



North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES

A Division of the Department of State Treasurer

North Carolina State Health Plan 2025 Custom Formulary

Effective 07/01/2025

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 specialty 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 specialty 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 and compounds. Also includes some non-preferred specialty brand oral antiretroviral medications. Excluded, non-specialty medications that are approved via the exceptions process also take a Tier 3 copay.

Tier 4: Typically includes the most cost-effective specialty medications including generics and some biosimilars.

Tier 5: Typically includes preferred brand specialty medications and some biosimilar medications. Also includes some high-cost non-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 2025 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.

Formulary Tier or Unique Copay	80/20 Plan	70/30 Plan	High Deductible Health Plan
Tier 0	\$0	\$0	\$0
Tier 1	\$5 copay per 30-day supply	\$16 copay per 30-day supply	50% after deductible
Tier 2	\$30 copay per 30-day supply	\$47 copay per 30-day supply	50% after deductible
Tier 3	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
Tier 4	\$100 copay per 30-day supply	\$200 copay per 30-day supply	50% after deductible
Tier 5	\$250 copay per 30-day supply	\$350 copay per 30-day supply	50% after deductible
Tier 6	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
Tier 7	\$5 copay per 30-day supply	\$10 copay per 30-day supply	50% after deductible
HDHP Preventive Medications (PV)	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 Aetna Customer Service at 1-833-690-1037.

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
ANALGESICS		
ANALGESICS, OTHER		
OFIRMEV INJ 10MG/ML	1	PA
ANESTHETICS PV		
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

Definition

capsule
chewable
concentrate
controlled-release
delayed-release
enteric coated
effervescent
equivalent

Abbreviation/Acronym	Definition
er	extended-release
inhal	inhalation
inj	injection
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.

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

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>	1	PA, QL
<i>amphetamine sulfate tab 10 mg</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
<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
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 SUS 2.5MG/ML	NC	
DYANAVEL XR TAB 5MG	NC	
DYANAVEL XR TAB 10MG	NC	
DYANAVEL XR TAB 15MG	NC	
DYANAVEL XR TAB 20MG	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 20 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 50 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 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

Drug Name	Drug Tier	Requirements/Limits
<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	3	PA, QL
VYVANSE CAP 20MG	3	PA, QL
VYVANSE CAP 30MG	3	PA, QL
VYVANSE CAP 40MG	3	PA, QL
VYVANSE CAP 50MG	3	PA, QL
VYVANSE CAP 60MG	3	PA, QL
VYVANSE CAP 70MG	3	PA, QL
VYVANSE CHW 10MG	3	PA, QL
VYVANSE CHW 20MG	3	PA, QL
VYVANSE CHW 30MG	3	PA, QL
VYVANSE CHW 40MG	3	PA, QL
VYVANSE CHW 50MG	3	PA, QL
VYVANSE CHW 60MG	3	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

ANALEPTICS

<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	1	
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	
DOPRAM INJ 20MG/ML	3	

ANOREXIANTS NON-AMPHETAMINE

ADIPEX-P TAB 37.5MG	3	PA; PV
<i>benzphetamine hcl tab 50 mg</i>	1	PA; PV
<i>diethylpropion hcl tab 25 mg</i>	1	PA; PV
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	PA; PV

Drug Name	Drug Tier	Requirements/Limits
LOMAIRA TAB 8MG	NC	
<i>phendimetrazine tartrate tab 35 mg</i>	1	PA; PV
<i>phentermine hcl cap 15 mg</i>	1	PA; PV
<i>phentermine hcl cap 30 mg</i>	1	PA; PV
<i>phentermine hcl cap 37.5 mg</i>	1	PA; PV
<i>phentermine hcl tab 37.5 mg</i>	1	PA; PV
<i>phentermine hcl-topiramate cap er 24hr 3.75-23 mg</i>	1	PA; PV
<i>phentermine hcl-topiramate cap er 24hr 7.5-46 mg</i>	1	PA; PV
<i>phentermine hcl-topiramate cap er 24hr 11.25-69 mg</i>	1	PA; PV
<i>phentermine hcl-topiramate cap er 24hr 15-92 mg</i>	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		
CONTRAVE TAB 8-90MG	NC	
IMCIVREE INJ 10MG/ML	NC	
<i>orlistat cap 120 mg</i>	2	PA; PV
XENICAL CAP 120MG	NC	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	PA, QL
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
INTUNIV TAB 1MG	NC	
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

Drug Name	Drug Tier	Requirements/Limits
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 60MG	3	PA, QL
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI TAB 75MG	2	PA, QL
SUNOSI TAB 150MG	2	PA, QL
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX TAB 4.45MG	5	SP, PA, QL
WAKIX TAB 17.8MG	5	SP, PA, QL
STIMULANTS - MISC.		
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	
armodafinil tab 50 mg	1	PA, QL
armodafinil tab 150 mg	1	PA, QL
armodafinil tab 200 mg	1	PA, QL
armodafinil tab 250 mg	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	
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	

Drug Name	Drug Tier	Requirements/Limits
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
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>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	1	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>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	1	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>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	1	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>	1	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>	1	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>	2	PA, QL
<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	

Drug Name	Drug Tier	Requirements/Limits
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

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - A'S

ALPHA-LIPOIC SOL ACID	3	

AMINOGLYCOSIDES

AMINOGLYCOSIDES

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	1	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	1	
ARIKAYCE SUS	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
BETHKIS NEB 300/4ML	NC	SP
<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	SP
<i>neomycin sulfate tab 500 mg</i>	1	
<i>streptomycin sulfate for inj 1 gm</i>	1	
TOBI NEB 300/5ML	NC	SP
TOBI PODHALR CAP 28MG	NC	SP
<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)</i> <i>(base equiv)</i>	2	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml)</i> <i>(base equiv)</i>	1	
<i>tobramycin sulfate inj 10 mg/ml (base</i> <i>equivalent)</i>	1	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml)</i> <i>(base equiv)</i>	1	
ZEMDRI INJ 500MG/10	3	

ANALGESICS - ANTI-INFLAMMATORY

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

ABRILADA 1PN INJ 40/0.8ML	NC	SP
ABRILADA INJ 20/0.4ML	NC	SP
ABRILADA INJ 40/0.8ML	NC	SP
ADALIMU-AATY KIT 20/0.2ML	NC	SP
ADALIMU-AATY KIT 40/0.4ML	NC	SP
ADALIMU-ADAZ INJ 10/0.1ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions

Drug Name	Drug Tier	Requirements/Limits
ADALIMU-ADAZ INJ 20/0.2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
ADALIMU-ADAZ INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
ADALIMU-ADAZ INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
ADALIMU-FKJP KIT 20/0.4ML	NC	SP
AMJEVITA INJ 10/0.2ML	NC	SP
AMJEVITA INJ 20/0.2ML	NC	SP
AMJEVITA INJ 20/0.4ML	NC	SP
AMJEVITA INJ 40/0.4ML	NC	SP
AMJEVITA INJ 40/0.8ML	NC	SP
AMJEVITA INJ 80/0.8ML	NC	SP
CYLTEZO INJ 10/0.2ML	NC	SP
CYLTEZO INJ 20/0.4ML	NC	SP
CYLTEZO INJ 40/0.8ML	NC	SP
HADLIMA INJ 40/0.4ML	NC	SP
HADLIMA INJ 40/0.8ML	NC	SP
HADLIMA PUSH INJ 40/0.4ML	NC	SP
HADLIMA PUSH INJ 40/0.8ML	NC	SP
HULIO INJ 40/0.8ML	NC	SP
HULIO KIT 20/0.4ML	NC	SP
HUMIRA INJ 10/0.1ML	NC	SP
HUMIRA INJ 20/0.2ML	NC	SP
HUMIRA INJ 40/0.4ML	NC	SP
HUMIRA KIT 40MG/0.8	NC	SP

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEDIA INJ CROHNS	NC	SP
HUMIRA PEN INJ 40/0.4ML	NC	SP
HUMIRA PEN INJ 40MG/0.8	NC	SP
HUMIRA PEN INJ 80/0.8ML	NC	SP
HUMIRA PEN KIT PS/UV	NC	SP
HYRIMOZ INJ 10/0.1ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 20/0.2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ INJ 40/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ SENS INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-CROH INJ UC SP	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-PED INJ CROHNS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
HYRIMOZ-PLAQ INJ PSOR/UVE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ-PLAQ INJ PSORIASI	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Hidradenitis Suppurativa, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, and All Other Conditions
IDACIO 2-PEN INJ 40/0.8ML	NC	SP
IDACIO 2-SYR INJ 40/0.8ML	NC	SP
SIMLANDI 1PN KIT 40/0.4ML	NC	SP
SIMLANDI 1PN KIT 80/0.8ML	NC	SP
SIMLANDI 2PN INJ 40/0.4ML	NC	SP
SIMLANDI KIT 20/0.2ML	NC	SP
SIMLANDI KIT 80/0.8ML	NC	SP
SIMPONI ARIA SOL 50MG/4ML	5	SP, PA, QL
SIMPONI INJ 50/0.5ML	NC	SP
SIMPONI INJ 100MG/ML	NC	SP
YUFLYMA 1PEN KIT 80/0.8ML	NC	SP
YUSIMRY INJ 40/0.8ML	NC	SP
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT TAB 2MG	NC	SP
RINVOQ LQ SOL 1MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 15MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
RINVOQ TAB 30MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 45MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, 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
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	5	SP, PA, QL
OTREXUP INJ 12.5/0.4	5	SP, PA, QL
OTREXUP INJ 15MG	5	SP, PA, QL
OTREXUP INJ 17.5/0.4	5	SP, PA, QL
OTREXUP INJ 20MG	5	SP, PA, QL
OTREXUP INJ 22.5/0.4	5	SP, PA, QL
OTREXUP INJ 25MG	5	SP, PA, QL
RASUVO INJ 7.5MG	NC	SP
RASUVO INJ 10MG	NC	SP
RASUVO INJ 12.5MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
RASUVO INJ 15MG	NC	SP
RASUVO INJ 17.5MG	NC	SP
RASUVO INJ 20MG	NC	SP
RASUVO INJ 22.5MG	NC	SP
RASUVO INJ 25MG	NC	SP
RASUVO INJ 30MG	NC	SP
REDITREX INJ 7.5/.3ML	NC	SP
REDITREX INJ 10/.4ML	NC	SP
REDITREX INJ 12.5/0.5	NC	SP
REDITREX INJ 15/.6ML	NC	SP
REDITREX INJ 17.5/0.7	NC	SP
REDITREX INJ 20/.8ML	NC	SP
REDITREX INJ 22.5/0.9	NC	SP
REDITREX INJ 25MG/ML	NC	SP
INTERLEUKIN-1 BLOCKERS		
ARCALYST INJ 220MG	NC	SP
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET INJ	NC	SP
INTERLEUKIN-1BETA BLOCKERS		
ILARIS INJ 150MG/ML	6	SP, PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA INJ 80MG/4ML	NC	SP
ACTEMRA INJ 162/0.9	NC	SP
ACTEMRA INJ 200/10ML	NC	SP
ACTEMRA INJ 400/20ML	NC	SP
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
TYENNE INJ 80MG/4ML	NC	SP
TYENNE INJ 200/10ML	NC	SP
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
ANAPROX DS TAB 550MG	3	
ARTHROTEC 50 TAB	NC	
ARTHROTEC 75 TAB	NC	
CALDOLOR INJ 4MG/ML	3	
CALDOLOR INJ 800/8ML	3	
CELEBREX CAP 50MG	NC	
CELEBREX CAP 100MG	NC	
CELEBREX CAP 200MG	NC	
CELEBREX CAP 400MG	NC	
<i>celecoxib cap 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
EC-NAPROSYN TAB 500MG	3	
<i>ec-naproxen tab 375mg</i>	1	
<i>ec-naproxen tab 500mg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
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 suppos 50 mg</i>	1	
<i>indomethacin susp 25 mg/5ml</i>	1	
<i>ketoprofen cap 25 mg</i>	NC	
<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	
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>lurbipr tab 100mg</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	
NAPRELAN TAB 375MG CR	NC	
NAPRELAN TAB 500MG CR	NC	
NAPRELAN TAB 750MG CR	NC	
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>	1	
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>naproxen-esomeprazole magnesium tab dr</i> <i>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	
<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	
<i>tolectin 600 tab 600mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 600 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	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 10/20/30	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 20MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 30MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
PYRIMIDINE SYNTHESIS INHIBITORS		
ARAVA TAB 10MG	3	
ARAVA TAB 20MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
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
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
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		

Drug Name	Drug Tier	Requirements/Limits
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	
<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	
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 - SODIUM CHANNEL PAIN SIGNAL INHIBITORS		
JOURNAVX TAB 50MG	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 81 tab 81mg ec</i>	0	OTC; ACA, PV
<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 ec tab 81mg</i>	0	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<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 regi tab 81mg</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
<i>ft aspirin chw 81mg</i>	0	OTC; ACA, PV
<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</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>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>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

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	

Drug Name	Drug Tier	Requirements/Limits
DEMEROL INJ 50MG/ML	3	
DEMEROL INJ 75MG/ML	3	
DEMEROL INJ 100MG/ML	3	
DILAUDID INJ 0.2MG/ML	3	
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	
DURAMORPH INJ 0.5MG/ML	3	
DURAMORPH INJ 1MG/ML	3	
FENTANYL CIT INJ 50MCG/ML	3	
FENTANYL CIT SOL 10MCG/ML	NC	
<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	
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>	1	ST, PA, QL
FENTANYL/NACL INJ 1000/50	3	
HYDRO/NACL INJ 20/100ML	3	
HYDRO/NACL INJ 25/25	3	
<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

Drug Name	Drug Tier	Requirements/Limits
<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 0.2 mg/ml</i>	1	
<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	
<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>	1	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	

Drug Name	Drug Tier	Requirements/Limits
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	
METHADO/NACL INJ 5MG/5ML	3	
METHADO/NACL INJ 10MG/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	ST, PA, QL
METHADONE INJ 10MG/ML	3	ST, PA, QL
METHADOSE CON 10MG/ML	3	ST, PA, QL
METHADOSE SF CON 10MG/ML	3	ST, PA, QL
<i>methadose tab 40mg</i>	1	ST, 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	
MORPHABOND TAB 60MG ER	NC	
MORPHABOND TAB 100MG ER	NC	
MORPHIN/NACL INJ 1MG/ML	3	
MORPHIN/NACL INJ 2MG-0.9%	NC	
MORPHIN/NACL INJ 4MG-0.9%	NC	
MORPHIN/NACL 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	

Drug Name	Drug Tier	Requirements/Limits
MORPHINE SUL INJ 50MG/ML	3	
MORPHINE SUL INJ 250/50ML	3	
MORPHINE SUL INJ NACL	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>	1	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 60 mg</i>	1	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>	1	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>	2	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
<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
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	

Drug Name	Drug Tier	Requirements/Limits
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
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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	PA
<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>	1	ST, PA, QL
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>	1	QL
<i>ascomp/cod cap 30mg</i>	1	QL

Drug Name	Drug Tier	Requirements/Limits
<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>	1	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 NACL	NC	
FENTANYL CIT INJ BUPIVACA	NC	
FIORICET CAP CODEINE	3	PA, QL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i>	1	PA, QL
<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
<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>	1	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
NALOCET TAB 2.5-300	NC	
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	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	PA, QL
<i>trezix cap</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
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	3	PV
BRIXADI SOL 16/0.32	3	PV
BRIXADI SOL 24/0.48	3	PV
BRIXADI SOL 32/0.64	3	PV
BRIXADI SOL 64/0.18	3	PV
BRIXADI SOL 96/0.27	3	PV
BRIXADI SOL 128/0.36	3	PV
<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
<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>	1	PV
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	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>	1	ST, PA, QL
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	ST, PA, QL
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	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	

Drug Name	Drug Tier	Requirements/Limits
<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

ANDROGENS

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>	1	PA
<i>depo-testost inj 200mg/ml</i>	1	PA
FORTESTA GEL 10MG/ACT	NC	
JATENZO CAP 158MG	NC	
JATENZO CAP 198MG	NC	
JATENZO CAP 237MG	NC	
KYZATREX CAP 100MG	NC	
KYZATREX CAP 150MG	NC	
KYZATREX CAP 200MG	NC	
<i>methitest tab 10mg</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
TESTOSTERONE MIS 50MG	3	PA
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>	1	PA
<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 50/0.5ML	NC	
XYOSTED INJ 75/0.5ML	NC	
XYOSTED INJ 100/0.5	NC	

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>hydrocortisone perianal cream 1%</i>	1
<i>hydrocortisone perianal cream 2.5%</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>procto-med cre hc 2.5%</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		
ANTHELMINTICS		
<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>ivermectin tab 6 mg</i>	1	
<i>praziquantel tab 600 mg</i>	2	QL
STROMECTOL TAB 3MG	3	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
FIRST-METRON SUS 100MG/ML	NC	
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>	1	
<i>tinidazole tab 250 mg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim tab 400-80 mg	1	
sulfamethoxazole-trimethoprim tab 800-160 mg	1	
sulfatrim pd sus 200-40/5	1	
XACDURO INJ 1-1GM	3	
ANTIPROTOZOAL AGENTS		
atovaquone susp 750 mg/5ml	2	
LAMPIT TAB 30MG	3	
LAMPIT TAB 120MG	3	
MEPRON SUS	3	
nitazoxanide tab 500 mg	2	
CARBAPENEMS		
ertapenem sodium for inj 1 gm (base equivalent)	2	
imipenem-cilastatin intravenous for soln 250 mg	1	
imipenem-cilastatin intravenous for soln 500 mg	2	
meropenem iv for soln 1 gm	2	
meropenem iv for soln 500 mg	1	
PRIMAXIN IV INJ 500MG	3	
RECARBRIO INJ 1.25GM	3	
VABOMERE INJ 2GM(1-1)	3	
CHLORAMPHENICOLS		
chloramphenicol sodium succinate for iv inj 1 gm	1	
CYCLIC LIPOPEPTIDES		
daptomycin for iv soln 350 mg	2	
daptomycin for iv soln 500 mg	2	
DAPTOMYCIN INJ 350MG	3	
DAPTOMYCIN INJ 500MG	3	
GLYCOPEPTIDES		
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	

Drug Name	Drug Tier	Requirements/Limits
VANCOMY/NACL INJ 1.5/250	3	
VANCOMY/NACL INJ 1.5/500	3	
VANCOMY/NACL INJ 1.5GM	3	
VANCOMY/NACL INJ 1.25/250	3	
VANCOMY/NACL INJ 1.75/250	3	
VANCOMY/NACL INJ 1.75/500	3	
VANCOMY/NACL INJ 1/250ML	3	
VANCOMY/NACL INJ 1G/250ML	3	
VANCOMY/NACL INJ 2/500ML	3	
VANCOMY/NACL 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>	1	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	1	
<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>	1	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 1.5/300	3	
VANCOMYCIN INJ 1.5GM	3	
VANCOMYCIN INJ 1.25/250	3	
VANCOMYCIN INJ 1.25GM	3	

Drug Name	Drug Tier	Requirements/Limits
VANCOMYCIN INJ 1.75GM	3	
VANCOMYCIN INJ 1GM/200M	3	
VANCOMYCIN INJ 2GM	3	
VANCOMYCIN INJ 5GM	3	
VANCOMYCIN INJ 10GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750/250	3	
VANCOMYCIN INJ 750MG	3	
VANCOMYCIN SOL 1.75GM	3	
VANCOMYCIN SOL 2G/400ML	3	
VIBATIV INJ 750MG	3	
LEPROSTATICS		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
LINCOSAMIDES		
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>	1	
<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 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	
MONOBACTAMS		
AZACTAM INJ 1GM	3	
AZACTAM INJ 2GM	3	

Drug Name	Drug Tier	Requirements/Limits
aztreonam for inj 1 gm	1	
aztreonam for inj 2 gm	1	
CAYSTON INH 75MG	NC	
OXAZOLIDINONES		
linezolid for susp 100 mg/5ml	2	
linezolid iv soln 600 mg/300ml (2 mg/ml)	1	
linezolid tab 600 mg	1	
SIVEXTRO INJ 200MG	3	PA
SIVEXTRO TAB 200MG	3	PA
ZYVOX SOL 2MG/ML	3	
ZYVOX SUS 100MG/5M	3	
ZYVOX TAB 600MG	3	
POLYMYXINS		
colistimethate sod for inj 150 mg (colistin base activity)	2	
COLY-MYCIN M INJ 150MG	3	
polymyxin b sulfate for inj 500000 unit	1	
URINARY ANTI-INFECTIVES		
fosfomycin tromethamine powd pack 3 gm (base equivalent)	2	
HIPREX TAB 1GM	3	
MACROBID CAP 100MG	3	
MACRODANTIN CAP 25MG	NC	
MACRODANTIN CAP 50MG	NC	
MACRODANTIN CAP 100MG	NC	
methenamine hippurate tab 1 gm	1	
methenamine mandelate tab 0.5 gm	1	
methenamine mandelate tab 1 gm	1	
nitrofurantoin macrocrystalline cap 25 mg	1	
nitrofurantoin macrocrystalline cap 50 mg	1	
nitrofurantoin macrocrystalline cap 100 mg	1	
nitrofurantoin monohydrate macrocrystalline cap 100 mg	1	
nitrofurantoin susp 25 mg/5ml	2	(NDC 16571074024 and 70954049610 are excluded)
nitrofurantoin susp 25 mg/5ml	NC	(applies to NDC 16571074024 and 70954049610 only)
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
ranolazine tab er 12hr 500 mg	1	
ranolazine tab er 12hr 1000 mg	1	

Drug Name	Drug Tier	Requirements/Limits
NITRATES		
GONITRO POW 400MCG	NC	
ISORDIL TAB 5MG	3	PV
ISORDIL TAB 40MG	3	PV
ISOSORB MONO TAB 10MG	3	PV
ISOSORB MONO TAB 20MG	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	
<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>	1	
NITROLINGUAL SPR 400MCG	3	
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone 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 im soln 50 mg/ml</i>	3	
<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	
<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	

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	

Drug Name	Drug Tier	Requirements/Limits
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>diazepam con 5mg/ml</i>	2	
<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	
<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	
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	

Drug Name	Drug Tier	Requirements/Limits
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	
<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>	1	
<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>	1	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	

Drug Name	Drug Tier	Requirements/Limits
MULTAQ TAB 400MG	2	
NEXTERONE INJ	NC	
<i>pacerone tab 100mg</i>	1	PV
<i>pacerone tab 200mg</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

ANTI-INFLAMMATORY AGENTS

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	PV

ANTIASTHMATIC - MONOCLONAL ANTIBODIES

CINQAIR INJ	NC	
FASENRA INJ 10MG/0.5	5	SP, PA, QL; PV
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

BRONCHODILATORS - ANTICHOLINERGICS

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 HANDHLR	1	
SPIRIVA SPR 2.5MCG	2	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	NC	
TUDORZA PRES AER 400/ACT	NC	
YUPELRI SOL	2	

LEUKOTRIENE MODULATORS

ACCOLATE TAB 10MG	3	PV
ACCOLATE TAB 20MG	3	PV
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 50MCG	2	QL
ASMANEX HFA AER 100 MCG	2	QL
ASMANEX HFA AER 200 MCG	2	QL
<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 diskus inhal aer 50 mcg</i>	1	QL; PV

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate diskus inhal aer 100 mcg</i>	1	QL; PV
<i>fluticasone propionate diskus inhal aer 250 mcg</i>	1	QL; PV
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	1	QL; PV
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	1	QL; PV
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	1	QL; PV
PULMICORT INH 90MCG	2	QL; PV
PULMICORT INH 180MCG	2	QL; PV
PULMICORT SUS 0.5MG/2	3	PA, QL; PV
PULMICORT SUS 0.25MG/2	3	PA, QL; PV
PULMICORT SUS 1MG/2ML	3	PA, QL; PV
QVAR REDHA AER 80MCG	NC	
QVAR REDHAL AER 40MCG	NC	

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
<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>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
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

Drug Name	Drug Tier	Requirements/Limits
BREO ELLIPTA INH 200-25	2	QL; PV
<i>brey-na aer 80/4.5</i>	1	QL; PV
<i>brey-na aer 160/4.5</i>	1	QL; PV
BREZTRI AERO AER SPHERE	2	QL
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	NC	
DULERA AER 100-5MCG	NC	
DULERA AER 200-5MCG	NC	
<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 NDCs 66993-xxxx-xx are NC)
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	2	QL; PV; (except NDCs 66993-xxxx-xx are is NC)
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	2	QL; PV; (except NDCs 66993-xxxx-xx are 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>	1	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	

Drug Name	Drug Tier	Requirements/Limits
PROVENTIL AER HFA	NC	
SEREVENT DIS AER 50MCG	2	QL
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>	1	
TRELEGY AER 100MCG	2	QL; PV
TRELEGY AER 200MCG	2	QL; PV
<i>umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act</i>	1	QL
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 HFA AER	NC	

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	

Drug Name	Drug Tier	Requirements/Limits
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

DIRECT FACTOR XA INHIBITORS

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
<i>rivaroxaban tab 2.5 mg</i>	2	
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

HEPARINS AND HEPARINOID-LIKE AGENTS

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>	1	PV
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<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	3	PV
FRAGMIN INJ 2500/ML	3	PV
FRAGMIN INJ 5000/0.2	3	PV
FRAGMIN INJ 7500/0.3	3	PV
FRAGMIN INJ 10000/ML	3	PV
FRAGMIN INJ 12500UNT	3	PV
FRAGMIN INJ 15000UNT	3	PV
FRAGMIN INJ 18000UNT	3	PV
FRAGMIN INJ 95000UNT	3	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/NACL INJ 12500UNT	3	
HEP SOD/NACL 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	

Drug Name	Drug Tier	Requirements/Limits
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	2	
<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	
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i>	1	
BIVALIR/NACL INJ 250/50	NC	
BIVALIR/NACL 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>	1	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>	1	PV
PRADAXA CAP 75MG	NC	
PRADAXA CAP 110MG	NC	
PRADAXA CAP 150MG	NC	

ANTICONSULSANTS

AMPA GLUTAMATE RECEPTOR ANTAGONISTS

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

Drug Name	Drug Tier	Requirements/Limits
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

ANTICONSULSANTS - 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	2	
LIBERVANT MIS 7.5MG	2	
LIBERVANT MIS 10MG	2	
LIBERVANT MIS 12.5MG	2	
LIBERVANT MIS 15MG	2	
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	

ANTICONSULSANTS - MISC.

APTIOU TAB 200MG	3	PV
APTIOU TAB 400MG	3	PV
APTIOU TAB 600MG	3	PV
APTIOU TAB 800MG	3	PV
BANZEL SUS 40MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
BANZEL TAB 200MG	NC	
BANZEL TAB 400MG	NC	
BRIVIACT INJ 50MG/5ML	2	PV
BRIVIACT SOL 10MG/ML	2	PV
BRIVIACT TAB 10MG	2	PV
BRIVIACT TAB 25MG	2	PV
BRIVIACT TAB 50MG	2	PV
BRIVIACT TAB 75MG	2	PV
BRIVIACT TAB 100MG	2	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	SP
DIACOMIT CAP 500MG	NC	SP
DIACOMIT PAK 250MG	NC	SP
DIACOMIT PAK 500MG	NC	SP
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
<i>eslicarbazepine acetate tab 200 mg</i>	1	
<i>eslicarbazepine acetate tab 400 mg</i>	1	
<i>eslicarbazepine acetate tab 600 mg</i>	1	
<i>eslicarbazepine acetate tab 800 mg</i>	1	
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	
GABARONE TAB 100MG	NC	
GABARONE TAB 400MG	NC	
KEPPRA INJ 500/5ML	NC	

Drug Name	Drug Tier	Requirements/Limits
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	
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>	1	PV
<i>lacosamide tab 100 mg</i>	1	PV
<i>lacosamide tab 150 mg</i>	1	PV
<i>lacosamide tab 200 mg</i>	1	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	
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 50 mg</i>	1	PV
<i>lamotrigine orally disintegrating tab 100 mg</i>	1	PV
<i>lamotrigine orally disintegrating tab 200 mg</i>	1	PV
<i>lamotrigine tab 25 mg</i>	1	PV
<i>lamotrigine tab 25 mg (42) & 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 & 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

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	2	PV
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	2	PV
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration 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>	1	PV
<i>lamotrigine tab er 24hr 50 mg</i>	NC	(applies to NDC 31722024130 only)
<i>lamotrigine tab er 24hr 100 mg</i>	1	PV
<i>lamotrigine tab er 24hr 100 mg</i>	NC	(applies to NDC 31722024230 only)
<i>lamotrigine tab er 24hr 200 mg</i>	1	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>	1	PV
<i>lamotrigine tab er 24hr 300 mg</i>	NC	(applies to NDC 31722024530 only)
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>	1	PV
LYRICA CAP 25MG	NC	
LYRICA CAP 50MG	NC	

Drug Name	Drug Tier	Requirements/Limits
LYRICA CAP 75MG	NC	
LYRICA CAP 100MG	NC	
LYRICA CAP 150MG	NC	
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>	2	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
<i>oxcarbazepine tab er 24hr 150 mg</i>	2	PV
<i>oxcarbazepine tab er 24hr 300 mg</i>	2	PV
<i>oxcarbazepine tab er 24hr 600 mg</i>	2	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
<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

Drug Name	Drug Tier	Requirements/Limits
<i>subvenite kit start 35</i>	2	PV
<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 sprinkle cap 50 mg</i>	2	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 300/5ML	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	

Drug Name	Drug Tier	Requirements/Limits
VIMPAT SOL 10MG/ML	NC	
VIMPAT TAB 50MG	NC	
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 25MG	2	PV
XCOPRI TAB 50MG	2	PV
XCOPRI TAB 100MG	2	PV
XCOPRI TAB 150MG	2	PV
XCOPRI TAB 200MG	2	PV

GABA MODULATORS

SABRIL POW 500MG	NC	SP
SABRIL TAB 500MG	NC	SP
<i>tiagabine hcl tab 2 mg</i>	2	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
VIGAFYDE SOL 100MG/ML	NC	SP
<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	

Drug Name	Drug Tier	Requirements/Limits
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

Drug Name	Drug Tier	Requirements/Limits
<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	
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	6	SP, PA
ZURZUVAE CAP 25MG	6	SP, PA
ZURZUVAE CAP 30MG	6	SP, PA
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

Drug Name	Drug Tier	Requirements/Limits
<i>phenelzine sulfate tab 15 mg</i>	1	PV
<i>tranylcypromine sulfate tab 10 mg</i>	2	PV
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO SOL 56MG DOS	3	PA
SPRAVATO SOL 84MG DOS	3	PA
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
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
<i>fluoxetine hcl tab 60 mg</i>	NC	
FLUOXETINE TAB 60MG	NC	
<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

Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl tab 40 mg</i>	1	PV
<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	
SEROTONIN MODULATORS		
<i>nefazodone hcl tab 50 mg</i>	1	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>	1	PV
RALDESY SOL 10MG/ML	NC	
<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

Drug Name	Drug Tier	Requirements/Limits
TRINTELLIX TAB 20MG	2	PV
VIIBRYD KIT STARTER	NC	
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	PV
<i>vilazodone hcl tab 40 mg</i>	1	PV

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

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	

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	PV
<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

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl conc 10 mg/ml</i>	1	PV
<i>imipramine hcl tab 10 mg</i>	1	PV
<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>	2	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>	1	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>	1	PV
<i>miglitol tab 100 mg</i>	1	PV

ANTIDIABETIC - AMYLIN ANALOGS

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

ANTIDIABETIC COMBINATIONS

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	
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<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	
OSENI TAB 12.5-45	NC	
OSENI TAB 25-15MG	NC	

Drug Name	Drug Tier	Requirements/Limits
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>	1	PV
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	PV
QTERN TAB 5-5MG	NC	
QTERN TAB 10-5MG	NC	
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	2	
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	2	
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	2	
SEGLUROMET TAB 2.5-500	NC	
SEGLUROMET TAB 2.5-1000	NC	
SEGLUROMET TAB 7.5-500	NC	
SEGLUROMET TAB 7.5-1000	NC	
SITAG/METFOR TAB 50-500MG	NC	
SITAG/METFOR TAB 50-1000	NC	
SITAG/METFOR TAB 100-1000	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
ZITUVIMET TAB 50-500MG	2	PV
ZITUVIMET TAB 50-1000	2	PV
ZITUVIMET XR TAB 50-500MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
ZITUVIMET XR TAB 50-1000	2	PV
ZITUVIMET XR TAB 100-1000	2	PV
BIGUANIDES		
FORTAMET TAB 500MG	NC	
FORTAMET TAB 1000MG	NC	
GLUMETZA TAB 500MG	NC	
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	
DIABETIC OTHER		
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 0.5/.1ML	2	
GVOKE HYPO 1 INJ 1/0.2ML	2	
GVOKE HYPO 2 INJ 0.5/.1ML	2	
GVOKE HYPO 2 INJ 1/0.2ML	2	
GVOKE KIT SOL 1/0.2ML	2	
GVOKE PFS INJ 1/0.2ML	2	
KORLYM TAB 300MG	NC	
<i>mifepristone tab 300 mg</i>	4	PA
PROGLYCEM SUS 50MG/ML	3	
ZEGALOGUE INJ 0.6/0.6	2	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
<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	

Drug Name	Drug Tier	Requirements/Limits
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	
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	2	PV
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	1	PV
SITAGLIPTIN TAB 25MG	NC	
SITAGLIPTIN TAB 50MG	NC	
SITAGLIPTIN TAB 100MG	NC	
TRADJENTA TAB 5MG	NC	
ZITUVIO TAB 25MG	2	PV
ZITUVIO TAB 50MG	2	PV
ZITUVIO TAB 100MG	2	PV

DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC

CYCLOSET TAB 0.8MG	3	

INCRETIN MIMETIC AGENTS

ADLYXIN INJ 10/20MCG	NC	
ADLYXIN INJ 20MCG	NC	
BYDUREON PEN INJ 2MG	NC	
BYETTA INJ 5MCG	NC	
BYETTA INJ 10MCG	NC	
<i>exenatide soln pen-injector 10 mcg/0.04ml</i>	1	PA, QL; PV
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	1	PA, QL; PV
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 2MG/3ML	2	PA, QL; PV
OZEMPIC INJ 4MG/3ML	2	PA, QL; PV
OZEMPIC INJ 8MG/3ML	2	PA, QL; PV
RYBELSUS TAB 1.5MG	2	PA, QL; PV
RYBELSUS TAB 3MG	2	PA, QL; PV
RYBELSUS TAB 4MG	2	PA, QL; PV
RYBELSUS TAB 7MG	2	PA, QL; PV
RYBELSUS TAB 9MG	2	PA, QL; PV
RYBELSUS TAB 14MG	2	PA, QL; PV

Drug Name	Drug Tier	Requirements/Limits
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	NC	

INSULIN

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	0	\$0 Copay per 30-day supply
GLARGIN YFGN SOL 100U/ML	0	\$0 Copay per 30-day supply
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	

Drug Name	Drug Tier	Requirements/Limits
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
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 100OUT/ML	NC	
SEMGLEE INJ 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

Drug Name	Drug Tier	Requirements/Limits
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	
<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		
<i>glimepiride tab 1 mg</i>	1	PV
<i>glimepiride tab 2 mg</i>	1	PV
<i>glimepiride tab 3 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
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

Drug Name	Drug Tier	Requirements/Limits
<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	

ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.

<i>lactojen cap</i>	NC	

ANTIDIARRHEAL/PROBIOTIC COMBINATIONS

RESTORA RX CAP 60-1.25	3	

ANTIPERISTALTIC AGENTS

<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	1	
<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	

ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES - CHELATING AGENTS

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	SP
EXJADE TAB 250MG	NC	SP
EXJADE TAB 500MG	NC	SP
FERPRX 2-DAY TAB 1000MG	NC	
FERRIPROX SOL 100MG/ML	NC	SP
FERRIPROX TAB 500MG	NC	SP
FERRIPROX TAB 1000MG	NC	SP
JADENU SPRKL GRA 90MG	NC	SP
JADENU SPRKL GRA 180MG	NC	SP
JADENU SPRKL GRA 360MG	NC	SP
JADENU TAB 90MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
JADENU TAB 180MG	NC	SP
JADENU TAB 360MG	NC	SP
PENTETATE CA SOL 200MG/ML	3	
PENTETATE ZI SOL 200MG/ML	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ACETADOTE INJ 200MG/ML	3	
<i>acetylcysteine inj 200 mg/ml</i>	1	
ANDEXXA SOL 200MG	3	
BRIDION INJ 200/2ML	NC	
BRIDION INJ 500/5ML	NC	
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
DESFERAL 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	
<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 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

Drug Name	Drug Tier	Requirements/Limits
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
<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>	1	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>	1	PA, QL
PALONOSETRON INJ 0.25/2ML	3	PA, QL
POSFREA INJ 0.25/5ML	3	
SANCUSO DIS 3.1MG	2	PA, QL
SUSTOL INJ 10/0.4ML	NC	
ANTIEMETICS - ANTICHOLINERGIC		
DIMENHYDRIN INJ 50MG/ML	3	
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>meclizine hcl tab 50 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	
ANTIEMETICS - ANTIDOPAMINERGIC		
BARHEMSYS INJ 10MG/4ML	NC	
ANTIEMETICS - MISCELLANEOUS		
AKYNZEO CAP 300-0.5	3	PA, QL
AKYNZEO INJ	3	PA, QL
AKYNZEO INJ 235-0.25	3	PA, 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

Drug Name	Drug Tier	Requirements/Limits
dronabinol cap 10 mg	2	PA, QL
MARINOL CAP 2.5MG	3	PA, QL
SYNDROS SOL 5MG/ML	NC	

SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS

APONVIE INJ 32/4.4ML	NC	
aprepitant capsule 40 mg	2	PA, QL
aprepitant capsule 80 mg	2	PA, QL
aprepitant capsule 125 mg	1	PA, QL
aprepitant capsule therapy pack 80 & 125 mg	2	PA, QL
EMEND BIPACK PAK 80MG	3	PA, QL
EMEND SOL 150MG	3	PA, QL
EMEND SUS 125MG	3	PA, QL
EMEND TRIPAC PAK 125 & 80	3	PA, QL
fosaprepitant dimeglumine for iv infusion 150 mg (base eq)	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	
caspofungin acetate for iv soln 50 mg	1	
caspofungin acetate for iv soln 70 mg	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 sodium for iv soln 50 mg	1	
micafungin sodium for iv soln 100 mg	2	
MYCAMINE INJ 100MG	3	
REZZAYO INJ 200MG	3	

ANTIFUNGALS

ABELCET INJ 5MG/ML	3	
AMBISOME INJ 50MG	3	
amphotericin b for iv soln 50 mg	2	
amphotericin b liposome iv for susp 50 mg	1	
ANCOBON CAP 250MG	3	
ANCOBON CAP 500MG	3	
flucytosine cap 250 mg	2	
flucytosine cap 500 mg	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	2	
<i>griseofulvin ultramicrosize tab 165 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	

IMIDAZOLE-RELATED ANTIFUNGALS

CRESEMBA CAP 186MG	NC	
CRESEMBA INJ 372MG	3	
DIFLUCAN SUS 40MG/ML	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 iv soln 300 mg/16.7ml (18 mg/ml)</i>	1	QL
<i>posaconazole susp 40 mg/ml</i>	2	QL
<i>posaconazole tab delayed release 100 mg</i>	NC	
SPORANOX CAP 100MG	3	
SPORANOX SOL 10MG/ML	3	
VFEND IV INJ 200MG	3	PA
VFEND SUS 40MG/ML	3	PA
VFEND TAB 50MG	3	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>	2	PA

ANTI-HISTAMINES

Drug Name	Drug Tier	Requirements/Limits
ANTI-HISTAMINES - ALKYLAMINES		
dexchlorpheniramine maleate oral soln 2 mg/5ml	NC	
ryclora sol 2mg/5ml	NC	
ANTI-HISTAMINES - ETHANOLAMINES		
CARBINOXAMIN TAB 6MG	NC	
carbinoxamine maleate extended release susp 4 mg/5ml	2	
carbinoxamine maleate soln 4 mg/5ml	2	
carbinoxamine maleate tab 4 mg	1	
clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	1	
clemastine fumarate tab 2.68 mg	1	
clemasz tab 2.68mg	1	
diphen elx 12.5/5ml	NC	
diphenhydramine hcl elixir 12.5 mg/5ml	1	
diphenhydramine hcl inj 50 mg/ml	1	
KARBINAL ER SUS 4MG/5ML	3	
RYVENT TAB 6MG	NC	
ANTI-HISTAMINES - NON-SEDATING		
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	1	
CLARINEX TAB 5MG	3	
desloratadine tab 5 mg	1	
desloratadine tab orally disintegrating 2.5 mg	1	
desloratadine tab orally disintegrating 5 mg	1	
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	1	
levocetirizine dihydrochloride tab 5 mg	1	
ANTI-HISTAMINES - PHENOTHIAZINES		
PHENERGAN INJ 25MG/ML	3	
PHENERGAN INJ 50MG/ML	3	
promethazine hcl inj 25 mg/ml	1	
promethazine hcl inj 50 mg/ml	1	
promethazine hcl oral soln 6.25 mg/5ml	1	
promethazine hcl suppos 12.5 mg	2	
promethazine hcl suppos 25 mg	2	
promethazine hcl tab 12.5 mg	1	
promethazine hcl tab 25 mg	1	
promethazine hcl tab 50 mg	1	
promethegan sup 12.5mg	2	
promethegan sup 25mg	2	
promethegan sup 50mg	2	

Drug Name	Drug Tier	Requirements/Limits
ANTI-HISTAMINES - PIPERIDINES		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL TAB 180MG	2	ST, PA
ANGIOPOIETIN-LIKE PROTEIN INHIBITORS		
EVKEEZA INJ 345/2.3	6	SP, PA, QL
EVKEEZA INJ 1200/8	6	SP, PA, QL
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<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
ANTIHYPERLIPIDEMICS - MISC.		
<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
BILE ACID SEQUESTRANTS		
<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>	1	PV
COLESTID GRA 5GM	3	PV
COLESTID TAB 1GM	3	PV
<i>colestipol hcl granule packets 5 gm</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<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
WELCHOL PAK 3.75GM	3	PV
WELCHOL TAB 625MG	3	PV

FIBRIC ACID DERIVATIVES

<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 120MG	NC	
<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	

HMG COA REDUCTASE INHIBITORS

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	

Drug Name	Drug Tier	Requirements/Limits
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

Drug Name	Drug Tier	Requirements/Limits
<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	

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
ALTACE CAP 2.5MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
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 soln 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
<i>ramipril cap 5 mg</i>	1	PV
<i>ramipril cap 10 mg</i>	1	PV
<i>trandolapril tab 1 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<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

AGENTS FOR PHEOCHROMOCYTOMA

DEMSEER CAP 250MG	3	PA
DIBENZYLINE CAP 10MG	3	
<i>metyrosine cap 250 mg</i>	1	PA
<i>phenoxybenzamine hcl cap 10 mg</i>	2	
<i>phentolamine mesylate for inj 5 mg</i>	1	

ANGIOTENSIN II RECEPTOR ANTAGONISTS

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	
DIOVAN TAB 320MG	NC	
EDARBI TAB 40MG	NC	
EDARBI TAB 80MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<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 tab er 24hr 0.17 mg</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	
<i>guanfacine hcl tab 1 mg</i>	1	PV
<i>guanfacine hcl tab 2 mg</i>	1	PV
NEXICLON XR TAB 0.17MG	NC	
<i>prazosin hcl cap 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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
<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	PV
<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	

Drug Name	Drug Tier	Requirements/Limits
ATACAND HCT TAB 32-12.5	NC	
ATACAND HCT TAB 32-25MG	NC	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	PV
<i>atenolol & 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 & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>benazepril & 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 & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>bisoprolol & 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
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 50-25 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	
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	

Drug Name	Drug Tier	Requirements/Limits
EDARBYCLOR TAB 40-25MG	NC	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	PV
<i>enalapril maleate & 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 & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>fosinopril sodium & 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 & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	PV
<i>losartan potassium & 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
LOTREL CAP 10-40MG	3	PV
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol & 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
<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
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1	PV
TRIBENZOR20- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-25MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
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.

VECAMEYL TAB 2.5MG	3	PV

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
TEKTURN TAB 150MG	3	PV
TEKTURN TAB 300MG	3	PV

SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)

<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
INSPIRA TAB 25MG	3	
INSPIRA 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
NIPRIIDE RTU INJ 20/100ML	NC	
NIPRIIDE 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
<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

Drug Name	Drug Tier	Requirements/Limits
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>	1	PV
DARAPRIM TAB 25MG	NC	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
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	
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	

Drug Name	Drug Tier	Requirements/Limits
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
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	
TRECATOR TAB 250MG	3	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

BELRAPZO SOL 100/4ML	NC	SP
<i>bendamustine hcl for iv soln 25 mg</i>	4	SP, PA
<i>bendamustine hcl for iv soln 100 mg</i>	4	SP, PA
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/2ML	3	
CYCLOPHOSPH INJ 2GM/4ML	3	
CYCLOPHOSPH INJ 500/5ML	3	
CYCLOPHOSPH INJ 500MG/ML	3	
CYCLOPHOSPH INJ 1000MG	3	
CYCLOPHOSPH INJ 2000MG	3	
CYCLOPHOSPH TAB 25MG	3	
CYCLOPHOSPH TAB 50MG	3	
CYCLOPHOSPHA INJ 2GM/10ML	3	
<i>cyclophosphamide cap 25 mg</i>	2	
<i>cyclophosphamide cap 50 mg</i>	2	
<i>cyclophosphamide for inj 1 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cyclophosphamide for inj 2 gm</i>	1	
<i>cyclophosphamide for inj 500 mg</i>	1	
EVOMELA INJ 50MG	NC	SP
FRINDOVYX INJ 1GM/2ML	3	
FRINDOVYX INJ 2GM/4ML	3	
FRINDOVYX INJ 500MG/ML	3	
GLEOSTINE CAP 10MG	5	SP
GLEOSTINE CAP 40MG	5	SP
GLEOSTINE CAP 100MG	5	SP
GLIADEL WAF 7.7MG	3	
GRAFAPEX INJ 1GM	NC	SP
GRAFAPEX INJ 5GM	NC	SP
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	
IVRA INJ 90MG/ML	NC	
LEUKERAN TAB 2MG	3	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	1	
MYLERAN TAB 2MG	3	
<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 1000mg</i>	1	
PEPAXTO INJ 20MG	NC	
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
<i>temozolomide cap 180 mg</i>	4	SP, PA
<i>temozolomide cap 250 mg</i>	4	SP, PA
TEPADINA INJ 15MG	5	SP, PA
TEPADINA INJ 100MG	5	SP, PA
TEPYLUTE INJ 15/1.5ML	NC	SP
TEPYLUTE INJ 100/10ML	NC	SP
<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

Drug Name	Drug Tier	Requirements/Limits
TREANDA INJ 100MG	6	SP, PA
VIVIMUSTA INJ 100/4ML	NC	SP
YONDELIS INJ 1MG	6	SP
ANTIMETABOLITES		
ALIMTA INJ 100MG	NC	SP
ALIMTA INJ 500MG	NC	SP
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	
<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, QL
<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)</i> <i>(base equiv)</i>	1	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml)</i> <i>(base equiv)</i>	1	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml)</i> <i>(base equiv)</i>	1	
GEMCITABINE INJ 1.5GM/15	3	
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	SP
INFUGEM SOL 1300MG	NC	SP
INFUGEM SOL 1400MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
INFUGEM SOL 1500MG	NC	SP
INFUGEM SOL 1600MG	NC	SP
INFUGEM SOL 1700MG	NC	SP
INFUGEM SOL 1800MG	NC	SP
INFUGEM SOL 2000MG	NC	SP
INFUGEM SOL 2200MG	NC	SP
JYLAMVO SOL 2MG/ML	3	
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	4	SP, PA
<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 INJ 850/34ML	NC	
PEMETREXED SOL 1GM/40ML	NC	
PEMETREXED SOL 100/4ML	NC	
PEMETREXED SOL 500/20ML	NC	
PEMFEXY SOL 500/20ML	NC	
PURIXAN SUS 20MG/ML	6	SP, PA
TABLOID TAB 40MG	3	
TREXALL TAB 5MG	2	
TREXALL TAB 7.5MG	2	
TREXALL TAB 10MG	2	
TREXALL TAB 15MG	2	

Drug Name	Drug Tier	Requirements/Limits
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	SP
ALYMSYS SOL 400/16ML	NC	SP
AVASTIN INJ	NC	SP
AVASTIN INJ 400/16ML	NC	SP
CYRAMZA INJ 100/10ML	6	SP, PA
CYRAMZA INJ 500/50ML	6	SP, PA
FRUZAQLA CAP 1MG	NC	SP
FRUZAQLA CAP 5MG	NC	SP
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	SP
MVASI INJ 400MG	NC	SP
VEGZELMA SOL 100/4ML	NC	SP
VEGZELMA SOL 400/16ML	NC	SP
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	SP
HERZUMA INJ 150MG	NC	SP
HERZUMA INJ 420MG	NC	SP
KANJINTI INJ 420MG	5	SP, PA
KANJINTI SOL 150MG	5	SP, PA
OGIVRI INJ 150MG	5	SP, PA
OGIVRI INJ 420MG	5	SP, PA
ONTRUZANT INJ 150MG	NC	SP
ONTRUZANT INJ 420MG	NC	SP
PERJETA INJ 420/14ML	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
TRAZIMERA INJ 150MG	5	SP, PA
TRAZIMERA INJ 420MG	5	SP, PA
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
BIZENGRI INJ 750 DOSE	NC	SP
BLINCYTO INJ 35MCG	6	SP, PA
COLUMVI INJ 2.5MG	NC	SP
COLUMVI INJ 10/10ML	NC	SP
DARZALEX SOL 100/5ML	6	SP, PA
DARZALEX SOL 400/20ML	6	SP, PA
ELAHERE INJ 5MG/ML	6	SP, PA
ELREXFIO INJ 44/1.1ML	NC	SP
ELREXFIO INJ 76/1.9ML	NC	SP
EMPLICITI INJ 300MG	6	SP, PA
EMPLICITI INJ 400MG	6	SP, PA
EMRELIS INJ 20MG	NC	SP
EMRELIS INJ 100MG	NC	SP
ENHERTU INJ 100MG	6	SP, PA
GAZYVA INJ 25MG/ML	6	SP, PA
IMDELLTRA INJ 1MG	6	SP, PA
IMDELLTRA INJ 10MG	6	SP, PA
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	SP
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	SP
LUNSUMIO INJ 30MG/30	NC	SP
MONJUVI INJ 200MG	NC	SP
MYLOTARG INJ 4.5MG	6	SP, PA
OPDIVO INJ 40MG/4ML	6	SP, PA
OPDIVO INJ 100/10ML	6	SP, PA
OPDIVO INJ 120/12ML	6	SP, PA

Drug Name	Drug Tier	Requirements/Limits
OPDIVO INJ 240/24ML	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	SP
RITUXAN INJ 500MG	NC	SP
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	SP
TALVEY INJ 40MG/ML	NC	SP
TECENTRIQ INJ 840/14	6	SP, PA
TECENTRIQ INJ 1200/20	6	SP, PA
TEVIMBRA INJ 100/10ML	NC	SP
TIVDAK INJ 40MG	6	SP, PA, QL
TRUXIMA INJ 100/10ML	NC	SP
TRUXIMA INJ 500/50ML	NC	SP
UNITUXIN INJ	6	SP
YERVOY INJ 50/10ML	6	SP, PA
YERVOY INJ 200/40ML	6	SP, PA
ZEVALIN KIT Y-90	6	SP, PA
ZYNLONTA SOL 10MG	NC	SP
ANTINEOPLASTIC - BCL-2 INHIBITORS		
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
ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY		
AMTAGVI INJ	NC	
KYMRIAH SUS	NC	
PROVENGE INJ	NC	
YESCARTA INJ	NC	
ANTINEOPLASTIC - EGFR INHIBITORS		
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
<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
<i>gefitinib tab 250 mg</i>	4	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
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	SP
PORTRAZZA INJ 800/50ML	6	SP, PA
TAGRISSE TAB 40MG	5	SP, PA, QL
TAGRISSE TAB 80MG	5	SP, PA, QL
TARCEVA TAB 100MG	6	SP, ST, PA, QL
VECTIBIX INJ 100MG	6	SP, PA
VECTIBIX INJ 400MG	6	SP, PA
VIZIMPRO TAB 15MG	NC	SP
VIZIMPRO TAB 30MG	NC	SP
VIZIMPRO TAB 45MG	NC	SP

ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS

DAURISMO TAB 25MG	NC	SP
DAURISMO TAB 100MG	NC	SP
ERIVEDGE CAP 150MG	5	SP, PA, QL
ODOMZO CAP 200MG	5	SP, PA, QL

ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS

<i>abiraterone acetate tab 250 mg</i>	4	SP, PA, QL
<i>abiraterone acetate tab 500 mg</i>	4	SP, PA, QL
<i>abirtega tab 250mg</i>	4	SP, PA, QL
<i>anastrozole tab 1 mg</i>	0	ACA, PV
ARIMIDEX TAB 1MG	3	PV
AROMASIN TAB 25MG	3	PV
<i>bicalutamide tab 50 mg</i>	1	
CAMCEVI INJ 42MG	NC	SP
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
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
FIRMAGON INJ 80MG	NC	SP
FIRMAGON INJ 120MG	NC	SP
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	4	SP, PA
<i>letrozole tab 2.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<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	SP
LUPRON DEPOT INJ 11.25MG	6	SP, PA, QL
LUPRON DEPOT INJ 22.5MG	NC	SP
LUPRON DEPOT INJ 30MG	NC	SP
LUPRON DEPOT INJ 45MG	NC	SP
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	SP
<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	SP
ORSERDU TAB 345MG	NC	SP
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	SP
TRELSTAR MIX INJ 11.25MG	NC	SP
TRELSTAR MIX INJ 22.5MG	NC	SP
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	SP
ZOLADEX IMP 10.8MG	NC	SP
ZYTIGA TAB 250MG	NC	SP
ZYTIGA TAB 500MG	NC	SP
ANTINEOPLASTIC - IMMUNOMODULATORS		
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
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ TAB 25MG	NC	SP
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 40MG	6	SP, PA, QL
XPOVIO PAK 50MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
XPOVIO PAK 60MG	6	SP, PA, QL
XPOVIO PAK 80MG	6	SP, PA, QL
ANTINEOPLASTIC ANTIBIOTICS		
<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	
<i>daunorubicin hcl iv soln 50 mg/10ml (base equiv)</i>	1	
DAUNORUBICIN INJ 20MG/4ML	3	
DAUNORUBICIN INJ 50/10ML	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 susp (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	NC	
<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 40mg</i>	1	
<i>valrubicin soln for intravesical instillation 40 mg/ml</i>	4	SP
VALSTAR SOL 40MG/ML	6	SP
ANTINEOPLASTIC COMBINATIONS		
HERCEP HYLEC SOL 60-10000	NC	SP

Drug Name	Drug Tier	Requirements/Limits
INQOVI TAB 35-100MG	6	SP, PA, QL
LONSURF TAB 15-6.14	5	SP, PA, QL
LONSURF TAB 20-8.19	5	SP, PA, QL
OPDIVO INJ QVANTIG	NC	SP
OPDUALAG SOL	NC	SP
PHESGO SOL	5	SP, PA
RITUXAN INJ HYCELA	6	SP, PA
VYXEOS INJ 44-100MG	6	SP, PA

ANTINEOPLASTIC ENZYME INHIBITORS

AFINITOR DIS TAB 2MG	NC	SP
AFINITOR DIS TAB 3MG	NC	SP
AFINITOR DIS TAB 5MG	NC	SP
AFINITOR TAB 2.5MG	NC	SP
AFINITOR TAB 5MG	NC	SP
AFINITOR TAB 7.5MG	NC	SP
AFINITOR TAB 10MG	NC	SP
ALECENSA CAP 150MG	5	SP, PA, QL
ALIQOPA INJ 60MG	NC	SP
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
AUGTYRO CAP 160MG	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	NC	SP
BORTEZOMIB INJ 3.5MG	NC	SP
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
CABOMETYX TAB 60MG	5	SP, PA, QL
CALQUENCE TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 100MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
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	NC	SP
<i>dasatinib tab 20 mg</i>	4	SP, PA, QL
<i>dasatinib tab 50 mg</i>	4	SP, PA, QL
<i>dasatinib tab 70 mg</i>	4	SP, PA, QL
<i>dasatinib tab 80 mg</i>	4	SP, PA, QL
<i>dasatinib tab 100 mg</i>	4	SP, PA, QL
<i>dasatinib tab 140 mg</i>	4	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	SP
FARYDAK CAP 15MG	NC	SP
FARYDAK CAP 20MG	NC	SP
FOTIVDA CAP 0.89MG	NC	SP
FOTIVDA CAP 1.34MG	NC	SP
FYARRO SUS 100MG	6	SP, PA
GAVRETO CAP 100MG	5	SP, PA, QL
GLEEVEC TAB 100MG	NC	SP
GLEEVEC TAB 400MG	NC	SP
GOMEKLI CAP 1MG	6	SP, PA, QL
GOMEKLI CAP 2MG	6	SP, PA, QL
GOMEKLI TAB 1MG	6	SP, PA, QL
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	SP
ICLUSIG TAB 15MG	NC	SP
ICLUSIG TAB 30MG	NC	SP
ICLUSIG TAB 45MG	NC	SP
IDHIFA TAB 50MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
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, QL
IMBRUVICA CAP 70MG	NC	SP
IMBRUVICA CAP 140MG	NC	SP
IMBRUVICA SUS 70MG/ML	NC	SP
IMBRUVICA TAB 140MG	NC	SP
IMBRUVICA TAB 280MG	NC	SP
IMBRUVICA TAB 420MG	NC	SP
IMBRUVICA TAB 560MG	NC	SP
INREBIC CAP 100MG	NC	SP
ISTODAX INJ 10MG	6	SP, PA
ITOVEBI TAB 3MG	6	SP, PA, QL
ITOVEBI TAB 9MG	6	SP, PA, QL
JAKAFI TAB 5MG	NC	SP
JAKAFI TAB 10MG	NC	SP
JAKAFI TAB 15MG	NC	SP
JAKAFI TAB 20MG	NC	SP
JAKAFI TAB 25MG	NC	SP
JAYPIRCA TAB 50MG	NC	SP
JAYPIRCA TAB 100MG	NC	SP
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	SP
KYPROLIS SOL 30MG	NC	SP
KYPROLIS SOL 60MG	NC	SP
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	4	SP, PA, QL
LORBRENA TAB 25MG	6	SP, PA, QL
LORBRENA TAB 100MG	6	SP, PA, QL
LUMAKRAS TAB 120MG	5	SP, PA, QL
LUMAKRAS TAB 240MG	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	SP
MEKINIST SOL 0.05/ML	5	SP, PA, QL
MEKINIST TAB 0.5MG	5	SP, PA, QL
MEKINIST TAB 2MG	5	SP, PA, QL
MEKTOVI TAB 15MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
NERLYNX TAB 40MG	6	SP, PA, QL
NEXAVAR TAB 200MG	NC	SP
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	SP
<i>pazopanib hcl tab 200 mg (base equiv)</i>	4	SP, PA, QL
PEMAZYRE TAB 4.5MG	NC	SP
PEMAZYRE TAB 9MG	NC	SP
PEMAZYRE TAB 13.5MG	NC	SP
PIQRAY 200MG TAB DOSE	5	SP, PA, QL
PIQRAY 250MG TAB DOSE	5	SP, PA, QL
PIQRAY 300MG TAB DOSE	5	SP, PA, QL
QINLOCK TAB 50MG	NC	SP
RETEVMO TAB 40MG	5	SP, PA, QL
RETEVMO TAB 80MG	5	SP, PA, QL
RETEVMO TAB 120MG	5	SP, PA, QL
RETEVMO TAB 160MG	5	SP, PA, QL
<i>romidepsin for iv inj 10 mg</i>	4	SP, PA
ROMVIMZA CAP 14MG	NC	SP
ROMVIMZA CAP 20MG	NC	SP
ROMVIMZA CAP 30MG	NC	SP
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	SP
RUBRACA TAB 250MG	NC	SP
RUBRACA TAB 300MG	NC	SP
RYDAPT CAP 25MG	5	SP, PA, QL
SCEMBLIX TAB 20MG	5	SP, PA, QL
SCEMBLIX TAB 40MG	5	SP, PA, QL
SCEMBLIX TAB 100MG	5	SP, PA, QL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	4	SP, PA, QL
SPRYCEL TAB 20MG	NC	SP
SPRYCEL TAB 50MG	NC	SP
SPRYCEL TAB 70MG	NC	SP
SPRYCEL TAB 80MG	NC	SP
SPRYCEL TAB 100MG	NC	SP
SPRYCEL TAB 140MG	NC	SP
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

Drug Name	Drug Tier	Requirements/Limits
<i>sunitinib malate cap 50 mg (base equivalent)</i>	4	SP, PA, QL
SUTENT CAP 12.5MG	NC	SP
SUTENT CAP 25MG	NC	SP
SUTENT CAP 37.5MG	NC	SP
SUTENT CAP 50MG	NC	SP
TABRECTA TAB 150MG	NC	SP
TABRECTA TAB 200MG	NC	SP
TAFINLAR CAP 50MG	5	SP, PA, QL
TAFINLAR CAP 75MG	5	SP, PA, QL
TAFINLAR TAB 10MG	5	SP, PA, QL
TALZENNA CAP 0.1MG	NC	SP
TALZENNA CAP 0.5MG	NC	SP
TALZENNA CAP 0.25MG	NC	SP
TALZENNA CAP 0.35MG	NC	SP
TALZENNA CAP 0.75MG	NC	SP
TALZENNA CAP 1MG	NC	SP
TASIGNA CAP 50MG	NC	SP
TASIGNA CAP 150MG	NC	SP
TASIGNA CAP 200MG	NC	SP
TAZVERIK TAB 200MG	NC	SP
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	SP, PA, QL
TEPMETKO TAB 225MG	NC	SP
TIBSOVO TAB 250MG	6	SP, PA, QL
TORISEL INJ 25MG/ML	6	SP, ST, PA, QL
<i>torpenz tab 2.5mg</i>	4	SP, PA, QL
<i>torpenz tab 5mg</i>	4	SP, PA, QL
<i>torpenz tab 7.5mg</i>	4	SP, PA, QL
<i>torpenz tab 10mg</i>	4	SP, PA, QL
TRUQAP PAK 160MG	5	SP, PA, QL
TRUQAP PAK 200MG	5	SP, PA, QL
TRUQAP TAB 200MG	5	SP, PA, QL
TURALIO CAP 200MG	NC	SP
TYKERB TAB 250MG	6	SP, PA, QL
UKONIQ TAB 200MG	NC	SP
VANFLYTA TAB 17.7MG	6	SP, PA, QL
VANFLYTA TAB 26.5MG	6	SP, PA, QL
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

Drug Name	Drug Tier	Requirements/Limits
VITRAKVI SOL 20MG/ML	5	SP, PA, QL
VONJO CAP 100MG	6	SP, PA, QL
VORANIGO TAB 10MG	6	SP, PA, QL
VORANIGO TAB 40MG	6	SP, PA, QL
VOTRIENT TAB 200MG	NC	SP
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	SP
XALKORI CAP 250MG	NC	SP
XOSPATA TAB 40MG	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	NC	SP
ZOLINZA CAP 100MG	6	SP, PA, QL
ZYDELIG TAB 100MG	5	SP, PA, QL
ZYDELIG TAB 150MG	5	SP, PA, QL
ZYKADIA TAB 150MG	5	SP, PA, QL
ANTINEOPLASTIC ENZYMES		
ASPARLAS INJ 3750/5ML	6	SP, PA
ONCASPAR INJ 750/ML	6	SP, PA
RYLAZE INJ 10/0.5ML	6	SP, PA, QL
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
LUTATHERA INJ 370MBQ	NC	SP
XOFIGO INJ 1100KBQ	NC	SP
ANTINEOPLASTICS MISC.		
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	SP
HYDREA CAP 500MG	3	
<i>hydroxyurea cap 500 mg</i>	1	
MATULANE CAP 50MG	3	
NIPENT INJ 10MG	3	
PHOTOFRIN INJ 75MG	3	
PROLEUKIN INJ 22MU	6	SP, PA
TARGRETIN CAP 75MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
TICE BCG INJ	3	
<i>tretinoin cap 10 mg</i>	2	
TRISENOX INJ 12MG/6ML	6	
UVADEX SOL 20MCG/ML	3	
CHEMOTHERAPY ADJUNCTS		
ELITEK INJ 1.5MG	3	
ELITEK INJ 7.5MG	3	
KEPIVANCE INJ 5.16MG	NC	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
COSELA INJ 300MG	NC	SP
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	1	
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	1	
IWILFIN TAB 192MG	6	SP, PA, QL
KHAPZORY SOL 175MG	NC	SP
KHAPZORY SOL 300MG	NC	SP
<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	
<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>	1	
<i>leucovorin calcium tab 15 mg</i>	1	
<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	
<i>mesna tab 400 mg</i>	1	
MESNEX INJ 1GM	3	
MESNEX TAB 400MG	3	
PEDMARK INJ 12.5GM	6	SP, PA
TOTECT INJ 500MG	NC	SP
VORAXAZE INJ 1000UNIT	6	SP
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	6	SP

Drug Name	Drug Tier	Requirements/Limits
<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	
<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	
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	
<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
TOPOISOMERASE I INHIBITORS		
CAMPTOSAR INJ 40MG/2ML	3	
CAMPTOSAR INJ 100/5ML	3	
CAMPTOSAR INJ 300/15ML	3	
DATROWAY INJ 100MG	NC	SP
HYCAMTIN CAP 0.25MG	6	SP, PA
HYCAMTIN CAP 1MG	6	SP, PA
HYCAMTIN INJ 4MG	3	

Drug Name	Drug Tier	Requirements/Limits
<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	SP
NOURIANZ TAB 40MG	NC	SP

ANTIPARKINSON ANTICHOLINERGICS

<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	

ANTIPARKINSON COMT INHIBITORS

<i>entacapone tab 200 mg</i>	1	
ONGENTYS CAP 25MG	NC	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	

ANTIPARKINSON DOPAMINERGICS

<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	SP
<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 & levodopa orally disintegrating tab 10-100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & 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>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
CREXONT CAP 35-140MG	2	
CREXONT CAP 52.5-210	2	
CREXONT CAP 70-280MG	2	
CREXONT CAP 87.5-350	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
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	
ONAPGO INJ 98/20ML	NC	SP
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	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<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>	1	
<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	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
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>	1	PA; PV
<i>lurasidone hcl tab 40 mg</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
VRAYLAR CAP 4.5MG	2	PA; PV
VRAYLAR CAP 6MG	2	PA; PV
<i>ziprasidone hcl cap 20 mg</i>	1	PV
<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>	1	PV
<i>paliperidone tab er 24hr 3 mg</i>	1	PV
<i>paliperidone tab er 24hr 6 mg</i>	1	PV
<i>paliperidone tab er 24hr 9 mg</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
RISPERDAL TAB 1MG	3	PV
RISPERDAL TAB 2MG	3	PV
RISPERDAL TAB 3MG	3	PV
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>	2	PV
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	PV
<i>risperidone orally disintegrating tab 1 mg</i>	1	PV
<i>risperidone orally disintegrating tab 2 mg</i>	1	PV
<i>risperidone orally disintegrating tab 3 mg</i>	1	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	
BUTYROPHENONES		
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

Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol tab 1 mg</i>	1	PV
<i>haloperidol tab 2 mg</i>	1	PV
<i>haloperidol tab 5 mg</i>	1	PV
<i>haloperidol tab 10 mg</i>	1	PV
<i>haloperidol tab 20 mg</i>	2	PV

DIBENZAPINES

<i>ADASUVE INH 10MG</i>	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>	1	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
<i>CLOZARIL TAB 25MG</i>	3	PV
<i>CLOZARIL TAB 100MG</i>	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

Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	PV
<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 TAB 2.5MG	3	PV
ZYPREXA TAB 5MG	3	PV
ZYPREXA TAB 20MG	3	PV
DIHYDROINDOLONES		
<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
PHENOTHIAZINES		
<i>chlorpromazine hcl inj 25 mg/ml</i>	2	
<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>	1	PV
<i>chlorpromazine hcl tab 50 mg</i>	1	PV
<i>chlorpromazine hcl tab 100 mg</i>	1	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

Drug Name	Drug Tier	Requirements/Limits
<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>	1	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>	1	
<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	2	PV
ABILIFY ASIM INJ 960MG	2	PV
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	
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	

Drug Name	Drug Tier	Requirements/Limits
ABILIFY TAB 10MG	NC	
ABILIFY TAB 15MG	NC	
ABILIFY TAB 20MG	NC	
ABILIFY TAB 30MG	NC	
<i>aripiprazole oral solution 1 mg/ml</i>	1	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
OPIPZA MIS 2MG	NC	
OPIPZA MIS 5MG	NC	
OPIPZA MIS 10MG	NC	
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
THIOXANTHENES		
<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
ANTISEPTICS & DISINFECTANTS		
ANTISEPTICS & DISINFECTANTS		
FORMALDEHYDE SOL 37%	3	
<i>formaldehyde solution 10%</i>	1	
GLUTARALDEHY SOL 25%	3	
<i>hydrogen peroxide soln 30%</i>	1	
CHLORINE ANTISEPTICS		
ANASEPT SPR	NC	OTC
BENZALKONIUM SOL 50%	3	
BENZALKONIUM SOL NF	3	

Drug Name	Drug Tier	Requirements/Limits
CHLORHEX GLU SOL 20%	3	
IODINE ANTISEPTICS		
IODINE TIN 2%	3	
LUGOLS SOL IODINE	3	
ANTIVIRALS		
ANTIRETROVIRALS		
<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	0	SP, QL; ACA, PV
APTIVUS CAP 250MG	NC	SP
APTIVUS SOL	NC	SP
<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	SP
BIKTARVY TAB	2	SP, QL
CABENUVA SUS 400-600	6	SP, PA, QL
CABENUVA SUS 600-900	6	SP, PA, QL
CIMDUO TAB 300-300	2	SP, PA, QL
COMPLERA TAB	NC	SP
<i>darunavir tab 600 mg</i>	1	SP
<i>darunavir tab 800 mg</i>	1	SP
DELSTRIGO TAB	NC	SP
DESCOVY TAB 120-15MG	2	SP, QL; PV
DESCOVY TAB 200/25MG	0	SP, QL; ACA, PV
DOVATO TAB 50-300MG	2	SP, QL
EDURANT PED TAB 2.5MG	NC	SP
EDURANT TAB 25MG	NC	SP
<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
<i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>	1	SP, QL
<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

Drug Name	Drug Tier	Requirements/Limits
<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	6	SP, PA, QL
GENVOYA TAB	2	SP, QL
INTELENCE TAB 25MG	NC	SP
INTELENCE TAB 100MG	NC	SP
INTELENCE TAB 200MG	NC	SP
INVIRASE TAB 500MG	NC	SP
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	SP
KALETRA TAB 100-25MG	NC	SP
KALETRA TAB 200-50MG	NC	SP
<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	SP
LEXIVA TAB 700MG	NC	SP
<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
<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	SP
NORVIR SOL 80MG/ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
NORVIR TAB 100MG	NC	SP
ODEFSEY TAB	2	SP, QL
PIFELTRO TAB 100MG	NC	SP
PREZCOBIX TAB 800-150	3	SP, QL
PREZISTA SUS 100MG/ML	NC	SP
PREZISTA TAB 75MG	NC	SP
PREZISTA TAB 150MG	NC	SP
PREZISTA TAB 600MG	NC	SP
PREZISTA TAB 800MG	NC	SP
RETROVIR CAP 100MG	2	SP, QL
RETROVIR INJ 10MG/ML	2	SP, QL
RETROVIR SYP 50MG/5ML	2	SP, QL
REYATAZ CAP 200MG	NC	SP
REYATAZ CAP 300MG	NC	SP
REYATAZ POW 50MG	NC	SP
<i>ritonavir tab 100 mg</i>	1	SP
RUKOBIA TAB 600MG ER	6	SP, QL
SELZENTRY SOL 20MG/ML	NC	SP
SELZENTRY TAB 25MG	NC	SP
SELZENTRY TAB 75MG	NC	SP
SELZENTRY TAB 150MG	NC	SP
SELZENTRY TAB 300MG	NC	SP
STRIBILD TAB	NC	SP
SUNLENCA INJ	NC	SP
SUNLENCA TAB 300MG	NC	SP
SYMFI TAB	3	SP, QL
SYMITUZA 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	SP
TRUVADA TAB 133-200	NC	SP
TRUVADA TAB 167-250	NC	SP
TRUVADA TAB 200-300	NC	SP
TYBOST TAB 150MG	2	SP, QL
VIRACEPT TAB 250MG	NC	SP
VIRACEPT TAB 625MG	NC	SP
VIREAD POW 40MG/GM	3	SP, QL
VIREAD TAB 150MG	3	SP, QL
VIREAD TAB 200MG	3	SP, QL

Drug Name	Drug Tier	Requirements/Limits
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
ANTIVIRAL COMBINATIONS		
PAXLOVID TAB 150-100	5	QL
PAXLOVID TAB 300-100	5	QL
CMV AGENTS		
<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 PAK 20MG	3	
PREVYMIS PAK 120MG	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>	2	QL
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	4	SP
BARACLUDE SOL	6	SP, QL
BARACLUDE TAB 0.5MG	NC	SP
BARACLUDE TAB 1MG	NC	SP
<i>entecavir tab 0.5 mg</i>	4	SP, QL
<i>entecavir tab 1 mg</i>	4	SP, QL
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	SP

Drug Name	Drug Tier	Requirements/Limits
EPIVIR HBV TAB 100MG	NC	SP
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	SP
<i>lamivudine tab 100 mg (hbv)</i>	4	SP
LEDIP-SOFOSB TAB 90-400MG	NC	SP
MAVYRET TAB 100-40MG	NC	SP
PEGASYS INJ	NC	SP
PEGASYS INJ 180MCG/M	NC	SP
PEGASYS INJ PROCLICK	NC	SP
PEGASYS KIT 180MCG/M	NC	SP
<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	SP
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	5	SP
VIEKIRA PAK TAB	NC	SP
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)
ZEPATIER TAB 50-100MG	NC	SP
HERPES AGENTS		
<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	

INFLUENZA AGENTS

<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	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>	1	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	

MISC. ANTIVIRALS

LAGEVRIO CAP 200MG	3	
TEMBEXA SUS 10MG/ML	3	
TEMBEXA TAB 100MG	3	
TPOXX CAP 200MG	3	
TPOXX INJ	3	
VEKLURY INJ 100MG	3	PA, QL

BETA BLOCKERS

ALPHA-BETA BLOCKERS

<i>carvedilol phosphate cap er 24hr 10 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 20 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 40 mg</i>	1	PV
<i>carvedilol phosphate cap er 24hr 80 mg</i>	1	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	

Drug Name	Drug Tier	Requirements/Limits
COREG TAB 3.125MG	3	PV
COREG TAB 6.25MG	3	PV
COREG TAB 12.5MG	3	PV
COREG TAB 25MG	3	PV
labetalol hcl iv soln 5 mg/ml	1	
labetalol hcl tab 100 mg	1	PV
labetalol hcl tab 200 mg	1	PV
labetalol hcl tab 300 mg	1	PV
LABETALOL INJ 20/4ML	3	

BETA BLOCKERS CARDIO-SELECTIVE

acebutolol hcl cap 200 mg	1	PV
acebutolol hcl cap 400 mg	1	PV
atenolol tab 25 mg	1	PV
atenolol tab 50 mg	1	PV
atenolol tab 100 mg	1	PV
betaxolol hcl tab 10 mg	1	PV
betaxolol hcl tab 20 mg	1	PV
bisoprolol fumarate tab 5 mg	1	PV
bisoprolol fumarate tab 10 mg	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	
esmolol hcl inj 100 mg/10ml	1	
ESMOLOL HCL SOL 2000/100	3	
ESMOLOL HCL SOL 2500/250	3	
esmolol hcl-sodium chloride iv soln 2000 mg/100ml	1	
esmolol hcl-sodium chloride iv soln 2500 mg/250ml	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

Drug Name	Drug Tier	Requirements/Limits
<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
RAPIBLYK INJ 280MG	NC	
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	
BETA BLOCKERS NON-SELECTIVE		
BETAPACE AF TAB 80MG	NC	
BETAPACE AF TAB 120MG	NC	
BETAPACE AF TAB 160MG	NC	
BETAPACE TAB 80MG	NC	
BETAPACE TAB 120MG	NC	
BETAPACE TAB 160MG	NC	
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

Drug Name	Drug Tier	Requirements/Limits
<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/afl) tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	PV
<i>sotalol hcl (afib/afl) 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

CALCIUM CHANNEL BLOCKER COMBINATIONS

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
CARDENE IV INJ 40/200ML	3	
CARDENE IV SOL 20/200ML	3	
CARDIZEM CD CAP 120MG/24	NC	

Drug Name	Drug Tier	Requirements/Limits
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
<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>	1	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

Drug Name	Drug Tier	Requirements/Limits
<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	
DILTIAZEM INJ 100MG	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
KATERZIA SUS 1MG/ML	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	
<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	
NICARDIPINE INJ 25/10ML	3	
<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

Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	PV
<i>nimodipine cap 30 mg</i>	2	
<i>nimodipine oral soln 60 mg/20ml (3 mg/ml)</i>	1	
<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>	2	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>tiadylt cap 120mg/24</i>	1	PV
<i>tiadylt cap 180mg/24</i>	1	PV
<i>tiadylt cap 240mg/24</i>	1	PV
<i>tiadylt cap 300mg/24</i>	1	PV
<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

Drug Name	Drug Tier	Requirements/Limits
<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

CARDIOTONICS

CARDIAC GLYCOSIDES

<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	
LANOXIN TAB 0.0625MG	3	

INOTROPES

<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	

CARDIOVASCULAR AGENTS - MISC.

