

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

Drug Name	Drug Tier	Requirements/ Limits
<i>dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG</i>	1	MP
DYANAVEL XR TBCR	NP	
<i>lisdexamfetamine dimesylate CAPS</i>	NP	QL(1 EA daily); MP; PA
<i>lisdexamfetamine dimesylate CHEW</i>	1	MP; PA
<i>methamphetamine hcl</i>	1	Generic for Desoxyx; MP; PA
MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	MP
VYVANSE CAPS (<i>lisdexamfetamine dimesylate</i>)	2	QL(1 EA daily); MP; PA
VYVANSE CHEW (<i>lisdexamfetamine dimesylate</i>)	NP	MP; PA
XELSTRYM	NP	
Analeptics		
<i>caffeine citrate SOLN PO 60 MG/3ML</i>	1	QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail; MP
Anorexiants Non-Amphetamine		
<i>phentermine hcl-topiramate</i>	NP	PA
QSYMIA 11.25 MG-69 MG, 15 MG-92 MG, 3.75 MG-23 MG, 7.5 MG-46 MG (<i>phentermine hcl-topiramate</i>)	NP	PA
Anti-Obesity Agents		
WEGOVY	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 18 MG, 27 MG, 36 MG, 54 MG</i>	1	Generic for Concerta; AL(At least 6 yrs old); MP
Stimulants - Misc.			<i>methylphenidate hcl TBCR 45 MG, 63 MG</i>	NP	
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	NP	Generic for Aptensio XR; MP; PA	<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	AL(At least 6 yrs old); MP
AZSTARYS	NP	MP	RELEXXII TBCR 45 MG, 63 MG (<i>methylphenidate hcl</i>)	2	
CONCERTA TBCR (<i>methylphenidate hcl</i>)	2	Generic for Concerta; AL(At least 6 yrs old); MP	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG	2	Generic for Concerta; AL(At least 6 yrs old); MP
<i>dexmethylphenidate hcl CP24</i>	1	Generic for Focalin XR; MP; PA	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</i>	NP	Generic for Aptensio XR; 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 10 MG, 20 MG, 30 MG, 40 MG</i>	1	Generic for Ritalin LA; 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>	1	SP; PA	ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP; PA
<i>tobramycin NEBU</i>	NP	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-PS/UV/ADOL HS STARTER AJKT	2	SP; PA
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	NP	SP; PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	2	SP; PA
ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP; PA	HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP; PA
ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP; PA	HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP; PA
AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP; PA	HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP; PA
AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP; PA	HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP; PA
AMJEVITA SOAJ	NP	SP; PA	HYRIMOZ-PLAQUE PSORIASIS START SOAJ	NP	SP; PA
AMJEVITA SOSY	NP	SP; PA	HYRIMOZ SOAJ	NP	SP; PA
CYLTEZO (2 PEN) AJKT	NP	SP; PA	HYRIMOZ SOSY	NP	SP; PA
CYLTEZO (2 SYRINGE) PSKT	NP	SP; PA	IDACIO (2 PEN) AJKT	NP	SP; PA
CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP; PA	IDACIO (2 SYRINGE) PSKT	NP	SP; PA
CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP; PA	IDACIO-CROHNS/UC STARTER AJKT	NP	SP; PA
HADLIMA PUSHTOUCH SOAJ	2	SP; PA	IDACIO-PSORIASIS STARTER AJKT	NP	SP; PA
HADLIMA SOSY	2	SP; PA	SIMLANDI (1 PEN) AJKT	NP	SP; PA
HULIO (2 PEN) AJKT	NP	SP; PA	SIMLANDI (1 SYRINGE) PSKT	NP	SP; PA
HULIO (2 SYRINGE) PSKT	NP	SP; PA	SIMLANDI (2 PEN) AJKT	NP	SP; PA
HUMIRA (2 PEN) AJKT	2	SP; PA	SIMLANDI (2 SYRINGE) PSKT	NP	SP; PA
HUMIRA (2 PEN) AJKT 40 MG/0.8ML	2	SP; PA	YUFLYMA (1 PEN) AJKT	NP	SP; PA
HUMIRA (2 SYRINGE) PSKT	2	SP; PA	YUFLYMA (2 PEN) AJKT	NP	SP; PA
HUMIRA-CD/UC/HS STARTER AJKT 40 MG/0.8ML	2	SP; PA	YUFLYMA (2 SYRINGE) PSKT	NP	SP; PA
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	2	SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP; PA
HUMIRA-PED>=40KG UC STARTER AJKT	2	SP; PA	YUSIMRY	NP	SP; PA
Interleukin-6 Receptor Inhibitors					
AVTOZMA SOAJ SC 162 MG/0.9ML				NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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
<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
<i>nabumetone</i>	1	MP
<i>naproxen sodium TABS 275 MG, 550 MG</i>	1	MP

Drug Name	Drug Tier	Requirements/ Limits
<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	
VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	NP	PA
VYSCOXIA 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
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		

Drug Name	Drug Tier	Requirements/ Limits
<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	
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	

Drug Name	Drug Tier	Requirements/ Limits
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 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>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	PA
<i>hydrocodone bitartrate CP12</i>	NP	
HYDROMORPHONE HCL SUPP	2	QL(12 EA per fill retail)
<i>hydromorphone hcl TABS</i>	1	QL(8 EA daily)
<i>hydromorphone hcl TB24</i>	1	PA
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1	QL(500 ML per fill retail)
<i>meperidine hcl TABS 50 MG</i>	1	QL(6 EA daily)
<i>methadone hcl TABS 5 MG</i>	1	QL(4 EA daily); PA
<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PA
<i>morphine sulfate beads</i>	NP	PA

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG</i>	1	QL(12 EA daily)	ZUBSOLV SUBL 0.36 MG-1.4 MG	2	QL(12 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	1	QL(3 EA daily)	ZUBSOLV SUBL 2.9 MG-11.4 MG	2	QL(1.5 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	1	QL(12 EA daily)	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	1	QL(3 EA daily)	Androgens		
<i>buprenorphine hcl SUBL</i>	1	PA	ANDROGEL PUMP GEL TD (<i>testosterone</i>)	NP	PA
<i>buprenorphine PTWK</i>	1	PA	AVEED SOLN	2	SP; PA
BUTRANS PTWK (<i>buprenorphine</i>)	2	PA	<i>methyltestosterone TABS</i>	1	
SUBLOCADE SOSY	2	1 max fill(s) per 30 day(s) retail; SP	TESTOPEL PLLT	2	SP; PA
SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(2 EA daily)	<i>testosterone cypionate SOLN IM 200 MG/ML</i>	1	QL(4 ML per 30 day(s) retail)
SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 EA daily)	<i>testosterone GEL TD 1 %</i>	NP	
SUBOXONE FILM SL 0.5 MG-2 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(12 EA daily)	<i>testosterone GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 %</i>	1	PA
SUBOXONE FILM SL 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(6 EA daily)	<i>testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM</i>	1	
ZUBSOLV SUBL 2.1 MG-8.6 MG	2	QL(2 EA daily)	<i>testosterone GEL TD 10 MG/ACT</i>	NP	PA
ZUBSOLV SUBL 0.71 MG-2.9 MG	2	QL(6 EA daily)	<i>testosterone SOLN</i>	NP	PA
ZUBSOLV SUBL 0.18 MG-0.7 MG	2	QL(8 EA daily)	VOGELXO PUMP GEL TD (<i>testosterone</i>)	NP	
ZUBSOLV SUBL 1.4 MG-5.7 MG	2	QL(3 EA daily)	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		
			HEMORRHOIDAL 0.25 %-85.5 %-3 %	2	QL(48 EA per fill retail)
			SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %	2	QL(12 GM per fill retail)
			Rectal Local Anesthetics		

Drug Name	Drug Tier	Requirements/ Limits
<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	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
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 CPR 2.5 MG, 6.5 MG, 9 MG	2	MP
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		

Drug Name	Drug Tier	Requirements/ Limits
BUCAPSOL PO 7.5 MG, 10 MG, 15 MG	NP	
<i>buspirone 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 25 MG, 100 MG</i>	1	
<i>hydroxyzine pamoate CAPS 50 MG</i>	1	MP
<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 TBDP</i>	NP	
<i>chlordiazepoxide hcl CAPS</i>	1	QL(4 EA daily)
<i>clorazepate dipotassium TABS</i>	1	QL(3 EA daily)
<i>diazepam CONC</i>	NP	
<i>diazepam SOLN IJ 5 MG/ML</i>	NP	
<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML</i>	1	
<i>diazepam SOLN PO 5 MG/5ML</i>	1	QL(500 ML per fill retail)
DIAZEPAM SOLN IJ 5 MG/ML	1	
<i>diazepam TABS</i>	1	QL(4 EA daily)
<i>lorazepam CONC</i>	1	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	1	QL(4 EA daily)
LOREEV XR CS24	NP	
<i>oxazepam CAPS</i>	NP	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
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)
Bronchodilators - Anticholinergics		

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

Drug Name	Drug Tier	Requirements/ Limits
BREZTRI AEROSPHERE	NP	
<i>budesonide-formoterol fumarate dihydrate</i>	NP	QL(11 GM per 30 day(s) retail)
COMBIVENT RESPIMAT AERS	2	QL(4 GM per 30 day(s) retail)
DULERA 50 MCG/ACT-5 MCG/ACT	2	
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	2	QL(13 GM per 30 day(s) retail)
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	QL(2 EA daily)
<i>fluticasone-salmeterol AERO</i>	NP	
<i>ipratropium-albuterol SOLN</i>	1	QL(12 ML daily)
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	NP	
<i>levalbuterol hcl</i>	1	
<i>levalbuterol tartrate</i>	1	
PROVENTIL HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(0.45 GM daily)
SEREVENT DISKUS	2	QL(2 EA daily)
STIOLTO RESPIMAT	2	
SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	2	QL(11 GM per 30 day(s) retail)
<i>terbutaline sulfate TABS</i>	1	MP
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(0.54 GM daily)
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(1.2 GM daily)
XOPENEX HFA (<i>levalbuterol tartrate</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
Xanthines		
THEO-24 CP24 200 MG, 300 MG, 400 MG	2	
THEO-24 CP24 100 MG	2	MP
<i>theophylline ELIX</i>	1	
<i>theophylline SOLN</i>	1	QL(475 ML per fill retail); MP
<i>theophylline TB12 450 MG</i>	1	
<i>theophylline TB12 100 MG, 200 MG, 300 MG</i>	1	MP
<i>theophylline TB24</i>	1	MP
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1	MP
Direct Factor Xa Inhibitors		
ELIQUIS (1.5 MG PACK) TBSO PO	2	
ELIQUIS (2 MG PACK) TBSO PO	2	
ELIQUIS DVT/PE STARTER PACK TBPk	2	QL(4 EA daily)
ELIQUIS CPSP PO 0.15 MG	2	
ELIQUIS TABS	2	QL(4 EA daily)
ELIQUIS TBSO PO 0.5 MG	2	
<i>rivaroxaban SUSR 1 MG/ML</i>	NP	
<i>rivaroxaban TABS 2.5 MG</i>	NP	
XARELTO STARTER PACK TBPk	2	
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	
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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Heparins And Heparinoid-Like Agents			VALTOCO 5 MG DOSE LIQD	2	QL(10 EA per 30 day(s) retail)
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	1	QL(180 ML per 30 day(s) retail)	Anticonvulsants - Misc.		
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	1	QL(18 ML per 30 day(s) retail)	<i>brivaracetam SOLN IV 50 MG/5ML</i>	1	SP; PA
<i>enoxaparin sodium SOSY 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 40 MG/0.4ML, 60 MG/0.6ML</i>	1	QL(36 ML per 30 day(s) retail)	<i>carbamazepine CHEW 100 MG</i>	1	MP
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	1	QL(48 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	
			<i>lamotrigine TBDP</i>	1	
			<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	1	QL(30 ML daily); MP
			<i>levetiracetam TABS</i>	1	MP
			<i>levetiracetam TB24</i>	1	MP
			MOTPOLY XR CP24	NP	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>tiagabine hcl 12 MG, 16 MG</i>	NP	
<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

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

Drug Name	Drug Tier	Requirements/Limits
<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	1	MP
<i>trazodone hcl TABS 300 MG</i>	1	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>CYMBALTA CPEP 20 MG, 30 MG (duloxetine hcl)</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); MP
<i>CYMBALTA CPEP 60 MG (duloxetine hcl)</i>	NP	QL(2 EA daily); AL(At least 7 yrs old); MP
<i>DESVENLAFAXINE ER</i>	2	
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1	QL(1 EA daily); MP
<i>desvenlafaxine succinate 100 MG</i>	1	QL(4 EA daily); MP
<i>duloxetine hcl CPEP 20 MG, 30 MG, 40 MG</i>	1	QL(1 EA daily); AL(At least 7 yrs old); MP
<i>duloxetine hcl CPEP 60 MG</i>	1	QL(2 EA daily); AL(At least 7 yrs old); MP
<i>VENLAFAXINE BESYLATE ER</i>	NP	
<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 CP24 150 MG</i>	1	QL(2 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

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl CAPS 150 MG</i>	1	
<i>doxepin hcl CONC</i>	1	
<i>imipramine hcl TABS</i>	1	
<i>imipramine pamoate</i>	1	
<i>nortriptyline hcl CAPS</i>	1	
<i>nortriptyline hcl SOLN</i>	1	
<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>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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG</i>	NP		GVOKE KIT SOLN	NP	
<i>sitagliptin phosphate-metformin hcl TABS</i>	1		<i>mifepristone (hyperglycemia)</i>	1	SP; PA
<i>sitagliptin phosphate-metformin hcl TB24</i>	1		PROGLYCEM (<i>diazoxide</i>)	2	
XIGDUO XR TB24 PO (<i>dapagliflozin free base-metformin hcl</i>)	2		TRUEPLUS GLUCOSE ON THE GO CHEW	2	QL(1.67 EA daily); MP
ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG (<i>sitagliptin free base-metformin hcl</i>)	NP		TRUEPLUS GLUCOSE CHEW	2	QL(1.67 EA daily); MP
Biguanides			ZEGALOGUE SOAJ	2	
GLUMETZA TB24 (<i>metformin hcl</i>)	NP		ZEGALOGUE SOSY	2	
<i>metformin hcl SOLN</i>	1		Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>metformin hcl TABS 625 MG, 750 MG</i>	NP		<i>alogliptin benzoate</i>	NP	QL(1 EA daily); MP
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	1	MP	BRYNOVIN SOLN PO 25 MG/ML	NP	
<i>metformin hcl TB24 500 MG, 750 MG</i>	1	MP	ONGLYZA 5 MG (<i>saxagliptin hcl</i>)	NP	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP		<i>saxagliptin hcl</i>	1	
Diabetic Other			<i>sitagliptin 25 MG, 50 MG, 100 MG</i>	NP	
BAQSIMI ONE PACK POWD	2	QL(0.069 EA daily)	<i>sitagliptin phosphate 25 MG, 50 MG, 100 MG</i>	1	
BAQSIMI TWO PACK POWD	2	QL(0.069 EA daily)	TRADJENTA	2	QL(1 EA daily); AL(At least 18 yrs old); MP
BD GLUCOSE CHEW	2	QL(1.67 EA daily); MP	ZITUVIO 25 MG, 50 MG, 100 MG (<i>sitagliptin</i>)	NP	
<i>dextrose (diabetic use) CHEW 4 GM</i>	1	QL(1.67 EA daily); MP	Incretin Mimetic Agents		
<i>diazoxide</i>	NP		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
GLUCAGON EMERGENCY SOLR IJ 1 MG (<i>glucagon</i>)	2	QL(1 EA per fill retail); MP	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>glucagon SOLR IJ 1 MG</i>	1	QL(1 EA per fill retail); MP	<i>exenatide SOPN 10 MCG/0.04ML</i>	1	QL(2.4 ML per 30 day(s) retail); AL(At least 18 yrs old); PA

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

Drug Name	Drug Tier	Requirements/ Limits
Insulin Sensitizing Agents		
<i>pioglitazone hcl</i>	1	QL(1 EA daily); MP
Meglitinide Analogues		
<i>nateglinide</i>	1	QL(3 EA daily); MP
<i>repaglinide</i>	1	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin TABS PO 5 MG, 10 MG</i>	NP	
FARXIGA TABS PO (<i>dapagliflozin</i>)	2	
INVOKANA	NP	MP
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 4 MG</i>	1	QL(2 EA daily); MP
<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily); MP
<i>glimepiride 3 MG</i>	1	
<i>glipizide TABS 5 MG, 10 MG</i>	1	MP
<i>glipizide TABS 2.5 MG</i>	1	
<i>glipizide TB24</i>	1	MP
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	MP
<i>glyburide TABS</i>	1	MP
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
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

Drug Name	Drug Tier	Requirements/ Limits
BIONARA ULTRA CPDR	2	RX/OTC
BIOSTORA CAPS	2	RX/OTC
<i>bismuth subsalicylate CHEW 262 MG</i>	1	
<i>bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML</i>	1	
CULTURELLE KIDS PURELY CHEW	2	
CULTURELLE KIDS CHEW	2	
DERMACINRX PROBISOL CAPS	2	RX/OTC
DERMACINRX PROBITRAN CAPS	2	RX/OTC
FLORENTA CAPS	2	RX/OTC
FLORRAGUT CAPS	2	RX/OTC
FLORRAXIS CAPS	2	RX/OTC
LACTEROL CAPS	2	RX/OTC
LACTIVITE CAPS	2	RX/OTC
<i>lactobacillus rhamnosus (gg) PACK 23 MG, 5 B CELL, 5 B CELL</i>	1	
LACTOVIVE CAPS	2	RX/OTC
MICROBALANCE CAPS	2	RX/OTC
MICROFLOR 33 CAPS	2	RX/OTC
MICROVARA CPDR	2	RX/OTC
MVW COMPL FORM PROBIOTIC-KIDS CPDR	2	RX/OTC
NEXIVA CAPS	2	RX/OTC
NOVORA CAPS	2	RX/OTC
PROBENTRA CPDR	2	RX/OTC
PROBINATE 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	CULTURELLE DIGESTIVE DAILY CAPS	2	RX/OTC
<i>probiotic product CPDR</i> 50 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	RX/OTC
PROMELLA IN PREBIOTIC CAPS	2	RX/OTC	<i>lactobacillus-inulin CHEW</i> 200 MG-10 BILLION, 350 MG-1 GM	1	
PRORIVA CAPS	2	RX/OTC	TRUEBALANCE CAPS	2	RX/OTC
RELIBIOTIC CAPS	2	RX/OTC	Antiperistaltic Agents		
SM ADVANCED PROBIOTIC CAPS	2	RX/OTC	<i>diphenoxylate w/ atropine LIQD</i>	1	
SUREBIOTIC PROBIOTIC SUPPORT CAPS	2	RX/OTC	<i>diphenoxylate w/ atropine TABS</i>	1	
SYNBIARA CAPS	2	RX/OTC	<i>loperamide hcl CAPS</i>	1	QL(8 EA daily); RX/OTC
SYNOVEXA CAPS	2	RX/OTC	<i>loperamide hcl TABS</i>	1	QL(8 EA daily)
UP4 PROBIOTICS ADULT CAPS	2	RX/OTC	ANTIDOTES AND SPECIFIC ANTAGONISTS		
VELENTA 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
			<i>deferiprone TABS</i>	1	SP; PA
			FERRIPROX SOLN	2	SP; PA
			Antidotes and Specific Antagonists		
			ANDEXXA 200 MG	2	SP; PA
			<i>deferoxamine mesylate</i>	1	SP; PA
			SM IPECAC SYRUP	2	
			<i>sugammadex sodium SOLN</i> 200 MG/2ML, 500 MG/5ML	1	PA
			VISTOGARD	2	
			Opioid Antagonists		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KLOXXADO LIQD	0	QL(18 EA per 90 day(s) retail); MP	<i>ondansetron TBDP 16 MG</i>	NP	
<i>naloxone hcl LIQD</i>	0	QL(18 EA per 90 day(s) retail); MP; RX/OTC	Antiemetics - Anticholinergic		
<i>naloxone hcl SOCT</i>	0	QL(18 ML per 90 day(s) retail); MP	<i>meclizine hcl CHEW</i>	1	RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML</i>	0	QL(18 ML per 90 day(s) retail); MP	<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC
<i>naloxone hcl SOLN 4 MG/10ML</i>	0	QL(180 ML per 90 day(s) retail); MP	Antiemetics - Miscellaneous		
<i>naloxone hcl SOSY 2 MG/2ML</i>	0	QL(18 ML per 90 day(s) retail); MP	BONJESTA TBCR	2	
<i>naloxone hcl SOSY 0.4 MG/ML</i>	1		DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	2	
<i>naltrexone hcl</i>	0	MP	<i>doxylamine-pyridoxine TBEC</i>	NP	
NARCAN LIQD (<i>naloxone hcl</i>)	0	QL(18 EA per 90 day(s) retail); MP; RX/OTC	Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
OPVEE NA	0	QL(6 EA per 30 day(s) retail); MP	APONVIE EMUL	NP	
REXTOVY LIQD	2		<i>aprepitant CAPS</i>	1	
VIVITROL	0	SP; MP	<i>aprepitant CPPK PO</i>	1	
ZIMHI SOSY	0	QL(9 ML per 90 day(s) retail); MP	ANTIFUNGALS - Drugs to Treat Fungal Infections		
ZURNAI IJ 1.5 MG/0.5ML	2		Antifungals		
ANTIEMETICS - Drugs to Treat Nausea and Vomiting			<i>griseofulvin microsize SUSP</i>	1	
5-HT3 Receptor Antagonists			<i>griseofulvin microsize TABS</i>	1	
<i>granisetron hcl TABS</i>	1		<i>griseofulvin ultramicrosize</i>	1	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	QL(50 ML per fill retail)	<i>nystatin TABS</i>	1	QL(6 EA daily)
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	1	QL(2 EA daily)	<i>terbinafine hcl TABS</i>	1	QL(1 EA daily; 90 EA per 120 day(s) retail)
<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(2 EA daily)	Imidazole-Related Antifungals		
			<i>fluconazole SUSR</i>	1	QL(70 ML per fill retail)
			<i>fluconazole TABS 100 MG</i>	1	QL(1 EA daily)
			<i>fluconazole TABS 200 MG</i>	1	
			<i>fluconazole TABS 150 MG</i>	1	QL(2 EA daily)
			<i>fluconazole TABS 50 MG</i>	1	QL(7 EA per fill retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>itraconazole CAPS</i>	1	QL(1 EA daily); PA	<i>fexofenadine hcl TABS 180 MG</i>	1	QL(1 EA daily)
<i>itraconazole SOLN</i>	1	PA	<i>levocetirizine dihydrochloride SOLN</i>	1	RX/OTC
ANTIHISTAMINES - Drugs to Treat Allergies			<i>loratadine CAPS</i>	1	
Antihistamines - Alkylamines			<i>loratadine CHEW</i>	1	
<i>chlorpheniramine maleate SYRP</i>	1	QL(60 ML daily)	<i>loratadine SOLN</i>	1	QL(240 ML per fill retail)
<i>chlorpheniramine maleate TABS</i>	1	QL(120 EA per fill retail)	<i>loratadine TABS</i>	1	
<i>dexchlorpheniramine maleate SOLN</i>	1		<i>loratadine TBDP 10 MG</i>	1	
Antihistamines - Ethanolamines			WAL-ZYR CHILDRENS CHEW 5 MG	2	QL(1 EA daily)
BENADRYL ALLERGY EXTRA STR TABS	2	QL(4 EA daily)	XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML	2	RX/OTC
DAYHIST ALLERGY 12 HOUR RELIEF TABS	2	QL(2 EA daily)	Antihistamines - Phenothiazines		
<i>diphenhydramine hcl CAPS</i>	1	QL(4 EA daily)	<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>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1	QL(240 ML per fill retail)	<i>promethazine hcl SUPP</i>	1	QL(12 EA per fill retail); AL(At least 2 yrs old)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1	QL(240 ML per fill retail)	<i>promethazine hcl TABS</i>	1	AL(At least 2 yrs old)
<i>diphenhydramine hcl TABS 25 MG</i>	1	QL(4 EA daily)	Antihistamines - Piperidines		
Antihistamines - Non-Sedating			<i>ciproheptadine hcl SYRP</i>	1	
<i>cetirizine hcl CAPS</i>	1		<i>ciproheptadine hcl TABS</i>	1	
<i>cetirizine hcl CHEW</i>	1	QL(1 EA daily)	ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
<i>cetirizine hcl SOLN PO</i>	1	QL(240 ML per fill retail); RX/OTC	Antihyperlipidemics - Combinations		
<i>cetirizine hcl SYRP PO 1 MG/ML</i>	1	QL(240 ML per fill retail); RX/OTC	<i>ezetimibe-simvastatin</i>	1	
<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)	Antihyperlipidemics - Misc.		
DESLORATADINE SOLN PO 0.5 MG/ML	NP		<i>omega-3-acid ethyl esters</i>	1	
<i>desloratadine TBDP</i>	NP		Bile Acid Sequestrants		
<i>fexofenadine hcl SUSP</i>	1		<i>cholestyramine light PACK</i>	1	MP
<i>fexofenadine hcl TABS 60 MG</i>	1	QL(2 EA daily)	<i>cholestyramine light POWD</i>	1	MP
			<i>cholestyramine PACK</i>	1	MP

Drug Name	Drug Tier	Requirements/ Limits
<i>cholestyramine POWD</i>	1	MP
<i>colestipol hcl GRAN</i>	1	MP
<i>colestipol hcl TABS</i>	1	MP
Fibric Acid Derivatives		
<i>fenofibrate micronized 30 MG, 43 MG, 130 MG</i>	1	
<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 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

Drug Name	Drug Tier	Requirements/ Limits
<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	
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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>quinapril hcl</i>	1	QL(1 EA daily); MP	<i>amlodipine-valsartan-hydrochlorothiazide</i>	NP	
<i>ramipril CAPS</i>	1	QL(2 EA daily); MP	<i>atenolol & chlorthalidone</i>	1	QL(1 EA daily); MP
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily); MP	<i>benazepril & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<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>metyrosine</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-20 MG</i>	1	QL(4 EA daily)
<i>clonidine hcl TABS</i>	1	MP	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)
<i>doxazosin mesylate</i>	1	MP	<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)
<i>guanfacine hcl</i>	1	MP	<i>telmisartan-amlodipine</i>	1	
<i>methyldopa TABS</i>	1	MP			
<i>prazosin hcl CAPS</i>	1	MP			
<i>terazosin hcl</i>	1	MP			
Antihypertensive Combinations					
ACCURETIC 12.5 MG-10 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(3 EA daily)			
<i>amlodipine besylate-benazepril hcl</i>	1	QL(1 EA daily); MP			
<i>amlodipine besylate-olmesartan medoxomil</i>	1				
<i>amlodipine besylate-valsartan</i>	1				

Drug Name	Drug Tier	Requirements/ Limits
<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>trandolapril-verapamil hcl</i>	NP	
<i>valsartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP
Antihypertensives - Misc.		
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 phospheryl 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 250 MG</i>	1	QL(8 EA daily)
<i>vancomycin hcl CAPS 125 MG</i>	1	QL(4 EA daily)
<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)

