

# CareFirst Formulary 4

## Postal Service 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 **833-840-7962** or visit **[carefirst.com/pshbp](https://carefirst.com/pshbp)**.

# 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.

<b>Tier 0: \$0 Drugs</b>	<ul style="list-style-type: none"> <li>■ 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.</li> <li>■ 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.</li> </ul>
<b>Tier 1: Generic Drugs \$</b>	<ul style="list-style-type: none"> <li>■ Generic drugs are the same as brand-name drugs in dosage form, safety, strength, route of administration, quality, performance characteristics and intended use.</li> <li>■ Generic drugs generally cost less than brand-name drugs.</li> </ul>
<b>Tier 2: Brand Drugs \$\$</b>	<ul style="list-style-type: none"> <li>■ Brand-name drugs are chosen for their cost effectiveness compared to drug alternatives.</li> <li>■ Your cost-share will be more than generics.</li> </ul>
<b>Tier 3: Generic Specialty Drugs \$\$\$</b>	<ul style="list-style-type: none"> <li>■ Generic specialty drugs are medications that may be used to treat complex and/or rare health conditions.</li> <li>■ Generic specialty drugs may have a lower cost-share than brand specialty drugs.</li> </ul>
<b>Tier 4: Brand Specialty Drugs \$\$\$\$</b>	<ul style="list-style-type: none"> <li>■ Brand specialty drugs are medications that may be used to treat complex and/or rare health conditions.</li> <li>■ Your cost-share will be more than generic specialty drugs.</li> </ul>

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>		
<b>AMPHETAMINES</b>		
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<b>ANALEPTICS</b>		
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	
<b>ANOREXIANTS NON-AMPHETAMINE</b>		
ADIPEX-P CAP 37.5MG	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADIPEX-P TAB 37.5MG	2	PA
<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, QL (30 tabs every 28 days); Coverage is subject to your plan/benefits
LOMAIRA TAB 8MG	2	PA
PHENDIMETRAZ CAP 105MG ER	2	PA, QL (30 caps every 28 days)
<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
QSYMIA CAP 3.75-23	2	PA
QSYMIA CAP 7.5-46MG	2	PA
QSYMIA CAP 11.25-69	2	PA
QSYMIA CAP 15-92MG	2	PA
<b>ANTI-OBESITY AGENTS</b>		
CONTRAIVE TAB 8-90MG	2	PA
<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
WEGOVI INJ 0.5MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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
WEGOVY INJ 2.4MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
XENICAL CAP 120MG	2	PA
ZEPBOUND INJ 2.5MG	2	PA
ZEPBOUND INJ 2.5MG	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 5/0.5ML	2	PA
ZEPBOUND INJ 5/0.5ML	2	PA, QL (1 package per 28 days); Coverage is subject to your plan/benefits
ZEPBOUND INJ 7.5MG	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 12.5MG	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
<b>ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS</b>		
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS</b>		
WAKIX TAB 4.45MG	4	PA, QL (2 tabs every 1 day)
WAKIX TAB 17.8MG	4	PA, QL (2 tabs every 1 day)
<b>STIMULANTS - MISC.</b>		
<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)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<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); MNPA
<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
PALFORZIA CAP ESCALAT	2	PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PALFORZIA CAP LEVEL 1	2	PA
PALFORZIA CAP LEVEL 2	2	PA
PALFORZIA CAP LEVEL 3	2	PA
PALFORZIA CAP LEVEL 4	2	PA
PALFORZIA CAP LEVEL 5	2	PA
PALFORZIA CAP LEVEL 6	2	PA
PALFORZIA CAP LEVEL 7	2	PA
PALFORZIA CAP LEVEL 8	2	PA
PALFORZIA CAP LEVEL 9	2	PA
PALFORZIA CAP LEVEL 10	2	PA
PALFORZIA POW LEVEL 11	2	PA

**AMINOGLYCOSIDES****AMINOGLYCOSIDES**

ARIKAYCE SUS	4	PA
BETHKIS NEB 300/4ML	4	PA, QL (8 mL every 1 day)
KITABIS PAK NEB 300/5ML	4	PA, QL (10 mL every 1 day)
<i>neomycin sulfate tab 500 mg</i>	1	
TOBI NEB 300/5ML	4	PA, QL (10 mL every 1 day)
TOBI PODHALR CAP 28MG	4	PA, QL (8 caps every 1 day)
<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**

ABRILADA 1PN INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
ABRILADA 2PN INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
ABRILADA INJ 20/0.4ML	4	PA, QL (4 syringes every 28 days)
ABRILADA INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-AACF INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
ADALIMU-AACF KIT 40/0.8ML	4	PA
ADALIMU-AATY KIT 20/0.2ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-AATY KIT 40/0.4ML	4	PA, QL (4 pens every 28 days)
ADALIMU-AATY KIT 40/0.4ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-AATY KIT 80/0.8ML	4	PA, QL (2 pens every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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-ADBM KIT 10/0.2ML	4	PA, QL (2 syr every 28 days)
ADALIMU-ADBM KIT 20/0.4ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-ADBM KIT 40/0.4ML	4	PA
ADALIMU-ADBM KIT 40/0.8ML	4	PA, QL (4 pens every 28 days)
ADALIMU-ADBM KIT 40/0.8ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-FKJP KIT 20/0.4ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	4	PA
ADALIMU-FKJP KIT 40/0.8ML	4	PA, QL (4 pens every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	4	PA, QL (4 syringes every 28 days)
ADALIMU-RYVK INJ 40/0.4ML	4	PA
ADALIMU-RYVK INJ 40/0.4ML	4	PA, QL (4 pens every 28 days)
AMJEVITA INJ 10/0.2ML	4	PA, QL (2 syr every 28 days)
AMJEVITA INJ 20/0.2ML	4	PA, QL (4 syringes every 28 days)
AMJEVITA INJ 20/0.4ML	4	PA, QL (4 syringes every 28 days)
AMJEVITA INJ 40/0.4ML	4	PA, QL (4 pens every 28 days)
AMJEVITA INJ 40/0.4ML	4	PA, QL (4 syringes every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AMJEVITA INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
AMJEVITA INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days)
AMJEVITA INJ 80/0.8ML	4	PA, QL (2 pens every 28 days)
CYLTEZO INJ 10/0.2ML	4	PA, QL (2 syr every 28 days)
CYLTEZO INJ 20/0.4ML	4	PA, QL (4 syringes every 28 days)
CYLTEZO INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
CYLTEZO INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days)
CYLTEZO INJ CROHNS	4	PA, QL (4 pens every 28 days)
CYLTEZO INJ PSORIASI	4	PA, QL (4 pens every 28 days)
CYLTEZO KIT 40/0.4ML	4	PA
CYLTEZO KIT CROHNS	4	PA
CYLTEZO PSOR KIT 40/0.4ML	4	PA
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)
HULIO INJ 40/0.8ML	4	PA
HULIO INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
HULIO INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days)
HULIO KIT 20/0.4ML	4	PA
HULIO KIT 20/0.4ML	4	PA, QL (4 syringes every 28 days)
HUMIRA INJ 10/0.1ML	4	PA, QL (2 syr every 28 days)
HUMIRA INJ 20/0.2ML	4	PA, QL (4 syringes every 28 days)
HUMIRA INJ 40/0.4ML	4	PA, QL (4 syringes every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMIRA KIT 40MG/0.8	4	PA, QL (4 syringes every 28 days)
HUMIRA PEDIA INJ CROHNS	4	PA, QL (2 syr every 28 days)
HUMIRA PEDIA INJ CROHNS	4	PA, QL (3 syr every 28 days)
HUMIRA PEN INJ 40/0.4ML	4	PA, QL (4 pens every 28 days)
HUMIRA PEN INJ 40MG/0.8	4	PA, QL (4 pens every 28 days)
HUMIRA PEN INJ 80/0.8ML	4	PA, QL (2 pens every 28 days)
HUMIRA PEN INJ CD/UC/HS	4	PA, QL (4 pens every 28 days)
HUMIRA PEN INJ PS/UV	4	PA, QL (4 pens every 28 days)
HUMIRA PEN KIT 80/0.8ML	4	PA, QL (2 pens every 28 days)
HUMIRA PEN KIT CD/UC/HS	4	PA, QL (2 pens every 28 days)
HUMIRA PEN KIT PED UC	4	PA, QL (2 pens every 28 days)
HUMIRA PEN KIT PS/UV	4	PA, QL (3 pens every 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.
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.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
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.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
IDACIO 2-PEN INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
IDACIO 2-SYR INJ 40/0.8ML	4	PA, QL (4 syringes every 28 days)
IDACIO CROHN INJ DISEASE	4	PA, QL (4 pens every 28 days)
IDACIO PLAQU INJ PSORIASI	4	PA, QL (4 pens every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SIMLANDI 1PN KIT 40/0.4ML	4	PA, QL (4 pens every 28 days)
SIMLANDI 2PN INJ 40/0.4ML	4	PA, QL (4 pens every 28 days)
SIMPONI INJ 50/0.5ML	4	PA, QL (1 pen every 28 days)
SIMPONI INJ 50/0.5ML	4	PA, QL (1 syr every 28 days)
SIMPONI INJ 100MG/ML	4	PA, QL (1 pen every 28 days)
SIMPONI INJ 100MG/ML	4	PA, QL (1 syr every 28 days)
YUFLYMA 1PEN KIT 40/0.4ML	4	PA, QL (4 pens every 28 days)
YUFLYMA 1PEN KIT 80/0.8ML	4	PA, QL (2 pens every 28 days)
YUFLYMA 2PEN KIT 40/0.4ML	4	PA, QL (4 pens every 28 days)
YUFLYMA 2SYR KIT 20/0.2ML	4	PA, QL (4 syringes every 28 days)
YUFLYMA 2SYR KIT 40/0.4ML	4	PA, QL (4 syringes every 28 days)
YUFLYMA KIT 80/0.8ML	4	PA, QL (2 pens every 28 days)
YUSIMRY INJ 40/0.8ML	4	PA, QL (4 pens every 28 days)
<b>ANTIRHEUMATIC - ENZYME INHIBITORS</b>		
OLUMIANT TAB 1MG	4	PA, QL (1 tab every 1 day)
OLUMIANT TAB 2MG	4	PA, QL (1 tab every 1 day)
OLUMIANT TAB 4MG	4	PA, QL (1 tab every 1 day)
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.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
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.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
<b>ANTIRHEUMATIC ANTIMETABOLITES</b>		
OTREXUP INJ 10MG	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 12.5/0.4	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 15MG	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 17.5/0.4	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 20MG	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 22.5/0.4	4	PA, QL (4 pens every 28 days)
OTREXUP INJ 25MG	4	PA, QL (4 pens every 28 days)
RASUVO INJ 7.5MG	4	PA, QL (4 inj every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RASUVO INJ 10MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 12.5MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 15MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 17.5MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 20MG	4	PA, QL (4 pens every 28 days)
RASUVO INJ 22.5MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 25MG	4	PA, QL (4 inj every 28 days)
RASUVO INJ 30MG	4	PA, QL (4 inj every 28 days)
REDITREX INJ 7.5/.3ML	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 10/.4ML	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 12.5/0.5	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 15/.6ML	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 17.5/0.7	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 20/.8ML	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 22.5/0.9	4	PA, QL (4 syringes every 28 days)
REDITREX INJ 25MG/ML	4	PA, QL (4 syringes every 28 days)
<b>INTERLEUKIN-1 BLOCKERS</b>		
ARCALYST INJ 220MG	4	PA, QL (8 vials every 28 days)
<b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>		
ACTEMRA INJ 162/0.9	4	PA, QL (4 syringes every 28 days)
ACTEMRA INJ ACTPEN	4	PA, QL (4 pens every 28 days)
KEVZARA INJ 150/1.14	4	PA, QL (2 pens every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
TYENNE INJ 162/0.9	4	PA, QL (4 pens every 28 days)
TYENNE INJ 162MG	4	PA, QL (4 syringes every 28 days)

### ***NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)***

ANAPROX DS TAB 550MG	2
ARTHROTEC 50 TAB	2
ARTHROTEC 75 TAB	2
CELEBREX CAP 50MG	2
CELEBREX CAP 100MG	2
CELEBREX CAP 200MG	2
CELEBREX CAP 400MG	2
<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
DAYPRO TAB 600MG	2
DICLOFENAC CAP 35MG	2
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
DUEXIS TAB 800-26.6	2	
EC-NAPROSYN TAB 375MG	2	
EC-NAPROSYN TAB 500MG	2	
<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	
FELDENE CAP 10MG	2	
FELDENE CAP 20MG	2	
FENOPROFEN CAP 200MG	2	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
INDOCIN SUS 25MG/5ML	2	
<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	
LODINE TAB 400MG	2	
<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	
NALFON CAP 400MG	2	
NALFON TAB 600MG	2	
NAPRELAN TAB 375MG CR	2	
NAPRELAN TAB 500MG CR	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NAPRELAN TAB 750MG CR	2	
NAPROSYN SUS 125/5ML	2	
NAPROSYN TAB 500MG	2	
<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	
TOLECTIN 600 TAB 600MG	2	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
VIMOVO TAB 375-20MG	2	
VIMOVO TAB 500-20MG	2	
ZORVOLEX CAP 18MG	2	
ZORVOLEX CAP 35MG	2	

**PHOSPHODIESTERASE 4 (PDE4) INHIBITORS**

OTEZLA TAB 10/20	4	PA, QL (55 tabs every 28 days)
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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
<b>PYRIMIDINE SYNTHESIS INHIBITORS</b>		
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
<b>SELECTIVE COSTIMULATION MODULATORS</b>		
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.
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.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.

***SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS***

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.
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.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>aspirin chew tab 81 mg</i>	1	OTC
<i>aspirin tab delayed release 81 mg</i>	1	OTC
<i>diflunisal tab 500 mg</i>	1	
<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
<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



CareFirst Formulary 4 - Chart 4T Effective 01/01/2025  
Lamotrigine 400mcg 1 PA

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 abuse deter 15 mg</i>	1	PA
<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)
ROXYBOND TAB 5MG	2	PA
<i>tramadol hcl oral soln 5 mg/ml</i>	1	
<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
XTAMPZA ER CAP 9MG	2	PA, QL (2 caps every 1 day)
XTAMPZA ER CAP 13.5MG	2	PA, QL (2 caps every 1 day)
XTAMPZA ER CAP 18MG	2	PA, QL (2 caps every 1 day)
XTAMPZA ER CAP 27MG	2	PA, QL (2 caps every 1 day)
XTAMPZA ER CAP 36MG	2	PA, QL (2 caps every 1 day)
<b>OPIOID COMBINATIONS</b>		
<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)
<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)
APADAZ TAB 4.08-325	2	PA, QL (12 tabs every 1 day)

CareFirst Formulary Chart, 4T Effective 01/01/2025 2 PA, QL (12 tabs every 1 day)

**Drug Name** **Drug Tier** **Requirements/Limits**

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
APADAZ TAB 8.16-325	2	PA, QL (12 tabs every 1 day)
BENZHY/ACETA TAB 4.08-325	2	PA, QL (12 tabs every 1 day)
BENZHY/ACETA TAB 6.12-325	2	PA, QL (12 tabs every 1 day)
BENZHY/ACETA TAB 8.16-325	2	PA, QL (12 tabs 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 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)
<b>OPIOID PARTIAL AGONISTS</b>		
BELBUCA MIS 75MCG	2	PA, QL (2 films every 1 day)
BELBUCA MIS 150MCG	2	PA, QL (2 films every 1 day)
BELBUCA MIS 300MCG	2	PA, QL (2 films every 1 day)
BELBUCA MIS 450MCG	2	PA, QL (2 films every 1 day)
BELBUCA MIS 600MCG	2	PA
BELBUCA MIS 750MCG	2	PA
BELBUCA MIS 900MCG	2	PA
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	0	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	0	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	QL (90 films every 25 days)
<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**

ANDRODERM DIS 2MG/24HR	2	PA
ANDRODERM DIS 4MG/24HR	2	PA
ANDROGEL GEL 1%(25MG)	2	PA
ANDROGEL GEL 1.62%	2	PA
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	1	
FORTESTA GEL 10MG/ACT	2	PA
JATENZO CAP 158MG	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
JATENZO CAP 198MG	2	PA
JATENZO CAP 237MG	2	PA
KYZATREX CAP 100MG	2	PA
KYZATREX CAP 150MG	2	PA
KYZATREX CAP 200MG	2	PA
<i>methyltestosterone cap 10 mg</i>	1	
NATESTO GEL 5.5MG	2	PA
TESTIM GEL 1%(50MG)	2	PA
TESTOST CYP INJ 200MG/ML	2	PA
<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
TESTOSTERONE INJ CYPIONAT	2	PA
TESTOSTERONE MIS 25MG	2	PA
TESTOSTERONE MIS 37.5MG	2	PA
TESTOSTERONE MIS 50MG	2	PA
TESTOSTERONE MIS 87.5MG	2	PA
TESTOSTERONE MIS 100MG	2	PA
TESTOSTERONE MIS 200MG	2	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
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	PA
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	1	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	PA
<i>testosterone td soln 30 mg/act</i>	1	PA
TLANDO CAP 112.5 MG	2	PA
VOGELXO GEL 1%(50MG)	2	PA
VOGELXO GEL PUMP 1%	2	PA
XYOSTED INJ 50/0.5	2	PA
XYOSTED INJ 75/0.5	2	PA
XYOSTED INJ 100/0.5	2	PA

**ANORECTAL AND RELATED PRODUCTS****INTRARECTAL STEROIDS**

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

**RECTAL COMBINATIONS**

<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	
<i>hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>RECTAL STEROIDS</b>		
<i>hydrocortisone acetate suppos 25 mg</i>	1	
<i>hydrocortisone acetate suppos 30 mg</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<b>VASODILATING AGENTS</b>		
<i>nitroglycerin oint 0.4%</i>	1	
<b>ANTHELMINTICS</b>		
<b>ANTHELMINTICS</b>		
<i>albendazole tab 200 mg</i>	1	QL (336 tabs every year)
EMVERM CHW 100MG	2	QL (12 ea every year)
<i>ivermectin tab 3 mg</i>	1	
<i>praziquantel tab 600 mg</i>	1	QL (24 tabs every year)
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<i>metronidazole cap 375 mg</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
<i>tinidazole tab 250 mg</i>	1	
<i>tinidazole tab 500 mg</i>	1	
<i>trimethoprim tab 100 mg</i>	1	
XIFAXAN TAB 550MG	2	
<b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>		
<i>methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg</i>	1	
<i>methenamine-hyosc-meth blue-benz acid-phenyl sal tab 81.6mg</i>	1	
<i>methenamine-hyosc-meth blue-sod phos-phen sal cap 118 mg</i>	1	
<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	
<b>ANTIPROTOZOAL AGENTS</b>		
<i>atovaquone susp 750 mg/5ml</i>	1	
<i>nitazoxanide tab 500 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CARBAPENEMS</b>		
MEROPENEM INJ 2GM	2	
<b>CYCLIC LIPOPEPTIDES</b>		
<i>daptomycin for iv soln 350 mg</i>	1	
DAPTOMYCIN INJ 350MG	2	
<b>GLYCOPEPTIDES</b>		
DALVANCE SOL 500MG	2	
KIMYRSA INJ 1200MG	2	
ORBACTIV SOL 400MG	2	
<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)
<b>LEPROSTATICS</b>		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
<b>LINCOSAMIDES</b>		
<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	
<b>MONOBACTAMS</b>		
CAYSTON INH 75MG	4	PA, QL (3 vials every 1 day)
<b>OXAZOLIDINONES</b>		
<i>linezolid for susp 100 mg/5ml</i>	1	PA
<i>linezolid tab 600 mg</i>	1	PA
<b>POLYMYXINS</b>		
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	1	
COLY-MYCIN M INJ 150MG	2	
<b>URINARY ANTI-INFECTIVES</b>		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	1	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	
<b>ANTIANGINAL AGENTS</b>		
<b>ANTIANGINALS-OTHER</b>		
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	
<b>NITRATES</b>		
<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	
<b>ANTIAXIETY AGENTS</b>		
<b>ANTIAXIETY AGENTS - MISC.</b>		
<i>bupirone hcl tab 5 mg</i>	1	
<i>bupirone hcl tab 7.5 mg</i>	1	
<i>bupirone hcl tab 10 mg</i>	1	
<i>bupirone hcl tab 15 mg</i>	1	
<i>bupirone 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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
VISTARIL CAP 25MG	2	
VISTARIL CAP 50MG	2	

**BENZODIAZEPINES**

ALPRAZOLAM CON 1 MG/ML	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)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
<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
----------------------------------	---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
TIKOSYN CAP 500MCG	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)
TEZSPIRE INJ 210MG	4	PA, QL (1 pen 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)
SPIRIVA AER 1.25MCG	2	QL (1 inhaler every 25 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SPIRIVA SPR 2.5MCG	2	QL (1 inhaler every 25 days)
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	1	QL (30 ea every 25 days)
YUPELRI SOL	2	QL (90 mL every 25 days)
<b>LEUKOTRIENE MODULATORS</b>		
<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	
<b>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
<b>STEROID INHALANTS</b>		
ALVESCO AER 80MCG	2	QL (3 packages every 25 days)
ALVESCO AER 160MCG	2	QL (2 packages every 25 days)
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 14 AER 220MCG	2	PA
ASMANEX 30 AER 110MCG	2	QL (2 packages every 25 days)
ASMANEX 30 AER 220MCG	2	QL (4 packages every 25 days)
ASMANEX 60 AER 220MCG	2	QL (2 packages every 25 days)
ASMANEX 120 AER 220MCG	2	QL (1 package every 25 days)
ASMANEX HFA AER 50MCG	2	QL (1 package every 25 days)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX HFA AER 100 MCG	2	QL (1 package every 25 days)



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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)
FLOVENT DISK AER 50MCG	2	QL (3 packages every 25 days)
FLOVENT DISK AER 100MCG	2	QL (4 packages every 25 days)
FLOVENT DISK AER 250MCG	2	QL (4 packages every 25 days)
FLOVENT HFA AER 44MCG	2	QL (2 packages every 25 days)
FLOVENT HFA AER 110MCG	2	QL (2 packages every 25 days)
FLOVENT HFA AER 220MCG	2	QL (2 packages every 25 days)
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	1	QL (3 packages every 25 days)
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	1	QL (4 packages every 25 days)
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	1	QL (4 packages every 25 days)
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	1	QL (2 packages every 25 days)
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	1	QL (2 packages every 25 days)
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	1	QL (2 packages every 25 days)
PULMICORT INH 90MCG	2	QL (3 packages every 25 days)
PULMICORT INH 180MCG	2	QL (2 packages every 25 days)
<b>SYMPATHOMIMETICS</b>		
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 0.5% (5 mg/ml)</i>	1	QL (60 mL every 25 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (375 mL every 25 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
BREO ELLIPTA INH 200-25	2	QL (60 blisters every 25 days)
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 160-4.5 mcg/act</i>	1	QL (3 packages every 25 days)
DUAKLIR AER 400/12	2	QL (1 inhaler every 30 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)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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	

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>DIRECT FACTOR XA INHIBITORS</b>		
XARELTO STAR TAB 15/20MG	2	
XARELTO SUS 1MG/ML	2	
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
<b>HEPARINS AND HEPARINOID-LIKE AGENTS</b>		
<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
<b>THROMBIN INHIBITORS</b>		
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTICONVULSANTS</b>		
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<i>clobazam suspension 2.5 mg/ml</i>	1	PA
<i>clobazam tab 10 mg</i>	1	PA
<i>clobazam tab 20 mg</i>	1	PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	QL (300 ea every 25 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	QL (300 ea every 25 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	QL (300 ea every 25 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	1	QL (300 ea every 25 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	1	QL (300 ea every 25 days)
<i>clonazepam tab 0.5 mg</i>	1	QL (300 tabs every 25 days)
<i>clonazepam tab 1 mg</i>	1	QL (300 tabs every 25 days)
<i>clonazepam tab 2 mg</i>	1	QL (300 tabs every 25 days)
<i>diazepam rectal gel delivery system 2.5 mg</i>	1	
<i>diazepam rectal gel delivery system 10 mg</i>	1	
<i>diazepam rectal gel delivery system 20 mg</i>	1	
<b>ANTICONVULSANTS - MISC.</b>		
<i>carbamazepine cap er 12hr 100 mg</i>	1	
<i>carbamazepine cap er 12hr 200 mg</i>	1	
<i>carbamazepine cap er 12hr 300 mg</i>	1	
<i>carbamazepine chew tab 100 mg</i>	1	
<i>carbamazepine susp 100 mg/5ml</i>	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	1	
<i>carbamazepine tab er 12hr 200 mg</i>	1	
<i>carbamazepine tab er 12hr 400 mg</i>	1	
EPIDIOLEX SOL 100MG/ML	4	PA, QL (800 mL every 30 days)
<i>gabapentin cap 100 mg</i>	1	QL (6 caps every 1 day)
<i>gabapentin cap 300 mg</i>	1	QL (6 caps every 1 day)
<i>gabapentin cap 400 mg</i>	1	QL (6 caps every 1 day)
<i>gabapentin oral soln 250 mg/5ml</i>	1	QL (72 mL every 1 day)
<i>gabapentin tab 600 mg</i>	1	QL (6 tabs every 1 day)
<i>gabapentin tab 800 mg</i>	1	QL (4 tabs every 1 day)
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide tab 50 mg</i>	1	
<i>lacosamide tab 100 mg</i>	1	
<i>lacosamide tab 150 mg</i>	1	
<i>lacosamide tab 200 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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) &amp; 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 &amp; 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 &amp; 7 x 50 mg titration kit</i>	1	
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i>	1	
<i>lamotrigine tab disint 42 x 50mg &amp; 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	
NEURONTIN TAB 600MG	2	QL (6 tabs every 1 day)
<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>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)



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<i>rufinamide tab 200 mg</i>	1	
<i>rufinamide tab 400 mg</i>	1	
<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 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	
<b>CARBAMATES</b>		
<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
<b>GABA MODULATORS</b>		
SABRIL POW 500MG	4	PA, QL (6 packets every 1 day)
SABRIL TAB 500MG	4	PA, QL (6 tabs every 1 day)
<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)
<b>HYDANTOINS</b>		
DILANTIN CAP 30MG	2	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>SUCCINIMIDES</b>		
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>methsuximide cap 300 mg</i>	1	
<b>VALPROIC ACID</b>		
<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	
<b>ANTIDEPRESSANTS</b>		
<b>ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)</b>		
<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	
<b>ANTIDEPRESSANTS - MISC.</b>		
<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	
<b>GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID</b>		
ZURZUVAE CAP 20MG	4	PA, QL (2 caps every 1 day)
ZURZUVAE CAP 25MG	4	PA, QL (2 caps every 1 day)
ZURZUVAE CAP 30MG	4	PA, QL (1 cap every 1 day)
<b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>		
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
<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	
<b>SEROTONIN MODULATORS</b>		
<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>TRICYCLIC AGENTS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>trimipramine maleate cap 50 mg</i>	1	
<i>trimipramine maleate cap 100 mg</i>	1	
<b>ANTIDIABETICS</b>		
<b>ALPHA-GLUCOSIDASE INHIBITORS</b>		
<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	
<b>ANTIDIABETIC - AMYLIN ANALOGS</b>		
SYMLINPEN 60 INJ 1000MCG	2	ST
SYMLNPEN 120 INJ 1000MCG	2	ST
<b>ANTIDIABETIC COMBINATIONS</b>		
<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
INVOKAMET TAB 50-500MG	2	ST
INVOKAMET TAB 50-1000	2	ST
INVOKAMET TAB 150-500	2	ST
INVOKAMET TAB 150-1000	2	ST
INVOKAMET XR TAB 50-500MG	2	ST
INVOKAMET XR TAB 50-1000	2	ST
INVOKAMET XR TAB 150-500	2	ST
INVOKAMET XR TAB 150-1000	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	
QTERN TAB 5-5MG	2	ST
QTERN TAB 10-5MG	2	ST

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
SEGLUROMET TAB 2.5-500	2	ST
SEGLUROMET TAB 2.5-1000	2	ST
SEGLUROMET TAB 7.5-500	2	ST
SEGLUROMET TAB 7.5-1000	2	ST
SOLQUA INJ 100/33	2	ST, QL (10 pens every 30 days)
STEGLUJAN TAB 5-100MG	2	ST
STEGLUJAN TAB 15-100MG	2	ST
SYNJARDY TAB	2	ST
SYNJARDY TAB 5-500MG	2	ST
SYNJARDY TAB 5-1000MG	2	ST
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
<b>BIGUANIDES</b>		
<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	
<b>DIABETIC OTHER</b>		
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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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)
<b>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</b>		
<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
<b>INCRETIN MIMETIC AGENTS</b>		
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	1	QL (3 pens every 25 days)
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 3MG	2	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 7MG	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)



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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)
VICTOZA INJ 18MG/3ML	2	PA, QL (3 pens every 25 days)
<b>INSULIN</b>		
FIASP FLEX INJ TOUCH	2	
FIASP INJ 100/ML	2	
FIASP PENFIL INJ U-100	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	
<b>INSULIN SENSITIZING AGENTS</b>		
<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	
<b>MEGLITINIDE ANALOGUES</b>		
<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	
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>		
BEXAGLIFLOZN TAB 20MG	2	ST
BRENZAVVY TAB 20MG	2	ST

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
INVOKANA TAB 100MG	2	ST
INVOKANA TAB 300MG	2	ST
JARDIANCE TAB 10MG	2	ST
JARDIANCE TAB 25MG	2	ST
STEGLATRO TAB 5MG	2	ST
STEGLATRO TAB 15MG	2	ST
<b>SULFONYLUREAS</b>		
<i>glimepiride tab 1 mg</i>	1	
<i>glimepiride tab 2 mg</i>	1	
<i>glimepiride tab 3 mg</i>	2	
<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	
<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	
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS</b>		
<b>ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS</b>		
MYTESI TAB 125MG	2	
<b>ANTIPERISTALTIC AGENTS</b>		
<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	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>ANTIDOTES - CHELATING AGENTS</b>		
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EXJADE TAB 125MG	4	PA
EXJADE TAB 250MG	4	PA
EXJADE TAB 500MG	4	PA
JADENU SPRKL GRA 90MG	4	PA
JADENU SPRKL GRA 180MG	4	PA
JADENU SPRKL GRA 360MG	4	PA
JADENU TAB 90MG	4	PA
JADENU TAB 180MG	4	PA
JADENU TAB 360MG	4	PA
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
VISTOGARD PAK 10GM	4	QL (20 packets every 5 days)
<b>OPIOID ANTAGONISTS</b>		
<i>naloxone hcl inj 0.4 mg/ml</i>	1	QL (2 cartons per 30 days)
<i>naloxone hcl inj 4 mg/10ml</i>	1	QL (2 cartons per 30 days)
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	QL (2 cartons per 30 days)
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	QL (2 cartons per 30 days)
<i>naltrexone hcl tab 50 mg</i>	0	QL (2 cartons every 30 days)
<b>ANTIEMETICS</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
<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	
<b>ANTIEMETICS - ANTICHOLINERGIC</b>		
<i>meclizine hcl tab 50 mg</i>	1	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
<i>trimethobenzamide hcl cap 300 mg</i>	1	
<b>ANTIEMETICS - MISCELLANEOUS</b>		
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	1	
<i>dronabinol cap 2.5 mg</i>	1	
<i>dronabinol cap 5 mg</i>	1	
<i>dronabinol cap 10 mg</i>	1	
<b>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</b>		
<i>aprepitant capsule 40 mg</i>	1	QL (3 caps every 180 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>aprepitant capsule 80 mg</i>	1	QL (4 ea every 21 days)
<i>aprepitant capsule 125 mg</i>	1	QL (2 caps every 21 days)
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	1	QL (6 tabs every 21 days)

**ANTIFUNGALS****ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS**

CANCIDAS INJ 50MG	2	
CANCIDAS INJ 70MG	2	
<i>casposfungin acetate for iv soln 50 mg</i>	1	
<i>casposfungin acetate for iv soln 70 mg</i>	1	
CASPOFUNGIN INJ 50MG	2	
CASPOFUNGIN INJ 70MG	2	
MICAFUNGIN INJ 50MG	2	
MICAFUNGIN INJ 100MG	2	
<i>micafungin sodium for iv soln 50 mg</i>	1	
<i>micafungin sodium for iv soln 100 mg</i>	1	
MYCAMINE INJ 50MG	2	
MYCAMINE INJ 100MG	2	

**ANTIFUNGALS**

ABELCET INJ 5MG/ML	2	
AMBISOME INJ 50MG	2	
<i>amphotericin b liposome iv for susp 50 mg</i>	1	
<i>flucytosine cap 250 mg</i>	1	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	1	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	

**IMIDAZOLE-RELATED ANTIFUNGALS**

<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>itraconazole cap 100 mg</i>	1	
<i>itraconazole oral soln 10 mg/ml</i>	1	
<i>ketoconazole tab 200 mg</i>	1	
NOXAFIL SUS 40MG/ML	2	
NOXAFIL TAB 100MG	2	
<i>posaconazole susp 40 mg/ml</i>	1	PA
VFEND IV INJ 200MG	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>voriconazole for inj 200 mg</i>	1	PA
<i>voriconazole for susp 40 mg/ml</i>	1	PA
VORICONAZOLE INJ 200MG	2	
<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	
QUZYTIR INJ 10MG/ML	2	

**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****ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS**

NEXLETOL TAB 180MG	2	ST
--------------------	---	----

**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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NEXLIZET TAB 180/10MG	2	ST
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>icosapent ethyl cap 0.5 gm</i>	1	PA
<i>icosapent ethyl cap 1 gm</i>	1	PA
LOVAZA CAP 1GM	2	PA
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA
VASCEPA CAP 0.5GM	2	PA
VASCEPA CAP 1GM	2	PA
<b>BILE ACID SEQUESTRANTS</b>		
<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	
<b>FIBRIC ACID DERIVATIVES</b>		
<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	
<b>HMG COA REDUCTASE INHIBITORS</b>		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>lovastatin tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>lovastatin tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>lovastatin tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>pitavastatin calcium tab 1 mg</i>	1	
<i>pitavastatin calcium tab 2 mg</i>	1	
<i>pitavastatin calcium tab 4 mg</i>	1	
<i>pravastatin sodium tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 80 mg</i>	1	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 5 mg</i>	1	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 10 mg</i>	1	\$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>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 80 mg</i>	1	
<b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe tab 10 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>NICOTINIC ACID DERIVATIVES</b>		
<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	
<b>PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS</b>		
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)
REPATHA SURE INJ 140MG/ML	2	PA, QL (3 pens every 28 days)
<b>ANTIHYPERTENSIVES</b>		
<b>ACE INHIBITORS</b>		
<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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>AGENTS FOR PHEOCHROMOCYTOMA</b>		
DEMSEER CAP 250MG	4	PA, QL (16 caps every 1 day)
<i>metyrosine cap 250 mg</i>	3	PA, QL (16 caps every 1 day)
<i>phenoxybenzamine hcl cap 10 mg</i>	1	PA
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<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	
<b>ANTIADRENERGIC ANTIHYPERTENSIVES</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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	
<b>ANTIHYPERTENSIVE COMBINATIONS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 &amp; chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol &amp; 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 &amp; hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium &amp; 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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
<b>DIRECT RENIN INHIBITORS</b>		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	
<b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b>		
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
<b>VASODILATORS</b>		
<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl tab 25 mg</i>	1	
<i>hydralazine hcl tab 50 mg</i>	1	
<i>hydralazine hcl tab 100 mg</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	
<i>minoxidil tab 10 mg</i>	1	
<b>ANTIMALARIALS</b>		
<b>ANTIMALARIAL COMBINATIONS</b>		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<b>ANTIMALARIALS</b>		
<i>chloroquine phosphate tab 250 mg</i>	1	
<i>chloroquine phosphate tab 500 mg</i>	1	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>mefloquine hcl tab 250 mg</i>	1	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	
<i>pyrimethamine tab 25 mg</i>	1	PA
<i>quinine sulfate cap 324 mg</i>	1	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	1	
<i>pyridostigmine bromide tab 30 mg</i>	1	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	1	
<b>ANTIMYCOBACTERIAL AGENTS</b>		
<b>ANTIMYCOBACTERIAL AGENTS</b>		
<i>cycloserine cap 250 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
PRIFTIN TAB 150MG	2	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
TRECTOR TAB 250MG	2	

**ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES****ALKYLATING AGENTS**

CYCLOPHOSPH TAB 25MG	2	
CYCLOPHOSPH TAB 50MG	2	
<i>cyclophosphamide cap 25 mg</i>	1	
<i>cyclophosphamide cap 50 mg</i>	1	
LEUKERAN TAB 2MG	2	
MYLERAN TAB 2MG	2	
TEMODAR CAP 250MG	4	PA
<i>temozolomide cap 5 mg</i>	3	PA
<i>temozolomide cap 20 mg</i>	3	PA
<i>temozolomide cap 100 mg</i>	3	PA
<i>temozolomide cap 140 mg</i>	3	PA
<i>temozolomide cap 180 mg</i>	3	PA
<i>temozolomide cap 250 mg</i>	3	PA

**ANTIMETABOLITES**

<i>capecitabine tab 150 mg</i>	3	PA
<i>capecitabine tab 500 mg</i>	3	PA
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ONUREG TAB 200MG	4	PA, QL (14 tabs every 21 days)
ONUREG TAB 300MG	4	PA, QL (14 tabs every 21 days)
PURIXAN SUS 20MG/ML	4	PA
TABLOID TAB 40MG	2	
XELODA TAB 150MG	4	PA
XELODA TAB 500MG	4	PA
<b>ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS</b>		
INLYTA TAB 1MG	4	PA, QL (8 tabs every 1 day)
INLYTA TAB 5MG	4	PA, QL (4 tabs every 1 day)
LENVIMA CAP 4MG	4	PA, QL (1 ea every 1 day)
LENVIMA CAP 8 MG	4	PA, QL (2 ea every 1 day)
LENVIMA CAP 10 MG	4	PA, QL (1 ea every 1 day)
LENVIMA CAP 12MG	4	PA, QL (3 ea every 1 day)
LENVIMA CAP 14 MG	4	PA, QL (2 ea every 1 day)
LENVIMA CAP 18 MG	4	PA, QL (3 ea every 1 day)
LENVIMA CAP 20 MG	4	PA, QL (2 ea every 1 day)
LENVIMA CAP 24 MG	4	PA, QL (3 ea every 1 day)
<b>ANTINEOPLASTIC - ANTI-HER2 AGENTS</b>		
TUKYSA TAB 50MG	4	PA, QL (4 tabs every 1 day)
TUKYSA TAB 150MG	4	PA, QL (4 tabs every 1 day)
<b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>		
VENCLEXTA TAB 10MG	4	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 50MG	4	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 100MG	4	PA, QL (6 tabs every 1 day)
VENCLEXTA TAB START PK	4	PA, QL (1 pack every 28 days)
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	3	PA, QL (2 tabs every 1 day)
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	3	PA, QL (1 tab every 1 day)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	3	PA, QL (1 tab every 1 day)
<i>gefitinib tab 250 mg</i>	3	PA, QL (1 tab every 1 day)
GILOTRIF TAB 20MG	4	PA, QL (1 tab every 1 day)
GILOTRIF TAB 30MG	4	PA, QL (1 tab every 1 day)
GILOTRIF TAB 40MG	4	PA, QL (1 tab every 1 day)
IRESSA TAB 250MG	4	PA, QL (1 tab every 1 day)
TAGRISSE TAB 40MG	4	PA, QL (1 tab every 1 day)
TAGRISSE TAB 80MG	4	PA, QL (1 tab every 1 day)
TARCEVA TAB 100MG	4	PA, QL (1 tab every 1 day)
TARCEVA TAB 150MG	4	PA, QL (1 tab every 1 day)
VIZIMPRO TAB 15MG	4	PA, QL (1 tab every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIZIMPRO TAB 30MG	4	PA, QL (1 tab every 1 day)
VIZIMPRO TAB 45MG	4	PA, QL (1 tab every 1 day)
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
DAURISMO TAB 25MG	4	PA, QL (2 tabs every 1 day)
DAURISMO TAB 100MG	4	PA, QL (1 tab every 1 day)
ERIVEDGE CAP 150MG	4	PA, QL (1 cap every 1 day)
ODOMZO CAP 200MG	4	PA, QL (1 cap every 1 day)
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b>		
<i>abiraterone acetate tab 250 mg</i>	3	PA, QL (4 tabs every 1 day)
<i>abiraterone acetate tab 500 mg</i>	3	PA, QL (2 tabs every 1 day)
<i>anastrozole tab 1 mg</i>	0	
<i>bicalutamide tab 50 mg</i>	1	
EMCYT CAP 140MG	2	
ERLEADA TAB 60MG	4	PA, QL (4 tabs every 1 day)
ERLEADA TAB 240MG	4	PA, QL (1 tab every 1 day)
EULEXIN CAP 125MG	2	
<i>exemestane tab 25 mg</i>	0	
<i>flutamide cap 125 mg</i>	1	
<i>letrozole tab 2.5 mg</i>	1	
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	3	PA
LYSODREN TAB 500MG	4	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
<i>nilutamide tab 150 mg</i>	1	
NUBEQA TAB 300MG	4	PA, QL (4 tabs every 1 day)
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	\$0 copay for women > 35 years for the primary prevention of breast cancer
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	\$0 copay for women > 35 years for the primary prevention of breast cancer
<i>toremifene citrate tab 60 mg (base equivalent)</i>	1	
XTANDI CAP 40MG	4	PA, QL (4 caps every 1 day)
XTANDI TAB 40MG	4	PA, QL (4 tabs every 1 day)
XTANDI TAB 80MG	4	PA, QL (2 tabs every 1 day)
YONSA TAB 125MG	4	PA, QL (4 tabs every 1 day)
ZYTIGA TAB 250MG	4	PA, QL (4 tabs every 1 day)
ZYTIGA TAB 500MG	4	PA, QL (2 tabs every 1 day)



