

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.

Trial and Failure of 1 Preferred Product Required Prior to Non-Preferred Products
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

Trial and Failure of 2 Preferred Products Required Prior to Non-Preferred Products
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

Trial and Failure of 3 Preferred Products Required Prior to Non-Preferred Products
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

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

Trial and Failure of All Preferred Products Required Prior to Non-Preferred Products
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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders					
Amphetamines					
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	NP	Generic for Adderall XR; QL(1 EA daily); AL(At least 6 yrs old); MP	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG	1	MP
ADDERALL TABS (amphetamine-dextroamphetamine)	2	Generic for Adderall; QL(3 EA daily); MP	DYANAVEL XR TBCR	NP	
amphetamine sulfate TABS	1	Generic for Evekeo; MP; PA	lisdexamfetamine dimesylate CAPS	NP	QL(1 EA daily); MP; PA
amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG	NP	MP	lisdexamfetamine dimesylate CHEW	1	MP; PA
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	methamphetamine hcl	1	Generic for Desoxy; MP; PA
amphetamine-dextroamphetamine TABS	1	Generic for Adderall; QL(3 EA daily); MP	MYDAYIS CP24 (amphetamine-dextroamphetamine)	NP	MP
dextroamphetamine sulfate CP24 5 MG	1	Generic for Dexedrine; QL(1 EA daily); AL(At least 6 yrs old); MP	VYVANSE CAPS (lisdexamfetamine dimesylate)	2	QL(1 EA daily); MP; PA
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	Generic for Dexedrine; QL(2 EA daily); AL(At least 6 yrs old); MP	VYVANSE CHEW (lisdexamfetamine dimesylate)	NP	MP; PA
dextroamphetamine sulfate SOLN	NP	Generic for Procentra; MP; PA	XELSTRYM	NP	
dextroamphetamine sulfate TABS 5 MG, 10 MG	NP	AL(At least 3 yrs old); MP	Analeptics		
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	AL(At least 3 yrs old); MP	caffeine citrate SOLN PO 60 MG/3ML	1	QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail; MP
			Anorexiants Non-Amphetamine		
			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
			Anti-Obesity Agents		
			WEGOVY	NP	PA
			ZEPBOUND SOAJ	NP	PA
			ZEPBOUND SOLN	NP	PA
			Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		

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	
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 18 MG, 27 MG, 36 MG, 54 MG	2	Generic for Concerta; AL(At least 6 yrs old); MP
CONCERTA TBCR (<i>methylphenidate hcl</i>)	2	Generic for Concerta; AL(At least 6 yrs old); MP	RELEXXII TBCR 45 MG, 63 MG (<i>methylphenidate hcl</i>)	2	
<i>dexmethylphenidate hcl CP24</i>	1	Generic for Focalin XR; MP; PA	ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
<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	ALTERNATIVE MEDICINES		
<i>methylphenidate hcl CHEW</i>	1	MP; PA	Alternative Medicine - G's		
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG</i>	1	Generic for Ritalin LA; MP; PA	<i>ginger (zingiber officinalis) CAPS 250 MG</i>	1	QL(4 EA daily)
<i>methylphenidate hcl CP24 60 MG</i>	1	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)
			AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
			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	ABRILADA (2 SYRINGE) PSKT	NP	SP; PA
<i>neomycin sulfate TABS</i>	1		ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP; PA
TOBI NEBU (<i>tobramycin</i>)	NP	SP; PA	ADALIMUMAB-AACF (2 SYRINGE) PSKT	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(CD/UC/HS STRT) AJKT	NP	SP; PA
<i>tobramycin sulfate SOLR</i>	1	PA	ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP; PA
<i>tobramycin NEBU</i>	NP	SP; PA	ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP; PA
<i>tobramycin NEBU</i>	1	SP; PA	ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions			ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP; PA
Antirheumatic - Enzyme Inhibitors			ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP; PA
OLUMIANT	NP	SP; PA	ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	NP	SP; PA
RINVOQ LQ SOLN	2	SP; PA	ADALIMUMAB-ADAZ SOAJ	2	SP; PA
RINVOQ TB24	2	SP; PA	ADALIMUMAB-ADAZ SOSY	2	SP; PA
<i>tofacitinib citrate SOLN 1 MG/ML</i>	NP	SP; PA	ADALIMUMAB-ADAZ SOSY 20 MG/0.2ML	NP	SP; PA
XELJANZ SOLN 1 MG/ML (<i>tofacitinib citrate</i>)	NP	SP; PA	ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP; PA
Antirheumatic Antimetabolites			ADALIMUMAB-ADBM (2 SYRINGE) PSKT	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(CD/UC/HS STRT) 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-ADBM(PS/UV STARTER) AJKT	NP	SP; PA
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-BWWD SOAJ 40 MG/0.4ML	2	SP; PA
ABRILADA (1 PEN) AJKT	NP	SP; PA	ADALIMUMAB-BWWD SOSY 40 MG/0.4ML	2	SP; PA
ABRILADA (2 PEN) AJKT	NP	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP; PA	HUMIRA-PED>/=40KG CROHNS START PSKT	2	SP; PA
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/UEVIT 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/UEVIT 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
			YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
YUSIMRY	NP	SP; PA
Interleukin-6 Receptor Inhibitors		
AVTOZMA SOAJ SC 162 MG/0.9ML	NP	SP; PA
AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML	NP	SP; PA
AVTOZMA SOSY SC 162 MG/0.9ML	NP	SP; PA
TOFIDENCE	NP	SP; PA
TYENNE SOAJ	2	SP; PA
TYENNE SOLN	2	SP; PA
TYENNE SOSY	2	SP; PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<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; RX/OTC
<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, 75 MG</i>	1	MP
<i>ketoprofen CP24</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<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
<i>nabumetone</i>	1	MP
<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</i>	1	MP
VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	NP	PA
VYSCOXA PO 10 MG/ML	NP	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA XR TB24 PO 75 MG	NP	SP; PA
OTEZLA/OTEZLA XR INITIATION PK TBPK	NP	SP; PA
OTEZLA TABS	2	SP; PA
OTEZLA TBPK	2	SP; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	1	QL(1 EA daily); MP
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
ENBREL SURECLICK SOAJ	NP	SP; PA
ENBREL SOLN	NP	SP; PA
ENBREL SOSY	NP	SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)
<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)
Analgesics - Sodium Channel Pain Signal Inhibitors		
JOURNAVX	2	QL(30 EA per 60 day(s) retail; 30 EA per 60 days mail)
Analgesics Other		
<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, 325 MG/10.15ML, 650 MG/20.3ML</i>	1	
<i>acetaminophen TABS 325 MG, 500 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
FEVERALL JUNIOR STRENGTH SUPP	0	QL(12 EA per fill retail)
Analgesics-Peptide Channel Blockers		
PRIALT	2	SP; PA
Salicylates		
<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	
<i>aspirin TBEC 81 MG, 325 MG</i>	0	
<i>diflunisal TABS</i>	1	MP
<i>salsalate</i>	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
<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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>meperidine hcl TABS 50 MG</i>	1	QL(6 EA daily)	<i>tramadol hcl TABS 50 MG</i>	1	QL(8 EA daily)
<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PA	<i>tramadol hcl TB24</i>	1	PA
<i>methadone hcl TABS 5 MG</i>	1	QL(4 EA daily); PA	<i>tramadol hcl TB24</i>	NP	PA
<i>morphine sulfate beads</i>	NP	PA	Opioid Combinations		
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	PA	<i>acetaminophen w/ codeine SOLN</i>	1	QL(30 ML daily)
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	1	QL(16.67 ML daily)	<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	QL(6 EA daily)
<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 SUPP</i>	1	QL(24 EA per fill retail)	<i>butalbital-aspirin-caffeine w/cod</i>	1	QL(4 EA daily)
<i>morphine sulfate TABS</i>	1	QL(6 EA daily)	<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 TBCR</i>	1	QL(3 EA daily)	<i>hydrocodone-acetaminophen TABS 325 MG-7.5 MG</i>	1	QL(8 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>hydrocodone-acetaminophen TABS 325 MG-5 MG</i>	1	QL(12 EA daily)
<i>oxycodone hcl SOLN</i>	1		<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 T12A 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily); PA	<i>tramadol-acetaminophen</i>	1	QL(4 EA daily)
<i>oxycodone hcl TABS</i>	1	QL(6 EA daily)	Opioid Partial Agonists		
<i>oxymorphone hcl TB12 15 MG</i>	1	PA	BRIXADI (WEEKLY) SOSY	2	SP
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1		BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	2	SP
QDOLO SOLN (<i>tramadol hcl</i>)	NP				
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	PA			
<i>tramadol hcl SOLN</i>	NP				
TRAMADOL HCL SOLN (<i>tramadol hcl</i>)	NP				
<i>tramadol hcl TABS 25 MG, 75 MG, 100 MG</i>	NP				

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

Drug Name	Drug Tier	Requirements/Limits
<i>ZUBSOLV SUBL 2.1 MG-8.6 MG</i>	2	QL(2 EA daily)
<i>ZUBSOLV SUBL 0.18 MG-0.7 MG</i>	2	QL(8 EA daily)
<i>ZUBSOLV SUBL 1.4 MG-5.7 MG</i>	2	QL(3 EA daily)
<i>ZUBSOLV SUBL 2.9 MG-11.4 MG</i>	2	QL(1.5 EA daily)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
<i>ANDROGEL PUMP GEL TD (testosterone)</i>	NP	PA
<i>AVEED SOLN</i>	2	SP; PA
<i>methyltestosterone TABS</i>	1	
<i>TESTOPEL PLLT</i>	2	SP; PA
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	1	QL(4 ML per 30 day(s) retail)
<i>testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM</i>	1	
<i>testosterone GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 %</i>	1	PA
<i>testosterone GEL TD 1 %</i>	NP	
<i>testosterone GEL TD 10 MG/ACT</i>	NP	PA
<i>testosterone SOLN</i>	NP	PA
<i>VOGELXO PUMP GEL TD (testosterone)</i>	NP	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>hydrocortisone (intrarectal)</i>	1	QL(420 ML per fill retail)
Rectal Combinations		
<i>HEMORRHOIDAL 0.25 %-85.5 %-3 %</i>	2	QL(48 EA per fill retail)

Drug Name	Drug Tier	Requirements/Limits
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %	2	QL(12 GM per fill retail)
Rectal Local Anesthetics		
<i>pramoxine hcl (rectal) FOAM EX</i>	1	QL(15 GM per fill retail)
PROCTOFOAM FOAM EX 1 %	2	QL(15 GM per fill retail)
Rectal Steroids		
ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	2	QL(30 GM per fill retail)
<i>hydrocortisone (rectal) EX 1 %</i>	1	RX/OTC
<i>hydrocortisone (rectal) EX 2.5 %</i>	1	QL(30 GM per fill retail)
PREPARATION H EX 1 %	2	RX/OTC
PREPARATION H SOOTHING RELIEF EX 1 %	2	RX/OTC
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD</i>	1	QL(16.53 ML daily)
<i>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</i>	1	QL(16.53 ML daily)
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP	2	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	1	QL(16.53 EA daily)
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	1	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
BENZNIDAZOLE	2	SP; PA
EMVERM CHEW	2	QL(1 EA per 14 day(s) retail)
<i>ivermectin</i>	1	
PIN RID CHEW	2	QL(4 EA per fill retail); 1 max fill(s) per 30 day(s) retail
<i>pyrantel pamoate SUSP</i>	1	QL(60 ML per fill retail); 1 max fill(s) per 30 day(s) retail
STROMECTOL (<i>ivermectin</i>)	2	
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
ASPRUZYO SPRINKLE PACK	NP	
<i>ranolazine TB12</i>	1	
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1	MP
<i>isosorbide mononitrate TABS</i>	1	QL(2 EA daily); MP
<i>isosorbide mononitrate TB24</i>	1	QL(1 EA daily); MP
<i>nitroglycerin OINT</i>	1	MP
<i>nitroglycerin PT24</i>	1	MP
<i>nitroglycerin SUBL</i>	1	MP
NITRO-TIME CPCR 2.5 MG, 6.5 MG, 9 MG	2	MP
ANTIANSIETY AGENTS - Drugs to Treat Anxiety		

Drug Name	Drug Tier	Requirements/Limits
Antianxiety Agents - Misc.		
BUCAPSOL PO 7.5 MG, 10 MG, 15 MG	NP	
<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	
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	NP	
<i>alprazolam TABS</i>	1	QL(4 EA daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam TBPDP</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)

Drug Name	Drug Tier	Requirements/Limits
LOREEV XR CS24	NP	
<i>oxazepam CAPS</i>	NP	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<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
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1	MP
<i>propafenone hcl TABS</i>	1	MP
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	1	MP
<i>dofetilide</i>	1	MP; PA
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
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	2	SP; PA
TEZSPIRE SOSY	2	SP; PA
XOLAIR SOAJ	2	SP; PA
XOLAIR SOLR	2	SP; PA
XOLAIR SOSY	2	SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate</i> TABS	1		THEO-24 CP24 200 MG, 300 MG, 400 MG	2	
BEVESPI AEROSPHERE	NP		THEO-24 CP24 100 MG	2	MP
BREO ELLIPTA	2		<i>theophylline</i> ELIX	1	
BREZTRI AEROSPHERE	NP		<i>theophylline</i> SOLN	1	QL(475 ML per fill retail); MP
<i>budesonide-formoterol fumarate dihydrate</i>	NP	QL(11 GM per 30 day(s) retail)	<i>theophylline</i> TB12 100 MG, 200 MG, 300 MG	1	MP
COMBIVENT RESPIMAT AERS	2	QL(4 GM per 30 day(s) retail)	<i>theophylline</i> TB12 450 MG	1	
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	2	QL(13 GM per 30 day(s) retail)	<i>theophylline</i> TB24	1	MP
DULERA 50 MCG/ACT-5 MCG/ACT	2		ANTICOAGULANTS - Blood Thinners		
<i>fluticasone-salmeterol</i> AERO	NP		Coumarin Anticoagulants		
<i>ipratropium-albuterol</i> SOLN	1	QL(12 ML daily)	<i>warfarin sodium</i> TABS	1	MP
<i>levalbuterol hcl</i> 1.25 MG/0.5ML	NP		Direct Factor Xa Inhibitors		
<i>levalbuterol hcl</i>	1		ELIQUIS (1.5 MG PACK) TBSO PO	2	
<i>levalbuterol tartrate</i>	1		ELIQUIS (2 MG PACK) TBSO PO	2	
PROVENTIL HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(0.45 GM daily)	ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(4 EA daily)
SEREVENT DISKUS	2	QL(2 EA daily)	ELIQUIS CPSP PO 0.15 MG	2	
STIOLTO RESPIMAT	2		ELIQUIS TABS	2	QL(4 EA daily)
SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	2	QL(11 GM per 30 day(s) retail)	ELIQUIS TBSO PO 0.5 MG	2	
<i>terbutaline sulfate</i> TABS	1	MP	<i>rivaroxaban</i> SUSR 1 MG/ML	NP	
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(0.54 GM daily)	<i>rivaroxaban</i> TABS 2.5 MG	NP	
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(1.2 GM daily)	XARELTO STARTER PACK TBPK	2	
XOPENEX HFA (<i>levalbuterol tartrate</i>)	2		XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	
Xanthines			XARELTO TABS 2.5 MG (<i>rivaroxaban</i>)	2	
			XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)
			XARELTO TABS 15 MG	2	QL(2 EA daily)
			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)	Anticonvulsants - Misc.		
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	1	QL(48 ML per 30 day(s) retail)	<i>brivaracetam SOLN IV 50 MG/5ML</i>	1	SP; PA
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	1	QL(60 ML per 30 day(s) retail)	<i>carbamazepine CHEW 200 MG</i>	NP	
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	1	QL(18 ML per 30 day(s) retail)	<i>carbamazepine CHEW 100 MG</i>	1	MP
<i>enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML</i>	1	QL(36 ML per 30 day(s) retail)	<i>carbamazepine CP12</i>	1	MP
<i>fondaparinux sodium</i>	1	PA	<i>carbamazepine SUSP</i>	1	MP
FRAGMIN SOLN 10000 UNIT/4ML	NP	SP	<i>carbamazepine TABS</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 TB12</i>	1	MP
Thrombin Inhibitors			CARBATROL CP12 (<i>carbamazepine</i>)	NP	MP
<i>dabigatran etexilate mesylate CAPS</i>	1		ELEPSIA XR TB24	NP	
PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	NP		EPRONTIA SOLN 25 MG/ML (<i>topiramate</i>)	NP	
PRADAXA PACK	NP	SP	<i>gabapentin CAPS 300 MG, 400 MG</i>	1	MP
ANTICONVULSANTS - Drugs to Treat Seizures			<i>gabapentin CAPS 100 MG</i>	1	QL(9 EA daily); MP
Anticonvulsants - Benzodiazepines			<i>gabapentin SOLN</i>	1	MP
<i>clobazam SUSP</i>	1		<i>gabapentin TABS 600 MG, 800 MG</i>	1	MP
<i>clobazam TABS</i>	1		LAMICTAL ODT KIT (<i>lamotrigine</i>)	NP	
<i>clonazepam TABS</i>	1	QL(4 EA daily)	LAMICTAL STARTER KIT 25 MG (<i>lamotrigine</i>)	NP	
<i>clonazepam TBDP</i>	1		<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	
VALTOCO 5 MG DOSE LIQD	2	QL(10 EA per 30 day(s) retail)	<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	
			<i>oxcarbazepine SUSP</i>	1	MP
			<i>oxcarbazepine TABS</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<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>	NP	
<i>topiramate SOLN 25 MG/ML</i>	1	
<i>topiramate TABS 50 MG, 100 MG, 200 MG</i>	1	MP
<i>topiramate TABS 25 MG</i>	1	QL(6 EA daily); 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) TBPB	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 12 MG, 16 MG</i>	NP	
<i>tiagabine hcl 2 MG, 4 MG</i>	NP	MP

Drug Name	Drug Tier	Requirements/Limits
<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 200 MG, 300 MG</i>	NP	MP
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1	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
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1	MP
<i>mirtazapine TBDP</i>	1	
Antidepressant Combinations		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AUVELITY	NP		<i>escitalopram oxalate TABS</i>	1	MP
Antidepressants - Misc.			<i>fluoxetine hcl CAPS</i>	1	MP
<i>bupropion hcl TABS</i>	1	MP	<i>fluoxetine hcl CPDR</i>	NP	
<i>bupropion hcl TB12 100 MG</i>	1	QL(4 EA daily); MP	<i>fluoxetine hcl SOLN</i>	1	
<i>bupropion hcl TB12 150 MG</i>	1	QL(3 EA daily); MP	<i>fluoxetine hcl TABS 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB12 200 MG</i>	1	QL(2 EA daily); MP	<i>fluoxetine hcl TABS 10 MG</i>	1	AL(At least 7 yrs old); MP
<i>bupropion hcl TB24 450 MG</i>	2		<i>fluoxetine hcl TABS 60 MG</i>	1	
<i>bupropion hcl TB24 150 MG</i>	1	QL(3 EA daily); MP	FLUOXETINE HCL TABS (<i>fluoxetine hcl</i>)	NP	
<i>bupropion hcl TB24 300 MG</i>	1	QL(1 EA daily); MP	<i>fluvoxamine maleate CP24</i>	NP	
FORFIVO XL TB24 (<i>bupropion hcl</i>)	NP		<i>fluvoxamine maleate TABS</i>	1	
GABA Receptor Modulator - Neuroactive Steroid			<i>paroxetine hcl TABS</i>	1	MP
ZULRESSO	2	SP; PA	<i>paroxetine hcl TB24</i>	1	
ZURZUVAE	NP	SP	<i>sertraline hcl CAPS 150 MG, 200 MG</i>	NP	PA
Monoamine Oxidase Inhibitors (MAOIs)			SERTRALINE HCL CAPS 150 MG, 200 MG (<i>sertraline hcl</i>)	NP	PA
<i>phenelzine sulfate</i>	1		<i>sertraline hcl CONC</i>	NP	
<i>tranylcypromine sulfate</i>	1		<i>sertraline hcl TABS</i>	1	MP
Selective Serotonin Reuptake Inhibitors (SSRIs)			ZOLOFT CONC (<i>sertraline hcl</i>)	NP	
<i>citalopram hydrobromide CAPS 30 MG</i>	NP		Serotonin Modulators		
CITALOPRAM HYDROBROMIDE CAPS 30 MG (<i>citalopram hydrobromide</i>)	NP		EXXUA TITRATION PACK TB24 PO 18.2 MG	NP	
<i>citalopram hydrobromide SOLN</i>	NP		EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	NP	
<i>citalopram hydrobromide TABS</i>	1	MP	<i>nefazodone hcl</i>	1	
ESCITALOPRAM OXALATE CAPS PO 15 MG	NP		RALDESY SOLN PO 10 MG/ML	NP	
<i>escitalopram oxalate SOLN</i>	1		<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>trazodone hcl TABS 300 MG</i>	1	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>CYMBALTA CPEP 60 MG (duloxetine hcl)</i>	NP	QL(2 EA daily); AL(At least 7 yrs old); MP
<i>CYMBALTA CPEP 20 MG, 30 MG (duloxetine hcl)</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); MP
<i>DESVENLAFAXINE ER</i>	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 60 MG</i>	1	QL(2 EA daily); AL(At least 7 yrs old); 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>VENLAFAXINE BESYLATE ER</i>	NP	
<i>venlafaxine hcl CP24 150 MG</i>	1	QL(2 EA daily); MP
<i>venlafaxine hcl CP24 37.5 MG</i>	1	QL(4 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 10 MG, 25 MG, 50 MG, 75 MG, 100 MG</i>	1	MP
<i>doxepin hcl CAPS 150 MG</i>	1	
<i>doxepin hcl CONC</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>imipramine hcl TABS</i>	1	
<i>imipramine pamoate</i>	1	
<i>nortriptyline hcl CAPS</i>	1	
<i>nortriptyline hcl SOLN</i>	1	
<i>protriptyline hcl</i>	1	
<i>trimipramine maleate CAPS</i>	1	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
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
<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG, 1000 MG-5 MG</i>	NP	
<i>DUETACT (pioglitazone hcl-glimepiride)</i>	NP	
<i>glipizide-metformin hcl</i>	1	MP
<i>glyburide-metformin</i>	1	MP
<i>GLYXAMBI</i>	2	
<i>JANUMET XR TB24</i>	2	
<i>JENTADUETO TABS</i>	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	

Drug Name	Drug Tier	Requirements/Limits
<i>sitagliptin phosphate-metformin hcl TABS</i>	1	
XIGDUO XR TB24 PO (<i>dapagliflozin free base-metformin hcl</i>)	2	
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	
<i>metformin hcl SOLN</i>	1	
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	1	MP
<i>metformin hcl TABS 625 MG, 750 MG</i>	NP	
<i>metformin hcl TB24 500 MG, 750 MG</i>	1	MP
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP	
Diabetic Other		
BAQSIMI ONE PACK POWD	2	QL(0.069 EA daily)
BAQSIMI TWO PACK POWD	2	QL(0.069 EA daily)
BD GLUCOSE CHEW	2	QL(1.67 EA daily); MP
<i>dextrose (diabetic use) CHEW 4 GM</i>	1	QL(1.67 EA daily); MP
<i>diazoxide</i>	NP	
GLUCAGON EMERGENCY SOLR IJ 1 MG (<i>glucagon</i>)	2	QL(1 EA per fill retail); MP
<i>glucagon SOLR IJ 1 MG</i>	1	QL(1 EA per fill retail); MP
GVOKE KIT SOLN	NP	
<i>mifepristone (hyperglycemia)</i>	1	SP; PA
PROGLYCEM (<i>diazoxide</i>)	2	

Drug Name	Drug Tier	Requirements/Limits
TRUEPLUS GLUCOSE ON THE GO CHEW	2	QL(1.67 EA daily); MP
TRUEPLUS GLUCOSE CHEW	2	QL(1.67 EA daily); MP
ZEGALOGUE SOAJ	2	
ZEGALOGUE SOSY	2	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	NP	QL(1 EA daily); MP
BRYNOVIN SOLN PO 25 MG/ML	NP	
ONGLYZA 5 MG (<i>saxagliptin hcl</i>)	NP	
<i>saxagliptin hcl</i>	1	
<i>sitagliptin 25 MG, 50 MG, 100 MG</i>	NP	
<i>sitagliptin phosphate 25 MG, 50 MG, 100 MG</i>	1	
TRADJENTA	2	QL(1 EA daily); AL(At least 18 yrs old); MP
ZITUVIO 25 MG, 50 MG, 100 MG (<i>sitagliptin</i>)	NP	
Incretin Mimetic Agents		
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (<i>exenatide</i>)	NP	QL(2.4 ML per 30 day(s) retail); AL(At least 18 yrs old); PA
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (<i>exenatide</i>)	NP	QL(1.2 ML per 30 day(s) retail); AL(At least 18 yrs old); PA
<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
<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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>liraglutide</i>	NP	QL(0.3 ML daily); PA	INSULIN GLARGINE-YFGN SOPN	2	
MOUNJARO	NP	PA	INSULIN GLARGINE-YFGN SOPN	2	Generic for Semglee
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	PA	INSULIN LISPRO (1 UNIT DIAL) SOPN	2	QL(30 ML per 30 day(s) retail)
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	PA	INSULIN LISPRO JUNIOR KWIKPEN SOPN	2	
OZEMPIC (2 MG/DOSE) SOPN	2	PA	INSULIN LISPRO PROT & LISPRO SUPN	2	QL(30 ML per 30 day(s) retail)
RYBELSUS TABS	NP	PA	INSULIN LISPRO SOLN IJ	2	QL(40 ML per 30 day(s) retail)
TRULICITY	2	PA	KIRSTY SOLN IJ 100 UNIT/ML	NP	
VICTOZA (<i>liraglutide</i>)	2	QL(0.3 ML daily); PA	KIRSTY SOPN SC 100 UNIT/ML	NP	
Insulin			LANTUS SOLOSTAR SOPN	2	QL(30 ML per 30 day(s) retail)
BASAGLAR TEMPO PEN SOPN	NP		LEVEMIR FLEXPEN SOPN	NP	
HUMALOG JUNIOR KWIKPEN SOPN	2		LEVEMIR SOLN	NP	
HUMALOG KWIKPEN SOPN 100 UNIT/ML	2	QL(30 ML per 30 day(s) retail)	LYUMJEV TEMPO PEN SOPN	NP	
HUMALOG MIX 50/50 KWIKPEN SUPN	2	QL(30 ML per 30 day(s) retail)	MERILOG SOLOSTAR SOPN SC 100 UNIT/ML	NP	
HUMALOG MIX 50/50 SUSP	2	QL(40 ML per 30 day(s) retail)	MERILOG SOLN SC 100 UNIT/ML	NP	
HUMALOG MIX 75/25 KWIKPEN SUPN	2	QL(30 ML per 30 day(s) retail)	NOVOLOG 70/30 FLEXPEN RELION SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMALOG MIX 75/25 SUSP	2	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 FLEXPEN SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMALOG TEMPO PEN SOPN	2		NOVOLOG MIX 70/30 RELION SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMALOG SOLN IJ	2	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMULIN 70/30 SUSP	2	QL(40 ML per 30 day(s) retail)	REZVOGLAR KWIKPEN	NP	
HUMULIN N SUSP	2	QL(40 ML per 30 day(s) retail)	SEMGLEE (YFGN) SOLN	NP	
HUMULIN R U-500 KWIKPEN SOPN SC	2		SEMGLEE (YFGN) SOPN	NP	
HUMULIN R SOLN IJ	2	QL(40 ML per 30 day(s) retail)	Insulin Sensitizing Agents		
INSULIN GLARGINE-YFGN SOLN	2	Generic for Semglee	<i>pioglitazone hcl</i>	1	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Meglitinide Analogues			<i>bismuth subsalicylate</i> CHEW 262 MG	1	
<i>nateglinide</i>	1	QL(3 EA daily); MP	<i>bismuth subsalicylate</i> SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML	1	
<i>repaglinide</i>	1		CULTURELLE KIDS PURELY CHEW	2	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors			CULTURELLE KIDS CHEW	2	
<i>dapagliflozin</i> TABS PO 5 MG, 10 MG	NP		DERMACINRX PROBISOL CAPS	2	RX/OTC
FARXIGA TABS PO (<i>dapagliflozin</i>)	2		DERMACINRX PROBITRAN CAPS	2	RX/OTC
INVOKANA	NP	MP	FLORRAGUT CAPS	2	RX/OTC
JARDIANCE	2	QL(1 EA daily)	FLORRAXIS CAPS	2	RX/OTC
Sulfonylureas			LACTEROL CAPS	2	RX/OTC
<i>glimepiride</i> 3 MG	1		<i>lactobacillus rhamnosus</i> (gg) PACK 23 MG, 5 B CELL, 5 B CELL	1	
<i>glimepiride</i> 1 MG, 2 MG	1	QL(4 EA daily); MP	LACTOVIVE CAPS	2	RX/OTC
<i>glimepiride</i> 4 MG	1	QL(2 EA daily); MP	MICROBALANCE CAPS	2	RX/OTC
<i>glipizide</i> TABS 2.5 MG	1		MICROFLOR 33 CAPS	2	RX/OTC
<i>glipizide</i> TABS 5 MG, 10 MG	1	MP	MICROVARA CPDR	2	RX/OTC
<i>glipizide</i> TB24	1	MP	MVW COMPL FORM PROBIOTIC-KIDS CPDR	2	RX/OTC
<i>glyburide</i> micronized 1.5 MG, 3 MG, 6 MG	1	MP	NEXIVA CAPS	2	RX/OTC
<i>glyburide</i> TABS	1	MP	NOVORA CAPS	2	RX/OTC
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea			PROBENTRA CPDR	2	RX/OTC
Antidiarrheal/Probiotic Agents - Misc.			PROBINATE CAPS	2	RX/OTC
BILAC CAPS	2	RX/OTC			
BIOCORE DAILY CAPS	2	RX/OTC			
BIOCORE IMMUNE+ CAPS	2	RX/OTC			
BIOCORE RESTORE CAPS	2	RX/OTC			
BIOMEXA CAPS	2	RX/OTC			
BIONARA ULTRA CPDR	2	RX/OTC			
BIOSTORA CAPS	2	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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	<i>lactobacillus-inulin CAPS</i> 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	1	
<i>probiotic product CPDR</i> 50 MG	1	RX/OTC	<i>lactobacillus-inulin CHEW</i> 200 MG-10 BILLION, 350 MG-1 GM	1	
PROMELLA IN PREBIOTIC CAPS	2	RX/OTC	Antiperistaltic Agents		
PRORIVA CAPS	2	RX/OTC	<i>diphenoxylate w/ atropine LIQD</i>	1	
RELIBIOTIC CAPS	2	RX/OTC	<i>diphenoxylate w/ atropine TABS</i>	1	
SM ADVANCED PROBIOTIC CAPS	2	RX/OTC	<i>loperamide hcl CAPS</i>	1	QL(8 EA daily); RX/OTC
SUREBIOTIC PROBIOTIC SUPPORT CAPS	2	RX/OTC	<i>loperamide hcl TABS</i>	1	QL(8 EA daily)
SYNBIARA CAPS	2	RX/OTC	ANTIDOTES AND SPECIFIC ANTAGONISTS		
UP4 PROBIOTICS ADULT CAPS	2	RX/OTC	Antidotes - Chelating Agents		
WELLPRO 31 CAPS	2	RX/OTC	CHEMET	2	
XYBIOTIC CAPS	2	RX/OTC	<i>deferasirox PACK</i>	1	SP; PA
ZELAC CAPS	2	RX/OTC	<i>deferasirox TABS</i>	1	SP; PA
Antidiarrheal/Probiotic Combinations			<i>deferasirox TBSO</i>	1	SP; PA
CULTURELLE DIGESTIVE DAILY CAPS	2		<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		
			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

Drug Name	Drug Tier	Requirements/Limits
<i>naloxone hcl SOCT</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 SOLN 0.4 MG/ML</i>	0	QL(18 ML per 90 day(s) retail); MP
<i>naloxone hcl SOSY 0.4 MG/ML</i>	1	
<i>naloxone hcl SOSY 2 MG/2ML</i>	0	QL(18 ML per 90 day(s) retail); MP
<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	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
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>	NP	
<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(2 EA daily)
Antiemetics - Anticholinergic		
<i>meclizine hcl CHEW</i>	1	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC
Antiemetics - Miscellaneous		
BONJESTA TBCR	2	
DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	2	
<i>doxylamine-pyridoxine TBEC</i>	NP	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
APONVIE EMUL	NP	
<i>aprepitant CAPS</i>	1	
<i>aprepitant CPPK PO</i>	1	
ANTIFUNGALS - Drugs to Treat Fungal Infections		
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 150 MG</i>	1	QL(2 EA daily)
<i>fluconazole TABS 100 MG</i>	1	QL(1 EA daily)
<i>fluconazole TABS 200 MG</i>	1	
<i>itraconazole CAPS</i>	1	QL(1 EA daily); PA
<i>itraconazole SOLN</i>	1	PA
ANTIHISTAMINES - Drugs to Treat Allergies		

Drug Name	Drug Tier	Requirements/Limits
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		
<i>BENADRYL ALLERGY EXTRA STR TABS</i>	2	QL(4 EA daily)
<i>DAYHIST ALLERGY 12 HOUR RELIEF TABS</i>	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 SOLN PO 0.5 MG/ML</i>	NP	
<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)
<i>levocetirizine dihydrochloride SOLN</i>	1	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>loratadine CAPS</i>	1	
<i>loratadine CHEW</i>	1	
<i>loratadine SOLN</i>	1	QL(240 ML per fill retail)
<i>loratadine TABS</i>	1	
<i>loratadine TBDP 10 MG</i>	1	
<i>XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML</i>	2	RX/OTC
Antihistamines - Phenothiazines		
<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)
<i>promethazine hcl SUPP</i>	1	QL(12 EA per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl TABS</i>	1	AL(At least 2 yrs old)
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1	
<i>cyproheptadine hcl TABS</i>	1	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1	
Antihyperlipidemics - Misc.		
<i>omega-3-acid ethyl esters</i>	1	
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1	MP
<i>cholestyramine light POWD</i>	1	MP
<i>cholestyramine PACK</i>	1	MP
<i>cholestyramine POWD</i>	1	MP
<i>colestipol hcl GRAN</i>	1	MP
<i>colestipol hcl TABS</i>	1	MP
Fibric Acid Derivatives		

Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate micronized 134 MG, 200 MG</i>	1	QL(1 EA daily); MP
<i>fenofibrate micronized 67 MG</i>	1	QL(2 EA daily); MP
<i>fenofibrate micronized 30 MG, 43 MG, 130 MG</i>	1	
<i>fenofibrate CAPS</i>	NP	MP
<i>fenofibrate TABS 54 MG</i>	1	QL(3 EA daily); MP
<i>fenofibrate TABS 40 MG, 120 MG</i>	NP	
<i>fenofibric acid</i>	NP	
FENOGLIDE TABS (<i>fenofibrate</i>)	NP	
FIBRICOR (<i>fenofibric acid</i>)	NP	
<i>gemfibrozil TABS</i>	1	QL(2 EA daily); MP
LIPOFEN CAPS (<i>fenofibrate</i>)	NP	MP
HMG CoA Reductase Inhibitors		
ATORVALIQ SUSP	NP	
<i>atorvastatin calcium TABS</i>	1	QL(1 EA daily); MP
<i>fluvastatin sodium CAPS</i>	NP	
<i>fluvastatin sodium TB24</i>	NP	
LESCOL XL TB24 (<i>fluvastatin sodium</i>)	NP	
<i>lovastatin TABS 40 MG</i>	1	QL(2 EA daily); MP
<i>lovastatin TABS 10 MG, 20 MG</i>	1	QL(1 EA daily); MP
<i>pravastatin sodium</i>	1	QL(1 EA daily); MP
<i>rosuvastatin calcium TABS</i>	1	QL(1 EA daily); MP
<i>simvastatin TABS 80 MG</i>	1	MP
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	1	QL(1 EA daily); MP
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1	

Drug Name	Drug Tier	Requirements/Limits
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
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
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
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>trandolapril 4 MG</i>	1	QL(2 EA daily); MP	<i>bisoprolol & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
Agents for Pheochromocytoma			<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
<i>metirosine</i>	1	SP; PA	<i>captopril & hydrochlorothiazide</i>	NP	QL(2 EA daily); MP
Angiotensin II Receptor Antagonists			<i>enalapril maleate & hydrochlorothiazide</i>	1	QL(2 EA daily); MP
ARB LI PO 10 MG/ML	NP		EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	
<i>candesartan cilexetil</i>	1		<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 EA daily); MP
<i>irbesartan</i>	1	QL(1 EA daily); MP	<i>irbesartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>losartan potassium</i>	1	QL(1 EA daily); MP	<i>lisinopril & hydrochlorothiazide</i>	1	MP
<i>olmesartan medoxomil</i>	1		<i>losartan potassium & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>telmisartan</i>	1		<i>metoprolol & hydrochlorothiazide TABS</i>	NP	QL(2 EA daily); MP
<i>valsartan SOLN</i>	NP		<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	
<i>valsartan TABS</i>	1	QL(1 EA daily); MP	<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
Antiadrenergic Antihypertensives			<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)
<i>clonidine hcl TABS</i>	1	MP	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 EA daily)
<i>doxazosin mesylate</i>	1	MP	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)
<i>guanfacine hcl</i>	1	MP	<i>telmisartan-amlodipine</i>	1	
<i>methyldopa TABS</i>	1	MP	<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>prazosin hcl CAPS</i>	1	MP	<i>trandolapril-verapamil hcl</i>	NP	
<i>terazosin hcl</i>	1	MP	<i>valsartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP
Antihypertensive Combinations			Antihypertensives - Misc.		
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>	NP				
<i>atenolol & chlorthalidone</i>	1	QL(1 EA daily); MP			
<i>benazepril & hydrochlorothiazide</i>	1	QL(1 EA daily); MP			

