

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, Antihyperkinesis, Serotonin Reuptake Inhibitors & Combos
Cardiovascular - Angiotensin Receptor Blockers & Combos, Calcium Channel Blockers & Combos, High Potency Statins & Combos, Platelet Inhibitors, Triglyceride Lowering Agents
Central Nervous System - Triptans
Endocrinology - 2nd Generation Sulfonylureas & Combos, Alpha-Glucosidase Inhibitors, Growth Hormone
Gastrointestinal - Antiemetics, Proton Pump Inhibitors & Combos, Ulcerative Colitis
Genitourinary/Renal - Alpha Blockers for Benign Prostatic Hyperplasia
Hematologic - Anticoagulants
Miscellaneous - Pancreatic Enzymes
Ophthalmic - Nonsteroidal Antiinflammatory, Quinolones, Antihistamines, Carbonic Anhydrase Inhibitors, Prostaglandin Agonists
Osteoporosis - Bisphosphonates
Otic/Antibiotic - Quinolones and Combos
Respiratory - COPD Agents, Leukotriene Modifiers, Nasal Antihistamines, Nasal Corticosteroids
Topical - High/Medium/Low Potency Steroids, Topical Agents for Psoriasis, Antibiotics, Antivirals, Retinoids

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

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

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

Abbreviations

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

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

Tier Definitions

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

Brand/Generic Drug Designation

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

Contact Information

NH Healthy Families: 866-769-3085, www.nhhealthyfamilies.com

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			<i>dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG</i>	1	MP
Amphetamines			<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	NP	AL(At least 3 yrs old); MP
ADDERALL XR CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	Generic for Adderall XR; QL(1 EA daily); AL(At least 6 yrs old); MP	DYANAVEL XR TBCR	NP	
ADDERALL TABS (<i>amphetamine-dextroamphetamine</i>)	2	Generic for Adderall; QL(3 EA daily); MP	<i>lisdexamfetamine dimesylate CAPS</i>	NP	QL(1 EA daily); MP; PA
<i>amphetamine sulfate TABS</i>	1	Generic for Evekeo; MP; PA	<i>lisdexamfetamine dimesylate CHEW</i>	1	MP; PA
<i>amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG</i>	NP	MP	<i>methamphetamine hcl</i>	1	Generic for Desoxyx; 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	MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	MP
<i>amphetamine-dextroamphetamine TABS</i>	1	Generic for Adderall; QL(3 EA daily); MP	VYVANSE CAPS	2	QL(1 EA daily); MP; PA
<i>dextroamphetamine sulfate CP24 5 MG</i>	1	Generic for Dexedrine; QL(1 EA daily); AL(At least 6 yrs old); MP	VYVANSE CHEW	NP	MP; PA
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1	Generic for Dexedrine; QL(2 EA daily); AL(At least 6 yrs old); MP	XELSTRYM	NP	
<i>dextroamphetamine sulfate SOLN</i>	NP	Generic for Procentra; MP; PA	Analeptics		
<i>dextroamphetamine sulfate SOLN</i>	2	Generic for Procentra; MP; PA	<i>caffeine citrate SOLN PO</i>	1	QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail; MP
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1	AL(At least 3 yrs old); MP	Anorexiants Non-Amphetamine		
			<i>phentermine hcl-topiramate</i>	1	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		
			<i>liraglutide (weight management) 18 MG/3ML</i>	1	PA
			WEGOVY	2	PA
			ZEPBOUND SOAJ	2	PA
			ZEPBOUND SOLN	2	PA
			Attention-Deficit/Hyperactivity Disorder (ADHD)		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Agents			<i>methylphenidate hcl CP24</i>	NP	Generic for Aptensio XR; MP; PA
<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	AL(At least 6 yrs old); MP
QELBREE	NP	MP	<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	AL(At least 6 yrs old); MP
Stimulants - Misc.			<i>methylphenidate hcl TBCR 45 MG, 63 MG</i>	NP	AL(At least 6 yrs old)
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	NP	Generic for Aptensio XR; MP; PA	<i>methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG</i>	1	Generic for Concerta; AL(At least 6 yrs old); MP
AZSTARYS	NP	MP	RELEXXII TBCR 45 MG, 63 MG (<i>methylphenidate hcl</i>)	2	AL(At least 6 yrs old)
CONCERTA TBCR (<i>methylphenidate hcl</i>)	2	Generic for Concerta; AL(At least 6 yrs old); MP	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 54 MG	2	Generic for Concerta; AL(At least 6 yrs old); MP
<i>dexmethylphenidate hcl CP24</i>	1	Generic for Focalin XR; MP; PA	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 60 MG</i>	1	MP; PA	<i>ginger (zingiber officinalis) CAPS 250 MG</i>	1	QL(4 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG</i>	1	Generic for Ritalin LA; MP; PA	Alternative Medicine - M's		
			<i>melatonin TABS 3 MG, 5 MG</i>	1	QL(1 EA daily)
			AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		

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

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TOFIDENCE	NP	SP; PA	MOTRIN INFANTS DROPS SUSP (<i>ibuprofen</i>)	0	MP
TYENNE SOAJ	NP	SP; PA	<i>nabumetone</i>	1	MP
TYENNE SOLN	NP	SP; PA	<i>naproxen sodium TABS 275 MG, 550 MG</i>	1	MP
TYENNE SOSY	NP	SP; PA	<i>naproxen sodium TABS 220 MG</i>	1	QL(2 EA daily); MP
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>naproxen-esomeprazole magnesium</i>	NP	PA
ADVIL TABS (<i>ibuprofen</i>)	0	MP	<i>naproxen SUSP</i>	1	MP
<i>celecoxib</i>	1	QL(2 EA daily); PA	<i>naproxen TABS</i>	1	MP
CHILDRENS ADVIL SUSP 100 MG/5ML (<i>ibuprofen</i>)	0	MP; RX/OTC	<i>naproxen TBEC</i>	1	QL(2 EA daily); MP
CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>ibuprofen</i>)	0	MP; RX/OTC	<i>oxaprozin TABS</i>	1	MP
<i>diclofenac potassium TABS 50 MG</i>	1	MP	<i>piroxicam CAPS</i>	1	MP
<i>diclofenac sodium TB24</i>	1	MP	<i>sulindac TABS</i>	1	MP
<i>diclofenac sodium TBEC</i>	1	MP	<i>tolmetin sodium CAPS</i>	1	MP
<i>etodolac CAPS</i>	1	MP	<i>tolmetin sodium TABS 600 MG</i>	1	MP
<i>etodolac TABS</i>	1	MP	VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	NP	PA
<i>etodolac TB24</i>	1	MP	Phosphodiesterase 4 (PDE4) Inhibitors		
<i>flurbiprofen TABS</i>	1	MP	OTEZLA TABS	2	SP; PA
<i>ibuprofen CHEW</i>	0	MP	OTEZLA TBPK	2	SP; PA
<i>ibuprofen SUSP</i>	0	MP; RX/OTC	Pyrimidine Synthesis Inhibitors		
<i>ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG</i>	0	MP	<i>leflunomide</i>	1	QL(1 EA daily); MP
<i>indomethacin CAPS 25 MG, 50 MG</i>	1	MP	Soluble Tumor Necrosis Factor Receptor Agents		
<i>indomethacin CPCR</i>	1	MP	ENBREL MINI SOCT	2	SP; PA
INFANTS ADVIL SUSP (<i>ibuprofen</i>)	0	MP	ENBREL SURECLICK SOAJ	2	SP; PA
<i>ketoprofen CAPS 50 MG</i>	1	MP	ENBREL SOLN	2	SP; PA
<i>ketoprofen CP24</i>	1	MP	ENBREL SOSY	2	SP; PA
<i>ketorolac tromethamine TABS</i>	1	QL(20 EA per fill retail); AL(At least 17 yrs old); MP	ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>meloxicam TABS</i>	1	MP	Analgesic Combinations		
MOTRIN CHILDRENS CHEW (<i>ibuprofen</i>)	0	MP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)	<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	1	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)	<i>aspirin CHEW</i>	0	
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1		ASPIRIN SUPP 300 MG	0	QL(12 EA per fill retail)
<i>butalbital-aspirin-caffeine CAPS</i>	1	QL(4 EA daily)	<i>aspirin TABS 325 MG</i>	0	
Analgesics - Sodium Channel Pain Signal Inhibitors			<i>aspirin TBEC 81 MG, 325 MG</i>	0	
JOURNAVX	2	QL(30 EA per 60 day(s) retail; 30 EA per 60 days mail)	<i>diflunisal TABS</i>	1	MP
Analgesics Other			ECOTRIN ARTHRTIS PAIN TBEC (<i>aspirin</i>)	0	
<i>acetaminophen CHEW</i>	0		ECOTRIN TBEC (<i>aspirin</i>)	0	
<i>acetaminophen ELIX</i>	0		<i>salsalate</i>	1	
<i>acetaminophen LIQD 160 MG/5ML</i>	0		ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	0		Opioid Agonists		
<i>acetaminophen SUPP 120 MG, 650 MG</i>	0	QL(12 EA per fill retail)	<i>codeine sulfate TABS 30 MG</i>	1	QL(2 EA daily)
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	1		CODEINE SULFATE TABS	2	QL(2 EA daily)
<i>acetaminophen TABS 325 MG, 500 MG</i>	1		CONZIP CP24 (<i>tramadol hcl</i>)	NP	PA
FEVERALL JUNIOR STRENGTH SUPP	0	QL(12 EA per fill retail)	<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)
TYLENOL CHILDRENS CHEWABLES CHEW (<i>acetaminophen</i>)	0		<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	PA
Analgesics-Peptide Channel Blockers			<i>hydrocodone bitartrate CP12</i>	NP	
PRIALT	2	SP; PA	HYDROMORPHONE HCL SUPP	2	QL(12 EA per fill retail)
Salicylates			<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

Drug Name	Drug Tier	Requirements/ Limits
<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PA
<i>morphine sulfate beads</i>	NP	PA
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	PA
<i>morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML</i>	1	QL(240 ML per fill retail)
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	1	QL(16.67 ML daily)
<i>morphine sulfate SUPP</i>	1	QL(24 EA per fill retail)
<i>morphine sulfate TABS</i>	1	QL(6 EA daily)
<i>morphine sulfate TBCR</i>	1	QL(3 EA daily)
<i>OXAYDO TABS 5 MG</i>	2	QL(6 EA daily)
<i>oxycodone hcl CAPS</i>	1	QL(6 EA daily)
<i>oxycodone hcl CONC 100 MG/5ML</i>	1	QL(6 ML daily)
<i>oxycodone hcl SOLN</i>	1	
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily); PA
<i>oxycodone hcl T12A 80 MG</i>	1	PA
<i>oxycodone hcl TABS</i>	1	QL(6 EA daily)
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	
<i>oxymorphone hcl TB12 15 MG</i>	1	PA
<i>QDOLO SOLN (tramadol hcl)</i>	NP	
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	2	PA
<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	

Drug Name	Drug Tier	Requirements/ Limits
<i>tramadol hcl TB24</i>	1	PA
Opioid Combinations		
<i>acetaminophen w/ codeine SOLN</i>	1	QL(30 ML daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1	QL(4 EA daily)
<i>butalbital-aspirin-caffeine w/cod</i>	1	QL(4 EA daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1	QL(180 ML daily)
<i>hydrocodone-acetaminophen TABS 325 MG-5 MG</i>	1	QL(12 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-7.5 MG</i>	1	QL(8 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG</i>	1	QL(6 EA 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>tramadol-acetaminophen</i>	1	QL(4 EA daily)
Opioid Partial Agonists		
<i>BRIXADI (WEEKLY) SOSY</i>	2	SP
<i>BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML</i>	2	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	1	QL(3 EA daily)	ZUBSOLV SUBL 0.71 MG-2.9 MG	2	QL(6 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 EA daily)	ZUBSOLV SUBL 2.1 MG-8.6 MG	2	QL(2 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG</i>	1	QL(12 EA daily)	ZUBSOLV SUBL 2.9 MG-11.4 MG	2	QL(1.5 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG</i>	1	QL(6 EA daily)	ZUBSOLV SUBL 1.4 MG-5.7 MG	2	QL(3 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	1	QL(3 EA daily)	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	1	QL(12 EA daily)	Androgens		
<i>buprenorphine hcl SUBL</i>	1	PA	ANDROGEL PUMP GEL TD (<i>testosterone</i>)	2	PA
<i>buprenorphine PTWK</i>	1	PA	AVEED SOLN	2	SP; PA
BUTRANS PTWK (<i>buprenorphine</i>)	2	PA	FORTESTA GEL TD (<i>testosterone</i>)	NP	PA
SUBLOCADE SOSY	2	1 max fill(s) per 30 day(s) retail; SP	<i>methyltestosterone TABS</i>	1	
SUBOXONE FILM SL 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(6 EA daily)	TESTOPEL PLLT	2	SP; PA
SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 EA daily)	<i>testosterone cypionate SOLN IM 200 MG/ML</i>	1	QL(4 ML per 30 day(s) retail)
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 %</i>	2	
SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(2 EA daily)	<i>testosterone GEL TD 1.62 %, 10 MG/ACT, 1.62 %</i>	NP	PA
ZUBSOLV SUBL 0.36 MG-1.4 MG	2	QL(12 EA daily)	<i>testosterone GEL TD 20.25 MG/1.25GM, 40.5 MG/2.5GM</i>	1	PA
ZUBSOLV SUBL 0.18 MG-0.7 MG	2	QL(8 EA daily)	<i>testosterone GEL TD 1 %</i>	NP	
			<i>testosterone GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM</i>	1	
			<i>testosterone SOLN</i>	1	PA
			VOGELXO PUMP GEL TD (<i>testosterone</i>)	NP	
			ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
			Intrarectal Steroids		
			<i>hydrocortisone (intrarectal)</i>	1	QL(420 ML per fill retail)
			Rectal Combinations		

Drug Name	Drug Tier	Requirements/ Limits
<i>phenylephrine-shark liver oil-cocoa butter</i>	1	QL(48 EA per fill retail)
<i>phenylephrine-shark liver oil-mineral oil-petrolatum</i>	1	QL(12 GM per fill retail)
Rectal Local Anesthetics		
<i>pramoxine hcl (rectal) FOAM EX</i>	1	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 2.5 %</i>	1	QL(30 GM per fill retail)
<i>hydrocortisone (rectal) EX 1 %</i>	1	RX/OTC
PREPARATION H EX 1 %	2	RX/OTC
PREPARATION H SOOTHING RELIEF EX 1 %	2	RX/OTC
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD</i>	1	QL(16.53 ML daily)
<i>alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	1	QL(16.53 ML daily)
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP	2	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	1	QL(16.53 EA daily)
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>nitroglycerin SUBL</i>	1	MP
ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<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 50 MG</i>	1	MP
<i>hydroxyzine pamoate CAPS 25 MG, 100 MG</i>	1	
<i>meprobamate</i>	1	
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	NP	
<i>alprazolam TABS</i>	1	QL(4 EA daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam 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, 10 MG/2ML</i>	1	
<i>diazepam SOLN IJ 5 MG/ML</i>	NP	
<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 1 MG</i>	1	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
LOREEV XR CS24	NP	
<i>oxazepam CAPS</i>	NP	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1	MP
NORPACE CAPS (<i>disopyramide phosphate</i>)	2	MP
<i>quinidine gluconate TBCR</i>	1	MP
<i>quinidine sulfate TABS</i>	1	MP
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1	MP
<i>propafenone hcl TABS</i>	1	MP
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	1	MP
<i>dofetilide</i>	1	MP; PA
ANTI-ASTHMATIC 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	NP	SP; PA
TEZSPIRE SOSY	NP	SP; PA
XOLAIR SOAJ	2	SP; PA
XOLAIR SOLR	2	SP; PA
XOLAIR SOSY	2	SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Bronchodilators - Anticholinergics			<i>fluticasone propionate (inhalation) AEPB</i>	1	QL(2 EA daily)
ATROVENT HFA	2	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		Sympathomimetics		
Leukotriene Modulators			ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	2	QL(2 EA daily)
<i>montelukast sodium CHEW</i>	1	QL(1 EA daily); MP	ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	2	
<i>montelukast sodium PACK</i>	1	QL(1 EA daily)	AIRDUO DIGIHALER	NP	
<i>montelukast sodium TABS</i>	1	QL(1 EA daily); MP	AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	2	
<i>zafirlukast</i>	1		AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	2	
<i>zileuton TB12</i>	NP		AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	2	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors			AIRSUPRA	NP	
OHTUVAYRE	NP	SP	<i>albuterol sulfate AERS</i>	0	Limit 2 inhalers per month; QL(0.57 GM daily)
Steroid Inhalants			<i>albuterol sulfate AERS</i>	NP	Limit 2 inhalers per month; QL(1.2 GM daily)
ARMONAIR DIGIHALER	NP		<i>albuterol sulfate AERS</i>	0	Limit 2 inhalers per month; QL(0.45 GM daily)
ASMANEX (120 METERED DOSES) AEPB	2		<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	1	QL(375 ML per 30 day(s) retail)
ASMANEX (14 METERED DOSES) AEPB	2		<i>albuterol sulfate NEBU</i>	1	QL(2 EA daily)
ASMANEX (30 METERED DOSES) AEPB	2		<i>albuterol sulfate NEBU 0.083 %</i>	1	QL(375 ML per 25 day(s) retail)
ASMANEX (60 METERED DOSES) AEPB	2				
<i>budesonide (inhalation) SUSP</i>	1	QL(4 ML daily); AL(At least 1 yrs old - Up to 8 yrs old)			
FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	2	QL(2 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
ALBUTEROL SULFATE NEBU	2	QL(2 ML daily)
<i>albuterol sulfate SYRP</i>	1	MP
<i>albuterol sulfate TABS</i>	1	
BEVESPI AEROSPHERE	NP	
BREO ELLIPTA	2	
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</i>	1	
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	NP	
<i>levalbuterol tartrate</i>	1	
PROAIR DIGIHALER	NP	
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

Drug Name	Drug Tier	Requirements/ Limits
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(1.2 GM daily)
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	0	Limit 2 inhalers per month; QL(0.54 GM daily)
XOPENEX HFA (<i>levalbuterol tartrate</i>)	2	
Xanthines		
THEO-24 CP24 100 MG	2	MP
THEO-24 CP24 200 MG, 300 MG, 400 MG	2	
THEOPHYLLINE ER TB12 100 MG, 200 MG	2	
<i>theophylline ELIX</i>	1	
<i>theophylline SOLN</i>	1	QL(475 ML per fill retail); MP
<i>theophylline TB12 100 MG, 200 MG, 300 MG</i>	1	
<i>theophylline TB12 450 MG</i>	1	
<i>theophylline TB24</i>	1	MP
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1	MP
Direct Factor Xa Inhibitors		
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(4 EA daily)
ELIQUIS TABS	2	QL(4 EA daily)
<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 15 MG	2	QL(2 EA daily)
XARELTO TABS 2.5 MG (<i>rivaroxaban</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>levetiracetam TABS</i>	1	MP	<i>tiagabine hcl 2 MG, 4 MG</i>	1	MP
<i>levetiracetam TB24</i>	1	MP	<i>tiagabine hcl 12 MG, 16 MG</i>	1	
MOTPOLY XR CP24	NP		<i>vigabatrin PACK</i>	NP	SP; PA
<i>oxcarbazepine SUSP</i>	NP	MP	<i>vigabatrin TABS</i>	NP	SP; PA
<i>oxcarbazepine TABS</i>	1	MP	VIGAFYDE SOLN	NP	SP
<i>pregabalin CAPS</i>	1	PA	Hydantoins		
<i>pregabalin SOLN</i>	1	PA	DILANTIN (<i>phenytoin sodium extended</i>)	NP	MP
<i>primidone 50 MG, 250 MG</i>	1	MP	DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2	MP
<i>primidone 125 MG</i>	1		<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP	MP
<i>rufinamide SUSP</i>	1	SP	<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1	MP
TEGRETOL-XR TB12 (<i>carbamazepine</i>)	2	MP	<i>phenytoin CHEW</i>	1	MP
TOPAMAX SPRINKLE CPSP (<i>topiramate</i>)	NP	MP	<i>phenytoin SUSP</i>	1	MP
<i>topiramate CPSP 50 MG</i>	1		Succinimides		
<i>topiramate CPSP 15 MG, 25 MG</i>	1	MP	CELONTIN (<i>methsuximide</i>)	2	
<i>topiramate SOLN 25 MG/ML</i>	1		<i>ethosuximide CAPS</i>	1	MP
<i>topiramate TABS 50 MG, 100 MG, 200 MG</i>	1	MP	<i>ethosuximide SOLN</i>	1	MP
<i>topiramate TABS 25 MG</i>	1	QL(6 EA daily); MP	<i>methsuximide</i>	NP	
TRILEPTAL SUSP (<i>oxcarbazepine</i>)	2	MP	Valproic Acid		
ZONISADE SUSP	NP		DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	2	MP
<i>zonisamide CAPS</i>	1	MP	<i>divalproex sodium CSDR</i>	NP	MP
ZTALMY	NP		<i>divalproex sodium TB24</i>	1	MP
Carbamates			<i>divalproex sodium TBEC</i>	1	MP
<i>felbamate SUSP</i>	1		<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1	MP
<i>felbamate TABS</i>	1		<i>valproic acid CAPS</i>	1	MP
XCOPRI (250 MG DAILY DOSE) TBPk	NP		ANTIDEPRESSANTS - Drugs to Treat Depression		
XCOPRI TABS	NP		Alpha-2 Receptor Antagonists (Tetracyclics)		
GABA Modulators					
SABRIL PACK (<i>vigabatrin</i>)	2	SP; PA			
SABRIL TABS (<i>vigabatrin</i>)	2	SP; PA			

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

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

Drug Name	Drug Tier	Requirements/ Limits
trimipramine maleate CAPS	1	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
acarbose	1	
miglitol	1	
Antidiabetic Combinations		
alogliptin-metformin hcl	NP	QL(2 EA daily); MP
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	NP	QL(1 EA daily); MP
DUETACT (pioglitazone hcl-glimepiride)	NP	
glipizide-metformin hcl	1	MP
glyburide-metformin	1	MP
GLYXAMBI	2	
JANUMET XR TB24	2	
JANUMET TABS	2	
JENTADUETO TABS	2	QL(2 EA daily); AL(At least 18 yrs old); MP
KAZANO (alogliptin-metformin hcl)	NP	QL(2 EA daily); MP
KOMBIGLYZE XR (saxagliptin-metformin hcl)	NP	
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (alogliptin-pioglitazone)	NP	QL(1 EA daily); MP
pioglitazone hcl-glimepiride	NP	
pioglitazone hcl-metformin hcl TABS	1	QL(2 EA daily); MP
saxagliptin-metformin hcl	NP	
SITAGLIPTIN BASE-METFORMIN HCL TABS	NP	
ZITUVIMET TABS	NP	
Biguanides		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLUMETZA TB24 (<i>metformin hcl</i>)	NP		TRUEPLUS GLUCOSE ON THE GO CHEW	2	QL(1.67 EA daily); MP
<i>metformin hcl SOLN</i>	1		TRUEPLUS GLUCOSE CHEW	2	QL(1.67 EA daily); MP
<i>metformin hcl TABS 625 MG</i>	NP		WALGREENS GLUCOSE CHEW	2	QL(1.67 EA daily); MP
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	1	MP	ZEGALOGUE SOAJ	2	
<i>metformin hcl TABS 750 MG</i>	1		ZEGALOGUE SOSY	2	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP		Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>metformin hcl TB24 500 MG, 750 MG</i>	1	MP	<i>alogliptin benzoate</i>	NP	QL(1 EA daily); MP
Diabetic Other			JANUVIA	2	
BAQSIMI ONE PACK POWD	2	QL(0.069 EA daily)	NESINA (<i>alogliptin benzoate</i>)	NP	QL(1 EA daily); MP
BAQSIMI TWO PACK POWD	2	QL(0.069 EA daily)	ONGLYZA (<i>saxagliptin hcl</i>)	NP	
BD GLUCOSE CHEW	2	QL(1.67 EA daily); MP	<i>saxagliptin hcl</i>	1	
CVS GLUCOSE CHEW	2	QL(1.67 EA daily); MP	SITAGLIPTIN	NP	
CVS SOFT GLUCOSE CHEW	2	QL(1.67 EA daily); MP	TRADJENTA	2	QL(1 EA daily); AL(At least 18 yrs old); MP
<i>diazoxide</i>	NP		ZITUVIO	NP	
FT GLUCOSE CHEW 4 GM	2	QL(1.67 EA daily); MP	Incretin Mimetic Agents		
GLUCAGON EMERGENCY SOLR IJ 1 MG (<i>glucagon</i>)	2	QL(1 EA per fill retail); MP	<i>exenatide SOPN 5 MCG/0.02ML</i>	1	QL(1.2 ML per 30 day(s) retail); AL(At least 18 yrs old); PA
<i>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
GLUCO TO GO CHEW	2	QL(1.67 EA daily); MP	<i>liraglutide</i>	NP	QL(0.3 ML daily); PA
GLUCOSE CHEW	2	QL(1.67 EA daily); MP	MOUNJARO	NP	PA
GNP GLUCOSE CHEW	2	QL(1.67 EA daily); MP	OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	PA
GVOKE KIT SOLN	NP		OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	PA
<i>mifepristone (hyperglycemia)</i>	1	SP; PA	OZEMPIC (2 MG/DOSE) SOPN	2	PA
PROGLYCEM (<i>diazoxide</i>)	2				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RYBELSUS TABS	NP	PA	INSULIN GLARGINE-YFGN SOPN	2	Generic for Semglee
TRULICITY	2	PA	INSULIN LISPRO (1 UNIT DIAL) SOPN	2	QL(30 ML per 30 day(s) retail)
VICTOZA (<i>liraglutide</i>)	2	QL(0.3 ML daily); PA	INSULIN LISPRO JUNIOR KWIKPEN SOPN	2	
Insulin			INSULIN LISPRO PROT & LISPRO SUPN	2	QL(30 ML per 30 day(s) retail)
HUMALOG JUNIOR KWIKPEN SOPN	NP		INSULIN LISPRO SOLN IJ	2	QL(40 ML per 30 day(s) retail)
HUMALOG KWIKPEN SOPN 100 UNIT/ML	NP	QL(30 ML per 30 day(s) retail)	LEVEMIR FLEXPEN SOPN	NP	
HUMALOG MIX 50/50 KWIKPEN SUPN	NP	QL(30 ML per 30 day(s) retail)	LEVEMIR SOLN	NP	
HUMALOG MIX 50/50 SUSP	2	QL(40 ML per 30 day(s) retail)	LYUMJEV TEMPO PEN SOPN	NP	
HUMALOG MIX 75/25 KWIKPEN SUPN	NP	QL(30 ML per 30 day(s) retail)	NOVOLOG 70/30 FLEXPEN RELION SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMALOG MIX 75/25 SUSP	NP	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 FLEXPEN SUPN	NP	QL(30 ML per 30 day(s) retail)
HUMALOG TEMPO PEN SOPN	NP		NOVOLOG MIX 70/30 RELION SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMALOG SOLN IJ	NP	QL(40 ML per 30 day(s) retail)	NOVOLOG MIX 70/30 SUSP	NP	QL(40 ML per 30 day(s) retail)
HUMULIN 70/30 SUSP	2	QL(40 ML per 30 day(s) retail)	REZVOGLAR KWIKPEN	NP	
HUMULIN N SUSP	2	QL(40 ML per 30 day(s) retail)	SEMGLEE (YFGN) SOLN	NP	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2		SEMGLEE (YFGN) SOPN	NP	
HUMULIN R U-500 KWIKPEN SOPN SC	2		Insulin Sensitizing Agents		
HUMULIN R SOLN IJ	2	QL(40 ML per 30 day(s) retail)	<i>pioglitazone hcl</i>	1	QL(1 EA daily); MP
INSULIN ASP PROT & ASP FLEXPEN SUPN	2	QL(30 ML per 30 day(s) retail)	Meglitinide Analogues		
INSULIN ASPART PROT & ASPART SUSP	2	QL(40 ML per 30 day(s) retail)	<i>nateglinide</i>	1	QL(3 EA daily); MP
INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	2	QL(30 ML per 30 day(s) retail)	<i>repaglinide</i>	1	
INSULIN GLARGINE SOLN	2		Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
INSULIN GLARGINE-YFGN SOLN	2	Generic for Semglee	<i>dapagliflozin propanediol</i>	NP	
			FARXIGA (<i>dapagliflozin propanediol</i>)	2	
			INVOKANA	NP	MP
			JARDIANCE	2	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Sulfonylureas			BIOHM PROBIOTIC/VITAMIN C CAPS	2	RX/OTC
<i>glimepiride 3 MG</i>	1		BIO-KULT CAPS	2	RX/OTC
<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily); MP	BIOZEN CAPS	2	RX/OTC
<i>glimepiride 4 MG</i>	1	QL(2 EA daily); MP	<i>bismuth subsalicylate CHEW 262 MG</i>	1	
<i>glipizide TABS 2.5 MG</i>	1		<i>bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML</i>	1	
<i>glipizide TABS 5 MG, 10 MG</i>	1	MP	COMPLETE PROBIOTIC PEARLS CAPS	2	RX/OTC
<i>glipizide TB24</i>	1	MP	CULTURELLE BLOATING & GAS DEF CAPS	2	RX/OTC
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	MP	CULTURELLE IMMUNE DEFENSE CAPS	2	RX/OTC
<i>glyburide TABS</i>	1	MP	CULTURELLE KID PROBIOTIC+FIBER PACK	2	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea			CULTURELLE KIDS PURELY CHEW	2	
Antidiarrheal/Probiotic Agents - Misc.			CULTURELLE KIDS PURELY PACK	2	
ACIDOPHILUS HIGH-POTENCY CAPS	2	RX/OTC	CULTURELLE KIDS CHEW	2	
ACIDOPHILUS PEARLS CAPS	2	RX/OTC	CULTURELLE KIDS PACK	2	
ACIDOPHILUS PROBIOTIC BLEND CAPS	2	RX/OTC	CULTURELLE METABOLISM-WEIGHT CAPS	2	RX/OTC
ACTIPHLOA CAPS	2	RX/OTC	CULTURELLE PROBIOTICS KIDS PACK	2	
ADVANCED PROBIOTIC-14 CAPS	2	RX/OTC	CULTURELLE PRO-WELL CAPS	2	RX/OTC
ADVANCED PROBIOTIC CAPS	2	RX/OTC	CVS ADULT 50+ PROBIOTIC CAPS	2	RX/OTC
ALIGN EXTRA STRENGTH CAPS	2	RX/OTC	CVS ADULT PROBIOTIC CAPS	2	RX/OTC
ALIGN CAPS 10 MG	2	RX/OTC	CVS DAILY PROBIOTIC CHILDRENS PACK	2	
ALOE 10000 & PROBIOTICS CAPS	2	RX/OTC			
BACICAP CAPS	2	RX/OTC			
BACID CAPS	2	RX/OTC			
BILAC CAPS	2	RX/OTC			
BIOCORE DAILY CAPS	2	RX/OTC			
BIOHM PROBIOTIC SUPPLEMENT CAPS	2	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CVS DAILY PROBIOTIC CAPS	2	RX/OTC	DIGESTIVE ADVANTAGE CAPS	2	RX/OTC
CVS DIGESTIVE PROBIOTIC CAPS	2	RX/OTC	ENVIVE CAPS	2	RX/OTC
CVS EVERYDAY CARE PROBIOTIC CAPS	2	RX/OTC	EQ PROBIOTIC CAPS	2	RX/OTC
CVS MOOD SUPPORT PROBIOTIC CAPS	2	RX/OTC	EQ PROBIOTIC CPDR	2	
CVS PROBIOTIC ADULT 50+ CAPS	2	RX/OTC	EQL DAILY PROBIOTIC CAPS	2	RX/OTC
CVS PROBIOTIC MAXIMUM STRENGTH CAPS	2	RX/OTC	EQL PROBIOTIC COLON SUPPORT CAPS	2	RX/OTC
CVS PROBIOTIC PEARLS EX ST CAPS	2	RX/OTC	ESTROVEN SLIMBIOTICS CAPS	2	RX/OTC
CVS PROBIOTIC CAPS	2	RX/OTC	FEM-DOPHILUS WOMENS CAPS	2	RX/OTC
CVS SENIOR PROBIOTIC CAPS	2	RX/OTC	FLORA VANCE CAPS	2	RX/OTC
DAILY DIGESTIVE PROBIOTIC CAPS	2	RX/OTC	FLORAJEN DIGESTION CAPS	2	RX/OTC
DAILY PROBIOTIC CAPS	2	RX/OTC	FLORAJEN KIDS CAPS	2	RX/OTC
DAILY ULTIMATE PROBIOTIC-14 CAPS	2	RX/OTC	FLORASAVE CPDR	2	
DERMACINRX PROBISOL CAPS	2	RX/OTC	FLORASTOR ADVANCED CAPS	2	RX/OTC
DERMACINRX PROBITRAN CAPS	2	RX/OTC	FLORASTOR DIGEST DE-STRESS CAPS	2	RX/OTC
DIGESTIVE ADV DIGESTIVE/IMMUNE CAPS	2	RX/OTC	FLORASTOR SELECT GUT BOOST CAPS	2	RX/OTC
DIGESTIVE ADV LACTOSE SUPPORT CAPS	2	RX/OTC	FLORASTOR SELECT IMMUNITY BOOS CAPS	2	RX/OTC
DIGESTIVE ADV MULTI-STRAIN CAPS	2	RX/OTC	FLORRAXIS CAPS	2	RX/OTC
DIGESTIVE ADV+BOWEL SUPPORT CAPS	2	RX/OTC	FORTIFY 30 BILLION PROBIOT 50+ CPDR	2	
DIGESTIVE ADV+GAS DEFENSE CAPS	2	RX/OTC	FORTIFY 50 BILLION PROBIOT 50+ CPDR	2	
DIGESTIVE ADV+LACTOSE SUPPORT CAPS	2	RX/OTC	FORTIFY DAILY PROBIOTIC EX ST CPDR	2	
			FORTIFY DAILY PROBIOTIC CAPS	2	RX/OTC
			FORTIFY OPTIMA PROBIOTIC CPDR	2	
			FORTIFY OPTIMA WOMENS ADV CARE CPDR	2	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FORTIFY PROBIOTIC WOMENS EX ST CPDR	2		MOMMY'S BLISS PROBIOTIC PACK	2	
FORTIFY PROBIOTIC WOMENS CPDR	2		MVW COMPL FORM PROBIOTIC-KIDS CPDR	2	
FT ACIDOPHILUS PROBIOTIC BLEND CAPS	2	RX/OTC	MVW COMPLETE PROBIOTIC CPDR	2	
FT PROBIOTIC ADVANCED CAPS	2	RX/OTC	NATRUL PROBIOTIC CAPS	2	RX/OTC
GENORAVANCE CAPS	2	RX/OTC	NEXABIOTIC CPDR	2	
GNP ACIDOPHILUS HIGH POTENCY CAPS	2	RX/OTC	PEARLS IC CAPS	2	RX/OTC
GNP ADVANCED PROBIOTIC CAPS	2	RX/OTC	PHILLIPS COLON HEALTH CAPS	2	RX/OTC
GNP PROBIOTIC COLON SUPPORT CAPS	2	RX/OTC	PREORBOTIC CAPS	2	RX/OTC
HIGH POTENCY PROBIOTIC CAPS	2	RX/OTC	PRIMADOPHILUS BIFIDUS CPDR	2	
JARRO-DOPHILUS EPS PROBIOTIC CPDR	2		PRIMIDAR CAPS	2	RX/OTC
JARRO-DOPHILUS EPS CPDR	2		PROBINATE CAPS	2	RX/OTC
JARRO-DOPHILUS HYPOALLERGENIC CAPS	2	RX/OTC	PROBIO DEFENSE CAPS	2	RX/OTC
JARRO-DOPHILUS PROBIOT+PRE+FOS CAPS	2	RX/OTC	PROBIOFLEXX CAPS	2	RX/OTC
JARRO-DOPHILUS VAGINAL PROBIOT CPDR	2		PROBIOMAX COMPLETE DF CAPS	2	RX/OTC
LACTEROL CAPS	2	RX/OTC	PROBIOMAX DAILY DF CAPS	2	RX/OTC
LACTOVIVE CAPS	2	RX/OTC	PROBIOMAX IG 26 DF CAPS	2	RX/OTC
LUMIVA CAPS	2	RX/OTC	PROBIOMAX LEAN DF CAPS	2	RX/OTC
MAGE CPDR	2		PROBIOMAX SB DF CAPS	2	RX/OTC
MEGA PROBIOTIC CAPS	2	RX/OTC	PROBIONEXX CAPS	2	RX/OTC
META BIOTIC/BIO-ACTIVE 12 CAPS	2	RX/OTC	PROBIOTIC + OMEGA-3 CAPS	2	RX/OTC
MICROBALANCE CAPS	2	RX/OTC	PROBIOTIC + TURMERIC EXTRACT CAPS	2	RX/OTC
MICROFLOR 33 CAPS	2	RX/OTC	PROBIOTIC 10 ULTRA STRENGTH CAPS	2	RX/OTC
MICROFLOR CAPS	2	RX/OTC	PROBIOTIC ADVANCED FORMULA CAPS	2	RX/OTC
			PROBIOTIC BLEND CAPS	2	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PROBIOTIC COLON SUPPORT CAPS	2	RX/OTC	SUPERIOR PROBIOTIC CAPS	2	RX/OTC
PROBIOTIC DAILY CAPS	2	RX/OTC	SUREBIOTIC PROBIOTIC SUPPORT CAPS	2	RX/OTC
PROBIOTIC DIGESTIVE SUPP CAPS	2	RX/OTC	SV PROBIOTIC EXTRA STRENGTH CAPS	2	RX/OTC
PROBIOTIC MATURE ADULT CAPS	2	RX/OTC	TRUBIOTICS DIGEST + IMM HEALTH CAPS	2	RX/OTC
PROBIOTIC PEARLS ADVANTAGE CAPS	2	RX/OTC	TRUBIOTICS CAPS	2	RX/OTC
PROBIOTIC PEARLS MAX POTENCY CAPS	2	RX/OTC	ULTRAFLOA IMMUNE HEALTH CAPS	2	RX/OTC
PROBIOTIC PEARLS WOMENS CAPS	2	RX/OTC	UP4 PROBIOTICS ADULT CAPS	2	RX/OTC
PROBIOTIC PEARLS CAPS	2	RX/OTC	UP4 PROBIOTICS MENS CAPS	2	RX/OTC
PROBIOTIC PRODUCT CAPS	2	RX/OTC	UP4 PROBIOTICS ULTRA CAPS	2	RX/OTC
PROBIOTIC/PREBIOTIC/ CRANBERRY CAPS	2	RX/OTC	UP4 PROBIOTICS WOMENS CAPS	2	RX/OTC
PROBITROL CAPS	2	RX/OTC	VH ESSENTIALS OPTIBALANCE CAPS	2	RX/OTC
PROBIZEN CAPS	2	RX/OTC	VISBIOME GI CARE CAPS	2	RX/OTC
PRO-FLOA IMMUNE CAPS	2	RX/OTC	VSL#3 CAPS	2	RX/OTC
PROMELLA IN PREBIOTIC CAPS	2	RX/OTC	WELLPRO 31 CAPS	2	RX/OTC
PROMEROL CAPS	2	RX/OTC	XYBIOTIC CAPS	2	RX/OTC
PRORIVA CAPS	2	RX/OTC	ZELAC CAPS	2	RX/OTC
QUAD-PROBIOTIC CAPS	2	RX/OTC	Antidiarrheal/Probiotic Combinations		
RELIBIOTIC CAPS	2	RX/OTC	CULTURELLE ADULT ULT BALANCE CAPS	2	
RESTORA CAPS	2	RX/OTC	CULTURELLE DIGESTIVE DAILY PRO CAPS	2	
RISAQUAD-2 CAPS	2	RX/OTC	CULTURELLE DIGESTIVE DAILY CAPS	2	
RISAQUAD CAPS	2	RX/OTC	CULTURELLE DIGESTIVE HEALTH CAPS	2	
SD PROBIOTIC-10 COMPLEX ULTRA CAPS	2	RX/OTC	CULTURELLE DIGESTIVE HEALTH CHEW	2	
SM ADVANCED PROBIOTIC CAPS	2	RX/OTC			
SUPER PROBIOTIC DIGESTIVE CAPS	2	RX/OTC			
SUPER PROBIOTIC CAPS	2	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
CULTURELLE HEALTH (INULIN) CAPS	2	
CULTURELLE ULTIMATE STRENGTH CAPS	2	
GNP PROBIOTIC EXTRA STRENGTH CAPS	2	
PROBIOTIC DIGESTIVE SUPPORT CAPS	2	
VIActiv DIGESTIVE HEALTH CHEW	2	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1	
<i>diphenoxylate w/ atropine TABS</i>	1	
<i>loperamide hcl CAPS</i>	1	QL(8 EA daily); RX/OTC
<i>loperamide hcl TABS</i>	1	QL(8 EA daily)
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	2	
<i>deferasirox PACK</i>	1	SP; PA
<i>deferasirox TABS</i>	1	SP; PA
<i>deferasirox TBSO</i>	1	SP; PA
<i>deferiprone TABS</i>	1	SP; PA
FERRIPROX SOLN	2	SP; PA
Antidotes and Specific Antagonists		
ANDEXXA 200 MG	2	SP; PA
BRIDION SOLN	2	PA
<i>deferoxamine mesylate</i>	1	SP; PA
SM IPECAC SYRUP	2	
VISTOGARD	2	
Opioid Antagonists		
KLOXXADO LIQD	0	QL(18 EA per 90 day(s) retail); MP

