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2023 List of Covered Drugs for HMSA Metallic Prescription Formulary

Effective 10/01/2023

**PLEASE READ: THIS DOCUMENT HAS INFORMATION ABOUT THE DRUGS WE
COVER IN THIS PLAN.**

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INTRODUCTION

HMSA's Metallic Prescription Formulary for members enrolled in HMSA's Affordable Care Act health plans for Individuals and Small Employer groups. This formulary is compliant with Essential Health Benefit (EHB) requirements while aiming to help keep health care affordable, while maintaining a patient's health and safety, and providing quality care.

HMSA Metallic Prescription Formulary is a managed formulary. Drugs listed on this formulary are considered covered benefits.

Consistent with the principles of this formulary, the HMSA Pharmacy & Therapeutics (P&T) Committee reviews new drugs to assess their safety and effectiveness before they're added to the formulary. The HMSA P&T Committee is comprised of practicing physicians and pharmacists from the community.

In addition to new drugs, the HMSA P&T Committee and HMSA staff continually review the formulary. The formulary approval process helps to ensure that clinical evidence and medical value are considered before cost. If drugs in a treatment class are clinically comparable, the committee will assess cost-effectiveness and choose agents with the best value.

PREFACE

The document is organized in sections that are divided into therapeutic drug classes primarily defined by mechanism of action.

Therapeutic drug class description does not indicate coverage. Please refer to your plan benefit.

Tier level and coverage criteria (if applicable) are noted next to each drug.

Tier	Definition
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Tier 0	Zero (\$0) Copay
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Tier 1	mostly Generic Drugs
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Tier 2	mostly Preferred Drugs
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Tier 3	mostly Other Brand Name Drugs
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Tier 4	mostly Preferred Specialty Drugs
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Tier	Definition
Tier 5*	mostly Other Brand Name Specialty Drugs
DS	Diabetic Supplies
OC	Oral Chemotherapy – refer to plan benefits

*If applicable to your plan benefits

Please refer to your Plan's Prescription Drug Rider for the specific copayment or coinsurance amount associated with each tier or category.

ABBREVIATIONS USED IN THIS FORMULARY

TERM	DEFINITION
ACA	USPSTF recommended drugs covered at \$0.
AGE	Age Limit: age requirements for coverage of drug.
Lowercase	Indicates generic drug.
PA	Prior Authorization: Requires that you or your physician receive approval from HMSA before we will cover your prescription.
QL	Quantity Limit: A limit on the amount of the drug that HMSA will cover.
SP	Specialty drug with network requirements: Must fill prescription at a specialty pharmacy; 30-day supply limit.
ST	Step Therapy: Requires you to first try certain drugs to treat your medical condition before we'll cover another drug for that condition.
UPPERCASE	Indicates brand name drug.
\$0	Zero (\$0) Copay: When obtained from a participating provider, HMSA pays 100% of eligible charge. You owe no copayment.

EXCEPTION REQUEST

Drugs listed on this formulary are considered covered benefits. Certain medications on the list are covered if utilization management criteria are met (i.e., Step Therapy, Prior Authorization, Quantity Limits, etc.); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity. If a medication is not listed on the document, a formulary exception may be requested for coverage. Medical necessity or formulary exception requests will be reviewed based on drug-specific prior authorization criteria or standard non-formulary prescription request criteria.

To request a prior authorization or an exception, Providers please call or fax CVS Caremark®, HMSA's Pharmacy Benefit Manager.

CALL:

Commercial 1 (855) 240-0543 toll-free

FAX:

Commercial 1 (855) 762-5207 toll-free

This drug list is subject to change and drugs may be added or removed without notice. Please contact HMA to confirm your drug plan coverage. This list is effective October 1, 2023.

DRUG COVERAGE INFORMATION

The status of a drug on this list is current as of the date of this publication.

The list serves as a guide to product selection for our providers and members. The list is subject to change. Participating pharmacies have the most up-to-date formulary information at the time prescriptions are filled. New drugs, strengths, forms, and/or therapeutic categories will be reflected in the formulary, as applicable, following the completion of HMA's review process.

Not all generic drugs may be listed.

Coverage of a drug will depend on your drug plan.

HMA's mission is to provide the people of Hawaii access to a sustainable, quality health care system that improves the overall health and well-being of our state.

HMSA CENTERS

Convenient evening and Saturday hours:

HMSA Center @ Honolulu

818 Keeaumoku St.
Monday through Friday, 8am – 6pm
Saturday, 9am – 2pm

HMSA Center @ Pearl City

Pearl City Gateway
1132 Kuala St., Suite 400
Monday through Friday, 9am – 7pm
Saturday, 9am – 2pm

HMSA Center @ Hilo

Waiakea Center
303A E. Makaala St.
Monday through Friday, 9am – 7pm
Saturday, 9am – 2pm

HMSA Center @ Kahului

Puunene Shopping Center
70 Ho'okele St., Suite 1200
Monday through Friday, 9am – 7pm
Saturday, 9am – 2pm

HMSA OFFICES

Visit your local HMSA office Monday through Friday, 8am – 4pm:

Lihue, Kauai

4366 Kukui Grove St., Suite 103
Phone: 808-245-3393

PHONE

808-948-6079 on Oahu

Toll-free 1 (800) 776-4672

Check hmsa.com/contact for our holiday schedule and COVID-19 safety guidelines.

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

ADDERALL XR CAP 5MG	3	QL (360 caps/30 days)
ADDERALL XR CAP 10MG	3	QL (180 caps/30 days)
ADDERALL XR CAP 15MG	3	QL (120 caps/30 days)
ADDERALL XR CAP 20MG	3	QL (90 caps/30 days)
ADDERALL XR CAP 25MG	3	QL (60 caps/30 days)
ADDERALL XR CAP 30MG	3	QL (60 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (360 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (180 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (120 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (90 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (60 caps/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (60 caps/30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	QL (360 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	QL (240 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	QL (180 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	QL (135 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	QL (120 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	QL (90 tabs/30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	QL (60 tabs/30 days)
DEXEDRINE CAP 5MG CR	3	QL (360 caps/30 days)
DEXEDRINE CAP 10MG CR	3	QL (180 caps/30 days)
DEXEDRINE CAP 15MG CR	3	QL (120 caps/30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	QL (360 caps/30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL (180 caps/30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL (120 caps/30 days)
<i>dextroamphetamine sulfate tab 2.5 mg</i>	1	QL (480 tabs/30 days)
<i>dextroamphetamine sulfate tab 5 mg</i>	1	QL (360 tabs/30 days)
<i>dextroamphetamine sulfate tab 7.5 mg</i>	1	QL (150 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
dextroamphetamine sulfate tab 10 mg	1	QL (180 tabs/30 days)
dextroamphetamine sulfate tab 15 mg	1	QL (60 tabs/30 days)
dextroamphetamine sulfate tab 20 mg	1	QL (60 tabs/30 days)
dextroamphetamine sulfate tab 30 mg	1	QL (30 tabs/30 days)
methamphetamine hcl tab 5 mg	1	QL (150 tabs/30 days)
VYVANSE CAP 10MG	3	QL (60 caps/30 days)
VYVANSE CAP 20MG	3	QL (60 caps/30 days)
VYVANSE CAP 30MG	3	QL (60 caps/30 days)
VYVANSE CAP 40MG	3	QL (30 caps/30 days)
VYVANSE CAP 50MG	3	QL (30 caps/30 days)
VYVANSE CAP 60MG	3	QL (30 caps/30 days)
VYVANSE CAP 70MG	3	QL (30 caps/30 days)

ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

atomoxetine hcl cap 10 mg (base equiv)	1	QL (120 caps/30 days)
atomoxetine hcl cap 18 mg (base equiv)	1	QL (120 caps/30 days)
atomoxetine hcl cap 25 mg (base equiv)	1	QL (120 caps/30 days)
atomoxetine hcl cap 40 mg (base equiv)	1	QL (60 caps/30 days)
atomoxetine hcl cap 60 mg (base equiv)	1	QL (30 caps/30 days)
atomoxetine hcl cap 80 mg (base equiv)	1	QL (30 caps/30 days)
atomoxetine hcl cap 100 mg (base equiv)	1	QL (30 caps/30 days)
clonidine hcl tab er 12hr 0.1 mg	1	
guanfacine hcl tab er 24hr 1 mg (base equiv)	1	
guanfacine hcl tab er 24hr 2 mg (base equiv)	1	
guanfacine hcl tab er 24hr 3 mg (base equiv)	1	
guanfacine hcl tab er 24hr 4 mg (base equiv)	1	

DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS**(DNRIS)**

SUNOSI TAB 75MG	4	SP, PA
SUNOSI TAB 150MG	4	SP, PA

HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS

WAKIX TAB 4.45MG	4	SP, PA
WAKIX TAB 17.8MG	4	SP, PA

STIMULANTS - MISC.

armodafinil tab 50 mg	1	PA
armodafinil tab 150 mg	1	PA
armodafinil tab 200 mg	1	PA
armodafinil tab 250 mg	1	PA
DAYTRANA DIS 10MG/9HR	3	QL (30 patches/30 days)
DAYTRANA DIS 15MG/9HR	3	QL (30 patches/30 days)
DAYTRANA DIS 20MG/9HR	3	QL (30 patches/30 days)
DAYTRANA DIS 30MG/9HR	3	QL (30 patches/30 days)

Drug Name	Drug Tier	Requirements/Limits
dexmethylphenidate hcl cap er 24 hr 5 mg	1	QL (300 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 10 mg	1	QL (150 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 15 mg	1	QL (90 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 20 mg	1	QL (60 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 25 mg	1	QL (60 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 30 mg	1	QL (30 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 35 mg	1	QL (30 caps/30 days)
dexmethylphenidate hcl cap er 24 hr 40 mg	1	QL (30 caps/30 days)
dexmethylphenidate hcl tab 2.5 mg	1	QL (600 tabs/30 days)
dexmethylphenidate hcl tab 5 mg	1	QL (300 tabs/30 days)
dexmethylphenidate hcl tab 10 mg	1	QL (150 tabs/30 days)
FOCALIN TAB 2.5MG	3	QL (600 tabs/30 days)
FOCALIN TAB 5MG	3	QL (300 tabs/30 days)
FOCALIN TAB 10MG	3	QL (150 tabs/30 days)
METHYLIN SOL 5MG/5ML	3	QL (3000 mL/30 days)
METHYLIN SOL 10MG/5ML	3	QL (1500 mL/30 days)
methylphenidate hcl cap er 10 mg (cd)	1	QL (300 caps/30 days)
methylphenidate hcl cap er 20 mg (cd)	1	QL (150 caps/30 days)
methylphenidate hcl cap er 24hr 10 mg (la)	1	QL (300 caps/30 days)
methylphenidate hcl cap er 24hr 10 mg (xr)	1	QL (180 caps/30 days)
methylphenidate hcl cap er 24hr 15 mg (xr)	1	QL (120 caps/30 days)
methylphenidate hcl cap er 24hr 20 mg (la)	1	QL (150 caps/30 days)
methylphenidate hcl cap er 24hr 20 mg (xr)	1	QL (90 caps/30 days)
methylphenidate hcl cap er 24hr 30 mg (la)	1	QL (90 caps/30 days)
methylphenidate hcl cap er 24hr 30 mg (xr)	1	QL (60 caps/30 days)
methylphenidate hcl cap er 24hr 40 mg (la)	1	QL (60 caps/30 days)
methylphenidate hcl cap er 24hr 40 mg (xr)	1	QL (30 caps/30 days)
methylphenidate hcl cap er 24hr 50 mg (xr)	1	QL (30 caps/30 days)
methylphenidate hcl cap er 24hr 60 mg (xr)	1	QL (30 caps/30 days)

Drug Name	Drug Tier	Requirements/Limits
methylphenidate hcl cap er 30 mg (cd)	1	QL (90 caps/30 days)
methylphenidate hcl cap er 40 mg (cd)	1	QL (60 caps/30 days)
methylphenidate hcl cap er 50 mg (cd)	1	QL (60 caps/30 days)
methylphenidate hcl cap er 60 mg (cd)	1	QL (30 caps/30 days)
methylphenidate hcl soln 5 mg/5ml	1	QL (3000 mL/30 days)
methylphenidate hcl soln 10 mg/5ml	1	QL (1500 mL/30 days)
methylphenidate hcl tab 5 mg	1	QL (600 tabs/30 days)
methylphenidate hcl tab 10 mg	1	QL (300 tabs/30 days)
methylphenidate hcl tab 20 mg	1	QL (150 tabs/30 days)
methylphenidate hcl tab er 10 mg	1	QL (300 tabs/30 days)
methylphenidate hcl tab er 20 mg	1	QL (150 tabs/30 days)
methylphenidate hcl tab er 24hr 18 mg	1	QL (180 tabs/30 days)
methylphenidate hcl tab er 24hr 27 mg	1	QL (120 tabs/30 days)
methylphenidate hcl tab er 24hr 36 mg	1	QL (90 tabs/30 days)
methylphenidate hcl tab er 24hr 54 mg	1	QL (60 tabs/30 days)
methylphenidate hcl tab er osmotic release (osm) 18 mg	1	QL (180 tabs/30 days)
methylphenidate hcl tab er osmotic release (osm) 27 mg	1	QL (120 tabs/30 days)
methylphenidate hcl tab er osmotic release (osm) 36 mg	1	QL (90 tabs/30 days)
methylphenidate hcl tab er osmotic release (osm) 54 mg	1	QL (60 tabs/30 days)
methylphenidate td patch 10 mg/9hr	1	QL (30 patches/30 days)
methylphenidate td patch 15 mg/9hr	1	QL (30 patches/30 days)
methylphenidate td patch 20 mg/9hr	1	QL (30 patches/30 days)
methylphenidate td patch 30 mg/9hr	1	QL (30 patches/30 days)
modafinil tab 100 mg	1	PA
modafinil tab 200 mg	1	PA
QUILLIVANT SUS 25MG/5ML	3	QL (360 mL/30 days)
RITALIN LA CAP 10MG	3	QL (300 caps/30 days)
RITALIN LA CAP 20MG	3	QL (150 caps/30 days)
RITALIN LA CAP 30MG	3	QL (90 caps/30 days)
RITALIN LA CAP 40MG	3	QL (60 caps/30 days)
RITALIN TAB 5MG	3	QL (600 tabs/30 days)
RITALIN TAB 10MG	3	QL (300 tabs/30 days)
RITALIN TAB 20MG	3	QL (150 tabs/30 days)

ALLERGENIC EXTRACTS/BIOLOGICALS MISC**ALLERGENIC EXTRACTS**

ORALAIR SUB 300 IR	3
PALFORZIA CAP ESCALAT	5 SP, PA
PALFORZIA CAP LEVEL 1	5 SP, PA
PALFORZIA CAP LEVEL 2	5 SP, PA
PALFORZIA CAP LEVEL 3	5 SP, PA
PALFORZIA CAP LEVEL 4	5 SP, PA

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA CAP LEVEL 5	5	SP, PA
PALFORZIA CAP LEVEL 6	5	SP, PA
PALFORZIA CAP LEVEL 7	5	SP, PA
PALFORZIA CAP LEVEL 8	5	SP, PA
PALFORZIA CAP LEVEL 9	5	SP, PA
PALFORZIA CAP LEVEL 10	5	SP, PA
PALFORZIA POW LEVEL 11	5	SP, PA

AMINOGLYCOSIDES**AMINOGLYCOSIDES**

BETHKIS NEB 300/4ML	5	SP, PA
KITABIS PAK NEB 300/5ML	5	SP, PA
<i>neomycin sulfate tab 500 mg</i>	1	
TOBI NEB 300/5ML	5	SP, PA
TOBI PODHALR CAP 28MG	5	SP, PA
<i>tobramycin nebu soln 300 mg/4ml</i>	4	SP, PA
<i>tobramycin nebu soln 300 mg/5ml</i>	4	SP, PA

ANALGESICS - ANTI-INFLAMMATORY**ANTIRHEUMATIC - ENZYME INHIBITORS**

OLUMIANT TAB 1MG	5	SP, PA
OLUMIANT TAB 2MG	5	SP, PA
RINVOQ TAB 15MG ER	4	SP, PA
RINVOQ TAB 30MG ER	4	SP, PA
RINVOQ TAB 45MG ER	4	SP, PA
XELJANZ SOL 1MG/ML	4	SP, PA
XELJANZ TAB 5MG	4	SP, PA
XELJANZ TAB 10MG	4	SP, PA
XELJANZ XR TAB 11MG	4	SP, PA
XELJANZ XR TAB 22MG	4	SP, PA

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

ARTHROTEC 50 TAB	3	
ARTHROTEC 75 TAB	3	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
DICLOFENAC CAP 35MG	3	
<i>diclofenac potassium cap 25 mg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<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 tab 600 mg</i>	1	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</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>INDOCIN SUP 50MG</i>	3	
<i>indomethacin cap 20 mg</i>	1	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>ketoprofen cap 50 mg</i>	1	
<i>ketoprofen cap 75 mg</i>	1	
<i>ketoprofen cap er 24hr 200 mg</i>	1	
<i>KETOR TROMET SPR 15.75MG</i>	3	PA
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	1	
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>MOBIC TAB 7.5MG</i>	3	
<i>MOBIC TAB 15MG</i>	3	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>NAPRELAN TAB 375MG CR</i>	3	
<i>NAPRELAN TAB 750MG CR</i>	3	
<i>NAPROSYN TAB 500MG</i>	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>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 750 mg (base equiv)</i>	1	
<i>naproxen susp 125 mg/5ml</i>	1	
<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>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
<i>SPRIX SPR 15.75MG</i>	3	PA
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
<i>ZIPSOR CAP 25MG</i>	3	
<i>ZORVOLEX CAP 18MG</i>	3	
<i>ZORVOLEX CAP 35MG</i>	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>OTEZLA TAB 10/20/30</i>	4	SP, PA
<i>OTEZLA TAB 30MG</i>	4	SP, PA
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>ARAVA TAB 10MG</i>	3	
<i>ARAVA TAB 20MG</i>	3	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
<i>butalbital-acetaminophen tab 50-300 mg</i>	1	QL (360 tabs/30 days)
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL (360 tabs/30 days)
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	QL (390 caps/30 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL (360 caps/30 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL (360 tabs/30 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL (360 caps/30 days)
<i>FIORICET CAP</i>	3	QL (390 caps/30 days)
SALICYLATES		
<i>aspirin chewable 81mg</i>	0	QL (100 tabs per fill); (Females 12-59 years)

Drug Name	Drug Tier	Requirements/Limits
aspirin enteric coated 81mg	0	QL (100 tabs per fill); (Females 12-59 years)
diflunisal tab 500 mg	1	

ANALGESICS - OPIOID**OPIOID AGONISTS**

codeine sulfate tab 30 mg	1	QL (360 tabs/30 days)
DILAUDID TAB 2MG	3	QL (360 tabs/30 days)
DILAUDID TAB 4MG	3	QL (180 tabs/30 days)
DILAUDID TAB 8MG	3	QL (180 tabs/30 days)
fentanyl citrate lozenge on a handle 200 mcg	1	PA, QL (120 ea/30 days)
fentanyl citrate lozenge on a handle 400 mcg	1	PA, QL (120 ea/30 days)
fentanyl citrate lozenge on a handle 600 mcg	1	PA, QL (120 ea/30 days)
fentanyl citrate lozenge on a handle 800 mcg	1	PA, QL (120 ea/30 days)
fentanyl citrate lozenge on a handle 1200 mcg	1	PA, QL (120 ea/30 days)
fentanyl citrate lozenge on a handle 1600 mcg	1	PA, QL (120 ea/30 days)
fentanyl td patch 72hr 12 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 25 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 37.5 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 50 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 62.5 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 75 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 87.5 mcg/hr	1	QL (15 patches/30 days)
fentanyl td patch 72hr 100 mcg/hr	1	QL (15 patches/30 days)
hydrocodone bitartrate cap er 12hr 10 mg	1	QL (120 caps/30 days)
hydrocodone bitartrate cap er 12hr 15 mg	1	QL (120 caps/30 days)
hydrocodone bitartrate cap er 12hr 20 mg	1	QL (120 caps/30 days)
hydrocodone bitartrate cap er 12hr 30 mg	1	QL (60 caps/30 days)
hydrocodone bitartrate cap er 12hr 40 mg	1	QL (60 caps/30 days)
hydrocodone bitartrate cap er 12hr 50 mg	1	QL (60 caps/30 days)
hydrocodone bitartrate tab er 24hr deter 20 mg	1	QL (30 tabs/30 days)
hydrocodone bitartrate tab er 24hr deter 30 mg	1	QL (30 tabs/30 days)
hydrocodone bitartrate tab er 24hr deter 40 mg	1	QL (30 tabs/30 days)
hydrocodone bitartrate tab er 24hr deter 60 mg	1	QL (30 tabs/30 days)
hydrocodone bitartrate tab er 24hr deter 80 mg	1	QL (30 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
hydrocodone bitartrate tab er 24hr deter 100 mg	1	QL (30 tabs/30 days)
hydrocodone bitartrate tab er 24hr deter 120 mg	1	QL (30 tabs/30 days)
hydromorphone hcl tab 2 mg	1	QL (360 tabs/30 days)
hydromorphone hcl tab 4 mg	1	QL (180 tabs/30 days)
hydromorphone hcl tab 8 mg	1	QL (180 tabs/30 days)
hydromorphone hcl tab er 24hr 8 mg	1	QL (30 tabs/30 days)
hydromorphone hcl tab er 24hr 12 mg	1	QL (30 tabs/30 days)
hydromorphone hcl tab er 24hr 16 mg	1	QL (30 tabs/30 days)
hydromorphone hcl tab er 24hr 32 mg	1	QL (30 tabs/30 days)
HYSINGLA ER TAB 20 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 30 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 40 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 60 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 80 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 100 MG	3	QL (30 tabs/30 days)
HYSINGLA ER TAB 120 MG	3	QL (30 tabs/30 days)
meperidine hcl oral soln 50 mg/5ml	1	QL (120 mL/30 days)
meperidine hcl tab 50 mg	1	QL (24 tabs/30 days)
methadone hcl conc 10 mg/ml	1	
methadone hcl soln 5 mg/5ml	1	
methadone hcl soln 10 mg/5ml	1	
methadone hcl tab 5 mg	1	
methadone hcl tab 10 mg	1	
METHADOSE CON 10MG/ML	3	
METHADOSE SF CON 10MG/ML	3	
morphine sulfate beads cap er 24hr 30 mg	1	QL (30 caps/30 days)
morphine sulfate beads cap er 24hr 45 mg	1	QL (30 caps/30 days)
morphine sulfate beads cap er 24hr 60 mg	1	QL (30 caps/30 days)
morphine sulfate beads cap er 24hr 75 mg	1	QL (30 caps/30 days)
morphine sulfate beads cap er 24hr 90 mg	1	QL (30 caps/30 days)
morphine sulfate beads cap er 24hr 120 mg	1	QL (30 caps/30 days)
morphine sulfate cap er 24hr 10 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 20 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 30 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 40 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 50 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 60 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 80 mg	1	QL (60 caps/30 days)
morphine sulfate cap er 24hr 100 mg	1	QL (60 caps/30 days)
morphine sulfate oral soln 10 mg/5ml	1	QL (1800 mL/30 days)
morphine sulfate oral soln 20 mg/5ml	1	QL (900 mL/30 days)

Drug Name	Drug Tier	Requirements/Limits
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	1	QL (180 mL/30 days)
morphine sulfate tab 15 mg	1	QL (180 tabs/30 days)
morphine sulfate tab 30 mg	1	QL (180 tabs/30 days)
morphine sulfate tab er 15 mg	1	QL (90 tabs/30 days)
morphine sulfate tab er 30 mg	1	QL (90 tabs/30 days)
morphine sulfate tab er 60 mg	1	QL (90 tabs/30 days)
morphine sulfate tab er 100 mg	1	QL (90 tabs/30 days)
morphine sulfate tab er 200 mg	1	QL (90 tabs/30 days)
NUCYNTA ER TAB 50MG	3	QL (300 tabs/30 days)
NUCYNTA ER TAB 100MG	3	QL (150 tabs/30 days)
NUCYNTA ER TAB 150MG	3	QL (90 tabs/30 days)
NUCYNTA ER TAB 200MG	3	QL (60 tabs/30 days)
NUCYNTA ER TAB 250MG	3	QL (60 tabs/30 days)
NUCYNTA TAB 50MG	3	QL (360 tabs/30 days)
NUCYNTA TAB 75MG	3	QL (240 tabs/30 days)
NUCYNTA TAB 100MG	3	QL (180 tabs/30 days)
OXYDO TAB 5MG	3	QL (360 tabs/30 days)
oxycodone hcl cap 5 mg	1	QL (360 caps/30 days)
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	1	QL (135 mL/30 days)
oxycodone hcl soln 5 mg/5ml	1	QL (2700 ml/30 days)
oxycodone hcl tab 5 mg	1	QL (360 tabs/30 days)
oxycodone hcl tab 10 mg	1	QL (180 tabs/30 days)
oxycodone hcl tab 15 mg	1	QL (180 tabs/30 days)
oxycodone hcl tab 20 mg	1	QL (180 tabs/30 days)
oxycodone hcl tab 30 mg	1	QL (180 tabs/30 days)
oxycodone hcl tab er 12hr deter 10 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 15 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 20 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 30 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 40 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 60 mg	1	QL (90 tabs/30 days)
oxycodone hcl tab er 12hr deter 80 mg	1	QL (90 tabs/30 days)
OXYCONTIN TAB 10MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 15MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 20MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 30MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 40MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 60MG ER	3	QL (90 tabs/30 days)
OXYCONTIN TAB 80MG ER	3	QL (90 tabs/30 days)
oxymorphone hcl tab 5 mg	1	QL (360 tabs/30 days)
oxymorphone hcl tab 10 mg	1	QL (360 tabs/30 days)
oxymorphone hcl tab er 12hr 5 mg	1	QL (60 tabs/30 days)
oxymorphone hcl tab er 12hr 7.5 mg	1	QL (60 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
oxymorphone hcl tab er 12hr 10 mg	1	QL (60 tabs/30 days)
oxymorphone hcl tab er 12hr 15 mg	1	QL (60 tabs/30 days)
oxymorphone hcl tab er 12hr 20 mg	1	QL (60 tabs/30 days)
oxymorphone hcl tab er 12hr 30 mg	1	QL (60 tabs/30 days)
oxymorphone hcl tab er 12hr 40 mg	1	QL (60 tabs/30 days)
ROXICODONE TAB 5MG	3	QL (360 tabs/30 days)
ROXICODONE TAB 15MG	3	QL (180 tabs/30 days)
ROXICODONE TAB 30MG	3	QL (180 tabs/30 days)
SUBSYS SPR 400MCG	3	PA, QL (120 sprays/30 days)
tramadol hcl tab 50 mg	1	QL (240 tabs/30 days)
tramadol hcl tab er 24hr 100 mg	1	QL (90 tabs/30 days)
tramadol hcl tab er 24hr 200 mg	1	QL (60 tabs/30 days)
tramadol hcl tab er 24hr 300 mg	1	QL (30 tabs/30 days)
tramadol hcl tab er 24hr biphasic release 100 mg	1	QL (90 tabs/30 days)
tramadol hcl tab er 24hr biphasic release 200 mg	1	QL (60 tabs/30 days)
tramadol hcl tab er 24hr biphasic release 300 mg	1	QL (30 tabs/30 days)

OPIOID COMBINATIONS

acetaminophen w/ codeine soln 120-12 mg/5ml	1	QL (5000 ml/30 days)
acetaminophen w/ codeine tab 300-15 mg	1	QL (400 tabs/30 days)
acetaminophen w/ codeine tab 300-30 mg	1	QL (400 tabs/30 days)
acetaminophen w/ codeine tab 300-60 mg	1	QL (400 tabs/30 days)
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg	1	QL (390 caps/30 days)
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	1	QL (360 caps/30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	1	QL (360 caps/30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL (5520 mL/30 days)
hydrocodone-acetaminophen tab 5-300 mg	1	QL (360 tabs/30 days)
hydrocodone-acetaminophen tab 5-325 mg	1	QL (369 tabs/30 days)
hydrocodone-acetaminophen tab 7.5-300 mg	1	QL (180 tabs/30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	1	QL (369 tabs/30 days)
hydrocodone-acetaminophen tab 10-300 mg	1	QL (180 tabs/30 days)
hydrocodone-acetaminophen tab 10-325 mg	1	QL (369 tabs/30 days)
hydrocodone-ibuprofen tab 5-200 mg	1	QL (180 tabs/30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	1	QL (180 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
hydrocodone-ibuprofen tab 10-200 mg	1	QL (180 tabs/30 days)
LORTAB ELX 10-300MG	3	QL (2025 mL/30 days)
OXY-ACETAMIN TAB 7.5-300	3	QL (400 tabs/30 days)
OXYCOD/APAP TAB 5-300MG	3	QL (400 tabs/30 days)
OXYCOD/APAP TAB 10-300MG	3	QL (400 tabs/30 days)
oxycodone w/ acetaminophen soln 5-325 mg/5ml	1	QL (1846 mL/30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg	1	QL (369 tabs/30 days)
oxycodone w/ acetaminophen tab 5-325 mg	1	QL (369 tabs/30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	1	QL (369 tabs/30 days)
oxycodone w/ acetaminophen tab 10-325 mg	1	QL (369 tabs/30 days)
PROLATE TAB 5-300MG	3	QL (400 tabs/30 days)
PROLATE TAB 7.5-300	3	QL (400 tabs/30 days)
PROLATE TAB 10-300MG	3	QL (400 tabs/30 days)
tramadol-acetaminophen tab 37.5-325 mg	1	QL (40 tabs/30 days)
ULTRACET TAB 37.5-325	3	QL (40 tabs/30 days)
XODOL TAB 5-300MG	3	QL (360 tabs/30 days)

OPIOID PARTIAL AGONISTS

buprenorphine hcl sl tab 2 mg (base equiv)	1	
buprenorphine hcl sl tab 8 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	1	
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	1	
buprenorphine td patch weekly 5 mcg/hr	1	QL (1 patch/7 days)
buprenorphine td patch weekly 7.5 mcg/hr	1	QL (1 patch/7 days)
buprenorphine td patch weekly 10 mcg/hr	1	QL (1 patch/7 days)
buprenorphine td patch weekly 15 mcg/hr	1	QL (1 patch/7 days)
buprenorphine td patch weekly 20 mcg/hr	1	QL (1 patch/7 days)
butorphanol tartrate nasal soln 10 mg/ml	1	QL (2 bottles/30 days)
pentazocine w/ naloxone hcl tab 50-0.5 mg	1	QL (360 tabs/30 days)
ZUBSOLV SUB 1.4-0.36	3	
ZUBSOLV SUB 5.7-1.4	3	
ZUBSOLV SUB 8.6-2.1	3	

Drug Name	Drug Tier	Requirements/Limits
ANDROGENS-ANABOLIC ANABOLIC STEROIDS		
<i>oxandrolone tab 2.5 mg</i>	1	
<i>oxandrolone tab 10 mg</i>	1	
ANDROGENS		
ANDROGEL GEL 1%(25MG)	3	QL (300 grams/30 days)
ANDROGEL GEL 1%(50MG)	3	QL (300 grams/30 days)
ANDROGEL GEL 1.62%	3	QL (150 grams/30 days)
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	1	
FORTESTA GEL 10MG/ACT	3	QL (120 grams/30 days)
JATENZO CAP 158MG	3	PA
JATENZO CAP 198MG	3	PA
JATENZO CAP 237MG	3	PA
<i>methyltestosterone cap 10 mg</i>	1	QL (600 caps/30 days)
TESTIM GEL 1%(50MG)	3	QL (300 grams/30 days)
<i>testosterone td gel 10mg/act (2%)</i>	1	QL (120 grams/30 days)
<i>testosterone td gel 12.5 mg/act (1%)</i>	1	QL (300 grams/30 days)
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	1	QL (150 grams/30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	QL (150 grams/30 days)
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	QL (300 grams/30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	1	QL (150 grams/30 days)
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	QL (300 grams/30 days)
<i>testosterone td soln 30 mg/act</i>	1	QL (180 mL/30 days)
VOGELXO GEL 1%(50MG)	3	QL (300 grams/30 days)
VOGELXO GEL PUMP 1%	3	QL (300 grams/30 days)
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
CORTIFOAM AER 90MG	3	
<i>hydrocortisone enema 100 mg/60ml</i>	1	
RECTAL COMBINATIONS		
ANALPRAM-HC CRE 1-1%	3	
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	
<i>lidocaine-hydrocortisone acetate rectal cream kit 2-2%</i>	1	
<i>lidocaine-hydrocortisone acetate rectal cream kit 3-0.5%</i>	1	
<i>lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%</i>	1	
PROCORT CRE	3	
PROCTOFOAM AER HC 1%	3	

Drug Name	Drug Tier	Requirements/Limits
RECTAL STEROIDS		
ANUSOL-HC CRE 2.5%	3	
hydrocortisone perianal cream 1%	1	
hydrocortisone perianal cream 2.5%	1	
VASODILATING AGENTS		
RECTIV OIN 0.4%	3	
ANTHELMINTICS		
ANTHELMINTICS		
albendazole tab 200 mg	1	
ALBENZA TAB 200MG	3	
BENZNIDAZOLE TAB 12.5MG	3	
ivermectin tab 3 mg	1	PA
praziquantel tab 600 mg	1	
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
metronidazole cap 375 mg	1	
metronidazole tab 250 mg	1	
metronidazole tab 500 mg	1	
tinidazole tab 250 mg	1	
tinidazole tab 500 mg	1	
trimethoprim tab 100 mg	1	
XIFAXAN TAB 200MG	3	
XIFAXAN TAB 550MG	3	
ANTI-INFECTIVE MISC. - COMBINATIONS		
BACTRIM DS TAB 800-160	3	
BACTRIM TAB 400-80MG	3	
*methenamine-hyosc-meth blue-sod phos-phen sal cap 120 mg***	1	
*methenamine-hyosc-meth blue-sod phos-phen sal tab 81 mg***	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim tab 400-80 mg	1	
sulfamethoxazole-trimethoprim tab 800-160 mg	1	
ANTIPROTOZOAL AGENTS		
ALINIA SUS 100/5ML	3	
ALINIA TAB 500MG	3	
atovaquone susp 750 mg/5ml	1	
LAMPIT TAB 30MG	3	
LAMPIT TAB 120MG	3	
MEPRON SUS	3	
nitazoxanide tab 500 mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>GLYCOPEPTIDES</i>		
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	
<i>LEPROSTATICs</i>		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
<i>LINCOSAMIDES</i>		
<i>CLEOCIN CAP 75MG</i>	3	
<i>CLEOCIN CAP 150MG</i>	3	
<i>CLEOCIN CAP 300MG</i>	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>MONOBACTAMS</i>		
<i>CAYSTON INH 75MG</i>	4	SP, PA
<i>OXAZOLIDINONES</i>		
<i>linezolid for susp 100 mg/5ml</i>	1	
<i>linezolid tab 600 mg</i>	1	
<i>ZYVOX SUS 100MG/5M</i>	3	
<i>ZYVOX TAB 600MG</i>	3	
<i>URINARY ANTI-INFECTIVES</i>		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	1	
<i>MACROBID CAP 100MG</i>	3	
<i>MACRODANTIN CAP 25MG</i>	3	
<i>MACRODANTIN CAP 50MG</i>	3	
<i>MACRODANTIN CAP 100MG</i>	3	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>MONUROL PAK GRANULES</i>	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	
<i>ANTIANGINAL AGENTS</i>		
<i>ANTIANGINALS-OTHER</i>		
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
NITRATES		
<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide dinitrate tab 40 mg</i>	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
NITRO-BID OIN 2%	3	
NITRO-DUR DIS 0.1MG/HR	3	
NITRO-DUR DIS 0.2MG/HR	3	
NITRO-DUR DIS 0.3MG/HR	3	
NITRO-DUR DIS 0.4MG/HR	3	
NITRO-DUR DIS 0.6MG/HR	3	
NITRO-DUR DIS 0.8MG/HR	3	
<i>nitroglycerin cap er 2.5 mg</i>	1	
<i>nitroglycerin cap er 6.5 mg</i>	1	
<i>nitroglycerin cap er 9 mg</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	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	1	
NITROLINGUAL SPR PUMPSPRA	3	
NITROMIST AER 400MCG	3	

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

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

Drug Name	Drug Tier	Requirements/Limits
hydroxyzine pamoate cap 100 mg	1	
meprobamate tab 200 mg	1	
meprobamate tab 400 mg	1	
VISTARIL CAP 25MG	3	
VISTARIL CAP 50MG	3	
BENZODIAZEPINES		
alprazolam orally disintegrating tab 0.5 mg	1	
alprazolam orally disintegrating tab 0.25 mg	1	
alprazolam orally disintegrating tab 1 mg	1	
alprazolam orally disintegrating tab 2 mg	1	
alprazolam tab 0.5 mg	1	
alprazolam tab 0.25 mg	1	
alprazolam tab 1 mg	1	
alprazolam tab 2 mg	1	
alprazolam tab er 24hr 0.5 mg	1	
alprazolam tab er 24hr 1 mg	1	
alprazolam tab er 24hr 2 mg	1	
alprazolam tab er 24hr 3 mg	1	
ATIVAN TAB 0.5MG	3	
ATIVAN TAB 1MG	3	
ATIVAN TAB 2MG	3	
chlordiazepoxide hcl cap 5 mg	1	
chlordiazepoxide hcl cap 10 mg	1	
chlordiazepoxide hcl cap 25 mg	1	
clorazepate dipotassium tab 3.75 mg	1	
clorazepate dipotassium tab 7.5 mg	1	
clorazepate dipotassium tab 15 mg	1	
diazepam oral soln 1 mg/ml	1	
diazepam tab 2 mg	1	
diazepam tab 5 mg	1	
diazepam tab 10 mg	1	
lorazepam conc 2 mg/ml	1	
lorazepam tab 0.5 mg	1	
lorazepam tab 1 mg	1	
lorazepam tab 2 mg	1	
oxazepam cap 10 mg	1	
oxazepam cap 15 mg	1	
oxazepam cap 30 mg	1	
TRANXENE T TAB 7.5MG	3	
VALIUM TAB 2MG	3	
VALIUM TAB 5MG	3	
VALIUM TAB 10MG	3	
XANAX TAB 0.5MG	3	
XANAX TAB 0.25MG	3	

Drug Name	Drug Tier	Requirements/Limits
XANAX TAB 1MG	3	
XANAX TAB 2MG	3	

ANTIARRHYTHMICS**ANTIARRHYTHMICS TYPE I-A**

<i>disopyramide phosphate cap 100 mg</i>	1
<i>disopyramide phosphate cap 150 mg</i>	1
NORPACE CAP 100MG CR	2
NORPACE CAP 150MG CR	2
<i>quinidine gluconate tab er 324 mg</i>	1

ANTIARRHYTHMICS TYPE I-B

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

ANTIARRHYTHMICS TYPE III

<i>amiodarone hcl tab 100 mg</i>	1
<i>amiodarone hcl tab 200 mg</i>	1
<i>amiodarone hcl tab 400 mg</i>	1
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1 PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1 PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1 PA
MULTAQ TAB 400MG	3

ANTIASTHMATIC AND BRONCHODILATOR AGENTS**ANTI-INFLAMMATORY AGENTS**

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1
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BRONCHODILATORS - ANTICHOLINERGICS

ATROVENT HFA AER 17MCG	2
<i>ipratropium bromide inhal soln 0.02%</i>	1
SPIRIVA AER 1.25MCG	2
SPIRIVA CAP HANDIHLR	2
SPIRIVA SPR 2.5MCG	2

LEUKOTRIENE MODULATORS

ACCOLATE TAB 10MG	3
ACCOLATE TAB 20MG	3

Drug Name	Drug Tier Requirements/Limits
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1
<i>montelukast sodium tab 10 mg (base equiv)</i>	1
SINGULAIR CHW 4MG	3
SINGULAIR CHW 5MG	3
SINGULAIR TAB 10MG	3
<i>zafirlukast tab 10 mg</i>	1
<i>zafirlukast tab 20 mg</i>	1
<i>zileuton tab er 12hr 600 mg</i>	1
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS	
<i>roflumilast tab 250 mcg</i>	1
<i>roflumilast tab 500 mcg</i>	1
STEROID INHALANTS	
ALVESCO AER 80MCG	3
ALVESCO AER 160MCG	3
ARNUITY ELPT INH 50MCG	3
ARNUITY ELPT INH 100MCG	2
ARNUITY ELPT INH 200MCG	2
ASMANEX 7 AER 110MCG	2
ASMANEX 14 AER 220MCG	2
ASMANEX 30 AER 110MCG	2
ASMANEX 30 AER 220MCG	2
ASMANEX 60 AER 220MCG	2
ASMANEX 120 AER 220MCG	2
ASMANEX HFA AER 100 MCG	2
ASMANEX HFA AER 200 MCG	2
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1
<i>budesonide inhalation susp 1 mg/2ml</i>	1
FLOVENT DISK AER 50MCG	2
FLOVENT DISK AER 100MCG	2
FLOVENT DISK AER 250MCG	2
FLOVENT HFA AER 44MCG	2
FLOVENT HFA AER 110MCG	2
FLOVENT HFA AER 220MCG	2
PULMICORT INH 90MCG	2
PULMICORT INH 180MCG	2
PULMICORT SUS 0.5MG/2	2
PULMICORT SUS 0.25MG/2	2
PULMICORT SUS 1MG/2ML	2

Drug Name	Drug Tier	Requirements/Limits
QVAR REDIHA AER 80MCG	2	
QVAR REDIHAL AER 40MCG	2	
SYMPATHOMIMETICS		
ADVAIR HFA AER 45/21	2	QL (1 inhaler/30 days)
ADVAIR HFA AER 115/21	2	QL (1 inhaler/30 days)
ADVAIR HFA AER 230/21	2	QL (1 inhaler/30 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	
<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	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	1	
BREO ELLIPTA INH 100-25	2	
BREO ELLIPTA INH 200-25	2	
BREZTRI AERO AER SPHERE	2	
BROVANA NEB 15MCG	3	
COMBIVENT AER 20-100	2	
<i>fluticasone-salmeterol aer powder ba 55- 14 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 100- 50 mcg/act</i>	1	QL (1 inhaler/30 days); WIXELA Only
<i>fluticasone-salmeterol aer powder ba 113- 14 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 232- 14 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 250- 50 mcg/act</i>	1	QL (1 inhaler/30 days); WIXELA Only
<i>fluticasone-salmeterol aer powder ba 500- 50 mcg/act</i>	1	QL (1 inhaler/30 days); WIXELA Only
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	1	QL (1 inhaler/30 days)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	1	

Drug Name	Drug Tier Requirements/Limits
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1
PERFOROMIST NEB 20MCG	3
PROAIR HFA AER	2
PROAIR RESPI AER	2
STIOLTO AER 2.5-2.5	2
STRIVERDI AER 2.5MCG	2
SYMBICORT AER 80-4.5	2
SYMBICORT AER 160-4.5	2
<i>terbutaline sulfate tab 2.5 mg</i>	1
<i>terbutaline sulfate tab 5 mg</i>	1
TRELEGY AER 100MCG	2
TRELEGY AER 200MCG	2
VENTOLIN HFA AER	2
XOPENEX CONC NEB 1.25/0.5	3
XOPENEX HFA AER	3
XOPENEX NEB 0.31MG	3
XOPENEX NEB 0.63MG	3
XOPENEX NEB 1.25/3ML	3

XANTHINES

THEO-24 CAP 100MG CR	2
THEO-24 CAP 200MG CR	2
THEO-24 CAP 300MG CR	2
THEO-24 CAP 400MG ER	2
<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**

warfarin sodium tab 1 mg	1
warfarin sodium tab 2 mg	1
warfarin sodium tab 2.5 mg	1

Drug Name	Drug Tier	Requirements/Limits
warfarin sodium tab 3 mg	1	
warfarin sodium tab 4 mg	1	
warfarin sodium tab 5 mg	1	
warfarin sodium tab 6 mg	1	
warfarin sodium tab 7.5 mg	1	
warfarin sodium tab 10 mg	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS ST P TAB 5MG	2	
ELIQUIS TAB 2.5MG	2	
ELIQUIS TAB 5MG	2	
SAVAYSA TAB 15MG	3	PA; Medical Necessity
SAVAYSA TAB 30MG	3	PA; Medical Necessity
SAVAYSA TAB 60MG	3	PA; Medical Necessity
XARELTO STAR TAB 15/20MG	2	
XARELTO SUS 1MG/ML	2	
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
THROMBIN INHIBITORS		
dabigatran etexilate mesylate cap 75 mg (etexilate base eq)	1	
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	1	
PRADAXA CAP 75MG	3	
PRADAXA CAP 110MG	3	
PRADAXA CAP 150MG	3	
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
clobazam suspension 2.5 mg/ml	1	
clobazam tab 10 mg	1	
clobazam tab 20 mg	1	
clonazepam orally disintegrating tab 0.5 mg	1	
clonazepam orally disintegrating tab 0.25 mg	1	
clonazepam orally disintegrating tab 0.125 mg	1	
clonazepam orally disintegrating tab 1 mg	1	
clonazepam orally disintegrating tab 2 mg	1	
clonazepam tab 0.5 mg	1	
clonazepam tab 1 mg	1	
clonazepam tab 2 mg	1	
DIASTAT ACDL GEL 5-10MG	2	
DIASTAT ACDL GEL 12.5-20	2	

Drug Name	Drug Tier	Requirements/Limits
DIASTAT PED GEL 2.5M GEL	2	
<i>diazepam rectal gel delivery system 2.5 mg</i>	1	
<i>diazepam rectal gel delivery system 10 mg</i>	1	
<i>diazepam rectal gel delivery system 20 mg</i>	1	
KLONOPIN TAB 0.5MG	3	
KLONOPIN TAB 1MG	3	
KLONOPIN TAB 2MG	3	
NAYZILAM SPR 5MG	3	QL (5 boxes/30 days); (Min age 12 years)
VALTOCO SPR 5MG	3	QL (10 doses/30 days); (Min age 6 years)
VALTOCO SPR 10MG	3	QL (10 doses/30 days); (Min age 6 years)
VALTOCO SPR 15MG	3	QL (10 doses/30 days); (Min age 6 years)
VALTOCO SPR 20MG	3	QL (10 doses/30 days); (Min age 6 years)

ANTICONVULSANTS - MISC.

