

## **Pharmacy Program**

NH Healthy Families is committed to providing appropriate, high quality, and cost effective drug therapy to all NH Healthy Families members. NH Healthy Families works with providers and pharmacists to ensure that medications used to treat a variety of conditions and diseases are covered. NH Healthy Families covers prescription medications and certain over-the-counter (OTC) medications when ordered by a prescriber. The pharmacy program does not cover all medications. Some medications require prior authorization (PA) or have limitations on age, dosage, and maximum quantities.

## **Preferred Drug List**

The NH Healthy Families Preferred Drug List (PDL) is the list of covered drugs. The PDL applies to drugs members can receive at retail pharmacies. The NH Healthy Families PDL is continually evaluated by the Pharmacy and Therapeutics (P&T) Committee to promote the appropriate and cost-effective use of medications. The Committee is composed of the physicians, pharmacists, and other healthcare professionals.

## **Pharmacy Benefit Manager**

NH Healthy Families works with a Pharmacy Benefit Manager (PBM) to process pharmacy claims for prescribed drugs and maintain the pharmacy network. The Pharmacy Benefit Manager ensures claims are processed in line with the NH Healthy Families preferred drug list.

## **Specialty Drugs**

NH Healthy Families contracts with a number of specialty pharmacies, such as AcariaHealth Specialty Pharmacy, to ensure members have adequate access to the specialty drugs they require. Specialty drugs, such as biopharmaceuticals and injectables, may require PA to be approved for payment by NH Healthy Families. PA requirements are programmed specific to the drug.

## **Dispensing Limits**

Drugs may be dispensed up to a maximum of thirty-four (34) day supply for each new prescription or refill. A total of 85% of the day supply must have elapsed before the prescription can be refilled for PDL drugs (excluding ophthalmic drugs which are set at 70%).

## **Appropriate Use and Safety Edits**

The health and safety of the member are top priorities for NH Healthy Families. One of the ways we address member safety is through point-of sale (POS) edits at the time a prescription is processed at the pharmacy. These edits are based on FDA recommendations and promote safe and effective medication utilization.

## **Prior Authorizations**

Some medications listed on the NH Healthy Families PDL may require PA. The information should be submitted by the prescriber to the Pharmacy Services team on the **Medication Prior Authorization Form**. This form should be **faxed to the Pharmacy Services team at 833-645-2738**. This document can be found on the NH Healthy Families website.

NH Healthy Families will cover the medication if it is determined that:

1. There is a medical reason the member needs the specific medication.
2. Depending on the medication, other medications on the PDL have not worked.

Authorization requests are reviewed by a licensed clinical pharmacist using the criteria established by the P&T Committee. If the request is approved, the Pharmacy Services team notifies the prescriber by fax. If the clinical information provided does not meet the coverage criteria for the requested medication, NH Healthy

Families will notify the member and their prescriber of alternatives and provide information regarding the appeal process.

### **Quantity Limits**

NH Healthy Families may limit how much of a certain medication a member can get at one time. If the prescriber feels the member has a medical reason for getting a greater amount, a PA may be requested. If NH Healthy Families does not grant PA we will notify the member and their prescriber and provide information regarding the appeal process.

### **Age Limits**

Some medications on the NH Healthy Families PDL may have age limits. These are set for certain drugs based on FDA approved labeling and for safety concerns and quality standards of care. Age limits align with current FDA alerts for the appropriate use of pharmaceuticals.

### **Non-Preferred**

NH Healthy Families incorporates a Preferred Drug List. A notation of non-preferred corresponds to drugs identified on the NH Healthy Families PDL indicating the trial and failure of preferred alternatives. The number of preferred drugs that must be tried prior to approval of non-preferred drugs varies by therapeutic drug class. To request the approval of a non-preferred drug please submit rationale via prior authorization request form to the Pharmacy Services team at fax number 833-645-2738.

### **Medical Necessity Requests**

If the member requires a medication that does not appear on the PDL, the member's prescriber can make a medical necessity (MN) request for the medication. It is anticipated that such exceptions will be rare as the PDL medications are appropriate to treat the vast majority of medical conditions.

For a MN request NH Healthy Families requires:

- Documentation of failure of PDL agent(s) within the same therapeutic class (provided agents exist in the therapeutic category with comparable labeled indications) for the same diagnosis (e.g. migraine, neuropathic pain, etc.); or
- Documented intolerance or contraindication to PDL agent(s) within the same therapeutic class (provided agents exist in the therapeutic category with comparable labeled indications); or
- Documented clinical history or presentation where the patient is not a candidate for PDL agents for the indication.

These requests are reviewed by a licensed clinical pharmacist using the criteria established by the P&T Committee. If the request is approved, the Pharmacy Services team will notify the prescriber by fax. If the clinical information provided does not meet the coverage criteria for the requested medication, the member and their prescriber will be notified of alternatives and provide information regarding the appeal process.

### **72-Hour Emergency Supply Policy**

State and Federal law require that a pharmacy dispense at least a 72-hour (3 day) supply of medication to any member awaiting PA determination. The purpose is to avoid interruption of current therapy or delay in the initiation of therapy. A provision of a 72-hour supply does not guarantee that the medication will be approved after a PA review. All participating pharmacies are authorized to provide a 72-hour supply of medication and will be reimbursed for the ingredient cost and dispensing fee of the 72-hour supply of medication, whether or not the PA request is ultimately approved or denied. The pharmacy must call the Pharmacy Help Desk at the number located on the back of your member ID card for an override.

### **Newly Approved Products**

NH Healthy Families reviews new drugs for safety and effectiveness before adding them to the PDL. During this period, access to these medications will be considered through the PA review process. If NH Healthy Families does not grant PA we will notify the member and their prescriber and provide information regarding the appeal process.

### **Over-the-Counter Medications**

NH Healthy Families covers some OTC medications. These medications can be found throughout the NH Healthy Families PDL. NH Healthy Families covers OTC products listed on the PDL if the member has a prescription from a licensed prescriber that meets all the legal requirements for a prescription.

### **CMS Labeler Requirements**

NH Healthy Families requires manufacturers to enter into the federal rebate agreement program as outlined in the Omnibus Budget Reconciliation Act of 1990 (OBRA 90) in order to be eligible for coverage under the NH Healthy Families preferred drug list. Manufacturers and products which do not engage in this rebate program will be ineligible for coverage under the preferred drug list.

### **Drug Efficacy Study and Implementation (DESI) Drugs**

DESI products and known related drug products are defined as less than effective by the Food and Drug Administration because there is a lack of substantial evidence of effectiveness for all labeling indications and because a compelling justification for their medical need has not been established. DESI products are not covered by NH Healthy Families.

### **Filling a Prescription**

A member can have prescriptions filled at a NH Healthy Families network pharmacy. If the member decides to have a prescription filled at a network pharmacy, they can locate a pharmacy near them by contacting NH Healthy Families Member Services. At the pharmacy, the member will need to provide the pharmacist with the prescription and their NH Healthy Families ID card.

### **Step Therapy**

Some medications listed on the NH Healthy Families' PDL may require specific medications to be used before the member can receive the step therapy medication. If NH Healthy Families has a record that the required medication was tried first the step therapy medications are automatically covered. If NH Healthy Families does not have a record that the required medication was tried, the member's prescriber may be required to provide additional information. If authorization is not granted, NH Healthy Families will notify the member and their prescriber and provide information regarding the appeal process.

<b>Trial and Failure of 1 Preferred Product Required Prior to Non-Preferred Products</b>
Antibiotics - 3rd Generation Quinolones
Anticonvulsants - Carbamazepine Derivatives
Behavioral Health - Atypical Antipsychotics & Combos
Cardiovascular - Oral Pulmonary Hypertension Agents
Central Nervous System - Calcitonin Gene-Related Peptide Inhibitors, Multiple Sclerosis - Other
Endocrinology - Biguanides & Combos, Dipeptidyl Peptidase-4 Inhibitors and Comboos, Insulins
Endocrinology - Meglitinides, SGLT-2 Inhibitors and Combos, Thiazolidinediones & Combos
Gastrointestinal - Hepatitis C Agents
Genitourinary/Renal - Androgen Hormone Inhibitors, Electrolyte Depleters

Immunologic - Systemic Immunomodulators
Miscellaneous - Smoking Cessation, Topical Androgenic Agents
Osteoporosis - Nasal Calcitonins
Respiratory - Inhaled Corticosteroids and Long/Short Acting Beta Adrenergics & Combos - Inhalers/Nebs
Topical - Antiparasitics, Very High Potency Steroids, Topical Combination Benzoyl Peroxide & Clindamycin Products

<b>Trial and Failure of 2 Preferred Products Required Prior to Non-Preferred Products</b>
Analgesic - Non-Selective NSAIDs, Long Acting Opioids, Tramadol & Tramadol Like Derivatives
Antibiotics - 2nd/3rd Generation Cephalosporins, 2nd Generation Quinolones, Herpetic Antivirals, Macrolides
Anticonvulsants - 1st/2nd Generation
Antifungals - Onychomycosis
Antivirals - Treatment/Prophylaxis of Influenza
Behavioral Health - Alzheimer's Agents, Antihyperkinesia, Serotonin Reuptake Inhibitors & Combos
Cardiovascular - Angiotensin Receptor Blockers & Combos, Calcium Channel Blockers & Combos, High Potency Statins & Combos, Platelet Inhibitors, Triglyceride Lowering Agents
Central Nervous System - Triptans
Endocrinology - 2nd Generation Sulfonylureas & Combos, Alpha-Glucosidase Inhibitors, Growth Hormone
Gastrointestinal - Antiemetics, Proton Pump Inhibitors & Combos, Ulcerative Colitis
Genitourinary/Renal - Alpha Blockers for Benign Prostatic Hyperplasia
Hematologic - Anticoagulants
Miscellaneous - Pancreatic Enzymes
Ophthalmic - Nonsteroidal Antiinflammatory, Quinolones, Antihistamines, Carbonic Anhydrase Inhibitors, Prostaglandin Agonists
Osteoporosis - Bisphosphonates
Otic/Antibiotic - Quinolones and Combos
Respiratory - COPD Agents, Leukotriene Modifiers, Nasal Antihistamines, Nasal Corticosteroids
Topical - High/Medium/Low Potency Steroids, Topical Agents for Psoriasis, Antibiotics, Antivirals, Retinoids

<b>Trial and Failure of 3 Preferred Products Required Prior to Non-Preferred Products</b>
Behavioral Health - Anxiolytics
Cardiovascular - ACE Inhibitors & Combos, Beta Blockers & Combos, Calcium Channel Blockers & Combos
Central Nervous System - Multiple Sclerosis - Disease Modifying Therapy
Genitourinary/Renal - Urinary Antispasmodics
Miscellaneous - Skeletal Muscle Relaxants
Respiratory - Adrenergic Combinations, Low-Sedating Antihistamines & Combos

<b>Trial and Failure of 5 Preferred Products Required Prior to Non-Preferred Products</b>
Ophthalmic/Glaucoma - Beta Blocker Agents

<b>Trial and Failure of All Preferred Products Required Prior to Non-Preferred Products</b>
Ophthalmic/Glaucoma - Alpha-2 Adrenergic Agents

## Abbreviations

The following notations and abbreviations may be found throughout the drug listing in the limitations and restrictions column.

DS/DU:	Day Supply per Dosage Unit
Max Days Sply:	Maximum Day Supply
Max Fills:	Maximum Fills (per a designated time period)
Max Qty:	Maximum Quantity (per claim or designated time period)
Min DS:	Minimum Day Supply
MP:	Maintenance Product (eligible for 90-day supply)
PA:	Prior Authorization
Pkg Size:	Package Size
SP	Specialty Drug
PV	Preventative
QL	Quantity Limit
ST	Step Therapy
AL	Age Limit
RX/OTC	Over-the-Counter Medication (prescription required)

## Tier Definitions

0	\$0 Copay
1	Preferred Generic
2	Preferred Brand
CO	Carve-Out Drug - Covered by State
NP	Non- Preferred

## Brand/Generic Drug Designation

Drug Type	Designation
Brand	First letter of drug name is capitalized
Generic	First letter of drug name is lowercase

## Contact Information

NH Healthy Families: 866-769-3085, [www.nhhealthyfamilies.com](http://www.nhhealthyfamilies.com)

Drug Name	Drug Tier	Requirements/Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b>		
<b>Amphetamines</b>		
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	NP	Generic for Adderall XR; QL(1 EA daily); AL(At least 6 yrs old); MP
ADDERALL TABS (amphetamine-dextroamphetamine)	2	Generic for Adderall; QL(3 EA daily); MP
amphetamine sulfate TABS	1	Generic for Evekeo; MP; PA
amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG	NP	MP
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	1	Generic for Adderall XR; QL(1 EA daily); AL(At least 6 yrs old); MP
amphetamine-dextroamphetamine TABS	1	Generic for Adderall; QL(3 EA daily); MP
dextroamphetamine sulfate CP24 5 MG	1	Generic for Dexedrine; QL(1 EA daily); AL(At least 6 yrs old); MP
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	Generic for Dexedrine; QL(2 EA daily); AL(At least 6 yrs old); MP
dextroamphetamine sulfate SOLN	2	Generic for Procentra; MP; PA
dextroamphetamine sulfate SOLN	NP	Generic for Procentra; MP; PA
dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG	1	MP

Drug Name	Drug Tier	Requirements/Limits
dextroamphetamine sulfate TABS 5 MG, 10 MG	NP	AL(At least 3 yrs old); MP
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	AL(At least 3 yrs old); MP
DYANAVEL XR TBCR	NP	
lisdexamfetamine dimesylate CAPS	NP	QL(1 EA daily); MP; PA
lisdexamfetamine dimesylate CHEW	1	MP; PA
methamphetamine hcl	1	Generic for Desoxyx; MP; PA
MYDAYIS CP24 (amphetamine-dextroamphetamine)	NP	MP
VYVANSE CAPS	2	QL(1 EA daily); MP; PA
VYVANSE CHEW	NP	MP; PA
XELSTRYM	NP	
<b>Analeptics</b>		
caffeine citrate SOLN PO 60 MG/3ML	1	QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail; MP
<b>Anorexiants Non-Amphetamine</b>		
phentermine hcl-topiramate	NP	PA
QSYMIA 11.25 MG-69 MG, 15 MG-92 MG, 3.75 MG-23 MG, 7.5 MG-46 MG (phentermine hcl-topiramate)	NP	PA
<b>Anti-Obesity Agents</b>		
WEGOVY	NP	PA
ZEPBOUND SOAJ	NP	PA
ZEPBOUND SOLN	NP	PA
<b>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</b>		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>atomoxetine hcl</i>	1	Generic for Strattera; AL(At least 6 yrs old); MP	<i>methylphenidate hcl CPCR</i>	1	Generic for Metadate CD; AL(At least 6 yrs old); MP
<i>clonidine hcl (adhd) TB12</i>	1	Generic for Kapvay; MP	<i>methylphenidate hcl SOLN</i>	1	Generic for Methylin; MP; PA
<i>guanfacine hcl (adhd)</i>	1	Generic for Intuniv; QL(1 EA daily); AL(At least 6 yrs old); MP	<i>methylphenidate hcl TABS</i>	1	Generic for Ritalin; AL(At least 3 yrs old); MP
ONYDA XR SUER	NP		<i>methylphenidate hcl TB24</i>	1	MP
QELBREE	NP	MP	<i>methylphenidate hcl TBCR 45 MG, 63 MG</i>	NP	AL(At least 6 yrs old)
Stimulants - Misc.			<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	AL(At least 6 yrs old); MP
APTENSIO XR CP24 ( <i>methylphenidate hcl</i> )	NP	Generic for Aptensio XR; MP; PA	<i>methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG</i>	1	Generic for Concerta; AL(At least 6 yrs old); MP
AZSTARYS	NP	MP	RELEXXII TBCR 45 MG, 63 MG ( <i>methylphenidate hcl</i> )	2	AL(At least 6 yrs old)
CONCERTA TBCR ( <i>methylphenidate hcl</i> )	2	Generic for Concerta; AL(At least 6 yrs old); MP	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG	2	Generic for Concerta; AL(At least 6 yrs old); MP
<i>dexmethylphenidate hcl CP24</i>	1	Generic for Focalin XR; MP; PA	<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
<i>dexmethylphenidate hcl TABS</i>	1	Generic for Focalin; QL(2 EA daily); AL(At least 6 yrs old); MP	Allergenic Extracts		
FOCALIN XR CP24 ( <i>dexmethylphenidate hcl</i> )	NP	Generic for Focalin XR; MP; PA	ORALAIR SUBL	2	PA
METHYLIN SOLN ( <i>methylphenidate hcl</i> )	NP	Generic for Methylin; MP; PA	<b>ALTERNATIVE MEDICINES</b>		
<i>methylphenidate hcl CHEW</i>	1	MP; PA	Alternative Medicine - G's		
<i>methylphenidate hcl CP24 60 MG</i>	1	MP; PA	<i>ginger (zingiber officinalis) CAPS 250 MG</i>	1	QL(4 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG</i>	1	Generic for Ritalin LA; MP; PA	Alternative Medicine - M's		
<i>methylphenidate hcl CP24</i>	NP	Generic for Aptensio XR; MP; PA	<i>melatonin TABS 3 MG, 5 MG</i>	1	QL(1 EA daily)
<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>					
Aminoglycosides					
BETHKIS NEBU ( <i>tobramycin</i> )				2	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML ( <i>tobramycin</i> )	2	SP; PA	ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP; PA
<i>neomycin sulfate TABS</i>	1		ADALIMUMAB-AACF (2 SYRINGE) PSKT	NP	SP; PA
TOBI NEBU ( <i>tobramycin</i> )	NP	SP; PA	ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT	NP	SP; PA
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	1	PA	ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP; PA
<i>tobramycin sulfate SOLR</i>	1	PA	ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP; PA
<i>tobramycin NEBU</i>	1	SP; PA	ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP; PA
<i>tobramycin NEBU</i>	NP	SP; PA	ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP; PA
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>			ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	NP	SP; PA
Antirheumatic - Enzyme Inhibitors			ADALIMUMAB-ADAZ SOAJ	2	SP; PA
OLUMIANT	NP	SP; PA	ADALIMUMAB-ADAZ SOSY 20 MG/0.2ML	NP	SP; PA
RINVOQ LQ SOLN	2	SP; PA	ADALIMUMAB-ADAZ SOSY	2	SP; PA
RINVOQ TB24	2	SP; PA	ADALIMUMAB-ADAZ (2 PEN) AJKT	NP	SP; PA
XELJANZ SOLN	NP	SP; PA	ADALIMUMAB-ADAZ (2 SYRINGE) PSKT	NP	SP; PA
Antirheumatic Antimetabolites			ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	NP	SP; PA
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	2	SP; PA	ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	NP	SP; PA
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	2	SP; PA	ADALIMUMAB-BWWD SOAJ 40 MG/0.4ML	2	SP; PA
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-BWWD SOSY 40 MG/0.4ML	2	SP; PA
ABRILADA (1 PEN) AJKT	NP	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP; PA
ABRILADA (2 PEN) AJKT	NP	SP; PA	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP; PA
ABRILADA (2 SYRINGE) PSKT	NP	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	NP	SP; PA	HUMIRA-PED>=40KG UC STARTER AJKT	2	SP; PA
ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP; PA	HUMIRA-PS/UV/ADOL HS STARTER AJKT	2	SP; PA
ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP; PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	2	SP; PA
AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP; PA	HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP; PA
AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP; PA	HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP; PA
AMJEVITA SOAJ	NP	SP; PA	HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP; PA
AMJEVITA SOSY	NP	SP; PA	HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP; PA
CYLTEZO (2 PEN) AJKT	NP	SP; PA	HYRIMOZ-PLAQUE PSORIASIS START SOAJ	NP	SP; PA
CYLTEZO (2 SYRINGE) PSKT	NP	SP; PA	HYRIMOZ SOAJ	NP	SP; PA
CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP; PA	HYRIMOZ SOSY	NP	SP; PA
CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP; PA	IDACIO (2 PEN) AJKT	NP	SP; PA
HADLIMA PUSHTOUCH SOAJ	2	SP; PA	IDACIO (2 SYRINGE) PSKT	NP	SP; PA
HADLIMA SOSY	2	SP; PA	IDACIO-CROHNS/UC STARTER AJKT	NP	SP; PA
HULIO (2 PEN) AJKT	NP	SP; PA	IDACIO-PSORIASIS STARTER AJKT	NP	SP; PA
HULIO (2 SYRINGE) PSKT	NP	SP; PA	SIMLANDI (1 PEN) AJKT	NP	SP; PA
HUMIRA (2 PEN) AJKT 40 MG/0.8ML	2	SP; PA	SIMLANDI (1 SYRINGE) PSKT	NP	SP; PA
HUMIRA (2 PEN) AJKT	2	SP; PA	SIMLANDI (2 PEN) AJKT	NP	SP; PA
HUMIRA (2 SYRINGE) PSKT	2	SP; PA	SIMLANDI (2 SYRINGE) PSKT	NP	SP; PA
HUMIRA-CD/UC/HS STARTER AJKT 40 MG/0.8ML	2	SP; PA	YUFLYMA (1 PEN) AJKT	NP	SP; PA
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	2	SP; PA	YUFLYMA (2 PEN) AJKT	NP	SP; PA
HUMIRA-PED<40KG CROHNS STARTER PSKT	2	SP; PA	YUFLYMA (2 SYRINGE) PSKT	NP	SP; PA
HUMIRA-PED>=40KG CROHNS START PSKT	2	SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP; PA
			YUSIMRY	NP	SP; PA
			Interleukin-6 Receptor Inhibitors		

Drug Name	Drug Tier	Requirements/Limits
AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML	NP	SP; PA
TOFIDENCE	NP	SP; PA
TYENNE SOAJ	NP	SP; PA
TYENNE SOLN	NP	SP; PA
TYENNE SOSY	NP	SP; PA
<b>Nonsteroidal Anti-inflammatory Agents (NSAIDs)</b>		
<i>celecoxib</i>	1	QL(2 EA daily); PA
<i>diclofenac potassium TABS 50 MG</i>	1	MP
<i>diclofenac sodium TB24</i>	1	MP
<i>diclofenac sodium TBEC</i>	1	MP
<i>etodolac CAPS</i>	1	MP
<i>etodolac TABS</i>	1	MP
<i>etodolac TB24</i>	1	MP
<i>flurbiprofen TABS</i>	1	MP
<i>ibuprofen CHEW</i>	0	MP
<i>ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML</i>	0	MP
<i>ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG</i>	0	MP
<i>indomethacin CAPS 25 MG, 50 MG</i>	1	MP
<i>indomethacin CPCR</i>	1	MP
<i>ketoprofen CAPS 50 MG</i>	1	MP
<i>ketoprofen CP24</i>	1	MP
<i>ketorolac tromethamine TABS</i>	1	QL(20 EA per fill retail); AL(At least 17 yrs old); MP
<i>meloxicam TABS</i>	1	MP
MOTRIN CHILDRENS CHEW ( <i>ibuprofen</i> )	0	MP
MOTRIN INFANTS DROPS SUSP ( <i>ibuprofen</i> )	0	MP
<i>nabumetone</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>naproxen sodium TABS 275 MG, 550 MG</i>	1	MP
<i>naproxen sodium TABS 220 MG</i>	1	QL(2 EA daily); MP
<i>naproxen-esomeprazole magnesium</i>	NP	PA
<i>naproxen SUSP</i>	1	MP
<i>naproxen TABS</i>	1	MP
<i>naproxen TBEC</i>	1	QL(2 EA daily); MP
ORUDIS CAPS 75 MG	2	MP
<i>oxaprozin TABS</i>	1	MP
<i>piroxicam CAPS</i>	1	MP
<i>sulindac TABS</i>	1	MP
<i>tolmetin sodium CAPS</i>	1	MP
<i>tolmetin sodium TABS 600 MG</i>	1	MP
VIMOVO ( <i>naproxen-esomeprazole magnesium</i> )	NP	PA
<b>Phosphodiesterase 4 (PDE4) Inhibitors</b>		
OTEZLA TABS	2	SP; PA
OTEZLA TBPk	2	SP; PA
<b>Pyrimidine Synthesis Inhibitors</b>		
<i>leflunomide</i>	1	QL(1 EA daily); MP
<b>Soluble Tumor Necrosis Factor Receptor Agents</b>		
ENBREL MINI SOCT	2	SP; PA
ENBREL SURECLICK SOAJ	2	SP; PA
ENBREL SOLN	2	SP; PA
ENBREL SOSY	2	SP; PA
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
<b>Analgesic Combinations</b>		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1	
<i>butalbital-aspirin-caffeine CAPS</i>	1	QL(4 EA daily)
<b>Analgesics - Sodium Channel Pain Signal Inhibitors</b>		
JOURNAVX	2	QL(30 EA per 60 day(s) retail; 30 EA per 60 days mail)
<b>Analgesics Other</b>		
<i>acetaminophen CHEW</i>	0	
<i>acetaminophen ELIX</i>	0	
<i>acetaminophen LIQD 160 MG/5ML</i>	0	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	0	
<i>acetaminophen SUPP 120 MG, 650 MG</i>	0	QL(12 EA per fill retail)
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	1	
<i>acetaminophen TABS 325 MG, 500 MG</i>	1	
FEVERALL JUNIOR STRENGTH SUPP	0	QL(12 EA per fill retail)
<b>Analgesics-Peptide Channel Blockers</b>		
PRIALT	2	SP; PA
<b>Salicylates</b>		
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	1	
<i>aspirin CHEW</i>	0	
ASPIRIN SUPP 300 MG	0	QL(12 EA per fill retail)
<i>aspirin TABS 325 MG</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>aspirin TBEC 81 MG, 325 MG</i>	0	
<i>diflunisal TABS</i>	1	MP
<i>salsalate</i>	1	
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
<b>Opioid Agonists</b>		
<i>codeine sulfate TABS 30 MG</i>	1	QL(2 EA daily)
CODEINE SULFATE TABS	2	QL(2 EA daily)
CONZIP CP24 ( <i>tramadol hcl</i> )	NP	PA
<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1	10 per month; QL(0.34 EA daily)
<i>hydrocodone bitartrate CP12</i>	NP	
HYDROMORPHONE HCL SUPP	2	QL(12 EA per fill retail)
<i>hydromorphone hcl TABS</i>	1	QL(8 EA daily)
<i>hydromorphone hcl TB24</i>	1	PA
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1	QL(500 ML per fill retail)
<i>meperidine hcl TABS 50 MG</i>	1	QL(6 EA daily)
<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PA
<i>methadone hcl TABS 5 MG</i>	1	QL(4 EA daily); PA
<i>morphine sulfate beads</i>	NP	PA
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML</i>	1	QL(240 ML per fill retail)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	1	QL(16.67 ML daily)	<i>butalbital-aspirin-caffeine w/cod</i>	1	QL(4 EA daily)
<i>morphine sulfate SUPP</i>	1	QL(24 EA per fill retail)	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1	QL(180 ML daily)
<i>morphine sulfate TABS</i>	1	QL(6 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-7.5 MG</i>	1	QL(8 EA daily)
<i>morphine sulfate TBCR</i>	1	QL(3 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-5 MG</i>	1	QL(12 EA daily)
<i>oxycodone hcl CAPS</i>	1	QL(6 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG</i>	1	QL(6 EA daily)
<i>oxycodone hcl CONC 100 MG/5ML</i>	1	QL(6 ML daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	QL(6 EA daily)
<i>oxycodone hcl SOLN</i>	1		<i>tramadol-acetaminophen</i>	1	QL(4 EA daily)
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily); PA	<b>Opioid Partial Agonists</b>		
<i>oxycodone hcl TABS</i>	1	QL(6 EA daily)	<i>BRIXADI (WEEKLY) SOSY</i>	2	SP
<i>oxymorphone hcl TB12 15 MG</i>	1	PA	<i>BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML</i>	2	SP
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1		<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	1	QL(3 EA daily)
<i>QDOLO SOLN (tramadol hcl)</i>	NP		<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG</i>	1	QL(12 EA daily)
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	2	PA	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG</i>	1	QL(6 EA daily)
<i>tramadol hcl SOLN</i>	NP		<b>Opioid Combinations</b>		
<i>TRAMADOL HCL SOLN (tramadol hcl)</i>	NP		<i>acetaminophen w/ codeine SOLN</i>	1	QL(30 ML daily)
<i>tramadol hcl TABS 25 MG, 75 MG, 100 MG</i>	NP		<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	QL(6 EA daily)
<i>tramadol hcl TABS 50 MG</i>	1	QL(8 EA daily)			
<i>tramadol hcl TB24</i>	1	PA			

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate</i> FILM SL 3 MG-12 MG	1	QL(2 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 0.5 MG-2 MG	1	QL(12 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 2 MG-8 MG	1	QL(3 EA daily)
<i>buprenorphine hcl</i> SUBL	1	PA
<i>buprenorphine</i> PTWK	1	PA
BUTRANS PTWK ( <i>buprenorphine</i> )	2	PA
SUBLOCADE SOSY	2	1 max fill(s) per 30 day(s) retail; SP
SUBOXONE FILM SL 2 MG-8 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	NP	QL(3 EA daily)
SUBOXONE FILM SL 1 MG-4 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	NP	QL(6 EA daily)
SUBOXONE FILM SL 3 MG-12 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	NP	QL(2 EA daily)
SUBOXONE FILM SL 0.5 MG-2 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	NP	QL(12 EA daily)
ZUBSOLV SUBL 0.18 MG-0.7 MG	2	QL(8 EA daily)
ZUBSOLV SUBL 1.4 MG-5.7 MG	2	QL(3 EA daily)
ZUBSOLV SUBL 2.1 MG-8.6 MG	2	QL(2 EA daily)
ZUBSOLV SUBL 0.71 MG-2.9 MG	2	QL(6 EA daily)
ZUBSOLV SUBL 0.36 MG-1.4 MG	2	QL(12 EA daily)
ZUBSOLV SUBL 2.9 MG-11.4 MG	2	QL(1.5 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
Androgens		
ANDROGEL PUMP GEL TD ( <i>testosterone</i> )	NP	PA
AVEED SOLN	2	SP; PA
FORTESTA GEL TD ( <i>testosterone</i> )	NP	PA
<i>methyltestosterone</i> TABS	1	
TESTOPEL PLLT	2	SP; PA
<i>testosterone cypionate</i> SOLN IM 200 MG/ML	1	QL(4 ML per 30 day(s) retail)
<i>testosterone</i> GEL TD 10 MG/ACT	NP	PA
<i>testosterone</i> GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 %	1	PA
<i>testosterone</i> GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM	1	
<i>testosterone</i> GEL TD 1 %	NP	
<i>testosterone</i> SOLN	1	PA
VOGELXO PUMP GEL TD ( <i>testosterone</i> )	NP	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>		
Intrarectal Steroids		
<i>hydrocortisone</i> (intrarectal)	1	QL(420 ML per fill retail)
Rectal Combinations		
HEMORRHOIDAL 0.25 %-85.5 %-3 %	2	QL(48 EA per fill retail)
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %	2	QL(12 GM per fill retail)
Rectal Local Anesthetics		
<i>pramoxine hcl</i> (rectal) FOAM EX	1	QL(15 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits
PROCTOFOAM FOAM EX 1 %	2	QL(15 GM per fill retail)
Rectal Steroids		
ANUSOL-HC EX (hydrocortisone (rectal))	2	QL(30 GM per fill retail)
hydrocortisone (rectal) EX 1 %	1	RX/OTC
hydrocortisone (rectal) EX 2.5 %	1	QL(30 GM per fill retail)
PREPARATION H EX 1 %	2	RX/OTC
PREPARATION H SOOTHING RELIEF EX 1 %	2	RX/OTC
<b>ANTACIDS</b>		
Antacid Combinations		
alum & mag hydrox-simethicone LIQD	1	QL(16.53 ML daily)
alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML	1	QL(16.53 ML daily)
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP	2	
Antacids - Bicarbonate		
sodium bicarbonate (antacid) TABS 325 MG, 650 MG	1	QL(16.53 EA daily)
Antacids - Calcium Salts		
calcium carbonate (antacid) CHEW 500 MG	1	
Antacids - Magnesium Salts		
magnesium oxide TABS 400 MG	1	
<b>ANTHELMINTICS - Drugs to Treat Worm</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Infections</b>		
Anthelmintics		
BENZNIDAZOLE	2	SP; PA
EMVERM CHEW	2	QL(1 EA per 14 day(s) retail)
ivermectin	1	
PIN RID CHEW	2	QL(4 EA per fill retail); 1 max fill(s) per 30 day(s) retail
pyrantel pamoate SUSP	1	QL(60 ML per fill retail); 1 max fill(s) per 30 day(s) retail
STROMEKTOL (ivermectin)	2	
<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
Antianginals-Other		
ASPRUZYO SPRINKLE PACK	NP	
ranolazine TB12	1	
Nitrates		
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	1	MP
isosorbide mononitrate TABS	1	QL(2 EA daily); MP
isosorbide mononitrate TB24	1	QL(1 EA daily); MP
NITRO-BID OINT	2	MP
nitroglycerin CPCR	1	MP
nitroglycerin OINT	1	MP
nitroglycerin PT24	1	MP
nitroglycerin SUBL	1	MP
<b>ANTIANSXIETY AGENTS - Drugs to Treat Anxiety</b>		
Antianxiety Agents - Misc.		
BUCAPSOL PO 7.5 MG, 10 MG, 15 MG	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>bupirone hcl</i>	1	MP
<i>droperidol SOLN 2.5 MG/ML</i>	1	
<i>hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML</i>	1	
<i>hydroxyzine hcl SYRP</i>	1	
<i>hydroxyzine hcl TABS</i>	1	MP
<i>hydroxyzine pamoate CAPS 50 MG</i>	1	MP
<i>hydroxyzine pamoate CAPS 25 MG, 100 MG</i>	1	
<i>meprobamate</i>	1	
<b>Benzodiazepines</b>		
ALPRAZOLAM INTENSOL CONC	NP	
<i>alprazolam TABS</i>	1	QL(4 EA daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam TBDP</i>	NP	
<i>chlordiazepoxide hcl CAPS</i>	1	QL(4 EA daily)
<i>clorazepate dipotassium TABS</i>	1	QL(3 EA daily)
<i>diazepam CONC</i>	NP	
<i>diazepam SOLN PO 5 MG/5ML</i>	1	QL(500 ML per fill retail)
<i>diazepam SOLN IJ 5 MG/ML</i>	NP	
<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML</i>	1	
DIAZEPAM SOLN IJ 5 MG/ML	1	
<i>diazepam TABS</i>	1	QL(4 EA daily)
<i>lorazepam CONC</i>	1	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	1	QL(4 EA daily)
LOREEV XR CS24	NP	
<i>oxazepam CAPS</i>	NP	QL(4 EA daily)
<b>ANTIARRHYTHMICS - Drugs to treat abnormal</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>heart rhythms</b>		
<b>Antiarrhythmics Type I-A</b>		
<i>disopyramide phosphate CAPS</i>	1	MP
NORPACE CAPS ( <i>disopyramide phosphate</i> )	2	MP
<i>quinidine gluconate TBCR</i>	1	MP
<i>quinidine sulfate TABS</i>	1	MP
<b>Antiarrhythmics Type I-C</b>		
<i>flecainide acetate</i>	1	MP
<i>propafenone hcl TABS</i>	1	MP
<b>Antiarrhythmics Type III</b>		
<i>amiodarone hcl TABS 200 MG</i>	1	MP
<i>dofetilide</i>	1	MP; PA
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
<b>Antiasthmatic - Monoclonal Antibodies</b>		
CINQAIR	NP	SP; PA
FASENRA PEN SOAJ	2	SP; PA
FASENRA SOSY 10 MG/0.5ML	2	SP; PA
NUCALA SOAJ	2	SP; PA
NUCALA SOLR	2	SP; PA
NUCALA SOSY	2	SP; PA
TEZSPIRE SOAJ	NP	SP; PA
TEZSPIRE SOSY	NP	SP; PA
XOLAIR SOAJ	2	SP; PA
XOLAIR SOLR	2	SP; PA
XOLAIR SOSY	2	SP; PA
<b>Anti-Inflammatory Agents</b>		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)
<b>Bronchodilators - Anticholinergics</b>		
ATROVENT HFA	2	QL(0.867 GM daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium bromide hfa</i> 17 MCG/ACT	1	QL(0.867 GM daily)	<i>fluticasone propionate hfa</i> 110 MCG/ACT, 220 MCG/ACT	1	QL(12 GM per 30 day(s) retail)
<i>ipratropium bromide SOLN</i> 0.02 %	1	QL(15 ML daily)	<i>fluticasone propionate hfa</i> 44 MCG/ACT	1	QL(11 GM per 30 day(s) retail)
SPIRIVA HANDIHALER CAPS IN ( <i>tiotropium bromide</i> )	2		PULMICORT FLEXHALER AEPB	2	QL(1 EA per 25 day(s) retail)
<i>tiotropium bromide CAPS IN</i> 18 MCG	NP		PULMICORT FLEXHALER AEPB	2	QL(1 EA per 25 day(s) retail)
Leukotriene Modulators			Sympathomimetics		
<i>montelukast sodium CHEW</i>	1	QL(1 EA daily); MP	ADVAIR DISKUS AEPB ( <i>fluticasone-salmeterol</i> )	2	QL(2 EA daily)
<i>montelukast sodium PACK</i>	1	QL(1 EA daily)	ADVAIR HFA AERO ( <i>fluticasone-salmeterol</i> )	2	
<i>montelukast sodium TABS</i>	1	QL(1 EA daily); MP	AIRDUO DIGIHALER	NP	
<i>zafirlukast</i>	1		AIRSUPRA	NP	
<i>zileuton TB12</i>	NP		<i>albuterol sulfate AERS</i>	NP	Limit 2 inhalers per month; QL(1.2 GM daily)
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors			<i>albuterol sulfate AERS</i>	0	Limit 2 inhalers per month; QL(0.57 GM daily)
OHTUVAYRE	NP	SP	<i>albuterol sulfate AERS</i>	0	Limit 2 inhalers per month; QL(0.45 GM daily)
Steroid Inhalants			<i>albuterol sulfate NEBU</i> 0.083 %	1	QL(375 ML per 25 day(s) retail)
ARMONAIR DIGIHALER	NP		<i>albuterol sulfate NEBU</i> 0.63 MG/3ML, 1.25 MG/3ML	1	QL(375 ML per 30 day(s) retail)
ASMANEX (120 METERED DOSES) AEPB	2		<i>albuterol sulfate NEBU</i>	1	QL(2 EA daily)
ASMANEX (14 METERED DOSES) AEPB	2		ALBUTEROL SULFATE NEBU	2	QL(2 ML daily)
ASMANEX (30 METERED DOSES) AEPB	2		<i>albuterol sulfate SYRP</i>	1	MP
ASMANEX (60 METERED DOSES) AEPB	2		<i>albuterol sulfate TABS</i>	1	
<i>beclomethasone dipropionate</i> 40 MCG/ACT, 80 MCG/ACT	NP		BEVESPI AEROSPHERE	NP	
<i>budesonide (inhalation) SUSP</i>	1	QL(4 ML daily); AL(At least 1 yrs old - Up to 8 yrs old)	BREO ELLIPTA	2	
<i>fluticasone propionate (inhalation) AEPB</i>	1	QL(2 EA daily)	BREZTRI AEROSPHERE	NP	
			<i>budesonide-formoterol fumarate dihydrate</i>	NP	QL(11 GM per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMBIVENT RESPIMAT AERS	2	QL(4 GM per 30 day(s) retail)	THEO-24 CP24 200 MG, 300 MG, 400 MG	2	
DULERA 50 MCG/ACT-5 MCG/ACT	2		THEO-24 CP24 100 MG	2	MP
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	2	QL(13 GM per 30 day(s) retail)	<i>theophylline ELIX</i>	1	
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	QL(2 EA daily)	<i>theophylline SOLN</i>	1	QL(475 ML per fill retail); MP
<i>fluticasone-salmeterol AERO</i>	NP		<i>theophylline TB12 450 MG</i>	1	
<i>ipratropium-albuterol SOLN</i>	1	QL(12 ML daily)	<i>theophylline TB12 100 MG, 200 MG, 300 MG</i>	1	MP
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	NP		<i>theophylline TB24</i>	1	MP
<i>levalbuterol hcl</i>	1		<b>ANTICOAGULANTS - Blood Thinners</b>		
<i>levalbuterol tartrate</i>	1		Coumarin Anticoagulants		
PROAIR DIGIHALER	NP		<i>warfarin sodium TABS</i>	1	MP
PROVENTIL HFA AERS ( <i>albuterol sulfate</i> )	0	Limit 2 inhalers per month; QL(0.45 GM daily)	Direct Factor Xa Inhibitors		
SEREVENT DISKUS	2	QL(2 EA daily)	ELIQUIS (1.5 MG PACK) TBSO PO	2	
STIOLTO RESPIMAT	2		ELIQUIS (2 MG PACK) TBSO PO	2	
SYMBICORT ( <i>budesonide-formoterol fumarate dihydrate</i> )	2	QL(11 GM per 30 day(s) retail)	ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(4 EA daily)
<i>terbutaline sulfate TABS</i>	1	MP	ELIQUIS CPSP PO 0.15 MG	2	
VENTOLIN HFA AERS ( <i>albuterol sulfate</i> )	0	Limit 2 inhalers per month; QL(0.54 GM daily)	ELIQUIS TABS	2	QL(4 EA daily)
VENTOLIN HFA AERS ( <i>albuterol sulfate</i> )	0	Limit 2 inhalers per month; QL(1.2 GM daily)	ELIQUIS TBSO PO 0.5 MG	2	
XOPENEX HFA ( <i>levalbuterol tartrate</i> )	2		<i>rivaroxaban SUSR 1 MG/ML</i>	NP	
Xanthines			<i>rivaroxaban TABS 2.5 MG</i>	NP	
			XARELTO STARTER PACK TBPK	2	
			XARELTO SUSR 1 MG/ML ( <i>rivaroxaban</i> )	2	
			XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)
			XARELTO TABS 15 MG	2	QL(2 EA daily)
			XARELTO TABS 2.5 MG ( <i>rivaroxaban</i> )	2	
			Heparins And Heparinoid-Like Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	1	QL(180 ML per 30 day(s) retail)	VALTOCO 5 MG DOSE LIQD	2	QL(10 EA per 30 day(s) retail)
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	1	QL(60 ML per 30 day(s) retail)	Anticonvulsants - Misc.		
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	1	QL(18 ML per 30 day(s) retail)	<i>brivaracetam SOLN IV 50 MG/5ML</i>	1	SP; PA
<i>enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML</i>	1	QL(36 ML per 30 day(s) retail)	<i>carbamazepine CHEW 200 MG</i>	1	
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	1	QL(48 ML per 30 day(s) retail)	<i>carbamazepine CHEW 100 MG</i>	1	MP
<i>fondaparinux sodium</i>	1	PA	<i>carbamazepine CP12</i>	1	MP
FRAGMIN SOLN 10000 UNIT/4ML	NP	SP	<i>carbamazepine SUSP</i>	1	MP
<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1		<i>carbamazepine TABS</i>	1	MP
Thrombin Inhibitors			<i>carbamazepine TB12</i>	1	MP
<i>dabigatran etexilate mesylate CAPS</i>	1		CARBATROL CP12 ( <i>carbamazepine</i> )	NP	MP
PRADAXA CAPS ( <i>dabigatran etexilate mesylate</i> )	NP		ELEPSIA XR TB24	NP	
PRADAXA PACK	NP	SP	EPRONTIA SOLN 25 MG/ML ( <i>topiramate</i> )	NP	
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>			<i>gabapentin CAPS 300 MG, 400 MG</i>	1	MP
Anticonvulsants - Benzodiazepines			<i>gabapentin CAPS 100 MG</i>	1	QL(9 EA daily); MP
<i>clobazam SUSP</i>	1		<i>gabapentin SOLN</i>	1	MP
<i>clobazam TABS</i>	1		<i>gabapentin TABS 600 MG, 800 MG</i>	1	MP
<i>clonazepam TABS</i>	1	QL(4 EA daily)	LAMICTAL ODT KIT ( <i>lamotrigine</i> )	NP	
<i>clonazepam TBDP</i>	1		LAMICTAL STARTER KIT 25 MG ( <i>lamotrigine</i> )	NP	
LIBERVANT FILM	NP		<i>lamotrigine CHEW</i>	1	MP
VALTOCO 10 MG DOSE LIQD	2	QL(10 EA per 30 day(s) retail)	<i>lamotrigine KIT 25 MG</i>	NP	
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	2	QL(10 EA per 30 day(s) retail)	<i>lamotrigine TABS</i>	1	MP
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	2	QL(10 EA per 30 day(s) retail)	<i>lamotrigine TB24</i>	1	
			<i>lamotrigine TBDP</i>	1	
			<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	1	QL(30 ML daily); MP
			<i>levetiracetam TABS</i>	1	MP
			<i>levetiracetam TB24</i>	1	MP
			MOTPOLY XR CP24	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine SUSP</i>	1	MP
<i>oxcarbazepine TABS</i>	1	MP
<i>pregabalin CAPS</i>	1	PA
<i>pregabalin SOLN</i>	1	PA
<i>primidone 50 MG, 250 MG</i>	1	MP
<i>primidone 125 MG</i>	1	
<i>rufinamide SUSP</i>	1	SP
SUBVENITE SUSP PO 10 MG/ML	NP	
TEGRETOL-XR TB12 ( <i>carbamazepine</i> )	2	MP
TOPAMAX SPRINKLE CPSP ( <i>topiramate</i> )	NP	MP
<i>topiramate CPSP 15 MG, 25 MG</i>	1	MP
<i>topiramate CPSP 50 MG</i>	1	
<i>topiramate SOLN 25 MG/ML</i>	1	
<i>topiramate TABS 25 MG</i>	1	QL(6 EA daily); MP
<i>topiramate TABS 50 MG, 100 MG, 200 MG</i>	1	MP
TRILEPTAL SUSP ( <i>oxcarbazepine</i> )	NP	MP
ZONISADE SUSP	NP	
<i>zonisamide CAPS</i>	1	MP
ZTALMY	NP	
Carbamates		
<i>felbamate SUSP</i>	1	
<i>felbamate TABS</i>	1	
XCOPRI (250 MG DAILY DOSE) TBPk	NP	
XCOPRI TABS	NP	
GABA Modulators		
SABRIL PACK ( <i>vigabatrin</i> )	2	SP; PA
SABRIL TABS ( <i>vigabatrin</i> )	2	SP; PA
<i>tiagabine hcl 2 MG, 4 MG</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>tiagabine hcl 12 MG, 16 MG</i>	1	
<i>vigabatrin PACK</i>	NP	SP; PA
<i>vigabatrin TABS</i>	NP	SP; PA
VIGAFYDE SOLN	NP	SP
Hydantoins		
DILANTIN ( <i>phenytoin sodium extended</i> )	NP	MP
DILANTIN INFATABS CHEW ( <i>phenytoin</i> )	2	MP
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1	MP
<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP	MP
<i>phenytoin CHEW</i>	1	MP
<i>phenytoin SUSP</i>	1	MP
Succinimides		
CELONTIN ( <i>methsuximide</i> )	2	
<i>ethosuximide CAPS</i>	1	MP
<i>ethosuximide SOLN</i>	1	MP
<i>methsuximide</i>	NP	
Valproic Acid		
DEPAKOTE SPRINKLES CSDR ( <i>divalproex sodium</i> )	2	MP
<i>divalproex sodium CSDR</i>	NP	MP
<i>divalproex sodium TB24</i>	1	MP
<i>divalproex sodium TBEC</i>	1	MP
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1	MP
<i>valproic acid CAPS</i>	1	MP
<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>mirtazapine TBDP</i>	1	
<b>Antidepressant Combinations</b>		
AUVELITY	NP	
<b>Antidepressants - Misc.</b>		
<i>bupropion hcl TABS</i>	1	MP
<i>bupropion hcl TB12 150 MG</i>	1	QL(3 EA daily); MP
<i>bupropion hcl TB12 100 MG</i>	1	QL(4 EA daily); MP
<i>bupropion hcl TB12 200 MG</i>	1	QL(2 EA daily); MP
<i>bupropion hcl TB24 300 MG</i>	1	QL(1 EA daily); MP
<i>bupropion hcl TB24 150 MG</i>	1	QL(3 EA daily); MP
<i>bupropion hcl TB24 450 MG</i>	2	
FORFIVO XL TB24 ( <i>bupropion hcl</i> )	NP	
<b>GABA Receptor Modulator - Neuroactive Steroid</b>		
ZULRESSO	2	SP; PA
ZURZUVAE	NP	SP
<b>Monoamine Oxidase Inhibitors (MAOIs)</b>		
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
<b>Selective Serotonin Reuptake Inhibitors (SSRIs)</b>		
<i>citalopram hydrobromide CAPS 30 MG</i>	NP	
CITALOPRAM HYDROBROMIDE CAPS 30 MG ( <i>citalopram hydrobromide</i> )	NP	
<i>citalopram hydrobromide SOLN</i>	NP	
<i>citalopram hydrobromide TABS</i>	1	MP
<i>escitalopram oxalate SOLN</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate TABS</i>	1	MP
<i>fluoxetine hcl CAPS</i>	1	MP
<i>fluoxetine hcl CPDR</i>	NP	
<i>fluoxetine hcl SOLN</i>	1	
<i>fluoxetine hcl TABS 60 MG</i>	1	
<i>fluoxetine hcl TABS 10 MG</i>	1	AL(At least 7 yrs old); MP
<i>fluoxetine hcl TABS 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)
FLUOXETINE HCL TABS ( <i>fluoxetine hcl</i> )	NP	
<i>fluvoxamine maleate CP24</i>	NP	
<i>fluvoxamine maleate TABS</i>	1	
<i>paroxetine hcl TABS</i>	1	MP
<i>paroxetine hcl TB24</i>	1	
<i>sertraline hcl CAPS 150 MG, 200 MG</i>	NP	PA
SERTRALINE HCL CAPS 150 MG, 200 MG ( <i>sertraline hcl</i> )	NP	PA
<i>sertraline hcl CONC</i>	NP	
<i>sertraline hcl TABS</i>	1	MP
ZOLOFT CONC ( <i>sertraline hcl</i> )	NP	
<b>Serotonin Modulators</b>		
<i>nefazodone hcl</i>	1	
RALDESY SOLN PO 10 MG/ML	NP	
<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	1	MP
<i>trazodone hcl TABS 300 MG</i>	1	
<b>Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)</b>		

