV
<i>repaglinide tab 0.5 mg</i>	1	PV
<i>repaglinide tab 1 mg</i>	1	PV
<i>repaglinide tab 2 mg</i>	1	PV

### **SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS**

BRENZAVVY TAB 20MG	NC	
<i>dapagliflozin propanediol tab 5 mg (base equivalent)</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dapagliflozin propanediol tab 10 mg (base equivalent)</i>	NC	
FARXIGA TAB 5MG	2	PV
FARXIGA TAB 10MG	2	PV
INVOKANA TAB 100MG	NC	
INVOKANA TAB 300MG	NC	
JARDIANCE TAB 10MG	2	PV
JARDIANCE TAB 25MG	2	PV
STEGLATRO TAB 5MG	NC	
STEGLATRO TAB 15MG	NC	

### **SULFONYLUREAS**

AMARYL TAB 1MG	3	PV
AMARYL TAB 2MG	3	PV
AMARYL TAB 4MG	3	PV
<i>glimepiride tab 1 mg</i>	1	PV
<i>glimepiride tab 2 mg</i>	1	PV
<i>glimepiride tab 4 mg</i>	1	PV
<i>glipizide tab 2.5 mg</i>	1	PV
<i>glipizide tab 5 mg</i>	1	PV
<i>glipizide tab 10 mg</i>	1	PV
<i>glipizide tab er 24hr 2.5 mg</i>	1	PV
<i>glipizide tab er 24hr 5 mg</i>	1	PV
<i>glipizide tab er 24hr 10 mg</i>	1	PV
<i>glipizide xl tab 2.5mg</i>	1	PV
<i>glipizide xl tab 5mg</i>	1	PV
<i>glipizide xl tab 10mg</i>	1	PV
GLUCOTROL XL TAB 2.5MG	3	PV
GLUCOTROL XL TAB 5MG	3	PV
GLUCOTROL XL TAB 10MG	3	PV
<i>glyburide micronized tab 1.5 mg</i>	1	PV
<i>glyburide micronized tab 3 mg</i>	1	PV
<i>glyburide micronized tab 6 mg</i>	1	PV
<i>glyburide tab 1.25 mg</i>	1	PV
<i>glyburide tab 2.5 mg</i>	1	PV
<i>glyburide tab 5 mg</i>	1	PV

### **ANTIDIARRHEAL/PROBIOTIC AGENTS**

#### **ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS**

MYTESI TAB 125MG	NC	
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#### **ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.**

DERMACINRX CAP PROBISOL	3	
<i>lactojen cap</i>	NC	
VISBIOME PAK	3	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZELAC CAP	3	
<b>ANTIDIARRHEAL/PROBIOTIC COMBINATIONS</b>		
RESTORA RX CAP 60-1.25	3	
<b>ANTIPERISTALTIC AGENTS</b>		
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
LOMOTIL TAB 2.5MG	3	
<i>loperamide hcl cap 2 mg</i>	1	
MOTOFEN TAB 1-0.025	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>ANTIDOTES - CHELATING AGENTS</b>		
CHEMET CAP 100MG	3	
<i>deferasirox granules packet 90 mg</i>	4	SP, PA
<i>deferasirox granules packet 180 mg</i>	4	SP, PA
<i>deferasirox granules packet 360 mg</i>	4	SP, PA
<i>deferasirox tab 90 mg</i>	4	SP, PA
<i>deferasirox tab 180 mg</i>	4	SP, PA
<i>deferasirox tab 360 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 125 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	4	SP, PA
<i>deferiprone tab 500 mg</i>	4	SP, PA
<i>deferiprone tab 1000 mg</i>	4	SP, PA
EXJADE TAB 125MG	NC	
EXJADE TAB 250MG	NC	
EXJADE TAB 500MG	NC	
FERPRX 2-DAY TAB 1000MG	NC	
FERRIPROX SOL 100MG/ML	NC	
FERRIPROX TAB 500MG	NC	
FERRIPROX TAB 1000MG	NC	
JADENU SPRKL GRA 90MG	NC	
JADENU SPRKL GRA 180MG	NC	
JADENU SPRKL GRA 360MG	NC	
JADENU TAB 90MG	NC	
JADENU TAB 180MG	NC	
JADENU TAB 360MG	NC	
PENTETATE CA SOL 200MG/ML	3	
PENTETATE ZI SOL 200MG/ML	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
ACETADOTE INJ 200MG/ML	3	
<i>acetylcysteine inj 200 mg/ml</i>	1	
ANDEXXA SOL 200MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BAL IN OIL INJ 100MG/ML	3	
BRIDION INJ 200/2ML	NC	
BRIDION INJ 500/5ML	NC	
CALCIUM DISO INJ 1GM/5ML	3	
CYANOKIT INJ 5GM	3	
<i>deferoxamine mesylate for inj 2 gm</i>	4	SP, PA
<i>deferoxamine mesylate for inj 500 mg</i>	4	SP, PA
DEFERAL INJ 500MG	NC	
DIGIFAB INJ 40MG	3	
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	1	
PRAXBIND INJ 2.5/50	3	
PROTOPAM CHL INJ 1GM	3	
PROVAYBLUE INJ	NC	
RADIOGARDASE CAP 0.5GM	3	
SOD NITRITE INJ 30MG/ML	3	
SOD THIOSULF INJ 25%	3	
<i>sodium thiosulfate iv soln 250 mg/ml (25%)</i>	1	
VISTOGARD PAK 10GM	2	SP, QL

#### **BENZODIAZEPINE ANTAGONISTS**

<i>flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)</i>	1	
<i>flumazenil iv soln 1 mg/10ml (0.1 mg/ml)</i>	1	

#### **OPIOID ANTAGONISTS**

KLOXXADO SPR 8MG	3	
NALMEFENE INJ 1MG/ML	3	
<i>naloxone hcl inj 0.4 mg/ml</i>	1	
<i>naloxone hcl inj 4 mg/10ml</i>	1	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	1	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	
<i>naltrexone hcl tab 50 mg</i>	1	PV
NARCAN SPR 4MG	3	
OPVEE SPR 2.7/0.1	NC	
REXTOVY SPR 4/0.25ML	NC	
VIVITROL INJ 380MG	3	PA, QL; PV
ZIMHI SOL	NC	

#### **ANTIEMETICS**

##### **5-HT3 RECEPTOR ANTAGONISTS**

ANZEMET TAB 50MG	3	PA, QL
<i>granisetron hcl inj 1 mg/ml</i>	1	PA, QL
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	1	PA, QL
<i>granisetron hcl tab 1 mg</i>	1	PA, QL
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	1	PA, QL
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	1	PA, QL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	2	PA, QL
<i>ondansetron hcl tab 4 mg</i>	1	PA, QL
<i>ondansetron hcl tab 8 mg</i>	1	PA, QL
<i>ondansetron hcl tab 24 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 4 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 8 mg</i>	1	PA, QL
<i>palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)</i>	2	PA, QL
PALONOSETRON INJ 0.25/2ML	3	QL
SANCUSO DIS 3.1MG	2	PA, QL
SUSTOL INJ 10/0.4ML	NC	
ZUPLENZ MIS 4MG	NC	
ZUPLENZ MIS 8MG	NC	
<b>ANTIEMETICS - ANTICHOLINERGIC</b>		
DIMENHYDRIN INJ 50MG/ML	3	
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
TIGAN INJ 100MG/ML	3	
TRANSDERM-SC DIS 1.5MG	NC	
TRANSDERM-SC DIS 1MG/3DAY	NC	
<i>trimethobenzamide hcl cap 300 mg</i>	1	
<b>ANTIEMETICS - ANTIDOPAMINERGIC</b>		
BARHEMSYS INJ 10MG/4ML	NC	
<b>ANTIEMETICS - MISCELLANEOUS</b>		
AKYNZEO CAP 300-0.5	3	PA, QL
AKYNZEO INJ	3	PA, QL
AKYNZEO INJ 235-0.25	3	QL
BONJESTA TAB 20-20MG	3	
DICLEGIS TAB 10-10MG	3	
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	1	
<i>dronabinol cap 2.5 mg</i>	1	PA, QL
<i>dronabinol cap 5 mg</i>	1	PA, QL
<i>dronabinol cap 10 mg</i>	1	PA, QL
MARINOL CAP 2.5MG	3	PA, QL
SYNDROS SOL 5MG/ML	NC	
<b>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</b>		
APONVIE INJ 32/4.4ML	NC	
<i>aprepitant capsule 40 mg</i>	2	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>aprepitant capsule 80 mg</i>	2	PA, QL
<i>aprepitant capsule 125 mg</i>	2	PA, QL
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	2	PA, QL
EMEND CAP 80MG	3	PA, QL
EMEND SOL 150MG	3	PA, QL
EMEND SUS 125MG	3	PA, QL
EMEND TRIPAC PAK 80 & 125	3	PA, QL
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	2	PA, QL
VARUBI TAB 90MG	3	PA, QL

## **ANTIFUNGALS**

### **ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS**

BREXAFEMME TAB 150MG	3	ST, PA, QL
CANCIDAS INJ 50MG	3	
CANCIDAS INJ 70MG	3	
<i>casprofungin acetate for iv soln 50 mg</i>	1	
<i>casprofungin acetate for iv soln 70 mg</i>	1	
CASPOFUNGIN INJ 50MG	3	
CASPOFUNGIN INJ 70MG	3	
ERAXIS INJ 50MG	3	
ERAXIS INJ 100MG	3	
MICAFUNGIN INJ 50MG	3	
MICAFUNGIN INJ 100MG	3	
MICAFUNGIN INJ NACL	3	
<i>micafungin sodium for iv soln 50 mg</i>	1	
<i>micafungin sodium for iv soln 100 mg</i>	2	
MYCAMINE INJ 100MG	3	
REZZAYO INJ 200MG	3	

### **ANTIFUNGALS**

ABELCET INJ 5MG/ML	3	
AMBISOME INJ 50MG	3	
<i>amphotericin b for iv soln 50 mg</i>	2	
ANCOBON CAP 250MG	3	
ANCOBON CAP 500MG	3	
<i>flucytosine cap 250 mg</i>	1	
<i>flucytosine cap 500 mg</i>	NC	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	2	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>IMIDAZOLE-RELATED ANTIFUNGALS</b>		
CRESEMBA CAP 186 MG	NC	
CRESEMBA INJ 372MG	3	
DIFLUCAN SUS 10MG/ML	3	
DIFLUCAN SUS 40MG/ML	3	
DIFLUCAN TAB 50MG	3	
DIFLUCAN TAB 100MG	3	
DIFLUCAN TAB 200MG	3	
<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	1	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	1	
FLUCONAZOLE SOL /NACL	3	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>itraconazole cap 100 mg</i>	1	
<i>itraconazole oral soln 10 mg/ml</i>	2	
<i>ketoconazole tab 200 mg</i>	1	
NOXAFIL INJ 300/16.7	NC	
NOXAFIL SUS 40MG/ML	NC	
NOXAFIL TAB 100MG	NC	
<i>posaconazole susp 40 mg/ml</i>	2	QL
<i>posaconazole tab delayed release 100 mg</i>	NC	
SPORANOX CAP 100MG	3	
SPORANOX CAP PULSEPAK	3	
SPORANOX SOL 10MG/ML	3	
VFEND IV INJ 200MG	3	PA
VFEND SUS 40MG/ML	2	PA
VFEND TAB 50MG	2	PA
VFEND TAB 200MG	2	PA
VIVJOA CAP 150MG	3	PA, QL
<i>voriconazole for inj 200 mg</i>	2	PA
<i>voriconazole for susp 40 mg/ml</i>	2	PA
VORICONAZOLE INJ 200MG	3	PA
<i>voriconazole tab 50 mg</i>	2	PA
<i>voriconazole tab 200 mg</i>	1	PA
<b>ANTI-HISTAMINES</b>		
<b>ANTI-HISTAMINES - ALKYLAMINES</b>		
<i>dexchlorpheniramine maleate oral soln 2 mg/5ml</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ryclora sol 2mg/5ml</i>	NC	
<b>ANTIHISTAMINES - ETHANOLAMINES</b>		
CARBINOXAMIN TAB 6MG	NC	
<i>carbinoxamine maleate soln 4 mg/5ml</i>	2	
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	1	
<i>clemastine fumarate tab 2.68 mg</i>	1	
<i>diphen elx 12.5/5ml</i>	NC	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	2	
<i>diphenhydramine hcl inj 50 mg/ml</i>	1	
KARBINAL ER SUS 4MG/5ML	3	
RYVENT TAB 6MG	NC	
<b>ANTIHISTAMINES - NON-SEDATING</b>		
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
CLARINEX TAB 5MG	3	
<i>desloratadine tab 5 mg</i>	1	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	1	
<i>desloratadine tab orally disintegrating 5 mg</i>	1	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
<b>ANTIHISTAMINES - PHENOTHIAZINES</b>		
PHENERGAN INJ 25MG/ML	3	
PHENERGAN INJ 50MG/ML	3	
<i>promethazine hcl inj 25 mg/ml</i>	2	
<i>promethazine hcl inj 50 mg/ml</i>	2	
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	1	
<i>promethazine hcl suppos 12.5 mg</i>	2	
<i>promethazine hcl suppos 25 mg</i>	2	
<i>promethazine hcl tab 12.5 mg</i>	1	
<i>promethazine hcl tab 25 mg</i>	1	
<i>promethazine hcl tab 50 mg</i>	1	
<i>promethegan sup 12.5mg</i>	2	
<i>promethegan sup 25mg</i>	2	
<i>promethegan sup 50mg</i>	2	
<b>ANTIHISTAMINES - PIPERIDINES</b>		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
<b>ANTIHYPERLIPIDEMICS</b>		
<b>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</b>		
NEXLETOL TAB 180MG	2	ST, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANGIOPOIETIN-LIKE PROTEIN INHIBITORS</b>		
EVKEEZA INJ 345/2.3	6	SP, PA, QL
EVKEEZA INJ 1200/8	6	SP, PA, QL
<b>ANTIHYPERTENSIVES - COMBINATIONS</b>		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	PV
NEXLIZET TAB 180/10MG	2	ST, PA
OMEGA-3/D-3 KIT WELLNESS	NC	
ROSZET TAB 5-10MG	NC	
ROSZET TAB 10-10MG	NC	
ROSZET TAB 20-10MG	NC	
ROSZET TAB 40-10MG	NC	
SURE RESULT KIT O3D3 SYS	NC	
VYTORIN TAB 10-10MG	3	PV
VYTORIN TAB 10-20MG	3	PV
VYTORIN TAB 10-40MG	3	PV
VYTORIN TAB 10-80MG	3	PV
<b>ANTIHYPERTENSIVES - MISC.</b>		
<i>icosapent ethyl cap 0.5 gm</i>	NC	
<i>icosapent ethyl cap 1 gm</i>	NC	
LOVAZA CAP 1GM	NC	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA; PV
VASCEPA CAP 0.5GM	1	PA; PV
VASCEPA CAP 1GM	1	PA; PV
<b>BILE ACID SEQUESTRANTS</b>		
<i>cholestyramine light powder 4 gm/dose</i>	1	PV
<i>cholestyramine light powder packets 4 gm</i>	1	PV
<i>cholestyramine powder 4 gm/dose</i>	1	PV
<i>cholestyramine powder packets 4 gm</i>	1	PV
<i>colesevelam hcl packet for susp 3.75 gm</i>	2	PV
<i>colesevelam hcl tab 625 mg</i>	2	PV
COLESTID GRA 5GM	3	PV
COLESTID TAB 1GM	3	PV
<i>colestipol hcl granule packets 5 gm</i>	1	PV
<i>colestipol hcl granules 5 gm</i>	1	PV
<i>colestipol hcl tab 1 gm</i>	1	PV
<i>prevalite pow 4gm</i>	1	PV
<i>prevalite pow 4gm pk</i>	1	PV
QUESTRAN POW 4GM	3	PV
QUESTRAN POW 4GM LITE	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
WELCHOL PAK 3.75GM	3	PV
WELCHOL TAB 625MG	3	PV
<b>FIBRIC ACID DERIVATIVES</b>		
ANTARA CAP 30MG	3	ST; PV
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	PV
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	PV
<i>fenofibrate cap 50 mg</i>	NC	
<i>fenofibrate cap 150 mg</i>	1	PV
<i>fenofibrate micronized cap 30 mg</i>	NC	
<i>fenofibrate micronized cap 43 mg</i>	1	PV
<i>fenofibrate micronized cap 67 mg</i>	1	PV
<i>fenofibrate micronized cap 90 mg</i>	NC	
<i>fenofibrate micronized cap 130 mg</i>	NC	
<i>fenofibrate micronized cap 134 mg</i>	1	PV
<i>fenofibrate micronized cap 200 mg</i>	1	PV
<i>fenofibrate tab 40 mg</i>	NC	
<i>fenofibrate tab 48 mg</i>	1	PV
<i>fenofibrate tab 54 mg</i>	1	PV
<i>fenofibrate tab 120 mg</i>	NC	
<i>fenofibrate tab 145 mg</i>	1	PV
<i>fenofibrate tab 160 mg</i>	1	PV
<i>fenofibric acid tab 35 mg</i>	1	PV
FENOGLIDE TAB 40MG	3	PV
FENOGLIDE TAB 120MG	NC	
FIBRICOR TAB 35MG	3	PV
FIBRICOR TAB 105MG	3	PV
<i>gemfibrozil tab 600 mg</i>	1	PV
LIPOFEN CAP 50MG	3	PV
LIPOFEN CAP 150MG	3	PV
LOPID TAB 600MG	3	PV
TRICOR TAB 48MG	NC	
TRICOR TAB 145MG	NC	
TRILIPIX CAP 45MG	3	PV
TRILIPIX CAP 135MG	3	PV
<b>HMG COA REDUCTASE INHIBITORS</b>		
ADVICOR TAB 500-20MG	NC	
ADVICOR TAB 750-20MG	NC	
ADVICOR TAB 1000-20	NC	
ADVICOR TAB 1000-40	NC	
ALTOPREV TAB 20MG ER	NC	
ALTOPREV TAB 40MG ER	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ALTOPREV TAB 60MG ER	NC	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	0	ACA, PV
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	PV
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	PV
CRESTOR TAB 5MG	NC	
CRESTOR TAB 10MG	NC	
CRESTOR TAB 20MG	NC	
CRESTOR TAB 40MG	NC	
EZALLOR SPR CAP 5MG	NC	
EZALLOR SPR CAP 10MG	NC	
EZALLOR SPR CAP 20MG	NC	
EZALLOR SPR CAP 40MG	NC	
FLOLIPID SUS 20MG/5ML	NC	
FLOLIPID SUS 40MG/5ML	NC	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	0	ACA, PV
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	0	ACA, PV
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	0	ACA, PV
LESCOL XL TAB 80MG	NC	
LIPITOR TAB 10MG	NC	
LIPITOR TAB 20MG	NC	
LIPITOR TAB 40MG	NC	
LIPITOR TAB 80MG	NC	
LIVALO TAB 1MG	NC	
LIVALO TAB 2MG	NC	
LIVALO TAB 4MG	NC	
<i>lovastatin tab 10 mg</i>	0	ACA, PV
<i>lovastatin tab 20 mg</i>	0	ACA, PV
<i>lovastatin tab 40 mg</i>	0	ACA, PV
<i>pitavastatin calcium tab 1 mg</i>	0	ACA, PV
<i>pitavastatin calcium tab 2 mg</i>	0	ACA, PV
<i>pitavastatin calcium tab 4 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 10 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 20 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 40 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 80 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 5 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 10 mg</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rosuvastatin calcium tab 20 mg</i>	1	PV
<i>rosuvastatin calcium tab 40 mg</i>	1	PV
SIMVASTATIN SUS 20MG/5ML	NC	
<i>simvastatin tab 5 mg</i>	0	ACA, PV
<i>simvastatin tab 10 mg</i>	0	ACA, PV
<i>simvastatin tab 20 mg</i>	0	ACA, PV
<i>simvastatin tab 40 mg</i>	0	ACA, PV
<i>simvastatin tab 80 mg</i>	1	PV
ZOCOR TAB 10MG	3	PV
ZOCOR TAB 20MG	3	PV
ZOCOR TAB 40MG	3	PV
ZYPITAMAG TAB 1MG	NC	
ZYPITAMAG TAB 2MG	NC	
ZYPITAMAG TAB 4MG	NC	

### **INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS**

<i>ezetimibe tab 10 mg</i>	1	PV
ZETIA TAB 10MG	NC	

### **MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS**

JUXTAPID CAP 5MG	NC	
JUXTAPID CAP 10MG	NC	
JUXTAPID CAP 20MG	NC	
JUXTAPID CAP 30MG	NC	

### **NICOTINIC ACID DERIVATIVES**

<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	NC	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	PV
<i>niacor tab 500mg</i>	NC	
NIASPAN TAB 1000 ER	3	PV

### **PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS**

LEQVIO SOL	NC	
PRALUENT INJ 75MG/ML	NC	
PRALUENT INJ 150MG/ML	NC	
REPATHA INJ 140MG/ML	2	PA, QL; PV
REPATHA PUSH INJ 420/3.5	2	PA, QL; PV
REPATHA SURE INJ 140MG/ML	2	PA, QL; PV

### **ANTIHYPERTENSIVES**

#### **ACE INHIBITORS**

ACCUPRIL TAB 5MG	3	PV
ACCUPRIL TAB 10MG	3	PV
ACCUPRIL TAB 20MG	3	PV
ACCUPRIL TAB 40MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ALTACE CAP 1.25MG	3	PV
ALTACE CAP 2.5MG	3	PV
ALTACE CAP 5MG	3	PV
ALTACE CAP 10MG	3	PV
<i>benazepril hcl tab 5 mg</i>	1	PV
<i>benazepril hcl tab 10 mg</i>	1	PV
<i>benazepril hcl tab 20 mg</i>	1	PV
<i>benazepril hcl tab 40 mg</i>	1	PV
<i>captopril tab 12.5 mg</i>	1	PV
<i>captopril tab 25 mg</i>	1	PV
<i>captopril tab 50 mg</i>	1	PV
<i>captopril tab 100 mg</i>	1	PV
<i>enalapril maleate oral soln 1 mg/ml</i>	2	PV
<i>enalapril maleate tab 2.5 mg</i>	1	PV
<i>enalapril maleate tab 5 mg</i>	1	PV
<i>enalapril maleate tab 10 mg</i>	1	PV
<i>enalapril maleate tab 20 mg</i>	1	PV
<i>enalaprilat iv inj 1.25 mg/ml</i>	1	
EPANED SOL 1MG/ML	NC	
<i>fosinopril sodium tab 10 mg</i>	1	PV
<i>fosinopril sodium tab 20 mg</i>	1	PV
<i>fosinopril sodium tab 40 mg</i>	1	PV
<i>lisinopril tab 2.5 mg</i>	1	PV
<i>lisinopril tab 5 mg</i>	1	PV
<i>lisinopril tab 10 mg</i>	1	PV
<i>lisinopril tab 20 mg</i>	1	PV
<i>lisinopril tab 30 mg</i>	1	PV
<i>lisinopril tab 40 mg</i>	1	PV
LOTENSIN TAB 10MG	3	PV
LOTENSIN TAB 20MG	3	PV
LOTENSIN TAB 40MG	3	PV
<i>moexipril hcl tab 7.5 mg</i>	1	PV
<i>moexipril hcl tab 15 mg</i>	1	PV
<i>perindopril erbumine tab 2 mg</i>	1	PV
<i>perindopril erbumine tab 4 mg</i>	1	PV
<i>perindopril erbumine tab 8 mg</i>	1	PV
QBRELIS SOL 1MG/ML	3	PV
<i>quinapril hcl tab 5 mg</i>	1	PV
<i>quinapril hcl tab 10 mg</i>	1	PV
<i>quinapril hcl tab 20 mg</i>	1	PV
<i>quinapril hcl tab 40 mg</i>	1	PV
<i>ramipril cap 1.25 mg</i>	1	PV
<i>ramipril cap 2.5 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ramipril cap 5 mg</i>	1	PV
<i>ramipril cap 10 mg</i>	1	PV
<i>trandolapril tab 1 mg</i>	1	PV
<i>trandolapril tab 2 mg</i>	1	PV
<i>trandolapril tab 4 mg</i>	1	PV
VASOTEC TAB 2.5MG	3	PV
VASOTEC TAB 5MG	3	PV
VASOTEC TAB 10MG	3	PV
VASOTEC TAB 20MG	3	PV
ZESTRIL TAB 2.5MG	3	PV
ZESTRIL TAB 5MG	3	PV
ZESTRIL TAB 10MG	3	PV
ZESTRIL TAB 20MG	3	PV
ZESTRIL TAB 30MG	3	PV
ZESTRIL TAB 40MG	3	PV
<b>AGENTS FOR PHEOCHROMOCYTOMA</b>		
DEMSEER CAP 250MG	3	
DIBENZYLINE CAP 10MG	3	
<i>metirosine cap 250 mg</i>	1	
<i>phenoxybenzamine hcl cap 10 mg</i>	2	
<i>phentolamine mesylate for inj 5 mg</i>	1	
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
ATACAND TAB 4MG	NC	
ATACAND TAB 8MG	NC	
ATACAND TAB 16MG	NC	
ATACAND TAB 32MG	NC	
AVAPRO TAB 75MG	3	PV
AVAPRO TAB 150MG	3	PV
AVAPRO TAB 300MG	3	PV
BENICAR TAB 5MG	NC	
BENICAR TAB 20MG	NC	
BENICAR TAB 40MG	NC	
<i>candesartan cilexetil tab 4 mg</i>	1	PV
<i>candesartan cilexetil tab 8 mg</i>	1	PV
<i>candesartan cilexetil tab 16 mg</i>	1	PV
<i>candesartan cilexetil tab 32 mg</i>	1	PV
COZAAR TAB 25MG	NC	
COZAAR TAB 50MG	NC	
COZAAR TAB 100MG	NC	
DIOVAN TAB 40MG	NC	
DIOVAN TAB 80MG	NC	
DIOVAN TAB 160MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIOVAN TAB 320MG	NC	
EDARBI TAB 40MG	NC	
EDARBI TAB 80MG	NC	
<i>irbesartan tab 75 mg</i>	1	PV
<i>irbesartan tab 150 mg</i>	1	PV
<i>irbesartan tab 300 mg</i>	1	PV
<i>losartan potassium tab 25 mg</i>	1	PV
<i>losartan potassium tab 50 mg</i>	1	PV
<i>losartan potassium tab 100 mg</i>	1	PV
MICARDIS TAB 20MG	NC	
MICARDIS TAB 40MG	NC	
MICARDIS TAB 80MG	NC	
<i>olmesartan medoxomil tab 5 mg</i>	1	PV
<i>olmesartan medoxomil tab 20 mg</i>	1	PV
<i>olmesartan medoxomil tab 40 mg</i>	1	PV
<i>telmisartan tab 20 mg</i>	1	PV
<i>telmisartan tab 40 mg</i>	1	PV
<i>telmisartan tab 80 mg</i>	1	PV
<i>valsartan oral soln 4 mg/ml</i>	NC	
<i>valsartan tab 40 mg</i>	1	PV
<i>valsartan tab 80 mg</i>	1	PV
<i>valsartan tab 160 mg</i>	1	PV
<i>valsartan tab 320 mg</i>	1	PV

### **ANTIADRENERGIC ANTIHYPERTENSIVES**

CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
CATAPRES-TTS DIS 0.1/24HR	3	PV
CATAPRES-TTS DIS 0.2/24HR	3	PV
CATAPRES-TTS DIS 0.3/24HR	3	PV
<i>clonidine hcl tab 0.1 mg</i>	1	PV
<i>clonidine hcl tab 0.2 mg</i>	1	PV
<i>clonidine hcl tab 0.3 mg</i>	1	PV
<i>clonidine hcl tab er 24hr 0.17 mg (base equivalent)</i>	2	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	PV
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>guanfacine hcl tab 1 mg</i>	1	PV
<i>guanfacine hcl tab 2 mg</i>	1	PV
<i>methyldopa tab 250 mg</i>	2	
MINIPRESS CAP 1MG	3	
MINIPRESS CAP 2MG	3	
MINIPRESS CAP 5MG	3	
NEXICLON XR TAB 0.17MG	NC	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	

### **ANTIHYPERTENSIVE COMBINATIONS**

ACCURETIC TAB 10-12.5	3	PV
ACCURETIC TAB 20-12.5	3	PV
ACCURETIC TAB 20-25MG	3	PV
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	2	PV
ATACAND HCT TAB 16-12.5	NC	
ATACAND HCT TAB 32-12.5	NC	
ATACAND HCT TAB 32-25MG	NC	
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	1	PV
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	1	PV
AVALIDE TAB 150-12.5	3	PV
AVALIDE TAB 300-12.5	3	PV
AZOR TAB 5-20MG	NC	
AZOR TAB 5-40MG	NC	
AZOR TAB 10-20MG	NC	
AZOR TAB 10-40MG	NC	
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	PV
BENICAR HCT TAB 20-12.5	NC	
BENICAR HCT TAB 40-12.5	NC	
BENICAR HCT TAB 40-25MG	NC	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	1	PV
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	PV
DIOVAN HCT TAB 80/12.5	NC	
DIOVAN HCT TAB 160-12.5	NC	
DIOVAN HCT TAB 160-25MG	NC	
DIOVAN HCT TAB 320-12.5	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIOVAN HCT TAB 320-25MG	NC	
DUTOPROL TAB 25-12.5	NC	
DUTOPROL TAB 50-12.5	NC	
DUTOPROL TAB 100-12.5	NC	
EDARBYCLOR TAB 40-12.5	NC	
EDARBYCLOR TAB 40-25MG	NC	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1	PV
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	1	PV
EXFORGE TAB 5-160MG	NC	
EXFORGE TAB 5-320MG	NC	
EXFORGE TAB 10-160MG	NC	
EXFORGE TAB 10-320MG	NC	
EXFORGEH/5- TAB 160-12.5	NC	
EXFORGEH/5- TAB 160-25	NC	
EXFORGEH/10- TAB 160-12.5	NC	
EXFORGEH/10- TAB 160-25	NC	
EXFORGEH/10- TAB 320-25	NC	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
HYZAAR TAB 50-12.5	NC	
HYZAAR TAB 100-12.5	NC	
HYZAAR TAB 100-25	NC	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	PV
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	1	PV
LOTENSIN HCT TAB 10-12.5	3	PV
LOTENSIN HCT TAB 20-12.5	3	PV
LOTENSIN HCT TAB 20-25MG	3	PV
LOTREL CAP 5-10MG	3	PV
LOTREL CAP 5-20MG	3	PV
LOTREL CAP 10-20MG	3	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LOTREL CAP 10-40MG	3	PV
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	1	PV
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	1	PV
MICARDIS HCT TAB 40/12.5	NC	
MICARDIS HCT TAB 80-25MG	NC	
MICARDIS HCT TAB 80/12.5	NC	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	PV
PRESTALIA TAB 3.5-2.5	NC	
PRESTALIA TAB 7-5MG	NC	
PRESTALIA TAB 14-10MG	NC	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	PV
TEKTURNA HCT TAB 150-12.5	2	PV
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	PV
TENORETIC TAB 50	3	PV
TENORETIC TAB 100	3	PV
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	2	PV
TRIBENZOR20- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-25MG	3	PV
TRIBENZOR40- TAB 10-12.5	3	PV
TRIBENZOR40- TAB 10-25MG	3	PV
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	PV
VASERETIC TAB 10-25MG	3	PV
ZESTORETIC TAB 10-12.5	NC	
ZESTORETIC TAB 20-12.5	NC	
ZESTORETIC TAB 20-25MG	NC	

#### **ANTIHYPERTENSIVES - MISC.**

VECAMYL TAB 2.5MG	3	PV
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#### **DIRECT RENIN INHIBITORS**

<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	PV
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	PV
TEKTURNA TAB 150MG	3	PV
TEKTURNA TAB 300MG	3	PV

#### **SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)**

<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
INSPRA TAB 25MG	3	
INSPRA TAB 50MG	3	

#### **VASODILATORS**

<i>hydralazine hcl inj 20 mg/ml</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	PV
<i>hydralazine hcl tab 25 mg</i>	1	PV
<i>hydralazine hcl tab 50 mg</i>	1	PV
<i>hydralazine hcl tab 100 mg</i>	1	PV
<i>minoxidil tab 2.5 mg</i>	1	PV
<i>minoxidil tab 10 mg</i>	1	PV
NIPRIDE RTU INJ 20/100ML	NC	
NIPRIDE RTU INJ 50/100ML	NC	
<i>nitroprusside sodium iv soln 25 mg/ml</i>	1	

#### **ANTIMALARIALS**

##### **ANTIMALARIAL COMBINATIONS**

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	PV
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	PV
COARTEM TAB 20-120MG	3	
MALARONE TAB 62.5-25	3	PV
MALARONE TAB 250-100	3	PV

### **ANTIMALARIALS**

ARAKODA TAB 100MG	NC	
ARTESUNATE SOL 110MG	3	
<i>chloroquine phosphate tab 250 mg</i>	1	PV
<i>chloroquine phosphate tab 500 mg</i>	2	PV
DARAPRIM TAB 25MG	NC	
<i>hydroxychloroquine sulfate tab 100 mg</i>	3	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>hydroxychloroquine sulfate tab 300 mg</i>	3	
<i>hydroxychloroquine sulfate tab 400 mg</i>	3	
KRINTAFEL TAB 150MG	NC	
<i>mefloquine hcl tab 250 mg</i>	1	PV
PLAQUENIL TAB 200MG	3	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	PV
PRIMAQUINE TAB 26.3MG	3	PV
<i>pyrimethamine tab 25 mg</i>	2	
QUALAQUIN CAP 324MG	3	
<i>quinine sulfate cap 324 mg</i>	1	
SOVUNA TAB 200MG	NC	
SOVUNA TAB 300MG	NC	

### **ANTIMYASTHENIC/CHOLINERGIC AGENTS**

#### **ANTIMYASTHENIC/CHOLINERGIC AGENTS**

BLOXIVERZ INJ 5MG/10ML	3	
BLOXIVERZ INJ 10/10ML	3	
FIRDAPSE TAB 10MG	6	SP, PA, QL
MESTINON SOL 60MG/5ML	3	
MESTINON TAB 60MG	3	
MESTINON TAB TIMESPAN	3	
NEOSTIG METH INJ 5MG/10ML	3	
NEOSTIG METH INJ 10/10ML	3	
<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i>	1	
<i>neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)</i>	1	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	2	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	2	
REGONOL INJ 5MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
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## ANTIMYCOBACTERIAL AGENTS

### ANTIMYCOBACTERIAL AGENTS

<i>cycloserine cap 250 mg</i>	1	
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid inj 100 mg/ml</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
MYAMBUTOL TAB 400MG	3	
MYCOBUTIN CAP 150MG	3	
PASER GRA 4GM	3	
PRETOMANID TAB 200MG	3	
PRIFTIN TAB 150MG	3	
<i>pyrazinamide tab 500 mg</i>	2	
<i>rifabutin cap 150 mg</i>	2	
RIFADIN INJ 600 MG	3	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin for inj 600 mg</i>	1	
SIRTURO TAB 20MG	3	
SIRTURO TAB 100MG	3	
TRECTOR TAB 250MG	3	

## ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

### ALKYLATING AGENTS

ALKERAN TAB 2MG	3	
BELRAPZO SOL 100/4ML	NC	
BENDEKA INJ 100/4ML	6	SP, PA
<i>busulfan inj 6 mg/ml</i>	1	
BUSULFEX INJ 6MG/ML	3	
<i>carboplatin iv soln 50 mg/5ml</i>	1	
<i>carboplatin iv soln 150 mg/15ml</i>	1	
<i>carboplatin iv soln 450 mg/45ml</i>	1	
<i>carboplatin iv soln 600 mg/60ml</i>	1	
<i>carmustine for inj 100 mg</i>	1	
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	1	
CISPLATIN INJ 50MG	3	
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	1	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	1	
CYCLOPHOSPH INJ 1GM	3	
CYCLOPHOSPH INJ 500/5ML	3	
CYCLOPHOSPH INJ 1000MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CYCLOPHOSPH INJ 2000MG	3	
CYCLOPHOSPH TAB 25MG	3	
CYCLOPHOSPH TAB 50MG	3	
CYCLOPHOSPHA INJ 2GM/10ML	3	
CYCLOPHOSPHA INJ 500MG	3	
<i>cyclophosphamide cap 25 mg</i>	2	
<i>cyclophosphamide cap 50 mg</i>	2	
<i>cyclophosphamide for inj 1 gm</i>	1	
<i>cyclophosphamide for inj 2 gm</i>	1	
<i>cyclophosphamide for inj 500 mg</i>	1	
<i>cyclophosphamide iv soln 500 mg/2.5ml (200 mg/ml)</i>	1	
EVOMELA INJ 50MG	NC	
GLEOSTINE CAP 10MG	5	
GLEOSTINE CAP 40MG	5	
GLEOSTINE CAP 100MG	5	
GLIADEL WAF 7.7MG	3	
IFEX INJ 1GM	3	
IFEX INJ 3GM	3	
<i>ifosfamide for inj 1 gm</i>	1	
IFOSFAMIDE INJ 3GM	3	
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	1	
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	1	
KEMOPLAT INJ 50/50ML	NC	
LEUKERAN TAB 2MG	2	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	1	
<i>melphalan tab 2 mg</i>	2	
MYLERAN TAB 2MG	2	
<i>oxaliplatin for iv inj 50 mg</i>	1	
<i>oxaliplatin for iv inj 100 mg</i>	1	
<i>oxaliplatin iv soln 50 mg/10ml</i>	1	
<i>oxaliplatin iv soln 100 mg/20ml</i>	1	
<i>oxaliplatin iv soln 200 mg/40ml</i>	1	
<i>paraplatin inj 50mg/5ml</i>	1	
<i>paraplatin inj 150/15ml</i>	1	
<i>paraplatin inj 1000mg</i>	1	
PEPAXTO INJ 20MG	NC	
TEMODAR CAP 250MG	6	SP, ST, PA
TEMODAR INJ 100MG	6	SP, ST, PA
<i>temozolomide cap 5 mg</i>	4	SP, PA
<i>temozolomide cap 20 mg</i>	4	SP, PA
<i>temozolomide cap 100 mg</i>	4	SP, PA
<i>temozolomide cap 140 mg</i>	4	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>temozolomide cap 180 mg</i>	4	SP, PA
<i>temozolomide cap 250 mg</i>	4	SP, PA
TEPADINA INJ 15MG	6	SP, PA
TEPADINA INJ 100MG	6	SP, PA
<i>thiotepa for inj 15 mg</i>	4	SP, PA
<i>thiotepa for inj 100 mg</i>	4	SP, PA
TREANDA INJ 25MG	6	SP, PA
TREANDA INJ 100MG	6	SP, PA
YONDELIS INJ 1MG	6	SP
ZANOSAR INJ 1GM	3	

### **ANTIMETABOLITES**

ALIMTA INJ 100MG	NC	
ALIMTA INJ 500MG	NC	
ARRANON INJ 5MG/ML	3	
<i>azacitidine for inj 100 mg</i>	4	SP, PA
<i>capecitabine tab 150 mg</i>	4	SP, PA, QL
<i>capecitabine tab 500 mg</i>	4	SP, PA, QL
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>clofarabine iv soln 1 mg/ml</i>	1	
CLOLAR INJ 1MG/ML	3	
<i>cytarabine inj 20 mg/ml</i>	1	
<i>cytarabine inj pf 20 mg/ml</i>	1	
<i>cytarabine inj pf 100 mg/ml</i>	1	
<i>decitabine for inj 50 mg</i>	4	SP, PA
<i>floxuridine for inj 0.5 gm</i>	1	
<i>fludarabine phosphate for inj 50 mg</i>	1	
<i>fludarabine phosphate inj 25 mg/ml</i>	1	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	1	
FOLOTYN INJ 20MG/ML	6	SP, PA
FOLOTYN INJ 40MG/2ML	6	SP, PA
<i>gemcitabine hcl for inj 1 gm</i>	1	
<i>gemcitabine hcl for inj 2 gm</i>	1	
<i>gemcitabine hcl for inj 200 mg</i>	1	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	1	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	1	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	1	
GEMCITABINE INJ 1.5GM/15	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GEMCITABINE INJ 1GM	3	
GEMCITABINE INJ 1GM/10ML	3	
GEMCITABINE INJ 2GM	3	
GEMCITABINE INJ 2GM/20ML	3	
GEMCITABINE INJ 200MG	3	
INFUGEM SOL 1200MG	NC	
INFUGEM SOL 1300MG	NC	
INFUGEM SOL 1400MG	NC	
INFUGEM SOL 1500MG	NC	
INFUGEM SOL 1600MG	NC	
INFUGEM SOL 1700MG	NC	
INFUGEM SOL 1800MG	NC	
INFUGEM SOL 2000MG	NC	
INFUGEM SOL 2200MG	NC	
JYLAMVO SOL 2MG/ML	NC	
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	
<i>nelarabine iv soln 5 mg/ml</i>	1	
ONUREG TAB 200MG	6	SP, PA, QL
ONUREG TAB 300MG	6	SP, PA, QL
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i>	1	
PEMETREXED SOL 1GM/40ML	NC	
PEMETREXED SOL 100/4ML	NC	
PEMETREXED SOL 500/20ML	NC	
PEMETREXED SOL 850/34ML	NC	
PEMFEXY SOL 500/20ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PURIXAN SUS 20MG/ML	6	SP, PA
TABLOID TAB 40MG	2	
TREXALL TAB 5MG	2	
TREXALL TAB 7.5MG	2	
TREXALL TAB 10MG	2	
TREXALL TAB 15MG	2	
VIDAZA INJ 100MG	6	SP, PA
XATMEP SOL 2.5MG/ML	3	
XELODA TAB 150MG	6	SP, ST, PA, QL
XELODA TAB 500MG	6	SP, ST, PA, QL

### **ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS**

ALYMSYS SOL 100/4ML	NC	
ALYMSYS SOL 400/16ML	NC	
AVASTIN INJ	NC	
AVASTIN INJ 400/16ML	NC	
CYRAMZA INJ 100/10ML	6	SP, PA
CYRAMZA INJ 500/50ML	6	SP, PA
FRUZAQLA CAP 1MG	NC	
FRUZAQLA CAP 5MG	NC	
INLYTA TAB 1MG	5	SP, PA, QL
INLYTA TAB 5MG	5	SP, PA, QL
LENVIMA CAP 4MG	5	SP, PA, QL
LENVIMA CAP 8 MG	5	SP, PA, QL
LENVIMA CAP 10 MG	5	SP, PA, QL
LENVIMA CAP 12MG	5	SP, PA, QL
LENVIMA CAP 14 MG	5	SP, PA, QL
LENVIMA CAP 18 MG	5	SP, PA, QL
LENVIMA CAP 20 MG	5	SP, PA, QL
LENVIMA CAP 24 MG	5	SP, PA, QL
MVASI INJ 100MG	NC	
MVASI INJ 400MG	NC	
VEGZELMA SOL 100/4ML	NC	
VEGZELMA SOL 400/16ML	NC	
ZALTRAP INJ 100/4ML	6	SP, PA
ZALTRAP INJ 200/8ML	6	SP, PA
ZIRABEV INJ 100/4ML	4	SP, PA
ZIRABEV INJ 400/16ML	4	SP, PA

### **ANTINEOPLASTIC - ANTI-HER2 AGENTS**

HERCEPTIN INJ 150MG	NC	
HERZUMA INJ 150MG	5	SP, PA
HERZUMA INJ 420MG	5	SP, PA
KANJINTI INJ 420MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KANJINTI SOL 150MG	NC	
OGIVRI INJ 150MG	5	SP, PA
OGIVRI INJ 420MG	5	SP, PA
ONTRUZANT INJ 150MG	NC	
ONTRUZANT INJ 420MG	NC	
PERJETA INJ 420/14ML	5	SP, PA
TRAZIMERA INJ 150MG	NC	
TRAZIMERA INJ 420MG	NC	
TUKYSA TAB 50MG	6	SP, PA, QL
TUKYSA TAB 150MG	6	SP, PA, QL

### **ANTINEOPLASTIC - ANTIBODIES**

ADCETRIS INJ 50MG	6	SP, PA
ARZERRA CON 100/5ML	6	SP, PA
BAVENCIO INJ 20MG/ML	6	SP, PA
BESPONSA INJ 0.9MG	6	SP, PA
BLINCYTO INJ 35MCG	6	SP, PA
COLUMVI INJ 2.5MG	NC	
COLUMVI INJ 10/10ML	NC	
DARZALEX SOL 100/5ML	6	PA
DARZALEX SOL 100MG/5M	6	SP, PA
DARZALEX SOL 400/20ML	6	PA
DARZALEX SOL 400MG/20	6	SP, PA
ELAHERE INJ 5MG/ML	6	SP, PA
ELREXFIO INJ 44/1.1ML	NC	
ELREXFIO INJ 76/1.9ML	NC	
EMPLICITI INJ 300MG	6	SP, PA
EMPLICITI INJ 400MG	6	SP, PA
ENHERTU INJ 100MG	6	SP, PA
GAZYVA INJ 25MG/ML	6	SP, PA
IMDELLTRA INJ 1MG	NC	
IMDELLTRA INJ 10MG	NC	
IMFINZI INJ 120/2.4	6	SP, PA
IMFINZI INJ 500/10	6	SP, PA
IMJUDO INJ 25/1.25	6	SP, PA
IMJUDO INJ 300/15ML	6	SP, PA
JEMPERLI SOL 500/10ML	NC	
KADCYLA INJ 100MG	6	SP, PA
KADCYLA INJ 160MG	6	SP, PA
KEYTRUDA INJ 100MG/4M	6	SP, PA
KIMMTRAK SOL 100MCG	6	SP, PA, QL
LIBTAYO INJ 350/7ML	6	SP, PA, QL
LUNSUMIO INJ 1MG/ML	NC	
LUNSUMIO INJ 30MG/30	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MYLOTARG INJ 4.5MG	6	SP, PA
OPDIVO INJ 40MG/4ML	6	SP, PA
OPDIVO INJ 100MG/10	6	SP, PA
OPDIVO INJ 120MG/12	6	SP, PA
OPDIVO INJ 240/24	6	SP, PA
PADCEV INJ 20MG	6	SP, PA, QL
PADCEV INJ 30MG	6	SP, PA, QL
POLIVY INJ 30MG	6	SP, PA
POLIVY INJ 140MG	6	SP, PA
POTELIGEO INJ 20MG/5ML	6	SP, PA
RITUXAN INJ 100MG	NC	
RITUXAN INJ 500MG	NC	
RUXIENCE INJ 100/10ML	4	SP, PA
RUXIENCE INJ 500/50ML	4	SP, PA
SARCLISA SOL 100/5ML	6	SP, PA
SARCLISA SOL 500/25ML	6	SP, PA
TALVEY INJ 3/1.5ML	NC	
TALVEY INJ 40MG/ML	NC	
TECENTRIQ INJ 840/14	6	SP, PA
TECENTRIQ INJ 1200/20	6	SP, PA
TIVDAK INJ 40MG	6	SP, PA, QL
TRUXIMA INJ 100/10ML	NC	
TRUXIMA INJ 500/50ML	NC	
UNITUXIN INJ	6	SP
YERVOY INJ 50MG	6	SP, PA
YERVOY INJ 200MG	6	SP, PA
ZEVALIN KIT Y-90	3	
ZYNLONTA SOL 10MG	NC	
<b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>		
VENCLEXTA TAB 10MG	6	SP, PA, QL
VENCLEXTA TAB 50MG	6	SP, PA, QL
VENCLEXTA TAB 100MG	6	SP, PA, QL
VENCLEXTA TAB START PK	6	SP, PA, QL
<b>ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY</b>		
AMTAGVI INJ	NC	
KYMRIAH SUS	NC	
PROVENGE INJ	3	
YESCARTA INJ	NC	
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
ERBITUX INJ 100MG	6	SP, PA
ERBITUX INJ 200MG	6	SP, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	4	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	4	SP, PA, QL
GILOTRIF TAB 20MG	6	SP, PA, QL
GILOTRIF TAB 30MG	6	SP, PA, QL
GILOTRIF TAB 40MG	6	SP, PA, QL
IRESSA TAB 250MG	NC	
PORTRAZZA INJ 800/50ML	6	SP, PA
TAGRISSE TAB 40MG	5	SP, PA, QL
TAGRISSE TAB 80MG	5	SP, PA, QL
TARCEVA TAB 25MG	6	SP, ST, PA, QL
TARCEVA TAB 100MG	6	SP, ST, PA, QL
TARCEVA TAB 150MG	6	SP, ST, PA, QL
VECTIBIX INJ 100MG	6	SP, PA
VECTIBIX INJ 400MG	6	SP, PA
VIZIMPRO TAB 15MG	NC	
VIZIMPRO TAB 30MG	NC	
VIZIMPRO TAB 45MG	NC	
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
DAURISMO TAB 25MG	NC	
DAURISMO TAB 100MG	NC	
ERIVEDGE CAP 150MG	5	SP, PA, QL
ODOMZO CAP 200MG	5	SP, PA, QL
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b>		
<i>abiraterone acetate tab 250 mg</i>	4	SP, PA, QL
<i>abiraterone acetate tab 500 mg</i>	4	SP, PA, QL
<i>anastrozole tab 1 mg</i>	1	ACA, PV
ARIMIDEX TAB 1MG	3	PV
AROMASIN TAB 25MG	3	PV
<i>bicalutamide tab 50 mg</i>	1	
CAMCEVI INJ 42MG	NC	
CASODEX TAB 50MG	3	
ELIGARD INJ 7.5MG	5	SP, PA
ELIGARD INJ 22.5MG	5	SP, PA
ELIGARD INJ 30MG	5	SP, PA
ELIGARD INJ 45MG	5	SP, PA
EMCYT CAP 140MG	3	
ERLEADA TAB 60MG	5	SP, PA, QL
ERLEADA TAB 240MG	5	SP, PA, QL
<i>exemestane tab 25 mg</i>	0	ACA, PV
FARESTON TAB 60MG	3	
FASLODEX INJ 250/5ML	6	SP, PA
FEMARA TAB 2.5MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FIRMAGON INJ 80MG	NC	
FIRMAGON INJ 120MG	NC	
<i>flutamide cap 125 mg</i>	1	
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	4	SP, PA
<i>letrozole tab 2.5 mg</i>	1	PV
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	4	SP, PA
LUPRON DEPOT INJ 3.75MG	6	SP, PA, QL
LUPRON DEPOT INJ 7.5MG	NC	
LUPRON DEPOT INJ 11.25MG	6	SP, PA, QL
LUPRON DEPOT INJ 22.5MG	NC	
LUPRON DEPOT INJ 30MG	NC	
LUPRON DEPOT INJ 45MG	NC	
LYSODREN TAB 500MG	5	SP
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
NILANDRON TAB 150MG	NC	
<i>nilutamide tab 150 mg</i>	1	
NUBEQA TAB 300MG	5	SP, PA, QL
ORGOVYX TAB 120MG	6	SP, PA, QL
ORSERDU TAB 86MG	NC	
ORSERDU TAB 345MG	NC	
SOLTAMOX SOL 10MG/5ML	3	PV
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	0	ACA, PV
<i>toremifene citrate tab 60 mg (base equivalent)</i>	2	
TRELSTAR MIX INJ 3.75MG	NC	
TRELSTAR MIX INJ 11.25MG	NC	
TRELSTAR MIX INJ 22.5MG	NC	
XTANDI CAP 40MG	5	SP, PA, QL
XTANDI TAB 40MG	5	SP, PA, QL
XTANDI TAB 80MG	5	SP, PA, QL
YONSA TAB 125MG	5	SP, PA, QL
ZOLADEX IMP 3.6MG	NC	
ZOLADEX IMP 10.8MG	NC	
ZYTIGA TAB 250MG	NC	
ZYTIGA TAB 500MG	NC	
<b>ANTINEOPLASTIC - IMMUNOMODULATORS</b>		
POMALYST CAP 1MG	6	SP, PA, QL
POMALYST CAP 2MG	6	SP, PA, QL
POMALYST CAP 3MG	6	SP, PA, QL
POMALYST CAP 4MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTIC - XPO1 INHIBITORS</b>		
XPOVIO PAK 40MG	6	SP, PA, QL
XPOVIO PAK 50MG	6	SP, PA, QL
XPOVIO PAK 60MG	6	SP, PA, QL
XPOVIO PAK 80MG	6	SP, PA, QL
<b>ANTINEOPLASTIC ANTIBIOTICS</b>		
<i>adriamycin inj 50mg</i>	1	
<i>bleomycin sulfate for inj 15 unit</i>	1	
<i>bleomycin sulfate for inj 30 unit</i>	1	
<i>dactinomycin for inj 0.5 mg</i>	1	
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	1	
DAUNORUBICIN INJ 20MG/4ML	3	
DAUNORUBICIN INJ 50MG	3	
DOXIL INJ 20/10ML	3	
DOXIL INJ 50/25ML	3	
<i>doxorubicin hcl for inj 10 mg</i>	1	
<i>doxorubicin hcl for inj 50 mg</i>	1	
<i>doxorubicin hcl inj 2 mg/ml</i>	1	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	1	
ELLENCE INJ 2MG/ML	3	
IDAMYCIN PFS INJ 5MG/5ML	3	
IDAMYCIN PFS INJ 10/10ML	3	
IDAMYCIN PFS INJ 20/20ML	3	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	1	
<i>mitomycin for iv soln 5 mg</i>	1	
<i>mitomycin for iv soln 20 mg</i>	1	
<i>mitomycin for iv soln 40 mg</i>	1	
MITOMYCIN SOL 20MG	6	SP
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	4	SP, PA
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	4	SP, PA
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	4	SP, PA
<i>mutamycin inj 5mg</i>	1	
<i>mutamycin inj 20mg</i>	1	
<i>mutamycin inj 40mg</i>	1	
<i>valrubicin soln for intravesical instillation 40 mg/ml</i>	4	SP
VALSTAR SOL 40MG/ML	6	SP

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTIC COMBINATIONS</b>		
HERCEP HYLEC SOL 60-10000	NC	
INQOVI TAB 35-100MG	6	SP, PA, QL
KISQALI 200 PAK FEMARA	5	SP, PA, QL
KISQALI 400 PAK FEMARA	5	SP, PA, QL
KISQALI 600 PAK FEMARA	5	SP, PA, QL
LONSURF TAB 15-6.14	5	SP, PA, QL
LONSURF TAB 20-8.19	5	SP, PA, QL
OPDUALAG SOL	NC	
PHESGO SOL	5	SP, PA
RITUXAN INJ HYCELA	6	SP, PA
VYXEOS INJ 44-100MG	6	SP, PA
<b>ANTINEOPLASTIC ENZYME INHIBITORS</b>		
AFINITOR DIS TAB 2MG	NC	
AFINITOR DIS TAB 3MG	NC	
AFINITOR DIS TAB 5MG	NC	
AFINITOR TAB 2.5MG	NC	
AFINITOR TAB 5MG	NC	
AFINITOR TAB 7.5MG	NC	
AFINITOR TAB 10MG	NC	
ALECENSA CAP 150MG	5	SP, PA, QL
ALIQOPA INJ 60MG	NC	
ALUNBRIG PAK	5	SP, PA, QL
ALUNBRIG TAB 30MG	5	SP, PA, QL
ALUNBRIG TAB 90MG	5	SP, PA, QL
ALUNBRIG TAB 180MG	5	SP, PA, QL
AUGTYRO CAP 40MG	5	SP, PA, QL
BALVERSA TAB 3MG	6	SP, PA, QL
BALVERSA TAB 4MG	6	SP, PA, QL
BALVERSA TAB 5MG	6	SP, PA, QL
BELEODAQ INJ 500MG	6	SP, PA
<i>bortezomib for inj 3.5 mg</i>	4	SP, PA
BORTEZOMIB INJ 3.5/1.4	3	PA
BORTEZOMIB INJ 3.5MG	NC	
BOSULIF CAP 50MG	5	SP, PA, QL
BOSULIF CAP 100MG	5	SP, PA, QL
BOSULIF TAB 100MG	5	SP, PA, QL
BOSULIF TAB 400MG	5	SP, PA, QL
BOSULIF TAB 500MG	5	SP, PA, QL
BRAFTOVI CAP 75MG	5	SP, PA, QL
BRUKINSA CAP 80MG	5	SP, PA, QL
CABOMETYX TAB 20MG	5	SP, PA, QL
CABOMETYX TAB 40MG	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CABOMETYX TAB 60MG	5	SP, PA, QL
CALQUENCE CAP 100MG	6	SP, PA, QL
CALQUENCE TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 300MG	6	SP, PA, QL
COMETRIQ KIT 60MG	6	SP, PA, QL
COMETRIQ KIT 100MG	6	SP, PA, QL
COMETRIQ KIT 140MG	6	SP, PA, QL
COPIKTRA CAP 15MG	5	SP, PA, QL
COPIKTRA CAP 25MG	5	SP, PA, QL
COTELLIC TAB 20MG	5	SP, PA, QL
<i>everolimus tab 2.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 5 mg</i>	4	SP, PA, QL
<i>everolimus tab 7.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 10 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 2 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 3 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 5 mg</i>	4	SP, PA, QL
FARYDAK CAP 10MG	NC	
FARYDAK CAP 15MG	NC	
FARYDAK CAP 20MG	NC	
FOTIVDA CAP 0.89MG	NC	
FOTIVDA CAP 1.34MG	NC	
FYARRO SUS 100MG	6	SP, PA
GAVRETO CAP 100MG	5	SP, PA, QL
GLEEVEC TAB 100MG	NC	
GLEEVEC TAB 400MG	NC	
IBRANCE CAP 75MG	5	SP, PA, QL
IBRANCE CAP 100MG	5	SP, PA, QL
IBRANCE CAP 125MG	5	SP, PA, QL
IBRANCE TAB 75MG	5	SP, PA, QL
IBRANCE TAB 100MG	5	SP, PA, QL
IBRANCE TAB 125MG	5	SP, PA, QL
ICLUSIG TAB 10MG	NC	
ICLUSIG TAB 15MG	NC	
ICLUSIG TAB 30MG	NC	
ICLUSIG TAB 45MG	NC	
IDHIFA TAB 50MG	6	SP, PA, QL
IDHIFA TAB 100MG	6	SP, PA, QL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	4	SP, PA
IMBRUVICA CAP 70MG	NC	
IMBRUVICA CAP 140MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IMBRUVICA SUS 70MG/ML	NC	
IMBRUVICA TAB 140MG	NC	
IMBRUVICA TAB 280MG	NC	
IMBRUVICA TAB 420MG	NC	
IMBRUVICA TAB 560MG	NC	
INREBIC CAP 100MG	NC	
ISTODAX INJ 10MG	6	SP, PA
JAKAFI TAB 5MG	NC	
JAKAFI TAB 10MG	NC	
JAKAFI TAB 15MG	NC	
JAKAFI TAB 20MG	NC	
JAKAFI TAB 25MG	NC	
JAYPIRCA TAB 50MG	NC	
JAYPIRCA TAB 100MG	NC	
KISQALI TAB 200DOSE	5	SP, PA, QL
KISQALI TAB 400DOSE	5	SP, PA, QL
KISQALI TAB 600DOSE	5	SP, PA, QL
KOSELUGO CAP 10MG	6	SP, PA, QL
KOSELUGO CAP 25MG	6	SP, PA, QL
KRAZATI TAB 200MG	5	SP, PA, QL
KYPROLIS SOL 10MG	NC	
KYPROLIS SOL 30MG	NC	
KYPROLIS SOL 60MG	NC	
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	4	SP, PA, QL
LORBRENA TAB 25MG	NC	
LORBRENA TAB 100MG	NC	
LUMAKRAS TAB 120MG	5	SP, PA, QL
LUMAKRAS TAB 320MG	5	SP, PA, QL
LYNPARZA TAB 100MG	5	SP, PA, QL
LYNPARZA TAB 150MG	5	SP, PA, QL
LYTGOBI TAB 4MG	NC	
MEKINIST TAB 0.5MG	NC	
MEKINIST TAB 2MG	6	PA, QL
MEKTOVI TAB 15MG	5	SP, PA, QL
NERLYNX TAB 40MG	6	SP, PA, QL
NEXAVAR TAB 200MG	NC	
NINLARO CAP 2.3MG	5	SP, PA, QL
NINLARO CAP 3MG	5	SP, PA, QL
NINLARO CAP 4MG	5	SP, PA, QL
OGSIVEO TAB 100MG	NC	
OJEMDA SUS 25MG/ML	NC	
OJEMDA TAB 100MG	NC	
<i>pazopanib hcl tab 200 mg (base equiv)</i>	4	SP, PA, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PEMAZYRE TAB 4.5MG	NC	
PEMAZYRE TAB 9MG	NC	
PEMAZYRE TAB 13.5MG	NC	
PIQRAY 200MG TAB DOSE	6	SP, PA, QL
PIQRAY 250MG TAB DOSE	6	SP, PA, QL
PIQRAY 300MG TAB DOSE	6	SP, PA, QL
QINLOCK TAB 50MG	NC	
RETEVMO CAP 40MG	5	SP, PA, QL
RETEVMO CAP 80MG	5	SP, PA, QL
<i>romidepsin for iv inj 10 mg</i>	4	SP, PA
ROZLYTREK CAP 100MG	5	SP, PA, QL
ROZLYTREK CAP 200MG	5	SP, PA, QL
ROZLYTREK PAK 50MG	5	SP, PA, QL
RUBRACA TAB 200MG	NC	
RUBRACA TAB 250MG	NC	
RUBRACA TAB 300MG	NC	
RYDAPT CAP 25MG	6	SP, PA, QL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	4	SP, PA, QL
SPRYCEL TAB 20MG	5	SP, PA, QL
SPRYCEL TAB 50MG	5	SP, PA, QL
SPRYCEL TAB 70MG	5	SP, PA, QL
SPRYCEL TAB 80MG	5	SP, PA, QL
SPRYCEL TAB 100MG	5	SP, PA, QL
SPRYCEL TAB 140MG	5	SP, PA, QL
STIVARGA TAB 40MG	5	SP, PA, QL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 50 mg (base equivalent)</i>	4	SP, PA, QL
SUTENT CAP 12.5MG	NC	
SUTENT CAP 25MG	NC	
SUTENT CAP 37.5MG	NC	
SUTENT CAP 50MG	NC	
TABRECTA TAB 150MG	NC	
TABRECTA TAB 200MG	NC	
TAFINLAR CAP 50MG	NC	
TAFINLAR CAP 75MG	NC	
TALZENNA CAP 0.1MG	NC	
TALZENNA CAP 0.5MG	NC	
TALZENNA CAP 0.25MG	NC	
TALZENNA CAP 0.35MG	NC	
TALZENNA CAP 0.75MG	NC	
TALZENNA CAP 1MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TASIGNA CAP 50MG	NC	
TASIGNA CAP 150MG	NC	
TASIGNA CAP 200MG	NC	
TAZVERIK TAB 200MG	NC	
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	SP, PA, QL
TEPMETKO TAB 225MG	NC	
TIBSOVO TAB 250MG	6	SP, PA, QL
TORISEL INJ 25MG/ML	6	SP, ST, PA, QL
TRUQAP TAB 160MG	NC	
TURALIO CAP 200MG	NC	
TYKERB TAB 250MG	6	SP, PA, QL
UKONIQ TAB 200MG	NC	
VANFLYTA TAB 17.7MG	NC	
VANFLYTA TAB 26.5MG	NC	
VELCADE INJ 3.5MG	6	SP, PA
VERZENIO TAB 50MG	6	SP, PA, QL
VERZENIO TAB 100MG	6	SP, PA, QL
VERZENIO TAB 150MG	6	SP, PA, QL
VERZENIO TAB 200MG	6	SP, PA, QL
VITRAKVI CAP 25MG	5	SP, PA, QL
VITRAKVI CAP 100MG	5	SP, PA, QL
VITRAKVI SOL 20MG/ML	5	SP, PA, QL
VONJO CAP 100MG	6	SP, PA, QL
VOTRIENT TAB 200MG	NC	
XALKORI CAP 20MG	6	SP, PA, QL
XALKORI CAP 50MG	6	SP, PA, QL
XALKORI CAP 150MG	6	SP, PA, QL
XALKORI CAP 200MG	NC	
XALKORI CAP 250MG	NC	
XOSPATA TAB 40MG	5	SP, PA, QL
ZEJULA CAP 100MG	5	SP, PA, QL
ZEJULA TAB 100MG	5	SP, PA, QL
ZEJULA TAB 200MG	5	SP, PA, QL
ZEJULA TAB 300MG	5	SP, PA, QL
ZELBORAF TAB 240MG	5	SP, PA, QL
ZOLINZA CAP 100MG	5	SP, PA, QL
ZYDELIG TAB 100MG	5	SP, PA, QL
ZYDELIG TAB 150MG	5	SP, PA, QL
ZYKADIA TAB 150MG	5	SP, PA, QL
<b>ANTINEOPLASTIC ENZYMES</b>		
ASPARLAS INJ 3750/5ML	6	SP, PA
ONCASPAS INJ 750/ML	6	SP, PA
RYLAZE INJ 10/0.5ML	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTIC RADIOPHARMACEUTICALS</b>		
LUTATHERA SOL 370MBQ	NC	
XOFIGO INJ 1100KBQ	NC	
<b>ANTINEOPLASTICS MISC.</b>		
ACTIMMUNE INJ 2MU/0.5	6	SP, PA
<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	4	
BESREMI SOL 500MCG	5	SP, PA, QL
<i>bexarotene cap 75 mg</i>	4	SP, PA
<i>dacarbazine for inj 100 mg</i>	1	
<i>dacarbazine for inj 200 mg</i>	1	
ELZONRIS SOL 1000MCG	NC	
HYDREA CAP 500MG	3	
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A INJ 10MU	6	SP, PA
INTRON A INJ 50MU	6	SP, PA
MATULANE CAP 50MG	2	
NIPENT INJ 10MG	3	
PHOTOFRIN INJ 75MG	3	
PROLEUKIN INJ 22MU	6	SP, PA
TARGRETIN CAP 75MG	NC	
TICE BCG INJ	3	
<i>tretinoin cap 10 mg</i>	2	
TRISENOX INJ 12MG/6ML	6	
UVADEX SOL 20MCG/ML	3	
<b>CHEMOTHERAPY ADJUNCTS</b>		
ELITEK INJ 1.5MG	3	
ELITEK INJ 7.5MG	3	
KEPIVANCE INJ 5.16MG	NC	
<b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b>		
COSELA INJ 300MG	NC	
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	1	
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	1	
ETHYOL INJ 500MG	3	
IWILFIN TAB 192MG	6	SP, PA, QL
KHAPZORY SOL 175MG	NC	
KHAPZORY SOL 300MG	NC	
<i>leucovorin calcium for inj 50 mg</i>	1	
<i>leucovorin calcium for inj 100 mg</i>	1	
<i>leucovorin calcium for inj 200 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>leucovorin calcium for inj 350 mg</i>	1	
<i>leucovorin calcium for inj 500 mg</i>	1	
<i>leucovorin calcium inj 100 mg/10ml (10 mg/ml)</i>	1	
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	1	
<i>leucovorin calcium tab 5 mg</i>	1	
<i>leucovorin calcium tab 10 mg</i>	2	
<i>leucovorin calcium tab 15 mg</i>	2	
<i>leucovorin calcium tab 25 mg</i>	2	
<i>levoleucovorin calcium for iv inj 50 mg (base equiv)</i>	4	SP, PA
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	4	SP, PA
<i>levoleucovorin calcium iv soln pf 250 mg/25ml (base equiv)</i>	4	SP, PA
<i>mesna inj 100 mg/ml</i>	1	
MESNEX INJ 1GM	3	
MESNEX TAB 400MG	3	
PEDMARK INJ 12.5GM	3	
TOTECT INJ 500MG	NC	
VORAXAZE INJ 1000UNIT	6	SP
<b>MITOTIC INHIBITORS</b>		
ABRAXANE INJ 100MG	6	SP
<i>docetaxel for inj conc 20 mg/ml</i>	1	
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	1	
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	1	
DOCETAXEL INJ 20MG/2ML	3	
DOCETAXEL INJ 20MG/ML	3	
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 80MG/8ML	3	
DOCETAXEL INJ 160/8ML	3	
DOCETAXEL INJ 160/16ML	3	
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	1	
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	1	
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	1	
DOCIVYX INJ 20MG/2ML	NC	
DOCIVYX INJ 80MG/8ML	NC	
DOCIVYX INJ 160/16ML	NC	
<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	4	SP, PA
ETOPOPHOS INJ 100MG	3	
<i>etoposide cap 50 mg</i>	2	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	1	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HALAVEN INJ 1MG/2ML	6	SP, PA
IXEMPRA KIT INJ 15MG	6	SP, PA
IXEMPRA KIT INJ 45MG	6	SP, PA
JEVTANA INJ 60/1.5ML	6	SP, PA
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	1	
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	1	SP
<i>toposar inj 1gm/50ml</i>	1	
<i>toposar inj 100/5ml</i>	1	
<i>toposar inj 500/25ml</i>	1	
<i>vinblastine sulfate inj 1 mg/ml</i>	1	
<i>vincristine sulfate iv soln 1 mg/ml</i>	1	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	1	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	1	

#### **ONCOLYTIC VIRAL AGENTS**

IMLYGIC INJ	6	SP, PA
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#### **TOPOISOMERASE I INHIBITORS**

CAMPTOSAR INJ 40MG/2ML	3	
CAMPTOSAR INJ 100/5ML	3	
CAMPTOSAR INJ 300/15ML	3	
HYCAMTIN CAP 0.25MG	6	SP, PA
HYCAMTIN CAP 1MG	6	SP, PA
HYCAMTIN INJ 4MG	3	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	1	
ONIVYDE INJ 4.3MG/ML	6	SP
<i>topotecan hcl for inj 4 mg (base equiv)</i>	1	
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	1	
TOPOTECAN INJ 4MG/4ML	3	
TRODELVY SOL 180MG	6	SP, PA

#### **ANTIPARKINSON AND RELATED THERAPY AGENTS**

##### **ANTIPARKINSON ADJUNCTIVE THERAPY**

<i>carbidopa tab 25 mg</i>	2	
LODOSYN TAB 25MG	3	
NOURIANZ TAB 20MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NOURIANZ TAB 40MG	NC	
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<i>benztropine mesylate inj 1 mg/ml</i>	1	
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
<b>ANTIPARKINSON COMT INHIBITORS</b>		
COMTAN TAB 200MG	3	
<i>entacapone tab 200 mg</i>	1	
ONGENTYS CAP 25MG	NC	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	NC	
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	4	PA, QL
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	2	
DHIVY TAB 25-100MG	3	
DUOPA SUS 4.63-20	6	SP, PA
GOCOVRI CAP 68.5MG	NC	
GOCOVRI CAP 137MG	NC	
INBRIJA CAP 42MG	5	SP, PA, QL
KYNMOBI MIS 10MG	5	SP, PA, QL
KYNMOBI MIS 15MG	5	SP, PA, QL
KYNMOBI MIS 20MG	5	SP, PA, QL
KYNMOBI MIS 25MG	5	SP, PA, QL
KYNMOBI MIS 30MG	5	SP, PA, QL
MIRAPEX ER TAB 0.75MG	3	
MIRAPEX ER TAB 0.375MG	3	
MIRAPEX ER TAB 2.25MG	3	
MIRAPEX ER TAB 3.75MG	3	
MIRAPEX ER TAB 3MG	3	
MIRAPEX ER TAB 4.5MG	3	
NEUPRO DIS 1MG/24HR	2	
NEUPRO DIS 2MG/24HR	2	
NEUPRO DIS 3MG/24HR	2	
NEUPRO DIS 4MG/24HR	2	
NEUPRO DIS 6MG/24HR	2	
NEUPRO DIS 8MG/24HR	2	
OSMOLEX ER TAB 129MG	NC	
OSMOLEX ER TAB 193MG	NC	
OSMOLEX ER TAB 258MG	NC	
PARLODEL CAP 5MG	3	
PARLODEL TAB 2.5MG	3	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	2	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
RYTARY CAP 95MG	2	
RYTARY CAP 145MG	2	
RYTARY CAP 195MG	2	
RYTARY CAP 245MG	2	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
STALEVO 50 TAB	3	
STALEVO 75 TAB	3	
STALEVO 100 TAB	3	
STALEVO 125 TAB	3	
STALEVO 150 TAB	3	
STALEVO 200 TAB	3	
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	2	



Drug Name	Drug Tier	Requirements/Limits
XADAGO TAB 50MG	NC	
XADAGO TAB 100MG	NC	
ZELAPAR TAB 1.25MG	3	

## ANTIPSYCHOTICS/ANTIMANIC AGENTS

### ANTIMANIC AGENTS

<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
<i>lithium oral solution 8 meq/5ml</i>	1	
LITHOBID TAB 300MG CR	3	

### ANTIPSYCHOTICS - MISC.

CAPLYTA CAP 10.5MG	3	PA; PV
CAPLYTA CAP 21MG	3	PA; PV
CAPLYTA CAP 42MG	3	PA; PV
EQUETRO CAP 100MG	3	PV
EQUETRO CAP 200MG	3	PV
EQUETRO CAP 300MG	3	PV
GEODON CAP 20MG	3	PV
GEODON CAP 40MG	3	PV
GEODON CAP 60MG	3	PV
GEODON CAP 80MG	3	PV
GEODON INJ 20MG	3	
LATUDA TAB 20MG	NC	
LATUDA TAB 40MG	NC	
LATUDA TAB 60MG	NC	
LATUDA TAB 80MG	NC	
LATUDA TAB 120MG	NC	
<i>lurasidone hcl tab 20 mg</i>	2	PA; PV
<i>lurasidone hcl tab 40 mg</i>	2	PA; PV
<i>lurasidone hcl tab 60 mg</i>	2	PA; PV
<i>lurasidone hcl tab 80 mg</i>	2	PA; PV
<i>lurasidone hcl tab 120 mg</i>	2	PA; PV
NUPLAZID CAP 34MG	6	SP, PA, QL
NUPLAZID TAB 10MG	6	SP, PA, QL
VRAYLAR CAP 1.5MG	2	PA; PV
VRAYLAR CAP 3MG	2	PA; PV
VRAYLAR CAP 4.5MG	2	PA; PV
VRAYLAR CAP 6MG	2	PA; PV
<i>ziprasidone hcl cap 20 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ziprasidone hcl cap 40 mg</i>	1	PV
<i>ziprasidone hcl cap 60 mg</i>	1	PV
<i>ziprasidone hcl cap 80 mg</i>	1	PV
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	

