

CareFirst Formulary 4

Federal Employees Health Benefits Program

List of Covered Drugs

2025

PLEASE READ: This document contains information about the drugs we cover in this plan. This formulary is for members of the federal employees health benefits program.

For more recent information or other questions, please contact CareFirst Pharmacy Services at **800-241-3371** or visit carefirst.com/fedhmo.

Introduction

A formulary is a list of covered prescription drugs. Our drug list is reviewed and approved by an independent national committee comprised of physicians, pharmacists and other health care professionals, known as the Pharmacy and Therapeutics Committee. This committee makes sure the drugs on the formulary are safe and clinically effective.

Within the formulary, prescription drugs are divided into tiers as described below. Depending on your plan, prescription drugs fall into one of five drug tiers which determines the price you pay.

Using Your Formulary

The first column of the formulary lists drugs by name. If the drugs are shown in lowercase italics, they are *generic drugs*. If the drugs are bold and capitalized, they are **BRAND-NAME DRUGS**.

You may search the formulary for a drug by pressing “CTRL” and “F” at the same time to prompt a search.

The second column indicates the drug tier for a covered drug.

The third column indicates any prescription guidelines a drug requires such as prior authorization (PA), step therapy (ST) or quantity limits (QL).

- **Prior Authorization** from CareFirst is required before you fill prescriptions for certain

drugs. Your doctor may need to provide some of your medical history or laboratory tests to determine if these medications are appropriate. Without prior authorization from CareFirst, your drugs may not be covered.

- **Step Therapy** requires that you try lower-cost, equally effective drugs that treat the same medical condition before trying a higher-cost alternative. Your doctor will need to provide information to CareFirst about your experience with these alternatives prior to dispensing a more expensive drug.
- **Quantity Limits** have been placed on the use of selected drugs for quality or safety reasons. Limits may be placed on the amount of the drug covered per prescription or for a defined period of time. For example, quantity limits apply to specialty drugs. Specialty drugs are medications that may be used to treat complex and/or rare health conditions and require special handling, administration or monitoring. Specialty drugs are typically covered for a one-month supply.

Members can view specific cost-share (copay or coinsurance) information and prescription guidelines by logging in to *My Account* at carefirst.com/myaccount and clicking on *Tools* and *Drug Pricing Tool* or by reviewing their annual summary of benefits.

Tier 0: \$0 Drugs	■ Preventive drugs (e.g. statins, aspirin, folic acid, fluoride, iron supplements, smoking cessation products and FDA-approved contraceptives for women) are available at a zero-dollar cost share if prescribed under certain medical criteria by your doctor. ■ Oral chemotherapy drugs and diabetic supplies (e.g. insulin syringes, pen needles, lancets, test strips, and alcohol swabs) are also available at a zero-dollar cost share.
Tier 1: Generic Drugs \$	■ Generic drugs are the same as brand-name drugs in dosage form, safety, strength, route of administration, quality, performance characteristics and intended use. ■ Generic drugs generally cost less than brand-name drugs.
Tier 2: Brand Drugs \$\$	■ Brand-name drugs are chosen for their cost effectiveness compared to drug alternatives. ■ Your cost-share will be more than generics.
Tier 3: Generic Specialty Drugs \$\$\$	■ Generic specialty drugs are medications that may be used to treat complex and/or rare health conditions. ■ Generic specialty drugs may have a lower cost-share than brand specialty drugs.
Tier 4: Brand Specialty Drugs \$\$\$\$	■ Brand specialty drugs are medications that may be used to treat complex and/or rare health conditions. ■ Your cost-share will be more than generic specialty drugs.

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine sulfate tab 5 mg</i>	1	QL (120 tabs every 25 days)
<i>amphetamine sulfate tab 10 mg</i>	1	QL (120 tabs every 25 days)
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (90 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (90 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (30 caps every 25 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	QL (90 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	QL (90 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	QL (90 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	QL (90 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	QL (60 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	QL (60 tabs every 25 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	QL (30 tabs every 25 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	QL (120 caps every 25 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL (120 caps every 25 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL (60 caps every 25 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	1	QL (1200 mL every 25 days)
<i>dextroamphetamine sulfate tab 2.5 mg</i>	1	QL (120 tabs every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate tab 5 mg</i>	1	QL (120 tabs every 25 days)
<i>dextroamphetamine sulfate tab 7.5 mg</i>	1	QL (120 tabs every 25 days)
<i>dextroamphetamine sulfate tab 10 mg</i>	1	QL (120 tabs every 25 days)
<i>dextroamphetamine sulfate tab 15 mg</i>	1	QL (60 tabs every 25 days)
<i>dextroamphetamine sulfate tab 20 mg</i>	1	QL (60 tabs every 25 days)
<i>dextroamphetamine sulfate tab 30 mg</i>	1	QL (30 tabs every 25 days)
<i>lisdexamfetamine dimesylate cap 10 mg</i>	1	QL (60 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 20 mg</i>	1	QL (60 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 30 mg</i>	1	QL (60 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 40 mg</i>	1	QL (30 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 50 mg</i>	1	QL (30 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 60 mg</i>	1	QL (30 caps every 25 days)
<i>lisdexamfetamine dimesylate cap 70 mg</i>	1	QL (30 caps every 25 days)
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	1	QL (60 tabs every 25 days)
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	1	QL (60 tabs every 25 days)
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	1	QL (60 tabs every 25 days)
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	1	QL (30 tabs every 25 days)
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	1	QL (30 tabs every 25 days)
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	1	QL (30 tabs every 25 days)
<i>methamphetamine hcl tab 5 mg</i>	1	QL (150 tabs every 25 days)
VYVANSE CAP 10MG	2	QL (60 caps every 25 days)
VYVANSE CAP 20MG	2	QL (60 caps every 25 days)
VYVANSE CAP 30MG	2	QL (60 caps every 25 days)
VYVANSE CAP 40MG	2	QL (30 caps every 25 days)
VYVANSE CAP 50MG	2	QL (30 caps every 25 days)
VYVANSE CAP 60MG	2	QL (30 caps every 25 days)
VYVANSE CAP 70MG	2	QL (30 caps every 25 days)
VYVANSE CHW 10MG	2	QL (60 tabs every 25 days)
VYVANSE CHW 20MG	2	QL (60 tabs every 25 days)
VYVANSE CHW 30MG	2	QL (60 tabs every 25 days)
VYVANSE CHW 40MG	2	QL (30 tabs every 25 days)
VYVANSE CHW 50MG	2	QL (30 tabs every 25 days)
VYVANSE CHW 60MG	2	QL (30 tabs every 25 days)
ANALEPTICS		
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANOREXIANTS NON-AMPHETAMINE		
<i>benzphetamine hcl tab 50 mg</i>	1	PA, QL (90 tabs every 28 days); Coverage is subject to your plan/benefits
<i>diethylpropion hcl tab 25 mg</i>	1	PA, QL (90 tabs every 28 days); Coverage is subject to your plan/benefits
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	PA; Coverage is subject to your plan/benefits
<i>phendimetrazine tartrate tab 35 mg</i>	1	PA, QL (180 tabs every 28 days); Coverage is subject to your plan/benefits
<i>phentermine hcl cap 15 mg</i>	1	PA, QL (60 caps every 28 days); Coverage is subject to your plan/benefits
<i>phentermine hcl cap 30 mg</i>	1	PA, QL (30 caps every 28 days); Coverage is subject to your plan/benefits
<i>phentermine hcl cap 37.5 mg</i>	1	PA, QL (30 caps every 28 days); Coverage is subject to your plan/benefits
<i>phentermine hcl tab 37.5 mg</i>	1	PA, QL (30 tabs every 28 days); Coverage is subject to your plan/benefits
ANTI-OBESITY AGENTS		
<i>orlistat cap 120 mg</i>	1	PA, QL (90 caps every 28 days); Coverage is subject to your plan/benefits
SAXENDA INJ 18MG/3ML	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
WEGOVY INJ 0.5MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
WEGOVY INJ 0.25MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
WEGOVY INJ 1.7MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
WEGOVY INJ 1MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits

Drug Name	Drug Tier	Requirements/Limits
WEGOVY INJ 2.4MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 2.5/0.5	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 5/0.5ML	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 7.5/0.5	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 10/0.5ML	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 12.5/0.5	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 15/0.5ML	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits

ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

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

STIMULANTS - MISC.

<i>armodafinil tab 50 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>armodafinil tab 150 mg</i>	1	PA, QL (1 tab every 1 day)
<i>armodafinil tab 200 mg</i>	1	PA, QL (1 tab every 1 day)
<i>armodafinil tab 250 mg</i>	1	PA, QL (1 tab every 1 day)
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	QL (60 caps every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	QL (60 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	QL (60 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	QL (60 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	QL (30 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	QL (30 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	QL (30 caps every 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	QL (30 caps every 25 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	QL (120 tabs every 25 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	1	QL (120 tabs every 25 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	QL (60 caps every 25 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	QL (30 caps every 25 days)
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	QL (180 tabs every 25 days)
<i>methylphenidate hcl chew tab 5 mg</i>	1	QL (180 tabs every 25 days)
<i>methylphenidate hcl chew tab 10 mg</i>	1	QL (180 tabs every 25 days)
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	QL (1800 mL every 25 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	QL (900 mL every 25 days)
<i>methylphenidate hcl tab 5 mg</i>	1	QL (180 tabs every 25 days)
<i>methylphenidate hcl tab 10 mg</i>	1	QL (180 tabs every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab 20 mg</i>	1	QL (90 tabs every 25 days)
<i>methylphenidate hcl tab er 10 mg</i>	1	QL (90 tabs every 25 days)
<i>methylphenidate hcl tab er 20 mg</i>	1	QL (90 tabs every 25 days)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	QL (30 tabs every 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	QL (60 tabs every 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	QL (30 tabs every 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i>	1	QL (30 tabs every 25 days)
<i>methylphenidate td patch 10 mg/9hr</i>	1	QL (30 ea every 25 days)
<i>methylphenidate td patch 15 mg/9hr</i>	1	QL (30 ea every 25 days)
<i>methylphenidate td patch 20 mg/9hr</i>	1	QL (30 ea every 25 days)
<i>methylphenidate td patch 30 mg/9hr</i>	1	QL (30 ea every 25 days)
<i>modafinil tab 100 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>modafinil tab 200 mg</i>	1	PA, QL (2 tabs every 1 day)

ALLERGENIC EXTRACTS/BIOLOGICALS MISC**ALLERGENIC EXTRACTS**

ORALAIR SUB 300 IR	2	PA
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AMINOGLYCOSIDES**AMINOGLYCOSIDES**

ARIKAYCE SUS	4	PA
<i>neomycin sulfate tab 500 mg</i>	1	
<i>tobramycin nebu soln 300 mg/4ml</i>	3	PA, QL (8 mL every 1 day)
<i>tobramycin nebu soln 300 mg/5ml</i>	3	PA, QL (10 mL every 1 day)

ANALGESICS - ANTI-INFLAMMATORY**ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES**

ADALIMU-ADAZ INJ 10/0.1ML	4	PA; Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
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Drug Name	Drug Tier	Requirements/Limits
ADALIMU-ADAZ INJ 20/0.2ML	4	PA, QL (4 syringes every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
ADALIMU-ADAZ INJ 40/0.4ML	4	PA, QL (4 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
ADALIMU-ADAZ INJ 40/0.4ML	4	PA, QL (4 syringes every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
ADALIMU-ADAZ INJ 80/0.8ML	4	PA, QL (2 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HADLIMA INJ 40/0.4ML	4	PA, QL (4 syringes per 28 days)
HADLIMA INJ 40/0.8ML	4	PA, QL (4 syringes per 28 days)
HADLIMA PUSH INJ 40/0.4ML	4	PA, QL (4 pens every 28 days)
HADLIMA PUSH INJ 40/0.8ML	4	PA, QL (4 pens per 28 days)
HYRIMOZ INJ 10/0.1ML	4	PA, QL (2 syringes per 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ INJ 20/0.2ML	4	PA, QL (4 syringes every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ INJ 40/0.4ML	4	PA, QL (4 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ INJ 40/0.4ML	4	PA, QL (4 syringes every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ INJ 40/0.8ML	4	PA, QL (4 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ INJ 80/0.8ML	4	PA, QL (2 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.

Drug Name	Drug Tier	Requirements/Limits
HYRIMOZ SENS INJ 80/0.8ML	4	PA, QL (2 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ-CROH INJ UC SP	4	PA, QL (2 pens every 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ-PED INJ CROHNS	4	PA, QL (2 syringes per 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ-PED INJ CROHNS	4	PA, QL (3 pens per 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ-PLAQ INJ PSOR/UVE	4	PA, QL (3 pens per 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
HYRIMOZ-PLAQ INJ PSORIASI	4	PA, QL (3 pens per 28 days); Preferred for all approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
SIMLANDI 1PN KIT 80/0.8ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>ANTIRHEUMATIC - ENZYME INHIBITORS</i>		
RINVOQ LQ SOL 1MG/ML	4	PA, QL (12 mL every 1 day)
RINVOQ TAB 15MG ER	4	PA, QL (1 tab every 1 day); Preferred agent for Rheumatoid Arthritis, Psoriatic Arthritis, Ankylosing Spondylitis, Ulcerative Colitis and Crohn's Disease; Quantity Limits are consistent with maximum FDA approved dosing limits.
RINVOQ TAB 30MG ER	4	PA, QL (1 tab every 1 day); Preferred agent for Rheumatoid Arthritis, Psoriatic Arthritis, Ankylosing Spondylitis, Ulcerative Colitis and Crohn's Disease; Quantity Limits are consistent with maximum FDA approved dosing limits.
RINVOQ TAB 45MG ER	4	PA, QL (Not for daily use); Preferred agent for Rheumatoid Arthritis, Psoriatic Arthritis, Ankylosing Spondylitis, Ulcerative Colitis and Crohn's Disease; Quantity Limits are consistent with maximum FDA approved dosing limits.
XELJANZ SOL 1MG/ML	4	PA, QL (10 mL every 1 day); Preferred agent for Rheumatoid Arthritis and Ulcerative colitis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.

Drug Name	Drug Tier	Requirements/Limits
XELJANZ TAB 5MG	4	PA, QL (2 tabs every 1 day); Preferred agent for Rheumatoid Arthritis and Ulcerative colitis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
XELJANZ TAB 10MG	4	PA, QL (2 tabs every 1 day); Preferred agent for Rheumatoid Arthritis and Ulcerative colitis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
XELJANZ XR TAB 11MG	4	PA, QL (1 tab every 1 day); Preferred agent for Rheumatoid Arthritis and Ulcerative colitis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
XELJANZ XR TAB 22MG	4	PA, QL (1 tab every 1 day); Preferred agent for Rheumatoid Arthritis and Ulcerative colitis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
INTERLEUKIN-6 RECEPTOR INHIBITORS		
KEVZARA INJ 150/1.14	4	PA, QL (2 pens every 28 days)

Drug Name	Drug Tier	Requirements/Limits
KEVZARA INJ 150/1.14	4	PA, QL (2 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
KEVZARA INJ 200/1.14	4	PA, QL (2 pens every 28 days)
KEVZARA INJ 200/1.14	4	PA, QL (2 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

<i>celecoxib cap 50 mg</i>	1
<i>celecoxib cap 100 mg</i>	1
<i>celecoxib cap 200 mg</i>	1
<i>celecoxib cap 400 mg</i>	1
<i>diclofenac potassium tab 50 mg</i>	1
<i>diclofenac sodium tab delayed release 25 mg</i>	1
<i>diclofenac sodium tab delayed release 50 mg</i>	1
<i>diclofenac sodium tab delayed release 75 mg</i>	1
<i>diclofenac sodium tab er 24hr 100 mg</i>	1
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1
<i>etodolac cap 200 mg</i>	1
<i>etodolac cap 300 mg</i>	1
<i>etodolac tab 400 mg</i>	1
<i>etodolac tab 500 mg</i>	1
<i>etodolac tab er 24hr 400 mg</i>	1
<i>etodolac tab er 24hr 500 mg</i>	1
<i>etodolac tab er 24hr 600 mg</i>	1
<i>flurbiprofen tab 50 mg</i>	1
<i>flurbiprofen tab 100 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>indomethacin suppos 50 mg</i>	1	
<i>indomethacin susp 25 mg/5ml</i>	1	
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	1	
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam susp 7.5 mg/5ml</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 750 mg (base equiv)</i>	1	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>oxaprozin cap 300 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20	4	PA, QL (55 tabs every 28 days)

Drug Name	Drug Tier	Requirements/Limits
OTEZLA TAB 10/20/30	4	PA, QL (55 tabs every 28 days); Preferred agent for Psoriasis, Psoriatic Arthritis ; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
OTEZLA TAB 20MG	4	PA, QL (2 tabs every 1 day)
OTEZLA TAB 30MG	4	PA, QL (2 tabs every 1 day); Preferred agent for Psoriasis, Psoriatic Arthritis ; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA CLCK INJ 125MG/ML	4	PA, QL (4 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
ORENCIA INJ 50/0.4ML	4	PA, QL (4 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.

Drug Name	Drug Tier	Requirements/Limits
ORENCIA INJ 87.5/0.7	4	PA, QL (4 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
ORENCIA INJ 125MG/ML	4	PA, QL (4 syringes every 28 days); Preferred agent for Rheumatoid Arthritis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
<i>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</i>		
ENBREL INJ 25/0.5ML	4	PA, QL (8 syringes every 28 days); Preferred agent for all FDA approved indications except psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
ENBREL INJ 25MG	4	PA, QL (8 vials every 28 days)
ENBREL INJ 50MG/ML	4	PA, QL (4 syringes every 28 days); Preferred agent for all FDA approved indications except psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits.

Drug Name	Drug Tier	Requirements/Limits
ENBREL MINI INJ 50MG/ML	4	PA, QL (4 cartridges every 28 days); Preferred agent for all FDA approved indications except psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits.
ENBREL SRCLK INJ 50MG/ML	4	PA, QL (4 pens every 28 days); Preferred agent for all FDA approved indications except psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits.

ANALGESICS - NONNARCOTIC**ANALGESIC COMBINATIONS**

<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL (48 tabs every 25 days)
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	QL (48 caps every 25 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL (48 caps every 25 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL (48 tabs every 25 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL (48 caps every 25 days)

SALICYLATES

<i>diflunisal tab 500 mg</i>	1	
DOLOBID TAB 250MG	2	
<i>salsalate tab 500 mg</i>	1	
<i>salsalate tab 750 mg</i>	1	

ANALGESICS - OPIOID**OPIOID AGONISTS**

CODEINE SULF TAB 15MG	2	PA, QL (42 tabs every 30 days)
CODEINE SULF TAB 60MG	2	PA, QL (42 tabs every 30 days)
<i>codeine sulfate tab 30 mg</i>	1	PA, QL (42 tabs every 30 days)
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	1	PA
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	1	PA
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	1	PA
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	1	PA
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	1	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	1	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	1	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	PA, QL (10 patches every 30 days)
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	1	PA, QL (2 caps every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	1	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	PA, QL (16 mL every 1 day)
<i>hydromorphone hcl tab 2 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>hydromorphone hcl tab 4 mg</i>	1	PA, QL (4 tabs every 1 day)
<i>hydromorphone hcl tab 8 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>hydromorphone hcl tab er 24hr 8 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydromorphone hcl tab er 24hr 12 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydromorphone hcl tab er 24hr 16 mg</i>	1	PA, QL (1 tab every 1 day)
<i>hydromorphone hcl tab er 24hr 32 mg</i>	1	PA
<i>levorphanol tartrate tab 2 mg</i>	1	PA, QL (4 tabs every 1 day)
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	PA
<i>meperidine hcl tab 50 mg</i>	1	PA
<i>methadone hcl conc 10 mg/ml</i>	1	QL (2 mL every 1 day)
<i>methadone hcl conc 10 mg/ml</i>	1	PA, QL (2 mL every 1 day)
<i>methadone hcl soln 5 mg/5ml</i>	1	PA, QL (450 mL every 30 days)
<i>methadone hcl soln 10 mg/5ml</i>	1	PA, QL (7.5 mL every 1 day)
<i>methadone hcl tab 5 mg</i>	1	PA, QL (3 tabs every 1 day)
<i>methadone hcl tab 10 mg</i>	1	PA, QL (1 tab every 1 day)
<i>methadone hcl tab for oral susp 40 mg</i>	1	QL (9 tabs every 25 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	PA, QL (1 cap every 1 day)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	1	PA, QL (1 cap every 1 day)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	1	PA, QL (1 cap every 1 day)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	PA, QL (1 cap every 1 day)
<i>morphine sulfate beads cap er 24hr 90 mg</i>	1	PA, QL (1 cap every 1 day)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 10 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 20 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 30 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 50 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 60 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 80 mg</i>	1	PA
<i>morphine sulfate cap er 24hr 100 mg</i>	1	PA
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA, QL (30 mL every 1 day)
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	PA
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	PA, QL (135 mL every 27 days)
<i>morphine sulfate suppos 5 mg</i>	1	PA, QL (6 supp every 1 day)
<i>morphine sulfate suppos 10 mg</i>	1	PA, QL (6 supp every 1 day)
<i>morphine sulfate suppos 20 mg</i>	1	PA, QL (4 supp every 1 day)
<i>morphine sulfate suppos 30 mg</i>	1	PA, QL (3 supp every 1 day)
<i>morphine sulfate tab 15 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>morphine sulfate tab 30 mg</i>	1	PA, QL (3 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab er 15 mg</i>	1	PA, QL (3 ea every 1 day)
<i>morphine sulfate tab er 30 mg</i>	1	PA, QL (3 ea every 1 day)
<i>morphine sulfate tab er 60 mg</i>	1	PA
<i>morphine sulfate tab er 100 mg</i>	1	PA
<i>morphine sulfate tab er 200 mg</i>	1	PA
<i>oxycodone hcl cap 5 mg</i>	1	PA, QL (6 caps every 1 day)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	PA, QL (3 mL every 1 day)
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA, QL (30 mL every 1 day)
<i>oxycodone hcl tab 5 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>oxycodone hcl tab 10 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>oxycodone hcl tab 15 mg</i>	1	PA, QL (4 tabs every 1 day)
<i>oxycodone hcl tab 20 mg</i>	1	PA, QL (3 tabs every 1 day)
<i>oxycodone hcl tab 30 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	1	PA, QL (4 tabs every 1 day)
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	1	PA, QL (2 tabs every 1 day)
<i>oxymorphone hcl tab 5 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>oxymorphone hcl tab 10 mg</i>	1	PA, QL (3 tabs every 1 day)
<i>tramadol hcl oral soln 5 mg/ml</i>	1	
<i>tramadol hcl tab 50 mg</i>	1	PA
<i>tramadol hcl tab 50 mg</i>	1	QL (6 tabs every 1 day)
<i>tramadol hcl tab er 24hr 100 mg</i>	1	PA, QL (1 tab every 1 day)
<i>tramadol hcl tab er 24hr 200 mg</i>	1	QL (1 tab every 1 day)
<i>tramadol hcl tab er 24hr 300 mg</i>	1	QL (1 tab every 1 day)
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	PA
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	PA
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	PA
<i>XTAMPZA ER CAP 9MG</i>	2	PA, QL (2 caps every 1 day)
<i>XTAMPZA ER CAP 13.5MG</i>	2	PA, QL (2 caps every 1 day)
<i>XTAMPZA ER CAP 18MG</i>	2	PA, QL (2 caps every 1 day)
<i>XTAMPZA ER CAP 27MG</i>	2	PA, QL (2 caps every 1 day)
<i>XTAMPZA ER CAP 36MG</i>	2	PA, QL (2 caps every 1 day)
OPIOID COMBINATIONS		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	PA, QL (90 mL every 1 day)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	PA, QL (390 tabs every 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	PA, QL (12 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i>	1	PA, QL (10 caps every 1 day)
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	QL (48 caps every 25 days)
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	QL (48 caps every 25 days)
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	QL (48 caps every 25 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL (90 mL every 1 day)
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	1	PA, QL (90 mL every 1 day)
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i>	1	PA, QL (8 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	PA, QL (8 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA, QL (8 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	1	PA, QL (5 tabs every 1 day)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	PA, QL (5 tabs every 1 day)
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	PA, QL (5 tabs every 1 day)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA, QL (12 tabs every 1 day)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA, QL (12 tabs every 1 day)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA, QL (8 tabs every 1 day)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA, QL (6 tabs every 1 day)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	PA, QL (8 tabs every 1 day)

OPIOID PARTIAL AGONISTS

<i>BELBUCA MIS 75MCG</i>	2	PA, QL (2 films every 1 day)
<i>BELBUCA MIS 150MCG</i>	2	PA, QL (2 films every 1 day)
<i>BELBUCA MIS 300MCG</i>	2	PA, QL (2 films every 1 day)
<i>BELBUCA MIS 450MCG</i>	2	PA, QL (2 films every 1 day)
<i>BELBUCA MIS 600MCG</i>	2	PA
<i>BELBUCA MIS 750MCG</i>	2	PA
<i>BELBUCA MIS 900MCG</i>	2	PA
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	0	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	0	
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	QL (90 films every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	QL (90 films every 25 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	QL (90 films every 25 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	QL (60 films every 25 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	0	QL (90 tabs every 25 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	0	QL (90 tabs every 25 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	PA, QL (4 ea every 30 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	PA, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	PA, QL (4 ea every 30 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	PA, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	PA, QL (4 ea every 30 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	PA, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	1	PA
<i>buprenorphine td patch weekly 20 mcg/hr</i>	1	PA
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	QL (2 bottles every 25 days)
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	1	PA

ANDROGENS-ANABOLIC**ANABOLIC STEROIDS**

<i>oxandrolone tab 2.5 mg</i>	1	
<i>oxandrolone tab 10 mg</i>	1	

ANDROGENS

<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	1	
<i>methyltestosterone cap 10 mg</i>	1	
<i>methyltestosterone oral tab 10 mg</i>	1	
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone td gel 10mg/act (2%)</i>	1	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	1	PA
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
testosterone td gel 20.25 mg/act (1.62%)	1	PA
testosterone td gel 25 mg/2.5gm (1%)	1	PA
testosterone td gel 40.5 mg/2.5gm (1.62%)	1	PA
testosterone td gel 50 mg/5gm (1%)	1	PA
testosterone td soln 30 mg/act	1	PA

ANORECTAL AND RELATED PRODUCTS**INTRARECTAL STEROIDS**

budesonide rectal foam 2 mg/act	1	
hydrocortisone enema 100 mg/60ml	1	

RECTAL COMBINATIONS

hydrocortisone acetate w/ pramoxine perianal cream 1-1%	1	
hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	1	

RECTAL STEROIDS

hydrocortisone acetate suppos 25 mg	1	
hydrocortisone acetate suppos 30 mg	1	
hydrocortisone perianal cream 2.5%	1	

VASODILATING AGENTS

nitroglycerin oint 0.4%	1	
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ANTHELMINTICS**ANTHELMINTICS**

albendazole tab 200 mg	1	QL (336 tabs every year)
EMVERM CHW 100MG	2	QL (12 ea every year)
ivermectin tab 3 mg	1	
ivermectin tab 6 mg	2	
praziquantel tab 600 mg	1	QL (24 tabs every year)

ANTI-INFECTIVE AGENTS - MISC.**ANTI-INFECTIVE AGENTS - MISC.**

metronidazole cap 375 mg	1	
metronidazole tab 250 mg	1	
metronidazole tab 500 mg	1	
tinidazole tab 250 mg	1	
tinidazole tab 500 mg	1	
trimethoprim tab 100 mg	1	

ANTI-INFECTIVE MISC. - COMBINATIONS

methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg	1	
methenamine-hyosc-meth blue-benz acid-phenyl sal tab 81.6mg	1	
methenamine-hyosc-meth blue-sod phos-phen sal cap 118 mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>methenamine-hyosc-meth blue-sod phos-phen sal cap 120 mg</i>	1	
<i>methenamine-hyosc-meth blue-sod phos-phen sal tab 81 mg</i>	1	
<i>methenamine-hyoscamine-meth blue-sod phos tab 81.6 mg</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
URETRON D/S TAB	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone susp 750 mg/5ml</i>	1	
<i>nitazoxanide tab 500 mg</i>	1	
CYCLIC LIPOPEPTIDES		
<i>daptomycin for iv soln 350 mg</i>	1	
GLYCOPEPTIDES		
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	QL (80 caps every 10 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	QL (80 caps every 10 days)
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	1	QL (450 mL every 10 days)
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	1	QL (450 mL every 10 days)
LEPROSTATICS		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
LINCOSAMIDES		
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	1	PA
<i>linezolid tab 600 mg</i>	1	PA
POLYMYXINS		
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	1	
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>methenamine hippurate tab 1 gm</i>	1	
<i>methenamine mandelate tab 0.5 gm</i>	1	
<i>methenamine mandelate tab 1 gm</i>	1	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	

ANTIANGINAL AGENTS**ANTIANGINALS-OTHER**

<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	

NITRATES

<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
NITRO-DUR DIS 0.3MG/HR	2	
NITRO-DUR DIS 0.8MG/HR	2	
<i>nitroglycerin cap er 2.5 mg</i>	1	
<i>nitroglycerin cap er 6.5 mg</i>	1	
<i>nitroglycerin cap er 9 mg</i>	1	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	1	

ANTIANXIETY AGENTS**ANTIANXIETY AGENTS - MISC.**

<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	1	
<i>buspirone hcl tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone hcl tab 30 mg</i>	1	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
<i>meprobamate tab 200 mg</i>	1	
<i>meprobamate tab 400 mg</i>	1	

BENZODIAZEPINES

<i>ALPRAZOLAM CON 1 MG/ML</i>	2	QL (300 mL every 25 days)
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	QL (150 ea every 25 days)
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	QL (150 ea every 25 days)
<i>alprazolam orally disintegrating tab 1 mg</i>	1	QL (150 ea every 25 days)
<i>alprazolam orally disintegrating tab 2 mg</i>	1	QL (150 ea every 25 days)
<i>alprazolam tab 0.5 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab 0.25 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab 1 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab 2 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab er 24hr 0.5 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab er 24hr 1 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab er 24hr 2 mg</i>	1	QL (150 tabs every 25 days)
<i>alprazolam tab er 24hr 3 mg</i>	1	QL (90 tabs every 25 days)
<i>chlordiazepoxide hcl cap 5 mg</i>	1	QL (360 caps every 25 days)
<i>chlordiazepoxide hcl cap 10 mg</i>	1	QL (360 caps every 25 days)
<i>chlordiazepoxide hcl cap 25 mg</i>	1	QL (360 caps every 25 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	1	QL (180 tabs every 25 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	1	QL (180 tabs every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clorazepate dipotassium tab 15 mg</i>	1	QL (180 tabs every 25 days)
<i>diazepam conc 5 mg/ml</i>	1	QL (240 mL every 25 days)
<i>diazepam oral soln 1 mg/ml</i>	1	QL (1200 mL every 25 days)
<i>diazepam tab 2 mg</i>	1	QL (120 tabs every 25 days)
<i>diazepam tab 5 mg</i>	1	QL (120 tabs every 25 days)
<i>diazepam tab 10 mg</i>	1	QL (120 tabs every 25 days)
<i>lorazepam conc 2 mg/ml</i>	1	QL (150 mL every 25 days)
<i>lorazepam tab 0.5 mg</i>	1	QL (150 tabs every 25 days)
<i>lorazepam tab 1 mg</i>	1	QL (150 tabs every 25 days)
<i>lorazepam tab 2 mg</i>	1	QL (150 tabs every 25 days)
<i>oxazepam cap 10 mg</i>	1	QL (120 caps every 25 days)
<i>oxazepam cap 15 mg</i>	1	QL (120 caps every 25 days)
<i>oxazepam cap 30 mg</i>	1	QL (120 caps every 25 days)

ANTIARRHYTHMICS**ANTIARRHYTHMICS TYPE I-A**

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

ANTIARRHYTHMICS TYPE I-B

<i>mexiletine hcl cap 150 mg</i>	1
<i>mexiletine hcl cap 200 mg</i>	1
<i>mexiletine hcl cap 250 mg</i>	1

ANTIARRHYTHMICS TYPE I-C

<i>flecainide acetate tab 50 mg</i>	1
<i>flecainide acetate tab 100 mg</i>	1
<i>flecainide acetate tab 150 mg</i>	1
<i>propafenone hcl cap er 12hr 225 mg</i>	1
<i>propafenone hcl cap er 12hr 325 mg</i>	1
<i>propafenone hcl cap er 12hr 425 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	3	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	3	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	3	PA
TIKOSYN CAP 125MCG	4	PA
TIKOSYN CAP 250MCG	4	PA
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	QL (240 mL every 25 days)
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA INJ 10MG/0.5	4	PA, QL (1 SYRINGE PER 56 DAYS)
FASENRA PEN INJ 30MG/ML	4	PA, QL (1 pen every 56 days)
NUCALA INJ 40MG/0.4	4	PA, QL (1 syringe every 28 days)
NUCALA INJ 100MG	4	PA, QL (3 vials every 30 days)
NUCALA INJ 100MG/ML	4	PA, QL (3 pens every 28 day)
NUCALA INJ 100MG/ML	4	PA, QL (3 syringes every 28 days)
XOLAIR INJ 75/0.5	4	PA, QL (2 pens every 28 days)
XOLAIR INJ 75/0.5	4	PA, QL (2 syr every 28 days)
XOLAIR INJ 150MG/ML	4	PA, QL (8 pens every 28 days)
XOLAIR INJ 150MG/ML	4	PA, QL (8 syringes every 28 days)
XOLAIR INJ 300/2ML	4	PA, QL (4 pens every 28 days)
XOLAIR INJ 300/2ML	4	PA, QL (4 syringes every 28 days)
BRONCHODILATORS - ANTICHOLINERGICS		
<i>ipratropium bromide inhal soln 0.02%</i>	1	QL (313 mL every 25 days)

Drug Name	Drug Tier	Requirements/Limits
SPIRIVA AER 1.25MCG	2	QL (1 inhaler every 25 days)
SPIRIVA SPR 2.5MCG	2	QL (1 inhaler every 25 days)
YUPELRI SOL	2	QL (90 mL every 25 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
STEROID INHALANTS		
ARNUITY ELPT INH 50MCG	2	QL (1 inhaler every 25 days)
ARNUITY ELPT INH 100MCG	2	QL (30 blisters every 25 days)
ARNUITY ELPT INH 200MCG	2	QL (30 blisters every 25 days)
ASMANEX HFA AER 50MCG	2	QL (1 package every 25 days)
ASMANEX HFA AER 100 MCG	2	QL (1 package every 25 days)
ASMANEX HFA AER 200 MCG	2	QL (1 package every 25 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	QL (120 mL every 25 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	QL (180 mL every 25 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	1	QL (60 mL every 25 days)
SYMPATHOMIMETICS		
AIRSUPRA AER 90-80MCG	2	QL (3 inhalers every 25 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL (2 packages every 25 days)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL (120 ea every 25 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (375 mL every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL (375 mL every 25 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL (375 mL every 25 days)
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	1	QL (120 mL every 25 days)
BEVESPI AER 9-4.8MCG	2	QL (1 inhaler every 30 days)
BREO ELLIPTA INH 50-25MCG	2	QL (1 inhaler every 25 days)
BREO ELLIPTA INH 100-25	2	QL (60 blisters every 25 days); Brand preferred over generic
BREO ELLIPTA INH 200-25	2	QL (60 blisters every 25 days); Brand preferred over generic
BREZTRI AERO AER SPHERE	2	QL (1 inhaler every 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	QL (3 packages every 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	QL (3.01 inhalers every 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	QL (3 packages every 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	QL (3.01 inhalers every 25 days)
DULERA AER 50-5MCG	2	QL (1 inhaler every 25 days)
DULERA AER 100-5MCG	2	QL (1 inhaler every 25 days)
DULERA AER 100-5MCG	2	QL (1 package every 25 days)
DULERA AER 200-5MCG	2	QL (1 inhaler every 25 days)
DULERA AER 200-5MCG	2	QL (1 package every 25 days)
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	1	QL (1 inhaler every 25 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	QL (60 inhalations every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	1	QL (1 inhaler every 25 days)
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	1	QL (1 inhaler every 25 days)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	QL (60 inhalations every 25 days)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	QL (60 inhalations every 25 days)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	1	QL (120 mL every 25 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	QL (540 mL every 25 days)
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	QL (300 mL every 25 days)
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (300 mL every 25 days)
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL (300 mL every 25 days)
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1	QL (90 ea every 25 days)
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	QL (2 inhalers every 25 days)
STRIVERDI AER 2.5MCG	2	QL (1 inhaler every 25 days)
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
TRELEGY AER 100MCG	2	QL (1 inhaler every 25 days)
TRELEGY AER 200MCG	2	QL (1 inhaler every 25 days)

XANTHINES

<i>theophylline elixir 80 mg/15ml</i>	1
<i>theophylline soln 80 mg/15ml</i>	1
<i>theophylline tab er 12hr 300 mg</i>	1
<i>theophylline tab er 12hr 450 mg</i>	1
<i>theophylline tab er 24hr 400 mg</i>	1
<i>theophylline tab er 24hr 600 mg</i>	1

ANTICOAGULANTS**COUMARIN ANTICOAGULANTS**

<i>warfarin sodium tab 1 mg</i>	1
<i>warfarin sodium tab 2 mg</i>	1
<i>warfarin sodium tab 2.5 mg</i>	1
<i>warfarin sodium tab 3 mg</i>	1
<i>warfarin sodium tab 4 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	
<i>warfarin sodium tab 7.5 mg</i>	1	
<i>warfarin sodium tab 10 mg</i>	1	
DIRECT FACTOR XA INHIBITORS		
<i>rivaroxaban tab 2.5 mg</i>	1	
XARELTO STAR TAB 15/20MG	2	
XARELTO SUS 1MG/ML	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	1	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	PA
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	PA
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	1	PA
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	PA
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	1	PA
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	1	PA
THROMBIN INHIBITORS		
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	1	
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	1	

ANTICONVULSANTS**ANTICONVULSANTS - BENZODIAZEPINES**

clobazam suspension 2.5 mg/ml	1	PA
clobazam tab 10 mg	1	PA
clobazam tab 20 mg	1	PA
clonazepam orally disintegrating tab 0.5 mg	1	QL (300 ea every 25 days)
clonazepam orally disintegrating tab 0.25 mg	1	QL (300 ea every 25 days)
clonazepam orally disintegrating tab 0.125 mg	1	QL (300 ea every 25 days)
clonazepam orally disintegrating tab 1 mg	1	QL (300 ea every 25 days)
clonazepam orally disintegrating tab 2 mg	1	QL (300 ea every 25 days)
clonazepam tab 0.5 mg	1	QL (300 tabs every 25 days)
clonazepam tab 1 mg	1	QL (300 tabs every 25 days)
clonazepam tab 2 mg	1	QL (300 tabs every 25 days)
diazepam rectal gel delivery system 2.5 mg	1	
diazepam rectal gel delivery system 10 mg	1	
diazepam rectal gel delivery system 20 mg	1	

ANTICONVULSANTS - MISC.

carbamazepine cap er 12hr 100 mg	1	
carbamazepine cap er 12hr 200 mg	1	
carbamazepine cap er 12hr 300 mg	1	
carbamazepine chew tab 100 mg	1	
carbamazepine chew tab 200 mg	1	
carbamazepine susp 100 mg/5ml	1	
carbamazepine tab 200 mg	1	
carbamazepine tab er 12hr 100 mg	1	
carbamazepine tab er 12hr 200 mg	1	
carbamazepine tab er 12hr 400 mg	1	
gabapentin cap 100 mg	1	QL (6 caps every 1 day)
gabapentin cap 300 mg	1	QL (6 caps every 1 day)
gabapentin cap 400 mg	1	QL (6 caps every 1 day)
gabapentin oral soln 250 mg/5ml	1	QL (72 mL every 1 day)
gabapentin tab 600 mg	1	QL (6 tabs every 1 day)
gabapentin tab 800 mg	1	QL (4 tabs every 1 day)
lacosamide oral solution 10 mg/ml	1	
lacosamide tab 50 mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lacosamide tab 100 mg</i>	1	
<i>lacosamide tab 150 mg</i>	1	
<i>lacosamide tab 200 mg</i>	1	
<i>lamotrigine orally disintegrating tab 25 mg</i>	1	
<i>lamotrigine orally disintegrating tab 50 mg</i>	1	
<i>lamotrigine orally disintegrating tab 100 mg</i>	1	
<i>lamotrigine orally disintegrating tab 200 mg</i>	1	
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	1	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1	
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	1	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	1	
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	1	
<i>lamotrigine tab er 24hr 50 mg</i>	1	
<i>lamotrigine tab er 24hr 100 mg</i>	1	
<i>lamotrigine tab er 24hr 200 mg</i>	1	
<i>lamotrigine tab er 24hr 250 mg</i>	1	
<i>lamotrigine tab er 24hr 300 mg</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	
<i>oxcarbazepine tab 150 mg</i>	1	
<i>oxcarbazepine tab 300 mg</i>	1	
<i>oxcarbazepine tab 600 mg</i>	1	
<i>oxcarbazepine tab er 24hr 150 mg</i>	1	
<i>oxcarbazepine tab er 24hr 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine tab er 24hr 600 mg</i>	1	
<i>pregabalin cap 25 mg</i>	1	QL (4 caps every 1 day)
<i>pregabalin cap 50 mg</i>	1	QL (4 caps every 1 day)
<i>pregabalin cap 75 mg</i>	1	QL (4 caps every 1 day)
<i>pregabalin cap 100 mg</i>	1	QL (4 caps every 1 day)
<i>pregabalin cap 150 mg</i>	1	QL (4 caps every 1 day)
<i>pregabalin cap 200 mg</i>	1	QL (3 caps every 1 day)
<i>pregabalin cap 225 mg</i>	1	QL (2 caps every 1 day)
<i>pregabalin cap 300 mg</i>	1	QL (2 caps every 1 day)
<i>pregabalin soln 20 mg/ml</i>	1	QL (30 mL every 1 day)
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 250 mg</i>	1	
<i>rufinamide susp 40 mg/ml</i>	1	PA
<i>rufinamide tab 200 mg</i>	1	PA
<i>rufinamide tab 400 mg</i>	1	PA
<i>topiramate cap er 24hr 25 mg</i>	1	
<i>topiramate cap er 24hr 50 mg</i>	1	
<i>topiramate cap er 24hr 100 mg</i>	1	
<i>topiramate cap er 24hr 200 mg</i>	1	
<i>topiramate sprinkle cap 15 mg</i>	1	
<i>topiramate sprinkle cap 25 mg</i>	1	
<i>topiramate sprinkle cap 50 mg</i>	1	
<i>topiramate tab 25 mg</i>	1	
<i>topiramate tab 50 mg</i>	1	
<i>topiramate tab 100 mg</i>	1	
<i>topiramate tab 200 mg</i>	1	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
CARBAMATES		
<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
GABA MODULATORS		
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
<i>vigabatrin powd pack 500 mg</i>	3	PA, QL (6 packets every 1 day)
<i>vigabatrin tab 500 mg</i>	3	PA, QL (6 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
HYDANTOINS		
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
SUCCINIMIDES		
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>methsuximide cap 300 mg</i>	1	
VALPROIC ACID		
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	1	
<i>divalproex sodium tab delayed release 250 mg</i>	1	
<i>divalproex sodium tab delayed release 500 mg</i>	1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine orally disintegrating tab 15 mg</i>	1	
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	
<i>mirtazapine tab 7.5 mg</i>	1	
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 150 mg</i>	1	
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl tab 10 mg</i>	1	
<i>fluoxetine hcl tab 20 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	1	
<i>paroxetine hcl tab 10 mg</i>	1	
<i>paroxetine hcl tab 20 mg</i>	1	
<i>paroxetine hcl tab 30 mg</i>	1	
<i>paroxetine hcl tab 40 mg</i>	1	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
SEROTONIN MODULATORS		
<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hcl tab 200 mg</i>	1	
<i>nefazodone hcl tab 250 mg</i>	1	
<i>trazodone hcl tab 50 mg</i>	1	
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	
<i>trazodone hcl tab 300 mg</i>	1	
<i>vilazodone hcl tab 10 mg</i>	1	
<i>vilazodone hcl tab 20 mg</i>	1	
<i>vilazodone hcl tab 40 mg</i>	1	
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
TRICYCLIC AGENTS		
<i>amitriptyline hcl tab 10 mg</i>	1	
<i>amitriptyline hcl tab 25 mg</i>	1	
<i>amitriptyline hcl tab 50 mg</i>	1	
<i>amitriptyline hcl tab 75 mg</i>	1	
<i>amitriptyline hcl tab 100 mg</i>	1	
<i>amitriptyline hcl tab 150 mg</i>	1	
<i>amoxapine tab 25 mg</i>	1	
<i>amoxapine tab 50 mg</i>	1	
<i>amoxapine tab 100 mg</i>	1	
<i>amoxapine tab 150 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	
<i>clomipramine hcl cap 75 mg</i>	1	
<i>desipramine hcl tab 10 mg</i>	1	
<i>desipramine hcl tab 25 mg</i>	1	
<i>desipramine hcl tab 50 mg</i>	1	
<i>desipramine hcl tab 75 mg</i>	1	
<i>desipramine hcl tab 100 mg</i>	1	
<i>desipramine hcl tab 150 mg</i>	1	
<i>doxepin hcl cap 10 mg</i>	1	
<i>doxepin hcl cap 25 mg</i>	1	
<i>doxepin hcl cap 50 mg</i>	1	
<i>doxepin hcl cap 75 mg</i>	1	
<i>doxepin hcl cap 100 mg</i>	1	
<i>doxepin hcl cap 150 mg</i>	1	
<i>doxepin hcl conc 10 mg/ml</i>	1	
<i>imipramine hcl tab 10 mg</i>	1	
<i>imipramine hcl tab 25 mg</i>	1	
<i>imipramine hcl tab 50 mg</i>	1	
<i>imipramine pamoate cap 75 mg</i>	1	
<i>imipramine pamoate cap 100 mg</i>	1	
<i>imipramine pamoate cap 125 mg</i>	1	
<i>imipramine pamoate cap 150 mg</i>	1	
<i>nortriptyline hcl cap 10 mg</i>	1	
<i>nortriptyline hcl cap 25 mg</i>	1	
<i>nortriptyline hcl cap 50 mg</i>	1	
<i>nortriptyline hcl cap 75 mg</i>	1	
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	
<i>protriptyline hcl tab 5 mg</i>	1	
<i>protriptyline hcl tab 10 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate cap 50 mg</i>	1	
<i>trimipramine maleate cap 100 mg</i>	1	