Drug Name	Drug Tier	Requirements/ Limits
<i>vancomycin hcl SOLR PO 25 MG/ML</i>	1	QL(300 ML per fill retail)
VANCOMYCIN HCL SOLR IV 1 GM	2	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 500 MG	2	QL(0.467 EA daily)
Leprostatics		
<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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DARAPRIM (pyrimethamine)	NP	SP; PA	<i>cyclophosphamide CAPS 50 MG</i>	1	
KRINTAFEL	2	QL(2 EA per 30 day(s) retail)	CYCLOPHOSPHAMIDE TABS	2	
<i>mefloquine hcl</i>	1		EVOMELA IV	2	SP; PA
<i>pyrimethamine</i>	1	SP; PA	KEMOPLAT SOLN	2	SP; PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS			LEUKERAN	2	
Antimyasthenic/Cholinergic Agents			<i>melfalan hcl IV</i>	1	SP; PA
FIRDAPSE	2	SP; PA	MYLERAN TABS	2	
<i>pyridostigmine bromide TABS 60 MG</i>	1		TEMODAR SOLR	2	SP; PA
<i>pyridostigmine bromide TBCR</i>	1		<i>temozolomide CAPS</i>	1	SP; PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)			VIVIMUSTA SOLN	2	SP; PA
Antimycobacterial Agents			YONDELIS	2	SP; PA
<i>ethambutol hcl TABS</i>	1	MP	Antimetabolites		
<i>isoniazid SYRP</i>	1	MP	<i>azacitidine SUSR</i>	1	SP; PA
<i>isoniazid TABS</i>	1	MP	<i>capecitabine</i>	1	SP; PA
<i>pyrazinamide</i>	1		<i>cladribine 10 MG/10ML</i>	1	SP; PA
<i>rifampin CAPS</i>	1		<i>cytarabine SOLN</i>	1	SP; PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>decitabine</i>	1	SP; PA
Alkylating Agents			<i>fludarabine phosphate SOLN</i>	1	SP; PA
BELRAPZO SOLN	2	SP; PA	<i>fludarabine phosphate SOLR</i>	1	SP; PA
BENDAMUSTINE HCL SOLN	2	SP; PA	FOLOTYN	2	SP; PA
<i>bendamustine hcl SOLR</i>	1	SP; PA	<i>mercaptopurine SUSP 2000 MG/100ML</i>	1	
BENDEKA SOLN	2	SP; PA	<i>mercaptopurine TABS</i>	1	
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML</i>	1	SP; PA	<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	1	
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	1	SP; PA	<i>methotrexate sodium TABS 2.5 MG</i>	1	MP
CISPLATIN SOLR	2	SP; PA	<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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic - Angiogenesis Inhibitors			UNITUXIN	2	SP; PA
AVASTIN	2	SP; PA	YERVOY	2	SP; PA
CYRAMZA	2	SP; PA	ZEVALIN Y-90	2	SP; PA
INLYTA	2	SP; PA	Antineoplastic - Anti-HER2 Agents		
LENVIMA (10 MG DAILY DOSE)	2	SP; PA	KANJINTI 420 MG	2	SP; PA
LENVIMA (12 MG DAILY DOSE)	2	SP; PA	PERJETA	2	SP; PA
LENVIMA (14 MG DAILY DOSE)	2	SP; PA	Antineoplastic - BCL-2 Inhibitors		
LENVIMA (18 MG DAILY DOSE)	2	SP; PA	VENCLEXTA STARTING PACK TBPK	2	SP; PA
LENVIMA (20 MG DAILY DOSE)	2	SP; PA	VENCLEXTA TABS	2	SP; PA
LENVIMA (24 MG DAILY DOSE)	2	SP; PA	Antineoplastic - Cellular Immunotherapy		
LENVIMA (4 MG DAILY DOSE)	2	SP; PA	KYMRIAH	2	SP; PA
LENVIMA (8 MG DAILY DOSE)	2	SP; PA	PROVENGE	2	SP; PA
MVASI	2	SP; PA	YESCARTA	2	SP; PA
ZALTRAP	2	SP; PA	Antineoplastic - EGFR Inhibitors		
Antineoplastic - Antibodies			ERBITUX	2	SP; PA
ADCETRIS	2	SP; PA	<i>erlotinib hcl</i>	1	SP; PA
ARZERRA	2	SP; PA	<i>gefitinib</i>	1	SP; PA
BLINCYTO	2	SP; PA	GILOTRIF	2	SP; PA
DARZALEX	2	SP; PA	PORTRAZZA	2	SP; PA
EMPLICITI	2	SP; PA	TAGRISSO	2	SP; PA
GAZYVA	2	SP; PA	VECTIBIX 100 MG/5ML, 400 MG/20ML	2	SP; PA
KADCYLA	2	SP; PA	VIZIMPRO	2	SP; PA
KEYTRUDA	2	SP; PA	Antineoplastic - Hedgehog Pathway Inhibitors		
LIBTAYO	2	SP; PA	DAURISMO	2	SP; PA
OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	2	SP; PA	ERIVEDGE	2	SP; PA
POLIVY 140 MG	2	SP; PA	ODOMZO	2	SP; PA
POTELIGEO	2	SP; PA	Antineoplastic - Hormonal and Related Agents		
RITUXAN	2	SP; PA	<i>abiraterone acetate</i>	1	SP; PA
TECENTRIQ	2	SP; PA	<i>anastrozole</i>	1	MP
			<i>bicalutamide</i>	1	QL(1 EA daily)
			CAMCEVI	2	SP
			ELIGARD SC 22.5 MG, 30 MG, 45 MG	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELIGARD KIT SC 7.5 MG	2	SP; PA	ZOLADEX 3.6 MG	2	SP; PA
EMCYT	2	SP; PA	Antineoplastic - Immunomodulators		
ERLEADA 60 MG	2	SP; PA	<i>pomalidomide</i> 1 MG, 2 MG, 3 MG, 4 MG	1	SP; PA
EULEXIN	2		Antineoplastic Antibiotics		
<i>exemestane</i>	1		<i>daunorubicin hcl SOLN</i> 50 MG/10ML	1	SP; PA
FIRMAGON 80 MG	2	SP; PA	ELLECE SOLN	2	SP; PA
FIRMAGON (240 MG DOSE)	2	SP; PA	<i>mitoxantrone hcl</i> 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML	1	SP; PA
<i>letrozole</i>	1	QL(1 EA daily); MP	<i>valrubicin</i>	1	SP; PA
<i>leuprolide acetate (3 month) INJ</i> 22.5 MG	1		Antineoplastic Combinations		
LEUPROLIDE ACETATE-BUPIVACAINE	2	SP; PA	HERCEPTIN HYLECTA	2	SP; PA
<i>leuprolide acetate KIT IJ</i> 1 MG/0.2ML	1	SP; PA	LONSURF	2	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	2	SP; PA	Antineoplastic Enzyme Inhibitors		
LUPRON DEPOT (3-MONTH) KIT IM	2	SP; PA	ALECENSA	2	SP; PA
LUPRON DEPOT (4-MONTH) IM	2	SP; PA	BELEODAQ	2	SP; PA
LUPRON DEPOT (6-MONTH) IM	2	SP; PA	<i>bortezomib SOLR IJ</i>	1	SP; PA
LUTRATE DEPOT INJ 22.5 MG	2		<i>bosutinib TABS</i> 100 MG, 500 MG	1	SP; PA
LYSODREN	2	SP; PA	BRAFTOVI 75 MG	2	SP; PA
<i>megestrol acetate SUSP</i>	1		CABOMETYX TABS	2	SP; PA
<i>megestrol acetate TABS</i>	1		CAPRELSA	2	SP; PA
<i>tamoxifen citrate TABS</i>	1	MP	COMETRIQ (100 MG DAILY DOSE) KIT	2	SP; PA
<i>toremifene citrate</i>	1	PA	COMETRIQ (140 MG DAILY DOSE) KIT	2	SP; PA
TRELSTAR MIXJECT 11.25 MG, 22.5 MG	2	SP; PA	COMETRIQ (60 MG DAILY DOSE) KIT	2	SP; PA
TRELSTAR MIXJECT 3.75 MG	2	SP; PA	COTELLIC	2	SP; PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	2	SP; PA	<i>dasatinib</i>	1	SP; PA
VABRINTY KIT SC 7.5 MG	2	SP; PA	<i>everolimus TABS</i>	1	SP; PA
XTANDI CAPS	2	SP; PA	<i>everolimus TBSO</i>	1	SP; PA
ZOLADEX 10.8 MG	2	SP; PA	IBRANCE CAPS 100 MG, 125 MG	2	SP; PA
			ICLUSIG 15 MG, 45 MG	2	SP; PA
			<i>imatinib mesylate TABS</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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
<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

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic Radiopharmaceuticals		
LUTATHERA	2	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	2	SP; PA
<i>arsenic trioxide 12 MG/6ML</i>	1	SP; PA
<i>bexarotene</i>	1	SP; PA
<i>hydroxyurea</i>	1	MP
MATULANE	2	SP; PA
PHOTOFRIN	2	SP; PA
PROLEUKIN	2	SP; PA
<i>tretinoin (chemotherapy)</i>	1	SP; PA
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, 500 MG/25ML	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

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

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

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

Drug Name	Drug Tier	Requirements/ Limits
RYKINDO SRER	NP	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
UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	2	SP
Butyrophenones		
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate CONC</i>	1	
<i>haloperidol lactate SOLN</i>	1	
<i>haloperidol TABS</i>	1	
Dibenzapines		
<i>clozapine TABS</i>	0	
<i>clozapine TBDP</i>	0	
<i>loxapine succinate</i>	1	
<i>olanzapine SOLR</i>	1	
<i>olanzapine TABS</i>	1	AL(At least 10 yrs old)
<i>olanzapine TBDP</i>	1	
<i>quetiapine fumarate TABS</i>	1	
<i>quetiapine fumarate TB24</i>	1	
ZYPREXA RELPREVV	NP	SP
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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>prochlorperazine maleate TABS</i>	1		ARISTADA 441 MG/1.6ML	2	QL(1.6 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP
<i>thioridazine hcl</i>	1				
<i>trifluoperazine hcl TABS</i>	1		OPIPZA FILM	NP	
Quinolinone Derivatives			Thioxanthenes		
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>thiothixene</i>	1	
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	ANTIVIRALS - Drugs to Treat Viral Infections		
ABILIFY MAINTENA PRSY	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	Antiretrovirals		
ABILIFY MAINTENA SRER	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>abacavir sulfate-lamivudine</i>	0	QL(1 EA daily)
ABILIFY MYCITE MAINTENANCE KIT	NP	SP	<i>abacavir sulfate SOLN</i>	0	QL(30 ML daily)
ABILIFY MYCITE STARTER KIT	NP	SP	<i>abacavir sulfate TABS</i>	0	QL(2 EA daily)
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily)	APRETUDE	0	
<i>aripiprazole TABS</i>	1	QL(1 EA daily)	APTIVUS CAPS	0	QL(4 EA daily)
<i>aripiprazole TBDP</i>	1	QL(2 EA daily)	<i>atazanavir sulfate CAPS</i>	0	QL(2 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	BIKTARVY 120 MG-30 MG-15 MG	0	
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	BIKTARVY 200 MG-50 MG-25 MG	0	QL(1 EA daily)
			COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
			<i>darunavir TABS</i>	0	QL(2 EA daily)
			DELSTRIGO	0	QL(1 EA daily)
			DESCOVY 120 MG-15 MG	0	
			DESCOVY 200 MG-25 MG	0	QL(1 EA daily)
			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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)	KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	0	QL(6 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)	KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	0	QL(4 EA daily)
<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 200 MG (<i>etravirine</i>)	0	QL(2 EA daily)	PIFELTRO	0	QL(1 EA daily)
INTELENCE (<i>etravirine</i>)	0	QL(4 EA daily)	PREZCOBIX	0	
INTELENCE	0	QL(4 EA daily)	PREZCOBIX	0	QL(1 EA daily)
ISENTRESS CHEW 25 MG	0	QL(12 EA daily)	PREZISTA SUSP	0	QL(12 ML daily)
ISENTRESS CHEW 100 MG	0	QL(6 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)
			RETROVIR SYRP (<i>zidovudine</i>)	0	QL(60 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	0	QL(2 EA daily)	YEZTUGO TABS PO 300 MG	0	SP
REYATAZ PACK	0	QL(6 EA daily)	ZIAGEN SOLN (<i>abacavir sulfate</i>)	0	QL(30 ML daily)
<i>rilpivirine hcl</i> 25 MG	0	QL(1 EA daily)	<i>zidovudine</i> CAPS	0	QL(6 EA daily)
<i>ritonavir</i> TABS	0	QL(12 EA daily)	<i>zidovudine</i> SYRP	0	QL(60 ML daily)
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	SOFOVIR-SOFOSBUVIR TABS	2	SP
			SOVALDI PACK	NP	SP; PA
			SOVALDI TABS	NP	SP; PA
			VOSEVI	NP	SP; PA
			ZEPATIER	NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Herpes Agents		
<i>acyclovir CAPS</i>	1	QL(50 EA per 30 day(s) retail)
<i>acyclovir SUSP</i>	1	QL(400 ML per 30 day(s) retail)
<i>acyclovir TABS PO 800 MG</i>	1	QL(50 EA per 30 day(s) retail)
<i>acyclovir TABS PO 400 MG</i>	1	QL(3 EA daily)
<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 30 MG</i>	1	QL(20 EA per fill retail)
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	1	QL(10 EA per fill retail)
<i>oseltamivir phosphate SUSP</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 3.125 MG, 6.25 MG, 12.5 MG</i>	1	QL(3 EA daily); MP
<i>carvedilol 25 MG</i>	1	QL(4 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

Drug Name	Drug Tier	Requirements/ Limits
<i>labetalol hcl TABS 100 MG</i>	1	QL(3 EA daily); MP
<i>labetalol hcl TABS 400 MG</i>	1	
<i>labetalol hcl TABS 200 MG</i>	1	QL(6 EA daily); MP
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily); MP
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 12.5 MG, 37.5 MG, 75 MG</i>	1	
<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
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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sotalol hcl (afib/afl)</i>	1	QL(2 EA daily); MP	<i>nifedipine CAPS</i>	1	QL(4 EA daily); MP
<i>sotalol hcl TABS 240 MG</i>	1	MP	<i>nifedipine TB24 30 MG, 90 MG</i>	1	QL(1 EA daily); MP
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily); MP	<i>nifedipine TB24 60 MG</i>	1	QL(2 EA daily); MP
<i>timolol maleate TABS</i>	NP	MP	<i>nimodipine CAPS</i>	NP	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			<i>nisoldipine 8.5 MG, 17 MG, 34 MG</i>	NP	
Calcium Channel Blockers			NORLIQVA SOLN	NP	
<i>amlodipine besylate TABS</i>	1	QL(1 EA daily); MP	SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP	
CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl</i>)	NP	MP	VERAPAMIL HCL ER CP24 (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP
CONJUPRI (<i>levamlodipine maleate</i>)	2		<i>verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG</i>	NP	QL(2 EA daily); MP
<i>diltiazem hcl coated beads CP24 240 MG</i>	1	QL(2 EA daily); MP	<i>verapamil hcl CP24 300 MG</i>	NP	MP
<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	1	QL(1 EA daily); MP	<i>verapamil hcl CP24 360 MG</i>	NP	QL(1 EA daily); MP
<i>diltiazem hcl coated beads CP24 360 MG</i>	1	MP	<i>verapamil hcl TABS</i>	1	QL(3 EA daily); MP
<i>diltiazem hcl extended release beads</i>	1	QL(1 EA daily); MP	<i>verapamil hcl TBCR</i>	1	QL(2 EA daily); MP
<i>diltiazem hcl CP12</i>	1	QL(2 EA daily); MP	VERELAN PM CP24 100 MG, 200 MG (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP
<i>diltiazem hcl CP24 120 MG, 240 MG</i>	1	QL(1 EA daily); MP	VERELAN PM CP24 300 MG (<i>verapamil hcl</i>)	NP	MP
<i>diltiazem hcl CP24 180 MG</i>	1	MP	VERELAN CP24 360 MG (<i>verapamil hcl</i>)	NP	QL(1 EA daily); MP
<i>diltiazem hcl TABS</i>	1	QL(3 EA daily); MP	VERELAN CP24 120 MG, 180 MG, 240 MG (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP
<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	NP	MP	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
<i>felodipine</i>	1	QL(1 EA daily); MP	Cardiac Glycosides		
<i>isradipine CAPS</i>	NP		<i>digoxin SOLN PO 0.05 MG/ML</i>	1	MP
<i>levamlodipine maleate</i>	1		<i>digoxin TABS 125 MCG, 250 MCG</i>	1	MP
<i>nicardipine hcl CAPS</i>	NP	MP			

Drug Name	Drug Tier	Requirements/ Limits
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		
<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</i> TABS	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</i> SOLN IJ	1	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	1	SP
<i>bosentan</i> TABS	1	SP

Drug Name	Drug Tier	Requirements/ Limits
LETAIRIS (<i>ambrisentan</i>)	NP	SP
TRACLEER TABS (<i>bosentan</i>)	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<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		
CEFACLOR ER TB12	NP	
<i>cefaclor CAPS</i>	1	
<i>cefaclor SUSR 250 MG/5ML</i>	1	
<i>cefprozil SUSR</i>	1	QL(75 ML per fill retail); AL(Up to 12 yrs old)

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

Drug Name	Drug Tier	Requirements/ Limits
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>ethynodiol diacet & eth estrad</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>levonorgestrel & eth estradiol TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<i>levonorgestrel-ethinyl 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>levonorgestrel-ethinyl estradiol (continuous)</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
NATAZIA	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 CAPS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<i>norethindrone-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
<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, 1.5 MG-30 MCG-75 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	<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</i>	0		<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-1 MG</i>	0		TYBLUME CHEW	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	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
			Copper Contraceptives - IUD		
			MIUDELLA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV

Drug Name	Drug Tier	Requirements/ Limits
PARAGARD INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
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		

Drug Name	Drug Tier	Requirements/ Limits
KYLEENA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	2	QL(150 ML per 30 day(s) retail)	<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>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1	QL(150 ML per 30 day(s) retail)	<i>benzonatate 100 MG</i>	1	AL(At least 10 yrs old)
<i>dexamethasone ELIX</i>	1		<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	1	
<i>dexamethasone SOLN</i>	1		Cough/Cold/Allergy Combinations		
<i>dexamethasone TABS 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 4 MG, 6 MG</i>	1		<i>brompheniramine & phenyleph ELIX</i>	1	QL(120 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1		<i>brompheniramine & pseudoeph ELIX</i>	1	QL(120 ML per fill retail)
<i>methylprednisolone TABS 4 MG, 8 MG</i>	1		<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	1	QL(120 ML per fill retail)
<i>methylprednisolone TBPk</i>	1		<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>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	1	QL(150 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>prednisolone sodium phosphate SOLN 5 MG/5ML</i>	1		<i>guaifenesin-codeine SOLN</i>	1	QL(240 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>prednisolone sodium phosphate SOLN 15 MG/5ML</i>	1	QL(240 ML per fill 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>prednisolone SOLN</i>	1		<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	1	QL(240 ML per fill retail)
PREDNISONE INTENSOL CONC	2		<i>phenylephrine-dm SOLN</i>	1	QL(240 ML per fill retail)
<i>prednisone SOLN</i>	1		<i>promethazine & phenylephrine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 2 yrs old)
<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					

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium (acne)</i>	1	QL(120 ML per fill retail)	Antifungals - Topical		
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	1	QL(60 GM per fill retail)	<i>ciclopirox SOLN</i>	1	PA
<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 0.01 %, 0.025 %</i>	1	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 0.05 %</i>	NP	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 A-D 2-IN-1 SHAM 1 %</i>	2	QL(200 ML per fill retail)
<i>gentamicin sulfate (topical) OINT</i>	1	QL(30 GM per fill retail)	<i>NIZORAL ANTI-DANDRUFF SHAM 1 %</i>	2	QL(200 ML per fill retail)
<i>mupirocin calcium (topical)</i>	1		<i>nystatin (topical) CREA</i>	1	QL(30 GM per fill retail)
<i>mupirocin OINT</i>	1	QL(30 GM per fill retail)	<i>nystatin (topical) OINT</i>	1	QL(30 GM per fill retail)
<i>neomycin-bacitracin-polymyxin OINT</i>	1	QL(56 EA per fill retail)	<i>nystatin (topical) POWD EX</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 CREA</i>	1	QL(60 GM per fill retail)
			<i>nystatin-triamcinolone OINT</i>	1	QL(60 GM per fill retail)
			<i>oxiconazole nitrate CREA</i>	NP	PA
			<i>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		

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

Drug Name	Drug Tier	Requirements/ Limits
COSENTYX SENSOREADY PEN SOAJ	NP	SP; PA
COSENTYX UNOREADY SOAJ	NP	SP; PA
COSENTYX SOLN	NP	SP; PA
COSENTYX SOSY	NP	SP; PA
IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
OTULFI SOLN SC 45 MG/0.5ML	NP	SP; PA
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
PELLIX SOLN 0.005 % (<i>calcipotriene</i>)	NP	QL(60 ML per fill retail)
PYZCHIVA SC 45 MG/0.5ML	2	SP; PA
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	2	SP; PA
PYZCHIVA SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
SELARSDI SOLN SC 45 MG/0.5ML	NP	SP; PA
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA
SKYRIZI PEN SOAJ	NP	SP; PA
SKYRIZI SOSY	NP	SP; PA
SORILUX FOAM	NP	
SOTYKTU	NP	SP; PA
SPEVIGO SOLN	NP	SP; PA
SPEVIGO SOSY	NP	SP; PA
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	2	SP; PA
STEQEYMA	NP	SP; PA
STEQEYMA SC	NP	SP; PA
TALTZ SOSY	2	SP; PA
<i>tazarotene CREA</i>	1	QL(60 GM per fill retail); AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>amcinonide CREA</i>	NP	
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP; PA	<i>amcinonide OINT</i>	NP	
USTEKINUMAB-TTWE SC	NP	SP; PA	<i>betamethasone dipropionate (topical) CREA</i>	NP	1 package(s) per 30 day(s) retail
USTEKINUMAB-TTWE	NP	SP; PA	<i>betamethasone dipropionate (topical) LOTN</i>	1	
VTAMA	NP	PA	<i>betamethasone dipropionate (topical) OINT</i>	1	
YESINTEK SOLN 45 MG/0.5ML	NP	SP; PA	<i>betamethasone dipropionate augmented CREA</i>	NP	QL(50 GM per fill retail)
YESINTEK SOSY	NP	SP; PA	<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP	
Antiseborrheic Products			<i>betamethasone dipropionate augmented LOTN</i>	1	
<i>selenium sulfide LOTN 1 %</i>	1	QL(240 ML per fill retail)	<i>betamethasone dipropionate augmented OINT</i>	NP	
<i>selenium sulfide LOTN 2.5 %</i>	1	QL(120 ML per fill retail)	<i>betamethasone valerate CREA</i>	NP	QL(45 GM per fill retail)
<i>selenium sulfide SHAM 1 %</i>	1	QL(240 ML per fill retail)	<i>betamethasone valerate FOAM</i>	NP	
<i>sulfacetamide sodium LIQD</i>	1	QL(480 ML per fill retail)	<i>betamethasone valerate LOTN</i>	NP	QL(60 ML per fill retail)
Antivirals - Topical			<i>betamethasone valerate OINT</i>	NP	QL(45 GM per fill retail)
<i>acyclovir topical CREA</i>	1	QL(1 GM daily)	<i>calcipotriene- betamethasone dipropionate OINT</i>	1	
<i>acyclovir topical OINT</i>	1		<i>calcipotriene- betamethasone dipropionate SUSP</i>	NP	
DENAVIR (<i>penciclovir</i>)	2		<i>clobetasol propionate emollient base 0.05 %</i>	1	QL(60 GM per fill retail)
<i>penciclovir</i>	NP		<i>clobetasol propionate emulsion</i>	1	
ZOVIRAX CREA (<i>acyclovir topical</i>)	NP	QL(1 GM daily)	<i>clobetasol propionate CREA 0.05 %</i>	1	QL(60 GM per fill retail)
ZOVIRAX OINT (<i>acyclovir topical</i>)	2				
Burn Products					
<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				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clobetasol propionate FOAM</i>	1		<i>fluocinolone acetonide OINT</i>	NP	
<i>clobetasol propionate GEL 0.05 %</i>	1	QL(60 GM per fill retail)	<i>fluocinolone acetonide SOLN</i>	NP	
<i>clobetasol propionate LIQD</i>	1		<i>fluocinonide emulsified base</i>	NP	QL(60 GM per fill retail)
<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)	HYDRALYN GEL 2 %	NP	
<i>diflorasone diacetate OINT</i>	NP	QL(60 GM per fill retail)	HYDRAVEX GEL 2 %	NP	
DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	NP		<i>hydrocortisone (topical) CREA 2.5 %</i>	1	QL(453.6 GM per fill retail)
EPIFOAM FOAM	2		<i>hydrocortisone (topical) CREA 1 %</i>	1	QL(85.2 EA per fill retail); RX/OTC
<i>fluocinolone acetonide CREA</i>	NP		<i>hydrocortisone (topical) CREA 0.5 %</i>	1	QL(30 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>hydrocortisone (topical) LOTN 1 %</i>	1	QL(99 GM per fill retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone (topical) OINT 0.5 %</i>	1		<i>mometasone furoate SOLN</i>	1	QL(60 ML per fill retail)
<i>hydrocortisone (topical) OINT 2.5 %</i>	1	QL(454 GM per fill retail)	SANADERMRX SKIN REPAIR 0.1 %-5 %	2	
<i>hydrocortisone (topical) OINT 1 %</i>	1	QL(2 GM daily; 56 GM per fill retail); RX/OTC	SYNALAR CREA (<i>fluocinolone acetonide</i>)	NP	
<i>hydrocortisone (topical) SOLN 1 %</i>	1		SYNALAR OINT (<i>fluocinolone acetonide</i>)	NP	
<i>hydrocortisone acetate (topical) CREA 2.5 %</i>	1		TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	NP	
<i>hydrocortisone acetate (topical) OINT</i>	1		TOPICORT SPRAY LIQD (<i>desoximetasone</i>)	NP	
HYDROCORTISONE ACETATE CREA	2		TOPICORT CREA 0.05 % (<i>desoximetasone</i>)	NP	QL(60 GM per fill retail)
<i>hydrocortisone butyrate CREA</i>	NP		TOPICORT CREA 0.25 % (<i>desoximetasone</i>)	NP	
<i>hydrocortisone butyrate LOTN</i>	NP		TOPICORT GEL (<i>desoximetasone</i>)	NP	
<i>hydrocortisone butyrate OINT</i>	NP		<i>triamcinolone acetonide (topical) AERS</i>	NP	
<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 0.025 %</i>	1	QL(160 GM per fill retail)
<i>hydrocortisone valerate OINT</i>	NP		<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(15 GM per fill retail)
HYDROCORTISONE GEL 2 %	NP		<i>triamcinolone acetonide (topical) LOTN</i>	NP	QL(60 ML 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 (topical) OINT 0.5 %</i>	1	QL(15 GM per fill retail)
LOCOID LIPOCREAM	NP		<i>triamcinolone acetonide-dimethicone-silicone</i>	1	
LOCOID LOTN (<i>hydrocortisone butyrate</i>)	NP		TRIVIX 0.1 %-5 %	2	
<i>mometasone furoate CREA</i>	1	QL(50 GM per fill retail)	Eczema Agents		
<i>mometasone furoate OINT</i>	1	QL(45 GM per fill retail)	ADBRY SOAJ	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADBRY SOSY	2	SP; PA	ELIDEL (<i>pimecrolimus</i>)	2	QL(1 GM daily); AL(At least 2 yrs old); PA
ANZUPGO CREA EX 20 MG/GM	NP	PA	<i>pimecrolimus</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA
CIBINQO	NP	SP; PA	<i>tacrolimus (topical) OINT 0.03 %</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA
DUPIXENT SOAJ	2	SP; PA	<i>tacrolimus (topical) OINT 0.1 %</i>	1	PA
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	2	SP; PA	Keratolytic/Antimitotic/Vesicant Agents		
DUPIXENT SOSY 300 MG/2ML	2	SP; PA	DERMACINRX SALICYLIC ACID GEL 6 %	2	QL(40 GM per fill retail)
EBGLYSS SOAJ	2	SP; PA	<i>podofilox SOLN</i>	1	QL(4 ML per fill retail)
EBGLYSS SOSY	2	SP; PA	<i>salicylic acid GEL 6 %</i>	1	QL(40 GM per fill retail)
OPZELURA	NP	PA	Local Anesthetics - Topical		
Emollient/Keratolytic Agents			<i>capsaicin CREA 0.035 %</i>	1	QL(120 ML per fill retail; 120 per fill mail)
GORDONS UREA CREA 40 %	2	QL(85.05 GM per fill retail); RX/OTC	<i>capsaicin CREA 0.1 %</i>	1	QL(56.6 GM per fill retail)
<i>urea CREA 40 %</i>	1	QL(85.05 GM per fill retail); RX/OTC	<i>capsaicin CREA 0.025 %, 0.075 %</i>	1	QL(60 GM per fill retail)
<i>urea LOTN 40 %</i>	1	QL(325 GM per fill retail)	CASTIVA WARMING LOTN	2	QL(113 GM per fill retail)
Emollients			COLLAVERA GEL 2 %	2	QL(85 GM per fill retail); RX/OTC
<i>lactic acid (ammonium lactate) CREA</i>	1	QL(385 GM per fill retail); RX/OTC	DERMACINRX LIDOCAINE CREA 3 %	2	QL(85 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	<i>dibucaine</i>	1	QL(56.7 GM per fill retail)
Hair Growth Agents			<i>lidocaine hcl CREA 4 %</i>	1	1 package(s) per 34 day(s) retail; 1 package(s) per 34 day(s) mail
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					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lidocaine hcl CREA 3 %</i>	1	QL(85 GM per fill retail); RX/OTC	FT LICE-BEDBUG-MITE AERO 0.5 %	2	
<i>lidocaine hcl GEL 2 %</i>	1	QL(85 GM per fill retail); RX/OTC	GNP HOME LICE/BEDBUG/DUST MITE AERO 0.5 %	2	
<i>lidocaine hcl PRSY</i>	1	QL(85 ML per fill retail)	<i>ivermectin (pediculicide)</i>	NP	
<i>lidocaine CREA 4 %</i>	1	QL(76.5 GM per fill retail)	<i>malathion</i>	1	QL(59 ML per fill retail); 2 max fill(s) per 30 day(s) retail
LIDOCAINE CREA	2	QL(85 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)
<i>lidocaine-prilocaine CREA</i>	1	QL(5800 GM per fill retail)			
LIDOMAX GEL 2 %	2	QL(85 GM per fill retail); RX/OTC	NIX LICE KILLING SPRAY LIQD XX	2	
PROXIVOL GEL 2 %	2	QL(85 GM per fill retail); RX/OTC	<i>permethrin AERO</i>	1	
Misc. Topical			<i>permethrin CREA</i>	1	QL(60 GM per fill retail)
<i>lanolin (topical) CREA</i>	1		PERMETHRIN CREA 5 % (<i>permethrin</i>)	NP	QL(60 GM per fill retail)
<i>zinc oxide (topical) OINT 20 %</i>	1	QL(60 GM per fill retail)	<i>permethrin LIQD EX</i>	1	
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	1	
ZORYVE CREA EX	NP	PA	<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	1	
ZORYVE FOAM EX	NP		SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %	2	
Rosacea Agents			SCHOOLTIME SHAMPOO SHAM	2	
<i>metronidazole (topical) CREA</i>	1	QL(45 GM per fill retail)	<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)
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(45 GM per fill retail)	STOP LICE STEP 3 AERO 0.5 %	2	
<i>metronidazole (topical) LOTN</i>	1		STOP LICE AERO 0.5 %	2	
Scabicides & Pediculicides					
BEDDING SPRAY LICE TREATMENT AERO 0.5 %	2				
CVS LICE-BEDBUG-MITE AERO 0.5 %	2				
ELIMITE CREA (<i>permethrin</i>)	NP	QL(60 GM per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Tar Products			COBAS LIAT SARS-COV-2 ASSAY	0	
coal tar extract SHAM 0.5 %	1		COBAS LIAT SARS-COV-2 CONTROL	0	RX/OTC
Wound Care Products			COVID-19 AT HOME ANTIGEN TEST KIT	0	
APLIGRAF DISK	2	PA	COVID-19 AT-HOME TEST KIT	0	
DIAGNOSTIC PRODUCTS			COVID-19 OTC ANTIGEN 1-PACK KIT	0	
Diagnostic Drugs			COVID-19 OTC ANTIGEN 2-PACK KIT	0	
cosyntropin SOLR	1	SP; PA	CVS COVID-19 AT HOME TEST KIT KIT	0	
THYROGEN 0.9 MG	2	SP; PA	DIATRUST COVID-19 HOME TEST KIT	0	
Diagnostic Tests			ELLUME COVID-19 HOME TEST KIT	0	
2SAN COVID-19 RAPID SELF TEST KIT	0		FASTEP COVID-19 ANTIGEN 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	FLOWFLEX COVID-19 AG HOME TEST KIT	0	
ACCUA SARS-COV-2	0		GENABIO COVID-19 RAPID TEST KIT	0	
ADVIN COVID-19 ANTIGEN TEST KIT	0		GOTOKNOW COVID-19 ANTIGEN RAPI KIT	0	
BD VERITOR SYSTEM SARS-COV-2	0		ID NOW COVID-19	0	
BINAXNOW COVID-19 AG CARD	0		ID NOW COVID-19 2.0 CONTROL	0	RX/OTC
BINAXNOW COVID-19 AG HOME TEST KIT	0		ID NOW COVID-19 2.0 TEST	0	
BINAXNOW COVID-19 ANTIGEN SELF KIT	0		ID NOW COVID-19 CONTROL	0	RX/OTC
CARESTART COVID-19 HOME TEST KIT	0		IHEALTH COVID-19 RAPID TEST KIT	0	
CHEMSTRIP K STRP	2		INDICAID COVID-19 RAPID TEST KIT	0	
CLEARDETECT COVID-19 AG HOME KIT	0		INTELISWAB COVID-19 RAPID TEST KIT	0	
CLINITEST RAPID COVID-19 TEST KIT	0		KETONE TEST STRP	2	
			KETOSTIX STRP	2	