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><i>ANTINEOPLASTIC - IMMUNOMODULATORS</i></b>		
POMALYST CAP 1MG	4	PA, QL (42 caps every 28 days)
POMALYST CAP 2MG	4	PA, QL (42 caps every 28 days)
POMALYST CAP 3MG	4	PA, QL (42 caps every 28 days)
POMALYST CAP 4MG	4	PA, QL (42 caps every 28 days)
<b><i>ANTINEOPLASTIC COMBINATIONS</i></b>		
INQOVI TAB 35-100MG	4	PA, QL (10 tabs every 25 days)
KISQALI 200 PAK FEMARA	4	PA, QL (49 tabs every 28 days)
KISQALI 400 PAK FEMARA	4	PA, QL (70 tabs every 28 days)
KISQALI 600 PAK FEMARA	4	PA, QL (91 tabs every 28 days)
LONSURF TAB 15-6.14	4	PA, QL (100 tabs every 28 days)
LONSURF TAB 20-8.19	4	PA, QL (80 tabs every 28 days)
<b><i>ANTINEOPLASTIC ENZYME INHIBITORS</i></b>		
AFINITOR DIS TAB 2MG	4	PA, QL (2 tabs every 1 day)
AFINITOR DIS TAB 3MG	4	PA, QL (3 tabs every 1 day)
AFINITOR DIS TAB 5MG	4	PA, QL (2 tabs every 1 day)
AFINITOR TAB 2.5MG	4	PA, QL (1 tab every 1 day)
AFINITOR TAB 5MG	4	PA, QL (1 tab every 1 day)
AFINITOR TAB 7.5MG	4	PA, QL (1 tab every 1 day)
AFINITOR TAB 10MG	4	PA, QL (1 tab every 1 day)
ALECENSA CAP 150MG	4	PA, QL (8 caps every 1 day)
ALUNBRIG PAK	4	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 30MG	4	PA, QL (4 tabs every 1 day)
ALUNBRIG TAB 90MG	4	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 180MG	4	PA, QL (1 tab every 1 day)
AUGTYRO CAP 40MG	4	PA, QL (8 caps every 1 day)
BALVERSA TAB 3MG	4	PA, QL (3 tabs every 1 day)
BALVERSA TAB 4MG	4	PA, QL (2 tabs every 1 day)
BALVERSA TAB 5MG	4	PA, QL (1 tab every 1 day)
BOSULIF CAP 50MG	4	PA, QL (1 cap every 1 day)
BOSULIF CAP 100MG	4	PA, QL (10 caps every 1 day)
BOSULIF TAB 100MG	4	PA, QL (3 tabs every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BOSULIF TAB 400MG	4	PA, QL (1 tab every 1 day)
BOSULIF TAB 500MG	4	PA, QL (1 tab every 1 day)
BRAFTOVI CAP 75MG	4	PA, QL (6 caps every 1 day)
CABOMETYX TAB 20MG	4	PA, QL (1 tab every 1 day)
CABOMETYX TAB 40MG	4	PA, QL (1 tab every 1 day)
CABOMETYX TAB 60MG	4	PA, QL (1 tab every 1 day)
CALQUENCE TAB 100MG	4	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 100MG	4	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 300MG	4	PA, QL (1 tab every 1 day)
COMETRIQ KIT 60MG	4	PA, QL (84 caps every 28 days)
COMETRIQ KIT 100MG	4	PA, QL (56 caps every 28 days)
COMETRIQ KIT 140MG	4	PA, QL (112 caps every 28 days)
COPIKTRA CAP 15MG	4	PA, QL (2 caps every 1 day)
COPIKTRA CAP 25MG	4	PA, QL (2 caps every 1 day)
COTELLIC TAB 20MG	4	PA, QL (63 tabs every 28 days)
<i>everolimus tab 2.5 mg</i>	3	PA, QL (1 tab every 1 day)
<i>everolimus tab 5 mg</i>	3	PA, QL (1 tab every 1 day)
<i>everolimus tab 7.5 mg</i>	3	PA, QL (1 tab every 1 day)
<i>everolimus tab 10 mg</i>	3	PA, QL (1 tab every 1 day)
<i>everolimus tab for oral susp 2 mg</i>	3	PA, QL (2 ea every 1 day)
<i>everolimus tab for oral susp 3 mg</i>	3	PA, QL (3 ea every 1 day)
<i>everolimus tab for oral susp 5 mg</i>	3	PA, QL (2 ea every 1 day)
GLEEVEC TAB 100MG	4	PA, QL (4 tabs every 1 day)
GLEEVEC TAB 400MG	4	PA, QL (2 tabs every 1 day)
IBRANCE CAP 75MG	4	PA, QL (1 cap every 1 day)
IBRANCE CAP 100MG	4	PA, QL (1 cap every 1 day)
IBRANCE CAP 125MG	4	PA, QL (1 cap every 1 day)
IBRANCE TAB 75MG	4	PA, QL (42 tabs every 28 days)
IBRANCE TAB 100MG	4	PA, QL (42 tabs every 28 days)
IBRANCE TAB 125MG	4	PA, QL (42 tabs every 28 days)
IDHIFA TAB 50MG	4	PA, QL (1 tab every 1 day)
IDHIFA TAB 100MG	4	PA, QL (1 tab every 1 day)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	3	PA, QL (4 tabs every 1 day)
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	3	PA, QL (2 tabs every 1 day)
IMBRUVICA CAP 70MG	4	PA, QL (1 cap every 1 day)
IMBRUVICA CAP 140MG	4	PA, QL (3 caps every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IMBRUVICA SUS 70MG/ML	4	PA, QL (6 mL every 1 day)
IMBRUVICA TAB 140MG	4	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 280MG	4	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 420MG	4	PA, QL (1 tab every 1 day)
INREBIC CAP 100MG	4	PA, QL (4 caps every 1 day)
JAKAFI TAB 5MG	4	PA, QL (2 tabs every 1 day)
JAKAFI TAB 10MG	4	PA, QL (2 tabs every 1 day)
JAKAFI TAB 15MG	4	PA, QL (2 tabs every 1 day)
JAKAFI TAB 20MG	4	PA, QL (2 tabs every 1 day)
JAKAFI TAB 25MG	4	PA, QL (2 tabs every 1 day)
JAYPIRCA TAB 50MG	4	PA, QL (1 tab every 1 day)
JAYPIRCA TAB 100MG	4	PA, QL (2 tabs every 1 day)
KISQALI TAB 200DOSE	4	PA, QL (21 tabs every 28 days)
KISQALI TAB 400DOSE	4	PA, QL (42 tabs every 28 days)
KISQALI TAB 600DOSE	4	PA, QL (63 tabs every 28 days)
KOSELUGO CAP 10MG	4	PA, QL (8 caps every 1 day)
KOSELUGO CAP 25MG	4	PA, QL (4 caps every 1 day)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	3	PA, QL (6 tabs every 1 day)
LORBRENA TAB 25MG	4	PA, QL (3 tabs every 1 day)
LORBRENA TAB 100MG	4	PA, QL (1 tab every 1 day)
LUMAKRAS TAB 120MG	4	PA, QL (8 tabs every 1 day)
LUMAKRAS TAB 320MG	4	PA, QL (3 tabs every 1 day)
LYNPARZA TAB 100MG	4	PA, QL (4 tabs every 1 day)
LYNPARZA TAB 150MG	4	PA, QL (4 tabs every 1 day)
MEKINIST SOL 0.05/ML	4	PA, QL (12 bottles per 28 days)
MEKINIST TAB 0.5MG	4	PA, QL (3 tabs every 1 day)
MEKINIST TAB 2MG	4	PA, QL (1 tab every 1 day)
MEKTOVI TAB 15MG	4	PA, QL (6 tabs every 1 day)
NERLYNX TAB 40MG	4	PA, QL (6 tabs every 1 day)
NEXAVAR TAB 200MG	4	PA, QL (4 tabs every 1 day)
NINLARO CAP 2.3MG	4	PA, QL (6 ea every 28 days)
NINLARO CAP 3MG	4	PA, QL (6 ea every 28 days)
NINLARO CAP 4MG	4	PA, QL (6 ea every 28 days)
<i>pazopanib hcl tab 200 mg (base equiv)</i>	3	PA, QL (4 tabs every 1 day)
PIQRAY 200MG TAB DOSE	4	PA, QL (1 tab every 1 day)
PIQRAY 250MG TAB DOSE	4	PA, QL (2 tabs every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PIQRAY 300MG TAB DOSE	4	PA, QL (2 tabs every 1 day)
RETEVMO CAP 40MG	0	PA, QL (2 caps every 1 day)
RETEVMO CAP 80MG	0	PA, QL (4 caps every 1 day)
RETEVMO TAB 40MG	0	PA
RETEVMO TAB 80MG	0	PA
RETEVMO TAB 120MG	0	PA
RETEVMO TAB 160MG	0	PA
ROZLYTREK CAP 100MG	4	PA, QL (1 cap every 1 day)
ROZLYTREK CAP 200MG	4	PA, QL (3 caps every 1 day)
ROZLYTREK PAK 50MG	4	PA, QL (12 packets every 1 day)
RUBRACA TAB 200MG	4	PA, QL (4 tabs every 1 day)
RUBRACA TAB 250MG	4	PA, QL (4 tabs every 1 day)
RUBRACA TAB 300MG	4	PA, QL (4 tabs every 1 day)
RYDAPT CAP 25MG	4	PA, QL (8 caps every 1 day)
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	3	PA, QL (4 tabs every 1 day)
SPRYCEL TAB 20MG	4	PA, QL (3 tabs every 1 day)
SPRYCEL TAB 50MG	4	PA, QL (1 tab every 1 day)
SPRYCEL TAB 70MG	4	PA, QL (1 tab every 1 day)
SPRYCEL TAB 80MG	4	PA, QL (1 tab every 1 day)
SPRYCEL TAB 100MG	4	PA, QL (1 tab every 1 day)
SPRYCEL TAB 140MG	4	PA, QL (1 tab every 1 day)
STIVARGA TAB 40MG	4	PA, QL (3 tabs every 1 day)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	3	PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 25 mg (base equivalent)</i>	3	PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	3	PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	3	PA, QL (1 cap every 1 day)
SUTENT CAP 12.5MG	4	PA, QL (1 cap every 1 day)
SUTENT CAP 25MG	4	PA, QL (1 cap every 1 day)
SUTENT CAP 37.5MG	4	PA, QL (1 cap every 1 day)
SUTENT CAP 50MG	4	PA, QL (1 cap every 1 day)
TABRECTA TAB 150MG	4	PA, QL (4 tabs every 1 day)
TABRECTA TAB 200MG	4	PA, QL (4 tabs every 1 day)
TAFINLAR CAP 50MG	4	PA, QL (4 caps every 1 day)
TAFINLAR CAP 75MG	4	PA, QL (4 caps every 1 day)
TAFINLAR TAB 10MG	4	PA, QL (30 tabs every 1 day)
TALZENNA CAP 0.1MG	4	PA, QL (1 cap every 1 day)
TALZENNA CAP 0.5MG	4	PA, QL (1 cap every 1 day)
TALZENNA CAP 0.25MG	4	PA, QL (3 caps every 1 day)
TALZENNA CAP 0.35MG	4	PA, QL (1 cap every 1 day)
TALZENNA CAP 0.75MG	4	PA, QL (1 cap every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TALZENNA CAP 1MG	4	PA, QL (1 cap every 1 day)
TASIGNA CAP 50MG	4	PA, QL (4 caps every 1 day)
TASIGNA CAP 150MG	4	PA, QL (4 caps every 1 day)
TASIGNA CAP 200MG	4	PA, QL (4 caps every 1 day)
TYKERB TAB 250MG	4	PA, QL (6 tabs every 1 day)
VERZENIO TAB 50MG	4	PA, QL (2 tabs every 1 day)
VERZENIO TAB 100MG	4	PA, QL (2 tabs every 1 day)
VERZENIO TAB 150MG	4	PA, QL (2 tabs every 1 day)
VERZENIO TAB 200MG	4	PA, QL (2 tabs every 1 day)
VITRAKVI CAP 25MG	4	PA, QL (6 caps every 1 day)
VITRAKVI CAP 100MG	4	PA, QL (2 caps every 1 day)
VITRAKVI SOL 20MG/ML	4	PA, QL (10 mL every 1 day)
VORANIGO TAB 10MG	4	PA
VORANIGO TAB 40MG	4	PA
VOTRIENT TAB 200MG	4	PA, QL (4 tabs every 1 day)
XALKORI CAP 20MG	4	PA, QL (4 caps every 1 day)
XALKORI CAP 50MG	4	PA, QL (4 caps every 1 day)
XALKORI CAP 150MG	4	PA, QL (6 caps every 1 day)
XALKORI CAP 200MG	4	PA, QL (4 caps every 1 day)
XALKORI CAP 250MG	4	PA, QL (4 caps every 1 day)
XOSPATA TAB 40MG	4	PA, QL (3 tabs every 1 day)
ZEJULA TAB 100MG	4	PA, QL (1 tab every 1 day)
ZEJULA TAB 200MG	4	PA, QL (1 tab every 1 day)
ZEJULA TAB 300MG	4	PA, QL (1 tab every 1 day)
ZELBORAF TAB 240MG	4	PA, QL (8 tabs every 1 day)
ZOLINZA CAP 100MG	4	PA, QL (4 caps every 1 day)
ZYDELIG TAB 100MG	4	PA, QL (2 tabs every 1 day)
ZYDELIG TAB 150MG	4	PA, QL (2 tabs every 1 day)
ZYKADIA TAB 150MG	4	PA, QL (3 tabs every 1 day)
<b>ANTINEOPLASTICS MISC.</b>		
ACTIMMUNE INJ 2MU/0.5	4	PA
<i>bexarotene cap 75 mg</i>	3	PA
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A INJ 10MU	4	PA
MATULANE CAP 50MG	4	
TARGRETIN CAP 75MG	4	PA
<i>tretinoin cap 10 mg</i>	1	
<b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b>		
<i>leucovorin calcium tab 5 mg</i>	1	
<i>leucovorin calcium tab 10 mg</i>	1	
<i>leucovorin calcium tab 15 mg</i>	1	
<i>leucovorin calcium tab 25 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>MITOTIC INHIBITORS</b>		
<i>etoposide cap 50 mg</i>	1	
<b>TOPOISOMERASE I INHIBITORS</b>		
HYCAMTIN CAP 0.25MG	4	PA
HYCAMTIN CAP 1MG	4	PA
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS</b>		
<b>ANTIPARKINSON ADJUNCTIVE THERAPY</b>		
<i>carbidopa tab 25 mg</i>	1	
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<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	
<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	
<b>ANTIPARKINSON COMT INHIBITORS</b>		
<i>entacapone tab 200 mg</i>	1	
<i>tolcapone tab 100 mg</i>	1	
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<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	
APOKYN INJ 10MG/ML	4	PA, QL (20 cartridges every 28 days)
<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 &amp; levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
DHIVY TAB 25-100MG	2	
INBRIJA CAP 42MG	4	PA, QL (10 caps every 1 day)
KYNMOBI MIS 10MG	4	PA, QL (5 films every 1 day)
KYNMOBI MIS 15MG	4	PA, QL (5 films every 1 day)
KYNMOBI MIS 20MG	4	PA, QL (5 films every 1 day)
KYNMOBI MIS 25MG	4	PA, QL (5 films every 1 day)
KYNMOBI MIS 30MG	4	PA, QL (5 films every 1 day)
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
<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	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS</b>		
<b>ANTIMANIC AGENTS</b>		
<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	
<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	
<b>ANTIPSYCHOTICS - MISC.</b>		
<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	
NUPLAZID CAP 34MG	4	PA, QL (1 cap every 1 day)
NUPLAZID TAB 10MG	4	PA, QL (1 tab every 1 day)
VRAYLAR CAP 1.5-3MG	2	
VRAYLAR CAP 1.5MG	2	
VRAYLAR CAP 3MG	2	
VRAYLAR CAP 4.5MG	2	
VRAYLAR CAP 6MG	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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	
<b>BENZISOXAZOLES</b>		
FANAPT TAB 1MG	2	
FANAPT TAB 2MG	2	
FANAPT TAB 4MG	2	
FANAPT TAB 6MG	2	
FANAPT TAB 8MG	2	
FANAPT TAB 10MG	2	
FANAPT TAB 12MG	2	
<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	
<b>BUTYROPHENONES</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>DIBENZAPINES</b>		
<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	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
<b>DIHYDROINDOLONES</b>		
<i>molindone hcl tab 5 mg</i>	1	
<i>molindone hcl tab 10 mg</i>	1	
<i>molindone hcl tab 25 mg</i>	1	
<b>PHENOTHIAZINES</b>		
<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	
<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	
<b>QUINOLINONE DERIVATIVES</b>		
<i>aripiprazole oral solution 1 mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>THIOXANTHENES</b>		
<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	
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<i>formaldehyde solution 10%</i>	1	
<i>hydrogen peroxide soln 30%</i>	1	
<b>ANTIVIRALS</b>		
<b>ANTIRETROVIRALS</b>		
<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	PA, QL (1 tab every 1 day); Exception process available for \$0 copay when medically necessary for pre-exposure prophylaxis

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DESCOVY TAB 200/25MG	2	PA, QL (1 tab every 1 day); Exception process available for \$0 copay when medically necessary 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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<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)
NORVIR SOL 80MG/ML	2	QL (16 mL 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)
SYMTUZA 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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<b>ANTIVIRAL COMBINATIONS</b>		
PAXLOVID TAB 150-100	2	QL (40 tabs every 30 days)
PAXLOVID TAB 300-100	2	QL (60 tabs every 30 days)
<b>CMV AGENTS</b>		
PREVYMIS TAB 240MG	2	PA, QL (1 ea every 1 day)
PREVYMIS TAB 480MG	2	PA, QL (1 ea every 1 day)
<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)
<b>HEPATITIS AGENTS</b>		
<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	
LEDIP-SOFOSB TAB 90-400MG	4	PA, QL (1 tab every 1 day); Genotypes 1, 4, 5, 6
MAVYRET PAK 50-20MG	4	PA, QL (5 packets every 1 day)
MAVYRET TAB 100-40MG	4	PA, QL (3 tabs every 1 day)
PEGASYS INJ	4	PA
PEGASYS INJ 180MCG/M	4	PA
<i>ribavirin cap 200 mg</i>	3	PA
<i>ribavirin tab 200 mg</i>	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SOFOS/VELPAT TAB 400-100	4	PA, QL (1 tab every 1 day); Genotypes 1, 2, 3, 4, 5, 6
SOVALDI PAK 150MG	4	PA, QL (1 packet every 1 day)
SOVALDI PAK 200MG	4	PA, QL (2 packets every 1 day)
SOVALDI TAB 200MG	4	PA, QL (1 tab every 1 day)
SOVALDI TAB 400MG	4	PA, QL (1 tab every 1 day)
VEMLIDY TAB 25MG	2	QL (1 tab every 1 day)
VIEKIRA PAK TAB	4	PA, QL (4 tabs 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)
ZEPATIER TAB 50-100MG	4	PA, QL (1 tab every 1 day)

**HERPES AGENTS**

<i>acyclovir cap 200 mg</i>	1	
<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	
SITAVIG TAB 50MG	2	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
VALTREX TAB 1GM	2	
VALTREX TAB 500MG	2	
ZOVIRAX SUS 200/5ML	2	

**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)



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rimantadine hydrochloride tab 100 mg</i>	1	
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO CAP 200MG	2	QL (40 caps every 30 days)
TPOXX CAP 200MG	2	
<b>BETA BLOCKERS</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<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	
<b>BETA BLOCKERS CARDIO-SELECTIVE</b>		
<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	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>BETA BLOCKERS NON-SELECTIVE</b>		
<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/af) tab 80 mg</i>	1	
<i>sotalol hcl (afib/af) tab 120 mg</i>	1	
<i>sotalol hcl (afib/af) 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	
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	
<b>CALCIUM CHANNEL BLOCKERS</b>		
<b>CALCIUM CHANNEL BLOCKERS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</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	
<b>CARDIOTONICS</b>		
<b>CARDIAC GLYCOSIDES</b>		
<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	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
<b>CARDIOVASCULAR AGENTS - MISC.</b>		
<b>CARDIAC MYOSIN INHIBITORS</b>		
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)
<b>CARDIOVASCULAR AGENTS MISC. - COMBINATIONS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
OPSYNVI TAB 10-20MG	4	PA, QL (1 ea every 1 day)
OPSYNVI TAB 10-40MG	4	PA, QL (1 ea every 1 day)
<b>CARDIOVASCULAR ANTI-INFLAMMATORY/IMMUNE MODULATORS</b>		
LODOCO TAB 0.5MG	2	PA
<b>CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS</b>		
INPEFA TAB 200MG	2	PA
INPEFA TAB 400MG	2	PA
<b>IMPOTENCE AGENTS</b>		
CIALIS TAB 2.5MG	2	ST, QL (1 tab every 1 day)
CIALIS TAB 5MG	2	ST, QL (1 tab every 1 day)
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>varденаfil hcl orally disintegrating tab 10 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>varденаfil hcl tab 2.5 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>varденаfil hcl tab 5 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>varденаfil hcl tab 10 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<i>varденаfil hcl tab 20 mg</i>	1	QL (6 tabs every 30 days); Coverage is subject to your plan/benefits
<b>PROSTAGLANDIN VASODILATORS</b>		
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 DPI POW 16-32-48	4	PA, QL (9 ea every 1 day)
TYVASO DPI POW 16-32MCG	4	PA, QL (7 ea every 1 day)
TYVASO DPI POW 16MCG	4	PA, QL (4 ea every 1 day)
TYVASO DPI POW 32-48MCG	4	PA, QL (8 ea every 1 day)
TYVASO DPI POW 32MCG	4	PA, QL (4 ea every 1 day)
TYVASO DPI POW 48MCG	4	PA, QL (4 ea every 1 day)
TYVASO DPI POW 64MCG	4	PA, QL (4 ea every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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)
VENTAVIS SOL 10MCG/ML	4	PA, QL (9 mL every 1 day)
VENTAVIS SOL 20MCG/ML	4	PA, QL (9 mL every 1 day)
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>		
<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)
LETAIRIS TAB 5MG	4	PA, QL (1 tab every 1 day)
LETAIRIS TAB 10MG	4	PA, QL (1 tab every 1 day)
OPSUMIT TAB 10MG	4	PA, QL (1 tab every 1 day)
TRACLEER TAB 32MG	4	PA, QL (4 ea every 1 day)
TRACLEER TAB 62.5MG	4	PA, QL (2 tabs every 1 day)
TRACLEER TAB 125MG	4	PA, QL (2 tabs every 1 day)
<b>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</b>		
ADCIRCA TAB 20MG	4	PA, QL (2 tabs every 1 day)
LIQREV SUS 10MG/ML	4	PA, QL (732 mL every 30 days)
REVATIO SUS 10MG/ML	4	PA, QL (784 mL every 30 days)
REVATIO TAB 20MG	4	PA, QL (12 tabs every 1 day)
<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)
TADLIQ SUS 20MG/5ML	4	PA, QL (10 mL every 1 day)
<b>PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST</b>		
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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
UPTRAVI TAB 1400MCG	4	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1600MCG	4	PA, QL (2 tabs every 1 day)
<b>PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR</b>		
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)
<b>SINUS NODE INHIBITORS</b>		
CORLANOR SOL 5MG/5ML	2	PA
CORLANOR TAB 5MG	2	PA
CORLANOR TAB 7.5MG	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
<b>TRANSTHYRETIN STABILIZERS</b>		
VYNDAMAX CAP 61MG	4	PA, QL (1 ea every 1 day)
VYNDAQEL CAP 20MG	4	PA, QL (4 ea every 1 day)
<b>VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
<b>CEPHALOSPORINS</b>		
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
<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	
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
<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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<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	
<b>CONTRACEPTIVES</b>		
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
<i>desogest-eth estrad &amp; 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 &amp; 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 &amp; ethinyl estradiol tab 1 mg-35 mcg</i>	0	
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i>	0	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i>	0	
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	0	
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	0	
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levonorgestrel &amp; 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	
<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 &amp; ethinyl estradiol tab 0.4 mg-35 mcg</i>	0	
<i>norethindrone &amp; ethinyl estradiol tab 0.5 mg-35 mcg</i>	0	
<i>norethindrone &amp; ethinyl estradiol tab 1 mg-35 mcg</i>	0	
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	
<i>norethindrone &amp; 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 &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	0	
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	
<i>norethindrone ace &amp; 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 &amp; 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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	
<i>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg</i>	0	
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>		
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	0	
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>		
ANNOVERA MIS	0	QL (1 ring every 300 days)
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	0	QL (13 ea every 300 days)
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	0	QL (13 rings every 300 days)
<b>EMERGENCY CONTRACEPTIVES</b>		
ELLA TAB 30MG	0	
ELLA TAB 30MG	2	
<i>levonorgestrel tab 1.5 mg</i>	0	OTC
<b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>		
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	0	QL (4 injections every 300 days)
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	0	QL (4 injections every 300 days)
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>norethindrone tab 0.35 mg</i>	0	
OPILL TAB 0.075MG	0	OTC
<b>CORTICOSTEROIDS</b>		
<b>GLUCOCORTICOSTEROIDS</b>		
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	1	
<i>deflazacort susp 22.75 mg/ml</i>	3	PA, QL (1.8 mL every 1 day)
<i>deflazacort tab 6 mg</i>	3	PA, QL (2 tabs every 1 day)
<i>deflazacort tab 18 mg</i>	3	PA, QL (1 tab every 1 day)
<i>deflazacort tab 30 mg</i>	3	PA, QL (1 tab every 1 day)
<i>deflazacort tab 36 mg</i>	3	PA, QL (1 tab every 1 day)
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
dexamethasone tab 2 mg	1	
dexamethasone tab 4 mg	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (27)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (49)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	1	
<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 phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</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	
PREDNISON CON 5MG/ML	2	
<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	
RAYOS TAB 1MG	2	
RAYOS TAB 2MG	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RAYOS TAB 5MG	2	
<b>MINERALOCORTICOIDS</b>		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
<b>COUGH/COLD/ALLERGY</b>		
<b>ANTITUSSIVES</b>		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	1	
<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)
<b>COUGH/COLD/ALLERGY COMBINATIONS</b>		
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	QL (60 mL every 1 day), OTC
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	QL (10 mL every 1 day)
<i>promethazine &amp; 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>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	QL (30 mL every 1 day)
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<b>MISC. RESPIRATORY INHALANTS</b>		
<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	
<b>MUCOLYTICS</b>		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
<b>DERMATOLOGICALS</b>		
<b>ACNE PRODUCTS</b>		
ACANYA GEL 1.2-2.5%	2	QL (50 gm every 25 days)
<i>adapalene cream 0.1%</i>	1	PA
<i>adapalene gel 0.1%</i>	1	PA
<i>adapalene gel 0.3%</i>	1	PA
ADAPALENE SOL 0.1%	2	PA

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	PA
ALTRENO LOT 0.05%	2	
ATRALIN GEL 0.05%	2	
BENZAMYCIN GEL 5-3%	2	QL (47 gm every 25 days)
<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	
CABTREO GEL	2	QL (50 gm every 25 days)
<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%</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)
<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	
DIFFERIN CRE 0.1%	2	PA
DIFFERIN GEL 0.3%	2	PA
DIFFERIN LOT 0.1%	2	PA
EPIDUO FORTE GEL 0.3-2.5%	2	PA
EPIDUO GEL 0.1-2.5%	2	PA
<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	
ONEXTON GEL 1.2-3.75	2	QL (50 gm every 25 days)
RETIN-A CRE 0.1%	2	
RETIN-A CRE 0.05%	2	
RETIN-A CRE 0.025%	2	
RETIN-A GEL 0.01%	2	
RETIN-A GEL 0.025%	2	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RETIN-A MICR GEL 0.1%	2	
RETIN-A MICR GEL 0.1%PUMP	2	
RETIN-A MICR GEL 0.04%	2	
RETIN-A MICR GEL 0.04%PMP	2	
RETIN-A MICR GEL 0.06%	2	
RETIN-A MICR GEL 0.08%	2	
<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
<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	
TWYNEO CRE 0.1-3%	2	
VELTIN GEL	2	
WINLEVI CRE 1%	2	PA
ZIANA GEL	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>		
<i>diclofenac epolamine patch 1.3%</i>	1	
<i>diclofenac sodium soln 1.5%</i>	1	PA, QL (150 mL every 21 days)
<b>ANTIBIOTICS - TOPICAL</b>		
<i>CENTANY OIN 2%</i>	2	QL (30 gm every 25 days)
<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)
<i>XEPI CRE 1%</i>	2	PA
<b>ANTIFUNGALS - TOPICAL</b>		
<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)
<b>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL</b>		
<i>bexarotene gel 1%</i>	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA
<i>fluorouracil cream 0.5%</i>	1	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
TARGRETIN GEL 1%	4	PA
<b>ANTIPRURITICS - TOPICAL</b>		
<i>doxepin hcl cream 5%</i>	1	ST, QL (45 gm every 25 days)
<b>ANTIPSORIATICS</b>		
<i>acitretin cap 10 mg</i>	1	
<i>acitretin cap 17.5 mg</i>	1	
<i>acitretin cap 25 mg</i>	1	
BIMZELX INJ 160MG/ML	4	PA, QL (2 pens every 42 days)
BIMZELX INJ 160MG/ML	4	PA, QL (2 syringes every 42 days)
CALCIPOTRIEN AER 0.005%	2	PA
<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 Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis and Psoriatic Arthritis, ; Quantity Limits are consistent with maximum FDA approved dosing limits.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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	
SILIQ INJ 210/1.5	4	PA, QL (2 syr every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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.
SORILUX AER 0.005%	2	PA
SOTYKTU TAB 6MG	4	PA, QL (1 tab every 1 day)
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
TALTZ INJ 40/0.5ML	4	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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 gel 0.1%</i>	1	
<i>tazarotene gel 0.05%</i>	1	
TREMFYA INJ 100MG/ML	4	PA, QL (1 pen every 56 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 56 days); Preferred agent for Psoriasis, Psoriatic Arthritis, Ulcerative Colitis; Quantity Limits are consistent with maximum FDA approved dosing limits.
VECTICAL OIN 3MCG/GM	2	PA
VTAMA CRE 1%	2	PA
<b>ANTISEBORRHEIC PRODUCTS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulfacetamide sodium shampoo 10%</i>	1	
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir oint 5%</i>	1	
<i>penciclovir cream 1%</i>	1	
<b>BURN PRODUCTS</b>		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
<b>CORTICOSTEROIDS - TOPICAL</b>		
<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 cream 0.1%</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 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)

CareFirst Formulary Chart, 4T Effective 01/01/2025 1 QL (120 mL every 25 days)  
~~desonide lotion 0.05%~~

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>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 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	
<i>prednicarbate oint 0.1%</i>	1	QL (120 gm every 25 days)
TACLONEX OIN	2	PA
TACLONEX SUS	2	PA
<i>triamcinolone acetonide cream 0.1%</i>	1	QL (120 gm every 25 days)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
WYNZORA CRE	2	PA
<b>ECZEMA AGENTS</b>		
ADBRY INJ 150MG/ML	4	PA, QL (4 syringes every 28 days)
ADBRY INJ 300/2ML	4	PA, QL (2 pens every 28 days)
CIBINQO TAB 50MG	4	PA, QL (1 tab every 1 day)
CIBINQO TAB 100MG	4	PA, QL (1 tab every 1 day)
CIBINQO TAB 200MG	4	PA, QL (1 tab every 1 day)
DUPIXENT INJ 100/0.67	4	PA, QL (2 syringes every 28 days)
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)
<b>EMOLLIENT/KERATOLYTIC AGENTS</b>		
<i>urea cream 39%</i>	1	
<i>urea cream 41%</i>	1	
<i>urea cream 45%</i>	1	
<i>urea cream 47%</i>	1	
<b>ENZYMES - TOPICAL</b>		
SANTYL OIN 250/GM	2	PA
<b>HAIR GROWTH AGENTS</b>		
<i>finasteride tab 1 mg</i>	1	PA
LITFULO CAP 50MG	4	PA, QL (1 cap every 1 day)
PROPECIA TAB 1MG	2	PA
<b>IMMUNOMODULATING AGENTS - SYSTEMIC</b>		
NEMLUVIO INJ 30MG	4	PA
<b>IMMUNOMODULATING AGENTS - TOPICAL</b>		
<i>imiquimod cream 3.75%</i>	1	
<i>imiquimod cream 5%</i>	1	QL (21 ea every 25 days)
<b>IMMUNOSUPPRESSIVE AGENTS - TOPICAL</b>		
<i>pimecrolimus cream 1%</i>	1	ST

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tacrolimus oint 0.1%</i>	1	ST
<i>tacrolimus oint 0.03%</i>	1	ST
<b>KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS</b>		
<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	
<b>LOCAL ANESTHETICS - TOPICAL</b>		
<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)
<b>ROSACEA AGENTS</b>		
<i>azelaic acid gel 15%</i>	1	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	1	PA
<i>ivermectin cream 1%</i>	1	PA
METROCREAM CRE 0.75%	2	QL (60 gm every 25 days)
METROGEL GEL 1%	2	QL (60 gm every 25 days)
METROLOTION LOT 0.75%	2	QL (60 mL every 25 days)
<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
<b>SCABICIDES &amp; PEDICULICIDES</b>		

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	1	
<b>TAR PRODUCTS</b>		
<i>coal tar soln 20%</i>	1	
<b>WOUND CARE PRODUCTS</b>		
REGRANEX GEL 0.01%	2	PA
<b>DIAGNOSTIC PRODUCTS</b>		
<b>DIAGNOSTIC TESTS</b>		
ACCU-CHEK TES AVIVA PL	2	QL (150 strips every 30 days), OTC
ACCU-CHEK TES GUIDE	2	QL (150 strips every 30 days), OTC
ACCU-CHEK TES SMART	2	QL (150 strips every 30 days), OTC
ACCUTREND TES GLUCOSE	2	QL (150 strips every 30 days), OTC
ADVANCE TES INTUITIO	2	QL (150 strips every 30 days), OTC
ADVANCE TES MICRO-DW	2	QL (150 strips every 30 days), OTC
ADVOCATE TES	2	QL (150 strips every 30 days), OTC
ADVOCATE TES REDI-COD	2	QL (150 strips every 30 days), OTC
ADVOCATE TES REDICODE	2	QL (150 strips every 30 days), OTC
AGAMATRIX TES AMP	2	QL (150 strips every 30 days), OTC
AGAMATRIX TES JAZZ	2	QL (150 strips every 30 days), OTC
AGAMATRIX TES KEYNOTE	2	QL (150 strips every 30 days), OTC
AGAMATRIX TES PRESTO	2	QL (150 strips every 30 days), OTC
ASSURE 3 TES	2	QL (150 strips every 30 days), OTC
ASSURE 4 TES	2	QL (150 strips every 30 days), OTC
ASSURE II TES	2	QL (150 strips every 30 days), OTC
ASSURE II TES CHECK	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ASSURE PRISM TES MULTI	2	QL (150 strips every 30 days), OTC
ASSURE PRO TES	2	QL (150 strips every 30 days), OTC
ASSURE TES PLATINUM	2	QL (150 strips every 30 days), OTC
AUTOCODE TES BLD GLUC	2	QL (150 strips every 30 days), OTC
BIOTEL CARE TES STRIPS	2	QL (150 strips every 30 days), OTC
BLOOD GLUCOS TES	2	QL (150 strips every 30 days), OTC
BLOOD GLUCOS TES 333	2	QL (150 strips every 30 days), OTC
BLOOD GLUCOS TES LE1	2	QL (150 strips every 30 days), OTC
BLOOD GLUCOS TES PREMIUM	2	QL (150 strips every 30 days), OTC
BLOOD GLUCOS TES STRIPS	2	QL (150 strips every 30 days), OTC
BLULINK TES STRIPS	2	QL (150 strips every 30 days), OTC
CARESENS N TES	2	QL (150 strips every 30 days), OTC
CARESENS N TES GLUCOSE	2	QL (150 strips every 30 days), OTC
CARETOUCH MIS TST STRP	2	QL (150 strips every 30 days), OTC
CLEVER CHEK TES	2	QL (150 strips every 30 days), OTC
CLEVER CHEK TES AUTO CD	2	QL (150 strips every 30 days), OTC
CLEVER CHEK TES TALK	2	QL (150 strips every 30 days), OTC
CLEVER CHEK TES VOICE	2	QL (150 strips every 30 days), OTC
CLEVER CHOIC TES MICRO	2	QL (150 strips every 30 days), OTC
CLEVR CHOICE TES AUTO-CD	2	QL (150 strips every 30 days), OTC
CLEVR CHOICE TES NOCODE	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CONFIRM/MICR TES GLUCOSE	2	QL (150 strips every 30 days), OTC
CONTOUR PLUS TES BLD GLUC	2	QL (150 strips every 30 days), OTC
CONTOUR TES BLD GLUC	2	QL (150 strips every 30 days), OTC
CONTOUR TES NEXT	2	QL (150 strips every 30 days), OTC
COOL BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
CVS ADVANCED TES GLUCOSE	2	QL (150 strips every 30 days), OTC
CVS GLUCOSE TES TEST STR	2	QL (150 strips every 30 days), OTC
CVS TRUE MET TES GLUCOSE	2	QL (150 strips every 30 days), OTC
D-CARE BLOOD TES GLUCOSE	2	QL (150 strips every 30 days)
DIATHRIVE MIS TEST STR	2	QL (150 strips every 30 days), OTC
DIATHRIVE+ MIS TEST STR	2	QL (150 strips every 30 days), OTC
DIATRUE PLUS TES STRIPS	2	QL (150 strips every 30 days), OTC
DUO-CARE TES	2	QL (150 strips every 30 days), OTC
EASY MAX GLC TES STRIP	2	QL (150 strips every 30 days), OTC
EASY PLUS II TES BLD GLUC	2	QL (150 strips every 30 days), OTC
EASY STEP TES	2	QL (150 strips every 30 days), OTC
EASY TALK TES BLD GLUC	2	QL (150 strips every 30 days), OTC
EASY TALK TES PLUS II	2	QL (150 strips every 30 days), OTC
EASY TOUCH TES GLUCOSE	2	QL (150 strips every 30 days), OTC
EASY TOUCH TES HEALTHPR	2	QL (150 strips every 30 days), OTC
EASY TOUCH TES STRIPS	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EASY TRAK II TES BLD GLUC	2	QL (150 strips every 30 days), OTC
EASY TRAK TES BLD GLUC	2	QL (150 strips every 30 days), OTC
EASYGLUCO TES	2	QL (150 strips every 30 days), OTC
EASYMAX 15 TES	2	QL (150 strips every 30 days), OTC
EASYMAX TES	2	QL (150 strips every 30 days), OTC
EASYPRO PLUS TES	2	QL (150 strips every 30 days), OTC
EASYPRO TES BLD GLUC	2	QL (150 strips every 30 days), OTC
ELEMENT TES	2	QL (150 strips every 30 days), OTC
ELEMNT COMPA TES STRIPS	2	QL (150 strips every 30 days), OTC
EMBRACE EVO TES	2	QL (150 strips every 30 days), OTC
EMBRACE PRO TES	2	QL (150 strips every 30 days), OTC
EMBRACE TALK TES STRIPS	2	QL (150 strips every 30 days), OTC
EMBRACE TES BLD GLUC	2	QL (150 strips every 30 days), OTC
EMBRACE WAVE TES STRIPS	2	QL (150 strips every 30 days), OTC
EVOLUTION TES AUTOCODE	2	QL (150 strips every 30 days), OTC
FIFTY50 GLUC TES 2.0	2	QL (150 strips every 30 days), OTC
FORA 6 MIS CONNECT	2	QL (150 strips every 30 days), OTC
FORA 6CON TES GTEL	2	QL (150 strips every 30 days), OTC
FORA ADVANCE TES PRO	2	QL (150 strips every 30 days), OTC
FORA BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
FORA D15G TES BLD GLUC	2	QL (150 strips every 30 days), OTC



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FORA D20 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA D40/G31 TES GLUCOSE	2	QL (150 strips every 30 days), OTC
FORA G20 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA G30/V10 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA GD20 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA GD50 TES	2	QL (150 strips every 30 days), OTC
FORA GTEL TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA TN'G TES TN'G VOI	2	QL (150 strips every 30 days), OTC
FORA V10 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA V12 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA V20 TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORA V30A TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORACARE TES GD40	2	QL (150 strips every 30 days), OTC
FORACARE TES PREM V10	2	QL (150 strips every 30 days), OTC
FORACARE TES TST N GO	2	QL (150 strips every 30 days), OTC
FORTISCARE TES BLD GLUC	2	QL (150 strips every 30 days), OTC
FORTISCARE TES G1 BLOOD	2	QL (150 strips every 30 days), OTC
FREESTYLE TES	2	QL (150 strips every 30 days), OTC
FREESTYLE TES INSULINX	2	QL (150 strips every 30 days), OTC
FREESTYLE TES LITE	2	QL (150 strips every 30 days), OTC
FREESTYLE TES PREC NEO	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GE100 BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
GENULTIMATE TES	2	QL (150 strips every 30 days), OTC
GHT TEST TES STRIPS	2	QL (150 strips every 30 days), OTC
GLUCO PERFEC TES 3	2	QL (150 strips every 30 days), OTC
GLUCOCARD 01 TES PLUS	2	QL (150 strips every 30 days), OTC
GLUCOCARD 01 TES SENSOR	2	QL (150 strips every 30 days), OTC
GLUCOCARD TES EXPRESSI	2	QL (150 strips every 30 days), OTC
GLUCOCARD TES SHINE	2	QL (150 strips every 30 days), OTC
GLUCOCARD TES VITAL	2	QL (150 strips every 30 days), OTC
GLUCOCARD TES X-SENSOR	2	QL (150 strips every 30 days), OTC
GLUCOCOM TES	2	QL (150 strips every 30 days), OTC
GLUCONAVII TES STRIPS	2	QL (150 strips every 30 days), OTC
GLUCOSE TES STRIPS	2	QL (150 strips every 30 days), OTC
GNP TRU METR TES STRIPS	2	QL (150 strips every 30 days), OTC
GNP TRUETRAC TES SMRT SYS	2	QL (150 strips every 30 days), OTC
GOJJI BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
GOJJI STRIPS MIS W/LANCET	2	QL (150 strips every 30 days), OTC
HW EMBRACE TES PRO	2	QL (150 strips every 30 days), OTC
HW EMBRACE TES STRIPS	2	QL (150 strips every 30 days), OTC
IGLUCOSE TES	2	QL (150 strips every 30 days), OTC
IN TOUCH TES BLOOD	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
INFINITY TES BLD GLUC	2	QL (150 strips every 30 days), OTC
INFINITY TES VOICE	2	QL (150 strips every 30 days), OTC
KROGER BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
LIBERTY NEXT TES GEN	2	QL (150 strips every 30 days), OTC
LIBERTY TES	2	QL (150 strips every 30 days), OTC
MEIJER BLOOD TES GLUCOSE	2	QL (150 strips every 30 days), OTC
MEIJER TES TRUETEST	2	QL (150 strips every 30 days), OTC
MEIJER TES TRUETRAC	2	QL (150 strips every 30 days), OTC
MICRODOT TES	2	QL (150 strips every 30 days), OTC
MICRODOT TES XTRA	2	QL (150 strips every 30 days), OTC
MM BLULINK TES STRIPS	2	QL (150 strips every 30 days), OTC
MYGLUCOHEALT TES BLD GLUC	2	QL (150 strips every 30 days), OTC
NEUTEK 2TEK TES STRIPS	2	QL (150 strips every 30 days), OTC
NO CODING TES BLD GLUC	2	QL (150 strips every 30 days), OTC
NOVA MAX TES GLUCOSE	2	QL (150 strips every 30 days), OTC
ON CALL TES EXPRESS	2	QL (150 strips every 30 days), OTC
ONE DROP TES BLD GLUC	2	QL (150 strips every 30 days), OTC
ONETOUCH TES ULTRA	2	QL (150 strips every 30 days), OTC
ONETOUCH TES VERIO	2	QL (150 strips every 30 days), OTC
OPTIUMEZ TES	2	QL (150 strips every 30 days), OTC
PIP BLOOD TES	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
POCKETCHEM TES EZ	2	QL (150 strips every 30 days), OTC
PRECISION TES XTRA	2	QL (150 strips every 30 days), OTC
PREMIUM BLOO MIS GLUCOSE	2	QL (150 strips every 30 days), OTC
PRO VOICE TES V8/V9	2	QL (150 strips every 30 days), OTC
PRODIGY NO TES CODING	2	QL (150 strips every 30 days), OTC
PTS PANELS TES EGLU	2	QL (150 strips every 30 days), OTC
QUICKTEK TES	2	QL (150 strips every 30 days), OTC
QUINTET AC TES BLD GLUC	2	QL (150 strips every 30 days), OTC
QUINTET TES BLD GLUC	2	QL (150 strips every 30 days), OTC
REFUAH PLUS TES BLD GLUC	2	QL (150 strips every 30 days), OTC
RELION PREMI TES GLUCOSE	2	QL (150 strips every 30 days), OTC
RELION PRIME TES	2	QL (150 strips every 30 days), OTC
RELION PRIME TES GLUCOSE	2	QL (150 strips every 30 days), OTC
RELION TES ULTIMA	2	QL (150 strips every 30 days), OTC
RELION TRUE TES METRIX	2	QL (150 strips every 30 days), OTC
RIGHTEST TES GS100	2	QL (150 strips every 30 days), OTC
RIGHTEST TES GS300	2	QL (150 strips every 30 days), OTC
RIGHTEST TES GS550	2	QL (150 strips every 30 days), OTC
RIGHTEST TES GT333	2	QL (150 strips every 30 days), OTC
SMART SENSE TES TEST	2	QL (150 strips every 30 days), OTC
SMARTEST TES BLD GLUC	2	QL (150 strips every 30 days), OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SOLUS V2 TES AUDIBLE	2	QL (150 strips every 30 days), OTC
SUPREME TES	2	QL (150 strips every 30 days), OTC
TRU METRIX TES STRIPS	2	QL (150 strips every 30 days), OTC
TRUE FOCUS MIS BLOOD	2	QL (150 strips every 30 days), OTC
TRUE METRIX TES GLUCOSE	2	QL (150 strips every 30 days), OTC
TRUETEST TES	2	QL (150 strips every 30 days), OTC
TRUETRACK TES	2	QL (150 strips every 30 days), OTC
TRUETRACK TES BLD GLUC	2	QL (150 strips every 30 days), OTC
TRUETRACK TES STRIPS	2	QL (150 strips every 30 days), OTC
UNISTRIP1 TES GENERIC	2	QL (150 strips every 30 days), OTC
VERASENS TES	2	QL (150 strips every 30 days), OTC
VIVAGUARD TES INO	2	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	
PANCREAZE CAP 2600UNIT	2	PA
PANCREAZE CAP 4200UNIT	2	PA
PANCREAZE CAP 10500UNT	2	PA
PANCREAZE CAP 16800UNT	2	PA
PANCREAZE CAP 21000UNT	2	PA
PERTZYE CAP 4000UNIT	2	PA
PERTZYE CAP 8000UNIT	2	PA
PERTZYE CAP 16000U	2	PA
PERTZYE CAP 24000U	2	PA
SUCRAID SOL 8500/ML	4	PA
VIOKACE TAB 10440	2	
VIOKACE TAB 20880	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNIT	2	
ZENPEP CAP 15000UNIT	2	
ZENPEP CAP 20000UNIT	2	
ZENPEP CAP 25000UNIT	2	
ZENPEP CAP 40000UNIT	2	
ZENPEP CAP 60000UNIT	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 &amp; hydrochlorothiazide tab 5-50 mg</i>	1	
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	