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>meclizine hcl CHEW</i>	1	RX/OTC	<i>chlorpheniramine maleate SYRP</i>	1	QL(60 ML daily)
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC	<i>chlorpheniramine maleate TABS</i>	1	QL(120 EA per fill retail)
Antiemetics - Miscellaneous			<i>dexchlorpheniramine maleate SOLN</i>	1	
BONJESTA TBCR	2		Antihistamines - Ethanolamines		
<i>doxylamine-pyridoxine TBEC</i>	1		BENADRYL ALLERGY EXTRA STR TABS	2	QL(4 EA daily)
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			<i>clemastine fumarate TABS 1.34 MG</i>	1	QL(2 EA daily)
APONVIE EMUL	NP		DAYHIST ALLERGY 12 HOUR RELIEF TABS	2	QL(2 EA daily)
<i>aprepitant CAPS</i>	1		<i>diphenhydramine hcl CAPS</i>	1	QL(4 EA daily)
ANTIFUNGALS - Drugs to Treat Fungal Infections			<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1	QL(240 ML per fill retail)
Antifungals			<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1	QL(240 ML per fill retail)
<i>griseofulvin microsize SUSP</i>	1		<i>diphenhydramine hcl TABS 25 MG</i>	1	QL(4 EA daily)
<i>griseofulvin microsize TABS</i>	1		Antihistamines - Non-Sedating		
<i>griseofulvin ultramicrosize</i>	1		<i>cetirizine hcl CAPS</i>	1	
<i>nystatin TABS</i>	1	QL(6 EA daily)	<i>cetirizine hcl CHEW</i>	1	QL(1 EA daily)
<i>terbinafine hcl TABS</i>	1	QL(1 EA daily; 90 EA per 120 day(s) retail)	<i>cetirizine hcl SOLN PO</i>	1	QL(240 ML per fill retail); RX/OTC
Imidazole-Related Antifungals			<i>cetirizine hcl SYRP PO 1 MG/ML</i>	1	QL(240 ML per fill retail); RX/OTC
<i>fluconazole SUSR</i>	1	QL(70 ML per fill retail)	<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)
<i>fluconazole TABS 150 MG</i>	1	QL(2 EA daily)	<i>desloratadine TBDP</i>	NP	
<i>fluconazole TABS 200 MG</i>	1		<i>fexofenadine hcl SUSP</i>	1	
<i>fluconazole TABS 50 MG</i>	1	QL(7 EA per fill retail)	<i>fexofenadine hcl TABS 180 MG</i>	1	QL(1 EA daily)
<i>fluconazole TABS 100 MG</i>	1	QL(1 EA daily)	<i>fexofenadine hcl TABS 60 MG</i>	1	QL(2 EA daily)
<i>itraconazole CAPS</i>	1	QL(1 EA daily); PA	<i>levocetirizine dihydrochloride SOLN</i>	1	RX/OTC
<i>itraconazole SOLN</i>	1	PA	<i>loratadine CAPS</i>	1	
ANTIHISTAMINES - Drugs to Treat Allergies					
Antihistamines - Alkylamines					

Drug Name	Drug Tier	Requirements/ Limits
<i>loratadine CHEW</i>	1	
<i>loratadine SOLN</i>	1	QL(240 ML per fill retail)
<i>loratadine TABS</i>	1	
<i>loratadine TBDP 10 MG</i>	1	
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	1	QL(240 ML per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl SUPP</i>	1	QL(12 EA per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl TABS</i>	1	AL(At least 2 yrs old)
Antihistamines - Piperidines		
<i>ciproheptadine hcl SYRP</i>	1	
<i>ciproheptadine hcl TABS</i>	1	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1	
Antihyperlipidemics - Misc.		
<i>omega-3-acid ethyl esters</i>	1	
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1	MP
<i>cholestyramine light POWD</i>	1	MP
<i>cholestyramine PACK</i>	1	MP
<i>cholestyramine POWD</i>	1	MP
<i>colestipol hcl GRAN</i>	1	MP
<i>colestipol hcl TABS</i>	1	MP
Fibric Acid Derivatives		
<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

Drug Name	Drug Tier	Requirements/ Limits
<i>fenofibrate micronized 43 MG, 130 MG</i>	1	
<i>fenofibrate CAPS</i>	2	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	
<i>FENOGLIDE TABS (fenofibrate)</i>	NP	
<i>FIBRICOR (fenofibric acid)</i>	NP	
<i>gemfibrozil TABS</i>	1	QL(2 EA daily); MP
<i>LIPOFEN CAPS (fenofibrate)</i>	NP	MP
HMG CoA Reductase Inhibitors		
<i>ATORVALIQ SUSP</i>	NP	
<i>atorvastatin calcium TABS</i>	1	QL(1 EA daily); MP
<i>fluvastatin sodium CAPS</i>	NP	
<i>fluvastatin sodium TB24</i>	NP	
<i>LESCOL XL TB24 (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 5 MG, 10 MG, 20 MG, 40 MG</i>	1	QL(1 EA daily); MP
<i>simvastatin TABS 80 MG</i>	1	MP
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
<i>JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG</i>	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1	MP
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LEQVIO	NP	SP; PA
PRALUENT SOAJ	2	SP; PA
REPATHA PUSHTRONEX SYSTEM SOCT	2	SP; PA
REPATHA SURECLICK SOAJ	2	SP; PA
REPATHA SOSY	2	SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl 40 MG</i>	1	QL(2 EA daily); MP
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	1	QL(1 EA daily); MP
<i>captopril</i>	1	QL(3 EA daily); MP
<i>enalapril maleate TABS</i>	1	QL(2 EA daily); MP
<i>fosinopril sodium</i>	1	QL(1 EA daily); MP
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	MP
<i>moexipril hcl</i>	NP	
<i>perindopril erbumine</i>	NP	
<i>quinapril hcl</i>	1	QL(1 EA daily); MP
<i>ramipril CAPS</i>	1	QL(2 EA daily); MP
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily); MP
<i>trandolapril 4 MG</i>	1	QL(2 EA daily); MP
Agents for Pheochromocytoma		
<i>metyrosine</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1	
<i>irbesartan</i>	1	QL(1 EA daily); MP
<i>losartan potassium</i>	1	QL(1 EA daily); MP
<i>olmesartan medoxomil</i>	1	
<i>telmisartan</i>	1	
<i>valsartan SOLN</i>	NP	
<i>valsartan TABS</i>	1	QL(1 EA daily); MP
Antiadrenergic Antihypertensives		
<i>clonidine hcl TABS</i>	1	MP
<i>doxazosin mesylate</i>	1	MP
<i>guanfacine hcl</i>	1	MP
<i>methyldopa TABS</i>	1	MP
<i>prazosin hcl CAPS</i>	1	MP
<i>terazosin hcl</i>	1	MP
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(3 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1	QL(1 EA daily); MP
<i>amlodipine besylate-olmesartan medoxomil</i>	1	
<i>amlodipine besylate-valsartan</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	
<i>atenolol & chlorthalidone</i>	1	QL(1 EA daily); MP
<i>benazepril & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>bisoprolol & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
<i>captopril & hydrochlorothiazide</i>	NP	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/ Limits
<i>enalapril maleate & hydrochlorothiazide</i>	1	QL(2 EA daily); MP
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide)	NP	
<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 EA daily); MP
<i>irbesartan-hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>lisinopril & hydrochlorothiazide</i>	1	MP
<i>losartan potassium & hydrochlorothiazide</i>	1	QL(1 EA daily); MP
<i>metoprolol & hydrochlorothiazide TABS</i>	NP	QL(2 EA daily); MP
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 EA daily)
<i>telmisartan-amlodipine</i>	1	
<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		

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

Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin palmitate hydrochloride</i>	1	QL(100 ML per fill retail)
Monobactams		
CAYSTON	NP	SP; PA
Oxazolidinones		
SIVEXTRO TABS	2	QL(6 EA per fill retail); PA
Urinary Anti-infectives		
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	QL(40 ML daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
COARTEM	2	QL(24 EA per fill retail)
Antimalarials		
<i>chloroquine phosphate TABS 500 MG</i>	0	QL(8 EA per 56 day(s) retail)
<i>chloroquine phosphate TABS 250 MG</i>	0	QL(2 EA daily); MP
DARAPRIM (<i>pyrimethamine</i>)	NP	SP; PA
KRINTAFEL	2	QL(2 EA per 30 day(s) retail)
<i>mefloquine hcl</i>	1	
<i>pyrimethamine</i>	1	SP; PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	2	SP; PA
<i>pyridostigmine bromide TABS 60 MG</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>temozolomide CAPS</i>	1	SP; PA	LENVIMA (14 MG DAILY DOSE)	2	SP; PA
VIVIMUSTA SOLN	2	SP; PA	LENVIMA (18 MG DAILY DOSE)	2	SP; PA
YONDELIS	2	SP; PA	LENVIMA (20 MG DAILY DOSE)	2	SP; PA
Antimetabolites			LENVIMA (24 MG DAILY DOSE)	2	SP; PA
<i>azacitidine SUSR</i>	1	SP; PA	LENVIMA (4 MG DAILY DOSE)	2	SP; PA
<i>capecitabine</i>	1	SP; PA	LENVIMA (8 MG DAILY DOSE)	2	SP; PA
<i>cladribine 10 MG/10ML</i>	1	SP; PA	MVASI	2	SP; PA
<i>cytarabine SOLN</i>	1	SP; PA	ZALTRAP	2	SP; PA
<i>decitabine</i>	1	SP; PA	Antineoplastic - Antibodies		
<i>fludarabine phosphate SOLN</i>	1	SP; PA	ADCETRIS	2	SP; PA
FLUDARABINE PHOSPHATE SOLN	2	SP; PA	ARZERRA	2	SP; PA
<i>fludarabine phosphate SOLR</i>	1	SP; PA	BLINCYTO	2	SP; PA
FOLOTYN	2	SP; PA	DARZALEX	2	SP; PA
<i>mercaptopurine SUSP 2000 MG/100ML</i>	1		EMPLICITI	2	SP; PA
<i>mercaptopurine TABS</i>	1		GAZYVA	2	SP; PA
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	1		KADCYLA	2	SP; PA
<i>methotrexate sodium TABS 2.5 MG</i>	1	MP	KEYTRUDA	2	SP; PA
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	1	SP; PA	LIBTAYO	2	SP; PA
<i>pralatrexate</i>	1	SP; PA	LUMOXITI	2	SP; PA
TABLOID	2	SP; PA	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	2	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	2		POLIVY 140 MG	2	SP; PA
Antineoplastic - Angiogenesis Inhibitors			POTELIGEO	2	SP; PA
AVASTIN	2	SP; PA	RITUXAN	2	SP; PA
CYRAMZA	2	SP; PA	TECENTRIQ	2	SP; PA
INLYTA	2	SP; PA	UNITUXIN	2	SP; PA
LENVIMA (10 MG DAILY DOSE)	2	SP; PA	YERVOY	2	SP; PA
LENVIMA (12 MG DAILY DOSE)	2	SP; PA	ZEVALIN Y-90	2	SP; PA
			Antineoplastic - Anti-HER2 Agents		
			KANJINTI 420 MG	2	SP; PA
			PERJETA	2	SP; PA
			Antineoplastic - BCL-2 Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VENCLEXTA STARTING PACK TBPK	2	SP; PA	<i>hydroxyprogesterone caproate (antineoplastic)</i>	1	QL(41.67 ML daily); AL(At least 16 yrs old); SP; PA
VENCLEXTA TABS	2	SP; PA	<i>letrozole</i>	1	QL(1 EA daily); MP
Antineoplastic - Cellular Immunotherapy			<i>leuprolide acetate (3 month) INJ 22.5 MG</i>	1	
KYMRIAH	2	SP; PA	LEUPROLIDE ACETATE-BUIVACAINE	2	SP; PA
PROVENGE	2	SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	1	SP; PA
YESCARTA	2	SP; PA	LUPRON DEPOT (1-MONTH) KIT IM	2	SP; PA
Antineoplastic - EGFR Inhibitors			LUPRON DEPOT (3-MONTH) KIT IM	2	SP; PA
ERBITUX	2	SP; PA	LUPRON DEPOT (4-MONTH) IM	2	SP; PA
<i>erlotinib hcl</i>	1	SP; PA	LUPRON DEPOT (6-MONTH) IM	2	SP; PA
<i>gefitinib</i>	1	SP; PA	LUTRATE DEPOT INJ 22.5 MG	2	
GILOTRIF	2	SP; PA	LYSODREN	2	SP; PA
PORTRAZZA	2	SP; PA	<i>megestrol acetate SUSP</i>	1	
TAGRISO	2	SP; PA	<i>megestrol acetate TABS</i>	1	
VECTIBIX 100 MG/5ML, 400 MG/20ML	2	SP; PA	<i>tamoxifen citrate TABS</i>	1	MP
VIZIMPRO	2	SP; PA	<i>toremifene citrate</i>	1	PA
Antineoplastic - Hedgehog Pathway Inhibitors			TRELSTAR MIXJECT 3.75 MG	2	SP; PA
DAURISMO	2	SP; PA	TRELSTAR MIXJECT 11.25 MG, 22.5 MG	2	SP; PA
ERIVEDGE	2	SP; PA	VABRINTY SC 22.5 MG, 30 MG, 45 MG	2	SP; PA
ODOMZO	2	SP; PA	XTANDI CAPS	2	SP; PA
Antineoplastic - Hormonal and Related Agents			ZOLADEX 3.6 MG	2	SP; PA
<i>abiraterone acetate</i>	1	SP; PA	ZOLADEX 10.8 MG	2	SP; PA
<i>anastrozole</i>	1	MP	Antineoplastic - Immunomodulators		
<i>bicalutamide</i>	1	QL(1 EA daily)	POMALYST	2	SP; PA
CAMCEVI	2	SP	Antineoplastic Antibiotics		
ELIGARD SC 22.5 MG, 30 MG, 45 MG	2	SP; PA	<i>daunorubicin hcl SOLN 50 MG/10ML</i>	1	SP; PA
ELIGARD KIT SC 7.5 MG	2	SP; PA			
EMCYT	2	SP; PA			
ERLEADA 60 MG	2	SP; PA			
EULEXIN	2				
<i>exemestane</i>	1				
FIRMAGON 80 MG	2	SP; PA			
FIRMAGON (240 MG DOSE)	2	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELLEENCE SOLN	2	SP; PA	KYPROLIS	2	SP; PA
<i>mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML</i>	1	SP; PA	<i>lapatinib ditosylate</i>	1	SP; PA
<i>valrubicin</i>	1	SP; PA	LORBRENA	2	SP; PA
Antineoplastic Combinations			MEKINIST TABS	2	SP; PA
HERCEPTIN HYLECTA	2	SP; PA	MEKTOVI	2	SP; PA
LONSURF	2	SP; PA	<i>nilotinib hcl 50 MG, 150 MG, 200 MG</i>	1	SP; PA
Antineoplastic Enzyme Inhibitors			NINLARO	2	SP; PA
ALECENSA	2	SP; PA	<i>pazopanib hcl</i>	1	SP; PA
BELEODAQ	2	SP; PA	PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	2	SP; PA
<i>bortezomib SOLR IJ</i>	1	SP; PA	<i>romidepsin SOLR</i>	1	SP; PA
BORTEZOMIB SOLR IV 3.5 MG	2	SP; PA	RUBRACA	2	SP; PA
BOSULIF TABS 100 MG, 500 MG	2	SP; PA	<i>sorafenib tosylate</i>	1	SP; PA
BRAFTOVI 75 MG	2	SP; PA	STIVARGA	2	SP; PA
CABOMETYX TABS	2	SP; PA	<i>sunitinib malate</i>	1	SP; PA
CAPRELSA	2	SP; PA	TAFINLAR CAPS	2	SP; PA
COMETRIQ (100 MG DAILY DOSE) KIT	2	SP; PA	TALZENNA 0.25 MG, 1 MG	2	SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	2	SP; PA	<i>temsirolimus</i>	1	SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	2	SP; PA	TIBSOVO	2	SP; PA
COTELLIC	2	SP; PA	VITRAKVI CAPS	2	SP; PA
<i>dasatinib</i>	1	SP; PA	VITRAKVI SOLN	2	SP; PA
<i>everolimus TABS</i>	1	SP; PA	VOTRIENT	2	SP; PA
<i>everolimus TBSO</i>	1	SP; PA	XALKORI CAPS	2	SP; PA
IBRANCE CAPS	2	SP; PA	XOSPATA	2	SP; PA
ICLUSIG 15 MG, 45 MG	2	SP; PA	ZELBORAF	2	SP; PA
<i>imatinib mesylate TABS</i>	1	SP; PA	ZOLINZA	2	SP; PA
IMBRUVICA CAPS 140 MG	2	SP; PA	ZYDELIG	2	SP; PA
IMBRUVICA CAPS 70 MG	2	QL(1 EA daily); SP; PA	ZYKADIA TABS	2	SP; PA
IMBRUVICA TABS	2	QL(1 EA daily); SP; PA	Antineoplastic Enzymes		
JAKAFI	2	SP; PA	ONCASPAR	2	SP; PA
			Antineoplastic Radiopharmaceuticals		
			AZEDRA DOSIMETRIC	2	SP; PA
			AZEDRA THERAPEUTIC	2	SP; PA
			LUTATHERA	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	2	SP; PA
ALFERON N	2	SP; PA
<i>arsenic trioxide 12 MG/6ML</i>	1	SP; PA
<i>bexarotene</i>	1	SP; PA
<i>hydroxyurea</i>	1	MP
MATULANE	2	SP; PA
PHOTOFRIN	2	SP; PA
PROLEUKIN	2	SP; PA
SYNRIBO	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		
<i>docetaxel CONC 160 MG/8ML</i>	1	SP; PA
DOCETAXEL CONC 160 MG/8ML	2	SP; PA
<i>docetaxel SOLN</i>	1	SP; PA
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	2	SP; PA
DOCIVYX SOLN	2	SP; PA
<i>eribulin mesylate</i>	1	SP; PA
<i>etoposide CAPS</i>	1	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<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
<i>bromocriptine mesylate CAPS</i>	1	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>carbidopa-levodopa TABS</i>	1	MP
<i>carbidopa-levodopa TBCR</i>	1	MP
DHIVY TABS	2	MP
<i>pramipexole dihydrochloride TABS</i>	1	QL(3 EA daily); AL(At least 18 yrs old)
<i>pramipexole dihydrochloride TB24</i>	1	
<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	1	QL(6 EA daily); MP
<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	1	QL(3 EA daily); MP
<i>ropinirole hydrochloride TB24</i>	1	
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
VRAYLAR CAPS	2	
VRAYLAR CPPK	2	
<i>ziprasidone hcl</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>ziprasidone mesylate</i>	1	
Benzisoxazoles		
ERZOFRI 351 MG/2.25ML	NP	SP
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
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	
RYKINDO SRER	NP	AL(At least 18 yrs old); SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	2	SP	<i>prochlorperazine maleate TABS</i>	1	
UZEDY SUSY 100 MG/0.28ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML	2	SP	<i>thioridazine hcl</i>	1	
Butyrophenones			<i>trifluoperazine hcl TABS</i>	1	
<i>haloperidol decanoate</i>	1		Quinolinone Derivatives		
<i>haloperidol lactate CONC</i>	1		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>haloperidol lactate SOLN</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
<i>haloperidol TABS</i>	1		ABILIFY MAINTENA PRSY	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
Dibenzapines			ABILIFY MAINTENA SRER	2	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
<i>clozapine TABS</i>	0		ABILIFY MYCITE MAINTENANCE KIT	NP	SP
<i>clozapine TBDP</i>	0		ABILIFY MYCITE STARTER KIT	NP	SP
<i>loxapine succinate</i>	1		<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily)
<i>olanzapine SOLR</i>	1		<i>aripiprazole TABS</i>	1	QL(1 EA daily)
<i>olanzapine TABS</i>	1	AL(At least 10 yrs old)	<i>aripiprazole TBDP</i>	1	QL(2 EA daily)
<i>olanzapine TBDP</i>	1		ARISTADA 882 MG/3.2ML	2	QL(3.2 ML per 28 day(s) retail; 3 ML per 28 days mail); AL(At least 18 yrs old); SP
<i>quetiapine fumarate 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>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
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	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
OPIPZA FILM	NP		<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
Thioxanthenes			<i>efavirenz TABS</i>	0	QL(1 EA daily)
<i>thiothixene</i>	1		<i>emtricitabine CAPS</i>	0	QL(1 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
Antiretrovirals			<i>emtricitabine-tenofovir disoproxil fumarate</i>	0	QL(1 EA daily)
<i>abacavir sulfate-lamivudine</i>	0	QL(1 EA daily)	EMTRIVA CAPS (<i>emtricitabine</i>)	0	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	0	QL(30 ML daily)	EMTRIVA SOLN	0	QL(24 ML daily)
<i>abacavir sulfate TABS</i>	0	QL(2 EA daily)	EPIVIR SOLN (<i>lamivudine</i>)	0	QL(30 ML daily)
APRETUDE	0		EPIVIR TABS 150 MG (<i>lamivudine</i>)	0	QL(2 EA daily)
APTIVUS CAPS	0	QL(4 EA daily)	EPIVIR TABS 300 MG (<i>lamivudine</i>)	0	QL(1 EA daily)
<i>atazanavir sulfate CAPS</i>	0	QL(2 EA daily)	EPZICOM (<i>abacavir sulfate-lamivudine</i>)	0	QL(1 EA daily)
BIKTARVY 120 MG-30 MG-15 MG	2		<i>etravirine 100 MG</i>	0	QL(4 EA daily)
BIKTARVY 200 MG-50 MG-25 MG	0	QL(1 EA daily)	<i>etravirine 200 MG</i>	0	QL(2 EA daily)
COMBIVIR (<i>lamivudine-zidovudine</i>)	0	QL(2 EA daily)	EVOTAZ	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>fosamprenavir calcium TABS</i>	0	QL(4 EA daily)
<i>darunavir TABS</i>	0	QL(2 EA daily)	GENVOYA	0	QL(1 EA daily)
DELSTRIGO	0	QL(1 EA daily)	INTELENCE (<i>etravirine</i>)	0	QL(4 EA daily)
DESCOVY 200 MG-25 MG	0	QL(1 EA daily)	INTELENCE	0	QL(4 EA daily)
DESCOVY 120 MG-15 MG	0		INTELENCE 200 MG (<i>etravirine</i>)	0	QL(2 EA daily)
DOVATO	0		ISENTRESS CHEW 100 MG	0	QL(6 EA daily)
EDURANT	0	QL(1 EA daily)	ISENTRESS CHEW 25 MG	0	QL(12 EA daily)
EDURANT PED PO 2.5 MG	2		ISENTRESS PACK	0	QL(2 EA daily)
<i>efavirenz CAPS 200 MG</i>	0	QL(1 EA daily)	ISENTRESS TABS	0	QL(2 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
KALETRA SOLN	0	QL(160 ML per fill retail)	PREZISTA TABS 150 MG	0	QL(3 EA daily)
KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	0	QL(4 EA daily)	RETROVIR CAPS (<i>zidovudine</i>)	0	QL(6 EA daily)
KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	0	QL(6 EA daily)	RETROVIR SYRP (<i>zidovudine</i>)	0	QL(60 ML daily)
<i>lamivudine</i> SOLN	0	QL(30 ML daily)	REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	0	QL(2 EA daily)
<i>lamivudine</i> TABS 150 MG	0	QL(2 EA daily)	REYATAZ PACK	0	QL(6 EA daily)
<i>lamivudine</i> TABS 300 MG	0	QL(1 EA daily)	<i>ritonavir</i> TABS	0	QL(12 EA daily)
<i>lamivudine-zidovudine</i>	0	QL(2 EA daily)	RUKOBIA	0	
LEXIVA SUSP	0	QL(56 ML daily)	SELZENTRY SOLN	0	QL(35 ML daily)
LEXIVA TABS (<i>fosamprenavir calcium</i>)	0	QL(4 EA daily)	SELZENTRY TABS 25 MG, 75 MG	NP	
<i>lopinavir-ritonavir</i> SOLN	0	QL(160 ML per fill retail)	STRIBILD	0	
<i>lopinavir-ritonavir</i> TABS 25 MG-100 MG	0	QL(4 EA daily)	SUNLENCA SOLN	0	SP
<i>lopinavir-ritonavir</i> TABS 50 MG-200 MG	0	QL(6 EA daily)	SUNLENCA TABS PO 300 MG	0	SP
<i>maraviroc</i> TABS 300 MG	0	QL(4 EA daily)	SUNLENCA TBPk 300 MG	2	SP
<i>maraviroc</i> TABS 150 MG	0	QL(2 EA daily)	SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
<i>nevirapine</i> SUSP	0	QL(40 ML daily)	SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
<i>nevirapine</i> TABS	0	QL(2 EA daily)	SYMTUZA	0	QL(1 EA daily)
<i>nevirapine</i> TB24 400 MG	0	QL(1 EA daily)	<i>tenofovir disoproxil fumarate</i> TABS	0	QL(1 EA daily)
NORVIR CAPS	0	QL(12 EA daily)	TIVICAY PD TBSO	0	
NORVIR PACK	0		TIVICAY TABS	0	
NORVIR TABS (<i>ritonavir</i>)	0	QL(12 EA daily)	TRIUMEQ PD TBSO	0	
ODEFSEY	0		TRIUMEQ TABS	0	
PIFELTRO	0	QL(1 EA daily)	TRIZIVIR	0	QL(2 EA daily)
PREZCOBIX	0	QL(1 EA daily)	TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
PREZISTA SUSP	0	QL(12 ML daily)	TYBOST	0	QL(1 EA daily)
PREZISTA TABS (<i>darunavir</i>)	0	QL(2 EA daily)	VIRACEPT TABS 625 MG	0	QL(4 EA daily)
PREZISTA TABS 75 MG, 600 MG, 800 MG	0	QL(2 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
VIRACEPT TABS 250 MG	0	QL(9 EA daily)
VIREAD POWD	0	
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	0	QL(1 EA daily)
VIREAD TABS	0	QL(1 EA daily)
YEZTUGO SOLN 463.5 MG/1.5ML	0	SP
YEZTUGO TABS PO 300 MG	0	SP
ZIAGEN SOLN (<i>abacavir sulfate</i>)	0	QL(30 ML daily)
ZIAGEN TABS (<i>abacavir sulfate</i>)	0	QL(2 EA daily)
<i>zidovudine CAPS</i>	0	QL(6 EA daily)
<i>zidovudine SYRP</i>	0	QL(60 ML daily)
<i>zidovudine TABS</i>	0	QL(2 EA daily)
Antiviral Combinations		
PAXLOVID (150/100)	0	
PAXLOVID (300/100 & 150/100)	0	
PAXLOVID (300/100)	0	
CMV Agents		
PREVYMIS SOLN	2	SP; PA
PREVYMIS TABS	2	SP; PA
<i>valganciclovir hcl TABS</i>	1	QL(2 EA daily)
Hepatitis Agents		
EPCLUSA PACK	NP	SP; PA
EPCLUSA TABS	NP	SP; PA
HARVONI PACK	NP	SP; PA
HARVONI TABS	NP	SP; PA
LEDIPASVIR-SOFOSBUVIR TABS	2	SP
MAVYRET PACK	2	SP
MAVYRET TABS	2	SP
PEGASYS SOLN	2	SP; PA
PEGASYS SOSY	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>ribavirin (hepatitis c) CAPS</i>	1	SP; PA
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1	SP; PA
SOFOSBUVIR-VELPATASVIR TABS	2	SP
SOVALDI PACK	NP	SP; PA
SOVALDI TABS	NP	SP; PA
VOSEVI	NP	SP; PA
ZEPATIER	NP	SP; PA
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 45 MG, 75 MG</i>	1	QL(10 EA per fill retail)
<i>oseltamivir phosphate CAPS 30 MG</i>	1	QL(20 EA per fill retail)
<i>oseltamivir phosphate SUSR</i>	1	QL(120 ML per fill retail)
<i>rimantadine hydrochloride TABS</i>	NP	PA
XOFLUZA (40 MG DOSE) 40 MG	NP	
XOFLUZA (80 MG DOSE) 80 MG	NP	
Misc. Antivirals		
LAGEVRIO	0	
TPOXX CAPS	2	

BETA BLOCKERS - Drugs to Treat High Blood

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Pressure			<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	1	MP
Alpha-Beta Blockers			<i>pindolol TABS</i>	NP	MP
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	1	QL(3 EA daily); MP	<i>propranolol hcl CP24</i>	1	QL(2 EA daily); MP
<i>carvedilol 25 MG</i>	1	QL(4 EA daily); MP	<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1	MP
<i>carvedilol phosphate</i>	NP	QL(1 EA daily); MP	<i>propranolol hcl TABS</i>	1	MP
<i>COREG CR (carvedilol phosphate)</i>	NP	QL(1 EA daily); MP	<i>sotalol hcl (afib/afl)</i>	1	QL(2 EA daily); MP
<i>labetalol hcl TABS 200 MG</i>	1	QL(6 EA daily); MP	<i>sotalol hcl TABS 240 MG</i>	1	MP
<i>labetalol hcl TABS 100 MG</i>	1	QL(3 EA daily); MP	<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily); MP
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily); MP	<i>timolol maleate TABS</i>	NP	MP
<i>labetalol hcl TABS 400 MG</i>	1		CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Beta Blockers Cardio-Selective			Calcium Channel Blockers		
<i>acebutolol hcl CAPS</i>	1	MP	<i>amlodipine besylate TABS</i>	1	QL(1 EA daily); MP
<i>atenolol TABS</i>	1	QL(2 EA daily); MP	<i>CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)</i>	NP	MP
<i>betaxolol hcl</i>	1		<i>CONJUPRI (levamlodipine maleate)</i>	2	
<i>bisoprolol fumarate 2.5 MG</i>	1		<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	1	QL(1 EA daily); MP
<i>bisoprolol fumarate</i>	1	QL(1 EA daily); MP	<i>diltiazem hcl coated beads CP24 240 MG</i>	1	QL(2 EA daily); MP
<i>LOPRESSOR SOLN PO 10 MG/ML</i>	NP		<i>diltiazem hcl coated beads CP24 360 MG</i>	1	MP
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1	QL(4 EA daily); MP	<i>diltiazem hcl extended release beads</i>	1	QL(1 EA daily); MP
<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily); MP	<i>diltiazem hcl CP12</i>	1	QL(2 EA daily); MP
<i>metoprolol tartrate TABS 37.5 MG, 75 MG</i>	1		<i>diltiazem hcl CP24 120 MG, 240 MG</i>	1	QL(1 EA daily); MP
<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	1	QL(4 EA daily); MP	<i>diltiazem hcl CP24 180 MG</i>	1	MP
<i>metoprolol tartrate TABS 100 MG</i>	1	QL(4.5 EA daily); MP	<i>diltiazem hcl TABS</i>	1	QL(3 EA daily); MP
Beta Blockers Non-Selective					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<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	LANOXIN TABS 125 MCG, 250 MCG (<i>digoxin</i>)	2	MP
<i>nifedipine CAPS 20 MG</i>	1	QL(4 EA daily); MP	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>nifedipine CAPS 10 MG</i>	NP	QL(4 EA daily); MP	Cardiovascular Agents Misc. - Combinations		
<i>nifedipine TB24 60 MG</i>	1	QL(2 EA daily); MP	<i>amlodipine besylate-atorvastatin calcium</i>	NP	
<i>nifedipine TB24 30 MG, 90 MG</i>	1	QL(1 EA daily); MP	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	
<i>nimodipine CAPS</i>	NP		ENTRESTO CPSP	NP	
<i>nisoldipine</i>	NP		ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>sacubitril-valsartan</i>)	2	
NORLIQVA SOLN	NP		OPSYNVI	NP	SP; PA
SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP		<i>sacubitril-valsartan TABS</i>	NP	
VERAPAMIL HCL ER CP24 (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP	Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
<i>verapamil hcl CP24 360 MG</i>	NP	QL(1 EA daily); MP	INPEFA	NP	
<i>verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG</i>	NP	QL(2 EA daily); MP	Prostaglandin Vasodilators		
<i>verapamil hcl CP24 300 MG</i>	NP	MP	<i>epoprostenol sodium</i>	1	SP; PA
<i>verapamil hcl TABS</i>	1	QL(3 EA daily); MP	ORENITRAM MONTH 1 TEPK	NP	SP
<i>verapamil hcl TBCR</i>	1	QL(2 EA daily); MP	ORENITRAM MONTH 2 TEPK	NP	SP
VERELAN PM CP24 100 MG, 200 MG (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP	ORENITRAM MONTH 3 TEPK	NP	SP
VERELAN PM CP24 300 MG (<i>verapamil hcl</i>)	NP	MP			
VERELAN CP24 120 MG, 180 MG, 240 MG (<i>verapamil hcl</i>)	NP	QL(2 EA daily); MP			
VERELAN CP24 360 MG (<i>verapamil hcl</i>)	NP	QL(1 EA daily); MP			