Drug Name	Drug Tier	Requirements/ Limits
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	
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>torsemide TABS 5 MG, 10 MG, 100 MG</i>	1	QL(1 EA daily); MP
<i>torsemide 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 35 MG</i>	NP	4 per 28 days; QL(4 EA per 28 day(s) retail)
<i>hydrochlorothiazide CAPS</i>	1	MP	<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1	MP	<i>risedronate sodium TABS 150 MG</i>	NP	
<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	ORILISSA	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)
FLUOROQUINOLONES - 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 5 MG</i>	1	MP	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	SP; PA
<i>metoclopramide hcl TABS 10 MG</i>	1		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>alosecron hcl</i>	NP	PA
<i>mesalamine TBEC 1.2 GM</i>	1		IBSRELA	NP	PA
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)	LINZESS	2	PA
OMVOH (300 MG DOSE) SOAJ	NP	SP; PA	LOTRONEX (<i>alosecron hcl</i>)	NP	PA
			Peripheral Opioid Receptor Antagonists		
			MOVANTIK	2	PA

Drug Name	Drug Tier	Requirements/ Limits
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1	MP
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	2	RX/OTC
<i>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	
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
KRYSTEXXA	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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
IXINITY SOLR	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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	PA
SEVENFACT	2	SP; PA
TRETTEN	2	SP; PA
VONVENDI	2	SP; PA
WILATE KIT	2	SP; PA
XYNTHA	2	SP; PA
XYNTHA SOLOFUSE	2	SP; PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	1	SP; PA
Complement Inhibitors		
BERINERT KIT	2	SP; PA
CINRYZE SOLR IV	2	SP; PA
RUCONEST	2	SP; PA
SOLIRIS	2	SP; PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	2	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1	MP

Drug Name	Drug Tier	Requirements/ Limits
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
DROXIA CAPS	2	

Drug Name	Drug Tier	Requirements/ Limits
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
NIVESTYM SOLN	NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NIVESTYM SOSY	NP	SP; PA	<i>ferrous sulfate TABS</i>	1	MP
NPLATE 250 MCG, 500 MCG	2	SP; PA	<i>ferrous sulfate TBEC</i>	1	
NYPOZI	NP	SP	<i>ferrous sulfate TBEC 325 MG</i>	1	MP
NYVEPRIA	NP	SP; PA	IRON CHEWS PEDIATRIC CHEW	2	
PROCRIT	NP	SP; PA	IRON TABS 28 MG	2	
PROCRIT	NP	SP; PA	<i>polysaccharide iron complex CAPS</i>	1	QL(1 EA daily)
RELEUKO SOSY	NP	SP	Stem Cell Mobilizers		
RETACRIT	2	SP; PA	<i>plerixafor</i>	1	SP; PA
RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA	HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
ROLVEDON	NP	SP	Hemostatics - Systemic		
RYZNEUTA SOSY SC 20 MG/ML	NP	SP	<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	1	SP; PA
STIMUFEND	NP	SP	<i>aminocaproic acid TABS 500 MG</i>	1	QL(24 EA per fill retail); SP; PA
UDENYCA ONBODY SOSY	NP	SP	<i>aminocaproic acid TABS 1000 MG</i>	1	SP; PA
UDENYCA SOAJ	NP	SP	<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)
UDENYCA SOSY	NP	SP; PA	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
ZARXIO	NP	SP; PA	Antihistamine Hypnotics		
ZIEXTENZO	NP	SP	ALEVE PM 25 MG-220 MG	2	
Hematopoietic Mixtures			<i>diphenhydramine hcl (sleep) CAPS</i>	1	
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	1	QL(1 EA daily)	<i>diphenhydramine hcl (sleep) LIQD</i>	1	
HEMATINIC PLUS VIT/MINERALS TABS	2	QL(1 EA daily)	<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	1	
Iron			<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	1	QL(4 EA daily)
FERRETTS 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 15 MG/ML, 15 MG/ML</i>	1	QL(3.4 ML daily)			
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	1	QL(16 ML daily)			

Drug Name	Drug Tier	Requirements/ Limits
<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 SLEEPMELOTS 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 15 MG, 30 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>temazepam 22.5 MG</i>	NP	
<i>temazepam 7.5 MG</i>	1	
<i>triazolam</i>	1	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<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)
<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		

Drug Name	Drug Tier	Requirements/ Limits
<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 100 MG, 250 MG</i>	1	QL(3 EA daily)
<i>docusate sodium CAPS 50 MG</i>	1	
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	1	
<i>DOCUSATE SODIUM SYRP</i>	2	
<i>docusate sodium TABS</i>	1	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin SUSR 100 MG/5ML</i>	1	QL(15 ML per fill retail)
<i>azithromycin SUSR 200 MG/5ML</i>	1	QL(30 ML per fill retail)
<i>azithromycin TABS 250 MG</i>	1	QL(6 EA per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>azithromycin TABS 500 MG</i>	1	QL(4 EA daily)
<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		
<i>ALCOHOL PREP PADS-MISC</i>	2	OTC
Contraceptives		
<i>CONDOMS-MISC</i>	2	QL(36 ea per fill retail)
Diabetic Supplies		
<i>ACCU-CHEK FASTCLIX LANCETS</i>	2	QL(6.67 EA daily); RX/OTC
<i>ACCU-CHEK GUIDE CONTROL LIQD</i>	2	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	AIMSCO TWIST LANCETS 32G	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 33G	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK SAFE-T PRO LANCETS	2	QL(6.67 EA daily); RX/OTC	AQUALANCE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC	ASSURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ACCUTREND PLUS	2		ASSURE LANCE LANCETS	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE 28G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE LITE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE PLUS SAFETY 25G	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 30G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE UNIVERSAL 23G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE SAFETY LANCET 28G	2	QL(6.67 EA daily); RX/OTC
ADVANCED MOBILE LANCET	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ADVANTAGE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS	2	QL(6.67 EA daily); RX/OTC	BD MICROTAINER LANCETS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	CAREONE LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	CAREONE LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	CARESENS LANCETS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	CARESENS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
AGAMATRIX ULTRA-THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
			CARETOUCH TWIST LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
			CARETOUCH TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CARETOUCH TWIST MC LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	DROPLET PERSONAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
CHOSEN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE ACTI-LANCE 23G	2	QL(6.67 EA daily); RX/OTC
CHOSEN SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE MEDLANCE LANCET 30G	2	QL(6.67 EA daily); RX/OTC
CLEANLET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DRUG MART ON-THE-GO LANCET 30G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHEK LANCETS	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE COMFORT EZ	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	DRUG MART UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT LANCETS	2	QL(6.67 EA daily); RX/OTC
CLEVER CHOICE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT LANCETS TWIST TOP	2	QL(6.67 EA daily); RX/OTC
COAGUCHEK LANCETS	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
COMFORT ASSURED LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
COMFORT ASSURED LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH LANCETS 31G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 28G	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/TWIST	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH PLUS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH TWIST LANCET 30G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 30G/TWIST	2	QL(6.67 EA daily); RX/OTC
CVS LANCETS ORIGINAL	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 32G	2	QL(6.67 EA daily); RX/OTC
CVS LANCETS THIN 26G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 32G/TWIST	2	QL(6.67 EA daily); RX/OTC
CVS ULTRA THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH LANCETS 33G/TWIST	2	QL(6.67 EA daily); RX/OTC
DIATHRIVE LANCET ULTRA THIN 30	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
DIATHRIVE LANCETS	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
DROPLET LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC			

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

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	READYLANC 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	RIGHTTEST GL300 LANCETS	2	QL(6.67 EA daily); RX/OTC
PRO COMFORT SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCET 30G/PRESSURE ACT	2	QL(6.67 EA daily); RX/OTC
PRODIGY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
PRODIGY SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
PRODIGY TWIST TOP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
PURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
PURE COMFORT SAFETY LANCET 30G	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH PLUS LANCETS	2	QL(6.67 EA daily); RX/OTC
PX LANCETS MICROTHIN 33G	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH TWIST TOP LANCETS	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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
SMARTTEST 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
SURE COMFORT LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	ULTILET SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	ULTRA THIN LANCETS 31G	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ULTRA-CARE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	ULTRA-CARE SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
SURELITE LANCETS	2	QL(6.67 EA daily); RX/OTC	ULTRA-THIN II AUTO LANCET	2	QL(6.67 EA daily); RX/OTC
TECHLITE AST LANCETS	2	QL(6.67 EA daily); RX/OTC	ULTRA-THIN II LANCETS	2	QL(6.67 EA daily); RX/OTC
TECHLITE LANCETS	2	QL(6.67 EA daily); RX/OTC	UNILET COMFORTOUCH LANCET	2	QL(6.67 EA daily); RX/OTC
TECHLITE LANCETS 26G	2	QL(6.67 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
UNILET EXCELITE	2	QL(6.67 EA daily); RX/OTC	UNISTIK CZT NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET EXCELITE II	2	QL(6.67 EA daily); RX/OTC	UNISTIK NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK PRO SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNILET GP 28 ULTRA THIN	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNILET LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 21G	2	QL(6.67 EA daily); RX/OTC
UNILET MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 28G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPER-THIN 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 30G	2	QL(6.67 EA daily); RX/OTC
UNILET ULTRA-THIN 28G	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 21G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 1	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 23G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 COMFORT	2	QL(6.67 EA daily); RX/OTC	VERIFINE SAFE LANCET MINI 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 EXTRA	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 NEONATAL	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 NORMAL	2	QL(6.67 EA daily); RX/OTC	VERIFINE UNIVERSAL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 2 SUPER	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD LANCETS	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 COMFORT	2	QL(6.67 EA daily); RX/OTC	VIVAGUARD SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 EXTRA	2	QL(6.67 EA daily); RX/OTC	ZEV RX TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 GENTLE	2	QL(6.67 EA daily); RX/OTC	Misc. Devices		
UNISTIK 3 NEONATAL	2	QL(6.67 EA daily); RX/OTC	ADVOCATE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
UNISTIK 3 NORMAL	2	QL(6.67 EA daily); RX/OTC			
UNISTIK CZT COMFORT	2	QL(6.67 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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
EASY COMFORT ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
EASY TOUCH ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC	TRUE COMFORT PRO ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
EQL ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	ULTICARE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
FIFTY50 ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	ULTILET ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
GLOBAL ALCOHOL PREP EASE	2	QL(6.67 EA daily); RX/OTC	ULTRA-CARE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
GNP ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	WEBCOL ALCOHOL PREP LARGE	2	QL(6.67 EA daily); RX/OTC
GOODSENSE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	WEBCOL ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC
H-E-B INCONTROL ALCOHOL	2	QL(6.67 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZEVRX STERILE ALCOHOL PREP PAD	2	QL(6.67 EA daily); RX/OTC	AEROCHAMBER HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
Parenteral Therapy Supplies			AEROCHAMBER MINI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC	AEROCHAMBER MV MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLE MICRO ULTRAFINE	2	QL(5 EA daily)	AEROCHAMBER PLS FLOVU MTHPIECE 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 INTERM DEVI	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 LARGE 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 LARGE 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 MEDIUM 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 MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
BD PEN NEEDLES	2	QL (5 ea daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EMBECTA AUTOSHIELD DUO	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EMBECTA PEN NEEDLE NANO	2	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	2	QL(5 EA daily); RX/OTC	AEROCHAMBER W/FLOWSIGNAL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	2	QL(5 EA daily)	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
INSULIN SYRINGES	2	QL (5 ea daily); RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
Respiratory Therapy Supplies			AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
ACE AEROSOL CLOUD ENHANCER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC			
ACTIVITY POUCH MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC			
ADULT AEROSOL MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC			
ADULT MASK LARGE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER Z-STAT PLUS/SMALL MISC	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
AEROCHAMBER2GO ANTI-STATIC 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
AEROVENT PLUS 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
ALL FLOW 1000 PFT FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
BREATHE COMFORT CHAMBER/ADULT DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHE EASE LARGE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHE EASE MEDIUM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHE EASE NEB MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
BREATHE EASE NEB MASK/INFANT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
BREATHE EASE SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
BUBBLES THE FISH II PEDI MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CLEVER CHOICE HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
CO MONITOR REPLACEMENT PIECES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/MED MASK 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
COMPACT SPACE CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EASIVENT MASK LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC
EASIVENT MASK MEDIUM MISC	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
EASIVENT MISC	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
EQ SPACE CHAMBER ANTI-STATIC L DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC M DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
FILTER AIR PP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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
MINIELITE FILTER REPLACEMENTS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PEDIATRIC MOUTHPIECE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER AIR TUBE/PLUGS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PFLEX MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
NOSE CLIP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PHARMACIST CHOICE MASK WIPES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	PILLOW MASK/ADULT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	SOOTHENEB 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	SOOTHENEB 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	SOOTHENEB 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	SOOTHENEB 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
REPLACEMENT AIR FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX HOLD CHMBR/MASK/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
REPLACEMENT FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX HOLD CHMBR/MASK/TODDLER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
RITEFLO DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	VORTEX VALVE CHAMBER-PEDI MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
SAMI THE SEAL FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WINDMILL TRAINER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily)
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>frovatriptan succinate</i>	1	
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP	
AJOVY SOAJ	2	SP; PA	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(0.67 ML daily)
AJOVY SOSY	2	SP; PA	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP	
EMGALITY (300 MG DOSE) SOSY	NP	SP; PA	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(0.67 ML daily)
EMGALITY SOAJ	2	SP; PA	<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
EMGALITY SOSY	2	SP; PA	<i>rizatriptan benzoate TABS</i>	1	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
NURTEC	2	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); PA	<i>rizatriptan benzoate TBDP</i>	1	
QULIPTA	2	QL(30 EA per 30 day(s) retail; 30 EA per 30 days mail); PA	<i>sumatriptan</i>	1	QL(6 EA per 30 day(s) retail)
UBRELVY	2	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); PA	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
ZAVZPRET	NP	PA	<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	NP	
Migraine Combinations			<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	NP	
<i>ergotamine w/ caffeine TABS</i>	1		<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
<i>sumatriptan-naproxen sodium</i>	NP		<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)
SYMBRAVO TABS PO	NP		<i>sumatriptan succinate TABS</i>	1	QL(9 EA per 30 day(s) retail)
TREXIMET (<i>sumatriptan-naproxen sodium</i>)	NP		<i>zolmitriptan SOLN 2.5 MG</i>	NP	
Migraine Products			<i>zolmitriptan TABS</i>	1	QL(6 EA per 30 day(s) retail)
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1				
Serotonin Agonists					
<i>almotriptan malate</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits
<i>zolmitriptan TBDP</i>	1	QL(6 EA per 30 day(s) retail)
ZOMIG SOLN	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		
PHOSPHA 250 NEUTRAL	2	QL(8 EA daily); RX/OTC
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	QL(8 EA daily); RX/OTC
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	2	QL(8 EA daily); RX/OTC
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

Drug Name	Drug Tier	Requirements/ Limits
<i>potassium chloride CPCR 10 MEQ</i>	1	MP
<i>potassium chloride CPCR 8 MEQ</i>	1	QL(1 EA daily); 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
Immunosuppressive Agents		
ATGAM	2	SP; PA
<i>azathioprine TABS 75 MG, 100 MG</i>	1	
<i>azathioprine TABS 50 MG</i>	1	MP
<i>cyclosporine modified (for microemulsion) CAPS</i>	1	PA
<i>cyclosporine modified (for microemulsion) SOLN</i>	1	PA
<i>cyclosporine CAPS</i>	1	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>everolimus (immunosuppressant)</i>	1	PA
GAMIFANT 10 MG/2ML, 50 MG/10ML	2	SP; PA
<i>mycophenolate mofetil hcl</i>	1	PA
<i>mycophenolate mofetil CAPS</i>	1	PA
<i>mycophenolate mofetil SUSR</i>	1	PA
<i>mycophenolate mofetil TABS</i>	1	PA
<i>mycophenolate sodium</i>	1	PA
NULOJIX	2	SP; PA
PROGRAF PACK	2	PA
SANDIMMUNE CAPS (<i>cyclosporine</i>)	2	PA
SANDIMMUNE SOLN IV 50 MG/ML	2	PA
<i>sirolimus SOLN</i>	1	PA
<i>sirolimus TABS</i>	1	PA
<i>tacrolimus CAPS</i>	1	PA
<i>tacrolimus CP24 0.5 MG, 1 MG, 5 MG</i>	1	PA
<i>tacrolimus SOLN 5 MG/ML</i>	1	PA
THYMOGLOBULIN	2	SP; PA
Lymphatic Agents		
SYLVANT	2	SP; PA
PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
VIJOICE TBPk	2	SP; PA
Potassium Removing Agents		
LOKELMA	2	
LOKELMA	NP	
<i>sodium polystyrene sulfonate POWD</i>	1	QL(454 GM per fill retail)
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	NP	
VELTASSA	NP	
Systemic Lupus Erythematosus Agents		
BENLYSTA SOLR	2	SP; PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(100 ML per fill retail)
Anti-infectives - Throat		
<i>nystatin (mouth-throat)</i>	1	QL(100 ML per fill retail)
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
Dental Products		
FLUORIDEX DAILY RENEWAL CONC 0.63 %	2	RX/OTC
PERIOMED CONC 0.63 %	2	RX/OTC
<i>sodium fluoride (dental) CREA</i>	1	QL(57 GM per fill retail)
<i>sodium fluoride (dental) GEL</i>	1	QL(60 GM per fill retail)
<i>sodium fluoride (dental) SOLN 0.2 %</i>	1	
<i>stannous fluoride CONC</i>	1	RX/OTC
Periodontal Products		
ARESTIN	2	SP; PA
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	QL(5 GM per fill retail)
Throat Products - Misc.		
AQUORAL SOLN	2	QL(900 ML per fill retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<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
<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
METAVAX TABS 1 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
NUTRIBOOST CAPS 1 MG	2	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
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
TRUEBOOST 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
DERMACINRX BOOSTERVITE TABS	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/FI & 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 500 MG</i>	1	MP
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 IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	1	SP; PA	SOMA TABS 250 MG (<i>carisoprodol</i>)	NP	PA
<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP		<i>tizanidine hcl CAPS 8 MG</i>	2	
<i>baclofen SUSP</i>	NP		<i>tizanidine hcl CAPS</i>	1	
<i>baclofen TABS 10 MG, 20 MG</i>	1	MP	<i>tizanidine hcl TABS</i>	1	
<i>baclofen TABS 5 MG, 15 MG</i>	1		ZANAFLEX CAPS 8 MG (<i>tizanidine hcl</i>)	NP	
<i>carisoprodol TABS 250 MG</i>	NP	PA	Direct Muscle Relaxants		
<i>carisoprodol TABS 350 MG</i>	1	MP; PA	DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	NP	
<i>chlorzoxazone TABS 500 MG</i>	1	MP	<i>dantrolene sodium CAPS</i>	NP	
<i>chlorzoxazone TABS 250 MG, 375 MG, 750 MG</i>	1		Muscle Relaxant Combinations		
<i>cyclobenzaprine hcl CP24</i>	NP		<i>orphenadrine w/ aspirin & caff</i>	NP	
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	1	QL(4 EA daily)	Viscosupplements		
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily); MP	EUFLEXXA SOSY	2	SP; PA
FLEQSUVY SUSP (<i>baclofen</i>)	NP		GEL-ONE	2	SP; PA
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	2	SP; PA	GELSYN-3 SOSY	2	SP; PA
LIORESAL SOLN IT	2	SP; PA	GENVISC 850 SOSY	2	SP; PA
LYVISPAH PACK	NP		HYALGAN SOLN	2	SP; PA
<i>metaxalone</i>	1		HYALGAN SOSY	2	SP; PA
METAXALONE 640 MG	NP		HYMOVIS	2	SP; PA
<i>methocarbamol TABS 1000 MG</i>	NP		MONOVISC	2	SP; PA
<i>methocarbamol TABS 750 MG, 1000 MG</i>	1		ORTHOVISC	2	SP; PA
			SUPARTZ FX SOSY	2	SP; PA
			SYNOJOYNT SOSY	2	SP; PA
			SYNVISC ONE SOSY	2	SP; PA
			SYNVISC SOSY	2	SP; PA
			TRILURON SOSY	2	SP; PA
			TRIVISC SOSY	2	SP; PA
			VISCO-3 SOSY	2	SP; PA
			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
DYSPORE	2	SP; PA
MYOBLOC	2	SP; PA
XEOMIN	2	SP; PA
Spinal Muscular Atrophy Agents (SMA)		
EVRYSDI	2	SP; PA
EVRYSDI PO 5 MG	2	SP
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	
<i>dorzolamide hcl-timolol maleate</i>	1	QL(10 ML per fill retail)
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</i>	1	QL(5 ML per fill retail)
<i>timolol maleate (ophth) SOLN</i>	NP	QL(60 EA per fill retail)
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
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 0.5 %</i>	1	QL(15 ML per fill retail)	<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	QL(3 ML per fill retail)
<i>tropicamide SOLN 1 %</i>	1	QL(3 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 0.1 %, 0.15 %</i>	NP		<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	1	QL(30 ML per fill retail)
<i>brimonidine tartrate 0.2 %</i>	1	QL(5 ML per fill retail)	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) 0.4 %</i>	NP	1 max fill(s) per 30 day(s) retail
<i>ketorolac tromethamine (ophth) 0.5 %</i>	NP	QL(5 ML per fill retail)
<i>ketotifen fumarate (ophth) 0.035 %</i>	1	QL(5 ML per fill retail)
MIEBO	NP	
<i>olopatadine hcl</i>	1	RX/OTC
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-500 MG, 125 MG-875 MG</i>	1	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG</i>	1	QL(30 EA per fill retail)
<i>amoxicillin & pot clavulanate TB12</i>	1	QL(1.34 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
AMOXICILLIN-POT CLAVULANATE CHEW	2	QL(20 EA per fill retail)
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		

Drug Name	Drug Tier	Requirements/ Limits
AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1	
<i>disulfiram 250 MG</i>	1	
Anti-Cataleptic Agents		
<i>sodium oxybate SOLN</i>	1	SP; PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 23 MG</i>	1	
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP
<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 TB24	2	SP; PA
AUSTEDO XR TB24	2	SP; PA
AUSTEDO TABS	2	SP; PA
INGREZZA CAPS	2	SP; PA
INGREZZA CPSP	2	SP; PA
<i>tetrabenazine</i>	NP	SP; PA
XENAZINE (<i>tetrabenazine</i>)	NP	SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	2	SP; PA
AVONEX PREFILLED PSKT	2	SP; PA
BAFIERTAM	NP	SP
BRIUMVI	NP	SP
COPAXONE SOSY (<i>glatiramer acetate</i>)	2	SP; PA
<i>dalfampridine</i>	1	SP; PA
<i>dimethyl fumarate CDPK</i>	1	SP; PA
<i>dimethyl fumarate CPDR</i>	1	SP; PA
<i>fingolimod hcl</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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 TBPB 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 TBPB</i>	1	AL(At least 13 yrs old)
PLEGRIDY SOSY IM	NP	SP	Transthyretin Amyloidosis Agents		
PONVORY STARTER PACK TBPB	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 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)	ARALAST NP SOLR 500 MG, 1000 MG	2	SP; PA
<i>fluoxetine hcl (pmdd) TABS 10 MG</i>	1	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 TBPB (<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
<i>nicotine polacrilex GUM</i>	0	AL(At least 13 yrs old)	SYMDEKO	2	SP; PA
			TRIKAFTA TBPB 100 MG-50 MG	2	QL(3 EA daily); SP; PA
			Pulmonary Fibrosis Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JASCAYD TABS PO 9 MG, 18 MG	NP	SP	<i>levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG</i>	1	
<i>nintedanib esylate 100 MG, 150 MG</i>	1	SP; PA	<i>levothyroxine sodium TABS</i>	1	MP
OFEV 100 MG, 150 MG (<i>nintedanib esylate</i>)	2	SP; PA	<i>liothyronine sodium TABS</i>	1	MP
<i>pirfenidone CAPS</i>	1	SP; PA	NIVA THYROID TABS	2	MP
<i>pirfenidone TABS 534 MG</i>	1	SP	NP THYROID TABS	2	MP
TETRACYCLINES - Drugs to Treat Bacterial Infections			RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
Tetracyclines			SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	MP
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1		THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	1		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 hyclate CAPS</i>	1		TOXOIDS		
<i>doxycycline hyclate TABS 100 MG</i>	1		Toxoid Combinations		
<i>minocycline hcl CAPS</i>	1		ADACEL SUSP	0	AL (At least 19 yrs old)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0	AL (At least 19 yrs old)
Antithyroid Agents			BOOSTRIX SUSP	0	AL (At least 19 yrs old)
<i>methimazole TABS</i>	1	MP	BOOSTRIX SUSY	0	AL (At least 19 yrs old)
<i>propylthiouracil</i>	1	MP	DAPTACEL	0	AL (At least 19 yrs old)
Thyroid Hormones			INFANRIX	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	KINRIX SUSY	0	AL (At least 19 yrs old)
AMERITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG, 240 MG, 300 MG	2	MP	PEDIARIX SUSY	0	AL (At least 19 yrs old)
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	Drug Name	Drug Tier	Requirements/ Limits
PENTACEL	0	AL(At least 19 yrs old)	<i>cimetidine TABS 300 MG, 400 MG</i>	1	
QUADRACEL SUSP	0	AL(At least 19 yrs old)	<i>famotidine TABS 10 MG</i>	1	
QUADRACEL SUSY	0	AL(At least 19 yrs old)	<i>famotidine TABS 20 MG, 40 MG</i>	1	MP; RX/OTC
TDVAX SUSP	0	AL(At least 19 yrs old)	<i>ranitidine hcl TABS 150 MG, 300 MG</i>	1	QL(2 EA daily); MP
TENIVAC SUSP 2 LFU-5 LFU	0	AL(At least 19 yrs old)	Misc. Anti-Ulcer		
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	0	AL(At least 19 yrs old)	<i>sucralfate SUSP</i>	1	QL(420 ML per fill retail)
VAXELIS SUSP	0	AL(At least 19 yrs old)	<i>sucralfate TABS</i>	1	QL(4 EA daily); MP
VAXELIS SUSY	0	AL(At least 19 yrs old)	Proton Pump Inhibitors		
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			<i>esomeprazole magnesium CPDR</i>	1	RX/OTC
Antispasmodics			<i>esomeprazole magnesium PACK</i>	1	
DERMACINRX DIGENYX TABS 0.125 MG	2		<i>lansoprazole CPDR</i>	1	
<i>dicyclomine hcl CAPS</i>	1		<i>lansoprazole TBDD</i>	1	PA; RX/OTC
<i>dicyclomine hcl SOLN PO</i>	1	QL(40 ML daily)	NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	NP	RX/OTC
<i>dicyclomine hcl TABS</i>	1		NEXIUM CPDR 20 MG (<i>esomeprazole magnesium</i>)	NP	RX/OTC
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	1	QL(4 EA daily)	NEXIUM PACK 10 MG, 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	NP	
<i>hyoscyamine sulfate ELIX</i>	1		<i>omeprazole CPDR</i>	1	QL(2 EA daily)
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	1		<i>omeprazole TBEC</i>	1	QL(1 EA daily)
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	1		<i>pantoprazole sodium PACK</i>	NP	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	1		<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)
<i>hyoscyamine sulfate TB12 0.375 MG</i>	1		<i>pantoprazole sodium TBEC 40 MG</i>	1	QL(2 EA daily)
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	1		PROTONIX PACK (<i>pantoprazole sodium</i>)	2	
H-2 Antagonists			<i>rabeprazole sodium TBEC</i>	1	
<i>cimetidine TABS 200 MG</i>	1	MP; RX/OTC	Ulcer Drugs - Prostaglandins		
<i>cimetidine TABS 800 MG</i>	1	QL(500 EA per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits
<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>trospium chloride CP24</i>	NP	
<i>trospium chloride TABS</i>	1	QL(2 EA daily)
VESICARE LS SUSP	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		