**LOOP DIURETICS**

<i>bumetanide tab 0.5 mg</i>	1	
<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	
SOAANZ TAB 20MG	2	
<i>toremide tab 5 mg</i>	1	
<i>toremide tab 10 mg</i>	1	
<i>toremide tab 20 mg</i>	1	
<i>toremide tab 100 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>POTASSIUM SPARING DIURETICS</b>		
<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	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<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	
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>BONE DENSITY REGULATORS</b>		
<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	
FORTEO INJ 600/2.4	4	PA, QL (1 pen every 28 days)
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	
NATPARA INJ 25MCG	4	PA, QL (2 cartridges every 28 days)
NATPARA INJ 50MCG	4	PA, QL (2 cartridges every 28 days)
NATPARA INJ 75MCG	4	PA, QL (2 cartridges every 28 days)
NATPARA INJ 100MCG	4	PA, QL (2 cartridges every 28 days)
<i>risedronate sodium tab 5 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
TERIPARATIDE INJ 620/2.48	4	PA, QL (1 pen every 28 days)
<i>teriparatide soln pen-inj 600 mcg/2.4ml</i>	3	PA, QL (1 pen every 28 days)
TYMLOS INJ	4	PA, QL (1 pen every 28 days)
<b>CORTICOTROPIN</b>		
ACTHAR INJ GEL	4	PA
<b>FERTILITY REGULATORS</b>		
CHOR GONADOT INJ 10000UNT	4	PA
<i>clomiphene citrate tab 50 mg</i>	1	Coverage is subject to your plan/benefits
FOLLISTIM AQ INJ 300UNIT	4	PA, QL (15 cartridges every 28 days)
FOLLISTIM AQ INJ 600UNIT	4	PA, QL (10 cartridges every 28 days)
FOLLISTIM AQ INJ 900UNIT	4	PA, QL (7 cartridges every 28 days)
GONAL-F INJ 450UNIT	4	PA, QL (10 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F INJ 1050UNIT	4	PA, QL (6 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 75UNIT	4	PA, QL (60 vials every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 300/0.5	4	PA, QL (15 pens every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 450/0.75	4	PA, QL (10 pens every 28 days); Coverage is subject to your plan/benefits
GONAL-F RFF INJ 900/1.5	4	PA, QL (7 pens every 28 days); Coverage is subject to your plan/benefits
MENOPUR INJ 75UNIT	4	PA
NOVAREL INJ 5000UNIT	4	PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OIDREL INJ	4	PA; Coverage is subject to your plan/benefits
PREGNYL INJ 10000UNT	4	PA; Coverage is subject to your plan/benefits
<b>GNRH/LHRH ANTAGONISTS</b>		
<i>cetrotorelix acetate for inj kit 0.25 mg</i>	3	PA
CETROTIDE KIT 0.25MG	4	PA
GANIRELIX AC INJ 250/0.5	4	PA
ORLISSA TAB 150MG	2	PA
ORLISSA TAB 200MG	2	PA
<b>GROWTH HORMONE RECEPTOR ANTAGONISTS</b>		
SOMAVERT INJ 10MG	4	PA, QL (1 vial every 1 day)
SOMAVERT INJ 15MG	4	PA, QL (1 vial every 1 day)
SOMAVERT INJ 20MG	4	PA, QL (1 vial every 1 day)
SOMAVERT INJ 25MG	4	PA, QL (1 vial every 1 day)
SOMAVERT INJ 30MG	4	PA, QL (1 vial every 1 day)
<b>GROWTH HORMONE RELEASING HORMONES (GHRH)</b>		
EGRIFTA SV INJ 2MG	4	PA, QL (1 vial every 1 day)
<b>GROWTH HORMONES</b>		
GENOTROPIN INJ 0.2MG	4	PA
GENOTROPIN INJ 0.4MG	4	PA
GENOTROPIN INJ 0.6MG	4	PA
GENOTROPIN INJ 0.8MG	4	PA
GENOTROPIN INJ 1.2MG	4	PA
GENOTROPIN INJ 1.4MG	4	PA
GENOTROPIN INJ 1.6MG	4	PA
GENOTROPIN INJ 1.8MG	4	PA
GENOTROPIN INJ 1MG	4	PA
GENOTROPIN INJ 2MG	4	PA
GENOTROPIN INJ 5MG	4	PA
GENOTROPIN INJ 12MG	4	PA
HUMATROPE INJ 6MG	4	PA
HUMATROPE INJ 12MG	4	PA
HUMATROPE INJ 24MG	4	PA
NGENLA INJ 24/1.2ML	4	PA
NGENLA INJ 60/1.2ML	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
NUTROPIN AQ INJ 10MG/2ML	4	PA
NUTROPIN AQ INJ 20MG/2ML	4	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NUTROPIN AQ INJ NUSPIN 5	4	PA
OMNITROPE INJ 5.8MG	4	PA
OMNITROPE INJ 5/1.5ML	4	PA
OMNITROPE INJ 10/1.5ML	4	PA
SAIZEN INJ 5MG	4	PA
SAIZEN INJ 8.8MG	4	PA
SAIZENPREP INJ 8.8MG	4	PA
SEROSTIM INJ 4MG	4	PA
SEROSTIM INJ 5MG	4	PA
SEROSTIM INJ 6MG	4	PA
SKYTROFA INJ 3.6MG	4	PA
SKYTROFA INJ 3MG	4	PA
SKYTROFA INJ 4.3MG	4	PA
SKYTROFA INJ 5.2MG	4	PA
SKYTROFA INJ 6.3MG	4	PA
SKYTROFA INJ 7.6MG	4	PA
SKYTROFA INJ 9.1MG	4	PA
SKYTROFA INJ 11MG	4	PA
SKYTROFA INJ 13.3MG	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)
ZOMACTON INJ 5MG	4	PA
ZOMACTON INJ 10MG	4	PA
ZORBTIVE INJ 8.8MG	4	PA
<b>HORMONE RECEPTOR MODULATORS</b>		
<i>raloxifene hcl tab 60 mg</i>	0	
<b>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</b>		
INCRELEX INJ 40MG/4ML	4	PA
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
LUPR DEP-PED INJ 3M 30MG	4	PA
LUPR DEP-PED INJ 7.5MG	4	PA
LUPR DEP-PED INJ 11.25MG	4	PA
LUPR DEP-PED INJ 15MG	4	PA
LUPRON DEPOT INJ 45MG	4	PA
SYNAREL SOL 2MG/ML	2	
<b>MENOPAUSAL SYMPTOMS SUPPRESSANTS</b>		
VEOZAH TAB 45MG	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>METABOLIC MODIFIERS</b>		
<i>betaine powder for oral solution</i>	3	PA
<i>betaine powder for oral solution</i>	3	PA
BUPHENYL POW	4	PA, QL (798 gm every 30 days)
BUPHENYL TAB 500MG	4	PA, QL (40 tabs every 1 day)
<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
KUVAN POW 100MG	4	PA
KUVAN POW 500MG	4	PA
KUVAN TAB 100MG	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
<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
PALYNZIQ INJ 2.5/0.5	4	PA, QL (8 syringes every 28 days)
PALYNZIQ INJ 10/0.5ML	4	PA, QL (1 syringe every 1 day)
PALYNZIQ INJ 20MG/ML	4	PA, QL (3 syringes every 1 day)
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PHEBURANE MIS 483/GM	4	PA, QL (672 gm very 30 days)
RAVICTI LIQ 1.1GM/ML	4	PA
<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
SENSIPAR TAB 30MG	4	PA, QL (2 tabs every 1 day)
SENSIPAR TAB 60MG	4	PA, QL (2 tabs every 1 day)
SENSIPAR TAB 90MG	4	PA, QL (4 tabs every 1 day)
<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
<b>MINERALOCORTICOID RECEPTOR ANTAGONISTS</b>		
KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA
<b>NATRIURETIC PEPTIDES</b>		
VOXZOGO INJ 0.4MG	4	PA, QL (1 vial every 1 day)
VOXZOGO INJ 0.56MG	4	PA, QL (1 vial every 1 day)
VOXZOGO INJ 1.2MG	4	PA, QL (1 vial every 1 day)
<b>POSTERIOR PITUITARY HORMONES</b>		
<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	
STIMATE SOL 1.5MG/ML	4	PA
<b>PROGESTERONE RECEPTOR ANTAGONISTS</b>		
<i>mifepristone tab 200 mg</i>	1	
<b>PROLACTIN INHIBITORS</b>		
<i>cabergoline tab 0.5 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>SOMATOSTATIC AGENTS</b>		
MYCAPSSA CAP 20MG	4	PA, QL (4 caps every 1 day)
<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)
SANDOSTATIN INJ 50MCG/ML	4	PA, QL (3 ampules every 1 day)
SANDOSTATIN INJ 100MCG	4	PA, QL (3 ampules every 1 day)
SANDOSTATIN INJ 500MCG	4	PA, QL (3 ampules every 1 day)
<b>VASOPRESSIN RECEPTOR ANTAGONISTS</b>		
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)
SAMSCA TAB 15MG	4	PA
SAMSCA TAB 30MG	4	PA
<i>tolvaptan tab 15 mg</i>	3	PA
<i>tolvaptan tab 30 mg</i>	3	PA, QL (1 tab every 1 day)
<b>ESTROGENS</b>		
<b>ESTROGEN COMBINATIONS</b>		
CLIMARA PRO DIS WEEKLY	2	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>levofloxacin oral soln 25 mg/ml</i>	1	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
<i>ofloxacin tab 300 mg</i>	1	
<i>ofloxacin tab 400 mg</i>	1	
<b>GASTROINTESTINAL AGENTS - MISC.</b>		
<b>FARNESOID X RECEPTOR (FXR) AGONISTS</b>		
OCALIVA TAB 5MG	4	PA, QL (1 tab every 1 day)
OCALIVA TAB 10MG	4	PA, QL (1 tab every 1 day)
<b>GALLSTONE SOLUBILIZING AGENTS</b>		
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
<b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
<b>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</b>		
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
<b>GASTROINTESTINAL STIMULANTS</b>		
<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	
<b>INFLAMMATORY BOWEL AGENTS</b>		
ASACOL HD TAB 800MG	2	
<i>balsalazide disodium cap 750 mg</i>	1	
CANASA SUP 1000MG	2	
CIMZIA KIT 200MG	4	PA, QL (2 kits every 28 days)
CIMZIA PREFL KIT 200MG/ML	4	PA, QL (2 kits every 28 days)
CIMZIA START KIT 200MG/ML	4	PA, QL (1 kit every 28 days)
COLAZAL CAP 750MG	2	
ENTYVIO PEN INJ 108/0.68	4	PA, QL (2 pens every 28 days)
<i>mesalamine cap dr 400 mg</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 &amp; 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	
OMVOH INJ 100MG/ML	4	PA, QL (2 pens every 28 days)
OMVOH INJ 100MG/ML	4	PA, QL (2 syr every 28 days)
SFROWASA ENE 4GM	2	
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	
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.
ZYMFENTRA INJ 120MG/ML	4	PA, QL (2 pens every 28 days)
ZYMFENTRA INJ 120MG/ML	4	PA, QL (2 syr every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>INTESTINAL ACIDIFIERS</b>		
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
<b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS</b>		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	1	
<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
<b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>		
<i>alvimopan cap 12 mg</i>	1	
MOVANTIK TAB 12.5MG	2	PA
MOVANTIK TAB 25MG	2	PA
SYMPROIC TAB 0.2MG	2	PA
<b>PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR(PPAR) AGONISTS</b>		
IQIRVO TAB 80MG	4	PA, QL (1 tab every 1 day)
LIVDELZI CAP 10MG	4	PA
<b>PHOSPHATE BINDER AGENTS</b>		
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</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	
<b>SHORT BOWEL SYNDROME (SBS) AGENTS</b>		
GATTEX KIT 5MG	4	PA, QL (30 vials every 30 days)
<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>		
<b>ALKALINIZERS</b>		
<i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1	
<i>potassium citrate &amp; citric acid powder pack 3300-1002 mg</i>	1	
<i>potassium citrate &amp; 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 &amp; citric acid soln 500-334 mg/5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON CAP 50MG	4	PA
CYSTAGON CAP 150MG	4	PA
<b>HYPEROXALURIA AGENTS</b>		
RIVFLOZA INJ 80/0.5ML	4	PA, QL (2 vials every 28 days)
RIVFLOZA INJ 128/0.8	4	PA, QL (1 syr every 28 days)
RIVFLOZA INJ 160MG/ML	4	PA, QL (1 syr every 28 days)
<b>IGA NEPHROPATHY (IGAN) AGENTS</b>		
FILSPARI TAB 200MG	4	PA, QL (2 tabs every 1 day)
FILSPARI TAB 400MG	4	PA, QL (1 tab every 1 day)
<b>INTERSTITIAL CYSTITIS AGENTS</b>		
ELMIRON CAP 100MG	2	QL (90 caps every 25 days)
<b>PROSTATIC HYPERTROPHY AGENTS</b>		
<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	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
<b>URINARY ANALGESICS</b>		
<i>phenazopyridine hcl tab 100 mg</i>	1	
<i>phenazopyridine hcl tab 200 mg</i>	1	
<b>URINARY STONE AGENTS</b>		
<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
<b>GOUT AGENTS</b>		
<b>GOUT AGENT COMBINATIONS</b>		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
<b>GOUT AGENTS</b>		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	1	QL (120 tabs every 25 days)
COLCRYS TAB 0.6MG	2	QL (120 tabs every 25 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
GLOPERBA SOL 0.6/5ML	2	QL (300 mL every 25 days)
MITIGARE CAP 0.6MG	1	QL (60 caps every 25 days); Brand preferred over generic
<b>URICOSURICS</b>		
<i>probenecid tab 500 mg</i>	1	
<b>HEMATOLOGICAL AGENTS - MISC.</b>		
<b>ANTIHEMOPHILIC PRODUCTS</b>		
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
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>		
FIRAZYR INJ 30MG/3ML	4	PA, QL (45 syringes every 90 days)
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	3	PA, QL (135 mL every 90 days)
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	3	PA, QL (45 syringes every 90 days)
<b>COMPLEMENT INHIBITORS</b>		
BERINERT INJ 500UNIT	4	PA, QL (60 kits every 90 days)
CINRYZE SOL 500 UNIT	4	PA, QL (20 vials every 30 days)
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)
<b>HEMATAOLOGIC - TYROSINE KINASE INHIBITORS</b>		
TAVALISSE TAB 100MG	4	PA, QL (2 tabs every 1 day)
TAVALISSE TAB 150MG	4	PA, QL (2 tabs every 1 day)
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline tab er 400 mg</i>	1	
<b>PLASMA KALLIKREIN INHIBITORS</b>		
TAKHZYRO INJ 150MG/ML	4	PA, QL (2 syr every 28 days)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TAKHZYRO INJ 300/2ML	4	PA, QL (2 syr every 28 days)
TAKHZYRO INJ 300/2ML	4	PA, QL (2 vials every 28 days)
<b>PLATELET AGGREGATION INHIBITORS</b>		
<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	
<b>HEMATOPOIETIC AGENTS</b>		
<b>AGENTS FOR GAUCHER DISEASE</b>		
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)
ZAVESCA CAP 100MG	4	PA, QL (3 caps every 1 day)
<b>AGENTS FOR SICKLE CELL DISEASE</b>		
ENDARI POW 5GM	4	PA, QL (6 packets every 1 day)
<i>glutamine (sickle cell) powd pack 5 gm</i>	3	PA, QL (6 packets every 1 day)
OXBRYTA TAB 300MG	4	PA, QL (5 tabs every 1 day)
OXBRYTA TAB 500MG	4	PA, QL (3 tabs every 1 day)
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	
<b>COBALAMINS</b>		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	PA
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	1	
<b>FOLIC ACID/FOLATES</b>		
<i>folic acid cap 0.8 mg</i>	0	OTC
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	OTC
<i>folic acid tab 800 mcg</i>	0	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
ALVAIZ TAB 9MG	4	PA, QL (2 tabs every 1 day)
ALVAIZ TAB 18MG	4	PA, QL (3 tabs every 1 day)
ALVAIZ TAB 36MG	4	PA, QL (3 tabs every 1 day)
ALVAIZ TAB 54MG	4	PA, QL (2 tabs every 1 day)
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, QL (2 tabs every 1 day)
DOPTELET TAB 20MG	4	PA, QL (3 tabs every 1 day)
EPOGEN INJ 2000/ML	4	PA
EPOGEN INJ 3000/ML	4	PA
EPOGEN INJ 4000/ML	4	PA
EPOGEN INJ 10000/ML	4	PA
EPOGEN INJ 20000/ML	4	PA
FULPHILA INJ 6/0.6ML	4	PA, QL (2 syr every 28 days)
FYLNETRA INJ 6MG/0.6	4	PA, QL (2 syr every 28 days)
GRANIX INJ 300/0.5	4	PA
GRANIX INJ 300/1ML	4	PA
GRANIX INJ 480/0.8	4	PA
GRANIX INJ 480/1.6	4	PA
LEUKINE INJ 250MCG	4	PA
MULPLETA TAB 3MG	4	PA, QL (7 tabs every 14 days)
NEULASTA INJ 6MG/0.6M	4	PA, QL (2 syr every 28 days)
NEULASTA KIT 6MG/0.6M	4	PA, QL (2 mL every 28 days)
NEUPOGEN INJ 300/0.5	4	PA
NEUPOGEN INJ 300MCG	4	PA
NEUPOGEN INJ 480/0.8	4	PA
NEUPOGEN INJ 480MCG	4	PA
NIVESTYM INJ 300/0.5	4	PA
NIVESTYM INJ 300MCG	4	PA
NIVESTYM INJ 480/0.8	4	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NIVESTYM INJ 480MCG	4	PA
NYVEPRIA INJ 6/0.6ML	4	PA, QL (2 syr every 28 days)
PROCRIT INJ 2000/ML	4	PA
PROCRIT INJ 3000/ML	4	PA
PROCRIT INJ 4000/ML	4	PA
PROCRIT INJ 10000/ML	4	PA
PROCRIT INJ 20000/ML	4	PA
PROCRIT INJ 40000/ML	4	PA
PROMACTA PAK 25MG	4	PA, QL (6 packets every 1 day)
PROMACTA POW 12.5MG	4	PA, QL (4 packets every 1 day)
PROMACTA TAB 12.5MG	4	PA, QL (2 tabs every 1 day)
PROMACTA TAB 25MG	4	PA, QL (3 tabs every 1 day)
PROMACTA TAB 50MG	4	PA, QL (3 tabs every 1 day)
PROMACTA TAB 75MG	4	PA, QL (2 tabs every 1 day)
RELEUKO INJ 300MCG	4	PA
RELEUKO INJ 480MCG	4	PA
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
UDENYCA INJ 6MG/0.6	4	PA
UDENYCA INJ 6MG/.6ML	4	PA, QL (2 syr every 28 days)
UDENYCA ONBO INJ 6/0.6ML	4	PA
ZARXIO INJ 300/0.5	4	PA
ZARXIO INJ 480/0.8	4	PA
ZIEXTENZO INJ 6/0.6ML	4	PA, QL (2 syr 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

**HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS****BARBITURATE HYPNOTICS**

<i>phenobarbital elixir 20 mg/5ml</i>	1
---------------------------------------	---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>HYPNOTICS - TRICYCLIC AGENTS</b>		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	1	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	1	
<b>NON-BARBITURATE HYPNOTICS</b>		
<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>flurazepam hcl cap 15 mg</i>	1	QL (15 caps every 25 days)
<i>flurazepam hcl cap 30 mg</i>	1	QL (15 caps 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)
<b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>		
<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)
<b>LAXATIVES</b>		
<b>LAXATIVE COMBINATIONS</b>		
<i>CLENPIQ SOL</i>	2	\$0 copay for members age 45 through 75
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	1	\$0 copay for members age 45 through 75
<b>LAXATIVES - MISCELLANEOUS</b>		
<i>lactulose solution 10 gm/15ml</i>	1	
<b>MACROLIDES</b>		
<b>AZITHROMYCIN</b>		
<i>azithromycin for susp 100 mg/5ml</i>	1	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin powd pack for susp 1 gm</i>	1	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
<b>CLARITHROMYCIN</b>		
<i>clarithromycin for susp 125 mg/5ml</i>	1	
<i>clarithromycin for susp 250 mg/5ml</i>	1	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	1	
<b>ERYTHROMYCINS</b>		
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	
<i>erythromycin stearate tab 250 mg</i>	1	
<i>erythromycin tab 250 mg</i>	1	
<i>erythromycin tab 500 mg</i>	1	
<i>erythromycin tab delayed release 250 mg</i>	1	
<i>erythromycin tab delayed release 333 mg</i>	1	
<i>erythromycin tab delayed release 500 mg</i>	1	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	1	
<b>FIDAXOMICIN</b>		
DIFICID SUS	2	PA
DIFICID TAB 200MG	2	PA
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>CONTRACEPTIVES</b>		
CAYA DPR	0	QL (1 each every 300 days)
FC2 FEMALE MIS CONDOM	0	OTC
FEMCAP MIS 22MM	0	QL (1 each every 300 days)

CareFirst Pharmacy 4 Chart, 4T Effective 01/01/2025 0 QL (1 each every 300 days)  
PEM CAP MIS 26MM

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FEMCAP MIS 30MM	0	QL (1 each every 300 days)
OMNIFLEX DPR	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 60	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 65	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 70	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 75	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 80	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 85	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 90	0	QL (1 each every 300 days)
WIDE-SEAL DPR KIT 95	0	QL (1 each every 300 days)

**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
COMFORT TCH MIS LANC 30G	0	OTC
DEXCOM G6 MIS RECEIVER	0	ST, PA
DEXCOM G6 MIS SENSOR	0	ST, PA, QL (3 sensors per month)
DEXCOM G6 MIS TRANSMIT	0	ST, PA
DEXCOM G7 MIS RECEIVER	0	ST, PA
DEXCOM G7 MIS SENSOR	0	ST, PA, QL (3 sensors per month)
ENLITE GLUCO MIS SENSOR	0	PA, QL (3 sensors per month)
EVERSENSE E3 MIS SENSOR	0	PA, QL (3 sensors per month)
EVERSENSE E3 MIS TRANSMTR	0	PA
EVERSENSE MIS SENSOR	0	PA, QL (3 sensors per month)
EVERSENSE MIS TRANSMTR	0	PA
FASTCLIX MIS LANCETS	0	OTC
FREE LIBRE3 KIT PLUS/SEN	0	PA, QL (3 sensors per month)
FREESTY LIBR KIT 2 SENSOR	0	PA, QL (3 sensors per month)
FREESTY LIBR KIT 3 SENSOR	0	PA, QL (3 sensors per month)
FREESTY LIBR KIT SENSOR	0	PA, QL (3 sensors per month)
FREESTY LIBR MIS 2 READER	0	PA
FREESTY LIBR MIS 3 READER	0	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FREESTY LIBR MIS READER	0	PA
FREESTYLE MIS READER	0	PA
GUARDIAN 4 MIS SENSOR	0	PA, QL (3 sensors per month)
GUARDIAN 4 MIS TRANSMIT	0	PA
GUARDIAN CON MIS TRANSMIT	0	PA
GUARDIAN MIS LINK 3	0	PA
GUARDIAN MIS SENSOR 3	0	PA, QL (3 sensors per month)
GUARDIAN RT MIS REPL PED	0	PA
LANCET DEVIC MIS 30G	0	OTC
LANCING DEVI MIS 25G	0	OTC
LANCING DEVI MIS 30G	0	OTC
MINILINK RT MIS TRANSMIT	0	PA
MINIMED 630G MIS TRANSMIT	0	PA
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 DASH KIT INTRO	0	PA
OMNIPOD DASH KIT PDM	0	PA
OMNIPOD DASH MIS PODS	0	PA
OMNIPOD GO KIT 10UNT/DY	0	PA
OMNIPOD GO KIT 15UNT/DY	0	PA
OMNIPOD GO KIT 20UNT/DY	0	PA, QL (30 pumps every month)
OMNIPOD GO KIT 25UNT/DY	0	PA
OMNIPOD GO KIT 30UNT/DY	0	PA, QL (30 pumps every month)
OMNIPOD GO KIT 35UNT/DY	0	PA
OMNIPOD GO KIT 40UNT/DY	0	PA, QL (30 pumps every month)
OMNIPOD MIS CLASSIC	0	PA
OMNIPOD PDM KIT CLASSIC	0	PA
ONETOUCH DEL MIS LANC DEV	0	OTC
ONETOUCH DEL MIS PLUS 30G	0	OTC
ONETOUCH DEL MIS PLUS 33G	0	OTC
PARADIGM REA MIS TRANSMIT	0	PA
PERFECT POIN MIS LANC 28G	0	OTC
PERFECT POIN MIS LANC 30G	0	OTC
SAFE-T-PRO MIS PLUS	0	OTC
SOFTCLIX MIS LANCETS	0	OTC
TWIIST KIT REFILL	0	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TWIST KIT STARTER	0	
TWIST REFIL KIT INFUSION	0	
<b>PARENTERAL THERAPY SUPPLIES</b>		
BD U-500 MIS 31GX6MM	0	
BD ULTRAFINE INSULIN SYRINGES/NEEDLES	0	
BD ULTRAFINE INSULIN SYRINGES/NEEDLES	0	OTC
BD ULTRAFINE PEN NEEDLES	0	OTC
<b>MIGRAINE PRODUCTS</b>		
<b>CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG</b>		
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)
EMGALITY INJ 120MG/ML	2	ST, QL (2 pens every 25 days); Maintenance Dose: 1 injector per month
EMGALITY INJ 120MG/ML	2	ST, QL (2 syringes every 25 days); Maintenance Dose: 1 syringe per month
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)
<b>MIGRAINE PRODUCTS</b>		
TRUDHESA AER 0.725MG	2	QL (12 inhalers every 25 days)
<b>SEROTONIN AGONISTS</b>		
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
------------------	------------------	----------------------------

---

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 ea 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)
REYVOW TAB 50MG	2	ST, QL (4 tabs every 25 days)
REYVOW TAB 100MG	2	ST, QL (8 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)
<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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>	1	
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	
<i>sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)</i>	1	
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	1	

**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	
<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 20 meq (1500 mg)</i>	1	

**MISCELLANEOUS THERAPEUTIC CLASSES****CHELATING AGENTS**

CUPRIMINE CAP 250MG	4	ST
<i>penicillamine cap 250 mg</i>	3	ST
<i>penicillamine tab 250 mg</i>	3	
SYPRINE CAP 250MG	4	ST
<i>trientine hcl cap 250 mg</i>	3	ST

**IMMUNOMODULATORS**

<i>lenalidomide cap 5 mg</i>	3	PA, QL (1 cap every 1 day)
------------------------------	---	----------------------------



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lenalidomide cap 10 mg</i>	3	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 15 mg</i>	3	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 20 mg</i>	3	PA, QL (42 caps every 28 days)
<i>lenalidomide cap 25 mg</i>	3	PA, QL (42 caps every 28 days)
<i>lenalidomide caps 2.5 mg</i>	3	PA, QL (1 cap every 1 day)
REVLIMID CAP 2.5MG	4	PA, QL (1 cap every 1 day)
REVLIMID CAP 5MG	4	PA, QL (1 cap every 1 day)
REVLIMID CAP 10MG	4	PA, QL (1 cap every 1 day)
REVLIMID CAP 15MG	4	PA, QL (1 cap every 1 day)
REVLIMID CAP 20MG	4	PA, QL (42 caps every 28 days)
REVLIMID CAP 25MG	4	PA, QL (42 caps every 28 days)
THALOMID CAP 50MG	4	PA, QL (1 cap every 1 day)
THALOMID CAP 100MG	4	PA, QL (4 caps every 1 day)
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
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	
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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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	
<b>PATIENT ASSESSMENT SERVICES</b>		
EUA PATIENT MIS ASSESS	2	
<b>PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS</b>		
VIJOICE GRA 50MG	4	PA, QL (1 packet every 1 day)
VIJOICE TAB 50MG	4	PA, QL (1 tab every 1 day)
VIJOICE TAB 125MG	4	PA, QL (1 tab every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIJOICE TAB 250MG	4	PA, QL (2 tabs every 1 day)
<b>POTASSIUM REMOVING AGENTS</b>		
<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	
<b>SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS</b>		
BENLYSTA INJ 200MG/ML	4	PA, QL (4 injections every 28 days)
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<b>ANESTHETICS TOPICAL ORAL</b>		
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
<b>ANTI-INFECTIVES - THROAT</b>		
<i>clotrimazole troche 10 mg</i>	1	QL (90 ea every 25 days)
<i>nystatin susp 100000 unit/ml</i>	1	
<b>ANTISEPTICS - MOUTH/THROAT</b>		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
<b>DENTAL PRODUCTS</b>		
<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	
<i>sodium fluoride-potassium nitrate gel 1.1-5%</i>	1	
<b>STEROIDS - MOUTH/THROAT/DENTAL</b>		
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
<b>THROAT PRODUCTS - MISC.</b>		
<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	
<b>MULTIVITAMINS</b>		
<b>PRENATAL VITAMINS</b>		
COMPLETENATE CHW	2	
OB COMPLETE TAB	2	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 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	

**FIBRODYSPLASIA OSSIFICANS PROGRESSIVA (FOP) AGENTS**

SOHONOS CAP 1.5MG	4	PA, QL (2 caps every 1 day)
SOHONOS CAP 1MG	4	PA, QL (1 cap every 1 day)
SOHONOS CAP 2.5MG	4	PA, QL (1 cap every 1 day)
SOHONOS CAP 5MG	4	PA, QL (1 cap every 1 day)
SOHONOS CAP 10MG	4	PA, QL (2 caps every 1 day)

**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)
---	---	------------------------------

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>NASAL ANTIALLERGY</b>		
<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)
<b>NASAL ANTICHOLINERGICS</b>		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
<b>NASAL STEROIDS</b>		
<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)
XHANCE MIS 93MCG	2	PA
<b>SYMPATHOMIMETIC DECONGESTANTS</b>		
<i>epinephrine hcl nasal soln 0.1%</i>	1	
<b>NEUROMUSCULAR AGENTS</b>		
<b>ALS AGENTS</b>		
RADICAVA ORS SUS 105/5ML	4	PA, QL (50 mL every 28 days)
RADICAVA ORS SUS STARTER	4	PA, QL (50 mL every 28 days)
RELYVRIO PAK 3-1GM	4	PA, QL (2 packets every 1 day)
<i>riluzole tab 50 mg</i>	1	
<b>SPINAL MUSCULAR ATROPHY AGENTS (SMA)</b>		
EVRYSDI SOL	4	PA, QL (2 bottles (120 mg) every 24)
<b>NUTRIENTS</b>		
<b>LIPIDS</b>		
DOJOLVI LIQ 100%	4	PA
<b>OPHTHALMIC AGENTS</b>		
<b>BETA-BLOCKERS - OPTHALMIC</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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	
<b>CYCLOPLEGIC MYDRIATICS</b>		
ATROPINE SUL SOL 0.01%	2	
<i>atropine sulfate ophth oint 1%</i>	1	
<i>atropine sulfate ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</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	
TROP-PHENYL SOL 1-2.5%	2	
TROP/CYCL/PE SOL KETOROLA	2	
<b>MIOTICS</b>		
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
VUITY SOL 1.25% OP	2	PA
<b>OPHTHALMIC - ANGIOGENESIS INHIBITORS</b>		
VABYSMO INJ 6/0.05ML	4	PA
<b>OPHTHALMIC ADRENERGIC AGENTS</b>		
<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	
<b>OPHTHALMIC ANTI-INFECTIVES</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentamicin sulfate ophth oint 0.3%</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</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	
<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	
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
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)
<b>OPHTHALMIC INTEGRIN ANTAGONISTS</b>		
XIIDRA DRO 5%	2	PA
<b>OPHTHALMIC LOCAL ANESTHETICS</b>		
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
<b>OPHTHALMIC STEROIDS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>OPHTHALMICS - MISC.</b>		
<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	
<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	
MIEBO DRO 1.3GM/ML	2	PA
<b>PROSTAGLANDINS - OPHTHALMIC</b>		
<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	
<b>OTIC AGENTS</b>		
<b>OTIC AGENTS - MISCELLANEOUS</b>		
<i>acetic acid otic soln 2%</i>	1	
<b>OTIC ANTI-INFECTIVES</b>		
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ofloxacin otic soln 0.3%</i>	1	
<b>OTIC COMBINATIONS</b>		
<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	
<b>OTIC STEROIDS</b>		
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
<b>OXYTOCICS</b>		
<b>OXYTOCICS</b>		
<i>methylergonovine maleate tab 0.2 mg</i>	1	PA, QL (4 tabs every 1 day)
<b>PENICILLINS</b>		
<b>AMINOPENICILLINS</b>		
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<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	
<b>NATURAL PENICILLINS</b>		
<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	
<b>PENICILLIN COMBINATIONS</b>		
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
AUGMENTIN SUS 125/5ML	2	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
<b>PROGESTINS</b>		
<b>PROGESTINS</b>		
<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	
<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	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
<b>AGENTS FOR CHEMICAL DEPENDENCY</b>		
<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	
<b>ANTI-CATAPLECTIC AGENTS</b>		
LUMRYZ PAK 6GM	4	PA, QL (1 packet every 1 day)
LUMRYZ PAK 7.5GM	4	PA, QL (1 packet every 1 day)
LUMRYZ PAK 9GM	4	PA, QL (1 packet every 1 day)
LUMRYZ PKG 4.5GM	4	PA, QL (1 packet every 1 day)
SOD OXYBATE SOL 500MG/ML	4	PA, QL (18 mL every 1 day)
<b>ANTIDEMENTIA AGENTS</b>		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 &amp; 21 x 10 mg titration pack</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	
<b>COMBINATION PSYCHOTHERAPEUTICS</b>		
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
<b>FIBROMYALGIA AGENTS</b>		
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
<b>MOVEMENT DISORDER DRUG THERAPY</b>		
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)
XENAZINE TAB 12.5MG	4	PA, QL (4 tabs every 1 day)
XENAZINE TAB 25MG	4	PA, QL (2 tabs every 1 day)
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AMPYRA TAB 10MG	4	PA, QL (2 tabs every 1 day)
AUBAGIO TAB 7MG	4	PA, QL (1 tab every 1 day)
AUBAGIO TAB 14MG	4	PA, QL (1 tab every 1 day)
AVONEX PEN KIT 30MCG	4	PA, QL (4 pens every 28 days)
AVONEX PREFL KIT 30MCG	4	PA, QL (4 syringes every 28 days)
BAFIERTAM CAP 95MG	4	PA, QL (4 caps every 1 day)
BETASERON INJ 0.3MG	4	PA, QL (14 kits every 28 days)
COPAXONE INJ 20MG/ML	4	PA, QL (1 injection every 1 day)
<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 &amp; 240 mg</i>	3	PA, QL (2 ea every 1 day)
EXTAVIA INJ 0.3MG	4	PA, QL (14 kits every 28 days)
<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	3	PA, QL (1 cap every 1 day)
GILENYA CAP 0.5MG	4	PA, QL (1 cap every 1 day)
GILENYA CAP 0.25MG	4	PA, QL (1 cap every 1 day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
MAVENCLAD PAK 10MG(4)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(5)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(6)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(7)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(8)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(9)	4	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(10)	4	PA, QL (20 tabs every 270 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)
PONVORY TAB 20MG	4	PA, QL (1 tab every 1 day)
PONVORY TAB STARTER	4	PA, QL (1 tab every 1 day)
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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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)
REBIF TITRTN INJ PACK	4	PA, QL (12 injections every 28 days)
TECFIDERA CAP 120MG	4	PA, QL (14 caps every 28 days)
TECFIDERA CAP 240MG	4	PA, QL (2 caps every 1 day)
TECFIDERA CAP STARTER	4	PA, QL (2 ea every 1 day)
<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)
<b>POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS</b>		
<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)
<b>PSEUDOBULBAR AFFECT (PBA) AGENTS</b>		
NUEDEXTA CAP 20-10MG	2	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	\$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 2 mg</i>	0	OTC
<i>nicotine polacrilex gum 4 mg</i>	0	OTC
<i>nicotine polacrilex lozenge 2 mg</i>	0	OTC
<i>nicotine polacrilex lozenge 4 mg</i>	0	OTC
<i>nicotine td patch 24hr 7 mg/24hr</i>	0	OTC
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	OTC
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	OTC
NICOTROL INH	0	
NICOTROL NS SPR 10MG/ML	0	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	1	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 1 mg (base equiv)</i>	1	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	1	\$0 limited to 2 treatment cycles/year

## **RESPIRATORY AGENTS - MISC.**

### **CYSTIC FIBROSIS AGENTS**

BRONCHITOL CAP 40MG	4	PA, QL (600 caps every 30 days)
BRONCHITOL CAP TOL TEST	4	PA, QL (80 caps every 28 days)
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)
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**

ESBRIET CAP 267MG	4	PA, QL (9 caps every 1 day)
ESBRIET TAB 267MG	4	PA, QL (9 tabs every 1 day)
ESBRIET TAB 801MG	4	PA, QL (3 tabs every 1 day)
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)

## **TETRACYCLINES**

### **TETRACYCLINES**

<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)

**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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	

**TOXOIDS****TOXOID COMBINATIONS**

ADACEL INJ	2	
BOOSTRIX INJ	2	
DAPTACEL INJ	2	
DIP/TET PED INJ 25-5LFU	2	
INFANRIX INJ	2	
KINRIX INJ	2	
PEDIARIX INJ 0.5ML	2	
PENTACEL INJ	2	
QUADRACEL INJ	2	
QUADRACEL INJ 0.5ML	2	
TDVAX INJ 2-2 LF	2	
TENIVAC INJ 5-2LF	2	
TET/DIP TOX INJ 2-2 LF	2	
VAXELIS INJ	2	

**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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<b>H-2 ANTAGONISTS</b>		
<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	
<b>MISC. ANTI-ULCER</b>		
<i>sucralfate tab 1 gm</i>	1	
<b>PROTON PUMP INHIBITORS</b>		
<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 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)
<b>ULCER DRUGS - PROSTAGLANDINS</b>		
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ULCER THERAPY COMBINATIONS</b>		
<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i>	1	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	1	
<b>URINARY ANTISPASMODICS</b>		
<b>URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)</b>		
<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	
<b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>		
<i>mirabegron tab er 24 hr 25 mg</i>	1	
<i>mirabegron tab er 24 hr 50 mg</i>	1	
<b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>		
<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	
<b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>		
<i>flavoxate hcl tab 100 mg</i>	1	
<b>VACCINES</b>		
<b>VIRAL VACCINES</b>		
<i>AFLURIA INJ 2024-25</i>	2	
<i>FLUAD INJ 2024-25</i>	2	
<i>FLUARIX INJ 2024-25</i>	2	
<i>FLUBLOK INJ 2024-25</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLUCELVAX INJ 2024-25	2	
FLULAVAL INJ 2024-25	2	
FLUMIST NASA LIQ 2024-25	2	
FLUZONE HD INJ 2024-25	2	
FLUZONE INJ 2024-25	2	
MODERNA INJ 2024-25	2	
MRESVIA INJ 50MCG	2	
<b>VAGINAL AND RELATED PRODUCTS</b>		
<b>SPERMICIDES</b>		
ENCARE SUP 100MG	0	OTC
GYNOL II GEL 3%	0	OTC
TODAY SPONGE MIS	0	OTC
VCF VAGINAL GEL CONTRACE	0	OTC
VCF VAGINAL MIS CONTRACP	0	OTC
<b>VAGINAL ANTI-INFECTIVES</b>		
<i>clindamycin phosphate vaginal cream 2%</i>	1	
<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	
<b>VAGINAL CONTRACEPTIVE - PH MODULATORS</b>		
PHEXXI GEL	0	
<b>VAGINAL ESTROGENS</b>		
<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
<b>VAGINAL PROGESTINS</b>		
ENDOMETRIN SUP 100MG	2	
<b>VASOPRESSORS</b>		
<b>ANAPHYLAXIS THERAPY AGENTS</b>		
<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	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)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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)
<b>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</b>		
<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)
NORTHERA CAP 100MG	4	PA, QL (6 caps every 1 day)
NORTHERA CAP 200MG	4	PA, QL (6 caps every 1 day)
NORTHERA CAP 300MG	4	PA, QL (6 caps every 1 day)
<b>VASOPRESSORS</b>		
<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	
<b>VITAMINS</b>		
<b>OIL SOLUBLE VITAMINS</b>		
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
<i>phytonadione tab 5 mg</i>	1	

## Index

<b>A</b>	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i> .....	77
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i> .....	77
<i>abacavir sulfate tab 300 mg (base equiv)</i>	77
ABELCET INJ 5MG/ML .....	53
<i>abiraterone acetate tab 250 mg</i> .....	65
<i>abiraterone acetate tab 500 mg</i> .....	65
ABRILADA 1PN INJ 40/0.8ML .....	7
ABRILADA 2PN INJ 40/0.8ML .....	7
ABRILADA INJ 20/0.4ML .....	7
ABRILADA INJ 40/0.8ML .....	7
<i>acamprosate calcium tab delayed release 333 mg</i> .....	148
ACANYA GEL 1.2-2.5% .....	94
<i>acarbose tab 100 mg</i> .....	47
<i>acarbose tab 25 mg</i> .....	47
<i>acarbose tab 50 mg</i> .....	47
ACCU-CHEK KIT FASTCLIX.....	134
ACCU-CHEK KIT SOFTCLIX .....	134
ACCU-CHEK LIQ GUIDE .....	134
ACCU-CHEK LIQ SMART .....	134
ACCU-CHEK SOL.....	134
ACCU-CHEK TES AVIVA PL.....	106
ACCU-CHEK TES GUIDE.....	106
ACCU-CHEK TES SMART .....	106
ACCUTREND TES GLUCOSE .....	106
<i>acebutolol hcl cap 200 mg</i> .....	82
<i>acebutolol hcl cap 400 mg</i> .....	82
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i> .....	25
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i> .....	25
<i>acetaminophen w/ codeine tab 300-15 mg</i> .....	25
<i>acetaminophen w/ codeine tab 300-30 mg</i> .....	25
<i>acetaminophen w/ codeine tab 300-60 mg</i> .....	25
<i>acetazolamide cap er 12hr 500 mg</i> .....	115
<i>acetazolamide tab 125 mg</i> .....	115
<i>acetazolamide tab 250 mg</i> .....	115
<i>acetic acid otic soln 2%</i> .....	146
<i>acetylcysteine inhal soln 10%</i> .....	94
<i>acetylcysteine inhal soln 20%</i> .....	94
<i>acitretin cap 10 mg</i> .....	98
<i>acitretin cap 17.5 mg</i> .....	98
<i>acitretin cap 25 mg</i> .....	98
ACTEMRA INJ 162/0.9.....	16
ACTEMRA INJ ACTPEN .....	16
ACTHAR INJ GEL .....	117
ACTIMMUNE INJ 2MU/0.5.....	70
<i>acyclovir cap 200 mg</i> .....	81
<i>acyclovir oint 5%</i> .....	102
<i>acyclovir susp 200 mg/5ml</i> .....	81
<i>acyclovir tab 400 mg</i> .....	81
<i>acyclovir tab 800 mg</i> .....	81
ADACEL INJ .....	155
ADALIMU-AACF INJ 40/0.8ML .....	7
ADALIMU-AACF KIT 40/0.8ML .....	7
ADALIMU-AATY KIT 20/0.2ML .....	7
ADALIMU-AATY KIT 40/0.4ML .....	7
ADALIMU-AATY KIT 80/0.8ML .....	7
ADALIMU-ADAZ INJ 40/0.4ML .....	8
ADALIMU-ADBAM KIT 10/0.2ML .....	8
ADALIMU-ADBAM KIT 20/0.4ML .....	8
ADALIMU-ADBAM KIT 40/0.4ML .....	8
ADALIMU-ADBAM KIT 40/0.8ML .....	8
ADALIMU-FKJP KIT 20/0.4ML .....	8
ADALIMU-FKJP KIT 40/0.8ML .....	8
ADALIMU-RYVK INJ 40/0.4ML .....	8
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i> .....	94
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i> .....	95
<i>adapalene cream 0.1%</i> .....	94
<i>adapalene gel 0.1%</i> .....	94
<i>adapalene gel 0.3%</i> .....	94
ADAPALENE SOL 0.1%.....	94
ADBRY INJ 150MG/ML .....	104
ADBRY INJ 300/2ML .....	104
ADCIRCA TAB 20MG .....	88
<i>adefovir dipivoxil tab 10 mg</i> .....	80
ADEMPAS TAB 0.5MG.....	89
ADEMPAS TAB 1.5MG.....	89