CARDIAC MYOSIN INHIBITORS

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

CARDIOPLEGIC SOLUTIONS

ADENOCAINE INJ 40ML	3	

Drug Name	Drug Tier	Requirements/Limits
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	
CARDIOPL MN SOL LOW TROM	3	
CARDIOPLEGI INJ DEL NIDO	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	

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

<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
<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

Drug Name	Drug Tier	Requirements/Limits
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 CAP 6-6MG	2	PA; PV
ENTRESTO CAP 15-16MG	2	PA; 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>	1	
OPSYNVI TAB 10-20MG	NC	
OPSYNVI TAB 10-40MG	NC	
CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS		
INPEFA TAB 400MG	NC	
IMPOTENCE AGENTS		
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
PROSTAGLANDIN VASODILATORS		
<i>alprostadil inj 500 mcg/ml</i>	1	
<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
PROSTIN VR INJ 500MCG	3	
REMODULIN INJ 1MG/ML	NC	
REMODULIN INJ 2.5MG/ML	NC	
REMODULIN INJ 5MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
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	6	SP, PA, QL
TYVASO DPI POW 16MCG	6	SP, PA, QL
TYVASO DPI POW 32MCG	6	SP, PA, QL
TYVASO DPI POW 48MCG	6	SP, PA, QL
TYVASO DPI POW 64MCG	6	SP, PA, QL
TYVASO RF KT SOL 0.6MG/ML	6	SP, PA, QL
TYVASO SOL 0.6MG/ML	6	SP, PA, QL
TYVASO ST KT 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
YUTREPIA CAP 26.5MCG	NC	SP
YUTREPIA CAP 53MCG	NC	SP
YUTREPIA CAP 79.5MCG	NC	SP
YUTREPIA CAP 106MCG	NC	SP
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR INJ 45MG	6	SP, PA, QL
WINREVAIR INJ 60MG	6	SP, PA, QL
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<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
<i>bosentan tab 125 mg</i>	4	SP, PA, QL
LETAIRIS TAB 5MG	NC	SP
LETAIRIS TAB 10MG	NC	SP
OPSUMIT TAB 10MG	5	SP, PA, QL
TRACLEER TAB 32MG	NC	SP
TRACLEER TAB 62.5MG	NC	SP
TRACLEER TAB 125MG	NC	SP
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
ADCIRCA TAB 20MG	NC	SP
<i>alyq tab 20mg</i>	4	SP, PA, QL
LIQREV SUS 10MG/ML	NC	SP
REVATIO INJ	NC	SP
REVATIO SUS 10MG/ML	NC	SP
REVATIO TAB 20MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
<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	5	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	3	PA
CORLANOR TAB 7.5MG	3	PA
<i>ivabradine hcl tab 5 mg (base equiv)</i>	2	PA
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	2	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP 61MG	6	SP, PA, QL
VYNDAQEL CAP 20MG	NC	
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
CEPHALOSPORINS		
CEPHALOSPORIN COMBINATIONS		
AVYCAZ INJ 2-0.5GM	3	
ZERBAXA INJ 1.5GM	3	
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil cap 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	

CEPHALOSPORINS - 2ND GENERATION

<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	
<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	

Drug Name	Drug Tier	Requirements/Limits
cefuroxime sodium for iv soln 1.5 gm	1	
CEPHALOSPORINS - 3RD GENERATION		
cefdinir cap 300 mg	1	
cefdinir for susp 125 mg/5ml	1	
cefdinir for susp 250 mg/5ml	1	
cefixime cap 400 mg	2	
cefixime for susp 100 mg/5ml	2	
cefixime for susp 200 mg/5ml	2	
cefpodoxime proxetil for susp 50 mg/5ml	1	
cefpodoxime proxetil for susp 100 mg/5ml	2	
cefpodoxime proxetil tab 100 mg	1	
cefpodoxime proxetil tab 200 mg	1	
ceftazidime for inj 1 gm	1	
ceftazidime for inj 6 gm	2	
ceftazidime for iv soln 2 gm	2	
CEFTRIAX/DEX INJ 1GM	3	
CEFTRIAX/DEX INJ 2GM	3	
CEFTRIAXONE INJ 100GM	3	
ceftriaxone sodium for inj 1 gm	1	
ceftriaxone sodium for inj 2 gm	2	
ceftriaxone sodium for inj 10 gm	2	
ceftriaxone sodium for inj 250 mg	1	
ceftriaxone sodium for inj 500 mg	1	
ceftriaxone sodium for iv soln 1 gm	1	
ceftriaxone sodium for iv soln 2 gm	1	
ceftriaxone sodium in dextrose inj 20 mg/ml	1	
ceftriaxone sodium in dextrose inj 40 mg/ml	1	
tazicef inj 1gm	1	
TAZICEF INJ 1GM/50ML	3	
tazicef inj 2gm	2	
tazicef inj 6gm	2	
CEPHALOSPORINS - 4TH GENERATION		
cefepime hcl for inj 1 gm	1	
cefepime hcl for iv soln 2 gm	2	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2G/100ML	3	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO INJ 400MG	3	
TEFLARO INJ 600MG	3	

Drug Name	Drug Tier	Requirements/Limits
CEPHALOSPORINS - SIDEROPHORES		
FETROJA INJ 1GM	3	
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<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>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>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
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>brielllyn 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>cryselle-28 tab 28 tabs</i>	0	ACA, PV
<i>cyred eq 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 & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	ACA, PV
<i>dolishale tab 90-20mcg</i>	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<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 & ethinyl estradiol tab 1 mg-35 mcg</i>	0	ACA, PV
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	0	ACA, PV
<i>falmina tab</i>	0	ACA, PV
<i>feirza tab 1.5/30</i>	0	ACA, PV
<i>feirza tab 1/20</i>	0	ACA, PV
<i>FEMLYV TAB 1/0.02MG</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
<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

Drug Name	Drug Tier	Requirements/Limits
<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>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<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
<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>mibelas 24 chw fe</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	

Drug Name	Drug Tier	Requirements/Limits
<i>minzoya tab 0.1-20</i>	0	ACA, PV
<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 ace & ethinyl estradiol tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace & 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 & 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>ocella tab 3-0.03mg</i>	0	ACA, PV
ORTHO TRI- TAB CYCLN LO	NC	
<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
<i>rosyrah tab</i>	0	ACA, PV
SAFYRAL TAB	3	ACA, PV
SEASONIQUE TAB	NC	
<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

Drug Name	Drug Tier	Requirements/Limits
<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 eq</i>	0	ACA, PV
<i>taysofy cap 1/20</i>	0	ACA, PV
TAYTULLA CAP 1MG/20MC	NC	
<i>tilia fe tab</i>	0	ACA, PV
<i>tri-estaryll tab</i>	0	ACA, PV
<i>tri-legest tab fe</i>	0	ACA, PV
<i>tri-lynyah 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-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>valtya 1/50 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
<i>xarah fe tab</i>	0	ACA, PV
<i>xelria 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
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<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

Drug Name	Drug Tier	Requirements/Limits
COMBINATION CONTRACEPTIVES - VAGINAL		
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
COPPER CONTRACEPTIVES - IUD		
MIUDELLA IUD COPPER	0	ACA, PV
PARAGARD IUD T380A	0	ACA, PV
EMERGENCY CONTRACEPTIVES		
<i>aftera tab 1.5mg</i>	0	OTC; ACA, PV
<i>afterpill 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>her style tab 1.5mg</i>	0	OTC; 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
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON IMP 68MG	0	ACA, PV
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA INJ 150MG/ML	3	ACA, PV
DEPO-SQ PROV INJ 104	0	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
PROGESTIN CONTRACEPTIVES - IUD		
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
PROGESTIN CONTRACEPTIVES - ORAL		
<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

Drug Name	Drug Tier	Requirements/Limits
<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
OPILL TAB 0.075MG	0	OTC; ACA, PV
<i>sharobel tab 0.35mg</i>	0	ACA, PV
SLYND TAB 4MG	NC	

CORTICOSTEROIDS

GLUCOCORTICOSTEROIDS

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 & 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 susp 22.75 mg/ml</i>	4	SP, PA
<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	

Drug Name	Drug Tier	Requirements/Limits
dexamethasone sod phosphate preservative free inj 10 mg/ml	1	
dexamethasone sodium phosphate inj 4 mg/ml	1	
dexamethasone sodium phosphate inj 10 mg/ml	1	
dexamethasone sodium phosphate inj 20 mg/5ml	1	
dexamethasone sodium phosphate inj 100 mg/10ml	1	
dexamethasone sodium phosphate inj 120 mg/30ml	1	
dexamethasone sodium phosphate inj soln pref syr 4 mg/ml	1	
dexamethasone soln 0.5 mg/5ml	1	
dexamethasone tab 0.5 mg	1	
dexamethasone tab 0.75 mg	1	
dexamethasone tab 1 mg	1	
dexamethasone tab 1.5 mg	1	
dexamethasone tab 2 mg	1	
dexamethasone tab 4 mg	1	
dexamethasone tab 6 mg	1	
dexamethasone tab therapy pack 1.5 mg (21)	2	
dexamethasone tab therapy pack 1.5 mg (35)	1	
dexamethasone tab therapy pack 1.5 mg (51)	1	
DEXONTO 0.4% SOL 20MG/5ML	NC	
dexpak pak 6 day	NC	
dexpak pak 10 day	NC	
dexpak pak 13 day	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	
hidex 6-day pak 1.5mg	2	
hydrocortisone sodium succinate pf for inj 100 mg	1	
hydrocortisone tab 5 mg	1	
hydrocortisone tab 10 mg	1	
hydrocortisone tab 20 mg	1	
KENALOG-10 INJ 10MG/ML	3	
KENALOG-40 INJ 40MG/ML	3	
KENALOG-80 INJ 80MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	
MEDROL TAB 8MG	3	
MEDROL TAB 16MG	3	
METHY-BUPIVA SUS 8-5MG/ML	NC	
METHYL-BUIV 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	
<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 phosphate oral soln 5 mg/5ml (base equiv)</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	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
<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	
<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	
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	

COUGH/COLD/ALLERGY

Drug Name	Drug Tier	Requirements/Limits
ANTITUSSIVES		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	PA
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	PA
<i>hydromet syp 5-1.5/5</i>	1	PA
COUGH/COLD/ALLERGY COMBINATIONS		
<i>CLARINEX-D TAB 2.5-120</i>	3	
<i>g tussin ac liq 100-10/5</i>	1	PA, OTC
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	PA, OTC
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	PA
<i>MAR-COF CG LIQ 225-7.5</i>	3	PA, OTC
<i>maxi-tuss ac sol</i>	1	PA, OTC
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	PA
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<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>	1	
<i>SSKI SOL 1GM/ML</i>	3	
MISC. RESPIRATORY INHALANTS		
<i>HYPERSAL NEB 3.5%</i>	3	
<i>HYPERSAL NEB 7%</i>	3	
<i>nebusal neb 3%</i>	1	
<i>NEBUSAL NEB 6%</i>	3	
<i>pulmosal neb 7%</i>	1	
<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>	1	

Drug Name	Drug Tier	Requirements/Limits
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
<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	PA
<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>amnesteeem cap 10mg</i>	1	PA
<i>amnesteeem cap 20mg</i>	1	PA
<i>amnesteeem cap 30mg</i>	2	PA
<i>amnesteeem cap 40mg</i>	1	PA
AMZEEQ AER 4%	NC	
ARAZLO LOT 0.045%	NC	
ATRALIN GEL 0.05%	3	PA
AZELEX CRE 20%	NC	
BENZAC AC LIQ 5% WASH	3	ST, PA
BENZACLIN GEL 1-5%	NC	
BENZACLIN GEL 1-5%PUMP	NC	
BENZAMYCIN GEL 5-3%	3	
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide gel 8%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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 aer 1%</i>	1	
<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>	1	
<i>clindamycin phosphate gel 1% (once-daily)</i>	1	(applies to NDC 69238203107 only)
<i>clindamycin phosphate gel 1% (once-daily)</i>	3	
<i>clindamycin phosphate gel 1% (twice-daily)</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	
<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-tretinoin gel 1.2- 0.025%</i>	1	PA
<i>dapsone gel 5%</i>	1	
<i>dapsone gel 7.5%</i>	1	
DIFFERIN CRE 0.1%	3	PA
DIFFERIN GEL 0.3% PMP	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	
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	

Drug Name	Drug Tier	Requirements/Limits
<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>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	3	ST, PA
PR BENZOYL LIQ 7% WASH	3	
<i>resorcinol-sulfur lotion 2-5%</i>	1	
RETIN-A CRE 0.1%	3	PA
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%PUMP	NC	
RETIN-A MICR GEL 0.04%	NC	
RETIN-A MICR GEL 0.04%PMP	NC	
RETIN-A MICR GEL 0.06%PMP	NC	
RETIN-A MICR GEL 0.08%PMP	NC	
SOD SUL/SULF EMU 10-5%	3	
<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>	1	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	
ZIANA GEL	NC	
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN OIN 15%	NC	

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS - TOPICAL		
MUSCUSOLICE CRE 2%	NC	
PRAKETAMIDE CRE 5%	NC	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
arthr pain gel 1%	1	PA, OTC
aspercrm art gel 1% pain	1	PA, OTC
diclofenac epolamine patch 1.3%	1	PA, QL
diclofenac sodium gel 1% (1.16% diethylamine equiv)	1	PA, QL, OTC
diclofenac sodium soln 1.5%	1	PA, QL
diclofenac sodium soln 2%	NC	
DICLOFONO GEL 1.6%	NC	
eq arthritis gel 1%	1	PA, OTC
FLECTOR DIS 1.3%	3	PA, QL
ft arthritis gel 1%	1	PA, OTC
gnp diclofen gel 1%	1	PA, OTC
goodsense gel art pain	1	PA, OTC
kls arthriti gel 1%	1	PA, OTC
kls diclofen gel 1%	1	PA, OTC
motrin arthr gel pain 1%	1	PA, OTC
PENNSAID SOL 2%	NC	
qc diclofena gel 1%	1	PA, OTC
VOLTAREN GEL 1% ARTHR	3	PA, OTC
ANTIBIOTICS - TOPICAL		
ALTABAX OIN 1%	NC	
gentamicin sulfate cream 0.1%	1	
gentamicin sulfate oint 0.1%	1	
mupirocin calcium cream 2%	NC	
mupirocin oint 2%	1	
NEO-SYNALAR CRE	NC	
ANTIFUNGALS - TOPICAL		
ciclodan sol 8%	1	PA
ciclopirox gel 0.77%	1	
ciclopirox olamine cream 0.77% (base equiv)	1	
ciclopirox olamine susp 0.77% (base equiv)	1	
ciclopirox shampoo 1%	1	
ciclopirox solution 8%	1	PA
clotrimazole cream 1%	1	
clotrimazole soln 1%	1	
clotrimazole w/ betamethasone cream 1-0.05%	1	
clotrimazole w/ betamethasone lotion 1-0.05%	1	
econazole nitrate cream 1%	1	

Drug Name	Drug Tier	Requirements/Limits
ECOZA AER 1%	3	
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	
EXELDERM SOL 1%	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	
LUZU CRE 1%	3	
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	2	
<i>naftifine hcl cream 1%</i>	2	
<i>naftifine hcl cream 2%</i>	1	
<i>naftifine hcl gel 2%</i>	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 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
<i>nystop pow 100000</i>	1	
<i>oxiconazole nitrate cream 1%</i>	1	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	
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
AMELUZ GEL 10%	NC	SP
<i>bexarotene gel 1%</i>	4	SP, PA
CARAC CRE 0.5%	NC	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<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% (250)	NC	
LEVULAN KERA SOL 20%	3	
PANRETIN GEL 0.1%	3	
TARGRETIN GEL 1%	NC	SP
VALCHLOR GEL 0.016%	6	SP, PA, QL

ANTIPRURITICS - TOPICAL

<i>doxepin hcl cream 5%</i>	NC	
PRUDOXIN CRE 5%	3	ST, PA, QL
ZONALON CRE 5%	3	ST, PA, QL

ANTIPSORIATICS

<i>acitretin cap 10 mg</i>	1	PA
<i>acitretin cap 17.5 mg</i>	2	PA
<i>acitretin cap 25 mg</i>	1	PA
BIMZELX INJ 160MG/ML	5	SP, PA, QL
BIMZELX INJ 320MG/2	5	SP, PA, QL
<i>calcipotriene cream 0.005%</i>	NC	
<i>calcipotriene foam 0.005%</i>	NC	
<i>calcipotriene oint 0.005%</i>	1	PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	PA
<i>calcitrene oin 0.005%</i>	1	PA
<i>calcitriol oint 3 mcg/gm</i>	NC	
COSENTYX INJ 75MG/0.5	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis; for pediatric patients less than 50 kg;
COSENTYX INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
COSENTYX INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
COSENTYX UNO INJ 300/2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Hidradenitis Suppurativa, Non-Radiographic Axial Spondyloarthritis, and Psoriatic Arthritis
ILUMYA INJ 100MG/ML	5	SP, PA, QL
<i>methoxsalen rapid cap 10 mg</i>	1	
OTULFI INJ 45/0.5ML	NC	SP
OTULFI INJ 90MG/ML	NC	SP
PYZCHIVA INJ 45/0.5ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis
PYZCHIVA INJ 90MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis
SELARSDI INJ 45/0.5ML	NC	SP
SELARSDI INJ 90MG/ML	NC	SP
SILIQ INJ 210/1.5	NC	SP
SKYRIZI INJ 150MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SORILUX AER 0.005%	NC	
SOTYKTU TAB 6MG	5	SP, PA, QL; Preferred for Psoriasis
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 Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STELARA INJ 90MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STEQEYMA INJ 45/0.5ML	NC	SP
STEQEYMA INJ 90MG/ML	NC	SP
TALTZ INJ 20/0.25	NC	SP
TALTZ INJ 40/0.5ML	NC	SP
TALTZ INJ 80MG/ML	NC	SP
<i>tazarotene cream 0.1%</i>	1	PA
<i>tazarotene cream 0.05%</i>	2	PA
<i>tazarotene gel 0.1%</i>	1	PA
<i>tazarotene gel 0.05%</i>	1	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, and Ulcerative Colitis
USTEKIN-AEKN INJ 45/0.5ML	NC	SP
USTEKIN-AEKN INJ 90MG/ML	NC	SP
USTEKIN-TTWE INJ 45/0.5ML	NC	SP
USTEKIN-TTWE INJ 90MG/ML	NC	SP
VECTICAL OIN 3MCG/GM	NC	SP
VTAMA CRE 1%	2	PA, QL
WEZLANA INJ 45/0.5ML	NC	SP
WEZLANA INJ 90MG/ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
YESINTEK INJ 45/0.5ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis
YESINTEK INJ 90MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis

ANTISEBORRHEIC PRODUCTS

ESKATA SOL 40%	NC	
NUTRASEB CRE	3	PA
PROMISEB CRE	3	PA
selenium sulfide lotion 2.5%	1	

ANTIVIRALS - TOPICAL

acyclovir cream 5%	NC	
acyclovir oint 5%	1	
DENAVIR CRE 1%	3	
penciclovir cream 1%	2	
XERESE CRE 5-1%	NC	
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	

BURN PRODUCTS

mafenide acetate packet for topical soln 5% (50 gm)	1	
SILVADENE CRE 1%	3	
silver sulfadiazine cream 1%	1	
ssd cre 1%	1	
SULFAMYLLON CRE 85MG/GM	3	

CORTICOSTEROIDS - TOPICAL

ala scalp lot 2%	NC	
ala-cort cre 1%	1	
alclometasone dipropionate cream 0.05%	1	
alclometasone dipropionate oint 0.05%	1	
amcinonide cream 0.1%	1	
APEXICON E CRE 0.05%	NC	
betamethasone dipropionate augmented cream 0.05%	1	
betamethasone dipropionate augmented gel 0.05%	1	
betamethasone dipropionate augmented lotion 0.05%	1	
betamethasone dipropionate augmented oint 0.05%	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	NC	
<i>clobetasol e cre 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate cream 0.025%</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	
<i>desonide gel 0.05%</i>	NC	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
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
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>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halcinonide cream 0.1%</i>	NC	
<i>halcinonide soln 0.1%</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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 soln 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	
MICORT-HC CRE 2.5%	NC	
<i>mometasone furoate cream 0.1%</i>	1	
<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-E AER 0.05%	NC	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1%	3	
PRAMOSONE LOT 2.5%	3	
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
<i>texacort sol 2.5%</i>	1	
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	

Drug Name	Drug Tier	Requirements/Limits
<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 0.5%</i>	1	
ULTRAVATE LOT 0.05%	NC	
VANOS CRE 0.1%	3	PA
ECZEMA AGENTS		
ADBRY INJ 150MG/ML	5	SP, PA, QL
ADBRY INJ 300/2ML	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
EBGLYSS INJ 250/2ML	NC	SP
OPZELURA CRE 1.5%	2	PA, QL
EMOLLIENT/KERATOLYTIC AGENTS		
<i>urea cre 41%</i>	NC	
<i>uredeb cre 39%</i>	1	
EMOLLIENTS		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
LACTIC ACID CRE E	3	
ENZYMES - TOPICAL		
SANTYL OIN 250/GM	3	
HAIR GROWTH AGENTS		
LEQSELVI TAB 8MG	NC	SP
LITFULO CAP 50MG	5	SP, PA
IMMUNOMODULATING AGENTS - TOPICAL		
<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	
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
ELIDEL CRE 1%	NC	
HYFTOR GEL 0.2%	NC	
<i>pimecrolimus cream 1%</i>	1	PA
<i>tacrolimus oint 0.1%</i>	1	PA
<i>tacrolimus oint 0.03%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
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	
LINIMENTS		
TURPENTINE SOL SPIRITS	3	
LOCAL ANESTHETICS - TOPICAL		
CRYODOSE AER TA	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	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	QL
<i>lidocaine patch 5%</i>	1	PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	PA, QL
LIDODERM DIS 5% PATCH	3	PA
<i>lydexa cre 4.12%</i>	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>tridacaine dis 5% patch</i>	1	PA
<i>zeruvia pad 4-1%</i>	1	
ZTLIDO PAD 1.8%	3	PA, QL
MISC. DERMATOLOGICAL PRODUCTS		
ALADERM PLUS EMU	NC	
ALEVAMAX CRE	3	PA

Drug Name	Drug Tier	Requirements/Limits
ALEVICYN SG GEL ANTIPRUR	NC	
CERACADE EMU	NC	
CERAMAX CRE	NC	
DEXERYL CRE	3	PA
EMULSION SB EMU	3	PA
ENTTY EMU SPRAY	NC	
EPICERAM EMU	NC	
HPR PLUS AER	NC	
HPR PLUS CRE	3	PA
HPR PLUS KIT	NC	
KAMDOY EMU	NC	
LEVICYN GEL	3	PA
MIMYX CRE	3	PA
NEOSALUS AER	3	PA
NEOSALUS CRE	3	PA
NEOSALUS LOT	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	
XERALUX CRE	3	PA
MISC. TOPICAL		
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 SOL 0.012%	NC	
QBREXZA PAD 2.4%	3	
XERAC-AC SOL 6.25%	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OIN 2%	2	ST, QL
ZORYVE CRE 0.3%	2	PA, QL
ZORYVE CRE 0.15%	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
ZORYVE MIS 0.3%	3	PA, QL
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	2	PA
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	NC	
FINACEA AER 15%	2	PA
FINACEA GEL 15%	NC	
<i>ivermectin cream 1%</i>	1	PA
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	
REMYDA GEL 0.25%	NC	
RESTIMO GEL 1-1%	NC	
RHOFADE CRE 1%	NC	
SOOLANTRA CRE 1%	NC	
SCABICIDES & PEDICULICIDES		
<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	
SCAR TREATMENT PRODUCTS		
BEAU RX GEL	NC	
KELARX GEL	NC	
RECEDO GEL	NC	
SILIPAC KIT	NC	
TAR PRODUCTS		
<i>coal tar soln 20%</i>	1	
WOUND CARE PRODUCTS		
ACTCT FLEX 3 PAD 4"X4"	3	PA
ACTI ANTIMIC PAD 2"X2"	3	PA

Drug Name	Drug Tier	Requirements/Limits
ACTI ANTIMIC PAD 4"X4"	3	PA
ACTICOAT 7 PAD 2"X2"	3	PA
ACTICOAT 7 PAD 4"X5"	3	PA
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 2"X2"	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 6"X6"	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 5"X5"	3	PA
AQUACEL FOAM PAD 7"X7"	3	PA
ARIDA GEL	3	PA
ATRAPRO GEL HYDROGEL	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 2"X2"	3	PA
DURAFIBER AG PAD 4"X4"	3	PA
DURAFIBER AG PAD 6"X6"	3	PA
DYNAGINATE MIS 12" ROPE	3	PA
DYNAGINATE PAD 4"X5"	3	PA
DYNAGINATE PAD 4"X8"	3	PA
DYNAGINATE PAD AG 2"X2"	3	PA
ENDO DERMAL MIS 5X5 CM	3	PA
FILSUEZ GEL 10%	NC	
HYDRFRA BLUE PAD RDY 2.5"	3	PA
HYDRFRA BLUE PAD RDY 4X5"	3	PA

Drug Name	Drug Tier	Requirements/Limits
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
HYDROG WOUND MIS 3" DISK	3	
HYDROG WOUND MIS 4-3/4"	3	
HYDROGEL DRE PAD 2"X3"	3	PA
HYDROGEL DRE PAD 4"X5"	3	PA
HYDROGEL GAU PAD 2"X2"	3	
HYDROGEL GAU PAD 4"X4"	3	
HYDROGEL GAU PAD 4"X8"	3	
KERAGEL GEL WOUND	3	PA
KERAGELT GEL	3	PA
KERAMATRIX MIS 2X3CM	3	PA
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 FIBER MIS 100MG	3	PA
MIRO3D FIBER MIS 250MG	3	PA
MIRO3D FIBER MIS 500MG	3	PA
MIRO3D FIBER MIS 700MG	3	PA
MIRO3D WOUND PAD 2X2X2CM	3	PA
MIRO3D WOUND PAD 3X3X2CM	3	PA
MIRO3D WOUND PAD 4X4X2CM	3	PA
MIRO3D WOUND PAD 5X5X2CM	3	PA
MIRO3D WOUND PAD 7X5X2CM	3	PA
MIRO3D WOUND PAD 10X5X2CM	3	PA
MIRODRY MIS 3X3CM	3	PA
MIRODRY MIS 7X5CM	3	PA
MIRODRY MIS 10X5CM	3	PA
MIROTRACT MIS 3MMX5CM	3	PA
MIROTRACT MIS 3MMX9CM	3	PA

Drug Name	Drug Tier	Requirements/Limits
MIROTRACT MIS 5MMX5CM	3	PA
MIROTRACT MIS 5MMX9CM	3	PA
NORMLGEL AG GEL	3	PA
OCM WOUND MIS 1.6GM	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
RESTORE SILV PAD 6"X8"	3	PA
SILIGENTLE PAD 2"X2"	3	PA
SILIGENTLE PAD 6"X6"	3	PA
SILIGENTLE PAD AG 2"X2"	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	3	PA
VASHE WOUND SOL THERAPY	3	PA
VENELEX OIN	3	PA
XEROFORM OCL PAD 1X8"	3	PA
XEROFORM OCL PAD 4"X4"	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
ZANABIN GEL HYDROGEL	3	PA
ZENIFIBER AG PAD 2"X2"	3	PA
ZENIFIBER AG PAD 4"X5"	3	PA
ZENIFIBER AG PAD 6"X6"	3	PA
ZENIFIBER AG PAD 8"X8"	3	PA
ZENIFOAM AG PAD 2"X2"	3	PA
ZENIFOAM AG PAD 4"X5"	3	PA

DIAGNOSTIC PRODUCTS

Drug Name	Drug Tier	Requirements/Limits
DIAGNOSTIC DRUGS		
dipyridamole iv soln 5 mg/ml	1	
DIAGNOSTIC PRODUCTS, MISC.		
BREEZA ORAL SOL ABD/PELV	3	
BREEZA ORAL SOL CONTRAST	3	
DIAGNOSTIC TESTS		
ACCU-CHEK TES AVIVA PL	7	OTC; PV
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

Drug Name	Drug Tier	Requirements/Limits
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
CVS ADVANCED TES GLUCOSE	NC	OTC
CVS GLUCOSE TES STRIPS	NC	OTC
CVS TRUE MET 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

Drug Name	Drug Tier	Requirements/Limits
EZ SMART TES BLD GLUC	NC	OTC
FIFTY50 GLUC TES 2.0	NC	OTC
FORA ADVANCE TES PRO	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
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
GENULTIMATE 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 SHINE	NC	OTC
GLUCOCARD TES VITAL	NC	OTC
GLUCOCARD TES X-SENSOR	NC	OTC
GLUCOCOM TES	NC	OTC
GLUCONAVII TES STRIPS	NC	OTC
GMATE BLOOD TES GLUCOSE	NC	OTC
GOJJI BLOOD TES GLUCOSE	NC	OTC
GOJJI STRIPS MIS W/LANCET	NC	OTC
IHEALTH BLOO TES GLUCOSE	NC	OTC
IN TOUCH TES BLOOD	NC	OTC
INFINITY TES BLD GLUC	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
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
ON CALL TES EXPRESS	NC	OTC
ON CALL VIVD TES BLD GLUC	NC	OTC
ONETOUCH TES ULT BLUE	NC	OTC
ONETOUCH TES ULTRA	NC	OTC
ONETOUCH TES VERIO	NC	OTC
OPTIUM TES	NC	OTC
OPTIUMEZ TES	NC	OTC
OPTUMRX TES BLD GLUC	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 PLATN 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

Drug Name	Drug Tier	Requirements/Limits
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	7	OTC; PV
TRUETEST TES	NC	OTC
TRUETEST TES BLD GLUC	NC	OTC
TRUETRACK TES	NC	OTC
TRUETRACK TES BLD GLUC	NC	OTC
ULTIMA TES	NC	OTC
ULTRATRAK TES ULTIMATE	NC	OTC
ULTRATRK PRO TES	NC	OTC
UNISTRIPI TES GENERIC	NC	OTC
VOCAL POINT TES BLD GLUC	NC	OTC
XPRESS TES BLD GLUC	NC	OTC

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

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

DIURETIC COMBINATIONS

<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	PV
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	PV
<i>triamterene & 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	
FUROSEMIDE INJ 40MG/4ML	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>torsemide tab 5 mg</i>	1	
<i>torsemide tab 10 mg</i>	1	
<i>torsemide tab 20 mg</i>	1	
<i>torsemide tab 100 mg</i>	1	
OSMOTIC DIURETICS		
<i>mannitol iv soln 20%</i>	1	
<i>mannitol iv soln 25%</i>	1	
<i>osmitrol inj 10%</i>	1	
<i>osmitrol vfx inj 20%</i>	1	
POTASSIUM SPARING DIURETICS		
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	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<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
INZIRQO SUS 10MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
THALITONE TAB 15MG	3	PV

ENDOCRINE AND METABOLIC AGENTS - MISC.

ADRENAL STEROID INHIBITORS

ISTURISA TAB 1MG	NC	
ISTURISA TAB 5MG	NC	
ISTURISA TAB 10MG	NC	
RECORLEV TAB 150MG	NC	

BONE DENSITY REGULATORS

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
ATELVIA TAB	3	PV
BINOSTO TAB 70MG	3	PV
BONSITY INJ 560/2.24	NC	SP
<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 560/2.24	6	SP, PA, QL; PV
FOSAMAX + D TAB 70-2800	3	PV
FOSAMAX + D TAB 70-5600	3	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
JUBBONTI INJ 60MG/ML	NC	SP
MIACALCIN INJ 200/ML	NC	
MIACALCIN INJ 400/2ML	NC	
OSENVELT INJ 120/1.7	NC	SP
<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>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<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
STOBOCLO INJ 60MG/ML	NC	SP
TERIPARATIDE INJ 620/2.48	NC	
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	4	SP, PA, QL; PV
TYMLOS INJ	5	SP, PA, QL; PV
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
CORTICOTROPIN		
ACTHAR INJ 80UNIT	6	SP, PA, QL
ACTHAR INJ GEL	6	SP, PA, QL
CORTROPHIN INJ 80UNT/ML	6	SP, PA, QL
CORTICOTROPIN-RELEASING FACTOR (CRF) RECEPTOR ANTAGONISTS		
CRENESSITY CAP 50MG	6	SP, PA, QL
CRENESSITY CAP 100MG	6	SP, PA, QL
CRENESSITY SOL 50MG/ML	6	SP, PA, QL
FERTILITY REGULATORS		
CHOR GONADOT INJ 10000UNT	NC	SP
<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	SP
GONAL-F INJ 1050UNIT	NC	SP
GONAL-F RFF INJ 75UNIT	NC	SP
GONAL-F RFF INJ 300/0.5	NC	SP
GONAL-F RFF INJ 450/0.75	NC	SP
GONAL-F RFF INJ 900/1.5	NC	SP
MENOPUR INJ 75UNIT	5	SP, PA
NOVAREL INJ 5000UNIT	NC	SP
OVIDREL INJ	NC	SP
PREGNYL INJ 10000UNT	5	SP, PA, QL
GNRH/LHRH ANTAGONISTS		
<i>cetrorelix acetate for inj kit 0.25 mg</i>	4	SP, PA
<i>fyremadel sol 250/0.5</i>	NC	SP
GANIRELIX AC INJ 250/0.5	4	SP, PA

Drug Name	Drug Tier	Requirements/Limits
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	NC	SP
ORILISSA TAB 150MG	2	PA
ORILISSA TAB 200MG	2	PA
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ 10MG	NC	SP
SOMAVERT INJ 15MG	NC	SP
SOMAVERT INJ 20MG	NC	SP
SOMAVERT INJ 25MG	NC	SP
SOMAVERT INJ 30MG	NC	SP
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA SV INJ 2MG	6	SP, PA, QL
GROWTH HORMONES		
GENOTROPIN INJ 0.2MG	NC	SP
GENOTROPIN INJ 0.4MG	NC	SP
GENOTROPIN INJ 0.6MG	NC	SP
GENOTROPIN INJ 0.8MG	NC	SP
GENOTROPIN INJ 1.2MG	NC	SP
GENOTROPIN INJ 1.4MG	NC	SP
GENOTROPIN INJ 1.6MG	NC	SP
GENOTROPIN INJ 1.8MG	NC	SP
GENOTROPIN INJ 1MG	NC	SP
GENOTROPIN INJ 2MG	NC	SP
GENOTROPIN INJ 5MG	NC	SP
GENOTROPIN INJ 12MG	NC	SP
HUMATROPE INJ 6MG	5	SP, PA
HUMATROPE INJ 12MG	5	SP, PA
HUMATROPE INJ 24MG	5	SP, PA
NGENLA INJ 24/1.2ML	NC	SP
NGENLA INJ 60/1.2ML	NC	SP
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	SP
NUTROPIN AQ INJ 20MG/2ML	NC	SP
NUTROPIN AQ INJ NUSPIN 5	NC	SP
OMNITROPE INJ 5.8MG	NC	SP
OMNITROPE INJ 5/1.5ML	NC	SP
OMNITROPE INJ 10/1.5ML	NC	SP
SAIZEN INJ 5MG	NC	SP
SAIZEN INJ 8.8MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
SEROSTIM INJ 4MG	6	SP, PA
SEROSTIM INJ 5MG	6	SP, PA
SEROSTIM INJ 6MG	6	SP, PA
SKYTROFA INJ 3.6MG	NC	SP
SKYTROFA INJ 3MG	NC	SP
SKYTROFA INJ 4.3MG	NC	SP
SKYTROFA INJ 5.2MG	NC	SP
SKYTROFA INJ 6.3MG	NC	SP
SKYTROFA INJ 7.6MG	NC	SP
SKYTROFA INJ 9.1MG	NC	SP
SKYTROFA INJ 11MG	NC	SP
SKYTROFA INJ 13.3MG	NC	SP
SOGROYA INJ 5MG/1.5	5	SP, PA
SOGROYA INJ 10MG/1.5	5	SP, PA
SOGROYA INJ 15MG/1.5	5	SP, PA
ZOMACTON INJ 5MG	NC	SP
ZOMACTON INJ 10MG	NC	SP
HORMONE RECEPTOR MODULATORS		
EVISTA TAB 60MG	3	PV
OSPHENA TAB 60MG	NC	
<i>raloxifene hcl tab 60 mg</i>	0	ACA, PV
INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS		
TEPEZZA INJ 500MG	6	SP, PA
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX INJ 40MG/4ML	6	SP, PA
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
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
LUPRON DEPOT INJ 45MG	5	SP, PA, QL
SUPPRELIN LA KIT 50MG	5	SP, PA
SYNAREL SOL 2MG/ML	3	PA
TRIPTODUR SUS 22.5MG	5	SP, PA
MENOPAUSAL SYMPTOMS SUPPRESSANTS		
VEOZAH TAB 45MG	NC	SP
METABOLIC MODIFIERS		
ALDURAZYME INJ 2.9MG/5M	6	SP, PA
<i>betaine powder for oral solution</i>	4	SP, PA
BRINEURA KIT 150/5ML	NC	SP
BUPHENYL POW	NC	SP

Drug Name	Drug Tier	Requirements/Limits
BUPHENYL TAB 500MG	NC	SP
<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>	1	
CARBAGLU TAB 200MG	NC	SP
<i>carglumic acid soluble tab 200 mg</i>	4	SP, PA
CARNITOR INJ 1GM/5ML	3	
CARNITOR SF SOL 1GM/10ML	NC	SP
CARNITOR SOL 1GM/10ML	NC	SP
CARNITOR TAB 330MG	NC	SP
<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
CRYSVITA INJ 10MG/ML	6	SP, PA, QL
CRYSVITA INJ 20MG/ML	6	SP, PA, QL
CRYSVITA INJ 30MG/ML	6	SP, PA, QL
CYSTADANE POW	NC	SP
<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 5MG/2.5	5	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	SP
KUVAN POW 500MG	NC	SP
KUVAN TAB 100MG	NC	SP
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

Drug Name	Drug Tier	Requirements/Limits
NAGLAZYME INJ 1MG/ML	6	SP, PA
NEXVIAZYME INJ 100MG	5	SP, PA
<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
<i>nitisinone cap 20 mg</i>	4	SP, PA
NITYR TAB 2MG	NC	SP
NITYR TAB 5MG	NC	SP
NITYR TAB 10MG	NC	SP
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	SP
PALYNZIQ INJ 10/0.5ML	NC	SP
PALYNZIQ INJ 20MG/ML	NC	SP
<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	SP
PARSABIV INJ 5MG/ML	NC	SP
PARSABIV INJ 10MG/2ML	NC	SP
PHEBURANE MIS 483/GM	5	SP, PA, QL
RAVICTI LIQ 1.1GM/ML	NC	SP
RAYALDEE CAP 30MCG	3	
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 & sodium phenylacetate iv soln 10-10%</i>	1	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<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
TRYNGOLZA INJ 80MG/0.8	NC	SP
VIMIZIM INJ 5MG/5ML	6	SP, PA
VYKAT XR TAB 25MG	NC	SP
VYKAT XR TAB 75MG	NC	SP
VYKAT XR TAB 150MG	NC	SP
XENPOZYME INJ 4MG	6	SP, PA
XENPOZYME SOL 20MG	6	SP, PA
XPHOZAH TAB 20MG	NC	SP
XPHOZAH TAB 30MG	NC	SP
XURIDEN POW 2GM	6	SP, QL
ZEMPLAR CAP 1MCG	3	
ZEMPLAR CAP 2MCG	3	
ZEMPLAR INJ 2MCG/ML	3	
ZEMPLAR INJ 5MCG/ML	3	
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA
NATRIURETIC PEPTIDES		
VOXZOGO INJ 0.4MG	6	SP, PA, QL
VOXZOGO INJ 0.56MG	6	SP, PA, QL
VOXZOGO INJ 1.2MG	6	SP, PA, QL
POSTERIOR PITUITARY HORMONES		
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	
NOC DURNA SUB 27.7MCG	3	
NOC DURNA SUB 55.3MCG	3	
VASOPRE/NAACL INJ 100/100	NC	
VASOPRE/NAACL INJ 100/250	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	1	
VASOSTRICT INJ 20UNT/ML	3	
VASOSTRICT SOL 40UNIT	3	
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	
SOMATOSTATIC AGENTS		
<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	SP
<i>octreotide acetate for im inj kit 10 mg</i>	4	SP, PA, QL
<i>octreotide acetate for im inj kit 20 mg</i>	4	SP, PA, QL
<i>octreotide acetate for im inj kit 30 mg</i>	4	SP, PA, QL
<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
<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	SP
SANDOSTATIN KIT LAR 20MG	NC	SP
SANDOSTATIN KIT LAR 30MG	NC	SP
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	SP
SIGNIFOR LAR INJ 40MG	NC	SP
SIGNIFOR LAR INJ 60MG	NC	SP
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	SP
JYNARQUE PAK 30-15MG	NC	SP
JYNARQUE PAK 45-15MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
JYNARQUE PAK 60-30MG	NC	SP
JYNARQUE PAK 90-30MG	NC	SP
JYNARQUE TAB 15MG	NC	SP
JYNARQUE TAB 30MG	NC	SP
SAMSCA TAB 15MG	5	SP, PA
SAMSCA TAB 30MG	5	SP, PA
<i>tolvaptan tab 15 mg</i>	4	SP, PA
<i>tolvaptan tab 30 mg</i>	4	SP, PA
<i>tolvaptan tab therapy pack 15 mg</i>	4	SP, PA
<i>tolvaptan tab therapy pack 30 & 15 mg</i>	4	SP, PA
<i>tolvaptan tab therapy pack 45 & 15 mg</i>	4	SP, PA
<i>tolvaptan tab therapy pack 60 & 30 mg</i>	4	SP, PA
<i>tolvaptan tab therapy pack 90 & 30 mg</i>	4	SP, PA

ESTROGENS

ESTROGEN COMBINATIONS

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

ESTROGENS

ALORA DIS 0.1MG	3	
ALORA DIS 0.025MG	3	

Drug Name	Drug Tier	Requirements/Limits
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	
DEPO-ESTRADI INJ 5MG/ML	3	
DIVIGEL GEL 0.5MG	NC	
DIVIGEL GEL 0.25MG	NC	
DIVIGEL GEL 0.75MG	NC	
DIVIGEL GEL 1.25MG	NC	
DIVIGEL GEL 1MG/GM	NC	
<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%	NC	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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 10 mg/ml</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 0.06%	3	
EVAMIST SPR 1.53MG	NC	
<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	NC	
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	
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	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
<i>ofloxacin tab 400 mg</i>	1	

GASTROINTESTINAL AGENTS - MISC.

5-HT₄ RECEPTOR AGONISTS

MOTEGRITY TAB 1MG	NC	
MOTEGRITY TAB 2MG	NC	
<i>prucalopride succinate tab 1 mg (base equivalent)</i>	1	
<i>prucalopride succinate tab 2 mg (base equivalent)</i>	1	

AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)

TRULANCE TAB 3MG	3	PA

BILE ACID SYNTHESIS DISORDER AGENTS

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

FARNESOID X RECEPTOR (FXR) AGONISTS

OCALIVA TAB 5MG	NC	SP
OCALIVA TAB 10MG	NC	SP

GALLSTONE SOLUBILIZING AGENTS

<i>chenodal tab 250mg</i>	4	SP, PA
CTEXLI TAB 250MG	NC	SP
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	

GASTROINTESTINAL ANTIALLERGY AGENTS

<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
GASTROCROM CON 100/5ML	3	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
AMITIZA CAP 8MCG	NC	
AMITIZA CAP 24MCG	NC	
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
GASTROINTESTINAL STIMULANTS		
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	
HEPATOTROPICS		
REZDIFFRA TAB 60MG	NC	
REZDIFFRA TAB 80MG	NC	
REZDIFFRA TAB 100MG	NC	
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 200MCG	NC	SP
BYLVAY CAP 400MCG	NC	SP
BYLVAY CAP 600MCG	NC	SP
BYLVAY CAP 1200MCG	NC	SP
LIVMARLI SOL 9.5MG/ML	6	SP, PA, QL
LIVMARLI SOL 19MG/ML	6	SP, PA, QL
LIVMARLI TAB 10MG	NC	SP
LIVMARLI TAB 15MG	NC	SP
LIVMARLI TAB 30MG	NC	SP
INFLAMMATORY BOWEL AGENTS		
APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	NC	SP
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	
COLAZAL CAP 750MG	NC	

Drug Name	Drug Tier	Requirements/Limits
DELZICOL CAP 400MG	NC	
DIPENTUM CAP 250MG	3	
ENTYVIO INJ 300MG	NC	SP
ENTYVIO PEN INJ 108/0.68	NC	SP
INFLECTRA INJ 100MG	NC	SP
LIALDA TAB 1.2GM	NC	SP
<i>mesalamine cap dr 400 mg</i>	2	
<i>mesalamine cap er 24hr 0.375 gm</i>	2	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine rectal enema 4 gm & 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	SP
OMVOH INJ 300/15ML	NC	SP
OTULFI INJ 130/26ML	NC	SP
PENTASA CAP 250MG CR	NC	
PENTASA CAP 500MG CR	NC	
PYZCHIVA INJ 130/26ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis
REMICADE INJ 100MG	5	SP, PA, QL
RENFLEXIS INJ 100MG	NC	SP
ROWASA KIT 4GM	3	
SELARSDI INJ 130/26ML	NC	SP
SFROWASA ENE 4GM	3	
SKYRIZI INJ 180/1.2	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SKYRIZI INJ 360/2.4	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
SKYRIZI SOL 60MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis
STELARA INJ 5MG/ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, and Ulcerative Colitis

Drug Name	Drug Tier	Requirements/Limits
STEQEYMA INJ 130/26ML	NC	SP
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
TREMFYA CROH INJ 200/2ML	5	SP, PA, QL; Preferred for Ulcerative Colitis
TREMFYA INJ 200/2ML	5	SP, PA, QL; Preferred for Ulcerative Colitis
TREMFYA INJ 200/20ML	5	SP, PA, QL; Preferred for Ulcerative Colitis
USTEKIN-TTWE INJ 130/26ML	NC	SP
VELSIPITY TAB 2MG	5	SP, PA
WEZLANA INJ 130/26ML	NC	SP
YESINTEK INJ 130/26ML	5	SP, PA, QL; Preferred for Crohn's Disease, Psoriasis, Psoriatic Arthritis, Ulcerative Colitis
ZYMFENTRA INJ 120MG/ML	NC	SP
INTESTINAL ACIDIFIERS		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10/15ml</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>aloseptron hcl tab 0.5 mg (base equiv)</i>	2	
<i>aloseptron hcl tab 1 mg (base equiv)</i>	2	
IBSRELA TAB 50MG	NC	SP
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	
LIVE FECAL MICROBIOTA		
VOWST CAP	6	SP, PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
<i>alvimopan cap 12 mg</i>	1	
MOVANTIK TAB 12.5MG	2	PA
MOVANTIK TAB 25MG	2	PA
RELISTOR INJ 8/0.4ML	NC	
RELISTOR INJ 12/0.6ML	NC	
RELISTOR TAB 150MG	NC	

Drug Name	Drug Tier	Requirements/Limits
SYMPROIC TAB 0.2MG	2	PA
PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR(PPAR) AGONISTS		
IQIRVO TAB 80MG	5	SP, PA, QL
LIVDELZI CAP 10MG	NC	SP
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	3	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1	
calcium acetate (phosphate binder) tab 667 mg	1	
ferric citrate tab 1 gm (210 mg ferric iron)	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	
RENVELA POW 0.8GM	NC	SP
RENVELA POW 2.4GM	NC	SP
RENVELA TAB 800MG	NC	SP
sevelamer carbonate packet 0.8 gm	2	
sevelamer carbonate packet 2.4 gm	2	
sevelamer carbonate tab 800 mg	1	
sevelamer hcl tab 400 mg	1	
sevelamer hcl tab 800 mg	2	
VELPHORO CHW 500MG	NC	SP
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT 5MG	6	SP, PA, QL
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB 250MG	6	SP, PA, QL
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
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	

Drug Name	Drug Tier	Requirements/Limits
KETALAR INJ 10MG/ML	3	
KETALAR INJ 50MG/ML	3	
KETALAR INJ 100MG/ML	3	
<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	
KETAMINE INJ 50MG/5ML	3	
KETAMINE INJ 500/5ML	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>	1	
<i>propoven inj 500/50ml</i>	1	
BARBITURATE ANESTHETICS		
BREVITAL SOD INJ 500MG	3	
<i>methohexital sodium for inj 500 mg</i>	1	
VOLATILE ANESTHETICS		
<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	
GENITOURINARY AGENTS - MISCELLANEOUS		
ACIDIFIERS		
K-PHOS TAB NO 2	3	
ALKALINIZERS		
<i>cytra k gra crystals</i>	1	
ORACIT SOL	3	
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	2	
<i>potassium citrate & 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 & citric acid soln 500-334 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
UROCIT-K 10 TAB	2	
UROCIT-K 15 TAB	2	
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	5	SP, PA
CYSTAGON CAP 150MG	5	SP, PA
PROCYSBI CAP 25MG	6	SP, PA, QL
PROCYSBI CAP 75MG	6	SP, PA, QL
GENITOURINARY IRRIGANTS		
<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	
HYPEROXALURIA AGENTS		
OXLUMO INJ 94.5/0.5	NC	SP
RIVFLOZA INJ 80/0.5ML	NC	SP
RIVFLOZA INJ 128/0.8	NC	SP
RIVFLOZA INJ 160MG/ML	NC	SP
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP 100MG	NC	
RIMSO-50 SOL 50%	NC	
PROSTATIC HYPERTROPHY AGENTS		
<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	
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	

Drug Name	Drug Tier	Requirements/Limits
URINARY STONE AGENTS		
LITHOSTAT TAB 250MG	NC	
THIOLA EC TAB 100MG	NC	SP
THIOLA EC TAB 300MG	NC	SP
THIOLA TAB 100MG	NC	SP
<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
<i>venxxiva tab 100mg</i>	4	SP, PA
<i>venxxiva tab 300mg</i>	4	SP, PA
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
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	
HEMATOLOGICAL AGENTS - MISC.		
AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA		
GIVLAARI INJ 189MG/ML	NC	SP
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

Drug Name	Drug Tier	Requirements/Limits
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
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
ALHEMO INJ 60/1.5ML	NC	SP
ALHEMO INJ 150/1.5	NC	SP
ALHEMO INJ 300/3ML	NC	SP
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; PV
ALPROLIX INJ 500UNIT	5	SP, PA; PV
ALPROLIX INJ 1000UNIT	5	SP, PA; PV
ALPROLIX INJ 2000UNIT	5	SP, PA; PV
ALPROLIX INJ 3000UNIT	5	SP, PA; PV
ALPROLIX INJ 4000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 250 UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 250UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 500UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 1000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 2000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 3000UNIT	5	SP, PA; PV
ALTUVIIIIO INJ 4000UNIT	5	SP, PA; PV
BENEFIX INJ 250UNIT	5	SP, PA; PV
BENEFIX INJ 500UNIT	5	SP, PA; PV
BENEFIX INJ 1000UNIT	5	SP, PA; PV
BENEFIX INJ 2000UNIT	5	SP, PA; PV
BENEFIX INJ 3000UNIT	5	SP, PA; PV
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

Drug Name	Drug Tier	Requirements/Limits
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
ESPEROCT INJ 3000UNIT	5	SP, PA; PV
ESPEROCT INJ 4000IU	5	SP, PA; PV
FEIBA INJ	NC	SP
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	SP
IXINITY INJ 500UNIT	NC	SP
IXINITY INJ 1000UNIT	NC	SP
IXINITY INJ 1500UNIT	NC	SP
IXINITY INJ 2000UNIT	NC	SP
IXINITY INJ 3000UNIT	NC	SP
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
JIVI INJ 4000UNIT	5	SP, PA; PV
KOATE INJ 250UNIT	6	SP, PA; PV
KOATE INJ 500 UNIT	6	SP, PA; PV

Drug Name	Drug Tier	Requirements/Limits
KOATE INJ 1000UNIT	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
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; PV
NOVOSEVEN RT INJ 2MG	5	SP, PA; PV
NOVOSEVEN RT INJ 5MG	5	SP, PA; PV
NOVOSEVEN RT INJ 8MG	5	SP, PA; PV
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
QFITLIA INJ 20/0.2ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
QFITLIA INJ 50/0.5ML	NC	SP
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	SP
RIXUBIS INJ 500UNIT	NC	SP
RIXUBIS INJ 1000UNIT	NC	SP
RIXUBIS INJ 2000UNIT	NC	SP
RIXUBIS INJ 3000UNIT	NC	SP
SEVENFACT INJ 1MG	5	SP, PA; PV
SEVENFACT INJ 5MG	5	SP, PA; PV
SEVENFACT SOL 2MG	5	SP, PA; PV
TRETTEN INJ	6	SP, PA; PV
VONVENDI INJ 650UNIT	NC	SP
VONVENDI INJ 1300UNIT	NC	SP
WILATE INJ	5	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

BRADYKININ B2 RECEPTOR ANTAGONISTS

FIRAZYR INJ 30MG/3ML	NC	SP
<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

COMPLEMENT INHIBITORS

BERINERT INJ 500UNIT	NC	SP
BKEMV INJ 300/30ML	NC	SP
CINRYZE SOL 500 UNIT	NC	SP
EMPAVELI INJ 1080MG	5	SP, PA, QL
ENJAYMO SOL	NC	SP
FABHALTA CAP 200MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA INJ 2000UNIT	6	SP, PA, QL; PV
HAEGARDA INJ 3000UNIT	6	SP, PA, QL; PV
PIASKY INJ 340/2ML	NC	SP
RUCONEST INJ 2100UNIT	5	SP, PA, QL
SOLIRIS INJ 10MG/ML	NC	SP
TAVNEOS CAP 10MG	6	SP, PA, QL
ULTOMIRIS INJ 100MG/ML	NC	SP
ULTOMIRIS INJ 300/30ML	NC	SP
VEOPOZ INJ 400/2ML	6	SP, PA
VOYDEYA TAB 50-100MG	NC	SP
VOYDEYA TAB 100MG	NC	SP
ZILBRYSQ INJ 16.6MG	NC	SP
ZILBRYSQ INJ 23MG	NC	SP
ZILBRYSQ INJ 32.4MG	NC	SP
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	5	SP, PA, QL
TAVALISSE TAB 150MG	5	SP, PA, QL
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
HUMAN PROTEIN C		
CEPROTIN INJ 500 UNIT	6	SP
CEPROTIN INJ 1000UNIT	6	SP
PLASMA EXPANDERS		
<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	
PLASMA KALLIKREIN INHIBITORS		
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
PLASMA PROTEINS		
RYPLAZIM SOL 68.8MG	6	SP, PA
PLATELET AGGREGATION INHIBITORS		
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	

Drug Name	Drug Tier	Requirements/Limits
<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
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
<i>ticagrelor tab 60 mg</i>	1	PV
<i>ticagrelor tab 90 mg</i>	1	PV
<i>tirofiban hcl in nacl 0.9% iv soln 5 mg/100ml (base equiv)</i>	1	
<i>tirofiban hcl in nacl 0.9% iv soln 12.5 mg/250ml (base eq)</i>	1	
YOSPRALA TAB 81-40MG	NC	SP
YOSPRALA TAB 325-40MG	NC	SP
ZONTIVITY TAB 2.08MG	NC	SP

PROTAMINE

<i>protamine sulfate inj 10 mg/ml</i>	1	

PYRUVATE KINASE ACTIVATORS

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

THROMBOLYTIC AGENT - MISC

DEFITELIO INJ 200/2.5	NC	

Drug Name	Drug Tier	Requirements/Limits
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	SP
<i>miglustat cap 100 mg</i>	4	SP, PA, QL
<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
<i>glutamine (sickle cell) powd pack 5 gm</i>	4	SP, PA, QL
OXBRYTA TAB 500MG	NC	SP
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	
COBALAMINS		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	2	
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	1	
NASCOBAL SPR 500MCG	NC	
FOLIC ACID/FOLATES		
<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 400mcg</i>	0	OTC; ACA, PV
<i>folic acid tab 800mcg</i>	0	OTC; ACA, PV
<i>ft folic aci tab 400mcg</i>	0	OTC; ACA, PV
<i>yl folic aci tab 400mcg</i>	0	OTC; ACA, PV
HEMATOPOIETIC GROWTH FACTORS		
ALVAIZ TAB 9MG	NC	SP
ALVAIZ TAB 18MG	NC	SP

Drug Name	Drug Tier	Requirements/Limits
ALVAIZ TAB 36MG	NC	SP
ALVAIZ TAB 54MG	NC	SP
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
<i>eltrombopag olamine powder pack for susp 12.5 mg (base eq)</i>	4	SP, PA, QL
<i>eltrombopag olamine powder pack for susp 25 mg (base equiv)</i>	4	SP, PA, QL
<i>eltrombopag olamine tab 12.5 mg (base equiv)</i>	4	SP, PA, QL
<i>eltrombopag olamine tab 25 mg (base equiv)</i>	4	SP, PA, QL
<i>eltrombopag olamine tab 50 mg (base equiv)</i>	4	SP, PA, QL
<i>eltrombopag olamine tab 75 mg (base equiv)</i>	4	SP, PA, QL
EPOGEN INJ 2000/ML	NC	SP
EPOGEN INJ 3000/ML	NC	SP
EPOGEN INJ 4000/ML	NC	SP
EPOGEN INJ 10000/ML	NC	SP
EPOGEN INJ 20000/ML	NC	SP
FULPHILA INJ 6/0.6ML	NC	SP
FYLNETRA INJ 6MG/0.6	5	SP, PA, QL
GRANIX INJ 300/0.5	NC	SP
GRANIX INJ 300/1ML	NC	SP
GRANIX INJ 480/0.8	NC	SP
GRANIX INJ 480/1.6	NC	SP
LEUKINE INJ 250MCG	NC	SP
MIRCERA INJ 30MCG	NC	SP
MIRCERA INJ 50MCG	NC	SP
MIRCERA INJ 75MCG	NC	SP
MIRCERA INJ 100MCG	NC	SP
MIRCERA INJ 150MCG	NC	SP
MIRCERA INJ 200MCG	NC	SP
MULPLETA TAB 3MG	6	SP, PA, QL
NEULASTA INJ 6MG/0.6M	NC	SP
NEULASTA KIT 6MG/0.6M	NC	SP
NEUPOGEN INJ 300/0.5	NC	SP
NEUPOGEN INJ 300/ML	NC	SP

Drug Name	Drug Tier	Requirements/Limits
NEUPOGEN INJ 300MCG	NC	SP
NEUPOGEN INJ 480/0.8	NC	SP
NEUPOGEN INJ 480/1.6	NC	SP
NEUPOGEN INJ 480MCG	NC	SP
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	SP
NPLATE INJ 250MCG	NC	SP
NPLATE INJ 500MCG	NC	SP
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 POW 12.5MG	5	SP, PA, QL
PROMACTA POW 25MG	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	SP
REBLOZYL INJ 75MG	NC	SP
RELEUKO INJ 300MCG	NC	SP
RELEUKO INJ 480MCG	NC	SP
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	SP
UDENYCA INJ 6MG/.6ML	NC	SP
UDENYCA ONBO INJ 6/0.6ML	NC	SP
VAFSEO TAB 150MG	NC	SP
VAFSEO TAB 300MG	NC	SP
ZARXIO INJ 300/0.5	NC	SP
ZARXIO INJ 480/0.8	NC	SP
HEMATOPOIETIC MIXTURES		
ACTIVE FE TAB 75-1.25	3	