Drug Name	Drug Tier	Requirements/Limits
VECAMYL	2	SP; PA
Vasodilators		
<i>hydralazine hcl TABS</i>	1	MP
<i>minoxidil 2.5 MG, 10 MG</i>	1	MP
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	1	
<i>trimethoprim TABS</i>	1	
Anti-infective Misc. - Combinations		
<i>methenamine-hyosc-methylene blue-sod phosph-phenyl sal TABS 81.6 MG</i>	1	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
<i>sulfamethoxazole-trimethoprim TABS</i>	1	
URETRON D/S TABS 81.6 MG	2	
Carbapenems		
<i>ertapenem sodium IJ</i>	1	SP; PA
Glycopeptides		
<i>vancomycin hcl CAPS 125 MG</i>	1	QL(4 EA daily)
<i>vancomycin hcl CAPS 250 MG</i>	1	QL(8 EA daily)
<i>vancomycin hcl SOLR PO 25 MG/ML</i>	1	QL(300 ML per fill retail)
<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)
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)
Leprostatics		

Drug Name	Drug Tier	Requirements/Limits
<i>dapsone</i>	1	
Lincosamides		
<i>clindamycin hcl 150 MG, 300 MG</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	QL(100 ML per fill retail)
Monobactams		
CAYSTON	NP	SP; PA
Oxazolidinones		
SIVEXTRO TABS	2	QL(6 EA per fill retail); PA
Urinary Anti-infectives		
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	QL(40 ML daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
COARTEM	2	QL(24 EA per fill retail)
Antimalarials		
<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	
<i>pyrimethamine</i>	1	SP; PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		

Drug Name	Drug Tier	Requirements/Limits
FIRDAPSE	2	SP; PA
<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>pyridostigmine bromide TBCR</i>	1	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<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	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
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
KEMOPLAT SOLN	2	SP; PA
LEUKERAN	2	
<i>melphalan hcl IV</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/Limits
MYLERAN TABS	2	
TEMODAR SOLR	2	SP; PA
<i>temozolomide CAPS</i>	1	SP; PA
VIVIMUSTA SOLN	2	SP; PA
YONDELIS	2	SP; PA
Antimetabolites		
<i>azacitidine SUSR</i>	1	SP; PA
<i>capecitabine</i>	1	SP; PA
<i>cladribine 10 MG/10ML</i>	1	SP; PA
<i>cytarabine SOLN</i>	1	SP; PA
<i>decitabine</i>	1	SP; PA
<i>fludarabine phosphate SOLN</i>	1	SP; PA
<i>fludarabine phosphate SOLR</i>	1	SP; PA
FOLOTYN	2	SP; PA
<i>mercaptopurine SUSP 2000 MG/100ML</i>	1	
<i>mercaptopurine TABS</i>	1	
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	1	
<i>methotrexate sodium TABS 2.5 MG</i>	1	MP
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	1	SP; PA
<i>pralatrexate</i>	1	SP; PA
TABLOID	2	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	2	
Antineoplastic - Angiogenesis Inhibitors		
AVASTIN	2	SP; PA
CYRAMZA	2	SP; PA
INLYTA	2	SP; PA
LENVIMA (10 MG DAILY DOSE)	2	SP; PA
LENVIMA (12 MG DAILY DOSE)	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LENVIMA (14 MG DAILY DOSE)	2	SP; PA	VENCLEXTA STARTING PACK TBPK	2	SP; PA
LENVIMA (18 MG DAILY DOSE)	2	SP; PA	VENCLEXTA TABS	2	SP; PA
LENVIMA (20 MG DAILY DOSE)	2	SP; PA	Antineoplastic - Cellular Immunotherapy		
LENVIMA (24 MG DAILY DOSE)	2	SP; PA	KYMRIAH	2	SP; PA
LENVIMA (4 MG DAILY DOSE)	2	SP; PA	PROVENGE	2	SP; PA
LENVIMA (8 MG DAILY DOSE)	2	SP; PA	YESCARTA	2	SP; PA
MVASI	2	SP; PA	Antineoplastic - EGFR Inhibitors		
ZALTRAP	2	SP; PA	ERBITUX	2	SP; PA
Antineoplastic - Antibodies			<i>erlotinib hcl</i>	1	SP; PA
ADCETRIS	2	SP; PA	<i>gefitinib</i>	1	SP; PA
ARZERRA	2	SP; PA	GILOTRIF	2	SP; PA
BLINCYTO	2	SP; PA	PORTRAZZA	2	SP; PA
DARZALEX	2	SP; PA	TAGRISSE	2	SP; PA
EMPLICITI	2	SP; PA	VECTIBIX 100 MG/5ML, 400 MG/20ML	2	SP; PA
GAZYVA	2	SP; PA	VIZIMPRO	2	SP; PA
KADCYLA	2	SP; PA	Antineoplastic - Hedgehog Pathway Inhibitors		
KEYTRUDA	2	SP; PA	DAURISMO	2	SP; PA
LIBTAYO	2	SP; PA	ERIVEDGE	2	SP; PA
OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	2	SP; PA	ODOMZO	2	SP; PA
POLIVY 140 MG	2	SP; PA	Antineoplastic - Hormonal and Related Agents		
POTELIGEO	2	SP; PA	<i>abiraterone acetate</i>	1	SP; PA
RITUXAN	2	SP; PA	<i>anastrozole</i>	1	MP
TECENTRIQ	2	SP; PA	<i>bicalutamide</i>	1	QL(1 EA daily)
UNITUXIN	2	SP; PA	CAMCEVI	2	SP
YERVOY	2	SP; PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	2	SP; PA
ZEVALIN Y-90	2	SP; PA	ELIGARD KIT SC 7.5 MG	2	SP; PA
Antineoplastic - Anti-HER2 Agents			EMCYT	2	SP; PA
KANJINTI 420 MG	2	SP; PA	ERLEADA 60 MG	2	SP; PA
PERJETA	2	SP; PA	EULEXIN	2	
Antineoplastic - BCL-2 Inhibitors			<i>exemestane</i>	1	
			FIRMAGON 80 MG	2	SP; PA
			FIRMAGON (240 MG DOSE)	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>letrozole</i>	1	QL(1 EA daily); MP	ELLENCE SOLN	2	SP; PA
<i>leuprolide acetate (3 month) INJ 22.5 MG</i>	1		<i>mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML</i>	1	SP; PA
LEUPROLIDE ACETATE-BUPIVACAINE	2	SP; PA	<i>valrubicin</i>	1	SP; PA
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	1	SP; PA	Antineoplastic Combinations		
LUPRON DEPOT (1-MONTH) KIT IM	2	SP; PA	HERCEPTIN HYLECTA	2	SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	2	SP; PA	LONSURF	2	SP; PA
LUPRON DEPOT (4-MONTH) IM	2	SP; PA	Antineoplastic Enzyme Inhibitors		
LUPRON DEPOT (6-MONTH) IM	2	SP; PA	ALECENSA	2	SP; PA
LUTRATE DEPOT INJ 22.5 MG	2		BELEODAQ	2	SP; PA
LYSODREN	2	SP; PA	<i>bortezomib SOLR IJ</i>	1	SP; PA
<i>megestrol acetate SUSP</i>	1		<i>bosutinib TABS 100 MG, 500 MG</i>	1	SP; PA
<i>megestrol acetate TABS</i>	1		BRAFTOVI 75 MG	2	SP; PA
<i>tamoxifen citrate TABS</i>	1	MP	CABOMETYX TABS	2	SP; PA
<i>toremifene citrate</i>	1	PA	CAPRELSA	2	SP; PA
TRELSTAR MIXJECT 3.75 MG	2	SP; PA	COMETRIQ (100 MG DAILY DOSE) KIT	2	SP; PA
TRELSTAR MIXJECT 11.25 MG, 22.5 MG	2	SP; PA	COMETRIQ (140 MG DAILY DOSE) KIT	2	SP; PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	2	SP; PA	COMETRIQ (60 MG DAILY DOSE) KIT	2	SP; PA
VABRINTY KIT SC 7.5 MG	2	SP; PA	COTELLIC	2	SP; PA
XTANDI CAPS	2	SP; PA	<i>dasatinib</i>	1	SP; PA
ZOLADEX 3.6 MG	2	SP; PA	<i>everolimus TABS</i>	1	SP; PA
ZOLADEX 10.8 MG	2	SP; PA	<i>everolimus TBSO</i>	1	SP; PA
Antineoplastic - Immunomodulators			IBRANCE CAPS 100 MG, 125 MG	2	SP; PA
<i>pomalidomide 1 MG, 2 MG, 3 MG, 4 MG</i>	1	SP; PA	ICLUSIG 15 MG, 45 MG	2	SP; PA
Antineoplastic Antibiotics			<i>imatinib mesylate TABS</i>	1	SP; PA
<i>daunorubicin hcl SOLN 50 MG/10ML</i>	1	SP; PA	IMBRUVICA CAPS 140 MG	2	SP; PA
			IMBRUVICA CAPS 70 MG	2	QL(1 EA daily); SP; PA
			IMBRUVICA TABS	2	QL(1 EA daily); SP; PA
			JAKAFI	2	SP; PA
			KYPROLIS	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>lapatinib ditosylate</i>	1	SP; PA
LORBRENA	2	SP; PA
MEKINIST TABS	2	SP; PA
MEKTOVI	2	SP; PA
<i>nilotinib hcl 50 MG, 150 MG, 200 MG</i>	1	SP; PA
NINLARO	2	SP; PA
<i>pazopanib hcl</i>	1	SP; PA
PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	2	SP; PA
<i>romidepsin SOLR</i>	1	SP; PA
RUBRACA	2	SP; PA
<i>sorafenib tosylate</i>	1	SP; PA
STIVARGA	2	SP; PA
<i>sunitinib malate</i>	1	SP; PA
TAFINLAR CAPS	2	SP; PA
TALZENNA 0.25 MG, 1 MG	2	SP; PA
<i>temsirolimus</i>	1	SP; PA
TIBSOVO	2	SP; PA
VITRAKVI CAPS	2	SP; PA
VITRAKVI SOLN	2	SP; PA
XALKORI CAPS	2	SP; PA
XOSPATA	2	SP; PA
ZELBORAF	2	SP; PA
ZOLINZA	2	SP; PA
ZYDELIG	2	SP; PA
ZYKADIA TABS	2	SP; PA
Antineoplastic Enzymes		
ONCASPAR	2	SP; PA
Antineoplastic Radiopharmaceuticals		
LUTATHERA	2	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<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
Chemotherapy Rescue/Antidote/Protective Agents		
<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
Mitotic Inhibitors		
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
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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
JEVTANA	2	SP; PA	DHIVY TABS	2	MP
PACLITAXEL PROTEIN-BOUND PART	2	SP; PA	<i>pramipexole dihydrochloride</i> TABS	1	QL(3 EA daily); AL(At least 18 yrs old)
<i>paclitaxel protein-bound particles</i>	1	SP; PA	<i>pramipexole dihydrochloride</i> TB24	1	
<i>vincristine sulfate</i>	1	SP; PA	<i>ropinirole hydrochloride</i> TABS 0.5 MG, 1 MG, 2 MG, 5 MG	1	QL(3 EA daily); MP
Oncolytic Viral Agents			<i>ropinirole hydrochloride</i> TABS 0.25 MG, 3 MG, 4 MG	1	QL(6 EA daily); MP
IMLYGIC	2	SP; PA	<i>ropinirole hydrochloride</i> TB24	1	
Topoisomerase I Inhibitors			Antiparkinson Monoamine Oxidase Inhibitors		
HYCANTIN CAPS	2	SP; PA	<i>selegiline hcl</i> CAPS	1	MP
<i>irinotecan hcl</i>	1	SP; PA	<i>selegiline hcl</i> TABS	1	MP
<i>topotecan hcl SOLN</i>	1	SP; PA	ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
<i>topotecan hcl SOLR</i>	1	SP; PA	Antimanic Agents		
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			<i>lithium</i>	1	
Antiparkinson Adjunctive Therapy			<i>lithium carbonate</i> CAPS	1	
<i>carbidopa</i>	1		<i>lithium carbonate</i> TABS	1	
Antiparkinson Anticholinergics			<i>lithium carbonate</i> TBCR	1	
<i>benztropine mesylate</i> TABS	1	MP	LITHOBID TBCR (<i>lithium carbonate</i>)	2	
<i>trihexyphenidyl hcl</i> SOLN	1	MP	Antipsychotics - Misc.		
<i>trihexyphenidyl hcl</i> TABS	1	MP	CAPLYTA	NP	
Antiparkinson Dopaminergics			<i>lurasidone hcl</i>	1	
<i>amantadine hcl</i> CAPS	1	MP	NUPLAZID CAPS	2	QL(1 EA daily); PA
<i>amantadine hcl</i> SOLN	1	MP	NUPLAZID TABS 10 MG	2	QL(1 EA daily); PA
<i>amantadine hcl</i> TABS	1	MP	VRAYLAR CAPS	2	
APOKYN SOCT	2	SP; PA	<i>ziprasidone hcl</i>	1	
<i>apomorphine hydrochloride</i> SOCT	1	SP; PA	<i>ziprasidone mesylate</i>	1	
<i>bromocriptine mesylate</i> CAPS	1		Benzisoxazoles		
<i>bromocriptine mesylate</i> TABS 2.5 MG	1		ERZOFRI 351 MG/2.25ML	NP	SP
<i>carbidopa-levodopa</i> TABS	1	MP			
<i>carbidopa-levodopa</i> TBCR	1	MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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	UZEDY SUSY 100 MG/0.28ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML	2	SP
FANAPT TITRATION PACK B	NP		Butyrophenones		
FANAPT TITRATION PACK C	NP		<i>haloperidol decanoate</i>	1	
INVEGA HAFYERA	2	1 package(s) per 180 day(s) retail; AL(At least 18 yrs old); SP	<i>haloperidol lactate CONC</i>	1	
INVEGA SUSTENNA	2	1 package(s) per 30 day(s) retail; AL(At least 18 yrs old); SP	<i>haloperidol lactate SOLN</i>	1	
INVEGA TRINZA	2	1 package(s) per 84 day(s) retail; AL(At least 18 yrs old); SP	<i>haloperidol TABS</i>	1	
<i>paliperidone</i>	1		Dibenzapines		
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>clozapine TABS</i>	0	
<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>clozapine TBDP</i>	0	
<i>risperidone SOLN</i>	1		<i>loxapine succinate</i>	1	
<i>risperidone TABS</i>	1		<i>olanzapine SOLR</i>	1	
<i>risperidone TBDP</i>	1		<i>olanzapine TABS</i>	1	AL(At least 10 yrs old)
RYKINDO SRER	NP	AL(At least 18 yrs old); SP	<i>olanzapine TBDP</i>	1	
UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	2	SP	<i>quetiapine fumarate TABS</i>	1	
			<i>quetiapine fumarate TB24</i>	1	
			ZYPREXA RELPREVV	NP	SP
			Muscarinic Agents		
			COBENFY STARTER PACK CPPK	NP	
			COBENFY CAPS	NP	
			Phenothiazines		
			<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	
			<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	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Quinolinone Derivatives			OPIPZA FILM	NP	
Thioxanthenes					
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	<i>thiothixene</i>	1	
ANTIVIRALS - Drugs to Treat Viral Infections					
Antiretrovirals					
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	<i>abacavir sulfate-lamivudine</i>	0	QL(1 EA daily)
ABILIFY MAINTENA PRSY	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>abacavir sulfate SOLN</i>	0	QL(30 ML daily)
ABILIFY MAINTENA SRER	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>abacavir sulfate TABS</i>	0	QL(2 EA daily)
ABILIFY MYCITE MAINTENANCE KIT	NP	SP	APRETUDE	0	
ABILIFY MYCITE STARTER KIT	NP	SP	APTIVUS CAPS	0	QL(4 EA daily)
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily)	<i>atazanavir sulfate CAPS</i>	0	QL(2 EA daily)
<i>aripiprazole TABS</i>	1	QL(1 EA daily)	BIKTARVY 120 MG-30 MG-15 MG	0	
<i>aripiprazole TBDP</i>	1	QL(2 EA daily)	BIKTARVY 200 MG-50 MG-25 MG	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	COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine- rilpivirine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
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>darunavir TABS</i>	0	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	DELSTRIGO	0	QL(1 EA daily)
			DESCOVY 200 MG-25 MG	0	QL(1 EA daily)
			DESCOVY 120 MG-15 MG	0	
			DOVATO	0	
			EDURANT 25 MG (<i>rilpivirine hcl</i>)	0	QL(1 EA daily)
			EDURANT PED PO 2.5 MG	0	
			<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)
			<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>efavirenz TABS</i>	0	QL(1 EA daily)	<i>lamivudine SOLN</i>	0	QL(30 ML daily)
<i>emtricitabine CAPS</i>	0	QL(1 EA daily)	<i>lamivudine TABS 150 MG</i>	0	QL(2 EA daily)
<i>emtricitabine- rilpivirine- tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)	<i>lamivudine TABS 300 MG</i>	0	QL(1 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)	<i>lamivudine-zidovudine</i>	0	QL(2 EA daily)
EMTRIVA CAPS (<i>emtricitabine</i>)	0	QL(1 EA daily)	<i>lopinavir-ritonavir SOLN</i>	0	QL(160 ML per fill retail)
EMTRIVA SOLN	0	QL(24 ML daily)	<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	0	QL(4 EA daily)
EPIVIR SOLN (<i>lamivudine</i>)	0	QL(30 ML daily)	<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	0	QL(6 EA daily)
EPIVIR TABS 300 MG (<i>lamivudine</i>)	0	QL(1 EA daily)	<i>maraviroc TABS 150 MG</i>	0	QL(2 EA daily)
EPIVIR TABS 150 MG (<i>lamivudine</i>)	0	QL(2 EA daily)	<i>maraviroc TABS 300 MG</i>	0	QL(4 EA daily)
<i>etravirine 100 MG</i>	0	QL(4 EA daily)	<i>nevirapine SUSP</i>	0	QL(40 ML daily)
<i>etravirine 200 MG</i>	0	QL(2 EA daily)	<i>nevirapine TABS</i>	0	QL(2 EA daily)
EVOTAZ	0	QL(1 EA daily)	<i>nevirapine TB24 400 MG</i>	0	QL(1 EA daily)
<i>fosamprenavir calcium TABS</i>	0	QL(4 EA daily)	NORVIR PACK	0	
GENVOYA	0	QL(1 EA daily)	NORVIR TABS (<i>ritonavir</i>)	0	QL(12 EA daily)
IDVYNZO TABS PO	0		ODEFSEY	0	
INTELENCE (<i>etravirine</i>)	0	QL(4 EA daily)	PIFELTRO	0	QL(1 EA daily)
INTELENCE 200 MG (<i>etravirine</i>)	0	QL(2 EA daily)	PREZCOBIX	0	QL(1 EA daily)
INTELENCE	0	QL(4 EA daily)	PREZCOBIX	0	
ISENTRESS CHEW 100 MG	0	QL(6 EA daily)	PREZISTA SUSP	0	QL(12 ML daily)
ISENTRESS CHEW 25 MG	0	QL(12 EA daily)	PREZISTA TABS 75 MG, 600 MG, 800 MG	0	QL(2 EA daily)
ISENTRESS PACK	0	QL(2 EA daily)	PREZISTA TABS 150 MG	0	QL(3 EA daily)
ISENTRESS TABS	0	QL(2 EA daily)	PREZISTA TABS (<i>darunavir</i>)	0	QL(2 EA daily)
KALETRA SOLN	0	QL(160 ML per fill retail)	RETROVIR CAPS (<i>zidovudine</i>)	0	QL(6 EA daily)
KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	0	QL(6 EA daily)	RETROVIR SYRP (<i>zidovudine</i>)	0	QL(60 ML daily)
KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	0	QL(4 EA daily)	REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	0	QL(2 EA daily)
			REYATAZ PACK	0	QL(6 EA daily)
			<i>rilpivirine hcl 25 MG</i>	0	QL(1 EA daily)
			<i>ritonavir TABS</i>	0	QL(12 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RUKOBIA	0		<i>zidovudine</i> TABS	0	QL(2 EA daily)
SELZENTRY SOLN	0	QL(35 ML daily)	Antiviral Combinations		
STRIBILD	0		PAXLOVID (150/100)	0	
SUNLENCA SOLN	0	SP	PAXLOVID (300/100 & 150/100)	0	
SUNLENCA TABS PO 300 MG	0	SP	PAXLOVID (300/100)	0	
SUNLENCA TBPk 300 MG	0	SP	CMV Agents		
SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)	PREVYMIS SOLN	2	SP; PA
SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)	PREVYMIS TABS	2	SP; PA
SYMTUZA	0	QL(1 EA daily)	<i>valganciclovir hcl</i> TABS	1	QL(2 EA daily)
<i>tenofovir disoproxil fumarate</i> TABS	0	QL(1 EA daily)	Hepatitis Agents		
TIVICAY PD TBSO	0		EPCLUSA PACK	NP	SP; PA
TIVICAY TABS 50 MG	0		EPCLUSA TABS	NP	SP; PA
TRIUMEQ PD TBSO	0		HARVONI PACK	NP	SP; PA
TRIUMEQ TABS	0		HARVONI TABS	NP	SP; PA
TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)	LEDIPASVIR-SOFOSBUVIR TABS	2	SP
TYBOST	0	QL(1 EA daily)	MAVYRET PACK	2	SP
VIRACEPT TABS 250 MG	0	QL(9 EA daily)	MAVYRET TABS	2	SP
VIRACEPT TABS 625 MG	0	QL(4 EA daily)	PEGASYS SOLN	2	SP; PA
VIREAD POWD	0		PEGASYS SOSY	2	SP; PA
VIREAD TABS	0	QL(1 EA daily)	<i>ribavirin (hepatitis c)</i> CAPS	1	SP; PA
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)	<i>ribavirin (hepatitis c)</i> TABS 200 MG	1	SP; PA
YEZTUGO SOLN 463.5 MG/1.5ML	0	SP	SOFOSBUVIR-VELPATASVIR TABS	2	SP
YEZTUGO TABS PO 300 MG	0	SP	SOVALDI PACK	NP	SP; PA
ZIAGEN SOLN (<i>abacavir sulfate</i>)	0	QL(30 ML daily)	SOVALDI TABS	NP	SP; PA
<i>zidovudine</i> CAPS	0	QL(6 EA daily)	VOSEVI	NP	SP; PA
<i>zidovudine</i> SYRP	0	QL(60 ML daily)	ZEPATIER	NP	SP; PA
			Herpes Agents		
			<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)

Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir TABS PO 800 MG</i>	1	QL(50 EA per 30 day(s) retail)
<i>famciclovir</i>	1	
<i>valacyclovir hcl 1 GM</i>	1	QL(42 EA per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	1	QL(2 EA daily)
Influenza Agents		
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	1	QL(10 EA per fill retail)
<i>oseltamivir phosphate CAPS 30 MG</i>	1	QL(20 EA per fill retail)
<i>oseltamivir phosphate SUSR</i>	1	QL(120 ML per fill retail)
<i>rimantadine hydrochloride TABS</i>	NP	PA
XOFLUZA (40 MG DOSE) 40 MG	NP	
XOFLUZA (80 MG DOSE) 80 MG	NP	
Misc. Antivirals		
LAGEVRIO	0	
TPOXX CAPS	2	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol 25 MG</i>	1	QL(4 EA daily); MP
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	1	QL(3 EA daily); MP
<i>carvedilol phosphate</i>	NP	QL(1 EA daily); MP
COREG CR (<i>carvedilol phosphate</i>)	NP	QL(1 EA daily); MP
<i>labetalol hcl TABS 200 MG</i>	1	QL(6 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

Drug Name	Drug Tier	Requirements/Limits
<i>labetalol hcl TABS 400 MG</i>	1	
Beta Blockers Cardio-Selective		
<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</i>	1	QL(1 EA daily); MP
<i>bisoprolol fumarate 2.5 MG</i>	1	
LOPRESSOR SOLN PO 10 MG/ML	NP	
LOPRESSOR TABS 12.5 MG (<i>metoprolol tartrate</i>)	NP	
<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily); MP
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1	QL(4 EA daily); MP
<i>metoprolol tartrate TABS 100 MG</i>	1	QL(4.5 EA daily); MP
<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	1	QL(4 EA daily); MP
<i>metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG</i>	1	
Beta Blockers Non-Selective		
<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
<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 240 MG</i>	1	MP
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily); MP
<i>timolol maleate TABS</i>	NP	MP

Drug Name	Drug Tier	Requirements/Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<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 360 MG</i>	1	MP
<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 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	
<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 60 MG</i>	1	QL(2 EA daily); MP
<i>nifedipine TB24 30 MG, 90 MG</i>	1	QL(1 EA daily); MP
<i>nimodipine CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>nisoldipine 8.5 MG, 17 MG, 34 MG</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 300 MG</i>	NP	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 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 300 MG (<i>verapamil hcl</i>)	NP	MP
VERELAN PM CP24 100 MG, 200 MG (<i>verapamil hcl</i>)	NP	QL(2 EA daily); 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
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1	MP
<i>digoxin TABS 125 MCG, 250 MCG</i>	1	MP
LANOXIN TABS 125 MCG, 250 MCG (<i>digoxin</i>)	2	MP
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		

Drug Name	Drug Tier	Requirements/Limits
<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
<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

Drug Name	Drug Tier	Requirements/Limits
<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
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
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		
CEFACTOR ER TB12	NP	
<i>cefactor CAPS</i>	1	
<i>cefactor SUSR 250 MG/5ML</i>	1	
<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		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefдинир CAPS</i>	1	QL(20 EA per fill retail)	<i>ethynodiol diacet & eth estrad</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>cefдинир SUSR</i>	1	QL(60 ML per fill retail)			
<i>cefіxime CAPS</i>	1				
<i>cefіxime SUSR</i>	1				
<i>cefподoxime proxetil SUSR</i>	1				
<i>cefподoxime 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	<i>levonorgestrel & eth estradiol TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
CONTRACEPTIVES - Drugs to Prevent Pregnancy					
Combination Contraceptives - Oral					
<i>desogestrel & ethinyl estradiol</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>desogestrel-ethinyl estradiol (biphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>levonorgestrel-ethinyl estradiol (continuous)</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	LO LOESTRIN FE TABS	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>drosiprenone-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>drosiprenone-ethinyl estradiol-levomefolate calcium</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethin acet & estrad-fe CAPS</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>norethin acet & estrad-fe CHEW</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norgestimate-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG</i>	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norethin acet & 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>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norethindrone & 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	TYBLUME CHEW	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norethindrone & eth estradiol 35 MCG-1 MG</i>	0		Combination Contraceptives - Transdermal		
<i>norethindrone & ethinyl estradiol-fe</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norelgestromin-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>norethindrone acet & eth estra TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	Combination Contraceptives - Vaginal		
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>etonogestrel-ethinyl estradiol</i>	0	PV
<i>norethindrone-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	Copper Contraceptives - IUD		
			MIUDELLA INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
			PARAGARD INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV

Drug Name	Drug Tier	Requirements/Limits
Emergency Contraceptives		
ELLA	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
Progestin Contraceptives - Implants		
NEXPLANON	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
Progestin Contraceptives - IUD		
KYLEENA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV

Drug Name	Drug Tier	Requirements/Limits
LILETTA (52 MG)	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
MIRENA (52 MG)	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
SKYLA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
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)
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	2	QL(150 ML per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1	QL(150 ML per 30 day(s) retail)
<i>dexamethasone ELIX</i>	1	
<i>dexamethasone SOLN</i>	1	
<i>dexamethasone TABS 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 4 MG, 6 MG</i>	1	
<i>hydrocortisone TABS</i>	1	
<i>methylprednisolone TABS 4 MG, 8 MG</i>	1	
<i>methylprednisolone TBPK</i>	1	
<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	1	QL(150 ML per fill retail)
<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 SOLN</i>	1	
PREDNISON INTENSOL CONC	2	
<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	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 100 MG</i>	1	AL(At least 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<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 & phenyleph ELIX</i>	1	QL(120 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>brompheniramine & pseudoeph ELIX</i>	1	QL(120 ML per fill retail)
<i>brompheniramine & 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)
<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 & 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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>promethazine w/codeine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 6 yrs old)	BENZOYL PEROXIDE LOTN 5 %, 10 %	2	
<i>pseudoephedrine-ibuprofen TABS</i>	1		<i>clindamycin phosphate (topical) GEL</i>	1	QL(75 ML per fill retail)
Expectorants			<i>clindamycin phosphate (topical) LOTN</i>	1	QL(60 ML per fill retail)
<i>potassium iodide (expectorant) SOLN</i>	1		<i>clindamycin phosphate (topical) SOLN</i>	1	
Misc. Respiratory Inhalants			<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	
<i>sodium chloride (inhalant) AERS</i>	1	QL(240 ML per fill retail)	<i>clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 %</i>	1	
<i>sodium chloride (inhalant) NEBU 0.9 %, 7 %</i>	1		<i>clindamycin phosphate-tretinoin</i>	NP	
Mucolytics			DIFFERIN CREA (<i>adapalene</i>)	NP	
<i>acetylcysteine SOLN</i>	1		DIFFERIN GEL 0.3 % (<i>adapalene</i>)	NP	
DERMATOLOGICALS - Drugs to Treat Skin Conditions					
Acne Products					
ABSORICA 10 MG, 20 MG, 40 MG (<i>isotretinoin</i>)	NP	QL(2 EA daily); AL(At least 12 yrs old)	DIFFERIN LOTN	NP	
<i>adapalene-benzoyl peroxide GEL</i>	1		EPIDUO FORTE GEL (<i>adapalene-benzoyl peroxide</i>)	NP	
<i>adapalene CREA</i>	1		<i>erythromycin (acne aid) GEL</i>	1	QL(60 GM per fill retail)
<i>adapalene GEL</i>	1		<i>erythromycin (acne aid) SOLN</i>	1	
<i>adapalene GEL</i>	1	RX/OTC	<i>isotretinoin 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily); AL(At least 12 yrs old)
ADAPALENE SOLN	2		RETIN-A MICRO (<i>tretinoin microsphere</i>)	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)
AKLIEF	NP		RETIN-A MICRO PUMP (<i>tretinoin microsphere</i>)	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)
ATRALIN GEL (<i>tretinoin</i>)	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>sulfacetamide sodium (acne)</i>	1	QL(120 ML per fill retail)
BENZAC AC WASH LIQD 5 %	2	RX/OTC	<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	1	QL(60 GM per fill retail)
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	1				
<i>benzoyl peroxide LIQD 5 %, 10 %</i>	1				
<i>benzoyl peroxide LOTN 5 %, 10 %</i>	1				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	1	QL(30 GM per fill retail)	<i>clotrimazole (topical) CREA</i>	1	QL(60 GM per fill retail); RX/OTC
<i>tretinoin microsphere</i>	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>clotrimazole (topical) SOLN</i>	1	QL(60 ML per fill retail); RX/OTC
<i>tretinoin CREA 0.05 %, 0.1 %</i>	1	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>clotrimazole w/ betamethasone CREA</i>	1	QL(45 GM per fill retail)
<i>tretinoin CREA 0.025 %</i>	1	QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>clotrimazole w/ betamethasone LOTN</i>	1	QL(30 ML per fill retail)
<i>tretinoin GEL 0.05 %</i>	NP	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>econazole nitrate CREA</i>	1	QL(85 GM per fill retail)
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1	1 package(s) per fill retail; AL(Up to 35 yrs old)	<i>ketoconazole (topical) CREA</i>	1	QL(60 GM per fill retail)
<i>ZIANA (clindamycin phosphate-tretinoin)</i>	NP		<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(120 ML per fill retail)
Antibiotics - Topical			<i>luliconazole</i>	NP	PA
<i>bacitracin (topical) OINT</i>	1	QL(453.9 EA per fill retail)	<i>LUZU (luliconazole)</i>	NP	PA
<i>bacitracin zinc OINT</i>	1	QL(453.6 EA per fill retail)	<i>miconazole nitrate (topical) CREA</i>	1	QL(92 GM per fill retail)
<i>gentamicin sulfate (topical) CREA</i>	1	QL(30 GM per fill retail)	<i>NIZORAL SHAM</i>	2	QL(200 ML per fill retail)
<i>gentamicin sulfate (topical) OINT</i>	1	QL(30 GM per fill retail)	<i>nystatin (topical) CREA</i>	1	QL(30 GM per fill retail)
<i>mupirocin calcium (topical)</i>	1		<i>nystatin (topical) OINT</i>	1	QL(30 GM per fill retail)
<i>mupirocin OINT</i>	1	QL(30 GM per fill retail)	<i>nystatin (topical) POWD EX</i>	1	QL(60 GM per fill retail)
<i>neomycin-bacitracin-polymyxin OINT</i>	1	QL(56 EA per fill retail)	<i>nystatin-triamcinolone CREA</i>	1	QL(60 GM per fill retail)
<i>neomycin-polymyxin w/ pramoxine</i>	1	QL(28.3 GM per fill retail)	<i>nystatin-triamcinolone OINT</i>	1	QL(60 GM per fill retail)
Antifungals - Topical			<i>oxiconazole nitrate CREA</i>	NP	PA
<i>ciclopirox SOLN</i>	1	PA	<i>OXISTAT CREA (oxiconazole nitrate)</i>	NP	PA
			<i>terbinafine hcl (topical) CREA</i>	1	QL(42 GM per fill retail)
			<i>tolnaftate CREA</i>	1	QL(30 GM per fill retail)
			Antihistamines-Topical		
			<i>ITCH RELIEF CREA</i>	2	
			Anti-inflammatory Agents - Topical		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diclofenac sodium (topical) GEL EX</i>	1	QL(6.68 GM daily); RX/OTC	COSENTYX UNOREADY SOAJ	NP	SP; PA
Antineoplastic or Premalignant Lesion Agents - Topical			COSENTYX SOLN	NP	SP; PA
<i>bexarotene (topical)</i>	1	SP; PA	COSENTYX SOSY	NP	SP; PA
CARAC CREA (<i>fluorouracil (topical)</i>)	2	QL(30 GM per fill retail)	IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
<i>fluorouracil (topical) CREA 0.5 %</i>	1	QL(30 GM per fill retail)	OTULFI SOLN SC 45 MG/0.5ML	NP	SP; PA
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(40 GM per fill retail)	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
<i>fluorouracil (topical) SOLN</i>	1	QL(10 ML per fill retail)	PYZCHIVA SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
LEVULAN KERASTICK SOLR	2	SP; PA	PYZCHIVA 45 MG/0.5ML, 90 MG/ML	2	SP; PA
Antipruritics - Topical			PYZCHIVA SC 45 MG/0.5ML	2	SP; PA
<i>camphor & menthol LOTN</i>	1	QL(59 ML per fill retail)	SELARSDI SOLN SC 45 MG/0.5ML	NP	SP; PA
Antipsoriatics			SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
BIMZELX SOAJ 320 MG/2ML	NP	SP; PA	SKYRIZI PEN SOAJ	NP	SP; PA
BIMZELX SOAJ 160 MG/ML	NP	SP; PA	SKYRIZI SOSY	NP	SP; PA
BIMZELX SOSY 320 MG/2ML	NP	SP; PA	SORILUX FOAM	NP	
BIMZELX SOSY 160 MG/ML	NP	SP; PA	SOTYKTU	NP	SP; PA
<i>calcipotriene CREA</i>	1	QL(60 GM per fill retail)	SPEVIGO SOLN	NP	SP; PA
CALCIPOTRIENE FOAM	NP		SPEVIGO SOSY	NP	SP; PA
<i>calcipotriene OINT</i>	NP		STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	2	SP; PA
<i>calcipotriene SOLN</i>	NP	QL(60 ML per fill retail)	STEQEYMA	NP	SP; PA
COSENTYX (300 MG DOSE) SOSY	NP	SP; PA	STEQEYMA SC	NP	SP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP; PA	TALTZ SOSY	2	SP; PA
COSENTYX SENSOREADY PEN SOAJ	NP	SP; PA	<i>tazarotene CREA</i>	1	QL(60 GM per fill retail); AL(Up to 21 yrs old)
			USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
			USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
USTEKINUMAB-TTWE SC	NP	SP; PA	<i>betamethasone dipropionate (topical) LOTN</i>	1	
USTEKINUMAB-TTWE	NP	SP; PA	<i>betamethasone dipropionate (topical) OINT</i>	1	
VTAMA	NP	PA	<i>betamethasone dipropionate augmented CREA</i>	NP	QL(50 GM per fill retail)
YESINTEK SOLN 45 MG/0.5ML	NP	SP; PA	<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP	
YESINTEK SOSY	NP	SP; PA	<i>betamethasone dipropionate augmented LOTN</i>	1	
Antiseborrheic Products			<i>betamethasone dipropionate augmented OINT</i>	NP	
<i>selenium sulfide LOTN 1 %</i>	1	QL(240 ML per fill retail)	<i>betamethasone valerate CREA</i>	NP	QL(45 GM per fill retail)
<i>selenium sulfide LOTN 2.5 %</i>	1	QL(120 ML per fill retail)	<i>betamethasone valerate FOAM</i>	NP	
<i>selenium sulfide SHAM 1 %</i>	1	QL(240 ML per fill retail)	<i>betamethasone valerate LOTN</i>	NP	QL(60 ML per fill retail)
<i>sulfacetamide sodium LIQD</i>	1	QL(480 ML per fill retail)	<i>betamethasone valerate OINT</i>	NP	QL(45 GM per fill retail)
Antivirals - Topical			<i>calcipotriene-betamethasone dipropionate OINT</i>	1	
<i>acyclovir topical CREA</i>	1	QL(1 GM daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP	
<i>acyclovir topical OINT</i>	1		<i>clobetasol propionate emollient base 0.05 %</i>	1	QL(60 GM per fill retail)
DENAVIR (<i>penciclovir</i>)	2		<i>clobetasol propionate emulsion</i>	1	
<i>penciclovir</i>	NP		<i>clobetasol propionate CREA 0.05 %</i>	1	QL(60 GM per fill retail)
ZOVIRAX CREA (<i>acyclovir topical</i>)	NP	QL(1 GM daily)	<i>clobetasol propionate FOAM</i>	1	
ZOVIRAX OINT (<i>acyclovir topical</i>)	2		<i>clobetasol propionate GEL 0.05 %</i>	1	QL(60 GM per fill retail)
Burn Products			<i>clobetasol propionate LIQD</i>	1	
<i>silver sulfadiazine</i>	1	QL(85 GM per fill retail)			
Corticosteroids - Topical					
<i>alclometasone dipropionate CREA</i>	1				
<i>alclometasone dipropionate OINT</i>	1				
<i>amcinonide CREA</i>	NP				
<i>amcinonide OINT</i>	NP				
<i>betamethasone dipropionate (topical) CREA</i>	NP	1 package(s) per 30 day(s) retail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate LOTN</i>	1		<i>fluocinonide CREA 0.05 %</i>	1	QL(60 GM per fill retail)
<i>clobetasol propionate OINT 0.05 %</i>	1	QL(60 GM per fill retail)	<i>fluocinonide CREA 0.1 %</i>	1	
<i>clobetasol propionate SHAM</i>	1		<i>fluocinonide GEL</i>	1	QL(60 GM per fill retail)
<i>clobetasol propionate SOLN 0.05 %</i>	1	QL(50 ML per fill retail)	<i>fluocinonide OINT</i>	1	QL(60 GM per fill retail)
<i>clocortolone pivalate</i>	NP		<i>fluocinonide SOLN</i>	1	QL(60 ML per fill retail)
CLODERM (<i>clocortolone pivalate</i>)	NP		<i>flurandrenolide CREA</i>	1	
<i>desonide CREA</i>	1	1 package(s) per fill retail	<i>flurandrenolide LOTN</i>	NP	
<i>desonide LOTN</i>	1		<i>fluticasone propionate CREA 0.05 %</i>	1	QL(60 GM per fill retail)
<i>desonide OINT</i>	1	1 package(s) per fill retail	<i>fluticasone propionate LOTN</i>	NP	
<i>desoximetasone CREA 0.05 %</i>	NP	QL(60 GM per fill retail)	<i>fluticasone propionate OINT</i>	1	QL(60 GM per fill retail)
<i>desoximetasone CREA 0.25 %</i>	NP		<i>halcinonide CREA</i>	NP	
<i>desoximetasone GEL</i>	NP		<i>halobetasol propionate CREA</i>	1	
<i>desoximetasone LIQD</i>	NP		<i>halobetasol propionate OINT</i>	1	
<i>desoximetasone OINT</i>	1		HALOG CREA (<i>halcinonide</i>)	NP	
<i>diflorasone diacetate CREA</i>	NP	QL(60 GM per fill retail)	HYDRAVEX GEL 2 %	NP	
<i>diflorasone diacetate OINT</i>	NP	QL(60 GM per fill retail)	<i>hydrocortisone (topical) CREA 2.5 %</i>	1	QL(453.6 GM per fill retail)
DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	NP		<i>hydrocortisone (topical) CREA 1 %</i>	1	QL(85.2 GM per fill retail); RX/OTC
EPIFOAM FOAM	2		<i>hydrocortisone (topical) CREA 0.5 %</i>	1	QL(30 GM per fill retail)
<i>fluocinolone acetonide CREA</i>	NP		<i>hydrocortisone (topical) LOTN 1 %</i>	1	QL(99 GM per fill retail)
<i>fluocinolone acetonide OIL</i>	1		<i>hydrocortisone (topical) LOTN 2.5 %</i>	1	QL(59 ML per fill retail)
<i>fluocinolone acetonide OINT</i>	NP		<i>hydrocortisone (topical) OINT 0.5 %</i>	1	
<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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone (topical) SOLN 1 %</i>	1		TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	NP	
<i>hydrocortisone acetate (topical) CREA 2.5 %</i>	1		TOPICORT SPRAY LIQD (<i>desoximetasone</i>)	NP	
<i>hydrocortisone acetate (topical) OINT</i>	1		TOPICORT CREA 0.05 % (<i>desoximetasone</i>)	NP	QL(60 GM per fill retail)
HYDROCORTISONE ACETATE CREA	2		TOPICORT CREA 0.25 % (<i>desoximetasone</i>)	NP	
<i>hydrocortisone butyrate CREA</i>	NP		TOPICORT GEL (<i>desoximetasone</i>)	NP	
<i>hydrocortisone butyrate LOTN</i>	NP		<i>triamcinolone acetonide (topical) AERS</i>	NP	
<i>hydrocortisone butyrate OINT</i>	NP		<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1	QL(160 GM per fill retail)
<i>hydrocortisone butyrate SOLN</i>	NP	QL(60 ML per fill retail)	<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1	QL(85.2 GM per fill retail)
<i>hydrocortisone valerate CREA</i>	1		<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(15 GM per fill retail)
<i>hydrocortisone valerate OINT</i>	NP		<i>triamcinolone acetonide (topical) LOTN</i>	NP	QL(60 ML per fill retail)
HYDROCORTISONE GEL 2 %	NP		<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1	QL(15 GM per fill retail)
HYDROXATE GEL	NP		<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	1	
HYDROXYM GEL	NP		<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1	QL(80 GM per fill retail)
KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	NP		<i>triamcinolone acetonide-dimethicone-silicone</i>	1	
LOCOID LIPOCREAM	NP		TRIVIX 0.1 %-5 %	2	
LOCOID LOTN (<i>hydrocortisone butyrate</i>)	NP		Eczema Agents		
<i>mometasone furoate CREA</i>	1	QL(50 GM per fill retail)	ADBRY SOAJ	2	SP; PA
<i>mometasone furoate OINT</i>	1	QL(45 GM per fill retail)	ADBRY SOSY	2	SP; PA
<i>mometasone furoate SOLN</i>	1	QL(60 ML per fill retail)	ANZUPGO CREA EX 20 MG/GM	NP	PA
SANADERMRX SKIN REPAIR 0.1 %-5 %	2		CIBINQO	NP	SP; PA
SYNALAR CREA (<i>fluocinolone acetonide</i>)	NP		DUPIXENT SOAJ	2	SP; PA
SYNALAR OINT (<i>fluocinolone acetonide</i>)	NP		DUPIXENT SOSY 300 MG/2ML	2	SP; PA