### **BENZISOXAZOLES**

FANAPT PAK	NC	
FANAPT TAB 1MG	NC	
FANAPT TAB 2MG	NC	
FANAPT TAB 4MG	NC	
FANAPT TAB 6MG	NC	
FANAPT TAB 8MG	NC	
FANAPT TAB 10MG	NC	
FANAPT TAB 12MG	NC	
INVEGA HAFYE INJ 1092MG	3	
INVEGA HAFYE INJ 1560MG	3	
INVEGA SUST INJ 39/0.25	3	PV
INVEGA SUST INJ 78/0.5ML	3	PV
INVEGA SUST INJ 117/0.75	3	PV
INVEGA SUST INJ 156MG/ML	3	PV
INVEGA SUST INJ 234/1.5	3	PV
INVEGA TAB 3MG	3	PV
INVEGA TAB 6MG	3	PV
INVEGA TAB 9MG	3	PV
INVEGA TRINZ INJ 273MG	NC	
INVEGA TRINZ INJ 410MG	NC	
INVEGA TRINZ INJ 546MG	NC	
INVEGA TRINZ INJ 819MG	NC	
<i>paliperidone tab er 24hr 1.5 mg</i>	2	PV
<i>paliperidone tab er 24hr 3 mg</i>	2	PV
<i>paliperidone tab er 24hr 6 mg</i>	2	PV
<i>paliperidone tab er 24hr 9 mg</i>	2	PV
PERSERIS INJ 90MG	2	PV
PERSERIS INJ 120MG	2	PV
RISPERDAL INJ 12.5MG	3	PV
RISPERDAL INJ 25MG	3	PV
RISPERDAL INJ 37.5MG	3	PV
RISPERDAL INJ 50MG	3	PV
RISPERDAL SOL 1MG/ML	3	PV
RISPERDAL TAB 0.5MG	3	PV
RISPERDAL TAB 1MG	3	PV
RISPERDAL TAB 2MG	3	PV
RISPERDAL TAB 3MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RISPERDAL TAB 4MG	3	PV
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 25 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	1	PV
<i>risperidone microspheres for im extended rel susp 50 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.25 mg</i>	2	PV
<i>risperidone orally disintegrating tab 1 mg</i>	2	PV
<i>risperidone orally disintegrating tab 2 mg</i>	1	PV
<i>risperidone orally disintegrating tab 3 mg</i>	2	PV
<i>risperidone orally disintegrating tab 4 mg</i>	2	PV
<i>risperidone soln 1 mg/ml</i>	1	PV
<i>risperidone tab 0.5 mg</i>	1	PV
<i>risperidone tab 0.25 mg</i>	1	PV
<i>risperidone tab 1 mg</i>	1	PV
<i>risperidone tab 2 mg</i>	1	PV
<i>risperidone tab 3 mg</i>	1	PV
<i>risperidone tab 4 mg</i>	1	PV
RYKINDO INJ 25MG	NC	
RYKINDO INJ 37.5MG	NC	
RYKINDO INJ 50MG	NC	
UZEDY INJ 50MG	NC	
UZEDY INJ 75MG	NC	
UZEDY INJ 100MG	NC	
UZEDY INJ 125MG	NC	
UZEDY INJ 150MG	NC	
UZEDY INJ 200MG	NC	
UZEDY INJ 250MG	NC	
<b>BUTYROPHENONES</b>		
HALDOL DECAN INJ 50MG/ML	3	PV
HALDOL DECAN INJ 100MG/ML	3	PV
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	PV
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	PV
<i>haloperidol lactate inj 5 mg/ml</i>	1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	PV
<i>haloperidol tab 0.5 mg</i>	1	PV
<i>haloperidol tab 1 mg</i>	1	PV
<i>haloperidol tab 2 mg</i>	1	PV
<i>haloperidol tab 5 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>haloperidol tab 10 mg</i>	1	PV
<i>haloperidol tab 20 mg</i>	1	PV
<b>DIBENZAPINES</b>		
ADASUVE INH 10MG	3	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	2	PA; PV
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	2	PA; PV
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	PA; PV
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	PV
<i>clozapine orally disintegrating tab 25 mg</i>	1	PV
<i>clozapine orally disintegrating tab 100 mg</i>	2	PV
<i>clozapine orally disintegrating tab 150 mg</i>	2	PV
<i>clozapine orally disintegrating tab 200 mg</i>	1	PV
<i>clozapine tab 25 mg</i>	1	PV
<i>clozapine tab 50 mg</i>	1	PV
<i>clozapine tab 100 mg</i>	1	PV
<i>clozapine tab 200 mg</i>	1	PV
CLOZARIL TAB 25MG	3	PV
CLOZARIL TAB 50MG	3	PV
CLOZARIL TAB 100MG	3	PV
CLOZARIL TAB 200MG	3	PV
<i>loxapine succinate cap 5 mg</i>	1	PV
<i>loxapine succinate cap 10 mg</i>	1	PV
<i>loxapine succinate cap 25 mg</i>	1	PV
<i>loxapine succinate cap 50 mg</i>	1	PV
<i>olanzapine for im inj 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 10 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 15 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 20 mg</i>	1	PV
<i>olanzapine tab 2.5 mg</i>	1	PV
<i>olanzapine tab 5 mg</i>	1	PV
<i>olanzapine tab 7.5 mg</i>	1	PV
<i>olanzapine tab 10 mg</i>	1	PV
<i>olanzapine tab 15 mg</i>	1	PV
<i>olanzapine tab 20 mg</i>	1	PV
<i>quetiapine fumarate tab 25 mg</i>	1	PV
<i>quetiapine fumarate tab 50 mg</i>	1	PV
<i>quetiapine fumarate tab 100 mg</i>	1	PV
<i>quetiapine fumarate tab 150 mg</i>	1	PV
<i>quetiapine fumarate tab 200 mg</i>	1	PV
<i>quetiapine fumarate tab 300 mg</i>	1	PV
<i>quetiapine fumarate tab 400 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	PV
SAPHRIS SUB 2.5MG	3	PA; PV
SAPHRIS SUB 5MG	3	PA; PV
SAPHRIS SUB 10MG	3	PA; PV
SECUADO DIS 3.8MG	NC	
SECUADO DIS 5.7MG	NC	
SECUADO DIS 7.6MG	NC	
SEROQUEL TAB 25MG	3	PV
SEROQUEL TAB 50MG	3	PV
SEROQUEL TAB 100MG	3	PV
SEROQUEL TAB 200MG	3	PV
SEROQUEL TAB 300MG	3	PV
SEROQUEL TAB 400MG	3	PV
SEROQUEL XR TAB 50MG	NC	
SEROQUEL XR TAB 150MG	NC	
SEROQUEL XR TAB 200MG	NC	
SEROQUEL XR TAB 300MG	NC	
SEROQUEL XR TAB 400MG	NC	
VERSACLOZ SUS 50MG/ML	3	PV
ZYPREXA INJ 10MG	3	
ZYPREXA RELP INJ 210MG	3	
ZYPREXA RELP INJ 300MG	3	
ZYPREXA RELP INJ 405MG	3	
ZYPREXA TAB 2.5MG	3	PV
ZYPREXA TAB 5MG	3	PV
ZYPREXA TAB 7.5MG	3	PV
ZYPREXA TAB 10MG	3	PV
ZYPREXA TAB 15MG	3	PV
ZYPREXA TAB 20MG	3	PV
ZYPREXA ZYDI TAB 5MG	3	PV
ZYPREXA ZYDI TAB 10MG	3	PV
ZYPREXA ZYDI TAB 15MG	3	PV
ZYPREXA ZYDI TAB 20MG	3	PV
<b>DIHYDROINDOLONES</b>		
<i>molindone hcl tab 5 mg</i>	1	PV
<i>molindone hcl tab 10 mg</i>	1	PV
<i>molindone hcl tab 25 mg</i>	1	PV
<b>PHENOTHIAZINES</b>		
<i>chlorpromazine hcl inj 25 mg/ml</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chlorpromazine hcl inj 50 mg/2ml</i>	2	
<i>chlorpromazine hcl tab 10 mg</i>	1	PV
<i>chlorpromazine hcl tab 25 mg</i>	2	PV
<i>chlorpromazine hcl tab 50 mg</i>	2	PV
<i>chlorpromazine hcl tab 100 mg</i>	2	PV
<i>chlorpromazine hcl tab 200 mg</i>	2	PV
<i>compro sup 25mg</i>	2	
<i>fluphenazine decanoate inj 25 mg/ml</i>	1	PV
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	PV
<i>fluphenazine hcl inj 2.5 mg/ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	PV
<i>fluphenazine hcl tab 1 mg</i>	1	PV
<i>fluphenazine hcl tab 2.5 mg</i>	1	PV
<i>fluphenazine hcl tab 5 mg</i>	2	PV
<i>fluphenazine hcl tab 10 mg</i>	1	PV
<i>perphenazine tab 2 mg</i>	1	PV
<i>perphenazine tab 4 mg</i>	1	PV
<i>perphenazine tab 8 mg</i>	1	PV
<i>perphenazine tab 16 mg</i>	1	PV
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>thioridazine hcl tab 10 mg</i>	1	PV
<i>thioridazine hcl tab 25 mg</i>	1	PV
<i>thioridazine hcl tab 50 mg</i>	1	PV
<i>thioridazine hcl tab 100 mg</i>	1	PV
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	PV

### **QUINOLINONE DERIVATIVES**

ABILIFY ASIM INJ 720MG	NC	
ABILIFY ASIM INJ 960MG	NC	
ABILIFY MAIN INJ 300MG	2	PV
ABILIFY MAIN INJ 400MG	2	PV
ABILIFY MYCI TAB 2MG MANT	NC	
ABILIFY MYCI TAB 2MG STRT	NC	
ABILIFY MYCI TAB 5MG MANT	NC	
ABILIFY MYCI TAB 5MG STRT	NC	
ABILIFY MYCI TAB 10MG MNT	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ABILIFY MYCI TAB 10MG STR	NC	
ABILIFY MYCI TAB 15MG MNT	NC	
ABILIFY MYCI TAB 15MG STR	NC	
ABILIFY MYCI TAB 20MG MNT	NC	
ABILIFY MYCI TAB 20MG STR	NC	
ABILIFY MYCI TAB 30MG MNT	NC	
ABILIFY MYCI TAB 30MG STR	NC	
ABILIFY TAB 2MG	NC	
ABILIFY TAB 5MG	NC	
ABILIFY TAB 10MG	NC	
ABILIFY TAB 15MG	NC	
ABILIFY TAB 20MG	NC	
ABILIFY TAB 30MG	NC	
<i>aripiprazole oral solution 1 mg/ml</i>	2	PV
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	PV
<i>aripiprazole orally disintegrating tab 15 mg</i>	2	PV
<i>aripiprazole tab 2 mg</i>	1	PV
<i>aripiprazole tab 5 mg</i>	1	PV
<i>aripiprazole tab 10 mg</i>	1	PV
<i>aripiprazole tab 15 mg</i>	1	PV
<i>aripiprazole tab 20 mg</i>	1	PV
<i>aripiprazole tab 30 mg</i>	1	PV
ARISTADA INJ 441MG/1.	3	PV
ARISTADA INJ 662MG/2	3	PV
ARISTADA INJ 882MG/3	3	PV
ARISTADA INJ 1064MG	3	PV
ARISTADA INJ INITIO	3	PV
REXULTI TAB 0.5MG	3	PA; PV
REXULTI TAB 0.25MG	3	PA; PV
REXULTI TAB 1MG	3	PA; PV
REXULTI TAB 2MG	3	PA; PV
REXULTI TAB 3MG	3	PA; PV
REXULTI TAB 4MG	3	PA; PV
<b>THIOXANTHENES</b>		
<i>thiothixene cap 1 mg</i>	1	PV
<i>thiothixene cap 2 mg</i>	1	PV
<i>thiothixene cap 5 mg</i>	1	PV
<i>thiothixene cap 10 mg</i>	1	PV
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
FORMALDEHYDE SOL 37%	3	
<i>formaldehyde solution 10%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLUTARALDEHY SOL 25%	3	
<i>hydrogen peroxide soln 30%</i>	1	
<b>CHLORINE ANTISEPTICS</b>		
ANASEPT SPR	NC	OTC
BENZALKONIUM SOL 50%	3	
BENZALKONIUM SOL NF	3	
CHLORHEX GLU SOL 20%	3	
<b>IODINE ANTISEPTICS</b>		
IODINE TIN 2%	3	
LUGOLS SOL IODINE	3	
<b>ANTIVIRALS</b>		
<b>ANTIRETROVIRALS</b>		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	SP, QL
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	SP, QL
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	SP, QL
APRETUDE SUS 600MG ER	6	SP
APTIVUS CAP 250MG	NC	
APTIVUS SOL	NC	
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	SP, QL
ATRIPLA TAB	NC	
BIKTARVY TAB	2	SP, QL
CABENUVA SUS 400-600	NC	
CABENUVA SUS 600-900	NC	
CIMDUO TAB 300-300	2	SP, PA, QL
COMPLERA TAB	NC	
DELSTRIGO TAB	NC	
DESCOVY TAB 120-15MG	2	SP, QL; PV
DESCOVY TAB 200/25MG	2	SP, QL; PV
DOVATO TAB 50-300MG	2	SP, QL
EDURANT TAB 25MG	NC	
<i>efavirenz cap 50 mg</i>	1	SP, QL
<i>efavirenz cap 200 mg</i>	1	SP, QL
<i>efavirenz tab 600 mg</i>	1	SP, QL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	SP, QL
<i>emtricitabine caps 200 mg</i>	1	SP, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	0	SP, QL; ACA, PV
EMTRIVA CAP 200MG	2	SP, QL
EMTRIVA SOL 10MG/ML	2	SP, QL
EPIVIR SOL 10MG/ML	2	SP, QL
EPIVIR TAB 150MG	2	SP, QL
EPIVIR TAB 300MG	2	SP, QL
<i>etravirine tab 100 mg</i>	1	SP, QL
<i>etravirine tab 200 mg</i>	1	SP, QL
EVOTAZ TAB 300-150	3	SP, QL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	SP, QL
FUZEON INJ 90MG	5	SP, PA, QL
GENVOYA TAB	2	SP, QL
INTELENCE TAB 25MG	NC	
INTELENCE TAB 100MG	NC	
INTELENCE TAB 200MG	NC	
INVIRASE TAB 500MG	NC	
ISENTRESS CHW 25MG	2	SP, QL
ISENTRESS CHW 100MG	2	SP, QL
ISENTRESS HD TAB 600MG	2	SP, QL
ISENTRESS POW 100MG	2	SP, QL
ISENTRESS TAB 400MG	2	SP, QL
JULUCA TAB 50-25MG	3	SP, QL
KALETRA SOL	NC	
KALETRA TAB 100-25MG	NC	
KALETRA TAB 200-50MG	NC	
<i>lamivudine oral soln 10 mg/ml</i>	1	SP, QL
<i>lamivudine tab 150 mg</i>	1	SP, QL
<i>lamivudine tab 300 mg</i>	1	SP, QL
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	SP, QL
LEXIVA SUS 50MG/ML	NC	
LEXIVA TAB 700MG	NC	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	SP, QL
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	SP, QL
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	SP, QL
<i>maraviroc tab 150 mg</i>	1	SP, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>maraviroc tab 300 mg</i>	1	SP, QL
<i>nevirapine susp 50 mg/5ml</i>	1	SP, QL
<i>nevirapine tab 200 mg</i>	1	SP, QL
<i>nevirapine tab er 24hr 400 mg</i>	1	SP, QL
NORVIR POW 100MG	NC	
NORVIR SOL 80MG/ML	NC	
NORVIR TAB 100MG	NC	
ODEFSEY TAB	2	SP, QL
PIFELTRO TAB 100MG	NC	
PREZCOBIX TAB 800-150	3	SP, QL
PREZISTA SUS 100MG/ML	NC	
PREZISTA TAB 75MG	NC	
PREZISTA TAB 150MG	NC	
PREZISTA TAB 600MG	NC	
PREZISTA TAB 800MG	NC	
RETROVIR CAP 100MG	2	SP, QL
RETROVIR INJ 10MG/ML	2	SP, QL
RETROVIR SYP 50MG/5ML	2	SP, QL
REYATAZ CAP 200MG	NC	
REYATAZ CAP 300MG	NC	
REYATAZ POW 50MG	NC	
<i>ritonavir tab 100 mg</i>	1	SP, QL
RUKOBIA TAB 600MG ER	6	SP, QL
SELZENTRY SOL 20MG/ML	NC	
SELZENTRY TAB 25MG	NC	
SELZENTRY TAB 75MG	NC	
SELZENTRY TAB 150MG	NC	
SELZENTRY TAB 300MG	NC	
STRIBILD TAB	NC	
SUNLENCA INJ	NC	
SUNLENCA TAB 300MG	NC	
SUSTIVA CAP 50MG	2	SP, QL
SUSTIVA CAP 200MG	2	SP, QL
SYMFI LO TAB	3	SP, QL
SYMFI TAB	3	SP, QL
SYMTUZA TAB	2	SP, QL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	SP, QL
TIVICAY PD TAB 5MG	2	SP, QL
TIVICAY TAB 50MG	2	SP, QL
TRIUMEQ PD TAB	2	SP, QL
TRIUMEQ TAB	2	SP, QL
TROGARZO INJ 150MG/ML	6	SP
TRUVADA TAB 100-150	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUVADA TAB 133-200	NC	
TRUVADA TAB 167-250	NC	
TRUVADA TAB 200-300	NC	
TYBOST TAB 150MG	2	SP, QL
VIRACEPT TAB 250MG	NC	
VIRACEPT TAB 625MG	NC	
VIREAD POW 40MG/GM	3	SP, QL
VIREAD TAB 150MG	3	SP, QL
VIREAD TAB 200MG	3	SP, QL
VIREAD TAB 250MG	3	SP, QL
VIREAD TAB 300MG	3	SP, QL
ZIAGEN SOL 20MG/ML	2	SP, QL
<i>zidovudine cap 100 mg</i>	1	SP, QL
<i>zidovudine syrup 10 mg/ml</i>	1	SP, QL
<i>zidovudine tab 300 mg</i>	1	SP, QL
<b>ANTIVIRAL COMBINATIONS</b>		
PAXLOVID TAB 150-100	2	QL
PAXLOVID TAB 300-100	2	QL
<b>CMV AGENTS</b>		
<i>cidofovir iv inj 75 mg/ml</i>	2	
<i>foscarnet sodium inj 6000 mg/250ml (24 mg/ml)</i>	1	
FOSCAVIR INJ 24MG/ML	3	
<i>ganciclovir sodium for inj 500 mg</i>	1	
LIVTENCITY TAB 200MG	6	SP, QL
PREVYMIS INJ 240/12	3	
PREVYMIS INJ 480/24	3	
PREVYMIS TAB 240MG	3	
PREVYMIS TAB 480MG	3	
VALCYTE SOL 50MG/ML	NC	
VALCYTE TAB 450MG	NC	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	2	QL
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	QL
<b>HEPATITIS AGENTS</b>		
<i>adefovir dipivoxil tab 10 mg</i>	4	SP
BARACLUDE SOL	6	SP, QL
BARACLUDE TAB 0.5MG	NC	
BARACLUDE TAB 1MG	NC	
<i>entecavir tab 0.5 mg</i>	4	SP, QL
<i>entecavir tab 1 mg</i>	4	SP, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EPCLUSA PAK 150-37.5	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA PAK 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 400-100	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPIVIR HBV SOL 5MG/ML	NC	
EPIVIR HBV TAB 100MG	NC	
HARVONI PAK	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI PAK 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 90-400MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HEPSERA TAB 10MG	NC	
<i>lamivudine tab 100 mg (hbv)</i>	4	SP
LEDIP-SOFOSB TAB 90-400MG	NC	
MAVYRET TAB 100-40MG	NC	
PEGASYS INJ	NC	
PEGASYS INJ 180MCG/M	NC	
PEGASYS INJ PROCLICK	NC	
PEGASYS KIT 180MCG/M	NC	
<i>ribavirin cap 200 mg</i>	4	SP, PA, QL
<i>ribavirin tab 200 mg</i>	4	SP, PA, QL
SOFOS/VELPAT TAB 400-100	NC	
SOVALDI PAK 150MG	6	SP, PA, QL
SOVALDI PAK 200MG	6	SP, PA, QL
SOVALDI TAB 200MG	6	SP, PA, QL
SOVALDI TAB 400MG	6	SP, PA, QL
VEMLIDY TAB 25MG	NC	
VIEKIRA PAK TAB	NC	
VOSEVI TAB	5	SP, PA, QL; for use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZEPATIER TAB 50-100MG	NC	
<b>HERPES AGENTS</b>		
<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
SITAVIG TAB 50MG	NC	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
VALTREX TAB 1GM	NC	
VALTREX TAB 500MG	NC	
ZOVIRAX SUS 200/5ML	3	
<b>INFLUENZA AGENTS</b>		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	2	PA, QL
RAPIVAB INJ 200MG/20	3	
RELENZA MIS DISKHALE	2	PA, QL
<i>rimantadine hydrochloride tab 100 mg</i>	1	
TAMIFLU CAP 30MG	3	PA, QL
TAMIFLU CAP 45MG	3	PA, QL
TAMIFLU CAP 75MG	3	PA, QL
TAMIFLU SUS 6MG/ML	3	PA, QL
XOFLUZA TAB 20MG	NC	
XOFLUZA TAB 40MG	NC	
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO CAP 200MG	3	\$0 Cost Share
REMDESIVIR INJ 100MG	3	PA, QL
TEMBEXA SUS 10MG/ML	3	
TEMBEXA TAB 100MG	3	
TPOXX CAP 200MG	3	
TPOXX INJ	3	
VEKLURY INJ 100MG	3	PA, QL
<b>BETA BLOCKERS</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<i>carvedilol phosphate cap er 24hr 10 mg</i>	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carvedilol phosphate cap er 24hr 20 mg</i>	2	PV
<i>carvedilol phosphate cap er 24hr 40 mg</i>	2	PV
<i>carvedilol phosphate cap er 24hr 80 mg</i>	2	PV
<i>carvedilol tab 3.125 mg</i>	1	PV
<i>carvedilol tab 6.25 mg</i>	1	PV
<i>carvedilol tab 12.5 mg</i>	1	PV
<i>carvedilol tab 25 mg</i>	1	PV
COREG CR CAP 10MG	NC	
COREG CR CAP 20MG	NC	
COREG CR CAP 40MG	NC	
COREG CR CAP 80MG	NC	
COREG TAB 3.125MG	3	PV
COREG TAB 6.25MG	3	PV
COREG TAB 12.5MG	3	PV
COREG TAB 25MG	3	PV
<i>labetalol hcl iv soln 5 mg/ml</i>	1	
<i>labetalol hcl tab 100 mg</i>	1	PV
<i>labetalol hcl tab 200 mg</i>	1	PV
<i>labetalol hcl tab 300 mg</i>	1	PV
LABETALOL INJ 20/4ML	3	
LABETALOL INJ NACL	3	

### **BETA BLOCKERS CARDIO-SELECTIVE**

<i>acebutolol hcl cap 200 mg</i>	1	PV
<i>acebutolol hcl cap 400 mg</i>	1	PV
<i>atenolol tab 25 mg</i>	1	PV
<i>atenolol tab 50 mg</i>	1	PV
<i>atenolol tab 100 mg</i>	1	PV
<i>betaxolol hcl tab 10 mg</i>	1	PV
<i>betaxolol hcl tab 20 mg</i>	1	PV
<i>bisoprolol fumarate tab 5 mg</i>	1	PV
<i>bisoprolol fumarate tab 10 mg</i>	1	PV
BREVIBLOC DS SOL 2000MG	3	
BREVIBLOC INJ 10MG/ML	3	
BREVIBLOC PM SOL 2500MG	3	
BREVIBLOC SOL	3	
BREVIBLOC SOL 10MG/ML	3	
BREVIBLOC SOL 2000MG	3	
BREVIBLOC SOL 2500MG	3	
BYSTOLIC TAB 2.5MG	NC	
BYSTOLIC TAB 5MG	NC	
BYSTOLIC TAB 10MG	NC	
BYSTOLIC TAB 20MG	NC	
<i>esmolol hcl inj 100 mg/10ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ESMOLOL HCL SOL 2000/100	3	
ESMOLOL HCL SOL 2500/250	3	
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	1	
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	1	
KAPSPARGO CAP 25MG	NC	
KAPSPARGO CAP 50MG	NC	
KAPSPARGO CAP 100MG	NC	
KAPSPARGO CAP 200MG	NC	
LOPRESSOR TAB 50MG	3	PV
LOPRESSOR TAB 100MG	3	PV
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	PV
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	PV
<i>metoprolol tartrate tab 37.5 mg</i>	1	PV
<i>metoprolol tartrate tab 50 mg</i>	1	PV
<i>metoprolol tartrate tab 75 mg</i>	1	PV
<i>metoprolol tartrate tab 100 mg</i>	1	PV
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	PV
TENORMIN TAB 25MG	3	PV
TENORMIN TAB 50MG	3	PV
TENORMIN TAB 100MG	3	PV
TOPROL XL TAB 25MG	NC	
TOPROL XL TAB 50MG	NC	
TOPROL XL TAB 100MG	NC	
TOPROL XL TAB 200MG	NC	
<b>BETA BLOCKERS NON-SELECTIVE</b>		
BETAPACE AF TAB 80MG	NC	
BETAPACE AF TAB 120MG	NC	
BETAPACE AF TAB 160MG	NC	
BETAPACE TAB 80MG	NC	
BETAPACE TAB 120MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BETAPACE TAB 160MG	NC	
CORGARD TAB 20MG	3	PV
CORGARD TAB 40MG	3	PV
CORGARD TAB 80MG	3	PV
HEMANGEOL SOL 4.28/ML	3	
INDERAL LA CAP 60MG	NC	
INDERAL LA CAP 80MG	NC	
INDERAL LA CAP 120MG	NC	
INDERAL LA CAP 160MG	NC	
INDERAL XL CAP 80MG	NC	
INDERAL XL CAP 120MG	NC	
INNOPRAN XL CAP 80MG	NC	
INNOPRAN XL CAP 120MG	NC	
<i>nadolol tab 20 mg</i>	1	PV
<i>nadolol tab 40 mg</i>	1	PV
<i>nadolol tab 80 mg</i>	1	PV
<i>pindolol tab 5 mg</i>	1	PV
<i>pindolol tab 10 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 60 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 80 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 120 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 160 mg</i>	1	PV
<i>propranolol hcl inj 1 mg/ml</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	PV
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	PV
<i>propranolol hcl tab 10 mg</i>	1	PV
<i>propranolol hcl tab 20 mg</i>	1	PV
<i>propranolol hcl tab 40 mg</i>	1	PV
<i>propranolol hcl tab 60 mg</i>	1	PV
<i>propranolol hcl tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afI) tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afI) tab 120 mg</i>	1	PV
<i>sotalol hcl (afib/afI) tab 160 mg</i>	1	PV
SOTALOL HCL INJ 150/10ML	3	
<i>sotalol hcl tab 80 mg</i>	1	PV
<i>sotalol hcl tab 120 mg</i>	1	PV
<i>sotalol hcl tab 160 mg</i>	1	PV
<i>sotalol hcl tab 240 mg</i>	1	PV
SOTYLIZE SOL 5MG/ML	3	PV
<i>timolol maleate tab 5 mg</i>	1	PV
<i>timolol maleate tab 10 mg</i>	1	PV
<i>timolol maleate tab 20 mg</i>	1	PV

### **CALCIUM CHANNEL BLOCKERS**



Drug Name	Drug Tier	Requirements/Limits
<b>CALCIUM CHANNEL BLOCKER COMBINATIONS</b>		
CONSENSI TAB 2.5-200	NC	
CONSENSI TAB 5-200MG	NC	
CONSENSI TAB 10-200MG	NC	

**CALCIUM CHANNEL BLOCKERS**

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	PV
CALAN SR TAB 120MG	3	PV
CALAN SR TAB 180MG	3	PV
CALAN SR TAB 240MG	3	PV
CARDENE IV INJ 40/200ML	3	
CARDENE IV SOL 20/200ML	3	
CARDIZEM CD CAP 120MG/24	NC	
CARDIZEM CD CAP 180MG/24	NC	
CARDIZEM CD CAP 240MG/24	NC	
CARDIZEM CD CAP 360MG/24	NC	
CARDIZEM LA TAB 120MG	NC	
CARDIZEM LA TAB 180MG	NC	
CARDIZEM LA TAB 240MG	NC	
CARDIZEM LA TAB 300MG/24	NC	
CARDIZEM LA TAB 360MG	NC	
CARDIZEM LA TAB 420MG/24	NC	
CARDIZEM TAB 30MG	NC	
CARDIZEM TAB 60MG	NC	
CARDIZEM TAB 120MG	NC	
<i>cartia xt cap 120/24hr</i>	1	PV
<i>cartia xt cap 180/24hr</i>	1	PV
<i>cartia xt cap 240/24hr</i>	1	PV
<i>cartia xt cap 300/24hr</i>	1	PV
CLEVIPREX EMU 0.5MG/ML	3	
CONJUPRI TAB 2.5MG	NC	
<i>dilt-xr cap 120mg</i>	1	PV
<i>dilt-xr cap 180mg</i>	1	PV
<i>dilt-xr cap 240mg</i>	1	PV
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	PV
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	PV
<i>diltiazem hcl cap er 12hr 120 mg</i>	2	PV
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	PV
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	2	PV
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	PV
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	1	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	1	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	PV
<i>diltiazem hcl tab 60 mg</i>	1	PV
<i>diltiazem hcl tab 90 mg</i>	1	PV
<i>diltiazem hcl tab 120 mg</i>	1	PV
<i>diltiazem hcl tab er 24hr 180 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 240 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 300 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 360 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 420 mg</i>	NC	
<b>DILTIAZEM INJ 100MG</b>	3	
<i>felodipine tab er 24hr 2.5 mg</i>	1	PV
<i>felodipine tab er 24hr 5 mg</i>	1	PV
<i>felodipine tab er 24hr 10 mg</i>	1	PV
<i>isradipine cap 2.5 mg</i>	1	PV
<i>isradipine cap 5 mg</i>	1	PV
<b>KATERZIA SUS 1MG/ML</b>	NC	
<i>levamlodipine maleate tab 2.5 mg</i>	1	
<i>levamlodipine maleate tab 5 mg</i>	1	
<i>matzim la tab 180mg/24</i>	NC	
<i>matzim la tab 240mg/24</i>	NC	
<i>matzim la tab 300mg/24</i>	NC	
<i>matzim la tab 360mg/24</i>	NC	
<i>matzim la tab 420mg/24</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nicardipine hcl cap 20 mg</i>	2	PV; (except NDCs 35573045785, 62559020590 and 68462012090 are not covered)
<i>nicardipine hcl cap 30 mg</i>	2	PV
<i>nicardipine hcl iv soln 2.5 mg/ml</i>	1	
<i>nifedipine cap 10 mg</i>	1	PV
<i>nifedipine cap 20 mg</i>	1	PV
<i>nifedipine tab er 24hr 30 mg</i>	1	PV
<i>nifedipine tab er 24hr 60 mg</i>	1	PV
<i>nifedipine tab er 24hr 90 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	PV
<i>nimodipine cap 30 mg</i>	2	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	PV
<i>nisoldipine tab er 24hr 17 mg</i>	2	PV
<i>nisoldipine tab er 24hr 20 mg</i>	2	PV
<i>nisoldipine tab er 24hr 25.5 mg</i>	1	PV
<i>nisoldipine tab er 24hr 30 mg</i>	1	PV
<i>nisoldipine tab er 24hr 34 mg</i>	2	PV
<i>nisoldipine tab er 24hr 40 mg</i>	2	PV
NORLIQVA SOL 1MG/ML	NC	
NORVASC TAB 2.5MG	NC	
NORVASC TAB 5MG	NC	
NORVASC TAB 10MG	NC	
NYMALIZE SOL	3	
PROCARDIA XL TAB 30MG CR	3	PV
PROCARDIA XL TAB 60MG CR	3	PV
PROCARDIA XL TAB 90MG CR	3	PV
SULAR TAB 8.5MG ER	3	PV
SULAR TAB 17MG ER	3	PV
SULAR TAB 34MG ER	3	PV
<i>taztia xt cap 120mg/24</i>	1	PV
<i>taztia xt cap 180mg/24</i>	1	PV
<i>taztia xt cap 240mg/24</i>	1	PV
<i>taztia xt cap 300mg er</i>	1	PV
<i>taztia xt cap 360mg/24</i>	1	PV
<i>tiadytl cap 120mg/24</i>	1	PV
<i>tiadytl cap 180mg/24</i>	1	PV
<i>tiadytl cap 240mg/24</i>	1	PV
<i>tiadytl cap 300mg/24</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tiadylt cap 360mg/24</i>	1	PV
<i>tiadylt cap 420mg/24</i>	1	PV
TIAZAC CAP 120MG/24	3	PV
TIAZAC CAP 180MG/24	3	PV
TIAZAC CAP 240MG/24	3	PV
TIAZAC CAP 300MG/24	3	PV
TIAZAC CAP 360MG/24	3	PV
TIAZAC CAP 420MG/24	3	PV
<i>verapamil hcl cap er 24hr 100 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 120 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 180 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 200 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 240 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 300 mg</i>	2	PV
<i>verapamil hcl cap er 24hr 360 mg</i>	1	PV
<i>verapamil hcl iv soln 2.5 mg/ml</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	PV
<i>verapamil hcl tab 80 mg</i>	1	PV
<i>verapamil hcl tab 120 mg</i>	1	PV
<i>verapamil hcl tab er 120 mg</i>	1	PV
<i>verapamil hcl tab er 180 mg</i>	1	PV
<i>verapamil hcl tab er 240 mg</i>	1	PV
VERELAN CAP 120MG SR	3	PV
VERELAN CAP 180MG SR	3	PV
VERELAN CAP 240MG SR	3	PV
VERELAN CAP 360MG SR	3	PV
VERELAN PM CAP 100MG ER	3	PV
VERELAN PM CAP 200MG ER	3	PV
VERELAN PM CAP 300MG ER	3	PV

## **CARDIOTONICS**

### **CARDIAC GLYCOSIDES**

<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digoxin inj 0.25 mg/ml</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	2	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
LANOXIN INJ 0.5/2ML	3	
LANOXIN INJ 0.25MG/1	3	
LANOXIN PED INJ 0.1MG/ML	3	
LANOXIN TAB 0.25MG	NC	
LANOXIN TAB 0.125MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LANOXIN TAB 0.0625MG	3	
<b>INOTROPES</b>		
<i>dobutamine hcl inj 12.5 mg/ml</i>	1	
<i>dopamine hcl inj 40 mg/ml</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	1	
<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	1	
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	1	
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	1	
<b>CARDIOVASCULAR AGENTS - MISC.</b>		
<b>CARDIAC MYOSIN INHIBITORS</b>		
CAMZYOS CAP 2.5MG	6	SP, PA, QL
CAMZYOS CAP 5MG	6	SP, PA, QL
CAMZYOS CAP 10MG	6	SP, PA, QL
CAMZYOS CAP 15MG	6	SP, PA, QL
<b>CARDIOPLEGIC SOLUTIONS</b>		
ADENOCAINE INJ 40ML	3	
CARDIOPL IND SOL 4:1	3	
CARDIOPL IND SOL 8:1	3	
CARDIOPL IND SOL LOW DEX8	3	
CARDIOPL IND SOL NON-EN 8	3	
CARDIOPL IND SOL PLASMA 4	3	
CARDIOPL IND SOL PLS/TROM	3	
CARDIOPL MN SOL 8:1	3	
CARDIOPL MN SOL PLS/TROM	3	
CARDIOPL REP SOL 4:1	3	
CARDIOPLE MN SOL LOW TROM	3	
CARDIOPLEGI SOL DEL NIDO	3	
CARDIOPLEGIA SOL MAIN 4:1	3	
CARDIOPLEGIC SOL	3	
<i>cardioplegic soln</i>	1	
MICROPLEGIA INJ MSA/MSG	3	
PLEGISOL SOL	3	
<b>CARDIOVASCULAR AGENTS MISC. - COMBINATIONS</b>		
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	PV
BIDIL TAB	3	
CADUET TAB 5-10MG	3	PV
CADUET TAB 5-20MG	3	PV
CADUET TAB 5-40MG	3	PV
CADUET TAB 5-80MG	3	PV
CADUET TAB 10-10MG	3	PV
CADUET TAB 10-20MG	3	PV
CADUET TAB 10-40MG	3	PV
CADUET TAB 10-80MG	3	PV
ENTRESTO TAB 24-26MG	2	PA; PV
ENTRESTO TAB 49-51MG	2	PA; PV
ENTRESTO TAB 97-103MG	2	PA; PV
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	2	
OPSYNVI TAB 10-20MG	NC	
OPSYNVI TAB 10-40MG	NC	
<b>CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS</b>		
INPEFA TAB 400MG	NC	
<b>IMPOTENCE AGENTS</b>		
CIALIS TAB 2.5MG	NC	
CIALIS TAB 5MG	NC	
CIALIS TAB 10MG	NC	
CIALIS TAB 20MG	NC	
<i>tadalafil tab 2.5 mg</i>	1	ST, QL
<i>tadalafil tab 5 mg</i>	1	ST, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PROSTAGLANDIN VASODILATORS</b>		
<i>epoprostenol sodium for inj 0.5 mg</i>	4	SP, PA
<i>epoprostenol sodium for inj 1.5 mg</i>	4	SP, PA
FLOLAN INJ 0.5MG	6	SP, PA
FLOLAN INJ 1.5MG	6	SP, PA
ORENITRAM TAB 0.25MG	5	SP, PA
ORENITRAM TAB 0.125MG	5	SP, PA
ORENITRAM TAB 1MG	5	SP, PA
ORENITRAM TAB 2.5MG	5	SP, PA
ORENITRAM TAB 5MG	5	SP, PA
ORENITRAM TAB MONTH 1	5	SP, PA
ORENITRAM TAB MONTH 2	5	SP, PA
ORENITRAM TAB MONTH 3	5	SP, PA
REMODULIN INJ 1MG/ML	NC	
REMODULIN INJ 2.5MG/ML	NC	
REMODULIN INJ 5MG/ML	NC	
REMODULIN INJ 10MG/ML	NC	
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	4	SP, PA
TYVASO DPI POW 16-32-48	NC	
TYVASO DPI POW 16-32MCG	NC	
TYVASO DPI POW 16MCG	NC	
TYVASO DPI POW 32-48MCG	NC	
TYVASO DPI POW 32MCG	NC	
TYVASO DPI POW 48MCG	NC	
TYVASO DPI POW 64MCG	NC	
TYVASO REFIL SOL 0.6MG/ML	6	SP, PA, QL
TYVASO SOL 0.6MG/ML	6	SP, PA, QL
TYVASO START SOL 0.6MG/ML	6	SP, PA, QL
VELETRI INJ 0.5MG	6	SP, PA
VELETRI INJ 1.5MG	6	SP, PA
VENTAVIS SOL 10MCG/ML	6	SP, PA, QL
VENTAVIS SOL 20MCG/ML	6	SP, PA, QL
<b>PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR</b>		
WINREVAIR INJ 45MG	NC	
WINREVAIR INJ 60MG	NC	
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>		
<i>ambrisentan tab 5 mg</i>	4	SP, PA, QL
<i>ambrisentan tab 10 mg</i>	4	SP, PA, QL
<i>bosentan tab 62.5 mg</i>	4	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>bosentan tab 125 mg</i>	4	SP, PA, QL
LETAIRIS TAB 5MG	NC	
LETAIRIS TAB 10MG	NC	
OPSUMIT TAB 10MG	5	SP, PA, QL
TRACLEER TAB 32MG	NC	
TRACLEER TAB 62.5MG	NC	
TRACLEER TAB 125MG	NC	

#### **PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS**

ADCIRCA TAB 20MG	NC	
<i>alyq tab 20mg</i>	4	SP, PA, QL
LIQREV SUS 10MG/ML	NC	
REVATIO INJ	NC	
REVATIO SUS 10MG/ML	NC	
REVATIO TAB 20MG	NC	
<i>sildenafil citrate for suspension 10 mg/ml</i>	4	SP, PA, QL
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	4	SP, PA
<i>sildenafil citrate tab 20 mg</i>	4	SP, PA, QL
<i>tadalafil tab 20 mg (pah)</i>	4	SP, PA, QL
TADLIQ SUS 20MG/5ML	5	SP, PA, QL

#### **PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST**

UPTRAVI INJ 1800MCG	5	SP, PA, QL
UPTRAVI PACK TAB 200/800	5	SP, PA, QL
UPTRAVI TAB 200MCG	5	SP, PA, QL
UPTRAVI TAB 400MCG	5	SP, PA, QL
UPTRAVI TAB 600MCG	5	SP, PA, QL
UPTRAVI TAB 800MCG	5	SP, PA, QL
UPTRAVI TAB 1000MCG	5	SP, PA, QL
UPTRAVI TAB 1200MCG	5	SP, PA, QL
UPTRAVI TAB 1400MCG	5	SP, PA, QL
UPTRAVI TAB 1600MCG	5	SP, PA, QL

#### **PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR**

ADEMPAS TAB 0.5MG	6	SP, PA, QL
ADEMPAS TAB 1.5MG	5	SP, PA, QL
ADEMPAS TAB 1MG	5	SP, PA, QL
ADEMPAS TAB 2.5MG	5	SP, PA, QL
ADEMPAS TAB 2MG	5	SP, PA, QL

#### **SINUS NODE INHIBITORS**

CORLANOR SOL 5MG/5ML	3	PA
CORLANOR TAB 5MG	2	PA
CORLANOR TAB 7.5MG	2	PA



Drug Name	Drug Tier	Requirements/Limits
<b>TRANSTHYRETIN STABILIZERS</b>		
VYNDAMAX CAP 61MG	6	SP, PA, QL
VYNDAQEL CAP 20MG	NC	
<b>VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
<b>CEPHALOSPORINS</b>		
<b>CEPHALOSPORIN COMBINATIONS</b>		
AVYCAZ INJ 2-0.5GM	3	
ZERBAXA INJ 1.5GM	3	
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	2	
CEFAZOL/DEX SOL 1GM	3	
CEFAZOL/DEX SOL 2GM	3	
CEFAZOLIN INJ 1GM/50ML	3	
CEFAZOLIN INJ 2GM	3	
CEFAZOLIN INJ 3GM	3	
CEFAZOLIN INJ 100GM	3	
CEFAZOLIN INJ 300GM	3	
<i>cefazolin sodium for inj 1 gm</i>	1	
<i>cefazolin sodium for inj 2 gm</i>	1	
<i>cefazolin sodium for inj 3 gm</i>	1	
<i>cefazolin sodium for inj 10 gm</i>	2	
<i>cefazolin sodium for inj 500 mg</i>	1	
<i>cefazolin sodium for iv soln 1 gm</i>	1	
CEFAZOLIN SOL	NC	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	2	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin tab 500 mg</i>	2	
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	2	
CEFACLOR ER TAB 500MG	3	
<i>cefaclor for susp 250 mg/5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CEFOTAN INJ 1GM	3	
CEFOTAN INJ 2GM	3	
<i>cefotetan disodium for inj 1 gm</i>	1	
<i>cefotetan disodium for inj 2 gm</i>	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
<i>cefoxitin sodium for iv soln 1 gm</i>	1	
<i>cefoxitin sodium for iv soln 2 gm</i>	1	
<i>cefoxitin sodium for iv soln 10 gm</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	
<i>cefuroxime sodium for inj 750 mg</i>	1	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	1	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefixime cap 400 mg</i>	2	
<i>cefixime for susp 100 mg/5ml</i>	2	
<i>cefixime for susp 200 mg/5ml</i>	2	
<i>cefotaxime sodium for inj 1 gm</i>	1	
<i>cefotaxime sodium for inj 2 gm</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	2	
<i>ceftazidime for inj 1 gm</i>	1	
<i>ceftazidime for inj 6 gm</i>	2	
<i>ceftazidime for iv soln 2 gm</i>	2	
CEFTAZIDIME/ SOL D5W 1GM	3	
CEFTAZIDIME/ SOL D5W 2GM	3	
CEFTRIAX/DEX INJ 1GM	3	
CEFTRIAX/DEX INJ 2GM	3	
CEFTRIAXONE INJ 100GM	3	
<i>ceftriaxone sodium for inj 1 gm</i>	1	
<i>ceftriaxone sodium for inj 2 gm</i>	2	
<i>ceftriaxone sodium for inj 10 gm</i>	2	
<i>ceftriaxone sodium for inj 250 mg</i>	1	
<i>ceftriaxone sodium for inj 500 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ceftriaxone sodium for iv soln 1 gm</i>	1	
<i>ceftriaxone sodium for iv soln 2 gm</i>	1	
<i>ceftriaxone sodium in dextrose inj 20 mg/ml</i>	1	
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	1	
<i>tazicef inj 1gm</i>	1	
TAZICEF INJ 1GM/50ML	3	
<i>tazicef inj 2gm</i>	2	
<i>tazicef inj 6gm</i>	2	
<b>CEPHALOSPORINS - 4TH GENERATION</b>		
<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for iv soln 2 gm</i>	1	
<i>cefepime hcl for iv soln 2 gm</i>	2	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2G/100ML	3	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
<b>CEPHALOSPORINS - 5TH GENERATION</b>		
TEFLARO INJ 400MG	3	
TEFLARO INJ 600MG	3	
<b>CEPHALOSPORINS - SIDEROPHORES</b>		
FETROJA INJ 1GM	3	
<b>CONTRACEPTIVES</b>		
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
<i>afirmelle tab 0.1-0.02</i>	0	ACA, PV
<i>altavera tab</i>	0	ACA, PV
<i>alyacen tab 1/35</i>	0	ACA, PV
<i>alyacen tab 7/7/7</i>	0	ACA, PV
<i>amethia tab</i>	0	ACA, PV
<i>amethyst tab 90-20mcg</i>	0	ACA, PV
<i>apri tab</i>	0	ACA, PV
<i>aranelle tab</i>	0	ACA, PV
<i>ashlyna tab</i>	0	ACA, PV
<i>aubra eq tab 0.1-0.02</i>	0	ACA, PV
<i>aubra tab 0.1-0.02</i>	0	ACA, PV
<i>aurovela 24 tab fe 1/20</i>	0	ACA, PV
<i>aurovela fe tab 1.5/30</i>	0	ACA, PV
<i>aurovela fe tab 1/20</i>	0	ACA, PV
<i>aurovela tab 1.5/30</i>	0	ACA, PV
<i>aurovela tab 1/20</i>	0	ACA, PV
<i>aviane tab</i>	0	ACA, PV
<i>ayuna tab</i>	0	ACA, PV
<i>azurette tab</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BALCOLTRA TAB 0.1-20	NC	
<i>balziva tab</i>	0	ACA, PV
BEYAZ TAB	NC	
<i>blisovi 24 tab fe 1/20</i>	0	ACA, PV
<i>blisovi fe tab 1.5/30</i>	0	ACA, PV
<i>blisovi fe tab 1/20</i>	0	ACA, PV
<i>briellyn tab</i>	0	ACA, PV
<i>camrese lo tab</i>	0	ACA, PV
<i>camrese tab</i>	0	ACA, PV
<i>charlotte 24 chw fe 1/20</i>	0	ACA, PV
<i>chateal eq tab 0.15/30</i>	0	ACA, PV
<i>chateal tab 0.15/30</i>	0	ACA, PV
<i>cryselle-28 tab 28 tabs</i>	0	ACA, PV
<i>cyred eq tab</i>	0	ACA, PV
<i>cyred tab</i>	0	ACA, PV
<i>dasetta tab 1/35</i>	0	ACA, PV
<i>dasetta tab 7/7/7</i>	0	ACA, PV
<i>daysee tab</i>	0	ACA, PV
<i>delyla tab 0.1-0.02</i>	0	ACA, PV
<i>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	ACA, PV
<i>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<i>dolishale tab 90-20mcg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	ACA, PV
<i>elinest tab</i>	0	ACA, PV
<i>enpresse-28 tab</i>	0	ACA, PV
<i>enskyce tab</i>	0	ACA, PV
<i>estarylla tab 0.25-35</i>	0	ACA, PV
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg</i>	0	ACA, PV
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i>	0	ACA, PV
<i>falmina tab</i>	0	ACA, PV
<i>femynor tab 0.25-35</i>	0	ACA, PV
<i>finzala chw fe 1/20</i>	0	ACA, PV
<i>gemmily cap 1/20</i>	0	ACA, PV
<i>hailey 24 tab fe</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hailey fe tab 1.5/30</i>	0	ACA, PV
<i>hailey fe tab 1/20</i>	0	ACA, PV
<i>hailey tab 1.5/30</i>	0	ACA, PV
<i>iclevia tab</i>	0	ACA, PV
<i>introvale tab</i>	0	ACA, PV
<i>isibloom tab</i>	0	ACA, PV
<i>jaimiess tab</i>	0	ACA, PV
<i>jasmiel tab 3-0.02mg</i>	0	ACA, PV
<i>jolessa tab</i>	0	ACA, PV
<i>joyeaux tab 0.1-20</i>	0	ACA, PV
<i>juleber tab</i>	0	ACA, PV
<i>junel 1.5/30 tab</i>	0	ACA, PV
<i>junel 1/20 tab</i>	0	ACA, PV
<i>junel fe 24 tab 1/20</i>	0	ACA, PV
<i>junel fe tab 1.5/30</i>	0	ACA, PV
<i>junel fe tab 1/20</i>	0	ACA, PV
<i>kaitlib fe chw</i>	0	ACA, PV
<i>kalliga tab</i>	0	ACA, PV
<i>kariva tab 28 day</i>	0	ACA, PV
<i>kelnor 1/50 tab</i>	0	ACA, PV
<i>kelnor tab 1/35</i>	0	ACA, PV
<i>kurvelo tab 0.15/30</i>	0	ACA, PV
<i>larin 24 tab fe 1/20</i>	0	ACA, PV
<i>larin fe tab 1.5/30</i>	0	ACA, PV
<i>larin fe tab 1/20</i>	0	ACA, PV
<i>larin tab 1.5/30</i>	0	ACA, PV
<i>larin tab 1/20</i>	0	ACA, PV
<i>layolis fe chw</i>	0	ACA, PV
<i>leena tab</i>	0	ACA, PV
<i>lessina tab</i>	0	ACA, PV
<i>levonest tab</i>	0	ACA, PV
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i>	0	ACA, PV
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	ACA, PV
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	ACA, PV
<i>levonorgestrel &amp; ethinyl estradiol tab 0.15 mg- 30 mcg</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	0	ACA, PV
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	0	ACA, PV
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	0	ACA, PV
<i>levora-28 tab 0.15/30</i>	0	ACA, PV
LO LOESTRIN TAB 1-10-10	0	ACA, PV
<i>lo-zumandimi tab 3-0.02mg</i>	0	ACA, PV
<i>loestrin 21 tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1/20</i>	0	ACA, PV
<i>loestrin tab 1/20-21</i>	0	ACA, PV
<i>lojaimiess tab</i>	0	ACA, PV
<i>loryna tab 3-0.02mg</i>	0	ACA, PV
LOSEASONIQUE TAB	3	ACA, PV
<i>low-ogestrel tab</i>	0	ACA, PV
<i>lutra tab</i>	0	ACA, PV
<i>marlissa tab 0.15/30</i>	0	ACA, PV
<i>merzee cap 1/20</i>	0	ACA, PV
<i>micrgstin 24 tab fe 1/20</i>	0	ACA, PV
<i>microgestin tab 1.5/30</i>	0	ACA, PV
<i>microgestin tab 1/20</i>	0	ACA, PV
<i>microgestin tab fe1.5/30</i>	0	ACA, PV
<i>microgestin tab fe 1/20</i>	0	ACA, PV
<i>mili tab 0.25/35</i>	0	ACA, PV
MINASTRIN 24 CHW FE	NC	
<i>mono-lynyah tab 0.25-35</i>	0	ACA, PV
NATAZIA TAB	0	ACA, PV
<i>necon tab 0.5/35</i>	0	ACA, PV
NEXTSTELLIS TAB 3-14.2MG	0	ACA, PV
<i>nikki tab 3-0.02mg</i>	0	ACA, PV
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	ACA, PV
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	ACA, PV
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	0	ACA, PV
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	0	ACA, PV
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	ACA, PV
<i>nortrel tab 0.5/35</i>	0	ACA, PV
<i>nortrel tab 1/35</i>	0	ACA, PV
<i>nortrel tab 7/7/7</i>	0	ACA, PV
<i>nylia tab 1/35</i>	0	ACA, PV
<i>nylia tab 7/7/7</i>	0	ACA, PV
<i>nymyo tab 0.25-35</i>	0	ACA, PV
<i>ocella tab 3-0.03mg</i>	0	ACA, PV
<b>ORTHO TRI- TAB CYCLN LO</b>	<b>NC</b>	
<i>philith tab 0.4-35</i>	0	ACA, PV
<i>pimtrea tab</i>	0	ACA, PV
<i>portia-28 tab</i>	0	ACA, PV
<i>reclipsen tab</i>	0	ACA, PV
<i>rivelsa tab</i>	0	ACA, PV
<b>SAFYRAL TAB</b>	<b>3</b>	ACA, PV
<b>SEASONIQUE TAB</b>	<b>NC</b>	
<i>setlakin tab</i>	0	ACA, PV
<i>simliya tab 28 day</i>	0	ACA, PV
<i>simpesse tab</i>	0	ACA, PV
<i>sprintec 28 tab 28 day</i>	0	ACA, PV
<i>sronyx tab</i>	0	ACA, PV
<i>syeda tab 3-0.03mg</i>	0	ACA, PV
<i>tarina 24 fe tab</i>	0	ACA, PV
<i>tarina fe tab 1/20</i>	0	ACA, PV
<i>tarina fe tab 1/20 eq</i>	0	ACA, PV
<i>taysofy cap 1/20</i>	0	ACA, PV
<b>TAYTULLA CAP 1MG/20MC</b>	<b>NC</b>	
<i>tilia fe tab</i>	0	ACA, PV
<i>tri femynor tab</i>	0	ACA, PV
<i>tri-estaryll tab</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tri-legest tab fe</i>	0	ACA, PV
<i>tri-linyah tab</i>	0	ACA, PV
<i>tri-lo tab estaryll</i>	0	ACA, PV
<i>tri-lo- tab marzia</i>	0	ACA, PV
<i>tri-lo- tab sprintec</i>	0	ACA, PV
<i>tri-lo-mili tab</i>	0	ACA, PV
<i>tri-mili tab</i>	0	ACA, PV
<i>tri-nymyo tab</i>	0	ACA, PV
<i>tri-sprintec tab</i>	0	ACA, PV
<i>tri-vylibra tab</i>	0	ACA, PV
<i>tri-vylibra tab lo</i>	0	ACA, PV
<i>trivora-28 tab</i>	0	ACA, PV
<i>turqoz tab</i>	0	ACA, PV
TYBLUME CHW 0.1-0.02	NC	
<i>tydemy tab</i>	0	ACA, PV
<i>velivet pak</i>	0	ACA, PV
<i>vestura tab 3-0.02mg</i>	0	ACA, PV
<i>vienva tab 0.1-20</i>	0	ACA, PV
<i>viorele tab</i>	0	ACA, PV
<i>volnea tab</i>	0	ACA, PV
<i>vyfemla tab 0.4-35</i>	0	ACA, PV
<i>vylibra tab 0.25-35</i>	0	ACA, PV
<i>wera tab 0.5/35</i>	0	ACA, PV
<i>wymzya fe chw 0.4mg-35</i>	0	ACA, PV
YASMIN 28 TAB 3-0.03MG	NC	
YAZ TAB 3-0.02MG	NC	
<i>zovia 1/35 tab</i>	0	ACA, PV
<i>zumandimine tab 3-0.03mg</i>	0	ACA, PV
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>		
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	0	ACA, PV
TWIRLA DIS 120-30	NC	
<i>xulane dis 150-35</i>	0	ACA, PV
<i>zafemy dis 150/35</i>	0	ACA, PV
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>		
ANNOVERA MIS	0	QL; ACA
<i>eluryng mis</i>	NC	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	NC	
NUVARING MIS	0	ACA, PV
<b>COPPER CONTRACEPTIVES - IUD</b>		
PARAGARD IUD T380A	0	ACA, PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>EMERGENCY CONTRACEPTIVES</b>		
<i>aftera tab 1.5mg</i>	0	OTC; ACA, PV
<i>afterpill tab 1.5mg</i>	0	OTC; ACA, PV
<i>econtra ez tab 1.5mg</i>	0	OTC; ACA, PV
<i>econtra os tab 1.5mg</i>	0	OTC; ACA, PV
ELLA TAB 30MG	0	ACA, PV
<i>levonorgestrel tab 1.5 mg</i>	0	OTC; ACA, PV
<i>my choice tab 1.5mg</i>	0	OTC; ACA, PV
<i>my way tab 1.5mg</i>	0	OTC; ACA, PV
<i>new day tab 1.5mg</i>	0	OTC; ACA, PV
<i>opcicon tab 1.5mg</i>	0	OTC; ACA, PV
<i>option 2 tab 1.5mg</i>	0	OTC; ACA, PV
<i>react tab 1.5mg</i>	0	OTC; ACA, PV
<i>take action tab 1.5mg</i>	0	OTC; ACA, PV
<b>PROGESTIN CONTRACEPTIVES - IMPLANTS</b>		
NEXPLANON IMP 68MG	0	ACA, PV
<b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>		
DEPO-PROVERA INJ 150MG/ML	3	ACA, PV
DEPO-SQ PROV INJ 104	3	QL; ACA, PV
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	0	QL; ACA, PV
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	0	QL; ACA, PV
<b>PROGESTIN CONTRACEPTIVES - IUD</b>		
KYLEENA IUD 19.5MG	0	ACA, PV
LILETTA IUD 52MG	0	ACA, PV
MIRENA IUD SYSTEM	0	ACA, PV
SKYLA IUD 13.5MG	0	ACA, PV
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>camila tab 0.35mg</i>	0	ACA, PV
<i>deblitane tab 0.35mg</i>	0	ACA, PV
<i>emzahh tab 0.35mg</i>	0	ACA, PV
<i>errin tab 0.35mg</i>	0	ACA, PV
<i>heather tab 0.35mg</i>	0	ACA, PV
<i>incassia tab 0.35mg</i>	0	ACA, PV
<i>jencycla tab 0.35mg</i>	0	ACA, PV
<i>lyleq tab 0.35mg</i>	0	ACA, PV
<i>lyza tab 0.35mg</i>	0	ACA, PV
<i>nora-be tab 0.35mg</i>	0	ACA, PV
<i>norethindrone tab 0.35 mg</i>	0	ACA, PV
<i>norlyroc tab 0.35mg</i>	0	ACA, PV
<i>sharobel tab 0.35mg</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
SLYND TAB 4MG	NC	
<b>CORTICOSTEROIDS</b>		
<b>GLUCOCORTICOSTEROIDS</b>		
AGAMREE SUS 40MG/ML	NC	
BETA-PHOS/AC INJ 3-3MG/ML	NC	
BETAMETH COM INJ 7MG/ML	NC	
BETAMETH SOD INJ 6MG/ML	3	
BETAMETH SOD INJ 12MG/2ML	3	
<i>betamethasone sod phosphate &amp; acetate inj susp 6 (3-3) mg/ml</i>	2	(applies to NDC 71283062002 only)
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	NC	
CELESTONE INJ SOLUSPAN	NC	
CORTEF TAB 5MG	3	
CORTEF TAB 10MG	3	
CORTEF TAB 20MG	3	
<i>deflazacort tab 6 mg</i>	4	SP, PA
<i>deflazacort tab 18 mg</i>	4	SP, PA
<i>deflazacort tab 30 mg</i>	4	SP, PA
<i>deflazacort tab 36 mg</i>	4	SP, PA
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
DEXAMETH LA INJ 16MG/ML	3	
DEXAMETH PHO INJ 4MG/ML	3	
DEXAMETH PHO INJ 10MG/ML	3	
DEXAMETHASON CON 1MG/ML	3	
DEXAMETHASON INJ 8MG/ML	3	
DEXAMETHASON SUS 8-4MG/ML	3	
DEXAMETHASON SUS 8MG/ML	3	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	1	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	1	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	2	
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	2	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	2	
DEXONTO 0.4% SOL 20MG/5ML	NC	
<i>dexpak pak 6 day</i>	NC	
<i>dexpak pak 10 day</i>	NC	
<i>dexpak pak 13 day</i>	NC	
EMFLAZA SUS 22.75/ML	NC	
EMFLAZA TAB 6MG	NC	
EMFLAZA TAB 18MG	NC	
EMFLAZA TAB 30MG	NC	
EMFLAZA TAB 36MG	NC	
EOHILIA SUS 2MG/10ML	NC	
<i>hidex 6-day pak 1.5mg</i>	2	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
KENALOG-10 INJ 10MG/ML	3	
KENALOG-40 INJ 40MG/ML	3	
KENALOG-80 INJ	3	
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	
MEDROL TAB 8MG	3	
MEDROL TAB 16MG	3	
METHY-BUPIVA SUS 8-5MG/ML	NC	
METHYL-BUPIV SUS 40-5MG	NC	
METHYLPR ACE INJ 40MG/ML	3	
METHYLPR ACE INJ 80MG/ML	3	
METHYLPREDNI INJ 80MG/ML	3	
METHYLPREDNI SUS 50MG/ML	NC	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	1	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methylprednisolone sod succ for inj 500 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	2	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
MILLIPRED DP PAK 5MG	NC	
MILLIPRED TAB 5MG	NC	
ORAPRED ODT TAB 10MG	3	
ORAPRED ODT TAB 15MG	3	
ORAPRED ODT TAB 30MG	3	
PEDIAPRED SOL 5MG/5ML	3	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	2	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	
<i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i>	NC	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	NC	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone soln 15 mg/5ml</i>	2	
<i>prednisolone tab 5 mg</i>	2	
PREDNISON CON 5MG/ML	3	
<i>prednisone oral soln 5 mg/5ml</i>	2	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
RAYOS TAB 1MG	NC	
RAYOS TAB 2MG	NC	
RAYOS TAB 5MG	NC	
SOLU-CORTEF INJ 100MG	3	
SOLU-CORTEF INJ 250MG	3	
SOLU-CORTEF INJ 500MG	3	
SOLU-CORTEF INJ 1000MG	3	
SOLU-MEDROL INJ 1GM	3	
SOLU-MEDROL INJ 2GM	3	
SOLU-MEDROL INJ 40MG	3	
SOLU-MEDROL INJ 125MG	3	
SOLU-MEDROL INJ 500MG	3	
SOLU-MEDROL INJ 1000MG	3	
TARPEYO CAP 4MG	NC	
TRIAM-BUPIVA SUS 40-5MG	NC	
TRIAMCIN ACE INJ 40MG/ML	3	
TRIAMCINOLON INJ 40MG/ML	3	
TRIAMCINOLON INJ 80MG/2ML	3	
TRIAMCINOLON INJ 80MG/ML	3	
<i>triamcinolone acetonide inj susp 40 mg/ml</i>	1	
UCERIS TAB 9MG	1	
ZILRETTA INJ 32MG	NC	

### **MINERALOCORTICIDS**

<i>fludrocortisone acetate tab 0.1 mg</i>	1	
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### **COUGH/COLD/ALLERGY**

#### **ANTITUSSIVES**

<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	NC	
<i>benzonatate cap 200 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	
<i>hydromet syp 5-1.5/5</i>	1	

#### **COUGH/COLD/ALLERGY COMBINATIONS**

<i>bromfed dm sol 2-30-10</i>	1	
CLARINEX-D TAB 2.5-120	3	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	OTC
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>prometh vc syp 6.25-5/5</i>	1	
<i>promethazine &amp; phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	2	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	NC	(applies to NDCs 62135030247 and 62135030248 only)

### **EXPECTORANTS**

<i>potassium iodide oral soln 1 gm/ml</i>	2	
SSKI SOL 1GM/ML	3	

### **MISC. RESPIRATORY INHALANTS**

HYPERSAL NEB 3.5%	3	
HYPERSAL NEB 7%	3	
NEBUSAL NEB 6%	3	
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	

### **MUCOLYTICS**

<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	2	

### **DERMATOLOGICALS**

#### **ACNE PRODUCTS**

ABSORICA CAP 10MG	NC	
ABSORICA CAP 20MG	NC	
ABSORICA CAP 25MG	NC	
ABSORICA CAP 30MG	NC	
ABSORICA CAP 35MG	NC	
ABSORICA CAP 40MG	NC	
ABSORICA LD CAP 8MG	NC	
ABSORICA LD CAP 16MG	NC	
ABSORICA LD CAP 24MG	NC	
ABSORICA LD CAP 32MG	NC	
ACANYA GEL 1.2-2.5%	NC	
<i>accutane cap 10mg</i>	1	PA
<i>accutane cap 20mg</i>	1	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>accutane cap 30mg</i>	2	PA
<i>accutane cap 40mg</i>	1	PA
ACZONE GEL 5%	NC	
ACZONE GEL 7.5%	NC	
ADAPAL/BEN P PAD 0.1-2.5%	NC	
<i>adapalene cream 0.1%</i>	1	PA
<i>adapalene gel 0.1%</i>	1	PA
<i>adapalene gel 0.3%</i>	1	PA
<i>adapalene pads 0.1%</i>	NC	
ADAPALENE SOL 0.1%	3	
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	PA
AKLIEF CRE 0.005%	2	PA
ALTRENO LOT 0.05%	NC	
<i>amnesteem cap 10mg</i>	1	PA
<i>amnesteem cap 20mg</i>	1	PA
<i>amnesteem cap 40mg</i>	1	PA
AMZEEQ AER 4%	NC	
ARAZLO LOT 0.045%	NC	
ATRALIN GEL 0.05%	3	PA
<i>avita gel 0.025%</i>	1	PA
AZELEX CRE 20%	NC	
BENZAC AC LIQ 5% WASH	3	ST, PA
BENZAACLIN GEL 1-5%	NC	
BENZAACLIN GEL 1-5%PUMP	NC	
BENZAMYCIN GEL 5-3%	3	
<i>benzepro aer 5.3%</i>	1	
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide gel 8%</i>	1	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i>	1	
<i>claravis cap 10mg</i>	1	PA
<i>claravis cap 20mg</i>	1	PA
<i>claravis cap 30mg</i>	2	PA
<i>claravis cap 40mg</i>	1	PA
CLEOCIN-T LOT 1%	3	ST, PA
<i>clindacin mis etz 1%</i>	2	
<i>clindacin-p pad 1%</i>	2	
CLINDAGEL GEL 1%	3	ST, PA
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	2	PA
<i>clindamycin phosphate gel 1%</i>	1	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clindamycin phosphate gel 1%</i>	NC	(applies to NDC 69238203107 only)
<i>clindamycin phosphate lotion 1%</i>	1	PA
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	2	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	1	
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	2	PA
<i>dapsone gel 5%</i>	2	
<i>dapsone gel 7.5%</i>	1	
DIFFERIN CRE 0.1%	3	PA
DIFFERIN GEL 0.3%	3	PA
DIFFERIN LOT 0.1%	NC	
EPIDUO FORTE GEL 0.3-2.5%	2	ST, PA
EPIDUO GEL 0.1-2.5%	2	ST, PA
EPSOLAY CRE 5%	NC	
<i>ery pad 2%</i>	1	
ERYGEL GEL 2%	3	ST, PA
<i>erythromycin gel 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
EVOCLIN AER 1%	3	ST, PA
FABIOR AER 0.1%	NC	
<i>isotretinoin cap 10 mg</i>	1	PA
<i>isotretinoin cap 20 mg</i>	1	PA
<i>isotretinoin cap 25 mg</i>	NC	
<i>isotretinoin cap 30 mg</i>	2	PA
<i>isotretinoin cap 35 mg</i>	NC	
<i>isotretinoin cap 40 mg</i>	1	PA
KLARON LOT 10%	3	ST, PA
<i>myorisan cap 10mg</i>	1	PA
<i>myorisan cap 20mg</i>	1	PA
<i>myorisan cap 30mg</i>	2	PA
<i>myorisan cap 40mg</i>	1	PA
<i>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	2	ST, PA
PR BENZOYL LIQ 7% WASH	1	
<i>resorcinol-sulfur lotion 2-5%</i>	1	
RETIN-A CRE 0.1%	3	PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RETIN-A CRE 0.05%	3	PA
RETIN-A CRE 0.025%	3	PA
RETIN-A GEL 0.01%	3	PA
RETIN-A GEL 0.025%	3	PA
RETIN-A MICR GEL 0.1%	NC	
RETIN-A MICR GEL 0.1%	NC	
RETIN-A MICR GEL 0.1%PUMP	NC	
RETIN-A MICR GEL 0.04%	NC	
RETIN-A MICR GEL 0.04%PMP	NC	
RETIN-A MICR GEL 0.06%	NC	
RETIN-A MICR GEL 0.08%	NC	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	PA
<i>sulfamez emu 10-1%</i>	1	
<i>tretinoin cream 0.1%</i>	1	PA
<i>tretinoin cream 0.05%</i>	1	PA
<i>tretinoin cream 0.025%</i>	1	PA
<i>tretinoin gel 0.01%</i>	1	PA
<i>tretinoin gel 0.05%</i>	2	PA
<i>tretinoin gel 0.025%</i>	1	PA
<i>tretinoin microsphere gel 0.1%</i>	2	PA
<i>tretinoin microsphere gel 0.04%</i>	2	PA
<i>tretinoin microsphere gel 0.08%</i>	2	PA
TWYNEO CRE 0.1-3%	2	ST, PA
VELTIN GEL	NC	
WINLEVI CRE 1%	2	ST, PA, QL
ZACLIR LOT 8%	3	ST, PA
<i>zenatane cap 10mg</i>	1	PA
<i>zenatane cap 20mg</i>	1	PA
<i>zenatane cap 30mg</i>	2	PA
<i>zenatane cap 40mg</i>	1	PA
ZIANA GEL	NC	
<b>AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS</b>		
VEREGEN OIN 15%	NC	
<b>ANALGESICS - TOPICAL</b>		
MUSCUSOLICE CRE 2%	NC	
PRAKETAMIDE CRE 5%	NC	
<b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>		
<i>diclofenac epolamine patch 1.3%</i>	1	PA, QL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>diclofenac sodium soln 1.5%</i>	1	PA, QL
<i>diclofenac sodium soln 2%</i>	NC	
DICLOFONO GEL 1.6%	NC	
FLECTOR DIS 1.3%	3	PA, QL
PENNSAID SOL 2%	NC	

### **ANTIBIOTICS - TOPICAL**

ALTABAX OIN 1%	NC	
CENTANY OIN 2%	3	
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>mupirocin calcium cream 2%</i>	NC	
<i>mupirocin oint 2%</i>	1	
NEO-SYNALAR CRE	NC	
XEPI CRE 1%	3	

### **ANTIFUNGALS - TOPICAL**

<i>ciclodan sol 8%</i>	1	PA
<i>ciclopirox gel 0.77%</i>	1	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox solution 8%</i>	1	PA
<i>clotrimazole cream 1%</i>	1	
<i>clotrimazole soln 1%</i>	1	
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>econazole nitrate cream 1%</i>	1	
ECOZA AER 1%	3	
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	
EXELDERM SOL 1%	3	
EXTINA AER 2%	3	
FUNGIMEZ SOL	3	
<i>iodoquimez cre 1-1.9%</i>	1	
JUBLIA SOL 10%	NC	
KERYDIN SOL 5%	NC	
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	NC	
<i>ketoconazole shampoo 2%</i>	1	
<i>ketodan aer 2%</i>	NC	
<i>klayesta pow 100000</i>	1	
LOPROX SUS 0.77%	NC	
<i>luliconazole cream 1%</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LUZU CRE 1%	3	
<i>miconazole-zinc oxide-white petrolatum oint</i> 0.25-15-81.35%	2	
<i>naftifine hcl cream 1%</i>	2	
<i>naftifine hcl cream 2%</i>	1	
<i>naftifine hcl gel 2%</i>	2	
NAFTIN GEL 1%	2	
NAFTIN GEL 2%	2	
<i>nyamyc pow 100000</i>	1	
<i>nystatin cream 100000 unit/gm</i>	1	
<i>nystatin oint 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin-triamcinolone cream 100000-0.1</i> <i>unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1</i> <i>unit/gm-%</i>	1	
<i>nystop pow 100000</i>	1	
<i>oxiconazole nitrate cream 1%</i>	2	QL
OXISTAT CRE 1%	3	PA, QL
OXISTAT LOT 1%	3	PA, QL
<i>sulconazole nitrate cream 1%</i>	2	
<i>sulconazole nitrate solution 1%</i>	2	
<i>tavaborole soln 5%</i>	NC	
VUSION OIN	3	
XOLEGEL GEL 2%	NC	
<b>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL</b>		
AMELUZ GEL 10%	NC	
<i>bexarotene gel 1%</i>	4	SP, PA
CARAC CRE 0.5%	NC	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA
EFUDEX CRE 5%	3	
<i>fluorouracil cream 0.5%</i>	NC	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
KLISYRI OIN 1%	NC	
LEVULAN KERA SOL 20%	3	
PANRETIN GEL 0.1%	3	
TARGRETIN GEL 1%	NC	
VALCHLOR GEL 0.016%	6	SP, PA, QL
<b>ANTIPRURITICS - TOPICAL</b>		
<i>doxepin hcl cream 5%</i>	NC	
PRUDOXIN CRE 5%	3	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZONALON CRE 5%	3	ST, PA, QL
<b>ANTIPSORIATICS</b>		
<i>acitretin cap 10 mg</i>	2	PA
<i>acitretin cap 17.5 mg</i>	2	PA
<i>acitretin cap 25 mg</i>	2	PA
BIMZELX INJ 160MG/ML	5	SP, PA, QL; (after 2 primary preferred products)
<i>calcipotriene cream 0.005%</i>	NC	
<i>calcipotriene foam 0.005%</i>	NC	
<i>calcipotriene oint 0.005%</i>	2	PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	PA
<i>calcitrene oin 0.005%</i>	2	PA
<i>calcitriol oint 3 mcg/gm</i>	NC	
COSENTYX INJ 75MG/0.5	5	SP, PA, QL; for pediatric patients less than 50 kg
COSENTYX INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX UNO INJ 300/2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
DOVONEX CRE 0.005%	3	PA
ILUMYA SOL 100MG/ML	5	SP, PA, QL
<i>methoxsalen rapid cap 10 mg</i>	1	
SILIQ INJ 210/1.5	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SKYRIZI INJ 150DOSE	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI INJ 150MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SORILUX AER 0.005%	NC	
SOTYKTU TAB 6MG	5	SP, PA
SPEVIGO INJ 150/1ML	6	SP, PA, QL
SPEVIGO INJ 450/7.5	6	SP, PA, QL
STELARA INJ 45MG/0.5	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's and Ulcerative Colitis
STELARA INJ 90MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's and Ulcerative Colitis
TALTZ INJ 80MG/ML	5	SP, PA, QL; Preferred for Psoriasis
<i>tazarotene cream 0.1%</i>	1	PA
<i>tazarotene gel 0.1%</i>	2	PA
<i>tazarotene gel 0.05%</i>	2	PA
TAZORAC CRE 0.1%	NC	
TAZORAC CRE 0.05%	NC	
TAZORAC GEL 0.1%	NC	
TAZORAC GEL 0.05%	NC	
TREMFYA INJ 100MG/ML	5	SP, PA, QL; Preferred for Psoriasis; Psoriatic Arthritis
VECTICAL OIN 3MCG/GM	NC	
VTAMA CRE 1%	2	PA, QL
ZORYVE CRE 0.3%	2	PA, QL
<b>ANTISEBORRHEIC PRODUCTS</b>		
ESKATA SOL 40%	NC	
NUTRASEB CRE	3	PA
PROMISEB CRE	3	PA
<i>selenium sulfide lotion 2.5%</i>	1	
ZORYVE MIS 0.3%	3	PA, QL
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir cream 5%</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>acyclovir oint 5%</i>	1	
DENAVIR CRE 1%	3	
<i>penciclovir cream 1%</i>	2	
XERESE CRE 5-1%	NC	
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	
<b>BURN PRODUCTS</b>		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
SILVADENE CRE 1%	3	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	
SULFAMYLON PAK 5%	3	
<b>CORTICOSTEROIDS - TOPICAL</b>		
<i>ala scalp lot 2%</i>	NC	
<i>ala-cort cre 1%</i>	1	
<i>ala-cort cre 2.5%</i>	1	
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
<i>amcinonide cream 0.1%</i>	1	
APEXICON E CRE 0.05%	NC	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	NC	
<i>betamethasone valerate aerosol foam 0.12%</i>	1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	
BRYHALI LOT 0.01%	2	PA
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	NC	
CAPEX SHA 0.01%	2	PA
<i>clobetasol e cre 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate emollient base cream 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	NC	
<i>clobetasol propionate foam 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate lotion 0.05%</i>	1	
<i>clobetasol propionate oint 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate soln 0.05%</i>	1	
<i>clobetasol propionate spray 0.05%</i>	NC	
CLOBEX LOT 0.05%	3	PA
CLOBEX SHA 0.05%	3	PA
CLOBEX SPR 0.05%	NC	
<i>clocortolone pivalate cream 0.1%</i>	NC	
<i>clodan sha 0.05%</i>	1	
CLODERM CRE 0.1%	3	PA
CORDRAN 80X3 TAP 4MCG/CM	NC	
CORDRAN CRE 0.05%	NC	
CORDRAN CRE 0.025%	NC	
CORDRAN LOT 0.05%	NC	
CORDRAN OIN 0.05%	NC	
DERMA-SMOOTH OIL /FS BODY	3	PA
DERMA-SMOOTH OIL /FS SCLP	3	PA
<i>desonide cream 0.05%</i>	1	PA
<i>desonide gel 0.05%</i>	NC	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
DESOWEN CRE 0.05%	3	PA
<i>desoximetasone cream 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	2	
<i>desoximetasone oint 0.05%</i>	NC	
<i>desoximetasone oint 0.25%</i>	1	
<i>desoximetasone spray 0.25%</i>	1	
<i>desrx gel 0.05%</i>	NC	
<i>diflorasone diacetate cream 0.05%</i>	NC	
<i>diflorasone diacetate oint 0.05%</i>	NC	
DIPROLENE OIN 0.05%	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DUOBRII LOT	NC	
ENSTILAR AER	2	PA
EPIFOAM AER 1%	3	
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinonide cream 0.1%</i>	NC	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	NC	
<i>flurandrenolide lotion 0.05%</i>	NC	
<i>flurandrenolide oint 0.05%</i>	NC	
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halcinonide cream 0.1%</i>	NC	
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
HALOG CRE 0.1%	NC	
HALOG OIN 0.1%	NC	
HALOG SOL 0.1%	NC	
<i>hydrocortisone butyrate cream 0.1%</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	NC	
<i>hydrocortisone butyrate lotion 0.1%</i>	NC	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	1	
IMPOYZ CRE 0.025%	NC	
KENALOG AER SPRAY	3	PA
LOCOID LIPO CRE 0.1%	3	PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LOCOID LOT 0.1%	3	PA
MICORT-HC CRE 2.5%	NC	
<i>mometasone furoate cream 0.1%</i>	1	PA
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
<i>nolix cre 0.05%</i>	NC	
<i>nolix lot 0.05%</i>	NC	
OLUX AER 0.05%	3	PA
OLUX-E AER 0.05%	NC	
PANDEL CRE 0.1%	3	PA
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1%	3	
PRAMOSONE LOT 2.5%	3	
<i>prednicarbate oint 0.1%</i>	1	
PSORCON CRE 0.05%	NC	
SERNIVO SPR 0.05%	3	PA
SYNALAR CRE 0.025%	3	PA
SYNALAR OIN 0.025%	3	PA
TACLONEX SUS	3	PA
TEXACORT SOL 2.5%	3	PA
TOPICORT CRE 0.05%	3	PA
TOPICORT CRE 0.25%	3	PA
TOPICORT GEL 0.05%	3	PA
TOPICORT OIN 0.05%	3	PA
TOPICORT OIN 0.25%	3	PA
TOPICORT SPR 0.25%	3	PA
<i>tovet aer 0.05%</i>	NC	
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	NC	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	NC	
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>trianex oin 0.05%</i>	NC	
<i>triderm cre 0.1%</i>	1	
<i>triderm cre 0.5%</i>	1	
ULTRAVATE LOT 0.05%	NC	
VANOS CRE 0.1%	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ECZEMA AGENTS</b>		
ADBRY INJ 150MG/ML	5	SP, PA, QL
CIBINQO TAB 50MG	5	SP, PA, QL
CIBINQO TAB 100MG	5	SP, PA, QL
CIBINQO TAB 200MG	5	SP, PA, QL
DUPIXENT INJ 200/1.14	5	SP, PA, QL
DUPIXENT INJ 200MG	5	SP, PA, QL
DUPIXENT INJ 300/2ML	5	SP, PA, QL
OPZELURA CRE 1.5%	2	PA, QL
<b>EMOLLIENT/KERATOLYTIC AGENTS</b>		
<i>urea cre 41%</i>	NC	
<i>uredeb cre 39%</i>	1	
<b>EMOLLIENTS</b>		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
LACTIC ACID CRE E	3	
LACTIC ACID LOT 10%	3	
<b>ENZYMES - TOPICAL</b>		
SANTYL OIN 250/GM	3	
<b>HAIR GROWTH AGENTS</b>		
LITFULO CAP 50MG	6	SP, PA
<b>IMMUNOMODULATING AGENTS - TOPICAL</b>		
<i>imiquimod cream 3.75%</i>	2	
<i>imiquimod cream 5%</i>	1	
ZYCLARA CRE 3.75%	3	
ZYCLARA PUMP CRE 2.5%	3	
ZYCLARA PUMP CRE 3.75%	3	
<b>IMMUNOSUPPRESSIVE AGENTS - TOPICAL</b>		
ELIDEL CRE 1%	NC	
HYFTOR GEL 0.2%	NC	
<i>pimecrolimus cream 1%</i>	2	PA
PROTOPIC OIN 0.1%	3	PA
PROTOPIC OIN 0.03%	3	PA
<i>tacrolimus oint 0.1%</i>	1	PA
<i>tacrolimus oint 0.03%</i>	1	PA
<b>KERATOLYTIC/ANTIMITOTIC AGENTS</b>		
CONDYLOX GEL 0.5%	3	
GORDOFILM SOL	3	
<i>podofilox gel 0.5%</i>	2	
<i>podofilox soln 0.5%</i>	1	
PYROGALL ACD OIN	3	
SALIMEZ FORT CRE 10%	3	