ADEMPAS TAB 1MG .....	89	<i>alendronate sodium oral soln 70 mg/75ml</i>	
ADEMPAS TAB 2.5MG .....	89	.....	116
ADEMPAS TAB 2MG .....	89	<i>alendronate sodium tab 10 mg</i> .....	116
ADIPEX-P CAP 37.5MG.....	2	<i>alendronate sodium tab 35 mg</i> .....	116
ADIPEX-P TAB 37.5MG.....	3	<i>alendronate sodium tab 5 mg</i> .....	116
ADVANCE TES INTUITIO.....	106	<i>alendronate sodium tab 70 mg</i> .....	116
ADVANCE TES MICRO-DW .....	106	<i>alfuzosin hcl tab er 24hr 10 mg</i> .....	127
ADVOCATE TES.....	106	<i>aliskiren fumarate tab 150 mg (base</i>	
ADVOCATE TES REDI-COD.....	106	<i>equivalent)</i> .....	62
ADVOCATE TES REDICODE .....	106	<i>aliskiren fumarate tab 300 mg (base</i>	
AFINITOR DIS TAB 2MG.....	66	<i>equivalent)</i> .....	62
AFINITOR DIS TAB 3MG.....	66	<i>allopurinol tab 100 mg</i> .....	127
AFINITOR DIS TAB 5MG.....	66	<i>allopurinol tab 300 mg</i> .....	127
AFINITOR TAB 10MG .....	66	<i>almotriptan malate tab 12.5 mg</i> .....	136
AFINITOR TAB 2.5MG .....	66	<i>almotriptan malate tab 6.25 mg</i> .....	136
AFINITOR TAB 5MG .....	66	<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	
AFINITOR TAB 7.5MG .....	66	.....	49
AFLURIA INJ 2024-25.....	157	<i>alogliptin benzoate tab 25 mg (base equiv)</i>	
AGAMATRIX TES AMP .....	106	.....	49
AGAMATRIX TES JAZZ.....	106	<i>alogliptin benzoate tab 6.25 mg (base</i>	
AGAMATRIX TES KEYNOTE.....	106	<i>equiv)</i> .....	49
AGAMATRIX TES PRESTO .....	106	<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	
AIMOVIG INJ 140MG/ML.....	136	.....	47
AIMOVIG INJ 70MG/ML .....	136	<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	47
AIRSUPRA AER 90-80MCG .....	36	<i>alogliptin-pioglitazone tab 12.5-30 mg</i> .....	47
<i>albendazole tab 200 mg</i> .....	29	<i>alogliptin-pioglitazone tab 25-15 mg</i> .....	47
<i>albuterol sulfate inhal aero 108 mcg/act</i>		<i>alogliptin-pioglitazone tab 25-30 mg</i> .....	47
<i>(90mcg base equiv)</i> .....	36	<i>alogliptin-pioglitazone tab 25-45 mg</i> .....	47
<i>albuterol sulfate soln nebu 0.083% (2.5</i>		<i>alose tron hcl tab 0.5 mg (base equiv)</i> .....	126
<i>mg/3ml)</i> .....	37	<i>alose tron hcl tab 1 mg (base equiv)</i> .....	126
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>		ALPRAZOLAM CON 1 MG/ML.....	32
.....	36	<i>alprazolam orally disintegrating tab 0.25</i>	
<i>albuterol sulfate soln nebu 0.63 mg/3ml</i>		<i>mg</i> .....	32
<i>(base equiv)</i> .....	36	<i>alprazolam orally disintegrating tab 0.5 mg</i>	
<i>albuterol sulfate soln nebu 1.25 mg/3ml</i>		.....	32
<i>(base equiv)</i> .....	37	<i>alprazolam orally disintegrating tab 1 mg</i> .	32
<i>albuterol sulfate syrup 2 mg/5ml</i> .....	37	<i>alprazolam orally disintegrating tab 2 mg</i> .32	
<i>albuterol sulfate tab 2 mg</i> .....	37	<i>alprazolam tab 0.25 mg</i> .....	32
<i>albuterol sulfate tab 4 mg</i> .....	37	<i>alprazolam tab 0.5 mg</i> .....	32
<i>alclometasone dipropionate cream 0.05%</i>		<i>alprazolam tab 1 mg</i> .....	32
.....	102	<i>alprazolam tab 2 mg</i> .....	32
<i>alclometasone dipropionate oint 0.05%</i> .102		<i>alprazolam tab er 24hr 0.5 mg</i> .....	32
ALECENSA CAP 150MG.....	66	<i>alprazolam tab er 24hr 1 mg</i> .....	32
		<i>alprazolam tab er 24hr 2 mg</i> .....	32

<i>alprazolam tab er 24hr 3 mg</i> .....	32	<i>amlodipine besylate-atorvastatin calcium</i>	
ALTRENO LOT 0.05% .....	95	<i>tab 10-20 mg</i> .....	86
ALUNBRIG PAK .....	66	<i>amlodipine besylate-atorvastatin calcium</i>	
ALUNBRIG TAB 180MG .....	66	<i>tab 10-40 mg</i> .....	86
ALUNBRIG TAB 30MG .....	66	<i>amlodipine besylate-atorvastatin calcium</i>	
ALUNBRIG TAB 90MG .....	66	<i>tab 10-80 mg</i> .....	86
ALVAIZ TAB 18MG .....	130	<i>amlodipine besylate-atorvastatin calcium</i>	
ALVAIZ TAB 36MG .....	130	<i>tab 2.5-10 mg</i> .....	85
ALVAIZ TAB 54MG .....	130	<i>amlodipine besylate-atorvastatin calcium</i>	
ALVAIZ TAB 9MG .....	130	<i>tab 2.5-20 mg</i> .....	85
ALVESCO AER 160MCG .....	35	<i>amlodipine besylate-atorvastatin calcium</i>	
ALVESCO AER 80MCG .....	35	<i>tab 2.5-40 mg</i> .....	85
<i>alvimopan cap 12 mg</i> .....	126	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>amantadine hcl cap 100 mg</i> .....	71	<i>tab 5-10 mg</i> .....	86
<i>amantadine hcl soln 50 mg/5ml</i> .....	71	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>amantadine hcl tab 100 mg</i> .....	71	<i>tab 5-20 mg</i> .....	86
AMBISOME INJ 50MG .....	53	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>ambrisentan tab 10 mg</i> .....	88	<i>tab 5-40 mg</i> .....	86
<i>ambrisentan tab 5 mg</i> .....	88	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>amcinonide cream 0.1%</i> .....	102	<i>tab 5-80 mg</i> .....	86
<i>amcinonide lotion 0.1%</i> .....	102	<i>amlodipine besylate-benazepril hcl cap 10-</i>	
<i>amiloride &amp; hydrochlorothiazide tab 5-50</i>		<i>20 mg</i> .....	59
<i>mg</i> .....	115	<i>amlodipine besylate-benazepril hcl cap 10-</i>	
<i>amiloride hcl tab 5 mg</i> .....	116	<i>40 mg</i> .....	59
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	131	<i>amlodipine besylate-benazepril hcl cap 2.5-</i>	
<i>aminocaproic acid tab 1000 mg</i> .....	131	<i>10 mg</i> .....	59
<i>aminocaproic acid tab 500 mg</i> .....	131	<i>amlodipine besylate-benazepril hcl cap 5-</i>	
<i>amiodarone hcl tab 100 mg</i> .....	33	<i>10 mg</i> .....	59
<i>amiodarone hcl tab 200 mg</i> .....	34	<i>amlodipine besylate-benazepril hcl cap 5-</i>	
<i>amiodarone hcl tab 400 mg</i> .....	34	<i>20 mg</i> .....	59
<i>amitriptyline hcl tab 100 mg</i> .....	46	<i>amlodipine besylate-benazepril hcl cap 5-</i>	
<i>amitriptyline hcl tab 10 mg</i> .....	46	<i>40 mg</i> .....	59
<i>amitriptyline hcl tab 150 mg</i> .....	46	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 25 mg</i> .....	46	<i>medoxomil tab 10-20 mg</i> .....	59
<i>amitriptyline hcl tab 50 mg</i> .....	46	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 75 mg</i> .....	46	<i>medoxomil tab 10-40 mg</i> .....	59
AMJEVITA INJ 10/0.2ML .....	8	<i>amlodipine besylate-olmesartan</i>	
AMJEVITA INJ 20/0.2ML .....	8	<i>medoxomil tab 5-20 mg</i> .....	59
AMJEVITA INJ 20/0.4ML .....	8	<i>amlodipine besylate-olmesartan</i>	
AMJEVITA INJ 40/0.4ML .....	8	<i>medoxomil tab 5-40 mg</i> .....	59
AMJEVITA INJ 40/0.8ML .....	9	<i>amlodipine besylate tab 10 mg (base</i>	
AMJEVITA INJ 80/0.8ML .....	9	<i>equivalent)</i> .....	83
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate tab 2.5 mg (base</i>	
<i>tab 10-10 mg</i> .....	86	<i>equivalent)</i> .....	83



<i>amlodipine besylate tab 5 mg (base equivalent)</i> .....	83	<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i> .....	147
<i>amlodipine besylate-valsartan tab 10-160 mg</i> .....	59	<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i> .....	147
<i>amlodipine besylate-valsartan tab 10-320 mg</i> .....	59	<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i> .....	147
<i>amlodipine besylate-valsartan tab 5-160 mg</i> .....	59	<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> .....	148
<i>amlodipine besylate-valsartan tab 5-320 mg</i> .....	59	<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i> .....	148
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i> .....	60	<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i> .....	148
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i> .....	60	<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i> .....	148
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i> .....	60	<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i> .....	148
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i> .....	60	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i> .....	1
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i> .....	60	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i> .....	1
<i>amoxapine tab 100 mg</i> .....	46	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i> .....	1
<i>amoxapine tab 150 mg</i> .....	46	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i> .....	1
<i>amoxapine tab 25 mg</i> .....	46	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> .....	1
<i>amoxapine tab 50 mg</i> .....	46	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> .....	1
<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i> .....	157	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> .....	1
<i>amoxicillin (trihydrate) cap 250 mg</i> .....	147	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> .....	1
<i>amoxicillin (trihydrate) cap 500 mg</i> .....	147	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> .....	1
<i>amoxicillin (trihydrate) chew tab 125 mg</i> .....	147	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i> .....	1
<i>amoxicillin (trihydrate) chew tab 250 mg</i> .....	147	<i>amphetamine-dextroamphetamine tab 10 mg</i> .....	1
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i> .....	147	<i>amphetamine-dextroamphetamine tab 12.5 mg</i> .....	1
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i> .....	147	<i>amphetamine-dextroamphetamine tab 15 mg</i> .....	1
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i> .....	147	<i>amphetamine-dextroamphetamine tab 20 mg</i> .....	1
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i> .....	147		
<i>amoxicillin (trihydrate) tab 500 mg</i> .....	147		
<i>amoxicillin (trihydrate) tab 875 mg</i> .....	147		
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i> .....	147		
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i> .....	147		

<i>amphetamine-dextroamphetamine tab 30 mg</i> .....	1	<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i> .....	37
<i>amphetamine-dextroamphetamine tab 5 mg</i> .....	1	ARIKAYCE SUS.....	7
<i>amphetamine-dextroamphetamine tab 7.5 mg</i> .....	1	<i>aripiprazole orally disintegrating tab 10 mg</i> .....	77
<i>amphetamine sulfate tab 10 mg</i> .....	1	<i>aripiprazole orally disintegrating tab 15 mg</i> .....	77
<i>amphetamine sulfate tab 5 mg</i> .....	1	<i>aripiprazole oral solution 1 mg/ml</i> .....	76
<i>amphotericin b liposome iv for susp 50 mg</i> .....	53	<i>aripiprazole tab 10 mg</i> .....	77
<i>ampicillin cap 500 mg</i> .....	147	<i>aripiprazole tab 15 mg</i> .....	77
AMPYRA TAB 10MG.....	150	<i>aripiprazole tab 20 mg</i> .....	77
<i>anagrelide hcl cap 0.5 mg</i> .....	129	<i>aripiprazole tab 2 mg</i> .....	77
<i>anagrelide hcl cap 1 mg</i> .....	129	<i>aripiprazole tab 30 mg</i> .....	77
ANAPROX DS TAB 550MG.....	17	<i>aripiprazole tab 5 mg</i> .....	77
<i>anastrozole tab 1 mg</i> .....	65	ARISTADA INJ 1064MG.....	77
ANDRODERM DIS 2MG/24HR.....	27	ARISTADA INJ 441MG/1.....	77
ANDRODERM DIS 4MG/24HR.....	27	ARISTADA INJ 662MG/2.....	77
ANDROGEL GEL 1.62%.....	27	ARISTADA INJ 882MG/3.....	77
ANDROGEL GEL 1%(25MG).....	27	ARISTADA INJ INITIO.....	77
ANNOVERA MIS.....	92	<i>armodafinil tab 150 mg</i> .....	5
APADAZ TAB 4.08-325.....	25	<i>armodafinil tab 200 mg</i> .....	5
APADAZ TAB 6.12-325.....	25	<i>armodafinil tab 250 mg</i> .....	5
APADAZ TAB 8.16-325.....	26	<i>armodafinil tab 50 mg</i> .....	5
APOKYN INJ 10MG/ML.....	71	ARNUITY ELPT INH 100MCG.....	35
<i>apomorphine hcl soln cartridge 30 mg/3ml</i> .....	71	ARNUITY ELPT INH 200MCG.....	35
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i> .....	144	ARNUITY ELPT INH 50MCG.....	35
<i>aprepitant capsule 125 mg</i> .....	53	ARTHROTEC 50 TAB.....	17
<i>aprepitant capsule 40 mg</i> .....	52	ARTHROTEC 75 TAB.....	17
<i>aprepitant capsule 80 mg</i> .....	53	ASACOL HD TAB 800MG.....	124
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i> .....	53	<i>asenapine maleate sl tab 10 mg (base equiv)</i> .....	75
ARANESP INJ 100MCG.....	130	<i>asenapine maleate sl tab 2.5 mg (base equiv)</i> .....	75
ARANESP INJ 10MCG.....	130	<i>asenapine maleate sl tab 5 mg (base equiv)</i> .....	75
ARANESP INJ 150MCG.....	130	ASMANEX 120 AER 220MCG.....	35
ARANESP INJ 200MCG.....	130	ASMANEX 14 AER 220MCG.....	35
ARANESP INJ 25MCG.....	130	ASMANEX 30 AER 110MCG.....	35
ARANESP INJ 300MCG.....	130	ASMANEX 30 AER 220MCG.....	35
ARANESP INJ 40MCG.....	130	ASMANEX 60 AER 220MCG.....	35
ARANESP INJ 500MCG.....	130	ASMANEX HFA AER 100 MCG.....	35
ARANESP INJ 60MCG.....	130	ASMANEX HFA AER 200 MCG.....	36
ARCALYST INJ 220MG.....	16	ASMANEX HFA AER 50MCG.....	35
		<i>aspirin chew tab 81 mg</i> .....	22

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	ATRALIN GEL 0.05%.....	95
.....	<i>atropine sulfate ophth oint 1%.....</i>	144
<i>aspirin tab delayed release 81 mg.....</i>	<i>atropine sulfate ophth soln 1%.....</i>	144
ASSURE 3 TES.....	ATROPINE SUL SOL 0.01%.....	144
ASSURE 4 TES.....	AUBAGIO TAB 14MG .....	150
ASSURE II TES .....	AUBAGIO TAB 7MG .....	150
ASSURE II TES CHECK.....	AUGMENTIN SUS 125/5ML .....	148
ASSURE PRISM TES MULTI.....	AUGTYRO CAP 40MG .....	66
ASSURE PRO TES.....	AUTOCODE TES BLD GLUC .....	107
ASSURE TES PLATINUM.....	AVONEX PEN KIT 30MCG .....	150
ASTAGRAF XL CAP 0.5MG.....	AVONEX PREFL KIT 30MCG .....	150
ASTAGRAF XL CAP 1MG .....	<i>azathioprine tab 100 mg.....</i>	139
ASTAGRAF XL CAP 5MG .....	<i>azathioprine tab 50 mg.....</i>	139
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	<i>azathioprine tab 75 mg .....</i>	139
.....	<i>azelaic acid gel 15% .....</i>	105
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	<i>azelastine hcl-fluticasone prop nasal spray</i>	
.....	137-50 mcg/act.....	142
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	<i>azelastine hcl nasal spray 0.1% (137</i>	
.....	<i>mcg/spray) .....</i>	143
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	<i>azelastine hcl ophth soln 0.05% .....</i>	146
.....	<i>azithromycin for susp 100 mg/5ml .....</i>	133
<i>atenolol &amp; chlorthalidone tab 50-25 mg ...</i>	<i>azithromycin for susp 200 mg/5ml.....</i>	133
.....	<i>azithromycin powd pack for susp 1 gm....</i>	133
<i>atenolol tab 100 mg .....</i>	<i>azithromycin tab 250 mg.....</i>	133
.....	<i>azithromycin tab 500 mg.....</i>	133
<i>atenolol tab 25 mg.....</i>	<i>azithromycin tab 600 mg.....</i>	133
.....	<b>B</b>	
<i>atenolol tab 50 mg .....</i>	<i>bacitracin ophth oint 500 unit/gm .....</i>	144
.....	<i>bacitracin-polymyxin b ophth oint.....</i>	144
<i>atomoxetine hcl cap 100 mg (base equiv) ..</i>	<i>bacitracin-polymyxin-neomycin-hc ophth</i>	
.....	<i>ointment 1% .....</i>	145
<i>atomoxetine hcl cap 10 mg (base equiv).....</i>	<i>baclofen oral soln 10 mg/5ml .....</i>	142
.....	<i>baclofen oral soln 5 mg/5ml .....</i>	142
<i>atomoxetine hcl cap 18 mg (base equiv).....</i>	<i>baclofen susp 25 mg/5ml .....</i>	142
.....	<i>baclofen tab 10 mg.....</i>	142
<i>atomoxetine hcl cap 25 mg (base equiv)....</i>	<i>baclofen tab 20 mg.....</i>	142
.....	<i>baclofen tab 5 mg .....</i>	142
<i>atomoxetine hcl cap 40 mg (base equiv) ...</i>	BAFIERTAM CAP 95MG.....	150
.....	<i>balsalazide disodium cap 750 mg .....</i>	124
<i>atomoxetine hcl cap 60 mg (base equiv) ...</i>	BALVERSA TAB 3MG .....	66
.....	BALVERSA TAB 4MG .....	66
<i>atomoxetine hcl cap 80 mg (base equiv) ...</i>	BALVERSA TAB 5MG .....	66
.....	BAQSIMI ONE POW 3MG/DOSE .....	48
<i>atorvastatin calcium tab 10 mg (base</i>	BAQSIMI TWO POW 3MG/DOSE .....	48
<i>equivalent).....</i>		
<i>atorvastatin calcium tab 20 mg (base</i>		
<i>equivalent).....</i>		
<i>atorvastatin calcium tab 40 mg (base</i>		
<i>equivalent).....</i>		
<i>atorvastatin calcium tab 80 mg (base</i>		
<i>equivalent).....</i>		
<i>atovaquone-proguanil hcl tab 250-100 mg</i>		
.....		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>		
.....		
<i>atovaquone susp 750 mg/5ml .....</i>		

BARACLUDE SOL.....	80	<i>betamethasone dipropionate augmented cream 0.05% .....</i>	102
BD U-500 MIS 31GX6MM .....	136	<i>betamethasone dipropionate augmented gel 0.05%.....</i>	102
BD ULTRAFINE INSULIN SYRINGES/NEEDLES .....	136	<i>betamethasone dipropionate augmented lotion 0.05%.....</i>	102
BD ULTRAFINE PEN NEEDLES .....	136	<i>betamethasone dipropionate augmented oint 0.05%.....</i>	102
BELBUCA MIS 150MCG .....	26	<i>betamethasone dipropionate cream 0.05% .....</i>	102
BELBUCA MIS 300MCG .....	26	<i>betamethasone dipropionate lotion 0.05% .....</i>	102
BELBUCA MIS 450MCG .....	26	<i>betamethasone valerate aerosol foam 0.12%.....</i>	102
BELBUCA MIS 600MCG .....	26	<i>betamethasone valerate cream 0.1% (base equivalent) .....</i>	102
BELBUCA MIS 750MCG .....	26	<i>betamethasone valerate lotion 0.1% (base equivalent) .....</i>	102
BELBUCA MIS 75MCG .....	26	<i>betamethasone valerate oint 0.1% (base equivalent) .....</i>	102
BELBUCA MIS 900MCG .....	26	BETASERON INJ 0.3MG.....	150
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg.....</i>	60	<i>betaxolol hcl ophth soln 0.5% .....</i>	143
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg.....</i>	60	<i>betaxolol hcl tab 10 mg .....</i>	82
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg.....</i>	60	<i>betaxolol hcl tab 20 mg .....</i>	82
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg .....</i>	60	<i>bethanechol chloride tab 10 mg .....</i>	157
<i>benazepril hcl tab 10 mg.....</i>	57	<i>bethanechol chloride tab 25 mg.....</i>	157
<i>benazepril hcl tab 20 mg.....</i>	57	<i>bethanechol chloride tab 50 mg .....</i>	157
<i>benazepril hcl tab 40 mg.....</i>	57	<i>bethanechol chloride tab 5 mg.....</i>	157
<i>benazepril hcl tab 5 mg.....</i>	57	BETHKIS NEB 300/4ML.....	7
BENLYSTA INJ 200MG/ML.....	141	BEVESPI AER 9-4.8MCG .....	37
BENZAMYCIN GEL 5-3%.....	95	BEXAGLIFLOZN TAB 20MG .....	50
BENZHY/ACETA TAB 4.08-325 .....	26	<i>bexarotene cap 75 mg.....</i>	70
BENZHY/ACETA TAB 6.12-325.....	26	<i>bexarotene gel 1%.....</i>	97
BENZHY/ACETA TAB 8.16-325.....	26	<i>bicalutamide tab 50 mg.....</i>	65
<i>benzonatate cap 100 mg .....</i>	94	BIKTARVY TAB .....	77
<i>benzonatate cap 150 mg .....</i>	94	<i>bimatoprost ophth soln 0.03%.....</i>	146
<i>benzonatate cap 200 mg .....</i>	94	BIMZELX INJ 160MG/ML .....	98
<i>benzoyl peroxide-erythromycin gel 5-3%95</i>	95	BIOTEL CARE TES STRIPS.....	107
<i>benzoyl peroxide foam 9.8%.....</i>	95	<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg.....</i>	157
<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%.....</i>	95	<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg.....</i>	60
<i>benzphetamine hcl tab 50 mg .....</i>	3	<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg.....</i>	60
<i>benztropine mesylate tab 0.5 mg .....</i>	71		
<i>benztropine mesylate tab 1 mg .....</i>	71		
<i>benztropine mesylate tab 2 mg.....</i>	71		
<i>bepotastine besilate ophth soln 1.5% ....</i>	146		
BERINERT INJ 500UNIT.....	128		
<i>betaine powder for oral solution .....</i>	120		

<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i> .....	60	BRONCHITOL CAP 40MG.....	153
<i>bisoprolol fumarate tab 10 mg</i> .....	82	BRONCHITOL CAP TOL TEST.....	153
<i>bisoprolol fumarate tab 5 mg</i> .....	82	<i>budesonide delayed release particles cap 3 mg</i> .....	92
BLOOD GLUCOS TES .....	107	<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i> .....	37
BLOOD GLUCOS TES 333 .....	107	<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i> .....	37
BLOOD GLUCOS TES LE1 .....	107	<i>budesonide inhalation susp 0.25 mg/2ml</i> 36	
BLOOD GLUCOS TES PREMIUM.....	107	<i>budesonide inhalation susp 0.5 mg/2ml</i> ...	36
BLOOD GLUCOS TES STRIPS.....	107	<i>budesonide inhalation susp 1 mg/2ml</i> .....	36
BLULINK TES STRIPS .....	107	<i>budesonide rectal foam 2 mg/act</i> .....	28
BOOSTRIX INJ.....	155	<i>budesonide tab er 24hr 9 mg</i> .....	92
<i>bosentan tab 125 mg</i> .....	88	<i>bumetanide tab 0.5 mg</i> .....	115
<i>bosentan tab 62.5 mg</i> .....	88	<i>bumetanide tab 1 mg</i> .....	115
BOSULIF CAP 100MG.....	66	<i>bumetanide tab 2 mg</i> .....	115
BOSULIF CAP 50MG.....	66	BUPHENYL POW .....	120
BOSULIF TAB 100MG .....	66	BUPHENYL TAB 500MG .....	120
BOSULIF TAB 400MG .....	67	<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i> .....	27
BOSULIF TAB 500MG .....	67	<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i> .....	27
BRAFTOVI CAP 75MG.....	67	<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i> .....	27
BRENZAVVY TAB 20MG.....	50	<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i> .....	27
BREO ELLIPTA INH 100-25 .....	37	<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i> .....	27
BREO ELLIPTA INH 200-25.....	37	<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i> .....	27
BREO ELLIPTA INH 50-25MCG .....	37	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i> .....	26
BREZTRI AERO AER SPHERE .....	37	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i> .....	26
BRILINTA TAB 60MG.....	129	<i>buprenorphine td patch weekly 10 mcg/hr</i> .....	27
BRILINTA TAB 90MG.....	129	<i>buprenorphine td patch weekly 15 mcg/hr</i> .....	27
<i>brimonidine tartrate gel 0.33% (base equivalent)</i> .....	105	<i>buprenorphine td patch weekly 20 mcg/hr</i> .....	27
<i>brimonidine tartrate ophth soln 0.1%</i> .....	144	<i>buprenorphine td patch weekly 5 mcg/hr</i> 27	
<i>brimonidine tartrate ophth soln 0.15%</i> ... 144		<i>buprenorphine td patch weekly 7.5 mcg/hr</i> .....	27
<i>brimonidine tartrate ophth soln 0.2%</i> ..... 144			
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i> .....	143		
<i>brinzolamide ophth susp 1%</i> .....	146		
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i> .....	146		
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i> .....	146		
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i> .....	146		
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i> .....	71		
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i> .....	71		

<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i> .....	152
<i>bupropion hcl tab 100 mg</i> .....	43
<i>bupropion hcl tab 75 mg</i> .....	43
<i>bupropion hcl tab er 12hr 100 mg</i> .....	43
<i>bupropion hcl tab er 12hr 150 mg</i> .....	43
<i>bupropion hcl tab er 12hr 200 mg</i> .....	43
<i>bupropion hcl tab er 24hr 150 mg</i> .....	43
<i>bupropion hcl tab er 24hr 300 mg</i> .....	43
<i>bupirone hcl tab 10 mg</i> .....	31
<i>bupirone hcl tab 15 mg</i> .....	31
<i>bupirone hcl tab 30 mg</i> .....	31
<i>bupirone hcl tab 5 mg</i> .....	31
<i>bupirone hcl tab 7.5 mg</i> .....	31
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i> .....	22
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i> .....	22
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i> .....	22
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i> .....	26
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i> .....	26
<i>butalbital-acetaminophen tab 50-325 mg</i> .....	22
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i> .....	22
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i> .....	26
<i>butorphanol tartrate nasal soln 10 mg/ml</i> .....	27
<b>C</b>	
<i>cabergoline tab 0.5 mg</i> .....	121
<i>CABOMETYX TAB 20MG</i> .....	67
<i>CABOMETYX TAB 40MG</i> .....	67
<i>CABOMETYX TAB 60MG</i> .....	67
<i>CABTREGO GEL</i> .....	95
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i> .....	2
<i>CALCIPOTRIEN AER 0.005%</i> .....	98
<i>calcipotriene foam 0.005%</i> .....	98
<i>calcipotriene oint 0.005%</i> .....	98
<i>calcipotriene soln 0.005% (50 mcg/ml)</i> .....	98
<i>calcitonin (salmon) inj 200 unit/ml</i> .....	116

<i>calcitonin (salmon) nasal soln 200 unit/act</i> .....	116
<i>calcitriol cap 0.25 mcg</i> .....	120
<i>calcitriol cap 0.5 mcg</i> .....	120
<i>calcitriol oint 3 mcg/gm</i> .....	98
<i>calcitriol oral soln 1 mcg/ml</i> .....	120
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i> .....	126
<i>CALQUENCE TAB 100MG</i> .....	67
<i>CAMZYOS CAP 10MG</i> .....	85
<i>CAMZYOS CAP 15MG</i> .....	85
<i>CAMZYOS CAP 2.5MG</i> .....	85
<i>CAMZYOS CAP 5MG</i> .....	85
<i>CANASA SUP 1000MG</i> .....	124
<i>CANCIDAS INJ 50MG</i> .....	53
<i>CANCIDAS INJ 70MG</i> .....	53
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i> .....	60
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i> .....	60
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i> .....	60
<i>candesartan cilexetil tab 16 mg</i> .....	58
<i>candesartan cilexetil tab 32 mg</i> .....	58
<i>candesartan cilexetil tab 4 mg</i> .....	58
<i>candesartan cilexetil tab 8 mg</i> .....	58
<i>capecitabine tab 150 mg</i> .....	63
<i>capecitabine tab 500 mg</i> .....	63
<i>CAPRELSA TAB 100MG</i> .....	67
<i>CAPRELSA TAB 300MG</i> .....	67
<i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i> .....	60
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i> .....	60
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i> .....	60
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i> .....	60
<i>captopril tab 100 mg</i> .....	57
<i>captopril tab 12.5 mg</i> .....	57
<i>captopril tab 25 mg</i> .....	57
<i>captopril tab 50 mg</i> .....	57
<i>carbamazepine cap er 12hr 100 mg</i> .....	40
<i>carbamazepine cap er 12hr 200 mg</i> .....	40

<i>carbamazepine cap er 12hr 300 mg</i> .....	40
<i>carbamazepine chew tab 100 mg</i> .....	40
<i>carbamazepine susp 100 mg/5ml</i> .....	40
<i>carbamazepine tab 200 mg</i> .....	40
<i>carbamazepine tab er 12hr 100 mg</i> .....	40
<i>carbamazepine tab er 12hr 200 mg</i> .....	40
<i>carbamazepine tab er 12hr 400 mg</i> .....	40
<i>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg</i> .....	71
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i> .....	71
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i> .....	71
<i>carbidopa &amp; levodopa tab 10-100 mg</i> .....	71
<i>carbidopa &amp; levodopa tab 25-100 mg</i> .....	71
<i>carbidopa &amp; levodopa tab 25-250 mg</i> .....	71
<i>carbidopa &amp; levodopa tab er 25-100 mg</i> ....	71
<i>carbidopa &amp; levodopa tab er 50-200 mg</i> ..	71
<i>carbidopa-levodopa-entacapone tabs 12.5- 50-200 mg</i> .....	72
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i> .....	72
<i>carbidopa-levodopa-entacapone tabs 25- 100-200 mg</i> .....	72
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i> .....	72
<i>carbidopa-levodopa-entacapone tabs 37.5- 150-200 mg</i> .....	72
<i>carbidopa-levodopa-entacapone tabs 50- 200-200 mg</i> .....	72
<i>carbidopa tab 25 mg</i> .....	71
<i>carbinoxamine maleate extended release susp 4 mg/5ml</i> .....	54
<i>carbinoxamine maleate soln 4 mg/5ml</i> ....	54
<i>carbinoxamine maleate tab 4 mg</i> .....	54
CARESENS N TES.....	107
CARESENS N TES GLUCOSE.....	107
CARETOUCH MIS TST STRP.....	107
<i>carglumic acid soluble tab 200 mg</i> .....	120
<i>carisoprodol tab 350 mg</i> .....	142
<i>carteolol hcl ophth soln 1%</i> .....	143
<i>carvedilol phosphate cap er 24hr 10 mg</i> ..	82
<i>carvedilol phosphate cap er 24hr 20 mg</i> ..	82
<i>carvedilol phosphate cap er 24hr 40 mg</i> ..	82
<i>carvedilol phosphate cap er 24hr 80 mg</i> ..	82
<i>carvedilol tab 12.5 mg</i> .....	82
<i>carvedilol tab 25 mg</i> .....	82
<i>carvedilol tab 3.125 mg</i> .....	82
<i>carvedilol tab 6.25 mg</i> .....	82
<i>caspofungin acetate for iv soln 50 mg</i> .....	53
<i>caspofungin acetate for iv soln 70 mg</i> .....	53
CASPOFUNGIN INJ 50MG.....	53
CASPOFUNGIN INJ 70MG.....	53
CAYA DPR.....	133
CAYSTON INH 75MG.....	30
<i>cefaclor cap 250 mg</i> .....	89
<i>cefaclor cap 500 mg</i> .....	89
<i>cefaclor for susp 125 mg/5ml</i> .....	89
<i>cefaclor for susp 250 mg/5ml</i> .....	89
<i>cefaclor for susp 375 mg/5ml</i> .....	89
<i>cefadroxil cap 500 mg</i> .....	89
<i>cefadroxil for susp 250 mg/5ml</i> .....	89
<i>cefadroxil for susp 500 mg/5ml</i> .....	89
<i>cefadroxil tab 1 gm</i> .....	89
<i>cefdinir cap 300 mg</i> .....	90
<i>cefdinir for susp 125 mg/5ml</i> .....	90
<i>cefdinir for susp 250 mg/5ml</i> .....	90
<i>cefixime cap 400 mg</i> .....	90
<i>cefixime for susp 100 mg/5ml</i> .....	90
<i>cefixime for susp 200 mg/5ml</i> .....	90
<i>cefpodoxime proxetil for susp 100 mg/5ml</i> .....	90
<i>cefpodoxime proxetil for susp 50 mg/5ml</i> .....	90
<i>cefpodoxime proxetil tab 100 mg</i> .....	90
<i>cefpodoxime proxetil tab 200 mg</i> .....	90
<i>cefprozil for susp 125 mg/5ml</i> .....	89
<i>cefprozil for susp 250 mg/5ml</i> .....	89
<i>cefprozil tab 250 mg</i> .....	90
<i>cefprozil tab 500 mg</i> .....	90
<i>cefuroxime axetil tab 250 mg</i> .....	90
<i>cefuroxime axetil tab 500 mg</i> .....	90
CELEBREX CAP 100MG.....	17
CELEBREX CAP 200MG.....	17
CELEBREX CAP 400MG.....	17
CELEBREX CAP 50MG.....	17
<i>celecoxib cap 100 mg</i> .....	17
<i>celecoxib cap 200 mg</i> .....	17

<i>celecoxib cap 400 mg</i> .....	17	<i>cholestyramine powder 4 gm/dose</i> .....	55
<i>celecoxib cap 50 mg</i> .....	17	<i>cholestyramine powder packets 4 gm</i> .....	55
CELLCEPT CAP 250MG.....	139	<i>choline fenofibrate cap dr 135 mg</i>	
CELLCEPT SUS 200MG/ML.....	139	<i>(fenofibric acid equiv)</i> .....	55
CELLCEPT TAB 500MG.....	139	<i>choline fenofibrate cap dr 45 mg (fenofibric</i>	
CENTANY OIN 2%.....	97	<i>acid equiv)</i> .....	55
<i>cephalexin cap 250 mg</i> .....	89	CHOR GONADOT INJ 10000UNT.....	117
<i>cephalexin cap 500 mg</i> .....	89	CIALIS TAB 2.5MG.....	86
<i>cephalexin cap 750 mg</i> .....	89	CIALIS TAB 5MG.....	86
<i>cephalexin for susp 125 mg/5ml</i> .....	89	CIBINQO TAB 100MG.....	104
<i>cephalexin for susp 250 mg/5ml</i> .....	89	CIBINQO TAB 200MG.....	104
<i>cephalexin tab 250 mg</i> .....	89	CIBINQO TAB 50MG.....	104
<i>cephalexin tab 500 mg</i> .....	89	<i>ciclopirox gel 0.77%</i> .....	97
CERDELGA CAP 84MG.....	129	<i>ciclopirox olamine cream 0.77% (base</i>	
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>		<i>equiv)</i> .....	97
.....	54	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	
<i>cetorelix acetate for inj kit 0.25 mg</i> .....	118	.....	97
CETROTIDE KIT 0.25MG.....	118	<i>ciclopirox shampoo 1%</i> .....	97
<i>cevimeline hcl cap 30 mg</i> .....	141	<i>ciclopirox solution 8%</i> .....	97
<i>chlordiazepoxide-amitriptyline tab 10-25</i>		<i>cilostazol tab 100 mg</i> .....	129
<i>mg</i> .....	149	<i>cilostazol tab 50 mg</i> .....	129
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i>		CIMDUO TAB 300-300.....	77
<i>mg</i> .....	149	<i>cimetidine hcl soln 300 mg/5ml</i> .....	156
<i>chlordiazepoxide hcl cap 10 mg</i> .....	32	<i>cimetidine tab 300 mg</i> .....	156
<i>chlordiazepoxide hcl cap 25 mg</i> .....	32	<i>cimetidine tab 400 mg</i> .....	156
<i>chlordiazepoxide hcl cap 5 mg</i> .....	32	<i>cimetidine tab 800 mg</i> .....	156
<i>chlordiazepoxide hcl-clidinium bromide</i>		CIMZIA KIT 200MG.....	124
<i>cap 5-2.5 mg</i> .....	155	CIMZIA PREFL KIT 200MG/ML.....	124
<i>chlorhexidine gluconate soln 0.12%</i> .....	141	CIMZIA START KIT 200MG/ML.....	124
<i>chloroquine phosphate tab 250 mg</i> .....	62	<i>cinacalcet hcl tab 30 mg (base equiv)</i> ....	120
<i>chloroquine phosphate tab 500 mg</i> .....	62	<i>cinacalcet hcl tab 60 mg (base equiv)</i> ....	120
<i>chlorpromazine hcl inj 25 mg/ml</i> .....	76	<i>cinacalcet hcl tab 90 mg (base equiv)</i> ....	120
<i>chlorpromazine hcl inj 50 mg/2ml</i> .....	76	CINRYZE SOL 500 UNIT.....	128
<i>chlorpromazine hcl tab 100 mg</i> .....	76	CIPRO (10%) SUS 500MG/5.....	123
<i>chlorpromazine hcl tab 10 mg</i> .....	76	CIPRO (5%) SUS 250MG/5.....	123
<i>chlorpromazine hcl tab 200 mg</i> .....	76	<i>ciprofloxacin-dexamethasone otic susp</i>	
<i>chlorpromazine hcl tab 25 mg</i> .....	76	<i>0.3-0.1%</i> .....	147
<i>chlorpromazine hcl tab 50 mg</i> .....	76	<i>ciprofloxacin for oral susp 250 mg/5ml</i>	
<i>chlorthalidone tab 25 mg</i> .....	116	<i>(5%) (5 gm/100ml)</i> .....	123
<i>chlorthalidone tab 50 mg</i> .....	116	<i>ciprofloxacin for oral susp 500 mg/5ml</i>	
<i>chlorzoxazone tab 500 mg</i> .....	142	<i>(10%) (10 gm/100ml)</i> .....	123
<i>cholestyramine light powder 4 gm/dose</i>	55	<i>ciprofloxacin hcl ophth soln 0.3% (base</i>	
<i>cholestyramine light powder packets 4 gm</i>		<i>equivalent)</i> .....	144
.....	55		



<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i> .....	146	<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i> .....	95
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i> .....	123	<i>clindamycin phosphate foam 1%</i> .....	95
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i> .....	123	<i>clindamycin phosphate gel 1%</i> .....	95
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i> .....	123	<i>clindamycin phosphate lotion 1%</i> .....	95
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i> .....	124	<i>clindamycin phosphate soln 1%</i> .....	95
<i>citalopram hydrobromide oral soln 10 mg/5ml</i> .....	44	<i>clindamycin phosphate swab 1%</i> .....	95
<i>citalopram hydrobromide tab 10 mg (base equiv)</i> .....	44	<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i> .....	95
<i>citalopram hydrobromide tab 20 mg (base equiv)</i> .....	44	<i>clindamycin phosphate vaginal cream 2%</i> .....	158
<i>citalopram hydrobromide tab 40 mg (base equiv)</i> .....	44	<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> .....	95
<i>clarithromycin for susp 125 mg/5ml</i> .....	133	<i>clobazam suspension 2.5 mg/ml</i> .....	40
<i>clarithromycin for susp 250 mg/5ml</i> .....	133	<i>clobazam tab 10 mg</i> .....	40
<i>clarithromycin tab 250 mg</i> .....	133	<i>clobazam tab 20 mg</i> .....	40
<i>clarithromycin tab 500 mg</i> .....	133	<i>clobetasol propionate cream 0.05%</i> .....	102
<i>clarithromycin tab er 24hr 500 mg</i> .....	133	<i>clobetasol propionate emollient base cream 0.05%</i> .....	102
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i> .....	54	<i>clobetasol propionate foam 0.05%</i> .....	102
<i>clemastine fumarate tab 2.68 mg</i> .....	54	<i>clobetasol propionate gel 0.05%</i> .....	102
CLENPIQ SOL.....	132	<i>clobetasol propionate lotion 0.05%</i> .....	102
CLEVER CHEK TES .....	107	<i>clobetasol propionate oint 0.05%</i> .....	102
CLEVER CHEK TES AUTO CD .....	107	<i>clobetasol propionate shampoo 0.05%</i> .....	102
CLEVER CHEK TES TALK .....	107	<i>clobetasol propionate soln 0.05%</i> .....	102
CLEVER CHEK TES VOICE .....	107	<i>clobetasol propionate spray 0.05%</i> .....	102
CLEVER CHOIC TES MICRO.....	107	<i>clomiphene citrate tab 50 mg</i> .....	117
CLEVR CHOICE TES AUTO-CD.....	107	<i>clomipramine hcl cap 25 mg</i> .....	46
CLEVR CHOICE TES NOCODE .....	107	<i>clomipramine hcl cap 50 mg</i> .....	46
CLIMARA PRO DIS WEEKLY .....	122	<i>clomipramine hcl cap 75 mg</i> .....	46
<i>clindamycin hcl cap 150 mg</i> .....	30	<i>clonazepam orally disintegrating tab 0.125 mg</i> .....	40
<i>clindamycin hcl cap 300 mg</i> .....	30	<i>clonazepam orally disintegrating tab 0.25 mg</i> .....	40
<i>clindamycin hcl cap 75 mg</i> .....	30	<i>clonazepam orally disintegrating tab 0.5 mg</i> .....	40
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i> .....	30	<i>clonazepam orally disintegrating tab 1 mg</i> .....	40
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i> .....	95	<i>clonazepam orally disintegrating tab 2 mg</i> .....	40
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i> .....	95	<i>clonazepam tab 0.5 mg</i> .....	40
		<i>clonazepam tab 1 mg</i> .....	40
		<i>clonazepam tab 2 mg</i> .....	40
		<i>clonidine hcl tab 0.1 mg</i> .....	58

<i>clonidine hcl tab 0.2 mg</i> .....	58	<i>colestipol hcl granules 5 gm</i> .....	55
<i>clonidine hcl tab 0.3 mg</i> .....	58	<i>colestipol hcl tab 1 gm</i> .....	55
<i>clonidine hcl tab er 12hr 0.1 mg</i> .....	5	<i>colistimethate sod for inj 150 mg (colistin</i>	
<i>clonidine tab er 24hr 0.17 mg</i> .....	58	<i>base activity)</i> .....	30
<i>clonidine td patch weekly 0.1 mg/24hr</i> .....	59	COLY-MYCIN M INJ 150MG.....	30
<i>clonidine td patch weekly 0.2 mg/24hr</i> .....	59	COMETRIQ KIT 100MG.....	67
<i>clonidine td patch weekly 0.3 mg/24hr</i> .....	59	COMETRIQ KIT 140MG.....	67
<i>clopidogrel bisulfate tab 300 mg (base</i>		COMETRIQ KIT 60MG.....	67
<i>equiv)</i> .....	129	COMFORT TCH MIS LANC 30G.....	134
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>		COMPLETENATE CHW.....	141
.....	129	CONFIRM/MICR TES GLUCOSE.....	108
<i>clorazepate dipotassium tab 15 mg</i> .....	32	CONTOUR PLUS TES BLD GLUC.....	108
<i>clorazepate dipotassium tab 3.75 mg</i> .....	32	CONTOUR TES BLD GLUC.....	108
<i>clorazepate dipotassium tab 7.5 mg</i> .....	32	CONTOUR TES NEXT.....	108
<i>clotrimazole troche 10 mg</i> .....	141	CONTRAVE TAB 8-90MG.....	3
<i>clotrimazole w/ betamethasone cream 1-</i>		COOL BLOOD TES GLUCOSE.....	108
<i>0.05%</i> .....	97	COPAXONE INJ 20MG/ML.....	150
<i>clotrimazole w/ betamethasone lotion 1-</i>		COPIKTRA CAP 15MG.....	67
<i>0.05%</i> .....	97	COPIKTRA CAP 25MG.....	67
<i>clozapine orally disintegrating tab 100 mg</i>		CORLANOR SOL 5MG/5ML.....	89
.....	75	CORLANOR TAB 5MG.....	89
<i>clozapine orally disintegrating tab 12.5 mg</i>		CORLANOR TAB 7.5MG.....	89
.....	75	COSENTYX INJ 150MG/ML.....	98
<i>clozapine orally disintegrating tab 150 mg</i>		COSENTYX INJ 300DOSE.....	99
.....	75	COSENTYX INJ 75MG/0.5.....	98
<i>clozapine orally disintegrating tab 200 mg</i>		COSENTYX PEN INJ 150MG/ML.....	99
.....	75	COSENTYX PEN INJ 300DOSE.....	99
<i>clozapine orally disintegrating tab 25 mg</i> .....	75	COSENTYX UNO INJ 300/2ML.....	99
<i>clozapine tab 100 mg</i> .....	75	COTELLIC TAB 20MG.....	67
<i>clozapine tab 200 mg</i> .....	75	CREON CAP 12000UNT.....	114
<i>clozapine tab 25 mg</i> .....	75	CREON CAP 24000UNT.....	114
<i>clozapine tab 50 mg</i> .....	75	CREON CAP 3000UNIT.....	114
<i>coal tar soln 20%</i> .....	106	CREON CAP 36000UNT.....	114
<i>codeine sulfate tab 30 mg</i> .....	22	CREON CAP 6000UNIT.....	114
CODEINE SULF TAB 15MG.....	22	<i>cromolyn sodium ophth soln 4%</i> .....	146
CODEINE SULF TAB 60MG.....	22	<i>cromolyn sodium oral conc 100 mg/5ml</i>	124
COLAZAL CAP 750MG.....	124	<i>cromolyn sodium soln nebu 20 mg/2ml</i> ...	34
<i>colchicine tab 0.6 mg</i> .....	127	<i>crotamiton lotion 10%</i> .....	105
<i>colchicine w/ probenecid tab 0.5-500 mg</i>		CUPRIMINE CAP 250MG.....	138
.....	127	CVS ADVANCED TES GLUCOSE.....	108
COLCRYS TAB 0.6MG.....	127	CVS GLUCOSE TES TEST STR.....	108
<i>colesevelam hcl packet for susp 3.75 gm</i>	55	CVS TRUE MET TES GLUCOSE.....	108
<i>colesevelam hcl tab 625 mg</i> .....	55	<i>cyanocobalamin inj 1000 mcg/ml</i> .....	129
<i>colestipol hcl granule packets 5 gm</i> .....	55		