Drug Name	Drug Tier	Requirements/Limits
CYMBALTA CPEP 20 MG, 30 MG ( <i>duloxetine hcl</i> )	NP	QL(1 EA daily); AL(At least 7 yrs old); MP
CYMBALTA CPEP 60 MG ( <i>duloxetine hcl</i> )	NP	QL(2 EA daily); AL(At least 7 yrs old); MP
DESVENLAFAXINE ER	2	
<i>desvenlafaxine succinate 100 MG</i>	1	QL(4 EA daily); MP
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1	QL(1 EA daily); MP
<i>duloxetine hcl CPEP 20 MG, 30 MG, 40 MG</i>	1	QL(1 EA daily); AL(At least 7 yrs old); MP
<i>duloxetine hcl CPEP 60 MG</i>	1	QL(2 EA daily); AL(At least 7 yrs old); MP
VENLAFAXINE BESYLATE ER	NP	
<i>venlafaxine hcl CP24 37.5 MG</i>	1	QL(4 EA daily); MP
<i>venlafaxine hcl CP24 150 MG</i>	1	QL(2 EA daily); MP
<i>venlafaxine hcl CP24 75 MG</i>	1	QL(5 EA daily); MP
<i>venlafaxine hcl TABS</i>	1	MP
<i>venlafaxine hcl TB24</i>	1	QL(1 EA daily)
Tricyclic Agents		
<i>amitriptyline hcl TABS</i>	1	MP
<i>amoxapine</i>	1	
<i>clomipramine hcl</i>	1	
<i>desipramine hcl TABS</i>	1	
<i>doxepin hcl CAPS 150 MG</i>	1	
<i>doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG</i>	1	MP
<i>doxepin hcl CONC</i>	1	
<i>imipramine hcl TABS</i>	1	
<i>imipramine pamoate</i>	1	
<i>nortriptyline hcl CAPS</i>	1	
<i>nortriptyline hcl SOLN</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>protriptyline hcl</i>	1	
<i>trimipramine maleate CAPS</i>	1	
<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1	
<i>miglitol</i>	1	
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	NP	QL(2 EA daily); MP
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	NP	QL(1 EA daily); MP
DUETACT ( <i>pioglitazone hcl-glimepiride</i> )	NP	
<i>glipizide-metformin hcl</i>	1	MP
<i>glyburide-metformin</i>	1	MP
GLYXAMBI	2	
JANUMET XR TB24	2	
JANUMET TABS	2	
JENTADUETO TABS	2	QL(2 EA daily); AL(At least 18 yrs old); MP
<i>pioglitazone hcl-glimepiride</i>	NP	
<i>pioglitazone hcl-metformin hcl TABS</i>	1	QL(2 EA daily); MP
<i>saxagliptin-metformin hcl</i>	NP	
<i>sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG</i>	NP	
ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG ( <i>sitagliptin free base-metformin hcl</i> )	NP	
Biguanides		
GLUMETZA TB24 ( <i>metformin hcl</i> )	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl SOLN</i>	1		BRYNOVIN SOLN PO 25 MG/ML	NP	
<i>metformin hcl TABS 625 MG</i>	NP		JANUVIA	2	
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	1	MP	ONGLYZA 5 MG ( <i>saxagliptin hcl</i> )	NP	
<i>metformin hcl TABS 750 MG</i>	1		<i>saxagliptin hcl</i>	1	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP		<i>sitagliptin 25 MG, 50 MG, 100 MG</i>	NP	
<i>metformin hcl TB24 500 MG, 750 MG</i>	1	MP	TRADJENTA	2	QL(1 EA daily); AL(At least 18 yrs old); MP
Diabetic Other			ZITUVIO 25 MG, 50 MG, 100 MG ( <i>sitagliptin</i> )	NP	
BAQSIMI ONE PACK POWD	2	QL(0.069 EA daily)	Incretin Mimetic Agents		
BAQSIMI TWO PACK POWD	2	QL(0.069 EA daily)	<i>exenatide SOPN 5 MCG/0.02ML</i>	1	QL(1.2 ML per 30 day(s) retail); AL(At least 18 yrs old); PA
BD GLUCOSE CHEW	2	QL(1.67 EA daily); MP	<i>exenatide SOPN 10 MCG/0.04ML</i>	1	QL(2.4 ML per 30 day(s) retail); AL(At least 18 yrs old); PA
<i>dextrose (diabetic use) CHEW 4 GM</i>	1	QL(1.67 EA daily); MP	<i>liraglutide</i>	NP	QL(0.3 ML daily); PA
<i>diazoxide</i>	NP		MOUNJARO	NP	PA
GLUCAGON EMERGENCY SOLR IJ 1 MG ( <i>glucagon</i> )	2	QL(1 EA per fill retail); MP	OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	PA
<i>glucagon SOLR IJ 1 MG</i>	1	QL(1 EA per fill retail); MP	OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	PA
GVOKE KIT SOLN	NP		OZEMPIC (2 MG/DOSE) SOPN	2	PA
<i>mifepristone (hyperglycemia)</i>	1	SP; PA	RYBELSUS TABS	NP	PA
PROGLYCEM ( <i>diazoxide</i> )	2		TRULICITY	2	PA
TRUEPLUS GLUCOSE ON THE GO CHEW	2	QL(1.67 EA daily); MP	VICTOZA ( <i>liraglutide</i> )	2	QL(0.3 ML daily); PA
TRUEPLUS GLUCOSE CHEW	2	QL(1.67 EA daily); MP	Insulin		
ZEGALOGUE SOAJ	2		BASAGLAR TEMPO PEN SOPN	NP	
ZEGALOGUE SOSY	2		HUMALOG JUNIOR KWIKPEN SOPN	NP	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors					
<i>alogliptin benzoate</i>	NP	QL(1 EA daily); MP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMALOG KWIKPEN SOPN 100 UNIT/ML	NP	QL(30 ML per 30 day(s) retail)	LEVEMIR FLEXPEN SOPN	NP	
HUMALOG MIX 50/50 KWIKPEN SUPN	NP	QL(30 ML per 30 day(s) retail)	LEVEMIR SOLN	NP	
HUMALOG MIX 50/50 SUSP	2	QL(40 ML per 30 day(s) retail)	LYUMJEV TEMPO PEN SOPN	NP	
HUMALOG MIX 75/25 KWIKPEN SUPN	NP	QL(30 ML per 30 day(s) retail)	MERILOG SOLOSTAR SOPN SC 100 UNIT/ML	NP	
HUMALOG MIX 75/25 SUSP	NP	QL(40 ML per 30 day(s) retail)	MERILOG SOLN SC 100 UNIT/ML	NP	
HUMALOG TEMPO PEN SOPN	NP		NOVOLOG 70/30 FLEXPEN RELION SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMALOG SOLN IJ	NP	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 FLEXPEN SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMULIN 70/30 SUSP	2	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 RELION SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMULIN N SUSP	2	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2		REZVOGLAR KWIKPEN	NP	
HUMULIN R U-500 KWIKPEN SOPN SC	2		SEMGLEE (YFGN) SOLN	NP	
HUMULIN R SOLN IJ	2	QL(40 ML per 30 day(s) retail)	SEMGLEE (YFGN) SOPN	NP	
INSULIN GLARGINE-YFGN SOLN	2	Generic for Semglee	Insulin Sensitizing Agents		
INSULIN GLARGINE-YFGN SOPN	2	Generic for Semglee	<i>pioglitazone hcl</i>	1	QL(1 EA daily); MP
INSULIN GLARGINE-YFGN SOPN	2		Meglitinide Analogues		
INSULIN LISPRO (1 UNIT DIAL) SOPN	2	QL(30 ML per 30 day(s) retail)	<i>nateglinide</i>	1	QL(3 EA daily); MP
INSULIN LISPRO JUNIOR KWIKPEN SOPN	2		<i>repaglinide</i>	1	
INSULIN LISPRO PROT & LISPRO SUPN	2	QL(30 ML per 30 day(s) retail)	Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
INSULIN LISPRO SOLN IJ	2	QL(40 ML per 30 day(s) retail)	INVOKANA	NP	MP
KIRSTY SOLN IJ 100 UNIT/ML	NP		JARDIANCE	2	QL(1 EA daily)
KIRSTY SOPN SC 100 UNIT/ML	NP		Sulfonylureas		
			<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily); MP
			<i>glimepiride 4 MG</i>	1	QL(2 EA daily); MP
			<i>glimepiride 3 MG</i>	1	
			<i>glipizide TABS 5 MG, 10 MG</i>	1	MP
			<i>glipizide TABS 2.5 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>glipizide TB24</i>	1	MP	MICROFLOR 33 CAPS	2	RX/OTC
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	MP	MICROVARA CPDR	2	RX/OTC
<i>glyburide TABS</i>	1	MP	MVW COMPL FORM PROBIOTIC-KIDS CPDR	2	RX/OTC
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea</b>			NEXIVA CAPS	2	RX/OTC
Antidiarrheal/Probiotic Agents - Misc.			PROBENTRA CPDR	2	RX/OTC
BILAC CAPS	2	RX/OTC	PROBINATE CAPS	2	RX/OTC
BIOCORE DAILY CAPS	2	RX/OTC	<i>probiotic product CAPS</i> 1.7 MG-2.4 MCG, 10 MCG-60 MG-10 MG-250 MG, 12 MG, 133 MG, 140 MG-133 MG, 15 MG, 150 MG-50 MG, 174 MG-50 MG-174 MG-174 MG-250 MG, 2 MG-12 MG-80 MG-2 MG-3 MG-2 MG-1.5 MG-7.5 MG-3 MG-2 MG, 2 MG-12.5 MCG, 2.5 MG-0.5 MG-1 MG-50 MG-16 MG, 20 MG-3 MG-500 MG, 250 MG, 30 MG-250 MG, 300 MG-250 MG, 33 MG, 40 MG-400 MG-64 MG, 42 MG-425 MG-62 MG-120 MG, 5 MG, 50 MG, 57 MG, 6 MG, 60 MG-10 MCG-10 MG-250 MG, 67 MG, 8 MG-5 MG-240 MG-70 MG, 90 MG-1.7 MG-30 MCG-4 MCG, 10 MG, 25 MG, 170 MG, 400 MG	1	RX/OTC
BIOCORE IMMUNE+ CAPS	2	RX/OTC	<i>probiotic product CPDR</i> 50 MG	1	RX/OTC
BIOCORE RESTORE CAPS	2	RX/OTC	PROMELLA IN PREBIOTIC CAPS	2	RX/OTC
BIONARA ULTRA CPDR	2	RX/OTC	PRORIVA CAPS	2	RX/OTC
BIOSTORA CAPS	2	RX/OTC	RELIBIOTIC CAPS	2	RX/OTC
<i>bismuth subsalicylate CHEW 262 MG</i>	1		SM ADVANCED PROBIOTIC CAPS	2	RX/OTC
<i>bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML</i>	1		SUREBIOTIC PROBIOTIC SUPPORT CAPS	2	RX/OTC
CULTURELLE KIDS PURELY CHEW	2		UP4 PROBIOTICS ADULT CAPS	2	RX/OTC
CULTURELLE KIDS CHEW	2		WELLPRO 31 CAPS	2	RX/OTC
DERMACINRX PROBISOL CAPS	2	RX/OTC			
DERMACINRX PROBITRAN CAPS	2	RX/OTC			
FLORRAGUT CAPS	2	RX/OTC			
FLORRAXIS CAPS	2	RX/OTC			
HIGH POTENCY PROBIOTIC CAPS	2	RX/OTC			
LACTEROL CAPS	2	RX/OTC			
<i>lactobacillus rhamnosus (gg) PACK 23 MG, 5 B CELL, 5 B CELL</i>	1				
LACTOVIVE CAPS	2	RX/OTC			
MICROBALANCE CAPS	2	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
XYBIOTIC CAPS	2	RX/OTC
ZELAC CAPS	2	RX/OTC
Antidiarrheal/Probiotic Combinations		
CULTURELLE DIGESTIVE DAILY CAPS	2	
<i>lactobacillus-inulin CAPS 200 MG, 200 MG-10 B CELL, 200 MG-10 BILLION, 200 MG-12 BILLION, 200 MG-20 B CELL, 200 MG-20 BILLION, 3 MG-200 MG</i>	1	
<i>lactobacillus-inulin CHEW 200 MG-10 BILLION, 350 MG-1 GM</i>	1	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1	
<i>diphenoxylate w/ atropine TABS</i>	1	
<i>loperamide hcl CAPS</i>	1	QL(8 EA daily); RX/OTC
<i>loperamide hcl TABS</i>	1	QL(8 EA daily)
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
Antidotes - Chelating Agents		
CHEMET	2	
<i>deferasirox PACK</i>	1	SP; PA
<i>deferasirox TABS</i>	1	SP; PA
<i>deferasirox TBSO</i>	1	SP; PA
<i>deferiprone TABS</i>	1	SP; PA
FERRIPROX SOLN	2	SP; PA
Antidotes and Specific Antagonists		
ANDEXXA 200 MG	2	SP; PA
BRIDION SOLN	2	PA
<i>deferoxamine mesylate</i>	1	SP; PA
SM IPECAC SYRUP	2	
VISTOGARD	2	
Opioid Antagonists		

Drug Name	Drug Tier	Requirements/Limits
KLOXXADO LIQD	0	QL(18 EA per 90 day(s) retail); MP
<i>naloxone hcl LIQD</i>	0	QL(18 EA per 90 day(s) retail); MP; RX/OTC
<i>naloxone hcl SOCT</i>	0	QL(18 ML per 90 day(s) retail); MP
<i>naloxone hcl SOLN 0.4 MG/ML</i>	0	QL(18 ML per 90 day(s) retail); MP
<i>naloxone hcl SOLN 4 MG/10ML</i>	0	QL(180 ML per 90 day(s) retail); MP
<i>naloxone hcl SOSY 2 MG/2ML</i>	0	QL(18 ML per 90 day(s) retail); MP
<i>naloxone hcl SOSY 0.4 MG/ML</i>	1	
<i>naltrexone hcl</i>	0	MP
NARCAN LIQD ( <i>naloxone hcl</i> )	0	QL(18 EA per 90 day(s) retail); MP; RX/OTC
OPVEE NA	0	QL(6 EA per 30 day(s) retail); MP
REXTOVY LIQD	2	
VIVITROL	0	SP; MP
ZIMHI SOSY	0	QL(9 ML per 90 day(s) retail); MP
ZURNAI IJ 1.5 MG/0.5ML	2	
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
5-HT3 Receptor Antagonists		
<i>granisetron hcl TABS</i>	1	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	QL(50 ML per fill retail)
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	1	QL(2 EA daily)
<i>ondansetron TBDP 16 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(2 EA daily)
Antiemetics - Anticholinergic		
ANTIVERT CHEW 25 MG	2	RX/OTC
<i>meclizine hcl CHEW</i>	1	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC
Antiemetics - Miscellaneous		
BONJESTA TBCR	2	
<i>doxylamine-pyridoxine TBEC</i>	1	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
APONVIE EMUL	NP	
<i>aprepitant CAPS</i>	1	
<i>aprepitant CPPK PO</i>	1	
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		
Antifungals		
<i>griseofulvin microsize SUSP</i>	1	
<i>griseofulvin microsize TABS</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>nystatin TABS</i>	1	QL(6 EA daily)
<i>terbinafine hcl TABS</i>	1	QL(1 EA daily; 90 EA per 120 day(s) retail)
Imidazole-Related Antifungals		
<i>fluconazole SUSR</i>	1	QL(70 ML per fill retail)
<i>fluconazole TABS 50 MG</i>	1	QL(7 EA per fill retail)
<i>fluconazole TABS 200 MG</i>	1	
<i>fluconazole TABS 150 MG</i>	1	QL(2 EA daily)
<i>fluconazole TABS 100 MG</i>	1	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>itraconazole CAPS</i>	1	QL(1 EA daily); PA
<i>itraconazole SOLN</i>	1	PA
<b>ANTIHISTAMINES - Drugs to Treat Allergies</b>		
Antihistamines - Alkylamines		
<i>chlorpheniramine maleate SYRP</i>	1	QL(60 ML daily)
<i>chlorpheniramine maleate TABS</i>	1	QL(120 EA per fill retail)
<i>dexchlorpheniramine maleate SOLN</i>	1	
Antihistamines - Ethanolamines		
BENADRYL ALLERGY EXTRA STR TABS	2	QL(4 EA daily)
DAYHIST ALLERGY 12 HOUR RELIEF TABS	2	QL(2 EA daily)
<i>diphenhydramine hcl CAPS</i>	1	QL(4 EA daily)
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1	QL(240 ML per fill retail)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1	QL(240 ML per fill retail)
<i>diphenhydramine hcl TABS 25 MG</i>	1	QL(4 EA daily)
Antihistamines - Non-Sedating		
<i>cetirizine hcl CAPS</i>	1	
<i>cetirizine hcl CHEW</i>	1	QL(1 EA daily)
<i>cetirizine hcl SOLN PO</i>	1	QL(240 ML per fill retail); RX/OTC
<i>cetirizine hcl SYRP PO 1 MG/ML</i>	1	QL(240 ML per fill retail); RX/OTC
<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)
<i>desloratadine TBDP</i>	NP	
<i>fexofenadine hcl SUSP</i>	1	
<i>fexofenadine hcl TABS 180 MG</i>	1	QL(1 EA daily)
<i>fexofenadine hcl TABS 60 MG</i>	1	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>levocetirizine dihydrochloride SOLN</i>	1	RX/OTC	<b>Fibric Acid Derivatives</b>		
<i>loratadine CAPS</i>	1		<i>fenofibrate micronized 67 MG</i>	1	QL(2 EA daily); MP
<i>loratadine CHEW</i>	1		<i>fenofibrate micronized 134 MG, 200 MG</i>	1	QL(1 EA daily); MP
<i>loratadine SOLN</i>	1	QL(240 ML per fill retail)	<i>fenofibrate micronized 30 MG, 43 MG, 130 MG</i>	1	
<i>loratadine TABS</i>	1		<i>fenofibrate CAPS</i>	2	MP
<i>loratadine TBDP 10 MG</i>	1		<i>fenofibrate TABS 54 MG</i>	1	QL(3 EA daily); MP
XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML	2	RX/OTC	<i>fenofibrate TABS 40 MG, 120 MG</i>	NP	
<b>Antihistamines - Phenothiazines</b>			<i>fenofibric acid</i>	NP	
<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	1	QL(240 ML per fill retail); AL(At least 2 yrs old)	FENOGLIDE TABS ( <i>fenofibrate</i> )	NP	
<i>promethazine hcl SUPP</i>	1	QL(12 EA per fill retail); AL(At least 2 yrs old)	FIBRICOR ( <i>fenofibric acid</i> )	NP	
<i>promethazine hcl TABS</i>	1	AL(At least 2 yrs old)	<i>gemfibrozil TABS</i>	1	QL(2 EA daily); MP
<b>Antihistamines - Piperidines</b>			LIPOFEN CAPS ( <i>fenofibrate</i> )	NP	MP
<i>cyproheptadine hcl SYRP</i>	1		<b>HMG CoA Reductase Inhibitors</b>		
<i>cyproheptadine hcl TABS</i>	1		ATORVALIQ SUSP	NP	
<b>ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol</b>			<i>atorvastatin calcium TABS</i>	1	QL(1 EA daily); MP
<b>Antihyperlipidemics - Combinations</b>			<i>fluvastatin sodium CAPS</i>	NP	
<i>ezetimibe-simvastatin</i>	1		<i>fluvastatin sodium TB24</i>	NP	
<b>Antihyperlipidemics - Misc.</b>			LESCOL XL TB24 ( <i>fluvastatin sodium</i> )	NP	
<i>omega-3-acid ethyl esters</i>	1		<i>lovastatin TABS 10 MG, 20 MG</i>	1	QL(1 EA daily); MP
<b>Bile Acid Sequestrants</b>			<i>lovastatin TABS 40 MG</i>	1	QL(2 EA daily); MP
<i>cholestyramine light PACK</i>	1	MP	<i>pravastatin sodium</i>	1	QL(1 EA daily); MP
<i>cholestyramine light POWD</i>	1	MP	<i>rosuvastatin calcium TABS</i>	1	QL(1 EA daily); MP
<i>cholestyramine PACK</i>	1	MP	<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	1	QL(1 EA daily); MP
<i>cholestyramine POWD</i>	1	MP	<i>simvastatin TABS 80 MG</i>	1	MP
<i>colestipol hcl GRAN</i>	1	MP	<b>Intestinal Cholesterol Absorption Inhibitors</b>		
<i>colestipol hcl TABS</i>	1	MP			

Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe</i>	1	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	2	SP; PA
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1	MP
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LEQVIO	NP	SP; PA
PRALUENT SOAJ	2	SP; PA
REPATHA PUSHTRONEX SYSTEM SOCT	2	SP; PA
REPATHA SURECLICK SOAJ	2	SP; PA
REPATHA SOSY	2	SP; PA
<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>		
ACE Inhibitors		
<i>benazepril hcl 40 MG</i>	1	QL(2 EA daily); MP
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	1	QL(1 EA daily); MP
<i>captopril</i>	1	QL(3 EA daily); MP
<i>enalapril maleate TABS</i>	1	QL(2 EA daily); MP
<i>fosinopril sodium</i>	1	QL(1 EA daily); MP
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	MP
<i>moexipril hcl</i>	NP	
<i>perindopril erbumine</i>	NP	
<i>quinapril hcl</i>	1	QL(1 EA daily); MP
<i>ramipril CAPS</i>	1	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
<i>trandolapril 4 MG</i>	1	QL(2 EA daily); MP
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily); MP
Agents for Pheochromocytoma		
<i>metyrosine</i>	1	SP; PA
Angiotensin II Receptor Antagonists		
ARB LI PO 10 MG/ML	NP	
<i>candesartan cilexetil</i>	1	
<i>irbesartan</i>	1	QL(1 EA daily); MP
<i>losartan potassium</i>	1	QL(1 EA daily); MP
<i>olmesartan medoxomil</i>	1	
<i>telmisartan</i>	1	
<i>valsartan SOLN</i>	NP	
<i>valsartan TABS</i>	1	QL(1 EA daily); MP
Antiadrenergic Antihypertensives		
<i>clonidine hcl TABS</i>	1	MP
<i>doxazosin mesylate</i>	1	MP
<i>guanfacine hcl</i>	1	MP
<i>methyldopa TABS</i>	1	MP
<i>prazosin hcl CAPS</i>	1	MP
<i>terazosin hcl</i>	1	MP
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG ( <i>quinapril-hydrochlorothiazide</i> )	NP	QL(3 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1	QL(1 EA daily); MP
<i>amlodipine besylate-olmesartan medoxomil</i>	1	
<i>amlodipine besylate-valsartan</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	
<i>atenolol &amp; chlorthalidone</i>	1	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>benazepril &amp; hydrochlorothiazide</i>	1	QL(1 EA daily); MP	Antihypertensives - Misc.		
<i>bisoprolol &amp; hydrochlorothiazide</i>	1	QL(1 EA daily); MP	VECAMYL	2	SP; PA
<i>candesartan cilexetil-hydrochlorothiazide</i>	1		Vasodilators		
<i>captopril &amp; hydrochlorothiazide</i>	NP	QL(2 EA daily); MP	<i>hydralazine hcl TABS</i>	1	MP
<i>enalapril maleate &amp; hydrochlorothiazide</i>	1	QL(2 EA daily); MP	<i>minoxidil 2.5 MG, 10 MG</i>	1	MP
EXFORGE HCT ( <i>amlodipine-valsartan-hydrochlorothiazide</i> )	NP		<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>		
<i>fosinopril sodium &amp; hydrochlorothiazide</i>	NP	QL(1 EA daily); MP	Anti-infective Agents - Misc.		
<i>irbesartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP	<i>metronidazole TABS 250 MG, 500 MG</i>	1	
<i>lisinopril &amp; hydrochlorothiazide</i>	1	MP	<i>trimethoprim TABS</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide</i>	1	QL(1 EA daily); MP	Anti-infective Misc. - Combinations		
<i>metoprolol &amp; hydrochlorothiazide TABS</i>	NP	QL(2 EA daily); MP	<i>methenamine-hyosc-methylene blue-sod phosph-phenyl sal TABS 81.6 MG</i>	1	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1		<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1		<i>sulfamethoxazole-trimethoprim TABS</i>	1	
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)	URETRON D/S TABS 81.6 MG	2	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)	Carbapenems		
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 EA daily)	<i>ertapenem sodium IJ</i>	1	SP; PA
<i>telmisartan-amlodipine</i>	1		Glycopeptides		
<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 EA daily)	<i>vancomycin hcl CAPS 250 MG</i>	1	QL(8 EA daily)
<i>trandolapril-verapamil hcl</i>	NP		<i>vancomycin hcl CAPS 125 MG</i>	1	QL(4 EA daily)
<i>valsartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP	<i>vancomycin hcl SOLR IV 1 GM</i>	1	QL(14 EA per fill retail)
			<i>vancomycin hcl SOLR IV 500 MG</i>	1	QL(0.467 EA daily)
			<i>vancomycin hcl SOLR PO 25 MG/ML</i>	1	QL(300 ML per fill retail)
			VANCOMYCIN HCL SOLR IV 1 GM	2	QL(14 EA per fill retail)
			VANCOMYCIN HCL SOLR IV 500 MG	2	QL(0.467 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Leprostatics</b>		
<i>dapsone</i>	1	
<b>Lincosamides</b>		
<i>clindamycin hcl 150 MG, 300 MG</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	QL(100 ML per fill retail)
<b>Monobactams</b>		
CAYSTON	NP	SP; PA
<b>Oxazolidinones</b>		
SIVEXTRO TABS	2	QL(6 EA per fill retail); PA
<b>Urinary Anti-infectives</b>		
<i>methenamine mandelate</i>	1	
METHENAMINE MANDELATE 0.5 GM, 1 GM	2	
<i>nitrofurantoin</i>	1	QL(40 ML daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
<b>ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)</b>		
<b>Antimalarial Combinations</b>		
COARTEM	2	QL(24 EA per fill retail)
<b>Antimalarials</b>		
<i>chloroquine phosphate TABS 500 MG</i>	0	QL(8 EA per 56 day(s) retail)
<i>chloroquine phosphate TABS 250 MG</i>	0	QL(2 EA daily); MP
DARAPRIM ( <i>pyrimethamine</i> )	NP	SP; PA
KRINTAFEL	2	QL(2 EA per 30 day(s) retail)
<i>mefloquine hcl</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pyrimethamine</i>	1	SP; PA
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
<b>Antimyasthenic/Cholinergic Agents</b>		
FIRDAPSE	2	SP; PA
<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>pyridostigmine bromide TBCR</i>	1	
<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
<b>Antimycobacterial Agents</b>		
<i>ethambutol hcl TABS</i>	1	MP
<i>isoniazid SYRP</i>	1	MP
<i>isoniazid TABS</i>	1	MP
<i>pyrazinamide</i>	1	
<i>rifampin CAPS</i>	1	
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>		
<b>Alkylating Agents</b>		
BELRAPZO SOLN	2	SP; PA
BENDAMUSTINE HCL SOLN	2	SP; PA
<i>bendamustine hcl SOLR</i>	1	SP; PA
BENDEKA SOLN	2	SP; PA
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML</i>	1	SP; PA
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	1	SP; PA
CISPLATIN SOLR	2	SP; PA
<i>cyclophosphamide CAPS 50 MG</i>	1	
CYCLOPHOSPHAMIDE TABS	2	
EVOMELA IV	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KEMOPLAT SOLN	2	SP; PA	CYRAMZA	2	SP; PA
LEUKERAN	2		INLYTA	2	SP; PA
<i>melphalan</i>	1		LENVIMA (10 MG DAILY DOSE)	2	SP; PA
<i>melphalan hcl IV</i>	1	SP; PA	LENVIMA (12 MG DAILY DOSE)	2	SP; PA
MYLERAN TABS	2		LENVIMA (14 MG DAILY DOSE)	2	SP; PA
TEMODAR SOLR	2	SP; PA	LENVIMA (18 MG DAILY DOSE)	2	SP; PA
<i>temozolomide CAPS</i>	1	SP; PA	LENVIMA (20 MG DAILY DOSE)	2	SP; PA
VIVIMUSTA SOLN	2	SP; PA	LENVIMA (24 MG DAILY DOSE)	2	SP; PA
YONDELIS	2	SP; PA	LENVIMA (4 MG DAILY DOSE)	2	SP; PA
<b>Antimetabolites</b>			LENVIMA (8 MG DAILY DOSE)	2	SP; PA
<i>azacitidine SUSR</i>	1	SP; PA	MVASI	2	SP; PA
<i>capecitabine</i>	1	SP; PA	ZALTRAP	2	SP; PA
<i>cladribine 10 MG/10ML</i>	1	SP; PA	<b>Antineoplastic - Antibodies</b>		
<i>cytarabine SOLN</i>	1	SP; PA	ADCETRIS	2	SP; PA
<i>decitabine</i>	1	SP; PA	ARZERRA	2	SP; PA
<i>fludarabine phosphate SOLN</i>	1	SP; PA	BLINCYTO	2	SP; PA
FLUDARABINE PHOSPHATE SOLN	2	SP; PA	DARZALEX	2	SP; PA
<i>fludarabine phosphate SOLR</i>	1	SP; PA	EMPLICITI	2	SP; PA
FOLOTYN	2	SP; PA	GAZYVA	2	SP; PA
<i>mercaptopurine SUSP 2000 MG/100ML</i>	1		KADCYLA	2	SP; PA
<i>mercaptopurine TABS</i>	1		KEYTRUDA	2	SP; PA
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	1		LIBTAYO	2	SP; PA
<i>methotrexate sodium TABS 2.5 MG</i>	1	MP	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	2	SP; PA
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	1	SP; PA	POLIVY 140 MG	2	SP; PA
<i>pralatrexate</i>	1	SP; PA	POTELIGEO	2	SP; PA
TABLOID	2	SP; PA	RITUXAN	2	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	2		TECENTRIQ	2	SP; PA
<b>Antineoplastic - Angiogenesis Inhibitors</b>			UNITUXIN	2	SP; PA
AVASTIN	2	SP; PA	YERVOY	2	SP; PA
			ZEVALIN Y-90	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<b>Antineoplastic - Anti-HER2 Agents</b>			EULEXIN	2	
KANJINTI 420 MG	2	SP; PA	<i>exemestane</i>	1	
PERJETA	2	SP; PA	FIRMAGON 80 MG	2	SP; PA
<b>Antineoplastic - BCL-2 Inhibitors</b>			FIRMAGON (240 MG DOSE)	2	SP; PA
VENCLEXTA STARTING PACK TBPK	2	SP; PA	<i>letrozole</i>	1	QL(1 EA daily); MP
VENCLEXTA TABS	2	SP; PA	<i>leuprolide acetate (3 month) INJ 22.5 MG</i>	1	
<b>Antineoplastic - Cellular Immunotherapy</b>			LEUPROLIDE ACETATE-BUPIVACAINE	2	SP; PA
KYMRIAH	2	SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	1	SP; PA
PROVENGE	2	SP; PA	LUPRON DEPOT (1-MONTH) KIT IM	2	SP; PA
YESCARTA	2	SP; PA	LUPRON DEPOT (3-MONTH) KIT IM	2	SP; PA
<b>Antineoplastic - EGFR Inhibitors</b>			LUPRON DEPOT (4-MONTH) IM	2	SP; PA
ERBITUX	2	SP; PA	LUPRON DEPOT (6-MONTH) IM	2	SP; PA
<i>erlotinib hcl</i>	1	SP; PA	LUTRATE DEPOT INJ 22.5 MG	2	
<i>gefitinib</i>	1	SP; PA	LYSODREN	2	SP; PA
GILOTRIF	2	SP; PA	<i>megestrol acetate SUSP</i>	1	
PORTRAZZA	2	SP; PA	<i>megestrol acetate TABS</i>	1	
TAGRISO	2	SP; PA	<i>tamoxifen citrate TABS</i>	1	MP
VECTIBIX 100 MG/5ML, 400 MG/20ML	2	SP; PA	<i>toremifene citrate</i>	1	PA
VIZIMPRO	2	SP; PA	TRELSTAR MIXJECT 11.25 MG, 22.5 MG	2	SP; PA
<b>Antineoplastic - Hedgehog Pathway Inhibitors</b>			TRELSTAR MIXJECT 3.75 MG	2	SP; PA
DAURISMO	2	SP; PA	VABRINTY SC 22.5 MG, 30 MG, 45 MG	2	SP; PA
ERIVEDGE	2	SP; PA	VABRINTY KIT SC 7.5 MG	2	SP; PA
ODOMZO	2	SP; PA	XTANDI CAPS	2	SP; PA
<b>Antineoplastic - Hormonal and Related Agents</b>			ZOLADEX 10.8 MG	2	SP; PA
<i>abiraterone acetate</i>	1	SP; PA	ZOLADEX 3.6 MG	2	SP; PA
<i>anastrozole</i>	1	MP	<b>Antineoplastic - Immunomodulators</b>		
<i>bicalutamide</i>	1	QL(1 EA daily)			
CAMCEVI	2	SP			
ELIGARD SC 22.5 MG, 30 MG, 45 MG	2	SP; PA			
ELIGARD KIT SC 7.5 MG	2	SP; PA			
EMCYT	2	SP; PA			
ERLEADA 60 MG	2	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>pomalidomide</i> 1 MG, 2 MG, 3 MG, 4 MG	1	SP; PA	IMBRUVICA CAPS 70 MG	2	QL(1 EA daily); SP; PA
<b>Antineoplastic Antibiotics</b>			IMBRUVICA TABS	2	QL(1 EA daily); SP; PA
<i>daunorubicin hcl SOLN</i> 50 MG/10ML	1	SP; PA	JAKAFI	2	SP; PA
ELLECE SOLN	2	SP; PA	KYPROLIS	2	SP; PA
<i>mitoxantrone hcl</i> 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML	1	SP; PA	<i>lapatinib ditosylate</i>	1	SP; PA
<i>valrubicin</i>	1	SP; PA	LORBRENA	2	SP; PA
<b>Antineoplastic Combinations</b>			MEKINIST TABS	2	SP; PA
HERCEPTIN HYLECTA	2	SP; PA	MEKTOVI	2	SP; PA
LONSURF	2	SP; PA	<i>nilotinib hcl</i> 50 MG, 150 MG, 200 MG	1	SP; PA
<b>Antineoplastic Enzyme Inhibitors</b>			NINLARO	2	SP; PA
ALECENSA	2	SP; PA	<i>pazopanib hcl</i>	1	SP; PA
BELEODAQ	2	SP; PA	PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	2	SP; PA
<i>bortezomib SOLR IJ</i>	1	SP; PA	<i>romidepsin SOLR</i>	1	SP; PA
BOSULIF TABS 100 MG, 500 MG	2	SP; PA	RUBRACA	2	SP; PA
BRAFTOVI 75 MG	2	SP; PA	<i>sorafenib tosylate</i>	1	SP; PA
CABOMETYX TABS	2	SP; PA	STIVARGA	2	SP; PA
CAPRELSA	2	SP; PA	<i>sunitinib malate</i>	1	SP; PA
COMETRIQ (100 MG DAILY DOSE) KIT	2	SP; PA	TAFINLAR CAPS	2	SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	2	SP; PA	TALZENNA 0.25 MG, 1 MG	2	SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	2	SP; PA	<i>temsirolimus</i>	1	SP; PA
COTELLIC	2	SP; PA	TIBSOVO	2	SP; PA
<i>dasatinib</i>	1	SP; PA	VITRAKVI CAPS	2	SP; PA
<i>everolimus TABS</i>	1	SP; PA	VITRAKVI SOLN	2	SP; PA
<i>everolimus TBSO</i>	1	SP; PA	VOTRIENT	2	SP; PA
IBRANCE CAPS	2	SP; PA	XALKORI CAPS	2	SP; PA
ICLUSIG 15 MG, 45 MG	2	SP; PA	XOSPATA	2	SP; PA
<i>imatinib mesylate TABS</i>	1	SP; PA	ZELBORAF	2	SP; PA
IMBRUVICA CAPS 140 MG	2	SP; PA	ZOLINZA	2	SP; PA
<b>Antineoplastic Enzymes</b>			ZYDELIG	2	SP; PA
			ZYKADIA TABS	2	SP; PA
			<b>Antineoplastic Enzymes</b>		
			ONCASPAR	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<b>Antineoplastic Radiopharmaceuticals</b>		
LUTATHERA	2	SP; PA
<b>Antineoplastics Misc.</b>		
ACTIMMUNE 100 MCG/0.5ML	2	SP; PA
ALFERON N	2	SP; PA
<i>arsenic trioxide 12 MG/6ML</i>	1	SP; PA
<i>bexarotene</i>	1	SP; PA
<i>hydroxyurea</i>	1	MP
MATULANE	2	SP; PA
PHOTOFRIN	2	SP; PA
PROLEUKIN	2	SP; PA
<i>tretinoin (chemotherapy)</i>	1	SP; PA
<b>Chemotherapy Rescue/Antidote/Protective Agents</b>		
<i>dexrazoxane hcl</i>	1	SP; PA
KHAPZORY 175 MG	2	SP; PA
<i>leucovorin calcium TABS 5 MG, 25 MG</i>	1	
<i>levoleucovorin calcium SOLN</i>	1	SP; PA
<i>levoleucovorin calcium SOLR</i>	1	SP; PA
<i>mesna SOLN</i>	1	SP; PA
<i>mesna TABS</i>	1	SP; PA
MESNEX TABS	2	SP; PA
VORAXAZE	2	SP; PA
<b>Mitotic Inhibitors</b>		
AVOPEF SOLN 100 MG/5ML	2	SP; PA
<i>docetaxel CONC 160 MG/8ML</i>	1	SP; PA
DOCETAXEL CONC 160 MG/8ML	2	SP; PA
<i>docetaxel SOLN</i>	1	SP; PA
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
DOCIVYX SOLN	2	SP; PA
<i>eribulin mesylate</i>	1	SP; PA
<i>etoposide CAPS</i>	1	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	1	SP; PA
IXEMPRA KIT	2	SP; PA
JEVTANA	2	SP; PA
PACLITAXEL PROTEIN-BOUND PART	2	SP; PA
<i>paclitaxel protein-bound particles</i>	1	SP; PA
<i>vincristine sulfate</i>	1	SP; PA
<b>Oncolytic Viral Agents</b>		
IMLYGIC	2	SP; PA
<b>Topoisomerase I Inhibitors</b>		
HYCAMTIN CAPS	2	SP; PA
<i>irinotecan hcl</i>	1	SP; PA
<i>topotecan hcl SOLN</i>	1	SP; PA
<i>topotecan hcl SOLR</i>	1	SP; PA
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
<b>Antiparkinson Adjunctive Therapy</b>		
<i>carbidopa</i>	1	
<b>Antiparkinson Anticholinergics</b>		
<i>benztropine mesylate TABS</i>	1	MP
<i>trihexyphenidyl hcl SOLN</i>	1	MP
<i>trihexyphenidyl hcl TABS</i>	1	MP
<b>Antiparkinson Dopaminergics</b>		
<i>amantadine hcl CAPS</i>	1	MP
<i>amantadine hcl SOLN</i>	1	MP
<i>amantadine hcl TABS</i>	1	MP
APOKYN SOCT	2	SP; PA
<i>apomorphine hydrochloride SOCT</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>bromocriptine mesylate CAPS</i>	1	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1	
<i>carbidopa-levodopa TABS</i>	1	MP
<i>carbidopa-levodopa TBCR</i>	1	MP
DHIVY TABS	2	MP
<i>pramipexole dihydrochloride TABS</i>	1	QL(3 EA daily); AL(At least 18 yrs old)
<i>pramipexole dihydrochloride TB24</i>	1	
<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	1	QL(6 EA daily); MP
<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	1	QL(3 EA daily); MP
<i>ropinirole hydrochloride TB24</i>	1	
<b>Antiparkinson Monoamine Oxidase Inhibitors</b>		
<i>selegiline hcl CAPS</i>	1	MP
<i>selegiline hcl TABS</i>	1	MP
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
<b>Antimanic Agents</b>		
<i>lithium</i>	1	
<i>lithium carbonate CAPS</i>	1	
<i>lithium carbonate TABS</i>	1	
<i>lithium carbonate TBCR</i>	1	
LITHOBID TBCR ( <i>lithium carbonate</i> )	2	
<b>Antipsychotics - Misc.</b>		
CAPLYTA	NP	
<i>lurasidone hcl</i>	1	
NUPLAZID CAPS	2	QL(1 EA daily); PA
NUPLAZID TABS 10 MG	2	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/Limits
VRAYLAR CAPS	2	
VRAYLAR CPPK	2	
<i>ziprasidone hcl</i>	1	
<i>ziprasidone mesylate</i>	1	
<b>Benzisoxazoles</b>		
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	NP	1 package(s) per 30 day(s) retail; AL(At least 18 yrs old); SP
ERZOFRI 351 MG/2.25ML	NP	SP
FANAPT TITRATION PACK B	NP	
FANAPT TITRATION PACK C	NP	
INVEGA HAFYERA	2	1 package(s) per 180 day(s) retail; AL(At least 18 yrs old); SP
INVEGA SUSTENNA	2	1 package(s) per 30 day(s) retail; AL(At least 18 yrs old); SP
INVEGA TRINZA	2	1 package(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
<i>paliperidone</i>	1	
RISPERDAL CONSTA ( <i>risperidone microspheres</i> )	2	QL(2 EA per 28 day(s) retail); 1 max fill(s) per 14 day(s) retail; AL(At least 18 yrs old); SP
<i>risperidone microspheres</i>	1	QL(2 EA per 28 day(s) retail); 1 max fill(s) per 14 day(s) retail; AL(At least 18 yrs old); SP
<i>risperidone SOLN</i>	1	
<i>risperidone TABS</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>risperidone TBDP</i>	1	
RYKINDO SRER	NP	AL(At least 18 yrs old); SP
UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	2	SP
UZEDY SUSY 100 MG/0.28ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML	2	SP
<b>Butyrophenones</b>		
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate CONC</i>	1	
<i>haloperidol lactate SOLN</i>	1	
<i>haloperidol TABS</i>	1	
<b>Dibenzapines</b>		
<i>clozapine TABS</i>	0	
<i>clozapine TBDP</i>	0	
<i>loxapine succinate</i>	1	
<i>olanzapine SOLR</i>	1	
<i>olanzapine TABS</i>	1	AL(At least 10 yrs old)
<i>olanzapine TBDP</i>	1	
<i>quetiapine fumarate TABS</i>	1	
<i>quetiapine fumarate TB24</i>	1	
ZYPREXA RELPREVV	NP	SP
<b>Muscarinic Agents</b>		
COBENFY STARTER PACK CPPK	NP	
COBENFY CAPS	NP	
<b>Phenothiazines</b>		
<i>chlorpromazine hcl TABS</i>	1	
<i>fluphenazine decanoate</i>	1	
<i>fluphenazine hcl TABS</i>	1	
<i>perphenazine TABS</i>	1	
<i>prochlorperazine</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>prochlorperazine edisylate 10 MG/2ML</i>	1	
<i>prochlorperazine maleate TABS</i>	1	
<i>thioridazine hcl</i>	1	
<i>trifluoperazine hcl TABS</i>	1	
<b>Quinolinone Derivatives</b>		
ABILIFY ASIMTUFII PRSY 960 MG/3.2ML	2	QL(3.2 ML per 56 day(s) retail; 3 ML per 56 days mail); AL(At least 18 yrs old); SP
ABILIFY ASIMTUFII PRSY 720 MG/2.4ML	2	QL(2.4 ML per 56 day(s) retail; 2 ML per 56 days mail); AL(At least 18 yrs old); SP
ABILIFY MAINTENA PRSY	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
ABILIFY MAINTENA SRER	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
ABILIFY MYCITE MAINTENANCE KIT	NP	SP
ABILIFY MYCITE STARTER KIT	NP	SP
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily)
<i>aripiprazole TABS</i>	1	QL(1 EA daily)
<i>aripiprazole TBDP</i>	1	QL(2 EA daily)
ARISTADA 662 MG/2.4ML	2	QL(2.4 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ARISTADA 882 MG/3.2ML	2	QL(3.2 ML per 28 day(s) retail; 3 ML per 28 days mail); AL(At least 18 yrs old); SP	<i>efavirenz CAPS 200 MG</i>	0	QL(1 EA daily)
			<i>efavirenz CAPS 50 MG</i>	0	QL(2 EA daily)
			<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
ARISTADA 441 MG/1.6ML	2	QL(1.6 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP	<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
			<i>efavirenz TABS</i>	0	QL(1 EA daily)
OPIPZA FILM	NP		<i>emtricitabine CAPS</i>	0	QL(1 EA daily)
Thioxanthenes			<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
<i>thiothixene</i>	1		<i>emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>			EMTRIVA CAPS ( <i>emtricitabine</i> )	0	QL(1 EA daily)
Antiretrovirals			EMTRIVA SOLN	0	QL(24 ML daily)
<i>abacavir sulfate-lamivudine</i>	0	QL(1 EA daily)	EPIVIR SOLN ( <i>lamivudine</i> )	0	QL(30 ML daily)
<i>abacavir sulfate SOLN</i>	0	QL(30 ML daily)	EPIVIR TABS 300 MG ( <i>lamivudine</i> )	0	QL(1 EA daily)
<i>abacavir sulfate TABS</i>	0	QL(2 EA daily)	EPIVIR TABS 150 MG ( <i>lamivudine</i> )	0	QL(2 EA daily)
APRETUDE	0		<i>etravirine 100 MG</i>	0	QL(4 EA daily)
APTIVUS CAPS	0	QL(4 EA daily)	<i>etravirine 200 MG</i>	0	QL(2 EA daily)
<i>atazanavir sulfate CAPS</i>	0	QL(2 EA daily)	EVOTAZ	0	QL(1 EA daily)
BIKTARVY 120 MG-30 MG-15 MG	0		<i>fosamprenavir calcium TABS</i>	0	QL(4 EA daily)
BIKTARVY 200 MG-50 MG-25 MG	0	QL(1 EA daily)	GENVOYA	0	QL(1 EA daily)
COMPLERA 200 MG-300 MG-25 MG ( <i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i> )	0	QL(1 EA daily)	INTELENCE ( <i>etravirine</i> )	0	QL(4 EA daily)
<i>darunavir TABS</i>	0	QL(2 EA daily)	INTELENCE	0	QL(4 EA daily)
DELSTRIGO	0	QL(1 EA daily)	INTELENCE 200 MG ( <i>etravirine</i> )	0	QL(2 EA daily)
DESCOVY 120 MG-15 MG	0		ISENTRESS CHEW 100 MG	0	QL(6 EA daily)
DESCOVY 200 MG-25 MG	0	QL(1 EA daily)	ISENTRESS CHEW 25 MG	0	QL(12 EA daily)
DOVATO	0		ISENTRESS PACK	0	QL(2 EA daily)
EDURANT PED PO 2.5 MG	0		ISENTRESS TABS	0	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KALETRA SOLN	0	QL(160 ML per fill retail)	RETROVIR SYRP (zidovudine)	0	QL(60 ML daily)
KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir)	0	QL(4 EA daily)	REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate)	0	QL(2 EA daily)
KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)	0	QL(6 EA daily)	REYATAZ PACK	0	QL(6 EA daily)
lamivudine SOLN	0	QL(30 ML daily)	rilpivirine hcl 25 MG	0	QL(1 EA daily)
lamivudine TABS 150 MG	0	QL(2 EA daily)	ritonavir TABS	0	QL(12 EA daily)
lamivudine TABS 300 MG	0	QL(1 EA daily)	RUKOBIA	0	
lamivudine-zidovudine	0	QL(2 EA daily)	SELZENTRY SOLN	0	QL(35 ML daily)
lopinavir-ritonavir SOLN	0	QL(160 ML per fill retail)	STRIBILD	0	
lopinavir-ritonavir TABS 25 MG-100 MG	0	QL(4 EA daily)	SUNLENCA SOLN	0	SP
lopinavir-ritonavir TABS 50 MG-200 MG	0	QL(6 EA daily)	SUNLENCA TABS PO 300 MG	0	SP
maraviroc TABS 150 MG	0	QL(2 EA daily)	SUNLENCA TBPK 300 MG	0	SP
maraviroc TABS 300 MG	0	QL(4 EA daily)	SYMFI (efavirenz-lamivudine-tenofovir disoproxil fumarate)	0	QL(1 EA daily)
nevirapine SUSP	0	QL(40 ML daily)	SYMFI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate)	0	QL(1 EA daily)
nevirapine TABS	0	QL(2 EA daily)	SYMTUZA	0	QL(1 EA daily)
nevirapine TB24 400 MG	0	QL(1 EA daily)	tenofovir disoproxil fumarate TABS	0	QL(1 EA daily)
NORVIR CAPS	0	QL(12 EA daily)	TIVICAY PD TBSO	0	
NORVIR PACK	0		TIVICAY TABS 50 MG	0	
NORVIR TABS (ritonavir)	0	QL(12 EA daily)	TRIUMEQ PD TBSO	0	
ODEFSEY	0		TRIUMEQ TABS	0	
PIFELTRO	0	QL(1 EA daily)	TRUVADA (emtricitabine-tenofovir disoproxil fumarate)	0	QL(1 EA daily)
PREZCOBIX	0	QL(1 EA daily)	TYBOST	0	QL(1 EA daily)
PREZCOBIX	0		VIRACEPT TABS 250 MG	0	QL(9 EA daily)
PREZISTA SUSP	0	QL(12 ML daily)	VIRACEPT TABS 625 MG	0	QL(4 EA daily)
PREZISTA TABS 75 MG, 600 MG, 800 MG	0	QL(2 EA daily)	VIREAD POWD	0	
PREZISTA TABS 150 MG	0	QL(3 EA daily)	VIREAD TABS (tenofovir disoproxil fumarate)	0	QL(1 EA daily)
PREZISTA TABS (darunavir)	0	QL(2 EA daily)	VIREAD TABS	0	QL(1 EA daily)
RETROVIR CAPS (zidovudine)	0	QL(6 EA daily)			