Drug Name	Drug Tier	Requirements/Limits
CORVITE 150 TAB	3	
CORVITE FE TAB	3	
<i>ferottrinsic cap</i>	1	
<i>foltrin cap</i>	1	
FUSION PAK SPRINKLE	NC	SP
FUSION PLUS CAP	3	
HEMATINIC/FA TAB	3	
ICAR-C PLUS TAB	3	
<i>k-tan plus cap</i>	1	
MULTIGEN PLS TAB	3	
MULTIGEN TAB	3	
MULTIGEN TAB FOLIC	3	
<i>tandem plus cap</i>	1	
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>ferumoxitol inj 510 mg/17ml (30 mg/ml) (elemental fe)</i>	2	
INFED INJ 50MG/ML	3	
INJECTAFER INJ 100/2ML	3	
INJECTAFER INJ 750/15ML	3	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	1	
VENOFER INJ 20MG/ML	3	

STEM CELL MOBILIZERS

MOZOBIL INJ	6	SP, PA
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	4	SP, PA
XOLREMDI CAP 100MG	NC	SP

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	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	1	
<i>tranexamic acid tab 650 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
HEMOSTATICS - TOPICAL		
ARTISS SOL 2ML	3	
ARTISS SOL 4ML	3	
ARTISS SOL 10ML	3	
RECOTHROM SOL 5000UNIT	3	
RECOTHROM SOL 20000UNT	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	
TISSEEL SOL 10ML	3	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<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	
HYPNOTICS - TRICYCLIC AGENTS		
<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	
NON-BARBITURATE HYPNOTICS		
AMBIEN CR TAB 6.25MG	3	PA, QL

Drug Name	Drug Tier	Requirements/Limits
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	
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
<i>eszopiclone tab 3 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/NACL SOL 5MG/5ML	NC	
<i>midazolam 100 mg/100ml-sodium chloride 0.9% iv soln</i>	1	
<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>	1	
MIDAZOLAM INJ 2MG/2ML	3	

Drug Name	Drug Tier	Requirements/Limits
MIDAZOLAM INJ 5MG/5ML	3	
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
<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	NC	
DAYVIGO TAB 10MG	NC	
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

Drug Name	Drug Tier	Requirements/Limits
LAXATIVE COMBINATIONS		
CLENPIQ SOL	0	ACA, PV
<i>gavilyte-c sol</i>	2	PV
<i>gavilyte-g sol</i>	2	PV
<i>gavilyte-n sol flav pk</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	
<i>kristalose pak 10gm</i>	1	
<i>kristalose pak 20gm</i>	1	
<i>lactulose oral crystal packet 20 gm</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	
VIBRANT CAP	3	PA
VIBRANT KIT STARTER	3	PA
LUBRICANT LAXATIVES		
<i>mineral oil</i>	1	
SALINE LAXATIVES		
OSMOPREP TAB 1.5GM	NC	
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETIC COMBINATIONS		
<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	
BUPIVACAINE/ INJ EPI 0.5%	3	
BUPIVACAINE/ INJ EPI 0.25	3	
LIDO/TETRA INJ 0.4-0.2%	3	

Drug Name	Drug Tier	Requirements/Limits
<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 (pf)</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:200000 (pf)</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	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	

LOCAL ANESTHETICS - AMIDES

<i>bupivacaine 0.75% in dextrose inj 8.25%</i>	1	
<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	
<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>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
LIDOCAINE INJ 1%	3	
LIDOCAINE INJ 2%	3	
LIDOCAINE INJ 100/5ML	3	PA
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	
<i>sensorcaine inj 0.5%</i>	1	
<i>sensorcaine inj 0.25%</i>	1	
<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

Drug Name	Drug Tier	Requirements/Limits
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 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	
E.E.S. GRAN SUS 200/5ML	NC	
ERYPED SUS 200/5ML	NC	
ERYPED SUS 400/5ML	NC	
<i>erythrocin inj 500mg</i>	1	
ERYTHROCIN INJ 500MG	3	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</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	

Drug Name	Drug Tier	Requirements/Limits
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 EXTRA MIS SENSITIV	0	OTC; ACA, PV
DUREX MIS REALFEEL	0	OTC; ACA, PV
DUREX MIS TROPICAL	0	OTC; ACA, PV
FANTASY LUBR MIS	0	OTC; ACA, PV
FANTASY LUBR MIS COLORS	0	OTC; ACA, PV
FANTASY LUBR MIS SPERMICI	0	OTC; ACA, PV
FANTASY MIS LUBRICAT	0	OTC; ACA, PV
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, PV
KIMONO MAXX MIS LG FLARE	0	OTC; ACA, PV
KIMONO MICRO MIS THIN	0	OTC; ACA, PV
KIMONO MICRO MIS THIN +	0	OTC; ACA, PV
KIMONO MICRO MIS THIN PLS	0	OTC; ACA, PV
KIMONO MIS LUBRICAT	0	OTC; ACA, PV
KIMONO MIS SENSATIO	0	OTC; ACA, PV
KIMONO PLUS MIS LUBRICAT	0	OTC; ACA, PV
KIMONO PLUS MIS SPERMICI	0	OTC; ACA, PV
KIMONO PS MIS LUBRICAT	0	OTC; ACA, PV
KIMONO PS MIS PLUS	0	OTC; ACA, PV
KIMONO SENSE MIS PLUS	0	OTC; ACA, PV
KIMONO SPEC MIS	0	OTC; ACA, PV
MAXX MIS LUBRICAT	0	OTC; ACA, PV
MAXX PLUS MIS SPERMICI	0	OTC; ACA, PV
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
TROJAN MAGN MIS	0	OTC; ACA
TROJAN MIS ENZ	0	OTC; ACA
TROJAN ULTRA MIS RIBBED	0	OTC; ACA

Drug Name	Drug Tier	Requirements/Limits
TROJAN ULTRA MIS THIN	0	OTC; ACA
TROJAN-ENZ MIS LUBRICAT	0	OTC; ACA
TROJAN-ENZ MIS W/SPERMI	0	OTC; ACA
TRUE COVER MIS CONDOM	0	OTC; ACA, PV
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
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		
ACCU-CHEK KIT FASTCLIX	7	OTC; PV
ACCU-CHEK KIT SOFTCLIX	7	OTC; PV
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 21G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
ADVCATE SAFE MIS LANC 23G	3	OTC; PV
ADVCATE SAFE MIS LANC 26G	3	OTC; PV
ADVCATE SAFE MIS LANC 28G	3	OTC; PV
ADVOCATE MIS LANC 30G	3	OTC; PV
ADVOCATE MIS LANCETS	3	OTC; PV
AGAMATRIX MIS 33G	3	OTC; PV
AIMSCO TWIST MIS 32G	3	OTC; PV
AIMSCO TWIST 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 28G	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 II KIT CLINISAF	3	OTC; PV
AUTOLET LITE KIT	3	OTC; PV
AUTOLET LITE KIT CLINISAF	3	OTC; PV
AUTOLET LITE KIT STARTER	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 LANC 26G	3	OTC; PV
CARETOUCH MIS LANC 28G	3	OTC; PV
CARETOUCH MIS LANC 30G	3	OTC; PV
CARETOUCH MIS TWIST 28	3	OTC; PV
CARETOUCH MIS TWIST 30	3	OTC; PV
CARETOUCH MIS TWIST 33	3	OTC; PV
CGMS CABLE MIS	NC	
CGMS MIS SOFTWARE	NC	
CLEANLET 28G MIS LANCETS	3	OTC; PV
CLEVER CHECK MIS	3	OTC; PV
CLEVER CHECK MIS 30G	3	OTC; PV
COAGUCHEK MIS LANCETS	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
COMFORT ASSU MIS LANC 28G	3	OTC; PV
COMFORT ASSU MIS LANC 33G	3	OTC; PV
COMFORT EZ MIS 21G	3	OTC; PV
COMFORT EZ MIS 23G	3	OTC; PV
COMFORT EZ MIS 28G	3	OTC; PV
COMFORT TCH MIS LANC 28G	3	OTC; PV
COMFORT TCH MIS LANC 30G	3	OTC; PV
COMFORT TCH MIS LANC 31G	3	OTC; PV
COMFORTOUCH MIS LANCET	3	OTC; PV
CVS LANCETS MIS ORIGINAL	3	OTC; PV
CVS LANCETS MIS THIN 26G	3	OTC; PV
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 LANCETS	3	OTC; PV
DIATHRIVE MIS UT 30G	3	OTC; PV
DROPLET LANC MIS 30G	3	OTC; PV
DROPLET PERS MIS LANC 30G	3	OTC; PV
EASY COMFORT MIS 30G	3	OTC; PV
EASY COMFORT MIS LANC/30G	3	OTC; PV
EASY COMFORT MIS TWIST	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 P-AC/21G	3	OTC; PV
EASY TOUCH MIS P-AC/23G	3	OTC; PV
EASY TOUCH MIS P-AC/26G	3	OTC; PV
EASY TOUCH MIS P-AC/28G	3	OTC; PV
EASY TOUCH MIS P-AC/30G	3	OTC; PV
EASY TOUCH MIS TWST/28G	3	OTC; PV
EASY TOUCH MIS TWST/30G	3	OTC; PV
EASY TOUCH MIS TWST/32G	3	OTC; PV
EASY TOUCH MIS TWST/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	
ENLITE MIS SERTER	3	PV

Drug Name	Drug Tier	Requirements/Limits
EVERSENSE365 MIS SENSOR	NC	
EVERSENSE365 MIS TRANSMTR	NC	
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
FREE LIBRE2 KIT PLUS/SEN	NC	
FREESTY LIBR KIT 2 SENSOR	NC	
FREESTY LIBR KIT 3 SENSOR	NC	
FREESTY LIBR KIT SENSOR	NC	
FREESTY LIBR MIS 2 READER	NC	
FREESTY LIBR MIS 3 READER	NC	
FREESTY LIBR MIS READER	NC	
FREESTYLE KIT SENSOR	NC	
FREESTYLE MIS LANCETS	3	OTC; PV
FREESTYLE MIS READER	NC	
GENTEEL MIS LANCETS	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 28G	3	OTC; PV
GNP LANCETS MIS 30G	3	OTC; PV
GNP LANCETS MIS 33G	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	
GUARDIAN RT MIS CHARGER	NC	
GUARDIAN RT MIS REPL PED	NC	
GUARDIAN RT MIS REPLACE	NC	

Drug Name	Drug Tier	Requirements/Limits
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 DEVIC MIS 30G	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 26G	3	OTC; PV
LANCETS MIS 28G	3	OTC; PV
LANCETS MIS 28G THIN	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 SUPR MIS THIN 28G	3	OTC; PV
LANCETS THIN MIS	3	OTC; PV
LANCETS ULTR MIS THIN	3	OTC; PV
LANCETS ULTR MIS THIN 31G	3	OTC; PV
LITE TOUCH MIS LANCETS	3	OTC; PV
LITETOUCH MIS LANCETS	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

Drug Name	Drug Tier	Requirements/Limits
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 MIS LANCETS	3	OTC; PV
MICROLET MIS LANCETS	3	OTC; PV
MINILINK RT MIS TRANSMIT	NC	
MM TWIST MIS LANCETS	3	OTC; PV
MOBILE LANCE MIS 30G	3	OTC; PV
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 DX KIT INT G7G6	2	PV
OMNIPOD 5 DX MIS POD G7G6	2	PV
OMNIPOD 5 LB KIT INTRO G6	2	PV
OMNIPOD 5 LB MIS PODS G6	2	PV
OMNIPOD DASH KIT INTRO	2	PV
OMNIPOD DASH KIT PDM	2	PV
OMNIPOD DASH MIS PODS	2	PV
ON-THE-GO MIS LANC 30G	3	OTC; PV
ONETOUCH DEL MIS LANC DEV	NC	OTC
ONETOUCH DEL MIS PLUS 30G	NC	OTC
ONETOUCH DEL MIS PLUS 33G	NC	OTC
ONETOUCH US MIS 2 30G	NC	OTC
PARADIGM REA MIS TRANSMIT	NC	
PERFECT 28G MIS LANCETS	3	OTC; PV
PERFECT 30G MIS LANCETS	3	OTC; PV
PIP LANCETS MIS 28G	3	OTC; PV
PIP LANCETS MIS 30G	3	OTC; PV
PRO COMFORT MIS 31G	3	OTC; PV
PRO COMFORT MIS LANC 30G	3	OTC; PV
PRO COMFORT MIS LANCETS	3	OTC; PV
PRODIGY MIS 26G	3	OTC; PV
PRODIGY MIS 28G	3	OTC; PV
PURE COMFORT MIS 30G LAN	3	OTC; PV
PX LANCETS MIS 28G	3	OTC; PV
PX LANCETS MIS 33G	3	OTC; PV
QC LANCETS MIS 28G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
QC LANCETS MIS 30G	3	OTC; PV
READYLANC MIS 21G	3	OTC; PV
READYLANC MIS 23G	3	OTC; PV
READYLANC MIS 26G	3	OTC; PV
READYLANC MIS 28G	3	OTC; PV
READYLANC MIS 30G	3	OTC; PV
REAL-TIME KIT	NC	
REALITY MIS LANCETS	3	OTC; PV
REALITY TRIG MIS LANCETS	3	OTC; PV
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 30G	3	OTC; PV
RIGHTTEST ALT MIS ADAPTOR	3	OTC; PV
RIGHTTEST MIS GL300	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 23G MIS LANCETS	3	OTC; PV
SAFETY 28G MIS LANCETS	3	OTC; PV
SAFETY 30G MIS LANCETS	3	OTC; PV
SAFETY MIS LANCETS	3	OTC; PV
SAPS HEALTH MIS TWIST	3	OTC; PV
SAPS TWIST MIS 30G	3	OTC; PV
SAPSCARE MIS TWIST	3	OTC; PV
SB LANCETS MIS THIN	3	OTC; PV
SB LANCETS MIS ULTR THN	3	OTC; PV
SIMPLERA MIS SENSOR	NC	
SIMPLERA MIS SYNC SEN	NC	
SIMPLERA MIS SYSTEM	NC	
SINGLE-LET MIS 23G	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 LANCETS	3	OTC; PV
SURE COMFORT MIS LANC 18G	3	OTC; PV
SURE COMFORT MIS LANC 21G	3	OTC; PV
SURE COMFORT MIS LANC 23G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
SURE COMFORT MIS LANC 30G	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
TRAVEL LANCE MIS ADV 28G	3	OTC; PV
TRUE COMFORT MIS LANC 30G	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
TWIST KIT REFILL	2	PV
TWIST KIT STARTER	2	PV
TWIST REFIL KIT INFUSION	2	PV
TWIST LANCET MIS 30G	3	OTC; PV
TWIST LANCET MIS 30G MULT	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
ULTILET SAFE MIS 21G	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 LAN 31G	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
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

Drug Name	Drug Tier	Requirements/Limits
UNILET LANCT MIS 30G	3	OTC; PV
UNILET LANCT MIS 33G	3	OTC; PV
UNILET MICRO 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 PRO MIS LANC 21G	3	OTC; PV
UNISTIK PRO MIS LANC 28G	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
UNITSTIK PRO MIS LANC 25G	3	OTC; PV
V-GO 20 KIT	NC	
V-GO 30 KIT	NC	
V-GO 40 KIT	NC	
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
VERIFINE MIS UNIV 28G	3	OTC; PV
VERIFINE MIS UNIV 30G	3	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
VERIFINE MIS UNIV 33G	3	OTC; PV
VIVAGUARD MIS 28G	3	OTC; PV
VIVAGUARD MIS 30G	3	OTC; PV
ZEVRX TWIST MIS LANC 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
EASY COMFORT MIS 29GX5MM	NC	OTC
EASY GLIDE MIS 1ML SYR	NC	OTC
EASY GLIDE MIS 3ML SYR	NC	OTC
EASY TOUCH MIS 29GX1/2"	NC	OTC
EMBECTA AUTO MIS DUO	7	OTC; PV
EMBECTA NANO MIS 32GX4MM	7	OTC; PV
EMBECTA UF MIS 29GX12.7	7	OTC; PV
EMBECTA UF MIS 31GX5MM	7	OTC; PV
EMBECTA UF MIS 31GX8MM	7	OTC; PV
EMBECTA UF MIS 32GX6MM	7	OTC; PV
INCONTROL MIS 29GX12MM	NC	OTC
INS SY 0.3ML MIS 31GX5/16	NC	OTC
INS SY 0.5ML MIS 30GX1/2"	NC	OTC
INS SY 1/2ML MIS 30GX1/2"	NC	OTC
INS SYR 1ML MIS 30GX1/2"	NC	OTC
INS SYR 1ML MIS 31GX5/16	NC	OTC
INS SYR U500 MIS 0.5/31G	7	PV
INS SYR U500 MIS 31GX6MM	7	PV
INSULIN SRYG MIS 1ML/32G	NC	OTC
INSULIN SYR MIS BARR 1ML	NC	OTC
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 0.5/32G	NC	OTC
INSULIN SYRG MIS 1ML	7	OTC; PV
INSULIN SYRG MIS 1ML/27G	7	OTC; PV
INSULIN SYRG MIS 1ML/28G	7	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
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
INSULIN SYRG MIS 29GX12MM	NC	OTC
INSULIN SYRG MIS 31GX8MM	NC	OTC
INSUPEN MIS 29GX12MM	NC	OTC
LUER-LOK SYR MIS 1ML/20G	7	OTC; PV
MM PENTIPS MIS 29GX12MM	NC	
PEN NEEDLE MIS 31GX4MM	NC	OTC
PEN NEEDLE MIS 31GX5MM	NC	OTC
PEN NEEDLE MIS 32GX5MM	NC	OTC
PEN NEEDLES MIS 29GX1/2"	NC	OTC
PEN NEEDLES MIS 29GX12MM	NC	OTC
PEN NEEDLES MIS 30GX5/16	NC	OTC
PEN NEEDLES MIS 31GX1/4"	NC	OTC
PEN NEEDLES MIS 31GX5/16	NC	OTC
PEN NEEDLES MIS 33GX5/32	NC	OTC
PENTIPS MIS 29GX12MM	NC	
PENTIPS MIS 29GX12MM	NC	OTC
SECURESAFE MIS 0.5/29G	NC	OTC
SECURESAFE MIS 29GX1/2"	NC	OTC
ULTIGUARD MIS 31GX5MM	NC	OTC
ULTIGUARD MIS 31GX6MM	NC	OTC
ULTIGUARD MIS 31GX8MM	NC	OTC
ULTIGUARD MIS 32GX4MM	NC	OTC
ULTIGUARD MIS 32GX6MM	NC	OTC
UNIFINE PNTF MIS 29GX12MM	NC	OTC
UNIFINE SAFE MIS 32GX4MM	NC	OTC
VERIFINE PEN MIS 32GX4MM	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
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

Drug Name	Drug Tier	Requirements/Limits
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	
MIGRAINE COMBINATIONS		
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	
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	NC	
ERGOMAR SUB 2MG	3	
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POW 50MG	NC	
<i>diclofenac potassium (migraine) packet 50 mg</i>	NC	
SEROTONIN AGONISTS		
<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	
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	ST, PA, QL
RELPAK TAB 20MG	3	PA, QL
RELPAK TAB 40MG	3	PA, QL

Drug Name	Drug Tier	Requirements/Limits
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>	1	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>	1	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>	1	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	ST, 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 2.5MG	3	PA, QL
ZOMIG SPR 5MG	2	PA, QL
<i>zomig tab 2.5mg</i>	1	PA, QL
<i>zomig tab 5mg</i>	1	PA, QL

MINERALS & ELECTROLYTES

BICARBONATES

SOD ACETATE INJ 2MEQ/ML	3	
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	

Drug Name	Drug Tier	Requirements/Limits
sodium bicarbonate iv soln 7.5%	1	
sodium bicarbonate iv soln 8.4%	1	
THAM INJ 30MEQ	3	
tromethamine iv soln 30 meq/100 ml (0.3 m)	1	
CALCIUM		
CALCIFOL WAF	3	
CALCIUM CHLO INJ 10%	3	
calcium chloride inj 10%	1	
CALCIUM GLUC INJ 10%	3	
CALCIUM GLUC INJ 100MG/ML	3	
calcium gluconate inj 10%	1	
ELECTROLYTE MIXTURES		
D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.3%	3	
D10W/NACL INJ 0.2%	3	
dextrose 2.5% w/ sodium chloride 0.45%	1	
dextrose 5% in lactated ringers	1	
dextrose 5% w/ sodium chloride 0.2%	1	
dextrose 5% w/ sodium chloride 0.3%	1	
dextrose 5% w/ sodium chloride 0.9%	1	
dextrose 5% w/ sodium chloride 0.33%	1	
dextrose 5% w/ sodium chloride 0.45%	1	
dextrose 5% w/ sodium chloride 0.225%	1	
dextrose 10% w/ sodium chloride 0.45%	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	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.225% inj	1	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	1	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	1	

Drug Name	Drug Tier	Requirements/Limits
<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% 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/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	3	
<i>lactated ringer's solution</i>	1	
<i>mult electro inj ph 5.5</i>	1	
<i>mult electro inj ph 7.4</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/NACL INJ 20MEQ/L	3	
POT CHL/NACL 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	
FLUORIDE		
FLORIVA DRO 0.25MG	3	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
IODINE PRODUCTS		
<i>iodine solution strong 5% (lugol's)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM		
MAGNESIUM SU INJ 2GM/50ML	3	
MAGNESIUM SU INJ 4G/100ML	3	
MAGNESIUM SU INJ 20/500ML	3	
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	
MANGANESE		
<i>manganese chloride inj 0.1 mg/ml</i>	1	
PHOSPHATE		
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 & 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>	1	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
sodium phosphates inj 150 mm/50ml (phos)	1	
200 meq/50ml (na)		
wes-phos 250 tab neutral	1	
POTASSIUM		
EFFER-K TAB 10MEQ	3	
EFFER-K TAB 20MEQ	3	
effer-k tab 25meq ef	1	
k-prime tab 25meq ef	1	
klor-con 8 tab 8meq er	1	
klor-con 10 tab 10meq er	1	
klor-con m10 tab 10meq er	1	
klor-con m15 tab 15meq er	1	
klor-con m20 tab 20meq er	1	
klor-con pak 20meq	1	
klor-con/ef tab 25meq	1	
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
potassium acetate inj 2 meq/ml	1	
potassium chloride cap er 8 meq	1	
potassium chloride cap er 10 meq	1	
potassium chloride inj 2 meq/ml	1	
potassium chloride inj 10 meq/50ml	1	
potassium chloride inj 10 meq/100ml	1	
potassium chloride inj 20 meq/50ml	1	
potassium chloride inj 20 meq/100ml	1	
potassium chloride inj 40 meq/100ml	1	
potassium chloride microencapsulated crys er tab 10 meq	1	
potassium chloride microencapsulated crys er tab 15 meq	1	
potassium chloride microencapsulated crys er tab 20 meq	1	
potassium chloride oral soln 10% (20 meq/15ml)	1	
potassium chloride oral soln 20% (40 meq/15ml)	1	
potassium chloride powder packet 20 meq	1	
potassium chloride tab er 8 meq (600 mg)	1	
potassium chloride tab er 10 meq	1	
potassium chloride tab er 15 meq	1	
potassium chloride tab er 20 meq (1500 mg)	1	
POTASSIUM INJ 100MEQ	3	

Drug Name	Drug Tier	Requirements/Limits
SODIUM		
SODIUM CHLOR SOL 0.9%	3	
<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	
<i>sodium chloride iv soln 4 meq/ml (23.4%)</i>	1	
<i>sodium chloride iv soln 5%</i>	1	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	1	
TRACE MINERALS		
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	1	
CHROMIUM CL INJ 4MCG/ML	3	
COPPER INJ 0.4MG/ML	3	
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	1	
MULTRYIS INJ	3	
SELENIOUS AC SOL 12MCG/2M	3	
<i>selenious acid inj 40 mcg/ml</i>	1	
ZINC		
GALZIN CAP 25MG	3	
GALZIN CAP 50MG	3	
ZINC CHLORID INJ 1MG/ML	3	
<i>zinc chloride inj 1 mg/ml</i>	1	
<i>zinc sulfate inj 1 mg/ml</i>	1	
ZINC SULFATE INJ 1MG/ML	3	
<i>zinc sulfate inj 3 mg/ml</i>	1	
ZINC SULFATE INJ 3MG/ML	3	
<i>zinc sulfate inj 5 mg/ml</i>	1	
ZINC SULFATE INJ 5MG/ML	3	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
CUPRIMINE CAP 250MG	NC	SP
CUVRIOR TAB 300MG	NC	SP
DEPEN TITRA TAB 250MG	6	SP
EDETATE DISO INJ 150MG/ML	3	
<i>penicillamine cap 250 mg</i>	4	SP
<i>penicillamine tab 250 mg</i>	4	SP
SYPRINE CAP 250MG	NC	SP
<i>trientine hcl cap 250 mg</i>	4	SP
CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS		
PRISMASOL SOL 0/0/1.2	3	
PRISMASOL SOL 0/2.5	3	

Drug Name	Drug Tier	Requirements/Limits
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	
ENZYMES		
HYLENEX INJ 150 UNIT	3	
XIAFLEX INJ 0.9MG	3	SP, PA
IMMUNOMODULATORS		
IMAAVY INJ 1200/6.5	NC	SP
JOENJA TAB 70MG	NC	SP
<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
NIKTIMVO INJ 9/0.18ML	NC	SP
NIKTIMVO INJ 22/0.44	NC	SP
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	SP
RYSTIGGO INJ 280/2ML	6	SP, PA, QL
RYSTIGGO INJ 420/3ML	6	SP, PA, QL
RYSTIGGO INJ 560/4ML	6	SP, PA, QL
RYSTIGGO INJ 840/6ML	6	SP, PA, QL
THALOMID CAP 50MG	5	SP, PA, QL
THALOMID CAP 100MG	5	SP, PA, QL
VYVGART INJ 400/20ML	5	SP, PA, QL
VYVGART INJ HYTRULO	5	SP, PA, QL
IMMUNOSUPPRESSIVE AGENTS		
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>	1	

Drug Name	Drug Tier	Requirements/Limits
AZATHIOPRINE INJ 100MG	NC	SP
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	2	
<i>azathioprine tab 100 mg</i>	1	
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 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
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

Drug Name	Drug Tier	Requirements/Limits
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
SANDIMMUNE CAP 25MG	2	SP; PV
SANDIMMUNE CAP 100MG	2	SP; PV
SANDIMMUNE INJ 50MG/ML	2	SP; PV
SIMULECT INJ 10MG	2	
SIMULECT INJ 20MG	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	SP; PV
<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	SP
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
IRRIGATION SOLUTIONS		
<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>water for irrigation, sterile irrigation soln</i>	1	
LYMPHATIC AGENTS		
SYLVANT SOL 100MG	3	SP, PA
SYLVANT SOL 400MG	3	SP, PA
MISC NATURAL PRODUCTS		
IMUBOLIC CAP	NC	
MISCELLANEOUS THERAPEUTIC CLASSES		
NEXAVIR INJ	3	
PATIENT ASSESSMENT SERVICES		
EUA PATIENT MIS ASSESS	3	PA
PERITONEAL DIALYSIS SOLUTIONS		
DELFLEX-LC SOL 1.5% DEX	3	
DELFLEX-LC/ SOL 2.5% DEX	3	
DELFLEX-LC/ SOL 4.25 DEX	3	

Drug Name	Drug Tier	Requirements/Limits
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	
ULTRABAG/PD2 SOL DIANEAL	3	
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS		
VIJOICE TAB 50MG	NC	SP
VIJOICE TAB 125MG	NC	SP
VIJOICE TAB 250MG	NC	SP
POTASSIUM REMOVING AGENTS		
LOKELMA PAK 5GM	NC	
LOKELMA PAK 10GM	NC	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sps sus 15gm/60</i>	2	
<i>sps sus 30gm/120</i>	2	
VELTASSA POW 1GM	2	
VELTASSA POW 8.4GM	2	
VELTASSA POW 16.8GM	2	
VELTASSA POW 25.2GM	2	
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP 50MG	6	SP, PA, QL
ZOKINVY CAP 75MG	6	SP, PA, QL
SCLEROSING AGENTS		
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
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 120MG	6	SP, PA, QL
BENLYSTA INJ 200MG/ML	6	SP, PA, QL
BENLYSTA INJ 400MG	6	SP, PA, QL
UREMIC PRURITUS AGENTS		
KORSUVA INJ 50MCG/ML	NC	
MOUTH/THROAT/DENTAL AGENTS		

Drug Name	Drug Tier	Requirements/Limits
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	
<i>nystatin susp 100000 unit/ml</i>	1	
ORAVIG TAB 50MG	3	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
PERIDEX SOL 0.12%	3	
<i>periogard sol 0.12%</i>	1	
PERIODONTAL PRODUCTS		
ARESTIN MIS 1MG	3	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq pst 0.1%</i>	1	
<i>oralone dent pst 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
THROAT PRODUCTS - MISC.		
AQUORAL SPR	3	
BOCASAL POW	3	
CAPHOSOL SOL	3	
<i>cevimeline hcl cap 30 mg</i>	1	
EPISIL LIQ	2	
EVOXAC CAP 30MG	3	
GELCLAIR 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	3	
SALAGEN TAB 7.5MG	3	
SALIVAMAX POW	NC	
MULTIVITAMINS		
B-COMPLEX W/ FOLIC ACID		
FOLIC-K CAP	NC	

Drug Name	Drug Tier	Requirements/Limits
NEPHRO-VITE TAB RX	NC	
MULTIPLE VITAMINS W/ MINERALS		
BACMIN TAB	NC	
DAYAVITE TAB	NC	
DERMACINRX TAB RIBOT-E	NC	
DEXATRAN CAP	NC	
DIALYVITE TAB SUPREM D	NC	
FOLAMED DHA CAP	NC	
FOLITIN-Z TAB	NC	
HYLAZINC TAB	NC	
KEYFOLIC TAB	NC	
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	
MULTIPLE VITAMINS W/ MINERALS & FLUORIDE-IRON-FOLIC ACID		
QUFLORA FE CHW	NC	
PED MULTI VITAMINS W/FL & FE		
<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
PED MV W/ FLUORIDE		
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 dro 0.25mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>pediatric multiple vitamins w/ fluoride chew tab 0.5 mg</i>	1	PV
<i>pediatric multiple vitamins w/ fluoride chew tab 0.25 mg</i>	1	PV
<i>pediatric multiple vitamins w/ fluoride chew tab 1 mg</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/fluor dro 0.5mg</i>	1	PV
<i>tri-vit/fluor dro 0.25mg</i>	1	PV
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA CHW 0.5MG	NC	
FLORIVA CHW 0.25MG	NC	
FLORIVA CHW 1MG	NC	
TEXAVITE LQ LIQ	NC	
PRENATAL VITAMINS		
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	

Drug Name	Drug Tier	Requirements/Limits
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	
PRENATAL 19 CHW 29-1MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<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	
PRENATOL-M TAB 27-1.2MG	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	

Drug Name	Drug Tier	Requirements/Limits
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	
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

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 5 mg</i>	1
<i>baclofen tab 10 mg</i>	1
<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
<i>chlorzoxazone tab 500 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 TAB 4MG	3	

DIRECT MUSCLE RELAXANTS

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	

Drug Name	Drug Tier	Requirements/Limits
MUSCLE RELAXANT COMBINATIONS		
<i>norgesic tab</i>	NC	
<i>norgesic tab forte</i>	NC	
<i>orphenadrine w/ aspirin & caffeine tab 25-385-30 mg</i>	NC	
<i>orphenadrine w/ aspirin & caffeine tab 50-770-60 mg</i>	NC	
<i>orphengesic tab forte</i>	NC	
VISCOSUPPLEMENTS		
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	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	
DYMISTA SPR 137-50	NC	
NASAL AGENTS - MISC.		
NOZIN NASAL KIT SANITIZE	3	OTC
NOZIN NASAL MIS SANITIZE	3	OTC
NASAL ANESTHETICS		
COCAINE HCL SOL 40MG/ML	NC	
GOPRELTO SOL 40MG/ML	NC	
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	1	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
NASAL STEROIDS		
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	
SYMPATHOMIMETIC DECONGESTANTS		
ADRENALIN SOL 1:1000	3	
<i>epinephrine hcl nasal soln 0.1%</i>	1	
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>edaravone inj 30 mg/100ml (0.3 mg/ml)</i>	4	SP, PA, QL
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	SP
<i>riluzole tab 50 mg</i>	1	
TEGLUTIK SUS 50/10ML	NC	
DEPOLARIZING MUSCLE RELAXANTS		
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	
FRIEDRICH'S ATAXIA AGENTS		
SKYCLARYS CAP 50MG	6	SP, PA
MUSCULAR DYSTROPHY AGENTS		
EXONDYS 51 SOL 100/2ML	6	SP, PA, QL
EXONDYS 51 SOL 500/10ML	6	SP, PA, QL
VILTEPSO SOL	NC	SP
VYONDYS 53 INJ 100/2ML	NC	SP
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX INJ 100UNIT	NC	
BOTOX INJ 200UNIT	NC	
DAXXIFY INJ 100U	2	PA
DYSPOIT INJ 300UNIT	NC	

Drug Name	Drug Tier	Requirements/Limits
DYSPORT INJ 500UNIT	NC	
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

NONDEPOLARIZING MUSCLE RELAXANTS

<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	

RETT SYNDROME AGENTS

DAYBUE SOL 200MG/ML	6	SP, PA, QL

SPINAL MUSCULAR ATROPHY AGENTS (SMA)

EVRYSDI SOL	6	SP, PA, QL
EVRYSDI TAB 5MG	6	SP, PA, QL
SPINRAZA INJ 12MG/5ML	NC	

NUTRIENTS

CARBOHYDRATES

<i>dextrose inj 5%</i>	1	
DEXTROSE INJ 5%	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>dextrose inj 70%</i>	1	
LIPIDS		
CLINOLIPID EMU 20%	3	
INTRALIPID INJ 20%	3	
INTRALIPID INJ 20%	NC	
INTRALIPID INJ 30%	3	
NEOKE MCT70 POW	NC	
NUTRILIPID EMU 20%	NC	
SMOFLIPID EMU	3	
LIPOTROPICS		
LECITHIN GRA	3	
PROTEIN-CARBOHYDRATE-LIPID COMBINATIONS		
PERIKABIVEN EMU	3	
PROTEINS		
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	
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

Drug Name	Drug Tier	Requirements/Limits
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT MIS 5MG OP	NC	
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5% OP	NC	
BETIMOL SOL 0.25% OP	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/BRIMO/ SOL DORZOL	NC	
TIMOL/LATAN SOL	NC	
TIMOLOL MAL/ SOL BIMATOPR	NC	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<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	
<i>timolol maleate preservative free ophth soln 0.25%</i>	2	
<i>timolol ophth soln 0.5%</i>	1	
TIMOPTIC OCU SOL 0.25% OP	NC	
CYCLOPLEGIC MYDRIATICS		
<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	

Drug Name	Drug Tier	Requirements/Limits
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 1%</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	
MIOTICS		
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	
QLOSI SOL 0.4%	NC	
OPHTHALMIC - ANGIOGENESIS INHIBITORS		
BEOVU INJ 6/0.05ML	NC	SP
BEVACIZUMAB INJ 2.75MG	NC	SP
BEVACIZUMAB INJ 3.75MG	NC	SP
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	SP
LUCENTIS INJ 0.3MG	NC	SP
LUCENTIS INJ 0.5MG	NC	SP
LUCENTIS SOL 0.3MG	NC	SP
LUCENTIS SOL 0.5MG	NC	SP
OPHTHALMIC ADRENERGIC AGENTS		
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>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC ANTI-INFECTIVES		
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>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	
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>	1	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
TOBRA/VANCO DRO 1.5-5%	3	
<i>tobramycin ophth soln 0.3%</i>	1	
TOBREX OIN 0.3% OP	3	
<i>trifluridine ophth soln 1%</i>	2	
VIGAMOX DRO 0.5%	3	
XDEMVEY DRO 0.25%	NC	
ZIRGAN GEL 0.15%	NC	

Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC COMPLEMENT INHIBITORS		
IZERVAY SOL 2/0.1ML	NC	SP
SYFOVRE INJ 15/0.1ML	NC	SP
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine (ophth) emulsion 0.05%</i>	1	PA, QL
RESTASIS EMU 0.05% OP	NC	
RESTASIS MUL EMU 0.05% OP	NC	
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	2	PA
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA SOL 0.02%	NC	
ROCKLATAN DRO	NC	
OPHTHALMIC LOCAL ANESTHETICS		
AKTEN GEL 3.5% OP	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	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE SOL 20MCG/ML	6	SP, QL
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE INJ 15MG	6	SP, PA
OPHTHALMIC PHOTOENHANCERS		
PHOTREXA VIS SOL 0.146-20	NC	
PHOTREXA/PHO SOL VISC KIT	NC	
OPHTHALMIC STEROIDS		
ALREX SUS 0.2%	NC	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
<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

Drug Name	Drug Tier	Requirements/Limits
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>	1	
<i>loteprednol etabonate ophth susp 0.2%</i>	2	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
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	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE SUS 1%	3	
RETISERT IMP 0.59MG	6	SP
<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	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
TRIESENCE INJ 40MG/ML	3	
TRIMOXI+ INJ	NC	
XIPERE SUS 40MG/ML	NC	SP
YUTIQ IMP 0.18MG	NC	SP
ZYLET SUS 0.5-0.3%	NC	
OPHTHALMIC SURGICAL AIDS		
AMVISC INJ 12MG/ML	3	
AMVISC PLUS SOL 12.8/0.8	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	

Drug Name	Drug Tier	Requirements/Limits
OMIDRIA INJ 1-0.3%	3	
PROVISC INJ 1%	3	
VISIONBLUE INJ 0.06%	3	
OPHTHALMICS - MISC.		
ACULAR LS SOL 0.4% OP	3	
ACULAR SOL 0.5% OP	3	
ACUVAIL SOL 0.45%	NC	
<i>ak-fluor inj 10%</i>	1	
ALOCRIAL SOL 2%	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% OP	3	
<i>brinzolamide ophth susp 1%</i>	1	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	
BROMSITE DRO 0.075%OP	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% OP	3	
<i>epinastine hcl ophth soln 0.05%</i>	1	
FLUOR-I-STRI TES 1MG OP	3	
FLUORE/BENOX SOL 0.3-0.4%	3	
<i>fluorescein sodium iv soln 10%</i>	1	
<i>fluorescein sodium iv soln 25%</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%	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	

Drug Name	Drug Tier	Requirements/Limits
<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	
PROLENSA DRO 0.07% OP	2	
UPNEEQ SOL 0.1%	NC	
ZERVIAE DRO 0.24%	NC	

PROSTAGLANDINS - OPHTHALMIC

<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	
XALATAN SOL 0.005%	3	
ZIOPTAN DRO 0.0015%	3	ST

OTIC AGENTS

OTIC AGENTS - MISCELLANEOUS

<i>acetic acid otic soln 2%</i>	1	

OTIC ANTI-INFECTIVES

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	

OTIC COMBINATIONS

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	

Drug Name	Drug Tier	Requirements/Limits
OTIC STEROIDS		
DERMOTIC OIL 0.01%	3	
fluocinolone acetonide (otic) oil 0.01%	1	
OXYTOCICS		
ABORTIFACIENTS/AGENTS FOR CERVICAL RIPENING		
carboprost tromethamine im soln 250 mcg/ml	1	
CERVIDIL VAG MIS 10MG INS	3	
HEMABATE INJ 250MCG	3	
PREPIDIL GEL 0.5MG/3G	3	
OXYTOCICS		
methergine tab 0.2mg	2	
methylergonovine maleate inj 0.2 mg/ml	1	
methylergonovine maleate tab 0.2 mg	2	
oxytocin inj 10 unit/ml	1	
PITOCIN INJ 10UNT/ML	3	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ANTITOXINS-ANTIVENINS		
ANASCORP INJ	3	
ANAVIP INJ	3	
ANTIVENIN KIT LAT MACT	3	
ANTIVENIN NA INJ CORAL SN	3	
CROFAB INJ	3	
IMMUNE SERUMS		
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

Drug Name	Drug Tier	Requirements/Limits
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
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	

Drug Name	Drug Tier	Requirements/Limits
VARIZIG INJ 125UNIT	M	
WINRHO SDF INJ 1500UNIT	M	
WINRHO SDF INJ 2500UNIT	M	
WINRHO SDF INJ 5000UNIT	M	
WINRHO SDF INJ 15000UNT	M	

MONOCLONAL ANTIBODIES

BEYFORTUS INJ 50/0.5ML	3	ACA, PV
BEYFORTUS INJ 100MG/ML	3	ACA, PV
SYNAGIS INJ 50/0.5ML	NC	SP
SYNAGIS INJ 100MG/ML	NC	SP
ZINPLAVA SOL 25MG/ML	NC	SP

PASSIVE IMMUNIZING AGENTS - COMBINATIONS

HYQVIA INJ 2.5-200	NC	SP
HYQVIA INJ 5-400	NC	SP
HYQVIA INJ 10-800	NC	SP
HYQVIA INJ 20-1600	NC	SP
HYQVIA INJ 30-2400	NC	SP

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	
<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 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	
EXTENCILLINE INJ 1200000	3	

Drug Name	Drug Tier	Requirements/Limits
EXTENCILLINE INJ 2400000	3	
LENTOCILIN INJ 1200000	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	
<i>pfizerpen inj 20mu</i>	1	
<i>pfizerpen inj 20000000</i>	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
AUGMENTIN SUS 125/5ML	3	
AUGMENTIN SUS ES-600	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	

Drug Name	Drug Tier	Requirements/Limits
<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 13.5 gm (12-1.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	2	
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	
ZOSYN SOL 4-0.5GM	3	

PENICILLINASE-RESISTANT PENICILLINS

<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
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 10 gm</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	NC	
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>gallifrey tab 5mg</i>	1	
<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>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
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
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i>	NC	
LUCEMYRA TAB 0.18MG	NC	
ANTI-CATAPLECTIC AGENTS		
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
ANTIDEMENTIA AGENTS		
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>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	1	
<i>memantine hcl cap er 24hr 21 mg</i>	2	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	2	
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	1	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	1	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	2	
NAMENDA TAB 5-10MG	3	
NAMZARIC CAP 7-10MG	2	
NAMZARIC CAP 14-10MG	2	
NAMZARIC CAP 21-10MG	2	
NAMZARIC CAP 28-10MG	2	
<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>	1	
ZUNVEYL TAB 5MG	NC	
ZUNVEYL TAB 10MG	NC	
ZUNVEYL TAB 15MG	NC	

COMBINATION PSYCHOTHERAPEUTICS

<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	

Drug Name	Drug Tier	Requirements/Limits
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
FIBROMYALGIA AGENTS		
SAVELLA MIS TITR PAK	3	
SAVELLA TAB 12.5MG	3	
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 18MG	5	SP, PA, QL
AUSTEDO XR TAB 24MG	5	SP, PA, QL
AUSTEDO XR TAB 30MG ER	5	SP, PA, QL
AUSTEDO XR TAB 36MG ER	5	SP, PA, QL
AUSTEDO XR TAB 42MG ER	5	SP, PA, QL
AUSTEDO XR TAB 48MG ER	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	SP
XENAZINE TAB 25MG	NC	SP
MULTIPLE SCLEROSIS AGENTS		
AMPYRA TAB 10MG	6	SP, ST, PA, QL
AUBAGIO TAB 7MG	NC	SP
AUBAGIO TAB 14MG	NC	SP
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>	1	SP, PA, QL; PV

Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate capsule delayed release 240 mg</i>	1	SP, PA, QL; PV
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	1	SP, PA, QL; PV
EXTAVIA INJ 0.3MG	NC	SP
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	4	SP, PA, QL; PV
GILENYA CAP 0.5MG	NC	SP
<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
KESIMPTA INJ 20/.4ML	5	SP, PA, QL; PV
LEMTRADA INJ 12/1.2ML	NC	SP
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; PV
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	SP
TECFIDERA CAP 120MG	NC	SP
TECFIDERA CAP 240MG	NC	SP
TECFIDERA CAP STARTER	NC	SP

Drug Name	Drug Tier	Requirements/Limits
<i>teriflunomide tab 7 mg</i>	4	SP, PA, QL; PV
<i>teriflunomide tab 14 mg</i>	4	SP, PA, QL; PV
TYSABRI INJ 300/15ML	5	SP, PA, QL; PV
VUMERITY CAP 231MG	NC	SP
ZEPOSIA 7DAY CAP STR PACK	5	SP, PA, QL; PV; Preferred for Multiple Sclerosis and Ulcerative Colitis
ZEPOSIA CAP 0.92MG	5	SP, PA, QL; PV; Preferred for Multiple Sclerosis and Ulcerative Colitis

POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS

<i>gabapentin (once-daily) tab 300 mg</i>	2	
<i>gabapentin (once-daily) tab 600 mg</i>	2	
GRALISE TAB 300MG	2	
GRALISE TAB 450MG	2	
GRALISE TAB 600MG	2	
GRALISE TAB 750MG	2	
GRALISE TAB 900MG	2	
<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	

PSEUDOBULBAR AFFECT (PBA) AGENTS

NUEDEXTA CAP 20-10MG	2	PA

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	

RESTLESS LEG SYNDROME (RLS) AGENTS

HORIZANT TAB 300MG ER	2	
HORIZANT TAB 600MG ER	2	

SMOKING DETERRENTS

<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

Drug Name	Drug Tier	Requirements/Limits
<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 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
<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 dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>ft nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>ft nicotine dis 21mg/24h</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 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>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

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<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 4mg mint</i>	0	OTC; ACA, PV
<i>nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>nicotine pol loz 2mg mini</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 gum 4mg</i>	0	OTC; ACA, PV
<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 & 42 x 1 mg start pack</i>	0	ACA, PV

TRANSTHYRETIN AMYLOIDOSIS AGENTS

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

VASOMOTOR SYMPTOM AGENTS

<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	NC	

RESPIRATORY AGENTS - MISC.

Drug Name	Drug Tier	Requirements/Limits
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST NP INJ 500MG	5	SP, PA
ARALAST NP INJ 1000MG	5	SP, PA
GLASSIA INJ	5	SP, PA
PROLASTIN-C INJ 1000MG	NC	SP
ZEMAIRA INJ 1000MG	5	SP, PA
ZEMAIRA INJ 4000MG	5	SP, PA
ZEMAIRA INJ 5000MG	5	SP, PA
CYSTIC FIBROSIS AGENTS		
ALYFTREK TAB 4-20-50	NC	SP
BRONCHITOL CAP 40MG	NC	SP
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	
STERITALC POW 3GM	3	
STERITALC POW 4GM	3	
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	NC	SP
ESBRIET TAB 267MG	NC	SP
ESBRIET TAB 801MG	NC	SP
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

Drug Name	Drug Tier	Requirements/Limits
<i>pirfenidone tab 801 mg</i>	4	SP, PA, QL
RESPIRATORY AGENTS - MISC.		
CUROSURF SUS 120/1.5	3	
CUROSURF SUS 240/3ML	3	
INFASURF SUS 35MG/ML	3	
SURVANTA INH	3	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA INJ 100MG	3	PA
NUZYRA TAB 150MG	3	PA
FLUOROCYCLINES		
XERAVA INJ 50MG	3	
XERAVA INJ 100MG	3	
GLYCYLCYCLINES		
<i>tigecycline for iv soln 50 mg</i>	1	
TIGECYCLINE INJ 50MG	3	
TYGACIL INJ 50MG	3	
TYGACIL INJ 50MG	NC	
TETRACYCLINES		
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>	2	
<i>demeclocycline hcl tab 300 mg</i>	1	
DORYX MPC TAB 120MG	NC	
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	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
<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>	1	
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	
<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	

Drug Name	Drug Tier	Requirements/Limits
SEYSARA TAB 150MG	NC	
<i>targadox tab 50mg</i>	NC	
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	1	
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	
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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
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	
RENTHYROID TAB 15MG	NC	
RENTHYROID TAB 30MG	NC	
RENTHYROID TAB 60MG	NC	
RENTHYROID TAB 90MG	NC	
RENTHYROID TAB 120MG	NC	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
SYNTHROID TAB 75MCG	2	

Drug Name	Drug Tier	Requirements/Limits
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	
THYROID TAB 15MG	NC	
THYROID TAB 120MG	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 200MCG	NC	
<i>unithroid tab 25mcg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
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	0	ACA, PV
INFANRIX INJ	0	ACA, PV
KINRIX INJ	0	ACA, PV
PEDIARIX INJ 0.5ML	0	ACA, PV
PENTACEL INJ	0	ACA, PV
QUADRACEL INJ 0.5ML	0	ACA, PV
TENIVAC INJ 5-2LF	3	ACA, PV
VAXELIS INJ	0	ACA, PV

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTISPASMODICS

ANASPAZ TAB 0.125MG	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 0.5 mg/5ml (0.1 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	
BELLA/OPIUM SUP 16.2-60	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	1	
CUVPOSA SOL 1MG/5ML	3	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl inj 10 mg/ml</i>	2	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
GLYCOPYRROLA INJ 0.6/3ML	NC	
GLYCOPYRROLA INJ 1MG/5ML	NC	
GLYCOPYRROLA TAB 1.5MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<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 1 mg</i>	NC	(applies to NDC 62135073460)
<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	
<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>	2	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
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	
<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 pack 2.5 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	2	
<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	

Drug Name	Drug Tier	Requirements/Limits
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	
<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	
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 & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	2	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	
KONVOMEPSUS 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	

Drug Name	Drug Tier	Requirements/Limits
omeprazole-sodium bicarbonate cap 40-1100 mg	NC	
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg	NC	
omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg	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)

darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	1	
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	1	
DETROL LA CAP 2MG	NC	
DETROL LA CAP 4MG	NC	
DETROL TAB 2MG	3	
ENABLEX TAB 7.5MG	NC	
ENABLEX TAB 15MG	NC	
fesoterodine fumarate tab er 24hr 4 mg	1	
fesoterodine fumarate tab er 24hr 8 mg	1	
oxybutynin chloride tab 5 mg	1	
oxybutynin chloride tab er 24hr 5 mg	1	
oxybutynin chloride tab er 24hr 10 mg	1	
oxybutynin chloride tab er 24hr 15 mg	1	
OXYTROL DIS 3.9MG/24	NC	
solifenacin succinate tab 5 mg	1	
solifenacin succinate tab 10 mg	1	
tolterodine tartrate cap er 24hr 2 mg	1	
tolterodine tartrate cap er 24hr 4 mg	1	
tolterodine tartrate tab 1 mg	1	
tolterodine tartrate tab 2 mg	1	
TOVIAZ TAB 4MG	NC	
TOVIAZ TAB 8MG	NC	
tropium chloride cap er 24hr 60 mg	1	
tropium chloride tab 20 mg	1	
VESICARE LS SUS 5MG/5ML	3	

Drug Name	Drug Tier	Requirements/Limits
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA TAB 75MG	2	ST
<i>mirabegron tab er 24 hr 25 mg</i>	2	
<i>mirabegron tab er 24 hr 50 mg</i>	2	
MYRBETRIQ SUS 8MG/ML	NC	
MYRBETRIQ TAB 25MG	NC	
MYRBETRIQ TAB 50MG	NC	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<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	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ	0	ACA, PV
BCG VACCINE INJ 50MG	3	PV
BEXSERO INJ	0	ACA, PV
BIOTHRAX INJ	3	PV
CAPVAXIVE INJ 0.5ML	0	ACA, PV
HIBERIX SOL 10MCG	0	ACA, PV
MENQUADFI INJ	0	ACA, PV
MENVEO INJ	0	ACA, PV
MENVEO SOL	0	ACA, PV
PEDVAX HIB INJ	0	ACA, PV
PENBRAYA INJ	0	ACA, PV
PNEUMOVAX 23 INJ 25/0.5	0	ACA, PV
PREVNAR 20 INJ	0	ACA, PV
TRUMENBA INJ	0	ACA, PV
TYPHIM VI INJ	3	PV
VAXCHORA SUS	3	PV
VAXNEUVANCE INJ	0	ACA, PV
VIVOTIF CAP EC	3	PV
VIRAL VACCINES		
ABRYSVO INJ	0	ACA, PV
ABRYSVO INJ 120MCG	0	ACA, PV
AFLURIA INJ 2024-25	0	ACA, PV
AREXVY INJ 120MCG	0	ACA, PV
AUDENZ INJ	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
COMIRNATY INJ 2024-25	0	ACA, PV
DENGXVAXIA SUS	0	ACA, PV
ENERIX-B INJ 10/0.5ML	0	ACA, PV
ENERIX-B INJ 20MCG/ML	0	ACA, PV
ERVEBO INJ	3	PV
FLUAD INJ 2024-25	0	ACA, PV
FLUARIX INJ 2024-25	0	ACA, PV
FLUBLOK INJ 2024-25	0	ACA, PV
FLUCELVAX INJ 2024-25	0	ACA, PV
FLULAVAL INJ 2024-25	0	ACA, PV
FLUMIST NASA LIQ 2024-25	0	ACA, PV
FLUZONE HD INJ 2024-25	0	ACA, PV
FLUZONE INJ 2024-25	0	ACA, PV
GARDASIL 9 INJ	0	ACA, PV
HAVRIX INJ 720UNIT	0	ACA, PV
HAVRIX INJ 1440UNIT	0	ACA, PV
HEPLISAV-B INJ 20/0.5ML	0	ACA, PV
IMOVAX RABIE INJ 2.5/ML	3	PV
IPOLE INJ INACTIVE	0	ACA, PV
IXCHIQ INJ	3	PV
IXIARO INJ	3	PV
JYNNEOS INJ	0	ACA, PV
M-M-R II INJ	0	ACA, PV
MODERNA INJ 2024-25	0	ACA, PV
MRESVIA INJ 50MCG	0	ACA, PV
NOVAVAX INJ 2024-25	0	ACA, PV
PFIZER 5-11Y INJ 2024-25	0	ACA, PV
PFIZER 6M-4Y INJ 2024-25	0	ACA, PV
PRIORIX INJ	0	ACA, PV
PROQUAD INJ	0	ACA, PV
RABAVERT INJ	3	PV
RECOMBIVA HB INJ 5MCG/0.5	0	ACA, PV
RECOMBIVA HB INJ 10MCG/ML	0	ACA, PV
RECOMBIVA-HB INJ 40MCG/ML	0	ACA, PV
ROTARIX SUS	0	ACA, PV
ROTATEQ SOL	0	ACA, PV
SHINGRIX INJ 50/0.5ML	0	ACA, PV
SPIKEVAX INJ 2024-25	0	ACA, PV
STAMARIL INJ	3	PV
TICOVAC INJ	3	PV
TWINRIX INJ	0	ACA, PV
VAQTA INJ 25/0.5ML	0	ACA, PV
VAQTA INJ 50UNT/ML	0	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
VARIVAX INJ	0	ACA, PV
VIMKUNYA INJ 40/0.8ML	3	PV
YF-VAX INJ	3	PV

VAGINAL AND RELATED PRODUCTS

MISCELLANEOUS VAGINAL PRODUCTS

INTRAROSA SUP 6.5MG	NC

SPERMICIDES

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

VAGINAL ANTI-INFECTIVES

CLEOCIN CRE 2% VAG	3
CLEOCIN SUP 100MG	3
<i>clindamycin phosphate vaginal cream 2%</i>	1
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

VAGINAL CONTRACEPTIVE - PH MODULATORS

PHEXXI GEL	0	ACA

VAGINAL ESTROGENS

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>yuvaferm tab 10mcg</i>	NC

Drug Name	Drug Tier	Requirements/Limits
VAGINAL PROGESTINS		
CRINONE GEL 4% VAG	2	PA
CRINONE GEL 8% VAG	2	PA
ENDOMETRIN SUP 100MG	NC	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
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 1 mg/ml (1:1000)</i>	1	
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	2	
<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	SP
NORTHERA CAP 200MG	NC	SP
NORTHERA CAP 300MG	NC	SP
VASOPRESSORS		
AKOVAZ SOL 50MG/ML	NC	
EPHEDRI/NACL SOL 15MG/3ML	3	PA
EPHEDRINE SU INJ 50MG/ML	3	
<i>ephedrine sulfate iv soln 50 mg/ml</i>	1	
EPINEPH/NACL 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	
<i>epinephrine inj 1 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
EPINEPHRINE INJ 1MG/10ML	3	
EPINEPHRINE INJ 1MG/ML	3	
EPINEPHRINE INJ 5MG/5ML	3	
EPINEPHRINE INJ 30/30ML	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	
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	1	
PHENYL/NACL INJ 80/250ML	3	
PHENYLEP HCL INJ 0.8/10ML	3	
PHENYLEP HCL INJ 1MG/10ML	3	
PHENYLEPHRIN INJ 0.4/10ML	3	
PHENYLEPHRIN INJ 0.8MG/10	3	
PHENYLEPHRIN INJ 1MG/10ML	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	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	
<i>phytonadione inj 10 mg/ml</i>	1	
<i>phytonadione tab 5 mg</i>	2	

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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ADEMPAS TAB 1.5MG	144	ADVATE INJ 3000UNIT	202
ADEMPAS TAB 1MG.....	144	ADVATE INJ 4000UNIT	202
ADEMPAS TAB 2.5MG.....	144	ADVATE INJ 500UNIT.....	202
ADEMPAS TAB 2MG	144	ADVCATE SAFE MIS LANC 21G	221
ADENOCAINE INJ 40ML	140	ADVCATE SAFE MIS LANC 23G	222
<i>adenosine iv soln 12 mg/4ml</i>	50	ADVCATE SAFE MIS LANC 26G	222
<i>adenosine iv soln 6 mg/2ml</i>	50	ADVCATE SAFE MIS LANC 28G	222
ADHANSIA XR CAP 25MG	16	ADVICOR TAB 1000-20	88
ADHANSIA XR CAP 35MG	16	ADVICOR TAB 1000-40	88
ADHANSIA XR CAP 45MG	16	ADVICOR TAB 500-20MG	88
ADHANSIA XR CAP 55MG	16	ADVICOR TAB 750-20MG.....	88
ADHANSIA XR CAP 70MG	16	ADVOCATE MIS LANC 30G	222
ADHANSIA XR CAP 85MG	16	ADVOCATE MIS LANCETS.....	222
ADIPEX-P TAB 37.5MG	14	ADVOCATE TES	177
ADLARITY DIS 10MG/DAY	266	ADVOCATE TES REDI-COD	177
ADLARITY DIS 5MG/DAY.....	266	ADVOCATE TES REDICODE.....	177
ADLYXIN INJ 10/20MCG.....	77	ADYNOVATE INJ 1000UNIT.....	203
ADLYXIN INJ 20MCG	77	ADYNOVATE INJ 1500UNIT.....	203
ADRENALIN INJ 1MG/ML	288	ADYNOVATE INJ 2000UNIT.....	203
ADRENALIN INJ 30/30ML	288	ADYNOVATE INJ 250UNIT.....	202
ADRENALIN SOL 1:1000	251	ADYNOVATE INJ 3000UNIT.....	203
<i>adriamycin inj 50mg</i>	109	ADYNOVATE INJ 500UNIT	202
ADTHYZA TAB 120MG.....	276	ADYNOVATE INJ 750UNIT.....	203
ADTHYZA TAB 130MG.....	276	ADZENYS ER SUS 1.25MG	12
ADTHYZA TAB 15MG	276	ADZENYS XR TAB 12.5MG.....	12
ADTHYZA TAB 16.25MG.....	276	ADZENYS XR TAB 15.7 MG.....	12
ADTHYZA TAB 30MG	276	ADZENYS XR TAB 18.8MG	12
ADTHYZA TAB 32.5MG	276	ADZENYS XR TAB 3.1MG.....	12
ADTHYZA TAB 60MG	276	ADZENYS XR TAB 6.3MG	12
ADTHYZA TAB 65MG	276	ADZENYS XR TAB 9.4MG.....	12

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AFINITOR DIS TAB 3MG	110	AKYNZEO CAP 300-0.5.....	83
AFINITOR DIS TAB 5MG	110	AKYNZEO INJ.....	83
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AFINITOR TAB 5MG	110	<i>ala-cort cre 1%</i>	166
AFINITOR TAB 7.5MG.....	110	ALADERM PLUS EMU	171
<i>afirmelle tab 0.1-0.02</i>	147	<i>albendazole tab 200 mg</i>	43
AFLURIA INJ 2024-25.....	285	<i>albuterol sulfate inhal aero 108 mcg/act</i> <i>(90mcg base equiv)</i>	54
AFREZZA POW 4-8 UNIT	78	<i>albuterol sulfate soln nebu 0.083% (2.5</i> <i>mg/3ml)</i>	54
AFREZZA POW 4-8-12	78	<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	54
AFREZZA POW 4UNIT.....	78	<i>albuterol sulfate soln nebu 0.63 mg/3ml</i> <i>(base equiv)</i>	54
AFSTYLA KIT 1000UNIT	203	<i>albuterol sulfate soln nebu 1.25 mg/3ml</i> <i>(base equiv)</i>	54
AFSTYLA KIT 1500UNIT	203	<i>albuterol sulfate syrup 2 mg/5ml</i>	54
AFSTYLA KIT 2000UNIT.....	203	<i>albuterol sulfate tab 2 mg</i>	54
AFSTYLA KIT 2500UNIT.....	203	<i>albuterol sulfate tab 4 mg</i>	54
AFSTYLA KIT 250UNIT	203	ALCAINE SOL 0.5% OP	257
AFSTYLA KIT 3000UNIT.....	203	<i>alclometasone dipropionate cream 0.05%</i>	166
AFSTYLA KIT 500UNIT	203	<i>alclometasone dipropionate oint 0.05%</i>	166
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AGAMREE SUS 40MG/ML	153	<i>alendronate sodium tab 35 mg</i>	184
AGGRASTAT INJ 12.5/250	207	<i>alendronate sodium tab 5 mg</i>	184
AGGRASTAT INJ 3.75/15	207	<i>alendronate sodium tab 70 mg</i>	184
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<i>ak-fluor inj 10%</i>	259		
AKLIEF CRE 0.005%	158		
AKOVAZ SOL 50MG/ML	288		

ALIMTA INJ 500MG.....	102	ALPHAGAN P SOL 0.1%	255
ALIQOPA INJ 60MG.....	110	ALPHAGAN P SOL 0.15%	255
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	98	ALPHA-LIPOIC SOL ACID	19
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	98	ALPHANINE SD INJ 1000UNIT	203
ALLEVYN AG MIS 6-3/4	174	ALPHANINE SD INJ 1500UNIT	203
ALLEVYN AG MIS 9	174	ALPHANINE SD INJ 500UNIT	203
ALLEVYN AG PAD 2	174	ALPRAZOLAM CON 1 MG/ML	49
ALLEVYN AG PAD 3	174	<i>alprazolam orally disintegrating tab 0.25 mg</i>	49
ALLEVYN AG PAD 4	174	<i>alprazolam orally disintegrating tab 0.5 mg</i>	49
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ALLEVYN GENT PAD 4	174	<i>alprazolam tab 0.5 mg</i>	49
ALLEVYN GENT PAD 8	174	<i>alprazolam tab 0.5mg xr</i>	49
<i>allopurinol sodium for inj 500 mg</i>	202	<i>alprazolam tab 1 mg</i>	49
<i>allopurinol tab 100 mg</i>	202	<i>alprazolam tab 1mg xr</i>	49
<i>allopurinol tab 300 mg</i>	202	<i>alprazolam tab 2 mg</i>	49
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<i>almotriptan malate tab 12.5 mg</i>	232	<i>alprazolam tab 3mg xr</i>	49
<i>almotriptan malate tab 6.25 mg</i>	232	<i>alprazolam tab er 24hr 0.5 mg</i>	49
ALOCRI SOL 2%	259	<i>alprazolam tab er 24hr 1 mg</i>	49
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	76	<i>alprazolam tab er 24hr 2 mg</i>	49
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	76	<i>alprazolam tab er 24hr 3 mg</i>	49
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	76	ALPROLIX INJ 1000UNIT	203
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<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	73	ALPROLIX INJ 3000UNIT	203
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	73	ALPROLIX INJ 4000UNIT	203
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	73	ALPROLIX INJ 500UNIT	203
<i>alogliptin-pioglitazone tab 25-15 mg</i>	74	<i>alprostadil inj 500 mcg/ml</i>	142
<i>alogliptin-pioglitazone tab 25-30 mg</i>	74	ALREX SUS 0.2%	257
<i>alogliptin-pioglitazone tab 25-45 mg</i>	74	ALTABAX OIN 1%	161
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ALORA DIS 0.025MG.....	192	ALTACE CAP 10MG	91
ALORA DIS 0.075MG.....	193	ALTACE CAP 2.5MG	90
ALORA DIS 0.1MG	192	<i>altafluor-be sol 0.25-0.4</i>	259
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	198	<i>altafrin sol 10% op</i>	254
<i>alose tron hcl tab 1 mg (base equiv)</i>	198	<i>altafrin sol 2.5% op</i>	254
		<i>altavera tab</i>	147
		ALTOPREV TAB 20MG ER	88
		ALTOPREV TAB 40MG ER	88
		ALTOPREV TAB 60MG ER	89

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ALTUVIII INJ 250 UNIT	203
ALTUVIII INJ 250UNIT	203
ALTUVIII INJ 3000UNIT	203
ALTUVIII INJ 4000UNIT.....	203
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ALUNBRIG TAB 180MG	110
ALUNBRIG TAB 30MG.....	110
ALUNBRIG TAB 90MG.....	110
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amantadine hcl soln 50 mg/5ml.....	118
amantadine hcl tab 100 mg	118
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AMBIEN TAB 10MG	214
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ambrisentan tab 5 mg.....	143
amcinonide cream 0.1%	166
AMELUZ GEL 10%	162
amethyst tab 90-20mcg.....	147
AMIDATE INJ 2MG/ML	199
amikacin sulfate inj 1 gm/4ml (250 mg/ml)	
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amikacin sulfate inj 500 mg/2ml (250 mg/ml).....	19
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aminocaproic acid tab 500 mg	212
aminophylline inj 25 mg/ml	56
aminorelief cap rms	253
aminosyn ii sol 15%	253
AMINOSYN INJ 10%	253
AMINOSYN-PF INJ 10%	253
AMINOSYN-PF INJ 7%	253
amiodarone hcl inj 150 mg/3ml (50 mg/ml)	
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amiodarone hcl inj 450 mg/9ml (50 mg/ml)	
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amiodarone hcl inj 900 mg/18ml (50 mg/ml).....	51
amiodarone hcl tab 100 mg.....	51
amiodarone hcl tab 200 mg	51
amiodarone hcl tab 400 mg	51
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amitriptyline hcl tab 10 mg	72
amitriptyline hcl tab 100 mg	72
amitriptyline hcl tab 150 mg	72
amitriptyline hcl tab 25 mg.....	72
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AMJEVITA INJ 20/0.4ML.....	21
AMJEVITA INJ 40/0.4ML.....	21
AMJEVITA INJ 40/0.8ML.....	21
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amlodipine besylate tab 2.5 mg (base equivalent)	136
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amlodipine besylate-atorvastatin calcium tab 10-10 mg	141
amlodipine besylate-atorvastatin calcium tab 10-20 mg	141
amlodipine besylate-atorvastatin calcium tab 10-40 mg	141
amlodipine besylate-atorvastatin calcium tab 10-80 mg	141
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg	141
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg	141
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg	141
amlodipine besylate-atorvastatin calcium tab 5-10 mg	141
amlodipine besylate-atorvastatin calcium tab 5-20 mg	141
amlodipine besylate-atorvastatin calcium tab 5-40 mg	141
amlodipine besylate-atorvastatin calcium tab 5-80 mg	141
amlodipine besylate-benazepril hcl cap 10-20 mg	94
amlodipine besylate-benazepril hcl cap 10-40 mg	94
amlodipine besylate-benazepril hcl cap 2.5-10 mg	94
amlodipine besylate-benazepril hcl cap 5-10 mg	94
amlodipine besylate-benazepril hcl cap 5-20 mg	94
amlodipine besylate-benazepril hcl cap 5-40 mg	94
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	94
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	94
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	94

amlodipine besylate-olmesartan medoxomil tab 5-40 mg	94
amlodipine besylate-valsartan tab 10-160 mg	94
amlodipine besylate-valsartan tab 10-320 mg	94
amlodipine besylate-valsartan tab 5-160 mg	94
amlodipine besylate-valsartan tab 5-320 mg	94
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	94
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	94
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	94
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	94
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	94
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amnestem cap 30mg	158
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amoxapine tab 150 mg	72
amoxapine tab 25 mg	72
amoxapine tab 50 mg	72
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amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	264
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	264
amoxicillin & k clavulanate for susp 400-57 mg/5ml	264
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	264
amoxicillin & k clavulanate tab 250-125 mg	264
amoxicillin & k clavulanate tab 500-125 mg	264

amoxicillin & k clavulanate tab 875-125 mg	264
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	264
amoxicillin (trihydrate) cap 250 mg	263
amoxicillin (trihydrate) cap 500 mg	263
amoxicillin (trihydrate) chew tab 125 mg	263
amoxicillin (trihydrate) chew tab 250 mg	263
amoxicillin (trihydrate) for susp 125 mg/5ml	263
amoxicillin (trihydrate) for susp 200 mg/5ml	263
amoxicillin (trihydrate) for susp 250 mg/5ml	263
amoxicillin (trihydrate) for susp 400 mg/5ml	263
amoxicillin (trihydrate) tab 500 mg	263
amoxicillin (trihydrate) tab 875 mg	263
amphetamine sulfate tab 10 mg	12
amphetamine sulfate tab 5 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg	12
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg	12
amphetamine-dextroamphetamine cap er 24hr 10 mg	12
amphetamine-dextroamphetamine cap er 24hr 15 mg	12
amphetamine-dextroamphetamine cap er 24hr 20 mg	12
amphetamine-dextroamphetamine cap er 24hr 25 mg	12
amphetamine-dextroamphetamine cap er 24hr 30 mg	13
amphetamine-dextroamphetamine cap er 24hr 5 mg	12
amphetamine-dextroamphetamine tab 10 mg	13

amphetamine-dextroamphetamine tab 12.5 mg	13
amphetamine-dextroamphetamine tab 15 mg	13
amphetamine-dextroamphetamine tab 20 mg	13
amphetamine-dextroamphetamine tab 30 mg	13
amphetamine-dextroamphetamine tab 5 mg	13
amphetamine-dextroamphetamine tab 7.5 mg	13
amphotericin b for iv soln 50 mg	84
amphotericin b liposome iv for susp 50 mg	84
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm	264
ampicillin & sulbactam sodium for inj 3 (2-1) gm	264
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	264
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	264
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	264
ampicillin cap 500 mg	263
ampicillin sodium for inj 1 gm	263
ampicillin sodium for inj 2 gm	263
ampicillin sodium for inj 250 mg	263
ampicillin sodium for inj 500 mg	263
ampicillin sodium for iv soln 1 gm	263
ampicillin sodium for iv soln 10 gm	263
ampicillin sodium for iv soln 2 gm	263
AMPYRA TAB 10MG	268
AMRIX CAP 15MG	248
AMRIX CAP 30MG	248
AMTAGVI INJ	106
AMVISC INJ 12MG/ML	258
AMVISC PLUS SOL 12.8/0.8	258
AMZEEQ AER 4%	158
ANAFRANIL CAP 25MG	72
ANAFRANIL CAP 50MG	72
ANAFRANIL CAP 75MG	72
anagrelide hcl cap 0.5 mg	207