Drug Name	Drug Tier	Requirements/Limits
<b>LINIMENTS</b>		
TURPENTINE SOL SPIRITS	3	
<b>LOCAL ANESTHETICS - TOPICAL</b>		
ANACAINE OIN	3	
CRYODOSE AER TA	3	
DYCLOPRO SOL 0.5%	3	
ETHYL CHLOR AER FINE PIN	3	
ETHYL CHLOR AER FN STRM	3	
ETHYL CHLOR AER MED JET	3	
ETHYL CHLOR AER MED STRM	3	
ETHYL CHLOR AER MIST	3	
<i>ethyl chloride aerosol spray</i>	1	
GEBAUERS SPR AER /STRETCH	3	
<i>glydo gel 2%</i>	1	PA, QL
LIDOCAINE CRE TETRACAI	NC	
<i>lidocaine hcl soln 4%</i>	1	PA, QL
<i>lidocaine hcl urethral/mucosal gel 2%</i>	2	PA, QL
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	PA, QL
<i>lidocaine oint 5%</i>	1	PA, QL
<i>lidocaine patch 5%</i>	1	PA, QL
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	PA, QL
LIDODERM DIS 5%	3	PA, QL
LYDEXA CRE 4.12%	NC	
PAIN EASE AER MD STRM	3	
PAIN EASE AER MIST	3	
PLIAGLIS CRE 7-7%	NC	
PRAMOX GEL 1%	NC	
QUTENZA KIT 8% 1-PCH	6	SP
QUTENZA KIT 8% 2-PCH	6	SP
QUTENZA KIT 8% 4-PCH	6	SP
<i>zeruvia pad 4-1%</i>	1	
ZTLIDO PAD 1.8%	3	PA, QL
<b>MISC. DERMATOLOGICAL PRODUCTS</b>		
ALADERM PLUS EMU	NC	
ALEVAMAX CRE	3	PA
ALEVICYN SG GEL ANTIPRUR	NC	
CERACADE EMU	3	PA
CERACADE EMU	NC	
CERAMAX CRE	NC	
DEXERYL CRE	3	PA
EMULSION SB EMU	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMULSION SB EMU	NC	
ENTTY EMU SPRAY	3	PA
ENTTY EMU SPRAY	NC	
EPICERAM EMU	NC	
HPR PLUS AER	NC	
HPR PLUS CRE	3	PA
HPR PLUS CRE	NC	
HPR PLUS KIT	NC	
HYLATOPIC CRE PLUS	3	PA
KAMDOY EMU	NC	
LEVICYN GEL	3	PA
MIMYX CRE	3	PA
NEOSALUS AER	3	PA
NEOSALUS CRE	3	PA
NEOSALUS LOT	3	PA
NIVATOPIC CRE PLUS	3	PA
PHLAG SPR	3	PA
PR CREAM KIT	3	PA
PRESERA AER	3	PA
PRUCLAIR CRE	3	PA
PRUMYX CRE	3	PA
REMIGEN CREA CRE	3	PA
SEBUDERM GEL	3	PA
STRATA MARK GEL	NC	
SUVICORT EMU	NC	
SYNERDERM EMU	NC	
TETRIX CRE	3	PA
XERALUX CRE	3	PA
<b>MISC. TOPICAL</b>		
ACUICYN SOL	NC	
ARNICA TIN FLOWER	3	
AVENOVA SOL 0.01%	NC	
BENZOIN TIN NF	3	
BORIC ACID GRA	3	
DRYSOL SOL 20%	3	
HYCLODEX SOL 0.012%	NC	
HYPOCYN GEL ANTIPRUR	NC	
HYPOCYN SOL 0.012%	NC	
QBREXZA PAD 2.4%	3	
XERAC-AC SOL 6.25%	3	
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL</b>		
EUCRISA OIN 2%	2	ST, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ROSACEA AGENTS</b>		
<i>azelaic acid gel 15%</i>	1	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	2	
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	NC	
FINACEA AER 15%	2	PA
FINACEA GEL 15%	NC	
<i>ivermectin cream 1%</i>	NC	
METROCREAM CRE 0.75%	3	
METROGEL GEL 1%	3	
METROLOTION LOT 0.75%	3	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
MIRVASO GEL 0.33%	NC	
NORITATE CRE 1%	NC	
ORACEA CAP 40MG	1	
RHOFADE CRE 1%	3	PA
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	
SOOLANTRA CRE 1%	1	PA
<b>SCABICIDES &amp; PEDICULICIDES</b>		
<i>crotan lot 10%</i>	2	
<i>malathion lotion 0.5%</i>	2	
NATROBA SUS 0.9%	3	
OVIDE LOT 0.5%	3	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	2	
SULF LIME SOL	3	
<b>SCAR TREATMENT PRODUCTS</b>		
BEAU RX GEL	NC	
KELARX GEL	NC	
RECEDO GEL	NC	
SILIPAC KIT	NC	
<b>TAR PRODUCTS</b>		
<i>coal tar soln 20%</i>	1	
<b>WOUND CARE PRODUCTS</b>		
ACTCT FLEX 3 PAD 4"X4"	3	PA
ACTI ANTIMIC PAD 4"X4"	3	PA
ACTICOAT 7 PAD 4"X5"	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ACTICOAT MIS 4"X4"	3	PA
ALEVICYN SOL DERMAL	NC	
ALLEVYN AG MIS 6-3/4"	3	PA
ALLEVYN AG MIS 9"X9"SAC	3	PA
ALLEVYN AG PAD 3"X3"	3	PA
ALLEVYN AG PAD 4"X4"	3	PA
ALLEVYN AG PAD 5"X5"	3	PA
ALLEVYN AG PAD 7"X7"	3	PA
ALLEVYN GENT PAD 4"X4	3	PA
ALLEVYN GENT PAD 8"X8"	3	PA
AMORPH WOUND GEL DRESSING	3	PA
AQUACEL AG PAD 5"X4"	3	PA
AQUACEL FOAM PAD 7"X7"	3	PA
ARIDA GEL	3	PA
AVO CREAM EMU	3	PA
BIAFINE EMU	3	PA
BIONECT AER 0.2%	3	PA
BIONECT CRE 0.2%	3	PA
BIONECT GEL 0.2%	3	PA
BIOSTEP MIS 4"X4"	3	PA
CA ALGINATE MIS 12" ROPE	3	PA
CA ALGINATE PAD 2"X2"	3	PA
CA ALGINATE PAD 4"X4"	3	PA
CA ALGINATE PAD 4"X8"	3	PA
CURITY HYPER MIS 1/2"X15'	3	PA
CURITY NACL PAD 6"X6-3/4	3	PA
DURAFIBER AG PAD 4"X4"	3	PA
ENDO DERMAL MIS 5X5 CM	3	PA
FILSUVEZ GEL 10%	NC	
HYDRFRA BLUE PAD RDY 2.5"	3	PA
HYDRFRA BLUE PAD RDY 4X5"	3	PA
HYDRFRA BLUE PAD RDY 8X8"	3	PA
HYDRFRA MRF PAD 2"X2.75"	3	PA
HYDROFERA PAD BLUE 2X2	3	PA
HYDROFERA PAD BLUE 4X4	3	PA
HYDROFERA PAD BLUE 6X6	3	PA
HYDROFERA PAD BLUE 9MM	3	PA
HYDROFERA PAD MRF4"X4"	3	PA
HYDROFERA PAD MRF 2.5"	3	PA
HYDROFRA MRF PAD 2-1/4X8"	3	PA
KERAGEL GEL WOUND	3	PA
KERAGELT GEL	3	PA
KERAMATRIX MIS 2X3CM	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KERAMATRIX MIS 5X5CM	3	PA
KERAMATRIX MIS 10X10CM	3	PA
KERASTAT CRE	3	PA
KERASTAT GEL 5%	3	PA
LEVICYN SOL DERMAL	NC	
LIDOTREX GEL 2%	NC	
LUXAMEND CRE	3	PA
MATRIX WOUND MIS BILAYER	3	PA
MICROCYN LIQ	3	PA
MIRO3D WOUND PAD 2X2X2CM	3	PA
MIRO3D WOUND PAD 3X3X2CM	3	PA
MIRO3D WOUND PAD 5X5X2CM	3	PA
MIRO3D WOUND PAD 10X5X2CM	3	PA
NORMLGEL AG GEL	3	PA
OMEZA COLLAG LIQ 1.6/2ML	3	PA
RADIAPLEXRX GEL	3	PA
REGRANEX GEL 0.01%	3	
RESTORE SILV PAD 2"X2"	3	PA
RESTORE SILV PAD 4"X4"	3	PA
RESTORE SILV PAD 4"X4.75"	3	PA
RESTORE SILV PAD 4"X5"	3	PA
SILVRSTAT GEL DRESSING	3	PA
SOLOX GEL	3	PA
SONAFINE EMU	3	PA
STRATA GRT GEL	NC	
VASHE CLEANS SOL	NC	
VASHE WOUND SOL THERAPY	3	PA
VENELEX OIN	3	PA
XEROFORM OCL PAD 1X8"	3	PA
XEROFORM OIL MIS 1"X8"	3	PA
XEROFORM OIL MIS ROLL 4X9	3	PA
XEROFORM OIL PAD 2"X2"	3	PA
XEROFORM PET PAD 4X4 DRES	3	PA
XEROFORM PET PAD 5X9 DRES	3	PA
XEROFRM GAUZ MIS 1"X8"	3	PA
XEROFRM GAUZ MIS 5"X9"	3	PA
XEROFRM GAUZ PAD 5"X9"	3	PA
XEROFRM PETR PAD 2"X2"	3	PA
XEROFRM PETR PAD 4"X4"	3	PA
XEROFRM ROLL MIS 4"X9"	3	PA

## **DIAGNOSTIC PRODUCTS**

### **DIAGNOSTIC TESTS**

ACCU-CHEK TES AVIVA PL	7	OTC; PV
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ACCU-CHEK TES GUIDE	7	OTC; PV
ACCU-CHEK TES SMART	7	OTC; PV
ACCUTREND TES GLUCOSE	NC	OTC
ACURA TES BLD GLUC	NC	OTC
ADVANCE TES INTUITIO	NC	OTC
ADVANCE TES MICRO-DW	NC	OTC
ADVOCATE TES	NC	OTC
ADVOCATE TES REDI-COD	NC	OTC
ADVOCATE TES REDICODE	NC	OTC
AGAMATRIX TES AMP	NC	OTC
AGAMATRIX TES JAZZ	NC	OTC
AGAMATRIX TES KEYNOTE	NC	OTC
AGAMATRIX TES PRESTO	NC	OTC
ASSURE 3 TES	NC	OTC
ASSURE 4 TES	NC	OTC
ASSURE II TES	NC	OTC
ASSURE II TES CHECK	NC	OTC
ASSURE PRISM TES MULTI	NC	OTC
ASSURE PRO TES	NC	OTC
ASSURE TES PLATINUM	NC	OTC
AT LAST TES	NC	OTC
AUTOCODE TES BLD GLUC	NC	OTC
BAYER BREEZE MIS 2 TEST	NC	OTC
BG STAR TES BLD GLUC	NC	OTC
BIOSCANNER TES GLUCOSE	NC	OTC
BIOTEL CARE TES STRIPS	NC	OTC
BLOOD GLUCOS TES	NC	OTC
BLOOD GLUCOS TES PREMIUM	NC	OTC
BLOOD GLUCOS TES STRIPS	NC	OTC
BREEZE 2 MIS TEST	NC	OTC
CARESENS N TES	NC	OTC
CARESENS N TES GLUCOSE	NC	OTC
CLEVER CHEK TES	NC	OTC
CLEVER CHEK TES AUTO CD	NC	OTC
CLEVER CHEK TES VOICE	NC	OTC
CLEVER CHOIC TES MICRO	NC	OTC
CLEVR CHOICE TES AUTO-CD	NC	OTC
CONFIRM/MICR TES GLUCOSE	NC	OTC
CONTOUR TES BLD GLUC	NC	OTC
CONTOUR TES NEXT	NC	OTC
CONTROL AST TES	NC	OTC
CONTROL TES	NC	OTC
COOL BLOOD TES GLUCOSE	NC	OTC



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CVS ADVANCED TES GLUCOSE	NC	OTC
D-CARE BLOOD TES GLUCOSE	NC	
DIATRUE PLUS TES STRIPS	NC	OTC
DUO-CARE TES	NC	OTC
EASY PLUS II TES BLD GLUC	NC	OTC
EASY PLUS TES BLD GLUC	NC	OTC
EASY STEP TES	NC	OTC
EASY TALK TES BLD GLUC	NC	OTC
EASY TOUCH TES GLUCOSE	NC	OTC
EASY TOUCH TES STRIPS	NC	OTC
EASY TRAK TES BLD GLUC	NC	OTC
EASYGLUCO TES	NC	OTC
EASYGLUCO TES PLUS	NC	OTC
EASYMAX 15 TES	NC	OTC
EASYMAX TES	NC	OTC
EASYPLUS TES BLD GLUC	NC	OTC
EASYPRO PLUS TES	NC	OTC
EASYPRO TES BLD GLUC	NC	OTC
ELEMENT TES	NC	OTC
ELEMNT COMPA TES STRIPS	NC	OTC
EMBRACE EVO TES	NC	OTC
EMBRACE PRO TES	NC	OTC
EMBRACE TES BLD GLUC	NC	OTC
EQL TRUETEST TES BLD GLUC	NC	OTC
EVENCARE + TES BLD GLUC	NC	OTC
EVENCARE G2 TES	NC	OTC
EVENCARE G3 TES	NC	OTC
EVENCARE TES BLD GLUC	NC	OTC
EVENCARE TES MINI	NC	OTC
EVOLUTION TES AUTOCODE	NC	OTC
EXACTECH TES	NC	OTC
EXACTECH TES R-S-G	NC	OTC
EZ SMART PLS TES BLD GLUC	NC	OTC
EZ SMART TES BLD GLUC	NC	OTC
FIFTY50 GLUC TES 2.0	NC	OTC
FORA BLOOD TES GLUCOSE	NC	OTC
FORA D15G TES BLD GLUC	NC	OTC
FORA D20 TES BLD GLUC	NC	OTC
FORA D40/G31 TES GLUCOSE	NC	OTC
FORA G20 TES BLD GLUC	NC	OTC
FORA G30/V10 TES BLD GLUC	NC	OTC
FORA GD20 TES BLD GLUC	NC	OTC
FORA GD50 TES	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FORA TN'G TES TN'G VOI	NC	OTC
FORA V10 TES BLD GLUC	NC	OTC
FORA V12 TES BLD GLUC	NC	OTC
FORA V20 TES BLD GLUC	NC	OTC
FORA V30A TES BLD GLUC	NC	OTC
FORACARE TES GD40	NC	OTC
FORACARE TES PREM V10	NC	OTC
FORACARE TES TST N GO	NC	OTC
FORTISCARE TES BLD GLUC	NC	OTC
FREESTYLE TES	NC	OTC
FREESTYLE TES INSULINX	NC	OTC
FREESTYLE TES LITE	NC	OTC
FREESTYLE TES PREC NEO	NC	OTC
GE100 BLOOD TES GLUCOSE	NC	OTC
GENSTRIP 50 TES	NC	OTC
GHT TEST TES STRIPS	NC	OTC
GLUCO PERFEC TES 3	NC	OTC
GLUCOCARD 01 TES PLUS	NC	OTC
GLUCOCARD 01 TES SENSOR	NC	OTC
GLUCOCARD TES EXPRESSI	NC	OTC
GLUCOCARD TES VITAL	NC	OTC
GLUCOCARD TES X-SENSOR	NC	OTC
GLUCOCOM TES	NC	OTC
GLUCONAVII TES STRIPS	NC	OTC
GLUCOSE TES STRIPS	NC	OTC
GMATE BLOOD TES GLUCOSE	NC	OTC
IN TOUCH TES BLOOD	NC	OTC
INFINITY TES BLD GLUC	NC	OTC
KROGER BLOOD TES GLUCOSE	NC	OTC
KROGER TES	NC	OTC
LIBERTY NEXT TES GEN	NC	OTC
LIBERTY TES	NC	OTC
MAXIMA BLOOD TES GLUCOSE	NC	OTC
MEIJER BLOOD TES GLUCOSE	NC	OTC
MEIJER TES TRUETEST	NC	OTC
MEIJER TES TRUETRAC	NC	OTC
MICRODOT TES	NC	OTC
MYGLUCOHEALT TES BLD GLUC	NC	OTC
NEUTEK 2TEK TES STRIPS	NC	OTC
NEXGEN TES	NC	OTC
NO CODING TES BLD GLUC	NC	OTC
NOVA MAX TES GLUCOSE	NC	OTC
ON CALL PLUS TES BLD GLUC	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ON CALL TES EXPRESS	NC	OTC
ON CALL VIVD TES BLD GLUC	NC	OTC
ONETOUCH TES ULTRA	7	OTC; PV
ONETOUCH TES VERIO	7	OTC; PV
OPTIUM TES	NC	OTC
OPTIUMEZ TES	NC	OTC
OPTUMRX TES BLD GLUC	NC	OTC
PEN NEEDLES MIS 29GX12MM	NC	OTC
POCKETCHEM TES EZ	NC	OTC
PRECISION PT TES OF CARE	NC	OTC
PRECISION TES PCX	NC	OTC
PRECISION TES PCX PLUS	NC	OTC
PRECISION TES QID	NC	OTC
PRECISION TES SOF-TACT	NC	OTC
PRECISION TES XTRA	NC	OTC
PRODIGY NO TES CODING	NC	OTC
PTS PANELS TES GLUCOSE	NC	OTC
QUICKTEK TES	NC	OTC
QUINTET AC TES BLD GLUC	NC	OTC
QUINTET TES BLD GLUC	NC	OTC
RA TRUETEST TES	NC	OTC
REFUAH PLUS TES BLD GLUC	NC	OTC
RELION BLOOD TES GLUCOSE	NC	OTC
RELION PRIME TES	NC	OTC
RELION PRIME TES GLUCOSE	NC	OTC
RELION TES ULTIMA	NC	OTC
REVEAL TES BLD GLUC	NC	OTC
RIGHTEST TES GS100	NC	OTC
RIGHTEST TES GS300	NC	OTC
RIGHTEST TES GS550	NC	OTC
SMART SENSE TES TEST	NC	OTC
SMARTEST TES BLD GLUC	NC	OTC
SOLUS V2 TES AUDIBLE	NC	OTC
SUPREME TES	NC	OTC
SURE EDGE TES	NC	OTC
SURE-TEST TES EASYPLUS	NC	OTC
SURECHEK TES BLD GLUC	NC	OTC
TRUE METRIX TES GLUCOSE	NC	OTC
TRUETEST TES	NC	OTC
TRUETEST TES BLD GLUC	NC	OTC
TRUETRACK TES	NC	OTC
TRUETRACK TES BLD GLUC	NC	OTC
ULTIMA TES	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ULTRATRAK TES ULTIMATE	NC	OTC
ULTRATRK PRO TES	NC	OTC
UNISTRIP1 TES GENERIC	NC	OTC
VOCAL POINT TES BLD GLUC	NC	OTC
WAVESENSE TES PRESTO	NC	OTC
XPRESS TES BLD GLUC	NC	OTC

## **DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS**

### **DIETARY MANAGEMENT PRODUCTS**

PODIAPN CAP	3
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## **DIGESTIVE AIDS**

### **DIGESTIVE ENZYMES**

CREON CAP 3000UNIT	2
CREON CAP 6000UNIT	2
CREON CAP 12000UNT	2
CREON CAP 24000UNT	2
CREON CAP 36000UNT	2
PANCREAZE CAP 2600UNIT	3
PANCREAZE CAP 4200UNIT	3
PANCREAZE CAP 10500UNT	3
PANCREAZE CAP 16800UNT	3
PANCREAZE CAP 21000UNT	3
PANCREAZE CAP 37000	3
PERTZYE CAP 4000UNIT	3
PERTZYE CAP 8000UNIT	3
PERTZYE CAP 16000U	3
PERTZYE CAP 24000U	3
SUCRAID SOL 8500/ML	6
VIOKACE TAB 10440	2
VIOKACE TAB 20880	2
ZENPEP CAP 3000UNIT	2
ZENPEP CAP 5000UNIT	2
ZENPEP CAP 10000UNT	2
ZENPEP CAP 15000UNT	2
ZENPEP CAP 20000UNT	2
ZENPEP CAP 25000UNT	2
ZENPEP CAP 40000UNT	2
ZENPEP CAP 60000UNT	2

## **DIURETICS**

### **CARBONIC ANHYDRASE INHIBITORS**

<i>acetazolamide cap er 12hr 500 mg</i>	1
<i>acetazolamide sodium for inj 500 mg</i>	1
<i>acetazolamide tab 125 mg</i>	1

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>acetazolamide tab 250 mg</i>	1	
KEVEYIS TAB 50MG	6	SP, PA, QL
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	2	
<i>ormalvi tab 50mg</i>	4	SP, PA, QL

### **DIURETIC COMBINATIONS**

ALDACTAZIDE TAB 25/25	3	PV
ALDACTAZIDE TAB 50/50	3	PV
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	1	PV
MAXZIDE TAB 75-50	3	
MAXZIDE-25 TAB	3	
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	PV

### **LOOP DIURETICS**

<i>bumetanide inj 0.25 mg/ml</i>	1	
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
BUMEX TAB 0.5MG	3	
EDECRIN TAB 25MG	3	
<i>ethacrynate sodium for inj 50 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	2	
<i>furosemide inj 10 mg/ml</i>	1	
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
LASIX TAB 20MG	3	
LASIX TAB 40MG	3	
LASIX TAB 80MG	3	
SOAANZ TAB 20MG	NC	
SOAANZ TAB 40MG	NC	
SOAANZ TAB 60MG	NC	
SOD EDECRIN INJ 50MG	3	
<i>toremide tab 5 mg</i>	1	
<i>toremide tab 10 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>toremide tab 20 mg</i>	1	
<i>toremide tab 100 mg</i>	1	
<b>OSMOTIC DIURETICS</b>		
<i>mannitol iv soln 20%</i>	1	
<i>mannitol iv soln 25%</i>	1	
<i>osmitrol inj 10%</i>	1	
<i>osmitrol inj 15%</i>	1	
<i>osmitrol vfx inj 20%</i>	1	
<b>POTASSIUM SPARING DIURETICS</b>		
ALDACTONE TAB 25MG	3	
ALDACTONE TAB 50MG	3	
ALDACTONE TAB 100MG	3	
<i>amiloride hcl tab 5 mg</i>	1	
CAROSPIR SUS 25MG/5ML	NC	
DYRENIUM CAP 50MG	NC	
DYRENIUM CAP 100MG	NC	
<i>spironolactone susp 25 mg/5ml</i>	2	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	2	
<i>triamterene cap 100 mg</i>	2	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<i>chlorothiazide sodium for inj 500 mg</i>	1	
<i>chlorthalidone tab 25 mg</i>	1	PV
<i>chlorthalidone tab 50 mg</i>	1	PV
DIURIL SUS 250/5ML	3	PV
<i>hydrochlorothiazide cap 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 25 mg</i>	1	PV
<i>hydrochlorothiazide tab 50 mg</i>	1	PV
<i>indapamide tab 1.25 mg</i>	1	PV
<i>indapamide tab 2.5 mg</i>	1	PV
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
SOD DIURIL INJ 500MG	3	
THALITONE TAB 15MG	3	PV
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>ADRENAL STEROID INHIBITORS</b>		
ISTURISA TAB 1MG	NC	
ISTURISA TAB 5MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ISTURISA TAB 10MG	NC	
RECORLEV TAB 150MG	NC	
<b>BONE DENSITY REGULATORS</b>		
ACTONEL TAB 35MG	3	PV
ACTONEL TAB 150MG	3	PV
<i>alendronate sodium oral soln 70 mg/75ml</i>	2	PV
<i>alendronate sodium tab 5 mg</i>	1	PV
<i>alendronate sodium tab 10 mg</i>	1	PV
<i>alendronate sodium tab 35 mg</i>	1	PV
<i>alendronate sodium tab 70 mg</i>	1	PV
AELVIA TAB	3	PV
BINOSTO TAB 70MG	3	ST; PV
<i>calcitonin (salmon) inj 200 unit/ml</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	PV
EVENITY INJ 105MG	NC	
FORTEO INJ 600/2.4	6	SP, PA, QL; PV
FOSAMAX + D TAB 70-2800	3	ST; PV
FOSAMAX + D TAB 70-5600	3	ST; PV
FOSAMAX TAB 70MG	3	PV
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	1	PV
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	PV
MIACALCIN INJ 200/ML	NC	
MIACALCIN INJ 400/2ML	NC	
NATPARA INJ 25MCG	6	SP, PA, QL
NATPARA INJ 50MCG	6	SP, PA, QL
NATPARA INJ 75MCG	6	SP, PA, QL
NATPARA INJ 100MCG	6	SP, PA, QL
<i>pamidronate disodium iv soln 3 mg/ml</i>	1	
<i>pamidronate disodium iv soln 9 mg/ml</i>	1	
PAMIDRONATE INJ 6MG/ML	3	
PROLIA INJ 60MG/ML	5	SP, PA, QL; PV
RECLAST INJ 5/100ML	6	SP, PA; PV
<i>risedronate sodium tab 5 mg</i>	1	PV
<i>risedronate sodium tab 30 mg</i>	2	PV
<i>risedronate sodium tab 35 mg</i>	1	PV
<i>risedronate sodium tab 150 mg</i>	1	PV
<i>risedronate sodium tab delayed release 35 mg</i>	1	PV
<i>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml</i>	4	SP, PA, QL; PV
TERIPARATIDE INJ 620/2.48	NC	
TYMLOS INJ	5	SP, PA, QL; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XGEVA INJ	6	SP, PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	SP, PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	SP, PA; PV
ZOLEDRONIC INJ 4/100ML	6	SP, PA
<b>CORTICOTROPIN</b>		
ACTHAR INJ 80UNIT	6	SP, PA, QL
CORTROPHIN GEL 80UNIT	6	SP, PA, QL
<b>FERTILITY REGULATORS</b>		
CHOR GONADOT INJ 10000UNT	NC	
<i>clomid tab 50mg</i>	1	PA
<i>clomiphene citrate tab 50 mg</i>	1	PA
FOLLISTIM AQ INJ 300UNIT	5	SP, PA, QL
FOLLISTIM AQ INJ 600UNIT	5	SP, PA, QL
FOLLISTIM AQ INJ 900UNIT	5	SP, PA, QL
GONAL-F INJ 450UNIT	NC	
GONAL-F INJ 1050UNIT	NC	
GONAL-F RFF INJ 75UNIT	NC	
GONAL-F RFF INJ 300/0.5	NC	
GONAL-F RFF INJ 450/0.75	NC	
GONAL-F RFF INJ 900/1.5	NC	
MENOPUR INJ 75UNIT	5	SP, PA
NOVAREL INJ 5000UNIT	NC	
OVIDREL INJ	5	SP, PA
PREGNYL INJ 10000UNT	NC	
<b>GNRH/LHRH ANTAGONISTS</b>		
<i>cetorelix acetate for inj kit 0.25 mg</i>	4	SP, PA
<i>fyremadel sol 250/0.5</i>	NC	
GANIRELIX AC INJ 250/0.5	4	SP, PA
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	NC	
ORLISSA TAB 150MG	2	PA
ORLISSA TAB 200MG	2	PA
<b>GROWTH HORMONE RECEPTOR ANTAGONISTS</b>		
SOMAVERT INJ 10MG	NC	
SOMAVERT INJ 15MG	NC	
SOMAVERT INJ 20MG	NC	
SOMAVERT INJ 25MG	NC	
SOMAVERT INJ 30MG	NC	
<b>GROWTH HORMONE RELEASING HORMONES (GHRH)</b>		
EGRIFTA SV INJ 2MG	6	SP, PA, QL
<b>GROWTH HORMONES</b>		
GENOTROPIN INJ 0.2MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GENOTROPIN INJ 0.4MG	NC	
GENOTROPIN INJ 0.6MG	NC	
GENOTROPIN INJ 0.8MG	NC	
GENOTROPIN INJ 1.2MG	NC	
GENOTROPIN INJ 1.4MG	NC	
GENOTROPIN INJ 1.6MG	NC	
GENOTROPIN INJ 1.8MG	NC	
GENOTROPIN INJ 1MG	NC	
GENOTROPIN INJ 2MG	NC	
GENOTROPIN INJ 5MG	NC	
GENOTROPIN INJ 12MG	NC	
HUMATROPE INJ 6MG	5	SP, PA
HUMATROPE INJ 12MG	5	SP, PA
HUMATROPE INJ 24MG	5	SP, PA
NGENLA INJ 24/1.2ML	NC	
NGENLA INJ 60/1.2ML	NC	
NORDITROPIN INJ 5/1.5ML	5	SP, PA
NORDITROPIN INJ 10/1.5ML	5	SP, PA
NORDITROPIN INJ 15/1.5ML	5	SP, PA
NORDITROPIN INJ 30/3ML	5	SP, PA
NUTROPIN AQ INJ 10MG/2ML	NC	
NUTROPIN AQ INJ 20MG/2ML	NC	
NUTROPIN AQ INJ NUSPIN 5	NC	
OMNITROPE INJ 5.8MG	NC	
OMNITROPE INJ 5/1.5ML	NC	
OMNITROPE INJ 10/1.5ML	NC	
SAIZEN INJ 5MG	NC	
SAIZEN INJ 8.8MG	NC	
SEROSTIM INJ 4MG	6	SP, PA
SEROSTIM INJ 5MG	6	SP, PA
SEROSTIM INJ 6MG	6	SP, PA
SKYTROFA INJ 3.6MG	NC	
SKYTROFA INJ 3MG	NC	
SKYTROFA INJ 4.3MG	NC	
SKYTROFA INJ 5.2MG	NC	
SKYTROFA INJ 6.3MG	NC	
SKYTROFA INJ 7.6MG	NC	
SKYTROFA INJ 9.1MG	NC	
SKYTROFA INJ 11MG	NC	
SKYTROFA INJ 13.3MG	NC	
SOGROYA INJ 5MG/1.5	5	SP, PA
SOGROYA INJ 10MG/1.5	5	SP, PA
SOGROYA INJ 15MG/1.5	5	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZOMACTON INJ 5MG	NC	
ZOMACTON INJ 10MG	NC	
<b>HORMONE RECEPTOR MODULATORS</b>		
EVISTA TAB 60MG	3	PV
OSPHENA TAB 60MG	NC	
<i>raloxifene hcl tab 60 mg</i>	1	ACA, PV
<b>INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS</b>		
TEPEZZA INJ 500MG	6	SP, PA
<b>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</b>		
INCRELEX INJ 40MG/4ML	6	SP, PA
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
FENSOLVI INJ 45MG	5	SP, PA, QL
LUPR DEP-PED INJ 3M 30MG	5	SP, PA, QL
LUPR DEP-PED INJ 7.5MG	5	SP, PA, QL
LUPR DEP-PED INJ 11.25MG	5	SP, PA, QL
LUPR DEP-PED INJ 15MG	5	SP, PA, QL
SUPPRELIN LA KIT 50MG	5	SP, PA
SYNAREL SOL 2MG/ML	3	PA
TRIPTODUR SUS 22.5MG	NC	
<b>MENOPAUSAL SYMPTOMS SUPPRESSANTS</b>		
VEOZAH TAB 45MG	NC	
<b>METABOLIC MODIFIERS</b>		
ALDURAZYME INJ 2.9MG/5M	6	SP, PA
AMMONUL INJ 10%	3	
<i>betaine powder for oral solution</i>	4	SP, PA
BRINEURA KIT 150/5ML	NC	
BUPHENYL POW	NC	
BUPHENYL TAB 500MG	NC	
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol inj 1 mcg/ml</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	2	
CARBAGLU TAB 200MG	NC	
<i>carglumic acid soluble tab 200 mg</i>	4	SP, PA
CARNITOR INJ 1GM/5ML	3	
CARNITOR SF SOL 1GM/10ML	NC	
CARNITOR SOL 1GM/10ML	NC	
CARNITOR TAB 330MG	NC	
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	4	SP, PA, QL
CITRULLINE TAB EASY 1GM	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CRYSVITA INJ 10MG/ML	6	PA, QL
CRYSVITA INJ 20MG/ML	6	PA, QL
CRYSVITA INJ 30MG/ML	6	PA, QL
CYSTADANE POW	NC	
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	1	
ELAPRASE INJ 6MG/3ML	6	SP, PA
ELFABRIO SOL 20/10ML	5	SP, PA
FABRAZYME INJ 5MG	5	SP, PA
FABRAZYME INJ 35MG	5	SP, PA
GALAFOLD CAP 123MG	5	SP, PA, QL
HECTOROL INJ 4MCG/2ML	3	
<i>javygtor pak 100mg</i>	4	SP, PA
<i>javygtor pow 500mg</i>	4	SP, PA
<i>javygtor tab 100mg</i>	4	SP, PA
KANUMA INJ 20/10ML	6	SP, PA
KUVAN POW 100MG	NC	
KUVAN POW 500MG	NC	
KUVAN TAB 100MG	NC	
LAMZEDE INJ 10MG	6	SP, PA
<i>levocarnitine inj 200 mg/ml</i>	1	
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
LUMIZYME INJ 50MG	6	SP, PA
MEPSEVII INJ 10MG/5ML	6	SP, PA
MYALEPT INJ 11.3MG	6	SP, PA, QL
NAGLAZYME INJ 1MG/ML	6	SP, PA
NEXVIAZYME INJ 100MG	NC	
<i>nitisinone cap 2 mg</i>	4	SP, PA
<i>nitisinone cap 5 mg</i>	4	SP, PA
<i>nitisinone cap 10 mg</i>	4	SP, PA
NITYR TAB 2MG	NC	
NITYR TAB 5MG	NC	
NITYR TAB 10MG	NC	
ORFADIN CAP 2MG	5	SP, PA
ORFADIN CAP 5MG	5	SP, PA
ORFADIN CAP 10MG	5	SP, PA
ORFADIN CAP 20MG	5	SP, PA
ORFADIN SUS 4MG/ML	5	SP, PA
PALYNZIQ INJ 2.5/0.5	NC	
PALYNZIQ INJ 10/0.5ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PALYNZIQ INJ 20MG/ML	NC	
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	2	
<i>paricalcitol cap 4 mcg</i>	1	
<i>paricalcitol iv soln 2 mcg/ml</i>	1	
<i>paricalcitol iv soln 5 mcg/ml</i>	1	
PARSABIV INJ 2.5-0.5	NC	
PARSABIV INJ 5MG/ML	NC	
PARSABIV INJ 10MG/2ML	NC	
PHEBURANE MIS 483/GM	5	SP, PA, QL
RAVICTI LIQ 1.1GM/ML	NC	
RAYALDEE CAP 30MCG	3	
REVCOVI INJ 1.6MG/ML	6	SP
ROCALTROL CAP 0.5MCG	2	
ROCALTROL CAP 0.25MCG	2	
ROCALTROL SOL 1MCG/ML	2	
<i>sapropterin dihydrochloride powder packet 100 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	4	SP, PA
SENSIPAR TAB 30MG	6	SP, PA, QL
SENSIPAR TAB 60MG	6	SP, PA, QL
SENSIPAR TAB 90MG	6	SP, PA, QL
<i>sodium benzoate &amp; sodium phenylacetate iv soln 10-10%</i>	1	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	SP, PA, QL
<i>sodium phenylbutyrate tab 500 mg</i>	4	SP, PA, QL
STRENSIQ INJ 18/0.45	6	SP, PA
STRENSIQ INJ 28/0.7ML	6	SP, PA
STRENSIQ INJ 40MG/ML	6	SP, PA
STRENSIQ INJ 80/0.8ML	6	SP, PA
VIMIZIM INJ 5MG/5ML	6	SP, PA
XENPOZYME INJ 4MG	6	SP, PA
XENPOZYME SOL 20MG	6	SP, PA
XPHOZAH TAB 20MG	NC	
XPHOZAH TAB 30MG	NC	
XURIDEN POW 2GM	6	SP, QL
ZEMPLAR CAP 1MCG	2	
ZEMPLAR CAP 2MCG	2	
ZEMPLAR INJ 2MCG/ML	3	
ZEMPLAR INJ 5MCG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
<b>MINERALOCORTICOID RECEPTOR ANTAGONISTS</b>		
KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA
<b>NATRIURETIC PEPTIDES</b>		
VOXZOGO INJ 0.4MG	6	SP, PA, QL
VOXZOGO INJ 0.56MG	6	SP, PA, QL
VOXZOGO INJ 1.2MG	6	SP, PA, QL
<b>POSTERIOR PITUITARY HORMONES</b>		
DDAVP INJ 4MCG/ML	3	
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate inj 4 mcg/ml</i>	2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
NOCDURNA SUB 27.7MCG	3	
NOCDURNA SUB 55.3MCG	3	
VASOPRE/NAACL INJ 100/100	NC	
VASOPRE/NAACL INJ 100/250	NC	
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	1	
VASOSTRICT INJ 20UNT/ML	3	
VASOSTRICT SOL	3	
<b>PROLACTIN INHIBITORS</b>		
<i>cabergoline tab 0.5 mg</i>	1	
<b>SOMATOSTATIC AGENTS</b>		
<i>lanreotide acetate extended release inj 120 mg/0.5ml</i>	4	SP, PA, QL
LANREOTIDE INJ 120/.5ML	6	SP, PA, QL
MYCAPSSA CAP 20MG	NC	
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	4	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	4	SP, PA, QL
SANDOSTATIN INJ 50MCG/ML	6	SP, PA, QL
SANDOSTATIN INJ 100MCG	6	SP, PA, QL
SANDOSTATIN INJ 500MCG	6	SP, PA, QL
SANDOSTATIN KIT LAR 10MG	NC	
SANDOSTATIN KIT LAR 20MG	NC	
SANDOSTATIN KIT LAR 30MG	NC	
SIGNIFOR INJ 0.3MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.6MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.9MG/ML	6	SP, PA, QL
SIGNIFOR LAR INJ 20MG	NC	
SIGNIFOR LAR INJ 40MG	NC	
SIGNIFOR LAR INJ 60MG	NC	
SOMATULINE INJ 60/0.2ML	5	SP, PA, QL
SOMATULINE INJ 90/0.3ML	5	SP, PA, QL
SOMATULINE INJ 120/.5ML	5	SP, PA, QL

#### **VASOPRESSIN RECEPTOR ANTAGONISTS**

JYNARQUE PAK 15MG	NC	
JYNARQUE PAK 30-15MG	NC	
JYNARQUE PAK 45-15MG	NC	
JYNARQUE PAK 60-30MG	NC	
JYNARQUE PAK 90-30MG	NC	
JYNARQUE TAB 15MG	NC	
JYNARQUE TAB 30MG	NC	
SAMSCA TAB 15MG	2	SP, PA
SAMSCA TAB 30MG	2	SP, PA
<i>tolvaptan tab 15 mg</i>	4	SP, PA
<i>tolvaptan tab 30 mg</i>	4	SP, PA

#### **ESTROGENS**

##### **ESTROGEN COMBINATIONS**

ACTIVELLA TAB 1-0.5MG	3	
<i>amabelz tab 0.5-0.1</i>	1	
ANGELIQ TAB 0.5-1MG	3	
ANGELIQ TAB 0.25-0.5	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PRO DIS WEEKLY	2	
COMBIPATCH DIS	2	
DUAVEE TAB 0.45-20	2	
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fyavolv tab 0.5-2.5</i>	1	
<i>fyavolv tab 1-5</i>	1	
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
MYFEMBREE TAB	2	PA
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
ORIAHNN CAP	2	PA
PREMPHASE TAB	2	
PREMPRO TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-5	2	
<b>ESTROGENS</b>		
ALORA DIS 0.1MG	3	
ALORA DIS 0.025MG	3	
ALORA DIS 0.075MG	3	
CLIMARA DIS 0.1MG	NC	
CLIMARA DIS 0.05MG	NC	
CLIMARA DIS 0.06MG	NC	
CLIMARA DIS 0.025MG	NC	
CLIMARA DIS 0.075MG	NC	
CLIMARA DIS 0.0375MG	NC	
DELESTROGEN INJ 10MG/ML	3	
DELESTROGEN INJ 20MG/ML	3	
DELESTROGEN INJ 40MG/ML	3	
DEPO-ESTRADI INJ 5MG/ML	3	
DIVIGEL GEL 0.5MG	3	
DIVIGEL GEL 0.25MG	3	
DIVIGEL GEL 0.75MG	3	
DIVIGEL GEL 1.25MG	3	
DIVIGEL GEL 1MG/GM	3	
<i>dotti dis 0.1mg</i>	1	
<i>dotti dis 0.05mg</i>	1	
<i>dotti dis 0.025mg</i>	1	
<i>dotti dis 0.075mg</i>	1	
<i>dotti dis 0.0375mg</i>	1	
ELESTRIN GEL 0.06%	3	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	1	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	
<i>estradiol valerate im in oil 40 mg/ml</i>	1	
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	3	
<i>lyllana dis 0.1mg</i>	1	
<i>lyllana dis 0.05mg</i>	1	
<i>lyllana dis 0.025mg</i>	1	
<i>lyllana dis 0.075mg</i>	1	
<i>lyllana dis 0.0375mg</i>	1	
MENEST TAB 0.3MG	NC	
MENEST TAB 0.625MG	NC	
MENEST TAB 1.25MG	NC	
MENOSTAR DIS 14MCG	3	
MINIVELLE DIS 0.1MG	NC	
MINIVELLE DIS 0.05MG	NC	
MINIVELLE DIS 0.025MG	NC	
MINIVELLE DIS 0.075MG	NC	
MINIVELLE DIS 0.0375MG	NC	
PREMARIN INJ 25MG	3	
PREMARIN TAB 0.3MG	NC	
PREMARIN TAB 0.9MG	NC	



Drug Name	Drug Tier	Requirements/Limits
PREMARIN TAB 0.45MG	NC	
PREMARIN TAB 0.625MG	NC	
PREMARIN TAB 1.25MG	NC	
VIVELLE-DOT DIS 0.1MG	NC	
VIVELLE-DOT DIS 0.05MG	NC	
VIVELLE-DOT DIS 0.025MG	NC	
VIVELLE-DOT DIS 0.075MG	NC	
VIVELLE-DOT DIS 0.0375MG	NC	

## FLUOROQUINOLONES

### FLUOROQUINOLONES

BAXDELA INJ 300MG	3	
BAXDELA TAB 450MG	3	
CIPRO (5%) SUS 250MG/5	3	
CIPRO (10%) SUS 500MG/5	3	
CIPRO TAB 250MG	3	
CIPRO TAB 500MG	3	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1	
<i>levofloxacin iv soln 25 mg/ml</i>	1	
<i>levofloxacin oral soln 25 mg/ml</i>	2	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
MOXIFLOXACIN INJ 400/250	NC	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	2	

## GASTROINTESTINAL AGENTS - MISC.

### AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)

TRULANCE TAB 3MG	3	PA
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### BILE ACID SYNTHESIS DISORDER AGENTS

CHOLBAM CAP 50MG	6	SP, PA
CHOLBAM CAP 250MG	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
<b>FARNESOID X RECEPTOR (FXR) AGONISTS</b>		
OCALIVA TAB 5MG	6	SP, PA, QL
OCALIVA TAB 10MG	6	SP, PA, QL
<b>GALLSTONE SOLUBILIZING AGENTS</b>		
ACTIGALL CAP 300MG	2	
CHENODAL TAB 250MG	6	SP, PA
URSO 250 TAB 250MG	2	
URSO FORTE TAB 500MG	2	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
<b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
GASTROCROM CON 100/5ML	3	
<b>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</b>		
AMITIZA CAP 8MCG	NC	
AMITIZA CAP 24MCG	NC	
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
<b>GASTROINTESTINAL STIMULANTS</b>		
DEXPANTHENOL INJ 250MG/ML	3	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
REGLAN TAB 5MG	3	
REGLAN TAB 10MG	3	
<b>HEPATOTROPICS</b>		
REZDIFFRA TAB 60MG	NC	
REZDIFFRA TAB 80MG	NC	
REZDIFFRA TAB 100MG	NC	
<b>ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS</b>		
BYLVAY CAP 200MCG	NC	
BYLVAY CAP 400MCG	NC	
BYLVAY CAP 600MCG	NC	
BYLVAY CAP 1200MCG	NC	
LIVMARLI SOL 9.5MG/ML	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<b>INFLAMMATORY BOWEL AGENTS</b>		
APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	NC	
AVSOLA INJ 100MG	5	SP, PA
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	
CANASA SUP 1000MG	3	
CIMZIA KIT 200MG	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA PREFL KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA START KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
COLAZAL CAP 750MG	NC	
DELZICOL CAP 400MG	NC	
DIPENTUM CAP 250MG	3	
ENTYVIO INJ 108/0.68	NC	
ENTYVIO INJ 300MG	NC	
INFLECTRA INJ 100MG	NC	
LIALDA TAB 1.2GM	NC	
<i>mesalamine cap dr 400 mg</i>	2	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	2	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine rectal enema 4 gm &amp; cleanser wipe kit</i>	2	
<i>mesalamine suppos 1000 mg</i>	2	
<i>mesalamine tab delayed release 1.2 gm</i>	2	
<i>mesalamine tab delayed release 800 mg</i>	2	
OMVOH INJ 100MG/ML	NC	
OMVOH INJ 300/15ML	NC	
PENTASA CAP 250MG CR	NC	
PENTASA CAP 500MG CR	NC	
REMICADE INJ 100MG	5	SP, PA, QL
RENFLIXIS INJ 100MG	NC	
ROWASA KIT 4GM	3	
SFROWASA ENE 4GM	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SKYRIZI INJ 180/1.2	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI INJ 360/2.4	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI SOL 60MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
STELARA INJ 5MG/ML	5	SP, PA, QL
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
VELSIPITY TAB 2MG	NC	
ZYMFENTRA INJ 120MG/ML	NC	
<b>INTESTINAL ACIDIFIERS</b>		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
<b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS</b>		
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	2	
<i>alose tron hcl tab 1 mg (base equiv)</i>	2	
IBSRELA TAB 50MG	NC	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
LOTRONEX TAB 0.5MG	3	
LOTRONEX TAB 1MG	3	
VIBERZI TAB 75MG	2	
VIBERZI TAB 100MG	2	
ZELNORM TAB 6MG	NC	
<b>LIVE FECAL MICROBIOTA</b>		
VOWST CAP	6	SP, PA
<b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>		
<i>alvimopan cap 12 mg</i>	1	
ENTEREG CAP 12MG	3	
MOVANTIK TAB 12.5MG	NC	
MOVANTIK TAB 25MG	NC	
RELISTOR INJ 8/0.4ML	NC	
RELISTOR INJ 12/0.6ML	NC	
RELISTOR TAB 150MG	NC	
SYMPROIC TAB 0.2MG	2	PA

Drug Name	Drug Tier	Requirements/Limits
<b>PHOSPHATE BINDER AGENTS</b>		
AURYXIA TAB 210MG	2	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1	
calcium acetate (phosphate binder) tab 667 mg	1	
FOSRENOL CHW 500MG	NC	
FOSRENOL CHW 750MG	NC	
FOSRENOL CHW 1000MG	NC	
FOSRENOL POW 750MG	NC	
FOSRENOL POW 1000MG	NC	
lanthanum carbonate chew tab 500 mg (elemental)	NC	
lanthanum carbonate chew tab 750 mg (elemental)	NC	
lanthanum carbonate chew tab 1000 mg (elemental)	NC	
PHOSLYRA SOL	3	
RENAGEL TAB 800MG	3	
RENVELA POW 0.8GM	NC	
RENVELA POW 2.4GM	NC	
RENVELA TAB 800MG	NC	
sevelamer carbonate packet 0.8 gm	2	
sevelamer carbonate packet 2.4 gm	1	
sevelamer carbonate tab 800 mg	1	
sevelamer hcl tab 400 mg	2	
sevelamer hcl tab 800 mg	2	
VELPHORO CHW 500MG	NC	
<b>SHORT BOWEL SYNDROME (SBS) AGENTS</b>		
GATTEX KIT 5MG	6	SP, PA, QL
<b>TRYPTOPHAN HYDROXYLASE INHIBITORS</b>		
XERMELO TAB 250MG	6	SP, PA, QL
<b>GENERAL ANESTHETICS</b>		
<b>ANESTHETICS - MISC.</b>		
AMIDATE INJ 2MG/ML	3	
DIPRIVAN INJ	3	
DIPRIVAN INJ 100/10ML	3	
DIPRIVAN INJ 200/20ML	3	
DIPRIVAN INJ 500/50ML	3	
etomidate iv soln 2 mg/ml	1	
KETALAR INJ 10MG/ML	3	
KETALAR INJ 50MG/ML	3	
KETALAR INJ 100MG/ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ketamine hcl inj 10 mg/ml</i>	1	
<i>ketamine hcl inj 50 mg/ml</i>	1	
<i>ketamine hcl inj 100 mg/ml</i>	1	
KETAMINE INJ 10MG/ML	3	
<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i>	1	
<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i>	1	
<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i>	1	
<i>propoven inj</i>	1	
<i>propoven inj 200/20ml</i>	2	
<i>propoven inj 500/50ml</i>	1	
<b>BARBITURATE ANESTHETICS</b>		
BREVITAL SOD INJ 500MG	3	
<b>VOLATILE ANESTHETICS</b>		
<i>desflurane inhal soln</i>	1	
FORANE SOL	3	
<i>isoflurane inhal soln</i>	1	
<i>sevoflurane inhal soln</i>	1	
SUPRANE INH	3	
SUPRANE SOL	3	
<i>terrell sol</i>	1	
ULTANE SOL	3	
<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>		
<b>ACIDIFIERS</b>		
K-PHOS TAB NO 2	3	
<b>ALKALINIZERS</b>		
<i>cytra k gra crystals</i>	1	
ORACIT SOL	3	
<i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	2	
<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
<i>sodium citrate &amp; citric acid soln 500-334 mg/5ml</i>	1	
UROCIT-K 5 TAB	2	
UROCIT-K 10 TAB	2	
UROCIT-K 15 TAB	2	
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON CAP 50MG	5	SP, PA
CYSTAGON CAP 150MG	5	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROCYSBI CAP 25MG	6	SP, PA, QL
PROCYSBI CAP 75MG	6	SP, PA, QL
<b>GENITOURINARY IRRIGANTS</b>		
<i>acetic acid irrigation soln 0.25%</i>	1	
<i>argyl saline sol 0.9% irr</i>	1	
<i>curity salin sol 0.9% irr</i>	1	
<i>glycine irrigation soln 1.5%</i>	1	
<i>neomycin-polymyxin b gu irrigation soln</i>	1	
RENACIDIN SOL	3	
<i>sodium chloride irrigation soln 0.9%</i>	1	
SORBITOL SOL 3% IRR	3	
SORBITOL-MAN SOL	3	
<b>HYPEROXALURIA AGENTS</b>		
OXLUMO INJ 94.5/0.5	NC	
RIVFLOZA INJ 80/0.5ML	NC	
RIVFLOZA INJ 128/0.8	NC	
RIVFLOZA INJ 160MG/ML	NC	
<b>INTERSTITIAL CYSTITIS AGENTS</b>		
ELMIRON CAP 100MG	NC	
RIMSO-50 SOL 50%	NC	
<b>PROSTATIC HYPERTROPHY AGENTS</b>		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
AVODART CAP 0.5MG	3	
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
ENTADFI CAP 5-5MG	NC	
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	NC	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	NC	
RAPAFLO CAP 8MG	NC	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	NC	
<b>URINARY ANALGESICS</b>		
<i>phenazo tab 200mg</i>	2	
<b>URINARY STONE AGENTS</b>		
LITHOSTAT TAB 250MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
THIOLA EC TAB 100MG	NC	
THIOLA EC TAB 300MG	NC	
THIOLA TAB 100MG	NC	
<i>tiopronin tab 100 mg</i>	4	SP, PA
<i>tiopronin tab delayed release 100 mg</i>	4	SP, PA
<i>tiopronin tab delayed release 300 mg</i>	4	SP, PA

## **GOUT AGENTS**

### **GOUT AGENT COMBINATIONS**

<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
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### **GOUT AGENTS**

<i>allopurinol sodium for inj 500 mg</i>	1	
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
ALOPRIM INJ 500MG	3	
<i>colchicine cap 0.6 mg</i>	NC	
<i>colchicine tab 0.6 mg</i>	1	
COLCRYS TAB 0.6MG	NC	
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
KRYSTEXXA INJ 8MG/ML	6	SP, PA
MITIGARE CAP 0.6MG	1	
ULORIC TAB 40MG	NC	
ULORIC TAB 80MG	NC	

### **URICOSURICS**

<i>probenecid tab 500 mg</i>	1	
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## **HEMATOLOGICAL AGENTS - MISC.**

### **AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA**

GIVLAARI INJ 189MG/ML	NC	
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### **ANTIHEMOPHILIC PRODUCTS**

ADVATE INJ 250UNIT	5	SP, PA; PV
ADVATE INJ 500UNIT	5	SP, PA; PV
ADVATE INJ 1000UNIT	5	SP, PA; PV
ADVATE INJ 1500UNIT	5	SP, PA; PV
ADVATE INJ 2000UNIT	5	SP, PA; PV
ADVATE INJ 3000UNIT	5	SP, PA; PV
ADVATE INJ 4000UNIT	5	SP, PA; PV
ADYNOVATE INJ 250UNIT	5	SP, PA; PV
ADYNOVATE INJ 500UNIT	5	SP, PA; PV
ADYNOVATE INJ 750UNIT	5	SP, PA; PV
ADYNOVATE INJ 1000UNIT	5	SP, PA; PV
ADYNOVATE INJ 1500UNIT	5	SP, PA; PV
ADYNOVATE INJ 2000UNIT	5	SP, PA; PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADYNOVATE INJ 3000UNIT	5	SP, PA; PV
AFSTYLA KIT 250UNIT	5	SP, PA; PV
AFSTYLA KIT 500UNIT	5	SP, PA; PV
AFSTYLA KIT 1000UNIT	5	SP, PA; PV
AFSTYLA KIT 1500UNIT	5	SP, PA; PV
AFSTYLA KIT 2000UNIT	5	SP, PA; PV
AFSTYLA KIT 2500UNIT	5	SP, PA; PV
AFSTYLA KIT 3000UNIT	5	SP, PA; PV
ALPHANINE SD INJ 500UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1000UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1500UNIT	6	SP, PA; PV
ALPROLIX INJ 250UNIT	5	SP, PA, QL
ALPROLIX INJ 500UNIT	5	SP, PA, QL
ALPROLIX INJ 1000UNIT	5	SP, PA, QL
ALPROLIX INJ 2000UNIT	5	SP, PA, QL
ALPROLIX INJ 3000UNIT	5	SP, PA, QL
ALPROLIX INJ 4000UNIT	5	SP, PA, QL
ALTUVIIIIO INJ 250 UNIT	NC	
ALTUVIIIIO INJ 500UNIT	NC	
ALTUVIIIIO INJ 1000UNIT	NC	
ALTUVIIIIO INJ 2000UNIT	NC	
ALTUVIIIIO INJ 3000UNIT	NC	
ALTUVIIIIO INJ 4000UNIT	NC	
BENEFIX INJ 250UNIT	NC	
BENEFIX INJ 500UNIT	NC	
BENEFIX INJ 1000UNIT	NC	
BENEFIX INJ 2000UNIT	NC	
BENEFIX INJ 3000UNIT	NC	
CORIFACT KIT	6	SP, PA; PV
ELOCTATE INJ 250UNIT	5	SP, PA; PV
ELOCTATE INJ 500UNIT	5	SP, PA; PV
ELOCTATE INJ 750UNIT	5	SP, PA; PV
ELOCTATE INJ 1000UNIT	5	SP, PA; PV
ELOCTATE INJ 1500UNIT	5	SP, PA; PV
ELOCTATE INJ 2000UNIT	5	SP, PA; PV
ELOCTATE INJ 3000UNIT	5	SP, PA; PV
ELOCTATE INJ 4000UNIT	5	SP, PA; PV
ELOCTATE INJ 5000UNIT	5	SP, PA; PV
ELOCTATE INJ 6000UNIT	5	SP, PA; PV
ESPEROCT INJ 500UNIT	5	SP, PA; PV
ESPEROCT INJ 1000UNIT	5	SP, PA; PV
ESPEROCT INJ 1500UNIT	5	SP, PA; PV
ESPEROCT INJ 2000UNIT	5	SP, PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ESPEROCT INJ 3000UNIT	5	SP, PA; PV
FEIBA INJ	NC	
FIBRYGA INJ 1GM	6	SP, PA
HEMLIBRA INJ 30MG/ML	6	SP, PA
HEMLIBRA INJ 60/0.4	6	SP, PA
HEMLIBRA INJ 105/0.7	6	SP, PA
HEMLIBRA INJ 150/ML	6	SP, PA
HEMLIBRA INJ 300/2ML	6	SP, PA
HEMLIBRA SOL 12/0.4ML	6	SP, PA
HEMOFIL M INJ 250UNIT	6	SP, PA; PV
HEMOFIL M INJ 500UNIT	6	SP, PA; PV
HEMOFIL M INJ 1000UNIT	6	SP, PA; PV
HEMOFIL M INJ 1700UNIT	6	SP, PA; PV
HUMATE-P SOL 250-600	6	SP, PA; PV
HUMATE-P SOL 500-1200	6	SP, PA; PV
HUMATE-P SOL 2400UNIT	6	SP, PA; PV
IDELVION SOL 250UNIT	6	SP, PA; PV
IDELVION SOL 500UNIT	6	SP, PA; PV
IDELVION SOL 1000UNIT	6	SP, PA; PV
IDELVION SOL 2000UNIT	6	SP, PA; PV
IDELVION SOL 3500UNIT	6	SP, PA; PV
IXINITY INJ 250UNIT	NC	
IXINITY INJ 500UNIT	NC	
IXINITY INJ 1000UNIT	NC	
IXINITY INJ 1500UNIT	NC	
IXINITY INJ 2000UNIT	NC	
IXINITY INJ 3000UNIT	NC	
JIVI INJ 500 UNIT	5	SP, PA; PV
JIVI INJ 1000UNIT	5	SP, PA; PV
JIVI INJ 2000UNIT	5	SP, PA; PV
JIVI INJ 3000UNIT	5	SP, PA; PV
KOATE INJ 250UNIT	6	SP, PA; PV
KOATE INJ 500 UNIT	6	SP, PA; PV
KOATE INJ 1000UNIT	6	SP, PA; PV
KOATE-DVI INJ 500UNIT	6	SP, PA; PV
KOATE-DVI INJ 1000UNIT	6	SP, PA; PV
KOGENATE FS INJ 250UNIT	5	SP, PA; PV
KOGENATE FS INJ 500UNIT	5	SP, PA; PV
KOGENATE FS INJ 1000UNIT	5	SP, PA; PV
KOGENATE FS INJ 2000UNIT	5	SP, PA; PV
KOGENATE FS INJ 3000UNIT	5	SP, PA; PV
KOVALTRY INJ 250UNIT	5	SP, PA; PV
KOVALTRY INJ 500UNIT	5	SP, PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KOVALTRY INJ 1000UNIT	5	SP, PA; PV
KOVALTRY INJ 2000UNIT	5	SP, PA; PV
KOVALTRY INJ 3000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 250UNIT	5	SP, PA; PV
NOVOEIGHT INJ 500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 2000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 3000UNIT	5	SP, PA; PV
NOVOSEVEN RT INJ 1MG	5	SP, PA, QL
NOVOSEVEN RT INJ 2MG	5	SP, PA, QL
NOVOSEVEN RT INJ 5MG	5	SP, PA, QL
NOVOSEVEN RT INJ 8MG	5	SP, PA, QL
NUWIQ INJ 250UNIT	5	SP, PA; PV
NUWIQ INJ 500UNIT	5	SP, PA; PV
NUWIQ INJ 1000UNIT	5	SP, PA; PV
NUWIQ INJ 1500UNIT	5	SP, PA; PV
NUWIQ INJ 2000UNIT	5	SP, PA; PV
NUWIQ INJ 2500UNIT	5	SP, PA; PV
NUWIQ INJ 3000UNIT	5	SP, PA; PV
NUWIQ INJ 4000UNIT	5	SP, PA; PV
NUWIQ KIT 250UNIT	5	SP, PA; PV
NUWIQ KIT 500UNIT	5	SP, PA; PV
NUWIQ KIT 1000UNIT	5	SP, PA; PV
NUWIQ KIT 1500UNIT	5	SP, PA; PV
NUWIQ KIT 2000UNIT	5	SP, PA; PV
NUWIQ KIT 2500UNIT	5	SP, PA; PV
NUWIQ KIT 3000UNIT	5	SP, PA; PV
NUWIQ KIT 4000UNIT	5	SP, PA; PV
OBIZUR INJ 500 UNIT	6	SP, PA
PROFILNINE INJ 500UNIT	6	SP, PA; PV
PROFILNINE INJ 1000UNIT	6	SP, PA; PV
PROFILNINE INJ 1500UNIT	6	SP, PA; PV
REBINYN INJ 3000UNIT	5	SP, PA
REBINYN SOL 500UNIT	5	SP, PA
REBINYN SOL 1000UNIT	5	SP, PA
REBINYN SOL 2000UNIT	5	SP, PA
RECOMBINATE INJ	6	SP, PA; PV
RECOMBINATE INJ 220-400	6	SP, PA; PV
RECOMBINATE INJ 401-800	6	SP, PA; PV
RECOMBINATE INJ 801-1240	6	SP, PA; PV
RIASTAP SOL 1GM	6	SP, PA
RIXUBIS INJ 250 UNIT	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RIXUBIS INJ 500UNIT	NC	
RIXUBIS INJ 1000UNIT	NC	
RIXUBIS INJ 2000UNIT	NC	
RIXUBIS INJ 3000UNIT	NC	
SEVENFACT INJ 1MG	5	SP, PA, QL
SEVENFACT INJ 5MG	5	SP, PA, QL
TRETTEN INJ	6	SP, PA; PV
VONVENDI INJ 650UNIT	NC	
VONVENDI INJ 1300UNIT	NC	
WILATE INJ	6	SP, PA
XYNTHA INJ 250UNIT	5	SP, PA; PV
XYNTHA INJ 500UNIT	5	SP, PA; PV
XYNTHA INJ 1000UNIT	5	SP, PA; PV
XYNTHA INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 500UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 1000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 3000UNIT	5	SP, PA; PV
XYNTHA SOLOF KIT 250UNIT	5	SP, PA; PV
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>		
FIRAZYR INJ 30MG/3ML	NC	
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	SP, PA, QL
<i>sajazir inj 30mg/3ml</i>	4	SP, PA, QL
<b>COMPLEMENT INHIBITORS</b>		
BERINERT INJ 500UNIT	NC	
CINRYZE SOL 500 UNIT	NC	
EMPAVELI INJ 1080MG	5	SP, PA, QL
ENJAYMO SOL	NC	
FABHALTA CAP 200MG	6	SP, PA, QL
HAEGARDA INJ 2000UNIT	6	SP, PA, QL; PV
HAEGARDA INJ 3000UNIT	6	SP, PA, QL; PV
RUCONEST INJ 2100UNIT	6	SP, PA, QL
SOLIRIS INJ 10MG/ML	6	SP, PA
TAVNEOS CAP 10MG	6	SP, PA, QL
ULTOMIRIS INJ 100MG/ML	6	SP, PA, QL
ULTOMIRIS INJ 300/30ML	6	SP, PA, QL
VEOPOZ INJ 400/2ML	6	SP, PA
VOYDEYA TAB 50-100MG	NC	
VOYDEYA TAB 100MG	NC	
ZILBRYSQ INJ 16.6MG	NC	
ZILBRYSQ INJ 23MG	NC	
ZILBRYSQ INJ 32.4MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>HEMATAOLOGIC - TYROSINE KINASE INHIBITORS</b>		
TAVALISSE TAB 100MG	5	SP, PA, QL
TAVALISSE TAB 150MG	5	SP, PA, QL
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline tab er 400 mg</i>	1	
<b>HUMAN PROTEIN C</b>		
CEPROTIN INJ 500 UNIT	6	SP
CEPROTIN INJ 1000UNIT	6	SP
<b>PLASMA EXPANDERS</b>		
HESPAN INJ 6%/NAACL	3	
<i>hetastarch (hes /0.7 or /0.75) 6% in nacl 0.9% iv soln</i>	1	
HEXTEND SOL 6%	3	
<i>lmd 10%/d5w inj</i>	1	
<i>lmd 10%/nacl inj 0.9%</i>	1	
<b>PLASMA KALLIKREIN INHIBITORS</b>		
KALBITOR INJ 10MG/ML	6	SP, PA, QL
ORLADEYO CAP 110MG	5	SP, PA, QL; PV
ORLADEYO CAP 150MG	5	SP, PA, QL; PV
TAKHZYRO INJ 150MG/ML	5	SP, PA, QL; PV
TAKHZYRO INJ 300/2ML	5	SP, PA, QL; PV
<b>PLASMA PROTEINS</b>		
RYPLAZIM SOL 68.8MG	6	SP, PA
<b>PLATELET AGGREGATION INHIBITORS</b>		
AGGRASTAT INJ 3.75/15	NC	
AGGRASTAT INJ 5/100ML	3	
AGGRASTAT INJ 12.5/250	3	
AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	2	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	PV
BRILINTA TAB 60MG	2	PV
BRILINTA TAB 90MG	2	PV
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	PV
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	2	PV
<i>dipyridamole tab 25 mg</i>	1	PV
<i>dipyridamole tab 50 mg</i>	1	PV
<i>dipyridamole tab 75 mg</i>	1	PV
DURLAZA CAP 162.5MG	NC	
EFFIENT TAB 5MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
EFFIENT TAB 10MG	3	PV
<i>eptifibatide iv soln 20 mg/10ml (2 mg/ml)</i>	1	
<i>eptifibatide iv soln 75 mg/100ml (0.75 mg/ml)</i>	1	
<i>eptifibatide iv soln 200 mg/100ml (2 mg/ml)</i>	1	
KENGREAL SOL 50MG	NC	
PLAVIX TAB 75MG	NC	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	PV
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	PV
YOSPRALA TAB 81-40MG	NC	
YOSPRALA TAB 325-40MG	NC	
ZONTIVITY TAB 2.08MG	NC	

### **PROTAMINE**

<i>protamine sulfate inj 10 mg/ml</i>	1	
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### **PYRUVATE KINASE ACTIVATORS**

PYRUKYND TAB 5MG	NC	
PYRUKYND TAB 5MG TP	NC	
PYRUKYND TAB 20MG	NC	
PYRUKYND TAB 20MGX5MG	NC	
PYRUKYND TAB 50MG	NC	
PYRUKYND TAB 50MGX20M	NC	

### **THROMBOLYTIC AGENT - MISC**

DEFITELIO INJ 200/2.5	NC	
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### **THROMBOLYTIC ENZYMES**

ACTIVASE INJ 50MG	3	
ACTIVASE INJ 100MG	3	
CATHFLO ACTI INJ 2MG	3	
TNKASE KIT 50MG	3	

## **HEMATOPOIETIC AGENTS**

### **AGENTS FOR GAUCHER DISEASE**

CERDELGA CAP 84MG	5	SP, PA, QL
CEREZYME INJ 400UNIT	5	SP, PA, QL
ELELYSO INJ 200UNIT	NC	
<i>miglustat cap 100 mg</i>	4	SP, PA, QL
VPRIV INJ 400UNIT	NC	
<i>yargesa cap 100mg</i>	4	SP, PA
ZAVESCA CAP 100MG	6	SP, PA, QL

### **AGENTS FOR SICKLE CELL DISEASE**

ADAKVEO INJ 100/10ML	6	SP, PA
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ENDARI POW 5GM	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OXBRYTA TAB 500MG	NC	
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	
<b>COBALAMINS</b>		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	2	
<i>dodex inj</i>	1	
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	1	
NASCOBAL SPR 500MCG	NC	
<b>FOLIC ACID/FOLATES</b>		
<i>fa-8 cap 800mcg</i>	0	OTC; ACA, PV
<i>folate tab 400mcg</i>	0	OTC; ACA, PV
<i>folic acid cap 0.8 mg</i>	0	OTC; ACA, PV
<i>folic acid inj 5 mg/ml</i>	1	
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	OTC; ACA, PV
<i>folic acid tab 800mcg</i>	0	OTC; ACA, PV
<i>sm folic acd tab 400mcg</i>	0	OTC; ACA, PV
<i>yl folic aci tab 400mcg</i>	0	OTC; ACA, PV
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
ALVAIZ TAB 9MG	NC	
ALVAIZ TAB 18MG	NC	
ALVAIZ TAB 36MG	NC	
ALVAIZ TAB 54MG	NC	
ARANESP INJ 10MCG	5	SP, PA, QL
ARANESP INJ 25MCG	5	SP, PA, QL
ARANESP INJ 40MCG	5	SP, PA, QL
ARANESP INJ 60MCG	5	SP, PA, QL
ARANESP INJ 100MCG	5	SP, PA, QL
ARANESP INJ 150MCG	5	SP, PA, QL
ARANESP INJ 200MCG	5	SP, PA, QL
ARANESP INJ 300MCG	5	SP, PA, QL
ARANESP INJ 500MCG	5	SP, PA, QL
DOPTELET TAB 20MG	5	SP, PA, QL
EPOGEN INJ 2000/ML	NC	
EPOGEN INJ 3000/ML	NC	
EPOGEN INJ 4000/ML	NC	
EPOGEN INJ 10000/ML	NC	
EPOGEN INJ 20000/ML	NC	
FULPHILA INJ 6/0.6ML	NC	
FYLNETRA INJ 6MG/0.6	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GRANIX INJ 300/0.5	NC	
GRANIX INJ 300/1ML	NC	
GRANIX INJ 480/0.8	NC	
GRANIX INJ 480/1.6	NC	
LEUKINE INJ 250MCG	NC	
MIRCERA INJ 30MCG	NC	
MIRCERA INJ 50MCG	NC	
MIRCERA INJ 75MCG	NC	
MIRCERA INJ 100MCG	NC	
MIRCERA INJ 150MCG	NC	
MIRCERA INJ 200MCG	NC	
MULPLETA TAB 3MG	6	SP, PA, QL
NEULASTA INJ 6MG/0.6M	NC	
NEULASTA KIT 6MG/0.6M	NC	
NEUPOGEN INJ 300/0.5	NC	
NEUPOGEN INJ 300/ML	NC	
NEUPOGEN INJ 300MCG	NC	
NEUPOGEN INJ 480/0.8	NC	
NEUPOGEN INJ 480/1.6	NC	
NEUPOGEN INJ 480MCG	NC	
NIVESTYM INJ 300/0.5	4	SP, PA
NIVESTYM INJ 300MCG	4	SP, PA
NIVESTYM INJ 480/0.8	4	SP, PA
NIVESTYM INJ 480MCG	4	SP, PA
NPLATE INJ 125MCG	NC	
NPLATE INJ 250MCG	NC	
NPLATE INJ 500MCG	NC	
NYVEPRIA INJ 6/0.6ML	5	SP, PA, QL
PROCRIT INJ 2000/ML	5	SP, PA, QL
PROCRIT INJ 3000/ML	5	SP, PA, QL
PROCRIT INJ 4000/ML	5	SP, PA, QL
PROCRIT INJ 10000/ML	5	SP, PA, QL
PROCRIT INJ 20000/ML	5	SP, PA, QL
PROCRIT INJ 40000/ML	5	SP, PA, QL
PROMACTA PAK 25MG	5	SP, PA, QL
PROMACTA POW 12.5MG	5	SP, PA, QL
PROMACTA TAB 12.5MG	5	SP, PA, QL
PROMACTA TAB 25MG	5	SP, PA, QL
PROMACTA TAB 50MG	5	SP, PA, QL
PROMACTA TAB 75MG	5	SP, PA, QL
REBLOZYL INJ 25MG	NC	
REBLOZYL INJ 75MG	NC	
RELEUKO INJ 300MCG	NC	



Drug Name	Drug Tier	Requirements/Limits
RELEUKO INJ 480MCG	NC	
RETACRIT INJ 2000UNIT	4	SP, PA
RETACRIT INJ 3000UNIT	4	SP, PA
RETACRIT INJ 4000UNIT	4	SP, PA
RETACRIT INJ 10000UNT	4	SP, PA
RETACRIT INJ 20000UNI	4	SP, PA
RETACRIT INJ 40000UNT	4	SP, PA
ROLVEDON INJ 13.2MG	NC	
UDENYCA INJ 6MG/.6ML	NC	
UDENYCA ONBO INJ 6/0.6ML	NC	
ZARXIO INJ 300/0.5	NC	
ZARXIO INJ 480/0.8	NC	

### HEMATOPOIETIC MIXTURES

ACTIVE FE TAB 75-1.25	3	
<i>corvita 150 tab</i>	1	
CORVITE 150 TAB	3	
CORVITE FE TAB	3	
<i>ferocon cap</i>	1	
<i>ferotrinsic cap</i>	1	
FERRO-PLEX TAB	3	
FOLIVANE-PLS CAP	3	
<i>foltrin cap</i>	1	
FUSION PAK SPRINKLE	NC	
FUSION PLUS CAP	3	
HEMATINIC/FA TAB	1	
HEMATRON-AF TAB	3	
<i>hemocyte-f tab</i>	1	
ICAR-C PLUS TAB	3	
<i>k-tan plus cap</i>	1	
MULTIGEN PLS TAB	3	
MULTIGEN TAB	3	
MULTIGEN TAB FOLIC	3	
NUFERA TAB	3	
TARON FORTE CAP	3	
<i>tricon cap</i>	1	
<i>trigels-f cap forte</i>	1	

### IRON

FERAHEME INJ 510/17ML	3	
FERRLECIT INJ 12.5MG/M	3	
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml)</i> <i>(elemental fe)</i>	2	
INFED INJ 50MG/ML	3	
INJECTAFER INJ 100/2ML	3	

Drug Name	Drug Tier	Requirements/Limits
INJECTAFER INJ 750/15ML	3	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	2	
TRIFERIC INJ AVNU	3	
VENOFER INJ 20MG/ML	3	

### **STEM CELL MOBILIZERS**

MOZOBIL INJ	3	SP, PA
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	4	SP, PA
XOLREMDI CAP 100MG	NC	

### **HEMOSTATICS**

#### **HEMOSTATICS - SYSTEMIC**

<i>aminocaproic acid inj 250 mg/ml</i>	1	
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	2	
<i>aminocaproic acid tab 500 mg</i>	2	
<i>aminocaproic acid tab 1000 mg</i>	2	
CYKLOKAPRON INJ 100MG/ML	3	
LYSTEDA TAB 650MG	3	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	2	