Drug Name	Drug Tier	Requirements/Limits
YEZTUGO SOLN 463.5 MG/1.5ML	0	SP
YEZTUGO TABS PO 300 MG	0	SP
ZIAGEN SOLN ( <i>abacavir sulfate</i> )	0	QL(30 ML daily)
<i>zidovudine</i> CAPS	0	QL(6 EA daily)
<i>zidovudine</i> SYRP	0	QL(60 ML daily)
<i>zidovudine</i> TABS	0	QL(2 EA daily)
<b>Antiviral Combinations</b>		
PAXLOVID (150/100)	0	
PAXLOVID (300/100 & 150/100)	0	
PAXLOVID (300/100)	0	
<b>CMV Agents</b>		
PREVYMIS SOLN	2	SP; PA
PREVYMIS TABS	2	SP; PA
<i>valganciclovir hcl</i> TABS	1	QL(2 EA daily)
<b>Hepatitis Agents</b>		
EPCLUSA PACK	NP	SP; PA
EPCLUSA TABS	NP	SP; PA
HARVONI PACK	NP	SP; PA
HARVONI TABS	NP	SP; PA
LEDIPASVIR-SOFOSBUVIR TABS	2	SP
MAVYRET PACK	2	SP
MAVYRET TABS	2	SP
PEGASYS SOLN	2	SP; PA
PEGASYS SOSY	2	SP; PA
<i>ribavirin (hepatitis c)</i> CAPS	1	SP; PA
<i>ribavirin (hepatitis c)</i> TABS 200 MG	1	SP; PA
SOFOVIR-SOFOSBUVIR VELPATASVIR TABS	2	SP
SOVALDI PACK	NP	SP; PA
SOVALDI TABS	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
VOSEVI	NP	SP; PA
ZEPATIER	NP	SP; PA
<b>Herpes Agents</b>		
<i>acyclovir</i> CAPS	1	QL(50 EA per 30 day(s) retail)
<i>acyclovir</i> SUSP	1	QL(400 ML per 30 day(s) retail)
<i>acyclovir</i> TABS PO 400 MG	1	QL(3 EA daily)
<i>acyclovir</i> TABS PO 800 MG	1	QL(50 EA per 30 day(s) retail)
<i>famciclovir</i>	1	
<i>valacyclovir hcl</i> 500 MG	1	QL(2 EA daily)
<i>valacyclovir hcl</i> 1 GM	1	QL(42 EA per 21 day(s) retail)
<b>Influenza Agents</b>		
<i>oseltamivir phosphate</i> CAPS 45 MG, 75 MG	1	QL(10 EA per fill retail)
<i>oseltamivir phosphate</i> CAPS 30 MG	1	QL(20 EA per fill retail)
<i>oseltamivir phosphate</i> SUSR	1	QL(120 ML per fill retail)
<i>rimantadine hydrochloride</i> TABS	NP	PA
XOFLUZA (40 MG DOSE) 40 MG	NP	
XOFLUZA (80 MG DOSE) 80 MG	NP	
<b>Misc. Antivirals</b>		
LAGEVRIO	0	
TPOXX CAPS	2	
<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>		
<b>Alpha-Beta Blockers</b>		
<i>carvedilol</i> 3.125 MG, 6.25 MG, 12.5 MG	1	QL(3 EA daily); MP
<i>carvedilol</i> 25 MG	1	QL(4 EA daily); MP
<i>carvedilol phosphate</i>	NP	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
COREG CR ( <i>carvedilol phosphate</i> )	NP	QL(1 EA daily); MP
<i>labetalol hcl TABS 100 MG</i>	1	QL(3 EA daily); MP
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily); MP
<i>labetalol hcl TABS 400 MG</i>	1	
<i>labetalol hcl TABS 200 MG</i>	1	QL(6 EA daily); MP
<b>Beta Blockers Cardio-Selective</b>		
<i>acebutolol hcl CAPS</i>	1	MP
<i>atenolol TABS</i>	1	QL(2 EA daily); MP
<i>betaxolol hcl</i>	1	
<i>bisoprolol fumarate 2.5 MG</i>	1	
<i>bisoprolol fumarate</i>	1	QL(1 EA daily); MP
LOPRESSOR SOLN PO 10 MG/ML	NP	
LOPRESSOR TABS 12.5 MG ( <i>metoprolol tartrate</i> )	NP	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1	QL(4 EA daily); MP
<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily); MP
<i>metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG</i>	1	
<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	1	QL(4 EA daily); MP
<i>metoprolol tartrate TABS 100 MG</i>	1	QL(4.5 EA daily); MP
<b>Beta Blockers Non-Selective</b>		
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	1	MP
<i>pindolol TABS</i>	NP	MP
<i>propranolol hcl CP24</i>	1	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1	MP
<i>propranolol hcl TABS</i>	1	MP
<i>sotalol hcl (afib/af)</i>	1	QL(2 EA daily); MP
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily); MP
<i>sotalol hcl TABS 240 MG</i>	1	MP
<i>timolol maleate TABS</i>	NP	MP
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>		
<b>Calcium Channel Blockers</b>		
<i>amlodipine besylate TABS</i>	1	QL(1 EA daily); MP
CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG ( <i>diltiazem hcl</i> )	NP	MP
CONJUPRI ( <i>levamlodipine maleate</i> )	2	
<i>diltiazem hcl coated beads CP24 240 MG</i>	1	QL(2 EA daily); MP
<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	1	QL(1 EA daily); MP
<i>diltiazem hcl coated beads CP24 360 MG</i>	1	MP
<i>diltiazem hcl extended release beads</i>	1	QL(1 EA daily); MP
<i>diltiazem hcl CP12</i>	1	QL(2 EA daily); MP
<i>diltiazem hcl CP24 180 MG</i>	1	MP
<i>diltiazem hcl CP24 120 MG, 240 MG</i>	1	QL(1 EA daily); MP
<i>diltiazem hcl TABS</i>	1	QL(3 EA daily); MP
<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	NP	MP
<i>felodipine</i>	1	QL(1 EA daily); MP
<i>isradipine CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>levamlodipine maleate</i>	1	
<i>nicardipine hcl CAPS</i>	NP	MP
<i>nifedipine CAPS</i>	1	QL(4 EA daily); MP
<i>nifedipine TB24 30 MG, 90 MG</i>	1	QL(1 EA daily); MP
<i>nifedipine TB24 60 MG</i>	1	QL(2 EA daily); MP
<i>nimodipine CAPS</i>	NP	
<i>nisoldipine</i>	NP	
NORLIQVA SOLN	NP	
SULAR 8.5 MG, 17 MG, 34 MG ( <i>nisoldipine</i> )	NP	
VERAPAMIL HCL ER CP24 ( <i>verapamil hcl</i> )	NP	QL(2 EA daily); MP
<i>verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG</i>	NP	QL(2 EA daily); MP
<i>verapamil hcl CP24 300 MG</i>	NP	MP
<i>verapamil hcl CP24 360 MG</i>	NP	QL(1 EA daily); MP
<i>verapamil hcl TABS</i>	1	QL(3 EA daily); MP
<i>verapamil hcl TBCR</i>	1	QL(2 EA daily); MP
VERELAN PM CP24 100 MG, 200 MG ( <i>verapamil hcl</i> )	NP	QL(2 EA daily); MP
VERELAN PM CP24 300 MG ( <i>verapamil hcl</i> )	NP	MP
VERELAN CP24 360 MG ( <i>verapamil hcl</i> )	NP	QL(1 EA daily); MP
VERELAN CP24 120 MG, 180 MG, 240 MG ( <i>verapamil hcl</i> )	NP	QL(2 EA daily); MP
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>digoxin TABS 125 MCG, 250 MCG</i>	1	MP
LANOXIN TABS 125 MCG, 250 MCG ( <i>digoxin</i> )	2	MP
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	NP	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG ( <i>amlodipine besylate-atorvastatin calcium</i> )	NP	
ENTRESTO CPSP	NP	
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG ( <i>sacubitril-valsartan</i> )	NP	
OPSYNVI	NP	SP; PA
<i>sacubitril-valsartan TABS</i>	1	
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	NP	
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	1	SP; PA
ORENITRAM MONTH 1 TEPK	NP	SP
ORENITRAM MONTH 2 TEPK	NP	SP
ORENITRAM MONTH 3 TEPK	NP	SP
REMODULIN SOLN IJ	NP	SP; PA
<i>treprostinil SOLN IJ</i>	1	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	1	SP

Drug Name	Drug Tier	Requirements/Limits
<i>bosentan TABS</i>	1	SP
LETAIRIS ( <i>ambrisentan</i> )	NP	SP
TRACLEER TABS ( <i>bosentan</i> )	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
LIQREV SUSP	NP	SP
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	1	SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	1	SP; PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	1	SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	1	SP; PA
TADLIQ SUSP	NP	SP; PA
Transthyretin Stabilizers		
VYNDAMAX	2	QL(1 EA daily); SP; PA
VYNDAQEL	2	QL(4 EA daily); SP; PA
<b>CEPHALOSPORINS - Drugs to Treat Bacterial Infections</b>		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1	
<i>cefadroxil SUSR</i>	1	
<i>cefadroxil TABS</i>	1	
<i>cephalexin CAPS 250 MG, 500 MG</i>	1	
<i>cephalexin SUSR</i>	1	
Cephalosporins - 2nd Generation		
CEFACLOR ER TB12	NP	
<i>cefaclor CAPS</i>	1	
<i>cefaclor SUSR 250 MG/5ML</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cefprozil SUSR</i>	1	QL(75 ML per fill retail); AL(Up to 12 yrs old)
<i>cefprozil TABS</i>	1	QL(20 EA per fill retail)
<i>cefuroxime axetil TABS</i>	1	QL(20 EA per fill retail)
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1	QL(20 EA per fill retail)
<i>cefdinir SUSR</i>	1	QL(60 ML per fill retail)
<i>cefixime CAPS</i>	1	
<i>cefixime SUSR</i>	1	
<i>cefpodoxime proxetil SUSR</i>	1	
<i>cefpodoxime proxetil TABS</i>	1	
<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	1	QL(3 EA per fill retail); 1 max fill(s) per 30 day(s) retail
<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>		
Combination Contraceptives - Oral		
<i>desogestrel &amp; ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>drospirenone-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	NATAZIA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethin acet &amp; estrad-fe CAPS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>ethynodiol diacet &amp; eth estrad</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethin acet &amp; estrad-fe CHEW</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>levonorgestrel &amp; eth estradiol TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>levonorgestrel-eth estradiol (91-day) 0.03 MG-0.15 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethindrone &amp; eth estradiol 35 MCG-1 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethindrone &amp; eth estradiol 35 MCG-0.4 MG, 35 MCG-0.5 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
LO LOESTRIN FE TABS	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethindrone &amp; ethinyl estradiol-fe</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
			<i>norethindrone acet &amp; eth estra TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	MIUDELLA INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
<i>norethindrone-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	PARAGARD INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
<i>norgestimate-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<b>Emergency Contraceptives</b>		
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	ELLA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norgestrel &amp; ethinyl estradiol 30 MCG-0.3 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
TYBLUME CHEW	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<b>Progestin Contraceptives - Implants</b>		
<b>Combination Contraceptives - Transdermal</b>			NEXPLANON	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
<i>norelgestromin-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<b>Progestin Contraceptives - Injectable</b>		
<b>Combination Contraceptives - Vaginal</b>			DEPO-SUBQ PROVERA 104 SUSY SC	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; QL(4 ML per fill retail); PV
<i>etonogestrel-ethinyl estradiol</i>	0	PV			
<b>Copper Contraceptives - IUD</b>					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; QL(4 ML per fill retail); PV	<b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b>		
			Glucocorticosteroids		
			<i>budesonide TB24</i>	NP	
			CORTISONE ACETATE TABS	2	
			<i>deflazacort SUSP</i>	1	SP; PA
			<i>deflazacort TABS</i>	1	SP; PA
			DEXAMETHASONE INTENSOL CONC	2	
			<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1	QL(150 ML per 30 day(s) retail)
Progestin Contraceptives - IUD			DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	2	QL(150 ML per 30 day(s) retail)
KYLEENA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV	<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1	QL(150 ML per 30 day(s) retail)
LILETTA (52 MG)	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV	<i>dexamethasone ELIX</i>	1	
MIRENA (52 MG)	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV	<i>dexamethasone SOLN</i>	1	
SKYLA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV	<i>dexamethasone TABS 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 4 MG, 6 MG</i>	1	
Progestin Contraceptives - Oral			<i>hydrocortisone TABS</i>	1	
<i>norethindrone (contraceptive)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>methylprednisolone TABS 4 MG, 8 MG</i>	1	
			<i>methylprednisolone TBPK</i>	1	
			<i>prednisolone sodium phosphate SOLN 15 MG/5ML</i>	1	QL(240 ML per fill retail)
			<i>prednisolone sodium phosphate SOLN 5 MG/5ML</i>	1	
			<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	1	QL(150 ML per fill retail)
			<i>prednisolone SOLN</i>	1	
			PREDNISONE INTENSOL CONC	2	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone SOLN</i>	1	
<i>prednisone TABS</i>	1	
<i>prednisone TBPk</i>	1	
UCERIS TB24 ( <i>budesonide</i> )	NP	
ZILRETTA SRER	2	SP; PA
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1	
<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
Antitussives		
<i>benzonatate 100 MG</i>	1	AL(At least 10 yrs old)
<i>benzonatate 200 MG</i>	1	QL(1 EA daily); 1 max fill(s) per 30 day(s) retail; AL(At least 10 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	1	
Cough/Cold/Allergy Combinations		
<i>brompheniramine &amp; phenyleph ELIX</i>	1	QL(120 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>brompheniramine &amp; pseudoeph ELIX</i>	1	QL(120 ML per fill retail)
<i>brompheniramine &amp; pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	1	QL(120 ML per fill retail)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	1	QL(240 ML per fill retail)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	1	QL(240 ML per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<i>guaifenesin-codeine SOLN</i>	1	QL(240 ML per fill retail); 1 max fill(s) per 30 day(s) retail
MAXI-TUSS PE ELIX 5 MG/5ML-2 MG/5ML	2	QL(120 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	1	QL(240 ML per fill retail)
<i>phenylephrine-dm SOLN</i>	1	QL(240 ML per fill retail)
<i>promethazine &amp; phenylephrine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 2 yrs old)
<i>promethazine w/codeine SOLN</i>	1	QL(240 ML per fill retail); AL(At least 6 yrs old)
<i>promethazine w/codeine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 6 yrs old)
<i>pseudoephedrine-ibuprofen TABS</i>	1	
Expectorants		
<i>potassium iodide (expectorant) SOLN</i>	1	
Misc. Respiratory Inhalants		
<i>sodium chloride (inhalant) AERS</i>	1	QL(240 ML per fill retail)
<i>sodium chloride (inhalant) NEBU 0.9 %, 7 %</i>	1	
Mucolytics		
<i>acetylcysteine SOLN</i>	1	
<b>DERMATOLOGICALS - Drugs to Treat Skin Conditions</b>		
Acne Products		
ABSORICA 10 MG, 20 MG, 40 MG ( <i>isotretinoin</i> )	NP	QL(2 EA daily); AL(At least 12 yrs old)
<i>adapalene-benzoyl peroxide GEL</i>	1	
<i>adapalene CREA</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>adapalene GEL</i>	1		<i>isotretinoin 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily); AL(At least 12 yrs old)
<i>adapalene GEL</i>	1	RX/OTC	RETIN-A MICRO ( <i>tretinoin microsphere</i> )	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)
ADAPALENE SOLN	2		RETIN-A MICRO PUMP ( <i>tretinoin microsphere</i> )	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)
AKLIEF	NP		<i>sulfacetamide sodium (acne)</i>	1	QL(120 ML per fill retail)
ATRALIN GEL ( <i>tretinoin</i> )	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	1	QL(60 GM per fill retail)
BENZAC AC WASH LIQD 5 %	2	RX/OTC	<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	1	QL(30 GM per fill retail)
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	1		<i>tretinoin microsphere 0.04 %, 0.1 %</i>	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)
<i>benzoyl peroxide LIQD 5 %, 10 %</i>	1		<i>tretinoin CREA 0.025 %</i>	1	QL(20 GM per fill retail); AL(Up to 35 yrs old)
<i>benzoyl peroxide LOTN 5 %, 10 %</i>	1		<i>tretinoin CREA 0.05 %, 0.1 %</i>	1	1 package(s) per fill retail; AL(Up to 35 yrs old)
BENZOYL PEROXIDE LOTN 5 %, 10 %	2		<i>tretinoin GEL 0.01 %, 0.025 %, 0.05 %</i>	1	1 package(s) per fill retail; AL(Up to 35 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	1	QL(75 ML per fill retail)	<b>Antibiotics - Topical</b>		
<i>clindamycin phosphate (topical) LOTN</i>	1	QL(60 ML per fill retail)	<i>bacitracin (topical) OINT</i>	1	QL(453.9 GM per fill retail)
<i>clindamycin phosphate (topical) SOLN</i>	1		<i>bacitracin zinc OINT</i>	1	QL(453.6 GM per fill retail)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1		<i>gentamicin sulfate (topical) CREA</i>	1	QL(30 GM per fill retail)
<i>clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 %</i>	1		<i>gentamicin sulfate (topical) OINT</i>	1	QL(30 GM per fill retail)
<i>clindamycin phosphate-tretinoin</i>	1		<i>mupirocin calcium (topical)</i>	1	
DIFFERIN CREA ( <i>adapalene</i> )	NP		<i>mupirocin OINT</i>	1	QL(30 GM per fill retail)
DIFFERIN GEL 0.3 % ( <i>adapalene</i> )	NP				
DIFFERIN LOTN	NP				
<i>erythromycin (acne aid) GEL</i>	1	QL(60 GM per fill retail)			
<i>erythromycin (acne aid) SOLN</i>	1				

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-bacitracin-polymyxin OINT</i>	1	QL(56 GM per fill retail)
<i>neomycin-polymyxin w/ pramoxine</i>	1	QL(28.3 GM per fill retail)
<b>Antifungals - Topical</b>		
<i>ciclopirox SOLN</i>	1	PA
<i>clotrimazole (topical) CREA</i>	1	QL(60 GM per fill retail); RX/OTC
<i>clotrimazole (topical) SOLN</i>	1	QL(60 ML per fill retail); RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	1	QL(45 GM per fill retail)
<i>clotrimazole w/ betamethasone LOTN</i>	1	QL(30 ML per fill retail)
<i>econazole nitrate CREA</i>	1	QL(85 GM per fill retail)
<i>ketoconazole (topical) CREA</i>	1	QL(60 GM per fill retail)
<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(120 ML per fill retail)
<i>luliconazole</i>	NP	PA
<i>LUZU (luliconazole)</i>	NP	PA
<i>miconazole nitrate (topical) CREA</i>	1	QL(92 GM per fill retail)
<i>NIZORAL SHAM</i>	2	QL(200 ML per fill retail)
<i>nystatin (topical) CREA</i>	1	QL(30 GM per fill retail)
<i>nystatin (topical) OINT</i>	1	QL(30 GM per fill retail)
<i>nystatin (topical) POWD EX</i>	1	QL(60 GM per fill retail)
<i>nystatin-triamcinolone CREA</i>	1	QL(60 GM per fill retail)
<i>nystatin-triamcinolone OINT</i>	1	QL(60 GM per fill retail)
<i>oxiconazole nitrate CREA</i>	NP	PA
<i>OXISTAT CREA (oxiconazole nitrate)</i>	NP	PA
<i>terbinafine hcl (topical) CREA</i>	1	QL(42 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<i>tolnaftate CREA</i>	1	QL(30 GM per fill retail)
<b>Antihistamines-Topical</b>		
<i>ITCH RELIEF CREA</i>	2	
<b>Anti-inflammatory Agents - Topical</b>		
<i>diclofenac sodium (topical) GEL EX</i>	1	QL(6.68 GM daily); RX/OTC
<b>Antineoplastic or Premalignant Lesion Agents - Topical</b>		
<i>bexarotene (topical)</i>	1	SP; PA
<i>CARAC CREA (fluorouracil (topical))</i>	2	QL(30 GM per fill retail)
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(40 GM per fill retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	1	QL(30 GM per fill retail)
<i>fluorouracil (topical) SOLN</i>	1	QL(10 ML per fill retail)
<i>LEVULAN KERASTICK SOLR</i>	2	SP; PA
<b>Antipruritics - Topical</b>		
<i>camphor &amp; menthol LOTN</i>	1	QL(59 ML per fill retail)
<b>Antipsoriatics</b>		
<i>BIMZELX SOAJ 160 MG/ML</i>	NP	SP; PA
<i>BIMZELX SOAJ 320 MG/2ML</i>	NP	SP; PA
<i>BIMZELX SOSY 320 MG/2ML</i>	NP	SP; PA
<i>BIMZELX SOSY 160 MG/ML</i>	NP	SP; PA
<i>calcipotriene CREA</i>	1	QL(60 GM per fill retail)
<i>CALCIPOTRIENE FOAM</i>	NP	
<i>calcipotriene OINT</i>	NP	
<i>calcipotriene SOLN</i>	NP	QL(60 ML per fill retail)
<i>COSENTYX (300 MG DOSE) SOSY</i>	NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP; PA	USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
COSENTYX SENSOREADY PEN SOAJ	NP	SP; PA	USTEKINUMAB-TTWE	NP	SP; PA
COSENTYX UNOREADY SOAJ	NP	SP; PA	USTEKINUMAB-TTWE SC	NP	SP; PA
COSENTYX SOLN	NP	SP; PA	VTAMA	NP	PA
COSENTYX SOSY	NP	SP; PA	YESINTEK SOLN 45 MG/0.5ML	NP	SP; PA
IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	YESINTEK SOSY	NP	SP; PA
OTULFI SOLN SC 45 MG/0.5ML	NP	SP; PA	Antiseborrheic Products		
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>selenium sulfide LOTN 1 %</i>	1	QL(240 ML per fill retail)
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>selenium sulfide LOTN 2.5 %</i>	1	QL(120 ML per fill retail)
PYZCHIVA SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>selenium sulfide SHAM 1 %</i>	1	QL(240 ML per fill retail)
PYZCHIVA SC 45 MG/0.5ML	NP	SP; PA	<i>sulfacetamide sodium LIQD</i>	1	QL(480 ML per fill retail)
SELARSDI SOLN SC 45 MG/0.5ML	NP	SP; PA	Antivirals - Topical		
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>acyclovir topical CREA</i>	1	QL(1 GM daily)
SKYRIZI PEN SOAJ	NP	SP; PA	<i>acyclovir topical OINT</i>	1	
SKYRIZI SOSY	NP	SP; PA	DENAVIR ( <i>penciclovir</i> )	2	
SORILUX FOAM	NP		<i>penciclovir</i>	NP	
SOTYKTU	NP	SP; PA	ZOVIRAX CREA ( <i>acyclovir topical</i> )	NP	QL(1 GM daily)
SPEVIGO SOLN	NP	SP; PA	ZOVIRAX OINT ( <i>acyclovir topical</i> )	2	
SPEVIGO SOSY	NP	SP; PA	Burn Products		
STEQEYMA	NP	SP; PA	<i>silver sulfadiazine</i>	1	QL(85 GM per fill retail)
TALTZ SOSY	2	SP; PA	Corticosteroids - Topical		
<i>tazarotene CREA</i>	1	QL(60 GM per fill retail); AL(Up to 21 yrs old)	<i>alclometasone dipropionate CREA</i>	1	
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>alclometasone dipropionate OINT</i>	1	
			<i>amcinonide CREA</i>	NP	
			<i>amcinonide OINT</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) CREA</i>	NP	1 package(s) per 30 day(s) retail	<i>clobetasol propionate GEL 0.05 %</i>	1	QL(60 GM per fill retail)
<i>betamethasone dipropionate (topical) LOTN</i>	1		<i>clobetasol propionate LIQD</i>	1	
<i>betamethasone dipropionate (topical) OINT</i>	1		<i>clobetasol propionate LOTN</i>	1	
<i>betamethasone dipropionate augmented CREA</i>	NP	QL(50 GM per fill retail)	<i>clobetasol propionate OINT 0.05 %</i>	1	QL(60 GM per fill retail)
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP		<i>clobetasol propionate SHAM</i>	1	
<i>betamethasone dipropionate augmented LOTN</i>	1		<i>clobetasol propionate SOLN 0.05 %</i>	1	QL(50 ML per fill retail)
<i>betamethasone dipropionate augmented OINT</i>	NP		<i>clocortolone pivalate</i>	NP	
<i>betamethasone valerate CREA</i>	NP	QL(45 GM per fill retail)	CLODERM ( <i>clocortolone pivalate</i> )	NP	
<i>betamethasone valerate FOAM</i>	NP		<i>desonide CREA</i>	1	1 package(s) per fill retail
<i>betamethasone valerate LOTN</i>	NP	QL(60 ML per fill retail)	<i>desonide LOTN</i>	1	
<i>betamethasone valerate OINT</i>	NP	QL(45 GM per fill retail)	<i>desonide OINT</i>	1	1 package(s) per fill retail
<i>calcipotriene-betamethasone dipropionate OINT</i>	1		<i>desoximetasone CREA 0.05 %</i>	NP	QL(60 GM per fill retail)
<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP		<i>desoximetasone CREA 0.25 %</i>	NP	
<i>clobetasol propionate emollient base 0.05 %</i>	1	QL(60 GM per fill retail)	<i>desoximetasone GEL</i>	NP	
<i>clobetasol propionate emulsion</i>	1		<i>desoximetasone LIQD</i>	NP	
<i>clobetasol propionate CREA 0.05 %</i>	1	QL(60 GM per fill retail)	<i>desoximetasone OINT</i>	1	
<i>clobetasol propionate FOAM</i>	1		<i>diflorasone diacetate CREA</i>	NP	QL(60 GM per fill retail)
			<i>diflorasone diacetate OINT</i>	NP	QL(60 GM per fill retail)
			DIPROLENE OINT ( <i>betamethasone dipropionate augmented</i> )	NP	
			EPIFOAM FOAM	2	
			<i>fluocinolone acetonide CREA</i>	NP	
			<i>fluocinolone acetonide OIL</i>	1	
			<i>fluocinolone acetonide OINT</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide SOLN</i>	NP		<i>hydrocortisone (topical) OINT 1 %</i>	1	QL(2 GM daily; 56 GM per fill retail); RX/OTC
<i>fluocinonide emulsified base</i>	NP	QL(60 GM per fill retail)	<i>hydrocortisone (topical) OINT 2.5 %</i>	1	QL(454 GM per fill retail)
<i>fluocinonide CREA 0.05 %</i>	1	QL(60 GM per fill retail)	<i>hydrocortisone (topical) SOLN 1 %</i>	1	
<i>fluocinonide CREA 0.1 %</i>	1		<i>hydrocortisone acetate (topical) CREA 2.5 %</i>	1	
<i>fluocinonide GEL</i>	1	QL(60 GM per fill retail)	<i>hydrocortisone acetate (topical) OINT</i>	1	
<i>fluocinonide OINT</i>	1	QL(60 GM per fill retail)	HYDROCORTISONE ACETATE CREA	2	
<i>fluocinonide SOLN</i>	1	QL(60 ML per fill retail)	<i>hydrocortisone butyrate CREA</i>	NP	
<i>flurandrenolide CREA</i>	1		<i>hydrocortisone butyrate LOTN</i>	NP	
<i>flurandrenolide LOTN</i>	NP		<i>hydrocortisone butyrate OINT</i>	NP	
<i>fluticasone propionate CREA 0.05 %</i>	1	QL(60 GM per fill retail)	<i>hydrocortisone butyrate SOLN</i>	1	QL(60 ML per fill retail)
<i>fluticasone propionate LOTN</i>	NP		<i>hydrocortisone valerate CREA</i>	1	
<i>fluticasone propionate OINT</i>	1	QL(60 GM per fill retail)	<i>hydrocortisone valerate OINT</i>	1	
<i>halcinonide CREA</i>	NP		HYDROCORTISONE GEL 2 %	NP	
<i>halobetasol propionate CREA</i>	1		HYDROXATE GEL	NP	
<i>halobetasol propionate OINT</i>	1		HYDROXYM GEL	NP	
HALOG CREA ( <i>halcinonide</i> )	NP		KENALOG AERS ( <i>triamcinolone acetonide (topical)</i> )	NP	
<i>hydrocortisone (topical) CREA 0.5 %</i>	1	QL(30 GM per fill retail)	LOCOID LIPOCREAM	NP	
<i>hydrocortisone (topical) CREA 2.5 %</i>	1	QL(453.6 GM per fill retail)	LOCOID LOTN ( <i>hydrocortisone butyrate</i> )	NP	
<i>hydrocortisone (topical) CREA 1 %</i>	1	QL(85.2 GM per fill retail); RX/OTC	<i>mometasone furoate CREA</i>	1	QL(50 GM per fill retail)
<i>hydrocortisone (topical) LOTN 1 %</i>	1	QL(99 GM per fill retail)	<i>mometasone furoate OINT</i>	1	QL(45 GM per fill retail)
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1	QL(59 ML per fill retail)	<i>mometasone furoate SOLN</i>	1	QL(60 ML per fill retail)
<i>hydrocortisone (topical) OINT 0.5 %</i>	1				

Drug Name	Drug Tier	Requirements/Limits
SYNALAR CREA (fluocinolone acetonide)	NP	
SYNALAR OINT (fluocinolone acetonide)	NP	
TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	NP	
TOPICORT SPRAY LIQD (desoximetasone)	NP	
TOPICORT CREA 0.25 % (desoximetasone)	NP	
TOPICORT CREA 0.05 % (desoximetasone)	NP	QL(60 GM per fill retail)
TOPICORT GEL (desoximetasone)	NP	
triamcinolone acetonide (topical) AERS	NP	
triamcinolone acetonide (topical) CREA 0.5 %	1	QL(15 GM per fill retail)
triamcinolone acetonide (topical) CREA 0.1 %	1	QL(85.2 GM per fill retail)
triamcinolone acetonide (topical) CREA 0.025 %	1	QL(160 GM per fill retail)
triamcinolone acetonide (topical) LOTN	NP	QL(60 ML per fill retail)
triamcinolone acetonide (topical) OINT 0.05 %	1	
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	1	QL(80 GM per fill retail)
triamcinolone acetonide (topical) OINT 0.5 %	1	QL(15 GM per fill retail)
triamcinolone acetonide- dimethicone-silicone	1	
TRIVIX 0.1 %-5 %	2	
<b>Eczema Agents</b>		
ADBRY SOAJ	2	SP; PA
ADBRY SOSY	2	SP; PA
ANZUPGO CREA EX 20 MG/GM	NP	PA
CIBINQO	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
DUPIXENT SOAJ	2	SP; PA
DUPIXENT SOSY 300 MG/2ML	2	SP; PA
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	2	SP; PA
EBGLYSS SOAJ	2	SP; PA
EBGLYSS SOSY	2	SP; PA
OPZELURA	NP	PA
<b>Emollient/Keratolytic Agents</b>		
GORDONS UREA CREA 40 %	2	QL(85.05 GM per fill retail); RX/OTC
urea CREA 40 %	1	QL(85.05 GM per fill retail); RX/OTC
urea LOTN 40 %	1	QL(325 GM per fill retail)
<b>Emollients</b>		
lactic acid (ammonium lactate) CREA	1	QL(385 GM per fill retail); RX/OTC
lactic acid (ammonium lactate) LOTN 12 %	1	QL(400 GM per fill retail; 400 per fill mail); RX/OTC
<b>Hair Growth Agents</b>		
LEQSELVI TABS PO 8 MG	NP	SP; PA
LITFULO	NP	SP; PA
<b>Immunomodulating Agents - Systemic</b>		
NEMLUVIO	NP	SP; PA
<b>Immunomodulating Agents - Topical</b>		
imiquimod 5 %	1	QL(48 EA per 180 day(s) retail)
<b>Immunosuppressive Agents - Topical</b>		
ELIDEL (pimecrolimus)	2	QL(1 GM daily); AL(At least 2 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pimecrolimus</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA	<i>lidocaine hcl PRSY</i>	1	QL(85 ML per fill retail)
<i>tacrolimus (topical) OINT 0.1 %</i>	1	PA	<i>lidocaine CREA 4 %</i>	1	QL(76.5 GM per fill retail)
<i>tacrolimus (topical) OINT 0.03 %</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA	LIDOCAINE CREA	2	QL(85 GM per fill retail)
<b>Keratolytic/Antimitotic/Vesicant Agents</b>			<i>lidocaine-prilocaine CREA</i>	1	QL(5800 GM per fill retail)
DERMACINRX SALICYLIC ACID GEL 6 %	2	QL(40 GM per fill retail)	LIDOMAX GEL 2 %	2	QL(85 GM per fill retail); RX/OTC
<i>podofilox SOLN</i>	1	QL(4 ML per fill retail)	PROXIVOL GEL 2 %	2	QL(85 GM per fill retail); RX/OTC
<i>salicylic acid GEL 6 %</i>	1	QL(40 GM per fill retail)	<b>Misc. Topical</b>		
<b>Local Anesthetics - Topical</b>			<i>lanolin (topical) CREA</i>	1	
<i>capsaicin CREA 0.035 %</i>	1	QL(120 GM per fill retail; 120 per fill mail)	<i>zinc oxide (topical) OINT 20 %</i>	1	QL(60 GM per fill retail)
<i>capsaicin CREA 0.025 %, 0.075 %</i>	1	QL(60 GM per fill retail)	<b>Phosphodiesterase 4 (PDE4) Inhibitors - Topical</b>		
<i>capsaicin CREA 0.1 %</i>	1	QL(56.6 GM per fill retail)	ZORYVE CREA EX	NP	PA
CASTIVA WARMING LOTN	2	QL(113 GM per fill retail)	ZORYVE FOAM EX	NP	
COLLAVERA GEL 2 %	2	QL(85 GM per fill retail); RX/OTC	<b>Rosacea Agents</b>		
DERMACINRX LIDOCAINE CREA 3 %	2	QL(85 GM per fill retail); RX/OTC	<i>metronidazole (topical) CREA</i>	1	QL(45 GM per fill retail)
<i>dibucaine</i>	1	QL(56.7 GM per fill retail)	<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(45 GM per fill retail)
<i>lidocaine hcl CREA 4 %</i>	1	1 package(s) per 34 day(s) retail; 1 package(s) per 34 day(s) mail	<i>metronidazole (topical) LOTN</i>	1	
<i>lidocaine hcl CREA 3 %</i>	1	QL(85 GM per fill retail); RX/OTC	<b>Scabicides &amp; Pediculicides</b>		
<i>lidocaine hcl GEL 2 %</i>	1	QL(85 GM per fill retail); RX/OTC	BEDDING SPRAY LICE TREATMENT AERO 0.5 %	2	
			CVS LICE-BEDBUG-MITE AERO 0.5 %	2	
			FT LICE-BEDBUG-MITE AERO 0.5 %	2	
			GNP HOME LICE/BEDBUG/DUST MITE AERO 0.5 %	2	
			<i>ivermectin (pediculicide)</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>malathion</i>	1	QL(59 ML per fill retail); 2 max fill(s) per 30 day(s) retail
NATROBA ( <i>spinosad</i> )	2	QL(120 ML per fill retail); 2 max fill(s) per 30 day(s) retail; AL(At least 2 yrs old)
NIX LICE KILLING SPRAY LIQD XX	2	
<i>permethrin AERO</i>	1	
<i>permethrin CREA</i>	1	QL(60 GM per fill retail)
<i>permethrin LIQD EX</i>	1	
<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	1	
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	1	
SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %	2	
SCHOOLTIME SHAMPOO SHAM	2	
<i>spinosad</i>	NP	QL(120 ML per fill retail); 2 max fill(s) per 30 day(s) retail; AL(At least 2 yrs old)
STOP LICE STEP 3 AERO 0.5 %	2	
STOP LICE AERO 0.5 %	2	
Tar Products		
<i>coal tar extract SHAM 0.5 %</i>	1	
Wound Care Products		
APLIGRAF DISK	2	PA
<b>DIAGNOSTIC PRODUCTS</b>		

Drug Name	Drug Tier	Requirements/ Limits
Diagnostic Drugs		
<i>cosyntropin SOLR</i>	1	SP; PA
THYROGEN 0.9 MG	2	SP; PA
Diagnostic Tests		
2SAN COVID-19 RAPID SELF TEST KIT	0	
ACCU-CHEK GUIDE TEST STRP	2	INSULIN USERS LIMITED TO 200 PER 30 DAYS, NON-INSULIN USERS LIMITED TO 100 PER 90 DAYS; RX/OTC
ACCUA SARS-COV-2	0	
ADVIN COVID-19 ANTIGEN TEST KIT	0	
BD VERITOR SYSTEM SARS-COV-2	0	
BINAXNOW COVID-19 AG CARD	0	
BINAXNOW COVID-19 AG HOME TEST KIT	0	
BINAXNOW COVID-19 ANTIGEN SELF KIT	0	
CARESTART COVID-19 HOME TEST KIT	0	
CHEMSTRIP K STRP	2	
CLEARDETECT COVID-19 AG HOME KIT	0	
CLINITEST RAPID COVID-19 TEST KIT	0	
COBAS LIAT SARS-COV-2 ASSAY	0	
COBAS LIAT SARS-COV-2 CONTROL	0	RX/OTC
COVID-19 AT HOME ANTIGEN TEST KIT	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COVID-19 AT-HOME TEST KIT	0		LYRA SARS-COV-2 ASSAY	0	
COVID-19 OTC ANTIGEN 1-PACK KIT	0		OHC COVID-19 ANTIGEN SELF TEST KIT	0	
COVID-19 OTC ANTIGEN 2-PACK KIT	0		ON/GO COVID-19 ANTIGEN TEST KIT	0	
CVS COVID-19 AT HOME TEST KIT KIT	0		ON/GO ONE COVID-19 HOME TEST KIT	0	
DIATRUST COVID-19 HOME TEST KIT	0		PILOT COVID-19 AT-HOME TEST KIT	0	
ELLUME COVID-19 HOME TEST KIT	0		QUICKVUE AT-HOME COVID-19 TEST KIT	0	
FASTEP COVID-19 ANTIGEN TEST KIT	0		QUICKVUE SARS ANTIGEN TEST	0	
FLOWFLEX COVID-19 AG HOME TEST KIT	0		RAPID RESPONSE COVID-19	0	
GENABIO COVID-19 RAPID TEST KIT	0		RELION KETONE TEST STRP	2	
GOTOKNOW COVID-19 ANTIGEN RAPI KIT	0		SOFIA SARS ANTIGEN FIA	0	
ID NOW COVID-19	0		SOFIA2 SARS ANTIGEN FIA	0	
ID NOW COVID-19 2.0 CONTROL	0	RX/OTC	SPEEDY SWAB COVID-19 ANTIGEN KIT	0	
ID NOW COVID-19 2.0 TEST	0		XPRT XPRESS SARS-COV-2	0	
ID NOW COVID-19 CONTROL	0	RX/OTC	<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>		
IHEALTH COVID-19 RAPID TEST KIT	0		Digestive Enzymes		
INDICAID COVID-19 RAPID TEST KIT	0		CREON CPEP	2	
INTELISWAB COVID-19 RAPID TEST KIT	0		SUCRAID	2	SP; PA
KETONE TEST STRP	2				
KETOSTIX STRP	2				
LUCIRA CHECK IT COVID-19 TEST KIT	0	RX/OTC			
LUCIRA COVID-19 ALL-IN-ONE KIT	0	RX/OTC			
LYRA DIRECT SARS-COV-2 ASSAY	0				

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	

**DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure**

**Carbonic Anhydrase Inhibitors**

<i>acetazolamide CP12</i>	1	MP
<i>acetazolamide TABS</i>	1	MP
<i>methazolamide TABS</i>	1	MP

**Diuretic Combinations**

<i>amiloride &amp; hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>spironolactone &amp; hydrochlorothiazide</i>	1	MP
<i>triamterene &amp; hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	QL(1 EA daily); MP
<i>triamterene &amp; hydrochlorothiazide TABS</i>	1	QL(1 EA daily); MP

**Loop Diuretics**

<i>bumetanide TABS</i>	1	MP
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	1	MP
<i>furosemide TABS</i>	1	MP
<i>SOANZ TABS 20 MG</i>	2	MP
<i>toremide TABS 20 MG</i>	1	MP
<i>toremide TABS 5 MG, 10 MG, 100 MG</i>	1	QL(1 EA daily); MP

**Potassium Sparing Diuretics**

<i>amiloride hcl TABS</i>	1	QL(4 EA daily)
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Drug Name	Drug Tier	Requirements/Limits
<i>spironolactone TABS</i>	1	MP

**Thiazides and Thiazide-Like Diuretics**

<i>chlorthalidone 25 MG, 50 MG</i>	1	MP
<i>hydrochlorothiazide CAPS</i>	1	MP
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1	MP
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	1	MP
<i>metolazone</i>	1	MP

**ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones**

**Bone Density Regulators**

<i>ACTONEL TABS 35 MG (risedronate sodium)</i>	NP	4 per 28 days; QL(4 EA per 28 day(s) retail)
<i>ACTONEL TABS 150 MG (risedronate sodium)</i>	NP	
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily); MP
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	QL(0.15 EA daily); MP
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP
<i>AELVIA TBEC (risedronate sodium)</i>	NP	
<i>BONSITY SOPN 560 MCG/2.24ML</i>	2	PA
<i>calcitonin (salmon) NA</i>	1	QL(4 ML per 30 day(s) retail)
<i>calcitonin (salmon) IJ</i>	1	QL(2 ML per 30 day(s) retail)
<i>EVENTITY</i>	2	SP; PA
<i>ibandronate sodium SOLN</i>	1	SP; PA
<i>ibandronate sodium TABS</i>	1	PA
<i>NATPARA</i>	2	PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PAMIDRONATE DISODIUM SOLN	2	SP; PA	OMNITROPE SOCT	NP	SP; PA
PROLIA SOSY	2	SP; PA	SKYTROFA	NP	SP; PA
<i>risedronate sodium TABS 35 MG</i>	NP	4 per 28 days; QL(4 EA per 28 day(s) retail)	SOGROYA	2	SP; PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)	Hormone Receptor Modulators		
<i>risedronate sodium TABS 150 MG</i>	NP		<i>raloxifene hcl</i>	1	QL(1 EA daily)
<i>risedronate sodium TBEC</i>	NP		Insulin-Like Growth Factors (Somatomedins)		
<i>teriparatide SOPN</i>	1	PA	INCRELEX	2	SP; PA
TERIPARATIDE SOPN	2	PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
XGEVA SOLN	2	SP; PA	FENSOLVI (6 MONTH) SC	2	SP; PA
<i>zoledronic acid CONC</i>	1	SP; PA	LUPRON DEPOT-PED (1-MONTH)	2	SP; PA
<i>zoledronic acid SOLN 5 MG/100ML</i>	1	SP; PA	LUPRON DEPOT-PED (3-MONTH)	2	SP; PA
ZOLEDRONIC ACID SOLN	2	SP; PA	LUPRON DEPOT-PED (6-MONTH) IM	2	SP; PA
Corticotropin			SUPPRELIN LA	NP	SP; PA
ACTHAR GEL	2	SP; PA	SYNAREL	2	SP; PA
CORTROPHIN GEL	2	SP; PA	Metabolic Modifiers		
Fertility Regulators			ALDURAZYME	2	SP; PA
CHORIONIC GONADOTROPIN IM	2	PA	<i>betaine</i>	1	SP; PA
NOVAREL IM 5000 UNIT	2	PA	BUPHENYL POWD ( <i>sodium phenylbutyrate</i> )	2	SP; PA
PREGNYL IM	2	PA	BUPHENYL TABS ( <i>sodium phenylbutyrate</i> )	2	SP; PA
GnRH/LHRH Antagonists			<i>calcitriol CAPS</i>	1	
ORLISSA	2	SP; PA	CARBAGLU ( <i>carglumic acid</i> )	2	SP; PA
Growth Hormone Receptor Antagonists			<i>carglumic acid</i>	NP	SP; PA
SOMAVERT	2	SP; PA	<i>cinacalcet hcl</i>	1	SP; PA
Growth Hormones			CRYSVITA	2	SP; PA
GENOTROPIN MINIQUICK PRSY	2	SP; PA	ELAPRASE	2	SP; PA
GENOTROPIN CART SC	2	SP; PA	FABRAZYME	2	SP; PA
NGENLA	NP	SP; PA	GALAFOLD	2	QL(0.5 EA daily); SP; PA
NORDITROPIN FLEXPLO SOPN	2	SP; PA	<i>glycerol phenylbutyrate 1.1 GM/ML</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/Limits
IMCIVREE SOLN SC	NP	SP; PA
KANUMA	2	SP; PA
<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	1	QL(30 ML daily)
<i>levocarnitine (metabolic modifiers) TABS</i>	1	QL(3 EA daily)
LUMIZYME	2	SP; PA
MYALEPT	2	SP; PA
NAGLAZYME	2	SP; PA
<i>nitisinone CAPS</i>	1	SP; PA
OLPRUVA (2 GM DOSE) THPK	NP	SP
OLPRUVA (3 GM DOSE) THPK	NP	SP
OLPRUVA (4 GM DOSE) THPK	NP	SP
OLPRUVA (5 GM DOSE) THPK	NP	SP
OLPRUVA (6 GM DOSE) THPK	NP	SP
OLPRUVA (6.67 GM DOSE) THPK	NP	SP
ORFADIN SUSP	2	SP; PA
PALYNZIQ	2	SP; PA
<i>paricalcitol SOLN</i>	1	SP; PA
PARSABIV	2	SP; PA
PHEBURANE PLLT	2	PA
RAVICTI 1.1 GM/ML ( <i>glycerol phenylbutyrate</i> )	2	SP; PA
REVCIVI	2	SP; PA
<i>sapropterin dihydrochloride PACK</i>	1	SP; PA
<i>sapropterin dihydrochloride TABS</i>	1	SP; PA
<i>sodium phenylbutyrate POWD</i>	NP	SP; PA
<i>sodium phenylbutyrate TABS</i>	NP	SP; PA
STRENSIQ	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
VIMIZIM	2	SP; PA
XPHOZAH	NP	SP
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	1	QL(5 ML per fill retail)
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1	QL(5 ML per fill retail)
<i>desmopressin acetate SOLN IJ</i>	1	SP; PA
DESMOPRESSIN ACETATE SOLN NA	2	SP; PA
<i>desmopressin acetate TABS</i>	1	QL(6 EA daily)
Somatostatic Agents		
<i>lanreotide acetate</i>	1	SP; PA
LANREOTIDE ACETATE	2	SP; PA
<i>octreotide acetate KIT</i>	1	SP; PA
<i>octreotide acetate SOLN</i>	1	SP; PA
<i>octreotide acetate SOSY</i>	1	SP; PA
SIGNIFOR	2	SP; PA
SIGNIFOR LAR	2	SP; PA
SOMATULINE DEPOT	2	SP; PA
Vasopressin Receptor Antagonists		
<i>tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG</i>	1	SP; PA
<i>tolvaptan TABS</i>	1	SP; PA
<i>tolvaptan TBPK</i>	1	SP; PA
<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>		
Estrogen Combinations		
COMBIPATCH PTTW	2	QL(8 EA per 28 day(s) retail)
<i>estradiol &amp; norethindrone acetate TABS</i>	1	
MYFEMBREE	2	
<i>norethindrone acetate-ethinyl estradiol</i>	0	
ORIAHNN	2	PA

Drug Name	Drug Tier	Requirements/Limits
PREMPHASE	2	QL(1 EA daily)
PREMPRO	2	QL(1 EA daily)
<b>Estrogens</b>		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	2	QL(0.29 EA daily); MP
<i>estradiol PTTW</i>	1	QL(0.29 EA daily); MP
<i>estradiol PTWK</i>	1	QL(0.143 EA daily); MP
<i>estradiol TABS</i>	1	MP
<i>estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG</i>	1	QL(1 EA daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
<b>Fluoroquinolones</b>		
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	1	
CIPRO SUSR	2	
<i>levofloxacin SOLN PO</i>	1	
<i>levofloxacin TABS</i>	1	QL(1 EA daily; 14 EA per fill retail)
<i>moxifloxacin hcl TABS</i>	1	
<i>ofloxacin 300 MG, 400 MG</i>	NP	QL(56 EA per fill retail)
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
<b>Antiflatulents</b>		
GAS RELIEF LIQD PO 40 MG/0.6ML	2	QL(30 ML per fill retail)
<i>simethicone CHEW 80 MG</i>	1	
<i>simethicone LIQD PO</i>	1	QL(30 ML per fill retail)
<i>simethicone SUSP</i>	1	QL(45 ML per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<b>Bile Acid Synthesis Disorder Agents</b>		
CHOLBAM	2	QL(5 EA daily); SP; PA
CTEXLI TABS PO 250 MG	2	SP; PA
<b>Farnesoid X Receptor (FXR) Agonists</b>		
OCALIVA	2	SP; PA
<b>Gallstone Solubilizing Agents</b>		
<i>chenodiol</i>	1	SP; PA
<i>ursodiol CAPS</i>	1	QL(3 EA daily); MP
<i>ursodiol TABS 250 MG</i>	1	QL(7 EA daily); MP
<b>Gastrointestinal Stimulants</b>		
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1	
<i>metoclopramide hcl TABS 10 MG</i>	1	
<i>metoclopramide hcl TABS 5 MG</i>	1	MP
<b>Inflammatory Bowel Agents</b>		
<i>balsalazide disodium CAPS</i>	1	QL(9 EA daily)
CANASA SUPP ( <i>mesalamine</i> )	NP	
ENTYVIO PEN SOAJ	NP	SP; PA
IMULDOSA SOLN IV 130 MG/26ML	NP	SP; PA
LIALDA TBEC ( <i>mesalamine</i> )	NP	
<i>mesalamine w/ cleanser</i>	1	
<i>mesalamine ENEM</i>	1	QL(60 ML daily)
<i>mesalamine SUPP</i>	1	
<i>mesalamine TBEC 1.2 GM</i>	1	
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)
OMVOH (300 MG DOSE) SOAJ	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
OMVOH (300 MG DOSE) SOSY	NP	SP; PA
OMVOH SOAJ	NP	SP; PA
OMVOH SOLN	NP	SP; PA
OMVOH SOSY	NP	SP; PA
SELARSDI SOLN IV 130 MG/26ML	NP	SP
SKYRIZI SOCT	NP	SP; PA
SKYRIZI SOLN	NP	SP; PA
STEQEYMA	NP	SP; PA
<i>sulfasalazine TABS</i>	1	MP
<i>sulfasalazine TBEC</i>	1	MP
TREMFYA PEN SOAJ SC 200 MG/2ML	NP	SP; PA
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	SP; PA
TREMFYA SOLN IV	NP	SP; PA
TREMFYA SOSY SC 200 MG/2ML	NP	SP; PA
VELSIPITY	NP	SP; PA
ZYMFENTRA (1 PEN) AJKT	NP	SP; PA
ZYMFENTRA (2 PEN) AJKT	NP	SP; PA
ZYMFENTRA (2 SYRINGE) PSKT	NP	SP; PA
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	NP	PA
IBSRELA	NP	PA
LINZESS	2	PA
LOTRONEX ( <i>alosetron hcl</i> )	NP	PA
Peripheral Opioid Receptor Antagonists		
MOVANTIK	2	PA