Drug Name	Drug Tier	Requirements/ Limits
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)
PEDVAXHIB SUSP 7.5 MCG/0.5ML	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)
VAXCHORA	0	AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
VAXNEUVANCE	0	AL(At least 19 yrs old)
VIVOTIF	0	AL(At least 19 yrs old)
Viral Vaccines		
ABRYSVO	0	QL(1 EA per fill retail); AL(At least 60 yrs old)
ACAM2000 SOLR IJ	0	AL(At least 19 yrs old)
AFLURIA PRESERVATIVE FREE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AREXVY	0	QL(1 EA per fill retail); AL(At least 19 yrs old)
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
COMIRNATY SUSP	0	
COMIRNATY SUSY	0	
DENG VAXIA	0	AL(At least 19 yrs old)
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
ENGERIX-B SUSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
FLUAD	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUAD QUADRIVALENT	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)
FLUARIX SUSY	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)
FLUCELVAX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLULAVAL SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUMIST	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUMIST 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 QUADRIVALENT	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 HIGH-DOSE SUSY	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)
FLUZONE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	M-M-R II SOLR	0	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)	MNEXSPIKE SUSY 10 MCG/0.2ML	0	
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)	MODERNA COVID-19 VAC 6M-11Y SUSP	0	
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0	AL(At least 19 yrs old)	MODERNA COVID-19 VAC 6M-11Y SUSY	0	
HEPLISAV-B SOSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	NOVAVAX COVID-19 VACCINE SUSP	0	
			NOVAVAX COVID-19 VACCINE SUSY	0	
			NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0	
			PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0	
			PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0	
			PREHEVBRIO	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
			PRIORIX SUSR	0	AL(At least 19 yrs old)
			PROQUAD SUSR	0	AL(At least 19 yrs old)
			RABAVERT	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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RECOMBIVAX HB SUSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	ENCARE SUPP 100 MG	2	QL(12 EA per fill retail)
ROTARIX SUSP	0	AL(At least 19 yrs old)	OPTIONS GYNOL II CONTRACEPTIVE GEL	2	QL(86 GM per fill retail)
ROTATEQ SOLN	0	AL(At least 19 yrs old)	VCF VAGINAL CONTRACEPTIVE FILM	2	QL(9 EA per fill retail)
SHINGRIX	0	Limit 2 dose per lifetime; 2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)	VCF VAGINAL CONTRACEPTIVE GEL	2	
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)	Vaginal Anti-infectives		
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0		CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	2	QL(40 GM per fill retail)
SPIKEVAX SUSP	0		<i>clindamycin phosphate vaginal CREA</i>	NP	QL(40 GM per fill retail)
SPIKEVAX SUSY	0		CLINDESSE	NP	
STAMARIL SUSR	0	AL(At least 19 yrs old)	<i>clotrimazole vaginal CREA 2 %</i>	1	QL(21 GM per fill retail)
TICOVAC	0	AL(At least 19 yrs old)	<i>clotrimazole vaginal CREA 1 %</i>	1	QL(45 GM per fill retail)
TWINRIX SUSY	0	AL(At least 19 yrs old)	GYNAZOLE-1	2	
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	AL(At least 19 yrs old)	<i>metronidazole vaginal</i>	1	
VAQTA	0	AL(At least 19 yrs old)	<i>metronidazole vaginal</i>	1	QL(70 GM per fill retail)
VARIVAX SUSR	0	2 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	MICONAZOLE 7 SUPP 100 MG	2	QL(7 EA per fill retail)
YF-VAX SUSR	0	AL(At least 19 yrs old)	<i>miconazole nitrate vaginal CREA 2 %</i>	1	QL(45 GM per fill retail)
VAGINAL AND RELATED PRODUCTS			<i>miconazole nitrate vaginal CREA 4 %</i>	1	QL(15 GM daily)
Spermicides			<i>miconazole nitrate vaginal KIT</i>	1	QL(24 EA per fill retail)
			<i>miconazole nitrate vaginal SUPP 100 MG</i>	1	QL(7 EA per fill retail)
			<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	QL(3 EA per fill retail)
			NUVESSA	2	
			<i>terconazole vaginal CREA 0.4 %</i>	1	QL(45 GM per fill retail)
			<i>terconazole vaginal CREA 0.8 %</i>	1	QL(20 GM per fill retail)
			<i>terconazole vaginal SUPP</i>	1	QL(3 EA per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
<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 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</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)

Drug Name	Drug Tier	Requirements/ Limits
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 1.25 MG, 1250 MCG, 50000 UNIT</i>	1	QL(0.267 EA daily)
<i>cholecalciferol CAPS</i>	1	
<i>cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML</i>	1	
<i>ergocalciferol CAPS</i>	1	
KEY-E CHEW	2	QL(2 EA daily)
<i>phytonadione TABS 5 MG</i>	1	
VITAMIN D3 LIQD PO 125 MCG/ML	2	
VITAMIN E/D-ALPHA CAPS 200 UNIT	2	QL(2 EA daily)
<i>vitamin e CAPS</i>	1	QL(2 EA daily)
VITAMIN E CAPS	2	QL(2 EA daily)
VITAMIN E CHEW	2	QL(2 EA daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	1	QL(100 EA per 34 day(s) retail)
NIACIN ER CPCR	2	
NIACIN ER TBCR	2	
<i>niacin CPCR 250 MG</i>	1	
<i>niacin TABS 500 MG</i>	1	

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

INDEX

2SAN COVID-19 RAPID SELF TEST KIT50	ACCU-CHEK SOFTCLIX LANCETS 62	ACTI-LANCE SPECIAL LANCETS 17G62
abacavir sulfate SOLN32	ACCULA SARS-COV-2 50	ACTI-LANCE UNIVERSAL 23G .. 62
abacavir sulfate TABS32	ACCURETIC 12.5 MG-10 MG (quinapril-hydrochlorothiazide) 24	ACTIMMUNE 100 MCG/0.5ML29
abacavir sulfate-lamivudine32	ACCUTREND PLUS 62	ACTIVITE TABS 1 MG77
ABILIFY ASIMTUFII PRSY 720 MG/2.4ML32	ACE AEROSOL CLOUD ENHANCER MISC70	ACTIVITY POUCH MISC70
ABILIFY ASIMTUFII PRSY 960 MG/3.2ML32	acebutolol hcl CAPS35	ACTONEL TABS 150 MG (risedronate sodium)52
ABILIFY MAINTENA PRSY32	acetaminophen CHEW6	ACTONEL TABS 35 MG (risedronate sodium)52
ABILIFY MAINTENA SRER32	acetaminophen ELIX6	ACULAR (ketorolac tromethamine (ophth))85
ABILIFY MYCITE MAINTENANCE KIT32	acetaminophen LIQD 160 MG/5ML .6	ACULAR LS (ketorolac tromethamine (ophth))85
ABILIFY MYCITE STARTER KIT .32	acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML6	acyclovir CAPS35
abiraterone acetate27	acetaminophen SUPP 120 MG, 650 MG6	acyclovir SUSP35
ABRILADA (1 PEN) AJKT3	acetaminophen SUSP 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML .6	acyclovir TABS PO 400 MG35
ABRILADA (2 PEN) AJKT3	acetaminophen TABS 325 MG, 500 MG6	acyclovir TABS PO 800 MG35
ABRILADA (2 SYRINGE) PSKT3	acetaminophen w/ codeine SOLN ..7	acyclovir topical CREA45
ABRYSVO93	acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG7	acyclovir topical OINT45
ABSORICA 10 MG, 20 MG, 40 MG (isotretinoin)42	acetazolamide CP1251	ADACEL SUSP90
ACAM2000 SOLR IJ93	acetazolamide TABS51	ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML90
acamprosate calcium88	acetic acid (otic)86	ADALIMUMAB-AACF (2 PEN) AJKT .3
acarbose16	acetylcysteine SOLN42	ADALIMUMAB-AACF (2 SYRINGE) PSKT3
ACCU-CHEK FASTCLIX LANCETS .61	ACTHAR GEL52	ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT3
ACCU-CHEK GUIDE CONTROL LIQD61	ACTHIB SOLR IM92	ADALIMUMAB-AACF(PS/UV STARTER) AJKT3
ACCU-CHEK GUIDE KIT62	ACTI-LANCE 28G62	ADALIMUMAB-AATY (1 PEN) AJKT .3
ACCU-CHEK GUIDE ME KIT62	ACTI-LANCE LITE LANCETS 28G 62	ADALIMUMAB-AATY (2 PEN) AJKT

3	ADBRY SOAJ	47	26G	62	
ADALIMUMAB-AATY (2 SYRINGE) PSKT	3	ADBRY SOSY	48	ADVOCATE SAFETY LANCETS 28G	62
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	3	ADCETRIS	27	ADYNOVATE	57
ADALIMUMAB-ADAZ SOAJ	3	ADDERALL TABS (amphetamine- dextroamphetamine)	1	AEROCHAMBER HOLDING CHAMBER DEVI	70
ADALIMUMAB-ADAZ SOSY 20 MG/0.2ML	3	ADDERALL XR CP24 (amphetamine-dextroamphetamine)	1	AEROCHAMBER MINI CHAMBER DEVI	70
ADALIMUMAB-ADAZ SOSY	3	ADRENALIN 0.1 %	81	AEROCHAMBER MV MISC	70
ADALIMUMAB-ADBM (2 PEN) AJKT 3		ADTHYZA TABS 15 MG, 30 MG, 60 MG, 65 MG, 90 MG, 120 MG, 130 MG	90	AEROCHAMBER PLS FLOVU MTHPIECE DEVI	70
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	3	ADULT AEROSOL MASK MISC	70	AEROCHAMBER PLUS FLO-VU INTERM DEVI	70
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	3	ADULT MASK LARGE MISC	70	AEROCHAMBER PLUS FLO-VU LARGE DEVI	70
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	3	ADVAIR DISKUS AEPB (fluticasone- salmeterol)	11	AEROCHAMBER PLUS FLO-VU LARGE MISC	70
ADALIMUMAB-BWWD SOAJ 40 MG/0.4ML	3	ADVAIR HFA AERO (fluticasone- salmeterol)	11	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	70
ADALIMUMAB-BWWD SOSY 40 MG/0.4ML	3	ADVANCED MOBILE LANCET	62	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	70
ADALIMUMAB-FKJP (2 PEN) AJKT 3		ADVANTAGE SAFETY LANCETS 28G	62	AEROCHAMBER PLUS FLO-VU SMALL DEVI	70
ADALIMUMAB-FKJP (2 SYRINGE) PSKT	4	ADVATE	57	AEROCHAMBER PLUS FLO-VU SMALL MISC	70
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	4	ADVIN COVID-19 ANTIGEN TEST KIT	50	AEROCHAMBER PLUS FLOW VU MISC	70
ADALIMUMAB-RYVK (2 PEN) AJKT 4		ADVOCATE ALCOHOL PREP PADS	68	AEROCHAMBER PLUS FLOW VU MISC	70
ADALIMUMAB-RYVK (2 SYRINGE) PSKT	4	ADVOCATE LANCETS	62	AEROCHAMBER W/FLOWSIGNAL MISC	70
adapalene CREA	42	ADVOCATE LANCETS 30G	62	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	70
adapalene GEL	42	ADVOCATE SAFETY LANCETS 21G	62	AEROCHAMBER Z-STAT PLUS MISC	71
ADAPALENE SOLN	42	ADVOCATE SAFETY LANCETS 23G	62	AEROCHAMBER Z-STAT PLUS/LARGE MISC	70
adapalene-benzoyl peroxide GEL	42	ADVOCATE SAFETY LANCETS			

AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	70	albuterol sulfate TABS	11	ALPHAGAN P (brimonidine tartrate) 84	
AEROCHAMBER Z-STAT PLUS/SMALL MISC	71	alclometasone dipropionate CREA	45	ALPHANATE SOLR	57
AEROCHAMBER2GO ANTI-STATIC DEVI	71	alclometasone dipropionate OINT	45	ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	57
AEROTRACH PLUS MISC	71	ALCOH-GLOVE CONTOURED WIPE	69	ALPRAZOLAM INTENSOL CONC	10
AEROVENT PLUS DEVI	71	ALCOHOL PADS	69	alprazolam TABS	10
AFLURIA PRESERVATIVE FREE SUSY	93	ALCOHOL PREP	69	alprazolam TB24	10
AFLURIA QUADRIVALENT SUSY 0.5 ML	93	ALCOHOL PREP PADS	69	alprazolam TBDP	10
AFLURIA SUSP	93	ALCOHOL PREP PADS-MISC ...	61	ALPROLIX	57
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	57	ALCOHOL SWABS	69	ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	57
AGAMATRIX ULTRA-THIN LANCETS	62	ALCOHOL SWABSTICK	69	alum & mag hydrox-simethicone LIQD	9
AIMSCO TWIST LANCETS 32G ..	62	ALDURAZYME	53	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	9
AIMSCO TWIST LANCETS 33G ..	62	ALECENSA	28	ALUMINUM HYDROXIDE GEL SUSP	9
AIRS PEDIATRIC AEROSOL MASK MISC	71	alendronate sodium SOLN	52	amantadine hcl CAPS	30
AIRSUPRA	11	alendronate sodium TABS 35 MG, 70 MG	52	amantadine hcl SOLN	30
AJOVY SOAJ	74	alendronate sodium TABS 5 MG, 10 MG	52	amantadine hcl TABS	30
AJOVY SOSY	74	ALEVE PM 25 MG-220 MG	59	ambrisentan	37
AKLIEF	42	alfuzosin hcl	56	amcinonide CREA	45
albuterol sulfate AERS	11	ALL FLOW 1000 PFT FILTER MISC . 71		amcinonide OINT	45
albuterol sulfate NEBU 0.083 % ...	11	allopurinol 100 MG, 300 MG	56	AMERITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG, 240 MG, 300 MG	90
albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML	11	almotriptan malate	74	amiloride & hydrochlorothiazide ..	51
albuterol sulfate NEBU	11	alogliptin benzoate	17	amiloride hcl TABS	51
ALBUTEROL SULFATE NEBU	11	alogliptin-metformin hcl	16		
albuterol sulfate SYRP	11	alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	16		
		ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ...	54		
		alosetron hcl	55		

aminocaproic acid SOLN PO 0.25 GM/ML 59	amoxicillin & pot clavulanate TB12 87	aprepitant CPPK PO 21
aminocaproic acid TABS 1000 MG 59	amoxicillin CAPS 87	APRETUDE 32
aminocaproic acid TABS 500 MG . 59	amoxicillin CHEW 125 MG, 250 MG . 87	APTENSIO XR CP24 (methylphenidate hcl) 2
amiodarone hcl TABS 200 MG 10	amoxicillin SUSR 87	APTIVUS CAPS 32
amitriptyline hcl TABS 16	amoxicillin TABS 875 MG 87	AQUALANCE LANCETS 30G 62
AMJEVITA SOAJ 4	AMOXICILLIN-POT CLAVULANATE CHEW 87	AQUORAL SOLN 76
AMJEVITA SOSY 4	amphetamine sulfate TABS 1	ARALAST NP SOLR 500 MG, 1000 MG 89
AMJEVITA-PED 10KG TO <15KG SOSY 4	amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG 1	ARBLI PO 10 MG/ML 24
AMJEVITA-PED 15KG TO <30KG SOSY 4	amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG 1	ARESTIN 76
amlodipine besylate TABS 36	amphetamine-dextroamphetamine TABS 1	AREXVY 93
amlodipine besylate-atorvastatin calcium 37	ampicillin CAPS 500 MG 87	aripiprazole SOLN PO 32
amlodipine besylate-benazepril hcl 24	AMRIX CP24 (cyclobenzaprine hcl) 80	aripiprazole TABS 32
amlodipine besylate-olmesartan medoxomil 24	anastrozole 27	aripiprazole TBDP 32
amlodipine besylate-valsartan 24	ANDEXXA 200 MG 20	ARISTADA 441 MG/1.6ML 32
amlodipine-valsartan- hydrochlorothiazide 24	ANDROGEL PUMP GEL TD (testosterone) 8	ARISTADA 662 MG/2.4ML 32
AMONDYS 45 81	ANUSOL-HC EX (hydrocortisone (rectal)) 9	ARISTADA 882 MG/3.2ML 32
amoxapine 16	ANZUPGO CREA EX 20 MG/GM . 48	ARMOUR THYROID TABS 90
amoxicillin & pot clavulanate CHEW . 87	APLIGRAF DISK 50	arsenic trioxide 12 MG/6ML 29
amoxicillin & pot clavulanate SUSR 87	APOKYN SOCT 30	artificial saliva SOLN 77
amoxicillin & pot clavulanate TABS 125 MG-250 MG 87	apomorphine hydrochloride SOCT 30	ARZERRA 27
amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG 87	APONVIE EMUL 21	ascorbic acid TABS 96
	apraclonidine hcl 84	ASMANEX (120 METERED DOSES) AEPB 11
	aprepitant CAPS 21	ASMANEX (14 METERED DOSES) AEPB 11
		ASMANEX (30 METERED DOSES) AEPB 11
		ASMANEX (60 METERED DOSES) AEPB 11
		aspirin buffered (cal carb-mag carb-

mag oxide)6	(ipratropium bromide hfa)11	azithromycin SUSR 200 MG/5ML . 61
aspirin CHEW 6	AUM ALCOHOL PREP PADS 69	azithromycin TABS 250 MG 61
ASPIRIN SUPP 300 MG 6	AURORA LANCET SUPER THIN 30G62	azithromycin TABS 500 MG 61
aspirin TABS 325 MG6	AURORA LANCET THIN 23G 62	azithromycin TABS 600 MG 61
aspirin TBEC 81 MG, 325 MG 6	AUSTEDO TABS88	AZSTARYS2
aspirin-dipyridamole58	AUSTEDO XR PATIENT TITRATION TEPK88	b complex w/ c CAPS77
ASPRUZYO SPRINKLE PACK9	AUSTEDO XR TB2488	bacitracin (topical) OINT43
ASSURE COMFORT LANCETS 28G62	AUVELITY15	bacitracin zinc OINT 43
ASSURE LANCE LANCETS62	AUVI-Q SOAJ 0.15 MG/0.15ML ...96	bacitracin-polymyxin b (ophth)84
ASSURE LANCE LANCETS 21G .62	AUVI-Q SOAJ 0.3 MG/0.3ML96	baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML80
ASSURE LANCE PLUS SAFETY 25G62	AVASTIN27	baclofen SOLN PO 5 MG/5ML, 10 MG/5ML80
ASSURE LANCE PLUS SAFETY 30G62	AVEED SOLN8	baclofen SUSP80
ASSURE LANCE SAFETY LANCET 28G62	AVONEX PEN AJKT88	baclofen TABS 10 MG, 20 MG 80
atazanavir sulfate CAPS32	AVONEX PREFILLED PSKT88	baclofen TABS 5 MG, 15 MG80
ATELVIA TBEC (risedronate sodium)52	AVOPEF SOLN 100 MG/5ML, 500 MG/25ML29	BAFIERTAM88
atenolol & chlorthalidone24	AVTOZMA SOAJ SC 162 MG/0.9ML 4	balsalazide disodium CAPS 55
atenolol TABS35	AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML 5	BAQSIMI ONE PACK POWD17
ATGAM75	AVTOZMA SOSY SC 162 MG/0.9ML5	BAQSIMI TWO PACK POWD 17
atomoxetine hcl2	azacitidine SUSR 26	BASAGLAR TEMPO PEN SOPN ..18
ATORVALIQ SUSP23	azathioprine TABS 50 MG75	BCG VACCINE92
atorvastatin calcium TABS23	azathioprine TABS 75 MG, 100 MG 75	b-complex vitamins CAPS77
ATRALIN GEL (tretinoin)42	azelastine hcl (ophth) 85	b-complex vitamins TABS 77
atropine sulfate (ophthalmic) OINT 83	azelastine hcl81	b-complex w/ c & folic acid CAPS .77
atropine sulfate (ophthalmic) SOLN 83	azelastine hcl-fluticasone propionate SUSP81	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 77
ATROPINE SULFATE SOLN 1 % .84	azithromycin SUSR 100 MG/5ML . 61	BD AUTOSHIELD DUO70
ATROVENT HFA 17 MCG/ACT		BD GLUCOSE CHEW 17

BD MICROTAINER LANCETS62	BENLYSTA SOLR76	betaxolol hcl (ophth) SOLN83
BD PEN NEEDLE MICRO ULTRAFINE70	BENZAC AC WASH LIQD 5 %42	betaxolol hcl35
BD PEN NEEDLE MINI ULTRAFINE70	BENZNIDAZOLE9	bethanechol chloride92
BD PEN NEEDLE NANO 2ND GEN . 70	benzonatate 100 MG41	BETHKIS NEBU (tobramycin)2
BD PEN NEEDLE NANO ULTRAFINE70	benzonatate 200 MG41	BEVACIZUMAB IZ 2.5 MG/0.1ML, 3.25 MG/0.13ML84
BD PEN NEEDLE ORIG ULTRAFINE70	benzoyl peroxide GEL 2.5 %, 5 %, 10 %42	BEVACIZUMAB IZ 2.75 MG/0.11ML . 84
BD PEN NEEDLE SHORT ULTRAFINE70	benzoyl peroxide LIQD 5 %, 10 % .42	BEVESPI AEROSPHERE11
BD PEN NEEDLES70	benzoyl peroxide LOTN 5 %, 10 % 42	bexarotene (topical)44
BD SWAB SINGLE USE REGULAR 69	BENZOYL PEROXIDE LOTN 5 %, 10 %42	bexarotene29
BD VERITOR SYSTEM SARS-COV- 250	benztropine mesylate TABS30	BEXSERO 0.5 ML92
beclomethasone dipropionate 40 MCG/ACT, 80 MCG/ACT11	BERINERT KIT57	BEYFORTUS87
BEDDING SPRAY LICE TREATMENT AERO 0.5 %49	betaine53	bicalutamide27
BELEODAQ28	betamethasone dipropionate (topical) CREA45	BIKTARVY 120 MG-30 MG-15 MG 32
BELRAPZO SOLN26	betamethasone dipropionate (topical) LOTN45	BIKTARVY 200 MG-50 MG-25 MG 32
BENADRYL ALLERGY EXTRA STR TABS22	betamethasone dipropionate (topical) OINT45	BILAC CAPS19
benazepril & hydrochlorothiazide .24	betamethasone dipropionate augmented CREA45	bimatoprost SOLN85
benazepril hcl 40 MG23	betamethasone dipropionate augmented GEL 0.05 %45	BIMZELX SOAJ 160 MG/ML44
benazepril hcl 5 MG, 10 MG, 20 MG . 23	betamethasone dipropionate augmented LOTN45	BIMZELX SOAJ 320 MG/2ML44
BENDAMUSTINE HCL SOLN26	betamethasone dipropionate augmented OINT45	BIMZELX SOSY 160 MG/ML44
bendamustine hcl SOLR26	betamethasone valerate CREA ...45	BIMZELX SOSY 320 MG/2ML44
BENDEKA SOLN26	betamethasone valerate FOAM ...45	BINAXNOW COVID-19 AG CARD 50
BENEFIX KIT57	betamethasone valerate LOTN ...45	BINAXNOW COVID-19 AG HOME TEST KIT50
	betamethasone valerate OINT45	BINAXNOW COVID-19 ANTIGEN SELF KIT50
		BIOCORE DAILY CAPS19
		BIOCORE IMMUNE+ CAPS19