BANZEL TAB 200MG	2	
BANZEL TAB 400MG	2	
<i>carbamazepine cap er 12hr 100 mg</i>	1	
<i>carbamazepine cap er 12hr 200 mg</i>	1	
<i>carbamazepine cap er 12hr 300 mg</i>	1	
<i>carbamazepine chew tab 100 mg</i>	1	
<i>carbamazepine susp 100 mg/5ml</i>	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	1	
<i>carbamazepine tab er 12hr 200 mg</i>	1	
<i>carbamazepine tab er 12hr 400 mg</i>	1	
CARBATROL CAP 100MG	2	
CARBATROL CAP 200MG	2	
CARBATROL CAP 300MG	2	
DIACOMIT CAP 250MG	3	
DIACOMIT CAP 500MG	3	
DIACOMIT PAK 250MG	3	
DIACOMIT PAK 500MG	3	
EPIDIOLEX SOL 100MG/ML	5	SP, PA
FINTEPLA SOL 2.2MG/ML	5	SP, PA
<i>gabapentin cap 100 mg</i>	1	QL (180 caps/30 days)
<i>gabapentin cap 300 mg</i>	1	QL (180 caps/30 days)
<i>gabapentin cap 400 mg</i>	1	QL (180 caps/30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	1	QL (2160 mL/30 days)
<i>gabapentin tab 600 mg</i>	1	QL (180 tabs/30 days)
<i>gabapentin tab 800 mg</i>	1	QL (120 tabs/30 days)

Drug Name	Drug Tier Requirements/Limits
KEPPRA SOL 100MG/ML	2
KEPPRA TAB 250MG	3
KEPPRA TAB 500MG	3
KEPPRA TAB 750MG	3
KEPPRA TAB 1000MG	3
KEPPRA XR TAB 500MG	2
KEPPRA XR TAB 750MG	2
<i>lacosamide oral solution 10 mg/ml</i>	1
<i>lacosamide tab 50 mg</i>	1
<i>lacosamide tab 100 mg</i>	1
<i>lacosamide tab 150 mg</i>	1
<i>lacosamide tab 200 mg</i>	1
LAMICTAL CHW 5MG	2
LAMICTAL CHW 25MG	2
LAMICTAL KIT START 35	2
LAMICTAL KIT START 49	2
LAMICTAL KIT START 98	2
LAMICTAL ODT KIT	2
LAMICTAL ODT TAB 25MG	3
LAMICTAL ODT TAB 50MG	3
LAMICTAL ODT TAB 100MG	3
LAMICTAL ODT TAB 200MG	3
LAMICTAL TAB 25MG	3
LAMICTAL TAB 100MG	3
LAMICTAL TAB 150MG	3
LAMICTAL TAB 200MG	3
LAMICTAL XR KIT	2
LAMICTAL XR TAB 25MG	3
LAMICTAL XR TAB 50MG	3
LAMICTAL XR TAB 100MG	3
LAMICTAL XR TAB 200MG	3
LAMICTAL XR TAB 250MG	3
LAMICTAL XR TAB 300MG	3
<i>lamotrigine orally disintegrating tab 25 mg</i>	1
<i>lamotrigine orally disintegrating tab 50 mg</i>	1
<i>lamotrigine orally disintegrating tab 100 mg</i>	1
<i>lamotrigine orally disintegrating tab 200 mg</i>	1
<i>lamotrigine tab 25 mg</i>	1
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1
<i>lamotrigine tab 35 x 25 mg starter kit</i>	1
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	1	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	1	
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	1	
<i>lamotrigine tab er 24hr 50 mg</i>	1	
<i>lamotrigine tab er 24hr 100 mg</i>	1	
<i>lamotrigine tab er 24hr 200 mg</i>	1	
<i>lamotrigine tab er 24hr 250 mg</i>	1	
<i>lamotrigine tab er 24hr 300 mg</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
<i>LYRICA SOL 20MG/ML</i>	2	QL (900 mL/30 days)
<i>MYSOLINE TAB 50MG</i>	3	
<i>MYSOLINE TAB 250MG</i>	3	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	
<i>oxcarbazepine tab 150 mg</i>	1	
<i>oxcarbazepine tab 300 mg</i>	1	
<i>oxcarbazepine tab 600 mg</i>	1	
<i>OXTELLAR XR TAB 150MG</i>	3	
<i>OXTELLAR XR TAB 300MG</i>	3	
<i>OXTELLAR XR TAB 600MG</i>	3	
<i>pregabalin cap 25 mg</i>	1	QL (120 caps/30 days)
<i>pregabalin cap 50 mg</i>	1	QL (120 caps/30 days)
<i>pregabalin cap 75 mg</i>	1	QL (120 caps/30 days)
<i>pregabalin cap 100 mg</i>	1	QL (120 caps/30 days)
<i>pregabalin cap 150 mg</i>	1	QL (120 caps/30 days)
<i>pregabalin cap 200 mg</i>	1	QL (90 caps/30 days)
<i>pregabalin cap 225 mg</i>	1	QL (60 caps/30 days)
<i>pregabalin cap 300 mg</i>	1	QL (60 caps/30 days)
<i>pregabalin soln 20 mg/ml</i>	1	QL (900 mL/30 days)
<i>primidone tab 50 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
primidone tab 250 mg	1
QUDEXY XR CAP 25/24HR	3
QUDEXY XR CAP 50/24HR	3
QUDEXY XR CAP 100/24HR	3
QUDEXY XR CAP 150/24HR	3
QUDEXY XR CAP 200/24HR	3
rufinamide susp 40 mg/ml	1
rufinamide tab 200 mg	1
rufinamide tab 400 mg	1
TEGRETOL SUS 100/5ML	2
TEGRETOL TAB 200MG	3
TEGRETOL-XR TAB 100MG	2
TEGRETOL-XR TAB 200MG	2
TEGRETOL-XR TAB 400MG	2
TOPAMAX SPR CAP 15MG	3
TOPAMAX SPR CAP 25MG	3
TOPAMAX TAB 25MG	3
TOPAMAX TAB 50MG	3
TOPAMAX TAB 100MG	3
TOPAMAX TAB 200MG	3
topiramate cap er 24hr 25 mg	1
topiramate cap er 24hr 50 mg	1
topiramate cap er 24hr 100 mg	1
topiramate cap er 24hr 200 mg	1
topiramate cap er 24hr sprinkle 25 mg	1
topiramate cap er 24hr sprinkle 50 mg	1
topiramate cap er 24hr sprinkle 100 mg	1
topiramate cap er 24hr sprinkle 150 mg	1
topiramate cap er 24hr sprinkle 200 mg	1
topiramate sprinkle cap 15 mg	1
topiramate sprinkle cap 25 mg	1
topiramate tab 25 mg	1
topiramate tab 50 mg	1
topiramate tab 100 mg	1
topiramate tab 200 mg	1
TRILEPTAL SUS 300MG/5M	2
TRILEPTAL TAB 150MG	3
TRILEPTAL TAB 300MG	3
TRILEPTAL TAB 600MG	3
TROKENDI XR CAP 25MG	3
TROKENDI XR CAP 50MG	3
TROKENDI XR CAP 100MG	3
TROKENDI XR CAP 200MG	3
ZONEGRAN CAP 25MG	3
ZONEGRAN CAP 100MG	3

Drug Name	Drug Tier	Requirements/Limits
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
ZTALMY SUS 50MG/ML	5	SP, PA
CARBAMATES		
<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
FELBATOL TAB 400MG	3	
FELBATOL TAB 600MG	3	
GABA MODULATORS		
GABITRIL TAB 2MG	2	
GABITRIL TAB 4MG	2	
GABITRIL TAB 12MG	2	
GABITRIL TAB 16MG	2	
SABRIL POW 500MG	4	SP
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
HYDANTOINS		
DILANTIN CAP 30MG	2	
DILANTIN CAP 100MG	2	
DILANTIN CHW 50MG	2	
DILANTIN-125 SUS 125/5ML	2	
PHENYTEK CAP 200MG	2	
PHENYTEK CAP 300MG	2	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
SUCCINIMIDES		
CELONTIN CAP 300MG	3	
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>methsuximide cap 300 mg</i>	1	
ZARONTIN CAP 250MG	3	
ZARONTIN SOL 250/5ML	3	
VALPROIC ACID		
DEPAKOTE ER TAB 250MG	3	
DEPAKOTE ER TAB 500MG	3	
DEPAKOTE SPR CAP 125MG	2	
DEPAKOTE TAB 125MG DR	3	

Drug Name	Drug Tier	Requirements/Limits
DEPAKOTE TAB 250MG DR	3	
DEPAKOTE TAB 500MG DR	3	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	1	
<i>divalproex sodium tab delayed release 250 mg</i>	1	
<i>divalproex sodium tab delayed release 500 mg</i>	1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	

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

<i>mirtazapine orally disintegrating tab 15 mg</i>	1	
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	
<i>mirtazapine tab 7.5 mg</i>	1	
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
REMERON SLTB TAB 15MG	3	
REMERON SLTB TAB 30MG	3	
REMERON SLTB TAB 45MG	3	
REMERON TAB 15MG	3	
REMERON TAB 30MG	3	

ANTIDEPRESSANT COMBINATIONS

AUVELITY TAB 45-105MG	3	ST, QL (60 tabs/30 days); (Try SNRI, SSRI, or bupropion)
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ANTIDEPRESSANTS - MISC.

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

Drug Name	Drug Tier	Requirements/Limits
FORFIVO XL TAB 450MG	3	
WELLBUTRIN TAB XL 150MG	3	
WELLBUTRIN TAB XL 300MG	3	
<i>MONOAMINE OXIDASE INHIBITORS (MAOIS)</i>		
EMSAM DIS 6MG/24HR	3	
EMSAM DIS 9MG/24HR	3	
EMSAM DIS 12MG/24H	3	
MARPLAN TAB 10MG	3	
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	
<i>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</i>		
CELEXA TAB 10MG	3	
CELEXA TAB 20MG	3	
CELEXA TAB 40MG	3	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl tab 10 mg</i>	1	
<i>fluoxetine hcl tab 20 mg</i>	1	
<i>fluoxetine hcl tab 60 mg</i>	1	
FLUOXETINE TAB 60MG	3	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	
LEXAPRO TAB 5MG	3	

Drug Name	Drug Tier Requirements/Limits
LEXAPRO TAB 10MG	3
LEXAPRO TAB 20MG	3
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	1
<i>paroxetine hcl tab 10 mg</i>	1
<i>paroxetine hcl tab 20 mg</i>	1
<i>paroxetine hcl tab 30 mg</i>	1
<i>paroxetine hcl tab 40 mg</i>	1
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1
<i>paroxetine hcl tab er 24hr 25 mg</i>	1
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1
PAXIL CR TAB 12.5MG	3
PAXIL CR TAB 25MG	3
PAXIL CR TAB 37.5MG	3
PAXIL SUS 10MG/5ML	3
PAXIL TAB 10MG	3
PAXIL TAB 20MG	3
PAXIL TAB 30MG	3
PAXIL TAB 40MG	3
PEXEVA TAB 10MG	3
PEXEVA TAB 20MG	3
PEXEVA TAB 30MG	3
PEXEVA TAB 40MG	3
PROZAC CAP 10MG	3
PROZAC CAP 20MG	3
PROZAC CAP 40MG	3
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1
<i>sertraline hcl tab 25 mg</i>	1
<i>sertraline hcl tab 50 mg</i>	1
<i>sertraline hcl tab 100 mg</i>	1
ZOLOFT CON 20MG/ML	3
ZOLOFT TAB 25MG	3
ZOLOFT TAB 50MG	3
ZOLOFT TAB 100MG	3
SEROTONIN MODULATORS	
<i>nefazodone hcl tab 50 mg</i>	1
<i>nefazodone hcl tab 100 mg</i>	1
<i>nefazodone hcl tab 150 mg</i>	1
<i>nefazodone hcl tab 200 mg</i>	1
<i>nefazodone hcl tab 250 mg</i>	1
<i>trazodone hcl tab 50 mg</i>	1
<i>trazodone hcl tab 100 mg</i>	1
<i>trazodone hcl tab 150 mg</i>	1
<i>trazodone hcl tab 300 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
TRINTELLIX TAB 5MG	3	QL (120 tabs/30 days)
TRINTELLIX TAB 10MG	3	QL (60 tabs/30 days)
TRINTELLIX TAB 20MG	3	QL (30 tabs/30 days)
<i>vilazodone hcl tab 10 mg</i>	1	
<i>vilazodone hcl tab 20 mg</i>	1	
<i>vilazodone hcl tab 40 mg</i>	1	

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

CYMBALTA CAP 20MG	3	
CYMBALTA CAP 30MG	3	
CYMBALTA CAP 60MG	3	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	generic for PRISTIQ
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	generic for PRISTIQ
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	generic for PRISTIQ
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	
EFFEXOR XR CAP 37.5MG	3	
EFFEXOR XR CAP 75MG	3	
EFFEXOR XR CAP 150MG	3	
FETZIMA CAP 20MG	3	QL (180 caps/30 days)
FETZIMA CAP 40MG	3	QL (90 caps/30 days)
FETZIMA CAP 80MG	3	QL (30 caps/30 days)
FETZIMA CAP 120MG	3	QL (30 caps/30 days)
FETZIMA CAP TITRATIO	3	QL (90 caps/30 days)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	

Drug Name	Drug Tier Requirements/Limits
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)	1
venlafaxine hcl tab er 24hr 75 mg (base equivalent)	1
venlafaxine hcl tab er 24hr 150 mg (base equivalent)	1
venlafaxine hcl tab er 24hr 225 mg (base equivalent)	1
TRICYCLIC AGENTS	
amitriptyline hcl tab 10 mg	1
amitriptyline hcl tab 25 mg	1
amitriptyline hcl tab 50 mg	1
amitriptyline hcl tab 75 mg	1
amitriptyline hcl tab 100 mg	1
amitriptyline hcl tab 150 mg	1
amoxapine tab 25 mg	1
amoxapine tab 50 mg	1
amoxapine tab 100 mg	1
amoxapine tab 150 mg	1
clomipramine hcl cap 25 mg	1
clomipramine hcl cap 50 mg	1
clomipramine hcl cap 75 mg	1
desipramine hcl tab 10 mg	1
desipramine hcl tab 25 mg	1
desipramine hcl tab 50 mg	1
desipramine hcl tab 75 mg	1
desipramine hcl tab 100 mg	1
desipramine hcl tab 150 mg	1
doxepin hcl cap 10 mg	1
doxepin hcl cap 25 mg	1
doxepin hcl cap 50 mg	1
doxepin hcl cap 75 mg	1
doxepin hcl cap 100 mg	1
doxepin hcl cap 150 mg	1
doxepin hcl conc 10 mg/ml	1
imipramine hcl tab 10 mg	1
imipramine hcl tab 25 mg	1
imipramine hcl tab 50 mg	1
imipramine pamoate cap 75 mg	1
imipramine pamoate cap 100 mg	1
imipramine pamoate cap 125 mg	1
imipramine pamoate cap 150 mg	1
nortriptyline hcl cap 10 mg	1
nortriptyline hcl cap 25 mg	1
nortriptyline hcl cap 50 mg	1

Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl cap 75 mg</i>	1	
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	
<i>protriptyline hcl tab 5 mg</i>	1	
<i>protriptyline hcl tab 10 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	1	
<i>trimipramine maleate cap 50 mg</i>	1	
<i>trimipramine maleate cap 100 mg</i>	1	

ANTIDIABETICS**ALPHA-GLUCOSIDASE INHIBITORS**

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

ANTIDIABETIC - AMYLIN ANALOGS

SYMLINPEN 60 INJ 1000MCG	3
SYMLNPEN 120 INJ 1000MCG	3

ANTIDIABETIC COMBINATIONS

ACTOPLUS MET TAB 15-500MG	3
ACTOPLUS MET TAB 15-850MG	3
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1
<i>glipizide-metformin hcl tab 5-500 mg</i>	1
<i>glyburide-metformin tab 1.25-250 mg</i>	1
<i>glyburide-metformin tab 2.5-500 mg</i>	1
<i>glyburide-metformin tab 5-500 mg</i>	1
GLYXAMBI TAB 10-5 MG	2
GLYXAMBI TAB 25-5 MG	2
JANUMET TAB 50-500MG	2
JANUMET TAB 50-1000	2
JANUMET XR TAB 50-500MG	2
JANUMET XR TAB 50-1000	2
JANUMET XR TAB 100-1000	2
KAZANO 12.5- TAB 500MG	3
KAZANO 12.5- TAB 1000MG	3
KOMBIGLYZ XR TAB 2.5-1000	3
KOMBIGLYZ XR TAB 5-500MG	3
KOMBIGLYZ XR TAB 5-1000MG	3
OSENI TAB 12.5-15	3
OSENI TAB 12.5-30	3

Drug Name	Drug Tier	Requirements/Limits
OSENI TAB 12.5-45	3	
OSENI TAB 25-15MG	3	
OSENI TAB 25-30MG	3	
OSENI TAB 25-45MG	3	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
SOLIQUA INJ 100/33	2	
SYNJARDY TAB	2	
SYNJARDY TAB 5-500MG	2	
SYNJARDY TAB 5-1000MG	2	
SYNJARDY TAB 12.5-500	2	
SYNJARDY XR TAB	2	
SYNJARDY XR TAB 5-1000MG	2	
SYNJARDY XR TAB 10-1000	2	
SYNJARDY XR TAB 25-1000	2	
TRIJARDY XR TAB	2	
XIGDUO XR TAB 2.5-1000	2	
XIGDUO XR TAB 5-500MG	2	
XIGDUO XR TAB 5-1000MG	2	
XIGDUO XR TAB 10-500MG	2	
XIGDUO XR TAB 10-1000	2	
XULTOPHY INJ 100/3.6	2	

BIGUANIDES

<i>metformin hcl oral soln 500 mg/5ml</i>	1	
<i>metformin hcl tab 500 mg</i>	1	
<i>metformin hcl tab 850 mg</i>	1	(35-70 years old covered at \$0 for preventative use)
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	generic for GLUCOPHAGE XR
<i>metformin hcl tab er 24hr 750 mg</i>	1	generic for GLUCOPHAGE XR
RIOMET SOL 500/5ML	3	

DIABETIC OTHER

BAQSIMI ONE POW 3MG/DOSE	3	
BAQSIMI TWO POW 3MG/DOSE	3	
GLUCAGEN INJ HYPOKIT	2	
<i>glucagon (rdna) for inj kit 1 mg</i>	1	
GLUCAGON KIT 1MG	2	

Drug Name	Drug Tier	Requirements/Limits
GLUCOSE-VITAMIN C PRODUCTS	DS	Preferred Diabetic Supply
GVOKE HYPO 1 INJ 1MG/.2ML	3	
GVOKE HYPO 1 INJ .5/.1ML	3	
GVOKE HYPO 2 INJ 1MG/.2ML	3	
GVOKE HYPO 2 INJ .5/.1ML	3	
GVOKE PFS INJ	3	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA TAB 25MG	2	
JANUVIA TAB 50MG	2	
JANUVIA TAB 100MG	2	
NESINA TAB 6.25MG	3	
NESINA TAB 12.5MG	3	
NESINA TAB 25MG	3	
ONGLYZA TAB 2.5MG	3	
ONGLYZA TAB 5MG	3	
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET TAB 0.8MG	3	
INCRETIN MIMETIC AGENTS		
MOUNJARO INJ 2.5/0.5	3	PA; or Type II Diabetes Dx
MOUNJARO INJ 5MG/0.5	3	PA; or Type II Diabetes Dx
MOUNJARO INJ 7.5/0.5	3	PA; or Type II Diabetes Dx
MOUNJARO INJ 10MG/0.5	3	PA; or Type II Diabetes Dx
MOUNJARO INJ 12.5/0.5	3	PA; or Type II Diabetes Dx
MOUNJARO INJ 15MG/0.5	3	PA; or Type II Diabetes Dx
OZEMPIC INJ 2/1.5ML	2	
OZEMPIC INJ 2MG/3ML	2	
OZEMPIC INJ 4MG/3ML	2	
OZEMPIC INJ 8MG/3ML	2	
RYBELSUS TAB 3MG	2	
RYBELSUS TAB 7MG	2	
RYBELSUS TAB 14MG	2	
TRULICITY INJ 0.75/0.5	2	
TRULICITY INJ 1.5/0.5	2	
TRULICITY INJ 3/0.5	2	
TRULICITY INJ 4.5/0.5	2	
VICTOZA INJ 18MG/3ML	2	
INSULIN		
APIDRA INJ SOLOSTAR	3	PA; Medical Necessity

Drug Name	Drug Tier	Requirements/Limits
APIDRA INJ U-100	3	PA; Medical Necessity
HUMALOG INJ 100/ML	2	PA; Medical Necessity
HUMALOG JR INJ 100/ML	2	PA; Medical Necessity
HUMALOG KWIK INJ 100/ML	2	PA; Medical Necessity
HUMALOG KWIK INJ 200/ML	2	PA; Medical Necessity
HUMALOG MIX INJ 50/50	2	PA; Medical Necessity
HUMALOG MIX INJ 50/50KWP	2	PA; Medical Necessity
HUMALOG MIX INJ 75/25KWP	2	PA; Medical Necessity
HUMALOG MIX SUS 75/25	2	PA; Medical Necessity
HUMULIN INJ 70/30	2	PA; Medical Necessity
HUMULIN INJ 70/30KWP	2	PA; Medical Necessity
HUMULIN N INJ U-100	2	PA; Medical Necessity
HUMULIN N INJ U-100KWP	2	PA; Medical Necessity
HUMULIN R INJ U-100	2	PA; Medical Necessity
HUMULIN R INJ U-500	1	
LANTUS INJ 100/ML	1	
LANTUS SOLOS INJ 100/ML	1	
LEVEMIR INJ	2	PA; Medical Necessity
LEVEMIR INJ FLEXPEN	2	PA
LEVEMIR INJ FLEXTOUCH	2	PA; Medical Necessity
NOVOLIN70/30 INJ RELION	2	PA; Medical Necessity
NOVOLIN INJ 70/30	1	
NOVOLIN INJ 70/30 FP	1	
NOVOLIN INJ 70/30 FP	2	PA; Medical Necessity
NOVOLIN N INJ 100 UNIT	1	
NOVOLIN N INJ 100 UNIT	2	PA; Medical Necessity
NOVOLIN N INJ RELION	2	PA; Medical Necessity
NOVOLIN N INJ U-100	1	
NOVOLIN R INJ 100 UNIT	1	
NOVOLIN R INJ 100 UNIT	2	PA; Medical Necessity
NOVOLIN R INJ RELION	2	PA; Medical Necessity
NOVOLIN R INJ U-100	1	
NOVOLOG INJ 100/ML	1	
NOVOLOG INJ FLEX REL	2	PA; Medical Necessity
NOVOLOG INJ FLEXPEN	1	
NOVOLOG INJ PENFILL	1	
NOVOLOG MIX INJ 70/30	1	
NOVOLOG MIX INJ FLEXPEN	1	
TOUJEO MAX INJ 300IU/ML	2	
TOUJEO SOLO INJ 300IU/ML	2	
TRESIBA FLEX INJ 100UNIT	2	
TRESIBA FLEX INJ 200UNIT	2	
TRESIBA INJ 100UNIT	2	
INSULIN SENSITIZING AGENTS		
ACTOS TAB 15MG	3	

Drug Name	Drug Tier Requirements/Limits
ACTOS TAB 30MG	3
ACTOS TAB 45MG	3
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1
MEGLITINIDE ANALOGUES	
<i>nateglinide tab 60 mg</i>	1
<i>nateglinide tab 120 mg</i>	1
<i>repaglinide tab 0.5 mg</i>	1
<i>repaglinide tab 1 mg</i>	1
<i>repaglinide tab 2 mg</i>	1
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS	
FARXIGA TAB 5MG	2
FARXIGA TAB 10MG	2
JARDIANCE TAB 10MG	2
JARDIANCE TAB 25MG	2
SULFONYLUREAS	
AMARYL TAB 1MG	3
AMARYL TAB 2MG	3
AMARYL TAB 4MG	3
<i>glimepiride tab 1 mg</i>	1
<i>glimepiride tab 2 mg</i>	1
<i>glimepiride tab 4 mg</i>	1
<i>glipizide tab 5 mg</i>	1
<i>glipizide tab 10 mg</i>	1
<i>glipizide tab er 24hr 2.5 mg</i>	1
<i>glipizide tab er 24hr 5 mg</i>	1
<i>glipizide tab er 24hr 10 mg</i>	1
GLUCOTROL XL TAB 2.5MG	3
GLUCOTROL XL TAB 5MG	3
GLUCOTROL XL TAB 10MG	3
<i>glyburide micronized tab 1.5 mg</i>	1
<i>glyburide micronized tab 3 mg</i>	1
<i>glyburide micronized tab 6 mg</i>	1
<i>glyburide tab 1.25 mg</i>	1
<i>glyburide tab 2.5 mg</i>	1
<i>glyburide tab 5 mg</i>	1
GLYNASE TAB 1.5MG	3
GLYNASE TAB 3MG	3
GLYNASE TAB 6MG	3
<i>tolbutamide tab 500 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI TAB 125MG	3	ST, QL (60 tabs/30 days); Try loperamide
ANTIPERTISTALTIC AGENTS		
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	1	
diphenoxylate w/ atropine tab 2.5-0.025 mg	1	
LOMOTIL TAB 2.5MG	3	
loperamide hcl cap 2 mg	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET CAP 100MG	2	
deferasirox granules packet 90 mg	4	SP, PA
deferasirox granules packet 180 mg	4	SP, PA
deferasirox granules packet 360 mg	4	SP, PA
deferasirox tab 90 mg	4	SP, PA
deferasirox tab 180 mg	4	SP, PA
deferasirox tab 360 mg	4	SP, PA
deferasirox tab for oral susp 125 mg	4	SP, PA
deferasirox tab for oral susp 250 mg	4	SP, PA
deferasirox tab for oral susp 500 mg	4	SP, PA
ANTIDOTES AND SPECIFIC ANTAGONISTS		
VISTOGARD PAK 10GM	5	SP
OPIOID ANTAGONISTS		
KLOXXADO SPR 8MG	3	QL (2 cartons (4 nasal sprays)/180 days)
naloxone hcl nasal spray 4 mg/0.1ml	1	QL (2 cartons (4 nasal sprays)/180 days)
naltrexone hcl tab 50 mg	1	
NARCAN SPR 4MG	2	QL (2 cartons (4 nasal sprays)/180 days)
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET TAB 50MG	3	
granisetron hcl tab 1 mg	1	
ondansetron hcl oral soln 4 mg/5ml	1	
ondansetron hcl tab 4 mg	1	
ondansetron hcl tab 8 mg	1	
ondansetron hcl tab 24 mg	1	
ondansetron orally disintegrating tab 4 mg	1	
ondansetron orally disintegrating tab 8 mg	1	
SANCUSO DIS 3.1MG	3	

Drug Name	Drug Tier	Requirements/Limits
ZOFRAN TAB 4MG	3	
ZUPLENZ MIS 4MG	3	
ZUPLENZ MIS 8MG	3	
ANTIEMETICS - ANTICHOLINERGIC		
meclizine hcl tab 12.5 mg	1	
meclizine hcl tab 25 mg	1	
scopolamine td patch 72hr 1 mg/3days	1	
TRANSDERM-SC DIS 1MG/3DAY	3	
trimethobenzamide hcl cap 300 mg	1	
ANTIEMETICS - MISCELLANEOUS		
doxylamine-pyridoxine tab delayed release 10-10 mg	1	
dronabinol cap 2.5 mg	1	
dronabinol cap 5 mg	1	
dronabinol cap 10 mg	1	
MARINOL CAP 2.5MG	3	
MARINOL CAP 5MG	3	
MARINOL CAP 10MG	3	
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant capsule 40 mg	1	
aprepitant capsule 80 mg	1	
aprepitant capsule 125 mg	1	
aprepitant capsule therapy pack 80 & 125 mg	1	QL (3 tabs/15 days)
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
BREXAFEMME TAB 150MG	3	ST; Try fluconazole
ANTIFUNGALS		
flucytosine cap 250 mg	1	
flucytosine cap 500 mg	1	
griseofulvin microsize susp 125 mg/5ml	1	
griseofulvin microsize tab 500 mg	1	
griseofulvin ultramicrosize tab 125 mg	1	
griseofulvin ultramicrosize tab 250 mg	1	
nystatin tab 500000 unit	1	
terbinafine hcl tab 250 mg	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
fluconazole for susp 10 mg/ml	1	
fluconazole for susp 40 mg/ml	1	
fluconazole tab 50 mg	1	
fluconazole tab 100 mg	1	
fluconazole tab 150 mg	1	
fluconazole tab 200 mg	1	
itraconazole cap 100 mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>itraconazole oral soln 10 mg/ml</i>	1	
<i>ketoconazole tab 200 mg</i>	1	
<i>posaconazole tab delayed release 100 mg</i>	1	
<i>voriconazole for susp 40 mg/ml</i>	1	
<i>voriconazole tab 50 mg</i>	1	
<i>voriconazole tab 200 mg</i>	1	

ANTIHISTAMINES**ANTIHISTAMINES - ALKYLAMINES**

<i>dexchlorpheniramine maleate oral soln 2 mg/5ml</i>	1
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ANTIHISTAMINES - ETHANOLAMINES

<i>carboxamine maleate tab 4 mg</i>	1
<i>clemastine fumarate tab 2.68 mg</i>	1

ANTIHISTAMINES - NON-SEDATING

<i>desloratadine tab orally disintegrating 2.5 mg</i>	1
<i>desloratadine tab orally disintegrating 5 mg</i>	1
<i>levocetirizine dihydrochloride tab 5 mg</i>	1

ANTIHISTAMINES - PHENOTHIAZINES

<i>promethazine hcl suppos 12.5 mg</i>	1
<i>promethazine hcl suppos 25 mg</i>	1
<i>promethazine hcl suppos 50 mg</i>	1
<i>promethazine hcl syrup 6.25 mg/5ml</i>	1
<i>promethazine hcl tab 12.5 mg</i>	1
<i>promethazine hcl tab 25 mg</i>	1
<i>promethazine hcl tab 50 mg</i>	1

ANTIHISTAMINES - PIPERIDINES

<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1
<i>cyproheptadine hcl tab 4 mg</i>	1

ANTIHYPOLIPIDEMICS**ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS**

<i>NEXLETOL TAB 180MG</i>	3	ST, QL (30 tabs/30 days); Concurrent use of statin - 30 day fill of statin in last 120 days on every fill
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ANTIHYPOLIPIDEMICS - COMBINATIONS

<i>EZETIM/ATORV TAB 10-10MG</i>	3	QL (30 tabs/30 days)
<i>EZETIM/ATORV TAB 10-20MG</i>	3	QL (30 tabs/30 days)
<i>EZETIM/ATORV TAB 10-40MG</i>	3	QL (30 tabs/30 days)
<i>EZETIM/ATORV TAB 10-80MG</i>	3	QL (30 tabs/30 days)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	QL (30 tabs/30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	QL (30 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	QL (30 tabs/30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	QL (30 tabs/30 days)
NEXLIZET TAB 180/10MG	3	ST, QL (30 tabs/30 days); Concurrent use of statin - 30 day fill of statin in last 120 days on every fill

ANTIHYPERTENSIVES - MISC.