Drug Name	Drug Tier	Requirements/Limits
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1	MP
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	2	RX/OTC
<i>lanthanum carbonate CHEW</i>	1	
RENVELA TABS ( <i>sevelamer carbonate</i> )	NP	
<i>sevelamer carbonate PACK</i>	1	
<i>sevelamer carbonate TABS</i>	1	
<i>sevelamer hcl</i>	1	
Short Bowel Syndrome (SBS) Agents		
GATTEX	2	SP; PA
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		
Alkalinizers		
CYTRA K CRYSTALS PACK 1002 MG-3300 MG	2	
<i>potassium citrate (alkalinizer) TBCR</i>	1	
<i>sodium citrate &amp; citric acid</i>	1	QL(16.67 ML daily); RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	2	SP; PA
PROCYSBI CPDR	2	SP; PA
PROCYSBI PACK	2	SP; PA
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
Interstitial Cystitis Agents		

Drug Name	Drug Tier	Requirements/Limits
ELMIRON CAPS	2	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1	
<i>dutasteride</i>	1	
<i>dutasteride-tamsulosin hcl</i>	NP	
ENTADFI	NP	
<i>finasteride</i>	1	QL(1 EA daily); MP
JALYN ( <i>dutasteride-tamsulosin hcl</i> )	NP	
RAPAFLO 4 MG ( <i>silodosin</i> )	NP	
<i>silodosin</i>	1	
<i>tamsulosin hcl</i>	1	QL(2 EA daily); MP
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
Urinary Stone Agents		
<i>tiopronin TABS</i>	1	SP; PA
Vesicoureteral Reflux (VUR) Agents		
DEFLUX	2	SP; PA
<b>GOUT AGENTS - Drugs to Treat Gout</b>		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1	MP
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1	MP
<i>colchicine TABS</i>	1	1 fill per 30 days; QL(6 EA per fill retail); 1 max fill(s) per 30 day(s) retail
KRYSTEXXA	2	SP; PA
Uricosurics		
<i>probenecid</i>	1	MP
<b>HEMATOLOGICAL AGENTS - MISC. - Drugs to</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Treat Blood Disorders</b>		
Antihemophilic Products		
ADVATE	2	SP; PA
ADYNOVATE	2	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	2	SP; PA
ALPHANATE SOLR	2	SP; PA
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	2	SP; PA
ALPROLIX	2	SP; PA
ALTUVIIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	2	SP; PA
BENEFIX KIT	2	SP; PA
COAGADEX	2	SP; PA
CORIFACT	2	SP; PA
ELOCTATE	2	SP; PA
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	2	SP; PA
FEIBA	2	SP; PA
FIBRYGA	2	SP; PA
HEMGENIX	2	SP; PA
HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	2	SP; PA
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	2	SP; PA
HUMATE-P SOLR	2	SP; PA
IDELVION	2	SP; PA
IXINITY SOLR	2	SP; PA
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	2	SP; PA
KCENTRA	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
KOATE-DVI SOLR 500 UNIT, 1000 UNIT	2	SP; PA
KOATE SOLR	2	SP; PA
KOGENATE FS KIT	2	SP; PA
KOVALTRY	2	SP; PA
NOVOEIGHT	2	SP; PA
NOVOSEVEN RT	2	SP; PA
NUWIQ KIT	2	SP; PA
NUWIQ SOLR	2	SP; PA
OBIZUR	2	SP; PA
PROFILNINE	2	SP; PA
REBINYN	2	SP; PA
RECOMBINATE SOLR	2	SP; PA
RIASTAP	2	SP; PA
RIXUBIS SOLR	2	SP; PA
ROCTAVIAN	2	SP; PA
SEVENFACT	2	SP; PA
TRETTEN	2	SP; PA
VONVENDI	2	SP; PA
WILATE KIT	2	SP; PA
XYNTHA	2	SP; PA
XYNTHA SOLOFUSE	2	SP; PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	1	SP; PA
Complement Inhibitors		
BERINERT KIT	2	SP; PA
CINRYZE SOLR IV	2	SP; PA
RUCONEST	2	SP; PA
SOLIRIS	2	SP; PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	2	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1	MP
Human Protein C		
CEPROTIN	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
Plasma Kallikrein Inhibitors		
KALBITOR	2	SP; PA
TAKHZYRO SOLN	2	SP; PA
Plasma Proteins		
THROMBATE III 500 UNIT	2	SP; PA
Platelet Aggregation Inhibitors		
<i>aspirin-dipyridamole</i>	1	
BRILINTA 60 MG, 90 MG ( <i>ticagrelor</i> )	2	QL(2 EA daily)
<i>cilostazol</i>	1	QL(2 EA daily); MP
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 EA daily); MP
<i>clopidogrel bisulfate 300 MG</i>	1	
<i>dipyridamole</i>	1	MP
<i>prasugrel hcl</i>	1	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1	QL(2 EA daily)
YOSPRALA 81 MG-40 MG	2	
Thrombolytic Agent - Misc		
DEFITELIO	2	SP; PA
<b>HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders</b>		
Agents for Gaucher Disease		
CERDELGA	2	SP; PA
CEREZYME 400 UNIT	2	SP; PA
ELELYSO	2	SP; PA
<i>miglustat</i>	1	SP; PA
VPRIV	2	SP; PA
Agents for Sickle Cell Disease		
CASGEVY	2	SP; PA
DROXIA CAPS	2	
LYFGENIA	NP	SP; PA
SIKLOS TABS	2	PA
Cobalamins		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1		PROCRIT	NP	SP; PA
Folic Acid/Folates			PROCRIT	NP	SP; PA
<i>folic acid TABS 400 MCG, 800 MCG</i>	1	QL(1 EA daily)	RELEUKO SOSY	NP	SP
<i>folic acid TABS 1 MG</i>	1	MP; RX/OTC	RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA
Hematopoietic Gene Therapy			RETACRIT	2	SP; PA
ZYNTEGLO	2	SP; PA	ROLVEDON	NP	SP
Hematopoietic Growth Factors			RYZNEUTA SOSY SC 20 MG/ML	NP	SP
DOPTELET	2	SP; PA	STIMUFEND	NP	SP
<i>eltrombopag olamine PACK 12.5 MG</i>	1	SP; PA	UDENYCA ONBODY SOSY	NP	SP
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	1	SP; PA	UDENYCA SOAJ	NP	SP
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA	UDENYCA SOSY	NP	SP; PA
FULPHILA	2	SP; PA	ZARXIO	NP	SP; PA
FYLNETRA	NP	SP	ZIEXTENZO	NP	SP
GRANIX SOLN 300 MCG/ML	NP	SP; PA	Hematopoietic Mixtures		
GRANIX SOSY	NP	SP; PA	<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	1	QL(1 EA daily)
LEUKINE SOLR IJ	NP	SP; PA	HEMATINIC PLUS VIT/MINERALS TABS	2	QL(1 EA daily)
MIRCERA	NP	SP; PA	Iron		
MULPLETA	2	SP; PA	FERRETT'S TABS	2	QL(2 EA daily)
NEULASTA ONPRO SOSY 6 MG/0.6ML	NP	SP; PA	<i>ferrous fumarate TABS</i>	1	QL(2 EA daily)
NEULASTA SOSY	NP	SP; PA	<i>ferrous gluconate TABS</i>	1	
NEUPOGEN SOLN	2	SP; PA	<i>ferrous sulfate dried TBCR</i>	1	
NEUPOGEN SOSY	2	SP; PA	<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	1	QL(16 ML daily)
NIVESTYM SOLN	NP	SP; PA	<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	QL(3.4 ML daily)
NIVESTYM SOSY	NP	SP; PA	<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	1	MP
NPLATE 250 MCG, 500 MCG	2	SP; PA	<i>ferrous sulfate TBEC</i>	1	
NYPOZI	NP	SP	<i>ferrous sulfate TBEC 325 MG</i>	1	MP
NYVEPRIA	NP	SP; PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
IRON CHEWS PEDIATRIC CHEW	2		<i>doxylamine succinate (sleep)</i>	1	
IRON TABS 28 MG	2		<i>ibuprofen-diphenhydramine citrate</i>	1	
<i>polysaccharide iron complex CAPS</i>	1	QL(1 EA daily)	<i>ibuprofen-diphenhydramine hcl</i>	1	
Stem Cell Mobilizers			UNISOM SLEEPMELTS TBDP 25 MG	2	
<i>plerixafor</i>	1	SP; PA	WAL-SLEEP Z TBDP 25 MG	2	
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>			WAL-SOM TBDP 25 MG	2	
Hemostatics - Systemic			Barbiturate Hypnotics		
<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	1	SP; PA	<i>phenobarbital ELIX</i>	1	
<i>aminocaproic acid TABS 1000 MG</i>	1	SP; PA	<i>phenobarbital TABS</i>	1	
<i>aminocaproic acid TABS 500 MG</i>	1	QL(24 EA per fill retail); SP; PA	PHENOBARBITAL TABS	2	
<i>tranexamic acid TABS</i>	1	QL(30 EA per 5 day(s) retail); 1 max fill(s) per 30 day(s) retail; AL(At least 12 yrs old)	Hypnotics - Tricyclic Agents		
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>			<i>doxepin hcl (sleep)</i>	1	
Antihistamine Hypnotics			Non-Barbiturate Hypnotics		
ALEVE PM 25 MG-220 MG	2		<i>dexmedetomidine hcl in sodium chloride SOLN</i>	1	
<i>diphenhydramine hcl (sleep) CAPS</i>	1		<i>dexmedetomidine hcl SOLN 200 MCG/2ML</i>	1	
<i>diphenhydramine hcl (sleep) LIQD</i>	1		<i>estazolam</i>	1	
<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	1		<i>eszopiclone</i>	1	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	1	QL(4 EA daily)	<i>flurazepam hcl</i>	NP	QL(1 EA daily)
<i>diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG</i>	1		IGALMI FILM	NP	
			<i>midazolam hcl SOLN IJ</i>	1	
			MIDAZOLAM HCL SOLN IJ	2	
			RESTORIL 22.5 MG ( <i>temazepam</i> )	NP	
			<i>temazepam 22.5 MG</i>	NP	
			<i>temazepam 15 MG, 30 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
			<i>temazepam 7.5 MG</i>	1	
			<i>triazolam</i>	1	QL(1 EA daily)
			<i>zaleplon</i>	1	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
ZOLPIDEM TARTRATE CAPS	NP	
<i>zolpidem tartrate</i> SUBL	NP	
<i>zolpidem tartrate</i> TABS	1	QL(1 EA daily)
<i>zolpidem tartrate</i> TBCR	1	
<b>Orexin Receptor Antagonists</b>		
QUVIVIQ	NP	
<b>Selective Melatonin Receptor Agonists</b>		
<i>ramelteon</i>	1	
<i>tasimelteon</i> CAPS	1	SP; PA
<b>LAXATIVES - Bowel Treatment Drugs</b>		
<b>Bulk Laxatives</b>		
<i>calcium polycarbophil</i> TABS	1	QL(10 EA daily)
<i>psyllium</i> CAPS 0.36 GM, 0.52 GM	1	
<i>psyllium</i> POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 %	1	
SB FIB LAX ORANGE POWD 33 %	2	
<b>Electrolyte-based Osmotic Laxatives</b>		
<i>magnesium citrate</i> 1.745 GM/30ML	1	
<i>magnesium hydroxide</i> SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	1	QL(33 ML daily)
<i>sodium phosphate monobasic-sodium phosphate dibasic</i> PR 19 GM/118ML-7 GM/118ML, 19 GM/197ML-7 GM/197ML, 6 GM/133ML-16 GM/133ML, 7 GM/118ML-19 GM/118ML, 9.5 GM/59ML-3.5 GM/59ML	1	
<b>Laxative Combinations</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i> SOLR	1	QL(4000 ML per fill retail)
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	QL(4000 ML per fill retail)
<i>sennosides-docusate sodium</i> TABS	1	QL(4 EA daily)
<b>Laxatives - Miscellaneous</b>		
<i>glycerin (laxative)</i> SUPP 2 GM	1	
<i>lactulose</i> SOLN	1	
<i>polyethylene glycol 3350</i> PACK	1	QL(34 EA daily)
<i>polyethylene glycol 3350</i> POWD	1	QL(34 GM daily)
SORBITOL PO 70 %	2	
<b>Stimulant Laxatives</b>		
<i>bisacodyl</i> SUPP	1	QL(12 EA per fill retail)
<i>bisacodyl</i> TBEC	1	QL(1 EA daily)
<i>sennosides</i> TABS 8.6 MG	1	
<b>Surfactant Laxatives</b>		
<i>docusate sodium</i> CAPS 100 MG, 250 MG	1	QL(3 EA daily)
<i>docusate sodium</i> CAPS 50 MG	1	
<i>docusate sodium</i> LIQD 50 MG/5ML, 100 MG/10ML	1	
DOCUSATE SODIUM SYRP	2	
<i>docusate sodium</i> TABS	1	
<b>MACROLIDES - Drugs to Treat Bacterial Infections</b>		
<b>Azithromycin</b>		
<i>azithromycin</i> SUSR 100 MG/5ML	1	QL(15 ML per fill retail)
<i>azithromycin</i> SUSR 200 MG/5ML	1	QL(30 ML per fill retail)
<i>azithromycin</i> TABS 250 MG	1	QL(6 EA per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin TABS 600 MG</i>	1	QL(8 EA per 28 day(s) retail)	ACCU-CHEK GUIDE ME KIT	2	Limit 1 every 2 years; QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
<i>azithromycin TABS 500 MG</i>	1	QL(4 EA daily)	ACCU-CHEK GUIDE KIT	2	Limit 1 every 2 years; QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
Clarithromycin			ACCU-CHEK SAFE-T PRO LANCETS	2	QL(6.67 EA daily); RX/OTC
<i>clarithromycin SUSR</i>	1	QL(200 ML per fill retail)	ACCU-CHEK SOFTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC
<i>clarithromycin TABS</i>	1	QL(28 EA per fill retail)	ACCUTREND PLUS	2	
<i>clarithromycin TB24</i>	1	QL(14 EA per fill retail)	ACTI-LANCE 28G	2	QL(6.67 EA daily); RX/OTC
Erythromycins			ACTI-LANCE LITE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
E.E.S. GRANULES SUSR ( <i>erythromycin ethylsuccinate</i> )	NP		ACTI-LANCE SPECIAL LANCETS 17G	2	QL(6.67 EA daily); RX/OTC
ERYPED 200 SUSR ( <i>erythromycin ethylsuccinate</i> )	NP		ACTI-LANCE UNIVERSAL 23G	2	QL(6.67 EA daily); RX/OTC
<i>erythromycin base CPEP</i>	NP		ADVANCED MOBILE LANCET	2	QL(6.67 EA daily); RX/OTC
<i>erythromycin base TABS</i>	1		ADVANTAGE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
<i>erythromycin base TBEC</i>	1		ADVOCATE LANCETS	2	QL(6.67 EA daily); RX/OTC
<i>erythromycin ethylsuccinate SUSR</i>	1		ADVOCATE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
<i>erythromycin ethylsuccinate TABS</i>	1		ADVOCATE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
<b>MEDICAL DEVICES AND SUPPLIES</b>					
Bandages-Dressings-Tape					
ALCOHOL PREP PADS-MISC	2	OTC	ADVOCATE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
Contraceptives					
CONDOMS-MISC	2	QL(36 ea per fill retail)	ADVOCATE SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
Diabetic Supplies					
ACCU-CHEK FASTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC	ADVOCATE SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK GUIDE CONTROL LIQD	2	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)	ADVOCATE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
			AGAMATRIX ULTRA-THIN LANCETS	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AIMSCO TWIST LANCETS 32G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST MC LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
AIMSCO TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	CHOSEN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
AQUALANCE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	CHOSEN SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ASSURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	CLEANLET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ASSURE LANCE LANCETS	2	QL(6.67 EA daily); RX/OTC	CLEVER CHEK LANCETS	2	QL(6.67 EA daily); RX/OTC
ASSURE LANCE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	CLEVER CHOICE COMFORT EZ	2	QL(6.67 EA daily); RX/OTC
ASSURE LANCE PLUS SAFETY 25G	2	QL(6.67 EA daily); RX/OTC	CLEVER CHOICE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
ASSURE LANCE PLUS SAFETY 30G	2	QL(6.67 EA daily); RX/OTC	CLEVER CHOICE LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
ASSURE LANCE SAFETY LANCET 28G	2	QL(6.67 EA daily); RX/OTC	CLEVER CHOICE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
AURORA LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC	COAGUCHEK LANCETS	2	QL(6.67 EA daily); RX/OTC
AURORA LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC	COMFORT ASSURED LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
BD MICROTAINER LANCETS	2	QL(6.67 EA daily); RX/OTC	COMFORT ASSURED LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
CAREONE LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC	COMFORT TOUCH LANCETS 31G	2	QL(6.67 EA daily); RX/OTC
CAREONE LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC	COMFORT TOUCH PLUS LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
CARESENS LANCETS	2	QL(6.67 EA daily); RX/OTC	COMFORT TOUCH PLUS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
CARESENS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	COMFORT TOUCH TWIST LANCET 30G	2	QL(6.67 EA daily); RX/OTC
CARETOUCH SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	CVS LANCETS ORIGINAL	2	QL(6.67 EA daily); RX/OTC
CARETOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	CVS LANCETS THIN 26G	2	QL(6.67 EA daily); RX/OTC
CARETOUCH TWIST LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	CVS ULTRA THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
CARETOUCH TWIST LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	DIATHRIVE LANCET ULTRA THIN 30	2	QL(6.67 EA daily); RX/OTC
CARETOUCH TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	DIATHRIVE LANCETS	2	QL(6.67 EA daily); RX/OTC
			DROPLET LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPLET PERSONAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
DROPSAFE ACTI-LANCE 23G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
DROPSAFE MEDLANCE LANCET 30G	2	QL(6.67 EA daily); RX/OTC	EMBRACE LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC
DRUG MART ON-THE-GO LANCET 30G	2	QL(6.67 EA daily); RX/OTC	EMBRACE PRESSURE ACTIVATED 21G	2	QL(6.67 EA daily); RX/OTC
DRUG MART UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EMBRACE PRESSURE ACTIVATED 28G	2	QL(6.67 EA daily); RX/OTC
DRUG MART UNILET LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	FIFTY50 SAFETY SEAL LANCETS	2	QL(6.67 EA daily); RX/OTC
DRUG MART UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	FIFTY50 UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
EASY COMFORT LANCETS	2	QL(6.67 EA daily); RX/OTC	FINGERSTIX LANCETS	2	QL(6.67 EA daily); RX/OTC
EASY COMFORT LANCETS TWIST TOP	2	QL(6.67 EA daily); RX/OTC	FONDCIRCLE SINGLE USE LANCETS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	FORA LANCETS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LANCETS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 14 DAY READER	2	QL(1 EA per 365 day(s) retail); PA
EASY TOUCH LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 14 DAY SENSOR	2	QL(2 EA per 28 day(s) retail); PA
EASY TOUCH LANCETS 28G/TWIST	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 2 PLUS SENSOR	2	QL(2 EA per 28 day(s) retail); PA
EASY TOUCH LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 2 READER	2	QL(1 EA per 365 day(s) retail); PA
EASY TOUCH LANCETS 30G/TWIST	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 2 SENSOR	2	QL(2 EA per 28 day(s) retail); PA
EASY TOUCH LANCETS 32G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 3 PLUS SENSOR	2	QL(2 EA per 28 day(s) retail); PA
EASY TOUCH LANCETS 32G/TWIST	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE 3 READER	2	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
EASY TOUCH LANCETS 33G/TWIST	2	QL(6.67 EA daily); RX/OTC			
EASY TOUCH SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC			
EASY TOUCH SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FREESTYLE LIBRE 3 SENSOR	2	QL(2 EA per 28 day(s) retail); PA	HAEMOLANCE PLUS MAX FLOW	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA	HAEMOLANCE PLUS PEDIATRIC FLOW	2	QL(6.67 EA daily); RX/OTC
FREESTYLE UNISTICK II LANCETS	2	QL(6.67 EA daily); RX/OTC	H-E-B INCONTROL LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
GAUZE SPONGES	2	RX/OTC	H-E-B INCONTROL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
GENTEEL BUTTERFLY TOUCH LANCET	2	QL(6.67 EA daily); RX/OTC	H-E-B INCONTROL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
GENTLE-LET GP LANCETS	2	QL(6.67 EA daily); RX/OTC	HY-VEE LANCETS	2	QL(6.67 EA daily); RX/OTC
GENTLE-LET LANCETS	2	QL(6.67 EA daily); RX/OTC	HY-VEE THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
GLOBAL INJECT EASE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	IN TOUCH STERILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
GLOBAL INJECT EASE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	KINNEY LANCETS	2	QL(6.67 EA daily); RX/OTC
GLUCOCOM LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	KINNEY THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
GLUCOCOM LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	KROGER HEALTHPRO LANCET 26G	2	QL(6.67 EA daily); RX/OTC
GLUCOCOM LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	KROGER LANCETS	2	QL(6.67 EA daily); RX/OTC
GNP STERILE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	KROGER LANCETS SUPER THIN	2	QL(6.67 EA daily); RX/OTC
GNP STERILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	KROGER LANCETS THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
GNP STERILE LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	LANCETS 28G THIN	2	QL(6.67 EA daily); RX/OTC
GOJJI STERILE LANCETS	2	QL(6.67 EA daily); RX/OTC	LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE	2	QL(6.67 EA daily); RX/OTC	LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE LOW FLOW LANCETS	2	QL(6.67 EA daily); RX/OTC	LANCETS MICRO THIN 33G	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE PLUS	2	QL(6.67 EA daily); RX/OTC	LANCETS SUPER THIN	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE PLUS HIGH FLOW	2	QL(6.67 EA daily); RX/OTC	LANCETS SUPER THIN 28G	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE PLUS LOW FLOW	2	QL(6.67 EA daily); RX/OTC	LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC
			LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LIBERTY MEDICAL LANCETS	2	QL(6.67 EA daily); RX/OTC	MONOLETTOR SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
LITE TOUCH LANCETS	2	QL(6.67 EA daily); RX/OTC	MYGLUCOHEALTH LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
LITETOUCH LANCETS	2	QL(6.67 EA daily); RX/OTC	NOVA SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
LIVE BETTER LANCET SUPER THIN	2	QL(6.67 EA daily); RX/OTC	NOVA SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MEDICHOICE SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC	NOVA SUREFLEX LANCETS	2	QL(6.67 EA daily); RX/OTC
MEDICHOICE SAFETY LANCET EXTRA	2	QL(6.67 EA daily); RX/OTC	ONETOUCH DELICA PLUS LANCET30G	2	QL(6.67 EA daily); RX/OTC
MEDICHOICE SAFETY LANCET NORM	2	QL(6.67 EA daily); RX/OTC	ONETOUCH DELICA PLUS LANCET33G	2	QL(6.67 EA daily); RX/OTC
MEDLANCE PLUS EXTRA 21G	2	QL(6.67 EA daily); RX/OTC	ONETOUCH DELICA SAFETY LANCING	2	QL(6.67 EA daily); RX/OTC
MEDLANCE PLUS LITE 25G	2	QL(6.67 EA daily); RX/OTC	ONETOUCH ULTRASOFT 2 LANCETS	2	QL(6.67 EA daily); RX/OTC
MEDLANCE PLUS SPECIAL 0.8MM	2	QL(6.67 EA daily); RX/OTC	PERFECT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MEDLANCE PLUS SUPERLITE 30G	2	QL(6.67 EA daily); RX/OTC	PERFECT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MEDLANCE PLUS UNIVERSAL 21G	2	QL(6.67 EA daily); RX/OTC	PERFECT POINT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
MEIJER LANCETS	2	QL(6.67 EA daily); RX/OTC	PHARMACIST CHOICE LANCETS	2	QL(6.67 EA daily); RX/OTC
MEIJER LANCETS UNIVERSAL 21G	2	QL(6.67 EA daily); RX/OTC	PIP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MEIJER LANCETS UNIVERSAL 30G	2	QL(6.67 EA daily); RX/OTC	PIP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MEIJER LANCETS UNIVERSAL 33G	2	QL(6.67 EA daily); RX/OTC	PRECISION THINS GP LANCETS	2	QL(6.67 EA daily); RX/OTC
MICROLET LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MICROLET NEXT LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT LANCETS 31G	2	QL(6.67 EA daily); RX/OTC
MM TWIST LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MOBILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	PRODIGY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MONOLET LANCETS	2	QL(6.67 EA daily); RX/OTC	PRODIGY SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
MONOLET OPD LANCETS	2	QL(6.67 EA daily); RX/OTC	PRODIGY TWIST TOP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PSS SELECT GP LANCETS	2	QL(6.67 EA daily); RX/OTC	SAFE-T-LANCE PLUS	2	QL(6.67 EA daily); RX/OTC
PSS SELECT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCET 30G/PRESSURE ACT	2	QL(6.67 EA daily); RX/OTC
PURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
PURE COMFORT SAFETY LANCET 30G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
PX LANCETS MICROTHIN 33G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
PX LANCETS ULTRA THIN 28G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
QC LANCETS SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH PLUS LANCETS	2	QL(6.67 EA daily); RX/OTC
QC LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC
QC UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	SAPS TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC
QC UNILET LANCETS MICRO THIN	2	QL(6.67 EA daily); RX/OTC	SAPSCARE TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC
READYLANCE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	SB LANCETS THIN	2	QL(6.67 EA daily); RX/OTC
REALITY LANCETS	2	QL(6.67 EA daily); RX/OTC	SB LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC
REALITY TRIGGER LANCETS	2	QL(6.67 EA daily); RX/OTC	SENSILANCE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
RELION LANCET DEVICES 30G	2	QL(6.67 EA daily); RX/OTC	SENSILANCE SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
RELION LANCETS	2	QL(6.67 EA daily); RX/OTC	SENSILANCE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
RELION LANCETS MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC	SINGLE-LET	2	QL(6.67 EA daily); RX/OTC
RELION LANCETS THIN 26G	2	QL(6.67 EA daily); RX/OTC	SMARTEST LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
RELION LANCETS ULTRA-THIN 30G	2	QL(6.67 EA daily); RX/OTC	SOLUS V2 LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
RELION ULTRA THIN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	SOLUS V2 TWIST LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
RIGHTEST GL300 LANCETS	2	QL(6.67 EA daily); RX/OTC	STERILANCE TL	2	QL(6.67 EA daily); RX/OTC
SAFE-T-LANCE	2	QL(6.67 EA daily); RX/OTC	SUPER THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
			SURE COMFORT LANCETS 18G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SURE COMFORT LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	ULTILET SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	ULTILET SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ULTRA THIN LANCETS 31G	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	ULTRA-CARE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SURELITE LANCETS	2	QL(6.67 EA daily); RX/OTC	ULTRA-THIN II AUTO LANCET	2	QL(6.67 EA daily); RX/OTC
TECHLITE AST LANCETS	2	QL(6.67 EA daily); RX/OTC	ULTRA-THIN II LANCETS	2	QL(6.67 EA daily); RX/OTC
TECHLITE LANCETS	2	QL(6.67 EA daily); RX/OTC	UNILET COMFORTOUCH LANCET	2	QL(6.67 EA daily); RX/OTC
TECHLITE LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	UNILET EXCELITE	2	QL(6.67 EA daily); RX/OTC
THINLETS GP LANCETS	2	QL(6.67 EA daily); RX/OTC	UNILET EXCELITE II	2	QL(6.67 EA daily); RX/OTC
TODAYS HEALTH THIN LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	UNILET G.P. LANCET	2	QL(6.67 EA daily); RX/OTC
TODAYS HEALTH THIN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNILET G.P. SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC
TRAVEL LANCETS ADVANCED 28G	2	QL(6.67 EA daily); RX/OTC	UNILET GP 28 ULTRA THIN	2	QL(6.67 EA daily); RX/OTC
TRUE COMFORT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	UNILET LANCET	2	QL(6.67 EA daily); RX/OTC
TRUE COMFORT TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC	UNILET MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC
TRUEPLUS LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	UNILET SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC
TRUEPLUS LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	UNILET SUPER-THIN 30G	2	QL(6.67 EA daily); RX/OTC
TRUEPLUS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNILET ULTRA-THIN 28G	2	QL(6.67 EA daily); RX/OTC
TRUEPLUS LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 1	2	QL(6.67 EA daily); RX/OTC
TRUEPLUS SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2	2	QL(6.67 EA daily); RX/OTC
TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 COMFORT	2	QL(6.67 EA daily); RX/OTC
ULTILET CLASSIC LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 EXTRA	2	QL(6.67 EA daily); RX/OTC
ULTILET LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 NEONATAL	2	QL(6.67 EA daily); RX/OTC
			UNISTIK 2 NORMAL	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UNISTIK 2 SUPER	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 COMFORT	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD LANCETS	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 EXTRA	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 GENTLE	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 NEONATAL	2	QL(6.67 EA daily); RX/OTC	ZEV RX TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 NORMAL	2	QL(6.67 EA daily); RX/OTC	<b>Misc. Devices</b>		
UNISTIK CZT COMFORT	2	QL(6.67 EA daily); RX/OTC	ADVOCATE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
UNISTIK CZT NORMAL	2	QL(6.67 EA daily); RX/OTC	ALCOH-GLOVE CONTOURED WIPE	2	QL(6.67 EA daily); RX/OTC
UNISTIK NORMAL	2	QL(6.67 EA daily); RX/OTC	ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC
UNISTIK PRO SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC	ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
UNISTIK SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
UNISTIK SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
UNISTIK TOUCH SAFETY LANC 21G	2	QL(6.67 EA daily); RX/OTC	ALCOHOL SWABSTICK	2	QL(6.67 EA daily); RX/OTC
UNISTIK TOUCH SAFETY LANC 23G	2	QL(6.67 EA daily); RX/OTC	AUM ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
UNISTIK TOUCH SAFETY LANC 28G	2	QL(6.67 EA daily); RX/OTC	BD SWAB SINGLE USE REGULAR	2	QL(6.67 EA daily); RX/OTC
UNISTIK TOUCH SAFETY LANC 30G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 21G	2	QL(6.67 EA daily); RX/OTC	COMFORT TOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 23G	2	QL(6.67 EA daily); RX/OTC	CURITY ALCOHOL PREPS	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 28G	2	QL(6.67 EA daily); RX/OTC	CVS ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 30G	2	QL(6.67 EA daily); RX/OTC	CVS PREP	2	QL(6.67 EA daily); RX/OTC
VERIFINE UNIVERSAL LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY COMFORT ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT PRO ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
EQL ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	ULTICARE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
FIFTY50 ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	ULTILET ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
GLOBAL ALCOHOL PREP EASE	2	QL(6.67 EA daily); RX/OTC	ULTRA-CARE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
GNP ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	WEBCOL ALCOHOL PREP LARGE	2	QL(6.67 EA daily); RX/OTC
GOODSENSE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	WEBCOL ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC
H-E-B INCONTROL ALCOHOL	2	QL(6.67 EA daily); RX/OTC	ZEV RX STERILE ALCOHOL PREP PAD	2	QL(6.67 EA daily); RX/OTC
HM STERILE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	<b>Parenteral Therapy Supplies</b>		
MEIJER ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	BD AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC
PHARMACIST CHOICE ALCOHOL	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE MICRO ULTRAFINE	2	QL(5 EA daily)
PRO COMFORT ALCOHOL	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE MINI ULTRAFINE	2	QL(5 EA daily); RX/OTC
PURE COMFORT ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE NANO 2ND GEN	2	QL(5 EA daily); RX/OTC
QC ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE NANO ULTRAFINE	2	QL(5 EA daily); RX/OTC
REALITY SWABS	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE ORIG ULTRAFINE	2	QL(5 EA daily)
RELION ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLE SHORT ULTRAFINE	2	QL(5 EA daily); RX/OTC
SAPS CARE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	BD PEN NEEDLES	2	QL (5 ea daily); RX/OTC
SAPS HEALTH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	EMBECTA AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC
SAPS HEALTH CARE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	EMBECTA PEN NEEDLE NANO	2	QL(5 EA daily); RX/OTC
SB ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	EMBECTA PEN NEEDLE NANO 2 GEN	2	QL(5 EA daily); RX/OTC
SM ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	EMBECTA PEN NEEDLE ULTRAFINE	2	QL(5 EA daily)
SURE COMFORT ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	INSULIN SYRINGES	2	QL (5 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Respiratory Therapy Supplies			AEROCHAMBER W/FLOWSIGNAL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
ACE AEROSOL CLOUD ENHANCER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
ACTIVITY POUCH MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
ADULT AEROSOL MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
ADULT MASK LARGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS/SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER MINI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	AEROCHAMBER2GO ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER MV MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	AEROTRACH PLUS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLS FLOVU MTHPIECE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	AEROVENT PLUS DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU INTERM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	ALL FLOW 1000 PFT FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/ADULT DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE LARGE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE MEDIUM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE NEB MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BREATHE EASE NEB MASK/INFANT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC M DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHE EASE SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC S DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BUBBLES THE FISH II PEDI MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	FILTER AIR PP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
CLEVER CHOICE HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	FLEXICHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
CO MONITOR REPLACEMENT PIECES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	FLYP HYPERSONIQ CARTRIDGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	FULL KIT NEBULIZER SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/MED MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	INNOSPIRE REPLACEMENT FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/SM MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	INSPIREASE RESERVOIR BAGS	2	QL(3 EA per 180 day(s) retail)
COMPACT SPACE CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	INSPIREASE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EASIVENT MASK LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	LITETOUCH MASK LARGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
EASIVENT MASK MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	LITETOUCH MASK MEDIUM MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
EASIVENT MASK SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	LITETOUCH MASK SMALL MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
EASIVENT MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	MICROCHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EBASE CONTROLLER KIT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	MICROCHAMBER MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC L DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	MICROSPACER MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MINIELITE FILTER REPLACEMENTS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PEDIATRIC MOUTHPIECE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER AIR TUBE/PLUGS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PFLEX MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
NOSE CLIP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PHARMACIST CHOICE MASK WIPES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	PILLOW MASK/ADULT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	PILLOW MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	PILLOW MASK/PEDIATRIC MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	POCKET CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND-SM MASK MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	POCKET SPACER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI ALTERA NEBULIZER HANDSET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER ADULT MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI BABY CONVERSION KIT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER CHILD MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI ERAPID NEBULIZER HANDSET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER INFANT DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI EXPIRATORY FILTER SET DEVI	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCARE SPACER/ADULT MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI MASK SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCARE SPACER/CHILD MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI SOFT PLASTIC ADULT MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCHAMBER VHC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI SOFT PLASTIC PED MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRONEB ULTRA FILTER SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PARI VORTEX ADULT MASK	2	QL(1 EA per 360 day(s) retail); RX/OTC	PURE COMFORT SPACER CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REPLACEMENT AIR FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX HOLD CHMBR/MASK/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
REPLACEMENT FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX HOLD CHMBR/MASK/TODDLER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
RITEFLO DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	VORTEX VALVE CHAMBER-PEDI MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
SAMI THE SEAL FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
SIDESTREAM ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	WINDMILL TRAINER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
SIDESTREAM PEDIATRIC FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>		
SIDESTREAM PLS ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
SILICONE MASK/ADULT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AJOVY SOAJ	2	SP; PA
SILICONE MASK/INFANT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	AJOVY SOSY	2	SP; PA
SILICONE MASK/PEDIATRIC MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	EMGALITY (300 MG DOSE) SOSY	NP	SP; PA
SOOTHENE NBL 100 ADULT MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	EMGALITY SOAJ	2	SP; PA
SOOTHENE NBL 100 CHILD MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	EMGALITY SOSY	2	SP; PA
SOOTHENE NBL 100 MED CUP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	NURTEC	2	PA
SOOTHENE NBL 100 MESH CAP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	QULIPTA	2	PA
THRESHOLD IMT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	UBRELVY	2	PA
TUBING/WING TIP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	ZAVZPRET	NP	PA
			<b>Migraine Combinations</b>		
			<i>ergotamine w/ caffeine TABS</i>	1	
			<i>sumatriptan-naproxen sodium</i>	NP	
			SYMBRAVO TABS PO	NP	
			TREXIMET ( <i>sumatriptan-naproxen sodium</i> )	NP	
			<b>Migraine Products</b>		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1		<i>sumatriptan succinate TABS</i>	1	QL(9 EA per 30 day(s) retail)
<b>Serotonin Agonists</b>			<i>zolmitriptan SOLN 2.5 MG</i>	NP	
<i>almotriptan malate</i>	NP		<i>zolmitriptan TABS</i>	1	QL(6 EA per 30 day(s) retail)
<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily)	<i>zolmitriptan TBDP</i>	1	QL(6 EA per 30 day(s) retail)
<i>frovatriptan succinate</i>	1		ZOMIG SOLN 2.5 MG ( <i>zolmitriptan</i> )	NP	
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(0.67 ML daily)	<b>MINERALS &amp; ELECTROLYTES</b>		
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP		<b>Calcium</b>		
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP		CALCIUM ACETATE	2	
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML ( <i>sumatriptan succinate</i> )	NP	QL(0.67 ML daily)	<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT-600 MG, 400 UNIT-600 MG, 5 MCG-600 MG</i>	1	QL(2 EA daily)
<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)	<i>oyster shell</i>	1	
<i>rizatriptan benzoate TABS</i>	1	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)	<b>Fluoride</b>		
<i>rizatriptan benzoate TBDP</i>	1		<i>sodium fluoride CHEW</i>	1	
<i>sumatriptan</i>	1	QL(6 EA per 30 day(s) retail)	<i>sodium fluoride SOLN 0.5 MG/ML</i>	1	RX/OTC
<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	NP		SODIUM FLUORIDE SOLN 0.5 MG/ML	2	RX/OTC
<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)	<b>Magnesium</b>		
<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	NP		<i>magnesium oxide (mg supplement) TABS</i>	1	
<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)	<b>Phosphate</b>		
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)	<i>pot phosphate monobasic w/ sod phosphate dibasic &amp; monobasic</i>	1	QL(8 EA daily); RX/OTC
			WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	2	QL(8 EA daily); RX/OTC
			<b>Potassium</b>		
			EFFER-K TBEF 25 MEQ	2	
			KLOR-CON TBCR 8 MEQ ( <i>potassium chloride</i> )	2	MP
			<i>potassium bicarbonate TBEF</i>	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride microencapsulated crystals er</i>	1	MP	<i>cyclosporine CAPS</i>	1	PA
<i>potassium chloride CPCR 8 MEQ</i>	1	QL(1 EA daily); MP	<i>cyclosporine SOLN IV 50 MG/ML</i>	1	PA
<i>potassium chloride CPCR 10 MEQ</i>	1	MP	<i>everolimus (immunosuppressant)</i>	1	PA
<i>potassium chloride PACK PO 20 MEQ</i>	1		GAMIFANT 10 MG/2ML, 50 MG/10ML	2	SP; PA
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	1	MP	<i>mycophenolate mofetil hcl</i>	1	PA
<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	1	MP	<i>mycophenolate mofetil CAPS</i>	1	PA
Zinc			<i>mycophenolate mofetil SUSR</i>	1	PA
<i>zinc sulfate CAPS</i>	1		<i>mycophenolate mofetil TABS</i>	1	PA
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>			<i>mycophenolate sodium</i>	1	PA
Chelating Agents			NULOJIX	2	SP; PA
<i>penicillamine TABS</i>	1		PROGRAF PACK	2	PA
<i>trientine hcl 250 MG</i>	1	SP; PA	SANDIMMUNE CAPS (cyclosporine)	2	PA
Enzymes			SANDIMMUNE SOLN IV 50 MG/ML	2	PA
XIAFLEX	2	SP; PA	<i>sirolimus SOLN</i>	1	PA
Fecal Incontinence Bulking Agents			<i>sirolimus TABS</i>	1	PA
SOLESTA	2	SP; PA	<i>tacrolimus CAPS</i>	1	PA
Immunomodulators			<i>tacrolimus SOLN 5 MG/ML</i>	1	PA
<i>lenalidomide</i>	1	SP; PA	THYMOGLOBULIN	2	SP; PA
THALOMID 50 MG, 100 MG	2	SP; PA	Lymphatic Agents		
Immunosuppressive Agents			SYLVANT	2	SP; PA
ASTAGRAF XL CP24	2	PA	PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
ATGAM	2	SP; PA	VIJOICE TBPK	2	SP; PA
<i>azathioprine TABS 50 MG</i>	1	MP	Potassium Removing Agents		
<i>azathioprine TABS 75 MG, 100 MG</i>	1		LOKELMA	2	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1	PA	LOKELMA	NP	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1	PA	<i>sodium polystyrene sulfonate POWD</i>	1	QL(454 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	NP	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1	
VELTASSA	NP	
Systemic Lupus Erythematosus Agents		
BENLYSTA SOLR	2	SP; PA
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(100 ML per fill retail)
Anti-infectives - Throat		
<i>nystatin (mouth-throat)</i>	1	QL(100 ML per fill retail)
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
Dental Products		
FLUORIDEX DAILY RENEWAL CONC 0.63 %	2	RX/OTC
PERIOMED CONC 0.63 %	2	RX/OTC
<i>sodium fluoride (dental) CREA</i>	1	QL(57 GM per fill retail)
<i>sodium fluoride (dental) GEL</i>	1	QL(60 GM per fill retail)
<i>sodium fluoride (dental) SOLN 0.2 %</i>	1	
<i>stannous fluoride CONC</i>	1	RX/OTC
Periodontal Products		
ARESTIN	2	SP; PA
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	QL(5 GM per fill retail)
Throat Products - Misc.		