<i>anagrelide hcl cap 1 mg</i>	208	<i>aprepitant capsule therapy pack 80 & 125</i>	
ANALPRAM-HC CRE 1-1%	42	<i>mg</i>	84
ANALPRAM-HC LOT 2.5%	42	APRETUDE SUS 600MG ER	128
ANAPROX DS TAB 550MG	26	<i>apri tab</i>	147
ANASCORP INJ	261	APRISO CAP 0.375GM.....	196
ANASEPT SPR.....	127	APTENSIO XR CAP 10MG	16
ANASPAZ TAB 0.125MG.....	280	APTENSIO XR CAP 15MG	16
<i>anastrozole tab 1 mg</i>	107	APTENSIO XR CAP 20MG	16
ANAVIP INJ	261	APTENSIO XR CAP 30MG	16
ANCOBON CAP 250MG	84	APTENSIO XR CAP 40MG	16
ANCOBON CAP 500MG.....	84	APTENSIO XR CAP 50MG	16
ANDEXXA SOL 200MG.....	82	APTENSIO XR CAP 60MG	16
ANDROGEL GEL 1%(25MG)	41	APTIOM TAB 200MG	60
ANDROGEL GEL 1%(50MG).....	41	APTIOM TAB 400MG	60
ANDROGEL GEL 1.62%.....	41	APTIOM TAB 600MG	60
ANECTINE INJ 200/10ML	251	APTIOM TAB 800MG	60
ANECTINE INJ 20MG/ML	251	APTIVUS CAP 250MG.....	128
ANGELIQ TAB 0.25-0.5	192	APTIVUS SOL	128
ANGELIQ TAB 0.5-1MG	192	AQUACEL AG PAD 5	174
ANGIOMAX INJ 250MG	59	AQUACEL FOAM PAD 5.....	174
ANNOVERA MIS	152	AQUACEL FOAM PAD 7.....	174
ANORO ELLIPT AER 62.5-25	54	AQUALANCE MIS 30G	222
ANTICOAGULNT SOL SOD CITR.....	59	AQUASOL A INJ 50000/ML	289
ANTIVENIN KIT LAT MACT	261	AQUORAL SPR.....	243
ANTIVENIN NA INJ CORAL SN	261	ARAKODA TAB 100MG	99
<i>anucort-hc sup 25mg</i>	42	ARALAST NP INJ 1000MG	273
ANUSOL-HC CRE 2.5%	42	ARALAST NP INJ 500MG.....	273
ANZEMET TAB 50MG	83	<i>aranelle tab</i>	147
APEXICON E CRE 0.05%.....	166	ARANESP INJ 100MCG.....	210
APIDRA INJ SOLOSTAR	78	ARANESP INJ 10MCG	210
APIDRA INJ U-100	78	ARANESP INJ 150MCG.....	210
APLENZIN TAB 174MG	68	ARANESP INJ 200MCG	210
APLENZIN TAB 348MG	68	ARANESP INJ 25MCG	210
APLENZIN TAB 522MG.....	68	ARANESP INJ 300MCG	210
APOKYN INJ 10MG/ML.....	118	ARANESP INJ 40MCG	210
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>		ARANESP INJ 500MCG.....	210
.....	118	ARANESP INJ 60MCG	210
APONVIE INJ 32/4.4ML	84	ARAVA TAB 10MG	29
<i>apraclonidine hcl ophth soln 0.5% (base</i>		ARAVA TAB 20MG	29
<i>equivalent)</i>	255	ARAZLO LOT 0.045%	158
<i>aprepitant capsule 125 mg</i>	84	ARCALYST INJ 220MG.....	26
<i>aprepitant capsule 40 mg</i>	84	ARESTIN MIS 1MG	243
<i>aprepitant capsule 80 mg</i>	84	AREXVY INJ 120MCG.....	285

<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	54	ARMOUR THYRO TAB 300MG	276
ARGATROBAN INJ 100MG/ML	59	ARMOUR THYRO TAB 30MG.....	276
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	59	ARMOUR THYRO TAB 60MG.....	276
ARGATROBAN INJ 50/50ML	59	ARMOUR THYRO TAB 90MG.....	276
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>	201	ARNUITY ELPT INH 200MCG	53
<i>argyl saline sol 100ml</i>	241	ARNUITY ELPT INH 50MCG.....	53
ARICEPT TAB 10MG.....	266	AROMASIN TAB 25MG	107
ARICEPT TAB 23MG	266	ARRANON INJ 5MG/ML.....	102
ARICEPT TAB 5MG.....	266	<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	115
ARIDA GEL.....	174	<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	115
ARIKAYCE SUS	19	ARTESUNATE SOL 110MG	99
ARIMIDEX TAB 1MG	107	<i>arthr pain gel 1%</i>	161
<i>aripiprazole oral solution 1 mg/ml</i>	127	ARTHROTEC 50 TAB.....	26
<i>aripiprazole orally disintegrating tab 10 mg</i>	127	ARTHROTEC 75 TAB.....	26
<i>aripiprazole orally disintegrating tab 15 mg</i>	127	<i>articadent inj dental</i>	216
<i>aripiprazole tab 10 mg</i>	127	ARTISS SOL 10ML.....	213
<i>aripiprazole tab 15 mg</i>	127	ARTISS SOL 2ML	213
<i>aripiprazole tab 2 mg</i>	127	ARTISS SOL 4ML	213
<i>aripiprazole tab 20 mg</i>	127	ARYMO ER TAB 15MG.....	32
<i>aripiprazole tab 30 mg</i>	127	ARYMO ER TAB 30MG.....	32
<i>aripiprazole tab 5 mg</i>	127	ARYMO ER TAB 60MG.....	32
ARISTADA INJ 1064MG.....	127	ARZERRA CON 100/5ML.....	105
ARISTADA INJ 441MG/1.....	127	ASACOL HD TAB 800MG	196
ARISTADA INJ 662MG/2.....	127	ASCLERA INJ 0.5%	242
ARISTADA INJ 882MG/3.....	127	ASCLERA INJ 1%	242
ARISTADA INJ INITIO	127	<i>ascomp/cod cap 30mg</i>	38
ARIXTRA INJ 10/0.8ML	57	<i>asenapine maleate sl tab 10 mg (base equiv)</i>	124
ARIXTRA INJ 2.5/0.5	57	<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	124
ARIXTRA INJ 5/0.4ML.....	57	<i>asenapine maleate sl tab 5 mg (base equiv)</i>	124
ARIXTRA INJ 7.5/0.6	57	<i>ashlyna tab</i>	147
<i>armodafinil tab 150 mg</i>	16	ASMANEX 120 AER 220MCG.....	53
<i>armodafinil tab 200 mg</i>	16	ASMANEX 14 AER 220MCG	53
<i>armodafinil tab 250 mg</i>	16	ASMANEX 30 AER 110MCG.....	53
<i>armodafinil tab 50 mg</i>	16	ASMANEX 30 AER 220MCG	53
ARMOUR THYRO TAB 120MG	276	ASMANEX 60 AER 220MCG	53
ARMOUR THYRO TAB 15MG	276	ASMANEX 7 AER 110MCG	53
ARMOUR THYRO TAB 180MG.....	276	ASMANEX HFA AER 100 MCG.....	53
ARMOUR THYRO TAB 240MG	276		

ASMANEX HFA AER 200 MCG.....	53
ASMANEX HFA AER 50MCG	53
ASPARLAS INJ 3750/5ML	115
aspercrm art gel 1% pain.....	161
aspirin 81 tab 81mg ec.....	31
aspirin adlt tab 81mg ec.....	31
aspirin chew tab 81 mg	31
aspirin chld chw 81mg	31
aspirin ec tab 81mg	31
aspirin low chw 81mg.....	32
aspirin low tab 81mg	32
aspirin low tab 81mg ec	32
aspirin regi tab 81mg.....	32
aspirin tab delayed release 81 mg.....	32
aspirin-81 chw 81mg.....	32
aspirin-dipyridamole cap er 12hr 25-200 mg	208
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ASSURE 4 TES.....	177
ASSURE CMFRT MIS 28G.....	222
ASSURE II TES.....	177
ASSURE II TES CHECK.....	177
ASSURE LANCE MIS 21G.....	222
ASSURE LANCE MIS 28G	222
ASSURE LANCE MIS LOW FLOW.....	222
ASSURE LANCE MIS MICRO.....	222
ASSURE LANCE MIS SAFE 25G.....	222
ASSURE LANCE MIS SAFE 30G.....	222
ASSURE PRISM TES MULTI.....	177
ASSURE PRO TES	177
ASSURE TES PLATINUM	177
ASTAGRAF XL CAP 0.5MG	239
ASTAGRAF XL CAP 1MG	239
ASTAGRAF XL CAP 5MG.....	239
AT LAST TES	177
ATABEX EC TAB	245
ATACAND HCT TAB 16-12.5	94
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
ATACAND TAB 8MG.....	92

atazanavir sulfate cap 150 mg (base equiv)	128
atazanavir sulfate cap 200 mg (base equiv)	128
atazanavir sulfate cap 300 mg (base equiv)	128
ATELVIA TAB.....	184
atenolol & chlorthalidone tab 100-25 mg .	95
atenolol & chlorthalidone tab 50-25 mg...	95
atenolol tab 100 mg	134
atenolol tab 25 mg	134
atenolol tab 50 mg.....	134
ATGAM INJ 250MG.....	239
ATIVAN INJ 2MG/ML.....	49
ATIVAN INJ 4MG/ML.....	49
ATIVAN TAB 0.5MG	49
ATIVAN TAB 1MG	49
ATIVAN TAB 2MG.....	49
atomoxetine hcl cap 10 mg (base equiv) ...	15
atomoxetine hcl cap 100 mg (base equiv) ..	15
atomoxetine hcl cap 18 mg (base equiv) ...	15
atomoxetine hcl cap 25 mg (base equiv) ..	15
atomoxetine hcl cap 40 mg (base equiv) ..	15
atomoxetine hcl cap 60 mg (base equiv) ..	15
atomoxetine hcl cap 80 mg (base equiv) ..	15
atorvastatin calcium tab 10 mg (base equivalent)	89
atorvastatin calcium tab 20 mg (base equivalent)	89
atorvastatin calcium tab 40 mg (base equivalent)	89
atorvastatin calcium tab 80 mg (base equivalent)	89
atovaquone susp 750 mg/5ml.....	44
atovaquone-proguanil hcl tab 250-100 mg	98
atovaquone-proguanil hcl tab 62.5-25 mg	98
atracurium besylate iv soln 100 mg/10ml	252
atracurium besylate preservative free (pf) iv soln 50 mg/5ml.....	252
ATRALIN GEL 0.05%.....	158
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ATRIPLA TAB	128	AUTOLET II KIT CLINISAF	222
ATROPINE SUL INJ 1/2.5ML	280	AUTOLET LITE KIT	222
ATROPINE SUL INJ 8MG/20ML	280	AUTOLET LITE KIT CLINISAF	222
ATROPINE SUL SOL 1% OP.....	254	AUTOLET LITE KIT STARTER	222
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	280	AUTOLET PLAT MIS 1.8MM	222
<i>atropine sulfate iv soln 0.4 mg/ml.....</i>	280	AUTOLET PLAT MIS 2.4MM.....	222
<i>atropine sulfate iv soln 1 mg/ml.....</i>	280	AUTOLET PLAT MIS 3.0MM.....	222
<i>atropine sulfate ophth soln 1%</i>	254	AUTOSHIELD MIS 30GX5MM.....	230
<i>atropine sulfate soln prefill syr 0.5 mg/5ml</i> <i>(0.1 mg/ml)</i>	280	AUVELITY TAB 45-105MG.....	68
<i>atropine sulfate soln prefill syr 1 mg/10ml</i> <i>(0.1 mg/ml)</i>	280	AUVI-Q INJ 0.15MG	288
ATROVENT HFA AER 17MCG	52	AUVI-Q INJ 0.1MG	288
AUBAGIO TAB 14MG.....	268	AUVI-Q INJ 0.3MG	288
AUBAGIO TAB 7MG	268	AVALIDE TAB 150-12.5.....	95
<i>aubra eq tab 0.1-0.02</i>	147	AVALIDE TAB 300-12.5.....	95
AUDENZ INJ	285	AVAPRO TAB 150MG	92
AUGMENTIN SUS 125/5ML.....	264	AVAPRO TAB 300MG	92
AUGMENTIN SUS ES-600	264	AVAPRO TAB 75MG.....	92
AUGTYRO CAP 160MG.....	110	AVASTIN INJ	104
AUGTYRO CAP 40MG	110	AVASTIN INJ 400/16ML.....	104
AURORA LANCE MIS 30G.....	222	AVEED INJ 750/3ML.....	41
AURORA LANCE MIS THIN 23G	222	AVENOVA SOL 0.01%	172
<i>aurovela 24 tab fe 1/20</i>	147	<i>aviane tab.....</i>	147
<i>aurovela fe tab 1.5/30</i>	147	<i>avidoxy tab 100mg</i>	274
<i>aurovela fe tab 1/20.....</i>	147	AVODART CAP 0.5MG.....	201
<i>aurovela tab 1.5/30.....</i>	147	AVONEX PEN KIT 30MCG.....	268
<i>aurovela tab 1/20.....</i>	147	AVONEX PREFL KIT 30MCG.....	268
AURYXIA TAB 210MG	199	AVSOLA INJ 100MG.....	196
AUSTEDO TAB 12MG	268	AVYCAZ INJ 2-0.5GM.....	144
AUSTEDO TAB 6MG.....	268	<i>ayuna tab</i>	147
AUSTEDO TAB 9MG.....	268	<i>azacitidine for inj 100 mg</i>	102
AUSTEDO XR TAB 12MG	268	AZACTAM INJ 1GM	46
AUSTEDO XR TAB 18MG	268	AZACTAM INJ 2GM.....	46
AUSTEDO XR TAB 24MG.....	268	<i>azasan tab 100mg.....</i>	239
AUSTEDO XR TAB 30MG ER.....	268	<i>azasan tab 75 mg.....</i>	239
AUSTEDO XR TAB 36MG ER.....	268	AZASITE SOL 1%.....	256
AUSTEDO XR TAB 42MG ER.....	268	AZATHIOPRINE INJ 100MG	240
AUSTEDO XR TAB 48MG ER.....	268	<i>azathioprine tab 100 mg</i>	240
AUSTEDO XR TAB 6MG.....	268	<i>azathioprine tab 50 mg</i>	240
AUSTEDO XR TAB TITR KIT	268	<i>azathioprine tab 75 mg</i>	240
AUTO LANCET MIS	222	<i>azelaic acid gel 15%</i>	173
AUTOCODE TES BLD GLUC	177	<i>azelastine hcl nasal spray 0.1% (137</i> <i>mcg/spray)</i>	250
		<i>azelastine hcl ophth soln 0.05%.....</i>	259

<i>azelastine hcl-fluticasone prop nasal spray</i>	
137-50 mcg/act	250
AZELEX CRE 20%	158
AZILECT TAB 0.5MG	120
AZILECT TAB 1MG	120
<i>azithromycin for susp 100 mg/5ml</i>	219
<i>azithromycin for susp 200 mg/5ml</i>	219
<i>azithromycin iv for soln 500 mg</i>	219
<i>azithromycin tab 250 mg</i>	219
<i>azithromycin tab 500 mg</i>	219
<i>azithromycin tab 600 mg</i>	219
AZOPT SUS 1% OP	259
AZOR TAB 10-20MG	95
AZOR TAB 10-40MG	95
AZOR TAB 5-20MG	95
AZOR TAB 5-40MG	95
AZSTARYS CAP 26.1-5.2	16
AZSTARYS CAP 39.2-7.8	16
AZSTARYS CAP 52.3-10	16
<i>aztreonam for inj 1 gm</i>	47
<i>aztreonam for inj 2 gm</i>	47
AZULFIDINE TAB 500MG	196
AZULFIDINE TAB 500MG EN	196
<i>azurette tab</i>	147
B	
<i>bac tab</i>	31
<i>bacitracin ophth oint 500 unit/gm</i>	256
<i>bacitracin-polymyxin b ophth oint</i>	256
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	257
<i>baclofen intrathecal inj 10 mg/20ml (500 mcg/ml)</i>	248
<i>baclofen intrathecal inj 20 mg/20ml (1000 mcg/ml)</i>	248
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	248
<i>baclofen oral soln 10 mg/5ml</i>	248
<i>baclofen oral soln 5 mg/5ml</i>	248
<i>baclofen tab 10 mg</i>	248
<i>baclofen tab 20 mg</i>	248
<i>baclofen tab 5 mg</i>	248
BACMIN TAB	244
BACTRIM DS TAB 800-160	43
BACTRIM TAB 400-80MG	43

BALCOLTRA TAB 0.1-20	147
<i>balsalazide disodium cap 750 mg</i>	196
BALVERSA TAB 3MG	110
BALVERSA TAB 4MG	110
BALVERSA TAB 5MG	110
<i>balziva tab</i>	147
BANZEL SUS 40MG/ML	60
BANZEL TAB 200MG	60
BANZEL TAB 400MG	61
BAQSIMI ONE POW 3MG/DOSE	76
BAQSIMI TWO POW 3MG/DOSE	76
BARACLUDE SOL	131
BARACLUDE TAB 0.5MG	131
BARACLUDE TAB 1MG	131
BARHEMSYS INJ 10MG/4ML	83
BASAGLAR INJ 100UNIT	78
BAVENCIO INJ 20MG/ML	105
BAXDELA INJ 300MG	194
BAXDELA TAB 450MG	194
BAYER BREEZE MIS 2 TEST	177
<i>bayer low chw 81mg</i>	32
<i>bayer low tab 81mg ec</i>	32
BCG VACCINE INJ 50MG	285
BD MICROTAIN MIS LANCETS	222
BD PEN NEEDL MIS 29GX12.7	230
BD PEN NEEDL MIS 31GX5MM	230
BD PEN NEEDL MIS 31GX8MM	230
BD PEN NEEDL MIS 32GX4MM	230
BD PEN NEEDL MIS 32GX6MM	230
BEAU RX GEL	173
BECONASE AQ SUS 0.042%	251
BELBUCA MIS 150MCG	40
BELBUCA MIS 300MCG	40
BELBUCA MIS 450MCG	40
BELBUCA MIS 600MCG	40
BELBUCA MIS 750MCG	40
BELBUCA MIS 75MCG	40
BELBUCA MIS 900MCG	40
BELEODAQ INJ 500MG	110
BELLA/OPIUM SUP 16.2-30	280
BELLA/OPIUM SUP 16.2-60	280
BELRAPZO SOL 100/4ML	100
BELSOMRA TAB 10MG	215
BELSOMRA TAB 15MG	215

BELSOMRA TAB 20MG	215
BELSOMRA TAB 5MG.....	215
<i>benazepril & hydrochlorothiazide tab 10- 12.5 mg</i>	<i>95</i>
<i>benazepril & hydrochlorothiazide tab 20- 12.5 mg</i>	<i>95</i>
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	<i>95</i>
<i>benazepril & hydrochlorothiazide tab 5- 6.25 mg</i>	<i>95</i>
<i>benazepril hcl tab 10 mg</i>	<i>91</i>
<i>benazepril hcl tab 20 mg</i>	<i>91</i>
<i>benazepril hcl tab 40 mg</i>	<i>91</i>
<i>benazepril hcl tab 5 mg</i>	<i>91</i>
<i>bendamustine hcl for iv soln 100 mg</i>	<i>100</i>
<i>bendamustine hcl for iv soln 25 mg</i>	<i>100</i>
BENDEKA INJ 100/4ML	100
BENEFIX INJ 1000UNIT	203
BENEFIX INJ 2000UNIT.....	203
BENEFIX INJ 250UNIT	203
BENEFIX INJ 3000UNIT	203
BENEFIX INJ 500UNIT	203
BENICAR HCT TAB 20-12.5.....	95
BENICAR HCT TAB 40-12.5	95
BENICAR HCT TAB 40-25MG.....	95
BENICAR TAB 20MG.....	92
BENICAR TAB 40MG	92
BENICAR TAB 5MG.....	92
BENLYSTA INJ 120MG.....	242
BENLYSTA INJ 200MG/ML	242
BENLYSTA INJ 400MG	242
BENZAC AC LIQ 5% WASH	158
BENZACLIN GEL 1-5%.....	158
BENZACLIN GEL 1-5%PUMP	158
BENZALKONIUM SOL 50%.....	127
BENZALKONIUM SOL NF	127
BENZAMYCIN GEL 5-3%	158
BENZNIDAZOLE TAB 100MG.....	43
BENZNIDAZOLE TAB 12.5MG	43
BENZOIN TIN NF.....	172
<i>benzonatate cap 100 mg</i>	<i>157</i>
<i>benzonatate cap 150 mg</i>	<i>157</i>
<i>benzonatate cap 200 mg</i>	<i>157</i>
<i>benzoyl peroxide foam 9.8%</i>	<i>158</i>

<i>benzoyl peroxide gel 8%</i>	<i>158</i>
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	<i>159</i>
<i>benzoyl peroxide-hydrocortisone lotion 5- 0.5%</i>	<i>159</i>
<i>benzphetamine hcl tab 50 mg</i>	<i>14</i>
<i>benztropine mesylate inj 1 mg/ml</i>	<i>118</i>
<i>benztropine mesylate tab 0.5 mg</i>	<i>118</i>
<i>benztropine mesylate tab 1 mg</i>	<i>118</i>
<i>benztropine mesylate tab 2 mg</i>	<i>118</i>
BEOVU INJ 6/0.05ML	255
bepotastine besilate ophth soln 1.5%	259
BEPREVE DRO 1.5% OP	259
BERINERT INJ 500UNIT	206
BESIVANCE SUS 0.6%	256
BESPONSA INJ 0.9MG	105
BESREMI SOL 500MCG.....	115
BETADINE SOL 5% OP.....	256
<i>betaine powder for oral solution</i>	<i>187</i>
BETAMETH COM INJ 7MG/ML	153
BETAMETH SOD INJ 12MG/2ML.....	153
BETAMETH SOD INJ 6MG/ML	153
<i>betamethasone dipropionate augmented cream 0.05%.....</i>	<i>166</i>
<i>betamethasone dipropionate augmented gel 0.05%.....</i>	<i>166</i>
<i>betamethasone dipropionate augmented lotion 0.05%</i>	<i>166</i>
<i>betamethasone dipropionate augmented oint 0.05%</i>	<i>166</i>
<i>betamethasone dipropionate cream 0.05%</i>	<i>167</i>
<i>betamethasone dipropionate lotion 0.05%</i>	<i>167</i>
<i>betamethasone dipropionate oint 0.05%</i>	<i>167</i>
<i>betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>	<i>153</i>
<i>betamethasone valerate aerosol foam 0.12%</i>	<i>167</i>
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	<i>167</i>
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	<i>167</i>

<i>betamethasone valerate oint 0.1% (base equivalent)</i>	167	<i>bimatoprost ophth soln 0.03%</i>	260
BETAPACE AF TAB 120MG	135	BIMZELX INJ 160MG/ML	163
BETAPACE AF TAB 160MG	135	BIMZELX INJ 320MG/2	163
BETAPACE AF TAB 80MG	135	BINOSTO TAB 70MG	184
BETAPACE TAB 120MG	135	BIONECT AER 0.2%	174
BETAPACE TAB 160MG	135	BIONECT CRE 0.2%	174
BETAPACE TAB 80MG	135	BIONECT GEL 0.2%	174
BETA-PHOS/AC INJ 3-3MG/ML	153	BIOSCANNER TES GLUCOSE	177
BETASERON INJ 0.3MG	268	BIOSTEP MIS 4	174
<i>betaxolol hcl ophth soln 0.5%</i>	254	BIOTEL CARE TES STRIPS	177
<i>betaxolol hcl tab 10 mg</i>	134	BIOTHRAX INJ	285
<i>betaxolol hcl tab 20 mg</i>	134	<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	283
<i>bethanechol chloride tab 10 mg</i>	285	<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	95
<i>bethanechol chloride tab 25 mg</i>	285	<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	95
<i>bethanechol chloride tab 5 mg</i>	285	<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	95
<i>bethanechol chloride tab 50 mg</i>	285	<i>bisoprolol fumarate tab 10 mg</i>	134
BETHKIS NEB 300/4ML	20	<i>bisoprolol fumarate tab 5 mg</i>	134
BETIMOL SOL 0.25% OP	254	BIVALIR/NACL INJ 250/50	59
BETIMOL SOL 0.5% OP	254	BIVALIR/NACL INJ 500/100	59
BETOPTIC-S SUS 0.25% OP	254	<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	59
BEVACIZUMAB INJ 2.75MG	255	<i>bivalirudin trifluoroacetate iv soln 250 mg/50ml (base eq)</i>	59
BEVACIZUMAB INJ 3.75MG	255	BIVIGAM INJ 10%	261
BEVESPI AER 9-4.8MCG	54	BIZENGRI INJ 750 DOSE	105
BEVYXXA CAP 40MG	57	BKEMV INJ 300/30ML	206
BEVYXXA CAP 80MG	57	<i>bleomycin sulfate for inj 15 unit</i>	109
<i>bexarotene cap 75 mg</i>	115	<i>bleomycin sulfate for inj 30 unit</i>	109
<i>bexarotene gel 1%</i>	162	BLINCYTO INJ 35MCG	105
BEXSERO INJ	285	<i>blisovi 24 tab fe 1/20</i>	147
BEYAZ TAB	147	<i>blisovi fe tab 1.5/30</i>	147
BEYFORTUS INJ 100MG/ML	263	<i>blisovi fe tab 1/20</i>	147
BEYFORTUS INJ 50/0.5ML	263	BLOOD GLUCOS TES	177
BG STAR TES BLD GLUC	177	BLOOD GLUCOS TES PREMIUM	177
BIAFINE EMU	174	BLOOD GLUCOS TES STRIPS	177
<i>bicalutamide tab 50 mg</i>	107	BLOXIVERZ INJ 10/10ML	99
BICILLIN C-R INJ 1200000	264	BLOXIVERZ INJ 5MG/10ML	99
BICILLIN C-R INJ 900/300	264	BOCASAL POW	243
BICILLIN L-A INJ 1200000	263	BONJESTA TAB 20-20MG	83
BICILLIN L-A INJ 2400000	263	BONSITY INJ 560/2.24	184
BICILLIN L-A INJ 600000	263		
BIDIL TAB	141		
BIJUVA CAP 1-100MG	192		
BIKTARVY TAB	128		
BILTRICIDE TAB 600MG	43		

BOOSTRIX INJ	280	<i>brimonidine tartrate ophth soln 0.2%</i>	255
BORIC ACID GRA.....	172	<i>brimonidine tartrate-timolol maleate ophth</i>	
<i>bortezomib for inj 3.5 mg</i>	110	<i>soln 0.2-0.5%</i>	254
BORTEZOMIB INJ 3.5/1.4.....	110	BRINEURA KIT 150/5ML.....	187
BORTEZOMIB INJ 3.5MG	110	<i>brinzolamide ophth susp 1%</i>	259
<i>bosentan tab 125 mg</i>	143	BRIVIACT INJ 50MG/5ML.....	61
<i>bosentan tab 62.5 mg</i>	143	BRIVIACT SOL 10MG/ML	61
BOSULIF CAP 100MG	110	BRIVIACT TAB 100MG	61
BOSULIF CAP 50MG.....	110	BRIVIACT TAB 10MG.....	61
BOSULIF TAB 100MG.....	110	BRIVIACT TAB 25MG	61
BOSULIF TAB 400MG.....	110	BRIVIACT TAB 50MG	61
BOSULIF TAB 500MG.....	110	BRIVIACT TAB 75MG	61
BOTOX INJ 100UNIT	251	BRIXADI SOL 128/0.36.....	40
BOTOX INJ 200UNIT	251	BRIXADI SOL 16/0.32	40
BRAFTOVI CAP 75MG	110	BRIXADI SOL 24/0.48	40
BREEZA ORAL SOL ABD/PELV	177	BRIXADI SOL 32/0.64	40
BREEZA ORAL SOL CONTRAST	177	BRIXADI SOL 64/0.18.....	40
BREEZE 2 MIS TEST	177	BRIXADI SOL 8/0.16ML	40
BRENZAVVY TAB 20MG.....	80	BRIXADI SOL 96/0.27	40
BREO ELLIPTA INH 100-25	54	<i>bromfenac sodium ophth soln 0.07% (base</i>	
BREO ELLIPTA INH 200-25.....	54	<i>equivalent)</i>	259
BREO ELLIPTA INH 50-25MCG.....	54	<i>bromfenac sodium ophth soln 0.075%</i>	
BREVIBLOC DS SOL 2000MG	134	<i>(base equivalent)</i>	259
BREVIBLOC INJ 10MG/ML.....	134	<i>bromfenac sodium ophth soln 0.09% (base</i>	
BREVIBLOC PM SOL 2500MG	134	<i>equiv) (once-daily)</i>	259
BREVIBLOC SOL.....	134	<i>bromocriptine mesylate cap 5 mg (base</i>	
BREVIBLOC SOL 10MG/ML	134	<i>equivalent)</i>	118
BREVIBLOC SOL 2000MG	134	<i>bromocriptine mesylate tab 2.5 mg (base</i>	
BREVIBLOC SOL 2500MG	134	<i>equivalent)</i>	118
BREVITAL SOD INJ 500MG	200	BROMSITE DRO 0.075%OP	259
BREXAFEMME TAB 150MG.....	84	BRONCHITOL CAP 40MG.....	273
<i>breyana aer 160/4.5</i>	54	BROVANA NEB 15MCG.....	55
<i>breyana aer 80/4.5.....</i>	54	BRUKINSA CAP 80MG.....	110
BREZTRI AERO AER SPHERE.....	55	BRYHALI LOT 0.01%	167
BRIDION INJ 200/2ML	82	BSS PLUS SOL OP	259
BRIDION INJ 500/5ML	82	BSS SOL OP	259
<i>briellyn tab</i>	147	<i>budesonide delayed release particles cap 3</i>	
BRILINTA TAB 60MG.....	208	<i>mg</i>	153
BRILINTA TAB 90MG.....	208	<i>budesonide inhalation susp 0.25 mg/2ml</i>	53
BRIMO/DORZO SOL 0.15-2%.....	255	<i>budesonide inhalation susp 0.5 mg/2ml ..</i>	53
<i>brimonidine tartrate gel 0.33% (base</i>		<i>budesonide inhalation susp 1 mg/2ml</i>	53
<i>equivalent)</i>	173	<i>budesonide rectal foam 2 mg/act</i>	42
<i>brimonidine tartrate ophth soln 0.1%</i>	255	<i>budesonide tab er 24hr 9 mg.....</i>	153
<i>brimonidine tartrate ophth soln 0.15% ...</i>	255		

<i>budesonide-formoterol fumarate dihyd</i> <i>aerosol 160-4.5 mcg/act</i>	55
<i>budesonide-formoterol fumarate dihyd</i> <i>aerosol 80-4.5 mcg/act</i>	55
<i>bumetanide inj 0.25 mg/ml</i>	182
<i>bumetanide tab 0.5 mg</i>	182
<i>bumetanide tab 1 mg</i>	182
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<i>BUMEX TAB 0.5MG</i>	182
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<i>BUPHENYL TAB 500MG</i>	188
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<i>bupivacaine hcl inj 0.25%</i>	217
<i>bupivacaine hcl inj 0.5%</i>	217
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.25%</i>	217
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.5%</i>	217
<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.75%</i>	217
<i>BUPIVACAINE INJ 0.125%</i>	217
<i>BUPIVACAINE INJ 0.25%</i>	217
<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000</i>	216
<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000 (pf)</i>	216
<i>BUPIVACAINE INJ 0.5%</i>	217
<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000</i>	216
<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000 (pf)</i>	216
<i>BUPIVACAINE INJ 2.5MG/ML</i>	217
<i>BUPIVACAINE INJ 5MG/ML</i>	217
<i>bupivacaine inj spinal</i>	217
<i>BUPIVACAINE/ INJ EPI 0.25</i>	216
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<i>buprenorphine hcl inj 0.3 mg/ml (base</i> <i>equiv)</i>	40
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	40
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl film 12-3</i> <i>mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl film 2-</i> <i>0.5 mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl film 4-1</i> <i>mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl film 8-2</i> <i>mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5</i> <i>mg (base equiv)</i>	40
<i>buprenorphine hcl-naloxone hcl sl tab 8-2</i> <i>mg (base equiv)</i>	40
<i>buprenorphine td patch weekly 10 mcg/hr</i>	40
<i>buprenorphine td patch weekly 15 mcg/hr</i>	40
<i>buprenorphine td patch weekly 20 mcg/hr</i>	40
<i>buprenorphine td patch weekly 5 mcg/hr</i>	40
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	40
<i>bupropion hcl (smoking deterrent) tab er</i> <i>12hr 150 mg</i>	270
<i>bupropion hcl tab 100 mg</i>	68
<i>bupropion hcl tab 75 mg</i>	68
<i>bupropion hcl tab er 12hr 100 mg</i>	68
<i>bupropion hcl tab er 12hr 150 mg</i>	68
<i>bupropion hcl tab er 12hr 200 mg</i>	68
<i>bupropion hcl tab er 24hr 150 mg</i>	68
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<i>buspirone hcl tab 10 mg</i>	49
<i>buspirone hcl tab 15 mg</i>	49
<i>buspirone hcl tab 30 mg</i>	49
<i>buspirone hcl tab 5 mg</i>	48
<i>buspirone hcl tab 7.5 mg</i>	48
<i>busulfan inj 6 mg/ml</i>	100
<i>BUSULFEX INJ 6MG/ML</i>	100
<i>BUT/ASA/CAF TAB</i>	31
<i>BUTAL/APAP CAP 50-300MG</i>	31
<i>butalbital-acetaminophen cap 50-300 mg</i>	31
<i>butalbital-acetaminophen tab 25-325 mg</i>	31
<i>butalbital-acetaminophen tab 50-325 mg</i>	31

<i>butalbital-acetaminophen-caff w/ cod cap</i> 50-300-40-30 mg	39
<i>butalbital-acetaminophen-caff w/ cod cap</i> 50-325-40-30 mg.....	39
<i>butalbital-acetaminophen-caffeine cap</i> 50- 300-40 mg.....	31
<i>butalbital-acetaminophen-caffeine cap</i> 50- 325-40 mg	31
<i>butalbital-acetaminophen-caffeine tab</i> 50- 325-40 mg	31
<i>butalbital-aspirin-caff w/ codeine cap</i> 50- 325-40-30 mg.....	39
<i>butalbital-aspirin-caffeine cap</i> 50-325-40 mg.....	31
<i>butorphanol tartrate inj</i> 1 mg/ml.....	40
<i>butorphanol tartrate inj</i> 2 mg/ml	40
<i>butorphanol tartrate nasal soln</i> 10 mg/ml	40
BUTRANS DIS 10MCG/HR	40
BUTRANS DIS 15MCG/HR.....	40
BUTRANS DIS 20MCG/HR.....	40
BUTRANS DIS 5MCG/HR.....	40
BUTRANS DIS 7.5/HR.....	40
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BYETTA INJ 10MCG.....	77
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<i>calcipotriene soln</i> 0.005% (50 mcg/ml)	163
<i>calcipotriene-betamethasone dipropionate</i> <i>oint</i> 0.005-0.064%	167
<i>calcipotriene-betamethasone dipropionate</i> <i>susp</i> 0.005-0.064%	167
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<i>calcitriol inj</i> 1 mcg/ml	188
<i>calcitriol oint</i> 3 mcg/gm.....	163
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CALCIUM CHLO INJ 10%	234
<i>calcium chloride inj</i> 10%	234
CALCIUM GLUC INJ 10%	234
CALCIUM GLUC INJ 100MG/ML.....	234
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<i>camila tab 0.35mg</i>	152	CARAC CRE 0.5%	162
CAMPTOSAR INJ 100/5ML	117	CARAFATE SUS 1GM/10ML	282
CAMPTOSAR INJ 300/15ML	117	CARBAGLU TAB 200MG	188
CAMPTOSAR INJ 40MG/2ML	117	<i>carbamazepine cap er 12hr 100 mg</i>	61
<i>camrese lo tab</i>	147	<i>carbamazepine cap er 12hr 200 mg</i>	61
<i>camrese tab</i>	147	<i>carbamazepine cap er 12hr 300 mg</i>	61
CAMZYOS CAP 10MG	140	<i>carbamazepine chew tab 100 mg</i>	61
CAMZYOS CAP 15MG	140	<i>carbamazepine susp 100 mg/5ml</i>	61
CAMZYOS CAP 2.5MG	140	<i>carbamazepine tab 200 mg</i>	61
CAMZYOS CAP 5MG	140	<i>carbamazepine tab er 12hr 100 mg</i>	61
CANASA SUP 1000MG	196	<i>carbamazepine tab er 12hr 200 mg</i>	61
CANCIDAS INJ 50MG	84	<i>carbamazepine tab er 12hr 400 mg</i>	61
CANCIDAS INJ 70MG	84	CARBATROL CAP 100MG	61
<i>candesartan cilexetil tab 16 mg</i>	92	CARBATROL CAP 200MG	61
<i>candesartan cilexetil tab 32 mg</i>	92	CARBATROL CAP 300MG	61
<i>candesartan cilexetil tab 4 mg</i>	92	<i>carbidopa & levodopa orally disintegrating</i>	
<i>candesartan cilexetil tab 8 mg</i>	92	<i>tab 10-100 mg</i>	118
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa & levodopa orally disintegrating</i>	
<i>tab 16-12.5 mg</i>	95	<i>tab 25-100 mg</i>	119
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa & levodopa orally disintegrating</i>	
<i>tab 32-12.5 mg</i>	95	<i>tab 25-250 mg</i>	119
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa & levodopa tab 10-100 mg</i>	119
<i>tab 32-25 mg</i>	95	<i>carbidopa & levodopa tab 25-100 mg</i>	119
<i>capecitabine tab 150 mg</i>	102	<i>carbidopa & levodopa tab 25-250 mg</i>	119
<i>capecitabine tab 500 mg</i>	102	<i>carbidopa & levodopa tab er 25-100 mg</i>	119
CAPHOSOL SOL	243	<i>carbidopa & levodopa tab er 50-200 mg</i>	119
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CAPLYTA CAP 21MG	121	<i>carbidopa-levodopa-entacapone tabs 12.5-</i>	
CAPLYTA CAP 42MG	121	<i>50-200 mg</i>	119
CAPRELSA TAB 100MG	110	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPRELSA TAB 300MG	111	<i>18.75-75-200 mg</i>	119
<i>captopril & hydrochlorothiazide tab 25-15</i>		<i>carbidopa-levodopa-entacapone tabs 25-</i>	
<i>mg</i>	95	<i>100-200 mg</i>	119
<i>captopril & hydrochlorothiazide tab 25-25</i>		<i>carbidopa-levodopa-entacapone tabs</i>	
<i>mg</i>	95	<i>31.25-125-200 mg</i>	119
<i>captopril & hydrochlorothiazide tab 50-15</i>		<i>carbidopa-levodopa-entacapone tabs 37.5-</i>	
<i>mg</i>	95	<i>150-200 mg</i>	119
<i>captopril & hydrochlorothiazide tab 50-25</i>		<i>carbidopa-levodopa-entacapone tabs 50-</i>	
<i>mg</i>	95	<i>200-200 mg</i>	119
<i>captopril tab 100 mg</i>	91	CARBINOXAMIN TAB 6MG	86
<i>captopril tab 12.5 mg</i>	91	<i>carbinoxamine maleate extended release</i>	
<i>captopril tab 25 mg</i>	91	<i>susp 4 mg/5ml</i>	86
<i>captopril tab 50 mg</i>	91	<i>carbinoxamine maleate soln 4 mg/5ml</i>	86

<i>carbinoxamine maleate tab 4 mg</i>	86	CAREONE LANC MIS THIN 23G	222
<i>carboplatin iv soln 150 mg/15ml</i>	100	CARESENS 30G MIS LANCETS	222
<i>carboplatin iv soln 450 mg/45ml</i>	100	CARESENS N TES	177
<i>carboplatin iv soln 50 mg/5ml</i>	100	CARESENS N TES GLUCOSE	177
<i>carboplatin iv soln 600 mg/60ml</i>	100	CARETOUCH MIS LANC 26G.....	222
<i>carboprost tromethamine im soln 250</i>		CARETOUCH MIS LANC 28G.....	222
<i>mcg/ml</i>	261	CARETOUCH MIS LANC 30G	222
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CARDIOPL IND SOL 4:1	141	CARETOUCH MIS TWIST 33	222
CARDIOPL IND SOL 8:1	141	<i>carglumic acid soluble tab 200 mg</i>	188
CARDIOPL IND SOL LOW DEX8.....	141	CARIMUNE NF INJ 6GM	261
CARDIOPL IND SOL NON-EN 8.....	141	<i>carisoprodol tab 250 mg</i>	248
CARDIOPL IND SOL PLASMA 4	141	<i>carisoprodol tab 350 mg</i>	248
CARDIOPL IND SOL PLS/TROM	141	<i>carmustine for inj 100 mg</i>	100
CARDIOPL MN SOL 8:1.....	141	CARNITOR INJ 1GM/5ML.....	188
CARDIOPL MN SOL PLS/TROM.....	141	CARNITOR SF SOL 1GM/10ML	188
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CARDIOPL MN SOL LOW TROM	141	CARNITOR TAB 330MG.....	188
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CARDIOPLEGI SOL DEL NIDO	141	<i>carteolol hcl ophth soln 1%</i>	254
CARDIOPLEGIA SOL MAIN 4:1	141	<i>cartia xt cap 120/24hr</i>	137
CARDIOPLEGIC SOL	141	<i>cartia xt cap 180/24hr</i>	137
<i>cardioplegic soln</i>	141	<i>cartia xt cap 240/24hr</i>	137
CARDIZEM CD CAP 120MG/24	136	<i>cartia xt cap 300/24hr</i>	137
CARDIZEM CD CAP 180MG/24.....	137	<i>carvedilol phosphate cap er 24hr 10 mg</i> .	133
CARDIZEM CD CAP 240MG/24	137	<i>carvedilol phosphate cap er 24hr 20 mg</i> .	133
CARDIZEM CD CAP 360MG/24	137	<i>carvedilol phosphate cap er 24hr 40 mg</i> .	133
CARDIZEM LA TAB 120MG	137	<i>carvedilol phosphate cap er 24hr 80 mg</i> .	133
CARDIZEM LA TAB 180MG	137	<i>carvedilol tab 12.5 mg</i>	133
CARDIZEM LA TAB 240MG	137	<i>carvedilol tab 25 mg</i>	133
CARDIZEM LA TAB 300MG/24	137	<i>carvedilol tab 3.125 mg</i>	133
CARDIZEM LA TAB 360MG	137	<i>carvedilol tab 6.25 mg</i>	133
CARDIZEM LA TAB 420MG/24	137	CASODEX TAB 50MG	107
CARDIZEM TAB 120MG	137	<i>caspofungin acetate for iv soln 50 mg</i>	84
CARDIZEM TAB 30MG	137	<i>caspofungin acetate for iv soln 70 mg</i>	84
CARDIZEM TAB 60MG	137	CASPOFUNGIN INJ 50MG	84
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<i>cefaclor cap 500 mg</i>	145		146
CEFACLOR ER TAB 500MG	145	<i>cefpodoxime proxetil tab 100 mg</i>	146
<i>cefaclor for susp 250 mg/5ml</i>	145	<i>cefpodoxime proxetil tab 200 mg</i>	146
<i>cefadroxil cap 500 mg</i>	144	<i>cefprozil for susp 125 mg/5ml</i>	145
<i>cefadroxil for susp 250 mg/5ml</i>	145	<i>cefprozil for susp 250 mg/5ml</i>	145
<i>cefadroxil for susp 500 mg/5ml</i>	145	<i>cefprozil tab 250 mg</i>	145
<i>cefadroxil tab 1 gm</i>	145	<i>cefprozil tab 500 mg</i>	145
CEFAZOL/DEX SOL 1GM	145	<i>ceftazidime for inj 1 gm</i>	146
CEFAZOL/DEX SOL 2GM	145	<i>ceftazidime for inj 6 gm</i>	146
CEFAZOLIN INJ 100GM	145	<i>ceftazidime for iv soln 2 gm</i>	146
CEFAZOLIN INJ 1GM/50ML	145	CEFTRIAX/DEX INJ 1GM	146
CEFAZOLIN INJ 2GM	145	CEFTRIAX/DEX INJ 2GM	146
CEFAZOLIN INJ 300GM	145	CEFTRIAXONE INJ 100GM	146
CEFAZOLIN INJ 3GM	145	<i>ceftriaxone sodium for inj 1 gm</i>	146
<i>cefazolin sodium for inj 1 gm</i>	145	<i>ceftriaxone sodium for inj 10 gm</i>	146
<i>cefazolin sodium for inj 10 gm</i>	145	<i>ceftriaxone sodium for inj 2 gm</i>	146
<i>cefazolin sodium for inj 2 gm</i>	145	<i>ceftriaxone sodium for inj 250 mg</i>	146
<i>cefazolin sodium for inj 3 gm</i>	145	<i>ceftriaxone sodium for inj 500 mg</i>	146
<i>cefazolin sodium for inj 500 mg</i>	145	<i>ceftriaxone sodium for iv soln 1 gm</i>	146
<i>cefazolin sodium for iv soln 1 gm</i>	145	<i>ceftriaxone sodium for iv soln 2 gm</i>	146
CEFAZOLIN SOL	145	<i>ceftriaxone sodium in dextrose inj 20</i>	
<i>cefdinir cap 300 mg</i>	146	<i>mg/ml</i>	146
<i>cefdinir for susp 125 mg/5ml</i>	146	<i>ceftriaxone sodium in dextrose inj 40</i>	
<i>cefdinir for susp 250 mg/5ml</i>	146	<i>mg/ml</i>	146
<i>cefepime hcl for inj 1 gm</i>	146	<i>cefuroxime axetil tab 250 mg</i>	145
<i>cefepime hcl for iv soln 2 gm</i>	146	<i>cefuroxime axetil tab 500 mg</i>	145
CEFEPIME INJ 1GM	146	<i>cefuroxime sodium for inj 750 mg</i>	145
CEFEPIME INJ 2G/100ML	146	<i>cefuroxime sodium for iv soln 1.5 gm</i>	146
CEFEPIME/DEX INJ 1GM	146	CELEBREX CAP 100MG	26
CEFEPIME/DEX INJ 2GM	146	CELEBREX CAP 200MG	26
<i>cefixime cap 400 mg</i>	146	CELEBREX CAP 400MG	26
<i>cefixime for susp 100 mg/5ml</i>	146	CELEBREX CAP 50MG	26
<i>cefixime for susp 200 mg/5ml</i>	146	<i>celecoxib cap 100 mg</i>	27
<i>cefotetan disodium for inj 1 gm</i>	145	<i>celecoxib cap 200 mg</i>	27
<i>cefotetan disodium for inj 2 gm</i>	145	<i>celecoxib cap 400 mg</i>	27
CEFOXITIN INJ 1GM	145	<i>celecoxib cap 50 mg</i>	26
CEFOXITIN INJ 2GM	145	CELESTONE INJ SOLUSPAN	153
<i>cefoxitin sodium for iv soln 1 gm</i>	145	CELEXA TAB 10MG	69
<i>cefoxitin sodium for iv soln 10 gm</i>	145	CELEXA TAB 20MG	69
<i>cefoxitin sodium for iv soln 2 gm</i>	145	CELEXA TAB 40MG	69
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>		CELLCEPT CAP 250MG	240
.....	146	CELLCEPT IV INJ 500MG	240
		CELLCEPT SUS 200MG/ML	240

CELLCEPT TAB 500MG.....	240	<i>chloroprocaine hcl preservative free (pf) inj</i>	
CELONTIN CAP 300MG	67	2%	218
<i>cephalexin cap 250 mg</i>	145	<i>chloroprocaine hcl preservative free (pf) inj</i>	
<i>cephalexin cap 500 mg</i>	145	3%	218
<i>cephalexin cap 750 mg</i>	145	<i>chloroquine phosphate tab 250 mg</i>	99
<i>cephalexin for susp 125 mg/5ml</i>	145	<i>chloroquine phosphate tab 500 mg</i>	99
<i>cephalexin for susp 250 mg/5ml</i>	145	<i>chlorothiazide sodium for inj 500 mg</i>	183
<i>cephalexin tab 250 mg</i>	145	<i>chlorpromazine hcl inj 25 mg/ml</i>	125
<i>cephalexin tab 500 mg</i>	145	<i>chlorpromazine hcl inj 50 mg/2ml</i>	125
CEPROTIN INJ 1000UNIT	207	<i>chlorpromazine hcl tab 10 mg</i>	125
CEPROTIN INJ 500 UNIT	207	<i>chlorpromazine hcl tab 100 mg</i>	125
CERACADE EMU.....	172	<i>chlorpromazine hcl tab 200 mg</i>	125
CERAMAX CRE	172	<i>chlorpromazine hcl tab 25 mg</i>	125
CERDELGA CAP 84MG.....	209	<i>chlorpromazine hcl tab 50 mg</i>	125
CEREBYX INJ 100/2ML	66	<i>chlorthalidone tab 25 mg</i>	183
CEREBYX INJ 500/10ML.....	66	<i>chlorthalidone tab 50 mg</i>	183
CEREZYME INJ 400UNIT	209	<i>chlorzoxazone tab 250 mg</i>	248
CERVIDIL VAG MIS 10MG INS	261	<i>chlorzoxazone tab 375 mg</i>	248
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>		<i>chlorzoxazone tab 500 mg</i>	248
.....	86	<i>chlorzoxazone tab 750 mg</i>	249
CETRAXAL SOL 0.2%	260	CHOLBAM CAP 250MG	195
<i>cetrorelix acetate for inj kit 0.25 mg</i>	185	CHOLBAM CAP 50MG.....	195
<i>cevimeline hcl cap 30 mg</i>	243	<i>cholestyramine light powder 4 gm/dose</i> .87	
CGMS CABLE MIS	222	<i>cholestyramine light powder packets 4 gm</i>	
CGMS MIS SOFTWARE	222	.....	87
<i>charlotte 24 chw fe 1/20</i>	147	<i>cholestyramine powder 4 gm/dose</i>	87
<i>chateal eq tab 0.15/30</i>	147	<i>cholestyramine powder packets 4 gm</i>	87
CHEMET CAP 100MG	81	<i>choline fenofibrate cap dr 135 mg</i>	
<i>chenodal tab 250mg</i>	195	(fenofibric acid equiv)	88
<i>child asa chw 81mg</i>	32	<i>choline fenofibrate cap dr 45 mg (fenofibric</i>	
<i>chloramphenicol sodium succinate for iv inj</i>		<i>acid equiv)</i>	88
1 gm	44	CHOR GONADOT INJ 10000UNT	185
<i>chlordiazepoxide hcl cap 10 mg</i>	49	<i>chromic chloride inj 40 mcg/10ml (4</i>	
<i>chlordiazepoxide hcl cap 25 mg</i>	49	<i>mcg/ml) (elemental cr)</i>	238
<i>chlordiazepoxide hcl cap 5 mg</i>	49	CHROMIUM CL INJ 4MCG/ML	238
<i>chlordiazepoxide hcl-clidinium bromide</i>		CIALIS TAB 10MG	142
<i>cap 5-2.5 mg</i>	280	CIALIS TAB 2.5MG.....	142
<i>chlordiazepoxide-amitriptyline tab 10-25</i>		CIALIS TAB 20MG	142
<i>mg</i>	267	CIALIS TAB 5MG.....	142
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i>		CIBINQO TAB 100MG.....	170
<i>mg</i>	267	CIBINQO TAB 200MG.....	170
CHLORHEX GLU SOL 20%.....	128	CIBINQO TAB 50MG	170
<i>chlorhexidine gluconate soln 0.12%</i>	243	<i>ciclodan sol 8%</i>	161
		<i>ciclopixox gel 0.77%</i>	161

<i>ciclopirox olamine cream 0.77% (base equiv).....</i>	161	<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	260
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	161	<i>cisatracurium besylate (pf) iv soln 10 mg/5ml (2 mg/ml)</i>	252
<i>ciclopirox shampoo 1%.....</i>	161	<i>cisatracurium besylate (pf) iv soln 200 mg/20ml (10 mg/ml)</i>	252
<i>ciclopirox solution 8%</i>	161	<i>cisatracurium besylate iv soln 20 mg/10ml (2 mg/ml)</i>	252
<i>cidofovir iv inj 75 mg/ml</i>	131	<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	100
<i>cilostazol tab 100 mg</i>	208	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	100
<i>cilostazol tab 50 mg</i>	208	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	100
<i>CILOXAN OIN 0.3% OP</i>	256	<i>CISPLATIN INJ 50MG</i>	100
<i>CILOXAN SOL 0.3% OP.....</i>	256	<i>CITALOPRAM CAP 30MG</i>	69
<i>CIMDUO TAB 300-300.....</i>	128	<i>citalopram hydrobromide oral soln 10 mg/5ml.....</i>	69
<i>CIMERLI INJ 0.3MG</i>	255	<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	69
<i>CIMERLI INJ 0.5MG</i>	255	<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	69
<i>cimetidine hcl soln 300 mg/5ml.....</i>	281	<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	69
<i>cimetidine tab 200 mg.....</i>	281	<i>CITRANATAL CAP HARMONY</i>	245
<i>cimetidine tab 300 mg.....</i>	281	<i>CITRANATAL CAP MEDLEY</i>	245
<i>cimetidine tab 400 mg.....</i>	281	<i>CITRANATAL MIS 90 DHA</i>	245
<i>cimetidine tab 800 mg.....</i>	281	<i>CITRANATAL MIS B-CALM</i>	245
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	188	<i>CITRANATAL PAK ASSURE</i>	245
<i>cinacalcet hcl tab 60 mg (base equiv).....</i>	188	<i>CITRANATAL PAK DHA</i>	245
<i>cinacalcet hcl tab 90 mg (base equiv).....</i>	188	<i>CITRANATAL PAK ESSENCE</i>	245
<i>CINQAIR INJ.....</i>	52	<i>CITRANATAL TAB BLOOM</i>	245
<i>CINRYZE SOL 500 UNIT</i>	206	<i>CITRANATAL TAB RX</i>	245
<i>CIPRO (10%) SUS 500MG/5</i>	194	<i>cladribine iv soln 10 mg/10ml (1 mg/ml) .</i>	102
<i>CIPRO (5%) SUS 250MG/5</i>	194	<i>claravis cap 10mg</i>	159
<i>CIPRO HC SUS OTIC</i>	260	<i>claravis cap 20mg</i>	159
<i>CIPRO TAB 250MG</i>	194	<i>claravis cap 30mg</i>	159
<i>CIPRO TAB 500MG</i>	194	<i>claravis cap 40mg</i>	159
<i>CIPRODEX SUS 0.3-0.1%</i>	260	<i>CLARINEX TAB 5MG</i>	86
<i>ciprofloxacin 200 mg/100ml in d5w</i>	194	<i>CLARINEX-D TAB 2.5-120</i>	157
<i>ciprofloxacin 400 mg/200ml in d5w</i>	194	<i>clarithromycin for susp 125 mg/5ml</i>	219
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	256	<i>clarithromycin for susp 250 mg/5ml</i>	219
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	260	<i>clarithromycin tab 250 mg</i>	219
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	195	<i>clarithromycin tab 500 mg</i>	219
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	195	<i>clarithromycin tab er 24hr 500 mg</i>	219
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	195	<i>CLEANLET 28G MIS LANCETS</i>	222
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....</i>	260		

<i>clemastine fumarate syrup 0.67 mg/5ml</i> (0.5 mg/5ml base eq)	86
<i>clemastine fumarate tab 2.68 mg</i>	86
<i>clemasz tab 2.68mg</i>	86
CLENPIQ SOL.....	216
CLEOCIN CAP 150MG	46
CLEOCIN CAP 300MG.....	46
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CLEOCIN PED SOL 75MG/5ML.....	46
CLEOCIN PHOS INJ 300/2ML.....	46
CLEOCIN PHOS INJ 600/4ML	46
CLEOCIN PHOS INJ 900/6ML	46
CLEOCIN PHOS INJ 9GM/60ML	46
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CLEOCIN-T LOT 1%	159
CLEVER CHECK MIS	222
CLEVER CHECK MIS 30G.....	222
CLEVER CHEK TES.....	177
CLEVER CHEK TES AUTO CD	177
CLEVER CHEK TES VOICE	177
CLEVER CHOIC TES MICRO	178
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CLEVR CHOICE TES AUTO-CD	178
CLIMARA DIS 0.025MG.....	193
CLIMARA DIS 0.0375MG	193
CLIMARA DIS 0.05MG.....	193
CLIMARA DIS 0.06MG.....	193
CLIMARA DIS 0.075MG.....	193
CLIMARA DIS 0.1MG.....	193
CLIMARA PRO DIS WEEKLY	192
<i>clindacin aer 1%</i>	159
<i>clindacin mis etz 1%</i>	159
<i>clindacin-p pad 1%</i>	159
CLINDAGEL GEL 1%.....	159
<i>clindamycin hcl cap 150 mg</i>	46
<i>clindamycin hcl cap 300 mg</i>	46
<i>clindamycin hcl cap 75 mg</i>	46
<i>clindamycin palmitate hcl for soln 75</i> <i>mg/5ml (base equiv)</i>	46
<i>clindamycin phosphate foam 1%</i>	159
<i>clindamycin phosphate gel 1% (once-daily)</i>	159
<i>clindamycin phosphate gel 1% (twice-daily)</i>	159
<i>clindamycin phosphate in d5w iv soln 300</i> <i>mg/50ml</i>	46
<i>clindamycin phosphate in d5w iv soln 600</i> <i>mg/50ml</i>	46
<i>clindamycin phosphate in d5w iv soln 900</i> <i>mg/50ml</i>	46
<i>clindamycin phosphate inj 300 mg/2ml...</i>	46
<i>clindamycin phosphate inj 600 mg/4ml...</i>	46
<i>clindamycin phosphate inj 900 mg/6ml ..</i>	46
<i>clindamycin phosphate lotion 1%</i>	159
<i>clindamycin phosphate soln 1%</i>	159
<i>clindamycin phosphate swab 1%</i>	159
<i>clindamycin phosphate vaginal cream 2%</i>	287
<i>clindamycin phosphate-benzoyl peroxide</i> <i>gel 1.2-2.5%</i>	159
<i>clindamycin phosphate-benzoyl peroxide</i> <i>gel 1-5%</i>	159
<i>clindamycin phosphate-tretinoin gel 1.2-</i> <i>0.025%</i>	159
<i>clindamycin phosph-benzoyl peroxide</i> <i>(refrig) gel 1.2 (1)-5%</i>	159
CLINDESSE CRE 2%.....	287
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CLINIMIX E INJ 4.25/D10	253
CLINIMIX E INJ 4.25/D5W	253
CLINIMIX E INJ 5%/D15W.....	253
CLINIMIX E INJ 5%/D20W.....	253
CLINIMIX INJ 4.25/D10	253
CLINIMIX INJ 4.25/D5W	253
CLINIMIX INJ 5%/D15W.....	253
CLINIMIX INJ 5%/D20W	253
CLINIMIX INJ 8/10	253
CLINIMIX INJ 8/14.....	253
<i>clinisol sf inj 15%</i>	253
CLINOLIPID EMU 20%	253
<i>clobazam suspension 2.5 mg/ml</i>	60
<i>clobazam tab 10 mg</i>	60
<i>clobazam tab 20 mg</i>	60
<i>clobetasol e cre 0.05%</i>	167
<i>clobetasol propionate cream 0.025%</i>	167
<i>clobetasol propionate cream 0.05%</i>	167

<i>clobetasol propionate emulsion foam</i>	
0.05%.....	167
<i>clobetasol propionate foam 0.05%</i>	167
<i>clobetasol propionate gel 0.05%</i>	167
<i>clobetasol propionate lotion 0.05%</i>	167
<i>clobetasol propionate oint 0.05%</i>	167
<i>clobetasol propionate shampoo 0.05%</i> ..	167
<i>clobetasol propionate soln 0.05%</i>	167
<i>clobetasol propionate spray 0.05%</i>	167
<i>CLOBEX LOT 0.05%</i>	167
<i>CLOBEX SHA 0.05%</i>	167
<i>CLOBEX SPR 0.05%</i>	167
<i>clocortolone pivalate cream 0.1%</i>	167
<i>clodan sha 0.05%</i>	167
<i>CLODERM CRE 0.1%</i>	167
<i>clofarabine iv soln 1 mg/ml</i>	102
<i>clomid tab 50mg</i>	185
<i>clomiphene citrate tab 50 mg</i>	185
<i>clomipramine hcl cap 25 mg</i>	72
<i>clomipramine hcl cap 50 mg</i>	72
<i>clomipramine hcl cap 75 mg</i>	72
<i>clonazepam orally disintegrating tab 0.125</i> <i>mg</i>	60
<i>clonazepam orally disintegrating tab 0.25</i> <i>mg</i>	60
<i>clonazepam orally disintegrating tab 0.5 mg</i>	60
<i>clonazepam orally disintegrating tab 1 mg</i>	60
<i>clonazepam orally disintegrating tab 2 mg</i>	60
<i>clonazepam tab 0.5 mg</i>	60
<i>clonazepam tab 1 mg</i>	60
<i>clonazepam tab 2 mg</i>	60
<i>clonidine hcl inj (for epidural infusion) 100</i> <i>mcg/ml</i>	31
<i>clonidine hcl inj (for epidural infusion) 500</i> <i>mcg/ml</i>	31
<i>clonidine hcl tab 0.1 mg</i>	93
<i>clonidine hcl tab 0.2 mg</i>	93
<i>clonidine hcl tab 0.3 mg</i>	93
<i>clonidine hcl tab er 12hr 0.1 mg</i>	15
<i>clonidine tab er 24hr 0.17 mg</i>	93
<i>clonidine td patch weekly 0.1 mg/24hr</i>	93
<i>clonidine td patch weekly 0.2 mg/24hr</i>	93
<i>clonidine td patch weekly 0.3 mg/24hr</i>	93
<i>clopidogrel bisulfate tab 300 mg (base</i> <i>equiv)</i>	208
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	208
<i>clorazepate dipotassium tab 15 mg</i>	50
<i>clorazepate dipotassium tab 3.75 mg</i>	49
<i>clorazepate dipotassium tab 7.5 mg</i>	50
<i>clotrimazole cream 1%</i>	161
<i>clotrimazole soln 1%</i>	161
<i>clotrimazole troche 10 mg</i>	243
<i>clotrimazole w/ betamethasone cream 1-</i> <i>0.05%</i>	161
<i>clotrimazole w/ betamethasone lotion 1-</i> <i>0.05%</i>	161
<i>clozapine orally disintegrating tab 100 mg</i>	124
<i>clozapine orally disintegrating tab 12.5 mg</i>	124
<i>clozapine orally disintegrating tab 150 mg</i>	124
<i>clozapine orally disintegrating tab 200 mg</i>	124
<i>clozapine orally disintegrating tab 25 mg</i>	124
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<i>clozapine tab 25 mg</i>	124
<i>clozapine tab 50 mg</i>	124
<i>CLOZARIL TAB 100MG</i>	124
<i>CLOZARIL TAB 25MG</i>	124
<i>C-NATE DHA CAP 28-1-200</i>	245
<i>COAGUCHEK MIS LANCETS</i>	222
<i>coal tar soln 20%</i>	173
<i>COARTEM TAB 20-120MG</i>	98
<i>COCAINE HCL SOL 40MG/ML</i>	250
<i>CODEINE SULF TAB 15MG</i>	32
<i>CODEINE SULF TAB 60MG</i>	32
<i>codeine sulfate tab 30 mg</i>	32
<i>COLAZAL CAP 750MG</i>	196
<i>colchicine cap 0.6 mg</i>	202
<i>colchicine tab 0.6 mg</i>	202