BIOCORE RESTORE CAPS 19	BREATHE COMFORT CHAMBER/ADULT DEVI 71	41
BIOMEXA CAPS 19	BREATHE COMFORT CHAMBER/CHILD DEVI 71	brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML 41
BIONARA ULTRA CPDR 19	BREATHE EASE LARGE DEVI ... 71	BRYNOVIN SOLN PO 25 MG/ML . 17
BIOSTORA CAPS 19	BREATHE EASE MEDIUM DEVI .. 71	BUBBLES THE FISH II PEDI MASK MISC 71
BIOTHRAX 92	BREATHE EASE NEB MASK/CHILD MISC 71	BUCAPSOL PO 7.5 MG, 10 MG, 15 MG 10
bisacodyl SUPP 61	BREATHE EASE NEB MASK/INFANT MISC 71	budesonide (inhalation) SUSP 11
bisacodyl TBEC 61	BREATHE EASE SMALL DEVI 71	budesonide TB24 40
bismuth subsalicylate CHEW 262 MG 19	BREATHERRITE VALVED MDI CHAMBER DEVI 71	budesonide-formoterol fumarate dihydrate 12
bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML 19	BREO ELLIPTA 11	bumetanide TABS 51
bisoprolol & hydrochlorothiazide .. 24	BREZTRI AEROSPHERE 12	BUPHENYL POWD (sodium phenylbutyrate) 53
bisoprolol fumarate 35	BRILINTA 60 MG, 90 MG (ticagrelor) 58	BUPHENYL TABS (sodium phenylbutyrate) 53
bisoprolol fumarate 2.5 MG 35	brimonidine tartrate 0.1 %, 0.15 % 84	buprenorphine hcl SUBL 8
BIVIGAM SOLN 86	brimonidine tartrate 0.2 % 84	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG ... 8
BLINCYTO 27	brimonidine tartrate-timolol maleate . 83	buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG 7
BONJESTA TBCR 21	BRIUMVI 88	buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG 8
BONSITY SOPN 560 MCG/2.24ML 52	brivaracetam SOLN IV 50 MG/5ML 13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG 7
BOOSTRIX SUSP 90	BRIXADI (WEEKLY) SOSY 7	buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG 8
BOOSTRIX SUSY 90	BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML 7	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG 8
bortezomib SOLR IJ 28	bromfenac sodium (ophth) 0.09 % . 85	buprenorphine PTWK 8
bosentan TABS 37	bromocriptine mesylate CAPS 30	bupropion hcl (smoking deterrent) 89
bosutinib TABS 100 MG, 500 MG . 28	bromocriptine mesylate TABS 2.5 MG 30	bupropion hcl TABS 15
BOTOX IJ 82	brompheniramine & phenyleph ELIX . 41	bupropion hcl TB12 100 MG 15
BPROTECTED PEDIA POLY-VITE SOLN PO 79	brompheniramine & pseudoeph ELIX	
BPROTECTED PEDIA POLY- VITE/FE SOLN 79		
BRAFTOVI 75 MG 28		

bupropion hcl TB12 150 MG15	calcipotriene-betamethasone dipropionate OINT45	captopril & hydrochlorothiazide ...24
bupropion hcl TB12 200 MG15	calcipotriene-betamethasone dipropionate SUSP45	captopril23
bupropion hcl TB24 150 MG15	calcitonin (salmon) IJ52	CARAC CREA (fluorouracil (topical)) 44
bupropion hcl TB24 300 MG15	calcitonin (salmon) NA52	CARBAGLU (carglumic acid)53
bupropion hcl TB24 450 MG15	calcitriol CAPS53	carbamazepine CHEW 100 MG ...13
buspirone hcl10	calcium acetate (phosphate binder) CAPS56	carbamazepine CHEW 200 MG ...13
butalbital-acetaminophen TABS 50 MG-325 MG6	calcium acetate (phosphate binder) TABS56	carbamazepine CP1213
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG6	CALCIUM ACETATE75	carbamazepine SUSP13
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG6	calcium carbonate (antacid) CHEW 500 MG9	carbamazepine TABS13
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG7	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT- 600 MG, 400 UNIT-600 MG, 5 MCG- 600 MG75	carbamazepine TB1213
butalbital-aspirin-caffeine CAPS6	calcium polycarbophil TABS60	carbamide peroxide (otic) 6.5 % ...86
butalbital-aspirin-caffeine w/cod7	CAMCEVI27	CARBATROL CP12 (carbamazepine)13
BUTRANS PTWK (buprenorphine) .8	camphor & menthol LOTN44	carbidopa30
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (exenatide)17	CANASA SUPP (mesalamine)55	carbidopa-levodopa TABS30
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (exenatide)17	candesartan cilexetil24	carbidopa-levodopa TBCR30
CABOMETYX TABS28	candesartan cilexetil- hydrochlorothiazide24	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML26
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	capecitabine26	CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)36
caffeine citrate SOLN PO 60 MG/3ML1	CAPHOSOL SOLN77	CAREONE LANCET SUPER THIN 30G62
calcipotriene CREA44	CAPLYTA30	CAREONE LANCET THIN 23G ...62
CALCIPOTRIENE FOAM44	CAPRELSA28	CARESENS LANCETS62
calcipotriene OINT44	capsaicin CREA 0.025 %, 0.075 % 48	CARESENS LANCETS 30G62
calcipotriene SOLN44	capsaicin CREA 0.035 %48	CARESTART COVID-19 HOME TEST KIT50
	capsaicin CREA 0.1 %48	CARETOUCH ALCOHOL PREP ..69
		CARETOUCH SAFETY LANCETS 62

CARETOUCH SAFETY LANCETS 26G62	cefpodoxime proxetil TABS38	chlorhexidine gluconate (mouth- throat)76
CARETOUCH TWIST LANCETS 28G62	cefprozil SUSR37	chloroquine phosphate TABS 250 MG25
CARETOUCH TWIST LANCETS 30G62	cefprozil TABS38	chloroquine phosphate TABS 500 MG25
CARETOUCH TWIST LANCETS 33G62	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG38	chlorpheniramine maleate SYRP ..22
CARETOUCH TWIST MC LANCETS 30G63	cefuroxime axetil TABS38	chlorpheniramine maleate TABS ..22
carglumic acid53	celecoxib5	chlorpromazine hcl TABS31
carisoprodol TABS 250 MG80	CELONTIN (methsuximide)14	chlorthalidone 25 MG, 50 MG52
carisoprodol TABS 350 MG80	cephalexin CAPS 250 MG, 500 MG 37	chlorzoxazone TABS 250 MG, 375 MG, 750 MG80
carteolol hcl (ophth)83	cephalexin SUSR37	chlorzoxazone TABS 500 MG80
carvedilol 25 MG35	CEPROTIN58	CHOLBAM55
carvedilol 3.125 MG, 6.25 MG, 12.5 MG35	CEQUA SOLN84	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT96
carvedilol phosphate35	CERDELGA58	cholecalciferol CAPS96
CASGEVY58	CEREZYME 400 UNIT58	cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML96
CASTIVA WARMING LOTN48	cetirizine hcl CAPS22	cholestyramine light PACK22
CAYSTON25	cetirizine hcl CHEW22	cholestyramine light POWD22
cefaclor CAPS37	cetirizine hcl SOLN PO22	cholestyramine PACK22
CEFACLOR ER TB1237	cetirizine hcl SYRP PO 1 MG/ML ..22	cholestyramine POWD23
cefaclor SUSR 250 MG/5ML37	cetirizine hcl TABS22	CHORIONIC GONADOTROPIN IM 52
cefadroxil CAPS37	CETRAXAL (ciprofloxacin hcl (otic)) . 86	CHOSEN LANCETS 30G63
cefadroxil SUSR37	CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ...89	CHOSEN SAFETY LANCETS 28G 63
cefadroxil TABS37	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)89	CIBINQO48
cefdinir CAPS38	CHANTIX TABS (varenicline tartrate)89	ciclopirox SOLN43
cefdinir SUSR38	CHEMET20	cilostazol58
cefixime CAPS38	CHEMSTRIP K STRP50	cimetidine TABS 200 MG91
cefixime SUSR38	chenodiol55	
cefpodoxime proxetil SUSR38	chlordiazepoxide hcl CAPS10	

cimetidine TABS 300 MG, 400 MG 91	63	clobetasol propionate emulsion ...45
cimetidine TABS 800 MG91	CLEVER CHOICE HOLDING CHAMBER DEVI71	clobetasol propionate FOAM 46
cinacalcet hcl53	CLEVER CHOICE LANCETS 21G 63	clobetasol propionate GEL 0.05 % 46
CINQAIR10	CLEVER CHOICE LANCETS 23G 63	clobetasol propionate LIQD46
CINRYZE SOLR IV57	CLEVER CHOICE LANCETS 28G 63	clobetasol propionate LOTN46
CIPRO SUSR54	clindamycin hcl 150 MG, 300 MG . 25	clobetasol propionate OINT 0.05 % 46
ciprofloxacin hcl (ophth) SOLN 84	clindamycin palmitate hydrochloride . 25	clobetasol propionate SHAM 46
ciprofloxacin hcl (otic) 86	clindamycin phosphate (topical) GEL 42	clobetasol propionate SOLN 0.05 % . 46
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG 54	clindamycin phosphate (topical) LOTN42	clocortolone pivalate 46
ciprofloxacin-dexamethasone86	clindamycin phosphate (topical) SOLN42	CLODERM (clocortolone pivalate) 46
cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML26	clindamycin phosphate vaginal CREA95	clomipramine hcl 16
CISPLATIN SOLR 26	clindamycin phosphate-benzoyl peroxide (refrigerate)42	clonazepam TABS13
CITALOPRAM HYDROBROMIDE CAPS 30 MG (citalopram hydrobromide)15	clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 % . 42	clonazepam TBDP13
citalopram hydrobromide CAPS 30 MG 15	clindamycin phosphate-tretinoin .. 42	clonidine hcl (adhd) TB122
citalopram hydrobromide SOLN ... 15	CLINDESSE95	clonidine hcl TABS24
citalopram hydrobromide TABS ... 15	CLINITEST RAPID COVID-19 TEST KIT50	clopidogrel bisulfate 300 MG 58
cladribine 10 MG/10ML26	clobazam SUSP13	clopidogrel bisulfate 75 MG58
clarithromycin SUSR61	clobazam TABS13	clorazepate dipotassium TABS10
clarithromycin TABS 61	clobetasol propionate CREA 0.05 % . 45	clotrimazole (topical) CREA 43
clarithromycin TB2461	clobetasol propionate emollient base 0.05 %45	clotrimazole (topical) SOLN 43
CLEANLET LANCETS 28G63		clotrimazole vaginal CREA 1 % ...95
CLEARDETECT COVID-19 AG HOME KIT50		clotrimazole vaginal CREA 2 % ...95
CLEOCIN CREA (clindamycin phosphate vaginal)95		clotrimazole w/ betamethasone CREA 43
CLEVER CHEK LANCETS63		clotrimazole w/ betamethasone LOTN43
CLEVER CHOICE COMFORT EZ		clozapine TABS31
		clozapine TBDP31
		CO MONITOR REPLACEMENT

PIECES MISC	71	COMFORT TOUCH ALCOHOL PREP	69	CORIFACT	57
COAGADEX	57	COMFORT TOUCH LANCETS 31G 63		CORTISONE ACETATE TABS	40
COAGUCHEK LANCETS	63	COMFORT TOUCH PLUS LANCETS 28G	63	CORTROPHIN GEL	52
coal tar extract SHAM 0.5 %	50	COMFORT TOUCH PLUS LANCETS 30G	63	COSENTYX (300 MG DOSE) SOSY .	44
COARTEM	25	COMFORT TOUCH TWIST LANCET 30G	63	COSENTYX SENSOREADY (300 MG) SOAJ	44
COBAS LIAT SARS-COV-2 ASSAY .	50	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	93	COSENTYX SENSOREADY PEN SOAJ	44
COBAS LIAT SARS-COV-2 CONTROL	50	COMIRNATY SUSP	93	COSENTYX SOLN	44
COBENFY CAPS	31	COMIRNATY SUSY	93	COSENTYX SOSY	44
COBENFY STARTER PACK CPPK 31		COMIRNATY SUSY	93	COSENTYX UNOREADY SOAJ ..	44
codeine sulfate TABS 30 MG	6	COMPACT SPACE CHAMBER DEVI	71	cosyntropin SOLR	50
CODEINE SULFATE TABS	6	COMPACT SPACE CHAMBER/LG MASK DEVI	71	COTELLIC	28
colchicine TABS	56	COMPACT SPACE CHAMBER/MED MASK DEVI	71	COVID-19 AT HOME ANTIGEN TEST KIT	50
colchicine w/ probenecid	56	COMPACT SPACE CHAMBER/SM MASK DEVI	71	COVID-19 AT-HOME TEST KIT ...	50
colestipol hcl GRAN	23	COMPLERA 200 MG-300 MG-25 MG (emtricitabine-rilpivirine-tenofovir disoproxil fumarate)	32	COVID-19 OTC ANTIGEN 1-PACK KIT	50
colestipol hcl TABS	23	CONCERTA TBCR (methylphenidate hcl)	2	COVID-19 OTC ANTIGEN 2-PACK KIT	50
COLLAVERA GEL 2 %	48	CONDOMS-MISC	61	CREON CPEP	51
COMBIGAN (brimonidine tartrate- timolol maleate)	83	CONJUPRI (levamlodipine maleate) 36		CRINONE GEL	96
COMBIPATCH PTTW	54	CONZIP CP24 (tramadol hcl)	6	cromolyn sodium (nasal) 5.2 MG/ACT	81
COMBIVENT RESPIMAT AERS ..	12	COPAXONE SOSY (glatiramer acetate)	88	cromolyn sodium (ophth)	85
COMETRIQ (100 MG DAILY DOSE) KIT	28	COREG CR (carvedilol phosphate) 35		cromolyn sodium NEBU	10
COMETRIQ (140 MG DAILY DOSE) KIT	28			CRYSVITA	53
COMETRIQ (60 MG DAILY DOSE) KIT	28			CTEXLI TABS PO 250 MG	55
COMFORT ASSURED LANCETS 28G	63			CULTURELLE DIGESTIVE DAILY CAPS	20
COMFORT ASSURED LANCETS 33G	63			CULTURELLE KIDS CHEW	19
				CULTURELLE KIDS PURELY	

CHEW	19	CYLTEZO-PSORIASIS/UV STARTER AJKT	4	darunavir TABS	32
CURITY ALCOHOL PREPS	69	CYMBALTA CPEP 20 MG, 30 MG (duloxetine hcl)	16	DARZALEX	27
CUVITRU SOLN	86	CYMBALTA CPEP 60 MG (duloxetine hcl)	16	dasatinib	28
CVS ALCOHOL PREP PADS	69	cyproheptadine hcl SYRP	22	daunorubicin hcl SOLN 50 MG/10ML 28	
CVS COVID-19 AT HOME TEST KIT KIT	50	cyproheptadine hcl TABS	22	DAURISMO	27
CVS LANCETS ORIGINAL	63	CYRAMZA	27	DAYHIST ALLERGY 12 HOUR RELIEF TABS	22
CVS LANCETS THIN 26G	63	CYSTAGON CAPS	56	decitabine	26
CVS LICE-BEDBUG-MITE AERO 0.5 %	49	CYSTARAN	85	deferasirox PACK	20
CVS PREP	69	cytarabine SOLN	26	deferasirox TABS	20
CVS ULTRA THIN LANCETS	63	CYTOGAM SOLN	86	deferasirox TBSO	20
cyanocobalamin SOLN IJ 1000 MCG/ML	58	CYTRA K CRYSTALS PACK 1002 MG-3300 MG	56	deferiprone TABS	20
cyclobenzaprine hcl CP24	80	dabigatran etexilate mesylate CAPS . 13		deferoxamine mesylate	20
cyclobenzaprine hcl TABS 5 MG, 10 MG	80	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	DEFITELIO	58
cyclobenzaprine hcl TABS 7.5 MG 80		dalfampridine	88	deflazacort SUSP	40
CYCLOGYL 0.5 %	84	DANTRIUM CAPS 25 MG (dantrolene sodium)	80	deflazacort TABS	40
cyclopentolate hcl 1 %	84	dantrolene sodium CAPS	80	DEFLUX	56
cyclophosphamide CAPS 50 MG ..	26	dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG, 1000 MG-5 MG	16	DELSTRIGO	32
CYCLOPHOSPHAMIDE TABS	26	dapagliflozin TABS PO 5 MG, 10 MG	19	DENAVIR (penciclovir)	45
cyclosporine (ophth) EMUL	84	dapsone	25	DENGAXIA	93
cyclosporine CAPS	75	DAPTACEL	90	DEPAKOTE SPRINKLES CSDR (divalproex sodium)	14
cyclosporine modified (for microemulsion) CAPS	75	DARAPRIM (pyrimethamine)	26	DEPO-SUBQ PROVERA 104 SUSY SC	40
cyclosporine modified (for microemulsion) SOLN	75	darifenacin hydrobromide	92	DERMACINRX BOOSTERVITE TABS	77
CYLTEZO (2 PEN) AJKT	4			DERMACINRX DIGENYX TABS 0.125 MG	91
CYLTEZO (2 SYRINGE) PSKT	4			DERMACINRX LIDOCAINE CREA 3 %	48
CYLTEZO-CD/UC/HS STARTER AJKT	4			DERMACINRX PROBISOL CAPS ..	19

DERMACINRX PROBITRAN CAPS 19	desvenlafaxine succinate 100 MG .16	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG 1
DERMACINRX SALICYLIC ACID GEL 6 %48	desvenlafaxine succinate 25 MG, 50 MG 16	dextroamphetamine sulfate TABS 5 MG, 10 MG1
DESCOVY 120 MG-15 MG32	DETROL LA CP24 (tolterodine tartrate)92	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML 41
DESCOVY 200 MG-25 MG32	dexamethasone ELIX41	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML 41
desipramine hcl TABS 16	DEXAMETHASONE INTENSOL CONC40	dextrose (diabetic use) CHEW 4 GM . 17
DES LorATADINE SOLN PO 0.5 MG/ML 22	dexamethasone sodium phosphate (ophth)85	DHIVY TABS30
desloratadine TBP 22	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML40	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 SOLN IJ ...54	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML .41	DIATHRIVE LANCET ULTRA THIN 3063
DESMOPRESSIN ACETATE SOLN NA54	dexamethasone sodium phosphate SOSY IJ 4 MG/ML 41	DIATHRIVE LANCETS63
desmopressin acetate spray54	dexamethasone SOLN41	DIATRUST COVID-19 HOME TEST KIT 50
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	diazepam CONC10
desmopressin acetate TABS 54	dexchlorpheniramine maleate SOLN . 22	diazepam SOLN IJ 5 MG/ML, 10 MG/2ML10
desogestrel & ethinyl estradiol38	dexmedetomidine hcl in sodium chloride SOLN 60	diazepam SOLN IJ 5 MG/ML 10
desogestrel-ethinyl estradiol (biphasic)38	dexmedetomidine hcl SOLN 200 MCG/2ML60	DIAZEPAM SOLN IJ 5 MG/ML 10
desogestrel-ethinyl estradiol (triphasic)38	dexmethylphenidate hcl CP24 2	diazepam SOLN PO 5 MG/5ML ... 10
desonide CREA46	dexmethylphenidate hcl TABS2	diazepam TABS10
desonide LOTN46	dextrazoxane hcl29	diazoxide 17
desonide OINT46	DEXTENZA INST85	dibucaine48
desoximetasone CREA 0.05 %46	dextroamphetamine sulfate CP24 10 MG, 15 MG1	DICLEGIS TBEC (doxylamine-pyridoxine) 21
desoximetasone CREA 0.25 %46	dextroamphetamine sulfate CP24 5 MG1	diclofenac potassium TABS 50 MG .5
desoximetasone GEL46	dextroamphetamine sulfate SOLN ..1	diclofenac sodium (ophth)85
desoximetasone LIQD46		
desoximetasone OINT46		
DESTRESS-IRON TABS 77		
DES VENLAFAXINE ER16		

diclofenac sodium (topical) GEL EX 44	diltiazem hcl CP24 180 MG36	divalproex sodium TB24 14
diclofenac sodium TB245	diltiazem hcl extended release beads36	divalproex sodium TBEC14
diclofenac sodium TBEC5	diltiazem hcl TABS36	docetaxel CONC 160 MG/8ML 29
dicloxacillin sodium87	diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG36	DOCETAXEL CONC 160 MG/8ML 29
dicyclomine hcl CAPS 91	dimethyl fumarate CDPK 88	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML 29
dicyclomine hcl SOLN PO 91	dimethyl fumarate CPDR 88	docetaxel SOLN 29
dicyclomine hcl TABS91	diphenhydramine hcl (sleep) CAPS 59	DOCIVYX SOLN29
DIFFERIN CREA (adapalene)42	diphenhydramine hcl (sleep) LIQD 59	docusate sodium CAPS 100 MG, 250 MG 61
DIFFERIN GEL 0.3 % (adapalene) 42	diphenhydramine hcl (sleep) TABS 25 MG59	docusate sodium CAPS 50 MG ... 61
DIFFERIN LOTN42	diphenhydramine hcl (sleep) TABS 50 MG59	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML61
diflorasone diacetate CREA 46	diphenhydramine hcl CAPS 22	DOCUSATE SODIUM SYRP61
diflorasone diacetate OINT 46	diphenhydramine hcl ELIX 12.5 MG/5ML22	docusate sodium TABS61
diflunisal TABS6	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML22	dofetilide10
digoxin SOLN PO 0.05 MG/ML36	diphenhydramine hcl TABS 25 MG 22	donepezil hydrochloride TABS 23 MG 88
digoxin TABS 125 MCG, 250 MCG 36	diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG60	donepezil hydrochloride TABS 5 MG, 10 MG88
dihydroergotamine mesylate SOLN NA 4 MG/ML 74	diphenoxylate w/ atropine LIQD ... 20	donepezil hydrochloride TBDP 88
DILANTIN (phenytoin sodium extended) 14	diphenoxylate w/ atropine TABS .. 20	DOPTelet58
DILANTIN INFATABS CHEW (phenytoin) 14	DIPROLENE OINT (betamethasone dipropionate augmented) 46	dorzolamide hcl 85
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG 36	dipyridamole58	DORZOLAMIDE HCL85
diltiazem hcl coated beads CP24 240 MG 36	disopyramide phosphate CAPS ... 10	DORZOLAMIDE HCL-TIMOLOL MAL83
diltiazem hcl coated beads CP24 360 MG 36	disulfiram 250 MG88	dorzolamide hcl-timolol maleate .. 83
diltiazem hcl CP12 36	divalproex sodium CSDR 14	DOVATO 32
diltiazem hcl CP24 120 MG, 240 MG 36		doxazosin mesylate 24
		doxepin hcl (sleep)60
		doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG16

doxepin hcl CAPS 150 MG 16	glimepiride)16	EASY TOUCH LANCETS 23G ... 63
doxepin hcl CONC 16	DULERA 100 MCG/ACT-5	EASY TOUCH LANCETS 26G ... 63
doxycycline (monohydrate) CAPS 50	MCG/ACT, 200 MCG/ACT-5	EASY TOUCH LANCETS 28G ... 63
MG, 100 MG 90	MCG/ACT 12	EASY TOUCH LANCETS
doxycycline (monohydrate) TABS 50	DULERA 50 MCG/ACT-5 MCG/ACT .	28G/TWIST 63
MG, 100 MG 90	12	EASY TOUCH LANCETS 30G ... 63
doxycycline hyclate CAPS 90	duloxetine hcl CPEP 20 MG, 30 MG,	EASY TOUCH LANCETS
doxycycline hyclate TABS 100 MG	40 MG 16	30G/TWIST 63
90	duloxetine hcl CPEP 60 MG 16	EASY TOUCH LANCETS 32G ... 63
doxylamine succinate (sleep) 60	DUPIXENT SOAJ 48	EASY TOUCH LANCETS
doxylamine-pyridoxine TBEC 21	DUPIXENT SOSY 200 MG/1.14ML,	32G/TWIST 63
droperidol SOLN 2.5 MG/ML 10	300 MG/2ML 48	EASY TOUCH LANCETS
DROPLET LANCETS ULTRA THIN	DUPIXENT SOSY 300 MG/2ML .. 48	33G/TWIST 63
30G 63	dutasteride 56	EASY TOUCH SAFETY LANCETS
DROPLET PERSONAL LANCETS	dutasteride-tamsulosin hcl 56	21G 63
30G 63	DYANAVEL XR TBCR 1	EASY TOUCH SAFETY LANCETS
DROPSAFE ACTI-LANCE 23G ... 63	DYMISTA SUSP (azelastine hcl-	23G 63
DROPSAFE ALCOHOL PREP ... 69	fluticasone propionate) 81	EASY TOUCH SAFETY LANCETS
DROPSAFE MEDLANCE LANCET	DYSPORT 82	26G 64
30G 63	E.E.S. GRANULES SUSR	EASY TOUCH SAFETY LANCETS
drospirenone-ethinyl estradiol 38	(erythromycin ethylsuccinate) 61	28G 64
drospirenone-ethinyl estradiol-	EASIVENT MASK LARGE MISC .. 71	EBASE CONTROLLER KIT MISC .71
levomefolate calcium 38	EASIVENT MASK MEDIUM MISC 71	EBGLYSS SOAJ 48
DROXIA CAPS 58	EASIVENT MASK SMALL MISC .. 71	EBGLYSS SOSY 48
droxidopa 96	EASIVENT MISC 71	econazole nitrate CREA 43
DRUG MART ON-THE-GO LANCET	EASY COMFORT ALCOHOL PADS	EDURANT 25 MG (rilpivirine hcl) .. 32
30G 63	69	EDURANT PED PO 2.5 MG 32
DRUG MART UNILET LANCETS	EASY COMFORT LANCETS 63	efavirenz CAPS 200 MG 32
28G 63	EASY COMFORT LANCETS TWIST	efavirenz CAPS 50 MG 32
DRUG MART UNILET LANCETS	TOP 63	efavirenz TABS 33
30G 63	EASY TOUCH ALCOHOL PREP	efavirenz-emtricitabine-tenofovir
DRUG MART UNILET LANCETS	MEDIUM 69	disoproxil fumarate 33
33G 63	EASY TOUCH LANCETS 21G ... 63	efavirenz-lamivudine-tenofovir
DUETACT (pioglitazone hcl-		

disoproxil fumarate	33	ELEVIDYS 33.5-34.4 KG	82	ELEVIDYS 63.5-64.4 KG	82
EFFER-K TBEF 25 MEQ	75	ELEVIDYS 34.5-35.4 KG	82	ELEVIDYS 64.5-65.4 KG	82
ELAPRASE	53	ELEVIDYS 35.5-36.4 KG	82	ELEVIDYS 65.5-66.4 KG	82
ELELYSO	58	ELEVIDYS 36.5-37.4 KG	82	ELEVIDYS 66.5-67.4 KG	82
ELEPSIA XR TB24	13	ELEVIDYS 37.5-38.4 KG	82	ELEVIDYS 67.5-68.4 KG	82
eletriptan hydrobromide	74	ELEVIDYS 38.5-39.4 KG	82	ELEVIDYS 68.5-69.4 KG	82
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	28
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		
ELEVIDYS 30.5-31.4 KG	81	ELEVIDYS 60.5-61.4 KG	82		
ELEVIDYS 31.5-32.4 KG	82	ELEVIDYS 61.5-62.4 KG	82		
ELEVIDYS 32.5-33.4 KG	82	ELEVIDYS 62.5-63.4 KG	82		

EMBECTA PEN NEEDLE NANO 2 GEN	70	SOLN 11 MG/ML	79	EPIVIR TABS 150 MG (lamivudine) 33	
EMBECTA PEN NEEDLE ULTRAFINE	70	ENGERIX-B SUSP 20 MCG/ML ...	93	EPIVIR TABS 300 MG (lamivudine) 33	
EMBRACE LANCETS ULTRA THIN 30G	64	enoxaparin sodium SOLN IJ 300 MG/3ML	13	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	58
EMBRACE PRESSURE ACTIVATED 21G	64	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	13	epoprostenol sodium	37
EMBRACE PRESSURE ACTIVATED 28G	64	enoxaparin sodium SOSY 30 MG/0.3ML	13	EPRONTIA SOLN 25 MG/ML (topiramate)	13
EMCYT	28	enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML	13	EQ SPACE CHAMBER ANTI- STATIC DEVI	71
EMGALITY (300 MG DOSE) SOSY 74		enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	13	EQ SPACE CHAMBER ANTI- STATIC L DEVI	71
EMGALITY SOAJ	74	ENTADFI	56	EQ SPACE CHAMBER ANTI- STATIC M DEVI	71
EMGALITY SOSY	74	ENTRESTO CPSP	37	EQ SPACE CHAMBER ANTI- STATIC S DEVI	71
EMPLICITI	27	ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan)	37	EQL ALCOHOL SWABS	69
emtricitabine CAPS	33	ENTYVIO PEN SOAJ	55	ERBITUX	27
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	33	EPCLUSA PACK	34	ergocalciferol CAPS	96
emtricitabine-tenofovir disoproxil fumarate	33	EPCLUSA TABS	34	ergoloid mesylates TABS	89
EMTRIVA CAPS (emtricitabine) ...	33	EPIDUO FORTE GEL (adapalene- benzoyl peroxide)	42	ergotamine w/ caffeine TABS	74
EMTRIVA SOLN	33	EPIFOAM FOAM	46	eribulin mesylate	30
EMVERM CHEW	9	epinastine hcl (ophth)	85	ERIVEDGE	27
enalapril maleate & hydrochlorothiazide	24	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML	96	ERLEADA 60 MG	28
enalapril maleate TABS	23	epinephrine (anaphylaxis) SOAJ ..	96	erlotinib hcl	27
ENBREL MINI SOCT	5	epinephrine hcl (nasal)	81	ertapenem sodium IJ	25
ENBREL SOLN	5	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))	96	ERYPED 200 SUSR (erythromycin ethylsuccinate)	61
ENBREL SOSY	5	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis))	96	erythromycin (acne aid) GEL	42
ENBREL SURECLICK SOAJ	5	EPIVIR SOLN (lamivudine)	33	erythromycin (acne aid) SOLN	42
ENCARE SUPP 100 MG	95			erythromycin (ophth)	84
ENFAMIL POLY-VI-SOL-IRON					