<i>icosapent ethyl cap 0.5 gm</i>	1
<i>icosapent ethyl cap 1 gm</i>	1
LOVAZA CAP 1GM	3
<i>omega-3-acid ethyl esters cap 1 gm</i>	1
VASCEPA CAP 0.5GM	2
VASCEPA CAP 1GM	2

BILE ACID SEQUESTRANTS

<i>cholestyramine light powder 4 gm/dose</i>	1
<i>cholestyramine light powder packets 4 gm</i>	1
<i>cholestyramine powder 4 gm/dose</i>	1
<i>cholestyramine powder packets 4 gm</i>	1
<i>colesevelam hcl packet for susp 3.75 gm</i>	1
<i>colesevelam hcl tab 625 mg</i>	1
COLESTID TAB 1GM	3
<i>colestipol hcl granule packets 5 gm</i>	1
<i>colestipol hcl granules 5 gm</i>	1
<i>colestipol hcl tab 1 gm</i>	1
QUESTRAN POW 4GM	3

FIBRIC ACID DERIVATIVES

ANTARA CAP 30MG	3
ANTARA CAP 90MG	3
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1
<i>fenofibrate cap 50 mg</i>	1
<i>fenofibrate cap 150 mg</i>	1
<i>fenofibrate micronized cap 30 mg</i>	1
<i>fenofibrate micronized cap 43 mg</i>	1
<i>fenofibrate micronized cap 67 mg</i>	1
<i>fenofibrate micronized cap 90 mg</i>	1
<i>fenofibrate micronized cap 130 mg</i>	1
<i>fenofibrate micronized cap 134 mg</i>	1
<i>fenofibrate micronized cap 200 mg</i>	1
<i>fenofibrate tab 40 mg</i>	1
<i>fenofibrate tab 48 mg</i>	1
<i>fenofibrate tab 54 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate tab 120 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	
<i>fenofibrate tab 160 mg</i>	1	
FENOGLIDE TAB 40MG	3	
FENOGLIDE TAB 120MG	3	
<i>gemfibrozil tab 600 mg</i>	1	
LIPOFEN CAP 50MG	3	
LIPOFEN CAP 150MG	3	
LOPID TAB 600MG	3	
TRICOR TAB 48MG	3	
TRICOR TAB 145MG	3	
TRILIPIX CAP 45MG	3	
TRILIPIX CAP 135MG	3	

HMG COA REDUCTASE INHIBITORS

ALTOPREV TAB 20MG ER	3	ST, QL (30 tabs/30 days); Try generic statin
ALTOPREV TAB 40MG ER	3	ST, QL (30 tabs/30 days); Try generic statin
ALTOPREV TAB 60MG ER	3	ST, QL (30 tabs/30 days); Try generic statin
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	QL (30 tabs/30 days)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	QL (30 tabs/30 days)
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	QL (30 caps/30 days); (40-75 years old covered at \$0)
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	QL (30 caps/30 days); (40-75 years old covered at \$0)
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
LESCOL XL TAB 80MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIPITOR TAB 10MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIPITOR TAB 20MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIPITOR TAB 40MG	3	ST, QL (30 tabs/30 days); Try generic statin

Drug Name	Drug Tier	Requirements/Limits
LIPITOR TAB 80MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIVALO TAB 1MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIVALO TAB 2MG	3	ST, QL (30 tabs/30 days); Try generic statin
LIVALO TAB 4MG	3	ST, QL (30 tabs/30 days); Try generic statin
<i>lovastatin tab 10 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>lovastatin tab 20 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>lovastatin tab 40 mg</i>	1	QL (60 tabs/30 days); (40-75 years old covered at \$0)
<i>pravastatin sodium tab 10 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>pravastatin sodium tab 20 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>pravastatin sodium tab 40 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>pravastatin sodium tab 80 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 5 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 10 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 20 mg</i>	1	QL (30 tabs/30 days)
<i>rosuvastatin calcium tab 40 mg</i>	1	QL (30 tabs/30 days)
<i>simvastatin tab 5 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>simvastatin tab 10 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>simvastatin tab 20 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)

Drug Name	Drug Tier	Requirements/Limits
<i>simvastatin tab 40 mg</i>	1	QL (30 tabs/30 days); (40-75 years old covered at \$0)
<i>simvastatin tab 80 mg</i>	1	QL (30 tabs/30 days)
ZOCOR TAB 10MG	3	ST, QL (30 tabs/30 days); Try generic statin
ZOCOR TAB 20MG	3	ST, QL (30 tabs/30 days); Try generic statin
ZOCOR TAB 40MG	3	ST, QL (30 tabs/30 days); Try generic statin
ZOCOR TAB 80MG	3	ST, QL (30 tabs/30 days); Try generic statin

INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS

<i>ezetimibe tab 10 mg</i>	1	QL (30 tabs/30 days)
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NICOTINIC ACID DERIVATIVES

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

ANTIHYPERTENSIVES**ACE INHIBITORS**

<i>ACCUPRIL TAB 5MG</i>	3
<i>ACCUPRIL TAB 10MG</i>	3
<i>ACCUPRIL TAB 20MG</i>	3
<i>ACCUPRIL TAB 40MG</i>	3
<i>ALTACE CAP 1.25MG</i>	3
<i>ALTACE CAP 2.5MG</i>	3
<i>ALTACE CAP 5MG</i>	3
<i>ALTACE CAP 10MG</i>	3
<i>benazepril hcl tab 5 mg</i>	1
<i>benazepril hcl tab 10 mg</i>	1
<i>benazepril hcl tab 20 mg</i>	1
<i>benazepril hcl tab 40 mg</i>	1
<i>captopril tab 12.5 mg</i>	1
<i>captopril tab 25 mg</i>	1
<i>captopril tab 50 mg</i>	1
<i>captopril tab 100 mg</i>	1
<i>enalapril maleate tab 2.5 mg</i>	1
<i>enalapril maleate tab 5 mg</i>	1
<i>enalapril maleate tab 10 mg</i>	1
<i>enalapril maleate tab 20 mg</i>	1
<i>fosinopril sodium tab 10 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
LOTENSIN TAB 10MG	3	
LOTENSIN TAB 20MG	3	
LOTENSIN TAB 40MG	3	
<i>moexipril hcl tab 7.5 mg</i>	1	
<i>moexipril hcl tab 15 mg</i>	1	
<i>perindopril erbumine tab 2 mg</i>	1	
<i>perindopril erbumine tab 4 mg</i>	1	
<i>perindopril erbumine tab 8 mg</i>	1	
PRINVIL TAB 20MG	3	
QBRELIS SOL 1MG/ML	3	(Covered for ages 6 to 12 years of age)
<i>quinapril hcl tab 5 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
VASOTEC TAB 2.5MG	3	
VASOTEC TAB 5MG	3	
VASOTEC TAB 10MG	3	
VASOTEC TAB 20MG	3	
ZESTRIL TAB 2.5MG	3	
ZESTRIL TAB 5MG	3	
ZESTRIL TAB 10MG	3	
ZESTRIL TAB 20MG	3	
ZESTRIL TAB 30MG	3	
ZESTRIL TAB 40MG	3	
AGENTS FOR PHEOCHROMOCYTOMA		
DIBENZYLINE CAP 10MG	3	
<i>phenoxybenzamine hcl cap 10 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND TAB 4MG	3	

Drug Name	Drug Tier Requirements/Limits
ATACAND TAB 8MG	3
ATACAND TAB 16MG	3
ATACAND TAB 32MG	3
AVAPRO TAB 75MG	3
AVAPRO TAB 150MG	3
AVAPRO TAB 300MG	3
<i>candesartan cilexetil tab 4 mg</i>	1
<i>candesartan cilexetil tab 8 mg</i>	1
<i>candesartan cilexetil tab 16 mg</i>	1
<i>candesartan cilexetil tab 32 mg</i>	1
COZAAR TAB 25MG	3
COZAAR TAB 50MG	3
COZAAR TAB 100MG	3
DIOVAN TAB 40MG	3
DIOVAN TAB 80MG	3
DIOVAN TAB 160MG	3
DIOVAN TAB 320MG	3
EDARBI TAB 40MG	3
EDARBI TAB 80MG	3
<i>irbesartan tab 75 mg</i>	1
<i>irbesartan tab 150 mg</i>	1
<i>irbesartan tab 300 mg</i>	1
<i>losartan potassium tab 25 mg</i>	1
<i>losartan potassium tab 50 mg</i>	1
<i>losartan potassium tab 100 mg</i>	1
MICARDIS TAB 20MG	3
MICARDIS TAB 40MG	3
MICARDIS TAB 80MG	3
<i>olmesartan medoxomil tab 5 mg</i>	1
<i>olmesartan medoxomil tab 20 mg</i>	1
<i>olmesartan medoxomil tab 40 mg</i>	1
<i>telmisartan tab 20 mg</i>	1
<i>telmisartan tab 40 mg</i>	1
<i>telmisartan tab 80 mg</i>	1
<i>valsartan tab 40 mg</i>	1
<i>valsartan tab 80 mg</i>	1
<i>valsartan tab 160 mg</i>	1
<i>valsartan tab 320 mg</i>	1

ANTIADRENERGIC ANTIHYPERTENSIVES

<i>clonidine hcl tab 0.1 mg</i>	1
<i>clonidine hcl tab 0.2 mg</i>	1
<i>clonidine hcl tab 0.3 mg</i>	1
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>methyldopa tab 250 mg</i>	1	
<i>methyldopa tab 500 mg</i>	1	
<i>MINIPRESS CAP 1MG</i>	3	
<i>MINIPRESS CAP 2MG</i>	3	
<i>MINIPRESS CAP 5MG</i>	3	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	

ANTIHYPERTENSIVE COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1
<i>AVALIDE TAB 150-12.5</i>	3
<i>AVALIDE TAB 300-12.5</i>	3
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1
<i>DIOVAN HCT TAB 80/12.5</i>	3
<i>DIOVAN HCT TAB 160-12.5</i>	3
<i>DIOVAN HCT TAB 160-25MG</i>	3

Drug Name	Drug Tier	Requirements/Limits
DIOVAN HCT TAB 320-12.5	3	
DIOVAN HCT TAB 320-25MG	3	
DUTOPROL TAB 25-12.5	3	
DUTOPROL TAB 50-12.5	3	
DUTOPROL TAB 100-12.5	3	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
HYZAAR TAB 50-12.5	3	
HYZAAR TAB 100-12.5	3	
HYZAAR TAB 100-25	3	
<i>irbesartan-hydrochlorothiazide tab 150- 12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300- 12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50- 25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100- 25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100- 50 mg</i>	1	
MICARDIS HCT TAB 40/12.5	3	
MICARDIS HCT TAB 80-25MG	3	
MICARDIS HCT TAB 80/12.5	3	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
olmesartanamlodipinehydrochlorothiazide tab 20-5-12.5 mg	1	
olmesartanamlodipinehydrochlorothiazide tab 40-5-12.5 mg	1	
olmesartanamlodipinehydrochlorothiazide tab 40-5-25 mg	1	
olmesartanamlodipinehydrochlorothiazide tab 40-10-12.5 mg	1	
olmesartanamlodipinehydrochlorothiazide tab 40-10-25 mg	1	
quinaprilhydrochlorothiazide tab 10-12.5 mg	1	
quinaprilhydrochlorothiazide tab 20-12.5 mg	1	
quinaprilhydrochlorothiazide tab 20-25 mg	1	
TEKTURNA HCT TAB 150-12.5	3	
TEKTURNA HCT TAB 150-25MG	3	
TEKTURNA HCT TAB 300-12.5	3	
TEKTURNA HCT TAB 300-25MG	3	
telmisartanamlodipine tab 40-5 mg	1	
telmisartanamlodipine tab 40-10 mg	1	
telmisartanamlodipine tab 80-5 mg	1	
telmisartanamlodipine tab 80-10 mg	1	
telmisartanhydrochlorothiazide tab 40- 12.5 mg	1	
telmisartanhydrochlorothiazide tab 80- 12.5 mg	1	
telmisartanhydrochlorothiazide tab 80-25 mg	1	
TENORETIC TAB 50	3	
TENORETIC TAB 100	3	
trandolaprilverapamil hcl tab er 1-240 mg	1	
trandolaprilverapamil hcl tab er 2-180 mg	1	
trandolaprilverapamil hcl tab er 2-240 mg	1	
trandolaprilverapamil hcl tab er 4-240 mg	1	
valsartanhydrochlorothiazide tab 80-12.5 mg	1	
valsartanhydrochlorothiazide tab 160-12.5 mg	1	
valsartanhydrochlorothiazide tab 160-25 mg	1	
valsartanhydrochlorothiazide tab 320-12.5 mg	1	
valsartanhydrochlorothiazide tab 320-25 mg	1	
ZIAC TAB 2.5/6.25	3	
ZIAC TAB 5-6.25MG	3	

Drug Name	Drug Tier	Requirements/Limits
ZIAC TAB 10/6.25	3	
DIRECT RENIN INHIBITORS		
aliskiren fumarate tab 150 mg (base equivalent)	1	
aliskiren fumarate tab 300 mg (base equivalent)	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone tab 25 mg	1	
eplerenone tab 50 mg	1	
INSPRA TAB 25MG	3	
INSPRA TAB 50MG	3	
VASODILATORS		
hydralazine hcl tab 10 mg	1	
hydralazine hcl tab 25 mg	1	
hydralazine hcl tab 50 mg	1	
hydralazine hcl tab 100 mg	1	
minoxidil tab 2.5 mg	1	
minoxidil tab 10 mg	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone-proguanil hcl tab 62.5-25 mg	1	
atovaquone-proguanil hcl tab 250-100 mg	1	
COARTEM TAB 20-120MG	3	
ANTIMALARIALS		
chloroquine phosphate tab 250 mg	1	
chloroquine phosphate tab 500 mg	1	
DARAPRIM TAB 25MG	3	
hydroxychloroquine sulfate tab 200 mg	1	
mefloquine hcl tab 250 mg	1	
primaquine phosphate tab 26.3 mg (15 mg base)	1	
PRIMAQUINE TAB 26.3MG	3	
pyrimethamine tab 25 mg	1	
quinine sulfate cap 324 mg	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE TAB 10MG	5	SP, PA
pyridostigmine bromide oral soln 60 mg/5ml	1	
pyridostigmine bromide tab 30 mg	1	
pyridostigmine bromide tab 60 mg	1	
pyridostigmine bromide tab er 180 mg	1	
RUZURGI TAB 10MG	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
PASER GRA 4GM	3	
PRIFTIN TAB 150MG	3	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
TRECATOR TAB 250MG	3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
ALKERAN TAB 2MG	OC	
<i>cyclophosphamide cap 25 mg</i>	OC	
<i>cyclophosphamide cap 50 mg</i>	OC	
GLEOSTINE CAP 10MG	OC	
GLEOSTINE CAP 40MG	OC	
GLEOSTINE CAP 100MG	OC	
LEUKERAN TAB 2MG	OC	
<i>melphalan tab 2 mg</i>	OC	
MYLERAN TAB 2MG	OC	
TEMODAR CAP 100MG	OC	SP, PA
TEMODAR CAP 140MG	OC	SP, PA
TEMODAR CAP 180MG	OC	SP, PA
TEMODAR CAP 250MG	OC	SP, PA
<i>temozolomide cap 5 mg</i>	OC	SP, PA
<i>temozolomide cap 20 mg</i>	OC	SP, PA
<i>temozolomide cap 100 mg</i>	OC	SP, PA
<i>temozolomide cap 140 mg</i>	OC	SP, PA
<i>temozolomide cap 180 mg</i>	OC	SP, PA
<i>temozolomide cap 250 mg</i>	OC	SP, PA
ANTIMETABOLITES		
<i>capecitabine tab 150 mg</i>	OC	SP
<i>capecitabine tab 500 mg</i>	OC	SP
<i>mercaptopurine tab 50 mg</i>	OC	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	OC	
ONUREG TAB 200MG	OC	SP, PA
ONUREG TAB 300MG	OC	SP, PA
PURIXAN SUS 20MG/ML	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
TABLOID TAB 40MG	OC	
TREXALL TAB 5MG	OC	
TREXALL TAB 7.5MG	OC	
TREXALL TAB 10MG	OC	
TREXALL TAB 15MG	OC	
XATMEP SOL 2.5MG/ML	OC	SP, PA
XELODA TAB 150MG	OC	SP
XELODA TAB 500MG	OC	SP

ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS

INLYTA TAB 1MG	OC	SP, PA
INLYTA TAB 5MG	OC	SP, PA
LENVIMA CAP 4MG	OC	SP, PA
LENVIMA CAP 8 MG	OC	SP, PA
LENVIMA CAP 10 MG	OC	SP, PA
LENVIMA CAP 12MG	OC	SP, PA
LENVIMA CAP 14 MG	OC	SP, PA
LENVIMA CAP 18 MG	OC	SP, PA
LENVIMA CAP 20 MG	OC	SP, PA
LENVIMA CAP 24 MG	OC	SP, PA

ANTINEOPLASTIC - ANTI-HER2 AGENTS

TUKYSA TAB 50MG	OC	SP, PA
TUKYSA TAB 150MG	OC	SP, PA

ANTINEOPLASTIC - BCL-2 INHIBITORS

VENCLEXTA TAB 10MG	OC	SP, PA
VENCLEXTA TAB 50MG	OC	SP, PA
VENCLEXTA TAB 100MG	OC	SP, PA
VENCLEXTA TAB START PK	OC	SP, PA

ANTINEOPLASTIC - EGFR INHIBITORS

<i>erlotinib hcl tab 25 mg (base equivalent)</i>	OC	SP, PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	OC	SP, PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	OC	SP, PA
EXKIVITY CAP 40MG	OC	SP, PA
<i>gefitinib tab 250 mg</i>	OC	SP, PA
GILOTTRIF TAB 20MG	OC	SP, PA
GILOTTRIF TAB 30MG	OC	SP, PA
GILOTTRIF TAB 40MG	OC	SP, PA
IRESSA TAB 250MG	OC	SP, PA
TAGRISSO TAB 40MG	OC	SP, PA
TAGRISSO TAB 80MG	OC	SP, PA
TARCEVA TAB 25MG	OC	SP, PA
TARCEVA TAB 100MG	OC	SP, PA
TARCEVA TAB 150MG	OC	SP, PA
VIZIMPRO TAB 15MG	OC	SP, PA
VIZIMPRO TAB 30MG	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
VIZIMPRO TAB 45MG	OC	SP, PA
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO TAB 25MG	OC	SP, PA
DAURISMO TAB 100MG	OC	SP, PA
ERIVEDGE CAP 150MG	OC	SP, PA
ODOMZO CAP 200MG	OC	SP, PA
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	OC	SP, PA
<i>abiraterone acetate tab 500 mg</i>	OC	SP, PA
<i>anastrozole tab 1 mg</i>	OC	PA; (PA for males only)
ARIMIDEX TAB 1MG	OC	PA; (PA for males only)
AROMASIN TAB 25MG	OC	PA; (PA for males only)
<i>bicalutamide tab 50 mg</i>	OC	
CASODEX TAB 50MG	OC	
EMCYT CAP 140MG	OC	
ERLEADA TAB 60MG	OC	SP, PA
ERLEADA TAB 240MG	OC	SP, PA
EULEXIN CAP 125MG	OC	
<i>exemestane tab 25 mg</i>	OC	PA; (PA for males only)
FARESTON TAB 60MG	OC	
FEMARA TAB 2.5MG	OC	PA; (PA for males only)
<i>flutamide cap 125 mg</i>	OC	
<i>letrozole tab 2.5 mg</i>	OC	PA; (PA for males only)
LYSODREN TAB 500MG	OC	
<i>megestrol acetate susp 40 mg/ml</i>	OC	
<i>megestrol acetate tab 20 mg</i>	OC	
<i>megestrol acetate tab 40 mg</i>	OC	
NILANDRON TAB 150MG	OC	
<i>nilutamide tab 150 mg</i>	OC	
NUBEQA TAB 300MG	OC	SP, PA
ORGOVYX TAB 120MG	OC	SP, PA
ORSERDU TAB 86MG	OC	SP, PA
ORSERDU TAB 345MG	OC	SP, PA
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	OC	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	OC	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	OC	
XTANDI CAP 40MG	OC	SP, PA
XTANDI TAB 40MG	OC	SP, PA
XTANDI TAB 80MG	OC	SP, PA
YONSA TAB 125MG	OC	SP, PA
ZYTIGA TAB 250MG	OC	SP, PA
ZYTIGA TAB 500MG	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG TAB 40MG	OC	SP, PA
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	OC	SP, PA
POMALYST CAP 2MG	OC	SP, PA
POMALYST CAP 3MG	OC	SP, PA
POMALYST CAP 4MG	OC	SP, PA
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT TAB 25MG	OC	SP, PA
AYVAKIT TAB 50MG	OC	SP, PA
AYVAKIT TAB 100MG	OC	SP, PA
AYVAKIT TAB 200MG	OC	SP, PA
AYVAKIT TAB 300MG	OC	SP, PA
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 40MG	OC	SP, PA
XPOVIO PAK 50MG	OC	SP, PA
XPOVIO PAK 60MG	OC	SP, PA
XPOVIO PAK 80MG	OC	SP, PA
ANTINEOPLASTIC COMBINATIONS		
INQOVI TAB 35-100MG	OC	SP, PA
KISQALI 200 PAK FEMARA	OC	SP, PA
KISQALI 400 PAK FEMARA	OC	SP, PA
KISQALI 600 PAK FEMARA	OC	SP, PA
LONSURF TAB 15-6.14	OC	SP, PA
LONSURF TAB 20-8.19	OC	SP, PA
ANTINEOPLASTIC ENZYME INHIBITORS		
AFINITOR DIS TAB 2MG	OC	SP, PA
AFINITOR DIS TAB 3MG	OC	SP, PA
AFINITOR DIS TAB 5MG	OC	SP, PA
AFINITOR TAB 2.5MG	OC	SP, PA
AFINITOR TAB 5MG	OC	SP, PA
AFINITOR TAB 7.5MG	OC	SP, PA
AFINITOR TAB 10MG	OC	SP, PA
ALECensa CAP 150MG	OC	SP, PA
ALUNBRIG PAK	OC	SP, PA
ALUNBRIG TAB 30MG	OC	SP, PA
ALUNBRIG TAB 90MG	OC	SP, PA
ALUNBRIG TAB 180MG	OC	SP, PA
BALVERSA TAB 3MG	OC	SP, PA
BALVERSA TAB 4MG	OC	SP, PA
BALVERSA TAB 5MG	OC	SP, PA
BOSULIF TAB 100MG	OC	SP, PA
BOSULIF TAB 400MG	OC	SP, PA
BOSULIF TAB 500MG	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
BRAFTOVI CAP 75MG	OC	SP, PA, QL (180 caps/30 days)
BRUKINSA CAP 80MG	OC	SP, PA
CABOMETYX TAB 20MG	OC	SP, PA
CABOMETYX TAB 40MG	OC	SP, PA
CABOMETYX TAB 60MG	OC	SP, PA
CALQUENCE CAP 100MG	OC	SP, PA
CALQUENCE TAB 100MG	OC	SP, PA
CAPRELSA TAB 100MG	OC	SP, PA
CAPRELSA TAB 300MG	OC	SP, PA
COMETRIQ KIT 60MG	OC	SP, PA
COMETRIQ KIT 100MG	OC	SP, PA
COMETRIQ KIT 140MG	OC	SP, PA
COPIKTRA CAP 15MG	OC	SP, PA
COPIKTRA CAP 25MG	OC	SP, PA
COTELLIC TAB 20MG	OC	SP, PA
<i>everolimus tab 2.5 mg</i>	OC	SP, PA
<i>everolimus tab 5 mg</i>	OC	SP, PA
<i>everolimus tab 7.5 mg</i>	OC	SP, PA
<i>everolimus tab 10 mg</i>	OC	SP, PA
<i>everolimus tab for oral susp 2 mg</i>	OC	SP, PA
<i>everolimus tab for oral susp 3 mg</i>	OC	SP, PA
<i>everolimus tab for oral susp 5 mg</i>	OC	SP, PA
FARYDAK CAP 10MG	OC	SP, PA
FARYDAK CAP 15MG	OC	SP, PA
FARYDAK CAP 20MG	OC	SP, PA
FOTIVDA CAP 0.89MG	OC	SP, PA
FOTIVDA CAP 1.34MG	OC	SP, PA
GAVRETO CAP 100MG	OC	SP, PA
GLEEVEC TAB 100MG	OC	SP, PA
GLEEVEC TAB 400MG	OC	SP, PA
IBRANCE CAP 75MG	OC	SP, PA
IBRANCE CAP 100MG	OC	SP, PA
IBRANCE CAP 125MG	OC	SP, PA
IBRANCE TAB 75MG	OC	SP, PA
IBRANCE TAB 100MG	OC	SP, PA
IBRANCE TAB 125MG	OC	SP, PA
ICLUSIG TAB 10MG	OC	SP, PA
ICLUSIG TAB 15MG	OC	SP, PA
ICLUSIG TAB 30MG	OC	SP, PA
ICLUSIG TAB 45MG	OC	SP, PA
IDHIFA TAB 50MG	OC	SP, PA
IDHIFA TAB 100MG	OC	SP, PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	OC	SP, PA
IMBRUVICA CAP 70MG	OC	SP, PA
IMBRUVICA CAP 140MG	OC	SP, PA
IMBRUVICA SUS 70MG/ML	OC	SP, PA
IMBRUVICA TAB 140MG	OC	SP, PA
IMBRUVICA TAB 280MG	OC	SP, PA
IMBRUVICA TAB 420MG	OC	SP, PA
IMBRUVICA TAB 560MG	OC	SP, PA
INREBIC CAP 100MG	OC	SP, PA
JAKAFI TAB 5MG	OC	SP, PA
JAKAFI TAB 10MG	OC	SP, PA
JAKAFI TAB 15MG	OC	SP, PA
JAKAFI TAB 20MG	OC	SP, PA
JAKAFI TAB 25MG	OC	SP, PA
JAYPIRCA TAB 50MG	OC	SP, PA
JAYPIRCA TAB 100MG	OC	SP, PA
KISQALI TAB 200DOSE	OC	SP, PA
KISQALI TAB 400DOSE	OC	SP, PA
KISQALI TAB 600DOSE	OC	SP, PA
KOSELUGO CAP 10MG	5	SP, PA
KOSELUGO CAP 25MG	5	SP, PA
KRAZATI TAB 200MG	OC	SP, PA
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	OC	SP, PA
LORBRENA TAB 25MG	OC	SP, PA
LORBRENA TAB 100MG	OC	SP, PA
LUMAKRAS TAB 120MG	OC	SP, PA
LUMAKRAS TAB 320MG	OC	SP, PA
LYNPARZA TAB 100MG	OC	SP, PA
LYNPARZA TAB 150MG	OC	SP, PA
LYTGOBI TAB 4MG	OC	SP, PA
MEKINIST SOL 0.05/ML	OC	SP, PA
MEKINIST TAB 0.5MG	OC	SP, PA
MEKINIST TAB 2MG	OC	SP, PA
MEKTOVI TAB 15MG	OC	SP, PA, QL (180 tabs/30 days)
NERLYNX TAB 40MG	OC	SP, PA
NEXAVAR TAB 200MG	OC	SP, PA
NINLARO CAP 2.3MG	OC	SP, PA
NINLARO CAP 3MG	OC	SP, PA
NINLARO CAP 4MG	OC	SP, PA
PEMAZYRE TAB 4.5MG	OC	SP, PA
PEMAZYRE TAB 9MG	OC	SP, PA
PEMAZYRE TAB 13.5MG	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
PIQRAY 200MG TAB DOSE	OC	SP, PA
PIQRAY 250MG TAB DOSE	OC	SP, PA
PIQRAY 300MG TAB DOSE	OC	SP, PA
QINLOCK TAB 50MG	OC	SP, PA
RETEVMO CAP 40MG	OC	SP, PA
RETEVMO CAP 80MG	OC	SP, PA
REZLIDHIA CAP 150MG	OC	SP, PA
ROZLYTREK CAP 100MG	OC	SP, PA
ROZLYTREK CAP 200MG	OC	SP, PA
RUBRACA TAB 200MG	OC	SP, PA
RUBRACA TAB 250MG	OC	SP, PA
RUBRACA TAB 300MG	OC	SP, PA
RYDAPT CAP 25MG	OC	SP, PA
SCEMBLIX TAB 20MG	OC	SP, PA
SCEMBLIX TAB 40MG	OC	SP, PA
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	OC	SP, PA
SPRYCEL TAB 20MG	OC	SP, PA
SPRYCEL TAB 50MG	OC	SP, PA
SPRYCEL TAB 70MG	OC	SP, PA
SPRYCEL TAB 80MG	OC	SP, PA
SPRYCEL TAB 100MG	OC	SP, PA
SPRYCEL TAB 140MG	OC	SP, PA
STIVARGA TAB 40MG	OC	SP, PA
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	OC	SP, PA
<i>sunitinib malate cap 25 mg (base equivalent)</i>	OC	SP, PA
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	OC	SP, PA
<i>sunitinib malate cap 50 mg (base equivalent)</i>	OC	SP, PA
SUTENT CAP 12.5MG	OC	SP, PA
SUTENT CAP 25MG	OC	SP, PA
SUTENT CAP 37.5MG	OC	SP, PA
SUTENT CAP 50MG	OC	SP, PA
TABRECTA TAB 150MG	OC	SP, PA
TABRECTA TAB 200MG	OC	SP, PA
TAFINLAR CAP 50MG	OC	SP, PA
TAFINLAR CAP 75MG	OC	SP, PA
TAFINLAR TAB 10MG	OC	SP, PA
TALZENNA CAP 0.5MG	OC	SP, PA
TALZENNA CAP 0.25MG	OC	SP, PA
TALZENNA CAP 0.75MG	OC	SP, PA
TALZENNA CAP 1MG	OC	SP, PA

Drug Name	Drug Tier	Requirements/Limits
TASIGNA CAP 50MG	OC	SP, PA
TASIGNA CAP 150MG	OC	SP, PA
TASIGNA CAP 200MG	OC	SP, PA
TAZVERIK TAB 200MG	OC	SP, PA
TEPMETKO TAB 225MG	OC	SP, PA
TIBSOVO TAB 250MG	OC	SP, PA
TRUSELTIQ CAP 50MG	OC	SP, PA
TRUSELTIQ CAP 75MG	OC	SP, PA
TRUSELTIQ CAP 100MG	OC	SP, PA
TRUSELTIQ CAP 125MG	OC	SP, PA
TURALIO CAP 200MG	OC	SP, PA
TYKERB TAB 250MG	OC	SP, PA
UKONIQ TAB 200MG	OC	SP, PA
VERZENIO TAB 50MG	OC	SP, PA
VERZENIO TAB 100MG	OC	SP, PA
VERZENIO TAB 150MG	OC	SP, PA
VERZENIO TAB 200MG	OC	SP, PA
VITRAKVI CAP 25MG	OC	SP, PA
VITRAKVI CAP 100MG	OC	SP, PA
VITRAKVI SOL 20MG/ML	OC	SP, PA
VONJO CAP 100MG	OC	SP, PA
VOTRIENT TAB 200MG	OC	SP, PA
XALKORI CAP 200MG	OC	SP, PA
XALKORI CAP 250MG	OC	SP, PA
XOSPATA TAB 40MG	OC	SP, PA
ZEJULA CAP 100MG	OC	SP, PA
ZELBORAF TAB 240MG	OC	SP, PA
ZOLINZA CAP 100MG	OC	SP, PA
ZYDELIG TAB 100MG	OC	SP, PA
ZYDELIG TAB 150MG	OC	SP, PA
ZYKADIA TAB 150MG	OC	SP, PA

ANTINEOPLASTICS MISC.

<i>bexarotene cap 75 mg</i>	OC	SP, PA
<i>HYDREA CAP 500MG</i>	OC	
<i>hydroxyurea cap 500 mg</i>	OC	
<i>MATULANE CAP 50MG</i>	OC	
<i>TARGRETIN CAP 75MG</i>	OC	SP, PA
<i>tretinoin cap 10 mg</i>	OC	

CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS

<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>	1
<i>MESNEX TAB 400MG</i>	3

Drug Name	Drug Tier	Requirements/Limits
MITOTIC INHIBITORS		
etoposide cap 50 mg	OC	
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP 0.25MG	OC	SP, PA
HYCAMTIN CAP 1MG	OC	SP, PA
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
carbidopa tab 25 mg	1	
LODOSYN TAB 25MG	3	
ANTIPARKINSON ANTICHOLINERGICS		
benztropine mesylate tab 0.5 mg	1	
benztropine mesylate tab 1 mg	1	
benztropine mesylate tab 2 mg	1	
trihexyphenidyl hcl oral soln 0.4 mg/ml	1	
trihexyphenidyl hcl tab 2 mg	1	
trihexyphenidyl hcl tab 5 mg	1	
ANTIPARKINSON COMT INHIBITORS		
COMTAN TAB 200MG	3	
entacapone tab 200 mg	1	
TASMAR TAB 100MG	3	
tolcapone tab 100 mg	1	
ANTIPARKINSON DOPAMINERGICS		
amantadine hcl cap 100 mg	1	
amantadine hcl soln 50 mg/5ml	1	
amantadine hcl tab 100 mg	1	
bromocriptine mesylate cap 5 mg (base equivalent)	1	
bromocriptine mesylate tab 2.5 mg (base equivalent)	1	
carbidopa & levodopa orally disintegrating tab 10-100 mg	1	
carbidopa & levodopa orally disintegrating tab 25-100 mg	1	
carbidopa & levodopa orally disintegrating tab 25-250 mg	1	
carbidopa & levodopa tab 10-100 mg	1	
carbidopa & levodopa tab 25-100 mg	1	
carbidopa & levodopa tab 25-250 mg	1	
carbidopa & levodopa tab er 25-100 mg	1	
carbidopa & levodopa tab er 50-200 mg	1	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	1	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	1	

Drug Name	Drug Tier Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1
<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
DHIVY TAB 25-100MG	3
NEUPRO DIS 1MG/24HR	3
NEUPRO DIS 2MG/24HR	3
NEUPRO DIS 3MG/24HR	3
NEUPRO DIS 4MG/24HR	3
NEUPRO DIS 6MG/24HR	3
NEUPRO DIS 8MG/24HR	3
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1
<i>pramipexole dihydrochloride tab 1 mg</i>	1
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	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>	1
<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

Drug Name	Drug Tier Requirements/Limits
<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	3
RYTARY CAP 145MG	3
RYTARY CAP 195MG	3
RYTARY CAP 245MG	3
SINEMET TAB 10-100MG	3
SINEMET TAB 25-100MG	3
STALEVO 50 TAB	3
STALEVO 75 TAB	3
STALEVO 100 TAB	3
STALEVO 125 TAB	3
STALEVO 150 TAB	3
STALEVO 200 TAB	3

ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS

<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1
<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
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
LITHOBID TAB 300MG CR	2

ANTIPSYCHOTICS - MISC.

EQUETRO CAP 100MG	3
EQUETRO CAP 200MG	3
EQUETRO CAP 300MG	3
GEODON CAP 20MG	3
GEODON CAP 40MG	3
GEODON CAP 60MG	3
GEODON CAP 80MG	3
LATUDA TAB 20MG	3
LATUDA TAB 40MG	3
LATUDA TAB 60MG	3

Drug Name	Drug Tier	Requirements/Limits
LATUDA TAB 80MG	3	
LATUDA TAB 120MG	3	
<i>lurasidone hcl tab 20 mg</i>	1	
<i>lurasidone hcl tab 40 mg</i>	1	
<i>lurasidone hcl tab 60 mg</i>	1	
<i>lurasidone hcl tab 80 mg</i>	1	
<i>lurasidone hcl tab 120 mg</i>	1	
NUPLAZID CAP 34MG	5	SP, PA
NUPLAZID TAB 10MG	5	SP, PA
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	
BENZISOXAZOLES		
FANAPT PAK	3	
FANAPT TAB 1MG	3	
FANAPT TAB 2MG	3	
FANAPT TAB 4MG	3	
FANAPT TAB 6MG	3	
FANAPT TAB 8MG	3	
FANAPT TAB 10MG	3	
FANAPT TAB 12MG	3	
<i>paliperidone tab er 24hr 1.5 mg</i>	1	
<i>paliperidone tab er 24hr 3 mg</i>	1	
<i>paliperidone tab er 24hr 6 mg</i>	1	
<i>paliperidone tab er 24hr 9 mg</i>	1	
RISPERDAL SOL 1MG/ML	3	
RISPERDAL TAB 0.5MG	3	
RISPERDAL TAB 1MG	3	
RISPERDAL TAB 2MG	3	
RISPERDAL TAB 3MG	3	
RISPERDAL TAB 4MG	3	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>risperidone tab 4 mg</i>	1	
BUTYROPHENONES		
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
DIBENZAPINES		
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	
<i>clozapine tab 25 mg</i>	1	
<i>clozapine tab 50 mg</i>	1	
<i>clozapine tab 100 mg</i>	1	
<i>clozapine tab 200 mg</i>	1	
<i>loxapine succinate cap 5 mg</i>	1	
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	
<i>olanzapine orally disintegrating tab 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 15 mg</i>	1	
<i>olanzapine orally disintegrating tab 20 mg</i>	1	
<i>olanzapine tab 2.5 mg</i>	1	
<i>olanzapine tab 5 mg</i>	1	
<i>olanzapine tab 7.5 mg</i>	1	
<i>olanzapine tab 10 mg</i>	1	
<i>olanzapine tab 15 mg</i>	1	
<i>olanzapine tab 20 mg</i>	1	
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab 100 mg</i>	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
SAPHRIS SUB 2.5MG	3
SAPHRIS SUB 5MG	3
SAPHRIS SUB 10MG	3
SEROQUEL TAB 25MG	3
SEROQUEL TAB 50MG	3
SEROQUEL TAB 100MG	3
SEROQUEL TAB 200MG	3
SEROQUEL TAB 300MG	3
SEROQUEL TAB 400MG	3
ZYPREXA TAB 2.5MG	3
ZYPREXA TAB 5MG	3
ZYPREXA TAB 7.5MG	3
ZYPREXA TAB 10MG	3
ZYPREXA TAB 15MG	3
ZYPREXA TAB 20MG	3
ZYPREXA ZYDI TAB 5MG	3
ZYPREXA ZYDI TAB 10MG	3
ZYPREXA ZYDI TAB 15MG	3
ZYPREXA ZYDI TAB 20MG	3

PHENOTHIAZINES

<i>chlorpromazine hcl tab 10 mg</i>	1
<i>chlorpromazine hcl tab 25 mg</i>	1
<i>chlorpromazine hcl tab 50 mg</i>	1
<i>chlorpromazine hcl tab 100 mg</i>	1
<i>chlorpromazine hcl tab 200 mg</i>	1
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1
<i>fluphenazine hcl tab 1 mg</i>	1
<i>fluphenazine hcl tab 2.5 mg</i>	1
<i>fluphenazine hcl tab 5 mg</i>	1
<i>fluphenazine hcl tab 10 mg</i>	1
<i>perphenazine tab 2 mg</i>	1
<i>perphenazine tab 4 mg</i>	1
<i>perphenazine tab 8 mg</i>	1
<i>perphenazine tab 16 mg</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>	1
<i>thioridazine hcl tab 10 mg</i>	1
<i>thioridazine hcl tab 25 mg</i>	1
<i>thioridazine hcl tab 50 mg</i>	1
<i>thioridazine hcl tab 100 mg</i>	1
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1

Drug Name	Drug Tier Requirements/Limits
trifluoperazine hcl tab 2 mg (base equivalent)	1
trifluoperazine hcl tab 5 mg (base equivalent)	1
trifluoperazine hcl tab 10 mg (base equivalent)	1
QUINOLINONE DERIVATIVES	
aripiprazole oral solution 1 mg/ml	1
aripiprazole orally disintegrating tab 10 mg	1
aripiprazole orally disintegrating tab 15 mg	1
aripiprazole tab 2 mg	1
aripiprazole tab 5 mg	1
aripiprazole tab 10 mg	1
aripiprazole tab 15 mg	1
aripiprazole tab 20 mg	1
aripiprazole tab 30 mg	1
REXULTI TAB 0.5MG	3
REXULTI TAB 0.25MG	3
REXULTI TAB 1MG	3
REXULTI TAB 2MG	3
REXULTI TAB 3MG	3
REXULTI TAB 4MG	3
THIOXANTHENES	
thiothixene cap 1 mg	1
thiothixene cap 2 mg	1
thiothixene cap 5 mg	1
thiothixene cap 10 mg	1
ANTIVIRALS	
ANTIRETROVIRALS	
abacavir sulfate soln 20 mg/ml (base equiv)	1
abacavir sulfate tab 300 mg (base equiv)	1
abacavir sulfate-lamivudine tab 600-300 mg	1
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg	1
APTIVUS CAP 250MG	2
atazanavir sulfate cap 150 mg (base equiv)	1
atazanavir sulfate cap 200 mg (base equiv)	1
atazanavir sulfate cap 300 mg (base equiv)	1
BIKTARVY TAB	2
COMPLERA TAB	3
darunavir tab 600 mg	1
darunavir tab 800 mg	1
DELSTRIGO TAB	3

Drug Name	Drug Tier	Requirements/Limits
DESCOVI TAB 120-15MG	2	
DESCOVI TAB 200/25MG	2	coverage for pre-exposure prophylaxis under ACA
DOVATO TAB 50-300MG	3	
<i>efavirenz cap 50 mg</i>	1	
<i>efavirenz cap 200 mg</i>	1	
<i>efavirenz tab 600 mg</i>	1	
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	
<i>emtricitabine caps 200 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	coverage for pre-exposure prophylaxis under ACA
EMTRIVA CAP 200MG	2	
EPIVIR SOL 10MG/ML	3	
<i>etravirine tab 100 mg</i>	1	
<i>etravirine tab 200 mg</i>	1	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	
GENVOYA TAB	2	
INTELENCE TAB 25MG	2	
INVIRASE TAB 500MG	2	
ISENTRESS HD TAB 600MG	2	
ISENTRESS TAB 400MG	2	
JULUCA TAB 50-25MG	3	
<i>lamivudine oral soln 10 mg/ml</i>	1	
<i>lamivudine tab 150 mg</i>	1	
<i>lamivudine tab 300 mg</i>	1	
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	
LEXIVA TAB 700MG	2	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	
<i>maraviroc tab 150 mg</i>	1	
<i>maraviroc tab 300 mg</i>	1	
<i>nevirapine susp 50 mg/5ml</i>	1	
<i>nevirapine tab 200 mg</i>	1	
<i>nevirapine tab er 24hr 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nevirapine tab er 24hr 400 mg</i>	1	
ODEFSEY TAB	2	
PIFELTRO TAB 100MG	3	
PREZCOBIX TAB 800-150	3	
PREZISTA TAB 75MG	2	
PREZISTA TAB 150MG	2	
PREZISTA TAB 600MG	2	
PREZISTA TAB 800MG	2	
<i>ritonavir tab 100 mg</i>	1	
SELZENTRY SOL 20MG/ML	3	
SELZENTRY TAB 25MG	2	
SELZENTRY TAB 75MG	2	
SELZENTRY TAB 150MG	2	
SELZENTRY TAB 300MG	2	
<i>stavudine cap 15 mg</i>	1	
<i>stavudine cap 20 mg</i>	1	
<i>stavudine cap 30 mg</i>	1	
<i>stavudine cap 40 mg</i>	1	
STRIBILD TAB	3	
SUNLENCA TAB 300MG	3	
SUSTIVA CAP 50MG	2	
SUSTIVA CAP 200MG	2	
SUSTIVA TAB 600MG	2	
SYMTUZA TAB	3	
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	
TIVICAY PD TAB 5MG	2	
TIVICAY TAB 10MG	2	
TIVICAY TAB 25MG	2	
TIVICAY TAB 50MG	2	
TRIUMEQ PD TAB	3	
TRIUMEQ TAB	3	
VIRACEPT TAB 250MG	2	
VIRACEPT TAB 625MG	2	
VIREAD TAB 150MG	2	
VIREAD TAB 200MG	2	
VIREAD TAB 250MG	2	
ZIAGEN SOL 20MG/ML	3	
<i>zidovudine cap 100 mg</i>	1	
<i>zidovudine syrup 10 mg/ml</i>	1	
<i>zidovudine tab 300 mg</i>	1	

CMV AGENTS

LIVTENCITY TAB 200MG	5	SP, PA
VALCYTE SOL 50MG/ML	2	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	1	
<i>entecavir tab 0.5 mg</i>	1	
<i>entecavir tab 1 mg</i>	1	
<i>EPCLUSA PAK 150-37.5</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>EPCLUSA PAK 200-50MG</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>EPCLUSA TAB 200-50MG</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>EPCLUSA TAB 400-100</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>EPIVIR HBV SOL 5MG/ML</i>	3	
<i>HARVONI PAK</i>	4	SP, PA; Genotype 1, 4, 5, 6 only
<i>HARVONI PAK 45-200MG</i>	4	SP, PA; Genotype 1, 4, 5, 6 only
<i>HARVONI TAB 45-200MG</i>	4	SP, PA; Genotype 1, 4, 5, 6 only
<i>HARVONI TAB 90-400MG</i>	4	SP, PA; Genotype 1, 4, 5, 6 only
<i>lamivudine tab 100 mg (hbv)</i>	1	
<i>MAVYRET PAK 50-20MG</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>MAVYRET TAB 100-40MG</i>	4	SP, PA; Genotype 1, 2, 3, 4, 5, 6
<i>ribavirin cap 200 mg</i>	1	
<i>ribavirin tab 200 mg</i>	1	
<i>VEMLIDY TAB 25MG</i>	2	
<i>VOSEVI TAB</i>	4	SP, PA; 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)
HERPES AGENTS		
<i>acyclovir cap 200 mg</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	