#### **HEMOSTATICS - TOPICAL**

ARTISS SOL 2ML	3	
ARTISS SOL 4ML	3	
ARTISS SOL 10ML	3	
RECOTHROM SOL 5000UNIT	3	
RECOTHROM SOL 20000UNT	3	
TACHOSIL PAD 4.8X4.8	3	
TACHOSIL PAD 9.5X4.8	3	
THROMBIN KIT 5000UNIT	3	
THROMBIN-JMI KIT 5000UNIT	3	
THROMBIN-JMI KIT 20000UNT	3	
THROMBIN-JMI SOL 5000UNIT	3	
THROMBIN-JMI SOL 20000UNT	3	
THROMBOGEN KIT 10000UNT	3	
THROMBOGEN SOL 1000UNIT	3	
THROMBOGEN SOL 10000UNT	3	
TISSEEL KIT 2ML	3	
TISSEEL KIT 4ML	3	
TISSEEL KIT 10ML	3	
TISSEEL SOL 2ML	3	
TISSEEL SOL 4ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TISSEEL SOL 10ML	3	
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
<b>BARBITURATE HYPNOTICS</b>		
NEMBUTAL SOD INJ 50MG/ML	3	
<i>pentobarbital sodium inj 50 mg/ml</i>	1	
<i>phenobarbital elixir 20 mg/5ml</i>	1	PV
<i>phenobarbital sodium inj 65 mg/ml</i>	1	
<i>phenobarbital sodium inj 130 mg/ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	PV
<i>phenobarbital tab 16.2 mg</i>	1	PV
<i>phenobarbital tab 30 mg</i>	1	PV
<i>phenobarbital tab 32.4 mg</i>	1	PV
<i>phenobarbital tab 60 mg</i>	1	PV
<i>phenobarbital tab 64.8 mg</i>	1	PV
<i>phenobarbital tab 97.2 mg</i>	1	PV
<i>phenobarbital tab 100 mg</i>	1	PV
SEZABY INJ 100MG	3	
<b>HYPNOTICS - TRICYCLIC AGENTS</b>		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	2	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	2	
SILENOR TAB 3MG	NC	
SILENOR TAB 6MG	NC	
<b>NON-BARBITURATE HYPNOTICS</b>		
AMBIEN CR TAB 6.25MG	3	PA, QL
AMBIEN CR TAB 12.5MG	3	PA, QL
AMBIEN TAB 5MG	3	PA, QL
AMBIEN TAB 10MG	3	PA, QL
DEXMEDE/NACL INJ 20/5ML	3	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 80 mcg/20ml</i>	1	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	1	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i>	1	
<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i>	1	
DORAL TAB 15MG	3	PA, QL
EDLUAR SUB 5MG	NC	
EDLUAR SUB 10MG	NC	
<i>estazolam tab 1 mg</i>	1	PA, QL
<i>estazolam tab 2 mg</i>	1	PA, QL
<i>eszopiclone tab 1 mg</i>	1	PA, QL
<i>eszopiclone tab 2 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>eszopiclone tab 3 mg</i>	1	PA, QL
<i>flurazepam hcl cap 15 mg</i>	1	PA, QL
<i>flurazepam hcl cap 30 mg</i>	1	PA, QL
HALCION TAB 0.25MG	3	PA, QL
IGALMI MIS 120MCG	NC	
IGALMI MIS 180MCG	NC	
INTERMEZZO SUB 1.75MG	NC	
INTERMEZZO SUB 3.5MG	NC	
LUNESTA TAB 1MG	NC	
LUNESTA TAB 2MG	NC	
LUNESTA TAB 3MG	NC	
MIDAZOL/NAACL SOL 5MG/5ML	NC	
<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	1	
<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	2	
PRECEDEX INJ 80/20ML	3	
PRECEDEX INJ 100MCG	3	
PRECEDEX INJ 200/50ML	3	
PRECEDEX INJ 400/100	3	
PRECEDEX INJ 1000/250	3	
<i>quazepam tab 15 mg</i>	NC	
RESTORIL CAP 7.5MG	3	PA, QL
RESTORIL CAP 15MG	3	PA, QL
RESTORIL CAP 22.5MG	3	PA, QL
RESTORIL CAP 30MG	3	PA, QL
<i>temazepam cap 7.5 mg</i>	1	PA, QL
<i>temazepam cap 15 mg</i>	1	PA, QL
<i>temazepam cap 22.5 mg</i>	1	PA, QL
<i>temazepam cap 30 mg</i>	1	PA, QL
<i>triazolam tab 0.25 mg</i>	1	PA, QL
<i>triazolam tab 0.125 mg</i>	1	PA, QL
<i>zaleplon cap 5 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>zaleplon cap 10 mg</i>	1	PA, QL
<i>zolpidem tartrate sl tab 1.75 mg</i>	NC	
<i>zolpidem tartrate sl tab 3.5 mg</i>	NC	
<i>zolpidem tartrate tab 5 mg</i>	1	PA, QL
<i>zolpidem tartrate tab 10 mg</i>	1	PA, QL
<i>zolpidem tartrate tab er 6.25 mg</i>	1	PA, QL
<i>zolpidem tartrate tab er 12.5 mg</i>	1	PA, QL
ZOLPIMIST SPR 5MG	NC	

### **OREXIN RECEPTOR ANTAGONISTS**

BELSOMRA TAB 5MG	2	PA, QL
BELSOMRA TAB 10MG	2	PA, QL
BELSOMRA TAB 15MG	2	PA, QL
BELSOMRA TAB 20MG	2	PA, QL
DAYVIGO TAB 5MG	2	PA, QL
DAYVIGO TAB 10MG	2	PA, QL
QUVIVIQ TAB 25MG	2	PA, QL
QUVIVIQ TAB 50MG	2	PA, QL

### **SELECTIVE MELATONIN RECEPTOR AGONISTS**

HETLIOZ CAP 20MG	6	SP, PA, QL
HETLIOZ LQ SUS 4MG/ML	6	SP, PA, QL
<i>ramelteon tab 8 mg</i>	1	QL
ROZEREM TAB 8MG	NC	
<i>tasimelteon capsule 20 mg</i>	4	SP, PA, QL

## **LAXATIVES**

### **LAXATIVE COMBINATIONS**

<i>gavilyte-c sol</i>	2	PV
<i>gavilyte-g sol</i>	2	PV
GOLYTELY SOL	NC	
MOVIPREP SOL	NC	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	PV
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	PV
PEG-PREP KIT	0	ACA, PV
<i>peg/nasul/c/ sol nacl/pot</i>	NC	
PLENVU SOL	NC	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	0	ACA, PV
SUFLAVE SOL	NC	
SUPREP BOWEL SOL PREP KIT	NC	
SUTAB TAB	NC	

### **LAXATIVES - MISCELLANEOUS**

<i>constulose sol 10gm/15</i>	1	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KRISTALOSE PAK 10GM	3	
KRISTALOSE PAK 20GM	3	
LACTULOSE PAK 10GM	NC	
<i>lactulose solution 10 gm/15ml</i>	1	
<b>LUBRICANT LAXATIVES</b>		
<i>mineral oil</i>	1	
<b>SALINE LAXATIVES</b>		
OSMOPREP TAB 1.5GM	NC	
<b>LOCAL ANESTHETICS-PARENTERAL</b>		
<b>LOCAL ANESTHETIC COMBINATIONS</b>		
<i>articadent inj dental</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf)</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	1	
LIDO/TETRA INJ 0.4-0.2%	3	
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	1	
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 1.5% w/ epinephrine-1:200000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:200000</i>	1	
<i>marcaine/epi inj 0.5%</i>	1	
MARCAINE/EPI INJ 0.5%	3	
MARCAINE/EPI INJ 0.25%	3	
ORABLOC INJ	3	
<i>sensorcaine inj -mpf/epi</i>	1	
SENSORCAINE INJ -MPF/EPI	1	
SENSORCAINE INJ -MPF/EPI	3	
<i>sensorcaine/ inj epi 0.5%</i>	1	
<i>sensorcaine/ inj epi 0.25</i>	1	
XYLO-MPF/EPI INJ 1%	3	
XYLO-MPF/EPI INJ 1.5%	3	
XYLO-MPF/EPI INJ 2%	3	
XYLO/EPI 1%- INJ 1:100000	3	
XYLO/EPI INJ 0.5%	3	
XYLO/EPI INJ 2%	3	
<b>LOCAL ANESTHETICS - AMIDES</b>		
<i>bupivacaine hcl inj 0.5%</i>	1	
<i>bupivacaine hcl inj 0.25%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	1	
BUPIVACAINE INJ 0.5%	3	
BUPIVACAINE INJ 0.25%	3	
BUPIVACAINE INJ 0.125%	3	
BUPIVACAINE INJ 2.5MG/ML	3	
BUPIVACAINE INJ 5MG/ML	3	
<i>bupivacaine inj spinal</i>	1	
EXPAREL INJ 1.3%	3	
LIDOCAINE HC INJ 200/10ML	NC	
<i>lidocaine hcl local inj 0.5%</i>	1	
<i>lidocaine hcl local inj 1%</i>	1	
<i>lidocaine hcl local inj 2%</i>	2	
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 4%</i>	1	
LIDOCAINE INJ 1%	3	
LIDOCAINE INJ 2%	3	
MARCAINE INJ 0.5%	3	
MARCAINE INJ 0.25%	3	
MARCAINE INJ 0.75%	3	
MARCAINE INJ SPINAL	3	
NAROPIN INJ 2MG/ML	3	
NAROPIN INJ 5MG/ML	3	
NAROPIN INJ 7.5MG/ML	3	
NAROPIN INJ 10MG/ML	3	
<i>polocaine inj 1%</i>	1	
<i>polocaine inj 2%</i>	1	
<i>polocaine inj -mpf 1%</i>	1	
<i>polocaine inj -mpf 2%</i>	1	
<i>polocaine inj mpf 1.5%</i>	1	
POSIMIR SOL 660/5ML	NC	
<i>ropivacaine hcl inj 2 mg/ml</i>	1	
<i>ropivacaine hcl inj 5 mg/ml</i>	1	
<i>ropivacaine hcl inj 7.5 mg/ml</i>	1	
<i>ropivacaine hcl inj 10 mg/ml</i>	1	
ROPIVACAINE INJ 0.5%	NC	
ROPIVACAINE INJ 2MG/ML	3	
<i>sensorcaine inj 0.5%</i>	1	
<i>sensorcaine inj 0.25%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sensorcaine inj mpf0.25%</i>	1	
<i>sensorcaine inj mpf0.75%</i>	1	
<i>sensorcaine inj mpf 0.5%</i>	1	
XYLOCAINE INJ 0.5%	3	
XYLOCAINE INJ 1%	3	
XYLOCAINE INJ 2%	3	
XYLOCAINE INJ -MPF 1%	3	
XYLOCAINE INJ -MPF 2%	3	
XYLOCAINE INJ MPF 0.5%	3	
XYLOCAINE INJ MPF 1.5%	3	

### **LOCAL ANESTHETICS - ESTERS**

<i>chloroprocaine hcl preservative free (pf) inj 2%</i>	1	
<i>chloroprocaine hcl preservative free (pf) inj 3%</i>	1	
NESACAINE INJ 1%	3	
NESACAINE INJ 2%	3	
NESACAINE INJ -MPF 2%	3	
NESACAINE INJ -MPF 3%	3	

### **MACROLIDES**

#### **AZITHROMYCIN**

<i>azithromycin for susp 100 mg/5ml</i>	1	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin iv for soln 500 mg</i>	1	
<i>azithromycin powd pack for susp 1 gm</i>	2	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
ZITHROMAX INJ 500MG	3	
ZITHROMAX POW 1GM PAK	3	
ZITHROMAX SUS 100/5ML	3	
ZITHROMAX SUS 200/5ML	3	
ZITHROMAX TAB 250MG	3	
ZITHROMAX TAB 500MG	3	
ZITHROMAX TAB TRI-PAK	3	
ZITHROMAX TAB Z-PAK	3	

#### **CLARITHROMYCIN**

<i>clarithromycin for susp 125 mg/5ml</i>	2	
<i>clarithromycin for susp 250 mg/5ml</i>	2	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	2	

#### **ERYTHROMYCINS**

<i>e.e.s. 400 tab 400mg</i>	2	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
E.E.S. GRAN SUS 200/5ML	NC	
<i>ery-tab tab 250mg ec</i>	2	
<i>ery-tab tab 333mg ec</i>	2	
<i>ery-tab tab 500mg ec</i>	2	
ERYPED SUS 200/5ML	NC	
ERYPED SUS 400/5ML	NC	
<i>erythrocin inj 500mg</i>	1	
ERYTHROCIN INJ 500MG	3	
<i>erythrocin tab 250mg</i>	2	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate tab 400 mg</i>	2	
<i>erythromycin lactobionate for inj 500 mg</i>	1	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin tab delayed release 250 mg</i>	2	
<i>erythromycin tab delayed release 333 mg</i>	2	
<i>erythromycin tab delayed release 500 mg</i>	2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	

### **FIDAXOMICIN**

DIFICID SUS	2	
DIFICID TAB 200MG	2	

## **MEDICAL DEVICES AND SUPPLIES**

### **CONTRACEPTIVES**

AIMSCO MIS LUBRICAT	0	OTC; ACA
CAYA DPR	0	QL; ACA, PV
COLOR CONDOM MIS + LUBE	0	OTC; ACA
CONDOMS MIS	0	OTC; ACA
DUREX MIS REALFEEL	0	OTC; ACA
FANTASY LUBR MIS	0	OTC; ACA
FANTASY LUBR MIS COLORS	0	OTC; ACA
FANTASY LUBR MIS SPERMICI	0	OTC; ACA
FANTASY MIS LUBRICAT	0	OTC; ACA
FC2 FEMALE MIS CONDOM	0	OTC; ACA
FEMCAP MIS 22MM	0	ACA
FEMCAP MIS 26MM	0	ACA
FEMCAP MIS 30MM	0	ACA
KAMELEON LUB MIS COLORS	0	OTC; ACA
KAMELEON MIS TRI-COLR	0	OTC; ACA
KIMONO COLOR MIS	0	OTC; ACA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KIMONO MAXX MIS LG FLARE	0	OTC; ACA
KIMONO MICRO MIS THIN	0	OTC; ACA
KIMONO MICRO MIS THIN +	0	OTC; ACA
KIMONO MICRO MIS THIN PLS	0	OTC; ACA
KIMONO MIS LUBRICAT	0	OTC; ACA
KIMONO MIS SENSATIO	0	OTC; ACA
KIMONO PLUS MIS LUBRICAT	0	OTC; ACA
KIMONO PLUS MIS SPERMICI	0	OTC; ACA
KIMONO PS MIS LUBRICAT	0	OTC; ACA
KIMONO PS MIS PLUS	0	OTC; ACA
KIMONO SENSE MIS PLUS	0	OTC; ACA
KIMONO SPEC MIS	0	OTC; ACA
MAXX MIS LUBRICAT	0	OTC; ACA
MAXX PLUS MIS SPERMICI	0	OTC; ACA
NATURAL COND MIS + LUBE	0	OTC; ACA
OMNIFLEX DPR	0	ACA
REALITY MIS LUBRICAT	0	OTC; ACA
REALITY ULTR MIS TEXTURED	0	OTC; ACA
REALITY ULTR MIS THIN	0	OTC; ACA
TRUE COVER MIS CONDOM	0	OTC; ACA
TRUSTEX LUBR MIS ASSORTED	0	OTC; ACA
TRUSTEX LUBR MIS BANANA	0	OTC; ACA
TRUSTEX LUBR MIS CHOC	0	OTC; ACA
TRUSTEX LUBR MIS COLA	0	OTC; ACA
TRUSTEX LUBR MIS COLORS	0	OTC; ACA
TRUSTEX LUBR MIS EX LARGE	0	OTC; ACA
TRUSTEX LUBR MIS EX STR	0	OTC; ACA
TRUSTEX LUBR MIS GRAPE	0	OTC; ACA
TRUSTEX LUBR MIS MINT	0	OTC; ACA
TRUSTEX LUBR MIS RIB/STUD	0	OTC; ACA
TRUSTEX LUBR MIS SPERMICI	0	OTC; ACA
TRUSTEX LUBR MIS STRWBRY	0	OTC; ACA
TRUSTEX LUBR MIS VANILLA	0	OTC; ACA
TRUSTEX MIS BANANA	0	OTC; ACA
TRUSTEX MIS CHOCOLAT	0	OTC; ACA
TRUSTEX MIS FLAVORS	0	OTC; ACA
TRUSTEX MIS MINT	0	OTC; ACA
TRUSTEX MIS STRWBRY	0	OTC; ACA
TRUSTEX MIS VANILLA	0	OTC; ACA
TRUSTEX/RIA MIS LUBRICAT	0	OTC; ACA
TRUSTEX/RIA MIS NON-LUB	0	OTC; ACA
TRUSTEX/RIA MIS SPERMICI	0	OTC; ACA
TRUSTX NON-9 MIS RIB/STUD	0	OTC; ACA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
WIDE-SEAL DPR KIT 60	0	ACA
WIDE-SEAL DPR KIT 65	0	ACA
WIDE-SEAL DPR KIT 70	0	ACA
WIDE-SEAL DPR KIT 75	0	ACA
WIDE-SEAL DPR KIT 80	0	ACA
WIDE-SEAL DPR KIT 85	0	ACA
WIDE-SEAL DPR KIT 90	0	ACA
WIDE-SEAL DPR KIT 95	0	ACA

### **DIABETIC SUPPLIES**

ACTI-LANCE MIS 28G	3	OTC; PV
ACTI-LANCE MIS LITE 28G	3	OTC; PV
ACTI-LANCE MIS SPEC 17G	3	OTC; PV
ACTI-LANCE MIS UNIV 23G	3	OTC; PV
ADVCATE SAFE MIS LANC 26G	3	OTC; PV
ADVOCATE MIS LANC 30G	3	OTC; PV
ADVOCATE MIS LANCETS	3	OTC; PV
AGAMATRIX MIS 33G	3	OTC; PV
AQUALANCE MIS 30G	3	OTC; PV
ASSURE CMFRT MIS 28G	3	OTC; PV
ASSURE LANCE MIS 21G	3	OTC; PV
ASSURE LANCE MIS LOW FLOW	3	OTC; PV
ASSURE LANCE MIS MICRO	3	OTC; PV
ASSURE LANCE MIS SAFE 25G	3	OTC; PV
ASSURE LANCE MIS SAFE 30G	3	OTC; PV
AURORA LANCE MIS 30G	3	OTC; PV
AURORA LANCE MIS THIN 23G	3	OTC; PV
AUTO LANCET MIS	3	OTC; PV
AUTOLET PLAT MIS 1.8MM	3	OTC; PV
AUTOLET PLAT MIS 2.4MM	3	OTC; PV
AUTOLET PLAT MIS 3.0MM	3	OTC; PV
BD MICROTAIN MIS LANCETS	3	PV
BD MICROTAIN MIS LANCETS	3	OTC; PV
CAREONE LANC MIS 30G	3	OTC; PV
CAREONE LANC MIS THIN 23G	3	OTC; PV
CARESENS 30G MIS LANCETS	3	OTC; PV
CARETOUCH MIS TWIST 30	3	OTC; PV
CGMS CABLE MIS	NC	
CGMS MIS SOFTWARE	NC	
CHOSEN MIS 30G	NC	OTC
CHOSEN MIS SAFE 28G	NC	OTC
CLEANLET 28G MIS LANCETS	3	OTC; PV
CLEVER CHECK MIS	3	OTC; PV
CLEVER CHECK MIS 30G	3	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COAGUCHEK MIS LANCETS	3	OTC; PV
COMFORT ASSU MIS LANC 28G	3	OTC; PV
COMFORT ASSU MIS LANC 33G	3	OTC; PV
COMFORTOUCH MIS LANCET	3	OTC; PV
CVS LANCETS MIS 21G	3	OTC; PV
CVS LANCETS MIS 30G	3	OTC; PV
CVS LANCETS MIS 33G	3	OTC; PV
CVS LANCETS MIS ORIGINAL	3	OTC; PV
CVS LANCETS MIS THIN 26G	3	OTC; PV
CVS LANCETS MIS THIN 30G	3	OTC; PV
CVS LANCETS MIS THIN 33G	3	OTC; PV
DEXCOM G5 MIS RECEIVER	2	PA
DEXCOM G5 MIS TRANSMIT	2	PA
DEXCOM G6 MIS RECEIVER	2	PA
DEXCOM G6 MIS SENSOR	2	PA
DEXCOM G6 MIS TRANSMIT	2	PA
DEXCOM G7 MIS RECEIVER	2	PA
DEXCOM G7 MIS SENSOR	2	PA
DIATHRIVE MIS UT 30G	3	OTC; PV
DROPLET LANC MIS 30G	3	OTC; PV
E-Z JECT MIS 21G	3	OTC; PV
E-Z JECT MIS 21G COLR	3	OTC; PV
E-Z JECT MIS 30G	3	OTC; PV
E-Z JECT MIS 32G COLR	3	OTC; PV
E-Z JECT MIS LANC 21G	3	OTC; PV
E-Z JECT MIS THIN 26G	3	OTC; PV
E-ZJECT LANC MIS 33G	3	OTC; PV
EASY COMFORT MIS 30G	3	OTC; PV
EASY COMFORT MIS LANC/30G	3	OTC; PV
EASY TOUCH MIS LANC/21G	3	OTC; PV
EASY TOUCH MIS LANC/23G	3	OTC; PV
EASY TOUCH MIS LANC/26G	3	OTC; PV
EASY TOUCH MIS LANC/28G	3	OTC; PV
EASY TOUCH MIS LANC/30G	3	OTC; PV
EASY TOUCH MIS LANC/32G	3	OTC; PV
EASY TOUCH MIS LANC/33G	3	OTC; PV
EMBRACE LANC MIS 21G	3	OTC; PV
EMBRACE LANC MIS 28G	3	OTC; PV
EMBRACE LANC MIS THIN 30G	3	OTC; PV
ENLITE GLUCO MIS SENSOR	NC	
EQL LANCETS MIS 21G COLR	3	OTC; PV
EQL LANCETS MIS 33G COLR	3	OTC; PV
EQL LANCETS MIS THIN 26G	3	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EQL LANCETS MIS THIN 30G	3	OTC; PV
EVERSENSE MIS SENSOR	NC	
EVERSENSE MIS TRANSMTR	NC	
EZ-LETS 21G MIS LANCETS	3	OTC; PV
EZ-LETS 26G MIS LANCETS	3	OTC; PV
EZ-LETS 28G MIS LANCETS	3	OTC; PV
EZ-LETS 30G MIS LANCETS	3	OTC; PV
FASTCLIX MIS LANCETS	7	OTC; PV
FIFTY50 SAFE MIS LANCETS	3	OTC; PV
FINGERSTIX MIS LANCETS	3	OTC; PV
FORA LANCETS MIS 30G	3	OTC; PV
FORA MIS LANCETS	3	OTC; PV
FREESTY LIBR KIT 2 SENSOR	NC	
FREESTY LIBR KIT 3 SENSOR	NC	
FREESTY LIBR MIS 2 READER	NC	
FREESTY LIBR MIS 3 READER	NC	
FREESTYLE KIT SENSOR	NC	
FREESTYLE MIS LANCETS	3	OTC; PV
FREESTYLE MIS READER	NC	
G5/G4 MIS SENSOR	2	PA
GENTLE-LET MIS 26G	3	OTC; PV
GENTLE-LET MIS 28G	3	OTC; PV
GENTLE-LET MIS LANCETS	3	OTC; PV
GENTLE-LET MIS PLATFORM	3	OTC; PV
GLOBAL 28G MIS LANCETS	3	OTC; PV
GLOBAL 30G MIS LANCETS	3	OTC; PV
GLUCOCOM MIS 28G	3	OTC; PV
GLUCOCOM MIS 30G	3	OTC; PV
GLUCOCOM MIS 33G	3	OTC; PV
GNP LANCETS MIS 21G	3	OTC; PV
GNP LANCETS MIS 28G	3	OTC; PV
GNP LANCETS MIS 30G	3	OTC; PV
GNP LANCETS MIS 33G	3	OTC; PV
GNP LANCETS MIS THIN 26G	3	OTC; PV
GOODSENSE MIS LANC 30G	3	OTC; PV
GUARDIAN CON MIS TRANSMIT	NC	
GUARDIAN MIS LINK 3	NC	
GUARDIAN MIS SENSOR 3	NC	
GUARDIAN MIS TRANSMTR	NC	
GUARDIAN RT KIT	NC	
GUARDIAN RT KIT STARTER	NC	
GUARDIAN RT KIT SYST PED	NC	
GUARDIAN RT KIT SYSTEM	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GUARDIAN RT MIS CHARGER	NC	
GUARDIAN RT MIS REPL PED	NC	
GUARDIAN RT MIS REPLACE	NC	
GUARDIAN RT MIS SOFTWARE	NC	
GUARDIAN RT MIS TST PLUG	NC	
HAEMOLANCE MIS HIGH FLO	3	OTC; PV
HAEMOLANCE MIS LOW FLOW	3	OTC; PV
HAEMOLANCE MIS PLUS	3	OTC; PV
HAEMOLANCE MIS PLUS LOW	3	OTC; PV
HAEMOLANCE MIS PLUS MAX	3	OTC; PV
HAEMOLANCE MIS PLUS PED	3	OTC; PV
HAEMOLANCE MIS RETRACT	3	OTC; PV
IN TOUCH LAN MIS 30G	3	OTC; PV
INCONTROL MIS LANC 28G	3	OTC; PV
INCONTROL MIS LANC 30G	3	OTC; PV
INCONTROL MIS LANC 33G	3	OTC; PV
KINNEY MIS LANCETS	3	OTC; PV
KINNEY THIN MIS LANCETS	3	OTC; PV
KROGER LANCE MIS	3	OTC; PV
KROGER LANCE MIS 26G	3	OTC; PV
KROGER LANCE MIS THIN	3	OTC; PV
KROGER LANCE MIS THIN 30G	3	OTC; PV
LANCET CARRY MIS CASE	3	OTC; PV
LANCET MICRO MIS THIN 33G	3	OTC; PV
LANCET STAND MIS 21G	3	OTC; PV
LANCET SUPER MIS THIN 30G	3	OTC; PV
LANCET ULTRA MIS THIN 30G	3	OTC; PV
LANCETS MICR MIS THIN 33G	3	OTC; PV
LANCETS MIS	3	OTC; PV
LANCETS MIS 21G	3	OTC; PV
LANCETS MIS 21G COLR	3	OTC; PV
LANCETS MIS 26G	3	OTC; PV
LANCETS MIS 28G	3	OTC; PV
LANCETS MIS 30G	3	OTC; PV
LANCETS MIS 33G	3	OTC; PV
LANCETS MIS ORIGINAL	3	OTC; PV
LANCETS MIS THIN	3	OTC; PV
LANCETS MIS THIN 26G	3	OTC; PV
LANCETS MIS THIN 30G	3	OTC; PV
LANCETS SUPR MIS THIN 28G	3	OTC; PV
LANCETS THIN MIS	3	OTC; PV
LANCETS THIN MIS 26G	3	OTC; PV
LANCETS ULTR MIS THIN	3	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LITE TOUCH MIS LANCETS	3	OTC; PV
LITETOUCH MIS LANCETS	3	OTC; PV
LONGS LANCET MIS STANDARD	3	OTC; PV
LONGS LANCET MIS THIN	3	OTC; PV
LONGS LANCET MIS ULTRA TH	3	OTC; PV
MEDICHOICE MIS LANCET	3	OTC; PV
MEDLANCE MIS 30G PLUS	3	OTC; PV
MEDLANCE MIS PLUS 30G	3	OTC; PV
MEDLANCE PLS MIS 0.8MM	3	OTC; PV
MEDLANCE PLS MIS EXTR 21G	3	OTC; PV
MEDLANCE PLS MIS LITE 25G	3	OTC; PV
MEDLANCE PLS MIS UNIV 21G	3	OTC; PV
MEIJER LANCE MIS COLOR	3	OTC; PV
MEIJER LANCE MIS UNIV 21G	3	OTC; PV
MEIJER LANCE MIS UNIV 30G	3	OTC; PV
MEIJER LANCE MIS UNIVERSA	3	OTC; PV
MEIJER MIS LANCETS	3	OTC; PV
MICRO THIN MIS LANC 33G	3	OTC; PV
MICROLET MIS LANCETS	3	OTC; PV
MINILINK RT MIS TRANSMIT	NC	
MINIMED 630G MIS TRANSMIT	NC	
MONOLET MIS LANCETS	3	OTC; PV
MONOLET OPD MIS LANCETS	3	OTC; PV
MONOLETTOR MIS LANCETS	3	OTC; PV
MYGLUCOHEALT MIS LANC 30G	3	OTC; PV
NOVA SAFETY MIS LANC 23G	3	OTC; PV
NOVA SAFETY MIS LANC 28G	3	OTC; PV
NOVA SURE MIS LANCETS	3	OTC; PV
OMNIPOD 5 G6 KIT INTRO	2	PV
OMNIPOD 5 G6 MIS PODS	2	PV
OMNIPOD 5 G7 KIT INTRO	2	PV
OMNIPOD DASH MIS PODS	2	PV
OMNIPOD MIS CLASSIC	2	PV
OMNIPOD PDM KIT CLASSIC	2	PV
ON-THE-GO MIS LANC 30G	3	OTC; PV
ONETOUCH DEL MIS PLUS 30G	7	OTC; PV
ONETOUCH DEL MIS PLUS 33G	7	OTC; PV
ONETOUCH FP MIS LANCETS	7	OTC; PV
ONETOUCH MIS 30G	7	OTC; PV
ONETOUCH MIS LANCETS	7	OTC; PV
ONETOUCH US MIS LANCETS	7	OTC; PV
PARADIGM REA MIS TRANSMIT	NC	
PERFECT 28G MIS LANCETS	3	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PERFECT 30G MIS LANCETS	3	OTC; PV
PHARMACY COU MIS LANCETS	3	OTC; PV
PIP LANCETS MIS 30G	3	OTC; PV
PRO COMFORT MIS 31G	3	OTC; PV
PRO COMFORT MIS LANCETS	3	OTC; PV
PRODIGY MIS 26G	3	OTC; PV
PRODIGY MIS 28G	3	OTC; PV
PSS SAFE LAN MIS	3	OTC; PV
PSS SEL LANC MIS	3	OTC; PV
PSS SEL PLAT MIS	3	OTC; PV
PX LANCETS MIS 28G	3	OTC; PV
PX LANCETS MIS 33G	3	OTC; PV
QC LANCETS MIS 28G	3	OTC; PV
QC LANCETS MIS 30G	3	OTC; PV
RA E-ZJECT MIS 28G	3	OTC; PV
RA E-ZJECT MIS THIN 26G	3	OTC; PV
RA E-ZJECT MIS THIN 28G	3	OTC; PV
RA E-ZJECT MIS ULT THIN	3	OTC; PV
REAL-TIME KIT	NC	
RELION LANCE MIS THIN 26G	3	OTC; PV
RELION LANCE MIS THIN 30G	3	OTC; PV
RELION MICRO MIS THIN 33G	3	OTC; PV
RELION ULTRA MIS THIN PLS	3	OTC; PV
RIGHTEST ALT MIS ADAPTOR	3	OTC; PV
RIGHTEST MIS GL300	3	OTC; PV
SAFE-T-LANCE MIS 21G	3	OTC; PV
SAFE-T-LANCE MIS 25G	3	OTC; PV
SAFE-T-LANCE MIS HI FLOW	3	OTC; PV
SAFE-T-LANCE MIS LOW FLOW	3	OTC; PV
SAFE-T-LANCE MIS NOR FLOW	3	OTC; PV
SAFE-T-PRO MIS LANCETS	7	OTC; PV
SAFE-T-PRO MIS PLUS	7	OTC; PV
SAFETY 21G MIS LANCETS	3	OTC; PV
SAFETY 28G MIS LANCETS	3	OTC; PV
SAFETY MIS LANCETS	3	OTC; PV
SAPSCARE MIS TWIST	3	OTC; PV
SB LANCETS MIS THIN	3	OTC; PV
SB LANCETS MIS ULTR THN	3	OTC; PV
SINGLE-LET MIS 23G	3	OTC; PV
SM LANCETS MIS 33G	3	OTC; PV
SMART SENSE MIS LANC 21G	3	OTC; PV
SMART SENSE MIS LANC 26G	3	OTC; PV
SMART SENSE MIS LANC 30G	3	OTC; PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SMART SENSE MIS LANC 33G	3	OTC; PV
SMARTEST MIS LANCETS	3	OTC; PV
SOF-SENSOR MIS	NC	
SOFTCLIX MIS LANCETS	7	OTC; PV
SOLUS V2 MIS LANC 28G	3	OTC; PV
SOLUS V2 MIS LANC 30G	3	OTC; PV
STERILANCE MIS TL 28G	3	OTC; PV
STERILANCE MIS TL 30G	3	OTC; PV
STERILANCE MIS TL 32G	3	OTC; PV
SUPER THIN MIS LANC 28G	3	OTC; PV
SUPER THIN MIS LANCETS	3	OTC; PV
SURE COMFORT MIS LANCETS	3	OTC; PV
SUREFLEX MIS LANCETS	3	OTC; PV
SURELITE MIS LANCETS	3	OTC; PV
TECHLITE AST MIS LANCETS	3	OTC; PV
TECHLITE MIS LANC 26G	3	OTC; PV
TECHLITE MIS LANCETS	3	OTC; PV
TGT LANCET MIS 26G	3	OTC; PV
TGT LANCET MIS 30G	3	OTC; PV
TGT LANCET MIS 33G	3	OTC; PV
THIN LANCETS MIS 26G	3	OTC; PV
THIN LANCETS MIS 30G	3	OTC; PV
THINLETS GP MIS 26G	3	OTC; PV
TOPCARE MIS LANC 33G	3	OTC; PV
TRAVEL LANCE MIS ADV 28G	3	OTC; PV
TRUPLUS LANC MIS 26G	3	OTC; PV
TRUPLUS LANC MIS 28G	3	OTC; PV
TRUPLUS LANC MIS 30G	3	OTC; PV
TRUPLUS LANC MIS 33G	3	OTC; PV
ULTILET MIS 26G	3	OTC; PV
ULTILET MIS 28G	3	OTC; PV
ULTILET MIS 30G	3	OTC; PV
ULTILET MIS 33G	3	OTC; PV
ULTILET MIS LANCETS	3	OTC; PV
ULTILET MIS SAFETY	3	OTC; PV
ULTRA THIN MIS 28G	3	OTC; PV
ULTRA THIN MIS 30G	3	OTC; PV
ULTRA THIN MIS 31G	3	OTC; PV
ULTRA THIN MIS 33G	3	OTC; PV
ULTRA THIN MIS LANC 28G	3	OTC; PV
ULTRA THIN MIS LANC 30G	3	OTC; PV
ULTRA THIN MIS LANCETS	3	OTC; PV
UNILET EX II MIS 28G	3	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
UNILET EXCEL MIS 23G	3	OTC; PV
UNILET G.P MIS SUPR 23G	3	OTC; PV
UNILET G.P. MIS 21G	3	OTC; PV
UNILET GP 28 MIS ULT THIN	3	OTC; PV
UNILET LANC MIS 33G	3	OTC; PV
UNILET LANCE MIS 21G	3	OTC; PV
UNILET LANCE MIS 28G	3	OTC; PV
UNILET LANCE MIS 33G	3	OTC; PV
UNILET LANCT MIS 28G	3	OTC; PV
UNILET LANCT MIS 30G	3	OTC; PV
UNILET LANCT MIS 33G	3	OTC; PV
UNILET MIS 21G	3	OTC; PV
UNILET SUPER MIS 23G	3	OTC; PV
UNILET SUPER MIS G.P. 23G	3	OTC; PV
UNISTIK 1 MIS 2.4MM	3	OTC; PV
UNISTIK 1 MIS 3.0MM	3	OTC; PV
UNISTIK 2 MIS	3	OTC; PV
UNISTIK 2 MIS 1.8MM	3	OTC; PV
UNISTIK 2 MIS 2.4MM	3	OTC; PV
UNISTIK 2 MIS COMFORT	3	OTC; PV
UNISTIK 2 MIS EXTRA	3	OTC; PV
UNISTIK 2 MIS NEONATAL	3	OTC; PV
UNISTIK 2 MIS NORMAL	3	OTC; PV
UNISTIK 2 MIS SUPER	3	OTC; PV
UNISTIK 3 MIS 1.8MM	3	OTC; PV
UNISTIK 3 MIS COMFORT	3	OTC; PV
UNISTIK 3 MIS EXTRA	3	OTC; PV
UNISTIK 3 MIS GENT 30G	3	OTC; PV
UNISTIK 3 MIS NEONATAL	3	OTC; PV
UNISTIK 3 MIS NORMAL	3	OTC; PV
UNISTIK 23G MIS NORMAL	3	OTC; PV
UNISTIK CZT MIS COMFORT	3	OTC; PV
UNISTIK CZT MIS NORMAL	3	OTC; PV
UNISTIK SAFE MIS LANC 28G	3	OTC; PV
UNISTIK SAFE MIS LANC 30G	3	OTC; PV
UNISTIK TOUC MIS LANC 21G	3	OTC; PV
UNISTIK TOUC MIS LANC 23G	3	OTC; PV
UNISTIK TOUC MIS LANC 28G	3	OTC; PV
UNISTIK TOUC MIS LANC 30G	3	OTC; PV
UNIVERSAL 1 MIS 33G	3	OTC; PV
UNIVERSAL 1 MIS LANC 26G	3	OTC; PV
UNIVERSAL 1 MIS LANC 30G	3	OTC; PV
V-GO 20 KIT	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
V-GO 30 KIT	2	PV
V-GO 40 KIT	2	PV
VERIFINE LAN MIS MINI 21G	3	OTC; PV
VERIFINE LAN MIS MINI 23G	3	OTC; PV
VERIFINE LAN MIS MINI 28G	3	OTC; PV
VERIFINE LAN MIS MINI 30G	3	OTC; PV

### **PARENTERAL THERAPY SUPPLIES**

AUTOSHIELD MIS 30GX5MM	7	OTC; PV
BD PEN NEEDL MIS 29GX12.7	7	OTC; PV
BD PEN NEEDL MIS 31GX5MM	7	OTC; PV
BD PEN NEEDL MIS 31GX8MM	7	OTC; PV
BD PEN NEEDL MIS 32GX4MM	7	OTC; PV
BD PEN NEEDL MIS 32GX6MM	7	OTC; PV
BD U-500 MIS 31GX6MM	7	PV
INSULIN SYRG MIS 0.3/29G	7	OTC; PV
INSULIN SYRG MIS 0.3/30G	7	OTC; PV
INSULIN SYRG MIS 0.3/31G	7	PV
INSULIN SYRG MIS 0.3/31G	7	OTC; PV
INSULIN SYRG MIS 0.5/28G	7	OTC; PV
INSULIN SYRG MIS 0.5/29G	7	OTC; PV
INSULIN SYRG MIS 0.5/30G	7	OTC; PV
INSULIN SYRG MIS 0.5/31G	7	OTC; PV
INSULIN SYRG MIS 1ML	7	OTC; PV
INSULIN SYRG MIS 1ML/27G	7	OTC; PV
INSULIN SYRG MIS 1ML/28G	7	OTC; PV
INSULIN SYRG MIS 1ML/29G	7	OTC; PV
INSULIN SYRG MIS 1ML/30G	7	OTC; PV
INSULIN SYRG MIS 1ML/31G	7	OTC; PV
INSULIN SYRG MIS 2/27.5G	7	OTC; PV
LUER-LOK SYR MIS 1ML/20G	7	OTC; PV
UNIFINE SAFE MIS 31GX5MM	NC	OTC
UNIFINE SAFE MIS 31GX6MM	NC	OTC
UNIFINE SAFE MIS 31GX8MM	NC	OTC

### **MIGRAINE PRODUCTS**

#### **CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG**

AIMOVIG INJ 70MG/ML	NC	
AIMOVIG INJ 140MG/ML	NC	
AJOVY INJ 225/1.5	2	ST, PA, QL; (autoinjector)
AJOVY INJ 225/1.5	2	ST, PA, QL; (prefilled syringe)
EMGALITY INJ 100MG/ML	2	ST, PA, QL
EMGALITY INJ 120MG/ML	2	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMGALITY INJ 120MG/ML	2	ST, PA, QL; (prefilled syringe)
NURTEC TAB 75MG ODT	2	ST, PA, QL
QULIPTA TAB 10MG	2	ST, PA, QL
QULIPTA TAB 30MG	2	ST, PA, QL
QULIPTA TAB 60MG	2	ST, PA, QL
UBRELVY TAB 50MG	2	ST, PA, QL
UBRELVY TAB 100MG	2	ST, PA, QL
VYEPTI INJ 100MG/ML	NC	
<b>MIGRAINE COMBINATIONS</b>		
CAFERGOT TAB 1-100MG	NC	
<i>ergotamine w/ caffeine tab 1-100 mg</i>	NC	
<i>migergot sup 2/100</i>	NC	
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	NC	
TREXIMET TAB 10-60MG	NC	
TREXIMET TAB 85-500MG	NC	
<b>MIGRAINE PRODUCTS</b>		
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	NC	
ERGOMAR SUB 2MG	3	
MIGRANAL SPR 4MG/ML	3	QL
TRUDHESA AER 0.725MG	3	QL
<b>MIGRAINE PRODUCTS - NSAIDS</b>		
CAMBIA POW 50MG	NC	
<i>diclofenac potassium (migraine) packet 50 mg</i>	NC	
<b>SEROTONIN AGONISTS</b>		
<i>almotriptan malate tab 6.25 mg</i>	2	PA, QL
<i>almotriptan malate tab 12.5 mg</i>	2	PA, QL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	PA, QL
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	PA, QL
FROVA TAB 2.5MG	3	ST, PA, QL
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	2	PA, QL
IMITREX INJ 4MG/0.5	3	PA, QL
IMITREX INJ 6MG/0.5	3	PA, QL
IMITREX TAB 25MG	3	PA, QL
IMITREX TAB 50MG	3	PA, QL
IMITREX TAB 100MG	3	PA, QL
MAXALT TAB 10MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAXALT-MLT TAB 10MG	NC	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	PA, QL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	PA, QL
ONZETRA XSAI MIS 11MG	2	PA, QL
RELPAK TAB 20MG	3	PA, QL
RELPAK TAB 40MG	3	PA, QL
REYVOW TAB 50MG	3	ST, PA, QL
REYVOW TAB 100MG	3	ST, PA, QL
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	PA, QL
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	PA, QL
<i>sumatriptan nasal spray 5 mg/act</i>	2	PA, QL
<i>sumatriptan nasal spray 20 mg/act</i>	2	PA, QL
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	PA, QL
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate tab 25 mg</i>	1	PA, QL
<i>sumatriptan succinate tab 50 mg</i>	1	PA, QL
<i>sumatriptan succinate tab 100 mg</i>	1	PA, QL
TOSYMRA SOL 10MG	NC	
ZEMBRACE SYM INJ 3/0.5ML	2	PA, QL
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	2	PA, QL
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	2	PA, QL
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	PA, QL
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	PA, QL
<i>zolmitriptan tab 2.5 mg</i>	1	PA, QL
<i>zolmitriptan tab 5 mg</i>	1	PA, QL
ZOMIG SPR 5MG	3	PA, QL
ZOMIG TAB 2.5MG	3	PA, QL
ZOMIG TAB 5MG	3	PA, QL

## **MINERALS & ELECTROLYTES**

### **BICARBONATES**

SOD ACETATE INJ 2MEQ/ML	3	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SOD BICARB INJ 8.4%	3	
SOD BICARB SOL D5W	NC	
<i>sodium acetate inj 2 meq/ml</i>	1	
<i>sodium acetate inj 4 meq/ml</i>	1	
<i>sodium bicarbonate iv soln 4.2%</i>	1	
<i>sodium bicarbonate iv soln 7.5%</i>	1	
<i>sodium bicarbonate iv soln 8.4%</i>	1	
THAM INJ 30MEQ	3	
<b>CALCIUM</b>		
CALCIFOL WAF	3	
CALCIUM CHLO INJ 10%	3	
<i>calcium chloride inj 10%</i>	1	
CALCIUM GLUC INJ 10%	3	
<i>calcium gluconate inj 10%</i>	1	
<b>ELECTROLYTE MIXTURES</b>		
D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.3%	3	
D10W/NACL INJ 0.2%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% in lactated ringers</i>	1	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.33%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	1	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	1	
DW5-NACL INJ 0.225%	3	
ELLIOTTS B INJ	3	
IONOSOL-MB INJ D5W	3	
ISOLYTE-P INJ /D5W	3	
ISOLYTE-S INJ	3	
ISOLYTE-S INJ PH 7.4	3	
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1	
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NAACL INJ 0.3/0.9%	3	
KCL/D5W/NAACL INJ 0.15/0.2	3	
<i>lactated ringer's solution</i>	1	
NORMOSOL -M INJ /D5W	3	
NORMOSOL -R INJ	3	
NORMOSOL-R INJ PH 7.4	3	
NORMOSOL-R SOL /5% DSW	3	
PLASMA-LYTE INJ -148	3	
PLASMA-LYTE INJ -A	3	
POT CHL/NAACL INJ 20MEQ/L	3	
POT CHL/NAACL INJ 40MEQ/L	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	1	
<i>ringer's solution</i>	1	
TPN ELECTROL INJ	3	
<b>FLUORIDE</b>		
FLORIVA DRO 0.25MG	3	PV
<i>fluoritab dro 0.125mg</i>	0	ACA, PV
<i>nafrinse chw 1mg f</i>	1	PV
<i>nafrinse dro 0.125mg</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	ACA, PV
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	PV
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	0	ACA, PV
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	PV
<b>IODINE PRODUCTS</b>		
<i>iodine solution strong 5% (lugol's)</i>	1	
<b>MAGNESIUM</b>		
MAGNESIUM SU INJ 2GM/50ML	3	
MAGNESIUM SU INJ 4G/100ML	3	
MAGNESIUM SU INJ 20/500ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAGNESIUM SU INJ 40G/1000	3	
MAGNESIUM SU INJ 80MG/ML	3	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	1	
<i>magnesium sulfate inj 50%</i>	1	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	1	
MG SO4/D5W INJ 10MG/ML	3	
<b>MANGANESE</b>		
<i>manganese chloride inj 0.1 mg/ml</i>	1	
<b>PHOSPHATE</b>		
GLYCOPHOS SOL 1MM/ML	3	
K-PHOS TAB	3	
K-PHOS TAB NEUTRAL	3	
<i>phospha 250 tab neutral</i>	1	
<i>phospho-trin tab 250 neut</i>	1	
<i>phospho-trin tab k500</i>	1	
<i>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg</i>	1	
POTASSIUM INJ PHOSPHAT	3	
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	1	
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	1	
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	1	
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i>	3	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	1	
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i>	3	
<i>wes-phos 250 tab neutral</i>	1	
<b>POTASSIUM</b>		
EFFER-K TAB 10MEQ	3	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EFFER-K TAB 20MEQ	3	
<i>effer-k tab 25meq ef</i>	1	
<i>k-prime tab 25meq ef</i>	1	
K-TAB TAB 20MEQ	3	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<i>klor-con pak 20meq</i>	2	
<i>klor-con/ef tab 25meq fr</i>	1	
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
<i>potassium acetate inj 2 meq/ml</i>	1	
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride inj 2 meq/ml</i>	1	
<i>potassium chloride inj 10 meq/50ml</i>	1	
<i>potassium chloride inj 10 meq/100ml</i>	1	
<i>potassium chloride inj 20 meq/50ml</i>	1	
<i>potassium chloride inj 20 meq/100ml</i>	1	
<i>potassium chloride inj 40 meq/100ml</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	2	
<i>potassium chloride powder packet 20 meq</i>	2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
POTASSIUM INJ 100MEQ	3	
<b>SODIUM</b>		
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	
<i>sodium chloride iv soln 0.9%</i>	1	
<i>sodium chloride iv soln 0.45%</i>	1	
<i>sodium chloride iv soln 3%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
sodium chloride iv soln 4 meq/ml (23.4%)	1	
sodium chloride iv soln 5%	1	
sodium chloride preservative free (pf) inj 0.9%	1	
<b>TRACE MINERALS</b>		
chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)	1	
COPPER INJ 0.4MG/ML	3	
cupric chloride inj 0.4 mg/ml (elemental)	1	
MULTRYS INJ	3	
SELENIOS AC SOL 12MCG/2M	3	
<b>ZINC</b>		
GALZIN CAP 25MG	3	
GALZIN CAP 50MG	3	
WILZIN CAP 25MG	3	
ZINC CHLORID INJ 1MG/ML	1	
ZINC SULFATE INJ 1MG/ML	3	
zinc sulfate inj 3 mg/ml	1	
ZINC SULFATE INJ 3MG/ML	3	
zinc sulfate inj 5 mg/ml	1	
ZINC SULFATE INJ 5MG/ML	3	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<b>CHELATING AGENTS</b>		
CUPRIMINE CAP 250MG	NC	
CUVRIOR TAB 300MG	NC	
DEPEN TITRA TAB 250MG	6	SP
EDETATE DISO INJ 150MG/ML	3	
penicillamine cap 250 mg	4	SP
penicillamine tab 250 mg	4	SP
SYPRINE CAP 250MG	NC	
trientine hcl cap 250 mg	4	SP
<b>CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS</b>		
PRISMASOL SOL 0/0/1.2	3	
PRISMASOL SOL 0/2.5	3	
PRISMASOL SOL 2/0	3	
PRISMASOL SOL 2/3.5	3	
PRISMASOL SOL 4/0/1.2	3	
PRISMASOL SOL 4/2.5	3	
PRISMASOL SOL B22GK4/0	3	
TRISOD CITRA SOL 0.5%CRRT	3	
<b>ENZYMES</b>		
HYLENEX INJ 150 UNIT	3	
XIAFLEX INJ 0.9MG	3	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>IMMUNOMODULATORS</b>		
JOENJA TAB 70MG	NC	
<i>lenalidomide cap 5 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 10 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 15 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 20 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 25 mg</i>	4	SP, PA, QL
<i>lenalidomide caps 2.5 mg</i>	4	SP, PA, QL
REVLIMID CAP 2.5MG	5	SP, PA, QL
REVLIMID CAP 5MG	5	SP, PA, QL
REVLIMID CAP 10MG	5	SP, PA, QL
REVLIMID CAP 15MG	5	SP, PA, QL
REVLIMID CAP 20MG	5	SP, PA, QL
REVLIMID CAP 25MG	5	SP, PA, QL
REZUROCK TAB 200MG	NC	
THALOMID CAP 50MG	5	SP, PA, QL
THALOMID CAP 100MG	5	SP, PA, QL
THALOMID CAP 150MG	5	SP, PA, QL
THALOMID CAP 200MG	5	SP, PA, QL
VYVGART INJ 400/20ML	NC	
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
ASTAGRAF XL CAP 0.5MG	3	SP; PV
ASTAGRAF XL CAP 1MG	3	SP; PV
ASTAGRAF XL CAP 5MG	3	SP; PV
ATGAM INJ 250MG	2	
<i>azasan tab 75 mg</i>	2	
<i>azasan tab 100mg</i>	2	
AZATHIOPRINE INJ 100MG	NC	
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	2	
<i>azathioprine tab 100 mg</i>	2	
CELLCEPT CAP 250MG	3	SP; PV
CELLCEPT IV INJ 500MG	3	SP; PV
CELLCEPT SUS 200MG/ML	3	SP; PV
CELLCEPT TAB 500MG	3	SP; PV
<i>cyclosporine cap 25 mg</i>	1	SP; PV
<i>cyclosporine cap 100 mg</i>	1	SP; PV
<i>cyclosporine iv soln 50 mg/ml</i>	1	SP; PV
<i>cyclosporine modified cap 25 mg</i>	1	SP; PV
<i>cyclosporine modified cap 50 mg</i>	1	SP; PV
<i>cyclosporine modified cap 100 mg</i>	1	SP; PV
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	SP; PV
ENSPRYNG INJ	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ENVARUSUS XR TAB 0.75MG	3	SP; PV
ENVARUSUS XR TAB 1MG	3	SP; PV
ENVARUSUS XR TAB 4MG	3	SP; PV
<i>everolimus tab 0.5 mg</i>	1	SP; PV
<i>everolimus tab 0.25 mg</i>	1	SP; PV
<i>everolimus tab 0.75 mg</i>	1	SP; PV
<i>everolimus tab 1 mg</i>	1	SP; PV
<i>gengraf cap 25mg</i>	1	SP; PV
<i>gengraf cap 100mg</i>	1	SP; PV
<i>gengraf sol 100mg/ml</i>	1	SP; PV
IMURAN TAB 50MG	3	
<i>mycophenolate mofetil cap 250 mg</i>	1	SP; PV
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	SP; PV
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	1	SP; PV
<i>mycophenolate mofetil tab 500 mg</i>	1	SP; PV
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	SP; PV
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	SP; PV
MYFORTIC TAB 180MG	3	SP; PV
MYFORTIC TAB 360MG	3	SP; PV
NEORAL CAP 25MG	2	SP; PV
NEORAL CAP 100MG	2	SP; PV
NEORAL SOL 100MG/ML	2	SP; PV
NULOJIX INJ 250MG	2	SP; PV
PROGRAF CAP 0.5MG	3	SP; PV
PROGRAF CAP 1MG	3	SP; PV
PROGRAF CAP 5MG	3	SP; PV
PROGRAF GRA 0.2MG	3	SP; PV
PROGRAF GRA 1MG	3	SP; PV
PROGRAF INJ 5MG/ML	3	SP; PV
RAPAMUNE SOL 1MG/ML	3	SP; PV
RAPAMUNE TAB 0.5MG	3	SP; PV
RAPAMUNE TAB 1MG	3	SP; PV
RAPAMUNE TAB 2MG	3	SP; PV
SANDIMMUNE CAP 25MG	2	SP; PV
SANDIMMUNE CAP 100MG	2	SP; PV
SANDIMMUNE INJ 50MG/ML	2	SP; PV
SANDIMMUNE SOL 100MG/ML	2	SP; PV
SIMULECT INJ 10MG	2	
SIMULECT INJ 20MG	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	SP; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sirolimus tab 0.5 mg</i>	1	SP; PV
<i>sirolimus tab 1 mg</i>	1	SP; PV
<i>sirolimus tab 2 mg</i>	1	SP; PV
<i>tacrolimus cap 0.5 mg</i>	1	SP; PV
<i>tacrolimus cap 1 mg</i>	1	SP; PV
<i>tacrolimus cap 5 mg</i>	1	SP; PV
THYMOGLOBULN INJ 25MG	2	
UPLIZNA SOL 100MG	NC	
ZORTRESS TAB 0.5MG	3	SP; PV
ZORTRESS TAB 0.25MG	3	SP; PV
ZORTRESS TAB 0.75MG	3	SP; PV
ZORTRESS TAB 1MG	3	SP; PV
<b>IRRIGATION SOLUTIONS</b>		
<i>argyl saline sol 100ml</i>	1	
<i>lactated ringer's for irrigation</i>	1	
<i>physiolyte sol</i>	1	
<i>physiosol sol irrigat</i>	1	
<i>ringer's solution for irrigation</i>	1	
<i>tis-u-sol sol</i>	1	
<i>water for irrigation, sterile irrigation soln</i>	1	
<b>LYMPHATIC AGENTS</b>		
SYLVANT SOL 100MG	3	SP, PA
SYLVANT SOL 400MG	3	SP, PA
<b>MISC NATURAL PRODUCTS</b>		
IMUBOLIC CAP	NC	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
NEXAVIR INJ	3	
<b>PATIENT ASSESSMENT SERVICES</b>		
EUA PATIENT MIS ASSESS	3	
<b>PERITONEAL DIALYSIS SOLUTIONS</b>		
DELFLX-LC SOL 1.5% DEX	3	
DELFLX-LC/ SOL 2.5% DEX	3	
DELFLX-LC/ SOL 4.25 DEX	3	
DELFLX-SM/ SOL 1.5% DEX	3	
DELFLX-SM/ SOL 2.5% DEX	3	
DIANEAL LOW SOL CALCIUM	3	
DIANEAL PD-2 SOL 1.5% DEX	3	
DIANEAL PD-2 SOL 2.5% DEX	3	
DIANEAL PD-2 SOL 4.25%DEX	3	
DIANEAL SOL LOW CALC	3	
EXTRANEAL SOL	3	
ULTRABAG/ SOL DIANEAL	3	

Drug Name	Drug Tier	Requirements/Limits
ULTRABAG/PD2 SOL DIANEAL	3	
<b>PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS</b>		
VIJOICE TAB 50MG	NC	
VIJOICE TAB 125MG	NC	
VIJOICE TAB 250MG	NC	
<b>POTASSIUM REMOVING AGENTS</b>		
KIONEX SUS 15GM/60	NC	
LOKELMA PAK 5GM	NC	
LOKELMA PAK 10GM	NC	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sps sus 15gm/60</i>	2	
VELTASSA POW 8.4GM	2	
VELTASSA POW 16.8GM	2	
VELTASSA POW 25.2GM	2	
<b>PROGERIA TREATMENT AGENTS</b>		
ZOKINVY CAP 50MG	6	SP, PA, QL
ZOKINVY CAP 75MG	6	SP, PA, QL
<b>PROSTAGLANDINS</b>		
<i>alprostadil inj 500 mcg/ml</i>	1	
PROSTIN VR INJ 500MCG	3	
<b>SCLEROSING AGENTS</b>		
ASCLERA INJ 0.5%	3	
ASCLERA INJ 1%	3	
ETHAMOLIN INJ 5%	3	
<i>sodium tetradecyl sulfate inj 3%</i>	1	
<i>sotradecol inj 1%</i>	1	
<i>sotradecol inj 3%</i>	1	
VARITHENA AER 10MG/ML	6	SP
<b>SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS</b>		
BENLYSTA INJ 120MG	6	SP, PA, QL
BENLYSTA INJ 200MG/ML	6	SP, PA, QL
BENLYSTA INJ 400MG	6	SP, PA, QL
<b>UREMIC PRURITUS AGENTS</b>		
KORSUVA INJ 50MCG/ML	NC	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<b>ANESTHETICS TOPICAL ORAL</b>		
<i>lidocaine hcl laryngotracheal soln 4%</i>	2	
<i>lidocaine hcl viscous soln 2%</i>	1	
<b>ANTI-INFECTIVES - THROAT</b>		
<i>clotrimazole troche 10 mg</i>	1	
NYSTATIN SUS 100000	3	
<i>nystatin susp 100000 unit/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ORAVIG TAB 50MG	3	
<b>ANTISEPTICS - MOUTH/THROAT</b>		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
PERIDEX SOL 0.12%	3	
<i>periogard sol 0.12%</i>	1	
<b>PERIODONTAL PRODUCTS</b>		
ARESTIN MIS 1MG	3	
<b>STEROIDS - MOUTH/THROAT/DENTAL</b>		
<i>kourzeq pst 0.1%</i>	1	
<i>oralone dent pst 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
<b>THROAT PRODUCTS - MISC.</b>		
AQUORAL SPR	3	
BOCASAL POW	3	
<i>cevimeline hcl cap 30 mg</i>	1	
EPISIL LIQ	2	
EVOXAC CAP 30MG	3	
GELX GEL	3	PA
MUCOTROL WAF	3	PA
MUGARD LIQ	5	SP, PA
NEUTRASAL POW	NC	
NUMOISYN LIQ	3	
NUMOISYN LOZ	3	
ORAFATE PST 10%	3	PA
ORAMAGICRX SUS	3	PA
ORAPEUTIC GEL	3	PA
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
PROTHELIAL PST 10%	3	PA
SALAGEN TAB 5MG	2	
SALAGEN TAB 7.5MG	2	
SALIVAMAX POW	NC	
SILATRIX GEL 10%	3	PA
<b>MULTIVITAMINS</b>		
<b>B-COMPLEX W/ FOLIC ACID</b>		
FOLIC-K CAP	NC	
NEPHRO-VITE TAB RX	NC	
<b>MULTIPLE VITAMINS W/ MINERALS</b>		
BACMIN TAB	NC	
DAYAVITE TAB	NC	
DERMACINRX TAB RIBOT-E	NC	
DEXATRAN CAP	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIALYVITE TAB SUPREM D	NC	
FOLAMED DHA CAP	NC	
FOLITIN-Z TAB	NC	
HYLAZINC TAB	NC	
KEYFOLIC TAB	NC	
<i>multipro cap</i>	1	
NUTRICAP TAB	NC	
OCUVEL CAP 0.5MG	NC	
ONEVITE TAB	NC	
REQ 49+ TAB	NC	
SIDEROL TAB	NC	
STROVITE FOR TAB	NC	
STROVITE ONE TAB	NC	
THRIVITE 19 TAB	NC	
UDAMIN SP TAB	NC	
VENEXA FE TAB	NC	
VENEXA TAB	NC	
VENTRIXYL FE TAB	NC	
VENTRIXYL TAB	NC	
VITAROCA PLU TAB	NC	
VITRAMYN TAB	NC	
VITRANOL FE TAB	NC	
VITRANOL TAB	NC	
VITREXYL TAB	NC	
VITREXYL TAB IRON	NC	
ZINTREXYL-C TAB	NC	
<b>MULTIPLE VITAMINS W/ MINERALS &amp; FLUORIDE-IRON-FOLIC ACID</b>		
QUFLORA FE CHW	NC	
<b>MULTIVITAMINS</b>		
VITLIPID N INJ ADULT	3	
<b>PED MULTI VITAMINS W/FL &amp; FE</b>		
<i>multi-vit/fl dro /fe 0.25</i>	1	PV
POLY-VI-FLOR CHW W/IRON	NC	
POLY-VI-FLOR SUS /IRON	NC	OTC
<b>PED MV W/ FLUORIDE</b>		
FLORIVA DRO PLUS	NC	
<i>multi vit/fl chw 0.25mg</i>	1	
<i>multi-vit/fl dro 0.5mg/ml</i>	1	PV
<i>multivit/fl chw 0.5mg</i>	1	PV
<i>multivit/fl chw 0.25mg</i>	1	PV
<i>multivit/fl chw 1mg</i>	1	PV
<i>multivit/fl dro 0.25mg</i>	1	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pediatric vitamins acd w/ fluoride soln 0.5 mg/ml</i>	1	PV
POLY-VI-FLOR CHW 0.5MG	NC	
POLY-VI-FLOR CHW 0.25MG	NC	
POLY-VI-FLOR CHW 1MG	NC	
POLY-VI-FLOR MIS FS 0.5MG	NC	
POLY-VI-FLOR MIS FS 0.25	NC	
POLY-VI-FLOR SUS 0.25/ML	NC	
QUFLORA CHW	NC	
QUFLORA PED DRO 0.5MG/ML	NC	
QUFLORA PED DRO 0.25MG	NC	
TRI-VI-FLOR SUS 0.5MG/ML	NC	
TRI-VI-FLOR SUS 0.25/ML	NC	
TRI-VI-FLORO SUS 0.5MG/ML	NC	
TRI-VI-FLORO SUS 0.25/ML	NC	
<i>tri-vit/fluo dro 0.5mg</i>	1	PV
<i>tri-vit/fluo dro 0.25mg</i>	1	PV
<i>vit a/c/d/fl dro 0.25mg</i>	1	PV
<b>PEDIATRIC MULTIPLE VITAMINS</b>		
VITLIPID N INJ INFANT	3	
<b>PEDIATRIC MULTIPLE VITAMINS &amp; MINERALS W/ FLUORIDE</b>		
FLORIVA CHW 0.5MG	NC	
FLORIVA CHW 0.25MG	NC	
FLORIVA CHW 1MG	NC	
TEXAVITE LQ LIQ	NC	
<b>PRENATAL VITAMINS</b>		
ATABEX EC TAB	NC	
C-NATE DHA CAP 28-1-200	NC	
CITRANATAL CAP HARMONY	NC	
CITRANATAL CAP MEDLEY	NC	
CITRANATAL MIS 90 DHA	NC	
CITRANATAL MIS B-CALM	NC	
CITRANATAL PAK ASSURE	NC	
CITRANATAL PAK DHA	NC	
CITRANATAL PAK ESSENCE	NC	
CITRANATAL TAB BLOOM	NC	
CITRANATAL TAB RX	NC	
CO-NATAL FA TAB 29-1MG	NC	
COMPLETE NAT PAK DHA	NC	
COMPLETENATE CHW	NC	
CONCEPT DHA CAP	NC	
CONCEPT OB CAP	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DUET DHA 400 MIS 25-1-400	NC	
DUET DHA MIS BALANCED	NC	
<i>elite-ob tab</i>	1	PV
ENBRACE HR CAP	NC	
FOLET DHA PAK	NC	
FOLET ONE CAP 38-1-225	NC	
FOLIVANE-OB CAP	NC	
<i>inatal gt tab</i>	1	PV
KOSHR PRENAT TAB 30-1MG	NC	
MARNATAL-F CAP	NC	
MYNATAL CAP	NC	
MYNATAL PLUS TAB	NC	
MYNATAL-Z TAB	NC	
NATACHEW CHW	NC	
NATALVIT TAB 75-1MG	NC	
NEEVO DHA CAP 27-1.13	NC	
NEONATAL TAB COMPLETE	NC	
NESTABS DHA PAK	NC	
NESTABS ONE CAP	NC	
NESTABS TAB	NC	
O-CAL TAB PRENATAL	NC	
OB COMPLETE CAP ONE	NC	
OB COMPLETE CAP PETITE	NC	
OB COMPLETE TAB	NC	
OB COMPLETE TAB PREMIER	NC	
OB COMPLETE/ CAP DHA	NC	
OBSTETRIX EC TAB	NC	
OBSTETRIX EC TAB	NC	OTC
OBSTETRIX MIS DHA	NC	OTC
PNV FOLIC AC TAB + IRON	NC	
PNV PRENATAL TAB PLUS	NC	
PNV TABS TAB 29-1MG	NC	
<i>pnv-dha cap</i>	1	PV
PNV-DHA CAP DOCUSATE	NC	
PNV-OMEGA CAP	NC	
<i>pnv-select tab</i>	1	PV
PREMESISRX TAB	NC	
PRENA1 CHW	NC	
PRENA1 PEARL CAP	NC	
PRENA 1 TRUE MIS	NC	
PRENAISSANCE CAP	NC	
PRENAISSANCE CAP PLUS	NC	
<i>prenatabs rx tab</i>	1	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PRENATAL 19 CHW 29-1MG	NC	
<i>prenatal 19 chw tab</i>	1	PV
PRENATAL 19 TAB 29-1MG	NC	
PRENATAL DHA PAK 27-1-250	NC	
PRENATAL TAB 27-1MG	NC	
PRENATAL TAB PLUS	NC	
PRENATAL VIT TAB LOW IRON	NC	
PRENATAL+FE TAB 29-1MG	NC	
PRENATAL-U CAP 106.5-1	NC	
PRENATE AM TAB 1MG	NC	
PRENATE CAP ENHANCE	NC	
PRENATE CAP ESSENT	NC	
PRENATE CAP PIXIE	NC	
PRENATE CAP RESTORE	NC	
PRENATE CHW 0.6-0.4	NC	
PRENATE DHA CAP	NC	
PRENATE MINI CAP	NC	
PRENATE TAB ELITE	NC	
PRENATRIX TAB	NC	
PREPLUS TAB 27-1MG	NC	
PRETAB TAB 29-1MG	NC	
PRIMACARE CAP	NC	
PROVIDA OB CAP	NC	
REDICHEW RX CHW	NC	
RELNATE DHA CAP	NC	
SE-NATAL 19 CHW	NC	
SE-NATAL 19 TAB	NC	
SELECT-OB CHW	NC	
SELECT-OB+ PAK DHA	NC	
TARON-C DHA CAP	NC	
TARON-PREX CAP	NC	
THRIVITE RX TAB 29-1MG	NC	
TRI-TABS DHA MIS	NC	
TRICARE PRE CAP 27-1-500	NC	
TRICARE TAB PRENATAL	NC	
TRINATAL RX TAB 1	NC	
<i>trinate tab</i>	1	PV
TRISTART DHA CAP	NC	
TRISTART ONE CAP 35-1-215	NC	
VINATE DHA CAP 27-1.13	NC	
VINATE II TAB	NC	
VINATE M TAB	NC	
VINATE ONE TAB	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIRT-C DHA CAP	NC	
VIRT-NATE CAP DHA	NC	
VIRT-PN DHA CAP	NC	
VIRT-PN PLUS CAP	NC	
VITAFOL CAP ULTRA	NC	
VITAFOL CHW GUMMIES	NC	
VITAFOL FE+ CAP	NC	
VITAFOL-NANO TAB	NC	
VITAFOL-OB PAK +DHA	NC	
VITAFOL-OB TAB 65-1MG	NC	
VITAFOL-ONE CAP	NC	
VITAFUSION CHW PRENATAL	NC	OTC
VITAMEDMD CAP ONE RX	NC	
VITAPEARL CAP	NC	
VITATRUE MIS	NC	
VIVA DHA CAP	NC	
VOL-PLUS TAB	NC	
VOL-TAB RX TAB	NC	
VP-HEME OB MIS + DHA	NC	
VP-PNV-DHA CAP	NC	
ZATEAN-PN CAP DHA	NC	
ZATEAN-PN CAP PLUS	NC	

**MUSCULOSKELETAL THERAPY AGENTS**

**ARTICULAR CARTILAGE REPAIR THERAPY**

MACI MIS	NC	
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**CENTRAL MUSCLE RELAXANTS**

AMRIX CAP 15MG	NC	
AMRIX CAP 30MG	NC	
<i>baclofen intrathecal inj 10 mg/20ml (500 mcg/ml)</i>	1	
<i>baclofen intrathecal inj 20 mg/20ml (1000 mcg/ml)</i>	1	
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	1	
<i>baclofen oral soln 5 mg/5ml</i>	2	
<i>baclofen oral soln 10 mg/5ml</i>	2	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 15 mg</i>	NC	
<i>baclofen tab 20 mg</i>	1	
<i>carisoprodol tab 250 mg</i>	NC	
<i>carisoprodol tab 350 mg</i>	1	
<i>chlorzoxazone tab 250 mg</i>	1	
<i>chlorzoxazone tab 375 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chlorzoxazone tab 500 mg</i>	1	
<i>chlorzoxazone tab 750 mg</i>	NC	
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	NC	
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	NC	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	NC	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
<i>fexmid tab 7.5mg</i>	NC	
FLEQSUVY SUS 25MG/5ML	NC	
GABLOFEN INJ 50MCG/ML	3	
GABLOFEN INJ 10000/20	3	
GABLOFEN INJ 20000/20	3	
GABLOFEN INJ 40000/20	3	
LIORESAL INT INJ 0.05MG/1	3	
LIORESAL INT INJ 10MG/5ML	3	
LIORESAL INT INJ 10MG/20	3	
LIORESAL INT INJ 40MG/20	3	
<i>lorzone tab 375mg</i>	NC	
<i>lorzone tab 750mg</i>	NC	
LYVISPAH GRA 5MG	2	
LYVISPAH GRA 10MG	2	
LYVISPAH GRA 20MG	2	
<i>metaxalone tab 400 mg</i>	NC	
<i>metaxalone tab 800 mg</i>	1	
<i>metaxalone tab 800 mg</i>	NC	
<i>methocarbamol inj 1000 mg/10ml</i>	2	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
<i>orphenadrine citrate inj 30 mg/ml</i>	1	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
ROBAXIN INJ 100MG/ML	3	
SOMA TAB 250MG	3	
SOMA TAB 350MG	3	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
ZANAFLEX CAP 2MG	3	
ZANAFLEX CAP 4MG	3	
ZANAFLEX CAP 6MG	3	
ZANAFLEX TAB 4MG	3	

Drug Name	Drug Tier	Requirements/Limits
<b>DIRECT MUSCLE RELAXANTS</b>		
DANTRIUM CAP 25MG	3	
DANTRIUM IV INJ 20MG	3	
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
<i>dantrolene sodium for iv soln 20 mg</i>	1	
<i>revonto inj 20mg</i>	1	
RYANODEX INJ 250MG	3	
<b>MUSCLE RELAXANT COMBINATIONS</b>		
<i>norgesic tab</i>	NC	
NORGESIC TAB FORTE	NC	
<i>orphenadrine w/ aspirin &amp; caffeine tab 25-385-30 mg</i>	NC	
<i>orphenadrine w/ aspirin &amp; caffeine tab 50-770-60 mg</i>	NC	
<i>orphengesic tab forte</i>	NC	
<b>VISCOSUPPLEMENTS</b>		
DUROLANE INJ 60MG/3ML	2	PA
EUFLEXXA INJ 10MG/ML	2	PA
GEL-ONE INJ 30MG/3ML	NC	
GELSYN-3 INJ 16.8/2ML	2	PA
GENVISC 850 INJ 25/2.5	3	PA
HYALGAN INJ 20MG/2ML	NC	
HYMOVIS INJ 24MG/3ML	NC	
MONOVISC INJ 88MG/4ML	NC	
ORTHOVISC INJ 15MG/ML	NC	
SUPARTZ FX INJ 25/2.5ML	2	PA
SYNVISC INJ 8MG/ML	NC	
SYNVISC ONE INJ 8MG/ML	NC	
VISCO-3 INJ 25/2.5ML	NC	
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL</b>		
<b>NASAL AGENT COMBINATIONS</b>		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	
DYMISTA SPR 137-50	NC	
RYALTRIS SPR 665-25	3	
<b>NASAL AGENTS - MISC.</b>		
NOZIN NASAL KIT SANITIZE	3	OTC
NOZIN NASAL MIS SANITIZE	3	OTC
<b>NASAL ANESTHETICS</b>		
COCAINE HCL SOL 40MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
GOPRELTO SOL 40MG/ML	NC	
<b>NASAL ANTIALLERGY</b>		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	1	
<b>NASAL ANTICHOLINERGICS</b>		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
<b>NASAL STEROIDS</b>		
BECONASE AQ SUS 0.042%	NC	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	
OMNARIS SPR	NC	
QNASL AER 80MCG	NC	
QNASL CHILD SPR 40MCG	NC	
SINUVA IMP 1350MCG	NC	
VERAMYST SPR 27.5MCG	NC	
XHANCE MIS 93MCG	3	
ZETONNA AER 37MCG	NC	
<b>SYMPATHOMIMETIC DECONGESTANTS</b>		
ADRENALIN SOL 1:1000	3	
<i>epinephrine hcl nasal soln 0.1%</i>	1	
<b>NEUROMUSCULAR AGENTS</b>		
<b>ALS AGENTS</b>		
RADICAVA INJ 30MG	6	SP, PA, QL
RADICAVA ORS SUS 105/5ML	5	SP, PA, QL
RADICAVA ORS SUS STARTER	5	SP, PA, QL
RELYVRIO PAK 3-1GM	NC	
RILUTEK TAB 50MG	3	
<i>riluzole tab 50 mg</i>	1	
TEGLUTIK SUS 50/10ML	NC	
<b>DEPOLARIZING MUSCLE RELAXANTS</b>		
ANECTINE INJ 20MG/ML	3	
ANECTINE INJ 200/10ML	3	
QUELICIN INJ 20MG/ML	3	
SUCCINYLCHOL INJ 20MG/ML	3	
<i>succinylcholine chloride inj 20 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>FRIEDRICH'S ATAXIA AGENTS</b>		
SKYCLARYS CAP 50MG	6	SP, PA, QL
<b>MUSCULAR DYSTROPHY AGENTS</b>		
EXONDYS 51 SOL 100/2ML	6	SP, PA, QL
EXONDYS 51 SOL 500/10ML	6	SP, PA, QL
VILTEPSO SOL	NC	
VYONDYS 53 INJ 100/2ML	NC	
<b>NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS</b>		
BOTOX INJ 100UNIT	NC	
BOTOX INJ 200UNIT	NC	
DYSPOIN INJ 300UNIT	2	PA
DYSPOIN INJ 500UNIT	2	PA
MYOBLOC INJ 2500/0.5	NC	
MYOBLOC INJ 5000/ML	NC	
MYOBLOC INJ 10000/2	NC	
XEOMIN INJ 50 UNIT	2	PA
XEOMIN INJ 100UNIT	2	PA
XEOMIN INJ 200UNIT	2	PA
<b>NONDEPOLARIZING MUSCLE RELAXANTS</b>		
<i>atracurium besylate iv soln 100 mg/10ml</i>	1	
<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	1	
<i>cisatracurium besylate (pf) iv soln 10 mg/5ml (2 mg/ml)</i>	1	
<i>cisatracurium besylate (pf) iv soln 200 mg/20ml (10 mg/ml)</i>	1	
<i>cisatracurium besylate iv soln 20 mg/10ml (2 mg/ml)</i>	1	
ROCURON BRO SOL 100/10ML	NC	
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	1	
<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i>	1	
<i>vecuronium bromide for inj 10 mg</i>	1	
<i>vecuronium bromide for inj 20 mg</i>	1	
<b>RETT SYNDROME AGENTS</b>		
DAYBUE SOL 200MG/ML	6	SP, PA, QL
<b>SPINAL MUSCULAR ATROPHY AGENTS (SMA)</b>		
EVRYSDI SOL	6	SP, PA, QL
SPINRAZA INJ 12MG/5ML	NC	