Drug Name	Drug Tier	Requirements/Limits
AQUORAL SOLN	2	QL(900 ML per fill retail); RX/OTC
<i>artificial saliva SOLN</i>	1	QL(900 ML per fill retail); RX/OTC
CAPHOSOL SOLN	2	QL(900 ML per fill retail); RX/OTC
NUMOISYN LIQD	2	QL(900 ML per fill retail); RX/OTC
<i>pilocarpine hcl (oral) 5 MG</i>	1	QL(6 EA daily)
<b>MULTIVITAMINS</b>		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	1	QL(1 EA daily)
<i>b-complex vitamins TABS</i>	1	QL(1 EA daily)
B-Complex w/ C		
<i>b complex w/ c CAPS</i>	1	QL(1 EA daily); RX/OTC
LUMAVEX CAPS	2	QL(1 EA daily); RX/OTC
LUNAVIRA CAPS	2	QL(1 EA daily); RX/OTC
B-Complex w/ Folic Acid		
ACTIVITE TABS 1 MG	2	QL(1 EA daily); RX/OTC
<i>b-complex w/ c &amp; folic acid CAPS</i>	1	QL(1 EA daily); RX/OTC
<i>b-complex w/ c &amp; folic acid TABS 60 MG-10 MG-300 MCG-1 MG-20 MG-0.01 MCG-10 MG-1.7 MG-1.5 MG, 1 MG</i>	1	QL(1 EA daily); RX/OTC
DIALYVITE TABS 100 MG-10 MG-0.3 MG-1 MG-1.5 MG-0.006 MG-10 MG-1.7 MG-20 MG	2	QL(1 EA daily); RX/OTC
MI-VITE RX TABS 1 MG	2	QL(1 EA daily); RX/OTC
MYNEPHRON CAPS 1 MG	2	QL(1 EA daily); RX/OTC
RENAL CAPS 1 MG	2	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RENO CAPS CAPS 1 MG	2	QL(1 EA daily); RX/OTC	MULTIVITAMIN PLUS IRON ADULT TABS 60 MG-2 MG-13.5 MG-400 MCG-10 MCG-6 MCG-1.7 MG-20 MG-1500 MCG-10 MG-18 MG-75 MG-1.5 MG	2	QL(1 EA daily); RX/OTC
TM-VITE RX TABS 1 MG	2	QL(1 EA daily); RX/OTC			
TRIPHROCAPS CAPS 1 MG	2	QL(1 EA daily); RX/OTC			
TRONVITE TABS 1 MG	2	QL(1 EA daily); RX/OTC			
VITASURE TABS 1 MG	2	QL(1 EA daily); RX/OTC			
Multiple Vitamins w/ Iron					
DAILY VITE MULTIVITAMIN/IRON TABS 50 MG-2 MG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-15 MG-1.5 MG	2	QL(1 EA daily); RX/OTC	MULTI-VITAMIN/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-6 MCG- 5000 UNIT-1.7 MG-20 MG-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	2	QL(1 EA daily); RX/OTC
DESTRESS-IRON TABS	2	QL(1 EA daily); RX/OTC	NAT-RUL DAILY- VITE+IRON TABS 60 MG- 400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-2 MG-30 UNIT	2	QL(1 EA daily); RX/OTC
FLORAVITA MINI TABS	2	QL(1 EA daily); RX/OTC			
MINI MULTI VITAMINS/IRON TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG- 10 MCG-13.5 MG-18 MG- 25 MG-900 MCG-6 MCG	2	QL(1 EA daily); RX/OTC	ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	2	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ iron TABS</i>	1	QL(1 EA daily); RX/OTC			
MULTIPLE VITAMINS/IRON TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-5000 UNIT, 60 MG-2 MG-400 MCG- 400 UNIT-6 MCG-1.7 MG- 20 MG-5000 UNIT-10 MG- 18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG- 400 UNIT-6 MCG-10 MG- 1.7 MG-20 MG-5000 UNIT-18 MG-1.5 MG-30 UNIT	2	QL(1 EA daily); RX/OTC	ONE-DAILY MULTI- VITAMIN/IRON TABS 50 MG-1 MG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG- 1500 MCG-1 MG-18 MG	2	QL(1 EA daily); RX/OTC
			ONE-DAILY/IRON TABS 50 MG-2 MG-20 MG-1 MG-400 UNIT-1 MCG-1 MG-2.5 MG-18 MG-5000 UNIT	2	QL(1 EA daily); RX/OTC
			QC DAILY MULTIVITAMINS/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	2	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
STRESS B COMPLEX/IRON TABS 600 MG-5 MG-45 MCG-400 MCG-12 MCG-15 MG-100 MG-20 MG-27 MG-15 MG-30 UNIT	2	QL(1 EA daily); RX/OTC	PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED BRAND	2	QL(1 ea daily); AL(Up to 13 yrs old)
STRESS FORMULA/IRON/ENERGY TABS	2	QL(1 EA daily); RX/OTC	PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED GENERIC	1	QL(1 ea daily); AL(Up to 13 yrs old)
STRESS FORMULA/IRON TABS	2	QL(1 EA daily); RX/OTC	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED BRAND	2	QL(50ml per fill retail); AL(Up to 13 yrs old)
TAB-A-VITE/IRON/BETA CAROTENE TABS	2	QL(1 EA daily); RX/OTC	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED GENERIC	1	QL(50ml per fill retail); AL(Up to 13 yrs old)
TAB-A-VITE/IRON TABS 50 MG-1 MG-400 MCG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-15 MG	2	QL(1 EA daily); RX/OTC	<i>pediatric vitamins acd w/ fluoride SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC
Multiple Vitamins w/ Minerals			Ped MV w/ Iron		
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED BRAND	2	RX/OTC	BPROTECTED PEDIA POLY-VITE/FE SOLN	2	
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED GENERIC	1	RX/OTC	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	2	
Multivitamins			MULTIVITAMIN DROPS/IRON SOLN	2	
MULTIPLE VITAMINS TABS-ASSORTED BRAND	2	QL(1 ea daily)	MULTIVITAMIN INFANT & TODDLER SOLN	2	
MULTIPLE VITAMINS TABS-ASSORTED GENERIC	1	QL(1 ea daily)	NOVAFERRUM PED MULTI VIT-IRON SOLN 10 MG/ML	2	QL(60 ML per fill retail)
Ped Multi Vitamins w/Fl & FE			PC PEDIATRIC POLY-VITA/FE DROP SOLN	2	QL(60 ML per fill retail)
<i>ped multivitamins w/fl &amp; iron SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	POLY-VITA/IRON SOLN	2	QL(60 ML per fill retail)
Ped Multiple Vitamins w/ Minerals			POLY-VITE/IRON SOLN	2	
MVW COMPLETE FORMULATION SOLN	2				
Ped MV w/ Fluoride					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pediatric Multiple Vitamins			<i>carisoprodol TABS 350 MG</i>	1	MP; PA
BPROTECTED PEDIA POLY-VITE SOLN PO	2		<i>chlorzoxazone TABS 500 MG</i>	1	MP
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	2		<i>chlorzoxazone TABS 250 MG, 375 MG, 750 MG</i>	1	
POLY-VI-SOL SOLN PO	2		<i>cyclobenzaprine hcl CP24</i>	NP	
POLY-VITA SOLN PO	2		<i>cyclobenzaprine hcl TABS 7.5 MG</i>	1	QL(4 EA daily)
POLY-VITE PEDIATRIC SOLN PO	2		<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily); MP
Prenatal Vitamins			FLEQSUVY SUSP ( <i>baclofen</i> )	NP	
PRENATAL VITAMINS-ASSORTED BRAND	2	QL(30 ea per 30 days retail); RX/OTC	GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	2	SP; PA
PRENATAL VITAMINS-ASSORTED GENERIC	1	QL(30 ea per 30 days retail); RX/OTC	LIORESAL SOLN IT	2	SP; PA
Vitamins w/ Lipotropics			LYVISPAH PACK	NP	
<i>vitamins w/ lipotropics CAPS</i>	1	QL(1 EA daily)	<i>metaxalone</i>	1	
<b>MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms</b>			METAXALONE 640 MG	2	
Articular Cartilage Repair Therapy			<i>methocarbamol TABS 500 MG</i>	1	MP
MACI	2	SP; PA	<i>methocarbamol TABS 1000 MG</i>	NP	
Central Muscle Relaxants			<i>methocarbamol TABS 750 MG, 1000 MG</i>	1	
AMRIX CP24 ( <i>cyclobenzaprine hcl</i> )	NP		<i>orphenadrine citrate TB12</i>	1	
<i>baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	1	SP; PA	OZOBAX DS SOLN PO ( <i>baclofen</i> )	NP	
<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP		SOMA TABS 250 MG ( <i>carisoprodol</i> )	NP	PA
<i>baclofen SUSP</i>	NP		<i>tizanidine hcl CAPS</i>	1	
<i>baclofen TABS 15 MG</i>	1		<i>tizanidine hcl CAPS 8 MG</i>	NP	
<i>baclofen TABS 5 MG</i>	1	PA	<i>tizanidine hcl TABS</i>	1	
<i>baclofen TABS 10 MG, 20 MG</i>	1	MP	ZANAFLEX CAPS 8 MG	NP	
<i>carisoprodol TABS 250 MG</i>	NP	PA	Direct Muscle Relaxants		
			DANTRIUM CAPS 25 MG ( <i>dantrolene sodium</i> )	NP	
			<i>dantrolene sodium CAPS</i>	NP	
			Muscle Relaxant Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>orphenadrine w/ aspirin &amp; caff</i>	NP	
<b>Viscosupplements</b>		
EUFLEXXA SOSY	2	SP; PA
GEL-ONE	2	SP; PA
GELSYN-3 SOSY	2	SP; PA
GENVISC 850 SOSY	2	SP; PA
HYALGAN SOLN	2	SP; PA
HYALGAN SOSY	2	SP; PA
HYMOVIS	2	SP; PA
MONOVISC	2	SP; PA
ORTHOVISC	2	SP; PA
SUPARTZ FX SOSY	2	SP; PA
SYNOJOYNT SOSY	2	SP; PA
SYNVISC ONE SOSY	2	SP; PA
SYNVISC SOSY	2	SP; PA
TRILURON SOSY	2	SP; PA
TRIVISC SOSY	2	SP; PA
VISCO-3 SOSY	2	SP; PA
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
<b>Nasal Agent Combinations</b>		
<i>azelastine hcl-fluticasone propionate SUSP</i>	1	
DYMISTA SUSP ( <i>azelastine hcl-fluticasone propionate</i> )	NP	
RYALTRIS	NP	
<b>Nasal Agents - Misc.</b>		
<i>saline SOLN 0.65 %</i>	1	QL(90 ML per fill retail)
<b>Nasal Antiallergy</b>		
<i>azelastine hcl</i>	1	QL(30 ML per fill retail)
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	1	QL(26 ML per fill retail)
<i>olopatadine hcl (nasal)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>Nasal Anticholinergics</b>		
<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(30 ML per 30 day(s) retail)
<i>ipratropium bromide (nasal) 0.06 %</i>	1	QL(15 ML per 30 day(s) retail)
<b>Nasal Steroids</b>		
<i>flunisolide (nasal)</i>	1	QL(25 ML per fill retail)
<i>fluticasone propionate (nasal) SUSP</i>	1	QL(16 ML per fill retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1	QL(17 ML per fill retail); AL(At least 2 yrs old); RX/OTC
<b>Sympathomimetic Decongestants</b>		
ADRENALIN 0.1 %	2	
<i>epinephrine hcl (nasal)</i>	1	
<i>phenylephrine hcl (oral) TABS</i>	1	QL(24 EA per fill retail)
<i>pseudoephedrine hcl TABS</i>	1	
<i>pseudoephedrine hcl TB12</i>	1	QL(2 EA daily)
SUDAFED CHILDRENS LIQD	2	
SUDAFED PE CHILDRENS SOLN	2	QL(120 ML per fill retail)
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>		
<b>ALS Agents</b>		
<i>riluzole TABS</i>	1	PA
TEGLUTIK SUSP	2	SP; PA
TIGLUTIK SUSP	2	SP; PA
<b>Muscular Dystrophy Agents</b>		
AMONDYS 45	2	SP; PA
ELEVIDYS 10.0-10.4 KG	2	SP; PA
ELEVIDYS 10.5-11.4 KG	2	SP; PA
ELEVIDYS 11.5-12.4 KG	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 12.5-13.4 KG	2	SP; PA	ELEVIDYS 49.5-50.4 KG	2	SP; PA
ELEVIDYS 13.5-14.4 KG	2	SP; PA	ELEVIDYS 50.5-51.4 KG	2	SP; PA
ELEVIDYS 14.5-15.4 KG	2	SP; PA	ELEVIDYS 51.5-52.4 KG	2	SP; PA
ELEVIDYS 15.5-16.4 KG	2	SP; PA	ELEVIDYS 52.5-53.4 KG	2	SP; PA
ELEVIDYS 16.5-17.4 KG	2	SP; PA	ELEVIDYS 53.5-54.4 KG	2	SP; PA
ELEVIDYS 17.5-18.4 KG	2	SP; PA	ELEVIDYS 54.5-55.4 KG	2	SP; PA
ELEVIDYS 18.5-19.4 KG	2	SP; PA	ELEVIDYS 55.5-56.4 KG	2	SP; PA
ELEVIDYS 19.5-20.4 KG	2	SP; PA	ELEVIDYS 56.5-57.4 KG	2	SP; PA
ELEVIDYS 20.5-21.4 KG	2	SP; PA	ELEVIDYS 57.5-58.4 KG	2	SP; PA
ELEVIDYS 21.5-22.4 KG	2	SP; PA	ELEVIDYS 58.5-59.4 KG	2	SP; PA
ELEVIDYS 22.5-23.4 KG	2	SP; PA	ELEVIDYS 59.5-60.4 KG	2	SP; PA
ELEVIDYS 23.5-24.4 KG	2	SP; PA	ELEVIDYS 60.5-61.4 KG	2	SP; PA
ELEVIDYS 24.5-25.4 KG	2	SP; PA	ELEVIDYS 61.5-62.4 KG	2	SP; PA
ELEVIDYS 25.5-26.4 KG	2	SP; PA	ELEVIDYS 62.5-63.4 KG	2	SP; PA
ELEVIDYS 26.5-27.4 KG	2	SP; PA	ELEVIDYS 63.5-64.4 KG	2	SP; PA
ELEVIDYS 27.5-28.4 KG	2	SP; PA	ELEVIDYS 64.5-65.4 KG	2	SP; PA
ELEVIDYS 28.5-29.4 KG	2	SP; PA	ELEVIDYS 65.5-66.4 KG	2	SP; PA
ELEVIDYS 29.5-30.4 KG	2	SP; PA	ELEVIDYS 66.5-67.4 KG	2	SP; PA
ELEVIDYS 30.5-31.4 KG	2	SP; PA	ELEVIDYS 67.5-68.4 KG	2	SP; PA
ELEVIDYS 31.5-32.4 KG	2	SP; PA	ELEVIDYS 68.5-69.4 KG	2	SP; PA
ELEVIDYS 32.5-33.4 KG	2	SP; PA	ELEVIDYS 69.5 KG PLUS	2	SP; PA
ELEVIDYS 33.5-34.4 KG	2	SP; PA	EXONDYS 51	2	SP; PA
ELEVIDYS 34.5-35.4 KG	2	SP; PA	VILTEPSO	2	SP; PA
ELEVIDYS 35.5-36.4 KG	2	SP; PA	VYONDYS 53	2	SP; PA
ELEVIDYS 36.5-37.4 KG	2	SP; PA	<b>Neuromuscular Blocking Agent - Neurotoxins</b>		
ELEVIDYS 37.5-38.4 KG	2	SP; PA	BOTOX IJ	2	SP; PA
ELEVIDYS 38.5-39.4 KG	2	SP; PA	DYSPOORT	2	SP; PA
ELEVIDYS 39.5-40.4 KG	2	SP; PA	MYOBLOC	2	SP; PA
ELEVIDYS 40.5-41.4 KG	2	SP; PA	XEOMIN	2	SP; PA
ELEVIDYS 41.5-42.4 KG	2	SP; PA	<b>Spinal Muscular Atrophy Agents (SMA)</b>		
ELEVIDYS 42.5-43.4 KG	2	SP; PA	EVRYSDI PO 5 MG	2	SP
ELEVIDYS 43.5-44.4 KG	2	SP; PA	EVRYSDI	2	SP; PA
ELEVIDYS 44.5-45.4 KG	2	SP; PA	SPINRAZA	2	SP; PA
ELEVIDYS 45.5-46.4 KG	2	SP; PA	ZOLGENSMA 20.6-21.0 KG	2	SP; PA
ELEVIDYS 46.5-47.4 KG	2	SP; PA			
ELEVIDYS 47.5-48.4 KG	2	SP; PA			
ELEVIDYS 48.5-49.4 KG	2	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 10.1-10.5 KG	2	SP; PA	ZOLGENSMA 20.1-20.5 KG	2	SP; PA
ZOLGENSMA 10.6-11.0 KG	2	SP; PA	ZOLGENSMA 3.1-3.5 KG	2	SP; PA
ZOLGENSMA 11.1-11.5 KG	2	SP; PA	ZOLGENSMA 3.6-4.0 KG	2	SP; PA
ZOLGENSMA 11.6-12.0 KG	2	SP; PA	ZOLGENSMA 4.1-4.5 KG	2	SP; PA
ZOLGENSMA 12.1-12.5 KG	2	SP; PA	ZOLGENSMA 4.6-5.0 KG	2	SP; PA
ZOLGENSMA 12.6-13.0 KG	2	SP; PA	ZOLGENSMA 5.1-5.5 KG	2	SP; PA
ZOLGENSMA 13.1-13.5 KG	2	SP; PA	ZOLGENSMA 5.6-6.0 KG	2	SP; PA
ZOLGENSMA 13.6-14.0 KG	2	SP; PA	ZOLGENSMA 6.1-6.5 KG	2	SP; PA
ZOLGENSMA 14.1-14.5 KG	2	SP; PA	ZOLGENSMA 6.6-7.0 KG	2	SP; PA
ZOLGENSMA 14.6-15.0 KG	2	SP; PA	ZOLGENSMA 7.1-7.5 KG	2	SP; PA
ZOLGENSMA 15.1-15.5 KG	2	SP; PA	ZOLGENSMA 7.6-8.0 KG	2	SP; PA
ZOLGENSMA 15.6-16.0 KG	2	SP; PA	ZOLGENSMA 8.1-8.5 KG	2	SP; PA
ZOLGENSMA 16.1-16.5 KG	2	SP; PA	ZOLGENSMA 8.6-9.0 KG	2	SP; PA
ZOLGENSMA 16.6-17.0 KG	2	SP; PA	ZOLGENSMA 9.1-9.5 KG	2	SP; PA
ZOLGENSMA 17.1-17.5 KG	2	SP; PA	ZOLGENSMA 9.6-10.0 KG	2	SP; PA
ZOLGENSMA 17.6-18.0 KG	2	SP; PA	<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>		
ZOLGENSMA 18.1-18.5 KG	2	SP; PA	Artificial Tears and Lubricants		
ZOLGENSMA 18.6-19.0 KG	2	SP; PA	<i>polyvinyl alcohol 1.4 %</i>	1	QL(15 ML per fill retail)
ZOLGENSMA 19.1-19.5 KG	2	SP; PA	<i>white petrolatum-mineral oil</i>	1	QL(5 GM per fill retail)
ZOLGENSMA 19.6-20.0 KG	2	SP; PA	Beta-blockers - Ophthalmic		
ZOLGENSMA 2.6-3.0 KG	2	SP; PA	<i>betaxolol hcl (ophth) SOLN</i>	NP	QL(5 ML per fill retail)
			<i>brimonidine tartrate-timolol maleate</i>	NP	
			<i>carteolol hcl (ophth)</i>	1	1 max fill(s) per 30 day(s) retail
			COMBIGAN ( <i>brimonidine tartrate-timolol maleate</i> )	2	
			DORZOLAMIDE HCL-TIMOLOL MAL	2	QL(10 ML per fill retail)
			<i>dorzolamide hcl-timolol maleate</i>	1	QL(10 ML per fill retail)
			<i>dorzolamide hcl-timolol maleate</i>	1	
			ISTALOL SOLN ( <i>timolol maleate (ophth)</i> )	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levobunolol hcl 0.5 %</i>	1	
<i>timolol maleate (ophth) SOLG 0.25 %</i>	1	
<i>timolol maleate (ophth) SOLN</i>	1	QL(5 ML per fill retail)
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	NP	QL(60 EA per fill retail)
TIMOLOL-BRIMONIDINE-DORZOLAMID 0.5 %-0.15 %-2 %	2	
TIMOPTIC OCUDOSE SOLN ( <i>timolol maleate (ophth)</i> )	NP	QL(60 EA per fill retail)
<b>Cycloplegic Mydriatics</b>		
<i>atropine sulfate (ophthalmic) OINT</i>	1	QL(4 GM per fill retail)
<i>atropine sulfate (ophthalmic) SOLN</i>	1	QL(5 ML per fill retail)
ATROPINE SULFATE SOLN 1 %	2	QL(5 EA per fill retail)
CYCLOGYL 0.5 %	2	QL(15 ML per fill retail)
<i>cyclopentolate hcl 1 %</i>	1	QL(5 ML per fill retail)
<i>phenylephrine hcl (mydriatic) SOLN 2.5 %</i>	1	QL(5 ML per fill retail)
<i>tropicamide SOLN 0.5 %</i>	1	QL(15 ML per fill retail)
<i>tropicamide SOLN 1 %</i>	1	QL(3 ML per fill retail)
<b>Miotics</b>		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1	
<b>Ophthalmic - Angiogenesis Inhibitors</b>		
BEVACIZUMAB IZ 2.75 MG/0.11ML	2	PA
BEVACIZUMAB IZ 2.5 MG/0.1ML, 3.25 MG/0.13ML	2	SP; PA
EYLEA SOLN	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
LUCENTIS SOSY	2	SP; PA
<b>Ophthalmic Adrenergic Agents</b>		
ALPHAGAN P ( <i>brimonidine tartrate</i> )	2	
<i>apraclonidine hcl</i>	1	
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	
<i>brimonidine tartrate 0.2 %</i>	1	QL(5 ML per fill retail)
SIMBRINZA	2	
<b>Ophthalmic Anti-infectives</b>		
<i>bacitracin-polymyxin b (ophth)</i>	1	QL(4 GM per fill retail)
<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(5 ML per fill retail)
ERYTHROMYCIN	2	QL(4 GM per fill retail)
<i>erythromycin (ophth)</i>	1	QL(4 GM per fill retail)
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	1	QL(5 ML per fill retail)
<i>levofloxacin (ophth) 0.5 %</i>	1	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	QL(3 ML per fill retail)
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1	
<i>neomycin-bacitracin zn-polymyxin</i>	1	QL(4 GM per fill retail)
<i>neomycin-polymyxin-gramicidin</i>	1	QL(10 ML per fill retail)
<i>ofloxacin (ophth)</i>	1	QL(5 ML per fill retail)
<i>polymyxin b-trimethoprim</i>	1	QL(10 ML per fill retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	1	QL(15 ML per fill retail)
<i>tobramycin (ophth) SOLN</i>	1	QL(5 ML per fill retail)
TOBREX OINT	2	QL(4 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	NP	QL(3 ML per fill retail)	fluorometholone (ophth) SUSP	1	QL(5 ML per fill retail)
Ophthalmic Decongestants			ILUVIEN	2	SP; PA
naphazoline w/ pheniramine 0.315 %- 0.027 %	1	QL(0.5 ML daily)	neomycin-polymy- dexameth OINT	1	QL(4 GM per fill retail)
naphazoline w/ pheniramine 0.3 %-0.025 %	1	1 max fill(s) per 30 day(s) retail	neomycin-polymy- dexameth SUSP 0.1 %- 3.5 MG/ML-10000 UNIT/ML, 0.1 %	1	QL(5 ML per fill retail)
tetrahydrozoline hcl (ophth) 0.05 %	1	QL(30 ML per fill retail)	neomycin-polymyxin-hc (ophth)	1	QL(8 ML per fill retail)
Ophthalmic Immunomodulators			OZURDEX IMPL	2	SP; PA
CEQUA SOLN	NP		PRED MILD	2	QL(10 ML per fill retail)
cyclosporine (ophth) EMUL	NP		prednisolone acetate (ophth)	1	QL(5 ML per fill retail)
RESTASIS MULTIDOSE EMUL	2		PREDNISOLONE ACETATE P-F	2	QL(5 ML per fill retail)
RESTASIS EMUL (cyclosporine (ophth))	2		PREDNISOLONE SODIUM PHOSPHATE	2	QL(10 ML per fill retail)
VEVYE SOLN	NP		RETISERT	2	SP; PA
Ophthalmic Integrin Antagonists			sulfacetamide sod- prednisolone SOLN	1	QL(5 ML per fill retail)
XIIDRA	2	PA	TOBRADEX OINT	2	QL(4 GM per fill retail)
Ophthalmic Kinase Inhibitors			tobramycin- dexamethasone SUSP	1	QL(5 ML per fill retail)
ROCKLATAN	2	PA	YUTIQ	2	SP
Ophthalmic Local Anesthetics			Ophthalmics - Misc.		
TETRACAINE HCL 0.5 %	2		ACULAR (ketorolac tromethamine (ophth))	NP	QL(5 ML per fill retail)
tetracaine hcl (ophth)	1		ACULAR LS (ketorolac tromethamine (ophth))	2	1 max fill(s) per 30 day(s) retail
Ophthalmic Nerve Growth Factors			azelastine hcl (ophth)	1	QL(6 ML per fill retail)
OXERVATE	2	SP; PA	bromfenac sodium (ophth) 0.075 %, 0.09 %	1	
Ophthalmic Photodynamic Therapy Agents			cromolyn sodium (ophth)	1	QL(10 ML per fill retail)
VISUDYNE	2	SP; PA	CYSTARAN	2	SP; PA
Ophthalmic Steroids			diclofenac sodium (ophth)	1	QL(5 ML per fill retail)
dexamethasone sodium phosphate (ophth)	1	QL(5 ML per fill retail)			
DEXTENZA INST	2	SP; PA			
EYSUVIS SUSP	NP				

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl</i>	1	QL(10 ML per fill retail)
DORZOLAMIDE HCL	2	QL(10 ML per fill retail)
<i>epinastine hcl (ophth)</i>	NP	
<i>flurbiprofen sodium</i>	1	QL(3 ML per fill retail)
ILEVRO	NP	
<i>ketorolac tromethamine (ophth) 0.4 %</i>	NP	1 max fill(s) per 30 day(s) retail
<i>ketorolac tromethamine (ophth) 0.5 %</i>	NP	QL(5 ML per fill retail)
<i>ketotifen fumarate (ophth) 0.035 %</i>	1	QL(5 ML per fill retail)
MIEBO	NP	
<i>olopatadine hcl</i>	1	
TRYPTYR SOLN OP 0.003 %	NP	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	NP	
IYUZEH SOLN	NP	
TRAVATAN Z SOLN ( <i>travoprost</i> )	2	
<i>travoprost SOLN</i>	NP	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1	QL(15 ML per fill retail)
<i>carbamide peroxide (otic) 6.5 %</i>	1	QL(0.5 ML daily)
Otic Anti-infectives		
CETRAXAL ( <i>ciprofloxacin hcl (otic)</i> )	2	
<i>ciprofloxacin hcl (otic)</i>	1	
<i>ofloxacin (otic)</i>	1	QL(5 ML per fill retail)
Otic Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-dexamethasone</i>	1	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1	QL(10 ML per fill retail)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	QL(10 ML per fill retail)
Otic Steroids		
<i>fluocinolone acetonide (otic)</i>	1	QL(20 ML per fill retail)
<i>hydrocortisone w/acetic acid</i>	1	QL(10 ML per fill retail)
<b>OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding</b>		
Oxytocics		
<i>methylergonovine maleate TABS</i>	1	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
Immune Serums		
BIVIGAM SOLN	2	SP; PA
CUVITRU SOLN	2	SP; PA
CYTOGAM SOLN	2	SP; PA
FLEBOGAMMA DIF SOLN 5 GM/100ML, 10 GM/200ML, 20 GM/400ML	2	SP; PA
GAMASTAN IM	2	SP; PA
GAMMAGARD	2	SP; PA
GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML	2	SP; PA
GAMMAGARD S/D LESS IGA SOLR	2	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	2	SP; PA
GAMMAPLEX SOLN	2	SP; PA
GAMUNEX-C	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
HEPAGAM B SOLN IJ	2	SP; PA
HIZENTRA SOLN	2	SP; PA
HIZENTRA SOSY 10 GM/50ML	2	SP; PA
HYPERHEP B SOLN IM	2	SP; PA
HYPERHEP B SOSY 110 UNIT/0.5ML	2	SP; PA
HYPERRHO MINI-DOSE SOSY IM 250 UNIT	2	SP; PA
HYPERRHO SOSY IM 1500 UNIT	2	SP; PA
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	2	SP; PA
NABI-HB SOLN IM	2	SP; PA
OCTAGAM SOLN	2	SP; PA
PANZYGA	2	SP; PA
PRIVIGEN SOLN	2	SP; PA
RHOGAM ULTRA-FILTERED PLUS SOSY IM	2	SP; PA
RHOPHYLAC SOSY IJ	2	SP; PA
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	2	SP; PA
<b>Monoclonal Antibodies</b>		
BEYFORTUS	0	AL(At least 19 yrs old); SP
SYNAGIS SOLN	2	SP; PA
ZINPLAVA	2	SP; PA
<b>Passive Immunizing Agents - Combinations</b>		
HYQVIA	2	SP; PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
<b>Aminopenicillins</b>		
<i>amoxicillin CAPS</i>	1	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin SUSR</i>	1	
<i>amoxicillin TABS 875 MG</i>	1	
<i>ampicillin CAPS 500 MG</i>	1	
<b>Natural Penicillins</b>		
<i>penicillin v potassium SOLR</i>	1	
<i>penicillin v potassium TABS</i>	1	
<b>Penicillin Combinations</b>		
<i>amoxicillin &amp; pot clavulanate CHEW</i>	1	QL(20 EA per fill retail)
<i>amoxicillin &amp; pot clavulanate SUSR</i>	1	
<i>amoxicillin &amp; pot clavulanate TABS 125 MG-250 MG</i>	1	QL(30 EA per fill retail)
<i>amoxicillin &amp; pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG</i>	1	QL(20 EA per fill retail)
<i>amoxicillin &amp; pot clavulanate TB12</i>	1	QL(1.34 EA daily)
<b>Penicillinase-Resistant Penicillins</b>		
<i>dicloxacillin sodium</i>	1	
<b>PHARMACEUTICAL ADJUVANTS</b>		
<b>Internal Vehicle Ingredients/Agents</b>		
SIMPLYTHICK EASY MIX	2	QL(1816 GM per fill retail); AL(At least 2 yrs old)
SIMPLYTHICK EASYMIX LEVEL 1	2	QL(1816 GM per fill retail); AL(At least 2 yrs old)
SIMPLYTHICK EASYMIX LEVEL 2	2	QL(1816 GM per fill retail); AL(At least 2 yrs old)
SIMPLYTHICK EASYMIX LEVEL 3	2	QL(1816 GM per fill retail); AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Liquid Vehicles			EXELON 13.3 MG/24HR (rivastigmine)	2	
<i>glycine diluent</i>	1	SP; PA	<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)
STERILE DILUENT FLOLAN PH 12	2	SP; PA	<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)
Semi Solid Vehicles			<i>galantamine hydrobromide TABS</i>	1	QL(2 EA daily)
LANOLIN XX	2		<i>memantine hcl CP24</i>	1	
<b>PROGESTINS - Hormone Replacement/Modifying Drugs</b>			<i>memantine hcl SOLN</i>	NP	QL(10 ML daily)
Progestins			<i>memantine hcl TABS</i>	1	QL(2 EA daily); MP
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	MP	<i>memantine hcl TABS</i>	NP	QL(1 EA per 28 day(s) retail)
<i>norethindrone acetate TABS</i>	1	MP	NAMENDA TITRATION PAK TABS ( <i>memantine hcl</i> )	NP	QL(1 EA per 28 day(s) retail)
<i>progesterone CAPS 200 MG</i>	1	QL(20 EA per 30 day(s) retail)	<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	QL(1 EA daily)
<i>progesterone CAPS 100 MG</i>	1	QL(1 EA daily)	<i>rivastigmine 13.3 MG/24HR</i>	NP	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions</b>			<i>rivastigmine tartrate CAPS</i>	1	QL(2 EA daily)
Agents for Chemical Dependency			ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
<i>acamprosate calcium</i>	1		Cerebral Adrenoleukodystrophy (CALD) Agents		
<i>disulfiram 250 MG</i>	1		SKYSONA	2	SP; PA
Anti-Cataplectic Agents			Combination Psychotherapeutics		
<i>sodium oxybate SOLN</i>	1	SP; PA	LYBALVI	NP	
Antidementia Agents			<i>perphenazine-amitriptyline</i>	1	QL(4 EA daily)
ADLARITY PTWK	NP		Fibromyalgia Agents		
<i>donepezil hydrochloride TABS 23 MG</i>	1		<i>milnacipran hcl MISC</i>	1	QL(55 EA per 365 day(s) retail); PA
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP	<i>milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG</i>	1	QL(2 EA daily); PA
<i>donepezil hydrochloride TBDP</i>	1		Movement Disorder Drug Therapy		
EXELON 4.6 MG/24HR, 9.5 MG/24HR ( <i>rivastigmine</i> )	2	QL(1 EA daily)	AUSTEDO XR PATIENT TITRATION TEPK	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
AUSTEDO XR PATIENT TITRATION TEPK	2	SP; PA
AUSTEDO XR TB24	2	SP; PA
AUSTEDO XR TB24	2	SP; PA
AUSTEDO TABS	2	SP; PA
INGREZZA CAPS	2	SP; PA
INGREZZA CPSP	2	SP; PA
<i>tetrabenazine</i>	NP	SP; PA
XENAZINE ( <i>tetrabenazine</i> )	NP	SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	2	SP; PA
AVONEX PREFILLED PSKT	2	SP; PA
BAFIERTAM	NP	SP
BRIUMVI	NP	SP
COPAXONE SOSY ( <i>glatiramer acetate</i> )	2	SP; PA
<i>dalfampridine</i>	1	SP; PA
<i>dimethyl fumarate CDPK</i>	1	SP; PA
<i>dimethyl fumarate CPDR</i>	1	SP; PA
<i> fingolimod hcl</i>	1	SP; PA
GILENYA ( <i>fingolimod hcl</i> )	NP	SP; PA
GILENYA	NP	SP; PA
<i>glatiramer acetate SOSY</i>	NP	SP; PA
KESIMPTA	2	SP; PA
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP
MAYZENT TABS	NP	SP
OCREVUS ZUNOVO	NP	SP
PLEGRIDY SOSY IM	NP	SP
PONVORY STARTER PACK TBPK	NP	SP
PONVORY TABS	NP	SP
TASCENSO ODT	NP	SP
ZEPOSIA STARTER KIT CPPK	NP	SP
Premenstrual Dysphoric Disorder (PMDD) Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl (pmdd) TABS 10 MG</i>	1	AL(At least 7 yrs old)
<i>fluoxetine hcl (pmdd) TABS 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	AL(At least 13 yrs old)
CHANTIX CONTINUING MONTH PAK TABS ( <i>varenicline tartrate</i> )	2	QL(2 EA daily); AL(At least 13 yrs old)
CHANTIX STARTING MONTH PAK TBPK ( <i>varenicline tartrate</i> )	2	AL(At least 13 yrs old)
CHANTIX TABS ( <i>varenicline tartrate</i> )	2	QL(2 EA daily); AL(At least 13 yrs old)
<i>nicotine polacrilex GUM</i>	0	AL(At least 13 yrs old)
<i>nicotine polacrilex LOZG</i>	0	AL(At least 13 yrs old)
NICOTINE KIT	0	AL(At least 13 yrs old)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	AL(At least 13 yrs old)
NICOTROL NS SOLN	NP	AL(At least 13 yrs old); PA
NICOTROL INHA	NP	AL(At least 13 yrs old); PA
<i>varenicline tartrate TABS</i>	1	QL(2 EA daily); AL(At least 13 yrs old)
<i>varenicline tartrate TBPK</i>	1	AL(At least 13 yrs old)
Transthyretin Amyloidosis Agents		
ONPATTRO	2	SP; PA
TEGSEDI	2	SP; PA
Vasomotor Symptom Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine mesylate (vasomotor)</i>	NP	
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 500 MG, 1000 MG	2	SP; PA
GLASSIA SOLN	2	SP; PA
ZEMAIRA SOLR 1000 MG	2	SP; PA
Cystic Fibrosis Agents		
KALYDECO PACK 50 MG, 75 MG	2	SP; PA
KALYDECO TABS	2	SP; PA
ORKAMBI PACK	2	SP; PA
ORKAMBI TABS	2	SP; PA
PULMOZYME	2	SP; PA
SYMDEKO	2	SP; PA
TRIKAFTA TBPk 100 MG-50 MG	2	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
<i>nintedanib esylate 100 MG, 150 MG</i>	1	SP; PA
<i>pirfenidone CAPS</i>	1	SP; PA
<i>pirfenidone TABS 534 MG</i>	1	SP
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>		
Tetracyclines		
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	1	
<i>doxycycline hyclate CAPS</i>	1	
<i>doxycycline hyclate TABS 100 MG</i>	1	
<i>minocycline hcl CAPS</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>		
Antithyroid Agents		
<i>methimazole TABS</i>	1	MP
<i>propylthiouracil</i>	1	MP
Thyroid Hormones		
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 65 MG, 90 MG, 120 MG, 130 MG	2	MP
ARMOUR THYROID TABS	2	MP
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	2	MP
<i>levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG</i>	1	
<i>levothyroxine sodium TABS</i>	1	MP
<i>liothyronine sodium TABS</i>	1	MP
NIVA THYROID TABS	2	MP
NP THYROID TABS	2	MP
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
SYNTHROID TABS ( <i>levothyroxine sodium</i> )	2	MP
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG ( <i>levothyroxine sodium</i> )	2	
<b>TOXOIDS</b>		
Toxoid Combinations		

Drug Name	Drug Tier	Requirements/Limits
ADACEL SUSP	0	AL(At least 19 yrs old)
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0	AL(At least 19 yrs old)
BOOSTRIX SUSP	0	AL(At least 19 yrs old)
BOOSTRIX SUSY	0	AL(At least 19 yrs old)
DAPTACEL	0	AL(At least 19 yrs old)
INFANRIX	0	AL(At least 19 yrs old)
KINRIX SUSY	0	AL(At least 19 yrs old)
PEDIARIX SUSY	0	AL(At least 19 yrs old)
PENTACEL	0	AL(At least 19 yrs old)
QUADRACEL SUSP	0	AL(At least 19 yrs old)
QUADRACEL SUSY	0	AL(At least 19 yrs old)
TDVAX SUSP	0	AL(At least 19 yrs old)
TENIVAC SUSP 2 LFU-5 LFU	0	AL(At least 19 yrs old)
TETANUS-DIPHThERIA TOXOIDS TD SUSP	0	AL(At least 19 yrs old)
VAXELIS SUSP	0	AL(At least 19 yrs old)
VAXELIS SUSY	0	AL(At least 19 yrs old)
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		
<b>Antispasmodics</b>		
<i>dicyclomine hcl CAPS</i>	1	
<i>dicyclomine hcl SOLN PO</i>	1	QL(40 ML daily)
<i>dicyclomine hcl TABS</i>	1	
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	1	QL(4 EA daily)
<i>hyoscyamine sulfate ELIX</i>	1	
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	1	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	1	
<i>hyoscyamine sulfate TB12 0.375 MG</i>	1	
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	1	
<b>H-2 Antagonists</b>		
<i>cimetidine TABS 300 MG, 400 MG</i>	1	
<i>cimetidine TABS 800 MG</i>	1	QL(500 EA per fill retail)
<i>cimetidine TABS 200 MG</i>	1	MP; RX/OTC
<i>famotidine TABS 10 MG</i>	1	
<i>famotidine TABS 20 MG, 40 MG</i>	1	MP; RX/OTC
<i>ranitidine hcl TABS 150 MG, 300 MG</i>	1	QL(2 EA daily); MP
<b>Misc. Anti-Ulcer</b>		
<i>sucralfate SUSP</i>	1	QL(420 ML per fill retail)
<i>sucralfate TABS</i>	1	QL(4 EA daily); MP
<b>Proton Pump Inhibitors</b>		
<i>esomeprazole magnesium CPDR</i>	1	RX/OTC
<i>esomeprazole magnesium PACK</i>	1	
<i>lansoprazole CPDR</i>	1	
<i>lansoprazole TBDD</i>	1	PA; RX/OTC
<i>NEXIUM 24HR CPDR (esomeprazole magnesium)</i>	NP	RX/OTC
<i>NEXIUM CPDR 20 MG (esomeprazole magnesium)</i>	NP	RX/OTC
<i>NEXIUM PACK 10 MG, 20 MG, 40 MG (esomeprazole magnesium)</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>omeprazole CPDR</i>	1	QL(2 EA daily)
<i>omeprazole TBEC</i>	1	QL(1 EA daily)
<i>pantoprazole sodium PACK</i>	NP	
<i>pantoprazole sodium TBEC 40 MG</i>	1	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)
PROTONIX PACK ( <i>pantoprazole sodium</i> )	2	
<i>rabeprazole sodium TBEC</i>	1	
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1	
Ulcer Therapy Combinations		
KONVOMEPEP SUSR	NP	
<i>omeprazole-sodium bicarbonate CAPS</i>	NP	RX/OTC
<i>omeprazole-sodium bicarbonate PACK</i>	NP	
ZEGERID CAPS ( <i>omeprazole-sodium bicarbonate</i> )	NP	RX/OTC
ZEGERID PACK ( <i>omeprazole-sodium bicarbonate</i> )	NP	
<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	1	
DETROL LA CP24 ( <i>tolterodine tartrate</i> )	NP	QL(1 EA daily)
<i>fesoterodine fumarate</i>	1	
<i>oxybutynin chloride SOLN</i>	1	
<i>oxybutynin chloride TABS 2.5 MG</i>	NP	
<i>oxybutynin chloride TABS 5 MG</i>	1	QL(3 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
<i>oxybutynin chloride TB24</i>	1	QL(2 EA daily); MP
<i>solifenacin succinate TABS</i>	1	
<i>tolterodine tartrate CP24</i>	NP	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1	QL(2 EA daily)
TOVIAZ ( <i>fesoterodine fumarate</i> )	NP	
<i>tropium chloride CP24</i>	NP	
<i>tropium chloride TABS</i>	1	QL(2 EA daily)
VESICARE LS SUSP	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	
<i>mirabegron TB24</i>	NP	
MYRBETRIQ TB24 ( <i>mirabegron</i> )	2	
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	1	MP
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	NP	
<b>VACCINES</b>		
Bacterial Vaccines		
ACTHIB SOLR IM	0	AL(At least 19 yrs old)
BCG VACCINE	0	AL(At least 19 yrs old)
BEXSERO 0.5 ML	0	AL(At least 19 yrs old)
BIOTHRAX	0	AL(At least 19 yrs old)
HIBERIX SOLR IJ	0	AL(At least 19 yrs old)
MENQUADFI 0.5 ML	0	AL(At least 19 yrs old)
MENVEO SOLN	0	AL(At least 19 yrs old)
MENVEO SOLR	0	AL(At least 19 yrs old)
PEDVAX HIB SUSP	0	AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PENBRAYA	0	AL(At least 19 yrs old)	AREXVY	0	QL(1 EA per fill retail); AL(At least 19 yrs old)
PNEUMOVAX 23 SOLN	0	AL(At least 19 yrs old)	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
PNEUMOVAX 23 SOSY	0	AL(At least 19 yrs old)	COMIRNATY SUSP	0	
PREVNAR 13	0	AL(At least 19 yrs old)	COMIRNATY SUSY	0	
PREVNAR 20	0	AL(At least 19 yrs old)	DENGVAXIA	0	AL(At least 19 yrs old)
TRUMENBA 0.5 ML	0	AL(At least 19 yrs old)	ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
TYPHIM VI SOLN	0	AL(At least 19 yrs old)	ENGERIX-B SUSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
TYPHIM VI SOSY	0	AL(At least 19 yrs old)	FLUAD	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
VAXCHORA	0	AL(At least 19 yrs old)	FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
VAXNEUVANCE	0	AL(At least 19 yrs old)	FLUARIX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
VIVOTIF	0	AL(At least 19 yrs old)	FLUARIX SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
<b>Viral Vaccines</b>			FLUBLOK QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
ABRYSVO	0	QL(1 EA per fill retail); AL(At least 60 yrs old)			
ACAM2000 SOLR IJ	0	AL(At least 19 yrs old)			
AFLURIA PRESERVATIVE FREE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)			
AFLURIA QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)			
AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)			
AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUZONE QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUZONE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLULAVAL QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old - Up to 45 yrs old)
FLULAVAL SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old - Up to 45 yrs old)
FLUMIST	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0	AL(At least 19 yrs old)
FLUMIST QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	HEPLISAV-B SOSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	IMOVAX RABIES SUSR	0	AL(At least 19 yrs old)
			IPOL IJ	0	AL(At least 19 yrs old)
			IXCHIQ	0	AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
IXIARO	0	AL(At least 19 yrs old)	ROTATEQ SOLN	0	AL(At least 19 yrs old)
JYNNEOS	0	AL(At least 19 yrs old)	SHINGRIX	0	Limit 2 dose per lifetime; 2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
M-M-R II SOLR	0	AL(At least 19 yrs old)			
MNEXSPIKE SUSY 10 MCG/0.2ML	0		SHINGRIX IM 50 MCG/0.5ML	0	Limit 2 dose per lifetime; 2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
MODERNA COVID-19 VAC 6M-11Y SUSP	0				
MODERNA COVID-19 VAC 6M-11Y SUSY	0		SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
NOVAVAX COVID-19 VACCINE SUSP	0		SPIKEVAX SUSP	0	
NOVAVAX COVID-19 VACCINE SUSY	0		SPIKEVAX SUSY	0	
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0		STAMARIL SUSR	0	AL(At least 19 yrs old)
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0		TICOVAC	0	AL(At least 19 yrs old)
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0		TWINRIX SUSY	0	AL(At least 19 yrs old)
PREHEVBRIO	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	VAQTA	0	AL(At least 19 yrs old)
PRIORIX SUSR	0	AL(At least 19 yrs old)	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	AL(At least 19 yrs old)
PROQUAD SUSR	0	AL(At least 19 yrs old)	VARIVAX SUSR	0	2 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
RABAVERT	0	AL(At least 19 yrs old)	YF-VAX SUSR	0	AL(At least 19 yrs old)
RECOMBIVAX HB SUSP	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	<b>VAGINAL AND RELATED PRODUCTS</b>		
RECOMBIVAX HB SUSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	<b>Spermicides</b>		
ROTARIX SUSP	0	AL(At least 19 yrs old)	ENCARE SUPP 100 MG	2	QL(12 EA per fill retail)
			OPTIONS GYNOL II CONTRACEPTIVE GEL	2	QL(86 GM per fill retail)
			VCF VAGINAL CONTRACEPTIVE FILM	2	QL(9 EA per fill retail)

Drug Name	Drug Tier	Requirements/Limits
VCF VAGINAL CONTRACEPTIVE GEL	2	
Vaginal Anti-infectives		
CLEOCIN CREA ( <i>clindamycin phosphate vaginal</i> )	2	QL(40 GM per fill retail)
<i>clindamycin phosphate vaginal CREA</i>	NP	QL(40 GM per fill retail)
CLINDESSE	2	
<i>clotrimazole vaginal CREA 2 %</i>	1	QL(21 GM per fill retail)
<i>clotrimazole vaginal CREA 1 %</i>	1	QL(45 GM per fill retail)
GYNAZOLE-1	2	
<i>metronidazole vaginal</i>	1	
<i>metronidazole vaginal</i>	1	QL(70 GM per fill retail)
MICONAZOLE 7 SUPP 100 MG	2	QL(7 EA per fill retail)
<i>miconazole nitrate vaginal CREA 2 %</i>	1	QL(45 GM per fill retail)
<i>miconazole nitrate vaginal CREA 4 %</i>	1	QL(15 GM daily)
<i>miconazole nitrate vaginal KIT</i>	1	QL(24 EA per fill retail)
<i>miconazole nitrate vaginal SUPP 100 MG</i>	1	QL(7 EA per fill retail)
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	QL(3 EA per fill retail)
NUVESSA	2	
<i>terconazole vaginal CREA 0.4 %</i>	1	QL(45 GM per fill retail)
<i>terconazole vaginal CREA 0.8 %</i>	1	QL(20 GM per fill retail)
<i>terconazole vaginal SUPP</i>	1	QL(3 EA per fill retail)
<i>tioconazole vaginal 6.5 %</i>	1	QL(5 GM per fill retail)
VANDAZOLE	NP	QL(70 GM per fill retail)
XACIATO GEL	NP	
Vaginal Anti-inflammatory Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone vaginal</i>	1	QL(85.2 GM per fill retail)
MONISTAT CARE INSTANT ITCH RLF 1 %	2	QL(85.2 GM per fill retail)
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1	QL(43 GM per 30 day(s) retail)
<i>estradiol vaginal TABS</i>	1	
PREMARIN	2	QL(43 GM per 30 day(s) retail)
Vaginal Progestins		
CRINONE GEL	2	AL(At least 15 yrs old)
FIRST-PROGESTERONE VGS SUPP	2	AL(At least 15 yrs old)
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(6 EA per 180 day(s) retail)
AUVI-Q SOAJ 0.15 MG/0.15ML, 0.3 MG/0.3ML	NP	QL(6 EA per 180 day(s) retail; 180 EA per 180 days mail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	2	QL(6 EA per 180 day(s) retail; 6 EA per 180 days mail)
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	
EPIPEN 2-PAK SOAJ ( <i>epinephrine (anaphylaxis)</i> )	2	QL(6 EA per 180 day(s) retail)
EPIPEN JR 2-PAK SOAJ ( <i>epinephrine (anaphylaxis)</i> )	2	QL(6 EA per 180 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
NEFFY SOLN NA	2	
Neurogenic Orthostatic Hypotension (NOH) - Agents		
<i>droxidopa</i>	1	SP; PA
Vasopressors		
<i>midodrine hcl</i>	1	
<b>VITAMINS</b>		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	1	
<i>cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT</i>	1	QL(0.267 EA daily)
<i>cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML</i>	1	
<i>ergocalciferol CAPS</i>	1	
KEY-E CHEW	2	QL(2 EA daily)
<i>phytonadione TABS 5 MG</i>	1	
VITAMIN D3 LIQD PO 125 MCG/ML	2	
VITAMIN E/D-ALPHA CAPS 200 UNIT	2	QL(2 EA daily)
<i>vitamin e CAPS</i>	1	QL(2 EA daily)
VITAMIN E CAPS	2	QL(2 EA daily)
VITAMIN E CHEW	2	QL(2 EA daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	1	QL(100 EA per 34 day(s) retail)
B-1 TABS	2	QL(2.94 EA daily)
NIACIN ER CPCR	2	
NIACIN ER TBCR	2	
<i>niacin CPCR 250 MG, 500 MG</i>	1	
<i>niacin TABS 500 MG</i>	1	
<i>niacin TBCR</i>	1	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>riboflavin TABS</i>	1	QL(2.94 EA daily)
<i>thiamine hcl TABS</i>	1	QL(2.94 EA daily)
<i>thiamine mononitrate TABS 100 MG</i>	1	QL(2.94 EA daily)

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ASSURE LANCE PLUS SAFETY 30G .....	62	AVASTIN .....	26	baclofen SUSP .....	79
ASSURE LANCE SAFETY LANCET 28G .....	62	AVEED SOLN .....	8	baclofen TABS 10 MG, 20 MG .....	79
ASTAGRAF XL CP24 .....	75	AVONEX PEN AJKT .....	88	baclofen TABS 15 MG .....	79
atazanavir sulfate CAPS .....	32	AVONEX PREFILLED PSKT .....	88	baclofen TABS 5 MG .....	79
ATELVIA TBEC (risedronate sodium) .....	51	AVOPEF SOLN 100 MG/5ML .....	29	BAFIERTAM .....	88
atenolol & chlorthalidone .....	23	AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML .....	5	balsalazide disodium CAPS .....	54
atenolol TABS .....	35	azacitidine SUSR .....	26	BAQSIMI ONE PACK POWD .....	17
ATGAM .....	75	azathioprine TABS 50 MG .....	75	BAQSIMI TWO PACK POWD .....	17
atomoxetine hcl .....	2	azathioprine TABS 75 MG, 100 MG 75 .....	75	BASAGLAR TEMPO PEN SOPN .....	17
ATORVALIQ SUSP .....	22	azelastine hcl (ophth) .....	84	BCG VACCINE .....	91
atorvastatin calcium TABS .....	22	azelastine hcl .....	80	b-complex vitamins CAPS .....	76
ATRALIN GEL (tretinoin) .....	42	azelastine hcl-fluticasone propionate SUSP .....	80	b-complex vitamins TABS .....	76
atropine sulfate (ophthalmic) OINT .....	83	azithromycin SUSR 100 MG/5ML .....	60	b-complex w/ c & folic acid CAPS .....	76
atropine sulfate (ophthalmic) SOLN 83 .....	83	azithromycin SUSR 200 MG/5ML .....	60	b-complex w/ c & folic acid TABS 60 MG-10 MG-300 MCG-1 MG-20 MG- 0.01 MCG-10 MG-1.7 MG-1.5 MG, 1 MG .....	76
ATROPINE SULFATE SOLN 1 % .....	83			BD AUTOSHIELD DUO .....	69

BD GLUCOSE CHEW .....	17	BENEFIX KIT .....	56	betamethasone valerate OINT .....	45
BD MICROTAINER LANCETS .....	62	BENLYSTA SOLR .....	76	betaxolol hcl (ophth) SOLN .....	82
BD PEN NEEDLE MICRO ULTRAFINE .....	69	BENZAC AC WASH LIQD 5 % .....	42	betaxolol hcl .....	35
BD PEN NEEDLE MINI ULTRAFINE .....	69	BENZNIDAZOLE .....	9	bethanechol chloride .....	91
BD PEN NEEDLE NANO 2ND GEN . 69		benzonatate 100 MG .....	41	BETHKIS NEBU (tobramycin) .....	2
BD PEN NEEDLE NANO ULTRAFINE .....	69	benzonatate 200 MG .....	41	BEVACIZUMAB IZ 2.5 MG/0.1ML, 3.25 MG/0.13ML .....	83
BD PEN NEEDLE ORIG ULTRAFINE .....	69	benzoyl peroxide GEL 2.5 %, 5 %, 10 % .....	42	BEVACIZUMAB IZ 2.75 MG/0.11ML . 83	
BD PEN NEEDLE SHORT ULTRAFINE .....	69	benzoyl peroxide LIQD 5 %, 10 % .	42	BEVESPI AEROSPHERE .....	11
BD PEN NEEDLES .....	69	benzoyl peroxide LOTN 5 %, 10 % 42		bexarotene (topical) .....	43
BD SWAB SINGLE USE REGULAR 68		BENZOYL PEROXIDE LOTN 5 %, 10 % .....	42	bexarotene .....	29
BD VERITOR SYSTEM SARS-COV- 2 .....	49	benztropine mesylate TABS .....	29	BEXSERO 0.5 ML .....	91
betamethasone dipropionate 40 MCG/ACT, 80 MCG/ACT .....	11	BERINERT KIT .....	57	BEYFORTUS .....	86
BEDDING SPRAY LICE TREATMENT AERO 0.5 % .....	48	betaine .....	52	bicalutamide .....	27
BELEODAQ .....	28	betamethasone dipropionate (topical) CREA .....	45	BIKTARVY 120 MG-30 MG-15 MG 32	
BELRAPZO SOLN .....	25	betamethasone dipropionate (topical) LOTN .....	45	BIKTARVY 200 MG-50 MG-25 MG 32	
BENADRYL ALLERGY EXTRA STR TABS .....	21	betamethasone dipropionate (topical) OINT .....	45	BILAC CAPS .....	19
benazepril & hydrochlorothiazide .	24	betamethasone dipropionate augmented CREA .....	45	bimatoprost SOLN .....	85
benazepril hcl 40 MG .....	23	betamethasone dipropionate augmented GEL 0.05 % .....	45	BIMZELX SOAJ 160 MG/ML .....	43
benazepril hcl 5 MG, 10 MG, 20 MG . 23		betamethasone dipropionate augmented LOTN .....	45	BIMZELX SOAJ 320 MG/2ML .....	43
BENDAMUSTINE HCL SOLN .....	25	betamethasone dipropionate augmented OINT .....	45	BIMZELX SOSY 160 MG/ML .....	43
bendamustine hcl SOLR .....	25	betamethasone valerate CREA ...	45	BIMZELX SOSY 320 MG/2ML .....	43
BENDEKA SOLN .....	25	betamethasone valerate FOAM ...	45	BINAXNOW COVID-19 AG CARD 49	
		betamethasone valerate LOTN ...	45	BINAXNOW COVID-19 AG HOME TEST KIT .....	49
				BINAXNOW COVID-19 ANTIGEN SELF KIT .....	49
				BIOCORE DAILY CAPS .....	19