ANTIDIABETICS**ALPHA-GLUCOSIDASE INHIBITORS**

<i>acarbose tab 25 mg</i>	1	
<i>acarbose tab 50 mg</i>	1	
<i>acarbose tab 100 mg</i>	1	
<i>miglitol tab 25 mg</i>	1	
<i>miglitol tab 50 mg</i>	1	
<i>miglitol tab 100 mg</i>	1	

ANTIDIABETIC - AMYLIN ANALOGS

SYMLINPEN 60 INJ 1000MCG	2	ST
SYMLNPEN 120 INJ 1000MCG	2	ST

ANTIDIABETIC COMBINATIONS

<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	1	ST
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	1	ST
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	1	ST
<i>alogliptin-pioglitazone tab 25-15 mg</i>	1	ST
<i>alogliptin-pioglitazone tab 25-30 mg</i>	1	ST
<i>alogliptin-pioglitazone tab 25-45 mg</i>	1	ST
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	
<i>glyburide-metformin tab 1.25-250 mg</i>	1	
<i>glyburide-metformin tab 2.5-500 mg</i>	1	
<i>glyburide-metformin tab 5-500 mg</i>	1	
GLYXAMBI TAB 10-5 MG	2	ST
GLYXAMBI TAB 25-5 MG	2	ST
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	1	ST
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	1	ST
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	1	ST
SOLQUA INJ 100/33	2	ST, QL (10 pens every 30 days)
SYNJARDY TAB	2	ST
SYNJARDY TAB 5-500MG	2	ST
SYNJARDY TAB 5-1000MG	2	ST

Drug Name	Drug Tier	Requirements/Limits
SYNJARDY TAB 12.5-500	2	ST
SYNJARDY XR TAB	2	ST
SYNJARDY XR TAB 5-1000MG	2	ST
SYNJARDY XR TAB 10-1000	2	ST
SYNJARDY XR TAB 25-1000	2	ST
TRIJARDY XR TAB	2	ST
ZITUVIMET TAB 50-500MG	2	ST
ZITUVIMET TAB 50-1000	2	ST
ZITUVIMET XR TAB 50-500MG	2	ST
ZITUVIMET XR TAB 50-1000	2	ST
ZITUVIMET XR TAB 100-1000	2	ST
BIGUANIDES		
<i>metformin hcl oral soln 500 mg/5ml</i>	1	
<i>metformin hcl tab 500 mg</i>	1	
<i>metformin hcl tab 850 mg</i>	1	
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	
<i>metformin hcl tab er 24hr 750 mg</i>	1	
DIABETIC OTHER		
BAQSIMI ONE POW 3MG/DOSE	2	
BAQSIMI TWO POW 3MG/DOSE	2	
<i>diazoxide susp 50 mg/ml</i>	1	
<i>glucagon (rdna) for inj kit 1 mg</i>	1	
GVOKE HYPO 1 INJ 0.5/.1ML	2	
GVOKE HYPO 1 INJ 1MG/.2ML	2	
GVOKE HYPO 2 INJ 0.5/.1ML	2	
GVOKE HYPO 2 INJ 1MG/.2ML	2	
GVOKE KIT SOL 1MG/0.2M	2	
GVOKE PFS INJ	2	
<i>mifepristone tab 300 mg</i>	3	PA, QL (4 tabs every 1 day)
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	1	ST
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	1	ST
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	1	ST
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	1	ST
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	1	ST
ZITUVIO TAB 25MG	2	ST
ZITUVIO TAB 50MG	2	ST
ZITUVIO TAB 100MG	2	ST
INCRETIN MIMETIC AGENTS		
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	1	QL (3 pens every 25 days)

Drug Name	Drug Tier	Requirements/Limits
MOUNJARO INJ 2.5/0.5	2	PA, QL (4 pens every 21 days)
MOUNJARO INJ 5MG/0.5	2	PA, QL (4 pens every 21 days)
MOUNJARO INJ 7.5/0.5	2	PA, QL (4 pens every 21 days)
MOUNJARO INJ 10MG/0.5	2	PA, QL (4 pens every 21 days)
MOUNJARO INJ 12.5/0.5	2	PA, QL (4 pens every 21 days)
MOUNJARO INJ 15MG/0.5	2	PA, QL (4 pens every 21 days)
OZEMPIC INJ 2MG/3ML	2	PA, QL (1 pen every 21 days)
OZEMPIC INJ 4MG/3ML	2	PA, QL (1 pen every 21 days)
OZEMPIC INJ 8MG/3ML	2	PA, QL (1 pen every 21 days)
RYBELSUS TAB 1.5MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 3MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 4MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 7MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 9MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 14MG	2	PA, QL (30 tabs every 25 days)
TRULICITY INJ 0.75/0.5	2	PA, QL (4 pens every 21 days)
TRULICITY INJ 1.5/0.5	2	PA, QL (4 pens every 21 days)
TRULICITY INJ 3/0.5	2	PA, QL (4 pens every 21 days)
TRULICITY INJ 4.5/0.5	2	PA, QL (4 pens every 21 days)
INSULIN		
FIASP FLEX INJ TOUCH	2	
FIASP INJ 100/ML	2	
FIASP PENFIL INJ U-100	2	
FIASP PMPCRT INJ U-100	2	

Drug Name	Drug Tier	Requirements/Limits
GLARGIN YFGN INJ 100U/ML	2	
GLARGIN YFGN INJ 100U/ML	2	
GLARGIN YFGN SOL 100U/ML	2	
HUMULIN R INJ U-500	2	
NOVOLIN INJ 70/30	2	OTC
NOVOLIN INJ 70/30 FP	2	OTC
NOVOLIN N INJ 100 UNIT	2	OTC
NOVOLIN N INJ U-100	2	OTC
NOVOLIN R INJ 100 UNIT	2	OTC
NOVOLIN R INJ U-100	2	OTC
NOVOLOG INJ 100/ML	2	
NOVOLOG INJ FLEXPEN	2	
NOVOLOG INJ PENFILL	2	
NOVOLOG MIX INJ 70/30	2	
NOVOLOG MIX INJ FLEXPEN	2	
TRESIBA FLEX INJ 100UNIT	2	
TRESIBA FLEX INJ 200UNIT	2	
TRESIBA INJ 100UNIT	2	
INSULIN SENSITIZING AGENTS		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	
MEGLITINIDE ANALOGUES		
<i>nateglinide tab 60 mg</i>	1	
<i>nateglinide tab 120 mg</i>	1	
<i>repaglinide tab 0.5 mg</i>	1	
<i>repaglinide tab 1 mg</i>	1	
<i>repaglinide tab 2 mg</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
JARDIANCE TAB 10MG	2	ST
JARDIANCE TAB 25MG	2	ST
SULFONYLUREAS		
<i>glimepiride tab 1 mg</i>	1	
<i>glimepiride tab 2 mg</i>	1	
<i>glimepiride tab 4 mg</i>	1	
<i>glipizide tab 5 mg</i>	1	
<i>glipizide tab 10 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glyburide micronized tab 1.5 mg</i>	1	
<i>glyburide micronized tab 3 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide micronized tab 6 mg</i>	1	
<i>glyburide tab 1.25 mg</i>	1	
<i>glyburide tab 2.5 mg</i>	1	
<i>glyburide tab 5 mg</i>	1	

ANTIARRHEAL/PROBIOTIC AGENTS**ANTIPERISTALTIC AGENTS**

<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	1	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
<i>opium tincture 1% (10 mg/ml) (morphine equiv)</i>	1	

ANTIDOTES AND SPECIFIC ANTAGONISTS**ANTIDOTES - CHELATING AGENTS**

<i>deferasirox granules packet 90 mg</i>	3	PA
<i>deferasirox granules packet 180 mg</i>	3	PA
<i>deferasirox granules packet 360 mg</i>	3	PA
<i>deferasirox tab 90 mg</i>	3	PA
<i>deferasirox tab 180 mg</i>	3	PA
<i>deferasirox tab 360 mg</i>	3	PA
<i>deferasirox tab for oral susp 125 mg</i>	3	PA
<i>deferasirox tab for oral susp 250 mg</i>	3	PA
<i>deferasirox tab for oral susp 500 mg</i>	3	PA
<i>deferiprone tab 500 mg</i>	3	PA
<i>deferiprone tab 1000 mg</i>	3	PA

ANTIDOTES AND SPECIFIC ANTAGONISTS

VISTOGARD PAK 10GM	4	QL (20 packets every 5 days)
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OPIOID ANTAGONISTS

<i>naloxone hcl inj 0.4 mg/ml</i>	1	
<i>naloxone hcl inj 4 mg/10ml</i>	1	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	
<i>naltrexone hcl tab 50 mg</i>	0	

ANTIEMETICS**5-HT₃ RECEPTOR ANTAGONISTS**

<i>granisetron hcl tab 1 mg</i>	1	QL (12 ea every 21 days)
<i>granisetron hcl tab 1 mg</i>	1	QL (12 tabs every 21 days)
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	
<i>ondansetron hcl tab 4 mg</i>	1	
<i>ondansetron hcl tab 8 mg</i>	1	
<i>ondansetron hcl tab 24 mg</i>	1	
<i>ondansetron orally disintegrating tab 4 mg</i>	1	
<i>ondansetron orally disintegrating tab 8 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANTIEMETICS - ANTICHOLINERGIC		
meclizine hcl tab 50 mg	1	
scopolamine td patch 72hr 1 mg/3days	1	
trimethobenzamide hcl cap 300 mg	1	
ANTIEMETICS - MISCELLANEOUS		
doxylamine-pyridoxine tab delayed release 10-10 mg	1	
dronabinol cap 2.5 mg	1	
dronabinol cap 5 mg	1	
dronabinol cap 10 mg	1	
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant capsule 40 mg	1	QL (3 caps every 180 days)
aprepitant capsule 80 mg	1	QL (4 ea every 21 days)
aprepitant capsule 125 mg	1	QL (2 caps every 21 days)
aprepitant capsule therapy pack 80 & 125 mg	1	QL (6 tabs every 21 days)
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
caspofungin acetate for iv soln 50 mg	1	
caspofungin acetate for iv soln 70 mg	1	
micafungin sodium for iv soln 50 mg	1	
micafungin sodium for iv soln 100 mg	1	
ANTIFUNGALS		
amphotericin b liposome iv for susp 50 mg	1	
flucytosine cap 250 mg	1	
griseofulvin microsize susp 125 mg/5ml	1	
griseofulvin microsize tab 500 mg	1	
griseofulvin ultramicrosize tab 125 mg	1	
griseofulvin ultramicrosize tab 165 mg	1	
griseofulvin ultramicrosize tab 250 mg	1	
nystatin tab 500000 unit	1	
terbinafine hcl tab 250 mg	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
fluconazole for susp 10 mg/ml	1	
fluconazole for susp 40 mg/ml	1	
fluconazole tab 50 mg	1	
fluconazole tab 100 mg	1	
fluconazole tab 150 mg	1	
fluconazole tab 200 mg	1	
itraconazole cap 100 mg	1	
itraconazole oral soln 10 mg/ml	1	
ketoconazole tab 200 mg	1	
posaconazole susp 40 mg/ml	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>voriconazole for inj 200 mg</i>	1	PA
<i>voriconazole for susp 40 mg/ml</i>	1	PA
<i>voriconazole tab 50 mg</i>	1	PA
<i>voriconazole tab 200 mg</i>	1	PA

ANTIHIISTAMINES**ANTIHIISTAMINES - ETHANOLAMINES**

<i>carbinoxamine maleate extended release susp 4 mg/5ml</i>	1	
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	1	
<i>clemastine fumarate tab 2.68 mg</i>	1	

ANTIHIISTAMINES - NON-SEDATING

<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
<i>desloratadine tab 5 mg</i>	1	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	1	
<i>desloratadine tab orally disintegrating 5 mg</i>	1	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	

ANTIHIISTAMINES - PHENOTHIAZINES

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

ANTIHIISTAMINES - PIPERIDINES

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

ANTIHYPERLIPIDEMICS**ANTIHYPERLIPIDEMICS - COMBINATIONS**

<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	

ANTIHYPERLIPIDEMICS - MISC.

<i>icosapent ethyl cap 0.5 gm</i>	1	PA
<i>icosapent ethyl cap 1 gm</i>	1	PA
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
BILE ACID SEQUESTRANTS		
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>cholestyramine light powder packets 4 gm</i>	1	
<i>cholestyramine powder 4 gm/dose</i>	1	
<i>cholestyramine powder packets 4 gm</i>	1	
<i>colesevelam hcl packet for susp 3.75 gm</i>	1	
<i>colesevelam hcl tab 625 mg</i>	1	
<i>colestipol hcl granule packets 5 gm</i>	1	
<i>colestipol hcl granules 5 gm</i>	1	
<i>colestipol hcl tab 1 gm</i>	1	
FIBRIC ACID DERIVATIVES		
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	
<i>fenofibrate cap 150 mg</i>	1	
<i>fenofibrate micronized cap 43 mg</i>	1	
<i>fenofibrate micronized cap 67 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
<i>fenofibrate tab 48 mg</i>	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	
<i>fenofibrate tab 160 mg</i>	1	
<i>fenofibric acid tab 35 mg</i>	1	
<i>fenofibric acid tab 105 mg</i>	1	
<i>gemfibrozil tab 600 mg</i>	1	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	0	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	0	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	0	\$0 copay for members age 40 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin tab 10 mg</i>	0	\$0 copay for members age 40 through 75
<i>lovastatin tab 20 mg</i>	0	\$0 copay for members age 40 through 75
<i>lovastatin tab 40 mg</i>	0	\$0 copay for members age 40 through 75
<i>pitavastatin calcium tab 1 mg</i>	0	
<i>pitavastatin calcium tab 2 mg</i>	0	
<i>pitavastatin calcium tab 4 mg</i>	0	
<i>pravastatin sodium tab 10 mg</i>	0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 20 mg</i>	0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 40 mg</i>	0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 80 mg</i>	0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 5 mg</i>	0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 10 mg</i>	0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	0	\$0 copay for members age 40 through 75
<i>simvastatin tab 10 mg</i>	0	\$0 copay for members age 40 through 75
<i>simvastatin tab 20 mg</i>	0	\$0 copay for members age 40 through 75
<i>simvastatin tab 40 mg</i>	0	\$0 copay for members age 40 through 75
<i>simvastatin tab 80 mg</i>	1	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	
NICOTINIC ACID DERIVATIVES		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
REPATHA INJ 140MG/ML	2	PA, QL (3 syringes every 28 days)
REPATHA PUSH INJ 420/3.5	2	PA, QL (1 cartridge every 28 days)

Drug Name	Drug Tier	Requirements/Limits
REPATHA SURE INJ 140MG/ML	2	PA, QL (3 pens every 28 days)

ANTIHYPERTENSIVES**ACE INHIBITORS**

<i>benazepril hcl tab 5 mg</i>	1
<i>benazepril hcl tab 10 mg</i>	1
<i>benazepril hcl tab 20 mg</i>	1
<i>benazepril hcl tab 40 mg</i>	1
<i>captopril tab 12.5 mg</i>	1
<i>captopril tab 25 mg</i>	1
<i>captopril tab 50 mg</i>	1
<i>captopril tab 100 mg</i>	1
<i>enalapril maleate oral soln 1 mg/ml</i>	1
<i>enalapril maleate tab 2.5 mg</i>	1
<i>enalapril maleate tab 5 mg</i>	1
<i>enalapril maleate tab 10 mg</i>	1
<i>enalapril maleate tab 20 mg</i>	1
<i>fosinopril sodium tab 10 mg</i>	1
<i>fosinopril sodium tab 20 mg</i>	1
<i>fosinopril sodium tab 40 mg</i>	1
<i>lisinopril tab 2.5 mg</i>	1
<i>lisinopril tab 5 mg</i>	1
<i>lisinopril tab 10 mg</i>	1
<i>lisinopril tab 20 mg</i>	1
<i>lisinopril tab 30 mg</i>	1
<i>lisinopril tab 40 mg</i>	1
<i>moexipril hcl tab 7.5 mg</i>	1
<i>moexipril hcl tab 15 mg</i>	1
<i>perindopril erbumine tab 2 mg</i>	1
<i>perindopril erbumine tab 4 mg</i>	1
<i>perindopril erbumine tab 8 mg</i>	1
<i>quinapril hcl tab 5 mg</i>	1
<i>quinapril hcl tab 10 mg</i>	1
<i>quinapril hcl tab 20 mg</i>	1
<i>quinapril hcl tab 40 mg</i>	1
<i>ramipril cap 1.25 mg</i>	1
<i>ramipril cap 2.5 mg</i>	1
<i>ramipril cap 5 mg</i>	1
<i>ramipril cap 10 mg</i>	1
<i>trandolapril tab 1 mg</i>	1
<i>trandolapril tab 2 mg</i>	1
<i>trandolapril tab 4 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metyrosine cap 250 mg</i>	3	PA, QL (16 caps every 1 day)
<i>phenoxybenzamine hcl cap 10 mg</i>	1	PA
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	1	
<i>candesartan cilexetil tab 8 mg</i>	1	
<i>candesartan cilexetil tab 16 mg</i>	1	
<i>candesartan cilexetil tab 32 mg</i>	1	
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	1	
<i>olmesartan medoxomil tab 20 mg</i>	1	
<i>olmesartan medoxomil tab 40 mg</i>	1	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan oral soln 4 mg/ml</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine hcl tab 0.1 mg</i>	1	
<i>clonidine hcl tab 0.2 mg</i>	1	
<i>clonidine hcl tab 0.3 mg</i>	1	
<i>clonidine tab er 24hr 0.17 mg</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>methyldopa tab 250 mg</i>	1	
<i>methyldopa tab 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
metoprolol & hydrochlorothiazide tab 100-50 mg	1	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	1	
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	1	
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	1	
quinapril-hydrochlorothiazide tab 10-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-25 mg	1	
telmisartan-amlodipine tab 40-5 mg	1	
telmisartan-amlodipine tab 40-10 mg	1	
telmisartan-amlodipine tab 80-5 mg	1	
telmisartan-amlodipine tab 80-10 mg	1	
telmisartan-hydrochlorothiazide tab 40-12.5 mg	1	
telmisartan-hydrochlorothiazide tab 80-12.5 mg	1	
telmisartan-hydrochlorothiazide tab 80-25 mg	1	
trandolapril-verapamil hcl tab er 1-240 mg	1	
trandolapril-verapamil hcl tab er 2-180 mg	1	
trandolapril-verapamil hcl tab er 2-240 mg	1	
trandolapril-verapamil hcl tab er 4-240 mg	1	
valsartan-hydrochlorothiazide tab 80-12.5 mg	1	
valsartan-hydrochlorothiazide tab 160-12.5 mg	1	
valsartan-hydrochlorothiazide tab 160-25 mg	1	
valsartan-hydrochlorothiazide tab 320-12.5 mg	1	
valsartan-hydrochlorothiazide tab 320-25 mg	1	
DIRECT RENIN INHIBITORS		
aliskiren fumarate tab 150 mg (base equivalent)	1	
aliskiren fumarate tab 300 mg (base equivalent)	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone tab 25 mg	1	
eplerenone tab 50 mg	1	

Drug Name	Drug Tier	Requirements/Limits
VASODILATORS		
hydralazine hcl tab 10 mg	1	
hydralazine hcl tab 25 mg	1	
hydralazine hcl tab 50 mg	1	
hydralazine hcl tab 100 mg	1	
minoxidil tab 2.5 mg	1	
minoxidil tab 10 mg	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone-proguanil hcl tab 62.5-25 mg	1	
atovaquone-proguanil hcl tab 250-100 mg	1	
ANTIMALARIALS		
chloroquine phosphate tab 250 mg	1	
chloroquine phosphate tab 500 mg	1	
hydroxychloroquine sulfate tab 200 mg	1	
mefloquine hcl tab 250 mg	1	
primaquine phosphate tab 26.3 mg (15 mg base)	1	
pyrimethamine tab 25 mg	1	PA
quinine sulfate cap 324 mg	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
pyridostigmine bromide oral soln 60 mg/5ml	1	
pyridostigmine bromide tab 30 mg	1	
pyridostigmine bromide tab 60 mg	1	
pyridostigmine bromide tab er 180 mg	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
cycloserine cap 250 mg	1	
ethambutol hcl tab 100 mg	1	
ethambutol hcl tab 400 mg	1	
isoniazid syrup 50 mg/5ml	1	
isoniazid tab 100 mg	1	
isoniazid tab 300 mg	1	
PRIFTIN TAB 150MG	2	
pyrazinamide tab 500 mg	1	
rifabutin cap 150 mg	1	
rifampin cap 150 mg	1	
rifampin cap 300 mg	1	
TRECATOR TAB 250MG	2	

Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPH TAB 25MG	0	
CYCLOPHOSPH TAB 50MG	0	
cyclophosphamide cap 25 mg	0	
cyclophosphamide cap 50 mg	0	
LEUKERAN TAB 2MG	0	
MYLERAN TAB 2MG	0	
temozolomide cap 5 mg	0	PA
temozolomide cap 20 mg	0	PA
temozolomide cap 100 mg	0	PA
temozolomide cap 140 mg	0	PA
temozolomide cap 180 mg	0	PA
temozolomide cap 250 mg	0	PA
ANTIMETABOLITES		
capecitabine tab 150 mg	0	PA
capecitabine tab 500 mg	0	PA
mercaptopurine susp 2000 mg/100ml (20 mg/ml)	0	PA
mercaptopurine tab 50 mg	0	
methotrexate sodium for inj 1 gm	1	
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	1	
methotrexate sodium inj 250 mg/10ml (25 mg/ml)	1	
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)	1	
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)	1	
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	1	
methotrexate sodium tab 2.5 mg (base equiv)	0	
ONUREG TAB 200MG	0	PA, QL (14 tabs every 21 days)
ONUREG TAB 300MG	0	PA, QL (14 tabs every 21 days)
TABLOID TAB 40MG	0	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
INLYTA TAB 1MG	0	PA, QL (8 tabs every 1 day)
INLYTA TAB 5MG	0	PA, QL (4 tabs every 1 day)
LENVIMA CAP 4MG	0	PA, QL (1 ea every 1 day)
LENVIMA CAP 8 MG	0	PA, QL (2 ea every 1 day)
LENVIMA CAP 10 MG	0	PA, QL (1 ea every 1 day)

Drug Name	Drug Tier	Requirements/Limits
LENVIMA CAP 12MG	0	PA, QL (3 ea every 1 day)
LENVIMA CAP 14 MG	0	PA, QL (2 ea every 1 day)
LENVIMA CAP 18 MG	0	PA, QL (3 ea every 1 day)
LENVIMA CAP 20 MG	0	PA, QL (2 ea every 1 day)
LENVIMA CAP 24 MG	0	PA, QL (3 ea every 1 day)
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA TAB 50MG	0	PA, QL (4 tabs every 1 day)
TUKYSA TAB 150MG	0	PA, QL (4 tabs every 1 day)
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	0	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 50MG	0	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 100MG	0	PA, QL (6 tabs every 1 day)
VENCLEXTA TAB START PK	0	PA, QL (1 pack every 28 days)
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	0	PA, QL (2 tabs every 1 day)
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	0	PA, QL (1 tab every 1 day)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	0	PA, QL (1 tab every 1 day)
<i>gefitinib tab 250 mg</i>	0	PA, QL (1 tab every 1 day)
GILOTRIF TAB 20MG	0	PA, QL (1 tab every 1 day)
GILOTRIF TAB 30MG	0	PA, QL (1 tab every 1 day)
GILOTRIF TAB 40MG	0	PA, QL (1 tab every 1 day)
TAGRISO TAB 40MG	0	PA, QL (1 tab every 1 day)
TAGRISO TAB 80MG	0	PA, QL (1 tab every 1 day)
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
ERIVEDGE CAP 150MG	0	PA, QL (1 cap every 1 day)
ODOMZO CAP 200MG	0	PA, QL (1 cap every 1 day)
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	0	PA, QL (4 tabs every 1 day)
<i>abiraterone acetate tab 500 mg</i>	0	PA, QL (2 tabs every 1 day)
<i>anastrozole tab 1 mg</i>	0	
<i>bicalutamide tab 50 mg</i>	0	
EMCYT CAP 140MG	0	
ERLEADA TAB 60MG	0	PA, QL (4 tabs every 1 day)
ERLEADA TAB 240MG	0	PA, QL (1 tab every 1 day)
<i>exemestane tab 25 mg</i>	0	
<i>letrozole tab 2.5 mg</i>	0	
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	3	PA
LYSODREN TAB 500MG	0	
<i>megestrol acetate susp 40 mg/ml</i>	0	
<i>megestrol acetate tab 20 mg</i>	0	
<i>megestrol acetate tab 40 mg</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>nilutamide tab 150 mg</i>	0	
NUBEQA TAB 300MG	0	PA, QL (4 tabs every 1 day)
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	0	\$0 copay for women > 35 years for the primary prevention of breast cancer
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	0	\$0 copay for women > 35 years for the primary prevention of breast cancer
<i>toremifene citrate tab 60 mg (base equivalent)</i>	0	
XTANDI CAP 40MG	0	PA, QL (4 caps every 1 day)
XTANDI TAB 40MG	0	PA, QL (4 tabs every 1 day)
XTANDI TAB 80MG	0	PA, QL (2 tabs every 1 day)
YONSA TAB 125MG	0	PA, QL (4 tabs every 1 day)
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	0	PA, QL (42 caps every 28 days)
POMALYST CAP 2MG	0	PA, QL (42 caps every 28 days)
POMALYST CAP 3MG	0	PA, QL (42 caps every 28 days)
POMALYST CAP 4MG	0	PA, QL (42 caps every 28 days)
ANTINEOPLASTIC COMBINATIONS		
KISQALI 200 PAK FEMARA	0	PA, QL (49 tabs every 28 days)
KISQALI 400 PAK FEMARA	0	PA, QL (70 tabs every 28 days)
KISQALI 600 PAK FEMARA	0	PA, QL (91 tabs every 28 days)
LONSURF TAB 15-6.14	0	PA, QL (100 tabs every 28 days)
LONSURF TAB 20-8.19	0	PA, QL (80 tabs every 28 days)
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA CAP 150MG	0	PA, QL (8 caps every 1 day)
ALUNBRIG PAK	0	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 30MG	0	PA, QL (4 tabs every 1 day)
ALUNBRIG TAB 90MG	0	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 180MG	0	PA, QL (1 tab every 1 day)
BOSULIF CAP 50MG	0	PA, QL (1 cap every 1 day)

Drug Name	Drug Tier	Requirements/Limits
BOSULIF CAP 100MG	0	PA, QL (10 caps every 1 day)
BOSULIF TAB 100MG	0	PA, QL (3 tabs every 1 day)
BOSULIF TAB 400MG	0	PA, QL (1 tab every 1 day)
BOSULIF TAB 500MG	0	PA, QL (1 tab every 1 day)
CABOMETYX TAB 20MG	0	PA, QL (1 tab every 1 day)
CABOMETYX TAB 40MG	0	PA, QL (1 tab every 1 day)
CABOMETYX TAB 60MG	0	PA, QL (1 tab every 1 day)
CALQUENCE TAB 100MG	0	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 100MG	0	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 300MG	0	PA, QL (1 tab every 1 day)
COPIKTRA CAP 15MG	0	PA, QL (2 caps every 1 day)
COPIKTRA CAP 25MG	0	PA, QL (2 caps every 1 day)
<i>dasatinib tab 20 mg</i>	0	PA, QL (3 tabs every 1 day)
<i>dasatinib tab 50 mg</i>	0	PA, QL (1 tab every 1 day)
<i>dasatinib tab 70 mg</i>	0	PA, QL (1 tab every 1 day)
<i>dasatinib tab 80 mg</i>	0	PA, QL (1 tab every 1 day)
<i>dasatinib tab 100 mg</i>	0	PA, QL (1 tab every 1 day)
<i>dasatinib tab 140 mg</i>	0	PA, QL (1 tab every 1 day)
<i>everolimus tab 2.5 mg</i>	0	PA, QL (1 tab every 1 day)
<i>everolimus tab 5 mg</i>	0	PA, QL (1 tab every 1 day)
<i>everolimus tab 7.5 mg</i>	0	PA, QL (1 tab every 1 day)
<i>everolimus tab 10 mg</i>	0	PA, QL (1 tab every 1 day)
<i>everolimus tab for oral susp 2 mg</i>	0	PA, QL (2 ea every 1 day)
<i>everolimus tab for oral susp 3 mg</i>	0	PA, QL (3 ea every 1 day)
<i>everolimus tab for oral susp 5 mg</i>	0	PA, QL (2 ea every 1 day)
IBRANCE CAP 75MG	0	PA, QL (1 cap every 1 day)
IBRANCE CAP 100MG	0	PA, QL (1 cap every 1 day)
IBRANCE CAP 125MG	0	PA, QL (1 cap every 1 day)
IBRANCE TAB 75MG	0	PA, QL (42 tabs every 28 days)
IBRANCE TAB 100MG	0	PA, QL (42 tabs every 28 days)
IBRANCE TAB 125MG	0	PA, QL (42 tabs every 28 days)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	0	PA, QL (4 tabs every 1 day)
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	0	PA, QL (2 tabs every 1 day)
IMBRUVICA CAP 70MG	0	PA, QL (1 cap every 1 day)
IMBRUVICA CAP 140MG	0	PA, QL (3 caps every 1 day)
IMBRUVICA SUS 70MG/ML	0	PA, QL (6 mL every 1 day)
IMBRUVICA TAB 140MG	0	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 280MG	0	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 420MG	0	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
JAKAFI TAB 5MG	0	PA, QL (2 tabs every 1 day)
JAKAFI TAB 10MG	0	PA, QL (2 tabs every 1 day)
JAKAFI TAB 15MG	0	PA, QL (2 tabs every 1 day)
JAKAFI TAB 20MG	0	PA, QL (2 tabs every 1 day)
JAKAFI TAB 25MG	0	PA, QL (2 tabs every 1 day)
KISQALI TAB 200DOSE	0	PA, QL (42 tabs every 28 days)
KISQALI TAB 400DOSE	0	PA, QL (84 tabs every 28 days)
KISQALI TAB 600DOSE	0	PA, QL (126 tabs every 28 days)
KOSELUGO CAP 10MG	0	PA, QL (8 caps every 1 day)
KOSELUGO CAP 25MG	0	PA, QL (4 caps every 1 day)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	0	PA, QL (6 tabs every 1 day)
LORBRENA TAB 25MG	0	PA, QL (3 tabs every 1 day)
LORBRENA TAB 100MG	0	PA, QL (1 tab every 1 day)
LUMAKRAS TAB 120MG	0	PA, QL (8 tabs every 1 day)
LUMAKRAS TAB 240MG	0	PA, QL (4 tabs every 1 day)
LUMAKRAS TAB 320MG	0	PA, QL (3 tabs every 1 day)
LYNPARZA TAB 100MG	0	PA, QL (4 tabs every 1 day)
LYNPARZA TAB 150MG	0	PA, QL (4 tabs every 1 day)
MEKINIST SOL 0.05/ML	0	PA, QL (12 bottles per 28 days)
MEKINIST TAB 0.5MG	0	PA, QL (3 tabs every 1 day)
MEKINIST TAB 2MG	0	PA, QL (1 tab every 1 day)
NERLYNX TAB 40MG	0	PA, QL (6 tabs every 1 day)
NINLARO CAP 2.3MG	0	PA, QL (6 ea every 28 days)
NINLARO CAP 3MG	0	PA, QL (6 ea every 28 days)
NINLARO CAP 4MG	0	PA, QL (6 ea every 28 days)
<i>pazopanib hcl tab 200 mg (base equiv)</i>	0	PA, QL (4 tabs every 1 day)
PIQRAY 200MG TAB DOSE	0	PA, QL (1 tab every 1 day)
PIQRAY 250MG TAB DOSE	0	PA, QL (2 tabs every 1 day)
PIQRAY 300MG TAB DOSE	0	PA, QL (2 tabs every 1 day)
RUBRACA TAB 200MG	0	PA, QL (4 tabs every 1 day)
RUBRACA TAB 250MG	0	PA, QL (4 tabs every 1 day)
RUBRACA TAB 300MG	0	PA, QL (4 tabs every 1 day)
RYDAPT CAP 25MG	0	PA, QL (8 caps every 1 day)
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	0	PA, QL (4 tabs every 1 day)
STIVARGA TAB 40MG	0	PA, QL (3 tabs every 1 day)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	0	PA, QL (1 cap every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>sunitinib malate cap 25 mg (base equivalent)</i>	0	PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	0	PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	0	PA, QL (1 cap every 1 day)
TAFINLAR CAP 50MG	0	PA, QL (4 caps every 1 day)
TAFINLAR CAP 75MG	0	PA, QL (4 caps every 1 day)
TAFINLAR TAB 10MG	0	PA, QL (30 tabs every 1 day)
VERZENIO TAB 50MG	0	PA, QL (2 tabs every 1 day)
VERZENIO TAB 100MG	0	PA, QL (2 tabs every 1 day)
VERZENIO TAB 150MG	0	PA, QL (2 tabs every 1 day)
VERZENIO TAB 200MG	0	PA, QL (2 tabs every 1 day)
VITRAKVI CAP 25MG	0	PA, QL (6 caps every 1 day)
VITRAKVI CAP 100MG	0	PA, QL (2 caps every 1 day)
VITRAKVI SOL 20MG/ML	0	PA, QL (10 mL every 1 day)
XALKORI CAP 20MG	0	PA, QL (4 caps every 1 day)
XALKORI CAP 50MG	0	PA, QL (4 caps every 1 day)
XALKORI CAP 150MG	0	PA, QL (6 caps every 1 day)
XOSPATA TAB 40MG	0	PA, QL (3 tabs every 1 day)
ZEJULA TAB 100MG	0	PA, QL (1 tab every 1 day)
ZEJULA TAB 200MG	0	PA, QL (1 tab every 1 day)
ZEJULA TAB 300MG	0	PA, QL (1 tab every 1 day)
ZOLINZA CAP 100MG	0	PA, QL (4 caps every 1 day)
ANTINEOPLASTICS MISC.		
<i>bexarotene cap 75 mg</i>	0	PA
<i>hydroxyurea cap 500 mg</i>	0	
MATULANE CAP 50MG	0	
<i>tretinoin cap 10 mg</i>	0	
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
<i>leucovorin calcium tab 5 mg</i>	0	
<i>leucovorin calcium tab 10 mg</i>	0	
<i>leucovorin calcium tab 15 mg</i>	0	
<i>leucovorin calcium tab 25 mg</i>	0	
<i>mesna tab 400 mg</i>	0	
MITOTIC INHIBITORS		
<i>etoposide cap 50 mg</i>	0	
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa tab 25 mg</i>	1	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone tab 200 mg</i>	1	
<i>tolcapone tab 100 mg</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	3	PA, QL (20 cartridges every 28 days)
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<i>INBRIJA CAP 42MG</i>	4	PA, QL (10 caps every 1 day)
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
<i>lithium oral solution 8 meq/5ml</i>	1	
ANTIPSYCHOTICS - MISC.		
<i>lurasidone hcl tab 20 mg</i>	1	
<i>lurasidone hcl tab 40 mg</i>	1	
<i>lurasidone hcl tab 60 mg</i>	1	
<i>lurasidone hcl tab 80 mg</i>	1	
<i>lurasidone hcl tab 120 mg</i>	1	
VRAYLAR CAP 1.5-3MG	2	
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	
BENZISOXAZOLES		
<i>paliperidone tab er 24hr 1.5 mg</i>	1	
<i>paliperidone tab er 24hr 3 mg</i>	1	
<i>paliperidone tab er 24hr 6 mg</i>	1	
<i>paliperidone tab er 24hr 9 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 25 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 50 mg</i>	1	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	
<i>risperidone tab 4 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
BUTYROPHENONES		
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	
<i>haloperidol lactate inj 5 mg/ml</i>	1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
DIBENZAPINES		
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	
<i>clozapine orally disintegrating tab 25 mg</i>	1	
<i>clozapine orally disintegrating tab 100 mg</i>	1	
<i>clozapine orally disintegrating tab 150 mg</i>	1	
<i>clozapine orally disintegrating tab 200 mg</i>	1	
<i>clozapine tab 25 mg</i>	1	
<i>clozapine tab 50 mg</i>	1	
<i>clozapine tab 100 mg</i>	1	
<i>clozapine tab 200 mg</i>	1	
<i>loxapine succinate cap 5 mg</i>	1	
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
<i>olanzapine for im inj 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	
<i>olanzapine orally disintegrating tab 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 15 mg</i>	1	
<i>olanzapine orally disintegrating tab 20 mg</i>	1	
<i>olanzapine tab 2.5 mg</i>	1	
<i>olanzapine tab 5 mg</i>	1	
<i>olanzapine tab 7.5 mg</i>	1	
<i>olanzapine tab 10 mg</i>	1	
<i>olanzapine tab 15 mg</i>	1	
<i>olanzapine tab 20 mg</i>	1	
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tab 150 mg</i>	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
DIHYDROINDOLONES		
<i>molindone hcl tab 5 mg</i>	1	
<i>molindone hcl tab 10 mg</i>	1	
<i>molindone hcl tab 25 mg</i>	1	
PHENOTHIAZINES		
<i>chlorpromazine hcl inj 25 mg/ml</i>	1	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	1	
<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>chlorpromazine hcl tab 25 mg</i>	1	
<i>chlorpromazine hcl tab 50 mg</i>	1	
<i>chlorpromazine hcl tab 100 mg</i>	1	
<i>chlorpromazine hcl tab 200 mg</i>	1	
<i>fluphenazine decanoate inj 25 mg/ml</i>	1	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
<i>fluphenazine hcl tab 2.5 mg</i>	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	
<i>perphenazine tab 16 mg</i>	1	
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	1	
<i>thioridazine hcl tab 10 mg</i>	1	
<i>thioridazine hcl tab 25 mg</i>	1	
<i>thioridazine hcl tab 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>thioridazine hcl tab 100 mg</i>	1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	
QUINOLINONE DERIVATIVES		
<i>aripiprazole oral solution 1 mg/ml</i>	1	
<i>aripiprazole orally disintegrating tab 10 mg</i>	1	
<i>aripiprazole orally disintegrating tab 15 mg</i>	1	
<i>aripiprazole tab 2 mg</i>	1	
<i>aripiprazole tab 5 mg</i>	1	
<i>aripiprazole tab 10 mg</i>	1	
<i>aripiprazole tab 15 mg</i>	1	
<i>aripiprazole tab 20 mg</i>	1	
<i>aripiprazole tab 30 mg</i>	1	
ARISTADA INJ 441MG/1.	2	
ARISTADA INJ 662MG/2	2	
ARISTADA INJ 882MG/3	2	
ARISTADA INJ 1064MG	2	
ARISTADA INJ INITIO	2	
THIOXANTHENES		
<i>thiothixene cap 1 mg</i>	1	
<i>thiothixene cap 2 mg</i>	1	
<i>thiothixene cap 5 mg</i>	1	
<i>thiothixene cap 10 mg</i>	1	
ANTISEPTICS & DISINFECTANTS		
ANTISEPTICS & DISINFECTANTS		
<i>formaldehyde solution 10%</i>	1	
<i>hydrogen peroxide soln 30%</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	QL (30 mL every 1 day)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	QL (2 tabs every 1 day)
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	QL (1 tab every 1 day)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	QL (1 cap every 1 day)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	QL (2 caps every 1 day)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	QL (1 cap every 1 day)
BIKTARVY TAB	2	QL (1 tab every 1 day)
CIMDUO TAB 300-300	2	QL (1 tab every 1 day)
<i>darunavir tab 600 mg</i>	1	QL (2 tabs every 1 day)
<i>darunavir tab 800 mg</i>	1	QL (1 tab every 1 day)
DESCOVY TAB 120-15MG	2	QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
DESCOVY TAB 200/25MG	2	QL (1 tab every 1 day); \$0 copay for pre exposure prophylaxis
DOVATO TAB 50-300MG	2	QL (1 tab every 1 day)
EDURANT TAB 25MG	2	QL (2 tabs every 1 day)
<i>efavirenz cap 50 mg</i>	1	QL (3 caps every 1 day)
<i>efavirenz cap 200 mg</i>	1	QL (3 caps every 1 day)
<i>efavirenz tab 600 mg</i>	1	QL (1 tab every 1 day)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	QL (1 tab every 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	QL (1 tab every 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	QL (1 tab every 1 day)
<i>emtricitabine caps 200 mg</i>	1	QL (1 cap every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	QL (1 tab every 1 day); \$0 copay for pre exposure prophylaxis
EMTRIVA SOL 10MG/ML	2	QL (680 mL every 28 days)
<i>etravirine tab 100 mg</i>	1	QL (4 tabs every 1 day)
<i>etravirine tab 200 mg</i>	1	QL (2 tabs every 1 day)
EVOTAZ TAB 300-150	2	QL (1 tab every 1 day)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	QL (4 tabs every 1 day)
FUZEON INJ 90MG	2	PA, QL (2 vials every 1 day)
GENVOYA TAB	2	QL (1 tab every 1 day)
INTELENCE TAB 25MG	2	QL (4 tabs every 1 day)
ISENTRESS CHW 25MG	2	QL (6 tabs every 1 day)
ISENTRESS CHW 100MG	2	QL (6 tabs every 1 day)
ISENTRESS HD TAB 600MG	2	QL (2 tabs every 1 day)
ISENTRESS POW 100MG	2	QL (2 packets every 1 day)
ISENTRESS TAB 400MG	2	QL (4 tabs every 1 day)
JULUCA TAB 50-25MG	2	QL (1 tab every 1 day)
<i>lamivudine oral soln 10 mg/ml</i>	1	QL (32 mL every 1 day)
<i>lamivudine tab 150 mg</i>	1	QL (2 tabs every 1 day)
<i>lamivudine tab 300 mg</i>	1	QL (1 tab every 1 day)
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	QL (16 mL every 1 day)
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	QL (10 tabs every 1 day)
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	QL (4 tabs every 1 day)
<i>maraviroc tab 150 mg</i>	1	QL (2 tabs every 1 day)
<i>maraviroc tab 300 mg</i>	1	QL (4 tabs every 1 day)
<i>nevirapine susp 50 mg/5ml</i>	1	QL (40 mL every 1 day)
<i>nevirapine tab 200 mg</i>	1	QL (2 tabs every 1 day)
<i>nevirapine tab er 24hr 100 mg</i>	1	QL (3 tabs every 1 day)
<i>nevirapine tab er 24hr 400 mg</i>	1	QL (1 tab every 1 day)
NORVIR CAP 100MG	2	
NORVIR POW 100MG	2	QL (12 packets every 1 day)
ODEFSEY TAB	2	QL (1 tab every 1 day)
PREZCOBIX TAB 800-150	2	QL (1 tab every 1 day)
PREZISTA SUS 100MG/ML	2	QL (400 mL per 30 days)
PREZISTA TAB 75MG	2	QL (10 tabs every 1 day)
PREZISTA TAB 150MG	2	QL (6 tabs every 1 day)
REYATAZ POW 50MG	2	QL (6 packets every 1 day)
<i>ritonavir tab 100 mg</i>	1	QL (12 tabs every 1 day)
RUKOBIA TAB 600MG ER	2	PA, QL (2 tabs every 1 day)
<i>stavudine cap 15 mg</i>	1	QL (2 caps every 1 day)
<i>stavudine cap 20 mg</i>	1	QL (2 caps every 1 day)
<i>stavudine cap 30 mg</i>	1	QL (2 caps every 1 day)
<i>stavudine cap 40 mg</i>	1	QL (2 caps every 1 day)
SUNLENCA TAB 300MG	2	QL (4 tabs every 2 days)
SUNLENCA TAB 300MG	2	QL (5 tabs every 8 days)
SYMITUZA TAB	2	QL (1 tab every 1 day)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	QL (1 tab every 1 day)
TIVICAY PD TAB 5MG	2	QL (12 tabs every 1 day)
TIVICAY TAB 10MG	2	QL (8 tabs every 1 day)
TIVICAY TAB 25MG	2	QL (2 tabs every 1 day)
TIVICAY TAB 50MG	2	QL (2 tabs every 1 day)
TRIUMEQ PD TAB	2	QL (6 tabs every 1 day)
TRIUMEQ TAB	2	QL (1 tab every 1 day)
VIREAD POW 40MG/GM	2	QL (8 gm every 1 day)
VIREAD TAB 150MG	2	QL (1 tab every 1 day)
VIREAD TAB 200MG	2	QL (1 tab every 1 day)
VIREAD TAB 250MG	2	QL (1 tab every 1 day)
<i>zidovudine cap 100 mg</i>	1	QL (6 caps every 1 day)
<i>zidovudine syrup 10 mg/ml</i>	1	QL (64 mL every 1 day)
<i>zidovudine tab 300 mg</i>	1	QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
ANTIVIRAL COMBINATIONS		
PAXLOVID TAB 150-100	2	QL (40 tabs every 30 days)
PAXLOVID TAB 300-100	2	QL (60 tabs every 30 days)
CMV AGENTS		
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	QL (1000 mL every 30 days)
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	QL (4 tabs every 1 day)
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	1	
BARACLUDE SOL	2	QL (21 mL every 1 day)
<i>entecavir tab 0.5 mg</i>	1	QL (1 tab every 1 day)
<i>entecavir tab 1 mg</i>	1	QL (1 tab every 1 day)
EPCLUSA PAK 150-37.5	4	PA, QL (1 packet every 1 day)
EPCLUSA PAK 200-50MG	4	PA, QL (2 packets every 1 day)
EPCLUSA TAB 200-50MG	4	PA, QL (1 tab every 1 day); Genotypes 1, 2, 3, 4, 5, 6
EPCLUSA TAB 400-100	4	PA, QL (1 tab every 1 day); Genotypes 1, 2, 3, 4, 5, 6
HARVONI PAK	4	PA, QL (1 packet every 1 day); Genotypes 1, 4, 5, 6
HARVONI PAK 45-200MG	4	PA, QL (2 packets every 1 day); Genotypes 1, 4, 5, 6
HARVONI TAB 45-200MG	4	PA, QL (1 tab every 1 day); Genotypes 1, 4, 5, 6
HARVONI TAB 90-400MG	4	PA, QL (1 tab every 1 day); Genotypes 1, 4, 5, 6
<i>lamivudine tab 100 mg (hbv)</i>	1	
<i>ribavirin cap 200 mg</i>	3	PA
<i>ribavirin tab 200 mg</i>	3	PA
VEMLIDY TAB 25MG	2	QL (1 tab every 1 day)
VOSEVI TAB	4	PA, QL (1 tab every 1 day); For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3)
HERPES AGENTS		
<i>acyclovir cap 200 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir susp 200 mg/5ml</i>	1	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	QL (40 caps every 90 days)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	QL (20 caps every 90 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	QL (20 caps every 90 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	QL (360 mL every 90 days)
<i>rimantadine hydrochloride tab 100 mg</i>	1	
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol phosphate cap er 24hr 10 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	1	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
<i>labetalol hcl tab 100 mg</i>	1	
<i>labetalol hcl tab 200 mg</i>	1	
<i>labetalol hcl tab 300 mg</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>betaxolol hcl tab 10 mg</i>	1	
<i>betaxolol hcl tab 20 mg</i>	1	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
<i>timolol maleate tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	