## NUTRIENTS



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CARBOHYDRATES</b>		
<i>dextrose inj 5%</i>	1	
<i>dextrose inj 10%</i>	1	
DEXTROSE INJ 20%	3	
<i>dextrose inj 25%</i>	1	
DEXTROSE INJ 25%	3	
DEXTROSE INJ 30%	3	
DEXTROSE INJ 40%	3	
<i>dextrose inj 50%</i>	1	
DEXTROSE INJ 50%	3	
<i>dextrose inj 70%</i>	1	
<b>LIPIDS</b>		
CLINOLIPID EMU 20%	3	
INTRALIPID INJ 20%	NC	
INTRALIPID INJ 30%	3	
NEOKE MCT70 POW	NC	
NUTRILIPID EMU 20%	NC	
SMOFLIPID EMU	3	
<b>LIPOTROPICS</b>		
LECITHIN GRA	3	
<b>PROTEIN-CARBOHYDRATE-LIPID COMBINATIONS</b>		
KABIVEN EMU	3	
PERIKABIVEN EMU	3	
<b>PROTEINS</b>		
AMINO ACID INJ 5%	3	
AMINO/DEXTRO SOL CAL/HEPA	3	
<i>aminoam cap rms</i>	1	
<i>aminorelief cap rms</i>	1	
<i>aminosyn ii sol 15%</i>	1	
AMINOSYN INJ 10%	3	
AMINOSYN-PF INJ 7%	3	
AMINOSYN-PF INJ 10%	3	
CLINIMIX E INJ 2.75/D5W	3	
CLINIMIX E INJ 4.25/D5W	3	
CLINIMIX E INJ 4.25/D10	3	
CLINIMIX E INJ 5%/D15W	3	
CLINIMIX E INJ 5%/D20W	3	
CLINIMIX INJ 4.25/D5W	3	
CLINIMIX INJ 4.25/D10	3	
CLINIMIX INJ 5%/D15W	3	
CLINIMIX INJ 5%/D20W	3	
CLINIMIX INJ 8/10	3	

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX INJ 8/14	3	
<i>clinisol sf inj 15%</i>	1	
ELCYS INJ 50MG/ML	3	
<i>plenamine inj 15%</i>	1	
PREMASOL SOL 10%	3	
PROSOL INJ 20%	3	
TRAVASOL INJ 10%	3	
TROPHAMINE INJ 10%	3	

## OPHTHALMIC AGENTS

### ARTIFICIAL TEARS AND LUBRICANTS

LACRISERT MIS 5MG OP	NC	
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### BETA-BLOCKERS - OPTHALMIC

<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	NC	
BETIMOL SOL 0.25%	NC	
BETOPTIC-S SUS 0.25% OP	2	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	1	
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	NC	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 2-0.5%OP	3	
DORZOL/TIMOL SOL 2-0.5%OP	NC	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	1	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	1	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
TIM/BRIM/DOR SOL	NC	
TIM/BRIM/DOR SOL /BIMATOP	NC	
TIM/DORZ/LAT SOL	NC	
TIMOL/BRIM SOL DORZ/LAT	NC	
TIMOL/DORZOL SOL /BIMATOP	NC	
TIMOL/LATAN SOL	NC	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	2	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
<i>timolol maleate preservative free ophth soln 0.5%</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>timolol maleate preservative free ophth soln 0.25%</i>	1	
TIMOPTIC OCU SOL 0.25% OP	NC	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	
TIMOPTIC-XE SOL 0.25% OP	3	
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>altafrin sol 2.5% op</i>	1	
<i>altafrin sol 10% op</i>	1	
ATROPINE SUL SOL 1% OP	3	
<i>atropine sulfate ophth soln 1%</i>	1	
CYCLOGYL SOL 0.5% OP	3	
CYCLOGYL SOL 1% OP	3	
CYCLOGYL SOL 2% OP	3	
CYCLOMYDRIL SOL OP	3	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</i>	1	
MYDRIACYL SOL 1% OP	3	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
<b>MIOTICS</b>		
MIOCHOL-E SOL 1:100	3	
MIOSTAT INJ 0.01% OP	3	
PHOSPHOLINE SOL 0.125%OP	3	
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
<b>OPHTHALMIC - ANGIOGENESIS INHIBITORS</b>		
BEOVU INJ 6/0.05ML	NC	
BEVACIZUMAB INJ 2.75MG	NC	
BEVACIZUMAB INJ 3.75MG	NC	
BYOOVIZ INJ 0.5MG	5	SP, PA
CIMERLI INJ 0.3MG	5	SP, PA
CIMERLI INJ 0.5MG	5	SP, PA
EYLEA INJ 2/0.05ML	NC	
LUCENTIS INJ 0.3MG	NC	
LUCENTIS INJ 0.5MG	NC	
LUCENTIS SOL 0.3MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LUCENTIS SOL 0.5MG	NC	
SUSVIMO INJ 10/0.1ML	3	PA
<b>OPHTHALMIC ADRENERGIC AGENTS</b>		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	2	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
BRIMO/DORZO SOL 0.15-2%	NC	
<i>brimonidine tartrate ophth soln 0.1%</i>	2	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
IOPIDINE SOL 1% OP	3	
SIMBRINZA SUS 1-0.2%	2	
<b>OPHTHALMIC ANTI-INFECTIVES</b>		
<i>ak-poly-bac oin op</i>	1	
AZASITE SOL 1%	NC	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUS 0.6%	2	
BETADINE SOL 5% OP	3	
CILOXAN OIN 0.3% OP	NC	
CILOXAN SOL 0.3% OP	NC	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
ERYTHROMYCIN OIN 5MG/GM	3	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentak oin 0.3% op</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
<i>levofloxacin ophth soln 1.5%</i>	1	
MITOSOL KIT 0.2MG	3	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
MOXIFLOXACIN SOL 1MG/ML	NC	
MOXIFLOXACIN SOL 5MG/ML	NC	
NATACYN SUS 5% OP	3	
<i>neo-polycin oin op</i>	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OCUFLOX DRO 0.3% OP	3	
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>polycin oin op</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
POVIDONE IOD SOL 5%	3	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
TOBEX OIN 0.3% OP	3	
<i>trifluridine ophth soln 1%</i>	2	
VIGAMOX DRO 0.5%	3	
XDEMY DRO 0.25%	NC	
ZIRGAN GEL 0.15%	NC	
<b>OPHTHALMIC COMPLEMENT INHIBITORS</b>		
IZERVAY SOL 2/0.1ML	NC	
SYFOVRE INJ 15/0.1ML	NC	
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
<i>cyclosporine (ophth) emulsion 0.05%</i>	NC	
RESTASIS EMU 0.05% OP	1	PA, QL
RESTASIS MUL EMU 0.05% OP	2	PA, QL
<b>OPHTHALMIC INTEGRIN ANTAGONISTS</b>		
XIIDRA DRO 5%	2	PA
<b>OPHTHALMIC KINASE INHIBITORS</b>		
RHOPRESSA SOL 0.02%	NC	
ROCKLATAN DRO	NC	
<b>OPHTHALMIC LOCAL ANESTHETICS</b>		
AKTEN GEL 3.5%	3	
ALCAINE SOL 0.5% OP	3	
<i>altacaine sol 0.5% op</i>	1	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
<b>OPHTHALMIC NERVE GROWTH FACTORS</b>		
OXERVATE SOL 20MCG/ML	6	SP, QL
<b>OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS</b>		
VISUDYNE INJ 15MG	6	SP, PA
<b>OPHTHALMIC PHOTOENHANCERS</b>		
PHOTREXA VIS SOL 0.146-20	NC	
PHOTREXA/PHO SOL VISC KIT	NC	
<b>OPHTHALMIC STEROIDS</b>		
ALREX SUS 0.2%	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	3	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
DEXTENZA MIS 0.4MG	NC	
DEXYCU SUS 9%	NC	
<i>difluprednate ophth emulsion 0.05%</i>	1	
DUREZOL EMU 0.05%	3	
EYSUVIS DRO 0.25%	3	PA, QL
FLAREX SUS 0.1% OP	NC	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML FORTE SUS 0.25% OP	NC	
FML LIQUIFLM SUS 0.1% OP	NC	
FML OIN 0.1% OP	NC	
ILUVIEN IMP 0.19MG	6	SP
INVELTYS SUS 1%	NC	
LOTEMAX GEL 0.5%	NC	
LOTEMAX OIN 0.5%	NC	
LOTEMAX SM GEL 0.38%	NC	
LOTEMAX SUS 0.5%	NC	
<i>loteprednol etabonate ophth gel 0.5%</i>	2	
<i>loteprednol etabonate ophth susp 0.2%</i>	2	
<i>loteprednol etabonate ophth susp 0.5%</i>	2	
MAXIDEX SUS 0.1% OP	NC	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
<i>neo-polycin oin hc 1%op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
OZURDEX IMP 0.7MG	6	SP
PRED FORTE SUS 1% OP	NC	
PRED MILD SUS 0.12% OP	NC	
PRED SOD PHO SOL 1% OP	3	
PRED-G S.O.P OIN OP	3	
PRED-G SUS OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE SUS 1%	3	
RETISERT IMP 0.59MG	6	SP

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	NC	
TOBRADEX SUS 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
TRIESENCE INJ 40MG/ML	3	
TRIMOXI+ INJ	NC	
XIPERE SUS 40MG/ML	NC	
ZYLET SUS 0.5-0.3%	NC	
<b>OPHTHALMIC SURGICAL AIDS</b>		
AMVISC INJ 12MG/ML	3	
AMVISC PLUS INJ 16MG/ML	3	
GELFILM MIS OP	3	
HEALON5 PRO INJ 23MG/ML	3	
HEALON DUET INJ PRO	3	
HEALON GV INJ 18MG PRO	3	
HEALON PRO INJ 10MG/ML	3	
MEMBRANEBLUE INJ 0.15%	3	
OMIDRIA INJ 1-0.3%	3	
PROVISC INJ 1%	3	
VISIONBLUE INJ 0.06%	3	
<b>OPHTHALMICS - MISC.</b>		
ACULAR LS SOL 0.4%	3	
ACULAR SOL 0.5% OP	3	
ACUVAIL SOL 0.45%	NC	
<i>ak-fluor inj 10% op</i>	1	
AK-FLUOR INJ 25% OP	3	
ALOCRIAL SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>altafluor-be sol 0.25-0.4</i>	1	
<i>azelastine hcl ophth soln 0.05%</i>	1	
AZOPT SUS 1% OP	3	
<i>bepotastine besilate ophth soln 1.5%</i>	1	
BEPREVE DRO 1.5%	3	
<i>brinzolamide ophth susp 1%</i>	2	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BROMSITE DRO 0.075%	NC	
BSS PLUS SOL OP	3	
BSS SOL OP	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
CYSTARAN SOL 0.44%	6	SP, PA, QL
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2%	3	
<i>epinastine hcl ophth soln 0.05%</i>	1	
FLUOR-I-STRI TES 1MG OP	1	
FLUORE/BENOX SOL 0.3-0.4%	3	
<i>fluorescein sodium iv soln 10%</i>	1	
<i>fluorescein w/ benoxinate ophth soln 0.25-0.4%</i>	1	
<i>fluorescein w/ proparacaine ophth soln 0.25-0.5%</i>	1	
FLUORESCITE INJ 10% OP	3	
FLURA-SAFE SOL	3	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
ILEVRO DRO 0.3% OP	2	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
LASTACFT SOL 0.25%	NC	
MIEBO DRO 1.3GM/ML	NC	
NEVANAC SUS 0.1%	NC	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PAREMYD SOL 1-0.25%	3	
PROLENSA SOL 0.07%	2	
TRUSOPT SOL 2% OP	3	
UPNEEQ SOL 0.1%	NC	
ZERVIAE DRO 0.24%	NC	
<b>PROSTAGLANDINS - OPHTHALMIC</b>		
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
LATANOPROST SOL 0.005%	NC	
LUMIGAN SOL 0.01% OP	NC	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
TRAVATAN Z DRO 0.004%	NC	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
VYZULTA SOL 0.024%	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XALATAN SOL 0.005%	3	
ZIOPTAN DRO 0.0015%	2	ST
<b>OTIC AGENTS</b>		
<b>OTIC AGENTS - MISCELLANEOUS</b>		
<i>acetic acid otic soln 2%</i>	1	
<b>OTIC ANTI-INFECTIVES</b>		
CETRAXAL SOL 0.2%	3	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIPRIO SUS 60MG/ML	NC	
<b>OTIC COMBINATIONS</b>		
CIPRO HC SUS OTIC	NC	
CIPRODEX SUS 0.3-0.1%	NC	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	NC	
CORTISPORIN SUS -TC OTIC	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
OTOVEL DRO	NC	
<b>OTIC STEROIDS</b>		
DERMOTIC OIL 0.01%	3	
<i>flac oil 0.01%</i>	1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	2	
<b>OXYTOCICS</b>		
<b>ABORTIFACIENTS/AGENTS FOR CERVICAL RIPENING</b>		
<i>carboprost tromethamine im soln 250 mcg/ml</i>	1	
CERVIDIL VAG MIS 10MG INS	3	
HEMABATE INJ 250MCG	3	
PREPIDIL GEL 0.5MG/3G	3	
<b>OXYTOCICS</b>		
<i>methergine tab 0.2mg</i>	2	
<i>methylergonovine maleate inj 0.2 mg/ml</i>	1	
<i>methylergonovine maleate tab 0.2 mg</i>	2	
<i>oxytocin inj 10 unit/ml</i>	1	
PITOCIN INJ 10UNT/ML	3	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS</b>		

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTITOXINS-ANTIVENINS</b>		
ANASCORP INJ	3	
ANAVIP INJ	6	SP
ANTIVENIN KIT LAT MACT	3	
ANTIVENIN NA INJ CORAL SN	3	
CROFAB INJ	3	
<b>IMMUNE SERUMS</b>		
ALYGLO INJ 5GM/50ML	NC	
ALYGLO INJ 10/100ML	NC	
ALYGLO INJ 20/200ML	NC	
BIVIGAM INJ 10%	M	
CARIMUNE NF INJ 6GM	M	
CUTAQUIG SOL 1.65GM	5	SP, PA
CUTAQUIG SOL 1GM	5	SP, PA
CUTAQUIG SOL 2GM	5	SP, PA
CUTAQUIG SOL 3.3GM	5	SP, PA
CUTAQUIG SOL 4GM	5	SP, PA
CUTAQUIG SOL 8GM	5	SP, PA
CUVITRU INJ 2GM/10ML	M	
CUVITRU INJ 4GM/20ML	M	
CUVITRU INJ 8GM/40ML	M	
CUVITRU SOL 1GM/5ML	M	
CYTOGAM INJ	6	PV
GAMMAGARD INJ 1GM/10ML	5	SP, PA
GAMMAGARD INJ 2.5GM/25	5	SP, PA
GAMMAGARD INJ 5GM/50ML	5	SP, PA
GAMMAGARD INJ 10GM/100	5	SP, PA
GAMMAGARD INJ 20GM/200	5	SP, PA
GAMMAGARD INJ 30GM/300	5	SP, PA
GAMMAGARD SD INJ 5GM HU	5	SP, PA
GAMMAGARD SD INJ 10GM HU	5	SP, PA
GAMMAKED INJ 1GM/10ML	5	SP, PA
GAMMAKED INJ 5GM/50ML	5	SP, PA
GAMMAKED INJ 10GM/100	5	SP, PA
GAMMAKED INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 1GM/10ML	5	SP, PA
GAMUNEX-C INJ 2.5GM/25	5	SP, PA
GAMUNEX-C INJ 5GM/50ML	5	SP, PA
GAMUNEX-C INJ 10GM/100	5	SP, PA
GAMUNEX-C INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 40/400ML	5	SP, PA
HEPAGAM B INJ	M	
HIZENTRA INJ 1GM/5ML	5	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HIZENTRA INJ 1GM/5ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 4GM/20ML	5	SP, PA
HIZENTRA INJ 10/50ML	5	SP, PA
HIZENTRA SOL 20%	5	SP, PA
HYPERHEP B INJ	M	
HYPERRAB INJ 300UNIT	3	PV
HYPERRAB INJ 1500UNIT	3	PV
HYPERRHO S/D INJ 50MCG	M	
HYPERRHO S/D INJ 300MCG	M	
HYPERTET INJ 250/ML	3	PV
IMOGAM RABIE INJ 300/2ML	3	PV
KEDRAB SOL 150UNITS	3	PV
KEDRAB SOL 300/2ML	3	PV
MICRHOGAM PL INJ 50MCG	M	
NABI-HB INJ	M	
PANZYGA SOL 1GM/10ML	M	
PANZYGA SOL 2.5/25ML	M	
PANZYGA SOL 5GM/50ML	M	
PANZYGA SOL 10/100ML	M	
PANZYGA SOL 20/200ML	M	
PANZYGA SOL 30/300ML	M	
RHOGAM PLUS INJ 300MCG	M	
RHOPHYLAC INJ 1500/2ML	M	
VARIZIG INJ 125/1.2	M	
VARIZIG INJ 125UNIT	M	
WINRHO SDF INJ 1500UNIT	M	
WINRHO SDF INJ 2500UNIT	M	
WINRHO SDF INJ 5000UNIT	M	
WINRHO SDF INJ 15000UNT	M	
<b>MONOCLONAL ANTIBODIES</b>		
BEBTELOVIMAB SOL 175/2ML	3	
BEYFORTUS INJ 50/0.5ML	3	ACA, PV
BEYFORTUS INJ 100MG/ML	3	ACA, PV
EVUSHELD SOL	3	
SYNAGIS INJ 50/0.5ML	6	SP, PA; PV
SYNAGIS INJ 50MG	6	SP, PA; PV
SYNAGIS INJ 100MG/ML	6	SP, PA; PV
ZINPLAVA SOL 25MG/ML	NC	
<b>PASSIVE IMMUNIZING AGENTS - COMBINATIONS</b>		
HYQVIA INJ 2.5-200	NC	

Drug Name	Drug Tier	Requirements/Limits
HYQVIA INJ 5-400	NC	
HYQVIA INJ 10-800	NC	
HYQVIA INJ 20-1600	NC	
HYQVIA INJ 30-2400	NC	

## PENICILLINS

### AMINOPENICILLINS

<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
AMOXICILLIN SUS 400/5ML	3	
<i>ampicillin cap 500 mg</i>	1	
<i>ampicillin sodium for inj 1 gm</i>	1	
<i>ampicillin sodium for inj 2 gm</i>	2	
<i>ampicillin sodium for inj 125 mg</i>	1	
<i>ampicillin sodium for inj 250 mg</i>	1	
<i>ampicillin sodium for inj 500 mg</i>	1	
<i>ampicillin sodium for iv soln 1 gm</i>	1	
<i>ampicillin sodium for iv soln 2 gm</i>	1	
<i>ampicillin sodium for iv soln 10 gm</i>	1	

### NATURAL PENICILLINS

BICILLIN L-A INJ 600000	3	
BICILLIN L-A INJ 1200000	3	
BICILLIN L-A INJ 2400000	3	
PEN G PROC INJ 600000	3	
PEN GK/DEXTR INJ 20000/ML	3	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
<i>penicillin g potassium for inj 5000000 unit</i>	2	
<i>penicillin g potassium for inj 20000000 unit</i>	1	
<i>penicillin g sodium for inj 5000000 unit</i>	1	
<i>penicillin v potassium for soln 125 mg/5ml</i>	1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
<i>pfizerpen inj 5mu</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PENICILLIN COMBINATIONS</b>		
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i>	2	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	2	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
AUGMENTIN SUS ES-600	3	
AUGMENTIN TAB 500MG	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	
UNASYN INJ 15GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	

Drug Name	Drug Tier	Requirements/Limits
ZOSYN SOL 4-0.50GM	3	

### **PENICILLINASE-RESISTANT PENICILLINS**

<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	2	
NAFCILLIN INJ 1GM/50ML	3	
NAFCILLIN INJ 2GM/100	3	
<i>nafcillin sodium for inj 1 gm</i>	1	
<i>nafcillin sodium for inj 2 gm</i>	1	
<i>nafcillin sodium for iv soln 1 gm</i>	1	
<i>nafcillin sodium for iv soln 2 gm</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	NC	
OXACILLIN INJ 1GM	3	
OXACILLIN INJ 2GM	3	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	1	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	1	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	1	

### **PROGESTINS**

#### **PROGESTINS**

<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	4	SP, PA, QL
MAKENA INJ 250MG/ML	6	SP, PA, QL
MAKENA INJ 275MG	6	SP, PA, QL
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>megestrol acetate susp 625 mg/5ml</i>	2	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	
PROMETRIUM CAP 100MG	NC	
PROMETRIUM CAP 200MG	NC	
PROVERA TAB 2.5MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	

### **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.**

#### **AGENTS FOR CHEMICAL DEPENDENCY**

<i>acamprosate calcium tab delayed release 333 mg</i>	1	PV
<i>disulfiram tab 250 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>disulfiram tab 500 mg</i>	1	PV
LUCEMYRA TAB 0.18MG	NC	
<b>ANTI-CATAPLECTIC AGENTS</b>		
LUMRYZ PAK 6GM	5	SP, PA, QL
LUMRYZ PAK 7.5GM	5	SP, PA, QL
LUMRYZ PAK 9GM	5	SP, PA, QL
LUMRYZ PKG 4.5GM	5	SP, PA, QL
XYREM SOL 500MG/ML	NC	
XYWAV SOL 0.5GM/ML	5	SP, PA, QL
<b>ANTIDEMENTIA AGENTS</b>		
ADLARITY DIS 5MG/DAY	NC	
ADLARITY DIS 10MG/DAY	NC	
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	
ARICEPT TAB 23MG	3	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	
EXELON DIS 13.3/24	3	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	2	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	2	
<i>memantine hcl cap er 24hr 14 mg</i>	2	
<i>memantine hcl cap er 24hr 21 mg</i>	2	
<i>memantine hcl cap er 24hr 28 mg</i>	2	
<i>memantine hcl oral solution 2 mg/ml</i>	2	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i>	2	
NAMENDA TAB 5-10MG	3	
NAMENDA TAB 5MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NAMENDA TAB 10MG	3	
NAMENDA XR CAP 14MG	3	
NAMENDA XR CAP 21MG	3	
NAMENDA XR CAP 28MG	3	
NAMZARIC CAP	2	
NAMZARIC CAP 7-10MG	2	
NAMZARIC CAP 14-10MG	2	
NAMZARIC CAP 21-10MG	2	
NAMZARIC CAP 28-10MG	2	
RAZADYNE ER CAP 8MG	3	
RAZADYNE ER CAP 16MG	3	
RAZADYNE ER CAP 24MG	3	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	2	
<b>COMBINATION PSYCHOTHERAPEUTICS</b>		
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
LYBALVI TAB 5-10MG	3	PA; PV
LYBALVI TAB 10-10MG	3	PA; PV
LYBALVI TAB 15-10MG	3	PA; PV
LYBALVI TAB 20-10MG	3	PA; PV
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	2	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
<b>FIBROMYALGIA AGENTS</b>		
SAVELLA MIS TITR PAK	3	
SAVELLA TAB 12.5MG	3	



Drug Name	Drug Tier	Requirements/Limits
SAVELLA TAB 25MG	3	
SAVELLA TAB 50MG	3	
SAVELLA TAB 100MG	3	

#### **MOVEMENT DISORDER DRUG THERAPY**

AUSTEDO TAB 6MG	5	SP, PA, QL
AUSTEDO TAB 9MG	5	SP, PA, QL
AUSTEDO TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 6MG	5	SP, PA, QL
AUSTEDO XR TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 24MG	5	SP, PA, QL
AUSTEDO XR TAB TITR KIT	5	SP, PA, QL
INGREZZA CAP 40-80MG	5	SP, PA, QL
INGREZZA CAP 40MG	5	SP, PA, QL
INGREZZA CAP 60MG	5	SP, PA, QL
INGREZZA CAP 80MG	5	SP, PA, QL
<i>tetrabenazine tab 12.5 mg</i>	4	SP, PA, QL
<i>tetrabenazine tab 25 mg</i>	4	SP, PA, QL
XENAZINE TAB 12.5MG	NC	
XENAZINE TAB 25MG	NC	

#### **MULTIPLE SCLEROSIS AGENTS**

AMPYRA TAB 10MG	6	SP, ST, PA, QL
AUBAGIO TAB 7MG	NC	
AUBAGIO TAB 14MG	NC	
AVONEX PEN KIT 30MCG	5	SP, PA, QL; PV
AVONEX PREFL KIT 30MCG	5	SP, PA, QL; PV
BETASERON INJ 0.3MG	5	SP, PA, QL; PV
COPAXONE INJ 40MG/ML	5	SP, PA, QL; PV
<i>dalfampridine tab er 12hr 10 mg</i>	4	SP, PA, QL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	4	SP, PA, QL; PV
<i>dimethyl fumarate capsule delayed release 240 mg</i>	4	SP, PA, QL; PV
<i>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</i>	4	SP, PA, QL; PV
EXTAVIA INJ 0.3MG	NC	
<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	4	SP, PA, QL; PV
GILENYA CAP 0.5MG	NC	
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	4	SP, PA, QL; PV
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 20mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 40mg/ml</i>	4	SP, PA, QL; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KESIMPTA INJ 20/.4ML	5	SP, PA, QL; PV
LEMTRADA INJ 12/1.2ML	NC	
MAVENCLAD PAK 10MG(4)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(5)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(6)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(7)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(8)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(9)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(10)	6	SP, PA, QL; PV
MAYZENT PAK STARTER	5	SP, PA, QL; PV
MAYZENT TAB 0.25MG	5	SP, PA, QL; PV
MAYZENT TAB 1MG	5	SP, PA, QL; PV
MAYZENT TAB 2MG	5	SP, PA, QL; PV
OCREVUS INJ 300/10ML	5	SP, PA, QL; PV
PLEGRIDY INJ	6	SP, PA, QL; PV
PLEGRIDY INJ PEN	6	SP, PA, QL; PV
PLEGRIDY INJ STARTER	6	SP, PA, QL; PV
PLEGRIDY PEN INJ STARTER	6	SP, PA, QL; PV
PONVORY TAB 20MG	6	SP, PA, QL
PONVORY TAB STARTER	6	SP, PA, QL; PV
REBIF INJ 22/0.5	5	SP, PA, QL; PV
REBIF INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 22/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ TITRATN	5	SP, PA, QL; PV
REBIF TITRTN INJ PACK	5	SP, PA, QL; PV
TASCENSO ODT TAB 0.25MG	NC	
TECFIDERA CAP 120MG	NC	
TECFIDERA CAP 240MG	NC	
TECFIDERA CAP STARTER	NC	
TYSABRI INJ 300/15ML	5	SP, PA, QL; PV
VUMERITY CAP 231MG	5	SP, PA, QL; PV
ZEPOSIA 7DAY CAP STR PACK	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP .92MG	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP STR KIT	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP STR KIT	5	SP, PA, QL; PV; Preferred for Ulcerative Colitis
<b>POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS</b>		
<i>gabapentin (once-daily) tab 300 mg</i>	2	
<i>gabapentin (once-daily) tab 600 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GRALISE TAB 300MG	2	
GRALISE TAB 450MG	2	
GRALISE TAB 600MG	2	
GRALISE TAB 750MG	2	
GRALISE TAB 900MG	2	
LYRICA CR TAB 82.5MG	3	
LYRICA CR TAB 165MG	3	
LYRICA CR TAB 330MG	3	
<i>pregabalin tab er 24hr 82.5 mg</i>	2	
<i>pregabalin tab er 24hr 165 mg</i>	2	
<i>pregabalin tab er 24hr 330 mg</i>	2	
<b>PSEUDOBULBAR AFFECT (PBA) AGENTS</b>		
NUEDEXTA CAP 20-10MG	2	PA
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
<b>RESTLESS LEG SYNDROME (RLS) AGENTS</b>		
HORIZANT TAB 300MG ER	2	
HORIZANT TAB 600MG ER	2	
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	0	ACA, PV
<i>cvs nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>cvs nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>cvs nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg orig</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mgfruit</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mgfruit</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>eq nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>eq nicotine dis 21mg/24h</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>eq nicotine gum 2mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine gum 2mgfruit</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mgfruit</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>ft nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>ft nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>ft nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>ft nicotine loz 4mg</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg cher</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>habitrol dis 21mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>kls quit2 gum 2mg</i>	0	OTC; ACA, PV
<i>kls quit2 loz 2mg</i>	0	OTC; ACA, PV
<i>kls quit4 gum 4mg</i>	0	OTC; ACA, PV
<i>kls quit4 loz 4mg</i>	0	OTC; ACA, PV
<i>nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nicotine dis step 1</i>	0	OTC; ACA, PV
<i>nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>nicotine pol gum 4mg mint</i>	0	OTC; ACA, PV
<i>nicotine pol loz 2mg mini</i>	0	OTC; ACA, PV
<i>nicotine pol loz 4mg chry</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 4 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 4 mg</i>	0	OTC; ACA, PV
<i>nicotine td dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td dis 14mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis 21mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis step 1</i>	0	OTC; ACA, PV
<i>nicotine td dis step 3</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	OTC; ACA, PV
NICOTROL INH	3	ACA, PV
NICOTROL NS SPR 10MG/ML	3	ACA, PV
<i>qc nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>qc nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>sm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg chry</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg mint</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>thrive gum 2mg mint</i>	0	OTC; ACA, PV
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 1 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	0	ACA, PV

### **TRANSTHYRETIN AMYLOIDOSIS AGENTS**

ONPATTRO SOL 10MG/5ML	6	SP, PA, QL
TEGSEDI INJ 284/1.5	6	SP, PA, QL
WAINUA INJ 45/0.8ML	NC	

### **VASOMOTOR SYMPTOM AGENTS**

<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	NC	
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### **RESPIRATORY AGENTS - MISC.**

#### **ALPHA-PROTEINASE INHIBITOR (HUMAN)**

ARALAST NP INJ 500MG	NC	
ARALAST NP INJ 1000MG	NC	
GLASSIA INJ	NC	
ZEMAIRA INJ 1000MG	5	SP, PA
ZEMAIRA INJ 4000MG	5	SP, PA
ZEMAIRA INJ 5000MG	5	SP, PA

#### **CYSTIC FIBROSIS AGENTS**

BRONCHITOL CAP 40MG	NC	
KALYDECO GRA 5.8MG	6	SP, PA, QL
KALYDECO GRA 13.4MG	6	SP, PA, QL
KALYDECO PAK 25MG	6	SP, PA, QL
KALYDECO PAK 50MG	6	SP, PA, QL
KALYDECO PAK 75MG	6	SP, PA, QL
KALYDECO TAB 150MG	6	SP, PA, QL
ORKAMBI GRA 75-94MG	6	SP, PA, QL
ORKAMBI GRA 100-125	6	SP, PA, QL
ORKAMBI GRA 150-188	6	SP, PA, QL
ORKAMBI TAB 100-125	6	SP, PA, QL
ORKAMBI TAB 200-125	6	SP, PA, QL
PULMOZYME SOL 1MG/ML	6	SP, PA, QL
SYMDEKO TAB 50-75MG	6	SP, PA, QL
SYMDEKO TAB 100-150	6	SP, PA, QL
TRIKAFTA PAK 59.5MG	6	SP, PA, QL
TRIKAFTA PAK 75MG	6	SP, PA, QL
TRIKAFTA TAB	6	SP, PA, QL

#### **PLEURAL SCLEROSING AGENTS**

SCLEROSOL AER INTRAPLE	3	
STERIL TALC SUS 5GM	3	
STERITALC POW 2GM	3	

Drug Name	Drug Tier	Requirements/Limits
STERITALC POW 3GM	3	
STERITALC POW 4GM	3	
<b>PULMONARY FIBROSIS AGENTS</b>		
ESBRIET CAP 267MG	NC	
ESBRIET TAB 267MG	NC	
ESBRIET TAB 801MG	NC	
OFEV CAP 100MG	5	SP, PA, QL
OFEV CAP 150MG	5	SP, PA, QL
<i>pirfenidone cap 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 801 mg</i>	4	SP, PA, QL
<b>RESPIRATORY AGENTS - MISC.</b>		
CUROSURF SUS 120/1.5	3	
CUROSURF SUS 240/3ML	3	
INFASURF SUS 35MG/ML	3	
SURVANTA INH	3	
<b>SULFONAMIDES</b>		
<b>SULFONAMIDES</b>		
<i>sulfadiazine tab 500 mg</i>	2	(except NDC 42806075760 which is not covered)
<b>TETRACYCLINES</b>		
<b>AMINOMETHYLCYCLINES</b>		
NUZYRA INJ 100MG	3	PA
NUZYRA TAB 150MG	3	PA
<b>FLUOROCYCLINES</b>		
XERAVA INJ 50MG	3	
XERAVA INJ 100MG	3	
<b>GLYCYLCYCLINES</b>		
<i>tigecycline for iv soln 50 mg</i>	1	
TIGECYCLINE INJ 50MG	3	
TYGACIL INJ 50MG	NC	
<b>TETRACYCLINES</b>		
ACTICLATE TAB 75MG	NC	
ACTICLATE TAB 150MG	NC	
<i>avidoxy tab 100mg</i>	1	
<i>coremino tab 45mg</i>	NC	
<i>coremino tab 90mg</i>	NC	
<i>coremino tab 135mg</i>	NC	
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
DORYX MPC TAB 120MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DORYX TAB 50MG	NC	
DORYX TAB 80MG	NC	
DORYX TAB 200MG	NC	
<i>doxy 100 inj 100mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate for inj 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 50 mg</i>	NC	
<i>doxycycline hyclate tab 75 mg</i>	NC	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 50 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 75 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 80 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 100 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 200 mg</i>	NC	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	NC	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	NC	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	2	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	2	
MINOCIN CAP 50MG	NC	
MINOCIN INJ 100MG	3	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl cap er 24hr 45 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 90 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 135 mg (base equivalent)</i>	NC	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>minocycline hcl tab er 24hr 45 mg</i>	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>minocycline hcl tab er 24hr 55 mg</i>	NC	
<i>minocycline hcl tab er 24hr 65 mg</i>	NC	
<i>minocycline hcl tab er 24hr 80 mg</i>	NC	
<i>minocycline hcl tab er 24hr 90 mg</i>	NC	
<i>minocycline hcl tab er 24hr 105 mg</i>	NC	
<i>minocycline hcl tab er 24hr 115 mg</i>	NC	
<i>minocycline hcl tab er 24hr 135 mg</i>	NC	
MINOLIRA TAB 105MG	NC	
MINOLIRA TAB 135MG	NC	
<i>mondoxyme nl cap 75mg</i>	NC	
<i>mondoxyme nl cap 100mg</i>	1	
MORGIDOX KIT 1X50MG	NC	
<i>okebo cap 75mg</i>	NC	
SEYSARA TAB 100MG	NC	
SEYSARA TAB 150MG	NC	
SOLODYN TAB 55MG	3	ST
SOLODYN TAB 65MG	3	ST
SOLODYN TAB 80MG	3	ST
SOLODYN TAB 105MG	3	ST
SOLODYN TAB 115MG	3	ST
<i>targadox tab 50mg</i>	NC	
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	2	
TETRACYCLINE TAB 250MG	3	
TETRACYCLINE TAB 500MG	3	
VIBRAMYCIN CAP 100MG	3	
VIBRAMYCIN SUS 25MG/5ML	2	
VIBRAMYCIN SYP 50MG/5ML	2	
XIMINO CAP 45MG ER	NC	
XIMINO CAP 90MG ER	NC	
XIMINO CAP 135MG ER	NC	

## **THYROID AGENTS**

### **ANTITHYROID AGENTS**

<i>methimazole tab 5 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	

### **THYROID HORMONES**

ADTHYZA TAB 15MG	NC	
ADTHYZA TAB 16.25MG	NC	
ADTHYZA TAB 30MG	NC	
ADTHYZA TAB 32.5MG	NC	
ADTHYZA TAB 60MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADTHYZA TAB 65MG	NC	
ADTHYZA TAB 90MG	NC	
ADTHYZA TAB 97.5MG	NC	
ADTHYZA TAB 120MG	NC	
ADTHYZA TAB 130MG	NC	
ARMOUR THYRO TAB 15MG	3	
ARMOUR THYRO TAB 30MG	3	
ARMOUR THYRO TAB 60MG	3	
ARMOUR THYRO TAB 90MG	3	
ARMOUR THYRO TAB 120MG	3	
ARMOUR THYRO TAB 180MG	3	
ARMOUR THYRO TAB 240MG	3	
ARMOUR THYRO TAB 300MG	3	
CYTOMEL TAB 5MCG	NC	
CYTOMEL TAB 25MCG	NC	
CYTOMEL TAB 50MCG	NC	
<i>euthyrox tab 25mcg</i>	1	
<i>euthyrox tab 50mcg</i>	1	
<i>euthyrox tab 75mcg</i>	1	
<i>euthyrox tab 88mcg</i>	1	
<i>euthyrox tab 100mcg</i>	1	
<i>euthyrox tab 112mcg</i>	1	
<i>euthyrox tab 125mcg</i>	1	
<i>euthyrox tab 137mcg</i>	1	
<i>euthyrox tab 150mcg</i>	1	
<i>euthyrox tab 175mcg</i>	1	
<i>euthyrox tab 200mcg</i>	1	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	
<i>levo-t tab 88mcg</i>	1	
<i>levo-t tab 100mcg</i>	1	
<i>levo-t tab 112mcg</i>	1	
<i>levo-t tab 125mcg</i>	1	
<i>levo-t tab 137mcg</i>	1	
<i>levo-t tab 150mcg</i>	1	
<i>levo-t tab 175mcg</i>	1	
<i>levo-t tab 200mcg</i>	1	
<i>levo-t tab 300 mcg</i>	1	
LEVOTHYROXIN INJ 100MCG	3	
LEVOTHYROXIN INJ 200MCG	3	
LEVOTHYROXIN INJ 500MCG	3	
<i>levothyroxine sodium cap 13 mcg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levothyroxine sodium cap 25 mcg</i>	NC	
<i>levothyroxine sodium cap 50 mcg</i>	NC	
<i>levothyroxine sodium cap 75 mcg</i>	NC	
<i>levothyroxine sodium cap 88 mcg</i>	NC	
<i>levothyroxine sodium cap 100 mcg</i>	NC	
<i>levothyroxine sodium cap 112 mcg</i>	NC	
<i>levothyroxine sodium cap 125 mcg</i>	NC	
<i>levothyroxine sodium cap 137 mcg</i>	NC	
<i>levothyroxine sodium cap 150 mcg</i>	NC	
<i>levothyroxine sodium cap 175 mcg</i>	NC	
<i>levothyroxine sodium cap 200 mcg</i>	NC	
<i>levothyroxine sodium for iv inj 100 mcg</i>	1	
<i>levothyroxine sodium for iv inj 200 mcg</i>	1	
<i>levothyroxine sodium for iv inj 500 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</i>	1	
<i>liothyronine sodium iv soln 10 mcg/ml</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
NATURE THROI TAB 162.5MG	NC	
NATURE-THROI TAB 16.25MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NATURE-THROI TAB 32.5MG	NC	
NATURE-THROI TAB 48.75MG	NC	
NATURE-THROI TAB 65MG	NC	
NATURE-THROI TAB 81.25MG	NC	
NATURE-THROI TAB 97.5MG	NC	
NATURE-THROI TAB 113.75MG	NC	
NATURE-THROI TAB 130MG	NC	
NATURE-THROI TAB 146.25MG	NC	
NATURE-THROI TAB 195MG	NC	
NATURE-THROI TAB 260MG	NC	
NATURE-THROI TAB 325MG	NC	
NP THYROID TAB 15MG	3	
NP THYROID TAB 30MG	3	
NP THYROID TAB 60MG	3	
NP THYROID TAB 90MG	3	
NP THYROID TAB 120MG	3	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
SYNTHROID TAB 75MCG	2	
SYNTHROID TAB 88MCG	2	
SYNTHROID TAB 100MCG	2	
SYNTHROID TAB 112MCG	2	
SYNTHROID TAB 125MCG	2	
SYNTHROID TAB 137MCG	2	
SYNTHROID TAB 150MCG	2	
SYNTHROID TAB 175MCG	2	
SYNTHROID TAB 200MCG	2	
SYNTHROID TAB 300MCG	2	
THYQUIDITY SOL 100MCG	NC	
TIROSINT CAP 13MCG	NC	
TIROSINT CAP 25MCG	NC	
TIROSINT CAP 50MCG	NC	
TIROSINT CAP 75MCG	NC	
TIROSINT CAP 88MCG	NC	
TIROSINT CAP 100MCG	NC	
TIROSINT CAP 112MCG	NC	
TIROSINT CAP 125MCG	NC	
TIROSINT CAP 137MCG	NC	
TIROSINT CAP 150MCG	NC	
TIROSINT CAP 175MCG	NC	
TIROSINT CAP 200	NC	
TRIOSTAT INJ 10MCG/ML	3	
<i>unithroid tab 25mcg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 137mcg</i>	1	
<i>unithroid tab 150mcg</i>	1	
<i>unithroid tab 175mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	
WESTHROID TAB 32.5MG	NC	
WESTHROID TAB 65MG	NC	
WESTHROID TAB 97.5MG	NC	
WESTHROID TAB 130MG	NC	
WESTHROID TAB 195MG	NC	
WP THYROID TAB 16.25MG	NC	
WP THYROID TAB 32.5MG	NC	
WP THYROID TAB 48.75MG	NC	
WP THYROID TAB 65MG	NC	
WP THYROID TAB 81.25MG	NC	
WP THYROID TAB 97.5MG	NC	
WP THYROID TAB 113.75MG	NC	
WP THYROID TAB 130MG	NC	

## **TOXOIDS**

### **TOXOID COMBINATIONS**

ADACEL INJ	3	ACA, PV
BOOSTRIX INJ	3	ACA, PV
DAPTACEL INJ	3	ACA, PV
DIP/TET PED INJ 25-5LFU	3	ACA, PV
INFANRIX INJ	3	ACA, PV
KINRIX INJ	3	ACA, PV
PEDIARIX INJ 0.5ML	3	ACA, PV
PENTACEL INJ	3	ACA, PV
QUADRACEL INJ	3	ACA, PV
QUADRACEL INJ 0.5ML	3	ACA, PV
TDVAX INJ 2-2 LF	3	ACA, PV
TENIVAC INJ 5-2LF	3	ACA, PV
TET/DIP TOX INJ 2-2 LF	3	ACA, PV
VAXELIS INJ	3	ACA, PV

## **ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS**

Drug Name	Drug Tier	Requirements/Limits
<b>ANTISPASMODICS</b>		
ANASPAZ TAB 0.125MG	3	
ATROPINE SUL INJ 0.1MG/ML	3	
ATROPINE SUL INJ 0.05MG/1	3	
ATROPINE SUL INJ 1/2.5ML	NC	
ATROPINE SUL INJ 8MG/20ML	3	
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	1	
<i>atropine sulfate iv soln 0.4 mg/ml</i>	1	
<i>atropine sulfate iv soln 1 mg/ml</i>	1	
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	1	
BELLA/OPIUM SUP 16.2-30	3	
BENTYL INJ 10MG/ML	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	2	
CUVPOSA SOL 1MG/5ML	3	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl inj 10 mg/ml</i>	1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
<i>ed-spaz tab 0.125mg</i>	1	
GLYCOPYRROLA INJ 0.6/3ML	NC	
GLYCOPYRROLA INJ 1MG/5ML	NC	
GLYCOPYRROLA TAB 1.5MG	NC	
<i>glycopyrrolate inj 0.2 mg/ml</i>	1	
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate oral soln 1 mg/5ml</i>	2	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	NC	
<i>hyosyne dro 0.125/ml</i>	1	
<i>hyosyne elx 0.125/5</i>	1	
LEVBIID TAB 0.375 ER	3	
LEVSIN TAB 0.125MG	3	
LEVSIN/SL SUB 0.125MG	3	
LIBRAX CAP 5-2.5MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sr tab 0.375mg</i>	NC	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	1	
ROBINUL FORT TAB 2MG	NC	
ROBINUL TAB 1MG	NC	
<i>symax-sr tab 0.375mg</i>	NC	

### **H-2 ANTAGONISTS**

<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	1	
<i>famotidine inj 40 mg/4ml</i>	1	
<i>famotidine inj 200 mg/20ml</i>	1	
<i>famotidine preservative free inj 20 mg/2ml</i>	1	
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	

### **MISC. ANTI-ULCER**

CARAFATE SUS 1GM/10ML	NC	
CARAFATE TAB 1GM	NC	
SUCRALFATE SUS 1GM/10ML	NC	
<i>sucralfate susp 1 gm/10ml</i>	NC	
<i>sucralfate tab 1 gm</i>	1	
<i>sucralfate tab 1 gm</i>	NC	(applies to NDCs 62135043601 and 62135043690)

### **PROTON PUMP INHIBITORS**

ACIPHEX SPR CAP 5MG	NC	
ACIPHEX SPR CAP 10MG	NC	
ACIPHEX TAB 20MG	NC	
DEXILANT CAP 30MG DR	NC	
DEXILANT CAP 60MG DR	NC	
<i>dexlansoprazole cap delayed release 30 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dexlansoprazole cap delayed release 60 mg</i>	NC	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	2	
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	1	
<i>lansoprazole cap delayed release 15 mg</i>	1	
<i>lansoprazole cap delayed release 30 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	NC	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	NC	
NEXIUM CAP 20MG	NC	
NEXIUM CAP 40MG	NC	
NEXIUM GRA 2.5MG DR	NC	
NEXIUM GRA 5MG DR	NC	
NEXIUM GRA 10MG DR	NC	
NEXIUM GRA 20MG DR	NC	
NEXIUM GRA 40MG DR	NC	
NEXIUM I.V. INJ 40MG	3	
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
<i>pantoprazole sodium for delayed release susp packet 40 mg</i>	NC	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	1	
PREVACID CAP 15MG DR	NC	
PREVACID CAP 30MG DR	NC	
PREVACID TAB 15MG STB	NC	
PREVACID TAB 30MG STB	NC	
PRILOSEC POW 2.5MG	NC	
PRILOSEC POW 10MG	NC	
PROTONIX INJ 40MG	3	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROTONIX PAK 40MG	NC	
PROTONIX TAB 20MG	NC	
PROTONIX TAB 40MG	NC	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
VOQUEZNA TAB 10MG	NC	
VOQUEZNA TAB 20MG	NC	

### **ULCER DRUGS - PROSTAGLANDINS**

CYTOTEC TAB 100MCG	3	
CYTOTEC TAB 200MCG	3	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	

### **ULCER THERAPY COMBINATIONS**

<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i>	2	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	
KONVOMEK SUS 2-84/ML	NC	
OMECLAMOX- MIS PAK	3	
<i>omeppi cap 40-1100</i>	NC	
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	NC	
PYLERA CAP	3	
TALICIA CAP	2	
VOQUEZNA PAK DUAL PAK	3	
VOQUEZNA PAK TRIP PK	3	
ZEGERID CAP 20-1100	NC	
ZEGERID CAP 40-1100	NC	
ZEGERID POW 20-1680	NC	
ZEGERID POW 40-1680	NC	

### **URINARY ANTISPASMODICS**

#### **URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)**

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
DETROL LA CAP 2MG	NC	
DETROL LA CAP 4MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DETROL TAB 1MG	3	
DETROL TAB 2MG	3	
DITROPAN XL TAB 5MG	3	
DITROPAN XL TAB 10MG	3	
ENABLEX TAB 7.5MG	NC	
ENABLEX TAB 15MG	NC	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	1	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	1	
GELNIQUE GEL 10%	3	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
OXYTROL DIS 3.9MG/24	NC	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	NC	
TOVIAZ TAB 8MG	NC	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
VESICARE LS SUS 5MG/5ML	3	
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	
<b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>		
GEMTESA TAB 75MG	2	
<i>mirabegron tab er 24 hr 25 mg</i>	1	
<i>mirabegron tab er 24 hr 50 mg</i>	1	
MYRBETRIQ SUS 8MG/ML	NC	
MYRBETRIQ TAB 25MG	NC	
MYRBETRIQ TAB 50MG	NC	
<b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>		
<i>bethanechol chloride tab 5 mg</i>	1	
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	
<b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>		
<i>flavoxate hcl tab 100 mg</i>	1	

## VACCINES

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>BACTERIAL VACCINES</b>		
ACTHIB INJ	3	ACA, PV
BCG VACCINE INJ 50MG	3	PV
BEXSERO INJ	3	ACA, PV
BIOTHRAX INJ	3	PV
HIBERIX SOL 10MCG	3	ACA, PV
MENQUADFI INJ	3	ACA, PV
MENVEO INJ	3	ACA, PV
PEDVAX HIB INJ	3	ACA, PV
PENBRAYA INJ	3	ACA, PV
PNEUMOVAX 23 INJ 25/0.5	3	ACA, PV
PREVNAR 20 INJ	3	ACA, PV
TRUMENBA INJ	3	ACA, PV
TYPHIM VI INJ	3	PV
VAXCHORA SUS	3	PV
VAXNEUVANCE INJ	3	ACA, PV
VIVOTIF CAP EC	3	PV
<b>VIRAL VACCINES</b>		
ABRYSVO INJ	3	ACA, PV
AFLURIA QUAD INJ 2022-23	3	ACA, PV
AREXVY INJ 120MCG	3	ACA, PV
COMIRNATY INJ 30/0.3ML	3	ACA, PV
COMIRNATY INJ 30/0.3ML	3	ACA, PV
DENGVAXIA SUS	3	ACA, PV
ENGERIX-B INJ 10/0.5ML	3	ACA, PV
ENGERIX-B INJ 20MCG/ML	3	ACA, PV
FLUAD QUADRI INJ 2022-23	3	ACA, PV
FLUARIX QUAD INJ 2022-23	3	ACA, PV
FLUBLOK QUAD INJ 2022-23	3	ACA, PV
FLUBLOK QUAD INJ 2023-24	3	ACA, PV
FLUCLVX QUAD INJ 2022-23	3	ACA, PV
FLULAVAL QUA INJ 2022-23	3	ACA, PV
FLUMIST QUAD SUS 2022-23	3	ACA, PV
FLUZONE HD INJ 2023-24	3	ACA, PV
FLUZONE QUAD INJ 2023-24	3	ACA, PV
GARDASIL 9 INJ	3	ACA, PV
HAVRIX INJ 720UNIT	3	ACA, PV
HAVRIX INJ 1440UNIT	3	ACA, PV
HEPLISAV-B INJ 20/0.5ML	3	ACA, PV
IMOVAX RABIE INJ 2.5/ML	3	PV
IPOL INJ INACTIVE	3	ACA, PV
IXIARO INJ	3	PV
JYNNEOS INJ	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
M-M-R II INJ	3	ACA, PV
MODERNA INJ 6MO-11Y	3	ACA, PV
MODERNA VAC INJ 50/0.5ML	3	ACA, PV
MODERNA VAC INJ COVID-19	3	ACA, PV
MODERNA VACC INJ 6M-5Y	3	ACA, PV
NOVAVAX INJ 2023-24	3	ACA, PV
NOVAVAX VAC INJ COVID-19	3	ACA, PV
PFIZER 5-11Y INJ 2023-24	3	ACA, PV
PFIZER 6M-4Y INJ 2023-24	3	ACA, PV
PFIZER VACC INJ 5-11Y	3	ACA, PV
PFIZER VACC INJ 6M-4Y	3	ACA, PV
PFIZER VACC INJ ADLT RTU	3	ACA, PV
PFIZER VACC INJ COVID-19	3	ACA, PV
PREHEVBRIO SUS 10MCG/ML	3	ACA, PV
PRIORIX INJ	3	ACA, PV
PROQUAD INJ	3	ACA, PV
RABAVERT INJ	3	PV
RECOMBIVA HB INJ 5MCG/0.5	3	ACA, PV
RECOMBIVA HB INJ 10MCG/ML	3	ACA, PV
RECOMBIVA-HB INJ 40MCG/ML	3	ACA, PV
ROTATEQ SOL	3	ACA, PV
SHINGRIX INJ 50/0.5ML	3	ACA, PV
SPIKEVAX INJ 50/0.5ML	3	ACA, PV
SPIKEVAX INJ COVID-19	3	ACA, PV
STAMARIL INJ	3	PV
TICOVAC INJ	3	PV
TWINRIX INJ	3	ACA, PV
VAQTA INJ 25/0.5ML	3	ACA, PV
VAQTA INJ 50UNT/ML	3	ACA, PV
VARIVAX INJ	3	ACA, PV
YF-VAX INJ	3	PV

## **VAGINAL AND RELATED PRODUCTS**

### **MISCELLANEOUS VAGINAL PRODUCTS**

INTRAROSA SUP 6.5MG	NC	
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### **SPERMICIDES**

ENCARE SUP 100MG	0	OTC; ACA
GYNOL II GEL 3%	0	OTC; ACA
SHUR-SEAL GEL 2%	0	OTC; ACA
TODAY SPONGE MIS	0	OTC; ACA
VCF VAGINAL GEL CONTRACE	0	OTC; ACA
VCF VAGINAL MIS CONTRACP	0	OTC; ACA

Drug Name	Drug Tier	Requirements/Limits
<b>VAGINAL ANTI-INFECTIVES</b>		
CLEOCIN CRE 2% VAG	3	
CLEOCIN SUP 100MG	3	
<i>clindamycin phosphate vaginal cream 2%</i>	2	
CLINDESSE CRE 2%	3	
GYNAZOLE-1 CRE 2%	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole 3 sup 200mg</i>	2	
NUVESSA GEL 1.3%	NC	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	2	
XACIATO GEL 2%	3	
<b>VAGINAL CONTRACEPTIVE - PH MODULATORS</b>		
PHEXXI GEL	0	ACA
<b>VAGINAL ESTROGENS</b>		
ESTRACE VAG CRE 0.01%	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estradiol vaginal tab 10 mcg</i>	NC	
ESTRING MIS 2MG	NC	
FEMRING MIS 0.1MG/24	NC	
FEMRING MIS 0.05/24H	NC	
IMVEXXY MAIN SUP 4MCG	2	
IMVEXXY MAIN SUP 10MCG	2	
IMVEXXY STRT SUP 4MCG	2	
IMVEXXY STRT SUP 10MCG	2	
PREMARIN VAG CRE 0.625MG	NC	
VAGIFEM TAB 10MCG	1	
<i>yuvafem tab 10mcg</i>	NC	
<b>VAGINAL PROGESTINS</b>		
CRINONE GEL 4% VAG	2	PA
CRINONE GEL 8% VAG	2	PA
ENDOMETRIN SUP 100MG	2	PA
<b>VASOPRESSORS</b>		
<b>ANAPHYLAXIS THERAPY AGENTS</b>		
ADRENALIN INJ 1MG/ML	NC	
ADRENALIN INJ 30/30ML	NC	
AUVI-Q INJ 0.1MG	2	
AUVI-Q INJ 0.3MG	2	
AUVI-Q INJ 0.15MG	2	
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	2	(NDCs 00093-xxxx-xx and 49502-xxxx-xx are not covered)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	2	(NDCs 00093-xxxx-xx and 49502-xxxx-xx are not covered)
EPIPEN 2-PAK INJ 0.3MG	NC	
EPIPEN-JR INJ 0.15MG	NC	
SYMJEPI INJ 0.3MG	NC	
SYMJEPI INJ 0.15MG	NC	

### **NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS**

<i>droxidopa cap 100 mg</i>	4	SP, PA, QL
<i>droxidopa cap 200 mg</i>	4	SP, PA, QL
<i>droxidopa cap 300 mg</i>	4	SP, PA, QL
NORTHERA CAP 100MG	NC	
NORTHERA CAP 200MG	NC	
NORTHERA CAP 300MG	NC	

### **VASOPRESSORS**

AKOVAZ SOL 50MG/ML	NC	
EPHEDRINE SU INJ 50MG/ML	3	
<i>ephedrine sulfate iv soln 50 mg/ml</i>	1	
EPINEPH/NAACL SOL 2/250ML	NC	
EPINEPHR/D5W INJ 100/10ML	3	
EPINEPHR/D5W SOL 2/250-5%	NC	
EPINEPHRINE INJ 0.1MG/10	3	
EPINEPHRINE INJ 0.1MG/ML	3	
EPINEPHRINE INJ 0.2MG	3	
EPINEPHRINE INJ 1MG/10ML	3	
EPINEPHRINE INJ 1MG/ML	3	
EPINEPHRINE INJ 5MG/5ML	3	
EPINEPHRINE SOL 30/30ML	3	
GIAPREZA INJ 2.5MG	NC	
IMMPHENTIV INJ	NC	
LEVOPHED INJ 1MG/ML	3	
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	
NOREPIN/D5W INJ 16/250ML	3	
NOREPINEPHR INJ 8MG/8ML	3	
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	1	
PHENYL/NAACL INJ 80/250ML	3	
PHENYLEP HCL INJ 0.8/10ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PHENYLEP HCL INJ 1MG/10ML	3	
PHENYLEPHRIN INJ 0.4/10ML	3	
PHENYLEPHRIN INJ 0.8MG/10	3	
PHENYLEPHRIN INJ 10MG/ML	3	
<i>phenylephrine hcl iv soln 10 mg/ml</i>	1	
REZIPRES INJ	3	
REZIPRES SOL	NC	
VAZCULEP INJ 10MG/ML	3	

## **VITAMINS**

### **OIL SOLUBLE VITAMINS**

AQUASOL A INJ 50000/ML	3	
DRISDOL CAP 50000UNT	3	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
MEPHYTON TAB 5MG	3	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	2	
<i>phytonadione inj 10 mg/ml</i>	2	
<i>phytonadione tab 5 mg</i>	2	
WHEAT GERM OIL	3	

### **WATER SOLUBLE VITAMINS**

<i>pyridoxine hcl inj 100 mg/ml</i>	1	
PYRIDOXINE INJ 100MG/ML	3	
<i>thiamine hcl inj 100 mg/ml</i>	1	

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		<i>altafrin sol 10% op</i> .....	251
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ANCOBON CAP 250MG.....	84	APTENSIO XR CAP 20MG .....	16
ANCOBON CAP 500MG .....	84	APTENSIO XR CAP 30MG .....	16
ANDEXXA SOL 200MG .....	81	APTENSIO XR CAP 40MG .....	16
ANDRODERM DIS 2MG/24HR.....	41	APTENSIO XR CAP 50MG .....	16
ANDRODERM DIS 4MG/24HR.....	41	APTENSIO XR CAP 60MG .....	16
ANDROGEL GEL 1.62% .....	41	APTIOM TAB 200MG .....	60
ANDROGEL GEL 1%(25MG) .....	41	APTIOM TAB 400MG .....	60
ANDROGEL GEL 1%(50MG) .....	41	APTIOM TAB 600MG .....	60
ANECTINE INJ 200/10ML .....	247	APTIOM TAB 800MG .....	60
ANECTINE INJ 20MG/ML.....	247	APTIVUS CAP 250MG.....	128
ANGELIQ TAB 0.25-0.5 .....	190	APTIVUS SOL .....	128
ANGELIQ TAB 0.5-1MG .....	190	AQUACEL AG PAD 5 .....	174
ANGIOMAX INJ 250MG.....	59	AQUACEL FOAM PAD 7.....	174
ANNOVERA MIS.....	152	AQUALANCE MIS 30G.....	219
ANORO ELLIPT AER 62.5-25.....	54	AQUASOL A INJ 50000/ML.....	287
ANTARA CAP 30MG.....	88	AQUORAL SPR.....	239
ANTICOAGULNT SOL SOD CITR .....	59	ARAKODA TAB 100MG .....	99
ANTIVENIN KIT LAT MACT .....	258	ARALAST NP INJ 1000MG .....	270
ANTIVENIN NA INJ CORAL SN.....	258	ARALAST NP INJ 500MG.....	270
<i>anucort-hc sup 25mg</i> .....	42	<i>aranelle tab</i> .....	147
ANUSOL-HC CRE 2.5%.....	42	ARANESP INJ 100MCG.....	207
ANZEMET TAB 50MG.....	82	ARANESP INJ 10MCG .....	207
APEXICON E CRE 0.05%.....	166	ARANESP INJ 150MCG.....	207
APIDRA INJ SOLOSTAR.....	77	ARANESP INJ 200MCG.....	207
APIDRA INJ U-100.....	77	ARANESP INJ 25MCG.....	207
APLENZIN TAB 174MG.....	68	ARANESP INJ 300MCG.....	207
APLENZIN TAB 348MG.....	68	ARANESP INJ 40MCG .....	207



ARANESP INJ 500MCG .....	207	ARIXTRA INJ 7.5/0.6 .....	57
ARANESP INJ 60MCG .....	207	<i>armodafinil tab 150 mg</i> .....	16
ARAVAL TAB 10MG .....	28	<i>armodafinil tab 200 mg</i> .....	16
ARAVAL TAB 20MG .....	28	<i>armodafinil tab 250 mg</i> .....	16
ARAZLO LOT 0.045% .....	159	<i>armodafinil tab 50 mg</i> .....	16
ARCALYST INJ 220MG .....	24	ARMOUR THYRO TAB 120MG .....	274
ARESTIN MIS 1MG .....	239	ARMOUR THYRO TAB 15MG .....	274
AREXVY INJ 120MCG .....	283	ARMOUR THYRO TAB 180MG .....	274
<i>arformoterol tartrate soln nebu 15 mcg/2ml</i> <i>(base equiv)</i> .....	54	ARMOUR THYRO TAB 240MG .....	274
ARGATROBAN INJ 100MG/ML .....	59	ARMOUR THYRO TAB 300MG .....	274
ARGATROBAN INJ 250/2.5 .....	59	ARMOUR THYRO TAB 30MG .....	274
<i>argatroban inj 250 mg/2.5ml (concentrate</i> <i>for iv infusion)</i> .....	59	ARMOUR THYRO TAB 60MG .....	274
ARGATROBAN INJ 50/50ML .....	59	ARMOUR THYRO TAB 90MG .....	274
ARGATROBAN INJ 50MG/50M .....	59	ARNICA TIN FLOWER .....	172
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i> .....	59	ARNUITY ELPT INH 100MCG .....	53
<i>argyl saline sol 0.9% irr</i> .....	199	ARNUITY ELPT INH 200MCG .....	53
<i>argyl saline sol 100ml</i> .....	237	ARNUITY ELPT INH 50MCG .....	53
ARICEPT TAB 10MG .....	263	AROMASIN TAB 25MG .....	107
ARICEPT TAB 23MG .....	263	ARRANON INJ 5MG/ML .....	102
ARICEPT TAB 5MG .....	263	<i>arsenic trioxide iv soln 10 mg/10ml (1</i> <i>mg/ml)</i> .....	115
ARIDA GEL .....	174	<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i> .....	115
ARIKAYCE SUS .....	20	ARTESUNATE SOL 110MG .....	99
ARIMIDEX TAB 1MG .....	107	ARTHROTEC 50 TAB .....	25
<i>aripiprazole orally disintegrating tab 10 mg</i> .....	127	ARTHROTEC 75 TAB .....	25
<i>aripiprazole orally disintegrating tab 15 mg</i> .....	127	<i>articadent inj dental</i> .....	214
<i>aripiprazole oral solution 1 mg/ml</i> .....	127	ARTISS SOL 10ML .....	210
<i>aripiprazole tab 10 mg</i> .....	127	ARTISS SOL 2ML .....	210
<i>aripiprazole tab 15 mg</i> .....	127	ARTISS SOL 4ML .....	210
<i>aripiprazole tab 20 mg</i> .....	127	ARYMO ER TAB 15MG .....	31
<i>aripiprazole tab 2 mg</i> .....	127	ARYMO ER TAB 30MG .....	31
<i>aripiprazole tab 30 mg</i> .....	127	ARYMO ER TAB 60MG .....	31
<i>aripiprazole tab 5 mg</i> .....	127	ARZERRA CON 100/5ML .....	105
ARISTADA INJ 1064MG .....	127	ASACOL HD TAB 800MG .....	195
ARISTADA INJ 441MG/1. ....	127	ASCLERA INJ 0.5% .....	238
ARISTADA INJ 662MG/2 .....	127	ASCLERA INJ 1% .....	238
ARISTADA INJ 882MG/3 .....	127	<i>ascomp/cod cap 30mg</i> .....	38
ARISTADA INJ INITIO .....	127	<i>asenapine maleate sl tab 10 mg (base</i> <i>equiv)</i> .....	124
ARIXTRA INJ 10/0.8ML .....	57	<i>asenapine maleate sl tab 2.5 mg (base</i> <i>equiv)</i> .....	124
ARIXTRA INJ 2.5/0.5 .....	57	<i>asenapine maleate sl tab 5 mg (base equiv)</i> .....	124
ARIXTRA INJ 5/0.4ML .....	57		

<i>ashlyna tab</i> .....	147	<i>atazanavir sulfate cap 150 mg (base equiv)</i> .....	128
ASMANEX 120 AER 220MCG .....	53	<i>atazanavir sulfate cap 200 mg (base equiv)</i> .....	128
ASMANEX 14 AER 220MCG .....	53	<i>atazanavir sulfate cap 300 mg (base equiv)</i> .....	128
ASMANEX 30 AER 110MCG .....	53	ATELVIA TAB.....	183
ASMANEX 30 AER 220MCG.....	53	<i>atenolol &amp; chlorthalidone tab 100-25 mg</i> .95	
ASMANEX 60 AER 220MCG.....	53	<i>atenolol &amp; chlorthalidone tab 50-25 mg</i> ...95	
ASMANEX 7 AER 110MCG .....	53	<i>atenolol tab 100 mg</i> .....	134
ASMANEX HFA AER 100 MCG .....	53	<i>atenolol tab 25 mg</i> .....	134
ASMANEX HFA AER 200 MCG .....	53	<i>atenolol tab 50 mg</i> .....	134
ASPARLAS INJ 3750/5ML.....	114	ATGAM INJ 250MG .....	235
<i>aspirin-81 chw 81mg</i> .....	30	ATIVAN INJ 2MG/ML .....	49
<i>aspirin adlt tab 81mg ec</i> .....	30	ATIVAN INJ 4MG/ML.....	49
<i>aspirin chew tab 81 mg</i> .....	30	ATIVAN TAB 0.5MG.....	49
<i>aspirin chld chw 81mg</i> .....	30	ATIVAN TAB 1MG.....	49
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i> .....	205	ATIVAN TAB 2MG .....	49
<i>aspirin low chw 81mg</i> .....	30	AT LAST TES .....	176
<i>aspirin low tab 81mg</i> .....	30	<i>atomoxetine hcl cap 100 mg (base equiv)</i> ..15	
<i>aspirin low tab 81mg ec</i> .....	30	<i>atomoxetine hcl cap 10 mg (base equiv)</i> ...15	
<i>aspirin tab delayed release 81 mg</i> .....	30	<i>atomoxetine hcl cap 18 mg (base equiv)</i> ...15	
ASSURE 3 TES .....	176	<i>atomoxetine hcl cap 25 mg (base equiv)</i> ..15	
ASSURE 4 TES.....	176	<i>atomoxetine hcl cap 40 mg (base equiv)</i> ..15	
ASSURE CMFRT MIS 28G.....	219	<i>atomoxetine hcl cap 60 mg (base equiv)</i> ..15	
ASSURE II TES .....	176	<i>atomoxetine hcl cap 80 mg (base equiv)</i> ..15	
ASSURE II TES CHECK .....	176	<i>atorvastatin calcium tab 10 mg (base equivalent)</i> .....	89
ASSURE LANCE MIS 21G .....	219	<i>atorvastatin calcium tab 20 mg (base equivalent)</i> .....	89
ASSURE LANCE MIS LOW FLOW .....	219	<i>atorvastatin calcium tab 40 mg (base equivalent)</i> .....	89
ASSURE LANCE MIS MICRO .....	219	<i>atorvastatin calcium tab 80 mg (base equivalent)</i> .....	89
ASSURE LANCE MIS SAFE 25G .....	219	<i>atovaquone-proguanil hcl tab 250-100 mg</i> .....	99
ASSURE LANCE MIS SAFE 30G.....	219	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i> .....	98
ASSURE PRISM TES MULTI.....	176	<i>atovaquone susp 750 mg/5ml</i> .....	44
ASSURE PRO TES .....	176	<i>atracurium besylate iv soln 100 mg/10ml</i> .....	248
ASSURE TES PLATINUM .....	176	<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i> .....	248
ASTAGRAF XL CAP 0.5MG.....	235	ATRALIN GEL 0.05% .....	159
ASTAGRAF XL CAP 1MG.....	235		
ASTAGRAF XL CAP 5MG .....	235		
ATABEX EC TAB .....	241		
ATACAND HCT TAB 16-12.5.....	95		
ATACAND HCT TAB 32-12.5 .....	95		
ATACAND HCT TAB 32-25MG .....	95		
ATACAND TAB 16MG .....	92		
ATACAND TAB 32MG .....	92		
ATACAND TAB 4MG.....	92		
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<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>		AUVI-Q INJ 0.3MG.....	285
.....	278	AVALIDE TAB 150-12.5 .....	95
<i>atropine sulfate iv soln 0.4 mg/ml</i> .....	278	AVALIDE TAB 300-12.5 .....	95
<i>atropine sulfate iv soln 1 mg/ml</i> .....	278	AVAPRO TAB 150MG.....	92
<i>atropine sulfate ophth soln 1%</i> .....	251	AVAPRO TAB 300MG.....	92
<i>atropine sulfate soln prefill syr 1 mg/10ml</i>		AVAPRO TAB 75MG .....	92
<i>(0.1 mg/ml)</i> .....	278	AVASTIN INJ .....	104
ATROPINE SUL INJ 0.05MG/1 .....	278	AVASTIN INJ 400/16ML.....	104
ATROPINE SUL INJ 0.1MG/ML .....	278	AVEED INJ 750/3ML.....	41
ATROPINE SUL INJ 1/2.5ML.....	278	AVENOVA SOL 0.01% .....	172
ATROPINE SUL INJ 8MG/20ML .....	278	<i>aviane tab</i> .....	147
ATROPINE SUL SOL 1% OP .....	251	<i>avidoxy tab 100mg</i> .....	271
ATROVENT HFA AER 17MCG .....	52	<i>avita gel 0.025%</i> .....	159
AUBAGIO TAB 14MG .....	265	AVO CREAM EMU.....	174
AUBAGIO TAB 7MG.....	265	AVODART CAP 0.5MG .....	199
<i>aubra eq tab 0.1-0.02</i> .....	147	AVONEX PEN KIT 30MCG .....	265
<i>aubra tab 0.1-0.02</i> .....	147	AVONEX PREFL KIT 30MCG .....	265
AUGMENTIN SUS ES-600 .....	261	AVSOLA INJ 100MG.....	195
AUGMENTIN TAB 500MG.....	261	AVYCAZ INJ 2-0.5GM.....	145
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AURORA LANCE MIS 30G .....	219	<i>azacididine for inj 100 mg</i> .....	102
AURORA LANCE MIS THIN 23G .....	219	AZACTAM INJ 1GM.....	46
<i>aurovela 24 tab fe 1/20</i> .....	147	AZACTAM INJ 2GM .....	46
<i>aurovela fe tab 1/20</i> .....	147	<i>azasan tab 100mg</i> .....	235
<i>aurovela fe tab 1.5/30</i> .....	147	<i>azasan tab 75 mg</i> .....	235
<i>aurovela tab 1/20</i> .....	147	AZASITE SOL 1% .....	252
<i>aurovela tab 1.5/30</i> .....	147	AZATHIOPRINE INJ 100MG .....	235
AURYXIA TAB 210MG .....	197	<i>azathioprine tab 100 mg</i> .....	235
AUSTEDO TAB 12MG.....	265	<i>azathioprine tab 50 mg</i> .....	235
AUSTEDO TAB 6MG .....	265	<i>azathioprine tab 75 mg</i> .....	235
AUSTEDO TAB 9MG .....	265	<i>azelaic acid gel 15%</i> .....	173
AUSTEDO XR TAB 12MG.....	265	<i>azelastine hcl-fluticasone prop nasal spray</i>	
AUSTEDO XR TAB 24MG.....	265	<i>137-50 mcg/act</i> .....	246
AUSTEDO XR TAB 6MG .....	265	<i>azelastine hcl nasal spray 0.1% (137</i>	
AUSTEDO XR TAB TITR KIT.....	265	<i>mcg/spray)</i> .....	247
AUTOCODE TES BLD GLUC .....	176	<i>azelastine hcl nasal spray 0.15% (205.5</i>	
AUTO LANCET MIS .....	219	<i>mcg/spray)</i> .....	247
AUTOLET PLAT MIS 1.8MM .....	219	<i>azelastine hcl ophth soln 0.05%</i> .....	255
AUTOLET PLAT MIS 2.4MM.....	219	AZELEX CRE 20% .....	159
AUTOLET PLAT MIS 3.0MM.....	219	AZILECT TAB 0.5MG.....	120
AUTOSHIELD MIS 30GX5MM .....	227	AZILECT TAB 1MG.....	120
AUVELITY TAB 45-105MG.....	68	<i>azithromycin for susp 100 mg/5ml</i> .....	216
AUVI-Q INJ 0.15MG.....	285	<i>azithromycin for susp 200 mg/5ml</i> .....	216

<i>azithromycin iv for soln 500 mg</i> .....	216	BALVERSA TAB 4MG.....	110
<i>azithromycin powd pack for susp 1 gm</i> ...	216	BALVERSA TAB 5MG.....	110
<i>azithromycin tab 250 mg</i> .....	216	<i>balziva tab</i> .....	148
<i>azithromycin tab 500 mg</i> .....	216	BANZEL SUS 40MG/ML .....	60
<i>azithromycin tab 600 mg</i> .....	216	BANZEL TAB 200MG .....	61
AZOPT SUS 1% OP .....	255	BANZEL TAB 400MG .....	61
AZOR TAB 10-20MG .....	95	BAQSIMI ONE POW 3MG/DOSE .....	76
AZOR TAB 10-40MG.....	95	BAQSIMI TWO POW 3MG/DOSE .....	76
AZOR TAB 5-20MG.....	95	BARACLUDGE SOL .....	131
AZOR TAB 5-40MG .....	95	BARACLUDGE TAB 0.5MG .....	131
AZSTARYS CAP 26.1-5.2.....	16	BARACLUDGE TAB 1MG .....	131
AZSTARYS CAP 39.2-7.8.....	16	BARHEMSYS INJ 10MG/4ML.....	83
AZSTARYS CAP 52.3-10. ....	16	BASAGLAR INJ 100UNIT .....	77
<i>aztreonam for inj 1 gm</i> .....	46	BAVENCIO INJ 20MG/ML.....	105
<i>aztreonam for inj 2 gm</i> .....	46	BAXDELA INJ 300MG.....	193
AZULFIDINE TAB 500MG.....	195	BAXDELA TAB 450MG .....	193
AZULFIDINE TAB 500MG EN .....	195	BAYER BREEZE MIS 2 TEST .....	176
<i>azurette tab</i> .....	147	<i>bayer low chw 81mg</i> .....	30
<b>B</b>		<i>bayer low tab 81mg ec</i> .....	30
<i>bacitracin intramuscular for soln 50000 unit</i> .....	43	BCG VACCINE INJ 50MG .....	283
<i>bacitracin ophth oint 500 unit/gm</i> .....	252	BD MICROTAIN MIS LANCETS.....	219
<i>bacitracin-polymyxin b ophth oint</i> .....	252	BD PEN NEEDL MIS 29GX12.7 .....	227
<i>bacitracin-polymyxin-neomycin-hc ophth</i> <i>oint 1%</i> .....	254	BD PEN NEEDL MIS 31GX5MM .....	227
<i>baclofen intrathecal inj 10 mg/20ml (500</i> <i>mcg/ml)</i> .....	244	BD PEN NEEDL MIS 31GX8MM .....	227
<i>baclofen intrathecal inj 20 mg/20ml (1000</i> <i>mcg/ml)</i> .....	244	BD PEN NEEDL MIS 32GX4MM .....	227
<i>baclofen intrathecal inj 40 mg/20ml (2000</i> <i>mcg/ml)</i> .....	244	BD PEN NEEDL MIS 32GX6MM .....	227
<i>baclofen oral soln 10 mg/5ml</i> .....	244	BD U-500 MIS 31GX6MM .....	227
<i>baclofen oral soln 5 mg/5ml</i> .....	244	BEAU RX GEL.....	173
<i>baclofen tab 10 mg</i> .....	244	BEBTELOVIMAB SOL 175/2ML.....	259
<i>baclofen tab 15 mg</i> .....	244	BECONASE AQ SUS 0.042%.....	247
<i>baclofen tab 20 mg</i> .....	244	BELBUCA MIS 150MCG.....	39
BACMIN TAB .....	239	BELBUCA MIS 300MCG.....	39
<i>bac tab</i> .....	29	BELBUCA MIS 450MCG.....	39
BACTRIM DS TAB 800-160 .....	43	BELBUCA MIS 600MCG.....	39
BACTRIM TAB 400-80MG.....	43	BELBUCA MIS 750MCG.....	39
BALCOLTRA TAB 0.1-20 .....	148	BELBUCA MIS 75MCG .....	39
BAL IN OIL INJ 100MG/ML.....	82	BELBUCA MIS 900MCG.....	39
<i>balsalazide disodium cap 750 mg</i> .....	195	BELEODAQ INJ 500MG .....	110
BALVERSA TAB 3MG.....	110	BELLA/OPIUM SUP 16.2-30 .....	278
		BELRAPZO SOL 100/4ML .....	100
		BELSOMRA TAB 10MG .....	213
		BELSOMRA TAB 15MG .....	213
		BELSOMRA TAB 20MG.....	213
		BELSOMRA TAB 5MG .....	213