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

Drug Name	Drug Tier	Requirements/Limits
<i>pimecrolimus</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT 0.03 %</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT 0.1 %</i>	1	PA
Keratolytic/Antimitotic/Vesicant Agents		
DERMACINRX SALICYLIC ACID GEL 6 %	2	QL(40 GM per fill retail)
<i>podofilox SOLN</i>	1	QL(4 ML per fill retail)
<i>salicylic acid GEL 6 %</i>	1	QL(40 GM per fill retail)
Local Anesthetics - Topical		
<i>capsaicin CREA 0.025 %, 0.075 %</i>	1	QL(60 GM per fill retail)
<i>capsaicin CREA 0.1 %</i>	1	QL(56.6 GM per fill retail)
<i>capsaicin CREA 0.035 %</i>	1	QL(120 GM per fill retail; 120 per fill mail)
CASTIVA WARMING LOTN	2	QL(113 GM per fill retail)
COLLAVERA GEL 2 %	2	QL(85 GM per fill retail); RX/OTC
DERMACINRX LIDOCAINE CREA 3 %	2	QL(85 GM per fill retail); RX/OTC
<i>dibucaine</i>	1	QL(56.7 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>lidocaine hcl CREA 3 %</i>	1	QL(85 GM per fill retail); RX/OTC
<i>lidocaine hcl GEL 2 %</i>	1	QL(85 GM per fill retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lidocaine hcl PRSY</i>	1	QL(85 ML per fill retail)	<i>malathion</i>	1	QL(59 ML per fill retail); 2 max fill(s) per 30 day(s) retail
<i>lidocaine CREA 4 %</i>	1	QL(76.5 GM per fill 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)
LIDOCAINE CREA	2	QL(85 GM per fill retail)	NIX LICE KILLING SPRAY LIQD XX	2	
<i>lidocaine-prilocaine CREA</i>	1	QL(5800 GM per fill retail)	<i>permethrin AERO</i>	1	
LIDOMAX GEL 2 %	2	QL(85 GM per fill retail); RX/OTC	<i>permethrin CREA</i>	1	QL(60 GM per fill retail)
PROXIVOL GEL 2 %	2	QL(85 GM per fill retail); RX/OTC	PERMETHRIN CREA 5 % (<i>permethrin</i>)	NP	QL(60 GM per fill retail)
Misc. Topical			<i>permethrin LIQD EX</i>	1	
<i>lanolin (topical) CREA</i>	1		<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	1	
<i>zinc oxide (topical) OINT 20 %</i>	1	QL(60 GM per fill retail)	<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	1	
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %	2	
ZORYVE CREA EX	NP	PA	SCHOOLTIME SHAMPOO SHAM	2	
ZORYVE FOAM EX	NP		<i>spinosad</i>	1	QL(120 ML per fill retail); 2 max fill(s) per 30 day(s) retail; AL(At least 2 yrs old)
Rosacea Agents			STOP LICE STEP 3 AERO 0.5 %	2	
<i>metronidazole (topical) CREA</i>	1	QL(45 GM per fill retail)	STOP LICE AERO 0.5 %	2	
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(45 GM per fill retail)	Tar Products		
<i>metronidazole (topical) LOTN</i>	1		<i>coal tar extract SHAM 0.5 %</i>	1	
Scabicides & Pediculicides			Wound Care Products		
BEDDING SPRAY LICE TREATMENT AERO 0.5 %	2		APLIGRAF DISK	2	PA
CVS LICE-BEDBUG-MITE AERO 0.5 %	2				
ELIMITE CREA (<i>permethrin</i>)	NP	QL(60 GM per fill retail)			
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	Drug Name	Drug Tier	Requirements/Limits
DIAGNOSTIC PRODUCTS			COVID-19 AT-HOME TEST KIT	0	
Diagnostic Drugs			COVID-19 OTC ANTIGEN 1-PACK KIT	0	
<i>cosyntropin SOLR</i>	1	SP; PA	COVID-19 OTC ANTIGEN 2-PACK KIT	0	
THYROGEN 0.9 MG	2	SP; PA	CVS COVID-19 AT HOME TEST KIT KIT	0	
Diagnostic Tests			DIATRUST COVID-19 HOME TEST KIT	0	
2SAN COVID-19 RAPID SELF TEST KIT	0		ELLUME COVID-19 HOME 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	FASTEP COVID-19 ANTIGEN TEST KIT	0	
ACCUA SARS-COV-2	0		FLOWFLEX COVID-19 AG HOME TEST KIT	0	
ADVIN COVID-19 ANTIGEN TEST KIT	0		GENABIO COVID-19 RAPID TEST KIT	0	
BD VERITOR SYSTEM SARS-COV-2	0		GOTOKNOW COVID-19 ANTIGEN RAPI KIT	0	
BINAXNOW COVID-19 AG CARD	0		ID NOW COVID-19	0	
BINAXNOW COVID-19 AG HOME TEST KIT	0		ID NOW COVID-19 2.0 CONTROL	0	RX/OTC
BINAXNOW COVID-19 ANTIGEN SELF KIT	0		ID NOW COVID-19 2.0 TEST	0	
CARESTART COVID-19 HOME TEST KIT	0		ID NOW COVID-19 CONTROL	0	RX/OTC
CHEMSTRIP K STRP	2		IHEALTH COVID-19 RAPID TEST KIT	0	
CLEARDETECT COVID-19 AG HOME KIT	0		INDICAID COVID-19 RAPID TEST KIT	0	
CLINITEST RAPID COVID-19 TEST KIT	0		INTELISWAB COVID-19 RAPID TEST KIT	0	
COBAS LIAT SARS-COV-2 ASSAY	0		KETONE TEST STRP	2	
COBAS LIAT SARS-COV-2 CONTROL	0	RX/OTC	KETOSTIX STRP	2	
COVID-19 AT HOME ANTIGEN TEST KIT	0		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
LYRA SARS-COV-2 ASSAY	0	
OHC COVID-19 ANTIGEN SELF TEST KIT	0	
ON/GO COVID-19 ANTIGEN TEST KIT	0	
ON/GO ONE COVID-19 HOME TEST KIT	0	
PILOT COVID-19 AT-HOME TEST KIT	0	
QUICKVUE AT-HOME COVID-19 TEST KIT	0	
QUICKVUE SARS ANTIGEN TEST	0	
RAPID RESPONSE COVID-19	0	
RELION KETONE TEST STRP	2	
SOFIA SARS ANTIGEN FIA	0	
SOFIA2 SARS ANTIGEN FIA	0	
SPEEDY SWAB COVID-19 ANTIGEN KIT	0	
XPERT XPRESS SARS-COV-2	0	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	
SUCRAID	2	SP; PA

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 & hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	1	MP
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	QL(1 EA daily); MP
<i>triamterene & 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
SOAANZ TABS 20 MG	2	MP
<i>torseamide TABS 5 MG, 10 MG, 100 MG</i>	1	QL(1 EA daily); MP
<i>torseamide TABS 20 MG</i>	1	MP
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>spironolactone TABS</i>	1	MP	PAMIDRONATE DISODIUM SOLN	2	SP; PA
Thiazides and Thiazide-Like Diuretics			PROLIA SOSY	2	SP; PA
<i>chlorthalidone 25 MG, 50 MG</i>	1	MP	<i>risedronate sodium TABS 150 MG</i>	NP	
<i>hydrochlorothiazide CAPS</i>	1	MP	<i>risedronate sodium TABS 35 MG</i>	NP	4 per 28 days; QL(4 EA per 28 day(s) retail)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1	MP	<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	1	MP	<i>risedronate sodium TBEC</i>	NP	
<i>metolazone</i>	1	MP	<i>teriparatide SOPN</i>	1	PA
ENDOCRINE AND METABOLIC AGENTS - MISC.			TERIPARATIDE SOPN	2	PA
- Drugs to Treat Bone Disease and Regulate Hormones			XGEVA SOLN	2	SP; PA
Bone Density Regulators			<i>zoledronic acid CONC</i>	1	SP; PA
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	NP	4 per 28 days; QL(4 EA per 28 day(s) retail)	<i>zoledronic acid SOLN 5 MG/100ML</i>	1	SP; PA
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	NP		ZOLEDRONIC ACID SOLN	2	SP; PA
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily); MP	Corticotropin		
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP	ACTHAR GEL	2	SP; PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	QL(0.15 EA daily); MP	CORTROPHIN GEL	2	SP; PA
ATELVIA TBEC (<i>risedronate sodium</i>)	NP		Fertility Regulators		
BONSITY SOPN 560 MCG/2.24ML	2	PA	CHORIONIC GONADOTROPIN IM	2	PA
<i>calcitonin (salmon) NA</i>	1	QL(4 ML per 30 day(s) retail)	NOVAREL IM 5000 UNIT	2	PA
<i>calcitonin (salmon) IJ</i>	1	QL(2 ML per 30 day(s) retail)	PREGNYL IM	2	PA
EVENITY	2	SP; PA	GnRH/LHRH Antagonists		
<i>ibandronate sodium SOLN</i>	1	SP; PA	ORLISSA	2	SP; PA
<i>ibandronate sodium TABS</i>	1	PA	Growth Hormone Receptor Antagonists		
NATPARA	2	PA	SOMAVERT	2	SP; PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	1	SP; PA	Growth Hormones		
			GENOTROPIN MINIQUICK PRSY	2	SP; PA
			GENOTROPIN CART SC	2	SP; PA
			NGENLA	NP	SP; PA
			NORDITROPIN FLEXPRO SOPN	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OMNITROPE SOCT	NP	SP; PA	IMCIVREE SOLN SC	NP	SP; PA
SKYTROFA	NP	SP; PA	KANUMA	2	SP; PA
SOGROYA	2	SP; PA	<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	1	QL(30 ML daily)
Hormone Receptor Modulators			<i>levocarnitine (metabolic modifiers) TABS</i>	1	QL(3 EA daily)
<i>raloxifene hcl</i>	1	QL(1 EA daily)	LUMIZYME	2	SP; PA
Insulin-Like Growth Factors (Somatomedins)			MYALEPT	2	SP; PA
INCRELEX	2	SP; PA	NAGLAZYME	2	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>nitisinone CAPS</i>	1	SP; PA
FENSOLVI (6 MONTH) SC	2	SP; PA	OLPRUVA (2 GM DOSE) THPK	NP	SP
LUPRON DEPOT-PED (1-MONTH)	2	SP; PA	OLPRUVA (3 GM DOSE) THPK	NP	SP
LUPRON DEPOT-PED (3-MONTH)	2	SP; PA	OLPRUVA (4 GM DOSE) THPK	NP	SP
LUPRON DEPOT-PED (6-MONTH) IM	2	SP; PA	OLPRUVA (5 GM DOSE) THPK	NP	SP
SUPPRELIN LA	NP	SP; PA	OLPRUVA (6 GM DOSE) THPK	NP	SP
SYNAREL	2	SP; PA	OLPRUVA (6.67 GM DOSE) THPK	NP	SP
Metabolic Modifiers			ORFADIN SUSP	2	SP; PA
ALDURAZYME	2	SP; PA	PALYNZIQ	2	SP; PA
<i>betaine</i>	1	SP; PA	<i>paricalcitol SOLN</i>	1	SP; PA
BUPHENYL POWD (<i>sodium phenylbutyrate</i>)	2	SP; PA	PARSABIV	2	SP; PA
BUPHENYL TABS (<i>sodium phenylbutyrate</i>)	2	SP; PA	PHEBURANE PLLT	2	PA
<i>calcitriol CAPS</i>	1		RAVICTI 1.1 GM/ML (<i>glycerol phenylbutyrate</i>)	2	SP; PA
CARBAGLU (<i>carglumic acid</i>)	2	SP; PA	REVCovi	2	SP; PA
<i>carglumic acid</i>	NP	SP; PA	<i>sapropterin dihydrochloride PACK</i>	1	SP; PA
<i>cinacalcet hcl</i>	1	SP; PA	<i>sapropterin dihydrochloride TABS</i>	1	SP; PA
CRYSVITA	2	SP; PA	<i>sodium phenylbutyrate POWD</i>	NP	SP; PA
ELAPRASE	2	SP; PA	<i>sodium phenylbutyrate TABS</i>	NP	SP; PA
FABRAZYME	2	SP; PA	STRENSIQ	2	SP; PA
GALAFOLD	2	QL(0.5 EA daily); SP; PA			
<i>glycerol phenylbutyrate 1.1 GM/ML</i>	NP	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
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
COMBIPATCH PTTW	2	QL(8 EA per 28 day(s) retail)
<i>estradiol & 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)
Estrogens		
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)
FLUOROQUINOLONONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
<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)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Antiflatulents		
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 EA per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Bile Acid Synthesis Disorder Agents			OMVOH (300 MG DOSE) SOSY	NP	SP; PA
CHOLBAM	2	QL(5 EA daily); SP; PA	OMVOH SOAJ	NP	SP; PA
CTEXLI TABS PO 250 MG	2	SP; PA	OMVOH SOLN	NP	SP; PA
Farnesoid X Receptor (FXR) Agonists			OMVOH SOSY	NP	SP; PA
OALIVA	2	SP; PA	SELARSDI SOLN IV 130 MG/26ML	NP	SP
Gallstone Solubilizing Agents			SKYRIZI SOCT	NP	SP; PA
<i>chenodiol</i>	1	SP; PA	SKYRIZI SOLN	NP	SP; PA
<i>ursodiol CAPS</i>	1	QL(3 EA daily); MP	STARJEMZA SOLN IV 130 MG/26ML	2	SP; PA
<i>ursodiol TABS 250 MG</i>	1	QL(7 EA daily); MP	<i>sulfasalazine TABS</i>	1	MP
Gastrointestinal Stimulants			<i>sulfasalazine TBEC</i>	1	MP
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1		TREMFYA PEN SOAJ SC 200 MG/2ML	NP	SP; PA
<i>metoclopramide hcl TABS 10 MG</i>	1		TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	SP; PA
<i>metoclopramide hcl TABS 5 MG</i>	1	MP	TREMFYA SOLN IV	NP	SP; PA
Inflammatory Bowel Agents			TREMFYA SOSY SC 200 MG/2ML	NP	SP; PA
<i>balsalazide disodium CAPS</i>	1	QL(9 EA daily)	VELSIPITY	NP	SP; PA
CANASA SUPP (<i>mesalamine</i>)	NP		ZYMFENTRA (1 PEN) AJKT	NP	SP; PA
ENTYVIO PEN SOAJ	NP	SP; PA	ZYMFENTRA (2 PEN) AJKT	NP	SP; PA
IMULDOSA SOLN IV 130 MG/26ML	NP	SP; PA	ZYMFENTRA (2 SYRINGE) PSKT	NP	SP; PA
LIALDA TBEC (<i>mesalamine</i>)	NP		Intestinal Acidifiers		
<i>mesalamine w/ cleanser</i>	1		<i>lactulose (encephalopathy)</i>	1	
<i>mesalamine ENEM</i>	1	QL(60 ML daily)	Irritable Bowel Syndrome (IBS) Agents		
<i>mesalamine SUPP</i>	1		<i>alose tron hcl</i>	NP	PA
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)	IBSRELA	NP	PA
<i>mesalamine TBEC 1.2 GM</i>	1		LINZESS	2	PA
OMVOH (300 MG DOSE) SOAJ	NP	SP; PA	LOTRONEX (<i>alose tron 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>	2	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
<i>ferric citrate</i>	1	
FOSRENOL CHEW (<i>lanthanum carbonate</i>)	2	
<i>lanthanum carbonate CHEW</i>	NP	
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
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
CYTRA K CRYSTALS PACK 1002 MG-3300 MG	2	
<i>potassium citrate (alkalinizer) TBCR</i>	1	
<i>sodium citrate & 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		

Drug Name	Drug Tier	Requirements/Limits
<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
Interstitial Cystitis Agents		
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	
PHENAZOPYRIDINE HCL TABS 100 MG, 200 MG	2	
Urinary Stone Agents		
<i>tiopronin TABS</i>	1	SP; PA
Vesicoureteral Reflux (VUR) Agents		
DEFLUX	2	SP; PA
GOUT AGENTS - Drugs to Treat Gout		
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

Drug Name	Drug Tier	Requirements/Limits
KRYSTEXXA	2	SP; PA
Uricosurics		
<i>probenecid</i>	1	MP
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
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
ALTUVIIIO 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

Drug Name	Drug Tier	Requirements/Limits
IXINITY SOLR	2	SP; PA
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	2	SP; PA
KCENTRA	2	SP; PA
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		

Drug Name	Drug Tier	Requirements/Limits
<i>pentoxifylline</i>	1	MP
Human Protein C		
CEPROTIN	2	SP; PA
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>)	NP	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
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
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

Drug Name	Drug Tier	Requirements/Limits
DROXIA CAPS	2	
LYFGENIA	NP	SP; PA
SIKLOS TABS	2	PA
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1	
Folic Acid/Folates		
<i>folic acid TABS 400 MCG, 800 MCG</i>	1	QL(1 EA daily)
<i>folic acid TABS 1 MG</i>	1	MP; RX/OTC
Hematopoietic Gene Therapy		
ZYNTEGLO	2	SP; PA
Hematopoietic Growth Factors		
DOPTELET	2	SP; PA
<i>eltrombopag olamine PACK 12.5 MG</i>	1	SP; PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	1	SP; PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA
FULPHILA	2	SP; PA
FYLNETRA	NP	SP
GRANIX SOLN 300 MCG/ML	NP	SP; PA
GRANIX SOSY	NP	SP; PA
LEUKINE SOLR IJ	NP	SP; PA
MIRCERA	NP	SP; PA
MULPLETA	2	SP; PA
NEULASTA ONPRO SOSY 6 MG/0.6ML	NP	SP; PA
NEULASTA SOLN SC 4 MG/0.4ML	NP	SP; PA
NEULASTA SOSY	NP	SP; PA
NEUPOGEN SOLN	2	SP; PA
NEUPOGEN SOSY	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
NIVESTYM SOLN	NP	SP; PA
NIVESTYM SOSY	NP	SP; PA
NPLATE 250 MCG, 500 MCG	2	SP; PA
NYPOZI	NP	SP
NYVEPRIA	NP	SP; PA
PROCRIT	NP	SP; PA
PROCRIT	NP	SP; PA
RELEUKO SOSY	NP	SP
RETACRIT	2	SP; PA
RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA
ROLVEDON	NP	SP
RYZNEUTA SOSY SC 20 MG/ML	NP	SP
STIMUFEND	NP	SP
UDENYCA ONBODY SOSY	NP	SP
UDENYCA SOAJ	NP	SP
UDENYCA SOSY	NP	SP; PA
ZARXIO	NP	SP; PA
ZIEXTENZO	NP	SP
Hematopoietic Mixtures		
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	1	QL(1 EA daily)
HEMATINIC PLUS VIT/MINERALS TABS	2	QL(1 EA daily)
Iron		
FERRETTTS TABS	2	QL(2 EA daily)
<i>ferrous fumarate TABS</i>	1	QL(2 EA daily)
<i>ferrous gluconate TABS</i>	1	
<i>ferrous sulfate dried TBCR</i>	1	
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	1	QL(16 ML daily)

Drug Name	Drug Tier	Requirements/Limits
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	QL(3.4 ML daily)
<i>ferrous sulfate TABS</i>	1	MP
<i>ferrous sulfate TBEC 325 MG</i>	1	MP
<i>ferrous sulfate TBEC</i>	1	
IRON CHEWS PEDIATRIC CHEW	2	
IRON TABS 28 MG	2	
<i>polysaccharide iron complex CAPS</i>	1	QL(1 EA daily)
Stem Cell Mobilizers		
<i>plerixafor</i>	1	SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	1	SP; PA
<i>aminocaproic acid TABS 1000 MG</i>	1	SP; PA
<i>aminocaproic acid TABS 500 MG</i>	1	QL(24 EA per fill retail); SP; PA
<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/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
ALEVE PM 25 MG-220 MG	2	
<i>diphenhydramine hcl (sleep) CAPS</i>	1	
<i>diphenhydramine hcl (sleep) LIQD</i>	1	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	1	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	1	
<i>diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG</i>	1	
<i>doxylamine succinate (sleep)</i>	1	
<i>ibuprofen-diphenhydramine citrate</i>	1	
<i>ibuprofen-diphenhydramine hcl</i>	1	
UNISOM SLEEPMELTS TBDP 25 MG	2	
WAL-SLEEP Z TBDP 25 MG	2	
WAL-SOM TBDP 25 MG	2	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1	
<i>phenobarbital TABS</i>	1	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1	
Non-Barbiturate Hypnotics		
<i>dexmedetomidine hcl in sodium chloride SOLN</i>	1	
<i>dexmedetomidine hcl SOLN 200 MCG/2ML</i>	1	
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	
<i>flurazepam hcl</i>	NP	QL(1 EA daily)
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 7.5 MG</i>	1	
<i>temazepam 22.5 MG</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>temazepam 15 MG, 30 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>triazolam</i>	1	QL(1 EA daily)
<i>zaleplon</i>	1	QL(1 EA daily)
ZOLPIDEM TARTRATE CAPS	NP	
<i>zolpidem tartrate SUBL</i>	NP	
<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily)
<i>zolpidem tartrate TBCR</i>	1	
Orexin Receptor Antagonists		
QUVIVIQ	NP	
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1	
<i>tasimelteon CAPS</i>	1	SP; PA
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1	QL(10 EA daily)
<i>psyllium CAPS 0.36 GM, 0.52 GM</i>	1	
<i>psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 %</i>	1	
SB FIB LAX ORANGE POWD 33 %	2	
Electrolyte-based Osmotic Laxatives		
<i>magnesium citrate 1.745 GM/30ML</i>	1	
<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	1	QL(33 ML daily)

Drug Name	Drug Tier	Requirements/Limits
<i>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</i>	1	
Laxative Combinations		
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	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 TABS</i>	1	QL(4 EA daily)
Laxatives - Miscellaneous		
<i>glycerin (laxative) SUPP 2 GM</i>	1	
<i>lactulose SOLN</i>	1	
<i>polyethylene glycol 3350 PACK</i>	1	QL(34 EA daily)
<i>polyethylene glycol 3350 POWD</i>	1	QL(34 GM daily)
<i>SORBITOL PO 70 %</i>	2	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1	QL(12 EA per fill retail)
<i>bisacodyl TBEC</i>	1	QL(1 EA daily)
<i>sennosides TABS 8.6 MG</i>	1	
Surfactant Laxatives		
<i>docusate sodium CAPS 50 MG</i>	1	
<i>docusate sodium CAPS 100 MG, 250 MG</i>	1	QL(3 EA daily)
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	1	