BIOCORE IMMUNE+ CAPS .....19	BREATHE COMFORT CHAMBER/ADULT DEVI .....70	41 brompheniramine & pseudoeph ELIX 41
BIOCORE RESTORE CAPS ..... 19	BREATHE COMFORT CHAMBER/CHILD DEVI .....70	brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML ..... 41
BIONARA ULTRA CPDR .....19	BREATHE EASE LARGE DEVI ... 70	BRYNOVIN SOLN PO 25 MG/ML .17
BIOSTORA CAPS ..... 19	BREATHE EASE MEDIUM DEVI ..70	BUBBLES THE FISH II PEDI MASK MISC .....71
BIOTHRAX .....91	BREATHE EASE NEB MASK/CHILD MISC ..... 70	BUCAPSOL PO 7.5 MG, 10 MG, 15 MG .....9
bisacodyl SUPP .....60	BREATHE EASE NEB MASK/INFANT MISC .....71	budesonide (inhalation) SUSP .....11
bisacodyl TBEC .....60	BREATHE EASE SMALL DEVI ...71	budesonide TB24 ..... 40
bismuth subsalicylate CHEW 262 MG .....19	BREATHERRITE VALVED MDI CHAMBER DEVI .....71	budesonide-formoterol fumarate dihydrate .....11
bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML .....19	BREO ELLIPTA ..... 11	bumetanide TABS ..... 51
bisoprolol & hydrochlorothiazide ..24	BREZTRI AEROSPHERE .....11	BUPHENYL POWD (sodium phenylbutyrate) ..... 52
bisoprolol fumarate .....35	BRIDION SOLN .....20	BUPHENYL TABS (sodium phenylbutyrate) ..... 52
bisoprolol fumarate 2.5 MG .....35	BRILINTA 60 MG, 90 MG (ticagrelor) 57	buprenorphine hcl SUBL ..... 8
BIVIGAM SOLN .....85	brimonidine tartrate 0.1 %, 0.15 % 83	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG ... 7
BLINCYTO ..... 26	brimonidine tartrate 0.2 % ..... 83	buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG ..... 7
BONJESTA TBCR .....21	brimonidine tartrate-timolol maleate . 82	buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG ..... 7
BONSITY SOPN 560 MCG/2.24ML 51	BRIUMVI .....88	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG .... 8
BOOSTRIX SUSP ..... 90	brivaracetam SOLN IV 50 MG/5ML 13	buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG ..... 8
BOOSTRIX SUSY ..... 90	BRIXADI (WEEKLY) SOSY .....7	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG ..... 8
bortezomib SOLR IJ ..... 28	BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML .....7	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG ..... 8
bosentan TABS .....37	bromfenac sodium (ophth) 0.075 %, 0.09 % .....84	buprenorphine PTWK ..... 8
BOSULIF TABS 100 MG, 500 MG 28	bromocriptine mesylate CAPS .....30	bupropion hcl (smoking deterrent) 88
BOTOX IJ ..... 81	bromocriptine mesylate TABS 2.5 MG ..... 30	
BPROTECTED PEDIA POLY-VITE SOLN PO .....79	brompheniramine & phenyleph ELIX .	
BPROTECTED PEDIA POLY- VITE/FE SOLN .....78		
BRAFTOVI 75 MG .....28		

bupropion hcl TABS .....	15	calcipotriene-betamethasone dipropionate SUSP .....	45	CARAC CREA (fluorouracil (topical)) 43
bupropion hcl TB12 100 MG .....	15	calcitonin (salmon) IJ .....	51	CARBAGLU (carglumic acid) .....
bupropion hcl TB12 150 MG .....	15	calcitonin (salmon) NA .....	51	carbamazepine CHEW 100 MG ...
bupropion hcl TB12 200 MG .....	15	calcitriol CAPS .....	52	carbamazepine CHEW 200 MG ...
bupropion hcl TB24 150 MG .....	15	calcium acetate (phosphate binder) CAPS .....	55	carbamazepine CP12 .....
bupropion hcl TB24 300 MG .....	15	calcium acetate (phosphate binder) TABS .....	55	carbamazepine SUSP .....
bupropion hcl TB24 450 MG .....	15	CALCIUM ACETATE .....	74	carbamazepine TABS .....
bupropion hcl TB24 450 MG .....	15	calcium carbonate (antacid) CHEW 500 MG .....	9	carbamazepine TB12 .....
bupropion hcl TB24 450 MG .....	15	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT- 600 MG, 400 UNIT-600 MG, 5 MCG- 600 MG .....	74	carbamide peroxide (otic) 6.5 % ...
bupropion hcl TB24 450 MG .....	15	calcium polycarbophil TABS .....	60	CARBATROL CP12 (carbamazepine) .....
bupropion hcl TB24 450 MG .....	15	CAMCEVI .....	27	carbidopa .....
bupropion hcl TB24 450 MG .....	15	camphor & menthol LOTN .....	43	carbidopa-levodopa TABS .....
bupropion hcl TB24 450 MG .....	15	CANASA SUPP (mesalamine) ....	54	carbidopa-levodopa TBCR .....
bupropion hcl TB24 450 MG .....	15	candesartan cilexetil .....	23	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML .....
bupropion hcl TB24 450 MG .....	15	candesartan cilexetil- hydrochlorothiazide .....	24	CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl) .....
bupropion hcl TB24 450 MG .....	15	capecitabine .....	26	CAREONE LANCET SUPER THIN 30G .....
bupropion hcl TB24 450 MG .....	15	CAPHOSOL SOLN .....	76	CAREONE LANCET THIN 23G ...
bupropion hcl TB24 450 MG .....	15	CAPLYTA .....	30	CARESENS LANCETS .....
bupropion hcl TB24 450 MG .....	15	CAPRELSA .....	28	CARESENS LANCETS 30G .....
bupropion hcl TB24 450 MG .....	15	capsaicin CREA 0.025 %, 0.075 % 48	48	CARESTART COVID-19 HOME TEST KIT .....
bupropion hcl TB24 450 MG .....	15	capsaicin CREA 0.035 % .....	48	CARETOUCH ALCOHOL PREP ..
bupropion hcl TB24 450 MG .....	15	capsaicin CREA 0.1 % .....	48	CARETOUCH SAFETY LANCETS 62
bupropion hcl TB24 450 MG .....	15	captopril & hydrochlorothiazide ...	24	CARETOUCH SAFETY LANCETS 26G .....
bupropion hcl TB24 450 MG .....	15	captopril .....	23	

CARETOUCH TWIST LANCETS 28G .....	62	cefprozil TABS .....	37	chloroquine phosphate TABS 250 MG .....	25
CARETOUCH TWIST LANCETS 30G .....	62	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG .....	37	chloroquine phosphate TABS 500 MG .....	25
CARETOUCH TWIST LANCETS 33G .....	62	cefuroxime axetil TABS .....	37	chlorpheniramine maleate SYRP ..	21
CARETOUCH TWIST MC LANCETS 30G .....	62	celecoxib .....	5	chlorpheniramine maleate TABS ..	21
carglumic acid .....	52	CELONTIN (methsuximide) .....	14	chlorpromazine hcl TABS .....	31
carisoprodol TABS 250 MG .....	79	cephalexin CAPS 250 MG, 500 MG 37		chlorthalidone 25 MG, 50 MG .....	51
carisoprodol TABS 350 MG .....	79	cephalexin SUSR .....	37	chlorzoxazone TABS 250 MG, 375 MG, 750 MG .....	79
carteolol hcl (ophth) .....	82	CEPROTIN .....	57	chlorzoxazone TABS 500 MG .....	79
carvedilol 25 MG .....	34	CEQUA SOLN .....	84	CHOLBAM .....	54
carvedilol 3.125 MG, 6.25 MG, 12.5 MG .....	34	CERDELGA .....	57	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT .....	96
carvedilol phosphate .....	34	CEREZYME 400 UNIT .....	57	cholecalciferol CAPS .....	96
CASGEVY .....	57	cetirizine hcl CAPS .....	21	cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML .....	96
CASTIVA WARMING LOTN .....	48	cetirizine hcl CHEW .....	21	cholestyramine light PACK .....	22
CAYSTON .....	25	cetirizine hcl SOLN PO .....	21	cholestyramine light POWD .....	22
cefaclor CAPS .....	37	cetirizine hcl SYRP PO 1 MG/ML ..	21	cholestyramine PACK .....	22
CEFACTOR ER TB12 .....	37	cetirizine hcl TABS .....	21	cholestyramine POWD .....	22
cefaclor SUSR 250 MG/5ML .....	37	CETRAXAL (ciprofloxacin hcl (otic)) . 85		CHORIONIC GONADOTROPIN IM 52	
cefadroxil CAPS .....	37	CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ..	88	CHOSEN LANCETS 30G .....	62
cefadroxil SUSR .....	37	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate) .....	88	CHOSEN SAFETY LANCETS 28G 62	
cefadroxil TABS .....	37	CHANTIX TABS (varenicline tartrate) .....	88	CIBINQO .....	47
cefdinir CAPS .....	37	CHEMET .....	20	ciclopirox SOLN .....	43
cefdinir SUSR .....	37	CHEMSTRIP K STRP .....	49	cilostazol .....	57
cefixime CAPS .....	37	chenodiol .....	54	cimetidine TABS 200 MG .....	90
cefixime SUSR .....	37	chlordiazepoxide hcl CAPS .....	10	cimetidine TABS 300 MG, 400 MG 90	
cefpodoxime proxetil SUSR .....	37	chlorhexidine gluconate (mouth- throat) .....	76		
cefpodoxime proxetil TABS .....	37				
cefprozil SUSR .....	37				

cimetidine TABS 800 MG .....90	CHAMBER DEVI .....71	clobetasol propionate GEL 0.05 % 45
cinacalcet hcl .....52	CLEVER CHOICE LANCETS 21G 62	clobetasol propionate LIQD .....45
CINQAIR .....10	CLEVER CHOICE LANCETS 23G 62	clobetasol propionate LOTN .....45
CINRYZE SOLR IV .....57	CLEVER CHOICE LANCETS 28G 62	clobetasol propionate OINT 0.05 % 45
CIPRO SUSR .....54	clindamycin hcl 150 MG, 300 MG .25	clobetasol propionate SHAM ..... 45
ciprofloxacin hcl (ophth) SOLN .... 83	clindamycin palmitate hydrochloride . 25	clobetasol propionate SOLN 0.05 % . 45
ciprofloxacin hcl (otic) .....85	clindamycin phosphate (topical) GEL 42	clocortolone pivalate ..... 45
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG .....54	clindamycin phosphate (topical) LOTN .....42	CLODERM (clocortolone pivalate) 45
ciprofloxacin-dexamethasone .....85	clindamycin phosphate (topical) SOLN .....42	clomipramine hcl ..... 16
cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML .....25	clindamycin phosphate vaginal CREA .....95	clonazepam TABS ..... 13
CISPLATIN SOLR .....25	clindamycin phosphate-benzoyl peroxide (refrigerate) .....42	clonazepam TBDP .....13
CITALOPRAM HYDROBROMIDE CAPS 30 MG (citalopram hydrobromide) .....15	clindamycin phosphate-tretinoin ..42	clonidine hcl (adhd) TB12 .....2
citalopram hydrobromide CAPS 30 MG ..... 15	CLINDESSE .....95	clonidine hcl TABS .....23
citalopram hydrobromide SOLN ... 15	CLINITEST RAPID COVID-19 TEST KIT .....49	clopidogrel bisulfate 300 MG ..... 57
citalopram hydrobromide TABS ... 15	clobazam SUSP .....13	clopidogrel bisulfate 75 MG .....57
cladribine 10 MG/10ML .....26	clobazam TABS .....13	clorazepate dipotassium TABS ....10
clarithromycin SUSR .....61	clobetasol propionate CREA 0.05 % . 45	clotrimazole (topical) CREA ..... 43
clarithromycin TABS .....61	clobetasol propionate emollient base 0.05 % .....45	clotrimazole (topical) SOLN ..... 43
clarithromycin TB24 .....61	clobetasol propionate emulsion ...45	clotrimazole vaginal CREA 1 % ... 95
CLEANLET LANCETS 28G .....62	clobetasol propionate FOAM ..... 45	clotrimazole vaginal CREA 2 % ... 95
CLEARDETECT COVID-19 AG HOME KIT .....49		clotrimazole w/ betamethasone CREA ..... 43
CLEOCIN CREA (clindamycin phosphate vaginal) .....95		clotrimazole w/ betamethasone LOTN .....43
CLEVER CHEK LANCETS .....62		clozapine TABS .....31
CLEVER CHOICE COMFORT EZ 62		clozapine TBDP .....31
CLEVER CHOICE HOLDING		CO MONITOR REPLACEMENT PIECES MISC .....71
		COAGADDEX .....56

COAGUCHEK LANCETS .....	62	COMFORT TOUCH LANCETS 31G .	62	CORTROPHIN GEL .....	52
coal tar extract SHAM 0.5 % .....	49	COMFORT TOUCH PLUS LANCETS	28G .....	62	COSENTYX (300 MG DOSE) SOSY .
COARTEM .....	25	COMFORT TOUCH PLUS LANCETS	30G .....	62	43
COBAS LIAT SARS-COV-2 ASSAY .	49	COMFORT TOUCH TWIST LANCET	30G .....	62	COSENTYX SENSOREADY (300
COBAS LIAT SARS-COV-2		COMIRNATY 5-11 YEARS SUSP 10			MG) SOAJ .....
CONTROL .....	49	COMIRNATY SUSP .....	92		44
COBENFY CAPS .....	31	COMIRNATY SUSY .....	92		COSENTYX SENSOREADY PEN
COBENFY STARTER PACK CPPK	31	COMPACT SPACE CHAMBER DEVI			SOAJ .....
codeine sulfate TABS 30 MG .....	6	.....	71		44
CODEINE SULFATE TABS .....	6	COMPACT SPACE CHAMBER/LG			COSENTYX SOLN .....
colchicine TABS .....	56	MASK DEVI .....	71		44
colchicine w/ probenecid .....	56	COMPACT SPACE CHAMBER/MED			COSENTYX SOSY .....
colestipol hcl GRAN .....	22	MASK DEVI .....	71		44
colestipol hcl TABS .....	22	COMPACT SPACE CHAMBER/SM			COSENTYX UNOREADY SOAJ ..
COLLAVERA GEL 2 % .....	48	MASK DEVI .....	71		44
COMBIGAN (brimonidine tartrate-		COMPLERA 200 MG-300 MG-25 MG			cosyntropin SOLR .....
timolol maleate) .....	82	(emtricitabine- rilpivirine-tenofovir			49
COMBIPATCH PTTW .....	53	disoproxil fumarate) .....	32		COTELLIC .....
COMBIVENT RESPIMAT AERS ..	12	CONCERTA TBCR (methylphenidate			28
COMETRIQ (100 MG DAILY DOSE)		hcl) .....	2		COVID-19 AT HOME ANTIGEN
KIT .....	28	CONDOMS-MISC .....	61		TEST KIT .....
COMETRIQ (140 MG DAILY DOSE)		CONJUPRI (levamlodipine maleate)			49
KIT .....	28	35			COVID-19 AT-HOME TEST KIT ...
COMETRIQ (60 MG DAILY DOSE)		CONZIP CP24 (tramadol hcl) .....	6		50
KIT .....	28	COPAXONE SOSY (glatiramer			COVID-19 OTC ANTIGEN 1-PACK
COMFORT ASSURED LANCETS		acetate) .....	88		KIT .....
28G .....	62	COREG CR (carvedilol phosphate)			50
COMFORT ASSURED LANCETS		35			CREON CPEP .....
33G .....	62	CORIFACT .....	56		50
COMFORT TOUCH ALCOHOL		CORTISONE ACETATE TABS ...	40		CRINONE GEL .....
PREP .....	68				95

CUVITRU SOLN .....	85	CYMBALTA CPEP 20 MG, 30 MG (duloxetine hcl) .....	16	DAYHIST ALLERGY 12 HOUR RELIEF TABS .....	21
CVS ALCOHOL PREP PADS .....	68	CYMBALTA CPEP 60 MG (duloxetine hcl) .....	16	decitabine .....	26
CVS COVID-19 AT HOME TEST KIT KIT .....	50	cyproheptadine hcl SYRP .....	22	deferasirox PACK .....	20
CVS LANCETS ORIGINAL .....	62	cyproheptadine hcl TABS .....	22	deferasirox TABS .....	20
CVS LANCETS THIN 26G .....	62	CYRAMZA .....	26	deferasirox TBSO .....	20
CVS LICE-BEDBUG-MITE AERO 0.5 % .....	48	CYTAGON CAPS .....	55	deferiprone TABS .....	20
CVS PREP .....	68	CYSTARAN .....	84	deferoxamine mesylate .....	20
CVS ULTRA THIN LANCETS .....	62	cytarabine SOLN .....	26	DEFITELIO .....	57
cyanocobalamin SOLN IJ 1000 MCG/ML .....	58	CYTOGAM SOLN .....	85	deflazacort SUSP .....	40
cyclobenzaprine hcl CP24 .....	79	CYTRA K CRYSTALS PACK 1002 MG-3300 MG .....	55	deflazacort TABS .....	40
cyclobenzaprine hcl TABS 5 MG, 10 MG .....	79	dabigatran etexilate mesylate CAPS . 13 .....	13	DEFLUX .....	56
cyclobenzaprine hcl TABS 7.5 MG 79	79	DAILY VITE MULTIVITAMIN/IRON TABs 50 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-15 MG-1.5 MG .....	77	DELSTRIGO .....	32
CYCLOGYL 0.5 % .....	83	dalfampridine .....	88	DENAVIR (penciclovir) .....	44
cyclopentolate hcl 1 % .....	83	DANTRIUM CAPS 25 MG (dantrolene sodium) .....	79	DENGVAXIA .....	92
cyclophosphamide CAPS 50 MG ..25	25	dantrolene sodium CAPS .....	79	DEPAKOTE SPRINKLES CSDR (divalproex sodium) .....	14
CYCLOPHOSPHAMIDE TABS ....25	25	dapsone .....	25	DEPO-SUBQ PROVERA 104 SUSY SC .....	39
cyclosporine (ophth) EMUL .....	84	DAPTACEL .....	90	DERMACINRX LIDOCAINE CREA 3 % .....	48
cyclosporine CAPS .....	75	DARAPRIM (pyrimethamine) .....	25	DERMACINRX PROBISOL CAPS .19	19
cyclosporine modified (for microemulsion) CAPS .....	75	darifenacin hydrobromide .....	91	DERMACINRX PROBITRAN CAPS 19 .....	19
cyclosporine modified (for microemulsion) SOLN .....	75	darunavir TABS .....	32	DERMACINRX SALICYLIC ACID GEL 6 % .....	48
cyclosporine SOLN IV 50 MG/ML .75	75	DARZALEX .....	26	DESCOVY 120 MG-15 MG .....	32
CYLTEZO (2 PEN) AJKT .....	4	dasatinib .....	28	DESCOVY 200 MG-25 MG .....	32
CYLTEZO (2 SYRINGE) PSKT .....	4	daunorubicin hcl SOLN 50 MG/10ML 28 .....	28	desipramine hcl TABS .....	16
CYLTEZO-CD/UC/HS STARTER AJKT .....	4	DAURISMO .....	27	desloratadine TBDP .....	21
CYLTEZO-PSORIASIS/UV STARTER AJKT .....	4			desmopressin acetate SOLN IJ ...	53
				DESMOPRESSIN ACETATE SOLN	

NA .....	53	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML ..40	DHIVY TABS .....	30
desmopressin acetate spray .....	53	dexamethasone sodium phosphate SOSY IJ 4 MG/ML .....	DIALYVITE TABS 100 MG-10 MG- 0.3 MG-1 MG-1.5 MG-0.006 MG-10 MG-1.7 MG-20 MG .....	76
desmopressin acetate spray refrigerated 0.01 % .....	53	dexamethasone SOLN .....	DIATHRIVE LANCET ULTRA THIN 30 .....	62
desmopressin acetate TABS .....	53	dexamethasone TABS 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 4 MG, 6 MG ..40	DIATHRIVE LANCETS .....	62
desogestrel & ethinyl estradiol .....	37	dexchlorpheniramine maleate SOLN . 21	DIATRUST COVID-19 HOME TEST KIT .....	50
desogestrel-ethinyl estradiol (biphasic) .....	37	dexmedetomidine hcl in sodium chloride SOLN .....	diazepam CONC .....	10
desogestrel-ethinyl estradiol (triphasic) .....	37	dexmedetomidine hcl SOLN 200 MCG/2ML .....	diazepam SOLN IJ 5 MG/ML, 10 MG/2ML .....	10
desonide CREA .....	45	dexmedetomidine hcl SOLN 200 MCG/2ML .....	diazepam SOLN IJ 5 MG/ML .....	10
desonide LOTN .....	45	dexamethylphenidate hcl CP24 .....	DIAZEPAM SOLN IJ 5 MG/ML ....	10
desonide OINT .....	45	dexamethylphenidate hcl TABS .....	diazepam SOLN PO 5 MG/5ML ...	10
desoximetasone CREA 0.05 % ....	45	dexrazoxane hcl .....	diazepam TABS .....	10
desoximetasone CREA 0.25 % ....	45	DEXTENZA INST .....	diazoxide .....	17
desoximetasone GEL .....	45	dextroamphetamine sulfate CP24 10 MG, 15 MG .....	dibucaine .....	48
desoximetasone LIQD .....	45	dextroamphetamine sulfate CP24 5 MG .....	diclofenac potassium TABS 50 MG .5	
desoximetasone OINT .....	45	dextroamphetamine sulfate SOLN ..1	diclofenac sodium (ophth) .....	84
DESTRESS-IRON TABS .....	77	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG .....	diclofenac sodium (topical) GEL EX 43	
DESVENLAFAXINE ER .....	16	dextroamphetamine sulfate TABS 5 MG, 10 MG .....	diclofenac sodium TB24 .....	5
desvenlafaxine succinate 100 MG .16		dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML .....	diclofenac sodium TBEC .....	5
desvenlafaxine succinate 25 MG, 50 MG .....	16	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML .....	dicloxacillin sodium .....	86
DETROL LA CP24 (tolterodine tartrate) .....	91	dextrose (diabetic use) CHEW 4 GM . 17	dicyclomine hcl CAPS .....	90
dexamethasone ELIX .....	40		dicyclomine hcl SOLN PO .....	90
DEXAMETHASONE INTENSOL CONC .....	40		dicyclomine hcl TABS .....	90
dexamethasone sodium phosphate (ophth) .....	84		DIFFERIN CREA (adapalene) ....	42
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML .....	40		DIFFERIN GEL 0.3 % (adapalene) 42	
			DIFFERIN LOTN .....	42

diflorasone diacetate CREA .....	45	diphenhydramine hcl (sleep) TABS 50 MG .....	59	100 MG/10ML .....	60
diflorasone diacetate OINT .....	45	diphenhydramine hcl CAPS .....	21	DOCUSATE SODIUM SYRP .....	60
diflunisal TABS .....	6	diphenhydramine hcl ELIX 12.5 MG/5ML .....	21	docusate sodium TABS .....	60
digoxin SOLN PO 0.05 MG/ML ....	36	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML .....	21	dofetilide .....	10
digoxin TABS 125 MCG, 250 MCG 36		diphenhydramine hcl TABS 25 MG 21		donepezil hydrochloride TABS 23 MG .....	87
dihydroergotamine mesylate SOLN NA 4 MG/ML .....	74	diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG .....	59	donepezil hydrochloride TABS 5 MG, 10 MG .....	87
DILANTIN (phenytoin sodium extended) .....	14	diphenoxylate w/ atropine LIQD ...	20	donepezil hydrochloride TBDP ....	87
DILANTIN INFATABS CHEW (phenytoin) .....	14	diphenoxylate w/ atropine TABS ...	20	DOPTELET .....	58
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG .....	35	DIPROLENE OINT (betamethasone dipropionate augmented) .....	45	dorzolamide hcl .....	85
diltiazem hcl coated beads CP24 240 MG .....	35	dipyridamole .....	57	DORZOLAMIDE HCL .....	85
diltiazem hcl coated beads CP24 360 MG .....	35	disopyramide phosphate CAPS ...	10	DORZOLAMIDE HCL-TIMOLOL MAL .....	82
diltiazem hcl CP12 .....	35	disulfiram 250 MG .....	87	dorzolamide hcl-timolol maleate ..	82
diltiazem hcl CP24 120 MG, 240 MG 35		divalproex sodium CSDR .....	14	DOVATO .....	32
diltiazem hcl CP24 180 MG .....	35	divalproex sodium TB24 .....	14	doxazosin mesylate .....	23
diltiazem hcl extended release beads .....	35	divalproex sodium TBEC .....	14	doxepin hcl (sleep) .....	59
diltiazem hcl TABS .....	35	docetaxel CONC 160 MG/8ML ....	29	doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG .....	16
diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG .....	35	DOCETAXEL CONC 160 MG/8ML 29		doxepin hcl CAPS 150 MG .....	16
dimethyl fumarate CDPK .....	88	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML .....	29	doxepin hcl CONC .....	16
dimethyl fumarate CPDR .....	88	docetaxel SOLN .....	29	doxycycline (monohydrate) CAPS 50 MG, 100 MG .....	89
diphenhydramine hcl (sleep) CAPS 59		DOCIVYX SOLN .....	29	doxycycline (monohydrate) TABS 50 MG, 100 MG .....	89
diphenhydramine hcl (sleep) LIQD 59		docusate sodium CAPS 100 MG, 250 MG .....	60	doxycycline hyclate CAPS .....	89
diphenhydramine hcl (sleep) TABS 25 MG .....	59	docusate sodium CAPS 50 MG ...	60	doxycycline hyclate TABS 100 MG 89	
		docusate sodium LIQD 50 MG/5ML,		doxylamine succinate (sleep) .....	59

DROPLET LANCETS ULTRA THIN 30G .....	62	dutasteride .....	56	EASY TOUCH SAFETY LANCETS 21G .....	63
DROPLET PERSONAL LANCETS 30G .....	63	dutasteride-tamsulosin hcl .....	56	EASY TOUCH SAFETY LANCETS 23G .....	63
DROPSAFE ACTI-LANCE 23G .....	63	DYANAVEL XR TBCR .....	1	EASY TOUCH SAFETY LANCETS 26G .....	63
DROPSAFE ALCOHOL PREP .....	68	DYMISTA SUSP (azelastine hcl- fluticasone propionate) .....	80	EASY TOUCH SAFETY LANCETS 28G .....	63
DROPSAFE MEDLANCE LANCET 30G .....	63	DYSPORT .....	81	EBASE CONTROLLER KIT MISC .....	71
drosiprenone-ethinyl estradiol .....	38	E.E.S. GRANULES SUSR (erythromycin ethylsuccinate) .....	61	EBGLYSS SOAJ .....	47
drosiprenone-ethinyl estradiol- levomefolate calcium .....	38	EASIVENT MASK LARGE MISC .....	71	EBGLYSS SOSY .....	47
DROXIA CAPS .....	57	EASIVENT MASK MEDIUM MISC .....	71	econazole nitrate CREA .....	43
droxidopa .....	96	EASIVENT MASK SMALL MISC .....	71	EDURANT PED PO 2.5 MG .....	32
DRUG MART ON-THE-GO LANCET 30G .....	63	EASIVENT MISC .....	71	efavirenz CAPS 200 MG .....	32
DRUG MART UNILET LANCETS 28G .....	63	EASY COMFORT ALCOHOL PADS 69		efavirenz CAPS 50 MG .....	32
DRUG MART UNILET LANCETS 30G .....	63	EASY COMFORT LANCETS .....	63	efavirenz TABS .....	32
DRUG MART UNILET LANCETS 33G .....	63	EASY COMFORT LANCETS TWIST TOP .....	63	efavirenz-emtricitabine-tenofovir disoproxil fumarate .....	32
DUETACT (pioglitazone hcl- glimepiride) .....	16	EASY TOUCH ALCOHOL PREP MEDIUM .....	69	efavirenz-lamivudine-tenofovir disoproxil fumarate .....	32
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT .....	12	EASY TOUCH LANCETS 21G .....	63	EFFER-K TBEF 25 MEQ .....	74
DULERA 50 MCG/ACT-5 MCG/ACT 12		EASY TOUCH LANCETS 23G .....	63	ELAPRASE .....	52
duloxetine hcl CPEP 20 MG, 30 MG, 40 MG .....	16	EASY TOUCH LANCETS 26G .....	63	ELELYSO .....	57
duloxetine hcl CPEP 60 MG .....	16	EASY TOUCH LANCETS 28G .....	63	ELEPSIA XR TB24 .....	13
DUPIXENT SOAJ .....	47	EASY TOUCH LANCETS 28G/TWIST .....	63	eletriptan hydrobromide .....	74
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML .....	47	EASY TOUCH LANCETS 30G .....	63	ELEVIDYS 10.0-10.4 KG .....	80
DUPIXENT SOSY 300 MG/2ML .....	47	EASY TOUCH LANCETS 30G/TWIST .....	63	ELEVIDYS 10.5-11.4 KG .....	80
		EASY TOUCH LANCETS 32G .....	63	ELEVIDYS 11.5-12.4 KG .....	80
		EASY TOUCH LANCETS 32G/TWIST .....	63	ELEVIDYS 12.5-13.4 KG .....	81
		EASY TOUCH LANCETS 33G/TWIST .....	63	ELEVIDYS 13.5-14.4 KG .....	81
				ELEVIDYS 14.5-15.4 KG .....	81
				ELEVIDYS 15.5-16.4 KG .....	81

ELEVIDYS 16.5-17.4 KG .....81	ELEVIDYS 46.5-47.4 KG .....81	ELIQUIS CPSP PO 0.15 MG ..... 12
ELEVIDYS 17.5-18.4 KG .....81	ELEVIDYS 47.5-48.4 KG .....81	ELIQUIS DVT/PE STARTER PACK TBPK .....12
ELEVIDYS 18.5-19.4 KG .....81	ELEVIDYS 48.5-49.4 KG .....81	ELIQUIS TABS .....12
ELEVIDYS 19.5-20.4 KG .....81	ELEVIDYS 49.5-50.4 KG .....81	ELIQUIS TBSO PO 0.5 MG .....12
ELEVIDYS 20.5-21.4 KG .....81	ELEVIDYS 50.5-51.4 KG .....81	ELLA .....39
ELEVIDYS 21.5-22.4 KG .....81	ELEVIDYS 51.5-52.4 KG .....81	ELLEENCE SOLN .....28
ELEVIDYS 22.5-23.4 KG .....81	ELEVIDYS 52.5-53.4 KG .....81	ELLUME COVID-19 HOME TEST KIT .....50
ELEVIDYS 23.5-24.4 KG .....81	ELEVIDYS 53.5-54.4 KG .....81	ELMIRON CAPS .....56
ELEVIDYS 24.5-25.4 KG .....81	ELEVIDYS 54.5-55.4 KG .....81	ELOCTATE .....56
ELEVIDYS 25.5-26.4 KG .....81	ELEVIDYS 55.5-56.4 KG .....81	eltrombopag olamine PACK 12.5 MG .....58
ELEVIDYS 26.5-27.4 KG .....81	ELEVIDYS 56.5-57.4 KG .....81	eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG .....58
ELEVIDYS 27.5-28.4 KG .....81	ELEVIDYS 57.5-58.4 KG .....81	EMBECTA AUTOSHIELD DUO ..69
ELEVIDYS 28.5-29.4 KG .....81	ELEVIDYS 58.5-59.4 KG .....81	EMBECTA PEN NEEDLE NANO .69
ELEVIDYS 29.5-30.4 KG .....81	ELEVIDYS 59.5-60.4 KG .....81	EMBECTA PEN NEEDLE NANO 2 GEN .....69
ELEVIDYS 30.5-31.4 KG .....81	ELEVIDYS 60.5-61.4 KG .....81	EMBECTA PEN NEEDLE ULTRAFINE .....69
ELEVIDYS 31.5-32.4 KG .....81	ELEVIDYS 61.5-62.4 KG .....81	EMBRACE LANCETS ULTRA THIN 30G .....63
ELEVIDYS 32.5-33.4 KG .....81	ELEVIDYS 62.5-63.4 KG .....81	EMBRACE PRESSURE ACTIVATED 21G .....63
ELEVIDYS 33.5-34.4 KG .....81	ELEVIDYS 63.5-64.4 KG .....81	EMBRACE PRESSURE ACTIVATED 28G .....63
ELEVIDYS 34.5-35.4 KG .....81	ELEVIDYS 64.5-65.4 KG .....81	EMCYT .....27
ELEVIDYS 35.5-36.4 KG .....81	ELEVIDYS 65.5-66.4 KG .....81	EMGALITY (300 MG DOSE) SOSY 73
ELEVIDYS 36.5-37.4 KG .....81	ELEVIDYS 66.5-67.4 KG .....81	EMGALITY SOAJ .....73
ELEVIDYS 37.5-38.4 KG .....81	ELEVIDYS 67.5-68.4 KG .....81	EMGALITY SOSY .....73
ELEVIDYS 38.5-39.4 KG .....81	ELEVIDYS 68.5-69.4 KG .....81	EMPLICITI .....26
ELEVIDYS 39.5-40.4 KG .....81	ELEVIDYS 69.5 KG PLUS .....81	
ELEVIDYS 40.5-41.4 KG .....81	ELIDEL (pimecrolimus) .....47	
ELEVIDYS 41.5-42.4 KG .....81	ELIGARD KIT SC 7.5 MG .....27	
ELEVIDYS 42.5-43.4 KG .....81	ELIGARD SC 22.5 MG, 30 MG, 45 MG .....27	
ELEVIDYS 43.5-44.4 KG .....81		
ELEVIDYS 44.5-45.4 KG .....81	ELIQUIS (1.5 MG PACK) TBSO PO . 12	
ELEVIDYS 45.5-46.4 KG .....81	ELIQUIS (2 MG PACK) TBSO PO .12	

emtricitabine CAPS .....	32	26 MG-24 MG, 51 MG-49 MG	EQ SPACE CHAMBER ANTI- STATIC S DEVI .....	71
emtricitabine-rilpivirine-tenofovir disoproxil fumarate .....	32	(sacubitril-valsartan) .....	36	EQL ALCOHOL SWABS .....
emtricitabine-tenofovir disoproxil fumarate .....	32	ENTYVIO PEN SOAJ .....	54	ERBITUX .....
EMTRIVA CAPS (emtricitabine) ...	32	EPCLUSA PACK .....	34	ergocalciferol CAPS .....
EMTRIVA SOLN .....	32	EPCLUSA TABS .....	34	ergoloid mesylates TABS .....
EMVERM CHEW .....	9	EPIFOAM FOAM .....	45	ergotamine w/ caffeine TABS .....
enalapril maleate & hydrochlorothiazide .....	24	epinastine hcl (ophth) .....	85	eribulin mesylate .....
enalapril maleate TABS .....	23	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML .....	95	ERIVEDGE .....
ENBREL MINI SOCT .....	5	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....	95	ERLEADA 60 MG .....
ENBREL SOLN .....	5	epinephrine (anaphylaxis) SOAJ ..	95	erlotinib hcl .....
ENBREL SOSY .....	5	epinephrine hcl (nasal) .....	80	ertapenem sodium IJ .....
ENBREL SURECLICK SOAJ .....	5	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis)) .....	95	ERYPED 200 SUSR (erythromycin ethylsuccinate) .....
ENCARE SUPP 100 MG .....	94	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis)) .....	95	erythromycin (acne aid) GEL .....
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML .....	78	EPIVIR SOLN (lamivudine) .....	32	erythromycin (acne aid) SOLN .....
ENGERIX-B SUSP 20 MCG/ML ...	92	EPIVIR TABS 150 MG (lamivudine) 32	32	erythromycin (ophth) .....
ENGERIX-B SUSY .....	92	EPIVIR TABS 300 MG (lamivudine) 32	32	ERYTHROMYCIN .....
enoxaparin sodium SOLN IJ 300 MG/3ML .....	13	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	58	erythromycin base CPEP .....
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....	13	epoprostenol sodium .....	36	erythromycin base TABS .....
enoxaparin sodium SOSY 30 MG/0.3ML .....	13	EPRONTIA SOLN 25 MG/ML (topiramate) .....	13	erythromycin base TBEC .....
enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML .....	13	EQ SPACE CHAMBER ANTI- STATIC DEVI .....	71	erythromycin ethylsuccinate SUSR 61
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML .....	13	EQ SPACE CHAMBER ANTI- STATIC L DEVI .....	71	erythromycin ethylsuccinate TABS 61
ENTADFI .....	56	EQ SPACE CHAMBER ANTI- STATIC M DEVI .....	71	ERZOFRI 351 MG/2.25ML .....
ENTRESTO CPSP .....	36			ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML .....
ENTRESTO TABS 103 MG-97 MG,				escitalopram oxalate SOLN .....

ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT 56	everolimus TABS ..... 28	KIT ..... 50
estazolam ..... 59	everolimus TBSO ..... 28	FEIBA ..... 56
estradiol & norethindrone acetate TABS ..... 53	EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG ..... 89	felbamate SUSP ..... 14
estradiol PTTW ..... 54	EVOMELA IV ..... 25	felbamate TABS ..... 14
estradiol PTWK ..... 54	EVOTAZ ..... 32	felodipine ..... 35
estradiol TABS ..... 54	EVRYSDI ..... 81	fenofibrate CAPS ..... 22
estradiol vaginal CREA ..... 95	EVRYSDI PO 5 MG ..... 81	fenofibrate micronized 134 MG, 200 MG ..... 22
estradiol vaginal TABS ..... 95	EXELON 13.3 MG/24HR (rivastigmine) ..... 87	fenofibrate micronized 30 MG, 43 MG, 130 MG ..... 22
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG ..... 54	EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine) ..... 87	fenofibrate micronized 67 MG ..... 22
eszopiclone ..... 59	exemestane ..... 27	fenofibrate TABS 40 MG, 120 MG .22
ethambutol hcl TABS ..... 25	exenatide SOPN 10 MCG/0.04ML .17	fenofibrate TABS 54 MG ..... 22
ethosuximide CAPS ..... 14	exenatide SOPN 5 MCG/0.02ML .. 17	fenofibric acid ..... 22
ethosuximide SOLN ..... 14	EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide) .... 24	FENOGLIDE TABS (fenofibrate) .. 22
ethynodiol diacet & eth estrad ..... 38	EXONDYS 51 ..... 81	FENSOLVI (6 MONTH) SC ..... 52
etodolac CAPS ..... 5	EYLEA SOLN ..... 83	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR ..... 6
etodolac TABS ..... 5	EYSUVIS SUSP ..... 84	fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR ..... 6
etodolac TB24 ..... 5	ezetimibe ..... 23	FERRETTS TABS ..... 58
etonogestrel-ethinyl estradiol ..... 39	ezetimibe-simvastatin ..... 22	FERRIPROX SOLN ..... 20
etoposide CAPS ..... 29	FABRAZYME ..... 52	ferrous fumarate TABS ..... 58
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML ..... 29	famciclovir ..... 34	ferrous fumarate-fa-b complex-c-zn- mg-mn-cu TABS ..... 58
etravirine 100 MG ..... 32	famotidine TABS 10 MG ..... 90	ferrous gluconate TABS ..... 58
etravirine 200 MG ..... 32	famotidine TABS 20 MG, 40 MG .. 90	ferrous sulfate dried TBCR ..... 58
EUFLEXXA SOSY ..... 80	FANAPT TITRATION PACK B ... 30	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML ..... 58
EULEXIN ..... 27	FANAPT TITRATION PACK C ... 30	ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML ..... 58
EVENITY ..... 51	FASENRA PEN SOAJ ..... 10	ferrous sulfate TABS 325 MG, 65
everolimus (immunosuppressant) .75	FASENRA SOSY 10 MG/0.5ML ... 10	
	FASTEP COVID-19 ANTIGEN TEST	

MG, 325 MG	58	FLORRAGUT CAPS	19	fluocinolone acetonide (otic)	85
ferrous sulfate TBEC 325 MG	58	FLORRAXIS CAPS	19	fluocinolone acetonide CREA	45
ferrous sulfate TBEC	58	FLOWFLEX COVID-19 AG HOME TEST KIT	50	fluocinolone acetonide OIL	45
fesoterodine fumarate	91	FLUAD	92	fluocinolone acetonide OINT	45
FEVERALL JUNIOR STRENGTH SUPP	6	FLUAD QUADRIVALENT	92	fluocinolone acetonide SOLN	46
fexofenadine hcl SUSP	21	FLUARIX QUADRIVALENT SUSY	92	fluocinonide CREA 0.05 %	46
fexofenadine hcl TABS 180 MG	21	FLUARIX SUSY	92	fluocinonide CREA 0.1 %	46
fexofenadine hcl TABS 60 MG	21	FLUBLOK QUADRIVALENT	92	fluocinonide emulsified base	46
FIBRICOR (fenofibric acid)	22	FLUBLOK SOSY	93	fluocinonide GEL	46
FIBRYGA	56	FLUCELVAX QUADRIVALENT SUSP	93	fluocinonide OINT	46
FIFTY50 ALCOHOL PREP	69	FLUCELVAX QUADRIVALENT SUSY	93	fluocinonide SOLN	46
FIFTY50 SAFETY SEAL LANCETS 63	63	FLUCELVAX SUSP	93	FLUORIDEX DAILY RENEWAL CONC 0.63 %	76
FIFTY50 UNILET LANCETS 33G	63	FLUCELVAX SUSY	93	fluorometholone (ophth) SUSP	84
FILTER AIR PP MISC	71	fluconazole SUSR	21	fluorouracil (topical) CREA 0.5 %	43
finasteride	56	fluconazole TABS 100 MG	21	fluorouracil (topical) CREA 5 %	43
FINGERSTIX LANCETS	63	fluconazole TABS 150 MG	21	fluorouracil (topical) SOLN	43
fingolimod hcl	88	fluconazole TABS 200 MG	21	fluoxetine hcl (pmdd) TABS 10 MG 88	
FIRDAPSE	25	fluconazole TABS 50 MG	21	fluoxetine hcl (pmdd) TABS 20 MG 88	
FIRMAGON (240 MG DOSE)	27	fludarabine phosphate SOLN	26	fluoxetine hcl CAPS	15
FIRMAGON 80 MG	27	FLUDARABINE PHOSPHATE SOLN .....	26	fluoxetine hcl CPDR	15
FIRST-PROGESTERONE VGS SUPP	95	fludarabine phosphate SOLR	26	fluoxetine hcl SOLN	15
flavoxate hcl	91	fludrocortisone acetate TABS	41	FLUOXETINE HCL TABS (fluoxetine hcl)	15
FLEBOGAMMA DIF SOLN 5 GM/100ML, 10 GM/200ML, 20 GM/400ML	85	FLULAVAL QUADRIVALENT SUSY 93		fluoxetine hcl TABS 10 MG	15
flecainide acetate	10	FLULAVAL SUSY	93	fluoxetine hcl TABS 20 MG	15
FLEQSUVY SUSP (baclofen)	79	FLUMIST	93	fluoxetine hcl TABS 60 MG	15
FLEXICHAMBER DEVI	71	FLUMIST QUADRIVALENT	93	fluphenazine decanoate	31
FLORAVITA MINI TABS	77	flunisolide (nasal)	80	fluphenazine hcl TABS	31

flurandrenolide CREA .....	46	FLUZONE SUSY .....	93	FREESTYLE LIBRE 3 SENSOR ..	64
flurandrenolide LOTN .....	46	FLYP HYPERSONIQ CARTRIDGE		FREESTYLE LIBRE READER ....	64
flurazepam hcl .....	59	MISC .....	71	FREESTYLE UNISTICK II LANCETS	
flurbiprofen sodium .....	85	FOCALIN XR CP24		.....	64
flurbiprofen TABS .....	5	(dexmethylphenidate hcl) .....	2	frovatriptan succinate .....	74
fluticasone propionate (inhalation)		folic acid TABS 1 MG .....	58	FT LICE-BEDBUG-MITE AERO 0.5	
AEPB .....	11	folic acid TABS 400 MCG, 800 MCG .	58	% .....	48
fluticasone propionate (nasal) SUSP .		FOLOTYN .....	26	FULL KIT NEBULIZER SET MISC	71
80		fondaparinux sodium .....	13	FULPHILA .....	58
fluticasone propionate CREA 0.05 %		FONDCIRCLE SINGLE USE		furosemide SOLN PO 8 MG/ML, 10	
46		LANCETS .....	63	MG/ML .....	51
fluticasone propionate hfa 110		FORA LANCETS .....	63	furosemide TABS .....	51
MCG/ACT, 220 MCG/ACT .....	11	FORFIVO XL TB24 (bupropion hcl)		FYLNETRA .....	58
fluticasone propionate hfa 44		15		gabapentin CAPS 100 MG .....	13
MCG/ACT .....	11	FORTESTA GEL TD (testosterone) 8		gabapentin CAPS 300 MG, 400 MG .	13
fluticasone propionate LOTN .....	46	fosamprenavir calcium TABS .....	32	gabapentin SOLN .....	13
fluticasone propionate OINT .....	46	fosinopril sodium &		gabapentin TABS 600 MG, 800 MG	
fluticasone-salmeterol AEPB 100		hydrochlorothiazide .....	24	13	
MCG/ACT-50 MCG/ACT, 250		fosinopril sodium .....	23	GABLOFEN SOLN IT 10000	
MCG/ACT-50 MCG/ACT, 500		FRAGMIN SOLN 10000 UNIT/4ML		MCG/20ML, 40000 MCG/20ML ...	79
MCG/ACT-50 MCG/ACT .....	12	13		GALAFOLD .....	52
fluticasone-salmeterol AERO .....	12	FREESTYLE LANCETS .....	63	galantamine hydrobromide CP24 .	87
fluvastatin sodium CAPS .....	22	FREESTYLE LIBRE 14 DAY		galantamine hydrobromide SOLN .	87
fluvastatin sodium TB24 .....	22	READER .....	63	galantamine hydrobromide TABS .	87
fluvoxamine maleate CP24 .....	15	FREESTYLE LIBRE 14 DAY		GAMASTAN IM .....	85
fluvoxamine maleate TABS .....	15	SENSOR .....	63	GAMIFANT 10 MG/2ML, 50	
FLUZONE HIGH-DOSE		FREESTYLE LIBRE 2 PLUS		MG/10ML .....	75
QUADRIVALENT .....	93	SENSOR .....	63	GAMMAGARD .....	85
FLUZONE HIGH-DOSE SUSY ....	93	FREESTYLE LIBRE 2 READER ..	63	GAMMAGARD ERC 5 GM/50ML, 10	
FLUZONE QUADRIVALENT SUSP		FREESTYLE LIBRE 2 SENSOR ..	63	GM/100ML .....	85
93		FREESTYLE LIBRE 3 PLUS		GAMMAGARD S/D LESS IGA SOLR	
FLUZONE QUADRIVALENT SUSY		SENSOR .....	63	.....	85
93		FREESTYLE LIBRE 3 READER ..	63		
FLUZONE SUSP .....	93				

GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	85	GILENYA .....	88	glycine diluent .....	87
GAMMAPLEX SOLN .....	85	GILOTRIF .....	27	glycopyrrolate TABS 1 MG, 2 MG .....	90
GAMUNEX-C .....	85	ginger (zingiber officinalis) CAPS 250 MG .....	2	GLYXAMBI .....	16
GARDASIL 9 SUSP 0.5 ML .....	93	GLASSIA SOLN .....	89	GNP ALCOHOL SWABS .....	69
GARDASIL 9 SUSY 0.5 ML .....	93	glatiramer acetate SOSY .....	88	GNP HOME LICE/BEDBUG/DUST MITE AERO 0.5 % .....	48
GAS RELIEF LIQD PO 40 MG/0.6ML .....	54	glimepiride 1 MG, 2 MG .....	18	GNP STERILE LANCETS 28G ...	64
gatifloxacin (ophth) .....	83	glimepiride 3 MG .....	18	GNP STERILE LANCETS 30G ...	64
GATTEX .....	55	glimepiride 4 MG .....	18	GNP STERILE LANCETS 33G ...	64
GAUZE SPONGES .....	64	glipizide TABS 2.5 MG .....	18	GOJJI STERILE LANCETS .....	64
GAZYVA .....	26	glipizide TABS 5 MG, 10 MG .....	18	GOODSENSE ALCOHOL SWABS	69
gefitinib .....	27	glipizide TB24 .....	19	GORDONS UREA CREA 40 % ...	47
GEL-ONE .....	80	glipizide-metformin hcl .....	16	GOTOKNOW COVID-19 ANTIGEN RAPI KIT .....	50
GELSYN-3 SOSY .....	80	GLOBAL ALCOHOL PREP EASE .....	69	granisetron hcl TABS .....	20
gemfibrozil TABS .....	22	GLOBAL INJECT EASE LANCETS 28G .....	64	GRANIX SOLN 300 MCG/ML .....	58
GEMTESA .....	91	GLOBAL INJECT EASE LANCETS 30G .....	64	GRANIX SOSY .....	58
GENABIO COVID-19 RAPID TEST KIT .....	50	GLUCAGON EMERGENCY SOLR IJ 1 MG (glucagon) .....	17	griseofulvin microsize SUSP .....	21
GENOTROPIN CART SC .....	52	glucagon SOLR IJ 1 MG .....	17	griseofulvin microsize TABS .....	21
GENOTROPIN MINIQUEICK PRSY .....	52	GLUCOCOM LANCETS 28G .....	64	griseofulvin ultramicrosize .....	21
gentamicin sulfate (ophth) SOLN .....	83	GLUCOCOM LANCETS 30G .....	64	guaifenesin-codeine SOLN .....	41
gentamicin sulfate (topical) CREA .....	42	GLUCOCOM LANCETS 33G .....	64	guanfacine hcl (adhd) .....	2
gentamicin sulfate (topical) OINT .....	42	GLUMETZA TB24 (metformin hcl) .....	16	guanfacine hcl .....	23
GENTEEL BUTTERFLY TOUCH LANCET .....	64	glyburide micronized 1.5 MG, 3 MG, 6 MG .....	19	GVOKE KIT SOLN .....	17
GENTLE-LET GP LANCETS .....	64	glyburide TABS .....	19	GYNAZOLE-1 .....	95
GENTLE-LET LANCETS .....	64	glyburide-metformin .....	16	HADLIMA PUSHTOUCH SOAJ .....	4
GENVISC 850 SOSY .....	80	glycerin (laxative) SUPP 2 GM .....	60	HADLIMA SOSY .....	4
GENVOYA .....	32	glycerol phenylbutyrate 1.1 GM/ML .....	52	HAEMOLANCE .....	64
GILENYA (fingolimod hcl) .....	88			HAEMOLANCE LOW FLOW LANCETS .....	64