ERYTHROMYCIN84	ethosuximide CAPS14	EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide) 24
erythromycin base CPEP61	ethosuximide SOLN14	EXONDYS 51 82
erythromycin base TABS 61	ethynodiol diacet & eth estrad38	EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG 15
erythromycin base TBEC 61	etodolac CAPS5	EXXUA TITRATION PACK TB24 PO 18.2 MG15
erythromycin ethylsuccinate SUSR 61	etodolac TABS 5	EYLEA SOLN84
erythromycin ethylsuccinate TABS 61	etodolac TB245	EYSUVIS SUSP 85
ERZOFRI 351 MG/2.25ML 31	etonogestrel-ethinyl estradiol 39	ezetimibe23
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML31	etoposide CAPS 30	ezetimibe-simvastatin22
ESCITALOPRAM OXALATE CAPS PO 15 MG15	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML30	FABRAZYME53
escitalopram oxalate SOLN15	etravirine 100 MG33	famciclovir35
escitalopram oxalate TABS15	etravirine 200 MG33	famotidine TABS 10 MG91
esomeprazole magnesium CPDR . 91	EUFLEXXA SOSY 80	famotidine TABS 20 MG, 40 MG .. 91
esomeprazole magnesium PACK . 91	EULEXIN28	FANAPT TITRATION PACK B31
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT 57	EVENITY52	FANAPT TITRATION PACK C31
estazolam60	everolimus (immunosuppressant) .76	FARXIGA TABS PO (dapagliflozin) 19
estradiol & norethindrone acetate TABS54	everolimus TABS28	FASENRA PEN SOAJ10
estradiol PTTW54	everolimus TBSO28	FASENRA SOSY 10 MG/0.5ML ...10
estradiol PTWK54	EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG 90	FASTEP COVID-19 ANTIGEN TEST KIT50
estradiol TABS54	EVOMELA IV26	FEIBA57
estradiol vaginal CREA96	EVOTAZ33	felbamate SUSP 14
estradiol vaginal TABS96	EVRYSDI82	felbamate TABS14
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG 54	EVRYSDI PO 5 MG82	felodipine36
eszopiclone60	EXELON 13.3 MG/24HR (rivastigmine)88	fenofibrate CAPS 23
ethambutol hcl TABS26	EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)88	fenofibrate micronized 134 MG, 200 MG 23
	exemestane28	fenofibrate micronized 30 MG, 43 MG, 130 MG 23
	exenatide SOPN 10 MCG/0.04ML .17	
	exenatide SOPN 5 MCG/0.02ML ..18	

fenofibrate micronized 67 MG 23	FIBRICOR (fenofibric acid) 23	FLUBLOK SOSY 93
fenofibrate TABS 40 MG, 120 MG .23	FIBRYGA 57	FLUCELVAX QUADRIVALENT SUSY 93
fenofibrate TABS 54 MG 23	FIFTY50 ALCOHOL PREP 69	FLUCELVAX SUSP 93
fenofibric acid 23	FIFTY50 SAFETY SEAL LANCETS . 64	FLUCELVAX SUSY 93
FENOGLIDE TABS (fenofibrate) .. 23	FIFTY50 UNILET LANCETS 33G .64	fluconazole SUSR 21
FENSOLVI (6 MONTH) SC 53	FILTER AIR PP MISC 71	fluconazole TABS 100 MG 21
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR 6	finasteride 56	fluconazole TABS 150 MG 21
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR 6	FINGERSTIX LANCETS 64	fluconazole TABS 200 MG 21
FERRETTIS TABS 59	finingolmod hcl 88	fluconazole TABS 50 MG 21
ferric citrate 56	FIRDAPSE 26	fludarabine phosphate SOLN 26
FERRIPROX SOLN 20	FIRMAGON (240 MG DOSE) 28	fludarabine phosphate SOLR 26
ferrous fumarate TABS 59	FIRMAGON 80 MG 28	fludrocortisone acetate TABS 41
ferrous fumarate-fa-b complex-c-zn- mg-mn-cu TABS 59	FIRST-PROGESTERONE VGS SUPP 96	FLULAVAL SUSY 93
ferrous gluconate TABS 59	flavoxate hcl 92	FLUMIST 93
ferrous sulfate dried TBCR 59	FLEBOGAMMA DIF SOLN 5 GM/100ML, 10 GM/200ML, 20 GM/400ML 86	FLUMIST QUADRIVALENT 94
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML 59	flecainide acetate 10	flunisolide (nasal) 81
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML 59	FLEQSUVY SUSP (baclofen) 80	fluocinolone acetate (otic) 86
ferrous sulfate TABS 59	FLEXICHAMBER DEVI 72	fluocinolone acetate CREA 46
ferrous sulfate TBEC 325 MG 59	FLORAVITA MINI TABS 77	fluocinolone acetate OIL 46
ferrous sulfate TBEC 59	FLORENTA CAPS 19	fluocinolone acetate OINT 46
fesoterodine fumarate 92	FLORRAGUT CAPS 19	fluocinolone acetate SOLN 46
FEVERALL JUNIOR STRENGTH SUPP 6	FLORRAXIS CAPS 19	fluocinonide CREA 0.05 % 46
fexofenadine hcl SUSP 22	FLOWFLEX COVID-19 AG HOME TEST KIT 50	fluocinonide CREA 0.1 % 46
fexofenadine hcl TABS 180 MG ... 22	FLUAD 93	fluocinonide emulsified base 46
fexofenadine hcl TABS 60 MG 22	FLUAD QUADRIVALENT 93	fluocinonide GEL 46
	FLUARIX QUADRIVALENT SUSY 93	fluocinonide OINT 46
	FLUARIX SUSY 93	fluocinonide SOLN 46
		FLUORIDEX DAILY RENEWAL CONC 0.63 % 76
		fluorometholone (ophth) SUSP 85

fluorouracil (topical) CREA 0.5 % ..44	fluticasone propionate OINT46	fosinopril sodium 23
fluorouracil (topical) CREA 5 %44	fluticasone-salmeterol AEPB 100	FOSRENOL CHEW (lanthanum carbonate)56
fluorouracil (topical) SOLN44	MCG/ACT-50 MCG/ACT, 250	
fluoxetine hcl (pmdd) TABS 10 MG	MCG/ACT-50 MCG/ACT, 500	FRAGMIN SOLN 10000 UNIT/4ML
89	MCG/ACT-50 MCG/ACT12	13
fluoxetine hcl (pmdd) TABS 20 MG	fluticasone-salmeterol AERO12	FREESTYLE LANCETS64
89	fluvastatin sodium CAPS23	FREESTYLE LIBRE 14 DAY
fluoxetine hcl CAPS15	fluvastatin sodium TB2423	READER64
fluoxetine hcl CPDR15	fluvoxamine maleate CP2415	FREESTYLE LIBRE 14 DAY
fluoxetine hcl SOLN15	fluvoxamine maleate TABS15	SENSOR64
FLUOXETINE HCL TABS (fluoxetine	FLUZONE HIGH-DOSE	FREESTYLE LIBRE 2 PLUS
hcl)15	QUADRIVALENT94	SENSOR64
fluoxetine hcl TABS 10 MG15	FLUZONE HIGH-DOSE SUSY94	FREESTYLE LIBRE 2 READER ..64
fluoxetine hcl TABS 20 MG15	FLUZONE QUADRIVALENT SUSY	FREESTYLE LIBRE 2 SENSOR ..64
fluoxetine hcl TABS 60 MG15	94	FREESTYLE LIBRE 3 PLUS
fluphenazine decanoate31	FLUZONE SUSP94	SENSOR64
fluphenazine hcl TABS31	FLUZONE SUSY94	FREESTYLE LIBRE 3 READER ..64
flurandrenolide CREA46	FLYP HYPERSONIQ CARTRIDGE	FREESTYLE LIBRE 3 SENSOR ..64
flurandrenolide LOTN46	MISC72	FREESTYLE LIBRE READER64
flurazepam hcl60	FOCALIN XR CP24	FREESTYLE UNISTICK II LANCETS
flurbiprofen sodium85	(dexmethylphenidate hcl)2	64
flurbiprofen TABS5	folic acid TABS 1 MG58	frovatriptan succinate74
fluticasone propionate (inhalation)	folic acid TABS 400 MCG, 800 MCG .	FT LICE-BEDBUG-MITE AERO 0.5
AEPB11	58	%49
fluticasone propionate (nasal) SUSP .	FOLOTYN26	FULL KIT NEBULIZER SET MISC 72
81	fondaparinux sodium13	FULPHILA58
fluticasone propionate CREA 0.05 %	FONDCIRCLE SINGLE USE	furosemide SOLN PO 8 MG/ML, 10
46	LANCETS64	MG/ML51
fluticasone propionate hfa 110	FORA LANCETS64	furosemide TABS51
MCG/ACT, 220 MCG/ACT11	FORFIVO XL TB24 (bupropion hcl)	FYLNETRA58
fluticasone propionate hfa 44	15	
MCG/ACT11	fosamprenavir calcium TABS33	
fluticasone propionate LOTN46	fosinopril sodium &	
	hydrochlorothiazide24	

gabapentin SOLN	13	gemfibrozil TABS	23	GLUCAGON EMERGENCY SOLR IJ 1 MG (glucagon)	17
gabapentin TABS 600 MG, 800 MG 13		GEMTESA	92	glucagon SOLR IJ 1 MG	17
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	80	GENABIO COVID-19 RAPID TEST KIT	50	GLUCOCOM LANCETS 28G	64
GALAFOLD	53	GENOTROPIN CART SC	52	GLUCOCOM LANCETS 30G	64
galantamine hydrobromide CP24 ..	88	GENOTROPIN MINISQUICK 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	GNP ALCOHOL SWABS	69
GARDASIL 9 SUSP 0.5 ML	94	MG	2	GNP HOME LICE/BEDBUG/DUST MITE AERO 0.5 %	49
GARDASIL 9 SUSY 0.5 ML	94	GLASSIA SOLN	89	GNP STERILE LANCETS 28G ...	64
GAS RELIEF LIQD PO 40 MG/0.6ML	54	glatiramer acetate SOSY	89	GNP STERILE LANCETS 30G ...	64
gatifloxacin (ophth)	84	glimepiride 1 MG, 2 MG	19	GNP STERILE LANCETS 33G ...	64
GATTEX	56	glimepiride 3 MG	19	GOJJI STERILE LANCETS	64
GAUZE SPONGES	64	glimepiride 4 MG	19	GOODSENSE ALCOHOL SWABS 69	
GAZYVA	27	glipizide TABS 2.5 MG	19	GORDONS UREA CREA 40 % ...	48
gefitinib	27	glipizide TABS 5 MG, 10 MG	19	GOTOKNOW COVID-19 ANTIGEN RAPI KIT	50
GEL-ONE	80	glipizide TB24	19	granisetron hcl TABS	21
GELSYN-3 SOSY	80	glipizide-metformin hcl	16	GRANIX SOLN 300 MCG/ML	58
		GLOBAL ALCOHOL PREP EASE	69	GRANIX SOSY	58
		GLOBAL INJECT EASE LANCETS 28G	64		
		GLOBAL INJECT EASE LANCETS 30G	64		

griseofulvin microsize SUSP21	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML94	HUMALOG KWIKPEN SOPN 100 UNIT/ML18
griseofulvin microsize TABS21	H-E-B INCONTROL ALCOHOL ...69	HUMALOG MIX 50/50 KWIKPEN SUPN18
griseofulvin ultramicrosize21	H-E-B INCONTROL LANCETS 28G . 65	HUMALOG MIX 50/50 SUSP18
guaifenesin-codeine SOLN41	H-E-B INCONTROL LANCETS 30G . 65	HUMALOG MIX 75/25 KWIKPEN SUPN18
guanfacine hcl (adhd)2	H-E-B INCONTROL LANCETS 33G . 65	HUMALOG MIX 75/25 SUSP18
guanfacine hcl24	HEMATINIC PLUS VIT/MINERALS TABS59	HUMALOG SOLN IJ18
GVOKE KIT SOLN17	HEMGENIX57	HUMALOG TEMPO PEN SOPN .. 18
GYNAZOLE-195	HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML57	HUMATE-P SOLR57
HADLIMA PUSHTOUCH SOAJ4	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT57	HUMIRA (2 PEN) AJKT 40 MG/0.8ML4
HADLIMA SOSY4	HEMORRHOIDAL 0.25 %-85.5 %-3 %8	HUMIRA (2 PEN) AJKT4
HAEMOLANCE64	HEPAGAM B SOLN IJ86	HUMIRA (2 SYRINGE) PSKT4
HAEMOLANCE LOW FLOW LANCETS64	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML13	HUMIRA-CD/UC/HS STARTER AJKT 40 MG/0.8ML4
HAEMOLANCE PLUS64	HEPLISAV-B SOSY94	HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML4
HAEMOLANCE PLUS HIGH FLOW . 64	HERCEPTIN HYLECTA28	HUMIRA-PED>=40KG UC STARTER AJKT4
HAEMOLANCE PLUS LOW FLOW . 64	HIBERIX SOLR IJ92	HUMIRA-PS/UV/ADOL HS STARTER AJKT4
HAEMOLANCE PLUS MAX FLOW 64	HIZENTRA SOLN86	HUMIRA-PSORIASIS/UEIT STARTER AJKT4
HAEMOLANCE PLUS PEDIATRIC FLOW64	HIZENTRA SOSY 10 GM/50ML ...86	HUMULIN 70/30 SUSP18
halcinonide CREA46	HM STERILE ALCOHOL PREP ..69	HUMULIN N SUSP18
halobetasol propionate CREA46	HULIO (2 PEN) AJKT4	HUMULIN R SOLN IJ18
halobetasol propionate OINT46	HULIO (2 SYRINGE) PSKT4	HUMULIN R U-500 KWIKPEN SOPN SC18
HALOG CREA (halcinonide)46	HUMALOG JUNIOR KWIKPEN SOPN18	HYALGAN SOLN80
haloperidol decanoate31		HYALGAN SOSY80
haloperidol lactate CONC31		HYCANTIN CAPS30
haloperidol lactate SOLN31		
haloperidol TABS31		
HARVONI PACK34		
HARVONI TABS34		

hydralazine hcl TABS25	hydrocortisone (topical) OINT 2.5 % . 47	hydroxyzine pamoate CAPS 50 MG 10
HYDRALYN GEL 2 %46	hydrocortisone (topical) SOLN 1 % 47	HYMOVIS 80
HYDRAVEX GEL 2 %46	hydrocortisone acetate (topical) CREA 2.5 %47	hyoscyamine sulfate ELIX 91
hydrochlorothiazide CAPS52	hydrocortisone acetate (topical) OINT47	hyoscyamine sulfate SOLN PO 0.125 MG/ML 91
hydrochlorothiazide TABS 25 MG, 50 MG 52	HYDROCORTISONE ACETATE CREA47	hyoscyamine sulfate SUBL 0.125 MG91
hydrocodone bitartrate CP126	hydrocortisone butyrate CREA 47	hyoscyamine sulfate TABS 0.125 MG91
hydrocodone bitartrate-homatropine methylbromide SOLN41	hydrocortisone butyrate LOTN 47	hyoscyamine sulfate TB12 0.375 MG 91
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 7	hydrocortisone butyrate OINT 47	hyoscyamine sulfate TBDP 0.125 MG91
hydrocodone-acetaminophen TABS 325 MG-10 MG7	hydrocortisone butyrate SOLN 47	HYPERHEP B SOLN IM86
hydrocodone-acetaminophen TABS 325 MG-5 MG 7	HYDROCORTISONE GEL 2 % ... 47	HYPERHEP B SOSY 110 UNIT/0.5ML86
hydrocodone-acetaminophen TABS 325 MG-7.5 MG7	hydrocortisone TABS 41	HYPERRHO MINI-DOSE SOSY IM 250 UNIT86
hydrocortisone (intrarectal)8	hydrocortisone vaginal 96	HYPERRHO SOSY IM 1500 UNIT 86
hydrocortisone (rectal) EX 1 %9	hydrocortisone valerate CREA 47	HYQVIA 87
hydrocortisone (rectal) EX 2.5 % ...9	hydrocortisone valerate OINT 47	HYRIMOZ SOAJ 4
hydrocortisone (topical) CREA 0.5 % 46	hydrocortisone w/acetic acid 86	HYRIMOZ SOSY4
hydrocortisone (topical) CREA 1 % 46	HYDROMORPHONE HCL SUPP ..6	HYRIMOZ-CROHNS/UC STARTER SOAJ 4
hydrocortisone (topical) CREA 2.5 % 46	hydromorphone hcl TABS6	HYRIMOZ-PED<40KG CROHN STARTER SOSY4
hydrocortisone (topical) LOTN 1 % 46	hydromorphone hcl TB24 6	HYRIMOZ-PED>=40KG CROHN START SOSY 4
hydrocortisone (topical) LOTN 2.5 % . 46	HYDROXATE GEL47	HYRIMOZ-PLAQ PSOR/UVEIT START SOAJ 4
hydrocortisone (topical) OINT 0.5 % . 47	HYDROXYM GEL47	HYRIMOZ-PLAQUE PSORIASIS START SOAJ 4
hydrocortisone (topical) OINT 1 % 47	hydroxyurea29	HY-VEE LANCETS65
	hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML 10	
	hydroxyzine hcl SYRP 10	
	hydroxyzine hcl TABS 10	
	hydroxyzine pamoate CAPS 25 MG, 100 MG10	

HY-VEE THIN LANCETS65	ILUVIEN85	INFANRIX90
ibandronate sodium SOLN52	imatinib mesylate TABS28	INGREZZA CAPS88
ibandronate sodium TABS52	IMBRUVICA CAPS 140 MG29	INGREZZA CPSP88
IBRANCE CAPS 100 MG, 125 MG 28	IMBRUVICA CAPS 70 MG29	INLYTA27
IBSRELA55	IMBRUVICA TABS29	INNOSPIRE REPLACEMENT FILTER MISC72
ibuprofen CHEW5	IMCIVREE SOLN SC53	INPEFA37
ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML5	imipramine hcl TABS16	INSPIREASE MISC72
ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG5	imipramine pamoate16	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/0.5ML74	INSULIN GLARGINE-YFGN SOPN 18
icatibant acetate SOSY57	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML74	INSULIN LISPRO (1 UNIT DIAL) SOPN18
ICLUSIG 15 MG, 45 MG28	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML74	INSULIN LISPRO JUNIOR KWIKPEN SOPN18
ID NOW COVID-1950	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate)74	INSULIN LISPRO PROT & LISPRO SUPN18
ID NOW COVID-19 2.0 CONTROL 50	IMLYGIC30	INSULIN LISPRO SOLN IJ18
ID NOW COVID-19 2.0 TEST50	IMOVAX RABIES SUSR94	INSULIN SYRINGES70
ID NOW COVID-19 CONTROL ...50	IMULDOSA SOLN IV 130 MG/26ML . 55	INTELENCE (etravirine)33
IDACIO (2 PEN) AJKT4	IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML44	INTELENCE33
IDACIO (2 SYRINGE) PSKT4	IN TOUCH STERILE LANCETS 30G65	INTELENCE 200 MG (etravirine) ..33
IDACIO-CROHNS/UC STARTER AJKT4	INCRELEX53	INTELISWAB COVID-19 RAPID TEST KIT50
IDACIO-PSORIASIS STARTER AJKT4	indapamide TABS 1.25 MG, 2.5 MG . 52	INVEGA HAFYERA31
IDELVION57	INDICAID COVID-19 RAPID TEST KIT50	INVEGA SUSTENNA31
IDVYNZO TABS PO33	indomethacin CAPS 25 MG, 50 MG 5	INVEGA TRINZA31
IGALMI FILM60	indomethacin CPCPR5	INVOKANA19
IHEALTH COVID-19 RAPID TEST KIT50		IPOL IJ94
ILEVRO85		ipratropium bromide (nasal) 0.03 %

81	ivermectin	9	KEMOPLAT SOLN	26	
ipratropium bromide (nasal) 0.06 %	IXCHIQ	94	KENALOG AERS (triamcinolone acetonide (topical))	47	
81	IXEMPRA KIT	30	KESIMPTA	89	
ipratropium bromide hfa 17 MCG/ACT	IXIARO	94	ketoconazole (topical) CREA	43	
11	IXINITY SOLR	57	ketoconazole (topical) SHAM 2 %	43	
ipratropium bromide SOLN 0.02 %	IYUZEH SOLN	85	KETONE TEST STRP	50	
12	JAKAFI	29	ketoprofen CAPS 50 MG, 75 MG	5	
irbesartan	JALYN (dutasteride-tamsulosin hcl)	56	ketoprofen CP24	5	
irbesartan-hydrochlorothiazide	24	JARDIANCE	19	ketorolac tromethamine (ophth) 0.4 %	85
irinotecan hcl	30	JASCAYD TABS PO 9 MG, 18 MG 90	ketorolac tromethamine (ophth) 0.5 %	85	
IRON CHEWS PEDIATRIC CHEW 59	JENTADUETO TABS	16	ketorolac tromethamine TABS	5	
IRON TABS 28 MG	59	JEVTANA	30	KETOSTIX STRP	50
ISENTRESS CHEW 100 MG	33	JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	57	ketotifen fumarate (ophth) 0.035 % 85	
ISENTRESS CHEW 25 MG	33	JOURNAVX	6	KEY-E CHEW	96
ISENTRESS PACK	33	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	23	KEYTRUDA	27
ISENTRESS TABS	33	JYNNEOS	94	KHAPZORY 175 MG	29
isoniazid SYRP	26	KADCYLA	27	KINNEY LANCETS	65
isoniazid TABS	26	KALBITOR	58	KINNEY THIN LANCETS	65
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	9	KALETRA SOLN	33	KINRIX SUSY	90
isosorbide mononitrate TABS	9	KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir)	33	KIRSTY SOLN IJ 100 UNIT/ML	18
isosorbide mononitrate TB24	9	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)	33	KIRSTY SOPN SC 100 UNIT/ML	18
isotretinoin 10 MG, 20 MG, 40 MG	42	KALYDECO PACK 50 MG, 75 MG	89	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin)	3
isradipine CAPS	36	KALYDECO TABS	89	KLOR-CON TBCR 8 MEQ (potassium chloride)	75
ISTALOL SOLN (timolol maleate (ophth))	83	KANJINTI 420 MG	27	KLOXXADO LIQD	21
ITCH RELIEF CREA	44	KANUMA	53	KOATE SOLR	57
itraconazole CAPS	22	KCENTRA	57	KOATE-DVI SOLR 500 UNIT, 1000	
itraconazole SOLN	22				
ITVISMA SUSP IT	82				
ivermectin (pediculicide)	49				

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

LEUPROLIDE ACETATE- BUPIVACAINE	28	(continuous)	38	LITETOUCH LANCETS	65
levabuterol hcl	12	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 MASK LARGE MISC	72
levabuterol hcl 1.25 MG/0.5ML	12	levothyroxine sodium TABS	90	LITETOUCH MASK MEDIUM MISC .	72
levabuterol tartrate	12	LEVULAN KERASTICK SOLR	44	LITETOUCH MASK SMALL MISC	72
levamlodipine maleate	36	LIALDA TBEC (mesalamine)	55	LITFULO	48
LEVEMIR FLEXPEN SOPN	18	LIBERTY MEDICAL LANCETS ...	65	lithium	30
LEVEMIR SOLN	18	LIBTAYO	27	lithium carbonate CAPS	30
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	13	lidocaine CREA 4 %	49	lithium carbonate TABS	30
levetiracetam TABS	13	LIDOCAINE CREA	49	lithium carbonate TBCR	30
levetiracetam TB24	13	lidocaine hcl (mouth-throat) 2 % ...	76	LITHOBID TBCR (lithium carbonate) .	30
levobunolol hcl 0.5 %	83	lidocaine hcl CREA 3 %	49	LIVE BETTER LANCET SUPER THIN	65
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	53	lidocaine hcl CREA 4 %	48	LO LOESTRIN FE TABS	38
levocarnitine (metabolic modifiers) TABs	53	lidocaine hcl GEL 2 %	49	LOCOID LIPOCREAM	47
levocetirizine dihydrochloride SOLN 22		lidocaine hcl PRSY	49	LOCOID LOTN (hydrocortisone butyrate)	47
levofloxacin (ophth) 0.5 %	84	lidocaine-prilocaine CREA	49	LOKELMA	76
levofloxacin SOLN PO	54	LIDOMAX GEL 2 %	49	LONSURF	28
levofloxacin TABS	54	LILETTA (52 MG)	40	loperamide hcl CAPS	20
levoleucovorin calcium SOLN	29	LINZESS	55	loperamide hcl TABS	20
levoleucovorin calcium SOLR	29	LIORESAL SOLN IT	80	lopinavir-ritonavir SOLN	33
levonorgestrel & eth estradiol TABS 38		liothyronine sodium TABS	90	lopinavir-ritonavir TABS 25 MG-100 MG	33
levonorgestrel (emergency oc) 1.5 MG	40	LIPOFEN CAPS (fenofibrate)	23	lopinavir-ritonavir TABS 50 MG-200 MG	33
levonorgestrel-eth estradiol (triphasic)	38	liraglutide	18	LOPRESSOR SOLN PO 10 MG/ML .	35
levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	38	lisdexamfetamine dimesylate CAPS 1		LOPRESSOR TABS 12.5 MG (metoprolol tartrate)	35
levonorgestrel-ethinyl estradiol		lisdexamfetamine dimesylate CHEW . 1		loratadine CAPS	22
		lisinopril & hydrochlorothiazide ...	24	loratadine CHEW	22
		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	23		
		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 TDBP 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		
LORBRENA	29	LUZU (luliconazole)	43	EXTRA		65
LOREEV XR CS24	10	LYBALVI	88	MEDICHOICE SAFETY LANCET		
losartan potassium &		LYFGENIA	58	NORM		65
hydrochlorothiazide	24	LYRA DIRECT SARS-COV-2 ASSAY		MEDLANCE PLUS EXTRA 21G ..		65
losartan potassium	24		51	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	51	60		medroxyprogesterone acetate		
LUCIRA COVID-19 ALL-IN-ONE KIT		magnesium hydroxide SUSP 7.75 %,		(contraceptive) SUSP IM		40
51		400 MG/5ML, 1200 MG/15ML, 2400		medroxyprogesterone acetate		
luliconazole	43	MG/30ML	60	(contraceptive) SUSY IM		40
LUMAVEX CAPS	77	magnesium oxide (mg supplement)		medroxyprogesterone acetate 2.5		
LUMIZYME	53	TABS	75	MG, 5 MG, 10 MG		87
LUNAVIRA CAPS	77	magnesium oxide TABS 400 MG ...	9	mefloquine hcl		26
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) .		MAXI-TUSS PE ELIX 5 MG/5ML-2		MEIJER LANCETS UNIVERSAL 30G		65
53		MG/5ML	41			65

MEIJER LANCETS UNIVERSAL 33G65	METAVAX TABS 1 MG77	METHYLIN SOLN (methylphenidate hcl)2
MEKINIST TABS29	metaxalone80	methylphenidate hcl CHEW2
MEKTOVI29	METAXALONE 640 MG80	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG2
melatonin TABS 3 MG, 5 MG2	metformin hcl SOLN17	methylphenidate hcl CP24 60 MG ..2
meloxicam TABS5	metformin hcl TABS 500 MG, 850 MG, 1000 MG17	methylphenidate hcl CP242
melphalan hcl IV26	metformin hcl TABS 625 MG, 750 MG17	methylphenidate hcl CPR2
memantine hcl CP2488	metformin hcl TB24 500 MG, 1000 MG17	methylphenidate hcl SOLN2
memantine hcl SOLN88	metformin hcl TB24 500 MG, 750 MG17	methylphenidate hcl TABS2
memantine hcl TABS88	methadone hcl TABS 10 MG6	methylphenidate hcl TB242
MENQUADFI 0.5 ML92	methadone hcl TABS 5 MG6	methylphenidate hcl TBCR 10 MG, 20 MG2
MENVEO SOLN92	methamphetamine hcl1	methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG2
MENVEO SOLR92	methazolamide TABS51	methylphenidate hcl TBCR 45 MG, 63 MG2
meperidine hcl SOLN PO 50 MG/5ML6	methenamine mandelate25	methylprednisolone TABS 4 MG, 8 MG41
meperidine hcl TABS 50 MG6	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 81.6 MG . 25	methylprednisolone TBP41
meprobamate10	methimazole TABS90	methyltestosterone TABS8
mercaptopurine SUSP 2000 MG/100ML26	methocarbamol TABS 1000 MG ..80	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML55
mercaptopurine TABS26	methocarbamol TABS 500 MG80	metoclopramide hcl TABS 10 MG .55
MERILOG SOLN SC 100 UNIT/ML 18	methocarbamol TABS 750 MG, 1000 MG80	metoclopramide hcl TABS 5 MG ..55
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML18	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML26	metolazone52
mesalamine ENEM55	methotrexate sodium TABS 2.5 MG 26	metoprolol & hydrochlorothiazide TABS24
mesalamine SUPP55	methsuximide14	metoprolol succinate TB24 200 MG 35
mesalamine TBEC 1.2 GM55	methyldopa TABS24	metoprolol succinate TB24 25 MG, 50 MG, 100 MG35
mesalamine TBEC 800 MG55	methylergonovine maleate TABS ..86	metoprolol tartrate TABS 100 MG .35
mesalamine w/ cleanser55		
mesna SOLN29		
mesna TABS29		
MESNEX TABS29		

metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG	35	midazolam hcl SOLN IJ	60	MOBILE LANCETS 30G	65
metoprolol tartrate TABS 25 MG, 50 MG	35	MIDAZOLAM HCL SOLN IJ	60	MODERNA COVID-19 VAC 6M-11Y SUSP	94
metronidazole (topical) CREA	49	midodrine hcl	96	MODERNA COVID-19 VAC 6M-11Y SUSY	94
metronidazole (topical) GEL 0.75 % 49		MIEBO	85	moexipril hcl	23
metronidazole (topical) LOTN	49	mifepristone (hyperglycemia)	17	mometasone furoate (nasal) SUSP 81	
metronidazole TABS 250 MG, 500 MG	25	miglitol	16	mometasone furoate CREA	47
metronidazole vaginal	95	miglustat	58	mometasone furoate OINT	47
metyrosine	24	milnacipran hcl MISC	88	mometasone furoate SOLN	47
MICONAZOLE 7 SUPP 100 MG ..	95	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG	88	MONISTAT CARE INSTANT ITCH RLF 1 %	96
miconazole nitrate (topical) CREA .43		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		MONOLET LANCETS	65
miconazole nitrate vaginal CREA 2 %	95	MINIELITE FILTER REPLACEMENTS MISC	72	MONOLET OPD LANCETS	65
miconazole nitrate vaginal CREA 4 %	95	minocycline hcl CAPS	90	MONOLETTOR SAFETY LANCETS 65	
miconazole nitrate vaginal KIT	95	minoxidil 2.5 MG, 10 MG	25	MONOVISC	80
miconazole nitrate vaginal SUPP 100 MG	95	mirabegron TB24	92	montelukast sodium CHEW	11
miconazole nitrate vaginal SUPP 200 MG	95	MIRCERA	58	montelukast sodium PACK	11
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	86	MIRENA (52 MG)	40	montelukast sodium TABS	11
MICROBALANCE CAPS	19	mirtazapine TABS	14	morphine sulfate beads	6
MICROCHAMBER DEVI	72	mirtazapine TBDP	15	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	7
MICROCHAMBER MISC	72	misoprostol	92	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML	7
MICROFLOR 33 CAPS	19	mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML	28	morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML	7
MICROLET LANCETS	65	MIUDELLA	39	morphine sulfate SUPP	7
MICROLET NEXT LANCETS	65	MI-VITE RX TABS 1 MG	77	morphine sulfate TABS	7
MICROSPACER MISC	72	MM TWIST LANCETS	65	morphine sulfate TBCR	7
MICROVARA CPDR	19	M-M-R II SOLR	94	MOTPOLY XR CP24	13