Drug Name	Drug Tier	Requirements/Limits
DOCUSATE SODIUM SYRP	2	
<i>docusate sodium TABS</i>	1	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin SUSR 200 MG/5ML</i>	1	QL(30 ML per fill retail)
<i>azithromycin SUSR 100 MG/5ML</i>	1	QL(15 ML per fill retail)
<i>azithromycin TABS 500 MG</i>	1	QL(4 EA daily)
<i>azithromycin TABS 250 MG</i>	1	QL(6 EA per fill retail)
<i>azithromycin TABS 600 MG</i>	1	QL(8 EA per 28 day(s) retail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1	QL(200 ML per fill retail)
<i>clarithromycin TABS</i>	1	QL(28 EA per fill retail)
<i>clarithromycin TB24</i>	1	QL(14 EA per fill retail)
Erythromycins		
<i>E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)</i>	NP	
<i>ERYPED 200 SUSR (erythromycin ethylsuccinate)</i>	NP	
<i>erythromycin base CPEP</i>	NP	
<i>erythromycin base TABS</i>	1	
<i>erythromycin base TBEC</i>	1	
<i>erythromycin ethylsuccinate SUSR</i>	1	
<i>erythromycin ethylsuccinate TABS</i>	NP	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
ALCOHOL PREP PADS-MISC	2	OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Contraceptives			ADVOCATE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
CONDOMS-MISC	2	QL(36 ea per fill retail)	ADVOCATE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
Diabetic Supplies			ADVOCATE SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
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
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	AGAMATRIX ULTRA-THIN LANCETS	2	QL(6.67 EA daily); RX/OTC
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	AIMSCO TWIST LANCETS 32G	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK SAFE-T PRO LANCETS	2	QL(6.67 EA daily); RX/OTC	AIMSCO TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC	AQUALANCE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ACCUTREND PLUS	2		ASSURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE 28G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE LANCETS	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE LITE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE SPECIAL LANCETS 17G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE PLUS SAFETY 25G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE UNIVERSAL 23G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE PLUS SAFETY 30G	2	QL(6.67 EA daily); RX/OTC
ADVANCED MOBILE LANCET	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE SAFETY LANCET 28G	2	QL(6.67 EA daily); RX/OTC
ADVANTAGE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	BD MICROTAINER LANCETS	2	QL(6.67 EA daily); RX/OTC
			CAREONE LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
			CAREONE LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
			CARESENS LANCETS	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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
CARETOUCH TWIST MC LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	DROPLET LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC
CHOSEN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	DROPLET PERSONAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
CHOSEN SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE ACTI-LANCE 23G	2	QL(6.67 EA daily); RX/OTC
CLEANLET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE MEDLANCE LANCET 30G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHEK LANCETS	2	QL(6.67 EA daily); RX/OTC	DRUG MART ON-THE-GO LANCET 30G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE COMFORT EZ	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT LANCETS	2	QL(6.67 EA daily); RX/OTC
COAGUCHEK LANCETS	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT LANCETS TWIST TOP	2	QL(6.67 EA daily); RX/OTC
COMFORT ASSURED LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
COMFORT ASSURED LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH LANCETS 31G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH PLUS LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH PLUS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 28G/TWIST	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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	FREESTYLE LIBRE 3 SENSOR	2	QL(2 EA per 28 day(s) retail); PA
EASY TOUCH SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA
EASY TOUCH SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE UNISTICK II LANCETS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	GAUZE SPONGES	2	RX/OTC
EASY TOUCH SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	GENTEEL BUTTERFLY TOUCH LANCET	2	QL(6.67 EA daily); RX/OTC
EMBRACE LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC	GLOBAL INJECT EASE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
EMBRACE PRESSURE ACTIVATED 21G	2	QL(6.67 EA daily); RX/OTC	GLOBAL INJECT EASE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
EMBRACE PRESSURE ACTIVATED 28G	2	QL(6.67 EA daily); RX/OTC	GLUCOCOM LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
FIFTY50 SAFETY SEAL LANCETS	2	QL(6.67 EA daily); RX/OTC	GLUCOCOM LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
FIFTY50 UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	GLUCOCOM LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
FINGERSTIX LANCETS	2	QL(6.67 EA daily); RX/OTC	GNP STERILE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
FONDCIRCLE SINGLE USE LANCETS	2	QL(6.67 EA daily); RX/OTC	GNP STERILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
FORA LANCETS	2	QL(6.67 EA daily); RX/OTC	GNP STERILE LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LANCETS	2	QL(6.67 EA daily); RX/OTC	GOJJI STERILE LANCETS	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 14 DAY READER	2	QL(1 EA per 365 day(s) retail); PA	HAEMOLANCE	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 14 DAY SENSOR	2	QL(2 EA per 28 day(s) retail); PA			
FREESTYLE LIBRE 2 PLUS SENSOR	2	QL(2 EA per 28 day(s) retail); PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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
HAEMOLANCE PLUS MAX FLOW	2	QL(6.67 EA daily); RX/OTC	LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC
HAEMOLANCE PLUS PEDIATRIC FLOW	2	QL(6.67 EA daily); RX/OTC	LIBERTY MEDICAL LANCETS	2	QL(6.67 EA daily); RX/OTC
H-E-B INCONTROL LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	LITE TOUCH LANCETS	2	QL(6.67 EA daily); RX/OTC
H-E-B INCONTROL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	LITETOUCH LANCETS	2	QL(6.67 EA daily); RX/OTC
H-E-B INCONTROL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	LIVE BETTER LANCET SUPER THIN	2	QL(6.67 EA daily); RX/OTC
HY-VEE LANCETS	2	QL(6.67 EA daily); RX/OTC	MEDICHOICE SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC
HY-VEE THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	MEDICHOICE SAFETY LANCET EXTRA	2	QL(6.67 EA daily); RX/OTC
IN TOUCH STERILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	MEDICHOICE SAFETY LANCET NORM	2	QL(6.67 EA daily); RX/OTC
KINNEY LANCETS	2	QL(6.67 EA daily); RX/OTC	MEDLANCE PLUS EXTRA 21G	2	QL(6.67 EA daily); RX/OTC
KINNEY THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	MEDLANCE PLUS LITE 25G	2	QL(6.67 EA daily); RX/OTC
KROGER HEALTHPRO LANCET 26G	2	QL(6.67 EA daily); RX/OTC	MEDLANCE PLUS SPECIAL 0.8MM	2	QL(6.67 EA daily); RX/OTC
KROGER LANCETS	2	QL(6.67 EA daily); RX/OTC	MEDLANCE PLUS SUPERLITE 30G	2	QL(6.67 EA daily); RX/OTC
KROGER LANCETS SUPER THIN	2	QL(6.67 EA daily); RX/OTC	MEDLANCE PLUS UNIVERSAL 21G	2	QL(6.67 EA daily); RX/OTC
KROGER LANCETS THIN	2	QL(6.67 EA daily); RX/OTC	MEIJER LANCETS	2	QL(6.67 EA daily); RX/OTC
LANCETS	2	QL(6.67 EA daily); RX/OTC	MEIJER LANCETS UNIVERSAL 21G	2	QL(6.67 EA daily); RX/OTC
LANCETS 28G THIN	2	QL(6.67 EA daily); RX/OTC	MEIJER LANCETS UNIVERSAL 30G	2	QL(6.67 EA daily); RX/OTC
LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	MEIJER LANCETS UNIVERSAL 33G	2	QL(6.67 EA daily); RX/OTC
LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	MICROLET LANCETS	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MICROLET NEXT LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MM TWIST LANCETS	2	QL(6.67 EA daily); RX/OTC	PRODIGY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MOBILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	PRODIGY SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
MONOLET LANCETS	2	QL(6.67 EA daily); RX/OTC	PRODIGY TWIST TOP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MONOLET OPD LANCETS	2	QL(6.67 EA daily); RX/OTC	PURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MONOLETTOR SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	PURE COMFORT SAFETY LANCET 30G	2	QL(6.67 EA daily); RX/OTC
MYGLUCOHEALTH LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	PX LANCETS MICROTHIN 33G	2	QL(6.67 EA daily); RX/OTC
NOVA SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	PX LANCETS ULTRA THIN 28G	2	QL(6.67 EA daily); RX/OTC
NOVA SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	QC LANCETS SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
NOVA SUREFLEX LANCETS	2	QL(6.67 EA daily); RX/OTC	QC LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA PLUS LANCET30G	2	QL(6.67 EA daily); RX/OTC	QC UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA PLUS LANCET33G	2	QL(6.67 EA daily); RX/OTC	QC UNILET LANCETS MICRO THIN	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA SAFETY LANCING	2	QL(6.67 EA daily); RX/OTC	READYLANCE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
ONETOUCH ULTRASOFT 2 LANCETS	2	QL(6.67 EA daily); RX/OTC	REALITY LANCETS	2	QL(6.67 EA daily); RX/OTC
PERFECT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	REALITY TRIGGER LANCETS	2	QL(6.67 EA daily); RX/OTC
PERFECT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	RELION LANCET DEVICES 30G	2	QL(6.67 EA daily); RX/OTC
PERFECT POINT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	RELION LANCETS	2	QL(6.67 EA daily); RX/OTC
PHARMACIST CHOICE LANCETS	2	QL(6.67 EA daily); RX/OTC	RELION LANCETS MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC
PIP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	RELION LANCETS THIN 26G	2	QL(6.67 EA daily); RX/OTC
PIP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	RELION LANCETS ULTRA-THIN 30G	2	QL(6.67 EA daily); RX/OTC
PRO COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	RELION ULTRA THIN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
PRO COMFORT LANCETS 31G	2	QL(6.67 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RIGHTEST GL300 LANCETS	2	QL(6.67 EA daily); RX/OTC	SURE COMFORT LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
SAFETY LANCET 30G/PRESSURE ACT	2	QL(6.67 EA daily); RX/OTC	SURE COMFORT LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	SURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	SURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	SURELITE LANCETS	2	QL(6.67 EA daily); RX/OTC
SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	TECHLITE AST LANCETS	2	QL(6.67 EA daily); RX/OTC
SAPS HEALTH PLUS LANCETS	2	QL(6.67 EA daily); RX/OTC	TECHLITE LANCETS	2	QL(6.67 EA daily); RX/OTC
SAPS HEALTH TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC	TECHLITE LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
SAPS TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC	TODAYS HEALTH THIN LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
SAPSCARE TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC	TODAYS HEALTH THIN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SB LANCETS THIN	2	QL(6.67 EA daily); RX/OTC	TRAVEL LANCETS ADVANCED 28G	2	QL(6.67 EA daily); RX/OTC
SB LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
SENSILANCE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC
SENSILANCE SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	TRUEPLUS LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
SENSILANCE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	TRUEPLUS LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
SINGLE-LET	2	QL(6.67 EA daily); RX/OTC	TRUEPLUS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SMARTEST LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	TRUEPLUS LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
SOLUS V2 LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	TRUEPLUS SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
SOLUS V2 TWIST LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
STERILANCE TL	2	QL(6.67 EA daily); RX/OTC	ULTILET CLASSIC LANCETS	2	QL(6.67 EA daily); RX/OTC
SUPER THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	ULTILET LANCETS	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 18G	2	QL(6.67 EA daily); RX/OTC	ULTILET SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTILET SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 SUPER	2	QL(6.67 EA daily); RX/OTC
ULTRA THIN LANCETS 31G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3	2	QL(6.67 EA daily); RX/OTC
ULTRA-CARE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 COMFORT	2	QL(6.67 EA daily); RX/OTC
ULTRA-CARE SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 EXTRA	2	QL(6.67 EA daily); RX/OTC
ULTRA-THIN II AUTO LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 GENTLE	2	QL(6.67 EA daily); RX/OTC
ULTRA-THIN II LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 NEONATAL	2	QL(6.67 EA daily); RX/OTC
UNILET COMFORTOUCH LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET EXCELITE	2	QL(6.67 EA daily); RX/OTC	UNISTIK CZT COMFORT	2	QL(6.67 EA daily); RX/OTC
UNILET EXCELITE II	2	QL(6.67 EA daily); RX/OTC	UNISTIK CZT NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK PRO SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC
UNILET GP 28 ULTRA THIN	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNILET LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNILET MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 21G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPER-THIN 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 28G	2	QL(6.67 EA daily); RX/OTC
UNILET ULTRA-THIN 28G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 1	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 21G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 23G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 COMFORT	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 EXTRA	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 NEONATAL	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 28G	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
VERIFINE UNIVERSAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD LANCETS	2	QL(6.67 EA daily); RX/OTC	EQL ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	FIFTY50 ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	GLOBAL ALCOHOL PREP EASE	2	QL(6.67 EA daily); RX/OTC
ZEV RX TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	GNP ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
Misc. Devices			GOODSENSE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	H-E-B INCONTROL ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOH-GLOVE CONTOURED WIPE	2	QL(6.67 EA daily); RX/OTC	HM STERILE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC	MEIJER ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	PHARMACIST CHOICE ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	PURE COMFORT ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
ALCOHOL SWABSTICK	2	QL(6.67 EA daily); RX/OTC	QC ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
AUM ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	REALITY SWABS	2	QL(6.67 EA daily); RX/OTC
BD SWAB SINGLE USE REGULAR	2	QL(6.67 EA daily); RX/OTC	RELION ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
CARETOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	SAPS CARE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
CURITY ALCOHOL PREPS	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH CARE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
CVS ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	SB ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
CVS PREP	2	QL(6.67 EA daily); RX/OTC	SM ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
DROPSAFE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	SURE COMFORT ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUE COMFORT ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	Respiratory Therapy Supplies		
TRUE COMFORT PRO ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	ACE AEROSOL CLOUD ENHANCER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
ULTICARE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	ACTIVITY POUCH MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
ULTILET ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	ADULT AEROSOL MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
ULTRA-CARE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	ADULT MASK LARGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
WEBCOL ALCOHOL PREP LARGE	2	QL(6.67 EA daily); RX/OTC	AEROCHAMBER HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
WEBCOL ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC	AEROCHAMBER MINI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
ZEV RX STERILE ALCOHOL PREP PAD	2	QL(6.67 EA daily); RX/OTC	AEROCHAMBER MV MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
Parenteral Therapy Supplies			AEROCHAMBER PLS FLOVU MTHPIECE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU INTERM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE MICRO ULTRAFINE	2	QL(5 EA daily)	AEROCHAMBER PLUS FLO-VU LARGE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE MINI ULTRAFINE	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE NANO 2ND GEN	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE NANO ULTRAFINE	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE ORIG ULTRAFINE	2	QL(5 EA daily)	AEROCHAMBER PLUS FLO-VU SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE SHORT ULTRAFINE	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLES	2	QL (5 ea daily); RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EMBECTA AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC			
EMBECTA PEN NEEDLE NANO	2	QL(5 EA daily); RX/OTC			
EMBECTA PEN NEEDLE NANO 2 GEN	2	QL(5 EA daily); RX/OTC			
EMBECTA PEN NEEDLE ULTRAFINE	2	QL(5 EA daily)			
INSULIN SYRINGES	2	QL (5 ea daily); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AEROCHAMBER W/FLOWSIGNAL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE NEB MASK/INFANT 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	BREATHE EASE SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MISC	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
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	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
AEROCHAMBER Z-STAT PLUS/SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	CLEVER CHOICE 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	CO MONITOR REPLACEMENT PIECES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER2GO ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/LG MASK DEVI	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	COMPACT SPACE CHAMBER/MED MASK 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	COMPACT SPACE CHAMBER/SM MASK 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	COMPACT SPACE CHAMBER 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	EASIVENT MASK 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	EASIVENT MASK MEDIUM MISC	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	EASIVENT MASK SMALL 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	EASIVENT MISC	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	EBASE CONTROLLER KIT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
BREATHE EASE NEB MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC L DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EQ SPACE CHAMBER ANTI-STATIC M DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	MINIELITE FILTER REPLACEMENTS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	NEBULIZER AIR TUBE/PLUGS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	NOSE CLIP 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	OPTICHAMBER DIAMOND 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	OPTICHAMBER DIAMOND-LG MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
FLYP HYPERSONIQ CARTRIDGE 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
FULL KIT NEBULIZER SET 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
INNOSPIRE REPLACEMENT FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND-SM MASK MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
INSPIREASE RESERVOIR BAGS	2	QL(3 EA per 180 day(s) retail)	PARI ALTERA NEBULIZER HANDSET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
INSPIREASE 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
LITETOUCH MASK LARGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PARI ERAPID NEBULIZER HANDSET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
LITETOUCH MASK MEDIUM MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PARI EXPIRATORY FILTER SET DEVI	2	QL(1 EA per 360 day(s) retail); RX/OTC
LITETOUCH MASK SMALL MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PARI MASK SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
MICROCHAMBER 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
MICROCHAMBER MISC	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
MICROSPACER MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	PARI VORTEX ADULT MASK	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PEDIATRIC MOUTHPIECE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	REPLACEMENT AIR FILTER 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	REPLACEMENT FILTERS 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	RITEFLO 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	SAMI THE SEAL FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	SIDESTREAM ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/PEDIATRIC 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
POCKET CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	SIDESTREAM PLS ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
POCKET SPACER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	SILICONE MASK/ADULT 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	SILICONE MASK/INFANT 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	SILICONE MASK/PEDIATRIC 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	SOOTHENE NBL 100 ADULT MASK MISC	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	SOOTHENE NBL 100 CHILD MASK 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	SOOTHENE NBL 100 MED CUP 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	SOOTHENE NBL 100 MESH CAP 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	THRESHOLD IMT MISC	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	TUBING/WING TIP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VORTEX HOLD CHMBR/MASK/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	<i>sumatriptan-naproxen sodium</i>	NP	
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	SYMBRAVO TABS PO	NP	
VORTEX VALVE CHAMBER-PEDI MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	TREXIMET (<i>sumatriptan-naproxen sodium</i>)	NP	
VORTEX VALVED HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	Migraine Products		
WINDMILL TRAINER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			Serotonin Agonists		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>almotriptan malate</i>	NP	
AJOVY SOAJ	2	SP; PA	<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily)
AJOVY SOSY	2	SP; PA	<i>frovatriptan succinate</i>	1	
EMGALITY (300 MG DOSE) SOSY	NP	SP; PA	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP	
EMGALITY SOAJ	2	SP; PA	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(0.67 ML daily)
EMGALITY SOSY	2	SP; PA	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP	
NURTEC	2	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); PA	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(0.67 ML daily)
QULIPTA	2	QL(30 EA per 30 day(s) retail; 30 EA per 30 days mail); PA	<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
UBRELVY	2	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); PA	<i>rizatriptan benzoate TABS</i>	1	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
ZAVZPRET	NP	PA	<i>rizatriptan benzoate TBDP</i>	1	
Migraine Combinations			<i>sumatriptan</i>	1	QL(6 EA per 30 day(s) retail)
<i>ergotamine w/ caffeine TABS</i>	1		<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
			<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	NP	
<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
<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>sumatriptan succinate TABS</i>	1	QL(9 EA per 30 day(s) retail)
<i>zolmitriptan SOLN 2.5 MG</i>	NP	
<i>zolmitriptan TABS</i>	1	QL(6 EA per 30 day(s) retail)
<i>zolmitriptan TBDP</i>	1	QL(6 EA per 30 day(s) retail)
ZOMIG SOLN 2.5 MG (<i>zolmitriptan</i>)	NP	
MINERALS & ELECTROLYTES		
Calcium		
CALCIUM ACETATE	2	
<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>oyster shell</i>	1	
Fluoride		
<i>sodium fluoride CHEW</i>	1	
<i>sodium fluoride SOLN 0.5 MG/ML</i>	1	RX/OTC
SODIUM FLUORIDE SOLN 0.5 MG/ML	2	RX/OTC
Magnesium		
<i>magnesium oxide (mg supplement) TABS</i>	1	
Phosphate		
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	QL(8 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	2	QL(8 EA daily); RX/OTC
Potassium		
EFFER-K TBEF 25 MEQ	2	
KLOR-CON TBCR 8 MEQ (<i>potassium chloride</i>)	2	MP
<i>potassium bicarbonate TBEF</i>	1	
<i>potassium chloride microencapsulated crystals er</i>	1	MP
<i>potassium chloride CPCR 8 MEQ</i>	1	QL(1 EA daily); MP
<i>potassium chloride CPCR 10 MEQ</i>	1	MP
<i>potassium chloride PACK PO 20 MEQ</i>	1	
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	1	MP
<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	1	MP
Zinc		
<i>zinc sulfate CAPS</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
<i>penicillamine TABS</i>	1	
<i>trientine hcl 250 MG</i>	1	SP; PA
Enzymes		
XIAFLEX	2	SP; PA
Fecal Incontinence Bulking Agents		
SOLESTA	2	SP; PA
Immunomodulators		
<i>lenalidomide</i>	1	SP; PA
RHAPSIDO TABS PO 25 MG	2	SP; PA
THALOMID 50 MG, 100 MG, 200 MG	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
Immunosuppressive Agents		
ATGAM	2	SP; PA
azathioprine TABS 50 MG	1	MP
azathioprine TABS 75 MG, 100 MG	1	
cyclosporine modified (for microemulsion) CAPS	1	PA
cyclosporine modified (for microemulsion) SOLN	1	PA
cyclosporine CAPS	1	PA
cyclosporine SOLN IV 50 MG/ML	1	PA
everolimus (immunosuppressant)	1	PA
GAMIFANT 10 MG/2ML, 50 MG/10ML	2	SP; PA
mycophenolate mofetil hcl	1	PA
mycophenolate mofetil CAPS	1	PA
mycophenolate mofetil SUSR	1	PA
mycophenolate mofetil TABS	1	PA
mycophenolate sodium	1	PA
NULOJIX	2	SP; PA
PROGRAF PACK	2	PA
SANDIMMUNE CAPS (cyclosporine)	2	PA
SANDIMMUNE SOLN IV 50 MG/ML	2	PA
sirolimus SOLN	1	PA
sirolimus TABS	1	PA
tacrolimus CAPS	1	PA
tacrolimus CP24 0.5 MG, 1 MG, 5 MG	1	PA
tacrolimus SOLN 5 MG/ML	1	PA
THYMOGLOBULIN	2	SP; PA
Lymphatic Agents		

Drug Name	Drug Tier	Requirements/Limits
SYLVANT	2	SP; PA
PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
VIJOICE TBPK	2	SP; PA
Potassium Removing Agents		
LOKELMA	2	
LOKELMA	NP	
sodium polystyrene sulfonate POWD	1	QL(454 GM per fill retail)
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	1	
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	NP	
VELTASSA	NP	
Systemic Lupus Erythematosus Agents		
BENLYSTA SOLR	2	SP; PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
lidocaine hcl (mouth-throat) 2 %	1	QL(100 ML per fill retail)
Anti-infectives - Throat		
nystatin (mouth-throat)	1	QL(100 ML per fill retail)
Antiseptics - Mouth/Throat		
chlorhexidine gluconate (mouth-throat)	1	
Dental Products		
FLUORIDEX DAILY RENEWAL CONC 0.63 %	2	RX/OTC
PERIOMED CONC 0.63 %	2	RX/OTC
sodium fluoride (dental) CREA	1	QL(57 GM per fill retail)
sodium fluoride (dental) GEL	1	QL(60 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<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.		
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)
MULTIVITAMINS		
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 & folic acid CAPS</i>	1	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>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</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
NUTRIVIO CAPS 1 MG	2	QL(1 EA daily); RX/OTC
RENAL CAPS 1 MG	2	QL(1 EA daily); RX/OTC
RENO CAPS CAPS 1 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
DESTRESS-IRON TABS	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
<i>multiple vitamins w/ iron TABS</i>	1	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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
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	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
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	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
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	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
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	STRESS FORMULA/IRON/ENERGY TABS	2	QL(1 EA daily); RX/OTC
			STRESS FORMULA/IRON TABS	2	QL(1 EA daily); RX/OTC
			TAB-A-VITE/IRON/BETA CAROTENE TABS	2	QL(1 EA daily); RX/OTC
			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
			Multiple Vitamins w/ Minerals		
			MULTIPLE VITAMINS W/ MINERALS TABS- ASSORTED BRAND	2	RX/OTC
			MULTIPLE VITAMINS W/ MINERALS TABS- ASSORTED GENERIC	1	RX/OTC
			Multivitamins		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MULTIPLE VITAMINS TABS-ASSORTED BRAND	2	QL(1 ea daily)	BPROTECTED PEDIA POLY-VITE/FE SOLN	2	
MULTIPLE VITAMINS TABS-ASSORTED GENERIC	1	QL(1 ea daily)	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	2	
Ped Multi Vitamins w/Fl & FE			MULTIVITAMIN DROPS/IRON SOLN	2	
<i>ped multivitamins w/fl & iron SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN	2	
Ped Multiple Vitamins w/ Minerals			MULTIVITAMIN INFANTS/TODDLERS SOLN 11 MG/ML	2	
MVW COMPLETE FORMULATION SOLN	2		NOVAFERRUM PED MULTI VIT-IRON SOLN 10 MG/ML	2	QL(60 ML per fill retail)
Ped MV w/ Fluoride			PC PEDIATRIC POLY-VITA/FE DROP SOLN	2	QL(60 ML per fill retail)
PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED BRAND	2	QL(1 ea daily); AL(Up to 13 yrs old)	POLY-VITA/IRON SOLN	2	QL(60 ML per fill retail)
PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED GENERIC	1	QL(1 ea daily); AL(Up to 13 yrs old)	POLY-VITE/IRON SOLN	2	
PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED BRAND	2	QL(50ml per fill retail); AL(Up to 13 yrs old)	Pediatric Multiple Vitamins		
PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED GENERIC	1	QL(50ml per fill retail); AL(Up to 13 yrs old)	BPROTECTED PEDIA POLY-VITE SOLN PO	2	
<i>pediatric vitamins acd w/ fluoride SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	2	
SOLUVITA ACD WITH FLUORIDE SOLN	2	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	POLY-VI-SOL SOLN PO	2	
VITAMINS ACD-FLUORIDE SOLN	2	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	POLY-VITA SOLN PO	2	
Ped MV w/ Iron			POLY-VITE PEDIATRIC SOLN PO	2	
			Prenatal Vitamins		
			PRENATAL VITAMINS-ASSORTED BRAND	2	QL(30 ea per 30 days retail); RX/OTC
			PRENATAL VITAMINS-ASSORTED GENERIC	1	QL(30 ea per 30 days retail); RX/OTC
			Vitamins w/ Lipotropics		
			<i>vitamins w/ lipotropics CAPS</i>	1	QL(1 EA daily)
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms					
Articular Cartilage Repair Therapy					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MACI	2	SP; PA	<i>methocarbamol TABS 750 MG, 1000 MG</i>	1	
Central Muscle Relaxants			<i>orphenadrine citrate TB12</i>	1	
AMRIX CP24 (<i>cyclobenzaprine hcl</i>)	NP		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 SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	1	SP; PA	<i>tizanidine hcl CAPS 8 MG</i>	2	
<i>baclofen SUSP</i>	NP		<i>tizanidine hcl CAPS</i>	1	
<i>baclofen TABS 15 MG</i>	1		<i>tizanidine hcl TABS</i>	1	
<i>baclofen TABS 10 MG, 20 MG</i>	1	MP	ZANAFLEX CAPS 8 MG (<i>tizanidine hcl</i>)	NP	
<i>baclofen TABS 5 MG</i>	1	PA	Direct Muscle Relaxants		
<i>carisoprodol TABS 350 MG</i>	1	MP; PA	DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	NP	
<i>carisoprodol TABS 250 MG</i>	NP	PA	<i>dantrolene sodium CAPS</i>	NP	
<i>chlorzoxazone TABS 250 MG, 375 MG, 750 MG</i>	1		Muscle Relaxant Combinations		
<i>chlorzoxazone TABS 500 MG</i>	1	MP	<i>orphenadrine w/ aspirin & caff</i>	NP	
<i>cyclobenzaprine hcl CP24</i>	NP		Viscosupplements		
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	1	QL(4 EA daily)	EUFLEXXA SOSY	2	SP; PA
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily); MP	GEL-ONE	2	SP; PA
FLEQSUVY SUSP (<i>baclofen</i>)	NP		GELSYN-3 SOSY	2	SP; PA
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	2	SP; PA	GENVISC 850 SOSY	2	SP; PA
LIORESAL SOLN IT	2	SP; PA	HYALGAN SOLN	2	SP; PA
LYVISPAH PACK	NP		HYALGAN SOSY	2	SP; PA
<i>metaxalone</i>	1		HYMOVIS	2	SP; PA
METAXALONE 640 MG	NP		MONOVISC	2	SP; PA
<i>methocarbamol TABS 500 MG</i>	1	MP	ORTHOVISC	2	SP; PA
<i>methocarbamol TABS 1000 MG</i>	NP		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
			NASAL AGENTS - SYSTEMIC AND TOPICAL -		

Drug Name	Drug Tier	Requirements/Limits
Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
<i>azelastine hcl-fluticasone propionate SUSP</i>	1	
DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	NP	
RYALTRIS	NP	
Nasal Agents - Misc.		
<i>saline SOLN 0.65 %</i>	1	QL(90 ML per fill retail)
Nasal Antiallergy		
<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	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1	QL(15 ML per 30 day(s) retail)
<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(30 ML per 30 day(s) retail)
Nasal Steroids		
<i>flunisolide (nasal)</i>	NP	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
Sympathomimetic Decongestants		
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	

Drug Name	Drug Tier	Requirements/Limits
<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)
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	1	PA
TEGLUTIK SUSP	2	SP; PA
TIGLUTIK SUSP	2	SP; PA
Muscular Dystrophy Agents		
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
ELEVIDYS 12.5-13.4 KG	2	SP; PA
ELEVIDYS 13.5-14.4 KG	2	SP; PA
ELEVIDYS 14.5-15.4 KG	2	SP; PA
ELEVIDYS 15.5-16.4 KG	2	SP; PA
ELEVIDYS 16.5-17.4 KG	2	SP; PA
ELEVIDYS 17.5-18.4 KG	2	SP; PA
ELEVIDYS 18.5-19.4 KG	2	SP; PA
ELEVIDYS 19.5-20.4 KG	2	SP; PA
ELEVIDYS 20.5-21.4 KG	2	SP; PA
ELEVIDYS 21.5-22.4 KG	2	SP; PA
ELEVIDYS 22.5-23.4 KG	2	SP; PA
ELEVIDYS 23.5-24.4 KG	2	SP; PA
ELEVIDYS 24.5-25.4 KG	2	SP; PA
ELEVIDYS 25.5-26.4 KG	2	SP; PA
ELEVIDYS 26.5-27.4 KG	2	SP; PA
ELEVIDYS 27.5-28.4 KG	2	SP; PA
ELEVIDYS 28.5-29.4 KG	2	SP; PA
ELEVIDYS 29.5-30.4 KG	2	SP; PA
ELEVIDYS 30.5-31.4 KG	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 31.5-32.4 KG	2	SP; PA
ELEVIDYS 32.5-33.4 KG	2	SP; PA
ELEVIDYS 33.5-34.4 KG	2	SP; PA
ELEVIDYS 34.5-35.4 KG	2	SP; PA
ELEVIDYS 35.5-36.4 KG	2	SP; PA
ELEVIDYS 36.5-37.4 KG	2	SP; PA
ELEVIDYS 37.5-38.4 KG	2	SP; PA
ELEVIDYS 38.5-39.4 KG	2	SP; PA
ELEVIDYS 39.5-40.4 KG	2	SP; PA
ELEVIDYS 40.5-41.4 KG	2	SP; PA
ELEVIDYS 41.5-42.4 KG	2	SP; PA
ELEVIDYS 42.5-43.4 KG	2	SP; PA
ELEVIDYS 43.5-44.4 KG	2	SP; PA
ELEVIDYS 44.5-45.4 KG	2	SP; PA
ELEVIDYS 45.5-46.4 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
ELEVIDYS 49.5-50.4 KG	2	SP; PA
ELEVIDYS 50.5-51.4 KG	2	SP; PA
ELEVIDYS 51.5-52.4 KG	2	SP; PA
ELEVIDYS 52.5-53.4 KG	2	SP; PA
ELEVIDYS 53.5-54.4 KG	2	SP; PA
ELEVIDYS 54.5-55.4 KG	2	SP; PA
ELEVIDYS 55.5-56.4 KG	2	SP; PA
ELEVIDYS 56.5-57.4 KG	2	SP; PA
ELEVIDYS 57.5-58.4 KG	2	SP; PA
ELEVIDYS 58.5-59.4 KG	2	SP; PA
ELEVIDYS 59.5-60.4 KG	2	SP; PA
ELEVIDYS 60.5-61.4 KG	2	SP; PA
ELEVIDYS 61.5-62.4 KG	2	SP; PA
ELEVIDYS 62.5-63.4 KG	2	SP; PA
ELEVIDYS 63.5-64.4 KG	2	SP; PA
ELEVIDYS 64.5-65.4 KG	2	SP; PA
ELEVIDYS 65.5-66.4 KG	2	SP; PA
ELEVIDYS 66.5-67.4 KG	2	SP; PA
ELEVIDYS 67.5-68.4 KG	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 68.5-69.4 KG	2	SP; PA
ELEVIDYS 69.5 KG PLUS	2	SP; PA
EXONDYS 51	2	SP; PA
VILTEPSO	2	SP; PA
VYONDYS 53	2	SP; PA
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX IJ	2	SP; PA
DYSPOORT	2	SP; PA
MYOBLOC	2	SP; PA
XEOMIN	2	SP; PA
Spinal Muscular Atrophy Agents (SMA)		
EVRYSDI PO 5 MG	2	SP
EVRYSDI	2	SP; PA
ITVISMASUSPIT	NP	SP; PA
SPINRAZA	2	SP; PA
SPINRAZA	2	SP; PA
ZOLGENSMA 20.6-21.0 KG	2	SP; PA
ZOLGENSMA 10.1-10.5 KG	2	SP; PA
ZOLGENSMA 10.6-11.0 KG	2	SP; PA
ZOLGENSMA 11.1-11.5 KG	2	SP; PA
ZOLGENSMA 11.6-12.0 KG	2	SP; PA
ZOLGENSMA 12.1-12.5 KG	2	SP; PA
ZOLGENSMA 12.6-13.0 KG	2	SP; PA
ZOLGENSMA 13.1-13.5 KG	2	SP; PA
ZOLGENSMA 13.6-14.0 KG	2	SP; PA
ZOLGENSMA 14.1-14.5 KG	2	SP; PA
ZOLGENSMA 14.6-15.0 KG	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
ZOLGENSMA 15.1-15.5 KG	2	SP; PA
ZOLGENSMA 15.6-16.0 KG	2	SP; PA
ZOLGENSMA 16.1-16.5 KG	2	SP; PA
ZOLGENSMA 16.6-17.0 KG	2	SP; PA
ZOLGENSMA 17.1-17.5 KG	2	SP; PA
ZOLGENSMA 17.6-18.0 KG	2	SP; PA
ZOLGENSMA 18.1-18.5 KG	2	SP; PA
ZOLGENSMA 18.6-19.0 KG	2	SP; PA
ZOLGENSMA 19.1-19.5 KG	2	SP; PA
ZOLGENSMA 19.6-20.0 KG	2	SP; PA
ZOLGENSMA 2.6-3.0 KG	2	SP; PA
ZOLGENSMA 20.1-20.5 KG	2	SP; PA
ZOLGENSMA 3.1-3.5 KG	2	SP; PA
ZOLGENSMA 3.6-4.0 KG	2	SP; PA
ZOLGENSMA 4.1-4.5 KG	2	SP; PA
ZOLGENSMA 4.6-5.0 KG	2	SP; PA
ZOLGENSMA 5.1-5.5 KG	2	SP; PA
ZOLGENSMA 5.6-6.0 KG	2	SP; PA
ZOLGENSMA 6.1-6.5 KG	2	SP; PA
ZOLGENSMA 6.6-7.0 KG	2	SP; PA
ZOLGENSMA 7.1-7.5 KG	2	SP; PA
ZOLGENSMA 7.6-8.0 KG	2	SP; PA
ZOLGENSMA 8.1-8.5 KG	2	SP; PA
ZOLGENSMA 8.6-9.0 KG	2	SP; PA
ZOLGENSMA 9.1-9.5 KG	2	SP; PA
ZOLGENSMA 9.6-10.0 KG	2	SP; PA
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		

Drug Name	Drug Tier	Requirements/Limits
<i>polyvinyl alcohol 1.4 %</i>	1	QL(15 ML per fill retail)
<i>white petrolatum-mineral oil</i>	1	QL(5 GM per fill retail)
Beta-blockers - Ophthalmic		
<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	
<i>levobunolol hcl 0.5 %</i>	1	
<i>timolol maleate (ophth) SOLG 0.25 %</i>	1	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	NP	QL(60 EA per fill retail)
<i>timolol maleate (ophth) SOLN</i>	1	QL(5 ML 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)
Cycloplegic Mydriatics		
<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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ATROPINE SULFATE SOLN 1 %	2	QL(5 EA per fill retail)	<i>gatifloxacin (ophth)</i>	NP	
CYCLOGYL 0.5 %	2	QL(15 ML per fill retail)	<i>gentamicin sulfate (ophth) SOLN</i>	1	QL(5 ML per fill retail)
<i>cyclopentolate hcl 1 %</i>	1	QL(5 ML per fill retail)	<i>levofloxacin (ophth) 0.5 %</i>	1	
<i>phenylephrine hcl (mydriatic) SOLN 2.5 %</i>	1	QL(5 ML per fill retail)	<i>moxifloxacin hcl (ophth) SOLN OP</i>	1	
<i>tropicamide SOLN 1 %</i>	1	QL(3 ML per fill retail)	<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	QL(3 ML per fill retail)
<i>tropicamide SOLN 0.5 %</i>	1	QL(15 ML per fill retail)	<i>neomycin-bacitracin zn-polymyxin</i>	1	QL(4 GM per fill retail)
Miotics			<i>neomycin-polymyxin-gramicidin</i>	1	QL(10 ML per fill retail)
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1		<i>ofloxacin (ophth)</i>	1	QL(5 ML per fill retail)
Ophthalmic - Angiogenesis Inhibitors			<i>polymyxin b-trimethoprim</i>	1	QL(10 ML per fill retail)
BEVACIZUMAB IZ 2.75 MG/0.11ML	2	PA	<i>sulfacetamide sodium (ophth) SOLN</i>	1	QL(15 ML per fill retail)
BEVACIZUMAB IZ 2.5 MG/0.1ML, 3.25 MG/0.13ML	2	SP; PA	<i>tobramycin (ophth) SOLN</i>	1	QL(5 ML per fill retail)
EYLEA SOLN	2	SP; PA	TOBREX OINT	2	QL(4 GM per fill retail)
LUCENTIS SOSY	2	SP; PA	VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP	QL(3 ML per fill retail)
Ophthalmic Adrenergic Agents			Ophthalmic Decongestants		
ALPHAGAN P (<i>brimonidine tartrate</i>)	2		<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	1	QL(0.5 ML daily)
<i>apraclonidine hcl</i>	NP		<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	1	1 max fill(s) per 30 day(s) retail
<i>brimonidine tartrate 0.2 %</i>	1	QL(5 ML per fill retail)	<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	1	QL(30 ML per fill retail)
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP		Ophthalmic Immunomodulators		
SIMBRINZA	2		CEQUA SOLN	NP	
Ophthalmic Anti-infectives			<i>cyclosporine (ophth) EMUL</i>	NP	
<i>bacitracin-polymyxin b (ophth)</i>	1	QL(4 GM per fill retail)	RESTASIS MULTIDOSE EMUL	NP	
<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(5 ML per fill retail)	RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	2	
ERYTHROMYCIN	2	QL(4 GM per fill retail)	VEVYE SOLN	NP	
<i>erythromycin (ophth)</i>	1	QL(4 GM per fill retail)			

Drug Name	Drug Tier	Requirements/Limits
Ophthalmic Integrin Antagonists		
XIIDRA	2	PA
Ophthalmic Kinase Inhibitors		
ROCKLATAN	2	PA
Ophthalmic Local Anesthetics		
TETRACAINE HCL 0.5 %	2	
<i>tetracaine hcl (ophth)</i>	1	
Ophthalmic Nerve Growth Factors		
OXERVATE	2	SP; PA
Ophthalmic Photodynamic Therapy Agents		
VISUDYNE	2	SP; PA
Ophthalmic Steroids		
<i>dexamethasone sodium phosphate (ophth)</i>	1	QL(5 ML per fill retail)
DEXTENZA INST	2	SP; PA
EYSUVIS SUSP	NP	
<i>fluorometholone (ophth) SUSP</i>	1	QL(5 ML per fill retail)
ILUVIEN	2	SP; PA
<i>neomycin-polymyx-dexameth OINT</i>	1	QL(4 GM per fill retail)
<i>neomycin-polymyx-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	1	QL(5 ML per fill retail)
<i>neomycin-polymyxin-hc (ophth)</i>	1	QL(8 ML per fill retail)
OZURDEX IMPL	2	SP; PA
PRED MILD	2	QL(10 ML per fill retail)
<i>prednisolone acetate (ophth)</i>	1	QL(5 ML per fill retail)
PREDNISOLONE ACETATE P-F	2	QL(5 ML per fill retail)
PREDNISOLONE SODIUM PHOSPHATE	2	QL(10 ML per fill retail)
RETISERT	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sod-prednisolone SOLN</i>	1	QL(5 ML per fill retail)
TOBRADEX OINT	2	QL(4 GM per fill retail)
<i>tobramycin-dexamethasone SUSP</i>	1	QL(5 ML per fill retail)
YUTIQ	2	SP
Ophthalmics - Misc.		
ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	QL(5 ML per fill retail)
ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	2	1 max fill(s) per 30 day(s) retail
<i>azelastine hcl (ophth)</i>	1	QL(6 ML per fill retail)
<i>bromfenac sodium (ophth) 0.09 %</i>	1	
<i>cromolyn sodium (ophth)</i>	1	QL(10 ML per fill retail)
CYSTARAN	2	SP; PA
<i>diclofenac sodium (ophth)</i>	1	QL(5 ML per fill retail)
<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) 0.5 %</i>	NP	QL(5 ML per fill retail)
<i>ketorolac tromethamine (ophth) 0.4 %</i>	NP	1 max fill(s) per 30 day(s) 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	

Drug Name	Drug Tier	Requirements/Limits
TRAVATAN Z SOLN (travoprost)	2	
travoprost SOLN	NP	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
acetic acid (otic)	1	QL(15 ML per fill retail)
carbamide peroxide (otic) 6.5 %	1	QL(0.5 ML daily)
Otic Anti-infectives		
CETRAXAL (ciprofloxacin hcl (otic))	2	
ciprofloxacin hcl (otic)	1	
ofloxacin (otic)	1	QL(10 ML per fill retail; 10 per fill mail)
Otic Combinations		
ciprofloxacin-dexamethasone	1	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail
neomycin-polymyxin-hc (otic) SOLN	1	QL(10 ML per fill retail)
neomycin-polymyxin-hc (otic) SUSP	1	QL(10 ML per fill retail)
Otic Steroids		
fluocinolone acetonide (otic)	1	QL(20 ML per fill retail)
hydrocortisone w/acetic acid	1	QL(10 ML per fill retail)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
methylergonovine maleate TABS	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		

Drug Name	Drug Tier	Requirements/Limits
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
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

Drug Name	Drug Tier	Requirements/Limits
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	2	SP; PA
Monoclonal Antibodies		
BEYFORTUS	0	AL(At least 19 yrs old); SP
SYNAGIS SOLN	2	SP; PA
ZINPLAVA	2	SP; PA
Passive Immunizing Agents - Combinations		
HYQVIA	2	SP; PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	
<i>amoxicillin SUSR</i>	1	
<i>amoxicillin TABS 875 MG</i>	1	
<i>ampicillin CAPS 500 MG</i>	1	
Natural Penicillins		
<i>penicillin v potassium SOLR</i>	1	
<i>penicillin v potassium TABS</i>	1	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate SUSR</i>	1	
<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG</i>	1	QL(30 EA per fill retail)
<i>amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG</i>	1	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate TB12</i>	1	QL(1.34 EA daily)

Drug Name	Drug Tier	Requirements/Limits
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1	
PHARMACEUTICAL ADJUVANTS		
Internal Vehicle Ingredients/Agents		
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)
Liquid Vehicles		
<i>glycine diluent</i>	1	SP; PA
STERILE DILUENT FLOLAN PH 12	2	SP; PA
Semi Solid Vehicles		
LANOLIN XX	2	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	MP
<i>norethindrone acetate TABS</i>	1	MP
<i>progesterone CAPS 200 MG</i>	1	QL(20 EA per 30 day(s) retail)
<i>progesterone CAPS 100 MG</i>	1	QL(1 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and		