<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i> .....	129	<i>dantrolene sodium cap 25 mg</i> .....	142
<i>cyclobenzaprine hcl tab 10 mg</i> .....	142	<i>dantrolene sodium cap 50 mg</i> .....	142
<i>cyclobenzaprine hcl tab 5 mg</i> .....	142	<i>dapsone gel 5%</i> .....	95
<i>cyclopentolate hcl ophth soln 0.5%</i> .....	144	<i>dapsone gel 7.5%</i> .....	95
<i>cyclopentolate hcl ophth soln 1%</i> .....	144	<i>dapsone tab 100 mg</i> .....	30
<i>cyclopentolate hcl ophth soln 2%</i> .....	144	<i>dapsone tab 25 mg</i> .....	30
<i>cyclophosphamide cap 25 mg</i> .....	63	DAPTACEL INJ.....	155
<i>cyclophosphamide cap 50 mg</i> .....	63	<i>daptomycin for iv soln 350 mg</i> .....	30
CYCLOPHOSPH TAB 25MG.....	63	DAPTOMYCIN INJ 350MG.....	30
CYCLOPHOSPH TAB 50MG.....	63	<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i> .....	157
<i>cycloserine cap 250 mg</i> .....	62	<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i> .....	157
<i>cyclosporine cap 100 mg</i> .....	139	<i>darunavir tab 600 mg</i> .....	77
<i>cyclosporine cap 25 mg</i> .....	139	<i>darunavir tab 800 mg</i> .....	77
<i>cyclosporine modified cap 100 mg</i> .....	139	DAURISMO TAB 100MG.....	65
<i>cyclosporine modified cap 25 mg</i> .....	139	DAURISMO TAB 25MG.....	65
<i>cyclosporine modified cap 50 mg</i> .....	139	DAYPRO TAB 600MG.....	17
<i>cyclosporine modified oral soln 100 mg/ml</i> .....	139	D-CARE BLOOD TES GLUCOSE.....	108
CYLTEZO INJ 10/0.2ML.....	9	<i>deferasirox granules packet 180 mg</i> .....	51
CYLTEZO INJ 20/0.4ML.....	9	<i>deferasirox granules packet 360 mg</i> .....	51
CYLTEZO INJ 40/0.8ML.....	9	<i>deferasirox granules packet 90 mg</i> .....	51
CYLTEZO INJ CROHNS.....	9	<i>deferasirox tab 180 mg</i> .....	51
CYLTEZO INJ PSORIASI.....	9	<i>deferasirox tab 360 mg</i> .....	51
CYLTEZO KIT 40/0.4ML.....	9	<i>deferasirox tab 90 mg</i> .....	51
CYLTEZO KIT CROHNS.....	9	<i>deferasirox tab for oral susp 125 mg</i> .....	51
CYLTEZO PSOR KIT 40/0.4ML.....	9	<i>deferasirox tab for oral susp 250 mg</i> .....	51
<i>cyproheptadine hcl syrup 2 mg/5ml</i> .....	54	<i>deferasirox tab for oral susp 500 mg</i> .....	51
<i>cyproheptadine hcl tab 4 mg</i> .....	54	<i>deferiprone tab 1000 mg</i> .....	51
CYSTAGON CAP 150MG.....	127	<i>deferiprone tab 500 mg</i> .....	51
CYSTAGON CAP 50MG.....	127	<i>deflazacort susp 22.75 mg/ml</i> .....	92
<b>D</b>		<i>deflazacort tab 18 mg</i> .....	92
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i> .....	39	<i>deflazacort tab 30 mg</i> .....	92
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i> .....	39	<i>deflazacort tab 36 mg</i> .....	92
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i> .....	39	<i>deflazacort tab 6 mg</i> .....	92
<i>dalfampridine tab er 12hr 10 mg</i> .....	150	<i>demeclocycline hcl tab 150 mg</i> .....	153
DALVANCE SOL 500MG.....	30	<i>demeclocycline hcl tab 300 mg</i> .....	153
<i>danazol cap 100 mg</i> .....	27	DEMSEER CAP 250MG.....	58
<i>danazol cap 200 mg</i> .....	27	DESCOVY TAB 120-15MG.....	77
<i>danazol cap 50 mg</i> .....	27	DESCOVY TAB 200/25MG.....	78
<i>dantrolene sodium cap 100 mg</i> .....	142	<i>desipramine hcl tab 100 mg</i> .....	46
		<i>desipramine hcl tab 10 mg</i> .....	46
		<i>desipramine hcl tab 150 mg</i> .....	46
		<i>desipramine hcl tab 25 mg</i> .....	46

<i>desipramine hcl tab 50 mg</i> .....	46	<i>dexamethasone tab therapy pack 1.5 mg</i>	
<i>desipramine hcl tab 75 mg</i> .....	46	(21) .....	93
<i>desloratadine tab 5 mg</i> .....	54	<i>dexamethasone tab therapy pack 1.5 mg</i>	
<i>desloratadine tab orally disintegrating 2.5</i>		(27).....	93
<i>mg</i> .....	54	<i>dexamethasone tab therapy pack 1.5 mg</i>	
<i>desloratadine tab orally disintegrating 5 mg</i>		(35).....	93
.....	54	<i>dexamethasone tab therapy pack 1.5 mg</i>	
<i>desmopressin acetate nasal spray soln</i>		(49).....	93
0.01%.....	121	<i>dexamethasone tab therapy pack 1.5 mg</i>	
<i>desmopressin acetate nasal spray soln</i>		(51).....	93
0.01% (refrigerated).....	121	DEXCOM G6 MIS RECEIVER .....	134
<i>desmopressin acetate tab 0.1 mg</i> .....	121	DEXCOM G6 MIS SENSOR .....	134
<i>desmopressin acetate tab 0.2 mg</i> .....	121	DEXCOM G6 MIS TRANSMIT .....	134
<i>desogest-eth estrad &amp; eth estrad tab 0.15-</i>		DEXCOM G7 MIS RECEIVER .....	134
0.02/0.01 mg(21/5) .....	90	DEXCOM G7 MIS SENSOR .....	134
<i>desogest-ethin est tab 0.1-0.025/0.125-</i>		<i>dexlansoprazole cap delayed release 30</i>	
0.025/0.15-0.025mg-mg.....	90	<i>mg</i> .....	156
<i>desogestrel &amp; ethinyl estradiol tab 0.15 mg-</i>		<i>dexlansoprazole cap delayed release 60</i>	
30 mcg.....	90	<i>mg</i> .....	156
<i>desonide cream 0.05%</i> .....	102	<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	
<i>desonide lotion 0.05%</i> .....	102	.....	5
<i>desonide oint 0.05%</i> .....	103	<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	
<i>desoximetasone cream 0.05%</i> .....	103	.....	5
<i>desoximetasone cream 0.25%</i> .....	103	<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	
<i>desoximetasone gel 0.05%</i> .....	103	.....	5
<i>desoximetasone oint 0.25%</i> .....	103	<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	
<i>desoximetasone spray 0.25%</i> .....	103	.....	5
<i>desvenlafaxine succinate tab er 24hr 100</i>		<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	
<i>mg (base equiv)</i> .....	45	.....	5
<i>desvenlafaxine succinate tab er 24hr 25 mg</i>		<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	
<i>(base equiv)</i> .....	45	.....	5
<i>desvenlafaxine succinate tab er 24hr 50 mg</i>		<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	
<i>(base equiv)</i> .....	45	.....	5
<i>dexamethasone elixir 0.5 mg/5ml</i> .....	92	<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	5
<i>dexamethasone sodium phosphate ophth</i>		<i>dexmethylphenidate hcl tab 10 mg</i> .....	5
<i>soln 0.1%</i> .....	145	<i>dexmethylphenidate hcl tab 2.5 mg</i> .....	5
<i>dexamethasone soln 0.5 mg/5ml</i> .....	92	<i>dexmethylphenidate hcl tab 5 mg</i> .....	5
<i>dexamethasone tab 0.5 mg</i> .....	92	<i>dextroamphetamine sulfate cap er 24hr 10</i>	
<i>dexamethasone tab 0.75 mg</i> .....	92	<i>mg</i> .....	1
<i>dexamethasone tab 1.5 mg</i> .....	92	<i>dextroamphetamine sulfate cap er 24hr 15</i>	
<i>dexamethasone tab 1 mg</i> .....	92	<i>mg</i> .....	1
<i>dexamethasone tab 2 mg</i> .....	92	<i>dextroamphetamine sulfate cap er 24hr 5</i>	
<i>dexamethasone tab 4 mg</i> .....	92	<i>mg</i> .....	1
<i>dexamethasone tab 6 mg</i> .....	93		

<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i> .....	1	<i>dicloxacillin sodium cap 250 mg</i> .....	148
<i>dextroamphetamine sulfate tab 10 mg</i> .....	2	<i>dicloxacillin sodium cap 500 mg</i> .....	148
<i>dextroamphetamine sulfate tab 15 mg</i> .....	2	<i>dicyclomine hcl cap 10 mg</i> .....	155
<i>dextroamphetamine sulfate tab 2.5 mg</i> .....	1	<i>dicyclomine hcl oral soln 10 mg/5ml</i> .....	155
<i>dextroamphetamine sulfate tab 20 mg</i> .....	2	<i>dicyclomine hcl tab 20 mg</i> .....	155
<i>dextroamphetamine sulfate tab 30 mg</i> .....	2	<i>diethylpropion hcl tab 25 mg</i> .....	3
<i>dextroamphetamine sulfate tab 5 mg</i> .....	2	<i>diethylpropion hcl tab er 24hr 75 mg</i> .....	3
<i>dextroamphetamine sulfate tab 7.5 mg</i> .....	2	DIFFERIN CRE 0.1% .....	95
DHIVY TAB 25-100MG .....	72	DIFFERIN GEL 0.3% .....	95
DIATHRIVE+ MIS TEST STR .....	108	DIFFERIN LOT 0.1% .....	95
DIATHRIVE MIS TEST STR .....	108	DIFICID SUS .....	133
DIATRUE PLUS TES STRIPS .....	108	DIFICID TAB 200MG .....	133
<i>diazepam conc 5 mg/ml</i> .....	32	<i>diflunisal tab 500 mg</i> .....	22
<i>diazepam oral soln 1 mg/ml</i> .....	32	<i>difluprednate ophth emulsion 0.05%</i> .....	145
<i>diazepam rectal gel delivery system 10 mg</i> .....	40	<i>digoxin oral soln 0.05 mg/ml</i> .....	85
<i>diazepam rectal gel delivery system 2.5 mg</i> .....	40	<i>digoxin tab 125 mcg (0.125 mg)</i> .....	85
<i>diazepam rectal gel delivery system 20 mg</i> .....	40	<i>digoxin tab 250 mcg (0.25 mg)</i> .....	85
<i>diazepam tab 10 mg</i> .....	33	<i>digoxin tab 62.5 mcg (0.0625 mg)</i> .....	85
<i>diazepam tab 2 mg</i> .....	33	DILANTIN CAP 30MG .....	42
<i>diazepam tab 5 mg</i> .....	33	<i>diltiazem hcl cap er 12hr 120 mg</i> .....	83
<i>diazoxide susp 50 mg/ml</i> .....	48	<i>diltiazem hcl cap er 12hr 60 mg</i> .....	83
<i>dichlorphenamide tab 50 mg</i> .....	115	<i>diltiazem hcl cap er 12hr 90 mg</i> .....	83
DICLOFENAC CAP 35MG .....	17	<i>diltiazem hcl cap er 24hr 120 mg</i> .....	83
<i>diclofenac epolamine patch 1.3%</i> .....	97	<i>diltiazem hcl cap er 24hr 180 mg</i> .....	83
<i>diclofenac potassium tab 50 mg</i> .....	17	<i>diltiazem hcl cap er 24hr 240 mg</i> .....	84
<i>diclofenac sodium (actinic keratoses) gel 3%</i> .....	98	<i>diltiazem hcl coated beads cap er 24hr 120 mg</i> .....	84
<i>diclofenac sodium ophth soln 0.1%</i> .....	146	<i>diltiazem hcl coated beads cap er 24hr 180 mg</i> .....	84
<i>diclofenac sodium soln 1.5%</i> .....	97	<i>diltiazem hcl coated beads cap er 24hr 240 mg</i> .....	84
<i>diclofenac sodium tab delayed release 25 mg</i> .....	17	<i>diltiazem hcl coated beads cap er 24hr 300 mg</i> .....	84
<i>diclofenac sodium tab delayed release 50 mg</i> .....	17	<i>diltiazem hcl coated beads cap er 24hr 360 mg</i> .....	84
<i>diclofenac sodium tab delayed release 75 mg</i> .....	17	<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i> .....	84
<i>diclofenac sodium tab er 24hr 100 mg</i> .....	17	<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i> .....	84
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i> .....	18	<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i> .....	84
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i> .....	18	<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i> .....	84

<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i> .....	84	<i>DOJOLVI LIQ 100%</i> .....	143
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i> .....	84	<i>donepezil hydrochloride orally disintegrating tab 10 mg</i> .....	149
<i>diltiazem hcl tab 120 mg</i> .....	84	<i>donepezil hydrochloride orally disintegrating tab 5 mg</i> .....	148
<i>diltiazem hcl tab 30 mg</i> .....	84	<i>donepezil hydrochloride tab 10 mg</i> .....	149
<i>diltiazem hcl tab 60 mg</i> .....	84	<i>donepezil hydrochloride tab 23 mg</i> .....	149
<i>diltiazem hcl tab 90 mg</i> .....	84	<i>donepezil hydrochloride tab 5 mg</i> .....	149
<i>diltiazem hcl tab er 24hr 180 mg</i> .....	84	<i>DOPTELET TAB 20MG</i> .....	130
<i>diltiazem hcl tab er 24hr 240 mg</i> .....	84	<i>dorzolamide hcl ophth soln 2%</i> .....	146
<i>diltiazem hcl tab er 24hr 300 mg</i> .....	84	<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i> .....	143
<i>diltiazem hcl tab er 24hr 360 mg</i> .....	84	<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i> .....	144
<i>diltiazem hcl tab er 24hr 420 mg</i> .....	84	<i>DOVATO TAB 50-300MG</i> .....	78
<i>dimethyl fumarate capsule delayed release 120 mg</i> .....	150	<i>doxazosin mesylate tab 1 mg</i> .....	59
<i>dimethyl fumarate capsule delayed release 240 mg</i> .....	150	<i>doxazosin mesylate tab 2 mg</i> .....	59
<i>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</i> .....	150	<i>doxazosin mesylate tab 4 mg</i> .....	59
<i>DIP/TET PED INJ 25-5LFU</i> .....	155	<i>doxazosin mesylate tab 8 mg</i> .....	59
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i> .....	51	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i> .....	132
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i> .....	51	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i> .....	132
<i>dipyridamole tab 25 mg</i> .....	129	<i>doxepin hcl cap 100 mg</i> .....	46
<i>dipyridamole tab 50 mg</i> .....	129	<i>doxepin hcl cap 10 mg</i> .....	46
<i>dipyridamole tab 75 mg</i> .....	129	<i>doxepin hcl cap 150 mg</i> .....	46
<i>disopyramide phosphate cap 100 mg</i> .....	33	<i>doxepin hcl cap 25 mg</i> .....	46
<i>disopyramide phosphate cap 150 mg</i> .....	33	<i>doxepin hcl cap 50 mg</i> .....	46
<i>disulfiram tab 250 mg</i> .....	148	<i>doxepin hcl cap 75 mg</i> .....	46
<i>disulfiram tab 500 mg</i> .....	148	<i>doxepin hcl conc 10 mg/ml</i> .....	46
<i>divalproex sodium cap delayed release sprinkle 125 mg</i> .....	43	<i>doxepin hcl cream 5%</i> .....	98
<i>divalproex sodium tab delayed release 125 mg</i> .....	43	<i>doxercalciferol cap 0.5 mcg</i> .....	120
<i>divalproex sodium tab delayed release 250 mg</i> .....	43	<i>doxercalciferol cap 1 mcg</i> .....	120
<i>divalproex sodium tab delayed release 500 mg</i> .....	43	<i>doxercalciferol cap 2.5 mcg</i> .....	120
<i>divalproex sodium tab er 24 hr 250 mg</i> ....	43	<i>doxycycline hyclate cap 100 mg</i> .....	154
<i>divalproex sodium tab er 24 hr 500 mg</i> ....	43	<i>doxycycline hyclate cap 50 mg</i> .....	154
<i>dofetilide cap 125 mcg (0.125 mg)</i> .....	34	<i>doxycycline hyclate tab 100 mg</i> .....	154
<i>dofetilide cap 250 mcg (0.25 mg)</i> .....	34	<i>doxycycline hyclate tab 20 mg</i> .....	154
<i>dofetilide cap 500 mcg (0.5 mg)</i> .....	34	<i>doxycycline monohydrate cap 100 mg</i> ....	154
		<i>doxycycline monohydrate cap 50 mg</i> ....	154
		<i>doxycycline monohydrate for susp 25 mg/5ml</i> .....	154
		<i>doxycycline monohydrate tab 100 mg</i> ....	154
		<i>doxycycline monohydrate tab 150 mg</i> ....	154

<i>doxycycline monohydrate tab 50 mg</i> .....	154	EASYMAX TES.....	109
<i>doxycycline monohydrate tab 75 mg</i> .....	154	EASY PLUS II TES BLD GLUC .....	108
<i>doxylamine-pyridoxine tab delayed release</i>		EASYPRO PLUS TES .....	109
<i>10-10 mg</i> .....	52	EASYPRO TES BLD GLUC.....	109
<i>dronabinol cap 10 mg</i> .....	52	EASY STEP TES.....	108
<i>dronabinol cap 2.5 mg</i> .....	52	EASY TALK TES BLD GLUC .....	108
<i>dronabinol cap 5 mg</i> .....	52	EASY TALK TES PLUS II.....	108
<i>drospirenone-ethinyl estradiol tab 3-0.02</i>		EASY TOUCH TES GLUCOSE .....	108
<i>mg</i> .....	90	EASY TOUCH TES HEALTHPR.....	108
<i>drospirenone-ethinyl estradiol tab 3-0.03</i>		EASY TOUCH TES STRIPS.....	108
<i>mg</i> .....	90	EASY TRAK II TES BLD GLUC.....	109
<i>drospirenone-ethinyl estrad-levomefolate</i>		EASY TRAK TES BLD GLUC.....	109
<i>tab 3-0.02-0.451 mg</i> .....	90	EC-NAPROSYN TAB 375MG .....	18
<i>drospirenone-ethinyl estrad-levomefolate</i>		EC-NAPROSYN TAB 500MG .....	18
<i>tab 3-0.03-0.451 mg</i> .....	90	<i>econazole nitrate cream 1%</i> .....	97
<i>droxidopa cap 100 mg</i> .....	159	EDURANT TAB 25MG .....	78
<i>droxidopa cap 200 mg</i> .....	159	<i>efavirenz cap 200 mg</i> .....	78
<i>droxidopa cap 300 mg</i> .....	159	<i>efavirenz cap 50 mg</i> .....	78
DUAKLIR AER 400/12 .....	37	<i>efavirenz-emtricitabine-tenofovir df tab</i>	
DUEXIS TAB 800-26.6.....	18	<i>600-200-300 mg</i> .....	78
DULERA AER 100-5MCG.....	37	<i>efavirenz-lamivudine-tenofovir df tab 400-</i>	
DULERA AER 200-5MCG .....	37	<i>300-300 mg</i> .....	78
DULERA AER 50-5MCG.....	37	<i>efavirenz-lamivudine-tenofovir df tab 600-</i>	
<i>duloxetine hcl enteric coated pellets cap 20</i>		<i>300-300 mg</i> .....	78
<i>mg (base eq)</i> .....	45	<i>efavirenz tab 600 mg</i> .....	78
<i>duloxetine hcl enteric coated pellets cap 30</i>		EGRIFTA SV INJ 2MG .....	118
<i>mg (base eq)</i> .....	45	ELEMENT TES .....	109
<i>duloxetine hcl enteric coated pellets cap 40</i>		ELEMNT COMPA TES STRIPS .....	109
<i>mg (base eq)</i> .....	45	<i>eletriptan hydrobromide tab 20 mg (base</i>	
<i>duloxetine hcl enteric coated pellets cap 60</i>		<i>equivalent)</i> .....	136
<i>mg (base eq)</i> .....	45	<i>eletriptan hydrobromide tab 40 mg (base</i>	
DUOBRII LOT.....	103	<i>equivalent)</i> .....	137
DUO-CARE TES.....	108	ELLA TAB 30MG .....	92
DUPIXENT INJ 100/0.67 .....	104	ELMIRON CAP 100MG.....	127
DUPIXENT INJ 200/1.14 .....	104	EMBRACE EVO TES.....	109
DUPIXENT INJ 200MG .....	104	EMBRACE PRO TES .....	109
DUPIXENT INJ 300/2ML.....	104	EMBRACE TALK TES STRIPS.....	109
<i>dutasteride cap 0.5 mg</i> .....	127	EMBRACE TES BLD GLUC.....	109
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>		EMBRACE WAVE TES STRIPS .....	109
.....	127	EMCYT CAP 140MG .....	65
<b>E</b>		EMGALITY INJ 100MG/ML.....	136
EASYGLUCO TES.....	109	EMGALITY INJ 120MG/ML.....	136
EASYMAX 15 TES.....	109	<i>emtricitabine caps 200 mg</i> .....	78
EASY MAX GLC TES STRIP.....	108		

<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> .....	78	ENSTILAR AER .....	103
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> .....	78	<i>entacapone tab 200 mg</i> .....	71
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> .....	78	<i>entecavir tab 0.5 mg</i> .....	80
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> .....	78	<i>entecavir tab 1 mg</i> .....	80
EMTRIVA SOL 10MG/ML .....	78	ENTRESTO CAP 15-16MG.....	86
EMVERM CHW 100MG .....	29	ENTRESTO CAP 6-6MG .....	86
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i> .....	60	ENTRESTO TAB 24-26MG .....	86
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i> .....	60	ENTRESTO TAB 49-51MG.....	86
<i>enalapril maleate oral soln 1 mg/ml</i> .....	57	ENTRESTO TAB 97-103MG.....	86
<i>enalapril maleate tab 10 mg</i> .....	57	ENTYVIO PEN INJ 108/0.68 .....	124
<i>enalapril maleate tab 2.5 mg</i> .....	57	ENVARBUS XR TAB 0.75MG .....	139
<i>enalapril maleate tab 20 mg</i> .....	57	ENVARBUS XR TAB 1MG .....	139
<i>enalapril maleate tab 5 mg</i> .....	57	ENVARBUS XR TAB 4MG .....	139
ENBREL INJ 25/0.5ML .....	21	EPCLUSA PAK 150-37.5 .....	80
ENBREL INJ 25MG .....	21	EPCLUSA PAK 200-50MG .....	80
ENBREL INJ 50MG/ML .....	21	EPCLUSA TAB 200-50MG .....	80
ENBREL MINI INJ 50MG/ML.....	21	EPCLUSA TAB 400-100 .....	80
ENBREL SRCLK INJ 50MG/ML .....	22	EPIDIOLEX SOL 100MG/ML.....	40
ENCARE SUP 100MG.....	158	EPIDUO FORTE GEL 0.3-2.5% .....	95
ENDARI POW 5GM.....	129	EPIDUO GEL 0.1-2.5%.....	95
ENDOMETRIN SUP 100MG .....	158	<i>epinastine hcl ophth soln 0.05%</i> .....	146
ENLITE GLUCO MIS SENSOR.....	134	<i>epinephrine hcl nasal soln 0.1%</i> .....	143
<i>enoxaparin sodium inj 300 mg/3ml</i> .....	39	<i>epinephrine inj 1 mg/ml (1:1000)</i> .....	158
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i> .....	39	<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i> .....	158
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i> .....	39	<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i> .....	159
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i> .....	39	<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i> .....	158
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i> .....	39	<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i> .....	158
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i> .....	39	EPIPEN 2-PAK INJ 0.3MG .....	159
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i> .....	39	<i>eplerenone tab 25 mg</i> .....	62
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i> .....	39	<i>eplerenone tab 50 mg</i> .....	62
ENSPRYNG INJ.....	139	EPOGEN INJ 10000/ML .....	130
		EPOGEN INJ 2000/ML .....	130
		EPOGEN INJ 20000/ML .....	130
		EPOGEN INJ 3000/ML .....	130
		EPOGEN INJ 4000/ML .....	130
		<i>ergocalciferol cap 1.25 mg (50000 unit)</i> .	159
		<i>ergoloid mesylates tab 1 mg</i> .....	152
		ERIVEDGE CAP 150MG .....	65
		ERLEADA TAB 240MG .....	65
		ERLEADA TAB 60MG .....	65



<i>erlotinib hcl tab 100 mg (base equivalent)</i>	64	<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	156
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	64	<i>estazolam tab 1 mg</i>	132
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	64	<i>estazolam tab 2 mg</i>	132
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	133	<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	122
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	133	<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	122
<i>erythromycin ethylsuccinate tab 400 mg</i>	133	<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	122
<i>erythromycin gel 2%</i>	95	<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	122
<i>erythromycin ophth oint 5 mg/gm</i>	145	<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	123
<i>erythromycin pads 2%</i>	95	<i>estradiol tab 0.5 mg</i>	123
<i>erythromycin soln 2%</i>	95	<i>estradiol tab 1 mg</i>	123
<i>erythromycin stearate tab 250 mg</i>	133	<i>estradiol tab 2 mg</i>	123
<i>erythromycin tab 250 mg</i>	133	<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	123
<i>erythromycin tab 500 mg</i>	133	<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	123
<i>erythromycin tab delayed release 250 mg</i>	133	<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	123
<i>erythromycin tab delayed release 333 mg</i>	133	<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	123
<i>erythromycin tab delayed release 500 mg</i>	133	<i>estradiol td gel 1 mg/gm (0.1%)</i>	123
<i>erythromycin w/ delayed release particles cap 250 mg</i>	133	<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	123
<i>ESBRIET CAP 267MG</i>	153	<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	123
<i>ESBRIET TAB 267MG</i>	153	<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	123
<i>ESBRIET TAB 801MG</i>	153	<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	123
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	44	<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	123
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	44	<i>estradiol td patch weekly 0.025 mg/24hr</i>	123
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	44	<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	123
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	44	<i>estradiol td patch weekly 0.05 mg/24hr</i>	123
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	156	<i>estradiol td patch weekly 0.06 mg/24hr</i>	123
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	156	<i>estradiol td patch weekly 0.075 mg/24hr</i>	123
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	156	<i>estradiol td patch weekly 0.1 mg/24hr</i>	123
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	156	<i>estradiol vaginal cream 0.1 mg/gm</i>	158
		<i>estradiol valerate im in oil 10 mg/ml</i>	123
		<i>estradiol valerate im in oil 20 mg/ml</i>	123

<i>estradiol valerate im in oil 40 mg/ml</i> .....	123	EVOTAZ TAB 300-150.....	78
<i>eszopiclone tab 1 mg</i> .....	132	EVRYSDI SOL.....	143
<i>eszopiclone tab 2 mg</i> .....	132	<i>exemestane tab 25 mg</i> .....	65
<i>eszopiclone tab 3 mg</i> .....	132	EXJADE TAB 125MG.....	52
<i>ethacrynic acid tab 25 mg</i> .....	115	EXJADE TAB 250MG.....	52
<i>ethambutol hcl tab 100 mg</i> .....	63	EXJADE TAB 500MG.....	52
<i>ethambutol hcl tab 400 mg</i> .....	63	EXTAVIA INJ 0.3MG.....	150
<i>ethosuximide cap 250 mg</i> .....	43	<i>ezetimibe-simvastatin tab 10-10 mg</i> .....	54
<i>ethosuximide soln 250 mg/5ml</i> .....	43	<i>ezetimibe-simvastatin tab 10-20 mg</i> .....	54
<i>ethyl chloride aerosol spray</i> .....	105	<i>ezetimibe-simvastatin tab 10-40 mg</i> .....	54
<i>ethynodiol diacetate &amp; ethinyl estradiol tab</i> <i>1 mg-35 mcg</i> .....	90	<i>ezetimibe-simvastatin tab 10-80 mg</i> .....	54
<i>ethynodiol diacetate &amp; ethinyl estradiol tab</i> <i>1 mg-50 mcg</i> .....	90	<i>ezetimibe tab 10 mg</i> .....	56
<i>etodolac cap 200 mg</i> .....	18	<b>F</b>	
<i>etodolac cap 300 mg</i> .....	18	<i>famciclovir tab 125 mg</i> .....	81
<i>etodolac tab 400 mg</i> .....	18	<i>famciclovir tab 250 mg</i> .....	81
<i>etodolac tab 500 mg</i> .....	18	<i>famciclovir tab 500 mg</i> .....	81
<i>etodolac tab er 24hr 400 mg</i> .....	18	<i>famotidine for susp 40 mg/5ml</i> .....	156
<i>etodolac tab er 24hr 500 mg</i> .....	18	<i>famotidine tab 40 mg</i> .....	156
<i>etodolac tab er 24hr 600 mg</i> .....	18	FANAPT TAB 10MG.....	74
<i>etonogestrel-ethinyl estradiol va ring 0.12-</i> <i>0.015 mg/24hr</i> .....	92	FANAPT TAB 12MG.....	74
<i>etoposide cap 50 mg</i> .....	71	FANAPT TAB 1MG.....	74
<i>etravirine tab 100 mg</i> .....	78	FANAPT TAB 2MG.....	74
<i>etravirine tab 200 mg</i> .....	78	FANAPT TAB 4MG.....	74
EUA PATIENT MIS ASSESS.....	140	FANAPT TAB 6MG.....	74
EULEXIN CAP 125MG.....	65	FANAPT TAB 8MG.....	74
<i>everolimus tab 0.25 mg</i> .....	139	FASENRA INJ 10MG/0.5.....	34
<i>everolimus tab 0.5 mg</i> .....	139	FASENRA PEN INJ 30MG/ML.....	34
<i>everolimus tab 0.75 mg</i> .....	139	FASTCLIX MIS LANCETS.....	134
<i>everolimus tab 10 mg</i> .....	67	FC2 FEMALE MIS CONDOM.....	133
<i>everolimus tab 1 mg</i> .....	139	<i>febuxostat tab 40 mg</i> .....	128
<i>everolimus tab 2.5 mg</i> .....	67	<i>febuxostat tab 80 mg</i> .....	128
<i>everolimus tab 5 mg</i> .....	67	<i>felbamate susp 600 mg/5ml</i> .....	42
<i>everolimus tab 7.5 mg</i> .....	67	<i>felbamate tab 400 mg</i> .....	42
<i>everolimus tab for oral susp 2 mg</i> .....	67	<i>felbamate tab 600 mg</i> .....	42
<i>everolimus tab for oral susp 3 mg</i> .....	67	FELDENE CAP 10MG.....	18
<i>everolimus tab for oral susp 5 mg</i> .....	67	FELDENE CAP 20MG.....	18
EVERSENSE E3 MIS SENSOR.....	134	<i>felodipine tab er 24hr 10 mg</i> .....	84
EVERSENSE E3 MIS TRANSMTR.....	134	<i>felodipine tab er 24hr 2.5 mg</i> .....	84
EVERSENSE MIS SENSOR.....	134	<i>felodipine tab er 24hr 5 mg</i> .....	84
EVERSENSE MIS TRANSMTR.....	134	FEMCAP MIS 22MM.....	133
EVOLUTION TES AUTOCODE.....	109	FEMCAP MIS 26MM.....	133
		FEMCAP MIS 30MM.....	134
		<i>fenofibrate cap 150 mg</i> .....	55
		<i>fenofibrate micronized cap 134 mg</i> .....	55

<i>fenofibrate micronized cap 200 mg</i> .....	55	FIASP PENFIL INJ U-100.....	50
<i>fenofibrate micronized cap 43 mg</i> .....	55	FIFTY50 GLUC TES 2.0 .....	109
<i>fenofibrate micronized cap 67 mg</i> .....	55	FILSPARI TAB 200MG .....	127
<i>fenofibrate tab 145 mg</i> .....	55	FILSPARI TAB 400MG .....	127
<i>fenofibrate tab 160 mg</i> .....	55	<i>finasteride tab 1 mg</i> .....	104
<i>fenofibrate tab 48 mg</i> .....	55	<i>finasteride tab 5 mg</i> .....	127
<i>fenofibrate tab 54 mg</i> .....	55	<i>ingolimod hcl cap 0.5 mg (base equiv)</i> ..	150
<i>fenofibric acid tab 105 mg</i> .....	55	FIRAZYR INJ 30MG/3ML .....	128
<i>fenofibric acid tab 35 mg</i> .....	55	<i>flavoxate hcl tab 100 mg</i> .....	157
FENOPROFEN CAP 200MG .....	18	<i>flecainide acetate tab 100 mg</i> .....	33
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i> .....	22	<i>flecainide acetate tab 150 mg</i> .....	33
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i> .....	22	<i>flecainide acetate tab 50 mg</i> .....	33
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i> .....	22	FLOVENT DISK AER 100MCG .....	36
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i> .....	22	FLOVENT DISK AER 250MCG .....	36
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i> .....	22	FLOVENT DISK AER 50MCG.....	36
<i>fentanyl citrate lozenge on a handle 1200 mcg</i> .....	23	FLOVENT HFA AER 110MCG .....	36
<i>fentanyl citrate lozenge on a handle 1600 mcg</i> .....	23	FLOVENT HFA AER 220MCG.....	36
<i>fentanyl citrate lozenge on a handle 200 mcg</i> .....	22	FLOVENT HFA AER 44MCG.....	36
<i>fentanyl citrate lozenge on a handle 400 mcg</i> .....	22	FLUAD INJ 2024-25.....	157
<i>fentanyl citrate lozenge on a handle 600 mcg</i> .....	23	FLUARIX INJ 2024-25.....	157
<i>fentanyl citrate lozenge on a handle 800 mcg</i> .....	23	FLUBLOK INJ 2024-25 .....	157
<i>fentanyl td patch 72hr 100 mcg/hr</i> .....	23	FLUCELVAX INJ 2024-25 .....	158
<i>fentanyl td patch 72hr 12 mcg/hr</i> .....	23	<i>fluconazole for susp 10 mg/ml</i> .....	53
<i>fentanyl td patch 72hr 25 mcg/hr</i> .....	23	<i>fluconazole for susp 40 mg/ml</i> .....	53
<i>fentanyl td patch 72hr 37.5 mcg/hr</i> .....	23	<i>fluconazole tab 100 mg</i> .....	53
<i>fentanyl td patch 72hr 50 mcg/hr</i> .....	23	<i>fluconazole tab 150 mg</i> .....	53
<i>fentanyl td patch 72hr 62.5 mcg/hr</i> .....	23	<i>fluconazole tab 200 mg</i> .....	53
<i>fentanyl td patch 72hr 75 mcg/hr</i> .....	23	<i>fluconazole tab 50 mg</i> .....	53
<i>fentanyl td patch 72hr 87.5 mcg/hr</i> .....	23	<i>flucytosine cap 250 mg</i> .....	53
<i>fesoterodine fumarate tab er 24hr 4 mg</i> .	157	<i>fludrocortisone acetate tab 0.1 mg</i> .....	94
<i>fesoterodine fumarate tab er 24hr 8 mg</i> .	157	FLULAVAL INJ 2024-25.....	158
FIASP FLEX INJ TOUCH.....	50	FLUMIST NASA LIQ 2024-25.....	158
FIASP INJ 100/ML.....	50	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i> .....	143
		<i>fluocinolone acetonide (otic) oil 0.01%</i> ...	147
		<i>fluocinolone acetonide cream 0.01%</i> .....	103
		<i>fluocinolone acetonide cream 0.025%</i> ...	103
		<i>fluocinolone acetonide oil 0.01% (body oil)</i> .....	103
		<i>fluocinolone acetonide oil 0.01% (scalp oil)</i> .....	103
		<i>fluocinolone acetonide oint 0.025%</i> .....	103
		<i>fluocinolone acetonide soln 0.01%</i> .....	103
		<i>fluocinonide cream 0.05%</i> .....	103

<i>fluocinonide emulsified base cream 0.05%</i> .....	103	<i>fluticasone propionate lotion 0.05%</i> .....	103
<i>fluocinonide gel 0.05%</i> .....	103	<i>fluticasone propionate nasal susp 50</i> <i>mcg/act</i> .....	143
<i>fluocinonide oint 0.05%</i> .....	103	<i>fluticasone propionate oint 0.005%</i> .....	103
<i>fluocinonide soln 0.05%</i> .....	103	<i>fluticasone-salmeterol aer powder ba 100-</i> <i>50 mcg/act</i> .....	37
<i>fluorometholone ophth susp 0.1%</i> .....	145	<i>fluticasone-salmeterol aer powder ba 113-</i> <i>14 mcg/act</i> .....	37
<i>fluorouracil cream 0.5%</i> .....	98	<i>fluticasone-salmeterol aer powder ba 232-</i> <i>14 mcg/act</i> .....	37
<i>fluorouracil cream 5%</i> .....	98	<i>fluticasone-salmeterol aer powder ba 250-</i> <i>50 mcg/act</i> .....	38
<i>fluorouracil soln 2%</i> .....	98	<i>fluticasone-salmeterol aer powder ba 500-</i> <i>50 mcg/act</i> .....	38
<i>fluorouracil soln 5%</i> .....	98	<i>fluticasone-salmeterol aer powder ba 55-14</i> <i>mcg/act</i> .....	37
<i>fluoxetine hcl cap 10 mg</i> .....	44	<i>fluvastatin sodium cap 20 mg (base</i> <i>equivalent)</i> .....	56
<i>fluoxetine hcl cap 20 mg</i> .....	44	<i>fluvastatin sodium cap 40 mg (base</i> <i>equivalent)</i> .....	56
<i>fluoxetine hcl cap 40 mg</i> .....	44	<i>fluvastatin sodium tab er 24 hr 80 mg (base</i> <i>equivalent)</i> .....	56
<i>fluoxetine hcl cap delayed release 90 mg</i> .....	44	<i>fluvoxamine maleate cap er 24hr 100 mg</i> .....	44
<i>fluoxetine hcl solution 20 mg/5ml</i> .....	44	<i>fluvoxamine maleate cap er 24hr 150 mg</i> .....	44
<i>fluoxetine hcl tab 10 mg</i> .....	44	<i>fluvoxamine maleate tab 100 mg</i> .....	44
<i>fluoxetine hcl tab 20 mg</i> .....	44	<i>fluvoxamine maleate tab 25 mg</i> .....	44
<i>fluphenazine decanoate inj 25 mg/ml</i> .....	76	<i>fluvoxamine maleate tab 50 mg</i> .....	44
<i>fluphenazine hcl elixir 2.5 mg/5ml</i> .....	76	FLUZONE HD INJ 2024-25 .....	158
<i>fluphenazine hcl inj 2.5 mg/ml</i> .....	76	FLUZONE INJ 2024-25 .....	158
<i>fluphenazine hcl oral conc 5 mg/ml</i> .....	76	<i>folic acid cap 0.8 mg</i> .....	129
<i>fluphenazine hcl tab 10 mg</i> .....	76	<i>folic acid tab 1 mg</i> .....	129
<i>fluphenazine hcl tab 1 mg</i> .....	76	<i>folic acid tab 400 mcg</i> .....	129
<i>fluphenazine hcl tab 2.5 mg</i> .....	76	<i>folic acid tab 800 mcg</i> .....	129
<i>fluphenazine hcl tab 5 mg</i> .....	76	FOLLISTIM AQ INJ 300UNIT.....	117
<i>flurazepam hcl cap 15 mg</i> .....	132	FOLLISTIM AQ INJ 600UNIT.....	117
<i>flurazepam hcl cap 30 mg</i> .....	132	FOLLISTIM AQ INJ 900UNIT.....	117
<i>flurbiprofen sodium ophth soln 0.03%</i> ...	146	<i>fondaparinux sodium subcutaneous inj 10</i> <i>mg/0.8ml</i> .....	39
<i>flurbiprofen tab 100 mg</i> .....	18	<i>fondaparinux sodium subcutaneous inj 2.5</i> <i>mg/0.5ml</i> .....	39
<i>flurbiprofen tab 50 mg</i> .....	18	<i>fondaparinux sodium subcutaneous inj 5</i> <i>mg/0.4ml</i> .....	39
<i>flutamide cap 125 mg</i> .....	65	<i>fondaparinux sodium subcutaneous inj 7.5</i> <i>mg/0.6ml</i> .....	39
<i>fluticasone propionate aer pow ba 100</i> <i>mcg/act</i> .....	36		
<i>fluticasone propionate aer pow ba 250</i> <i>mcg/act</i> .....	36		
<i>fluticasone propionate aer pow ba 50</i> <i>mcg/act</i> .....	36		
<i>fluticasone propionate cream 0.05%</i> .....	103		
<i>fluticasone propionate hfa inhal aer 110</i> <i>mcg/act</i> .....	36		
<i>fluticasone propionate hfa inhal aer 220</i> <i>mcg/act</i> .....	36		
<i>fluticasone propionate hfa inhal aero 44</i> <i>mcg/act</i> .....	36		