Drug Name	Drug Tier	Requirements/Limits
famciclovir tab 250 mg	1	
famciclovir tab 500 mg	1	
valacyclovir hcl tab 1 gm	1	
valacyclovir hcl tab 500 mg	1	
VALTREX TAB 1GM	3	
VALTREX TAB 500MG	3	

INFLUENZA AGENTS

oseltamivir phosphate cap 30 mg (base equiv)	1	QL (56 caps/180 days)
oseltamivir phosphate cap 45 mg (base equiv)	1	QL (28 caps/180 days)
oseltamivir phosphate cap 75 mg (base equiv)	1	QL (28 caps/180 days)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	1	QL (360 mL/180 days)
RELENZA MIS DISKHALE	2	QL (4 inhalers/180 days)
rimantadine hydrochloride tab 100 mg	1	
XOFLUZA TAB 40MG	3	QL (2 tabs/180 days)
XOFLUZA TAB 80MG	3	QL (2 tabs/180 days)

BETA BLOCKERS**ALPHA-BETA BLOCKERS**

carvedilol phosphate cap er 24hr 10 mg	1
carvedilol phosphate cap er 24hr 20 mg	1
carvedilol phosphate cap er 24hr 40 mg	1
carvedilol phosphate cap er 24hr 80 mg	1
carvedilol tab 3.125 mg	1
carvedilol tab 6.25 mg	1
carvedilol tab 12.5 mg	1
carvedilol tab 25 mg	1
labetalol hcl tab 100 mg	1
labetalol hcl tab 200 mg	1
labetalol hcl tab 300 mg	1

BETA BLOCKERS CARDIO-SELECTIVE

acebutolol hcl cap 200 mg	1
acebutolol hcl cap 400 mg	1
atenolol tab 25 mg	1
atenolol tab 50 mg	1
atenolol tab 100 mg	1
betaxolol hcl tab 10 mg	1
betaxolol hcl tab 20 mg	1
bisoprolol fumarate tab 5 mg	1
bisoprolol fumarate tab 10 mg	1
metoprolol succinate tab er 24hr 25 mg (tartrate equiv)	1

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
<i>timolol maleate tab 5 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	

Drug Name	Drug Tier Requirements/Limits
amlodipine besylate tab 5 mg (base equivalent)	1
amlodipine besylate tab 10 mg (base equivalent)	1
CARDIZEM LA TAB 120MG	3
diltiazem hcl cap er 12hr 60 mg	1
diltiazem hcl cap er 12hr 90 mg	1
diltiazem hcl cap er 12hr 120 mg	1
diltiazem hcl cap er 24hr 120 mg	1
diltiazem hcl cap er 24hr 180 mg	1
diltiazem hcl cap er 24hr 240 mg	1
diltiazem hcl coated beads cap er 24hr 120 mg	1
diltiazem hcl coated beads cap er 24hr 180 mg	1
diltiazem hcl coated beads cap er 24hr 240 mg	1
diltiazem hcl coated beads cap er 24hr 300 mg	1
diltiazem hcl coated beads cap er 24hr 360 mg	1
diltiazem hcl extended release beads cap er 24hr 120 mg	1
diltiazem hcl extended release beads cap er 24hr 180 mg	1
diltiazem hcl extended release beads cap er 24hr 240 mg	1
diltiazem hcl extended release beads cap er 24hr 300 mg	1
diltiazem hcl extended release beads cap er 24hr 360 mg	1
diltiazem hcl extended release beads cap er 24hr 420 mg	1
diltiazem hcl tab 30 mg	1
diltiazem hcl tab 60 mg	1
diltiazem hcl tab 90 mg	1
diltiazem hcl tab 120 mg	1
diltiazem hcl tab er 24hr 120 mg	1
diltiazem hcl tab er 24hr 180 mg	1
diltiazem hcl tab er 24hr 240 mg	1
diltiazem hcl tab er 24hr 300 mg	1
diltiazem hcl tab er 24hr 360 mg	1
diltiazem hcl tab er 24hr 420 mg	1
felodipine tab er 24hr 2.5 mg	1
felodipine tab er 24hr 5 mg	1
felodipine tab er 24hr 10 mg	1

Drug Name	Drug Tier	Requirements/Limits
isradipine cap 2.5 mg	1	
isradipine cap 5 mg	1	
nicardipine hcl cap 20 mg	1	
nicardipine hcl cap 30 mg	1	
nifedipine cap 10 mg	1	
nifedipine cap 20 mg	1	
nifedipine tab er 24hr 30 mg	1	
nifedipine tab er 24hr 60 mg	1	
nifedipine tab er 24hr 90 mg	1	
nifedipine tab er 24hr osmotic release 30 mg	1	
nifedipine tab er 24hr osmotic release 60 mg	1	
nifedipine tab er 24hr osmotic release 90 mg	1	
nimodipine cap 30 mg	1	
nisoldipine tab er 24hr 8.5 mg	1	
nisoldipine tab er 24hr 17 mg	1	
nisoldipine tab er 24hr 20 mg	1	
nisoldipine tab er 24hr 25.5 mg	1	
nisoldipine tab er 24hr 30 mg	1	
nisoldipine tab er 24hr 34 mg	1	
nisoldipine tab er 24hr 40 mg	1	
verapamil hcl cap er 24hr 100 mg	1	
verapamil hcl cap er 24hr 120 mg	1	
verapamil hcl cap er 24hr 180 mg	1	
verapamil hcl cap er 24hr 200 mg	1	
verapamil hcl cap er 24hr 240 mg	1	
verapamil hcl cap er 24hr 300 mg	1	
verapamil hcl cap er 24hr 360 mg	1	
verapamil hcl tab 40 mg	1	
verapamil hcl tab 80 mg	1	
verapamil hcl tab 120 mg	1	
verapamil hcl tab er 120 mg	1	
verapamil hcl tab er 180 mg	1	
verapamil hcl tab er 240 mg	1	

CARDIOTONICS**CARDIAC GLYCOSIDES**

digoxin oral soln 0.05 mg/ml	1
digoxin tab 62.5 mcg (0.0625 mg)	1
digoxin tab 125 mcg (0.125 mg)	1
digoxin tab 250 mcg (0.25 mg)	1
LANOXIN TAB 0.25MG	3
LANOXIN TAB 0.125MG	3
LANOXIN TAB 0.0625MG	3

Drug Name	Drug Tier	Requirements/Limits
CARDIOVASCULAR AGENTS - MISC.		
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 5-10 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 5-20 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 5-40 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 5-80 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 10-10 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 10-20 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 10-40 mg	1	QL (30 tabs/30 days)
amlodipine besylate-atorvastatin calcium tab 10-80 mg	1	QL (30 tabs/30 days)
BIDIL TAB	3	
CADUET TAB 5-10MG	3	QL (30 tabs/30 days)
CADUET TAB 5-20MG	3	QL (30 tabs/30 days)
CADUET TAB 5-40MG	3	QL (30 tabs/30 days)
CADUET TAB 5-80MG	3	QL (30 tabs/30 days)
CADUET TAB 10-10MG	3	QL (30 tabs/30 days)
CADUET TAB 10-20MG	3	QL (30 tabs/30 days)
CADUET TAB 10-40MG	3	QL (30 tabs/30 days)
CADUET TAB 10-80MG	3	QL (30 tabs/30 days)
ENTRESTO TAB 24-26MG	2	QL (60 tabs/30 days)
ENTRESTO TAB 49-51MG	2	QL (60 tabs/30 days)
ENTRESTO TAB 97-103MG	2	QL (60 tabs/30 days)
isosorbide dinitrate-hydralazine hcl tab 20- 37.5 mg	1	
IMPOTENCE AGENTS		
CIALIS TAB 2.5MG	3	ST; BPH only, refer to plan benefits for ED coverage; (Try other BPH drugs); males only

Drug Name	Drug Tier	Requirements/Limits
CIALIS TAB 5MG	3	ST; BPH only, refer to plan benefits for ED coverage; (Try other BPH drugs); males only
MUSE SUP 250MCG	3	
MUSE SUP 500MCG	3	
MUSE SUP 1000MCG	3	
<i>tadalafil tab 2.5 mg</i>	1	ST; BPH only, refer to plan benefits for ED coverage; (Try other BPH drugs); males only
<i>tadalafil tab 5 mg</i>	1	ST; BPH only, refer to plan benefits for ED coverage; (Try other BPH drugs); males only

PROSTAGLANDIN VASODILATORS

ORENITRAM TAB 0.25MG	4	SP, PA
ORENITRAM TAB 0.125MG	4	SP, PA
ORENITRAM TAB 1MG	4	SP, PA
ORENITRAM TAB 2.5MG	4	SP, PA
ORENITRAM TAB 5MG	4	SP, PA
ORENITRAM TAB MONTH 1	4	SP, PA
ORENITRAM TAB MONTH 2	4	SP, PA
ORENITRAM TAB MONTH 3	4	SP, PA
TYVASO DPI POW 16-32-48	5	SP, PA, QL (Max 9 cartridges per day)
TYVASO DPI POW 16-32MCG	5	SP, PA, QL (Max 7 cartridges per day)
TYVASO DPI POW 16MCG	5	SP, PA, QL (Max 4 cartridges per day)
TYVASO DPI POW 32-48MCG	5	SP, PA, QL (Max 8 cartridges per day)
TYVASO DPI POW 32MCG	5	SP, PA, QL (Max 4 cartridges per day)
TYVASO DPI POW 48MCG	5	SP, PA, QL (Max 4 cartridges per day)
TYVASO DPI POW 64MCG	5	SP, PA, QL (Max 4 cartridges per day)
TYVASO REFIL SOL 0.6MG/ML	4	SP, PA, QL (Max 1 ampule per day)
TYVASO SOL 0.6MG/ML	4	SP, PA, QL (Max 1 ampule per day)
TYVASO START SOL 0.6MG/ML	4	SP, PA, QL (Max 1 ampule per day)
VENTAVIS SOL 10MCG/ML	4	SP, PA, QL (Max 9 ampules per day)

Drug Name	Drug Tier	Requirements/Limits
VENTAVIS SOL 20MCG/ML	4	SP, PA, QL (Max 9 ampules per day)

PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg</i>	4	SP, PA, QL (30 tabs/30 days)
<i>ambrisentan tab 10 mg</i>	4	SP, PA, QL (30 tabs/30 days)
<i>bosentan tab 62.5 mg</i>	4	SP, PA, QL (60 tabs/30 days)
<i>bosentan tab 125 mg</i>	4	SP, PA, QL (60 tabs/30 days)
OPSUMIT TAB 10MG	4	SP, PA, QL (30 tabs/30 days)
TRACLEER TAB 32MG	4	SP, PA, QL (60 tabs/30 days)

PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS

<i>sildenafil citrate for suspension 10 mg/ml</i>	4	SP, PA, QL (180 mL/30 days)
<i>sildenafil citrate tab 20 mg</i>	4	SP, PA, QL (90 tabs/30 days)
<i>tadalafil tab 20 mg (pah)</i>	4	SP, PA, QL (60 tabs/30 days)
TADLIQ SUS 20MG/5ML	5	SP, PA, QL (300 mL/30 days)

PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI PACK TAB 200/800	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 200MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 400MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 600MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 800MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 1000MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 1200MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 1400MCG	4	SP, PA, QL (60 tabs/30 days)
UPTRAVI TAB 1600MCG	4	SP, PA, QL (60 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		

ADEMPAS TAB 0.5MG	4	SP, PA, QL (90 tabs/30 days)
ADEMPAS TAB 1.5MG	4	SP, PA, QL (90 tabs/30 days)
ADEMPAS TAB 1MG	4	SP, PA, QL (90 tabs/30 days)
ADEMPAS TAB 2.5MG	4	SP, PA, QL (90 tabs/30 days)
ADEMPAS TAB 2MG	4	SP, PA, QL (90 tabs/30 days)

TRANSTHYRETIN STABILIZERS

VYNDAMAX CAP 61MG	5	SP, PA
VYNDAQEL CAP 20MG	5	SP, PA

VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)

VERQUVO TAB 2.5MG	3	PA
VERQUVO TAB 5MG	3	PA
VERQUVO TAB 10MG	3	PA

CEPHALOSPORINS

CEPHALOSPORINS - 1ST GENERATION

cefadroxil cap 500 mg	1
cefadroxil for susp 250 mg/5ml	1
cefadroxil for susp 500 mg/5ml	1
cefadroxil tab 1 gm	1
cephalexin cap 250 mg	1
cephalexin cap 500 mg	1
cephalexin cap 750 mg	1
cephalexin for susp 125 mg/5ml	1
cephalexin for susp 250 mg/5ml	1
cephalexin tab 250 mg	1
cephalexin tab 500 mg	1

CEPHALOSPORINS - 2ND GENERATION

cefaclor cap 250 mg	1
cefaclor cap 500 mg	1
cefaclor for susp 125 mg/5ml	1
cefaclor for susp 250 mg/5ml	1
cefaclor for susp 375 mg/5ml	1
cefdroxil for susp 125 mg/5ml	1
cefdroxil for susp 250 mg/5ml	1
cefdroxil tab 250 mg	1
cefdroxil tab 500 mg	1
cefuroxime axetil tab 250 mg	1
cefuroxime axetil tab 500 mg	1

Drug Name	Drug Tier	Requirements/Limits
<i>CEPHALOSPORINS - 3RD GENERATION</i>		
<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefixime cap 400 mg</i>	1	
<i>cefixime for susp 100 mg/5ml</i>	1	
<i>cefixime for susp 200 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	1	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
<i>SUPRAX CAP 400MG</i>	3	
<i>SUPRAX CHW 100MG</i>	3	
<i>SUPRAX CHW 200MG</i>	3	
<i>SUPRAX SUS 100/5ML</i>	3	
<i>SUPRAX SUS 200/5ML</i>	3	
<i>SUPRAX SUS 500/5ML</i>	3	
CONTRACEPTIVES		
<i>COMBINATION CONTRACEPTIVES - ORAL</i>		
<i>BEYAZ TAB</i>	3	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	0	
<i>desogestrel & ethynodiol diacetate tab 0.15 mg-30 mcg</i>	0	
<i>drospirenone-ethynodiol diacetate & ethynodiol diacetate tab 3-0.02-0.451 mg</i>	0	
<i>drospirenone-ethynodiol diacetate & ethynodiol diacetate tab 3-0.03-0.451 mg</i>	0	
<i>drospirenone-ethynodiol diacetate & ethynodiol diacetate tab 3-0.02 mg</i>	0	
<i>drospirenone-ethynodiol diacetate & ethynodiol diacetate tab 3-0.03 mg</i>	0	
<i>ethynodiol diacetate & ethynodiol diacetate tab 1 mg-35 mcg</i>	0	
<i>ethynodiol diacetate & ethynodiol diacetate tab 1 mg-50 mcg</i>	0	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	0	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorgestrel & ethynodiol diacetate (91-day) tab 0.15-0.03 mg</i>	0	

Drug Name	Drug Tier	Requirements/Limits
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	0	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	0	
levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg	0	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	0	
LO LOESTRIN TAB 1-10-10	0	
MINASTRIN 24 CHW FE	3	
NATAZIA TAB	0	
NEXTSTELLIS TAB 3-14.2MG	0	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	0	
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	0	
norethindrone & ethinyl estradiol tab 1 mg- 35 mcg	0	
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	0	
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	0	
norethindrone ac-ethinyl estrad-fe tab 1- 20/1-30/1-35 mg-mcg	0	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	0	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	0	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	0	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	0	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	0	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	0	
norethindrone-eth estradiol tab 0.5- 35/0.75-35/1-35 mg-mcg	0	
norethindrone-eth estradiol tab 0.5-35/1- 35/0.5-35 mg-mcg	0	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	0	
norgestimate-eth estrad tab 0.18- 25/0.215-25/0.25-25 mg-mcg	0	
norgestimate-eth estrad tab 0.18- 35/0.215-35/0.25-35 mg-mcg	0	

Drug Name	Drug Tier	Requirements/Limits
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	0	
QUARTETTE TAB	3	
SAFYRAL TAB	3	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	0	
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	0	
EMERGENCY CONTRACEPTIVES		
ELLA TAB 30MG	0	
<i>levonorgestrel tab 1.5 mg</i>	0	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>norethindrone tab 0.35 mg</i>	0	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	1	
CORTEF TAB 5MG	3	
CORTEF TAB 10MG	3	
CORTEF TAB 20MG	3	
DEXAMETHASON CON 1MG/ML	3	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	1	
ENTOCORT EC CAP 3MG DR	3	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	

Drug Name	Drug Tier	Requirements/Limits
<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 TAB 5MG	3	
PEDIAPRED SOL 5MG/5ML	3	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	1	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	1	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	1	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	
<i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	1	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	
<i>prednisolone soln 15 mg/5ml</i>	1	
<i>prednisolone tab 5 mg</i>	1	
PREDNISONE CON 5MG/ML	3	
<i>prednisone oral soln 5 mg/5ml</i>	1	
<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	
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	QL (900 mL/30 days); (Covered for ages greater than 18 years old)
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	QL (180 tabs/30 days); (Covered for ages greater than 18 years old)
COUGH/COLD/ALLERGY COMBINATIONS		
CAPCOF SYP 5-2-10MG	3	QL (1800 mL/30 days); (Covered for ages greater than 18 years old)
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	QL (1800 mL/30 days); (Covered for ages greater than 18 years old)
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	QL (300 mL/30 days); (Covered for ages greater than 18 years old)
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	QL (900 mL/30 days); (Covered for ages greater than 18 years old)
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	QL (900 mL/30 days); (Covered for ages greater than 18 years old)
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
TUSSICAPS CAP 10-8MG	3	QL (60 caps/30 days)
EXPECTORANTS		
SSKI SOL 1GM/ML	3	
MISC. RESPIRATORY INHALANTS		
HYPERSAL NEB 3.5%	3	
NEBUSAL NEB 6%	3	
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	
MUCOLYTICS		
<i>acetylcysteine inhal soln 10%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>acetylcysteine inhal soln 20%</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
ABSORICA CAP 10MG	3	
ABSORICA CAP 20MG	3	
ABSORICA CAP 25MG	3	
ABSORICA CAP 30MG	3	
ABSORICA CAP 35MG	3	
ABSORICA CAP 40MG	3	
ACANYA GEL 1.2-2.5%	3	
ACZONE GEL 5%	3	
ACZONE GEL 7.5%	3	
<i>adapalene cream 0.1%</i>	1	
<i>adapalene gel 0.1%</i>	1	
<i>adapalene gel 0.3%</i>	1	
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	
ATRALIN GEL 0.05%	3	
AZELEX CRE 20%	3	
BENZACLIN GEL 1-5%	3	
BENZACLIN GEL 1-5%PUMP	3	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
CLINDACIN KIT ETZ 1%	3	
CLINDACIN KIT PAC 1%	3	
CLINDAGEL GEL 1%	3	QL (75 mL/30 days)
<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%</i>	1	QL (75 mL/30 days)
<i>clindamycin phosphate lotion 1%</i>	1	QL (60 mL/30 days)
<i>clindamycin phosphate soln 1%</i>	1	QL (60 mL/30 days)
<i>clindamycin phosphate swab 1%</i>	1	
<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	
<i>dapsone gel 5%</i>	1	
<i>dapsone gel 7.5%</i>	1	
DIFFERIN GEL 0.3%	3	
DIFFERIN LOT 0.1%	3	
ERYGEL GEL 2%	3	QL (60 grams/30 days)
<i>erythromycin gel 2%</i>	1	QL (60 grams/30 days)
<i>erythromycin pads 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin soln 2%</i>	1	QL (60 mL/30 days)
FABIOR AER 0.1%	3	
<i>isotretinoin cap 10 mg</i>	1	
<i>isotretinoin cap 20 mg</i>	1	
<i>isotretinoin cap 25 mg</i>	1	
<i>isotretinoin cap 30 mg</i>	1	
<i>isotretinoin cap 35 mg</i>	1	
<i>isotretinoin cap 40 mg</i>	1	
KLARON LOT 10%	3	
ONEXTON GEL 1.2-3.75	3	
RETIN-A CRE 0.1%	3	
RETIN-A CRE 0.05%	3	
RETIN-A CRE 0.025%	3	
RETIN-A GEL 0.01%	3	
RETIN-A GEL 0.025%	3	
RETIN-A MICR GEL 0.1%	3	
RETIN-A MICR GEL 0.1%PUMP	3	
RETIN-A MICR GEL 0.04%	3	
RETIN-A MICR GEL 0.04%PMP	3	
RETIN-A MICR GEL 0.08%	3	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
TAZAROTENE AER 0.1%	3	
<i>tretinoin cream 0.1%</i>	1	
<i>tretinoin cream 0.05%</i>	1	
<i>tretinoin cream 0.025%</i>	1	
<i>tretinoin gel 0.01%</i>	1	
<i>tretinoin gel 0.05%</i>	1	
<i>tretinoin gel 0.025%</i>	1	
<i>tretinoin microsphere gel 0.1%</i>	1	
<i>tretinoin microsphere gel 0.04%</i>	1	

AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS

VEREGEN OIN 15%	3
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ANTI-INFLAMMATORY AGENTS - TOPICAL

<i>diclofenac epolamine patch 1.3%</i>	1
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1
<i>diclofenac sodium soln 1.5%</i>	1
<i>diclofenac sodium soln 2%</i>	1
PENNSAID SOL 2%	3 ST; Try generic diclofenac solution

ANTIBIOTICS - TOPICAL

ALTABAX OIN 1%	3
CENTANY OIN 2%	3
<i>gentamicin sulfate cream 0.1%</i>	1
<i>gentamicin sulfate oint 0.1%</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>mupirocin calcium cream 2%</i>	1	
<i>mupirocin oint 2%</i>	1	
ANTIFUNGALS - TOPICAL		
<i>ciclopirox gel 0.77%</i>	1	QL (120 grams/30 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	QL (120 grams/30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	QL (120 mL/30 days)
<i>ciclopirox shampoo 1%</i>	1	QL (120 mL/30 days)
<i>ciclopirox solution 8%</i>	1	
<i>ciclopirox solution kit 8%</i>	1	
<i>clotrimazole cream 1%</i>	1	QL (120 grams/30 days)
<i>clotrimazole soln 1%</i>	1	QL (120 mL/30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>econazole nitrate cream 1%</i>	1	QL (60 grams/30 days)
<i>ketoconazole cream 2%</i>	1	QL (120 grams/30 days)
<i>ketoconazole shampoo 2%</i>	1	QL (120 mL/30 days)
<i>LOPROX SHA 1%</i>	3	QL (120 mL/30 days)
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	1	
<i>naftifine hcl cream 1%</i>	1	QL (60 grams/30 days)
<i>naftifine hcl cream 2%</i>	1	QL (60 grams/30 days)
<i>nystatin cream 100000 unit/gm</i>	1	QL (120 grams/30 days)
<i>nystatin oint 100000 unit/gm</i>	1	QL (120 grams/30 days)
<i>nystatin topical powder 100000 unit/gm</i>	1	QL (120 grams/30 days)
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene gel 1%</i>	4	SP, PA
<i>CARAC CRE 0.5%</i>	3	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	
<i>EFUDEX CRE 5%</i>	3	
<i>FLUOROPLEX CRE 1%</i>	3	
<i>fluorouracil cream 0.5%</i>	1	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
<i>LEVULAN KERA SOL 20%</i>	3	
<i>PANRETIN GEL 0.1%</i>	3	

Drug Name	Drug Tier	Requirements/Limits
TARGETIN GEL 1%	4	SP, PA
VALCHLOR GEL 0.016%	4	SP, PA
ANTIPRURITICS - TOPICAL		
doxepin hcl cream 5%	1	QL (90 grams/30 days)
ANTIPSORIATICS		
acitretin cap 10 mg	1	
acitretin cap 17.5 mg	1	
acitretin cap 25 mg	1	
calcipotriene cream 0.005%	1	
calcipotriene foam 0.005%	1	
calcipotriene oint 0.005%	1	
calcipotriene soln 0.005% (50 mcg/ml)	1	
calcitriol oint 3 mcg/gm	1	
DOVONEX CRE 0.005%	3	
methoxsalen rapid cap 10 mg	1	
SORIATANE CAP 10MG	3	
SORIATANE CAP 25MG	3	
SORILUX AER 0.005%	3	
tazarotene cream 0.1%	1	
tazarotene gel 0.1%	1	
tazarotene gel 0.05%	1	
TAZORAC CRE 0.1%	2	
TAZORAC CRE 0.05%	2	
TAZORAC GEL 0.1%	2	
TAZORAC GEL 0.05%	2	
VECTICAL OIN 3MCG/GM	2	
ZORYVE CRE 0.3%	3	ST; (Try topical corticosteroids)
ANTISEBORRHEIC PRODUCTS		
selenium sulfide lotion 2.5%	1	
ANTIVIRALS - TOPICAL		
acyclovir cream 5%	1	
acyclovir oint 5%	1	
DENAVIR CRE 1%	3	
penciclovir cream 1%	1	
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	
BURN PRODUCTS		
SILVADENE CRE 1%	3	
silver sulfadiazine cream 1%	1	
SULFAMYLYON CRE 85MG/GM	3	
CAUTERIZING AGENTS		
TRI-CHLOR LIQ 80%	3	

Drug Name	Drug Tier	Requirements/Limits
CORTICOSTEROIDS - TOPICAL		
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
<i>amcinonide cream 0.1%</i>	1	
<i>amcinonide lotion 0.1%</i>	1	
AMCINONIDE OIN 0.1%	3	
APEXICON E CRE 0.05%	3	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	1	
<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	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	1	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	1	
CAPEX SHA 0.01%	3	
<i>clobetasol propionate cream 0.05%</i>	1	QL (100 grams/30 days)
<i>clobetasol propionate emollient base cream 0.05%</i>	1	QL (200 grams/30 days)
<i>clobetasol propionate emulsion foam 0.05%</i>	1	
<i>clobetasol propionate foam 0.05%</i>	1	QL (100 grams/30 days)
<i>clobetasol propionate gel 0.05%</i>	1	QL (100 grams/30 days)
<i>clobetasol propionate lotion 0.05%</i>	1	QL (200 mL/30 days)
<i>clobetasol propionate oint 0.05%</i>	1	QL (100 grams/30 days)
<i>clobetasol propionate shampoo 0.05%</i>	1	QL (240 mL/30 days)
<i>clobetasol propionate soln 0.05%</i>	1	QL (100 mL/30 days)
<i>clobetasol propionate spray 0.05%</i>	1	QL (240 mL/30 days)
CLOBEX LOT 0.05%	3	QL (200 mL/30 days)
<i>clocortolone pivalate cream 0.1%</i>	1	
CORDRAN 80X3 TAP 4MCG/CM	3	

Drug Name	Drug Tier	Requirements/Limits
CORDRAN CRE 0.05%	3	
CORDRAN LOT 0.05%	3	
CUTIVATE LOT 0.05%	3	
<i>desonide cream 0.05%</i>	1	
<i>desonide gel 0.05%</i>	1	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
<i>desoximetasone cream 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	1	
<i>desoximetasone oint 0.05%</i>	1	
<i>desoximetasone oint 0.25%</i>	1	
<i>desoximetasone spray 0.25%</i>	1	
<i>diflorasone diacetate cream 0.05%</i>	1	QL (120 grams/30 days)
<i>diflorasone diacetate oint 0.05%</i>	1	QL (120 grams/30 days)
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>	1	QL (120 grams/30 days)
<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>	1	
<i>flurandrenolide lotion 0.05%</i>	1	
<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>	1	
<i>halobetasol propionate cream 0.05%</i>	1	QL (100 grams/30 days)
<i>halobetasol propionate oint 0.05%</i>	1	QL (100 grams/30 days)
HALOG CRE 0.1%	3	
HALOG OIN 0.1%	3	
<i>hydrocortisone butyrate cream 0.1%</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	1	
<i>hydrocortisone butyrate lotion 0.1%</i>	1	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone cream 1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
hydrocortisone cream 2.5%	1	
hydrocortisone lotion 2.5%	1	
hydrocortisone oint 1%	1	
hydrocortisone oint 2.5%	1	
hydrocortisone valerate cream 0.2%	1	
hydrocortisone valerate oint 0.2%	1	
KENALOG AER SPRAY	3	
LOCOID LIPO CRE 0.1%	3	
LOCOID LOT 0.1%	3	
LUXIQ AER 0.12%	3	
mometasone furoate cream 0.1%	1	
mometasone furoate oint 0.1%	1	
mometasone furoate solution 0.1% (lotion)	1	
OLUX-E AER 0.05%	3	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1%	3	
PRAMOSONE LOT 2.5%	3	
prednicarbate oint 0.1%	1	
TACLONEX OIN	3	
TACLONEX SUS	3	
TOPICORT CRE 0.05%	3	
TOPICORT CRE 0.25%	3	
TOPICORT SPR 0.25%	3	
triamcinolone acetonide aerosol soln 0.147 mg/gm	1	
triamcinolone acetonide cream 0.1%	1	
triamcinolone acetonide cream 0.5%	1	
triamcinolone acetonide cream 0.025%	1	
triamcinolone acetonide lotion 0.1%	1	
triamcinolone acetonide lotion 0.025%	1	
triamcinolone acetonide oint 0.1%	1	
triamcinolone acetonide oint 0.5%	1	
triamcinolone acetonide oint 0.05%	1	
triamcinolone acetonide oint 0.025%	1	
ULTRAVATE LOT 0.05%	3	QL (120 mL/30 days)
VANOS CRE 0.1%	3	QL (120 grams/30 days)
VERDESO AER 0.05%	3	
ECZEMA AGENTS		
CIBINQO TAB 50MG	4	SP, PA
CIBINQO TAB 100MG	4	SP, PA
CIBINQO TAB 200MG	4	SP, PA
OPZELURA CRE 1.5%	5	SP, PA, QL (240 grams/28 days)
EMOLlient/KERATOLYTIC AGENTS		
urea gel 45%	1	

Drug Name	Drug Tier	Requirements/Limits
EMOLLIENTS		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
ENZYMES - TOPICAL		
SANTYL OIN 250/GM	3	
IMMUNOMODULATING AGENTS - TOPICAL		
ALDARA CRE 5%	3	
<i>imiquimod cream 3.75%</i>	1	
<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		
HYFTOR GEL 0.2%	3	
<i>pimecrolimus cream 1%</i>	1	
<i>tacrolimus oint 0.1%</i>	1	
<i>tacrolimus oint 0.03%</i>	1	
KERATOLYTIC/ANTIMITOTIC AGENTS		
ACNESIC GEL 0.5%	3	
CONDYLOX GEL 0.5%	3	
<i>podofilox soln 0.5%</i>	1	
* <i>salicylic acid cream 6% & cleanser liqd kit**</i>	1	QL (1 kit/30 days)
LOCAL ANESTHETICS - TOPICAL		
<i>lidocaine hcl gel 2%</i>	1	
<i>lidocaine hcl soln 4%</i>	1	QL (100 mL/30 days)
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	
<i>lidocaine oint 5%</i>	1	QL (100 grams/30 days)
<i>lidocaine patch 5%</i>	1	QL (90 patches/30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	QL (60 grams/30 days)
MISC. DERMATOLOGICAL PRODUCTS		
ALEVICYN GEL	3	
ALEVICYN SG GEL ANTIPRUR	3	
HALUCORT GEL	3	
LEVICYN GEL	3	
SEBUDERM GEL	3	
STRATA CTX GEL	3	
STRATA MARK GEL	3	
STRATA XRT GEL	3	
MISC. TOPICAL		
DRYSOL SOL 20%	3	

Drug Name	Drug Tier	Requirements/Limits
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OIN 2%	2	QL (100 grams/30 days)
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	
<i>ivermectin cream 1%</i>	1	
METROGEL GEL 1%	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	
NORITATE CRE 1%	3	
SOOLANTRA CRE 1%	3	
SCABICIDES & PEDICULICIDES		
<i>crotamiton lotion 10%</i>	1	
<i>ivermectin lotion 0.5%</i>	1	
<i>lindane shampoo 1%</i>	1	
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	1	
WOUND CARE PRODUCTS		
REGRANEX GEL 0.01%	3	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
CHEMSTRIP K TES	DS	Preferred Diabetic Supply
CHEMSTRIP TES UGK	DS	Preferred Diabetic Supply
CVS KETONE TES CARE	DS	Preferred Diabetic Supply
DIABETIC TEST STRIPS OTC	DS	Freestyle and OneTouch Test Strips Preferred
DIABETIC TEST STRIPS RX	DS	Freestyle and OneTouch Test Strips Preferred
DIASTIX TES STRIPS	DS	Preferred Diabetic Supply
FORA GTEL TES KETONE	DS	Preferred Diabetic Supply
GOJJI BLOOD TES KETONE	DS	Preferred Diabetic Supply
KETO-DIASTIX TES	DS	Preferred Diabetic Supply
KETONE TES	DS	Preferred Diabetic Supply
KETONE TEST TES	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
KETOSTIX TES STRIP	DS	Preferred Diabetic Supply
NOVA MAX PLS TES KETONE	DS	Preferred Diabetic Supply
POGO AUTOMAT TES CARTRIDG	DS	Preferred Diabetic Supply
PRECISN XTRA TES KETONE	DS	Preferred Diabetic Supply
PTS PANELS TES KETONE	DS	Preferred Diabetic Supply
RELION TES KETONE	DS	Preferred Diabetic Supply

RADIOGRAPHIC CONTRAST MEDIA

ENTERO VU SUS 24%	3
VANILLA SILQ SUS	3

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 4200UNIT	3
PANCREAZE CAP 10500UNT	3
PANCREAZE CAP 16800UNT	3
PANCREAZE CAP 21000UNT	3
PERTZYE CAP 4000UNIT	3
PERTZYE CAP 8000UNIT	3
PERTZYE CAP 16000U	3
PERTZYE CAP 24000U	3
ZENPEP CAP 3000UNIT	3
ZENPEP CAP 5000UNIT	3
ZENPEP CAP 10000UNT	3
ZENPEP CAP 15000UNT	3
ZENPEP CAP 20000UNT	3
ZENPEP CAP 25000UNT	3
ZENPEP CAP 40000UNT	3

DIURETICS**CARBONIC ANHYDRASE INHIBITORS**

acetazolamide cap er 12hr 500 mg	1
acetazolamide tab 125 mg	1
acetazolamide tab 250 mg	1
methazolamide tab 25 mg	1
methazolamide tab 50 mg	1

Drug Name	Drug Tier Requirements/Limits
DIURETIC COMBINATIONS	
ALDACTAZIDE TAB 25/25	3
ALDACTAZIDE TAB 50/50	3
amiloride & hydrochlorothiazide tab 5-50 mg	1
MAXZIDE TAB 75-50	3
MAXZIDE-25 TAB	3
spironolactone & hydrochlorothiazide tab 25-25 mg	1
triamterene & hydrochlorothiazide cap 37.5-25 mg	1
triamterene & hydrochlorothiazide tab 37.5-25 mg	1
triamterene & hydrochlorothiazide tab 75-50 mg	1
LOOP DIURETICS	
bumetanide tab 0.5 mg	1
bumetanide tab 1 mg	1
bumetanide tab 2 mg	1
EDECRIN TAB 25MG	3
ethacrynic acid tab 25 mg	1
furosemide oral soln 8 mg/ml	1
furosemide oral soln 10 mg/ml	1
furosemide tab 20 mg	1
furosemide tab 40 mg	1
furosemide tab 80 mg	1
LASIX TAB 20MG	3
LASIX TAB 40MG	3
LASIX TAB 80MG	3
torsemide tab 5 mg	1
torsemide tab 10 mg	1
torsemide tab 20 mg	1
torsemide tab 100 mg	1
POTASSIUM SPARING DIURETICS	
ALDACTONE TAB 25MG	3
ALDACTONE TAB 50MG	3
ALDACTONE TAB 100MG	3
amiloride hcl tab 5 mg	1
DYRENIUM CAP 50MG	3
DYRENIUM CAP 100MG	3
spironolactone tab 25 mg	1
spironolactone tab 50 mg	1
spironolactone tab 100 mg	1
triamterene cap 50 mg	1
triamterene cap 100 mg	1

Drug Name	Drug Tier	Requirements/Limits
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
chlorthalidone tab 25 mg	1	
chlorthalidone tab 50 mg	1	
DIURIL SUS 250/5ML	3	
hydrochlorothiazide cap 12.5 mg	1	
hydrochlorothiazide tab 12.5 mg	1	
hydrochlorothiazide tab 25 mg	1	
hydrochlorothiazide tab 50 mg	1	
indapamide tab 1.25 mg	1	
indapamide tab 2.5 mg	1	
metolazone tab 2.5 mg	1	
metolazone tab 5 mg	1	
metolazone tab 10 mg	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ADRENAL STEROID INHIBITORS		
ISTURISA TAB 1MG	5	SP, PA
ISTURISA TAB 5MG	5	SP, PA
ISTURISA TAB 10MG	5	SP, PA
RECORLEV TAB 150MG	5	SP, PA
BONE DENSITY REGULATORS		
ACTONEL TAB 35MG	3	
ACTONEL TAB 150MG	3	
alendronate sodium tab 5 mg	1	
alendronate sodium tab 10 mg	1	
alendronate sodium tab 35 mg	1	
alendronate sodium tab 70 mg	1	
ATELVIA TAB	3	
BONIVA TAB 150MG	3	
calcitonin (salmon) nasal soln 200 unit/act	1	
FOSAMAX + D TAB 70-2800	3	
FOSAMAX + D TAB 70-5600	3	
FOSAMAX TAB 70MG	3	
ibandronate sodium tab 150 mg (base equivalent)	1	
risedronate sodium tab 5 mg	1	
risedronate sodium tab 30 mg	1	
risedronate sodium tab 35 mg	1	
risedronate sodium tab 150 mg	1	
risedronate sodium tab delayed release 35 mg	1	
FERTILITY REGULATORS		
clomiphene citrate tab 50 mg	1	refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
<i>GNRH/LHRH ANTAGONISTS</i>		
ORILISSA TAB 150MG	5	SP, PA, QL (30 tabs/30 days)
ORILISSA TAB 200MG	5	SP, PA, QL (60 tabs/30 days)
<i>HORMONE RECEPTOR MODULATORS</i>		
EVISTA TAB 60MG	3	
OSPHENA TAB 60MG	3	QL (30 tabs/30 days)
<i>raloxifene hcl tab 60 mg</i>	1	(Females min age 35 years covered at \$0)
<i>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</i>		
SYNAREL SOL 2MG/ML	2	
<i>METABOLIC MODIFIERS</i>		
* <i>betaine powder for oral solution***</i>	5	SP, PA
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	1	
CARBAGLU TAB 200MG	5	SP, PA
<i>carglumic acid soluble tab 200 mg</i>	5	SP, PA
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	1	
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	1	
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	1	
CYSTADANE POW	5	SP, PA
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
GALAFOLD CAP 123MG	5	SP, PA, QL (14 caps/28 days)
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	
RAVICTI LIQ 1.1GM/ML	4	SP, PA
ROCALTROL CAP 0.5MCG	3	
ROCALTROL CAP 0.25MCG	3	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	SP, PA
<i>sodium phenylbutyrate tab 500 mg</i>	4	SP, PA
ZEMPLAR CAP 1MCG	3	
ZEMPLAR CAP 2MCG	3	
<i>MINERALOCORTICOID RECEPTOR ANTAGONISTS</i>		
KERENDIA TAB 10MG	3	ST; (Concurrent use of ACE or ARB)

Drug Name	Drug Tier	Requirements/Limits
KERENDIA TAB 20MG	3	ST; (Concurrent use of ACE or ARB)
POSTERIOR PITUITARY HORMONES		
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
DESMOPRESSIN SOL 1.5MG/ML	5	SP, PA
STIMATE SOL 1.5MG/ML	5	SP, PA
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	
SOMATOSTATIC AGENTS		
MYCAPSSA CAP 20MG	5	SP, PA
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE PAK 45-15MG	5	SP, PA
JYNARQUE PAK 60-30MG	5	SP, PA
JYNARQUE PAK 90-30MG	5	SP, PA
ESTROGENS		
ESTROGEN COMBINATIONS		
ACTIVELLA TAB 1-0.5MG	3	
ANGELIQ TAB 0.5-1MG	3	
ANGELIQ TAB 0.25-0.5	3	
CLIMARA PRO DIS WEEKLY	3	
COMBIPATCH DIS	3	
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>norethindrone acetate-ethynodiol diacetate tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethynodiol diacetate tab 1 mg-5 mcg</i>	1	
PREFEST TAB	3	
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		
CLIMARA DIS 0.1MG	3	