<i>colchicine w/ probenecid tab 0.5-500 mg</i>	220
.....	202
COLCRYS TAB 0.6MG	202
<i>colesevelam hcl packet for susp 3.75 gm</i>	87
<i>colesevelam hcl tab 625 mg</i>	87
COLESTID GRA 5GM	87
COLESTID TAB 1GM.....	87
<i>colestipol hcl granule packets 5 gm</i>	87
<i>colestipol hcl granules 5 gm</i>	88
<i>colestipol hcl tab 1 gm</i>	88
<i>colistimethate sod for inj 150 mg (colistin</i>	
<i>base activity)</i>	47
COLOR CONDOM MIS + LUBE	220
COLUMVI INJ 10/10ML.....	105
COLUMVI INJ 2.5MG	105
COLY-MYCIN M INJ 150MG	47
COMBIGAN SOL 0.2/0.5%	254
COMBIPATCH DIS.....	192
COMBIVENT AER 20-100	55
COMBOGESIC INJ 300-1000	27
COMETRIQ KIT 100MG.....	111
COMETRIQ KIT 140MG.....	111
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COMIRNATY INJ 2024-25	286
COMPLERA TAB.....	128
COMPLETE NAT PAK DHA	245
COMPLETENATE CHW	245
<i>compro sup 25mg</i>	125
CO-NATAL FA TAB 29-1MG.....	245
CONCEPT DHA CAP	245
CONCEPT OB CAP	245
CONCERTA TAB 18MG	16
CONCERTA TAB 27MG	16
CONCERTA TAB 36MG	16
CONCERTA TAB 54MG	16
CONDOMS MIS.....	220
CONDYLOX GEL 0.5%	171
CONFIRM/MICR TES GLUCOSE.....	178
CONJUPRI TAB 2.5MG	137
CONSENSI TAB 10-200MG	136
CONSENSI TAB 2.5-200	136
CONSENSI TAB 5-200MG.....	136
<i>constulose sol 10gm/15</i>	216
CONTOUR TES BLD GLUC	178
CONTOUR TES NEXT	178
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CONZIP CAP 100MG	32
CONZIP CAP 200MG	32
CONZIP CAP 300MG	32
COOL BLOOD TES GLUCOSE	178
COPAXONE INJ 40MG/ML	268
COPIKTRA CAP 15MG.....	111
COPIKTRA CAP 25MG	111
COPPER INJ 0.4MG/ML.....	238
CORDRAN 80X3 TAP 4MCG/CM.....	167
CORDRAN CRE 0.025%	167
CORDRAN CRE 0.05%	167
CORDRAN LOT 0.05%.....	167
CORDRAN OIN 0.05%	167
COREG CR CAP 10MG	133
COREG CR CAP 20MG.....	133
COREG CR CAP 40MG	133
COREG CR CAP 80MG	133
COREG TAB 12.5MG.....	134
COREG TAB 25MG	134
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<i>coremino tab 135mg</i>	274
<i>coremino tab 45mg</i>	274
<i>coremino tab 90mg</i>	274
CORIFACT KIT	203
CORLANOR SOL 5MG/5ML.....	144
CORLANOR TAB 5MG	144
CORLANOR TAB 7.5MG	144
CORTEF TAB 10MG	153
CORTEF TAB 20MG.....	153
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CORTENEMA ENE 100MG	42	CRESTOR TAB 40MG.....	89
CORTIFOAM AER 90MG	42	CRESTOR TAB 5MG	89
CORTISPORIN SUS -TC OTIC	260	CREXONT CAP 35-140MG	119
CORTROPHIN INJ 80UNT/ML	185	CREXONT CAP 52.5-210	119
CORVERT INJ 1MG/10ML	51	CREXONT CAP 70-280MG	119
CORVITE 150 TAB.....	212	CREXONT CAP 87.5-350.....	119
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COSENTYX INJ 150MG/ML	163	CROFAB INJ	261
COSENTYX INJ 300DOSE.....	164	<i>cromolyn sodium ophth soln 4%.....</i>	259
COSENTYX INJ 75MG/0.5	163	<i>cromolyn sodium oral conc 100 mg/5ml</i>	195
COSENTYX PEN INJ 150MG/ML.....	164	<i>cromolyn sodium soln nebu 20 mg/2ml...</i>	52
COSENTYX PEN INJ 300DOSE	164	<i>crotan lot 10%</i>	173
COSENTYX UNO INJ 300/2ML	164	CRYODOSE AER TA.....	171
COSOPT PF SOL 2%-0.5%	254	<i>cryselle-28 tab 28 tabs.....</i>	147
COSOPT SOL 2-0.5%OP	254	CRYSVITA INJ 10MG/ML	188
COTELLIC TAB 20MG.....	111	CRYSVITA INJ 20MG/ML.....	188
COTEMPLA XR TAB 17.3MG	16	CRYSVITA INJ 30MG/ML.....	188
COTEMPLA XR TAB 25.9MG	16	CTEXLI TAB 250MG	195
COTEMPLA XR TAB 8.6MG	16	<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	
COUMADIN TAB 10MG.....	56	.....	238
COUMADIN TAB 1MG	56	CUPRIMINE CAP 250MG.....	238
COUMADIN TAB 2.5MG	56	CURITY HYPER MIS 1/2	174
COUMADIN TAB 2MG.....	56	CURITY NACL PAD 6.....	174
COUMADIN TAB 3MG	56	<i>curity salin sol 0.9% irr.....</i>	201
COUMADIN TAB 4MG	56	CUROSURF SUS 120/1.5	274
COUMADIN TAB 5MG	56	CUROSURF SUS 240/3ML	274
COUMADIN TAB 6MG	56	CUTAQUIG SOL 1.65GM	261
COUMADIN TAB 7.5MG	56	CUTAQUIG SOL 1GM	261
COZAAR TAB 100MG.....	92	CUTAQUIG SOL 2GM	261
COZAAR TAB 25MG.....	92	CUTAQUIG SOL 3.3GM	261
COZAAR TAB 50MG	92	CUTAQUIG SOL 4GM	261
CRENESSITY CAP 100MG.....	185	CUTAQUIG SOL 8GM	261
CRENESSITY CAP 50MG.....	185	CUVITRU INJ 2GM/10ML	261
CRENESSITY SOL 50MG/ML.....	185	CUVITRU INJ 4GM/20ML.....	261
CREON CAP 12000UNT.....	181	CUVITRU INJ 8GM/40ML	261
CREON CAP 24000UNT	181	CUVITRU SOL 1GM/5ML	261
CREON CAP 3000UNIT	181	CUVPOSA SOL 1MG/5ML.....	280
CREON CAP 36000UNT	181	CUVRIOR TAB 300MG	238
CREON CAP 6000UNIT	181	CVS ADVANCED TES GLUCOSE	178
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CRESEMBA INJ 372MG.....	85	CVS GLUCOSE TES STRIPS	178
CRESTOR TAB 10MG	89	CVS LANCETS MIS ORIGINAL	223
CRESTOR TAB 20MG.....	89	CVS LANCETS MIS THIN 26G.....	223

<i>cvs nicotine dis 14mg/24h</i>	270	<i>cycloserine cap 250 mg</i>	99
<i>cvs nicotine dis 21mg/24h</i>	270	CYCLOSET TAB 0.8MG	77
<i>cvs nicotine dis 7mg/24hr</i>	270	<i>cyclosporine (ophth) emulsion 0.05%</i> ...	257
<i>cvs nicotine gum 2mg cinn</i>	270	<i>cyclosporine cap 100 mg</i>	240
<i>cvs nicotine gum 2mg mint</i>	270	<i>cyclosporine cap 25 mg</i>	240
<i>cvs nicotine gum 2mg orig</i>	270	<i>cyclosporine modified cap 100 mg</i>	240
<i>cvs nicotine gum 2mgfruit</i>	270	<i>cyclosporine modified cap 25 mg</i>	240
<i>cvs nicotine gum 4mg</i>	270	<i>cyclosporine modified cap 50 mg</i>	240
<i>cvs nicotine gum 4mg cinn</i>	270	<i>cyclosporine modified oral soln 100 mg/ml</i>	240
<i>cvs nicotine gum 4mg mint</i>	270	CYKLOKAPRON INJ 100MG/ML.....	212
<i>cvs nicotine gum 4mg orig</i>	271	CYLTEZO INJ 10/0.2ML.....	21
<i>cvs nicotine gum 4mgfruit</i>	271	CYLTEZO INJ 20/0.4ML.....	21
<i>cvs nicotine loz 2mg</i>	271	CYLTEZO INJ 40/0.8ML.....	21
<i>cvs nicotine loz 2mg mint</i>	271	CYMBALTA CAP 20MG	71
<i>cvs nicotine loz 4mg mint</i>	271	CYMBALTA CAP 30MG	71
CVS TRUE MET TES GLUCOSE.....	178	CYMBALTA CAP 60MG	71
<i>cyanocobalamin inj 1000 mcg/ml</i>	209	<i>cyproheptadine hcl syrup 2 mg/5ml</i>	87
<i>cyanocobalamin nasal spray 500</i> <i>mcg/0.1ml</i>	209	<i>cyproheptadine hcl tab 4 mg</i>	87
CYANOKIT INJ 5GM	82	CYRAMZA INJ 100/10ML	104
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i> ..	249	CYRAMZA INJ 500/50ML.....	104
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i> ..	249	<i>cyred eq tab</i>	147
<i>cyclobenzaprine hcl tab 10 mg</i>	249	CYSTADANE POW	188
<i>cyclobenzaprine hcl tab 5 mg</i>	249	CYSTAGON CAP 150MG	201
<i>cyclobenzaprine hcl tab 7.5 mg</i>	249	CYSTAGON CAP 50MG	201
CYCLOGYL SOL 0.5% OP	255	CYSTARAN SOL 0.44%	259
CYCLOGYL SOL 1% OP	255	<i>cytarabine inj 20 mg/ml</i>	102
CYCLOGYL SOL 2% OP.....	255	<i>cytarabine inj pf 100 mg/ml</i>	102
CYCLOMYDRIL SOL OP	255	<i>cytarabine inj pf 20 mg/ml</i>	102
<i>cyclopentolate hcl ophth soln 1%</i>	255	CYTOGAM INJ	261
CYCLOPHOSPH INJ 1000MG	100	CYTOMEL TAB 25MCG.....	276
CYCLOPHOSPH INJ 1GM/2ML	100	CYTOMEL TAB 50MCG	276
CYCLOPHOSPH INJ 2000MG.....	100	CYTOMEL TAB 5MCG.....	276
CYCLOPHOSPH INJ 2GM/4ML	100	CYTOTEC TAB 100MCG	283
CYCLOPHOSPH INJ 500/5ML.....	100	CYTOTEC TAB 200MCG	283
CYCLOPHOSPH INJ 500MG/ML.....	100	<i>cytra k gra crystals</i>	200
CYCLOPHOSPH TAB 25MG	100	D	
CYCLOPHOSPH TAB 50MG	100	D10W/NACL INJ 0.2%.....	234
CYCLOPHOSPHA INJ 2GM/10ML	100	D2.5W/NACL INJ 0.45%.....	234
<i>cyclophosphamide cap 25 mg</i>	100	D5W/LYTES INJ #48	234
<i>cyclophosphamide cap 50 mg</i>	100	D5W/NACL INJ 0.3%	234
<i>cyclophosphamide for inj 1 gm</i>	100	<i>dabigatran etexilate mesylate cap 110 mg</i> <i>(etexilate base eq)</i>	59
<i>cyclophosphamide for inj 2 gm</i>	101		
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<i>dabigatran etexilate mesylate cap 150 mg</i> (etexilate base eq)	59	DARZALEX SOL 100/5ML.....	105
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<i>dacarbazine for inj 200 mg</i>	115	<i>dasatinib tab 140 mg</i>	111
<i>dactinomycin for inj 0.5 mg</i>	109	<i>dasatinib tab 20 mg</i>	111
<i>dalfampridine tab er 12hr 10 mg</i>	268	<i>dasatinib tab 50 mg</i>	111
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		<i>deferasirox tab 180 mg</i>	81
		<i>deferasirox tab 360 mg</i>	81
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<i>deflazacort tab 36 mg</i>	153	<i>desipramine hcl tab 10 mg</i>	72
<i>deflazacort tab 6 mg</i>	153	<i>desipramine hcl tab 100 mg</i>	72
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DEMEROL INJ 25MG/ML	32	<i>0.01% (refrigerated)</i>	190
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dexmethylphenidate hcl cap er 24 hr 25 mg	17
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<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>		<i>dextrose inj 25%</i>	252
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<i>dextroamphetamine sulfate tab 15 mg</i>	13	<i>diazepam con 5mg/ml</i>	50
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<i>dextroamphetamine sulfate tab 20 mg</i>	13	<i>diazepam inj 5 mg/ml</i>	50
<i>dextroamphetamine sulfate tab 30 mg</i>	13	DIAZEPAM INJ 5MG/ML	50
<i>dextroamphetamine sulfate tab 5 mg</i>	13	<i>diazepam oral soln 1 mg/ml</i>	50
<i>dextroamphetamine sulfate tab 7.5 mg</i>	13	<i>diazepam rectal gel delivery system 10 mg</i>	
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<i>dextrose 5% w/ sodium chloride 0.2%..</i>	234	<i>diazepam tab 10 mg</i>	50
<i>dextrose 5% w/ sodium chloride 0.225%</i>		<i>diazepam tab 2 mg</i>	50
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<i>dextrose 5% w/ sodium chloride 0.3%..</i>	234	<i>diazoxide susp 50 mg/ml</i>	76
<i>dextrose 5% w/ sodium chloride 0.33%</i>	234	DIBENZYLINE CAP 10MG	92
<i>dextrose 5% w/ sodium chloride 0.45%</i>	234	<i>dichlorphenamide tab 50 mg</i>	182
<i>dextrose 5% w/ sodium chloride 0.9%</i> .	234	DICLEGIS TAB 10-10MG	83
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<i>diclofenac potassium tab 50 mg</i>	27
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	162
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	161
<i>diclofenac sodium ophth soln 0.1%</i>	259
<i>diclofenac sodium soln 1.5%</i>	161
<i>diclofenac sodium soln 2%</i>	161
<i>diclofenac sodium tab delayed release 25 mg</i>	27
<i>diclofenac sodium tab delayed release 50 mg</i>	27
<i>diclofenac sodium tab delayed release 75 mg</i>	27
<i>diclofenac sodium tab er 24hr 100 mg</i>	27
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	27
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	27
<i>DICLOFONO GEL 1.6%</i>	161
<i>dicloxacillin sodium cap 250 mg</i>	265
<i>dicloxacillin sodium cap 500 mg</i>	265
<i>dicyclomine hcl cap 10 mg</i>	280
<i>dicyclomine hcl inj 10 mg/ml</i>	280
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	280
<i>dicyclomine hcl tab 20 mg</i>	280
<i>diethylpropion hcl tab 25 mg</i>	14
<i>diethylpropion hcl tab er 24hr 75 mg</i>	14
<i>DIFFERIN CRE 0.1%</i>	159
<i>DIFFERIN GEL 0.3% PMP</i>	159
<i>DIFFERIN LOT 0.1%</i>	159
<i>DIFICID SUS</i>	219
<i>DIFICID TAB 200MG</i>	220
<i>diflorasone diacetate cream 0.05%</i>	168
<i>diflorasone diacetate oint 0.05%</i>	168
<i>DIFLUCAN SUS 40MG/ML</i>	85
<i>DIFLUCAN TAB 100MG</i>	85
<i>DIFLUCAN TAB 200MG</i>	85
<i>diflunisal tab 500 mg</i>	32
<i>difluprednate ophth emulsion 0.05%</i>	257
<i>DIGIFAB INJ 40MG</i>	82

<i>digoxin inj 0.25 mg/ml</i>	140
<i>digoxin oral soln 0.05 mg/ml</i>	140
<i>digoxin tab 125 mcg (0.125 mg)</i>	140
<i>digoxin tab 250 mcg (0.25 mg)</i>	140
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	140
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<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	232
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<i>DILANTIN CAP 30MG</i>	66
<i>DILANTIN CHW 50MG</i>	67
<i>DILANTIN-125 SUS 125/5ML</i>	67
<i>DILAUDID INJ 0.2MG/ML</i>	33
<i>DILAUDID INJ 1MG/ML</i>	33
<i>DILAUDID INJ 2MG/ML</i>	33
<i>DILAUDID LIQ 1MG/ML</i>	33
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<i>DILAUDID TAB 4MG</i>	33
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<i>diltiazem hcl cap er 12hr 60 mg</i>	137
<i>diltiazem hcl cap er 12hr 90 mg</i>	137
<i>diltiazem hcl cap er 24hr 120 mg</i>	137
<i>diltiazem hcl cap er 24hr 180 mg</i>	137
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<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	137
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	137
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	137
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	137
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	137
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	137
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	137
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	137

<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	137	<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	81
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	138	<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	81
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<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	138	DIPRIVAN INJ 100/10ML	199
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	138	DIPRIVAN INJ 200/20ML.....	199
<i>diltiazem hcl tab 120 mg</i>	138	DIPRIVAN INJ 500/50ML	199
<i>diltiazem hcl tab 30 mg</i>	138	DIPROLENE OIN 0.05%	168
<i>diltiazem hcl tab 60 mg</i>	138	<i>dipyridamole iv soln 5 mg/ml</i>	177
<i>diltiazem hcl tab 90 mg</i>	138	<i>dipyridamole tab 25 mg</i>	208
<i>diltiazem hcl tab er 24hr 180 mg</i>	138	<i>dipyridamole tab 50 mg</i>	208
<i>diltiazem hcl tab er 24hr 240 mg</i>	138	<i>dipyridamole tab 75 mg</i>	208
<i>diltiazem hcl tab er 24hr 300 mg</i>	138	<i>disopyramide phosphate cap 100 mg</i>	50
<i>diltiazem hcl tab er 24hr 360 mg</i>	138	<i>disopyramide phosphate cap 150 mg</i>	50
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<i>dilt-xr cap 180mg</i>	137	<i>divalproex sodium tab delayed release 125 mg</i>	67
<i>dilt-xr cap 240mg</i>	137	<i>divalproex sodium tab delayed release 250 mg</i>	67
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<i>dimethyl fumarate capsule delayed release 120 mg</i>	268	<i>divalproex sodium tab er 24 hr 250 mg</i>	67
<i>dimethyl fumarate capsule delayed release 240 mg</i>	269	<i>divalproex sodium tab er 24 hr 500 mg</i>	67
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.....	117	<i>doxepin hcl cap 150 mg</i>	72
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	117	<i>doxepin hcl cap 25 mg</i>	72
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	117	<i>doxepin hcl cap 50 mg</i>	72
<i>dofetilide cap 125 mcg (0.125 mg)</i>	51	<i>doxepin hcl cap 75 mg</i>	72
<i>dofetilide cap 250 mcg (0.25 mg)</i>	51	<i>doxepin hcl conc 10 mg/ml</i>	73
<i>dofetilide cap 500 mcg (0.5 mg)</i>	51	<i>doxepin hcl cream 5%</i>	163
<i>dolishale tab 90-20mcg</i>	147	<i>doxercalciferol cap 0.5 mcg</i>	188
<i>donepezil hydrochloride orally</i>		<i>doxercalciferol cap 1 mcg</i>	188
<i>disintegrating tab 10 mg</i>	266	<i>doxercalciferol cap 2.5 mcg</i>	188
<i>donepezil hydrochloride orally</i>		<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	
<i>disintegrating tab 5 mg</i>	266	.....	188
<i>donepezil hydrochloride tab 10 mg</i>	266	DOXIL INJ 20/10ML	109
<i>donepezil hydrochloride tab 23 mg</i>	266	DOXIL INJ 50/25ML	109
<i>donepezil hydrochloride tab 5 mg</i>	266	<i>doxorubicin hcl for inj 10 mg</i>	109
<i>dopamine hcl inj 40 mg/ml</i>	140	<i>doxorubicin hcl for inj 50 mg</i>	109
DOPRAM INJ 20MG/ML	14	<i>doxorubicin hcl inj 2 mg/ml</i>	109
DOPTelet TAB 20MG	210	<i>doxorubicin hcl liposomal susp (for iv</i>	
DORYX MPC TAB 120MG	274	<i>infusion) 2 mg/ml</i>	109
DORYX TAB 200MG	274	<i>doxy 100 inj 100mg</i>	274
DORYX TAB 50MG	274	<i>doxycycline (rosacea) cap delayed release</i>	
DORYX TAB 80MG	274	40 mg	173
DORZOL/TIMOL SOL 2-0.5%OP	254	<i>doxycycline hyclate cap 100 mg</i>	274
<i>dorzolamide hcl ophth soln 2%</i>	259	<i>doxycycline hyclate cap 50 mg</i>	274
<i>dorzolamide hcl-timolol maleate ophth soln</i>		<i>doxycycline hyclate for inj 100 mg</i>	274
2-0.5%	254	<i>doxycycline hyclate tab 100 mg</i>	274
<i>dorzolamide hcl-timolol maleate pf ophth</i>		<i>doxycycline hyclate tab 150 mg</i>	274
<i>soln 2-0.5%</i>	254	<i>doxycycline hyclate tab 20 mg</i>	274
DORZOLAMIDE SOL 2% OP	259	<i>doxycycline hyclate tab 50 mg</i>	274
<i>dotti dis 0.025mg</i>	193	<i>doxycycline hyclate tab 75 mg</i>	274
<i>dotti dis 0.0375mg</i>	193	<i>doxycycline hyclate tab delayed release</i>	
<i>dotti dis 0.05mg</i>	193	100 mg	275
<i>dotti dis 0.075mg</i>	193	<i>doxycycline hyclate tab delayed release</i>	
<i>dotti dis 0.1mg</i>	193	150 mg	275
DOVATO TAB 50-300MG	128	<i>doxycycline hyclate tab delayed release</i>	
<i>doxazosin mesylate tab 1 mg</i>	93	200 mg	275
<i>doxazosin mesylate tab 2 mg</i>	93	<i>doxycycline hyclate tab delayed release 50</i>	
<i>doxazosin mesylate tab 4 mg</i>	93	mg	274
<i>doxazosin mesylate tab 8 mg</i>	93	<i>doxycycline hyclate tab delayed release 75</i>	
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>		mg	274
.....	213	<i>doxycycline hyclate tab delayed release 80</i>	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>		mg	275
.....	213	<i>doxycycline monohydrate cap 100 mg</i> ..	275
<i>doxepin hcl cap 10 mg</i>	72	<i>doxycycline monohydrate cap 150 mg</i> ..	275

<i>doxycycline monohydrate cap 50 mg</i>	275	DULERA AER 100-5MCG	55
<i>doxycycline monohydrate cap 75 mg</i>	275	DULERA AER 200-5MCG	55
<i>doxycycline monohydrate for susp 25</i>		DULERA AER 50-5MCG	55
<i>mg/5ml</i>	275	<i>duloxetine hcl enteric coated pellets cap 20</i>	
<i>doxycycline monohydrate tab 100 mg ...</i>	275	<i>mg (base eq).....</i>	71
<i>doxycycline monohydrate tab 150 mg ...</i>	275	<i>duloxetine hcl enteric coated pellets cap 30</i>	
<i>doxycycline monohydrate tab 50 mg</i>	275	<i>mg (base eq).....</i>	71
<i>doxycycline monohydrate tab 75 mg</i>	275	<i>duloxetine hcl enteric coated pellets cap 40</i>	
<i>doxylamine-pyridoxine tab delayed release</i>		<i>mg (base eq).....</i>	71
<i>10-10 mg.....</i>	83	<i>duloxetine hcl enteric coated pellets cap 60</i>	
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<i>dronabinol cap 10 mg.....</i>	84	DUPIXENT INJ 200MG	170
<i>dronabinol cap 2.5 mg</i>	83	DUPIXENT INJ 300/2ML	170
<i>dronabinol cap 5 mg</i>	83	DURACLON INJ	31
<i>droperidol inj 2.5 mg/ml</i>	49	DURAFIBER AG PAD 2	174
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DROPLET PERS MIS LANC 30G	223	DURAFIBER AG PAD 6	174
<i>drospirenone-ethinyl estradiol tab 3-0.02</i>		DURAMORPH INJ 0.5MG/ML	33
<i>mg</i>	148	DURAMORPH INJ 1MG/ML.....	33
<i>drospirenone-ethinyl estradiol tab 3-0.03</i>		DUREX EXTRA MIS SENSITIV	220
<i>mg</i>	148	DUREX MIS REALFEEL	220
<i>drospirenone-ethinyl estrad-levomefolate</i>		DUREX MIS TROPICAL	220
<i>tab 3-0.02-0.451 mg.....</i>	148	DUREZOL EMU 0.05%	257
<i>drospirenone-ethinyl estrad-levomefolate</i>		DURLAZA CAP 162.5MG.....	208
<i>tab 3-0.03-0.451 mg</i>	148	DUROLANE INJ 60MG/3ML	250
DROXIA CAP 200MG	209	<i>dutasteride cap 0.5 mg.....</i>	201
DROXIA CAP 300MG.....	209	<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	
DROXIA CAP 400MG.....	209	<i>.....</i>	201
<i>droxidopa cap 100 mg</i>	288	DUTOPROL TAB 100-12.5.....	95
<i>droxidopa cap 200 mg</i>	288	DUTOPROL TAB 25-12.5.....	95
<i>droxidopa cap 300 mg</i>	288	DUTOPROL TAB 50-12.5	95
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DSUVIA SUB 30MCG	33	DYANAVEL XR SUS 2.5MG/ML	13
DUAKLIR AER 400/12	55	DYANAVEL XR TAB 10MG.....	13
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DUETACT TAB 30-4MG.....	74	DYNAGINATE MIS 12.....	174
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EASY COMFORT MIS 30G	223
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EASY COMFORT MIS TWIST	223
EASY GLIDE MIS 1ML SYR	230
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EASY TOUCH MIS LANC/23G	223
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<i>ec-naproxen tab 375mg</i>	27
<i>ec-naproxen tab 500mg</i>	27
<i>econazole nitrate cream 1%</i>	161
<i>econtra os tab 1.5mg</i>	152
<i>ecotrin low tab 81mg ec</i>	32
ECOZA AER 1%	162
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EDARBYCLOR TAB 40-25MG	96
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EDETATE DISO INJ 150MG/ML	238
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EDURANT PED TAB 2.5MG	128
EDURANT TAB 25MG	128
<i>efavirenz tab 600 mg</i>	128
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	128
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	128
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	128
EFFER-K TAB 10MEQ	237
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EFFEXOR XR CAP 75MG	71
EFFIENT TAB 10MG	208
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EGRIFTA SV INJ 2MG	186
ELAHERE INJ 5MG/ML	105
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ELCYS INJ 50MG/ML	253
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eletriptan hydrobromide tab 20 mg (base equivalent)	232
eletriptan hydrobromide tab 40 mg (base equivalent)	232
ELFABRIO SOL 20/10ML	188
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eltrombopag olamine powder pack for susp 25 mg (base equiv)	210
eltrombopag olamine tab 12.5 mg (base equiv).....	210
eltrombopag olamine tab 25 mg (base equiv).....	210

eltrombopag olamine tab 50 mg (base equiv)	210
eltrombopag olamine tab 75 mg (base equiv)	210
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EMBECTA NANO MIS 32GX4MM	230
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<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 167-250 mg</i>	129	<i>enoxaparin sodium inj soln pref syr 120</i> <i>mg/0.8ml</i>	58
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 200-300 mg</i>	129	<i>enoxaparin sodium inj soln pref syr 150</i> <i>mg/ml</i>	58
EMTRIVA CAP 200MG.....	129	<i>enoxaparin sodium inj soln pref syr 30</i> <i>mg/0.3ml</i>	57
EMTRIVA SOL 10MG/ML.....	129	<i>enoxaparin sodium inj soln pref syr 40</i> <i>mg/0.4ml</i>	57
EMULSION SB EMU.....	172	<i>enoxaparin sodium inj soln pref syr 60</i> <i>mg/0.6ml</i>	58
EMVERM CHW 100MG.....	43	<i>enoxaparin sodium inj soln pref syr 80</i> <i>mg/0.8ml</i>	58
<i>emzahh tab 0.35mg</i>	152	<i>enpresse-28 tab</i>	148
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<i>enalapril maleate & hydrochlorothiazide tab</i> <i>10-25 mg</i>	96	ENSTILAR AER.....	168
<i>enalapril maleate & hydrochlorothiazide tab</i> <i>5-12.5 mg</i>	96	<i>entacapone tab 200 mg</i>	118
<i>enalapril maleate oral soln 1 mg/ml</i>	91	ENTADFI CAP 5-5MG.....	201
<i>enalapril maleate tab 10 mg</i>	91	<i>entecavir tab 0.5 mg</i>	131
<i>enalapril maleate tab 2.5 mg</i>	91	<i>entecavir tab 1 mg</i>	131
<i>enalapril maleate tab 20 mg</i>	91	ENTRESTO CAP 15-16MG.....	142
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ENBREL MINI INJ 50MG/ML.....	30	ENTYVIO PEN INJ 108/0.68.....	197
ENBREL SRCLK INJ 50MG/ML.....	30	<i>enulose sol 10gm/15</i>	198
ENCARE SUP 100MG.....	287	ENVARUSUS XR TAB 0.75MG.....	240
ENDARI POW 5GM.....	209	ENVARUSUS XR TAB 1MG.....	240
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<i>endocet tab 10-325mg</i>	39	EOHILIA SUS 2MG/10ML.....	154
<i>endocet tab 2.5-325</i>	39	EPANED SOL 1MG/ML.....	91
<i>endocet tab 5-325mg</i>	39	EPCLUSA PAK 150-37.5.....	131
<i>endocet tab 7.5-325</i>	39	EPCLUSA PAK 200-50MG.....	131
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EPIFOAM AER 1%	168	<i>mg/ml).....</i>	208
<i>epinastine hcl ophth soln 0.05%</i>	259	<i>eptifibatide iv soln 75 mg/100ml (0.75</i>	
EPINEPH/NACL SOL 2/250ML	288	<i>mg/ml).....</i>	208
EPINEPHR/D5W INJ 100/10ML	288	<i>eq arthritis gel 1%</i>	161
EPINEPHR/D5W SOL 2/250-5%	288	<i>eq aspirin chw 81mg.....</i>	32
<i>epinephrine hcl nasal soln 0.1%</i>	251	<i>eq nicotine dis 14mg/24h</i>	271
EPINEPHRINE INJ 0.1MG/10.....	288	<i>eq nicotine dis 21mg/24h</i>	271
EPINEPHRINE INJ 0.1MG/ML.....	288	<i>eq nicotine dis 7mg/24hr.....</i>	271
EPINEPHRINE INJ 0.2MG.....	288	<i>eq nicotine gum 2mg cinn</i>	271
<i>epinephrine inj 1 mg/ml</i>	288	<i>eq nicotine gum 2mg mint.....</i>	271
<i>epinephrine inj 1 mg/ml (1:1000)</i>	288	<i>eq nicotine gum 2mgfruit</i>	271
EPINEPHRINE INJ 1MG/10ML	289	<i>eq nicotine gum 4mg cinn</i>	271
EPINEPHRINE INJ 1MG/ML	289	<i>eq nicotine gum 4mg mint.....</i>	271
<i>epinephrine inj 30 mg/30ml (1 mg/ml)</i>		<i>eq nicotine gum 4mg orig.....</i>	271
<i>(1:1000).....</i>	288	<i>eq nicotine gum 4mgfruit</i>	271
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EPINEPHRINE INJ 5MG/5ML	289	<i>eq nicotine loz 2mg mint.....</i>	271
EPINEPHRINE SOL 30/30ML	289	<i>eq nicotine loz 4mg cinn</i>	271
<i>epinephrine solution auto-injector 0.15</i>		<i>eq nicotine loz 4mg mint</i>	271
<i>mg/0.15ml (1:1000).....</i>	288	<i>eql aspirin chw 81mg.....</i>	32
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EPIVIR HBV TAB 100MG.....	132	ERBITUX INJ 200MG.....	106
EPIVIR SOL 10MG/ML.....	129	<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	289
EPIVIR TAB 150MG.....	129	ERGOMAR SUB 2MG.....	232
EPIVIR TAB 300MG.....	129	<i>ergotamine w/ caffeine tab 1-100 mg</i>	232
<i>eplerenone tab 25 mg.....</i>	98	<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	
<i>eplerenone tab 50 mg.....</i>	98	<i>.....</i>	117
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EPOGEN INJ 2000/ML	210	ERLEADA TAB 240MG.....	107
EPOGEN INJ 20000/ML.....	210	ERLEADA TAB 60MG	107
EPOGEN INJ 3000/ML	210	<i>erlotinib hcl tab 100 mg (base equivalent)</i>	
EPOGEN INJ 4000/ML.....	210	<i>.....</i>	106
<i>epoprostenol sodium for inj 0.5 mg</i>	142	<i>erlotinib hcl tab 150 mg (base equivalent)</i>	
<i>epoprostenol sodium for inj 1.5 mg</i>	142	<i>.....</i>	106
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<i>.....</i>	208	ERTACZO CRE 2%.....	162

<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	44	<i>eslicarbazepine acetate tab 600 mg</i>	61
<i>ERVEBO INJ</i>	286	<i>eslicarbazepine acetate tab 800 mg</i>	61
<i>ery pad 2%</i>	159	<i>esmolol hcl inj 100 mg/10ml</i>	134
<i>ERYGEL GEL 2%</i>	159	<i>ESMOLOL HCL SOL 2000/100</i>	134
<i>ERYPED SUS 200/5ML</i>	219	<i>ESMOLOL HCL SOL 2500/250</i>	134
<i>ERYPED SUS 400/5ML</i>	219	<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	134
<i>erythrocin inj 500mg</i>	219	<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	134
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<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	219	<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	282
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	219	<i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i>	282
<i>erythromycin gel 2%</i>	159	<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	282
<i>erythromycin lactobionate for inj 500 mg</i>	219	<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	282
<i>ERYTHROMYCIN OIN 5MG/GM</i>	256	<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	282
<i>erythromycin ophth oint 5 mg/gm</i>	256	<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	282
<i>erythromycin soln 2%</i>	159	<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	282
<i>erythromycin tab 250 mg</i>	219	<i>ESPEROCT INJ 1000UNIT</i>	204
<i>erythromycin tab 500 mg</i>	219	<i>ESPEROCT INJ 1500UNIT</i>	204
<i>erythromycin tab delayed release 250 mg</i>	219	<i>ESPEROCT INJ 2000UNIT</i>	204
<i>erythromycin tab delayed release 333 mg</i>	219	<i>ESPEROCT INJ 3000UNIT</i>	204
<i>erythromycin tab delayed release 500 mg</i>	219	<i>ESPEROCT INJ 4000IU</i>	204
<i>erythromycin w/ delayed release particles cap 250 mg</i>	219	<i>ESPEROCT INJ 500UNIT</i>	204
<i>ESBRIET CAP 267MG</i>	273	<i>estarylla tab 0.25-35</i>	148
<i>ESBRIET TAB 267MG</i>	273	<i>estazolam tab 1 mg</i>	214
<i>ESBRIET TAB 801MG</i>	273	<i>estazolam tab 2 mg</i>	214
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	69	<i>ESTRACE TAB 0.5MG</i>	193
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	69	<i>ESTRACE TAB 1MG</i>	193
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	69	<i>ESTRACE TAB 2MG</i>	193
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	69	<i>ESTRACE VAG CRE 0.01%</i>	287
<i>esgic cap</i>	31	<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	192
<i>ESKATA SOL 40%</i>	166	<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	192
<i>eslicarbazepine acetate tab 200 mg</i>	61	<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	193
<i>eslicarbazepine acetate tab 400 mg</i>	61		

estradiol tab 0.5 mg	193
estradiol tab 1 mg	193
estradiol tab 2 mg	193
estradiol td gel 0.25 mg/0.25gm (0.1%)	193
estradiol td gel 0.5 mg/0.5gm (0.1%)	193
estradiol td gel 0.75 mg/0.75gm (0.1%)	193
estradiol td gel 1 mg/gm (0.1%)	193
estradiol td gel 1.25 mg/1.25gm (0.1%)	193
estradiol td patch twice weekly 0.025 mg/24hr	193
estradiol td patch twice weekly 0.0375 mg/24hr	193
estradiol td patch twice weekly 0.05 mg/24hr	193
estradiol td patch twice weekly 0.075 mg/24hr	193
estradiol td patch twice weekly 0.1 mg/24hr	193
estradiol td patch weekly 0.025 mg/24hr	193
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	194
estradiol td patch weekly 0.05 mg/24hr	193
estradiol td patch weekly 0.06 mg/24hr	193
estradiol td patch weekly 0.075 mg/24hr	194
estradiol td patch weekly 0.1 mg/24hr	193
estradiol vaginal cream 0.1 mg/gm	287
estradiol vaginal tab 10 mcg	287
estradiol valerate im in oil 10 mg/ml	194
estradiol valerate im in oil 20 mg/ml	194
estradiol valerate im in oil 40 mg/ml	194
ESTRING MIS 2MG	287
ESTROGEL GEL 0.06%	194
eszopiclone tab 1 mg	214
eszopiclone tab 2 mg	214
eszopiclone tab 3 mg	214
ethacrynate sodium for inj 50 mg	182
ethacrynic acid tab 25 mg	182
ethambutol hcl tab 100 mg	99
ethambutol hcl tab 400 mg	99
ETHAMOLIN INJ 5%	242
ethosuximide cap 250 mg	67
ethosuximide soln 250 mg/5ml	67

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ETHYL CHLOR AER FN STRM	171
ETHYL CHLOR AER MED JET	171
ETHYL CHLOR AER MED STRM	171
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ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	148
etodolac cap 200 mg	27
etodolac cap 300 mg	27
etodolac tab 400 mg	27
etodolac tab 500 mg	27
etodolac tab er 24hr 400 mg	27
etodolac tab er 24hr 500 mg	27
etodolac tab er 24hr 600 mg	27
etomidate iv soln 2 mg/ml	199
etonogestrel-ethinyl estradiol va ring 0.12- 0.015 mg/24hr	152
ETOPOPHOS INJ 100MG	117
etoposide cap 50 mg	117
etoposide inj 1 gm/50ml (20 mg/ml)	117
etoposide inj 100 mg/5ml (20 mg/ml)	117
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etravirine tab 200 mg	129
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EUCRISA OIN 2%	172
EUFLEXXA INJ 10MG/ML	250
euthyrox tab 100mcg	276
euthyrox tab 112mcg	276
euthyrox tab 125mcg	276
euthyrox tab 137mcg	276
euthyrox tab 150mcg	277
euthyrox tab 175mcg	277
euthyrox tab 200mcg	277
euthyrox tab 25mcg	276
euthyrox tab 50mcg	276
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<i>everolimus tab 0.5 mg.....</i>	240	EXJADE TAB 500MG.....	81
<i>everolimus tab 0.75 mg.....</i>	240	EXONDYS 51 SOL 100/2ML.....	251
<i>everolimus tab 1 mg.....</i>	240	EXONDYS 51 SOL 500/10ML.....	251
<i>everolimus tab 10 mg.....</i>	111	EXPAREL INJ 1.3%.....	217
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<i>everolimus tab 5 mg.....</i>	111	EXTENCILLINE INJ 1200000.....	263
<i>everolimus tab 7.5 mg.....</i>	111	EXTENCILLINE INJ 2400000.....	264
<i>everolimus tab for oral susp 2 mg.....</i>	111	EXTRANEAL SOL.....	242
<i>everolimus tab for oral susp 3 mg.....</i>	111	EYLEA INJ 2/0.05ML.....	255
<i>everolimus tab for oral susp 5 mg.....</i>	111	EYSUVIS DRO 0.25%.....	257
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EVKEEZA INJ 1200/8.....	87	EZALLOR SPR CAP 5MG.....	89
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<i>famciclovir tab 500 mg</i>	133	<i>felodipine tab er 24hr 10 mg</i>	138
<i>famotidine for susp 40 mg/5ml</i>	281	<i>felodipine tab er 24hr 2.5 mg</i>	138
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	281	<i>felodipine tab er 24hr 5 mg</i>	138
<i>famotidine inj 200 mg/20ml</i>	281	FEMARA TAB 2.5MG.....	107
<i>famotidine inj 40 mg/4ml</i>	281	FEMCAP MIS 22MM.....	220
<i>famotidine preservative free inj 20 mg/2ml</i>	281	FEMCAP MIS 26MM.....	220
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FANAPT TAB 1MG.....	122	<i>fenofibrate cap 50 mg</i>	88
FANAPT TAB 2MG.....	122	<i>fenofibrate micronized cap 130 mg</i>	88
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FANAPT TAB 6MG.....	122	<i>fenofibrate micronized cap 200 mg</i>	88
FANAPT TAB 8MG.....	122	<i>fenofibrate micronized cap 30 mg</i>	88
FANTASY LUBR MIS.....	220	<i>fenofibrate micronized cap 43 mg</i>	88
FANTASY LUBR MIS COLORS.....	220	<i>fenofibrate micronized cap 67 mg</i>	88
FANTASY LUBR MIS SPERMICI.....	220	<i>fenofibrate micronized cap 90 mg</i>	88
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FARESTON TAB 60MG.....	107	<i>fenofibrate tab 145 mg</i>	88
FARXIGA TAB 10MG.....	80	<i>fenofibrate tab 160 mg</i>	88
FARXIGA TAB 5MG.....	80	<i>fenofibrate tab 40 mg</i>	88
FARYDAK CAP 10MG.....	111	<i>fenofibrate tab 48 mg</i>	88
FARYDAK CAP 15MG.....	111	<i>fenofibrate tab 54 mg</i>	88
FARYDAK CAP 20MG.....	111	<i>fenofibric acid tab 35 mg</i>	88
FASENRA INJ 10MG/0.5.....	52	FENOGLIDE TAB 120MG.....	88
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FASENRA PEN INJ 30MG/ML.....	52	<i>fenoprofen calcium tab 600 mg</i>	27
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<i>feirza tab 1.5/30</i>	148	FENTANYL CIT SOL 10MCG/ML.....	33
<i>feirza tab 1/20</i>	148	<i>fantanyl citrate pf soln prefilled syringe 50</i> <i>mcg/ml</i>	33
<i>felbamate susp 600 mg/5ml</i>	66	<i>fantanyl citrate preservative free (pf) inj 100</i> <i>mcg/2ml</i>	33
<i>felbamate tab 400 mg</i>	66	<i>fantanyl citrate preservative free (pf) inj</i> <i>1000 mcg/20ml</i>	33
<i>felbamate tab 600 mg</i>	66		
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<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	33	FILSUEZ GEL 10%	174
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	33	FINACEA AER 15%	173
<i>fentanyl citrate preservative free (pf) inj 50 mcg/ml</i>	33	FINACEA GEL 15%	173
<i>fentanyl citrate preservative free (pf) inj 500 mcg/10ml</i>	33	<i>finasteride tab 5 mg</i>	201
FENTANYL INJ 50MCG/ML	33	FINGERSTIX MIS LANCETS	224
<i>fentanyl td patch 72hr 100 mcg/hr</i>	33	<i>finolimid hcl cap 0.5 mg (base equiv)</i>	269
<i>fentanyl td patch 72hr 12 mcg/hr</i>	33	FINTEPLA SOL 2.2MG/ML	61
<i>fentanyl td patch 72hr 25 mcg/hr</i>	33	<i>finzala chw fe 1/20</i>	148
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	33	FIORICET CAP	31
<i>fentanyl td patch 72hr 50 mcg/hr</i>	33	FIORICET CAP CODEINE	39
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	33	FIRAZYR INJ 30MG/3ML	206
<i>fentanyl td patch 72hr 75 mcg/hr</i>	33	FIRDAPSE TAB 10MG	99
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	33	FIRMAGON INJ 120MG	107
FENTNYL/NACL INJ 1000/50	33	FIRMAGON INJ 80MG	107
FERAHEME INJ 510/17ML	212	FIRST-METRON SUS 100MG/ML	43
<i>ferotinsic cap</i>	212	FIRVANQ SOL 25MG/ML	44
FERPRX 2-DAY TAB 1000MG	81	FIRVANQ SOL 50MG/ML	44
<i>ferric citrate tab 1 gm (210 mg ferric iron)</i>	199	FLAREX SUS 0.1% OP	257
FERRIPROX SOL 100MG/ML	81	<i>flavoxate hcl tab 100 mg</i>	285
FERRIPROX TAB 1000MG	81	<i>flecainide acetate tab 100 mg</i>	51
FERRIPROX TAB 500MG	81	<i>flecainide acetate tab 150 mg</i>	51
FERRLECIT INJ 12.5MG/M	212	<i>flecainide acetate tab 50 mg</i>	51
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml) (elemental fe)</i>	212	FLECTOR DIS 1.3%	161
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	284	FLEQSUVY SUS 25MG/5ML	249
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	284	FLOLAN INJ 0.5MG	142
FETROJA INJ 1GM	147	FLOLAN INJ 1.5MG	142
FETZIMA CAP 120MG	71	FLOLIPID SUS 20MG/5ML	89
FETZIMA CAP 20MG	71	FLOLIPID SUS 40MG/5ML	89
FETZIMA CAP 40MG	71	FLORIVA CHW 0.25MG	245
FETZIMA CAP 80MG	71	FLORIVA CHW 0.5MG	245
FETZIMA CAP TITRATIO	71	FLORIVA CHW 1MG	245
<i>fexmid tab 7.5mg</i>	249	FLORIVA DRO 0.25MG	235
FIASP FLEX INJ TOUCH	78	FLORIVA DRO PLUS	244
FIASP INJ 100/ML	78	FLOVENT DISK AER 100MCG	53
FIASP PENFIL INJ U-100	78	FLOVENT DISK AER 250MCG	53
FIBRYGA INJ 1GM	204	FLOVENT DISK AER 50MCG	53
FIFTY50 GLUC TES 2.0	179	FLOVENT HFA AER 110MCG	53
FIFTY50 SAFE MIS LANCETS	224	FLOVENT HFA AER 220MCG	53
		FLOVENT HFA AER 44MCG	53
		<i>floxuridine for inj 0.5 gm</i>	102
		FLUAD INJ 2024-25	286
		FLUARIX INJ 2024-25	286
		FLUBLOK INJ 2024-25	286
		FLUCELVAX INJ 2024-25	286

<i>fluconazole for susp 10 mg/ml</i>	85	<i>fluorescein w/ proparacaine ophth soln</i>	
<i>fluconazole for susp 40 mg/ml</i>	85	0.25-0.5%	259
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>		FLUORESCITE INJ 10%	259
.....	85	FLUOR-I-STRI TES 1MG OP	259
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>		<i>fluorometholone ophth susp 0.1%</i>	257
.....	85	<i>fluorouracil cream 0.5%</i>	163
FLUCONAZOLE SOL /NACL	85	<i>fluorouracil cream 5%</i>	163
<i>fluconazole tab 100 mg</i>	85	<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	
<i>fluconazole tab 150 mg</i>	85	.....	102
<i>fluconazole tab 200 mg</i>	85	<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	
<i>fluconazole tab 50 mg</i>	85	.....	102
<i>flucytosine cap 250 mg</i>	84	<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	
<i>flucytosine cap 500 mg</i>	84	.....	102
<i>fludarabine phosphate for inj 50 mg</i>	102	<i>fluorouracil iv soln 500 mg/10ml (50</i>	
<i>fludarabine phosphate inj 25 mg/ml</i>	102	<i>mg/ml)</i>	102
<i>fludrocortisone acetate tab 0.1 mg</i>	156	<i>fluorouracil soln 2%</i>	163
FLULAVAL INJ 2024-25	286	<i>fluorouracil soln 5%</i>	163
<i>flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)</i>		<i>fluoxetine hcl cap 10 mg</i>	69
.....	82	<i>fluoxetine hcl cap 20 mg</i>	69
<i>flumazenil iv soln 1 mg/10ml (0.1 mg/ml)</i> .	82	<i>fluoxetine hcl cap 40 mg</i>	69
FLUMIST NASA LIQ 2024-25.....	286	<i>fluoxetine hcl cap delayed release 90 mg</i>	69
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>		<i>fluoxetine hcl solution 20 mg/5ml</i>	69
.....	251	<i>fluoxetine hcl tab 10 mg</i>	69
<i>fluocinolone acetonide (otic) oil 0.01% ...</i>	261	<i>fluoxetine hcl tab 20 mg</i>	69
<i>fluocinolone acetonide cream 0.01%</i>	168	<i>fluoxetine hcl tab 60 mg</i>	69
<i>fluocinolone acetonide cream 0.025% ...</i>	168	FLUOXETINE TAB 60MG	69
<i>fluocinolone acetonide oil 0.01% (body oil)</i>		<i>fluphenazine decanoate inj 25 mg/ml</i>	125
.....	168	<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	125
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>		<i>fluphenazine hcl inj 2.5 mg/ml</i>	126
.....	168	<i>fluphenazine hcl oral conc 5 mg/ml</i>	126
<i>fluocinolone acetonide oint 0.025%</i>	168	<i>fluphenazine hcl tab 1 mg</i>	126
<i>fluocinolone acetonide soln 0.01%</i>	168	<i>fluphenazine hcl tab 10 mg</i>	126
<i>fluocinonide cream 0.05%</i>	168	<i>fluphenazine hcl tab 2.5 mg</i>	126
<i>fluocinonide cream 0.1%</i>	168	<i>fluphenazine hcl tab 5 mg</i>	126
<i>fluocinonide emulsified base cream 0.05%</i>		<i>flurandrenolide cream 0.05%</i>	168
.....	168	<i>flurandrenolide lotion 0.05%</i>	168
<i>fluocinonide gel 0.05%</i>	168	<i>flurandrenolide oint 0.05%</i>	168
<i>fluocinonide oint 0.05%</i>	168	FLURA-SAFE SOL	259
<i>fluocinonide soln 0.05%</i>	168	<i>flurbiprofen sodium ophth soln 0.03% ...</i>	259
FLUORE/BENOX SOL 0.3-0.4%	259	<i>flurbiprofen tab 100 mg</i>	27
<i>fluorescein sodium iv soln 10%</i>	259	<i>flurbiprofen tab 50 mg</i>	27
<i>fluorescein sodium iv soln 25%</i>	259	<i>fluticasone propionate cream 0.05%</i>	168
<i>fluorescein w/ benoxinate ophth soln 0.25-</i>		<i>fluticasone propionate diskus inhal 50 mcg</i>	
0.4%	259	.....	53

<i>fluticasone propionate diskus inhal 100 mcg</i>	54	FOCALIN TAB 5MG	17
<i>fluticasone propionate diskus inhal 250 mcg</i>	54	FOCALIN XR CAP 10MG	17
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	54	FOCALIN XR CAP 15MG	17
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	54	FOCALIN XR CAP 20MG.....	17
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	54	FOCALIN XR CAP 25MG.....	17
<i>fluticasone propionate lotion 0.05%</i>	168	FOCALIN XR CAP 30MG	17
<i>fluticasone propionate nasal susp 50 mcg/act</i>	251	FOCALIN XR CAP 35MG.....	17
<i>fluticasone propionate oint 0.005%</i>	168	FOCALIN XR CAP 40MG	17
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	55	FOCALIN XR CAP 5MG.....	17
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	55	FOLAMED DHA CAP	244
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	55	<i>folate tab 400mcg</i>	209
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	55	FOLET DHA PAK	246
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	55	FOLET ONE CAP 38-1-225	246
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	55	<i>folic acid cap 0.8 mg</i>	209
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	89	<i>folic acid inj 5 mg/ml</i>	209
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	89	<i>folic acid tab 1 mg</i>	209
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	89	<i>folic acid tab 400mcg</i>	209
<i>fluvoxamine maleate cap er 24hr 100 mg</i> 69		<i>folic acid tab 800mcg</i>	209
<i>fluvoxamine maleate cap er 24hr 150 mg</i> 69		FOLIC-K CAP.....	243
<i>fluvoxamine maleate tab 100 mg</i>	69	FOLITIN-Z TAB	244
<i>fluvoxamine maleate tab 25 mg</i>	69	FOLIVANE-OB CAP	246
<i>fluvoxamine maleate tab 50 mg</i>	69	FOLLISTIM AQ INJ 300UNIT	185
FLUZONE HD INJ 2024-25.....	286	FOLLISTIM AQ INJ 600UNIT	185
FLUZONE INJ 2024-25	286	FOLLISTIM AQ INJ 900UNIT	185
FML FORTE SUS 0.25% OP.....	257	FOLOTYN INJ 20MG/ML.....	102
FML LIQUIFLM SUS 0.1% OP	257	FOLOTYN INJ 40MG/2ML	102
FML OIN 0.1% OP	257	<i>foltrin cap</i>	212
FOCALIN TAB 10MG	17	<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	82
FOCALIN TAB 2.5MG.....	17	<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	58
		<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	58
		<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	58
		<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	58
		FORA ADVANCE TES PRO	179
		FORA BLOOD TES GLUCOSE.....	179
		FORA D15G TES BLD GLUC	179
		FORA D20 TES BLD GLUC.....	179
		FORA D40/G31 TES GLUCOSE	179
		FORA G20 TES BLD GLUC.....	179
		FORA G30/V10 TES BLD GLUC	179
		FORA GD20 TES BLD GLUC	179

FORA GD50 TES	179	<i>fosphenytoin sodium inj 500 mg/10ml</i>	
FORA LANCETS MIS 30G.....	224	(<i>phenytoin equiv</i>)	67
FORA MIS LANCETS	224	FOSRENOL CHW 1000MG	199
FORA TN'G TES TN'G VOI.....	179	FOSRENOL CHW 500MG.....	199
FORA V10 TES BLD GLUC	179	FOSRENOL CHW 750MG	199
FORA V12 TES BLD GLUC.....	179	FOSRENOL POW 1000MG	199
FORA V20 TES BLD GLUC.....	179	FOSRENOL POW 750MG	199
FORA V30A TES BLD GLUC	179	FOTIVDA CAP 0.89MG	111
FORACARE TES GD40.....	179	FOTIVDA CAP 1.34MG	111
FORACARE TES PREM V10	179	FRAGMIN INJ 10000/ML	58
FORACARE TES TST N GO	179	FRAGMIN INJ 12500UNT.....	58
FORANE SOL.....	200	FRAGMIN INJ 15000UNT	58
FORFIVO XL TAB 450MG.....	68	FRAGMIN INJ 18000UNT	58
FORMALDEHYDE SOL 37%	127	FRAGMIN INJ 2500/0.2	58
<i>formaldehyde solution 10%</i>	127	FRAGMIN INJ 2500/ML	58
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>		FRAGMIN INJ 5000/0.2	58
.....	55	FRAGMIN INJ 7500/0.3	58
FORTAMET TAB 1000MG	76	FRAGMIN INJ 95000UNT	58
FORTAMET TAB 500MG.....	76	FREE LIBRE2 KIT PLUS/SEN	224
FORTEO INJ 560/2.24.....	184	FREESTY LIBR KIT 2 SENSOR	224
FORTESTA GEL 10MG/ACT	41	FREESTY LIBR KIT 3 SENSOR.....	224
FORTISCARE TES BLD GLUC.....	179	FREESTY LIBR KIT SENSOR	224
FOSAMAX + D TAB 70-2800	184	FREESTY LIBR MIS 2 READER	224
FOSAMAX + D TAB 70-5600.....	184	FREESTY LIBR MIS 3 READER	224
FOSAMAX TAB 70MG.....	184	FREESTY LIBR MIS READER.....	224
<i>fosamprenavir calcium tab 700 mg (base</i>		FREESTYLE KIT SENSOR.....	224
<i>equiv)</i>	129	FREESTYLE MIS LANCETS.....	224
<i>fosaprepitant dimeglumine for iv infusion</i>		FREESTYLE MIS READER	224
<i>150 mg (base eq)</i>	84	FREESTYLE TES	179
<i>foscarnet sodium inj 6000 mg/250ml (24</i>		FREESTYLE TES INSULINX.....	179
<i>mg/ml)</i>	131	FREESTYLE TES LITE	179
FOSCAVIR INJ 24MG/ML	131	FREESTYLE TES PREC NEO	179
<i>fosfomycin tromethamine powd pack 3 gm</i>		FRINDOVYX INJ 1GM/2ML	101
<i>(base equivalent)</i>	47	FRINDOVYX INJ 2GM/4ML.....	101
<i>fosinopril sodium & hydrochlorothiazide tab</i>		FRINDOVYX INJ 500MG/ML	101
<i>10-12.5 mg</i>	96	FROVA TAB 2.5MG.....	232
<i>fosinopril sodium & hydrochlorothiazide tab</i>		<i>frovatriptan succinate tab 2.5 mg (base</i>	
<i>20-12.5 mg</i>	96	<i>equivalent)</i>	232
<i>fosinopril sodium tab 10 mg</i>	91	FRUZAQLA CAP 1MG	104
<i>fosinopril sodium tab 20 mg</i>	91	FRUZAQLA CAP 5MG	104
<i>fosinopril sodium tab 40 mg</i>	91	<i>ft arthritis gel 1%</i>	161
<i>fosphenytoin sodium inj 100 mg/2ml</i>		<i>ft aspirin chw 81mg</i>	32
<i>(phenytoin equiv)</i>	67	<i>ft aspirin tab 81mg</i>	32
		<i>ft folic aci tab 400mcg</i>	209

<i>ft nicotine dis 14mg/24h</i>	271
<i>ft nicotine dis 21mg/24h</i>	271
<i>ft nicotine dis 7mg/24hr</i>	271
<i>ft nicotine gum 2mg</i>	271
<i>ft nicotine gum 4mg</i>	271
<i>ft nicotine loz 2mg</i>	271
<i>ft nicotine loz 4mg</i>	271
FULPHILA INJ 6/0.6ML	210
fulvestrant inj soln pref syr 250 mg/5ml .	107
FUNGIMEZ SOL	162
furosemide inj 10 mg/ml	182
FUROSEMIDE INJ 40MG/4ML	182
furosemide oral soln 10 mg/ml	182
furosemide oral soln 8 mg/ml	182
furosemide tab 20 mg	182
furosemide tab 40 mg	182
furosemide tab 80 mg	183
FUSION PAK SPRINKLE	212
FUSION PLUS CAP	212
FUZEON INJ 90MG	129
FYARRO SUS 100MG	111
<i>fyavolv tab 0.5-2.5</i>	192
<i>fyavolv tab 1-5</i>	192
FYCOMPA SUS 0.5MG/ML	59
FYCOMPA TAB 10MG	60
FYCOMPA TAB 12MG	60
FYCOMPA TAB 2MG	59
FYCOMPA TAB 4MG	59
FYCOMPA TAB 6MG	60
FYCOMPA TAB 8MG	60
FYLNETRA INJ 6MG/0.6	210
<i>fyremadel sol 250/0.5</i>	185

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<i>g tussin ac liq 100-10/5</i>	157
<i>gabapentin (once-daily) tab 300 mg</i>	270
<i>gabapentin (once-daily) tab 600 mg</i>	270
<i>gabapentin cap 100 mg</i>	61
<i>gabapentin cap 300 mg</i>	61
<i>gabapentin cap 400 mg</i>	61
<i>gabapentin oral soln 250 mg/5ml</i>	61
<i>gabapentin tab 600 mg</i>	61
<i>gabapentin tab 800 mg</i>	61
GABARONE TAB 100MG	61
GABARONE TAB 400MG	61
GABLOFEN INJ 10000/20	249
GABLOFEN INJ 20000/20	249
GABLOFEN INJ 40000/20	249
GABLOFEN INJ 50MCG/ML	249
GALAFOLD CAP 123MG	188
<i>galantamine hydrobromide cap er 24hr 16</i> <i>mg</i>	266
<i>galantamine hydrobromide cap er 24hr 24</i> <i>mg</i>	266
<i>galantamine hydrobromide cap er 24hr 8</i> <i>mg</i>	266
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	266
<i>galantamine hydrobromide tab 12 mg</i>	266
<i>galantamine hydrobromide tab 4 mg</i>	266
<i>galantamine hydrobromide tab 8 mg</i>	266
<i>gallifrey tab 5mg</i>	265
GALZIN CAP 25MG	238
GALZIN CAP 50MG	238
GAMMAGARD INJ 10GM/100	262
GAMMAGARD INJ 1GM/10ML	261
GAMMAGARD INJ 2.5GM/25	261
GAMMAGARD INJ 20GM/200	262
GAMMAGARD INJ 30GM/300	262
GAMMAGARD INJ 5GM/50ML	261
GAMMAGARD SD INJ 10GM HU	262
GAMMAGARD SD INJ 5GM HU	262
GAMMAKED INJ 10GM/100	262
GAMMAKED INJ 1GM/10ML	262
GAMMAKED INJ 20GM/200	262
GAMMAKED INJ 5GM/50ML	262
GAMUNEX-C INJ 10GM/100	262
GAMUNEX-C INJ 1GM/10ML	262
GAMUNEX-C INJ 2.5GM/25	262
GAMUNEX-C INJ 20GM/200	262
GAMUNEX-C INJ 40/400ML	262
GAMUNEX-C INJ 5GM/50ML	262
<i>ganciclovir sodium for inj 500 mg</i>	131
GANIRELIX AC INJ 250/0.5	185
<i>ganirelix acetate soln prefilled syringe 250</i> <i>mcg/0.5ml</i>	186
GARDASIL 9 INJ	286
GASTROCROM CON 100/5ML	196
<i>gatifloxacin ophth soln 0.5%</i>	256

GATTEX KIT 5MG	199	GENOTROPIN INJ 12MG.....	186
<i>gavilyte-c sol</i>	216	GENOTROPIN INJ 1MG.....	186
<i>gavilyte-g sol</i>	216	GENOTROPIN INJ 2MG	186
<i>gavilyte-n sol flav pk</i>	216	GENOTROPIN INJ 5MG	186
GAVRETO CAP 100MG	111	GENSTRIP 50 TES.....	179
GAZYVA INJ 25MG/ML	105	<i>gentamicin in saline inj 0.8 mg/ml</i>	20
GE100 BLOOD TES GLUCOSE	179	<i>gentamicin in saline inj 1 mg/ml</i>	20
GEBAUERS SPR AER /STRETCH.....	171	<i>gentamicin in saline inj 1.2 mg/ml</i>	20
<i>gefitinib tab 250 mg</i>	106	<i>gentamicin in saline inj 1.6 mg/ml</i>	20
GELCLAIR GEL	243	<i>gentamicin in saline inj 2 mg/ml</i>	20
GELFILM MIS OP	258	<i>gentamicin sulfate cream 0.1%</i>	161
GEL-ONE INJ 30MG/3ML	250	<i>gentamicin sulfate inj 10 mg/ml</i>	20
GELSYN-3 INJ 16.8/2ML	250	<i>gentamicin sulfate inj 40 mg/ml</i>	20
<i>gemcitabine hcl for inj 1 gm</i>	102	<i>gentamicin sulfate oint 0.1%</i>	161
<i>gemcitabine hcl for inj 2 gm</i>	102	<i>gentamicin sulfate ophth soln 0.3%</i>	256
<i>gemcitabine hcl for inj 200 mg</i>	102	GENTEEL MIS LANCETS.....	224
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml)</i> (base equiv)	102	GENULTIMATE TES	179
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i> <i>mg/ml) (base equiv)</i>	102	GENVISC 850 INJ 25/2.5	250
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i> <i>mg/ml) (base equiv)</i>	102	GENVOYA TAB.....	129
GEMCITABINE INJ 1.5GM/15	102	GEODON CAP 20MG	121
GEMCITABINE INJ 1GM.....	102	GEODON CAP 40MG	121
GEMCITABINE INJ 1GM/10ML	102	GEODON CAP 60MG	121
GEMCITABINE INJ 200MG	102	GEODON CAP 80MG	121
GEMCITABINE INJ 2GM	102	GEODON INJ 20MG	121
GEMCITABINE INJ 2GM/20ML	102	GHT TEST TES STRIPS.....	179
<i>gemfibrozil tab 600 mg</i>	88	GIAPREZA INJ 2.5MG	289
<i>gemmily cap 1/20</i>	148	GILENYA CAP 0.5MG.....	269
GEMTESA TAB 75MG	285	GILOTRIF TAB 20MG	107
<i>generlac sol 10/15ml</i>	198	GILOTRIF TAB 30MG	107
<i>generlac sol 10gm/15</i>	198	GILOTRIF TAB 40MG	107
<i>gengraf cap 100mg</i>	240	GIVLAARI INJ 189MG/ML	202
<i>gengraf cap 25mg</i>	240	GLARGIN YFGN INJ 100U/ML	78
<i>gengraf sol 100mg/ml</i>	240	GLARGIN YFGN SOL 100U/ML.....	78
GENOTROPIN INJ 0.2MG.....	186	GLASSIA INJ.....	273
GENOTROPIN INJ 0.4MG	186	<i>glatiramer acetate soln prefilled syringe 20</i> <i>mg/ml</i>	269
GENOTROPIN INJ 0.6MG	186	<i>glatiramer acetate soln prefilled syringe 40</i> <i>mg/ml</i>	269
GENOTROPIN INJ 0.8MG	186	<i>glatopa inj 20mg/ml</i>	269
GENOTROPIN INJ 1.2MG	186	<i>glatopa inj 40mg/ml</i>	269
GENOTROPIN INJ 1.4MG	186	GLEEVEC TAB 100MG.....	111
GENOTROPIN INJ 1.6MG	186	GLEEVEC TAB 400MG	111
GENOTROPIN INJ 1.8MG	186	GLEOSTINE CAP 100MG	101
		GLEOSTINE CAP 10MG.....	101

GLEOSTINE CAP 40MG.....	101	glyburide-metformin tab 1.25-250 mg.....	74
GLIADEL WAF 7.7MG	101	glyburide-metformin tab 2.5-500 mg.....	74
glimepiride tab 1 mg.....	80	glyburide-metformin tab 5-500 mg	74
glimepiride tab 2 mg	80	glycine irrigation soln 1.5%.....	201
glimepiride tab 3 mg	80	GLYCOPHOS SOL 1MM/ML.....	236
glimepiride tab 4 mg	80	GLYCOPYRROLA INJ 0.6/3ML	280
glipizide tab 10 mg.....	80	GLYCOPYRROLA INJ 1MG/5ML	280
glipizide tab 2.5 mg	80	GLYCOPYRROLA TAB 1.5MG	280
glipizide tab 5 mg	80	glycopyrrolate inj 0.2 mg/ml.....	281
glipizide tab er 24hr 10 mg	80	glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)	
glipizide tab er 24hr 2.5 mg.....	80	.....	281
glipizide tab er 24hr 5 mg	80	glycopyrrolate inj 1 mg/5ml (0.2 mg/ml).	281
glipizide-metformin hcl tab 2.5-250 mg...	74	glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)	
glipizide-metformin hcl tab 2.5-500 mg ..	74	.....	281
glipizide-metformin hcl tab 5-500 mg.....	74	glycopyrrolate oral soln 1 mg/5ml.....	281
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GLOBAL 30G MIS LANCETS.....	224	glycopyrrolate tab 2 mg.....	281
GLUCAGEN INJ HYPOKIT	76	glydo gel 2%.....	171
glucagon (rdna) for inj kit 1 mg	76	GLYXAMBI TAB 10-5 MG.....	74
GLUCAGON KIT 1MG	76	GLYXAMBI TAB 25-5 MG	74
GLUCO PERFEC TES 3.....	179	GMATE BLOOD TES GLUCOSE	179
GLUCOCARD 01 TES PLUS	179	gnp aspirin chw 81mg	32
GLUCOCARD 01 TES SENSOR.....	179	gnp aspirin tab 81mg	32
GLUCOCARD TES EXPRESSI	179	gnp aspirin tab 81mg ec.....	32
GLUCOCARD TES SHINE	179	gnp diclofen gel 1%	161
GLUCOCARD TES VITAL	179	GNP LANCETS MIS 28G	224
GLUCOCARD TES X-SENSOR	179	GNP LANCETS MIS 30G	224
GLUCOCOM MIS 28G.....	224	GNP LANCETS MIS 33G	224
GLUCOCOM MIS 30G.....	224	gnp nicotine dis 14mg/24h	271
GLUCOCOM MIS 33G.....	224	gnp nicotine dis 21mg/24h	271
GLUCOCOM TES	179	gnp nicotine dis 7mg/24hr	271
GLUCONAVII TES STRIPS	179	gnp nicotine gum 2mg mint	271
GLUCOTROL XL TAB 10MG	80	gnp nicotine gum 2mg orig	271
GLUCOTROL XL TAB 5MG.....	80	gnp nicotine gum 4mg frt	271
GLUMETZA TAB 1000MG	76	gnp nicotine gum 4mg mint	271
GLUMETZA TAB 500MG	76	gnp nicotine gum 4mg orig	271
glutamine (sickle cell) powd pack 5 gm.	209	gnp nicotine loz 2mg mint	271
GLUTARALDEHY SOL 25%.....	127	gnp nicotine loz 4mg cher	271
glyburide micronized tab 1.5 mg	80	gnp nicotine loz 4mg mint	271
glyburide micronized tab 3 mg.....	80	gnp nicotine loz mini 2mg.....	271
glyburide micronized tab 6 mg.....	81	GOCOVRI CAP 137MG	119
glyburide tab 1.25 mg.....	81	GOCOVRI CAP 68.5MG	119
glyburide tab 2.5 mg	81	GOJJI BLOOD TES GLUCOSE.....	179
glyburide tab 5 mg	81	GOJJI STRIPS MIS W/LANCET	179

GOLYTELY SOL.....	216
GOMEKLI CAP 1MG.....	111
GOMEKLI CAP 2MG.....	111
GOMEKLI TAB 1MG.....	111
GONAL-F INJ 1050UNIT	185
GONAL-F INJ 450UNIT	185
GONAL-F RFF INJ 300/0.5	185
GONAL-F RFF INJ 450/0.75	185
GONAL-F RFF INJ 75UNIT	185
GONAL-F RFF INJ 900/1.5	185
GONITRO POW 400MCG.....	48
<i>goodsense gel art pain</i>	161
<i>goodsense tab 81mg ec</i>	32
GOPRELTO SOL 40MG/ML	250
GORDOFILM SOL	171
GRAFAPEX INJ 1GM.....	101
GRAFAPEX INJ 5GM.....	101
GRALISE TAB 300MG.....	270
GRALISE TAB 450MG.....	270
GRALISE TAB 600MG.....	270
GRALISE TAB 750MG.....	270
GRALISE TAB 900MG.....	270
<i>granisetron hcl inj 1 mg/ml</i>	83
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	83
<i>granisetron hcl tab 1 mg</i>	83
GRANIX INJ 300/0.5	210
GRANIX INJ 300/1ML	210
GRANIX INJ 480/0.8	210
GRANIX INJ 480/1.6	210
GRASTEK SUB 2800BAU.....	19
<i>griseofulvin microsize susp 125 mg/5ml</i> ..	85
<i>griseofulvin microsize tab 500 mg</i>	85
<i>griseofulvin ultramicrosize tab 125 mg</i>	85
<i>griseofulvin ultramicrosize tab 165 mg</i>	85
<i>griseofulvin ultramicrosize tab 250 mg</i>	85
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	157
<i>guanfacine hcl tab 1 mg</i>	93
<i>guanfacine hcl tab 2 mg</i>	93
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	15
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	15