HAEMOLANCE PLUS .....	64	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT .....	56	HUMIRA (2 PEN) AJKT .....	4
HAEMOLANCE PLUS HIGH FLOW .	64	HEMORRHOIDAL 0.25 %-85.5 %-3 % .....	8	HUMIRA (2 SYRINGE) PSKT .....	4
HAEMOLANCE PLUS LOW FLOW .	64	HEPAGAM B SOLN IJ .....	86	HUMIRA-CD/UC/HS STARTER AJKT 40 MG/0.8ML .....	4
HAEMOLANCE PLUS MAX FLOW	64	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	13	HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML .....	4
HAEMOLANCE PLUS PEDIATRIC FLOW .....	64	HEPLISAV-B SOSY .....	93	HUMIRA-PED<40KG CROHNS STARTER PSKT .....	4
halcinonide CREA .....	46	HERCEPTIN HYLECTA .....	28	HUMIRA-PED>=40KG CROHNS START PSKT .....	4
halobetasol propionate CREA .....	46	HIBERIX SOLR IJ .....	91	HUMIRA-PED>=40KG UC STARTER AJKT .....	4
halobetasol propionate OINT .....	46	HIGH POTENCY PROBIOTIC CAPS 19		HUMIRA-PS/UV/ADOL HS STARTER AJKT .....	4
HALOG CREA (halcinonide) .....	46	HIZENTRA SOLN .....	86	HUMIRA-PSORIASIS/UEVIT STARTER AJKT .....	4
haloperidol decanoate .....	31	HIZENTRA SOSY 10 GM/50ML ..	86	HUMULIN 70/30 SUSP .....	18
haloperidol lactate CONC .....	31	HM STERILE ALCOHOL PREP ..	69	HUMULIN N SUSP .....	18
haloperidol lactate SOLN .....	31	HULIO (2 PEN) AJKT .....	4	HUMULIN R SOLN IJ .....	18
haloperidol TABS .....	31	HULIO (2 SYRINGE) PSKT .....	4	HUMULIN R U-500 (CONCENTRATED) SOLN SC .....	18
HARVONI PACK .....	34	HUMALOG JUNIOR KWIKPEN SOPN .....	17	HUMULIN R U-500 KWIKPEN SOPN SC .....	18
HARVONI TABS .....	34	HUMALOG KWIKPEN SOPN 100 UNIT/ML .....	18	HYALGAN SOLN .....	80
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML .....	93	HUMALOG MIX 50/50 KWIKPEN SUPN .....	18	HYALGAN SOSY .....	80
H-E-B INCONTROL ALCOHOL ..	69	HUMALOG MIX 50/50 SUSP .....	18	HYCANTIN CAPS .....	29
H-E-B INCONTROL LANCETS 28G .	64	HUMALOG MIX 75/25 KWIKPEN SUPN .....	18	hydralazine hcl TABS .....	24
H-E-B INCONTROL LANCETS 30G .	64	HUMALOG MIX 75/25 SUSP .....	18	hydrochlorothiazide CAPS .....	51
H-E-B INCONTROL LANCETS 33G .	64	HUMALOG SOLN IJ .....	18	hydrochlorothiazide TABS 25 MG, 50 MG .....	51
HEMATINIC PLUS VIT/MINERALS TABS .....	58	HUMALOG TEMPO PEN SOPN ..	18	hydrocodone bitartrate CP12 .....	6
HEMGENIX .....	56	HUMATE-P SOLR .....	56	hydrocodone bitartrate-homatropine methylbromide SOLN .....	41
HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML .....	56	HUMIRA (2 PEN) AJKT 40 MG/0.8ML .....	4	hydrocodone-acetaminophen SOLN	

108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML ..... 7	hydrocortisone butyrate CREA .... 46	hyoscyamine sulfate TB12 0.375 MG 90
hydrocodone-acetaminophen TABS 325 MG-10 MG ..... 7	hydrocortisone butyrate LOTN .... 46	hyoscyamine sulfate TBDP 0.125 MG .....90
hydrocodone-acetaminophen TABS 325 MG-5 MG ..... 7	hydrocortisone butyrate OINT ..... 46	HYPERHEP B SOLN IM .....86
hydrocodone-acetaminophen TABS 325 MG-7.5 MG ..... 7	hydrocortisone butyrate SOLN .... 46	HYPERHEP B SOSY 110 UNIT/0.5ML ..... 86
hydrocortisone (intrarectal) ..... 8	HYDROCORTISONE GEL 2 % ... 46	HYPERRHO MINI-DOSE SOSY IM 250 UNIT .....86
hydrocortisone (rectal) EX 1 % ..... 9	hydrocortisone TABS ..... 40	HYPERRHO SOSY IM 1500 UNIT 86
hydrocortisone (rectal) EX 2.5 % ... 9	hydrocortisone vaginal ..... 95	HYQVIA ..... 86
hydrocortisone (topical) CREA 0.5 % 46	hydrocortisone valerate CREA .... 46	HYRIMOZ SOAJ ..... 4
hydrocortisone (topical) CREA 1 % 46	hydrocortisone valerate OINT ..... 46	HYRIMOZ SOSY ..... 4
hydrocortisone (topical) CREA 2.5 % 46	hydrocortisone w/acetic acid ..... 85	HYRIMOZ-CROHNS/UC STARTER SOAJ ..... 4
hydrocortisone (topical) LOTN 1 % 46	HYDROMORPHONE HCL SUPP .. 6	HYRIMOZ-PED<40KG CROHN STARTER SOSY ..... 4
hydrocortisone (topical) LOTN 2.5 % . 46	hydromorphone hcl TABS ..... 6	HYRIMOZ-PED>=40KG CROHN START SOSY ..... 4
hydrocortisone (topical) OINT 0.5 % . 46	hydromorphone hcl TB24 ..... 6	HYRIMOZ-PLAQ PSOR/UEVIT START SOAJ ..... 4
hydrocortisone (topical) OINT 1 % .46	HYDROXATE GEL ..... 46	HYRIMOZ-PLAQUE PSORIASIS START SOAJ ..... 4
hydrocortisone (topical) OINT 2.5 % . 46	HYDROXYM GEL ..... 46	HY-VEE LANCETS ..... 64
hydrocortisone (topical) SOLN 1 % 46	hydroxyurea ..... 29	HY-VEE THIN LANCETS ..... 64
hydrocortisone acetate (topical) CREA 2.5 % ..... 46	hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML ..... 10	ibandronate sodium SOLN ..... 51
hydrocortisone acetate (topical) OINT ..... 46	hydroxyzine hcl SYRP ..... 10	ibandronate sodium TABS ..... 51
HYDROCORTISONE ACETATE CREA ..... 46	hydroxyzine hcl TABS ..... 10	IBRANCE CAPS ..... 28
	hydroxyzine pamoate CAPS 25 MG, 100 MG ..... 10	IBSRELA ..... 55
	hydroxyzine pamoate CAPS 50 MG 10	ibuprofen CHEW ..... 5
	HYMOVIS ..... 80	ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML ..... 5
	hyoscyamine sulfate ELIX ..... 90	ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG ..... 5
	hyoscyamine sulfate SOLN PO 0.125 MG/ML ..... 90	
	hyoscyamine sulfate SUBL 0.125 MG ..... 90	
	hyoscyamine sulfate TABS 0.125 MG ..... 90	

ibuprofen-diphenhydramine citrate 59	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML .....74	INSULIN GLARGINE-YFGN SOPN 18
ibuprofen-diphenhydramine hcl ... 59	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML .....74	INSULIN LISPRO (1 UNIT DIAL) SOPN ..... 18
icatibant acetate SOSY .....57	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate) ..... 74	INSULIN LISPRO JUNIOR KWIKPEN SOPN .....18
ICLUSIG 15 MG, 45 MG .....28	IMLYGIC .....29	INSULIN LISPRO PROT & LISPRO SUPN .....18
ID NOW COVID-19 .....50	IMOVAX RABIES SUSR .....93	INSULIN LISPRO SOLN IJ ..... 18
ID NOW COVID-19 2.0 CONTROL 50	IMULDOSA SOLN IV 130 MG/26ML . 54	INSULIN SYRINGES .....69
ID NOW COVID-19 2.0 TEST .....50	IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML .....44	INTELENCE (etravirine) .....32
ID NOW COVID-19 CONTROL ...50	IN TOUCH STERILE LANCETS 30G .....64	INTELENCE .....32
IDACIO (2 PEN) AJKT ..... 4	INCRELEX ..... 52	INTELENCE 200 MG (etravirine) ..32
IDACIO (2 SYRINGE) PSKT .....4	indapamide TABS 1.25 MG, 2.5 MG . 51	INTELISWAB COVID-19 RAPID TEST KIT .....50
IDACIO-CROHNS/UC STARTER AJKT .....4	INDICAID COVID-19 RAPID TEST KIT .....50	INVEGA HAFYERA ..... 30
IDACIO-PSORIASIS STARTER AJKT .....4	indomethacin CAPS 25 MG, 50 MG 5	INVEGA SUSTENNA ..... 30
IDELVION .....56	indomethacin CPCR .....5	INVEGA TRINZA .....30
IGALMI FILM .....59	INFANRIX .....90	INVOKANA .....18
IHEALTH COVID-19 RAPID TEST KIT .....50	INGREZZA CAPS .....88	IPOLE IJ .....93
ILEVRO .....85	INGREZZA CPSP .....88	ipratropium bromide (nasal) 0.03 % 80
ILUVIEN .....84	INLYTA .....26	ipratropium bromide (nasal) 0.06 % 80
imatinib mesylate TABS ..... 28	INNOSPIRE REPLACEMENT FILTER MISC .....71	ipratropium bromide hfa 17 MCG/ACT .....11
IMBRUVICA CAPS 140 MG .....28	INPEFA .....36	ipratropium bromide SOLN 0.02 % 11
IMBRUVICA CAPS 70 MG ..... 28	INSPIREASE MISC .....71	ipratropium-albuterol SOLN .....12
IMBRUVICA TABS .....28	INSPIREASE RESERVOIR BAGS 71	irbesartan .....23
IMCIVREE SOLN SC .....53	INSULIN GLARGINE-YFGN SOLN 18	irbesartan-hydrochlorothiazide ....24
imipramine hcl TABS .....16		irinotecan hcl .....29
imipramine pamoate .....16		
imiquimod 5 % .....47		
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML .....74		IRON CHEWS PEDIATRIC CHEW 59

IRON TABS 28 MG .....	59	JARDIANCE .....	18	ketorolac tromethamine (ophth) 0.5 % .....	85
ISENTRESS CHEW 100 MG .....	32	JENTADUETO TABS .....	16	ketorolac tromethamine TABS .....	5
ISENTRESS CHEW 25 MG .....	32	JEVTANA .....	29	KETOSTIX STRP .....	50
ISENTRESS PACK .....	32	JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT .....	56	ketotifen fumarate (ophth) 0.035 % 85	
ISENTRESS TABS .....	32	JOURNAVX .....	6	KEY-E CHEW .....	96
isoniazid SYRP .....	25	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG .....	23	KEYTRUDA .....	26
isoniazid TABS .....	25	JYNNEOS .....	94	KHAPZORY 175 MG .....	29
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG .....	9	KADCYLA .....	26	KINNEY LANCETS .....	64
isosorbide mononitrate TABS .....	9	KALBITOR .....	57	KINNEY THIN LANCETS .....	64
isosorbide mononitrate TB24 .....	9	KALETRA SOLN .....	33	KINRIX SUSY .....	90
isotretinoin 10 MG, 20 MG, 40 MG	42	KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir) .....	33	KIRSTY SOLN IJ 100 UNIT/ML ...	18
isradipine CAPS .....	35	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir) .....	33	KIRSTY SOPN SC 100 UNIT/ML ..	18
ISTALOL SOLN (timolol maleate (ophth)) .....	82	KALYDECO PACK 50 MG, 75 MG	89	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin) ...	3
ITCH RELIEF CREA .....	43	KALYDECO TABS .....	89	KLOR-CON TBCR 8 MEQ (potassium chloride) .....	74
itraconazole CAPS .....	21	KANJINTI 420 MG .....	27	KLOXXADO LIQD .....	20
itraconazole SOLN .....	21	KANUMA .....	53	KOATE SOLR .....	57
ivermectin (pediculicide) .....	48	KCENTRA .....	56	KOATE-DVI SOLR 500 UNIT, 1000 UNIT .....	57
ivermectin .....	9	KEMOPLAT SOLN .....	26	KOGENATE FS KIT .....	57
IXCHIQ .....	93	KENALOG AERS (triamcinolone acetonide (topical)) .....	46	KONVOMEF SUSR .....	91
IXEMPRA KIT .....	29	KESIMPTA .....	88	KOVALTRY .....	57
IXIARO .....	94	ketoconazole (topical) CREA .....	43	KRINTAFEL .....	25
IXINITY SOLR .....	56	ketoconazole (topical) SHAM 2 %	43	KROGER HEALTHPRO LANCET 26G .....	64
IYUZEH SOLN .....	85	KETONE TEST STRP .....	50	KROGER LANCETS .....	64
JAKAFI .....	28	ketoprofen CAPS 50 MG .....	5	KROGER LANCETS SUPER THIN 64	
JALYN (dutasteride-tamsulosin hcl) . 56		ketoprofen CP24 .....	5	KROGER LANCETS THIN .....	64
JANUMET TABS .....	16	ketorolac tromethamine (ophth) 0.4 % .....	85		
JANUMET XR TB24 .....	16				
JANUVIA .....	17				

KRYSTEXXA .....	56	lamotrigine CHEW .....	13	LENVIMA (18 MG DAILY DOSE) ..	26
KYLEENA .....	40	lamotrigine KIT 25 MG .....	13	LENVIMA (20 MG DAILY DOSE) ..	26
KYMRIAH .....	27	lamotrigine TABS .....	13	LENVIMA (24 MG DAILY DOSE) ..	26
KYPROLIS .....	28	lamotrigine TB24 .....	13	LENVIMA (4 MG DAILY DOSE) ..	26
labetalol hcl TABS 100 MG .....	35	lamotrigine TBDP .....	13	LENVIMA (8 MG DAILY DOSE) ..	26
labetalol hcl TABS 200 MG .....	35	LANCETS .....	64	LEQSELVI TABS PO 8 MG .....	47
labetalol hcl TABS 300 MG .....	35	LANCETS 28G THIN .....	64	LEQVIO .....	23
labetalol hcl TABS 400 MG .....	35	LANCETS 30G .....	64	LESCOL XL TB24 (fluvastatin sodium) .....	22
LACTEROL CAPS .....	19	LANCETS 33G .....	64	LETAIRIS (ambrisentan) .....	37
lactic acid (ammonium lactate) CREA .....	47	LANCETS MICRO THIN 33G .....	64	letrozole .....	27
lactic acid (ammonium lactate) LOTN 12 % .....	47	LANCETS SUPER THIN .....	64	leucovorin calcium TABS 5 MG, 25 MG .....	29
lactobacillus rhamnosus (gg) PACK 23 MG, 5 B CELL, 5 B CELL .....	19	LANCETS SUPER THIN 28G .....	64	LEUKERAN .....	26
lactobacillus-inulin CAPS 200 MG, 200 MG-10 B CELL, 200 MG-10 BILLION, 200 MG-12 BILLION, 200 MG-20 B CELL, 200 MG-20 BILLION, 3 MG-200 MG .....	20	LANCETS ULTRA THIN .....	64	LEUKINE SOLR IJ .....	58
lactobacillus-inulin CHEW 200 MG- 10 BILLION, 350 MG-1 GM .....	20	LANCETS ULTRA THIN 30G .....	64	leuprolide acetate (3 month) INJ 22.5 MG .....	27
LACTOVIVE CAPS .....	19	lanolin (topical) CREA .....	48	leuprolide acetate KIT IJ 1 MG/0.2ML .....	27
lactulose (encephalopathy) .....	55	LANOLIN XX .....	87	LEUPROLIDE ACETATE- BUPIVACAINE .....	27
lactulose SOLN .....	60	LANOXIN TABS 125 MCG, 250 MCG (digoxin) .....	36	levabuterol hcl .....	12
LAGEVRIO .....	34	lanreotide acetate .....	53	levabuterol hcl 1.25 MG/0.5ML .....	12
LAMICTAL ODT KIT (lamotrigine) ..	13	LANREOTIDE ACETATE .....	53	levabuterol tartrate .....	12
LAMICTAL STARTER KIT 25 MG (lamotrigine) .....	13	lansoprazole CPDR .....	90	levamlodipine maleate .....	36
lamivudine SOLN .....	33	lansoprazole TBDD .....	90	LEVEMIR FLEXPEN SOPN .....	18
lamivudine TABS 150 MG .....	33	lanthanum carbonate CHEW .....	55	LEVEMIR SOLN .....	18
lamivudine TABS 300 MG .....	33	lapatinib ditosylate .....	28	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML .....	13
lamivudine-zidovudine .....	33	LEDIPASVIR-SOFOSBUVIR TABS 34		levetiracetam TABS .....	13
		leflunomide .....	5	levetiracetam TB24 .....	13
		lenalidomide .....	75	levobunolol hcl 0.5 % .....	83
		LENVIMA (10 MG DAILY DOSE) ..	26		
		LENVIMA (12 MG DAILY DOSE) ..	26		
		LENVIMA (14 MG DAILY DOSE) ..	26		

levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML .....	53	lidocaine hcl CREA 3 % .....	48	30
levocarnitine (metabolic modifiers) TABS .....	53	lidocaine hcl CREA 4 % .....	48	LIVE BETTER LANCET SUPER THIN .....
levocetirizine dihydrochloride SOLN 22		lidocaine hcl GEL 2 % .....	48	65
levofloxacin (ophth) 0.5 % .....	83	lidocaine hcl PRSY .....	48	LO LOESTRIN FE TABS .....
levofloxacin SOLN PO .....	54	lidocaine-prilocaine CREA .....	48	38
levofloxacin TABS .....	54	LIDOMAX GEL 2 % .....	48	LOCOID LIPOCREAM .....
levoleucovorin calcium SOLN .....	29	LILETTA (52 MG) .....	40	46
levoleucovorin calcium SOLR .....	29	LINZESS .....	55	LOCOID LOTN (hydrocortisone butyrate) .....
levonorgestrel & eth estradiol TABS 38		LIORESAL SOLN IT .....	79	46
levonorgestrel (emergency oc) 1.5 MG .....	39	liothyronine sodium TABS .....	89	LOKELMA .....
levonorgestrel-eth estradiol (triphasic) .....	38	LIPOFEN CAPS (fenofibrate) .....	22	75
levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG .....	38	LIQREV SUSP .....	37	LONSURF .....
levonorgestrel-ethinyl estradiol (continuous) .....	38	liraglutide .....	17	28
levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG .....	89	lisdexamphetamine dimesylate CAPS 1	1	loperamide hcl CAPS .....
levothyroxine sodium TABS .....	89	lisdexamphetamine dimesylate CHEW . 1		20
LEVULAN KERASTICK SOLR .....	43	lisinopril & hydrochlorothiazide ...	24	loperamide hcl TABS .....
LIALDA TBEC (mesalamine) .....	54	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG .....	23	20
LIBERTY MEDICAL LANCETS ...	65	LITE TOUCH LANCETS .....	65	lopinavir-ritonavir SOLN .....
LIBERVANT FILM .....	13	LITETOUCH LANCETS .....	65	33
LIBTAYO .....	26	LITETOUCH MASK LARGE MISC	71	lopinavir-ritonavir TABS 25 MG-100 MG .....
lidocaine CREA 4 % .....	48	LITETOUCH MASK MEDIUM MISC . 71		33
LIDOCAINE CREA .....	48	LITETOUCH MASK SMALL MISC	71	lopinavir-ritonavir TABS 50 MG-200 MG .....
lidocaine hcl (mouth-throat) 2 % ...	76	LITFULO .....	47	33
		lithium .....	30	LOPRESSOR SOLN PO 10 MG/ML . 35
		lithium carbonate CAPS .....	30	35
		lithium carbonate TABS .....	30	LOPRESSOR TABS 12.5 MG (metoprolol tartrate) .....
		lithium carbonate TBCR .....	30	35
		LITHOBID TBCR (lithium carbonate) .		loratadine CAPS .....
				22
				loratadine CHEW .....
				22
				loratadine SOLN .....
				22
				loratadine TABS .....
				22
				loratadine TBDP 10 MG .....
				22
				lorazepam CONC .....
				10
				lorazepam TABS 0.5 MG, 2 MG ...
				10
				lorazepam TABS 1 MG .....
				10
				LORBRENA .....
				28
				LOREEV XR CS24 .....
				10
				losartan potassium & hydrochlorothiazide .....
				24

losartan potassium .....	23	LYRA DIRECT SARS-COV-2 ASSAY	NORM .....	65
LOTRONEX (alosetron hcl) .....	55	.....	MEDLANCE PLUS EXTRA 21G ..	65
lovastatin TABS 10 MG, 20 MG ...	22	LYRA SARS-COV-2 ASSAY .....	MEDLANCE PLUS LITE 25G .....	65
lovastatin TABS 40 MG .....	22	LYSODREN .....	MEDLANCE PLUS SPECIAL 0.8MM	.....65
loxapine succinate .....	31	LYUMJEV TEMPO PEN SOPN ...	.....	65
LUCENTIS SOSY .....	83	LYVISPAH PACK .....	MEDLANCE PLUS SUPERLITE 30G	.....65
LUCIRA CHECK IT COVID-19 TEST		MACI .....	MEDLANCE PLUS UNIVERSAL 21G	.....65
KIT .....	50	magnesium citrate 1.745 GM/30ML	.....	65
LUCIRA COVID-19 ALL-IN-ONE KIT		60	medroxyprogesterone acetate	
50		magnesium hydroxide SUSP 7.75 %,	(contraceptive) SUSP IM .....	40
luliconazole .....	43	400 MG/5ML, 1200 MG/15ML, 2400	medroxyprogesterone acetate	
LUMAVEX CAPS .....	76	MG/30ML .....	(contraceptive) SUSY IM .....	40
LUMIZYME .....	53	60	medroxyprogesterone acetate 2.5	
LUNAVIRA CAPS .....	76	magnesium oxide (mg supplement)	MG, 5 MG, 10 MG .....	87
LUPRON DEPOT (1-MONTH) KIT IM		TABS .....	mefloquine hcl .....	25
.....	27	74	megestrol acetate SUSP .....	27
LUPRON DEPOT (3-MONTH) KIT IM		magnesium oxide TABS 400 MG ...	megestrol acetate TABS .....	27
.....	27	9	MEIJER ALCOHOL SWABS .....	69
LUPRON DEPOT (4-MONTH) IM .	27	malathion .....	MEIJER LANCETS .....	65
LUPRON DEPOT (6-MONTH) IM .	27	maraviroc TABS 150 MG .....	MEIJER LANCETS UNIVERSAL 21G	.....65
LUPRON DEPOT-PED (1-MONTH) .		maraviroc TABS 300 MG .....	.....	65
52		MATULANE .....	MEIJER LANCETS UNIVERSAL 30G	.....65
LUPRON DEPOT-PED (3-MONTH) .		MAVYRET PACK .....	.....	65
52		MAVYRET TABS .....	MEIJER LANCETS UNIVERSAL 33G	.....65
LUPRON DEPOT-PED (6-MONTH)		MAXI-TUSS PE ELIX 5 MG/5ML-2	.....	65
IM .....	52	MG/5ML .....	MEIJER LANCETS UNIVERSAL 33G	.....65
lurasidone hcl .....	30	MAYZENT STARTER PACK TBPK	.....	65
LUTATHERA .....	29	0.25 MG .....	MEKINIST TABS .....	28
LUTRATE DEPOT INJ 22.5 MG ...	27	88	MEKTOVI .....	28
LUZU (luliconazole) .....	43	MAYZENT TABS .....	melatonin TABS 3 MG, 5 MG .....	2
LYBALVI .....	87	88	meloxicam TABS .....	5
LYFGENIA .....	57	meclizine hcl CHEW .....	melphalan .....	26
		21	melphalan hcl IV .....	26
		meclizine hcl TABS 12.5 MG, 25 MG	memantine hcl CP24 .....	87
		21		
		MEDICHOICE SAFETY LANCET		
		65		
		MEDICHOICE SAFETY LANCET		
		EXTRA .....		
		65		
		MEDICHOICE SAFETY LANCET		

memantine hcl SOLN .....	87	MG .....	17	methylphenidate hcl CPCR .....	2
memantine hcl TABS .....	87	metformin hcl TB24 500 MG, 750 MG .....	17	methylphenidate hcl SOLN .....	2
MENQUADFI 0.5 ML .....	91	methadone hcl TABS 10 MG .....	6	methylphenidate hcl TABS .....	2
MENVEO SOLN .....	91	methadone hcl TABS 5 MG .....	6	methylphenidate hcl TB24 .....	2
MENVEO SOLR .....	91	methamphetamine hcl .....	1	methylphenidate hcl TBCR 10 MG, 20 MG .....	2
meperidine hcl SOLN PO 50 MG/5ML .....	6	methazolamide TABS .....	51	methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG .....	2
meperidine hcl TABS 50 MG .....	6	methenamine mandelate .....	25	methylphenidate hcl TBCR 45 MG, 63 MG .....	2
meprobamate .....	10	METHENAMINE MANDELATE 0.5 GM, 1 GM .....	25	methylprednisolone TABS 4 MG, 8 MG .....	40
mercaptopurine SUSP 2000 MG/100ML .....	26	methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG . 24		methylprednisolone TBPK .....	40
mercaptopurine TABS .....	26	methimazole TABS .....	89	methyltestosterone TABS .....	8
MERILOG SOLN SC 100 UNIT/ML 18		methocarbamol TABS 1000 MG ...	79	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML .....	54
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML .....	18	methocarbamol TABS 500 MG ....	79	metoclopramide hcl TABS 10 MG .	54
mesalamine ENEM .....	54	methocarbamol TABS 750 MG, 1000 MG .....	79	metoclopramide hcl TABS 5 MG ..	54
mesalamine SUPP .....	54	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML .....	26	metolazone .....	51
mesalamine TBEC 1.2 GM .....	54	methotrexate sodium TABS 2.5 MG 26		metoprolol & hydrochlorothiazide TABS .....	24
mesalamine TBEC 800 MG .....	54	methsuximide .....	14	metoprolol succinate TB24 200 MG 35	
mesalamine w/ cleanser .....	54	methylphenidate hcl CHEW .....	2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....	35
mesna SOLN .....	29	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG .....	2	metoprolol tartrate TABS 100 MG .	35
mesna TABS .....	29	METHYLIN SOLN (methylphenidate hcl) .....	2	metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG .....	35
MESNEX TABS .....	29	methylphenidate hcl CP24 60 MG ..	2	metoprolol tartrate TABS 25 MG, 50 MG .....	35
metaxalone .....	79	methylphenidate hcl CP24 .....	2	metronidazole (topical) CREA .....	48
METAXALONE 640 MG .....	79			metronidazole (topical) GEL 0.75 % 48	
metformin hcl SOLN .....	17			metronidazole (topical) LOTN .....	48
metformin hcl TABS 500 MG, 850 MG, 1000 MG .....	17				
metformin hcl TABS 625 MG .....	17				
metformin hcl TABS 750 MG .....	17				
metformin hcl TB24 500 MG, 1000					

metronidazole TABS 250 MG, 500 MG .....	24	milnacipran hcl MISC .....	87	80	mometasone furoate CREA .....	46
metronidazole vaginal .....	95	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG .....	87		mometasone furoate OINT .....	46
metyrosine .....	23	MINI MULTI VITAMINS/IRON TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-10 MCG-13.5 MG-18 MG-25 MG-900 MCG-6 MCG 77			mometasone furoate SOLN .....	46
MICONAZOLE 7 SUPP 100 MG .....	95	MINIELITE FILTER REPLACEMENTS MISC .....	72		MONISTAT CARE INSTANT ITCH RLF 1 % .....	95
miconazole nitrate (topical) CREA .43		minocycline hcl CAPS .....	89		MONOLET LANCETS .....	65
miconazole nitrate vaginal CREA 2 % .....	95	minoxidil 2.5 MG, 10 MG .....	24		MONOLET OPD LANCETS .....	65
miconazole nitrate vaginal CREA 4 % .....	95	mirabegron TB24 .....	91		MONOLETTOR SAFETY LANCETS 65	
miconazole nitrate vaginal KIT .....	95	MIRCERA .....	58		MONOVISC .....	80
miconazole nitrate vaginal SUPP 100 MG .....	95	MIRENA (52 MG) .....	40		montelukast sodium CHEW .....	11
miconazole nitrate vaginal SUPP 200 MG .....	95	mirtazapine TABS .....	14		montelukast sodium PACK .....	11
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM .....	86	mirtazapine TBDP .....	15		montelukast sodium TABS .....	11
MICROBALANCE CAPS .....	19	misoprostol .....	91		morphine sulfate beads .....	6
MICROCHAMBER DEVI .....	71	mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML .....	28		morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG .....	6
MICROCHAMBER MISC .....	71	MIUDELLA INTRAUTERINE COPPER .....	39		morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML .....	7
MICROFLOR 33 CAPS .....	19	MI-VITE RX TABS 1 MG .....	76		morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML .....	7
MICROLET LANCETS .....	65	MM TWIST LANCETS .....	65		morphine sulfate SUPP .....	7
MICROLET NEXT LANCETS .....	65	M-M-R II SOLR .....	94		morphine sulfate TABS .....	7
MICROSPACER MISC .....	71	MNEXSPIKE SUSY 10 MCG/0.2ML . 94			morphine sulfate TBCR .....	7
MICROVARA CPDR .....	19	MOBILE LANCETS 30G .....	65		MOTPOLY XR CP24 .....	13
midazolam hcl SOLN IJ .....	59	MODERNA COVID-19 VAC 6M-11Y SUSP .....	94		MOTRIN CHILDRENS CHEW (ibuprofen) .....	5
MIDAZOLAM HCL SOLN IJ .....	59	MODERNA COVID-19 VAC 6M-11Y SUSY .....	94		MOTRIN INFANTS DROPS SUSP (ibuprofen) .....	5
midodrine hcl .....	96	moexipril hcl .....	23		MOUNJARO .....	17
MIEBO .....	85	mometasone furoate (nasal) SUSP			MOVANTIK .....	55
mifepristone (hyperglycemia) .....	17				moxifloxacin hcl (ophth) SOLN OP	83
miglitol .....	16					
miglustat .....	57					

moxifloxacin hcl TABS .....	54	mupirocin calcium (topical) .....	42	naloxone hcl SOSY 2 MG/2ML .....	20
MULPLETA .....	58	mupirocin OINT .....	42	naltrexone hcl .....	20
MULTIPLE VITAMINS TABS- ASSORTED BRAND .....	78	MVASI .....	26	NAMENDA TITRATION PAK TABS (memantine hcl) .....	87
MULTIPLE VITAMINS TABS- ASSORTED GENERIC .....	78	MVW COMPL FORM PROBIOTIC- KIDS CPDR .....	19	naphazoline w/ pheniramine 0.3 %- 0.025 % .....	84
multiple vitamins w/ iron TABS .....	77	MVW COMPLETE FORMULATION SOLN .....	78	naphazoline w/ pheniramine 0.315 %-0.027 % .....	84
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED BRAND .....	78	MYALEPT .....	53	naproxen sodium TABS 220 MG ...	5
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED GENERIC .....	78	mycophenolate mofetil CAPS .....	75	naproxen sodium TABS 275 MG, 550 MG .....	5
MULTIPLE VITAMINS/IRON TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-5000 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG- 2 MG-400 MCG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-18 MG-1.5 MG-30 UNIT .....	77	mycophenolate mofetil hcl .....	75	naproxen SUSP .....	5
MULTIVITAMIN DROPS/IRON SOLN .....	78	mycophenolate mofetil SUSR .....	75	naproxen TABS .....	5
MULTIVITAMIN INFANT & TODDLER SOLN .....	78	mycophenolate mofetil TABS .....	75	naproxen TBEC .....	5
MULTIVITAMIN PLUS IRON ADULT TABS 60 MG-2 MG-13.5 MG-400 MCG-10 MCG-6 MCG-1.7 MG-20 MG-1500 MCG-10 MG-18 MG-75 MG-1.5 MG .....	77	mycophenolate sodium .....	75	naproxen-esomeprazole magnesium .....	5
MULTI-VITAMIN/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG- 2 MG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT .....	77	MYDAYIS CP24 (amphetamine- dextroamphetamine) .....	1	naratriptan hcl .....	74
		MYFEMBREE .....	53	NARCAN LIQD (naloxone hcl) ....	20
		MYGLUCOHEALTH LANCETS 30G 65		NATAZIA .....	38
		MYLERAN TABS .....	26	nateglinide .....	18
		MYNEPHRON CAPS 1 MG .....	76	NATPARA .....	51
		MYOBLOC .....	81	NATROBA (spinosad) .....	49
		MYRBETRIQ TB24 (mirabegron) ..	91	NAT-RUL DAILY-VITE+IRON TABS 60 MG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-2 MG-30 UNIT .....	77
		NABI-HB SOLN IM .....	86	NEBULIZER AIR TUBE/PLUGS MISC .....	72
		nabumetone .....	5	nefazodone hcl .....	15
		nadolol TABS 20 MG, 40 MG, 80 MG .....	35	NEFFY SOLN NA .....	96
		NAGLAZYME .....	53	NEMLUVIO .....	47
		naloxone hcl LIQD .....	20	neomycin sulfate TABS .....	3
		naloxone hcl SOCT .....	20	neomycin-bacitracin zn-polymyxin	83
		naloxone hcl SOLN 0.4 MG/ML ...	20		
		naloxone hcl SOLN 4 MG/10ML ...	20		
		naloxone hcl SOSY 0.4 MG/ML ...	20		

neomycin-bacitracin-polymyxin OINT 43	NIACIN ER CPCR ..... 96	nitroglycerin SUBL ..... 9
neomycin-polymy-dexameth OINT 84	NIACIN ER TBCR ..... 96	NIVA THYROID TABS ..... 89
neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 % ..... 84	niacin TABS 500 MG ..... 96	NIVESTYM SOLN ..... 58
neomycin-polymyxin w/ pramoxine 43	niacin TBCR ..... 96	NIVESTYM SOSY ..... 58
neomycin-polymyxin-gramicidin .. 83	nicardipine hcl CAPS ..... 36	NIX LICE KILLING SPRAY LIQD XX . 49
neomycin-polymyxin-hc (ophth) ... 84	NICOTINE KIT ..... 88	NIZORAL SHAM ..... 43
neomycin-polymyxin-hc (otic) SOLN . 85	nicotine polacrilex GUM ..... 88	NORDITROPIN FLEXPPO SOPN .52
neomycin-polymyxin-hc (otic) SUSP . 85	nicotine polacrilex LOZG ..... 88	norelgestromin-ethinyl estradiol ... 39
NEULASTA ONPRO SOSY 6 MG/0.6ML ..... 58	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR ..... 88	norethin acet & estrad-fe CAPS ... 38
NEULASTA SOSY ..... 58	NICOTROL INHA ..... 88	norethin acet & estrad-fe CHEW .. 38
NEUPOGEN SOLN ..... 58	NICOTROL NS SOLN ..... 88	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG ..... 38
NEUPOGEN SOSY ..... 58	nifedipine CAPS ..... 36	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG ..... 38
nevirapine SUSP ..... 33	nifedipine TB24 30 MG, 90 MG ... 36	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG ..... 38
nevirapine TABS ..... 33	nifedipine TB24 60 MG ..... 36	norethindrone & eth estradiol 35 MCG-0.4 MG, 35 MCG-0.5 MG ... 38
nevirapine TB24 400 MG ..... 33	nilotinib hcl 50 MG, 150 MG, 200 MG ..... 28	norethindrone & eth estradiol 35 MCG-1 MG ..... 38
NEXIUM 24HR CPDR (esomeprazole magnesium) ..... 90	nimodipine CAPS ..... 36	norethindrone & ethinyl estradiol-fe 38
NEXIUM CPDR 20 MG (esomeprazole magnesium) ..... 90	NINLARO ..... 28	norethindrone (contraceptive) ..... 40
NEXIUM PACK 10 MG, 20 MG, 40 MG (esomeprazole magnesium) .. 90	nintedanib esylate 100 MG, 150 MG . 89	norethindrone acet & eth estra TABS 38
NEXIVA CAPS ..... 19	nisoldipine ..... 36	norethindrone acetate TABS ..... 87
NEXPLANON ..... 39	nitisinone CAPS ..... 53	norethindrone acetate-ethinyl estradiol ..... 53
NGENLA ..... 52	NITRO-BID OINT ..... 9	norethindrone acetate-ethinyl estradiol-fe ..... 39
niacin (antihyperlipidemic) TBCR .. 23	nitrofurantoin ..... 25	norethindrone-eth estradiol (triphasic) ..... 39
niacin CPCR 250 MG, 500 MG .... 96	nitrofurantoin macrocrystal 50 MG, 100 MG ..... 25	norgestimate-ethinyl estradiol (triphasic) ..... 39
	nitrofurantoin monohyd macro ... 25	
	nitroglycerin CPCR ..... 9	
	nitroglycerin OINT ..... 9	
	nitroglycerin PT24 ..... 9	

norgestimate-ethinyl estradiol	39	NUCALA SOAJ	10	ODOMZO	27
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	39	NUCALA SOLR	10	ofloxacin (ophth)	83
NORLIQVA SOLN	36	NUCALA SOSY	10	ofloxacin (otic)	85
NORPACE CAPS (disopyramide phosphate)	10	NULOJIX	75	ofloxacin 300 MG, 400 MG	54
nortriptyline hcl CAPS	16	NUMOISYN LIQD	76	OHC COVID-19 ANTIGEN SELF TEST KIT	50
nortriptyline hcl SOLN	16	NUPLAZID CAPS	30	OHTUVAYRE	11
NORVIR CAPS	33	NUPLAZID TABS 10 MG	30	olanzapine SOLR	31
NORVIR PACK	33	NURTEC	73	olanzapine TABS	31
NORVIR TABS (ritonavir)	33	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	94	olanzapine TBDP	31
NOSE CLIP MISC	72	NUVESSA	95	olmesartan medoxomil	23
NOVA SAFETY LANCETS 23G	65	NUWIQ KIT	57	olmesartan medoxomil-amlodipine-hydrochlorothiazide	24
NOVA SAFETY LANCETS 28G	65	NUWIQ SOLR	57	olmesartan medoxomil-hydrochlorothiazide	24
NOVA SUREFLEX LANCETS	65	NYPOZI	58	olopatadine hcl (nasal)	80
NOVAFERRUM PED MULTI VIT-IRON SOLN 10 MG/ML	78	nystatin (mouth-throat)	76	olopatadine hcl	85
NOVAREL IM 5000 UNIT	52	nystatin (topical) CREA	43	OLPRUVA (2 GM DOSE) THPK	53
NOVAVAX COVID-19 VACCINE SUSP	94	nystatin (topical) OINT	43	OLPRUVA (3 GM DOSE) THPK	53
NOVAVAX COVID-19 VACCINE SUSY	94	nystatin (topical) POWD EX	43	OLPRUVA (4 GM DOSE) THPK	53
NOVOEIGHT	57	nystatin TABS	21	OLPRUVA (5 GM DOSE) THPK	53
NOVOLOG 70/30 FLEXPEN RELION SUPN	18	nystatin-triamcinolone CREA	43	OLPRUVA (6 GM DOSE) THPK	53
NOVOLOG MIX 70/30 FLEXPEN SUPN	18	nystatin-triamcinolone OINT	43	OLPRUVA (6.67 GM DOSE) THPK	53
NOVOLOG MIX 70/30 RELION SUSP	18	NYVEPRIA	58	OLUMIANT	3
NOVOLOG MIX 70/30 SUSP	18	OBIZUR	57	omega-3-acid ethyl esters	22
NOVOSEVEN RT	57	OALIVA	54	omeprazole CPDR	91
NP THYROID TABS	89	OCREVUS ZUNOVO	88	omeprazole TBEC	91
NPLATE 250 MCG, 500 MCG	58	OCTAGAM SOLN	86	omeprazole-sodium bicarbonate CAPS	91
		octreotide acetate KIT	53	omeprazole-sodium bicarbonate PACK	91
		octreotide acetate SOLN	53		
		octreotide acetate SOSY	53		
		ODEFSEY	33		

OMNITROPE SOCT .....	52	ONETOUCH ULTRASOFT 2 LANCETS .....	65	ORTHOVISC .....	80
OMVOH (300 MG DOSE) SOAJ ..	54	ONGLYZA 5 MG (saxagliptin hcl) .	17	ORUDIS CAPS 75 MG .....	5
OMVOH (300 MG DOSE) SOSY ..	55	ONPATPRO .....	88	oseltamivir phosphate CAPS 30 MG .	34
OMVOH SOAJ .....	55	ONYDA XR SUER .....	2	oseltamivir phosphate CAPS 45 MG, 75 MG .....	34
OMVOH SOLN .....	55	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML .....	26	oseltamivir phosphate SUSR .....	34
OMVOH SOSY .....	55	OPIPZA FILM .....	32	OTEZLA TABS .....	5
ON/GO COVID-19 ANTIGEN TEST KIT .....	50	OPSYNVI .....	36	OTEZLA TBPK .....	5
ON/GO ONE COVID-19 HOME TEST KIT .....	50	OPTICHAMBER DIAMOND DEVI .	72	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML .....	3
ONCASPAR .....	28	OPTICHAMBER DIAMOND MISC .	72	OTULFI SOLN SC 45 MG/0.5ML ..	44
ondansetron hcl SOLN PO 4 MG/5ML .....	20	OPTICHAMBER DIAMOND-LG MASK DEVI .....	72	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML .....	44
ondansetron hcl TABS 4 MG, 8 MG 20		OPTICHAMBER DIAMOND-MD MASK MISC .....	72	oxaprozin TABS .....	5
ondansetron TBDP 16 MG .....	20	OPTICHAMBER DIAMOND-SM MASK MISC .....	72	oxazepam CAPS .....	10
ondansetron TBDP 4 MG, 8 MG ..	21	OPTIONS GYNOL II CONTRACEPTIVE GEL .....	94	oxcarbazepine SUSP .....	14
ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT .....	77	OPVEE NA .....	20	oxcarbazepine TABS .....	14
ONE-DAILY MULTI-VITAMIN/IRON TABS 50 MG-1 MG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-18 MG .....	77	OPZELURA .....	47	OXERVATE .....	84
ONE-DAILY/IRON TABS 50 MG-2 MG-20 MG-1 MG-400 UNIT-1 MCG- 1 MG-2.5 MG-18 MG-5000 UNIT ..	77	ORALAIR SUBL .....	2	oxiconazole nitrate CREA .....	43
ONETOUCH DELICA PLUS LANCET30G .....	65	ORENITRAM MONTH 1 TEPK ...	36	OXISTAT CREA (oxiconazole nitrate) .....	43
ONETOUCH DELICA PLUS LANCET33G .....	65	ORENITRAM MONTH 2 TEPK ...	36	oxybutynin chloride SOLN .....	91
ONETOUCH DELICA SAFETY LANCING .....	65	ORENITRAM MONTH 3 TEPK ...	36	oxybutynin chloride TABS 2.5 MG .	91
		ORFADIN SUSP .....	53	oxybutynin chloride TABS 5 MG ...	91
		ORIAHNN .....	53	oxybutynin chloride TB24 .....	91
		ORILISSA .....	52	oxycodone hcl CAPS .....	7
		ORKAMBI PACK .....	89	oxycodone hcl CONC 100 MG/5ML 7	
		ORKAMBI TABS .....	89	oxycodone hcl SOLN .....	7
		orphenadrine citrate TB12 .....	79	oxycodone hcl T12A 10 MG, 20 MG, 40 MG .....	7
		orphenadrine w/ aspirin & caff ....	80		

oxycodone hcl TABS .....	7	PARI BABY CONVERSION KIT MISC .....	72	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED BRAND .....	78
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....	7	PARI ERAPID NEBULIZER HANDSET MISC .....	72	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED GENERIC .....	78
oxymorphone hcl TB12 15 MG .....	7	PARI EXPIRATORY FILTER SET DEVI .....	72	pediatric vitamins acid w/ fluoride SOLN .....	78
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 20 MG, 30 MG, 40 MG	7	PARI MASK SET MISC .....	72	PEDVAX HIB SUSP .....	91
oyster shell .....	74	PARI SOFT PLASTIC ADULT MASK MISC .....	72	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR .....	60
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN .....	17	PARI SOFT PLASTIC PED MASK MISC .....	72	peg 3350-potassium chloride-sod bicarbonate-sod chloride .....	60
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML .....	17	PARI VORTEX ADULT MASK .....	72	PEGASYS SOLN .....	34
OZEMPIC (2 MG/DOSE) SOPN ...	17	paricalcitol SOLN .....	53	PEGASYS SOSY .....	34
OZOBAX DS SOLN PO (baclofen)	79	paroxetine hcl TABS .....	15	pemetrexed disodium SOLR 100 MG, 500 MG .....	26
OZURDEX IMPL .....	84	paroxetine hcl TB24 .....	15	PENBRAYA .....	92
PACLITAXEL PROTEIN-BOUND PART .....	29	paroxetine mesylate (vasomotor)	89	penciclovir .....	44
paclitaxel protein-bound particles	29	PARSABIV .....	53	penicillamine TABS .....	75
paliperidone .....	30	PAXLOVID (150/100) .....	34	penicillin v potassium SOLR .....	86
PALYNZIQ .....	53	PAXLOVID (300/100 & 150/100)	34	penicillin v potassium TABS .....	86
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML .....	51	PAXLOVID (300/100) .....	34	PENTACEL .....	90
PAMIDRONATE DISODIUM SOLN 52		pazopanib hcl .....	28	pentoxifylline .....	57
pantoprazole sodium PACK .....	91	PC PEDIATRIC POLY-VITA/FE DROP SOLN .....	78	PERFECT LANCETS 28G .....	65
pantoprazole sodium TBEC 20 MG 91		PC PEDIATRIC POLY-VITAMIN DROP SOLN PO .....	79	PERFECT LANCETS 30G .....	65
pantoprazole sodium TBEC 40 MG 91		ped multivitamins w/fl & iron SOLN 78		PERFECT POINT SAFETY LANCETS .....	65
PANZYGA .....	86	PEDIARIX SUSY .....	90	perindopril erbumine .....	23
PARAGARD INTRAUTERINE COPPER .....	39	PEDIATRIC MOUTHPIECE MISC	72	PERIOMED CONC 0.63 % .....	76
PARI ALTERA NEBULIZER HANDSET MISC .....	72	PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED BRAND .....	78	PERJETA .....	27
		PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED GENERIC ...	78	permethrin AERO .....	49
				permethrin CREA .....	49
				permethrin LIQD EX .....	49

perphenazine TABS .....	31	PHOTOFRIN .....	29	podofilox SOLN .....	48
perphenazine-amitriptyline .....	87	PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG .....	28	POLIVY 140 MG .....	26
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP .....	94	phytonadione TABS 5 MG .....	96	polyethylene glycol 3350 PACK ...	60
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP .....	94	PIFELTRO .....	33	polyethylene glycol 3350 POWD ..	60
PFLEX MISC .....	72	PILLOW MASK/ADULT MISC .....	72	polymyxin b-trimethoprim .....	83
PHARMACIST CHOICE ALCOHOL . 69		PILLOW MASK/CHILD MISC .....	72	polysaccharide iron complex CAPS 59	
PHARMACIST CHOICE LANCETS . 65		PILLOW MASK/PEDIATRIC MISC 72		polyvinyl alcohol 1.4 % .....	82
PHARMACIST CHOICE MASK WIPES MISC .....	72	pilocarpine hcl (oral) 5 MG .....	76	POLY-VI-SOL SOLN PO .....	79
PHEBURANE PLLT .....	53	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 83		POLY-VITA SOLN PO .....	79
phenazopyridine hcl TABS 100 MG, 200 MG .....	56	PILOT COVID-19 AT-HOME TEST KIT .....	50	POLY-VITA/IRON SOLN .....	78
phenelzine sulfate .....	15	pimecrolimus .....	48	POLY-VITE PEDIATRIC SOLN PO 79	
phenobarbital ELIX .....	59	PIN RID CHEW .....	9	POLY-VITE/IRON SOLN .....	78
phenobarbital TABS .....	59	pindolol TABS .....	35	pomalidomide 1 MG, 2 MG, 3 MG, 4 MG .....	28
PHENOBARBITAL TABS .....	59	pioglitazone hcl .....	18	PONVORY STARTER PACK TBPK 88	
phentermine hcl-topiramate .....	1	pioglitazone hcl-glimepiride .....	16	PONVORY TABS .....	88
phenylephrine hcl (mydriatic) SOLN 2.5 % .....	83	pioglitazone hcl-metformin hcl TABS . 16		PORTRAZZA .....	27
phenylephrine hcl (oral) TABS .....	80	PIP LANCETS 28G .....	65	pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	74
phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML .....	41	PIP LANCETS 30G .....	65	potassium bicarbonate TBEF .....	74
phenylephrine-dm SOLN .....	41	pirfenidone CAPS .....	89	potassium chloride CPCR 10 MEQ 75	
phenytoin CHEW .....	14	pirfenidone TABS 534 MG .....	89	potassium chloride CPCR 8 MEQ .75	
phenytoin sodium extended 100 MG, 200 MG, 300 MG .....	14	piroxicam CAPS .....	5	potassium chloride microencapsulated crystals er ....	75
phenytoin sodium extended 200 MG, 300 MG .....	14	PLEGRIDY SOSY IM .....	88	potassium chloride PACK PO 20 MEQ .....	75
phenytoin SUSP .....	14	plerixafor .....	59	potassium chloride SOLN PO 10 %, 20 %, 10 % .....	75
		PNEUMOVAX 23 SOLN .....	92	potassium chloride TBCR 8 MEQ, 10	
		PNEUMOVAX 23 SOSY .....	92		
		POCKET CHAMBER DEVI .....	72		
		POCKET SPACER DEVI .....	72		