Drug Name	Drug Tier	Requirements/Limits
Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1	
<i>disulfiram 250 MG</i>	1	
Anti-Cataplectic Agents		
<i>sodium oxybate SOLN</i>	1	SP; PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP
<i>donepezil hydrochloride TABS 23 MG</i>	1	
<i>donepezil hydrochloride TBDP</i>	1	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	2	QL(1 EA daily)
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	2	
<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	1	QL(2 EA daily)
<i>memantine hcl CP24</i>	1	
<i>memantine hcl SOLN</i>	NP	QL(10 ML daily)
<i>memantine hcl TABS</i>	1	QL(2 EA daily); MP
<i>memantine hcl TABS</i>	NP	QL(1 EA per 28 day(s) retail)
NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	NP	QL(1 EA per 28 day(s) retail)
<i>rivastigmine 13.3 MG/24HR</i>	NP	
<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	QL(1 EA daily)
<i>rivastigmine tartrate CAPS</i>	1	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits
ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
Cerebral Adrenoleukodystrophy (CALD) Agents		
SKYSONA	2	SP; PA
Combination Psychotherapeutics		
LYBALVI	NP	
<i>perphenazine-amitriptyline</i>	1	QL(4 EA daily)
Fibromyalgia Agents		
<i>milnacipran hcl MISC</i>	1	QL(55 EA per 365 day(s) retail); PA
<i>milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG</i>	1	QL(2 EA daily); PA
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION TEPK	2	SP; PA
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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i> fingolimod hcl</i>	1	SP; PA	<i> nicotine polacrilex GUM</i>	0	AL(At least 13 yrs old)
GILENYA (<i> fingolimod hcl</i>)	NP	SP; PA	<i> nicotine polacrilex LOZG</i>	0	AL(At least 13 yrs old)
GILENYA	NP	SP; PA	NICOTINE KIT	0	AL(At least 13 yrs old)
<i> glatiramer acetate SOSY</i>	NP	SP; PA	<i> nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	AL(At least 13 yrs old)
KESIMPTA	2	SP; PA	NICOTROL NS SOLN	NP	AL(At least 13 yrs old); PA
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP	NICOTROL INHA	NP	AL(At least 13 yrs old); PA
MAYZENT TABS	NP	SP	<i> varenicline tartrate TABS</i>	1	QL(2 EA daily); AL(At least 13 yrs old)
OCREVUS ZUNOVO	NP	SP	<i> varenicline tartrate TBPK</i>	1	AL(At least 13 yrs old)
PLEGRIDY SOSY IM	NP	SP	Transthyretin Amyloidosis Agents		
PONVORY STARTER PACK TBPK	NP	SP	ONPATTRO	2	SP; PA
PONVORY TABS	NP	SP	TEGSEDI	2	SP; PA
TASCENSO ODT	NP	SP	Vasomotor Symptom Agents		
TYRUKO CONC IV 300 MG/15ML	NP	SP	<i> paroxetine mesylate (vasomotor)</i>	NP	
ZEPOSIA STARTER KIT CPPK	NP	SP	RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Premenstrual Dysphoric Disorder (PMDD) Agents			Alpha-Proteinase Inhibitor (Human)		
<i> fluoxetine hcl (pmdd) TABS 10 MG</i>	1	AL(At least 7 yrs old)	ARALAST NP SOLR 500 MG, 1000 MG	2	SP; PA
<i> fluoxetine hcl (pmdd) TABS 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)	GLASSIA SOLN	2	SP; PA
Psychotherapeutic and Neurological Agents - Misc.			ZEMAIRA SOLR 1000 MG	2	SP; PA
<i> ergoloid mesylates TABS</i>	1		Cystic Fibrosis Agents		
Smoking Deterrents			KALYDECO PACK 50 MG, 75 MG	2	SP; PA
<i> bupropion hcl (smoking deterrent)</i>	0	AL(At least 13 yrs old)	KALYDECO TABS	2	SP; PA
CHANTIX CONTINUING MONTH PAK TABS (<i> varenicline tartrate</i>)	2	QL(2 EA daily); AL(At least 13 yrs old)	ORKAMBI PACK	2	SP; PA
CHANTIX STARTING MONTH PAK TBPK (<i> varenicline tartrate</i>)	2	AL(At least 13 yrs old)	ORKAMBI TABS	2	SP; PA
CHANTIX TABS (<i> varenicline tartrate</i>)	2	QL(2 EA daily); AL(At least 13 yrs old)	PULMOZYME	2	SP; PA
			SYMDEKO	2	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRIKAFTA TBPK 100 MG-50 MG	2	QL(3 EA daily); SP; PA	<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	
Pulmonary Fibrosis Agents			<i>levothyroxine sodium TABS</i>	1	MP
JASCAYD TABS PO 9 MG, 18 MG	NP	SP	<i>liothyronine sodium TABS</i>	1	MP
<i>nintedanib esylate 100 MG, 150 MG</i>	1	SP; PA	NIVA THYROID TABS	2	MP
OFEV 100 MG, 150 MG (<i>nintedanib esylate</i>)	2	SP; PA	NP THYROID TABS	2	MP
<i>pirfenidone CAPS</i>	1	SP; PA	RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
<i>pirfenidone TABS 534 MG</i>	1	SP	SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	MP
TETRACYCLINES - Drugs to Treat Bacterial Infections			THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
Tetracyclines			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	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1		TOXOIDS		
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	1		Toxoid Combinations		
<i>doxycycline hyclate CAPS</i>	1		ADACEL SUSP	0	AL(At least 19 yrs old)
<i>doxycycline hyclate TABS 100 MG</i>	1		ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0	AL(At least 19 yrs old)
<i>minocycline hcl CAPS</i>	1		BOOSTRIX SUSP	0	AL(At least 19 yrs old)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			BOOSTRIX SUSY	0	AL(At least 19 yrs old)
Antithyroid Agents			DAPTACEL	0	AL(At least 19 yrs old)
<i>methimazole TABS</i>	1	MP	INFANRIX	0	AL(At least 19 yrs old)
<i>propylthiouracil</i>	1	MP	KINRIX SUSY	0	AL(At least 19 yrs old)
Thyroid Hormones			PEDIARIX SUSY	0	AL(At least 19 yrs old)
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			

Drug Name	Drug Tier	Requirements/Limits
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)
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
DERMACINRX DIGENYX TABS 0.125 MG	2	
<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	
<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	
H-2 Antagonists		
<i>cimetidine TABS 300 MG, 400 MG</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1	QL(420 ML per fill retail)
<i>sucralfate TABS</i>	1	QL(4 EA daily); MP
Proton Pump Inhibitors		
<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
NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	NP	RX/OTC
NEXIUM CPDR 20 MG (<i>esomeprazole magnesium</i>)	NP	RX/OTC
NEXIUM PACK 10 MG, 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	NP	
<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	

Drug Name	Drug Tier	Requirements/Limits
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1	
Ulcer Therapy Combinations		
KONVOMEF 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	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	NP	
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 5 MG</i>	1	QL(3 EA daily); MP
<i>oxybutynin chloride TABS 2.5 MG</i>	NP	
<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		

Drug Name	Drug Tier	Requirements/Limits
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	
VACCINES		
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)
PENBRAYA	0	AL(At least 19 yrs old)
PNEUMOVAX 23 SOLN	0	AL(At least 19 yrs old)
PNEUMOVAX 23 SOSY	0	AL(At least 19 yrs old)
PREVNAR 20	0	AL(At least 19 yrs old)
TRUMENBA 0.5 ML	0	AL(At least 19 yrs old)
TYPHIM VI SOLN	0	AL(At least 19 yrs old)
TYPHIM VI SOSY	0	AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VAXCHORA	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)
VAXNEUVANCE	0	AL(At least 19 yrs old)			
VIVOTIF	0	AL(At least 19 yrs old)	FLUAD	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
Viral Vaccines					
ABRYSVO	0	QL(1 EA per fill retail); AL(At least 60 yrs old)	FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 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)	FLUARIX QUADRIVALENT 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)	FLUARIX SUSY	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)	FLUBLOK QUADRIVALENT	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)	FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AREXVY	0	QL(1 EA per fill 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)
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0				
COMIRNATY SUSP	0		FLUCELVAX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
COMIRNATY SUSY	0				
DENGVAXIA	0	AL(At least 19 yrs old)	FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail; 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)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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)
FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	IPOL IJ	0	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)	IXCHIQ	0	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)	IXIARO	0	AL(At least 19 yrs old)
FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	JYNNEOS	0	AL(At least 19 yrs old)
			M-M-R II SOLR	0	AL(At least 19 yrs old)
			MNEXSPIKE SUSY 10 MCG/0.2ML	0	
			MODERNA COVID-19 VAC 6M-11Y SUSP	0	
			MODERNA COVID-19 VAC 6M-11Y SUSY	0	
			NOVAVAX COVID-19 VACCINE SUSP	0	
			NOVAVAX COVID-19 VACCINE SUSY	0	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0		SPIKEVAX SUSP	0	
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0		SPIKEVAX SUSY	0	
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0		STAMARIL SUSR	0	AL(At least 19 yrs old)
PREHEVBRIO	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	TICOVAC	0	AL(At least 19 yrs old)
PRIORIX SUSR	0	AL(At least 19 yrs old)	TWINRIX SUSY	0	AL(At least 19 yrs old)
PROQUAD SUSR	0	AL(At least 19 yrs old)	VAQTA	0	AL(At least 19 yrs old)
RABAVERT	0	AL(At least 19 yrs old)	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	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)	VARIVAX SUSR	0	2 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
RECOMBIVAX HB SUSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	YF-VAX SUSR	0	AL(At least 19 yrs old)
ROTARIX SUSP	0	AL(At least 19 yrs old)	VAGINAL AND RELATED PRODUCTS		
ROTATEQ SOLN	0	AL(At least 19 yrs old)	Spermicides		
SHINGRIX	0	Limit 2 dose per lifetime; 2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)	ENCARE SUPP 100 MG	2	QL(12 EA per fill retail)
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)	OPTIONS GYNOL II CONTRACEPTIVE GEL	2	QL(86 GM per fill retail)
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0		VCF VAGINAL CONTRACEPTIVE FILM	2	QL(9 EA per fill retail)
			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	NP	
			<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	QL(70 GM per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole vaginal</i>	1	
MICONAZOLE 7 SUPP 100 MG	2	QL(7 EA per fill retail)
<i>miconazole nitrate vaginal CREA 4 %</i>	1	QL(15 GM daily)
<i>miconazole nitrate vaginal CREA 2 %</i>	1	QL(45 GM per fill retail)
<i>miconazole nitrate vaginal KIT</i>	1	QL(24 EA per fill retail)
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	QL(3 EA per fill retail)
<i>miconazole nitrate vaginal SUPP 100 MG</i>	1	QL(7 EA per fill retail)
NUVESSA	2	
<i>terconazole vaginal CREA 0.8 %</i>	1	QL(20 GM per fill retail)
<i>terconazole vaginal CREA 0.4 %</i>	1	QL(45 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	2	
Vaginal Anti-inflammatory Agents		
<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)
VASOPRESSORS - Drugs to Treat Heart and		

Drug Name	Drug Tier	Requirements/Limits
Circulation Conditions		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.3 MG/0.3ML	2	QL(6 EA per 180 day(s) retail)
AUVI-Q SOAJ 0.15 MG/0.15ML	2	QL(6 EA per 180 day(s) retail; 6 EA per 180 days mail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	1	QL(6 EA per 180 day(s) retail; 6 EA per 180 days mail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
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)
NEFFY SOLN NA	2	
Neurogenic Orthostatic Hypotension (NOH) - Agents		
<i>droxidopa</i>	1	SP; PA
Vasopressors		
<i>midodrine hcl</i>	1	
VITAMINS		
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	

Drug Name	Drug Tier	Requirements/ Limits
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)
NIACIN ER CPCR	2	
NIACIN ER TBCR	2	
<i>niacin CPCR 250 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	
<i>riboflavin TABS</i>	1	QL(2.94 EA daily)
<i>thiamine hcl TABS</i>	1	QL(2.94 EA daily)
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bisoprolol fumarate 2.5 MG	35	BRILINTA 60 MG, 90 MG (ticagrelor)		BUPHENYL TABS (sodium	
BIVIGAM SOLN	86	58		phenylbutyrate)	53
BLINCYTO	27	brimonidine tartrate 0.1 %, 0.15 %	84	buprenorphine hcl SUBL	8
BONJESTA TBCR	21	brimonidine tartrate 0.2 %	84	buprenorphine hcl-naloxone hcl	
BONSITY SOPN 560 MCG/2.24ML		brimonidine tartrate-timolol maleate .		dihydrate FILM SL 0.5 MG-2 MG ...	8
52		83		buprenorphine hcl-naloxone hcl	
BOOSTRIX SUSP	90	BRIUMVI	88	dihydrate FILM SL 1 MG-4 MG	8
BOOSTRIX SUSY	90	brivaracetam SOLN IV 50 MG/5ML		buprenorphine hcl-naloxone hcl	
bortezomib SOLR IJ	28	13		dihydrate FILM SL 2 MG-8 MG	8
bosentan TABS	37	BRIXADI (WEEKLY) SOSY	7	buprenorphine hcl-naloxone hcl	
bosutinib TABS 100 MG, 500 MG .	28	BRIXADI SOSY 64 MG/0.18ML, 96		dihydrate FILM SL 3 MG-12 MG ...	8
BOTOX IJ	82	MG/0.27ML, 128 MG/0.36ML	7	buprenorphine hcl-naloxone hcl	
BPROTECTED PEDIA POLY-VITE		bromfenac sodium (ophth) 0.09 % .	85	dihydrate SUBL 0.5 MG-2 MG	8
SOLN PO	79	bromocriptine mesylate CAPS	30	buprenorphine hcl-naloxone hcl	
BPROTECTED PEDIA POLY-		bromocriptine mesylate TABS 2.5		dihydrate SUBL 2 MG-8 MG	8
VITE/FE SOLN	79	MG	30	buprenorphine PTWK	8
BRAFTOVI 75 MG	28	brompheniramine & phenyleph ELIX .		bupropion hcl (smoking deterrent)	89
BREATHE COMFORT		41		bupropion hcl TABS	15
CHAMBER/ADULT DEVI	71	brompheniramine & pseudoeph ELIX		bupropion hcl TB12 100 MG	15
BREATHE COMFORT		41		bupropion hcl TB12 150 MG	15
CHAMBER/CHILD DEVI	71	brompheniramine & pseudoeph LIQD		bupropion hcl TB12 200 MG	15
BREATHE EASE LARGE DEVI ...	71	15 MG/5ML-1 MG/5ML	41	bupropion hcl TB24 150 MG	15
		BRYNOVIN SOLN PO 25 MG/ML .	17	bupropion hcl TB24 300 MG	15

bupropion hcl TB24 450 MG	15	calcitonin (salmon) NA	52	carbamazepine CHEW 100 MG	13
bupirone hcl	10	calcitriol CAPS	53	carbamazepine CHEW 200 MG	13
butalbital-acetaminophen TABS 50 MG-325 MG	6	calcium acetate (phosphate binder) CAPS	56	carbamazepine CP12	13
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	6	calcium acetate (phosphate binder) TABS	56	carbamazepine SUSP	13
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	6	CALCIUM ACETATE	75	carbamazepine TABS	13
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	7	calcium carbonate (antacid) CHEW 500 MG	9	carbamazepine TB12	13
butalbital-aspirin-caffeine CAPS	6	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT-600 MG, 400 UNIT-600 MG, 5 MCG-600 MG	75	carbamide peroxide (otic) 6.5 %	86
butalbital-aspirin-caffeine w/cod	7	calcium polycarbophil TABS	60	CARBATROL CP12 (carbamazepine)	13
BUTRANS PTWK (buprenorphine)	8	CAMCEVI	27	carbidopa	30
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (exenatide)	17	camphor & menthol LOTN	44	carbidopa-levodopa TABS	30
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (exenatide)	17	CANASA SUPP (mesalamine)	55	carbidopa-levodopa TBCR	30
CABOMETYX TABS	28	candesartan cilexetil	24	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML	26
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 (amlodipine besylate-atorvastatin calcium)	37	candesartan cilexetil-hydrochlorothiazide	24	CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)	36
caffeine citrate SOLN PO 60 MG/3ML	1	capecitabine	26	CAREONE LANCET SUPER THIN 30G	62
calcipotriene CREA	44	CAPHOSOL SOLN	77	CAREONE LANCET THIN 23G	62
CALCIPOTRIENE FOAM	44	CAPLYTA	30	CARESENS LANCETS	62
calcipotriene OINT	44	CAPRELSA	28	CARESENS LANCETS 30G	63
calcipotriene SOLN	44	capsaicin CREA 0.025 %, 0.075 % 48		CARESTART COVID-19 HOME TEST KIT	50
calcipotriene-betamethasone dipropionate OINT	45	capsaicin CREA 0.035 %	48	CARETOUCH ALCOHOL PREP	69
calcipotriene-betamethasone dipropionate SUSP	45	capsaicin CREA 0.1 %	48	CARETOUCH SAFETY LANCETS 63	
calcitonin (salmon) IJ	52	captopril & hydrochlorothiazide	24	CARETOUCH SAFETY LANCETS 26G	63
		captopril	23	CARETOUCH TWIST LANCETS 28G	63
		CARAC CREA (fluorouracil (topical))	44	CARETOUCH TWIST LANCETS 30G	63
		CARBAGLU (carglumic acid)	53		

CARETOUCH TWIST LANCETS 33G	63	cefuroxime axetil TABS	37	chlorpheniramine maleate SYRP ..	22
CARETOUCH TWIST MC LANCETS 30G	63	celecoxib	5	chlorpheniramine maleate TABS ..	22
carglumic acid	53	CELONTIN (methsuximide)	14	chlorpromazine hcl TABS	31
carisoprodol TABS 250 MG	80	cephalexin CAPS 250 MG, 500 MG 37		chlorthalidone 25 MG, 50 MG	52
carisoprodol TABS 350 MG	80	cephalexin SUSR	37	chlorzoxazone TABS 250 MG, 375 MG, 750 MG	80
carteolol hcl (ophth)	83	CEPROTIN	58	chlorzoxazone TABS 500 MG	80
carvedilol 25 MG	35	CEQUA SOLN	84	CHOLBAM	55
carvedilol 3.125 MG, 6.25 MG, 12.5 MG	35	CERDELGA	58	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT	96
carvedilol phosphate	35	CEREZYME 400 UNIT	58	cholecalciferol CAPS	96
CASGEVY	58	cetirizine hcl CAPS	22	cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML	96
CASTIVA WARMING LOTN	48	cetirizine hcl CHEW	22	cholestyramine light PACK	22
CAYSTON	25	cetirizine hcl SOLN PO	22	cholestyramine light POWD	22
cefaclor CAPS	37	cetirizine hcl SYRP PO 1 MG/ML ..	22	cholestyramine PACK	22
CEFACLOR ER TB12	37	cetirizine hcl TABS	22	cholestyramine POWD	22
cefaclor SUSR 250 MG/5ML	37	CETRAXAL (ciprofloxacin hcl (otic)) . 86		CHORIONIC GONADOTROPIN IM 52	
cefadroxil CAPS	37	CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ..	89	CHOSEN LANCETS 30G	63
cefadroxil SUSR	37	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)	89	CHOSEN SAFETY LANCETS 28G 63	
cefadroxil TABS	37	CHANTIX TABS (varenicline tartrate)	89	CIBINQO	47
cefdinir CAPS	38	CHEMET	20	ciclopirox SOLN	43
cefdinir SUSR	38	CHEMSTRIP K STRP	50	cilostazol	58
cefixime CAPS	38	chenodiol	55	cimetidine TABS 200 MG	91
cefixime SUSR	38	chlordiazepoxide hcl CAPS	10	cimetidine TABS 300 MG, 400 MG 91	
cefpodoxime proxetil SUSR	38	chlorhexidine gluconate (mouth- throat)	76	cimetidine TABS 800 MG	91
cefpodoxime proxetil TABS	38	chloroquine phosphate TABS 250 MG	25	cinacalcet hcl	53
cefprozil SUSR	37	chloroquine phosphate TABS 500 MG	25	CINQAIR	10
cefprozil TABS	37				

CINRYZE SOLR IV	57	CLEVER CHOICE LANCETS 23G 63	clobetasol propionate LOTN	46	
CIPRO SUSR	54	CLEVER CHOICE LANCETS 28G 63	clobetasol propionate OINT 0.05 % 46		
ciprofloxacin hcl (ophth) SOLN	84	clindamycin hcl 150 MG, 300 MG .	25	clobetasol propionate SHAM	46
ciprofloxacin hcl (otic)	86	clindamycin palmitate hydrochloride .	25	clobetasol propionate SOLN 0.05 % .	46
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	54	clindamycin phosphate (topical) GEL	42	clocortolone pivalate	46
ciprofloxacin-dexamethasone	86	clindamycin phosphate (topical)	42	CLODERM (clocortolone pivalate)	46
cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML	26	clindamycin phosphate (topical)	42	clomipramine hcl	16
CISPLATIN SOLR	26	clindamycin phosphate (topical)	42	clonazepam TABS	13
CITALOPRAM HYDROBROMIDE CAPS 30 MG (citalopram hydrobromide)	15	clindamycin phosphate vaginal CREA	95	clonazepam TBDP	13
citalopram hydrobromide CAPS 30 MG	15	clindamycin phosphate-benzoyl peroxide (refrigerate)	42	clonidine hcl (adhd) TB12	2
citalopram hydrobromide SOLN ...	15	clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 % .	42	clonidine hcl TABS	24
citalopram hydrobromide TABS ...	15	clindamycin phosphate-tretinoin ..	42	clopidogrel bisulfate 300 MG	58
cladribine 10 MG/10ML	26	CLINDESSE	95	clopidogrel bisulfate 75 MG	58
clarithromycin SUSR	61	CLINITEST RAPID COVID-19 TEST KIT	50	clorazepate dipotassium TABS	10
clarithromycin TABS	61	clobazam SUSP	13	clotrimazole (topical) CREA	43
clarithromycin TB24	61	clobazam TABS	13	clotrimazole (topical) SOLN	43
CLEANLET LANCETS 28G	63	clobetasol propionate CREA 0.05 % .	45	clotrimazole vaginal CREA 1 % ...	95
CLEARDETECT COVID-19 AG HOME KIT	50	clobetasol propionate emollient base 0.05 %	45	clotrimazole vaginal CREA 2 % ...	95
CLEOCIN CREA (clindamycin phosphate vaginal)	95	clobetasol propionate emulsion ...	45	clotrimazole w/ betamethasone CREA	43
CLEVER CHEK LANCETS	63	clobetasol propionate FOAM	45	clotrimazole w/ betamethasone LOTN	43
CLEVER CHOICE COMFORT EZ 63		clobetasol propionate GEL 0.05 %	45	clozapine TABS	31
CLEVER CHOICE HOLDING CHAMBER DEVI	71	clobetasol propionate LIQD	45	clozapine TBDP	31
CLEVER CHOICE LANCETS 21G 63				CO MONITOR REPLACEMENT PIECES MISC	71
				COAGADDEX	57
				COAGUCHEK LANCETS	63
				coal tar extract SHAM 0.5 %	49

COARTEM	25	28G	63	COSENTYX SENSOREADY (300 MG) SOAJ	44
COBAS LIAT SARS-COV-2 ASSAY 50		COMFORT TOUCH PLUS LANCETS 30G	63	COSENTYX SENSOREADY PEN SOAJ	44
COBAS LIAT SARS-COV-2 CONTROL	50	COMFORT TOUCH TWIST LANCET 30G	63	COSENTYX SOLN	44
COBENFY CAPS	31	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	93	COSENTYX SOSY	44
COBENFY STARTER PACK CPPK 31		COMIRNATY SUSP	93	COSENTYX UNOREADY SOAJ ..	44
codeine sulfate TABS 30 MG	6	COMIRNATY SUSY	93	cosyntropin SOLR	50
CODEINE SULFATE TABS	6	COMPACT SPACE CHAMBER DEVI	71	COTELLIC	28
colchicine TABS	56	COMPACT SPACE CHAMBER/LG MASK DEVI	71	COVID-19 AT HOME ANTIGEN TEST KIT	50
colchicine w/ probenecid	56	COMPACT SPACE CHAMBER/MED MASK DEVI	71	COVID-19 AT-HOME TEST KIT ...	50
colestipol hcl GRAN	22	COMPACT SPACE CHAMBER/SM MASK DEVI	71	COVID-19 OTC ANTIGEN 1-PACK KIT	50
colestipol hcl TABS	22	COMPLERA 200 MG-300 MG-25 MG (emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	32	COVID-19 OTC ANTIGEN 2-PACK KIT	50
COLLAVERA GEL 2 %	48	CONCERTA TBCR (methylphenidate hcl)	2	CREON CPEP	51
COMBIGAN (brimonidine tartrate- timolol maleate)	83	CONDOMS-MISC	62	CRINONE GEL	96
COMBIPATCH PTTW	54	CONJUPRI (levamlodipine maleate) 36		cromolyn sodium (nasal) 5.2 MG/ACT	81
COMBIVENT RESPIMAT AERS ..	12	CONZIP CP24 (tramadol hcl)	6	cromolyn sodium (ophth)	85
COMETRIQ (100 MG DAILY DOSE) KIT	28	COPAXONE SOSY (glatiramer acetate)	88	cromolyn sodium NEBU	10
COMETRIQ (140 MG DAILY DOSE) KIT	28	COREG CR (carvedilol phosphate) 35		CRYSVITA	53
COMETRIQ (60 MG DAILY DOSE) KIT	28	CORIFACT	57	CTEXLI TABS PO 250 MG	55
COMFORT ASSURED LANCETS 28G	63	CORTISONE ACETATE TABS ...	40	CULTURELLE DIGESTIVE DAILY CAPS	20
COMFORT ASSURED LANCETS 33G	63	CORTROPHIN GEL	52	CULTURELLE KIDS CHEW	19
COMFORT TOUCH ALCOHOL PREP	69	COSENTYX (300 MG DOSE) SOSY .	44	CULTURELLE KIDS PURELY CHEW	19
COMFORT TOUCH LANCETS 31G .	63			CURITY ALCOHOL PREPS	69
COMFORT TOUCH PLUS LANCETS				CUVITRU SOLN	86
				CVS ALCOHOL PREP PADS	69
				CVS COVID-19 AT HOME TEST KIT	

KIT	50	(duloxetine hcl)	16	28	
CVS LANCETS ORIGINAL	63	cyproheptadine hcl SYRP	22	DAURISMO	27
CVS LANCETS THIN 26G	63	cyproheptadine hcl TABS	22	DAYHIST ALLERGY 12 HOUR RELIEF TABS	22
CVS LICE-BEDBUG-MITE AERO 0.5 %	49	CYRAMZA	26	decitabine	26
CVS PREP	69	CYSTAGON CAPS	56	deferasirox PACK	20
CVS ULTRA THIN LANCETS	63	CYSTARAN	85	deferasirox TABS	20
cyanocobalamin SOLN IJ 1000 MCG/ML	58	cytarabine SOLN	26	deferasirox TBSO	20
cyclobenzaprine hcl CP24	80	CYTOGAM SOLN	86	deferiprone TABS	20
cyclobenzaprine hcl TABS 5 MG, 10 MG	80	CYTRA K CRYSTALS PACK 1002 MG-3300 MG	56	deferoxamine mesylate	20
cyclobenzaprine hcl TABS 7.5 MG 80		dabigatran etexilate mesylate CAPS . 13		DEFITELIO	58
CYCLOGYL 0.5 %	84	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	deflazacort SUSP	40
cyclopentolate hcl 1 %	84	dalfampridine	88	deflazacort TABS	40
cyclophosphamide CAPS 50 MG ..	26	DANTRIUM CAPS 25 MG (dantrolene sodium)	80	DEFLUX	56
CYCLOPHOSPHAMIDE TABS	26	dantrolene sodium CAPS	80	DELSTRIGO	32
cyclosporine (ophth) EMUL	84	dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG, 1000 MG-5 MG	16	DENAVIR (penciclovir)	45
cyclosporine CAPS	76	dapagliflozin TABS PO 5 MG, 10 MG	19	DENGVAXIA	93
cyclosporine modified (for microemulsion) CAPS	76	dapsone	25	DEPAKOTE SPRINKLES CSDR (divalproex sodium)	14
cyclosporine modified (for microemulsion) SOLN	76	DAPTACEL	90	DEPO-SUBQ PROVERA 104 SUSY SC	40
cyclosporine SOLN IV 50 MG/ML ..	76	DARAPRIM (pyrimethamine)	25	DERMACINRX DIGENYX TABS 0.125 MG	91
CYLTEZO (2 PEN) AJKT	4	darifenacin hydrobromide	92	DERMACINRX LIDOCAINE CREA 3 %	48
CYLTEZO (2 SYRINGE) PSKT	4	darunavir TABS	32	DERMACINRX PROBISOL CAPS ..	19
CYLTEZO-CD/UC/HS STARTER AJKT	4	DARZALEX	27	DERMACINRX PROBITRAN CAPS 19	
CYLTEZO-PSORIASIS/UV STARTER AJKT	4	dasatinib	28	DERMACINRX SALICYLIC ACID GEL 6 %	48
CYMBALTA CPEP 20 MG, 30 MG (duloxetine hcl)	16	daunorubicin hcl SOLN 50 MG/10ML		DESCOVY 120 MG-15 MG	32
CYMBALTA CPEP 60 MG				DESCOVY 200 MG-25 MG	32

desipramine hcl TABS 16	DEXAMETHASONE INTENSOL CONC 40	MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML 41
DESLORATADINE SOLN PO 0.5 MG/ML 22	dexamethasone sodium phosphate (ophth) 85	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML 41
desloratadine TBDP 22	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML 40	dextrose (diabetic use) CHEW 4 GM . 17
desmopressin acetate SOLN IJ ... 54	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML . 40	DHIVY TABS 30
DESMOPRESSIN ACETATE SOLN NA 54	dexamethasone sodium phosphate SOSY IJ 4 MG/ML 41	DIALYVITE TABS 100 MG-10 MG- 0.3 MG-1 MG-1.5 MG-0.006 MG-10 MG-1.7 MG-20 MG 77
desmopressin acetate spray 54	dexamethasone SOLN 41	DIATHRIVE LANCET ULTRA THIN 30 63
desmopressin acetate spray refrigerated 0.01 % 54	dexamethasone TABS 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 4 MG, 6 MG .. 41	DIATHRIVE LANCETS 63
desmopressin acetate TABS 54	dexchlorpheniramine maleate SOLN . 22	DIATRUST COVID-19 HOME TEST KIT 50
desogestrel & ethinyl estradiol 38	dexmedetomidine hcl in sodium chloride SOLN 60	diazepam CONC 10
desogestrel-ethinyl estradiol (biphasic) 38	dexmedetomidine hcl SOLN 200 MCG/2ML 60	diazepam SOLN IJ 5 MG/ML, 10 MG/2ML 10
desogestrel-ethinyl estradiol (triphasic) 38	dexmethylphenidate hcl CP24 2	diazepam SOLN IJ 5 MG/ML 10
desonide CREA 46	dexmethylphenidate hcl TABS 2	DIAZEPAM SOLN IJ 5 MG/ML 10
desonide LOTN 46	dexrazoxane hcl 29	diazepam SOLN PO 5 MG/5ML ... 10
desonide OINT 46	DEXTENZA INST 85	diazepam TABS 10
desoximetasone CREA 0.05 % 46	dextroamphetamine sulfate CP24 10 MG, 15 MG 1	diazoxide 17
desoximetasone CREA 0.25 % 46	dextroamphetamine sulfate CP24 5 MG 1	dibucaine 48
desoximetasone GEL 46	dextroamphetamine sulfate SOLN .. 1	DICLEGIS TBEC (doxylamine- pyridoxine) 21
desoximetasone LIQD 46	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG 1	diclofenac potassium TABS 50 MG .5
desoximetasone OINT 46	dextroamphetamine sulfate TABS 5 MG, 10 MG 1	diclofenac sodium (ophth) 85
DESTRESS-IRON TABS 77	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150	diclofenac sodium (topical) GEL EX 44
DESVENLAFAXINE ER 16		diclofenac sodium TB24 5
desvenlafaxine succinate 100 MG .16		diclofenac sodium TBEC 5
desvenlafaxine succinate 25 MG, 50 MG 16		dicloxacillin sodium 87
DETROL LA CP24 (tolterodine tartrate) 92		
dexamethasone ELIX 41		

dicyclomine hcl CAPS	91	dimethyl fumarate CDPK	88	MG/8ML, 160 MG/16ML	29
dicyclomine hcl SOLN PO	91	dimethyl fumarate CPDR	88	docetaxel SOLN	29
dicyclomine hcl TABS	91	diphenhydramine hcl (sleep) CAPS	59	DOCIVYX SOLN	29
DIFFERIN CREA (adapalene)	42	diphenhydramine hcl (sleep) LIQD	59	docusate sodium CAPS 100 MG, 250	
DIFFERIN GEL 0.3 % (adapalene)	42	diphenhydramine hcl (sleep) TABS	25 MG	MG	61
DIFFERIN LOTN	42	diphenhydramine hcl (sleep) TABS	50 MG	docusate sodium CAPS 50 MG ...	61
diflorasone diacetate CREA	46	diphenhydramine hcl (sleep) TABS	50 MG	docusate sodium LIQD 50 MG/5ML,	
diflorasone diacetate OINT	46	diphenhydramine hcl CAPS	22	100 MG/10ML	61
diflunisal TABS	6	diphenhydramine hcl ELIX 12.5	MG/5ML	DOCUSATE SODIUM SYRP	61
digoxin SOLN PO 0.05 MG/ML	36	diphenhydramine hcl ELIX 12.5	MG/5ML, 25 MG/10ML, 50 MG/20ML	docusate sodium TABS	61
digoxin TABS 125 MCG, 250 MCG	36	diphenhydramine hcl LIQD 12.5	MG/5ML, 25 MG/10ML, 50 MG/20ML	dofetilide	10
dihydroergotamine mesylate SOLN		diphenhydramine hcl LIQD 12.5	MG/5ML, 25 MG/10ML, 50 MG/20ML	donepezil hydrochloride TABS 23	
NA 4 MG/ML	74	diphenhydramine hcl LIQD 12.5	MG/5ML, 25 MG/10ML, 50 MG/20ML	MG	88
DILANTIN (phenytoin sodium		diphenhydramine hcl TABS 25 MG	22	donepezil hydrochloride TABS 5 MG,	
extended)	14	diphenhydramine hcl TABS 25 MG	22	10 MG	88
DILANTIN INFATABS CHEW		diphenhydramine-acetaminophen	(sleep) TABS 500 MG-25 MG, 500	donepezil hydrochloride TBDP	88
(phenytoin)	14	MG-38 MG	60	DOPTELET	58
diltiazem hcl coated beads CP24 120		diphenoxylate w/ atropine LIQD ...	20	dorzolamide hcl	85
MG, 180 MG, 300 MG	36	diphenoxylate w/ atropine TABS ...	20	DORZOLAMIDE HCL	85
diltiazem hcl coated beads CP24 240		DIPROLENE OINT (betamethasone	dipropionate augmented)	DORZOLAMIDE HCL-TIMOLOL MAL	
MG	36	46	dipyridamole .....	.....	83
diltiazem hcl coated beads CP24 360		58	disopyramide phosphate CAPS ...	dorzolamide hcl-timolol maleate ..	83
MG	36	10	disulfiram 250 MG	DOVATO	32
diltiazem hcl CP12	36	88	divalproex sodium CSDR	doxazosin mesylate	24
diltiazem hcl CP24 120 MG, 240 MG		14	divalproex sodium TB24	doxepin hcl (sleep)	60
36		14	divalproex sodium TBEC	doxepin hcl CAPS 10 MG, 25 MG, 50	
diltiazem hcl CP24 180 MG	36	14	docetaxel CONC 160 MG/8ML	MG, 75 MG, 100 MG	16
diltiazem hcl extended release beads		16	DOCETAXEL CONC 160 MG/8ML	doxepin hcl CAPS 150 MG	16
.....	36	29	29	doxepin hcl CONC	16
diltiazem hcl TABS	36	DOCETAXEL CONC 160 MG/8ML	29	doxycycline (monohydrate) CAPS 50	
diltiazem hcl TB24 180 MG, 240 MG,		DOCETAXEL SOLN 20 MG/2ML, 80		MG, 100 MG	90
300 MG, 360 MG, 420 MG	36			doxycycline (monohydrate) TABS 50	
				MG, 100 MG	90

doxycycline hyclate CAPS	90	duloxetine hcl CPEP 20 MG, 30 MG, 40 MG	16	EASY TOUCH LANCETS 30G/TWIST	64
doxycycline hyclate TABS 100 MG 90		duloxetine hcl CPEP 60 MG	16	EASY TOUCH LANCETS 32G ...	64
doxylamine succinate (sleep)	60	DUPIXENT SOAJ	47	EASY TOUCH LANCETS 32G/TWIST	64
doxylamine-pyridoxine TBEC	21	DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	48	EASY TOUCH LANCETS 33G/TWIST	64
droperidol SOLN 2.5 MG/ML	10	DUPIXENT SOSY 300 MG/2ML ...	47	EASY TOUCH SAFETY LANCETS 21G	64
DROPLET LANCETS ULTRA THIN 30G	63	dutasteride	56	EASY TOUCH SAFETY LANCETS 23G	64
DROPLET PERSONAL LANCETS 30G	63	dutasteride-tamsulosin hcl	56	EASY TOUCH SAFETY LANCETS 26G	64
DROPSAFE ACTI-LANCE 23G ...	63	DYANAVEL XR TBCR	1	EASY TOUCH SAFETY LANCETS 28G	64
DROPSAFE ALCOHOL PREP ...	69	DYMISTA SUSP (azelastine hcl- fluticasone propionate)	81	EASY TOUCH SAFETY LANCETS 28G	64
DROPSAFE MEDLANCE LANCET 30G	63	DYSPORT	82	EBASE CONTROLLER KIT MISC .	71
drospirenone-ethinyl estradiol	38	E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)	61	EBGLYSS SOAJ	48
drospirenone-ethinyl estradiol- levomefolate calcium	38	EASIVENT MASK LARGE MISC ..	71	EBGLYSS SOSY	48
DROXIA CAPS	58	EASIVENT MASK MEDIUM MISC	71	econazole nitrate CREA	43
droxidopa	96	EASIVENT MASK SMALL MISC ..	71	EDURANT 25 MG (rilpivirine hcl) ..	32
DRUG MART ON-THE-GO LANCET 30G	63	EASIVENT MISC	71	EDURANT PED PO 2.5 MG	32
DRUG MART UNILET LANCETS 28G	63	EASY COMFORT ALCOHOL PADS 69		efavirenz CAPS 200 MG	32
DRUG MART UNILET LANCETS 30G	63	EASY COMFORT LANCETS	63	efavirenz CAPS 50 MG	32
DRUG MART UNILET LANCETS 33G	63	EASY COMFORT LANCETS TWIST TOP	63	efavirenz TABS	33
DUETACT (pioglitazone hcl- glimepiride)	16	EASY TOUCH ALCOHOL PREP MEDIUM	69	efavirenz-emtricitabine-tenofovir disoproxil fumarate	32
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	12	EASY TOUCH LANCETS 21G ...	63	efavirenz-emtricitabine-tenofovir disoproxil fumarate	32
DULERA 50 MCG/ACT-5 MCG/ACT . 12		EASY TOUCH LANCETS 23G ...	63	EFFER-K TBEF 25 MEQ	75
		EASY TOUCH LANCETS 26G ...	63	ELAPRASE	53
		EASY TOUCH LANCETS 28G ...	63	ELELYSO	58
		EASY TOUCH LANCETS 28G/TWIST	63	ELEPSIA XR TB24	13
		EASY TOUCH LANCETS 30G ...	64	eletriptan hydrobromide	74