CALCIUM CHANNEL BLOCKERS**CALCIUM CHANNEL BLOCKERS**

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl tab 120 mg</i>	1	
<i>diltiazem hcl tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl tab er 24hr 360 mg</i>	1	
<i>diltiazem hcl tab er 24hr 420 mg</i>	1	
<i>felodipine tab er 24hr 2.5 mg</i>	1	
<i>felodipine tab er 24hr 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>felodipine tab er 24hr 10 mg</i>	1	
<i>isradipine cap 2.5 mg</i>	1	
<i>isradipine cap 5 mg</i>	1	
<i>levamlodipine maleate tab 2.5 mg</i>	1	
<i>levamlodipine maleate tab 5 mg</i>	1	
<i>nicardipine hcl cap 20 mg</i>	1	
<i>nicardipine hcl cap 30 mg</i>	1	
<i>nifedipine cap 10 mg</i>	1	
<i>nifedipine cap 20 mg</i>	1	
<i>nifedipine tab er 24hr 30 mg</i>	1	
<i>nifedipine tab er 24hr 60 mg</i>	1	
<i>nifedipine tab er 24hr 90 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</i>	1	
<i>nimodipine oral soln 60 mg/20ml (3 mg/ml)</i>	1	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	
<i>nisoldipine tab er 24hr 17 mg</i>	1	
<i>nisoldipine tab er 24hr 20 mg</i>	1	
<i>nisoldipine tab er 24hr 25.5 mg</i>	1	
<i>nisoldipine tab er 24hr 30 mg</i>	1	
<i>nisoldipine tab er 24hr 34 mg</i>	1	
<i>nisoldipine tab er 24hr 40 mg</i>	1	
<i>verapamil hcl cap er 24hr 100 mg</i>	1	
<i>verapamil hcl cap er 24hr 120 mg</i>	1	
<i>verapamil hcl cap er 24hr 180 mg</i>	1	
<i>verapamil hcl cap er 24hr 200 mg</i>	1	
<i>verapamil hcl cap er 24hr 240 mg</i>	1	
<i>verapamil hcl cap er 24hr 300 mg</i>	1	
<i>verapamil hcl cap er 24hr 360 mg</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	
<i>verapamil hcl tab 80 mg</i>	1	
<i>verapamil hcl tab 120 mg</i>	1	
<i>verapamil hcl tab er 120 mg</i>	1	
<i>verapamil hcl tab er 180 mg</i>	1	
<i>verapamil hcl tab er 240 mg</i>	1	

CARDIOTONICS**CARDIAC GLYCOSIDES**

<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	1	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS CAP 2.5MG	4	PA, QL (1 cap every 1 day)
CAMZYOS CAP 5MG	4	PA, QL (1 cap every 1 day)
CAMZYOS CAP 10MG	4	PA, QL (1 cap every 1 day)
CAMZYOS CAP 15MG	4	PA, QL (1 cap every 1 day)
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
ENTRESTO CAP 6-6MG	2	
ENTRESTO CAP 15-16MG	2	
ENTRESTO TAB 24-26MG	2	
ENTRESTO TAB 49-51MG	2	
ENTRESTO TAB 97-103MG	2	
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	1	
<i>sacubitril-valsartan tab 24-26 mg</i>	1	
<i>sacubitril-valsartan tab 49-51 mg</i>	1	
<i>sacubitril-valsartan tab 97-103 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
IMPOTENCE AGENTS		
<i>avanafil tab 50 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>avanafil tab 100 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>avanafil tab 200 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>sildenafil citrate tab 25 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>sildenafil citrate tab 50 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>sildenafil citrate tab 100 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>tadalafil tab 2.5 mg</i>	1	ST, QL (1 tab every 1 day); Coverage is subject to your plan/benefits
<i>tadalafil tab 5 mg</i>	1	ST, QL (1 tab every 1 day); Coverage is subject to your plan/benefits
<i>tadalafil tab 10 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>tadalafil tab 20 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>ildenafil hcl orally disintegrating tab 10 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>ildenafil hcl tab 2.5 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>ildenafil hcl tab 5 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>ildenafil hcl tab 10 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits

Drug Name	Drug Tier	Requirements/Limits
<i>varденаfil hcl tab 20 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
PROSTAGLANDIN VASODILATORS		
ORENITRAM TAB 0.25MG	4	PA
ORENITRAM TAB 0.125MG	4	PA
ORENITRAM TAB 1MG	4	PA
ORENITRAM TAB 2.5MG	4	PA
ORENITRAM TAB 5MG	4	PA
ORENITRAM TAB MONTH 1	4	PA
ORENITRAM TAB MONTH 2	4	PA
ORENITRAM TAB MONTH 3	4	PA
TYVASO RF KT SOL 0.6MG/ML	4	PA, QL (28 ampules every 28 days)
TYVASO SOL 0.6MG/ML	4	PA, QL (28 ampules every 28 days)
TYVASO ST KT SOL 0.6MG/ML	4	PA, QL (28 ampules every 28 days)
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan tab 5 mg</i>	3	PA, QL (1 tab every 1 day)
<i>ambrisentan tab 10 mg</i>	3	PA, QL (1 tab every 1 day)
<i>bosentan tab 62.5 mg</i>	3	PA, QL (2 tabs every 1 day)
<i>bosentan tab 125 mg</i>	3	PA, QL (2 tabs every 1 day)
OPSUMIT TAB 10MG	4	PA, QL (1 tab every 1 day)
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>sildenafil citrate for suspension 10 mg/ml</i>	3	PA, QL (784 mL every 30 days)
<i>sildenafil citrate tab 20 mg</i>	3	PA, QL (12 tabs every 1 day)
<i>tadalafil tab 20 mg (pah)</i>	3	PA, QL (2 tabs every 1 day)
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI PACK TAB 200/800	4	PA, QL (1 pack every 28 days)
UPTRAVI TAB 200MCG	4	PA, QL (5 tabs every 1 day)
UPTRAVI TAB 400MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 600MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 800MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1000MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1200MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1400MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1600MCG	4	PA, QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS TAB 0.5MG	4	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 1.5MG	4	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 1MG	4	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 2.5MG	4	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 2MG	4	PA, QL (3 tabs every 1 day)
SINUS NODE INHIBITORS		
CORLANOR SOL 5MG/5ML	2	PA
<i>ivabradine hcl tab 5 mg (base equiv)</i>	1	PA
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	1	PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP 61MG	4	PA, QL (1 ea every 1 day)
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	1	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	1	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin tab 500 mg</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	1	
<i>cefaclor for susp 125 mg/5ml</i>	1	
<i>cefaclor for susp 250 mg/5ml</i>	1	
<i>cefaclor for susp 375 mg/5ml</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefixime cap 400 mg</i>	1	
<i>cefixime for susp 100 mg/5ml</i>	1	
<i>cefixime for susp 200 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	1	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	0	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	0	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	0	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	0	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	0	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	0	
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg- 20 mcg (21)</i>	0	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	0	
<i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i>	0	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	0	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1- 30/1-35 mg-mcg</i>	0	
<i>norethindrone ace & ethinyl estradiol tab 1 mg- 20 mcg</i>	0	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	0	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	0	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	0	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg- 20 mcg (24)</i>	0	
<i>norethindrone-eth estradiol tab 0.5-35/0.75- 35/1-35 mg-mcg</i>	0	
<i>norethindrone-eth estradiol tab 0.5-35/1- 35/0.5-35 mg-mcg</i>	0	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-25/0.215- 25/0.25-25 mg-mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-35/0.215- 35/0.25-35 mg-mcg</i>	0	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	0	

Drug Name	Drug Tier	Requirements/Limits
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	0	
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA MIS	0	QL (1 ring every 300 days)
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	0	QL (13 ea every 300 days)
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	0	QL (13 rings every 300 days)
EMERGENCY CONTRACEPTIVES		
ELLA TAB 30MG	0	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
medroxyprogesterone acetate im susp 150 mg/ml	0	QL (4 injections every 300 days)
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	0	QL (4 injections every 300 days)
PROGESTIN CONTRACEPTIVES - ORAL		
norethindrone tab 0.35 mg	0	
OPILL TAB 0.075MG	0	OTC
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
budesonide delayed release particles cap 3 mg	1	
deflazacort susp 22.75 mg/ml	3	PA, QL (1.8 mL every 1 day)
deflazacort tab 6 mg	3	PA, QL (2 tabs every 1 day)
deflazacort tab 18 mg	3	PA, QL (1 tab every 1 day)
deflazacort tab 30 mg	3	PA, QL (1 tab every 1 day)
deflazacort tab 36 mg	3	PA, QL (1 tab every 1 day)
dexamethasone elixir 0.5 mg/5ml	1	
dexamethasone soln 0.5 mg/5ml	1	
dexamethasone tab 0.5 mg	1	
dexamethasone tab 0.75 mg	1	
dexamethasone tab 1 mg	1	
dexamethasone tab 1.5 mg	1	
dexamethasone tab 2 mg	1	
dexamethasone tab 4 mg	1	
dexamethasone tab 6 mg	1	
dexamethasone tab therapy pack 1.5 mg (21)	1	
dexamethasone tab therapy pack 1.5 mg (27)	1	
dexamethasone tab therapy pack 1.5 mg (35)	1	
dexamethasone tab therapy pack 1.5 mg (49)	1	
dexamethasone tab therapy pack 1.5 mg (51)	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone sodium succinate pf for inj 100 mg</i>	1	PA
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
MEDROL TAB 2MG	2	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	1	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	1	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	1	
<i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	
<i>prednisolone soln 15 mg/5ml</i>	1	
<i>prednisolone tab 5 mg</i>	1	
<i>prednisone oral soln 5 mg/5ml</i>	1	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
MINERALOCORTICIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>benzonatate cap 200 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	QL (30 mL every 1 day)
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	QL (6 tabs every 1 day)
COUGH/COLD/ALLERGY COMBINATIONS		
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	QL (10 mL every 1 day)
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	QL (30 mL every 1 day)
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
MISC. RESPIRATORY INHALANTS		
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	
MUCOLYTICS		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>adapalene cream 0.1%</i>	1	PA
<i>adapalene gel 0.1%</i>	1	PA
<i>adapalene gel 0.3%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	PA
<i>benzoyl peroxide foam 9.8%</i>	1	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	QL (47 gm every 25 days)
<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i>	1	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	QL (45 gm every 25 days)
<i>clindamycin phosphate foam 1%</i>	1	
<i>clindamycin phosphate gel 1% (twice-daily)</i>	1	QL (75 gm every 25 days)
<i>clindamycin phosphate lotion 1%</i>	1	QL (60 mL every 25 days)
<i>clindamycin phosphate soln 1%</i>	1	QL (60 mL every 25 days)
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	QL (50 gm every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	QL (50 gm every 25 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	1	QL (50 gm every 25 days)
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	1	
<i>dapsone gel 5%</i>	1	
<i>dapsone gel 7.5%</i>	1	
<i>erythromycin gel 2%</i>	1	QL (60 gm every 25 days)
<i>erythromycin pads 2%</i>	1	
<i>erythromycin soln 2%</i>	1	QL (60 mL every 25 days)
<i>isotretinoin cap 10 mg</i>	1	
<i>isotretinoin cap 20 mg</i>	1	
<i>isotretinoin cap 30 mg</i>	1	
<i>isotretinoin cap 40 mg</i>	1	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9-4%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9-4.5%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 10-5%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	1	
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	1	
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	1	
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	1	
<i>sulfacetamide sodium w/ sulfur emulsion 10-1%</i>	1	
<i>sulfacetamide sodium w/ sulfur foam 10-5%</i>	1	
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	1	
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i>	1	
<i>sulfacetamide sodium w/ sulfur susp 8-4%</i>	1	
<i>sulfacetamide sodium w/ sulfur susp 10-5%</i>	1	
<i>sulfacetamide sodium-sulfur in urea emulsion 10-4%</i>	1	
<i>tretinoin cream 0.1%</i>	1	PA
<i>tretinoin cream 0.05%</i>	1	PA
<i>tretinoin cream 0.025%</i>	1	PA
<i>tretinoin gel 0.01%</i>	1	PA
<i>tretinoin gel 0.05%</i>	1	PA
<i>tretinoin gel 0.025%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin microsphere gel 0.1%</i>	1	PA
<i>tretinoin microsphere gel 0.04%</i>	1	PA
<i>tretinoin microsphere gel 0.08%</i>	1	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac epolamine patch 1.3%</i>	1	
<i>diclofenac sodium soln 1.5%</i>	1	QL (150 mL every 21 days)
ANTIBIOTICS - TOPICAL		
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>mupirocin oint 2%</i>	1	QL (30 gm every 25 days)
ANTIFUNGALS - TOPICAL		
<i>ciclopirox gel 0.77%</i>	1	QL (120 gm every 25 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	QL (120 gm every 25 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	QL (120 mL every 25 days)
<i>ciclopirox shampoo 1%</i>	1	QL (120 mL every 25 days)
<i>ciclopirox solution 8%</i>	1	
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	QL (60 gm every 25 days)
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	QL (60 mL every 25 days)
<i>econazole nitrate cream 1%</i>	1	QL (60 gm every 25 days)
<i>iodoquinol-hc cream 1-1%</i>	1	
<i>iodoquinol-hydrocortisone in aloe vehicle cream 1-1.9%</i>	1	
<i>ketoconazole cream 2%</i>	1	QL (120 gm every 25 days)
<i>ketoconazole shampoo 2%</i>	1	QL (120 mL every 25 days)
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	1	QL (100 gm every 25 days)
<i>naftifine hcl cream 1%</i>	1	QL (60 gm every 25 days)
<i>naftifine hcl cream 2%</i>	1	QL (60 gm every 25 days)
<i>naftifine hcl gel 2%</i>	1	QL (60 gm every 25 days)
<i>nystatin cream 100000 unit/gm</i>	1	QL (120 gm every 25 days)
<i>nystatin oint 100000 unit/gm</i>	1	QL (120 gm every 25 days)
<i>nystatin topical powder 100000 unit/gm</i>	1	QL (120 gm every 25 days)
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	QL (60 gm every 25 days)
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	QL (60 gm every 25 days)
<i>oxiconazole nitrate cream 1%</i>	1	ST, QL (60 gm every 25 days)
<i>sulconazole nitrate cream 1%</i>	1	QL (60 gm every 25 days)
<i>sulconazole nitrate solution 1%</i>	1	QL (60 mL every 25 days)
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene gel 1%</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA
<i>fluorouracil cream 0.5%</i>	1	PA
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
ANTIPRURITICS - TOPICAL		
<i>doxepin hcl cream 5%</i>	1	ST, QL (45 gm every 25 days)
ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	1	
<i>acitretin cap 17.5 mg</i>	1	
<i>acitretin cap 25 mg</i>	1	
<i>calcipotriene foam 0.005%</i>	1	PA
<i>calcipotriene oint 0.005%</i>	1	PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	PA
<i>calcitriol oint 3 mcg/gm</i>	1	PA
COSENTYX INJ 75MG/0.5	4	PA, QL (1 syringe every 28 days); Preferred agent for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis. Quantity Limits are consistent with maximum FDA approved dosing limits.
COSENTYX INJ 150MG/ML	4	PA, QL (1 syringe every 28 days); Preferred agent for Anklyosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis, ; Quantity Limits are consistent with maximum FDA approved dosing limits.

Drug Name	Drug Tier	Requirements/Limits
COSENTYX INJ 300DOSE	4	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis. Quantity Limits are consistent with maximum FDA approved dosing limits.
COSENTYX PEN INJ 150MG/ML	4	PA, QL (1 pen every 28 days); Preferred agent for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis. Quantity Limits are consistent with maximum FDA approved dosing limits.
COSENTYX PEN INJ 300DOSE	4	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis. Quantity Limits are consistent with maximum FDA approved dosing limits.
COSENTYX UNO INJ 300/2ML	4	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis. Quantity Limits are consistent with maximum FDA approved dosing limits.
<i>methoxsalen rapid cap 10 mg</i>	1	
OTULFI INJ 45/0.5ML	4	PA
OTULFI INJ 90MG/ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI INJ 150MG/ML	4	PA, QL (1 syringe every 63 days); Preferred for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
SKYRIZI PEN INJ 150MG/ML	4	PA, QL (1 pen every 63 days); Preferred for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
STELARA INJ 45MG/0.5	4	PA, QL (1 syringe every 84 days); Preferred agent for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
STELARA INJ 45MG/0.5	4	PA, QL (1 vial every 84 days); Preferred agent for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
STELARA INJ 90MG/ML	4	PA, QL (1 syringe every 56 days); Preferred agent for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits.
TALTZ INJ 20/0.25	4	PA, QL (1 syringe every 28 days)
TALTZ INJ 40/0.5ML	4	PA, QL (1 syringe every 28 days)

Drug Name	Drug Tier	Requirements/Limits
TALTZ INJ 80MG/ML	4	PA, QL (1 pen every 28 days); Preferred agent for Psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
TALTZ INJ 80MG/ML	4	PA, QL (1 syringe every 28 days); Preferred agent for Psoriasis; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
<i>tazarotene cream 0.1%</i>	1	PA
<i>tazarotene cream 0.05%</i>	1	
<i>tazarotene gel 0.1%</i>	1	
<i>tazarotene gel 0.05%</i>	1	
TREMFYA INJ 100MG/ML	4	PA, QL (1 pen every 42 days); Preferred agent for Psoriasis, Psoriatic Arthritis, Ulcerative Colitis; Quantity Limits are consistent with maximum FDA approved dosing limits.
TREMFYA INJ 100MG/ML	4	PA, QL (1 syringe every 42 days); Preferred agent for Psoriasis, Psoriatic Arthritis, Ulcerative Colitis; Quantity Limits are consistent with maximum FDA approved dosing limits.
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide lotion 2.5%</i>	1	
<i>selenium sulfide shampoo 2.3%</i>	1	
<i>selenium sulfide shampoo 2.25%</i>	1	
<i>sulfacetamide sodium cleansing gel 10%</i>	1	
<i>sulfacetamide sodium liquid 10%</i>	1	
<i>sulfacetamide sodium shampoo 9.8%</i>	1	
<i>sulfacetamide sodium shampoo 10%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANTIVIRALS - TOPICAL		
<i>acyclovir oint 5%</i>	1	
<i>penciclovir cream 1%</i>	1	
BURN PRODUCTS		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
CAUTERIZING AGENTS		
<i>silver nitrate soln 0.5%</i>	1	
CORTICOSTEROIDS - TOPICAL		
<i>alclometasone dipropionate cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>alclometasone dipropionate oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>amcinonide lotion 0.1%</i>	1	QL (120 mL every 25 days)
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	QL (120 gm every 25 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	QL (120 mL every 25 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>betamethasone dipropionate cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>betamethasone dipropionate lotion 0.05%</i>	1	QL (120 mL every 25 days)
<i>betamethasone valerate aerosol foam 0.12%</i>	1	QL (120 gm every 25 days)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	QL (120 gm every 25 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	QL (120 mL every 25 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate cream 0.025%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate emollient base cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate foam 0.05%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate gel 0.05%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate lotion 0.05%</i>	1	QL (120 mL every 25 days)
<i>clobetasol propionate oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>clobetasol propionate shampoo 0.05%</i>	1	QL (120 mL every 25 days)
<i>clobetasol propionate soln 0.05%</i>	1	QL (120 mL every 25 days)
<i>clobetasol propionate spray 0.05%</i>	1	QL (120 mL every 25 days)
<i>desonide cream 0.05%</i>	1	QL (120 gm every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>desonide lotion 0.05%</i>	1	QL (120 mL every 25 days)
<i>desonide oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>desoximetasone cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>desoximetasone cream 0.25%</i>	1	QL (120 gm every 25 days)
<i>desoximetasone gel 0.05%</i>	1	QL (120 gm every 25 days)
<i>desoximetasone oint 0.25%</i>	1	QL (120 gm every 25 days)
<i>desoximetasone spray 0.25%</i>	1	QL (120 mL every 25 days)
DUOBRII LOT	2	
ENSTILAR AER	2	PA
<i>fluocinolone acetonide cream 0.01%</i>	1	QL (120 gm every 25 days)
<i>fluocinolone acetonide cream 0.025%</i>	1	QL (120 gm every 25 days)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	QL (120 mL every 25 days)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	QL (120 mL every 25 days)
<i>fluocinolone acetonide oint 0.025%</i>	1	QL (120 gm every 25 days)
<i>fluocinolone acetonide soln 0.01%</i>	1	QL (120 mL every 25 days)
<i>fluocinonide cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>fluocinonide emulsified base cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>fluocinonide gel 0.05%</i>	1	QL (120 gm every 25 days)
<i>fluocinonide oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>fluocinonide soln 0.05%</i>	1	QL (120 mL every 25 days)
<i>fluticasone propionate cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>fluticasone propionate lotion 0.05%</i>	1	QL (120 mL every 25 days)
<i>fluticasone propionate oint 0.005%</i>	1	QL (120 gm every 25 days)
<i>halcinonide soln 0.1%</i>	1	QL (120 mL every 25 days)
<i>halobetasol propionate cream 0.05%</i>	1	QL (120 gm every 25 days)
<i>halobetasol propionate oint 0.05%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone butyrate cream 0.1%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone butyrate oint 0.1%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone butyrate soln 0.1%</i>	1	QL (120 mL every 25 days)
<i>hydrocortisone cream 2.5%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone lotion 2.5%</i>	1	QL (120 mL every 25 days)
<i>hydrocortisone oint 2.5%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone soln 2.5%</i>	1	QL (120 mL every 25 days)
<i>hydrocortisone valerate cream 0.2%</i>	1	QL (120 gm every 25 days)
<i>hydrocortisone valerate oint 0.2%</i>	1	QL (120 gm every 25 days)
<i>mometasone furoate cream 0.1%</i>	1	QL (120 gm every 25 days)
<i>mometasone furoate oint 0.1%</i>	1	QL (120 gm every 25 days)
<i>mometasone furoate solution 0.1% (lotion)</i>	1	QL (120 mL every 25 days)
<i>pramoxine-hc cream 1-2.5%</i>	1	
TACLONEX OIN	2	PA
TACLONEX SUS	2	PA
<i>triamcinolone acetonide cream 0.1%</i>	1	QL (120 gm every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide cream 0.5%</i>	1	QL (120 gm every 25 days)
<i>triamcinolone acetonide cream 0.025%</i>	1	QL (120 gm every 25 days)
<i>triamcinolone acetonide lotion 0.1%</i>	1	QL (120 mL every 25 days)
<i>triamcinolone acetonide lotion 0.025%</i>	1	QL (120 mL every 25 days)
<i>triamcinolone acetonide oint 0.1%</i>	1	QL (120 gm every 25 days)
<i>triamcinolone acetonide oint 0.5%</i>	1	QL (120 gm every 25 days)
<i>triamcinolone acetonide oint 0.025%</i>	1	QL (120 gm every 25 days)
ECZEMA AGENTS		
DUPIXENT INJ 200/1.14	4	PA, QL (2 syringes every 28 days)
DUPIXENT INJ 200MG	4	PA, QL (2 pens every 28 days)
DUPIXENT INJ 300/2ML	4	PA, QL (4 pens every 28 days)
DUPIXENT INJ 300/2ML	4	PA, QL (4 syringes every 28 days)
EBGLYSS INJ 250/2ML	4	PA, QL (2 pens every 21 days)
EBGLYSS INJ 250/2ML	4	PA, QL (2 syringes every 21 days)
EMOLLIENT/KERATOLYTIC AGENTS		
<i>urea cream 39%</i>	1	
<i>urea cream 41%</i>	1	
<i>urea cream 45%</i>	1	
<i>urea cream 47%</i>	1	
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod cream 3.75%</i>	1	PA
<i>imiquimod cream 5%</i>	1	QL (21 ea every 25 days)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus cream 1%</i>	1	ST
<i>tacrolimus oint 0.1%</i>	1	ST
<i>tacrolimus oint 0.03%</i>	1	ST
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
<i>podofilox gel 0.5%</i>	1	
<i>podofilox soln 0.5%</i>	1	
<i>salicylic acid er film-forming soln 28.5%</i>	1	
<i>salicylic acid film forming liquid 27.5%</i>	1	
<i>salicylic acid foam 6%</i>	1	
<i>salicylic acid gel 6%</i>	1	
<i>salicylic acid shampoo 6%</i>	1	
<i>salicylic acid soln 26%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LOCAL ANESTHETICS - TOPICAL		
<i>ethyl chloride aerosol spray</i>	1	
<i>lidocaine hcl soln 4%</i>	1	QL (50 mL every 25 days)
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	QL (60 mL every 25 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	QL (10 injections every 25 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	QL (12 injections every 25 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	QL (3 injections every 25 days)
<i>lidocaine oint 5%</i>	1	QL (50 gm every 25 days)
<i>lidocaine patch 5%</i>	1	PA, QL (3 ea every 1 day)
<i>lidocaine patch 5%</i>	1	PA, QL (3 patches every 1 day)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	QL (30 gm every 25 days)
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	1	PA
<i>metronidazole cream 0.75%</i>	1	QL (60 gm every 25 days)
<i>metronidazole gel 0.75%</i>	1	QL (60 gm every 25 days)
<i>metronidazole gel 1%</i>	1	QL (60 gm every 25 days)
<i>metronidazole lotion 0.75%</i>	1	QL (60 mL every 25 days)
ORACEA CAP 40MG	1	Brand preferred over generic
SCABICIDES & PEDICULICIDES		
<i>crotamiton lotion 10%</i>	1	
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	1	
TAR PRODUCTS		
<i>coal tar soln 20%</i>	1	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
ACCU-CHEK TES AVIVA PL	0	QL (150 strips every 30 days), OTC
ACCU-CHEK TES GUIDE	0	QL (150 strips every 30 days), OTC
ACCU-CHEK TES SMART	0	QL (150 strips every 30 days), OTC
ONETOUCH TES ULT BLUE	0	QL (5 strips every 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
ONETOUCH TES ULTRA	0	QL (150 strips every 30 days), OTC
ONETOUCH TES VERIO	0	QL (150 strips every 30 days), OTC

DIGESTIVE AIDS***DIGESTIVE ENZYMES***

CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
SUCRAID SOL 8500/ML	4	PA
VIOKACE TAB 10440	2	
VIOKACE TAB 20880	2	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	

DIURETICS***CARBONIC ANHYDRASE INHIBITORS***

<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
<i>dichlorphenamide tab 50 mg</i>	3	PA, QL (4 tabs every 1 day)
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	

DIURETIC COMBINATIONS

<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	

LOOP DIURETICS

<i>bumetanide tab 0.5 mg</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	1	
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
<i>torsemide tab 5 mg</i>	1	
<i>torsemide tab 10 mg</i>	1	
<i>torsemide tab 20 mg</i>	1	
<i>torsemide tab 100 mg</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride hcl tab 5 mg</i>	1	
<i>spironolactone susp 25 mg/5ml</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
<i>triamterene cap 100 mg</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium oral soln 70 mg/75ml</i>	1	
<i>alendronate sodium tab 5 mg</i>	1	
<i>alendronate sodium tab 10 mg</i>	1	
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
<i>calcitonin (salmon) inj 200 unit/ml</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	
<i>risedronate sodium tab 5 mg</i>	1	
<i>risedronate sodium tab 30 mg</i>	1	
<i>risedronate sodium tab 35 mg</i>	1	
<i>risedronate sodium tab 150 mg</i>	1	
<i>risedronate sodium tab delayed release 35 mg</i>	1	
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	3	PA, QL (1 pen every 28 days)
TYMLOS INJ	4	PA, QL (1 pen every 28 days)
CORTICOTROPIN		
ACTHAR INJ 80UNIT	4	PA, QL (1.67 mL every 1 day)
ACTHAR INJ GEL	4	PA, QL (1 pen every 1 day)
ACTHAR INJ GEL	4	PA, QL (28 injectors every 28 days)
CORTROPHIN INJ 40/0.5ML	4	PA
CORTROPHIN INJ 80UNT/ML	4	PA
CORTROPHIN INJ 80UNT/ML	4	PA, QL (1.67 mL every 1 day)
FERTILITY REGULATORS		
<i>clomiphene citrate tab 50 mg</i>	1	Coverage is subject to your plan/benefits
GONAL-F INJ 450UNIT	4	QL (10 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F INJ 1050UNIT	4	QL (6 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 75UNIT	4	QL (60 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 300/0.5	4	QL (15 pens every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 450/0.75	4	QL (10 pens every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 900/1.5	4	QL (7 pens every 28 days); Coverage is subject to your plan/benefits

Drug Name	Drug Tier	Requirements/Limits
OVIDREL INJ	4	Coverage is subject to your plan/benefits
GNRH/LHRH ANTAGONISTS		
<i>cetrorelix acetate for inj kit 0.25 mg</i>	3	
GANIRELIX AC INJ 250/0.5	4	PA; Brand preferred over generic
GROWTH HORMONES		
HUMATROPE INJ 6MG	4	PA
HUMATROPE INJ 12MG	4	PA
HUMATROPE INJ 24MG	4	PA
NORDITROPIN INJ 5/1.5ML	4	PA
NORDITROPIN INJ 10/1.5ML	4	PA
NORDITROPIN INJ 15/1.5ML	4	PA
NORDITROPIN INJ 30/3ML	4	PA
SOGROYA INJ 5MG/1.5	4	PA, QL (4 pens every 28 days)
SOGROYA INJ 10MG/1.5	4	PA, QL (4 pens every 28 days)
SOGROYA INJ 15MG/1.5	4	PA, QL (4 pens every 28 days)
HORMONE RECEPTOR MODULATORS		
<i>raloxifene hcl tab 60 mg</i>	0	
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL SOL 2MG/ML	2	
METABOLIC MODIFIERS		
<i>betaine powder for oral solution</i>	3	PA
<i>betaine powder for oral solution</i>	3	PA
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	1	
<i>carglumic acid soluble tab 200 mg</i>	3	PA
<i>carglumic acid soluble tab 200 mg</i>	3	PA
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	3	PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	3	PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	3	PA, QL (4 tabs every 1 day)
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
GALAFOLD CAP 123MG	4	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
<i>nitisinone cap 2 mg</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>nitisinone cap 5 mg</i>	3	PA
<i>nitisinone cap 10 mg</i>	3	PA
<i>nitisinone cap 20 mg</i>	3	PA
ORFADIN CAP 2MG	4	PA
ORFADIN CAP 5MG	4	PA
ORFADIN CAP 10MG	4	PA
ORFADIN CAP 20MG	4	PA
ORFADIN SUS 4MG/ML	4	PA
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	
PHEBURANE MIS 483/GM	4	PA, QL (672 gm very 30 days)
<i>sapropterin dihydrochloride powder packet 100 mg</i>	3	PA
<i>sapropterin dihydrochloride powder packet 100 mg</i>	3	PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	3	PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	3	PA
<i>sapropterin dihydrochloride tab 100 mg</i>	3	PA
<i>sapropterin dihydrochloride tab 100 mg</i>	3	PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	3	PA, QL (798 gm every 30 days)
<i>sodium phenylbutyrate tab 500 mg</i>	3	PA, QL (40 tabs every 1 day)
STRENSIQ INJ 18/0.45	4	PA
STRENSIQ INJ 28/0.7ML	4	PA
STRENSIQ INJ 40MG/ML	4	PA
STRENSIQ INJ 80/0.8ML	4	PA
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA
POSTERIOR PITUITARY HORMONES		
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
PROGESTERONE RECEPTOR ANTAGONISTS		
<i>mifepristone tab 200 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	
SOMATOSTATIC AGENTS		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	3	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	3	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	3	PA, QL (45 vials every 30 days)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	3	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	3	PA, QL (9 vials every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	3	PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	3	PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	3	PA, QL (3 syringes every 1 day)
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE PAK 15MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE PAK 30-15MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE PAK 45-15MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE PAK 60-30MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE PAK 90-30MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE TAB 15MG	4	PA, QL (2 tabs every 1 day)
JYNARQUE TAB 30MG	4	PA, QL (1 tab every 1 day)
<i>tolvaptan tab 15 mg</i>	3	PA
<i>tolvaptan tab 30 mg</i>	3	PA, QL (1 tab every 1 day)
ESTROGENS		
ESTROGEN COMBINATIONS		
CLIMARA PRO DIS WEEKLY	2	
<i>esterified estrogens & methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
MYFEMBREE TAB	2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ESTROGENS		
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	1	
estradiol tab 0.5 mg	1	
estradiol tab 1 mg	1	
estradiol tab 2 mg	1	
estradiol td gel 0.5 mg/0.5gm (0.1%)	1	
estradiol td gel 0.25 mg/0.25gm (0.1%)	1	
estradiol td gel 0.75 mg/0.75gm (0.1%)	1	
estradiol td gel 1 mg/gm (0.1%)	1	
estradiol td gel 1.25 mg/1.25gm (0.1%)	1	
estradiol td patch twice weekly 0.1 mg/24hr	1	
estradiol td patch twice weekly 0.05 mg/24hr	1	
estradiol td patch twice weekly 0.025 mg/24hr	1	
estradiol td patch twice weekly 0.075 mg/24hr	1	
estradiol td patch twice weekly 0.0375 mg/24hr	1	
estradiol td patch weekly 0.1 mg/24hr	1	
estradiol td patch weekly 0.05 mg/24hr	1	
estradiol td patch weekly 0.06 mg/24hr	1	
estradiol td patch weekly 0.025 mg/24hr	1	
estradiol td patch weekly 0.075 mg/24hr	1	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	1	
estradiol valerate im in oil 10 mg/ml	1	PA
estradiol valerate im in oil 20 mg/ml	1	PA
estradiol valerate im in oil 40 mg/ml	1	PA
FLUOROQUINOLONES		
FLUOROQUINOLONES		
CIPRO (5%) SUS 250MG/5	2	
CIPRO (10%) SUS 500MG/5	2	
ciprofloxacin hcl tab 100 mg (base equiv)	1	
ciprofloxacin hcl tab 250 mg (base equiv)	1	
ciprofloxacin hcl tab 500 mg (base equiv)	1	
ciprofloxacin hcl tab 750 mg (base equiv)	1	
levofloxacin oral soln 25 mg/ml	1	
levofloxacin tab 250 mg	1	
levofloxacin tab 500 mg	1	
levofloxacin tab 750 mg	1	
moxifloxacin hcl tab 400 mg (base equiv)	1	
ofloxacin tab 300 mg	1	
ofloxacin tab 400 mg	1	