MEQ .....	75	prednisone SOLN .....	41	PRIVIGEN SOLN .....	86
potassium citrate (alkalinizer) TBCR .	55	prednisone TABS .....	41	PRO COMFORT ALCOHOL .....	69
potassium iodide (expectorant) SOLN	.....	prednisone TBPK .....	41	PRO COMFORT LANCETS 30G .	65
.....	41	pregabalin CAPS .....	14	PRO COMFORT LANCETS 31G .	65
POTELIGEO .....	26	pregabalin SOLN .....	14	PRO COMFORT SAFETY LANCETS	
PRADAXA CAPS (dabigatran		PREGNYL IM .....	52	30G .....	65
etexilate mesylate) .....	13	PREHEVBRIO .....	94	PRO COMFORT SPACER ADULT	
PRADAXA PACK .....	13	PREMARIN .....	95	MISC .....	72
pralatrexate .....	26	PREMPHASE .....	54	PRO COMFORT SPACER CHILD	
PRALUENT SOAJ .....	23	PREMPRO .....	54	MISC .....	72
pramipexole dihydrochloride TABS		PREMPRO .....	54	PRO COMFORT SPACER INFANT	
30		PRENATAL VITAMINS-ASSORTED		DEVI .....	72
pramipexole dihydrochloride TB24	30	BRAND .....	79	PROAIR DIGIHALER .....	12
pramoxine hcl (rectal) FOAM EX ...	8	PRENATAL VITAMINS-ASSORTED		probenecid .....	56
prasugrel hcl .....	57	GENERIC .....	79	PROBENTRA CPDR .....	19
pravastatin sodium .....	22	PREPARATION H EX 1 % .....	9	PROBINATE CAPS .....	19
prazosin hcl CAPS .....	23	PREPARATION H SOOTHING		probiotic product CAPS 1.7 MG-2.4	
PRECISION THINS GP LANCETS		RELIEF EX 1 % .....	9	MCG, 10 MCG-60 MG-10 MG-250	
65		PREVNAR 13 .....	92	MG, 12 MG, 133 MG, 140 MG-133	
PRED MILD .....	84	PREVNAR 20 .....	92	MG, 15 MG, 150 MG-50 MG, 174	
prednisolone acetate (ophth) .....	84	PREVYMIS SOLN .....	34	MG-50 MG-174 MG-174 MG-250	
PREDNISOLONE ACETATE P-F .	84	PREVYMIS TABS .....	34	MG, 2 MG-12 MG-80 MG-2 MG-3	
PREDNISOLONE SODIUM		PREZCOBIX .....	33	MG-2 MG-1.5 MG-7.5 MG-3 MG-2	
PHOSPHATE .....	84	PREZISTA .....	33	MG, 2 MG-12.5 MCG, 2.5 MG-0.5	
prednisolone sodium phosphate		PREZISTA SUSP .....	33	MG-1 MG-50 MG-16 MG, 20 MG-3	
SOLN 15 MG/5ML .....	40	PREZISTA TABS (darunavir) .....	33	MG-500 MG, 250 MG, 30 MG-250	
prednisolone sodium phosphate		PREZISTA TABS 150 MG .....	33	MG, 300 MG-250 MG, 33 MG, 40	
SOLN 20 MG/5ML .....	40	PREZISTA TABS 75 MG, 600 MG,		MG-400 MG-64 MG, 42 MG-425 MG-	
prednisolone sodium phosphate		800 MG .....	33	62 MG-120 MG, 5 MG, 50 MG, 57	
SOLN 5 MG/5ML .....	40	PRIALT .....	6	MG, 6 MG, 60 MG-10 MCG-10 MG-	
prednisolone SOLN .....	40	primidone 125 MG .....	14	250 MG, 67 MG, 8 MG-5 MG-240	
PREDNISONE INTENSOL CONC	40	primidone 50 MG, 250 MG .....	14	MG-70 MG, 90 MG-1.7 MG-30 MCG-	
		PRIORIX SUSR .....	94	4 MCG, 10 MG, 25 MG, 170 MG, 400	
				MG .....	19
				probiotic product CPDR 50 MG ....	19
				PROCARE SPACER/ADULT MASK	
				DEVI .....	72
				PROCARE SPACER/CHILD MASK	

DEVI .....	72	PRONEB ULTRA FILTER SET MISC 30G .....	66
PROCHAMBER VHC DEVI .....	72	.....	72
prochlorperazine .....	31	propafenone hcl TABS .....	10
prochlorperazine edisylate 10 MG/2ML .....	31	propranolol hcl CP24 .....	35
prochlorperazine maleate TABS .....	31	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML .....	35
PROCRT .....	58	propranolol hcl TABS .....	35
PROCTOFOAM FOAM EX 1 % .....	9	propylthiouracil .....	89
PROCYSBI CPDR .....	55	PROQUAD SUSR .....	94
PROCYSBI PACK .....	55	PRORIVA CAPS .....	19
PRODIGY LANCETS 28G .....	65	PROTONIX PACK (pantoprazole sodium) .....	91
PRODIGY SAFETY LANCETS 26G 65		protriptyline hcl .....	16
PRODIGY TWIST TOP LANCETS 28G .....	65	PROVENGE .....	27
PROFILNINE .....	57	PROVENTIL HFA AERS (albuterol sulfate) .....	12
progesterone CAPS 100 MG .....	87	PROXIVOL GEL 2 % .....	48
progesterone CAPS 200 MG .....	87	pseudoephedrine hcl TABS .....	80
PROGLYCEM (diazoxide) .....	17	pseudoephedrine hcl TB12 .....	80
PROGRAF PACK .....	75	pseudoephedrine-ibuprofen TABS	41
PROLEUKIN .....	29	PSS SELECT GP LANCETS .....	66
PROLIA SOSY .....	52	PSS SELECT SAFETY LANCETS 66	
PROMELLA IN PREBIOTIC CAPS 19		psyllium CAPS 0.36 GM, 0.52 GM	60
promethazine & phenylephrine SYRP .....	41	psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 % .....	60
promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML .....	22	PULMICORT FLEXHALER AEPB	11
promethazine hcl SUPP .....	22	PULMOZYME .....	89
promethazine hcl TABS .....	22	PURE COMFORT ALCOHOL PREP .....	69
promethazine w/codeine SOLN ...	41	PURE COMFORT LANCETS 30G 66	
promethazine w/codeine SYRP ...	41	PURE COMFORT SAFETY LANCET	
		PURE COMFORT SPACER CHAMBER DEVI .....	72
		PX LANCETS MICROTHIN 33G	66
		PX LANCETS ULTRA THIN 28G	66
		pyrantel pamoate SUSP .....	9
		pyrazinamide .....	25
		pyrethrins-piperonyl butoxide SHAM 4 %-0.33 % .....	49
		pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 % .....	49
		pyridostigmine bromide TABS 60 MG .....	25
		pyridostigmine bromide TBCR	25
		pyridoxine hcl TABS 25 MG, 50 MG, 100 MG .....	96
		pyrimethamine .....	25
		PYZCHIVA 45 MG/0.5ML, 90 MG/ML .....	44
		PYZCHIVA SC 45 MG/0.5ML, 90 MG/ML .....	44
		PYZCHIVA SC 45 MG/0.5ML	44
		QC ALCOHOL SWABS .....	69
		QC DAILY MULTIVITAMINS/IRON TABs 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT .....	77
		QC LANCETS SUPER THIN 30G	66
		QC LANCETS ULTRA THIN .....	66
		QC UNILET LANCETS 28G .....	66
		QC UNILET LANCETS MICRO THIN .....	66

QDOLO SOLN (tramadol hcl) .....	7	RAPAFLO 4 MG (silodosin) .....	56	RELION ULTRA THIN LANCETS 30G .....	66
QELBREE .....	2	RAPID RESPONSE COVID-19 ...	50	REMODULIN SOLN IJ .....	36
QSYMIA 11.25 MG-69 MG, 15 MG- 92 MG, 3.75 MG-23 MG, 7.5 MG-46 MG (phentermine hcl-topiramate) ...	1	RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML .....	3	RENAL CAPS 1 MG .....	76
QUADRACEL SUSP .....	90	RAVICTI 1.1 GM/ML (glycerol phenylbutyrate) .....	53	RENO CAPS CAPS 1 MG .....	77
QUADRACEL SUSY .....	90	READYLANCE SAFETY LANCETS . 66		RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG .....	89
quetiapine fumarate TABS .....	31	REALITY LANCETS .....	66	RENVELA TABS (sevelamer carbonate) .....	55
quetiapine fumarate TB24 .....	31	REALITY SWABS .....	69	repaglinide .....	18
QUICKVUE AT-HOME COVID-19 TEST KIT .....	50	REALITY TRIGGER LANCETS ...	66	REPATHA PUSHTRONEX SYSTEM SOCT .....	23
QUICKVUE SARS ANTIGEN TEST . 50		REBINYN .....	57	REPATHA SOSY .....	23
quinapril hcl .....	23	RECOMBIVAX HB SUSP .....	94	REPATHA SURECLICK SOAJ ....	23
quinapril-hydrochlorothiazide 12.5 MG-10 MG .....	24	RECOMBIVAX HB SUSY .....	94	REPLACEMENT AIR FILTER MISC . 73	
quinapril-hydrochlorothiazide 12.5 MG-20 MG .....	24	RELEUKO SOSY .....	58	REPLACEMENT FILTERS MISC .	73
quinapril-hydrochlorothiazide 25 MG- 20 MG .....	24	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG .....	2	RESTASIS EMUL (cyclosporine (ophth)) .....	84
quinidine gluconate TBCR .....	10	RELEXXII TBCR 45 MG, 63 MG (methylphenidate hcl) .....	2	RESTASIS MULTIDOSE EMUL ...	84
quinidine sulfate TABS .....	10	RELIBIOTIC CAPS .....	19	RESTORIL 22.5 MG (temazepam)	59
QULIPTA .....	73	RELION ALCOHOL SWABS .....	69	RETACRIT .....	58
QUVIVIQ .....	60	RELION KETONE TEST STRP ...	50	RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	58
RABAVERT .....	94	RELION LANCET DEVICES 30G	66	RETIN-A MICRO (tretinoin microsphere) .....	42
rabeprazole sodium TBEC .....	91	RELION LANCETS .....	66	RETIN-A MICRO PUMP (tretinoin microsphere) .....	42
RALDESY SOLN PO 10 MG/ML ..	15	RELION LANCETS MICRO-THIN 33G .....	66	RETISERT .....	84
raloxifene hcl .....	52	RELION LANCETS THIN 26G ...	66	RETROVIR CAPS (zidovudine) ...	33
ramelteon .....	60	RELION LANCETS ULTRA-THIN 30G .....	66	RETROVIR SYRP (zidovudine) ...	33
ramipril CAPS .....	23			REVCIVI .....	53
ranitidine hcl TABS 150 MG, 300 MG .....	90				
ranolazine TB12 .....	9				

REXTOVY LIQD .....	20	ritonavir TABS .....	33	SABRIL PACK (vigabatrin) .....	14
REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate) .....	33	RITUXAN .....	26	SABRIL TABS (vigabatrin) .....	14
REYATAZ PACK .....	33	rivaroxaban SUSR 1 MG/ML .....	12	sacubitril-valsartan TABS .....	36
REZVOGLAR KWIKPEN .....	18	rivaroxaban TABS 2.5 MG .....	12	SAFE-T-LANCE .....	66
RHOGAM ULTRA-FILTERED PLUS SOSY IM .....	86	rivastigmine 13.3 MG/24HR .....	87	SAFE-T-LANCE PLUS .....	66
RHOPHYLAC SOSY IJ .....	86	rivastigmine 4.6 MG/24HR, 9.5 MG/24HR .....	87	SAFETY LANCET 30G/PRESSURE ACT .....	66
RIASTAP .....	57	rivastigmine tartrate CAPS .....	87	SAFETY LANCETS .....	66
ribavirin (hepatitis c) CAPS .....	34	RIXUBIS SOLR .....	57	SAFETY LANCETS 21G .....	66
ribavirin (hepatitis c) TABS 200 MG 34		rizatriptan benzoate TABS .....	74	SAFETY LANCETS 23G .....	66
riboflavin TABS .....	96	rizatriptan benzoate TBDP .....	74	SAFETY LANCETS 28G .....	66
rifampin CAPS .....	25	ROCKLATAN .....	84	salicylic acid GEL 6 % .....	48
RIGHTEST GL300 LANCETS .....	66	ROCTAVIAN .....	57	saline SOLN 0.65 % .....	80
rilpivirine hcl 25 MG .....	33	ROLVEDON .....	58	salsalate .....	6
riluzole TABS .....	80	romidepsin SOLR .....	28	SAMI THE SEAL FILTERS MISC .	73
rimantadine hydrochloride TABS ..	34	ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG .....	30	SANDIMMUNE CAPS (cyclosporine)	75
RINVOQ LQ SOLN .....	3	ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG .....	30	SANDIMMUNE SOLN IV 50 MG/ML .	75
RINVOQ TB24 .....	3	ropinirole hydrochloride TB24 .....	30	sapropterin dihydrochloride PACK	.53
risedronate sodium TABS 150 MG	52	rosuvastatin calcium TABS .....	22	sapropterin dihydrochloride TABS	.53
risedronate sodium TABS 35 MG	.52	ROTARIX SUSP .....	94	SAPS CARE ALCOHOL PREP ...	69
risedronate sodium TABS 5 MG, 30 MG .....	52	ROTATEQ SOLN .....	94	SAPS HEALTH ALCOHOL PREP	69
risedronate sodium TBEC .....	52	RUBRACA .....	28	SAPS HEALTH CARE ALCOHOL PREP .....	69
RISPERDAL CONSTA (risperidone microspheres) .....	30	RUCONEST .....	57	SAPS HEALTH PLUS LANCETS	.66
risperidone microspheres .....	30	rufinamide SUSP .....	14	SAPS HEALTH TWIST TOP LANCETS .....	66
risperidone SOLN .....	30	RUKOBIA .....	33	SAPS TWIST TOP LANCETS .....	66
risperidone TABS .....	30	RYALTRIS .....	80	SAPSCARE TWIST TOP LANCETS	66
risperidone TBDP .....	31	RYBELSUS TABS .....	17	66	
RITEFLO DEVI .....	73	RYKINDO SRER .....	31	saxagliptin hcl .....	17
		RYZNEUTA SOSY SC 20 MG/ML	.58		

saxagliptin-metformin hcl	16	28G	66	silodosin	56
SB ALCOHOL PREP	69	SEREVENT DISKUS	12	silver sulfadiazine	44
SB FIB LAX ORANGE POWD 33 % 60		SERTRALINE HCL CAPS 150 MG, 200 MG (sertraline hcl)	15	SIMBRINZA	83
SB HEMORRHOID 0.25 %-71.9 %- 14 %-3 %	8	sertraline hcl CAPS 150 MG, 200 MG	15	simethicone CHEW 80 MG	54
SB LANCETS THIN	66	sertraline hcl CONC	15	simethicone LIQD PO	54
SB LANCETS ULTRA THIN	66	sertraline hcl TABS	15	simethicone SUSP	54
SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %	49	sevelamer carbonate PACK	55	SIMLANDI (1 PEN) AJKT	4
SCHOOLTIME SHAMPOO SHAM	49	sevelamer carbonate TABS	55	SIMLANDI (1 SYRINGE) PSKT	4
SELARSDI SOLN IV 130 MG/26ML 55		sevelamer hcl	55	SIMLANDI (2 PEN) AJKT	4
SELARSDI SOLN SC 45 MG/0.5ML	44	SEVENFACT	57	SIMLANDI (2 SYRINGE) PSKT	4
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	44	SHINGRIX	94	SIMPLYTHICK EASY MIX	86
selegiline hcl CAPS	30	SHINGRIX IM 50 MCG/0.5ML	94	SIMPLYTHICK EASYMIX LEVEL 1	86
selegiline hcl TABS	30	SIDESTREAM ADULT FACE MASK MISC	73	SIMPLYTHICK EASYMIX LEVEL 2	86
selenium sulfide LOTN 1 %	44	SIDESTREAM PEDIATRIC FACE MASK MISC	73	SIMPLYTHICK EASYMIX LEVEL 3	86
selenium sulfide LOTN 2.5 %	44	SIDESTREAM PLS ADULT FACE MASK MISC	73	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	22
selenium sulfide SHAM 1 %	44	SIGNIFOR	53	simvastatin TABS 80 MG	22
SELZENTRY SOLN	33	SIGNIFOR LAR	53	SINGLE-LET	66
SEMGLEE (YFGN) SOLN	18	SIKLOS TABS	57	sirolimus SOLN	75
SEMGLEE (YFGN) SOPN	18	sildenafil citrate (pulmonary hypertension) SOLN	37	sirolimus TABS	75
sennosides TABS 8.6 MG	60	sildenafil citrate (pulmonary hypertension) SUSR	37	sitagliptin 25 MG, 50 MG, 100 MG	17
sennosides-docusate sodium TABS 60		sildenafil citrate (pulmonary hypertension) TABS	37	sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG	16
SENSILANCE SAFETY LANCETS 21G	66	SILICONE MASK/ADULT MISC	73	SIVEXTRO TABS	25
SENSILANCE SAFETY LANCETS 26G	66	SILICONE MASK/INFANT MISC	73	SKYLA	40
SENSILANCE SAFETY LANCETS	73	SILICONE MASK/PEDIATRIC MISC	73	SKYRIZI PEN SOAJ	44
				SKYRIZI SOCT	55
				SKYRIZI SOLN	55

SKYRIZI SOSY .....	44	sodium polystyrene sulfonate POWD 75	sotalol hcl TABS 240 MG .....	35
SKYSONA .....	87	sodium polystyrene sulfonate SUSP CO 15 GM/60ML .....	sotalol hcl TABS 80 MG, 120 MG, 160 MG .....	35
SKYTROFA .....	52	SOFIA SARS ANTIGEN FIA .....	SOTYKTU .....	44
SM ADVANCED PROBIOTIC CAPS . 19		SOFIA2 SARS ANTIGEN FIA .....	SOVALDI PACK .....	34
SM ALCOHOL PREP .....	69	SOFOSBUVIR-VELPATASVIR TABS .....	SOVALDI TABS .....	34
SM IPECAC SYRUP .....	20	SOGROYA .....	SPEEDY SWAB COVID-19 ANTIGEN KIT .....	50
SMARTEST LANCETS 28G .....	66	SOLESTA .....	SPEVIGO SOLN .....	44
SOAAZ TABS 20 MG .....	51	solifenacin succinate TABS .....	SPEVIGO SOSY .....	44
sodium bicarbonate (antacid) TABS 325 MG, 650 MG .....	9	SOLIRIS .....	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML .....	94
sodium chloride (gu irrigant) 0.9 %	55	SOLUS V2 LANCETS 28G .....	SPIKEVAX SUSP .....	94
sodium chloride (inhalant) AERS ..	41	SOLUS V2 TWIST LANCETS 30G 66	SPIKEVAX SUSY .....	94
sodium chloride (inhalant) NEBU 0.9 %, 7 % .....	41	SOLUVITA ACD WITH FLUORIDE SOLN .....	spinosad .....	49
sodium citrate & citric acid .....	55	SOMA TABS 250 MG (carisoprodol) . 79	SPINRAZA .....	81
sodium fluoride (dental) CREA .....	76	SOMATULINE DEPOT .....	SPIRIVA HANDIHALER CAPS IN (tiotropium bromide) .....	11
sodium fluoride (dental) GEL .....	76	SOMAVERT .....	spironolactone & hydrochlorothiazide .....	51
sodium fluoride (dental) SOLN 0.2 % 76		SOOTHENE NB 100 ADULT MASK MISC .....	spironolactone TABS .....	51
sodium fluoride CHEW .....	74	SOOTHENE NB 100 CHILD MASK MISC .....	STAMARIL SUSR .....	94
sodium fluoride SOLN 0.5 MG/ML .	74	SOOTHENE NB 100 MED CUP MISC .....	stannous fluoride CONC .....	76
SODIUM FLUORIDE SOLN 0.5 MG/ML .....	74	SOOTHENE NB 100 MESH CAP MISC .....	STEQEYMA .....	44
sodium oxybate SOLN .....	87	sorafenib tosylate .....	STEQEYMA .....	55
sodium phenylbutyrate POWD .....	53	SORBITOL PO 70 % .....	STERILANCE TL .....	66
sodium phenylbutyrate TABS .....	53	SORILUX FOAM .....	STERILE DILUENT FLOLAN PH 12 . 87	
sodium phosphate monobasic- sodium phosphate dibasic PR 19 GM/118ML-7 GM/118ML, 19 GM/197ML-7 GM/197ML, 6 GM/133ML-16 GM/133ML, 7 GM/118ML-19 GM/118ML, 9.5 GM/59ML-3.5 GM/59ML .....	60	sotalol hcl (afib/af) .....	STIMUFEND .....	58
			STIOLTO RESPIMAT .....	12
			STIVARGA .....	28
			STOP LICE AERO 0.5 % .....	49

STOP LICE STEP 3 AERO 0.5 % .49	sulfacetamide sodium (ophth) SOLN .83	SUPER THIN LANCETS .....66
STRENSIQ .....53	sulfacetamide sodium LIQD .....44	SUPPRELIN LA .....52
STRESS B COMPLEX/IRON TABS	sulfacetamide sodium w/ sulfur LOTN	SURE COMFORT ALCOHOL PREP
600 MG-5 MG-45 MCG-400 MCG-12	10 %-5 % .....42	.....69
MCG-15 MG-100 MG-20 MG-27 MG-	sulfacetamide sodium w/ sulfur SUSP	SURE COMFORT LANCETS 18G
15 MG-30 UNIT .....78	10 %-5 % .....42	66
STRESS FORMULA/IRON TABS .78	sulfacetamide sod-prednisolone	SURE COMFORT LANCETS 21G
STRESS FORMULA/IRON/ENERGY	SOLN .....84	67
TABS .....78	sulfamethoxazole-trimethoprim SUSP	SURE COMFORT LANCETS 23G
STRIBILD .....33	.....24	67
STROMEKTOL (ivermectin) .....9	sulfamethoxazole-trimethoprim TABS	SURE COMFORT LANCETS 28G
SUBLOCADE SOSY .....8	.....24	67
SUBOXONE FILM SL 0.5 MG-2 MG	sulfasalazine TABS .....55	SURE COMFORT LANCETS 30G
(buprenorphine hcl-naloxone hcl	sulfasalazine TBEC .....55	67
dihydrate) .....8	sulindac TABS .....5	SUREBIOTIC PROBIOTIC
SUBOXONE FILM SL 1 MG-4 MG	sumatriptan .....74	SUPPORT CAPS .....19
(buprenorphine hcl-naloxone hcl	sumatriptan succinate SOAJ 4	SURELITE LANCETS .....67
dihydrate) .....8	MG/0.5ML .....74	SYLVANT .....75
SUBOXONE FILM SL 2 MG-8 MG	sumatriptan succinate SOAJ 6	SYMBICORT (budesonide-
(buprenorphine hcl-naloxone hcl	MG/0.5ML .....74	formoterol fumarate dihydrate) .....12
dihydrate) .....8	sumatriptan succinate SOCT 4	SYMBRAVO TABS PO .....73
SUBOXONE FILM SL 3 MG-12 MG	MG/0.5ML .....74	SYMDEKO .....89
(buprenorphine hcl-naloxone hcl	sumatriptan succinate SOCT 6	SYMFI (efavirenz-lamivudine-
dihydrate) .....8	MG/0.5ML .....74	tenofovir disoproxil fumarate) .....33
SUBVENITE SUSP PO 10 MG/ML	sumatriptan succinate SOLN 6	SYMFI LO (efavirenz-lamivudine-
14	MG/0.5ML .....74	tenofovir disoproxil fumarate) .....33
SUCRAID .....50	sumatriptan succinate TABS .....74	SYMTUZA .....33
sucralfate SUSP .....90	sumatriptan-naproxen sodium ....73	SYNAGIS SOLN .....86
sucralfate TABS .....90	sunitinib malate .....28	SYNALAR CREA (fluocinolone
SUDAFED CHILDRENS LIQD ....80	SUNLENCA SOLN .....33	acetonide) .....47
SUDAFED PE CHILDRENS SOLN	SUNLENCA TABS PO 300 MG ...33	SYNALAR OINT (fluocinolone
80	SUNLENCA TBPK 300 MG .....33	acetonide) .....47
SULAR 8.5 MG, 17 MG, 34 MG	SUPARTZ FX SOSY .....80	SYNAREL .....52
(nisoldipine) .....36		SYNOJOYNT SOSY .....80
sulfacetamide sodium (acne) .....42		

SYNTHROID TABS (levothyroxine sodium) .....	89	TECENTRIQ .....	26	MG/ML .....	8
SYNVISC ONE SOSY .....	80	TECHLITE AST LANCETS .....	67	testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM .....	8
SYNVISC SOSY .....	80	TECHLITE LANCETS .....	67	testosterone GEL TD 1 % .....	8
TAB-A-VITE/IRON TABS 50 MG-1 MG-400 MCG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-15 MG .....	78	TECHLITE LANCETS 26G .....	67	testosterone GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 % .....	8
TAB-A-VITE/IRON/BETA CAROTENE TABS .....	78	TEGLUTIK SUSP .....	80	testosterone GEL TD 10 MG/ACT ..	8
TABLOID .....	26	TEGRETOL-XR TB12 (carbamazepine) .....	14	testosterone SOLN .....	8
TACLONEX SUSP (calcipotriene-betamethasone dipropionate) .....	47	TEGSEDI .....	88	TETANUS-DIPHTHERIA TOXOIDS TD SUSP .....	90
tacrolimus (topical) OINT 0.03 % ..	48	telmisartan .....	23	tetrabenazine .....	88
tacrolimus (topical) OINT 0.1 % ..	48	telmisartan-amlodipine .....	24	tetracaine hcl (ophth) .....	84
tacrolimus CAPS .....	75	telmisartan-hydrochlorothiazide ..	24	TETRACAINE HCL 0.5 % .....	84
tacrolimus SOLN 5 MG/ML .....	75	temazepam 15 MG, 30 MG .....	59	tetrahydrozoline hcl (ophth) 0.05 %	84
tadalafil (pulmonary hypertension) TABS .....	37	temazepam 22.5 MG .....	59	TEZSPIRE SOAJ .....	10
TADLIQ SUSP .....	37	temazepam 7.5 MG .....	59	TEZSPIRE SOSY .....	10
TAFINLAR CAPS .....	28	TEMODAR SOLR .....	26	THALOMID 50 MG, 100 MG .....	75
TAGRISSO .....	27	temozolomide CAPS .....	26	THEO-24 CP24 100 MG .....	12
TAKHZYRO SOLN .....	57	temsirolimus .....	28	THEO-24 CP24 200 MG, 300 MG, 400 MG .....	12
TALTZ SOSY .....	44	TENIVAC SUSP 2 LFU-5 LFU .....	90	theophylline ELIX .....	12
TALZENNA 0.25 MG, 1 MG .....	28	tenofovir disoproxil fumarate TABS 33		theophylline SOLN .....	12
tamoxifen citrate TABS .....	27	terazosin hcl .....	23	theophylline TB12 100 MG, 200 MG, 300 MG .....	12
tamsulosin hcl .....	56	terbinafine hcl (topical) CREA .....	43	theophylline TB12 450 MG .....	12
TASCENSO ODT .....	88	terbinafine hcl TABS .....	21	theophylline TB24 .....	12
tasimelteon CAPS .....	60	terbutaline sulfate TABS .....	12	thiamine hcl TABS .....	96
TAVALISSE .....	57	terconazole vaginal CREA 0.4 % ..	95	thiamine mononitrate TABS 100 MG .	96
tazarotene CREA .....	44	terconazole vaginal CREA 0.8 % ..	95	THINLETS GP LANCETS .....	67
TDVAX SUSP .....	90	terconazole vaginal SUPP .....	95	thioridazine hcl .....	31
		teriparatide SOPN .....	52		
		TERIPARATIDE SOPN .....	52		
		TESTOPEL PLLT .....	8		
		testosterone cypionate SOLN IM 200			

thiothixene .....	32	TIVICAY TABS 50 MG .....	33	TOPICORT CREA 0.05 % (desoximetasone) .....	47
THRESHOLD IMT MISC .....	73	tizanidine hcl CAPS 8 MG .....	79	TOPICORT CREA 0.25 % (desoximetasone) .....	47
THROMBATE III 500 UNIT .....	57	tizanidine hcl CAPS .....	79	TOPICORT GEL (desoximetasone)	47
THYMOGLOBULIN .....	75	tizanidine hcl TABS .....	79	TOPICORT SPRAY LIQD (desoximetasone) .....	47
THYROGEN 0.9 MG .....	49	TM-VITE RX TABS 1 MG .....	77	topiramate CPSP 15 MG, 25 MG ..	14
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG .....	89	TOBI NEBU (tobramycin) .....	3	topiramate CPSP 50 MG .....	14
tiagabine hcl 12 MG, 16 MG .....	14	TOBRADEX OINT .....	84	topiramate SOLN 25 MG/ML .....	14
tiagabine hcl 2 MG, 4 MG .....	14	tobramycin (ophth) SOLN .....	83	topiramate TABS 25 MG .....	14
TIBSOVO .....	28	tobramycin NEBU .....	3	topiramate TABS 50 MG, 100 MG, 200 MG .....	14
ticagrelor 60 MG, 90 MG .....	57	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML .....	3	topotecan hcl SOLN .....	29
TICOVAC .....	94	tobramycin sulfate SOLR .....	3	topotecan hcl SOLR .....	29
TIGLUTIK SUSP .....	80	tobramycin-dexamethasone SUSP 84		toemifene citrate .....	27
timolol maleate (ophth) SOLG 0.25 % .....	83	TOBREX OINT .....	83	torsemide TABS 20 MG .....	51
timolol maleate (ophth) SOLN 0.5 % . 83		TODAYS HEALTH THIN LANCETS 28G .....	67	torsemide TABS 5 MG, 10 MG, 100 MG .....	51
timolol maleate (ophth) SOLN .....	83	TODAYS HEALTH THIN LANCETS 30G .....	67	TOVIAZ (fesoterodine fumarate) ..	91
timolol maleate TABS .....	35	TOFIDENCE .....	5	TPOXX CAPS .....	34
TIMOLOL-BRIMONIDINE- DORZOLAMID 0.5 %-0.15 %-2 % .83		tolmetin sodium CAPS .....	5	TRACLEER TABS (bosentan) .....	37
TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth)) .....	83	tolmetin sodium TABS 600 MG .....	5	TRADJENTA .....	17
tioconazole vaginal 6.5 % .....	95	tolnaftate CREA .....	43	tramadol hcl CP24 100 MG, 200 MG, 300 MG .....	7
tiopronin TABS .....	56	tolterodine tartrate CP24 .....	91	TRAMADOL HCL SOLN (tramadol hcl) .....	7
tiotropium bromide CAPS IN 18 MCG .....	11	tolterodine tartrate TABS .....	91	tramadol hcl SOLN .....	7
TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG (levothyroxine sodium) .....	89	tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG .....	53	tramadol hcl TABS 25 MG, 75 MG, 100 MG .....	7
TIVICAY PD TBSO .....	33	tolvaptan TABS .....	53	tramadol hcl TABS 50 MG .....	7
		tolvaptan TBPK .....	53	tramadol hcl TB24 .....	7
		TOPAMAX SPRINKLE CPSP (topiramate) .....	14		

tramadol-acetaminophen	7	MG, 15 MG	26	TRILURON SOSY	80
trandolapril 1 MG, 2 MG	23	TREXIMET (sumatriptan-naproxen sodium)	73	trimethoprim TABS	24
trandolapril 4 MG	23	triamcinolone acetonide (mouth)	76	trimipramine maleate CAPS	16
trandolapril-verapamil hcl	24	triamcinolone acetonide (topical) AERS	47	TRIPHROCAPS CAPS 1 MG	77
tranexamic acid TABS	59	triamcinolone acetonide (topical) CREA 0.025 %	47	TRIUMEQ PD TBSO	33
tranylcypromine sulfate	15	triamcinolone acetonide (topical) CREA 0.1 %	47	TRIUMEQ TABS	33
TRAVATAN Z SOLN (travoprost)	85	triamcinolone acetonide (topical) CREA 0.5 %	47	TRIVISC SOSY	80
TRAVEL LANCETS ADVANCED 28G	67	triamcinolone acetonide (topical) LOTN	47	TRIVIX 0.1 %-5 %	47
travoprost SOLN	85	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	47	TRONVITE TABS 1 MG	77
trazodone hcl TABS 300 MG	15	triamcinolone acetonide (topical) OINT 0.05 %	47	tropicamide SOLN 0.5 %	83
trazodone hcl TABS 50 MG, 100 MG, 150 MG	15	triamcinolone acetonide (topical) OINT 0.5 %	47	tropicamide SOLN 1 %	83
TRELSTAR MIXJECT 11.25 MG, 22.5 MG	27	triamcinolone acetonide-dimethicone-silicone	47	tropium chloride CP24	91
TRELSTAR MIXJECT 3.75 MG	27	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	51	tropium chloride TABS	91
TREMFYA PEN SOAJ SC 200 MG/2ML	55	triamterene & hydrochlorothiazide TABS	51	TRUE COMFORT ALCOHOL PREP PADS	69
TREMFYA SOLN IV	55	triazolam	59	TRUE COMFORT PRO ALCOHOL PREP	69
TREMFYA SOSY SC 200 MG/2ML 55	55	trientine hcl 250 MG	75	TRUE COMFORT SAFETY LANCETS	67
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	55	trifluoperazine hcl TABS	31	TRUE COMFORT TWIST TOP LANCETS	67
treprostinil SOLN IJ	36	trihexyphenidyl hcl SOLN	29	TRUEPLUS GLUCOSE CHEW	17
tretinoin (chemotherapy)	29	trihexyphenidyl hcl TABS	29	TRUEPLUS GLUCOSE ON THE GO CHEW	17
tretinoin CREA 0.025 %	42	TRIKAFTA TBPK 100 MG-50 MG	89	TRUEPLUS LANCETS 26G	67
tretinoin CREA 0.05 %, 0.1 %	42	TRILEPTAL SUSP (oxcarbazepine)	14	TRUEPLUS LANCETS 28G	67
tretinoin GEL 0.01 %, 0.025 %, 0.05 %	42			TRUEPLUS LANCETS 30G	67
tretinoin microsphere 0.04 %, 0.1 %	42			TRUEPLUS LANCETS 33G	67
TRETTEN	57			TRUEPLUS SAFETY LANCETS 28G	67
TREXALL TABS 5 MG, 7.5 MG, 10				TRULICITY	17
				TRUMENBA 0.5 ML	92

TRUVADA (emtricitabine-tenofovir disoproxil fumarate) .....	33	UNILET COMFORTOUCH LANCET 67	UNISTIK PRO SAFETY LANCET .68
TRYPTYR SOLN OP 0.003 % .....	85	UNILET EXCELITE .....	67 68
TUBING/WING TIP MISC .....	73	UNILET EXCELITE II .....	67 68
TWINRIX SUSY .....	94	UNILET G.P. LANCET .....	67 68
TWIST TOP LANCETS 30G .....	67	UNILET G.P. SUPERLITE LANCET .67	UNISTIK TOUCH SAFETY LANC 21G .....
TYBLUME CHEW .....	39	UNILET GP 28 ULTRA THIN .....	67 68
TYBOST .....	33	UNILET LANCET .....	67 68
TYENNE SOAJ .....	5	UNILET MICRO-THIN 33G .....	67 68
TYENNE SOLN .....	5	UNILET SUPERLITE LANCET ...	67 68
TYENNE SOSY .....	5	UNILET SUPER-THIN 30G .....	67 68
TYPHIM VI SOLN .....	92	UNILET ULTRA-THIN 28G .....	67 26
TYPHIM VI SOSY .....	92	UNISOM SLEEPMELTS TBDP 25 MG .....	59 26
UBRELVY .....	73	UNISTIK 1 .....	67 47
UCERIS TB24 (budesonide) .....	41	UNISTIK 2 .....	67 47
UDENYCA ONBODY SOSY .....	58	UNISTIK 2 COMFORT .....	67 54
UDENYCA SOAJ .....	58	UNISTIK 2 EXTRA .....	67 54
UDENYCA SOSY .....	58	UNISTIK 2 NEONATAL .....	67 45
ULTICARE ALCOHOL SWABS ...	69	UNISTIK 2 NORMAL .....	67 44
ULTILET ALCOHOL SWABS .....	69	UNISTIK 2 SUPER .....	68 44
ULTILET CLASSIC LANCETS ...	67	UNISTIK 3 .....	68 44
ULTILET LANCETS .....	67	UNISTIK 3 COMFORT .....	68 44
ULTILET SAFETY LANCETS .....	67	UNISTIK 3 EXTRA .....	68 44
ULTILET SAFETY LANCETS 23G 67		UNISTIK 3 GENTLE .....	68 31
ULTRA THIN LANCETS 31G .....	67	UNISTIK 3 NEONATAL .....	68 31
ULTRA-CARE ALCOHOL PREP PADS .....	69	UNISTIK 3 NORMAL .....	68 31
ULTRA-CARE LANCETS 30G ...	67	UNISTIK CZT COMFORT .....	68 27
ULTRA-THIN II AUTO LANCET ..	67	UNISTIK CZT NORMAL .....	68 27
ULTRA-THIN II LANCETS .....	67	UNISTIK NORMAL .....	68 27

valacyclovir hcl 1 GM .....	34	VARIVAX SUSR .....	94	verapamil hcl TBCR .....	36
valacyclovir hcl 500 MG .....	34	VAXCHORA .....	92	VERELAN CP24 120 MG, 180 MG, 240 MG (verapamil hcl) .....	36
valganciclovir hcl TABS .....	34	VAXELIS SUSP .....	90	VERELAN CP24 360 MG (verapamil hcl) .....	36
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML .....	14	VAXELIS SUSY .....	90	VERELAN PM CP24 100 MG, 200 MG (verapamil hcl) .....	36
valproic acid CAPS .....	14	VAXNEUVANCE .....	92	VERELAN PM CP24 300 MG (verapamil hcl) .....	36
valrubicin .....	28	VCF VAGINAL CONTRACEPTIVE FILM .....	94	VERIFINE SAFE LANCET MINI 21G .....	68
valsartan SOLN .....	23	VCF VAGINAL CONTRACEPTIVE GEL .....	95	VERIFINE SAFE LANCET MINI 23G .....	68
valsartan TABS .....	23	VECAMEYL .....	24	VERIFINE SAFE LANCET MINI 28G .....	68
valsartan-hydrochlorothiazide .....	24	VECTIBIX 100 MG/5ML, 400 MG/20ML .....	27	VERIFINE SAFE LANCET MINI 30G .....	68
VALTOCO 10 MG DOSE LIQD .....	13	VELSIPITY .....	55	VERIFINE UNIVERSAL LANCETS 28G .....	68
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML .....	13	VELTASSA .....	76	VERIFINE UNIVERSAL LANCETS 30G .....	68
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML .....	13	VENCLEXTA STARTING PACK TBPK .....	27	VERIFINE UNIVERSAL LANCETS 33G .....	68
VALTOCO 5 MG DOSE LIQD .....	13	VENCLEXTA TABS .....	27	VESICARE LS SUSP .....	91
vancomycin hcl CAPS 125 MG .....	24	VENLAFAXINE BESYLATE ER .....	16	VEVYE SOLN .....	84
vancomycin hcl CAPS 250 MG .....	24	venlafaxine hcl CP24 150 MG .....	16	VICTOZA (liraglutide) .....	17
vancomycin hcl SOLR IV 1 GM .....	24	venlafaxine hcl CP24 37.5 MG .....	16	vigabatrin PACK .....	14
VANCOMYCIN HCL SOLR IV 1 GM . 24		venlafaxine hcl CP24 75 MG .....	16	vigabatrin TABS .....	14
vancomycin hcl SOLR IV 500 MG .....	24	venlafaxine hcl TABS .....	16	VIGAFYDE SOLN .....	14
VANCOMYCIN HCL SOLR IV 500 MG .....	24	venlafaxine hcl TB24 .....	16	VIGAMOX SOLN OP (moxifloxacin hcl (ophth)) .....	84
vancomycin hcl SOLR PO 25 MG/ML .....	24	VENTOLIN HFA AERS (albuterol sulfate) .....	12	VIJOICE TBPK .....	75
VANDAZOLE .....	95	verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG ...	36	VILTEPSO .....	81
VAQTA .....	94	verapamil hcl CP24 300 MG .....	36	VIMIZIM .....	53
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML .....	94	verapamil hcl CP24 360 MG .....	36		
varenicline tartrate TABS .....	88	VERAPAMIL HCL ER CP24 (verapamil hcl) .....	36		
varenicline tartrate TBPK .....	88	verapamil hcl TABS .....	36		

VIMOVO (naproxen-esomeprazole magnesium) .....	5	VIZIMPRO .....	27	WELLPRO 31 CAPS .....	19
vincristine sulfate .....	29	VOGELXO PUMP GEL TD (testosterone) .....	8	WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG .....	74
VIRACEPT TABS 250 MG .....	33	VONVENDI .....	57	white petrolatum-mineral oil .....	82
VIRACEPT TABS 625 MG .....	33	VORAXAZE .....	29	WILATE KIT .....	57
VIREAD POWD .....	33	VORTEX HOLD CHMBR/MASK/CHILD DEVI .....	73	WINDMILL TRAINER MISC .....	73
VIREAD TABS (tenofovir disoproxil fumarate) .....	33	VORTEX HOLD CHMBR/MASK/TODDLER DEVI ..	73	WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ...	86
VIREAD TABS .....	33	VORTEX VALVE CHAMBER-PEDI MASK DEVI .....	73	XACIATO GEL .....	95
VISCO-3 SOSY .....	80	VORTEX VALVED HOLDING CHAMBER DEVI .....	73	XALKORI CAPS .....	28
VISTOGARD .....	20	VOSEVI .....	34	XARELTO STARTER PACK TBPK 12	
VISUDYNE .....	84	VOTRIENT .....	28	XARELTO SUSR 1 MG/ML (rivaroxaban) .....	12
VITAMIN D3 LIQD PO 125 MCG/ML .96		VPRIV .....	57	XARELTO TABS 10 MG, 20 MG ..	12
vitamin e CAPS .....	96	VRAYLAR CAPS .....	30	XARELTO TABS 15 MG .....	12
VITAMIN E CAPS .....	96	VRAYLAR CPPK .....	30	XARELTO TABS 2.5 MG (rivaroxaban) .....	12
VITAMIN E CHEW .....	96	VTAMA .....	44	XCOPRI (250 MG DAILY DOSE) TBPK .....	14
VITAMIN E/D-ALPHA CAPS 200 UNIT .....	96	VYNDAMAX .....	37	XCOPRI TABS .....	14
VITAMINS ACD-FLUORIDE SOLN 78		VYNDALIN .....	37	XELJANZ SOLN .....	3
vitamins w/ lipotropics CAPS .....	79	VYONDYS 53 .....	81	XELSTRYM .....	1
VITASURE TABS 1 MG .....	77	VYVANSE CAPS .....	1	XENAZINE (tetrabenazine) .....	88
VITRAKVI CAPS .....	28	VYVANSE CHEW .....	1	XEOMIN .....	81
VITRAKVI SOLN .....	28	WAL-SLEEP Z TBDP 25 MG .....	59	XGEVA SOLN .....	52
VIVAGUARD LANCETS .....	68	WAL-SOM TBDP 25 MG .....	59	XIAFLEX .....	75
VIVAGUARD LANCETS 30G .....	68	warfarin sodium TABS .....	12	XIIDRA .....	84
VIVAGUARD SAFETY LANCETS 28G .....	68	WEBCOL ALCOHOL PREP LARGE 69		XOFLUZA (40 MG DOSE) 40 MG .34	
VIVIMUSTA SOLN .....	26	WEBCOL ALCOHOL PREP MEDIUM .....	69	XOFLUZA (80 MG DOSE) 80 MG .34	
VIVITROL .....	20	WEGOVY .....	1	XOLAIR SOAJ .....	10
VIVOTIF .....	92				

XOLAIR SOLR .....	10	zaleplon .....	59	zidovudine CAPS .....	34
XOLAIR SOSY .....	10	ZALTRAP .....	26	zidovudine SYRP .....	34
XOPENEX HFA (levalbuterol tartrate) .....	12	ZANAFLEX CAPS 8 MG .....	79	zidovudine TABS .....	34
XOSPATA .....	28	ZARXIO .....	58	ZIEXTENZO .....	58
XPERT XPRESS SARS-COV-2 ..	50	ZAVZPRET .....	73	zileuton TB12 .....	11
XPHOZAH .....	53	ZEGALOGUE SOAJ .....	17	ZILRETTA SRER .....	41
XTANDI CAPS .....	27	ZEGALOGUE SOSY .....	17	ZIMHI SOSY .....	20
XYBIOTIC CAPS .....	20	ZEGERID CAPS (omeprazole- sodium bicarbonate) .....	91	zinc oxide (topical) OINT 20 % .....	48
XYNTHA .....	57	ZEGERID PACK (omeprazole- sodium bicarbonate) .....	91	zinc sulfate CAPS .....	75
XYNTHA SOLOFUSE .....	57	ZELAC CAPS .....	20	ZINPLAVA .....	86
XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML ..	22	ZELBORAF .....	28	ziprasidone hcl .....	30
YERVOY .....	26	ZEMAIRA SOLR 1000 MG .....	89	ziprasidone mesylate .....	30
YESCARTA .....	27	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT- 10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT- 63000 UNIT-20000 UNIT .....	51	ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG (sitagliptin free base- metformin hcl) .....	16
YESINTEK SOLN 45 MG/0.5ML ..	44	ZEPATIER .....	34	ZITUVIO 25 MG, 50 MG, 100 MG (sitagliptin) .....	17
YESINTEK SOSY .....	44	ZEPBOUND SOAJ .....	1	ZOLADEX 10.8 MG .....	27
YEZTUGO SOLN 463.5 MG/1.5ML 34	34	ZEPBOUND SOLN .....	1	ZOLADEX 3.6 MG .....	27
YEZTUGO TABS PO 300 MG .....	34	ZEPOSIA STARTER KIT CPPK ..	88	zoledronic acid CONC .....	52
YF-VAX SUSR .....	94	ZEVALIN Y-90 .....	26	zoledronic acid SOLN 5 MG/100ML 52	52
YONDELIS .....	26	ZEVRX STERILE ALCOHOL PREP PAD .....	69	ZOLEDRONIC ACID SOLN .....	52
YOSPRALA 81 MG-40 MG .....	57	ZEVRX TWIST TOP LANCETS 30G 68	68	ZOLGENSMA 20.6-21.0 KG .....	81
YUFLYMA (1 PEN) AJKT .....	4	ZIAGEN SOLN (abacavir sulfata) ..	34	ZOLGENSMA 10.1-10.5 KG .....	82
YUFLYMA (2 PEN) AJKT .....	4			ZOLGENSMA 10.6-11.0 KG .....	82
YUFLYMA (2 SYRINGE) PSKT .....	4			ZOLGENSMA 10.6-11.0 KG .....	82
YUFLYMA-CD/UC/HS STARTER AJKT .....	4			ZOLGENSMA 11.1-11.5 KG .....	82
YUSIMRY .....	4			ZOLGENSMA 11.6-12.0 KG .....	82
YUTIQ .....	84			ZOLGENSMA 12.1-12.5 KG .....	82
zafirlukast .....	11			ZOLGENSMA 12.6-13.0 KG .....	82
				ZOLGENSMA 13.1-13.5 KG .....	82

ZOLGENSMA 13.6-14.0 KG ..... 82	zolmitriptan SOLN 2.5 MG .....74	ZYMFENTRA (1 PEN) AJKT ..... 55
ZOLGENSMA 14.1-14.5 KG ..... 82	zolmitriptan TABS .....74	ZYMFENTRA (2 PEN) AJKT ..... 55
ZOLGENSMA 14.6-15.0 KG ..... 82	zolmitriptan TBDP .....74	ZYMFENTRA (2 SYRINGE) PSKT 55
ZOLGENSMA 15.1-15.5 KG ..... 82	ZOLOFT CONC (sertraline hcl) ....15	ZYNTEGLO ..... 58
ZOLGENSMA 15.6-16.0 KG ..... 82	ZOLPIDEM TARTRATE CAPS ... 60	ZYPREXA RELPREVV ..... 31
ZOLGENSMA 16.1-16.5 KG ..... 82	zolpidem tartrate SUBL ..... 60	
ZOLGENSMA 16.6-17.0 KG ..... 82	zolpidem tartrate TABS ..... 60	
ZOLGENSMA 17.1-17.5 KG ..... 82	zolpidem tartrate TBCR ..... 60	
ZOLGENSMA 17.6-18.0 KG ..... 82	ZOMIG SOLN 2.5 MG (zolmitriptan) . 74	
ZOLGENSMA 18.1-18.5 KG ..... 82	ZONISADE SUSP .....14	
ZOLGENSMA 18.6-19.0 KG ..... 82	zonisamide CAPS .....14	
ZOLGENSMA 19.1-19.5 KG ..... 82	ZORYVE CREA EX .....48	
ZOLGENSMA 19.6-20.0 KG ..... 82	ZORYVE FOAM EX .....48	
ZOLGENSMA 2.6-3.0 KG .....82	ZOVIRAX CREA (acyclovir topical) 44	
ZOLGENSMA 3.1-3.5 KG .....82	ZOVIRAX OINT (acyclovir topical) .44	
ZOLGENSMA 3.6-4.0 KG .....82	ZTALMY ..... 14	
ZOLGENSMA 4.1-4.5 KG .....82	ZUBSOLV SUBL 0.18 MG-0.7 MG . 8	
ZOLGENSMA 4.6-5.0 KG .....82	ZUBSOLV SUBL 0.36 MG-1.4 MG . 8	
ZOLGENSMA 5.1-5.5 KG .....82	ZUBSOLV SUBL 0.71 MG-2.9 MG . 8	
ZOLGENSMA 5.6-6.0 KG .....82	ZUBSOLV SUBL 1.4 MG-5.7 MG ...8	
ZOLGENSMA 6.1-6.5 KG .....82	ZUBSOLV SUBL 2.1 MG-8.6 MG ...8	
ZOLGENSMA 6.6-7.0 KG .....82	ZUBSOLV SUBL 2.9 MG-11.4 MG . 8	
ZOLGENSMA 7.1-7.5 KG .....82	ZULRESSO .....15	
ZOLGENSMA 7.6-8.0 KG .....82	ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG .....87	
ZOLGENSMA 8.1-8.5 KG .....82	ZURNAI IJ 1.5 MG/0.5ML ..... 20	
ZOLGENSMA 8.6-9.0 KG .....82	ZURZUVAE .....15	
ZOLGENSMA 9.1-9.5 KG .....82	ZYDELIG .....28	
ZOLGENSMA 9.6-10.0 KG .....82	ZYKADIA TABS .....28	
ZOLINZA ..... 28		