ELEVIDYS 10.0-10.4 KG .....81	ELEVIDYS 39.5-40.4 KG .....82	ELEVIDYS 69.5 KG PLUS .....82
ELEVIDYS 10.5-11.4 KG .....81	ELEVIDYS 40.5-41.4 KG .....82	ELIDEL (pimecrolimus) .....48
ELEVIDYS 11.5-12.4 KG .....81	ELEVIDYS 41.5-42.4 KG .....82	ELIGARD KIT SC 7.5 MG .....27
ELEVIDYS 12.5-13.4 KG .....81	ELEVIDYS 42.5-43.4 KG .....82	ELIGARD SC 22.5 MG, 30 MG, 45 MG .....27
ELEVIDYS 13.5-14.4 KG .....81	ELEVIDYS 43.5-44.4 KG .....82	ELIMITE CREA (permethrin) .....49
ELEVIDYS 14.5-15.4 KG .....81	ELEVIDYS 44.5-45.4 KG .....82	ELIQUIS (1.5 MG PACK) TBSO PO . 12
ELEVIDYS 15.5-16.4 KG .....81	ELEVIDYS 45.5-46.4 KG .....82	ELIQUIS (2 MG PACK) TBSO PO .12
ELEVIDYS 16.5-17.4 KG .....81	ELEVIDYS 46.5-47.4 KG .....82	ELIQUIS CPSP PO 0.15 MG .....12
ELEVIDYS 17.5-18.4 KG .....81	ELEVIDYS 47.5-48.4 KG .....82	ELIQUIS DVT/PE STARTER PACK TBPk .....12
ELEVIDYS 18.5-19.4 KG .....81	ELEVIDYS 48.5-49.4 KG .....82	ELIQUIS TABS .....12
ELEVIDYS 19.5-20.4 KG .....81	ELEVIDYS 49.5-50.4 KG .....82	ELIQUIS TBSO PO 0.5 MG .....12
ELEVIDYS 20.5-21.4 KG .....81	ELEVIDYS 50.5-51.4 KG .....82	ELLA .....40
ELEVIDYS 21.5-22.4 KG .....81	ELEVIDYS 51.5-52.4 KG .....82	ELLECE SOLN .....28
ELEVIDYS 22.5-23.4 KG .....81	ELEVIDYS 52.5-53.4 KG .....82	ELLUME COVID-19 HOME TEST KIT .....50
ELEVIDYS 23.5-24.4 KG .....81	ELEVIDYS 53.5-54.4 KG .....82	ELMIRON CAPS .....56
ELEVIDYS 24.5-25.4 KG .....81	ELEVIDYS 54.5-55.4 KG .....82	ELOCTATE .....57
ELEVIDYS 25.5-26.4 KG .....81	ELEVIDYS 55.5-56.4 KG .....82	eltrombopag olamine PACK 12.5 MG.....58
ELEVIDYS 26.5-27.4 KG .....81	ELEVIDYS 56.5-57.4 KG .....82	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 .....82	EMBECTA AUTOSHIELD DUO ...70
ELEVIDYS 28.5-29.4 KG .....81	ELEVIDYS 58.5-59.4 KG .....82	EMBECTA PEN NEEDLE NANO .70
ELEVIDYS 29.5-30.4 KG .....81	ELEVIDYS 59.5-60.4 KG .....82	EMBECTA PEN NEEDLE NANO 2 GEN .....70
ELEVIDYS 30.5-31.4 KG .....81	ELEVIDYS 60.5-61.4 KG .....82	EMBECTA PEN NEEDLE ULTRAFINE .....70
ELEVIDYS 31.5-32.4 KG .....82	ELEVIDYS 61.5-62.4 KG .....82	EMBRACE LANCETS ULTRA THIN 30G .....64
ELEVIDYS 32.5-33.4 KG .....82	ELEVIDYS 62.5-63.4 KG .....82	EMBRACE PRESSURE ACTIVATED
ELEVIDYS 33.5-34.4 KG .....82	ELEVIDYS 63.5-64.4 KG .....82	
ELEVIDYS 34.5-35.4 KG .....82	ELEVIDYS 64.5-65.4 KG .....82	
ELEVIDYS 35.5-36.4 KG .....82	ELEVIDYS 65.5-66.4 KG .....82	
ELEVIDYS 36.5-37.4 KG .....82	ELEVIDYS 66.5-67.4 KG .....82	
ELEVIDYS 37.5-38.4 KG .....82	ELEVIDYS 67.5-68.4 KG .....82	
ELEVIDYS 38.5-39.4 KG .....82	ELEVIDYS 68.5-69.4 KG .....82	

21G	64	enoxaparin sodium SOSY 30 MG/0.3ML	13	epoprostenol sodium	37
EMBRACE PRESSURE ACTIVATED 28G	64	enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML	13	EPRONTIA SOLN 25 MG/ML (topiramate)	13
EMCYT	27	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	13	EQ SPACE CHAMBER ANTI- STATIC DEVI	72
EMGALITY (300 MG DOSE) SOSY 74	74	ENTADFI	56	EQ SPACE CHAMBER ANTI- STATIC L DEVI	71
EMGALITY SOAJ	74	ENTRESTO CPSP	37	EQ SPACE CHAMBER ANTI- STATIC M DEVI	72
EMGALITY SOSY	74	ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan)	37	EQ SPACE CHAMBER ANTI- STATIC S DEVI	72
EMPLICITI	27	ENTYVIO PEN SOAJ	55	EQL ALCOHOL SWABS	69
emtricitabine CAPS	33	EPCLUSA PACK	34	ERBITUX	27
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	33	EPCLUSA TABS	34	ergocalciferol CAPS	96
emtricitabine-tenofovir disoproxil fumarate	33	EPIDUO FORTE GEL (adapalene- benzoyl peroxide)	42	ergoloid mesylates TABS	89
EMTRIVA CAPS (emtricitabine) ...	33	EPIFOAM FOAM	46	ergotamine w/ caffeine TABS	74
EMTRIVA SOLN	33	epinastine hcl (ophth)	85	eribulin mesylate	29
EMVERM CHEW	9	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML	96	ERIVEDGE	27
enalapril maleate & hydrochlorothiazide	24	epinephrine (anaphylaxis) SOAJ ..	96	ERLEADA 60 MG	27
enalapril maleate TABS	23	epinephrine hcl (nasal)	81	erlotinib hcl	27
ENBREL MINI SOCT	5	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))	96	ertapenem sodium IJ	25
ENBREL SOLN	6	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis))	96	ERYPED 200 SUSR (erythromycin ethylsuccinate)	61
ENBREL SOSY	6	EPIVIR SOLN (lamivudine)	33	erythromycin (acne aid) GEL	42
ENBREL SURECLICK SOAJ	6	EPIVIR TABS 150 MG (lamivudine) 33	33	erythromycin (acne aid) SOLN	42
ENCARE SUPP 100 MG	95	EPIVIR TABS 300 MG (lamivudine) 33	33	erythromycin (ophth)	84
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	79	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	58	ERYTHROMYCIN	84
ENGERIX-B SUSP 20 MCG/ML ...	93			erythromycin base CPEP	61
ENGERIX-B SUSY	93			erythromycin base TABS	61
enoxaparin sodium SOLN IJ 300 MG/3ML	13			erythromycin base TBEC	61
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	13			erythromycin ethylsuccinate SUSR 61	

erythromycin ethylsuccinate TABS 61	etonogestrel-ethinyl estradiol 39	EYLEA SOLN 84
ERZOFRI 351 MG/2.25ML 30	etoposide CAPS 29	EYSUVIS SUSP 85
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML 31	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML 29	ezetimibe 23
ESCITALOPRAM OXALATE CAPS PO 15 MG 15	etravirine 100 MG 33	ezetimibe-simvastatin 22
escitalopram oxalate SOLN 15	etravirine 200 MG 33	FABRAZYME 53
escitalopram oxalate TABS 15	EUFLEXXA SOSY 80	famciclovir 35
esomeprazole magnesium CPDR . 91	EULEXIN 27	famotidine TABS 10 MG 91
esomeprazole magnesium PACK . 91	EVENITY 52	famotidine TABS 20 MG, 40 MG .. 91
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT 57	everolimus (immunosuppressant) .76	FANAPT TITRATION PACK B 31
estazolam 60	everolimus TABS 28	FANAPT TITRATION PACK C ... 31
estradiol & norethindrone acetate TABS 54	everolimus TBSO 28	FARXIGA TABS PO (dapagliflozin) 19
estradiol PTTW 54	EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG 90	FASENRA PEN SOAJ 10
estradiol PTWK 54	EVOMELA IV 26	FASENRA SOSY 10 MG/0.5ML ... 10
estradiol TABS 54	EVOTAZ 33	FASTEP COVID-19 ANTIGEN TEST KIT 50
estradiol vaginal CREA 96	EVRYSDI 82	FEIBA 57
estradiol vaginal TABS 96	EVRYSDI PO 5 MG 82	felbamate SUSP 14
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG 54	EXELON 13.3 MG/24HR (rivastigmine) 88	felbamate TABS 14
eszopiclone 60	EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine) 88	felodipine 36
ethambutol hcl TABS 26	exemestane 27	fenofibrate CAPS 23
ethosuximide CAPS 14	exenatide SOPN 10 MCG/0.04ML .17	fenofibrate micronized 134 MG, 200 MG 23
ethosuximide SOLN 14	exenatide SOPN 5 MCG/0.02ML .. 17	fenofibrate micronized 30 MG, 43 MG, 130 MG 23
ethynodiol diacet & eth estrad 38	EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide) 24	fenofibrate micronized 67 MG 23
etodolac CAPS 5	EXONDYS 51 82	fenofibrate TABS 40 MG, 120 MG .23
etodolac TABS 5	EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG 15	fenofibrate TABS 54 MG 23
etodolac TB24 5	EXXUA TITRATION PACK TB24 PO 18.2 MG 15	fenofibric acid 23
		FENOGLIDE TABS (fenofibrate) .. 23
		FENSOLVI (6 MONTH) SC 53

fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	6	finasteride	56	fluconazole SUSR	21
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	6	FINGERSTIX LANCETS	64	fluconazole TABS 100 MG	21
FERRETT'S TABS	59	fingolimod hcl	89	fluconazole TABS 150 MG	21
ferric citrate	56	FIRDAPSE	26	fluconazole TABS 200 MG	21
FERRIPROX SOLN	20	FIRMAGON (240 MG DOSE)	27	fluconazole TABS 50 MG	21
ferrous fumarate TABS	59	FIRMAGON 80 MG	27	fludarabine phosphate SOLN	26
ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS	59	FIRST-PROGESTERONE VGS SUPP	96	fludarabine phosphate SOLR	26
ferrous gluconate TABS	59	flavoxate hcl	92	fludrocortisone acetate TABS	41
ferrous sulfate dried TBCR	59	FLEBOGAMMA DIF SOLN 5 GM/100ML, 10 GM/200ML, 20 GM/400ML	86	FLULAVAL QUADRIVALENT SUSY . 94	
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	59	flecainide acetate	10	FLULAVAL SUSY	94
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	59	FLEQSUVY SUSP (baclofen)	80	FLUMIST	94
ferrous sulfate TABS	59	FLEXICHAMBER DEVI	72	FLUMIST QUADRIVALENT	94
ferrous sulfate TBEC 325 MG	59	FLORAVITA MINI TABS	77	flunisolide (nasal)	81
ferrous sulfate TBEC	59	FLORRAGUT CAPS	19	fluocinolone acetonide (otic)	86
fesoterodine fumarate	92	FLORRAXIS CAPS	19	fluocinolone acetonide CREA	46
FEVERALL JUNIOR STRENGTH SUPP	6	FLOWFLEX COVID-19 AG HOME TEST KIT	50	fluocinolone acetonide OIL	46
fexofenadine hcl SUSP	22	FLUAD	93	fluocinolone acetonide OINT	46
fexofenadine hcl TABS 180 MG ...	22	FLUAD QUADRIVALENT	93	fluocinolone acetonide SOLN	46
fexofenadine hcl TABS 60 MG	22	FLUARIX QUADRIVALENT SUSY	93	fluocinonide CREA 0.05 %	46
FIBRICOR (fenofibric acid)	23	FLUARIX SUSY	93	fluocinonide CREA 0.1 %	46
FIBRYGA	57	FLUBLOK QUADRIVALENT	93	fluocinonide emulsified base	46
FIFTY50 ALCOHOL PREP	69	FLUBLOK SOSY	93	fluocinonide GEL	46
FIFTY50 SAFETY SEAL LANCETS . 64		FLUCELVAX QUADRIVALENT SUSP	93	fluocinonide OINT	46
FIFTY50 UNILET LANCETS 33G .64		FLUCELVAX QUADRIVALENT SUSY	93	fluocinonide SOLN	46
FILTER AIR PP MISC	72	FLUCELVAX SUSP	93	FLUORIDEX DAILY RENEWAL CONC 0.63 %	76
		FLUCELVAX SUSY	94	fluorometholone (ophth) SUSP	85
				fluorouracil (topical) CREA 0.5 % ..	44
				fluorouracil (topical) CREA 5 % ...	44
				fluorouracil (topical) SOLN	44

fluoxetine hcl (pmdd) TABS 10 MG 89	fluvastatin sodium TB24 23	FREESTYLE LANCETS 64
fluoxetine hcl (pmdd) TABS 20 MG 89	fluvoxamine maleate CP24 15	FREESTYLE LIBRE 14 DAY READER 64
fluoxetine hcl CAPS 15	fluvoxamine maleate TABS 15	FREESTYLE LIBRE 14 DAY SENSOR 64
fluoxetine hcl CPDR 15	FLUZONE HIGH-DOSE QUADRIVALENT 94	FREESTYLE LIBRE 2 PLUS SENSOR 64
fluoxetine hcl SOLN 15	FLUZONE HIGH-DOSE SUSY 94	FREESTYLE LIBRE 2 PLUS SENSOR 64
FLUOXETINE HCL TABS (fluoxetine hcl) 15	FLUZONE QUADRIVALENT SUSP 94	FREESTYLE LIBRE 2 READER .. 64
fluoxetine hcl TABS 10 MG 15	FLUZONE QUADRIVALENT SUSY 94	FREESTYLE LIBRE 2 SENSOR .. 64
fluoxetine hcl TABS 20 MG 15	FLUZONE SUSP 94	FREESTYLE LIBRE 3 PLUS SENSOR 64
fluoxetine hcl TABS 60 MG 15	FLUZONE SUSY 94	FREESTYLE LIBRE 3 READER .. 64
fluphenazine decanoate 31	FLYP HYPERSONIQ CARTRIDGE MISC 72	FREESTYLE LIBRE 3 SENSOR .. 64
fluphenazine hcl TABS 31	FOCALIN XR CP24 (dexmethylphenidate hcl) 2	FREESTYLE LIBRE READER 64
flurandrenolide CREA 46	folic acid TABS 1 MG 58	FREESTYLE UNISTICK II LANCETS 64
flurandrenolide LOTN 46	folic acid TABS 400 MCG, 800 MCG . 58	frovatriptan succinate 74
flurazepam hcl 60	FOLOTYN 26	FT LICE-BEDBUG-MITE AERO 0.5 % 49
flurbiprofen sodium 85	fondaparinux sodium 13	FULL KIT NEBULIZER SET MISC 72
flurbiprofen TABS 5	FONDCIRCLE SINGLE USE LANCETS 64	FULPHILA 58
fluticasone propionate (inhalation) AEPB 11	FORA LANCETS 64	furosemide SOLN PO 8 MG/ML, 10 MG/ML 51
fluticasone propionate (nasal) SUSP . 81	FORFIVO XL TB24 (bupropion hcl) 15	furosemide TABS 51
fluticasone propionate CREA 0.05 % 46	fosamprenavir calcium TABS 33	FYLNETRA 58
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT 11	fosinopril sodium & hydrochlorothiazide 24	gabapentin CAPS 100 MG 13
fluticasone propionate hfa 44 MCG/ACT 11	fosinopril sodium 23	gabapentin CAPS 300 MG, 400 MG . 13
fluticasone propionate LOTN 46	FOSRENOL CHEW (lanthanum carbonate) 56	gabapentin SOLN 13
fluticasone propionate OINT 46	FRAGMIN SOLN 10000 UNIT/4ML 13	gabapentin TABS 600 MG, 800 MG 13
fluticasone-salmeterol AERO 12		GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML ... 80
fluvastatin sodium CAPS 23		

GALAFOLD	53	GENOTROPIN CART SC	52	GLUCOCOM LANCETS 30G	64
galantamine hydrobromide CP24 ..	88	GENOTROPIN MINIQUICK PRSY	52	GLUCOCOM LANCETS 33G	64
galantamine hydrobromide SOLN ..	88	gentamicin sulfate (ophth) SOLN ..	84	GLUMETZA TB24 (metformin hcl) .	17
galantamine hydrobromide TABS ..	88	gentamicin sulfate (topical) CREA .	43	glyburide micronized 1.5 MG, 3 MG, 6 MG	19
GAMASTAN IM	86	gentamicin sulfate (topical) OINT ..	43	glyburide TABS	19
GAMIFANT 10 MG/2ML, 50 MG/10ML	76	GENTEEL BUTTERFLY TOUCH LANCET	64	glyburide-metformin	16
GAMMAGARD	86	GENVISC 850 SOSY	80	glycerin (laxative) SUPP 2 GM	61
GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML	86	GENVOYA	33	glycerol phenylbutyrate 1.1 GM/ML 53	
GAMMAGARD S/D LESS IGA SOLR	86	GILENYA (fingolimod hcl)	89	glycine diluent	87
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	86	GILENYA	89	glycopyrrolate TABS 1 MG, 2 MG .	91
GAMMAPLEX SOLN	86	GILOTRIF	27	GLYXAMBI	16
GAMUNEX-C	86	ginger (zingiber officinalis) CAPS 250 MG	2	GNP ALCOHOL SWABS	69
GARDASIL 9 SUSP 0.5 ML	94	GLASSIA SOLN	89	GNP HOME LICE/BEDBUG/DUST MITE AERO 0.5 %	49
GARDASIL 9 SUSY 0.5 ML	94	glatiramer acetate SOSY	89	GNP STERILE LANCETS 28G ...	64
GAS RELIEF LIQD PO 40 MG/0.6ML	54	glimepiride 1 MG, 2 MG	19	GNP STERILE LANCETS 30G ...	64
gatifloxacin (ophth)	84	glimepiride 3 MG	19	GNP STERILE LANCETS 33G ...	64
GATTEX	56	glimepiride 4 MG	19	GOJJI STERILE LANCETS	64
GAUZE SPONGES	64	glipizide TABS 2.5 MG	19	GOODSENSE ALCOHOL SWABS 69	
GAZYVA	27	glipizide TABS 5 MG, 10 MG	19	GORDONS UREA CREA 40 % ...	48
gefitinib	27	glipizide TB24	19	GOTOKNOW COVID-19 ANTIGEN RAPI KIT	50
GEL-ONE	80	glipizide-metformin hcl	16	granisetron hcl TABS	21
GELSYN-3 SOSY	80	GLOBAL ALCOHOL PREP EASE	69	GRANIX SOLN 300 MCG/ML	58
gemfibrozil TABS	23	GLOBAL INJECT EASE LANCETS 28G	64	GRANIX SOSY	58
GEMTESA	92	GLOBAL INJECT EASE LANCETS 30G	64	griseofulvin microsize SUSP	21
GENABIO COVID-19 RAPID TEST KIT	50	GLUCAGON EMERGENCY SOLR IJ 1 MG (glucagon)	17	griseofulvin microsize TABS	21
		glucagon SOLR IJ 1 MG	17	griseofulvin ultramicrosize	21
		GLUCOCOM LANCETS 28G	64	guaifenesin-codeine SOLN	41

guanfacine hcl (adhd)	2	65	HUMALOG MIX 50/50 SUSP	18	
guanfacine hcl	24	H-E-B INCONTROL LANCETS 30G .	HUMALOG MIX 75/25 KWIKPEN		
GVOKE KIT SOLN	17	65	SUPN	18	
GYNAZOLE-1	95	H-E-B INCONTROL LANCETS 33G .	HUMALOG MIX 75/25 SUSP	18	
HADLIMA PUSHTOUCH SOAJ	4	65	HUMALOG SOLN IJ	18	
HADLIMA SOSY	4	HEMATINIC PLUS VIT/MINERALS	HUMALOG TEMPO PEN SOPN ..	18	
HAEMOLANCE	64	TABS	59	HUMATE-P SOLR	57
HAEMOLANCE LOW FLOW		HEMGENIX	57	HUMIRA (2 PEN) AJKT 40	
LANCETS	65	HEMLIBRA 30 MG/ML, 60		MG/0.8ML	4
HAEMOLANCE PLUS	65	MG/0.4ML, 105 MG/0.7ML, 150		HUMIRA (2 PEN) AJKT	4
HAEMOLANCE PLUS HIGH FLOW .		MG/ML	57	HUMIRA (2 SYRINGE) PSKT	4
65		HEMOPIL M SOLR 250 UNIT, 500		HUMIRA-CD/UC/HS STARTER	
HAEMOLANCE PLUS LOW FLOW .		UNIT, 1000 UNIT, 1700 UNIT	57	AJKT 40 MG/0.8ML	4
65		HEMORRHOIDAL 0.25 %-85.5 %-3		HUMIRA-CD/UC/HS STARTER	
HAEMOLANCE PLUS MAX FLOW		%	8	AJKT 80 MG/0.8ML	4
65		HEPAGAM B SOLN IJ	86	HUMIRA-PED<40KG CROHNS	
HAEMOLANCE PLUS PEDIATRIC		heparin sodium (porcine) SOLN IJ		STARTER PSKT	4
FLOW	65	1000 UNIT/ML, 5000 UNIT/0.5ML,		HUMIRA-PED>/=40KG CROHNS	
halcinonide CREA	46	5000 UNIT/ML, 10000 UNIT/ML,		START PSKT	4
halobetasol propionate CREA	46	20000 UNIT/ML	13	HUMIRA-PED>/=40KG UC	
halobetasol propionate OINT	46	HEPLISAV-B SOSY	94	STARTER AJKT	4
HALOG CREA (halcinonide)	46	HERCEPTIN HYLECTA	28	HUMIRA-PS/UV/ADOL HS	
haloperidol decanoate	31	HIBERIX SOLR IJ	92	STARTER AJKT	4
haloperidol lactate CONC	31	HIZENTRA SOLN	86	HUMIRA-PSORIASIS/UEVIT	
haloperidol lactate SOLN	31	HIZENTRA SOSY 10 GM/50ML ..	86	STARTER AJKT	4
haloperidol TABS	31	HM STERILE ALCOHOL PREP ..	69	HUMULIN 70/30 SUSP	18
HARVONI PACK	34	HULIO (2 PEN) AJKT	4	HUMULIN N SUSP	18
HARVONI TABS	34	HULIO (2 SYRINGE) PSKT	4	HUMULIN R SOLN IJ	18
HAVRIX IM 720 EL U/0.5ML, 1440		HUMALOG JUNIOR KWIKPEN		HUMULIN R U-500 KWIKPEN SOPN	
EL U/ML	94	SOPN	18	SC	18
H-E-B INCONTROL ALCOHOL ..	69	HUMALOG KWIKPEN SOPN 100		HYALGAN SOLN	80
H-E-B INCONTROL LANCETS 28G .		UNIT/ML	18	HYALGAN SOSY	80
		HUMALOG MIX 50/50 KWIKPEN		HYCANTIN CAPS	30
		SUPN	18		

hydralazine hcl TABS	25	46	10
HYDRAVEX GEL 2 %	46	hydrocortisone (topical) SOLN 1 %	HYMOVIS
hydrochlorothiazide CAPS	52	47	80
hydrochlorothiazide TABS 25 MG, 50	52	hydrocortisone acetate (topical)	hyoscyamine sulfate ELIX
MG	52	CREA 2.5 %	91
hydrocodone bitartrate CP12	6	47	hyoscyamine sulfate SOLN PO 0.125
hydrocodone bitartrate-homatropine		hydrocortisone acetate (topical) OINT	MG/ML
methylbromide SOLN	41	47	91
hydrocodone-acetaminophen SOLN		HYDROCORTISONE ACETATE	hyoscyamine sulfate TABS 0.125 MG
108 MG/5ML-2.5 MG/5ML, 217		CREA	91
MG/10ML-5 MG/10ML, 325		47	hyoscyamine sulfate TB12 0.375 MG
MG/15ML-7.5 MG/15ML	7	hydrocortisone butyrate CREA	91
hydrocodone-acetaminophen TABS		47	hyoscyamine sulfate TBDP 0.125 MG
325 MG-10 MG	7	hydrocortisone butyrate LOTN	91
hydrocodone-acetaminophen TABS		47	HYPERHEP B SOLN IM
325 MG-5 MG	7	hydrocortisone butyrate OINT	86
hydrocodone-acetaminophen TABS		47	HYPERHEP B SOSY 110
325 MG-7.5 MG	7	hydrocortisone butyrate SOLN	UNIT/0.5ML
hydrocortisone (intrarectal)	8	47	86
hydrocortisone (rectal) EX 1 %	9	HYDROCORTISONE GEL 2 % ...	HYPERRHO MINI-DOSE SOSY IM
hydrocortisone (rectal) EX 2.5 % ...	9	47	250 UNIT
hydrocortisone (topical) CREA 0.5 %		41	HYPERRHO SOSY IM 1500 UNIT
46		hydrocortisone TABS	86
hydrocortisone (topical) CREA 1 %		41	HYQVIA
46		hydrocortisone vaginal	87
hydrocortisone (topical) CREA 2.5 %		96	HYRIMOZ SOAJ
46		hydrocortisone valerate CREA	4
hydrocortisone (topical) LOTN 1 %		47	HYRIMOZ SOSY
46		hydrocortisone valerate OINT	4
hydrocortisone (topical) LOTN 2.5 % .		47	HYRIMOZ-CROHNS/UC STARTER
46		hydrocortisone w/acetic acid	SOAJ
hydrocortisone (topical) OINT 0.5 % .		86	4
46		HYDROMORPHONE HCL SUPP ...	HYRIMOZ-PED<40KG CROHN
hydrocortisone (topical) OINT 1 % .		6	STARTER SOSY
46		6	4
hydrocortisone (topical) OINT 2.5 % .		hydroxymorphone hcl TABS	HYRIMOZ-PED>=40KG CROHN
46		6	START SOSY
		6	4
		HYDROMORPHONE HCL SUPP ...	HYRIMOZ-PLAQ PSOR/UEVIT
		6	START SOAJ
		6	4
		HYDROMORPHONE HCL TB24	HYRIMOZ-PLAQUE PSORIASIS
		6	START SOAJ
		6	4
		HYDROXATE GEL	HY-VEE LANCETS
		47	65
		HYDROXYM GEL	HY-VEE THIN LANCETS
		47	65
		hydroxyurea	
		29	
		hydroxyzine hcl SOLN 25 MG/ML, 50	
		MG/ML	
		10	
		hydroxyzine hcl SYRP	
		10	
		hydroxyzine hcl TABS	
		10	
		hydroxyzine pamoate CAPS 25 MG,	
		100 MG	
		10	
		hydroxyzine pamoate CAPS 50 MG	
		10	

ibandronate sodium SOLN	52	imatinib mesylate TABS	28	INGREZZA CAPS	88
ibandronate sodium TABS	52	IMBRUVICA CAPS 140 MG	28	INGREZZA CPSP	88
IBRANCE CAPS 100 MG, 125 MG 28		IMBRUVICA CAPS 70 MG	28	INLYTA	26
IBSRELA	55	IMBRUVICA TABS	28	INNOSPIRE REPLACEMENT FILTER MISC	72
ibuprofen CHEW	5	IMCIVREE SOLN SC	53	INPEFA	37
ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML	5	imipramine hcl TABS	16	INSPIREASE MISC	72
ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG	5	imipramine pamoate	16	INSPIREASE RESERVOIR BAGS 72	
ibuprofen-diphenhydramine citrate 60		imiquimod 5 %	48	INSULIN GLARGINE-YFGN SOLN 18	
ibuprofen-diphenhydramine hcl ...	60	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	74	INSULIN GLARGINE-YFGN SOPN 18	
icatibant acetate SOSY	57	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	74	INSULIN LISPRO (1 UNIT DIAL) SOPN	18
ICLUSIG 15 MG, 45 MG	28	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	74	INSULIN LISPRO JUNIOR KWIKPEN SOPN	18
ID NOW COVID-19	50	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate)	74	INSULIN LISPRO PROT & LISPRO SUPN	18
ID NOW COVID-19 2.0 CONTROL 50		IMLYGIC	30	INSULIN LISPRO SOLN IJ	18
ID NOW COVID-19 2.0 TEST	50	IMOVAX RABIES SUSR	94	INSULIN SYRINGES	70
ID NOW COVID-19 CONTROL ...	50	IMULDOSA SOLN IV 130 MG/26ML . 55		INTELENCE (etravirine)	33
IDACIO (2 PEN) AJKT	4	IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML	44	INTELENCE	33
IDACIO (2 SYRINGE) PSKT	4	IN TOUCH STERILE LANCETS 30G	65	INTELENCE 200 MG (etravirine) ..	33
IDACIO-CROHNS/UC STARTER AJKT	4	INCRELEX	53	INTELISWAB COVID-19 RAPID TEST KIT	50
IDACIO-PSORIASIS STARTER AJKT	4	indapamide TABS 1.25 MG, 2.5 MG . 52		INVEGA HAFYERA	31
IDELVION	57	INDICAID COVID-19 RAPID TEST KIT	50	INVEGA SUSTENNA	31
IDVYNZO TABS PO	33	indomethacin CAPS 25 MG, 50 MG 5	5	INVEGA TRINZA	31
IGALMI FILM	60	indomethacin CPCR	5	INVOKANA	19
IHEALTH COVID-19 RAPID TEST KIT	50	INFANRIX	90	IPOL IJ	94
ILEVRO	85			ipratropium bromide (nasal) 0.03 % 81	
ILUVIEN	85				

ipratropium bromide (nasal) 0.06 % 81	IXCHIQ 94	KEMOPLAT SOLN 26
ipratropium bromide hfa 17 MCG/ACT 11	IXEMPRA KIT 29	KENALOG AERS (triamcinolone acetonide (topical)) 47
ipratropium bromide SOLN 0.02 % 11	IXIARO 94	KESIMPTA 89
ipratropium-albuterol SOLN 12	IXINITY SOLR 57	ketoconazole (topical) CREA 43
irbesartan 24	IYUZEH SOLN 85	ketoconazole (topical) SHAM 2 % .43
irbesartan-hydrochlorothiazide 24	JAKAFI 28	KETONE TEST STRP 50
irinotecan hcl 30	JALYN (dutasteride-tamsulosin hcl) . 56	ketoprofen CAPS 50 MG, 75 MG ... 5
IRON CHEWS PEDIATRIC CHEW 59	JANUMET XR TB24 16	ketoprofen CP24 5
IRON TABS 28 MG 59	JARDIANCE 19	ketorolac tromethamine (ophth) 0.4 % 85
ISENTRESS CHEW 100 MG 33	JASCAYD TABS PO 9 MG, 18 MG 90	ketorolac tromethamine (ophth) 0.5 % 85
ISENTRESS CHEW 25 MG 33	JENTADUETO TABS 16	ketorolac tromethamine TABS 5
ISENTRESS PACK 33	JEVTANA 30	KETOSTIX STRP 50
ISENTRESS TABS 33	JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT 57	ketotifen fumarate (ophth) 0.035 % 85
isoniazid SYRP 26	JOURNAVX 6	KEY-E CHEW 97
isoniazid TABS 26	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG 23	KEYTRUDA 27
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 9	JYNNEOS 94	KHAPZORY 175 MG 29
isosorbide mononitrate TABS 9	KADCYLA 27	KINNEY LANCETS 65
isosorbide mononitrate TB24 9	KALBITOR 58	KINNEY THIN LANCETS 65
isotretinoin 10 MG, 20 MG, 40 MG 42	KALETRA SOLN 33	KINRIX SUSY 90
isradipine CAPS 36	KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir) 33	KIRSTY SOLN IJ 100 UNIT/ML ... 18
ISTALOL SOLN (timolol maleate (ophth)) 83	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir) 33	KIRSTY SOPN SC 100 UNIT/ML ..18
ITCH RELIEF CREA 43	KALYDECO PACK 50 MG, 75 MG 89	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin) ...3
itraconazole CAPS 21	KALYDECO TABS 89	KLOR-CON TBCR 8 MEQ (potassium chloride) 75
itraconazole SOLN 21	KANJINTI 420 MG 27	KLOXXADO LIQD 20
ITVISMA SUSP IT 82	KANUMA 53	KOATE SOLR 57
ivermectin (pediculicide) 49	KCENTRA 57	KOATE-DVI SOLR 500 UNIT, 1000
ivermectin 9		

UNIT	57	LACTOVIVE CAPS	19	lansoprazole CPDR	91
KOGENATE FS KIT	57	lactulose (encephalopathy)	55	lansoprazole TBDD	91
KONVOMEK SUSR	92	lactulose SOLN	61	lanthanum carbonate CHEW	56
KOVALTRY	57	LAGEVRIO	35	LANTUS SOLOSTAR SOPN	18
KRINTAFEL	25	LAMICTAL ODT KIT (lamotrigine) .	13	lapatinib ditosylate	29
KROGER HEALTHPRO LANCET 26G	65	LAMICTAL STARTER KIT 25 MG (lamotrigine)	13	LEDIPASVIR-SOFOSBUVIR TABS 34	
KROGER LANCETS	65	lamivudine SOLN	33	leflunomide	5
KROGER LANCETS SUPER THIN 65		lamivudine TABS 150 MG	33	lenalidomide	75
KROGER LANCETS THIN	65	lamivudine TABS 300 MG	33	LENVIMA (10 MG DAILY DOSE) .	26
KRYSTEXXA	57	lamivudine-zidovudine	33	LENVIMA (12 MG DAILY DOSE) .	26
KYLEENA	40	lamotrigine CHEW	13	LENVIMA (14 MG DAILY DOSE) .	27
KYMRIAH	27	lamotrigine KIT 25 MG	13	LENVIMA (18 MG DAILY DOSE) .	27
KYPROLIS	28	lamotrigine TABS	13	LENVIMA (20 MG DAILY DOSE) .	27
labetalol hcl TABS 100 MG	35	lamotrigine TB24	13	LENVIMA (24 MG DAILY DOSE) .	27
labetalol hcl TABS 200 MG	35	lamotrigine TBDP	13	LENVIMA (4 MG DAILY DOSE) ..	27
labetalol hcl TABS 300 MG	35	LANCETS	65	LENVIMA (8 MG DAILY DOSE) ..	27
labetalol hcl TABS 400 MG	35	LANCETS 28G THIN	65	LEQSELVI TABS PO 8 MG	48
LACTEROL CAPS	19	LANCETS 30G	65	LEQVIO	23
lactic acid (ammonium lactate) CREA	48	LANCETS 33G	65	LESCOL XL TB24 (fluvastatin sodium)	23
lactic acid (ammonium lactate) LOTN 12 %	48	LANCETS MICRO THIN 33G	65	LETAIRIS (ambrisentan)	37
lactobacillus rhamnosus (gg) PACK 23 MG, 5 B CELL, 5 B CELL	19	LANCETS SUPER THIN	65	letrozole	28
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 SUPER THIN 28G	65	leucovorin calcium TABS 5 MG, 25 MG	29
lactobacillus-inulin CHEW 200 MG- 10 BILLION, 350 MG-1 GM	20	LANCETS ULTRA THIN	65	LEUKERAN	26
		lanolin (topical) CREA	49	LEUKINE SOLR IJ	58
		LANOLIN XX	87	leuprolide acetate (3 month) INJ 22.5 MG	28
		LANOXIN TABS 125 MCG, 250 MCG (digoxin)	36	leuprolide acetate KIT IJ 1 MG/0.2ML	28
		lanreotide acetate	54	LEUPROLIDE ACETATE-	
		LANREOTIDE ACETATE	54		