Drug Name	Drug Tier	Requirements/ Limits
REMODULIN SOLN IJ	NP	SP; PA
<i>treprostinil SOLN IJ</i>	1	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	1	SP
<i>bosentan TABS</i>	1	SP
LETAIRIS (<i>ambrisentan</i>)	NP	SP
TRACLEER TABS (<i>bosentan</i>)	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
LIQREV SUSP	NP	SP
<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	

Drug Name	Drug Tier	Requirements/ Limits
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)
<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

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>norethindrone acet & eth estra TABS</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	Combination Contraceptives - Vaginal		
			<i>etonogestrel-ethinyl estradiol</i>	0	PV
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	Copper Contraceptives - IUD		
<i>norethindrone-eth estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	MIUDELLA INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
<i>norgestimate-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	PARAGARD INTRAUTERINE COPPER	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; SP; PV
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	Emergency Contraceptives		
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	ELLA	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV
TYBLUME CHEW	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
Combination Contraceptives - Transdermal			Progestin Contraceptives - Implants		
<i>norelgestromin-ethinyl estradiol</i>	0	Up to 12-month supply of contraceptives and devices allowed; \$0 copay; PV	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; QL(4 ML per fill retail); PV

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>prednisone SOLN</i>	1		<i>guaifenesin-codeine SOLN</i>	1	QL(240 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>prednisone TABS</i>	1				
<i>prednisone TBPk</i>	1		<i>guaifenesin-codeine SYRP</i>	1	QL(240 ML per fill retail); 1 max fill(s) per 30 day(s) retail
UCERIS TB24 (<i>budesonide</i>)	NP				
ZILRETTA SRER	2	SP; PA	MAXI-TUSS PE LIQD	2	
Mineralocorticoids			<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	1	QL(240 ML per fill retail)
<i>fludrocortisone acetate TABS</i>	1		<i>phenylephrine-dm SOLN</i>	1	QL(240 ML per fill retail)
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			<i>promethazine & phenylephrine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 2 yrs old)
Antitussives			<i>promethazine w/codeine SOLN</i>	1	QL(240 ML per fill retail); AL(At least 6 yrs old)
<i>benzonatate 200 MG</i>	1	QL(1 EA daily); 1 max fill(s) per 30 day(s) retail; AL(At least 10 yrs old)	<i>promethazine w/codeine SYRP</i>	1	QL(240 ML per fill retail); AL(At least 6 yrs old)
<i>benzonatate 100 MG</i>	1	AL(At least 10 yrs old)	<i>pseudoephedrine-ibuprofen TABS</i>	1	
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	1		Expectorants		
Cough/Cold/Allergy Combinations			<i>potassium iodide (expectorant) SOLN</i>	1	
<i>brompheniramine & phenyleph ELIX</i>	1	QL(120 ML per fill retail); 1 max fill(s) per 30 day(s) retail	Misc. Respiratory Inhalants		
<i>brompheniramine & pseudoeph ELIX</i>	1	QL(120 ML per fill retail)	<i>sodium chloride (inhalant) AERS</i>	1	QL(240 ML per fill retail)
<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	1	QL(120 ML per fill retail)	<i>sodium chloride (inhalant) NEBU 0.9 %, 7 %</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 EA per fill retail)	Mucolytics		
<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>acetylcysteine SOLN</i>	1	
			DERMATOLOGICALS - Drugs to Treat Skin Conditions		
			Acne Products		
			ABSORICA 10 MG, 20 MG, 40 MG (<i>isotretinoin</i>)	NP	QL(2 EA daily); AL(At least 12 yrs old)
			<i>adapalene-benzoyl peroxide GEL</i>	1	

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

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

Drug Name	Drug Tier	Requirements/ Limits
<i>oxiconazole nitrate CREA</i>	NP	PA
<i>OXISTAT CREA (oxiconazole nitrate)</i>	NP	PA
<i>terbinafine hcl (topical) CREA</i>	1	QL(42 GM per fill retail)
<i>tolnaftate CREA</i>	1	QL(30 GM per fill retail)
Antihistamines-Topical		
<i>ITCH RELIEF CREA</i>	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
<i>CARAC CREA (fluorouracil (topical))</i>	2	QL(30 GM per fill retail)
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(40 GM per fill retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	1	QL(30 GM per fill retail)
<i>fluorouracil (topical) SOLN</i>	1	QL(10 ML per fill retail)
<i>LEVULAN KERASTICK SOLR</i>	2	SP; PA
Antipruritics - Topical		
<i>camphor & menthol LOTN</i>	1	QL(59 ML per fill retail)
Antipsoriatics		
<i>BIMZELX SOAJ 160 MG/ML</i>	NP	SP; PA
<i>BIMZELX SOAJ 320 MG/2ML</i>	NP	SP; PA
<i>BIMZELX SOSY 320 MG/2ML</i>	NP	SP; PA
<i>BIMZELX SOSY 160 MG/ML</i>	NP	SP; PA
<i>calcipotriene CREA</i>	1	QL(60 GM per fill retail)
<i>CALCIPOTRIENE FOAM</i>	NP	

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

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

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

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

Drug Name	Drug Tier	Requirements/ Limits
CIBINQO	NP	SP; PA
DUPIXENT SOAJ	2	SP; PA
DUPIXENT SOSY 300 MG/2ML	2	SP; PA
EBGLYSS SOAJ	2	SP; PA
EBGLYSS SOSY	2	SP; PA
OPZELURA	NP	PA
Emollient/Keratolytic Agents		
<i>urea CREA 40 %</i>	1	QL(85.05 GM per fill retail); RX/OTC
<i>urea LOTN 40 %</i>	1	QL(325 GM per fill retail)
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1	QL(385 GM per fill retail); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	QL(400 GM per fill retail; 400 per fill mail); RX/OTC
Hair Growth Agents		
LITFULO	NP	SP; PA
Immunomodulating Agents - Systemic		
NEMLUVIO	NP	SP; PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1	QL(48 EA per 180 day(s) retail)
Immunosuppressive Agents - Topical		
ELIDEL (<i>pimecrolimus</i>)	2	QL(1 GM daily); AL(At least 2 yrs old); PA
<i>pimecrolimus</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT 0.03 %</i>	1	QL(1 GM daily); AL(At least 2 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>tacrolimus (topical) OINT 0.1 %</i>	1	PA	<i>zinc oxide (topical) OINT 20 %</i>	1	QL(60 GM per fill retail)
Keratolytic/Antimitotic/Vesicant Agents			Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
<i>podofilox SOLN</i>	1	QL(4 ML per fill retail)	ZORYVE CREA EX	NP	PA
<i>salicylic acid GEL 6 %</i>	1	QL(40 GM per fill retail)	Rosacea Agents		
Local Anesthetics - Topical			<i>metronidazole (topical) CREA</i>	1	QL(45 GM per fill retail)
<i>capsaicin CREA 0.025 %, 0.075 %</i>	1	QL(60 GM per fill retail)	<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(45 GM per fill retail)
<i>capsaicin CREA 0.1 %</i>	1	QL(56.6 GM per fill retail)	<i>metronidazole (topical) LOTN</i>	1	
<i>capsaicin CREA 0.035 %</i>	1	QL(42.5 ML per fill retail)	Scabicides & Pediculicides		
CASTIVA WARMING LOTN	2	QL(113 GM per fill retail)	<i>ivermectin (pediculicide)</i>	NP	
<i>dibucaine</i>	1	QL(56.7 GM per fill retail)	LICEMD GEL	2	
LIDOCAINE HCL URETHRAL/MUCOSAL GEL 2 %	2	QL(85 ML per fill retail)	<i>malathion</i>	1	QL(59 ML per fill retail); 2 max fill(s) per 30 day(s) retail
<i>lidocaine hcl CREA 4 %</i>	1	1 package(s) per 34 day(s) retail; 1 package(s) per 34 day(s) mail	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 hcl CREA 3 %</i>	1	QL(85 GM per fill retail); RX/OTC	NIX LICE KILLING SPRAY LIQD XX	2	
<i>lidocaine hcl GEL 2 %</i>	1	QL(85 GM per fill retail); RX/OTC	<i>permethrin AERO</i>	1	
<i>lidocaine hcl PRSY</i>	1	QL(85 ML per fill retail)	<i>permethrin CREA</i>	1	QL(60 GM per fill retail)
<i>lidocaine CREA 4 %</i>	1	QL(76.5 GM per fill retail)	<i>permethrin LIQD EX</i>	1	
LIDOCAINE CREA	2	QL(85 GM per fill retail)	<i>pyrethrins-piperonyl butoxide LIQD 3 %-2.4 %-0.3 %-1.2 %</i>	1	
<i>lidocaine-prilocaine CREA</i>	1	QL(5800 GM per fill retail)	<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	1	
Misc. Topical			<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	1	
CVS LANOLIN CREA	2		SCHOOLTIME SHAMPOO SHAM	2	
<i>lanolin (topical) CREA</i>	1				
LANOLOR CREA	2				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SKLICE (<i>ivermectin (pediculicide)</i>)	NP		CHEMSTRIP K STRP	2	
<i>spinosad</i>	NP	QL(120 ML per fill retail); 2 max fill(s) per 30 day(s) retail; AL(At least 2 yrs old)	CLEARDETECT COVID-19 AG HOME KIT	0	
Tar Products			CLINITEST RAPID COVID-19 TEST KIT	0	
<i>coal tar extract SHAM 0.5 %</i>	1		COBAS LIAT SARS-COV-2 ASSAY	0	
Wound Care Products			COBAS LIAT SARS-COV-2 CONTROL	0	RX/OTC
APLIGRAF DISK	2	PA	COVID-19 AT HOME ANTIGEN TEST KIT	0	
DIAGNOSTIC PRODUCTS			COVID-19 AT-HOME TEST KIT	0	
Diagnostic Drugs			COVID-19 OTC ANTIGEN 1-PACK KIT	0	
<i>cosyntropin SOLR</i>	1	SP; PA	COVID-19 OTC ANTIGEN 2-PACK KIT	0	
THYROGEN 0.9 MG	2	SP; PA	CVS COVID-19 AT HOME TEST KIT KIT	0	
Diagnostic Tests			DIATRUST COVID-19 HOME TEST KIT	0	
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	ELLUME COVID-19 HOME TEST KIT	0	
ACCUA SARS-COV-2	0		FASTEP COVID-19 ANTIGEN TEST KIT	0	
ADVIN COVID-19 ANTIGEN TEST KIT	0		FLOWFLEX COVID-19 AG HOME TEST KIT	0	
BD VERITOR SYSTEM SARS-COV-2	0		GENABIO COVID-19 RAPID TEST KIT	0	
BINAXNOW COVID-19 AG CARD	0		GOTOKNOW COVID-19 ANTIGEN RAPI KIT	0	
BINAXNOW COVID-19 AG HOME TEST KIT	0		ID NOW COVID-19	0	
BINAXNOW COVID-19 ANTIGEN SELF KIT	0		ID NOW COVID-19 2.0 CONTROL	0	RX/OTC
CARESTART COVID-19 HOME TEST KIT	0		ID NOW COVID-19 2.0 TEST	0	
			ID NOW COVID-19 CONTROL	0	RX/OTC
			IHEALTH COVID-19 RAPID TEST KIT	0	
			INDICAID COVID-19 RAPID TEST KIT	0	

Drug Name	Drug Tier	Requirements/ Limits
INTELISWAB COVID-19 RAPID TEST KIT	0	
KETONE TEST STRP	2	
KETOSTIX STRP	2	
LUCIRA CHECK IT COVID-19 TEST KIT	0	RX/OTC
LUCIRA COVID-19 ALL-IN-ONE KIT	0	RX/OTC
LYRA DIRECT SARS-COV-2 ASSAY	0	
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	
XPRT XPRESS SARS-COV-2	0	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	
SUCRAID	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	1	MP
<i>acetazolamide TABS</i>	1	MP
<i>methazolamide TABS</i>	1	MP
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	1	MP
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	QL(1 EA daily); MP
<i>triamterene & hydrochlorothiazide TABS</i>	1	QL(1 EA daily); MP
Loop Diuretics		
<i>bumetanide TABS</i>	1	MP
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	1	MP
<i>furosemide TABS</i>	1	MP
SOAANZ TABS 20 MG	2	MP
<i>torseamide TABS 20 MG</i>	1	MP
<i>torseamide TABS 5 MG, 10 MG, 100 MG</i>	1	QL(1 EA daily); MP
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1	QL(4 EA daily)

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 150 MG</i>	NP	
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1	MP	<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	1	MP	<i>risedronate sodium TBEC</i>	NP	
<i>metolazone</i>	1	MP	<i>teriparatide SOPN</i>	1	PA
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones			TERIPARATIDE SOPN	2	PA
Bone Density Regulators			XGEVA SOLN	2	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 CONC</i>	1	SP; PA
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	NP		<i>zoledronic acid SOLN 5 MG/100ML</i>	1	SP; PA
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily); MP	ZOLEDRONIC ACID SOLN	2	SP; PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	QL(0.15 EA daily); MP	Corticotropin		
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP	ACTHAR GEL	2	SP; PA
ATELVIA TBEC (<i>risedronate sodium</i>)	NP		CORTROPHIN GEL	2	SP; PA
BONSITY SOPN 560 MCG/2.24ML	2	PA	Fertility Regulators		
<i>calcitonin (salmon) NA</i>	1	QL(4 ML per 30 day(s) retail)	CHORIONIC GONADOTROPIN IM	2	PA
<i>calcitonin (salmon) IJ</i>	1	QL(2 ML per 30 day(s) retail)	NOVAREL IM	2	PA
EVENITY	2	SP; PA	PREGNYL IM	2	PA
<i>ibandronate sodium SOLN</i>	1	SP; PA	GnRH/LHRH Antagonists		
<i>ibandronate sodium TABS</i>	1	PA	ORILISSA	2	SP; PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	1	SP; PA	Growth Hormone Receptor Antagonists		
			SOMAVERT	2	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		REVCОВI	2	SP; PA
CARBAGLU (<i>carglumic acid</i>)	2	SP; PA	<i>sapropterin dihydrochloride PACK</i>	1	SP; PA
<i>carglumic acid</i>	NP	SP; PA	<i>sapropterin dihydrochloride TABS</i>	1	SP; PA
<i>cinacalcet hcl</i>	1	SP; PA	<i>sodium phenylbutyrate POWD</i>	NP	SP; PA
CRYSVITA	2	SP; PA	<i>sodium phenylbutyrate TABS</i>	NP	SP; PA
ELAPRASE	2	SP; PA	STRENSIQ	2	SP; PA
FABRAZYME	2	SP; PA	VIMIZIM	2	SP; PA
GALAFOLD	2	QL(0.5 EA daily); SP; PA	XPHOZAH	NP	SP
<i>glycerol phenylbutyrate 1.1 GM/ML</i>	1	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Posterior Pituitary Hormones			ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	2	QL(0.29 EA daily); MP
<i>desmopressin acetate spray</i>	1	QL(5 ML per fill retail)	<i>estradiol PTTW</i>	1	QL(0.29 EA daily); MP
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1	QL(5 ML per fill retail)	<i>estradiol PTWK</i>	1	QL(0.143 EA daily); MP
<i>desmopressin acetate SOLN IJ</i>	1	SP; PA	<i>estradiol TABS</i>	1	MP
DESMOPRESSIN ACETATE SOLN NA	2	SP; PA	<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)
<i>desmopressin acetate TABS</i>	1	QL(6 EA daily)	FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Somatostatic Agents			Fluoroquinolones		
<i>lanreotide acetate</i>	1	SP; PA	<i>ciprofloxacin hcl TABS 100 MG</i>	1	QL(6 EA per fill retail)
LANREOTIDE ACETATE	2	SP; PA	<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	1	
<i>octreotide acetate KIT</i>	1	SP; PA	CIPRO SUSR	2	
<i>octreotide acetate SOLN</i>	1	SP; PA	<i>levofloxacin SOLN PO</i>	1	
<i>octreotide acetate SOSY</i>	1	SP; PA	<i>levofloxacin TABS</i>	1	QL(1 EA daily; 14 EA per fill retail)
SIGNIFOR	2	SP; PA	<i>moxifloxacin hcl TABS</i>	1	
SIGNIFOR LAR	2	SP; PA	<i>ofloxacin 300 MG, 400 MG</i>	NP	QL(56 EA per fill retail)
SOMATULINE DEPOT	2	SP; PA	GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Vasopressin Receptor Antagonists			Antiflatulents		
<i>tolvaptan TABS</i>	1	SP; PA	<i>simethicone CHEW 80 MG</i>	1	
<i>tolvaptan TBPK</i>	1	SP; PA	<i>simethicone LIQD PO</i>	1	QL(30 ML per fill retail)
ESTROGENS - Hormone Replacement/Modifying Drugs			<i>simethicone SUSP</i>	1	QL(45 ML per fill retail)
Estrogen Combinations			Bile Acid Synthesis Disorder Agents		
COMBIPATCH PTTW	2	QL(8 EA per 28 day(s) retail)	CHOLBAM	2	QL(5 EA daily); SP; PA
<i>estradiol & norethindrone acetate TABS</i>	1		CTEXLI TABS PO 250 MG	2	SP; PA
MYFEMBREE	2				
<i>norethindrone acetate-ethinyl estradiol</i>	0				
ORIAHNN	2	PA			
PREMPHASE	2	QL(1 EA daily)			
PREMPRO	2	QL(1 EA daily)			
Estrogens					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Farnesoid X Receptor (FXR) Agonists			OTULFI SOLN IV 130 MG/26ML	NP	SP; PA
OCALIVA	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	STEQEYMA	NP	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)	USTEKINUMAB-TTWE	NP	SP; PA
CANASA SUPP (<i>mesalamine</i>)	2		VELSIPITY	NP	SP; PA
ENTYVIO PEN SOAJ	NP	SP; PA	ZYMFENTRA (1 PEN) AJKT	NP	SP; PA
LIALDA TBEC (<i>mesalamine</i>)	NP		ZYMFENTRA (2 PEN) AJKT	NP	SP; PA
<i>mesalamine w/ cleanser</i>	1		ZYMFENTRA (2 SYRINGE) PSKT	NP	SP; PA
<i>mesalamine ENEM</i>	1	QL(60 ML daily)	Intestinal Acidifiers		
<i>mesalamine SUPP</i>	NP		<i>lactulose (encephalopathy)</i>	1	
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)	Irritable Bowel Syndrome (IBS) Agents		
<i>mesalamine TBEC 1.2 GM</i>	1		<i>alosectron hcl</i>	NP	PA
OMVOH (300 MG DOSE) SOAJ	NP	SP; PA	IBSRELA	NP	PA
OMVOH (300 MG DOSE) SOSY	NP	SP; PA	LINZESS	2	PA
OMVOH SOAJ	NP	SP; PA	LOTRONEX (<i>alosectron hcl</i>)	NP	PA
OMVOH SOLN	NP	SP; PA	Peripheral Opioid Receptor Antagonists		
OMVOH SOSY	NP	SP; PA	MOVANTIK	2	PA
			Phosphate Binder Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>calcium acetate (phosphate binder) CAPS</i>	1	MP	<i>dutasteride-tamsulosin hcl</i>	NP	
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC	ENTADFI	NP	
<i>lanthanum carbonate CHEW</i>	1		<i>finasteride</i>	1	QL(1 EA daily); MP
REVELA TABS (sevelamer carbonate)	NP		JALYN (<i>dutasteride-tamsulosin hcl</i>)	NP	
<i>sevelamer carbonate PACK</i>	1		RAPAFLO 4 MG (<i>silodosin</i>)	NP	
<i>sevelamer carbonate TABS</i>	1		<i>silodosin</i>	1	
<i>sevelamer hcl</i>	1		<i>tamsulosin hcl</i>	1	QL(2 EA daily); MP
Short Bowel Syndrome (SBS) Agents			Urinary Analgesics		
GATTEX	2	SP; PA	<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System			Urinary Stone Agents		
Alkalinizers			<i>tiopronin TABS</i>	1	SP; PA
<i>potassium citrate (alkalinizer) TBCR</i>	1		Vesicoureteral Reflux (VUR) Agents		
<i>potassium citrate-citric acid PACK</i>	1		DEFLUX	2	SP; PA
<i>sodium citrate & citric acid</i>	1	QL(16.67 ML daily); RX/OTC	GOUT AGENTS - Drugs to Treat Gout		
Cystinosis Agents			Gout Agent Combinations		
CYSTAGON CAPS	2	SP; PA	<i>colchicine w/ probenecid</i>	1	MP
PROCYSBI CPDR	2	SP; PA	Gout Agents		
PROCYSBI PACK	2	SP; PA	<i>allopurinol 100 MG, 300 MG</i>	1	MP
Genitourinary Irrigants			<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
<i>sodium chloride (gu irrigant) 0.9 %</i>	1		KRYSTEXXA	2	SP; PA
Interstitial Cystitis Agents			Uricosurics		
ELMIRON CAPS	2	QL(3 EA daily)	<i>probenecid</i>	1	MP
Prostatic Hypertrophy Agents			HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
<i>alfuzosin hcl</i>	1		Antihemophilic Products		
<i>dutasteride</i>	1		ADVATE	2	SP; PA
			ADYNOVATE	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	2	SP; PA	NOVOSEVEN RT	2	SP; PA
ALPHANATE SOLR	2	SP; PA	NUWIQ KIT	2	SP; PA
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	2	SP; PA	NUWIQ SOLR	2	SP; PA
ALPROLIX	2	SP; PA	OBIZUR	2	SP; PA
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	2	SP; PA	PROFILNINE	2	SP; PA
BENEFIX KIT	2	SP; PA	REBINYN	2	SP; PA
COAGADEX	2	SP; PA	RECOMBINATE SOLR	2	SP; PA
CORIFACT	2	SP; PA	RIASTAP	2	SP; PA
ELOCTATE	2	SP; PA	RIXUBIS SOLR	2	SP; PA
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	2	SP; PA	ROCTAVIAN	2	SP; PA
FEIBA	2	SP; PA	SEVENFACT	2	SP; PA
FIBRYGA	2	SP; PA	TRETTEN	2	SP; PA
HEMGENIX	2	SP; PA	VONVENDI	2	SP; PA
HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	2	SP; PA	WILATE KIT	2	SP; PA
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	2	SP; PA	XYNTHA	2	SP; PA
HUMATE-P SOLR	2	SP; PA	XYNTHA SOLOFUSE	2	SP; PA
IDELVION	2	SP; PA	Bradykinin B2 Receptor Antagonists		
IXINITY SOLR	2	SP; PA	<i>icatibant acetate SOSY</i>	1	SP; PA
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	2	SP; PA	Complement Inhibitors		
KCENTRA	2	SP; PA	BERINERT KIT	2	SP; PA
KOATE-DVI SOLR 500 UNIT, 1000 UNIT	2	SP; PA	CINRYZE SOLR IV	2	SP; PA
KOATE SOLR	2	SP; PA	RUCONEST	2	SP; PA
KOGENATE FS KIT	2	SP; PA	SOLIRIS	2	SP; PA
KOVALTRY	2	SP; PA	Hemataologic - Tyrosine Kinase Inhibitors		
NOVOEIGHT	2	SP; PA	TAVALISSE	2	SP; PA
			Hematorheologic Agents		
			<i>pentoxifylline</i>	1	MP
			Human Protein C		
			CEPROTIN	2	SP; PA
			Plasma Kallikrein Inhibitors		
			KALBITOR	2	SP; PA
			TAKHZYRO SOLN	2	SP; PA
			Plasma Proteins		
			THROMBATE III	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Platelet Aggregation Inhibitors		
<i>aspirin-dipyridamole</i>	1	
BRILINTA 60 MG, 90 MG (<i>ticagrelor</i>)	2	QL(2 EA daily)
<i>cilostazol</i>	1	QL(2 EA daily); MP
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 EA daily); MP
<i>clopidogrel bisulfate 300 MG</i>	1	
<i>dipyridamole</i>	1	MP
<i>prasugrel hcl</i>	1	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1	QL(2 EA daily)
YOSPRALA 81 MG-40 MG	2	
Thrombolytic Agent - Misc		
DEFITELIO	2	SP; PA
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	
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 1 MG</i>	1	MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>folic acid TABS 400 MCG, 800 MCG</i>	1	QL(1 EA daily)
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 SOSY	NP	SP; PA
NEUPOGEN SOLN	2	SP; PA
NEUPOGEN SOSY	2	SP; PA
NIVESTYM SOLN	NP	SP; PA
NIVESTYM SOSY	NP	SP; PA
NPLATE 250 MCG, 500 MCG	2	SP; PA
NYVEPRIA	NP	SP; PA
PROCRIT	NP	SP; PA
PROCRIT	NP	SP; PA
RELEUKO SOLN	NP	SP
RELEUKO SOSY	NP	SP

Drug Name	Drug Tier	Requirements/Limits
RETACRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA
RETACRIT	2	SP; PA
ROLVEDON	NP	SP
STIMUFEND	NP	SP
UDENYCA ONBODY SOSY	NP	SP
UDENYCA SOAJ	NP	SP
UDENYCA SOSY	NP	SP; PA
ZARXIO	NP	SP; PA
ZIEXTENZO	NP	SP
Hematopoietic Mixtures		
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	1	QL(1 EA daily)
HEMATINIC PLUS VIT/MINERALS TABS	2	QL(1 EA daily)
Iron		
FERRETTS TABS	2	QL(2 EA daily)
<i>ferrous fumarate TABS</i>	1	QL(2 EA daily)
<i>ferrous gluconate TABS</i>	1	
FERROUS GLUCONATE TABS 324 MG	2	
<i>ferrous sulfate dried TBCR</i>	1	
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	1	QL(16 ML daily)
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	QL(3.4 ML daily)
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	1	MP
<i>ferrous sulfate TBEC 325 MG</i>	1	MP
<i>ferrous sulfate TBEC</i>	1	
IRON CHEWS PEDIATRIC CHEW	2	
IRON TABS 28 MG	2	

Drug Name	Drug Tier	Requirements/Limits
<i>polysaccharide iron complex CAPS</i>	1	QL(1 EA daily)
Stem Cell Mobilizers		
<i>plerixafor</i>	1	SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	1	SP; PA
<i>aminocaproic acid TABS 1000 MG</i>	1	SP; PA
<i>aminocaproic acid TABS 500 MG</i>	1	QL(24 EA per fill retail); SP; PA
<i>tranexamic acid TABS</i>	1	QL(30 EA per 5 day(s) retail); 1 max fill(s) per 30 day(s) retail; AL(At least 12 yrs old)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
ALEVE PM 25 MG-220 MG	2	
<i>diphenhydramine hcl (sleep) CAPS</i>	1	
<i>diphenhydramine hcl (sleep) LIQD</i>	1	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	1	QL(4 EA daily)
<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	1	
<i>diphenhydramine hcl (sleep) TBDP</i>	1	
<i>diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG</i>	1	
<i>doxylamine succinate (sleep)</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>ibuprofen-diphenhydramine citrate</i>	1	
<i>ibuprofen-diphenhydramine hcl</i>	1	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1	
<i>phenobarbital TABS</i>	1	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1	
Non-Barbiturate Hypnotics		
<i>dexmedetomidine hcl in sodium chloride SOLN</i>	1	
<i>dexmedetomidine hcl SOLN 200 MCG/2ML</i>	1	
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	
<i>flurazepam hcl</i>	NP	QL(1 EA daily)
IGALMI FILM	NP	
<i>midazolam hcl SOLN IJ</i>	1	
MIDAZOLAM HCL SOLN IJ	2	
RESTORIL 22.5 MG (<i>temazepam</i>)	NP	
<i>temazepam 7.5 MG</i>	1	
<i>temazepam 15 MG, 30 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>temazepam 22.5 MG</i>	NP	
<i>triazolam</i>	1	QL(1 EA daily)
<i>zaleplon</i>	1	QL(1 EA daily)
ZOLPIDEM TARTRATE CAPS	NP	
<i>zolpidem tartrate SUBL</i>	NP	
<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily)
<i>zolpidem tartrate TBCR</i>	1	
Orexin Receptor Antagonists		
QUVIVIQ	NP	
Selective Melatonin Receptor Agonists		

Drug Name	Drug Tier	Requirements/ Limits
<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)
METAMUCIL CAPS	2	
NATURAL FIBER LAXATIVE POWD	2	
<i>psyllium CAPS 0.52 GM</i>	1	
<i>psyllium POWD 28.3 %, 30 %, 33 %, 43 %, 58.6 %, 100 %</i>	1	
Laxative Combinations		
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	1	QL(4000 ML per fill retail)
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	QL(4000 ML per fill retail)
<i>sennosides-docusate sodium TABS</i>	1	QL(4 EA daily)
Laxatives - Miscellaneous		
<i>glycerin (laxative) SUPP 2 GM</i>	1	
<i>lactulose SOLN</i>	1	
<i>polyethylene glycol 3350 PACK</i>	1	QL(34 EA daily)
<i>polyethylene glycol 3350 POWD</i>	1	QL(34 GM daily)
SORBITOL PO 70 %	2	
Saline 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 phosphates ENEM</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1	QL(12 EA per fill retail)
<i>bisacodyl TBEC</i>	1	QL(1 EA daily)
<i>sennosides TABS 8.6 MG</i>	1	
Surfactant Laxatives		
<i>docusate sodium CAPS 50 MG</i>	1	
<i>docusate sodium CAPS 100 MG, 250 MG</i>	1	QL(3 EA daily)
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	1	
DOCUSATE SODIUM SYRP	2	
<i>docusate sodium TABS</i>	1	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin SUSR 100 MG/5ML</i>	0	QL(15 ML per fill retail)
<i>azithromycin SUSR 200 MG/5ML</i>	0	QL(30 ML per fill retail)
<i>azithromycin TABS 500 MG</i>	0	QL(4 EA daily)
<i>azithromycin TABS 600 MG</i>	0	QL(8 EA per 28 day(s) retail)
<i>azithromycin TABS 250 MG</i>	0	QL(6 EA per fill 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		
E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
ERYPED 200 SUSR (<i>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>	1	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
ALCOHOL PREP PADS-MISC	2	OTC
Contraceptives		
CONDOMS-MISC	2	QL(36 ea per fill retail)
Diabetic Supplies		
ACCU-CHEK FASTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK GUIDE CONTROL LIQD	2	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
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
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
ACCU-CHEK SAFE-T PRO LANCETS	2	QL(6.67 EA daily); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	2	QL(6.67 EA daily); RX/OTC
ACCUTREND PLUS	2	
ACTI-LANCE 28G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACTI-LANCE LITE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE LANCETS	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE SPECIAL LANCETS 17G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE LANCETS 21G	2	QL(6.67 EA daily); RX/OTC
ACTI-LANCE UNIVERSAL 23G	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE PLUS SAFETY 25G	2	QL(6.67 EA daily); RX/OTC
ADVANCED MOBILE LANCET	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE PLUS SAFETY 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS	2	QL(6.67 EA daily); RX/OTC	ASSURE LANCE SAFETY LANCET 28G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	AURORA LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	BD MICROTAINER LANCETS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	CAREONE LANCET SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	CAREONE LANCET THIN 23G	2	QL(6.67 EA daily); RX/OTC
ADVOCATE SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	CARESENS LANCETS	2	QL(6.67 EA daily); RX/OTC
AGAMATRIX ULTRA-THIN LANCETS	2	QL(6.67 EA daily); RX/OTC	CARESENS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
AIMSCO TWIST LANCETS 32G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
AIMSCO TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
AQUALANCE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ASSURE COMFORT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ASSURE HAEMOLANCE PLUS HIGH	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST LANCETS 33G	2	QL(6.67 EA daily); RX/OTC
ASSURE HAEMOLANCE PLUS LOW	2	QL(6.67 EA daily); RX/OTC	CARETOUCH TWIST MC LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ASSURE HAEMOLANCE PLUS MICRO	2	QL(6.67 EA daily); RX/OTC	CHOSEN LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
ASSURE HAEMOLANCE PLUS NORMAL	2	QL(6.67 EA daily); RX/OTC	CHOSEN SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ASSURE HAEMOLANCE PLUS PED	2	QL(6.67 EA daily); RX/OTC	CLEANLET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	EASY TOUCH SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
DROPLET PERSONAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
DROPSAFE ACTI-LANCE 23G	2	QL(6.67 EA daily); RX/OTC	EMBRACE LANCETS ULTRA THIN 30G	2	QL(6.67 EA daily); RX/OTC
DRUG MART ON-THE-GO LANCET 30G	2	QL(6.67 EA daily); RX/OTC	EMBRACE PRESSURE ACTIVATED 21G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EMBRACE PRESSURE ACTIVATED 28G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA
EZ-LETS LANCETS 21G	2	QL(6.67 EA daily); RX/OTC	FREESTYLE UNISTICK II LANCETS	2	QL(6.67 EA daily); RX/OTC
EZ-LETS LANCETS 26G	2	QL(6.67 EA daily); RX/OTC	GAUZE SPONGES	2	RX/OTC
EZ-LETS LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	GENTEEL BUTTERFLY TOUCH LANCET	2	QL(6.67 EA daily); RX/OTC
EZ-LETS LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	GENTLE-LET GP LANCETS	2	QL(6.67 EA daily); RX/OTC
FIFTY50 SAFETY SEAL LANCETS	2	QL(6.67 EA daily); RX/OTC	GENTLE-LET LANCETS	2	QL(6.67 EA daily); RX/OTC
FIFTY50 UNILET LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	GLOBAL INJECT EASE LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
FINE 30	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
FORA LANCETS	2	QL(6.67 EA daily); RX/OTC	GLUCOCOM LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LANCETS	2	QL(6.67 EA daily); RX/OTC	GLUCOCOM LANCETS 33G	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 28G	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 30G	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 2 PLUS 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 READER	2	QL(1 EA per 365 day(s) retail); PA	GOJJI STERILE LANCETS	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 2 SENSOR	2	QL(2 EA per 28 day(s) retail); PA	HAEMOLANCE	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 3 PLUS 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 READER	2	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	HAEMOLANCE PLUS	2	QL(6.67 EA daily); RX/OTC
FREESTYLE LIBRE 3 SENSOR	2	QL(2 EA per 28 day(s) retail); 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