Drug Name	Drug Tier	Requirements/Limits
CLIMARA DIS 0.05MG	3	
CLIMARA DIS 0.06MG	3	
CLIMARA DIS 0.025MG	3	
CLIMARA DIS 0.075MG	3	
CLIMARA DIS 0.0375MG	3	
DIVIGEL GEL 0.5MG	3	
DIVIGEL GEL 0.25MG	3	
DIVIGEL GEL 0.75MG	3	
DIVIGEL GEL 1.25MG	3	
DIVIGEL GEL 1MG/GM	3	
ELESTRIN GEL 0.06%	3	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	2	
MENEST TAB 0.3MG	3	
MENEST TAB 0.625MG	3	
MENEST TAB 1.25MG	3	
MENEST TAB 2.5MG	3	
MENOSTAR DIS 14MCG	3	
PREMARIN TAB 0.3MG	2	
PREMARIN TAB 0.9MG	2	
PREMARIN TAB 0.45MG	2	

Drug Name	Drug Tier	Requirements/Limits
PREMARIN TAB 0.625MG	2	
PREMARIN TAB 1.25MG	2	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
CIPRO (5%) SUS 250MG/5	3	
CIPRO (10%) SUS 500MG/5	3	
<i>ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)</i>	1	
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	1	
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>levofloxacin oral soln 25 mg/ml</i>	1	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
<i>ofloxacin tab 300 mg</i>	1	
<i>ofloxacin tab 400 mg</i>	1	
GASTROINTESTINAL AGENTS - MISC.		
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA TAB 5MG	5	SP, PA
OCALIVA TAB 10MG	5	SP, PA
GALLSTONE SOLUBILIZING AGENTS		
<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>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
GASTROINTESTINAL STIMULANTS		
<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	

Drug Name	Drug Tier	Requirements/Limits
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 200MCG	5	SP, PA
BYLVAY CAP 400MCG	5	SP, PA
BYLVAY CAP 600MCG	5	SP, PA
BYLVAY CAP 1200MCG	5	SP, PA
LIVMARLI SOL 9.5MG/ML	5	SP, PA
INFLAMMATORY BOWEL AGENTS		
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	
COLAZAL CAP 750MG	3	
DIPENTUM CAP 250MG	3	
<i>mesalamine cap dr 400 mg</i>	1	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	1	
<i>mesalamine enema 4 gm</i>	1	
* <i>mesalamine rectal enema 4 gm & cleanser wipe kit**</i>	1	QL (4 kits/28 days)
<i>mesalamine suppos 1000 mg</i>	1	
<i>mesalamine tab delayed release 1.2 gm</i>	1	
<i>mesalamine tab delayed release 800 mg</i>	1	
PENTASA CAP 250MG CR	3	
PENTASA CAP 500MG CR	3	
SFROWASA ENE 4GM	3	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
INTESTINAL ACIDIFIERS		
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	1	
<i>alosetron hcl tab 1 mg (base equiv)</i>	1	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
VIBERZI TAB 75MG	3	
VIBERZI TAB 100MG	3	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK TAB 12.5MG	3	
MOVANTIK TAB 25MG	3	
SYMPROIC TAB 0.2MG	3	
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	3	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	1	
<i>sevelamer carbonate packet 0.8 gm</i>	1	
<i>sevelamer carbonate packet 2.4 gm</i>	1	
<i>sevelamer carbonate tab 800 mg</i>	1	
<i>sevelamer hcl tab 400 mg</i>	1	
<i>sevelamer hcl tab 800 mg</i>	1	
VELPHORO CHW 500MG	3	ST; Try generic phosphate binder

GENITOURINARY AGENTS - MISCELLANEOUS**ACIDIFIERS**

K-PHOS TAB NO 2	3
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ALKALINIZERS

<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1
<i>potassium citrate & citric acid powder pack 3300-1002 mg</i>	1
<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

CYSTINOSIS AGENTS

CYSTAGON CAP 50MG	4	SP, PA
CYSTAGON CAP 150MG	4	SP, PA

INTERSTITIAL CYSTITIS AGENTS

ELMIRON CAP 100MG	2
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PROSTATIC HYPERTROPHY AGENTS

<i>alfuzosin hcl tab er 24hr 10 mg</i>	1
<i>AVODART CAP 0.5MG</i>	3
<i>CARDURA XL TAB 4MG</i>	3
<i>CARDURA XL TAB 8MG</i>	3
<i>dutasteride cap 0.5 mg</i>	1
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1
<i>finasteride tab 5 mg</i>	1
<i>FLOMAX CAP 0.4MG</i>	3
<i>PROSCAR TAB 5MG</i>	3

Drug Name	Drug Tier	Requirements/Limits
<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	3	

URINARY STONE AGENTS

THIOLA EC TAB 100MG	5	SP, PA
THIOLA EC TAB 300MG	5	SP, PA
THIOLA TAB 100MG	5	SP, PA
<i>tiopronin tab 100 mg</i>	5	SP, PA

GOUT AGENTS**GOUT AGENT COMBINATIONS**

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

<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine cap 0.6 mg</i>	1	ST, QL (60 caps/30 days); Try other generic gout drug
<i>colchicine tab 0.6 mg</i>	1	QL (30 tabs/30 days)
<i>febuxostat tab 40 mg</i>	1	ST, QL (30 tabs/30 days); Try allopurinol
<i>febuxostat tab 80 mg</i>	1	ST, QL (30 tabs/30 days); Try allopurinol
ZYLOPRIM TAB 100MG	3	
ZYLOPRIM TAB 300MG	3	

URICOSURICS

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

TAVNEOS CAP 10MG	5	SP, PA
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HEMATOLOGIC - TYROSINE KINASE INHIBITORS

TAVALISSE TAB 100MG	5	SP, PA
TAVALISSE TAB 150MG	5	SP, PA

HEMATORHEOLOGIC AGENTS

<i>pentoxifylline tab er 400 mg</i>	1	
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PLASMA KALLIKREIN INHIBITORS

ORLADEYO CAP 110MG	5	SP, PA
ORLADEYO CAP 150MG	5	SP, PA

PLATELET AGGREGATION INHIBITORS

AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
PLAVIX TAB 75MG	3	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	

PYRUVATE KINASE ACTIVATORS

PYRUKYND TAB 5MG	5	SP, PA
PYRUKYND TAB 5MG TP	5	SP, PA
PYRUKYND TAB 20MG	5	SP, PA
PYRUKYND TAB 20MGX5MG	5	SP, PA
PYRUKYND TAB 50MG	5	SP, PA
PYRUKYND TAB 50MGX20M	5	SP, PA

HEMATOPOIETIC AGENTS**AGENTS FOR SICKLE CELL DISEASE**

DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
OXBRYTA TAB 300MG	5	SP, PA
OXBRYTA TAB 500MG	5	SP, PA
SIKLOS TAB 100MG	3	

COBALAMINS

NASCOBAL SPR 500MCG	2	
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FOLIC ACID/FOLATES

folic acid cap 0.8 mg	0	(Covered for ages 55 years and under); females only
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	(Covered for ages 55 years and under); females only
<i>folic acid tab 800 mcg</i>	0	(Covered for ages 55 years and under); females only

HEMATOPOIETIC GROWTH FACTORS

DOPTELET TAB 20MG	5	SP, PA, QL (30 tabs/30 days)
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Drug Name	Drug Tier	Requirements/Limits
MULPLETA TAB 3MG	5	SP, PA, QL (7 tabs/14 days)
PROMACTA PAK 25MG	4	SP, PA
PROMACTA POW 12.5MG	4	SP, PA
PROMACTA TAB 12.5MG	4	SP, PA
PROMACTA TAB 25MG	4	SP, PA
PROMACTA TAB 50MG	4	SP, PA
PROMACTA TAB 75MG	4	SP, PA

HEMOSTATICS**HEMOSTATICS - SYSTEMIC**

AMICAR SOL 0.25/ML	3
AMICAR TAB 500MG	3
AMICAR TAB 1000MG	3
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	1
<i>aminocaproic acid tab 500 mg</i>	1
<i>aminocaproic acid tab 1000 mg</i>	1
LYSTEDA TAB 650MG	3
<i>tranexamic acid tab 650 mg</i>	1

HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS**BARBITURATE HYPNOTICS**

<i>phenobarbital elixir 20 mg/5ml</i>	1
<i>phenobarbital tab 15 mg</i>	1
<i>phenobarbital tab 16.2 mg</i>	1
<i>phenobarbital tab 30 mg</i>	1
<i>phenobarbital tab 32.4 mg</i>	1
<i>phenobarbital tab 60 mg</i>	1
<i>phenobarbital tab 64.8 mg</i>	1
<i>phenobarbital tab 97.2 mg</i>	1
<i>phenobarbital tab 100 mg</i>	1

HYPNOTICS - TRICYCLIC AGENTS

<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	1
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	1
SILENOR TAB 3MG	3
SILENOR TAB 6MG	3

NON-BARBITURATE HYPNOTICS

AMBIEN CR TAB 6.25MG	3	QL (30 tabs/30 days)
AMBIEN CR TAB 12.5MG	3	QL (30 tabs/30 days)
AMBIEN TAB 5MG	3	QL (30 tabs/30 days)
AMBIEN TAB 10MG	3	QL (30 tabs/30 days)
EDLUAR SUB 5MG	3	QL (30 tabs/30 days)
EDLUAR SUB 10MG	3	QL (30 tabs/30 days)
<i>estazolam tab 1 mg</i>	1	
<i>estazolam tab 2 mg</i>	1	
<i>eszopiclone tab 1 mg</i>	1	QL (30 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>eszopiclone tab 2 mg</i>	1	QL (30 tabs/30 days)
<i>eszopiclone tab 3 mg</i>	1	QL (30 tabs/30 days)
<i>flurazepam hcl cap 15 mg</i>	1	
<i>flurazepam hcl cap 30 mg</i>	1	
HALCION TAB 0.25MG	3	
IGALMI MIS 120MCG	3	
IGALMI MIS 180MCG	3	
LUNESTA TAB 1MG	3	QL (30 tabs/30 days)
LUNESTA TAB 2MG	3	QL (30 tabs/30 days)
LUNESTA TAB 3MG	3	QL (30 tabs/30 days)
RESTORIL CAP 7.5MG	3	
RESTORIL CAP 15MG	3	
RESTORIL CAP 22.5MG	3	
RESTORIL CAP 30MG	3	
<i>temazepam cap 7.5 mg</i>	1	
<i>temazepam cap 15 mg</i>	1	
<i>temazepam cap 22.5 mg</i>	1	
<i>temazepam cap 30 mg</i>	1	
<i>triazolam tab 0.25 mg</i>	1	
<i>triazolam tab 0.125 mg</i>	1	
<i>zaleplon cap 5 mg</i>	1	QL (90 caps/30 days)
<i>zaleplon cap 10 mg</i>	1	QL (60 caps/30 days)
<i>zolpidem tartrate sl tab 1.75 mg</i>	1	QL (30 tabs/30 days)
<i>zolpidem tartrate sl tab 3.5 mg</i>	1	QL (30 tabs/30 days)
<i>zolpidem tartrate tab 5 mg</i>	1	QL (30 tabs/30 days)
<i>zolpidem tartrate tab 10 mg</i>	1	QL (30 tabs/30 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	1	QL (30 tabs/30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	1	QL (30 tabs/30 days)

OREXIN RECEPTOR ANTAGONISTS

BELSOMRA TAB 5MG	3	
BELSOMRA TAB 10MG	3	
BELSOMRA TAB 15MG	3	
BELSOMRA TAB 20MG	3	

SELECTIVE MELATONIN RECEPTOR AGONISTS

HETLIOZ CAP 20MG	5	SP, PA, QL (30 caps/30 days)
HETLIOZ LQ SUS 4MG/ML	5	SP, PA, QL (150 mL/30 days)
<i>ramelteon tab 8 mg</i>	1	
<i>tasimelteon capsule 20 mg</i>	5	SP, PA, QL (30 caps/30 days)

LAXATIVES**LAXATIVE COMBINATIONS**

MOVIPREP SOL	2	
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Drug Name	Drug Tier	Requirements/Limits
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	(45 yrs older covered at \$0)
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	1	(45 yrs older covered at \$0)
peg 3350-kcl-nacl-na sulfate-na ascorbate- c for soln 100 gm	1	(45 yrs older covered at \$0)
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	(45 yrs older covered at \$0)
PEG-PREP KIT	3	
sod sulfate-pot sulf-mg sulf oral sol 17.5- 3.13-1.6 gm/177ml	1	(45 yrs older covered at \$0)
SUPREP BOWEL SOL PREP KIT	3	

LAXATIVES - MISCELLANEOUS

KRISTALOSE PAK 10GM	3
KRISTALOSE PAK 20GM	3
LACTULOSE PAK 10GM	3
lactulose solution 10 gm/15ml	1

SALINE LAXATIVES

OSMOPREP TAB 1.5GM	3
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MACROLIDES**AZITHROMYCIN**

azithromycin for susp 100 mg/5ml	1
azithromycin for susp 200 mg/5ml	1
azithromycin powd pack for susp 1 gm	1
azithromycin tab 250 mg	1
azithromycin tab 500 mg	1
azithromycin tab 600 mg	1
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

clarithromycin for susp 125 mg/5ml	1
clarithromycin for susp 250 mg/5ml	1
clarithromycin tab 250 mg	1
clarithromycin tab 500 mg	1
clarithromycin tab er 24hr 500 mg	1

ERYTHROMYCINS

erythromycin ethylsuccinate for susp 200 mg/5ml	1
erythromycin ethylsuccinate for susp 400 mg/5ml	1

Drug Name	Drug Tier	Requirements/Limits
erythromycin ethylsuccinate tab 400 mg	1	
erythromycin stearate tab 250 mg	1	
erythromycin tab 250 mg	1	
erythromycin tab 500 mg	1	
erythromycin tab delayed release 250 mg	1	
erythromycin tab delayed release 333 mg	1	
erythromycin tab delayed release 500 mg	1	
erythromycin w/ delayed release particles cap 250 mg	1	

FIDAXOMICIN

DIFICID SUS	2	QL (150 mL/30 days)
DIFICID TAB 200MG	2	QL (20 tabs/30 days)

MEDICAL DEVICES AND SUPPLIES**CONTRACEPTIVES**

CAYA DPR	0
FEMCAP MIS 22MM	0
FEMCAP MIS 26MM	0
FEMCAP MIS 30MM	0
OMNIFLEX DPR	0
WIDE-SEAL DPR KIT 60	0
WIDE-SEAL DPR KIT 65	0
WIDE-SEAL DPR KIT 70	0
WIDE-SEAL DPR KIT 75	0
WIDE-SEAL DPR KIT 80	0
WIDE-SEAL DPR KIT 85	0
WIDE-SEAL DPR KIT 90	0
WIDE-SEAL DPR KIT 95	0

DIABETIC SUPPLIES

BLOOD GLUCOSE CONTROL SOLUTION	DS	Preferred Diabetic Supply
LANCET DEVICES	DS	Preferred Diabetic Supply
LANCET MISC	DS	Preferred Diabetic Supply
LANCETS	DS	Preferred Diabetic Supply
LANCETS KIT	DS	Preferred Diabetic Supply

MISC. DEVICES

ALCOH-GLOVE PAD CONTOURE	DS	Preferred Diabetic Supply
ALCOHOL SWABS	DS	Preferred Diabetic Supply

PARENTERAL THERAPY SUPPLIES

ABOUTTIME MIS 30GX5/16	3	Non-True Plus Brands
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Drug Name	Drug Tier	Requirements/Limits
ABOUTTIME MIS 31GX3/16	3	Non-True Plus Brands
ABOUTTIME MIS 31GX5/16	3	Non-True Plus Brands
ABOUTTIME MIS 32GX5/32	3	Non-True Plus Brands
ASSURE ID MIS 0.5/31G	3	Non-True Plus Brands
ASSURE ID MIS 1ML/31G	3	Non-True Plus Brands
ASSURE ID MIS 30GX3/16	3	Non-True Plus Brands
ASSURE ID MIS 30GX5/16	3	Non-True Plus Brands
ASSURE ID MIS 31GX3/16	3	Non-True Plus Brands
AUM MINI PEN MIS 32GX4MM	3	Non-True Plus Brands
AUM MINI PEN MIS 32GX5MM	3	Non-True Plus Brands
AUM MINI PEN MIS 32GX6MM	3	Non-True Plus Brands
AUM MINI PEN MIS 32GX8MM	3	Non-True Plus Brands
AUM MINI PEN MIS 33GX4MM	3	Non-True Plus Brands
AUM MINI PEN MIS 33GX5MM	3	Non-True Plus Brands
AUM MINI PEN MIS 33GX6MM	3	Non-True Plus Brands
AUM READYGRD MIS 32GX4MM	3	Non-True Plus Brands
AUM SAFETY MIS 31GX4MM	3	Non-True Plus Brands
AUM SAFETY MIS 31GX5MM	3	Non-True Plus Brands
AUTOSHIELD MIS 29X3/16"	3	Non-True Plus Brands
AUTOSHIELD MIS 29X5/16"	3	Non-True Plus Brands
AUTOSHIELD MIS 30GX5MM	3	Non-True Plus Brands
BD PEN NEEDL MIS 29GX12.7	3	Non-True Plus Brands
BD PEN NEEDL MIS 31GX5MM	3	Non-True Plus Brands
BD PEN NEEDL MIS 31GX8MM	3	Non-True Plus Brands
BD PEN NEEDL MIS 32GX4MM	3	Non-True Plus Brands
BD PEN NEEDL MIS 32GX6MM	3	Non-True Plus Brands
CAREFINE MIS 31GX8MM	3	Non-True Plus Brands
CAREFINE MIS 32GX4MM	3	Non-True Plus Brands
CAREFINE MIS 32GX5MM	3	Non-True Plus Brands
CAREFINE MIS 32GX6MM	3	Non-True Plus Brands
CARETOUCH MIS 31GX5MM	3	Non-True Plus Brands
CARETOUCH MIS 31GX6MM	3	Non-True Plus Brands
CARETOUCH MIS 31GX8MM	3	Non-True Plus Brands
CARETOUCH MIS 32GX4MM	3	Non-True Plus Brands
CARETOUCH MIS 32GX5MM	3	Non-True Plus Brands
CLICKFINE MIS 31GX1/4"	3	Non-True Plus Brands
CLICKFINE MIS 31GX3/16	3	Non-True Plus Brands
CLICKFINE MIS 31GX5/16	3	Non-True Plus Brands
CLICKFINE MIS 31GX8MM	3	Non-True Plus Brands
CLICKFINE MIS 32GX5/32	3	Non-True Plus Brands
COMFORT EZ MIS 29GX12MM	3	Non-True Plus Brands
COMFORT EZ MIS 31GX5/16	3	Non-True Plus Brands
COMFORT EZ MIS 31GX5MM	3	Non-True Plus Brands
COMFORT EZ MIS 31GX6MM	3	Non-True Plus Brands
COMFORT EZ MIS 31GX8MM	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
COMFORT EZ MIS 32GX4MM	3	Non-True Plus Brands
COMFORT EZ MIS 32GX5MM	3	Non-True Plus Brands
COMFORT EZ MIS 32GX6MM	3	Non-True Plus Brands
COMFORT EZ MIS 32GX8MM	3	Non-True Plus Brands
COMFORT EZ MIS 33GX4MM	3	Non-True Plus Brands
COMFORT EZ MIS 33GX5MM	3	Non-True Plus Brands
COMFORT EZ MIS 33GX6MM	3	Non-True Plus Brands
COMFORT EZ MIS 33GX8MM	3	Non-True Plus Brands
COMFORT TOUC MIS 31GX4MM	3	Non-True Plus Brands
COMFORT TOUC MIS 31GX5MM	3	Non-True Plus Brands
COMFORT TOUC MIS 31GX6MM	3	Non-True Plus Brands
COMFORT TOUC MIS 31GX8MM	3	Non-True Plus Brands
COMFORT TOUC MIS 32GX4MM	3	Non-True Plus Brands
COMFORT TOUC MIS 32GX5MM	3	Non-True Plus Brands
COMFORT TOUC MIS 32GX6MM	3	Non-True Plus Brands
COMFORT TOUC MIS 32GX8MM	3	Non-True Plus Brands
COMFORT TOUC MIS 33GX1/4"	3	Non-True Plus Brands
COMFORT TOUC MIS 33GX3/16	3	Non-True Plus Brands
COMFORT TOUC MIS 33GX5/32	3	Non-True Plus Brands
DIATHRIVE MIS 31GX5MM	3	Non-True Plus Brands
DIATHRIVE MIS 31GX6MM	3	Non-True Plus Brands
DIATHRIVE MIS 31GX8MM	3	Non-True Plus Brands
DIATHRIVE MIS 32GX4MM	3	Non-True Plus Brands
DROPLET MICR MIS 34GX9/64	3	Non-True Plus Brands
DROPSAFE MIS 31GX5MM	3	Non-True Plus Brands
EASY COMFORT MIS 31GX1/4"	3	Non-True Plus Brands
EASY COMFORT MIS 31GX3/16	3	Non-True Plus Brands
EASY COMFORT MIS 31GX5/16	3	Non-True Plus Brands
EASY COMFORT MIS 32GX5/32	3	Non-True Plus Brands
EASY TOUCH MIS 29GX1/2"	3	Non-True Plus Brands
EASY TOUCH MIS 29GX5MM	3	Non-True Plus Brands
EASY TOUCH MIS 29GX8MM	3	Non-True Plus Brands
EASY TOUCH MIS 30G	3	Non-True Plus Brands
EASY TOUCH MIS 31GX1/4"	3	Non-True Plus Brands
EASY TOUCH MIS 31GX3/16	3	Non-True Plus Brands
EASY TOUCH MIS 31GX5/16	3	Non-True Plus Brands
EASY TOUCH MIS 32GX1/4"	3	Non-True Plus Brands
EASY TOUCH MIS 32GX3/16	3	Non-True Plus Brands
EASY TOUCH MIS 32GX5/32	3	Non-True Plus Brands
EASY TOUCH MIS 32GX5MM	3	Non-True Plus Brands
EASY TOUCH MIS 32GX6MM	3	Non-True Plus Brands
FIFTY50 MIS 31GX3/16	3	Non-True Plus Brands
FIFTY50 MIS 31GX5/16	3	Non-True Plus Brands
FIFTY50 MIS 31GX5MM	3	Non-True Plus Brands
FIFTY50 PEN MIS 31GX8MM	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
FIFTY50 PEN MIS 32GX4MM	3	Non-True Plus Brands
FIFTY50 PEN MIS 32GX6MM	3	Non-True Plus Brands
GNP ULTICARE MIS 31GX5/16	3	Non-True Plus Brands
GNP ULTICARE MIS 31GX5MM	3	Non-True Plus Brands
GNP ULTICARE MIS 32GX1/4"	3	Non-True Plus Brands
GNP ULTICARE MIS 32GX5/32	3	Non-True Plus Brands
HM INSULIN S MIS 0.3/31G	3	Non-True Plus Brands
HM INSULIN S MIS 1ML/30G	3	Non-True Plus Brands
HM ULTICARE MIS 31GX8MM	3	Non-True Plus Brands
IN CONTROL MIS 31GX3/16	3	Non-True Plus Brands
IN CONTROL MIS 31GX5MM	3	Non-True Plus Brands
IN CONTROL MIS 31GX6MM	3	Non-True Plus Brands
IN CONTROL MIS 31GX8MM	3	Non-True Plus Brands
INCONTROL MIS 29GX12MM	3	Non-True Plus Brands
INS SY 0.3ML MIS 30GX1/2"	3	Non-True Plus Brands
INS SY 0.3ML MIS 31GX5/16	3	Non-True Plus Brands
INS SY 0.5ML MIS 30GX1/2"	3	Non-True Plus Brands
INS SY 0.5ML MIS 30GX5/16	3	Non-True Plus Brands
INS SY 1/2ML MIS 30GX1/2"	3	Non-True Plus Brands
INS SYR 1ML MIS 30GX1/2"	3	Non-True Plus Brands
INS SYR 1ML MIS 30GX5/16	3	Non-True Plus Brands
INS SYR 1ML MIS 31GX5/16	3	Non-True Plus Brands
INS SYR .3ML MIS 30GX1/2"	3	Non-True Plus Brands
INSULIN PEN MIS 31GX4MM	3	Non-True Plus Brands
INSULIN PEN NEEDLES RX	3	Non-True Plus Brands
INSULIN SRYG MIS 1ML/32G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.3/29G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.3/29G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.3/30G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.3/30G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.3/31G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.3/31G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.3ML/30	3	Non-True Plus Brands
INSULIN SYRG MIS 0.3ML/31	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/27G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/28G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.5/28G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/29G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.5/29G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/30G	2	True Plus Products are Preferred

Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRG MIS 0.5/30G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/31G	2	True Plus Products are Preferred
INSULIN SYRG MIS 0.5/31G	3	Non-True Plus Brands
INSULIN SYRG MIS 0.5/32G	3	Non-True Plus Brands
INSULIN SYRG MIS 1/2ML/30	3	Non-True Plus Brands
INSULIN SYRG MIS 1/2ML/31	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/25G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/26G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/27G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/28G	2	True Plus Products are Preferred
INSULIN SYRG MIS 1ML/28G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/29G	2	True Plus Products are Preferred
INSULIN SYRG MIS 1ML/29G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/30G	2	True Plus Products are Preferred
INSULIN SYRG MIS 1ML/30G	3	Non-True Plus Brands
INSULIN SYRG MIS 1ML/31G	2	True Plus Products are Preferred
INSULIN SYRG MIS 1ML/31G	3	Non-True Plus Brands
INSULIN SYRG MIS 2/27.5G	3	Non-True Plus Brands
INSULIN SYRG MIS 27GX1/2"	3	Non-True Plus Brands
INSULIN SYRG MIS 28GX1/2"	3	Non-True Plus Brands
INSULIN SYRG MIS 29GX1/2"	3	Non-True Plus Brands
INSULIN SYRG MIS 29GX12MM	3	Non-True Plus Brands
INSULIN SYRG MIS 30GX1/2"	3	Non-True Plus Brands
INSULIN SYRG MIS 30GX5/16	3	Non-True Plus Brands
INSULIN SYRG MIS 31GX5/16	3	Non-True Plus Brands
INSULIN SYRG MIS 31GX8MM	3	Non-True Plus Brands
INSULIN SYRI MIS 0.3/31G	3	Non-True Plus Brands
INSULIN SYRINGES RX	3	Non-True Plus Brands
INSUPEN MIS 29GX12MM	3	Non-True Plus Brands
INSUPEN MIS 31GX5MM	3	Non-True Plus Brands
INSUPEN MIS 31GX8MM	3	Non-True Plus Brands
INSUPEN MIS 32GX4MM	3	Non-True Plus Brands
INSUPEN MIS 33GX4MM	3	Non-True Plus Brands
INSUPEN SENS MIS 32GX6MM	3	Non-True Plus Brands
INSUPEN SENS MIS 32GX8MM	3	Non-True Plus Brands
INSUPEN ULTR MIS 30GX8MM	3	Non-True Plus Brands
INSUPEN ULTR MIS 31GX6MM	3	Non-True Plus Brands
INSUPEN ULTR MIS 31GX8MM	3	Non-True Plus Brands
LITETOUGH MIS 29GX12.7	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
LITETOUGH MIS 31GX8MM	3	Non-True Plus Brands
MAXICOMFORT MIS 27GX1/2	3	Non-True Plus Brands
MAXICOMFORT MIS 27GX1/2"	3	Non-True Plus Brands
MAXICOMFORT MIS 31GX1/4"	3	Non-True Plus Brands
NOVOFINE AUT MIS 30GX8MM	3	Non-True Plus Brands
NOVOFINE MIS 32GX6MM	3	Non-True Plus Brands
NOVOFINE PLS MIS 32GX4MM	3	Non-True Plus Brands
NOVOTWIST MIS 32GX5MM	3	Non-True Plus Brands
PEN NEEDLE MIS 29GX1/2"	3	Non-True Plus Brands
PEN NEEDLE MIS 29GX3/16	3	Non-True Plus Brands
PEN NEEDLE MIS 29GX5/16	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX3/16	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX4MM	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX5/16	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX5MM	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX6MM	3	Non-True Plus Brands
PEN NEEDLE MIS 31GX8MM	3	Non-True Plus Brands
PEN NEEDLE MIS 32GX1/4"	3	Non-True Plus Brands
PEN NEEDLE MIS 32GX4MM	3	Non-True Plus Brands
PEN NEEDLE MIS 32GX5/32	3	Non-True Plus Brands
PEN NEEDLE MIS 32GX5MM	3	Non-True Plus Brands
PEN NEEDLE MIS 32GX6MM	3	Non-True Plus Brands
PEN NEEDLE MIS 33GX4MM	3	Non-True Plus Brands
PEN NEEDLE MIS 33GX5/32	3	Non-True Plus Brands
PEN NEEDLE MIS 33GX5MM	3	Non-True Plus Brands
PEN NEEDLE MIS 33GX6MM	3	Non-True Plus Brands
PEN NEEDLES MIS 29GX1/2"	3	Non-True Plus Brands
PEN NEEDLES MIS 29GX10MM	3	Non-True Plus Brands
PEN NEEDLES MIS 29GX12.7	2	True Plus Products are Preferred
PEN NEEDLES MIS 29GX12.7	3	Non-True Plus Brands
PEN NEEDLES MIS 29GX12MM	2	Non-True Plus Brands
PEN NEEDLES MIS 29GX12MM	3	Non-True Plus Brands
PEN NEEDLES MIS 30GX3/16	3	Non-True Plus Brands
PEN NEEDLES MIS 30GX5/16	3	Non-True Plus Brands
PEN NEEDLES MIS 30GX5MM	3	Non-True Plus Brands
PEN NEEDLES MIS 30GX8MM	3	Non-True Plus Brands
PEN NEEDLES MIS 31GX1/4"	3	Non-True Plus Brands
PEN NEEDLES MIS 31GX3/16	3	Non-True Plus Brands
PEN NEEDLES MIS 31GX5/16	2	True Plus Products are Preferred
PEN NEEDLES MIS 31GX5/16	3	Non-True Plus Brands
PEN NEEDLES MIS 31GX5MM	2	True Plus Products are Preferred
PEN NEEDLES MIS 31GX5MM	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
PEN NEEDLES MIS 31GX6MM	2	True Plus Products are Preferred
PEN NEEDLES MIS 31GX6MM	3	Non-True Plus Brands
PEN NEEDLES MIS 31GX8MM	2	True Plus Products are Preferred
PEN NEEDLES MIS 31GX8MM	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX1/4	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX1/4"	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX3/16	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX4MM	2	True Plus Products are Preferred
PEN NEEDLES MIS 32GX4MM	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX5/16	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX5/32	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX5MM	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX6MM	3	Non-True Plus Brands
PEN NEEDLES MIS 32GX8MM	3	Non-True Plus Brands
PEN NEEDLES MIS 33GX4MM	3	Non-True Plus Brands
PEN NEEDLES MIS 33GX5/32	3	Non-True Plus Brands
PEN NEEDLES MIS 33GX5MM	3	Non-True Plus Brands
PEN NEEDLES MIS 33GX6MM	3	Non-True Plus Brands
PENTIPS MIS 29GX12MM	3	Non-True Plus Brands
PENTIPS MIS 31GX5MM	3	Non-True Plus Brands
PENTIPS MIS 31GX6MM	3	Non-True Plus Brands
PENTIPS MIS 31GX8MM	3	Non-True Plus Brands
PENTIPS MIS 32GX4MM	3	Non-True Plus Brands
PENTIPS MIS 32GX6MM	3	Non-True Plus Brands
PIP PEN NEED MIS 32GX4MM	3	Non-True Plus Brands
PREVENT DROP MIS 31GX1/4"	3	Non-True Plus Brands
PREVENT DROP MIS 31GX5/16	3	Non-True Plus Brands
PREVENT SAFE MIS 31GX1/4"	3	Non-True Plus Brands
PREVENT SAFE MIS 31GX5/16	3	Non-True Plus Brands
PRO COMFORT MIS 0.5/30G	3	Non-True Plus Brands
PRO COMFORT MIS 0.5/31G	3	Non-True Plus Brands
PRO COMFORT MIS 1ML/30G	3	Non-True Plus Brands
PRO COMFORT MIS 1ML/31G	3	Non-True Plus Brands
PRO COMFORT MIS 32GX6MM	3	Non-True Plus Brands
PURE COMFORT MIS 31GX5MM	3	Non-True Plus Brands
PURE COMFORT MIS 31GX6MM	3	Non-True Plus Brands
PURE COMFORT MIS 32GX4MM	3	Non-True Plus Brands
PURE COMFORT MIS 32GX5MM	3	Non-True Plus Brands
PURE COMFORT MIS 32GX6MM	3	Non-True Plus Brands
PURE COMFORT MIS 32GX8MM	3	Non-True Plus Brands
RA PEN NEEDL MIS 31GX3/16	3	Non-True Plus Brands
RAYA SURE MIS 29GX12MM	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
RAYA SURE MIS 31GX4MM	3	Non-True Plus Brands
RAYA SURE MIS 31GX5MM	3	Non-True Plus Brands
RAYA SURE MIS 31GX6MM	3	Non-True Plus Brands
RAYA SURE MIS 31GX8MM	3	Non-True Plus Brands
RELION PEN MIS 29GX12MM	3	Non-True Plus Brands
RELION PEN MIS 31GX1/4"	3	Non-True Plus Brands
RELION PEN MIS 31GX5/16	3	Non-True Plus Brands
RELION PEN MIS 31GX6MM	3	Non-True Plus Brands
RELION PEN MIS 31GX8MM	3	Non-True Plus Brands
RELION PEN MIS 32GX4MM	3	Non-True Plus Brands
RELION PEN MIS 32GX5/32	3	Non-True Plus Brands
SECURESAFE MIS 0.5/29G	3	Non-True Plus Brands
SECURESAFE MIS 29GX1/2"	3	Non-True Plus Brands
SECURESAFE MIS 30GX5/16	3	Non-True Plus Brands
SURE COMFORT MIS 29GX1/2"	3	Non-True Plus Brands
SURE COMFORT MIS 30GX5/16	3	Non-True Plus Brands
SURE COMFORT MIS 31GX3/16	3	Non-True Plus Brands
SURE COMFORT MIS 31GX5/16	3	Non-True Plus Brands
SURE COMFORT MIS 32GX5/32	3	Non-True Plus Brands
SURE COMFORT MIS 32GX6MM	3	Non-True Plus Brands
SURE-FINE MIS 29GX1/2"	3	Non-True Plus Brands
SURE-FINE MIS 31GX3/16	3	Non-True Plus Brands
SURE-FINE MIS 31GX5/16	3	Non-True Plus Brands
SYRINGE MIS 0.5/30G	3	Non-True Plus Brands
1ML SYRINGE MIS 29G	3	Non-True Plus Brands
1ML SYRINGE MIS 30G	3	Non-True Plus Brands
1ST TIER UNI MIS 29GX12MM	3	Non-True Plus Brands
1ST TIER UNI MIS 31GX5MM	3	Non-True Plus Brands
1ST TIER UNI MIS 31GX6MM	3	Non-True Plus Brands
1ST TIER UNI MIS 31GX8MM	3	Non-True Plus Brands
1ST TIER UNI MIS 32GX4MM	3	Non-True Plus Brands
TIER UNI PLS MIS 31GX8MM	3	Non-True Plus Brands
ULTICARE MIC MIS 32GX4MM	3	Non-True Plus Brands
ULTICARE MIS 30GX3/16	3	Non-True Plus Brands
ULTICARE MIS 30GX5/16	3	Non-True Plus Brands
ULTICARE PEN MIS 31GX5MM	3	Non-True Plus Brands
ULTICARE PEN MIS 31GX6MM	3	Non-True Plus Brands
ULTICARE PEN MIS 31GX8MM	3	Non-True Plus Brands
ULTIGUARD MIS 31GX5MM	3	Non-True Plus Brands
ULTIGUARD MIS 31GX6MM	3	Non-True Plus Brands
ULTIGUARD MIS 31GX8MM	3	Non-True Plus Brands
ULTIGUARD MIS 32GX4MM	3	Non-True Plus Brands
ULTIGUARD MIS 32GX6MM	3	Non-True Plus Brands
ULTILET PEN MIS 29GX12.7	3	Non-True Plus Brands
ULTILET PEN MIS 31GX5MM	3	Non-True Plus Brands

Drug Name	Drug Tier	Requirements/Limits
ULTILET PEN MIS 31GX8MM	3	Non-True Plus Brands
ULTILET PEN MIS 32GX4MM	3	Non-True Plus Brands
ULTRA FLO MIS 31GX5MM	3	Non-True Plus Brands
ULTRA FLO MIS 31GX8MM	3	Non-True Plus Brands
ULTRA FLO MIS PEN NEED	3	Non-True Plus Brands
UNFINE PNTP MIS 32GX4MM	3	Non-True Plus Brands
UNIFINE PLUS MIS 31GX1/4"	3	Non-True Plus Brands
UNIFINE PLUS MIS 31GX3/16	3	Non-True Plus Brands
UNIFINE PLUS MIS 31GX5/16	3	Non-True Plus Brands
UNIFINE PLUS MIS 32GX5/32	3	Non-True Plus Brands
UNIFINE PLUS MIS 33GX5/32	3	Non-True Plus Brands
UNIFINE PNTP MIS 29GX1/2"	3	Non-True Plus Brands
UNIFINE PNTP MIS 29GX12MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 30GX3/16	3	Non-True Plus Brands
UNIFINE PNTP MIS 31GX3/16	3	Non-True Plus Brands
UNIFINE PNTP MIS 31GX5/16	3	Non-True Plus Brands
UNIFINE PNTP MIS 31GX5MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 31GX6MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 31GX8MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 32GX4MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 32GX5/32	3	Non-True Plus Brands
UNIFINE PNTP MIS 32GX6MM	3	Non-True Plus Brands
UNIFINE PNTP MIS 33GX4MM	3	Non-True Plus Brands
UNIFINE ULTR MIS 31GX5MM	3	Non-True Plus Brands
UNIFINE ULTR MIS 31GX6MM	3	Non-True Plus Brands
UNIFINE ULTR MIS 31GX8MM	3	Non-True Plus Brands
UNIFINE ULTR MIS 32GX4MM	3	Non-True Plus Brands
VERIFINE PEN MIS 29GX12MM	3	Non-True Plus Brands
VERIFINE PEN MIS 31GX5MM	3	Non-True Plus Brands
VERIFINE PEN MIS 31GX8MM	3	Non-True Plus Brands
VERIFINE PEN MIS 32GX4MM	3	Non-True Plus Brands
VERIFINE PEN MIS 32GX6MM	3	Non-True Plus Brands
ZEVRX MIS 31GX5MM	3	Non-True Plus Brands
ZEVRX MIS 31GX6MM	3	Non-True Plus Brands
ZEVRX MIS 31GX8MM	3	Non-True Plus Brands
ZEVRX MIS 32GX4MM	3	Non-True Plus Brands

RESPIRATORY THERAPY SUPPLIES

AIRZONE PEAK MIS FLOW MTR	0
MASK VORTEX/ MIS FROG	0
MASK VORTEX/ MIS LADY BUG	0
PEAK AIR FLO MIS ADLT/PED	0
VORTEX VALVE MIS CHAMBER	0
VORTEX/MASK MIS CHILDS	0
VORTEX/MASK MIS TODDLER	0

Drug Name	Drug Tier	Requirements/Limits
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
NURTEC TAB 75MG ODT	5	SP, ST, QL (16 tabs/30 days); Try 2 triptans or, for prevention: a beta-blocker, an anti-epileptic agent, or antidepressant
QULIPTA TAB 10MG	5	SP, ST, QL (30 tabs/30 days); Try a beta-blocker, an anti-epileptic agent, or antidepressant
QULIPTA TAB 30MG	5	SP, ST, QL (30 tabs/30 days); Try a beta-blocker, an anti-epileptic agent, or antidepressant
QULIPTA TAB 60MG	5	SP, ST, QL (30 tabs/30 days); Try a beta-blocker, an anti-epileptic agent, or antidepressant
MIGRAINE COMBINATIONS		
ergotamine w/ caffeine suppos 2-100 mg	1	
ergotamine w/ caffeine tab 1-100 mg	1	
MIGRAINE PRODUCTS		
dihydroergotamine mesylate nasal spray 4 mg/ml	1	
MIGRALAN SPR 4MG/ML	3	
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POW 50MG	3	
diclofenac potassium (migraine) packet 50 mg	1	
SEROTONIN AGONISTS		
almotriptan malate tab 6.25 mg	1	QL (12 tabs/30 days)
almotriptan malate tab 12.5 mg	1	QL (12 tabs/30 days)
eletriptan hydrobromide tab 20 mg (base equivalent)	1	QL (12 tabs/30 days)
eletriptan hydrobromide tab 40 mg (base equivalent)	1	QL (12 tabs/30 days)
frovatriptan succinate tab 2.5 mg (base equivalent)	1	QL (9 tabs/30 days)
IMITREX INJ 6MG/0.5	2	QL (5 inj/30 days)
IMITREX SPR 5MG/ACT	3	QL (12 units/30 days)
IMITREX SPR 20MG/ACT	3	QL (12 units/30 days)
naratriptan hcl tab 1 mg (base equiv)	1	QL (9 tabs/30 days)
naratriptan hcl tab 2.5 mg (base equiv)	1	QL (9 tabs/30 days)
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1	QL (12 tabs/30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL (12 tabs/30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (12 tabs/30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (12 tabs/30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (12 units/30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (12 units/30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (5 inj/30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (4 inj/30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (5 inj/30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	1	QL (4 inj/30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	1	QL (5 inj/30 days)
<i>sumatriptan succinate tab 25 mg</i>	1	QL (9 tabs/30 days)
<i>sumatriptan succinate tab 50 mg</i>	1	QL (9 tabs/30 days)
<i>sumatriptan succinate tab 100 mg</i>	1	QL (9 tabs/30 days)
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	1	QL (12 units/30 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	1	QL (12 units/30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 tabs/30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (12 tabs/30 days)
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs/30 days)
<i>zolmitriptan tab 5 mg</i>	1	QL (12 tabs/30 days)