BUPIVACAINE	28	levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG	90	LITETOUCH LANCETS	65
levabuterol hcl	12	levothyroxine sodium TABS	90	LITETOUCH MASK LARGE MISC	72
levabuterol hcl 1.25 MG/0.5ML	12	LEVULAN KERASTICK SOLR	44	LITETOUCH MASK MEDIUM MISC .	72
levabuterol tartrate	12	LIALDA TBEC (mesalamine)	55	LITETOUCH MASK SMALL MISC	72
levamlodipine maleate	36	LIBERTY MEDICAL LANCETS ...	65	LITFULO	48
LEVEMIR FLEXPEN SOPN	18	LIBTAYO	27	lithium	30
LEVEMIR SOLN	18	lidocaine CREA 4 %	49	lithium carbonate CAPS	30
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	13	LIDOCAINE CREA	49	lithium carbonate TABS	30
levetiracetam TABS	13	lidocaine hcl (mouth-throat) 2 % ...	76	lithium carbonate TBCR	30
levetiracetam TB24	13	lidocaine hcl CREA 3 %	48	LITHOBID TBCR (lithium carbonate) .	30
levobunolol hcl 0.5 %	83	lidocaine hcl CREA 4 %	48	LIVE BETTER LANCET SUPER	
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	53	lidocaine hcl GEL 2 %	48	THIN	65
levocarnitine (metabolic modifiers) TABS	53	lidocaine hcl PRSY	49	LO LOESTRIN FE TABS	38
levocetirizine dihydrochloride SOLN 22		lidocaine-prilocaine CREA	49	LOCOID LIPOCREAM	47
levofloxacin (ophth) 0.5 %	84	LIDOMAX GEL 2 %	49	LOCOID LOTN (hydrocortisone butyrate)	47
levofloxacin SOLN PO	54	LILETTA (52 MG)	40	LOKELMA	76
levofloxacin TABS	54	LINZESS	55	LONSURF	28
levoleucovorin calcium SOLN	29	LIORESAL SOLN IT	80	loperamide hcl CAPS	20
levoleucovorin calcium SOLR	29	liothyronine sodium TABS	90	loperamide hcl TABS	20
levonorgestrel & eth estradiol TABS 38		LIPOFEN CAPS (fenofibrate)	23	lopinavir-ritonavir SOLN	33
levonorgestrel (emergency oc) 1.5 MG	40	LIQREV SUSP	37	lopinavir-ritonavir TABS 25 MG-100 MG	33
levonorgestrel-eth estradiol (triphasic)	38	liraglutide	18	lopinavir-ritonavir TABS 50 MG-200 MG	33
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	38	lisdexamfetamine dimesylate CAPS 1		LOPRESSOR SOLN PO 10 MG/ML .	35
levonorgestrel-ethinyl estradiol (continuous)	38	lisdexamfetamine dimesylate CHEW .	1	LOPRESSOR TABS 12.5 MG (metoprolol tartrate)	35
		lisinopril & hydrochlorothiazide ...	24	loratadine CAPS	22
		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	23	loratadine CHEW	22
		LITE TOUCH LANCETS	65		

loratadine SOLN	22	LUPRON DEPOT-PED (3-MONTH) .	53	MAYZENT STARTER PACK TBPK	0.25 MG	89
loratadine TABS	22	LUPRON DEPOT-PED (6-MONTH)		MAYZENT TABS		89
loratadine TBDP 10 MG	22	IM	53	meclizine hcl CHEW		21
lorazepam CONC	10	lurasidone hcl	30	meclizine hcl TABS 12.5 MG, 25 MG		21
lorazepam TABS 0.5 MG, 2 MG ...	10	LUTATHERA	29	MEDICHOICE SAFETY LANCET .		65
lorazepam TABS 1 MG	10	LUTRATE DEPOT INJ 22.5 MG ..	28	MEDICHOICE SAFETY LANCET		65
LORBRENA	29	LUZU (luliconazole)	43	EXTRA		65
LOREEV XR CS24	10	LYBALVI	88	MEDICHOICE SAFETY LANCET		65
losartan potassium &		LYFGENIA	58	NORM		65
hydrochlorothiazide	24	LYRA DIRECT SARS-COV-2 ASSAY		MEDLANCE PLUS EXTRA 21G ..		65
losartan potassium	24	.....	50	MEDLANCE PLUS LITE 25G		65
LOTRONEX (alosetron hcl)	55	LYRA SARS-COV-2 ASSAY	51	MEDLANCE PLUS SPECIAL 0.8MM		65
lovastatin TABS 10 MG, 20 MG ...	23	LYSODREN	28	.....		65
lovastatin TABS 40 MG	23	LYUMJEV TEMPO PEN SOPN ...	18	MEDLANCE PLUS SUPERLITE 30G		65
loxapine succinate	31	LYVISPAH PACK	80	.....		65
LUCENTIS SOSY	84	MACI	80	MEDLANCE PLUS UNIVERSAL 21G		65
LUCIRA CHECK IT COVID-19 TEST		magnesium citrate 1.745 GM/30ML		.....		65
KIT	50	60		medroxyprogesterone acetate		40
LUCIRA COVID-19 ALL-IN-ONE KIT		magnesium hydroxide SUSP 7.75 %,		(contraceptive) SUSP IM		40
50		400 MG/5ML, 1200 MG/15ML, 2400		medroxyprogesterone acetate		40
luliconazole	43	MG/30ML	60	(contraceptive) SUSY IM		40
LUMAVEX CAPS	77	magnesium oxide (mg supplement)		medroxyprogesterone acetate 2.5		87
LUMIZYME	53	TABS	75	MG, 5 MG, 10 MG		87
LUNAVIRA CAPS	77	magnesium oxide TABS 400 MG ...	9	mefloquine hcl		25
LUPRON DEPOT (1-MONTH) KIT IM		malathion	49	megestrol acetate SUSP		28
.....	28	maraviroc TABS 150 MG	33	megestrol acetate TABS		28
LUPRON DEPOT (3-MONTH) KIT IM		maraviroc TABS 300 MG	33	MEIJER ALCOHOL SWABS		69
.....	28	MATULANE	29	MEIJER LANCETS		65
LUPRON DEPOT (4-MONTH) IM .	28	MAVYRET PACK	34	MEIJER LANCETS UNIVERSAL 21G		65
LUPRON DEPOT (6-MONTH) IM .	28	MAVYRET TABS	34	.....		65
LUPRON DEPOT-PED (1-MONTH) .	53	MAXI-TUSS PE ELIX 5 MG/5ML-2		MEIJER LANCETS UNIVERSAL 30G		65
		MG/5ML	41	.....		65

MEIJER LANCETS UNIVERSAL 33G.....65	metaxalone .....80	methylphenidate hcl CHEW .....2
MEKINIST TABS .....29	METAXALONE 640 MG 80	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG 2
MEKTOVI .....29	metformin hcl SOLN 17	methylphenidate hcl CP24 60 MG .. 2
melatonin TABS 3 MG, 5 MG .....2	metformin hcl TABS 500 MG, 850 MG, 1000 MG .....17	methylphenidate hcl CP24 .....2
meloxicam TABS .....5	metformin hcl TABS 625 MG, 750 MG 17	methylphenidate hcl CPCR 2
melphalan hcl IV .....26	metformin hcl TB24 500 MG, 1000 MG 17	methylphenidate hcl SOLN .....2
memantine hcl CP24 .....88	metformin hcl TB24 500 MG, 750 MG.....17	methylphenidate hcl TABS .....2
memantine hcl SOLN .....88	methadone hcl TABS 10 MG .....7	methylphenidate hcl TB24 2
memantine hcl TABS 88	methadone hcl TABS 5 MG .....7	methylphenidate hcl TBCR 10 MG, 20 MG 2
MENQUADFI 0.5 ML .....92	methamphetamine hcl .....1	methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG .....2
MENVEO SOLN 92	methazolamide TABS .....51	methylphenidate hcl TBCR 45 MG, 63 MG 2
MENVEO SOLR 92	methenamine mandelate .....25	methylprednisolone TABS 4 MG, 8 MG 41
meperidine hcl SOLN PO 50 MG/5ML 6	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 81.6 MG . 25	methylprednisolone TBPK .....41
meperidine hcl TABS 50 MG .....7	methimazole TABS 90	methyltestosterone TABS .....8
meprobamate .....10	methocarbamol TABS 1000 MG ..80	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 55
mercaptopurine SUSP 2000 MG/100ML .....26	methocarbamol TABS 500 MG ... 80	metoclopramide hcl TABS 10 MG .55
mercaptopurine TABS .....26	methocarbamol TABS 750 MG, 1000 MG 80	metoclopramide hcl TABS 5 MG .. 55
MERILOG SOLN SC 100 UNIT/ML 18	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML 26	metolazone .....52
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML .....18	methotrexate sodium TABS 2.5 MG 26	metoprolol & hydrochlorothiazide TABs .....24
mesalamine ENEM 55	methsuximide .....14	metoprolol succinate TB24 200 MG 35
mesalamine SUPP .....55	methyldopa TABS .....24	metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....35
mesalamine TBEC 1.2 GM 55	methylergonovine maleate TABS ..86	metoprolol tartrate TABS 100 MG .35
mesalamine TBEC 800 MG .....55	METHYLIN SOLN (methylphenidate hcl) .....2	metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG 35
mesalamine w/ cleanser .....55		
mesna SOLN .....29		
mesna TABS .....29		
MESNEX TABS .....29		

metoprolol tartrate TABS 25 MG, 50 MG	35	MIDAZOLAM HCL SOLN IJ	60	MOBILE LANCETS 30G	66
metronidazole (topical) CREA	49	midodrine hcl	96	MODERNA COVID-19 VAC 6M-11Y SUSP	94
metronidazole (topical) GEL 0.75 % 49		MIEBO	85	MODERNA COVID-19 VAC 6M-11Y SUSY	94
metronidazole (topical) LOTN	49	mifepristone (hyperglycemia)	17	moexipril hcl	23
metronidazole TABS 250 MG, 500 MG	25	miglitol	16	mometasone furoate (nasal) SUSP 81	
metronidazole vaginal	95	miglustat	58	mometasone furoate CREA	47
metronidazole vaginal	96	milnacipran hcl MISC	88	mometasone furoate OINT	47
metyrosine	24	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG	88	mometasone furoate SOLN	47
MICONAZOLE 7 SUPP 100 MG ..	96	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		MONISTAT CARE INSTANT ITCH RLF 1 %	96
miconazole nitrate (topical) CREA .43		MINIELITE FILTER REPLACEMENTS MISC	72	MONOLET LANCETS	66
miconazole nitrate vaginal CREA 2 %	96	minocycline hcl CAPS	90	MONOLET OPD LANCETS	66
miconazole nitrate vaginal CREA 4 %	96	minoxidil 2.5 MG, 10 MG	25	MONOLETTOR SAFETY LANCETS 66	
miconazole nitrate vaginal KIT	96	mirabegron TB24	92	MONOVISC	80
miconazole nitrate vaginal SUPP 100 MG	96	MIRCERA	58	montelukast sodium CHEW	11
miconazole nitrate vaginal SUPP 200 MG	96	MIRENA (52 MG)	40	montelukast sodium PACK	11
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	86	mirtazapine TABS	14	montelukast sodium TABS	11
MICROBALANCE CAPS	19	mirtazapine TBDP	14	morphine sulfate beads	7
MICROCHAMBER DEVI	72	misoprostol	92	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	7
MICROCHAMBER MISC	72	mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML	28	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML	7
MICROFLOR 33 CAPS	19	MIUDELLA INTRAUTERINE COPPER	39	morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML	7
MICROLET LANCETS	65	MI-VITE RX TABS 1 MG	77	morphine sulfate SUPP	7
MICROLET NEXT LANCETS	66	MM TWIST LANCETS	66	morphine sulfate TABS	7
MICROSPACER MISC	72	M-M-R II SOLR	94	morphine sulfate TBCR	7
MICROVARA CPDR	19	MNEXSPIKE SUSY 10 MCG/0.2ML . 94		MOTPOLY XR CP24	13
midazolam hcl SOLN IJ	60				

MOTRIN CHILDRENS CHEW (ibuprofen)	5	MG-1500 MCG-10 MG-18 MG-75 MG-1.5 MG	78	35	
MOUNJARO	18	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	78		NAGLAZYME
MOVANTIK	55	mupirocin calcium (topical)	43		53
moxifloxacin hcl (ophth) SOLN OP	84	mupirocin OINT	43		naloxone hcl LIQD
moxifloxacin hcl TABS	54	MVASI	27		20
MULPLETA	58	MVW COMPL FORM PROBIOTIC- KIDS CPDR	19		naloxone hcl SOCT
MULTIPLE VITAMINS TABS- ASSORTED BRAND	79	MVW COMPLETE FORMULATION SOLN	79		21
MULTIPLE VITAMINS TABS- ASSORTED GENERIC	79	MYALEPT	53		naloxone hcl SOLN 0.4 MG/ML ...
multiple vitamins w/ iron TABS	77	mycophenolate mofetil CAPS	76		21
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED BRAND	78	mycophenolate mofetil hcl	76		naloxone hcl SOLN 4 MG/10ML ...
MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED GENERIC	78	mycophenolate mofetil SUSR	76		21
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	78	mycophenolate sodium	76		naloxone hcl SOSY 0.4 MG/ML ...
MULTIVITAMIN DROPS/IRON SOLN	79	MYDAYIS CP24 (amphetamine- dextroamphetamine)	1		21
MULTIVITAMIN INFANT & TODDLER SOLN	79	MYFEMBREE	54		naloxone hcl SOSY 2 MG/2ML
MULTIVITAMIN INFANTS/TODDLERS SOLN 11 MG/ML	79	MYGLUCOHEALTH LANCETS 30G 66			naltrexone hcl
MULTIVITAMIN PLUS IRON ADULT TABS 60 MG-2 MG-13.5 MG-400 MCG-10 MCG-6 MCG-1.7 MG-20		MYLERAN TABS	26		21
		MYNEPHRON CAPS 1 MG	77		NAMENDA TITRATION PAK TABS (memantine hcl)
		MYOBLOC	82		88
		MYRBETRIQ TB24 (mirabegron) ..	92		naphazoline w/ pheniramine 0.3 %- 0.025 %
		NABI-HB SOLN IM	86		84
		nabumetone	5		naphazoline w/ pheniramine 0.315 %-0.027 %
		nadolo! TABS 20 MG, 40 MG, 80 MG.			84
					naproxen sodium TABS 220 MG ...
					5
					naproxen sodium TABS 275 MG, 550 MG
					5
					naproxen SUSP
					5
					naproxen TABS
					5
					naproxen TBEC
					5
					naproxen-esomeprazole magnesium
					5
					naratriptan hcl
					74
					NARCAN LIQD (naloxone hcl)
					21
					NATAZIA
					38
					nateglinide
					19
					NATPARA
					52
					NATROBA (spinosad)
					49
					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
					78

NEBULIZER AIR TUBE/PLUGS MISC	72	NEXIUM CPDR 20 MG (esomeprazole magnesium)	91	nitisinone CAPS	53
nefazodone hcl	15	NEXIUM PACK 10 MG, 20 MG, 40 MG (esomeprazole magnesium) ..	91	nitrofurantoin	25
NEFFY SOLN NA	96	NEXIVA CAPS	19	nitrofurantoin macrocrystal 50 MG, 100 MG	25
NEMLUVIO	48	NEXPLANON	40	nitrofurantoin monohyd macro	25
neomycin sulfate TABS	3	NGENLA	52	nitroglycerin OINT	9
neomycin-bacitracin zn-polymyxin ..	84	niacin (antihyperlipidemic) TBCR ..	23	nitroglycerin PT24	9
neomycin-bacitracin-polymyxin OINT 43		niacin CPCR 250 MG	97	nitroglycerin SUBL	9
neomycin-polymy-dexameth OINT ..	85	NIACIN ER CPCR	97	NITRO-TIME CPCR 2.5 MG, 6.5 MG, 9 MG	9
neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	85	NIACIN ER TBCR	97	NIVA THYROID TABS	90
neomycin-polymyxin w/ pramoxine 43		niacin TABS 500 MG	97	NIVESTYM SOLN	59
neomycin-polymyxin-gramicidin ..	84	niacin TBCR	97	NIVESTYM SOSY	59
neomycin-polymyxin-hc (ophth) ..	85	nicardipine hcl CAPS	36	NIX LICE KILLING SPRAY LIQD XX . 49	
neomycin-polymyxin-hc (otic) SOLN . 86		NICOTINE KIT	89	NIZORAL SHAM	43
neomycin-polymyxin-hc (otic) SUSP . 86		nicotine polacrilex GUM	89	NORDITROPIN FLEXPPO SOPN .52	
NEULASTA ONPRO SOSY 6 MG/0.6ML	58	nicotine polacrilex LOZG	89	norelgestromin-ethinyl estradiol ...	39
NEULASTA SOLN SC 4 MG/0.4ML 58		nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	89	norethin acet & estrad-fe CAPS ...	38
NEULASTA SOSY	58	NICOTROL INHA	89	norethin acet & estrad-fe CHEW ...	39
NEUPOGEN SOLN	58	NICOTROL NS SOLN	89	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	39
NEUPOGEN SOSY	58	nifedipine CAPS	36	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG	39
nevirapine SUSP	33	nifedipine TB24 30 MG, 90 MG ...	36	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG	39
nevirapine TABS	33	nifedipine TB24 60 MG	36	norethindrone & eth estradiol 35 MCG-0.4 MG, 35 MCG-0.5 MG ...	39
nevirapine TB24 400 MG	33	nilotinib hcl 50 MG, 150 MG, 200 MG	29	norethindrone & eth estradiol 35 MCG-1 MG	39
NEXIUM 24HR CPDR (esomeprazole magnesium)	91	nimodipine CAPS	36	norethindrone & ethinyl estradiol-fe 39	
		NINLARO	29	norethindrone (contraceptive)	40
		nintedanib esylate 100 MG, 150 MG . 90		norethindrone acet & eth estra TABS	
		nisoldipine 8.5 MG, 17 MG, 34 MG 36			

39	SUPN	18	nystatin-triamcinolone OINT	43	
norethindrone acetate TABS	87	NOVOLOG MIX 70/30 FLEXPEN SUPN	18	NYVEPRIA	59
norethindrone acetate-ethinyl estradiol	54	NOVOLOG MIX 70/30 RELION SUSP	18	OBIZUR	57
norethindrone acetate-ethinyl estradiol-fe	39	NOVOLOG MIX 70/30 SUSP	18	OCALIVA	55
norethindrone-eth estradiol (triphasic)	39	NOVORA CAPS	19	OCREVUS ZUNOVO	89
norgestimate-ethinyl estradiol (triphasic)	39	NOVOSEVEN RT	57	OCTAGAM SOLN	86
norgestimate-ethinyl estradiol	39	NP THYROID TABS	90	octreotide acetate KIT	54
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	39	NPLATE 250 MCG, 500 MCG	59	octreotide acetate SOLN	54
NORLIQVA SOLN	36	NUCALA SOAJ	10	octreotide acetate SOSY	54
NORPACE CAPS (disopyramide phosphate)	10	NUCALA SOLR	10	ODEFSEY	33
nortriptyline hcl CAPS	16	NUCALA SOSY	10	ODOMZO	27
nortriptyline hcl SOLN	16	NULOJIX	76	OFEV 100 MG, 150 MG (nintedanib esylate)	90
NORVIR PACK	33	NUMOISYN LIQD	77	ofloxacin (ophth)	84
NORVIR TABS (ritonavir)	33	NUPLAZID CAPS	30	ofloxacin (otic)	86
NOSE CLIP MISC	72	NUPLAZID TABS 10 MG	30	ofloxacin 300 MG, 400 MG	54
NOVA SAFETY LANCETS 23G ..	66	NURTEC	74	OHC COVID-19 ANTIGEN SELF TEST KIT	51
NOVA SAFETY LANCETS 28G ..	66	NUTRIVIO CAPS 1 MG	77	OHTUVAYRE	11
NOVA SUREFLEX LANCETS	66	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	95	olanzapine SOLR	31
NOVAFERRUM PED MULTI VIT- IRON SOLN 10 MG/ML	79	NUVESSA	96	olanzapine TABS	31
NOVAREL IM 5000 UNIT	52	NUWIQ KIT	57	olanzapine TBDP	31
NOVAVAX COVID-19 VACCINE SUSP	94	NUWIQ SOLR	57	olmesartan medoxomil	24
NOVAVAX COVID-19 VACCINE SUSY	94	NYPOZI	59	olmesartan medoxomil-amlodipine- hydrochlorothiazide	24
NOVOEIGHT	57	nystatin (mouth-throat)	76	olmesartan medoxomil- hydrochlorothiazide	24
NOVOLOG 70/30 FLEXPEN RELION		nystatin (topical) CREA	43	olopatadine hcl (nasal)	81
		nystatin (topical) OINT	43	olopatadine hcl	85
		nystatin (topical) POWD EX	43	OLPRUVA (2 GM DOSE) THPK ..	53
		nystatin TABS	21	OLPRUVA (3 GM DOSE) THPK ..	53
		nystatin-triamcinolone CREA	43		

OLPRUVA (4 GM DOSE) THPK ...53	UNIT-10 MG-18 MG-1.5 MG-30 UNIT 78	OPZELURA 48
OLPRUVA (5 GM DOSE) THPK ...53		ORALAIR SUBL .....2
OLPRUVA (6 GM DOSE) THPK ...53	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 78	ORENITRAM MONTH 1 TEPK ....37
OLPRUVA (6.67 GM DOSE) THPK 53		ORENITRAM MONTH 2 TEPK ....37
OLUMIANT 3	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 ..78	ORENITRAM MONTH 3 TEPK ....37
omega-3-acid ethyl esters .....22		ORFADIN SUSP .....53
omeprazole CPDR .....91	ONETOUCH DELICA PLUS LANCET30G 66	ORIAHNN 54
omeprazole TBEC 91		ORLISSA 52
omeprazole-sodium bicarbonate CAPS .....92	ONETOUCH DELICA PLUS LANCET33G 66	ORKAMBI PACK .....89
omeprazole-sodium bicarbonate PACK .....92	ONETOUCH DELICA SAFETY LANCING 66	ORKAMBI TABS .....89
OMNITROPE SOCT .....53	ONETOUCH ULTRASOFT 2 LANCETS 66	orphenadrine citrate TB12 80
OMVOH (300 MG DOSE) SOAJ ...55	ONGLYZA 5 MG (saxagliptin hcl) . 17	orphenadrine w/ aspirin & caff 80
OMVOH (300 MG DOSE) SOSY ..55	ONPATTRO 89	ORTHOVISC .....80
OMVOH SOAJ .....55	ONYDA XR SUER 2	ORUDIS CAPS 75 MG .....5
OMVOH SOLN .....55	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML .....27	oseltamivir phosphate CAPS 30 MG . 35
OMVOH SOSY .....55	OPIPZA FILM 32	oseltamivir phosphate CAPS 45 MG, 75 MG .....35
ON/GO COVID-19 ANTIGEN TEST KIT .....51	OPSYNVI .....37	oseltamivir phosphate SUSR .....35
ON/GO ONE COVID-19 HOME TEST KIT .....51	OPTICHAMBER DIAMOND DEVI .72	OTEZLA TABS .....5
ONCASPAR .....29	OPTICHAMBER DIAMOND MISC .72	OTEZLA TBPK .....5
ondansetron hcl SOLN PO 4 MG/5ML .....21	OPTICHAMBER DIAMOND-LG MASK DEVI .....72	OTEZLA XR TB24 PO 75 MG 5
ondansetron hcl TABS 4 MG, 8 MG 21	OPTICHAMBER DIAMOND-MD MASK MISC .....72	OTEZLA/OTEZLA XR INITIATION PK TBPK 5
ondansetron TBDP 16 MG 21	OPTICHAMBER DIAMOND-SM MASK MISC .....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
ondansetron TBDP 4 MG, 8 MG ..21	OPTIONS GYNOL II CONTRACEPTIVE GEL 95	OTULFI SOLN SC 45 MG/0.5ML .44
ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000	OPVEE NA .....21	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML 44
		oxaprozin TABS .....5

oxazepam CAPS	10	paclitaxel protein-bound particles .	30	PAXLOVID (150/100)	34
oxcarbazepine SUSP	13	paliperidone	31	PAXLOVID (300/100 & 150/100) .	34
oxcarbazepine TABS	13	PALYNZIQ	53	PAXLOVID (300/100)	34
OXERVATE	85	pamidronate disodium SOLN 30		pazopanib hcl	29
oxiconazole nitrate CREA	43	MG/10ML, 90 MG/10ML	52	PC PEDIATRIC POLY-VITA/FE	
OXISTAT CREA (oxiconazole nitrate)		PAMIDRONATE DISODIUM SOLN		DROP SOLN	79
.....	43	52		PC PEDIATRIC POLY-VITAMIN	
oxybutynin chloride SOLN	92	pantoprazole sodium PACK	91	DROP SOLN PO	79
oxybutynin chloride TABS 2.5 MG .	92	pantoprazole sodium TBEC 20 MG		ped multivitamins w/fl & iron SOLN	
oxybutynin chloride TABS 5 MG ...	92	91		79	
oxybutynin chloride TB24	92	pantoprazole sodium TBEC 40 MG		PEDIARIX SUSY	90
oxycodone hcl CAPS	7	91		PEDIATRIC MOUTHPIECE MISC .	73
oxycodone hcl CONC 100 MG/5ML	7	PANZYGA	86	PEDIATRIC MULTIVITAMINS W/FL	
oxycodone hcl SOLN	7	PARAGARD INTRAUTERINE		CHEW-ASSORTED BRAND	79
oxycodone hcl T12A 10 MG, 20 MG,		COPPER	39	PEDIATRIC MULTIVITAMINS W/FL	
40 MG	7	PARI ALTERA NEBULIZER		CHEW-ASSORTED GENERIC ...	79
oxycodone hcl TABS	7	HANDSET MISC	72	PEDIATRIC MULTIVITAMINS W/FL	
oxycodone w/ acetaminophen TABS		PARI BABY CONVERSION KIT		SOLN-ASSORTED BRAND	79
325 MG-10 MG, 325 MG-5 MG, 325		MISC	72	PEDIATRIC MULTIVITAMINS W/FL	
MG-7.5 MG	7	PARI ERAPID NEBULIZER		SOLN-ASSORTED GENERIC	79
oxymorphone hcl TB12 15 MG	7	HANDSET MISC	72	pediatric vitamins acd w/ fluoride	
oxymorphone hcl TB12 5 MG, 7.5		PARI EXPIRATORY FILTER SET		SOLN	79
MG, 10 MG, 20 MG, 30 MG, 40 MG		DEVI	72	PEDVAX HIB SUSP	92
7		PARI MASK SET MISC	72	peg 3350-kcl-sod bicarb-sod	
oyster shell	75	PARI SOFT PLASTIC ADULT MASK		chloride-sod sulfate SOLR	61
OZEMPIC (0.25 OR 0.5 MG/DOSE)		MISC	72	peg 3350-potassium chloride-sod	
SOPN	18	PARI SOFT PLASTIC PED MASK		bicarbonate-sod chloride	61
OZEMPIC (1 MG/DOSE) SOPN 4		MISC	72	PEGASYS SOLN	34
MG/3ML	18	PARI VORTEX ADULT MASK	72	PEGASYS SOSY	34
OZEMPIC (2 MG/DOSE) SOPN ...	18	paricalcitol SOLN	53	pemetrexed disodium SOLR 100 MG,	
OZOBAX DS SOLN PO (baclofen)	80	paroxetine hcl TABS	15	500 MG	26
OZURDEX IMPL	85	paroxetine hcl TB24	15	PENBRAYA	92
PACLITAXEL PROTEIN-BOUND		paroxetine mesylate (vasomotor) .	89	penciclovir	45
PART	30	PARSABIV	53	penicillamine TABS	75

penicillin v potassium SOLR	87	MG, 200 MG	56	pindolol TABS	35
penicillin v potassium TABS	87	phenelzine sulfate	15	pioglitazone hcl	18
PENTACEL	91	phenobarbital ELIX	60	pioglitazone hcl-glimepiride	16
pentoxifylline	58	phenobarbital TABS	60	pioglitazone hcl-metformin hcl TABS	16
PERFECT LANCETS 28G	66	phentermine hcl-topiramate	1	PIP LANCETS 28G	66
PERFECT LANCETS 30G	66	phenylephrine hcl (mydriatic) SOLN 2.5 %	84	PIP LANCETS 30G	66
PERFECT POINT SAFETY LANCETS	66	phenylephrine hcl (oral) TABS	81	pirfenidone CAPS	90
perindopril erbumine	23	phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML	41	pirfenidone TABS 534 MG	90
PERIOMED CONC 0.63 %	76	phenylephrine-dm SOLN	41	piroxicam CAPS	5
PERJETA	27	phenytoin CHEW	14	PLEGRIDY SOSY IM	89
permethrin AERO	49	phenytoin sodium extended 100 MG, 200 MG, 300 MG	14	plerixafor	59
PERMETHRIN CREA 5 % (permethrin)	49	phenytoin sodium extended 200 MG, 300 MG	14	PNEUMOVAX 23 SOLN	92
permethrin CREA	49	phenytoin SUSP	14	PNEUMOVAX 23 SOSY	92
permethrin LIQD EX	49	PHOTOFRIN	29	POCKET CHAMBER DEVI	73
perphenazine TABS	31	PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	29	POCKET SPACER DEVI	73
perphenazine-amitriptyline	88	phytonadione TABS 5 MG	97	podofilox SOLN	48
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	95	PIFELTRO	33	POLIVY 140 MG	27
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	95	PILLOW MASK/ADULT MISC	73	polyethylene glycol 3350 PACK	61
PFLEX MISC	73	PILLOW MASK/CHILD MISC	73	polyethylene glycol 3350 POWD	61
PHARMACIST CHOICE ALCOHOL 69		PILLOW MASK/PEDIATRIC MISC	73	polymyxin b-trimethoprim	84
PHARMACIST CHOICE LANCETS 66		pilocarpine hcl (oral) 5 MG	77	polysaccharide iron complex CAPS	59
PHARMACIST CHOICE MASK WIPES MISC	73	pilocarpine hcl SOLN 1 %, 2 %, 4 %	84	polyvinyl alcohol 1.4 %	83
PHEBURANE PLLT	53	PILOT COVID-19 AT-HOME TEST KIT	51	POLY-VI-SOL SOLN PO	79
phenazopyridine hcl TABS 100 MG, 200 MG	56	pimecrolimus	48	POLY-VITA SOLN PO	79
PHENAZOPYRIDINE HCL TABS 100		PIN RID CHEW	9	POLY-VITA/IRON SOLN	79
				POLY-VITE PEDIATRIC SOLN PO	79
				POLY-VITE/IRON SOLN	79
				pomalidomide 1 MG, 2 MG, 3 MG, 4	

MG	28	pravastatin sodium	23	PREVNAR 20	92
PONVORY STARTER PACK TBPK 89		prazosin hcl CAPS	24	PREVYMIS SOLN	34
PONVORY TABS	89	PRED MILD	85	PREVYMIS TABS	34
PORTRAZZA	27	prednisolone acetate (ophth)	85	PREZCOBIX	33
pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	75	PREDNISOLONE ACETATE P-F ..	85	PREZISTA SUSP	33
potassium bicarbonate TBEF	75	PREDNISOLONE SODIUM PHOSPHATE	85	PREZISTA TABS (darunavir)	33
potassium chloride CPCR 10 MEQ 75		prednisolone sodium phosphate SOLN 15 MG/5ML	41	PREZISTA TABS 150 MG	33
potassium chloride CPCR 8 MEQ .	75	prednisolone sodium phosphate SOLN 20 MG/5ML	41	PREZISTA TABS 75 MG, 600 MG, 800 MG	33
potassium chloride microencapsulated crystals er	75	prednisolone sodium phosphate SOLN 5 MG/5ML	41	PRIALT	6
potassium chloride PACK PO 20 MEQ	75	prednisolone SOLN	41	primidone 125 MG	14
potassium chloride SOLN PO 10 %, 20 %, 10 %	75	PREDNISON INTENSOL CONC	41	primidone 50 MG, 250 MG	14
potassium chloride TBCR 8 MEQ, 10 MEQ	75	prednisone SOLN	41	PRIORIX SUSR	95
potassium citrate (alkalinizer) TBCR . 56		prednisone TABS	41	PRIVIGEN SOLN	86
potassium iodide (expectorant) SOLN	42	prednisone TBPK	41	PRO COMFORT ALCOHOL	69
POTELIGEO	27	pregabalin CAPS	14	PRO COMFORT LANCETS 30G .	66
PRADAXA CAPS (dabigatran etexilate mesylate)	13	pregabalin SOLN	14	PRO COMFORT LANCETS 31G .	66
PRADAXA PACK	13	PREGNYL IM	52	PRO COMFORT SAFETY LANCETS 30G	66
pralatrexate	26	PREHEVBRIO	95	PRO COMFORT SPACER ADULT MISC	73
PRALUENT SOAJ	23	PREMARIN	96	PRO COMFORT SPACER CHILD MISC	73
pramipexole dihydrochloride TABS 30		PREMPHASE	54	PRO COMFORT SPACER INFANT DEVI	73
pramipexole dihydrochloride TB24	30	PREMPRO	54	probenecid	57
pramoxine hcl (rectal) FOAM EX ...	9	PRENATAL VITAMINS-ASSORTED BRAND	79	PROBENTRA CPDR	19
prasugrel hcl	58	PRENATAL VITAMINS-ASSORTED GENERIC	79	PROBINATE CAPS	19
		PREPARATION H EX 1 %	9	probiotic product CAPS 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	
		PREPARATION H SOOTHING RELIEF EX 1 %	9		

MG, 2 MG-12 MG-80 MG-2 MG-3	PROGRAF PACK	76	pseudoephedrine-ibuprofen TABS	42
MG-2 MG-1.5 MG-7.5 MG-3 MG-2	PROLEUKIN	29	psyllium CAPS 0.36 GM, 0.52 GM	60
MG, 2 MG-12.5 MCG, 2.5 MG-0.5	PROLIA SOSY	52	psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 %	60
MG-1 MG-50 MG-16 MG, 20 MG-3	PROMELLA IN PREBIOTIC CAPS		PULMICORT FLEXHALER AEPB	.11
MG-500 MG, 250 MG, 30 MG-250	20		PULMOZYME	89
MG, 300 MG-250 MG, 33 MG, 40	promethazine & phenylephrine SYRP		PURE COMFORT ALCOHOL PREP	
MG-400 MG-64 MG, 42 MG-425 MG-	.....	41	.....	69
62 MG-120 MG, 5 MG, 50 MG, 57	promethazine hcl SOLN PO 6.25		PURE COMFORT LANCETS 30G	
MG, 6 MG, 60 MG-10 MCG-10 MG-	MG/5ML, 12.5 MG/10ML	22	66	
250 MG, 67 MG, 8 MG-5 MG-240	promethazine hcl SUPP	22	PURE COMFORT SAFETY LANCET	
MG-70 MG, 90 MG-1.7 MG-30 MCG-	promethazine hcl TABS	22	30G	66
4 MCG, 10 MG, 25 MG, 170 MG, 400	promethazine w/codeine SOLN ...	41	PURE COMFORT SPACER	
MG	promethazine w/codeine SYRP ...	42	CHAMBER DEVI	73
20	PRONEB ULTRA FILTER SET MISC		PX LANCETS MICROTHIN 33G	.66
probiotic product CPDR 50 MG ....	.....	73	PX LANCETS ULTRA THIN 28G	.66
20	propafenone hcl TABS	10	pyrantel pamoate SUSP	9
PROCARE SPACER/ADULT MASK	propranolol hcl CP24	35	pyrazinamide	26
DEVI	propranolol hcl SOLN PO 20		pyrethrins-piperonyl butoxide SHAM	
73	MG/5ML, 40 MG/5ML	35	4 %-0.33 %	49
PROCARE SPACER/CHILD MASK	propranolol hcl TABS	35	pyrethrins-piperonyl butoxide-	
DEVI	propylthiouracil	90	permethrin-nit remover 4 %-0.33 %-	
73	PROQUAD SUSR	95	0.5 %	49
PROCHAMBER VHC DEVI	PRORIVA CAPS	20	pyridostigmine bromide TABS 60 MG	
73	PROTONIX PACK (pantoprazole		.....	26
prochlorperazine	sodium)	91	pyridostigmine bromide TBCR	.....
31	protriptyline hcl	16	100 MG	97
prochlorperazine edisylate 10	PROVENGE	27	pyrimethamine	25
MG/2ML	PROVENTIL HFA AERS (albuterol		PYZCHIVA 45 MG/0.5ML, 90 MG/ML	
31	sulfate)	12	.....	44
prochlorperazine maleate TABS ...	PROXIVOL GEL 2 %	49	PYZCHIVA SC 45 MG/0.5ML, 90	
31	pseudoephedrine hcl TABS	81	MG/ML	44
PROCRT	pseudoephedrine hcl TB12	81	PYZCHIVA SC 45 MG/0.5ML	.....
59			44	
PROCTOFOAM FOAM EX 1 %				
9				
PROCYSBI CPDR				
56				
PROCYSBI PACK				
56				
PRODIGY LANCETS 28G				
66				
PRODIGY SAFETY LANCETS 26G				
66				
PRODIGY TWIST TOP LANCETS				
28G				
66				
PROFILNINE				
57				
progesterone CAPS 100 MG				
87				
progesterone CAPS 200 MG				
87				
PROGLYCEM (diazoxide)				
17				