Drug Name	Drug Tier	Requirements/Limits
GASTROINTESTINAL AGENTS - MISC.		
5-HT₄ RECEPTOR AGONISTS		
<i>prucalopride succinate tab 1 mg (base equivalent)</i>	1	
<i>prucalopride succinate tab 2 mg (base equivalent)</i>	1	
FARNESOID X RECEPTOR (FXR) AGONISTS		
<i>OCALIVA TAB 5MG</i>	4	PA, QL (1 tab every 1 day)
<i>OCALIVA TAB 10MG</i>	4	PA, QL (1 tab every 1 day)
GALLSTONE SOLUBILIZING AGENTS		
<i>chenodiol tab 250 mg</i>	4	PA
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	1	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium cap 750 mg</i>	1	
<i>mesalamine cap dr 400 mg</i>	1	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	1	
<i>mesalamine enema 4 gm</i>	1	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	1	
<i>mesalamine suppos 1000 mg</i>	1	
<i>mesalamine tab delayed release 1.2 gm</i>	1	
<i>mesalamine tab delayed release 800 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI INJ 180/1.2	4	PA, QL (1 cartridge every 56 days); Preferred for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
SKYRIZI INJ 360/2.4	4	PA, QL (1 cartridge every 56 days); Preferred for all FDA approved indications; Quantity Limits are consistent with maximum FDA approved dosing limits. Approved quantity may be less than the listed limit.
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
TREMFYA CROH INJ 200/2ML	4	PA, QL (1 pen every 21 days)
TREMFYA INJ 200/2ML	4	PA, QL (1 pen every 21 days)
TREMFYA INJ 200/2ML	4	PA, QL (1 syringe every 21 days)
TREMFYA INJ 200/20ML	4	PA, QL (3 vials every 56 days); Preferred agent for Psoriasis, Psoriatic Arthritis, Ulcerative Colitis; Quantity Limits are consistent with maximum FDA approved dosing limits.
VELSIPITY TAB 2MG	4	PA, QL (1 tab every 1 day); Preferred agent for Ulcerative Colitis; Quantity Limits are consistent with maximum FDA approved dosing limits.
INTESTINAL ACIDIFIERS		
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>alosetron hcl tab 1 mg (base equiv)</i>	1	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
VIBERZI TAB 75MG	2	PA
VIBERZI TAB 100MG	2	PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
<i>alvimopan cap 12 mg</i>	1	
MOVANTIK TAB 12.5MG	2	PA
MOVANTIK TAB 25MG	2	PA
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>ferric citrate tab 1 gm (210 mg ferric iron)</i>	1	
<i>sevelamer carbonate packet 0.8 gm</i>	1	
<i>sevelamer carbonate packet 2.4 gm</i>	1	
<i>sevelamer carbonate tab 800 mg</i>	1	
<i>sevelamer hcl tab 400 mg</i>	1	
<i>sevelamer hcl tab 800 mg</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1	
<i>potassium citrate & citric acid powder pack 3300-1002 mg</i>	1	
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	4	PA
CYSTAGON CAP 150MG	4	PA
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
<i>finasteride tab 5 mg</i>	1	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>tamsulosin hcl cap 0.4 mg</i>	1	
URINARY ANALGESICS		
<i>phenazopyridine hcl tab 100 mg</i>	1	
<i>phenazopyridine hcl tab 200 mg</i>	1	
URINARY STONE AGENTS		
<i>tiopronin tab 100 mg</i>	3	PA
<i>tiopronin tab delayed release 100 mg</i>	3	PA
<i>tiopronin tab delayed release 100 mg</i>	3	PA
<i>tiopronin tab delayed release 300 mg</i>	3	PA
<i>tiopronin tab delayed release 300 mg</i>	3	PA
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
GOUT AGENTS		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 200 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	1	QL (120 tabs every 25 days)
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
MITIGARE CAP 0.6MG	1	QL (60 caps every 25 days); Brand preferred over generic
URICOSURICS		
<i>probenecid tab 500 mg</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
ALHEMO INJ 300/3ML	4	PA
HEMLIBRA INJ 30MG/ML	4	PA
HEMLIBRA INJ 60/0.4	4	PA
HEMLIBRA INJ 105/0.7	4	PA
HEMLIBRA INJ 150/ML	4	PA
HEMLIBRA INJ 300/2ML	4	PA
HEMLIBRA SOL 12/0.4ML	4	PA
SEVENFACT SOL 2MG	4	PA
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	3	PA, QL (45 syringes every 90 days)
COMPLEMENT INHIBITORS		
BKEMV INJ 300/30ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA INJ 2000UNIT	4	PA, QL (20 vials every 28 days)
HAEGARDA INJ 3000UNIT	4	PA, QL (20 vials every 28 days)
RUCONEST INJ 2100UNIT	4	PA, QL (60 vials every 90 days)
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	4	PA, QL (2 tabs every 1 day)
TAVALISSE TAB 150MG	4	PA, QL (2 tabs every 1 day)
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
PLASMA KALLIKREIN INHIBITORS		
TAKHZYRO INJ 150MG/ML	4	PA, QL (2 syr every 28 days)
TAKHZYRO INJ 300/2ML	4	PA, QL (2 syr every 28 days)
TAKHZYRO INJ 300/2ML	4	PA, QL (2 vials every 28 days)
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA CAP 84MG	4	PA, QL (2 caps every 1 day)
<i>miglustat cap 100 mg</i>	3	PA, QL (3 caps every 1 day)
AGENTS FOR SICKLE CELL DISEASE		
<i>glutamine (sickle cell) powd pack 5 gm</i>	3	PA, QL (6 packets every 1 day)
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	

Drug Name	Drug Tier	Requirements/Limits
COBALAMINS		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	PA
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	1	
FOLIC ACID/FOLATES		
<i>folic acid tab 1 mg</i>	1	
HEMATOPOIETIC GROWTH FACTORS		
ARANESP INJ 10MCG	4	PA
ARANESP INJ 25MCG	4	PA
ARANESP INJ 40MCG	4	PA
ARANESP INJ 60MCG	4	PA
ARANESP INJ 100MCG	4	PA
ARANESP INJ 150MCG	4	PA
ARANESP INJ 200MCG	4	PA
ARANESP INJ 300MCG	4	PA
ARANESP INJ 500MCG	4	PA
DOPTELET TAB 20MG	4	PA
DOPTELET TAB 20MG	4	PA, QL (2 tabs every 1 day)
DOPTELET TAB 20MG	4	PA, QL (3 tabs every 1 day)
FYLNETRA INJ 6MG/0.6	4	PA, QL (2 syr every 28 days)
NIVESTYM INJ 300/0.5	4	PA
NIVESTYM INJ 300MCG	4	PA
NIVESTYM INJ 480/0.8	4	PA
NIVESTYM INJ 480MCG	4	PA
NYVEPRIA INJ 6/0.6ML	4	PA, QL (2 syr every 28 days)
RETACRIT INJ 2000UNIT	4	PA
RETACRIT INJ 3000UNIT	4	PA
RETACRIT INJ 4000UNIT	4	PA
RETACRIT INJ 10000UNT	4	PA
RETACRIT INJ 20000UNI	4	PA
RETACRIT INJ 40000UNT	4	PA
ZIEXTENZO INJ 6/0.6ML	4	PA, QL (3.333 syringes every 28 days)
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	1	
<i>aminocaproic acid tab 500 mg</i>	1	
<i>aminocaproic acid tab 1000 mg</i>	1	
<i>tranexamic acid tab 650 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		

BARBITURATE HYPNOTICS

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

HYPNOTICS - TRICYCLIC AGENTS

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

NON-BARBITURATE HYPNOTICS

<i>estazolam tab 1 mg</i>	1	QL (15 tabs every 25 days)
<i>estazolam tab 2 mg</i>	1	QL (15 tabs every 25 days)
<i>eszopiclone tab 1 mg</i>	1	QL (15 tabs every 25 days)
<i>eszopiclone tab 2 mg</i>	1	QL (15 tabs every 25 days)
<i>eszopiclone tab 3 mg</i>	1	QL (15 tabs every 25 days)
<i>temazepam cap 7.5 mg</i>	1	QL (15 caps every 25 days)
<i>temazepam cap 15 mg</i>	1	QL (15 caps every 25 days)
<i>temazepam cap 22.5 mg</i>	1	QL (15 caps every 25 days)
<i>temazepam cap 30 mg</i>	1	QL (15 caps every 25 days)
<i>triazolam tab 0.25 mg</i>	1	QL (10 tabs every 25 days)
<i>triazolam tab 0.125 mg</i>	1	QL (10 tabs every 25 days)
<i>zaleplon cap 5 mg</i>	1	QL (15 caps every 25 days)
<i>zaleplon cap 10 mg</i>	1	QL (15 caps every 25 days)
<i>zolpidem tartrate tab 5 mg</i>	1	QL (15 tabs every 25 days)
<i>zolpidem tartrate tab 10 mg</i>	1	QL (15 tabs every 25 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	1	QL (15 tabs every 25 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	1	QL (15 tabs every 25 days)

SELECTIVE MELATONIN RECEPTOR AGONISTS

<i>ramelteon tab 8 mg</i>	1	QL (15 tabs every 25 days)
<i>tasimelteon capsule 20 mg</i>	3	PA, QL (1 cap every 1 day)

LAXATIVES**LAXATIVE COMBINATIONS**

<i>CLENPIQ SOL</i>	0	\$0 copay for members age 45 through 75
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	0	\$0 copay for members age 45 through 75
LAXATIVES - MISCELLANEOUS		
lactulose oral crystal packet 10 gm	1	
lactulose oral crystal packet 20 gm	1	
lactulose solution 10 gm/15ml	1	
MACROLIDES		
AZITHROMYCIN		
azithromycin for susp 100 mg/5ml	1	
azithromycin for susp 200 mg/5ml	1	
azithromycin powd pack for susp 1 gm	1	
azithromycin tab 250 mg	1	
azithromycin tab 500 mg	1	
azithromycin tab 600 mg	1	
ZITHROMAX POW 1GM PAK	2	
CLARITHROMYCIN		
clarithromycin for susp 125 mg/5ml	1	
clarithromycin for susp 250 mg/5ml	1	
clarithromycin tab 250 mg	1	
clarithromycin tab 500 mg	1	
clarithromycin tab er 24hr 500 mg	1	
ERYTHROMYCINS		
erythromycin ethylsuccinate for susp 200 mg/5ml	1	
erythromycin ethylsuccinate for susp 400 mg/5ml	1	
erythromycin ethylsuccinate tab 400 mg	1	
erythromycin stearate tab 250 mg	1	
erythromycin tab 250 mg	1	
erythromycin tab 500 mg	1	
erythromycin tab delayed release 250 mg	1	
erythromycin tab delayed release 333 mg	1	
erythromycin tab delayed release 500 mg	1	
erythromycin w/ delayed release particles cap 250 mg	1	
FIDAXOMICIN		
DIFICID SUS	2	PA
DIFICID TAB 200MG	2	PA

Drug Name	Drug Tier	Requirements/Limits
MEDICAL DEVICES AND SUPPLIES		
DIABETIC SUPPLIES		
ACCU-CHEK KIT FASTCLIX	0	OTC
ACCU-CHEK KIT SOFTCLIX	0	OTC
ACCU-CHEK LIQ GUIDE	0	OTC
ACCU-CHEK LIQ SMART	0	OTC
ACCU-CHEK SOL	0	OTC
DEXCOM G6 MIS RECEIVER	0	PA
DEXCOM G6 MIS SENSOR	0	PA, QL (3 sensors every 30 days)
DEXCOM G6 MIS TRANSMIT	0	PA
DEXCOM G7 MIS RECEIVER	0	PA
DEXCOM G7 MIS SENSOR	0	PA, QL (3 sensors every 30 days)
FASTCLIX MIS LANCETS	0	OTC
OMNIPOD 5 DX KIT INT G7G6	0	PA
OMNIPOD 5 DX MIS POD G7G6	0	PA
OMNIPOD 5 G7 KIT INTRO	0	PA
OMNIPOD 5 G7 MIS PODS	0	PA
OMNIPOD 5 LB KIT INTRO G6	0	PA
OMNIPOD 5 LB MIS PODS G6	0	PA
OMNIPOD DASH KIT INTRO	0	PA
OMNIPOD DASH KIT PDM	0	PA
OMNIPOD DASH MIS PODS	0	PA
OMNIPOD MIS CLASSIC	0	PA
ONETOUCH DEL MIS PLUS 30G	0	OTC
ONETOUCH DEL MIS PLUS 33G	0	OTC
SOFTCLIX MIS LANCETS	0	OTC
PARENTERAL THERAPY SUPPLIES		
BD ULTRAFINE INSULIN SYRINGES/NEEDLES	0	
BD ULTRAFINE INSULIN SYRINGES/NEEDLES	0	OTC
BD ULTRAFINE PEN NEEDLES	0	OTC
INS SYR U500 MIS 31GX6MM	0	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG INJ 70MG/ML	2	ST, QL (2 pens every 25 days)
AIMOVIG INJ 140MG/ML	2	ST, QL (1 pen every 25 days)
EMGALITY INJ 100MG/ML	2	ST, QL (3 syringes every 25 days)

Drug Name	Drug Tier	Requirements/Limits
EMGALITY INJ 120MG/ML	2	ST, QL (2 pens every 25 days)
EMGALITY INJ 120MG/ML	2	ST, QL (2 syringes every 25 days)
QULIPTA TAB 10MG	2	ST, QL (30 tabs every 25 days)
QULIPTA TAB 30MG	2	ST, QL (30 tabs every 25 days)
QULIPTA TAB 60MG	2	ST, QL (30 tabs every 25 days)
UBRELVY TAB 50MG	2	ST, QL (16 ea every 25 days)
UBRELVY TAB 100MG	2	ST, QL (16 tabs every 25 days)

SEROTONIN AGONISTS

<i>almotriptan malate tab 6.25 mg</i>	1	QL (12 ea every 25 days)
<i>almotriptan malate tab 6.25 mg</i>	1	QL (12 tabs every 25 days)
<i>almotriptan malate tab 12.5 mg</i>	1	QL (12 ea every 25 days)
<i>almotriptan malate tab 12.5 mg</i>	1	QL (12 tabs every 25 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL (12 ea every 25 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL (12 tabs every 25 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL (12 ea every 25 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL (12 tabs every 25 days)
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	1	QL (18 tabs every 25 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL (12 tabs every 25 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL (12 tabs every 25 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	QL (18 tabs every 25 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL (18 tabs every 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (18 ea every 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (18 tabs every 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (18 ea every 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (18 tabs every 25 days)
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (24 inhalers every 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (12 inhalers every 25 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (12 injections every 25 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (18 injections every 25 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (12 injections every 25 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	1	QL (18 injections every 25 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	1	QL (12 injections every 25 days)
<i>sumatriptan succinate tab 25 mg</i>	1	QL (12 ea every 25 days)
<i>sumatriptan succinate tab 50 mg</i>	1	QL (12 ea every 25 days)
<i>sumatriptan succinate tab 100 mg</i>	1	QL (12 tabs every 25 days)
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	1	QL (12 inhalers every 25 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	1	QL (12 bottles every 25 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	1	QL (12 ea every 25 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 tabs every 25 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (12 tabs every 25 days)
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs every 25 days)
<i>zolmitriptan tab 5 mg</i>	1	QL (12 tabs every 25 days)

MINERALS & ELECTROLYTES**FLUORIDE**

<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0
<i>sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)</i>	0
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0

POTASSIUM

<i>potassium chloride cap er 8 meq</i>	1
<i>potassium chloride cap er 10 meq</i>	1
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride powder packet 20 meq</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 15 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	

MISCELLANEOUS THERAPEUTIC CLASSES**CHELATING AGENTS**

<i>penicillamine cap 250 mg</i>	3	ST
<i>penicillamine tab 250 mg</i>	3	
<i>trientine hcl cap 250 mg</i>	3	ST

IMMUNOMODULATORS

<i>lenalidomide cap 5 mg</i>	0	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 10 mg</i>	0	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 15 mg</i>	0	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 20 mg</i>	0	PA, QL (42 caps every 28 days)
<i>lenalidomide cap 25 mg</i>	0	PA, QL (42 caps every 28 days)
<i>lenalidomide caps 2.5 mg</i>	0	PA, QL (1 cap every 1 day)
REVLIMID CAP 2.5MG	0	PA, QL (1 cap every 1 day)
REVLIMID CAP 5MG	0	PA, QL (1 cap every 1 day)
REVLIMID CAP 10MG	0	PA, QL (1 cap every 1 day)
REVLIMID CAP 15MG	0	PA, QL (1 cap every 1 day)
REVLIMID CAP 20MG	0	PA, QL (42 caps every 28 days)
REVLIMID CAP 25MG	0	PA, QL (42 caps every 28 days)
THALOMID CAP 50MG	0	PA, QL (1 cap every 1 day)
THALOMID CAP 100MG	0	PA, QL (4 caps every 1 day)

IMMUNOSUPPRESSIVE AGENTS

ASTAGRAF XL CAP 0.5MG	2	
ASTAGRAF XL CAP 1MG	2	
ASTAGRAF XL CAP 5MG	2	
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	1	
<i>azathioprine tab 100 mg</i>	1	
CELLCEPT CAP 250MG	2	
CELLCEPT SUS 200MG/ML	2	

Drug Name	Drug Tier	Requirements/Limits
CELLCEPT TAB 500MG	2	
<i>cyclosporine cap 25 mg</i>	1	
<i>cyclosporine cap 100 mg</i>	1	
<i>cyclosporine modified cap 25 mg</i>	1	
<i>cyclosporine modified cap 50 mg</i>	1	
<i>cyclosporine modified cap 100 mg</i>	1	
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	
ENSPRYNG INJ	4	PA, QL (1 syringe every 28 days)
ENVARUSUS XR TAB 0.75MG	2	
ENVARUSUS XR TAB 1MG	2	
ENVARUSUS XR TAB 4MG	2	
<i>everolimus tab 0.5 mg</i>	1	
<i>everolimus tab 0.25 mg</i>	1	
<i>everolimus tab 0.75 mg</i>	1	
<i>everolimus tab 1 mg</i>	1	
<i>mycophenolate mofetil cap 250 mg</i>	1	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	
<i>mycophenolate mofetil tab 500 mg</i>	1	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	
MYFORTIC TAB 180MG	2	
MYFORTIC TAB 360MG	2	
NEORAL CAP 25MG	2	
NEORAL CAP 100MG	2	
NEORAL SOL 100MG/ML	2	
PROGRAF CAP 0.5MG	2	
PROGRAF CAP 1MG	2	
PROGRAF CAP 5MG	2	
PROGRAF GRA 0.2MG	2	
PROGRAF GRA 1MG	2	
RAPAMUNE SOL 1MG/ML	2	
RAPAMUNE TAB 0.5MG	2	
RAPAMUNE TAB 1MG	2	
RAPAMUNE TAB 2MG	2	
SANDIMMUNE CAP 25MG	2	
SANDIMMUNE CAP 100MG	2	
SANDIMMUNE SOL 100MG/ML	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	
<i>sirolimus tab 0.5 mg</i>	1	
<i>sirolimus tab 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sirolimus tab 2 mg</i>	1	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	
<i>tacrolimus cap 5 mg</i>	1	
ZORTRESS TAB 0.5MG	2	
ZORTRESS TAB 0.25MG	2	
ZORTRESS TAB 0.75MG	2	
ZORTRESS TAB 1MG	2	
POTASSIUM REMOVING AGENTS		
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	1	
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	1	
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 200MG/ML	4	PA, QL (4 injections every 28 days)
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	QL (90 ea every 25 days)
<i>nystatin susp 100000 unit/ml</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
DENTAL PRODUCTS		
<i>sodium fluoride cream 1.1%</i>	1	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	1	
<i>sodium fluoride paste 1.1%</i>	1	
<i>sodium fluoride rinse 0.2%</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
THROAT PRODUCTS - MISC.		
<i>cevimeline hcl cap 30 mg</i>	1	
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
MULTIVITAMINS		
PRENATAL VITAMINS		
COMPLETENATE CHW	2	
OB COMPLETE TAB	2	

Drug Name	Drug Tier	Requirements/Limits
<i>prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg</i>	1	
PRENATAL 19 CHW 29-1MG	2	
<i>prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg</i>	1	
<i>prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg</i>	1	
<i>prenatal vit w/ fe fumarate-fa chew tab 29-1 mg</i>	1	
<i>prenatal vit w/ fe fumarate-fa tab 28-1 mg</i>	1	
<i>prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg</i>	1	
SE-NATAL 19 CHW	2	
THRIVITE RX TAB 29-1MG	2	
WESCAP-PN CAP DHA	2	

MUSCULOSKELETAL THERAPY AGENTS**CENTRAL MUSCLE RELAXANTS**

<i>baclofen oral soln 5 mg/5ml</i>	1	
<i>baclofen oral soln 10 mg/5ml</i>	1	
<i>baclofen susp 25 mg/5ml</i>	1	
<i>baclofen tab 5 mg</i>	1	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 15 mg</i>	1	
<i>baclofen tab 20 mg</i>	1	
<i>carisoprodol tab 350 mg</i>	1	QL (84 tabs every 25 days)
<i>chlorzoxazone tab 500 mg</i>	1	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
<i>metaxalone tab 800 mg</i>	1	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
<i>methocarbamol tab 1000 mg</i>	1	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	

DIRECT MUSCLE RELAXANTS

<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	QL (1 package every 25 days)
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	QL (2 bottles every 30 days)
<i>olopatadine hcl nasal soln 0.6%</i>	1	QL (1 package every 25 days)
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL STEROIDS		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	QL (3 packages every 25 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	QL (1 package every 25 days)
SYMPATHOMIMETIC DECONGESTANTS		
<i>epinephrine hcl nasal soln 0.1%</i>	1	
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>riluzole tab 50 mg</i>	1	
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI SOL	4	PA, QL (2 bottles (120 mg) every 24)
EVRYSDI TAB 5MG	4	PA, QL (1 tab every 1 day)
OPHTHALMIC AGENTS		
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl ophth soln 0.5%</i>	1	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	1	
<i>carteolol hcl ophth soln 1%</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	1	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	1	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
<i>timolol maleate preservative free ophth soln 0.5%</i>	1	
<i>timolol maleate preservative free ophth soln 0.25%</i>	1	
CYCLOPLEGIC MYDRIATICS		
<i>atropine sulfate ophth oint 1%</i>	1	
<i>atropine sulfate ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>homatropine hbr ophth soln 5%</i>	1	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
MIOTICS		
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
<i>brimonidine tartrate ophth soln 0.1%</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
OPHTHALMIC ANTI-INFECTIVES		
<i>bacitracin ophth oint 500 unit/gm</i>	1	
<i>bacitracin-polymyxin b ophth oint</i>	1	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
ERYTHROMYCIN OIN 5MG/GM	2	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	1	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
NATACYN SUS 5% OP	2	
<i>neomycin-bacitrac-zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
<i>ofloxacin ophth soln 0.3%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium ophth oint 10%</i>	1	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
TOBREX OIN 0.3% OP	2	
<i>trifluridine ophth soln 1%</i>	1	
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS EMU 0.05% OP	1	PA; Brand preferred over generic
RESTASIS MUL EMU 0.05% OP	2	PA, QL (1 bottle every 21 days)
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	2	PA
OPHTHALMIC LOCAL ANESTHETICS		
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
OPHTHALMIC STEROIDS		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
<i>difluprednate ophth emulsion 0.05%</i>	1	
<i>fluorometholone ophth susp 0.1%</i>	1	
<i>loteprednol etabonate ophth gel 0.5%</i>	1	
<i>loteprednol etabonate ophth susp 0.2%</i>	1	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
PRED SOD PHO SOL 1% OP	2	
<i>prednisolone acetate ophth susp 1%</i>	1	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
OPHTHALMICS - MISC.		
<i>azelastine hcl ophth soln 0.05%</i>	1	
<i>bepotastine besilate ophth soln 1.5%</i>	1	
<i>brinzolamide ophth susp 1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	1	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	
<i>cromolyn sodium ophth soln 4%</i>	1	
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
<i>epinastine hcl ophth soln 0.05%</i>	1	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid otic soln 2%</i>	1	
OTIC ANTI-INFECTIVES		
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
OTIC STEROIDS		
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
OXYTOCICS		
OXYTOCICS		
<i>methylergonovine maleate tab 0.2 mg</i>	1	
PENICILLINS		
AMINOPENICILLINS		
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin cap 500 mg</i>	1	
NATURAL PENICILLINS		
<i>penicillin v potassium for soln 125 mg/5ml</i>	1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>AUGMENTIN SUS 125/5ML</i>	2	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>megestrol acetate susp 625 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	

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

<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i>	1	

ANTI-CATAPLECTIC AGENTS

SOD OXYBATE SOL 500MG/ML	4	PA, QL (18 mL every 1 day)
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ANTIDEMENTIA AGENTS

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	1	
<i>memantine hcl cap er 24hr 21 mg</i>	1	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	1	
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	1	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	1	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	1	
COMBINATION PSYCHOTHERAPEUTICS		
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
FIBROMYALGIA AGENTS		
SAVELLA MIS TITR PAK	2	PA
SAVELLA TAB 12.5MG	2	PA
SAVELLA TAB 25MG	2	PA
SAVELLA TAB 50MG	2	PA
SAVELLA TAB 100MG	2	PA
MOVEMENT DISORDER DRUG THERAPY		
INGREZZA CAP 40-80MG	4	PA, QL (1 cap every 1 day)
INGREZZA CAP 40MG	4	PA, QL (1 cap every 1 day)
INGREZZA CAP 60MG	4	PA, QL (1 cap every 1 day)
INGREZZA CAP 80MG	4	PA, QL (1 cap every 1 day)
<i>tetrabenazine tab 12.5 mg</i>	3	PA, QL (4 tabs every 1 day)
<i>tetrabenazine tab 25 mg</i>	3	PA, QL (2 tabs every 1 day)
MULTIPLE SCLEROSIS AGENTS		
AVONEX PEN KIT 30MCG	4	PA, QL (4 pens every 28 days)
AVONEX PREFL KIT 30MCG	4	PA, QL (4 syringes every 28 days)

Drug Name	Drug Tier	Requirements/Limits
BETASERON INJ 0.3MG	4	PA, QL (14 kits every 28 days)
<i>dalfampridine tab er 12hr 10 mg</i>	3	PA, QL (2 tabs every 1 day)
<i>dimethyl fumarate capsule delayed release 120 mg</i>	3	PA, QL (14 caps every 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg</i>	3	PA, QL (2 caps every 1 day)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	3	PA, QL (2 ea every 1 day)
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	3	PA, QL (1 cap every 1 day)
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	3	PA, QL (1 injection every 1 day)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	3	PA, QL (12 injections every 28 days)
KESIMPTA INJ 20/.4ML	4	PA, QL (1 pens every 28 days)
MAYZENT PAK STARTER	4	PA, QL (12 tabs every 5 days)
MAYZENT PAK STARTER	4	PA, QL (7 tabs every 4 days)
MAYZENT TAB 0.25MG	4	PA, QL (12 tabs every 5 days)
MAYZENT TAB 1MG	4	PA, QL (1 tab every 1 day)
MAYZENT TAB 2MG	4	PA, QL (1 tab every 1 day)
PLEGRIDY INJ	4	PA, QL (1 carton every 28 days)
PLEGRIDY INJ	4	PA, QL (1 kit every 28 days)
PLEGRIDY INJ PEN	4	PA, QL (2 pens every 28 days)
PLEGRIDY INJ STARTER	4	PA, QL (1 pack every 28 days)
PLEGRIDY PEN INJ STARTER	4	PA, QL (1 pack every 28 days)
REBIF INJ 22/0.5	4	PA, QL (12 syringes every 28 days)
REBIF INJ 44/0.5	4	PA, QL (12 syringes every 28 days)
REBIF REBIDO INJ 22/0.5	4	PA, QL (12 syringes every 28 days)
REBIF REBIDO INJ 44/0.5	4	PA, QL (12 syringes every 28 days)
REBIF REBIDO INJ TITRATN	4	PA, QL (12 injections every 28 days)

Drug Name	Drug Tier	Requirements/Limits
REBIF TITRTN INJ PACK	4	PA, QL (12 injections every 28 days)
<i>teriflunomide tab 7 mg</i>	3	PA, QL (1 tab every 1 day)
<i>teriflunomide tab 14 mg</i>	3	PA, QL (1 tab every 1 day)
VUMERITY CAP 231MG	4	PA, QL (4 caps every 1 day)
ZEPOSIA 7DAY CAP STR PACK	4	PA, QL (1 ea every 1 day)
ZEPOSIA CAP 0.92MG	4	PA, QL (1 cap every 1 day)
ZEPOSIA CAP STR KIT	4	PA, QL (1 ea every 1 day)
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
<i>gabapentin (once-daily) tab 300 mg</i>	1	
<i>gabapentin (once-daily) tab 600 mg</i>	1	
<i>pregabalin tab er 24hr 82.5 mg</i>	1	QL (2 tabs every 1 day)
<i>pregabalin tab er 24hr 165 mg</i>	1	QL (2 tabs every 1 day)
<i>pregabalin tab er 24hr 330 mg</i>	1	QL (2 tabs every 1 day)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 1 mg (base equiv)</i>	0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	0	\$0 limited to 2 treatment cycles/year
RESPIRATORY AGENTS - MISC.		
CYSTIC FIBROSIS AGENTS		
KALYDECO GRA 5.8MG	4	PA, QL (2 packets every 1 day)
KALYDECO GRA 13.4MG	4	PA, QL (2 packets every 1 day)
KALYDECO PAK 25MG	4	PA, QL (2 packets every 1 day)
KALYDECO PAK 50MG	4	PA, QL (2 packets every 1 day)
KALYDECO PAK 75MG	4	PA, QL (2 packets every 1 day)
KALYDECO TAB 150MG	4	PA, QL (2 tabs every 1 day)
PULMOZYME SOL 1MG/ML	4	PA, QL (5 mL every 1 day)
SYMDEKO TAB 50-75MG	4	PA, QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
SYMDEKO TAB 100-150	4	PA, QL (2 tabs every 1 day)
TRIKAFTA PAK 59.5MG	4	PA, QL (2 ea every 1 day)
TRIKAFTA PAK 75MG	4	PA, QL (2 ea every 1 day)
TRIKAFTA TAB	4	PA, QL (3 tabs every 1 day)
PULMONARY FIBROSIS AGENTS		
OFEV CAP 100MG	4	PA, QL (2 caps every 1 day)
OFEV CAP 150MG	4	PA, QL (2 caps every 1 day)
<i>pirfenidone cap 267 mg</i>	3	PA, QL (9 caps every 1 day)
<i>pirfenidone tab 267 mg</i>	3	PA, QL (9 tabs every 1 day)
<i>pirfenidone tab 801 mg</i>	3	PA, QL (3 tabs every 1 day)
SULFONAMIDES		
SULFONAMIDES		
<i>sulfadiazine tab 500 mg</i>	1	
TETRACYCLINES		
TETRACYCLINES		
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	1	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>minocycline hcl tab er 24hr biphasic release 105 mg</i>	1	
<i>minocycline hcl tab er 24hr biphasic release 135 mg</i>	1	
<i>tetracycline hcl cap 250 mg</i>	1	QL (120 caps every 25 days)
<i>tetracycline hcl cap 500 mg</i>	1	QL (120 caps every 25 days)

Drug Name	Drug Tier	Requirements/Limits
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THYROID AGENTS**ANTITHYROID AGENTS**

<i>methimazole tab 5 mg</i>	1
<i>methimazole tab 10 mg</i>	1
<i>propylthiouracil tab 50 mg</i>	1

THYROID HORMONES

<i>levothyroxine sodium tab 25 mcg</i>	1
<i>levothyroxine sodium tab 50 mcg</i>	1
<i>levothyroxine sodium tab 75 mcg</i>	1
<i>levothyroxine sodium tab 88 mcg</i>	1
<i>levothyroxine sodium tab 100 mcg</i>	1
<i>levothyroxine sodium tab 112 mcg</i>	1
<i>levothyroxine sodium tab 125 mcg</i>	1
<i>levothyroxine sodium tab 137 mcg</i>	1
<i>levothyroxine sodium tab 150 mcg</i>	1
<i>levothyroxine sodium tab 175 mcg</i>	1
<i>levothyroxine sodium tab 200 mcg</i>	1
<i>levothyroxine sodium tab 300 mcg</i>	1
<i>liothyronine sodium tab 5 mcg</i>	1
<i>liothyronine sodium tab 25 mcg</i>	1
<i>liothyronine sodium tab 50 mcg</i>	1

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS**ANTISPASMODICS**

<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	1
<i>dicyclomine hcl cap 10 mg</i>	1
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1
<i>dicyclomine hcl tab 20 mg</i>	1
<i>glycopyrrolate inj pf soln pref syr 0.4 mg/2ml (0.2 mg/ml)</i>	1
<i>glycopyrrolate inj pf soln prefilled syringe 0.2 mg/ml</i>	1
<i>glycopyrrolate oral soln 1 mg/5ml</i>	1
<i>glycopyrrolate tab 1 mg</i>	1
<i>glycopyrrolate tab 2 mg</i>	1
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1
<i>hyoscyamine sulfate tab 0.125 mg</i>	1
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1
<i>methscopolamine bromide tab 2.5 mg</i>	1
<i>methscopolamine bromide tab 5 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	1	
<i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
MISC. ANTI-ULCER		
<i>sucralfate tab 1 gm</i>	1	
PROTON PUMP INHIBITORS		
<i>dexlansoprazole cap delayed release 30 mg</i>	1	QL (90 caps every year)
<i>dexlansoprazole cap delayed release 60 mg</i>	1	QL (90 caps every year)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	QL (90 caps every year)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	QL (90 caps every year)
<i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i>	1	QL (90 packets every year)
<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	1	QL (90 packets every year)
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	1	QL (90 packets every year)
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	1	QL (90 packets every year)
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	1	QL (90 packets every year)
<i>lansoprazole cap delayed release 15 mg</i>	1	QL (90 caps every year)
<i>lansoprazole cap delayed release 30 mg</i>	1	QL (90 caps every year)
<i>omeprazole cap delayed release 10 mg</i>	1	QL (90 caps every year)
<i>omeprazole cap delayed release 20 mg</i>	1	QL (90 caps every year)
<i>omeprazole cap delayed release 40 mg</i>	1	QL (90 caps every year)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	QL (90 tabs every year)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (90 tabs every year)
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	1	QL (90 vials every year)
<i>rabeprazole sodium ec tab 20 mg</i>	1	QL (90 tabs every year)

Drug Name	Drug Tier	Requirements/Limits
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
ULCER THERAPY COMBINATIONS		
<i>amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg</i>	1	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	1	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	1	
<i>oxybutynin chloride solution 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
<i>mirabegron tab er 24 hr 25 mg</i>	1	
<i>mirabegron tab er 24 hr 50 mg</i>	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride tab 5 mg</i>	1	
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
<i>clindamycin phosphate vaginal cream 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole nitrate vaginal suppos 200 mg</i>	1	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	1	
VAGINAL CONTRACEPTIVE - PH MODULATORS		
PHEXXI GEL	0	
VAGINAL ESTROGENS		
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
IMVEXXY MAIN SUP 4MCG	2	
IMVEXXY MAIN SUP 10MCG	2	
IMVEXXY STRT SUP 4MCG	2	
IMVEXXY STRT SUP 10MCG	2	
VAGIFEM TAB 10MCG	1	Brand preferred over generic
VAGINAL PROGESTINS		
ENDOMETRIN SUP 100MG	2	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine inj 1 mg/ml (1:1000)</i>	1	QL (6 inj every 300 days)
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	1	
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	1	QL (6 inj every 300 days)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	QL (4 pens every 25 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	QL (4 pens every 25 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	1	QL (4 pens every 25 days)
EPIPEN 2-PAK INJ 0.3MG	2	QL (4 pens every 25 days)
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa cap 100 mg</i>	3	PA, QL (6 caps every 1 day)
<i>droxidopa cap 200 mg</i>	3	PA, QL (6 caps every 1 day)
<i>droxidopa cap 300 mg</i>	3	PA, QL (6 caps every 1 day)
VASOPRESSORS		
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	
VITAMINS		
OIL SOLUBLE VITAMINS		
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
<i>phytonadione tab 5 mg</i>	1	

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<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	73

amlodipine besylate-atorvastatin calcium tab 5-10 mg	73
amlodipine besylate-atorvastatin calcium tab 5-20 mg	73
amlodipine besylate-atorvastatin calcium tab 5-40 mg	73
amlodipine besylate-atorvastatin calcium tab 5-80 mg	73
amlodipine besylate-benazepril hcl cap 10- 20 mg	50
amlodipine besylate-benazepril hcl cap 10- 40 mg	50
amlodipine besylate-benazepril hcl cap 2.5- 10 mg	50
amlodipine besylate-benazepril hcl cap 5- 10 mg	50
amlodipine besylate-benazepril hcl cap 5- 20 mg	50
amlodipine besylate-benazepril hcl cap 5- 40 mg	50
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	50
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	50
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	50
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	50
amlodipine besylate tab 10 mg (base equivalent)	71
amlodipine besylate tab 2.5 mg (base equivalent)	71
amlodipine besylate tab 5 mg (base equivalent)	71
amlodipine besylate-valsartan tab 10-160 mg	50
amlodipine besylate-valsartan tab 10-320 mg	50
amlodipine besylate-valsartan tab 5-160 mg	50
amlodipine besylate-valsartan tab 5-320 mg	50
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	50

amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	50
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	50
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	50
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	50
amoxapine tab 100 mg	38
amoxapine tab 150 mg	38
amoxapine tab 25 mg	38
amoxapine tab 50 mg	38
amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg	126
amoxicillin (trihydrate) cap 250 mg	117
amoxicillin (trihydrate) cap 500 mg	118
amoxicillin (trihydrate) chew tab 125 mg	118
amoxicillin (trihydrate) chew tab 250 mg	118
amoxicillin (trihydrate) for susp 125 mg/5ml	118
amoxicillin (trihydrate) for susp 200 mg/5ml	118
amoxicillin (trihydrate) for susp 250 mg/5ml	118
amoxicillin (trihydrate) for susp 400 mg/5ml	118
amoxicillin (trihydrate) tab 500 mg	118
amoxicillin (trihydrate) tab 875 mg	118
amoxicillin & k clavulanate chew tab 200- 28.5 mg	118
amoxicillin & k clavulanate chew tab 400- 57 mg	118
amoxicillin & k clavulanate for susp 200- 28.5 mg/5ml	118
amoxicillin & k clavulanate for susp 250- 62.5 mg/5ml	118
amoxicillin & k clavulanate for susp 400-57 mg/5ml	118
amoxicillin & k clavulanate for susp 600- 42.9 mg/5ml	118
amoxicillin & k clavulanate tab 250-125 mg	118
amoxicillin & k clavulanate tab 500-125 mg	118

amoxicillin & k clavulanate tab 875-125 mg	118	anagrelide hcl cap 1 mg	103
amoxicillin & k clavulanate tab er 12hr 1000- 62.5 mg	118	anastrozole tab 1 mg	55
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg	1	ANNOVERA MIS	79
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg	1	apomorphine hcl soln cartridge 30 mg/3ml	60
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg	1	apraclonidine hcl ophth soln 0.5% (base equivalent)	115
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg	1	aprepitant capsule 125 mg	44
amphetamine-dextroamphetamine cap er 24hr 10 mg	1	aprepitant capsule 40 mg	44
amphetamine-dextroamphetamine cap er 24hr 15 mg	1	aprepitant capsule 80 mg	44
amphetamine-dextroamphetamine cap er 24hr 20 mg	1	aprepitant capsule therapy pack 80 & 125 mg	44
amphetamine-dextroamphetamine cap er 24hr 25 mg	1	ARANESP INJ 100MCG	104
amphetamine-dextroamphetamine cap er 24hr 30 mg	1	ARANESP INJ 10MCG	104
amphetamine-dextroamphetamine cap er 24hr 5 mg	1	ARANESP INJ 150MCG	104
amphetamine-dextroamphetamine tab 10 mg	1	ARANESP INJ 200MCG	104
amphetamine-dextroamphetamine tab 12.5 mg	1	ARANESP INJ 25MCG	104
amphetamine-dextroamphetamine tab 15 mg	1	ARANESP INJ 300MCG	104
amphetamine-dextroamphetamine tab 20 mg	1	ARANESP INJ 40MCG	104
amphetamine-dextroamphetamine tab 30 mg	1	ARANESP INJ 500MCG	104
amphetamine-dextroamphetamine tab 5 mg	1	ARANESP INJ 60MCG	104
amphetamine-dextroamphetamine tab 7.5 mg	1	arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	29
amphetamine sulfate tab 10 mg	1	ARIKAYCE SUS	6
amphetamine sulfate tab 5 mg	1	aripiprazole orally disintegrating tab 10 mg	65
amphotericin b liposome iv for susp 50 mg	44	aripiprazole orally disintegrating tab 15 mg	65
ampicillin cap 500 mg	118	aripiprazole oral solution 1 mg/ml	65
anagrelide hcl cap 0.5 mg	103	aripiprazole tab 10 mg	65
		aripiprazole tab 15 mg	65
		aripiprazole tab 20 mg	65
		aripiprazole tab 2 mg	65
		aripiprazole tab 30 mg	65
		aripiprazole tab 5 mg	65
		ARISTADA INJ 1064MG	65
		ARISTADA INJ 441MG/1.	65
		ARISTADA INJ 662MG/2	65
		ARISTADA INJ 882MG/3	65
		ARISTADA INJ INITIO	65
		armodafinil tab 150 mg	4
		armodafinil tab 200 mg	4
		armodafinil tab 250 mg	4
		armodafinil tab 50 mg	4

ARNUITY ELPT INH 100MCG	28
ARNUITY ELPT INH 200MCG.....	28
ARNUITY ELPT INH 50MCG	28
asenapine maleate sl tab 10 mg (base equiv)	63
asenapine maleate sl tab 2.5 mg (base equiv)	63
asenapine maleate sl tab 5 mg (base equiv)	63
ASMANEX HFA AER 100 MCG	28
ASMANEX HFA AER 200 MCG.....	28
ASMANEX HFA AER 50MCG.....	28
aspirin-dipyridamole cap er 12hr 25-200 mg	103
ASTAGRAF XL CAP 0.5MG.....	110
ASTAGRAF XL CAP 1MG	110
ASTAGRAF XL CAP 5MG	110
atazanavir sulfate cap 150 mg (base equiv)	65
atazanavir sulfate cap 200 mg (base equiv)	65
atazanavir sulfate cap 300 mg (base equiv)	65
atenolol & chlorthalidone tab 100-25 mg ..	50
atenolol & chlorthalidone tab 50-25 mg ..	50
atenolol tab 100 mg	69
atenolol tab 25 mg	69
atenolol tab 50 mg	69
atomoxetine hcl cap 100 mg (base equiv) ..	4
atomoxetine hcl cap 10 mg (base equiv)	4
atomoxetine hcl cap 18 mg (base equiv).....	4
atomoxetine hcl cap 25 mg (base equiv)	4
atomoxetine hcl cap 40 mg (base equiv).....	4
atomoxetine hcl cap 60 mg (base equiv).....	4
atomoxetine hcl cap 80 mg (base equiv).....	4
atorvastatin calcium tab 10 mg (base equivalent)	46
atorvastatin calcium tab 20 mg (base equivalent)	46
atorvastatin calcium tab 40 mg (base equivalent)	46
atorvastatin calcium tab 80 mg (base equivalent)	46

atovaquone-proguanil hcl tab 250-100 mg	53
atovaquone-proguanil hcl tab 62.5-25 mg	53
atovaquone susp 750 mg/5ml	23
atropine sulfate ophth oint 1%	115
atropine sulfate ophth soln 1%	115
AUGMENTIN SUS 125/5ML.....	118
avanafil tab 100 mg	74
avanafil tab 200 mg	74
avanafil tab 50 mg.....	74
AVONEX PEN KIT 30MCG.....	120
AVONEX PREFL KIT 30MCG.....	120
azathioprine tab 100 mg	110
azathioprine tab 50 mg	110
azathioprine tab 75 mg	110
azelaic acid gel 15%	91
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	114
azelastine hcl nasal spray 0.1% (137 mcg/spray).....	114
azelastine hcl ophth soln 0.05%	116
azithromycin for susp 100 mg/5ml	106
azithromycin for susp 200 mg/5ml.....	106
azithromycin powd pack for susp 1 gm ...	106
azithromycin tab 250 mg	106
azithromycin tab 500 mg	106
azithromycin tab 600 mg	106
B	
bacitracin ophth oint 500 unit/gm	115
bacitracin-polymyxin b ophth oint	115
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	116
baclofen oral soln 10 mg/5ml	113
baclofen oral soln 5 mg/5ml	113
baclofen susp 25 mg/5ml	113
baclofen tab 10 mg.....	113
baclofen tab 15 mg	113
baclofen tab 20 mg	113
baclofen tab 5 mg.....	113
balsalazide disodium cap 750 mg	99
BAQSIMI ONE POW 3MG/DOSE	40
BAQSIMI TWO POW 3MG/DOSE	40
BARACLUDE SOL.....	68