MINERALS & ELECTROLYTES**FLUORIDE**

<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	(Covered for ages 16 years and under)
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	(Covered for ages 16 years and under)
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	0	(Covered for ages 16 years and under)
<i>sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)</i>	0	(Covered for ages 16 years and under)
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	(Covered for ages 16 years and under)
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	0	(Covered for ages 16 years and under)

PHOSPHATE

<i>K-PHOS TAB</i>	3
<i>pot phos monobasic w/sod phos di & monobas tab 155-852-130mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>potassium phosphate monobasic tab 500 mg</i>	1	
POTASSIUM		
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride powder packet 20 meq</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>penicillamine cap 250 mg</i>	1	
IMMUNOMODULATORS		
<i>lenalidomide cap 5 mg</i>	OC	SP, PA
<i>lenalidomide cap 10 mg</i>	OC	SP, PA
<i>lenalidomide cap 15 mg</i>	OC	SP, PA
<i>lenalidomide cap 20 mg</i>	OC	SP, PA
<i>lenalidomide cap 25 mg</i>	OC	SP, PA
<i>lenalidomide caps 2.5 mg</i>	OC	SP, PA
<i>REVLIMID CAP 2.5MG</i>	OC	SP, PA
<i>REVLIMID CAP 5MG</i>	OC	SP, PA
<i>REVLIMID CAP 10MG</i>	OC	SP, PA
<i>REVLIMID CAP 15MG</i>	OC	SP, PA
<i>REVLIMID CAP 20MG</i>	OC	SP, PA
<i>REVLIMID CAP 25MG</i>	OC	SP, PA
<i>REZUROCK TAB 200MG</i>	5	SP, PA
<i>THALOMID CAP 50MG</i>	OC	SP, PA
<i>THALOMID CAP 100MG</i>	OC	SP, PA
<i>THALOMID CAP 150MG</i>	OC	SP, PA
<i>THALOMID CAP 200MG</i>	OC	SP, PA
IMMUNOSUPPRESSIVE AGENTS		
<i>ASTAGRAF XL CAP 0.5MG</i>	3	
<i>ASTAGRAF XL CAP 1MG</i>	3	
<i>ASTAGRAF XL CAP 5MG</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	1	
<i>azathioprine tab 100 mg</i>	1	
CELLCEPT CAP 250MG	2	
CELLCEPT SUS 200MG/ML	2	
CELLCEPT TAB 500MG	2	
<i>cyclosporine cap 25 mg</i>	1	
<i>cyclosporine cap 100 mg</i>	1	
<i>cyclosporine modified cap 25 mg</i>	1	
<i>cyclosporine modified cap 50 mg</i>	1	
<i>cyclosporine modified cap 100 mg</i>	1	
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	
<i>everolimus tab 0.5 mg</i>	1	
<i>everolimus tab 0.25 mg</i>	1	
<i>everolimus tab 0.75 mg</i>	1	
<i>everolimus tab 1 mg</i>	1	
IMURAN TAB 50MG	3	
<i>mycophenolate mofetil cap 250 mg</i>	1	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	
<i>mycophenolate mofetil tab 500 mg</i>	1	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	
MYFORTIC TAB 180MG	2	
MYFORTIC TAB 360MG	2	
NEORAL CAP 25MG	2	
NEORAL CAP 100MG	2	
NEORAL SOL 100MG/ML	2	
PROGRAF CAP 0.5MG	2	
PROGRAF CAP 1MG	2	
PROGRAF CAP 5MG	2	
RAPAMUNE SOL 1MG/ML	3	
RAPAMUNE TAB 0.5MG	3	
RAPAMUNE TAB 1MG	3	
RAPAMUNE TAB 2MG	3	
SANDIMMUNE CAP 25MG	2	
SANDIMMUNE CAP 100MG	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	
<i>sirolimus tab 0.5 mg</i>	1	
<i>sirolimus tab 1 mg</i>	1	
<i>sirolimus tab 2 mg</i>	1	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
tacrolimus cap 5 mg	1	
POTASSIUM REMOVING AGENTS		
sodium polystyrene sulfonate oral susp 15 gm/60ml	1	
*sodium polystyrene sulfonate powder**	1	
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP 50MG	5	SP, PA
ZOKINVY CAP 75MG	5	SP, PA
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
lidocaine hcl laryngotracheal soln 4%	1	
lidocaine hcl viscous soln 2%	1	
ANTI-INFECTIVES - THROAT		
clotrimazole troche 10 mg	1	
nystatin susp 100000 unit/ml	1	
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate soln 0.12%	1	
DENTAL PRODUCTS		
stannous fluoride conc 0.63%	1	
PERIODONTAL PRODUCTS		
ARESTIN MIS 1MG	3	
STEROIDS - MOUTH/THROAT/DENTAL		
triamcinolone acetonide dental paste 0.1%	1	
THROAT PRODUCTS - MISC.		
AQUORAL SPR	3	
cevimeline hcl cap 30 mg	1	
EVOXAC CAP 30MG	3	
pilocarpine hcl tab 5 mg	1	
pilocarpine hcl tab 7.5 mg	1	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
AMRIX CAP 15MG	3	
AMRIX CAP 30MG	3	
baclofen tab 5 mg	1	
baclofen tab 10 mg	1	
baclofen tab 20 mg	1	
carisoprodol tab 250 mg	1	QL (150 tabs/30 days)
carisoprodol tab 350 mg	1	QL (120 tabs/30 days)
chlorzoxazone tab 375 mg	1	
chlorzoxazone tab 500 mg	1	
chlorzoxazone tab 750 mg	1	
CYCLOBENZAPR CRE 20MG/GM	3	
cyclobenzaprine hcl cap er 24hr 15 mg	1	

Drug Name	Drug Tier	Requirements/Limits
cyclobenzaprine hcl cap er 24hr 30 mg	1	
cyclobenzaprine hcl tab 5 mg	1	
cyclobenzaprine hcl tab 7.5 mg	1	
cyclobenzaprine hcl tab 10 mg	1	
metaxalone tab 400 mg	1	
metaxalone tab 800 mg	1	
methocarbamol tab 500 mg	1	
methocarbamol tab 750 mg	1	
orphenadrine citrate tab er 12hr 100 mg	1	
SKELAXIN TAB 800MG	3	
tizanidine hcl cap 2 mg (base equivalent)	1	
tizanidine hcl cap 4 mg (base equivalent)	1	
tizanidine hcl cap 6 mg (base equivalent)	1	
tizanidine hcl tab 2 mg (base equivalent)	1	
tizanidine hcl tab 4 mg (base equivalent)	1	
ZANAFLEX CAP 2MG	3	
ZANAFLEX CAP 4MG	3	
ZANAFLEX CAP 6MG	3	

DIRECT MUSCLE RELAXANTS

dantrolene sodium cap 25 mg	1
dantrolene sodium cap 50 mg	1
dantrolene sodium cap 100 mg	1

NASAL AGENTS - SYSTEMIC AND TOPICAL**NASAL AGENT COMBINATIONS**

azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	1
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NASAL ANTIALLERGY

azelastine hcl nasal spray 0.1% (137 mcg/spray)	1
azelastine hcl nasal spray 0.15% (205.5 mcg/spray)	1
olopatadine hcl nasal soln 0.6%	1
PATANASE SPR 0.6%	3

NASAL ANTICHOLINERGICS

ipratropium bromide nasal soln 0.03% (21 mcg/spray)	1
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	1

NASAL STEROIDS

flunisolide nasal soln 25 mcg/act (0.025%)	1
fluticasone propionate nasal susp 50 mcg/act	1
mometasone furoate nasal susp 50 mcg/act	1

Drug Name	Drug Tier	Requirements/Limits
QNASL AER 80MCG	3	ST; Try fluticasone and flunisolide
QNASL CHILD SPR 40MCG	3	ST; Try fluticasone and flunisolide

NEUROMUSCULAR AGENTS**ALS AGENTS**

RADICAVA ORS SUS 105/5ML	5	SP, PA
RADICAVA ORS SUS STARTER	5	SP, PA
RELYVRYO PAK 3-1GM	5	SP, PA
RILUTEK TAB 50MG	3	
riluzole tab 50 mg	1	

FRIEDRICH'S ATAXIA AGENTS

SKYCLARYS CAP 50MG	5	SP, PA
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RETT SYNDROME AGENTS

DAYBUE SOL 200MG/ML	5	SP, PA
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SPINAL MUSCULAR ATROPHY AGENTS (SMA)

EVRYSDI SOL	5	SP, PA
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OPHTHALMIC AGENTS**ARTIFICIAL TEARS AND LUBRICANTS**

LACRISERT MIS 5MG OP	3	
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BETA-BLOCKERS - OPHTHALMIC

<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	3	
BETIMOL SOL 0.25%	3	
BETOPTIC-S SUS 0.25% OP	3	
<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%	3	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 22.3-6.8	3	
<i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
<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	

Drug Name	Drug Tier Requirements/Limits
<i>timolol maleate preservative free ophth soln 0.5%</i>	1
<i>timolol maleate preservative free ophth soln 0.25%</i>	1
TIMOPTIC OCU SOL 0.5% OP	3
TIMOPTIC OCU SOL 0.25% OP	3
TIMOPTIC SOL 0.5% OP	3
TIMOPTIC SOL 0.25% OP	3
TIMOPTIC-XE SOL 0.5% OP	3
TIMOPTIC-XE SOL 0.25% OP	3
CYCLOPLEGIC MYDRIATICS	
ATROPINE SUL SOL 1% OP	2
<i>atropine sulfate ophth soln 1%</i>	1
CYCLOMYDRIL SOL OP	3
<i>cyclopentolate hcl ophth soln 0.5%</i>	1
<i>cyclopentolate hcl ophth soln 1%</i>	1
<i>cyclopentolate hcl ophth soln 2%</i>	1
ISOPTO ATROP SOL 1% OP	2
<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	
<i>pilocarpine hcl ophth soln 1%</i>	1
<i>pilocarpine hcl ophth soln 2%</i>	1
<i>pilocarpine hcl ophth soln 4%</i>	1
OPHTHALMIC ADRENERGIC AGENTS	
ALPHAGAN P SOL 0.1%	2
ALPHAGAN P SOL 0.15%	3
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1
<i>brimonidine tartrate ophth soln 0.2%</i>	1
<i>brimonidine tartrate ophth soln 0.15%</i>	1
SIMBRINZA SUS 1-0.2%	3
OPHTHALMIC ANTI-INFECTIVES	
AZASITE SOL 1%	3
<i>bacitracin ophth oint 500 unit/gm</i>	1
<i>bacitracin-polymyxin b ophth oint</i>	1
BESIVANCE SUS 0.6%	3
CILOXAN OIN 0.3% OP	2
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1
<i>erythromycin ophth oint 5 mg/gm</i>	1
<i>gatifloxacin ophth soln 0.5%</i>	1
<i>gentamicin sulfate ophth oint 0.3%</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
<i>MOXEZA SOL 0.5%</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	1	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
<i>NATACYN SUS 5% OP</i>	3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg- 400unt-10000unt op oin</i>	1	
<i>neomycin-polymyx-gramicid op sol 1.75- 10000-0.025mg-unt-mg/ml</i>	1	
<i>OCUFLOX DRO 0.3% OP</i>	3	
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium ophth oint 10%</i>	1	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
<i>TOBREX OIN 0.3% OP</i>	2	
<i>TOBREX SOL 0.3% OP</i>	3	
<i>trifluridine ophth soln 1%</i>	1	
<i>ZIRGAN GEL 0.15%</i>	2	
<i>ZYMAXID SOL 0.5%</i>	3	
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine (ophth) emulsion 0.05%</i>	1	QL (60 single use vials/30 days)
OPHTHALMIC INTEGRIN ANTAGONISTS		
<i>XiIDRA DRO 5%</i>	3	ST, QL (60 single use vials/30 days); Must try generic cyclosporine 0.05% ophth
OPHTHALMIC KINASE INHIBITORS		
<i>RHOPRESSA SOL 0.02%</i>	3	
<i>ROCKLATAN DRO</i>	3	
OPHTHALMIC LOCAL ANESTHETICS		
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
OPHTHALMIC NERVE GROWTH FACTORS		
<i>OXERVATE SOL 20MCG/ML</i>	5	SP, PA, QL (One 8-week treatment per eye per year)
OPHTHALMIC STEROIDS		
<i>ALREX SUS 0.2%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	2	
BLEPHAMIDE SUS OP	2	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
<i>difluprednate ophth emulsion 0.05%</i>	1	
<i>fluorometholone ophth susp 0.1%</i>	1	
<i>loteprednol etabonate ophth gel 0.5%</i>	1	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
<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>	1	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
<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	3	
TOBRADEX SUS 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
ZYLET SUS 0.5-0.3%	2	
OPHTHALMICS - MISC.		
ALOCRIL SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>azelastine hcl ophth soln 0.05%</i>	1	
<i>bepotastine besilate ophth soln 1.5%</i>	1	
<i>brinzolamide ophth susp 1%</i>	1	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>cromolyn sodium ophth soln 4%</i>	1	
CYSTADROPS SOL 0.37%	5	SP, PA
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
<i>epinastine hcl ophth soln 0.05%</i>	1	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
LASTACAFT SOL 0.25%	3	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PROLENSA SOL 0.07%	3	
TRUSOPT SOL 2% OP	3	
UPNEEQ SOL 0.1%	3	PA, QL (30 vials/30 days)

PROSTAGLANDINS - OPHTHALMIC

<i>bimatoprost ophth soln 0.03%</i>	1
<i>latanoprost ophth soln 0.005%</i>	1
LUMIGAN SOL 0.01%	2
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1
VYZULTA SOL 0.024%	3
XALATAN SOL 0.005%	3

OTIC AGENTS**OTIC AGENTS - MISCELLANEOUS**

<i>acetic acid otic soln 2%</i>	1
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OTIC ANTI-INFECTIVES

<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1
<i>ofloxacin otic soln 0.3%</i>	1

OTIC COMBINATIONS

CIPRO HC SUS OTIC	3
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1
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
<i>pramoxine-hc-chloroxylenol otic soln 10-10-1 mg/ml</i>	1

OTIC STEROIDS

DERMOTIC OIL 0.01%	3
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1

OXYTOCICS**OXYTOCICS**

<i>methylergonovine maleate tab 0.2 mg</i>	1
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PENICILLINS**AMINOPENICILLINS**

<i>amoxicillin (trihydrate) cap 250 mg</i>	1
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Drug Name	Drug Tier	Requirements/Limits
<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	

NATURAL PENICILLINS

<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

PENICILLIN COMBINATIONS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1
<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>	1
<i>AUGMENTIN SUS 125/5ML</i>	3

PENICILLINASE-RESISTANT PENICILLINS

<i>dicloxacillin sodium cap 250 mg</i>	1
<i>dicloxacillin sodium cap 500 mg</i>	1

PROGESTINS**PROGESTINS**

<i>AYGESTIN TAB 5MG</i>	3
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<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	
PROMETRIUM CAP 100MG	3	
PROMETRIUM CAP 200MG	3	
PROVERA TAB 2.5MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.**AGENTS FOR CHEMICAL DEPENDENCY**

<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
LUCEMYRA TAB 0.18MG	3	QL (224 tabs/90 days)

ANTI-CATAPECTIC AGENTS

SOD OXYBATE SOL 500MG/ML	5	SP, PA
XYREM SOL 500MG/ML	5	SP, PA
XYWAV SOL 0.5GM/ML	5	SP, PA

ANTIDEMENTIA AGENTS

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 tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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>	1	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<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>	1	
<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	
COMBINATION PSYCHOTHERAPEUTICS		
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
<i>SYMBYAX CAP 3-25MG</i>	3	
<i>SYMBYAX CAP 6-25MG</i>	3	
FIBROMYALGIA AGENTS		
<i>SAVELLA MIS TITR PAK</i>	2	
<i>SAVELLA TAB 12.5MG</i>	2	
<i>SAVELLA TAB 25MG</i>	2	
<i>SAVELLA TAB 50MG</i>	2	
<i>SAVELLA TAB 100MG</i>	2	
MOVEMENT DISORDER DRUG THERAPY		
<i>INGREZZA CAP 40-80MG</i>	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
INGREZZA CAP 40MG	5	SP, PA
INGREZZA CAP 60MG	5	SP, PA
INGREZZA CAP 80MG	5	SP, PA
<i>tetrabenazine tab 12.5 mg</i>	4	SP, PA
<i>tetrabenazine tab 25 mg</i>	4	SP, PA
MULTIPLE SCLEROSIS AGENTS		
AMPYRA TAB 10MG	4	SP, PA
AUBAGIO TAB 7MG	4	SP, PA
AUBAGIO TAB 14MG	4	SP, PA
<i>dimethyl fumarate capsule delayed release 120 mg</i>	4	SP, PA
<i>dimethyl fumarate capsule delayed release 240 mg</i>	4	SP, PA
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	4	SP, PA
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	4	SP, PA
GILENYA CAP 0.5MG	4	SP, PA
GILENYA CAP 0.25MG	4	SP, PA
MAVENCLAD PAK 10MG(4)	5	SP, PA
MAVENCLAD PAK 10MG(5)	5	SP, PA
MAVENCLAD PAK 10MG(6)	5	SP, PA
MAVENCLAD PAK 10MG(7)	5	SP, PA
MAVENCLAD PAK 10MG(8)	5	SP, PA
MAVENCLAD PAK 10MG(9)	5	SP, PA
MAVENCLAD PAK 10MG(10)	5	SP, PA
MAYZENT PAK STARTER	5	SP, PA
MAYZENT TAB 0.25MG	5	SP, PA
MAYZENT TAB 1MG	5	SP, PA
MAYZENT TAB 2MG	5	SP, PA
PONVORY TAB 20MG	5	SP, PA
PONVORY TAB STARTER	5	SP, PA
ZEPOSIA 7DAY CAP STR PACK	5	SP, PA
ZEPOSIA CAP .92MG	5	SP, PA
ZEPOSIA CAP STR KIT	5	SP, PA
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS		
<i>fluoxetine hcl (pmdd) tab 10 mg</i>	1	
<i>fluoxetine hcl (pmdd) tab 20 mg</i>	1	
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA CAP 20-10MG	3	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>SMOKING DETERRENTS</i>		
APO-VARENICL TAB 0.5MG	0	QL (Max 180 days per year); (Min age 18 years)
APO-VARENICL TAB 1MG	0	QL (Max 180 days per year); (Min age 18 years)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>nicotine polacrilex gum</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>nicotine polacrilex lozenge</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>nicotine transdermal patch</i>	0	QL (Max 180 days per year); (Min age 18 years)
NICOTROL INH	0	QL (Max 180 days per year); (Min age 18 years)
NICOTROL NS SPR 10MG/ML	0	QL (Max 180 days per year); (Min age 18 years)
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>varenicline tartrate tab 1 mg (base equiv)</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	0	QL (Max 180 days per year); (Min age 18 years)
<i>VASOMOTOR SYMPTOM AGENTS</i>		
BRISDELLE CAP 7.5MG	3	QL (30 caps/30 days)
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	QL (30 caps/30 days)
<i>RESPIRATORY AGENTS - MISC.</i>		
<i>CYSTIC FIBROSIS AGENTS</i>		
KALYDECO GRA 13.4MG	4	SP, PA
KALYDECO PAK 25MG	4	SP, PA
KALYDECO PAK 50MG	4	SP, PA
KALYDECO PAK 75MG	4	SP, PA
KALYDECO TAB 150MG	4	SP, PA
ORKAMBI GRA 75-94MG	5	SP, PA
ORKAMBI GRA 100-125	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ORKAMBI TAB 100-125	5	SP, PA
ORKAMBI TAB 200-125	5	SP, PA
PULMOZYME SOL 1MG/ML	4	SP, PA
SYMDEKO TAB 50-75MG	5	SP, PA
SYMDEKO TAB 100-150	5	SP, PA
TRIKAFTA PAK 59.5MG	5	SP, PA
TRIKAFTA PAK 75MG	5	SP, PA
TRIKAFTA TAB	5	SP, PA

PULMONARY FIBROSIS AGENTS

ESBRIET CAP 267MG	4	SP, PA
ESBRIET TAB 267MG	4	SP, PA
ESBRIET TAB 801MG	4	SP, PA
OFEV CAP 100MG	4	SP, PA
OFEV CAP 150MG	4	SP, PA
<i>pirfenidone tab 267 mg</i>	4	SP, PA
<i>pirfenidone tab 534 mg</i>	4	SP, PA
<i>pirfenidone tab 801 mg</i>	4	SP, PA

SULFONAMIDES**SULFONAMIDES**

sulfadiazine tab 500 mg	1
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TETRACYCLINES**TETRACYCLINES**

<i>demeclacycline hcl tab 150 mg</i>	1
<i>demeclacycline hcl tab 300 mg</i>	1
<i>doxycycline hyclate cap 50 mg</i>	1
<i>doxycycline hyclate cap 100 mg</i>	1
<i>doxycycline hyclate tab 20 mg</i>	1
<i>doxycycline hyclate tab 100 mg</i>	1
<i>doxycycline monohydrate cap 50 mg</i>	1
<i>doxycycline monohydrate cap 100 mg</i>	1
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1
<i>doxycycline monohydrate tab 50 mg</i>	1
<i>doxycycline monohydrate tab 100 mg</i>	1
<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 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>	1 (Min age 12 years)
<i>minocycline hcl tab er 24hr 55 mg</i>	1 (Min age 12 years)
<i>minocycline hcl tab er 24hr 65 mg</i>	1 (Min age 12 years)
<i>minocycline hcl tab er 24hr 80 mg</i>	1 (Min age 12 years)

Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl tab er 24hr 90 mg</i>	1	(Min age 12 years)
<i>minocycline hcl tab er 24hr 105 mg</i>	1	(Min age 12 years)
<i>minocycline hcl tab er 24hr 115 mg</i>	1	(Min age 12 years)
<i>minocycline hcl tab er 24hr 135 mg</i>	1	(Min age 12 years)
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	1	

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

<i>CYTOMEL TAB 5MCG</i>	3
<i>CYTOMEL TAB 25MCG</i>	3
<i>CYTOMEL TAB 50MCG</i>	3
<i>levothyroxine sodium cap 13 mcg</i>	1
<i>levothyroxine sodium cap 25 mcg</i>	1
<i>levothyroxine sodium cap 50 mcg</i>	1
<i>levothyroxine sodium cap 75 mcg</i>	1
<i>levothyroxine sodium cap 88 mcg</i>	1
<i>levothyroxine sodium cap 100 mcg</i>	1
<i>levothyroxine sodium cap 112 mcg</i>	1
<i>levothyroxine sodium cap 125 mcg</i>	1
<i>levothyroxine sodium cap 137 mcg</i>	1
<i>levothyroxine sodium cap 150 mcg</i>	1
<i>levothyroxine sodium cap 175 mcg</i>	1
<i>levothyroxine sodium cap 200 mcg</i>	1
<i>levothyroxine sodium tab 25 mcg</i>	1
<i>levothyroxine sodium tab 50 mcg</i>	1
<i>levothyroxine sodium tab 75 mcg</i>	1
<i>levothyroxine sodium tab 88 mcg</i>	1
<i>levothyroxine sodium tab 100 mcg</i>	1
<i>levothyroxine sodium tab 112 mcg</i>	1
<i>levothyroxine sodium tab 125 mcg</i>	1
<i>levothyroxine sodium tab 137 mcg</i>	1
<i>levothyroxine sodium tab 150 mcg</i>	1
<i>levothyroxine sodium tab 175 mcg</i>	1
<i>levothyroxine sodium tab 200 mcg</i>	1
<i>levothyroxine sodium tab 300 mcg</i>	1
<i>liothyronine sodium tab 5 mcg</i>	1
<i>liothyronine sodium tab 25 mcg</i>	1
<i>liothyronine sodium tab 50 mcg</i>	1
<i>SYNTHROID TAB 25MCG</i>	2
<i>SYNTHROID TAB 50MCG</i>	2

Drug Name	Drug Tier Requirements/Limits
SYNTHROID TAB 75MCG	2
SYNTHROID TAB 88MCG	2
SYNTHROID TAB 100MCG	2
SYNTHROID TAB 112MCG	2
SYNTHROID TAB 125MCG	2
SYNTHROID TAB 137MCG	2
SYNTHROID TAB 150MCG	2
SYNTHROID TAB 175MCG	2
SYNTHROID TAB 200MCG	2
SYNTHROID TAB 300MCG	2
TIROSINT CAP 13MCG	3
TIROSINT CAP 25MCG	3
TIROSINT CAP 50MCG	3
TIROSINT CAP 75MCG	3
TIROSINT CAP 88MCG	3
TIROSINT CAP 100MCG	3
TIROSINT CAP 112MCG	3
TIROSINT CAP 125MCG	3
TIROSINT CAP 137MCG	3
TIROSINT CAP 150MCG	3
TIROSINT CAP 175MCG	3
TIROSINT CAP 200	3

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS**ANTISPASMODICS**

BELLA/OPIUM SUP 16.2-30	3
BELLA/OPIUM SUP 16.2-60	3
<i>chlordiazepoxide hcl-clidinium bromide cap</i> 5-2.5 mg	1
<i>dicyclomine hcl cap 10 mg</i>	1
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1
<i>dicyclomine hcl tab 20 mg</i>	1
GLYCATE TAB 1.5MG	3
GLYCOPYRROLA TAB 1.5MG	3
<i>glycopyrrolate tab 1 mg</i>	1
<i>glycopyrrolate tab 2 mg</i>	1
<i>methscopolamine bromide tab 2.5 mg</i>	1
<i>methscopolamine bromide tab 5 mg</i>	1
ROBINUL FORT TAB 2MG	3
ROBINUL TAB 1MG	3

H-2 ANTAGONISTS

<i>cimetidine hcl soln 300 mg/5ml</i>	1
<i>cimetidine tab 200 mg</i>	1
<i>cimetidine tab 300 mg</i>	1
<i>cimetidine tab 400 mg</i>	1
<i>cimetidine tab 800 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
famotidine for susp 40 mg/5ml	1	
famotidine tab 20 mg	1	
famotidine tab 40 mg	1	
nizatidine cap 150 mg	1	
nizatidine cap 300 mg	1	
nizatidine oral soln 15 mg/ml	1	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	
MISC. ANTI-ULCER		
CARAFATE SUS 1GM/10ML	3	
sucralfate susp 1 gm/10ml	1	
sucralfate tab 1 gm	1	
PROTON PUMP INHIBITORS		
dexlansoprazole cap delayed release 30 mg	1	
dexlansoprazole cap delayed release 60 mg	1	
esomeprazole magnesium cap delayed release 20 mg (base eq)	1	
esomeprazole magnesium cap delayed release 40 mg (base eq)	1	
esomeprazole magnesium for delayed release susp packet 10 mg	1	
esomeprazole magnesium for delayed release susp packet 20 mg	1	
esomeprazole magnesium for delayed release susp packet 40 mg	1	
lansoprazole cap delayed release 15 mg	1	
lansoprazole cap delayed release 30 mg	1	
lansoprazole tab delayed release orally disintegrating 15 mg	1	
lansoprazole tab delayed release orally disintegrating 30 mg	1	
NEXIUM GRA 2.5MG DR	3	
NEXIUM GRA 5MG DR	3	
omeprazole cap delayed release 10 mg	1	
omeprazole cap delayed release 20 mg	1	
omeprazole cap delayed release 40 mg	1	
pantoprazole sodium ec tab 20 mg (base equiv)	1	
pantoprazole sodium ec tab 40 mg (base equiv)	1	
pantoprazole sodium for delayed release susp packet 40 mg	1	
rabeprazole sodium ec tab 20 mg	1	
ULCER DRUGS - PROSTAGLANDINS		
CYTOTEC TAB 100MCG	3	
CYTOTEC TAB 200MCG	3	

Drug Name	Drug Tier	Requirements/Limits
<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>	1
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	1
<i>HELDAC MIS THERAPY</i>	3
<i>OMECLAMOX- MIS PAK</i>	3
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	1
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	1
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	1
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	1
<i>PYLERA CAP</i>	3

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

<i>oxybutynin chloride syrup 5 mg/5ml</i>	1
<i>oxybutynin chloride tab 5 mg</i>	1
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1
<i>solifenacina succinate tab 5 mg</i>	1
<i>solifenacina succinate tab 10 mg</i>	1
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1
<i>tolterodine tartrate tab 1 mg</i>	1
<i>tolterodine tartrate tab 2 mg</i>	1
<i>trospium chloride cap er 24hr 60 mg</i>	1
<i>trospium chloride tab 20 mg</i>	1

URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS

<i>MYRBETRIQ TAB 25MG</i>	3	ST; Try generic urinary antispasmodic
<i>MYRBETRIQ TAB 50MG</i>	3	ST; Try generic urinary antispasmodic

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

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	
VAGINAL AND RELATED PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
FEM PH GEL	3	
INTRAROSA SUP 6.5MG	2	
SPERMICIDES		
GYNOL II GEL 3%	0	
VCF VAGINAL GEL CONTRACE	0	
VAGINAL ANTI-INFECTIVES		
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 nitrate vaginal suppos 200 mg</i>	1	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	1	
VANDAZOLE GEL 0.75%	3	
VAGINAL CONTRACEPTIVE - PH MODULATORS		
PHEXXI GEL	2	
VAGINAL ESTROGENS		
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estradiol vaginal tab 10 mcg</i>	1	
ESTRING MIS 2MG	3	
ESTRING MIS 7.5/24HR	3	
FEMRING MIS 0.1MG/24	3	
FEMRING MIS 0.05/24H	3	
PREMARIN VAG CRE 0.625MG	2	
VAGINAL PROGESTINS		
CRINONE GEL 4% VAG	3	
CRINONE GEL 8% VAG	3	
ENDOMETRIN SUP 100MG	3	refer to plan benefits
PROGESTERONE SUP VGS 100	3	
PROGESTERONE SUP VGS 200	3	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
AUVI-Q INJ 0.1MG	3	
AUVI-Q INJ 0.3MG	3	
AUVI-Q INJ 0.15MG	3	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	1	
EPIPEN 2-PAK INJ 0.3MG	3	
EPIPEN-JR INJ 0.15MG	3	
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
NORTHERA CAP 100MG	4	SP, PA
NORTHERA CAP 200MG	4	SP, PA
NORTHERA CAP 300MG	4	SP, PA
VASOPRESSORS		
<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	

VITAMINS**OIL SOLUBLE VITAMINS**

<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1
<i>phytonadione tab 5 mg</i>	1

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<i>aprepitant capsule 40 mg</i>	55
<i>aprepitant capsule 80 mg</i>	55
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	55
<i>APTIVUS CAP 250MG</i>	82
<i>AQUORAL SPR</i>	135
<i>ARAVA TAB 10MG</i>	23
<i>ARAVA TAB 20MG</i>	23
<i>ARESTIN MIS 1MG</i>	135
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	36
<i>ARICEPT TAB 10MG</i>	143
<i>ARICEPT TAB 23MG</i>	143
<i>ARICEPT TAB 5MG</i>	143
<i>ARIMIDEX TAB 1MG</i>	70
<i>ariPIPRAZOLE oral solution 1 mg/ml</i>	82
<i>ariPIPRAZOLE orally disintegrating tab 10 mg</i>	82
<i>ariPIPRAZOLE orally disintegrating tab 15 mg</i>	82
<i>ariPIPRAZOLE tab 10 mg</i>	82
<i>ariPIPRAZOLE tab 15 mg</i>	82
<i>ariPIPRAZOLE tab 2 mg</i>	82
<i>ariPIPRAZOLE tab 20 mg</i>	82
<i>ariPIPRAZOLE tab 30 mg</i>	82
<i>ariPIPRAZOLE tab 5 mg</i>	82
<i>armodafinil tab 150 mg</i>	18
<i>armodafinil tab 200 mg</i>	18
<i>armodafinil tab 250 mg</i>	18
<i>armodafinil tab 50 mg</i>	18
<i>ARNUITY ELPT INH 100MCG</i>	35
<i>ARNUITY ELPT INH 200MCG</i>	35
<i>ARNUITY ELPT INH 50MCG</i>	35
<i>AROMASIN TAB 25MG</i>	70
<i>ARTHROTEC 50 TAB</i>	21
<i>ARTHROTEC 75 TAB</i>	21
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	80
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	80
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	80
<i>ASMANEX 120 AER 220MCG</i>	35
<i>ASMANEX 14 AER 220MCG</i>	35
<i>ASMANEX 30 AER 110MCG</i>	35
<i>ASMANEX 30 AER 220MCG</i>	35
<i>ASMANEX 60 AER 220MCG</i>	35
<i>ASMANEX 7 AER 110MCG</i>	35
<i>ASMANEX HFA AER 100 MCG</i>	35
<i>ASMANEX HFA AER 200 MCG</i>	35
<i>aspirin chewable 81mg</i>	23
<i>aspirin enteric coated 81mg</i>	24
<i>aspirin-dipyridamole cap er 12hr 25- 200 mg</i>	117
<i>ASSURE ID MIS 0.5/31G</i>	123
<i>ASSURE ID MIS 1ML/31G</i>	123
<i>ASSURE ID MIS 30GX3/16</i>	123
<i>ASSURE ID MIS 30GX5/16</i>	123
<i>ASSURE ID MIS 31GX3/16</i>	123

ASTAGRAF XL CAP 0.5MG.....	133
ASTAGRAF XL CAP 1MG	133
ASTAGRAF XL CAP 5MG	133
ATACAND TAB 16MG.....	62
ATACAND TAB 32MG.....	62
ATACAND TAB 4MG	61
ATACAND TAB 8MG	62
atazanavir sulfate cap 150 mg (base equiv)	82
atazanavir sulfate cap 200 mg (base equiv)	82
atazanavir sulfate cap 300 mg (base equiv)	82
ATELVIA TAB	110
atenolol & chlorthalidone tab 100-25 mg	64
atenolol & chlorthalidone tab 50-25 mg	64
atenolol tab 100 mg	86
atenolol tab 25 mg	86
atenolol tab 50 mg	86
ATIVAN TAB 0.5MG	33
ATIVAN TAB 1MG	33
ATIVAN TAB 2MG	33
atomoxetine hcl cap 10 mg (base equiv)	18
atomoxetine hcl cap 100 mg (base equiv)	18
atomoxetine hcl cap 18 mg (base equiv)	18
atomoxetine hcl cap 25 mg (base equiv)	18
atomoxetine hcl cap 40 mg (base equiv)	18
atomoxetine hcl cap 60 mg (base equiv)	18
atomoxetine hcl cap 80 mg (base equiv)	18
atorvastatin calcium tab 10 mg (base equivalent)	58
atorvastatin calcium tab 20 mg (base equivalent)	58
atorvastatin calcium tab 40 mg (base equivalent)	58
atorvastatin calcium tab 80 mg (base equivalent)	58
atovaquone susp 750 mg/5ml.....	30

atovaquone-proguanil hcl tab 250-100 mg	67
atovaquone-proguanil hcl tab 62.5-25 mg	67
ATRALIN GEL 0.05%.....	99
ATROPINE SUL SOL 1% OP	138
atropine sulfate ophth soln 1%	138
ATROVENT HFA AER 17MCG	34
AUBAGIO TAB 14MG.....	145
AUBAGIO TAB 7MG.....	145
AUGMENTIN SUS 125/5ML	142
AUM MINI PEN MIS 32GX4MM.....	123
AUM MINI PEN MIS 32GX5MM.....	123
AUM MINI PEN MIS 32GX6MM.....	123
AUM MINI PEN MIS 32GX8MM.....	123
AUM MINI PEN MIS 33GX4MM.....	123
AUM MINI PEN MIS 33GX5MM.....	123
AUM MINI PEN MIS 33GX6MM.....	123
AUM READYGRD MIS 32GX4MM	123
AUM SAFETY MIS 31GX4MM	123
AUM SAFETY MIS 31GX5MM	123
AURYXIA TAB 210MG.....	115
AUTOSHIELD MIS 29X3/16.....	123
AUTOSHIELD MIS 29X5/16.....	123
AUTOSHIELD MIS 30GX5MM.....	123
AUVELITY TAB 45-105MG.....	44
AUVI-Q INJ 0.15MG.....	152
AUVI-Q INJ 0.1MG.....	152
AUVI-Q INJ 0.3MG.....	152
AVALIDE TAB 150-12.5	64
AVALIDE TAB 300-12.5	64
AVAPRO TAB 150MG.....	62
AVAPRO TAB 300MG.....	62
AVAPRO TAB 75MG.....	62
AVODART CAP 0.5MG	116
AYGESTIN TAB 5MG	142
AYVAKIT TAB 100MG	71
AYVAKIT TAB 200MG	71
AYVAKIT TAB 25MG	71
AYVAKIT TAB 300MG	71
AYVAKIT TAB 50MG	71
AZASITE SOL 1%	138
azathioprine tab 100 mg	134
azathioprine tab 50 mg	134
azathioprine tab 75 mg	134
azelaic acid gel 15%.....	107

<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	136
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	136
<i>azelastine hcl ophth soln 0.05%</i>	140
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	136
AZELEX CRE 20%.....	99
<i>azithromycin for susp 100 mg/5ml</i> .	121
<i>azithromycin for susp 200 mg/5ml</i> .	121
<i>azithromycin powd pack for susp 1 gm</i>	121
<i>azithromycin tab 250 mg</i>	121
<i>azithromycin tab 500 mg</i>	121
<i>azithromycin tab 600 mg</i>	121
AZULFIDINE TAB 500MG EN	115
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<i>bacitracin ophth oint 500 unit/gm</i> ..	138
<i>bacitracin-polymyxin b ophth oint</i> ...	138
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	140
<i>baclofen tab 10 mg</i>	135
<i>baclofen tab 20 mg</i>	135
<i>baclofen tab 5 mg</i>	135
BACTRIM DS TAB 800-160	30
BACTRIM TAB 400-80MG.....	30
<i>balsalazide disodium cap 750 mg</i> ...	115
BALVERSA TAB 3MG	71
BALVERSA TAB 4MG	71
BALVERSA TAB 5MG	71
BANZEL TAB 200MG	39
BANZEL TAB 400MG	39
BAQSIMI ONE POW 3MG/DOSE	50
BAQSIMI TWO POW 3MG/DOSE	50
BD PEN NEEDL MIS 29GX12.7.....	123
BD PEN NEEDL MIS 31GX5MM	123
BD PEN NEEDL MIS 31GX8MM	123
BD PEN NEEDL MIS 32GX4MM	123
BD PEN NEEDL MIS 32GX6MM	123
BELLA/OPIUM SUP 16.2-30.....	149
BELLA/OPIUM SUP 16.2-60.....	149
BELSOMRA TAB 10MG.....	120
BELSOMRA TAB 15MG.....	120
BELSOMRA TAB 20MG.....	120
BELSOMRA TAB 5MG	120
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	64

<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	64
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	64
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	64
<i>benazepril hcl tab 10 mg</i>	60
<i>benazepril hcl tab 20 mg</i>	60
<i>benazepril hcl tab 40 mg</i>	60
<i>benazepril hcl tab 5 mg</i>	60
BENZACLIN GEL 1-5%	99
BENZACLIN GEL 1-5%PUMP	99
BENZNIDAZOLE TAB 12.5MG.....	30
<i>benzonatate cap 100 mg</i>	97
<i>benzonatate cap 150 mg</i>	97
<i>benzonatate cap 200 mg</i>	97
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	99
<i>benztropine mesylate tab 0.5 mg</i>	76
<i>benztropine mesylate tab 1 mg</i>	76
<i>benztropine mesylate tab 2 mg</i>	76
<i>bepotastine besilate ophth soln 1.5%</i>	140
BESIVANCE SUS 0.6%	138
<i>betamethasone dipropionate augmented cream 0.05%</i>	103
<i>betamethasone dipropionate augmented gel 0.05%</i>	103
<i>betamethasone dipropionate augmented lotion 0.05%</i>	103
<i>betamethasone dipropionate augmented oint 0.05%</i>	103
<i>betamethasone dipropionate cream 0.05%</i>	103
<i>betamethasone dipropionate lotion 0.05%</i>	103
<i>betamethasone dipropionate oint 0.05%</i>	103
<i>betamethasone valerate aerosol foam 0.12%</i>	103
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	103
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	103
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	103
<i>betaxolol hcl ophth soln 0.5%</i>	137