<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	95	<i>benzoyl peroxide gel 8%</i> .....	159
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	95	<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i> .....	159
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	95	<i>benzphetamine hcl tab 25 mg</i> .....	15
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</i> .....	95	<i>benzphetamine hcl tab 50 mg</i> .....	15
<i>benazepril hcl tab 10 mg</i> .....	91	<i>benztropine mesylate inj 1 mg/ml</i> .....	118
<i>benazepril hcl tab 20 mg</i> .....	91	<i>benztropine mesylate tab 0.5 mg</i> .....	118
<i>benazepril hcl tab 40 mg</i> .....	91	<i>benztropine mesylate tab 1 mg</i> .....	118
<i>benazepril hcl tab 5 mg</i> .....	91	<i>benztropine mesylate tab 2 mg</i> .....	118
BENDEKA INJ 100/4ML .....	100	BEOVU INJ 6/0.05ML .....	251
BENEFIX INJ 1000UNIT .....	201	<i>bepotastine besilate ophth soln 1.5%</i> .....	255
BENEFIX INJ 2000UNIT .....	201	BEPREVE DRO 1.5%.....	255
BENEFIX INJ 250UNIT .....	201	BERINERT INJ 500UNIT .....	204
BENEFIX INJ 3000UNIT.....	201	BESIVANCE SUS 0.6% .....	252
BENEFIX INJ 500UNIT .....	201	BESPONSA INJ 0.9MG .....	105
BENICAR HCT TAB 20-12.5 .....	95	BESREMI SOL 500MCG .....	115
BENICAR HCT TAB 40-12.5 .....	95	BETADINE SOL 5% OP.....	252
BENICAR HCT TAB 40-25MG .....	95	<i>betaine powder for oral solution</i> .....	186
BENICAR TAB 20MG .....	92	<i>betamethasone dipropionate augmented cream 0.05%</i> .....	166
BENICAR TAB 40MG .....	92	<i>betamethasone dipropionate augmented gel 0.05%</i> .....	166
BENICAR TAB 5MG.....	92	<i>betamethasone dipropionate augmented lotion 0.05%</i> .....	166
BENLYSTA INJ 120MG .....	238	<i>betamethasone dipropionate augmented oint 0.05%</i> .....	166
BENLYSTA INJ 200MG/ML.....	238	<i>betamethasone dipropionate cream 0.05%</i> .....	166
BENLYSTA INJ 400MG .....	238	<i>betamethasone dipropionate lotion 0.05%</i> .....	166
BENTYL INJ 10MG/ML.....	278	<i>betamethasone dipropionate oint 0.05%</i> .....	166
BENZAC AC LIQ 5% WASH .....	159	<i>betamethasone dipropionate cream 0.05%</i> .....	166
BENZAACLIN GEL 1-5% .....	159	<i>betamethasone dipropionate lotion 0.05%</i> .....	166
BENZAACLIN GEL 1-5%PUMP .....	159	<i>betamethasone dipropionate oint 0.05%</i> .....	166
BENZALKONIUM SOL 50%.....	128	<i>betamethasone sod phosphate &amp; acetate inj susp 6 (3-3) mg/ml</i> .....	154
BENZALKONIUM SOL NF .....	128	<i>betamethasone valerate aerosol foam 0.12%</i> .....	166
BENZAMYCIN GEL 5-3%.....	159	<i>betamethasone valerate cream 0.1% (base equivalent)</i> .....	166
<i>benzepero aer 5.3%</i> .....	159	<i>betamethasone valerate lotion 0.1% (base equivalent)</i> .....	166
BENZNIDAZOLE TAB 100MG .....	43	<i>betamethasone valerate oint 0.1% (base equivalent)</i> .....	166
BENZNIDAZOLE TAB 12.5MG.....	43	BETAMETH COM INJ 7MG/ML .....	154
BENZOIN TIN NF.....	172	BETAMETH SOD INJ 12MG/2ML .....	154
<i>benzonatate cap 100 mg</i> .....	157		
<i>benzonatate cap 150 mg</i> .....	157		
<i>benzonatate cap 200 mg</i> .....	157		
<i>benzoyl peroxide-erythromycin gel 5-3%</i> .....	159		
<i>benzoyl peroxide foam 9.8%</i> .....	159		

BETAMETH SOD INJ 6MG/ML.....	154	BIMZELX INJ 160MG/ML .....	164
BETAPACE AF TAB 120MG .....	135	BINOSTO TAB 70MG .....	183
BETAPACE AF TAB 160MG .....	135	BIONECT AER 0.2% .....	174
BETAPACE AF TAB 80MG.....	135	BIONECT CRE 0.2% .....	174
BETAPACE TAB 120MG .....	135	BIONECT GEL 0.2%.....	174
BETAPACE TAB 160MG.....	136	BIOSCANNER TES GLUCOSE .....	176
BETAPACE TAB 80MG .....	135	BIOSTEP MIS 4.....	174
BETA-PHOS/AC INJ 3-3MG/ML.....	154	BIOTEL CARE TES STRIPS.....	176
BETASERON INJ 0.3MG .....	265	BIOTHRAX INJ.....	283
<i>betaxolol hcl ophth soln 0.5%</i> .....	250	<i>bismuth subcit-metronidazole-tetracycline</i>	
<i>betaxolol hcl tab 10 mg</i> .....	134	<i>cap 140-125-125 mg</i> .....	281
<i>betaxolol hcl tab 20 mg</i> .....	134	<i>bisoprolol &amp; hydrochlorothiazide tab 10-</i>	
<i>bethanechol chloride tab 10 mg</i> .....	282	<i>6.25 mg</i> .....	95
<i>bethanechol chloride tab 25 mg</i> .....	282	<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-</i>	
<i>bethanechol chloride tab 50 mg</i> .....	282	<i>6.25 mg</i> .....	95
<i>bethanechol chloride tab 5 mg</i> .....	282	<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25</i>	
BETHKIS NEB 300/4ML.....	20	<i>mg</i> .....	95
BETIMOL SOL 0.25% .....	250	<i>bisoprolol fumarate tab 10 mg</i> .....	134
BETIMOL SOL 0.5% .....	250	<i>bisoprolol fumarate tab 5 mg</i> .....	134
BETOPTIC-S SUS 0.25% OP .....	250	BIVALIR/NACL INJ 250/50 .....	59
BEVACIZUMAB INJ 2.75MG.....	251	BIVALIR/NACL INJ 500/100 .....	59
BEVACIZUMAB INJ 3.75MG .....	251	<i>bivalirudin trifluoroacetate for iv soln 250</i>	
BEVESPI AER 9-4.8MCG.....	54	<i>mg (base equiv)</i> .....	59
BEVYXXA CAP 40MG.....	57	<i>bivalirudin trifluoroacetate iv soln 250</i>	
BEVYXXA CAP 80MG .....	57	<i>mg/50ml (base eq)</i> .....	59
<i>bexarotene cap 75 mg</i> .....	115	BIVIGAM INJ 10% .....	258
<i>bexarotene gel 1%</i> .....	163	<i>bleomycin sulfate for inj 15 unit</i> .....	109
BEXSERO INJ.....	283	<i>bleomycin sulfate for inj 30 unit</i> .....	109
BEYAZ TAB .....	148	BLEPHAMIDE OIN S.O.P.....	254
BEYFORTUS INJ 100MG/ML.....	259	BLINCYTO INJ 35MCG.....	105
BEYFORTUS INJ 50/0.5ML .....	259	<i>blisovi 24 tab fe 1/20</i> .....	148
BG STAR TES BLD GLUC .....	176	<i>blisovi fe tab 1/20</i> .....	148
BIAFINE EMU.....	174	<i>blisovi fe tab 1.5/30</i> .....	148
<i>bicalutamide tab 50 mg</i> .....	107	BLOOD GLUCOS TES .....	176
BICILLIN C-R INJ 1200000 .....	261	BLOOD GLUCOS TES PREMIUM .....	176
BICILLIN C-R INJ 900/300 .....	261	BLOOD GLUCOS TES STRIPS.....	176
BICILLIN L-A INJ 1200000 .....	260	BLOXIVERZ INJ 10/10ML .....	99
BICILLIN L-A INJ 2400000 .....	260	BLOXIVERZ INJ 5MG/10ML .....	99
BICILLIN L-A INJ 600000 .....	260	BOCASAL POW .....	239
BIDIL TAB.....	142	BONJESTA TAB 20-20MG.....	83
BIJUVA CAP 1-100MG .....	190	BOOSTRIX INJ .....	277
BIKTARVY TAB.....	128	BORIC ACID GRA .....	172
BILTRICIDE TAB 600MG.....	43	<i>bortezomib for inj 3.5 mg</i> .....	110
<i>bimatoprost ophth soln 0.03%</i> .....	256	BO RTEZOMIB INJ 3.5/1.4 .....	110

BORTEZOMIB INJ 3.5MG.....	110	BRIVIACT SOL 10MG/ML .....	61
<i>bosentan tab 125 mg</i> .....	144	BRIVIACT TAB 100MG .....	61
<i>bosentan tab 62.5 mg</i> .....	143	BRIVIACT TAB 10MG.....	61
BOSULIF CAP 100MG.....	110	BRIVIACT TAB 25MG .....	61
BOSULIF CAP 50MG.....	110	BRIVIACT TAB 50MG .....	61
BOSULIF TAB 100MG .....	110	BRIVIACT TAB 75MG .....	61
BOSULIF TAB 400MG.....	110	BRIXADI SOL 128/0.36 .....	39
BOSULIF TAB 500MG.....	110	BRIXADI SOL 16/0.32 .....	39
BOTOX INJ 100UNIT .....	248	BRIXADI SOL 24/0.48 .....	39
BOTOX INJ 200UNIT.....	248	BRIXADI SOL 32/0.64 .....	39
BRAFTOVI CAP 75MG.....	110	BRIXADI SOL 64/0.18.....	39
BREEZE 2 MIS TEST.....	176	BRIXADI SOL 8/0.16ML.....	39
BRENZAVVY TAB 20MG .....	79	BRIXADI SOL 96/0.27.....	39
BREO ELLIPTA INH 100-25.....	54	<i>bromfed dm sol 2-30-10</i> .....	157
BREO ELLIPTA INH 200-25 .....	54	<i>bromfenac sodium ophth soln 0.07% (base</i>	
BREO ELLIPTA INH 50-25MCG .....	54	<i>equivalent)</i> .....	255
BREVIBLOC DS SOL 2000MG .....	134	<i>bromfenac sodium ophth soln 0.075%</i>	
BREVIBLOC INJ 10MG/ML.....	134	<i>(base equivalent)</i> .....	255
BREVIBLOC PM SOL 2500MG .....	134	<i>bromfenac sodium ophth soln 0.09% (base</i>	
BREVIBLOC SOL.....	134	<i>equiv) (once-daily)</i> .....	255
BREVIBLOC SOL 10MG/ML .....	134	<i>bromocriptine mesylate cap 5 mg (base</i>	
BREVIBLOC SOL 2000MG .....	134	<i>equivalent)</i> .....	118
BREVIBLOC SOL 2500MG .....	134	<i>bromocriptine mesylate tab 2.5 mg (base</i>	
BREVITAL SOD INJ 500MG .....	198	<i>equivalent)</i> .....	118
BREXAFEMME TAB 150MG .....	84	BROMSITE DRO 0.075% .....	256
<i>breyana aer 160/4.5</i> .....	54	BRONCHITOL CAP 40MG.....	270
<i>breyana aer 80/4.5</i> .....	54	BROVANA NEB 15MCG .....	55
BREZTRI AERO AER SPHERE .....	54	BRUKINSA CAP 80MG .....	110
BRIDION INJ 200/2ML.....	82	BRYHALI LOT 0.01% .....	166
BRIDION INJ 500/5ML.....	82	BSS PLUS SOL OP .....	256
<i>briellyn tab</i> .....	148	BSS SOL OP .....	256
BRILINTA TAB 60MG .....	205	<i>budesonide delayed release particles cap 3</i>	
BRILINTA TAB 90MG .....	205	<i>mg</i> .....	154
BRIMO/DORZO SOL 0.15-2% .....	252	<i>budesonide-formoterol fumarate dihyd</i>	
<i>brimonidine tartrate gel 0.33% (base</i>		<i>aerosol 160-4.5 mcg/act</i> .....	55
<i>equivalent)</i> .....	173	<i>budesonide-formoterol fumarate dihyd</i>	
<i>brimonidine tartrate ophth soln 0.1%</i> .....	252	<i>aerosol 80-4.5 mcg/act</i> .....	55
<i>brimonidine tartrate ophth soln 0.15%</i> ....	252	<i>budesonide inhalation susp 0.25 mg/2ml</i>	53
<i>brimonidine tartrate ophth soln 0.2%</i> .....	252	<i>budesonide inhalation susp 0.5 mg/2ml</i> ..	53
<i>brimonidine tartrate-timolol maleate ophth</i>		<i>budesonide inhalation susp 1 mg/2ml</i> .....	53
<i>soln 0.2-0.5%</i> .....	250	<i>budesonide rectal foam 2 mg/act</i> .....	42
BRINEURA KIT 150/5ML.....	186	<i>budesonide tab er 24hr 9 mg</i> .....	154
<i>brinzolamide ophth susp 1%</i> .....	255	<i>bumetanide inj 0.25 mg/ml</i> .....	181
BRIVIACT INJ 50MG/5ML.....	61	<i>bumetanide tab 0.5 mg</i> .....	181

<i>bumetanide tab 1 mg</i> .....	181	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i> .....	39
<i>bumetanide tab 2 mg</i> .....	181	<i>buprenorphine td patch weekly 10 mcg/hr</i> .....	40
BUMEX TAB 0.5MG.....	181	<i>buprenorphine td patch weekly 15 mcg/hr</i> .....	40
BUPHENYL POW .....	186	<i>buprenorphine td patch weekly 20 mcg/hr</i> .....	40
BUPHENYL TAB 500MG .....	186	<i>buprenorphine td patch weekly 5 mcg/hr</i>	40
<i>bupivacaine hcl inj 0.25%</i> .....	214	<i>buprenorphine td patch weekly 7.5 mcg/hr</i> .....	40
<i>bupivacaine hcl inj 0.5%</i> .....	214	<i>bupropion hcl (smoking deterrent) tab er</i> <i>12hr 150 mg</i> .....	267
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.25%</i> .....	215	<i>bupropion hcl tab 100 mg</i> .....	68
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.5%</i> .....	214	<i>bupropion hcl tab 75 mg</i> .....	68
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.75%</i> .....	215	<i>bupropion hcl tab er 12hr 100 mg</i> .....	68
BUPIVACAINE INJ 0.125% .....	215	<i>bupropion hcl tab er 12hr 150 mg</i> .....	68
BUPIVACAINE INJ 0.25%.....	215	<i>bupropion hcl tab er 12hr 200 mg</i> .....	68
<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000</i> .....	214	<i>bupropion hcl tab er 24hr 150 mg</i> .....	68
<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000 (pf)</i> .....	214	<i>bupropion hcl tab er 24hr 300 mg</i> .....	68
BUPIVACAINE INJ 0.5% .....	215	<i>bupropion hcl tab er 24hr 450 mg</i> .....	68
<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000</i> .....	214	<i>bupirone hcl tab 10 mg</i> .....	48
<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000 (pf)</i> .....	214	<i>bupirone hcl tab 15 mg</i> .....	48
BUPIVACAINE INJ 2.5MG/ML .....	215	<i>bupirone hcl tab 30 mg</i> .....	48
BUPIVACAINE INJ 5MG/ML .....	215	<i>bupirone hcl tab 5 mg</i> .....	48
<i>bupivacaine inj spinal</i> .....	215	<i>bupirone hcl tab 7.5 mg</i> .....	48
<i>buprenorphine hcl inj 0.3 mg/ml (base</i> <i>equiv)</i> .....	39	<i>busulfan inj 6 mg/ml</i> .....	100
<i>buprenorphine hcl-naloxone hcl sl film 12-3</i> <i>mg (base equiv)</i> .....	40	BUSULFEX INJ 6MG/ML .....	100
<i>buprenorphine hcl-naloxone hcl sl film 2-</i> <i>0.5 mg (base equiv)</i> .....	40	BUT/ASA/CAF TAB.....	29
<i>buprenorphine hcl-naloxone hcl sl film 4-1</i> <i>mg (base equiv)</i> .....	40	BUTAL/APAP CAP 50-300MG .....	29
<i>buprenorphine hcl-naloxone hcl sl film 8-2</i> <i>mg (base equiv)</i> .....	40	<i>butalbital-acetaminophen-caffeine cap 50-</i> <i>300-40 mg</i> .....	29
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5</i> <i>mg (base equiv)</i> .....	40	<i>butalbital-acetaminophen-caffeine cap 50-</i> <i>325-40 mg</i> .....	29
<i>buprenorphine hcl-naloxone hcl sl tab 8-2</i> <i>mg (base equiv)</i> .....	40	<i>butalbital-acetaminophen-caffeine tab 50-</i> <i>325-40 mg</i> .....	30
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i> .....	39	<i>butalbital-acetaminophen-caff w/ cod cap</i> <i>50-300-40-30 mg</i> .....	38
		<i>butalbital-acetaminophen-caff w/ cod cap</i> <i>50-325-40-30 mg</i> .....	38
		<i>butalbital-acetaminophen cap 50-300 mg</i> .....	29
		<i>butalbital-acetaminophen tab 25-325 mg</i>	29
		<i>butalbital-acetaminophen tab 50-325 mg</i>	29



<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i> .....	30	<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i> .....	15
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i> .....	38	<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i> .....	15
<i>butorphanol tartrate inj 1 mg/ml</i> .....	40	CALAN SR TAB 120MG .....	137
<i>butorphanol tartrate inj 2 mg/ml</i> .....	40	CALAN SR TAB 180MG .....	137
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	40	CALAN SR TAB 240MG .....	137
BUTRANS DIS 10MCG/HR .....	40	CALCIFOL WAF .....	230
BUTRANS DIS 15MCG/HR .....	40	<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i> .....	166
BUTRANS DIS 20MCG/HR .....	40	<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i> .....	167
BUTRANS DIS 5MCG/HR .....	40	<i>calcipotriene cream 0.005%</i> .....	164
BUTRANS DIS 7.5/HR .....	40	<i>calcipotriene foam 0.005%</i> .....	164
BYDUREON PEN INJ 2MG .....	77	<i>calcipotriene oint 0.005%</i> .....	164
BYETTA INJ 10MCG.....	77	<i>calcipotriene soln 0.005% (50 mcg/ml)</i> .	164
BYETTA INJ 5MCG .....	77	<i>calcitonin (salmon) inj 200 unit/ml</i> .....	183
BYLVAY CAP 1200MCG .....	194	<i>calcitonin (salmon) nasal soln 200 unit/act</i> .....	183
BYLVAY CAP 200MCG.....	194	<i>calcitrene oin 0.005%</i> .....	164
BYLVAY CAP 400MCG.....	194	<i>calcitriol cap 0.25 mcg</i> .....	186
BYLVAY CAP 600MCG.....	194	<i>calcitriol cap 0.5 mcg</i> .....	186
BYOOVIZ INJ 0.5MG .....	251	<i>calcitriol inj 1 mcg/ml</i> .....	186
BYSTOLIC TAB 10MG .....	134	<i>calcitriol oint 3 mcg/gm</i> .....	164
BYSTOLIC TAB 2.5MG .....	134	<i>calcitriol oral soln 1 mcg/ml</i> .....	186
BYSTOLIC TAB 20MG.....	134	<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i> .....	197
BYSTOLIC TAB 5MG .....	134	<i>calcium acetate (phosphate binder) tab 667 mg</i> .....	197
<b>C</b>		CALCIUM CHLO INJ 10% .....	230
CA ALGINATE MIS 12 .....	174	<i>calcium chloride inj 10%</i> .....	230
CA ALGINATE PAD 2.....	174	CALCIUM DISO INJ 1GM/5ML .....	82
CA ALGINATE PAD 4 .....	174	CALCIUM GLUC INJ 10%.....	230
CABENUVA SUS 400-600.....	128	<i>calcium gluconate inj 10%</i> .....	230
CABENUVA SUS 600-900.....	128	CALDOLOR INJ 4MG/ML .....	25
<i>cabergoline tab 0.5 mg</i> .....	189	CALDOLOR INJ 800/8ML .....	25
CABOMETYX TAB 20MG .....	110	CALQUENCE CAP 100MG .....	111
CABOMETYX TAB 40MG.....	110	CALQUENCE TAB 100MG.....	111
CABOMETYX TAB 60MG.....	111	CAMBIA POW 50MG.....	228
CADUET TAB 10-10MG .....	142	CAMCEVI INJ 42MG .....	107
CADUET TAB 10-20MG .....	142	<i>camila tab 0.35mg</i> .....	153
CADUET TAB 10-40MG .....	142	CAMPTOSAR INJ 100/5ML .....	117
CADUET TAB 10-80MG .....	142	CAMPTOSAR INJ 300/15ML .....	117
CADUET TAB 5-10MG.....	142	CAMPTOSAR INJ 40MG/2ML.....	117
CADUET TAB 5-20MG .....	142		
CADUET TAB 5-40MG .....	142		
CADUET TAB 5-80MG .....	142		
CAFECIT INJ 60MG/3ML .....	14		
CAFERGOT TAB 1-100MG .....	228		

<i>camrese lo tab</i> .....	148	CARBATROL CAP 100MG .....	61
<i>camrese tab</i> .....	148	CARBATROL CAP 200MG.....	61
CAMZYOS CAP 10MG .....	141	CARBATROL CAP 300MG.....	61
CAMZYOS CAP 15MG.....	141	<i>carbidopa &amp; levodopa orally disintegrating</i>	
CAMZYOS CAP 2.5MG.....	141	<i>tab 10-100 mg</i> .....	118
CAMZYOS CAP 5MG .....	141	<i>carbidopa &amp; levodopa orally disintegrating</i>	
CANASA SUP 1000MG .....	195	<i>tab 25-100 mg</i> .....	118
CANCIDAS INJ 50MG .....	84	<i>carbidopa &amp; levodopa orally disintegrating</i>	
CANCIDAS INJ 70MG .....	84	<i>tab 25-250 mg</i> .....	118
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa &amp; levodopa tab 10-100 mg.....</i>	118
<i>tab 16-12.5 mg</i> .....	95	<i>carbidopa &amp; levodopa tab 25-100 mg .....</i>	118
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa &amp; levodopa tab 25-250 mg.....</i>	118
<i>tab 32-12.5 mg</i> .....	95	<i>carbidopa &amp; levodopa tab er 25-100 mg..</i>	118
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa &amp; levodopa tab er 50-200 mg.</i>	118
<i>tab 32-25 mg</i> .....	95	<i>carbidopa-levodopa-entacapone tabs 12.5-</i>	
<i>candesartan cilexetil tab 16 mg</i> .....	92	<i>50-200 mg</i> .....	118
<i>candesartan cilexetil tab 32 mg</i> .....	92	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil tab 4 mg</i> .....	92	<i>18.75-75-200 mg</i> .....	118
<i>candesartan cilexetil tab 8 mg</i> .....	92	<i>carbidopa-levodopa-entacapone tabs 25-</i>	
<i>capecitabine tab 150 mg</i> .....	102	<i>100-200 mg</i> .....	118
<i>capecitabine tab 500 mg</i> .....	102	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPEX SHA 0.01% .....	167	<i>31.25-125-200 mg</i> .....	119
CAPLYTA CAP 10.5MG.....	121	<i>carbidopa-levodopa-entacapone tabs 37.5-</i>	
CAPLYTA CAP 21MG .....	121	<i>150-200 mg</i> .....	119
CAPLYTA CAP 42MG .....	121	<i>carbidopa-levodopa-entacapone tabs 50-</i>	
CAPRELSA TAB 100MG .....	111	<i>200-200 mg</i> .....	119
CAPRELSA TAB 300MG.....	111	<i>carbidopa tab 25 mg</i> .....	117
<i>captopril tab 100 mg</i> .....	91	<i>carbinoxamine maleate soln 4 mg/5ml ...</i>	86
<i>captopril tab 12.5 mg</i> .....	91	<i>carbinoxamine maleate tab 4 mg</i> .....	86
<i>captopril tab 25 mg</i> .....	91	CARBINOXAMIN TAB 6MG .....	86
<i>captopril tab 50 mg</i> .....	91	<i>carboplatin iv soln 150 mg/15ml.....</i>	100
CARAC CRE 0.5%.....	163	<i>carboplatin iv soln 450 mg/45ml .....</i>	100
CARAFATE SUS 1GM/10ML.....	279	<i>carboplatin iv soln 50 mg/5ml.....</i>	100
CARAFATE TAB 1GM .....	279	<i>carboplatin iv soln 600 mg/60ml.....</i>	100
CARBAGLU TAB 200MG .....	186	<i>carboprost tromethamine im soln 250</i>	
<i>carbamazepine cap er 12hr 100 mg</i> .....	61	<i>mcg/ml</i> .....	257
<i>carbamazepine cap er 12hr 200 mg</i> .....	61	CARDENE IV INJ 40/200ML.....	137
<i>carbamazepine cap er 12hr 300 mg</i> .....	61	CARDENE IV SOL 20/200ML.....	137
<i>carbamazepine chew tab 100 mg</i> .....	61	CARDIOPLEGIA SOL MAIN 4:1 .....	141
<i>carbamazepine susp 100 mg/5ml</i> .....	61	CARDIOPLEGIC SOL.....	141
<i>carbamazepine tab 200 mg</i> .....	61	<i>cardioplegic soln</i> .....	141
<i>carbamazepine tab er 12hr 100 mg</i> .....	61	CARDIOPLEGI SOL DEL NIDO .....	141
<i>carbamazepine tab er 12hr 200 mg</i> .....	61	CARDIOPLE MN SOL LOW TROM .....	141
<i>carbamazepine tab er 12hr 400 mg</i> .....	61	CARDIOPLE IND SOL 4:1 .....	141

CARDIOPL IND SOL 8:1 .....	141	<i>cartia xt cap 120/24hr</i> .....	137
CARDIOPL IND SOL LOW DEX8 .....	141	<i>cartia xt cap 180/24hr</i> .....	137
CARDIOPL IND SOL NON-EN 8 .....	141	<i>cartia xt cap 240/24hr</i> .....	137
CARDIOPL IND SOL PLASMA 4 .....	141	<i>cartia xt cap 300/24hr</i> .....	137
CARDIOPL IND SOL PLS/TROM .....	141	<i>carvedilol phosphate cap er 24hr 10 mg</i> .	133
CARDIOPL MN SOL 8:1.....	141	<i>carvedilol phosphate cap er 24hr 20 mg</i> .	134
CARDIOPL MN SOL PLS/TROM .....	141	<i>carvedilol phosphate cap er 24hr 40 mg</i>	134
CARDIOPL REP SOL 4:1.....	141	<i>carvedilol phosphate cap er 24hr 80 mg</i>	134
CARDIZEM CD CAP 120MG/24 .....	137	<i>carvedilol tab 12.5 mg</i> .....	134
CARDIZEM CD CAP 180MG/24 .....	137	<i>carvedilol tab 25 mg</i> .....	134
CARDIZEM CD CAP 240MG/24 .....	137	<i>carvedilol tab 3.125 mg</i> .....	134
CARDIZEM CD CAP 360MG/24 .....	137	<i>carvedilol tab 6.25 mg</i> .....	134
CARDIZEM LA TAB 120MG.....	137	CASODEX TAB 50MG.....	107
CARDIZEM LA TAB 180MG .....	137	<i>caspofungin acetate for iv soln 50 mg</i> .....	84
CARDIZEM LA TAB 240MG.....	137	<i>caspofungin acetate for iv soln 70 mg</i> .....	84
CARDIZEM LA TAB 300MG/24 .....	137	CASPOFUNGIN INJ 50MG .....	84
CARDIZEM LA TAB 360MG.....	137	CASPOFUNGIN INJ 70MG.....	84
CARDIZEM LA TAB 420MG/24 .....	137	<i>cataflam tab 50mg</i> .....	25
CARDIZEM TAB 120MG .....	137	CATAPRES-TTS DIS 0.1/24HR .....	93
CARDIZEM TAB 30MG.....	137	CATAPRES-TTS DIS 0.2/24HR .....	93
CARDIZEM TAB 60MG.....	137	CATAPRES-TTS DIS 0.3/24HR .....	93
CARDURA TAB 1MG .....	93	CATHFLO ACTI INJ 2MG.....	206
CARDURA TAB 2MG.....	93	CAYA DPR.....	217
CARDURA TAB 4MG.....	93	CAYSTON INH 75MG .....	46
CARDURA TAB 8MG.....	93	<i>cefaclor cap 250 mg</i> .....	145
CARDURA XL TAB 4MG .....	199	<i>cefaclor cap 500 mg</i> .....	145
CARDURA XL TAB 8MG.....	199	CEFACLOR ER TAB 500MG.....	145
CAREONE LANC MIS 30G.....	219	<i>cefaclor for susp 250 mg/5ml</i> .....	145
CAREONE LANC MIS THIN 23G .....	219	<i>cefadroxil cap 500 mg</i> .....	145
CARESENS 30G MIS LANCETS .....	219	<i>cefadroxil for susp 250 mg/5ml</i> .....	145
CARESENS N TES .....	176	<i>cefadroxil for susp 500 mg/5ml</i> .....	145
CARESENS N TES GLUCOSE .....	176	<i>cefadroxil tab 1 gm</i> .....	145
CARETOUCH MIS TWIST 30.....	219	CEFAZOL/DEX SOL 1GM.....	145
<i>carglumic acid soluble tab 200 mg</i> .....	186	CEFAZOL/DEX SOL 2GM .....	145
CARIMUNE NF INJ 6GM .....	258	CEFAZOLIN INJ 100GM.....	145
<i>carisoprodol tab 250 mg</i> .....	244	CEFAZOLIN INJ 1GM/50ML.....	145
<i>carisoprodol tab 350 mg</i> .....	244	CEFAZOLIN INJ 2GM .....	145
<i>carmustine for inj 100 mg</i> .....	100	CEFAZOLIN INJ 300GM .....	145
CARNITOR INJ 1GM/5ML .....	186	CEFAZOLIN INJ 3GM .....	145
CARNITOR SF SOL 1GM/10ML .....	186	<i>cefazolin sodium for inj 10 gm</i> .....	145
CARNITOR SOL 1GM/10ML .....	186	<i>cefazolin sodium for inj 1 gm</i> .....	145
CARNITOR TAB 330MG .....	186	<i>cefazolin sodium for inj 2 gm</i> .....	145
CAROSPIR SUS 25MG/5ML.....	182	<i>cefazolin sodium for inj 3 gm</i> .....	145
<i>carteolol hcl ophth soln 1%</i> .....	250	<i>cefazolin sodium for inj 500 mg</i> .....	145

<i>cefazolin sodium for iv soln 1 gm</i> .....	145	<i>ceftriaxone sodium for inj 1 gm</i> .....	146
CEFAZOLIN SOL .....	145	<i>ceftriaxone sodium for inj 250 mg</i> .....	146
<i>cefdinir cap 300 mg</i> .....	146	<i>ceftriaxone sodium for inj 2 gm</i> .....	146
<i>cefdinir for susp 125 mg/5ml</i> .....	146	<i>ceftriaxone sodium for inj 500 mg</i> .....	146
<i>cefdinir for susp 250 mg/5ml</i> .....	146	<i>ceftriaxone sodium for iv soln 1 gm</i> .....	147
CEFEPIME/DEX INJ 1GM .....	147	<i>ceftriaxone sodium for iv soln 2 gm</i> .....	147
CEFEPIME/DEX INJ 2GM .....	147	<i>ceftriaxone sodium in dextrose inj 20</i>	
<i>cefepime hcl for inj 1 gm</i> .....	147	<i>mg/ml</i> .....	147
<i>cefepime hcl for iv soln 2 gm</i> .....	147	<i>ceftriaxone sodium in dextrose inj 40</i>	
CEFEPIME INJ 1GM .....	147	<i>mg/ml</i> .....	147
CEFEPIME INJ 2G/100ML .....	147	<i>cefuroxime axetil tab 250 mg</i> .....	146
<i>cefixime cap 400 mg</i> .....	146	<i>cefuroxime axetil tab 500 mg</i> .....	146
<i>cefixime for susp 100 mg/5ml</i> .....	146	<i>cefuroxime sodium for inj 750 mg</i> .....	146
<i>cefixime for susp 200 mg/5ml</i> .....	146	<i>cefuroxime sodium for iv soln 1.5 gm</i> .....	146
CEFOTAN INJ 1GM .....	146	CELEBREX CAP 100MG .....	25
CEFOTAN INJ 2GM .....	146	CELEBREX CAP 200MG.....	25
<i>cefotaxime sodium for inj 1 gm</i> .....	146	CELEBREX CAP 400MG.....	25
<i>cefotaxime sodium for inj 2 gm</i> .....	146	CELEBREX CAP 50MG .....	25
<i>cefotetan disodium for inj 1 gm</i> .....	146	<i>celecoxib cap 100 mg</i> .....	25
<i>cefotetan disodium for inj 2 gm</i> .....	146	<i>celecoxib cap 200 mg</i> .....	25
CEFOXITIN INJ 1GM.....	146	<i>celecoxib cap 400 mg</i> .....	25
CEFOXITIN INJ 2GM .....	146	<i>celecoxib cap 50 mg</i> .....	25
<i>cefoxitin sodium for iv soln 10 gm</i> .....	146	CELESTONE INJ SOLUSPAN .....	154
<i>cefoxitin sodium for iv soln 1 gm</i> .....	146	CELEXA TAB 10MG.....	69
<i>cefoxitin sodium for iv soln 2 gm</i> .....	146	CELEXA TAB 20MG .....	69
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>		CELEXA TAB 40MG .....	69
.....	146	CELLCEPT CAP 250MG.....	235
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>		CELLCEPT IV INJ 500MG.....	235
.....	146	CELLCEPT SUS 200MG/ML.....	235
<i>cefpodoxime proxetil tab 100 mg</i> .....	146	CELLCEPT TAB 500MG.....	235
<i>cefpodoxime proxetil tab 200 mg</i> .....	146	CELONTIN CAP 300MG.....	67
<i>cefprozil for susp 125 mg/5ml</i> .....	146	CENTANY OIN 2%.....	162
<i>cefprozil for susp 250 mg/5ml</i> .....	146	<i>cephalexin cap 250 mg</i> .....	145
<i>cefprozil tab 250 mg</i> .....	146	<i>cephalexin cap 500 mg</i> .....	145
<i>cefprozil tab 500 mg</i> .....	146	<i>cephalexin cap 750 mg</i> .....	145
CEFTAZIDIME/ SOL D5W 1GM.....	146	<i>cephalexin for susp 125 mg/5ml</i> .....	145
CEFTAZIDIME/ SOL D5W 2GM .....	146	<i>cephalexin for susp 250 mg/5ml</i> .....	145
<i>ceftazidime for inj 1 gm</i> .....	146	<i>cephalexin tab 250 mg</i> .....	145
<i>ceftazidime for inj 6 gm</i> .....	146	<i>cephalexin tab 500 mg</i> .....	145
<i>ceftazidime for iv soln 2 gm</i> .....	146	CEPROTIN INJ 1000UNIT .....	205
CEFTRIAX/DEX INJ 1GM .....	146	CEPROTIN INJ 500 UNIT.....	205
CEFTRIAX/DEX INJ 2GM.....	146	CERACADE EMU.....	171
CEFTRIAZONE INJ 100GM.....	146	CERAMAX CRE .....	171
<i>ceftriaxone sodium for inj 10 gm</i> .....	146	CERDELGA CAP 84MG.....	206

CEREBYX INJ 100/2ML.....	66	<i>chlorthalidone tab 25 mg</i> .....	182
CEREBYX INJ 500/10ML .....	66	<i>chlorthalidone tab 50 mg</i> .....	182
CEREZYME INJ 400UNIT .....	206	<i>chlorzoxazone tab 250 mg</i> .....	244
CERVIDIL VAG MIS 10MG INS.....	257	<i>chlorzoxazone tab 375 mg</i> .....	244
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>		<i>chlorzoxazone tab 500 mg</i> .....	245
.....	86	<i>chlorzoxazone tab 750 mg</i> .....	245
CETRAXAL SOL 0.2%.....	257	CHOLBAM CAP 250MG .....	193
<i>cetorelix acetate for inj kit 0.25 mg</i> .....	184	CHOLBAM CAP 50MG .....	193
<i>cevimeline hcl cap 30 mg</i> .....	239	<i>cholestyramine light powder 4 gm/dose</i> ..	87
CGMS CABLE MIS .....	219	<i>cholestyramine light powder packets 4 gm</i>	
CGMS MIS SOFTWARE.....	219	.....	87
<i>charlotte 24 chw fe 1/20</i> .....	148	<i>cholestyramine powder 4 gm/dose</i> .....	87
<i>chateal eq tab 0.15/30</i> .....	148	<i>cholestyramine powder packets 4 gm</i> .....	87
<i>chateal tab 0.15/30</i> .....	148	<i>choline fenofibrate cap dr 135 mg</i>	
CHEMET CAP 100MG .....	81	<i>(fenofibric acid equiv)</i> .....	88
CHENODAL TAB 250MG.....	194	<i>choline fenofibrate cap dr 45 mg (fenofibric</i>	
<i>child asa chw 81mg</i> .....	30	<i>acid equiv)</i> .....	88
<i>chloramphenicol sodium succinate for iv inj</i>		CHOR GONADOT INJ 10000UNT .....	184
<i>1 gm</i> .....	44	CHOSEN MIS 30G .....	219
<i>chlordiazepoxide-amitriptyline tab 10-25</i>		CHOSEN MIS SAFE 28G .....	219
<i>mg</i> .....	264	<i>chromic chloride inj 40 mcg/10ml (4</i>	
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i>		<i>mcg/ml) (elemental cr)</i> .....	234
<i>mg</i> .....	264	CIALIS TAB 10MG .....	142
<i>chlordiazepoxide hcl cap 10 mg</i> .....	49	CIALIS TAB 2.5MG.....	142
<i>chlordiazepoxide hcl cap 25 mg</i> .....	49	CIALIS TAB 20MG .....	142
<i>chlordiazepoxide hcl cap 5 mg</i> .....	49	CIALIS TAB 5MG.....	142
<i>chlordiazepoxide hcl-clidinium bromide</i>		CIBINQO TAB 100MG .....	170
<i>cap 5-2.5 mg</i> .....	278	CIBINQO TAB 200MG.....	170
CHLORHEX GLU SOL 20%.....	128	CIBINQO TAB 50MG .....	170
<i>chlorhexidine gluconate soln 0.12%</i> .....	239	<i>ciclodan sol 8%</i> .....	162
<i>chlorprocaine hcl preservative free (pf) inj</i>		<i>ciclopirox gel 0.77%</i> .....	162
<i>2%</i> .....	216	<i>ciclopirox olamine cream 0.77% (base</i>	
<i>chlorprocaine hcl preservative free (pf) inj</i>		<i>equiv)</i> .....	162
<i>3%</i> .....	216	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	
<i>chloroquine phosphate tab 250 mg</i> .....	99	.....	162
<i>chloroquine phosphate tab 500 mg</i> .....	99	<i>ciclopirox shampoo 1%</i> .....	162
<i>chlorothiazide sodium for inj 500 mg</i> .....	182	<i>ciclopirox solution 8%</i> .....	162
<i>chlorpromazine hcl inj 25 mg/ml</i> .....	125	<i>cidofovir iv inj 75 mg/ml</i> .....	131
<i>chlorpromazine hcl inj 50 mg/2ml</i> .....	126	<i>cilostazol tab 100 mg</i> .....	205
<i>chlorpromazine hcl tab 100 mg</i> .....	126	<i>cilostazol tab 50 mg</i> .....	205
<i>chlorpromazine hcl tab 10 mg</i> .....	126	CILOXAN OIN 0.3% OP .....	252
<i>chlorpromazine hcl tab 200 mg</i> .....	126	CILOXAN SOL 0.3% OP .....	252
<i>chlorpromazine hcl tab 25 mg</i> .....	126	CIMDUO TAB 300-300 .....	128
<i>chlorpromazine hcl tab 50 mg</i> .....	126	CIMERLI INJ 0.3MG .....	251

CIMERLI INJ 0.5MG .....	251	CISPLATIN INJ 50MG.....	100
<i>cimetidine hcl soln 300 mg/5ml</i> .....	279	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i> .....	100
<i>cimetidine tab 200 mg</i> .....	279	CITALOPRAM CAP 30MG .....	69
<i>cimetidine tab 300 mg</i> .....	279	<i>citalopram hydrobromide oral soln 10</i>	
<i>cimetidine tab 400 mg</i> .....	279	<i>mg/5ml</i> .....	69
<i>cimetidine tab 800 mg</i> .....	279	<i>citalopram hydrobromide tab 10 mg (base</i>	
CIMZIA KIT 200MG .....	195	<i>equiv)</i> .....	69
CIMZIA PREFL KIT 200MG/ML .....	195	<i>citalopram hydrobromide tab 20 mg (base</i>	
CIMZIA START KIT 200MG/ML.....	195	<i>equiv)</i> .....	69
<i>cinacalcet hcl tab 30 mg (base equiv)</i> .....	186	<i>citalopram hydrobromide tab 40 mg (base</i>	
<i>cinacalcet hcl tab 60 mg (base equiv)</i> .....	186	<i>equiv)</i> .....	69
<i>cinacalcet hcl tab 90 mg (base equiv)</i> .....	186	CITRANATAL CAP HARMONY .....	241
CINQAIR INJ .....	52	CITRANATAL CAP MEDLEY.....	241
CINRYZE SOL 500 UNIT .....	204	CITRANATAL MIS 90 DHA .....	241
CIPRO (10%) SUS 500MG/5 .....	193	CITRANATAL MIS B-CALM.....	241
CIPRO (5%) SUS 250MG/5 .....	193	CITRANATAL PAK ASSURE .....	241
CIPRODEX SUS 0.3-0.1%.....	257	CITRANATAL PAK DHA.....	241
<i>ciprofloxacin 200 mg/100ml in d5w</i> .....	193	CITRANATAL PAK ESSENCE .....	241
<i>ciprofloxacin 400 mg/200ml in d5w</i> .....	193	CITRANATAL TAB BLOOM .....	241
<i>ciprofloxacin-dexamethasone otic susp</i>		CITRANATAL TAB RX .....	241
<i>0.3-0.1%</i> .....	257	CITRULLINE TAB EASY 1GM.....	186
<i>ciprofloxacin-fluocinolone acetone (pf) otic</i>		<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i> ..	102
<i>soln 0.3-0.025%</i> .....	257	<i>claravis cap 10mg</i> .....	159
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>		<i>claravis cap 20mg</i> .....	159
<i>equivalent)</i> .....	252	<i>claravis cap 30mg</i> .....	159
<i>ciprofloxacin hcl otic soln 0.2% (base</i>		<i>claravis cap 40mg</i> .....	159
<i>equivalent)</i> .....	257	CLARINEX-D TAB 2.5-120 .....	157
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>		CLARINEX TAB 5MG .....	86
.....	193	<i>clarithromycin for susp 125 mg/5ml</i> .....	216
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>		<i>clarithromycin for susp 250 mg/5ml</i> .....	216
.....	193	<i>clarithromycin tab 250 mg</i> .....	216
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>		<i>clarithromycin tab 500 mg</i> .....	216
.....	193	<i>clarithromycin tab er 24hr 500 mg</i> .....	216
CIPRO HC SUS OTIC.....	257	CLEANLET 28G MIS LANCETS.....	219
CIPRO TAB 250MG .....	193	<i>clemastine fumarate syrup 0.67 mg/5ml</i>	
CIPRO TAB 500MG .....	193	<i>(0.5 mg/5ml base eq)</i> .....	86
<i>cisatracurium besylate (pf) iv soln 10</i>		<i>clemastine fumarate tab 2.68 mg</i> .....	86
<i>mg/5ml (2 mg/ml)</i> .....	248	CLEOCIN CAP 150MG.....	46
<i>cisatracurium besylate (pf) iv soln 200</i>		CLEOCIN CAP 300MG .....	46
<i>mg/20ml (10 mg/ml)</i> .....	248	CLEOCIN CAP 75MG.....	46
<i>cisatracurium besylate iv soln 20 mg/10ml</i>		CLEOCIN CRE 2% VAG .....	285
<i>(2 mg/ml)</i> .....	248	CLEOCIN PED SOL 75MG/5ML .....	46
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i> .....	100	CLEOCIN PHOS INJ 300/2ML .....	46
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i> .....	100	CLEOCIN PHOS INJ 600/4ML.....	46

CLEOCIN PHOS INJ 900/6ML.....	46	<i>clindamycin phosphate inj 9 gm/60ml</i> .....	46
CLEOCIN PHOS INJ 9GM/60ML .....	46	<i>clindamycin phosphate lotion 1%</i> .....	160
CLEOCIN SUP 100MG .....	285	<i>clindamycin phosphate soln 1%</i> .....	160
CLEOCIN-T LOT 1% .....	159	<i>clindamycin phosphate swab 1%</i> .....	160
CLEVER CHECK MIS .....	219	<i>clindamycin phosphate-tretinoin gel 1.2-</i>	
CLEVER CHECK MIS 30G.....	219	<i>0.025%</i> .....	160
CLEVER CHEK TES .....	176	<i>clindamycin phosphate vaginal cream 2%</i>	
CLEVER CHEK TES AUTO CD .....	176	.....	285
CLEVER CHEK TES VOICE.....	176	<i>clindamycin phosph-benzoyl peroxide</i>	
CLEVER CHOIC TES MICRO .....	176	<i>(refrig) gel 1.2 (1)-5%</i> .....	159
CLEVIPREX EMU 0.5MG/ML .....	137	CLINDESSE CRE 2% .....	285
CLEVR CHOICE TES AUTO-CD.....	176	CLINIMIX E INJ 2.75/D5W .....	249
CLIMARA DIS 0.025MG .....	191	CLINIMIX E INJ 4.25/D10 .....	249
CLIMARA DIS 0.0375MG .....	191	CLINIMIX E INJ 4.25/D5W .....	249
CLIMARA DIS 0.05MG.....	191	CLINIMIX E INJ 5%/D15W.....	249
CLIMARA DIS 0.06MG.....	191	CLINIMIX E INJ 5%/D20W.....	249
CLIMARA DIS 0.075MG .....	191	CLINIMIX INJ 4.25/D10.....	249
CLIMARA DIS 0.1MG.....	191	CLINIMIX INJ 4.25/D5W .....	249
CLIMARA PRO DIS WEEKLY .....	190	CLINIMIX INJ 5%/D15W .....	249
<i>clindacin mis etz 1%</i> .....	159	CLINIMIX INJ 5%/D20W .....	249
<i>clindacin-p pad 1%</i> .....	159	CLINIMIX INJ 8/10 .....	249
CLINDAGEL GEL 1%.....	159	CLINIMIX INJ 8/14 .....	250
<i>clindamycin hcl cap 150 mg</i> .....	46	<i>clinisol sf inj 15%</i> .....	250
<i>clindamycin hcl cap 300 mg</i> .....	46	CLINOLIPID EMU 20% .....	249
<i>clindamycin hcl cap 75 mg</i> .....	46	<i>clobazam suspension 2.5 mg/ml</i> .....	60
<i>clindamycin palmitate hcl for soln 75</i>		<i>clobazam tab 10 mg</i> .....	60
<i>mg/5ml (base equiv)</i> .....	46	<i>clobazam tab 20 mg</i> .....	60
<i>clindamycin phosphate-benzoyl peroxide</i>		<i>clobetasol e cre 0.05%</i> .....	167
<i>gel 1.2-2.5%</i> .....	160	<i>clobetasol propionate cream 0.05%</i> .....	167
<i>clindamycin phosphate-benzoyl peroxide</i>		<i>clobetasol propionate emollient base cream</i>	
<i>gel 1.2-3.75%</i> .....	160	<i>0.05%</i> .....	167
<i>clindamycin phosphate-benzoyl peroxide</i>		<i>clobetasol propionate emulsion foam</i>	
<i>gel 1-5%</i> .....	160	<i>0.05%</i> .....	167
<i>clindamycin phosphate foam 1%</i> .....	159	<i>clobetasol propionate foam 0.05%</i> .....	167
<i>clindamycin phosphate gel 1%</i> .....	159, 160	<i>clobetasol propionate gel 0.05%</i> .....	167
<i>clindamycin phosphate in d5w iv soln 300</i>		<i>clobetasol propionate lotion 0.05%</i> .....	167
<i>mg/50ml</i> .....	46	<i>clobetasol propionate oint 0.05%</i> .....	167
<i>clindamycin phosphate in d5w iv soln 600</i>		<i>clobetasol propionate shampoo 0.05%</i> ..	167
<i>mg/50ml</i> .....	46	<i>clobetasol propionate soln 0.05%</i> .....	167
<i>clindamycin phosphate in d5w iv soln 900</i>		<i>clobetasol propionate spray 0.05%</i> .....	167
<i>mg/50ml</i> .....	46	CLOBEX LOT 0.05% .....	167
<i>clindamycin phosphate inj 300 mg/2ml</i> ..	46	CLOBEX SHA 0.05% .....	167
<i>clindamycin phosphate inj 600 mg/4ml</i> ..	46	CLOBEX SPR 0.05%.....	167
<i>clindamycin phosphate inj 900 mg/6ml</i> ..	46	<i>clocortolone pivalate cream 0.1%</i> .....	167

<i>clodan sha 0.05%</i> .....	167	<i>clotrimazole troche 10 mg</i> .....	238
CLODERM CRE 0.1%.....	167	<i>clotrimazole w/ betamethasone cream 1-</i> <i>0.05%</i> .....	162
<i>clofarabine iv soln 1 mg/ml</i> .....	102	<i>clotrimazole w/ betamethasone lotion 1-</i> <i>0.05%</i> .....	162
CLOLAR INJ 1MG/ML .....	102	<i>clozapine orally disintegrating tab 100 mg</i> .....	124
<i>clomid tab 50mg</i> .....	184	<i>clozapine orally disintegrating tab 12.5 mg</i> .....	124
<i>clomiphene citrate tab 50 mg</i> .....	184	<i>clozapine orally disintegrating tab 150 mg</i> .....	124
<i>clomipramine hcl cap 25 mg</i> .....	72	<i>clozapine orally disintegrating tab 200 mg</i> .....	124
<i>clomipramine hcl cap 50 mg</i> .....	72	<i>clozapine orally disintegrating tab 25 mg</i> .....	124
<i>clomipramine hcl cap 75 mg</i> .....	72	<i>clozapine tab 100 mg</i> .....	124
<i>clonazepam orally disintegrating tab 0.125</i> <i>mg</i> .....	60	<i>clozapine tab 200 mg</i> .....	124
<i>clonazepam orally disintegrating tab 0.25</i> <i>mg</i> .....	60	<i>clozapine tab 25 mg</i> .....	124
<i>clonazepam orally disintegrating tab 0.5 mg</i> .....	60	<i>clozapine tab 50 mg</i> .....	124
<i>clonazepam orally disintegrating tab 1 mg</i> .....	60	CLOZARIL TAB 100MG .....	124
<i>clonazepam orally disintegrating tab 2 mg</i> .....	60	CLOZARIL TAB 200MG .....	124
<i>clonazepam tab 0.5 mg</i> .....	60	CLOZARIL TAB 25MG .....	124
<i>clonazepam tab 1 mg</i> .....	60	CLOZARIL TAB 50MG.....	124
<i>clonazepam tab 2 mg</i> .....	60	C-NATE DHA CAP 28-1-200 .....	241
<i>clonidine hcl inj (for epidural infusion) 100</i> <i>mcg/ml</i> .....	30	COAGUCHEK MIS LANCETS.....	220
<i>clonidine hcl inj (for epidural infusion) 500</i> <i>mcg/ml</i> .....	30	<i>coal tar soln 20%</i> .....	173
<i>clonidine hcl tab 0.1 mg</i> .....	93	COARTEM TAB 20-120MG .....	99
<i>clonidine hcl tab 0.2 mg</i> .....	93	COCAINE HCL SOL 40MG/ML .....	246
<i>clonidine hcl tab 0.3 mg</i> .....	93	<i>codeine sulfate tab 30 mg</i> .....	31
<i>clonidine hcl tab er 12hr 0.1 mg</i> .....	15	CODEINE SULF TAB 15MG .....	31
<i>clonidine hcl tab er 24hr 0.17 mg (base</i> <i>equivalent)</i> .....	93	CODEINE SULF TAB 60MG .....	31
<i>clonidine td patch weekly 0.1 mg/24hr</i> ....	93	COLAZAL CAP 750MG .....	195
<i>clonidine td patch weekly 0.2 mg/24hr</i> ....	93	<i>colchicine cap 0.6 mg</i> .....	200
<i>clonidine td patch weekly 0.3 mg/24hr</i> ....	93	<i>colchicine tab 0.6 mg</i> .....	200
<i>clopidogrel bisulfate tab 300 mg (base</i> <i>equiv)</i> .....	205	<i>colchicine w/ probenecid tab 0.5-500 mg</i> .....	200
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i> .....	205	COLCRYS TAB 0.6MG .....	200
<i>clorazepate dipotassium tab 15 mg</i> .....	49	<i>colesevelam hcl packet for susp 3.75 gm</i> 87	
<i>clorazepate dipotassium tab 3.75 mg</i> .....	49	<i>colesevelam hcl tab 625 mg</i> .....	87
<i>clorazepate dipotassium tab 7.5 mg</i> .....	49	COLESTID GRA 5GM .....	87
<i>clotrimazole cream 1%</i> .....	162	COLESTID TAB 1GM .....	87
<i>clotrimazole soln 1%</i> .....	162	<i>colestipol hcl granule packets 5 gm</i> .....	87
		<i>colestipol hcl granules 5 gm</i> .....	87
		<i>colestipol hcl tab 1 gm</i> .....	87



<i>colistimethate sod for inj 150 mg (colistin base activity)</i> .....	47	CONZIP CAP 300MG .....	31
COLOR CONDOM MIS + LUBE .....	217	COOL BLOOD TES GLUCOSE .....	176
COLUMVI INJ 10/10ML.....	105	COPAXONE INJ 40MG/ML .....	265
COLUMVI INJ 2.5MG .....	105	COPIKTRA CAP 15MG .....	111
COLY-MYCIN M INJ 150MG.....	47	COPIKTRA CAP 25MG .....	111
COMBIGAN SOL 0.2/0.5%.....	250	COPPER INJ 0.4MG/ML .....	234
COMBIPATCH DIS .....	190	CORDRAN 80X3 TAP 4MCG/CM.....	167
COMBIVENT AER 20-100 .....	55	CORDRAN CRE 0.025% .....	167
COMBOGESIC INJ 300-1000 .....	25	CORDRAN CRE 0.05% .....	167
COMETRIQ KIT 100MG .....	111	CORDRAN LOT 0.05%.....	167
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<i>dotti dis 0.0375mg</i> .....	191	<i>doxycycline hyclate tab 75 mg</i> .....	272
<i>dotti dis 0.05mg</i> .....	191	<i>doxycycline hyclate tab delayed release</i>	
<i>dotti dis 0.075mg</i> .....	191	<i>100 mg</i> .....	272
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<i>doxepin hcl cap 150 mg</i> .....	72	<i>doxycycline monohydrate cap 75 mg</i> .....272	
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<i>doxepin hcl cap 50 mg</i> .....	72	<i>mg/5ml</i> .....	272
<i>doxepin hcl cap 75 mg</i> .....	72	<i>doxycycline monohydrate tab 100 mg</i> ...272	

<i>doxycycline monohydrate tab 150 mg</i> ....	272	<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i> .....	71
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<i>fenofibrate cap 50 mg .....</i>	88	<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml.....</i>	32
<i>fenofibrate micronized cap 130 mg .....</i>	88	<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml .....</i>	32
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<i>fluocinolone acetonide soln 0.01%</i> .....	168	<i>fluphenazine hcl tab 1 mg</i> .....	126
<i>fluocinonide cream 0.05%</i> .....	168	<i>fluphenazine hcl tab 2.5 mg</i> .....	126
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<i>fluocinonide gel 0.05%</i> .....	168	<i>flurandrenolide lotion 0.05%</i> .....	168
<i>fluocinonide oint 0.05%</i> .....	168	<i>flurandrenolide oint 0.05%</i> .....	168
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<i>fluorometholone ophth susp 0.1%</i> .....	254	<i>fluticasone propionate aer pow ba 100</i> <i>mcg/act</i> .....	53
<i>fluorouracil cream 0.5%</i> .....	163	<i>fluticasone propionate aer pow ba 250</i> <i>mcg/act</i> .....	53
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<i>fluticasone propionate hfa inhal aero 44 mcg/act</i> .....	53	FOCALIN XR CAP 35MG .....	17
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<i>fluticasone propionate nasal susp 50 mcg/act</i> .....	247	FOCALIN XR CAP 5MG .....	17
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<i>irbesartan tab 300 mg</i> .....	93	<i>isotretinoin cap 25 mg</i> .....	160
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<b>LEVICYN SOL DERMAL</b> .....	175	<i>levorphanol tartrate tab 2 mg</i> .....	34
<i>levobunolol hcl ophth soln 0.5%</i> .....	250	<i>levothyroxine sodium cap 100 mcg</i> .....	275
<i>levocarnitine inj 200 mg/ml</i> .....	187	<i>levothyroxine sodium cap 112 mcg</i> .....	275
<i>levocarnitine oral soln 1 gm/10ml (10%)</i> ..	187	<i>levothyroxine sodium cap 125 mcg</i> .....	275
<i>levocarnitine tab 330 mg</i> .....	187	<i>levothyroxine sodium cap 137 mcg</i> .....	275
<i>levocetirizine dihydrochloride soln 2.5</i> <i>mg/5ml (0.5 mg/ml)</i> .....	86	<i>levothyroxine sodium cap 13 mcg</i> .....	274
<i>levocetirizine dihydrochloride tab 5 mg</i> ...	86	<i>levothyroxine sodium cap 150 mcg</i> .....	275
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	193	<i>levothyroxine sodium cap 175 mcg</i> .....	275
<i>levofloxacin in d5w iv soln 500 mg/100ml</i> .....	193	<i>levothyroxine sodium cap 200 mcg</i> .....	275
<i>levofloxacin in d5w iv soln 750 mg/150ml</i> .....	193	<i>levothyroxine sodium cap 25 mcg</i> .....	275
<i>levofloxacin iv soln 25 mg/ml</i> .....	193	<i>levothyroxine sodium cap 50 mcg</i> .....	275
<i>levofloxacin ophth soln 0.5%</i> .....	252	<i>levothyroxine sodium cap 75 mcg</i> .....	275
<i>levofloxacin ophth soln 1.5%</i> .....	252	<i>levothyroxine sodium cap 88 mcg</i> .....	275
<i>levofloxacin oral soln 25 mg/ml</i> .....	193	<i>levothyroxine sodium for iv inj 100 mcg</i> ..	275
<i>levofloxacin tab 250 mg</i> .....	193	<i>levothyroxine sodium for iv inj 200 mcg</i> ..	275
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<i>levofloxacin tab 750 mg</i> .....	193	<i>levothyroxine sodium tab 100 mcg</i> .....	275
<i>levoleucovorin calcium for iv inj 50 mg</i> <i>(base equiv)</i> .....	116	<i>levothyroxine sodium tab 112 mcg</i> .....	275
<i>levoleucovorin calcium iv soln pf 175</i> <i>mg/17.5ml (base equiv)</i> .....	116	<i>levothyroxine sodium tab 125 mcg</i> .....	275
<i>levoleucovorin calcium iv soln pf 250</i> <i>mg/25ml (base equiv)</i> .....	116	<i>levothyroxine sodium tab 137 mcg</i> .....	275
<i>levonest tab</i> .....	149	<i>levothyroxine sodium tab 150 mcg</i> .....	275
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<i>levothyroxine sodium tab 25 mcg</i> .....	275	LIBERVANT MIS 15MG .....	60
<i>levothyroxine sodium tab 300 mcg</i> .....	275	LIBERVANT MIS 5MG .....	60
<i>levothyroxine sodium tab 50 mcg</i> .....	275	LIBERVANT MIS 7.5MG .....	60
<i>levothyroxine sodium tab 75 mcg</i> .....	275	LIBRAX CAP 5-2.5MG .....	278
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<i>levo-t tab 112mcg</i> .....	274	<i>lidocaine hcl (cardiac) iv pf soln pref syr 50</i> <i>mg/5ml(1%)</i> .....	50
<i>levo-t tab 125mcg</i> .....	274	<i>lidocaine hcl (cardiac) iv soln pref syr 100</i> <i>mg/5ml (2%)</i> .....	51
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<i>levo-t tab 25mcg</i> .....	274	<i>lidocaine hcl local inj 2%</i> .....	215
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<i>levo-t tab 50mcg</i> .....	274	<i>lidocaine hcl local preservative free (pf) inj</i> <i>1.5%</i> .....	215
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<i>methadone hcl tab 10 mg</i> .....	34	<i>methyphenidate hcl cap er 20 mg (cd)</i> .....	18
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<i>methadose tab 40mg</i> .....	34	<i>methyphenidate hcl cap er 24hr 30 mg (la)</i> .....	18
<i>methamphetamine hcl tab 5 mg</i> .....	14	<i>methyphenidate hcl cap er 24hr 30 mg (xr)</i> .....	18
<i>methazolamide tab 25 mg</i> .....	181	<i>methyphenidate hcl cap er 24hr 40 mg (la)</i> .....	18
<i>methazolamide tab 50 mg</i> .....	181	<i>methyphenidate hcl cap er 24hr 40 mg (xr)</i> .....	18
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<i>methocarbamol tab 500 mg</i> .....	245		
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<i>methylphenidate hcl soln 5 mg/5ml</i> .....	18	<i>methyltestosterone cap 10 mg</i> .....	41
<i>methylphenidate hcl tab 10 mg</i> .....	18	<i>metoclopramide hcl inj 5 mg/ml (base</i> <i>equivalent)</i> .....	194
<i>methylphenidate hcl tab 20 mg</i> .....	18	<i>metoclopramide hcl orally disintegrating</i> <i>tab 5 mg (base eq)</i> .....	194
<i>methylphenidate hcl tab 5 mg</i> .....	18	<i>metoclopramide hcl soln 5 mg/5ml (10</i> <i>mg/10ml) (base equiv)</i> .....	194
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<i>methylphenidate hcl tab er 24hr 54 mg</i> ....	18	<i>metoprolol &amp; hydrochlorothiazide tab 100-</i> <i>25 mg</i> .....	97
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 18 mg</i> .....	18	<i>metoprolol &amp; hydrochlorothiazide tab 100-</i> <i>50 mg</i> .....	97
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 27 mg</i> .....	18	<i>metoprolol &amp; hydrochlorothiazide tab 50-25</i> <i>mg</i> .....	97
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 36 mg</i> .....	18	<i>metoprolol succinate tab er 24hr 100 mg</i> <i>(tartrate equiv)</i> .....	135
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 54 mg</i> .....	18	<i>metoprolol succinate tab er 24hr 200 mg</i> <i>(tartrate equiv)</i> .....	135
<i>methylphenidate hcl tab er osmotic release</i> <i>(osm) 72 mg</i> .....	18	<i>metoprolol succinate tab er 24hr 25 mg</i> <i>(tartrate equiv)</i> .....	135
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<i>methylphenidate td patch 15 mg/9hr</i> .....	19		
<i>methylphenidate td patch 20 mg/9hr</i> .....	19		
<i>methylphenidate td patch 30 mg/9hr</i> .....	19		
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<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i> .....	135	MICRHOGAM PL INJ 50MCG .....	259
<i>metoprolol tartrate iv soln 5 mg/5ml</i> .....	135	MICROCYN LIQ .....	175
<i>metoprolol tartrate tab 100 mg</i> .....	135	MICRODOT TES .....	178
<i>metoprolol tartrate tab 25 mg</i> .....	135	<i>microgestin tab 1/20</i> .....	150
<i>metoprolol tartrate tab 37.5 mg</i> .....	135	<i>microgestin tab 1.5/30</i> .....	150
<i>metoprolol tartrate tab 50 mg</i> .....	135	<i>microgestin tab fe 1/20</i> .....	150
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<i>metronidazole cream 0.75%</i> .....	173	<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i> .....	212
<i>metronidazole gel 0.75%</i> .....	173	<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i> .....	212
<i>metronidazole gel 1%</i> .....	173	<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i> .....	212
<i>metronidazole iv soln 500 mg/100ml</i> .....	43	<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i> .....	212
<i>metronidazole lotion 0.75%</i> .....	173	<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i> .....	212
<i>metronidazole tab 250 mg</i> .....	43	<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i> .....	212
<i>metronidazole tab 500 mg</i> .....	43	<i>midazolam hcl inj 5 mg/ml (base equivalent)</i> .....	212
<i>metronidazole vaginal gel 0.75%</i> .....	285	<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i> .....	212
METRONIDAZOL INJ 500MG .....	43	<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i> .....	212
<i>metyrosine cap 250 mg</i> .....	92	<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i> .....	212
<i>mexiletine hcl cap 150 mg</i> .....	51	<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i> .....	212
<i>mexiletine hcl cap 200 mg</i> .....	51	<i>midodrine hcl tab 10 mg</i> .....	286
<i>mexiletine hcl cap 250 mg</i> .....	51	<i>midodrine hcl tab 2.5 mg</i> .....	286
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MICAFUNGIN INJ NACL .....	84	<i>miglitol tab 50 mg</i> .....	73
<i>micafungin sodium for iv soln 100 mg</i> .....	84	<i>miglustat cap 100 mg</i> .....	206
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<i>milrinone lactate in dextrose 5% iv soln 20</i> <i>mg/100ml</i> .....	141	<i>minocycline hcl tab er 24hr 80 mg</i> .....	273
<i>milrinone lactate in dextrose 5% iv soln 40</i> <i>mg/200ml</i> .....	141	<i>minocycline hcl tab er 24hr 90 mg</i> .....	273
<i>milrinone lactate iv soln 10 mg/10ml (base</i> <i>equivalent)</i> .....	141	MINOLIRA TAB 105MG .....	273
<i>milrinone lactate iv soln 20 mg/20ml (base</i> <i>equivalent)</i> .....	141	MINOLIRA TAB 135MG.....	273
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MINIVELLE DIS 0.1MG.....	192	MIRCERA INJ 200MCG .....	208
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<i>minocycline hcl cap 50 mg</i> .....	272	MIRENA IUD SYSTEM .....	153
<i>minocycline hcl cap 75 mg</i> .....	272	MIRO3D WOUND PAD 10X5X2CM .....	175
<i>minocycline hcl cap er 24hr 135 mg (base</i> <i>equivalent)</i> .....	272	MIRO3D WOUND PAD 2X2X2CM .....	175
<i>minocycline hcl cap er 24hr 45 mg (base</i> <i>equivalent)</i> .....	272	MIRO3D WOUND PAD 3X3X2CM .....	175
<i>minocycline hcl cap er 24hr 90 mg (base</i> <i>equivalent)</i> .....	272	MIRO3D WOUND PAD 5X5X2CM .....	175
<i>minocycline hcl tab 100 mg</i> .....	272	<i>mirtazapine orally disintegrating tab 15 mg</i> .....	67
<i>minocycline hcl tab 50 mg</i> .....	272	<i>mirtazapine orally disintegrating tab 30 mg</i> .....	68
<i>minocycline hcl tab 75 mg</i> .....	272	<i>mirtazapine orally disintegrating tab 45 mg</i> .....	68
<i>minocycline hcl tab er 24hr 105 mg</i> .....	273	<i>mirtazapine tab 15 mg</i> .....	68
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		<i>mirtazapine tab 45 mg</i> .....	68
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<i>mitomycin for iv soln 20 mg.....</i>	109	MORPHABOND TAB 100MG ER .....	35
<i>mitomycin for iv soln 40 mg.....</i>	109	MORPHABOND TAB 15MG ER .....	34
<i>mitomycin for iv soln 5 mg .....</i>	109	MORPHABOND TAB 30MG ER .....	34
MITOMYCIN SOL 20MG.....	109	MORPHABOND TAB 60MG ER .....	35
MITOSOL KIT 0.2MG .....	252	MORPHIN/NACL INJ 100/100 .....	35
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml) .....</i>	109	MORPHIN/NACL INJ 1MG/ML .....	35
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml) .....</i>	109	MORPHIN/NACL INJ 2MG-0.9% .....	35
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml) .....</i>	109	MORPHIN/NACL INJ 4MG-0.9% .....	35
<i>mm aspirin tab low dose .....</i>	31	<i>morphine sulfate beads cap er 24hr 120 mg .....</i>	35
M-M-R II INJ .....	284	<i>morphine sulfate beads cap er 24hr 30 mg .....</i>	35
<i>modafinil tab 100 mg .....</i>	19	<i>morphine sulfate beads cap er 24hr 45 mg .....</i>	35
<i>modafinil tab 200 mg .....</i>	19	<i>morphine sulfate beads cap er 24hr 60 mg .....</i>	35
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MODERNA VAC INJ 50/0.5ML.....	284	<i>morphine sulfate cap er 24hr 100 mg .....</i>	35
MODERNA VAC INJ COVID-19 .....	284	<i>morphine sulfate cap er 24hr 10 mg .....</i>	35
<i>moexipril hcl tab 15 mg .....</i>	91	<i>morphine sulfate cap er 24hr 20 mg .....</i>	35
<i>moexipril hcl tab 7.5 mg.....</i>	91	<i>morphine sulfate cap er 24hr 30 mg .....</i>	35
<i>molindone hcl tab 10 mg.....</i>	125	<i>morphine sulfate cap er 24hr 50 mg .....</i>	35
<i>molindone hcl tab 25 mg .....</i>	125	<i>morphine sulfate cap er 24hr 60 mg .....</i>	35
<i>molindone hcl tab 5 mg .....</i>	125	<i>morphine sulfate cap er 24hr 80 mg .....</i>	35
<i>mometasone furoate cream 0.1%.....</i>	169	<i>morphine sulfate inj pf 0.5 mg/ml.....</i>	35
<i>mometasone furoate nasal susp 50 mcg/act .....</i>	247	<i>morphine sulfate inj pf 1 mg/ml.....</i>	35
<i>mometasone furoate oint 0.1% .....</i>	169	<i>morphine sulfate iv soln 10 mg/ml.....</i>	35
<i>mometasone furoate solution 0.1% (lotion) .....</i>	169	<i>morphine sulfate iv soln 4 mg/ml .....</i>	35
<i>mondoxyne nl cap 100mg.....</i>	273	<i>morphine sulfate iv soln 8 mg/ml .....</i>	35
<i>mondoxyne nl cap 75mg.....</i>	273	<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml) .....</i>	35
MONOLET MIS LANCETS .....	223	<i>morphine sulfate oral soln 10 mg/5ml.....</i>	35
MONOLET OPD MIS LANCETS.....	223	<i>morphine sulfate oral soln 20 mg/5ml .....</i>	35
MONOLETTOR MIS LANCETS .....	223	<i>morphine sulfate tab 15 mg .....</i>	35
<i>mono-lynyah tab 0.25-35.....</i>	150	<i>morphine sulfate tab 30 mg .....</i>	35
MONOVISC INJ 88MG/4ML .....	246	<i>morphine sulfate tab er 100 mg .....</i>	36
<i>montelukast sodium chew tab 4 mg (base equiv) .....</i>	52		
<i>montelukast sodium chew tab 5 mg (base equiv) .....</i>	52		

<i>morphine sulfate tab er 15 mg</i> .....	35	MUGARD LIQ.....	239
<i>morphine sulfate tab er 200 mg</i> .....	36	MULPLETA TAB 3MG.....	208
<i>morphine sulfate tab er 30 mg</i> .....	35	MULTAQ TAB 400MG.....	51
<i>morphine sulfate tab er 60 mg</i> .....	35	MULTIGEN PLS TAB.....	209
MORPHINE SUL INJ 10MG/ML.....	35	MULTIGEN TAB.....	209
MORPHINE SUL INJ 1MG/ML.....	35	MULTIGEN TAB FOLIC.....	209
MORPHINE SUL INJ 250MG/50.....	35	<i>multipro cap</i> .....	240
MORPHINE SUL INJ 2MG/ML.....	35	<i>multivit/fl chw 0.25mg</i> .....	240
MORPHINE SUL INJ 2MG2/ML.....	35	<i>multi vit/fl chw 0.25mg</i> .....	240
MORPHINE SUL INJ 4MG/ML.....	35	<i>multivit/fl chw 0.5mg</i> .....	240
MORPHINE SUL INJ 8MG/ML.....	35	<i>multivit/fl chw 1mg</i> .....	240
MORPHINE SUL INJ NAACL.....	35	<i>multi-vit/fl dro /fe 0.25</i> .....	240
MORPHINE SUL SOL 50MG/ML.....	35	<i>multivit/fl dro 0.25mg</i> .....	240
MOTOFEN TAB 1-0.025.....	81	<i>multi-vit/fl dro 0.5mg/ml</i> .....	240
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MOTPOLY XR CAP 150MG.....	64	<i>mupirocin calcium cream 2%</i> .....	162
MOTPOLY XR CAP 200MG.....	64	<i>mupirocin oint 2%</i> .....	162
MOUNJARO INJ 10MG/0.5.....	77	MUSCUSOLICE CRE 2%.....	161
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MOUNJARO INJ 15MG/0.5.....	77	<i>mutamycin inj 40mg</i> .....	109
MOUNJARO INJ 2.5/0.5.....	77	<i>mutamycin inj 5mg</i> .....	109
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MOUNJARO INJ 7.5/0.5.....	77	MVASI INJ 400MG.....	104
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<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i> .....	193	MYCAPSSA CAP 20MG.....	189
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i> .....	252	<i>my choice tab 1.5mg</i> .....	153
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i> .....	252	MYCOBUTIN CAP 150MG.....	100
<i>moxifloxacin hcl tab 400 mg (base equiv)</i> .....	193	<i>mycophenolate mofetil cap 250 mg</i> .....	236
MOXIFLOXACIN INJ 400/250.....	193	<i>mycophenolate mofetil for oral susp 200 mg/ml</i> .....	236
MOXIFLOXACIN SOL 1MG/ML.....	252	<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i> .....	236
MOXIFLOXACIN SOL 5MG/ML.....	252	<i>mycophenolate mofetil tab 500 mg</i> .....	236
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MS CONTIN TAB 200MG ER.....	36	MYDAYIS CAP 25MG.....	14
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MYFORTIC TAB 360MG.....	236	<i>nalbuphine hcl inj 10 mg/ml</i> .....	40
MYGLUCOHEALT MIS LANC 30G .....	223	<i>nalbuphine hcl inj 20 mg/ml</i> .....	40
MYGLUCOHEALT TES BLD GLUC.....	178	NALFON CAP 400MG .....	27
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MYNATAL-Z TAB .....	242	<i>naloxone hcl inj 4 mg/10ml</i> .....	82
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MYOBLOC INJ 5000/ML.....	248	<i>naloxone hcl soln prefilled syringe 2</i>	
<i>myorisan cap 10mg</i> .....	160	<i>mg/2ml</i> .....	82
<i>myorisan cap 20mg</i> .....	160	<i>naltrexone hcl tab 50 mg</i> .....	82
<i>myorisan cap 30mg</i> .....	160	NAMENDA TAB 10MG.....	264
<i>myorisan cap 40mg</i> .....	160	NAMENDA TAB 5-10MG.....	263
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<i>my way tab 1.5mg</i> .....	153	NAMZARIC CAP 21-10MG .....	264
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<i>nabumetone tab 750 mg</i> .....	27	NAPRELAN TAB 500MG CR.....	27
<i>nadolol tab 20 mg</i> .....	136	NAPRELAN TAB 750MG CR.....	27
<i>nadolol tab 40 mg</i> .....	136	NAPROSYN SUS 125/5ML .....	27
<i>nadolol tab 80 mg</i> .....	136	NAPROSYN TAB 500MG .....	27
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NAFCILLIN INJ 2GM/100.....	262	<i>375-20 mg</i> .....	27
<i>nafcillin sodium for inj 1 gm</i> .....	262	<i>naproxen-esomeprazole magnesium tab dr</i>	
<i>nafcillin sodium for inj 2 gm</i> .....	262	<i>500-20 mg</i> .....	27
<i>nafcillin sodium for iv soln 10 gm</i> .....	262	<i>naproxen sodium tab 275 mg</i> .....	27
<i>nafcillin sodium for iv soln 1 gm</i> .....	262	<i>naproxen sodium tab 550 mg</i> .....	27
<i>nafcillin sodium for iv soln 2 gm</i> .....	262	<i>naproxen sodium tab er 24hr 375 mg (base</i>	
<i>nafrinse chw 1mg f</i> .....	231	<i>equiv)</i> .....	27
<i>nafrinse dro 0.125mg</i> .....	231	<i>naproxen sodium tab er 24hr 500 mg (base</i>	
<i>naftifine hcl cream 1%</i> .....	163	<i>equiv)</i> .....	27
<i>naftifine hcl cream 2%</i> .....	163	<i>naproxen susp 125 mg/5ml</i> .....	27
<i>naftifine hcl gel 2%</i> .....	163	<i>naproxen tab 250 mg</i> .....	27
NAFTIN GEL 1% .....	163	<i>naproxen tab 375 mg</i> .....	27