BD ULTRAFINE INSULIN		
SYRINGES/NEEDLES	107	
BD ULTRAFINE PEN NEEDLES	107	
BELBUCA MIS 150MCG.....	20	
BELBUCA MIS 300MCG.....	20	
BELBUCA MIS 450MCG.....	20	
BELBUCA MIS 600MCG.....	20	
BELBUCA MIS 750MCG.....	20	
BELBUCA MIS 75MCG	20	
BELBUCA MIS 900MCG.....	20	
<i>benazepril & hydrochlorothiazide tab 10-</i>		
<i>12.5 mg</i>	<i>51</i>	
<i>benazepril & hydrochlorothiazide tab 20-</i>		
<i>12.5 mg</i>	<i>51</i>	
<i>benazepril & hydrochlorothiazide tab 20-25</i>		
<i>mg</i>	<i>51</i>	
<i>benazepril & hydrochlorothiazide tab 5-</i>		
<i>6.25 mg.....</i>	<i>51</i>	
<i>benazepril hcl tab 10 mg</i>	<i>48</i>	
<i>benazepril hcl tab 20 mg.....</i>	<i>48</i>	
<i>benazepril hcl tab 40 mg</i>	<i>48</i>	
<i>benazepril hcl tab 5 mg</i>	<i>48</i>	
BENLYSTA INJ 200MG/ML	112	
benzonatate cap 100 mg	80	
benzonatate cap 150 mg.....	80	
benzonatate cap 200 mg.....	81	
benzoyl peroxide-erythromycin gel 5-3%	81	
benzoyl peroxide foam 9.8%	81	
<i>benzoyl peroxide-hydrocortisone lotion 5-</i>		
<i>0.5%</i>	<i>81</i>	
<i>benzphetamine hcl tab 50 mg</i>	<i>3</i>	
<i>benztropine mesylate tab 0.5 mg</i>	<i>59</i>	
<i>benztropine mesylate tab 1 mg</i>	<i>59</i>	
<i>benztropine mesylate tab 2 mg.....</i>	<i>59</i>	
<i>bepotastine besilate ophth soln 1.5%.....</i>	<i>116</i>	
<i>betaine powder for oral solution</i>	<i>95</i>	
<i>betamethasone dipropionate augmented</i>		
<i>cream 0.05%</i>	<i>88</i>	
<i>betamethasone dipropionate augmented</i>		
<i>gel 0.05%</i>	<i>88</i>	
<i>betamethasone dipropionate augmented</i>		
<i>lotion 0.05%</i>	<i>88</i>	
<i>betamethasone dipropionate augmented</i>		
<i>oint 0.05%.....</i>	<i>88</i>	
<i>betamethasone dipropionate cream 0.05%</i>		<i>88</i>
<i>betamethasone dipropionate lotion 0.05%</i>		<i>88</i>
<i>betamethasone valerate aerosol foam</i>		
<i>0.12%</i>	<i>88</i>	
<i>betamethasone valerate cream 0.1% (base</i>		
<i>equivalent)</i>	<i>88</i>	
<i>betamethasone valerate lotion 0.1% (base</i>		
<i>equivalent)</i>	<i>88</i>	
<i>betamethasone valerate oint 0.1% (base</i>		
<i>equivalent)</i>	<i>88</i>	
BETASERON INJ 0.3MG.....	121	
betaxolol hcl ophth soln 0.5%	114	
betaxolol hcl tab 10 mg	69	
betaxolol hcl tab 20 mg.....	69	
bethanechol chloride tab 10 mg	126	
bethanechol chloride tab 25 mg.....	126	
bethanechol chloride tab 50 mg	126	
bethanechol chloride tab 5 mg.....	126	
BEVESPI AER 9-4.8MCG.....	29	
bexarotene cap 75 mg	59	
bexarotene gel 1%	83	
bicalutamide tab 50 mg	55	
BIKTARVY TAB	65	
bimatoprost ophth soln 0.03%.....	117	
bismuth subcit-metronidazole-tetracycline		
cap 140-125-125 mg.....	126	
<i>bisoprolol & hydrochlorothiazide tab 10-</i>		
<i>6.25 mg.....</i>	<i>51</i>	
<i>bisoprolol & hydrochlorothiazide tab 2.5-</i>		
<i>6.25 mg.....</i>	<i>51</i>	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25</i>		
<i>mg</i>	<i>51</i>	
<i>bisoprolol fumarate tab 10 mg</i>	<i>69</i>	
<i>bisoprolol fumarate tab 5 mg</i>	<i>69</i>	
BKEMV INJ 300/30ML	102	
bosentan tab 125 mg.....	75	
bosentan tab 62.5 mg.....	75	
BOSULIF CAP 100MG	57	
BOSULIF CAP 50MG.....	56	
BOSULIF TAB 100MG	57	
BOSULIF TAB 400MG.....	57	
BOSULIF TAB 500MG.....	57	

BREO ELLIPTA INH 100-25	29
BREO ELLIPTA INH 200-25	29
BREO ELLIPTA INH 50-25MCG	29
BREZTRI AERO AER SPHERE	29
BRILINTA TAB 60MG	103
BRILINTA TAB 90MG	103
brimonidine tartrate gel 0.33% (base equivalent)	91
brimonidine tartrate ophth soln 0.1%	115
brimonidine tartrate ophth soln 0.15%	115
brimonidine tartrate ophth soln 0.2%	115
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	114
brinzolamide ophth susp 1%	116
bromfenac sodium ophth soln 0.07% (base equivalent)	117
bromfenac sodium ophth soln 0.075% (base equivalent)	117
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	117
bromocriptine mesylate cap 5 mg (base equivalent)	60
bromocriptine mesylate tab 2.5 mg (base equivalent)	60
budesonide delayed release particles cap 3 mg	79
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	29
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	29
budesonide inhalation susp 0.25 mg/2ml	28
budesonide inhalation susp 0.5 mg/2ml	28
budesonide inhalation susp 1 mg/2ml	28
budesonide rectal foam 2 mg/act	22
bumetanide tab 0.5 mg	92
bumetanide tab 1 mg	93
bumetanide tab 2 mg	93
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	21
buprenorphine hcl-naloxone hcl sl film 2- 0.5 mg (base equiv)	20
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	21

buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	21
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	21
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	21
buprenorphine hcl sl tab 2 mg (base equiv)	20
buprenorphine hcl sl tab 8 mg (base equiv)	20
buprenorphine td patch weekly 10 mcg/hr	21
buprenorphine td patch weekly 15 mcg/hr	21
buprenorphine td patch weekly 20 mcg/hr	21
buprenorphine td patch weekly 5 mcg/hr	21
buprenorphine td patch weekly 7.5 mcg/hr	21
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	122
bupropion hcl tab 100 mg	35
bupropion hcl tab 75 mg	35
bupropion hcl tab er 12hr 100 mg	35
bupropion hcl tab er 12hr 150 mg	35
bupropion hcl tab er 12hr 200 mg	35
bupropion hcl tab er 24hr 150 mg	35
bupropion hcl tab er 24hr 300 mg	35
buspirone hcl tab 10 mg	24
buspirone hcl tab 15 mg	25
buspirone hcl tab 30 mg	25
buspirone hcl tab 5 mg	24
buspirone hcl tab 7.5 mg	24
butalbital-acetaminophen-cafeine cap 50- 300-40 mg	16
butalbital-acetaminophen-cafeine cap 50- 325-40 mg	16
butalbital-acetaminophen-cafeine tab 50- 325-40 mg	16
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg	20
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	20
butalbital-acetaminophen tab 50-325 mg	16

butalbital-aspirin-caffeine cap 50-325-40 mg	16
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	20
butorphanol tartrate nasal soln 10 mg/ml .21	
C	
cabergoline tab 0.5 mg	97
CABOMETYX TAB 20MG	57
CABOMETYX TAB 40MG	57
CABOMETYX TAB 60MG	57
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	2
calcipotriene foam 0.005%	84
calcipotriene oint 0.005%	84
calcipotriene soln 0.005% (50 mcg/ml) ..	84
calcitonin (salmon) inj 200 unit/ml	93
calcitonin (salmon) nasal soln 200 unit/act	93
calcitriol cap 0.25 mcg	95
calcitriol cap 0.5 mcg	95
calcitriol oint 3 mcg/gm	84
calcitriol oral soln 1 mcg/ml	95
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	101
CALQUENCE TAB 100MG	57
CAMZYOS CAP 10MG	73
CAMZYOS CAP 15MG	73
CAMZYOS CAP 2.5MG	73
CAMZYOS CAP 5MG	73
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	51
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	51
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	51
candesartan cilexetil tab 16 mg	49
candesartan cilexetil tab 32 mg	49
candesartan cilexetil tab 4 mg	49
candesartan cilexetil tab 8 mg	49
capecitabine tab 150 mg	54
capecitabine tab 500 mg	54
CAPRELSA TAB 100MG	57
CAPRELSA TAB 300MG	57

captopril & hydrochlorothiazide tab 25-15 mg	51
captopril & hydrochlorothiazide tab 25-25 mg	51
captopril & hydrochlorothiazide tab 50-15 mg	51
captopril & hydrochlorothiazide tab 50-25 mg	51
captopril tab 100 mg	48
captopril tab 12.5 mg	48
captopril tab 25 mg	48
captopril tab 50 mg	48
carbamazepine cap er 12hr 100 mg	32
carbamazepine cap er 12hr 200 mg	32
carbamazepine cap er 12hr 300 mg	32
carbamazepine chew tab 100 mg	32
carbamazepine chew tab 200 mg	32
carbamazepine susp 100 mg/5ml	32
carbamazepine tab 200 mg	32
carbamazepine tab er 12hr 100 mg	32
carbamazepine tab er 12hr 200 mg	32
carbamazepine tab er 12hr 400 mg	32
carbidopa & levodopa orally disintegrating tab 10-100 mg	60
carbidopa & levodopa orally disintegrating tab 25-100 mg	60
carbidopa & levodopa orally disintegrating tab 25-250 mg	60
carbidopa & levodopa tab 10-100 mg	60
carbidopa & levodopa tab 25-100 mg	60
carbidopa & levodopa tab 25-250 mg	60
carbidopa & levodopa tab er 25-100 mg ..	60
carbidopa & levodopa tab er 50-200 mg ..	60
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	60
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	60
carbidopa-levodopa-entacapone tabs 25-100-200 mg	60
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	60
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	60

carbidopa-levodopa-entacapone tabs 50-200-200 mg	60	cefprozil tab 500 mg	76
carbidopa tab 25 mg	59	cefuroxime axetil tab 250 mg	76
carbinoxamine maleate extended release susp 4 mg/5ml	45	cefuroxime axetil tab 500 mg	76
carbinoxamine maleate soln 4 mg/5ml	45	celecoxib cap 100 mg	12
carbinoxamine maleate tab 4 mg	45	celecoxib cap 200 mg	12
carglumic acid soluble tab 200 mg	95	celecoxib cap 400 mg	12
carisoprodol tab 350 mg	113	celecoxib cap 50 mg	12
carteolol hcl ophth soln 1%	114	CELLCEPT CAP 250MG	110
carvedilol phosphate cap er 24hr 10 mg ..	69	CELLCEPT SUS 200MG/ML	110
carvedilol phosphate cap er 24hr 20 mg ..	69	CELLCEPT TAB 500MG	111
carvedilol phosphate cap er 24hr 40 mg ..	69	cephalexin cap 250 mg	76
carvedilol phosphate cap er 24hr 80 mg ..	69	cephalexin cap 500 mg	76
carvedilol tab 12.5 mg	69	cephalexin cap 750 mg	76
carvedilol tab 25 mg	69	cephalexin for susp 125 mg/5ml	76
carvedilol tab 3.125 mg	69	cephalexin for susp 250 mg/5ml	76
carvedilol tab 6.25 mg	69	cephalexin tab 250 mg	76
caspofungin acetate for iv soln 50 mg	44	cephalexin tab 500 mg	76
caspofungin acetate for iv soln 70 mg	44	CERDELGA CAP 84MG	103
cefaclor cap 250 mg	76	cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	45
cefaclor cap 500 mg	76	cetorelix acetate for inj kit 0.25 mg	95
cefaclor for susp 125 mg/5ml	76	cevimeline hcl cap 30 mg	112
cefaclor for susp 250 mg/5ml	76	chenodiol tab 250 mg	99
cefaclor for susp 375 mg/5ml	76	chlordiazepoxide-amitriptyline tab 10-25 mg	120
cefadroxil cap 500 mg	76	chlordiazepoxide-amitriptyline tab 5-12.5 mg	120
cefadroxil for susp 250 mg/5ml	76	chlordiazepoxide hcl cap 10 mg	25
cefadroxil for susp 500 mg/5ml	76	chlordiazepoxide hcl cap 25 mg	25
cefadroxil tab 1 gm	76	chlordiazepoxide hcl cap 5 mg	25
cefdinir cap 300 mg	77	chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg	124
cefdinir for susp 125 mg/5ml	77	chlorhexidine gluconate soln 0.12%	112
cefdinir for susp 250 mg/5ml	77	chloroquine phosphate tab 250 mg	53
cefixime cap 400 mg	77	chloroquine phosphate tab 500 mg	53
cefixime for susp 100 mg/5ml	77	chlorpromazine hcl inj 25 mg/ml	64
cefixime for susp 200 mg/5ml	77	chlorpromazine hcl inj 50 mg/2ml	64
cefpodoxime proxetil for susp 100 mg/5ml	77	chlorpromazine hcl tab 100 mg	64
cefpodoxime proxetil for susp 50 mg/5ml	77	chlorpromazine hcl tab 10 mg	64
cefpodoxime proxetil tab 100 mg	77	chlorpromazine hcl tab 200 mg	64
cefpodoxime proxetil tab 200 mg	77	chlorpromazine hcl tab 25 mg	64
cefprozil for susp 125 mg/5ml	76	chlorpromazine hcl tab 50 mg	64
cefprozil for susp 250 mg/5ml	76	chlorthalidone tab 25 mg	93
cefprozil tab 250 mg	76	chlorthalidone tab 50 mg	93

<i>chlorzoxazone tab 500 mg</i>	113	<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	36
<i>cholestyramine light powder 4 gm/dose</i>	46	<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	36
<i>cholestyramine light powder packets 4 gm</i>	46	<i>clarithromycin for susp 125 mg/5ml</i>	106
<i>cholestyramine powder 4 gm/dose</i>	46	<i>clarithromycin for susp 250 mg/5ml</i>	106
<i>cholestyramine powder packets 4 gm</i>	46	<i>clarithromycin tab 250 mg</i>	106
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	46	<i>clarithromycin tab 500 mg</i>	106
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	46	<i>clarithromycin tab er 24hr 500 mg</i>	106
<i>ciclopirox gel 0.77%</i>	83	<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	45
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	83	<i>clemastine fumarate tab 2.68 mg</i>	45
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	83	<i>CLENPIQ SOL</i>	105
<i>ciclopirox shampoo 1%</i>	83	<i>CLIMARA PRO DIS WEEKLY</i>	97
<i>ciclopirox solution 8%</i>	83	<i>clindamycin hcl cap 150 mg</i>	23
<i>cilostazol tab 100 mg</i>	103	<i>clindamycin hcl cap 300 mg</i>	23
<i>cilostazol tab 50 mg</i>	103	<i>clindamycin hcl cap 75 mg</i>	23
<i>CIMDUO TAB 300-300</i>	65	<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	23
<i>cimetidine hcl soln 300 mg/5ml</i>	125	<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	82
<i>cimetidine tab 300 mg</i>	125	<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	82
<i>cimetidine tab 400 mg</i>	125	<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	81
<i>cimetidine tab 800 mg</i>	125	<i>clindamycin phosphate foam 1%</i>	81
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	95	<i>clindamycin phosphate gel 1% (twice-daily)</i>	81
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	95	<i>clindamycin phosphate lotion 1%</i>	81
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	95	<i>clindamycin phosphate soln 1%</i>	81
<i>CIPRO (10%) SUS 500MG/5</i>	98	<i>clindamycin phosphate swab 1%</i>	81
<i>CIPRO (5%) SUS 250MG/5</i>	98	<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	82
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	117	<i>clindamycin phosphate vaginal cream 2%</i>	126
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	115	<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	81
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	117	<i>clobazam suspension 2.5 mg/ml</i>	32
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	98	<i>clobazam tab 10 mg</i>	32
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	98	<i>clobazam tab 20 mg</i>	32
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	98	<i>clobetasol propionate cream 0.025%</i>	88
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	98	<i>clobetasol propionate cream 0.05%</i>	88
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	36	<i>clobetasol propionate emollient base cream 0.05%</i>	88
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	36		

<i>clobetasol propionate foam 0.05%</i>	88
<i>clobetasol propionate gel 0.05%</i>	88
<i>clobetasol propionate lotion 0.05%</i>	88
<i>clobetasol propionate oint 0.05%</i>	88
<i>clobetasol propionate shampoo 0.05%</i> ...	88
<i>clobetasol propionate soln 0.05%</i>	88
<i>clomiphene citrate tab 50 mg</i>	94
<i>clomipramine hcl cap 25 mg</i>	38
<i>clomipramine hcl cap 50 mg</i>	38
<i>clomipramine hcl cap 75 mg</i>	38
<i>clonazepam orally disintegrating tab 0.125 mg</i>	32
<i>clonazepam orally disintegrating tab 0.25 mg</i>	32
<i>clonazepam orally disintegrating tab 0.5 mg</i>	32
<i>clonazepam orally disintegrating tab 1 mg</i>	32
<i>clonazepam orally disintegrating tab 2 mg</i>	32
<i>clonazepam tab 0.5 mg</i>	32
<i>clonazepam tab 1 mg</i>	32
<i>clonazepam tab 2 mg</i>	32
<i>clonidine hcl tab 0.1 mg</i>	49
<i>clonidine hcl tab 0.2 mg</i>	49
<i>clonidine hcl tab 0.3 mg</i>	49
<i>clonidine hcl tab er 12hr 0.1 mg</i>	4
<i>clonidine tab er 24hr 0.17 mg</i>	49
<i>clonidine td patch weekly 0.1 mg/24hr</i>	49
<i>clonidine td patch weekly 0.2 mg/24hr</i>	49
<i>clonidine td patch weekly 0.3 mg/24hr</i>	49
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	103
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	103
<i>clorazepate dipotassium tab 15 mg</i>	26
<i>clorazepate dipotassium tab 3.75 mg</i>	25
<i>clorazepate dipotassium tab 7.5 mg</i>	25
<i>clotrimazole troche 10 mg</i>	112
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	83
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	83

<i>clozapine orally disintegrating tab 100 mg</i>	63
<i>clozapine orally disintegrating tab 12.5 mg</i>	63
<i>clozapine orally disintegrating tab 150 mg</i>	63
<i>clozapine orally disintegrating tab 200 mg</i>	63
<i>clozapine orally disintegrating tab 25 mg</i>	63
<i>clozapine tab 100 mg</i>	63
<i>clozapine tab 200 mg</i>	63
<i>clozapine tab 25 mg</i>	63
<i>clozapine tab 50 mg</i>	63
<i>coal tar soln 20%</i>	91
<i>codeine sulfate tab 30 mg</i>	16
<i>CODEINE SULF TAB 15MG</i>	16
<i>CODEINE SULF TAB 60MG</i>	16
<i>colchicine tab 0.6 mg</i>	102
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	102
<i>colesevelam hcl packet for susp 3.75 gm</i>	46
<i>colesevelam hcl tab 625 mg</i>	46
<i>colestipol hcl granule packets 5 gm</i>	46
<i>colestipol hcl granules 5 gm</i>	46
<i>colestipol hcl tab 1 gm</i>	46
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	23
<i>COMPLETENATE CHW</i>	112
<i>COPIKTRA CAP 15MG</i>	57
<i>COPIKTRA CAP 25MG</i>	57
<i>CORLANOR SOL 5MG/5ML</i>	76
<i>CORTROPHIN INJ 40/0.5ML</i>	94
<i>CORTROPHIN INJ 80UNT/ML</i>	94
<i>COSENTYX INJ 150MG/ML</i>	84
<i>COSENTYX INJ 300DOSE</i>	85
<i>COSENTYX INJ 75MG/0.5</i>	84
<i>COSENTYX PEN INJ 150MG/ML</i>	85
<i>COSENTYX PEN INJ 300DOSE</i>	85
<i>COSENTYX UNO INJ 300/2ML</i>	85
<i>CREON CAP 12000UNT</i>	92
<i>CREON CAP 24000UNT</i>	92
<i>CREON CAP 3000UNIT</i>	92
<i>CREON CAP 36000UNT</i>	92
<i>CREON CAP 6000UNIT</i>	92

cromolyn sodium ophth soln 4%	117
cromolyn sodium oral conc 100 mg/5ml ..	99
cromolyn sodium soln nebu 20 mg/2ml ...	27
crotonamiton lotion 10%	91
cyanocobalamin inj 1000 mcg/ml.....	104
cyanocobalamin nasal spray 500 mcg/0.1ml.....	104
cyclobenzaprine hcl tab 10 mg	113
cyclobenzaprine hcl tab 5 mg.....	113
cyclopentolate hcl ophth soln 1%	115
cyclophosphamide cap 25 mg.....	54
cyclophosphamide cap 50 mg.....	54
CYCLOPHOSPH TAB 25MG.....	54
CYCLOPHOSPH TAB 50MG.....	54
cycloserine cap 250 mg	53
cyclosporine cap 100 mg	111
cyclosporine cap 25 mg	111
cyclosporine modified cap 100 mg.....	111
cyclosporine modified cap 25 mg.....	111
cyclosporine modified cap 50 mg	111
cyclosporine modified oral soln 100 mg/ml	111
cyproheptadine hcl syrup 2 mg/5ml	45
cyproheptadine hcl tab 4 mg	45
CYSTAGON CAP 150MG.....	101
CYSTAGON CAP 50MG	101

D

dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	32
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	32
dabigatran etexilate mesylate cap 75 mg (etexilate base eq)	31
dalfampridine tab er 12hr 10 mg	121
danazol cap 100 mg.....	21
danazol cap 200 mg	21
danazol cap 50 mg	21
dantrolene sodium cap 100 mg	113
dantrolene sodium cap 25 mg.....	113
dantrolene sodium cap 50 mg.....	113
dapsone gel 5%	82
dapsone gel 7.5%	82
dapsone tab 100 mg	23
dapsone tab 25 mg	23

daptomycin for iv soln 350 mg	23
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	126
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	126
darunavir tab 600 mg	65
darunavir tab 800 mg	65
dasatinib tab 100 mg	57
dasatinib tab 140 mg.....	57
dasatinib tab 20 mg	57
dasatinib tab 50 mg	57
dasatinib tab 70 mg	57
dasatinib tab 80 mg	57
deferasirox granules packet 180 mg	43
deferasirox granules packet 360 mg	43
deferasirox granules packet 90 mg.....	43
deferasirox tab 180 mg.....	43
deferasirox tab 360 mg.....	43
deferasirox tab 90 mg	43
deferasirox tab for oral susp 125 mg	43
deferasirox tab for oral susp 250 mg	43
deferasirox tab for oral susp 500 mg	43
deferiprone tab 1000 mg	43
deferiprone tab 500 mg	43
deflazacort susp 22.75 mg/ml.....	79
deflazacort tab 18 mg	79
deflazacort tab 30 mg	79
deflazacort tab 36 mg	79
deflazacort tab 6 mg.....	79
demeclocycline hcl tab 150 mg	123
demeclocycline hcl tab 300 mg	123
DESCOVY TAB 120-15MG.....	65
DESCOVY TAB 200/25MG	66
desipramine hcl tab 100 mg	38
desipramine hcl tab 10 mg	38
desipramine hcl tab 150 mg.....	38
desipramine hcl tab 25 mg	38
desipramine hcl tab 50 mg	38
desipramine hcl tab 75 mg	38
desloratadine tab 5 mg	45
desloratadine tab orally disintegrating 2.5 mg	45
desloratadine tab orally disintegrating 5 mg	45

desmopressin acetate nasal spray soln 0.01%	96	dexamethasone tab therapy pack 1.5 mg (49)	79
desmopressin acetate nasal spray soln 0.01% (refrigerated)	96	dexamethasone tab therapy pack 1.5 mg (51)	79
desmopressin acetate tab 0.1 mg	96	DEXCOM G6 MIS RECEIVER	107
desmopressin acetate tab 0.2 mg	96	DEXCOM G6 MIS SENSOR	107
desogest-eth estrad & eth estrad tab 0.15- 0.02/0.01 mg(21/5)	77	DEXCOM G6 MIS TRANSMIT	107
desogest-ethin est tab 0.1-0.025/0.125- 0.025/0.15-0.025mg-mg	77	DEXCOM G7 MIS RECEIVER	107
desogestrel & ethinyl estradiol tab 0.15 mg- 30 mcg	77	DEXCOM G7 MIS SENSOR	107
desonide cream 0.05%	88	dexlansoprazole cap delayed release 30 mg	125
desonide lotion 0.05%	89	dexlansoprazole cap delayed release 60 mg	125
desonide oint 0.05%	89	dexmethylphenidate hcl cap er 24 hr 10 mg	5
desoximetasone cream 0.05%	89	dexmethylphenidate hcl cap er 24 hr 15 mg	5
desoximetasone cream 0.25%	89	dexmethylphenidate hcl cap er 24 hr 20 mg	5
desoximetasone gel 0.05%	89	dexmethylphenidate hcl cap er 24 hr 25 mg	5
desoximetasone oint 0.25%	89	dexmethylphenidate hcl cap er 24 hr 30 mg	5
desoximetasone spray 0.25%	89	dexmethylphenidate hcl cap er 24 hr 35 mg	5
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	37	dexmethylphenidate hcl cap er 24 hr 40 mg	5
desvenlafaxine succinate tab er 24hr 25 mg (base equiv)	37	dexmethylphenidate hcl cap er 24 hr 5 mg 4	
desvenlafaxine succinate tab er 24hr 50 mg (base equiv)	37	dexmethylphenidate hcl tab 10 mg	5
dexamethasone elixir 0.5 mg/5ml	79	dexmethylphenidate hcl tab 2.5 mg	5
dexamethasone sodium phosphate ophth soln 0.1%	116	dexmethylphenidate hcl tab 5 mg	5
dexamethasone soln 0.5 mg/5ml	79	dextroamphetamine sulfate cap er 24hr 10 mg	1
dexamethasone tab 0.5 mg	79	dextroamphetamine sulfate cap er 24hr 15 mg	1
dexamethasone tab 0.75 mg	79	dextroamphetamine sulfate cap er 24hr 5 mg	1
dexamethasone tab 1.5 mg	79	dextroamphetamine sulfate oral solution 5 mg/5ml	1
dexamethasone tab 1 mg	79	dextroamphetamine sulfate tab 10 mg	2
dexamethasone tab 2 mg	79	dextroamphetamine sulfate tab 15 mg	2
dexamethasone tab 4 mg	79	dextroamphetamine sulfate tab 2.5 mg	1
dexamethasone tab 6 mg	79	dextroamphetamine sulfate tab 20 mg	2
dexamethasone tab therapy pack 1.5 mg (21)	79	dextroamphetamine sulfate tab 30 mg	2
dexamethasone tab therapy pack 1.5 mg (27)	79		
dexamethasone tab therapy pack 1.5 mg (35)	79		

dextroamphetamine sulfate tab 5 mg	2	digoxin tab 125 mcg (0.125 mg)	72
dextroamphetamine sulfate tab 7.5 mg	2	digoxin tab 250 mcg (0.25 mg)	73
diazepam conc 5 mg/ml	26	digoxin tab 62.5 mcg (0.0625 mg)	72
diazepam oral soln 1 mg/ml	26	diltiazem hcl cap er 12hr 120 mg	71
diazepam rectal gel delivery system 10 mg		diltiazem hcl cap er 12hr 60 mg	71
.....	32	diltiazem hcl cap er 12hr 90 mg	71
diazepam rectal gel delivery system 2.5 mg		diltiazem hcl cap er 24hr 120 mg	71
.....	32	diltiazem hcl cap er 24hr 180 mg	71
diazepam rectal gel delivery system 20 mg		diltiazem hcl cap er 24hr 240 mg	71
.....	32	diltiazem hcl coated beads cap er 24hr 120	
diazepam tab 10 mg	26	mg	71
diazepam tab 2 mg	26	diltiazem hcl coated beads cap er 24hr 180	
diazepam tab 5 mg	26	mg	71
diazoxide susp 50 mg/ml	40	diltiazem hcl coated beads cap er 24hr 240	
dichlorphenamide tab 50 mg	92	mg	71
diclofenac epolamine patch 1.3%	83	diltiazem hcl coated beads cap er 24hr 300	
diclofenac potassium tab 50 mg	12	mg	71
diclofenac sodium (actinic keratoses) gel		diltiazem hcl coated beads cap er 24hr 360	
3%	84	mg	71
diclofenac sodium ophth soln 0.1%	117	diltiazem hcl extended release beads cap	
diclofenac sodium soln 1.5%	83	er 24hr 120 mg	71
diclofenac sodium tab delayed release 25		diltiazem hcl extended release beads cap	
mg	12	er 24hr 180 mg	71
diclofenac sodium tab delayed release 50		diltiazem hcl extended release beads cap	
mg	12	er 24hr 240 mg	71
diclofenac sodium tab delayed release 75		diltiazem hcl extended release beads cap	
mg	12	er 24hr 300 mg	71
diclofenac sodium tab er 24hr 100 mg	12	diltiazem hcl extended release beads cap	
diclofenac w/ misoprostol tab delayed		er 24hr 360 mg	71
release 50-0.2 mg	12	diltiazem hcl extended release beads cap	
diclofenac w/ misoprostol tab delayed		er 24hr 420 mg	71
release 75-0.2 mg	12	diltiazem hcl tab 120 mg	71
dicloxacillin sodium cap 250 mg	118	diltiazem hcl tab 30 mg	71
dicloxacillin sodium cap 500 mg	118	diltiazem hcl tab 60 mg	71
dicyclomine hcl cap 10 mg	124	diltiazem hcl tab 90 mg	71
dicyclomine hcl oral soln 10 mg/5ml	124	diltiazem hcl tab er 24hr 180 mg	71
dicyclomine hcl tab 20 mg	124	diltiazem hcl tab er 24hr 240 mg	71
diethylpropion hcl tab 25 mg	3	diltiazem hcl tab er 24hr 300 mg	71
diethylpropion hcl tab er 24hr 75 mg	3	diltiazem hcl tab er 24hr 360 mg	71
DIFICID SUS	106	diltiazem hcl tab er 24hr 420 mg	71
DIFICID TAB 200MG	106	dimethyl fumarate capsule delayed release	
diflunisal tab 500 mg	16	120 mg	121
difluprednate ophth emulsion 0.05%	116	dimethyl fumarate capsule delayed release	
digoxin oral soln 0.05 mg/ml	72	240 mg	121

<i>dimethyl fumarate capsule dr starter pack</i>		<i>doxazosin mesylate tab 8 mg</i>	49
120 mg & 240 mg.....	121	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	
<i>diphenoxylate w/ atropine liq 2.5-0.025</i>			105
mg/5ml	43	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	
<i>diphenoxylate w/ atropine tab 2.5-0.025</i>			105
mg	43	<i>doxepin hcl cap 100 mg</i>	38
<i>dipyridamole tab 25 mg</i>	103	<i>doxepin hcl cap 10 mg</i>	38
<i>dipyridamole tab 50 mg</i>	103	<i>doxepin hcl cap 150 mg</i>	38
<i>dipyridamole tab 75 mg</i>	103	<i>doxepin hcl cap 25 mg</i>	38
<i>disopyramide phosphate cap 100 mg</i>	26	<i>doxepin hcl cap 50 mg</i>	38
<i>disopyramide phosphate cap 150 mg</i>	26	<i>doxepin hcl cap 75 mg</i>	38
<i>disulfiram tab 250 mg</i>	119	<i>doxepin hcl conc 10 mg/ml</i>	38
<i>disulfiram tab 500 mg</i>	119	<i>doxepin hcl cream 5%</i>	84
<i>divalproex sodium cap delayed release</i>		<i>doxercalciferol cap 0.5 mcg</i>	95
sprinkle 125 mg	35	<i>doxercalciferol cap 1 mcg</i>	95
<i>divalproex sodium tab delayed release 125</i>		<i>doxercalciferol cap 2.5 mcg</i>	95
mg	35	<i>doxycycline hyclate cap 100 mg</i>	123
<i>divalproex sodium tab delayed release 250</i>		<i>doxycycline hyclate cap 50 mg</i>	123
mg	35	<i>doxycycline hyclate tab 100 mg</i>	123
<i>divalproex sodium tab delayed release 500</i>		<i>doxycycline hyclate tab 20 mg</i>	123
mg	35	<i>doxycycline monohydrate cap 100 mg</i>	123
<i>divalproex sodium tab er 24 hr 250 mg</i>	35	<i>doxycycline monohydrate cap 50 mg</i>	123
<i>divalproex sodium tab er 24 hr 500 mg</i>	35	<i>doxycycline monohydrate for susp 25</i>	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	27	mg/5ml.....	123
<i>dofetilide cap 250 mcg (0.25 mg)</i>	27	<i>doxycycline monohydrate tab 100 mg</i>	123
<i>dofetilide cap 500 mcg (0.5 mg)</i>	27	<i>doxycycline monohydrate tab 150 mg</i>	123
DOLOBID TAB 250MG	16	<i>doxycycline monohydrate tab 50 mg</i>	123
<i>donepezil hydrochloride orally</i>		<i>doxycycline monohydrate tab 75 mg</i>	123
disintegrating tab 10 mg	119	<i>doxylamine-pyridoxine tab delayed release</i>	
<i>donepezil hydrochloride orally</i>		10-10 mg	44
disintegrating tab 5 mg.....	119	<i>dronabinol cap 10 mg</i>	44
<i>donepezil hydrochloride tab 10 mg</i>	119	<i>dronabinol cap 2.5 mg</i>	44
<i>donepezil hydrochloride tab 23 mg</i>	119	<i>dronabinol cap 5 mg</i>	44
<i>donepezil hydrochloride tab 5 mg</i>	119	<i>drospirenone-ethinyl estradiol tab 3-0.02</i>	
DOPTelet TAB 20MG	104	mg.....	77
<i>dorzolamide hcl ophth soln 2%</i>	117	<i>drospirenone-ethinyl estradiol tab 3-0.03</i>	
<i>dorzolamide hcl-timolol maleate ophth soln</i>		mg.....	77
2-0.5%	114	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>dorzolamide hcl-timolol maleate pf ophth</i>		tab 3-0.02-0.451 mg	77
soln 2-0.5%	114	<i>drospirenone-ethinyl estrad-levomefolate</i>	
DOVATO TAB 50-300MG	66	tab 3-0.03-0.451 mg	77
<i>doxazosin mesylate tab 1 mg</i>	49	<i>droxidopa cap 100 mg</i>	127
<i>doxazosin mesylate tab 2 mg</i>	49	<i>droxidopa cap 200 mg</i>	127
<i>doxazosin mesylate tab 4 mg</i>	49	<i>droxidopa cap 300 mg</i>	127

DULERA AER 100-5MCG.....	29
DULERA AER 200-5MCG.....	29
DULERA AER 50-5MCG	29
duloxetine hcl enteric coated pellets cap 20 mg (base eq)	37
duloxetine hcl enteric coated pellets cap 30 mg (base eq)	37
duloxetine hcl enteric coated pellets cap 40 mg (base eq)	37
duloxetine hcl enteric coated pellets cap 60 mg (base eq)	37
DUOBRII LOT	89
DUPIXENT INJ 200/1.14	90
DUPIXENT INJ 200MG.....	90
DUPIXENT INJ 300/2ML	90
dutasteride cap 0.5 mg	101
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	101

E

EBGLYSS INJ 250/2ML.....	90
econazole nitrate cream 1%	83
EDURANT TAB 25MG	66
efavirenz cap 200 mg	66
efavirenz cap 50 mg	66
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	66
efavirenz-lamivudine-tenofovir df tab 400- 300-300 mg.....	66
efavirenz-lamivudine-tenofovir df tab 600- 300-300 mg.....	66
efavirenz tab 600 mg	66
eletriptan hydrobromide tab 20 mg (base equivalent)	108
eletriptan hydrobromide tab 40 mg (base equivalent)	108
ELLA TAB 30MG.....	79
EMCYT CAP 140MG	55
EMGALITY INJ 100MG/ML	107
EMGALITY INJ 120MG/ML	108
emtricitabine caps 200 mg.....	66
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg.....	66
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	66
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	66
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	66
EMTRIVA SOL 10MG/ML	66
EMVERM CHW 100MG.....	22
enalapril maleate & hydrochlorothiazide tab 10-25 mg	51
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	51
enalapril maleate oral soln 1 mg/ml.....	48
enalapril maleate tab 10 mg.....	48
enalapril maleate tab 2.5 mg	48
enalapril maleate tab 20 mg	48
enalapril maleate tab 5 mg	48
ENBREL INJ 25/0.5ML.....	15
ENBREL INJ 25MG.....	15
ENBREL INJ 50MG/ML.....	15
ENBREL MINI INJ 50MG/ML	16
ENBREL SRCLK INJ 50MG/ML.....	16
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enoxaparin sodium inj 300 mg/3ml	31
enoxaparin sodium inj soln pref syr 100 mg/ml	31
enoxaparin sodium inj soln pref syr 120 mg/0.8ml	31
enoxaparin sodium inj soln pref syr 150 mg/ml	31
enoxaparin sodium inj soln pref syr 30 mg/0.3ml	31
enoxaparin sodium inj soln pref syr 40 mg/0.4ml	31
enoxaparin sodium inj soln pref syr 60 mg/0.6ml	31
enoxaparin sodium inj soln pref syr 80 mg/0.8ml	31
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entacapone tab 200 mg.....	60
entecavir tab 0.5 mg.....	68
entecavir tab 1 mg.....	68
ENTRESTO CAP 15-16MG	73
ENTRESTO CAP 6-6MG	73
ENTRESTO TAB 24-26MG	73

ENTRESTO TAB 49-51MG.....	73	<i>erythromycin tab 500 mg.....</i>	106
ENTRESTO TAB 97-103MG.....	73	<i>erythromycin tab delayed release 250 mg</i>	
ENVARBUS XR TAB 0.75MG	111	<i>.....</i>	106
ENVARBUS XR TAB 1MG.....	111	<i>erythromycin tab delayed release 333 mg</i>	
ENVARBUS XR TAB 4MG.....	111	<i>.....</i>	106
EPCLUSA PAK 150-37.5.....	68	<i>erythromycin tab delayed release 500 mg</i>	
EPCLUSA PAK 200-50MG.....	68	<i>.....</i>	106
EPCLUSA TAB 200-50MG.....	68	<i>erythromycin w/ delayed release particles</i>	
EPCLUSA TAB 400-100	68	<i>cap 250 mg.....</i>	106
<i>epinastine hcl ophth soln 0.05%</i>	117	<i>escitalopram oxalate soln 5 mg/5ml (base</i>	
<i>epinephrine hcl nasal soln 0.1%</i>	114	<i>equiv)</i>	36
<i>epinephrine inj 1 mg/ml (1:1000)</i>	127	<i>escitalopram oxalate tab 10 mg (base</i>	
<i>epinephrine inj 30 mg/30ml (1 mg/ml)</i>		<i>equiv)</i>	36
<i>(1:1000)</i>	127	<i>escitalopram oxalate tab 20 mg (base</i>	
<i>epinephrine solution auto-injector 0.15</i>		<i>equiv)</i>	36
<i>mg/0.15ml (1:1000)</i>	127	<i>escitalopram oxalate tab 5 mg (base equiv)</i>	
<i>epinephrine solution auto-injector 0.15</i>		<i>.....</i>	36
<i>mg/0.3ml (1:2000)</i>	127	<i>esomeprazole magnesium cap delayed</i>	
<i>epinephrine solution auto-injector 0.3</i>		<i>release 20 mg (base eq)</i>	125
<i>mg/0.3ml (1:1000).....</i>	127	<i>esomeprazole magnesium cap delayed</i>	
EPIPEN 2-PAK INJ 0.3MG.....	127	<i>release 40 mg (base eq)</i>	125
<i>eplerenone tab 25 mg</i>	52	<i>esomeprazole magnesium for delayed</i>	
<i>eplerenone tab 50 mg</i>	52	<i>release susp pack 2.5 mg</i>	125
<i>ergocalciferol cap 1.25 mg (50000 unit) .</i>	127	<i>esomeprazole magnesium for delayed</i>	
<i>ergoloid mesylates tab 1 mg.....</i>	122	<i>release susp packet 10 mg</i>	125
ERIVEDGE CAP 150MG	55	<i>esomeprazole magnesium for delayed</i>	
ERLEADA TAB 240MG	55	<i>release susp packet 20 mg.....</i>	125
ERLEADA TAB 60MG	55	<i>esomeprazole magnesium for delayed</i>	
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	55	<i>release susp packet 40 mg</i>	125
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	55	<i>esomeprazole magnesium for delayed</i>	
<i>erlotinib hcl tab 25 mg (base equivalent)..</i>	55	<i>release susp packet 5 mg.....</i>	125
<i>erythromycin ethylsuccinate for susp 200</i>		<i>estazolam tab 1 mg.....</i>	105
<i>mg/5ml</i>	106	<i>estazolam tab 2 mg.....</i>	105
<i>erythromycin ethylsuccinate for susp 400</i>		<i>esterified estrogens & methyltestosterone</i>	
<i>mg/5ml</i>	106	<i>tab 0.625-1.25 mg</i>	97
<i>erythromycin ethylsuccinate tab 400 mg</i>		<i>esterified estrogens & methyltestosterone</i>	
<i>.....</i>	106	<i>tab 1.25-2.5 mg</i>	97
<i>erythromycin gel 2%</i>	82	<i>estradiol & norethindrone acetate tab 0.5-</i>	
ERYTHROMYCIN OIN 5MG/GM	115	<i>0.1 mg.....</i>	97
<i>erythromycin ophth oint 5 mg/gm.....</i>	115	<i>estradiol & norethindrone acetate tab 1-0.5</i>	
<i>erythromycin pads 2%</i>	82	<i>mg</i>	97
<i>erythromycin soln 2%</i>	82	<i>estradiol gel 0.06% (0.75 mg/1.25 gm</i>	
<i>erythromycin stearate tab 250 mg</i>	106	<i>metered-dose pump)</i>	98
<i>erythromycin tab 250 mg.....</i>	106	<i>estradiol tab 0.5 mg.....</i>	98

estradiol tab 1 mg	98	etodolac tab 500 mg	12
estradiol tab 2 mg	98	etodolac tab er 24hr 400 mg.....	12
estradiol td gel 0.25 mg/0.25gm (0.1%) ..	98	etodolac tab er 24hr 500 mg.....	12
estradiol td gel 0.5 mg/0.5gm (0.1%)	98	etodolac tab er 24hr 600 mg.....	12
estradiol td gel 0.75 mg/0.75gm (0.1%) ..	98	etonogestrel-ethinyl estradiol va ring 0.12-	
estradiol td gel 1.25 mg/1.25gm (0.1%)	98	0.015 mg/24hr	79
estradiol td gel 1 mg/gm (0.1%)	98	etoposide cap 50 mg.....	59
estradiol td patch twice weekly 0.025		etravirine tab 100 mg.....	66
mg/24hr.....	98	etravirine tab 200 mg	66
estradiol td patch twice weekly 0.0375		everolimus tab 0.25 mg.....	111
mg/24hr.....	98	everolimus tab 0.5 mg.....	111
estradiol td patch twice weekly 0.05		everolimus tab 0.75 mg.....	111
mg/24hr.....	98	everolimus tab 10 mg.....	57
estradiol td patch twice weekly 0.075		everolimus tab 1 mg.....	111
mg/24hr.....	98	everolimus tab 2.5 mg	57
estradiol td patch twice weekly 0.1 mg/24hr		everolimus tab 5 mg	57
.....	98	everolimus tab 7.5 mg	57
estradiol td patch weekly 0.025 mg/24hr	98	everolimus tab for oral susp 2 mg.....	57
estradiol td patch weekly 0.0375 mg/24hr		everolimus tab for oral susp 3 mg.....	57
(37.5 mcg/24hr)	98	everolimus tab for oral susp 5 mg.....	57
estradiol td patch weekly 0.05 mg/24hr ..	98	EVOTAZ TAB 300-150	66
estradiol td patch weekly 0.06 mg/24hr ..	98	EVRYSDI SOL	114
estradiol td patch weekly 0.075 mg/24hr	98	EVRYSDI TAB 5MG	114
estradiol td patch weekly 0.1 mg/24hr.....	98	exemestane tab 25 mg.....	55
estradiol vaginal cream 0.1 mg/gm.....	127	ezetimibe-simvastatin tab 10-10 mg.....	45
estradiol valerate im in oil 10 mg/ml.....	98	ezetimibe-simvastatin tab 10-20 mg.....	45
estradiol valerate im in oil 20 mg/ml	98	ezetimibe-simvastatin tab 10-40 mg.....	45
estradiol valerate im in oil 40 mg/ml.....	98	ezetimibe-simvastatin tab 10-80 mg.....	45
eszopiclone tab 1 mg.....	105	ezetimibe tab 10 mg.....	47
eszopiclone tab 2 mg	105	F	
eszopiclone tab 3 mg.....	105	famciclovir tab 125 mg	69
ethacrynic acid tab 25 mg	93	famciclovir tab 250 mg	69
ethambutol hcl tab 100 mg	53	famciclovir tab 500 mg	69
ethambutol hcl tab 400 mg	53	famotidine for susp 40 mg/5ml.....	125
ethosuximide cap 250 mg	35	famotidine tab 40 mg.....	125
ethosuximide soln 250 mg/5ml	35	FASENRA INJ 10MG/0.5	27
ethyl chloride aerosol spray	91	FASENRA PEN INJ 30MG/ML.....	27
ethynodiol diacetate & ethinyl estradiol tab		FASTCLIX MIS LANCETS	107
1 mg-35 mcg	77	febuxostat tab 40 mg.....	102
ethynodiol diacetate & ethinyl estradiol tab		febuxostat tab 80 mg.....	102
1 mg-50 mcg	77	felbamate susp 600 mg/5ml.....	34
etodolac cap 200 mg	12	felbamate tab 400 mg.....	34
etodolac cap 300 mg	12	felbamate tab 600 mg.....	34
etodolac tab 400 mg	12	felodipine tab er 24hr 10 mg	72