<i>betaxolol hcl tab 10 mg</i>	86
<i>betaxolol hcl tab 20 mg</i>	86
<i>bethanechol chloride tab 10 mg</i>	151
<i>bethanechol chloride tab 25 mg</i>	151
<i>bethanechol chloride tab 5 mg</i>	151
<i>bethanechol chloride tab 50 mg</i>	151
BETHKIS NEB 300/4ML	21
BETIMOL SOL 0.25%	137
BETIMOL SOL 0.5%	137
BETOPTIC-S SUS 0.25% OP	137
<i>bexarotene cap 75 mg</i>	75
<i>bexarotene gel 1%</i>	101
BEYAZ TAB	94
<i>bicalutamide tab 50 mg</i>	70
BIDIL TAB	90
BIKTARVY TAB	82
<i>bimatoprost ophth soln 0.03%</i>	141
<i>bismuth subcit-metronidazole-</i>	
<i>tetracycline cap 140-125-125 mg</i>	151
<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>10-6.25 mg</i>	64
<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>2.5-6.25 mg</i>	64
<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
<i>6.25 mg</i>	64
<i>bisoprolol fumarate tab 10 mg</i>	86
<i>bisoprolol fumarate tab 5 mg</i>	86
BLEPHAMIDE OIN S.O.P.	140
BLEPHAMIDE SUS OP.....	140
BLOOD GLUCOSE CONTROL SOLUTION	
.....	122
BONIVA TAB 150MG	110
<i>bosentan tab 125 mg</i>	92
<i>bosentan tab 62.5 mg</i>	92
BOSULIF TAB 100MG	71
BOSULIF TAB 400MG	71
BOSULIF TAB 500MG	71
BRAUTOVI CAP 75MG.....	72
BREO ELLIPTA INH 100-25	36
BREO ELLIPTA INH 200-25	36
BREXAFEMME TAB 150MG	55
BREZTRI AERO AER SPHERE	36
BRILINTA TAB 60MG.....	118
BRILINTA TAB 90MG.....	118
<i>brimonidine tartrate ophth soln 0.15%</i>	
.....	138
<i>brimonidine tartrate ophth soln 0.2%</i>	
.....	138
<i>brimonidine tartrate-timolol maleate</i>	
<i>ophth soln 0.2-0.5%</i>	137
<i>brinzolamide ophth susp 1%</i>	140
BRISDELLE CAP 7.5MG	146
<i>bromfenac sodium ophth soln 0.09%</i>	
<i>(base equiv) (once-daily)</i>	140
<i>bromocriptine mesylate cap 5 mg (base</i>	
<i>equivalent)</i>	76
<i>bromocriptine mesylate tab 2.5 mg</i>	
<i>(base equivalent)</i>	76
BROVANA NEB 15MCG	36
BRUKINSA CAP 80MG	72
<i>budesonide delayed release particles</i>	
<i>cap 3 mg</i>	96
<i>budesonide inhalation susp 0.25</i>	
<i>mg/2ml</i>	35
<i>budesonide inhalation susp 0.5 mg/2ml</i>	
.....	35
<i>budesonide inhalation susp 1 mg/2ml</i>	
.....	35
<i>budesonide tab er 24hr 9 mg</i>	96
<i>bumetanide tab 0.5 mg</i>	109
<i>bumetanide tab 1 mg</i>	109
<i>bumetanide tab 2 mg</i>	109
<i>buprenorphine hcl sl tab 2 mg (base</i>	
<i>equiv)</i>	28
<i>buprenorphine hcl sl tab 8 mg (base</i>	
<i>equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>12-3 mg (base equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>2-0.5 mg (base equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>4-1 mg (base equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>8-2 mg (base equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl tab</i>	
<i>2-0.5 mg (base equiv)</i>	28
<i>buprenorphine hcl-naloxone hcl sl tab</i>	
<i>8-2 mg (base equiv)</i>	28
<i>buprenorphine td patch weekly 10</i>	
<i>mcg/hr</i>	28
<i>buprenorphine td patch weekly 15</i>	
<i>mcg/hr</i>	28

buprenorphine td patch weekly 20 mcg/hr	28
buprenorphine td patch weekly 5 mcg/hr	28
buprenorphine td patch weekly 7.5 mcg/hr	28
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	146
bupropion hcl tab 100 mg	44
bupropion hcl tab 75 mg	44
bupropion hcl tab er 12hr 100 mg	44
bupropion hcl tab er 12hr 150 mg	44
bupropion hcl tab er 12hr 200 mg	44
bupropion hcl tab er 24hr 150 mg	44
bupropion hcl tab er 24hr 300 mg	44
bupropion hcl tab er 24hr 450 mg	44
buspirone hcl tab 10 mg.....	32
buspirone hcl tab 15 mg.....	32
buspirone hcl tab 30 mg.....	32
buspirone hcl tab 5 mg	32
buspirone hcl tab 7.5 mg.....	32
butalbital-acetaminophen tab 50-300 mg	23
butalbital-acetaminophen tab 50-325 mg	23
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg	27
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	27
butalbital-acetaminophen-caffeine cap 50-300-40 mg.....	23
butalbital-acetaminophen-caffeine cap 50-325-40 mg.....	23
butalbital-acetaminophen-caffeine tab 50-325-40 mg.....	23
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	27
butalbital-aspirin-caffeine cap 50-325-40 mg	23
butorphanol tartrate nasal soln 10 mg/ml.....	28
BYLVAY CAP 1200MCG	115
BYLVAY CAP 200MCG	115
BYLVAY CAP 400MCG	115
BYLVAY CAP 600MCG	115
C	
cabergoline tab 0.5 mg	112

CABOMETYX TAB 20MG.....	72
CABOMETYX TAB 40MG.....	72
CABOMETYX TAB 60MG.....	72
CADUET TAB 10-10MG.....	90
CADUET TAB 10-20MG.....	90
CADUET TAB 10-40MG.....	90
CADUET TAB 10-80MG.....	90
CADUET TAB 5-10MG	90
CADUET TAB 5-20MG	90
CADUET TAB 5-40MG	90
CADUET TAB 5-80MG	90
calcipotriene cream 0.005%	102
calcipotriene foam 0.005%	102
calcipotriene oint 0.005%.....	102
calcipotriene soln 0.005% (50 mcg/ml)	102
calcipotriene-betamethasone	
dipropionate oint 0.005-0.064%..	103
calcipotriene-betamethasone	
dipropionate susp 0.005-0.064%.103	
calcitonin (salmon) nasal soln 200 unit/act	110
calcitriol cap 0.25 mcg	111
calcitriol cap 0.5 mcg	111
calcitriol oint 3 mcg/gm	102
calcitriol oral soln 1 mcg/ml.....	111
calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	115
calcium acetate (phosphate binder) tab 667 mg	116
CALQUENCE CAP 100MG	72
CALQUENCE TAB 100MG	72
CAMBIA POW 50MG	131
candesartan cilexetil tab 16 mg.....	62
candesartan cilexetil tab 32 mg.....	62
candesartan cilexetil tab 4 mg	62
candesartan cilexetil tab 8 mg	62
candesartan cilexetil-	
hydrochlorothiazide tab 16-12.5 mg	64
candesartan cilexetil-	
hydrochlorothiazide tab 32-12.5 mg	64
candesartan cilexetil-	
hydrochlorothiazide tab 32-25 mg .64	
CAPCOF SYP 5-2-10MG	98
capecitabine tab 150 mg	68

<i>capecitabine tab 500 mg</i>	68
CAPEX SHA 0.01%	103
CAPRELSA TAB 100MG	72
CAPRELSA TAB 300MG	72
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	64
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	64
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	64
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	64
<i>captopril tab 100 mg</i>	60
<i>captopril tab 12.5 mg</i>	60
<i>captopril tab 25 mg</i>	60
<i>captopril tab 50 mg</i>	60
CARAC CRE 0.5%	101
CARAFATE SUS 1GM/10ML	150
CARBAGLU TAB 200MG	111
<i>carbamazepine cap er 12hr 100 mg</i>	39
<i>carbamazepine cap er 12hr 200 mg</i>	39
<i>carbamazepine cap er 12hr 300 mg</i>	39
<i>carbamazepine chew tab 100 mg</i>	39
<i>carbamazepine susp 100 mg/5ml</i>	39
<i>carbamazepine tab 200 mg</i>	39
<i>carbamazepine tab er 12hr 100 mg</i>	39
<i>carbamazepine tab er 12hr 200 mg</i>	39
<i>carbamazepine tab er 12hr 400 mg</i>	39
CARBATROL CAP 100MG	39
CARBATROL CAP 200MG	39
CARBATROL CAP 300MG	39
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 10-100 mg</i>	76
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-100 mg</i>	76
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-250 mg</i>	76
<i>carbidopa & levodopa tab 10-100 mg</i>	76
<i>carbidopa & levodopa tab 25-100 mg</i>	76
<i>carbidopa & levodopa tab 25-250 mg</i>	76
<i>carbidopa & levodopa tab er 25-100 mg</i>	76
<i>carbidopa & levodopa tab er 50-200 mg</i>	76
<i>carbidopa tab 25 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	77
<i>carbinoxamine maleate tab 4 mg</i>	56
CARDIZEM LA TAB 120MG	88
CARDURA XL TAB 4MG	116
CARDURA XL TAB 8MG	116
CAREFINE MIS 31GX8MM	123
CAREFINE MIS 32GX4MM	123
CAREFINE MIS 32GX5MM	123
CAREFINE MIS 32GX6MM	123
CARETOUCH MIS 31GX5MM	123
CARETOUCH MIS 31GX6MM	123
CARETOUCH MIS 31GX8MM	123
CARETOUCH MIS 32GX4MM	123
CARETOUCH MIS 32GX5MM	123
<i>carglumic acid soluble tab 200 mg</i>	111
<i>carisoprodol tab 250 mg</i>	135
<i>carisoprodol tab 350 mg</i>	135
<i>carteolol hcl ophth soln 1%</i>	137
<i>carvedilol phosphate cap er 24hr 10 mg</i>	86
<i>carvedilol phosphate cap er 24hr 20 mg</i>	86
<i>carvedilol phosphate cap er 24hr 40 mg</i>	86
<i>carvedilol phosphate cap er 24hr 80 mg</i>	86
<i>carvedilol tab 12.5 mg</i>	86
<i>carvedilol tab 25 mg</i>	86
<i>carvedilol tab 3.125 mg</i>	86
<i>carvedilol tab 6.25 mg</i>	86
CASODEX TAB 50MG	70
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CAYSTON INH 75MG	31
<i>cefaclor cap 250 mg</i>	93
<i>cefaclor cap 500 mg</i>	93
<i>cefaclor for susp 125 mg/5ml</i>	93
<i>cefaclor for susp 250 mg/5ml</i>	93
<i>cefaclor for susp 375 mg/5ml</i>	93

cefadroxil cap 500 mg.....	93
cefadroxil for susp 250 mg/5ml.....	93
cefadroxil for susp 500 mg/5ml.....	93
cefadroxil tab 1 gm	93
cefdinir cap 300 mg.....	94
cefdinir for susp 125 mg/5ml	94
cefdinir for susp 250 mg/5ml	94
cefixime cap 400 mg.....	94
cefixime for susp 100 mg/5ml.....	94
cefixime for susp 200 mg/5ml.....	94
cefpodoxime proxetil for susp 100 mg/5ml	94
cefpodoxime proxetil for susp 50 mg/5ml	94
cefpodoxime proxetil tab 100 mg	94
cefpodoxime proxetil tab 200 mg	94
cefprozil for susp 125 mg/5ml.....	93
cefprozil for susp 250 mg/5ml.....	93
cefprozil tab 250 mg	93
cefprozil tab 500 mg	93
cefuroxime axetil tab 250 mg	93
cefuroxime axetil tab 500 mg	93
celecoxib cap 100 mg	21
celecoxib cap 200 mg	21
celecoxib cap 400 mg	21
celecoxib cap 50 mg	21
CELEXA TAB 10MG	45
CELEXA TAB 20MG	45
CELEXA TAB 40MG	45
CELLCEPT CAP 250MG	134
CELLCEPT SUS 200MG/ML	134
CELLCEPT TAB 500MG	134
CELONTIN CAP 300MG	43
CENTANY OIN 2%	100
cephalexin cap 250 mg	93
cephalexin cap 500 mg	93
cephalexin cap 750 mg	93
cephalexin for susp 125 mg/5ml	93
cephalexin for susp 250 mg/5ml	93
cephalexin tab 250 mg	93
cephalexin tab 500 mg	93
cevimeline hcl cap 30 mg	135
CHEMET CAP 100MG	54
CHEMSTRIP K TES	107
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chlordiazepoxide hcl cap 10 mg.....	33
chlordiazepoxide hcl cap 25 mg.....	33
chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg	149
chlordiazepoxide-amitriptyline tab 10-25 mg	144
chlordiazepoxide-amitriptyline tab 5-12.5 mg	144
chlorhexidine gluconate soln 0.12%	135
chloroquine phosphate tab 250 mg	67
chloroquine phosphate tab 500 mg	67
chlorpromazine hcl tab 10 mg	81
chlorpromazine hcl tab 100 mg	81
chlorpromazine hcl tab 200 mg	81
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EDARBI TAB 40MG	62
EDARBI TAB 80MG	62
EDECIN TAB 25MG	109
EDLUAR SUB 10MG	119
EDLUAR SUB 5MG	119
<i>efavirenz cap 200 mg</i>	83
<i>efavirenz cap 50 mg</i>	83
<i>efavirenz tab 600 mg</i>	83
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	83
EFFEXOR XR CAP 150MG	47
EFFEXOR XR CAP 37.5MG	47
EFFEXOR XR CAP 75MG	47
EFUDEX CRE 5%	101
ELESTRIN GEL 0.06%	113
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	131
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	131

ELIQUIS ST P TAB 5MG	38
ELIQUIS TAB 2.5MG	38
ELIQUIS TAB 5MG	38
ELLA TAB 30MG	96
ELMIRON CAP 100MG	116
EMCYT CAP 140MG	70
EMSAM DIS 12MG/24H	45
EMSAM DIS 6MG/24HR	45
EMSAM DIS 9MG/24HR	45
<i>emtricitabine caps 200 mg</i>	83
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	83
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	83
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	83
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	83
EMTRIVA CAP 200MG	83
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	65
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	65
<i>enalapril maleate tab 10 mg</i>	60
<i>enalapril maleate tab 2.5 mg</i>	60
<i>enalapril maleate tab 20 mg</i>	60
<i>enalapril maleate tab 5 mg</i>	60
ENDOMETRIN SUP 100MG	152
entacapone tab 200 mg	76
entecavir tab 0.5 mg	85
entecavir tab 1 mg	85
ENTERO VU SUS 24%	108
ENTOCORT EC CAP 3MG DR	96
ENTRESTO TAB 24-26MG	90
ENTRESTO TAB 49-51MG	90
ENTRESTO TAB 97-103MG	90
EPCLUSA PAK 150-37.5	85
EPCLUSA PAK 200-50MG	85
EPCLUSA TAB 200-50MG	85
EPCLUSA TAB 400-100	85
EPIDIOLEX SOL 100MG/ML	39
EPIFOAM AER 1%	104
<i>epinastine hcl ophth soln 0.05%</i>	140
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	153
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	153

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EPIVIR HBV SOL 5MG/ML	85
EPIVIR SOL 10MG/ML	83
<i>eplerenone tab 25 mg</i>	67
<i>eplerenone tab 50 mg</i>	67
EQUETRO CAP 100MG	78
EQUETRO CAP 200MG	78
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<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	153
<i>ergoloid mesylates tab 1 mg</i>	145
<i>ergotamine w/ caffeine suppos 2-100 mg</i>	131
<i>ergotamine w/ caffeine tab 1-100 mg</i>	131
ERIVEDGE CAP 150MG	70
ERLEADA TAB 240MG	70
ERLEADA TAB 60MG	70
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	69
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	69
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	69
ERYGEL GEL 2%.....	99
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	121
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	121
<i>erythromycin ethylsuccinate tab 400 mg</i>	122
<i>erythromycin gel 2%</i>	99
<i>erythromycin ophth oint 5 mg/gm</i> ..	138
<i>erythromycin pads 2%</i>	99
<i>erythromycin soln 2%</i>	100
<i>erythromycin stearate tab 250 mg</i> ..	122
<i>erythromycin tab 250 mg</i>	122
<i>erythromycin tab 500 mg</i>	122
<i>erythromycin tab delayed release 250 mg</i>	122
<i>erythromycin tab delayed release 333 mg</i>	122
<i>erythromycin tab delayed release 500 mg</i>	122

<i>erythromycin w/ delayed release particles cap 250 mg</i>	122
ESBRIET CAP 267MG	147
ESBRIET TAB 267MG	147
ESBRIET TAB 801MG	147
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	45
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	45
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	45
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	45
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	150
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	150
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	150
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	150
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	150
<i>estazolam tab 1 mg</i>	119
<i>estazolam tab 2 mg</i>	119
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	112
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	112
<i>estradiol tab 0.5 mg</i>	113
<i>estradiol tab 1 mg</i>	113
<i>estradiol tab 2 mg</i>	113
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	113
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	113
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	113
<i>estradiol td gel 1 mg/gm (0.1%)</i>	113
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	113
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	113
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	113
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	113

estradiol td patch twice weekly 0.075 mg/24hr.....	113
estradiol td patch twice weekly 0.1 mg/24hr.....	113
estradiol td patch weekly 0.025 mg/24hr.....	113
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	113
estradiol td patch weekly 0.05 mg/24hr	113
estradiol td patch weekly 0.06 mg/24hr	113
estradiol td patch weekly 0.075 mg/24hr.....	113
estradiol td patch weekly 0.1 mg/24hr	113
estradiol vaginal cream 0.1 mg/gm	152
estradiol vaginal tab 10 mcg	152
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eszopiclone tab 1 mg	119
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eszopiclone tab 3 mg	120
ethacrynic acid tab 25 mg	109
ethambutol hcl tab 100 mg.....	68
ethambutol hcl tab 400 mg.....	68
ethosuximide cap 250 mg	43
ethosuximide soln 250 mg/5ml	43
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg.....	94
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg.....	94
etodolac cap 200 mg	22
etodolac cap 300 mg	22
etodolac tab 400 mg	22
etodolac tab 500 mg	22
etodolac tab er 24hr 400 mg	22
etodolac tab er 24hr 500 mg	22
etodolac tab er 24hr 600 mg	22
etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	96
etoposide cap 50 mg	76
etravirine tab 100 mg	83
etravirine tab 200 mg	83
EUCRISA OIN 2%	107
EULEXIN CAP 125MG	70

EVAMIST SPR 1.53MG.....	113
everolimus tab 0.25 mg	134
everolimus tab 0.5 mg	134
everolimus tab 0.75 mg	134
everolimus tab 1 mg.....	134
everolimus tab 10 mg	72
everolimus tab 2.5 mg	72
everolimus tab 5 mg	72
everolimus tab 7.5 mg	72
everolimus tab for oral susp 2 mg	72
everolimus tab for oral susp 3 mg	72
everolimus tab for oral susp 5 mg	72
EVISTA TAB 60MG.....	111
EVOXAC CAP 30MG	135
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EXELON DIS 13.3/24	143
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EXELON DIS 9.5MG/24	143
exemestane tab 25 mg	70
EXKIVITY CAP 40MG.....	69
EZETIM/ATORV TAB 10-10MG.....	56
EZETIM/ATORV TAB 10-20MG.....	56
EZETIM/ATORV TAB 10-40MG.....	56
EZETIM/ATORV TAB 10-80MG.....	56
ezetimibe tab 10 mg.....	60
ezetimibe-simvastatin tab 10-10 mg.....	56
ezetimibe-simvastatin tab 10-20 mg.....	56
ezetimibe-simvastatin tab 10-40 mg.....	57
ezetimibe-simvastatin tab 10-80 mg.....	57
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FABIOR AER 0.1%.....	100
famciclovir tab 125 mg	85
famciclovir tab 250 mg	86
famciclovir tab 500 mg	86
famotidine for susp 40 mg/5ml	150
famotidine tab 20 mg	150
famotidine tab 40 mg	150
FANAPT PAK	79
FANAPT TAB 10MG	79
FANAPT TAB 12MG	79
FANAPT TAB 1MG	79
FANAPT TAB 2MG	79
FANAPT TAB 4MG	79
FANAPT TAB 6MG	79
FANAPT TAB 8MG	79
FARESTON TAB 60MG	70
FARXIGA TAB 10MG	53

FARXIGA TAB 5MG	53
FARYDAK CAP 10MG	72
FARYDAK CAP 15MG	72
FARYDAK CAP 20MG	72
<i>febuxostat tab 40 mg</i>	117
<i>febuxostat tab 80 mg</i>	117
<i>felbamate susp 600 mg/5ml</i>	43
<i>felbamate tab 400 mg.....</i>	43
<i>felbamate tab 600 mg.....</i>	43
FELBATOL TAB 400MG	43
FELBATOL TAB 600MG	43
<i>felodipine tab er 24hr 10 mg</i>	88
<i>felodipine tab er 24hr 2.5 mg</i>	88
<i>felodipine tab er 24hr 5 mg</i>	88
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FEMCAP MIS 30MM.....	122
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FEMRING MIS 0.1MG/24	152
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<i>fenofibrate cap 50 mg</i>	57
<i>fenofibrate micronized cap 130 mg ...</i>	57
<i>fenofibrate micronized cap 134 mg ...</i>	57
<i>fenofibrate micronized cap 200 mg ...</i>	57
<i>fenofibrate micronized cap 30 mg....</i>	57
<i>fenofibrate micronized cap 43 mg....</i>	57
<i>fenofibrate micronized cap 67 mg....</i>	57
<i>fenofibrate micronized cap 90 mg....</i>	57
<i>fenofibrate tab 120 mg</i>	58
<i>fenofibrate tab 145 mg</i>	58
<i>fenofibrate tab 160 mg</i>	58
<i>fenofibrate tab 40 mg</i>	57
<i>fenofibrate tab 48 mg</i>	57
<i>fenofibrate tab 54 mg</i>	57
FENOGLIDE TAB 120MG	58
FENOGLIDE TAB 40MG	58
<i>fenoprofen calcium tab 600 mg</i>	22
<i>fentanyl citrate lozenge on a handle</i>	
<i>1200 mcg</i>	24
<i>fentanyl citrate lozenge on a handle</i>	
<i>1600 mcg</i>	24
<i>fentanyl citrate lozenge on a handle</i>	
<i>200 mcg.....</i>	24
<i>fentanyl citrate lozenge on a handle</i>	
<i>400 mcg.....</i>	24
<i>fentanyl citrate lozenge on a handle</i>	
<i>600 mcg.....</i>	24
<i>fentanyl citrate lozenge on a handle</i>	
<i>800 mcg.....</i>	24
fentanyl td patch 72hr 100 mcg/hr	24
fentanyl td patch 72hr 12 mcg/hr.....	24
fentanyl td patch 72hr 25 mcg/hr.....	24
fentanyl td patch 72hr 37.5 mcg/hr ..	24
fentanyl td patch 72hr 50 mcg/hr.....	24
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FIFTY50 PEN MIS 32GX4MM	125
FIFTY50 PEN MIS 32GX6MM	125
<i>finasteride tab 5 mg</i>	116
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	
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FINTEPLA SOL 2.2MG/ML	39
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FIRDAPSE TAB 10MG	67
<i>flavoxate hcl tab 100 mg.....</i>	152
<i>flecainide acetate tab 100 mg</i>	34
<i>flecainide acetate tab 150 mg</i>	34
<i>flecainide acetate tab 50 mg.....</i>	34
FLOMAX CAP 0.4MG.....	116
FLOVENT DISK AER 100MCG	35
FLOVENT DISK AER 250MCG	35
FLOVENT DISK AER 50MCG	35
FLOVENT HFA AER 110MCG	35
FLOVENT HFA AER 220MCG	35
FLOVENT HFA AER 44MCG.....	35
<i>fluconazole for susp 10 mg/ml</i>	55
<i>fluconazole for susp 40 mg/ml</i>	55
<i>fluconazole tab 100 mg</i>	55
<i>fluconazole tab 150 mg</i>	55
<i>fluconazole tab 200 mg</i>	55
<i>fluconazole tab 50 mg.....</i>	55
<i>flucytosine cap 250 mg</i>	55

flucytosine cap 500 mg	55
fludrocortisone acetate tab 0.1 mg ...	97
flunisolide nasal soln 25 mcg/act (0.025%)	136
fluocinolone acetonide (otic) oil 0.01%	141
fluocinolone acetonide cream 0.01%	104
fluocinolone acetonide cream 0.025%	104
fluocinolone acetonide oil 0.01% (body oil)	104
fluocinolone acetonide oil 0.01% (scalp oil)	104
fluocinolone acetonide oint 0.025% ..	104
fluocinolone acetonide soln 0.01%..	104
fluocinonide cream 0.05%	104
fluocinonide cream 0.1%.....	104
fluocinonide emulsified base cream 0.05%.....	104
fluocinonide gel 0.05%	104
fluocinonide oint 0.05%	104
fluocinonide soln 0.05%	104
fluorometholone ophth susp 0.1% ..	140
FLUOROPLEX CRE 1%	101
fluorouracil cream 0.5%	101
fluorouracil cream 5%.....	101
fluorouracil soln 2%.....	101
fluorouracil soln 5%.....	101
fluoxetine hcl (pmdd) tab 10 mg	145
fluoxetine hcl (pmdd) tab 20 mg	145
fluoxetine hcl cap 10 mg	45
fluoxetine hcl cap 20 mg	45
fluoxetine hcl cap 40 mg	45
fluoxetine hcl cap delayed release 90 mg	45
fluoxetine hcl solution 20 mg/5ml....	45
fluoxetine hcl tab 10 mg.....	45
fluoxetine hcl tab 20 mg.....	45
fluoxetine hcl tab 60 mg.....	45
FLUOXETINE TAB 60MG	45
fluphenazine hcl elixir 2.5 mg/5ml ...	81
fluphenazine hcl tab 1 mg	81
fluphenazine hcl tab 10 mg.....	81
fluphenazine hcl tab 2.5 mg.....	81
fluphenazine hcl tab 5 mg	81
flurandrenolide cream 0.05%.....	104
flurandrenolide lotion 0.05%	104
flurazepam hcl cap 15 mg	120
flurazepam hcl cap 30 mg	120
flurbiprofen tab 100 mg	22
flurbiprofen tab 50 mg	22
flutamide cap 125 mg	70
fluticasone propionate cream 0.05%	104
fluticasone propionate lotion 0.05% ..	104
fluticasone propionate nasal susp 50 mcg/act	136
fluticasone propionate oint 0.005% ..	104
fluticasone-salmeterol aer powder ba 100-50 mcg/act	36
fluticasone-salmeterol aer powder ba 113-14 mcg/act	36
fluticasone-salmeterol aer powder ba 232-14 mcg/act	36
fluticasone-salmeterol aer powder ba 250-50 mcg/act	36
fluticasone-salmeterol aer powder ba 500-50 mcg/act	36
fluticasone-salmeterol inhal aerosol 115-21 mcg/act	36
fluticasone-salmeterol inhal aerosol 230-21 mcg/act	36
fluticasone-salmeterol inhal aerosol 45- 21 mcg/act	36
fluvastatin sodium cap 20 mg (base equivalent)	58
fluvastatin sodium cap 40 mg (base equivalent)	58
fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	58
fluvoxamine maleate cap er 24hr 100 mg	45
fluvoxamine maleate cap er 24hr 150 mg	45
fluvoxamine maleate tab 100 mg	45
fluvoxamine maleate tab 25 mg	45
fluvoxamine maleate tab 50 mg	45
FOCALIN TAB 10MG.....	19
FOCALIN TAB 2.5MG.....	19
FOCALIN TAB 5MG	19
folic acid cap 0.8 mg.....	118

<i>folic acid tab 1 mg</i>	118
<i>folic acid tab 400 mcg</i>	118
<i>folic acid tab 800 mcg</i>	118
FORA GTEL TES KETONE	107
FORFIVO XL TAB 450MG	45
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	36
FORTESTA GEL 10MG/ACT.....	29
FOSAMAX + D TAB 70-2800	110
FOSAMAX + D TAB 70-5600	110
FOSAMAX TAB 70MG	110
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	83
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	31
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	65
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	65
<i>fosinopril sodium tab 10 mg</i>	60
<i>fosinopril sodium tab 20 mg</i>	61
<i>fosinopril sodium tab 40 mg</i>	61
FOTIVDA CAP 0.89MG	72
FOTIVDA CAP 1.34MG	72
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	131
<i>furosemide oral soln 10 mg/ml</i>	109
<i>furosemide oral soln 8 mg/ml</i>	109
<i>furosemide tab 20 mg</i>	109
<i>furosemide tab 40 mg</i>	109
<i>furosemide tab 80 mg</i>	109
G	
<i> gabapentin cap 100 mg</i>	39
<i> gabapentin cap 300 mg</i>	39
<i> gabapentin cap 400 mg</i>	39
<i> gabapentin oral soln 250 mg/5ml</i>	39
<i> gabapentin tab 600 mg</i>	39
<i> gabapentin tab 800 mg</i>	39
GABITRIL TAB 12MG	43
GABITRIL TAB 16MG	43
GABITRIL TAB 2MG	43
GABITRIL TAB 4MG	43
GALAFOLD CAP 123MG	111
<i> galantamine hydrobromide cap er 24hr 16 mg</i>	143
<i> galantamine hydrobromide cap er 24hr 24 mg</i>	143
<i> galantamine hydrobromide cap er 24hr 8 mg</i>	143
<i> galantamine hydrobromide tab 12 mg</i>	143
<i> galantamine hydrobromide tab 4 mg</i>	143
<i> galantamine hydrobromide tab 8 mg</i>	143
<i> gatifloxacin ophth soln 0.5%</i>	138
GAVRETO CAP 100MG.....	72
<i> gefitinib tab 250 mg</i>	69
<i> gemfibrozil tab 600 mg</i>	58
<i> gentamicin sulfate cream 0.1%</i>	100
<i> gentamicin sulfate oint 0.1%</i>	100
<i> gentamicin sulfate ophth oint 0.3%</i>	138
<i> gentamicin sulfate ophth soln 0.3%</i>	139
GENVOYA TAB	83
GEODON CAP 20MG.....	78
GEODON CAP 40MG.....	78
GEODON CAP 60MG.....	78
GEODON CAP 80MG.....	78
GILENYA CAP 0.25MG	145
GILENYA CAP 0.5MG	145
GILOTTRIF TAB 20MG.....	69
GILOTTRIF TAB 30MG.....	69
GILOTTRIF TAB 40MG.....	69
GLEEVEC TAB 100MG	72
GLEEVEC TAB 400MG	72
GLEOSTINE CAP 100MG	68
GLEOSTINE CAP 10MG	68
GLEOSTINE CAP 40MG	68
<i> glimepiride tab 1 mg</i>	53
<i> glimepiride tab 2 mg</i>	53
<i> glimepiride tab 4 mg</i>	53
<i> glipizide tab 10 mg</i>	53
<i> glipizide tab 5 mg</i>	53
<i> glipizide tab er 24hr 10 mg</i>	53
<i> glipizide tab er 24hr 2.5 mg</i>	53
<i> glipizide tab er 24hr 5 mg</i>	53
<i> glipizide-metformin hcl tab 2.5-250 mg</i>	49
<i> glipizide-metformin hcl tab 2.5-500 mg</i>	49
<i> glipizide-metformin hcl tab 5-500 mg</i>	49
GLUCAGEN INJ HYPOKIT	50
<i> glucagon (rdna) for inj kit 1 mg</i>	50
GLUCAGON KIT 1MG	50

GLUCOSE-VITAMIN C PRODUCTS	51
GLUCOTROL XL TAB 10MG	53
GLUCOTROL XL TAB 2.5MG	53
GLUCOTROL XL TAB 5MG	53
<i>glyburide micronized tab 1.5 mg</i>	53
<i>glyburide micronized tab 3 mg</i>	53
<i>glyburide micronized tab 6 mg</i>	53
<i>glyburide tab 1.25 mg</i>	53
<i>glyburide tab 2.5 mg</i>	53
<i>glyburide tab 5 mg</i>	53
<i>glyburide-metformin tab 1.25-250 mg</i>	49
<i>glyburide-metformin tab 2.5-500 mg</i>	49
<i>glyburide-metformin tab 5-500 mg</i>	49
GLYCATE TAB 1.5MG	149
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<i>glycopyrrolate tab 1 mg</i>	149
<i>glycopyrrolate tab 2 mg</i>	149
GLYNASE TAB 1.5MG	53
GLYNASE TAB 3MG	53
GLYNASE TAB 6MG	53
GLYXAMBI TAB 10-5 MG	49
GLYXAMBI TAB 25-5 MG	49
GNP ULTICARE MIS 31GX5/16	125
GNP ULTICARE MIS 31GX5MM	125
GNP ULTICARE MIS 32GX1/4	125
GNP ULTICARE MIS 32GX5/32	125
GOJJI BLOOD TES KETONE	107
<i>granisetron hcl tab 1 mg</i>	54
<i>griseofulvin microsize susp 125 mg/5ml</i>	55
<i>griseofulvin microsize tab 500 mg</i>	55
<i>griseofulvin ultramicrosize tab 125 mg</i>	55
<i>griseofulvin ultramicrosize tab 250 mg</i>	55
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	98
<i>guanfacine hcl tab 1 mg</i>	63
<i>guanfacine hcl tab 2 mg</i>	63
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	18
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	18
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	18
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	18
GVOKE HYPO 1 INJ .5/.1ML	51
GVOKE HYPO 1 INJ 1MG/.2ML	51
GVOKE HYPO 2 INJ .5/.1ML	51
GVOKE HYPO 2 INJ 1MG/.2ML	51
GVOKE PFS INJ	51
GYNAZOLE-1 CRE 2%	152
GYNOL II GEL 3%	152
H	
<i>halcinonide cream 0.1%</i>	104
HALCION TAB 0.25MG	120
<i>halobetasol propionate cream 0.05%</i>	104
<i>halobetasol propionate oint 0.05%</i>	104
HALOG CRE 0.1%	104
HALOG OIN 0.1%	104
<i>haloperidol lactate oral conc 2 mg/ml/80</i>	80
<i>haloperidol tab 0.5 mg</i>	80
<i>haloperidol tab 1 mg</i>	80
<i>haloperidol tab 10 mg</i>	80
<i>haloperidol tab 2 mg</i>	80
<i>haloperidol tab 20 mg</i>	80
<i>haloperidol tab 5 mg</i>	80
HALUCORT GEL	106
HARVONI PAK	85
HARVONI PAK 45-200MG	85
HARVONI TAB 45-200MG	85
HARVONI TAB 90-400MG	85
HELIDAC MIS THERAPY	151
HETLIOZ CAP 20MG	120
HETLIOZ LQ SUS 4MG/ML	120
HM INSULIN S MIS 0.3/31G	125
HM INSULIN S MIS 1ML/30G	125
HM ULTICARE MIS 31GX8MM	125
HUMALOG INJ 100/ML	52
HUMALOG JR INJ 100/ML	52
HUMALOG KWIK INJ 100/ML	52
HUMALOG KWIK INJ 200/ML	52
HUMALOG MIX INJ 50/50	52
HUMALOG MIX INJ 50/50KWP	52
HUMALOG MIX INJ 75/25KWP	52
HUMALOG MIX SUS 75/25	52
HUMULIN INJ 70/30	52
HUMULIN INJ 70/30KWP	52
HUMULIN N INJ U-100	52
HUMULIN N INJ U-100KWP	52

HUMULIN R INJ U-100	52
HUMULIN R INJ U-500	52
HYCAMTIN CAP 0.25MG	76
HYCAMTIN CAP 1MG	76
hydralazine hcl tab 10 mg	67
hydralazine hcl tab 100 mg	67
hydralazine hcl tab 25 mg	67
hydralazine hcl tab 50 mg	67
HYDREA CAP 500MG	75
hydrochlorothiazide cap 12.5 mg....	110
hydrochlorothiazide tab 12.5 mg	110
hydrochlorothiazide tab 25 mg	110
hydrochlorothiazide tab 50 mg	110
hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	98
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml....	98
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	98
hydrocodone bitartrate cap er 12hr 10 mg	24
hydrocodone bitartrate cap er 12hr 15 mg	24
hydrocodone bitartrate cap er 12hr 20 mg	24
hydrocodone bitartrate cap er 12hr 30 mg	24
hydrocodone bitartrate cap er 12hr 40 mg	24
hydrocodone bitartrate cap er 12hr 50 mg	24
hydrocodone bitartrate tab er 24hr deter 100 mg	25
hydrocodone bitartrate tab er 24hr deter 120 mg	25
hydrocodone bitartrate tab er 24hr deter 20 mg.....	24
hydrocodone bitartrate tab er 24hr deter 30 mg.....	24
hydrocodone bitartrate tab er 24hr deter 40 mg.....	24
hydrocodone bitartrate tab er 24hr deter 60 mg.....	24
hydrocodone bitartrate tab er 24hr deter 80 mg.....	24
hydrocodone-acetaminophen soln 7.5- 325 mg/15ml	27
hydrocodone-acetaminophen tab 10- 300 mg	27
hydrocodone-acetaminophen tab 10- 325 mg	27
hydrocodone-acetaminophen tab 5-300 mg	27
hydrocodone-acetaminophen tab 5-325 mg	27
hydrocodone-acetaminophen tab 7.5- 300 mg	27
hydrocodone-acetaminophen tab 7.5- 325 mg	27
hydrocodone-ibuprofen tab 10-200 mg	28
hydrocodone-ibuprofen tab 5-200 mg	27
hydrocodone-ibuprofen tab 7.5-200 mg	27
hydrocortisone acetate w/ pramoxine perianal cream 1-1%	29
hydrocortisone butyrate cream 0.1%	104
hydrocortisone butyrate hydrophilic lipo base cream 0.1%	104
hydrocortisone butyrate lotion 0.1%	104
hydrocortisone butyrate oint 0.1% .104	
hydrocortisone butyrate soln 0.1%.104	
hydrocortisone cream 1%	104
hydrocortisone cream 2.5%.....	105
hydrocortisone enema 100 mg/60ml 29	
hydrocortisone lotion 2.5%.....	105
hydrocortisone oint 1%.....	105
hydrocortisone oint 2.5%	105
hydrocortisone perianal cream 1% ...30	
hydrocortisone perianal cream 2.5% 30	
hydrocortisone tab 10 mg	96
hydrocortisone tab 20 mg	96
hydrocortisone tab 5 mg	96
hydrocortisone valerate cream 0.2%	105
hydrocortisone valerate oint 0.2%..105	
hydrocortisone w/ acetic acid otic soln 1-2%	141
hydromorphone hcl tab 2 mg.....	25
hydromorphone hcl tab 4 mg	25
hydromorphone hcl tab 8 mg	25

<i>hydromorphone hcl tab er 24hr 12 mg</i>	25
<i>hydromorphone hcl tab er 24hr 16 mg</i>	25
<i>hydromorphone hcl tab er 24hr 32 mg</i>	25
<i>hydromorphone hcl tab er 24hr 8 mg</i>	25
<i>hydroxychloroquine sulfate tab 200 mg</i>	67
<i>hydroxyurea cap 500 mg</i>	75
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	32
<i>hydroxyzine hcl tab 10 mg</i>	32
<i>hydroxyzine hcl tab 25 mg</i>	32
<i>hydroxyzine hcl tab 50 mg</i>	32
<i>hydroxyzine pamoate cap 100 mg</i>	33
<i>hydroxyzine pamoate cap 25 mg</i>	32
<i>hydroxyzine pamoate cap 50 mg</i>	32
HYFTOR GEL 0.2%	106
HYPERSAL NEB 3.5%	98
HYSINGLA ER TAB 100 MG	25
HYSINGLA ER TAB 120 MG	25
HYSINGLA ER TAB 20 MG	25
HYSINGLA ER TAB 30 MG	25
HYSINGLA ER TAB 40 MG	25
HYSINGLA ER TAB 60 MG	25
HYSINGLA ER TAB 80 MG	25
HYZAAR TAB 100-12.5	65
HYZAAR TAB 100-25	65
HYZAAR TAB 50-12.5	65

I

<i>ibandronate sodium tab 150 mg (base equivalent)</i>	110
IBRANCE CAP 100MG	72
IBRANCE CAP 125MG	72
IBRANCE CAP 75MG	72
IBRANCE TAB 100MG	72
IBRANCE TAB 125MG	72
IBRANCE TAB 75MG	72
<i>ibuprofen susp 100 mg/5ml</i>	22
<i>ibuprofen tab 400 mg</i>	22
<i>ibuprofen tab 600 mg</i>	22
<i>ibuprofen tab 800 mg</i>	22
ICLUSIG TAB 10MG	72
ICLUSIG TAB 15MG	72
ICLUSIG TAB 30MG	72
ICLUSIG TAB 45MG	72
<i>icosapent ethyl cap 0.5 gm</i>	57