<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	15
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	15
GUARDIAN CON MIS TRANSMIT	224
GUARDIAN MIS LINK 3	224
GUARDIAN MIS SENSOR 3.....	224
GUARDIAN MIS TRANSMTR.....	224
GUARDIAN RT KIT	224
GUARDIAN RT KIT STARTER	224
GUARDIAN RT KIT SYST PED	224
GUARDIAN RT KIT SYSTEM	224
GUARDIAN RT MIS CHARGER.....	224
GUARDIAN RT MIS REPL PED	224
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GUARDIAN RT MIS SOFTWARE	225
GUARDIAN RT MIS TST PLUG	225
GVOKE HYPO 1 INJ 0.5/.1ML	76
GVOKE HYPO 1 INJ 1/0.2ML	76
GVOKE HYPO 2 INJ 0.5/.1ML	76
GVOKE HYPO 2 INJ 1/0.2ML	76
GVOKE KIT SOL 1/0.2ML	76
GVOKE PFS INJ 1/0.2ML	76
GYNAZOLE-1 CRE 2%	287
GYNOL II GEL 3%.....	287

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<i>habitrol dis 21mg/24h</i>	271
HADLIMA INJ 40/0.4ML	21
HADLIMA INJ 40/0.8ML	21
HADLIMA PUSH INJ 40/0.4ML	21
HADLIMA PUSH INJ 40/0.8ML	21
HAEGARDA INJ 2000UNIT	207
HAEGARDA INJ 3000UNIT	207
HAEMOLANCE MIS HIGH FLO	225
HAEMOLANCE MIS LOW FLOW	225
HAEMOLANCE MIS PLUS	225
HAEMOLANCE MIS PLUS LOW.....	225
HAEMOLANCE MIS PLUS MAX.....	225
HAEMOLANCE MIS PLUS PED	225
HAEMOLANCE MIS RETRACT.....	225
<i>hailey 24 tab fe</i>	148
<i>hailey fe tab 1.5/30</i>	148
<i>hailey fe tab 1/20</i>	148
<i>hailey tab 1.5/30</i>	148

HALAVEN INJ 1MG/2ML	117	HEMOFIL M INJ 1700UNIT	204
<i>halcinonide cream 0.1%</i>	168	HEMOFIL M INJ 250UNIT	204
<i>halcinonide soln 0.1%</i>	168	HEMOFIL M INJ 500UNIT	204
HALCION TAB 0.25MG.....	214	HEP SOD/D5W INJ 100/ML.....	58
HALDOL DECAN INJ 100MG/ML.....	123	HEP SOD/D5W INJ 20000UNT	58
HALDOL DECAN INJ 50MG/ML	123	HEP SOD/D5W INJ 25000UNT	58
<i>halobetasol propionate cream 0.05%</i>	168	HEP SOD/DEXT INJ 25000UNT	58
<i>halobetasol propionate oint 0.05%</i>	168	HEP SOD/NACL INJ 12500UNT	58
HALOG CRE 0.1%	168	HEP SOD/NACL INJ 25000UNT	58
HALOG OIN 0.1%.....	168	HEPAGAM B INJ	262
HALOG SOL 0.1%	168	<i>heparin sod (porcine)-nacl iv soln 1000</i>	
<i>haloperidol decanoate im soln 100 mg/ml</i>		<i>unit/500ml-0.9%</i>	58
.....	123	<i>heparin sod (porcine)-nacl iv soln 2000</i>	
<i>haloperidol decanoate im soln 50 mg/ml</i>	123	<i>unit/l-0.9%</i>	58
<i>haloperidol lactate inj 5 mg/ml</i>	123	<i>heparin sodium (porcine) 100 unit/ml in</i>	
<i>haloperidol lactate oral conc 2 mg/ml</i>	123	<i>d5w</i>	58
<i>haloperidol tab 0.5 mg</i>	123	<i>heparin sodium (porcine) inj 1000 unit/ml</i>	58
<i>haloperidol tab 1 mg</i>	124	<i>heparin sodium (porcine) inj 10000 unit/ml</i>	
<i>haloperidol tab 10 mg</i>	124	.....	58
<i>haloperidol tab 2 mg</i>	124	<i>heparin sodium (porcine) inj 20000 unit/ml</i>	
<i>haloperidol tab 20 mg</i>	124	.....	58
<i>haloperidol tab 5 mg</i>	124	<i>heparin sodium (porcine) inj 5000 unit/ml</i>	
HARVONI PAK	132	.....	58
HARVONI PAK 45-200MG.....	132	<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	
HARVONI TAB 45-200MG	132	.....	58
HARVONI TAB 90-400MG.....	132	<i>heparin sodium (porcine) pf inj 5000</i>	
HAVRIX INJ 1440UNIT	286	<i>unit/0.5ml</i>	58
HAVRIX INJ 720UNIT.....	286	<i>heparin sodium (porcine)-dextrose iv sol</i>	
HEALON DUET INJ PRO	258	<i>20000 unit/500ml-5%</i>	59
HEALON GV INJ 18MG PRO.....	258	HEPLISAV-B INJ 20/0.5ML.....	286
HEALON PRO INJ 10MG/ML	258	HEPSERA TAB 10MG.....	132
HEALON5 PRO INJ 23MG/ML.....	258	<i>her style tab 1.5mg</i>	152
<i>heather tab 0.35mg</i>	153	HERCEP HYLEC SOL 60-10000	109
HECTOROL INJ 4MCG/2ML.....	188	HERCEPTIN INJ 150MG.....	104
HEMABATE INJ 250MCG.....	261	HERZUMA INJ 150MG.....	104
HEMANGEOL SOL 4.28/ML.....	135	HERZUMA INJ 420MG.....	104
HEMATINIC/FA TAB	212	<i>hetastarch (hes /0.7 or /0.75) 6% in nacl</i>	
HEMLIBRA INJ 105/0.7	204	<i>0.9% iv soln</i>	207
HEMLIBRA INJ 150/ML	204	HETLIOZ CAP 20MG	215
HEMLIBRA INJ 300/2ML	204	HETLIOZ LQ SUS 4MG/ML.....	215
HEMLIBRA INJ 30MG/ML.....	204	HEXTEND SOL 6%.....	207
HEMLIBRA INJ 60/0.4.....	204	HIBERIX SOL 10MCG.....	285
HEMLIBRA SOL 12/0.4ML.....	204	<i>hidex 6-day pak 1.5mg</i>	154
HEMOFIL M INJ 1000UNIT.....	204	HIPREX TAB 1GM	47

HIZENTRA INJ 10/50ML.....	262	HYALGAN INJ 20MG/2ML.....	250
HIZENTRA INJ 1GM/5ML	262	HYCANTIN CAP 0.25MG	117
HIZENTRA INJ 2GM/10ML.....	262	HYCANTIN CAP 1MG.....	117
HIZENTRA INJ 4GM/20ML.....	262	HYCANTIN INJ 4MG.....	117
HIZENTRA SOL 20%	262	HYCLODEX SOL 0.012%.....	172
HORIZANT TAB 300MG ER.....	270	<i>hydralazine hcl inj 20 mg/ml</i>	98
HORIZANT TAB 600MG ER.....	270	<i>hydralazine hcl tab 10 mg</i>	98
HPR PLUS AER.....	172	<i>hydralazine hcl tab 100 mg.....</i>	98
HPR PLUS CRE.....	172	<i>hydralazine hcl tab 25 mg.....</i>	98
HPR PLUS KIT	172	<i>hydralazine hcl tab 50 mg</i>	98
HULIO INJ 40/0.8ML.....	21	HYDREA CAP 500MG.....	115
HULIO KIT 20/0.4ML	21	HYDRFRA BLUE PAD RDY 2.5	174
HUMALOG INJ 100/ML	78	HYDRFRA BLUE PAD RDY 4X5.....	174
HUMALOG KWIK INJ 100/ML	78	HYDRFRA BLUE PAD RDY 8X8.....	175
HUMALOG KWIK INJ 200/ML.....	78	HYDRFRA MRF PAD 2.....	175
HUMALOG MIX INJ 50/50.....	78	HYDRO/NACL INJ 20/100ML.....	33
HUMALOG MIX INJ 50/50KWP	78	HYDRO/NACL INJ 25/25	33
HUMALOG MIX INJ 75/25KWP	78	<i>hydrochlorothiazide cap 12.5 mg</i>	183
HUMALOG MIX SUS 75/25	78	<i>hydrochlorothiazide tab 12.5 mg</i>	183
HUMATE-P SOL 2400UNIT.....	204	<i>hydrochlorothiazide tab 25 mg</i>	183
HUMATE-P SOL 250-600	204	<i>hydrochlorothiazide tab 50 mg.....</i>	183
HUMATE-P SOL 500-1200.....	204	<i>hydrocod polst-chlorphen polst er susp 10-</i>	
HUMATIN CAP 250MG.....	20	<i>8 mg/5ml</i>	157
HUMATROPE INJ 12MG	186	<i>hydrocodone bitart-homatropine</i>	
HUMATROPE INJ 24MG.....	186	<i>methylbrom soln 5-1.5 mg/5ml.....</i>	157
HUMATROPE INJ 6MG.....	186	<i>hydrocodone bitart-homatropine</i>	
HUMIRA INJ 10/0.1ML	21	<i>methylbromide tab 5-1.5 mg</i>	157
HUMIRA INJ 20/0.2ML.....	21	<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	33
HUMIRA INJ 40/0.4ML	21	<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	33
HUMIRA KIT 40MG/0.8.....	21	<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	
HUMIRA PEDIA INJ CROHNS.....	22	<i>.....</i>	34
HUMIRA PEN INJ 40/0.4ML.....	22	<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	
HUMIRA PEN INJ 40MG/0.8	22	<i>.....</i>	34
HUMIRA PEN INJ 80/0.8ML.....	22	<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	
HUMIRA PEN KIT PS/UV	22	<i>.....</i>	34
HUMULIN BR INJ U-100	78	<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	
HUMULIN INJ 70/30.....	78	<i>.....</i>	34
HUMULIN INJ 70/30KWP	78	<i>hydrocodone bitartrate tab er 24hr deter</i>	
HUMULIN N INJ U-100	78	<i>100 mg.....</i>	34
HUMULIN N INJ U-100KWP.....	78	<i>hydrocodone bitartrate tab er 24hr deter</i>	
HUMULIN N PN INJ U-100	78	<i>120 mg</i>	34
HUMULIN PEN INJ 70/30	78	<i>hydrocodone bitartrate tab er 24hr deter 20</i>	
HUMULIN R INJ U-100.....	78	<i>mg</i>	34
HUMULIN R INJ U-500	78		

hydrocodone bitartrate tab er 24hr deter 30 mg	34
hydrocodone bitartrate tab er 24hr deter 40 mg	34
hydrocodone bitartrate tab er 24hr deter 60 mg	34
hydrocodone bitartrate tab er 24hr deter 80 mg	34
hydrocodone-acetaminophen soln 10-325 mg/15ml	39
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	39
hydrocodone-acetaminophen tab 10-300 mg	39
hydrocodone-acetaminophen tab 10-325 mg	39
hydrocodone-acetaminophen tab 2.5-325 mg	39
hydrocodone-acetaminophen tab 5-300 mg	39
hydrocodone-acetaminophen tab 5-325 mg	39
hydrocodone-acetaminophen tab 7.5-300 mg	39
hydrocodone-acetaminophen tab 7.5-325 mg	39
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hydrocodone-ibuprofen tab 5-200 mg	39
hydrocodone-ibuprofen tab 7.5-200 mg .	39
hydrocortisone acetate w/ pramoxine perianal cream 1-1%	42
hydrocortisone butyrate cream 0.1%	168
hydrocortisone butyrate hydrophilic lipo base cream 0.1%	168
hydrocortisone butyrate lotion 0.1%	168
hydrocortisone butyrate oint 0.1%	169
hydrocortisone butyrate soln 0.1%	169
hydrocortisone cream 1%	169
hydrocortisone cream 2.5%	169
hydrocortisone enema 100 mg/60ml	42
hydrocortisone lotion 2.5%	169
hydrocortisone oint 1%	169
hydrocortisone oint 2.5%	169
hydrocortisone perianal cream 1%	42

hydrocortisone perianal cream 2.5%	42
hydrocortisone sodium succinate pf for inj 100 mg	154
hydrocortisone soln 2.5%	169
hydrocortisone tab 10 mg	154
hydrocortisone tab 20 mg	154
hydrocortisone tab 5 mg	154
hydrocortisone valerate cream 0.2%	169
hydrocortisone valerate oint 0.2%	169
HYDROFERA PAD BLUE 2X2	175
HYDROFERA PAD BLUE 4X4	175
HYDROFERA PAD BLUE 6X6	175
HYDROFERA PAD BLUE 9MM	175
HYDROFERA PAD MRF 2.5	175
HYDROFERA PAD MRF4	175
HYDROFRA MRF PAD 2-1/4X8	175
HYDROG WOUND MIS 3	175
HYDROG WOUND MIS 4-3/4	175
HYDROGEL DRE PAD 2	175
HYDROGEL DRE PAD 4	175
HYDROGEL GAU PAD 2	175
HYDROGEL GAU PAD 4	175
hydrogen peroxide soln 30%	127
hydromet syp 5-1.5/5	157
HYDROMO/NACL INJ 20/100ML	34
HYDROMO/NACL INJ 2MG/ML	34
HYDROMORPHON INJ 0.2MG/ML	34
HYDROMORPHON INJ 10MG/ML	34
HYDROMORPHON INJ 1MG/ML	34
HYDROMORPHON INJ 2MG/ML	34
HYDROMORPHON INJ 30/30ML	34
HYDROMORPHON INJ 4MG/ML	34
HYDROMORPHON SOL 0.2MG/ML	34
hydromorphone hcl inj 0.2 mg/ml	34
hydromorphone hcl inj 1 mg/ml	34
hydromorphone hcl inj 2 mg/ml	34
hydromorphone hcl liqd 1 mg/ml	34
hydromorphone hcl preservative free (pf) inj 10 mg/ml	34
hydromorphone hcl tab 2 mg	34
hydromorphone hcl tab 4 mg	34
hydromorphone hcl tab 8 mg	34
hydromorphone hcl tab er 24hr 12 mg	34
hydromorphone hcl tab er 24hr 16 mg	34

<i>hydromorphone hcl tab er 24hr 32 mg</i>	34	HYRIMOZ INJ 40/0.4ML	22
<i>hydromorphone hcl tab er 24hr 8 mg</i>	34	HYRIMOZ INJ 40/0.8ML	22
<i>hydroxocobalamin acetate inj 1000 mcg/ml</i> (base equivalent)	209	HYRIMOZ INJ 80/0.8ML	23
<i>hydroxychloroquine sulfate tab 200 mg</i> ..	99	HYRIMOZ SENS INJ 80/0.8ML.....	23
<i>hydroxyurea cap 500 mg</i>	115	HYRIMOZ-CROH INJ UC SP	23
<i>hydroxyzine hcl im soln 25 mg/ml</i>	49	HYRIMOZ-PED INJ CROHNS.....	23
<i>hydroxyzine hcl im soln 50 mg/ml</i>	49	HYRIMOZ-PLAQ INJ PSOR/UVE	23
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	49	HYRIMOZ-PLAQ INJ PSORIASI	24
<i>hydroxyzine hcl tab 10 mg</i>	49	HYSINGLA ER TAB 100 MG.....	34
<i>hydroxyzine hcl tab 25 mg</i>	49	HYSINGLA ER TAB 120 MG	34
<i>hydroxyzine hcl tab 50 mg</i>	49	HYSINGLA ER TAB 20 MG.....	34
<i>hydroxyzine pamoate cap 100 mg</i>	49	HYSINGLA ER TAB 30 MG.....	34
<i>hydroxyzine pamoate cap 25 mg</i>	49	HYSINGLA ER TAB 40 MG	34
<i>hydroxyzine pamoate cap 50 mg</i>	49	HYSINGLA ER TAB 60 MG	34
HYFTOR GEL 0.2%	170	HYSINGLA ER TAB 80 MG	34
HYLAZINC TAB	244	HYZAAR TAB 100-12.5	96
HYLENEX INJ 150 UNIT	239	HYZAAR TAB 100-25.....	96
HYMOVIS INJ 24MG/3ML	250	HYZAAR TAB 50-12.5.....	96
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	281	I	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	281	<i>ibandronate sodium iv soln 3 mg/3ml (base</i> <i>equivalent)</i>	184
<i>hyoscyamine sulfate soln 0.125 mg/ml</i> ...	281	<i>ibandronate sodium tab 150 mg (base</i> <i>equivalent)</i>	184
<i>hyoscyamine sulfate tab 0.125 mg</i>	281	IBRANCE CAP 100MG.....	111
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	281	IBRANCE CAP 125MG	111
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	281	IBRANCE CAP 75MG.....	111
<i>hyosyne dro 0.125/ml</i>	281	IBRANCE TAB 100MG	111
<i>hyosyne elx 0.125/5</i>	281	IBRANCE TAB 125MG	111
HYPERHEP B INJ	262	IBRANCE TAB 75MG	111
HYPERRAB INJ 1500UNIT	262	IBSRELA TAB 50MG	198
HYPERRAB INJ 300UNIT	262	<i>ibu tab 400mg</i>	27
HYPERRHO S/D INJ 300MCG.....	262	<i>ibu tab 600mg</i>	27
HYPERRHO S/D INJ 50MCG	262	<i>ibu tab 800mg</i>	27
HYPERSAL NEB 3.5%	157	<i>ibuprofen lysine iv soln 10 mg/ml (base</i> <i>equivalent)</i>	27
HYPERSAL NEB 7%	157	<i>ibuprofen susp 100 mg/5ml</i>	27
HYPERTET INJ 250/ML.....	262	<i>ibuprofen tab 400 mg</i>	27
HYPOCYN SOL 0.012%	172	<i>ibuprofen tab 600 mg</i>	27
HYQVIA INJ 10-800	263	<i>ibuprofen tab 800 mg</i>	27
HYQVIA INJ 2.5-200	263	<i>ibuprofen-famotidine tab 800-26.6 mg</i>	27
HYQVIA INJ 20-1600	263	<i>ibutilide fumarate inj 1 mg/10ml</i>	51
HYQVIA INJ 30-2400	263	ICAR-C PLUS TAB	212
HYQVIA INJ 5-400	263	<i>icatibant acetate subcutaneous soln pref</i> <i>syr 30 mg/3ml</i>	206
HYRIMOZ INJ 10/0.1ML.....	22		
HYRIMOZ INJ 20/0.2ML	22		

<i>iclevia tab</i>	148	IMBRUVICA SUS 70MG/ML	112
ICLUSIG TAB 10MG	111	IMBRUVICA TAB 140MG.....	112
ICLUSIG TAB 15MG	111	IMBRUVICA TAB 280MG	112
ICLUSIG TAB 30MG	111	IMBRUVICA TAB 420MG	112
ICLUSIG TAB 45MG	111	IMBRUVICA TAB 560MG.....	112
<i>icosapent ethyl cap 0.5 gm</i>	87	IMCIVREE INJ 10MG/ML	15
<i>icosapent ethyl cap 1 gm</i>	87	IMDELLTRA INJ 10MG	105
IDACIO 2-PEN INJ 40/0.8ML	24	IMDELLTRA INJ 1MG.....	105
IDACIO 2-SYR INJ 40/0.8ML	24	IMFINZI INJ 120/2.4	105
IDAMYCIN PFS INJ 10/10ML	109	IMFINZI INJ 500/10	105
IDAMYCIN PFS INJ 20/20ML	109	<i>imipenem-cilastatin intravenous for soln</i>	
IDAMYCIN PFS INJ 5MG/5ML	109	250 mg	44
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>		<i>imipenem-cilastatin intravenous for soln</i>	
.....	109	500 mg	44
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>		<i>imipramine hcl tab 10 mg</i>	73
.....	109	<i>imipramine hcl tab 25 mg</i>	73
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i> .	109	<i>imipramine hcl tab 50 mg</i>	73
IDELVION SOL 1000UNIT	204	<i>imipramine pamoate cap 100 mg</i>	73
IDELVION SOL 2000UNIT	204	<i>imipramine pamoate cap 125 mg</i>	73
IDELVION SOL 250UNIT	204	<i>imipramine pamoate cap 150 mg</i>	73
IDELVION SOL 3500UNIT	204	<i>imipramine pamoate cap 75 mg</i>	73
IDELVION SOL 500UNIT	204	<i>imiquimod cream 3.75%</i>	170
IDHIFA TAB 100MG	112	<i>imiquimod cream 5%</i>	170
IDHIFA TAB 50MG.....	111	IMITREX INJ 4MG/0.5	232
IFEX INJ 1GM	101	IMITREX INJ 6MG/0.5	232
IFEX INJ 3GM	101	IMITREX TAB 100MG	232
<i>ifosfamide for inj 1 gm</i>	101	IMITREX TAB 25MG	232
IFOSFAMIDE INJ 3GM	101	IMITREX TAB 50MG	232
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i> ..	101	IMJUDO INJ 25/1.25.....	105
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i> .	101	IMJUDO INJ 300/15ML	105
IGALMI MIS 120MCG	214	IMLYGIC INJ	117
IGALMI MIS 180MCG	214	IMMPHENTIV INJ	289
IHEALTH BLOO TES GLUCOSE	179	IMOGAM RABIE INJ 300/2ML.....	262
ILARIS INJ 150MG/ML.....	26	IMOVAX RABIE INJ 2.5/ML	286
ILEVRO DRO 0.3% OP	259	IMPAVIDO CAP 50MG	43
ILUMYA INJ 100MG/ML	164	IMPOYZ CRE 0.025%.....	169
ILUVIEN IMP 0.19MG	257	IMUBOLIC CAP	241
IMAAVY INJ 1200/6.5.....	239	IMURAN TAB 50MG	240
<i>imatinib mesylate tab 100 mg (base</i>		IMVEXXY MAIN SUP 10MCG.....	287
<i>equivalent)</i>	112	IMVEXXY MAIN SUP 4MCG	287
<i>imatinib mesylate tab 400 mg (base</i>		IMVEXXY STRT SUP 10MCG	287
<i>equivalent)</i>	112	IMVEXXY STRT SUP 4MCG.....	287
IMBRUVICA CAP 140MG	112	IN TOUCH LAN MIS 30G.....	225
IMBRUVICA CAP 70MG.....	112	IN TOUCH TES BLOOD	179

<i>inatal gt tab</i>	246	INJECTAFER INJ 100/2ML.....	212
INBRIJA CAP 42MG	119	INJECTAFER INJ 750/15ML.....	212
<i>incassia tab 0.35mg</i>	153	INLYTA TAB 1MG	104
INCONTROL MIS 29GX12MM.....	230	INLYTA TAB 5MG	104
INCONTROL MIS LANC 28G.....	225	INNOPRAN XL CAP 120MG.....	135
INCONTROL MIS LANC 30G	225	INNOPRAN XL CAP 80MG	135
INCONTROL MIS LANC 33G.....	225	INPEFA TAB 400MG	142
INCRELEX INJ 40MG/4ML	187	INQOVI TAB 35-100MG	110
INCRUSE ELPT INH 62.5MCG	52	INREBIC CAP 100MG	112
<i>indapamide tab 1.25 mg</i>	183	INS ASP PROT INJ FLEXPEN	78
<i>indapamide tab 2.5 mg</i>	183	INS DEGL FLX INJ 100UNIT	78
INDERAL LA CAP 120MG	135	INS DEGL FLX INJ 200UNIT	78
INDERAL LA CAP 160MG	135	INS SY 0.3ML MIS 31GX5/16.....	230
INDERAL LA CAP 60MG.....	135	INS SY 0.5ML MIS 30GX1/2	230
INDERAL LA CAP 80MG.....	135	INS SY 1/2ML MIS 30GX1/2	230
INDERAL XL CAP 120MG	135	INS SYR 1ML MIS 30GX1/2.....	230
INDERAL XL CAP 80MG.....	135	INS SYR 1ML MIS 31GX5/16	230
INDOCIN SUP 50MG.....	27	INS SYR U500 MIS 0.5/31G.....	230
INDOCIN SUS 25MG/5ML	28	INS SYR U500 MIS 31GX6MM	230
<i>indomethacin cap 25 mg</i>	28	INSPIRA TAB 25MG.....	98
<i>indomethacin cap 50 mg</i>	28	INSPIRA TAB 50MG	98
<i>indomethacin cap er 75 mg</i>	28	INSULIN DEGL INJ 100UNIT	78
<i>indomethacin suppos 50 mg</i>	28	INSULIN SRYG MIS 1ML/32G.....	230
<i>indomethacin susp 25 mg/5ml</i>	28	INSULIN SYR MIS BARR 1ML	230
INFANRIX INJ.....	280	INSULIN SYRG MIS 0.3/29G	230
INFASURF SUS 35MG/ML.....	274	INSULIN SYRG MIS 0.3/30G.....	230
INFED INJ 50MG/ML.....	212	INSULIN SYRG MIS 0.3/31G.....	230
INFINITY TES BLD GLUC	179	INSULIN SYRG MIS 0.5/28G	230
INFLECTRA INJ 100MG	197	INSULIN SYRG MIS 0.5/29G	230
INFUGEM SOL 1200MG	102	INSULIN SYRG MIS 0.5/30G.....	230
INFUGEM SOL 1300MG.....	102	INSULIN SYRG MIS 0.5/31G.....	230
INFUGEM SOL 1400MG.....	102	INSULIN SYRG MIS 0.5/32G	230
INFUGEM SOL 1500MG.....	103	INSULIN SYRG MIS 1ML.....	230
INFUGEM SOL 1600MG.....	103	INSULIN SYRG MIS 1ML/27G.....	230
INFUGEM SOL 1700MG	103	INSULIN SYRG MIS 1ML/28G.....	230
INFUGEM SOL 1800MG.....	103	INSULIN SYRG MIS 1ML/29G.....	231
INFUGEM SOL 2000MG	103	INSULIN SYRG MIS 1ML/30G	231
INFUGEM SOL 2200MG	103	INSULIN SYRG MIS 1ML/31G	231
INFUMORPH INJ 10MG/ML.....	34	INSULIN SYRG MIS 2/27.5G	231
INFUMORPH INJ 25MG/ML	35	INSULIN SYRG MIS 29GX12MM	231
INGREZZA CAP 40-80MG.....	268	INSULIN SYRG MIS 31GX8MM.....	231
INGREZZA CAP 40MG	268	INSUPEN MIS 29GX12MM	231
INGREZZA CAP 60MG.....	268	INTELENCE TAB 100MG.....	129
INGREZZA CAP 80MG	268	INTELENCE TAB 200MG	129

INTELENCE TAB 25MG.....	129	IPOL INJ INACTIVE.....	286
INTERMEZZO SUB 1.75MG.....	214	<i>ipratropium bromide inhal soln 0.02%</i>	52
INTERMEZZO SUB 3.5MG	214	<i>ipratropium bromide nasal soln 0.03% (21</i>	
INTRALIPID INJ 20%	253	<i>mcg/spray)</i>	250
INTRALIPID INJ 30%	253	<i>ipratropium bromide nasal soln 0.06% (42</i>	
INTRAROSA SUP 6.5MG	287	<i>mcg/spray)</i>	250
<i>introvale tab.....</i>	148	<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i>	
INTUNIV TAB 1MG	15	<i>mg/3ml.....</i>	55
INTUNIV TAB 2MG	15	IQIRVO TAB 80MG	199
INTUNIV TAB 3MG	15	<i>irbesartan tab 150 mg</i>	93
INTUNIV TAB 4MG	15	<i>irbesartan tab 300 mg.....</i>	93
INVEGA HAFYE INJ 1092MG	122	<i>irbesartan tab 75 mg</i>	93
INVEGA HAFYE INJ 1560MG	122	<i>irbesartan-hydrochlorothiazide tab 150-12.5</i>	
INVEGA SUST INJ 117/0.75.....	122	<i>mg</i>	96
INVEGA SUST INJ 156MG/ML	122	<i>irbesartan-hydrochlorothiazide tab 300-</i>	
INVEGA SUST INJ 234/1.5.....	122	<i>12.5 mg</i>	96
INVEGA SUST INJ 39/0.25.....	122	IRESSA TAB 250MG	107
INVEGA SUST INJ 78/0.5ML	122	<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)118</i>	
INVEGA TAB 3MG	122	<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	
INVEGA TAB 6MG	122	<i>.....</i>	118
INVEGA TAB 9MG	122	<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml) 118</i>	
INVEGA TRINZ INJ 273MG.....	122	<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	
INVEGA TRINZ INJ 410MG.....	122	<i>.....</i>	118
INVEGA TRINZ INJ 546MG	122	ISENTRESS CHW 100MG	129
INVEGA TRINZ INJ 819MG	122	ISENTRESS CHW 25MG	129
INVELTYS SUS 1%	258	ISENTRESS HD TAB 600MG.....	129
INVIRASE TAB 500MG	129	ISENTRESS POW 100MG.....	129
INVOKAMET TAB 150-1000	74	ISENTRESS TAB 400MG.....	129
INVOKAMET TAB 150-500	74	<i>isibloom tab</i>	148
INVOKAMET TAB 50-1000	74	<i>isoflurane inhal soln</i>	200
INVOKAMET TAB 50-500MG.....	74	ISOLYTE-P INJ /D5W.....	234
INVOKAMET XR TAB 150-1000	74	ISOLYTE-S INJ	234
INVOKAMET XR TAB 150-500.....	74	ISOLYTE-S INJ PH 7.4.....	234
INVOKAMET XR TAB 50-1000	74	<i>isoniazid inj 100 mg/ml</i>	99
INVOKAMET XR TAB 50-500MG.....	74	<i>isoniazid syrup 50 mg/5ml.....</i>	100
INVOKANA TAB 100MG	80	<i>isoniazid tab 100 mg.....</i>	100
INVOKANA TAB 300MG.....	80	<i>isoniazid tab 300 mg</i>	100
INZIRQO SUS 10MG/ML	183	<i>isoproterenol hcl inj 0.2 mg/ml.....</i>	55
<i>iodine solution strong 5% (lugol's).....</i>	235	ISORDIL TAB 40MG	48
IODINE TIN 2%.....	128	ISORDIL TAB 5MG	48
<i>iodoquimez cre 1-1.9%.....</i>	162	ISOSORB MONO TAB 10MG	48
IONOSOL-MB INJ D5W	234	ISOSORB MONO TAB 20MG.....	48
IONSYS PAD 40MCG/AC.....	35	<i>isosorbide dinitrate tab 10 mg.....</i>	48
IOPIDINE SOL 1% OP	255	<i>isosorbide dinitrate tab 20 mg</i>	48

<i>isosorbide dinitrate tab 30 mg</i>	48
<i>isosorbide dinitrate tab 40 mg</i>	48
<i>isosorbide dinitrate tab 5 mg</i>	48
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	142
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	48
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	48
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	48
<i>isotretinoin cap 10 mg</i>	159
<i>isotretinoin cap 20 mg</i>	159
<i>isotretinoin cap 25 mg</i>	159
<i>isotretinoin cap 30 mg</i>	160
<i>isotretinoin cap 35 mg</i>	160
<i>isotretinoin cap 40 mg</i>	160
<i>isradipine cap 2.5 mg</i>	138
<i>isradipine cap 5 mg</i>	138
ISTALOL SOL 0.5% OP	254
ISTODAX INJ 10MG.....	112
ISTURISA TAB 10MG	184
ISTURISA TAB 1MG	184
ISTURISA TAB 5MG.....	184
ITOVEBI TAB 3MG	112
ITOVEBI TAB 9MG.....	112
<i>itraconazole cap 100 mg</i>	85
<i>itraconazole oral soln 10 mg/ml</i>	85
<i>ivabradine hcl tab 5 mg (base equiv)</i>	144
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	144
<i>ivermectin cream 1%</i>	173
<i>ivermectin tab 3 mg</i>	43
<i>ivermectin tab 6 mg</i>	43
IVRA INJ 90MG/ML	101
IWILFIN TAB 192MG.....	116
IXCHIQ INJ	286
IXEMPRA KIT INJ 15MG.....	117
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IXINITY INJ 1000UNIT	204
IXINITY INJ 1500UNIT	204
IXINITY INJ 2000UNIT	204
IXINITY INJ 250UNIT	204
IXINITY INJ 3000UNIT	204

IXINITY INJ 500UNIT	204
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J	
JADENU SPRKL GRA 180MG	81
JADENU SPRKL GRA 360MG	81
JADENU SPRKL GRA 90MG	81
JADENU TAB 180MG.....	82
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<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	235	<i>ketamine hcl inj 50 mg/ml</i>	200
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<i>kls aspirin tab 81mg ec</i>	32
<i>kls diclofen gel 1%</i>	161
<i>kls quit2 gum 2mg</i>	271
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<i>kls quit4 gum 4mg</i>	271
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<i>lactic acid (ammonium lactate) lotion 12%</i>		<i>lamotrigine tab 35 x 25 mg starter kit</i>	62
.....	170	<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg</i>	
LACTIC ACID CRE E	170	<i>starter kit</i>	62
<i>lactojen cap</i>	81	<i>lamotrigine tab chewable dispersible 25 mg</i>	
<i>lactulose (encephalopathy) solution 10</i>			62
<i>gm/15ml</i>	198	<i>lamotrigine tab chewable dispersible 5 mg</i>	
<i>lactulose oral crystal packet 20 gm</i>	216		62
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<i>lamivudine oral soln 10 mg/ml</i>	129	LANCET ULTRA MIS THIN 30G	225
<i>lamivudine tab 100 mg (hbv)</i>	132	LANCETS MICR MIS THIN 33G	225
<i>lamivudine tab 150 mg</i>	129	LANCETS MIS	225
<i>lamivudine tab 300 mg</i>	129	LANCETS MIS 21G	225
<i>lamivudine-zidovudine tab 150-300 mg</i>	129	LANCETS MIS 26G	225
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LANOXIN INJ 0.25MG/1	140	LAZANDA SPR 300MCG	35
LANOXIN INJ 0.5/2ML	140	LAZANDA SPR 400MCG	35
LANOXIN PED INJ 0.1MG/ML	140	LECITHIN GRA	253
LANOXIN TAB 0.0625MG	140	LEDIP-SOFOSB TAB 90-400MG	132
LANOXIN TAB 0.125MG	140	<i>leena tab</i>	149
LANOXIN TAB 0.25MG	140	<i>leflunomide tab 10 mg</i>	30
<i>lanreotide acetate extended release inj 120</i>		<i>leflunomide tab 20 mg</i>	30
<i>mg/0.5ml</i>	191	LEMTRADA INJ 12/1.2ML	269
LANREOTIDE INJ 120/.5ML	191	<i>lenalidomide cap 10 mg</i>	239
<i>lansoprazole cap delayed release 15 mg</i>	282	<i>lenalidomide cap 15 mg</i>	239
<i>lansoprazole cap delayed release 30 mg</i>		<i>lenalidomide cap 20 mg</i>	239
.....	282	<i>lenalidomide cap 25 mg</i>	239
<i>lansoprazole tab delayed release orally</i>		<i>lenalidomide cap 5 mg</i>	239
<i>disintegrating 15 mg</i>	282	<i>lenalidomide caps 2.5 mg</i>	239
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<i>lanthanum carbonate chew tab 500 mg</i>		LENVIMA CAP 18 MG	104
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<i>lanthanum carbonate chew tab 750 mg</i>		LENVIMA CAP 24 MG	104
<i>(elemental)</i>	199	LENVIMA CAP 4MG	104
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<i>larin fe tab 1.5/30</i>	149	LETAIRIS TAB 10MG	143
<i>larin fe tab 1/20</i>	149	LETAIRIS TAB 5MG	143
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LASIX TAB 40MG	183	<i>leucovorin calcium for inj 350 mg</i>	116
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LASTACFT SOL 0.25%	260	<i>leucovorin calcium for inj 500 mg</i>	116
<i>latanoprost ophth soln 0.005%</i>	260	<i>leucovorin calcium inj 100 mg/10ml (10</i>	
LATANOPROST SOL 0.005%	260	<i>mg/ml)</i>	116

<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	116	LEVICYN SOL DERMAL	175
<i>leucovorin calcium tab 10 mg</i>	116	<i>levobunolol hcl ophth soln 0.5%</i>	254
<i>leucovorin calcium tab 15 mg</i>	116	<i>levocarnitine inj 200 mg/ml</i>	188
<i>leucovorin calcium tab 25 mg</i>	116	<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	188
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<i>levabuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	55	<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	195
<i>levabuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	55	<i>levofloxacin iv soln 25 mg/ml</i>	195
<i>levabuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	55	<i>levofloxacin ophth soln 0.5%</i>	256
<i>levabuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	55	<i>levofloxacin ophth soln 1.5%</i>	256
<i>levamlodipine maleate tab 2.5 mg</i>	138	<i>levofloxacin oral soln 25 mg/ml</i>	195
<i>levamlodipine maleate tab 5 mg</i>	138	<i>levofloxacin tab 250 mg</i>	195
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<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	63	<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	149
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	63	<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	149
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	63	<i>levonorgestrel tab 1.5 mg</i>	152
<i>levetiracetam oral soln 100 mg/ml</i>	63	<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	149
<i>levetiracetam tab 1000 mg</i>	63	<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	149
<i>levetiracetam tab 250 mg</i>	63	<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	149
<i>levetiracetam tab 500 mg</i>	63	<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	149
<i>levetiracetam tab 750 mg</i>	63	LEVOPHED INJ 1MG/ML	289
<i>levetiracetam tab er 24hr 500 mg</i>	63	<i>levora-28 tab 0.15/30</i>	149
<i>levetiracetam tab er 24hr 750 mg</i>	63		
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<i>levorphanol tartrate tab 2 mg</i>	35	<i>levoxyl tab 112mcg</i>	278
<i>levo-t tab 100mcg</i>	277	<i>levoxyl tab 125mcg</i>	278
<i>levo-t tab 112mcg</i>	277	<i>levoxyl tab 137mcg</i>	278
<i>levo-t tab 125mcg</i>	277	<i>levoxyl tab 150mcg</i>	278
<i>levo-t tab 137mcg</i>	277	<i>levoxyl tab 175mcg</i>	278
<i>levo-t tab 150mcg</i>	277	<i>levoxyl tab 200mcg</i>	278
<i>levo-t tab 175mcg</i>	277	<i>levoxyl tab 25mcg</i>	278
<i>levo-t tab 200mcg</i>	277	<i>levoxyl tab 50mcg</i>	278
<i>levo-t tab 25mcg</i>	277	<i>levoxyl tab 75mcg</i>	278
<i>levo-t tab 300 mcg</i>	277	<i>levoxyl tab 88mcg</i>	278
<i>levo-t tab 50mcg</i>	277	LEVSIN TAB 0.125MG	281
<i>levo-t tab 75mcg</i>	277	LEVSIN/SL SUB 0.125MG	281
<i>levo-t tab 88mcg</i>	277	LEVULAN KERA SOL 20%	163
LEVOTHYROXIN INJ 100MCG	277	LEXAPRO TAB 10MG	69
LEVOTHYROXIN INJ 200MCG	277	LEXAPRO TAB 20MG	69
LEVOTHYROXIN INJ 500MCG	277	LEXAPRO TAB 5MG	69
<i>levothyroxine sodium cap 100 mcg</i>	277	LEXIVA SUS 50MG/ML	129
<i>levothyroxine sodium cap 112 mcg</i>	277	LEXIVA TAB 700MG	129
<i>levothyroxine sodium cap 125 mcg</i>	277	LIALDA TAB 1.2GM	197
<i>levothyroxine sodium cap 13 mcg</i>	277	LIBERTY NEXT TES GEN	180
<i>levothyroxine sodium cap 137 mcg</i>	277	LIBERTY TES	180
<i>levothyroxine sodium cap 150 mcg</i>	277	LIBERVANT MIS 10MG	60
<i>levothyroxine sodium cap 175 mcg</i>	277	LIBERVANT MIS 12.5MG	60
<i>levothyroxine sodium cap 200 mcg</i>	277	LIBERVANT MIS 15MG	60
<i>levothyroxine sodium cap 25 mcg</i>	277	LIBERVANT MIS 5MG	60
<i>levothyroxine sodium cap 50 mcg</i>	277	LIBERVANT MIS 7.5MG	60
<i>levothyroxine sodium cap 75 mcg</i>	277	LIBRAX CAP 5-2.5MG	281
<i>levothyroxine sodium cap 88 mcg</i>	277	LIBTAYO INJ 350/7ML	105
<i>levothyroxine sodium for iv inj 100 mcg</i>	277	LIDO/TETRA INJ 0.4-0.2%	216
<i>levothyroxine sodium for iv inj 200 mcg</i>	277	LIDOCAINE CRE TETRACAI	171
<i>levothyroxine sodium for iv inj 500 mcg</i>	277	LIDOCAINE HC INJ 200/10ML	217
<i>levothyroxine sodium tab 100 mcg</i>	277	<i>lidocaine hcl (cardiac) iv pf soln pref syr 50</i> <i>mg/5ml(1%)</i>	51
<i>levothyroxine sodium tab 112 mcg</i>	277	<i>lidocaine hcl (cardiac) iv soln pref syr 100</i> <i>mg/5ml (2%)</i>	51
<i>levothyroxine sodium tab 125 mcg</i>	277	<i>lidocaine hcl (cardiac) iv soln pref syr 50</i> <i>mg/5ml (1%)</i>	51
<i>levothyroxine sodium tab 137 mcg</i>	277	<i>lidocaine hcl laryngotracheal soln 4%</i>	243
<i>levothyroxine sodium tab 150 mcg</i>	277	<i>lidocaine hcl local inj 0.5%</i>	217
<i>levothyroxine sodium tab 175 mcg</i>	277	<i>lidocaine hcl local inj 1%</i>	217
<i>levothyroxine sodium tab 200 mcg</i>	278	<i>lidocaine hcl local inj 2%</i>	217
<i>levothyroxine sodium tab 25 mcg</i>	277	<i>lidocaine hcl local preservative free (pf) inj</i> <i>0.5%</i>	217
<i>levothyroxine sodium tab 300 mcg</i>	278		
<i>levothyroxine sodium tab 50 mcg</i>	277		
<i>levothyroxine sodium tab 75 mcg</i>	277		
<i>levothyroxine sodium tab 88 mcg</i>	277		
<i>levoxyl tab 100mcg</i>	278		

<i>lidocaine hcl local preservative free (pf) inj</i> 1%	217	<i>linezolid tab 600 mg</i>	47
<i>lidocaine hcl local preservative free (pf) inj</i> 1.5%	217	LINZESS CAP 145MCG	198
<i>lidocaine hcl local preservative free (pf) inj</i> 2%	217	LINZESS CAP 290MCG	198
<i>lidocaine hcl local preservative free (pf) inj</i> 4%	217	LINZESS CAP 72MCG	198
<i>lidocaine hcl soln 4%</i>	171	<i>liothyronine sodium iv soln 10 mcg/ml</i> ...	278
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<i>lidocaine hcl urethral/mucosal gel prefilled</i> <i>syringe 2%</i>	171	<i>liothyronine sodium tab 5 mcg</i>	278
<i>lidocaine hcl viscous soln 2%</i>	243	<i>liothyronine sodium tab 50 mcg</i>	278
<i>lidocaine hcl(cardiac) iv pf soln pref syr 100</i> <i>mg/5ml (2%)</i>	51	LIPITOR TAB 10MG	89
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	217	LIPITOR TAB 20MG	89
LIDOCAINE INJ 1%	218	LIPITOR TAB 40MG	89
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	217	LIPITOR TAB 80MG	89
<i>lidocaine inj 1.5% w/ epinephrine-1:200000</i> <i>(pf)</i>	217	LIPOFEN CAP 150MG	88
LIDOCAINE INJ 100/5ML	218	LIPOFEN CAP 50MG	88
LIDOCAINE INJ 2%	218	LIQREV SUS 10MG/ML	143
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	217	<i>liraglutide soln pen-injector 18 mg/3ml (6</i> <i>mg/ml)</i>	77
<i>lidocaine inj 2% w/ epinephrine-1:200000</i> <i>(pf)</i>	217	<i>lisdexamfetamine dimesylate cap 10 mg</i> ..	13
LIDOCAINE INJ 20MG/ML	51	<i>lisdexamfetamine dimesylate cap 20 mg</i> .	13
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	51	<i>lisdexamfetamine dimesylate cap 30 mg</i> .	13
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	51	<i>lisdexamfetamine dimesylate cap 40 mg</i> .	13
<i>lidocaine oint 5%</i>	171	<i>lisdexamfetamine dimesylate cap 50 mg</i> .	13
<i>lidocaine patch 5%</i>	171	<i>lisdexamfetamine dimesylate cap 60 mg</i> .	13
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	171	<i>lisdexamfetamine dimesylate cap 70 mg</i> .	13
LIDODERM DIS 5% PATCH	171	<i>lisdexamfetamine dimesylate chew tab 10</i> <i>mg</i>	13
LIDOTREX GEL 2%	175	<i>lisdexamfetamine dimesylate chew tab 20</i> <i>mg</i>	13
LIKMEZ SUS 500/5ML	43	<i>lisdexamfetamine dimesylate chew tab 30</i> <i>mg</i>	13
LILETTA IUD 52MG	152	<i>lisdexamfetamine dimesylate chew tab 40</i> <i>mg</i>	14
LINCOCIN INJ 300MG/ML	46	<i>lisdexamfetamine dimesylate chew tab 50</i> <i>mg</i>	14
LINCOCIN INJ 600/2ML	46	<i>lisdexamfetamine dimesylate chew tab 60</i> <i>mg</i>	14
<i>lincomycin hcl inj 300 mg/ml</i>	46	<i>lisinopril & hydrochlorothiazide tab 10-12.5</i> <i>mg</i>	96
<i>linezolid for susp 100 mg/5ml</i>	47	<i>lisinopril & hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	96
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	47	<i>lisinopril & hydrochlorothiazide tab 20-25</i> <i>mg</i>	96
		<i>lisinopril tab 10 mg</i>	91
		<i>lisinopril tab 2.5 mg</i>	91

<i>lisinopril tab 20 mg</i>	91	<i>loperamide hcl cap 2 mg</i>	81
<i>lisinopril tab 30 mg</i>	91	LOPID TAB 600MG	88
<i>lisinopril tab 40 mg</i>	91	<i>lopinavir-ritonavir tab 100-25 mg</i>	129
<i>lisinopril tab 5 mg</i>	91	<i>lopinavir-ritonavir tab 200-50 mg</i>	129
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<i>lithium carbonate cap 300 mg</i>	121	<i>lorazepam inj 2 mg/ml</i>	50
<i>lithium carbonate cap 600 mg</i>	121	<i>lorazepam inj 4 mg/ml</i>	50
<i>lithium carbonate tab 300 mg</i>	121	<i>lorazepam tab 0.5 mg</i>	50
<i>lithium carbonate tab er 300 mg</i>	121	<i>lorazepam tab 1 mg</i>	50
<i>lithium carbonate tab er 450 mg</i>	121	<i>lorazepam tab 2 mg</i>	50
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LIVALO TAB 2MG	89	LOREEV XR CAP 2MG	50
LIVALO TAB 4MG	89	LOREEV XR CAP 3MG	50
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LIVMARLI TAB 15MG	196	<i>tab 100-12.5 mg</i>	96
LIVMARLI TAB 30MG	196	<i>losartan potassium & hydrochlorothiazide</i>	
LIVTENCITY TAB 200MG	131	<i>tab 100-25 mg</i>	96
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<i>lmd 10%/nacl inj 0.9%</i>	207	<i>tab 50-12.5 mg</i>	96
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<i>loestrin tab 1/20-21</i>	149	LOTEMAX SM GEL 0.38%	258
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LONHALA MAGN SOL 25MCG	52	<i>loteprednol etabonate ophth gel 0.5%</i>	258
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<i>megestrol acetate tab 20 mg</i>	108	<i>meperidine hcl inj 50 mg/ml</i>	35
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MEIJER TES TRUETEST	180	<i>mercaptopurine susp 2000 mg/100ml (20</i>	
MEIJER TES TRUETRAC	180	<i>mg/ml)</i>	103
MEKINIST SOL 0.05/ML.....	112	<i>mercaptopurine tab 50 mg</i>	103
MEKINIST TAB 0.5MG	112	<i>meropenem iv for soln 1 gm</i>	44
MEKINIST TAB 2MG.....	112	<i>meropenem iv for soln 500 mg</i>	44
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<i>meloxicam cap 10 mg</i>	28	<i>mesalamine cap dr 400 mg</i>	197
<i>meloxicam cap 5 mg</i>	28	<i>mesalamine cap er 24hr 0.375 gm</i>	197

<i>mesalamine enema 4 gm</i>	197	<i>methadone hcl soln 5 mg/5ml</i>	35
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	197	<i>methadone hcl tab 10 mg</i>	35
<i>mesalamine suppos 1000 mg</i>	197	<i>methadone hcl tab 5 mg</i>	35
<i>mesalamine tab delayed release 1.2 gm</i> ..	197	<i>methadone hcl tab for oral susp 40 mg</i>	35
<i>mesalamine tab delayed release 800 mg</i>	197	METHADONE INJ 10MG/ML	35
<i>mesna inj 100 mg/ml</i>	116	METHADOSE CON 10MG/ML	35
<i>mesna tab 400 mg</i>	116	METHADOSE SF CON 10MG/ML	35
MESNEX INJ 1GM	116	<i>methadose tab 40mg</i>	35
MESNEX TAB 400MG	116	<i>methamphetamine hcl tab 5 mg</i>	14
MESTINON SOL 60MG/5ML	99	<i>methazolamide tab 25 mg</i>	182
MESTINON TAB 60MG	99	<i>methazolamide tab 50 mg</i>	182
MESTINON TAB TIMESPAN	99	<i>methenamine hippurate tab 1 gm</i>	47
METADATE CD CAP 10MG	17	<i>methenamine mandelate tab 0.5 gm</i>	47
METADATE CD CAP 20MG	17	<i>methenamine mandelate tab 1 gm</i>	47
METADATE CD CAP 30MG	17	<i>methergine tab 0.2mg</i>	261
METADATE CD CAP 40MG	17	<i>methimazole tab 10 mg</i>	276
METADATE CD CAP 50MG	17	<i>methimazole tab 5 mg</i>	276
METADATE CD CAP 60MG	17	<i>methitest tab 10mg</i>	41
<i>metaxalone tab 400 mg</i>	249	<i>methocarbamol inj 1000 mg/10ml</i>	249
<i>metaxalone tab 800 mg</i>	249	<i>methocarbamol tab 500 mg</i>	249
<i>metformin hcl oral soln 500 mg/5ml</i>	76	<i>methocarbamol tab 750 mg</i>	249
<i>metformin hcl tab 1000 mg</i>	76	<i>methohexital sodium for inj 500 mg</i>	200
<i>metformin hcl tab 500 mg</i>	76	<i>methotrexate sodium for inj 1 gm</i>	103
<i>metformin hcl tab 625 mg</i>	76	<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	103
<i>metformin hcl tab 850 mg</i>	76	<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	103
<i>metformin hcl tab er 24hr 500 mg</i>	76	<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	103
<i>metformin hcl tab er 24hr 750 mg</i>	76	<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	103
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	76	<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	103
<i>metformin hcl tab er 24hr modified release 500 mg</i>	76	<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	103
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	76	<i>methoxsalen rapid cap 10 mg</i>	164
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	76	<i>methscopolamine bromide tab 2.5 mg</i> ...	281
METHADO/NACL INJ 10MG/ML	35	<i>methscopolamine bromide tab 5 mg</i>	281
METHADO/NACL INJ 1MG/ML	35	<i>methsuximide cap 300 mg</i>	67
METHADO/NACL INJ 5MG/5ML	35	METHY-BUPIVA SUS 8-5MG/ML	155
<i>methadone con 10mg/ml</i>	35	METHYL-BUPIV SUS 40-5MG	155
<i>methadone hcl conc 10 mg/ml</i>	35	<i>methylergonovine maleate inj 0.2 mg/ml</i>	261
<i>methadone hcl inj 10 mg/ml</i>	35	<i>methylergonovine maleate tab 0.2 mg</i> ...	261
<i>methadone hcl soln 10 mg/5ml</i>	35		

METHYLIN SOL 10MG/5ML.....	17	<i>methylphenidate hcl tab er 24hr 36 mg</i>	18
METHYLIN SOL 5MG/5ML	17	<i>methylphenidate hcl tab er 24hr 54 mg</i>	18
<i>methylphenidate hcl cap er 10 mg (cd)</i>	17	<i>methylphenidate hcl tab er osmotic release</i>	
<i>methylphenidate hcl cap er 20 mg (cd)</i>	17	<i>(osm) 18 mg</i>	18
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>		<i>methylphenidate hcl tab er osmotic release</i>	
<i>.....</i>	17	<i>(osm) 27 mg.....</i>	18
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>		<i>methylphenidate hcl tab er osmotic release</i>	
<i>.....</i>	17	<i>(osm) 36 mg</i>	18
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>		<i>methylphenidate hcl tab er osmotic release</i>	
<i>.....</i>	17	<i>(osm) 54 mg</i>	18
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>		<i>methylphenidate hcl tab er osmotic release</i>	
<i>.....</i>	17	<i>(osm) 72 mg.....</i>	18
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>		<i>methylphenidate td patch 10 mg/9hr</i>	18
<i>.....</i>	17	<i>methylphenidate td patch 15 mg/9hr</i>	18
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>		<i>methylphenidate td patch 20 mg/9hr</i>	18
<i>.....</i>	18	<i>methylphenidate td patch 30 mg/9hr</i>	18
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>		METHYLPR ACE INJ 40MG/ML	155
<i>.....</i>	18	METHYLPR ACE INJ 80MG/ML	155
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>		METHYLPREDNI INJ 80MG/ML.....	155
<i>.....</i>	18	METHYLPREDNI SUS 50MG/ML.....	155
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>		<i>methylprednisolone acetate inj susp 40</i>	
<i>.....</i>	18	<i>mg/ml</i>	155
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>		<i>methylprednisolone acetate inj susp 80</i>	
<i>.....</i>	18	<i>mg/ml</i>	155
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>		<i>methylprednisolone sod succ for inj 1000</i>	
<i>.....</i>	18	<i>mg (base equiv)</i>	155
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>		<i>methylprednisolone sod succ for inj 125 mg</i>	
<i>.....</i>	18	<i>(base equiv)</i>	155
<i>methylphenidate hcl cap er 30 mg (cd)</i>	18	<i>methylprednisolone sod succ for inj 40 mg</i>	
<i>methylphenidate hcl cap er 40 mg (cd)</i>	18	<i>(base equiv)</i>	155
<i>methylphenidate hcl cap er 50 mg (cd)</i>	18	<i>methylprednisolone sod succ for inj 500 mg</i>	
<i>methylphenidate hcl cap er 60 mg (cd)</i>	18	<i>(base equiv)</i>	155
<i>methylphenidate hcl chew tab 10 mg.....</i>	18	<i>methylprednisolone tab 16 mg</i>	155
<i>methylphenidate hcl chew tab 2.5 mg</i>	18	<i>methylprednisolone tab 32 mg</i>	155
<i>methylphenidate hcl chew tab 5 mg</i>	18	<i>methylprednisolone tab 4 mg</i>	155
<i>methylphenidate hcl soln 10 mg/5ml</i>	18	<i>methylprednisolone tab 8 mg</i>	155
<i>methylphenidate hcl soln 5 mg/5ml</i>	18	<i>methylprednisolone tab therapy pack 4 mg</i>	
<i>methylphenidate hcl tab 10 mg</i>	18	<i>(21).....</i>	155
<i>methylphenidate hcl tab 20 mg.....</i>	18	<i>methyltestosterone cap 10 mg</i>	41
<i>methylphenidate hcl tab 5 mg</i>	18	<i>metoclopramide hcl inj 5 mg/ml (base</i>	
<i>methylphenidate hcl tab er 10 mg.....</i>	18	<i>equivalent)</i>	196
<i>methylphenidate hcl tab er 20 mg</i>	18	<i>metoclopramide hcl orally disintegrating</i>	
<i>methylphenidate hcl tab er 24hr 18 mg</i>	18	<i>tab 5 mg (base eq)</i>	196
<i>methylphenidate hcl tab er 24hr 27 mg</i>	18		

<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	196	<i>mexiletine hcl cap 200 mg</i>	51
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	196	<i>mexiletine hcl cap 250 mg</i>	51
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	196	MG SO4/D5W INJ 10MG/ML.....	236
<i>metolazone tab 10 mg</i>	184	MIACALCIN INJ 200/ML.....	184
<i>metolazone tab 2.5 mg</i>	184	MIACALCIN INJ 400/2ML	184
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<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	96	MICAFUNGIN INJ 100MG.....	84
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	97	MICAFUNGIN INJ 50MG	84
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	96	<i>micafungin sodium for iv soln 100 mg</i>	84
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	135	<i>micafungin sodium for iv soln 50 mg</i>	84
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	135	MICARDIS HCT TAB 40/12.5	97
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	135	MICARDIS HCT TAB 80/12.5	97
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	135	MICARDIS HCT TAB 80-25MG.....	97
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	135	MICARDIS TAB 20MG.....	93
<i>metoprolol tartrate tab 100 mg</i>	135	MICARDIS TAB 40MG.....	93
<i>metoprolol tartrate tab 25 mg</i>	135	MICARDIS TAB 80MG.....	93
<i>metoprolol tartrate tab 37.5 mg</i>	135	<i>miconazole 3 sup 200mg</i>	287
<i>metoprolol tartrate tab 50 mg</i>	135	<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	162
<i>metoprolol tartrate tab 75 mg</i>	135	MICORT-HC CRE 2.5%	169
METROCREAM CRE 0.75%	173	MICRHOGAM PL INJ 50MCG.....	262
METROGEL GEL 1%	173	MICROCYN LIQ.....	175
METROLOTION LOT 0.75%	173	MICRODOT TES	180
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<i>metronidazole cap 375 mg</i>	43	<i>microgestin tab 1/20</i>	149
<i>metronidazole cream 0.75%</i>	173	<i>microgestin tab fe 1/20</i>	149
<i>metronidazole gel 0.75%</i>	173	<i>microgestin tab fe1.5/30</i>	149
<i>metronidazole gel 1%</i>	173	MICROLET MIS LANCETS	226
<i>metronidazole iv soln 500 mg/100ml</i>	43	MICROPLEGIA INJ MSA/MSG.....	141
<i>metronidazole lotion 0.75%</i>	173	MIDAZOL/NACL SOL 5MG/5ML.....	214
<i>metronidazole tab 250 mg</i>	43	<i>midazolam 100 mg/100ml-sodium chloride 0.9% iv soln</i>	214
<i>metronidazole tab 500 mg</i>	43	<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	214
<i>metronidazole vaginal gel 0.75%</i>	287	<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	214
<i>metyrosine cap 250 mg</i>	92	<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	214
<i>mexiletine hcl cap 150 mg</i>	51	<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	214
		<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	214
		<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	214

<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	214
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	214
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	214
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	214
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	214
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	214
MIDAZOLAM INJ 2MG/2ML	214
MIDAZOLAM INJ 5MG/5ML	215
<i>midodrine hcl tab 10 mg</i>	289
<i>midodrine hcl tab 2.5 mg</i>	289
<i>midodrine hcl tab 5 mg</i>	289
MIEBO DRO 1.3GM/ML	260
<i>mifepristone tab 300 mg</i>	76
<i>migergot sup 2/100</i>	232
<i>miglitol tab 100 mg</i>	73
<i>miglitol tab 25 mg</i>	73
<i>miglitol tab 50 mg</i>	73
<i>miglustat cap 100 mg</i>	209
<i>mili tab 0.25/35</i>	149
MILLIPRED DP PAK 5MG	155
MILLIPRED TAB 5MG	155
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	140
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	140
<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	140
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	140
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	140
<i>mimvey tab 1-0.5mg</i>	192
MIMYX CRE	172
MINASTRIN 24 CHW FE	149
<i>mineral oil</i>	216
MINILINK RT MIS TRANSMIT	226
MINIVELLE DIS 0.025MG	194
MINIVELLE DIS 0.0375MG	194

MINIVELLE DIS 0.05MG	194
MINIVELLE DIS 0.075MG	194
MINIVELLE DIS 0.1MG	194
MINOCIN CAP 50MG	275
MINOCIN INJ 100MG	275
<i>minocycline hcl cap 100 mg</i>	275
<i>minocycline hcl cap 50 mg</i>	275
<i>minocycline hcl cap 75 mg</i>	275
<i>minocycline hcl cap er 24hr 135 mg (base equivalent)</i>	275
<i>minocycline hcl cap er 24hr 45 mg (base equivalent)</i>	275
<i>minocycline hcl cap er 24hr 90 mg (base equivalent)</i>	275
<i>minocycline hcl tab 100 mg</i>	275
<i>minocycline hcl tab 50 mg</i>	275
<i>minocycline hcl tab 75 mg</i>	275
<i>minocycline hcl tab er 24hr 105 mg</i>	275
<i>minocycline hcl tab er 24hr 115 mg</i>	275
<i>minocycline hcl tab er 24hr 135 mg</i>	275
<i>minocycline hcl tab er 24hr 45 mg</i>	275
<i>minocycline hcl tab er 24hr 55 mg</i>	275
<i>minocycline hcl tab er 24hr 65 mg</i>	275
<i>minocycline hcl tab er 24hr 80 mg</i>	275
<i>minocycline hcl tab er 24hr 90 mg</i>	275
MINOLIRA TAB 105MG	275
MINOLIRA TAB 135MG	275
<i>minoxidil tab 10 mg</i>	98
<i>minoxidil tab 2.5 mg</i>	98
<i>minzoya tab 0.1-20</i>	150
MIOCHOL-E SOL 1:100	255
MIOSTAT INJ 0.01% OP	255
<i>mirabegron tab er 24 hr 25 mg</i>	285
<i>mirabegron tab er 24 hr 50 mg</i>	285
MIRCERA INJ 100MCG	210
MIRCERA INJ 150MCG	210
MIRCERA INJ 200MCG	210
MIRCERA INJ 30MCG	210
MIRCERA INJ 50MCG	210
MIRCERA INJ 75MCG	210
MIRENA IUD SYSTEM	152
MIRO3D FIBER MIS 100MG	175
MIRO3D FIBER MIS 250MG	175
MIRO3D FIBER MIS 500MG	175

MIRO3D FIBER MIS 700MG	175	MM TWIST MIS LANCETS	226
MIRO3D WOUND PAD 10X5X2CM	175	M-M-R II INJ	286
MIRO3D WOUND PAD 2X2X2CM	175	MOBILE LANCE MIS 30G	226
MIRO3D WOUND PAD 3X3X2CM	175	<i>modafinil tab 100 mg</i>	18
MIRO3D WOUND PAD 4X4X2CM	175	<i>modafinil tab 200 mg</i>	18
MIRO3D WOUND PAD 5X5X2CM	175	MODERNA INJ 2024-25	286
MIRO3D WOUND PAD 7X5X2CM	175	<i>moexipril hcl tab 15 mg</i>	91
MIRODRY MIS 10X5CM	175	<i>moexipril hcl tab 7.5 mg</i>	91
MIRODRY MIS 3X3CM	175	<i>molindone hcl tab 10 mg</i>	125
MIRODRY MIS 7X5CM	175	<i>molindone hcl tab 25 mg</i>	125
MIROTRACT MIS 3MMX5CM	175	<i>molindone hcl tab 5 mg</i>	125
MIROTRACT MIS 3MMX9CM	175	<i>mometasone furoate cream 0.1%</i>	169
MIROTRACT MIS 5MMX5CM	176	<i>mometasone furoate nasal susp 50</i>	
MIROTRACT MIS 5MMX9CM	176	<i>mcg/act</i>	251
<i>mirtazapine orally disintegrating tab 15 mg</i>		<i>mometasone furoate oint 0.1%</i>	169
.....	67	<i>mometasone furoate solution 0.1% (lotion)</i>	
<i>mirtazapine orally disintegrating tab 30 mg</i>		.....	169
.....	68	<i>mondoxylene nl cap 100mg</i>	275
<i>mirtazapine orally disintegrating tab 45 mg</i>		<i>mondoxylene nl cap 75mg</i>	275
.....	68	MONJUVI INJ 200MG	105
<i>mirtazapine tab 15 mg</i>	68	MONOLET MIS LANCETS	226
<i>mirtazapine tab 30 mg</i>	68	MONOLET OPD MIS LANCETS	226
<i>mirtazapine tab 45 mg</i>	68	MONOLETTOR MIS LANCETS	226
<i>mirtazapine tab 7.5 mg</i>	68	<i>mono-lynyah tab 0.25-35</i>	150
MIRVASO GEL 0.33%	173	MONOVISC INJ 88MG/4ML	250
<i>misoprostol tab 100 mcg</i>	283	<i>montelukast sodium chew tab 4 mg (base</i>	
<i>misoprostol tab 200 mcg</i>	283	<i>equiv)</i>	52
MITIGARE CAP 0.6MG	202	<i>montelukast sodium chew tab 5 mg (base</i>	
<i>mitigo inj 10mg/ml</i>	35	<i>equiv)</i>	53
<i>mitigo inj 25mg/ml</i>	35	<i>montelukast sodium oral granules packet 4</i>	
<i>mitomycin for iv soln 20 mg</i>	109	<i>mg (base equiv)</i>	53
<i>mitomycin for iv soln 40 mg</i>	109	<i>montelukast sodium tab 10 mg (base equiv)</i>	
<i>mitomycin for iv soln 5 mg</i>	109	.....	53
MITOMYCIN SOL 20MG	109	MORGIDOX KIT 1X50MG	275
MITOSOL KIT 0.2MG	256	MORPHABOND TAB 100MG ER	35
<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i>		MORPHABOND TAB 15MG ER	35
<i>mg/ml)</i>	109	MORPHABOND TAB 30MG ER	35
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2</i>		MORPHABOND TAB 60MG ER	35
<i>mg/ml)</i>	109	MORPHIN/NACL INJ 100/100	35
<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i>		MORPHIN/NACL INJ 1MG/ML	35
<i>mg/ml)</i>	109	MORPHIN/NACL INJ 2MG-0.9%	35
MIUDELLA IUD COPPER	152	MORPHIN/NACL INJ 4MG-0.9%	35
<i>mm aspirin tab low dose</i>	32	MORPHINE SUL INJ 10MG/ML	35
MM PENTIPS MIS 29GX12MM	231	MORPHINE SUL INJ 1MG/ML	35