MOUNJARO	18	MULTI-VITAMIN/IRON TABS 400	naloxone hcl LIQD	21
MOVANTIK	55	UNIT-60 MG-2 MG-400 MCG-6	naloxone hcl SOCT	21
moxifloxacin hcl (ophth) SOLN OP	84	MCG-5000 UNIT-1.7 MG-20 MG-10	naloxone hcl SOLN 0.4 MG/ML ...	21
moxifloxacin hcl TABS	54	MG-18 MG-1.5 MG-30 UNIT, 60 MG-	naloxone hcl SOLN 4 MG/10ML ...	21
MULPLETA	58	2 MG-400 MCG-400 UNIT-6 MCG-	naloxone hcl SOSY 0.4 MG/ML ...	21
MULTIPLE VITAMINS TABS-		1.7 MG-20 MG-5000 UNIT-10 MG-18	naloxone hcl SOSY 2 MG/2ML	21
ASSORTED BRAND	79	MG-1.5 MG-30 UNIT	naltrexone hcl	21
MULTIPLE VITAMINS TABS-		mupirocin calcium (topical)	NAMENDA TITRATION PAK TABS	
ASSORTED GENERIC	79	mupirocin OINT	(memantine hcl)	88
multiple vitamins w/ iron TABS	77	MVASI	naphazoline w/ pheniramine 0.3 %-	
MULTIPLE VITAMINS W/		MVW COMPL FORM PROBIOTIC-	0.025 %	84
MINERALS TABS-ASSORTED		KIDS CPDR	naphazoline w/ pheniramine 0.315	
BRAND	78	MVW COMPLETE FORMULATION	%-0.027 %	84
MULTIPLE VITAMINS W/		SOLN	naproxen sodium TABS 220 MG ...	5
MINERALS TABS-ASSORTED		MYALEPT	naproxen sodium TABS 275 MG, 550	
GENERIC	78	mycophenolate mofetil CAPS	MG	5
MULTIPLE VITAMINS/IRON TABS		mycophenolate mofetil hcl	naproxen SUSP	5
60 MG-2 MG-400 MCG-1.5 MG-20		mycophenolate mofetil SUSR	naproxen TABS	5
MG-6 MCG-10 MG-1.7 MG-400		mycophenolate mofetil TABS	naproxen TBEC	5
UNIT-30 UNIT-18 MG-5000 UNIT, 60		mycophenolate sodium	naproxen-esomeprazole magnesium	
MG-2 MG-400 MCG-400 UNIT-6		MYDAYIS CP24 (amphetamine-		5
MCG-1.7 MG-20 MG-5000 UNIT-10		dextroamphetamine)	naratriptan hcl	74
MG-18 MG-1.5 MG-30 UNIT, 60 MG-		1	NARCAN LIQD (naloxone hcl)	21
2 MG-400 MCG-400 UNIT-6 MCG-10		MYFEMBREE	NATAZIA	38
MG-1.7 MG-20 MG-5000 UNIT-18		54	nateglinide	19
MG-1.5 MG-30 UNIT	78	MYGLUCOHEALTH LANCETS 30G	NATPARA	52
MULTIVITAMIN DROPS/IRON SOLN		65	NATROBA (spinosad)	49
.....	79	MYLERAN TABS	NAT-RUL DAILY-VITE+IRON TABS	
MULTIVITAMIN INFANT &		26	60 MG-400 MCG-400 UNIT-6 MCG-	
TODDLER SOLN	79	MYNEPHRON CAPS 1 MG	1.7 MG-20 MG-5000 UNIT-10 MG-18	
MULTIVITAMIN		MYOBLOC	MG-1.5 MG-2 MG-30 UNIT	78
INFANTS/TODDLERS SOLN 11		82	NEBULIZER AIR TUBE/PLUGS	
MG/ML	79	MYRBETRIQ TB24 (mirabegron) ..	MISC	72
MULTIVITAMIN PLUS IRON ADULT		.92		
TABS 60 MG-2 MG-13.5 MG-400		NABI-HB SOLN IM		
MCG-10 MCG-6 MCG-1.7 MG-20		86		
MG-1500 MCG-10 MG-18 MG-75		nabumetone		
MG-1.5 MG	78	5		
		nadolol TABS 20 MG, 40 MG, 80 MG		
				
		35		
		NAGLAZYME		
		53		

nefazodone hcl	15	NEXIUM PACK 10 MG, 20 MG, 40 MG (esomeprazole magnesium) ..	91	nitrofurantoin macrocrystal 50 MG, 100 MG	25
NEFFY SOLN NA	96	NEXIVA CAPS	19	nitrofurantoin monohyd macro	25
NEMLUVIO	48	NEXPLANON	40	nitroglycerin OINT	9
neomycin sulfate TABS	3	NGENLA	52	nitroglycerin PT24	9
neomycin-bacitracin zn-polymyxin	84	niacin (antihyperlipidemic) TBCR ..	23	nitroglycerin SUBL	9
neomycin-bacitracin-polymyxin OINT	43	niacin CPCR 250 MG	96	NITRO-TIME CPCR 2.5 MG, 6.5 MG, 9 MG	9
neomycin-polymy-dexameth OINT	85	NIACIN ER CPCR	96	NIVA THYROID TABS	90
neomycin-polymy-dexameth SUSP		NIACIN ER TBCR	96	NIVESTYM SOLN	58
0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	85	niacin TABS 500 MG	96	NIVESTYM SOSY	59
neomycin-polymyxin w/ pramoxine	43	niacin TBCR	97	NIX LICE KILLING SPRAY LIQD XX .	49
neomycin-polymyxin-gramicidin ...	84	nicardipine hcl CAPS	36	NIZORAL A-D 2-IN-1 SHAM 1 % ..	43
neomycin-polymyxin-hc (ophth) ...	85	NICOTINE KIT	89	NIZORAL ANTI-DANDRUFF SHAM	
neomycin-polymyxin-hc (otic) SOLN .	86	nicotine polacrilex GUM	89	1 %	43
neomycin-polymyxin-hc (otic) SUSP .	86	nicotine polacrilex LOZG	89	NORDITROPIN FLEXPPO SOPN	52
NEULASTA ONPRO SOSY 6 MG/0.6ML	58	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	89	norelgestromin-ethinyl estradiol ...	39
NEULASTA SOLN SC 4 MG/0.4ML	58	NICOTROL INHA	89	norethin acet & estrad-fe CAPS ...	39
NEULASTA SOSY	58	NICOTROL NS SOLN	89	norethin acet & estrad-fe CHEW ...	39
NEUPOGEN SOLN	58	nifedipine CAPS	36	norethin acet & estrad-fe TABS 1	
NEUPOGEN SOSY	58	nifedipine TB24 30 MG, 90 MG ...	36	MG-20 MCG-75 MG, 1.5 MG-30	
nevirapine SUSP	33	nifedipine TB24 60 MG	36	MCG-75 MG	39
nevirapine TABS	33	nilotinib hcl 50 MG, 150 MG, 200 MG	29	norethin acet & estrad-fe TABS 1	
nevirapine TB24 400 MG	33	nimodipine CAPS	36	MG-20 MCG-75 MG	39
NEXIUM 24HR CPDR (esomeprazole magnesium)	91	NINLARO	29	norethindrone & eth estradiol 35	
NEXIUM CPDR 20 MG (esomeprazole magnesium)	91	nintedanib esylate 100 MG, 150 MG .	90	MCG-0.4 MG, 35 MCG-0.5 MG ...	39
		nisoldipine 8.5 MG, 17 MG, 34 MG	36	norethindrone & eth estradiol 35	
		nitisinone CAPS	53	MCG-1 MG	39
		nitrofurantoin	25	norethindrone & ethinyl estradiol-fe	39
				norethindrone (contraceptive)	40
				norethindrone acet & eth estra TABS	39

norethindrone acetate TABS	87	NOVOLOG MIX 70/30 FLEXPEN SUPN	18	nystatin-triamcinolone OINT	43
norethindrone acetate-ethinyl estradiol	54	NOVOLOG MIX 70/30 RELION SUSP	18	NYVEPRIA	59
norethindrone acetate-ethinyl estradiol-fe	39	NOVOLOG MIX 70/30 SUSP	18	OBIZUR	57
norethindrone-eth estradiol (triphasic)	39	NOVORA CAPS	19	OCALIVA	55
norgestimate-ethinyl estradiol (triphasic)	39	NOVOSEVEN RT	57	OCREVUS ZUNOVO	89
norgestimate-ethinyl estradiol	39	NP THYROID TABS	90	OCTAGAM SOLN	86
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	39	NPLATE 250 MCG, 500 MCG	59	octreotide acetate KIT	54
NORLIQVA SOLN	36	NUCALA SOAJ	10	octreotide acetate SOLN	54
NORPACE CAPS (disopyramide phosphate)	10	NUCALA SOLR	10	octreotide acetate SOSY	54
nortriptyline hcl CAPS	16	NUCALA SOSY	10	ODEFSEY	33
nortriptyline hcl SOLN	16	NULOJIX	76	ODOMZO	27
NORVIR PACK	33	NUMOISYN LIQD	77	OFEV 100 MG, 150 MG (nintedanib esylate)	90
NORVIR TABS (ritonavir)	33	NUPLAZID CAPS	30	ofloxacin (ophth)	84
NOSE CLIP MISC	72	NUPLAZID TABS 10 MG	30	ofloxacin (otic)	86
NOVA SAFETY LANCETS 23G ..	66	NURTEC	74	ofloxacin 300 MG, 400 MG	54
NOVA SAFETY LANCETS 28G ..	66	NUTRIBOOST CAPS 1 MG	77	OHC COVID-19 ANTIGEN SELF TEST KIT	51
NOVA SUREFLEX LANCETS	66	NUTRIVIO CAPS 1 MG	77	OHTUVAYRE	11
NOVAFERRUM PED MULTI VIT- IRON SOLN 10 MG/ML	79	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	94	olanzapine SOLR	31
NOVAREL IM 5000 UNIT	52	NUVESSA	95	olanzapine TABS	31
NOVAVAX COVID-19 VACCINE SUSP	94	NUWIQ KIT	57	olanzapine TBDP	31
NOVAVAX COVID-19 VACCINE SUSY	94	NUWIQ SOLR	57	olmesartan medoxomil	24
NOVOEIGHT	57	NYPOZI	59	olmesartan medoxomil-amlodipine- hydrochlorothiazide	24
NOVOLOG 70/30 FLEXPEN RELION SUPN	18	nystatin (mouth-throat)	76	olmesartan medoxomil- hydrochlorothiazide	24
		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	OPZELURA48
OLPRUVA (5 GM DOSE) THPK ...53		ORALAIR SUBL2
OLPRUVA (6 GM DOSE) THPK ...53	ONE-DAILY MULTI-VITAMIN/IRON TABS 50 MG-1 MG-20 MG-2 MG-10	ORENITRAM MONTH 1 TEPK37
OLPRUVA (6.67 GM DOSE) THPK 53	MCG-1 MCG-2.5 MG-1500 MCG-1 MG-18 MG78	ORENITRAM MONTH 2 TEPK37
		ORENITRAM MONTH 3 TEPK37
OLUMIANT3	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	ORFADIN SUSP53
omega-3-acid ethyl esters22	ONETOUCH DELICA PLUS LANCET30G66	ORIAHNN54
omeprazole CPDR91	ONETOUCH DELICA PLUS LANCET33G66	ORILISSA52
omeprazole TBEC91	ONETOUCH DELICA SAFETY LANCING66	ORKAMBI PACK89
omeprazole-sodium bicarbonate CAPS92		ORKAMBI TABS89
omeprazole-sodium bicarbonate PACK92	ONETOUCH ULTRASOFT 2 LANCETS66	orphenadrine citrate TB1280
OMNITROPE SOCT53	ONGLYZA 5 MG (saxagliptin hcl) .17	orphenadrine w/ aspirin & caff80
OMVOH (300 MG DOSE) SOAJ ..55	ONPATPRO89	ORTHOVISC80
OMVOH (300 MG DOSE) SOSY ..55	ONYDA XR SUER2	ORUDIS CAPS 75 MG5
OMVOH SOAJ55	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML27	oseltamivir phosphate CAPS 30 MG .35
OMVOH SOLN55	OPIPZA FILM32	oseltamivir phosphate CAPS 45 MG, 75 MG35
OMVOH SOSY55	OPSYNVI37	oseltamivir phosphate SUSR35
ON/GO COVID-19 ANTIGEN TEST KIT51	OPTICHAMBER DIAMOND DEVI .72	OTEZLA TABS5
ON/GO ONE COVID-19 HOME TEST KIT51	OPTICHAMBER DIAMOND MISC .72	OTEZLA TBPK5
ONCASPAR29	OPTICHAMBER DIAMOND-LG MASK DEVI72	OTEZLA XR TB24 PO 75 MG5
ondansetron hcl SOLN PO 4 MG/5ML21	OPTICHAMBER DIAMOND-MD MASK MISC72	OTEZLA/OTEZLA XR INITIATION PK TBPK5
ondansetron hcl TABS 4 MG, 8 MG 21	OPTICHAMBER DIAMOND-SM MASK MISC72	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/0.4ML3
ondansetron TBDP 16 MG21	OPTIONS GYNOL II CONTRACEPTIVE GEL95	OTULFI SOLN SC 45 MG/0.5ML .44
ondansetron TBDP 4 MG, 8 MG ..21	OPVEE NA21	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML44
ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000		oxaprozin TABS5

oxazepam CAPS	10	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	52	pazopanib hcl	29
oxcarbazepine SUSP	14	PAMIDRONATE DISODIUM SOLN 52		PC PEDIATRIC POLY-VITA/FE DROP SOLN	79
oxcarbazepine TABS	14	pantoprazole sodium PACK	91	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	79
OXERVATE	85	pantoprazole sodium TBEC 20 MG 91		ped multivitamins w/fl & iron SOLN 79	
oxiconazole nitrate CREA	43	pantoprazole sodium TBEC 40 MG 91		PEDIARIX SUSY	90
oxybutynin chloride SOLN	92	PANZYGA	86	PEDIATRIC MOUTHPIECE MISC	72
oxybutynin chloride TABS 2.5 MG	92	PARAGARD INTRAUTERINE COPPER	40	PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED BRAND	79
oxybutynin chloride TABS 5 MG	92	PARI ALTERA NEBULIZER HANDSET MISC	72	PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED GENERIC ...	79
oxybutynin chloride TB24	92	PARI BABY CONVERSION KIT MISC	72	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED BRAND	79
oxycodone hcl CAPS	7	PARI ERAPID NEBULIZER HANDSET MISC	72	PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED GENERIC	79
oxycodone hcl CONC 100 MG/5ML	7	PARI EXPIRATORY FILTER SET DEVI	72	pediatric vitamins acid w/ fluoride SOLN	79
oxycodone hcl SOLN	7	PARI MASK SET MISC	72	PEDVAXHIB SUSP 7.5 MCG/0.5ML .	92
oxycodone hcl TABS	7	PARI SOFT PLASTIC ADULT MASK MISC	72	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	61
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7	PARI SOFT PLASTIC PED MASK MISC	72	peg 3350-potassium chloride-sod bicarbonate-sod chloride	61
oxymorphone hcl TB12 15 MG	7	PARI VORTEX ADULT MASK	72	PEGASYS SOLN	34
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 20 MG, 30 MG, 40 MG	7	paricalcitol SOLN	53	PEGASYS SOSY	34
oyster shell	75	paroxetine hcl TABS	15	PELLIX SOLN 0.005 % (calcipotriene)	44
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	18	paroxetine hcl TB24	15	pemetrexed disodium SOLR 100 MG, 500 MG	26
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	18	paroxetine mesylate (vasomotor) .	89	PENBRAYA	92
OZEMPIC (2 MG/DOSE) SOPN ...	18	PARSABIV	53	penciclovir	45
OZOBAX DS SOLN PO (baclofen)	80	PAXLOVID (150/100)	34	penicillamine TABS	75
OZURDEX IMPL	85	PAXLOVID (300/100 & 150/100) .	34		
PACLITAXEL PROTEIN-BOUND PART	30	PAXLOVID (300/100)	34		
paclitaxel protein-bound particles .	30				
paliperidone	31				
PALYNZIQ	53				

penicillin v potassium SOLR	87	phenobarbital ELIX	60	pioglitazone hcl	19
penicillin v potassium TABS	87	phenobarbital TABS	60	pioglitazone hcl-glimepiride	16
PENTACEL	91	phentermine hcl-topiramate	1	pioglitazone hcl-metformin hcl TABS .	16
pentoxifylline	57	phenylephrine hcl (mydriatic) SOLN		PIP LANCETS 28G	66
PERFECT LANCETS 28G	66	2.5 %	84	PIP LANCETS 30G	66
PERFECT LANCETS 30G	66	phenylephrine hcl (oral) TABS	81	pirfenidone CAPS	90
PERFECT POINT SAFETY		phenylephrine-dm LIQD 2.5		pirfenidone TABS 534 MG	90
LANCETS	66	MG/5ML-5 MG/5ML	41	piroxicam CAPS	5
perindopril erbumine	23	phenylephrine-dm SOLN	41	PLEGRIDY SOSY IM	89
PERIOMED CONC 0.63 %	76	phenytoin CHEW	14	plerixafor	59
PERJETA	27	phenytoin sodium extended 100 MG,		PNEUMOVAX 23 SOLN	92
permethrin AERO	49	200 MG, 300 MG	14	PNEUMOVAX 23 SOSY	92
PERMETHRIN CREA 5 %		phenytoin sodium extended 200 MG,		POCKET CHAMBER DEVI	73
(permethrin)	49	300 MG	14	POCKET SPACER DEVI	73
permethrin CREA	49	phenytoin SUSP	14	podofilox SOLN	48
permethrin LIQD EX	49	PHOSPHA 250 NEUTRAL	75	POLIVY 140 MG	27
perphenazine TABS	31	PHOTOFRIN	29	polyethylene glycol 3350 PACK ...	61
perphenazine-amitriptyline	88	PHYRAGO 20 MG, 50 MG, 70 MG,		polyethylene glycol 3350 POWD ..	61
PFIZER COVID-19 VAC-TRIS 5-11Y		80 MG, 100 MG, 140 MG	29	polymyxin b-trimethoprim	84
SUSP	94	phytonadione TABS 5 MG	96	polysaccharide iron complex CAPS	59
PFIZER COVID-19 VAC-TRIS 6M-4Y		PIFELTRO	33		
SUSP	94	PILLOW MASK/ADULT MISC	72	polyvinyl alcohol 1.4 %	83
PFLEX MISC	72	PILLOW MASK/CHILD MISC	73	POLY-VI-SOL SOLN PO	79
PHARMACIST CHOICE ALCOHOL .		PILLOW MASK/PEDIATRIC MISC	73	POLY-VITA SOLN PO	79
69		pilocarpine hcl (oral) 5 MG	77	POLY-VITA/IRON SOLN	79
PHARMACIST CHOICE LANCETS .		pilocarpine hcl SOLN 1 %, 2 %, 4 % .	84	POLY-VITE PEDIATRIC SOLN PO	79
66		PILOT COVID-19 AT-HOME TEST			
PHARMACIST CHOICE MASK		KIT	51	POLY-VITE/IRON SOLN	79
WIPES MISC	72	pimecrolimus	48	pomalidomide 1 MG, 2 MG, 3 MG, 4	
PHEBURANE PLLT	53	PIN RID CHEW	9	MG	28
phenazopyridine hcl TABS 100 MG,		pindolol TABS	35		
200 MG	56				
phenelzine sulfate	15				

PONVORY STARTER PACK TBPK 89	prazosin hcl CAPS24	PREVYMIS SOLN 34
PONVORY TABS89	PRED MILD 85	PREVYMIS TABS34
PORTRAZZA27	prednisolone acetate (ophth)85	PREZCOBIX 33
pot phosphate monobasic w/ sod phosphate dibasic & monobasic .. 75	PREDNISOLONE ACETATE P-F .85	PREZISTA SUSP33
potassium bicarbonate TBEF75	PREDNISOLONE SODIUM PHOSPHATE85	PREZISTA TABS (darunavir)33
potassium chloride CPCR 10 MEQ 75	prednisolone sodium phosphate SOLN 15 MG/5ML 41	PREZISTA TABS 150 MG33
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 MEQ75	prednisolone SOLN 41	primidone 125 MG 14
potassium chloride SOLN PO 10 %, 20 %, 10 %75	PREDNISONE INTENSOL CONC 41	primidone 50 MG, 250 MG14
potassium chloride TBCR 8 MEQ, 10 MEQ75	prednisone SOLN41	PRIORIX SUSR94
potassium citrate (alkalinizer) TBCR . 56	prednisone TABS 41	PRIVIGEN SOLN 86
potassium iodide (expectorant) SOLN42	prednisone TBPK 41	PRO COMFORT ALCOHOL69
POTELIGEO27	pregabalin CAPS14	PRO COMFORT LANCETS 30G .66
PRADAXA CAPS (dabigatran etexilate mesylate) 13	pregabalin SOLN14	PRO COMFORT LANCETS 31G .66
PRADAXA PACK 13	PREGNYL IM 52	PRO COMFORT SAFETY LANCETS 30G66
pralatrexate26	PREHEVBRIO94	PRO COMFORT SPACER ADULT MISC 73
PRALUENT SOAJ23	PREMARIN96	PRO COMFORT SPACER CHILD MISC 73
pramipexole dihydrochloride TABS 30	PREMPHASE 54	PRO COMFORT SPACER INFANT DEVI73
pramipexole dihydrochloride TB24 30	PREMPRO 54	probenecid 57
pramoxine hcl (rectal) FOAM EX ...9	PRENATAL VITAMINS-ASSORTED BRAND 79	PROBENTRA CPDR19
prasugrel hcl58	PRENATAL VITAMINS-ASSORTED GENERIC79	PROBINATE CAPS19
pravastatin sodium23	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 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 20	PROLEUKIN 29	psyllium CAPS 0.36 GM, 0.52 GM 60
probiotic product CPDR 50 MG 20	PROLIA SOSY 52	psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 % 60
PROCARE SPACER/ADULT MASK DEVI 73	PROMELLA IN PREBIOTIC CAPS 20	PULMICORT FLEXHALER AEPB .11
PROCARE SPACER/CHILD MASK DEVI 73	promethazine & phenylephrine SYRP 41	PULMOZYME 89
PROCHAMBER VHC DEVI 73	promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML 22	PURE COMFORT ALCOHOL PREP 69
prochlorperazine 31	promethazine hcl SUPP 22	PURE COMFORT LANCETS 30G 66
prochlorperazine edisylate 10 MG/2ML 31	promethazine hcl TABS 22	PURE COMFORT SAFETY LANCET 30G 66
prochlorperazine maleate TABS ... 32	promethazine w/codeine SOLN ... 42	PURE COMFORT SPACER CHAMBER DEVI 73
PROCRT 59	promethazine w/codeine SYRP ... 42	PX LANCETS MICROTHIN 33G .. 66
PROCTOFOAM FOAM EX 1 % 9	PRONEB ULTRA FILTER SET MISC 73	PX LANCETS ULTRA THIN 28G .. 66
PROCYSBI CPDR 56	propafenone hcl TABS 10	pyrantel pamoate SUSP 9
PROCYSBI PACK 56	propranolol hcl CP24 35	pyrazinamide 26
PRODIGY LANCETS 28G 66	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML 35	pyrethrins-piperonyl butoxide SHAM 4 %-0.33 % 49
PRODIGY SAFETY LANCETS 26G . 66	propranolol hcl TABS 35	pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 % 49
PRODIGY TWIST TOP LANCETS 28G 66	propylthiouracil 90	pyridostigmine bromide TABS 60 MG 26
PROFILNINE 57	PROQUAD SUSR 94	pyridostigmine bromide TBCR 26
progesterone CAPS 100 MG 87	PRORIVA CAPS 20	pyridoxine hcl TABS 25 MG, 50 MG, 100 MG 97
progesterone CAPS 200 MG 87	PROTONIX PACK (pantoprazole sodium) 91	pyrimethamine 26
PROGLYCEM (diazoxide) 17	protriptyline hcl 16	PYZCHIVA 45 MG/0.5ML, 90 MG/ML 44
PROGRAF PACK 76	PROVENGE 27	PYZCHIVA SC 45 MG/0.5ML, 90 MG/ML 44
	PROVENTIL HFA AERS (albuterol sulfate) 12	PYZCHIVA SC 45 MG/0.5ML 44
	PROXIVOL GEL 2 % 49	QC ALCOHOL SWABS 69
	pseudoephedrine hcl TABS 81	
	pseudoephedrine hcl TB12 81	
	pseudoephedrine-ibuprofen TABS 42	

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 UNIT78	RABAVERT94	RELION ALCOHOL SWABS69
QC LANCETS SUPER THIN 30G 66	rabeprazole sodium TBEC91	RELION KETONE TEST STRP ... 51
QC LANCETS ULTRA THIN66	RALDESY SOLN PO 10 MG/ML .. 15	RELION LANCET DEVICES 30G .66
QC UNILET LANCETS 28G 66	raloxifene hcl 53	RELION LANCETS66
QC UNILET LANCETS MICRO THIN66	ramelteon60	RELION LANCETS MICRO-THIN 33G66
QDOLO SOLN (tramadol hcl)7	ramipril CAPS24	RELION LANCETS THIN 26G66
QELBREE 2	ranitidine hcl TABS 150 MG, 300 MG91	RELION LANCETS ULTRA-THIN 30G66
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 TB129	RELION ULTRA THIN LANCETS 30G66
QUADRACEL SUSP91	RAPAFLO 4 MG (silodosin)56	REMODULIN SOLN IJ37
QUADRACEL SUSY91	RAPID RESPONSE COVID-19 ...51	RENAL CAPS 1 MG77
quetiapine fumarate TABS31	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/0.6ML3	RENO CAPS CAPS 1 MG77
quetiapine fumarate TB2431	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 KIT51	READYLANCE SAFETY LANCETS . 66	RENVELA TABS (sevelamer carbonate)56
QUICKVUE SARS ANTIGEN TEST . 51	REALITY LANCETS66	repaglinide19
quinapril hcl24	REALITY SWABS69	REPATHA PUSHTRONEX SYSTEM SOCT 23
quinapril-hydrochlorothiazide 12.5 MG-10 MG24	REALITY TRIGGER LANCETS ...66	REPATHA SOSY 23
quinapril-hydrochlorothiazide 12.5 MG-20 MG24	REBINYN57	REPATHA SURECLICK SOAJ23
quinapril-hydrochlorothiazide 25 MG- 20 MG24	RECOMBIVAX HB SUSP94	REPLACEMENT AIR FILTER MISC . 73
quinidine gluconate TBCR10	RECOMBIVAX HB SUSY95	REPLACEMENT FILTERS MISC .73
quinidine sulfate TABS10	RELEUKO SOSY59	RESTASIS EMUL (cyclosporine (ophth))84
QULIPTA74	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG2	RESTASIS MULTIDOSE EMUL ...84
QUVIVIQ60	RELEXXII TBCR 45 MG, 63 MG (methylphenidate hcl) 2	RESTORIL 22.5 MG (temazepam) 60
	RELIBIOTIC CAPS 20	RETACRIT 59
		RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000