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MOBILE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	PRECISION THINS GP LANCETS	2	QL(6.67 EA daily); RX/OTC
MONOLET LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MONOLET OPD LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT LANCETS 31G	2	QL(6.67 EA daily); RX/OTC
MONOLETTOR SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
MPD SAFETY LANCET 21G	2	QL(6.67 EA daily); RX/OTC	PRODIGY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MPD SAFETY LANCET 23G	2	QL(6.67 EA daily); RX/OTC	PRODIGY SAFETY LANCETS 26G	2	QL(6.67 EA daily); RX/OTC
MPD SAFETY LANCET 28G	2	QL(6.67 EA daily); RX/OTC	PRODIGY TWIST TOP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
MPD SAFETY LANCET 30G	2	QL(6.67 EA daily); RX/OTC	PSS SELECT GP LANCETS	2	QL(6.67 EA daily); RX/OTC
MYGLUCOHEALTH LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	PSS SELECT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
NOVA SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	PURE COMFORT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
NOVA SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	PX LANCETS MICROTHIN 33G	2	QL(6.67 EA daily); RX/OTC
NOVA SUREFLEX LANCETS	2	QL(6.67 EA daily); RX/OTC	PX LANCETS ULTRA THIN 28G	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA PLUS LANCET30G	2	QL(6.67 EA daily); RX/OTC	QC LANCETS SUPER THIN 30G	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA PLUS LANCET33G	2	QL(6.67 EA daily); RX/OTC	QC LANCETS ULTRA THIN	2	QL(6.67 EA daily); RX/OTC
ONETOUCH DELICA SAFETY LANCING	2	QL(6.67 EA daily); RX/OTC	QC UNILET LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
ONETOUCH ULTRASOFT 2 LANCETS	2	QL(6.67 EA daily); RX/OTC	QC UNILET LANCETS MICRO THIN	2	QL(6.67 EA daily); RX/OTC
PERFECT LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	READYLANCE SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC
PERFECT LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	REALITY LANCETS	2	QL(6.67 EA daily); RX/OTC
PERFECT POINT SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	REALITY TRIGGER LANCETS	2	QL(6.67 EA daily); RX/OTC
PHARMACIST CHOICE LANCETS	2	QL(6.67 EA daily); RX/OTC	RELION LANCET DEVICES 30G	2	QL(6.67 EA daily); RX/OTC
PIP LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	RELION LANCETS	2	QL(6.67 EA daily); RX/OTC
PIP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC			

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUEPLUS SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2	2	QL(6.67 EA daily); RX/OTC
TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 COMFORT	2	QL(6.67 EA daily); RX/OTC
ULILET CLASSIC LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 EXTRA	2	QL(6.67 EA daily); RX/OTC
ULILET LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 NEONATAL	2	QL(6.67 EA daily); RX/OTC
ULILET SAFETY LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 NORMAL	2	QL(6.67 EA daily); RX/OTC
ULILET SAFETY LANCETS 23G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 2 SUPER	2	QL(6.67 EA daily); RX/OTC
ULTRA THIN LANCETS 31G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3	2	QL(6.67 EA daily); RX/OTC
ULTRA-CARE LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 COMFORT	2	QL(6.67 EA daily); RX/OTC
ULTRA-THIN II AUTO LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 EXTRA	2	QL(6.67 EA daily); RX/OTC
ULTRA-THIN II LANCETS	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 GENTLE	2	QL(6.67 EA daily); RX/OTC
UNILET COMFORTOUCH LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 NEONATAL	2	QL(6.67 EA daily); RX/OTC
UNILET EXCELITE	2	QL(6.67 EA daily); RX/OTC	UNISTIK 3 NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET EXCELITE II	2	QL(6.67 EA daily); RX/OTC	UNISTIK CZT COMFORT	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK CZT NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET G.P. SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK NORMAL	2	QL(6.67 EA daily); RX/OTC
UNILET GP 28 ULTRA THIN	2	QL(6.67 EA daily); RX/OTC	UNISTIK PRO SAFETY LANCET	2	QL(6.67 EA daily); RX/OTC
UNILET LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC
UNILET MICRO-THIN 33G	2	QL(6.67 EA daily); RX/OTC	UNISTIK SAFETY LANCETS 30G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPERLITE LANCET	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 21G	2	QL(6.67 EA daily); RX/OTC
UNILET SUPER-THIN 30G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	2	QL(6.67 EA daily); RX/OTC
UNILET ULTRA-THIN 28G	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 28G	2	QL(6.67 EA daily); RX/OTC
UNISTIK 1	2	QL(6.67 EA daily); RX/OTC	UNISTIK TOUCH SAFETY LANC 30G	2	QL(6.67 EA daily); RX/OTC
			VERIFINE SAFE LANCET MINI 21G	2	QL(6.67 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VERIFINE SAFE LANCET MINI 23G	2	QL(6.67 EA daily); RX/OTC	CURITY ALCOHOL PREPS	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 28G	2	QL(6.67 EA daily); RX/OTC	CVS ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC
VERIFINE SAFE LANCET MINI 30G	2	QL(6.67 EA daily); RX/OTC	CVS PREP	2	QL(6.67 EA daily); RX/OTC
VERIFINE UNIVERSAL LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	DROPSAFE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
VERIFINE UNIVERSAL LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	EASY COMFORT ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	2	QL(6.67 EA daily); RX/OTC	EASY TOUCH ALCOHOL PREP MEDIUM	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD LANCETS	2	QL(6.67 EA daily); RX/OTC	EQL ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	FIFTY50 ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
VIVAGUARD SAFETY LANCETS 28G	2	QL(6.67 EA daily); RX/OTC	GLOBAL ALCOHOL PREP EASE	2	QL(6.67 EA daily); RX/OTC
ZEVRX TWIST TOP LANCETS 30G	2	QL(6.67 EA daily); RX/OTC	GNP ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
Misc. Devices			GOODSENSE ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
ADVOCATE ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	H-E-B INCONTROL ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOH-GLOVE CONTOURED WIPE	2	QL(6.67 EA daily); RX/OTC	HM STERILE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PADS	2	QL(6.67 EA daily); RX/OTC	MEIJER ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	PHARMACIST CHOICE ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	PRO COMFORT ALCOHOL	2	QL(6.67 EA daily); RX/OTC
ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC	PURE COMFORT ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
ALCOHOL SWABSTICK	2	QL(6.67 EA daily); RX/OTC	QC ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
AUM ALCOHOL PREP PADS	2	QL(6.67 EA daily); RX/OTC	REALITY SWABS	2	QL(6.67 EA daily); RX/OTC
BD SWAB SINGLE USE REGULAR	2	QL(6.67 EA daily); RX/OTC	RELION ALCOHOL SWABS	2	QL(6.67 EA daily); RX/OTC
CARETOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	SAPS CARE ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC
COMFORT TOUCH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC	SAPS HEALTH ALCOHOL PREP	2	QL(6.67 EA daily); RX/OTC

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	ALL FLOW 1000 PFT FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/ADULT DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU W/MASK MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE LARGE DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE MEDIUM DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE NEB MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER W/FLOWSIGNAL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE NEB MASK/INFANT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHE EASE SMALL DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BREATHRITE VALVED MDI CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	BUBBLES THE FISH II PEDI MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	CLEVER CHOICE HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	CO MONITOR REPLACEMENT PIECES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER2GO ANTI-STATIC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/LG MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROTRACH PLUS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/MED MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AEROVENT PLUS DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/SM MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
AIRS PEDIATRIC AEROSOL MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PARI ERAPID NEBULIZER HANDSET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER INFANT DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI EXPIRATORY FILTER SET DEVI	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCARE SPACER/ADULT MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI MASK SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCARE SPACER/CHILD MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI SOFT PLASTIC ADULT MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PROCHAMBER VHC DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PARI SOFT PLASTIC PED MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	PRONEB ULTRA FILTER SET MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PARI VORTEX ADULT MASK	2	QL(1 EA per 360 day(s) retail); RX/OTC	PURE COMFORT SPACER CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PEDIATRIC MOUTHPIECE MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	REPLACEMENT AIR FILTER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PFLEX MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	REPLACEMENT FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PHARMACIST CHOICE MASK WIPES MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	RITEFLO DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC
PILLOW MASK/ADULT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	SAMI THE SEAL FILTERS MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/CHILD MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	SIDESTREAM ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/PEDIATRIC MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	SIDESTREAM PEDIATRIC FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
POCKET CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	SIDESTREAM PLS ADULT FACE MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
POCKET SPACER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	SILICONE MASK/ADULT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PRO COMFORT SPACER ADULT MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	SILICONE MASK/INFANT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC
PRO COMFORT SPACER CHILD MISC	2	QL(2 EA per 365 day(s) retail); RX/OTC	SILICONE MASK/PEDIATRIC MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SOOTHENE NBL 100 ADULT MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	QULIPTA	2	PA
SOOTHENE NBL 100 CHILD MASK MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	UBRELVEY	2	PA
SOOTHENE NBL 100 MED CUP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	ZAVZPRET	NP	PA
SOOTHENE NBL 100 MESH CAP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	Migraine Combinations		
THRESHOLD IMT MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<i>ergotamine w/ caffeine TABS</i>	1	
TUBING/WING TIP MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<i>sumatriptan-naproxen sodium</i>	NP	
VORTEX HOLD CHMBR/MASK/CHILD DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	TREXIMET (<i>sumatriptan-naproxen sodium</i>)	NP	
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	Migraine Products		
VORTEX VALVE CHAMBER-PEDI MASK DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	
VORTEX VALVED HOLDING CHAMBER DEVI	2	QL(2 EA per 365 day(s) retail); RX/OTC	Serotonin Agonists		
WINDMILL TRAINER MISC	2	QL(1 EA per 360 day(s) retail); RX/OTC	<i>almotriptan malate</i>	NP	
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily)
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>frovatriptan succinate</i>	1	
AJOVY SOAJ	2	SP; PA	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP	
AJOVY SOSY	2	SP; PA	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(0.67 ML daily)
EMGALITY (300 MG DOSE) SOSY	NP	SP; PA	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP	
EMGALITY SOAJ	2	SP; PA	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(0.67 ML daily)
EMGALITY SOSY	2	SP; PA	<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
NURTEC	2	PA	<i>rizatriptan benzoate TABS</i>	1	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
			<i>rizatriptan benzoate TBP</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan</i>	1	QL(6 EA per 30 day(s) retail)
<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	NP	
<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	NP	QL(0.67 ML daily)
<i>sumatriptan succinate SOCT 4 MG/0.5ML</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)
<i>sumatriptan succinate TABS</i>	1	QL(9 EA per 30 day(s) retail)
<i>zolmitriptan SOLN 2.5 MG</i>	NP	
<i>zolmitriptan TABS</i>	1	QL(6 EA per 30 day(s) retail)
<i>zolmitriptan TBDP</i>	1	QL(6 EA per 30 day(s) retail)
<i>ZOMIG SOLN 2.5 MG (zolmitriptan)</i>	NP	

MINERALS & ELECTROLYTES

Calcium		
CALCIUM ACETATE	2	
<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT-600 MG, 400 UNIT-600 MG, 5 MCG-600 MG</i>	1	QL(2 EA daily)
<i>oyster shell</i>	1	
Fluoride		
<i>sodium fluoride CHEW</i>	1	
<i>sodium fluoride SOLN 0.5 MG/ML</i>	1	RX/OTC
SOLUVITA SOLN	2	RX/OTC
Magnesium		
<i>magnesium oxide (mg supplement) TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Phosphate		
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	QL(8 EA daily)
Potassium		
<i>potassium bicarbonate TBEF</i>	1	
<i>potassium chloride microencapsulated crystals er</i>	1	MP
<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	
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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
REVLIMID	2	SP; PA
THALOMID	2	SP; PA
Immunosuppressive Agents		
ASTAGRAF XL CP24	2	PA

Drug Name	Drug Tier	Requirements/ Limits
ATGAM	2	SP; PA
<i>azathioprine TABS 50 MG</i>	1	MP
<i>azathioprine TABS 75 MG, 100 MG</i>	1	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1	PA
<i>cyclosporine modified (for microemulsion) SOLN</i>	1	PA
<i>cyclosporine CAPS</i>	1	PA
<i>cyclosporine SOLN IV 50 MG/ML</i>	1	PA
<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
PROGRAF SOLN	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 SOLN 5 MG/ML</i>	1	PA
THYMOGLOBULIN	2	SP; PA
Lymphatic Agents		
SYLVANT	2	SP; PA
PIK3CA-Related Overgrowth Spectrum (PROS)		

Drug Name	Drug Tier	Requirements/ Limits
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>	NP	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1	
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		
<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		

Drug Name	Drug Tier	Requirements/ Limits
<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
BIOTENE DRY MOUTH MOIST SPRAY SOLN	2	QL(900 ML per fill retail); RX/OTC
CAPHOSOL SOLN	2	QL(900 ML per fill retail); RX/OTC
CVS DRY MOUTH SOLN	2	QL(900 ML per fill retail); RX/OTC
EQL DRY MOUTH ORAL RINSE SOLN	2	QL(900 ML per fill retail); RX/OTC
MOI-STIR SOLN	2	QL(900 ML per fill retail); RX/OTC
MOUTH KOTE REMINT SOLN	2	QL(900 ML per fill retail); RX/OTC
MOUTH KOTE SOLN	2	QL(900 ML per fill retail); RX/OTC
NUMOISYN LIQD	2	QL(900 ML per fill retail); RX/OTC
ORAL RELIEF SPRAY SOLN	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
B-Complex w/ Folic Acid		
<i>b-complex w/ c & folic acid CAPS</i>	1	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>b-complex w/ c & folic acid TABS</i>	1	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Iron		
DESTRESS-IRON TABS	2	QL(1 EA daily)
<i>multiple vitamins w/ iron TABS</i>	1	QL(1 EA daily)
STRESS FORMULA/IRON/ENERGY TABS	2	QL(1 EA daily)
TAB-A-VITE/IRON/BETA CAROTENE TABS	2	QL(1 EA daily)
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		
MULTIPLE VITAMINS TABS-ASSORTED BRAND	2	QL(1 ea daily)
MULTIPLE VITAMINS TABS-ASSORTED GENERIC	1	QL(1 ea daily)
Ped Multi Vitamins w/Fl & FE		
<i>ped multivitamins w/fl & iron SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC
Ped Multiple Vitamins w/ Minerals		
MVW COMPLETE FORMULATION SOLN	2	
Ped MV w/ Fluoride		
PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED BRAND	2	QL(1 ea daily); AL(Up to 13 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PEDIATRIC MULTIVITAMINS W/FL CHEW-ASSORTED GENERIC	1	QL(1 ea daily); AL(Up to 13 yrs old)	POLY-VITA SOLN PO	2	
PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED BRAND	2	QL(50ml per fill retail); AL(Up to 13 yrs old)	POLY-VITE PEDIATRIC SOLN PO	2	
PEDIATRIC MULTIVITAMINS W/FL SOLN-ASSORTED GENERIC	1	QL(50ml per fill retail); AL(Up to 13 yrs old)	Prenatal Vitamins		
<i>pediatric vitamins acd w/ fluoride SOLN</i>	1	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	PRENATAL VITAMINS-ASSORTED BRAND	2	QL(30 ea per 30 days retail); RX/OTC
SOLUVITA ACD WITH FLUORIDE SOLN	2	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	PRENATAL VITAMINS-ASSORTED GENERIC	1	QL(30 ea per 30 days retail); RX/OTC
VITAMINS ACD-FLUORIDE SOLN	2	QL(50 ML per fill retail); AL(Up to 13 yrs old); RX/OTC	Vitamins w/ Lipotropics		
Ped MV w/ Iron			<i>vitamins w/ lipotropics CAPS</i>	1	QL(1 EA daily)
BPROTECTED PEDIA POLY-VITE/FE SOLN	2		MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	2		Articular Cartilage Repair Therapy		
MULTIVITAMIN DROPS/IRON SOLN	2		MACI	2	SP; PA
MULTIVITAMIN INFANT & TODDLER SOLN	2		Central Muscle Relaxants		
PC PEDIATRIC POLY-VITA/FE DROP SOLN	2	QL(60 ML per fill retail)	AMRIX CP24 (cyclobenzaprine hcl)	NP	
POLY-VITA/IRON SOLN	2	QL(60 ML per fill retail)	<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP	
POLY-VITE/IRON SOLN	2		<i>baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	1	SP; PA
Pediatric Multiple Vitamins			<i>baclofen SUSP</i>	NP	
BPROTECTED PEDIA POLY-VITE SOLN PO	2		<i>baclofen TABS 15 MG</i>	1	
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	2		<i>baclofen TABS 10 MG, 20 MG</i>	1	MP
POLY-VI-SOL SOLN PO	2		<i>baclofen TABS 5 MG</i>	1	PA
			<i>carisoprodol TABS 350 MG</i>	1	MP; PA
			<i>carisoprodol TABS 250 MG</i>	NP	PA
			<i>chlorzoxazone TABS 250 MG, 375 MG, 750 MG</i>	1	
			<i>chlorzoxazone TABS 500 MG</i>	1	MP
			<i>cyclobenzaprine hcl CP24</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	1	QL(4 EA daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily)
FLEQSUVY SUSP (<i>baclofen</i>)	NP	
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	2	SP; PA
LIORESAL SOLN IT	2	SP; PA
LYVISPAH PACK	NP	
<i>metaxalone</i>	1	
METAXALONE 640 MG	2	
<i>methocarbamol TABS 750 MG, 1000 MG</i>	1	
<i>methocarbamol TABS 500 MG</i>	1	MP
<i>orphenadrine citrate TB12</i>	1	
OZOBAX DS SOLN PO (<i>baclofen</i>)	NP	
OZOBAX SOLN PO (<i>baclofen</i>)	NP	
SOMA TABS 250 MG (<i>carisoprodol</i>)	NP	PA
<i>tizanidine hcl CAPS</i>	1	
<i>tizanidine hcl TABS</i>	1	
Direct Muscle Relaxants		
DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	NP	
<i>dantrolene sodium CAPS</i>	NP	
Muscle Relaxant Combinations		
<i>orphenadrine w/ aspirin & caff</i>	NP	
Viscosupplements		
EUFLEXXA SOSY	2	SP; PA
GEL-ONE	2	SP; PA
GELSYN-3 SOSY	2	SP; PA
GENVISC 850 SOSY	2	SP; PA
HYALGAN SOLN	2	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
HYALGAN SOSY	2	SP; PA
HYMOVIS	2	SP; PA
MONOVISC	2	SP; PA
ORTHOVISC	2	SP; PA
SUPARTZ FX SOSY	2	SP; PA
SYNOJOYNT SOSY	2	SP; PA
SYNVISC ONE SOSY	2	SP; PA
SYNVISC SOSY	2	SP; PA
TRILURON SOSY	2	SP; PA
TRIVISC SOSY	2	SP; PA
VISCO-3 SOSY	2	SP; PA
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
<i>azelastine hcl-fluticasone propionate SUSP</i>	NP	
DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	2	
RYALTRIS	NP	
Nasal Agents - Misc.		
FT SALINE NASAL SPRAY SOLN	2	QL(90 ML per fill retail)
LITTLE REMEDIES SALINE SOLN	2	QL(90 ML per fill retail)
<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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Nasal Steroids			ELEVIDYS 18.5-19.4 KG	2	SP; PA
<i>flunisolide (nasal)</i>	1	QL(25 ML per fill retail)	ELEVIDYS 19.5-20.4 KG	2	SP; PA
<i>fluticasone propionate (nasal) SUSP</i>	1	QL(16 ML per fill retail); RX/OTC	ELEVIDYS 20.5-21.4 KG	2	SP; PA
<i>mometasone furoate (nasal) SUSP</i>	1	QL(17 GM per fill retail); AL(At least 2 yrs old); RX/OTC	ELEVIDYS 21.5-22.4 KG	2	SP; PA
Sympathomimetic Decongestants			ELEVIDYS 22.5-23.4 KG	2	SP; PA
<i>epinephrine hcl (nasal)</i>	1		ELEVIDYS 23.5-24.4 KG	2	SP; PA
<i>phenylephrine hcl (oral) TABS</i>	1	QL(24 EA per fill retail)	ELEVIDYS 24.5-25.4 KG	2	SP; PA
<i>pseudoephedrine hcl TABS</i>	1		ELEVIDYS 25.5-26.4 KG	2	SP; PA
<i>pseudoephedrine hcl TB12</i>	1	QL(2 EA daily)	ELEVIDYS 26.5-27.4 KG	2	SP; PA
SUDAFED CHILDRENS LIQD	2		ELEVIDYS 27.5-28.4 KG	2	SP; PA
SUDAFED PE CHILDRENS SOLN	2	QL(120 ML per fill retail)	ELEVIDYS 28.5-29.4 KG	2	SP; PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles			ELEVIDYS 29.5-30.4 KG	2	SP; PA
ALS Agents			ELEVIDYS 30.5-31.4 KG	2	SP; PA
<i>riluzole TABS</i>	1	PA	ELEVIDYS 31.5-32.4 KG	2	SP; PA
TEGLUTIK SUSP	2	SP; PA	ELEVIDYS 32.5-33.4 KG	2	SP; PA
TIGLUTIK SUSP	2	SP; PA	ELEVIDYS 33.5-34.4 KG	2	SP; PA
Muscular Dystrophy Agents			ELEVIDYS 34.5-35.4 KG	2	SP; PA
AMONDYS 45	2	SP; PA	ELEVIDYS 35.5-36.4 KG	2	SP; PA
ELEVIDYS 10.0-10.4 KG	2	SP; PA	ELEVIDYS 36.5-37.4 KG	2	SP; PA
ELEVIDYS 10.5-11.4 KG	2	SP; PA	ELEVIDYS 37.5-38.4 KG	2	SP; PA
ELEVIDYS 11.5-12.4 KG	2	SP; PA	ELEVIDYS 38.5-39.4 KG	2	SP; PA
ELEVIDYS 12.5-13.4 KG	2	SP; PA	ELEVIDYS 39.5-40.4 KG	2	SP; PA
ELEVIDYS 13.5-14.4 KG	2	SP; PA	ELEVIDYS 40.5-41.4 KG	2	SP; PA
ELEVIDYS 14.5-15.4 KG	2	SP; PA	ELEVIDYS 41.5-42.4 KG	2	SP; PA
ELEVIDYS 15.5-16.4 KG	2	SP; PA	ELEVIDYS 42.5-43.4 KG	2	SP; PA
ELEVIDYS 16.5-17.4 KG	2	SP; PA	ELEVIDYS 43.5-44.4 KG	2	SP; PA
ELEVIDYS 17.5-18.4 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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 55.5-56.4 KG	2	SP; PA	ZOLGENSMA 12.1-12.5 KG	2	SP; PA
ELEVIDYS 56.5-57.4 KG	2	SP; PA	ZOLGENSMA 12.6-13.0 KG	2	SP; PA
ELEVIDYS 57.5-58.4 KG	2	SP; PA	ZOLGENSMA 13.1-13.5 KG	2	SP; PA
ELEVIDYS 58.5-59.4 KG	2	SP; PA	ZOLGENSMA 13.6-14.0 KG	2	SP; PA
ELEVIDYS 59.5-60.4 KG	2	SP; PA	ZOLGENSMA 14.1-14.5 KG	2	SP; PA
ELEVIDYS 60.5-61.4 KG	2	SP; PA	ZOLGENSMA 14.6-15.0 KG	2	SP; PA
ELEVIDYS 61.5-62.4 KG	2	SP; PA	ZOLGENSMA 15.1-15.5 KG	2	SP; PA
ELEVIDYS 62.5-63.4 KG	2	SP; PA	ZOLGENSMA 15.6-16.0 KG	2	SP; PA
ELEVIDYS 63.5-64.4 KG	2	SP; PA	ZOLGENSMA 16.1-16.5 KG	2	SP; PA
ELEVIDYS 64.5-65.4 KG	2	SP; PA	ZOLGENSMA 16.6-17.0 KG	2	SP; PA
ELEVIDYS 65.5-66.4 KG	2	SP; PA	ZOLGENSMA 17.1-17.5 KG	2	SP; PA
ELEVIDYS 66.5-67.4 KG	2	SP; PA	ZOLGENSMA 17.6-18.0 KG	2	SP; PA
ELEVIDYS 67.5-68.4 KG	2	SP; PA	ZOLGENSMA 18.1-18.5 KG	2	SP; PA
ELEVIDYS 68.5-69.4 KG	2	SP; PA	ZOLGENSMA 18.6-19.0 KG	2	SP; PA
ELEVIDYS 69.5 KG PLUS	2	SP; PA	ZOLGENSMA 19.1-19.5 KG	2	SP; PA
EXONDYS 51	2	SP; PA	ZOLGENSMA 19.6-20.0 KG	2	SP; PA
VILTEPSO	2	SP; PA	ZOLGENSMA 2.6-3.0 KG	2	SP; PA
VYONDYS 53	2	SP; PA	ZOLGENSMA 20.1-20.5 KG	2	SP; PA
Neuromuscular Blocking Agent - Neurotoxins			ZOLGENSMA 3.1-3.5 KG	2	SP; PA
BOTOX IJ	2	SP; PA	ZOLGENSMA 3.6-4.0 KG	2	SP; PA
DYSPORE	2	SP; PA	ZOLGENSMA 4.1-4.5 KG	2	SP; PA
MYOBLOC	2	SP; PA	ZOLGENSMA 4.6-5.0 KG	2	SP; PA
XEOMIN	2	SP; PA	ZOLGENSMA 5.1-5.5 KG	2	SP; PA
Spinal Muscular Atrophy Agents (SMA)			ZOLGENSMA 5.6-6.0 KG	2	SP; PA
EVRYSDI PO 5 MG	2	SP			
EVRYSDI	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			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 6.1-6.5 KG	2	SP; PA	TIMOLOL-BRIMONIDINE-DORZOLAMID 0.5 %-0.15 %-2 %	2	
ZOLGENSMA 6.6-7.0 KG	2	SP; PA	TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP	QL(60 EA per fill retail)
ZOLGENSMA 7.1-7.5 KG	2	SP; PA	Cycloplegic Mydriatics		
ZOLGENSMA 7.6-8.0 KG	2	SP; PA	<i>atropine sulfate (ophthalmic) OINT</i>	1	QL(4 GM per fill retail)
ZOLGENSMA 8.1-8.5 KG	2	SP; PA	<i>atropine sulfate (ophthalmic) SOLN</i>	1	QL(5 ML per fill retail)
ZOLGENSMA 8.6-9.0 KG	2	SP; PA	ATROPINE SULFATE SOLN 1 %	2	QL(5 EA per fill retail)
ZOLGENSMA 9.1-9.5 KG	2	SP; PA	CYCLOGYL 0.5 %	2	QL(15 ML per fill retail)
ZOLGENSMA 9.6-10.0 KG	2	SP; PA	<i>cyclopentolate hcl 1 %</i>	1	QL(5 ML per fill retail)
OPHTHALMIC AGENTS - Drugs to Treat the Eye			<i>phenylephrine hcl (mydriatic) SOLN 2.5 %</i>	1	QL(5 ML per fill retail)
Artificial Tears and Lubricants			<i>tropicamide SOLN 0.5 %</i>	1	QL(15 ML per fill retail)
<i>polyvinyl alcohol 1.4 %</i>	1	QL(15 ML per fill retail)	<i>tropicamide SOLN 1 %</i>	1	QL(3 ML per fill retail)
<i>white petrolatum-mineral oil</i>	1	QL(5 GM per fill retail)	Miotics		
Beta-blockers - Ophthalmic			<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1	
<i>betaxolol hcl (ophth) SOLN</i>	NP	QL(5 ML per fill retail)	Ophthalmic - Angiogenesis Inhibitors		
<i>brimonidine tartrate-timolol maleate</i>	NP		BEVACIZUMAB IZ 2.5 MG/0.1ML, 3.25 MG/0.13ML	2	SP; PA
<i>carteolol hcl (ophth)</i>	1	1 max fill(s) per 30 day(s) retail	BEVACIZUMAB IZ 2.75 MG/0.11ML	2	PA
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	2		EYLEA SOLN	2	SP; PA
DORZOLAMIDE HCL-TIMOLOL MAL	2	QL(10 ML per fill retail)	LUCENTIS SOSY	2	SP; PA
<i>dorzolamide hcl-timolol maleate</i>	1		Ophthalmic Adrenergic Agents		
<i>dorzolamide hcl-timolol maleate</i>	1	QL(10 ML per fill retail)	ALPHAGAN P (<i>brimonidine tartrate</i>)	2	
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	2		<i>apraclonidine hcl</i>	1	
<i>levobunolol hcl 0.5 %</i>	1		<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	
<i>timolol maleate (ophth) SOLG 0.25 %</i>	1				
<i>timolol maleate (ophth) SOLN</i>	NP	QL(60 EA per fill retail)			
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP				
<i>timolol maleate (ophth) SOLN</i>	1	QL(5 ML per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits
<i>brimonidine tartrate 0.2 %</i>	1	QL(5 ML per fill retail)
SIMBRINZA	2	
Ophthalmic Anti-infectives		
<i>bacitracin-polymyxin b (ophth)</i>	1	QL(4 GM per fill retail)
<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(5 ML per fill retail)
ERYTHROMYCIN	2	QL(4 GM per fill retail)
<i>erythromycin (ophth)</i>	1	QL(4 GM per fill retail)
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	1	QL(5 ML per fill retail)
<i>levofloxacin (ophth) 0.5 %</i>	1	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1	QL(3 ML per fill retail)
<i>neomycin-bacitracin zn-polymyxin</i>	1	QL(4 GM per fill retail)
<i>neomycin-polymyxin-gramicidin</i>	1	QL(10 ML per fill retail)
<i>ofloxacin (ophth)</i>	1	QL(5 ML per fill retail)
<i>polymyxin b-trimethoprim</i>	1	QL(10 ML per fill retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	1	QL(15 ML per fill retail)
<i>tobramycin (ophth) SOLN</i>	1	QL(5 ML per fill retail)
TOBREX OINT	2	QL(4 GM per fill retail)
ZYMAXID (<i>gatifloxacin (ophth)</i>)	NP	
Ophthalmic Decongestants		
<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	1	QL(0.5 ML daily)
<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	1	1 max fill(s) per 30 day(s) retail
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	1	QL(30 ML per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	
<i>cyclosporine (ophth) EMUL</i>	NP	
RESTASIS MULTIDOSE EMUL	2	
RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	2	
VEVYE SOLN	NP	
Ophthalmic Integrin Antagonists		
XIIDRA	2	PA
Ophthalmic Kinase Inhibitors		
ROCKLATAN	2	PA
Ophthalmic Local Anesthetics		
<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-polymy-dexameth OINT</i>	1	QL(4 GM per fill retail)
<i>neomycin-polymy-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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRED MILD	2	QL(10 ML per fill retail)	<i>ketotifen fumarate (ophth)</i> 0.035 %	1	QL(5 ML per fill retail)
<i>prednisolone acetate (ophth)</i>	1	QL(5 ML per fill retail)	MIEBO	NP	
PREDNISOLONE ACETATE P-F	2	QL(5 ML per fill retail)	<i>olopatadine hcl</i>	1	
PREDNISOLONE SODIUM PHOSPHATE	2	QL(10 ML per fill retail)	Prostaglandins - Ophthalmic		
RETISERT	2	SP; PA	<i>bimatoprost SOLN</i>	NP	
<i>sulfacetamide sod-prednisolone SOLN</i>	1	QL(5 ML per fill retail)	IYUZEH SOLN	NP	
TOBRADEX OINT	2	QL(4 GM per fill retail)	TRAVATAN Z SOLN (<i>travoprost</i>)	2	
<i>tobramycin-dexamethasone SUSP</i>	1	QL(5 ML per fill retail)	<i>travoprost SOLN</i>	NP	
YUTIQ	2	SP	OTIC AGENTS - Drugs to Treat the Ear		
Ophthalmics - Misc.			Otic Agents - Miscellaneous		
ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	QL(5 ML per fill retail)	<i>acetic acid (otic)</i>	1	QL(15 ML per fill retail)
ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	2	1 max fill(s) per 30 day(s) retail	<i>carbamide peroxide (otic)</i> 6.5 %	1	QL(0.5 ML daily)
<i>azelastine hcl (ophth)</i>	1	QL(6 ML per fill retail)	Otic Anti-infectives		
<i>bromfenac sodium (ophth)</i> 0.075 %, 0.09 %	1		CETRAXAL (<i>ciprofloxacin hcl (otic)</i>)	2	
<i>cromolyn sodium (ophth)</i>	1	QL(10 ML per fill retail)	<i>ciprofloxacin hcl (otic)</i>	1	
CYSTARAN	2	SP; PA	<i>ofloxacin (otic)</i>	1	QL(5 ML per fill retail)
<i>diclofenac sodium (ophth)</i>	1	QL(5 ML per fill retail)	Otic Combinations		
<i>dorzolamide hcl</i>	1	QL(10 ML per fill retail)	<i>ciprofloxacin-dexamethasone</i>	1	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail
DORZOLAMIDE HCL	2	QL(10 ML per fill retail)	<i>neomycin-polymyxin-hc (otic) SOLN</i>	1	QL(10 ML per fill retail)
<i>epinastine hcl (ophth)</i>	NP		<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	QL(10 ML per fill retail)
<i>flurbiprofen sodium</i>	1	QL(3 ML per fill retail)	Otic Steroids		
ILEVRO	NP		<i>fluocinolone acetonide (otic)</i>	1	QL(20 ML per fill retail)
<i>ketorolac tromethamine (ophth)</i> 0.5 %	NP	QL(5 ML per fill retail)	<i>hydrocortisone w/acetic acid</i>	1	QL(10 ML per fill retail)
<i>ketorolac tromethamine (ophth)</i> 0.4 %	NP	1 max fill(s) per 30 day(s) retail	OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		

Drug Name	Drug Tier	Requirements/ Limits
Oxytocics		
<i>methylergonovine maleate TABS</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
BIVIGAM SOLN	2	SP; PA
CUVITRU SOLN	2	SP; PA
CYTOGAM SOLN	2	SP; PA
FLEBOGAMMA DIF SOLN	2	SP; PA
GAMASTAN IM	2	SP; PA
GAMMAGARD	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	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

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

Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG</i>	1	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate TB12</i>	1	QL(1.34 EA daily)
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