<i>felodipine tab er 24hr 2.5 mg</i>	71	<i>fesoterodine fumarate tab er 24hr 4 mg</i> .	126
<i>felodipine tab er 24hr 5 mg</i>	71	<i>fesoterodine fumarate tab er 24hr 8 mg</i> .	126
<i>fenofibrate cap 150 mg</i>	46	FIASP FLEX INJ TOUCH	41
<i>fenofibrate micronized cap 134 mg</i>	46	FIASP INJ 100/ML	41
<i>fenofibrate micronized cap 200 mg</i>	46	FIASP PENFIL INJ U-100	41
<i>fenofibrate micronized cap 43 mg</i>	46	FIASP PMPCRT INJ U-100	41
<i>fenofibrate micronized cap 67 mg</i>	46	<i>finasteride tab 5 mg</i>	101
<i>fenofibrate tab 145 mg</i>	46	<i> fingolimod hcl cap 0.5 mg (base equiv)</i> ..	121
<i>fenofibrate tab 160 mg</i>	46	<i>flavoxate hcl tab 100 mg</i>	126
<i>fenofibrate tab 48 mg</i>	46	<i>flecainide acetate tab 100 mg</i>	26
<i>fenofibrate tab 54 mg</i>	46	<i>flecainide acetate tab 150 mg</i>	26
<i>fenofibric acid tab 105 mg</i>	46	<i>flecainide acetate tab 50 mg</i>	26
<i>fenofibric acid tab 35 mg</i>	46	<i>fluconazole for susp 10 mg/ml</i>	44
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	16	<i>fluconazole for susp 40 mg/ml</i>	44
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	16	<i>fluconazole tab 100 mg</i>	44
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	17	<i>fluconazole tab 150 mg</i>	44
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	17	<i>fluconazole tab 200 mg</i>	44
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	17	<i>fluconazole tab 50 mg</i>	44
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	17	<i>flucytosine cap 250 mg</i>	44
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	17	<i>fludrocortisone acetate tab 0.1 mg</i>	80
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	17	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	114
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	17	<i>fluocinolone acetonide (otic) oil 0.01%</i>	117
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	17	<i>fluocinolone acetonide cream 0.01%</i>	89
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	17	<i>fluocinolone acetonide cream 0.025%</i>	89
<i>fentanyl td patch 72hr 100 mcg/hr</i>	17	<i>fluocinolone acetonide oil 0.01% (body oil)</i>	89
<i>fentanyl td patch 72hr 12 mcg/hr</i>	17	<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	89
<i>fentanyl td patch 72hr 25 mcg/hr</i>	17	<i>fluocinolone acetonide oint 0.025%</i>	89
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	17	<i>fluocinolone acetonide soln 0.01%</i>	89
<i>fentanyl td patch 72hr 50 mcg/hr</i>	17	<i>fluocinonide cream 0.05%</i>	89
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	17	<i>fluocinonide emulsified base cream 0.05%</i>	89
<i>fentanyl td patch 72hr 75 mcg/hr</i>	17	<i>fluocinonide gel 0.05%</i>	89
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	17	<i>fluocinonide oint 0.05%</i>	89
<i>ferric citrate tab 1 gm (210 mg ferric iron)</i>	101	<i>fluocinonide soln 0.05%</i>	89
		<i>fluorometholone ophth susp 0.1%</i>	116
		<i>fluorouracil cream 0.5%</i>	84
		<i>fluorouracil cream 5%</i>	84
		<i>fluorouracil soln 2%</i>	84
		<i>fluorouracil soln 5%</i>	84
		<i>fluoxetine hcl cap 10 mg</i>	36
		<i>fluoxetine hcl cap 20 mg</i>	36

<i>fluoxetine hcl cap 40 mg</i>	36	<i>folic acid tab 1 mg</i>	104
<i>fluoxetine hcl cap delayed release 90 mg</i>	36	<i>fondaparinux sodium subcutaneous inj 10</i>	
<i>fluoxetine hcl solution 20 mg/5ml</i>	36	<i>mg/0.8ml</i>	31
<i>fluoxetine hcl tab 10 mg</i>	36	<i>fondaparinux sodium subcutaneous inj 2.5</i>	
<i>fluoxetine hcl tab 20 mg</i>	36	<i>mg/0.5ml</i>	31
<i>fluphenazine decanoate inj 25 mg/ml</i>	64	<i>fondaparinux sodium subcutaneous inj 5</i>	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	64	<i>mg/0.4ml</i>	31
<i>fluphenazine hcl inj 2.5 mg/ml</i>	64	<i>fondaparinux sodium subcutaneous inj 7.5</i>	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	64	<i>mg/0.6ml</i>	31
<i>fluphenazine hcl tab 10 mg</i>	64	<i>formaldehyde solution 10%</i>	65
<i>fluphenazine hcl tab 1 mg</i>	64	<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	
<i>fluphenazine hcl tab 2.5 mg</i>	64		30
<i>fluphenazine hcl tab 5 mg</i>	64	<i>fosamprenavir calcium tab 700 mg (base</i>	
<i>flurbiprofen sodium ophth soln 0.03%</i>	117	<i>equiv)</i>	66
<i>flurbiprofen tab 100 mg</i>	12	<i>fosfomycin tromethamine powd pack 3 gm</i>	
<i>flurbiprofen tab 50 mg</i>	12	<i>(base equivalent)</i>	23
<i>fluticasone propionate cream 0.05%</i>	89	<i>fosinopril sodium & hydrochlorothiazide tab</i>	
<i>fluticasone propionate lotion 0.05%</i>	89	<i>10-12.5 mg</i>	51
<i>fluticasone propionate nasal susp 50</i>		<i>fosinopril sodium & hydrochlorothiazide tab</i>	
<i>mcg/act</i>	114	<i>20-12.5 mg</i>	51
<i>fluticasone propionate oint 0.005%</i>	89	<i>fosinopril sodium tab 10 mg</i>	48
<i>fluticasone-salmeterol aer powder ba 100-</i>		<i>fosinopril sodium tab 20 mg</i>	48
<i>50 mcg/act</i>	29	<i>fosinopril sodium tab 40 mg</i>	48
<i>fluticasone-salmeterol aer powder ba 113-</i>		<i>frovatriptan succinate tab 2.5 mg (base</i>	
<i>14 mcg/act</i>	30	<i>equivalent)</i>	108
<i>fluticasone-salmeterol aer powder ba 232-</i>		<i>furosemide oral soln 10 mg/ml</i>	93
<i>14 mcg/act</i>	30	<i>furosemide oral soln 8 mg/ml</i>	93
<i>fluticasone-salmeterol aer powder ba 250-</i>		<i>furosemide tab 20 mg</i>	93
<i>50 mcg/act</i>	30	<i>furosemide tab 40 mg</i>	93
<i>fluticasone-salmeterol aer powder ba 500-</i>		<i>furosemide tab 80 mg</i>	93
<i>50 mcg/act</i>	30	<i>FUZEON INJ 90MG</i>	66
<i>fluticasone-salmeterol aer powder ba 55-14</i>		<i>FYLNETRA INJ 6MG/0.6</i>	104
<i>mcg/act</i>	29	G	
<i>fluvastatin sodium cap 20 mg (base</i>		<i>gabapentin (once-daily) tab 300 mg</i>	122
<i>equivalent)</i>	46	<i>gabapentin (once-daily) tab 600 mg</i>	122
<i>fluvastatin sodium cap 40 mg (base</i>		<i>gabapentin cap 100 mg</i>	32
<i>equivalent)</i>	46	<i>gabapentin cap 300 mg</i>	32
<i>fluvastatin sodium tab er 24 hr 80 mg (base</i>		<i>gabapentin cap 400 mg</i>	32
<i>equivalent)</i>	46	<i>gabapentin oral soln 250 mg/5ml</i>	32
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	36	<i>gabapentin tab 600 mg</i>	32
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	36	<i>gabapentin tab 800 mg</i>	32
<i>fluvoxamine maleate tab 100 mg</i>	36	<i>GALAFOLD CAP 123MG</i>	95
<i>fluvoxamine maleate tab 25 mg</i>	36	<i>galantamine hydrobromide cap er 24hr 16</i>	
<i>fluvoxamine maleate tab 50 mg</i>	36	<i>mg</i>	119

galantamine hydrobromide cap er 24hr 24 mg.....	119	glyburide micronized tab 6 mg	43
galantamine hydrobromide cap er 24hr 8 mg.....	119	glyburide tab 1.25 mg	43
galantamine hydrobromide oral soln 4 mg/ml.....	119	glyburide tab 2.5 mg	43
galantamine hydrobromide tab 12 mg.....	119	glyburide tab 5 mg	43
galantamine hydrobromide tab 4 mg	119	glycopyrrolate inj pf soln prefilled syringe 0.2 mg/ml	124
galantamine hydrobromide tab 8 mg	119	glycopyrrolate inj pf soln pref syr 0.4 mg/2ml (0.2 mg/ml)	124
GANIRELIX AC INJ 250/0.5	95	glycopyrrolate oral soln 1 mg/5ml.....	124
gatifloxacin ophth soln 0.5%	115	glycopyrrolate tab 1 mg	124
gefitinib tab 250 mg.....	55	glycopyrrolate tab 2 mg.....	124
gemfibrozil tab 600 mg	46	GLYXAMBI TAB 10-5 MG	39
gentamicin sulfate cream 0.1%.....	83	GLYXAMBI TAB 25-5 MG.....	39
gentamicin sulfate oint 0.1%	83	GONAL-F INJ 1050UNIT	94
gentamicin sulfate ophth soln 0.3%	115	GONAL-F INJ 450UNIT	94
GENVOYA TAB	66	GONAL-F RFF INJ 300/0.5.....	94
GILOTRIF TAB 20MG.....	55	GONAL-F RFF INJ 450/0.75	94
GILOTRIF TAB 30MG.....	55	GONAL-F RFF INJ 75UNIT	94
GILOTRIF TAB 40MG.....	55	GONAL-F RFF INJ 900/1.5	94
GLARGIN YFGN INJ 100U/ML.....	42	granisetron hcl tab 1 mg	43
GLARGIN YFGN SOL 100U/ML	42	griseofulvin microsize susp 125 mg/5ml ..	44
glatiramer acetate soln prefilled syringe 20 mg/ml.....	121	griseofulvin microsize tab 500 mg	44
glatiramer acetate soln prefilled syringe 40 mg/ml.....	121	griseofulvin ultramicrosize tab 125 mg	44
glimepiride tab 1 mg	42	griseofulvin ultramicrosize tab 165 mg	44
glimepiride tab 2 mg	42	griseofulvin ultramicrosize tab 250 mg....	44
glimepiride tab 4 mg.....	42	guanfacine hcl tab 1 mg	49
glipizide-metformin hcl tab 2.5-250 mg ...	39	guanfacine hcl tab 2 mg.....	49
glipizide-metformin hcl tab 2.5-500 mg ...	39	guanfacine hcl tab er 24hr 1 mg (base equiv)	4
glipizide-metformin hcl tab 5-500 mg	39	guanfacine hcl tab er 24hr 2 mg (base equiv)	4
glipizide tab 10 mg	42	guanfacine hcl tab er 24hr 3 mg (base equiv)	4
glipizide tab 5 mg	42	guanfacine hcl tab er 24hr 4 mg (base equiv)	4
glipizide tab er 24hr 10 mg	42	GVOKE HYPO 1 INJ 0.5/.1ML	40
glipizide tab er 24hr 2.5 mg	42	GVOKE HYPO 1 INJ 1MG/.2ML	40
glipizide tab er 24hr 5 mg	42	GVOKE HYPO 2 INJ 0.5/.1ML	40
glucagon (rdna) for inj kit 1 mg.....	40	GVOKE HYPO 2 INJ 1MG/.2ML.....	40
glutamine (sickle cell) powd pack 5 gm..	103	GVOKE KIT SOL 1MG/0.2M	40
glyburide-metformin tab 1.25-250 mg	39	GVOKE PFS INJ.....	40
glyburide-metformin tab 2.5-500 mg	39	H	
glyburide-metformin tab 5-500 mg	39	HADLIMA INJ 40/0.4ML	7
glyburide micronized tab 1.5 mg	42	HADLIMA INJ 40/0.8ML	7
glyburide micronized tab 3 mg	42		

HADLIMA PUSH INJ 40/0.4ML.....	7	hydralazine hcl tab 10 mg	53
HADLIMA PUSH INJ 40/0.8ML.....	7	hydralazine hcl tab 25 mg	53
HAEGARDA INJ 2000UNIT	103	hydralazine hcl tab 50 mg.....	53
HAEGARDA INJ 3000UNIT	103	hydrochlorothiazide cap 12.5 mg	93
halcinonide soln 0.1%	89	hydrochlorothiazide tab 12.5 mg.....	93
halobetasol propionate cream 0.05%	89	hydrochlorothiazide tab 25 mg	93
halobetasol propionate oint 0.05%	89	hydrochlorothiazide tab 50 mg	93
haloperidol decanoate im soln 100 mg/ml	63	hydrocodone-acetaminophen soln 10-325 mg/15ml	20
haloperidol decanoate im soln 50 mg/ml.....	63	hydrocodone-acetaminophen soln 7.5-325 mg/15ml	20
haloperidol lactate inj 5 mg/ml	63	hydrocodone-acetaminophen tab 10-300 mg	20
haloperidol lactate oral conc 2 mg/ml	63	hydrocodone-acetaminophen tab 10-325 mg	20
haloperidol tab 0.5 mg	63	hydrocodone-acetaminophen tab 2.5-325 mg	20
haloperidol tab 10 mg	63	hydrocodone-acetaminophen tab 5-300 mg	20
haloperidol tab 1 mg.....	63	hydrocodone-acetaminophen tab 5-325 mg	20
haloperidol tab 20 mg	63	hydrocodone-acetaminophen tab 7.5-300 mg	20
haloperidol tab 2 mg	63	hydrocodone-acetaminophen tab 7.5-325 mg	20
haloperidol tab 5 mg	63	hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	81
HARVONI PAK	68	hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml.....	81
HARVONI PAK 45-200MG	68	hydrocodone bitartrate cap er 12hr 10 mg 17	
HARVONI TAB 45-200MG.....	68	hydrocodone bitartrate cap er 12hr 15 mg.17	
HARVONI TAB 90-400MG	68	hydrocodone bitartrate cap er 12hr 20 mg17	
HEMLIBRA INJ 105/0.7	102	hydrocodone bitartrate cap er 12hr 30 mg17	
HEMLIBRA INJ 150/ML	102	hydrocodone bitartrate cap er 12hr 40 mg17	
HEMLIBRA INJ 300/2ML	102	hydrocodone bitartrate cap er 12hr 50 mg17	
HEMLIBRA INJ 30MG/ML.....	102	hydrocodone bitartrate tab er 24hr deter 100 mg	17
HEMLIBRA INJ 60/0.4.....	102	hydrocodone bitartrate tab er 24hr deter 120 mg	17
HEMLIBRA SOL 12/0.4ML.....	102	hydrocodone bitartrate tab er 24hr deter 20 mg	17
heparin sodium (porcine) inj 10000 unit/ml	31	hydrocodone bitartrate tab er 24hr deter 30 mg	17
heparin sodium (porcine) inj 1000 unit/ml 31			
heparin sodium (porcine) inj 20000 unit/ml	31		
heparin sodium (porcine) inj 5000 unit/ml31			
heparin sodium (porcine) pf inj 1000 unit/ml	31		
heparin sodium (porcine) pf inj 5000 unit/0.5ml.....	31		
homatropine hbr ophth soln 5%	115		
HUMATROPE INJ 12MG	95		
HUMATROPE INJ 24MG	95		
HUMATROPE INJ 6MG	95		
HUMULIN R INJ U-500.....	42		
hydralazine hcl tab 100 mg	53		

hydrocodone bitartrate tab er 24hr deter 40 mg	17
hydrocodone bitartrate tab er 24hr deter 60 mg	17
hydrocodone bitartrate tab er 24hr deter 80 mg	17
hydrocodone-ibuprofen tab 10-200 mg ...	20
hydrocodone-ibuprofen tab 5-200 mg	20
hydrocodone-ibuprofen tab 7.5-200 mg..	20
hydrocod polst-chlorphen polst er susp 10-8 mg/5ml.....	81
hydrocortisone acetate suppos 25 mg.....	22
hydrocortisone acetate suppos 30 mg	22
hydrocortisone acetate w/ pramoxine perianal cream 1-1%.....	22
hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%.....	22
hydrocortisone butyrate cream 0.1%.....	89
hydrocortisone butyrate oint 0.1%	89
hydrocortisone butyrate soln 0.1%.....	89
hydrocortisone cream 2.5%.....	89
hydrocortisone enema 100 mg/60ml.....	22
hydrocortisone lotion 2.5%	89
hydrocortisone oint 2.5%.....	89
hydrocortisone perianal cream 2.5%	22
hydrocortisone sodium succinate pf for inj 100 mg	80
hydrocortisone soln 2.5%	89
hydrocortisone tab 10 mg	80
hydrocortisone tab 20 mg	80
hydrocortisone tab 5 mg.....	80
hydrocortisone valerate cream 0.2%.....	89
hydrocortisone valerate oint 0.2%	89
hydrocortisone w/ acetic acid otic soln 1-2%.....	117
hydrogen peroxide soln 30%	65
hydromorphone hcl liqd 1 mg/ml.....	18
hydromorphone hcl tab 2 mg.....	18
hydromorphone hcl tab 4 mg.....	18
hydromorphone hcl tab 8 mg.....	18
hydromorphone hcl tab er 24hr 12 mg.....	18
hydromorphone hcl tab er 24hr 16 mg.....	18
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hydromorphone hcl tab er 24hr 8 mg	18

hydroxychloroquine sulfate tab 200 mg...	53
hydroxyurea cap 500 mg.....	59
hydroxyzine hcl syrup 10 mg/5ml.....	25
hydroxyzine hcl tab 10 mg	25
hydroxyzine hcl tab 25 mg	25
hydroxyzine hcl tab 50 mg.....	25
hydroxyzine pamoate cap 100 mg.....	25
hydroxyzine pamoate cap 25 mg.....	25
hydroxyzine pamoate cap 50 mg	25
hyoscyamine sulfate elixir 0.125 mg/5ml	124
hyoscyamine sulfate sl tab 0.125 mg	124
hyoscyamine sulfate soln 0.125 mg/ml ...	124
hyoscyamine sulfate tab 0.125 mg	124
hyoscyamine sulfate tab disint 0.125 mg	124
HYRIMOZ-CROH INJ UC SP	9
HYRIMOZ INJ 10/0.1ML.....	7
HYRIMOZ INJ 20/0.2ML	8
HYRIMOZ INJ 40/0.4ML.....	8
HYRIMOZ INJ 40/0.8ML	8
HYRIMOZ INJ 80/0.8ML	8
HYRIMOZ-PED INJ CROHNS	9
HYRIMOZ-PLAQ INJ PSOR/UVE.....	9
HYRIMOZ-PLAQ INJ PSORIASI.....	9
HYRIMOZ SENS INJ 80/0.8ML	9

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ibandronate sodium tab 150 mg (base equivalent)	94
IBRANCE CAP 100MG.....	57
IBRANCE CAP 125MG.....	57
IBRANCE CAP 75MG	57
IBRANCE TAB 100MG	57
IBRANCE TAB 125MG	57
IBRANCE TAB 75MG	57
ibuprofen tab 400 mg	13
ibuprofen tab 600 mg	13
ibuprofen tab 800 mg	13
icatibant acetate subcutaneous soln pref syr 30 mg/3ml.....	102
icosapent ethyl cap 0.5 gm	45
icosapent ethyl cap 1 gm.....	45
imatinib mesylate tab 100 mg (base equivalent).....	57
imatinib mesylate tab 400 mg (base equivalent).....	57

IMBRUVICA CAP 140MG.....	57	<i>ipratropium bromide nasal soln 0.06% (42</i>	
IMBRUVICA CAP 70MG	57	<i>mcg/spray).....</i>	114
IMBRUVICA SUS 70MG/ML	57	<i>irbesartan-hydrochlorothiazide tab 150-12.5</i>	
IMBRUVICA TAB 140MG.....	57	<i>mg</i>	51
IMBRUVICA TAB 280MG	57	<i>irbesartan-hydrochlorothiazide tab 300-</i>	
IMBRUVICA TAB 420MG	57	<i>12.5 mg</i>	51
<i>imipramine hcl tab 10 mg</i>	38	<i>irbesartan tab 150 mg.....</i>	49
<i>imipramine hcl tab 25 mg</i>	38	<i>irbesartan tab 300 mg.....</i>	49
<i>imipramine hcl tab 50 mg</i>	38	<i>irbesartan tab 75 mg</i>	49
<i>imipramine pamoate cap 100 mg</i>	38	ISENTRESS CHW 100MG.....	66
<i>imipramine pamoate cap 125 mg.....</i>	38	ISENTRESS CHW 25MG.....	66
<i>imipramine pamoate cap 150 mg</i>	38	ISENTRESS HD TAB 600MG	66
<i>imipramine pamoate cap 75 mg</i>	38	ISENTRESS POW 100MG.....	66
<i>imiquimod cream 3.75%</i>	90	ISENTRESS TAB 400MG.....	66
<i>imiquimod cream 5%.....</i>	90	<i>isoniazid syrup 50 mg/5ml</i>	53
IMVEXXY MAIN SUP 10MCG.....	127	<i>isoniazid tab 100 mg</i>	53
IMVEXXY MAIN SUP 4MCG	127	<i>isoniazid tab 300 mg</i>	53
IMVEXXY STRT SUP 10MCG	127	<i>isosorbide dinitrate-hydralazine hcl tab 20-</i>	
IMVEXXY STRT SUP 4MCG.....	127	<i>37.5 mg</i>	73
INBRIJA CAP 42MG	60	<i>isosorbide dinitrate tab 10 mg</i>	24
<i>indapamide tab 1.25 mg</i>	93	<i>isosorbide dinitrate tab 20 mg</i>	24
<i>indapamide tab 2.5 mg.....</i>	93	<i>isosorbide dinitrate tab 30 mg</i>	24
<i>indomethacin cap 25 mg</i>	13	<i>isosorbide dinitrate tab 5 mg.....</i>	24
<i>indomethacin cap 50 mg</i>	13	<i>isosorbide mononitrate tab 10 mg</i>	24
<i>indomethacin cap er 75 mg.....</i>	13	<i>isosorbide mononitrate tab 20 mg</i>	24
<i>indomethacin suppos 50 mg.....</i>	13	<i>isosorbide mononitrate tab er 24hr 120 mg</i>	
<i>indomethacin susp 25 mg/5ml</i>	13	<i>.....</i>	24
INGREZZA CAP 40-80MG.....	120	<i>isosorbide mononitrate tab er 24hr 30 mg</i>	
INGREZZA CAP 40MG	120	<i>.....</i>	24
INGREZZA CAP 60MG	120	<i>isosorbide mononitrate tab er 24hr 60 mg</i>	
INGREZZA CAP 80MG	120	<i>.....</i>	24
INLYTA TAB 1MG	54	<i>isotretinoin cap 10 mg</i>	82
INLYTA TAB 5MG.....	54	<i>isotretinoin cap 20 mg.....</i>	82
INS SYR U500 MIS 31GX6MM	107	<i>isotretinoin cap 30 mg.....</i>	82
INTELENCE TAB 25MG	66	<i>isotretinoin cap 40 mg.....</i>	82
<i>iodoquinol-hc cream 1-1%</i>	83	<i>isradipine cap 2.5 mg.....</i>	72
<i>iodoquinol-hydrocortisone in aloe vehicle</i>		<i>isradipine cap 5 mg.....</i>	72
<i>cream 1-1.9%</i>	83	<i>itraconazole cap 100 mg.....</i>	44
<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i>		<i>itraconazole oral soln 10 mg/ml.....</i>	44
<i>mg/3ml</i>	30	<i>ivabradine hcl tab 5 mg (base equiv)</i>	76
<i>ipratropium bromide inhal soln 0.02%.....</i>	27	<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	76
<i>ipratropium bromide nasal soln 0.03% (21</i>		<i>ivermectin tab 3 mg</i>	22
<i>mcg/spray).....</i>	114	<i>ivermectin tab 6 mg</i>	22

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JAKAFI TAB 10MG	58
JAKAFI TAB 15MG	58
JAKAFI TAB 20MG.....	58
JAKAFI TAB 25MG.....	58
JAKAFI TAB 5MG.....	58
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JULUCA TAB 50-25MG.....	66
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JYNARQUE PAK 30-15MG.....	97
JYNARQUE PAK 45-15MG.....	97
JYNARQUE PAK 60-30MG.....	97
JYNARQUE PAK 90-30MG.....	97
JYNARQUE TAB 15MG	97
JYNARQUE TAB 30MG	97
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KALYDECO GRA 13.4MG	122
KALYDECO GRA 5.8MG.....	122
KALYDECO PAK 25MG.....	122
KALYDECO PAK 50MG.....	122
KALYDECO PAK 75MG.....	122
KALYDECO TAB 150MG	122
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KERENDIA TAB 20MG.....	96
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<i>ketoconazole cream 2%</i>	<i>83</i>
<i>ketoconazole shampoo 2%</i>	<i>83</i>
<i>ketoconazole tab 200 mg</i>	<i>44</i>
<i>ketorolac tromethamine ophth soln 0.4%</i>	<i>117</i>
<i>ketorolac tromethamine ophth soln 0.5%</i>	<i>117</i>
<i>ketorolac tromethamine tab 10 mg</i>	<i>13</i>
KEVZARA INJ 150/1.14	11, 12
KEVZARA INJ 200/1.14	12
KISQALI 200 PAK FEMARA	56
KISQALI 400 PAK FEMARA	56
KISQALI 600 PAK FEMARA	56
KISQALI TAB 200DOSE.....	58
KISQALI TAB 400DOSE	58
KISQALI TAB 600DOSE.....	58
KOSELUGO CAP 10MG	58
KOSELUGO CAP 25MG.....	58
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<i>labetalol hcl tab 100 mg</i>	<i>69</i>
<i>labetalol hcl tab 200 mg.....</i>	<i>69</i>
<i>labetalol hcl tab 300 mg</i>	<i>69</i>
<i>lacosamide oral solution 10 mg/ml.....</i>	<i>32</i>
<i>lacosamide tab 100 mg</i>	<i>33</i>
<i>lacosamide tab 150 mg</i>	<i>33</i>
<i>lacosamide tab 200 mg.....</i>	<i>33</i>
<i>lacosamide tab 50 mg.....</i>	<i>32</i>
<i>lactulose (encephalopathy) solution 10 gm/15ml.....</i>	<i>100</i>
<i>lactulose oral crystal packet 10 gm.....</i>	<i>106</i>
<i>lactulose oral crystal packet 20 gm</i>	<i>106</i>
<i>lactulose solution 10 gm/15ml</i>	<i>106</i>
<i>lamivudine oral soln 10 mg/ml</i>	<i>66</i>
<i>lamivudine tab 100 mg (hbv)</i>	<i>68</i>
<i>lamivudine tab 150 mg</i>	<i>66</i>
<i>lamivudine tab 300 mg</i>	<i>66</i>
<i>lamivudine-zidovudine tab 150-300 mg ...</i>	<i>66</i>
<i>lamotrigine orally disintegrating tab 100 mg</i>	<i>33</i>
<i>lamotrigine orally disintegrating tab 200 mg</i>	<i>33</i>
<i>lamotrigine orally disintegrating tab 25 mg</i>	<i>33</i>
<i>lamotrigine orally disintegrating tab 50 mg</i>	<i>33</i>
<i>lamotrigine tab 100 mg.....</i>	<i>33</i>
<i>lamotrigine tab 150 mg.....</i>	<i>33</i>
<i>lamotrigine tab 200 mg.....</i>	<i>33</i>
<i>lamotrigine tab 25 mg.....</i>	<i>33</i>
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit.....</i>	<i>33</i>
<i>lamotrigine tab 35 x 25 mg starter kit.....</i>	<i>33</i>
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit.....</i>	<i>33</i>
<i>lamotrigine tab chewable dispersible 25 mg</i>	<i>33</i>
<i>lamotrigine tab chewable dispersible 5 mg</i>	<i>33</i>
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit.....</i>	<i>33</i>
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	<i>33</i>

lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	33
lamotrigine tab er 24hr 100 mg	33
lamotrigine tab er 24hr 200 mg	33
lamotrigine tab er 24hr 250 mg	33
lamotrigine tab er 24hr 25 mg	33
lamotrigine tab er 24hr 300 mg	33
lamotrigine tab er 24hr 50 mg	33
lansoprazole cap delayed release 15 mg	125
lansoprazole cap delayed release 30 mg	125
lapatinib ditosylate tab 250 mg (base equiv)	58
latanoprost ophth soln 0.005%	117
leflunomide tab 10 mg	14
leflunomide tab 20 mg	14
lenalidomide cap 10 mg	110
lenalidomide cap 15 mg	110
lenalidomide cap 20 mg	110
lenalidomide cap 25 mg	110
lenalidomide cap 5 mg	110
lenalidomide caps 2.5 mg	110
LENVIMA CAP 10 MG	54
LENVIMA CAP 12MG	55
LENVIMA CAP 14 MG	55
LENVIMA CAP 18 MG	55
LENVIMA CAP 20 MG	55
LENVIMA CAP 24 MG	55
LENVIMA CAP 4MG	54
LENVIMA CAP 8 MG	54
letrozole tab 2.5 mg	55
leucovorin calcium tab 10 mg	59
leucovorin calcium tab 15 mg	59
leucovorin calcium tab 25 mg	59
leucovorin calcium tab 5 mg	59
LEUKERAN TAB 2MG	54
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	55
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)	30
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)	30
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)	30
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	30
levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	30
levamlodipine maleate tab 2.5 mg	72
levamlodipine maleate tab 5 mg	72
levetiracetam oral soln 100 mg/ml	33
levetiracetam tab 1000 mg	33
levetiracetam tab 250 mg	33
levetiracetam tab 500 mg	33
levetiracetam tab 750 mg	33
levetiracetam tab er 24hr 500 mg	33
levetiracetam tab er 24hr 750 mg	33
levobunolol hcl ophth soln 0.5%	114
levocarnitine oral soln 1 gm/10ml (10%) ..	95
levocarnitine tab 330 mg	95
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	45
levocetirizine dihydrochloride tab 5 mg ..	45
levofloxacin oral soln 25 mg/ml	98
levofloxacin tab 250 mg	98
levofloxacin tab 500 mg	98
levofloxacin tab 750 mg	98
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg	77
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	77
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	77
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	77
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	77
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	78
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)	78
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	77
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	77
levorphanol tartrate tab 2 mg	18
levothyroxine sodium tab 100 mcg	124
levothyroxine sodium tab 112 mcg	124

<i>losartan potassium tab 25 mg</i>	49
<i>losartan potassium tab 50 mg</i>	49
<i>loteprednol etabonate ophth gel 0.5%</i>	116
<i>loteprednol etabonate ophth susp 0.2%</i> .	116
<i>loteprednol etabonate ophth susp 0.5%</i> .	116
<i>lovastatin tab 10 mg</i>	47
<i>lovastatin tab 20 mg</i>	47
<i>lovastatin tab 40 mg</i>	47
<i>loxapine succinate cap 10 mg</i>	63
<i>loxapine succinate cap 25 mg</i>	63
<i>loxapine succinate cap 50 mg</i>	63
<i>loxapine succinate cap 5 mg</i>	63
<i>lubiprostone cap 24 mcg</i>	99
<i>lubiprostone cap 8 mcg</i>	99
LUMAKRAS TAB 120MG	58
LUMAKRAS TAB 240MG	58
LUMAKRAS TAB 320MG	58
<i>lurasidone hcl tab 120 mg</i>	62
<i>lurasidone hcl tab 20 mg</i>	62
<i>lurasidone hcl tab 40 mg</i>	62
<i>lurasidone hcl tab 60 mg</i>	62
<i>lurasidone hcl tab 80 mg</i>	62
LYNPARZA TAB 100MG	58
LYNPARZA TAB 150MG	58
LYSODREN TAB 500MG	55

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<i>mafenide acetate packet for topical soln</i>	
5% (50 gm)	88
<i>malathion lotion 0.5%</i>	91
<i>maraviroc tab 150 mg</i>	67
<i>maraviroc tab 300 mg</i>	67
MATULANE CAP 50MG	59
MAYZENT PAK STARTER	121
MAYZENT TAB 0.25MG	121
MAYZENT TAB 1MG	121
MAYZENT TAB 2MG	121
<i>meclizine hcl tab 50 mg</i>	44
<i>meclofenamate sodium cap 100 mg</i>	13
<i>meclofenamate sodium cap 50 mg</i>	13
MEDROL TAB 2MG	80
<i>medroxyprogesterone acetate im susp 150</i> <i>mg/ml</i>	79
<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	79
<i>medroxyprogesterone acetate tab 10 mg</i> 118	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	118
<i>medroxyprogesterone acetate tab 5 mg</i> .	118
<i>mefenamic acid cap 250 mg</i>	13
<i>mefloquine hcl tab 250 mg</i>	53
<i>megestrol acetate susp 40 mg/ml</i>	55
<i>megestrol acetate susp 625 mg/5ml</i>	118
<i>megestrol acetate tab 20 mg</i>	55
<i>megestrol acetate tab 40 mg</i>	55
MEKINIST SOL 0.05/ML	58
MEKINIST TAB 0.5MG	58
MEKINIST TAB 2MG	58
<i>meloxicam susp 7.5 mg/5ml</i>	13
<i>meloxicam tab 15 mg</i>	13
<i>meloxicam tab 7.5 mg</i>	13
<i>memantine hcl cap er 24hr 14 mg</i>	119
<i>memantine hcl cap er 24hr 21 mg</i>	119
<i>memantine hcl cap er 24hr 28 mg</i>	119
<i>memantine hcl cap er 24hr 7 mg</i>	119
<i>memantine hcl-donepezil hcl cap er 24hr</i> 14-10 mg.....	119
<i>memantine hcl-donepezil hcl cap er 24hr</i> 21-10 mg.....	119
<i>memantine hcl-donepezil hcl cap er 24hr</i> 28-10 mg	120
<i>memantine hcl oral solution 2 mg/ml</i>	119
<i>memantine hcl tab 10 mg</i>	119
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg</i> <i>titration pack</i>	119
<i>memantine hcl tab 5 mg</i>	119
<i>meperidine hcl oral soln 50 mg/5ml</i>	18
<i>meperidine hcl tab 50 mg</i>	18
<i>meprobamate tab 200 mg</i>	25
<i>meprobamate tab 400 mg</i>	25
<i>mercaptopurine susp 2000 mg/100ml (20</i> <i>mg/ml)</i>	54
<i>mercaptopurine tab 50 mg</i>	54
<i>mesalamine cap dr 400 mg</i>	99
<i>mesalamine cap er 24hr 0.375 gm</i>	99
<i>mesalamine cap er 500 mg</i>	99
<i>mesalamine enema 4 gm</i>	99
<i>mesalamine rectal enema 4 gm & cleanser</i> <i>wipe kit</i>	99

<i>mesalamine suppos 1000 mg</i>	99	<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	54
<i>mesalamine tab delayed release 1.2 gm</i>	99	<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	54
<i>mesalamine tab delayed release 800 mg</i>	99	<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	54
<i>mesna tab 400 mg</i>	59	<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	54
<i>metaxalone tab 800 mg</i>	113	<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	54
<i>metformin hcl oral soln 500 mg/5ml</i>	40	<i>methoxsalen rapid cap 10 mg</i>	85
<i>metformin hcl tab 1000 mg</i>	40	<i>methscopolamine bromide tab 2.5 mg</i>	124
<i>metformin hcl tab 500 mg</i>	40	<i>methscopolamine bromide tab 5 mg</i>	124
<i>metformin hcl tab 850 mg</i>	40	<i>methsuximide cap 300 mg</i>	35
<i>metformin hcl tab er 24hr 500 mg</i>	40	<i>methyldopa tab 250 mg</i>	49
<i>metformin hcl tab er 24hr 750 mg</i>	40	<i>methyldopa tab 500 mg</i>	49
<i>methadone hcl conc 10 mg/ml</i>	18	<i>methylergonovine maleate tab 0.2 mg</i>	117
<i>methadone hcl soln 10 mg/5ml</i>	18	<i>methylphenidate hcl cap er 10 mg (cd)</i>	5
<i>methadone hcl soln 5 mg/5ml</i>	18	<i>methylphenidate hcl cap er 20 mg (cd)</i>	5
<i>methadone hcl tab 10 mg</i>	18	<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	5
<i>methadone hcl tab 5 mg</i>	18	<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	5
<i>methadone hcl tab for oral susp 40 mg</i>	18	<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	5
<i>methamphetamine hcl tab 5 mg</i>	2	<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	5
<i>methazolamide tab 25 mg</i>	92	<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	5
<i>methazolamide tab 50 mg</i>	92	<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	5
<i>methenamine hippurate tab 1 gm</i>	24	<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	5
<i>methenamine-hyoscamine-meth blue-sod phos tab 81.6 mg</i>	23	<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	5
<i>methenamine-hyosc-meth blue-benz acid-phenyl sal tab 81.6mg</i>	22	<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	5
<i>methenamine-hyosc-meth blue-sod phos-phen sal cap 118 mg</i>	22	<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	5
<i>methenamine-hyosc-meth blue-sod phos-phen sal cap 120 mg</i>	23	<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	5
<i>methenamine-hyosc-meth blue-sod phos-phen sal tab 81 mg</i>	23	<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	5
<i>methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg</i>	22	<i>methylphenidate hcl cap er 30 mg (cd)</i>	5
<i>methenamine mandelate tab 0.5 gm</i>	24		
<i>methenamine mandelate tab 1 gm</i>	24		
<i>methimazole tab 10 mg</i>	124		
<i>methimazole tab 5 mg</i>	124		
<i>methocarbamol tab 1000 mg</i>	113		
<i>methocarbamol tab 500 mg</i>	113		
<i>methocarbamol tab 750 mg</i>	113		
<i>methotrexate sodium for inj 1 gm</i>	54		
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	54		

<i>methylphenidate hcl cap er 40 mg (cd)</i>	<i>5</i>	<i>metoclopramide hcl tab 10 mg (base</i>	
<i>methylphenidate hcl cap er 50 mg (cd)</i>	<i>5</i>	<i>equivalent)</i>	<i>99</i>
<i>methylphenidate hcl cap er 60 mg (cd)</i>	<i>5</i>	<i>metoclopramide hcl tab 5 mg (base</i>	
<i>methylphenidate hcl chew tab 10 mg.....</i>	<i>5</i>	<i>equivalent)</i>	<i>99</i>
<i>methylphenidate hcl chew tab 2.5 mg</i>	<i>5</i>	<i>metolazone tab 10 mg</i>	<i>93</i>
<i>methylphenidate hcl chew tab 5 mg</i>	<i>5</i>	<i>metolazone tab 2.5 mg.....</i>	<i>93</i>
<i>methylphenidate hcl soln 10 mg/5ml</i>	<i>5</i>	<i>metolazone tab 5 mg.....</i>	<i>93</i>
<i>methylphenidate hcl soln 5 mg/5ml.....</i>	<i>5</i>	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl tab 10 mg</i>	<i>5</i>	<i>25 mg</i>	<i>51</i>
<i>methylphenidate hcl tab 20 mg</i>	<i>6</i>	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl tab 5 mg</i>	<i>5</i>	<i>50 mg</i>	<i>52</i>
<i>methylphenidate hcl tab er 10 mg.....</i>	<i>6</i>	<i>metoprolol & hydrochlorothiazide tab 50-25</i>	
<i>methylphenidate hcl tab er 20 mg</i>	<i>6</i>	<i>mg</i>	<i>51</i>
<i>methylphenidate hcl tab er 24hr 18 mg.....</i>	<i>6</i>	<i>metoprolol succinate tab er 24hr 100 mg</i>	
<i>methylphenidate hcl tab er 24hr 27 mg</i>	<i>6</i>	<i>(tartrate equiv)</i>	<i>70</i>
<i>methylphenidate hcl tab er 24hr 36 mg.....</i>	<i>6</i>	<i>metoprolol succinate tab er 24hr 200 mg</i>	
<i>methylphenidate hcl tab er 24hr 54 mg.....</i>	<i>6</i>	<i>(tartrate equiv)</i>	<i>70</i>
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol succinate tab er 24hr 25 mg</i>	
<i>(osm) 18 mg</i>	<i>6</i>	<i>(tartrate equiv)</i>	<i>70</i>
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol succinate tab er 24hr 50 mg</i>	
<i>(osm) 27 mg</i>	<i>6</i>	<i>(tartrate equiv)</i>	<i>70</i>
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol tartrate tab 100 mg</i>	<i>70</i>
<i>(osm) 36 mg</i>	<i>6</i>	<i>metoprolol tartrate tab 25 mg</i>	<i>70</i>
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol tartrate tab 37.5 mg.....</i>	<i>70</i>
<i>(osm) 54 mg</i>	<i>6</i>	<i>metoprolol tartrate tab 50 mg</i>	<i>70</i>
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol tartrate tab 75 mg</i>	<i>70</i>
<i>(osm) 72 mg</i>	<i>6</i>	<i>metronidazole cap 375 mg</i>	<i>22</i>
<i>methylphenidate td patch 10 mg/9hr.....</i>	<i>6</i>	<i>metronidazole cream 0.75%.....</i>	<i>91</i>
<i>methylphenidate td patch 15 mg/9hr</i>	<i>6</i>	<i>metronidazole gel 0.75%</i>	<i>91</i>
<i>methylphenidate td patch 20 mg/9hr</i>	<i>6</i>	<i>metronidazole gel 1%</i>	<i>91</i>
<i>methylphenidate td patch 30 mg/9hr</i>	<i>6</i>	<i>metronidazole lotion 0.75%</i>	<i>91</i>
<i>methylprednisolone tab 16 mg.....</i>	<i>80</i>	<i>metronidazole tab 250 mg</i>	<i>22</i>
<i>methylprednisolone tab 32 mg</i>	<i>80</i>	<i>metronidazole tab 500 mg.....</i>	<i>22</i>
<i>methylprednisolone tab 4 mg</i>	<i>80</i>	<i>metronidazole vaginal gel 0.75%</i>	<i>127</i>
<i>methylprednisolone tab 8 mg</i>	<i>80</i>	<i>metyrosine cap 250 mg</i>	<i>49</i>
<i>methylprednisolone tab therapy pack 4 mg</i>		<i>mexiletine hcl cap 150 mg</i>	<i>26</i>
<i>(21).....</i>	<i>80</i>	<i>mexiletine hcl cap 200 mg.....</i>	<i>26</i>
<i>methyltestosterone cap 10 mg.....</i>	<i>21</i>	<i>mexiletine hcl cap 250 mg.....</i>	<i>26</i>
<i>methyltestosterone oral tab 10 mg</i>	<i>21</i>	<i>micafungin sodium for iv soln 100 mg</i>	<i>44</i>
<i>metoclopramide hcl orally disintegrating</i>		<i>micafungin sodium for iv soln 50 mg</i>	<i>44</i>
<i>tab 5 mg (base eq)</i>	<i>99</i>	<i>miconazole nitrate vaginal suppos 200 mg</i>	
<i>metoclopramide hcl soln 5 mg/5ml (10</i>		<i>.....</i>	<i>127</i>
<i>mg/10ml) (base equiv)</i>	<i>99</i>	<i>miconazole-zinc oxide-white petrolatum</i>	
		<i>oint 0.25-15-81.35%</i>	<i>83</i>