UNIT/ML, 20000 UNIT/ML	59	risedronate sodium TABS 5 MG, 30 MG	52	ROTATEQ SOLN	95
RETIN-A MICRO (tretinoin microsphere)	42	risedronate sodium TBEC	52	RUBRACA	29
RETIN-A MICRO PUMP (tretinoin microsphere)	42	RISPERDAL CONSTA (risperidone microspheres)	31	RUCONEST	57
RETISERT	85	risperidone microspheres	31	rufinamide SUSP	14
RETROVIR CAPS (zidovudine) ...	33	risperidone SOLN	31	RUKOBIA	34
RETROVIR SYRP (zidovudine) ...	33	risperidone TABS	31	RYALTRIS	81
REVCIVI	53	risperidone TBDP	31	RYBELSUS TABS	18
REXTOVY LIQD	21	RITEFLO DEVI	73	RYKINDO SRER	31
REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate)	34	ritonavir TABS	34	RYZNEUTA SOSY SC 20 MG/ML ..	59
REYATAZ PACK	34	RITUXAN	27	SABRIL PACK (vigabatrin)	14
REZVOGLAR KWIKPEN	18	rivaroxaban SUSR 1 MG/ML	12	SABRIL TABS (vigabatrin)	14
RHAPSIDO TABS PO 25 MG	75	rivaroxaban TABS 2.5 MG	12	sacubitril-valsartan TABS	37
RHOGAM ULTRA-FILTERED PLUS SOSY IM	86	rivastigmine 13.3 MG/24HR	88	SAFETY LANCET 30G/PRESSURE ACT	66
RHOPHYLAC SOSY IJ	86	rivastigmine 4.6 MG/24HR, 9.5 MG/24HR	88	SAFETY LANCETS	66
RIASTAP	57	rivastigmine tartrate CAPS	88	SAFETY LANCETS 21G	66
ribavirin (hepatitis c) CAPS	34	RIXUBIS SOLR	57	SAFETY LANCETS 23G	66
ribavirin (hepatitis c) TABS 200 MG 34		rizatriptan benzoate TABS	74	SAFETY LANCETS 28G	66
riboflavin TABS	97	rizatriptan benzoate TBDP	74	salicylic acid GEL 6 %	48
rifampin CAPS	26	ROCKLATAN	85	saline SOLN 0.65 %	81
RIGHTEST GL300 LANCETS	66	ROCTAVIAN	57	salsalate	6
rilpivirine hcl 25 MG	34	ROLVEDON	59	SAMI THE SEAL FILTERS MISC .	73
riluzole TABS	81	romidepsin SOLR	29	SANADERMRX SKIN REPAIR 0.1 % -5 %	47
rimantadine hydrochloride TABS ..	35	ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG	30	SANDIMMUNE CAPS (cyclosporine) 76	
RINVOQ LQ SOLN	3	ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG	30	SANDIMMUNE SOLN IV 50 MG/ML .	76
RINVOQ TB24	3	ropinirole hydrochloride TB24	30	sapropterin dihydrochloride PACK ..	53
risedronate sodium TABS 150 MG	52	rosuvastatin calcium TABS	23	sapropterin dihydrochloride TABS ..	53
risedronate sodium TABS 35 MG ..	52	ROTARIX SUSP	95	SAPS CARE ALCOHOL PREP ...	69

SAPS HEALTH ALCOHOL PREP 69	SEMGLEE (YFGN) SOLN18	sildenafil citrate (pulmonary hypertension) SOLN37
SAPS HEALTH CARE ALCOHOL PREP69	SEMGLEE (YFGN) SOPN18	sildenafil citrate (pulmonary hypertension) SUSR37
SAPS HEALTH PLUS LANCETS .66	sennosides TABS 8.6 MG61	sildenafil citrate (pulmonary hypertension) TABS37
SAPS HEALTH TWIST TOP LANCETS66	sennosides-docusate sodium TABS 61	SILICONE MASK/ADULT MISC ...73
SAPS TWIST TOP LANCETS67	SENSILANCE SAFETY LANCETS 21G67	SILICONE MASK/INFANT MISC ..73
SAPSCARE TWIST TOP LANCETS 67	SENSILANCE SAFETY LANCETS 26G67	SILICONE MASK/PEDIATRIC MISC .73
saxagliptin hcl17	SENSILANCE SAFETY LANCETS 28G67	silodosin56
saxagliptin-metformin hcl16	SEREVENT DISKUS12	silver sulfadiazine45
SB ALCOHOL PREP69	SERTRALINE HCL CAPS 150 MG, 200 MG (sertraline hcl)15	SIMBRINZA84
SB FIB LAX ORANGE POWD 33 % .60	sertraline hcl CAPS 150 MG, 200 MG15	simethicone CHEW 80 MG54
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %8	sertraline hcl CONC15	simethicone LIQD PO54
SB LANCETS THIN67	sertraline hcl TABS15	simethicone SUSP54
SB LANCETS ULTRA THIN67	sevelamer carbonate PACK56	SIMLANDI (1 PEN) AJKT4
SB LICE TREATMENT LIQD 3 %-2.4 %-0.3 %-1.2 %49	sevelamer carbonate TABS56	SIMLANDI (1 SYRINGE) PSKT4
SCHOOLTIME SHAMPOO SHAM 49	sevelamer hcl56	SIMLANDI (2 PEN) AJKT4
SELARSDI SOLN IV 130 MG/26ML 55	SEVENFACT57	SIMLANDI (2 SYRINGE) PSKT4
SELARSDI SOLN SC 45 MG/0.5ML .44	SHINGRIX95	SIMPLYTHICK EASY MIX87
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML44	SHINGRIX IM 50 MCG/0.5ML95	SIMPLYTHICK EASYMIX LEVEL 1 .87
selegiline hcl CAPS30	SIDESTREAM ADULT FACE MASK MISC73	SIMPLYTHICK EASYMIX LEVEL 2 .87
selegiline hcl TABS30	SIDESTREAM PEDIATRIC FACE MASK MISC73	SIMPLYTHICK EASYMIX LEVEL 3 .87
selenium sulfide LOTN 1 %45	SIDESTREAM PLS ADULT FACE MASK MISC73	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG23
selenium sulfide LOTN 2.5 %45	SIGNIFOR54	simvastatin TABS 80 MG23
selenium sulfide SHAM 1 %45	SIGNIFOR LAR54	SINGLE-LET67
SELZENTRY SOLN34	SIKLOS TABS58	sirolimus SOLN76
		sirolimus TABS76

sitagliptin 25 MG, 50 MG, 100 MG	17	sodium fluoride (dental) SOLN 0.2 %	76	SOMATULINE DEPOT	54
sitagliptin free base-metformin hcl				SOMAVERT	52
TABS 1000 MG-50 MG, 500 MG-50		sodium fluoride CHEW	75	SOOTHENEB NBL 100 ADULT	
MG	17	sodium fluoride SOLN 0.5 MG/ML	75	MASK MISC	73
sitagliptin phosphate 25 MG, 50 MG,		SODIUM FLUORIDE SOLN 0.5		SOOTHENEB NBL 100 CHILD	
100 MG	17	MG/ML	75	MASK MISC	73
sitagliptin phosphate-metformin hcl		sodium oxybate SOLN	88	SOOTHENEB NBL 100 MED CUP	
TABS	17	sodium phenylbutyrate POWD	53	MISC	73
sitagliptin phosphate-metformin hcl		sodium phenylbutyrate TABS	53	SOOTHENEB NBL 100 MESH CAP	
TB24	17			MISC	73
SIVEXTRO TABS	25	sodium phosphate monobasic-		sorafenib tosylate	29
SKYLA	40	sodium phosphate dibasic PR 19		SORBITOL PO 70 %	61
SKYRIZI PEN SOAJ	44	GM/118ML-7 GM/118ML, 19		SORILUX FOAM	44
SKYRIZI SOCT	55	GM/197ML-7 GM/197ML, 6		sotalol hcl (afib/afib)	36
SKYRIZI SOLN	55	GM/133ML-16 GM/133ML, 7		sotalol hcl TABS 240 MG	36
SKYRIZI SOSY	44	GM/118ML-19 GM/118ML, 9.5		sotalol hcl TABS 80 MG, 120 MG,	
SKYSONA	88	GM/59ML-3.5 GM/59ML	60	160 MG	36
SKYTROFA	53	sodium polystyrene sulfonate POWD	76	SOTYKTU	44
SM ADVANCED PROBIOTIC CAPS		sodium polystyrene sulfonate SUSP		SOVALDI PACK	34
20		CO 15 GM/60ML	76	SOVALDI TABS	34
SM ALCOHOL PREP	69	SOFIA SARS ANTIGEN FIA	51	SPEEDY SWAB COVID-19	
SM IPECAC SYRUP	20	SOFIA2 SARS ANTIGEN FIA	51	ANTIGEN KIT	51
SMARTEST LANCETS 28G	67	SOFOSBUVIR-VELPATASVIR TABS		SPEVIGO SOLN	44
SOAANZ TABS 20 MG	51		34	SPEVIGO SOSY	44
sodium bicarbonate (antacid) TABS		SOGROYA	53	SPIKEVAX 6M-11Y SUSY 25	
325 MG, 650 MG	9	SOLESTA	75	MCG/0.25ML	95
sodium chloride (gu irrigant) 0.9 %	56	solifenacin succinate TABS	92	SPIKEVAX SUSP	95
sodium chloride (inhalant) AERS	42	SOLIRIS	57	SPIKEVAX SUSY	95
sodium chloride (inhalant) NEBU 0.9		SOLUS V2 LANCETS 28G	67	spinosad	49
%, 7 %	42	SOLUS V2 TWIST LANCETS 30G	67	SPINRAZA	82
sodium citrate & citric acid	56			SPIRIVA HANDIHALER CAPS IN	
sodium fluoride (dental) CREA	76	SOLUVITA ACD WITH FLUORIDE		(tiotropium bromide)	11
sodium fluoride (dental) GEL	76	SOLN	79	spironolactone & hydrochlorothiazide	
		SOMA TABS 250 MG (carisoprodol)	80		

SUREBIOTIC PROBIOTIC SUPPORT CAPS	20	betamethasone dipropionate)	47	telmisartan-amlodipine	24
SURELITE LANCETS	67	tacrolimus (topical) OINT 0.03 % ..	48	telmisartan-hydrochlorothiazide ...	25
SYLVANT	76	tacrolimus (topical) OINT 0.1 % ...	48	temazepam 15 MG, 30 MG	60
SYMBICORT (budesonide-formoterol fumarate dihydrate)	12	tacrolimus CAPS	76	temazepam 22.5 MG	60
SYMBRAVO TABS PO	74	tacrolimus CP24 0.5 MG, 1 MG, 5 MG	76	temazepam 7.5 MG	60
SYMDEKO	89	tacrolimus SOLN 5 MG/ML	76	TEMODAR SOLR	26
SYMFI (efavirenz-lamivudine-tenofovir disoproxil fumarate)	34	tadalafil (pulmonary hypertension) TABS	37	temozolomide CAPS	26
SYMFI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate)	34	TADLIQ SUSP	37	temsirolimus	29
SYMTUZA	34	TAFINLAR CAPS	29	TENIVAC SUSP 2 LFU-5 LFU	91
SYNAGIS SOLN	87	TAGRISSO	27	tenofovir disoproxil fumarate TABS 34	
SYNALAR CREA (fluocinolone acetonide)	47	TAKHZYRO SOLN	58	terazosin hcl	24
SYNALAR OINT (fluocinolone acetonide)	47	TALTZ SOSY	44	terbinafine hcl (topical) CREA	43
SYNAREL	53	TALZENNA 0.25 MG, 1 MG	29	terbinafine hcl TABS	21
SYNBIARA CAPS	20	tamoxifen citrate TABS	28	terbutaline sulfate TABS	12
SYNOJOYNT SOSY	80	tamsulosin hcl	56	terconazole vaginal CREA 0.4 % ..	95
SYNOVEXA CAPS	20	TASCENSO ODT	89	terconazole vaginal CREA 0.8 % ..	95
SYNTHROID TABS (levothyroxine sodium)	90	tasimelteon CAPS	60	terconazole vaginal SUPP	95
SYNVISC ONE SOSY	80	TAVALISSE	57	teriparatide SOPN	52
SYNVISC SOSY	80	tazarotene CREA	44	TERIPARATIDE SOPN	52
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	TDVAX SUSP	91	TESTOPEL PLLT	8
TAB-A-VITE/IRON/BETA CAROTENE TABS	78	TECENTRIQ	27	testosterone cypionate SOLN IM 200 MG/ML	8
TABLOID	26	TECHLITE AST LANCETS	67	testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM	8
TACLONEX SUSP (calcipotriene-		TECHLITE LANCETS	67	testosterone GEL TD 1 %	8
		TECHLITE LANCETS 26G	67	testosterone GEL TD 1.62 %, 20.25 MG/1.25GM, 40.5 MG/2.5GM, 1.62 %	8
		TEGLUTIK SUSP	81	testosterone GEL TD 10 MG/ACT ..	8
		TEGRETOL-XR TB12 (carbamazepine)	14	testosterone SOLN	8
		TEGSEDI	89	TETANUS-DIPHTHERIA TOXOIDS	
		telmisartan	24		

TD SUSP	91	TIBSOVO	29	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML	3
tetrabenazine	88	ticagrelor 60 MG, 90 MG	58	tobramycin sulfate SOLR	3
tetracaine hcl (ophth)	85	TICOVAC	95	tobramycin-dexamethasone SUSP 85	
TETRACAINE HCL 0.5 %	85	TIGLUTIK SUSP	81	TOBREX OINT	84
tetrahydrozoline hcl (ophth) 0.05 % 84		timolol maleate (ophth) SOLG 0.25 %	83	TODAYS HEALTH THIN LANCETS 28G	67
TEZSPIRE SOAJ	10	timolol maleate (ophth) SOLN 0.5 % . 83		TODAYS HEALTH THIN LANCETS 30G	67
TEZSPIRE SOSY	10	timolol maleate (ophth) SOLN	83	tofacitinib citrate SOLN 1 MG/ML ...	3
THALOMID 50 MG, 100 MG, 200 MG	75	timolol maleate TABS	36	TOFIDENCE	5
THEO-24 CP24 100 MG	12	TIMOLOL-BRIMONIDINE- DORZOLAMID 0.5 %-0.15 %-2 % .	83	tolmetin sodium CAPS	5
THEO-24 CP24 200 MG, 300 MG, 400 MG	12	TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	83	tolmetin sodium TABS	5
theophylline ELIX	12	tioconazole vaginal 6.5 %	96	tolnaftate CREA	43
theophylline SOLN	12	tiopronin TABS	56	tolterodine tartrate CP24	92
theophylline TB12 100 MG, 200 MG, 300 MG	12	tiotropium bromide CAPS IN 18 MCG	11	tolterodine tartrate TABS	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	tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	54
theophylline TB24	12	TIVICAY PD TBSO	34	tolvaptan TABS	54
thiamine hcl TABS	97	TIVICAY TABS 50 MG	34	tolvaptan TBPK	54
thiamine mononitrate TABS 100 MG . 97		tizanidine hcl CAPS 8 MG	80	TOPAMAX SPRINKLE CPSP (topiramate)	14
thioridazine hcl	32	tizanidine hcl CAPS	80	TOPICORT CREA 0.05 % (desoximetasone)	47
thiothixene	32	tizanidine hcl TABS	80	TOPICORT CREA 0.25 % (desoximetasone)	47
THRESHOLD IMT MISC	73	TM-VITE RX TABS 1 MG	77	TOPICORT GEL (desoximetasone) 47	
THROMBATE III 500 UNIT	58	TOBI NEBU (tobramycin)	3	TOPICORT SPRAY LIQD (desoximetasone)	47
THYMOGLOBULIN	76	TOBRADEX OINT	85	topiramate CPSP 15 MG, 25 MG ..	14
THYROGEN 0.9 MG	50	tobramycin (ophth) SOLN	84	topiramate CPSP 50 MG	14
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	90	tobramycin NEBU	3		
tiagabine hcl 12 MG, 16 MG	14				
tiagabine hcl 2 MG, 4 MG	14				

topiramate SOLN 25 MG/ML 14	travoprost SOLN 86	triamcinolone acetonide (topical) CREA 0.5 % 47
topiramate TABS 25 MG 14	trazodone hcl TABS 300 MG 16	triamcinolone acetonide (topical) LOTN 47
topiramate TABS 50 MG, 100 MG, 200 MG 14	trazodone hcl TABS 50 MG, 100 MG, 150 MG 16	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 32
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 TBPB 100 MG-50 MG .89
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	TRETEN 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 24	triamcinolone acetonide (mouth) .. 76	TRIUMEQ PD TBSO 34
trandolapril 4 MG 24	triamcinolone acetonide (topical) AERS 47	TRIUMEQ TABS 34
trandolapril-verapamil hcl 25	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
tranilcypromine sulfate 15		TRONVITE TABS 1 MG 77
TRAVATAN Z SOLN (travoprost) .. 86		
TRAVEL LANCETS ADVANCED 28G 67		

tropicamide SOLN 0.5 %84	TYBOST34	UNILET G.P. LANCET68
tropicamide SOLN 1 %84	TYENNE SOAJ5	UNILET G.P. SUPERLITE LANCET . 68
tropium chloride CP2492	TYENNE SOLN5	UNILET GP 28 ULTRA THIN68
tropium chloride TABS92	TYENNE SOSY5	UNILET LANCET68
TRUE COMFORT ALCOHOL PREP PADS69	TYPHIM VI SOLN92	UNILET MICRO-THIN 33G68
TRUE COMFORT PRO ALCOHOL PREP69	TYPHIM VI SOSY92	UNILET SUPERLITE LANCET ...68
TRUE COMFORT SAFETY LANCETS67	TYRUKO CONC IV 300 MG/15ML 89	UNILET SUPER-THIN 30G68
TRUE COMFORT TWIST TOP LANCETS67	UBRELVY74	UNILET ULTRA-THIN 28G68
TRUEBALANCE CAPS20	UCERIS TB24 (budesonide)41	UNISOM SLEEPMELTS TBDP 25 MG60
TRUEBOOST TABS 1 MG77	UDENYCA ONBODY SOSY59	UNISTIK 168
TRUEPLUS GLUCOSE CHEW ...17	UDENYCA SOAJ59	UNISTIK 268
TRUEPLUS GLUCOSE ON THE GO CHEW17	UDENYCA SOSY59	UNISTIK 2 COMFORT68
TRUEPLUS LANCETS 26G67	ULTICARE ALCOHOL SWABS ...69	UNISTIK 2 EXTRA68
TRUEPLUS LANCETS 28G67	ULTILET ALCOHOL SWABS69	UNISTIK 2 NEONATAL68
TRUEPLUS LANCETS 30G67	ULTILET CLASSIC LANCETS ...67	UNISTIK 2 NORMAL68
TRUEPLUS LANCETS 33G67	ULTILET LANCETS67	UNISTIK 2 SUPER68
TRUEPLUS SAFETY LANCETS 28G67	ULTILET SAFETY LANCETS ...67	UNISTIK 368
TRULICITY18	ULTILET SAFETY LANCETS 23G 67	UNISTIK 3 COMFORT68
TRUMENBA 0.5 ML92	ULTRA THIN LANCETS 31G67	UNISTIK 3 EXTRA68
TRUVADA (emtricitabine-tenofovir disoproxil fumarate)34	ULTRA-CARE ALCOHOL PREP PADS69	UNISTIK 3 GENTLE68
TRYPTYR SOLN OP 0.003 %85	ULTRA-CARE LANCETS 30G ...67	UNISTIK 3 NEONATAL68
TUBING/WING TIP MISC73	ULTRA-CARE SAFETY LANCETS 30G67	UNISTIK 3 NORMAL68
TWINRIX SUSY95	ULTRA-THIN II AUTO LANCET ..67	UNISTIK CZT COMFORT68
TWIST TOP LANCETS 30G67	ULTRA-THIN II LANCETS67	UNISTIK CZT NORMAL68
TYBLUME CHEW39	UNILET COMFORTOUCH LANCET 67	UNISTIK NORMAL68
	UNILET EXCELITE68	UNISTIK PRO SAFETY LANCET .68
	UNILET EXCELITE II68	UNISTIK SAFETY LANCETS 28G 68
		UNISTIK SAFETY LANCETS 30G

VERELAN CP24 360 MG (verapamil hcl)	36	VIRACEPT TABS 250 MG	34	VONVENDI	57
VERELAN PM CP24 100 MG, 200 MG (verapamil hcl)	36	VIRACEPT TABS 625 MG	34	VORAXAZE	29
VERELAN PM CP24 300 MG (verapamil hcl)	36	VIREAD POWD	34	VORTEX HOLD CHMBR/MASK/CHILD DEVI	73
VERIFINE SAFE LANCET MINI 21G	68	VIREAD TABS (tenofovir disoproxil fumarate)	34	VORTEX HOLD CHMBR/MASK/TODDLER DEVI ..	73
VERIFINE SAFE LANCET MINI 23G	68	VIREAD TABS	34	VORTEX VALVE CHAMBER-PEDI MASK DEVI	73
VERIFINE SAFE LANCET MINI 28G	68	VISCO-3 SOSY	80	VORTEX VALVED HOLDING CHAMBER DEVI	73
VERIFINE SAFE LANCET MINI 30G	68	VISTOGARD	20	VOSEVI	34
VERIFINE UNIVERSAL LANCETS 28G	68	VISUDYNE	85	VPRIV	58
VERIFINE UNIVERSAL LANCETS 30G	68	VITAMIN D3 LIQD PO 125 MCG/ML . 96		VRAYLAR CAPS	31
VERIFINE UNIVERSAL LANCETS 33G	68	vitamin e CAPS	96	VTAMA	45
VESICARE LS SUSP	92	VITAMIN E CAPS	96	VYNDAMAX	37
VEVYE SOLN	84	VITAMIN E CHEW	96	VYNDAQEL	37
VICTOZA (liraglutide)	18	VITAMIN E/D-ALPHA CAPS 200 UNIT	96	VYONDYS 53	82
vigabatrin PACK	14	VITAMINS ACD-FLUORIDE SOLN 79		VYSCOXA PO 10 MG/ML	5
vigabatrin TABS	14	vitamins w/ lipotropics CAPS	79	VYVANSE CAPS (lisdexamfetamine dimesylate)	1
VIGAFYDE SOLN	14	VITASURE TABS 1 MG	77	VYVANSE CHEW (lisdexamfetamine dimesylate)	1
VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	84	VITRAKVI CAPS	29	WAL-SLEEP Z TBDP 25 MG	60
VIJOICE TBPK	76	VITRAKVI SOLN	29	WAL-SOM TBDP 25 MG	60
VILTEPSO	82	VIVAGUARD LANCETS	68	WAL-ZYR CHILDRENS CHEW 5 MG	22
VIMIZIM	54	VIVAGUARD LANCETS 30G	68	warfarin sodium TABS	12
VIMOVO (naproxen-esomeprazole magnesium)	5	VIVAGUARD SAFETY LANCETS 28G	68	WEBCOL ALCOHOL PREP LARGE 69	
vincristine sulfate	30	VIVIMUSTA SOLN	26	WEBCOL ALCOHOL PREP MEDIUM	69
		VIVITROL	21	WEGOVY	1
		VIVOTIF	93	WELLPRO 31 CAPS	20
		VIZIMPRO	27		
		VOGELXO PUMP GEL TD (testosterone)	8		

WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	75	XOLAIR SOAJ	10	zafirlukast	11
white petrolatum-mineral oil	83	XOLAIR SOLR	10	zaleplon	60
WILATE KIT	57	XOLAIR SOSY	10	ZALTRAP	27
WINDMILL TRAINER MISC	74	XOPENEX HFA (levalbuterol tartrate)	12	ZANAFLEX CAPS 8 MG (tizanidine hcl)	80
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ...	87	XOSPATA	29	ZARXIO	59
XACIATO GEL	96	XPART XPRESS SARS-COV-2 ..	51	ZAVZPRET	74
XALKORI CAPS	29	XPHOZAH	54	ZEGALOGUE SOAJ	17
XARELTO STARTER PACK TBPK 12		XTANDI CAPS	28	ZEGALOGUE SOSY	17
XARELTO SUSR 1 MG/ML (rivaroxaban)	12	XYBIOTIC CAPS	20	ZEGERID CAPS (omeprazole-sodium bicarbonate)	92
XARELTO TABS 10 MG, 20 MG ..	12	XYNTHA	57	ZEGERID PACK (omeprazole-sodium bicarbonate)	92
XARELTO TABS 15 MG	12	XYNTHA SOLOFUSE	57	ZELAC CAPS	20
XARELTO TABS 2.5 MG (rivaroxaban)	12	XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML ..	22	ZELBORAF	29
XCOPRI (250 MG DAILY DOSE) TBPK	14	YERVOY	27	ZEMAIRA SOLR 1000 MG	89
XCOPRI TABS	14	YESCARTA	27	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	51
XELJANZ SOLN 1 MG/ML (tofacitinib citrate)	3	YEZTUGO SOLN 463.5 MG/1.5ML 34		ZEPATIER	34
XELSTRYM	1	YEZTUGO TABS PO 300 MG	34	ZEPBOUND SOLN	1
XENAZINE (tetrabenazine)	88	YF-VAX SUSR	95	ZEPOSIA STARTER KIT CPPK ...	89
XEOMIN	82	YONDELIS	26	ZEVALIN Y-90	27
XGEVA SOLN	52	YOSPRALA 81 MG-40 MG	58	ZEV RX STERILE ALCOHOL PREP PAD	70
XIAFLEX	75	YUFLYMA (1 PEN) AJKT	4	ZEV RX TWIST TOP LANCETS 30G 68	
XIGDUO XR TB24 PO (dapagliflozin free base-metformin hcl)	17	YUFLYMA (2 PEN) AJKT	4	ZIAGEN SOLN (abacavir sulfate) .	34
XIIDRA	85	YUFLYMA (2 SYRINGE) PSKT	4		
XOFLUZA (40 MG DOSE) 40 MG .	35	YUFLYMA-CD/UC/HS STARTER AJKT	4		
XOFLUZA (80 MG DOSE) 80 MG .	35	YUSIMRY	4		
		YUTIQ	85		

ZIANA (clindamycin phosphate-tretinoin)	43	ZOLGENSMA 13.1-13.5 KG	82	ZOLINZA	29
zidovudine CAPS	34	ZOLGENSMA 13.6-14.0 KG	82	zolmitriptan SOLN 2.5 MG	74
zidovudine SYRP	34	ZOLGENSMA 14.1-14.5 KG	82	zolmitriptan TABS	74
zidovudine TABS	34	ZOLGENSMA 14.6-15.0 KG	82	zolmitriptan TBDP	75
ZIEXTENZO	59	ZOLGENSMA 15.1-15.5 KG	83	ZOLOFT CONC (sertraline hcl)	15
zileuton TB12	11	ZOLGENSMA 15.6-16.0 KG	83	ZOLPIDEM TARTRATE CAPS	60
ZILRETTA SRER	41	ZOLGENSMA 16.1-16.5 KG	83	zolpidem tartrate SUBL	60
ZIMHI SOSY	21	ZOLGENSMA 16.6-17.0 KG	83	zolpidem tartrate TABS	60
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	75
ZINPLAVA	87	ZOLGENSMA 18.1-18.5 KG	83	ZONISADE SUSP	14
ziprasidone hcl	31	ZOLGENSMA 18.6-19.0 KG	83	zonisamide CAPS	14
ziprasidone mesylate	31	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
ZOLGENSMA 12.1-12.5 KG	82	ZOLGENSMA 7.6-8.0 KG	83	ZURNAL IJ 1.5 MG/0.5ML	21
ZOLGENSMA 12.6-13.0 KG	82	ZOLGENSMA 8.1-8.5 KG	83	ZURZUVAE	15
		ZOLGENSMA 8.6-9.0 KG	83	ZYDELIG	29
		ZOLGENSMA 9.1-9.5 KG	83	ZYKADIA TABS	29
		ZOLGENSMA 9.6-10.0 KG	83		

ZYMFENTRA (1 PEN) AJKT	55
ZYMFENTRA (2 PEN) AJKT	55
ZYMFENTRA (2 SYRINGE) PSKT	55
ZYNTEGLO	58
ZYPREXA RELPREVV	31