<i>naproxen tab 500 mg</i> .....	27	<i>neбиволол hcl tab 20 mg (base equivalent)</i>	
<i>naproxen tab ec 375 mg</i> .....	27	.....	135
<i>naproxen tab ec 500 mg</i> .....	27	<i>neбиволол hcl tab 5 mg (base equivalent)</i> .	135
<i>naratriptan hcl tab 1 mg (base equiv)</i> .....	229	NEBUPENT INH 300MG.....	43
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NARCAN SPR 4MG .....	82	<i>necon tab 0.5/35</i> .....	150
NARDIL TAB 15MG.....	68	NEEVO DHA CAP 27-1.13 .....	242
NAROPIN INJ 10MG/ML.....	215	<i>nefazodone hcl tab 100 mg</i> .....	70
NAROPIN INJ 2MG/ML .....	215	<i>nefazodone hcl tab 150 mg</i> .....	70
NAROPIN INJ 5MG/ML .....	215	<i>nefazodone hcl tab 200 mg</i> .....	70
NAROPIN INJ 7.5MG/ML .....	215	<i>nefazodone hcl tab 250 mg</i> .....	70
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NATALVIT TAB 75-1MG .....	242	NEOKE MCT70 POW .....	249
NATAZIA TAB.....	150	<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i>	
<i>nateglinide tab 120 mg</i> .....	79	400unt-10000unt op oin .....	252
<i>nateglinide tab 60 mg</i> .....	79	<i>neomycin-polymy-gramicid op sol 1.75-</i>	
NATESTO GEL 5.5MG .....	41	10000-0.025mg-unt-mg/ml.....	252
NATPARA INJ 100MCG .....	183	<i>neomycin-polymyxin b gu irrigation soln</i>	199
NATPARA INJ 25MCG .....	183	<i>neomycin-polymyxin-dexamethasone</i>	
NATPARA INJ 50MCG.....	183	ophth oint 0.1% .....	254
NATPARA INJ 75MCG .....	183	<i>neomycin-polymyxin-dexamethasone</i>	
NATROBA SUS 0.9%.....	173	ophth susp 0.1% .....	254
NATURAL COND MIS + LUBE .....	218	<i>neomycin-polymyxin-hc ophth susp</i> .....	254
NATURE-THROI TAB 113.75MG .....	276	<i>neomycin-polymyxin-hc otic soln 1%</i> .....	257
NATURE-THROI TAB 130MG.....	276	<i>neomycin-polymyxin-hc otic susp 3.5</i>	
NATURE-THROI TAB 146.25MG .....	276	mg/ml-10000 unit/ml-1% .....	257
NATURE-THROI TAB 16.25MG.....	275	<i>neomycin sulfate tab 500 mg</i> .....	20
NATURE THROI TAB 162.5MG .....	275	NEONATAL TAB COMPLETE .....	242
NATURE-THROI TAB 195MG.....	276	<i>neo-polycin oin hc 1%op</i> .....	254
NATURE-THROI TAB 260MG .....	276	<i>neo-polycin oin op</i> .....	252
NATURE-THROI TAB 32.5MG .....	276	NEOPROFEN SOL 10MG/ML .....	27
NATURE-THROI TAB 325MG .....	276	NEORAL CAP 100MG .....	236
NATURE-THROI TAB 48.75MG.....	276	NEORAL CAP 25MG .....	236
NATURE-THROI TAB 65MG .....	276	NEORAL SOL 100MG/ML .....	236
NATURE-THROI TAB 81.25MG.....	276	NEOSALUS AER .....	172
NATURE-THROI TAB 97.5MG .....	276	NEOSALUS CRE .....	172
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<i>neбиволол hcl tab 10 mg (base equivalent)</i>		NEOSTIG METH INJ 10/10ML .....	99
.....	135	NEOSTIG METH INJ 5MG/10ML.....	99
<i>neбиволол hcl tab 2.5 mg (base equivalent)</i>		<i>neostigmine methylsulfate iv soln 10 mg/10</i>	
.....	135	ml (1 mg/ml) .....	99

<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i> .....	99	NEXAVIR INJ.....	237
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NEPHRO-VITE TAB RX.....	239	NEXICLON XR TAB 0.17MG.....	94
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NESACAINE INJ 1%.....	216	NEXIUM CAP 40MG.....	280
NESACAINE INJ 2%.....	216	NEXIUM GRA 10MG DR.....	280
NESACAINE INJ -MPF 2%.....	216	NEXIUM GRA 2.5MG DR.....	280
NESACAINE INJ -MPF 3%.....	216	NEXIUM GRA 20MG DR.....	280
NESINA TAB 12.5MG.....	76	NEXIUM GRA 40MG DR.....	280
NESINA TAB 25MG.....	76	NEXIUM GRA 5MG DR.....	280
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NEUPOGEN INJ 300/0.5.....	208	NGENLA INJ 24/1.2ML.....	185
NEUPOGEN INJ 300/ML.....	208	NGENLA INJ 60/1.2ML.....	185
NEUPOGEN INJ 300MCG.....	208	<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	
NEUPOGEN INJ 480/0.8.....	208	.....	90
NEUPOGEN INJ 480/1.6.....	208	<i>niacin tab er 500 mg (antihyperlipidemic)</i>	
NEUPOGEN INJ 480MCG.....	208	.....	90
NEUPRO DIS 1MG/24HR.....	119	<i>niacin tab er 750 mg (antihyperlipidemic)</i>	90
NEUPRO DIS 2MG/24HR.....	119	<i>niacor tab 500mg</i> .....	90
NEUPRO DIS 3MG/24HR.....	119	NIASPAN TAB 1000 ER.....	90
NEUPRO DIS 4MG/24HR.....	119	<i>nicardipine hcl cap 20 mg</i> .....	139
NEUPRO DIS 6MG/24HR.....	119	<i>nicardipine hcl cap 30 mg</i> .....	139
NEUPRO DIS 8MG/24HR.....	119	<i>nicardipine hcl iv soln 2.5 mg/ml</i> .....	139
NEURONTIN CAP 100MG.....	64	<i>nicotine dis 7mg/24hr</i> .....	268
NEURONTIN CAP 300MG.....	64	<i>nicotine dis step 1</i> .....	269
NEURONTIN CAP 400MG.....	64	<i>nicotine gum 2mg</i> .....	269
NEURONTIN SOL 250/5ML.....	64	<i>nicotine gum 4mg</i> .....	269
NEURONTIN TAB 600MG.....	64	<i>nicotine loz mini 2mg</i> .....	269
NEURONTIN TAB 800MG.....	64	<i>nicotine polacrilex gum 2 mg</i> .....	269
NEUTEK 2TEK TES STRIPS.....	178	<i>nicotine polacrilex gum 4 mg</i> .....	269
NEUTRASAL POW.....	239	<i>nicotine polacrilex lozenge 2 mg</i> .....	269
NEVANAC SUS 0.1%.....	256	<i>nicotine polacrilex lozenge 4 mg</i> .....	269
<i>nevirapine susp 50 mg/5ml</i> .....	130	<i>nicotine pol gum 4mg mint</i> .....	269
<i>nevirapine tab 200 mg</i> .....	130	<i>nicotine pol loz 2mg mini</i> .....	269
<i>nevirapine tab er 24hr 400 mg</i> .....	130	<i>nicotine pol loz 4mg chry</i> .....	269
<i>new day tab 1.5mg</i> .....	153	<i>nicotine td dis 14mg/24h</i> .....	269
NEXAVAR TAB 200MG.....	112	<i>nicotine td dis 21mg/24h</i> .....	269
		<i>nicotine td dis 7mg/24hr</i> .....	269



<i>nicotine td dis step 1</i> .....	269	NITRO-DUR DIS 0.8MG/HR.....	48
<i>nicotine td dis step 3</i> .....	269	<i>nitrofurantoin macrocrystalline cap 100 mg</i> .....	47
<i>nicotine td patch 24hr 14 mg/24hr</i> .....	269	<i>nitrofurantoin macrocrystalline cap 25 mg</i> .....	47
<i>nicotine td patch 24hr 21 mg/24hr</i> .....	269	<i>nitrofurantoin macrocrystalline cap 50 mg</i> .....	47
NICOTROL INH.....	269	<i>nitrofurantoin monohydrate</i> <i>macrocrystalline cap 100 mg</i> .....	47
NICOTROL NS SPR 10MG/ML .....	269	<i>nitrofurantoin susp 25 mg/5ml</i> .....	47
<i>nifedipine cap 10 mg</i> .....	139	<i>nitroglycerin iv soln 100 mcg/ml in d5w</i> ...	48
<i>nifedipine cap 20 mg</i> .....	139	<i>nitroglycerin iv soln 200 mcg/ml in d5w</i> ..	48
<i>nifedipine tab er 24hr 30 mg</i> .....	139	<i>nitroglycerin iv soln 400 mcg/ml in d5w</i> ..	48
<i>nifedipine tab er 24hr 60 mg</i> .....	139	NITROGLYCER INJ 5MG/ML .....	48
<i>nifedipine tab er 24hr 90 mg</i> .....	139	<i>nitroglycerin oint 0.4%</i> .....	42
<i>nifedipine tab er 24hr osmotic release 30</i> <i>mg</i> .....	139	<i>nitroglycerin sl tab 0.3 mg</i> .....	48
<i>nifedipine tab er 24hr osmotic release 60</i> <i>mg</i> .....	139	<i>nitroglycerin sl tab 0.4 mg</i> .....	48
<i>nifedipine tab er 24hr osmotic release 90</i> <i>mg</i> .....	139	<i>nitroglycerin sl tab 0.6 mg</i> .....	48
<i>nikki tab 3-0.02mg</i> .....	150	<i>nitroglycerin td patch 24hr 0.1 mg/hr</i> .....	48
NILANDRON TAB 150MG.....	108	<i>nitroglycerin td patch 24hr 0.2 mg/hr</i> .....	48
<i>nilutamide tab 150 mg</i> .....	108	<i>nitroglycerin td patch 24hr 0.4 mg/hr</i> .....	48
<i>nimodipine cap 30 mg</i> .....	139	<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> .....	48
NINLARO CAP 2.3MG.....	112	<i>nitroglycerin tl soln 0.4 mg/spray (400</i> <i>mcg/spray)</i> .....	48
NINLARO CAP 3MG .....	112	NITROLINGUAL SPR 400MCG .....	48
NINLARO CAP 4MG .....	112	NITROMIST AER 400MCG .....	48
NIPENT INJ 10MG .....	115	<i>nitroprusside sodium iv soln 25 mg/ml</i> .....	98
NIPRIDE RTU INJ 20/100ML .....	98	NITROSTAT SUB 0.3MG .....	48
NIPRIDE RTU INJ 50/100ML .....	98	NITROSTAT SUB 0.4MG .....	48
<i>nisoldipine tab er 24hr 17 mg</i> .....	139	NITROSTAT SUB 0.6MG .....	48
<i>nisoldipine tab er 24hr 20 mg</i> .....	139	NITYR TAB 10MG.....	187
<i>nisoldipine tab er 24hr 25.5 mg</i> .....	139	NITYR TAB 2MG.....	187
<i>nisoldipine tab er 24hr 30 mg</i> .....	139	NITYR TAB 5MG .....	187
<i>nisoldipine tab er 24hr 34 mg</i> .....	139	NIVATOPIC CRE PLUS .....	172
<i>nisoldipine tab er 24hr 40 mg</i> .....	139	NIVESTYM INJ 300/0.5.....	208
<i>nisoldipine tab er 24hr 8.5 mg</i> .....	139	NIVESTYM INJ 300MCG .....	208
<i>nitazoxanide tab 500 mg</i> .....	44	NIVESTYM INJ 480/0.8.....	208
<i>nitisinone cap 10 mg</i> .....	187	NIVESTYM INJ 480MCG .....	208
<i>nitisinone cap 2 mg</i> .....	187	<i>nizatidine cap 150 mg</i> .....	279
<i>nitisinone cap 5 mg</i> .....	187	<i>nizatidine cap 300 mg</i> .....	279
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NITRO-DUR DIS 0.2MG/HR.....	48	NOCLOT-50 SOL ACD-A .....	59
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<i>nolix cre 0.05%</i> .....	169	<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> .....	151
<i>nolix lot 0.05%</i> .....	169	NORITATE CRE 1% .....	173
<i>nora-be tab 0.35mg</i> .....	153	NORLIQVA SOL 1MG/ML .....	139
NORDITROPIN INJ 10/1.5ML .....	185	<i>norlyroc tab 0.35mg</i> .....	153
NORDITROPIN INJ 15/1.5ML .....	185	NORMLGEL AG GEL .....	175
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<i>pacerone tab 200mg</i> .....	51	PANCREAZE CAP 10500UNT .....	180
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<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>		PANCREAZE CAP 21000UNT .....	180
.....	117	PANCREAZE CAP 2600UNIT .....	180
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>		PANCREAZE CAP 37000 .....	180
.....	117	PANCREAZE CAP 4200UNIT .....	180
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>		PANDEL CRE 0.1% .....	169
.....	117	PANRETIN GEL 0.1% .....	163
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i> ..117		<i>pantoprazole sodium ec tab 20 mg (base</i>	
<i>paclitaxel protein-bound particles for iv</i>		<i>equiv)</i> .....	280
<i>susp 100 mg</i> .....	117	<i>pantoprazole sodium ec tab 40 mg (base</i>	
PADCEV INJ 20MG .....	106	<i>equiv)</i> .....	280
PADCEV INJ 30MG .....	106	<i>pantoprazole sodium for delayed release</i>	
PAIN EASE AER MD STRM.....	171	<i>susp packet 40 mg</i> .....	280
PAIN EASE AER MIST.....	171	<i>pantoprazole sodium for iv soln 40 mg</i>	
PALFORZIA CAP ESCALAT .....	19	<i>(base equiv)</i> .....	280
PALFORZIA CAP LEVEL 1.....	19	PANZYGA SOL 10/100ML.....	259
PALFORZIA CAP LEVEL 10 .....	19	PANZYGA SOL 1GM/10ML .....	259
PALFORZIA CAP LEVEL 2.....	19	PANZYGA SOL 2.5/25ML .....	259
PALFORZIA CAP LEVEL 3.....	19	PANZYGA SOL 20/200ML .....	259
PALFORZIA CAP LEVEL 4.....	19	PANZYGA SOL 30/300ML .....	259
PALFORZIA CAP LEVEL 5.....	19	PANZYGA SOL 5GM/50ML.....	259



PARADIGM REA MIS TRANSMIT .....	223	<i>pediatric vitamins acd w/ fluoride soln 0.5</i>	
PARAGARD IUD T380A .....	152	<i>mg/ml.....</i>	241
<i>paraplatin inj 1000mg</i> .....	101	PEDMARK INJ 12.5GM .....	116
<i>paraplatin inj 150/15ml.....</i>	101	PEDVAX HIB INJ .....	283
<i>paraplatin inj 50mg/5ml.....</i>	101	<i>peg/nasul/c/ sol nacl/pot.....</i>	213
PAREMYD SOL 1-0.25% .....	256	<i>peg 3350-kcl-na bicarb-nacl-na sulfate for</i>	
<i>paricalcitol cap 1 mcg</i> .....	188	<i>soln 236 gm .....</i>	213
<i>paricalcitol cap 2 mcg.....</i>	188	<i>peg 3350-kcl-sod bicarb-nacl for soln 420</i>	
<i>paricalcitol cap 4 mcg.....</i>	188	<i>gm .....</i>	213
<i>paricalcitol iv soln 2 mcg/ml .....</i>	188	PEGASYS INJ .....	132
<i>paricalcitol iv soln 5 mcg/ml .....</i>	188	PEGASYS INJ 180MCG/M.....	132
PARLODEL CAP 5MG .....	119	PEGASYS INJ PROCLICK .....	132
PARLODEL TAB 2.5MG .....	119	PEGASYS KIT 180MCG/M .....	132
PARNATE TAB 10MG.....	68	PEG-PREP KIT .....	213
<i>paromomycin sulfate cap 250 mg.....</i>	20	PEMAZYRE TAB 13.5MG .....	113
<i>paroxetine hcl oral susp 10 mg/5ml (base</i>		PEMAZYRE TAB 4.5MG.....	113
<i>equiv) .....</i>	69	PEMAZYRE TAB 9MG .....	113
<i>paroxetine hcl tab 10 mg.....</i>	69	<i>pemetrexed disodium for iv soln 1000 mg</i>	
<i>paroxetine hcl tab 20 mg .....</i>	69	<i>(base equiv) .....</i>	103
<i>paroxetine hcl tab 30 mg .....</i>	69	<i>pemetrexed disodium for iv soln 100 mg</i>	
<i>paroxetine hcl tab 40 mg .....</i>	69	<i>(base equiv).....</i>	103
<i>paroxetine hcl tab er 24hr 12.5 mg .....</i>	70	<i>pemetrexed disodium for iv soln 500 mg</i>	
<i>paroxetine hcl tab er 24hr 25 mg.....</i>	70	<i>(base equiv).....</i>	103
<i>paroxetine hcl tab er 24hr 37.5 mg.....</i>	70	<i>pemetrexed disodium for iv soln 750 mg</i>	
<i>paroxetine mesylate cap 7.5 mg (base</i>		<i>(base equiv).....</i>	103
<i>equiv) .....</i>	270	PEMETREXED SOL 100/4ML.....	103
PARSABIV INJ 10MG/2ML .....	188	PEMETREXED SOL 1GM/40ML .....	103
PARSABIV INJ 2.5-0.5 .....	188	PEMETREXED SOL 500/20ML.....	103
PARSABIV INJ 5MG/ML.....	188	PEMETREXED SOL 850/34ML .....	103
PASER GRA 4GM .....	100	PEMFEXY SOL 500/20ML .....	103
PAXIL CR TAB 12.5MG .....	70	PENBRAYA INJ .....	283
PAXIL CR TAB 25MG.....	70	<i>penciclovir cream 1%.....</i>	166
PAXIL CR TAB 37.5MG.....	70	PEN GK/DEXTR INJ 20000/ML .....	260
PAXIL SUS 10MG/5ML.....	70	PEN GK/DEXTR INJ 40000/ML .....	260
PAXIL TAB 10MG.....	70	PEN GK/DEXTR INJ 60000/ML .....	260
PAXIL TAB 20MG.....	70	PEN G PROC INJ 600000 .....	260
PAXIL TAB 30MG.....	70	<i>penicillamine cap 250 mg.....</i>	234
PAXIL TAB 40MG.....	70	<i>penicillamine tab 250 mg .....</i>	234
PAXLOVID TAB 150-100.....	131	<i>penicillin g potassium for inj 20000000 unit</i>	
PAXLOVID TAB 300-100 .....	131	<i>.....</i>	260
<i>pazopanib hcl tab 200 mg (base equiv) ...</i>	112	<i>penicillin g potassium for inj 5000000 unit</i>	
PEDIAPRED SOL 5MG/5ML.....	156	<i>.....</i>	260
PEDIARIX INJ 0.5ML .....	277	<i>penicillin g sodium for inj 5000000 unit .</i>	260

<i>penicillin v potassium for soln 125 mg/5ml</i>	260	<i>perphenazine-amitriptyline tab 4-50 mg</i>	264
.....	260	<i>perphenazine tab 16 mg</i>	126
<i>penicillin v potassium for soln 250 mg/5ml</i>	260	<i>perphenazine tab 2 mg</i>	126
.....	260	<i>perphenazine tab 4 mg</i>	126
<i>penicillin v potassium tab 250 mg</i>	260	<i>perphenazine tab 8 mg</i>	126
<i>penicillin v potassium tab 500 mg</i>	260	PERSERIS INJ 120MG	122
PEN NEEDLES MIS 29GX12MM	179	PERSERIS INJ 90MG	122
PENNSAID SOL 2%	162	PERTZYE CAP 16000U	180
PENTACEL INJ	277	PERTZYE CAP 24000U	180
PENTAM 300 INJ 300MG	43	PERTZYE CAP 4000UNIT	180
<i>pentamidine isethionate for inj soln 300 mg</i>	43	PERTZYE CAP 8000UNIT	180
.....	43	PEXEVA TAB 10MG	70
<i>pentamidine isethionate for nebulization</i>		PEXEVA TAB 20MG	70
<i>soln 300 mg</i>	43	PEXEVA TAB 30MG	70
PENTASA CAP 250MG CR	195	PEXEVA TAB 40MG	70
PENTASA CAP 500MG CR	195	PFIZER 5-11Y INJ 2023-24	284
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	40	PFIZER 6M-4Y INJ 2023-24	284
.....	40	<i>pfizerpen inj 5mu</i>	260
PENTETATE CA SOL 200MG/ML	81	PFIZER VACC INJ 5-11Y	284
PENTETATE ZI SOL 200MG/ML	81	PFIZER VACC INJ 6M-4Y	284
<i>pentobarbital sodium inj 50 mg/ml</i>	211	PFIZER VACC INJ ADLT RTU	284
<i>pentoxifylline tab er 400 mg</i>	205	PFIZER VACC INJ COVID-19	284
PEPAXTO INJ 20MG	101	PHARMACY COU MIS LANCETS	224
PEPCID TAB 20MG	279	PHEBURANE MIS 483/GM	188
PEPCID TAB 40MG	279	<i>phenazo tab 200mg</i>	199
PERCOCET TAB 10-325MG	39	<i>phendimetrazine tartrate tab 35 mg</i>	15
PERCOCET TAB 2.5-325	39	<i>phenelzine sulfate tab 15 mg</i>	69
PERCOCET TAB 5-325MG	39	PHENERGAN INJ 25MG/ML	86
PERCOCET TAB 7.5-325	39	PHENERGAN INJ 50MG/ML	86
PERFECT 28G MIS LANCETS	223	<i>phenobarbital elixir 20 mg/5ml</i>	211
PERFECT 30G MIS LANCETS	224	<i>phenobarbital sodium inj 130 mg/ml</i>	211
PERFOROMIST NEB 20MCG	55	<i>phenobarbital sodium inj 65 mg/ml</i>	211
PERIDEX SOL 0.12%	239	<i>phenobarbital tab 100 mg</i>	211
PERIKABIVEN EMU	249	<i>phenobarbital tab 15 mg</i>	211
<i>perindopril erbumine tab 2 mg</i>	91	<i>phenobarbital tab 16.2 mg</i>	211
<i>perindopril erbumine tab 4 mg</i>	91	<i>phenobarbital tab 30 mg</i>	211
<i>perindopril erbumine tab 8 mg</i>	91	<i>phenobarbital tab 32.4 mg</i>	211
<i>periogard sol 0.12%</i>	239	<i>phenobarbital tab 60 mg</i>	211
PERJETA INJ 420/14ML	105	<i>phenobarbital tab 64.8 mg</i>	211
<i>permethrin cream 5%</i>	173	<i>phenobarbital tab 97.2 mg</i>	211
<i>perphenazine-amitriptyline tab 2-10 mg</i>	264	<i>phenoxybenzamine hcl cap 10 mg</i>	92
<i>perphenazine-amitriptyline tab 2-25 mg</i>	264	<i>phentermine hcl cap 15 mg</i>	15
<i>perphenazine-amitriptyline tab 4-10 mg</i>	264	<i>phentermine hcl cap 30 mg</i>	15
<i>perphenazine-amitriptyline tab 4-25 mg</i>	264	<i>phentermine hcl cap 37.5 mg</i>	15

<i>phentermine hcl tab 37.5 mg</i> .....	15	<i>pimozide tab 2 mg</i> .....	267
<i>phentolamine mesylate for inj 5 mg</i> .....	92	<i>pimtrea tab</i> .....	151
PHENYL/NACL INJ 80/250ML .....	286	<i>pindolol tab 10 mg</i> .....	136
PHENYLEP HCL INJ 0.8/10ML .....	286	<i>pindolol tab 5 mg</i> .....	136
PHENYLEP HCL INJ 1MG/10ML .....	287	<i>pioglitazone hcl-glimepiride tab 30-2 mg</i> .75	
<i>phenylephrine hcl iv soln 10 mg/ml</i> .....	287	<i>pioglitazone hcl-glimepiride tab 30-4 mg</i> 75	
<i>phenylephrine hcl ophth soln 10%</i> .....	251	<i>pioglitazone hcl-metformin hcl tab 15-500</i>	
<i>phenylephrine hcl ophth soln 2.5%</i> .....	251	<i>mg</i> .....	75
PHENYLEPHRIN INJ 0.4/10ML .....	287	<i>pioglitazone hcl-metformin hcl tab 15-850</i>	
PHENYLEPHRIN INJ 0.8MG/10 .....	287	<i>mg</i> .....	75
PHENYLEPHRIN INJ 10MG/ML .....	287	<i>pioglitazone hcl tab 15 mg (base equiv)</i> ...	79
<i>phenytek cap 200mg</i> .....	67	<i>pioglitazone hcl tab 30 mg (base equiv)</i> ...	79
<i>phenytek cap 300mg</i> .....	67	<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...	79
<i>phenytoin chew tab 50 mg</i> .....	67	<i>piperacillin sod-tazobactam na for inj 3.375</i>	
<i>phenytoin sodium extended cap 100 mg</i> .67		<i>gm (3-0.375 gm)</i> .....	261
<i>phenytoin sodium extended cap 200 mg</i> .67		<i>piperacillin sod-tazobactam sod for inj 2.25</i>	
<i>phenytoin sodium extended cap 300 mg</i> .67		<i>gm (2-0.25 gm)</i> .....	261
<i>phenytoin sodium inj 50 mg/ml</i> .....	67	<i>piperacillin sod-tazobactam sod for inj 4.5</i>	
<i>phenytoin susp 125 mg/5ml</i> .....	67	<i>gm (4-0.5 gm)</i> .....	261
PHEGO SOL .....	110	<i>piperacillin sod-tazobactam sod for inj 40.5</i>	
PHEXXI GEL .....	285	<i>gm (36-4.5 gm)</i> .....	261
<i>philith tab 0.4-35</i> .....	151	PIP LANCETS MIS 30G .....	224
PHLAG SPR .....	172	PIQRAY 200MG TAB DOSE .....	113
PHOSLYRA SOL .....	197	PIQRAY 250MG TAB DOSE .....	113
<i>phospha 250 tab neutral</i> .....	232	PIQRAY 300MG TAB DOSE .....	113
PHOSPHOLINE SOL 0.125%OP .....	251	<i>pirfenidone cap 267 mg</i> .....	271
<i>phospho-trin tab 250 neut</i> .....	232	<i>pirfenidone tab 267 mg</i> .....	271
<i>phospho-trin tab k500</i> .....	232	<i>pirfenidone tab 801 mg</i> .....	271
PHOTOFRIN INJ 75MG .....	115	<i>piroxicam cap 10 mg</i> .....	28
PHOTREXA/PHO SOL VISC KIT .....	253	<i>piroxicam cap 20 mg</i> .....	28
PHOTREXA VIS SOL 0.146-20 .....	253	<i>pitavastatin calcium tab 1 mg</i> .....	89
<i>physiolyte sol</i> .....	237	<i>pitavastatin calcium tab 2 mg</i> .....	89
<i>physiosol sol irrigat</i> .....	237	<i>pitavastatin calcium tab 4 mg</i> .....	89
<i>phytonadione inj 10 mg/ml</i> .....	287	PITOCIN INJ 10UNT/ML .....	257
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i> .287		PLAQUENIL TAB 200MG .....	99
<i>phytonadione tab 5 mg</i> .....	287	PLASMA-LYTE INJ -148 .....	231
PIFELTRO TAB 100MG .....	130	PLASMA-LYTE INJ -A .....	231
<i>pilocarpine hcl ophth soln 1%</i> .....	251	PLAVIX TAB 75MG .....	206
<i>pilocarpine hcl ophth soln 2%</i> .....	251	PLEGISOL SOL .....	141
<i>pilocarpine hcl ophth soln 4%</i> .....	251	PLEGRIDY INJ .....	266
<i>pilocarpine hcl tab 5 mg</i> .....	239	PLEGRIDY INJ PEN .....	266
<i>pilocarpine hcl tab 7.5 mg</i> .....	239	PLEGRIDY INJ STARTER .....	266
<i>pimecrolimus cream 1%</i> .....	170	PLEGRIDY PEN INJ STARTER .....	266
<i>pimozide tab 1 mg</i> .....	267	<i>plenamine inj 15%</i> .....	250

PLENITY CAP .....	15	<i>posaconazole susp 40 mg/ml .....</i>	85
PLENVU SOL .....	213	<i>posaconazole tab delayed release 100 mg</i>	
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20</i>		<i>.....</i>	85
<i>mg/ml) .....</i>	210	POSIMIR SOL 660/5ML.....	215
PLIAGLIS CRE 7-7%.....	171	<i>pot &amp; sod citrates w/ cit ac soln 550-500-</i>	
PNEUMOVAX 23 INJ 25/0.5 .....	283	<i>334 mg/5ml.....</i>	198
<i>pnv-dha cap.....</i>	242	<i>potassium acetate inj 2 meq/ml .....</i>	233
PNV-DHA CAP DOCUSATE.....	242	<i>potassium chloride 20 meq/l (0.15%) in</i>	
PNV FOLIC AC TAB + IRON.....	242	<i>dextrose 5% inj .....</i>	231
PNV-OMEGA CAP .....	242	<i>potassium chloride cap er 10 meq.....</i>	233
PNV PRENATAL TAB PLUS .....	242	<i>potassium chloride cap er 8 meq .....</i>	233
<i>pnv-select tab.....</i>	242	<i>potassium chloride inj 10 meq/100ml .....</i>	233
PNV TABS TAB 29-1MG .....	242	<i>potassium chloride inj 10 meq/50ml.....</i>	233
POCKETCHEM TES EZ.....	179	<i>potassium chloride inj 20 meq/100ml.....</i>	233
PODIAPN CAP .....	180	<i>potassium chloride inj 20 meq/50ml .....</i>	233
<i>podofilox gel 0.5% .....</i>	170	<i>potassium chloride inj 2 meq/ml .....</i>	233
<i>podofilox soln 0.5% .....</i>	170	<i>potassium chloride inj 40 meq/100ml.....</i>	233
POLIVY INJ 140MG .....	106	<i>potassium chloride microencapsulated crys</i>	
POLIVY INJ 30MG.....	106	<i>er tab 10 meq .....</i>	233
<i>polocaine inj 1% .....</i>	215	<i>potassium chloride microencapsulated crys</i>	
<i>polocaine inj 2%.....</i>	215	<i>er tab 15 meq .....</i>	233
<i>polocaine inj mpf 1.5% .....</i>	215	<i>potassium chloride microencapsulated crys</i>	
<i>polocaine inj -mpf 1%.....</i>	215	<i>er tab 20 meq.....</i>	233
<i>polocaine inj -mpf 2% .....</i>	215	<i>potassium chloride oral soln 10% (20</i>	
<i>polycin oin op .....</i>	253	<i>meq/15ml) .....</i>	233
<i>polymyxin b sulfate for inj 500000 unit ....</i>	47	<i>potassium chloride oral soln 20% (40</i>	
<i>polymyxin b-trimethoprim ophth soln</i>		<i>meq/15ml) .....</i>	233
<i>10000 unit/ml-0.1% .....</i>	253	<i>potassium chloride powder packet 20 meq</i>	
POLY-VI-FLOR CHW 0.25MG.....	241	<i>.....</i>	233
POLY-VI-FLOR CHW 0.5MG.....	241	<i>potassium chloride tab er 10 meq.....</i>	233
POLY-VI-FLOR CHW 1MG .....	241	<i>potassium chloride tab er 20 meq (1500</i>	
POLY-VI-FLOR CHW W/IRON .....	240	<i>mg) .....</i>	233
POLY-VI-FLOR MIS FS 0.25 .....	241	<i>potassium chloride tab er 8 meq (600 mg)</i>	
POLY-VI-FLOR MIS FS 0.5MG.....	241	<i>.....</i>	233
POLY-VI-FLOR SUS /IRON.....	240	<i>potassium citrate &amp; citric acid soln 1100-</i>	
POLY-VI-FLOR SUS 0.25/ML.....	241	<i>334 mg/5ml.....</i>	198
POMALYST CAP 1MG.....	108	<i>potassium citrate tab er 10 meq (1080 mg)</i>	
POMALYST CAP 2MG .....	108	<i>.....</i>	198
POMALYST CAP 3MG .....	108	<i>potassium citrate tab er 15 meq (1620 mg)</i>	
POMALYST CAP 4MG .....	108	<i>.....</i>	198
PONVORY TAB 20MG.....	266	<i>potassium citrate tab er 5 meq (540 mg)198</i>	
PONVORY TAB STARTER.....	266	POTASSIUM INJ 100MEQ.....	233
<i>portia-28 tab .....</i>	151	POTASSIUM INJ PHOSPHAT .....	232
PORTRAZZA INJ 800/50ML.....	107	<i>potassium iodide oral soln 1 gm/ml .....</i>	158

<i>potassium phosphates inj 150 mm/50ml</i> <i>(phos) 220 meq/50ml (k)</i> .....	232	PRAMOSONE CRE 1-1%	169
<i>potassium phosphates inj 15 mm/5ml</i> <i>(phos) 22 meq/5ml (k)</i> .....	232	PRAMOSONE LOT 1%	169
<i>potassium phosphates inj 45 mm/15ml</i> <i>(phos) 66 meq/15ml (k)</i> .....	232	PRAMOSONE LOT 2.5%	169
POT CHL/NACL INJ 20MEQ/L.....	231	PRAMOX GEL 1%	171
POT CHL/NACL INJ 40MEQ/L.....	231	<i>prasugrel hcl tab 10 mg (base equiv)</i> .....	206
POT CHLORIDE INJ 10MEQ.....	233	<i>prasugrel hcl tab 5 mg (base equiv)</i> .....	206
POT CHLORIDE INJ 20MEQ.....	233	<i>pravastatin sodium tab 10 mg</i> .....	89
POT CHLORIDE INJ 40MEQ.....	233	<i>pravastatin sodium tab 20 mg</i> .....	89
POTELIGEO INJ 20MG/5ML.....	106	<i>pravastatin sodium tab 40 mg</i> .....	89
<i>pot phos monobasic w/sod phos di &amp;</i> <i>monobas tab 155-852-130mg</i> .....	232	<i>pravastatin sodium tab 80 mg</i> .....	89
POVIDONE IOD SOL 5%.....	253	PRAXBIND INJ 2.5/50.....	82
PRADAXA CAP 110MG.....	59	<i>praziquantel tab 600 mg</i> .....	43
PRADAXA CAP 150MG.....	59	<i>prazosin hcl cap 1 mg</i> .....	94
PRADAXA CAP 75MG.....	59	<i>prazosin hcl cap 2 mg</i> .....	94
PRAKETAMIDE CRE 5%.....	161	<i>prazosin hcl cap 5 mg</i> .....	94
PRALUENT INJ 150MG/ML.....	90	PR BENZOYL LIQ 7% WASH.....	160
PRALUENT INJ 75MG/ML.....	90	PR CREAM KIT.....	172
<i>pramipexole dihydrochloride tab 0.125 mg</i> .....	119	PRECEDEX INJ 1000/250.....	212
<i>pramipexole dihydrochloride tab 0.25 mg</i> .....	119	PRECEDEX INJ 100MCG.....	212
<i>pramipexole dihydrochloride tab 0.5 mg</i> .....	119	PRECEDEX INJ 200/50ML.....	212
<i>pramipexole dihydrochloride tab 0.75 mg</i> .....	119	PRECEDEX INJ 400/100.....	212
<i>pramipexole dihydrochloride tab 1.5 mg</i> .....	119	PRECEDEX INJ 80/20ML.....	212
<i>pramipexole dihydrochloride tab 1 mg</i> .....	119	PRECISION PT TES OF CARE.....	179
<i>pramipexole dihydrochloride tab er 24hr</i> <i>0.375 mg</i> .....	119	PRECISION TES PCX.....	179
<i>pramipexole dihydrochloride tab er 24hr</i> <i>0.75 mg</i> .....	119	PRECISION TES PCX PLUS.....	179
<i>pramipexole dihydrochloride tab er 24hr 1.5</i> <i>mg</i> .....	120	PRECISION TES QID.....	179
<i>pramipexole dihydrochloride tab er 24hr</i> <i>2.25 mg</i> .....	120	PRECISION TES SOF-TACT.....	179
<i>pramipexole dihydrochloride tab er 24hr</i> <i>3.75 mg</i> .....	120	PRECISION TES XTRA.....	179
<i>pramipexole dihydrochloride tab er 24hr 3</i> <i>mg</i> .....	120	PRECOSE TAB 100MG.....	73
<i>pramipexole dihydrochloride tab er 24hr</i> <i>4.5 mg</i> .....	120	PRECOSE TAB 25MG.....	73
		PRECOSE TAB 50MG.....	73
		PRED FORTE SUS 1% OP.....	254
		PRED-G S.O.P OIN OP.....	254
		PRED-G SUS OP.....	254
		PRED MILD SUS 0.12% OP.....	254
		<i>prednicarbate oint 0.1%</i> .....	169
		<i>prednisolone acetate ophth susp 1%</i> .....	254
		<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i> .....	156
		<i>prednisolone sod phos orally disintegr tab</i> <i>10 mg (base eq)</i> .....	156
		<i>prednisolone sod phos orally disintegr tab</i> <i>15 mg (base eq)</i> .....	156

<i>prednisolone sod phos orally disintegr tab</i>	PREMARIN TAB 0.9MG .....	192
30 mg (base eq) .....	PREMARIN TAB 1.25MG .....	193
<i>prednisolone sod phosphate oral soln 10</i>	PREMARIN VAG CRE 0.625MG .....	285
mg/5ml (base equiv) .....	PREMASOL SOL 10% .....	250
<i>prednisolone sod phosphate oral soln 15</i>	PREMESISRX TAB .....	242
mg/5ml (base equiv) .....	PREMPHASE TAB .....	191
<i>prednisolone sod phosphate oral soln 20</i>	PREMPRO TAB .....	191
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REVELA POW 2.4GM .....	197	REVATIO TAB 20MG.....	144
REVELA TAB 800MG.....	197	REVCIVI INJ 1.6MG/ML .....	188
<i>repaglinide tab 0.5 mg</i> .....	79	REVEAL TES BLD GLUC.....	179
<i>repaglinide tab 1 mg</i> .....	79	REVLIMID CAP 10MG .....	235
<i>repaglinide tab 2 mg</i> .....	79	REVLIMID CAP 15MG .....	235
REPATHA INJ 140MG/ML .....	90	REVLIMID CAP 2.5MG.....	235
REPATHA PUSH INJ 420/3.5.....	90	REVLIMID CAP 20MG .....	235
REPATHA SURE INJ 140MG/ML.....	90	REVLIMID CAP 25MG.....	235
REQ 49+ TAB.....	240	REVLIMID CAP 5MG.....	235
<i>resorcinol-sulfur lotion 2-5%</i> .....	160	<i>revonto inj 20mg</i> .....	246
RESTASIS EMU 0.05% OP .....	253	REXTOVY SPR 4/0.25ML.....	82
RESTASIS MUL EMU 0.05% OP.....	253	REXULTI TAB 0.25MG.....	127
RESTORA RX CAP 60-1.25 .....	81	REXULTI TAB 0.5MG .....	127
RESTORE SILV PAD 2.....	175	REXULTI TAB 1MG .....	127
RESTORE SILV PAD 4 .....	175	REXULTI TAB 2MG.....	127
RESTORIL CAP 15MG.....	212	REXULTI TAB 3MG .....	127
RESTORIL CAP 22.5MG .....	212	REXULTI TAB 4MG .....	127
RESTORIL CAP 30MG.....	212	REYATAZ CAP 200MG .....	130
RESTORIL CAP 7.5MG .....	212	REYATAZ CAP 300MG .....	130
RETACRIT INJ 10000UNT .....	209	REYATAZ POW 50MG .....	130
RETACRIT INJ 20000UNI .....	209	REYVOW TAB 100MG .....	229
RETACRIT INJ 2000UNIT .....	209	REYVOW TAB 50MG .....	229
RETACRIT INJ 3000UNIT .....	209	REZDIFFRA TAB 100MG .....	194
RETACRIT INJ 40000UNT .....	209	REZDIFFRA TAB 60MG.....	194
RETACRIT INJ 4000UNIT.....	209	REZDIFFRA TAB 80MG.....	194
RETEVMO CAP 40MG .....	113	REZIPRES INJ .....	287
RETEVMO CAP 80MG .....	113	REZIPRES SOL .....	287
RETIN-A CRE 0.025%.....	161	REZUROCK TAB 200MG.....	235
RETIN-A CRE 0.05%.....	161	REZVOGLAR INJ 100UT/ML.....	79
RETIN-A CRE 0.1% .....	160	REZZAYO INJ 200MG .....	84
RETIN-A GEL 0.01% .....	161	RHOFADE CRE 1% .....	173
RETIN-A GEL 0.025%.....	161	RHOGAM PLUS INJ 300MCG.....	259
RETIN-A MICR GEL 0.04% .....	161	RHOPHYLAC INJ 1500/2ML .....	259
RETIN-A MICR GEL 0.04%PMP .....	161	RHOPRESSA SOL 0.02% .....	253
RETIN-A MICR GEL 0.06% .....	161	RIASTAP SOL 1GM.....	203
RETIN-A MICR GEL 0.08% .....	161	<i>ribavirin cap 200 mg</i> .....	132
RETIN-A MICR GEL 0.1%.....	161	<i>ribavirin tab 200 mg</i> .....	132
RETIN-A MICR GEL 0.1%PUMP .....	161	RIDAURA CAP 3MG .....	24

<i>rifabutin cap 150 mg</i> .....	100	<i>risperidone orally disintegrating tab 0.25 mg</i> .....	123
RIFADIN INJ 600 MG .....	100	<i>risperidone orally disintegrating tab 0.5 mg</i> .....	123
<i>rifampin cap 150 mg</i> .....	100	<i>risperidone orally disintegrating tab 1 mg</i> .....	123
<i>rifampin cap 300 mg</i> .....	100	<i>risperidone orally disintegrating tab 2 mg</i> .....	123
<i>rifampin for inj 600 mg</i> .....	100	<i>risperidone orally disintegrating tab 3 mg</i> .....	123
RIGHTEST ALT MIS ADAPTOR .....	224	<i>risperidone orally disintegrating tab 4 mg</i> .....	123
RIGHTEST MIS GL300.....	224	<i>risperidone soln 1 mg/ml</i> .....	123
RIGHTEST TES GS100.....	179	<i>risperidone tab 0.25 mg</i> .....	123
RIGHTEST TES GS300 .....	179	<i>risperidone tab 0.5 mg</i> .....	123
RIGHTEST TES GS550 .....	179	<i>risperidone tab 1 mg</i> .....	123
RILUTEK TAB 50MG .....	247	<i>risperidone tab 2 mg</i> .....	123
<i>riluzole tab 50 mg</i> .....	247	<i>risperidone tab 3 mg</i> .....	123
<i>rimantadine hydrochloride tab 100 mg</i> ...	133	<i>risperidone tab 4 mg</i> .....	123
RIMSO-50 SOL 50% .....	199	RITALIN LA CAP 10MG .....	19
<i>ringer's solution</i> .....	231	RITALIN LA CAP 20MG.....	19
<i>ringer's solution for irrigation</i> .....	237	RITALIN LA CAP 30MG.....	19
RINVOQ TAB 15MG ER .....	23	RITALIN LA CAP 40MG.....	19
RINVOQ TAB 30MG ER .....	23	RITALIN TAB 10MG.....	19
RINVOQ TAB 45MG ER .....	23	RITALIN TAB 20MG.....	19
RIOMET SOL 500/5ML .....	76	RITALIN TAB 5MG .....	19
<i>risedronate sodium tab 150 mg</i> .....	183	<i>ritonavir tab 100 mg</i> .....	130
<i>risedronate sodium tab 30 mg</i> .....	183	RITUXAN INJ 100MG .....	106
<i>risedronate sodium tab 35 mg</i> .....	183	RITUXAN INJ 500MG .....	106
<i>risedronate sodium tab 5 mg</i> .....	183	RITUXAN INJ HYCELA.....	110
<i>risedronate sodium tab delayed release 35 mg</i> .....	183	<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i> .....	264
RISPERDAL INJ 12.5MG.....	122	<i>rivastigmine tartrate cap 3 mg (base equivalent)</i> .....	264
RISPERDAL INJ 25MG .....	122	<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i> .....	264
RISPERDAL INJ 37.5MG .....	122	<i>rivastigmine tartrate cap 6 mg (base equivalent)</i> .....	264
RISPERDAL INJ 50MG .....	122	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i> .....	264
RISPERDAL SOL 1MG/ML .....	122	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i> .....	264
RISPERDAL TAB 0.5MG.....	122	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i> .....	264
RISPERDAL TAB 1MG.....	122	<i>rivelsa tab</i> .....	151
RISPERDAL TAB 2MG .....	122	RIVFLOZA INJ 128/0.8 .....	199
RISPERDAL TAB 3MG .....	122		
RISPERDAL TAB 4MG .....	123		
<i>risperidone microspheres for im extended rel susp 12.5 mg</i> .....	123		
<i>risperidone microspheres for im extended rel susp 25 mg</i> .....	123		
<i>risperidone microspheres for im extended rel susp 37.5 mg</i> .....	123		
<i>risperidone microspheres for im extended rel susp 50 mg</i> .....	123		

RIVFLOZA INJ 160MG/ML .....	199	<i>ropinirole hydrochloride tab er 24hr 6 mg</i>	
RIVFLOZA INJ 80/0.5ML .....	199	<i>(base equivalent)</i> .....	120
RIXUBIS INJ 1000UNIT .....	204	<i>ropinirole hydrochloride tab er 24hr 8 mg</i>	
RIXUBIS INJ 2000UNIT .....	204	<i>(base equivalent)</i> .....	120
RIXUBIS INJ 250 UNIT .....	203	<i>ropivacaine hcl inj 10 mg/ml</i> .....	215
RIXUBIS INJ 3000UNIT .....	204	<i>ropivacaine hcl inj 2 mg/ml</i> .....	215
RIXUBIS INJ 500UNIT .....	204	<i>ropivacaine hcl inj 5 mg/ml</i> .....	215
<i>rizatriptan benzoate oral disintegrating tab</i>		<i>ropivacaine hcl inj 7.5 mg/ml</i> .....	215
<i>10 mg (base eq)</i> .....	229	ROPIVACAINE INJ 0.5% .....	215
<i>rizatriptan benzoate oral disintegrating tab</i>		ROPIVACAINE INJ 2MG/ML .....	215
<i>5 mg (base eq)</i> .....	229	<i>rosadan cre 0.75%</i> .....	173
<i>rizatriptan benzoate tab 10 mg (base</i>		<i>rosadan gel 0.75%</i> .....	173
<i>equivalent)</i> .....	229	<i>rosuvastatin calcium tab 10 mg</i> .....	89
<i>rizatriptan benzoate tab 5 mg (base</i>		<i>rosuvastatin calcium tab 20 mg</i> .....	90
<i>equivalent)</i> .....	229	<i>rosuvastatin calcium tab 40 mg</i> .....	90
ROBAXIN INJ 100MG/ML .....	245	<i>rosuvastatin calcium tab 5 mg</i> .....	89
ROBINUL FORT TAB 2MG .....	279	ROSZET TAB 10-10MG .....	87
ROBINUL TAB 1MG .....	279	ROSZET TAB 20-10MG .....	87
ROCALTROL CAP 0.25MCG .....	188	ROSZET TAB 40-10MG .....	87
ROCALTROL CAP 0.5MCG .....	188	ROSZET TAB 5-10MG .....	87
ROCALTROL SOL 1MCG/ML .....	188	ROTATEQ SOL .....	284
ROCKLATAN DRO .....	253	ROWASA KIT 4GM .....	195
ROCURON BRO SOL 100/10ML .....	248	<i>roweepra tab 500mg</i> .....	64
<i>rocuronium bromide iv soln 100 mg/10ml</i>		ROXICODONE TAB 15MG .....	37
<i>(10 mg/ml)</i> .....	248	ROXICODONE TAB 30MG .....	37
<i>rocuronium bromide iv soln 50 mg/5ml (10</i>		ROXYBOND TAB 15MG .....	37
<i>mg/ml)</i> .....	248	ROXYBOND TAB 30MG .....	37
<i>roflumilast tab 250 mcg</i> .....	53	ROXYBOND TAB 5MG .....	37
<i>roflumilast tab 500 mcg</i> .....	53	ROZEREM TAB 8MG .....	213
ROLVEDON INJ 13.2MG .....	209	ROZLYTREK CAP 100MG .....	113
<i>romidepsin for iv inj 10 mg</i> .....	113	ROZLYTREK CAP 200MG .....	113
<i>ropinirole hydrochloride tab 0.25 mg</i> .....	120	ROZLYTREK PAK 50MG .....	113
<i>ropinirole hydrochloride tab 0.5 mg</i> .....	120	RUBRACA TAB 200MG .....	113
<i>ropinirole hydrochloride tab 1 mg</i> .....	120	RUBRACA TAB 250MG .....	113
<i>ropinirole hydrochloride tab 2 mg</i> .....	120	RUBRACA TAB 300MG .....	113
<i>ropinirole hydrochloride tab 3 mg</i> .....	120	RUCONEST INJ 2100UNIT .....	204
<i>ropinirole hydrochloride tab 4 mg</i> .....	120	<i>rufinamide susp 40 mg/ml</i> .....	64
<i>ropinirole hydrochloride tab 5 mg</i> .....	120	<i>rufinamide tab 200 mg</i> .....	64
<i>ropinirole hydrochloride tab er 24hr 12 mg</i>		<i>rufinamide tab 400 mg</i> .....	64
<i>(base equivalent)</i> .....	120	RUKOBIA TAB 600MG ER .....	130
<i>ropinirole hydrochloride tab er 24hr 2 mg</i>		RUXIENCE INJ 100/10ML .....	106
<i>(base equivalent)</i> .....	120	RUXIENCE INJ 500/50ML .....	106
<i>ropinirole hydrochloride tab er 24hr 4 mg</i>		RYALTRIS SPR 665-25 .....	246
<i>(base equivalent)</i> .....	120	RYANODEX INJ 250MG .....	246

RYBELSUS TAB 14MG.....	77	SANDOSTATIN INJ 100MCG.....	190
RYBELSUS TAB 3MG.....	77	SANDOSTATIN INJ 500MCG.....	190
RYBELSUS TAB 7MG.....	77	SANDOSTATIN INJ 50MCG/ML.....	190
<i>ryclora sol 2mg/5ml.....</i>	<i>86</i>	SANDOSTATIN KIT LAR 10MG.....	190
RYDAPT CAP 25MG.....	113	SANDOSTATIN KIT LAR 20MG.....	190
RYKINDO INJ 25MG.....	123	SANDOSTATIN KIT LAR 30MG.....	190
RYKINDO INJ 37.5MG.....	123	SANTYL OIN 250/GM.....	170
RYKINDO INJ 50MG.....	123	SAPHRIS SUB 10MG.....	125
RYLAZE INJ 10/0.5ML.....	114	SAPHRIS SUB 2.5MG.....	125
RYPLAZIM SOL 68.8MG.....	205	SAPHRIS SUB 5MG.....	125
RYTARY CAP 145MG.....	120	<i>sapropterin dihydrochloride powder packet</i>	
RYTARY CAP 195MG.....	120	<i>100 mg.....</i>	<i>188</i>
RYTARY CAP 245MG.....	120	<i>sapropterin dihydrochloride powder packet</i>	
RYTARY CAP 95MG.....	120	<i>500 mg.....</i>	<i>188</i>
RYVENT TAB 6MG.....	86	<i>sapropterin dihydrochloride tab 100 mg.....</i>	<i>188</i>
<b>S</b>		SAPSCARE MIS TWIST.....	224
SABRIL POW 500MG.....	66	SARCLISA SOL 100/5ML.....	106
SABRIL TAB 500MG.....	66	SARCLISA SOL 500/25ML.....	106
SAFE-T-LANCE MIS 21G.....	224	SAVAYSA TAB 15MG.....	57
SAFE-T-LANCE MIS 25G.....	224	SAVAYSA TAB 30MG.....	57
SAFE-T-LANCE MIS HI FLOW.....	224	SAVAYSA TAB 60MG.....	57
SAFE-T-LANCE MIS LOW FLOW.....	224	SAVELLA MIS TITR PAK.....	264
SAFE-T-LANCE MIS NOR FLOW.....	224	SAVELLA TAB 100MG.....	265
SAFE-T-PRO MIS LANCETS.....	224	SAVELLA TAB 12.5MG.....	264
SAFE-T-PRO MIS PLUS.....	224	SAVELLA TAB 25MG.....	265
SAFETY 21G MIS LANCETS.....	224	SAVELLA TAB 50MG.....	265
SAFETY 28G MIS LANCETS.....	224	<i>saxagliptin hcl tab 2.5 mg (base equiv).....</i>	<i>77</i>
SAFETY MIS LANCETS.....	224	<i>saxagliptin hcl tab 5 mg (base equiv).....</i>	<i>77</i>
SAFYRAL TAB.....	151	<i>saxagliptin-metformin hcl tab er 24hr 2.5-</i>	
SAIZEN INJ 5MG.....	185	<i>1000 mg.....</i>	<i>75</i>
SAIZEN INJ 8.8MG.....	185	<i>saxagliptin-metformin hcl tab er 24hr 5-</i>	
<i>sajazir inj 30mg/3ml.....</i>	<i>204</i>	<i>1000 mg.....</i>	<i>75</i>
SALAGEN TAB 5MG.....	239	<i>saxagliptin-metformin hcl tab er 24hr 5-500</i>	
SALAGEN TAB 7.5MG.....	239	<i>mg.....</i>	<i>75</i>
SALIMEZ FORT CRE 10%.....	170	<i>sb child asa chw 81mg.....</i>	<i>31</i>
SALIVAMAX POW.....	239	SB LANCETS MIS THIN.....	224
<i>salsalate tab 750 mg.....</i>	<i>31</i>	SB LANCETS MIS ULTR THN.....	224
SAMSCA TAB 15MG.....	190	SCLEROSOL AER INTRAPLE.....	270
SAMSCA TAB 30MG.....	190	<i>scopolamine td patch 72hr 1 mg/3days....</i>	<i>83</i>
SANCUSO DIS 3.1MG.....	83	SEASONIQUE TAB.....	151
SANDIMMUNE CAP 100MG.....	236	SEBUDERM GEL.....	172
SANDIMMUNE CAP 25MG.....	236	SECUADO DIS 3.8MG.....	125
SANDIMMUNE INJ 50MG/ML.....	236	SECUADO DIS 5.7MG.....	125
SANDIMMUNE SOL 100MG/ML.....	236	SECUADO DIS 7.6MG.....	125

SEEBRI NEOHA CAP 15.6MCG .....	52	SEROQUEL XR TAB 400MG .....	125
SEGLENTIS TAB 56-44MG .....	39	SEROQUEL XR TAB 50MG .....	125
SEGLUROMET TAB 2.5-1000 .....	75	SEROSTIM INJ 4MG .....	185
SEGLUROMET TAB 2.5-500 .....	75	SEROSTIM INJ 5MG .....	185
SEGLUROMET TAB 7.5-1000 .....	75	SEROSTIM INJ 6MG .....	185
SEGLUROMET TAB 7.5-500 .....	75	<i>sertraline hcl oral concentrate for solution</i>	
SELECT-OB+ PAK DHA .....	243	20 mg/ml .....	70
SELECT-OB CHW .....	243	<i>sertraline hcl tab 100 mg</i> .....	70
<i>selegiline hcl cap 5 mg</i> .....	120	<i>sertraline hcl tab 25 mg</i> .....	70
<i>selegiline hcl tab 5 mg</i> .....	120	<i>sertraline hcl tab 50 mg</i> .....	70
SELENIOUS AC SOL 12MCG/2M .....	234	<i>setlakin tab</i> .....	151
<i>selenium sulfide lotion 2.5%</i> .....	165	<i>sevelamer carbonate packet 0.8 gm</i> .....	197
SELZENTRY SOL 20MG/ML .....	130	<i>sevelamer carbonate packet 2.4 gm</i> .....	197
SELZENTRY TAB 150MG .....	130	<i>sevelamer carbonate tab 800 mg</i> .....	197
SELZENTRY TAB 25MG .....	130	<i>sevelamer hcl tab 400 mg</i> .....	197
SELZENTRY TAB 300MG .....	130	<i>sevelamer hcl tab 800 mg</i> .....	197
SELZENTRY TAB 75MG .....	130	SEVENFACT INJ 1MG .....	204
SEMGLEE INJ 100U/ML .....	79	SEVENFACT INJ 5MG .....	204
SEMGLEE SOL 100U/ML .....	79	<i>sevoflurane inhal soln</i> .....	198
SE-NATAL 19 CHW .....	243	SEYSARA TAB 100MG .....	273
SE-NATAL 19 TAB .....	243	SEYSARA TAB 150MG .....	273
SENSIPAR TAB 30MG .....	188	SEZABY INJ 100MG .....	211
SENSIPAR TAB 60MG .....	188	SFROWASA ENE 4GM .....	195
SENSIPAR TAB 90MG .....	188	<i>sharobel tab 0.35mg</i> .....	153
<i>sensorcaine/ inj epi 0.25</i> .....	214	SHINGRIX INJ 50/0.5ML .....	284
<i>sensorcaine/ inj epi 0.5%</i> .....	214	SHUR-SEAL GEL 2% .....	284
<i>sensorcaine inj 0.25%</i> .....	215	SIDEROL TAB .....	240
<i>sensorcaine inj 0.5%</i> .....	215	SIGNIFOR INJ 0.3MG/ML .....	190
<i>sensorcaine inj -mpf/epi</i> .....	214	SIGNIFOR INJ 0.6MG/ML .....	190
SENSORCAINE INJ -MPF/EPI .....	214	SIGNIFOR INJ 0.9MG/ML .....	190
<i>sensorcaine inj mpf0.25%</i> .....	216	SIGNIFOR LAR INJ 20MG .....	190
<i>sensorcaine inj mpf 0.5%</i> .....	216	SIGNIFOR LAR INJ 40MG .....	190
<i>sensorcaine inj mpf0.75%</i> .....	216	SIGNIFOR LAR INJ 60MG .....	190
SEREVENT DIS AER 50MCG .....	55	SIKLOS TAB 1000MG .....	207
SERNIVO SPR 0.05% .....	169	SIKLOS TAB 100MG .....	207
SEROQUEL TAB 100MG .....	125	SILATRIX GEL 10% .....	239
SEROQUEL TAB 200MG .....	125	<i>sildenafil citrate for suspension 10 mg/ml</i>	
SEROQUEL TAB 25MG .....	125	.....	144
SEROQUEL TAB 300MG .....	125	<i>sildenafil citrate iv soln 10 mg/12.5ml (base</i>	
SEROQUEL TAB 400MG .....	125	<i>equivalent)</i> .....	144
SEROQUEL TAB 50MG .....	125	<i>sildenafil citrate tab 20 mg</i> .....	144
SEROQUEL XR TAB 150MG .....	125	SILENOR TAB 3MG .....	211
SEROQUEL XR TAB 200MG .....	125	SILENOR TAB 6MG .....	211
SEROQUEL XR TAB 300MG .....	125	SILIPAC KIT .....	173



SILIQ INJ 210/1.5 .....	164	SKYRIZI INJ 360/2.4 .....	196
<i>silodosin cap 4 mg</i> .....	199	SKYRIZI PEN INJ 150MG/ML .....	165
<i>silodosin cap 8 mg</i> .....	199	SKYRIZI SOL 60MG/ML .....	196
SILVADENE CRE 1% .....	166	SKYTROFA INJ 11MG .....	185
<i>silver sulfadiazine cream 1%</i> .....	166	SKYTROFA INJ 13.3MG .....	185
SILVRSTAT GEL DRESSING .....	175	SKYTROFA INJ 3.6MG .....	185
SIMBRINZA SUS 1-0.2%.....	252	SKYTROFA INJ 3MG .....	185
SIMLANDI 1PN KIT 40/0.4ML .....	23	SKYTROFA INJ 4.3MG .....	185
SIMLANDI 2PN INJ 40/0.4ML .....	23	SKYTROFA INJ 5.2MG .....	185
<i>simliya tab 28 day</i> .....	151	SKYTROFA INJ 6.3MG .....	185
<i>simpesse tab</i> .....	151	SKYTROFA INJ 7.6MG .....	185
SIMPONI ARIA SOL 50MG/4ML .....	23	SKYTROFA INJ 9.1MG.....	185
SIMPONI INJ 100MG/ML.....	23	SLYND TAB 4MG.....	154
SIMPONI INJ 50/0.5ML .....	23	SMARTEST MIS LANCETS.....	225
SIMULECT INJ 10MG.....	236	SMARTEST TES BLD GLUC .....	179
SIMULECT INJ 20MG .....	236	SMART SENSE MIS LANC 21G .....	224
SIMVASTATIN SUS 20MG/5ML .....	90	SMART SENSE MIS LANC 26G .....	224
<i>simvastatin tab 10 mg</i> .....	90	SMART SENSE MIS LANC 30G .....	224
<i>simvastatin tab 20 mg</i> .....	90	SMART SENSE MIS LANC 33G .....	225
<i>simvastatin tab 40 mg</i> .....	90	SMART SENSE TES TEST .....	179
<i>simvastatin tab 5 mg</i> .....	90	<i>sm aspirin chw 81mg</i> .....	31
<i>simvastatin tab 80 mg</i> .....	90	<i>sm aspirin tab 81mg ec</i> .....	31
SINEMET TAB 10-100MG .....	120	<i>sm child asa chw 81mg</i> .....	31
SINEMET TAB 25-100MG.....	120	<i>sm folic acid tab 400mcg</i> .....	207
SINGLE-LET MIS 23G .....	224	SM LANCETS MIS 33G.....	224
SINGULAIR CHW 4MG .....	52	<i>sm nicotine dis 14mg/24h</i> .....	269
SINGULAIR CHW 5MG .....	52	<i>sm nicotine dis 21mg/24h</i> .....	269
SINGULAIR GRA 4MG.....	52	<i>sm nicotine dis 7mg/24hr</i> .....	269
SINGULAIR TAB 10MG .....	52	<i>sm nicotine gum 2mg</i> .....	269
SINUVA IMP 1350MCG .....	247	<i>sm nicotine gum 2mg mint</i> .....	269
<i>sirolimus oral soln 1 mg/ml</i> .....	236	<i>sm nicotine gum 4mg</i> .....	269
<i>sirolimus tab 0.5 mg</i> .....	237	<i>sm nicotine gum 4mg mint</i> .....	269
<i>sirolimus tab 1 mg</i> .....	237	<i>sm nicotine loz 2mg chry</i> .....	269
<i>sirolimus tab 2 mg</i> .....	237	<i>sm nicotine loz 2mg cinn</i> .....	269
SIRTURO TAB 100MG.....	100	<i>sm nicotine loz 2mg mint</i> .....	269
SIRTURO TAB 20MG.....	100	<i>sm nicotine loz 4mg</i> .....	269
SITAVIG TAB 50MG.....	133	<i>sm nicotine loz 4mg cinn</i> .....	269
SIVEXTRO INJ 200MG .....	46	<i>sm nicotine loz 4mg mint</i> .....	269
SIVEXTRO TAB 200MG .....	47	SMOFLIPID EMU .....	249
SKYCLARYS CAP 50MG.....	248	SOAANZ TAB 20MG .....	181
SKYLA IUD 13.5MG.....	153	SOAANZ TAB 40MG .....	181
SKYRIZI INJ 150DOSE.....	165	SOAANZ TAB 60MG .....	181
SKYRIZI INJ 150MG/ML .....	165	SOD ACETATE INJ 2MEQ/ML.....	229
SKYRIZI INJ 180/1.2.....	196	SOD BICARB INJ 8.4%.....	230

SOD BICARB SOL D5W .....	230	<i>sodium phosphates inj 150 mm/50ml</i>	
SOD DIURIL INJ 500MG .....	182	( <i>phos</i> ) 200 meq/50ml ( <i>na</i> ) .....	232
SOD EDECIN INJ 50MG .....	181	<i>sodium phosphates inj 15 mm/5ml (phos)</i>	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5</i>		20 meq/5ml ( <i>na</i> ) .....	232
<i>mg/ml (fe eq) .....</i>	210	<i>sodium phosphates inj 45 mm/15ml (phos)</i>	
<i>sodium acetate inj 2 meq/ml.....</i>	230	60 meq/15ml ( <i>na</i> ).....	232
<i>sodium acetate inj 4 meq/ml .....</i>	230	<i>sodium polystyrene sulfonate powder....</i>	238
<i>sodium benzoate &amp; sodium phenylacetate</i>		<i>sodium tetradecyl sulfate inj 3% .....</i>	238
<i>iv soln 10-10% .....</i>	188	<i>sodium thiosulfate iv soln 250 mg/ml (25%)</i>	
<i>sodium bicarbonate iv soln 4.2% .....</i>	230	.....	82
<i>sodium bicarbonate iv soln 7.5% .....</i>	230	SOD NITRITE INJ 30MG/ML .....	82
<i>sodium bicarbonate iv soln 8.4% .....</i>	230	<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-</i>	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	233	3.13-1.6 gm/177ml.....	213
<i>sodium chloride irrigation soln 0.9%.....</i>	199	SOD THIOSULF INJ 25%.....	82
<i>sodium chloride iv soln 0.45% .....</i>	233	SOFOS/VELPAT TAB 400-100 .....	132
<i>sodium chloride iv soln 0.9% .....</i>	233	SOF-SENSOR MIS.....	225
<i>sodium chloride iv soln 3%.....</i>	233	SOFTCLIX MIS LANCETS.....	225
<i>sodium chloride iv soln 4 meq/ml (23.4%)</i>		SOGROYA INJ 10MG/1.5 .....	185
.....	234	SOGROYA INJ 15MG/1.5 .....	185
<i>sodium chloride iv soln 5%.....</i>	234	SOGROYA INJ 5MG/1.5.....	185
<i>sodium chloride preservative free (pf) inj</i>		<i>solifenacin succinate tab 10 mg .....</i>	282
0.9% .....	234	<i>solifenacin succinate tab 5 mg.....</i>	282
<i>sodium chloride soln nebu 0.9%.....</i>	158	SOLQUA INJ 100/33 .....	75
<i>sodium chloride soln nebu 10% .....</i>	158	SOLIRIS INJ 10MG/ML.....	204
<i>sodium chloride soln nebu 3% .....</i>	158	SOLODYN TAB 105MG.....	273
<i>sodium chloride soln nebu 7% .....</i>	158	SOLODYN TAB 115MG.....	273
<i>sodium citrate &amp; citric acid soln 500-334</i>		SOLODYN TAB 55MG .....	273
<i>mg/5ml.....</i>	198	SOLODYN TAB 65MG .....	273
<i>sodium fluoride chew tab 0.25 mg f (from</i>		SOLODYN TAB 80MG .....	273
0.55 mg naf) .....	231	SOLOX GEL.....	175
<i>sodium fluoride chew tab 0.5 mg f (from 1.1</i>		SOLTAMOX SOL 10MG/5ML.....	108
mg naf) .....	231	SOLU-CORTEF INJ 1000MG .....	157
<i>sodium fluoride chew tab 1 mg f (from 2.2</i>		SOLU-CORTEF INJ 100MG .....	157
mg naf) .....	231	SOLU-CORTEF INJ 250MG .....	157
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1</i>		SOLU-CORTEF INJ 500MG.....	157
mg/ml naf) .....	231	SOLU-MEDROL INJ 1000MG.....	157
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg</i>		SOLU-MEDROL INJ 125MG.....	157
naf) .....	231	SOLU-MEDROL INJ 1GM .....	157
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>		SOLU-MEDROL INJ 2GM .....	157
.....	231	SOLU-MEDROL INJ 40MG.....	157
<i>sodium phenylbutyrate oral powder 3</i>		SOLU-MEDROL INJ 500MG .....	157
<i>gm/teaspoonful .....</i>	188	SOLUS V2 MIS LANC 28G.....	225
<i>sodium phenylbutyrate tab 500 mg .....</i>	188	SOLUS V2 MIS LANC 30G .....	225
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SOMA TAB 350MG.....	245	25-25 mg .....	181
SOMATULINE INJ 120/.5ML.....	190	<i>spironolactone susp 25 mg/5ml.....</i>	182
SOMATULINE INJ 60/0.2ML.....	190	<i>spironolactone tab 100 mg.....</i>	182
SOMATULINE INJ 90/0.3ML.....	190	<i>spironolactone tab 25 mg.....</i>	182
SOMAVERT INJ 10MG .....	184	<i>spironolactone tab 50 mg .....</i>	182
SOMAVERT INJ 15MG .....	184	SPORANOX CAP 100MG .....	85
SOMAVERT INJ 20MG.....	184	SPORANOX CAP PULSEPAK.....	85
SOMAVERT INJ 25MG.....	184	SPORANOX SOL 10MG/ML.....	85
SOMAVERT INJ 30MG.....	184	SPRAVATO SOL 56MG DOS .....	69
SONAFINE EMU .....	175	SPRAVATO SOL 84MG DOS .....	69
SOOLANTRA CRE 1%.....	173	<i>sprintec 28 tab 28 day .....</i>	151
<i>sorafenib tosylate tab 200 mg (base</i>		SPRIX SPR 15.75MG .....	28
<i>equivalent)</i> .....	113	SPRYCEL TAB 100MG .....	113
SORBITOL-MAN SOL.....	199	SPRYCEL TAB 140MG.....	113
SORBITOL SOL 3% IRR.....	199	SPRYCEL TAB 20MG .....	113
SORILUX AER 0.005%.....	165	SPRYCEL TAB 50MG .....	113
<i>sotalol hcl (afib/afl) tab 120 mg .....</i>	136	SPRYCEL TAB 70MG .....	113
<i>sotalol hcl (afib/afl) tab 160 mg .....</i>	136	SPRYCEL TAB 80MG .....	113
<i>sotalol hcl (afib/afl) tab 80 mg.....</i>	136	<i>sps sus 15gm/60 .....</i>	238
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<i>sotalol hcl tab 120 mg .....</i>	136	<i>ssd cre 1% .....</i>	166
<i>sotalol hcl tab 160 mg .....</i>	136	SSKI SOL 1GM/ML.....	158
<i>sotalol hcl tab 240 mg.....</i>	136	STALEVO 100 TAB.....	120
<i>sotalol hcl tab 80 mg.....</i>	136	STALEVO 125 TAB.....	120
<i>sotradecol inj 1% .....</i>	238	STALEVO 150 TAB.....	120
<i>sotradecol inj 3% .....</i>	238	STALEVO 200 TAB.....	120
SOTYKTU TAB 6MG .....	165	STALEVO 50 TAB .....	120
SOTYLIZE SOL 5MG/ML.....	136	STALEVO 75 TAB.....	120
SOVALDI PAK 150MG .....	132	STAMARIL INJ.....	284
SOVALDI PAK 200MG .....	132	STEGLATRO TAB 15MG .....	80
SOVALDI TAB 200MG.....	132	STEGLATRO TAB 5MG.....	80
SOVALDI TAB 400MG .....	132	STEGLUJAN TAB 15-100MG.....	75
SOVUNA TAB 200MG .....	99	STEGLUJAN TAB 5-100MG .....	75
SOVUNA TAB 300MG .....	99	STELARA INJ 45MG/0.5 .....	165
SPEVIGO INJ 150/1ML .....	165	STELARA INJ 5MG/ML.....	196
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SPIKEVAX INJ COVID-19 .....	284	STERILANCE MIS TL 30G .....	225
<i>spinosad susp 0.9% .....</i>	173	STERILANCE MIS TL 32G .....	225
SPINRAZA INJ 12MG/5ML .....	248	STERIL TALC SUS 5GM.....	270
SPIRIVA AER 1.25MCG .....	52	STERITALC POW 2GM .....	270
SPIRIVA CAP HANDIHLR.....	52	STERITALC POW 3GM.....	271
SPIRIVA SPR 2.5MCG.....	52	STERITALC POW 4GM.....	271

STIOLTO AER 2.5-2.5 .....	56	SUCCINYLCHOL INJ 20MG/ML .....	247
STIVARGA TAB 40MG .....	113	SUCRAID SOL 8500/ML .....	180
<i>st joseph chw low 81mg</i> .....	31	SUCRALFATE SUS 1GM/10ML .....	279
<i>st joseph tab low 81mg</i> .....	31	<i>sucralfate susp 1 gm/10ml</i> .....	279
STRATA GRT GEL .....	175	<i>sucralfate tab 1 gm</i> .....	279
STRATA MARK GEL .....	172	<i>sufentanil citrate inj 100 mcg/2ml (50</i>	
STRATTERA CAP 100MG .....	16	<i>mcg/ml)</i> .....	37
STRATTERA CAP 10MG .....	16	<i>sufentanil citrate inj 250 mcg/5ml (50</i>	
STRATTERA CAP 18MG .....	16	<i>mcg/ml)</i> .....	37
STRATTERA CAP 25MG .....	16	<i>sufentanil citrate inj 50 mcg/ml</i> .....	37
STRATTERA CAP 40MG .....	16	SUFENTANIL INJ 100/2ML .....	37
STRATTERA CAP 60MG .....	16	SUFENTANIL INJ 250/5ML .....	37
STRATTERA CAP 80MG .....	16	SUFENTANIL INJ 50MCG/ML .....	37
STRENSIQ INJ 18/0.45 .....	188	SUFLAVE SOL .....	213
STRENSIQ INJ 28/0.7ML .....	188	SULAR TAB 17MG ER .....	139
STRENSIQ INJ 40MG/ML .....	188	SULAR TAB 34MG ER .....	139
STRENSIQ INJ 80/0.8ML .....	188	SULAR TAB 8.5MG ER .....	139
<i>streptomycin sulfate for inj 1 gm</i> .....	20	<i>sulconazole nitrate cream 1%</i> .....	163
STRIBILD TAB .....	130	<i>sulconazole nitrate solution 1%</i> .....	163
STRIVERDI AER 2.5MCG .....	56	<i>sulfacetamide sodium lotion 10% (acne)</i> .....	161
STROMECTOL TAB 3MG .....	43	<i>sulfacetamide sodium ophth oint 10%</i> ...	253
STROVITE FOR TAB .....	240	<i>sulfacetamide sodium ophth soln 10%</i> ...	253
STROVITE ONE TAB .....	240	<i>sulfacetamide sodium-prednisolone ophth</i>	
SUBLOCADE INJ 100/0.5 .....	40	<i>soln 10-0.23(0.25)%</i> .....	255
SUBLOCADE INJ 300/1.5 .....	40	<i>sulfadiazine tab 500 mg</i> .....	271
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SUBOXONE MIS 2-0.5MG .....	40	<i>400-80 mg/5ml</i> .....	43
SUBOXONE MIS 4-1MG .....	40	<i>sulfamethoxazole-trimethoprim susp 200-</i>	
SUBOXONE MIS 8-2MG .....	40	<i>40 mg/5ml</i> .....	43
SUBSYS SPR 100MCG .....	37	<i>sulfamethoxazole-trimethoprim tab 400-80</i>	
SUBSYS SPR 1200MCG .....	37	<i>mg</i> .....	43
SUBSYS SPR 1600MCG .....	37	<i>sulfamethoxazole-trimethoprim tab 800-</i>	
SUBSYS SPR 200MCG .....	37	<i>160 mg</i> .....	43
SUBSYS SPR 400MCG .....	37	<i>sulfamez emu 10-1%</i> .....	161
SUBSYS SPR 600MCG .....	37	SULFAMYLON CRE 85MG/GM .....	166
SUBSYS SPR 800MCG .....	37	SULFAMYLON PAK 5% .....	166
<i>subvenite kit start 35</i> .....	64	<i>sulfasalazine tab 500 mg</i> .....	196
<i>subvenite kit start 49</i> .....	65	<i>sulfasalazine tab delayed release 500 mg</i>	
<i>subvenite kit start 98</i> .....	65	.....	196
<i>subvenite tab 100mg</i> .....	65	<i>sulfatrim pd sus 200-40/5</i> .....	43
<i>subvenite tab 150mg</i> .....	65	SULF LIME SOL .....	173
<i>subvenite tab 200mg</i> .....	65	<i>sulindac tab 150 mg</i> .....	28
<i>subvenite tab 25mg</i> .....	65	<i>sulindac tab 200 mg</i> .....	28
<i>succinylcholine chloride inj 20 mg/ml</i> ....	247		

<i>sumatriptan-naproxen sodium tab 85-500 mg</i> .....	228	SUSTIVA CAP 200MG.....	130
<i>sumatriptan nasal spray 20 mg/act</i> .....	229	SUSTIVA CAP 50MG.....	130
<i>sumatriptan nasal spray 5 mg/act</i> .....	229	SUSTOL INJ 10/0.4ML .....	83
<i>sumatriptan succinate inj 6 mg/0.5ml</i> ....	229	SUSVIMO INJ 10/0.1ML .....	252
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i> .....	229	SUTAB TAB.....	213
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i> .....	229	SUTENT CAP 12.5MG.....	113
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i> .....	229	SUTENT CAP 25MG .....	113
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i> .....	229	SUTENT CAP 37.5MG.....	113
<i>sumatriptan succinate tab 100 mg</i> .....	229	SUTENT CAP 50MG .....	113
<i>sumatriptan succinate tab 25 mg</i> .....	229	SUVICORT EMU .....	172
<i>sumatriptan succinate tab 50 mg</i> .....	229	<i>syeda tab 3-0.03mg</i> .....	151
<i>sunitinib malate cap 12.5 mg (base equivalent)</i> .....	113	SYFOVRE INJ 15/0.1ML.....	253
<i>sunitinib malate cap 25 mg (base equivalent)</i> .....	113	SYLVANT SOL 100MG.....	237
<i>sunitinib malate cap 37.5 mg (base equivalent)</i> .....	113	SYLVANT SOL 400MG.....	237
<i>sunitinib malate cap 50 mg (base equivalent)</i> .....	113	<i>symax-sr tab 0.375mg</i> .....	279
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SUNLENCA TAB 300MG .....	130	SYMBICORT AER 80-4.5 .....	56
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SUNOSI TAB 75MG.....	16	SYMBYAX CAP 6-25MG .....	264
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SUPRANE SOL .....	198	SYMJEPI INJ 0.3MG.....	286
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SURE EDGE TES .....	179	SYNAGIS INJ 100MG/ML .....	259
SUREFLEX MIS LANCETS .....	225	SYNAGIS INJ 50/0.5ML .....	259
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		SYNERDERM EMU .....	172
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		SYNJARDY TAB 12.5-500 .....	75
		SYNJARDY TAB 5-1000MG.....	75
		SYNJARDY TAB 5-500MG .....	75
		SYNJARDY XR TAB.....	75
		SYNJARDY XR TAB 10-1000 .....	75
		SYNJARDY XR TAB 25-1000 .....	75