Drug Name	Drug Tier	Requirements/ Limits
<i>progesterone CAPS 100 MG</i>	1	QL(1 EA daily)
<i>progesterone CAPS 200 MG</i>	1	QL(20 EA per 30 day(s) retail)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL 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-Cataplectic Agents		
SODIUM OXYBATE SOLN	2	SP; PA
XYREM SOLN	2	SP; PA
Antidementia Agents		
ADLARITY PTWK	NP	
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	1	QL(1 EA daily); MP
<i>donepezil hydrochloride TABS 23 MG</i>	1	
<i>donepezil hydrochloride TBDP</i>	1	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	2	QL(1 EA daily)
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	2	
<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	1	QL(2 EA daily)
<i>memantine hcl CP24</i>	1	
<i>memantine hcl SOLN</i>	NP	QL(10 ML daily)
<i>memantine hcl TABS</i>	NP	QL(1 EA per 28 day(s) retail)
<i>memantine hcl TABS</i>	1	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/ Limits
NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	NP	QL(1 EA per 28 day(s) retail)
<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	QL(1 EA daily)
<i>rivastigmine 13.3 MG/24HR</i>	NP	
<i>rivastigmine tartrate CAPS</i>	1	QL(2 EA daily)
Cerebral Adrenoleukodystrophy (CALD) Agents		
SKYSONA	2	SP; PA
Combination Psychotherapeutics		
LYBALVI	NP	
<i>perphenazine-amitriptyline</i>	1	QL(4 EA daily)
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	2	QL(55 EA per 365 day(s) retail); PA
SAVELLA TABS	2	QL(2 EA daily); PA
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION TEPK	2	SP; PA
AUSTEDO XR PATIENT TITRATION TEPK	2	SP; PA
AUSTEDO XR TB24	2	SP; PA
AUSTEDO XR TB24	2	SP; PA
AUSTEDO TABS	2	SP; PA
INGREZZA CAPS	2	SP; PA
INGREZZA CPSP	2	SP; PA
<i>tetrabenazine</i>	NP	SP; PA
XENAZINE (<i>tetrabenazine</i>)	NP	SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	2	SP; PA
AVONEX PREFILLED PSKT	2	SP; PA
BAFIERTAM	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
BRIUMVI	NP	SP
COPAXONE SOSY (<i>glatiramer acetate</i>)	2	SP; PA
<i>dalfampridine</i>	1	SP; PA
<i>dimethyl fumarate CDPK</i>	1	SP; PA
<i>dimethyl fumarate CPDR</i>	1	SP; PA
<i>fingolimod hcl</i>	1	SP; PA
GILENYA (<i>fingolimod hcl</i>)	NP	SP; PA
GILENYA	NP	SP; PA
<i>glatiramer acetate SOSY</i>	NP	SP; PA
KESIMPTA	2	SP; PA
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP
MAYZENT TABS	NP	SP
OCREVUS ZUNOVO	NP	SP
PLEGRIDY SOSY IM	NP	SP
PONVORY STARTER PACK TBPK	NP	SP
PONVORY TABS	NP	SP
TASCENSO ODT	NP	SP
ZEPOSIA STARTER KIT CPPK	NP	SP
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) TABS 20 MG</i>	1	QL(4 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl (pmdd) TABS 10 MG</i>	1	AL(At least 7 yrs old)
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1	
Smoking Deterrents		
APO-VARENICLINE TABS	2	QL(2 EA daily); AL(At least 13 yrs old)
<i>bupropion hcl (smoking deterrent)</i>	0	AL(At least 13 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHANTIX CONTINUING MONTH PAK TABS (<i>varenicline tartrate</i>)	2	QL(2 EA daily); AL(At least 13 yrs old)	KALYDECO PACK 50 MG, 75 MG	2	SP; PA
CHANTIX STARTING MONTH PAK TBPK (<i>varenicline tartrate</i>)	2	AL(At least 13 yrs old)	KALYDECO TABS	2	SP; PA
CHANTIX TABS (<i>varenicline tartrate</i>)	2	QL(2 EA daily); AL(At least 13 yrs old)	ORKAMBI PACK	2	SP; PA
<i>nicotine polacrilex GUM</i>	0	AL(At least 13 yrs old)	ORKAMBI TABS	2	SP; PA
<i>nicotine polacrilex LOZG</i>	0	AL(At least 13 yrs old)	PULMOZYME	2	SP; PA
NICOTINE KIT	0	AL(At least 13 yrs old)	SYMDEKO	2	SP; PA
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	AL(At least 13 yrs old)	TRIKAFTA TBPK 100 MG-50 MG	2	QL(3 EA daily); SP; PA
NICOTROL NS SOLN	NP	AL(At least 13 yrs old); PA	Pulmonary Fibrosis Agents		
NICOTROL INHA	NP	AL(At least 13 yrs old); PA	OFEV	2	SP; PA
<i>varenicline tartrate TABS</i>	NP	QL(2 EA daily); AL(At least 13 yrs old)	<i>pirfenidone CAPS</i>	1	SP; PA
<i>varenicline tartrate TBPK</i>	NP	AL(At least 13 yrs old)	<i>pirfenidone TABS 534 MG</i>	1	SP
Transthyretin Amyloidosis Agents			TETRACYCLINES - Drugs to Treat Bacterial Infections		
ONPATTRO	2	SP; PA	Tetracyclines		
TEGSEDI	2	SP; PA	<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	
Vasomotor Symptom Agents			<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	1	
<i>paroxetine mesylate (vasomotor)</i>	NP		<i>doxycycline hyclate CAPS</i>	1	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>doxycycline hyclate TABS 100 MG</i>	1	
Alpha-Proteinase Inhibitor (Human)			<i>minocycline hcl CAPS</i>	1	
ARALAST NP SOLR 500 MG, 1000 MG	2	SP; PA	THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
GLASSIA SOLN	2	SP; PA	Antithyroid Agents		
PROLASTIN-C SOLR	2	SP; PA	<i>methimazole TABS</i>	1	MP
ZEMAIRA SOLR 1000 MG	2	SP; PA	<i>propylthiouracil</i>	1	MP
Cystic Fibrosis Agents			Thyroid Hormones		
			ADTHYZA TABS 15 MG, 30 MG, 60 MG, 65 MG, 90 MG, 120 MG, 130 MG	2	MP
			ARMOUR THYROID TABS	2	MP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	2	MP	PEDIARIX SUSY	0	AL(At least 19 yrs old)
<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		PENTACEL	0	AL(At least 19 yrs old)
<i>levothyroxine sodium TABS</i>	1	MP	QUADRACEL SUSP	0	AL(At least 19 yrs old)
<i>liothyronine sodium TABS</i>	1	MP	QUADRACEL SUSY	0	AL(At least 19 yrs old)
NIVA THYROID TABS	2	MP	TDVAX SUSP	0	AL(At least 19 yrs old)
NP THYROID TABS	2	MP	TENIVAC SUSP 2 LFU-5 LFU	0	AL(At least 19 yrs old)
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	0	AL(At least 19 yrs old)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	MP	VAXELIS SUSP	0	AL(At least 19 yrs old)
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	MP	VAXELIS SUSY	0	AL(At least 19 yrs old)
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		ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
TOXOIDS			Antispasmodics		
Toxoid Combinations			<i>dicyclomine hcl CAPS</i>	1	
ADACEL SUSP	0	AL(At least 19 yrs old)	<i>dicyclomine hcl SOLN PO</i>	1	QL(40 ML daily)
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0	AL(At least 19 yrs old)	<i>dicyclomine hcl TABS</i>	1	
BOOSTRIX SUSP	0	AL(At least 19 yrs old)	<i>glycopyrrolate TABS 1 MG, 2 MG</i>	1	QL(4 EA daily)
BOOSTRIX SUSY	0	AL(At least 19 yrs old)	<i>hyoscyamine sulfate ELIX</i>	1	
DAPTACEL	0	AL(At least 19 yrs old)	<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	1	
INFANRIX	0	AL(At least 19 yrs old)	<i>hyoscyamine sulfate SUBL 0.125 MG</i>	1	
KINRIX SUSY	0	AL(At least 19 yrs old)	<i>hyoscyamine sulfate TABS 0.125 MG</i>	1	
			<i>hyoscyamine sulfate TB12 0.375 MG</i>	1	
			<i>hyoscyamine sulfate TBDP 0.125 MG</i>	1	
			H-2 Antagonists		
			<i>cimetidine TABS 800 MG</i>	1	QL(500 EA per fill retail)
			<i>cimetidine TABS 200 MG</i>	1	MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>cimetidine TABS 300 MG, 400 MG</i>	1	
<i>famotidine TABS 20 MG, 40 MG</i>	1	MP; RX/OTC
<i>famotidine TABS 10 MG</i>	1	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1	QL(420 ML per fill retail)
<i>sucralfate TABS</i>	1	QL(4 EA daily); MP
Proton Pump Inhibitors		
<i>esomeprazole magnesium CPDR</i>	1	RX/OTC
<i>esomeprazole magnesium PACK</i>	1	
<i>lansoprazole CPDR</i>	1	
<i>lansoprazole TBDD</i>	1	PA; RX/OTC
NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	NP	RX/OTC
NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	NP	RX/OTC
NEXIUM CPDR 20 MG (<i>esomeprazole magnesium</i>)	NP	RX/OTC
NEXIUM PACK 10 MG, 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	NP	
<i>omeprazole CPDR</i>	1	QL(2 EA daily)
<i>omeprazole TBEC</i>	1	QL(1 EA daily)
<i>pantoprazole sodium PACK</i>	NP	
<i>pantoprazole sodium TBEC 40 MG</i>	1	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)
PROTONIX PACK (<i>pantoprazole sodium</i>)	2	
<i>rabeprazole sodium TBEC</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1	
Ulcer Therapy Combinations		
KONVOMEF SUSR	NP	
<i>omeprazole-sodium bicarbonate CAPS</i>	NP	RX/OTC
<i>omeprazole-sodium bicarbonate PACK</i>	NP	
ZEGERID OTC CAPS (<i>omeprazole-sodium bicarbonate</i>)	NP	RX/OTC
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>	1	
DETROL LA CP24 (<i>tolterodine tartrate</i>)	NP	QL(1 EA daily)
<i>fesoterodine fumarate</i>	1	
<i>oxybutynin chloride SOLN</i>	1	
<i>oxybutynin chloride TABS 2.5 MG</i>	NP	
<i>oxybutynin chloride TABS 5 MG</i>	1	QL(3 EA daily); MP
<i>oxybutynin chloride TB24</i>	1	QL(2 EA daily); MP
<i>solifenacin succinate TABS</i>	1	
<i>tolterodine tartrate CP24</i>	NP	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1	QL(2 EA daily)
TOVIAZ (<i>fesoterodine fumarate</i>)	NP	
<i>tropium chloride CP24</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>trospium chloride TABS</i>	1	QL(2 EA daily)
VESICARE LS SUSP	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	
<i>mirabegron TB24</i>	NP	
MYRBETRIQ TB24 (<i>mirabegron</i>)	2	
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	1	MP
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	NP	
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)
MENACTRA	0	AL(At least 19 yrs old)
MENQUADFI 0.5 ML	0	AL(At least 19 yrs old)
MENVEO SOLN	0	AL(At least 19 yrs old)
MENVEO SOLR	0	AL(At least 19 yrs old)
PEDVAX HIB SUSP	0	AL(At least 19 yrs old)
PENBRAYA	0	AL(At least 19 yrs old)
PNEUMOVAX 23 SOLN	0	AL(At least 19 yrs old)
PNEUMOVAX 23 SOSY	0	AL(At least 19 yrs old)
PREVNAR 13	0	AL(At least 19 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
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)
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	0	AL(At least 19 yrs old)
AFLURIA PRESERVATIVE FREE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AFLURIA QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
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	

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

Drug Name	Drug Tier	Requirements/ Limits
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 QUADRIVALENT 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)
FLUMIST QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL (At least 19 yrs old)
FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail; AL (At least 19 yrs old)
FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail; AL (At least 19 yrs old)
FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail; AL (At least 19 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUZONE QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	MODERNA COVID-19 BIVALENT	0	
FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	MODERNA COVID-19 VAC 6M-11Y SUSP	0	
FLUZONE SUSY	0	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	MODERNA COVID-19 VAC 6M-11Y SUSY	0	
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)	MODERNA COVID-19 VACCINE SUSP	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)	NOVAVAX COVID-19 VACCINE SUSP	0	
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0	AL(At least 19 yrs old)	NOVAVAX COVID-19 VACCINE SUSY	0	
HEPLISAV-B SOSY	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0	
IMOVAX RABIES SUSR	0	AL(At least 19 yrs old)	PFIZER COVID-19 VAC BIVALENT	0	
IPOL IJ	0	AL(At least 19 yrs old)	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0	
IXCHIQ	0	AL(At least 19 yrs old)	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0	
IXIARO	0	AL(At least 19 yrs old)	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	0	
JYNNEOS	0	AL(At least 19 yrs old)	PFIZER-BIONTECH COVID-19 VACC SUSP	0	
M-M-R II SOLR	0	AL(At least 19 yrs old)	PREHEVBRIO	0	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)
MNEXSPIKE SUSY 10 MCG/0.2ML	0		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)
			RECOMBIVAX HB SUSY	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
ROTARIX SUSP	0	AL(At least 19 yrs old)	CLEOCIN CREA (clindamycin phosphate vaginal)	2	QL(40 GM per fill retail)
ROTATEQ SOLN	0	AL(At least 19 yrs old)	clindamycin phosphate vaginal CREA	NP	QL(40 GM per fill retail)
SHINGRIX	0	Limit 2 dose per lifetime; 2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)	CLINDESSE	2	
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0		clotrimazole vaginal CREA 1 %	1	QL(45 GM per fill retail)
SPIKEVAX SUSP	0		clotrimazole vaginal CREA 2 %	1	QL(21 GM per fill retail)
SPIKEVAX SUSY	0		GYNAZOLE-1	2	
STAMARIL SUSR	0	AL(At least 19 yrs old)	metronidazole vaginal	1	
TICOVAC	0	AL(At least 19 yrs old)	metronidazole vaginal	1	QL(70 GM per fill retail)
TWINRIX SUSY	0	AL(At least 19 yrs old)	MICONAZOLE 7 SUPP 100 MG	2	QL(7 EA per fill retail)
VAQTA	0	AL(At least 19 yrs old)	miconazole nitrate vaginal CREA 2 %	1	QL(45 GM per fill retail)
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	AL(At least 19 yrs old)	miconazole nitrate vaginal KIT	1	QL(24 EA per fill retail)
VARIVAX SUSR	0	2 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old)	miconazole nitrate vaginal SUPP 200 MG	1	QL(3 EA per fill retail)
YF-VAX SUSR	0	AL(At least 19 yrs old)	miconazole nitrate vaginal SUPP 100 MG	1	QL(7 EA per fill retail)
VAGINAL AND RELATED PRODUCTS			MONISTAT 3 CREA	2	QL(15 GM daily)
Spermicides			NUVESSA	2	
ENCARE SUPP 100 MG	2	QL(12 EA per fill retail)	terconazole vaginal CREA 0.4 %	1	QL(45 GM per fill retail)
OPTIONS GYNOL II CONTRACEPTIVE GEL	2	QL(86 GM per fill retail)	terconazole vaginal CREA 0.8 %	1	QL(20 GM per fill retail)
VCF VAGINAL CONTRACEPTIVE FILM	2	QL(9 EA per fill retail)	terconazole vaginal SUPP	1	QL(3 EA per fill retail)
VCF VAGINAL CONTRACEPTIVE GEL	2		tioconazole vaginal 6.5 %	1	QL(5 GM per fill retail)
Vaginal Anti-infectives			VANDAZOLE	NP	QL(70 GM per fill retail)
			XACIATO GEL	NP	
			Vaginal Anti-inflammatory Agents		
			hydrocortisone vaginal	1	QL(85.2 GM per fill retail)
			MONISTAT CARE INSTANT ITCH RLF 1 %	2	QL(85.2 GM per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
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 0.15 MG/0.15ML, 0.3 MG/0.3ML	NP	QL(6 EA per 180 day(s) retail; 180 EA per 180 days mail)
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	2	QL(6 EA per 180 day(s) retail; 6 EA per 180 days mail)
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(6 EA per 180 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	2	QL(6 EA per 180 day(s) retail)
EPIPEN JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	2	QL(6 EA per 180 day(s) retail)
NEFFY SOLN NA	2	
Neurogenic Orthostatic Hypotension (NOH) - Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>droxidopa</i>	1	SP; PA
Vasopressors		
<i>midodrine hcl</i>	1	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG</i>	1	QL(2 EA daily)
<i>cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT</i>	1	QL(0.267 EA daily)
<i>cholecalciferol LIQD PO 400 UT/0.028ML, 10 MCG/ML, 400 UNIT/ML</i>	1	
<i>ergocalciferol CAPS</i>	1	
KEY-E CHEW	2	QL(2 EA daily)
<i>phytonadione TABS 5 MG</i>	1	
VITAMIN D3 LIQD PO 125 MCG/ML	2	
<i>vitamin e CAPS</i>	1	QL(2 EA daily)
VITAMIN E CAPS	2	QL(2 EA daily)
VITAMIN E CHEW	2	QL(2 EA daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	1	QL(100 EA per 34 day(s) retail)
B-1 TABS	2	QL(2.94 EA daily)
NIACIN ER CPCR	2	
NIACIN ER TBCR	2	
<i>niacin CPCR 250 MG, 500 MG</i>	1	
<i>niacin TABS 500 MG</i>	1	
<i>niacin TBCR</i>	1	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	1	
<i>riboflavin TABS</i>	1	QL(2.94 EA daily)
<i>thiamine hcl TABS</i>	1	QL(2.94 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
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BD PEN NEEDLES	72	betaine	55	BIKTARVY 200 MG-50 MG-25 MG 35	
BD SWAB SINGLE USE REGULAR 71		betamethasone dipropionate (topical) CREA	48	BILAC CAPS	19
BD VERITOR SYSTEM SARS-COV- 2	52	betamethasone dipropionate (topical) LOTN	48		

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BIMZELX SOAJ 160 MG/ML46	BONJESTA TBCR24	brimonidine tartrate 0.1 %, 0.15 % 84
BIMZELX SOAJ 320 MG/2ML46	BONSITY SOPN 560 MCG/2.24ML 54	brimonidine tartrate 0.2 %85
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BIOHM PROBIOTIC SUPPLEMENT CAPS19	BOSULIF TABS 100 MG, 500 MG .31	bromfenac sodium (ophth) 0.075 %, 0.09 %86
BIOHM PROBIOTIC/VITAMIN C CAPS19	BOTOX IJ83	bromocriptine mesylate CAPS32
BIO-KULT CAPS19	BPROTECTED PEDIA POLY-VITE SOLN PO80	bromocriptine mesylate TABS 2.5 MG32
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BIOTHRAX93	BRAFTOVI 75 MG31	brompheniramine & pseudoeph ELIX 44
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bisacodyl TBEC63	BREATHE EASE LARGE DEVI ...73	budesonide (inhalation) SUSP11
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	BREZTRI AEROSPHERE12	buprenorphine hcl-naloxone hcl
	BRIDION SOLN23	
	BRILINTA 60 MG, 90 MG (ticagrelor)	

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buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG 8	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) 39	capecitabine29
buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG 8	caffeine citrate SOLN PO 1	CAPEX SHAM 48
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG 8	calcipotriene CREA 46	CAPHOSOL SOLN 79
buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG 8	CALCIPOTRIENE FOAM 46	CAPLYTA 33
buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG 8	calcipotriene OINT 47	CAPRELSA 31
buprenorphine PTWK 8	calcipotriene SOLN 47	capsaicin CREA 0.025 %, 0.075 % 51
bupropion hcl (smoking deterrent) 89	calcipotriene-betamethasone dipropionate OINT 48	capsaicin CREA 0.035 % 51
bupropion hcl TABS 15	calcipotriene-betamethasone dipropionate SUSP 48	capsaicin CREA 0.1 % 51
bupropion hcl TB12 100 MG 15	calcitonin (salmon) IJ 54	captopril & hydrochlorothiazide ... 26
bupropion hcl TB12 150 MG 15	calcitonin (salmon) NA 54	captopril 26
bupropion hcl TB12 200 MG 15	calcitriol CAPS 55	CARAC CREA (fluorouracil (topical)) 46
bupropion hcl TB24 150 MG 15	calcium acetate (phosphate binder) CAPS 58	CARBAGLU (carglumic acid) 55
bupropion hcl TB24 300 MG 15	calcium acetate (phosphate binder) TABS 58	carbamazepine CHEW 100 MG ... 13
bupropion hcl TB24 450 MG 15	CALCIUM ACETATE 77	carbamazepine CHEW 200 MG ... 13
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butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG 6	calcium polycarbophil TABS 62	carbamazepine TABS 13
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		carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML 28
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MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)	38	cefaclor CAPS	40	CETRAXAL (ciprofloxacin hcl (otic)) .	86
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CAREONE LANCET THIN 23G ...	64	cefaclor SUSR 250 MG/5ML	40	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)	90
CARESENS LANCETS	64	cefadroxil CAPS	40	CHANTIX TABS (varenicline tartrate)	90
CARESENS LANCETS 30G	64	cefadroxil SUSR	40	CHEMET	23
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CARETOUCH SAFETY LANCETS 64		cefdinir SUSR	40	CHILDRENS ADVIL SUSP 100 MG/5ML (ibuprofen)	5
CARETOUCH SAFETY LANCETS 26G	64	cefexime CAPS	40	CHILDRENS MOTRIN SUSP 100 MG/5ML (ibuprofen)	5
CARETOUCH TWIST LANCETS 28G	64	cefexime SUSR	40	chlordiazepoxide hcl CAPS	10
CARETOUCH TWIST LANCETS 30G	64	cefopodoxime proxetil SUSR	40	chlorhexidine gluconate (mouth- throat)	78
CARETOUCH TWIST LANCETS 33G	64	cefopodoxime proxetil TABS	40	chloroquine phosphate TABS 250 MG	28
CARETOUCH TWIST MC LANCETS 30G	64	cefprozil SUSR	40	chloroquine phosphate TABS 500 MG	28
carglumic acid	55	cefprozil TABS	40	chlorpheniramine maleate SYRP ..	24
carisoprodol TABS 250 MG	80	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG	40	chlorpheniramine maleate TABS ..	24
carisoprodol TABS 350 MG	80	cefuroxime axetil TABS	40	chlorpromazine hcl TABS	34
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carvedilol 25 MG	38	CELONTIN (methsuximide)	14	chlorzoxazone TABS 250 MG, 375 MG, 750 MG	80
carvedilol 3.125 MG, 6.25 MG, 12.5 MG	38	cephalexin CAPS 250 MG, 500 MG 40		chlorzoxazone TABS 500 MG	80
carvedilol phosphate	38	cephalexin SUSR	40	CHOLBAM	56
CASGEVY	60	CEPROTIN	59	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT	97
CASTIVA WARMING LOTN	51	CEQUA SOLN	85	cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG	97
CAYSTON	28	CERDELGA	60		
		CEREZYME 400 UNIT	60		
		cetirizine hcl CAPS	24		
		cetirizine hcl CHEW	24		
		cetirizine hcl SOLN PO	24		
		cetirizine hcl SYRP PO 1 MG/ML ..	24		
		cetirizine hcl TABS	24		

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cilostazol60	CLEOCIN CREA (clindamycin phosphate vaginal)96	clobetasol propionate emollient base 0.05 %48
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clonidine hcl (adhd) TB12	2	colestipol hcl GRAN	25	COMPACT SPACE CHAMBER/MED MASK DEVI	73
clonidine hcl TABS	26	colestipol hcl TABS	25	COMPACT SPACE CHAMBER/SM MASK DEVI	73
clopidogrel bisulfate 300 MG	60	COMBIGAN (brimonidine tartrate-timolol maleate)	84	COMPLERA 200 MG-300 MG-25 MG (emtricitabine-rilpivirine-tenofovir disoproxil fumarate)	35
clopidogrel bisulfate 75 MG	60	COMBIPATCH PTTW	56	COMPLETE PROBIOTIC PEARLS CAPS	19
clorazepate dipotassium TABS	10	COMBIVENT RESPIMAT AERS ..	12	CONCERTA TBCR (methylphenidate hcl)	2
clotrimazole (topical) CREA	46	COMBIVIR (lamivudine-zidovudine) .	35	CONDOMS-MISC	63
clotrimazole (topical) SOLN	46	COMETRIQ (100 MG DAILY DOSE) KIT	31	CONJUPRI (levamlodipine maleate) 38	
clotrimazole vaginal CREA 1 % ...	96	COMETRIQ (140 MG DAILY DOSE) KIT	31	CONZIP CP24 (tramadol hcl)	6
clotrimazole vaginal CREA 2 % ...	96	COMETRIQ (60 MG DAILY DOSE) KIT	31	COPAXONE SOSY (glatiramer acetate)	89
clotrimazole w/ betamethasone CREA	46	COMFORT ASSURED LANCETS 28G	65	CORDRAN LOTN (flurandrenolide) 48	
clotrimazole w/ betamethasone LOTN	46	COMFORT ASSURED LANCETS 33G	65	COREG CR (carvedilol phosphate) 38	
clozapine TABS	34	COMFORT TOUCH ALCOHOL PREP	71	CORIFACT	59
clozapine TBDP	34	COMFORT TOUCH LANCETS 31G .	65	CORTISONE ACETATE TABS	43
CO MONITOR REPLACEMENT PIECES MISC	73	COMFORT TOUCH PLUS LANCETS 28G	65	CORTROPHIN GEL	54
COAGADEX	59	COMFORT TOUCH PLUS LANCETS 30G	65	COSENTYX (300 MG DOSE) SOSY .	47
COAGUCHEK LANCETS	65	COMFORT TOUCH TWIST LANCET 30G	65	COSENTYX SENSOREADY (300 MG) SOAJ	47
coal tar extract SHAM 0.5 %	52	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	93	COSENTYX SENSOREADY PEN SOAJ	47
COARTEM	28	COMIRNATY SUSP	93	COSENTYX SOLN	47
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CODEINE SULFATE TABS	6				

COSENTYX SOSY	47	CAPS	19	CVS LANCETS THIN 26G	65
COSENTYX UNOREADY SOAJ ..	47	CULTURELLE KID PROBIOTIC+FIBER PACK	19	CVS LANOLIN CREA	51
cosyntropin SOLR	52	CULTURELLE KIDS CHEW	19	CVS MOOD SUPPORT PROBIOTIC CAPS	20
COTELLIC	31	CULTURELLE KIDS PACK	19	CVS PREP	71
COVID-19 AT HOME ANTIGEN TEST KIT	52	CULTURELLE KIDS PURELY CHEW	19	CVS PROBIOTIC ADULT 50+ CAPS	20
COVID-19 AT-HOME TEST KIT ...	52	CULTURELLE KIDS PURELY PACK	19	CVS PROBIOTIC CAPS	20
COVID-19 OTC ANTIGEN 1-PACK KIT	52	CULTURELLE METABOLISM-WEIGHT CAPS	19	CVS PROBIOTIC MAXIMUM STRENGTH CAPS	20
COVID-19 OTC ANTIGEN 2-PACK KIT	52	CULTURELLE PROBIOTICS KIDS PACK	19	CVS PROBIOTIC PEARLS EX ST CAPS	20
CREON CPEP	53	CULTURELLE PRO-WELL CAPS	19	CVS SENIOR PROBIOTIC CAPS	20
CRINONE GEL	97	CULTURELLE ULTIMATE STRENGTH CAPS	23	CVS SOFT GLUCOSE CHEW	17
cromolyn sodium (nasal) 5.2 MG/ACT	81	CURITY ALCOHOL PREPS	71	CVS ULTRA THIN LANCETS	65
cromolyn sodium (ophth)	86	CUVITRU SOLN	87	cyanocobalamin SOLN IJ 1000 MCG/ML	60
cromolyn sodium NEBU	10	CVS ADULT 50+ PROBIOTIC CAPS	19	cyclobenzaprine hcl CP24	80
CRYSVITA	55	CVS ADULT PROBIOTIC CAPS ..	19	cyclobenzaprine hcl TABS 5 MG, 10 MG	81
CTEXLI TABS PO 250 MG	56	CVS ALCOHOL PREP PADS	71	cyclobenzaprine hcl TABS 7.5 MG	81
CULTURELLE ADULT ULT BALANCE CAPS	22	CVS COVID-19 AT HOME TEST KIT KIT	52	CYCLOGYL 0.5 %	84
CULTURELLE BLOATING & GAS DEF CAPS	19	CVS DAILY PROBIOTIC CAPS ...	20	cyclopentolate hcl 1 %	84
CULTURELLE DIGESTIVE DAILY CAPS	22	CVS DAILY PROBIOTIC CHILDRENS PACK	19	cyclophosphamide CAPS 50 MG ..	28
CULTURELLE DIGESTIVE DAILY PRO CAPS	22	CVS DIGESTIVE PROBIOTIC CAPS	20	CYCLOPHOSPHAMIDE TABS	28
CULTURELLE DIGESTIVE HEALTH CAPS	22	CVS DRY MOUTH SOLN	79	cyclosporine (ophth) EMUL	85
CULTURELLE DIGESTIVE HEALTH CHEW	22	CVS EVERYDAY CARE PROBIOTIC CAPS	20	cyclosporine CAPS	78
CULTURELLE HEALTH (INULIN) CAPS	23	CVS GLUCOSE CHEW	17	cyclosporine modified (for microemulsion) CAPS	78
CULTURELLE IMMUNE DEFENSE		CVS LANCETS ORIGINAL	65	cyclosporine modified (for microemulsion) SOLN	78
				cyclosporine SOLN IV 50 MG/ML	78
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diphenhydramine hcl ELIX 12.5 MG/5ML24	dofetilide10	DROPSAFE ACTI-LANCE 23G ...65
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diphenhydramine hcl TABS 25 MG 24	donepezil hydrochloride TABS 5 MG, 10 MG88	drospirenone-ethinyl estradiol41
diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG, 500 MG-38 MG 61	donepezil hydrochloride TBDP 88	drospirenone-ethinyl estradiol-levomefolate calcium41
diphenoxylate w/ atropine LIQD ...23	DOPTELET60	DROXIA CAPS60
diphenoxylate w/ atropine TABS ..23	dorzolamide hcl86	droxidopa97
DIPROLENE OINT (betamethasone dipropionate augmented)48	DORZOLAMIDE HCL 86	DRUG MART ON-THE-GO LANCET 30G65
dipyridamole60	DORZOLAMIDE HCL-TIMOLOL MAL84	DRUG MART UNILET LANCETS 28G65
disopyramide phosphate CAPS ... 10	dorzolamide hcl-timolol maleate .. 84	DRUG MART UNILET LANCETS 30G65
disulfiram 250 MG88	DOVATO 35	DRUG MART UNILET LANCETS 33G65
divalproex sodium CSDR 14	doxazosin mesylate26	DUETACT (pioglitazone hcl-glimepiride)16
divalproex sodium TB24 14	doxepin hcl (sleep)62	DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT12
divalproex sodium TBEC14	doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG16	DULERA 50 MCG/ACT-5 MCG/ACT .
docetaxel CONC 160 MG/8ML 32	doxepin hcl CAPS 150 MG 16	
	doxepin hcl CONC 16	
	doxycycline (monohydrate) CAPS 50	

12	EASY TOUCH LANCETS	ELEPSIA XR TB24	13
duloxetine hcl CPEP 20 MG, 30 MG, 40 MG	30G/TWIST	eletriptan hydrobromide	76
16	EASY TOUCH LANCETS 32G	ELEVIDYS 10.0-10.4 KG	82
duloxetine hcl CPEP 60 MG	EASY TOUCH LANCETS	ELEVIDYS 10.5-11.4 KG	82
DUPIXENT SOAJ	32G/TWIST	ELEVIDYS 11.5-12.4 KG	82
50	EASY TOUCH LANCETS	ELEVIDYS 12.5-13.4 KG	82
DUPIXENT SOSY 300 MG/2ML	33G/TWIST	ELEVIDYS 13.5-14.4 KG	82
50	EASY TOUCH SAFETY LANCETS	ELEVIDYS 14.5-15.4 KG	82
dutasteride	21G	ELEVIDYS 15.5-16.4 KG	82
58	EASY TOUCH SAFETY LANCETS	ELEVIDYS 16.5-17.4 KG	82
dutasteride-tamsulosin hcl	23G	ELEVIDYS 17.5-18.4 KG	82
58	EASY TOUCH SAFETY LANCETS	ELEVIDYS 18.5-19.4 KG	82
DYANAVAL XR TBCR	26G	ELEVIDYS 19.5-20.4 KG	82
1	EASY TOUCH SAFETY LANCETS	ELEVIDYS 20.5-21.4 KG	82
DYMISTA SUSP (azelastine hcl- fluticasone propionate)	28G	ELEVIDYS 21.5-22.4 KG	82
81	EBASE CONTROLLER KIT MISC	ELEVIDYS 22.5-23.4 KG	82
DYSPORT	EBGLYSS SOAJ	ELEVIDYS 23.5-24.4 KG	82
83	EBGLYSS SOSY	ELEVIDYS 24.5-25.4 KG	82
E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)	econazole nitrate CREA	ELEVIDYS 25.5-26.4 KG	82
63	ECOTRIN ARTHRTIS PAIN TBEC (aspirin)	ELEVIDYS 26.5-27.4 KG	82
EASIVENT MASK LARGE MISC	6	ELEVIDYS 27.5-28.4 KG	82
74	ECOTRIN TBEC (aspirin)	ELEVIDYS 28.5-29.4 KG	82
EASIVENT MASK MEDIUM MISC	EDURANT	ELEVIDYS 29.5-30.4 KG	82
74	EDURANT PED PO 2.5 MG	ELEVIDYS 30.5-31.4 KG	82
EASIVENT MASK SMALL MISC	efavirenz CAPS 200 MG	ELEVIDYS 31.5-32.4 KG	82
74	efavirenz CAPS 50 MG	ELEVIDYS 32.5-33.4 KG	82
EASIVENT MISC	efavirenz TABS	ELEVIDYS 33.5-34.4 KG	82
74	efavirenz-emtricitabine-tenofovir	ELEVIDYS 34.5-35.4 KG	82
EASY COMFORT ALCOHOL PADS	disoproxil fumarate	ELEVIDYS 35.5-36.4 KG	82
71	efavirenz-lamivudine-tenofovir	ELEVIDYS 36.5-37.4 KG	82
EASY COMFORT LANCETS	disoproxil fumarate		
65	ELAPRASE		
EASY COMFORT LANCETS TWIST	ELELYSO		
TOP			
65			
EASY TOUCH ALCOHOL PREP			
MEDIUM			
71			
EASY TOUCH LANCETS 21G			
65			
EASY TOUCH LANCETS 23G			
65			
EASY TOUCH LANCETS 26G			
65			
EASY TOUCH LANCETS 28G			
65			
EASY TOUCH LANCETS			
28G/TWIST			
65			
EASY TOUCH LANCETS 30G			
65			

ELEVIDYS 37.5-38.4 KG .....82	ELEVIDYS 67.5-68.4 KG .....83	EMGALITY (300 MG DOSE) SOSY 76
ELEVIDYS 38.5-39.4 KG .....82	ELEVIDYS 68.5-69.4 KG .....83	EMGALITY SOAJ .....76
ELEVIDYS 39.5-40.4 KG .....82	ELEVIDYS 69.5 KG PLUS .....83	EMGALITY SOSY .....76
ELEVIDYS 40.5-41.4 KG .....82	ELIDEL (pimecrolimus) .....50	EMPLICITI .....29
ELEVIDYS 41.5-42.4 KG .....82	ELIGARD KIT SC 7.5 MG .....30	emtricitabine CAPS .....35
ELEVIDYS 42.5-43.4 KG .....82	ELIGARD SC 22.5 MG, 30 MG, 45 MG .....30	emtricitabine-rilpivirine-tenofovir disoproxil fumarate .....35
ELEVIDYS 43.5-44.4 KG .....82	ELIQUIS DVT/PE STARTER PACK TBPK .....12	emtricitabine-tenofovir disoproxil fumarate .....35
ELEVIDYS 44.5-45.4 KG .....82	ELIQUIS TABS .....12	EMTRIVA CAPS (emtricitabine) ...35
ELEVIDYS 45.5-46.4 KG .....82	ELLA .....42	EMTRIVA SOLN .....35
ELEVIDYS 46.5-47.4 KG .....82	ELLENCE SOLN .....31	EMVERM CHEW .....9
ELEVIDYS 47.5-48.4 KG .....82	ELLUME COVID-19 HOME TEST KIT .....52	enalapril maleate & hydrochlorothiazide .....27
ELEVIDYS 48.5-49.4 KG .....82	ELMIRON CAPS .....58	enalapril maleate TABS .....26
ELEVIDYS 49.5-50.4 KG .....82	ELOCTATE .....59	ENBREL MINI SOCT .....5
ELEVIDYS 50.5-51.4 KG .....82	eltrombopag olamine PACK 12.5 MG .....60	ENBREL SOLN .....5
ELEVIDYS 51.5-52.4 KG .....82	eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG .....60	ENBREL SOSY .....5
ELEVIDYS 52.5-53.4 KG .....82	EMBECTA AUTOSHIELD DUO ...72	ENBREL SURECLICK SOAJ .....5
ELEVIDYS 53.5-54.4 KG .....82	EMBECTA PEN NEEDLE NANO .72	ENCARE SUPP 100 MG .....96
ELEVIDYS 54.5-55.4 KG .....82	EMBECTA PEN NEEDLE NANO 2 GEN .....72	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML .....80
ELEVIDYS 55.5-56.4 KG .....83	EMBECTA PEN NEEDLE ULTRAFINE .....72	ENGRIX-B SUSP 20 MCG/ML ...94
ELEVIDYS 56.5-57.4 KG .....83	EMBRACE LANCETS ULTRA THIN 30G .....65	ENGRIX-B SUSY .....94
ELEVIDYS 57.5-58.4 KG .....83	EMBRACE PRESSURE ACTIVATED 21G .....65	enoxaparin sodium SOLN IJ 300 MG/3ML .....13
ELEVIDYS 58.5-59.4 KG .....83	EMBRACE PRESSURE ACTIVATED 28G .....66	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....13
ELEVIDYS 59.5-60.4 KG .....83	EMCYT .....30	enoxaparin sodium SOSY 30 MG/0.3ML .....13
ELEVIDYS 60.5-61.4 KG .....83		enoxaparin sodium SOSY 40 MG/0.4ML, 60 MG/0.6ML .....13
ELEVIDYS 61.5-62.4 KG .....83		
ELEVIDYS 62.5-63.4 KG .....83		
ELEVIDYS 63.5-64.4 KG .....83		
ELEVIDYS 64.5-65.4 KG .....83		
ELEVIDYS 65.5-66.4 KG .....83		
ELEVIDYS 66.5-67.4 KG .....83		

enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML 13	EPZICOM (abacavir sulfate- lamivudine) .....35	erythromycin base CPEP .....63
ENTADFI .....58	EQ PROBIOTIC CAPS 20	erythromycin base TABS 63
ENTRESTO CPSP .....39	EQ PROBIOTIC CPDR .....20	erythromycin base TBEC 63
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan) 39	EQ SPACE CHAMBER ANTI- STATIC DEVI 74	erythromycin ethylsuccinate SUSR 63
ENTYVIO PEN SOAJ .....57	EQ SPACE CHAMBER ANTI- STATIC L DEVI 74	erythromycin ethylsuccinate TABS 63
ENVIVE CAPS .....20	EQ SPACE CHAMBER ANTI- STATIC M DEVI .....74	ERZOFRI 351 MG/2.25ML 33
EPCLUSA PACK .....37	EQ SPACE CHAMBER ANTI- STATIC S DEVI .....74	ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML .....33
EPCLUSA TABS .....37	EQL ALCOHOL SWABS .....71	escitalopram oxalate SOLN .....15
EPIFOAM FOAM .....48	EQL DAILY PROBIOTIC CAPS ... 20	escitalopram oxalate TABS .....15
epinastine hcl (ophth) 86	EQL DRY MOUTH ORAL RINSE SOLN .....79	esomeprazole magnesium CPDR .92
epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML .....97	EQL PROBIOTIC COLON SUPPORT CAPS 20	esomeprazole magnesium PACK . 92
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....97	ERBITUX 30	ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT 59
epinephrine (anaphylaxis) SOAJ .. 97	ergocalciferol CAPS .....97	estazolam 62
epinephrine hcl (nasal) .....82	ergoloid mesylates TABS .....89	estradiol & norethindrone acetate TABS .....56
EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis)) .....97	ergotamine w/ caffeine TABS .....76	estradiol PTTW 56
EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis)) .....97	eribulin mesylate 32	estradiol PTWK 56
EPIVIR SOLN (lamivudine) .....35	ERIVEDGE .....30	estradiol TABS .....56
EPIVIR TABS 150 MG (lamivudine) 35	ERLEADA 60 MG .....30	estradiol vaginal CREA 97
EPIVIR TABS 300 MG (lamivudine) 35	erlotinib hcl 30	estradiol vaginal TABS .....97
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....60	ertapenem sodium IJ .....27	estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG 56
epoprostenol sodium .....39	ERYPED 200 SUSR (erythromycin ethylsuccinate) .....63	ESTROVEN SLIMBIOTICS CAPS 20
EPRONTIA SOLN 25 MG/ML (topiramate) 13	erythromycin (acne aid) GEL 45	eszopiclone .....62
	erythromycin (acne aid) SOLN 45	ethambutol hcl TABS 28
	erythromycin (ophth) 85	ethosuximide CAPS .....14
	ERYTHROMYCIN .....85	ethosuximide SOLN .....14

ethynodiol diacet & eth estrad	41	EXONDYS 51	83	fenofibrate TABS 40 MG, 120 MG	25
etodolac CAPS	5	EYLEA SOLN	84	fenofibrate TABS 54 MG	25
etodolac TABS	5	EYSUVIS SUSP	85	fenofibric acid	25
etodolac TB24	5	ezetimibe	25	FENOGLIDE TABS (fenofibrate)	25
etonogestrel-ethinyl estradiol	42	ezetimibe-simvastatin	25	FENSOLVI (6 MONTH) SC	55
etoposide CAPS	32	EZ-LETS LANCETS 21G	66	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	6
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	32	EZ-LETS LANCETS 26G	66	fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	6
etravirine 100 MG	35	EZ-LETS LANCETS 28G	66	FERRETTS TABS	61
etravirine 200 MG	35	EZ-LETS LANCETS 30G	66	FERRIPROX SOLN	23
EUFLEXXA SOSY	81	FABRAZYME	55	ferrous fumarate TABS	61
EULEXIN	30	famciclovir	37	ferrous fumarate-fa-b complex-c-zn- mg-mn-cu TABS	61
EVENITY	54	famotidine TABS 10 MG	92	FERROUS GLUCONATE TABS 324 MG	61
everolimus (immunosuppressant)	78	famotidine TABS 20 MG, 40 MG	92	ferrous gluconate TABS	61
everolimus TABS	31	FANAPT TITRATION PACK C	33	ferrous sulfate dried TBCR	61
everolimus TBSO	31	FARXIGA (dapagliflozin propanediol)	18	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	61
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	91	FASENRA PEN SOAJ	10	ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	61
EVOMELA IV	28	FASENRA SOSY 10 MG/0.5ML	10	ferrous sulfate TABS 325 MG, 65 MG, 325 MG	61
EVOTAZ	35	FASTEP COVID-19 ANTIGEN TEST KIT	52	ferrous sulfate TBEC 325 MG	61
EVRYSDI	83	FEIBA	59	ferrous sulfate TBEC	61
EVRYSDI PO 5 MG	83	felbamate SUSP	14	fesoterodine fumarate	92
EXELON 13.3 MG/24HR (rivastigmine)	88	felbamate TABS	14	FEVERALL JUNIOR STRENGTH SUPP	6
EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)	88	felodipine	39	fexofenadine hcl SUSP	24
exemestane	30	FEM-DOPHILUS WOMENS CAPS 20		fexofenadine hcl TABS 180 MG	24
exenatide SOPN 10 MCG/0.04ML	17	fenofibrate CAPS	25	fexofenadine hcl TABS 60 MG	24
exenatide SOPN 5 MCG/0.02ML	17	fenofibrate micronized 134 MG, 200 MG	25		
EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide)	27	fenofibrate micronized 43 MG, 130 MG	25		
		fenofibrate micronized 67 MG	25		