FORA 6CON TES GTEL .....	109	FREESTY LIBR KIT 2 SENSOR .....	134
FORA 6 MIS CONNECT .....	109	FREESTY LIBR KIT 3 SENSOR .....	134
FORA ADVANCE TES PRO .....	109	FREESTY LIBR KIT SENSOR .....	134
FORA BLOOD TES GLUCOSE .....	109	FREESTY LIBR MIS 2 READER.....	134
FORACARE TES GD40 .....	110	FREESTY LIBR MIS 3 READER.....	134
FORACARE TES PREM V10.....	110	FREESTY LIBR MIS READER .....	135
FORACARE TES TST N GO.....	110	<i>frovatriptan succinate tab 2.5 mg (base</i>	
FORA D15G TES BLD GLUC.....	109	<i>equivalent) .....</i>	137
FORA D20 TES BLD GLUC .....	110	FULPHILA INJ 6/0.6ML .....	130
FORA D40/G31 TES GLUCOSE .....	110	<i>furosemide oral soln 10 mg/ml .....</i>	115
FORA G20 TES BLD GLUC .....	110	<i>furosemide oral soln 8 mg/ml .....</i>	115
FORA G30/V10 TES BLD GLUC .....	110	<i>furosemide tab 20 mg.....</i>	115
FORA GD20 TES BLD GLUC.....	110	<i>furosemide tab 40 mg.....</i>	115
FORA GD50 TES .....	110	<i>furosemide tab 80 mg.....</i>	115
FORA GTEL TES BLD GLUC .....	110	FUZEON INJ 90MG .....	78
FORA TN'G TES TN'G VOI .....	110	FYLNETRA INJ 6MG/0.6.....	130
FORA V10 TES BLD GLUC .....	110	<b>G</b>	
FORA V12 TES BLD GLUC .....	110	<i>gabapentin (once-daily) tab 300 mg.....</i>	152
FORA V20 TES BLD GLUC .....	110	<i>gabapentin (once-daily) tab 600 mg.....</i>	152
FORA V30A TES BLD GLUC.....	110	<i>gabapentin cap 100 mg.....</i>	40
<i>formaldehyde solution 10%.....</i>	77	<i>gabapentin cap 300 mg.....</i>	40
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>		<i>gabapentin cap 400 mg .....</i>	40
<i>.....</i>	38	<i>gabapentin oral soln 250 mg/5ml.....</i>	40
FORTEO INJ 600/2.4 .....	116	<i>gabapentin tab 600 mg .....</i>	40
FORTESTA GEL 10MG/ACT .....	27	<i>gabapentin tab 800 mg .....</i>	40
FORTISCARE TES BLD GLUC.....	110	GALAFOLD CAP 123MG .....	120
FORTISCARE TES G1 BLOOD.....	110	<i>galantamine hydrobromide cap er 24hr 16</i>	
<i>fosamprenavir calcium tab 700 mg (base</i>		<i>mg.....</i>	149
<i>equiv).....</i>	78	<i>galantamine hydrobromide cap er 24hr 24</i>	
<i>fosfomycin tromethamine powd pack 3 gm</i>		<i>mg.....</i>	149
<i>(base equivalent).....</i>	30	<i>galantamine hydrobromide cap er 24hr 8</i>	
<i>fosinopril sodium &amp; hydrochlorothiazide tab</i>		<i>mg.....</i>	149
<i>10-12.5 mg .....</i>	60	<i>galantamine hydrobromide oral soln 4</i>	
<i>fosinopril sodium &amp; hydrochlorothiazide tab</i>		<i>mg/ml.....</i>	149
<i>20-12.5 mg .....</i>	60	<i>galantamine hydrobromide tab 12 mg.....</i>	149
<i>fosinopril sodium tab 10 mg .....</i>	57	<i>galantamine hydrobromide tab 4 mg.....</i>	149
<i>fosinopril sodium tab 20 mg .....</i>	57	<i>galantamine hydrobromide tab 8 mg.....</i>	149
<i>fosinopril sodium tab 40 mg .....</i>	57	GANIRELIX AC INJ 250/0.5.....	118
FREE LIBRE3 KIT PLUS/SEN.....	134	<i>gatifloxacin ophth soln 0.5%.....</i>	145
FREESTYLE MIS READER .....	135	GATTEX KIT 5MG.....	126
FREESTYLE TES.....	110	GE100 BLOOD TES GLUCOSE.....	111
FREESTYLE TES INSULINX.....	110	<i>gefitinib tab 250 mg.....</i>	64
FREESTYLE TES LITE.....	110	<i>gemfibrozil tab 600 mg .....</i>	55
FREESTYLE TES PREC NEO.....	110	GENOTROPIN INJ 0.2MG .....	118

GENOTROPIN INJ 0.4MG .....	118	<i>glucagon (rdna) for inj kit 1 mg.....</i>	48
GENOTROPIN INJ 0.6MG .....	118	GLUCOCARD 01 TES PLUS.....	111
GENOTROPIN INJ 0.8MG .....	118	GLUCOCARD 01 TES SENSOR.....	111
GENOTROPIN INJ 1.2MG .....	118	GLUCOCARD TES EXPRESSI.....	111
GENOTROPIN INJ 1.4MG .....	118	GLUCOCARD TES SHINE.....	111
GENOTROPIN INJ 1.6MG .....	118	GLUCOCARD TES VITAL.....	111
GENOTROPIN INJ 1.8MG .....	118	GLUCOCARD TES X-SENSOR.....	111
GENOTROPIN INJ 12MG .....	118	GLUCOCOM TES.....	111
GENOTROPIN INJ 1MG .....	118	GLUCONAVII TES STRIPS .....	111
GENOTROPIN INJ 2MG .....	118	GLUCO PERFEC TES 3.....	111
GENOTROPIN INJ 5MG .....	118	GLUCOSE TES STRIPS .....	111
<i>gentamicin sulfate cream 0.1%.....</i>	97	<i>glutamine (sickle cell) powd pack 5 gm ..</i>	129
<i>gentamicin sulfate oint 0.1%.....</i>	97	<i>glyburide-metformin tab 1.25-250 mg .....</i>	47
<i>gentamicin sulfate ophth oint 0.3% .....</i>	145	<i>glyburide-metformin tab 2.5-500 mg.....</i>	47
<i>gentamicin sulfate ophth soln 0.3%.....</i>	145	<i>glyburide-metformin tab 5-500 mg .....</i>	47
GENULTIMATE TES .....	111	<i>glyburide micronized tab 1.5 mg.....</i>	51
GENVOYA TAB.....	78	<i>glyburide micronized tab 3 mg.....</i>	51
GHT TEST TES STRIPS.....	111	<i>glyburide micronized tab 6 mg.....</i>	51
GILENYA CAP 0.25MG .....	150	<i>glyburide tab 1.25 mg.....</i>	51
GILENYA CAP 0.5MG .....	150	<i>glyburide tab 2.5 mg.....</i>	51
GILOTRIF TAB 20MG .....	64	<i>glyburide tab 5 mg.....</i>	51
GILOTRIF TAB 30MG .....	64	<i>glycopyrrolate inj pf soln prefilled syringe</i>	
GILOTRIF TAB 40MG .....	64	<i>0.2 mg/ml.....</i>	155
GLARGIN YFGN INJ 100U/ML .....	50	<i>glycopyrrolate inj pf soln pref syr 0.4</i>	
GLARGIN YFGN SOL 100U/ML .....	50	<i>mg/2ml (0.2 mg/ml).....</i>	155
<i>glatiramer acetate soln prefilled syringe 20</i>		<i>glycopyrrolate oral soln 1 mg/5ml .....</i>	155
<i>mg/ml.....</i>	151	<i>glycopyrrolate tab 1 mg.....</i>	155
<i>glatiramer acetate soln prefilled syringe 40</i>		<i>glycopyrrolate tab 2 mg.....</i>	155
<i>mg/ml.....</i>	151	GLYXAMBI TAB 10-5 MG.....	47
GLEEVEC TAB 100MG .....	67	GLYXAMBI TAB 25-5 MG .....	47
GLEEVEC TAB 400MG .....	67	GNP TRUETRAC TES SMRT SYS.....	111
<i>glimepiride tab 1 mg .....</i>	51	GNP TRU METR TES STRIPS.....	111
<i>glimepiride tab 2 mg.....</i>	51	GOJJI BLOOD TES GLUCOSE.....	111
<i>glimepiride tab 3 mg.....</i>	51	GOJJI STRIPS MIS W/LANCET .....	111
<i>glimepiride tab 4 mg .....</i>	51	GONAL-F INJ 1050UNIT .....	117
<i>glipizide-metformin hcl tab 2.5-250 mg...47</i>		GONAL-F INJ 450UNIT .....	117
<i>glipizide-metformin hcl tab 2.5-500 mg...47</i>		GONAL-F RFF INJ 300/0.5 .....	117
<i>glipizide-metformin hcl tab 5-500 mg.....47</i>		GONAL-F RFF INJ 450/0.75 .....	117
<i>glipizide tab 10 mg.....</i>	51	GONAL-F RFF INJ 75UNIT.....	117
<i>glipizide tab 5 mg.....</i>	51	GONAL-F RFF INJ 900/1.5 .....	117
<i>glipizide tab er 24hr 10 mg .....</i>	51	<i>granisetron hcl tab 1 mg.....</i>	52
<i>glipizide tab er 24hr 2.5 mg.....</i>	51	GRANIX INJ 300/0.5.....	130
<i>glipizide tab er 24hr 5 mg.....</i>	51	GRANIX INJ 300/1ML.....	130
GLOPERBA SOL 0.6/5ML .....	128	GRANIX INJ 480/0.8.....	130

GRANIX INJ 480/1.6 .....	130	<i>haloperidol tab 10 mg</i> .....	75
<i>griseofulvin microsize susp 125 mg/5ml</i> ....	53	<i>haloperidol tab 1 mg</i> .....	74
<i>griseofulvin microsize tab 500 mg</i> .....	53	<i>haloperidol tab 20 mg</i> .....	75
<i>griseofulvin ultramicrosize tab 125 mg</i> ....	53	<i>haloperidol tab 2 mg</i> .....	75
<i>griseofulvin ultramicrosize tab 250 mg</i> ....	53	<i>haloperidol tab 5 mg</i> .....	75
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	94	HARVONI PAK .....	80
<i>guanfacine hcl tab 1 mg</i> .....	59	HARVONI PAK 45-200MG .....	80
<i>guanfacine hcl tab 2 mg</i> .....	59	HARVONI TAB 45-200MG .....	80
<i>guanfacine hcl tab er 24hr 1 mg (base</i>		HARVONI TAB 90-400MG .....	80
<i>equiv)</i> .....	5	HEMLIBRA INJ 105/0.7 .....	128
<i>guanfacine hcl tab er 24hr 2 mg (base</i>		HEMLIBRA INJ 150/ML .....	128
<i>equiv)</i> .....	5	HEMLIBRA INJ 300/2ML .....	128
<i>guanfacine hcl tab er 24hr 3 mg (base</i>		HEMLIBRA INJ 30MG/ML .....	128
<i>equiv)</i> .....	5	HEMLIBRA INJ 60/0.4 .....	128
<i>guanfacine hcl tab er 24hr 4 mg (base</i>		HEMLIBRA SOL 12/0.4ML .....	128
<i>equiv)</i> .....	5	<i>heparin sodium (porcine) inj 10000 unit/ml</i>	
GUARDIAN 4 MIS SENSOR .....	135	.....	39
GUARDIAN 4 MIS TRANSMIT .....	135	<i>heparin sodium (porcine) inj 1000 unit/ml</i>	39
GUARDIAN CON MIS TRANSMIT .....	135	<i>heparin sodium (porcine) inj 20000 unit/ml</i>	
GUARDIAN MIS LINK 3 .....	135	.....	39
GUARDIAN MIS SENSOR 3 .....	135	<i>heparin sodium (porcine) inj 5000 unit/ml</i>	
GUARDIAN RT MIS REPL PED .....	135	.....	39
GVOKE HYPO 1 INJ 0.5/.1ML .....	48	<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	
GVOKE HYPO 1 INJ 1MG/.2ML .....	48	.....	39
GVOKE HYPO 2 INJ 0.5/.1ML .....	48	<i>heparin sodium (porcine) pf inj 5000</i>	
GVOKE HYPO 2 INJ 1MG/.2ML .....	49	<i>unit/0.5ml</i> .....	39
GVOKE KIT SOL 1MG/0.2M.....	49	<i>homatropine hbr ophth soln 5%</i> .....	144
GVOKE PFS INJ .....	49	HULIO INJ 40/0.8ML .....	9
GYNOL II GEL 3% .....	158	HULIO KIT 20/0.4ML .....	9
<b>H</b>		HUMATROPE INJ 12MG .....	118
HADLIMA INJ 40/0.4ML .....	9	HUMATROPE INJ 24MG .....	118
HADLIMA INJ 40/0.8ML .....	9	HUMATROPE INJ 6MG .....	118
HADLIMA PUSH INJ 40/0.4ML .....	9	HUMIRA INJ 10/0.1ML .....	9
HADLIMA PUSH INJ 40/0.8ML .....	9	HUMIRA INJ 20/0.2ML .....	9
HAEGARDA INJ 2000UNIT.....	128	HUMIRA INJ 40/0.4ML .....	9
HAEGARDA INJ 3000UNIT.....	128	HUMIRA KIT 40MG/0.8 .....	10
<i>halobetasol propionate cream 0.05%</i> .....	103	HUMIRA PEDIA INJ CROHNS .....	10
<i>halobetasol propionate oint 0.05%</i> .....	103	HUMIRA PEN INJ 40/0.4ML .....	10
<i>haloperidol decanoate im soln 100 mg/ml</i>		HUMIRA PEN INJ 40MG/0.8 .....	10
.....	74	HUMIRA PEN INJ 80/0.8ML .....	10
<i>haloperidol decanoate im soln 50 mg/ml</i>	74	HUMIRA PEN INJ CD/UC/HS.....	10
<i>haloperidol lactate inj 5 mg/ml</i> .....	74	HUMIRA PEN INJ PS/UV .....	10
<i>haloperidol lactate oral conc 2 mg/ml</i> .....	74	HUMIRA PEN KIT 80/0.8ML .....	10
<i>haloperidol tab 0.5 mg</i> .....	74	HUMIRA PEN KIT CD/UC/HS.....	10

HUMIRA PEN KIT PED UC.....	10	<i>hydrocodone bitartrate tab er 24hr deter</i>	
HUMIRA PEN KIT PS/UV.....	10	100 mg.....	23
HUMULIN R INJ U-500.....	50	<i>hydrocodone bitartrate tab er 24hr deter</i>	
HW EMBRACE TES PRO.....	111	120 mg.....	23
HW EMBRACE TES STRIPS.....	111	<i>hydrocodone bitartrate tab er 24hr deter</i>	20
HYCAMTIN CAP 0.25MG.....	71	mg.....	23
HYCAMTIN CAP 1MG.....	71	<i>hydrocodone bitartrate tab er 24hr deter</i>	30
<i>hydralazine hcl tab 100 mg.....</i>	62	mg.....	23
<i>hydralazine hcl tab 10 mg.....</i>	62	<i>hydrocodone bitartrate tab er 24hr deter</i>	40
<i>hydralazine hcl tab 25 mg.....</i>	62	mg.....	23
<i>hydralazine hcl tab 50 mg.....</i>	62	<i>hydrocodone bitartrate tab er 24hr deter</i>	60
<i>hydrochlorothiazide cap 12.5 mg.....</i>	116	mg.....	23
<i>hydrochlorothiazide tab 12.5 mg.....</i>	116	<i>hydrocodone bitartrate tab er 24hr deter</i>	80
<i>hydrochlorothiazide tab 25 mg.....</i>	116	mg.....	23
<i>hydrochlorothiazide tab 50 mg.....</i>	116	<i>hydrocodone-ibuprofen tab 10-200 mg...</i>	26
<i>hydrocodone-acetaminophen soln 7.5-325</i>		<i>hydrocodone-ibuprofen tab 5-200 mg....</i>	26
<i>mg/15ml.....</i>	26	<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	26
<i>hydrocodone-acetaminophen tab 10-300</i>		<i>hydrocod polst-chlorphen polst er susp 10-</i>	
<i>mg.....</i>	26	8 mg/5ml.....	94
<i>hydrocodone-acetaminophen tab 10-325</i>		<i>hydrocortisone acetate suppos 25 mg.....</i>	29
<i>mg.....</i>	26	<i>hydrocortisone acetate suppos 30 mg.....</i>	29
<i>hydrocodone-acetaminophen tab 5-300</i>		<i>hydrocortisone acetate w/ pramoxine</i>	
<i>mg.....</i>	26	<i>perianal cream 1-1%.....</i>	28
<i>hydrocodone-acetaminophen tab 5-325</i>		<i>hydrocortisone acetate w/ pramoxine</i>	
<i>mg.....</i>	26	<i>perianal cream 2.5-1%.....</i>	28
<i>hydrocodone-acetaminophen tab 7.5-300</i>		<i>hydrocortisone butyrate cream 0.1%.....</i>	103
<i>mg.....</i>	26	<i>hydrocortisone butyrate oint 0.1%.....</i>	103
<i>hydrocodone-acetaminophen tab 7.5-325</i>		<i>hydrocortisone butyrate soln 0.1%.....</i>	103
<i>mg.....</i>	26	<i>hydrocortisone cream 2.5%.....</i>	103
<i>hydrocodone bitart-homatropine</i>		<i>hydrocortisone enema 100 mg/60ml.....</i>	28
<i>methylbromide tab 5-1.5 mg.....</i>	94	<i>hydrocortisone lotion 2.5%.....</i>	103
<i>hydrocodone bitart-homatropine</i>		<i>hydrocortisone oint 2.5%.....</i>	103
<i>methylbrom soln 5-1.5 mg/5ml.....</i>	94	<i>hydrocortisone perianal cream 2.5%.....</i>	29
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	23	<i>hydrocortisone tab 10 mg.....</i>	93
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	23	<i>hydrocortisone tab 20 mg.....</i>	93
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>		<i>hydrocortisone tab 5 mg.....</i>	93
.....	23	<i>hydrocortisone valerate cream 0.2%.....</i>	103
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>		<i>hydrocortisone valerate oint 0.2%.....</i>	103
.....	23	<i>hydrocortisone w/ acetic acid otic soln 1-</i>	
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>		2%.....	147
.....	23	<i>hydrogen peroxide soln 30%.....</i>	77
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>		<i>hydromorphone hcl liqd 1 mg/ml.....</i>	23
.....	23	<i>hydromorphone hcl tab 2 mg.....</i>	23
		<i>hydromorphone hcl tab 4 mg.....</i>	23



<i>hydromorphone hcl tab 8 mg</i> .....	23	<i>icosapent ethyl cap 1 gm</i> .....	55
<i>hydromorphone hcl tab er 24hr 12 mg</i> .....	23	IDACIO 2-PEN INJ 40/0.8ML.....	12
<i>hydromorphone hcl tab er 24hr 16 mg</i> .....	23	IDACIO 2-SYR INJ 40/0.8ML.....	12
<i>hydromorphone hcl tab er 24hr 32 mg</i> .....	23	IDACIO CROHN INJ DISEASE.....	12
<i>hydromorphone hcl tab er 24hr 8 mg</i> .....	23	IDACIO PLAQU INJ PSORIASI .....	12
<i>hydroxychloroquine sulfate tab 200 mg</i> ...62		IDHIFA TAB 100MG .....	67
<i>hydroxyurea cap 500 mg</i> .....	70	IDHIFA TAB 50MG .....	67
<i>hydroxyzine hcl syrup 10 mg/5ml</i> .....	31	IGLUCOSE TES .....	111
<i>hydroxyzine hcl tab 10 mg</i> .....	31	<i>imatinib mesylate tab 100 mg (base</i>	
<i>hydroxyzine hcl tab 25 mg</i> .....	31	<i>equivalent)</i> .....	67
<i>hydroxyzine hcl tab 50 mg</i> .....	31	<i>imatinib mesylate tab 400 mg (base</i>	
<i>hydroxyzine pamoate cap 100 mg</i> .....	32	<i>equivalent)</i> .....	67
<i>hydroxyzine pamoate cap 25 mg</i> .....	32	IMBRUVICA CAP 140MG .....	67
<i>hydroxyzine pamoate cap 50 mg</i> .....	32	IMBRUVICA CAP 70MG .....	67
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i> 155		IMBRUVICA SUS 70MG/ML.....	68
<i>hyoscyamine sulfate sl tab 0.125 mg</i> .....	155	IMBRUVICA TAB 140MG.....	68
<i>hyoscyamine sulfate soln 0.125 mg/ml</i> ....	155	IMBRUVICA TAB 280MG.....	68
<i>hyoscyamine sulfate tab 0.125 mg</i> .....	155	IMBRUVICA TAB 420MG.....	68
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	155	<i>imipramine hcl tab 10 mg</i> .....	46
HYRIMOZ-CROH INJ UC SP .....	12	<i>imipramine hcl tab 25 mg</i> .....	46
HYRIMOZ INJ 10/0.1ML .....	10	<i>imipramine hcl tab 50 mg</i> .....	46
HYRIMOZ INJ 20/0.2ML .....	10	<i>imipramine pamoate cap 100 mg</i> .....	46
HYRIMOZ INJ 40/0.4ML .....	11	<i>imipramine pamoate cap 125 mg</i> .....	46
HYRIMOZ INJ 40/0.8ML .....	11	<i>imipramine pamoate cap 150 mg</i> .....	46
HYRIMOZ INJ 80/0.8ML .....	11	<i>imipramine pamoate cap 75 mg</i> .....	46
HYRIMOZ-PED INJ CROHNS .....	12	<i>imiquimod cream 3.75%</i> .....	104
HYRIMOZ-PLAQ INJ PSOR/UE.....	12	<i>imiquimod cream 5%</i> .....	104
HYRIMOZ-PLAQ INJ PSORIASI .....	12	IMVEXXY MAIN SUP 10MCG.....	158
HYRIMOZ SENS INJ 80/0.8ML .....	11	IMVEXXY MAIN SUP 4MCG.....	158
<b>I</b>		IMVEXXY STRT SUP 10MCG.....	158
<i>ibandronate sodium tab 150 mg (base</i>		IMVEXXY STRT SUP 4MCG.....	158
<i>equivalent)</i> .....	116	INBRIJA CAP 42MG .....	72
IBRANCE CAP 100MG.....	67	INCRELEX INJ 40MG/4ML.....	119
IBRANCE CAP 125MG.....	67	<i>indapamide tab 1.25 mg</i> .....	116
IBRANCE CAP 75MG.....	67	<i>indapamide tab 2.5 mg</i> .....	116
IBRANCE TAB 100MG .....	67	INDOCIN SUS 25MG/5ML .....	18
IBRANCE TAB 125MG .....	67	<i>indomethacin cap 25 mg</i> .....	18
IBRANCE TAB 75MG .....	67	<i>indomethacin cap 50 mg</i> .....	18
<i>ibuprofen tab 400 mg</i> .....	18	<i>indomethacin cap er 75 mg</i> .....	18
<i>ibuprofen tab 600 mg</i> .....	18	<i>indomethacin suppos 50 mg</i> .....	18
<i>ibuprofen tab 800 mg</i> .....	18	<i>indomethacin susp 25 mg/5ml</i> .....	18
<i>icatibant acetate subcutaneous soln pref</i>		INFANRIX INJ.....	155
<i>syr 30 mg/3ml</i> .....	128	INFINITY TES BLD GLUC .....	112
<i>icosapent ethyl cap 0.5 gm</i> .....	55	INFINITY TES VOICE .....	112

INGREZZA CAP 40-80MG .....	150	ISENTRESS HD TAB 600MG.....	78
INGREZZA CAP 40MG .....	150	ISENTRESS POW 100MG .....	78
INGREZZA CAP 60MG .....	150	ISENTRESS TAB 400MG.....	78
INGREZZA CAP 80MG .....	150	<i>isoniazid syrup 50 mg/5ml .....</i>	63
INLYTA TAB 1MG .....	64	<i>isoniazid tab 100 mg .....</i>	63
INLYTA TAB 5MG .....	64	<i>isoniazid tab 300 mg .....</i>	63
INPEFA TAB 200MG .....	86	<i>isosorbide dinitrate-hydralazine hcl tab 20-</i>	
INPEFA TAB 400MG .....	86	<i>37.5 mg.....</i>	86
INQOVI TAB 35-100MG.....	66	<i>isosorbide dinitrate tab 10 mg.....</i>	31
INREBIC CAP 100MG .....	68	<i>isosorbide dinitrate tab 20 mg.....</i>	31
INTELENCE TAB 25MG .....	78	<i>isosorbide dinitrate tab 30 mg.....</i>	31
IN TOUCH TES BLOOD.....	111	<i>isosorbide dinitrate tab 5 mg.....</i>	31
INTRON A INJ 10MU .....	70	<i>isosorbide mononitrate tab 10 mg.....</i>	31
INVOKAMET TAB 150-1000.....	47	<i>isosorbide mononitrate tab 20 mg.....</i>	31
INVOKAMET TAB 150-500.....	47	<i>isosorbide mononitrate tab er 24hr 120 mg</i>	
INVOKAMET TAB 50-1000.....	47	<i>.....</i>	31
INVOKAMET TAB 50-500MG.....	47	<i>isosorbide mononitrate tab er 24hr 30 mg</i>	31
INVOKAMET XR TAB 150-1000 .....	47	<i>isosorbide mononitrate tab er 24hr 60 mg</i>	31
INVOKAMET XR TAB 150-500 .....	47	<i>isotretinoin cap 10 mg.....</i>	95
INVOKAMET XR TAB 50-1000 .....	47	<i>isotretinoin cap 20 mg.....</i>	95
INVOKAMET XR TAB 50-500MG .....	47	<i>isotretinoin cap 30 mg.....</i>	95
INVOKANA TAB 100MG.....	51	<i>isotretinoin cap 40 mg.....</i>	95
INVOKANA TAB 300MG.....	51	<i>isradipine cap 2.5 mg.....</i>	84
<i>iodoquinol-hc cream 1-1%.....</i>	97	<i>isradipine cap 5 mg.....</i>	84
<i>iodoquinol-hydrocortisone in aloe vehicle</i>		<i>itraconazole cap 100 mg.....</i>	53
<i>cream 1-1.9%.....</i>	97	<i>itraconazole oral soln 10 mg/ml.....</i>	53
<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i>		<i>ivabradine hcl tab 5 mg (base equiv) .....</i>	89
<i>mg/3ml.....</i>	38	<i>ivabradine hcl tab 7.5 mg (base equiv).....</i>	89
<i>ipratropium bromide inhal soln 0.02% .....</i>	34	<i>ivermectin cream 1% .....</i>	105
<i>ipratropium bromide nasal soln 0.03% (21</i>		<i>ivermectin tab 3 mg.....</i>	29
<i>mcg/spray).....</i>	143	<b>J</b>	
<i>ipratropium bromide nasal soln 0.06% (42</i>		JADENU SPRKL GRA 180MG.....	52
<i>mcg/spray).....</i>	143	JADENU SPRKL GRA 360MG.....	52
IQIRVO TAB 80MG .....	126	JADENU SPRKL GRA 90MG.....	52
<i>irbesartan-hydrochlorothiazide tab 150-12.5</i>		JADENU TAB 180MG .....	52
<i>mg.....</i>	60	JADENU TAB 360MG .....	52
<i>irbesartan-hydrochlorothiazide tab 300-</i>		JADENU TAB 90MG .....	52
<i>12.5 mg.....</i>	60	JAKAFI TAB 10MG.....	68
<i>irbesartan tab 150 mg.....</i>	58	JAKAFI TAB 15MG.....	68
<i>irbesartan tab 300 mg.....</i>	58	JAKAFI TAB 20MG.....	68
<i>irbesartan tab 75 mg.....</i>	58	JAKAFI TAB 25MG.....	68
IRESSA TAB 250MG.....	64	JAKAFI TAB 5MG.....	68
ISENTRESS CHW 100MG .....	78	JARDIANCE TAB 10MG .....	51
ISENTRESS CHW 25MG .....	78	JARDIANCE TAB 25MG .....	51

JATENZO CAP 158MG .....	27
JATENZO CAP 198MG .....	28
JATENZO CAP 237MG .....	28
JAYPIRCA TAB 100MG .....	68
JAYPIRCA TAB 50MG .....	68
JULUCA TAB 50-25MG .....	78
JYNARQUE PAK 15MG .....	122
JYNARQUE PAK 30-15MG .....	122
JYNARQUE PAK 45-15MG .....	122
JYNARQUE PAK 60-30MG .....	122
JYNARQUE PAK 90-30MG .....	122
JYNARQUE TAB 15MG.....	122
JYNARQUE TAB 30MG.....	122
<b>K</b>	
KALYDECO GRA 13.4MG .....	153
KALYDECO GRA 5.8MG .....	153
KALYDECO PAK 25MG .....	153
KALYDECO PAK 50MG .....	153
KALYDECO PAK 75MG .....	153
KALYDECO TAB 150MG.....	153
KERENDIA TAB 10MG.....	121
KERENDIA TAB 20MG.....	121
KESIMPTA INJ 20/.4ML.....	151
<i>ketoconazole cream 2%</i> .....	97
<i>ketoconazole shampoo 2%</i> .....	97
<i>ketoconazole tab 200 mg</i> .....	53
<i>ketorolac tromethamine ophth soln 0.4%</i> .....	146
<i>ketorolac tromethamine ophth soln 0.5%</i> .....	146
<i>ketorolac tromethamine tab 10 mg</i> .....	18
KEVZARA INJ 150/1.14 .....	16, 17
KEVZARA INJ 200/1.14 .....	17
KIMYRSA INJ 1200MG .....	30
KINRIX INJ.....	155
KISQALI 200 PAK FEMARA .....	66
KISQALI 400 PAK FEMARA.....	66
KISQALI 600 PAK FEMARA.....	66
KISQALI TAB 200DOSE .....	68
KISQALI TAB 400DOSE .....	68
KISQALI TAB 600DOSE .....	68
KITABIS PAK NEB 300/5ML.....	7
KOSELUGO CAP 10MG .....	68
KOSELUGO CAP 25MG .....	68

KROGER BLOOD TES GLUCOSE .....	112
KUVAN POW 100MG .....	120
KUVAN POW 500MG .....	120
KUVAN TAB 100MG.....	120
KYNMOBI MIS 10MG .....	72
KYNMOBI MIS 15MG .....	72
KYNMOBI MIS 20MG .....	72
KYNMOBI MIS 25MG .....	72
KYNMOBI MIS 30MG .....	72
KYZATREX CAP 100MG.....	28
KYZATREX CAP 150MG.....	28
KYZATREX CAP 200MG.....	28
<b>L</b>	
<i>labetalol hcl tab 100 mg</i> .....	82
<i>labetalol hcl tab 200 mg</i> .....	82
<i>labetalol hcl tab 300 mg</i> .....	82
<i>lacosamide oral solution 10 mg/ml</i> .....	40
<i>lacosamide tab 100 mg</i> .....	40
<i>lacosamide tab 150 mg</i> .....	40
<i>lacosamide tab 200 mg</i> .....	40
<i>lacosamide tab 50 mg</i> .....	40
<i>lactulose (encephalopathy) solution 10</i> <i>gm/15ml</i> .....	126
<i>lactulose solution 10 gm/15ml</i> .....	133
LAGEVRIO CAP 200MG .....	82
<i>lamivudine oral soln 10 mg/ml</i> .....	78
<i>lamivudine tab 100 mg (hbv)</i> .....	80
<i>lamivudine tab 150 mg</i> .....	78
<i>lamivudine tab 300 mg</i> .....	79
<i>lamivudine-zidovudine tab 150-300 mg</i> ....	79
<i>lamotrigine orally disintegrating tab 100 mg</i> .....	41
<i>lamotrigine orally disintegrating tab 200 mg</i> .....	41
<i>lamotrigine orally disintegrating tab 25 mg</i> .....	41
<i>lamotrigine orally disintegrating tab 50 mg</i> .....	41
<i>lamotrigine tab 100 mg</i> .....	41
<i>lamotrigine tab 150 mg</i> .....	41
<i>lamotrigine tab 200 mg</i> .....	41
<i>lamotrigine tab 25 mg</i> .....	41
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7)</i> <i>starter kit</i> .....	41

<i>lamotrigine tab 35 x 25 mg starter kit</i> .....	41	LETAIRIS TAB 10MG .....	88
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i> .....	41	LETAIRIS TAB 5MG .....	88
<i>lamotrigine tab chewable dispersible 25 mg .....</i>	41	<i>letrozole tab 2.5 mg</i> .....	65
<i>lamotrigine tab chewable dispersible 5 mg .....</i>	41	<i>leucovorin calcium tab 10 mg</i> .....	70
<i>lamotrigine tab disint 21 x 25 mg &amp; 7 x 50 mg titration kit</i> .....	41	<i>leucovorin calcium tab 15 mg</i> .....	70
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i> .....	41	<i>leucovorin calcium tab 25 mg</i> .....	70
<i>lamotrigine tab disint 42 x 50mg &amp; 14 x 100mg titration kit</i> .....	41	<i>leucovorin calcium tab 5 mg</i> .....	70
<i>lamotrigine tab er 24hr 100 mg</i> .....	41	LEUKERAN TAB 2MG.....	63
<i>lamotrigine tab er 24hr 200 mg</i> .....	41	LEUKINE INJ 250MCG .....	130
<i>lamotrigine tab er 24hr 250 mg</i> .....	41	<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i> .....	65
<i>lamotrigine tab er 24hr 25 mg</i> .....	41	<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i> .....	38
<i>lamotrigine tab er 24hr 300 mg</i> .....	41	<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i> .....	38
<i>lamotrigine tab er 24hr 50 mg</i> .....	41	<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i> .....	38
LANCET DEVIC MIS 30G.....	135	<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i> .....	38
LANCING DEVI MIS 25G .....	135	<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i> .....	38
LANCING DEVI MIS 30G .....	135	<i>levamlodipine maleate tab 2.5 mg</i> .....	84
<i>lansoprazole cap delayed release 15 mg</i>	156	<i>levamlodipine maleate tab 5 mg</i> .....	84
<i>lansoprazole cap delayed release 30 mg</i>	156	<i>levetiracetam oral soln 100 mg/ml</i> .....	41
<i>lapatinib ditosylate tab 250 mg (base equiv) .....</i>	68	<i>levetiracetam tab 1000 mg</i> .....	41
<i>latanoprost ophth soln 0.005%</i> .....	146	<i>levetiracetam tab 250 mg</i> .....	41
LEDIP-SOFOSB TAB 90-400MG.....	80	<i>levetiracetam tab 500 mg</i> .....	41
<i>leflunomide tab 10 mg</i> .....	20	<i>levetiracetam tab 750 mg</i> .....	41
<i>leflunomide tab 20 mg</i> .....	20	<i>levetiracetam tab er 24hr 500 mg</i> .....	41
<i>lenalidomide cap 10 mg</i> .....	139	<i>levetiracetam tab er 24hr 750 mg</i> .....	41
<i>lenalidomide cap 15 mg</i> .....	139	<i>levobunolol hcl ophth soln 0.5%</i> .....	144
<i>lenalidomide cap 20 mg</i> .....	139	<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	120
<i>lenalidomide cap 25 mg</i> .....	139	<i>levocarnitine tab 330 mg</i> .....	120
<i>lenalidomide cap 5 mg</i> .....	138	<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i> .....	54
<i>lenalidomide caps 2.5 mg</i> .....	139	<i>levocetirizine dihydrochloride tab 5 mg</i> ...	54
LENVIMA CAP 10 MG.....	64	<i>levofloxacin ophth soln 0.5%</i> .....	145
LENVIMA CAP 12MG .....	64	<i>levofloxacin oral soln 25 mg/ml</i> .....	124
LENVIMA CAP 14 MG .....	64	<i>levofloxacin tab 250 mg</i> .....	124
LENVIMA CAP 18 MG .....	64	<i>levofloxacin tab 500 mg</i> .....	124
LENVIMA CAP 20 MG .....	64	<i>levofloxacin tab 750 mg</i> .....	124
LENVIMA CAP 24 MG .....	64	<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i> .....	90
LENVIMA CAP 4MG .....	64		
LENVIMA CAP 8 MG .....	64		

<i>levonorgestrel &amp; ethinyl estradiol (91-day)</i>	
<i>tab 0.15-0.03 mg</i> .....	90
<i>levonorgestrel &amp; ethinyl estradiol tab 0.15</i>	
<i>mg-30 mcg</i> .....	91
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1</i>	
<i>mg-20 mcg</i> .....	90
<i>levonorgestrel-eth estra tab 0.05-</i>	
<i>30/0.075-40/0.125-30mg-mcg</i> .....	91
<i>levonorgestrel-ethinyl estradiol</i>	
<i>(continuous) tab 90-20 mcg</i> .....	91
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1</i>	
<i>mg-20 mcg (21)</i> .....	91
<i>levonorgestrel tab 1.5 mg</i> .....	92
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth</i>	
<i>est tab 0.01mg(7)</i> .....	90
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth</i>	
<i>est tab 0.01mg(7)</i> .....	90
<i>levorphanol tartrate tab 2 mg</i> .....	24
<i>levothyroxine sodium tab 100 mcg</i> .....	154
<i>levothyroxine sodium tab 112 mcg</i> .....	154
<i>levothyroxine sodium tab 125 mcg</i> .....	154
<i>levothyroxine sodium tab 137 mcg</i> .....	154
<i>levothyroxine sodium tab 150 mcg</i> .....	154
<i>levothyroxine sodium tab 175 mcg</i> .....	154
<i>levothyroxine sodium tab 200 mcg</i> .....	154
<i>levothyroxine sodium tab 25 mcg</i> .....	154
<i>levothyroxine sodium tab 300 mcg</i> .....	155
<i>levothyroxine sodium tab 50 mcg</i> .....	154
<i>levothyroxine sodium tab 75 mcg</i> .....	154
<i>levothyroxine sodium tab 88 mcg</i> .....	154
LIBERTY NEXT TES GEN.....	112
LIBERTY TES.....	112
<i>lidocaine hcl laryngotracheal soln 4%</i> .....	141
<i>lidocaine hcl soln 4%</i> .....	105
<i>lidocaine hcl urethral/mucosal gel 2%</i> ...	105
<i>lidocaine hcl urethral/mucosal gel prefilled</i>	
<i>syringe 2%</i> .....	105
<i>lidocaine hcl viscous soln 2%</i> .....	141
<i>lidocaine oint 5%</i> .....	105
<i>lidocaine patch 5%</i> .....	105
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .....	105
<i>linezolid for susp 100 mg/5ml</i> .....	30
<i>linezolid tab 600 mg</i> .....	30
LINZESS CAP 145MCG.....	126
LINZESS CAP 290MCG.....	126
LINZESS CAP 72MCG.....	126
<i>liothyronine sodium tab 25 mcg</i> .....	155
<i>liothyronine sodium tab 50 mcg</i> .....	155
<i>liothyronine sodium tab 5 mcg</i> .....	155
LIQREV SUS 10MG/ML.....	88
<i>liraglutide soln pen-injector 18 mg/3ml (6</i>	
<i>mg/ml)</i> .....	49
<i>lisdexamfetamine dimesylate cap 10 mg</i> ....	2
<i>lisdexamfetamine dimesylate cap 20 mg</i> ...	2
<i>lisdexamfetamine dimesylate cap 30 mg</i> ...	2
<i>lisdexamfetamine dimesylate cap 40 mg</i> ...	2
<i>lisdexamfetamine dimesylate cap 50 mg</i> ...	2
<i>lisdexamfetamine dimesylate cap 60 mg</i> ...	2
<i>lisdexamfetamine dimesylate cap 70 mg</i> ...	2
<i>lisdexamfetamine dimesylate chew tab 10</i>	
<i>mg</i> .....	2
<i>lisdexamfetamine dimesylate chew tab 20</i>	
<i>mg</i> .....	2
<i>lisdexamfetamine dimesylate chew tab 30</i>	
<i>mg</i> .....	2
<i>lisdexamfetamine dimesylate chew tab 40</i>	
<i>mg</i> .....	2
<i>lisdexamfetamine dimesylate chew tab 50</i>	
<i>mg</i> .....	2
<i>lisdexamfetamine dimesylate chew tab 60</i>	
<i>mg</i> .....	2
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5</i>	
<i>mg</i> .....	61
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5</i>	
<i>mg</i> .....	61
<i>lisinopril &amp; hydrochlorothiazide tab 20-25</i>	
<i>mg</i> .....	61
<i>lisinopril tab 10 mg</i> .....	57
<i>lisinopril tab 2.5 mg</i> .....	57
<i>lisinopril tab 20 mg</i> .....	57
<i>lisinopril tab 30 mg</i> .....	57
<i>lisinopril tab 40 mg</i> .....	57
<i>lisinopril tab 5 mg</i> .....	57
LITFULO CAP 50MG.....	104
<i>lithium carbonate cap 150 mg</i> .....	73
<i>lithium carbonate cap 300 mg</i> .....	73
<i>lithium carbonate cap 600 mg</i> .....	73
<i>lithium carbonate tab 300 mg</i> .....	73

<i>lithium carbonate tab er 300 mg</i> .....	73	LUMAKRAS TAB 320MG.....	68
<i>lithium carbonate tab er 450 mg</i> .....	73	LUMRYZ PAK 6GM .....	148
<i>lithium oral solution 8 meq/5ml</i> .....	73	LUMRYZ PAK 7.5GM .....	148
LIVDELZI CAP 10MG .....	126	LUMRYZ PAK 9GM .....	148
LODINE TAB 400MG .....	18	LUMRYZ PKG 4.5GM .....	148
LODOCO TAB 0.5MG .....	86	LUPR DEP-PED INJ 11.25MG .....	119
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i> .....	148	LUPR DEP-PED INJ 15MG .....	119
LOMAIRA TAB 8MG .....	3	LUPR DEP-PED INJ 3M 30MG.....	119
LONSURF TAB 15-6.14 .....	66	LUPR DEP-PED INJ 7.5MG .....	119
LONSURF TAB 20-8.19.....	66	LUPRON DEPOT INJ 45MG .....	119
<i>lopinavir-ritonavir soln 400-100 mg/5ml</i> <i>(80-20 mg/ml)</i> .....	79	<i>lurasidone hcl tab 120 mg</i> .....	73
<i>lopinavir-ritonavir tab 100-25 mg</i> .....	79	<i>lurasidone hcl tab 20 mg</i> .....	73
<i>lopinavir-ritonavir tab 200-50 mg</i> .....	79	<i>lurasidone hcl tab 40 mg</i> .....	73
<i>lorazepam conc 2 mg/ml</i> .....	33	<i>lurasidone hcl tab 60 mg</i> .....	73
<i>lorazepam tab 0.5 mg</i> .....	33	<i>lurasidone hcl tab 80 mg</i> .....	73
<i>lorazepam tab 1 mg</i> .....	33	LYNPARZA TAB 100MG.....	68
<i>lorazepam tab 2 mg</i> .....	33	LYNPARZA TAB 150MG.....	68
LORBRENA TAB 100MG.....	68	LYSODREN TAB 500MG .....	65
LORBRENA TAB 25MG.....	68	<b>M</b>	
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 100-12.5 mg</i> .....	61	<i>mafenide acetate packet for topical soln</i> <i>5% (50 gm)</i> .....	102
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 100-25 mg</i> .....	61	<i>malathion lotion 0.5%</i> .....	106
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 50-12.5 mg</i> .....	61	<i>maraviroc tab 150 mg</i> .....	79
<i>losartan potassium tab 100 mg</i> .....	58	<i>maraviroc tab 300 mg</i> .....	79
<i>losartan potassium tab 25 mg</i> .....	58	MATULANE CAP 50MG .....	70
<i>losartan potassium tab 50 mg</i> .....	58	MAVENCLAD PAK 10MG(10) .....	151
<i>loteprednol etabonate ophth gel 0.5% ...</i>	145	MAVENCLAD PAK 10MG(4) .....	151
<i>loteprednol etabonate ophth susp 0.2%</i> .....	145	MAVENCLAD PAK 10MG(5) .....	151
<i>loteprednol etabonate ophth susp 0.5%</i> .....	145	MAVENCLAD PAK 10MG(6) .....	151
<i>lovastatin tab 10 mg</i> .....	56	MAVENCLAD PAK 10MG(7) .....	151
<i>lovastatin tab 20 mg</i> .....	56	MAVENCLAD PAK 10MG(8) .....	151
<i>lovastatin tab 40 mg</i> .....	56	MAVENCLAD PAK 10MG(9) .....	151
LOVAZA CAP 1GM .....	55	MAVYRET PAK 50-20MG .....	80
<i>loxapine succinate cap 10 mg</i> .....	75	MAVYRET TAB 100-40MG.....	80
<i>loxapine succinate cap 25 mg</i> .....	75	MAYZENT PAK STARTER.....	151
<i>loxapine succinate cap 50 mg</i> .....	75	MAYZENT TAB 0.25MG .....	151
<i>loxapine succinate cap 5 mg</i> .....	75	MAYZENT TAB 1MG .....	151
<i>lubiprostone cap 24 mcg</i> .....	124	MAYZENT TAB 2MG .....	151
<i>lubiprostone cap 8 mcg</i> .....	124	<i>meclizine hcl tab 50 mg</i> .....	52
LUMAKRAS TAB 120MG .....	68	<i>meclofenamate sodium cap 100 mg</i> .....	18
		<i>meclofenamate sodium cap 50 mg</i> .....	18
		MEDROL TAB 2MG .....	93
		<i>medroxyprogesterone acetate im susp 150</i> <i>mg/ml</i> .....	92