<i>midodrine hcl tab 10 mg</i>	127	<i>mometasone furoate oint 0.1%</i>	89
<i>midodrine hcl tab 2.5 mg</i>	127	<i>mometasone furoate solution 0.1% (lotion)</i>	89
<i>midodrine hcl tab 5 mg</i>	127	<i>montelukast sodium chew tab 4 mg (base</i> <i>equiv)</i>	28
<i>mifepristone tab 200 mg</i>	96	<i>montelukast sodium chew tab 5 mg (base</i> <i>equiv)</i>	28
<i>mifepristone tab 300 mg</i>	40	<i>montelukast sodium oral granules packet 4</i> <i>mg (base equiv)</i>	28
<i>miglitol tab 100 mg</i>	39	<i>montelukast sodium tab 10 mg (base equiv)</i>	28
<i>miglitol tab 25 mg</i>	39	<i>morphine sulfate beads cap er 24hr 120 mg</i>	18
<i>miglitol tab 50 mg</i>	39	<i>morphine sulfate beads cap er 24hr 30 mg</i>	18
<i>miglustat cap 100 mg</i>	103	<i>morphine sulfate beads cap er 24hr 45 mg</i>	18
<i>minocycline hcl cap 100 mg</i>	123	<i>morphine sulfate beads cap er 24hr 60 mg</i>	18
<i>minocycline hcl cap 50 mg</i>	123	<i>morphine sulfate beads cap er 24hr 75 mg</i>	18
<i>minocycline hcl cap 75 mg</i>	123	<i>morphine sulfate beads cap er 24hr 90 mg</i>	18
<i>minocycline hcl tab 100 mg</i>	123	<i>morphine sulfate cap er 24hr 100 mg</i>	18
<i>minocycline hcl tab 50 mg</i>	123	<i>morphine sulfate cap er 24hr 10 mg</i>	18
<i>minocycline hcl tab 75 mg</i>	123	<i>morphine sulfate cap er 24hr 20 mg</i>	18
<i>minocycline hcl tab er 24hr biphasic release</i> <i>105 mg</i>	123	<i>morphine sulfate cap er 24hr 30 mg</i>	18
<i>minocycline hcl tab er 24hr biphasic release</i> <i>135 mg</i>	123	<i>morphine sulfate cap er 24hr 50 mg</i>	18
<i>minoxidil tab 10 mg</i>	53	<i>morphine sulfate cap er 24hr 60 mg</i>	18
<i>minoxidil tab 2.5 mg</i>	53	<i>morphine sulfate cap er 24hr 80 mg</i>	18
<i>mirabegron tab er 24 hr 25 mg</i>	126	<i>morphine sulfate oral soln 100 mg/5ml (20</i> <i>mg/ml)</i>	18
<i>mirabegron tab er 24 hr 50 mg</i>	126	<i>morphine sulfate oral soln 10 mg/5ml</i>	18
<i>mirtazapine orally disintegrating tab 15 mg</i>	35	<i>morphine sulfate oral soln 20 mg/5ml</i>	18
<i>mirtazapine orally disintegrating tab 30 mg</i>	35	<i>morphine sulfate suppos 10 mg</i>	18
<i>mirtazapine orally disintegrating tab 45 mg</i>	35	<i>morphine sulfate suppos 20 mg</i>	18
<i>mirtazapine tab 15 mg</i>	35	<i>morphine sulfate suppos 30 mg</i>	18
<i>mirtazapine tab 30 mg</i>	35	<i>morphine sulfate suppos 5 mg</i>	18
<i>mirtazapine tab 45 mg</i>	35	<i>morphine sulfate tab 15 mg</i>	18
<i>mirtazapine tab 7.5 mg</i>	35	<i>morphine sulfate tab 30 mg</i>	18
<i>misoprostol tab 100 mcg</i>	126	<i>morphine sulfate tab er 100 mg</i>	19
<i>misoprostol tab 200 mcg</i>	126	<i>morphine sulfate tab er 15 mg</i>	19
<i>MITIGARE CAP 0.6MG</i>	102	<i>morphine sulfate tab er 200 mg</i>	19
<i>modafinil tab 100 mg</i>	6	<i>morphine sulfate tab er 30 mg</i>	19
<i>modafinil tab 200 mg</i>	6		
<i>moexipril hcl tab 15 mg</i>	48		
<i>moexipril hcl tab 7.5 mg</i>	48		
<i>molindone hcl tab 10 mg</i>	64		
<i>molindone hcl tab 25 mg</i>	64		
<i>molindone hcl tab 5 mg</i>	64		
<i>mometasone furoate cream 0.1%</i>	89		

<i>morphine sulfate tab er 60 mg</i>	19
MOUNJARO INJ 10MG/0.5	41
MOUNJARO INJ 12.5/0.5	41
MOUNJARO INJ 15MG/0.5	41
MOUNJARO INJ 2.5/0.5.....	41
MOUNJARO INJ 5MG/0.5.....	41
MOUNJARO INJ 7.5/0.5.....	41
MOVANTIK TAB 12.5MG	101
MOVANTIK TAB 25MG.....	101
<i>moxifloxacin hcl ophth soln 0.5% (base eq)</i> <i>(2 times daily)</i>	115
<i>moxifloxacin hcl ophth soln 0.5% (base</i> <i>equiv)</i>	115
<i>moxifloxacin hcl tab 400 mg (base equiv)</i> 98	
<i>mupirocin oint 2%</i>	83
<i>mycophenolate mofetil cap 250 mg</i>	111
<i>mycophenolate mofetil for oral susp 200</i> <i>mg/ml</i>	111
<i>mycophenolate mofetil tab 500 mg</i>	111
<i>mycophenolate sodium tab dr 180 mg</i> <i>(mycophenolic acid equiv)</i>	111
<i>mycophenolate sodium tab dr 360 mg</i> <i>(mycophenolic acid equiv)</i>	111
MYFEMBREE TAB	97
MYFORTIC TAB 180MG.....	111
MYFORTIC TAB 360MG.....	111
MYLERAN TAB 2MG.....	54

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<i>nabumetone tab 500 mg</i>	13
<i>nabumetone tab 750 mg</i>	13
<i>nadolol tab 20 mg</i>	70
<i>nadolol tab 40 mg</i>	70
<i>nadolol tab 80 mg</i>	70
<i>naftifine hcl cream 1%</i>	83
<i>naftifine hcl cream 2%</i>	83
<i>naftifine hcl gel 2%</i>	83
<i>naloxone hcl inj 0.4 mg/ml</i>	43
<i>naloxone hcl inj 4 mg/10ml</i>	43
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	43
<i>naloxone hcl soln prefilled syringe 0.4</i> <i>mg/ml</i>	43
<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i>	43
<i>naltrexone hcl tab 50 mg</i>	43

<i>naproxen sodium tab 275 mg</i>	13
<i>naproxen sodium tab 550 mg</i>	13
<i>naproxen sodium tab er 24hr 375 mg (base</i> <i>equiv)</i>	13
<i>naproxen sodium tab er 24hr 500 mg (base</i> <i>equiv)</i>	13
<i>naproxen sodium tab er 24hr 750 mg (base</i> <i>equiv)</i>	13
<i>naproxen tab 250 mg</i>	13
<i>naproxen tab 375 mg</i>	13
<i>naproxen tab 500 mg</i>	13
<i>naproxen tab ec 375 mg</i>	13
<i>naproxen tab ec 500 mg</i>	13
<i>naratriptan hcl tab 1 mg (base equiv)</i>	108
<i>naratriptan hcl tab 2.5 mg (base equiv)</i> ...108	
NATACYN SUS 5% OP	115
<i>nateglinide tab 120 mg</i>	42
<i>nateglinide tab 60 mg</i>	42
<i>nebivolol hcl tab 10 mg (base equivalent)</i> 70	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	70
<i>nebivolol hcl tab 20 mg (base equivalent)</i> 70	
<i>nebivolol hcl tab 5 mg (base equivalent)</i> ..70	
<i>nefazodone hcl tab 100 mg</i>	36
<i>nefazodone hcl tab 150 mg</i>	36
<i>nefazodone hcl tab 200 mg</i>	37
<i>nefazodone hcl tab 250 mg</i>	37
<i>nefazodone hcl tab 50 mg</i>	36
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i> <i>400unt-10000unt op oin</i>	115
<i>neomycin-polymyx-gramicid op sol 1.75-</i> <i>10000-0.025mg-unt-mg/ml</i>	115
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth oint 0.1%</i>	116
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth susp 0.1%</i>	116
<i>neomycin-polymyxin-hc ophth susp</i>	116
<i>neomycin-polymyxin-hc otic soln 1%</i>	117
<i>neomycin-polymyxin-hc otic susp 3.5</i> <i>mg/ml-10000 unit/ml-1%</i>	117
<i>neomycin sulfate tab 500 mg</i>	6
NEORAL CAP 100MG	111
NEORAL CAP 25MG	111
NEORAL SOL 100MG/ML	111

NERLYNX TAB 40MG.....	58	<i>nitrofurantoin macrocrystalline cap 100 mg</i>	
<i>nevirapine susp 50 mg/5ml.....</i>	<i>67</i>		24
<i>nevirapine tab 200 mg</i>	<i>67</i>	<i>nitrofurantoin macrocrystalline cap 25 mg</i>	
<i>nevirapine tab er 24hr 100 mg.....</i>	<i>67</i>		24
<i>nevirapine tab er 24hr 400 mg.....</i>	<i>67</i>	<i>nitrofurantoin macrocrystalline cap 50 mg</i>	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>			24
.....	47	<i>nitrofurantoin monohydrate</i>	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	47	<i>macrocrystalline cap 100 mg</i>	24
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	47	<i>nitrofurantoin susp 25 mg/5ml.....</i>	24
<i>nicardipine hcl cap 20 mg.....</i>	<i>72</i>	<i>nitroglycerin cap er 2.5 mg</i>	24
<i>nicardipine hcl cap 30 mg.....</i>	<i>72</i>	<i>nitroglycerin cap er 6.5 mg.....</i>	24
<i>nifedipine cap 10 mg</i>	<i>72</i>	<i>nitroglycerin cap er 9 mg</i>	24
<i>nifedipine cap 20 mg</i>	<i>72</i>	<i>nitroglycerin oint 0.4%</i>	22
<i>nifedipine tab er 24hr 30 mg</i>	<i>72</i>	<i>nitroglycerin sl tab 0.3 mg</i>	24
<i>nifedipine tab er 24hr 60 mg</i>	<i>72</i>	<i>nitroglycerin sl tab 0.4 mg</i>	24
<i>nifedipine tab er 24hr 90 mg</i>	<i>72</i>	<i>nitroglycerin sl tab 0.6 mg</i>	24
<i>nifedipine tab er 24hr osmotic release 30</i>		<i>nitroglycerin td patch 24hr 0.1 mg/hr.....</i>	24
<i>mg.....</i>	72	<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	24
<i>nifedipine tab er 24hr osmotic release 60</i>		<i>nitroglycerin td patch 24hr 0.4 mg/hr.....</i>	24
<i>mg.....</i>	72	<i>nitroglycerin td patch 24hr 0.6 mg/hr.....</i>	24
<i>nifedipine tab er 24hr osmotic release 90</i>		<i>nitroglycerin tl soln 0.4 mg/spray (400</i>	
<i>mg.....</i>	72	<i>mcg/spray).....</i>	24
<i>nilutamide tab 150 mg</i>	56	NIVESTYM INJ 300/0.5	104
<i>nimodipine cap 30 mg.....</i>	72	NIVESTYM INJ 300MCG	104
<i>nimodipine oral soln 60 mg/20ml (3 mg/ml)</i>		NIVESTYM INJ 480/0.8	104
.....	72	NIVESTYM INJ 480MCG	104
NINLARO CAP 2.3MG.....	58	<i>nizatidine cap 150 mg</i>	125
NINLARO CAP 3MG.....	58	<i>nizatidine cap 300 mg.....</i>	125
NINLARO CAP 4MG.....	58	NORDITROPIN INJ 10/1.5ML.....	95
<i>nisoldipine tab er 24hr 17 mg</i>	<i>72</i>	NORDITROPIN INJ 15/1.5ML.....	95
<i>nisoldipine tab er 24hr 20 mg</i>	<i>72</i>	NORDITROPIN INJ 30/3ML	95
<i>nisoldipine tab er 24hr 25.5 mg</i>	<i>72</i>	NORDITROPIN INJ 5/1.5ML	95
<i>nisoldipine tab er 24hr 30 mg</i>	<i>72</i>	<i>norelgestromin-ethinyl estradiol td ptwk</i>	
<i>nisoldipine tab er 24hr 34 mg</i>	<i>72</i>	<i>150-35 mcg/24hr</i>	79
<i>nisoldipine tab er 24hr 40 mg.....</i>	<i>72</i>	<i>norethindrone & ethinyl estradiol-fe chew</i>	
<i>nisoldipine tab er 24hr 8.5 mg</i>	<i>72</i>	<i>tab 0.4 mg-35 mcg</i>	78
<i>nitazoxanide tab 500 mg</i>	23	<i>norethindrone & ethinyl estradiol-fe chew</i>	
<i>nitisinone cap 10 mg</i>	96	<i>tab 0.8 mg-25 mcg.....</i>	78
<i>nitisinone cap 20 mg</i>	96	<i>norethindrone & ethinyl estradiol tab 0.4</i>	
<i>nitisinone cap 2 mg.....</i>	95	<i>mg-35 mcg.....</i>	78
<i>nitisinone cap 5 mg.....</i>	96	<i>norethindrone & ethinyl estradiol tab 0.5</i>	
NITRO-DUR DIS 0.3MG/HR.....	24	<i>mg-35 mcg.....</i>	78
NITRO-DUR DIS 0.8MG/HR.....	24	<i>norethindrone & ethinyl estradiol tab 1 mg-</i>	
		<i>35 mcg</i>	78

<i>norethindrone ace & ethinyl estradiol-fe tab</i>	
1.5 mg-30 mcg	78
<i>norethindrone ace & ethinyl estradiol-fe tab</i>	
1 mg-20 mcg	78
<i>norethindrone ace & ethinyl estradiol tab 1.5</i>	
mg-30 mcg.....	78
<i>norethindrone ace & ethinyl estradiol tab 1</i>	
mg-20 mcg.....	78
<i>norethindrone ace-eth estradiol-fe chew</i>	
<i>tab 1 mg-20 mcg (24).....</i>	78
<i>norethindrone ace-ethinyl estradiol-fe cap 1</i>	
mg-20 mcg (24).....	78
<i>norethindrone ace-ethinyl estradiol-fe tab 1</i>	
mg-20 mcg (24).....	78
<i>norethindrone acetate-ethinyl estradiol tab</i>	
0.5 mg-2.5 mcg	97
<i>norethindrone acetate-ethinyl estradiol tab</i>	
1 mg-5 mcg.....	97
<i>norethindrone acetate tab 5 mg.....</i>	119
<i>norethindrone ac-ethinyl estrad-fe tab 1-</i>	
20/1-30/1-35 mg-mcg	78
<i>norethindrone-eth estradiol tab 0.5-</i>	
35/0.75-35/1-35 mg-mcg	78
<i>norethindrone-eth estradiol tab 0.5-35/1-</i>	
35/0.5-35 mg-mcg	78
<i>norethindrone tab 0.35 mg.....</i>	79
<i>norgestimate & ethinyl estradiol tab 0.25</i>	
mg-35 mcg.....	78
<i>norgestimate-eth estrad tab 0.18-25/0.215-</i>	
25/0.25-25 mg-mcg	78
<i>norgestimate-eth estrad tab 0.18-35/0.215-</i>	
35/0.25-35 mg-mcg	78
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30</i>	
mcg	78
NORPACE CAP 100MG CR	26
NORPACE CAP 150MG CR	26
<i>nortriptyline hcl cap 10 mg.....</i>	38
<i>nortriptyline hcl cap 25 mg</i>	38
<i>nortriptyline hcl cap 50 mg.....</i>	38
<i>nortriptyline hcl cap 75 mg</i>	38
<i>nortriptyline hcl soln 10 mg/5ml.....</i>	38
NORVIR CAP 100MG	67
NORVIR POW 100MG	67
NOVOLIN INJ 70/30.....	42

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NOVOLIN N INJ 100 UNIT	42
NOVOLIN N INJ U-100	42
NOVOLIN R INJ 100 UNIT	42
NOVOLIN R INJ U-100.....	42
NOVOLOG INJ 100/ML	42
NOVOLOG INJ FLEXPEN	42
NOVOLOG INJ PENFILL.....	42
NOVOLOG MIX INJ 70/30	42
NOVOLOG MIX INJ FLEXPEN	42
NUBEQA TAB 300MG	56
NUCALA INJ 100MG	27
NUCALA INJ 100MG/ML	27
NUCALA INJ 40MG/0.4	27
<i>nystatin cream 100000 unit/gm</i>	83
<i>nystatin oint 100000 unit/gm</i>	83
<i>nystatin susp 100000 unit/ml</i>	112
<i>nystatin tab 500000 unit.....</i>	44
<i>nystatin topical powder 100000 unit/gm .83</i>	
<i>nystatin-triamcinolone cream 100000-0.1</i>	
<i>unit/gm-%.....</i>	83
<i>nystatin-triamcinolone oint 100000-0.1</i>	
<i>unit/gm-%</i>	83
NYVEPRIA INJ 6/0.6ML	104
●	
OB COMPLETE TAB	112
OCALIVA TAB 10MG.....	99
OCALIVA TAB 5MG	99
<i>octreotide acetate inj 1000 mcg/ml (1</i>	
<i>mg/ml)</i>	97
<i>octreotide acetate inj 100 mcg/ml (0.1</i>	
<i>mg/ml)</i>	97
<i>octreotide acetate inj 200 mcg/ml (0.2</i>	
<i>mg/ml)</i>	97
<i>octreotide acetate inj 500 mcg/ml (0.5</i>	
<i>mg/ml)</i>	97
<i>octreotide acetate inj 50 mcg/ml (0.05</i>	
<i>mg/ml)</i>	97
<i>octreotide acetate subcutaneous soln pref</i>	
<i>syr 100 mcg/ml.....</i>	97
<i>octreotide acetate subcutaneous soln pref</i>	
<i>syr 500 mcg/ml</i>	97
<i>octreotide acetate subcutaneous soln pref</i>	
<i>syr 50 mcg/ml</i>	97

ODEFSEY TAB.....	67	olmesartan medoxomil tab 40 mg	49
ODOMZO CAP 200MG.....	55	olmesartan medoxomil tab 5 mg	49
OFEV CAP 100MG	123	olopatadine hcl nasal soln 0.6%	114
OFEV CAP 150MG.....	123	omega-3-acid ethyl esters cap 1 gm	45
ofloxacin ophth soln 0.3%.....	115	omeprazole cap delayed release 10 mg ..	125
ofloxacin otic soln 0.3%	117	omeprazole cap delayed release 20 mg ..	125
ofloxacin tab 300 mg.....	98	omeprazole cap delayed release 40 mg ..	125
ofloxacin tab 400 mg.....	98	OMNIPOD 5 DX KIT INT G7G6.....	107
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olanzapine-fluoxetine hcl cap 3-25 mg ...	120	OMNIPOD 5 G7 MIS PODS.....	107
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olanzapine-fluoxetine hcl cap 6-50 mg ...	120	OMNIPOD 5 LB MIS PODS G6	107
olanzapine for im inj 10 mg	63	OMNIPOD DASH KIT INTRO	107
olanzapine orally disintegrating tab 10 mg	63	OMNIPOD DASH KIT PDM	107
.....	63	OMNIPOD DASH MIS PODS	107
olanzapine orally disintegrating tab 15 mg	63	OMNIPOD MIS CLASSIC	107
.....	63	ondansetron hcl oral soln 4 mg/5ml	43
olanzapine orally disintegrating tab 20 mg	63	ondansetron hcl tab 24 mg	43
.....	63	ondansetron hcl tab 4 mg	43
olanzapine orally disintegrating tab 5 mg.	63	ondansetron hcl tab 8 mg	43
olanzapine tab 10 mg	63	ondansetron orally disintegrating tab 4 mg	43
olanzapine tab 15 mg	63		43
olanzapine tab 2.5 mg	63	ondansetron orally disintegrating tab 8 mg	43
olanzapine tab 20 mg	63		43
olanzapine tab 5 mg.....	63	ONETOUCH DEL MIS PLUS 30G	107
olanzapine tab 7.5 mg	63	ONETOUCH DEL MIS PLUS 33G	107
olmesartan-amlodipine-		ONETOUCH TES ULT BLUE	91
hydrochlorothiazide tab 20-5-12.5 mg ..	52	ONETOUCH TES ULTRA.....	92
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hydrochlorothiazide tab 40-10-12.5 mg	52	ONUREG TAB 200MG	54
olmesartan-amlodipine-		ONUREG TAB 300MG	54
hydrochlorothiazide tab 40-10-25 mg...	52	OPILL TAB 0.075MG	79
olmesartan-amlodipine-		opium tincture 1% (10 mg/ml) (morphine	
hydrochlorothiazide tab 40-5-12.5 mg ..	52	equiv)	43
olmesartan-amlodipine-		OPSUMIT TAB 10MG	75
hydrochlorothiazide tab 40-5-25 mg	52	ORACEA CAP 40MG	91
olmesartan medoxomil-		ORALAIR SUB 300 IR.....	6
hydrochlorothiazide tab 20-12.5 mg	52	ORENCIA CLCK INJ 125MG/ML	14
olmesartan medoxomil-		ORENCIA INJ 125MG/ML	15
hydrochlorothiazide tab 40-12.5 mg.....	52	ORENCIA INJ 50/0.4ML.....	14
olmesartan medoxomil-		ORENCIA INJ 87.5/0.7	15
hydrochlorothiazide tab 40-25 mg	52	ORENITRAM TAB 0.125MG	75
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ORENITRAM TAB 2.5MG	75
ORENITRAM TAB 5MG.....	75
ORENITRAM TAB MONTH 1	75
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ORFADIN CAP 10MG	96
ORFADIN CAP 20MG	96
ORFADIN CAP 2MG.....	96
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orlistat cap 120 mg	3
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oseltamivir phosphate cap 30 mg (base equiv)	69
oseltamivir phosphate cap 45 mg (base equiv)	69
oseltamivir phosphate cap 75 mg (base equiv)	69
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OTULFI INJ 45/0.5ML	85
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oxandrolone tab 10 mg.....	21
oxandrolone tab 2.5 mg	21
oxaprozin cap 300 mg	13
oxaprozin tab 600 mg	13
oxazepam cap 10 mg.....	26
oxazepam cap 15 mg	26
oxazepam cap 30 mg	26
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	33
oxcarbazepine tab 150 mg.....	33
oxcarbazepine tab 300 mg.....	33
oxcarbazepine tab 600 mg.....	33
oxcarbazepine tab er 24hr 150 mg	33
oxcarbazepine tab er 24hr 300 mg	33
oxcarbazepine tab er 24hr 600 mg	34
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oxybutynin chloride solution 5 mg/5ml...	126
oxybutynin chloride tab 5 mg	126
oxybutynin chloride tab er 24hr 10 mg	126
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oxybutynin chloride tab er 24hr 5 mg	126
oxycodone hcl cap 5 mg.....	19
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	19
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oxycodone hcl tab 10 mg	19
oxycodone hcl tab 15 mg	19
oxycodone hcl tab 20 mg	19
oxycodone hcl tab 30 mg	19
oxycodone hcl tab 5 mg.....	19
oxycodone hcl tab er 12hr deter 10 mg	19
oxycodone hcl tab er 12hr deter 20 mg	19
oxycodone hcl tab er 12hr deter 40 mg	19
oxycodone hcl tab er 12hr deter 80 mg	19
oxycodone w/ acetaminophen tab 10-325 mg	20
oxycodone w/ acetaminophen tab 2.5-325 mg	20
oxycodone w/ acetaminophen tab 5-325 mg	20
oxycodone w/ acetaminophen tab 7.5-325 mg	20
oxymorphone hcl tab 10 mg.....	19
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OZEMPIC INJ 2MG/3ML.....	41
OZEMPIC INJ 4MG/3ML	41
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paliperidone tab er 24hr 3 mg	62
paliperidone tab er 24hr 6 mg	62
paliperidone tab er 24hr 9 mg	62
pantoprazole sodium ec tab 20 mg (base equiv)	125
pantoprazole sodium ec tab 40 mg (base equiv)	125
pantoprazole sodium for iv soln 40 mg (base equiv)	125
paricalcitol cap 1 mcg	96
paricalcitol cap 2 mcg	96

<i>paricalcitol cap 4 mcg</i>	96	<i>perphenazine tab 16 mg</i>	64
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	36	<i>perphenazine tab 2 mg</i>	64
<i>paroxetine hcl tab 10 mg</i>	36	<i>perphenazine tab 4 mg</i>	64
<i>paroxetine hcl tab 20 mg</i>	36	<i>perphenazine tab 8 mg</i>	64
<i>paroxetine hcl tab 30 mg</i>	36	<i>PHEBURANE MIS 483/GM</i>	96
<i>paroxetine hcl tab 40 mg</i>	36	<i>phenazopyridine hcl tab 100 mg</i>	102
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	36	<i>phenazopyridine hcl tab 200 mg</i>	102
<i>paroxetine hcl tab er 24hr 25 mg</i>	36	<i>phendimetrazine tartrate tab 35 mg</i>	3
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	36	<i>phenelzine sulfate tab 15 mg</i>	35
<i>PAXLOVID TAB 150-100</i>	68	<i>phenobarbital elixir 20 mg/5ml</i>	105
<i>PAXLOVID TAB 300-100</i>	68	<i>phenobarbital tab 100 mg</i>	105
<i>pazopanib hcl tab 200 mg (base equiv)</i>	58	<i>phenobarbital tab 15 mg</i>	105
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	125	<i>phenobarbital tab 16.2 mg</i>	105
<i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i>	125	<i>phenobarbital tab 30 mg</i>	105
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	105	<i>phenobarbital tab 32.4 mg</i>	105
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	106	<i>phenobarbital tab 60 mg</i>	105
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	106	<i>phenobarbital tab 64.8 mg</i>	105
<i>penciclovir cream 1%</i>	88	<i>phenobarbital tab 97.2 mg</i>	105
<i>penicillamine cap 250 mg</i>	110	<i>phenoxybenzamine hcl cap 10 mg</i>	49
<i>penicillamine tab 250 mg</i>	110	<i>phentermine hcl cap 15 mg</i>	3
<i>penicillin v potassium for soln 125 mg/5ml</i>	118	<i>phentermine hcl cap 30 mg</i>	3
<i>penicillin v potassium for soln 250 mg/5ml</i>	118	<i>phentermine hcl cap 37.5 mg</i>	3
<i>penicillin v potassium tab 250 mg</i>	118	<i>phentermine hcl tab 37.5 mg</i>	3
<i>penicillin v potassium tab 500 mg</i>	118	<i>phenylephrine hcl ophth soln 10%</i>	115
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	21	<i>phenylephrine hcl ophth soln 2.5%</i>	115
<i>pentoxifylline tab er 400 mg</i>	103	<i>phenytoin chew tab 50 mg</i>	35
<i>perindopril erbumine tab 2 mg</i>	48	<i>phenytoin sodium extended cap 100 mg</i>	35
<i>perindopril erbumine tab 4 mg</i>	48	<i>phenytoin sodium extended cap 200 mg</i>	35
<i>perindopril erbumine tab 8 mg</i>	48	<i>phenytoin sodium extended cap 300 mg</i>	35
<i>permethrin cream 5%</i>	91	<i>phenytoin susp 125 mg/5ml</i>	35
<i>perphenazine-amitriptyline tab 2-10 mg</i>	120	<i>PHEXXI GEL</i>	127
<i>perphenazine-amitriptyline tab 2-25 mg</i>	120	<i>phytonadione tab 5 mg</i>	127
<i>perphenazine-amitriptyline tab 4-10 mg</i>	120	<i>pilocarpine hcl ophth soln 1%</i>	115
<i>perphenazine-amitriptyline tab 4-25 mg</i>	120	<i>pilocarpine hcl ophth soln 2%</i>	115
<i>perphenazine-amitriptyline tab 4-50 mg</i>	120	<i>pilocarpine hcl ophth soln 4%</i>	115
		<i>pilocarpine hcl tab 5 mg</i>	112
		<i>pilocarpine hcl tab 7.5 mg</i>	112
		<i>pimecrolimus cream 1%</i>	90
		<i>pimozide tab 1 mg</i>	122
		<i>pimozide tab 2 mg</i>	122
		<i>pindolol tab 10 mg</i>	70
		<i>pindolol tab 5 mg</i>	70
		<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	39
		<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	39

<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	39
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	39
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	42
<i>pioglitazone hcl tab 30 mg (base equiv)</i> ..	42
<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...	42
<i>PIQRAY 200MG TAB DOSE</i>	58
<i>PIQRAY 250MG TAB DOSE</i>	58
<i>PIQRAY 300MG TAB DOSE</i>	58
<i>pirfenidone cap 267 mg</i>	123
<i>pirfenidone tab 267 mg</i>	123
<i>pirfenidone tab 801 mg</i>	123
<i>piroxicam cap 10 mg</i>	13
<i>piroxicam cap 20 mg</i>	13
<i>pitavastatin calcium tab 1 mg</i>	47
<i>pitavastatin calcium tab 2 mg</i>	47
<i>pitavastatin calcium tab 4 mg</i>	47
<i>PLEGRIDY INJ</i>	121
<i>PLEGRIDY INJ PEN</i>	121
<i>PLEGRIDY INJ STARTER</i>	121
<i>PLEGRIDY PEN INJ STARTER</i>	121
<i>podofilox gel 0.5%</i>	90
<i>podofilox soln 0.5%</i>	90
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	116
<i>POMALYST CAP 1MG</i>	56
<i>POMALYST CAP 2MG</i>	56
<i>POMALYST CAP 3MG</i>	56
<i>POMALYST CAP 4MG</i>	56
<i>posaconazole susp 40 mg/ml</i>	44
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	101
<i>potassium chloride cap er 10 meq</i>	109
<i>potassium chloride cap er 8 meq</i>	109
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	109
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	109
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	109
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	110
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	110
<i>potassium chloride powder packet 20 meq</i>	110
<i>potassium chloride tab er 10 meq</i>	110
<i>potassium chloride tab er 15 meq</i>	110
<i>potassium chloride tab er 20 meq (1500 mg)</i>	110
<i>potassium chloride tab er 8 meq (600 mg)</i>	110
<i>potassium citrate & citric acid powder pack 3300-1002 mg</i>	101
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	101
<i>potassium citrate tab er 10 meq (1080 mg)</i>	101
<i>potassium citrate tab er 15 meq (1620 mg)</i>	101
<i>potassium citrate tab er 5 meq (540 mg)</i> ..	101
<i>pramipexole dihydrochloride tab 0.125 mg</i>	61
<i>pramipexole dihydrochloride tab 0.25 mg</i>	60
<i>pramipexole dihydrochloride tab 0.5 mg</i> ..	60
<i>pramipexole dihydrochloride tab 0.75 mg</i> ..	61
<i>pramipexole dihydrochloride tab 1 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	61
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	61
<i>pramoxine-hc cream 1-2.5%</i>	89
<i>prasugrel hcl tab 10 mg (base equiv)</i>	103
<i>prasugrel hcl tab 5 mg (base equiv)</i>	103

<i>pravastatin sodium tab 10 mg</i>	47	<i>pregabalin tab er 24hr 165 mg</i>	122
<i>pravastatin sodium tab 20 mg</i>	47	<i>pregabalin tab er 24hr 330 mg</i>	122
<i>pravastatin sodium tab 40 mg</i>	47	<i>pregabalin tab er 24hr 82.5 mg</i>	122
<i>pravastatin sodium tab 80 mg</i>	47	PRENATAL 19 CHW 29-1MG	113
<i>praziquantel tab 600 mg</i>	22	<i>prenatal vit w/ dss-iron carbonyl-fa tab 90-1</i> <i>mg</i>	113
<i>prazosin hcl cap 1 mg</i>	50	<i>prenatal vit w/ fe fumarate-fa chew tab 29-1</i> <i>mg</i>	113
<i>prazosin hcl cap 2 mg</i>	50	<i>prenatal vit w/ fe fumarate-fa tab 28-1 mg</i>	113
<i>prazosin hcl cap 5 mg</i>	50	<i>prenatal vit w/ fe fum-methylfolate-fa tab</i> <i>27-0.6-0.4 mg</i>	113
<i>prednisolone acetate ophth susp 1%</i>	116	<i>prenatal vit w/ iron carbonyl-fa tab 50-1.25</i> <i>mg</i>	113
<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i>	80	<i>prenat w/o a w/feum-methfol-fa-dha cap</i> <i>27-0.6-0.4-300 mg</i>	113
<i>prednisolone sod phos orally disintegr tab</i> <i>10 mg (base eq)</i>	80	PREZCOBIX TAB 800-150	67
<i>prednisolone sod phos orally disintegr tab</i> <i>15 mg (base eq)</i>	80	PREZISTA SUS 100MG/ML	67
<i>prednisolone sod phos orally disintegr tab</i> <i>30 mg (base eq)</i>	80	PREZISTA TAB 150MG	67
<i>prednisolone sod phosphate oral soln 15</i> <i>mg/5ml (base equiv)</i>	80	PREZISTA TAB 75MG	67
<i>prednisolone sod phosphate oral soln 5</i> <i>mg/5ml (base equiv)</i>	80	PRIFTIN TAB 150MG	53
<i>prednisolone soln 15 mg/5ml</i>	80	<i>primaquine phosphate tab 26.3 mg (15 mg</i> <i>base)</i>	53
<i>prednisolone tab 5 mg</i>	80	<i>primidone tab 250 mg</i>	34
<i>prednisone oral soln 5 mg/5ml</i>	80	<i>primidone tab 50 mg</i>	34
<i>prednisone tab 10 mg</i>	80	<i>probenecid tab 500 mg</i>	102
<i>prednisone tab 1 mg</i>	80	<i>prochlorperazine edisylate inj 10 mg/2ml</i>	64
<i>prednisone tab 2.5 mg</i>	80	<i>prochlorperazine maleate tab 10 mg (base</i> <i>equivalent)</i>	64
<i>prednisone tab 20 mg</i>	80	<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	64
<i>prednisone tab 50 mg</i>	80	<i>prochlorperazine suppos 25 mg</i>	64
<i>prednisone tab 5 mg</i>	80	<i>progesterone cap 100 mg</i>	119
<i>prednisone tab therapy pack 10 mg (21)</i>	80	<i>progesterone cap 200 mg</i>	119
<i>prednisone tab therapy pack 10 mg (48)</i>	80	<i>progesterone im in oil 50 mg/ml</i>	119
<i>prednisone tab therapy pack 5 mg (21)</i>	80	PROGRAF CAP 0.5MG	111
<i>prednisone tab therapy pack 5 mg (48)</i>	80	PROGRAF CAP 1MG	111
PRED SOD PHO SOL 1% OP	116	PROGRAF CAP 5MG	111
<i>pregabalin cap 100 mg</i>	34	PROGRAF GRA 0.2MG	111
<i>pregabalin cap 150 mg</i>	34	PROGRAF GRA 1MG	111
<i>pregabalin cap 200 mg</i>	34	<i>promethazine & phenylephrine syrup 6.25-</i> <i>5 mg/5ml</i>	81
<i>pregabalin cap 225 mg</i>	34	<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	81
<i>pregabalin cap 25 mg</i>	34	<i>promethazine hcl oral soln 6.25 mg/5ml</i>	45
<i>pregabalin cap 300 mg</i>	34		
<i>pregabalin cap 50 mg</i>	34		
<i>pregabalin cap 75 mg</i>	34		
<i>pregabalin soln 20 mg/ml</i>	34		

<i>promethazine hcl suppos 12.5 mg</i>	45
<i>promethazine hcl suppos 25 mg</i>	45
<i>promethazine hcl suppos 50 mg</i>	45
<i>promethazine hcl tab 12.5 mg</i>	45
<i>promethazine hcl tab 25 mg</i>	45
<i>promethazine hcl tab 50 mg</i>	45
<i>promethazine w/ codeine syrup 6.25-10</i> <i>mg/5ml</i>	81
<i>propafenone hcl cap er 12hr 225 mg</i>	26
<i>propafenone hcl cap er 12hr 325 mg</i>	26
<i>propafenone hcl cap er 12hr 425 mg</i>	26
<i>propafenone hcl tab 150 mg</i>	27
<i>propafenone hcl tab 225 mg</i>	27
<i>propafenone hcl tab 300 mg</i>	27
<i>proparacaine hcl ophth soln 0.5%</i>	116
<i>propranolol hcl cap er 24hr 120 mg</i>	70
<i>propranolol hcl cap er 24hr 160 mg</i>	70
<i>propranolol hcl cap er 24hr 60 mg</i>	70
<i>propranolol hcl cap er 24hr 80 mg</i>	70
<i>propranolol hcl oral soln 20 mg/5ml</i>	70
<i>propranolol hcl oral soln 40 mg/5ml</i>	70
<i>propranolol hcl tab 10 mg</i>	70
<i>propranolol hcl tab 20 mg</i>	70
<i>propranolol hcl tab 40 mg</i>	70
<i>propranolol hcl tab 60 mg</i>	70
<i>propranolol hcl tab 80 mg</i>	70
<i>propylthiouracil tab 50 mg</i>	124
<i>protriptyline hcl tab 10 mg</i>	38
<i>protriptyline hcl tab 5 mg</i>	38
<i>prucalopride succinate tab 1 mg (base</i> <i>equivalent)</i>	99
<i>prucalopride succinate tab 2 mg (base</i> <i>equivalent)</i>	99
<i>pseudoephed-bromphen-dm syrup 30-2-10</i> <i>mg/5ml</i>	81
<i>PULMOZYME SOL 1MG/ML</i>	122
<i>pyrazinamide tab 500 mg</i>	53
<i>pyridostigmine bromide oral soln 60</i> <i>mg/5ml</i>	53
<i>pyridostigmine bromide tab 30 mg</i>	53
<i>pyridostigmine bromide tab 60 mg</i>	53
<i>pyridostigmine bromide tab er 180 mg</i>	53
<i>pyrimethamine tab 25 mg</i>	53

Q	
<i>quetiapine fumarate tab 100 mg</i>	63
<i>quetiapine fumarate tab 150 mg</i>	64
<i>quetiapine fumarate tab 200 mg</i>	64
<i>quetiapine fumarate tab 25 mg</i>	63
<i>quetiapine fumarate tab 300 mg</i>	64
<i>quetiapine fumarate tab 400 mg</i>	64
<i>quetiapine fumarate tab 50 mg</i>	63
<i>quetiapine fumarate tab er 24hr 150 mg</i> ..	64
<i>quetiapine fumarate tab er 24hr 200 mg</i> ..	64
<i>quetiapine fumarate tab er 24hr 300 mg</i> ..	64
<i>quetiapine fumarate tab er 24hr 400 mg</i> ..	64
<i>quetiapine fumarate tab er 24hr 50 mg</i>	64
<i>quinapril hcl tab 10 mg</i>	48
<i>quinapril hcl tab 20 mg</i>	48
<i>quinapril hcl tab 40 mg</i>	48
<i>quinapril hcl tab 5 mg</i>	48
<i>quinapril-hydrochlorothiazide tab 10-12.5</i> <i>mg</i>	52
<i>quinapril-hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	52
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	52
<i>quinidine gluconate tab er 324 mg</i>	26
<i>quinine sulfate cap 324 mg</i>	53
<i>QULIPTA TAB 10MG</i>	108
<i>QULIPTA TAB 30MG</i>	108
<i>QULIPTA TAB 60MG</i>	108
R	
<i>rabeprazole sodium ec tab 20 mg</i>	125
<i>raloxifene hcl tab 60 mg</i>	95
<i>ramelteon tab 8 mg</i>	105
<i>ramipril cap 1.25 mg</i>	48
<i>ramipril cap 10 mg</i>	48
<i>ramipril cap 2.5 mg</i>	48
<i>ramipril cap 5 mg</i>	48
<i>ranolazine tab er 12hr 1000 mg</i>	24
<i>ranolazine tab er 12hr 500 mg</i>	24
<i>RAPAMUNE SOL 1MG/ML</i>	111
<i>RAPAMUNE TAB 0.5MG</i>	111
<i>RAPAMUNE TAB 1MG</i>	111
<i>RAPAMUNE TAB 2MG</i>	111
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	61

<i>rasagiline mesylate tab 1 mg (base equiv)</i>	61
REBIF INJ 22/0.5	121
REBIF INJ 44/0.5	121
REBIF REBIDO INJ 22/0.5	121
REBIF REBIDO INJ 44/0.5	121
REBIF REBIDO INJ TITRATN	121
REBIF TITRTN INJ PACK.....	122
<i>repaglinide tab 0.5 mg</i>	42
<i>repaglinide tab 1 mg</i>	42
<i>repaglinide tab 2 mg</i>	42
REPATHA INJ 140MG/ML	47
REPATHA PUSH INJ 420/3.5	47
REPATHA SURE INJ 140MG/ML.....	48
RESTASIS EMU 0.05% OP	116
RESTASIS MUL EMU 0.05% OP	116
RETACRIT INJ 10000UNT	104
RETACRIT INJ 20000UNI	104
RETACRIT INJ 2000UNIT	104
RETACRIT INJ 3000UNIT	104
RETACRIT INJ 40000UNT	104
RETACRIT INJ 4000UNIT	104
REVLIMID CAP 10MG	110
REVLIMID CAP 15MG.....	110
REVLIMID CAP 2.5MG.....	110
REVLIMID CAP 20MG.....	110
REVLIMID CAP 25MG.....	110
REVLIMID CAP 5MG	110
REYATAZ POW 50MG.....	67
<i>ribavirin cap 200 mg</i>	68
<i>ribavirin tab 200 mg</i>	68
<i>rifabutin cap 150 mg</i>	53
<i>rifampin cap 150 mg</i>	53
<i>rifampin cap 300 mg</i>	53
<i>riluzole tab 50 mg</i>	114
<i>rimantadine hydrochloride tab 100 mg</i>	69
RINVOQ LQ SOL 1MG/ML	10
RINVOQ TAB 15MG ER.....	10
RINVOQ TAB 30MG ER.....	10
RINVOQ TAB 45MG ER.....	10
<i>risedronate sodium tab 150 mg</i>	94
<i>risedronate sodium tab 30 mg</i>	94
<i>risedronate sodium tab 35 mg</i>	94
<i>risedronate sodium tab 5 mg</i>	94