QC ALCOHOL SWABS	69	QUVIVIQ	60	RELIBIOTIC CAPS	20
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	78	RABAVERT	95	RELION ALCOHOL SWABS	69
QC LANCETS SUPER THIN 30G	66	rabeprazole sodium TBEC	91	RELION KETONE TEST STRP ...	51
QC LANCETS ULTRA THIN	66	RALDESY SOLN PO 10 MG/ML ..	15	RELION LANCET DEVICES 30G	.66
QC UNILET LANCETS 28G	66	raloxifene hcl	53	RELION LANCETS	66
QC UNILET LANCETS MICRO THIN	66	ramelteon	60	RELION LANCETS MICRO-THIN 33G	66
QDOLO SOLN (tramadol hcl)	7	ramipril CAPS	23	RELION LANCETS THIN 26G	66
QELBREE	2	ranitidine hcl TABS 150 MG, 300 MG	91	RELION LANCETS ULTRA-THIN 30G	66
QSYMIA 11.25 MG-69 MG, 15 MG- 92 MG, 3.75 MG-23 MG, 7.5 MG-46 MG (phentermine hcl-topiramate) ...	1	ranolazine TB12	9	RELION ULTRA THIN LANCETS 30G	66
QUADRACEL SUSP	91	RAPAFLO 4 MG (silodosin)	56	REMODULIN SOLN IJ	37
QUADRACEL SUSY	91	RAPID RESPONSE COVID-19 ...	51	RENAL CAPS 1 MG	77
quetiapine fumarate TABS	31	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	RENO CAPS CAPS 1 MG	77
quetiapine fumarate TB24	31	RAVICTI 1.1 GM/ML (glycerol phenylbutyrate)	53	RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	90
QUICKVUE AT-HOME COVID-19 TEST KIT	51	READYLANCE SAFETY LANCETS . 66		RENVELA TABS (sevelamer carbonate)	56
QUICKVUE SARS ANTIGEN TEST . 51		REALITY LANCETS	66	repaglinide	19
quinapril hcl	23	REALITY SWABS	69	REPATHA PUSHTRONEX SYSTEM SOCT	23
quinapril-hydrochlorothiazide 12.5 MG-10 MG	24	REALITY TRIGGER LANCETS ...	66	REPATHA SOSY	23
quinapril-hydrochlorothiazide 12.5 MG-20 MG	24	REBINYN	57	REPATHA SURECLICK SOAJ	23
quinapril-hydrochlorothiazide 25 MG- 20 MG	24	RECOMBIVAX HB SUSP	95	REPLACEMENT AIR FILTER MISC . 73	
quinidine gluconate TBCR	10	RECOMBIVAX HB SUSY	95	REPLACEMENT FILTERS MISC ..	73
quinidine sulfate TABS	10	RELEUKO SOSY	59	RESTASIS EMUL (cyclosporine (ophth))	84
QULIPTA	74	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG	2	RESTASIS MULTIDOSE EMUL ...	84
		RELEXXII TBCR 45 MG, 63 MG (methylphenidate hcl)	2	RESTORIL 22.5 MG (temazepam)	60
				RETACRIT	59
				RETACRIT 2000 UNIT/ML, 3000	

UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	59	risedronate sodium TABS 35 MG .52	ROSTARIX SUSP	95
RETIN-A MICRO (tretinoin microsphere)	42	risedronate sodium TABS 5 MG, 30 MG	ROTATEQ SOLN	95
RETIN-A MICRO PUMP (tretinoin microsphere)	42	risedronate sodium TBEC	RUBRACA	29
RETISERT	85	RISPERDAL CONSTA (risperidone microspheres)	RUCONEST	57
RETROVIR CAPS (zidovudine) ...	33	risperidone microspheres	rufinamide SUSP	14
RETROVIR SYRP (zidovudine) ...	33	risperidone SOLN	RUKOBIA	34
REVCOVI	53	risperidone TABS	RYALTRIS	81
REXTOVY LIQD	21	risperidone TABS	RYBELSUS TABS	18
REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate)	33	risperidone TBDP	RYKINDO SRER	31
REYATAZ PACK	33	RITEFLO DEVI	RYZNEUTA SOSY SC 20 MG/ML .59	
REZVOGLAR KWIKPEN	18	ritonavir TABS	SABRIL PACK (vigabatrin)	14
RHAPSIDO TABS PO 25 MG	75	RITUXAN	SABRIL TABS (vigabatrin)	14
RHOGAM ULTRA-FILTERED PLUS SOSY IM	86	rivaroxaban SUSR 1 MG/ML	sacubitril-valsartan TABS	37
RHOPHYLAC SOSY IJ	86	rivaroxaban TABS 2.5 MG	SAFETY LANCET 30G/PRESSURE ACT	67
RIASTAP	57	rivastigmine 13.3 MG/24HR	SAFETY LANCETS	67
ribavirin (hepatitis c) CAPS	34	rivastigmine 4.6 MG/24HR, 9.5 MG/24HR	SAFETY LANCETS 21G	67
ribavirin (hepatitis c) TABS 200 MG 34		rivastigmine tartrate CAPS	SAFETY LANCETS 23G	67
riboflavin TABS	97	RIXUBIS SOLR	SAFETY LANCETS 28G	67
rifampin CAPS	26	rizatRIPTAN benzoate TABS	salicylic acid GEL 6 %	48
RIGHTEST GL300 LANCETS	67	rizatRIPTAN benzoate TBDP	saline SOLN 0.65 %	81
rilpivirine hcl 25 MG	33	ROCKLATAN	salsalate	6
riluzole TABS	81	ROCTAVIAN	SAMI THE SEAL FILTERS MISC .	73
rimantadine hydrochloride TABS ..	35	ROLVEDON	SANADERMRX SKIN REPAIR 0.1 %-5 %	47
RINVOQ LQ SOLN	3	romidepsin SOLR	SANDIMMUNE CAPS (cyclosporine)	76
RINVOQ TB24	3	ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG	SANDIMMUNE SOLN IV 50 MG/ML .	76
risedronate sodium TABS 150 MG	52	ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG	sapropterin dihydrochloride PACK .53	
		ropinirole hydrochloride TB24	sapropterin dihydrochloride TABS .53	
		rosuvastatin calcium TABS		

SAPS CARE ALCOHOL PREP ...69	SELZENTRY SOLN .....34	SIKLOS TABS 58
SAPS HEALTH ALCOHOL PREP 69	SEMGLEE (YFGN) SOLN 18	sildenafil citrate (pulmonary hypertension) SOLN 37
SAPS HEALTH CARE ALCOHOL PREP .....69	SEMGLEE (YFGN) SOPN .....18	sildenafil citrate (pulmonary hypertension) SUSR .....37
SAPS HEALTH PLUS LANCETS .67	sennosides TABS 8.6 MG 61	sildenafil citrate (pulmonary hypertension) TABS 37
SAPS HEALTH TWIST TOP LANCETS 67	sennosides-docusate sodium TABS 61	SILICONE MASK/ADULT MISC ...73
SAPS TWIST TOP LANCETS 67	SENSILANCE SAFETY LANCETS 21G .....67	SILICONE MASK/INFANT MISC ..73
SAPSCARE TWIST TOP LANCETS 67	SENSILANCE SAFETY LANCETS 26G .....67	SILICONE MASK/PEDIATRIC MISC .73
saxagliptin hcl 17	SENSILANCE SAFETY LANCETS 28G .....67	silodosin .....56
saxagliptin-metformin hcl .....16	SEREVENT DISKUS .....12	silver sulfadiazine 45
SB ALCOHOL PREP .....69	SERTRALINE HCL CAPS 150 MG, 200 MG (sertraline hcl) .....15	SIMBRINZA 84
SB FIB LAX ORANGE POWD 33 % .60	sertraline hcl CAPS 150 MG, 200 MG .....15	simethicone CHEW 80 MG .....54
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %9	sertraline hcl CONC .....15	simethicone LIQD PO .....54
SB LANCETS THIN .....67	sertraline hcl TABS 15	simethicone SUSP .....54
SB LANCETS ULTRA THIN 67	sevelamer carbonate PACK 56	SIMLANDI (1 PEN) AJKT 4
SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %49	sevelamer carbonate TABS 56	SIMLANDI (1 SYRINGE) PSKT ....4
SCHOOLTIME SHAMPOO SHAM 49	sevelamer hcl .....56	SIMLANDI (2 PEN) AJKT 4
SELARSDI SOLN IV 130 MG/26ML 55	SEVENFACT .....57	SIMLANDI (2 SYRINGE) PSKT ....4
SELARSDI SOLN SC 45 MG/0.5ML .44	SHINGRIX .....95	SIMPLYTHICK EASY MIX .....87
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML .....44	SHINGRIX IM 50 MCG/0.5ML .....95	SIMPLYTHICK EASYMIX LEVEL 1 .87
selegiline hcl CAPS .....30	SIDESTREAM ADULT FACE MASK MISC .....73	SIMPLYTHICK EASYMIX LEVEL 2 .87
selegiline hcl TABS 30	SIDESTREAM PEDIATRIC FACE MASK MISC .....73	SIMPLYTHICK EASYMIX LEVEL 3 .87
selenium sulfide LOTN 1 %45	SIDESTREAM PLS ADULT FACE MASK MISC .....73	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG .....23
selenium sulfide LOTN 2.5 %45	SIGNIFOR .....54	simvastatin TABS 80 MG .....23
selenium sulfide SHAM 1 %45	SIGNIFOR LAR 54	SINGLE-LET 67
		sirolimus SOLN 76

sirolimus TABS	76	sodium fluoride (dental) SOLN 0.2 % 77	SOMATULINE DEPOT	54
sitagliptin 25 MG, 50 MG, 100 MG	17	sodium fluoride CHEW	SOMAVERT	52
sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG	16	sodium fluoride SOLN 0.5 MG/ML	SOOTHENEB NBL 100 ADULT MASK MISC	73
sitagliptin phosphate 25 MG, 50 MG, 100 MG	17	SODIUM FLUORIDE SOLN 0.5 MG/ML	SOOTHENEB NBL 100 CHILD MASK MISC	73
sitagliptin phosphate-metformin hcl TABS	17	sodium oxybate SOLN	SOOTHENEB NBL 100 MED CUP MISC	73
SIVEXTRO TABS	25	sodium phenylbutyrate POWD	SOOTHENEB NBL 100 MESH CAP MISC	73
SKYLA	40	sodium phenylbutyrate TABS	sorafenib tosylate	29
SKYRIZI PEN SOAJ	44	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	SORBITOL PO 70 %	61
SKYRIZI SOCT	55	sodium polystyrene sulfonate POWD 76	SORILUX FOAM	44
SKYRIZI SOLN	55	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	sotalol hcl (afib/afI)	35
SKYRIZI SOSY	44	SOFIA SARS ANTIGEN FIA	sotalol hcl TABS 240 MG	35
SKYSONA	88	SOFIA2 SARS ANTIGEN FIA	sotalol hcl TABS 80 MG, 120 MG, 160 MG	35
SKYTROFA	53	SOFOSBUVIR-VELPATASVIR TABS	SOTYKTU	44
SM ADVANCED PROBIOTIC CAPS . 20		SOGROYA	SOVALDI PACK	34
SM ALCOHOL PREP	69	SOLESTA	SOVALDI TABS	34
SM IPECAC SYRUP	20	solifenacin succinate TABS	SPEEDY SWAB COVID-19 ANTIGEN KIT	51
SMARTEST LANCETS 28G	67	SOLIRIS	SPEVIGO SOLN	44
SOAAZ TABS 20 MG	51	SOLUS V2 LANCETS 28G	SPEVIGO SOSY	44
sodium bicarbonate (antacid) TABS 325 MG, 650 MG	9	SOLUS V2 TWIST LANCETS 30G 67	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	95
sodium chloride (gu irrigant) 0.9 %	56	SOLUVITA ACD WITH FLUORIDE SOLN	SPIKEVAX SUSP	95
sodium chloride (inhalant) AERS ..	42	SOMA TABS 250 MG (carisoprodol) . 80	SPIKEVAX SUSY	95
sodium chloride (inhalant) NEBU 0.9 %, 7 %	42		spinosad	49
sodium citrate & citric acid	56		SPINRAZA	82
sodium fluoride (dental) CREA	76		SPIRIVA HANDIHALER CAPS IN (tiotropium bromide)	11
sodium fluoride (dental) GEL	76		spironolactone & hydrochlorothiazide .	

51	(buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan	74
spironolactone TABS		52	sumatriptan succinate SOAJ 4 MG/0.5ML	74
STAMARIL SUSR	SUBOXONE FILM SL 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate)	95	sumatriptan succinate SOAJ 6 MG/0.5ML	74
stannous fluoride CONC		77	sumatriptan succinate SOCT 4 MG/0.5ML	75
STARJEMZA SOLN IV 130 MG/26ML	SUBOXONE FILM SL 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate)	55	sumatriptan succinate SOCT 6 MG/0.5ML	75
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML		44	sumatriptan succinate SOLN 6 MG/0.5ML	75
STEQEYMA	SUBVENITE SUSP PO 10 MG/ML 14	44	sumatriptan succinate TABS	75
STEQEYMA SC	SUCRAID	44	sumatriptan-naproxen sodium	74
STERILANCE TL	sucrafate SUSP	67		
STERILE DILUENT FLOLAN PH 12 87	sucrafate TABS	87	sunitinib malate	29
STIMUFEND	SUDAFED CHILDRENS LIQD	59	SUNLENCA SOLN	34
STIOLTO RESPIMAT	SUDAFED PE CHILDRENS SOLN 81	12	SUNLENCA TABS PO 300 MG ...	34
STIVARGA	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	29	SUNLENCA TBPK 300 MG	34
STOP LICE AERO 0.5 %		49	SUPARTZ FX SOSY	80
STOP LICE STEP 3 AERO 0.5 %	sulfacetamide sodium (acne)	49	SUPER THIN LANCETS	67
STRENSIQ	sulfacetamide sodium (ophth) SOLN 84	53	SUPPRELIN LA	53
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	sulfacetamide sodium LIQD	78	SURE COMFORT ALCOHOL PREP	69
STRESS FORMULA/IRON TABS	sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	78	SURE COMFORT LANCETS 18G 67	
STRESS FORMULA/IRON/ENERGY TABS	sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	78	SURE COMFORT LANCETS 21G 67	
STRIBILD	sulfacetamide sod-prednisolone SOLN	34	SURE COMFORT LANCETS 23G 67	
STROMECTOL (ivermectin)	sulfamethoxazole-trimethoprim SUSP	9	SURE COMFORT LANCETS 28G 67	
SUBLOCADE SOSY	sulfamethoxazole-trimethoprim TABS	8	SURE COMFORT LANCETS 30G 67	
SUBOXONE FILM SL 0.5 MG-2 MG (buprenorphine hcl-naloxone hcl dihydrate)		8	SUREBIOTIC PROBIOTIC SUPPORT CAPS	20
SUBOXONE FILM SL 1 MG-4 MG	sulfasalazine TABS			
	sulfasalazine TBEC			
	sulindac TABS			

SURELITE LANCETS	67	tacrolimus CAPS	76	temazepam 22.5 MG	60
SYLVANT	76	tacrolimus CP24 0.5 MG, 1 MG, 5 MG	76	temazepam 7.5 MG	60
SYMBICORT (budesonide- formoterol fumarate dihydrate)	12	tacrolimus SOLN 5 MG/ML	76	TEMODAR SOLR	26
SYMBRAVO TABS PO	74	tadalafil (pulmonary hypertension) TABs	37	temozolomide CAPS	26
SYMDEKO	89	TADLIQ SUSP	37	temsirolimus	29
SYMFI (efavirenz-lamivudine- tenofovir disoproxil fumarate)	34	TAFINLAR CAPS	29	TENIVAC SUSP 2 LFU-5 LFU	91
SYMFI LO (efavirenz-lamivudine- tenofovir disoproxil fumarate)	34	TAGRISSE	27	tenofovir disoproxil fumarate TABS 34	
SYMTUZA	34	TAKHZYRO SOLN	58	terazosin hcl	24
SYNAGIS SOLN	87	TALTZ SOSY	44	terbinafine hcl (topical) CREA	43
SYNALAR CREA (fluocinolone acetone)	47	TALZENNA 0.25 MG, 1 MG	29	terbinafine hcl TABS	21
SYNALAR OINT (fluocinolone acetone)	47	tamoxifen citrate TABS	28	terbutaline sulfate TABS	12
SYNAREL	53	tamsulosin hcl	56	terconazole vaginal CREA 0.4 %	96
SYNBIARA CAPS	20	TASCENSO ODT	89	terconazole vaginal CREA 0.8 %	96
SYNOJOYNT SOSY	80	tasimelteon CAPS	60	terconazole vaginal SUPP	96
SYNTHROID TABS (levothyroxine sodium)	90	TAVALISSE	57	teriparatide SOPN	52
SYNVISC ONE SOSY	80	tazarotene CREA	44	TERIPARATIDE SOPN	52
SYNVISC SOSY	80	TDVAX SUSP	91	TESTOPEL PLLT	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	TECENTRIQ	27	testosterone cypionate SOLN IM 200 MG/ML	8
TAB-A-VITE/IRON/BETA CAROTENE TABS	78	TECHLITE AST LANCETS	67	testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM	8
TABLOID	26	TECHLITE LANCETS	67	testosterone GEL TD 1 %	8
TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	47	TECHLITE LANCETS 26G	67	testosterone GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 %	8
tacrolimus (topical) OINT 0.03 %	48	TEGLUTIK SUSP	81	testosterone GEL TD 10 MG/ACT	8
tacrolimus (topical) OINT 0.1 %	48	TEGRETOL-XR TB12 (carbamazepine)	14	testosterone SOLN	8
		TEGSEDI	89	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	91
		telmisartan	24	tetrabenazine	88
		telmisartan-amlopidine	24	tetracaine hcl (ophth)	85
		telmisartan-hydrochlorothiazide	24		
		temazepam 15 MG, 30 MG	60		

TETRACAINE HCL 0.5 %	85	TIGLUTIK SUSP	81	tobramycin-dexamethasone SUSP	85
tetrahydrozoline hcl (ophth) 0.05 %	84	timolol maleate (ophth) SOLG 0.25 %	83	TOBREX OINT	84
TEZSPIRE SOAJ	10	timolol maleate (ophth) SOLN 0.5 %	83	TODAYS HEALTH THIN LANCETS 28G	67
TEZSPIRE SOSY	10	timolol maleate (ophth) SOLN	83	TODAYS HEALTH THIN LANCETS 30G	67
THALOMID 50 MG, 100 MG, 200 MG	75	timolol maleate TABS	35	tofacitinib citrate SOLN 1 MG/ML	3
THEO-24 CP24 100 MG	12	TIMOLOL-BRIMONIDINE-DORZOLAMID 0.5 %-0.15 %-2 %	83	TOFIDENCE	5
THEO-24 CP24 200 MG, 300 MG, 400 MG	12	TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	83	tolmetin sodium CAPS	5
theophylline ELIX	12	tioconazole vaginal 6.5 %	96	tolmetin sodium TABS	5
theophylline SOLN	12	tiopronin TABS	56	tolnaftate CREA	43
theophylline TB12 100 MG, 200 MG, 300 MG	12	tiotropium bromide CAPS IN 18 MCG	11	tolterodine tartrate CP24	92
theophylline TB12 450 MG	12	TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG (levothyroxine sodium)	90	tolterodine tartrate TABS	92
theophylline TB24	12	TIVICAY PD TBSO	34	tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	54
thiamine hcl TABS	97	TIVICAY TABS 50 MG	34	tolvaptan TABS	54
thiamine mononitrate TABS 100 MG	97	tizanidine hcl CAPS 8 MG	80	tolvaptan TBPK	54
thioridazine hcl	31	tizanidine hcl CAPS	80	TOPAMAX SPRINKLE CPSP (topiramate)	14
thiothixene	32	tizanidine hcl TABS	80	TOPICORT CREA 0.05 % (desoximetasone)	47
THRESHOLD IMT MISC	73	TM-VITE RX TABS 1 MG	77	TOPICORT CREA 0.25 % (desoximetasone)	47
THROMBATE III 500 UNIT	58	TOBI NEBU (tobramycin)	3	TOPICORT GEL (desoximetasone)	47
THYMOGLOBULIN	76	TOBRADEX OINT	85	TOPICORT SPRAY LIQD (desoximetasone)	47
THYROGEN 0.9 MG	50	tobramycin (ophth) SOLN	84	topiramate CPSP 15 MG, 25 MG	14
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	90	tobramycin NEBU	3	topiramate CPSP 50 MG	14
tiagabine hcl 12 MG, 16 MG	14	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML	3	topiramate SOLN 25 MG/ML	14
tiagabine hcl 2 MG, 4 MG	14	tobramycin sulfate SOLR	3	topiramate TABS 25 MG	14
TIBSOVO	29			topiramate TABS 50 MG, 100 MG,	
ticagrelor 60 MG, 90 MG	58				
TICOVAC	95				

200 MG	14	150 MG	15	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	47
topotecan hcl SOLN	30	TRELSTAR MIXJECT 11.25 MG, 22.5 MG	28	triamcinolone acetonide (topical) OINT 0.05 %	47
topotecan hcl SOLR	30	TRELSTAR MIXJECT 3.75 MG ...	28	triamcinolone acetonide (topical) OINT 0.5 %	47
toremifene citrate	28	TREMFYA PEN SOAJ SC 200 MG/2ML	55	triamcinolone acetonide-dimethicone- silicone	47
toremide TABS 20 MG	51	TREMFYA SOLN IV	55	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	51
toremide TABS 5 MG, 10 MG, 100 MG	51	TREMFYA SOSY SC 200 MG/2ML 55		triamterene & hydrochlorothiazide TABS	51
TOVIAZ (fesoterodine fumarate) ..	92	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	55	triazolam	60
TPOXX CAPS	35	treprostinil SOLN IJ	37	trientine hcl 250 MG	75
TRACLEER TABS (bosentan)	37	tretinoin (chemotherapy)	29	trifluoperazine hcl TABS	31
TRADJENTA	17	tretinoin CREA 0.025 %	43	trihexyphenidyl hcl SOLN	30
tramadol hcl CP24 100 MG, 200 MG, 300 MG	7	tretinoin CREA 0.05 %, 0.1 %	43	trihexyphenidyl hcl TABS	30
TRAMADOL HCL SOLN (tramadol hcl)	7	tretinoin GEL 0.01 %, 0.025 %	43	TRIKAFTA TBPK 100 MG-50 MG ..	90
tramadol hcl SOLN	7	tretinoin GEL 0.05 %	43	TRILEPTAL SUSP (oxcarbazepine) 14	
tramadol hcl TABS 25 MG, 75 MG, 100 MG	7	tretinoin microsphere	43	TRILURON SOSY	80
tramadol hcl TABS 50 MG	7	TRETTEN	57	trimethoprim TABS	25
tramadol hcl TB24	7	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	26	trimipramine maleate CAPS	16
tramadol-acetaminophen	7	TREXIMET (sumatriptan-naproxen sodium)	74	TRIPHROCAPS CAPS 1 MG	77
trandolapril 1 MG, 2 MG	23	triamcinolone acetonide (mouth) ..	77	TRIUMEQ PD TBSO	34
trandolapril 4 MG	24	triamcinolone acetonide (topical) AERS	47	TRIUMEQ TABS	34
trandolapril-verapamil hcl	24	triamcinolone acetonide (topical) CREA 0.025 %	47	TRIVISC SOSY	80
tranexamic acid TABS	59	triamcinolone acetonide (topical) CREA 0.1 %	47	TRIVIX 0.1 %-5 %	47
tranylcypromine sulfatate	15	triamcinolone acetonide (topical) CREA 0.5 %	47	TRONVITE TABS 1 MG	77
TRAVATAN Z SOLN (travoprost) ..	86	triamcinolone acetonide (topical) LOTN	47	tropicamide SOLN 0.5 %	84
TRAVEL LANCETS ADVANCED 28G	67			tropicamide SOLN 1 %	84
travoprost SOLN	86			trospium chloride CP24	92
trazodone hcl TABS 300 MG	16				
trazodone hcl TABS 50 MG, 100 MG,					

trosipium chloride TABS	92	TYPHIM VI SOSY	92	UNILET SUPERLITE LANCET ...	68
TRUE COMFORT ALCOHOL PREP PADS	70	TYRUKO CONC IV 300 MG/15ML	89	UNILET SUPER-THIN 30G	68
TRUE COMFORT PRO ALCOHOL PREP	70	UBRELVY	74	UNILET ULTRA-THIN 28G	68
TRUE COMFORT SAFETY LANCETS	67	UCERIS TB24 (budesonide)	41	UNISOM SLEEPMELTS TBDP 25 MG	60
TRUE COMFORT TWIST TOP LANCETS	67	UDENYCA ONBODY SOSY	59	UNISTIK 1	68
TRUEPLUS GLUCOSE CHEW	17	UDENYCA SOAJ	59	UNISTIK 2	68
TRUEPLUS GLUCOSE ON THE GO CHEW	17	UDENYCA SOSY	59	UNISTIK 2 COMFORT	68
TRUEPLUS LANCETS 26G	67	ULTICARE ALCOHOL SWABS ...	70	UNISTIK 2 EXTRA	68
TRUEPLUS LANCETS 28G	67	ULTILET ALCOHOL SWABS	70	UNISTIK 2 NEONATAL	68
TRUEPLUS LANCETS 30G	67	ULTILET CLASSIC LANCETS ...	67	UNISTIK 2 NORMAL	68
TRUEPLUS LANCETS 33G	67	ULTILET LANCETS	67	UNISTIK 2 SUPER	68
TRUEPLUS SAFETY LANCETS 28G	67	ULTILET SAFETY LANCETS	67	UNISTIK 3	68
TRULICITY	18	ULTILET SAFETY LANCETS 23G 68		UNISTIK 3 COMFORT	68
TRUMENBA 0.5 ML	92	ULTRA THIN LANCETS 31G	68	UNISTIK 3 EXTRA	68
TRUVADA (emtricitabine-tenofovir disoproxil fumarate)	34	ULTRA-CARE ALCOHOL PREP PADS	70	UNISTIK 3 GENTLE	68
TRYPTYR SOLN OP 0.003 %	85	ULTRA-CARE LANCETS 30G ...	68	UNISTIK 3 NEONATAL	68
TUBING/WING TIP MISC	73	ULTRA-CARE SAFETY LANCETS 30G	68	UNISTIK 3 NORMAL	68
TWINRIX SUSY	95	ULTRA-THIN II AUTO LANCET ..	68	UNISTIK 3 NORMAL	68
TWIST TOP LANCETS 30G	67	ULTRA-THIN II LANCETS	68	UNISTIK CZT COMFORT	68
TYBLUME CHEW	39	UNILET COMFORTOUCH LANCET 68		UNISTIK CZT NORMAL	68
TYBOST	34	UNILET EXCELITE	68	UNISTIK NORMAL	68
TYENNE SOAJ	5	UNILET EXCELITE II	68	UNISTIK PRO SAFETY LANCET .	68
TYENNE SOLN	5	UNILET G.P. LANCET	68	UNISTIK SAFETY LANCETS 28G 68	
TYENNE SOSY	5	UNILET G.P. SUPERLITE LANCET .	68	UNISTIK SAFETY LANCETS 30G 68	
TYPHIM VI SOLN	92	UNILET GP 28 ULTRA THIN	68	UNISTIK TOUCH SAFETY LANC 21G	68
		UNILET LANCET	68	UNISTIK TOUCH SAFETY LANC 23G	68
		UNILET MICRO-THIN 33G	68	UNISTIK TOUCH SAFETY LANC 28G	68

UNISTIK TOUCH SAFETY LANC 30G	68	valsartan-hydrochlorothiazide	24	VECTIBIX 100 MG/5ML, 400 MG/20ML	27
UNITUXIN	27	VALTOCO 10 MG DOSE LIQD	13	VELSIPITY	55
UP4 PROBIOTICS ADULT CAPS	20	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	13	VELTASSA	76
urea CREA 40 %	48	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	13	VENCLEXTA STARTING PACK TBPK	27
UREA CREA	48	VALTOCO 5 MG DOSE LIQD	13	VENCLEXTA TABS	27
urea LOTN 40 %	48	vancomycin hcl CAPS 125 MG	25	VENLAFAXINE BESYLATE ER ...	16
URETRON D/S TABS 81.6 MG ...	25	vancomycin hcl CAPS 250 MG	25	venlafaxine hcl CP24 150 MG	16
ursodiol CAPS	55	vancomycin hcl SOLR IV 1 GM	25	venlafaxine hcl CP24 37.5 MG	16
ursodiol TABS 250 MG	55	VANCOMYCIN HCL SOLR IV 1 GM . 25		venlafaxine hcl CP24 75 MG	16
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	44	vancomycin hcl SOLR IV 500 MG	25	venlafaxine hcl TABS	16
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	44	VANCOMYCIN HCL SOLR IV 500 MG	25	venlafaxine hcl TB24	16
USTEKINUMAB-TTWE	45	vancomycin hcl SOLR PO 25 MG/ML	25	VENTOLIN HFA AERS (albuterol sulfate)	12
USTEKINUMAB-TTWE SC	45	VANDAZOLE	96	verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG ...	36
UZEDY SUSY 100 MG/0.28ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML	31	VAQTA	95	verapamil hcl CP24 300 MG	36
UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	31	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	95	verapamil hcl CP24 360 MG	36
VABRINTY KIT SC 7.5 MG	28	varenicline tartrate TABS	89	VERAPAMIL HCL ER CP24 (verapamil hcl)	36
VABRINTY SC 22.5 MG, 30 MG, 45 MG	28	varenicline tartrate TBPK	89	verapamil hcl TABS	36
valacyclovir hcl 1 GM	35	VARIVAX SUSR	95	verapamil hcl TBCR	36
valacyclovir hcl 500 MG	35	VAXCHORA	93	VERELAN CP24 120 MG, 180 MG, 240 MG (verapamil hcl)	36
valganciclovir hcl TABS	34	VAXELIS SUSP	91	VERELAN CP24 360 MG (verapamil hcl)	36
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	14	VAXELIS SUSY	91	VERELAN PM CP24 100 MG, 200 MG (verapamil hcl)	36
valproic acid CAPS	14	VAXNEUVANCE	93	VERELAN PM CP24 300 MG (verapamil hcl)	36
valrubicin	28	VCF VAGINAL CONTRACEPTIVE FILM	95	VERIFINE SAFE LANCET MINI 21G	68
valsartan SOLN	24	VCF VAGINAL CONTRACEPTIVE GEL	95		
valsartan TABS	24	VECAMYL	25		

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VERIFINE SAFE LANCET MINI 28G68	VISUDYNE 85	VOSEVI 34
VERIFINE SAFE LANCET MINI 30G68	VITAMIN D3 LIQD PO 125 MCG/ML 97	VPRIV 58
VERIFINE UNIVERSAL LANCETS 28G 68	vitamin e CAPS 97	VRAYLAR CAPS 30
VERIFINE UNIVERSAL LANCETS 30G 69	VITAMIN E CAPS 97	VTAMA 45
VERIFINE UNIVERSAL LANCETS 33G 69	VITAMIN E CHEW 97	VYNDAMAX 37
VESICARE LS SUSP 92	VITAMIN E/D-ALPHA CAPS 200 UNIT 97	VYNDAQEL 37
VEVYE SOLN 84	VITAMINS ACD-FLUORIDE SOLN 79	VYONDYS 53 82
VICTOZA (liraglutide) 18	vitamins w/ lipotropics CAPS 79	VYSCOXA PO 10 MG/ML 5
vigabatrin PACK 14	VITASURE TABS 1 MG 77	VYVANSE CAPS (lisdexamfetamine dimesylate) 1
vigabatrin TABS 14	VITRAKVI CAPS 29	VYVANSE CHEW (lisdexamfetamine dimesylate) 1
VIGAFYDE SOLN 14	VITRAKVI SOLN 29	WAL-SLEEP Z TBDP 25 MG 60
VIGAMOX SOLN OP (moxifloxacin hcl (ophth)) 84	VIVAGUARD LANCETS 69	WAL-SOM TBDP 25 MG 60
VIJOICE TBPk 76	VIVAGUARD LANCETS 30G 69	warfarin sodium TABS 12
VILTEPSO 82	VIVAGUARD SAFETY LANCETS 28G 69	WEBCOL ALCOHOL PREP LARGE 70
VIMIZIM 54	VIVIMUSTA SOLN 26	WEBCOL ALCOHOL PREP MEDIUM 70
VIMOVO (naproxen-esomeprazole magnesium) 5	VIVITROL 21	WEGOVY 1
vincristine sulfate 30	VIVOTIF 93	WELLPRO 31 CAPS 20
VIRACEPT TABS 250 MG 34	VIZIMPRO 27	WES-PHOS 250 NEUTRAL 852 MG- 155 MG-130 MG 75
VIRACEPT TABS 625 MG 34	VOGELXO PUMP GEL TD (testosterone) 8	white petrolatum-mineral oil 83
VIREAD POWD 34	VONVENDI 57	WILATE KIT 57
VIREAD TABS (tenofovir disoproxil fumarate) 34	VORAXAZE 29	WINDMILL TRAINER MISC 74
VIREAD TABS 34	VORTEX HOLD CHMBR/MASK/CHILD DEVI 74	WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ... 87
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XARELTO TABS 15 MG12	XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML ..22	ZELBORAF29
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XELJANZ SOLN 1 MG/ML (tofacitinib citrate)3	YESINTEK SOSY45	ZEPBOUND SOAJ1
XELSTRYM1	YEZTUGO SOLN 463.5 MG/1.5ML 34	ZEPBOUND SOLN1
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XIIDRA85	YUFLYMA (2 PEN) AJKT4	ZIANA (clindamycin phosphate- tretinoin)43
XOFLUZA (40 MG DOSE) 40 MG .35	YUFLYMA (2 SYRINGE) PSKT4	zidovudine CAPS34
XOFLUZA (80 MG DOSE) 80 MG .35	YUFLYMA-CD/UC/HS STARTER AJKT4	zidovudine SYRP34
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zinc oxide (topical) OINT 20 %	49	ZOLGENSMA 17.1-17.5 KG	83	zolpidem tartrate TBCR	60
zinc sulfate CAPS	75	ZOLGENSMA 17.6-18.0 KG	83	ZOMIG SOLN 2.5 MG (zolmitriptan) .	75
ZINPLAVA	87	ZOLGENSMA 18.1-18.5 KG	83	ZONISADE SUSP	14
ziprasidone hcl	30	ZOLGENSMA 18.6-19.0 KG	83	zonisamide CAPS	14
ziprasidone mesylate	30	ZOLGENSMA 19.1-19.5 KG	83	ZORYVE CREA EX	49
ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG (sitagliptin free base- metformin hcl)	17	ZOLGENSMA 19.6-20.0 KG	83	ZORYVE FOAM EX	49
ZITUVIO 25 MG, 50 MG, 100 MG (sitagliptin)	17	ZOLGENSMA 2.6-3.0 KG	83	ZOVIRAX CREA (acyclovir topical)	45
ZOLADEX 10.8 MG	28	ZOLGENSMA 20.1-20.5 KG	83	ZOVIRAX OINT (acyclovir topical) .	45
ZOLADEX 3.6 MG	28	ZOLGENSMA 3.1-3.5 KG	83	ZTALMY	14
zoledronic acid CONC	52	ZOLGENSMA 3.6-4.0 KG	83	ZUBSOLV SUBL 0.18 MG-0.7 MG .	8
zoledronic acid SOLN 5 MG/100ML 52		ZOLGENSMA 4.1-4.5 KG	83	ZUBSOLV SUBL 0.36 MG-1.4 MG .	8
ZOLEDRONIC ACID SOLN	52	ZOLGENSMA 4.6-5.0 KG	83	ZUBSOLV SUBL 0.71 MG-2.9 MG .	8
ZOLGENSMA 20.6-21.0 KG	82	ZOLGENSMA 5.1-5.5 KG	83	ZUBSOLV SUBL 1.4 MG-5.7 MG ...	8
ZOLGENSMA 10.1-10.5 KG	82	ZOLGENSMA 5.6-6.0 KG	83	ZUBSOLV SUBL 2.1 MG-8.6 MG ...	8
ZOLGENSMA 10.6-11.0 KG	82	ZOLGENSMA 6.1-6.5 KG	83	ZUBSOLV SUBL 2.9 MG-11.4 MG .	8
ZOLGENSMA 11.1-11.5 KG	82	ZOLGENSMA 6.6-7.0 KG	83	ZULRESSO	15
ZOLGENSMA 11.6-12.0 KG	82	ZOLGENSMA 7.1-7.5 KG	83	ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	88
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ZOLGENSMA 12.6-13.0 KG	82	ZOLGENSMA 8.1-8.5 KG	83	ZURZUVAE	15
ZOLGENSMA 13.1-13.5 KG	82	ZOLGENSMA 8.6-9.0 KG	83	ZYDELIG	29
ZOLGENSMA 13.6-14.0 KG	82	ZOLGENSMA 9.1-9.5 KG	83	ZYKADIA TABS	29
ZOLGENSMA 14.1-14.5 KG	82	ZOLGENSMA 9.6-10.0 KG	83	ZYMFENTRA (1 PEN) AJKT	55
ZOLGENSMA 14.6-15.0 KG	82	ZOLINZA	29	ZYMFENTRA (2 PEN) AJKT	55
ZOLGENSMA 15.1-15.5 KG	83	zolmitriptan SOLN 2.5 MG	75	ZYMFENTRA (2 SYRINGE) PSKT	55
ZOLGENSMA 15.6-16.0 KG	83	zolmitriptan TABS	75	ZYNTEGLO	58
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		ZOLOFT CONC (sertraline hcl) ...	15		
		ZOLPIDEM TARTRATE CAPS ...	60		
		zolpidem tartrate SUBL	60		