<i>medroxyprogesterone acetate im susp</i>		<i>mesalamine rectal enema 4 gm &amp; cleanser</i>	
<i>    prefilled syr 150 mg/ml</i> .....	92	<i>    wipe kit</i> .....	125
<i>medroxyprogesterone acetate tab 10 mg</i>		<i>mesalamine suppos 1000 mg</i> .....	125
.....	148	<i>mesalamine tab delayed release 1.2 gm</i>	125
<i>medroxyprogesterone acetate tab 2.5 mg</i>		<i>mesalamine tab delayed release 800 mg</i>	
.....	148	.....	125
<i>medroxyprogesterone acetate tab 5 mg</i>	148	<i>metaxalone tab 800 mg</i> .....	142
<i>mefenamic acid cap 250 mg</i> .....	18	<i>metformin hcl oral soln 500 mg/5ml</i> .....	48
<i>mefloquine hcl tab 250 mg</i> .....	62	<i>metformin hcl tab 1000 mg</i> .....	48
<i>megestrol acetate susp 40 mg/ml</i> .....	65	<i>metformin hcl tab 500 mg</i> .....	48
<i>megestrol acetate susp 625 mg/5ml</i> .....	148	<i>metformin hcl tab 850 mg</i> .....	48
<i>megestrol acetate tab 20 mg</i> .....	65	<i>metformin hcl tab er 24hr 500 mg</i> .....	48
<i>megestrol acetate tab 40 mg</i> .....	65	<i>metformin hcl tab er 24hr 750 mg</i> .....	48
MEIJER BLOOD TES GLUCOSE .....	112	<i>methadone hcl conc 10 mg/ml</i> .....	24
MEIJER TES TRUETEST .....	112	<i>methadone hcl soln 10 mg/5ml</i> .....	24
MEIJER TES TRUETRAC.....	112	<i>methadone hcl soln 5 mg/5ml</i> .....	24
MEKINIST SOL 0.05/ML.....	68	<i>methadone hcl tab 10 mg</i> .....	24
MEKINIST TAB 0.5MG.....	68	<i>methadone hcl tab 5 mg</i> .....	24
MEKINIST TAB 2MG.....	68	<i>methadone hcl tab for oral susp 40 mg</i> ...	24
MEKTOVI TAB 15MG.....	68	<i>methamphetamine hcl tab 5 mg</i> .....	2
<i>meloxicam susp 7.5 mg/5ml</i> .....	18	<i>methazolamide tab 25 mg</i> .....	115
<i>meloxicam tab 15 mg</i> .....	18	<i>methazolamide tab 50 mg</i> .....	115
<i>meloxicam tab 7.5 mg</i> .....	18	<i>methenamine hippurate tab 1 gm</i> .....	30
<i>memantine hcl cap er 24hr 14 mg</i> .....	149	<i>methenamine-hyoscamine-meth blue-sod</i>	
<i>memantine hcl cap er 24hr 21 mg</i> .....	149	<i>    phos tab 81.6 mg</i> .....	29
<i>memantine hcl cap er 24hr 28 mg</i> .....	149	<i>methenamine-hyosc-meth blue-benz acid-</i>	
<i>memantine hcl cap er 24hr 7 mg</i> .....	149	<i>    phenyl sal tab 81.6mg</i> .....	29
<i>memantine hcl oral solution 2 mg/ml</i> .....	149	<i>methenamine-hyosc-meth blue-sod phos-</i>	
<i>memantine hcl tab 10 mg</i> .....	149	<i>    phen sal cap 118 mg</i> .....	29
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg</i>		<i>methenamine-hyosc-meth blue-sod phos-</i>	
<i>    titration pack</i> .....	149	<i>    phen sal cap 120 mg</i> .....	29
<i>memantine hcl tab 5 mg</i> .....	149	<i>methenamine-hyosc-meth blue-sod phos-</i>	
MENOPUR INJ 75UNIT .....	117	<i>    phen sal tab 81 mg</i> .....	29
<i>meperidine hcl oral soln 50 mg/5ml</i> .....	24	<i>methenamine-hyos-meth blue-sod phos-</i>	
<i>meperidine hcl tab 50 mg</i> .....	24	<i>    phen sal tab 81.6 mg</i> .....	29
<i>meprobamate tab 200 mg</i> .....	32	<i>methenamine mandelate tab 0.5 gm</i> .....	30
<i>meprobamate tab 400 mg</i> .....	32	<i>methenamine mandelate tab 1 gm</i> .....	30
<i>mercaptapurine tab 50 mg</i> .....	63	<i>methimazole tab 10 mg</i> .....	154
MEROPENEM INJ 2GM.....	30	<i>methimazole tab 5 mg</i> .....	154
<i>mesalamine cap dr 400 mg</i> .....	124	<i>methocarbamol tab 1000 mg</i> .....	142
<i>mesalamine cap er 24hr 0.375 gm</i> .....	125	<i>methocarbamol tab 500 mg</i> .....	142
<i>mesalamine cap er 500 mg</i> .....	125	<i>methocarbamol tab 750 mg</i> .....	142
<i>mesalamine enema 4 gm</i> .....	125	<i>methotrexate sodium for inj 1 gm</i> .....	63

<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i> .....	63	<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i> .....	5
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i> .....	63	<i>methylphenidate hcl cap er 30 mg (cd)</i> .....	5
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i> .....	63	<i>methylphenidate hcl cap er 40 mg (cd)</i> .....	6
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i> .....	63	<i>methylphenidate hcl cap er 50 mg (cd)</i> .....	6
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i> .....	63	<i>methylphenidate hcl cap er 60 mg (cd)</i> .....	6
<i>methotrexate sodium tab 2.5 mg (base equiv)</i> .....	63	<i>methylphenidate hcl chew tab 10 mg</i> .....	6
<i>methoxsalen rapid cap 10 mg</i> .....	99	<i>methylphenidate hcl chew tab 2.5 mg</i> .....	6
<i>methscopolamine bromide tab 2.5 mg</i> .....	155	<i>methylphenidate hcl chew tab 5 mg</i> .....	6
<i>methscopolamine bromide tab 5 mg</i> .....	155	<i>methylphenidate hcl soln 10 mg/5ml</i> .....	6
<i>methsuximide cap 300 mg</i> .....	43	<i>methylphenidate hcl soln 5 mg/5ml</i> .....	6
<i>methyldopa tab 250 mg</i> .....	59	<i>methylphenidate hcl tab 10 mg</i> .....	6
<i>methyldopa tab 500 mg</i> .....	59	<i>methylphenidate hcl tab 20 mg</i> .....	6
<i>methylergonovine maleate tab 0.2 mg</i> .....	147	<i>methylphenidate hcl tab 5 mg</i> .....	6
<i>methylphenidate hcl cap er 10 mg (cd)</i> .....	5	<i>methylphenidate hcl tab er 10 mg</i> .....	6
<i>methylphenidate hcl cap er 20 mg (cd)</i> .....	5	<i>methylphenidate hcl tab er 20 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i> .....	5	<i>methylphenidate hcl tab er 24hr 18 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i> .....	5	<i>methylphenidate hcl tab er 24hr 27 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i> .....	5	<i>methylphenidate hcl tab er 24hr 36 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i> .....	5	<i>methylphenidate hcl tab er 24hr 54 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i> .....	5	<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i> .....	5	<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i> .....	5	<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i> .....	5	<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i> .....	5	<i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i> .....	6
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i> .....	5	<i>methylphenidate td patch 10 mg/9hr</i> .....	6
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i> .....	5	<i>methylphenidate td patch 15 mg/9hr</i> .....	6
		<i>methylphenidate td patch 20 mg/9hr</i> .....	6
		<i>methylphenidate td patch 30 mg/9hr</i> .....	6
		<i>methylprednisolone tab 16 mg</i> .....	93
		<i>methylprednisolone tab 32 mg</i> .....	93
		<i>methylprednisolone tab 4 mg</i> .....	93
		<i>methylprednisolone tab 8 mg</i> .....	93
		<i>methylprednisolone tab therapy pack 4 mg (21)</i> .....	93
		<i>methyltestosterone cap 10 mg</i> .....	28
		<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i> .....	124



<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i> .....	124	MICAFUNGIN INJ 50MG.....	53
<i>metoclopramide hcl tab 10 mg (base equivalent)</i> .....	124	<i>micafungin sodium for iv soln 100 mg</i> .....	53
<i>metoclopramide hcl tab 5 mg (base equivalent)</i> .....	124	<i>micafungin sodium for iv soln 50 mg</i> .....	53
<i>metolazone tab 10 mg</i> .....	116	<i>miconazole nitrate vaginal suppos 200 mg</i> .....	158
<i>metolazone tab 2.5 mg</i> .....	116	<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i> .....	97
<i>metolazone tab 5 mg</i> .....	116	MICRODOT TES .....	112
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i> .....	61	MICRODOT TES XTRA.....	112
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i> .....	61	<i>midodrine hcl tab 10 mg</i> .....	159
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i> .....	61	<i>midodrine hcl tab 2.5 mg</i> .....	159
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i> .....	82	<i>midodrine hcl tab 5 mg</i> .....	159
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i> .....	82	MIEBO DRO 1.3GM/ML.....	146
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i> .....	82	<i>mifepristone tab 200 mg</i> .....	121
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i> .....	82	<i>mifepristone tab 300 mg</i> .....	49
<i>metoprolol tartrate tab 100 mg</i> .....	82	<i>miglitol tab 100 mg</i> .....	47
<i>metoprolol tartrate tab 25 mg</i> .....	82	<i>miglitol tab 25 mg</i> .....	47
<i>metoprolol tartrate tab 37.5 mg</i> .....	82	<i>miglitol tab 50 mg</i> .....	47
<i>metoprolol tartrate tab 50 mg</i> .....	82	<i>miglustat cap 100 mg</i> .....	129
<i>metoprolol tartrate tab 75 mg</i> .....	82	MINILINK RT MIS TRANSMIT .....	135
METROCREAM CRE 0.75% .....	105	MINIMED 630G MIS TRANSMIT .....	135
METROGEL GEL 1% .....	105	<i>minocycline hcl cap 100 mg</i> .....	154
METROLOTION LOT 0.75%.....	105	<i>minocycline hcl cap 50 mg</i> .....	154
<i>metronidazole cap 375 mg</i> .....	29	<i>minocycline hcl cap 75 mg</i> .....	154
<i>metronidazole cream 0.75%</i> .....	105	<i>minocycline hcl tab 100 mg</i> .....	154
<i>metronidazole gel 0.75%</i> .....	105	<i>minocycline hcl tab 50 mg</i> .....	154
<i>metronidazole gel 1%</i> .....	105	<i>minocycline hcl tab 75 mg</i> .....	154
<i>metronidazole lotion 0.75%</i> .....	105	<i>minocycline hcl tab er 24hr biphasic release 105 mg</i> .....	154
<i>metronidazole tab 250 mg</i> .....	29	<i>minocycline hcl tab er 24hr biphasic release 135 mg</i> .....	154
<i>metronidazole tab 500 mg</i> .....	29	<i>minoxidil tab 10 mg</i> .....	62
<i>metronidazole vaginal gel 0.75%</i> .....	158	<i>minoxidil tab 2.5 mg</i> .....	62
<i>metyrosine cap 250 mg</i> .....	58	<i>mirabegron tab er 24 hr 25 mg</i> .....	157
<i>mexiletine hcl cap 150 mg</i> .....	33	<i>mirabegron tab er 24 hr 50 mg</i> .....	157
<i>mexiletine hcl cap 200 mg</i> .....	33	<i>mirtazapine orally disintegrating tab 15 mg</i> .....	43
<i>mexiletine hcl cap 250 mg</i> .....	33	<i>mirtazapine orally disintegrating tab 30 mg</i> .....	43
MICAFUNGIN INJ 100MG .....	53	<i>mirtazapine orally disintegrating tab 45 mg</i> .....	43
		<i>mirtazapine tab 15 mg</i> .....	43
		<i>mirtazapine tab 30 mg</i> .....	43
		<i>mirtazapine tab 45 mg</i> .....	43

<i>mirtazapine tab 7.5 mg</i> .....	43	<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i> .....	24
<i>misoprostol tab 100 mcg</i> .....	156	<i>morphine sulfate oral soln 10 mg/5ml</i> .....	24
<i>misoprostol tab 200 mcg</i> .....	156	<i>morphine sulfate oral soln 20 mg/5ml</i> .....	24
MITIGARE CAP 0.6MG .....	128	<i>morphine sulfate suppos 10 mg</i> .....	24
MM BLULINK TES STRIPS.....	112	<i>morphine sulfate suppos 20 mg</i> .....	24
<i>modafinil tab 100 mg</i> .....	6	<i>morphine sulfate suppos 30 mg</i> .....	24
<i>modafinil tab 200 mg</i> .....	6	<i>morphine sulfate suppos 5 mg</i> .....	24
MODERNA INJ 2024-25.....	158	<i>morphine sulfate tab 15 mg</i> .....	24
<i>moexipril hcl tab 15 mg</i> .....	57	<i>morphine sulfate tab 30 mg</i> .....	24
<i>moexipril hcl tab 7.5 mg</i> .....	57	<i>morphine sulfate tab er 100 mg</i> .....	24
<i>molindone hcl tab 10 mg</i> .....	76	<i>morphine sulfate tab er 15 mg</i> .....	24
<i>molindone hcl tab 25 mg</i> .....	76	<i>morphine sulfate tab er 200 mg</i> .....	24
<i>molindone hcl tab 5 mg</i> .....	76	<i>morphine sulfate tab er 30 mg</i> .....	24
<i>mometasone furoate cream 0.1%</i> .....	103	<i>morphine sulfate tab er 60 mg</i> .....	24
<i>mometasone furoate oint 0.1%</i> .....	103	MOUNJARO INJ 10MG/0.5 .....	49
<i>mometasone furoate solution 0.1% (lotion)</i> .....	103	MOUNJARO INJ 12.5/0.5.....	49
<i>montelukast sodium chew tab 4 mg (base equiv)</i> .....	35	MOUNJARO INJ 15MG/0.5.....	49
<i>montelukast sodium chew tab 5 mg (base equiv)</i> .....	35	MOUNJARO INJ 2.5/0.5.....	49
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i> .....	35	MOUNJARO INJ 5MG/0.5.....	49
<i>montelukast sodium tab 10 mg (base equiv)</i> .....	35	MOUNJARO INJ 7.5/0.5.....	49
<i>morphine sulfate beads cap er 24hr 120 mg</i> .....	24	MOVANTIK TAB 12.5MG .....	126
<i>morphine sulfate beads cap er 24hr 30 mg</i> .....	24	MOVANTIK TAB 25MG .....	126
<i>morphine sulfate beads cap er 24hr 45 mg</i> .....	24	<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i> .....	145
<i>morphine sulfate beads cap er 24hr 60 mg</i> .....	24	<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i> .....	145
<i>morphine sulfate beads cap er 24hr 75 mg</i> .....	24	<i>moxifloxacin hcl tab 400 mg (base equiv)</i> .....	124
<i>morphine sulfate beads cap er 24hr 90 mg</i> .....	24	MRESVIA INJ 50MCG .....	158
<i>morphine sulfate cap er 24hr 100 mg</i> .....	24	MULPLETA TAB 3MG .....	130
<i>morphine sulfate cap er 24hr 10 mg</i> .....	24	<i>mupirocin oint 2%</i> .....	97
<i>morphine sulfate cap er 24hr 20 mg</i> .....	24	MYCAMINE INJ 100MG.....	53
<i>morphine sulfate cap er 24hr 30 mg</i> .....	24	MYCAMINE INJ 50MG.....	53
<i>morphine sulfate cap er 24hr 50 mg</i> .....	24	MYCAPSSA CAP 20MG .....	122
<i>morphine sulfate cap er 24hr 60 mg</i> .....	24	<i>mycophenolate mofetil cap 250 mg</i> .....	140
<i>morphine sulfate cap er 24hr 80 mg</i> .....	24	<i>mycophenolate mofetil for oral susp 200 mg/ml</i> .....	140
		<i>mycophenolate mofetil tab 500 mg</i> .....	140
		<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i> .....	140
		<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i> .....	140
		MYFEMBREE TAB.....	123

MYFORTIC TAB 180MG .....	140	NATACYN SUS 5% OP .....	145
MYFORTIC TAB 360MG .....	140	<i>nateglinide tab 120 mg</i> .....	50
MYGLUCOHEALT TES BLD GLUC.....	112	<i>nateglinide tab 60 mg</i> .....	50
MYLERAN TAB 2MG .....	63	NATESTO GEL 5.5MG .....	28
MYTESI TAB 125MG.....	51	NATPARA INJ 100MCG .....	116
<b>N</b>		NATPARA INJ 25MCG .....	116
<i>nabumetone tab 500 mg</i> .....	18	NATPARA INJ 50MCG .....	116
<i>nabumetone tab 750 mg</i> .....	18	NATPARA INJ 75MCG .....	116
<i>nadolol tab 20 mg</i> .....	83	<i>nebivolol hcl tab 10 mg (base equivalent)</i> .....	83
<i>nadolol tab 40 mg</i> .....	83	<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	82
<i>nadolol tab 80 mg</i> .....	83	.....	82
<i>naftifine hcl cream 1%</i> .....	97	<i>nebivolol hcl tab 20 mg (base equivalent)</i> .....	83
<i>naftifine hcl cream 2%</i> .....	97	<i>nebivolol hcl tab 5 mg (base equivalent)</i> ..	83
<i>naftifine hcl gel 2%</i> .....	97	<i>nefazodone hcl tab 100 mg</i> .....	44
NALFON CAP 400MG.....	18	<i>nefazodone hcl tab 150 mg</i> .....	44
NALFON TAB 600MG .....	18	<i>nefazodone hcl tab 200 mg</i> .....	45
<i>naloxone hcl inj 0.4 mg/ml</i> .....	52	<i>nefazodone hcl tab 250 mg</i> .....	45
<i>naloxone hcl inj 4 mg/10ml</i> .....	52	<i>nefazodone hcl tab 50 mg</i> .....	44
<i>naloxone hcl soln cartridge 0.4 mg/ml</i> .....	52	NEMLUVIO INJ 30MG .....	104
<i>naloxone hcl soln prefilled syringe 0.4</i>		<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i>	
<i>mg/ml</i> .....	52	<i>400unt-10000unt op oin</i> .....	145
<i>naloxone hcl soln prefilled syringe 2</i>		<i>neomycin-polymy-gramicid op sol 1.75-</i>	
<i>mg/2ml</i> .....	52	<i>10000-0.025mg-unt-mg/ml</i> .....	145
<i>naltrexone hcl tab 50 mg</i> .....	52	<i>neomycin-polymyxin-dexamethasone</i>	
NAPRELAN TAB 375MG CR .....	18	<i>ophth oint 0.1%</i> .....	146
NAPRELAN TAB 500MG CR.....	18	<i>neomycin-polymyxin-dexamethasone</i>	
NAPRELAN TAB 750MG CR .....	19	<i>ophth susp 0.1%</i> .....	146
NAPROSYN SUS 125/5ML .....	19	<i>neomycin-polymyxin-hc ophth susp</i> .....	146
NAPROSYN TAB 500MG .....	19	<i>neomycin-polymyxin-hc otic soln 1%</i> .....	147
<i>naproxen sodium tab 275 mg</i> .....	19	<i>neomycin-polymyxin-hc otic susp 3.5</i>	
<i>naproxen sodium tab 550 mg</i> .....	19	<i>mg/ml-10000 unit/ml-1%</i> .....	147
<i>naproxen sodium tab er 24hr 375 mg (base</i>		<i>neomycin sulfate tab 500 mg</i> .....	7
<i>equiv)</i> .....	19	NEORAL CAP 100MG .....	140
<i>naproxen sodium tab er 24hr 500 mg (base</i>		NEORAL CAP 25MG .....	140
<i>equiv)</i> .....	19	NEORAL SOL 100MG/ML .....	140
<i>naproxen sodium tab er 24hr 750 mg (base</i>		NERLYNX TAB 40MG.....	68
<i>equiv)</i> .....	19	NEULASTA INJ 6MG/0.6M .....	130
<i>naproxen tab 250 mg</i> .....	19	NEULASTA KIT 6MG/0.6M .....	130
<i>naproxen tab 375 mg</i> .....	19	NEUPOGEN INJ 300/0.5.....	130
<i>naproxen tab 500 mg</i> .....	19	NEUPOGEN INJ 300MCG .....	130
<i>naproxen tab ec 375 mg</i> .....	19	NEUPOGEN INJ 480/0.8.....	130
<i>naproxen tab ec 500 mg</i> .....	19	NEUPOGEN INJ 480MCG .....	130
<i>naratriptan hcl tab 1 mg (base equiv)</i> .....	137	NEURONTIN TAB 600MG.....	41
<i>naratriptan hcl tab 2.5 mg (base equiv)</i> ...	137	NEUTEK 2TEK TES STRIPS.....	112

<i>nevirapine susp 50 mg/5ml</i> .....	79	<i>nisoldipine tab er 24hr 34 mg</i> .....	85
<i>nevirapine tab 200 mg</i> .....	79	<i>nisoldipine tab er 24hr 40 mg</i> .....	85
<i>nevirapine tab er 24hr 100 mg</i> .....	79	<i>nisoldipine tab er 24hr 8.5 mg</i> .....	85
<i>nevirapine tab er 24hr 400 mg</i> .....	79	<i>nitazoxanide tab 500 mg</i> .....	29
NEXAVAR TAB 200MG .....	68	<i>nitisinone cap 10 mg</i> .....	120
NEXLETOL TAB 180MG .....	54	<i>nitisinone cap 20 mg</i> .....	120
NEXLIZET TAB 180/10MG .....	55	<i>nitisinone cap 2 mg</i> .....	120
NGENLA INJ 24/1.2ML .....	118	<i>nitisinone cap 5 mg</i> .....	120
NGENLA INJ 60/1.2ML .....	118	NITRO-DUR DIS 0.3MG/HR .....	31
<i>niacin tab er 1000 mg (antihyperlipidemic)</i> .....	57	NITRO-DUR DIS 0.8MG/HR .....	31
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	57	<i>nitrofurantoin macrocrystalline cap 100 mg</i> .....	30
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	57	<i>nitrofurantoin macrocrystalline cap 25 mg</i> .....	30
<i>nicardipine hcl cap 20 mg</i> .....	84	<i>nitrofurantoin macrocrystalline cap 50 mg</i> .....	30
<i>nicardipine hcl cap 30 mg</i> .....	84	<i>nitrofurantoin monohydrate</i> <i>macrocrystalline cap 100 mg</i> .....	31
<i>nicotine polacrilex gum 2 mg</i> .....	152	<i>nitrofurantoin susp 25 mg/5ml</i> .....	31
<i>nicotine polacrilex gum 4 mg</i> .....	152	<i>nitroglycerin cap er 2.5 mg</i> .....	31
<i>nicotine polacrilex lozenge 2 mg</i> .....	152	<i>nitroglycerin cap er 6.5 mg</i> .....	31
<i>nicotine polacrilex lozenge 4 mg</i> .....	152	<i>nitroglycerin cap er 9 mg</i> .....	31
<i>nicotine td patch 24hr 14 mg/24hr</i> .....	152	<i>nitroglycerin oint 0.4%</i> .....	29
<i>nicotine td patch 24hr 21 mg/24hr</i> .....	152	<i>nitroglycerin sl tab 0.3 mg</i> .....	31
<i>nicotine td patch 24hr 7 mg/24hr</i> .....	152	<i>nitroglycerin sl tab 0.4 mg</i> .....	31
NICOTROL INH .....	152	<i>nitroglycerin sl tab 0.6 mg</i> .....	31
NICOTROL NS SPR 10MG/ML .....	152	<i>nitroglycerin td patch 24hr 0.1 mg/hr</i> .....	31
<i>nifedipine cap 10 mg</i> .....	84	<i>nitroglycerin td patch 24hr 0.2 mg/hr</i> .....	31
<i>nifedipine cap 20 mg</i> .....	84	<i>nitroglycerin td patch 24hr 0.4 mg/hr</i> .....	31
<i>nifedipine tab er 24hr 30 mg</i> .....	84	<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> .....	31
<i>nifedipine tab er 24hr 60 mg</i> .....	84	<i>nitroglycerin tl soln 0.4 mg/spray (400</i> <i>mcg/spray)</i> .....	31
<i>nifedipine tab er 24hr 90 mg</i> .....	84	NIVESTYM INJ 300/0.5 .....	130
<i>nifedipine tab er 24hr osmotic release 30</i> <i>mg</i> .....	84	NIVESTYM INJ 300MCG .....	130
<i>nifedipine tab er 24hr osmotic release 60</i> <i>mg</i> .....	84	NIVESTYM INJ 480/0.8 .....	130
<i>nifedipine tab er 24hr osmotic release 90</i> <i>mg</i> .....	85	NIVESTYM INJ 480MCG .....	131
<i>nilutamide tab 150 mg</i> .....	65	<i>nizatidine cap 150 mg</i> .....	156
<i>nimodipine cap 30 mg</i> .....	85	<i>nizatidine cap 300 mg</i> .....	156
NINLARO CAP 2.3MG .....	68	NO CODING TES BLD GLUC .....	112
NINLARO CAP 3MG .....	68	NORDITROPIN INJ 10/1.5ML .....	118
NINLARO CAP 4MG .....	68	NORDITROPIN INJ 15/1.5ML .....	118
<i>nisoldipine tab er 24hr 17 mg</i> .....	85	NORDITROPIN INJ 30/3ML .....	118
<i>nisoldipine tab er 24hr 20 mg</i> .....	85	NORDITROPIN INJ 5/1.5ML .....	118
<i>nisoldipine tab er 24hr 25.5 mg</i> .....	85		
<i>nisoldipine tab er 24hr 30 mg</i> .....	85		

<i>norelgestromin-ethinyl estradiol td ptwk</i> 150-35 mcg/24hr.....	92	<i>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30</i> <i>mcg</i> .....	92
<i>norethindrone &amp; ethinyl estradiol-fe chew</i> <i>tab 0.4 mg-35 mcg</i> .....	91	NORPACE CAP 100MG CR .....	33
<i>norethindrone &amp; ethinyl estradiol-fe chew</i> <i>tab 0.8 mg-25 mcg</i> .....	91	NORPACE CAP 150MG CR.....	33
<i>norethindrone &amp; ethinyl estradiol tab 0.4</i> <i>mg-35 mcg</i> .....	91	NORTHERA CAP 100MG .....	159
<i>norethindrone &amp; ethinyl estradiol tab 0.5</i> <i>mg-35 mcg</i> .....	91	NORTHERA CAP 200MG .....	159
<i>norethindrone &amp; ethinyl estradiol tab 1 mg-</i> <i>35 mcg</i> .....	91	NORTHERA CAP 300MG .....	159
<i>norethindrone ace &amp; ethinyl estradiol-fe tab</i> <i>1.5 mg-30 mcg</i> .....	91	<i>nortriptyline hcl cap 10 mg</i> .....	46
<i>norethindrone ace &amp; ethinyl estradiol-fe tab</i> <i>1 mg-20 mcg</i> .....	91	<i>nortriptyline hcl cap 25 mg</i> .....	46
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5</i> <i>mg-30 mcg</i> .....	91	<i>nortriptyline hcl cap 50 mg</i> .....	46
<i>norethindrone ace &amp; ethinyl estradiol tab 1</i> <i>mg-20 mcg</i> .....	91	<i>nortriptyline hcl cap 75 mg</i> .....	46
<i>norethindrone ace-eth estradiol-fe chew</i> <i>tab 1 mg-20 mcg (24)</i> .....	91	<i>nortriptyline hcl soln 10 mg/5ml</i> .....	46
<i>norethindrone ace-ethinyl estradiol-fe cap 1</i> <i>mg-20 mcg (24)</i> .....	91	NORVIR CAP 100MG.....	79
<i>norethindrone ace-ethinyl estradiol-fe tab 1</i> <i>mg-20 mcg (24)</i> .....	91	NORVIR POW 100MG .....	79
<i>norethindrone acetate-ethinyl estradiol tab</i> <i>0.5 mg-2.5 mcg</i> .....	123	NORVIR SOL 80MG/ML .....	79
<i>norethindrone acetate-ethinyl estradiol tab</i> <i>1 mg-5 mcg</i> .....	123	NOVA MAX TES GLUCOSE .....	112
<i>norethindrone acetate tab 5 mg</i> .....	148	NOVAREL INJ 5000UNIT .....	117
<i>norethindrone ac-ethinyl estrad-fe tab 1-</i> <i>20/1-30/1-35 mg-mcg</i> .....	91	NOVOLIN INJ 70/30.....	50
<i>norethindrone-eth estradiol tab 0.5-</i> <i>35/0.75-35/1-35 mg-mcg</i> .....	91	NOVOLIN INJ 70/30 FP .....	50
<i>norethindrone-eth estradiol tab 0.5-35/1-</i> <i>35/0.5-35 mg-mcg</i> .....	91	NOVOLIN N INJ 100 UNIT .....	50
<i>norethindrone tab 0.35 mg</i> .....	92	NOVOLIN N INJ U-100.....	50
<i>norgestimate &amp; ethinyl estradiol tab 0.25</i> <i>mg-35 mcg</i> .....	91	NOVOLIN R INJ 100 UNIT.....	50
<i>norgestimate-eth estrad tab 0.18-25/0.215-</i> <i>25/0.25-25 mg-mcg</i> .....	91	NOVOLIN R INJ U-100 .....	50
<i>norgestimate-eth estrad tab 0.18-35/0.215-</i> <i>35/0.25-35 mg-mcg</i> .....	92	NOVOLOG INJ 100/ML .....	50
		NOVOLOG INJ FLEXPEN .....	50
		NOVOLOG INJ PENFILL.....	50
		NOVOLOG MIX INJ 70/30 .....	50
		NOVOLOG MIX INJ FLEXPEN.....	50
		NOXAFIL SUS 40MG/ML .....	53
		NOXAFIL TAB 100MG .....	53
		NUBEQA TAB 300MG .....	65
		NUCALA INJ 100MG.....	34
		NUCALA INJ 100MG/ML.....	34
		NUCALA INJ 40MG/0.4 .....	34
		NUEDEXTA CAP 20-10MG.....	152
		NUPLAZID CAP 34MG .....	73
		NUPLAZID TAB 10MG.....	73
		NUTROPIN AQ INJ 10MG/2ML .....	118
		NUTROPIN AQ INJ 20MG/2ML .....	118
		NUTROPIN AQ INJ NUSPIN 5.....	119
		<i>nystatin cream 100000 unit/gm</i> .....	97
		<i>nystatin oint 100000 unit/gm</i> .....	97
		<i>nystatin susp 100000 unit/ml</i> .....	141
		<i>nystatin tab 500000 unit</i> .....	53

<i>nystatin topical powder 100000 unit/gm</i>	.97	<i>olanzapine orally disintegrating tab 20 mg</i>	
<i>nystatin-triamcinolone cream 100000-0.1</i>		.....	75
<i>unit/gm-%</i>	97	<i>olanzapine orally disintegrating tab 5 mg</i>	75
<i>nystatin-triamcinolone oint 100000-0.1</i>		<i>olanzapine tab 10 mg</i>	75
<i>unit/gm-%</i>	97	<i>olanzapine tab 15 mg</i>	75
NYVEPRIA INJ 6/0.6ML	131	<i>olanzapine tab 2.5 mg</i>	75
<b>o</b>		<i>olanzapine tab 20 mg</i>	75
OB COMPLETE TAB	141	<i>olanzapine tab 5 mg</i>	75
OALIVA TAB 10MG	124	<i>olanzapine tab 7.5 mg</i>	75
OALIVA TAB 5MG	124	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 1000 mcg/ml (1</i>		<i>hydrochlorothiazide tab 20-5-12.5 mg</i>	61
<i>mg/ml)</i>	122	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 100 mcg/ml (0.1</i>		<i>hydrochlorothiazide tab 40-10-12.5 mg</i>	61
<i>mg/ml)</i>	122	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 200 mcg/ml (0.2</i>		<i>hydrochlorothiazide tab 40-10-25 mg</i>	61
<i>mg/ml)</i>	122	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 500 mcg/ml (0.5</i>		<i>hydrochlorothiazide tab 40-5-12.5 mg</i>	61
<i>mg/ml)</i>	122	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 50 mcg/ml (0.05</i>		<i>hydrochlorothiazide tab 40-5-25 mg</i>	61
<i>mg/ml)</i>	122	<i>olmesartan medoxomil-</i>	
<i>octreotide acetate subcutaneous soln pref</i>		<i>hydrochlorothiazide tab 20-12.5 mg</i>	61
<i>syr 100 mcg/ml</i>	122	<i>olmesartan medoxomil-</i>	
<i>octreotide acetate subcutaneous soln pref</i>		<i>hydrochlorothiazide tab 40-12.5 mg</i>	61
<i>syr 500 mcg/ml</i>	122	<i>olmesartan medoxomil-</i>	
<i>octreotide acetate subcutaneous soln pref</i>		<i>hydrochlorothiazide tab 40-25 mg</i>	61
<i>syr 50 mcg/ml</i>	122	<i>olmesartan medoxomil tab 20 mg</i>	58
ODEFSEY TAB	79	<i>olmesartan medoxomil tab 40 mg</i>	58
ODOMZO CAP 200MG	65	<i>olmesartan medoxomil tab 5 mg</i>	58
OFEV CAP 100MG	153	<i>olopatadine hcl nasal soln 0.6%</i>	143
OFEV CAP 150MG	153	OLUMIANT TAB 1MG	13
<i>ofloxacin ophth soln 0.3%</i>	145	OLUMIANT TAB 2MG	13
<i>ofloxacin otic soln 0.3%</i>	147	OLUMIANT TAB 4MG	13
<i>ofloxacin tab 300 mg</i>	124	<i>omega-3-acid ethyl esters cap 1 gm</i>	55
<i>ofloxacin tab 400 mg</i>	124	<i>omeprazole cap delayed release 10 mg</i>	156
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	149	<i>omeprazole cap delayed release 20 mg</i>	156
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	149	<i>omeprazole cap delayed release 40 mg</i>	156
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	149	OMNIFLEX DPR	134
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	149	OMNIPOD 5 DX KIT INT G7G6	135
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	149	OMNIPOD 5 DX MIS POD G7G6	135
<i>olanzapine for im inj 10 mg</i>	75	OMNIPOD 5 G7 KIT INTRO	135
<i>olanzapine orally disintegrating tab 10 mg</i>		OMNIPOD 5 G7 MIS PODS	135
.....	75	OMNIPOD DASH KIT INTRO	135
<i>olanzapine orally disintegrating tab 15 mg</i>		OMNIPOD DASH KIT PDM	135
.....	75	OMNIPOD DASH MIS PODS	135

OMNIPOD GO KIT 10UNT/DY .....	135	ORENCIA INJ 87.5/0.7 .....	20
OMNIPOD GO KIT 15UNT/DY .....	135	ORENITRAM TAB 0.125MG .....	87
OMNIPOD GO KIT 20UNT/DY .....	135	ORENITRAM TAB 0.25MG .....	87
OMNIPOD GO KIT 25UNT/DY .....	135	ORENITRAM TAB 1MG .....	87
OMNIPOD GO KIT 30UNT/DY .....	135	ORENITRAM TAB 2.5MG .....	87
OMNIPOD GO KIT 35UNT/DY .....	135	ORENITRAM TAB 5MG .....	87
OMNIPOD GO KIT 40UNT/DY .....	135	ORENITRAM TAB MONTH 1.....	87
OMNIPOD MIS CLASSIC .....	135	ORENITRAM TAB MONTH 2.....	87
OMNIPOD PDM KIT CLASSIC .....	135	ORENITRAM TAB MONTH 3.....	87
OMNITROPE INJ 10/1.5ML .....	119	ORFADIN CAP 10MG .....	120
OMNITROPE INJ 5/1.5ML .....	119	ORFADIN CAP 20MG .....	120
OMNITROPE INJ 5.8MG .....	119	ORFADIN CAP 2MG .....	120
OMVOH INJ 100MG/ML .....	125	ORFADIN CAP 5MG .....	120
ON CALL TES EXPRESS .....	112	ORFADIN SUS 4MG/ML .....	120
<i>ondansetron hcl oral soln 4 mg/5ml</i> .....	52	ORLISSA TAB 150MG .....	118
<i>ondansetron hcl tab 24 mg</i> .....	52	ORLISSA TAB 200MG .....	118
<i>ondansetron hcl tab 4 mg</i> .....	52	<i>orlistat cap 120 mg</i> .....	3
<i>ondansetron hcl tab 8 mg</i> .....	52	<i>orphenadrine citrate tab er 12hr 100 mg</i> .	142
<i>ondansetron orally disintegrating tab 4 mg</i> .....	52	<i>oseltamivir phosphate cap 30 mg (base</i> <i>equiv)</i> .....	81
<i>ondansetron orally disintegrating tab 8 mg</i> .....	52	<i>oseltamivir phosphate cap 45 mg (base</i> <i>equiv)</i> .....	81
ONE DROP TES BLD GLUC .....	112	<i>oseltamivir phosphate cap 75 mg (base</i> <i>equiv)</i> .....	81
ONETOUCH DEL MIS LANC DEV.....	135	<i>oseltamivir phosphate for susp 6 mg/ml</i> <i>(base equiv)</i> .....	81
ONETOUCH DEL MIS PLUS 30G .....	135	OTEZLA TAB 10/20 .....	19
ONETOUCH DEL MIS PLUS 33G .....	135	OTEZLA TAB 10/20/30.....	19
ONETOUCH TES ULTRA.....	112	OTEZLA TAB 20MG.....	19
ONETOUCH TES VERIO .....	112	OTEZLA TAB 30MG.....	20
ONEXTON GEL 1.2-3.75 .....	95	OTREXUP INJ 10MG .....	15
ONUREG TAB 200MG .....	64	OTREXUP INJ 12.5/0.4 .....	15
ONUREG TAB 300MG .....	64	OTREXUP INJ 15MG .....	15
OPILL TAB 0.075MG.....	92	OTREXUP INJ 17.5/0.4 .....	15
<i>opium tincture 1% (10 mg/ml) (morphine</i> <i>equiv)</i> .....	51	OTREXUP INJ 20MG .....	15
OPSUMIT TAB 10MG.....	88	OTREXUP INJ 22.5/0.4 .....	15
OPSYNVI TAB 10-20MG .....	86	OTREXUP INJ 25MG .....	15
OPSYNVI TAB 10-40MG .....	86	OVIDREL INJ .....	118
OPTIUMEZ TES .....	112	<i>oxandrolone tab 10 mg</i> .....	27
ORACEA CAP 40MG.....	105	<i>oxandrolone tab 2.5 mg</i> .....	27
ORALAIR SUB 300 IR.....	6	<i>oxaprozin cap 300 mg</i> .....	19
ORBACTIV SOL 400MG.....	30	<i>oxaprozin tab 600 mg</i> .....	19
ORENCIA CLCK INJ 125MG/ML.....	20	<i>oxazepam cap 10 mg</i> .....	33
ORENCIA INJ 125MG/ML .....	21	<i>oxazepam cap 15 mg</i> .....	33
ORENCIA INJ 50/0.4ML.....	20		

oxazepam cap 30 mg.....	33	PALFORZIA CAP LEVEL 10.....	7
OXBRYTA TAB 300MG .....	129	PALFORZIA CAP LEVEL 2.....	7
OXBRYTA TAB 500MG .....	129	PALFORZIA CAP LEVEL 3.....	7
oxcarbazepine susp 300 mg/5ml (60 mg/ml) .....	41	PALFORZIA CAP LEVEL 4.....	7
oxcarbazepine tab 150 mg .....	41	PALFORZIA CAP LEVEL 5.....	7
oxcarbazepine tab 300 mg .....	41	PALFORZIA CAP LEVEL 6.....	7
oxcarbazepine tab 600 mg .....	41	PALFORZIA CAP LEVEL 7.....	7
oxiconazole nitrate cream 1%.....	97	PALFORZIA CAP LEVEL 8.....	7
oxybutynin chloride solution 5 mg/5ml ....	157	PALFORZIA CAP LEVEL 9.....	7
oxybutynin chloride tab 5 mg.....	157	PALFORZIA POW LEVEL 11 .....	7
oxybutynin chloride tab er 24hr 10 mg.....	157	paliperidone tab er 24hr 1.5 mg .....	74
oxybutynin chloride tab er 24hr 15 mg.....	157	paliperidone tab er 24hr 3 mg .....	74
oxybutynin chloride tab er 24hr 5 mg .....	157	paliperidone tab er 24hr 6 mg .....	74
oxycodone hcl cap 5 mg .....	24	paliperidone tab er 24hr 9 mg .....	74
oxycodone hcl conc 100 mg/5ml (20 mg/ml) .....	24	PALYNZIQ INJ 10/0.5ML.....	120
oxycodone hcl soln 5 mg/5ml .....	24	PALYNZIQ INJ 2.5/0.5.....	120
oxycodone hcl tab 10 mg .....	25	PALYNZIQ INJ 20MG/ML.....	120
oxycodone hcl tab 15 mg.....	25	PANCREAZE CAP 10500UNT.....	114
oxycodone hcl tab 20 mg.....	25	PANCREAZE CAP 16800UNT.....	114
oxycodone hcl tab 30 mg.....	25	PANCREAZE CAP 21000UNT.....	114
oxycodone hcl tab 5 mg.....	25	PANCREAZE CAP 2600UNIT.....	114
oxycodone hcl tab abuse deter 15 mg .....	25	PANCREAZE CAP 4200UNIT.....	114
oxycodone hcl tab er 12hr deter 10 mg .....	25	pantoprazole sodium ec tab 20 mg (base equiv).....	156
oxycodone hcl tab er 12hr deter 20 mg.....	25	pantoprazole sodium ec tab 40 mg (base equiv).....	156
oxycodone hcl tab er 12hr deter 40 mg .....	25	pantoprazole sodium for iv soln 40 mg (base equiv).....	156
oxycodone hcl tab er 12hr deter 80 mg .....	25	PARADIGM REA MIS TRANSMIT .....	135
oxycodone w/ acetaminophen tab 10-325 mg.....	26	paricalcitol cap 1 mcg.....	120
oxycodone w/ acetaminophen tab 2.5-325 mg.....	26	paricalcitol cap 2 mcg.....	120
oxycodone w/ acetaminophen tab 5-325 mg.....	26	paricalcitol cap 4 mcg.....	120
oxycodone w/ acetaminophen tab 7.5-325 mg.....	26	paroxetine hcl oral susp 10 mg/5ml (base equiv) .....	44
oxymorphone hcl tab 10 mg.....	25	paroxetine hcl tab 10 mg.....	44
oxymorphone hcl tab 5 mg .....	25	paroxetine hcl tab 20 mg.....	44
OZEMPIC INJ 2MG/3ML.....	49	paroxetine hcl tab 30 mg.....	44
OZEMPIC INJ 4MG/3ML.....	49	paroxetine hcl tab 40 mg.....	44
OZEMPIC INJ 8MG/3ML.....	49	paroxetine hcl tab er 24hr 12.5 mg .....	44
<b>P</b>		paroxetine hcl tab er 24hr 25 mg .....	44
PALFORZIA CAP ESCALAT .....	6	paroxetine hcl tab er 24hr 37.5 mg .....	44
PALFORZIA CAP LEVEL 1 .....	7	PAXLOVID TAB 150-100.....	80
		PAXLOVID TAB 300-100.....	80
		pazopanib hcl tab 200 mg (base equiv)...	68