<i>risedronate sodium tab delayed release</i> 35 mg	94
<i>risperidone microspheres for im extended</i> <i>rel susp 12.5 mg</i>	62
<i>risperidone microspheres for im extended</i> <i>rel susp 25 mg</i>	62
<i>risperidone microspheres for im extended</i> <i>rel susp 37.5 mg</i>	62
<i>risperidone microspheres for im extended</i> <i>rel susp 50 mg</i>	62
<i>risperidone orally disintegrating tab 0.25</i> <i>mg</i>	62
<i>risperidone orally disintegrating tab 0.5 mg</i>	62
<i>risperidone orally disintegrating tab 1 mg</i>	62
<i>risperidone orally disintegrating tab 2 mg</i>	62
<i>risperidone orally disintegrating tab 3 mg</i>	62
<i>risperidone orally disintegrating tab 4 mg</i>	62
<i>risperidone soln 1 mg/ml</i>	62
<i>risperidone tab 0.25 mg</i>	62
<i>risperidone tab 0.5 mg</i>	62
<i>risperidone tab 1 mg</i>	62
<i>risperidone tab 2 mg</i>	62
<i>risperidone tab 3 mg</i>	62
<i>risperidone tab 4 mg</i>	62
<i>ritonavir tab 100 mg</i>	67
<i>rivaroxaban tab 2.5 mg</i>	31
<i>rivastigmine tartrate cap 1.5 mg (base</i> <i>equivalent)</i>	120
<i>rivastigmine tartrate cap 3 mg (base</i> <i>equivalent)</i>	120
<i>rivastigmine tartrate cap 4.5 mg (base</i> <i>equivalent)</i>	120
<i>rivastigmine tartrate cap 6 mg (base</i> <i>equivalent)</i>	120
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	120
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	120
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	120
<i>rizatriptan benzoate oral disintegrating tab</i> <i>10 mg (base eq)</i>	108
<i>rizatriptan benzoate oral disintegrating tab</i> <i>5 mg (base eq)</i>	108
<i>rizatriptan benzoate tab 10 mg (base</i> <i>equivalent)</i>	108

<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	108
<i>roflumilast tab 250 mcg</i>	28
<i>roflumilast tab 500 mcg</i>	28
<i>ropinirole hydrochloride tab 0.25 mg</i>	61
<i>ropinirole hydrochloride tab 0.5 mg</i>	61
<i>ropinirole hydrochloride tab 1 mg</i>	61
<i>ropinirole hydrochloride tab 2 mg</i>	61
<i>ropinirole hydrochloride tab 3 mg</i>	61
<i>ropinirole hydrochloride tab 4 mg</i>	61
<i>ropinirole hydrochloride tab 5 mg</i>	61
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	61
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	61
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	61
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	61
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	61
<i>rosuvastatin calcium tab 10 mg</i>	47
<i>rosuvastatin calcium tab 20 mg</i>	47
<i>rosuvastatin calcium tab 40 mg</i>	47
<i>rosuvastatin calcium tab 5 mg</i>	47
<i>RUBRACA TAB 200MG</i>	58
<i>RUBRACA TAB 250MG</i>	58
<i>RUBRACA TAB 300MG</i>	58
<i>RUCONEST INJ 2100UNIT</i>	103
<i>rufinamide susp 40 mg/ml</i>	34
<i>rufinamide tab 200 mg</i>	34
<i>rufinamide tab 400 mg</i>	34
<i>RUKOBIA TAB 600MG ER</i>	67
<i>RYBELSUS TAB 1.5MG</i>	41
<i>RYBELSUS TAB 14MG</i>	41
<i>RYBELSUS TAB 3MG</i>	41
<i>RYBELSUS TAB 4MG</i>	41
<i>RYBELSUS TAB 7MG</i>	41
<i>RYBELSUS TAB 9MG</i>	41
<i>RYDAPT CAP 25MG</i>	58
S	
<i>sacubitril-valsartan tab 24-26 mg</i>	73
<i>sacubitril-valsartan tab 49-51 mg</i>	73
<i>sacubitril-valsartan tab 97-103 mg</i>	73

<i>salicylic acid er film-forming soln 28.5%</i> ..	90
<i>salicylic acid film forming liquid 27.5%</i>	90
<i>salicylic acid foam 6%</i>	90
<i>salicylic acid gel 6%</i>	90
<i>salicylic acid shampoo 6%</i>	90
<i>salicylic acid soln 26%</i>	90
<i>salsalate tab 500 mg</i>	16
<i>salsalate tab 750 mg</i>	16
<i>SANDIMMUNE CAP 100MG</i>	111
<i>SANDIMMUNE CAP 25MG</i>	111
<i>SANDIMMUNE SOL 100MG/ML</i>	111
<i>sapropterin dihydrochloride powder packet 100 mg</i>	96
<i>sapropterin dihydrochloride powder packet 500 mg</i>	96
<i>sapropterin dihydrochloride tab 100 mg</i> ..	96
<i>SAVELLA MIS TITR PAK</i>	120
<i>SAVELLA TAB 100MG</i>	120
<i>SAVELLA TAB 12.5MG</i>	120
<i>SAVELLA TAB 25MG</i>	120
<i>SAVELLA TAB 50MG</i>	120
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	40
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	40
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	39
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	39
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	39
<i>SAXENDA INJ 18MG/3ML</i>	3
<i>scopolamine td patch 72hr 1 mg/3days</i>	44
<i>selegiline hcl cap 5 mg</i>	61
<i>selegiline hcl tab 5 mg</i>	61
<i>selenium sulfide lotion 2.5%</i>	87
<i>selenium sulfide shampoo 2.25%</i>	87
<i>selenium sulfide shampoo 2.3%</i>	87
<i>SE-NATAL 19 CHW</i>	113
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	36
<i>sertraline hcl tab 100 mg</i>	36
<i>sertraline hcl tab 25 mg</i>	36
<i>sertraline hcl tab 50 mg</i>	36
<i>sevelamer carbonate packet 0.8 gm</i>	101
<i>sevelamer carbonate packet 2.4 gm</i>	101

sevelamer carbonate tab 800 mg.....	101	sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)	109
sevelamer hcl tab 400 mg	101	sodium fluoride tab 0.5 mg f (from 1.1 mg naf).....	109
sevelamer hcl tab 800 mg	101	sodium phenylbutyrate oral powder 3 gm/teaspoonful.....	96
SEVENFACT SOL 2MG.....	102	sodium phenylbutyrate tab 500 mg	96
SIKLOS TAB 1000MG.....	103	sodium polystyrene sulfonate powder	112
SIKLOS TAB 100MG	103	sodium polystyrene sulfonate rectal susp 30 gm/120ml	112
sildenafil citrate for suspension 10 mg/ml	75	sodium polystyrene sulfonate susp 15 gm/60ml	112
sildenafil citrate tab 100 mg.....	74	SOD OXYBATE SOL 500MG/ML.....	119
sildenafil citrate tab 20 mg	75	sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....	106
sildenafil citrate tab 25 mg.....	74	SOFTCLIX MIS LANCETS	107
sildenafil citrate tab 50 mg	74	SOGROYA INJ 10MG/1.5.....	95
silodosin cap 4 mg	101	SOGROYA INJ 15MG/1.5.....	95
silodosin cap 8 mg	101	SOGROYA INJ 5MG/1.5	95
silver nitrate soln 0.5%.....	88	solifenacin succinate tab 10 mg.....	126
silver sulfadiazine cream 1%	88	solifenacin succinate tab 5 mg	126
SIMLANDI 1PN KIT 80/0.8ML	9	SOLQUA INJ 100/33.....	39
simvastatin tab 10 mg.....	47	sorafenib tosylate tab 200 mg (base equivalent).....	58
simvastatin tab 20 mg	47	sotalol hcl (afib/afl) tab 120 mg.....	70
simvastatin tab 40 mg	47	sotalol hcl (afib/afl) tab 160 mg.....	70
simvastatin tab 5 mg	47	sotalol hcl (afib/afl) tab 80 mg	70
simvastatin tab 80 mg	47	sotalol hcl tab 120 mg	70
sirolimus oral soln 1 mg/ml	111	sotalol hcl tab 160 mg.....	70
sirolimus tab 0.5 mg	111	sotalol hcl tab 240 mg	70
sirolimus tab 1 mg	111	sotalol hcl tab 80 mg	70
sirolimus tab 2 mg	112	spinosad susp 0.9%	91
SKYRIZI INJ 150MG/ML.....	86	SPIRIVA AER 1.25MCG	28
SKYRIZI INJ 180/1.2	100	SPIRIVA SPR 2.5MCG.....	28
SKYRIZI INJ 360/2.4.....	100	spironolactone & hydrochlorothiazide tab 25-25 mg	92
SKYRIZI PEN INJ 150MG/ML	86	spironolactone susp 25 mg/5ml	93
sodium chloride soln nebu 0.9%	81	spironolactone tab 100 mg	93
sodium chloride soln nebu 10%.....	81	spironolactone tab 25 mg	93
sodium chloride soln nebu 3%	81	spironolactone tab 50 mg.....	93
sodium chloride soln nebu 7%.....	81	stavudine cap 15 mg	67
sodium citrate & citric acid soln 500-334 mg/5ml	101	stavudine cap 20 mg	67
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	109	stavudine cap 30 mg	67
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)	109	stavudine cap 40 mg	67
sodium fluoride cream 1.1%	112		
sodium fluoride gel 1.1% (0.5% f).....	112		
sodium fluoride paste 1.1%	112		
sodium fluoride rinse 0.2%	112		

STELARA INJ 45MG/0.5.....	86	sulfacetamide sodium w/ sulfur foam 10-5%	82
STELARA INJ 90MG/ML.....	86	sulfacetamide sodium w/ sulfur lotion 10-5%	82
STIVARGA TAB 40MG.....	58	sulfacetamide sodium w/ sulfur lotion 9.8-4.8%	82
STRENSIQ INJ 18/0.45.....	96	sulfacetamide sodium w/ sulfur susp 10-5%	82
STRENSIQ INJ 28/0.7ML.....	96	sulfacetamide sodium w/ sulfur susp 8-4%	82
STRENSIQ INJ 40MG/ML.....	96	sulfadiazine tab 500 mg	123
STRENSIQ INJ 80/0.8ML.....	96	sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....	23
STRIVERDI AER 2.5MCG.....	30	sulfamethoxazole-trimethoprim tab 400-80 mg.....	23
SUCRAID SOL 8500/ML	92	sulfamethoxazole-trimethoprim tab 800-160 mg	23
sucralfate tab 1 gm	125	sulfasalazine tab 500 mg	100
sulconazole nitrate cream 1%	83	sulfasalazine tab delayed release 500 mg	100
sulconazole nitrate solution 1%.....	83	sulindac tab 150 mg.....	13
sulfacetamide sodium cleansing gel 10%	87	sulindac tab 200 mg	13
sulfacetamide sodium liquid 10%	87	sumatriptan nasal spray 20 mg/act	109
sulfacetamide sodium lotion 10% (acne)..	82	sumatriptan nasal spray 5 mg/act	108
sulfacetamide sodium ophth oint 10%	116	sumatriptan succinate inj 6 mg/0.5ml	109
sulfacetamide sodium ophth soln 10%	116	sumatriptan succinate solution auto-injector 4 mg/0.5ml.....	109
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....	116	sumatriptan succinate solution auto-injector 6 mg/0.5ml.....	109
sulfacetamide sodium shampoo 10%	87	sumatriptan succinate solution cartridge 4 mg/0.5ml	109
sulfacetamide sodium shampoo 9.8%	87	sumatriptan succinate solution cartridge 6 mg/0.5ml	109
sulfacetamide sodium-sulfur in urea emulsion 10-4%.....	82	sumatriptan succinate tab 100 mg.....	109
sulfacetamide sodium w/ sulfur cleanser 10-2%	82	sumatriptan succinate tab 25 mg	109
sulfacetamide sodium w/ sulfur cleanser 10-5%	82	sumatriptan succinate tab 50 mg	109
sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%.....	82	sunitinib malate cap 12.5 mg (base equivalent).....	58
sulfacetamide sodium w/ sulfur cleanser 9-4.5%	82	sunitinib malate cap 25 mg (base equivalent)	59
sulfacetamide sodium w/ sulfur cleanser 9-4%	82	sunitinib malate cap 37.5 mg (base equivalent)	59
sulfacetamide sodium w/ sulfur cleansing pad 10-4%	82	sunitinib malate cap 50 mg (base equivalent)	59
sulfacetamide sodium w/ sulfur cream 10-2%	82		
sulfacetamide sodium w/ sulfur cream 10-5%	82		
sulfacetamide sodium w/ sulfur cream 9.8-4.8%	82		
sulfacetamide sodium w/ sulfur emulsion 10-1%	82		

SUNLENCA TAB 300MG	67
SYMDEKO TAB 100-150	123
SYMDEKO TAB 50-75MG.....	122
SYMLINPEN 60 INJ 1000MCG.....	39
SYMLNPEN 120 INJ 1000MCG	39
SYMTUZA TAB.....	67
SYNAREL SOL 2MG/ML.....	95
SYNJARDY TAB	39
SYNJARDY TAB 12.5-500.....	40
SYNJARDY TAB 5-1000MG.....	39
SYNJARDY TAB 5-500MG	39
SYNJARDY XR TAB	40
SYNJARDY XR TAB 10-1000	40
SYNJARDY XR TAB 25-1000	40
SYNJARDY XR TAB 5-1000MG	40

T

TABLOID TAB 40MG	54
TACLONEX OIN.....	89
TACLONEX SUS	89
<i>tacrolimus cap 0.5 mg</i>	112
<i>tacrolimus cap 1 mg</i>	112
<i>tacrolimus cap 5 mg</i>	112
<i>tacrolimus oint 0.03%</i>	90
<i>tacrolimus oint 0.1%</i>	90
<i>tadalafil tab 10 mg</i>	74
<i>tadalafil tab 2.5 mg</i>	74
<i>tadalafil tab 20 mg</i>	74
<i>tadalafil tab 20 mg (pah)</i>	75
<i>tadalafil tab 5 mg</i>	74
TAFINLAR CAP 50MG.....	59
TAFINLAR CAP 75MG	59
TAFINLAR TAB 10MG	59
<i>tafluprost preservative free (pf) ophth soln</i> <i>0.0015%</i>	117
TAGRISSO TAB 40MG.....	55
TAGRISSO TAB 80MG.....	55
TAKHZYRO INJ 150MG/ML	103
TAKHZYRO INJ 300/2ML	103
TALTZ INJ 20/0.25	86
TALTZ INJ 40/0.5ML	86
TALTZ INJ 80MG/ML	87
<i>tamoxifen citrate tab 10 mg (base</i> <i>equivalent)</i>	56

<i>tamoxifen citrate tab 20 mg (base</i> <i>equivalent)</i>	56
<i>tamsulosin hcl cap 0.4 mg</i>	102
<i>tasimelteon capsule 20 mg</i>	105
TAVALISSE TAB 100MG	103
TAVALISSE TAB 150MG	103
<i>tazarotene cream 0.05%</i>	87
<i>tazarotene cream 0.1%</i>	87
<i>tazarotene gel 0.05%</i>	87
<i>tazarotene gel 0.1%</i>	87
<i>telmisartan-amlodipine tab 40-10 mg</i>	52
<i>telmisartan-amlodipine tab 40-5 mg</i>	52
<i>telmisartan-amlodipine tab 80-10 mg</i>	52
<i>telmisartan-amlodipine tab 80-5 mg</i>	52
<i>telmisartan-hydrochlorothiazide tab 40-</i> <i>12.5 mg</i>	52
<i>telmisartan-hydrochlorothiazide tab 80-12.5</i> <i>mg</i>	52
<i>telmisartan-hydrochlorothiazide tab 80-25</i> <i>mg</i>	52
<i>telmisartan tab 20 mg</i>	49
<i>telmisartan tab 40 mg</i>	49
<i>telmisartan tab 80 mg</i>	49
<i>temazepam cap 15 mg</i>	105
<i>temazepam cap 22.5 mg</i>	105
<i>temazepam cap 30 mg</i>	105
<i>temazepam cap 7.5 mg</i>	105
<i>temozolomide cap 100 mg</i>	54
<i>temozolomide cap 140 mg</i>	54
<i>temozolomide cap 180 mg</i>	54
<i>temozolomide cap 20 mg</i>	54
<i>temozolomide cap 250 mg</i>	54
<i>temozolomide cap 5 mg</i>	54
<i>tenofovir disoproxil fumarate tab 300 mg</i> 67	
<i>terazosin hcl cap 10 mg (base equivalent)</i> 50	
<i>terazosin hcl cap 1 mg (base equivalent)</i> ..50	
<i>terazosin hcl cap 2 mg (base equivalent)</i> .50	
<i>terazosin hcl cap 5 mg (base equivalent)</i> .50	
<i>terbinafine hcl tab 250 mg</i>	44
<i>terbutaline sulfate tab 2.5 mg</i>	30
<i>terbutaline sulfate tab 5 mg</i>	30
<i>terconazole vaginal cream 0.4%</i>	127
<i>terconazole vaginal cream 0.8%</i>	127
<i>terconazole vaginal suppos 80 mg</i>	127

<i>teriflunomide tab 14 mg</i>	122	<i>tiagabine hcl tab 4 mg</i>	34
<i>teriflunomide tab 7 mg</i>	122	TIKOSYN CAP 125MCG	27
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i> 94		TIKOSYN CAP 250MCG	27
<i>testosterone cypionate im inj in oil 100</i>		<i>timolol maleate ophth gel forming soln</i>	
<i>mg/ml</i>	21	0.25%	114
<i>testosterone cypionate im inj in oil 200</i>		<i>timolol maleate ophth gel forming soln</i>	
<i>mg/ml</i>	21	0.5%	114
<i>testosterone enanthate im inj in oil 200</i>		<i>timolol maleate ophth soln 0.25%</i>	115
<i>mg/ml</i>	21	<i>timolol maleate ophth soln 0.5%</i>	114
<i>testosterone td gel 10mg/act (2%)</i>	21	<i>timolol maleate ophth soln 0.5% (once-</i>	
<i>testosterone td gel 12.5 mg/act (1%)</i>	21	<i>daily)</i>	115
<i>testosterone td gel 20.25 mg/1.25gm</i>		<i>timolol maleate preservative free ophth soln</i>	
<i>(1.62%)</i>	21	0.25%	115
<i>testosterone td gel 20.25 mg/act (1.62%)</i> 22		<i>timolol maleate preservative free ophth soln</i>	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	22	0.5%	115
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>		<i>timolol maleate tab 10 mg</i>	71
.....	22	<i>timolol maleate tab 20 mg</i>	71
<i>testosterone td gel 50 mg/5gm (1%)</i>	22	<i>timolol maleate tab 5 mg</i>	70
<i>testosterone td soln 30 mg/act</i>	22	<i>tinidazole tab 250 mg</i>	22
<i>tetrabenazine tab 12.5 mg</i>	120	<i>tinidazole tab 500 mg</i>	22
<i>tetrabenazine tab 25 mg</i>	120	<i>tiopronin tab 100 mg</i>	102
<i>tetracaine hcl ophth soln 0.5%</i>	116	<i>tiopronin tab delayed release 100 mg</i>	102
<i>tetracycline hcl cap 250 mg</i>	123	<i>tiopronin tab delayed release 300 mg</i>	102
<i>tetracycline hcl cap 500 mg</i>	123	TIVICAY PD TAB 5MG	67
THALOMID CAP 100MG	110	TIVICAY TAB 10MG	67
THALOMID CAP 50MG	110	TIVICAY TAB 25MG	67
<i>theophylline elixir 80 mg/15ml</i>	30	TIVICAY TAB 50MG	67
<i>theophylline soln 80 mg/15ml</i>	30	<i>tizanidine hcl cap 2 mg (base equivalent)</i> 113	
<i>theophylline tab er 12hr 300 mg</i>	30	<i>tizanidine hcl cap 4 mg (base equivalent)</i> 113	
<i>theophylline tab er 12hr 450 mg</i>	30	<i>tizanidine hcl cap 6 mg (base equivalent)</i> 113	
<i>theophylline tab er 24hr 400 mg</i>	30	<i>tizanidine hcl tab 2 mg (base equivalent).</i> 113	
<i>theophylline tab er 24hr 600 mg</i>	30	<i>tizanidine hcl tab 4 mg (base equivalent)</i> 113	
<i>thioridazine hcl tab 100 mg</i>	65	<i>tobramycin-dexamethasone ophth susp</i>	
<i>thioridazine hcl tab 10 mg</i>	64	0.3-0.1%	116
<i>thioridazine hcl tab 25 mg</i>	64	<i>tobramycin nebu soln 300 mg/4ml</i>	6
<i>thioridazine hcl tab 50 mg</i>	64	<i>tobramycin nebu soln 300 mg/5ml</i>	6
<i>thiothixene cap 10 mg</i>	65	<i>tobramycin ophth soln 0.3%</i>	116
<i>thiothixene cap 1 mg</i>	65	TOBREX OIN 0.3% OP	116
<i>thiothixene cap 2 mg</i>	65	<i>tolcapone tab 100 mg</i>	60
<i>thiothixene cap 5 mg</i>	65	<i>tolmetin sodium cap 400 mg</i>	13
THRIVITE RX TAB 29-1MG	113	<i>tolmetin sodium tab 600 mg</i>	13
<i>tiagabine hcl tab 12 mg</i>	34	<i>tolterodine tartrate cap er 24hr 2 mg</i>	126
<i>tiagabine hcl tab 16 mg</i>	34	<i>tolterodine tartrate cap er 24hr 4 mg</i>	126
<i>tiagabine hcl tab 2 mg</i>	34	<i>tolterodine tartrate tab 1 mg</i>	126

<i>tolterodine tartrate tab 2 mg</i>	126	<i>tranexamic acid tab 650 mg</i>	104
<i>tolvaptan tab 15 mg</i>	97	<i>tranylcypromine sulfate tab 10 mg</i>	35
<i>tolvaptan tab 30 mg</i>	97	<i>travoprost ophth soln 0.004%</i> (benzalkonium free) (bak free)	117
<i>topiramate cap er 24hr 100 mg</i>	34	<i>trazodone hcl tab 100 mg</i>	37
<i>topiramate cap er 24hr 200 mg</i>	34	<i>trazodone hcl tab 150 mg</i>	37
<i>topiramate cap er 24hr 25 mg</i>	34	<i>trazodone hcl tab 300 mg</i>	37
<i>topiramate cap er 24hr 50 mg</i>	34	<i>trazodone hcl tab 50 mg</i>	37
<i>topiramate sprinkle cap 15 mg</i>	34	TRECTOR TAB 250MG	53
<i>topiramate sprinkle cap 25 mg</i>	34	TRELEGY AER 100MCG	30
<i>topiramate sprinkle cap 50 mg</i>	34	TRELEGY AER 200MCG	30
<i>topiramate tab 100 mg</i>	34	TREMFYA CROH INJ 200/2ML	100
<i>topiramate tab 200 mg</i>	34	TREMFYA INJ 100MG/ML	87
<i>topiramate tab 25 mg</i>	34	TREMFYA INJ 200/20ML	100
<i>topiramate tab 50 mg</i>	34	TREMFYA INJ 200/2ML	100
<i>toremifene citrate tab 60 mg (base equivalent)</i>	56	TRESIBA FLEX INJ 100UNIT	42
<i>torsemide tab 100 mg</i>	93	TRESIBA FLEX INJ 200UNIT	42
<i>torsemide tab 10 mg</i>	93	TRESIBA INJ 100UNIT	42
<i>torsemide tab 20 mg</i>	93	<i>tretinoin cap 10 mg</i>	59
<i>torsemide tab 5 mg</i>	93	<i>tretinoin cream 0.025%</i>	82
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	20	<i>tretinoin cream 0.05%</i>	82
<i>tramadol hcl oral soln 5 mg/ml</i>	19	<i>tretinoin cream 0.1%</i>	82
<i>tramadol hcl tab 50 mg</i>	19	<i>tretinoin gel 0.01%</i>	82
<i>tramadol hcl tab er 24hr 100 mg</i>	19	<i>tretinoin gel 0.025%</i>	82
<i>tramadol hcl tab er 24hr 200 mg</i>	19	<i>tretinoin gel 0.05%</i>	82
<i>tramadol hcl tab er 24hr 300 mg</i>	19	<i>tretinoin microsphere gel 0.04%</i>	83
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	19	<i>tretinoin microsphere gel 0.08%</i>	83
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	19	<i>tretinoin microsphere gel 0.1%</i>	83
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	19	<i>triamcinolone acetone cream 0.025%</i> ..	90
<i>trandolapril tab 1 mg</i>	48	<i>triamcinolone acetone cream 0.1%</i>	89
<i>trandolapril tab 2 mg</i>	48	<i>triamcinolone acetone cream 0.5%</i>	90
<i>trandolapril tab 4 mg</i>	48	<i>triamcinolone acetone dental paste 0.1%</i>	112
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	52	<i>triamcinolone acetone lotion 0.025%</i> ...	90
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	52	<i>triamcinolone acetone lotion 0.1%</i>	90
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	52	<i>triamcinolone acetone oint 0.025%</i>	90
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	52	<i>triamcinolone acetone oint 0.1%</i>	90
		<i>triamcinolone acetone oint 0.5%</i>	90
		<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	92
		<i>triamterene & hydrochlorothiazide tab 37.5- 25 mg</i>	92
		<i>triamterene & hydrochlorothiazide tab 75- 50 mg</i>	92

<i>triamterene cap 100 mg</i>	93
<i>triamterene cap 50 mg</i>	93
<i>triazolam tab 0.125 mg</i>	105
<i>triazolam tab 0.25 mg</i>	105
<i>trientine hcl cap 250 mg</i>	110
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	65
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	65
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	65
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	65
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<i>trihexyphenidyl hcl tab 2 mg</i>	60
<i>trihexyphenidyl hcl tab 5 mg</i>	60
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<i>trimipramine maleate cap 25 mg</i>	38
<i>trimipramine maleate cap 50 mg</i>	39
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<i>tropium chloride tab 20 mg</i>	126
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<i>urea cream 41%</i>	90
<i>urea cream 45%</i>	90
<i>urea cream 47%</i>	90
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<i>valproic acid cap 250 mg</i>	35
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	52
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	52
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<i>valsartan oral soln 4 mg/ml</i>	49
<i>valsartan tab 160 mg</i>	49
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For more recent information or other questions, please
contact CareFirst Pharmacy Services at **800-241-3371** or visit
[carefirst.com/fedhmo](https://www.carefirst.com/fedhmo).



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SUM7291-1S (5/25)

Notice of Nondiscrimination and Availability of Language Assistance Services

(UPDATED 8/5/19)

CareFirst BlueCross BlueShield, CareFirst BlueChoice, Inc., CareFirst Diversified Benefits and all of their corporate affiliates (CareFirst) comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. CareFirst does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

CareFirst:

- Provides free aid and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call 855-258-6518.

If you believe CareFirst has failed to provide these services, or discriminated in another way, on the basis of race, color, national origin, age, disability or sex, you can file a grievance with our CareFirst Civil Rights Coordinator by mail, fax or email. If you need help filing a grievance, our CareFirst Civil Rights Coordinator is available to help you.

To file a grievance regarding a violation of federal civil rights, please contact the Civil Rights Coordinator as indicated below. Please do not send payments, claims issues, or other documentation to this office.

Civil Rights Coordinator, Corporate Office of Civil Rights

Mailing Address	P.O. Box 8894 Baltimore, Maryland 21224
Email Address	civilrightscoordinator@carefirst.com
Telephone Number	410-528-7820
Fax Number	410-505-2011

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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Foreign Language Assistance

Attention (English): This notice contains information about your insurance coverage. It may contain key dates and you may need to take action by certain deadlines. You have the right to get this information and assistance in your language at no cost. Members should call the phone number on the back of their member identification card. All others may call 855-258-6518 and wait through the dialogue until prompted to push 0. When an agent answers, state the language you need and you will be connected to an interpreter.

አማርኛ (Amharic) ማሳሰቢያ፡- ይህ ማስታወቂያ ስለ መድን ሽፋንዎ መረጃ ይዟል። ከተወሰኑ ቀን-ገደቦች በፊት ሊፈጽሟቸው የሚገቡ ነገሮች ሊኖሩ ስለሚችሉ እነዚህን ወሳኝ ቀናት ሊይዝ ይችላሉ። ይኸን መረጃ የማግኘት እና ያለምንም ከፍተኛ በቋንቋዎ አገዛ የማግኘት መብት አለዎት። አባል ከሆኑ ከመታወቂያ ካርድዎ በስተጀርባ ላይ ወደተጠቀሰው የስልክ ቁጥር መደወል ይችላሉ። አባል ካልሆኑ ደግሞ ወደ ስልክ ቁጥር 855-258-6518 ደውለው 0ን እንዲጫኑ እስኪነገርዎ ድረስ ንግግሩን መጠበቅ አለብዎ። አንድ ወኪል መልስ ሲሰጥዎ፣ የሚፈልጉትን ቋንቋ ያሳውቁ፣ ከዚያም ከተርጓሚ ጋር ይገናኛሉ።

Èdè Yorùbá (Yoruba) Ìtètíléko: Àkíyèsí yìí ní iwífún nípa isẹ adójútòfò rẹ. Ó le ní àwọn déètì pàtó o sì le ní láti gbé ìgbésẹ ní àwọn ojò gbèdèké kan. O ni ètò láti gba iwífún yìí àti irànlówó ní èdè rẹ lófèfẹ. Àwọn omọ-egbé gbòdò pe nómmbà fòònú tò wà lẹyìn kààdì ìdánimò wọn. Àwọn mírán le pe 855-258-6518 kí o sì dúró nípasẹ̀ ìjìròrò títí a ó fi sọ fún ọ láti tẹ 0. Nígbatí aṣojú kan bá dáhùn, sọ èdè tí o fẹ a ó sì sọ ọ pọ̀ mọ̀ ògbufò kan.

Tiếng Việt (Vietnamese) Chú ý: Thông báo này chứa thông tin về phạm vi bảo hiểm của quý vị. Thông báo có thể chứa những ngày quan trọng và quý vị cần hành động trước một số thời hạn nhất định. Quý vị có quyền nhận được thông tin này và hỗ trợ bằng ngôn ngữ của quý vị hoàn toàn miễn phí. Các thành viên nên gọi số điện thoại ở mặt sau của thẻ nhận dạng. Tất cả những người khác có thể gọi số 855-258-6518 và chờ hết cuộc đối thoại cho đến khi được nhắc nhấn phím 0. Khi một tổng đài viên trả lời, hãy nêu rõ ngôn ngữ quý vị cần và quý vị sẽ được kết nối với một thông dịch viên.

Tagalog (Tagalog) Atensyon: Ang abisong ito ay naglalaman ng impormasyon tungkol sa nasasaklawang ng iyong insurance. Maaari itong maglaman ng mga pinakamahahalagang petsa at maaaring kailangan mong gumawa ng aksyon ayon sa ilang deadline. May karapatan ka na makuha ang impormasyong ito at tulong sa iyong sariling wika nang walang gastos. Dapat tawagan ng mga Miyembro ang numero ng telepono na nasa likuran ng kanilang identification card. Ang lahat ng iba ay maaaring tumawag sa 855-258-6518 at maghintay hanggang sa dulo ng diyalogo hanggang sa diktahan na pindutin ang 0. Kapag sumagot ang ahente, sabihin ang wika na kailangan mo at ikokonekta ka sa isang interpreter.

Español (Spanish) Atención: Este aviso contiene información sobre su cobertura de seguro. Es posible que incluya fechas clave y que usted tenga que realizar alguna acción antes de ciertas fechas límite. Usted tiene derecho a obtener esta información y asistencia en su idioma sin ningún costo. Los asegurados deben llamar al número de teléfono que se encuentra al reverso de su tarjeta de identificación. Todos los demás pueden llamar al 855-258-6518 y esperar la grabación hasta que se les indique que deben presionar 0. Cuando un agente de seguros responda, indique el idioma que necesita y se le comunicará con un intérprete.

Русский (Russian) Внимание! Настоящее уведомление содержит информацию о вашем страховом обеспечении. В нем могут указываться важные даты, и от вас может потребоваться выполнить некоторые действия до определенного срока. Вы имеете право бесплатно получить настоящие сведения и сопутствующую помощь на удобном вам языке. Участникам следует обращаться по номеру телефона, указанному на тыльной стороне идентификационной карты. Все прочие абоненты могут звонить по номеру 855-258-6518 и ожидать, пока в голосовом меню не будет предложено нажать цифру «0». При ответе агента укажите желаемый язык общения, и вас свяжут с переводчиком.

हिन्दी (Hindi) ध्यान दें: इस सूचना में आपकी बीमा कवरेज के बारे में जानकारी दी गई है। हो सकता है कि इसमें मुख्य तिथियों का उल्लेख हो और आपके लिए किसी नियत समय-सीमा के भीतर काम करना ज़रूरी हो। आपको यह जानकारी और संबंधित सहायता अपनी भाषा में निःशुल्क पाने का अधिकार है। सदस्यों को अपने पहचान पत्र के पीछे दिए गए फ़ोन नंबर पर कॉल करना चाहिए। अन्य सभी लोग 855-258-6518 पर कॉल कर सकते हैं और जब तक 0 दबाने के लिए न कहा जाए, तब तक संवाद की प्रतीक्षा करें। जब कोई एजेंट उत्तर दे तो उसे अपनी भाषा बताएँ और आपको व्याख्याकार से कनेक्ट कर दिया जाएगा।

Bàsɔ̀-wùdù (Bassa) Tò Dùù Cáó! Bǝ nìà kɛ bá nyo bǝ kɛ m̄ gbo kpá bó nì fùà-fúá-tiĩn nyɛɛ jè dyí. Bǝ nìà kɛ bédé wé jéé bǝ bǝ m̄ kɛ dɛ wa mó m̄ kɛ nyuɛɛ nyu hwè bǝ wé bǝa kɛ zi. ɔ m̄ nì kpé bǝ m̄ kɛ bǝ nìà kɛ kɛ gbo-kpá-kpá m̄ m̄ɛ dyé dɛ nì bídí-wùdù mú bǝ m̄ kɛ se wídí dɛ pɛè. Kpooɔ̀ nyo bǝ m̄ dǎ fúùn-nòbà nìà dɛ waa I.D. káàè dɛín nyɛ. Nyo tòò séín m̄ dǎ nòbà nìà kɛ: 855-258-6518, kɛ m̄ m̄ fò tee bǝ wa kɛ m̄ gbo cǝ bǝ m̄ kɛ nòbà m̄à 0 kɛ dyi pàdàin hwè. ɔ jǔ kɛ nyo dɛ dyi m̄ gǝ jǔĩn, po wuɔ̀ m̄ mó poɛ dyie, kɛ nyo dɛ mu bó nìin bǝ ɔ kɛ nì wuɔ̀ m̄ zà.

বাংলা (Bengali) লক্ষ্য করুন: এই নোটিশে আপনার বিমা কভারেজ সম্পর্কে তথ্য রয়েছে। এর মধ্যে গুরুত্বপূর্ণ তারিখ থাকতে পারে এবং নির্দিষ্ট তারিখের মধ্যে আপনাকে পদক্ষেপ নিতে হতে পারে। বিনা খরচে নিজের ভাষায় এই তথ্য পাওয়ার এবং সহায়তা পাওয়ার অধিকার আপনার আছে। সদস্যদেরকে তাদের পরিচয়পত্রের পিছনে থাকা নম্বরে কল করতে হবে। অন্যরা 855-258-6518 নম্বরে কল করে 0 টিপতে না বলা পর্যন্ত অপেক্ষা করতে পারেন। যখন কোনো এজেন্ট উত্তর দেবেন তখন আপনার নিজের ভাষার নাম বলুন এবং আপনাকে দোভাষীর সঙ্গে সংযুক্ত করা হবে।

اردو (Urdu) توجہ: یہ نوٹس آپ کے انشورینس کوریج سے متعلق معلومات پر مشتمل ہے۔ اس میں کلیدی تاریخیں ہو سکتی ہیں اور ممکن ہے کہ آپ کو مخصوص آخری تاریخوں تک کارروائی کرنے کی ضرورت پڑے۔ آپ کے پاس یہ معلومات حاصل کرنے اور بغیر خرچہ کیے اپنی زبان میں مدد حاصل کرنے کا حق ہے۔ ممبران کو اپنے شناختی کارڈ کی پشت پر موجود فون نمبر پر کال کرنی چاہیے۔ سبھی دیگر لوگ 855-258-6518 پر کال کر سکتے ہیں اور 0 دبانے کو کہے جانے تک انتظار کریں۔ ایجنٹ کے جواب دینے پر اپنی مطلوبہ زبان بتائیں اور مترجم سے مربوط ہو جائیں گے۔

فارسی (Farsi) توجه: این اعلامیه حاوی اطلاعاتی درباره پوشش بیمه شما است. ممکن است حاوی تاریخ های مهمی باشد و لازم است تا تاریخ مقرر شده خاصی اقدام کنید. شما از این حق برخوردار هستید تا این اطلاعات و راهنمایی را به صورت رایگان به زبان خودتان دریافت کنید. اعضا باید با شماره درج شده در پشت کارت شناسایی شان تماس بگیرند. سایر افراد می توانند با شماره 855-258-6518 تماس بگیرند و منتظر بمانند تا از آنها خواسته شود عدد 0 را فشار دهند. بعد از پاسخگویی توسط یکی از اپراتورها، زبان مورد نیاز را تنظیم کنید تا به مترجم مربوطه وصل شوید.

اللغة العربية (Arabic) تنبيه: يحتوي هذا الإخطار على معلومات بشأن تغطيتك التأمينية، وقد يحتوي على تواريخ مهمة، وقد تحتاج إلى اتخاذ إجراءات بحلول مواعيد نهائية محددة. يحق لك الحصول على هذه المساعدة والمعلومات بلغتك بدون تحمل أي تكلفة. ينبغي على الأعضاء الاتصال على رقم الهاتف المذكور في ظهر بطاقة تعريف الهوية الخاصة بهم. يمكن للأخريين الاتصال على الرقم 855-258-6518 والانتظار خلال المحادثة حتى يطلب منهم الضغط على رقم 0. عند إجابة أحد الوكلاء، اذكر اللغة التي تحتاج إلى التواصل بها وسيتم توصيلك بأحد المترجمين الفوريين.

中文繁体 (Traditional Chinese) 注意：本聲明包含關於您的保險給付相關資訊。本聲明可能包含重要日期及您在特定期限之前需要採取的行動。您有權利免費獲得這份資訊，以及透過您的母語提供的協助服務。會員請撥打印在身分識別卡背面的電話號碼。其他所有人士可撥打電話 855-258-6518，並等候直到對話提示按下按鍵 0。當接線生回答時，請說出您需要使用的語言，這樣您就能與口譯人員連線。

Igbo (Igbo) Nrụbama: Ọkwa a nwere ozi gbasara mkpuchi nchekwa onwe gi. Ọ nwere ike inwe ụbọchị ndị dị mkpa, i nwere ike ime ihe tupu ụfọdụ ụbọchị njedebe. I nwere ikike inweta ozi na enyemaka a n'asụsụ gi na akwughị ugwo ọ bụla. Ndị otu kwesiri ikpo akara ekwentị di n'azụ nke kaadi njirimara ha. Ndị ozo niile nwere ike ikpo 855-258-6518 wee chere ụbụbọ ahụ ruo mgbe amanyere ipi 0. Mgbe onye nnọchite anya zara, kwuo asụsụ i choro, a ga-ejiko gi na onye okowa okwu.

Deutsch (German) Achtung: Diese Mitteilung enthält Informationen über Ihren Versicherungsschutz. Sie kann wichtige Termine beinhalten, und Sie müssen gegebenenfalls innerhalb bestimmter Fristen reagieren. Sie haben das Recht, diese Informationen und weitere Unterstützung kostenlos in Ihrer Sprache zu erhalten. Als Mitglied verwenden Sie bitte die auf der Rückseite Ihrer Karte angegebene Telefonnummer. Alle anderen Personen rufen bitte die Nummer 855-258-6518 an und warten auf die Aufforderung, die Taste 0 zu drücken. Geben Sie dem Mitarbeiter die gewünschte Sprache an, damit er Sie mit einem Dolmetscher verbinden kann.

Français (French) Attention: cet avis contient des informations sur votre couverture d'assurance. Des dates importantes peuvent y figurer et il se peut que vous deviez entreprendre des démarches avant certaines échéances. Vous avez le droit d'obtenir gratuitement ces informations et de l'aide dans votre langue. Les membres doivent appeler le numéro de téléphone figurant à l'arrière de leur carte d'identification. Tous les autres peuvent appeler le 855-258-6518 et, après avoir écouté le message, appuyer sur le 0 lorsqu'ils seront invités à le faire. Lorsqu'un(e) employé(e) répondra, indiquez la langue que vous souhaitez et vous serez mis(e) en relation avec un interprète.

한국어(Korean) 주의: 이 통지서에는 보험 커버리지에 대한 정보가 포함되어 있습니다. 주요 날짜 및 조치를 취해야 하는 특정 기한이 포함될 수 있습니다. 귀하에게는 사용 언어로 해당 정보와 지원을 받을 권리가 있습니다. 회원이신 경우 ID 카드의 뒷면에 있는 전화번호로 연락해 주십시오. 회원이 아닌 경우 855-258-6518 번으로 전화하여 0을 누르라는 메시지가 들릴 때까지 기다리십시오. 연결된 상담원에게 필요한 언어를 말씀하시면 통역 서비스에 연결해 드립니다.

Diné Bizaad (Navajo) Ge': Díí bee íł hane'ígíí bii' dahóló bee éédahózin béeso ách'ááh naanil ník'ist'í'ígíí bá. Bii' dahólóq doo íiyisíí yoolkáálígíí dóó t'áádoo le'é ádadoolyííligíí da yókeedgo t'áá doo bee e'e'aahí ájiil'ííh. Bee ná ahóót'í' díí bee íł hane' dóó níká'ádoowoł t'áá nínizaad bee t'áá jiik'é. Atah danilínígíí béesh bee hane'é bee wólta'ígíí nitł'izgo bee nee hódolzinígíí bikéédéé' bikáá' bich'í' hodoonihjí'. Aadóó náánáta' éí koji' dahódoonih 855-258-6518 dóó yii diiłts'ííł yałtí'ígíí t'áá níléljį áádóó éí bikéé'dóó naasbaqas bił adidiilchit. Áká'anidaalwó'ígíí neidiitąągo, saad bee yániłt'í'ígíí yii diikił dóó ata' halne'é lá níká'ádoowoł.