MORPHINE SUL INJ 250/50ML	36	MOTOFEN TAB 1-0.025	81
MORPHINE SUL INJ 2MG/ML	35	MOTPOLY XR CAP 100MG.....	64
MORPHINE SUL INJ 2MG2/ML	35	MOTPOLY XR CAP 150MG.....	64
MORPHINE SUL INJ 4MG/ML	35	MOTPOLY XR CAP 200MG.....	64
MORPHINE SUL INJ 50MG/ML.....	36	<i>motrin arthr gel pain 1%</i>	161
MORPHINE SUL INJ 8MG/ML	35	MOUNJARO INJ 10MG/0.5	77
MORPHINE SUL INJ NACL.....	36	MOUNJARO INJ 12.5/0.5	77
<i>morphine sulfate beads cap er 24hr 120 mg</i>		MOUNJARO INJ 15MG/0.5	77
.....	36	MOUNJARO INJ 2.5/0.5.....	77
<i>morphine sulfate beads cap er 24hr 30 mg</i>		MOUNJARO INJ 5MG/0.5	77
.....	36	MOUNJARO INJ 7.5/0.5.....	77
<i>morphine sulfate beads cap er 24hr 45 mg</i>		MOVANTIK TAB 12.5MG.....	198
.....	36	MOVANTIK TAB 25MG	198
<i>morphine sulfate beads cap er 24hr 60 mg</i>		MOVIPREP SOL.....	216
.....	36	<i>moxifloxacin hcl 400 mg/250ml in sodium</i>	
<i>morphine sulfate beads cap er 24hr 75 mg</i>		<i>chloride 0.8% inj</i>	195
.....	36	<i>moxifloxacin hcl ophth soln 0.5% (base eq)</i>	
<i>morphine sulfate beads cap er 24hr 90 mg</i>		<i>(2 times daily)</i>	256
.....	36	<i>moxifloxacin hcl ophth soln 0.5% (base</i>	
<i>morphine sulfate cap er 24hr 10 mg</i>	36	<i>equiv)</i>	256
<i>morphine sulfate cap er 24hr 100 mg</i>	36	<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	
<i>morphine sulfate cap er 24hr 20 mg</i>	36	.....	195
<i>morphine sulfate cap er 24hr 30 mg</i>	36	MOXIFLOXACIN INJ 400/250	195
<i>morphine sulfate cap er 24hr 50 mg</i>	36	MOXIFLOXACIN SOL 1MG/ML	256
<i>morphine sulfate cap er 24hr 60 mg</i>	36	MOXIFLOXACIN SOL 5MG/ML	256
<i>morphine sulfate cap er 24hr 80 mg</i>	36	MOZOBIL INJ	212
<i>morphine sulfate inj pf 0.5 mg/ml</i>	36	MRESVIA INJ 50MCG	286
<i>morphine sulfate inj pf 1 mg/ml</i>	36	MS CONTIN TAB 15MG ER	36
<i>morphine sulfate iv soln 10 mg/ml</i>	36	MS CONTIN TAB 30MG ER	36
<i>morphine sulfate iv soln 4 mg/ml</i>	36	MS CONTIN TAB 60MG ER	36
<i>morphine sulfate iv soln 8 mg/ml</i>	36	MUCOTROL WAF	243
<i>morphine sulfate oral soln 10 mg/5ml</i>	36	MUGARD LIQ	243
<i>morphine sulfate oral soln 100 mg/5ml (20</i>		MULPLETA TAB 3MG.....	210
<i>mg/ml)</i>	36	<i>mult electro inj ph 5.5</i>	235
<i>morphine sulfate oral soln 20 mg/5ml</i>	36	<i>mult electro inj ph 7.4</i>	235
<i>morphine sulfate tab 15 mg</i>	36	MULTAQ TAB 400MG.....	52
<i>morphine sulfate tab 30 mg</i>	36	<i>multi vit/fl chw 0.25mg</i>	244
<i>morphine sulfate tab er 100 mg</i>	36	MULTIGEN PLS TAB.....	212
<i>morphine sulfate tab er 15 mg</i>	36	MULTIGEN TAB.....	212
<i>morphine sulfate tab er 200 mg</i>	36	MULTIGEN TAB FOLIC.....	212
<i>morphine sulfate tab er 30 mg</i>	36	<i>multi-vit/fl dro /fe 0.25</i>	244
<i>morphine sulfate tab er 60 mg</i>	36	<i>multivit/fl dro 0.25mg</i>	244
MOTEGRITY TAB 1MG	195	<i>multi-vit/fl dro 0.5mg/ml</i>	244
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<i>mupirocin calcium cream 2%</i>	161
<i>mupirocin oint 2%</i>	161
MUSCUSOLICE CRE 2%	161
<i>mutamycin inj 40mg</i>	109
<i>mutamycin inj 5mg</i>	109
MVASI INJ 100MG.....	104
MVASI INJ 400MG.....	104
<i>my choice tab 1.5mg</i>	152
<i>my way tab 1.5mg</i>	152
MYALEPT INJ 11.3MG	188
MYCAMINE INJ 100MG.....	84
MYCAPSSA CAP 20MG.....	191
<i>mycophenolate mofetil cap 250 mg</i>	240
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	240
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	240
<i>mycophenolate mofetil tab 500 mg</i>	240
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	240
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	240
MYDAYIS CAP 12.5MG	14
MYDAYIS CAP 25MG.....	14
MYDAYIS CAP 37.5MG.....	14
MYDAYIS CAP 50MG	14
MYDRIACYL SOL 1% OP	255
MYFEMBREE TAB.....	192
MYFORTIC TAB 180MG.....	240
MYFORTIC TAB 360MG	240
MYGLUCOHEALT MIS LANC 30G	226
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MYLOTARG INJ 4.5MG	105
MYNATAL CAP	246
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MYOBLOC INJ 10000/2	252
MYOBLOC INJ 2500/0.5	252
MYOBLOC INJ 5000/ML	252
MYRBETRIQ SUS 8MG/ML	285
MYRBETRIQ TAB 25MG	285
MYRBETRIQ TAB 50MG.....	285
MYSOLINE TAB 250MG	64

MYSOLINE TAB 50MG.....	64
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NABI-HB INJ.....	262
<i>nabumetone tab 500 mg</i>	28
<i>nabumetone tab 750 mg</i>	28
<i>nadolol tab 20 mg</i>	135
<i>nadolol tab 40 mg</i>	136
<i>nadolol tab 80 mg</i>	136
NAFCILLIN INJ 2GM/100	265
<i>nafcillin sodium for inj 1 gm</i>	265
<i>nafcillin sodium for inj 2 gm</i>	265
<i>nafcillin sodium for iv soln 10 gm</i>	265
<i>naftifine hcl cream 1%</i>	162
<i>naftifine hcl cream 2%</i>	162
<i>naftifine hcl gel 2%</i>	162
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<i>nalbuphine hcl inj 10 mg/ml</i>	41
<i>nalbuphine hcl inj 20 mg/ml</i>	41
NALMEFENE INJ 1MG/ML.....	82
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<i>naloxone hcl inj 0.4 mg/ml</i>	82
<i>naloxone hcl inj 4 mg/10ml</i>	82
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	82
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	82
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	82
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	82
<i>naltrexone hcl tab 50 mg</i>	82
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<i>naproxen sodium tab 275 mg</i>	28
<i>naproxen sodium tab 550 mg</i>	28
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	28

<i>naproxen sodium tab er 24hr 500 mg (base equiv).....</i>	28
<i>naproxen susp 125 mg/5ml.....</i>	28
<i>naproxen tab 250 mg.....</i>	28
<i>naproxen tab 375 mg.....</i>	28
<i>naproxen tab 500 mg</i>	28
<i>naproxen tab ec 375 mg.....</i>	28
<i>naproxen tab ec 500 mg</i>	28
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	28
<i>naproxen-esomeprazole magnesium tab dr 500-20 mg.....</i>	29
<i>naratriptan hcl tab 1 mg (base equiv).....</i>	232
<i>naratriptan hcl tab 2.5 mg (base equiv)..</i>	232
NARCAN SPR 4MG	82
NARDIL TAB 15MG.....	68
NAROPIN INJ 10MG/ML	218
NAROPIN INJ 2MG/ML	218
NAROPIN INJ 5MG/ML	218
NAROPIN INJ 7.5MG/ML.....	218
NASCOBAL SPR 500MCG	209
NATACHEW CHW	246
NATACYN SUS 5% OP	256
NATALVIT TAB 75-1MG.....	246
NATAZIA TAB.....	150
<i>nateglinide tab 120 mg.....</i>	80
<i>nateglinide tab 60 mg.....</i>	80
NATESTO GEL 5.5MG.....	41
NATROBA SUS 0.9%	173
NATURAL COND MIS + LUBE.....	220
NATURE THROI TAB 162.5MG.....	278
NATURE-THROI TAB 113.75MG.....	278
NATURE-THROI TAB 130MG	278
NATURE-THROI TAB 146.25MG.....	278
NATURE-THROI TAB 16.25MG	278
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NATURE-THROI TAB 81.25MG	278
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<i>nebivolol hcl tab 10 mg (base equivalent)</i>	135
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	135
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	135
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	135
NEBUPENT INH 300MG	43
<i>nebusal neb 3%</i>	157
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<i>necon tab 0.5/35</i>	150
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<i>nefazodone hcl tab 100 mg</i>	70
<i>nefazodone hcl tab 150 mg</i>	70
<i>nefazodone hcl tab 200 mg</i>	70
<i>nefazodone hcl tab 250 mg.....</i>	70
<i>nefazodone hcl tab 50 mg.....</i>	70
<i>nelarabine iv soln 5 mg/ml</i>	103
NEOKE MCT70 POW.....	253
<i>neomycin sulfate tab 500 mg</i>	20
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....</i>	256
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	256
<i>neomycin-polymyxin b gu irrigation soln</i>	201
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	258
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%.....</i>	258
<i>neomycin-polymyxin-hc ophth susp</i>	258
<i>neomycin-polymyxin-hc otic soln 1%</i>	260
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....</i>	260
NEONATAL TAB COMPLETE	246
<i>neo-polycin oin hc 1%op.....</i>	258
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NEORAL CAP 100MG.....	240
NEORAL CAP 25MG.....	240
NEORAL SOL 100MG/ML.....	240
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NEOSTIG METH INJ 10/10ML	99

NEOSTIG METH INJ 5MG/10ML	99	nevirapine tab er 24hr 400 mg	129
neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)	99	new day tab 1.5mg	152
neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)	99	NEXAVAR TAB 200MG	113
NEO-SYNALAR CRE	161	NEXAVIR INJ	241
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NERLYNX TAB 40MG	113	NEXICLON XR TAB 0.17MG	93
NESACAINE INJ 1%	218	NEXIUM CAP 20MG	282
NESACAINE INJ 2%	218	NEXIUM CAP 40MG	283
NESACAINE INJ -MPF 2%	218	NEXIUM GRA 10MG DR	283
NESACAINE INJ -MPF 3%	218	NEXIUM GRA 2.5MG DR	283
NESINA TAB 12.5MG	77	NEXIUM GRA 20MG DR	283
NESINA TAB 25MG	77	NEXIUM GRA 40MG DR	283
NESINA TAB 6.25MG	77	NEXIUM GRA 5MG DR	283
NESTABS DHA PAK	246	NEXLETOL TAB 180MG	87
NESTABS ONE CAP	246	NEXLIZET TAB 180/10MG	87
NESTABS TAB	246	NEXPLANON IMP 68MG	152
neuac gel 1.2-5%	160	NEXTERONE INJ	52
NEULASTA INJ 6MG/0.6M	210	NEXTSTELLIS TAB 3-14.2MG	150
NEULASTA KIT 6MG/0.6M	210	NEXVIAZYME INJ 100MG	189
NEUPOGEN INJ 300/0.5	210	NGENLA INJ 24/1.2ML	186
NEUPOGEN INJ 300/ML	210	NGENLA INJ 60/1.2ML	186
NEUPOGEN INJ 300MCG	211	niacin tab er 1000 mg (antihyperlipidemic)	90
NEUPOGEN INJ 480/0.8	211	niacin tab er 500 mg (antihyperlipidemic)	90
NEUPOGEN INJ 480/1.6	211	niacin tab er 750 mg (antihyperlipidemic) 90	
NEUPOGEN INJ 480MCG	211	niacor tab 500mg	90
NEUPRO DIS 1MG/24HR	119	nicardipine hcl cap 20 mg	138
NEUPRO DIS 2MG/24HR	119	nicardipine hcl cap 30 mg	138
NEUPRO DIS 3MG/24HR	119	nicardipine hcl iv soln 2.5 mg/ml	138
NEUPRO DIS 4MG/24HR	119	NICARDIPINE INJ 25/10ML	138
NEUPRO DIS 6MG/24HR	119	nicotine dis 7mg/24hr	272
NEUPRO DIS 8MG/24HR	119	nicotine dis step 1	272
NEURONTIN CAP 100MG	64	nicotine gum 2mg	272
NEURONTIN CAP 300MG	64	nicotine gum 4mg	272
NEURONTIN CAP 400MG	64	nicotine loz 4mg mint	272
NEURONTIN SOL 250/5ML	64	nicotine loz mini 2mg	272
NEURONTIN TAB 600MG	64	nicotine pol loz 2mg mini	272
NEURONTIN TAB 800MG	64	nicotine polacrilex gum 2 mg	272
NEUTEK 2TEK TES STRIPS	180	nicotine polacrilex gum 4 mg	272
NEUTRASAL POW	243	nicotine polacrilex lozenge 2 mg	272
NEVANAC SUS 0.1%	260	nicotine polacrilex lozenge 4 mg	272
nevirapine susp 50 mg/5ml	129	nicotine td dis 14mg/24h	272
nevirapine tab 200 mg	129	nicotine td dis 21mg/24h	272

<i>nicotine td dis 7mg/24hr</i>	272	NITRO-BID OIN 2%.....	48
<i>nicotine td dis step 1</i>	272	NITRO-DUR DIS 0.1MG/HR	48
<i>nicotine td dis step 3</i>	272	NITRO-DUR DIS 0.2MG/HR	48
<i>nicotine td patch 24hr 14 mg/24hr</i>	272	NITRO-DUR DIS 0.3MG/HR	48
<i>nicotine td patch 24hr 21 mg/24hr</i>	272	NITRO-DUR DIS 0.4MG/HR	48
NICOTROL INH	272	NITRO-DUR DIS 0.6MG/HR	48
NICOTROL NS SPR 10MG/ML	272	NITRO-DUR DIS 0.8MG/HR	48
<i>nifedipine cap 10 mg</i>	138	<i>nitrofurantoin macrocrystalline cap 100 mg</i>	47
<i>nifedipine cap 20 mg</i>	138	<i>nitrofurantoin macrocrystalline cap 25 mg</i>	47
<i>nifedipine tab er 24hr 30 mg</i>	138	<i>nitrofurantoin macrocrystalline cap 50 mg</i>	47
<i>nifedipine tab er 24hr 60 mg</i>	138	<i>nitrofurantoin monohydrate</i> <i>macrocrystalline cap 100 mg</i>	47
<i>nifedipine tab er 24hr 90 mg</i>	138	<i>nitrofurantoin susp 25 mg/5ml</i>	47
<i>nifedipine tab er 24hr osmotic release 30</i> <i>mg</i>	138	NITROGLYCER INJ 5MG/ML	48
<i>nifedipine tab er 24hr osmotic release 60</i> <i>mg</i>	138	<i>nitroglycerin iv soln 100 mcg/ml in d5w</i> ..	48
<i>nifedipine tab er 24hr osmotic release 90</i> <i>mg</i>	139	<i>nitroglycerin iv soln 200 mcg/ml in d5w</i> ..	48
<i>nikki tab 3-0.02mg</i>	150	<i>nitroglycerin iv soln 400 mcg/ml in d5w</i> ..	48
NIKTIMVO INJ 22/0.44	239	<i>nitroglycerin oint 0.4%</i>	43
NIKTIMVO INJ 9/0.18ML.....	239	<i>nitroglycerin sl tab 0.3 mg</i>	48
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<i>nilutamide tab 150 mg</i>	108	<i>nitroglycerin sl tab 0.6 mg</i>	48
<i>nimodipine cap 30 mg</i>	139	<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	48
<i>nimodipine oral soln 60 mg/20ml (3 mg/ml)</i>	139	<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	48
NINLARO CAP 2.3MG	113	<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	48
NINLARO CAP 3MG	113	<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	48
NINLARO CAP 4MG	113	<i>nitroglycerin tl soln 0.4 mg/spray (400</i> <i>mcg/spray)</i>	48
NIPENT INJ 10MG	115	NITROLINGUAL SPR 400MCG	48
NIPRIDE RTU INJ 20/100ML.....	98	<i>nitroprusside sodium iv soln 25 mg/ml</i>	98
NIPRIDE RTU INJ 50/100ML.....	98	NITROSTAT SUB 0.3MG	48
<i>nisoldipine tab er 24hr 17 mg</i>	139	NITROSTAT SUB 0.4MG	48
<i>nisoldipine tab er 24hr 20 mg</i>	139	NITROSTAT SUB 0.6MG	48
<i>nisoldipine tab er 24hr 25.5 mg</i>	139	NITYR TAB 10MG	189
<i>nisoldipine tab er 24hr 30 mg</i>	139	NITYR TAB 2MG.....	189
<i>nisoldipine tab er 24hr 34 mg</i>	139	NITYR TAB 5MG.....	189
<i>nisoldipine tab er 24hr 40 mg</i>	139	NIVESTYM INJ 300/0.5	211
<i>nisoldipine tab er 24hr 8.5 mg</i>	139	NIVESTYM INJ 300MCG	211
<i>nitazoxanide tab 500 mg</i>	44	NIVESTYM INJ 480/0.8	211
<i>nitisinone cap 10 mg</i>	189	NIVESTYM INJ 480MCG	211
<i>nitisinone cap 2 mg</i>	189	<i>nizatidine cap 150 mg</i>	282
<i>nitisinone cap 20 mg</i>	189	<i>nizatidine cap 300 mg</i>	282
<i>nitisinone cap 5 mg</i>	189		

NO CODING TES BLD GLUC	180	<i>norlyroc tab 0.35mg</i>	153
NOC DURNA SUB 27.7MCG.....	190	NORMLGEL AG GEL	176
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<i>nolix lot 0.05%</i>	169	NORMOSOL-R SOL /5% DSW.....	235
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<i>150-35 mcg/24hr</i>	151	NORTHERA CAP 100MG	288
NOREPIN/D5W INJ 16/250ML.....	289	NORTHERA CAP 200MG.....	288
<i>norepinephrine bitartrate iv soln 1 mg/ml</i>		NORTHERA CAP 300MG.....	288
<i>(base equivalent)</i>	289	<i>nortrel tab 0.5/35</i>	150
<i>norethindrone ace & ethinyl estradiol tab 1</i>		<i>nortrel tab 1/35</i>	150
<i>mg-20 mcg</i>	150	<i>nortrel tab 7/7/7</i>	150
<i>norethindrone ace & ethinyl estradiol tab 1.5</i>		<i>nortriptyline hcl cap 10 mg</i>	73
<i>mg-30 mcg</i>	150	<i>nortriptyline hcl cap 25 mg</i>	73
<i>norethindrone ace & ethinyl estradiol-fe tab</i>		<i>nortriptyline hcl cap 50 mg</i>	73
<i>1 mg-20 mcg</i>	150	<i>nortriptyline hcl cap 75 mg</i>	73
<i>norethindrone ace & ethinyl estradiol-fe tab</i>		<i>nortriptyline hcl soln 10 mg/5ml</i>	73
<i>1.5 mg-30 mcg</i>	150	NORVASC TAB 10MG	139
<i>norethindrone ace-eth estradiol-fe chew</i>		NORVASC TAB 2.5MG	139
<i>tab 1 mg-20 mcg (24)</i>	150	NORVASC TAB 5MG	139
<i>norethindrone ace-ethinyl estradiol-fe cap 1</i>		NORVIR POW 100MG	129
<i>mg-20 mcg (24)</i>	150	NORVIR SOL 80MG/ML	129
<i>norethindrone acetate tab 5 mg</i>	265	NORVIR TAB 100MG	130
<i>norethindrone acetate-ethinyl estradiol tab</i>		NOURIANZ TAB 20MG.....	118
<i>0.5 mg-2.5 mcg</i>	192	NOURIANZ TAB 40MG.....	118
<i>norethindrone acetate-ethinyl estradiol tab</i>		NOVA MAX TES GLUCOSE.....	180
<i>1 mg-5 mcg</i>	192	NOVA SAFETY MIS LANC 23G	226
<i>norethindrone tab 0.35 mg</i>	153	NOVA SAFETY MIS LANC 28G	226
<i>norgesic tab</i>	250	NOVA SURE MIS LANCETS	226
<i>norgesic tab forte</i>	250	NOVAREL INJ 5000UNIT	185
<i>norgestimate & ethinyl estradiol tab 0.25</i>		NOVAVAX INJ 2024-25	286
<i>mg-35 mcg</i>	150	NOVOEIGHT INJ 1000UNIT	205
<i>norgestimate-eth estrad tab 0.18-25/0.215-</i>		NOVOEIGHT INJ 1500UNIT	205
<i>25/0.25-25 mg-mcg</i>	150	NOVOEIGHT INJ 2000UNIT	205
<i>norgestimate-eth estrad tab 0.18-35/0.215-</i>		NOVOEIGHT INJ 250UNIT	205
<i>35/0.25-35 mg-mcg</i>	150	NOVOEIGHT INJ 3000UNIT	205
NORITATE CRE 1%	173	NOVOEIGHT INJ 500UNIT	205
NORLIQVA SOL 1MG/ML	139	NOVOLIN INJ 70/30	79

NOVOLIN INJ 70/30 FP.....	79	NUDROXIPAK KIT N-500	29
NOVOLIN N INJ 100 UNIT	79	NUDEXTA CAP 20-10MG	270
NOVOLIN N INJ U-100.....	79	<i>nulev tab 0.125mg</i>	281
NOVOLIN R INJ 100 UNIT.....	79	NULOJIX INJ 250MG	240
NOVOLIN R INJ U-100	79	NUMOISYN LIQ	243
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NOVOLOG INJ PENFILL	79	NUPLAZID TAB 10MG	121
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NP THYROID TAB 15MG.....	278	NUVIGIL TAB 50MG	18
NP THYROID TAB 30MG.....	278	NUWIQ INJ 1000UNIT	205
NP THYROID TAB 60MG.....	278	NUWIQ INJ 1500UNIT	205
NP THYROID TAB 90MG.....	278	NUWIQ INJ 2000UNIT	205
NPLATE INJ 125MCG.....	211	NUWIQ INJ 2500UNIT	205
NPLATE INJ 250MCG.....	211	NUWIQ INJ 250UNIT	205
NPLATE INJ 500MCG.....	211	NUWIQ INJ 3000UNIT	205
NUBEQA TAB 300MG.....	108	NUWIQ INJ 4000UNIT	205
NUCALA INJ 100MG	52	NUWIQ INJ 500UNIT	205
NUCALA INJ 100MG/ML.....	52	NUWIQ KIT 1000UNIT	205
NUCALA INJ 40MG/0.4	52	NUWIQ KIT 1500UNIT	205
NUCYNTA ER TAB 100MG	36	NUWIQ KIT 2000UNIT	205
NUCYNTA ER TAB 150MG	36	NUWIQ KIT 2500UNIT	205
NUCYNTA ER TAB 200MG	36	NUWIQ KIT 250UNIT	205
NUCYNTA ER TAB 250MG.....	36	NUWIQ KIT 3000UNIT	205
NUCYNTA ER TAB 50MG.....	36	NUWIQ KIT 4000UNIT	205
NUCYNTA TAB 100MG.....	36	NUWIQ KIT 500UNIT	205
NUCYNTA TAB 50MG.....	36	NUZYRA INJ 100MG.....	274
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NUDROXIPAK KIT DSDR-75	29	<i>nylia tab 1/35</i>	150
NUDROXIPAK KIT E-400.....	29	<i>nylia tab 7/7/7</i>	150
NUDROXIPAK KIT I-800.....	29	NYMALIZE SOL	139
NUDROXIPAK KIT M-15.....	29	<i>nystatin cream 100000 unit/gm</i>	162

<i>nystatin oint 100000 unit/gm</i>	162
<i>nystatin susp 100000 unit/ml</i>	243
<i>nystatin tab 500000 unit</i>	85
<i>nystatin topical powder 100000 unit/gm</i>	162
<i>nystatin-triamcinolone cream 100000-0.1</i> <i>unit/gm-%</i>	162
<i>nystatin-triamcinolone oint 100000-0.1</i> <i>unit/gm-%</i>	162
<i>nystop pow 100000</i>	162
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○	
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<i>perindopril erbumine tab 4 mg</i>	91	<i>phenobarbital tab 97.2 mg</i>	213
<i>perindopril erbumine tab 8 mg</i>	91	<i>phenoxybenzamine hcl cap 10 mg</i>	92
<i>periogard sol 0.12%</i>	243	<i>phentermine hcl cap 15 mg</i>	15
PERJETA INJ 420/14ML.....	104	<i>phentermine hcl cap 30 mg</i>	15
<i>permethrin cream 5%</i>	173	<i>phentermine hcl cap 37.5 mg</i>	15
<i>perphenazine tab 16 mg</i>	126	<i>phentermine hcl tab 37.5 mg</i>	15
<i>perphenazine tab 2 mg</i>	126	<i>phentermine hcl-topiramate cap er 24hr</i>	
<i>perphenazine tab 4 mg</i>	126	<i>11.25-69 mg</i>	15
<i>perphenazine tab 8 mg</i>	126	<i>phentermine hcl-topiramate cap er 24hr 15-</i>	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	267	<i>92 mg</i>	15
<i>perphenazine-amitriptyline tab 2-25 mg</i>	267		

<i>phentermine hcl-topiramate cap er 24hr</i>		
3.75-23 mg	15	
<i>phentermine hcl-topiramate cap er 24hr</i>		
7.5-46 mg	15	
<i>phentolamine mesylate for inj 5 mg</i>	92	
PHENYL/NACL INJ 80/250ML	289	
PHENYLEP HCL INJ 0.8/10ML	289	
PHENYLEP HCL INJ 1MG/10ML	289	
PHENYLEPHRIN INJ 0.4/10ML	289	
PHENYLEPHRIN INJ 0.8MG/10.....	289	
PHENYLEPHRIN INJ 10MG/ML.....	289	
PHENYLEPHRIN INJ 1MG/10ML	289	
<i>phenylephrine hcl iv soln 10 mg/ml</i>	289	
<i>phenylephrine hcl ophth soln 10%</i>	255	
<i>phenylephrine hcl ophth soln 2.5%</i>	255	
<i>phenytek cap 200mg</i>	67	
<i>phenytek cap 300mg</i>	67	
<i>phenytoin chew tab 50 mg</i>	67	
<i>phenytoin sodium extended cap 100 mg</i>	67	
<i>phenytoin sodium extended cap 200 mg</i>	67	
<i>phenytoin sodium extended cap 300 mg</i>	67	
<i>phenytoin sodium inj 50 mg/ml</i>	67	
<i>phenytoin susp 125 mg/5ml</i>	67	
PHESGO SOL	110	
PHEXXI GEL.....	287	
<i>philith tab 0.4-35</i>	150	
PHLAG SPR	172	
<i>phospha 250 tab neutral</i>	236	
PHOSPHOLINE SOL 0.125%OP.....	255	
<i>phospho-trin tab 250 neut</i>	236	
<i>phospho-trin tab k500</i>	236	
PHOTOFRIN INJ 75MG.....	115	
PHOTREXA VIS SOL 0.146-20	257	
PHOTREXA/PHO SOL VISC KIT	257	
<i>physiolyte sol</i>	241	
<i>physiosol sol irrigat</i>	241	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	289	
<i>phytonadione inj 10 mg/ml</i>	289	
<i>phytonadione tab 5 mg</i>	289	
PIASKY INJ 340/2ML	207	
PIFELTRO TAB 100MG.....	130	
<i>pilocarpine hcl ophth soln 1%</i>	255	
<i>pilocarpine hcl ophth soln 2%</i>	255	
<i>pilocarpine hcl ophth soln 4%</i>	255	
<i>pilocarpine hcl tab 5 mg</i>	243	
<i>pilocarpine hcl tab 7.5 mg</i>	243	
<i>pimecrolimus cream 1%</i>	170	
<i>pimozide tab 1 mg</i>	270	
<i>pimozide tab 2 mg</i>	270	
<i>pimtrea tab</i>	150	
<i>pindolol tab 10 mg</i>	136	
<i>pindolol tab 5 mg</i>	136	
<i>pioglitazone hcl tab 15 mg (base equiv)</i> ...	80	
<i>pioglitazone hcl tab 30 mg (base equiv)</i> ...	80	
<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...	80	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	75	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	75	
<i>pioglitazone hcl-metformin hcl tab 15-500</i> <i>mg</i>	75	
<i>pioglitazone hcl-metformin hcl tab 15-850</i> <i>mg</i>	75	
PIP LANCETS MIS 28G	226	
PIP LANCETS MIS 30G	226	
<i>piperacillin sod-tazobactam na for inj 3.375</i> <i>gm (3-0.375 gm)</i>	264	
<i>piperacillin sod-tazobactam sod for inj 13.5</i> <i>gm (12-1.5 gm)</i>	265	
<i>piperacillin sod-tazobactam sod for inj 2.25</i> <i>gm (2-0.25 gm)</i>	265	
<i>piperacillin sod-tazobactam sod for inj 4.5</i> <i>gm (4-0.5 gm)</i>	265	
<i>piperacillin sod-tazobactam sod for inj 40.5</i> <i>gm (36-4.5 gm)</i>	265	
PIQRAY 200MG TAB DOSE.....	113	
PIQRAY 250MG TAB DOSE.....	113	
PIQRAY 300MG TAB DOSE.....	113	
<i>pirfenidone cap 267 mg</i>	273	
<i>pirfenidone tab 267 mg</i>	273	
<i>pirfenidone tab 801 mg</i>	274	
<i>piroxicam cap 10 mg</i>	29	
<i>piroxicam cap 20 mg</i>	29	
<i>pitavastatin calcium tab 1 mg</i>	89	
<i>pitavastatin calcium tab 2 mg</i>	89	
<i>pitavastatin calcium tab 4 mg</i>	89	
PITOCIN INJ 10UNT/ML	261	
PLAQUENIL TAB 200MG.....	99	
PLASMA-LYTE INJ 148	235	
PLASMA-LYTE INJ -A	235	

PLAVIX TAB 75MG	208	POMALYST CAP 3MG.....	108
PLEGISOL SOL	141	POMALYST CAP 4MG.....	108
PLEGRIDY INJ	269	PONVORY TAB 20MG.....	269
PLEGRIDY INJ PEN	269	PONVORY TAB STARTER.....	269
PLEGRIDY INJ STARTER	269	<i>portia-28 tab</i>	150
PLEGRIDY PEN INJ STARTER.....	269	PORTRAZZA INJ 800/50ML	107
<i>plenamine inj 15%</i>	253	<i>posaconazole iv soln 300 mg/16.7ml (18</i>	
PLENITY CAP	15	<i>mg/ml)</i>	85
PLENVU SOL	216	<i>posaconazole susp 40 mg/ml</i>	85
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20</i>		<i>posaconazole tab delayed release 100 mg</i>	
<i>mg/ml)</i>	212	.....	85
PLIAGLIS CRE 7-7%.....	171	POSFREA INJ 0.25/5ML	83
PNEUMOVAX 23 INJ 25/0.5	285	POSIMIR SOL 660/5ML	218
PNV FOLIC AC TAB + IRON	246	<i>pot & sod citrates w/ cit ac soln 550-500-</i>	
PNV PRENATAL TAB PLUS.....	246	<i>334 mg/5ml</i>	200
PNV TABS TAB 29-1MG.....	246	POT CHL/NACL INJ 20MEQ/L	235
<i>pnv-dha cap</i>	246	POT CHL/NACL INJ 40MEQ/L.....	235
PNV-DHA CAP DOCUSATE	246	POT CHLORIDE INJ 10MEQ	237
PNV-OMEGA CAP	246	POT CHLORIDE INJ 20MEQ.....	237
<i>pnv-select tab</i>	246	POT CHLORIDE INJ 40MEQ	237
POCKETCHEM TES EZ.....	180	<i>pot phos monobasic w/sod phos di &</i>	
<i>podofilox gel 0.5%</i>	171	<i>monobas tab 155-852-130mg</i>	236
<i>podofilox soln 0.5%</i>	171	<i>potassium acetate inj 2 meq/ml</i>	237
POLIVY INJ 140MG	106	<i>potassium chloride 20 meq/l (0.15%) in</i>	
POLIVY INJ 30MG	106	<i>dextrose 5% inj</i>	235
<i>polocaine inj 1%</i>	218	<i>potassium chloride cap er 10 meq</i>	237
<i>polocaine inj 2%</i>	218	<i>potassium chloride cap er 8 meq</i>	237
<i>polocaine inj -mpf 1%</i>	218	<i>potassium chloride inj 10 meq/100ml</i>	237
<i>polocaine inj mpf 1.5%</i>	218	<i>potassium chloride inj 10 meq/50ml</i>	237
<i>polocaine inj -mpf 2%</i>	218	<i>potassium chloride inj 2 meq/ml</i>	237
<i>polycin oin op</i>	256	<i>potassium chloride inj 20 meq/100ml</i>	237
<i>polymyxin b sulfate for inj 500000 unit....</i>	47	<i>potassium chloride inj 20 meq/50ml</i>	237
<i>polymyxin b-trimethoprim ophth soln</i>		<i>potassium chloride inj 40 meq/100ml</i>	237
<i>10000 unit/ml-0.1%</i>	256	<i>potassium chloride microencapsulated crys</i>	
POLY-VI-FLOR CHW 0.25MG	245	<i>er tab 10 meq</i>	237
POLY-VI-FLOR CHW 0.5MG.....	245	<i>potassium chloride microencapsulated crys</i>	
POLY-VI-FLOR CHW 1MG.....	245	<i>er tab 15 meq</i>	237
POLY-VI-FLOR CHW W/IRON.....	244	<i>potassium chloride microencapsulated crys</i>	
POLY-VI-FLOR MIS FS 0.25	245	<i>er tab 20 meq</i>	237
POLY-VI-FLOR MIS FS 0.5MG.....	245	<i>potassium chloride oral soln 10% (20</i>	
POLY-VI-FLOR SUS /IRON.....	244	<i>meq/15ml)</i>	237
POLY-VI-FLOR SUS 0.25/ML	245	<i>potassium chloride oral soln 20% (40</i>	
POMALYST CAP 1MG	108	<i>meq/15ml)</i>	237
POMALYST CAP 2MG	108		

<i>potassium chloride powder packet 20 meq</i>	
.....	237
<i>potassium chloride tab er 10 meq</i>	237
<i>potassium chloride tab er 15 meq</i>	237
<i>potassium chloride tab er 20 meq (1500 mg)</i>	237
<i>potassium chloride tab er 8 meq (600 mg)</i>	237
.....	237
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	200
<i>potassium citrate tab er 10 meq (1080 mg)</i>	200
.....	200
<i>potassium citrate tab er 15 meq (1620 mg)</i>	200
.....	200
<i>potassium citrate tab er 5 meq (540 mg)</i>	200
.....	200
POTASSIUM INJ 100MEQ	237
POTASSIUM INJ PHOSPHAT	236
<i>potassium iodide oral soln 1 gm/ml</i>	157
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	236
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	236
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	236
POTELIGEO INJ 20MG/5ML	106
POVIDONE IOD SOL 5%	256
PR BENZOYL LIQ 7% WASH	160
PR CREAM KIT	172
PRADAXA CAP 110MG	59
PRADAXA CAP 150MG	59
PRADAXA CAP 75MG	59
PRAKETAMIDE CRE 5%	161
PRALUENT INJ 150MG/ML	90
PRALUENT INJ 75MG/ML	90
<i>pramipexole dihydrochloride tab 0.125 mg</i>	120
.....	120
<i>pramipexole dihydrochloride tab 0.25 mg</i>	120
.....	120
<i>pramipexole dihydrochloride tab 0.5 mg</i>	119
<i>pramipexole dihydrochloride tab 0.75 mg</i>	120
.....	120
<i>pramipexole dihydrochloride tab 1 mg</i>	120
<i>pramipexole dihydrochloride tab 1.5 mg</i>	120

<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	120
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	120
PRAMOSONE CRE 1-1%	169
PRAMOSONE LOT 1%	169
PRAMOSONE LOT 2.5%	169
PRAMOX GEL 1%	171
<i>prasugrel hcl tab 10 mg (base equiv)</i>	208
<i>prasugrel hcl tab 5 mg (base equiv)</i>	208
<i>pravastatin sodium tab 10 mg</i>	89
<i>pravastatin sodium tab 20 mg</i>	89
<i>pravastatin sodium tab 40 mg</i>	89
<i>pravastatin sodium tab 80 mg</i>	89
PRAXBIND INJ 2.5/50	82
<i>praziquantel tab 600 mg</i>	43
<i>prazosin hcl cap 1 mg</i>	93
<i>prazosin hcl cap 2 mg</i>	94
<i>prazosin hcl cap 5 mg</i>	94
PRECEDEX INJ 1000/250	215
PRECEDEX INJ 100MCG	215
PRECEDEX INJ 200/50ML	215
PRECEDEX INJ 400/100	215
PRECEDEX INJ 80/20ML	215
PRECISION PT TES OF CARE	180
PRECISION TES PCX	180
PRECISION TES PCX PLUS	180
PRECISION TES QID	180
PRECISION TES SOF-TACT	180
PRECISION TES XTRA	180
PRED FORTE SUS 1% OP	258
PRED MILD SUS 0.12% OP	258
PRED SOD PHO SOL 1% OP	258
<i>prednisolone acetate ophth susp 1%</i>	258

<i>prednisolone sod phos orally disintegr tab</i>		PREMARIN INJ 25MG	194
10 mg (base eq).....	155	PREMARIN TAB 0.3MG.....	194
<i>prednisolone sod phos orally disintegr tab</i>		PREMARIN TAB 0.45MG	194
15 mg (base eq).....	155	PREMARIN TAB 0.625MG	194
<i>prednisolone sod phos orally disintegr tab</i>		PREMARIN TAB 0.9MG	194
30 mg (base eq)	155	PREMARIN TAB 1.25MG	194
<i>prednisolone sod phosphate oral soln 10</i>		PREMARIN VAG CRE 0.625MG	287
mg/5ml (base equiv)	155	PREMASOL SOL 10%	253
<i>prednisolone sod phosphate oral soln 15</i>		PREMESISRX TAB	246
mg/5ml (base equiv)	155	PREMPHASE TAB	192
<i>prednisolone sod phosphate oral soln 20</i>		PREMPRO TAB.....	192
mg/5ml (base equiv)	156	PREMPRO TAB 0.3-1.5.....	192
<i>prednisolone sod phosphate oral soln 5</i>		PREMPRO TAB 0.45-1.5	192
mg/5ml (base equiv)	155	PREMPRO TAB 0.625-5.....	192
<i>prednisolone sodium phosphate oral soln</i>		PRENA 1 TRUE MIS	246
25 mg/5ml (base eq).....	156	PRENA1 CHW	246
<i>prednisolone soln 15 mg/5ml.....</i>	156	PRENA1 PEARL CAP.....	246
PREDNISOLONE SUS 1%.....	258	PRENAISSANCE CAP.....	246
<i>prednisolone tab 5 mg.....</i>	156	PRENAISSANCE CAP PLUS	246
PREDNISON CON 5MG/ML.....	156	PRENATAL 19 CHW 29-1MG.....	246
<i>prednisone oral soln 5 mg/5ml.....</i>	156	<i>prenatal 19 chw tab</i>	247
<i>prednisone tab 1 mg.....</i>	156	PRENATAL 19 TAB 29-1MG.....	247
<i>prednisone tab 10 mg</i>	156	PRENATAL DHA PAK 27-1-250	247
<i>prednisone tab 2.5 mg.....</i>	156	PRENATAL TAB 27-1MG.....	247
<i>prednisone tab 20 mg.....</i>	156	PRENATAL TAB PLUS.....	247
<i>prednisone tab 5 mg.....</i>	156	PRENATAL VIT TAB LOW IRON	247
<i>prednisone tab 50 mg.....</i>	156	PRENATAL+FE TAB 29-1MG.....	247
<i>prednisone tab therapy pack 10 mg (21) .</i>	156	PRENATAL-U CAP 106.5-1	247
<i>prednisone tab therapy pack 10 mg (48) .</i>	156	PRENATE AM TAB 1MG	247
<i>prednisone tab therapy pack 5 mg (21) ..</i>	156	PRENATE CAP ENHANCE	247
<i>prednisone tab therapy pack 5 mg (48) ..</i>	156	PRENATE CAP ESSENT	247
<i>pregabalin cap 100 mg</i>	64	PRENATE CAP PIXIE	247
<i>pregabalin cap 150 mg</i>	64	PRENATE CAP RESTORE	247
<i>pregabalin cap 200 mg.....</i>	64	PRENATE CHW 0.6-0.4	247
<i>pregabalin cap 225 mg</i>	64	PRENATE DHA CAP	247
<i>pregabalin cap 25 mg</i>	64	PRENATE MINI CAP	247
<i>pregabalin cap 300 mg.....</i>	64	PRENATE TAB ELITE	247
<i>pregabalin cap 50 mg</i>	64	PRENATOL-M TAB 27-1.2MG	247
<i>pregabalin cap 75 mg</i>	64	PRENATRIX TAB	247
<i>pregabalin soln 20 mg/ml</i>	64	PREPIDIL GEL 0.5MG/3G.....	261
<i>pregabalin tab er 24hr 165 mg</i>	270	PREPLUS TAB 27-1MG.....	247
<i>pregabalin tab er 24hr 330 mg</i>	270	PRESERA AER	172
<i>pregabalin tab er 24hr 82.5 mg</i>	270	PRESTALIA TAB 14-10MG	97
PREGNYL INJ 10000UNT	185	PRESTALIA TAB 3.5-2.5	97

PRESTALIA TAB 7-5MG	97	PRISMASOL SOL 4/0/1.2	239
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PRETOMANID TAB 200MG	100	PRISMASOL SOL B22GK4/0.....	239
PREVACID CAP 15MG DR	283	PRISTIQ TAB 100MG	71
PREVACID CAP 30MG DR.....	283	PRISTIQ TAB 25MG	71
PREVACID TAB 15MG STB	283	PRISTIQ TAB 50MG.....	71
PREVACID TAB 30MG STB	283	PRO COMFORT MIS 31G.....	226
<i>prevalite pow 4gm</i>	88	PRO COMFORT MIS LANC 30G	226
<i>prevalite pow 4gm pk</i>	88	PRO COMFORT MIS LANCETS.....	226
PREVIDOLRX PAK ANALGESI	29	PROAIR HFA AER.....	55
PREVNAR 20 INJ	285	PROAIR RESPI AER.....	55
PREVYMIS INJ 240/12	131	<i>probenecid tab 500 mg</i>	202
PREVYMIS INJ 480/24	131	PROBUPHINE IMP KIT 74.2.....	41
PREVYMIS PAK 120MG	131	<i>procainamide hcl inj 100 mg/ml</i>	51
PREVYMIS PAK 20MG.....	131	<i>procainamide hcl inj 500 mg/ml</i>	51
PREVYMIS TAB 240MG.....	131	PROCARDIA XL TAB 30MG CR	139
PREVYMIS TAB 480MG.....	131	PROCARDIA XL TAB 60MG CR	139
PREZCOBIX TAB 800-150	130	PROCARDIA XL TAB 90MG CR	139
PREZISTA SUS 100MG/ML	130	<i>procentra sol 5mg/5ml</i>	14
PREZISTA TAB 150MG.....	130	<i>prochlorperazine edisylate inj 10 mg/2ml</i>	126
PREZISTA TAB 600MG.....	130	<i>prochlorperazine maleate tab 10 mg (base</i> <i>equivalent)</i>	126
PREZISTA TAB 75MG.....	130	<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	126
PREZISTA TAB 800MG.....	130	<i>prochlorperazine suppos 25 mg</i>	126
PRIALT INJ 100MCG	31	PROCORT CRE.....	42
PRIALT INJ 25MCG/ML	31	PROCRIT INJ 10000/ML	211
PRIALT INJ 500MCG	31	PROCRIT INJ 2000/ML	211
PRIFTIN TAB 150MG	100	PROCRIT INJ 20000/ML.....	211
PRILOSEC POW 10MG.....	283	PROCRIT INJ 3000/ML	211
PRILOSEC POW 2.5MG	283	PROCRIT INJ 4000/ML	211
PRIMACARE CAP	247	PROCRIT INJ 40000/ML.....	211
<i>primaquine phosphate tab 26.3 mg (15 mg</i> <i>base)</i>	99	<i>proctocort cre 1%</i>	43
PRIMAQUINE TAB 26.3MG	99	PROCTOCORT SUP 30MG	43
PRIMAXIN IV INJ 500MG	44	PROCTOFOAM AER HC 1%.....	42
<i>primidone tab 250 mg</i>	64	<i>procto-med cre hc 2.5%</i>	43
<i>primidone tab 50 mg</i>	64	<i>proctosol hc cre 2.5%</i>	43
PRIMLEV TAB 10-300MG.....	39	<i>proctozone cre -hc 2.5%</i>	43
PRIMLEV TAB 5-300MG	39	PROCYSBI CAP 25MG	201
PRIMLEV TAB 7.5-300	39	PROCYSBI CAP 75MG	201
PRIORIX INJ	286	PRODIGY MIS 26G.....	226
PRISMASOL SOL 0/0/1.2	238	PRODIGY MIS 28G.....	226
PRISMASOL SOL 0/2.5.....	238	PRODIGY NO TES CODING	180
PRISMASOL SOL 2/0.....	239		
PRISMASOL SOL 2/3.5.....	239		

PROFILNINE INJ 1000UNIT	205	<i>propafenone hcl cap er 12hr 325 mg</i>	51
PROFILNINE INJ 1500UNIT	205	<i>propafenone hcl cap er 12hr 425 mg</i>	51
PROFILNINE INJ 500UNIT	205	<i>propafenone hcl tab 150 mg</i>	51
<i>progesterone cap 100 mg</i>	265	<i>propafenone hcl tab 225 mg</i>	51
<i>progesterone cap 200 mg</i>	265	<i>propafenone hcl tab 300 mg</i>	51
<i>progesterone im in oil 50 mg/ml</i>	265	<i>proparacaine hcl ophth soln 0.5%</i>	257
PROGLYCEM SUS 50MG/ML	76	<i>propofol iv emul 1000 mg/100ml (10</i>	
PROGRAF CAP 0.5MG	240	<i>mg/ml)</i>	200
PROGRAF CAP 1MG	240	<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i>	
PROGRAF CAP 5MG	241	<i>.....</i>	200
PROGRAF GRA 0.2MG	241	<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i>	
PROGRAF GRA 1MG	241	<i>.....</i>	200
PROGRAF INJ 5MG/ML	241	<i>propoven inj</i>	200
PROLASTIN-C INJ 1000MG	273	<i>propoven inj 200/20ml</i>	200
PROLENSA DRO 0.07% OP	260	<i>propoven inj 500/50ml</i>	200
PROLEUKIN INJ 22MU	115	<i>propranolol hcl cap er 24hr 120 mg</i>	136
PROLIA INJ 60MG/ML	184	<i>propranolol hcl cap er 24hr 160 mg</i>	136
PROMACTA POW 12.5MG	211	<i>propranolol hcl cap er 24hr 60 mg</i>	136
PROMACTA POW 25MG	211	<i>propranolol hcl cap er 24hr 80 mg</i>	136
PROMACTA TAB 12.5MG	211	<i>propranolol hcl inj 1 mg/ml</i>	136
PROMACTA TAB 25MG	211	<i>propranolol hcl oral soln 20 mg/5ml</i>	136
PROMACTA TAB 50MG	211	<i>propranolol hcl oral soln 40 mg/5ml</i>	136
PROMACTA TAB 75MG	211	<i>propranolol hcl tab 10 mg</i>	136
<i>promethazine & phenylephrine syrup 6.25-</i>		<i>propranolol hcl tab 20 mg</i>	136
<i>5 mg/5ml</i>	157	<i>propranolol hcl tab 40 mg</i>	136
<i>promethazine hcl inj 25 mg/ml</i>	86	<i>propranolol hcl tab 60 mg</i>	136
<i>promethazine hcl inj 50 mg/ml</i>	86	<i>propranolol hcl tab 80 mg</i>	136
<i>promethazine hcl oral soln 6.25 mg/5ml .</i>	86	<i>propylthiouracil tab 50 mg</i>	276
<i>promethazine hcl suppos 12.5 mg</i>	86	PROQUAD INJ	286
<i>promethazine hcl suppos 25 mg</i>	86	PROSCAR TAB 5MG	201
<i>promethazine hcl tab 12.5 mg</i>	86	PROSOL INJ 20%	253
<i>promethazine hcl tab 25 mg</i>	86	PROSTIN VR INJ 500MCG	142
<i>promethazine hcl tab 50 mg</i>	86	<i>protamine sulfate inj 10 mg/ml</i>	208
<i>promethazine w/ codeine syrup 6.25-10</i>		PROTHELIAL PST 10%	243
<i>mg/5ml</i>	157	PROTONIX INJ 40MG	283
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>		PROTONIX PAK 40MG	283
<i>.....</i>	157	PROTONIX TAB 20MG	283
<i>promethegan sup 12.5mg</i>	86	PROTONIX TAB 40MG	283
<i>promethegan sup 25mg</i>	86	PROTOPAM CHL INJ 1GM	82
<i>promethegan sup 50mg</i>	86	<i>protriptyline hcl tab 10 mg</i>	73
PROMETRIUM CAP 100MG	265	<i>protriptyline hcl tab 5 mg</i>	73
PROMETRIUM CAP 200MG	265	PROVAYBLUE INJ	82
PROMISEB CRE	166	PROVENGE INJ	106
<i>propafenone hcl cap er 12hr 225 mg</i>	51	PROVENTIL AER HFA	55

PROVERA TAB 10MG	265
PROVERA TAB 2.5MG	265
PROVERA TAB 5MG.....	265
PROVIDA OB CAP	247
PROVIGIL TAB 100MG.....	19
PROVIGIL TAB 200MG	19
PROVISC INJ 1%.....	259
PROZAC CAP 10MG.....	70
PROZAC CAP 20MG	70
PROZAC CAP 40MG	70
<i>prucalopride succinate tab 1 mg (base</i> <i>equivalent)</i>	195
<i>prucalopride succinate tab 2 mg (base</i> <i>equivalent)</i>	195
PRUCLAIR CRE	172
PRUDOXIN CRE 5%	163
PRUMYX CRE.....	172
<i>pseudoephed-bromphen-dm syrup 30-2-10</i> <i>mg/5ml</i>	157
PSORCON CRE 0.05%	169
PTS PANELS TES GLUCOSE	180
PULMICORT INH 180MCG	54
PULMICORT INH 90MCG.....	54
PULMICORT SUS 0.25MG/2.....	54
PULMICORT SUS 0.5MG/2	54
PULMICORT SUS 1MG/2ML.....	54
<i>pulmosal neb 7%</i>	157
PULMOZYME SOL 1MG/ML.....	273
PURE COMFORT MIS 30G LAN	226
PURIXAN SUS 20MG/ML	103
PX LANCETS MIS 28G	226
PX LANCETS MIS 33G	226
PYLERA CAP	284
<i>pyrazinamide tab 500 mg</i>	100
<i>pyridostigmine bromide oral soln 60</i> <i>mg/5ml</i>	99
<i>pyridostigmine bromide tab 60 mg</i>	99
<i>pyridostigmine bromide tab er 180 mg</i>	99
<i>pyridoxine hcl inj 100 mg/ml</i>	289
PYRIDOXINE INJ 100MG/ML	289
<i>pyrimethamine tab 25 mg</i>	99
PYROGALL ACD OIN	171
PYRUKYND TAB 20MG	208
PYRUKYND TAB 20MGX5MG	208

PYRUKYND TAB 50MG.....	208
PYRUKYND TAB 50MGX20M.....	208
PYRUKYND TAB 5MG	208
PYRUKYND TAB 5MG TP	208
PYZCHIVA INJ 130/26ML.....	197
PYZCHIVA INJ 45/0.5ML	164
PYZCHIVA INJ 90MG/ML	164
Q	
QBRELIS SOL 1MG/ML	91
QBREXZA PAD 2.4%	172
<i>qc aspirin chw 81mg</i>	32
<i>qc child asa chw 81mg</i>	32
<i>qc diclofena gel 1%</i>	161
QC LANCETS MIS 28G.....	226
QC LANCETS MIS 30G.....	227
<i>qc nicotine dis 14mg/24h</i>	272
<i>qc nicotine dis 21mg/24h</i>	272
QELBREE CAP 100MG ER.....	15
QELBREE CAP 150MG ER.....	15
QELBREE CAP 200MG ER	16
QFITLIA INJ 20/0.2ML.....	205
QFITLIA INJ 50/0.5ML.....	206
QINLOCK TAB 50MG	113
QLOSI SOL 0.4%.....	255
QNASL AER 80MCG.....	251
QNASL CHILD SPR 40MCG	251
QSYMIA CAP 11.25-69	15
QSYMIA CAP 15-92MG.....	15
QSYMIA CAP 3.75-23	15
QSYMIA CAP 7.5-46MG	15
QTERN TAB 10-5MG	75
QTERN TAB 5-5MG	75
QUADRACEL INJ 0.5ML	280
QUALAQUIN CAP 324MG	99
<i>quazepam tab 15 mg</i>	215
QUELICIN INJ 20MG/ML.....	251
QUESTRAN POW 4GM	88
QUESTRAN POW 4GM LITE.....	88
<i>quetiapine fumarate tab 100 mg</i>	124
<i>quetiapine fumarate tab 150 mg</i>	124
<i>quetiapine fumarate tab 200 mg</i>	124
<i>quetiapine fumarate tab 25 mg</i>	124
<i>quetiapine fumarate tab 300 mg</i>	124
<i>quetiapine fumarate tab 400 mg</i>	124

<i>quetiapine fumarate tab 50 mg</i>	124
<i>quetiapine fumarate tab er 24hr 150 mg</i>	125
<i>quetiapine fumarate tab er 24hr 200 mg</i>	125
<i>quetiapine fumarate tab er 24hr 300 mg</i>	125
<i>quetiapine fumarate tab er 24hr 400 mg</i>	125
<i>quetiapine fumarate tab er 24hr 50 mg</i>	125
QUFLORA CHW	245
QUFLORA FE CHW	244
QUFLORA PED DRO 0.25MG	245
QUFLORA PED DRO 0.5MG/ML	245
QUICKTEK TES	180
QUILLICHEW CHW 20MG ER	19
QUILLICHEW CHW 30MG ER	19
QUILLICHEW CHW 40MG ER	19
QUILLIVANT SUS 25MG/5ML	19
<i>quinapril hcl tab 10 mg</i>	91
<i>quinapril hcl tab 20 mg</i>	91
<i>quinapril hcl tab 40 mg</i>	91
<i>quinapril hcl tab 5 mg</i>	91
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	97
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	97
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	97
<i>quinidine gluconate tab er 324 mg</i>	51
<i>quinine sulfate cap 324 mg</i>	99
QUINTET AC TES BLD GLUC	180
QUINTET TES BLD GLUC	180
QULIPTA TAB 10MG	231
QULIPTA TAB 30MG	232
QULIPTA TAB 60MG	232
QUTENZA KIT 8% 1-PCH	171
QUTENZA KIT 8% 2-PCH	171
QUTENZA KIT 8% 4-PCH	171
QUVIVIQ TAB 25MG	215
QUVIVIQ TAB 50MG	215
QVAR REDIIHA AER 80MCG	54
QVAR REDIIHAL AER 40MCG	54
R	
<i>ra aspirin chw 81mg</i>	32
<i>ra aspirin tab 81mg ec</i>	32
<i>ra nicotine dis 14mg/24h</i>	272
<i>ra nicotine dis 21mg/24h</i>	272

<i>ra nicotine gum 2mg</i>	272
<i>ra nicotine gum 2mg mint</i>	272
<i>ra nicotine gum 4mg</i>	272
<i>ra nicotine gum 4mg mint</i>	272
<i>ra nicotine loz 2mg mint</i>	272
<i>ra nicotine loz 4mg mint</i>	272
RA TRUETEST TES	180
RABAVERT INJ	286
<i>rabeprazole sodium ec tab 20 mg</i>	283
RADIAPLEXRX GEL	176
RADICAVA INJ 30MG	251
RADICAVA ORS SUS 105/5ML	251
RADICAVA ORS SUS STARTER	251
RADIOGARDASE CAP 0.5GM	82
RAGWITEK SUB	19
RALDESY SOL 10MG/ML	70
<i>raloxifene hcl tab 60 mg</i>	187
<i>ramelteon tab 8 mg</i>	215
<i>ramipril cap 1.25 mg</i>	91
<i>ramipril cap 10 mg</i>	91
<i>ramipril cap 2.5 mg</i>	91
<i>ramipril cap 5 mg</i>	91
<i>ranolazine tab er 12hr 1000 mg</i>	47
<i>ranolazine tab er 12hr 500 mg</i>	47
RAPAFLO CAP 4MG	201
RAPAFLO CAP 8MG	201
RAPIBLYK INJ 280MG	135
RAPIVAB INJ 200MG/20	133
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	120
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	121
RASUVO INJ 10MG	25
RASUVO INJ 12.5MG	25
RASUVO INJ 15MG	26
RASUVO INJ 17.5MG	26
RASUVO INJ 20MG	26
RASUVO INJ 22.5MG	26
RASUVO INJ 25MG	26
RASUVO INJ 30MG	26
RASUVO INJ 7.5MG	25
RAVICTI LIQ 1.1GM/ML	189
RAYALDEE CAP 30MCG	189
RAYOS TAB 1MG	156

RAYOS TAB 2MG.....	156	REDITREX INJ 15/.6ML	26
RAYOS TAB 5MG.....	156	REDITREX INJ 17.5/0.7	26
<i>react tab 1.5mg</i>	152	REDITREX INJ 20/.8ML	26
READYLANCE MIS 21G	227	REDITREX INJ 22.5/0.9	26
READYLANCE MIS 23G	227	REDITREX INJ 25MG/ML	26
READYLANCE MIS 26G	227	REDITREX INJ 7.5/.3ML	26
READYLANCE MIS 28G.....	227	REFUAH PLUS TES BLD GLUC.....	180
READYLANCE MIS 30G.....	227	REGLAN TAB 10MG.....	196
REALITY MIS LANCETS.....	227	REGLAN TAB 5MG	196
REALITY MIS LUBRICAT	220	REGONOL INJ 5MG/ML	99
REALITY TRIG MIS LANCETS	227	REGRANEX GEL 0.01%	176
REALITY ULTR MIS TEXTURED	220	RELAFEN DS TAB 1000MG	29
REALITY ULTR MIS THIN.....	220	<i>relafen tab 500mg</i>	29
REAL-TIME KIT	227	<i>relafen tab 750mg</i>	29
REBIF INJ 22/0.5	269	RELENZA MIS DISKHALE	133
REBIF INJ 44/0.5.....	269	RELEUKO INJ 300MCG	211
REBIF REBIDO INJ 22/0.5	269	RELEUKO INJ 480MCG	211
REBIF REBIDO INJ 44/0.5.....	269	RELEXXII TAB 72MG ER.....	19
REBIF REBIDO INJ TITRATN	269	RELION BLOOD TES GLUCOSE	180
REBIF TITRTN INJ PACK	269	RELION LANCE MIS THIN 26G	227
REBINYN INJ 3000UNIT	206	RELION LANCE MIS THIN 30G	227
REBINYN SOL 1000UNIT	206	RELION MICRO MIS THIN 33G	227
REBINYN SOL 2000UNIT	206	RELION PLATN TES GLUCOSE	180
REBINYN SOL 500UNIT.....	206	RELION PRIME TES	180
REBLOZYL INJ 25MG.....	211	RELION PRIME TES GLUCOSE.....	180
REBLOZYL INJ 75MG.....	211	RELION TES ULTIMA.....	180
RECARBRIO INJ 1.25GM.....	44	RELION ULTRA MIS THIN 30G	227
RECEDO GEL.....	173	RELISTOR INJ 12/0.6ML.....	198
RECLAST INJ 5/100ML	184	RELISTOR INJ 8/0.4ML	198
<i>reclipsen tab</i>	150	RELISTOR TAB 150MG.....	198
RECOMBINATE INJ.....	206	RELNATE DHA CAP.....	247
RECOMBINATE INJ 220-400	206	RELPAK TAB 20MG.....	232
RECOMBINATE INJ 401-800	206	RELPAK TAB 40MG.....	232
RECOMBINATE INJ 801-1240.....	206	RELYVRIO PAK 3-1GM	251
RECOMBIVA HB INJ 10MCG/ML	286	REMERON SLTB TAB 15MG	68
RECOMBIVA HB INJ 5MCG/0.5.....	286	REMERON SLTB TAB 30MG	68
RECOMBIVA-HB INJ 40MCG/ML.....	286	REMERON SLTB TAB 45MG	68
RECORLEV TAB 150MG.....	184	REMERON TAB 15MG	68
RECOTHROM SOL 20000UNT	213	REMERON TAB 30MG.....	68
RECOTHROM SOL 5000UNIT	213	REMICADE INJ 100MG	197
RECTIV OIN 0.4%.....	43	<i>remifentanil hcl for iv soln 1 mg</i>	37
REDICHEW RX CHW	247	<i>remifentanil hcl for iv soln 2 mg</i>	37
REDITREX INJ 10/.4ML.....	26	<i>remifentanil hcl for iv soln 5 mg</i>	37
REDITREX INJ 12.5/0.5.....	26	REMIGEN CREA CRE.....	172

REMODULIN INJ 10MG/ML	143	RETIN-A CRE 0.025%	160
REMODULIN INJ 1MG/ML.....	142	RETIN-A CRE 0.05%	160
REMODULIN INJ 2.5MG/ML.....	142	RETIN-A CRE 0.1%	160
REMODULIN INJ 5MG/ML.....	142	RETIN-A GEL 0.01%	160
REMYDA GEL 0.25%.....	173	RETIN-A GEL 0.025%	160
RENACIDIN SOL	201	RETIN-A MICR GEL 0.04%.....	160
RENFLEXIS INJ 100MG.....	197	RETIN-A MICR GEL 0.04%PMP	160
RENTHYROID TAB 120MG	278	RETIN-A MICR GEL 0.06%PMP	160
RENTHYROID TAB 15MG	278	RETIN-A MICR GEL 0.08%PMP	160
RENTHYROID TAB 30MG.....	278	RETIN-A MICR GEL 0.1%	160
RENTHYROID TAB 60MG	278	RETIN-A MICR GEL 0.1%PUMP	160
RENTHYROID TAB 90MG	278	RETISERT IMP 0.59MG.....	258
REVELA POW 0.8GM	199	RETROVIR CAP 100MG.....	130
REVELA POW 2.4GM	199	RETROVIR INJ 10MG/ML	130
REVELA TAB 800MG	199	RETROVIR SYP 50MG/5ML	130
<i>repaglinide tab 0.5 mg</i>	80	REVATIO INJ	143
<i>repaglinide tab 1 mg</i>	80	REVATIO SUS 10MG/ML.....	143
<i>repaglinide tab 2 mg</i>	80	REVATIO TAB 20MG	143
REPATHA INJ 140MG/ML.....	90	REVEAL TES BLD GLUC.....	180
REPATHA PUSH INJ 420/3.5	90	REVLIMID CAP 10MG.....	239
REPATHA SURE INJ 140MG/ML	90	REVLIMID CAP 15MG	239
REQ 49+ TAB	244	REVLIMID CAP 2.5MG	239
<i>resorcinol-sulfur lotion 2-5%</i>	160	REVLIMID CAP 20MG	239
RESTASIS EMU 0.05% OP	257	REVLIMID CAP 25MG	239
RESTASIS MUL EMU 0.05% OP	257	REVLIMID CAP 5MG.....	239
RESTIMO GEL 1-1%	173	<i>revonto inj 20mg</i>	249
RESTORA RX CAP 60-1.25.....	81	REVUFORJ TAB 25MG.....	108
RESTORE SILV PAD 2	176	REXTOVY SPR 4/0.25ML	82
RESTORE SILV PAD 4	176	REXULTI TAB 0.25MG.....	127
RESTORE SILV PAD 6	176	REXULTI TAB 0.5MG.....	127
RESTORIL CAP 15MG.....	215	REXULTI TAB 1MG	127
RESTORIL CAP 22.5MG.....	215	REXULTI TAB 2MG	127
RESTORIL CAP 30MG.....	215	REXULTI TAB 3MG	127
RESTORIL CAP 7.5MG.....	215	REXULTI TAB 4MG	127
RETACRIT INJ 10000UNT	211	REYATAZ CAP 200MG.....	130
RETACRIT INJ 20000UNI.....	211	REYATAZ CAP 300MG	130
RETACRIT INJ 2000UNIT	211	REYATAZ POW 50MG.....	130
RETACRIT INJ 3000UNIT.....	211	REYVOW TAB 100MG	233
RETACRIT INJ 40000UNT	211	REYVOW TAB 50MG.....	233
RETACRIT INJ 4000UNIT.....	211	REZDIFFRA TAB 100MG	196
RETEVMO TAB 120MG	113	REZDIFFRA TAB 60MG	196
RETEVMO TAB 160MG	113	REZDIFFRA TAB 80MG	196
RETEVMO TAB 40MG.....	113	REZIPRES INJ.....	289
RETEVMO TAB 80MG.....	113	REZIPRES SOL.....	289

REZUROCK TAB 200MG	239	RISPERDAL TAB 3MG	123
REZVOGLAR INJ 100UT/ML	79	RISPERDAL TAB 4MG	123
REZZAYO INJ 200MG	84	<i>risperidone microspheres for im extended</i>	
RHOFADE CRE 1%	173	<i>rel susp 12.5 mg</i>	123
RHOGAM PLUS INJ 300MCG	262	<i>risperidone microspheres for im extended</i>	
RHOPHYLAC INJ 1500/2ML	262	<i>rel susp 25 mg</i>	123
RHOPRESSA SOL 0.02%	257	<i>risperidone microspheres for im extended</i>	
RIASTAP SOL 1GM	206	<i>rel susp 37.5 mg</i>	123
<i>ribavirin cap 200 mg</i>	132	<i>risperidone microspheres for im extended</i>	
<i>ribavirin tab 200 mg</i>	132	<i>rel susp 50 mg</i>	123
<i>rifabutin cap 150 mg</i>	100	<i>risperidone orally disintegrating tab 0.25</i>	
RIFADIN INJ 600 MG	100	<i>mg</i>	123
<i>rifampin cap 150 mg</i>	100	<i>risperidone orally disintegrating tab 0.5 mg</i>	
<i>rifampin cap 300 mg</i>	100	<i>.....</i>	123
<i>rifampin for inj 600 mg</i>	100	<i>risperidone orally disintegrating tab 1 mg</i>	
RIGHTEST ALT MIS ADAPTOR	227	<i>.....</i>	123
RIGHTEST MIS GL300	227	<i>risperidone orally disintegrating tab 2 mg</i>	
RIGHTEST TES GS100	181	<i>.....</i>	123
RIGHTEST TES GS300	181	<i>risperidone orally disintegrating tab 3 mg</i>	
RIGHTEST TES GS550	181	<i>.....</i>	123
<i>riluzole tab 50 mg</i>	251	<i>risperidone orally disintegrating tab 4 mg</i>	
<i>rimantadine hydrochloride tab 100 mg ...</i>	133	<i>.....</i>	123
RIMSO-50 SOL 50%	201	<i>risperidone soln 1 mg/ml</i>	123
<i>ringer's solution</i>	235	<i>risperidone tab 0.25 mg</i>	123
<i>ringer's solution for irrigation</i>	241	<i>risperidone tab 0.5 mg</i>	123
RINVOQ LQ SOL 1MG/ML	24	<i>risperidone tab 1 mg</i>	123
RINVOQ TAB 15MG ER	24	<i>risperidone tab 2 mg</i>	123
RINVOQ TAB 30MG ER	25	<i>risperidone tab 3 mg</i>	123
RINVOQ TAB 45MG ER	25	<i>risperidone tab 4 mg</i>	123
RIOMET SOL 500/5ML	76	RITALIN LA CAP 10MG	19
<i>risedronate sodium tab 150 mg</i>	185	RITALIN LA CAP 20MG	19
<i>risedronate sodium tab 30 mg</i>	185	RITALIN LA CAP 30MG	19
<i>risedronate sodium tab 35 mg</i>	185	RITALIN LA CAP 40MG	19
<i>risedronate sodium tab 5 mg</i>	184	RITALIN TAB 10MG	19
<i>risedronate sodium tab delayed release 35</i>		RITALIN TAB 20MG	19
<i>mg</i>	185	RITALIN TAB 5MG	19
RISPERDAL INJ 12.5MG	122	<i>ritonavir tab 100 mg</i>	130
RISPERDAL INJ 25MG	122	RITUXAN INJ 100MG	106
RISPERDAL INJ 37.5MG	122	RITUXAN INJ 500MG	106
RISPERDAL INJ 50MG	122	RITUXAN INJ HYCELA	110
RISPERDAL SOL 1MG/ML	122	<i>rivaroxaban tab 2.5 mg</i>	57
RISPERDAL TAB 0.5MG	122	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
RISPERDAL TAB 1MG	123	<i>equivalent)</i>	267
RISPERDAL TAB 2MG	123		

<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	267
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	267
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	267
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	267
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	267
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	267
<i>rivelsa tab</i>	150
<i>RIVFLOZA INJ 128/0.8</i>	201
<i>RIVFLOZA INJ 160MG/ML</i>	201
<i>RIVFLOZA INJ 80/0.5ML</i>	201
<i>RIXUBIS INJ 1000UNIT</i>	206
<i>RIXUBIS INJ 2000UNIT</i>	206
<i>RIXUBIS INJ 250 UNIT</i>	206
<i>RIXUBIS INJ 3000UNIT</i>	206
<i>RIXUBIS INJ 500UNIT</i>	206
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	233
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	233
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	233
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	233
<i>ROBAXIN INJ 100MG/ML</i>	249
<i>ROBINUL FORT TAB 2MG</i>	281
<i>ROBINUL TAB 1MG</i>	281
<i>ROCALTROL CAP 0.25MCG</i>	189
<i>ROCALTROL CAP 0.5MCG</i>	189
<i>ROCALTROL SOL 1MCG/ML</i>	189
<i>ROCKLATAN DRO</i>	257
<i>ROCURON BRO SOL 100/10ML</i>	252
<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i>	252
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	252
<i>roflumilast tab 250 mcg</i>	53
<i>roflumilast tab 500 mcg</i>	53
<i>ROLVEDON INJ 13.2MG</i>	211
<i>romidepsin for iv inj 10 mg</i>	113
<i>ROMVIMZA CAP 14MG</i>	113
<i>ROMVIMZA CAP 20MG</i>	113