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SYNTHROID TAB 112MCG .....	276	TALZENNA CAP 0.25MG .....	113
SYNTHROID TAB 125MCG .....	276	TALZENNA CAP 0.35MG .....	113
SYNTHROID TAB 137MCG.....	276	TALZENNA CAP 0.5MG.....	113
SYNTHROID TAB 150MCG .....	276	TALZENNA CAP 0.75MG .....	113
SYNTHROID TAB 175MCG .....	276	TALZENNA CAP 1MG.....	113
SYNTHROID TAB 200MCG .....	276	TAMIFLU CAP 30MG.....	133
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SYNTHROID TAB 300MCG .....	276	TAMIFLU CAP 75MG.....	133
SYNTHROID TAB 50MCG.....	276	TAMIFLU SUS 6MG/ML .....	133
SYNTHROID TAB 75MCG.....	276	<i>tamoxifen citrate tab 10 mg (base</i>	
SYNTHROID TAB 88MCG.....	276	<i>equivalent)</i> .....	108
SYNVISC INJ 8MG/ML .....	246	<i>tamoxifen citrate tab 20 mg (base</i>	
SYNVISC ONE INJ 8MG/ML .....	246	<i>equivalent)</i> .....	108
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<b>T</b>		TARCEVA TAB 100MG.....	107
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<i>tacrolimus cap 0.5 mg</i> .....	237	<i>tarina fe tab 1/20</i> .....	151
<i>tacrolimus cap 1 mg</i> .....	237	<i>tarina fe tab 1/20 eq</i> .....	151
<i>tacrolimus cap 5 mg</i> .....	237	TARON-C DHA CAP .....	243
<i>tacrolimus oint 0.03%</i> .....	170	TARON FORTE CAP.....	209
<i>tacrolimus oint 0.1%</i> .....	170	TARON-PREX CAP .....	243
<i>tadalafil tab 2.5 mg</i> .....	142	TARPEYO CAP 4MG.....	157
<i>tadalafil tab 20 mg (pah)</i> .....	144	TASCENSO ODT TAB 0.25MG .....	266
<i>tadalafil tab 5 mg</i> .....	142	TASIGNA CAP 150MG .....	114
TADLIQ SUS 20MG/5ML.....	144	TASIGNA CAP 200MG .....	114
TAFINLAR CAP 50MG .....	113	TASIGNA CAP 50MG.....	114
TAFINLAR CAP 75MG.....	113	<i>tasimelteon capsule 20 mg</i> .....	213
<i>tafluprost preservative free (pf) ophth soln</i>		TASMAR TAB 100MG .....	118
<i>0.0015%</i> .....	256	<i>tavaborole soln 5%</i> .....	163
TAGRISSO TAB 40MG .....	107	TAVALISSE TAB 100MG .....	205
TAGRISSO TAB 80MG .....	107	TAVALISSE TAB 150MG.....	205
<i>take action tab 1.5mg</i> .....	153	TAVNEOS CAP 10MG.....	204
TAKHZYRO INJ 150MG/ML .....	205	<i>taysofy cap 1/20</i> .....	151
TAKHZYRO INJ 300/2ML.....	205	TAYTULLA CAP 1MG/20MC.....	151
TALICIA CAP .....	281	<i>tazarotene cream 0.1%</i> .....	165
TALTZ INJ 80MG/ML .....	165	<i>tazarotene gel 0.05%</i> .....	165
TALVEY INJ 3/1.5ML.....	106	<i>tazarotene gel 0.1%</i> .....	165

<i>tazicef inj 1gm</i> .....	147	<i>telmisartan-hydrochlorothiazide tab 80-25</i>	
TAZICEF INJ 1GM/50ML .....	147	<i>mg</i> .....	97
<i>tazicef inj 2gm</i> .....	147	<i>telmisartan tab 20 mg</i> .....	93
<i>tazicef inj 6gm</i> .....	147	<i>telmisartan tab 40 mg</i> .....	93
TAZORAC CRE 0.05% .....	165	<i>telmisartan tab 80 mg</i> .....	93
TAZORAC CRE 0.1%.....	165	<i>temazepam cap 15 mg</i> .....	212
TAZORAC GEL 0.05%.....	165	<i>temazepam cap 22.5 mg</i> .....	212
TAZORAC GEL 0.1%.....	165	<i>temazepam cap 30 mg</i> .....	212
<i>taztia xt cap 120mg/24</i> .....	139	<i>temazepam cap 7.5 mg</i> .....	212
<i>taztia xt cap 180mg/24</i> .....	139	TEMBEXA SUS 10MG/ML.....	133
<i>taztia xt cap 240mg/24</i> .....	139	TEMBEXA TAB 100MG.....	133
<i>taztia xt cap 300mg er</i> .....	139	TEMODAR CAP 250MG .....	101
<i>taztia xt cap 360mg/24</i> .....	139	TEMODAR INJ 100MG.....	101
TAZVERIK TAB 200MG .....	114	<i>temozolomide cap 100 mg</i> .....	101
TDVAX INJ 2-2 LF .....	277	<i>temozolomide cap 140 mg</i> .....	101
TECENTRIQ INJ 1200/20 .....	106	<i>temozolomide cap 180 mg</i> .....	102
TECENTRIQ INJ 840/14 .....	106	<i>temozolomide cap 20 mg</i> .....	101
TECFIDERA CAP 120MG.....	266	<i>temozolomide cap 250 mg</i> .....	102
TECFIDERA CAP 240MG .....	266	<i>temozolomide cap 5 mg</i> .....	101
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TECHLITE MIS LANCETS.....	225	TENIVAC INJ 5-2LF .....	277
TEFLARO INJ 400MG .....	147	<i>tenofovir disoproxil fumarate tab 300 mg</i>	
TEFLARO INJ 600MG .....	147	.....	130
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TEGRETOL SUS 100/5ML .....	65	TENORETIC TAB 50.....	97
TEGRETOL TAB 200MG.....	65	TENORMIN TAB 100MG .....	135
TEGRETOL-XR TAB 100MG.....	65	TENORMIN TAB 25MG .....	135
TEGRETOL-XR TAB 200MG .....	65	TENORMIN TAB 50MG.....	135
TEGRETOL-XR TAB 400MG.....	65	TEPADINA INJ 100MG.....	102
TEGSEDI INJ 284/1.5.....	270	TEPADINA INJ 15MG .....	102
TEKURNA HCT TAB 150-12.5 .....	97	TEPEZZA INJ 500MG.....	186
TEKURNA TAB 150MG .....	98	TEPMETKO TAB 225MG .....	114
TEKURNA TAB 300MG .....	98	<i>terazosin hcl cap 10 mg (base equivalent)</i> 94	
<i>telmisartan-amlodipine tab 40-10 mg</i> .....	97	<i>terazosin hcl cap 1 mg (base equivalent)</i> ..94	
<i>telmisartan-amlodipine tab 40-5 mg</i> .....	97	<i>terazosin hcl cap 2 mg (base equivalent)</i> .94	
<i>telmisartan-amlodipine tab 80-10 mg</i> .....	97	<i>terazosin hcl cap 5 mg (base equivalent)</i> .94	
<i>telmisartan-amlodipine tab 80-5 mg</i> .....	97	<i>terbinafine hcl tab 250 mg</i> .....	84
<i>telmisartan-hydrochlorothiazide tab 40-</i>		<i>terbutaline sulfate inj 1 mg/ml</i> .....	56
<i>12.5 mg</i> .....	97	<i>terbutaline sulfate tab 2.5 mg</i> .....	56
<i>telmisartan-hydrochlorothiazide tab 80-12.5</i>		<i>terbutaline sulfate tab 5 mg</i> .....	56
<i>mg</i> .....	97	<i>terconazole vaginal cream 0.4%</i> .....	285
		<i>terconazole vaginal cream 0.8%</i> .....	285

<i>terconazole vaginal suppos 80 mg</i> .....	285	TGT LANCET MIS 33G.....	225
<i>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml</i> .....	183	THALITONE TAB 15MG.....	182
TERIPARATIDE INJ 620/2.48 .....	183	THALOMID CAP 100MG .....	235
<i>terrell sol</i> .....	198	THALOMID CAP 150MG .....	235
TESTIM GEL 1%(50MG) .....	41	THALOMID CAP 200MG.....	235
TESTOPEL MIS PELLETS .....	41	THALOMID CAP 50MG .....	235
<i>testosterone cypionate im inj in oil 100 mg/ml</i> .....	41	THAM INJ 30MEQ .....	230
<i>testosterone cypionate im inj in oil 200 mg/ml</i> .....	41	THEO-24 CAP 100MG CR .....	56
<i>testosterone enanthate im inj in oil 200 mg/ml</i> .....	41	THEO-24 CAP 200MG CR .....	56
TESTOSTERONE MIS 100MG.....	41	THEO-24 CAP 300MG CR .....	56
TESTOSTERONE MIS 200MG .....	41	THEO-24 CAP 400MG ER.....	56
TESTOSTERONE MIS 25MG.....	41	<i>theophylline elixir 80 mg/15ml</i> .....	56
TESTOSTERONE MIS 37.5MG .....	41	<i>theophylline soln 80 mg/15ml</i> .....	56
TESTOSTERONE MIS 50MG .....	41	<i>theophylline tab er 12hr 300 mg</i> .....	56
TESTOSTERONE MIS 87.5MG .....	41	<i>theophylline tab er 12hr 450 mg</i> .....	56
<i>testosterone td gel 10mg/act (2%)</i> .....	41	<i>theophylline tab er 24hr 400 mg</i> .....	56
<i>testosterone td gel 12.5 mg/act (1%)</i> .....	41	<i>theophylline tab er 24hr 600 mg</i> .....	56
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i> .....	41	<i>thiamine hcl inj 100 mg/ml</i> .....	287
<i>testosterone td gel 20.25 mg/act (1.62%)</i> 41		THIN LANCETS MIS 26G.....	225
<i>testosterone td gel 25 mg/2.5gm (1%)</i> .....	41	THIN LANCETS MIS 30G .....	225
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i> .....	42	THINLETS GP MIS 26G.....	225
<i>testosterone td gel 50 mg/5gm (1%)</i> .....	42	THIOLA EC TAB 100MG.....	200
<i>testosterone td soln 30 mg/act</i> .....	42	THIOLA EC TAB 300MG .....	200
TET/DIP TOX INJ 2-2 LF .....	277	THIOLA TAB 100MG.....	200
<i>tetrabenazine tab 12.5 mg</i> .....	265	<i>thioridazine hcl tab 100 mg</i> .....	126
<i>tetrabenazine tab 25 mg</i> .....	265	<i>thioridazine hcl tab 10 mg</i> .....	126
<i>tetracaine hcl ophth soln 0.5%</i> .....	253	<i>thioridazine hcl tab 25 mg</i> .....	126
<i>tetracycline hcl cap 250 mg</i> .....	273	<i>thioridazine hcl tab 50 mg</i> .....	126
<i>tetracycline hcl cap 500 mg</i> .....	273	<i>thiotepa for inj 100 mg</i> .....	102
TETRACYCLINE TAB 250MG .....	273	<i>thiotepa for inj 15 mg</i> .....	102
TETRACYCLINE TAB 500MG.....	273	<i>thiothixene cap 10 mg</i> .....	127
TETRIX CRE .....	172	<i>thiothixene cap 1 mg</i> .....	127
TEXACORT SOL 2.5%.....	169	<i>thiothixene cap 2 mg</i> .....	127
TEXAVITE LQ LIQ.....	241	<i>thiothixene cap 5 mg</i> .....	127
TEZSPIRE INJ 210MG .....	52	<i>thrive gum 2mg mint</i> .....	270
TEZSPIRE SOL 210MG .....	52	THRIVITE 19 TAB.....	240
TGT LANCET MIS 26G.....	225	THRIVITE RX TAB 29-1MG.....	243
TGT LANCET MIS 30G .....	225	THROMBIN-JMI KIT 20000UNT .....	210
		THROMBIN-JMI KIT 5000UNIT .....	210
		THROMBIN-JMI SOL 20000UNT.....	210
		THROMBIN-JMI SOL 5000UNIT .....	210
		THROMBIN KIT 5000UNIT .....	210
		THROMBOGEN KIT 10000UNT .....	210
		THROMBOGEN SOL 10000UNT.....	210



THROMBOGEN SOL 1000UNIT .....	210	<i>timolol maleate preservative free ophth soln</i>	
THYMOGLOBULN INJ 25MG .....	237	0.25% .....	251
THYQUIDITY SOL 100MCG .....	276	<i>timolol maleate preservative free ophth soln</i>	
<i>tiadylt cap 120mg/24</i> .....	139	0.5% .....	250
<i>tiadylt cap 180mg/24</i> .....	139	<i>timolol maleate tab 10 mg</i> .....	136
<i>tiadylt cap 240mg/24</i> .....	139	<i>timolol maleate tab 20 mg</i> .....	136
<i>tiadylt cap 300mg/24</i> .....	139	<i>timolol maleate tab 5 mg</i> .....	136
<i>tiadylt cap 360mg/24</i> .....	140	TIMOPTIC OCU SOL 0.25% OP .....	251
<i>tiadylt cap 420mg/24</i> .....	140	TIMOPTIC SOL 0.25% OP .....	251
<i>tiagabine hcl tab 12 mg</i> .....	66	TIMOPTIC SOL 0.5% OP .....	251
<i>tiagabine hcl tab 16 mg</i> .....	66	TIMOPTIC-XE SOL 0.25% OP .....	251
<i>tiagabine hcl tab 2 mg</i> .....	66	TIMOPTIC-XE SOL 0.5% OP .....	251
<i>tiagabine hcl tab 4 mg</i> .....	66	<i>tinidazole tab 250 mg</i> .....	43
TIAZAC CAP 120MG/24 .....	140	<i>tinidazole tab 500 mg</i> .....	43
TIAZAC CAP 180MG/24 .....	140	<i>tiopronin tab 100 mg</i> .....	200
TIAZAC CAP 240MG/24 .....	140	<i>tiopronin tab delayed release 100 mg</i> ...	200
TIAZAC CAP 300MG/24 .....	140	<i>tiopronin tab delayed release 300 mg</i> ...	200
TIAZAC CAP 360MG/24 .....	140	<i>tiotropium bromide monohydrate inhal cap</i>	
TIAZAC CAP 420MG/24 .....	140	18 mcg (base equiv) .....	52
TIBSOVO TAB 250MG .....	114	TIROSINT CAP 100MCG .....	276
TICE BCG INJ.....	115	TIROSINT CAP 112MCG.....	276
TICOVAC INJ.....	284	TIROSINT CAP 125MCG.....	276
TIGAN INJ 100MG/ML .....	83	TIROSINT CAP 137MCG.....	276
<i>tigecycline for iv soln 50 mg</i> .....	271	TIROSINT CAP 13MCG .....	276
TIGECYCLINE INJ 50MG .....	271	TIROSINT CAP 150MCG.....	276
TIKOSYN CAP 125MCG.....	51	TIROSINT CAP 175MCG.....	276
TIKOSYN CAP 250MCG.....	51	TIROSINT CAP 200 .....	276
TIKOSYN CAP 500MCG .....	51	TIROSINT CAP 25MCG .....	276
<i>tilia fe tab</i> .....	151	TIROSINT CAP 50MCG .....	276
TIM/BRIM/DOR SOL .....	250	TIROSINT CAP 75MCG .....	276
TIM/BRIM/DOR SOL /BIMATOP .....	250	TIROSINT CAP 88MCG .....	276
TIM/DORZ/LAT SOL .....	250	TISSEEL KIT 10ML .....	210
TIMOL/BRIM SOL DORZ/LAT.....	250	TISSEEL KIT 2ML .....	210
TIMOL/DORZOL SOL /BIMATOP .....	250	TISSEEL KIT 4ML .....	210
TIMOL/LATAN SOL .....	250	TISSEEL SOL 10ML.....	211
<i>timolol maleate ophth gel forming soln</i>		TISSEEL SOL 2ML.....	210
0.25% .....	250	TISSEEL SOL 4ML.....	210
<i>timolol maleate ophth gel forming soln</i>		<i>tis-u-sol sol</i> .....	237
0.5% .....	250	TIVDAK INJ 40MG .....	106
<i>timolol maleate ophth soln 0.25%</i> .....	250	TIVICAY PD TAB 5MG.....	130
<i>timolol maleate ophth soln 0.5%</i> .....	250	TIVICAY TAB 50MG .....	130
<i>timolol maleate ophth soln 0.5% (once-</i>		<i>tizanidine hcl cap 2 mg (base equivalent)</i>	
<i>daily)</i> .....	250	.....	245

<i>tizanidine hcl cap 4 mg (base equivalent)</i>	TOPAMAX SPR CAP 25MG	65
.....245	TOPAMAX TAB 100MG	65
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	TOPAMAX TAB 200MG	65
.....245	TOPAMAX TAB 25MG	65
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	TOPAMAX TAB 50MG	65
.....245	TOPCARE MIS LANC 33G	225
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	TOPICORT CRE 0.05%	169
.....245	TOPICORT CRE 0.25%	169
TLANDO CAP 112.5 MG	TOPICORT GEL 0.05%	169
.....42	TOPICORT OIN 0.05%	169
TNKASE KIT 50MG	TOPICORT OIN 0.25%	169
.....206	TOPICORT SPR 0.25%	169
TOBI NEB 300/5ML	<i>topiramate cap er 24hr 100 mg</i>	65
.....20	<i>topiramate cap er 24hr 200 mg</i>	65
TOBI PODHALR CAP 28MG	<i>topiramate cap er 24hr 25 mg</i>	65
.....20	<i>topiramate cap er 24hr 50 mg</i>	65
TOBRADEX OIN 0.3-0.1%	<i>topiramate cap er 24hr sprinkle 100 mg</i>	65
.....255	<i>topiramate cap er 24hr sprinkle 150 mg</i>	65
TOBRADEX ST SUS 0.3-0.05	<i>topiramate cap er 24hr sprinkle 200 mg</i>	65
.....255	<i>topiramate cap er 24hr sprinkle 25 mg</i>	65
TOBRADEX SUS 0.3-0.1%	<i>topiramate cap er 24hr sprinkle 50 mg</i>	65
.....255	<i>topiramate sprinkle cap 15 mg</i>	65
<i>tobramycin-dexamethasone ophth susp</i>	<i>topiramate sprinkle cap 25 mg</i>	65
0.3-0.1%	<i>topiramate tab 100 mg</i>	65
.....255	<i>topiramate tab 200 mg</i>	65
<i>tobramycin nebu soln 300 mg/4ml</i>	<i>topiramate tab 25 mg</i>	65
.....20	<i>topiramate tab 50 mg</i>	65
<i>tobramycin nebu soln 300 mg/5ml</i>	<i>toposar inj 100/5ml</i>	117
.....20	<i>toposar inj 1gm/50ml</i>	117
<i>tobramycin ophth soln 0.3%</i>	<i>toposar inj 500/25ml</i>	117
.....253	<i>topotecan hcl for inj 4 mg (base equiv)</i>	117
<i>tobramycin sulfate for inj 1.2 gm</i>	<i>topotecan hcl inj 4 mg/4ml (base equiv) (for</i>	117
.....20	<i>infusion)</i>	117
<i>tobramycin sulfate inj 1.2 gm/30ml (40</i>	TOPOTECAN INJ 4MG/4ML	117
<i>mg/ml) (base equiv)</i>	TOPROL XL TAB 100MG	135
.....20	TOPROL XL TAB 200MG	135
<i>tobramycin sulfate inj 10 mg/ml (base</i>	TOPROL XL TAB 25MG	135
<i>equivalent)</i>	TOPROL XL TAB 50MG	135
.....20	<i>toremifene citrate tab 60 mg (base</i>	108
<i>tobramycin sulfate inj 2 gm/50ml (40</i>	<i>equivalent)</i>	108
<i>mg/ml) (base equiv)</i>	TORISEL INJ 25MG/ML	114
.....20	<i>toremide tab 100 mg</i>	182
<i>tobramycin sulfate inj 80 mg/2ml (40</i>	<i>toremide tab 10 mg</i>	181
<i>mg/ml) (base equiv)</i>	<i>toremide tab 20 mg</i>	182
.....20		
<i>TOBREX OIN 0.3% OP</i>		
.....253		
TODAY SPONGE MIS		
.....284		
TOFIDENCE INJ 200/10ML		
.....25		
TOFIDENCE INJ 400/20ML		
.....25		
TOFIDENCE INJ 80MG/4ML		
.....25		
<i>tolcapone tab 100 mg</i>		
.....118		
TOLECTIN 600 TAB 600MG		
.....28		
<i>tolmetin sodium cap 400 mg</i>		
.....28		
<i>tolterodine tartrate cap er 24hr 2 mg</i>		
.....282		
<i>tolterodine tartrate cap er 24hr 4 mg</i>		
.....282		
<i>tolterodine tartrate tab 1 mg</i>		
.....282		
<i>tolterodine tartrate tab 2 mg</i>		
.....282		
<i>tolvaptan tab 15 mg</i>		
.....190		
<i>tolvaptan tab 30 mg</i>		
.....190		
TOPAMAX SPR CAP 15MG		
.....65		

<i>torsemid</i> tab 5 mg .....	181	<i>trandolapril-verapamil hcl tab er 2-180 mg</i> .....	97
TOSYMRA SOL 10MG .....	229	<i>trandolapril-verapamil hcl tab er 2-240 mg</i> .....	98
TOTECT INJ 500MG .....	116	<i>trandolapril-verapamil hcl tab er 4-240 mg</i> .....	98
TOUJEO MAX INJ 300/ML .....	79	<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i> .....	210
TOUJEO SOLO INJ 300/ML .....	79	<i>tranexamic acid tab 650 mg</i> .....	210
<i>tovet aer 0.05%</i> .....	169	TRANSDERM-SC DIS 1.5MG .....	83
TOVIAZ TAB 4MG .....	282	TRANSDERM-SC DIS 1MG/3DAY .....	83
TOVIAZ TAB 8MG .....	282	TRANXENE T TAB 7.5MG .....	50
TPN ELECTROL INJ .....	231	<i>tranylcypromine sulfate tab 10 mg</i> .....	69
TPOXX CAP 200MG .....	133	TRAVASOL INJ 10% .....	250
TPOXX INJ .....	133	TRAVATAN Z DRO 0.004% .....	256
TRACLEER TAB 125MG .....	144	TRAVEL LANCE MIS ADV 28G .....	225
TRACLEER TAB 32MG .....	144	<i>travoprost ophth soln 0.004%</i> (benzalkonium free) (bak free) .....	256
TRACLEER TAB 62.5MG .....	144	TRAZIMERA INJ 150MG .....	105
TRADJENTA TAB 5MG .....	77	TRAZIMERA INJ 420MG .....	105
<i>tramadol-acetaminophen tab 37.5-325 mg</i> .....	39	<i>trazodone hcl tab 100 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic release</i> 100 mg .....	37	<i>trazodone hcl tab 150 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic release</i> 150 mg .....	37	<i>trazodone hcl tab 300 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic release</i> 200 mg .....	37	<i>trazodone hcl tab 50 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic release</i> 300 mg .....	37	TREANDA INJ 100MG .....	102
<i>tramadol hcl oral soln 5 mg/ml</i> .....	37	TREANDA INJ 25MG .....	102
<i>tramadol hcl tab 100 mg</i> .....	37	TRECTOR TAB 250MG .....	100
<i>tramadol hcl tab 25 mg</i> .....	37	TRELEGY AER 100MCG .....	56
<i>tramadol hcl tab 50 mg</i> .....	37	TRELEGY AER 200MCG .....	56
<i>tramadol hcl tab er 24hr 100 mg</i> .....	37	TRELSTAR MIX INJ 11.25MG .....	108
<i>tramadol hcl tab er 24hr 200 mg</i> .....	37	TRELSTAR MIX INJ 22.5MG .....	108
<i>tramadol hcl tab er 24hr 300 mg</i> .....	37	TRELSTAR MIX INJ 3.75MG .....	108
<i>tramadol hcl tab er 24hr biphasic release</i> 100 mg .....	37	TREMFYA INJ 100MG/ML .....	165
<i>tramadol hcl tab er 24hr biphasic release</i> 200 mg .....	37	<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i> .....	143
<i>tramadol hcl tab er 24hr biphasic release</i> 300 mg .....	37	<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i> .....	143
<i>trandolapril tab 1 mg</i> .....	92	<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i> .....	143
<i>trandolapril tab 2 mg</i> .....	92	<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i> .....	143
<i>trandolapril tab 4 mg</i> .....	92	TRESIBA FLEX INJ 100UNIT .....	79
<i>trandolapril-verapamil hcl tab er 1-240 mg</i> .....	97	TRESIBA FLEX INJ 200UNIT .....	79
		TRESIBA INJ 100UNIT .....	79

<i>tretinoin cap 10 mg</i> .....	115	<i>triamterene cap 100 mg</i> .....	182
<i>tretinoin cream 0.025%</i> .....	161	<i>triamterene cap 50 mg</i> .....	182
<i>tretinoin cream 0.05%</i> .....	161	<i>trianex oin 0.05%</i> .....	169
<i>tretinoin cream 0.1%</i> .....	161	<i>triazolam tab 0.125 mg</i> .....	212
<i>tretinoin gel 0.01%</i> .....	161	<i>triazolam tab 0.25 mg</i> .....	212
<i>tretinoin gel 0.025%</i> .....	161	TRIBENZOR20- TAB 5-12.5MG .....	98
<i>tretinoin gel 0.05%</i> .....	161	TRIBENZOR40- TAB 10-12.5.....	98
<i>tretinoin microsphere gel 0.04%</i> .....	161	TRIBENZOR40- TAB 10-25MG.....	98
<i>tretinoin microsphere gel 0.08%</i> .....	161	TRIBENZOR40- TAB 5-12.5MG.....	98
<i>tretinoin microsphere gel 0.1%</i> .....	161	TRIBENZOR40- TAB 5-25MG .....	98
TRETTEN INJ.....	204	TRICARE PRE CAP 27-1-500.....	243
TREXALL TAB 10MG .....	104	TRICARE TAB PRENATAL.....	243
TREXALL TAB 15MG .....	104	TRICITRASOL CON .....	59
TREXALL TAB 5MG.....	104	<i>tricon cap</i> .....	209
TREXALL TAB 7.5MG.....	104	TRICOR TAB 145MG .....	88
TREXIMET TAB 10-60MG .....	228	TRICOR TAB 48MG.....	88
TREXIMET TAB 85-500MG .....	228	<i>triderm cre 0.1%</i> .....	169
<i>trezix cap</i> .....	39	<i>triderm cre 0.5%</i> .....	169
TRIAM-BUPIVA SUS 40-5MG .....	157	<i>trientine hcl cap 250 mg</i> .....	234
TRIAMCIN ACE INJ 40MG/ML.....	157	TRIESENCE INJ 40MG/ML.....	255
<i>triamcinolone acetone aerosol soln 0.147</i> <i>mg/gm</i> .....	169	<i>tri-estaryll tab</i> .....	151
<i>triamcinolone acetone cream 0.025%</i> .....	169	<i>tri femynor tab</i> .....	151
<i>triamcinolone acetone cream 0.1%</i> .....	169	TRIFERIC INJ AVNU .....	210
<i>triamcinolone acetone cream 0.5%</i> .....	169	<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i> .....	126
<i>triamcinolone acetone dental paste 0.1%</i> .....	239	<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i> .....	126
<i>triamcinolone acetone inj susp 40 mg/ml</i> .....	157	<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i> .....	126
<i>triamcinolone acetone lotion 0.025%</i> ..	169	<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i> .....	126
<i>triamcinolone acetone lotion 0.1%</i> .....	169	<i>trifluridine ophth soln 1%</i> .....	253
<i>triamcinolone acetone oint 0.025%</i> .....	169	<i>trigels-f cap forte</i> .....	209
<i>triamcinolone acetone oint 0.05%</i> .....	169	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i> ...118	
<i>triamcinolone acetone oint 0.1%</i> .....	169	<i>trihexyphenidyl hcl tab 2 mg</i> .....	118
<i>triamcinolone acetone oint 0.5%</i> .....	169	<i>trihexyphenidyl hcl tab 5 mg</i> .....	118
TRIAMCINOLON INJ 40MG/ML.....	157	TRIJARDY XR TAB .....	75
TRIAMCINOLON INJ 80MG/2ML .....	157	TRIKAFTA PAK 59.5MG.....	270
TRIAMCINOLON INJ 80MG/ML.....	157	TRIKAFTA PAK 75MG .....	270
<i>triamterene &amp; hydrochlorothiazide cap</i> <i>37.5-25 mg</i> .....	181	TRIKAFTA TAB .....	270
<i>triamterene &amp; hydrochlorothiazide tab 37.5-</i> <i>25 mg</i> .....	181	<i>tri-legest tab fe</i> .....	152
<i>triamterene &amp; hydrochlorothiazide tab 75-</i> <i>50 mg</i> .....	181	TRILEPTAL SUS 300MG/5M .....	65
		TRILEPTAL TAB 150MG .....	65
		TRILEPTAL TAB 300MG .....	65

TRILEPTAL TAB 600MG .....	65	TROKENDI XR CAP 25MG .....	65
<i>tri-lynyah tab</i> .....	152	TROKENDI XR CAP 50MG .....	65
TRILIPIX CAP 135MG .....	88	TROPHAMINE INJ 10% .....	250
TRILIPIX CAP 45MG .....	88	<i>tropicamide ophth soln 0.5%</i> .....	251
<i>tri-lo-mili tab</i> .....	152	<i>tropicamide ophth soln 1%</i> .....	251
<i>tri-lo tab estaryll</i> .....	152	<i>trospium chloride cap er 24hr 60 mg</i> .....	282
<i>tri-lo- tab marzia</i> .....	152	<i>trospium chloride tab 20 mg</i> .....	282
<i>tri-lo- tab sprintec</i> .....	152	TRUDHESA AER 0.725MG .....	228
<i>trimethobenzamide hcl cap 300 mg</i> .....	83	TRUE COVER MIS CONDOM .....	218
<i>trimethoprim tab 100 mg</i> .....	43	TRUE METRIX TES GLUCOSE .....	179
<i>tri-mili tab</i> .....	152	TRUETEST TES .....	179
<i>trimipramine maleate cap 100 mg</i> .....	73	TRUETEST TES BLD GLUC .....	179
<i>trimipramine maleate cap 25 mg</i> .....	73	TRUETRACK TES .....	179
<i>trimipramine maleate cap 50 mg</i> .....	73	TRUETRACK TES BLD GLUC .....	179
TRIMOXI+ INJ .....	255	TRULANCE TAB 3MG .....	193
TRINATAL RX TAB 1 .....	243	TRULICITY INJ 0.75/0.5 .....	77
<i>trinate tab</i> .....	243	TRULICITY INJ 1.5/0.5 .....	77
TRINTELLIX TAB 10MG .....	70	TRULICITY INJ 3/0.5 .....	77
TRINTELLIX TAB 20MG .....	70	TRULICITY INJ 4.5/0.5 .....	77
TRINTELLIX TAB 5MG .....	70	TRUMENBA INJ .....	283
<i>tri-nymyo tab</i> .....	152	TRUPLUS LANC MIS 26G .....	225
TRIOSTAT INJ 10MCG/ML .....	276	TRUPLUS LANC MIS 28G .....	225
TRIPTODUR SUS 22.5MG .....	186	TRUPLUS LANC MIS 30G .....	225
TRISENOX INJ 12MG/6ML .....	115	TRUPLUS LANC MIS 33G .....	225
TRISOD CITRA SOL 0.5%CRRT .....	234	TRUQAP TAB 160MG .....	114
<i>tri-sprintec tab</i> .....	152	TRUSOPT SOL 2% OP .....	256
TRISTART DHA CAP .....	243	TRUSTEX/RIA MIS LUBRICAT .....	218
TRISTART ONE CAP 35-1-215 .....	243	TRUSTEX/RIA MIS NON-LUB .....	218
TRI-TABS DHA MIS .....	243	TRUSTEX/RIA MIS SPERMICI .....	218
TRIUMEQ PD TAB .....	130	TRUSTEX LUBR MIS ASSORTED .....	218
TRIUMEQ TAB .....	130	TRUSTEX LUBR MIS BANANA .....	218
TRI-VI-FLORO SUS 0.25/ML .....	241	TRUSTEX LUBR MIS CHOC .....	218
TRI-VI-FLORO SUS 0.5MG/ML .....	241	TRUSTEX LUBR MIS COLA .....	218
TRI-VI-FLOR SUS 0.25/ML .....	241	TRUSTEX LUBR MIS COLORS .....	218
TRI-VI-FLOR SUS 0.5MG/ML .....	241	TRUSTEX LUBR MIS EX LARGE .....	218
<i>tri-vit/fluo dro 0.25mg</i> .....	241	TRUSTEX LUBR MIS EX STR .....	218
<i>tri-vit/fluo dro 0.5mg</i> .....	241	TRUSTEX LUBR MIS GRAPE .....	218
<i>trivora-28 tab</i> .....	152	TRUSTEX LUBR MIS MINT .....	218
<i>tri-vylibra tab</i> .....	152	TRUSTEX LUBR MIS RIB/STUD .....	218
<i>tri-vylibra tab lo</i> .....	152	TRUSTEX LUBR MIS SPERMICI .....	218
TRODELVY SOL 180MG .....	117	TRUSTEX LUBR MIS STRWBRY .....	218
TROGARZO INJ 150MG/ML .....	130	TRUSTEX LUBR MIS VANILLA .....	218
TROKENDI XR CAP 100MG .....	65	TRUSTEX MIS BANANA .....	218
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TRUVADA TAB 133-200 .....	131	ULORIC TAB 80MG .....	200
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TUDORZA PRES AER 400/ACT.....	52	ULTILET MIS 33G .....	225
TUKYSA TAB 150MG.....	105	ULTILET MIS LANCETS .....	225
TUKYSA TAB 50MG .....	105	ULTILET MIS SAFETY .....	225
TURALIO CAP 200MG .....	114	ULTIMA TES.....	179
TURPENTINE SOL SPIRITS .....	171	ULTIVA INJ 1MG .....	38
<i>turqoz tab</i> .....	152	ULTIVA INJ 2MG .....	38
TWINRIX INJ.....	284	ULTIVA INJ 5MG .....	38
TWIRLA DIS 120-30.....	152	ULTOMIRIS INJ 100MG/ML .....	204
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TYBLUME CHW 0.1-0.02 .....	152	ULTRABAG/PD2 SOL DIANEAL.....	238
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<i>tydemy tab</i> .....	152	ULTRACET TAB 37.5-325 .....	39
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TYENNE INJ 80MG/4ML .....	25	ULTRA THIN MIS 30G .....	225
TYGACIL INJ 50MG.....	271	ULTRA THIN MIS 31G .....	225
TYKERB TAB 250MG .....	114	ULTRA THIN MIS 33G.....	225
TYMLOS INJ.....	183	ULTRA THIN MIS LANC 28G .....	225
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TYVASO DPI POW 64MCG .....	143	UNIFINE SAFE MIS 31GX5MM .....	227
TYVASO REFIL SOL 0.6MG/ML.....	143	UNIFINE SAFE MIS 31GX6MM .....	227
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UCERIS AER 2MG/ACT .....	42	UNILET GP 28 MIS ULT THIN .....	226

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UNILET LANCE MIS 28G.....	226	<i>unithroid tab 50mcg</i> .....	277
UNILET LANCE MIS 33G.....	226	<i>unithroid tab 75mcg</i> .....	277
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UNISTIK 23G MIS NORMAL.....	226	UPTRAVI TAB 1000MCG.....	144
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UNISTIK 2 MIS 2.4MM.....	226	UPTRAVI TAB 1600MCG.....	144
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UNISTIK 2 MIS NORMAL.....	226	UPTRAVI TAB 800MCG.....	144
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UNISTIK CZT MIS COMFORT.....	226	URSO 250 TAB 250MG.....	194
UNISTIK CZT MIS NORMAL.....	226	<i>ursodiol cap 300 mg</i> .....	194
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UNISTIK SAFE MIS LANC 30G.....	226	<i>ursodiol tab 500 mg</i> .....	194
UNISTIK TOUC MIS LANC 21G.....	226	URSO FORTE TAB 500MG.....	194
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<i>unithroid tab 100mcg</i> .....	277	UZEDY INJ 150MG.....	123
<i>unithroid tab 112mcg</i> .....	277	UZEDY INJ 200MG.....	123
<i>unithroid tab 125mcg</i> .....	277	UZEDY INJ 250MG.....	123
<i>unithroid tab 137mcg</i> .....	277	UZEDY INJ 50MG.....	123
<i>unithroid tab 150mcg</i> .....	277	UZEDY INJ 75MG.....	123
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<i>unithroid tab 200mcg</i> .....	277	VABOMERE INJ 2GM(1-1).....	44
<i>unithroid tab 25mcg</i> .....	276	VAGIFEM TAB 10MCG.....	285

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<i>valacyclovir hcl tab 500 mg</i> .....	133	VANCOMY/NACL INJ 1.5/250.....	44
VALCHLOR GEL 0.016%.....	163	VANCOMY/NACL INJ 1.5/500 .....	44
VALCYTE SOL 50MG/ML.....	131	VANCOMY/NACL INJ 1.75/250 .....	45
VALCYTE TAB 450MG.....	131	VANCOMY/NACL INJ 2/500ML .....	45
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i> .....	131	VANCOMY/NACL INJ 750/150 .....	45
<i>valganciclovir hcl tab 450 mg (base equivalent)</i> .....	131	VANCOMYC/D5W INJ 1.25/250 .....	45
VALIUM TAB 10MG.....	50	VANCOMYC/D5W INJ 1.5/250.....	45
VALIUM TAB 2MG.....	50	VANCOMYC/D5W INJ 1.5/300 .....	45
VALIUM TAB 5MG .....	50	VANCOMYC/D5W INJ 1GM .....	45
<i>valproate sodium inj 100 mg/ml</i> .....	67	VANCOMYC/D5W INJ 500MG .....	45
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i> .....	67	VANCOMYC/D5W INJ 750MG.....	45
<i>valproic acid cap 250 mg</i> .....	67	<i>vancomycin hcl cap 125 mg (base equivalent)</i> .....	45
<i>valrubicin soln for intravesical instillation 40 mg/ml</i> .....	109	<i>vancomycin hcl cap 250 mg (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> .....	98	<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i> .....	98	<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i> .....	98	<i>vancomycin hcl for iv soln 100 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i> .....	98	<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	98	<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i> .....	45
<i>valsartan oral soln 4 mg/ml</i> .....	93	<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i> .....	45
<i>valsartan tab 160 mg</i> .....	93	<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i> .....	45
<i>valsartan tab 320 mg</i> .....	93	<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i> .....	45
<i>valsartan tab 40 mg</i> .....	93	<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i> .....	45
<i>valsartan tab 80 mg</i> .....	93	<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i> .....	45
VALSTAR SOL 40MG/ML .....	109	VANCOMYCIN INJ 1.25GM .....	45
VALTOCO SPR 10MG .....	60	VANCOMYCIN INJ 1.5/300 .....	45
VALTOCO SPR 15MG .....	60	VANCOMYCIN INJ 1.5GM.....	45
VALTOCO SPR 20MG .....	60	VANCOMYCIN INJ 10GM .....	45
VALTOCO SPR 5MG.....	60	VANCOMYCIN INJ 1 GM .....	45
VALTRESX TAB 1GM.....	133	VANCOMYCIN INJ 1GM/200M.....	45
VALTRESX TAB 500MG .....	133	VANCOMYCIN INJ 500MG .....	45
<i>vanatol lq sol</i> .....	30	VANCOMYCIN INJ 5GM .....	45
VANCOCIN CAP 125MG.....	44		
VANCOCIN CAP 250MG.....	44		
VANCOMY/NACL INJ 1/250ML .....	45		



VANCOMYCIN INJ 750MG .....	45	<i>vecuronium bromide for inj 10 mg</i> .....	248
VANCOMYCIN SOL 1.75GM .....	45	<i>vecuronium bromide for inj 20 mg</i> .....	248
VANCOMYCIN SOL 2G/400ML.....	45	VEGZELMA SOL 100/4ML.....	104
VANFLYTA TAB 17.7MG .....	114	VEGZELMA SOL 400/16ML .....	104
VANFLYTA TAB 26.5MG .....	114	VEKLURY INJ 100MG .....	133
VANOS CRE 0.1% .....	169	VELCADE INJ 3.5MG .....	114
VAQTA INJ 25/0.5ML .....	284	VELETRI INJ 0.5MG .....	143
VAQTA INJ 50UNT/ML.....	284	VELETRI INJ 1.5MG .....	143
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>		<i>velivet pak</i> .....	152
.....	270	VELPHORO CHW 500MG .....	197
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1</i>		VELSIPITY TAB 2MG .....	196
<i>mg start pack</i> .....	270	VELTASSA POW 16.8GM .....	238
<i>varenicline tartrate tab 1 mg (base equiv)</i>		VELTASSA POW 25.2GM.....	238
.....	270	VELTASSA POW 8.4GM.....	238
VARITHENA AER 10MG/ML .....	238	VELTIN GEL .....	161
VARIVAX INJ .....	284	VEMLIDY TAB 25MG .....	132
VARIZIG INJ 125/1.2.....	259	VENCLEXTA TAB 100MG .....	106
VARIZIG INJ 125UNIT .....	259	VENCLEXTA TAB 10MG .....	106
VARUBI TAB 90MG.....	84	VENCLEXTA TAB 50MG.....	106
VASCEPA CAP 0.5GM.....	87	VENCLEXTA TAB START PK.....	106
VASCEPA CAP 1GM .....	87	VENELEX OIN .....	175
VASERETIC TAB 10-25MG.....	98	VENEXA FE TAB .....	240
VASHE CLEANS SOL.....	175	VENEXA TAB .....	240
VASHE WOUND SOL THERAPY .....	175	<i>venlafaxine hcl cap er 24hr 150 mg (base</i>	
VASOPRE/NAACL INJ 100/100 .....	189	<i>equivalent)</i> .....	72
VASOPRE/NAACL INJ 100/250.....	189	<i>venlafaxine hcl cap er 24hr 37.5 mg (base</i>	
<i>vasopressin iv soln 20 unit/ml (for iv</i>		<i>equivalent)</i> .....	71
<i>infusion)</i> .....	189	<i>venlafaxine hcl cap er 24hr 75 mg (base</i>	
VASOSTRICT INJ 20UNT/ML.....	189	<i>equivalent)</i> .....	72
VASOSTRICT SOL .....	189	<i>venlafaxine hcl tab 100 mg (base</i>	
VASOTEC TAB 10MG.....	92	<i>equivalent)</i> .....	72
VASOTEC TAB 2.5MG .....	92	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	
VASOTEC TAB 20MG .....	92	.....	72
VASOTEC TAB 5MG .....	92	<i>venlafaxine hcl tab 37.5 mg (base</i>	
VAXCHORA SUS .....	283	<i>equivalent)</i> .....	72
VAXELIS INJ.....	277	<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	
VAXNEUVANCE INJ .....	283	.....	72
VAZCULEP INJ 10MG/ML.....	287	<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	
VCF VAGINAL GEL CONTRACE.....	284	.....	72
VCF VAGINAL MIS CONTRACP.....	284	<i>venlafaxine hcl tab er 24hr 225 mg (base</i>	
VECAMEYL TAB 2.5MG.....	98	<i>equivalent)</i> .....	72
VECTIBIX INJ 100MG.....	107	VENLAFAXINE TAB 112.5MG .....	72
VECTIBIX INJ 400MG.....	107	VENOFER INJ 20MG/ML.....	210
VECTICAL OIN 3MCG/GM .....	165	VENTAVIS SOL 10MCG/ML .....	143

VENTAVIS SOL 20MCG/ML.....	143	<i>vestura tab 3-0.02mg</i> .....	152
VENTOLIN HFA AER .....	56	VFEND IV INJ 200MG.....	85
VENTRIXYL FE TAB .....	240	VFEND SUS 40MG/ML.....	85
VENTRIXYL TAB.....	240	VFEND TAB 200MG.....	85
VEOPOZ INJ 400/2ML.....	204	VFEND TAB 50MG .....	85
VEOZAH TAB 45MG.....	186	V-GO 20 KIT .....	226
VERAMYST SPR 27.5MCG .....	247	V-GO 30 KIT .....	227
<i>verapamil hcl cap er 24hr 100 mg</i> .....	140	V-GO 40 KIT .....	227
<i>verapamil hcl cap er 24hr 120 mg</i> .....	140	VIBATIV INJ 750MG .....	46
<i>verapamil hcl cap er 24hr 180 mg</i> .....	140	VIBERZI TAB 100MG .....	196
<i>verapamil hcl cap er 24hr 200 mg</i> .....	140	VIBERZI TAB 75MG .....	196
<i>verapamil hcl cap er 24hr 240 mg</i> .....	140	VIBRAMYCIN CAP 100MG.....	273
<i>verapamil hcl cap er 24hr 300 mg</i> .....	140	VIBRAMYCIN SUS 25MG/5ML .....	273
<i>verapamil hcl cap er 24hr 360 mg</i> .....	140	VIBRAMYCIN SYP 50MG/5ML .....	273
<i>verapamil hcl iv soln 2.5 mg/ml</i> .....	140	VICTOZA INJ 18MG/3ML .....	77
<i>verapamil hcl tab 120 mg</i> .....	140	VIDAZA INJ 100MG.....	104
<i>verapamil hcl tab 40 mg</i> .....	140	VIEKIRA PAK TAB .....	132
<i>verapamil hcl tab 80 mg</i> .....	140	<i>vienva tab 0.1-20</i> .....	152
<i>verapamil hcl tab er 120 mg</i> .....	140	<i>vigabatrin powd pack 500 mg</i> .....	66
<i>verapamil hcl tab er 180 mg</i> .....	140	<i>vigabatrin tab 500 mg</i> .....	66
<i>verapamil hcl tab er 240 mg</i> .....	140	<i>vigadrone pow 500mg</i> .....	66
VEREGEN OIN 15%.....	161	VIGAMOX DRO 0.5%.....	253
VERELAN CAP 120MG SR .....	140	<i>vigpoder pow 500mg</i> .....	66
VERELAN CAP 180MG SR .....	140	VIIBRYD KIT STARTER .....	70
VERELAN CAP 240MG SR .....	140	VIIBRYD TAB 10MG .....	71
VERELAN CAP 360MG SR .....	140	VIIBRYD TAB 20MG.....	71
VERELAN PM CAP 100MG ER .....	140	VIIBRYD TAB 40MG.....	71
VERELAN PM CAP 200MG ER .....	140	VIJOICE TAB 125MG.....	238
VERELAN PM CAP 300MG ER .....	140	VIJOICE TAB 250MG.....	238
VERIFINE LAN MIS MINI 21G .....	227	VIJOICE TAB 50MG.....	238
VERIFINE LAN MIS MINI 23G .....	227	<i>vilazodone hcl tab 10 mg</i> .....	71
VERIFINE LAN MIS MINI 28G .....	227	<i>vilazodone hcl tab 20 mg</i> .....	71
VERIFINE LAN MIS MINI 30G .....	227	<i>vilazodone hcl tab 40 mg</i> .....	71
VERQUVO TAB 10MG.....	145	VILTEPSO SOL .....	248
VERQUVO TAB 2.5MG .....	145	VIMIZIM INJ 5MG/5ML .....	188
VERQUVO TAB 5MG .....	145	VIMOVO TAB 375-20MG .....	28
VERSACLOZ SUS 50MG/ML.....	125	VIMOVO TAB 500-20MG.....	28
VERZENIO TAB 100MG.....	114	VIMPAT INJ 200MG/20.....	65
VERZENIO TAB 150MG.....	114	VIMPAT SOL 10MG/ML.....	65
VERZENIO TAB 200MG .....	114	VIMPAT TAB 100MG .....	66
VERZENIO TAB 50MG .....	114	VIMPAT TAB 150MG.....	66
VESICARE LS SUS 5MG/5ML.....	282	VIMPAT TAB 200MG.....	66
VESICARE TAB 10MG .....	282	VIMPAT TAB 50MG .....	65
VESICARE TAB 5MG.....	282	VINATE DHA CAP 27-1.13 .....	243

VINATE II TAB.....	243	VITRAKVI CAP 100MG.....	114
VINATE M TAB .....	243	VITRAKVI CAP 25MG.....	114
VINATE ONE TAB.....	243	VITRAKVI SOL 20MG/ML .....	114
<i>vinblastine sulfate inj 1 mg/ml.....</i>	<i>117</i>	VITRAMYN TAB .....	240
<i>vincristine sulfate iv soln 1 mg/ml .....</i>	<i>117</i>	VITRANOL FE TAB .....	240
<i>vinorelbine tartrate inj 10 mg/ml (base</i>		VITRANOL TAB .....	240
<i>equiv).....</i>	<i>117</i>	VITREXYL TAB .....	240
<i>vinorelbine tartrate inj 50 mg/5ml (10</i>		VITREXYL TAB IRON .....	240
<i>mg/ml) (base equiv).....</i>	<i>117</i>	VIVA DHA CAP.....	244
VIOKACE TAB 10440 .....	180	VIVELLE-DOT DIS 0.025MG .....	193
VIOKACE TAB 20880.....	180	VIVELLE-DOT DIS 0.0375MG .....	193
<i>viorele tab .....</i>	<i>152</i>	VIVELLE-DOT DIS 0.05MG.....	193
VIRACEPT TAB 250MG .....	131	VIVELLE-DOT DIS 0.075MG .....	193
VIRACEPT TAB 625MG .....	131	VIVELLE-DOT DIS 0.1MG.....	193
VIREAD POW 40MG/GM .....	131	VIVITROL INJ 380MG.....	82
VIREAD TAB 150MG.....	131	VIVJOA CAP 150MG.....	85
VIREAD TAB 200MG.....	131	VIVLODEX CAP 10MG .....	28
VIREAD TAB 250MG.....	131	VIVLODEX CAP 5MG .....	28
VIREAD TAB 300MG.....	131	VIVOTIF CAP EC.....	283
VIRT-C DHA CAP .....	244	VIZIMPRO TAB 15MG.....	107
VIRT-NATE CAP DHA.....	244	VIZIMPRO TAB 30MG.....	107
VIRT-PN DHA CAP .....	244	VIZIMPRO TAB 45MG.....	107
VIRT-PN PLUS CAP .....	244	VOCAL POINT TES BLD GLUC .....	180
VISBIOME PAK .....	80	VOGELXO GEL 1%(50MG) .....	42
VISCO-3 INJ 25/2.5ML .....	246	VOGELXO GEL PUMP 1%.....	42
VISIONBLUE INJ 0.06%.....	255	<i>volnea tab .....</i>	<i>152</i>
VISTARIL CAP 25MG.....	49	VOL-PLUS TAB.....	244
VISTOGARD PAK 10GM .....	82	VOL-TAB RX TAB.....	244
VISUDYNE INJ 15MG .....	253	VONJO CAP 100MG .....	114
<i>vit a/c/d/fl dro 0.25mg .....</i>	<i>241</i>	VONVENDI INJ 1300UNIT .....	204
VITAFOL CAP ULTRA .....	244	VONVENDI INJ 650UNIT .....	204
VITAFOL CHW GUMMIES.....	244	VOQUEZNA PAK DUAL PAK .....	281
VITAFOL FE+ CAP.....	244	VOQUEZNA PAK TRIP PK.....	281
VITAFOL-NANO TAB.....	244	VOQUEZNA TAB 10MG .....	281
VITAFOL-OB PAK +DHA.....	244	VOQUEZNA TAB 20MG .....	281
VITAFOL-OB TAB 65-1MG.....	244	VORAXAZE INJ 1000UNIT .....	116
VITAFOL-ONE CAP.....	244	<i>voriconazole for inj 200 mg .....</i>	<i>85</i>
VITAFUSION CHW PRENATAL .....	244	<i>voriconazole for susp 40 mg/ml .....</i>	<i>85</i>
VITAMEDMD CAP ONE RX.....	244	VORICONAZOLE INJ 200MG .....	85
VITAPEARL CAP .....	244	<i>voriconazole tab 200 mg .....</i>	<i>85</i>
VITAROCA PLU TAB.....	240	<i>voriconazole tab 50 mg.....</i>	<i>85</i>
VITATRUE MIS.....	244	VOSEVI TAB.....	132
VITLIPID N INJ ADULT .....	240	VOTRIENT TAB 200MG.....	114
VITLIPID N INJ INFANT.....	241	VOWST CAP .....	196

VOXZOGO INJ 0.4MG.....	189	WAKIX TAB 17.8MG.....	16
VOXZOGO INJ 0.56MG .....	189	WAKIX TAB 4.45MG.....	16
VOXZOGO INJ 1.2MG.....	189	<i>warfarin sodium tab 10 mg</i> .....	57
VOYDEYA TAB 100MG.....	204	<i>warfarin sodium tab 1 mg</i> .....	57
VOYDEYA TAB 50-100MG .....	204	<i>warfarin sodium tab 2.5 mg</i> .....	57
VP-HEME OB MIS + DHA.....	244	<i>warfarin sodium tab 2 mg</i> .....	57
VP-PNV-DHA CAP.....	244	<i>warfarin sodium tab 3 mg</i> .....	57
VPRIV INJ 400UNIT.....	206	<i>warfarin sodium tab 4 mg</i> .....	57
VRAYLAR CAP 1.5MG .....	121	<i>warfarin sodium tab 5 mg</i> .....	57
VRAYLAR CAP 3MG.....	121	<i>warfarin sodium tab 6 mg</i> .....	57
VRAYLAR CAP 4.5MG .....	121	<i>warfarin sodium tab 7.5 mg</i> .....	57
VRAYLAR CAP 6MG.....	121	<i>water for irrigation, sterile irrigation soln</i> 237	
VTAMA CRE 1% .....	165	WAVESENSE TES PRESTO .....	180
<i>vtol lq sol</i> .....	30	WELCHOL PAK 3.75GM.....	88
VUMERITY CAP 231MG.....	266	WELCHOL TAB 625MG.....	88
VUSION OIN .....	163	WELLBUTRIN TAB 100MG SR.....	68
VYEPTI INJ 100MG/ML.....	228	WELLBUTRIN TAB 150MG SR.....	68
<i>vyfemla tab 0.4-35</i> .....	152	WELLBUTRIN TAB 200MG SR.....	68
<i>vylibra tab 0.25-35</i> .....	152	WELLBUTRIN TAB XL 150MG .....	68
VYNDAMAX CAP 61MG.....	145	WELLBUTRIN TAB XL 300MG .....	68
VYNDAQEL CAP 20MG .....	145	<i>vera tab 0.5/35</i> .....	152
VYONDYS 53 INJ 100/2ML .....	248	<i>wes-phos 250 tab neutral</i> .....	232
VYTORIN TAB 10-10MG .....	87	WESTHROID TAB 130MG .....	277
VYTORIN TAB 10-20MG.....	87	WESTHROID TAB 195MG.....	277
VYTORIN TAB 10-40MG .....	87	WESTHROID TAB 32.5MG.....	277
VYTORIN TAB 10-80MG.....	87	WESTHROID TAB 65MG.....	277
VYVANSE CAP 10MG .....	14	WESTHROID TAB 97.5MG.....	277
VYVANSE CAP 20MG .....	14	WHEAT GERM OIL.....	287
VYVANSE CAP 30MG .....	14	WIDE-SEAL DPR KIT 60.....	219
VYVANSE CAP 40MG .....	14	WIDE-SEAL DPR KIT 65.....	219
VYVANSE CAP 50MG .....	14	WIDE-SEAL DPR KIT 70.....	219
VYVANSE CAP 60MG .....	14	WIDE-SEAL DPR KIT 75.....	219
VYVANSE CAP 70MG .....	14	WIDE-SEAL DPR KIT 80.....	219
VYVANSE CHW 10MG.....	14	WIDE-SEAL DPR KIT 85.....	219
VYVANSE CHW 20MG .....	14	WIDE-SEAL DPR KIT 90.....	219
VYVANSE CHW 30MG .....	14	WIDE-SEAL DPR KIT 95.....	219
VYVANSE CHW 40MG.....	14	WILATE INJ .....	204
VYVANSE CHW 50MG.....	14	WILZIN CAP 25MG .....	234
VYVANSE CHW 60MG.....	14	WINLEVI CRE 1% .....	161
VYVGART INJ 400/20ML.....	235	WINREVAIR INJ 45MG .....	143
VYXEOS INJ 44-100MG .....	110	WINREVAIR INJ 60MG .....	143
VYZULTA SOL 0.024%.....	256	WINRHO SDF INJ 15000UNT .....	259
<b>W</b>		WINRHO SDF INJ 1500UNIT .....	259
WAINUA INJ 45/0.8ML .....	270	WINRHO SDF INJ 2500UNIT .....	259

WINRHO SDF INJ 5000UNIT .....	259	XCOPRI TAB 150MG .....	66
<i>wixela inhub aer 100/50</i> .....	56	XCOPRI TAB 200MG .....	66
<i>wixela inhub aer 250/50</i> .....	56	XCOPRI TAB 50MG .....	66
<i>wixela inhub aer 500/50</i> .....	56	XDEMVY DRO 0.25% .....	253
WP THYROID TAB 113.75MG .....	277	XELJANZ SOL 1MG/ML .....	23
WP THYROID TAB 130MG .....	277	XELJANZ TAB 10MG .....	24
WP THYROID TAB 16.25MG .....	277	XELJANZ TAB 5MG .....	23
WP THYROID TAB 32.5MG .....	277	XELJANZ XR TAB 11MG .....	24
WP THYROID TAB 48.75MG .....	277	XELJANZ XR TAB 22MG .....	24
WP THYROID TAB 65MG .....	277	XELODA TAB 150MG .....	104
WP THYROID TAB 81.25MG .....	277	XELODA TAB 500MG .....	104
WP THYROID TAB 97.5MG .....	277	XELSTRYM PAD 13.5/9HR .....	14
<i>wymzya fe chw 0.4mg-35</i> .....	152	XELSTRYM PAD 18MG/9HR .....	14
<b>X</b>		XELSTRYM PAD 9MG/9HR .....	14
XACDURO INJ 1-1GM .....	44	XENAZINE TAB 12.5MG .....	265
XACIATO GEL 2% .....	285	XENAZINE TAB 25MG .....	265
XADAGO TAB 100MG .....	121	XENICAL CAP 120MG .....	15
XADAGO TAB 50MG .....	121	XENPOZYME INJ 4MG .....	188
XALATAN SOL 0.005% .....	257	XENPOZYME SOL 20MG .....	188
XALKORI CAP 150MG .....	114	XEOMIN INJ 100UNIT .....	248
XALKORI CAP 200MG .....	114	XEOMIN INJ 200UNIT .....	248
XALKORI CAP 20MG .....	114	XEOMIN INJ 50 UNIT .....	248
XALKORI CAP 250MG .....	114	XEPI CRE 1% .....	162
XALKORI CAP 50MG .....	114	XERAC-AC SOL 6.25% .....	172
XANAX TAB 0.25MG .....	50	XERALUX CRE .....	172
XANAX TAB 0.5MG .....	50	XERAVA INJ 100MG .....	271
XANAX TAB 1MG .....	50	XERAVA INJ 50MG .....	271
XANAX TAB 2MG .....	50	XERESE CRE 5-1% .....	166
XANAX XR TAB 0.5MG .....	50	XERMELO TAB 250MG .....	197
XANAX XR TAB 1MG .....	50	XEROFORM OCL PAD 1X8 .....	175
XANAX XR TAB 2MG .....	50	XEROFORM OIL MIS 1 .....	175
XANAX XR TAB 3MG .....	50	XEROFORM OIL MIS ROLL 4X9 .....	175
XARELTO STAR TAB 15/20MG .....	57	XEROFORM OIL PAD 2 .....	175
XARELTO SUS 1MG/ML .....	57	XEROFORM PET PAD 4X4 DRES .....	175
XARELTO TAB 10MG .....	57	XEROFORM PET PAD 5X9 DRES .....	175
XARELTO TAB 15MG .....	57	XEROFRM GAUZ MIS 1 .....	175
XARELTO TAB 2.5MG .....	57	XEROFRM GAUZ MIS 5 .....	175
XARELTO TAB 20MG .....	57	XEROFRM GAUZ PAD 5 .....	175
XATMEP SOL 2.5MG/ML .....	104	XEROFRM PETR PAD 2 .....	175
XCOPRI PAK 100-150 .....	66	XEROFRM PETR PAD 4 .....	175
XCOPRI PAK 12.5-25 .....	66	XEROFRM ROLL MIS 4 .....	175
XCOPRI PAK 150-200 .....	66	XGEVA INJ .....	184
XCOPRI PAK 50-100MG .....	66	XHANCE MIS 93MCG .....	247
XCOPRI TAB 100MG .....	66	XIAFLEX INJ 0.9MG .....	234

XIFAXAN TAB 200MG .....	43	XURIDEN POW 2GM .....	188
XIFAXAN TAB 550MG .....	43	XYLO/EPI 1%- INJ 1:100000 .....	214
XIGDUO XR TAB 10-1000 .....	75	XYLO/EPI INJ 0.5%.....	214
XIGDUO XR TAB 10-500MG .....	75	XYLO/EPI INJ 2% .....	214
XIGDUO XR TAB 2.5-1000 .....	75	XYLOCAINE INJ 0.5%.....	216
XIGDUO XR TAB 5-1000MG .....	75	XYLOCAINE INJ 1% .....	216
XIGDUO XR TAB 5-500MG.....	75	XYLOCAINE INJ 2% .....	216
XIIDRA DRO 5% .....	253	XYLOCAINE INJ MPF 0.5%.....	216
XIMINO CAP 135MG ER .....	273	XYLOCAINE INJ MPF 1.5%.....	216
XIMINO CAP 45MG ER.....	273	XYLOCAINE INJ -MPF 1% .....	216
XIMINO CAP 90MG ER.....	273	XYLOCAINE INJ -MPF 2%.....	216
XIPERE SUS 40MG/ML .....	255	XYLO-MPF/EPI INJ 1.5% .....	214
XOFIGO INJ 1100KBQ .....	115	XYLO-MPF/EPI INJ 1% .....	214
XOFLUZA TAB 20MG .....	133	XYLO-MPF/EPI INJ 2%.....	214
XOFLUZA TAB 40MG .....	133	XYNTHA INJ 1000UNIT .....	204
XOLAIR INJ 150MG/ML .....	52	XYNTHA INJ 2000UNIT.....	204
XOLAIR INJ 300/2ML.....	52	XYNTHA INJ 250UNIT .....	204
XOLAIR INJ 75/0.5 .....	52	XYNTHA INJ 500UNIT .....	204
XOLAIR SOL 150MG.....	52	XYNTHA SOLOF INJ 1000UNIT .....	204
XOLEGEL GEL 2%.....	163	XYNTHA SOLOF INJ 2000UNIT .....	204
XOLREMDI CAP 100MG .....	210	XYNTHA SOLOF INJ 3000UNIT .....	204
XOPENEX CONC NEB 1.25/0.5 .....	56	XYNTHA SOLOF INJ 500UNIT .....	204
XOPENEX HFA AER .....	56	XYNTHA SOLOF KIT 250UNIT .....	204
XOPENEX NEB 0.31MG .....	56	XYOSTED INJ 100/0.5.....	42
XOPENEX NEB 0.63MG .....	56	XYOSTED INJ 50/0.5 .....	42
XOPENEX NEB 1.25/3ML .....	56	XYOSTED INJ 75/0.5.....	42
XOSPATA TAB 40MG .....	114	XYREM SOL 500MG/ML .....	263
XPHOZAH TAB 20MG.....	188	XYWAV SOL 0.5GM/ML .....	263
XPHOZAH TAB 30MG.....	188	<b>Y</b>	
XPOVIO PAK 40MG .....	109	<i>yargesa cap 100mg</i> .....	206
XPOVIO PAK 50MG .....	109	YASMIN 28 TAB 3-0.03MG.....	152
XPOVIO PAK 60MG .....	109	YAZ TAB 3-0.02MG.....	152
XPOVIO PAK 80MG .....	109	YERVOY INJ 200MG.....	106
XPRESS TES BLD GLUC .....	180	YERVOY INJ 50MG .....	106
XTAMPZA ER CAP 13.5MG .....	38	YESCARTA INJ .....	106
XTAMPZA ER CAP 18MG .....	38	YF-VAX INJ.....	284
XTAMPZA ER CAP 27MG.....	38	<i>yl folic aci tab 400mcg</i> .....	207
XTAMPZA ER CAP 36MG.....	38	YONDELIS INJ 1MG.....	102
XTAMPZA ER CAP 9MG.....	38	YONSA TAB 125MG.....	108
XTANDI CAP 40MG .....	108	YOSPRALA TAB 325-40MG.....	206
XTANDI TAB 40MG.....	108	YOSPRALA TAB 81-40MG.....	206
XTANDI TAB 80MG.....	108	YUFLYMA 1PEN KIT 80/0.8ML.....	23
<i>xulane dis 150-35</i> .....	152	YUPELRI SOL .....	52
XULTOPHY INJ 100/3.6 .....	75	YUSIMRY INJ 40/0.8ML .....	23

<i>yuvaferm tab 10mcg</i> .....	285	ZEMPLAR INJ 5MCG/ML .....	188
<b>Z</b>		<i>zenatane cap 10mg</i> .....	161
ZACLIR LOT 8% .....	161	<i>zenatane cap 20mg</i> .....	161
<i>zafemy dis 150/35</i> .....	152	<i>zenatane cap 30mg</i> .....	161
<i>zafirlukast tab 10 mg</i> .....	53	<i>zenatane cap 40mg</i> .....	161
<i>zafirlukast tab 20 mg</i> .....	53	ZENPEP CAP 10000UNT .....	180
<i>zaleplon cap 10 mg</i> .....	213	ZENPEP CAP 15000UNT .....	180
<i>zaleplon cap 5 mg</i> .....	212	ZENPEP CAP 20000UNT .....	180
ZALTRAP INJ 100/4ML .....	104	ZENPEP CAP 25000UNT .....	180
ZALTRAP INJ 200/8ML.....	104	ZENPEP CAP 3000UNIT.....	180
ZANAFLEX CAP 2MG .....	245	ZENPEP CAP 40000UNT .....	180
ZANAFLEX CAP 4MG .....	245	ZENPEP CAP 5000UNIT.....	180
ZANAFLEX CAP 6MG .....	245	ZENPEP CAP 60000UNT .....	180
ZANAFLEX TAB 4MG .....	245	<i>zenzedi tab 10mg</i> .....	14
ZANOSAR INJ 1GM.....	102	<i>zenzedi tab 15mg</i> .....	14
ZARONTIN CAP 250MG.....	67	<i>zenzedi tab 2.5mg</i> .....	14
ZARONTIN SOL 250/5ML.....	67	<i>zenzedi tab 20mg</i> .....	14
ZARXIO INJ 300/0.5 .....	209	<i>zenzedi tab 30mg</i> .....	14
ZARXIO INJ 480/0.8 .....	209	<i>zenzedi tab 5mg</i> .....	14
ZATEAN-PN CAP DHA .....	244	<i>zenzedi tab 7.5mg</i> .....	14
ZATEAN-PN CAP PLUS.....	244	ZEPATIER TAB 50-100MG.....	133
ZAVESCA CAP 100MG .....	206	ZEPOSIA 7DAY CAP STR PACK.....	266
<i>zebutal cap</i> .....	30	ZEPOSIA CAP .92MG .....	266
ZEGALOGUE INJ 0.6/0.6 .....	76	ZEPOSIA CAP STR KIT .....	266
ZEGERID CAP 20-1100 .....	281	ZERBAXA INJ 1.5GM .....	145
ZEGERID CAP 40-1100 .....	281	<i>zeruvia pad 4-1%</i> .....	171
ZEGERID POW 20-1680 .....	281	ZERVIA TE DRO 0.24% .....	256
ZEGERID POW 40-1680.....	281	ZESTORETIC TAB 10-12.5 .....	98
ZEJULA CAP 100MG.....	114	ZESTORETIC TAB 20-12.5.....	98
ZEJULA TAB 100MG .....	114	ZESTORETIC TAB 20-25MG.....	98
ZEJULA TAB 200MG.....	114	ZESTRIL TAB 10MG.....	92
ZEJULA TAB 300MG .....	114	ZESTRIL TAB 2.5MG .....	92
ZELAC CAP .....	81	ZESTRIL TAB 20MG.....	92
ZELAPAR TAB 1.25MG .....	121	ZESTRIL TAB 30MG.....	92
ZELBORAF TAB 240MG .....	114	ZESTRIL TAB 40MG.....	92
ZELNORM TAB 6MG .....	196	ZESTRIL TAB 5MG .....	92
ZEMAIRA INJ 1000MG .....	270	ZETIA TAB 10MG.....	90
ZEMAIRA INJ 4000MG .....	270	ZETONNA AER 37MCG .....	247
ZEMAIRA INJ 5000MG .....	270	ZEVALIN KIT Y-90 .....	106
ZEMBRACE SYM INJ 3/0.5ML.....	229	ZIAGEN SOL 20MG/ML.....	131
ZEMDRI INJ 500MG/10.....	20	ZIANA GEL.....	161
ZEMPLAR CAP 1MCG .....	188	<i>zidovudine cap 100 mg</i> .....	131
ZEMPLAR CAP 2MCG.....	188	<i>zidovudine syrup 10 mg/ml</i> .....	131
ZEMPLAR INJ 2MCG/ML .....	188	<i>zidovudine tab 300 mg</i> .....	131

ZILBRYSQ INJ 16.6MG .....	204	ZOLADEX IMP 10.8MG .....	108
ZILBRYSQ INJ 23MG .....	204	ZOLADEX IMP 3.6MG .....	108
ZILBRYSQ INJ 32.4MG .....	204	<i>zoledronic acid inj conc for iv infusion 4</i>	
<i>zileuton tab er 12hr 600 mg</i> .....	53	<i>mg/5ml</i> .....	184
ZILRETTA INJ 32MG.....	157	<i>zoledronic acid iv soln 5 mg/100ml</i> .....	184
ZIMHI SOL .....	82	ZOLEDRONIC INJ 4/100ML.....	184
ZINC CHLORID INJ 1MG/ML.....	234	ZOLINZA CAP 100MG.....	114
ZINC SULFATE INJ 1MG/ML .....	234	<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	
ZINC SULFATE INJ 3MG/ML.....	234	.....	229
<i>zinc sulfate inj 3 mg/ml</i> .....	234	<i>zolmitriptan nasal spray 5 mg/spray unit</i>	
ZINC SULFATE INJ 5MG/ML.....	234	.....	229
<i>zinc sulfate inj 5 mg/ml</i> .....	234	<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	
ZINPLAVA SOL 25MG/ML.....	259	.....	229
ZINTREXYL-C TAB .....	240	<i>zolmitriptan orally disintegrating tab 5 mg</i>	
ZIOPTAN DRO 0.0015%.....	257	.....	229
<i>ziprasidone hcl cap 20 mg</i> .....	121	<i>zolmitriptan tab 2.5 mg</i> .....	229
<i>ziprasidone hcl cap 40 mg</i> .....	122	<i>zolmitriptan tab 5 mg</i> .....	229
<i>ziprasidone hcl cap 60 mg</i> .....	122	ZOLOFT CON 20MG/ML.....	70
<i>ziprasidone hcl cap 80 mg</i> .....	122	ZOLOFT TAB 100MG .....	70
<i>ziprasidone mesylate for inj 20 mg (base</i>		ZOLOFT TAB 25MG .....	70
<i>equivalent)</i> .....	122	ZOLOFT TAB 50MG.....	70
ZIPSOR CAP 25MG .....	28	<i>zolpidem tartrate sl tab 1.75 mg</i> .....	213
ZIRABEV INJ 100/4ML .....	104	<i>zolpidem tartrate sl tab 3.5 mg</i> .....	213
ZIRABEV INJ 400/16ML .....	104	<i>zolpidem tartrate tab 10 mg</i> .....	213
ZIRGAN GEL 0.15%.....	253	<i>zolpidem tartrate tab 5 mg</i> .....	213
ZITHROMAX INJ 500MG.....	216	<i>zolpidem tartrate tab er 12.5 mg</i> .....	213
ZITHROMAX POW 1GM PAK.....	216	<i>zolpidem tartrate tab er 6.25 mg</i> .....	213
ZITHROMAX SUS 100/5ML.....	216	ZOLPIMIST SPR 5MG.....	213
ZITHROMAX SUS 200/5ML .....	216	ZOMACTON INJ 10MG .....	186
ZITHROMAX TAB 250MG.....	216	ZOMACTON INJ 5MG.....	186
ZITHROMAX TAB 500MG .....	216	ZOMIG SPR 5MG.....	229
ZITHROMAX TAB TRI-PAK.....	216	ZOMIG TAB 2.5MG .....	229
ZITHROMAX TAB Z-PAK .....	216	ZOMIG TAB 5MG.....	229
ZOCOR TAB 10MG.....	90	ZONALON CRE 5%.....	164
ZOCOR TAB 20MG .....	90	ZONEGRAN CAP 100MG .....	66
ZOCOR TAB 40MG .....	90	ZONEGRAN CAP 25MG .....	66
ZOHYDRO ER CAP 10MG.....	38	<i>zonisamide cap 100 mg</i> .....	66
ZOHYDRO ER CAP 15MG.....	38	<i>zonisamide cap 25 mg</i> .....	66
ZOHYDRO ER CAP 20MG .....	38	<i>zonisamide cap 50 mg</i> .....	66
ZOHYDRO ER CAP 30MG .....	38	ZONTIVITY TAB 2.08MG .....	206
ZOHYDRO ER CAP 40MG.....	38	ZORTRESS TAB 0.25MG.....	237
ZOHYDRO ER CAP 50MG .....	38	ZORTRESS TAB 0.5MG .....	237
ZOKINVY CAP 50MG.....	238	ZORTRESS TAB 0.75MG.....	237
ZOKINVY CAP 75MG.....	238	ZORTRESS TAB 1MG .....	237



ZORVOLEX CAP 18MG .....	28	ZYFLO TAB 600MG .....	53
ZORVOLEX CAP 35MG.....	28	ZYKADIA TAB 150MG .....	114
ZORYVE CRE 0.3% .....	165	ZYLET SUS 0.5-0.3%.....	255
ZORYVE MIS 0.3%.....	165	ZYMFENTRA INJ 120MG/ML.....	196
ZOSYN SOL 2-0.25GM.....	261	ZYNLONTA SOL 10MG .....	106
ZOSYN SOL 3-0.375G.....	261	ZYNRELEF INJ 200-6MG .....	28
ZOSYN SOL 4-0.50GM .....	262	ZYNRELEF INJ 400-12MG .....	28
<i>zovia 1/35 tab</i> .....	152	ZYPITAMAG TAB 1MG.....	90
ZOVIRAX CRE 5%.....	166	ZYPITAMAG TAB 2MG.....	90
ZOVIRAX OIN 5% .....	166	ZYPITAMAG TAB 4MG.....	90
ZOVIRAX SUS 200/5ML .....	133	ZYPREXA INJ 10MG .....	125
ZTLIDO PAD 1.8%.....	171	ZYPREXA RELP INJ 210MG.....	125
ZUBSOLV SUB 0.7-0.18.....	40	ZYPREXA RELP INJ 300MG.....	125
ZUBSOLV SUB 1.4-0.36.....	40	ZYPREXA RELP INJ 405MG.....	125
ZUBSOLV SUB 11.4-2.9.....	40	ZYPREXA TAB 10MG .....	125
ZUBSOLV SUB 2.9-0.71.....	40	ZYPREXA TAB 15MG .....	125
ZUBSOLV SUB 5.7-1.4 .....	40	ZYPREXA TAB 2.5MG .....	125
ZUBSOLV SUB 8.6-2.1 .....	40	ZYPREXA TAB 20MG .....	125
<i>zumandimine tab 3-0.03mg</i> .....	152	ZYPREXA TAB 5MG.....	125
ZUPLENZ MIS 4MG.....	83	ZYPREXA TAB 7.5MG .....	125
ZUPLENZ MIS 8MG.....	83	ZYPREXA ZYDI TAB 10MG.....	125
ZURZUVAE CAP 20MG.....	68	ZYPREXA ZYDI TAB 15MG.....	125
ZURZUVAE CAP 25MG.....	68	ZYPREXA ZYDI TAB 20MG.....	125
ZURZUVAE CAP 30MG.....	68	ZYPREXA ZYDI TAB 5MG .....	125
ZYCLARA CRE 3.75% .....	170	ZYTIGA TAB 250MG .....	108
ZYCLARA PUMP CRE 2.5%.....	170	ZYTIGA TAB 500MG.....	108
ZYCLARA PUMP CRE 3.75% .....	170	ZYVOX SOL 2MG/ML .....	47
ZYDELIG TAB 100MG.....	114	ZYVOX SUS 100MG/5M .....	47
ZYDELIG TAB 150MG.....	114	ZYVOX TAB 600MG.....	47