FIBRICOR (fenofibric acid)	25	FLORRAXIS CAPS	20	FLUMIST QUADRIVALENT	94
FIBRYGA	59	FLOVENT DISKUS AEPB		flunisolide (nasal)	82
FIFTY50 ALCOHOL PREP	71	(fluticasone propionate (inhalation))		fluocinolone acetonide (otic)	86
FIFTY50 SAFETY SEAL LANCETS .		11		fluocinolone acetonide CREA	48
66		FLOWFLEX COVID-19 AG HOME		fluocinolone acetonide OIL	48
FIFTY50 UNILET LANCETS 33G .	66	TEST KIT	52	fluocinolone acetonide OINT	49
FILTER AIR PP MISC	74	FLUAD	94	fluocinolone acetonide SOLN	49
finasteride	58	FLUAD QUADRIVALENT	94	fluocinonide CREA 0.05 %	49
FINE 30	66	FLUARIX QUADRIVALENT SUSY	94	fluocinonide CREA 0.1 %	49
FINGERSTIX LANCETS	66	FLUARIX SUSY	94	fluocinonide emulsified base	49
fingolimod hcl	89	FLUBLOK QUADRIVALENT	94	fluocinonide GEL	49
FIRDAPSE	28	FLUBLOK SOSY	94	fluocinonide OINT	49
FIRMAGON (240 MG DOSE)	30	FLUCELVAX QUADRIVALENT		fluocinonide SOLN	49
FIRMAGON 80 MG	30	SUSP	94	fluorometholone (ophth) SUSP	85
FIRST-PROGESTERONE VGS		FLUCELVAX QUADRIVALENT		fluorouracil (topical) CREA 0.5 % .	46
SUPP	97	SUSY	94	fluorouracil (topical) CREA 5 % ...	46
flavoxate hcl	93	FLUCELVAX SUSP	94	fluorouracil (topical) SOLN	46
FLEBOGAMMA DIF SOLN	87	FLUCELVAX SUSY	94	fluoxetine hcl (pmdd) TABS 10 MG	
flecainide acetate	10	fluconazole SUSR	24	89	
FLEQSUVY SUSP (baclofen)	81	fluconazole TABS 100 MG	24	fluoxetine hcl (pmdd) TABS 20 MG	
FLEXICHAMBER DEVI	74	fluconazole TABS 150 MG	24	89	
FLORA VANCE CAPS	20	fluconazole TABS 200 MG	24	fluoxetine hcl CAPS	15
FLORAJEN DIGESTION CAPS ...	20	fluconazole TABS 50 MG	24	fluoxetine hcl CPDR	15
FLORAJEN KIDS CAPS	20	fludarabine phosphate SOLN	29	fluoxetine hcl SOLN	15
FLORASAVE CPDR	20	FLUDARABINE PHOSPHATE SOLN		FLUOXETINE HCL TABS (fluoxetine	
FLORASTOR ADVANCED CAPS .	20	.....	29	hcl)	15
FLORASTOR DIGEST DE-STRESS		fludarabine phosphate SOLR	29	fluoxetine hcl TABS 10 MG	15
CAPS	20	fludrocortisone acetate TABS	44	fluoxetine hcl TABS 20 MG	15
FLORASTOR SELECT GUT BOOST		FLULAVAL QUADRIVALENT SUSY .		fluoxetine hcl TABS 60 MG	15
CAPS	20	94		fluphenazine decanoate	34
FLORASTOR SELECT IMMUNITY		FLULAVAL SUSY	94	fluphenazine hcl TABS	34
BOOS CAPS	20	FLUMIST	94		

flurandrenolide CREA	49	FLUZONE SUSP	95	fosinopril sodium	26
flurandrenolide LOTN	49	FLUZONE SUSY	95	FRAGMIN SOLN 10000 UNIT/4ML 13	
flurandrenolide OINT	49	FLYP HYPERSONIQ CARTRIDGE MISC	74	FREESTYLE LANCETS	66
flurazepam hcl	62	FOCALIN XR CP24 (dexmethylphenidate hcl)	2	FREESTYLE LIBRE 14 DAY READER	66
flurbiprofen sodium	86	folic acid TABS 1 MG	60	FREESTYLE LIBRE 14 DAY SENSOR	66
flurbiprofen TABS	5	folic acid TABS 400 MCG, 800 MCG . 60		FREESTYLE LIBRE 2 PLUS SENSOR	66
fluticasone propionate (inhalation) AEPB	11	FOLOTYN	29	FREESTYLE LIBRE 2 PLUS SENSOR	66
fluticasone propionate (nasal) SUSP . 82		fondaparinux sodium	13	FREESTYLE LIBRE 2 READER ..	66
fluticasone propionate CREA 0.05 % 49		FORA LANCETS	66	FREESTYLE LIBRE 2 SENSOR ..	66
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	11	FORFIVO XL TB24 (bupropion hcl) 15		FREESTYLE LIBRE 3 PLUS SENSOR	66
fluticasone propionate hfa 44 MCG/ACT	11	FORTESTA GEL TD (testosterone) 8		FREESTYLE LIBRE 3 READER ..	66
fluticasone propionate LOTN	49	FORTIFY 30 BILLION PROBIOT 50+ CPDR	20	FREESTYLE LIBRE 3 SENSOR ..	66
fluticasone propionate OINT	49	FORTIFY 50 BILLION PROBIOT 50+ CPDR	20	FREESTYLE LIBRE READER	66
fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	12	FORTIFY DAILY PROBIOTIC CAPS . 20		FREESTYLE UNISTICK II LANCETS	66
fluticasone-salmeterol AERO	12	FORTIFY DAILY PROBIOTIC EX ST CPDR	20	frovatriptan succinate	76
fluvastatin sodium CAPS	25	FORTIFY OPTIMA PROBIOTIC CPDR	20	FT ACIDOPHILUS PROBIOTIC BLEND CAPS	21
fluvastatin sodium TB24	25	FORTIFY OPTIMA WOMENS ADV CARE CPDR	20	FT GLUCOSE CHEW 4 GM	17
fluvoxamine maleate CP24	15	FORTIFY PROBIOTIC WOMENS CPDR	21	FT PROBIOTIC ADVANCED CAPS 21	
fluvoxamine maleate TABS	15	FORTIFY PROBIOTIC WOMENS EX ST CPDR	21	FT SALINE NASAL SPRAY SOLN 81	
FLUZONE HIGH-DOSE QUADRIVALENT	94	fosamprenavir calcium TABS	35	FULL KIT NEBULIZER SET MISC 74	
FLUZONE HIGH-DOSE SUSY	94	fosinopril sodium & hydrochlorothiazide	27	FULPHILA	60
FLUZONE QUADRIVALENT SUSP 94				furosemide SOLN PO 8 MG/ML, 10 MG/ML	53
FLUZONE QUADRIVALENT SUSY 95				furosemide TABS	53
				FYLNETRA	60
				gabapentin CAPS 100 MG	13

gabapentin CAPS 300 MG, 400 MG . 13	GEMTESA .....93	28G .....66
gabapentin SOLN .....13	GENABIO COVID-19 RAPID TEST KIT .....52	GLOBAL INJECT EASE LANCETS 30G .....66
gabapentin TABS 600 MG, 800 MG 13	GENORAVANCE CAPS .....21	GLUCAGON EMERGENCY SOLR IJ 1 MG (glucagon) .....17
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML ...81	GENOTROPIN CART SC .....54	glucagon SOLR IJ 1 MG .....17
GALAFOLD .....55	GENOTROPIN MINIQUICK PRSY 54	GLUCO TO GO CHEW .....17
galantamine hydrobromide CP24 .88	gentamicin sulfate (ophth) SOLN ..85	GLUCOCOM LANCETS 28G .....66
galantamine hydrobromide SOLN .88	gentamicin sulfate (topical) CREA .45	GLUCOCOM LANCETS 30G .....66
galantamine hydrobromide TABS .88	gentamicin sulfate (topical) OINT ..46	GLUCOCOM LANCETS 33G .....66
GAMASTAN IM .....87	GENTEEL BUTTERFLY TOUCH LANCET .....66	GLUCOSE CHEW .....17
GAMIFANT 10 MG/2ML, 50 MG/10ML .....78	GENTLE-LET GP LANCETS .....66	GLUMETZA TB24 (metformin hcl) .17
GAMMAGARD .....87	GENTLE-LET LANCETS .....66	glyburide micronized 1.5 MG, 3 MG, 6 MG .....19
GAMMAGARD S/D LESS IGA SOLR.....87	GENVISC 850 SOSY .....81	glyburide TABS .....19
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....87	GENVOYA .....35	glyburide-metformin .....16
GAMMAPLEX SOLN .....87	GILENYA (fingolimod hcl) .....89	glycerin (laxative) SUPP 2 GM ....62
GAMUNEX-C .....87	GILENYA .....89	glycerol phenylbutyrate 1.1 GM/ML 55
GARDASIL 9 SUSP 0.5 ML .....95	GILOTRIF .....30	glycine diluent .....88
GARDASIL 9 SUSY 0.5 ML .....95	ginger (zingiber officinalis) CAPS 250 MG .....2	glycopyrrolate TABS 1 MG, 2 MG .91
gatifloxacin (ophth) .....85	GLASSIA SOLN .....90	GLYXAMBI .....16
GATTEX .....58	glatiramer acetate SOSY .....89	GNP ACIDOPHILUS HIGH POTENCY CAPS .....21
GAUZE SPONGES .....66	glimepiride 1 MG, 2 MG .....19	GNP ADVANCED PROBIOTIC CAPS .....21
GAZYVA .....29	glimepiride 3 MG .....19	GNP ALCOHOL SWABS .....71
gefitinib .....30	glimepiride 4 MG .....19	GNP GLUCOSE CHEW .....17
GEL-ONE .....81	glipizide TABS 2.5 MG .....19	GNP PROBIOTIC COLON SUPPORT CAPS .....21
GELSYN-3 SOSY .....81	glipizide TABS 5 MG, 10 MG .....19	GNP PROBIOTIC EXTRA STRENGTH CAPS .....23
gemfibrozil TABS25	glipizide TB2419	GNP STERILE LANCETS 28G ...66
	glipizide-metformin hcl16	
	GLOBAL ALCOHOL PREP EASE 71	
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GNP STERILE LANCETS 30G ... 66	FLOW 67	HERCEPTIN HYLECTA 31
GNP STERILE LANCETS 33G ... 66	halcinonide CREA 49	HIBERIX SOLR IJ 93
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GOODSENSE ALCOHOL SWABS 71	halobetasol propionate OINT 49	HIZENTRA SOLN 87
GOTOKNOW COVID-19 ANTIGEN RAPI KIT 52	HALOG CREA (halcinonide) 49	HIZENTRA SOSY 10 GM/50ML ... 87
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GRANIX SOLN 300 MCG/ML 60	haloperidol lactate CONC 34	HULIO (2 PEN) AJKT 4
GRANIX SOSY 60	haloperidol lactate SOLN 34	HULIO (2 SYRINGE) PSKT 4
griseofulvin microsize SUSP 24	haloperidol TABS 34	HUMALOG JUNIOR KWIKPEN SOPN 18
griseofulvin microsize TABS 24	HARVONI PACK 37	HUMALOG KWIKPEN SOPN 100 UNIT/ML 18
griseofulvin ultramicrosize 24	HARVONI TABS 37	HUMALOG MIX 50/50 KWIKPEN SUPN 18
guaifenesin-codeine SOLN 44	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML 95	HUMALOG MIX 50/50 SUSP 18
guaifenesin-codeine SYRP 44	H-E-B INCONTROL ALCOHOL .. 71	HUMALOG MIX 75/25 KWIKPEN SUPN 18
guanfacine hcl (adhd) 2	H-E-B INCONTROL LANCETS 28G . 67	HUMALOG MIX 75/25 SUSP 18
guanfacine hcl 26	H-E-B INCONTROL LANCETS 30G . 67	HUMALOG SOLN IJ 18
GVOKE KIT SOLN 17	H-E-B INCONTROL LANCETS 33G . 67	HUMALOG TEMPO PEN SOPN .. 18
GYNAZOLE-1 96	HEMATINIC PLUS VIT/MINERALS TABS 61	HUMATE-P SOLR 59
HADLIMA PUSHTOUCH SOAJ 4	HEMGENIX 59	HUMIRA (2 PEN) AJKT 40 MG/0.8ML 4
HADLIMA SOSY 4	HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML 59	HUMIRA (2 PEN) AJKT 4
HAEMOLANCE 66	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT 59	HUMIRA (2 SYRINGE) PSKT 4
HAEMOLANCE LOW FLOW LANCETS 66	HEPAGAM B SOLN IJ 87	HUMIRA-CD/UC/HS STARTER AJKT 40 MG/0.8ML 4
HAEMOLANCE PLUS 66	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 13	HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML 4
HAEMOLANCE PLUS HIGH FLOW . 66	HEPLISAV-B SOSY 95	HUMIRA-PED<40KG CROHNS STARTER PSKT 4
HAEMOLANCE PLUS LOW FLOW . 66		HUMIRA-PED>=40KG CROHNS
HAEMOLANCE PLUS MAX FLOW 66		
HAEMOLANCE PLUS PEDIATRIC		

START PSKT	4	hydrocortisone (intrarectal)	8	hydrocortisone valerate CREA	49
HUMIRA-PED>=40KG UC		hydrocortisone (rectal) EX 1 %	9	hydrocortisone valerate OINT	49
STARTER AJKT	4	hydrocortisone (rectal) EX 2.5 % ...	9	hydrocortisone w/acetic acid	86
HUMIRA-PS/UV/ADOL HS		hydrocortisone (topical) CREA 0.5 %		HYDROMORPHONE HCL SUPP ...	6
STARTER AJKT	4	49		hydromorphone hcl TABS	6
HUMIRA-PSORIASIS/UVEIT		hydrocortisone (topical) CREA 1 %		hydromorphone hcl TB24	6
STARTER AJKT	4	49		HYDROXATE GEL	49
HUMULIN 70/30 SUSP	18	hydrocortisone (topical) CREA 2.5 %		HYDROXYM GEL	49
HUMULIN N SUSP	18	49		hydroxyprogesterone caproate	
HUMULIN R SOLN IJ	18	hydrocortisone (topical) LOTN 1 %		(antineoplastic)	30
HUMULIN R U-500		49		hydroxyurea	32
(CONCENTRATED) SOLN SC	18	hydrocortisone (topical) LOTN 2.5 % .		hydroxyzine hcl SOLN 25 MG/ML, 50	
HUMULIN R U-500 KWIKPEN SOPN		49		MG/ML	10
SC	18	hydrocortisone (topical) OINT 0.5 % .		hydroxyzine hcl SYRP	10
HYALGAN SOLN	81	49		hydroxyzine hcl TABS	10
HYALGAN SOSY	81	hydrocortisone (topical) OINT 1 %	49	hydroxyzine pamoate CAPS 25 MG,	
HYCAMPIN CAPS	32	hydrocortisone (topical) OINT 2.5 % .		100 MG	10
hydralazine hcl TABS	27	49		hydroxyzine pamoate CAPS 50 MG	
hydrochlorothiazide CAPS	54	hydrocortisone (topical) SOLN 1 %		10	
hydrochlorothiazide TABS 25 MG, 50		49		HYMOVIS	81
MG	54	hydrocortisone acetate (topical)		hyoscyamine sulfate ELIX	91
hydrocodone bitartrate CP12	6	CREA	49	hyoscyamine sulfate SOLN PO 0.125	
hydrocodone bitartrate-homatropine		hydrocortisone acetate (topical) OINT		MG/ML	91
methylobromide SOLN	44	.....	49	hyoscyamine sulfate SUBL 0.125 MG	
hydrocodone-acetaminophen SOLN		HYDROCORTISONE ACETATE		.....	91
108 MG/5ML-2.5 MG/5ML, 217		CREA	49	hyoscyamine sulfate TABS 0.125 MG	
MG/10ML-5 MG/10ML, 325		hydrocortisone butyrate CREA	49	.....	91
MG/15ML-7.5 MG/15ML	7	hydrocortisone butyrate hydrophilic		hyoscyamine sulfate TB12 0.375 MG	
hydrocodone-acetaminophen TABS		lipo base	49	91	
325 MG-10 MG	7	hydrocortisone butyrate LOTN	49	hyoscyamine sulfate TBDP 0.125 MG	
hydrocodone-acetaminophen TABS		hydrocortisone butyrate OINT	49	.....	91
325 MG-5 MG	7	hydrocortisone butyrate SOLN	49	HYPERHEP B SOLN IM	87
hydrocodone-acetaminophen TABS		hydrocortisone TABS	43	HYPERHEP B SOSY	87
325 MG-7.5 MG	7	hydrocortisone vaginal	96		

INSULIN LISPRO JUNIOR KWIKPEN SOPN .....18	isoniazid SYRP .....28	JARRO-DOPHILUS HYPOALLERGENIC CAPS .....21
INSULIN LISPRO PROT & LISPRO SUPN .....18	isoniazid TABS .....28	JARRO-DOPHILUS PROBIOT+PRE+FOS CAPS .....21
INSULIN LISPRO SOLN IJ .....18	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG .....9	JARRO-DOPHILUS VAGINAL PROBIOT CPDR .....21
INSULIN SYRINGES .....72	isosorbide mononitrate TABS .....9	JENTADUETO TABS .....16
INTELENCE (etravirine) .....35	ISOSORBIDE MONONITRATE TABS .....9	JEVTANA .....32
INTELENCE .....35	isosorbide mononitrate TB24 .....9	JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT .....59
INTELENCE 200 MG (etravirine) ..35	isotretinoin 10 MG, 20 MG, 40 MG 45	JOURNAVX .....6
INTELISWAB COVID-19 RAPID TEST KIT .....53	isradipine CAPS .....39	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG .....25
INVEGA HAFYERA .....33	ISTALOL SOLN (timolol maleate (ophth)) .....84	JYNNEOS .....95
INVEGA SUSTENNA .....33	ITCH RELIEF CREA .....46	KADCYLA .....29
INVEGA TRINZA .....33	itraconazole CAPS .....24	KALBITOR .....59
INVOKANA .....18	itraconazole SOLN .....24	KALETRA SOLN .....36
IPOL IJ .....95	ivermectin (pediculicide) .....51	KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir) .....36
ipratropium bromide (nasal) 0.03 % 81	ivermectin .....9	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir) .....36
ipratropium bromide (nasal) 0.06 % 81	IXCHIQ .....95	KALYDECO PACK 50 MG, 75 MG 90
ipratropium bromide SOLN 0.02 % 11	IXEMPRA KIT .....32	KALYDECO TABS .....90
ipratropium-albuterol SOLN .....12	IXIARO .....95	KANJINTI 420 MG .....29
irbesartan .....26	IXINITY SOLR .....59	KANUMA .....55
irbesartan-hydrochlorothiazide ....27	IYUZEH SOLN .....86	KAZANO (alogliptin-metformin hcl) 16
irinotecan hcl .....32	JAKAFI.....31	KCENTRA .....59
IRON CHEWS PEDIATRIC CHEW 61	JALYN (dutasteride-tamsulosin hcl) . 58	KEMOPLAT SOLN .....28
IRON TABS 28 MG .....61	JANUMET TABS .....16	KENALOG AERS (triamcinolone acetonide (topical)) .....49
ISENTRESS CHEW 100 MG .....35	JANUMET XR TB24 .....16	KESIMPTA .....89
ISENTRESS CHEW 25 MG .....35	JANUVIA .....17	ketoconazole (topical) CREA .....46
ISENTRESS PACK .....35	JARDIANCE .....18	
ISENTRESS TABS .....35	JARRO-DOPHILUS EPS CPDR ..21	
	JARRO-DOPHILUS EPS PROBIOTIC CPDR .....21	

ketoconazole (topical) SHAM 2 %	.46	KROGER LANCETS	67	lamotrigine TB24	13
KETONE TEST STRP	53	KROGER LANCETS SUPER THIN	67	lamotrigine TBDP	13
ketoprofen CAPS 50 MG	5	KROGER LANCETS THIN	67	LANCETS	67
ketoprofen CP24	5	KRYSTEXXA	58	LANCETS 28G THIN	67
ketorolac tromethamine (ophth) 0.4 %	86	KYLEENA	43	LANCETS 30G	67
ketorolac tromethamine (ophth) 0.5 %	86	KYMRIAH	30	LANCETS 33G	67
ketorolac tromethamine TABS	5	KYPROLIS	31	LANCETS MICRO THIN 33G	67
KETOSTIX STRP	53	labetalol hcl TABS 100 MG	38	LANCETS SUPER THIN	67
ketotifen fumarate (ophth) 0.035 %	86	labetalol hcl TABS 200 MG	38	LANCETS SUPER THIN 28G	67
KEY-E CHEW	97	labetalol hcl TABS 300 MG	38	LANCETS THIN	67
KEYTRUDA	29	labetalol hcl TABS 400 MG	38	LANCETS ULTRA THIN	67
KHAPZORY 175 MG	32	LACTEROL CAPS	21	LANCETS ULTRA THIN 30G	67
KINNEY LANCETS	67	lactic acid (ammonium lactate) CREA	50	lanolin (topical) CREA	51
KINNEY THIN LANCETS	67	lactic acid (ammonium lactate) LOTN	50	LANOLIN XX	88
KINRIX SUSY	91	12 %	50	LANOLOR CREA	51
KITABIS PAK (W/ NEBULIZER)		LACTOVIVE CAPS	21	LANOXIN TABS 125 MCG, 250 MCG (digoxin)	39
NEBU 300 MG/5ML (tobramycin)	3	lactulose (encephalopathy)	57	lanreotide acetate	56
KLOXXADO LIQD	23	lactulose SOLN	62	LANREOTIDE ACETATE	56
KOATE SOLR	59	LAGEVRIO	37	lansoprazole CPDR	92
KOATE-DVI SOLR 500 UNIT, 1000 UNIT	59	LAMICTAL ODT KIT (lamotrigine)	13	lansoprazole TBDD	92
KOGENATE FS KIT	59	LAMICTAL STARTER KIT 25 MG (lamotrigine)	13	lanthanum carbonate CHEW	58
KOMBIGLYZE XR (saxagliptin-metformin hcl)	16	lamivudine SOLN	36	lapatinib ditosylate	31
KONVOMEK SUSR	92	lamivudine TABS 150 MG	36	LEDIPASVIR-SOFOSBUVIR TABS	37
KOVALTRY	59	lamivudine TABS 300 MG	36	leflunomide	5
KRINTAFEL	28	lamivudine-zidovudine	36	lenalidomide	77
KROGER HEALTHPRO LANCET		lamotrigine CHEW	13	LENVIMA (10 MG DAILY DOSE)	29
26G	67	lamotrigine KIT 25 MG	13	LENVIMA (12 MG DAILY DOSE)	29
		lamotrigine TABS	13	LENVIMA (14 MG DAILY DOSE)	29
				LENVIMA (18 MG DAILY DOSE)	29

LENVIMA (20 MG DAILY DOSE) .29	levocarnitine (metabolic modifiers) TABS .....55	LIDOCAINE CREA .....51
LENVIMA (24 MG DAILY DOSE) .29	levocetirizine dihydrochloride SOLN 24	lidocaine hcl (mouth-throat) 2 % ...78
LENVIMA (4 MG DAILY DOSE) ..29	levofloxacin (ophth) 0.5 %85	lidocaine hcl CREA 3 %51
LENVIMA (8 MG DAILY DOSE) ..29	levofloxacin SOLN PO .....56	lidocaine hcl CREA 4 %51
LEQVIO .....26	levofloxacin TABS .....56	lidocaine hcl GEL 2 %51
LESCOL XL TB24 (fluvastatin sodium) .....25	levoleucovorin calcium SOLN .....32	lidocaine hcl PRSY .....51
LETAIRIS (ambrisentan) .....40	levoleucovorin calcium SOLR .....32	LIDOCAINE HCL
letrozole .....30	levonorgestrel & eth estradiol TABS 41	URETHRAL/MUCOSAL GEL 2 % .51
leucovorin calcium TABS 5 MG, 25 MG .....32	levonorgestrel (emergency oc) 1.5 MG .....42	lidocaine-prilocaine CREA .....51
LEUKERAN .....28	levonorgestrel-eth estradiol (triphasic) .....41	LILETTA (52 MG) .....43
LEUKINE SOLR IJ .....60	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG .....41	LINZESS .....57
leuprolide acetate (3 month) INJ 22.5 MG .....30	levonorgestrel-ethinyl estradiol (continuous) .....41	LIORESAL SOLN IT .....81
leuprolide acetate KIT IJ 1 MG/0.2ML .....30	levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG .....91	liothyronine sodium TABS .....91
LEUPROLIDE ACETATE-BUPIVACAINE .....30	levothyroxine sodium TABS .....91	LIPOFEN CAPS (fenofibrate) .....25
levalbuterol hcl .....12	LEVULAN KERASTICK SOLR ....46	LIQREV SUSP .....40
levalbuterol hcl 1.25 MG/0.5ML ....12	LEXIVA SUSP .....36	liraglutide (weight management) 18 MG/3ML .....1
levalbuterol tartrate .....12	LEXIVA TABS (fosamprenavir calcium) .....36	liraglutide .....17
levamlodipine maleate .....39	LIALDA TBEC (mesalamine) .....57	lisdexamphetamine dimesylate CAPS 1
LEVEMIR FLEXPEN SOPN .....18	LIBERTY MEDICAL LANCETS ...67	lisdexamphetamine dimesylate CHEW .1
LEVEMIR SOLN .....18	LIBERVANT FILM .....13	lisinopril & hydrochlorothiazide ....27
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML .....13	LIBTAYO .....29	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG .....26
levetiracetam TABS .....14	LICEMD GEL .....51	LITE TOUCH LANCETS .....67
levetiracetam TB24 .....14	lidocaine CREA 4 %51	LITETOUCH LANCETS .....67
levobunolol hcl 0.5 %84		LITETOUCH MASK LARGE MISC 74
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML .....55		LITETOUCH MASK MEDIUM MISC .74
		LITETOUCH MASK SMALL MISC .74
		LITFULO .....50
		lithium .....33

lithium carbonate CAPS 33	LORBRENA 31	LUZU (luliconazole) 46
lithium carbonate TABS 33	LOREEV XR CS24 10	LYBALVI 89
lithium carbonate TBCR 33	losartan potassium & hydrochlorothiazide 27	LYFGENIA 60
LITHOBID TBCR (lithium carbonate) . 33	losartan potassium 26	LYRA DIRECT SARS-COV-2 ASSAY 53
LITTLE REMEDIES SALINE SOLN 81	LOTRONEX (alosetron hcl) 57	LYRA SARS-COV-2 ASSAY 53
LIVE BETTER LANCET SUPER THIN 67	lovastatin TABS 10 MG, 20 MG ... 25	LYSODREN 30
LO LOESTRIN FE TABS 41	lovastatin TABS 40 MG 25	LYUMJEV TEMPO PEN SOPN ... 18
LOCOID LIPOCREAM 49	loxapine succinate 34	LYVISPAH PACK 81
LOCOID LOTN (hydrocortisone butyrate) 49	LUCENTIS SOSY 84	MACI 80
LOKELMA 78	LUCIRA CHECK IT COVID-19 TEST KIT 53	MAGE CPDR 21
LONSURF 31	LUCIRA COVID-19 ALL-IN-ONE KIT 53	magnesium citrate 1.745 GM/30ML 62
loperamide hcl CAPS 23	luliconazole 46	magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML 62
loperamide hcl TABS 23	LUMIVA CAPS 21	magnesium oxide (mg supplement) TABS 77
lopinavir-ritonavir SOLN 36	LUMIZYME 55	magnesium oxide TABS 400 MG ... 9
lopinavir-ritonavir TABS 25 MG-100 MG 36	LUMOXITI 29	malathion 51
lopinavir-ritonavir TABS 50 MG-200 MG 36	LUPRON DEPOT (1-MONTH) KIT IM 30	maraviroc TABS 150 MG 36
LOPRESSOR SOLN PO 10 MG/ML . 38	LUPRON DEPOT (3-MONTH) KIT IM 30	maraviroc TABS 300 MG 36
loratadine CAPS 24	LUPRON DEPOT (4-MONTH) IM . 30	MATULANE 32
loratadine CHEW 25	LUPRON DEPOT (6-MONTH) IM . 30	MAVYRET PACK 37
loratadine SOLN 25	LUPRON DEPOT-PED (1-MONTH) . 55	MAVYRET TABS 37
loratadine TABS 25	LUPRON DEPOT-PED (3-MONTH) . 55	MAXI-TUSS PE LIQD 44
loratadine TBDP 10 MG 25	LUPRON DEPOT-PED (6-MONTH) IM 55	MAYZENT STARTER PACK TBPK 0.25 MG 89
lorazepam CONC 10	lurasidone hcl 33	MAYZENT TABS 89
lorazepam TABS 0.5 MG, 2 MG ... 10	LUTATHERA 31	meclizine hcl CHEW 24
lorazepam TABS 1 MG 10	LUTRATE DEPOT INJ 22.5 MG ... 30	meclizine hcl TABS 12.5 MG, 25 MG 24

MEDICHOICE SAFETY LANCET .67	MEIJER LANCETS UNIVERSAL 33G	CAPS .....21
MEDICHOICE SAFETY LANCET	67	METAMUCIL CAPS .....62
EXTRA .....67	MEKINIST TABS .....31	metaxalone .....81
MEDICHOICE SAFETY LANCET	MEKTOVI .....31	METAXALONE 640 MG .....81
NORM .....67	melatonin TABS 3 MG, 5 MG .....2	metformin hcl SOLN .....17
MEDLANCE EXTRA 21G .....67	meloxicam TABS .....5	metformin hcl TABS 500 MG, 850
MEDLANCE LITE 25G .....67	melphalan .....28	MG, 1000 MG .....17
MEDLANCE PLUS EXTRA 21G ..67	melphalan hcl IV .....28	metformin hcl TABS 625 MG .....17
MEDLANCE PLUS LANCETS ....67	memantine hcl CP24 .....88	metformin hcl TABS 750 MG .....17
MEDLANCE PLUS LITE 25G .....67	memantine hcl SOLN .....88	metformin hcl TB24 500 MG, 1000
MEDLANCE PLUS SPECIAL 0.8MM	memantine hcl TABS .....88	MG .....17
.....67	MENACTRA .....93	metformin hcl TB24 500 MG, 750 MG
MEDLANCE PLUS SUPERLITE 30G	MENQUADFI 0.5 ML .....93	17
.....67	MENVEO SOLN .....93	methadone hcl TABS 10 MG .....7
MEDLANCE PLUS UNIVERSAL 21G	MENVEO SOLR .....93	methadone hcl TABS 5 MG .....6
.....67	meperidine hcl SOLN PO 50	methamphetamine hcl .....1
MEDLANCE UNIVERSAL 21G ...67	MG/5ML .....6	methazolamide TABS .....53
medroxyprogesterone acetate	meperidine hcl TABS 50 MG .....6	methenamine mandelate .....28
(contraceptive) SUSP IM .....43	meprobamate .....10	methenamine-hyosc-methylene blue-
medroxyprogesterone acetate	mercaptopurine SUSP 2000	sod phos-phenyl sal TABS 81.6 MG .
(contraceptive) SUSY IM .....43	MG/100ML .....29	27
medroxyprogesterone acetate 2.5	mercaptopurine TABS .....29	methimazole TABS .....90
MG, 5 MG, 10 MG .....88	mesalamine ENEM .....57	methocarbamol TABS 500 MG ....81
mefloquine hcl .....28	mesalamine SUPP .....57	methocarbamol TABS 750 MG, 1000
MEGA PROBIOTIC CAPS .....21	mesalamine TBEC 1.2 GM .....57	MG .....81
megestrol acetate SUSP .....30	mesalamine TBEC 800 MG .....57	methotrexate sodium SOLN 1
megestrol acetate TABS .....30	mesalamine w/ cleanser .....57	GM/40ML, 50 MG/2ML, 250
MEIJER ALCOHOL SWABS .....71	mesna SOLN .....32	MG/10ML, 1000 MG/40ML .....29
MEIJER LANCETS .....67	mesna TABS .....32	methotrexate sodium TABS 2.5 MG
MEIJER LANCETS UNIVERSAL 21G	MESNEX TABS .....32	29
.....67	META BIOTIC/BIO-ACTIVE 12	methsuximide .....14
MEIJER LANCETS UNIVERSAL 30G		methyldopa TABS .....26
.....67		methylergonovine maleate TABS ..87