<i>ROMVIMZA CAP 30MG</i>	113
<i>ropinirole hydrochloride tab 0.25 mg</i>	120
<i>ropinirole hydrochloride tab 0.5 mg</i>	120
<i>ropinirole hydrochloride tab 1 mg</i>	120
<i>ropinirole hydrochloride tab 2 mg</i>	120
<i>ropinirole hydrochloride tab 3 mg</i>	120
<i>ropinirole hydrochloride tab 4 mg</i>	120
<i>ropinirole hydrochloride tab 5 mg</i>	120
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	120
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	120
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	120
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	120
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	120
<i>ropivacaine hcl inj 10 mg/ml</i>	218
<i>ropivacaine hcl inj 2 mg/ml</i>	218
<i>ropivacaine hcl inj 5 mg/ml</i>	218
<i>ropivacaine hcl inj 7.5 mg/ml</i>	218
<i>ROPIVACAINE INJ 0.5%</i>	218
<i>rosuvastatin calcium tab 10 mg</i>	89
<i>rosuvastatin calcium tab 20 mg</i>	90
<i>rosuvastatin calcium tab 40 mg</i>	90
<i>rosuvastatin calcium tab 5 mg</i>	89
<i>rosyrah tab</i>	150
<i>ROSZET TAB 10-10MG</i>	87
<i>ROSZET TAB 20-10MG</i>	87
<i>ROSZET TAB 40-10MG</i>	87
<i>ROSZET TAB 5-10MG</i>	87
<i>ROTARIX SUS</i>	286
<i>ROTATEQ SOL</i>	286
<i>ROWASA KIT 4GM</i>	197
<i>roweepra tab 500mg</i>	64
<i>ROXICODONE TAB 15MG</i>	37
<i>ROXICODONE TAB 30MG</i>	37
<i>ROXYBOND TAB 15MG</i>	37
<i>ROXYBOND TAB 30MG</i>	37
<i>ROXYBOND TAB 5MG</i>	37
<i>ROZEREM TAB 8MG</i>	215
<i>ROZLYTREK CAP 100MG</i>	113
<i>ROZLYTREK CAP 200MG</i>	113

ROZLYTREK PAK 50MG.....	113
RUBRACA TAB 200MG.....	113
RUBRACA TAB 250MG.....	113
RUBRACA TAB 300MG	113
RUCONEST INJ 2100UNIT	207
<i>rufinamide susp 40 mg/ml</i>	64
<i>rufinamide tab 200 mg</i>	64
<i>rufinamide tab 400 mg</i>	64
RUKOBIA TAB 600MG ER	130
RUXIENCE INJ 100/10ML	106
RUXIENCE INJ 500/50ML	106
RYANODEX INJ 250MG	249
RYBELSUS TAB 1.5MG.....	77
RYBELSUS TAB 14MG.....	77
RYBELSUS TAB 3MG	77
RYBELSUS TAB 4MG	77
RYBELSUS TAB 7MG	77
RYBELSUS TAB 9MG	77
<i>ryclora sol 2mg/5ml</i>	86
RYDAPT CAP 25MG.....	113
RYKINDO INJ 25MG.....	123
RYKINDO INJ 37.5MG	123
RYKINDO INJ 50MG	123
RYLAZE INJ 10/0.5ML	115
RYPLAZIM SOL 68.8MG.....	207
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RYSTIGGO INJ 420/3ML.....	239
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SEASONIQUE TAB	150	<i>sensorcaine/ inj epi 0.25</i>	217
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SECUADO DIS 3.8MG	125	SEREVENT DIS AER 50MCG	55
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SECUADO DIS 7.6MG	125	SEROQUEL TAB 100MG	125
SECURESAFE MIS 0.5/29G	231	SEROQUEL TAB 200MG	125
SECURESAFE MIS 29GX1/2	231	SEROQUEL TAB 25MG	125
SEEBRI NEOHA CAP 15.6MCG	52	SEROQUEL TAB 300MG	125
SEGLENTIS TAB 56-44MG	39	SEROQUEL TAB 400MG	125
SEGLUROMET TAB 2.5-1000	75	SEROQUEL TAB 50MG	125
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SEGLUROMET TAB 7.5-1000	75	SEROQUEL XR TAB 200MG	125
SEGLUROMET TAB 7.5-500	75	SEROQUEL XR TAB 300MG	125
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SELARSDI INJ 45/0.5ML	164	SEROQUEL XR TAB 50MG	125
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<i>selegiline hcl cap 5 mg</i>	121	<i>sertraline hcl oral concentrate for solution</i>	
<i>selegiline hcl tab 5 mg</i>	121	<i>20 mg/ml</i>	70
SELENIOUS AC SOL 12MCG/2M	238	<i>sertraline hcl tab 100 mg</i>	70
<i>selenious acid inj 40 mcg/ml</i>	238	<i>sertraline hcl tab 25 mg</i>	70
<i>selenium sulfide lotion 2.5%</i>	166	<i>sertraline hcl tab 50 mg</i>	70
SELZENTRY SOL 20MG/ML	130	<i>setlakin tab</i>	150
SELZENTRY TAB 150MG	130	<i>sevelamer carbonate packet 0.8 gm</i>	199
SELZENTRY TAB 25MG	130	<i>sevelamer carbonate packet 2.4 gm</i>	199
SELZENTRY TAB 300MG	130	<i>sevelamer carbonate tab 800 mg</i>	199
SELZENTRY TAB 75MG	130	<i>sevelamer hcl tab 400 mg</i>	199
SEMGLEE INJ 100U/ML	79	<i>sevelamer hcl tab 800 mg</i>	199
		SEVENFACT INJ 1MG	206
		SEVENFACT INJ 5MG	206
		SEVENFACT SOL 2MG	206

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SIDEROL TAB	244	<i>simvastatin tab 20 mg</i>	90
SIGNIFOR INJ 0.3MG/ML	191	<i>simvastatin tab 40 mg</i>	90
SIGNIFOR INJ 0.6MG/ML	191	<i>simvastatin tab 5 mg</i>	90
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<i>sildenafil citrate for suspension 10 mg/ml</i>	144	SINGULAIR GRA 4MG	53
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	144	SINGULAIR TAB 10MG	53
<i>sildenafil citrate tab 20 mg</i>	144	SINUVA IMP 1350MCG	251
SILENOR TAB 3MG	213	<i>sirolimus oral soln 1 mg/ml</i>	241
SILENOR TAB 6MG	213	<i>sirolimus tab 0.5 mg</i>	241
SILIGENTLE PAD 2	176	<i>sirolimus tab 1 mg</i>	241
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SILIGENTLE PAD AG 2.....	176	SIRTURO TAB 100MG	100
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SILIQ INJ 210/1.5	164	SITAG/METFOR TAB 100-1000	75
<i>silodosin cap 4 mg</i>	201	SITAG/METFOR TAB 50-1000.....	75
<i>silodosin cap 8 mg</i>	201	SITAG/METFOR TAB 50-500MG	75
SILVADENE CRE 1%	166	SITAGLIPTIN TAB 100MG.....	77
<i>silver sulfadiazine cream 1%</i>	166	SITAGLIPTIN TAB 25MG	77
SILVRSTAT GEL DRESSING	176	SITAGLIPTIN TAB 50MG	77
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SIMLANDI 1PN KIT 40/0.4ML	24	SIVEXTRO INJ 200MG.....	47
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SKYTROFA INJ 4.3MG.....	187	sodium chloride soln nebu 7%	157
SKYTROFA INJ 5.2MG.....	187	sodium citrate & citric acid soln 500-334	
SKYTROFA INJ 6.3MG.....	187	mg/5ml.....	200
SKYTROFA INJ 7.6MG.....	187	sodium fluoride chew tab 0.25 mg f (from	
SKYTROFA INJ 9.1MG	187	0.55 mg naf)	235
SLYND TAB 4MG.....	153	sodium fluoride chew tab 0.5 mg f (from 1.1	
sm nicotine gum 4mg	272	mg naf)	235
SMART SENSE TES TEST	181	sodium fluoride chew tab 1 mg f (from 2.2	
SMARTEST MIS LANCETS	227	mg naf)	235
SMARTEST TES BLD GLUC.....	181	sodium fluoride soln 0.5 mg/ml f (from 1.1	
SMOFLIPID EMU.....	253	mg/ml naf)	235
SOAANZ TAB 20MG.....	183	sodium fluoride tab 0.5 mg f (from 1.1 mg	
SOAANZ TAB 40MG	183	naf)	235
SOAANZ TAB 60MG	183	sodium fluoride tab 1 mg f (from 2.2 mg naf)	
SOD ACETATE INJ 2MEQ/ML	233	.....	235
SOD BICARB INJ 8.4%	233	sodium phenylbutyrate oral powder 3	
SOD BICARB SOL D5W	233	gm/teaspoonful	189
sod ferric gluc cmplx in sucrose iv soln 12.5		sodium phenylbutyrate tab 500 mg.....	190
mg/ml (fe eq)	212	sodium phosphates inj 15 mm/5ml (phos)	
SOD NITRITE INJ 30MG/ML.....	82	20 meq/5ml (na)	236
SOD SUL/SULF EMU 10-5%.....	160	sodium phosphates inj 150 mm/50ml	
sod sulfate-pot sulf-mg sulf oral sol 17.5-		(phos) 200 meq/50ml (na)	237
3.13-1.6 gm/177ml.....	216	sodium phosphates inj 45 mm/15ml (phos)	
sodium acetate inj 2 meq/ml	233	60 meq/15ml (na)	236
sodium acetate inj 4 meq/ml	233	sodium polystyrene sulfonate powder ...	242
sodium benzoate & sodium phenylacetate		sodium tetradecyl sulfate inj 3%	242
iv soln 10-10%	189	sodium thiosulfate iv soln 250 mg/ml (25%)	
sodium bicarbonate iv soln 4.2%	233	.....	82
sodium bicarbonate iv soln 7.5%	234	SOFOS/VELPAT TAB 400-100	132
sodium bicarbonate iv soln 8.4%	234	SOF-SENSOR MIS.....	227
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sodium chloride inj 2.5 meq/ml (14.6%)	238	SOGROYA INJ 10MG/1.5	187
sodium chloride irrigation soln 0.9%	201	SOGROYA INJ 15MG/1.5	187
sodium chloride iv soln 0.45%	238	SOGROYA INJ 5MG/1.5	187
sodium chloride iv soln 0.9%.....	238	solifenacin succinate tab 10 mg.....	284
sodium chloride iv soln 3%	238	solifenacin succinate tab 5 mg	284
sodium chloride iv soln 4 meq/ml (23.4%)		SOLQUA INJ 100/33.....	75
.....	238	SOLIRIS INJ 10MG/ML.....	207
sodium chloride iv soln 5%	238	SOLOX GEL.....	176
sodium chloride preservative free (pf) inj		SOLTAMOX SOL 10MG/5ML	108
0.9%	238	SOLU-CORTEF INJ 1000MG	156
sodium chloride soln nebu 0.9%.....	157	SOLU-CORTEF INJ 100MG.....	156
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SOLU-MEDROL INJ 1GM	156	SPIKEVAX INJ 2024-25	286
SOLU-MEDROL INJ 2GM	156	<i>spinosad susp 0.9%</i>	173
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SOLU-MEDROL INJ 500MG	156	SPIRIVA AER 1.25MCG.....	52
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SOMA TAB 250MG.....	249	<i>25-25 mg</i>	182
SOMA TAB 350MG	249	<i>spironolactone susp 25 mg/5ml</i>	183
SOMATULINE INJ 120/.5ML	191	<i>spironolactone tab 100 mg</i>	183
SOMATULINE INJ 60/0.2ML	191	<i>spironolactone tab 25 mg</i>	183
SOMATULINE INJ 90/0.3ML	191	<i>spironolactone tab 50 mg</i>	183
SOMAVERT INJ 10MG	186	SPORANOX CAP 100MG	85
SOMAVERT INJ 15MG	186	SPORANOX SOL 10MG/ML	85
SOMAVERT INJ 20MG.....	186	SPRAVATO SOL 56MG DOS	69
SOMAVERT INJ 25MG.....	186	SPRAVATO SOL 84MG DOS	69
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<i>equivalent)</i>	113	SPRYCEL TAB 20MG	113
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SORBITOL-MAN SOL.....	201	SPRYCEL TAB 70MG	113
SORILUX AER 0.005%.....	165	SPRYCEL TAB 80MG	113
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<i>sotalol hcl (afib/afl) tab 160 mg</i>	136	<i>sps sus 30gm/120</i>	242
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<i>sotalol hcl tab 120 mg</i>	136	SSKI SOL 1GM/ML	157
<i>sotalol hcl tab 160 mg</i>	136	<i>st joseph chw low 81mg</i>	32
<i>sotalol hcl tab 240 mg</i>	136	<i>st joseph tab low 81mg</i>	32
<i>sotalol hcl tab 80 mg</i>	136	STAMARIL INJ	286
<i>sotradecol inj 1%</i>	242	STEGLATRO TAB 15MG	80
<i>sotradecol inj 3%</i>	242	STEGLATRO TAB 5MG	80
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SOTYLIZE SOL 5MG/ML	136	STEGLUJAN TAB 5-100MG.....	75
SOVALDI PAK 150MG	132	STELARA INJ 45MG/0.5	165
SOVALDI PAK 200MG	132	STELARA INJ 5MG/ML	197
SOVALDI TAB 200MG	132	STELARA INJ 90MG/ML	165
SOVALDI TAB 400MG	132	STEQEYMA INJ 130/26ML	198
SOVUNA TAB 200MG.....	99	STEQEYMA INJ 45/0.5ML	165

STEQEYMA INJ 90MG/ML	165	<i>subvenite tab 150mg</i>	65
STERIL TALC SUS 5GM	273	<i>subvenite tab 200mg</i>	65
STERILANCE MIS TL 28G	227	<i>subvenite tab 25mg</i>	65
STERILANCE MIS TL 30G	227	SUCCINYLBHOL INJ 20MG/ML	251
STERILANCE MIS TL 32G	227	<i>succinylcholine chloride inj 20 mg/ml</i>	251
STERITALC POW 2GM	273	SUCRAID SOL 8500/ML	181
STERITALC POW 3GM	273	SUCRALFATE SUS 1GM/10ML	282
STERITALC POW 4GM	273	<i>sucralfate susp 1 gm/10ml</i>	282
STIOLTO AER 2.5-2.5	55	<i>sucralfate tab 1 gm</i>	282
STIVARGA TAB 40MG	113	<i>sufentanil citrate inj 100 mcg/2ml (50</i> <i>mcg/ml)</i>	37
STOBOCLO INJ 60MG/ML	185	<i>sufentanil citrate inj 250 mcg/5ml (50</i> <i>mcg/ml)</i>	37
STRATA GRT GEL	176	<i>sufentanil citrate inj 50 mcg/ml</i>	37
STRATA MARK GEL	172	SUFLAVE SOL	216
STRATTERA CAP 10MG	16	SULAR TAB 17MG ER	139
STRATTERA CAP 18MG	16	SULAR TAB 34MG ER	139
STRATTERA CAP 25MG	16	SULAR TAB 8.5MG ER	139
STRATTERA CAP 60MG	16	<i>sulconazole nitrate cream 1%</i>	162
STRENSIQ INJ 18/0.45	190	<i>sulconazole nitrate solution 1%</i>	162
STRENSIQ INJ 28/0.7ML	190	SULF LIME SOL	173
STRENSIQ INJ 40MG/ML	190	<i>sulfacetamide sodium lotion 10% (acne)</i>	160
STRENSIQ INJ 80/0.8ML	190	<i>sulfacetamide sodium ophth oint 10%</i> ...	256
<i>streptomycin sulfate for inj 1 gm</i>	20	<i>sulfacetamide sodium ophth soln 10%</i> ...	256
STRIBILD TAB	130	<i>sulfacetamide sodium-prednisolone ophth</i> <i>soln 10-0.23(0.25)%</i>	258
STRIVERDI AER 2.5MCG	56	<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	44
STROMECTOL TAB 3MG	43	<i>sulfamethoxazole-trimethoprim susp 200-</i> <i>40 mg/5ml</i>	44
STROVITE FOR TAB	244	<i>sulfamethoxazole-trimethoprim tab 400-80</i> <i>mg</i>	44
STROVITE ONE TAB	244	<i>sulfamethoxazole-trimethoprim tab 800-</i> <i>160 mg</i>	44
SUBLOCADE INJ 100/0.5	41	<i>sulfamez emu 10-1%</i>	160
SUBLOCADE INJ 300/1.5	41	SULFAMYLLON CRE 85MG/GM	166
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SUBOXONE MIS 2-0.5MG	41	<i>sulfasalazine tab delayed release 500 mg</i>	198
SUBOXONE MIS 4-1MG	41	<i>sulfatrim pd sus 200-40/5</i>	44
SUBOXONE MIS 8-2MG	41	<i>sulindac tab 150 mg</i>	29
SUBSYS SPR 100MCG	37	<i>sulindac tab 200 mg</i>	29
SUBSYS SPR 1200MCG	37	<i>sumatriptan nasal spray 20 mg/act</i>	233
SUBSYS SPR 1600MCG	37	<i>sumatriptan nasal spray 5 mg/act</i>	233
SUBSYS SPR 200MCG	37		
SUBSYS SPR 400MCG	37		
SUBSYS SPR 600MCG	37		
SUBSYS SPR 800MCG	37		
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<i>subvenite kit start 49</i>	65		
<i>subvenite kit start 98</i>	65		
<i>subvenite tab 100mg</i>	65		

<i>sumatriptan succinate inj 6 mg/0.5ml</i>	233
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	233
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	233
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	233
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	233
<i>sumatriptan succinate tab 100 mg</i>	233
<i>sumatriptan succinate tab 25 mg</i>	233
<i>sumatriptan succinate tab 50 mg</i>	233
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	232
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	113
<i>sunitinib malate cap 25 mg (base equivalent)</i>	113
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	113
<i>sunitinib malate cap 50 mg (base equivalent)</i>	114
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SYNTHROID TAB 150MCG.....	279
SYNTHROID TAB 175MCG	279
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<i>tacrolimus cap 0.5 mg</i>	<i>241</i>
<i>tacrolimus cap 1 mg</i>	<i>241</i>
<i>tacrolimus cap 5 mg.....</i>	<i>241</i>
<i>tacrolimus oint 0.03%</i>	<i>170</i>
<i>tacrolimus oint 0.1%.....</i>	<i>170</i>
<i>tadalafil tab 2.5 mg.....</i>	<i>142</i>
<i>tadalafil tab 20 mg (pah)</i>	<i>144</i>
<i>tadalafil tab 5 mg</i>	<i>142</i>
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<i>take action tab 1.5mg</i>	<i>152</i>
TAKHZYRO INJ 150MG/ML	207
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<i>tandem plus cap</i>	<i>212</i>
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TASIGNA CAP 200MG.....	114
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<i>taysofy cap 1/20.....</i>	<i>151</i>
TAYTULLA CAP 1MG/20MC	151
<i>tazarotene cream 0.05%.....</i>	<i>165</i>
<i>tazarotene cream 0.1%</i>	<i>165</i>
<i>tazarotene gel 0.05%.....</i>	<i>165</i>
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TAZORAC CRE 0.05%	165	temozolomide cap 140 mg	101
TAZORAC CRE 0.1%	165	temozolomide cap 180 mg	101
TAZORAC GEL 0.05%.....	165	temozolomide cap 20 mg.....	101
TAZORAC GEL 0.1%.....	165	temozolomide cap 250 mg	101
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TECENTRIQ INJ 1200/20	106	temsirolimus soln for iv infusion 25 mg/ml	
TECENTRIQ INJ 840/14.....	106		114
TECFIDERA CAP 120MG.....	269	tencon tab 50-325mg	31
TECFIDERA CAP 240MG.....	269	TENIVAC INJ 5-2LF	280
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TECHLITE AST MIS LANCETS	228		130
TECHLITE MIS LANC 26G	228	TENORETIC TAB 100.....	97
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TEFLARO INJ 400MG	146	TENORMIN TAB 100MG	135
TEFLARO INJ 600MG	146	TENORMIN TAB 25MG	135
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TEGRETOL TAB 200MG	65	TEPADINA INJ 15MG.....	101
TEGRETOL-XR TAB 100MG	65	TEPEZZA INJ 500MG.....	187
TEGRETOL-XR TAB 200MG.....	65	TEPMETKO TAB 225MG.....	114
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TEKTRUNA TAB 150MG	98	TEPYLUTE INJ 15/1.5ML.....	101
TEKTRUNA TAB 300MG.....	98	terazosin hcl cap 1 mg (base equivalent)..	94
telmisartan tab 20 mg	93	terazosin hcl cap 10 mg (base equivalent)	94
telmisartan tab 40 mg.....	93	terazosin hcl cap 2 mg (base equivalent) .	94
telmisartan tab 80 mg.....	93	terazosin hcl cap 5 mg (base equivalent) .	94
telmisartan-amlodipine tab 40-10 mg	97	terbinafine hcl tab 250 mg	85
telmisartan-amlodipine tab 40-5 mg	97	terbutaline sulfate inj 1 mg/ml.....	56
telmisartan-amlodipine tab 80-10 mg	97	terbutaline sulfate tab 2.5 mg	56
telmisartan-amlodipine tab 80-5 mg	97	terbutaline sulfate tab 5 mg	56
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telmisartan-hydrochlorothiazide tab 80-12.5 mg	97	terconazole vaginal cream 0.8%.....	287
telmisartan-hydrochlorothiazide tab 80-25 mg	97	terconazole vaginal suppos 80 mg	287
temazepam cap 15 mg.....	215	teriflunomide tab 14 mg	270
temazepam cap 22.5 mg	215	teriflunomide tab 7 mg	270
temazepam cap 30 mg	215	TERIPARATIDE INJ 620/2.48	185
temazepam cap 7.5 mg	215	teriparatide soln pen-inj 560 mcg/2.24ml	
TEMBEXA SUS 10MG/ML.....	133	.....	185
TEMBEXA TAB 100MG	133	terrell sol	200
TEMODAR INJ 100MG.....	101	TESTIM GEL 1%(50MG)	41
temozolomide cap 100 mg.....	101	TESTOPEL MIS PELLETS.....	41
		testosterone cypionate im inj in oil 100 mg/ml	41

<i>testosterone cypionate im inj in oil 200 mg/ml</i>	41	THIOLA EC TAB 300MG	202
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	41	THIOLA TAB 100MG.....	202
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TESTOSTERONE MIS 200MG.....	42	<i>thioridazine hcl tab 100 mg</i>	126
TESTOSTERONE MIS 25MG	41	<i>thioridazine hcl tab 25 mg</i>	126
TESTOSTERONE MIS 50MG	42	<i>thioridazine hcl tab 50 mg</i>	126
<i>testosterone td gel 10mg/act (2%)</i>	42	<i>thiotepa for inj 100 mg</i>	101
<i>testosterone td gel 12.5 mg/act (1%)</i>	42	<i>thiotepa for inj 15 mg</i>	101
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	42	<i>thiothixene cap 1 mg</i>	127
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	42	<i>thiothixene cap 10 mg</i>	127
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	42	<i>thiothixene cap 2 mg</i>	127
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	42	<i>thiothixene cap 5 mg</i>	127
<i>testosterone td gel 50 mg/5gm (1%)</i>	42	<i>thrive gum 2mg mint</i>	272
<i>testosterone td soln 30 mg/act</i>	42	THRIVITE 19 TAB.....	244
<i>tetrabenazine tab 12.5 mg</i>	268	THRIVITE RX TAB 29-1MG.....	247
<i>tetrabenazine tab 25 mg</i>	268	THROMBIN KIT 5000UNIT	213
<i>tetracaine hcl ophth soln 0.5%</i>	257	THROMBIN-JMI KIT 20000UNT	213
<i>tetracycline hcl cap 250 mg</i>	276	THROMBIN-JMI KIT 5000UNIT.....	213
<i>tetracycline hcl cap 500 mg</i>	276	THROMBIN-JMI SOL 20000UNT	213
TEVIMBRA INJ 100/10ML	106	THROMBIN-JMI SOL 5000UNIT	213
<i>texacort sol 2.5%</i>	169	THROMBOGEN KIT 10000UNT	213
TEXAVITE LQ LIQ.....	245	THROMBOGEN SOL 10000UNT	213
TEZSPIRE INJ 210MG.....	52	THROMBOGEN SOL 1000UNIT	213
TEZSPIRE SOL 210MG	52	THYMOGLOBULN INJ 25MG.....	241
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THALOMID CAP 100MG.....	239	THYROID TAB 120MG	279
THALOMID CAP 50MG.....	239	THYROID TAB 15MG	279
THAM INJ 30MEQ	234	<i>tiadylt cap 120mg/24</i>	139
THEO-24 CAP 100MG CR	56	<i>tiadylt cap 180mg/24</i>	139
THEO-24 CAP 200MG CR.....	56	<i>tiadylt cap 240mg/24</i>	139
THEO-24 CAP 300MG CR.....	56	<i>tiadylt cap 300mg/24</i>	139
THEO-24 CAP 400MG ER	56	<i>tiadylt cap 360mg/24</i>	139
<i>theophylline elixir 80 mg/15ml</i>	56	<i>tiadylt cap 420mg/24</i>	139
<i>theophylline soln 80 mg/15ml</i>	56	<i>tiagabine hcl tab 12 mg</i>	66
<i>theophylline tab er 12hr 300 mg</i>	56	<i>tiagabine hcl tab 16 mg</i>	66
<i>theophylline tab er 12hr 450 mg</i>	56	<i>tiagabine hcl tab 2 mg</i>	66
<i>theophylline tab er 24hr 400 mg</i>	56	<i>tiagabine hcl tab 4 mg</i>	66
<i>theophylline tab er 24hr 600 mg</i>	56	TIAZAC CAP 120MG/24.....	139
<i>thiamine hcl inj 100 mg/ml</i>	289	TIAZAC CAP 180MG/24.....	139
THIOLA EC TAB 100MG.....	202	TIAZAC CAP 240MG/24.....	139
		TIAZAC CAP 300MG/24.....	139
		TIAZAC CAP 360MG/24.....	139
		TIAZAC CAP 420MG/24.....	139
		TIBSOVO TAB 250MG.....	114

<i>ticagrelor tab 60 mg</i>	208	<i>tirofiban hcl in nacl 0.9% iv soln 5</i>	
<i>ticagrelor tab 90 mg</i>	208	<i>mg/100ml (base equiv)</i>	208
TICE BCG INJ	116	TIROSINT CAP 100MCG	279
TICOVAC INJ	286	TIROSINT CAP 112MCG	279
TIGAN INJ 100MG/ML.....	83	TIROSINT CAP 125MCG.....	279
<i>tigecycline for iv soln 50 mg</i>	274	TIROSINT CAP 137MCG.....	279
TIGECYCLINE INJ 50MG.....	274	TIROSINT CAP 13MCG.....	279
TIKOSYN CAP 125MCG	52	TIROSINT CAP 150MCG	279
TIKOSYN CAP 250MCG	52	TIROSINT CAP 175MCG.....	279
TIKOSYN CAP 500MCG.....	52	TIROSINT CAP 200MCG	279
<i>tilia fe tab</i>	151	TIROSINT CAP 25MCG	279
TIM/BRIM/DOR SOL	254	TIROSINT CAP 50MCG.....	279
TIM/BRIM/DOR SOL /BIMATOP	254	TIROSINT CAP 75MCG	279
TIM/DORZ/LAT SOL	254	TIROSINT CAP 88MCG.....	279
TIMOL/BRIM SOL DORZ/LAT	254	TISSEEL KIT 10ML.....	213
TIMOL/BRIMO/ SOL DORZOL.....	254	TISSEEL KIT 2ML	213
TIMOL/LATAN SOL.....	254	TISSEEL KIT 4ML	213
TIMOLOL MAL/ SOL BIMATOPR	254	TISSEEL SOL 10ML	213
<i>timolol maleate ophth gel forming soln</i>		TISSEEL SOL 2ML	213
<i>0.25%</i>	254	TISSEEL SOL 4ML.....	213
<i>timolol maleate ophth gel forming soln</i>		TIVDAK INJ 40MG.....	106
<i>0.5%</i>	254	TIVICAY PD TAB 5MG.....	130
<i>timolol maleate ophth soln 0.25%</i>	254	TIVICAY TAB 50MG.....	130
<i>timolol maleate ophth soln 0.5%</i>	254	<i>tizanidine hcl cap 2 mg (base equivalent)</i>	
<i>timolol maleate ophth soln 0.5% (once-</i>		.....	249
<i>daily)</i>	254	<i>tizanidine hcl cap 4 mg (base equivalent)</i>	
<i>timolol maleate preservative free ophth soln</i>		.....	249
<i>0.25%</i>	254	<i>tizanidine hcl cap 6 mg (base equivalent)</i>	
<i>timolol maleate preservative free ophth soln</i>		.....	249
<i>0.5%</i>	254	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	
<i>timolol maleate tab 10 mg</i>	136	.....	249
<i>timolol maleate tab 20 mg</i>	136	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	
<i>timolol maleate tab 5 mg</i>	136	.....	249
<i>timolol ophth soln 0.5%</i>	254	TLANDO CAP 112.5 MG.....	42
TIMOPTIC OCU SOL 0.25% OP	254	TNKASE KIT 50MG.....	209
<i>tinidazole tab 250 mg</i>	43	TOBI NEB 300/5ML.....	20
<i>tinidazole tab 500 mg</i>	43	TOBI PODHALR CAP 28MG	20
<i>tiopronin tab 100 mg</i>	202	TOBRA/VANCO DRO 1.5-5%.....	256
<i>tiopronin tab delayed release 100 mg</i>	202	TOBRADEX OIN 0.3-0.1%.....	258
<i>tiopronin tab delayed release 300 mg</i>	202	TOBRADEX ST SUS 0.3-0.05	258
<i>tiotropium bromide monohydrate inhal cap</i>		<i>tobramycin nebu soln 300 mg/4ml</i>	20
<i>18 mcg (base equiv)</i>	52	<i>tobramycin nebu soln 300 mg/5ml</i>	20
<i>tirofiban hcl in nacl 0.9% iv soln 12.5</i>		<i>tobramycin ophth soln 0.3%</i>	256
<i>mg/250ml (base eq)</i>	208	<i>tobramycin sulfate for inj 1.2 gm</i>	20

<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	20	<i>topiramate cap er 24hr sprinkle 150 mg</i> ...	65
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	20	<i>topiramate cap er 24hr sprinkle 200 mg</i> ..	65
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	20	<i>topiramate cap er 24hr sprinkle 25 mg</i>	65
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	20	<i>topiramate cap er 24hr sprinkle 50 mg</i>	65
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	258	<i>topiramate sprinkle cap 15 mg</i>	65
TOBREX OIN 0.3% OP	256	<i>topiramate sprinkle cap 25 mg</i>	65
TODAY SPONGE MIS.....	287	<i>topiramate sprinkle cap 50 mg</i>	65
<i>tolcapone tab 100 mg</i>	118	<i>topiramate tab 100 mg</i>	65
<i>tolectin 600 tab 600mg</i>	29	<i>topiramate tab 200 mg</i>	65
<i>tolmetin sodium cap 400 mg</i>	29	<i>topiramate tab 25 mg</i>	65
<i>tolmetin sodium tab 600 mg</i>	29	<i>topiramate tab 50 mg</i>	65
<i>tolterodine tartrate cap er 24hr 2 mg</i>	284	<i>topotecan hcl for inj 4 mg (base equiv)</i> ...	118
<i>tolterodine tartrate cap er 24hr 4 mg</i>	284	<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	118
<i>tolterodine tartrate tab 1 mg</i>	284	TOPOTECAN INJ 4MG/4ML.....	118
<i>tolterodine tartrate tab 2 mg</i>	284	TOPROL XL TAB 100MG.....	135
<i>tolvaptan tab 15 mg</i>	192	TOPROL XL TAB 200MG	135
<i>tolvaptan tab 30 mg</i>	192	TOPROL XL TAB 25MG.....	135
<i>tolvaptan tab therapy pack 15 mg</i>	192	TOPROL XL TAB 50MG	135
<i>tolvaptan tab therapy pack 30 & 15 mg</i> ...	192	<i>toremifene citrate tab 60 mg (base equivalent)</i>	108
<i>tolvaptan tab therapy pack 45 & 15 mg</i> ...	192	TORISEL INJ 25MG/ML	114
<i>tolvaptan tab therapy pack 60 & 30 mg</i> ..	192	<i>torpenz tab 10mg</i>	114
<i>tolvaptan tab therapy pack 90 & 30 mg</i> ..	192	<i>torpenz tab 2.5mg</i>	114
TOPAMAX SPR CAP 15MG	65	<i>torpenz tab 5mg</i>	114
TOPAMAX SPR CAP 25MG.....	65	<i>torpenz tab 7.5mg</i>	114
TOPAMAX TAB 100MG	65	<i>toremide tab 10 mg</i>	183
TOPAMAX TAB 200MG.....	65	<i>toremide tab 100 mg</i>	183
TOPAMAX TAB 25MG	65	<i>toremide tab 20 mg</i>	183
TOPAMAX TAB 50MG	65	<i>toremide tab 5 mg</i>	183
TOPICORT CRE 0.05%	169	TOSYMRA SOL 10MG	233
TOPICORT CRE 0.25%	169	TOTECT INJ 500MG	116
TOPICORT GEL 0.05%	169	TOUJEO MAX INJ 300/ML	79
TOPICORT OIN 0.05%.....	169	TOUJEO SOLO INJ 300/ML.....	79
TOPICORT OIN 0.25%.....	169	<i>tovet aer 0.05%</i>	169
TOPICORT SPR 0.25%	169	TOVIAZ TAB 4MG	284
<i>topiramate cap er 24hr 100 mg</i>	65	TOVIAZ TAB 8MG	284
<i>topiramate cap er 24hr 200 mg</i>	65	TPN ELECTROL INJ.....	235
<i>topiramate cap er 24hr 25 mg</i>	65	TPOXX CAP 200MG.....	133
<i>topiramate cap er 24hr 50 mg</i>	65	TPOXX INJ.....	133
<i>topiramate cap er 24hr sprinkle 100 mg</i> ..	65	TRACLEER TAB 125MG.....	143
		TRACLEER TAB 32MG	143
		TRACLEER TAB 62.5MG.....	143
		TRADJENTA TAB 5MG	77

<i>tramadol hcl cap er 24hr biphasic release</i>		<i>travoprost ophth soln 0.004%</i>	
100 mg.....	38	(benzalkonium free) (bak free).....	260
<i>tramadol hcl cap er 24hr biphasic release</i>		TRAZIMERA INJ 150MG.....	105
150 mg.....	38	TRAZIMERA INJ 420MG.....	105
<i>tramadol hcl cap er 24hr biphasic release</i>		<i>trazodone hcl tab 100 mg</i>	70
200 mg	38	<i>trazodone hcl tab 150 mg</i>	70
<i>tramadol hcl cap er 24hr biphasic release</i>		<i>trazodone hcl tab 300 mg</i>	70
300 mg	38	<i>trazodone hcl tab 50 mg</i>	70
<i>tramadol hcl oral soln 5 mg/ml</i>	38	TREANDA INJ 100MG	102
<i>tramadol hcl tab 100 mg</i>	38	TREANDA INJ 25MG	101
<i>tramadol hcl tab 25 mg</i>	38	TRECATOR TAB 250MG.....	100
<i>tramadol hcl tab 50 mg</i>	38	TRELEGY AER 100MCG	56
<i>tramadol hcl tab er 24hr 100 mg</i>	38	TRELEGY AER 200MCG	56
<i>tramadol hcl tab er 24hr 200 mg</i>	38	TRELSTAR MIX INJ 11.25MG.....	108
<i>tramadol hcl tab er 24hr 300 mg</i>	38	TRELSTAR MIX INJ 22.5MG.....	108
<i>tramadol hcl tab er 24hr biphasic release</i>		TRELSTAR MIX INJ 3.75MG.....	108
100 mg.....	38	TREMFYA CROH INJ 200/2ML	198
<i>tramadol hcl tab er 24hr biphasic release</i>		TREMFYA INJ 100MG/ML.....	165
200 mg	38	TREMFYA INJ 200/20ML.....	198
<i>tramadol hcl tab er 24hr biphasic release</i>		TREMFYA INJ 200/2ML	198
300 mg	38	<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>		.....	143
.....	39	<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	
<i>trandolapril tab 1 mg</i>	91	.....	143
<i>trandolapril tab 2 mg</i>	92	<i>treprostinil inj soln 200 mg/20ml (10</i>	
<i>trandolapril tab 4 mg</i>	92	<i>mg/ml)</i>	143
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>		<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	
.....	97	.....	143
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>		TRESIBA FLEX INJ 100UNIT	79
.....	97	TRESIBA FLEX INJ 200UNIT	79
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>		TRESIBA INJ 100UNIT	79
.....	97	<i>tretinoin cap 10 mg</i>	116
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>		<i>tretinoin cream 0.025%</i>	160
.....	97	<i>tretinoin cream 0.05%</i>	160
<i>tranexamic acid iv soln 1000 mg/10ml (100</i>		<i>tretinoin cream 0.1%</i>	160
<i>mg/ml)</i>	212	<i>tretinoin gel 0.01%</i>	160
<i>tranexamic acid tab 650 mg</i>	212	<i>tretinoin gel 0.025%</i>	160
TRANSDERM-SC DIS 1.5MG.....	83	<i>tretinoin gel 0.05%</i>	160
TRANSDERM-SC DIS 1MG/3DAY	83	<i>tretinoin microsphere gel 0.04%</i>	160
<i>tranylcypromine sulfate tab 10 mg</i>	69	<i>tretinoin microsphere gel 0.08%</i>	160
TRAVASOL INJ 10%.....	253	<i>tretinoin microsphere gel 0.1%</i>	160
TRAVATAN Z DRO 0.004%	260	TRETTEN INJ.....	206
TRAVEL LANCE MIS ADV 28G.....	228	TREXALL TAB 10MG.....	103
		TREXALL TAB 15MG.....	103

TREXALL TAB 5MG.....	103	<i>tricon cap</i>	212
TREXALL TAB 7.5MG.....	103	TRICOR TAB 145MG.....	88
TREXIMET TAB 10-60MG.....	232	TRICOR TAB 48MG	88
TREXIMET TAB 85-500MG.....	232	<i>tridacaine dis 5% patch</i>	171
<i>trezix cap</i>	39	<i>triderm cre 0.5%</i>	170
TRIAM-BUPIVA SUS 40-5MG.....	156	<i>trientine hcl cap 250 mg</i>	238
TRIAMCIN ACE INJ 40MG/ML.....	156	TRIESENCE INJ 40MG/ML.....	258
TRIAMCINOLON INJ 40MG/ML	156	<i>tri-estaryl tab</i>	151
TRIAMCINOLON INJ 80MG/2ML	156	<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i>	126
TRIAMCINOLON INJ 80MG/ML	156	<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i>	126
<i>triamcinolone acetone aerosol soln 0.147</i> <i>mg/gm</i>	169	<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i>	126
<i>triamcinolone acetone cream 0.025%</i>	169	<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i>	126
<i>triamcinolone acetone cream 0.1%</i>	169	<i>trifluridine ophth soln 1%</i>	256
<i>triamcinolone acetone cream 0.5%</i>	169	<i>trigels-f cap forte</i>	212
<i>triamcinolone acetone dental paste 0.1%</i>	243	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i> ..	118
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VASOPRE/NACL INJ 100/250	190	<i>equivalent)</i>	72
<i>vasopressin iv soln 20 unit/ml (for iv</i>		<i>venlafaxine hcl cap er 24hr 37.5 mg (base</i>	
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<i>verapamil hcl tab 40 mg</i>	139	VIBERZI TAB 100MG	198
<i>verapamil hcl tab 80 mg</i>	139	VIBERZI TAB 75MG	198
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VEREGEN OIN 15%.....	160	VIDAZA INJ 100MG	104
VERELAN CAP 120MG SR	140	VIEKIRA PAK TAB	132
VERELAN CAP 180MG SR	140	<i>vienva tab 0.1-20</i>	151
VERELAN CAP 240MG SR	140	<i>vigabatrin powd pack 500 mg</i>	66
		<i>vigabatrin tab 500 mg</i>	66
		<i>vigadrone pow 500mg</i>	66
		VIGAFYDE SOL 100MG/ML.....	66
		VIGAMOX DRO 0.5%	256
		<i>vigpoder pow 500mg</i>	66
		VIIBRYD KIT STARTER	71
		VIIBRYD TAB 10MG	71

VIIBRYD TAB 20MG	71	VISIONBLUE INJ 0.06%.....	259
VIIBRYD TAB 40MG	71	VISTOGARD PAK 10GM	82
VIJOICE TAB 125MG	242	VISUDYNE INJ 15MG.....	257
VIJOICE TAB 250MG	242	VITAFOL CAP ULTRA	248
VIJOICE TAB 50MG	242	VITAFOL CHW GUMMIES.....	248
<i>vilazodone hcl tab 10 mg</i>	71	VITAFOL FE+ CAP	248
<i>vilazodone hcl tab 20 mg</i>	71	VITAFOL-NANO TAB.....	248
<i>vilazodone hcl tab 40 mg</i>	71	VITAFOL-OB PAK +DHA.....	248
VILTEPSO SOL	251	VITAFOL-OB TAB 65-1MG.....	248
VIMIZIM INJ 5MG/5ML	190	VITAFOL-ONE CAP	248
VIMKUNYA INJ 40/0.8ML	287	VITAMEDMD CAP ONE RX.....	248
VIMOVO TAB 375-20MG.....	29	VITAPEARL CAP	248
VIMOVO TAB 500-20MG	29	VITAROCA PLU TAB.....	244
VIMPAT INJ 200MG/20	65	VITATRUE MIS.....	248
VIMPAT SOL 10MG/ML	66	VITRAKVI CAP 100MG	114
VIMPAT TAB 100MG.....	66	VITRAKVI CAP 25MG	114
VIMPAT TAB 150MG	66	VITRAKVI SOL 20MG/ML.....	115
VIMPAT TAB 200MG	66	VITRAMYN TAB	244
VIMPAT TAB 50MG.....	66	VITRANOL FE TAB	244
VINATE DHA CAP 27-1.13.....	247	VITRANOL TAB	244
VINATE II TAB	247	VITREXYL TAB	244
VINATE M TAB	247	VITREXYL TAB IRON	244
VINATE ONE TAB	247	VIVA DHA CAP	248
<i>vinblastine sulfate inj 1 mg/ml</i>	117	VIVAGUARD MIS 28G.....	230
<i>vincristine sulfate iv soln 1 mg/ml</i>	117	VIVAGUARD MIS 30G	230
<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	117	VIVELLE-DOT DIS 0.025MG	194
<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	117	VIVELLE-DOT DIS 0.0375MG	194
VIOKACE TAB 10440	181	VIVELLE-DOT DIS 0.05MG.....	194
VIOKACE TAB 20880.....	181	VIVELLE-DOT DIS 0.075MG	194
<i>violele tab</i>	151	VIVELLE-DOT DIS 0.1MG.....	194
VIRACEPT TAB 250MG	130	VIVIMUSTA INJ 100/4ML	102
VIRACEPT TAB 625MG.....	130	VIVITROL INJ 380MG	82
VIREAD POW 40MG/GM	130	VIVJOA CAP 150MG.....	85
VIREAD TAB 150MG.....	130	VIVLODEX CAP 10MG	29
VIREAD TAB 200MG.....	130	VIVLODEX CAP 5MG.....	29
VIREAD TAB 250MG	131	VIVOTIF CAP EC	285
VIREAD TAB 300MG	131	VIZIMPRO TAB 15MG	107
VIRT-C DHA CAP.....	248	VIZIMPRO TAB 30MG	107
VIRT-NATE CAP DHA	248	VIZIMPRO TAB 45MG	107
VIRT-PN DHA CAP	248	VOCAL POINT TES BLD GLUC.....	181
VIRT-PN PLUS CAP.....	248	VOGELXO GEL 1%(50MG).....	42
VISCO-3 INJ 25/2.5ML.....	250	VOGELXO GEL PUMP 1%	42
		<i>volnea tab</i>	151
		VOL-PLUS TAB	248

VOL-TAB RX TAB	248
VOLTAREN GEL 1% ARTHR	161
VONJO CAP 100MG.....	115
VONVENDI INJ 1300UNIT	206
VONVENDI INJ 650UNIT	206
VOQUEZNA PAK DUAL PAK	284
VOQUEZNA PAK TRIP PK.....	284
VOQUEZNA TAB 10MG.....	283
VOQUEZNA TAB 20MG	283
VORANIGO TAB 10MG.....	115
VORANIGO TAB 40MG.....	115
VORAXAZE INJ 1000UNIT.....	116
<i>voriconazole for inj 200 mg</i>	85
<i>voriconazole for susp 40 mg/ml</i>	85
VORICONAZOLE INJ 200MG	85
<i>voriconazole tab 200 mg</i>	85
<i>voriconazole tab 50 mg</i>	85
VOSEVI TAB	132
VOTRIENT TAB 200MG.....	115
VOWST CAP.....	198
VOXZOGO INJ 0.4MG.....	190
VOXZOGO INJ 0.56MG	190
VOXZOGO INJ 1.2MG.....	190
VOYDEYA TAB 100MG	207
VOYDEYA TAB 50-100MG	207
VP-HEME OB MIS + DHA	248
VP-PNV-DHA CAP	248
VRAYLAR CAP 1.5MG	121
VRAYLAR CAP 3MG.....	121
VRAYLAR CAP 4.5MG	122
VRAYLAR CAP 6MG.....	122
VTAMA CRE 1%	165
<i>vtol lq sol</i>	31
VUMERITY CAP 231MG	270
VUSION OIN	162
VYEPTI INJ 100MG/ML	232
<i>vyfemla tab 0.4-35</i>	151
VYKAT XR TAB 150MG	190
VYKAT XR TAB 25MG.....	190
VYKAT XR TAB 75MG.....	190
<i>vylibra tab 0.25-35</i>	151
VYNDAMAX CAP 61MG.....	144
VYNDAQEL CAP 20MG	144
VYONDYS 53 INJ 100/2ML.....	251

VYTORIN TAB 10-10MG.....	87
VYTORIN TAB 10-20MG	87
VYTORIN TAB 10-40MG	87
VYTORIN TAB 10-80MG	87
VYVANSE CAP 10MG	14
VYVANSE CAP 20MG	14
VYVANSE CAP 30MG	14
VYVANSE CAP 40MG	14
VYVANSE CAP 50MG	14
VYVANSE CAP 60MG	14
VYVANSE CAP 70MG	14
VYVANSE CHW 10MG	14
VYVANSE CHW 20MG.....	14
VYVANSE CHW 30MG.....	14
VYVANSE CHW 40MG.....	14
VYVANSE CHW 50MG.....	14
VYVANSE CHW 60MG.....	14
VYVGART INJ 400/20ML.....	239
VYVGART INJ HYTRULO	239
VYXEOS INJ 44-100MG.....	110
VYZULTA SOL 0.024%	260

W

WAINUA INJ 45/0.8ML	272
WAKIX TAB 17.8MG	16
WAKIX TAB 4.45MG.....	16
<i>warfarin sodium tab 1 mg</i>	57
<i>warfarin sodium tab 10 mg</i>	57
<i>warfarin sodium tab 2 mg</i>	57
<i>warfarin sodium tab 2.5 mg</i>	57
<i>warfarin sodium tab 3 mg</i>	57
<i>warfarin sodium tab 4 mg</i>	57
<i>warfarin sodium tab 5 mg</i>	57
<i>warfarin sodium tab 6 mg</i>	57
<i>warfarin sodium tab 7.5 mg</i>	57
<i>water for irrigation, sterile irrigation soln</i>	241
WELCHOL PAK 3.75GM	88
WELCHOL TAB 625MG	88
WELLBUTRIN TAB 100MG SR.....	68
WELLBUTRIN TAB 150MG SR.....	68
WELLBUTRIN TAB 200MG SR.....	68
WELLBUTRIN TAB XL 150MG.....	68
WELLBUTRIN TAB XL 300MG	68
<i>wera tab 0.5/35</i>	151
<i>wes-phos 250 tab neutral</i>	237

WESTHROID TAB 130MG.....	279	XALKORI CAP 20MG.....	115
WESTHROID TAB 195MG.....	279	XALKORI CAP 250MG.....	115
WESTHROID TAB 32.5MG.....	279	XALKORI CAP 50MG.....	115
WESTHROID TAB 65MG.....	279	XANAX TAB 0.25MG.....	50
WESTHROID TAB 97.5MG.....	279	XANAX TAB 0.5MG.....	50
WEZLANA INJ 130/26ML.....	198	XANAX TAB 1MG.....	50
WEZLANA INJ 45/0.5ML.....	165	XANAX TAB 2MG.....	50
WEZLANA INJ 90MG/ML.....	165	XANAX XR TAB 0.5MG.....	50
WIDE-SEAL DPR KIT 60.....	221	XANAX XR TAB 1MG.....	50
WIDE-SEAL DPR KIT 65.....	221	XANAX XR TAB 2MG.....	50
WIDE-SEAL DPR KIT 70.....	221	XANAX XR TAB 3MG.....	50
WIDE-SEAL DPR KIT 75.....	221	<i>xarah fe tab</i>	151
WIDE-SEAL DPR KIT 80.....	221	XARELTO STAR TAB 15/20MG.....	57
WIDE-SEAL DPR KIT 85.....	221	XARELTO SUS 1MG/ML.....	57
WIDE-SEAL DPR KIT 90.....	221	XARELTO TAB 10MG.....	57
WIDE-SEAL DPR KIT 95.....	221	XARELTO TAB 15MG.....	57
WILATE INJ.....	206	XARELTO TAB 2.5MG.....	57
WINLEVI CRE 1%.....	160	XARELTO TAB 20MG.....	57
WINREVAIR INJ 45MG.....	143	XATMEP SOL 2.5MG/ML.....	104
WINREVAIR INJ 60MG.....	143	XCOPRI PAK 100-150.....	66
WINRHO SDF INJ 15000UNT.....	263	XCOPRI PAK 12.5-25.....	66
WINRHO SDF INJ 1500UNIT.....	263	XCOPRI PAK 150-200.....	66
WINRHO SDF INJ 2500UNIT.....	263	XCOPRI PAK 50-100MG.....	66
WINRHO SDF INJ 5000UNIT.....	263	XCOPRI TAB 100MG.....	66
<i>wixela inhub aer 100/50</i>	56	XCOPRI TAB 150MG.....	66
<i>wixela inhub aer 250/50</i>	56	XCOPRI TAB 200MG.....	66
<i>wixela inhub aer 500/50</i>	56	XCOPRI TAB 25MG.....	66
WP THYROID TAB 113.75MG.....	280	XCOPRI TAB 50MG.....	66
WP THYROID TAB 130MG.....	280	XDEMVI DRO 0.25%.....	256
WP THYROID TAB 16.25MG.....	279	XELJANZ SOL 1MG/ML.....	25
WP THYROID TAB 32.5MG.....	279	XELJANZ TAB 10MG.....	25
WP THYROID TAB 48.75MG.....	280	XELJANZ TAB 5MG.....	25
WP THYROID TAB 65MG.....	280	XELJANZ XR TAB 11MG.....	25
WP THYROID TAB 81.25MG.....	280	XELJANZ XR TAB 22MG.....	25
WP THYROID TAB 97.5MG.....	280	XELODA TAB 150MG.....	104
<i>wymzya fe chw 0.4mg-35</i>	151	XELODA TAB 500MG.....	104
X		<i>xelria fe chw 0.4mg-35</i>	151
XACDURO INJ 1-1GM.....	44	XELSTRYM PAD 13.5/9HR.....	14
XACIATO GEL 2%.....	287	XELSTRYM PAD 18MG/9HR.....	14
XADAGO TAB 100MG.....	121	XELSTRYM PAD 9MG/9HR.....	14
XADAGO TAB 50MG.....	121	XENAZINE TAB 12.5MG.....	268
XALATAN SOL 0.005%.....	260	XENAZINE TAB 25MG.....	268
XALKORI CAP 150MG.....	115	XENICAL CAP 120MG.....	15
XALKORI CAP 200MG.....	115	XENPOZYME INJ 4MG.....	190

XENPOZYME SOL 20MG.....	190	XOLAIR SOL 150MG	52
XEOMIN INJ 100UNIT	252	XOLEGEL GEL 2%.....	162
XEOMIN INJ 200UNIT	252	XOLREMDI CAP 100MG.....	212
XEOMIN INJ 50 UNIT	252	XOPENEX HFA AER.....	56
XERAC-AC SOL 6.25%	172	XOSPATA TAB 40MG	115
XERALUX CRE.....	172	XPHOZAH TAB 20MG.....	190
XERAVA INJ 100MG.....	274	XPHOZAH TAB 30MG.....	190
XERAVA INJ 50MG	274	XPOVIO PAK 40MG.....	108
XERESE CRE 5-1%.....	166	XPOVIO PAK 50MG.....	108
XERMELO TAB 250MG.....	199	XPOVIO PAK 60MG.....	109
XEROFORM OCL PAD 1X8	176	XPOVIO PAK 80MG.....	109
XEROFORM OCL PAD 4	176	XPRESS TES BLD GLUC.....	181
XEROFORM OIL MIS 1.....	176	XTAMPZA ER CAP 13.5MG.....	38
XEROFORM OIL MIS ROLL 4X9.....	176	XTAMPZA ER CAP 18MG	38
XEROFORM OIL PAD 2	176	XTAMPZA ER CAP 27MG	38
XEROFORM PET PAD 4X4 DRES	176	XTAMPZA ER CAP 36MG	38
XEROFORM PET PAD 5X9 DRES.....	176	XTAMPZA ER CAP 9MG	38
XEROFRM GAUZ MIS 1.....	176	XTANDI CAP 40MG.....	108
XEROFRM GAUZ MIS 5.....	176	XTANDI TAB 40MG	108
XEROFRM GAUZ PAD 5.....	176	XTANDI TAB 80MG	108
XEROFRM PETR PAD 2.....	176	<i>xulane dis 150-35</i>	151
XEROFRM PETR PAD 4.....	176	XULTOPHY INJ 100/3.6.....	75
XEROFRM ROLL MIS 4	176	XURIDEN POW 2GM	190
XGEVA INJ.....	185	XYLO/EPI 1%- INJ 1:100000	217
XHANCE MIS 93MCG	251	XYLO/EPI INJ 0.5%.....	217
XIAFLEX INJ 0.9MG	239	XYLO/EPI INJ 2%	217
XIFAXAN TAB 200MG	43	XYLOCAINE INJ 0.5%.....	218
XIFAXAN TAB 550MG	43	XYLOCAINE INJ 1%	218
XIGDUO XR TAB 10-1000	75	XYLOCAINE INJ 2%	218
XIGDUO XR TAB 10-500MG	75	XYLOCAINE INJ MPF 0.5%.....	218
XIGDUO XR TAB 2.5-1000.....	75	XYLOCAINE INJ -MPF 1%	218
XIGDUO XR TAB 5-1000MG	75	XYLOCAINE INJ MPF 1.5%.....	218
XIGDUO XR TAB 5-500MG	75	XYLOCAINE INJ -MPF 2%.....	218
XIIDRA DRO 5%	257	XYLO-MPF/EPI INJ 1%	217
XIMINO CAP 135MG ER.....	276	XYLO-MPF/EPI INJ 1.5%	217
XIMINO CAP 45MG ER	276	XYLO-MPF/EPI INJ 2%.....	217
XIMINO CAP 90MG ER	276	XYNTHA INJ 1000UNIT	206
XIPERE SUS 40MG/ML.....	258	XYNTHA INJ 2000UNIT.....	206
XOFIGO INJ 1100KBQ	115	XYNTHA INJ 250UNIT	206
XOFLUZA TAB 20MG.....	133	XYNTHA INJ 500UNIT	206
XOFLUZA TAB 40MG.....	133	XYNTHA SOLOF INJ 1000UNIT	206
XOLAIR INJ 150MG/ML.....	52	XYNTHA SOLOF INJ 2000UNIT	206
XOLAIR INJ 300/2ML.....	52	XYNTHA SOLOF INJ 3000UNIT	206
XOLAIR INJ 75/0.5.....	52	XYNTHA SOLOF INJ 500UNIT	206

XYNTHA SOLOF KIT 250UNIT	206
XYOSTED INJ 100/0.5	42
XYOSTED INJ 50/0.5ML	42
XYOSTED INJ 75/0.5ML	42
XYREM SOL 500MG/ML	266
XYWAV SOL 0.5GM/ML	266

Y

<i>yargesa cap 100mg</i>	209
YASMIN 28 TAB 3-0.03MG	151
YAZ TAB 3-0.02MG	151
YERVOY INJ 200/40ML	106
YERVOY INJ 50/10ML	106
YESCARTA INJ	106
YESINTEK INJ 130/26ML	198
YESINTEK INJ 45/0.5ML	166
YESINTEK INJ 90MG/ML	166
YF-VAX INJ	287
<i>yl folic aci tab 400mcg</i>	209
YONDELIS INJ 1MG	102
YONSA TAB 125MG	108
YOSPRALA TAB 325-40MG	208
YOSPRALA TAB 81-40MG	208
YUFLYMA 1PEN KIT 80/0.8ML	24
YUPELRI SOL	52
YUSIMRY INJ 40/0.8ML	24
YUTIQ IMP 0.18MG	258
YUTREPIA CAP 106MCG	143
YUTREPIA CAP 26.5MCG	143
YUTREPIA CAP 53MCG	143
YUTREPIA CAP 79.5MCG	143
<i>yuvaferm tab 10mcg</i>	287

Z

ZACLIR LOT 8%	160
<i>zafemy dis 150/35</i>	151
<i>zafirlukast tab 10 mg</i>	53
<i>zafirlukast tab 20 mg</i>	53
<i>zaleplon cap 10 mg</i>	215
<i>zaleplon cap 5 mg</i>	215
ZALTRAP INJ 100/4ML	104
ZALTRAP INJ 200/8ML	104
ZANABIN GEL HYDROGEL	176
ZANAFLEX TAB 4MG	249
ZARONTIN CAP 250MG	67
ZARONTIN SOL 250/5ML	67

ZARXIO INJ 300/0.5	211
ZARXIO INJ 480/0.8	211
ZATEAN-PN CAP DHA	248
ZATEAN-PN CAP PLUS	248
ZAVESCA CAP 100MG	209
<i>zebutal cap</i>	31
ZEGALOGUE INJ 0.6/0.6	76
ZEGERID CAP 20-1100	284
ZEGERID CAP 40-1100	284
ZEGERID POW 20-1680	284
ZEGERID POW 40-1680	284
ZEJULA TAB 100MG	115
ZEJULA TAB 200MG	115
ZEJULA TAB 300MG	115
ZELAPAR TAB 1.25MG	121
ZELBORAF TAB 240MG	115
ZELNORM TAB 6MG	198
ZEMAIRA INJ 1000MG	273
ZEMAIRA INJ 4000MG	273
ZEMAIRA INJ 5000MG	273
ZEMBRACE SYM INJ 3/0.5ML	233
ZEMDRI INJ 500MG/10	20
ZEMPLAR CAP 1MCG	190
ZEMPLAR CAP 2MCG	190
ZEMPLAR INJ 2MCG/ML	190
ZEMPLAR INJ 5MCG/ML	190
<i>zenatane cap 10mg</i>	160
<i>zenatane cap 20mg</i>	160
<i>zenatane cap 30mg</i>	160
<i>zenatane cap 40mg</i>	160
ZENIFIBER AG PAD 2	176
ZENIFIBER AG PAD 4	176
ZENIFIBER AG PAD 6	176
ZENIFIBER AG PAD 8	176
ZENIFOAM AG PAD 2	176
ZENIFOAM AG PAD 4	176
ZENPEP CAP 10000UNT	182
ZENPEP CAP 15000UNT	182
ZENPEP CAP 20000UNT	182
ZENPEP CAP 25000UNT	182
ZENPEP CAP 3000UNIT	181
ZENPEP CAP 40000UNT	182
ZENPEP CAP 5000UNIT	181
ZENPEP CAP 60000UNT	182

<i>zenzedi tab 10mg</i>	14	ZINC SULFATE INJ 5MG/ML	238
<i>zenzedi tab 15mg</i>	14	ZINPLAVA SOL 25MG/ML.....	263
<i>zenzedi tab 2.5mg</i>	14	ZINTREXYL-C TAB.....	244
<i>zenzedi tab 20mg</i>	14	ZIOPTAN DRO 0.0015%	260
<i>zenzedi tab 30mg</i>	14	<i>ziprasidone hcl cap 20 mg</i>	122
<i>zenzedi tab 5mg</i>	14	<i>ziprasidone hcl cap 40 mg</i>	122
<i>zenzedi tab 7.5mg</i>	14	<i>ziprasidone hcl cap 60 mg</i>	122
ZEPATIER TAB 50-100MG	132	<i>ziprasidone hcl cap 80 mg</i>	122
ZEPOSIA 7DAY CAP STR PACK	270	<i>ziprasidone mesylate for inj 20 mg (base</i> <i>equivalent)</i>	122
ZEPOSIA CAP 0.92MG.....	270	ZIPSOR CAP 25MG.....	29
ZERBAXA INJ 1.5GM	144	ZIRABEV INJ 100/4ML.....	104
<i>zeruvia pad 4-1%</i>	171	ZIRABEV INJ 400/16ML.....	104
ZERVIAE DRO 0.24%	260	ZIRGAN GEL 0.15%.....	256
ZESTORETIC TAB 10-12.5.....	98	ZITHROMAX INJ 500MG.....	219
ZESTORETIC TAB 20-12.5	98	ZITHROMAX POW 1GM PAK.....	219
ZESTORETIC TAB 20-25MG	98	ZITHROMAX SUS 100/5ML	219
ZESTRIL TAB 10MG	92	ZITHROMAX SUS 200/5ML	219
ZESTRIL TAB 2.5MG	92	ZITHROMAX TAB 250MG.....	219
ZESTRIL TAB 20MG	92	ZITHROMAX TAB 500MG	219
ZESTRIL TAB 30MG	92	ZITHROMAX TAB TRI-PAK.....	219
ZESTRIL TAB 40MG	92	ZITHROMAX TAB Z-PAK	219
ZESTRIL TAB 5MG.....	92	ZITUVIMET TAB 50-1000	75
ZETIA TAB 10MG	90	ZITUVIMET TAB 50-500MG.....	75
ZETONNA AER 37MCG.....	251	ZITUVIMET XR TAB 100-1000.....	76
ZEVALIN KIT Y-90	106	ZITUVIMET XR TAB 50-1000	76
ZEVRX TWIST MIS LANC 30G	230	ZITUVIMET XR TAB 50-500MG.....	75
ZIAGEN SOL 20MG/ML	131	ZITUVIO TAB 100MG	77
ZIANA GEL	160	ZITUVIO TAB 25MG	77
<i>zidovudine cap 100 mg</i>	131	ZITUVIO TAB 50MG.....	77
<i>zidovudine syrup 10 mg/ml</i>	131	ZOCOR TAB 10MG.....	90
<i>zidovudine tab 300 mg</i>	131	ZOCOR TAB 20MG	90
ZILBRYSQ INJ 16.6MG.....	207	ZOCOR TAB 40MG.....	90
ZILBRYSQ INJ 23MG.....	207	ZOHYDRO ER CAP 10MG	38
ZILBRYSQ INJ 32.4MG	207	ZOHYDRO ER CAP 15MG.....	38
<i>zileuton tab er 12hr 600 mg</i>	53	ZOHYDRO ER CAP 20MG.....	38
ZILRETTA INJ 32MG	156	ZOHYDRO ER CAP 30MG.....	38
ZIMHI SOL	82	ZOHYDRO ER CAP 40MG.....	38
ZINC CHLORID INJ 1MG/ML	238	ZOHYDRO ER CAP 50MG.....	38
<i>zinc chloride inj 1 mg/ml</i>	238	ZOKINVY CAP 50MG	242
<i>zinc sulfate inj 1 mg/ml</i>	238	ZOKINVY CAP 75MG.....	242
ZINC SULFATE INJ 1MG/ML	238	ZOLADEX IMP 10.8MG	108
<i>zinc sulfate inj 3 mg/ml</i>	238	ZOLADEX IMP 3.6MG	108
ZINC SULFATE INJ 3MG/ML	238		
<i>zinc sulfate inj 5 mg/ml</i>	238		

<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	185	ZORYVE CRE 0.15%.....	172
<i>zoledronic acid iv soln 5 mg/100ml</i>	185	ZORYVE CRE 0.3%	172
ZOLEDRONIC INJ 4/100ML.....	185	ZORYVE MIS 0.3%.....	173
ZOLINZA CAP 100MG.....	115	ZOSYN SOL 2-0.25GM.....	265
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	233	ZOSYN SOL 3-0.375G.....	265
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	233	ZOSYN SOL 4-0.5GM.....	265
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	233	<i>zovia 1/35 tab</i>	151
<i>zolmitriptan orally disintegrating tab 5 mg</i>	233	ZOVIRAX CRE 5%.....	166
<i>zolmitriptan tab 2.5 mg</i>	233	ZOVIRAX OIN 5%.....	166
<i>zolmitriptan tab 5 mg</i>	233	ZTLIDO PAD 1.8%	171
ZOLOFT CON 20MG/ML	70	ZUBSOLV SUB 0.7-0.18.....	41
ZOLOFT TAB 100MG.....	70	ZUBSOLV SUB 1.4-0.36.....	41
ZOLOFT TAB 25MG.....	70	ZUBSOLV SUB 11.4-2.9.....	41
ZOLOFT TAB 50MG	70	ZUBSOLV SUB 2.9-0.71.....	41
<i>zolpidem tartrate sl tab 1.75 mg</i>	215	ZUBSOLV SUB 5.7-1.4	41
<i>zolpidem tartrate sl tab 3.5 mg</i>	215	ZUBSOLV SUB 8.6-2.1	41
<i>zolpidem tartrate tab 10 mg</i>	215	<i>zumandimine tab 3-0.03mg</i>	151
<i>zolpidem tartrate tab 5 mg</i>	215	ZUNVEYL TAB 10MG	267
<i>zolpidem tartrate tab er 12.5 mg</i>	215	ZUNVEYL TAB 15MG	267
<i>zolpidem tartrate tab er 6.25 mg</i>	215	ZUNVEYL TAB 5MG.....	267
ZOLPIMIST SPR 5MG.....	215	ZURZUVAE CAP 20MG	68
ZOMACTON INJ 10MG	187	ZURZUVAE CAP 25MG.....	68
ZOMACTON INJ 5MG.....	187	ZURZUVAE CAP 30MG	68
ZOMIG SPR 2.5MG	233	ZYCLARA CRE 3.75%.....	170
ZOMIG SPR 5MG	233	ZYCLARA PUMP CRE 2.5%	170
<i>zomig tab 2.5mg</i>	233	ZYCLARA PUMP CRE 3.75%.....	170
<i>zomig tab 5mg</i>	233	ZYDELIG TAB 100MG	115
ZONALON CRE 5%.....	163	ZYDELIG TAB 150MG	115
ZONEGRAN CAP 100MG.....	66	ZYFLO TAB 600MG	53
ZONEGRAN CAP 25MG.....	66	ZYKADIA TAB 150MG	115
<i>zonisamide cap 100 mg</i>	66	ZYLET SUS 0.5-0.3%.....	258
<i>zonisamide cap 25 mg</i>	66	ZYMFENTRA INJ 120MG/ML	198
<i>zonisamide cap 50 mg</i>	66	ZYNLONTA SOL 10MG.....	106
ZONTIVITY TAB 2.08MG	208	ZYNRELEF INJ 200-6MG.....	29
ZORTRESS TAB 0.25MG	241	ZYPITAMAG TAB 1MG	90
ZORTRESS TAB 0.5MG.....	241	ZYPITAMAG TAB 2MG.....	90
ZORTRESS TAB 0.75MG	241	ZYPITAMAG TAB 4MG.....	90
ZORTRESS TAB 1MG.....	241	ZYPREXA INJ 10MG	125
ZORVOLEX CAP 18MG.....	29	ZYPREXA TAB 2.5MG	125
ZORVOLEX CAP 35MG.....	29	ZYPREXA TAB 20MG	125
		ZYPREXA TAB 5MG.....	125
		ZYTIGA TAB 250MG.....	108
		ZYTIGA TAB 500MG	108
		ZYVOX SOL 2MG/ML.....	47

ZYVOX SUS 100MG/5M 47

ZYVOX TAB 600MG 47