<i>icosapent ethyl cap 1 gm</i>	57
IDHIFA TAB 100MG	72
IDHIFA TAB 50MG	72
IGALMI MIS 120MCG	120
IGALMI MIS 180MCG	120
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	72
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	73
IMBRUVICA CAP 140MG	73
IMBRUVICA CAP 70MG	73
IMBRUVICA SUS 70MG/ML	73
IMBRUVICA TAB 140MG	73
IMBRUVICA TAB 280MG	73
IMBRUVICA TAB 420MG	73
IMBRUVICA TAB 560MG	73
<i>imipramine hcl tab 10 mg</i>	48
<i>imipramine hcl tab 25 mg</i>	48
<i>imipramine hcl tab 50 mg</i>	48
<i>imipramine pamoate cap 100 mg</i>	48
<i>imipramine pamoate cap 125 mg</i>	48
<i>imipramine pamoate cap 150 mg</i>	48
<i>imipramine pamoate cap 75 mg</i>	48
<i>imiquimod cream 3.75%</i>	106
<i>imiquimod cream 5%</i>	106
IMITREX INJ 6MG/0.5	131
IMITREX SPR 20MG/ACT	131
IMITREX SPR 5MG/ACT	131
IMURAN TAB 50MG	134
IN CONTROL MIS 31GX3/16	125
IN CONTROL MIS 31GX5MM	125
IN CONTROL MIS 31GX6MM	125
IN CONTROL MIS 31GX8MM	125
INCONTROL MIS 29GX12MM	125
<i>indapamide tab 1.25 mg</i>	110
<i>indapamide tab 2.5 mg</i>	110
INDOCIN SUP 50MG	22
<i>indomethacin cap 20 mg</i>	22
<i>indomethacin cap 25 mg</i>	22
<i>indomethacin cap 50 mg</i>	22
<i>indomethacin cap er 75 mg</i>	22
INGREZZA CAP 40-80MG	144
INGREZZA CAP 40MG	145
INGREZZA CAP 60MG	145
INGREZZA CAP 80MG	145
INLYTA TAB 1MG	69
INLYTA TAB 5MG	69

INQOVI TAB 35-100MG	71
INREBIC CAP 100MG	73
INS SY 0.3ML MIS 30GX1/2.....	125
INS SY 0.3ML MIS 31GX5/16	125
INS SY 0.5ML MIS 30GX1/2.....	125
INS SY 0.5ML MIS 30GX5/16	125
INS SY 1/2ML MIS 30GX1/2	125
INS SYR .3ML MIS 30GX1/2.....	125
INS SYR 1ML MIS 30GX1/2.....	125
INS SYR 1ML MIS 30GX5/16	125
INS SYR 1ML MIS 31GX5/16	125
INSPRA TAB 25MG	67
INSPRA TAB 50MG	67
INSULIN PEN MIS 31GX4MM	125
INSULIN PEN NEEDLES RX	125
INSULIN SRYG MIS 1ML/32G	125
INSULIN SYRG MIS 0.3/29G	125
INSULIN SYRG MIS 0.3/30G	125
INSULIN SYRG MIS 0.3/31G	125
INSULIN SYRG MIS 0.3ML/30	125
INSULIN SYRG MIS 0.3ML/31	125
INSULIN SYRG MIS 0.5/27G	125
INSULIN SYRG MIS 0.5/28G	125
INSULIN SYRG MIS 0.5/29G	125
INSULIN SYRG MIS 0.5/30G ...	125, 126
INSULIN SYRG MIS 0.5/31G	126
INSULIN SYRG MIS 0.5/32G	126
INSULIN SYRG MIS 1/2ML/30	126
INSULIN SYRG MIS 1/2ML/31	126
INSULIN SYRG MIS 1ML.....	126
INSULIN SYRG MIS 1ML/25G	126
INSULIN SYRG MIS 1ML/26G	126
INSULIN SYRG MIS 1ML/27G	126
INSULIN SYRG MIS 1ML/28G	126
INSULIN SYRG MIS 1ML/29G	126
INSULIN SYRG MIS 1ML/30G	126
INSULIN SYRG MIS 1ML/31G	126
INSULIN SYRG MIS 2/27.5G	126
INSULIN SYRG MIS 27GX1/2	126
INSULIN SYRG MIS 28GX1/2	126
INSULIN SYRG MIS 29GX1/2	126
INSULIN SYRG MIS 29GX12MM.....	126
INSULIN SYRG MIS 30GX1/2	126
INSULIN SYRG MIS 30GX5/16	126
INSULIN SYRG MIS 31GX5/16	126
INSULIN SYRG MIS 31GX8MM.....	126
INSULIN SYRINGES RX	126
INSUPEN MIS 29GX12MM.....	126
INSUPEN MIS 31GX5MM	126
INSUPEN MIS 31GX8MM	126
INSUPEN MIS 32GX4MM	126
INSUPEN MIS 33GX4MM	126
INSUPEN SENS MIS 32GX6MM.....	126
INSUPEN SENS MIS 32GX8MM.....	126
INSUPEN ULTR MIS 30GX8MM	126
INSUPEN ULTR MIS 31GX6MM	126
INSUPEN ULTR MIS 31GX8MM	126
INTELENCE TAB 25MG	83
INTRAROSA SUP 6.5MG	152
INVIRASE TAB 500MG	83
<i>ipratropium bromide inhal soln 0.02%</i>	
.....	34
<i>ipratropium bromide nasal soln 0.03%</i>	
(21 mcg/spray)	136
<i>ipratropium bromide nasal soln 0.06%</i>	
(42 mcg/spray)	136
<i>ipratropium-albuterol nebu soln 0.5-</i>	
2.5(3) mg/3ml	37
<i>irbesartan tab 150 mg</i>	62
<i>irbesartan tab 300 mg</i>	62
<i>irbesartan tab 75 mg</i>	62
<i>irbesartan-hydrochlorothiazide tab</i>	
150-12.5 mg	65
<i>irbesartan-hydrochlorothiazide tab</i>	
300-12.5 mg	65
IRESSA TAB 250MG.....	69
ISENTRESS HD TAB 600MG	83
ISENTRESS TAB 400MG	83
<i>isoniazid syrup 50 mg/5ml</i>	68
<i>isoniazid tab 100 mg</i>	68
<i>isoniazid tab 300 mg</i>	68
ISOPTO ATROP SOL 1% OP	138
<i>isosorbide dinitrate tab 10 mg</i>	32
<i>isosorbide dinitrate tab 20 mg</i>	32
<i>isosorbide dinitrate tab 30 mg</i>	32
<i>isosorbide dinitrate tab 40 mg</i>	32
<i>isosorbide dinitrate tab 5 mg</i>	32
<i>isosorbide dinitrate-hydralazine hcl tab</i>	
20-37.5 mg	90
<i>isosorbide mononitrate tab 10 mg</i>	32
<i>isosorbide mononitrate tab 20 mg</i>	32
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	32

<i>isosorbide mononitrate tab er 24hr 30 mg</i>	32
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	32
<i>isotretinoin cap 10 mg</i>	100
<i>isotretinoin cap 20 mg</i>	100
<i>isotretinoin cap 25 mg</i>	100
<i>isotretinoin cap 30 mg</i>	100
<i>isotretinoin cap 35 mg</i>	100
<i>isotretinoin cap 40 mg</i>	100
<i>isradipine cap 2.5 mg</i>	89
<i>isradipine cap 5 mg</i>	89
<i>ISTALOL SOL 0.5% OP</i>	137
<i>ISTURISA TAB 10MG</i>	110
<i>ISTURISA TAB 1MG</i>	110
<i>ISTURISA TAB 5MG</i>	110
<i>itraconazole cap 100 mg</i>	55
<i>itraconazole oral soln 10 mg/ml</i>	56
<i>ivermectin cream 1%</i>	107
<i>ivermectin lotion 0.5%</i>	107
<i>ivermectin tab 3 mg</i>	30

J

<i>JAKAFI TAB 10MG</i>	73
<i>JAKAFI TAB 15MG</i>	73
<i>JAKAFI TAB 20MG</i>	73
<i>JAKAFI TAB 25MG</i>	73
<i>JAKAFI TAB 5MG</i>	73
<i>JANUMET TAB 50-1000</i>	49
<i>JANUMET TAB 50-500MG</i>	49
<i>JANUMET XR TAB 100-1000</i>	49
<i>JANUMET XR TAB 50-1000</i>	49
<i>JANUMET XR TAB 50-500MG</i>	49
<i>JANUVIA TAB 100MG</i>	51
<i>JANUVIA TAB 25MG</i>	51
<i>JANUVIA TAB 50MG</i>	51
<i>JARDIANCE TAB 10MG</i>	53
<i>JARDIANCE TAB 25MG</i>	53
<i>JATENZO CAP 158MG</i>	29
<i>JATENZO CAP 198MG</i>	29
<i>JATENZO CAP 237MG</i>	29
<i>JAYPIRCA TAB 100MG</i>	73
<i>JAYPIRCA TAB 50MG</i>	73
<i>JULUCA TAB 50-25MG</i>	83
<i>JYNARQUE PAK 45-15MG</i>	112
<i>JYNARQUE PAK 60-30MG</i>	112
<i>JYNARQUE PAK 90-30MG</i>	112

K

<i>KALYDECO GRA 13.4MG</i>	146
<i>KALYDECO PAK 25MG</i>	146
<i>KALYDECO PAK 50MG</i>	146
<i>KALYDECO PAK 75MG</i>	146
<i>KALYDECO TAB 150MG</i>	146
<i>KAZANO 12.5- TAB 1000MG</i>	49
<i>KAZANO 12.5- TAB 500MG</i>	49
<i>KENALOG AER SPRAY</i>	105
<i>KEPPRA SOL 100MG/ML</i>	40
<i>KEPPRA TAB 1000MG</i>	40
<i>KEPPRA TAB 250MG</i>	40
<i>KEPPRA TAB 500MG</i>	40
<i>KEPPRA TAB 750MG</i>	40
<i>KEPPRA XR TAB 500MG</i>	40
<i>KEPPRA XR TAB 750MG</i>	40
<i>KERENDIA TAB 10MG</i>	111
<i>KERENDIA TAB 20MG</i>	112
<i>ketoconazole cream 2%</i>	101
<i>ketoconazole shampoo 2%</i>	101
<i>ketoconazole tab 200 mg</i>	56
<i>KETO-DIASTIX TES</i>	107
<i>KETONE TES</i>	107
<i>KETONE TEST TES</i>	107
<i>ketoprofen cap 50 mg</i>	22
<i>ketoprofen cap 75 mg</i>	22
<i>ketoprofen cap er 24hr 200 mg</i>	22
<i>KETOR TROMET SPR 15.75MG</i>	22
<i>ketorolac tromethamine ophth soln 0.4%</i>	140
<i>ketorolac tromethamine ophth soln 0.5%</i>	140
<i>ketorolac tromethamine tab 10 mg</i>	22
<i>KETOSTIX TES STRIP</i>	108
<i>KISQALI 200 PAK FEMARA</i>	71
<i>KISQALI 400 PAK FEMARA</i>	71
<i>KISQALI 600 PAK FEMARA</i>	71
<i>KISQALI TAB 200DOSE</i>	73
<i>KISQALI TAB 400DOSE</i>	73
<i>KISQALI TAB 600DOSE</i>	73
<i>KITABIS PAK NEB 300/5ML</i>	21
<i>KLARON LOT 10%</i>	100
<i>KLONOPIN TAB 0.5MG</i>	39
<i>KLONOPIN TAB 1MG</i>	39
<i>KLONOPIN TAB 2MG</i>	39
<i>KLOXXADO SPR 8MG</i>	54
<i>KOMBIGLYZ XR TAB 2.5-1000</i>	49

KOMBIGLYZ XR TAB 5-1000MG	49
KOMBIGLYZ XR TAB 5-500MG	49
KOSELUGO CAP 10MG	73
KOSELUGO CAP 25MG	73
K-PHOS TAB	132
K-PHOS TAB NO 2	116
KRAZATI TAB 200MG	73
KRISTALOSE PAK 10GM	121
KRISTALOSE PAK 20GM	121
L	
labetalol hcl tab 100 mg	86
labetalol hcl tab 200 mg	86
labetalol hcl tab 300 mg	86
lacosamide oral solution 10 mg/ml	40
lacosamide tab 100 mg	40
lacosamide tab 150 mg	40
lacosamide tab 200 mg	40
lacosamide tab 50 mg	40
LACRISERT MIS 5MG OP	137
lactic acid (ammonium lactate) cream 12%	106
lactic acid (ammonium lactate) lotion 12%	106
lactulose (encephalopathy) solution 10 gm/15ml	115
LACTULOSE PAK 10GM	121
lactulose solution 10 gm/15ml	121
LAMICTAL CHW 25MG	40
LAMICTAL CHW 5MG	40
LAMICTAL KIT START 35	40
LAMICTAL KIT START 49	40
LAMICTAL KIT START 98	40
LAMICTAL ODT KIT	40
LAMICTAL ODT TAB 100MG	40
LAMICTAL ODT TAB 200MG	40
LAMICTAL ODT TAB 25MG	40
LAMICTAL ODT TAB 50MG	40
LAMICTAL TAB 100MG	40
LAMICTAL TAB 150MG	40
LAMICTAL TAB 200MG	40
LAMICTAL TAB 25MG	40
LAMICTAL XR KIT	40
LAMICTAL XR TAB 100MG	40
LAMICTAL XR TAB 200MG	40
LAMICTAL XR TAB 250MG	40
LAMICTAL XR TAB 25MG	40
LAMICTAL XR TAB 300MG	40

LAMICTAL XR TAB 50MG	40
lamivudine oral soln 10 mg/ml	83
lamivudine tab 100 mg (hbv)	85
lamivudine tab 150 mg	83
lamivudine tab 300 mg	83
lamivudine-zidovudine tab 150-300 mg	83
lamotrigine orally disintegrating tab 100 mg	40
lamotrigine orally disintegrating tab 200 mg	40
lamotrigine orally disintegrating tab 25 mg	40
lamotrigine orally disintegrating tab 50 mg	40
lamotrigine tab 100 mg	41
lamotrigine tab 150 mg	41
lamotrigine tab 200 mg	41
lamotrigine tab 25 mg	40
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	40
lamotrigine tab 35 x 25 mg starter kit	40
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	40
lamotrigine tab chewable dispersible 25 mg	41
lamotrigine tab chewable dispersible 5 mg	41
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	41
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	41
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	41
lamotrigine tab er 24hr 100 mg	41
lamotrigine tab er 24hr 200 mg	41
lamotrigine tab er 24hr 25 mg	41
lamotrigine tab er 24hr 250 mg	41
lamotrigine tab er 24hr 300 mg	41
lamotrigine tab er 24hr 50 mg	41
LAMPIT TAB 120MG	30
LAMPIT TAB 30MG	30
LANCET DEVICES	122
LANCET MISC	122
LANCETS	122
LANCETS KIT	122

LANOXIN TAB 0.0625MG	89
LANOXIN TAB 0.125MG	89
LANOXIN TAB 0.25MG	89
<i>lansoprazole cap delayed release 15 mg</i>	150
<i>lansoprazole cap delayed release 30 mg</i>	150
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	150
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	150
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	116
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	116
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	116
LANTUS INJ 100/ML.....	52
LANTUS SOLOS INJ 100/ML.....	52
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	73
LASIX TAB 20MG.....	109
LASIX TAB 40MG.....	109
LASIX TAB 80MG.....	109
LASTACAF T SOL 0.25%.....	140
<i>latanoprost ophth soln 0.005%</i>	141
LATUDA TAB 120MG	79
LATUDA TAB 20MG	78
LATUDA TAB 40MG	78
LATUDA TAB 60MG	78
LATUDA TAB 80MG	79
leflunomide tab 10 mg	23
leflunomide tab 20 mg	23
lenalidomide cap 10 mg	133
lenalidomide cap 15 mg	133
lenalidomide cap 20 mg	133
lenalidomide cap 25 mg	133
lenalidomide cap 5 mg	133
lenalidomide caps 2.5 mg	133
LENVIMA CAP 10 MG	69
LENVIMA CAP 12MG	69
LENVIMA CAP 14 MG	69
LENVIMA CAP 18 MG	69
LENVIMA CAP 20 MG	69
LENVIMA CAP 24 MG	69
LENVIMA CAP 4MG	69
LENVIMA CAP 8 MG	69

LESCOL XL TAB 80MG.....	58
<i>letrozole tab 2.5 mg</i>	70
<i>leucovorin calcium tab 10 mg</i>	75
<i>leucovorin calcium tab 15 mg</i>	75
<i>leucovorin calcium tab 25 mg</i>	75
<i>leucovorin calcium tab 5 mg</i>	75
LEUKERAN TAB 2MG	68
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	37
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	37
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	37
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	37
LEVEMIR INJ.....	52
LEVEMIR INJ FLEXPEN	52
LEVEMIR INJ FLEXTOUCH	52
<i>levetiracetam oral soln 100 mg/ml</i>	41
<i>levetiracetam tab 1000 mg</i>	41
<i>levetiracetam tab 250 mg</i>	41
<i>levetiracetam tab 500 mg</i>	41
<i>levetiracetam tab 750 mg</i>	41
<i>levetiracetam tab er 24hr 500 mg</i>	41
<i>levetiracetam tab er 24hr 750 mg</i>	41
LEVICYN GEL.....	106
<i>levobunolol hcl ophth soln 0.5%.....</i>	137
<i>levocarnitine oral soln 1 gm/10ml (10%).....</i>	111
<i>levocarnitine tab 330 mg</i>	111
<i>levocetirizine dihydrochloride tab 5 mg</i>	56
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<i>telmisartan-hydrochlorothiazide tab 40- 12.5 mg</i>	66
<i>telmisartan-hydrochlorothiazide tab 80- 12.5 mg</i>	66
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<i>temazepam cap 15 mg</i>	120
<i>temazepam cap 22.5 mg</i>	120
<i>temazepam cap 30 mg</i>	120
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testosterone td gel 20.25 mg/act (1.62%)	29
testosterone td gel 25 mg/2.5gm (1%)	29
testosterone td gel 40.5 mg/2.5gm (1.62%)	29
testosterone td gel 50 mg/5gm (1%)	29
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timolol maleate tab 20 mg	87
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<i>tobramycin ophth soln 0.3%</i>	139
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	140
TOBREX OIN 0.3% OP	139
TOBREX SOL 0.3% OP	139
<i>tolbutamide tab 500 mg</i>	53
<i>tolcapone tab 100 mg</i>	76
<i>tolmetin sodium tab 600 mg</i>	23
<i>tolterodine tartrate cap er 24hr 2 mg</i>	151
<i>tolterodine tartrate cap er 24hr 4 mg</i>	151
<i>tolterodine tartrate tab 1 mg</i>	151
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<i>topiramate cap er 24hr 100 mg</i>	42
<i>topiramate cap er 24hr 200 mg</i>	42
<i>topiramate cap er 24hr 25 mg</i>	42
<i>topiramate cap er 24hr 50 mg</i>	42
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<i>topiramate sprinkle cap 25 mg</i>	42
<i>topiramate tab 100 mg</i>	42
<i>topiramate tab 200 mg</i>	42
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<i>toremifene citrate tab 60 mg (base equivalent)</i>	70
<i>torsemide tab 10 mg</i>	109
<i>torsemide tab 100 mg</i>	109
<i>torsemide tab 20 mg</i>	109
<i>torsemide tab 5 mg</i>	109
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<i>tramadol hcl tab er 24hr 300 mg</i>	27
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<i>tramadol-acetaminophen tab 37.5-325 mg</i>	28
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<i>trandolapril tab 2 mg</i>	61
<i>trandolapril tab 4 mg</i>	61
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	66
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	66
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	66
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trazodone hcl tab 150 mg.....	46
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tretinoin cream 0.025%	100
tretinoin cream 0.05%	100
tretinoin cream 0.1%.....	100
tretinoin gel 0.01%	100
tretinoin gel 0.025%.....	100
tretinoin gel 0.05%	100
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triamicinolone acetonide cream 0.025%	105
triamicinolone acetonide cream 0.1%	105
triamicinolone acetonide cream 0.5%	105
triamicinolone acetonide dental paste 0.1%	135
triamicinolone acetonide lotion 0.025%	105
triamicinolone acetonide lotion 0.1%	105
triamicinolone acetonide oint 0.025%	105
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triamterene & hydrochlorothiazide cap 37.5-25 mg	109
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triamterene & hydrochlorothiazide tab 75-50 mg	109
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TRICOR TAB 48MG	58
trifluoperazine hcl tab 1 mg (base equivalent)	81
trifluoperazine hcl tab 10 mg (base equivalent)	82
trifluoperazine hcl tab 2 mg (base equivalent)	82
trifluoperazine hcl tab 5 mg (base equivalent)	82
trifluridine ophth soln 1%	139
trihexyphenidyl hcl oral soln 0.4 mg/ml	76
trihexyphenidyl hcl tab 2 mg	76
trihexyphenidyl hcl tab 5 mg	76
TRIJARDY XR TAB	50
TRIKAFTA PAK 59.5MG	147
TRIKAFTA PAK 75MG	147
TRIKAFTA TAB	147
TRILEPTAL SUS 300MG/5M.....	42
TRILEPTAL TAB 150MG	42
TRILEPTAL TAB 300MG	42
TRILEPTAL TAB 600MG	42
TRILIPIX CAP 135MG	58
TRILIPIX CAP 45MG	58
trimethobenzamide hcl cap 300 mg ..55	
trimethoprim tab 100 mg	30
trimipramine maleate cap 100 mg49	
trimipramine maleate cap 25 mg	49
trimipramine maleate cap 50 mg.....49	
TRINTELLIX TAB 10MG	47
TRINTELLIX TAB 20MG	47
TRINTELLIX TAB 5MG	47
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TRIUMEQ TAB	84
TROKENDI XR CAP 100MG.....42	

TROKENDI XR CAP 200MG.....	42
TROKENDI XR CAP 25MG	42
TROKENDI XR CAP 50MG	42
<i>tropicamide ophth soln 0.5%</i>	138
<i>tropicamide ophth soln 1%</i>	138
<i>trospium chloride cap er 24hr 60 mg</i>	151
<i>trospium chloride tab 20 mg</i>	151
TRULICITY INJ 0.75/0.5	51
TRULICITY INJ 1.5/0.5	51
TRULICITY INJ 3/0.5.....	51
TRULICITY INJ 4.5/0.5	51
TRUSELTIQ CAP 100MG	75
TRUSELTIQ CAP 125MG	75
TRUSELTIQ CAP 50MG	75
TRUSELTIQ CAP 75MG	75
TRUSOPT SOL 2% OP	141
TUKYSA TAB 150MG	69
TUKYSA TAB 50MG	69
TURALIO CAP 200MG.....	75
TUSSICAPS CAP 10-8MG	98
TYKERB TAB 250MG	75
TYVASO DPI POW 16-32-48.....	91
TYVASO DPI POW 16-32MCG	91
TYVASO DPI POW 16MCG	91
TYVASO DPI POW 32-48MCG	91
TYVASO DPI POW 32MCG	91
TYVASO DPI POW 48MCG	91
TYVASO DPI POW 64MCG	91
TYVASO REFIL SOL 0.6MG/ML.....	91
TYVASO SOL 0.6MG/ML.....	91
TYVASO START SOL 0.6MG/ML	91
U	
UKONIQ TAB 200MG.....	75
ULTICARE MIC MIS 32GX4MM	129
ULTICARE MIS 30GX3/16	129
ULTICARE MIS 30GX5/16	129
ULTICARE PEN MIS 31GX5MM.....	129
ULTICARE PEN MIS 31GX6MM.....	129
ULTICARE PEN MIS 31GX8MM.....	129
ULTIGUARD MIS 31GX5MM.....	129
ULTIGUARD MIS 31GX6MM.....	129
ULTIGUARD MIS 31GX8MM.....	129
ULTIGUARD MIS 32GX4MM.....	129
ULTIGUARD MIS 32GX6MM.....	129
ULTILET PEN MIS 29GX12.7	129
ULTILET PEN MIS 31GX5MM	129

ULTILET PEN MIS 31GX8MM	130
ULTILET PEN MIS 32GX4MM	130
ULTRA FLO MIS 31GX5MM.....	130
ULTRA FLO MIS 31GX8MM.....	130
ULTRA FLO MIS PEN NEED	130
ULTRACET TAB 37.5-325.....	28
ULTRAVATE LOT 0.05%	105
UNFINE PNTP MIS 32GX4MM	130
UNIFINE PLUS MIS 31GX1/4.....	130
UNIFINE PLUS MIS 31GX3/16	130
UNIFINE PLUS MIS 31GX5/16	130
UNIFINE PLUS MIS 32GX5/32	130
UNIFINE PLUS MIS 33GX5/32	130
UNIFINE PNTP MIS 29GX1/2.....	130
UNIFINE PNTP MIS 29GX12MM	130
UNIFINE PNTP MIS 30GX3/16	130
UNIFINE PNTP MIS 31GX3/16	130
UNIFINE PNTP MIS 31GX5/16	130
UNIFINE PNTP MIS 31GX5MM	130
UNIFINE PNTP MIS 31GX6MM	130
UNIFINE PNTP MIS 31GX8MM	130
UNIFINE PNTP MIS 32GX4MM	130
UNIFINE PNTP MIS 32GX5/32	130
UNIFINE PNTP MIS 32GX6MM	130
UNIFINE PNTP MIS 33GX4MM	130
UNIFINE ULTR MIS 31GX5MM	130
UNIFINE ULTR MIS 31GX6MM	130
UNIFINE ULTR MIS 31GX8MM	130
UNIFINE ULTR MIS 32GX4MM	130
UPNEEQ SOL 0.1%	141
UPTRAVI PACK TAB 200/800	92
UPTRAVI TAB 1000MCG	92
UPTRAVI TAB 1200MCG	92
UPTRAVI TAB 1400MCG	92
UPTRAVI TAB 1600MCG	92
UPTRAVI TAB 200MCG	92
UPTRAVI TAB 400MCG	92
UPTRAVI TAB 600MCG	92
UPTRAVI TAB 800MCG	92
<i>urea gel 45%.....</i>	105
UROXATRAL TAB 10MG	117
<i>ursodiol cap 300 mg</i>	114
<i>ursodiol tab 250 mg</i>	114
<i>ursodiol tab 500 mg</i>	114
V	
<i>valacyclovir hcl tab 1 gm.....</i>	86
<i>valacyclovir hcl tab 500 mg</i>	86

VALCHLOR GEL 0.016%	102
VALCYTE SOL 50MG/ML	84
valganciclovir hcl for soln 50 mg/ml (base equiv)	84
valganciclovir hcl tab 450 mg (base equivalent)	85
VALIUM TAB 10MG	33
VALIUM TAB 2MG	33
VALIUM TAB 5MG	33
valproate sodium oral soln 250 mg/5ml (base equiv)	44
valproic acid cap 250 mg.....	44
valsartan tab 160 mg.....	62
valsartan tab 320 mg.....	62
valsartan tab 40 mg	62
valsartan tab 80 mg	62
valsartan-hydrochlorothiazide tab 160- 12.5 mg	66
valsartan-hydrochlorothiazide tab 160- 25 mg	66
valsartan-hydrochlorothiazide tab 320- 12.5 mg	66
valsartan-hydrochlorothiazide tab 320- 25 mg	66
valsartan-hydrochlorothiazide tab 80- 12.5 mg	66
VALTOCO SPR 10MG.....	39
VALTOCO SPR 15MG.....	39
VALTOCO SPR 20MG.....	39
VALTOCO SPR 5MG.....	39
VALTREX TAB 1GM	86
VALTREX TAB 500MG.....	86
vancomycin hcl cap 125 mg (base equivalent)	31
vancomycin hcl cap 250 mg (base equivalent)	31
VANDAZOLE GEL 0.75%.....	152
VANILLA SILQ SUS	108
VANOS CRE 0.1%.....	105
varenicline tartrate tab 0.5 mg (base equiv)	146
varenicline tartrate tab 1 mg (base equiv)	146
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....	146
VASCEPA CAP 0.5GM	57
VASCEPA CAP 1GM	57

VASOTEC TAB 10MG.....	61
VASOTEC TAB 2.5MG.....	61
VASOTEC TAB 20MG.....	61
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VECTICAL OIN 3MCG/GM	102
VELPHORO CHW 500MG.....	116
VEMLIDY TAB 25MG	85
VENCLEXTA TAB 100MG.....	69
VENCLEXTA TAB 10MG.....	69
VENCLEXTA TAB 50MG.....	69
VENCLEXTA TAB START PK.....	69
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	47
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	47
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	47
venlafaxine hcl tab 100 mg (base equivalent)	47
venlafaxine hcl tab 25 mg (base equivalent)	47
venlafaxine hcl tab 37.5 mg (base equivalent)	47
venlafaxine hcl tab 50 mg (base equivalent)	47
venlafaxine hcl tab 75 mg (base equivalent)	47
venlafaxine hcl tab er 24hr 150 mg (base equivalent)	48
venlafaxine hcl tab er 24hr 225 mg (base equivalent)	48
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)	48
venlafaxine hcl tab er 24hr 75 mg (base equivalent)	48
VENTAVIS SOL 10MCG/ML	91
VENTAVIS SOL 20MCG/ML	92
VENTOLIN HFA AER	37
verapamil hcl cap er 24hr 100 mg	89
verapamil hcl cap er 24hr 120 mg	89
verapamil hcl cap er 24hr 180 mg	89
verapamil hcl cap er 24hr 200 mg	89
verapamil hcl cap er 24hr 240 mg	89
verapamil hcl cap er 24hr 300 mg	89
verapamil hcl cap er 24hr 360 mg	89
verapamil hcl tab 120 mg.....	89

verapamil hcl tab 40 mg.....	89
verapamil hcl tab 80 mg.....	89
verapamil hcl tab er 120 mg	89
verapamil hcl tab er 180 mg	89
verapamil hcl tab er 240 mg	89
VERDESO AER 0.05%	105
VEREGEN OIN 15%	100
VERIFINE PEN MIS 29GX12MM.....	130
VERIFINE PEN MIS 31GX5MM	130
VERIFINE PEN MIS 31GX8MM	130
VERIFINE PEN MIS 32GX4MM	130
VERIFINE PEN MIS 32GX6MM	130
VERQUVO TAB 10MG	93
VERQUVO TAB 2.5MG	93
VERQUVO TAB 5MG	93
VERZENIO TAB 100MG.....	75
VERZENIO TAB 150MG.....	75
VERZENIO TAB 200MG.....	75
VERZENIO TAB 50MG	75
VIBERZI TAB 100MG.....	115
VIBERZI TAB 75MG	115
VICTOZA INJ 18MG/3ML.....	51
vilazodone hcl tab 10 mg	47
vilazodone hcl tab 20 mg	47
vilazodone hcl tab 40 mg	47
VIRACEPT TAB 250MG	84
VIRACEPT TAB 625MG	84
VIREAD TAB 150MG.....	84
VIREAD TAB 200MG.....	84
VIREAD TAB 250MG.....	84
VISTARIL CAP 25MG	33
VISTARIL CAP 50MG	33
VISTOGARD PAK 10GM	54
VITRAKVI CAP 100MG	75
VITRAKVI CAP 25MG.....	75
VITRAKVI SOL 20MG/ML	75
VIZIMPRO TAB 15MG	69
VIZIMPRO TAB 30MG	69
VIZIMPRO TAB 45MG	70
VOGELXO GEL 1%(50MG)	29
VOGELXO GEL PUMP 1%	29
VONJO CAP 100MG.....	75
voriconazole for susp 40 mg/ml	56
voriconazole tab 200 mg	56
voriconazole tab 50 mg	56
VORTEX VALVE MIS CHAMBER	130
VORTEX/MASK MIS CHILDS.....	130
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VOSEVI TAB	85
VOTRIENT TAB 200MG	75
VYNDAMAX CAP 61MG	93
VYNDAQEL CAP 20MG	93
VYVANSE CAP 10MG	18
VYVANSE CAP 20MG	18
VYVANSE CAP 30MG	18
VYVANSE CAP 40MG	18
VYVANSE CAP 50MG	18
VYVANSE CAP 60MG	18
VYVANSE CAP 70MG	18
VYZULTA SOL 0.024%	141
W	
WAKIX TAB 17.8MG.....	18
WAKIX TAB 4.45MG.....	18
<i>warfarin sodium tab 1 mg</i>	37
<i>warfarin sodium tab 10 mg.....</i>	38
<i>warfarin sodium tab 2 mg</i>	37
<i>warfarin sodium tab 2.5 mg.....</i>	37
<i>warfarin sodium tab 3 mg</i>	38
<i>warfarin sodium tab 4 mg</i>	38
<i>warfarin sodium tab 5 mg</i>	38
<i>warfarin sodium tab 6 mg</i>	38
<i>warfarin sodium tab 7.5 mg.....</i>	38
WELIREG TAB 40MG	71
WELLBUTRIN TAB XL 150MG	45
WELLBUTRIN TAB XL 300MG	45
WIDE-SEAL DPR KIT 60	122
WIDE-SEAL DPR KIT 65	122
WIDE-SEAL DPR KIT 70	122
WIDE-SEAL DPR KIT 75	122
WIDE-SEAL DPR KIT 80	122
WIDE-SEAL DPR KIT 85	122
WIDE-SEAL DPR KIT 90	122
WIDE-SEAL DPR KIT 95	122
X	
XALATAN SOL 0.005%	141
XALKORI CAP 200MG.....	75
XALKORI CAP 250MG.....	75
XANAX TAB 0.25MG.....	33
XANAX TAB 0.5MG	33
XANAX TAB 1MG	34
XANAX TAB 2MG	34
XARELTO STAR TAB 15/20MG	38
XARELTO SUS 1MG/ML	38
XARELTO TAB 10MG	38

XARELTO TAB 15MG	38
XARELTO TAB 2.5MG	38
XARELTO TAB 20MG	38
XATMEP SOL 2.5MG/ML.....	69
XELJANZ SOL 1MG/ML	21
XELJANZ TAB 10MG.....	21
XELJANZ TAB 5MG.....	21
XELJANZ XR TAB 11MG	21
XELJANZ XR TAB 22MG	21
XELODA TAB 150MG	69
XELODA TAB 500MG	69
XIFAXAN TAB 200MG	30
XIFAXAN TAB 550MG	30
XIGDUO XR TAB 10-1000	50
XIGDUO XR TAB 10-500MG	50
XIGDUO XR TAB 2.5-1000.....	50
XIGDUO XR TAB 5-1000MG	50
XIGDUO XR TAB 5-500MG	50
XiIDRA DRO 5%	139
XODOL TAB 5-300MG	28
XOFLUZA TAB 40MG	86
XOFLUZA TAB 80MG	86
XOPENEX CONC NEB 1.25/0.5	37
XOPENEX HFA AER	37
XOPENEX NEB 0.31MG	37
XOPENEX NEB 0.63MG	37
XOPENEX NEB 1.25/3ML	37
XOSPATA TAB 40MG	75
XPOVIO PAK 40MG	71
XPOVIO PAK 50MG	71
XPOVIO PAK 60MG	71
XPOVIO PAK 80MG	71
XTANDI CAP 40MG	70
XTANDI TAB 40MG	70
XTANDI TAB 80MG	70
XULTOPHY INJ 100/3.6	50
XYREM SOL 500MG/ML	143
XYWAV SOL 0.5GM/ML.....	143
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YONSA TAB 125MG.....	70
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<i>zafirlukast tab 10 mg</i>	35
<i>zafirlukast tab 20 mg</i>	35
<i>zaleplon cap 10 mg</i>	120
<i>zaleplon cap 5 mg</i>	120
ZANAFLEX CAP 2MG	136
ZANAFLEX CAP 4MG	136
ZANAFLEX CAP 6MG	136
ZARONTIN CAP 250MG	43
ZARONTIN SOL 250/5ML.....	43
ZEJULA CAP 100MG	75
ZELAPAR TAB 1.25MG.....	78
ZELBORAF TAB 240MG.....	75
ZEMPLAR CAP 1MCG	111
ZEMPLAR CAP 2MCG	111
ZENPEP CAP 1000UNT.....	108
ZENPEP CAP 15000UNT.....	108
ZENPEP CAP 20000UNT.....	108
ZENPEP CAP 25000UNT.....	108
ZENPEP CAP 3000UNIT	108
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ZENPEP CAP 5000UNIT	108
ZEPOSIA 7DAY CAP STR PACK	145
ZEPOSIA CAP .92MG.....	145
ZEPOSIA CAP STR KIT	145
ZESTRIL TAB 10MG	61
ZESTRIL TAB 2.5MG	61
ZESTRIL TAB 20MG	61
ZESTRIL TAB 30MG	61
ZESTRIL TAB 40MG	61
ZESTRIL TAB 5MG	61
ZEVRX MIS 31GX5MM	130
ZEVRX MIS 31GX6MM	130
ZEVRX MIS 31GX8MM	130
ZEVRX MIS 32GX4MM	130
ZIAC TAB 10/6.25	67
ZIAC TAB 2.5/6.25	66
ZIAC TAB 5-6.25MG	66
ZIAGEN SOL 20MG/ML.....	84
<i>zidovudine cap 100 mg</i>	84
<i>zidovudine syrup 10 mg/ml</i>	84
<i>zidovudine tab 300 mg</i>	84
<i>zileuton tab er 12hr 600 mg</i>	35
<i>ziprasidone hcl cap 20 mg</i>	79
<i>ziprasidone hcl cap 40 mg</i>	79
<i>ziprasidone hcl cap 60 mg</i>	79
<i>ziprasidone hcl cap 80 mg</i>	79
ZIPSOR CAP 25MG	23
ZIRGAN GEL 0.15%.....	139
ZITHROMAX POW 1GM PAK	121
ZITHROMAX SUS 100/5ML	121
ZITHROMAX SUS 200/5ML	121
ZITHROMAX TAB 250MG	121
ZITHROMAX TAB 500MG	121

ZITHROMAX TAB TRI-PAK	121
ZITHROMAX TAB Z-PAK	121
ZOCOR TAB 10MG	60
ZOCOR TAB 20MG	60
ZOCOR TAB 40MG	60
ZOCOR TAB 80MG	60
ZOFRAN TAB 4MG	55
ZOKINVY CAP 50MG	135
ZOKINVY CAP 75MG	135
ZOLINZA CAP 100MG.....	75
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	132
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	132
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	132
<i>zolmitriptan orally disintegrating tab 5 mg</i>	132
<i>zolmitriptan tab 2.5 mg.....</i>	132
<i>zolmitriptan tab 5 mg</i>	132
ZOLOFT CON 20MG/ML	46
ZOLOFT TAB 100MG	46
ZOLOFT TAB 25MG.....	46
ZOLOFT TAB 50MG	46
<i>zolpidem tartrate sl tab 1.75 mg ...</i>	120
<i>zolpidem tartrate sl tab 3.5 mg</i>	120
<i>zolpidem tartrate tab 10 mg</i>	120
<i>zolpidem tartrate tab 5 mg</i>	120
<i>zolpidem tartrate tab er 12.5 mg....</i>	120
<i>zolpidem tartrate tab er 6.25 mg....</i>	120
ZONEGRAN CAP 100MG	42
ZONEGRAN CAP 25MG	42
<i>zonisamide cap 100 mg</i>	43
<i>zonisamide cap 25 mg</i>	43
<i>zonisamide cap 50 mg</i>	43
ZORVOLEX CAP 18MG.....	23
ZORVOLEX CAP 35MG.....	23
ZORYVE CRE 0.3%	102
ZOVIRAX CRE 5%	102
ZOVIRAX OIN 5%	102
ZTALMY SUS 50MG/ML	43
ZUBSOLV SUB 1.4-0.36	28
ZUBSOLV SUB 5.7-1.4	28
ZUBSOLV SUB 8.6-2.1	28
ZUPLENZ MIS 4MG	55
ZUPLENZ MIS 8MG	55
ZYCLARA CRE 3.75%.....	106
ZYCLARA PUMP CRE 2.5%	106
ZYCLARA PUMP CRE 3.75%	106
ZYDELIG TAB 100MG	75
ZYDELIG TAB 150MG	75
ZYKADIA TAB 150MG.....	75
ZYLET SUS 0.5-0.3%.....	140
ZYLOPRIM TAB 100MG.....	117
ZYLOPRIM TAB 300MG.....	117
ZYMAXID SOL 0.5%	139
ZYPREXA TAB 10MG	81
ZYPREXA TAB 15MG	81
ZYPREXA TAB 2.5MG	81
ZYPREXA TAB 20MG	81
ZYPREXA TAB 5MG	81
ZYPREXA TAB 7.5MG	81
ZYPREXA ZYDI TAB 10MG	81
ZYPREXA ZYDI TAB 15MG	81
ZYPREXA ZYDI TAB 20MG	81
ZYTIGA TAB 250MG.....	70
ZYTIGA TAB 500MG.....	70
ZYVOX SUS 100MG/5M	31
ZYVOX TAB 600MG.....	31