METHYLIN SOLN (methylphenidate hcl)	2	metoprolol tartrate TABS 25 MG, 50 MG	38	MIEBO	86
methylphenidate hcl CHEW	2	metoprolol tartrate TABS 37.5 MG, 75 MG	38	mifepristone (hyperglycemia)	17
methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG	2	metronidazole (topical) CREA	51	miglitol	16
methylphenidate hcl CP24 60 MG ..	2	metronidazole (topical) GEL 0.75 % 51		miglustat	60
methylphenidate hcl CP24	2	metronidazole (topical) LOTN	51	MINIELITE FILTER REPLACEMENTS MISC	74
methylphenidate hcl CPRC	2	metronidazole TABS 250 MG, 500 MG	27	minocycline hcl CAPS	90
methylphenidate hcl SOLN	2	metronidazole vaginal	96	minoxidil 2.5 MG, 10 MG	27
methylphenidate hcl TABS	2	metirosine	26	mirabegron TB24	93
methylphenidate hcl TB24	2	MICONAZOLE 7 SUPP 100 MG ..	96	MIRCERA	60
methylphenidate hcl TBCR 10 MG, 20 MG	2	miconazole nitrate (topical) CREA .46		MIRENA (52 MG)	43
methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG	2	miconazole nitrate vaginal CREA 2 %	96	mirtazapine TABS	15
methylphenidate hcl TBCR 45 MG, 63 MG	2	miconazole nitrate vaginal KIT	96	mirtazapine TBDP	15
methylprednisolone TABS 4 MG, 8 MG	43	miconazole nitrate vaginal SUPP 100 MG	96	misoprostol	92
methylprednisolone TBPk	43	miconazole nitrate vaginal SUPP 200 MG	96	mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML	31
methyltestosterone TABS	8	MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	87	MIUDELLA INTRAUTERINE COPPER	42
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	57	MICROBALANCE CAPS	21	MM TWIST LANCETS	67
metoclopramide hcl TABS 10 MG .57		MICROCHAMBER DEVI	74	M-M-R II SOLR	95
metoclopramide hcl TABS 5 MG ..	57	MICROCHAMBER MISC	74	MNEXSPIKE SUSY 10 MCG/0.2ML .95	
metolazone	54	MICROFLOR 33 CAPS	21	MOBILE LANCETS 30G	68
metoprolol & hydrochlorothiazide TABS	27	MICROFLOR CAPS	21	MODERNA COVID-19 BIVALENT 95	
metoprolol succinate TB24 200 MG 38		MICROLET LANCETS	67	MODERNA COVID-19 VAC 6M-11Y SUSP	95
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	38	MICROSPACER MISC	74	MODERNA COVID-19 VAC 6M-11Y SUSY	95
metoprolol tartrate TABS 100 MG .38		midazolam hcl SOLN IJ	62	MODERNA COVID-19 VACCINE SUSP	95
		MIDAZOLAM HCL SOLN IJ	62	moexipril hcl	26
		midodrine hcl	97	MOI-STIR SOLN	79

mometasone furoate (nasal) SUSP 82	(ibuprofen) .....5	SOLN .....79
mometasone furoate CREA .....49	MOUNJARO .....17	MVW COMPLETE PROBIOTIC CPDR .....21
mometasone furoate OINT .....49	MOUTH KOTE REMINT SOLN ....79	MYALEPT .....55
mometasone furoate SOLN .....50	MOUTH KOTE SOLN .....79	mycophenolate mofetil CAPS .....78
MOMMY'S BLISS PROBIOTIC PACK.....21	MOVANTIK .....57	mycophenolate mofetil hcl .....78
MONISTAT 3 CREA .....96	moxifloxacin hcl (ophth) SOLN OP 85	mycophenolate mofetil SUSR .....78
MONISTAT CARE INSTANT ITCH RLF 1 %96	moxifloxacin hcl TABS .....56	mycophenolate mofetil TABS .....78
MONOLET LANCETS .....68	MPD SAFETY LANCET 21G .....68	mycophenolate sodium .....78
MONOLET OPD LANCETS .....68	MPD SAFETY LANCET 23G .....68	MYDAYIS CP24 (amphetamine- dextroamphetamine) .....1
MONOLETTOR SAFETY LANCETS 68	MPD SAFETY LANCET 28G .....68	MYFEMBREE .....56
MONOVISC .....81	MPD SAFETY LANCET 30G .....68	MYGLUCOHEALTH LANCETS 30G 68
montelukast sodium CHEW .....11	MULPLETA .....60	MYLERAN TABS .....28
montelukast sodium PACK .....11	MULTIPLE VITAMINS TABS- ASSORTED BRAND .....79	MYOBLOC .....83
montelukast sodium TABS .....11	MULTIPLE VITAMINS TABS- ASSORTED GENERIC .....79	MYRBETRIQ TB24 (mirabegron) .93
morphine sulfate beads .....7	multiple vitamins w/ iron TABS ....79	NABI-HB SOLN IM .....87
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG .....7	MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED BRAND .....79	nabumetone .....5
morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML .....7	MULTIPLE VITAMINS W/ MINERALS TABS-ASSORTED GENERIC .....79	nadolol TABS 20 MG, 40 MG, 80 MG.....38
morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML .....7	MULTIVITAMIN DROPS/IRON SOLN.....80	NAGLAZYME .....55
morphine sulfate SUPP .....7	MULTIVITAMIN INFANT & TODDLER SOLN .....80	naloxone hcl LIQD .....23
morphine sulfate TABS .....7	mupirocin calcium (topical) .....46	naloxone hcl SOCT .....23
morphine sulfate TBCR .....7	mupirocin OINT .....46	naloxone hcl SOLN 0.4 MG/ML ...23
MOTPOLY XR CP24 .....14	MVASI .....29	naloxone hcl SOLN 4 MG/10ML ...23
MOTRIN CHILDRENS CHEW (ibuprofen) .....5	MVW COMPL FORM PROBIOTIC- KIDS CPDR .....21	naloxone hcl SOSY 0.4 MG/ML ...23
MOTRIN INFANTS DROPS SUSP	MVW COMPLETE FORMULATION	naloxone hcl SOSY 2 MG/2ML ....23
		naltrexone hcl .....23
		NAMENDA TITRATION PAK TABS (memantine hcl) .....89
		naphazoline w/ pheniramine 0.3 %-

0.025 % 85	46	niacin TBCR .....97
naphazoline w/ pheniramine 0.315 %-0.027 % 85	neomycin-polymyxin-gramicidin .. 85	nicardipine hcl CAPS 39
naproxen sodium TABS 220 MG ... 5	neomycin-polymyxin-hc (ophth) ... 85	NICOTINE KIT 90
naproxen sodium TABS 275 MG, 550 MG 5	neomycin-polymyxin-hc (otic) SOLN . 86	nicotine polacrilex GUM 90
naproxen SUSP 5	neomycin-polymyxin-hc (otic) SUSP . 86	nicotine polacrilex LOZG 90
naproxen TABS 5	NESINA (alogliptin benzoate) 17	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR 90
naproxen TBEC 5	NEULASTA ONPRO SOSY 6 MG/0.6ML 60	NICOTROL INHA 90
naproxen-esomeprazole magnesium 5	NEULASTA SOSY 60	NICOTROL NS SOLN 90
naratriptan hcl 76	NEUPOGEN SOLN 60	nifedipine CAPS 10 MG 39
NARCAN LIQD (naloxone hcl) 23	NEUPOGEN SOSY 60	nifedipine CAPS 20 MG 39
NATAZIA 41	nevirapine SUSP 36	nifedipine TB24 30 MG, 90 MG ... 39
nateglinide 18	nevirapine TABS 36	nifedipine TB24 60 MG 39
NATROBA (spinosad) 51	nevirapine TB24 400 MG 36	nilotinib hcl 50 MG, 150 MG, 200 MG 31
NATRUL PROBIOTIC CAPS 21	NEXABIOTIC CPDR 21	nimodipine CAPS 39
NATURAL FIBER LAXATIVE POWD 62	NEXIUM 24HR CLEAR MINIS CPDR (esomeprazole magnesium) 92	NINLARO 31
NEBULIZER AIR TUBE/PLUGS MISC 74	NEXIUM 24HR CPDR (esomeprazole magnesium) 92	nisoldipine 39
nefazodone hcl 15	NEXIUM CPDR 20 MG (esomeprazole magnesium) 92	nitisinone CAPS 55
NEFFY SOLN NA 97	NEXIUM PACK 10 MG, 20 MG, 40 MG (esomeprazole magnesium) .. 92	NITRO-BID OINT 9
NEMLUVIO 50	NEXPLANON 42	nitrofurantoin 28
neomycin sulfate TABS 3	NGENLA 54	nitrofurantoin macrocrystal 50 MG, 100 MG 28
neomycin-bacitracin zn-polymyxin 85	niacin (antihyperlipidemic) TBCR .. 26	nitrofurantoin monohyd macro ... 28
neomycin-bacitracin-polymyxin OINT 46	niacin CPCR 250 MG, 500 MG 97	nitroglycerin CPCR 9
neomycin-polymy-dexameth OINT 85	NIACIN ER CPCR 97	nitroglycerin PT24 9
neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 % 85	NIACIN ER TBCR 97	nitroglycerin SUBL 10
neomycin-polymyxin w/ pramoxine	niacin TABS 500 MG 97	NIVA THYROID TABS 91
		NIVESTYM SOLN 60
		NIVESTYM SOSY 60
		NIX LICE KILLING SPRAY LIQD XX .

51	phosphate) .....10	NUPLAZID TABS 10 MG .....33
NIZORAL SHAM .....46	nortriptyline hcl CAPS .....16	NURTEC .....76
NORDITROPIN FLEXPOR SOPN .54	nortriptyline hcl SOLN .....16	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML .....95
norelgestromin-ethinyl estradiol ...42	NORVIR CAPS .....36	NUVESSA .....96
norethin acet & estrad-fe CAPS ...41	NORVIR PACK .....36	NUWIQ KIT .....59
norethin acet & estrad-fe CHEW ..41	NORVIR TABS (ritonavir) .....36	NUWIQ SOLR .....59
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG .....41	NOSE CLIP MISC .....74	nystatin (mouth-throat) .....78
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG .....41	NOVA SAFETY LANCETS 23G ..68	nystatin (topical) CREA .....46
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG .....41	NOVA SAFETY LANCETS 28G ..68	nystatin (topical) OINT .....46
norethindrone & eth estradiol 35 MCG-0.4 MG, 35 MCG-0.5 MG ...41	NOVA SUREFLEX LANCETS ....68	nystatin (topical) POWD EX .....46
norethindrone & eth estradiol 35 MCG-1 MG .....41	NOVAREL IM .....54	nystatin TABS .....24
norethindrone & ethinyl estradiol-fe 41	NOVAVAX COVID-19 VACCINE SUSP .....95	nystatin-triamcinolone CREA .....46
norethindrone (contraceptive) .....43	NOVAVAX COVID-19 VACCINE SUSY .....95	nystatin-triamcinolone OINT .....46
norethindrone acet & eth estra TABS 42	NOVOEIGHT .....59	NYVEPRIA .....60
norethindrone acetate TABS .....88	NOVOLOG 70/30 FLEXPEN RELION SUPN .....18	OBIZUR .....59
norethindrone acetate-ethinyl estradiol .....56	NOVOLOG MIX 70/30 FLEXPEN SUPN .....18	OCALIVA .....57
norethindrone acetate-ethinyl estradiol-fe .....42	NOVOLOG MIX 70/30 RELION SUSP .....18	OCREVUS ZUNOVO .....89
norethindrone-eth estradiol (triphasic) .....42	NOVOLOG MIX 70/30 SUSP .....18	OCTAGAM SOLN .....87
norgestimate-ethinyl estradiol (triphasic) .....42	NOVOSEVEN RT .....59	octreotide acetate KIT .....56
norgestimate-ethinyl estradiol ....42	NP THYROID TABS .....91	octreotide acetate SOLN .....56
norgestrel & ethinyl estradiol 30 MCG-0.3 MG .....42	NPLATE 250 MCG, 500 MCG ....60	octreotide acetate SOSY .....56
NORLIQVA SOLN .....39	NUCALA SOAJ .....10	ODEFSEY .....36
NORPACE CAPS (disopyramide	NUCALA SOLR .....10	ODOMZO .....30
	NUCALA SOSY .....10	OFEV .....90
	NULOJIX .....78	ofloxacin (ophth) .....85
	NUMOISYN LIQD .....79	ofloxacin (otic) .....86
	NUPLAZID CAPS .....33	ofloxacin 300 MG, 400 MG .....56
		OHC COVID-19 ANTIGEN SELF TEST KIT .....53
		OHTUVAYRE .....11

olanzapine SOLR	34	KIT	53	CONTRACEPTIVE GEL	96
olanzapine TABS	34	ON/GO ONE COVID-19 HOME TEST KIT	53	OPVEE NA	23
olanzapine TBDP	34	ONCASPAR	31	OPZELURA	50
olmesartan medoxomil	26	ondansetron hcl SOLN PO 4 MG/5ML	23	ORAL RELIEF SPRAY SOLN	79
olmesartan medoxomil-amlodipine- hydrochlorothiazide	27	ondansetron hcl TABS 4 MG, 8 MG 23	23	ORALAIR SUBL	2
olmesartan medoxomil- hydrochlorothiazide	27	ondansetron TBDP 16 MG	23	ORENITRAM MONTH 1 TEPK	39
olopatadine hcl (nasal)	81	ondansetron TBDP 4 MG, 8 MG ..	23	ORENITRAM MONTH 2 TEPK	39
olopatadine hcl	86	ONETOUCH DELICA PLUS LANCET30G	68	ORENITRAM MONTH 3 TEPK	39
OLPRUVA (2 GM DOSE) THPK ..	55	ONETOUCH DELICA PLUS LANCET33G	68	ORFADIN SUSP	55
OLPRUVA (3 GM DOSE) THPK ..	55	ONETOUCH DELICA SAFETY LANCING	68	ORIAHNN	56
OLPRUVA (4 GM DOSE) THPK ..	55	ONETOUCH ULTRASOFT 2 LANCETS	68	ORILISSA	54
OLPRUVA (5 GM DOSE) THPK ..	55	ONGLYZA (saxagliptin hcl)	17	ORKAMBI PACK	90
OLPRUVA (6 GM DOSE) THPK ..	55	ONPATPRO	90	ORKAMBI TABS	90
OLPRUVA (6.67 GM DOSE) THPK 55	55	ONYDA XR SUEER	2	orphenadrine citrate TB12	81
OLUMIANT	3	OPDIVO 40 MG/4ML, 100 MG/10ML, 240 MG/24ML	29	orphenadrine w/ aspirin & caff	81
omega-3-acid ethyl esters	25	OPIPZA FILM	35	ORTHOVISC	81
omeprazole CPDR	92	OPSYNVI	39	oseltamivir phosphate CAPS 30 MG . 37	37
omeprazole TBEC	92	OPTICHAMBER DIAMOND DEVI .	74	oseltamivir phosphate CAPS 45 MG, 75 MG	37
omeprazole-sodium bicarbonate CAPS	92	OPTICHAMBER DIAMOND MISC .	74	oseltamivir phosphate SUSR	37
omeprazole-sodium bicarbonate PACK	92	OPTICHAMBER DIAMOND-LG MASK DEVI	74	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (alogliptin-pioglitazone)	16
OMNITROPE SOCT	55	OPTICHAMBER DIAMOND-MD MASK MISC	74	OTEZLA TABS	5
OMVOH (300 MG DOSE) SOAJ ..	57	OPTICHAMBER DIAMOND-SM MASK MISC	74	OTEZLA TBPB	5
OMVOH (300 MG DOSE) SOSY ..	57	OPTIONS GYNOL II		OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3
OMVOH SOAJ	57			OTULFI SOLN IV 130 MG/26ML ..	57
OMVOH SOLN	57			OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	47
OMVOH SOSY	57				
ON/GO COVID-19 ANTIGEN TEST					

oxaprozin TABS .....5	OZOBAX DS SOLN PO (baclofen) 81	paricalcitol SOLN .....55
OXAYDO TABS 5 MG .....7	OZOBAX SOLN PO (baclofen) ....81	paroxetine hcl TABS .....15
oxazepam CAPS .....10	OZURDEX IMPL .....85	paroxetine hcl TB24 .....15
oxcarbazepine SUSP .....14	PACLITAXEL PROTEIN-BOUND	paroxetine mesylate (vasomotor) .90
oxcarbazepine TABS .....14	PART .....32	PARSABIV .....55
OXERVATE .....85	paclitaxel protein-bound particles .32	PAXLOVID (150/100) .....37
oxiconazole nitrate CREA .....46	paliperidone .....33	PAXLOVID (300/100 & 150/100) .37
OXISTAT CREA (oxiconazole nitrate)	PALYNZIQ .....55	PAXLOVID (300/100) .....37
.....46	pamidronate disodium SOLN 30	pazopanib hcl .....31
oxybutynin chloride SOLN .....92	MG/10ML, 90 MG/10ML .....54	PC PEDIATRIC POLY-VITA/FE
oxybutynin chloride TABS 2.5 MG .92	PAMIDRONATE DISODIUM SOLN	DROP SOLN .....80
oxybutynin chloride TABS 5 MG ...92	54	PC PEDIATRIC POLY-VITAMIN
oxybutynin chloride TB24 .....92	pantoprazole sodium PACK .....92	DROP SOLN PO .....80
oxycodone hcl CAPS .....7	pantoprazole sodium TBEC 20 MG	PEARLS IC CAPS .....21
oxycodone hcl CONC 100 MG/5ML 7	92	ped multivitamins w/fl & iron SOLN
oxycodone hcl SOLN .....7	pantoprazole sodium TBEC 40 MG	79
oxycodone hcl T12A 10 MG, 20 MG,	92	PEDIARIX SUSY .....91
40 MG .....7	PANZYGA .....87	PEDIATRIC MOUTHPIECE MISC .75
oxycodone hcl T12A 80 MG .....7	PARAGARD INTRAUTERINE	PEDIATRIC MULTIVITAMINS W/FL
oxycodone hcl TABS .....7	COPPER .....42	CHEW-ASSORTED BRAND .....79
oxycodone w/ acetaminophen TABS	PARI ALTERA NEBULIZER	PEDIATRIC MULTIVITAMINS W/FL
325 MG-10 MG, 325 MG-5 MG, 325	HANDSET MISC .....74	CHEW-ASSORTED GENERIC ...80
MG-7.5 MG .....7	PARI BABY CONVERSION KIT	PEDIATRIC MULTIVITAMINS W/FL
oxymorphone hcl TB12 15 MG .....7	MISC .....74	SOLN-ASSORTED BRAND .....80
oxymorphone hcl TB12 5 MG, 7.5	PARI ERAPID NEBULIZER	PEDIATRIC MULTIVITAMINS W/FL
MG, 10 MG, 20 MG, 30 MG, 40 MG 7	HANDSET MISC .....75	SOLN-ASSORTED GENERIC ....80
oyster shell .....77	PARI EXPIRATORY FILTER SET	pediatric vitamins acd w/ fluoride
OZEMPIC (0.25 OR 0.5 MG/DOSE)	DEVI .....75	SOLN .....80
SOPN .....17	PARI MASK SET MISC .....75	PEDVAX HIB SUSP .....93
OZEMPIC (1 MG/DOSE) SOPN 4	PARI SOFT PLASTIC ADULT MASK	peg 3350-kcl-sod bicarb-sod
MG/3ML .....17	MISC .....75	chloride-sod sulfate SOLR .....62
OZEMPIC (2 MG/DOSE) SOPN ...17	PARI SOFT PLASTIC PED MASK	peg 3350-potassium chloride-sod
	MISC .....75	bicarbonate-sod chloride .....62
	PARI VORTEX ADULT MASK ....75	

PEGASYS SOLN	37	PFLEX MISC	75	80 MG, 100 MG, 140 MG	31
PEGASYS SOSY	37	PHARMACIST CHOICE ALCOHOL .	71	phytonadione TABS 5 MG	97
pemetrexed disodium SOLR 100 MG,				PIFELTRO	36
500 MG	29	PHARMACIST CHOICE LANCETS .	68	PILLOW MASK/ADULT MISC	75
PENBRAYA	93			PILLOW MASK/CHILD MISC	75
penciclovir	47	PHARMACIST CHOICE MASK		PILLOW MASK/PEDIATRIC MISC	75
penicillamine TABS	77	WIPES MISC	75		
penicillin v potassium SOLR	87	PHEBURANE PLLT	55	pilocarpine hcl (oral) 5 MG	79
penicillin v potassium TABS	87	phenazopyridine hcl TABS 100 MG,		pilocarpine hcl SOLN 1 %, 2 %, 4 % .	84
		200 MG	58		
PENTACEL	91	phenelzine sulfate	15	PILOT COVID-19 AT-HOME TEST	
pentoxifylline	59	phenobarbital ELIX	62	KIT	53
PERFECT LANCETS 28G	68	phenobarbital TABS	62	pimecrolimus	50
PERFECT LANCETS 30G	68	phentermine hcl-topiramate	1	PIN RID CHEW	9
PERFECT POINT SAFETY		phenylephrine hcl (mydriatic) SOLN		pindolol TABS	38
LANCETS	68	2.5 %	84	pioglitazone hcl	18
perindopril erbumine	26	phenylephrine hcl (oral) TABS	82	pioglitazone hcl-glimepiride	16
PERJETA	29	phenylephrine-dm LIQD 2.5		pioglitazone hcl-metformin hcl TABS .	16
permethrin AERO	51	MG/5ML-5 MG/5ML	44		
permethrin CREA	51	phenylephrine-dm SOLN	44	PIP LANCETS 28G	68
permethrin LIQD EX	51	phenylephrine-shark liver oil-cocoa		PIP LANCETS 30G	68
perphenazine TABS	34	butter	9	pirfenidone CAPS	90
perphenazine-amitriptyline	89	phenylephrine-shark liver oil-mineral		pirfenidone TABS 534 MG	90
		oil-petrolatum	9	piroxicam CAPS	5
PFIZER COVID-19 VAC BIVALENT .		phenytoin CHEW	14	PLEGRIDY SOSY IM	89
95		phenytoin sodium extended 100 MG,		plerixafor	61
PFIZER COVID-19 VAC-TRIS 5-11Y		200 MG, 300 MG	14		
SUSP	95	phenytoin sodium extended 200 MG,		PNEUMOVAX 23 SOLN	93
		300 MG	14	PNEUMOVAX 23 SOSY	93
PFIZER COVID-19 VAC-TRIS 6M-4Y		phenytoin SUSP	14		
SUSP	95			POCKET CHAMBER DEVI	75
PFIZER-BIONT COVID-19 VAC-		PHILLIPS COLON HEALTH CAPS		POCKET SPACER DEVI	75
TRIS SUSP	95	21			
PFIZER-BIONTECH COVID-19		PHOTOFRIN	32	podofilox SOLN	51
VACC SUSP	95	PHYRAGO 20 MG, 50 MG, 70 MG,		POLIVY 140 MG	29

polyethylene glycol 3350 PACK ... 62	potassium citrate-citric acid PACK .58	prednisone TBPK 44
polyethylene glycol 3350 POWD .. 62	potassium iodide (expectorant) SOLN 44	pregabalin CAPS 14
polymyxin b-trimethoprim 85	POTELIGEO 29	pregabalin SOLN 14
polysaccharide iron complex CAPS 61	PRADAXA CAPS (dabigatran etexilate mesylate) 13	PREGNYL IM 54
polyvinyl alcohol 1.4 % 84	PRADAXA PACK 13	PREHEVBRIO 95
POLY-VI-SOL SOLN PO 80	pralatrexate 29	PREMARIN 97
POLY-VITA SOLN PO 80	PRALUENT SOAJ 26	PREMPHASE 56
POLY-VITA/IRON SOLN 80	pramipexole dihydrochloride TABS 33	PREMPRO 56
POLY-VITE PEDIATRIC SOLN PO 80	pramipexole dihydrochloride TB24 33	PRENATAL VITAMINS-ASSORTED BRAND 80
POLY-VITE/IRON SOLN 80	pramoxine hcl (rectal) FOAM EX ... 9	PRENATAL VITAMINS-ASSORTED GENERIC 80
POMALYST 30	prasugrel hcl 60	PREORBOTIC CAPS 21
PONVORY STARTER PACK TBPK 89	pravastatin sodium 25	PREPARATION H EX 1 % 9
PONVORY TABS 89	prazosin hcl CAPS 26	PREPARATION H SOOTHING RELIEF EX 1 % 9
PORTRAZZA 30	PRECISION THINS GP LANCETS 68	PREVNAR 13 93
pot phosphate monobasic w/ sod phosphate dibasic & monobasic .. 77	PRED MILD 86	PREVNAR 20 93
potassium bicarbonate TBEF 77	prednisolone acetate (ophth) 86	PREVYMIS SOLN 37
potassium chloride CPCR 10 MEQ 77	PREDNISOLONE ACETATE P-F .86	PREVYMIS TABS 37
potassium chloride CPCR 8 MEQ . 77	PREDNISOLONE SODIUM PHOSPHATE 86	PREZCOBIX 36
potassium chloride microencapsulated crystals er 77	prednisolone sodium phosphate SOLN 15 MG/5ML 43	PREZISTA SUSP 36
potassium chloride PACK PO 20 MEQ 77	prednisolone sodium phosphate SOLN 20 MG/5ML 43	PREZISTA TABS (darunavir) 36
potassium chloride SOLN PO 10 %, 20 %, 10 % 77	prednisolone sodium phosphate SOLN 5 MG/5ML 43	PREZISTA TABS 150 MG 36
potassium chloride TBCR 8 MEQ, 10 MEQ 77	prednisolone SOLN 43	PREZISTA TABS 75 MG, 600 MG, 800 MG 36
potassium citrate (alkalinizer) TBCR . 58	PREDNISONE INTENSOL CONC 43	PRIALT 6
	prednisone SOLN 44	PRIMADOPHILUS BIFIDUS CPDR 21
	prednisone TABS 44	PRIMIDAR CAPS 21
		primidone 125 MG 14
		primidone 50 MG, 250 MG 14

PRIORIX SUSR	95	PROBIOTIC COLON SUPPORT CAPS	22	PRODIGY SAFETY LANCETS 26G .	68
PRIVIGEN SOLN	87	PROBIOTIC DAILY CAPS	22	PRODIGY TWIST TOP LANCETS 28G	68
PRO COMFORT ALCOHOL	71	PROBIOTIC DIGESTIVE SUPP CAPS	22	PROFILNINE	59
PRO COMFORT LANCETS 30G .	68	PROBIOTIC DIGESTIVE SUPPORT CAPS	23	PRO-FLORA IMMUNE CAPS	22
PRO COMFORT LANCETS 31G .	68	PROBIOTIC MATURE ADULT CAPS	22	progesterone CAPS 100 MG	88
PRO COMFORT SAFETY LANCETS 30G	68	PROBIOTIC PEARLS ADVANTAGE CAPS	22	progesterone CAPS 200 MG	88
PRO COMFORT SPACER ADULT MISC	75	PROBIOTIC PEARLS CAPS	22	PROGLYCEM (diazoxide)	17
PRO COMFORT SPACER CHILD MISC	75	PROBIOTIC PEARLS MAX POTENCY CAPS	22	PROGRAF PACK	78
PRO COMFORT SPACER INFANT DEVI	75	PROBIOTIC PEARLS WOMENS CAPS	22	PROGRAF SOLN	78
PROAIR DIGIHALER	12	PROBIOTIC PRODUCT CAPS ...	22	PROLASTIN-C SOLR	90
probenecid	58	PROBIOTIC/PREBIOTIC/CRANBERY CAPS	22	PROLEUKIN	32
PROBINATE CAPS	21	PROBITROL CAPS	22	PROLIA SOSY	54
PROBIO DEFENSE CAPS	21	PROBIZEN CAPS	22	PROMELLA IN PREBIOTIC CAPS	22
PROBIOFLEXX CAPS	21	PROCARE SPACER/ADULT MASK DEVI	75	PROMEROL CAPS	22
PROBIOMAX COMPLETE DF CAPS	21	PROCARE SPACER/CHILD MASK DEVI	75	promethazine & phenylephrine SYRP	44
PROBIOMAX DAILY DF CAPS ...	21	PROCHAMBER VHC DEVI	75	promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML	25
PROBIOMAX IG 26 DF CAPS ...	21	prochlorperazine	34	promethazine hcl SUPP	25
PROBIOMAX LEAN DF CAPS ...	21	prochlorperazine edisylate 10 MG/2ML	34	promethazine hcl TABS	25
PROBIOMAX SB DF CAPS	21	prochlorperazine maleate TABS ...	34	promethazine w/codeine SOLN ...	44
PROBIONEXX CAPS	21	PROCYSBI	60	promethazine w/codeine SYRP ...	44
PROBIOTIC + OMEGA-3 CAPS ..	21	PROCYSBI CPDR	58	PRONEB ULTRA FILTER SET MISC	75
PROBIOTIC + TURMERIC EXTRACT CAPS	21	PROCYSBI PACK	58	propafenone hcl TABS	10
PROBIOTIC 10 ULTRA STRENGTH CAPS	21	PRODIGY LANCETS 28G	68	propranolol hcl CP24	38
PROBIOTIC ADVANCED FORMULA CAPS	21			propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	38
PROBIOTIC BLEND CAPS	21			propranolol hcl TABS	38

propylthiouracil	90	4 %-0.33 %	51	QUICKVUE SARS ANTIGEN TEST .	53
PROQUAD SUSR	95	pyrethrins-piperonyl butoxide-		quinapril hcl	26
PRORIVA CAPS	22	permethrin-nit remover 4 %-0.33 %-		quinapril-hydrochlorothiazide 12.5	
PROTONIX PACK (pantoprazole		0.5 %	51	MG-10 MG	27
sodium)	92	pyridostigmine bromide TABS 60 MG		quinapril-hydrochlorothiazide 12.5	
protriptyline hcl	16	.....	28	MG-20 MG	27
PROVENGE	30	pyridostigmine bromide TBCR	28	quinapril-hydrochlorothiazide 25 MG-	
PROVENTIL HFA AERS (albuterol		pyridoxine hcl TABS 25 MG, 50 MG,		20 MG	27
sulfate)	12	100 MG	97	quinidine gluconate TBCR	10
pseudoephedrine hcl TABS	82	pyrimethamine	28	quinidine sulfate TABS	10
pseudoephedrine hcl TB12	82	PYZCHIVA 45 MG/0.5ML, 90 MG/ML		QULIPTA	76
pseudoephedrine-ibuprofen TABS	44	.....	47	QUVIVIQ	62
PSS SELECT GP LANCETS	68	PYZCHIVA SC 45 MG/0.5ML, 90		RABAVERT	95
PSS SELECT SAFETY LANCETS		MG/ML	47	rabeprazole sodium TBEC	92
68		PYZCHIVA SC 45 MG/0.5ML	47	RALDESY SOLN PO 10 MG/ML ..	15
psyllium CAPS 0.52 GM	62	QC ALCOHOL SWABS	71	raloxifene hcl	55
psyllium POWD 28.3 %, 30 %, 33 %, 43 %, 58.6 %, 100 %	62	QC LANCETS SUPER THIN 30G	68	ramelteon	62
PULMICORT FLEXHALER AEPB .	11	QC LANCETS ULTRA THIN	68	ramipril CAPS	26
PULMOZYME	90	QC UNILET LANCETS 28G	68	ranolazine TB12	9
PURE COMFORT ALCOHOL PREP		QC UNILET LANCETS MICRO THIN		RAPAFLO 4 MG (silodosin)	58
.....	71	.....	68	RAPID RESPONSE COVID-19 ...	53
PURE COMFORT LANCETS 30G		QDOLO SOLN (tramadol hcl)	7	RASUVO SOAJ 7.5 MG/0.15ML, 10	
68		QELBREE	2	MG/0.2ML, 12.5 MG/0.25ML, 15	
PURE COMFORT SPACER		QSYMIA 11.25 MG-69 MG, 15 MG-		MG/0.3ML, 17.5 MG/0.35ML, 20	
CHAMBER DEVI	75	92 MG, 3.75 MG-23 MG, 7.5 MG-46		MG/0.4ML, 22.5 MG/0.45ML, 25	
PX LANCETS MICROTHIN 33G ..	68	MG (phentermine hcl-topiramate) ...	1	MG/0.5ML, 30 MG/0.6ML	3
PX LANCETS ULTRA THIN 28G ..	68	QUAD-PROBIOTIC CAPS	22	READYLANCE SAFETY LANCETS .	68
pyrantel pamoate SUSP	9	QUADRACEL SUSP	91	REALITY LANCETS	68
pyrazinamide	28	QUADRACEL SUSY	91	REALITY SWABS	71
pyrethrins-piperonyl butoxide LIQD 3		quetiapine fumarate TABS	34	REALITY TRIGGER LANCETS ...	68
%-2.4 %-0.3 %-1.2 %	51	quetiapine fumarate TB24	34	REBINYN	59
pyrethrins-piperonyl butoxide SHAM		QUICKVUE AT-HOME COVID-19			
		TEST KIT	53		

RECOMBINATE SOLR	59	REPLACEMENT FILTERS MISC ..	75	rifampin CAPS	28
RECOMBIVAX HB SUSP	95	RESTASIS EMUL (cyclosporine		RIGHTEST GL300 LANCETS	69
RECOMBIVAX HB SUSY	95	(ophth))	85	riluzole TABS	82
RELEUKO SOLN	60	RESTASIS MULTIDOSE EMUL ...	85	rimantadine hydrochloride TABS ..	37
RELEUKO SOSY	60	RESTORA CAPS	22	RINVOQ LQ SOLN	3
RELEXXII TBCR 18 MG, 27 MG, 36		RESTORIL 22.5 MG (temazepam)	62	RINVOQ TB24	3
MG, 54 MG	2	RETACRIT	61	RISAQUAD CAPS	22
RELEXXII TBCR 45 MG, 63 MG		RETACRIT 2000 UNIT/ML, 3000		RISAQUAD-2 CAPS	22
(methylphenidate hcl)	2	UNIT/ML, 4000 UNIT/ML, 10000		risedronate sodium TABS 150 MG	54
RELIBIOTIC CAPS	22	UNIT/ML, 20000 UNIT/ML	61	risedronate sodium TABS 35 MG .	54
RELION ALCOHOL SWABS	71	RETIN-A GEL (tretinoin)	45	risedronate sodium TABS 5 MG, 30	
RELION KETONE TEST STRP ...	53	RETIN-A MICRO (tretinoin		MG	54
RELION LANCET DEVICES 30G .	68	microsphere)	45	risedronate sodium TBEC	54
RELION LANCETS	68	RETIN-A MICRO PUMP (tretinoin		RISPERDAL CONSTA (risperidone	
RELION LANCETS MICRO-THIN		microsphere)	45	microspheres)	33
33G	69	RETISERT	86	risperidone microspheres	33
RELION LANCETS THIN 26G	69	RETROVIR CAPS (zidovudine) ...	36	risperidone SOLN	33
RELION LANCETS ULTRA-THIN		RETROVIR SYRP (zidovudine) ...	36	risperidone TABS	33
30G	69	REVCovi	55	risperidone TBDP	33
RELION ULTRA THIN LANCETS		REVLIMID	77	RITEFLO DEVI	75
30G	69	REXTOVY LIQD	23	ritonavir TABS	36
REMODULIN SOLN IJ	40	REYATAZ CAPS 200 MG, 300 MG		RITUXAN	29
RENTHYROID TABS 15 MG, 30 MG,		(atazanavir sulfate)	36	rivaroxaban SUSR 1 MG/ML	12
60 MG, 90 MG, 120 MG	91	REYATAZ PACK	36	rivaroxaban TABS 2.5 MG	12
REVELA TABS (sevelamer		REZVOGLAR KWIKPEN	18	rivastigmine 13.3 MG/24HR	89
carbonate)	58	RHOGAM ULTRA-FILTERED PLUS		rivastigmine 4.6 MG/24HR, 9.5	
repaglinide	18	SOSY IM	87	MG/24HR	89
REPATHA PUSHTRONEX SYSTEM		RHOPHYLAC SOSY IJ	87	rivastigmine tartrate CAPS	89
SOCT	26	RIASTAP	59	RIXUBIS SOLR	59
REPATHA SOSY	26	ribavirin (hepatitis c) CAPS	37	rizatriptan benzoate TABS	76
REPATHA SURECLICK SOAJ	26	ribavirin (hepatitis c) TABS 200 MG		rizatriptan benzoate TBDP	76
REPLACEMENT AIR FILTER MISC .		37			
75		riboflavin TABS	97		

ROCKLATAN	85	saline SOLN 0.65 %	81	90 MG/ML	47
ROCTAVIAN	59	salsalate	6	selegiline hcl CAPS	33
ROLVEDON	61	SAMI THE SEAL FILTERS MISC .	75	selegiline hcl TABS	33
romidepsin SOLR	31	SANDIMMUNE CAPS (cyclosporine)	78	selenium sulfide LOTN 1 %	47
ropinirole hydrochloride TABS 0.25		SANDIMMUNE SOLN IV 50 MG/ML .	78	selenium sulfide LOTN 2.5 %	47
MG, 3 MG, 4 MG	33	sapropterin dihydrochloride PACK .	55	selenium sulfide SHAM 1 %	47
ropinirole hydrochloride TABS 0.5		sapropterin dihydrochloride TABS .	55	SELZENTRY SOLN	36
MG, 1 MG, 2 MG, 5 MG	33	SAPS CARE ALCOHOL PREP ...	71	SELZENTRY TABS 25 MG, 75 MG	36
ropinirole hydrochloride TB24	33	SAPS HEALTH ALCOHOL PREP	71	SEMGLEE (YFGN) SOLN	18
rosuvastatin calcium TABS	25	SAPS HEALTH CARE ALCOHOL		SEMGLEE (YFGN) SOPN	18
ROTARIX SUSP	96	PREP	72	sennosides TABS 8.6 MG	63
ROTATEQ SOLN	96	SAPS HEALTH PLUS LANCETS .	69	sennosides-docusate sodium TABS	62
RUBRACA	31	SAPS HEALTH TWIST TOP		SEREVENT DISKUS	12
RUCONEST	59	LANCETS	69	SERTRALINE HCL CAPS 150 MG,	
rufinamide SUSP	14	SAPS TWIST TOP LANCETS	69	200 MG (sertraline hcl)	15
RUKOBIA	36	SAPSCARE TWIST TOP LANCETS		sertraline hcl CAPS 150 MG, 200 MG	
RYALTRIS	81	69		.....	15
RYBELSUS TABS	18	SAVELLA TABS	89	sertraline hcl CONC	15
RYKINDO SRER	33	SAVELLA TITRATION PACK MISC		sertraline hcl TABS	15
SABRIL PACK (vigabatrin)	14	89		sevelamer carbonate PACK	58
SABRIL TABS (vigabatrin)	14	saxagliptin hcl	17	sevelamer carbonate TABS	58
sacubitril-valsartan TABS	39	saxagliptin-metformin hcl	16	sevelamer hcl	58
SAFE-T-LANCE	69	SB ALCOHOL PREP	72	SEVENFACT	59
SAFE-T-LANCE PLUS	69	SB LANCETS THIN	69	SHINGRIX	96
SAFETY LANCET 30G/PRESSURE		SB LANCETS ULTRA THIN	69	SIDESTREAM ADULT FACE MASK	
ACT	69	SCHOOLTIME SHAMPOO SHAM	51	MISC	75
SAFETY LANCETS	69	SD PROBIOTIC-10 COMPLEX		SIDESTREAM PEDIATRIC FACE	
SAFETY LANCETS 21G	69	ULTRA CAPS	22	MASK MISC	75
SAFETY LANCETS 23G	69	SELARSDI SOLN IV 130 MG/26ML		SIDESTREAM PLS ADULT FACE	
SAFETY LANCETS 28G	69	57		MASK MISC	75
salicylic acid GEL 6 %	51	SELARSDI SOSY SC 45 MG/0.5ML,			

SIGNIFOR .....56	SINGLE-LET .....69	78
SIGNIFOR LAR .....56	sirolimus SOLN .....78	sodium fluoride CHEW .....77
SIKLOS TABS .....60	sirolimus TABS .....78	sodium fluoride SOLN 0.5 MG/ML .77
sildenafil citrate (pulmonary hypertension) SOLN .....40	SITAGLIPTIN .....17	SODIUM OXYBATE SOLN .....88
sildenafil citrate (pulmonary hypertension) SUSR .....40	SITAGLIPTIN BASE-METFORMIN HCL TABS .....16	sodium phenylbutyrate POWD ....55
sildenafil citrate (pulmonary hypertension) TABS .....40	SIVEXTRO TABS .....28	sodium phenylbutyrate TABS .....55
SILICONE MASK/ADULT MISC ...75	SKLICE (ivermectin (pediculicide)) 52	sodium phosphates ENEM .....62
SILICONE MASK/INFANT MISC ..75	SKYLA .....43	sodium polystyrene sulfonate POWD 78
SILICONE MASK/PEDIATRIC MISC .75	SKYRIZI PEN SOAJ .....47	sodium polystyrene sulfonate SUSP CO 15 GM/60ML .....78
silodosin .....58	SKYRIZI SOCT .....57	SOFIA SARS ANTIGEN FIA .....53
silver sulfadiazine .....47	SKYRIZI SOLN .....57	SOFIA2 SARS ANTIGEN FIA ....53
SIMBRINZA .....85	SKYRIZI SOSY .....47	SOFOSBUVIR-VELPATASVIR TABS .....37
simethicone CHEW 80 MG .....56	SKYSONA .....89	SOGROYA .....55
simethicone LIQD PO .....56	SKYTROFA .....55	SOLESTA .....77
simethicone SUSP .....56	SM ADVANCED PROBIOTIC CAPS .22	solifenacin succinate TABS .....92
SIMLANDI (1 PEN) AJKT .....4	SM ALCOHOL PREP .....72	SOLIRIS .....59
SIMLANDI (1 SYRINGE) PSKT ....4	SM IPECAC SYRUP .....23	SOLUS V2 LANCETS 28G .....69
SIMLANDI (2 PEN) AJKT .....4	SMARTEST LANCETS 28G .....69	SOLUS V2 TWIST LANCETS 30G 69
SIMLANDI (2 SYRINGE) PSKT ....4	SOAANZ TABS 20 MG .....53	SOLUVITA ACD WITH FLUORIDE SOLN .....80
SIMPLYTHICK EASY MIX .....88	sodium bicarbonate (antacid) TABS 325 MG, 650 MG .....9	SOLUVITA SOLN .....77
SIMPLYTHICK EASYMIX LEVEL 1 .88	sodium chloride (gu irrigant) 0.9 % 58	SOMA TABS 250 MG (carisoprodol) .81
SIMPLYTHICK EASYMIX LEVEL 2 .88	sodium chloride (inhalant) AERS ..44	SOMATULINE DEPOT .....56
SIMPLYTHICK EASYMIX LEVEL 3 .88	sodium chloride (inhalant) NEBU 0.9 %, 7 %44	SOMAVERT .....54
simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG .....25	sodium citrate & citric acid .....58	SOOTHENEB NBL 100 ADULT MASK MISC .....76
simvastatin TABS 80 MG .....25	sodium fluoride (dental) CREA ....78	SOOTHENEB NBL 100 CHILD MASK MISC .....76
	sodium fluoride (dental) GEL .....78	
	sodium fluoride (dental) SOLN 0.2 %	

SOOTHENE NBL 100 MED CUP MISC	76	STEQEYMA	57	sulfacetamide sodium (ophth) SOLN . 85	
SOOTHENE NBL 100 MESH CAP MISC	76	STERILANCE TL	69	sulfacetamide sodium LIQD	47
sorafenib tosylate	31	STERILE DILUENT FLOLAN PH 12 . 88		sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	45
SORBITOL PO 70 %	62	STIMUFEND	61	sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	45
SORILUX FOAM	47	STIOLTO RESPIMAT	12	sulfacetamide sod-prednisolone SOLN	86
sotalol hcl (afib/afl)	38	STIVARGA	31	sulfamethoxazole-trimethoprim SUSP	27
sotalol hcl TABS 240 MG	38	STRENSIQ	55	sulfamethoxazole-trimethoprim TABS	27
sotalol hcl TABS 80 MG, 120 MG, 160 MG	38	STRESS FORMULA/IRON/ENERGY TABS	79	sulfasalazine TABS	57
SOTYKTU	47	STRIBILD	36	sulfasalazine TBEC	57
SOVALDI PACK	37	STROMECTOL (ivermectin)	9	sulindac TABS	5
SOVALDI TABS	37	SUBLOCADE SOSY	8	sumatriptan	77
SPEEDY SWAB COVID-19 ANTIGEN KIT	53	SUBOXONE FILM SL 0.5 MG-2 MG (buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan succinate SOAJ 4 MG/0.5ML	77
SPEVIGO SOLN	47	SUBOXONE FILM SL 1 MG-4 MG (buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan succinate SOAJ 6 MG/0.5ML	77
SPEVIGO SOSY	47	SUBOXONE FILM SL 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan succinate SOCT 4 MG/0.5ML	77
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	96	SUBOXONE FILM SL 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan succinate SOCT 6 MG/0.5ML	77
SPIKEVAX SUSP	96	SUCRAID	53	sumatriptan succinate SOLN 6 MG/0.5ML	77
SPIKEVAX SUSY	96	sucrafate SUSP	92	sumatriptan succinate TABS	77
spinosad	52	sucrafate TABS	92	sumatriptan-naproxen sodium	76
SPINRAZA	83	SUDAFED CHILDRENS LIQD	82	sunitinib malate	31
SPIRIVA HANDIHALER CAPS IN (tiotropium bromide)	11	SUDAFED PE CHILDRENS SOLN 82		SUNLENCA SOLN	36
spironolactone & hydrochlorothiazide	53	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	39	SUNLENCA TABS PO 300 MG ...	36
spironolactone TABS	54	sulfacetamide sodium (acne)	45	SUNLENCA TBPK 300 MG	36
STAMARIL SUSR	96			SUPARTZ FX SOSY	81
stannous fluoride CONC	78				
STEQEYMA	47				

SUPER PROBIOTIC CAPS .....22	acetonide) .....50	tasimelteon CAPS .....62
SUPER PROBIOTIC DIGESTIVE CAPS .....22	SYNALAR OINT (fluocinolone acetonide) .....50	TAVALISSE .....59
SUPER THIN LANCETS .....69	SYNALAR SOLN (fluocinolone acetonide) .....50	tazarotene CREA .....47
SUPERIOR PROBIOTIC CAPS ...22	SYNAREL .....55	TDVAX SUSP .....91
SUPPRELIN LA .....55	SYNOJOYNT SOSY .....81	TECENTRIQ .....29
SURE COMFORT ALCOHOL PREP .....72	SYNRIBO .....32	TECHLITE AST LANCETS .....69
SURE COMFORT LANCETS 18G 69	SYNTHROID TABS (levothyroxine sodium) .....91	TECHLITE LANCETS .....69
SURE COMFORT LANCETS 21G 69	SYNVISC ONE SOSY .....81	TECHLITE LANCETS 26G .....69
SURE COMFORT LANCETS 23G 69	SYNVISC SOSY .....81	TECHLITE LANCETS 30G .....69
SURE COMFORT LANCETS 28G 69	TAB-A-VITE/IRON/BETA CAROTENE TABS .....79	TEGLUTIK SUSP .....82
SURE COMFORT LANCETS 30G 69	TABLOID .....29	TEGRETOL-XR TB12 (carbamazepine) .....14
SUREBIOTIC PROBIOTIC SUPPORT CAPS .....22	TACLONEX SUSP (calcipotriene-betamethasone dipropionate) .....50	TEGSEDI .....90
SURELITE LANCETS .....69	tacrolimus (topical) OINT 0.03 % ..50	telmisartan .....26
SV PROBIOTIC EXTRA STRENGTH CAPS .....22	tacrolimus (topical) OINT 0.1 % ...51	telmisartan-amlodipine .....27
SYLVANT .....78	tacrolimus CAPS .....78	telmisartan-hydrochlorothiazide ...27
SYMBICORT (budesonide-formoterol fumarate dihydrate) .....12	tacrolimus SOLN 5 MG/ML .....78	temazepam 15 MG, 30 MG .....62
SYMDEKO .....90	tadalafil (pulmonary hypertension) TABS .....40	temazepam 22.5 MG .....62
SYMFI (efavirenz-lamivudine-tenofovir disoproxil fumarate) .....36	TADLIQ SUSP .....40	temazepam 7.5 MG .....62
SYMFI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate) .....36	TAFINLAR CAPS .....31	TEMODAR SOLR .....28
SYMTUZA .....36	TAGRISSO .....30	temozolomide CAPS .....29
SYNAGIS SOLN .....87	TAKHZYRO SOLN .....59	temsirolimus .....31
SYNALAR CREA (fluocinolone	TALTZ SOSY .....47	TENIVAC SUSP 2 LFU-5 LFU ....91
	TALZENNA 0.25 MG, 1 MG .....31	tenofovir disoproxil fumarate TABS 36
	tamoxifen citrate TABS .....30	terazosin hcl .....26
	tamsulosin hcl .....58	terbinafine hcl (topical) CREA ....46
	TASCENSO ODT .....89	terbinafine hcl TABS .....24
		terbutaline sulfate TABS .....12
		terconazole vaginal CREA 0.4 % ..96
		terconazole vaginal CREA 0.8 % ..96

terconazole vaginal SUPP	96	theophylline TB24	12	.....	11
teriparatide SOPN	54	thiamine hcl TABS	97	TIROSINT CAPS 13 MCG, 25 MCG,	
TERIPARATIDE SOPN	54	thiamine mononitrate TABS 100 MG .		50 MCG, 75 MCG, 88 MCG, 100	
TESTOPEL PLLT	8	98		MCG, 112 MCG, 125 MCG, 137	
testosterone cypionate SOLN IM 200		THINLETS GP LANCETS	69	MCG, 150 MCG (levothyroxine	
MG/ML	8	thioridazine hcl	34	sodium)	91
testosterone GEL TD 1 %, 25		thiothixene	35	TIVICAY PD TBSO	36
MG/2.5GM, 50 MG/5GM	8	THRESHOLD IMT MISC	76	TIVICAY TABS	36
testosterone GEL TD 1 %	8	THROMBATE III	59	tizanidine hcl CAPS	81
testosterone GEL TD 1.62 %, 10		THYMOGLOBULIN	78	tizanidine hcl TABS	81
MG/ACT, 1.62 %	8	THYROGEN 0.9 MG	52	TOBI NEBU (tobramycin)	3
testosterone GEL TD 20.25		THYROID TABS 15 MG, 30 MG, 60		TOBRADEX OINT	86
MG/1.25GM, 40.5 MG/2.5GM	8	MG, 90 MG, 120 MG	91	tobramycin (ophth) SOLN	85
testosterone SOLN	8	tiagabine hcl 12 MG, 16 MG	14	tobramycin NEBU	3
TETANUS-DIPHThERIA TOXOIDS		tiagabine hcl 2 MG, 4 MG	14	tobramycin sulfate SOLN IJ 1.2	
TD SUSP	91	TIBSOVO	31	GM/30ML, 2 GM/50ML, 10 MG/ML,	
tetrabenazine	89	ticagrelor 60 MG, 90 MG	60	80 MG/2ML	3
tetracaine hcl (ophth)	85	TICOVAC	96	tobramycin sulfate SOLR	3
tetrahydrozoline hcl (ophth) 0.05 %		TIGLUTIK SUSP	82	tobramycin-dexamethasone SUSP	
85		timolol maleate (ophth) SOLG 0.25 %		86	
TEZSPIRE SOAJ	10	.....	84	TOBREX OINT	85
TEZSPIRE SOSY	10	timolol maleate (ophth) SOLN 0.5 % .		TODAYS HEALTH THIN LANCETS	
THALOMID	77	84		28G	69
THEO-24 CP24 100 MG	12	timolol maleate (ophth) SOLN	84	TODAYS HEALTH THIN LANCETS	
THEO-24 CP24 200 MG, 300 MG,		timolol maleate TABS	38	30G	69
400 MG	12	TIMOLOL-BRIMONIDINE-		TOFIDENCE	5
theophylline ELIX	12	DORZOLAMID 0.5 %-0.15 %-2 % .		tolmetin sodium CAPS	5
THEOPHYLLINE ER TB12 100 MG,		84		tolmetin sodium TABS 600 MG	5
200 MG	12	TIMOPTIC OCUDOSE SOLN (timolol		tolnaftate CREA	46
theophylline SOLN	12	maleate (ophth))	84	tolterodine tartrate CP24	92
theophylline TB12 100 MG, 200 MG,		tioconazole vaginal 6.5 %	96	tolterodine tartrate TABS	92
300 MG	12	tiopronin TABS	58	tolvaptan TABS	56
theophylline TB12 450 MG	12	tiotropium bromide CAPS IN 18 MCG		tolvaptan TBPk	56

TOPAMAX SPRINKLE CPSP (topiramate)	14	tramadol hcl TABS 50 MG	7	TRETTEN	59
TOPICORT CREA 0.05 % (desoximetasone)	50	tramadol hcl TB24	7	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	29
TOPICORT CREA 0.25 % (desoximetasone)	50	tramadol-acetaminophen	7	TREXIMET (sumatriptan-naproxen sodium)	76
TOPICORT GEL (desoximetasone) 50		trandolapril 1 MG, 2 MG	26	triamcinolone acetonide (mouth) ..	79
TOPICORT SPRAY LIQD (desoximetasone)	50	trandolapril 4 MG	26	triamcinolone acetonide (topical) AERS	50
topiramate CPSP 15 MG, 25 MG ..	14	trandolapril-verapamil hcl	27	triamcinolone acetonide (topical) CREA 0.025 %	50
topiramate CPSP 50 MG	14	tranexamic acid TABS	61	triamcinolone acetonide (topical) CREA 0.1 %	50
topiramate SOLN 25 MG/ML	14	tranylcypromine sulfate	15	triamcinolone acetonide (topical) CREA 0.5 %	50
topiramate TABS 25 MG	14	TRAVATAN Z SOLN (travoprost) ..	86	triamcinolone acetonide (topical) LOTN	50
topiramate TABS 50 MG, 100 MG, 200 MG	14	TRAVEL LANCETS ADVANCED 28G	69	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	50
topotecan hcl SOLN	32	travoprost SOLN	86	triamcinolone acetonide (topical) OINT 0.05 %	50
topotecan hcl SOLR	32	trazodone hcl TABS 300 MG	15	triamcinolone acetonide (topical) OINT 0.5 %	50
toremifene citrate	30	trazodone hcl TABS 50 MG, 100 MG, 150 MG	15	triamcinolone acetonide-dimethicone- silicone	50
torsemide TABS 20 MG	53	TRELSTAR MIXJECT 11.25 MG, 22.5 MG	30	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	53
torsemide TABS 5 MG, 10 MG, 100 MG	53	TRELSTAR MIXJECT 3.75 MG ...	30	triamterene & hydrochlorothiazide TABS	53
TOVIAZ (fesoterodine fumarate) ..	92	TREMFYA PEN SOAJ SC 200 MG/2ML	57	triazolam	62
TPOXX CAPS	37	TREMFYA SOLN IV	57	trientine hcl 250 MG	77
TRACLEER TABS (bosentan)	40	TREMFYA SOSY SC 200 MG/2ML 57		trifluoperazine hcl TABS	34
TRADJENTA	17	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	57	trihexyphenidyl hcl SOLN	32
tramadol hcl CP24 100 MG, 200 MG, 300 MG	7	treprostinil SOLN IJ	40	trihexyphenidyl hcl TABS	32
TRAMADOL HCL SOLN (tramadol hcl)	7	tretinoin (chemotherapy)	32	TRIKAFTA TBPK 100 MG-50 MG ..	90
tramadol hcl SOLN	7	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	45		
tramadol hcl TABS 25 MG, 75 MG, 100 MG	7	tretinoin CREA 0.025 %	45		
		tretinoin GEL 0.01 %, 0.025 %, 0.05 %	45		
		tretinoin microsphere	45		

TRILEPTAL SUSP (oxcarbazepine) 14	TRULICITY .....18	ULTRA-CARE LANCETS 30G ....70
TRILURON SOSY .....81	TRUMENBA 0.5 ML .....93	ULTRAFLOA IMMUNE HEALTH CAPS .....22
trimethoprim TABS .....27	TRUVADA (emtricitabine-tenofovir disoproxil fumarate) .....36	ULTRA-THIN II AUTO LANCET ..70
trimipramine maleate CAPS .....16	TUBING/WING TIP MISC .....76	ULTRA-THIN II LANCETS .....70
TRIUMEQ PD TBSO .....36	TWINRIX SUSY .....96	UNILET COMFORTOUCH LANCET 70
TRIUMEQ TABS .....36	TWIST TOP LANCETS 30G .....70	UNILET EXCELITE .....70
TRIVISC SOSY .....81	TYBLUME CHEW .....42	UNILET EXCELITE II .....70
TRIZIVIR .....36	TYBOST .....36	UNILET G.P. LANCET .....70
tropicamide SOLN 0.5 %84	TYENNE SOAJ .....5	UNILET G.P. SUPERLITE LANCET . 70
tropicamide SOLN 1 %84	TYENNE SOLN .....5	UNILET GP 28 ULTRA THIN .....70
tropium chloride CP24 .....92	TYENNE SOSY .....5	UNILET LANCET .....70
tropium chloride TABS .....93	TYLENOL CHILDRENS CHEWABLES CHEW (acetaminophen) .....6	UNILET MICRO-THIN 33G .....70
TRUBIOTICS CAPS .....22	TYPHIM VI SOLN .....93	UNILET SUPERLITE LANCET ...70
TRUBIOTICS DIGEST + IMM HEALTH CAPS .....22	TYPHIM VI SOSY .....93	UNILET SUPER-THIN 30G .....70
TRUE COMFORT ALCOHOL PREP PADS .....72	UBRELVY .....76	UNILET ULTRA-THIN 28G .....70
TRUE COMFORT PRO ALCOHOL PREP .....72	UCERIS TB24 (budesonide) .....44	UNISTIK 1 .....70
TRUE COMFORT SAFETY LANCETS .....69	UDENYCA ONBODY SOSY .....61	UNISTIK 2 .....70
TRUE COMFORT TWIST TOP LANCETS .....69	UDENYCA SOAJ .....61	UNISTIK 2 COMFORT .....70
TRUEPLUS GLUCOSE CHEW ....17	UDENYCA SOSY .....61	UNISTIK 2 EXTRA .....70
TRUEPLUS GLUCOSE ON THE GO CHEW .....17	ULTICARE ALCOHOL SWABS ..72	UNISTIK 2 NEONATAL .....70
TRUEPLUS LANCETS 26G .....69	ULTILET ALCOHOL SWABS .....72	UNISTIK 2 NORMAL .....70
TRUEPLUS LANCETS 28G .....69	ULTILET CLASSIC LANCETS ....70	UNISTIK 2 SUPER .....70
TRUEPLUS LANCETS 30G .....69	ULTILET LANCETS .....70	UNISTIK 3 .....70
TRUEPLUS LANCETS 33G .....69	ULTILET SAFETY LANCETS ....70	UNISTIK 3 COMFORT .....70
TRUEPLUS SAFETY LANCETS 28G.....70	ULTILET SAFETY LANCETS 23G 70	UNISTIK 3 EXTRA .....70
	ULTRA THIN LANCETS 31G .....70	UNISTIK 3 GENTLE .....70
	ULTRA-CARE ALCOHOL PREP PADS .....72	UNISTIK 3 NEONATAL .....70
		UNISTIK 3 NORMAL .....70

UNISTIK CZT COMFORT	70	UZEDY SUSY 100 MG/0.28ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML	34	VANDAZOLE	96
UNISTIK CZT NORMAL	70			VAQTA	96
UNISTIK NORMAL	70	UZEDY SUSY 50 MG/0.14ML, 75 MG/0.21ML, 125 MG/0.35ML	34	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	96
UNISTIK PRO SAFETY LANCET	70	VABRINTY SC 22.5 MG, 30 MG, 45 MG	30	varenicline tartrate TABS	90
UNISTIK SAFETY LANCETS 28G 70		valacyclovir hcl 1 GM	37	varenicline tartrate TBPK	90
UNISTIK SAFETY LANCETS 30G 70		valacyclovir hcl 500 MG	37	VARIVAX SUSR	96
UNISTIK TOUCH SAFETY LANC 21G	70	valganciclovir hcl TABS	37	VAXCHORA	93
UNISTIK TOUCH SAFETY LANC 23G	70	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	14	VAXELIS SUSP	91
UNISTIK TOUCH SAFETY LANC 28G	70	valproic acid CAPS	14	VAXELIS SUSY	91
		valrubicin	31	VAXNEUVANCE	93
UNISTIK TOUCH SAFETY LANC 30G	70	valsartan SOLN	26	VCF VAGINAL CONTRACEPTIVE FILM	96
UNITUXIN	29	valsartan TABS	26	VCF VAGINAL CONTRACEPTIVE GEL	96
UP4 PROBIOTICS ADULT CAPS	22	valsartan-hydrochlorothiazide	27	VECAMYL	27
UP4 PROBIOTICS MENS CAPS	22	VALTOCO 10 MG DOSE LIQD	13	VECTIBIX 100 MG/5ML, 400 MG/20ML	30
UP4 PROBIOTICS ULTRA CAPS	22	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	13	VELSIPITY	57
UP4 PROBIOTICS WOMENS CAPS 22		VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	13	VELTASSA	78
urea CREA 40 %	50	VALTOCO 5 MG DOSE LIQD	13	VENCLEXTA STARTING PACK TBPK	30
urea LOTN 40 %	50	vancomycin hcl CAPS 125 MG	27	VENCLEXTA TABS	30
URETRON D/S TABS 81.6 MG ...	27	vancomycin hcl CAPS 250 MG	27	VENLAFAXINE BESYLATE ER ...	16
ursodiol CAPS	57	vancomycin hcl SOLR IV 1 GM	27	venlafaxine hcl CP24 150 MG	16
ursodiol TABS 250 MG	57	VANCOMYCIN HCL SOLR IV 1 GM . 27		venlafaxine hcl CP24 37.5 MG	16
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	47	vancomycin hcl SOLR IV 500 MG	27	venlafaxine hcl CP24 75 MG	16
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	47	VANCOMYCIN HCL SOLR IV 500 MG	27	venlafaxine hcl TABS	16
USTEKINUMAB-TTWE	47	vancomycin hcl SOLR PO 25 MG/ML	27	venlafaxine hcl TB24	16
USTEKINUMAB-TTWE	57			VENTOLIN HFA AERS (albuterol sulfate)	12
				verapamil hcl CP24 100 MG, 120	

MG, 180 MG, 200 MG, 240 MG ... 39	VICTOZA (liraglutide) 18	VIVAGUARD LANCETS 30G 71
verapamil hcl CP24 300 MG 39	vigabatrin PACK 14	VIVAGUARD SAFETY LANCETS 28G 71
verapamil hcl CP24 360 MG 39	vigabatrin TABS 14	VIVIMUSTA SOLN 29
VERAPAMIL HCL ER CP24 (verapamil hcl) 39	VIGAFYDE SOLN 14	VIVITROL 23
verapamil hcl TABS 39	VIJOICE TBPk 78	VIVOTIF 93
verapamil hcl TBCR 39	VILTEPSO 83	VIZIMPRO 30
VERELAN CP24 120 MG, 180 MG, 240 MG (verapamil hcl) 39	VIMIZIM 55	VOGELXO PUMP GEL TD (testosterone) 8
VERELAN CP24 360 MG (verapamil hcl) 39	VIMOVO (naproxen-esomeprazole magnesium) 5	VONVENDI 59
VERELAN PM CP24 100 MG, 200 MG (verapamil hcl) 39	vincristine sulfate 32	VORAXAZE 32
VERELAN PM CP24 300 MG (verapamil hcl) 39	VIRACEPT TABS 250 MG 37	VORTEX HOLD CHMBR/MASK/CHILD DEVI 76
VERIFINE SAFE LANCET MINI 21G 70	VIRACEPT TABS 625 MG 36	VORTEX HOLD CHMBR/MASK/TODDLER DEVI .. 76
VERIFINE SAFE LANCET MINI 23G 71	VIREAD POWD 37	VORTEX VALVE CHAMBER-PEDI MASK DEVI 76
VERIFINE SAFE LANCET MINI 28G 71	VIREAD TABS (tenofovir disoproxil fumarate) 37	VORTEX VALVED HOLDING CHAMBER DEVI 76
VERIFINE SAFE LANCET MINI 30G 71	VIREAD TABS 37	VOSEVI 37
VERIFINE UNIVERSAL LANCETS 28G 71	VISBIOME GI CARE CAPS 22	VOTRIENT 31
VERIFINE UNIVERSAL LANCETS 30G 71	VISCO-3 SOSY 81	VPRIV 60
VERIFINE UNIVERSAL LANCETS 33G 71	VISTOGARD 23	VRAYLAR CAPS 33
VESICARE LS SUSP 93	VISUDYNE 85	VRAYLAR CPPK 33
VEVYE SOLN 85	VITAMIN D3 LIQD PO 125 MCG/ML . 97	VSL#3 CAPS 22
VH ESSENTIALS OPTIBALANCE CAPS 22	vitamin e CAPS 97	VTAMA 47
VIActiv DIGESTIVE HEALTH CHEW 23	VITAMIN E CAPS 97	VYNDAMAX 40
	VITAMIN E CHEW 97	VYNDAQEL 40
	VITAMINS ACD-FLUORIDE SOLN 80	VYONDYS 53 83
	vitamins w/ lipotropics CAPS 80	VYVANSE CAPS 1
	VITRAKVI CAPS 31	VYVANSE CHEW 1
	VITRAKVI SOLN 31	WALGREENS GLUCOSE CHEW . 17
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warfarin sodium TABS	12	XOFLUZA (40 MG DOSE) 40 MG	37	YUTIQ	86
WEBCOL ALCOHOL PREP LARGE 72		XOFLUZA (80 MG DOSE) 80 MG	37	zafirlukast	11
WEBCOL ALCOHOL PREP MEDIUM	72	XOLAIR SOAJ	10	zaleplon	62
WEGOVY	1	XOLAIR SOLR	10	ZALTRAP	29
WELLPRO 31 CAPS	22	XOLAIR SOSY	10	ZARXIO	61
white petrolatum-mineral oil	84	XOPENEX HFA (levalbuterol tartrate)	12	ZAVZPRET	76
WILATE KIT	59	XOSPATA	31	ZEGALOGUE SOAJ	17
WINDMILL TRAINER MISC	76	XPERT XPRESS SARS-COV-2	53	ZEGALOGUE SOSY	17
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ...	87	XPHOZAH	55	ZEGERID CAPS (omeprazole-sodium bicarbonate)	92
XACIATO GEL	96	XTANDI CAPS	30	ZEGERID OTC CAPS (omeprazole-sodium bicarbonate)	92
XALKORI CAPS	31	XYBIOTIC CAPS	22	ZEGERID PACK (omeprazole-sodium bicarbonate)	92
XARELTO STARTER PACK TBP 12		XYNTHA	59	ZELAC CAPS	22
XARELTO SUSR 1 MG/ML (rivaroxaban)	12	XYNTHA SOLOFUSE	59	ZELBORAF	31
XARELTO TABS 10 MG, 20 MG ..	13	XYREM SOLN	88	ZEMAIRA SOLR 1000 MG	90
XARELTO TABS 15 MG	12	YERVOY	29	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	53
XARELTO TABS 2.5 MG (rivaroxaban)	12	YESCARTA	30	ZEPATIER	37
XCOPRI (250 MG DAILY DOSE) TBP	14	YESINTEK SOLN 45 MG/0.5ML ..	47	ZEPBOUND SOAJ	1
XCOPRI TABS	14	YESINTEK SOSY	47	ZEPBOUND SOLN	1
XELJANZ SOLN	3	YEZTUGO SOLN 463.5 MG/1.5ML 37		ZEPOSIA STARTER KIT CPPK ...	89
XELSTRYM	1	YEZTUGO TABS PO 300 MG	37	ZEVALIN Y-90	29
XENAZINE (tetraabenazine)	89	YF-VAX SUSR	96	ZEVXRX STERILE ALCOHOL PREP PAD	72
XEOMIN	83	YONDELIS	29		
XGEVA SOLN	54	YOSPRALA 81 MG-40 MG	60		
XIAFLEX	77	YUFLYMA (1 PEN) AJKT	4		
XIIDRA	85	YUFLYMA (2 PEN) AJKT	4		
		YUFLYMA (2 SYRINGE) PSKT	4		
		YUFLYMA-CD/UC/HS STARTER AJKT	4		
		YUSIMRY	4		

ZEVRX TWIST TOP LANCETS 30G 71	ZOLGENSMA 13.1-13.5 KG .....83	ZOLINZA .....31
ZIAGEN SOLN (abacavir sulfate) .37	ZOLGENSMA 13.6-14.0 KG .....83	zolmitriptan SOLN 2.5 MG .....77
ZIAGEN TABS (abacavir sulfate) ..37	ZOLGENSMA 14.1-14.5 KG .....83	zolmitriptan TABS .....77
zidovudine CAPS .....37	ZOLGENSMA 14.6-15.0 KG .....83	zolmitriptan TBDP .....77
zidovudine SYRP .....37	ZOLGENSMA 15.1-15.5 KG .....83	ZOLOFT CONC (sertraline hcl) ....15
zidovudine TABS .....37	ZOLGENSMA 15.6-16.0 KG .....83	ZOLPIDEM TARTRATE CAPS ....62
ZIEXTENZO .....61	ZOLGENSMA 16.1-16.5 KG .....83	zolpidem tartrate SUBL .....62
zileuton TB12 .....11	ZOLGENSMA 16.6-17.0 KG .....83	zolpidem tartrate TABS .....62
ZILRETTA SRER .....44	ZOLGENSMA 17.1-17.5 KG .....83	zolpidem tartrate TBCR .....62
ZIMHI SOSY .....23	ZOLGENSMA 17.6-18.0 KG .....83	ZOMIG SOLN 2.5 MG (zolmitriptan) .77
zinc oxide (topical) OINT 20 %51	ZOLGENSMA 18.1-18.5 KG .....83	ZONISADE SUSP .....14
zinc sulfate CAPS77	ZOLGENSMA 18.6-19.0 KG83	zonisamide CAPS14
ZINPLAVA87	ZOLGENSMA 19.1-19.5 KG83	ZORYVE CREA EX51
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ziprasidone mesylate33	ZOLGENSMA 2.6-3.0 KG83	ZOVIRAX OINT (acyclovir topical) .47
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ZITUVIO17	ZOLGENSMA 3.1-3.5 KG83	ZUBSOLV SUBL 0.18 MG-0.7 MG .8
ZOLADDEX 10.8 MG30	ZOLGENSMA 3.6-4.0 KG83	ZUBSOLV SUBL 0.36 MG-1.4 MG .8
ZOLADDEX 3.6 MG .....30	ZOLGENSMA 4.1-4.5 KG .....83	ZUBSOLV SUBL 0.71 MG-2.9 MG .8
zoledronic acid CONC .....54	ZOLGENSMA 4.6-5.0 KG .....83	ZUBSOLV SUBL 1.4 MG-5.7 MG ...8
zoledronic acid SOLN 5 MG/100ML 54	ZOLGENSMA 5.1-5.5 KG .....83	ZUBSOLV SUBL 2.1 MG-8.6 MG ...8
ZOLEDRONIC ACID SOLN .....54	ZOLGENSMA 5.6-6.0 KG .....83	ZUBSOLV SUBL 2.9 MG-11.4 MG .8
ZOLGENSMA 20.6-21.0 KG .....83	ZOLGENSMA 6.1-6.5 KG .....84	ZULRESSO .....15
ZOLGENSMA 10.1-10.5 KG .....83	ZOLGENSMA 6.6-7.0 KG .....84	ZURZUVAE .....15
ZOLGENSMA 10.6-11.0 KG83	ZOLGENSMA 7.1-7.5 KG84	ZYDELIG31
ZOLGENSMA 11.1-11.5 KG83	ZOLGENSMA 7.6-8.0 KG84	ZYKADIA TABS31
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ZOLGENSMA 12.1-12.5 KG83	ZOLGENSMA 8.6-9.0 KG84	ZYMFENTRA (1 PEN) AJKT57
ZOLGENSMA 12.6-13.0 KG83	ZOLGENSMA 9.1-9.5 KG84	ZYMFENTRA (2 PEN) AJKT57
	ZOLGENSMA 9.6-10.0 KG .....84	

ZYMFENTRA (2 SYRINGE) PSKT	57
ZYNTEGLO	60
ZYPREXA RELPREVV	34