<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i> .....	156	PERTZYE CAP 8000UNIT.....	114
<i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i> .....	156	PHEBURANE MIS 483/GM.....	121
PEDIARIX INJ 0.5ML .....	155	<i>phenazopyridine hcl tab 100 mg</i> .....	127
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i> .....	132	<i>phenazopyridine hcl tab 200 mg</i> .....	127
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i> .....	132	PHENDIMETRAZ CAP 105MG ER .....	3
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i> .....	133	<i>phendimetrazine tartrate tab 35 mg</i> .....	3
PEGASYS INJ.....	80	<i>phenelzine sulfate tab 15 mg</i> .....	43
PEGASYS INJ 180MCG/M.....	80	<i>phenobarbital elixir 20 mg/5ml</i> .....	131
<i>peniclovir cream 1%</i> .....	102	<i>phenobarbital tab 100 mg</i> .....	132
<i>penicillamine cap 250 mg</i> .....	138	<i>phenobarbital tab 15 mg</i> .....	132
<i>penicillamine tab 250 mg</i> .....	138	<i>phenobarbital tab 16.2 mg</i> .....	132
<i>penicillin v potassium for soln 125 mg/5ml</i> .....	147	<i>phenobarbital tab 30 mg</i> .....	132
<i>penicillin v potassium for soln 250 mg/5ml</i> .....	147	<i>phenobarbital tab 32.4 mg</i> .....	132
<i>penicillin v potassium tab 250 mg</i> .....	147	<i>phenobarbital tab 60 mg</i> .....	132
<i>penicillin v potassium tab 500 mg</i> .....	147	<i>phenobarbital tab 64.8 mg</i> .....	132
PENTACEL INJ .....	155	<i>phenobarbital tab 97.2 mg</i> .....	132
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i> .....	27	<i>phenoxybenzamine hcl cap 10 mg</i> .....	58
<i>pentoxifylline tab er 400 mg</i> .....	128	<i>phentermine hcl cap 15 mg</i> .....	3
PERFECT POIN MIS LANC 28G.....	135	<i>phentermine hcl cap 30 mg</i> .....	3
PERFECT POIN MIS LANC 30G.....	135	<i>phentermine hcl cap 37.5 mg</i> .....	3
<i>perindopril erbumine tab 2 mg</i> .....	57	<i>phentermine hcl tab 37.5 mg</i> .....	3
<i>perindopril erbumine tab 4 mg</i> .....	57	<i>phenylephrine hcl ophth soln 10%</i> .....	144
<i>perindopril erbumine tab 8 mg</i> .....	57	<i>phenylephrine hcl ophth soln 2.5%</i> .....	144
<i>permethrin cream 5%</i> .....	106	<i>phenytoin chew tab 50 mg</i> .....	42
<i>perphenazine-amitriptyline tab 2-10 mg</i> .	149	<i>phenytoin sodium extended cap 100 mg</i> .	42
<i>perphenazine-amitriptyline tab 2-25 mg</i> .	149	<i>phenytoin sodium extended cap 200 mg</i> .	43
<i>perphenazine-amitriptyline tab 4-10 mg</i> .	149	<i>phenytoin sodium extended cap 300 mg</i> .	43
<i>perphenazine-amitriptyline tab 4-25 mg</i> .	149	<i>phenytoin susp 125 mg/5ml</i> .....	43
<i>perphenazine-amitriptyline tab 4-50 mg</i> .	150	PHEXXI GEL.....	158
<i>perphenazine tab 16 mg</i> .....	76	<i>phytonadione tab 5 mg</i> .....	159
<i>perphenazine tab 2 mg</i> .....	76	<i>pilocarpine hcl ophth soln 1%</i> .....	144
<i>perphenazine tab 4 mg</i> .....	76	<i>pilocarpine hcl ophth soln 2%</i> .....	144
<i>perphenazine tab 8 mg</i> .....	76	<i>pilocarpine hcl ophth soln 4%</i> .....	144
PERTZYE CAP 16000U.....	114	<i>pilocarpine hcl tab 5 mg</i> .....	141
PERTZYE CAP 24000U.....	114	<i>pilocarpine hcl tab 7.5 mg</i> .....	141
PERTZYE CAP 4000UNIT .....	114	<i>pimecrolimus cream 1%</i> .....	104
		<i>pimozide tab 1 mg</i> .....	152
		<i>pimozide tab 2 mg</i> .....	152
		<i>pindolol tab 10 mg</i> .....	83
		<i>pindolol tab 5 mg</i> .....	83
		<i>pioglitazone hcl-glimepiride tab 30-2 mg</i> .	47
		<i>pioglitazone hcl-glimepiride tab 30-4 mg</i> .	47
		<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i> .....	47

<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i> .....	47	<i>potassium chloride oral soln 10% (20 meq/15ml)</i> .....	138
<i>pioglitazone hcl tab 15 mg (base equiv)</i> ....	50	<i>potassium chloride oral soln 20% (40 meq/15ml)</i> .....	138
<i>pioglitazone hcl tab 30 mg (base equiv)</i> ...50		<i>potassium chloride powder packet 20 meq</i>	
<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...50		.....	138
PIP BLOOD TES.....	112	<i>potassium chloride tab er 10 meq</i> .....	138
PIQRAY 200MG TAB DOSE.....	68	<i>potassium chloride tab er 20 meq (1500 mg)</i> .....	138
PIQRAY 250MG TAB DOSE.....	68	<i>potassium chloride tab er 8 meq (600 mg)</i>	
PIQRAY 300MG TAB DOSE.....	69	.....	138
<i>pirfenidone cap 267 mg</i> .....	153	<i>potassium citrate &amp; citric acid powder pack 3300-1002 mg</i> .....	126
<i>pirfenidone tab 267 mg</i> .....	153	<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i> .....	126
<i>pirfenidone tab 801 mg</i> .....	153	<i>potassium citrate tab er 10 meq (1080 mg)</i>	
<i>piroxicam cap 10 mg</i> .....	19	.....	126
<i>piroxicam cap 20 mg</i> .....	19	<i>potassium citrate tab er 15 meq (1620 mg)</i>	
<i>pitavastatin calcium tab 1 mg</i> .....	56	.....	126
<i>pitavastatin calcium tab 2 mg</i> .....	56	<i>potassium citrate tab er 5 meq (540 mg)</i>	126
<i>pitavastatin calcium tab 4 mg</i> .....	56	<i>pramipexole dihydrochloride tab 0.125 mg</i>	
PLEGRIDY INJ.....	151	.....	72
PLEGRIDY INJ PEN.....	151	<i>pramipexole dihydrochloride tab 0.25 mg</i>	72
PLEGRIDY INJ STARTER.....	151	<i>pramipexole dihydrochloride tab 0.5 mg</i>	72
PLEGRIDY PEN INJ STARTER.....	151	<i>pramipexole dihydrochloride tab 0.75 mg</i>	72
POCKETCHEM TES EZ.....	113	<i>pramipexole dihydrochloride tab 1.5 mg</i> ..	72
<i>podofilox gel 0.5%</i> .....	105	<i>pramipexole dihydrochloride tab 1 mg</i> .....	72
<i>podofilox soln 0.5%</i> .....	105	<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i> .....	72
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i> .....	145	<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i> .....	72
POMALYST CAP 1MG.....	66	<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	
POMALYST CAP 2MG.....	66	.....	72
POMALYST CAP 3MG.....	66	<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i> .....	72
POMALYST CAP 4MG.....	66	<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i> .....	72
PONVORY TAB 20MG.....	151	<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	
PONVORY TAB STARTER.....	151	.....	72
<i>posaconazole susp 40 mg/ml</i> .....	53	<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i> .....	72
<i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i> .....	126	<i>pramoxine-hc cream 1-2.5%</i> .....	103
<i>potassium chloride cap er 10 meq</i> .....	138	<i>prasugrel hcl tab 10 mg (base equiv)</i> .....	129
<i>potassium chloride cap er 8 meq</i> .....	138	<i>prasugrel hcl tab 5 mg (base equiv)</i> .....	129
<i>potassium chloride microencapsulated crys er tab 10 meq</i> .....	138		
<i>potassium chloride microencapsulated crys er tab 15 meq</i> .....	138		
<i>potassium chloride microencapsulated crys er tab 20 meq</i> .....	138		

<i>pravastatin sodium tab 10 mg</i> .....	56	<i>pregabalin cap 50 mg</i> .....	41
<i>pravastatin sodium tab 20 mg</i> .....	56	<i>pregabalin cap 75 mg</i> .....	41
<i>pravastatin sodium tab 40 mg</i> .....	56	<i>pregabalin soln 20 mg/ml</i> .....	42
<i>pravastatin sodium tab 80 mg</i> .....	56	<i>pregabalin tab er 24hr 165 mg</i> .....	152
<i>praziquantel tab 600 mg</i> .....	29	<i>pregabalin tab er 24hr 330 mg</i> .....	152
<i>prazosin hcl cap 1 mg</i> .....	59	<i>pregabalin tab er 24hr 82.5 mg</i> .....	152
<i>prazosin hcl cap 2 mg</i> .....	59	PREGNYL INJ 10000UNT .....	118
<i>prazosin hcl cap 5 mg</i> .....	59	PREMIUM BLOO MIS GLUCOSE.....	113
PRECISION TES XTRA.....	113	PRENATAL 19 CHW 29-1MG .....	141
<i>prednicarbate oint 0.1%</i> .....	103	<i>prenatal vit w/ dss-iron carbonyl-fa tab 90-1</i> <i>mg</i> .....	141
<i>prednisolone acetate ophth susp 1%</i> .....	146	<i>prenatal vit w/ fe fumarate-fa chew tab 29-1</i> <i>mg</i> .....	141
<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i> .....	93	<i>prenatal vit w/ fe fumarate-fa tab 28-1 mg</i> .....	142
<i>prednisolone sod phos orally disintegr tab</i> <i>10 mg (base eq)</i> .....	93	<i>prenatal vit w/ fe fum-methylfolate-fa tab</i> <i>27-0.6-0.4 mg</i> .....	141
<i>prednisolone sod phos orally disintegr tab</i> <i>15 mg (base eq)</i> .....	93	<i>prenatal vit w/ iron carbonyl-fa tab 50-1.25</i> <i>mg</i> .....	142
<i>prednisolone sod phos orally disintegr tab</i> <i>30 mg (base eq)</i> .....	93	<i>prenat w/o a w/feum-methfol-fa-dha cap</i> <i>27-0.6-0.4-300 mg</i> .....	141
<i>prednisolone sod phosphate oral soln 15</i> <i>mg/5ml (base equiv)</i> .....	93	PREVYMIS TAB 240MG.....	80
<i>prednisolone sod phosph oral soln 6.7</i> <i>mg/5ml (5 mg/5ml base)</i> .....	93	PREVYMIS TAB 480MG.....	80
<i>prednisolone soln 15 mg/5ml</i> .....	93	PREZCOBIX TAB 800-150.....	79
<i>prednisolone tab 5 mg</i> .....	93	PREZISTA SUS 100MG/ML.....	79
PREDNISON CON 5MG/ML.....	93	PREZISTA TAB 150MG .....	79
<i>prednisone oral soln 5 mg/5ml</i> .....	93	PREZISTA TAB 75MG .....	79
<i>prednisone tab 10 mg</i> .....	93	PRIFTIN TAB 150MG .....	63
<i>prednisone tab 1 mg</i> .....	93	<i>primaquine phosphate tab 26.3 mg (15 mg</i> <i>base)</i> .....	62
<i>prednisone tab 2.5 mg</i> .....	93	<i>primidone tab 250 mg</i> .....	42
<i>prednisone tab 20 mg</i> .....	93	<i>primidone tab 50 mg</i> .....	42
<i>prednisone tab 50 mg</i> .....	93	<i>probenecid tab 500 mg</i> .....	128
<i>prednisone tab 5 mg</i> .....	93	<i>prochlorperazine edisylate inj 10 mg/2ml</i> .76	
<i>prednisone tab therapy pack 10 mg (21)</i> ..	93	<i>prochlorperazine maleate tab 10 mg (base</i> <i>equivalent)</i> .....	76
<i>prednisone tab therapy pack 10 mg (48)</i>	93	<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i> .....	76
<i>prednisone tab therapy pack 5 mg (21)</i> ....	93	<i>prochlorperazine suppos 25 mg</i> .....	76
<i>prednisone tab therapy pack 5 mg (48)</i> ....	93	PROCRIT INJ 10000/ML .....	131
PRED SOD PHO SOL 1% OP.....	146	PROCRIT INJ 2000/ML.....	131
<i>pregabalin cap 100 mg</i> .....	41	PROCRIT INJ 20000/ML .....	131
<i>pregabalin cap 150 mg</i> .....	42	PROCRIT INJ 3000/ML.....	131
<i>pregabalin cap 200 mg</i> .....	42	PROCRIT INJ 4000/ML.....	131
<i>pregabalin cap 225 mg</i> .....	42		
<i>pregabalin cap 25 mg</i> .....	41		
<i>pregabalin cap 300 mg</i> .....	42		

PROCRIT INJ 40000/ML.....	131	<i>propranolol hcl tab 10 mg</i> .....	83
PRODIGY NO TES CODING .....	113	<i>propranolol hcl tab 20 mg</i> .....	83
<i>progesterone cap 100 mg</i> .....	148	<i>propranolol hcl tab 40 mg</i> .....	83
<i>progesterone cap 200 mg</i> .....	148	<i>propranolol hcl tab 60 mg</i> .....	83
<i>progesterone im in oil 50 mg/ml</i> .....	148	<i>propranolol hcl tab 80 mg</i> .....	83
PROGRAF CAP 0.5MG.....	140	<i>propylthiouracil tab 50 mg</i> .....	154
PROGRAF CAP 1MG .....	140	<i>protriptyline hcl tab 10 mg</i> .....	46
PROGRAF CAP 5MG .....	140	<i>protriptyline hcl tab 5 mg</i> .....	46
PROGRAF GRA 0.2MG.....	140	PRO VOICE TES V8/V9 .....	113
PROGRAF GRA 1MG .....	140	<i>pseudoephed-bromphen-dm syrup 30-2-10</i>	
PROMACTA PAK 25MG .....	131	<i>mg/5ml</i> .....	94
PROMACTA POW 12.5MG.....	131	PTS PANELS TES EGLU.....	113
PROMACTA TAB 12.5MG .....	131	PULMICORT INH 180MCG .....	36
PROMACTA TAB 25MG .....	131	PULMICORT INH 90MCG .....	36
PROMACTA TAB 50MG .....	131	PULMOZYME SOL 1MG/ML.....	153
PROMACTA TAB 75MG .....	131	PURIXAN SUS 20MG/ML .....	64
<i>promethazine &amp; phenylephrine syrup 6.25-</i>		<i>pyrazinamide tab 500 mg</i> .....	63
<i>5 mg/5ml</i> .....	94	<i>pyridostigmine bromide oral soln 60</i>	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	94	<i>mg/5ml</i> .....	62
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	54	<i>pyridostigmine bromide tab 30 mg</i> .....	62
<i>promethazine hcl suppos 12.5 mg</i> .....	54	<i>pyridostigmine bromide tab 60 mg</i> .....	62
<i>promethazine hcl suppos 25 mg</i> .....	54	<i>pyridostigmine bromide tab er 180 mg</i> .....	62
<i>promethazine hcl suppos 50 mg</i> .....	54	<i>pyrimethamine tab 25 mg</i> .....	62
<i>promethazine hcl tab 12.5 mg</i> .....	54	<b>Q</b>	
<i>promethazine hcl tab 25 mg</i> .....	54	QSYMIA CAP 11.25-69.....	3
<i>promethazine hcl tab 50 mg</i> .....	54	QSYMIA CAP 15-92MG.....	3
<i>promethazine-phenylephrine-codeine</i>		QSYMIA CAP 3.75-23 .....	3
<i>syrup 6.25-5-10 mg/5ml</i> .....	94	QSYMIA CAP 7.5-46MG .....	3
<i>promethazine w/ codeine syrup 6.25-10</i>		QTERN TAB 10-5MG .....	47
<i>mg/5ml</i> .....	94	QTERN TAB 5-5MG.....	47
<i>propafenone hcl cap er 12hr 225 mg</i> .....	33	QUADRACEL INJ.....	155
<i>propafenone hcl cap er 12hr 325 mg</i> .....	33	QUADRACEL INJ 0.5ML .....	155
<i>propafenone hcl cap er 12hr 425 mg</i> .....	33	<i>quetiapine fumarate tab 100 mg</i> .....	75
<i>propafenone hcl tab 150 mg</i> .....	33	<i>quetiapine fumarate tab 150 mg</i> .....	75
<i>propafenone hcl tab 225 mg</i> .....	33	<i>quetiapine fumarate tab 200 mg</i> .....	75
<i>propafenone hcl tab 300 mg</i> .....	33	<i>quetiapine fumarate tab 25 mg</i> .....	75
<i>proparacaine hcl ophth soln 0.5%</i> .....	145	<i>quetiapine fumarate tab 300 mg</i> .....	75
PROPECIA TAB 1MG.....	104	<i>quetiapine fumarate tab 400 mg</i> .....	75
<i>propranolol hcl cap er 24hr 120 mg</i> .....	83	<i>quetiapine fumarate tab 50 mg</i> .....	75
<i>propranolol hcl cap er 24hr 160 mg</i> .....	83	<i>quetiapine fumarate tab er 24hr 150 mg</i> ...75	
<i>propranolol hcl cap er 24hr 60 mg</i> .....	83	<i>quetiapine fumarate tab er 24hr 200 mg</i>	75
<i>propranolol hcl cap er 24hr 80 mg</i> .....	83	<i>quetiapine fumarate tab er 24hr 300 mg</i>	76
<i>propranolol hcl oral soln 20 mg/5ml</i> .....	83	<i>quetiapine fumarate tab er 24hr 400 mg</i>	76
<i>propranolol hcl oral soln 40 mg/5ml</i> .....	83	<i>quetiapine fumarate tab er 24hr 50 mg</i> .....	75

QUICKTEK TES .....	113
<i>quinapril hcl tab 10 mg</i> .....	57
<i>quinapril hcl tab 20 mg</i> .....	58
<i>quinapril hcl tab 40 mg</i> .....	58
<i>quinapril hcl tab 5 mg</i> .....	57
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i> .....	61
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i> .....	61
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i> .....	61
<i>quinidine gluconate tab er 324 mg</i> .....	33
<i>quinine sulfate cap 324 mg</i> .....	62
QUINTET AC TES BLD GLUC .....	113
QUINTET TES BLD GLUC .....	113
QULIPTA TAB 10MG.....	136
QULIPTA TAB 30MG.....	136
QULIPTA TAB 60MG.....	136
QUZYTIR INJ 10MG/ML.....	54
<b>R</b>	
<i>rabeprazole sodium ec tab 20 mg</i> .....	156
RADICAVA ORS SUS 105/5ML.....	143
RADICAVA ORS SUS STARTER .....	143
<i>raloxifene hcl tab 60 mg</i> .....	119
<i>ramelteon tab 8 mg</i> .....	132
<i>ramipril cap 1.25 mg</i> .....	58
<i>ramipril cap 10 mg</i> .....	58
<i>ramipril cap 2.5 mg</i> .....	58
<i>ramipril cap 5 mg</i> .....	58
<i>ranolazine tab er 12hr 1000 mg</i> .....	31
<i>ranolazine tab er 12hr 500 mg</i> .....	31
RAPAMUNE SOL 1MG/ML.....	140
RAPAMUNE TAB 0.5MG.....	140
RAPAMUNE TAB 1MG.....	140
RAPAMUNE TAB 2MG.....	140
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i> .....	73
<i>rasagiline mesylate tab 1 mg (base equiv)</i> .....	73
RASUVO INJ 10MG .....	16
RASUVO INJ 12.5MG .....	16
RASUVO INJ 15MG .....	16
RASUVO INJ 17.5MG .....	16
RASUVO INJ 20MG .....	16
RASUVO INJ 22.5MG .....	16

RASUVO INJ 25MG.....	16
RASUVO INJ 30MG.....	16
RASUVO INJ 7.5MG.....	15
RAVICTI LIQ 1.1GM/ML .....	121
RAYOS TAB 1MG .....	93
RAYOS TAB 2MG .....	93
RAYOS TAB 5MG .....	94
REBIF INJ 22/0.5.....	151
REBIF INJ 44/0.5.....	151
REBIF REBIDO INJ 22/0.5 .....	152
REBIF REBIDO INJ 44/0.5 .....	152
REBIF REBIDO INJ TITRATN .....	152
REBIF TITRATN INJ PACK .....	152
REDITREX INJ 10/.4ML.....	16
REDITREX INJ 12.5/0.5.....	16
REDITREX INJ 15/.6ML.....	16
REDITREX INJ 17.5/0.7 .....	16
REDITREX INJ 20/.8ML.....	16
REDITREX INJ 22.5/0.9 .....	16
REDITREX INJ 25MG/ML.....	16
REDITREX INJ 7.5/.3ML.....	16
REFUAH PLUS TES BLD GLUC .....	113
REGRANEX GEL 0.01%.....	106
RELEUKO INJ 300MCG .....	131
RELEUKO INJ 480MCG .....	131
RELION PREMI TES GLUCOSE .....	113
RELION PRIME TES .....	113
RELION PRIME TES GLUCOSE .....	113
RELION TES ULTIMA .....	113
RELION TRUE TES METRIX.....	113
RELYVRIO PAK 3-1GM.....	143
<i>repaglinide tab 0.5 mg</i> .....	50
<i>repaglinide tab 1 mg</i> .....	50
<i>repaglinide tab 2 mg</i> .....	50
REPATHA INJ 140MG/ML.....	57
REPATHA PUSH INJ 420/3.5.....	57
REPATHA SURE INJ 140MG/ML.....	57
RESTASIS EMU 0.05% OP.....	145
RESTASIS MUL EMU 0.05% OP .....	145
RETACRIT INJ 10000UNT .....	131
RETACRIT INJ 20000UNI .....	131
RETACRIT INJ 2000UNIT .....	131
RETACRIT INJ 3000UNIT .....	131
RETACRIT INJ 40000UNT .....	131

RETACRIT INJ 4000UNIT .....	131	<i>risedronate sodium tab 150 mg</i> .....	117
RETEVMO CAP 40MG .....	69	<i>risedronate sodium tab 30 mg</i> .....	117
RETEVMO CAP 80MG .....	69	<i>risedronate sodium tab 35 mg</i> .....	117
RETEVMO TAB 120MG.....	69	<i>risedronate sodium tab 5 mg</i> .....	116
RETEVMO TAB 160MG.....	69	<i>risedronate sodium tab delayed release 35</i>	
RETEVMO TAB 40MG.....	69	<i>mg</i> .....	117
RETEVMO TAB 80MG.....	69	<i>risperidone microspheres for im extended</i>	
RETIN-A CRE 0.025% .....	95	<i>rel susp 12.5 mg</i> .....	74
RETIN-A CRE 0.05% .....	95	<i>risperidone microspheres for im extended</i>	
RETIN-A CRE 0.1%.....	95	<i>rel susp 25 mg</i> .....	74
RETIN-A GEL 0.01% .....	95	<i>risperidone microspheres for im extended</i>	
RETIN-A GEL 0.025% .....	95	<i>rel susp 37.5 mg</i> .....	74
RETIN-A MICR GEL 0.04% .....	96	<i>risperidone microspheres for im extended</i>	
RETIN-A MICR GEL 0.04%PMP .....	96	<i>rel susp 50 mg</i> .....	74
RETIN-A MICR GEL 0.06% .....	96	<i>risperidone orally disintegrating tab 0.25</i>	
RETIN-A MICR GEL 0.08% .....	96	<i>mg</i> .....	74
RETIN-A MICR GEL 0.1% .....	96	<i>risperidone orally disintegrating tab 0.5 mg</i>	
RETIN-A MICR GEL 0.1%PUMP .....	96	.....	74
REVATIO SUS 10MG/ML .....	88	<i>risperidone orally disintegrating tab 1 mg</i> .74	
REVATIO TAB 20MG.....	88	<i>risperidone orally disintegrating tab 2 mg</i> 74	
REVLIMID CAP 10MG.....	139	<i>risperidone orally disintegrating tab 3 mg</i> 74	
REVLIMID CAP 15MG.....	139	<i>risperidone orally disintegrating tab 4 mg</i> 74	
REVLIMID CAP 2.5MG .....	139	<i>risperidone soln 1 mg/ml</i> .....	74
REVLIMID CAP 20MG.....	139	<i>risperidone tab 0.25 mg</i> .....	74
REVLIMID CAP 25MG.....	139	<i>risperidone tab 0.5 mg</i> .....	74
REVLIMID CAP 5MG.....	139	<i>risperidone tab 1 mg</i> .....	74
REYATAZ POW 50MG .....	79	<i>risperidone tab 2 mg</i> .....	74
REYVOW TAB 100MG .....	137	<i>risperidone tab 3 mg</i> .....	74
REYVOW TAB 50MG .....	137	<i>risperidone tab 4 mg</i> .....	74
<i>ribavirin cap 200 mg</i> .....	80	<i>ritonavir tab 100 mg</i> .....	79
<i>ribavirin tab 200 mg</i> .....	80	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
<i>rifabutin cap 150 mg</i> .....	63	<i>equivalent)</i> .....	149
<i>rifampin cap 150 mg</i> .....	63	<i>rivastigmine tartrate cap 3 mg (base</i>	
<i>rifampin cap 300 mg</i> .....	63	<i>equivalent)</i> .....	149
RIGHTEST TES GS100 .....	113	<i>rivastigmine tartrate cap 4.5 mg (base</i>	
RIGHTEST TES GS300 .....	113	<i>equivalent)</i> .....	149
RIGHTEST TES GS550 .....	113	<i>rivastigmine tartrate cap 6 mg (base</i>	
RIGHTEST TES GT333.....	113	<i>equivalent)</i> .....	149
<i>riluzole tab 50 mg</i> .....	143	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i> 149	
<i>rimantadine hydrochloride tab 100 mg</i> ....	82	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i> .149	
RINVOQ LQ SOL 1MG/ML .....	13	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i> .149	
RINVOQ TAB 15MG ER .....	13	RIVFLOZA INJ 128/0.8 .....	127
RINVOQ TAB 30MG ER .....	14	RIVFLOZA INJ 160MG/ML.....	127
RINVOQ TAB 45MG ER .....	14	RIVFLOZA INJ 80/0.5ML .....	127

<i>rizatriptan benzoate oral disintegrating tab</i> 10 mg (base eq).....	137	RYBELSUS TAB 3MG.....	49
<i>rizatriptan benzoate oral disintegrating tab</i> 5 mg (base eq).....	137	RYBELSUS TAB 7MG.....	49
<i>rizatriptan benzoate tab 10 mg (base</i> <i>equivalent)</i> .....	137	RYDAPT CAP 25MG.....	69
<i>rizatriptan benzoate tab 5 mg (base</i> <i>equivalent)</i> .....	137	<b>S</b>	
<i>roflumilast tab 250 mcg</i> .....	35	SABRIL POW 500MG .....	42
<i>roflumilast tab 500 mcg</i> .....	35	SABRIL TAB 500MG .....	42
<i>ropinirole hydrochloride tab 0.25 mg</i> .....	72	SAFE-T-PRO MIS PLUS .....	135
<i>ropinirole hydrochloride tab 0.5 mg</i> .....	72	SAIZEN INJ 5MG .....	119
<i>ropinirole hydrochloride tab 1 mg</i> .....	72	SAIZEN INJ 8.8MG .....	119
<i>ropinirole hydrochloride tab 2 mg</i> .....	72	SAIZENPREP INJ 8.8MG .....	119
<i>ropinirole hydrochloride tab 3 mg</i> .....	72	<i>salicylic acid er film-forming soln 28.5%</i> 105	
<i>ropinirole hydrochloride tab 4 mg</i> .....	72	<i>salicylic acid film forming liquid 27.5%</i> ... 105	
<i>ropinirole hydrochloride tab 5 mg</i> .....	73	<i>salicylic acid foam 6%</i> .....	105
<i>ropinirole hydrochloride tab er 24hr 12 mg</i> <i>(base equivalent)</i> .....	73	<i>salicylic acid gel 6%</i> .....	105
<i>ropinirole hydrochloride tab er 24hr 2 mg</i> <i>(base equivalent)</i> .....	73	<i>salicylic acid shampoo 6%</i> .....	105
<i>ropinirole hydrochloride tab er 24hr 4 mg</i> <i>(base equivalent)</i> .....	73	<i>salicylic acid soln 26%</i> .....	105
<i>ropinirole hydrochloride tab er 24hr 6 mg</i> <i>(base equivalent)</i> .....	73	<i>salsalate tab 500 mg</i> .....	22
<i>ropinirole hydrochloride tab er 24hr 8 mg</i> <i>(base equivalent)</i> .....	73	<i>salsalate tab 750 mg</i> .....	22
<i>rosuvastatin calcium tab 10 mg</i> .....	56	SAMSCA TAB 15MG .....	122
<i>rosuvastatin calcium tab 20 mg</i> .....	56	SAMSCA TAB 30MG .....	122
<i>rosuvastatin calcium tab 40 mg</i> .....	56	SANDIMMUNE CAP 100MG .....	140
<i>rosuvastatin calcium tab 5 mg</i> .....	56	SANDIMMUNE CAP 25MG .....	140
ROXYBOND TAB 5MG.....	25	SANDIMMUNE SOL 100MG/ML.....	140
ROZLYTREK CAP 100MG .....	69	SANDOSTATIN INJ 100MCG.....	122
ROZLYTREK CAP 200MG .....	69	SANDOSTATIN INJ 500MCG.....	122
ROZLYTREK PAK 50MG .....	69	SANDOSTATIN INJ 50MCG/ML.....	122
RUBRACA TAB 200MG.....	69	SANTYL OIN 250/GM.....	104
RUBRACA TAB 250MG.....	69	<i>sapropterin dihydrochloride powder packet</i> 100 mg.....	121
RUBRACA TAB 300MG.....	69	<i>sapropterin dihydrochloride powder packet</i> 500 mg.....	121
RUCONEST INJ 2100UNIT.....	128	<i>sapropterin dihydrochloride tab 100 mg</i>	121
<i>rufinamide susp 40 mg/ml</i> .....	42	SAVELLA MIS TITR PAK .....	150
<i>rufinamide tab 200 mg</i> .....	42	SAVELLA TAB 100MG.....	150
<i>rufinamide tab 400 mg</i> .....	42	SAVELLA TAB 12.5MG.....	150
RUKOBIA TAB 600MG ER .....	79	SAVELLA TAB 25MG.....	150
RYBELSUS TAB 14MG .....	49	SAVELLA TAB 50MG.....	150
		<i>saxagliptin hcl tab 2.5 mg (base equiv)</i> ....	49
		<i>saxagliptin hcl tab 5 mg (base equiv)</i> .....	49
		<i>saxagliptin-metformin hcl tab er 24hr 2.5-</i> <i>1000 mg</i> .....	48
		<i>saxagliptin-metformin hcl tab er 24hr 5-</i> <i>1000 mg</i> .....	48

<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i> .....	48	SIMPONI INJ 100MG/ML .....	13
SAXENDA INJ 18MG/3ML .....	3	SIMPONI INJ 50/0.5ML .....	13
<i>scopolamine td patch 72hr 1 mg/3days</i> .....	52	<i>simvastatin tab 10 mg</i> .....	56
SEGLUROMET TAB 2.5-1000 .....	48	<i>simvastatin tab 20 mg</i> .....	56
SEGLUROMET TAB 2.5-500 .....	48	<i>simvastatin tab 40 mg</i> .....	56
SEGLUROMET TAB 7.5-1000 .....	48	<i>simvastatin tab 5 mg</i> .....	56
SEGLUROMET TAB 7.5-500.....	48	<i>simvastatin tab 80 mg</i> .....	56
<i>selegiline hcl cap 5 mg</i> .....	73	<i>sirolimus oral soln 1 mg/ml</i> .....	140
<i>selegiline hcl tab 5 mg</i> .....	73	<i>sirolimus tab 0.5 mg</i> .....	140
<i>selenium sulfide lotion 2.5%</i> .....	101	<i>sirolimus tab 1 mg</i> .....	140
<i>selenium sulfide shampoo 2.25%</i> .....	101	<i>sirolimus tab 2 mg</i> .....	140
<i>selenium sulfide shampoo 2.3%</i> .....	101	SITAVIG TAB 50MG .....	81
SE-NATAL 19 CHW.....	142	SKYRIZI INJ 150MG/ML .....	100
SENSIPAR TAB 30MG .....	121	SKYRIZI INJ 180/1.2 .....	125
SENSIPAR TAB 60MG .....	121	SKYRIZI INJ 360/2.4 .....	125
SENSIPAR TAB 90MG .....	121	SKYRIZI PEN INJ 150MG/ML.....	100
SEROSTIM INJ 4MG .....	119	SKYTROFA INJ 11MG .....	119
SEROSTIM INJ 5MG .....	119	SKYTROFA INJ 13.3MG .....	119
SEROSTIM INJ 6MG .....	119	SKYTROFA INJ 3.6MG .....	119
<i>sertraline hcl oral concentrate for solution</i>		SKYTROFA INJ 3MG .....	119
<i>20 mg/ml</i> .....	44	SKYTROFA INJ 4.3MG .....	119
<i>sertraline hcl tab 100 mg</i> .....	44	SKYTROFA INJ 5.2MG .....	119
<i>sertraline hcl tab 25 mg</i> .....	44	SKYTROFA INJ 6.3MG .....	119
<i>sertraline hcl tab 50 mg</i> .....	44	SKYTROFA INJ 7.6MG .....	119
<i>sevelamer carbonate packet 0.8 gm</i> .....	126	SKYTROFA INJ 9.1MG .....	119
<i>sevelamer carbonate packet 2.4 gm</i> .....	126	SMARTEST TES BLD GLUC .....	113
<i>sevelamer carbonate tab 800 mg</i> .....	126	SMART SENSE TES TEST .....	113
<i>sevelamer hcl tab 400 mg</i> .....	126	SOANZ TAB 20MG.....	115
<i>sevelamer hcl tab 800 mg</i> .....	126	<i>sodium chloride soln nebu 0.9%</i> .....	94
SFROWASA ENE 4GM.....	125	<i>sodium chloride soln nebu 10%</i> .....	94
SIKLOS TAB 1000MG .....	129	<i>sodium chloride soln nebu 3%</i> .....	94
SIKLOS TAB 100MG .....	129	<i>sodium chloride soln nebu 7%</i> .....	94
<i>sildenafil citrate for suspension 10 mg/ml</i> 88		<i>sodium citrate &amp; citric acid soln 500-334</i>	
<i>sildenafil citrate tab 100 mg</i> .....	86	<i>mg/5ml</i> .....	126
<i>sildenafil citrate tab 20 mg</i> .....	88	<i>sodium fluoride chew tab 0.25 mg f (from</i>	
<i>sildenafil citrate tab 25 mg</i> .....	86	<i>0.55 mg naf)</i> .....	138
<i>sildenafil citrate tab 50 mg</i> .....	86	<i>sodium fluoride chew tab 0.5 mg f (from 1.1</i>	
SILIQ INJ 210/1.5.....	99	<i>mg naf)</i> .....	138
<i>silodosin cap 4 mg</i> .....	127	<i>sodium fluoride cream 1.1%</i> .....	141
<i>silodosin cap 8 mg</i> .....	127	<i>sodium fluoride gel 1.1% (0.5% f)</i> .....	141
<i>silver sulfadiazine cream 1%</i> .....	102	<i>sodium fluoride paste 1.1%</i> .....	141
SIMLANDI 1PN KIT 40/0.4ML.....	13	<i>sodium fluoride-potassium nitrate gel 1.1-</i>	
SIMLANDI 2PN INJ 40/0.4ML.....	13	<i>5%</i> .....	141
		<i>sodium fluoride rinse 0.2%</i> .....	141



<i>sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)</i> .....	138	SOTYKTU TAB 6MG.....	100
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i> .....	138	SOVALDI PAK 150MG.....	81
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i> .....	121	SOVALDI PAK 200MG.....	81
<i>sodium phenylbutyrate tab 500 mg</i> .....	121	SOVALDI TAB 200MG.....	81
<i>sodium polystyrene sulfonate powder</i> .....	141	SOVALDI TAB 400MG.....	81
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i> .....	141	<i>spinosad susp 0.9%</i> .....	106
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i> .....	141	SPIRIVA AER 1.25MCG.....	34
SOD OXYBATE SOL 500MG/ML.....	148	SPIRIVA SPR 2.5MCG.....	35
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> .....	133	<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i> .....	115
SOFOS/VELPAT TAB 400-100.....	81	<i>spironolactone susp 25 mg/5ml</i> .....	116
SOFTCLIX MIS LANCETS.....	135	<i>spironolactone tab 100 mg</i> .....	116
SOGROYA INJ 10MG/1.5.....	119	<i>spironolactone tab 25 mg</i> .....	116
SOGROYA INJ 15MG/1.5.....	119	<i>spironolactone tab 50 mg</i> .....	116
SOGROYA INJ 5MG/1.5.....	119	SPRYCEL TAB 100MG.....	69
SOHONOS CAP 1.5MG.....	142	SPRYCEL TAB 140MG.....	69
SOHONOS CAP 10MG.....	142	SPRYCEL TAB 20MG.....	69
SOHONOS CAP 1MG.....	142	SPRYCEL TAB 50MG.....	69
SOHONOS CAP 2.5MG.....	142	SPRYCEL TAB 70MG.....	69
SOHONOS CAP 5MG.....	142	SPRYCEL TAB 80MG.....	69
<i>solifenacin succinate tab 10 mg</i> .....	157	<i>stavudine cap 15 mg</i> .....	79
<i>solifenacin succinate tab 5 mg</i> .....	157	<i>stavudine cap 20 mg</i> .....	79
SOLQUA INJ 100/33.....	48	<i>stavudine cap 30 mg</i> .....	79
SOLUS V2 TES AUDIBLE.....	114	<i>stavudine cap 40 mg</i> .....	79
SOMAVERT INJ 10MG.....	118	STEGLATRO TAB 15MG.....	51
SOMAVERT INJ 15MG.....	118	STEGLATRO TAB 5MG.....	51
SOMAVERT INJ 20MG.....	118	STEGLUJAN TAB 15-100MG.....	48
SOMAVERT INJ 25MG.....	118	STEGLUJAN TAB 5-100MG.....	48
SOMAVERT INJ 30MG.....	118	STELARA INJ 45MG/0.5.....	100
<i>sorafenib tosylate tab 200 mg (base equivalent)</i> .....	69	STELARA INJ 90MG/ML.....	100
SORILUX AER 0.005%.....	100	STIMATE SOL 1.5MG/ML.....	121
<i>sotalol hcl (afib/afi) tab 120 mg</i> .....	83	STIVARGA TAB 40MG.....	69
<i>sotalol hcl (afib/afi) tab 160 mg</i> .....	83	STRENSIQ INJ 18/0.45.....	121
<i>sotalol hcl (afib/afi) tab 80 mg</i> .....	83	STRENSIQ INJ 28/0.7ML.....	121
<i>sotalol hcl tab 120 mg</i> .....	83	STRENSIQ INJ 40MG/ML.....	121
<i>sotalol hcl tab 160 mg</i> .....	83	STRENSIQ INJ 80/0.8ML.....	121
<i>sotalol hcl tab 240 mg</i> .....	83	STRIVERDI AER 2.5MCG.....	38
<i>sotalol hcl tab 80 mg</i> .....	83	SUCRAID SOL 8500/ML.....	114
		<i>sucralfate tab 1 gm</i> .....	156
		<i>sulconazole nitrate cream 1%</i> .....	97
		<i>sulconazole nitrate solution 1%</i> .....	97
		<i>sulfacetamide sodium cleansing gel 10%</i> .....	101
		<i>sulfacetamide sodium liquid 10%</i> .....	101

<i>sulfacetamide sodium lotion 10% (acne)</i> .96	<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i> ..... 29
<i>sulfacetamide sodium ophth oint 10%</i> ... 145	<i>sulfasalazine tab 500 mg</i> ..... 125
<i>sulfacetamide sodium ophth soln 10%</i> .. 145	<i>sulfasalazine tab delayed release 500 mg</i> ..... 125
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i> ..... 146	<i>sulindac tab 150 mg</i> ..... 19
<i>sulfacetamide sodium shampoo 10%</i> ..... 102	<i>sulindac tab 200 mg</i> ..... 19
<i>sulfacetamide sodium shampoo 9.8%</i> ..... 101	<i>sumatriptan nasal spray 20 mg/act</i> ..... 137
<i>sulfacetamide sodium-sulfur in urea emulsion 10-4%</i> .....96	<i>sumatriptan nasal spray 5 mg/act</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i> .....96	<i>sumatriptan succinate inj 6 mg/0.5ml</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleanser 10-5%</i> .....96	<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i> .....96	<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleanser 9-4.5%</i> .....96	<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleanser 9-4%</i> .....96	<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i> .....96	<i>sumatriptan succinate tab 100 mg</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i> .....96	<i>sumatriptan succinate tab 25 mg</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i> .....96	<i>sumatriptan succinate tab 50 mg</i> ..... 137
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i> .....96	<i>sunitinib malate cap 12.5 mg (base equivalent)</i> ..... 69
<i>sulfacetamide sodium w/ sulfur emulsion 10-1%</i> .....96	<i>sunitinib malate cap 25 mg (base equivalent)</i> ..... 69
<i>sulfacetamide sodium w/ sulfur foam 10-5%</i> .....96	<i>sunitinib malate cap 37.5 mg (base equivalent)</i> ..... 69
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i> .....96	<i>sunitinib malate cap 50 mg (base equivalent)</i> ..... 69
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i> .....96	SUNLENCA TAB 300MG ..... 79
<i>sulfacetamide sodium w/ sulfur susp 10-5%</i> ..... 96	SUPREME TES ..... 114
<i>sulfacetamide sodium w/ sulfur susp 8-4%</i> ..... 96	SUTENT CAP 12.5MG ..... 69
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> ..... 29	SUTENT CAP 25MG ..... 69
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i> ..... 29	SUTENT CAP 37.5MG ..... 69
	SUTENT CAP 50MG ..... 69
	SYMDEKO TAB 100-150 ..... 153
	SYMDEKO TAB 50-75MG ..... 153
	SYMLINPEN 60 INJ 1000MCG ..... 47
	SYMLNPEN 120 INJ 1000MCG ..... 47
	SYMPROIC TAB 0.2MG..... 126
	SYMTUZA TAB..... 79
	SYNAREL SOL 2MG/ML..... 119
	SYNJARDY TAB..... 48
	SYNJARDY TAB 12.5-500..... 48

SYNJARDY TAB 5-1000MG .....	48	<i>tamoxifen citrate tab 20 mg (base</i>	
SYNJARDY TAB 5-500MG .....	48	<i>equivalent)</i> .....	65
SYNJARDY XR TAB .....	48	<i>tamsulosin hcl cap 0.4 mg</i> .....	127
SYNJARDY XR TAB 10-1000.....	48	TARCEVA TAB 100MG.....	64
SYNJARDY XR TAB 25-1000.....	48	TARCEVA TAB 150MG.....	64
SYNJARDY XR TAB 5-1000MG .....	48	TARGRETIN CAP 75MG.....	70
SYPRINE CAP 250MG.....	138	TARGRETIN GEL 1%.....	98
<b>T</b>		TASIGNA CAP 150MG .....	70
TABLOID TAB 40MG .....	64	TASIGNA CAP 200MG .....	70
TABRECTA TAB 150MG .....	69	TASIGNA CAP 50MG .....	70
TABRECTA TAB 200MG .....	69	<i>tasimelteon capsule 20 mg</i> .....	132
TACLONEX OIN.....	103	TAVALISSE TAB 100MG.....	128
TACLONEX SUS.....	103	TAVALISSE TAB 150MG.....	128
<i>tacrolimus cap 0.5 mg</i> .....	140	<i>tazarotene cream 0.1%</i> .....	101
<i>tacrolimus cap 1 mg</i> .....	140	<i>tazarotene gel 0.05%</i> .....	101
<i>tacrolimus cap 5 mg</i> .....	140	<i>tazarotene gel 0.1%</i> .....	101
<i>tacrolimus oint 0.03%</i> .....	105	TDVAX INJ 2-2 LF.....	155
<i>tacrolimus oint 0.1%</i> .....	105	TECFIDERA CAP 120MG.....	152
<i>tadalafil tab 10 mg</i> .....	87	TECFIDERA CAP 240MG.....	152
<i>tadalafil tab 2.5 mg</i> .....	87	TECFIDERA CAP STARTER .....	152
<i>tadalafil tab 20 mg</i> .....	87	<i>telmisartan-amlodipine tab 40-10 mg</i> .....	61
<i>tadalafil tab 20 mg (pah)</i> .....	88	<i>telmisartan-amlodipine tab 40-5 mg</i> .....	61
<i>tadalafil tab 5 mg</i> .....	87	<i>telmisartan-amlodipine tab 80-10 mg</i> .....	61
TADLIQ SUS 20MG/5ML .....	88	<i>telmisartan-amlodipine tab 80-5 mg</i> .....	61
TAFINLAR CAP 50MG .....	69	<i>telmisartan-hydrochlorothiazide tab 40-</i>	
TAFINLAR CAP 75MG .....	69	<i>12.5 mg</i> .....	61
TAFINLAR TAB 10MG.....	69	<i>telmisartan-hydrochlorothiazide tab 80-12.5</i>	
<i>tafluprost preservative free (pf) ophth soln</i>		<i>mg</i> .....	61
<i>0.0015%</i> .....	146	<i>telmisartan-hydrochlorothiazide tab 80-25</i>	
TAGRISSE TAB 40MG .....	64	<i>mg</i> .....	61
TAGRISSE TAB 80MG .....	64	<i>telmisartan tab 20 mg</i> .....	58
TAKHZYRO INJ 150MG/ML.....	128	<i>telmisartan tab 40 mg</i> .....	58
TAKHZYRO INJ 300/2ML.....	129	<i>telmisartan tab 80 mg</i> .....	58
TALTZ INJ 20/0.25.....	100	<i>temazepam cap 15 mg</i> .....	132
TALTZ INJ 40/0.5ML.....	100	<i>temazepam cap 22.5 mg</i> .....	132
TALTZ INJ 80MG/ML.....	101	<i>temazepam cap 30 mg</i> .....	132
TALZENNA CAP 0.1MG.....	69	<i>temazepam cap 7.5 mg</i> .....	132
TALZENNA CAP 0.25MG.....	69	TEMODAR CAP 250MG .....	63
TALZENNA CAP 0.35MG.....	69	<i>temozolomide cap 100 mg</i> .....	63
TALZENNA CAP 0.5MG.....	69	<i>temozolomide cap 140 mg</i> .....	63
TALZENNA CAP 0.75MG.....	69	<i>temozolomide cap 180 mg</i> .....	63
TALZENNA CAP 1MG.....	70	<i>temozolomide cap 20 mg</i> .....	63
<i>tamoxifen citrate tab 10 mg (base</i>		<i>temozolomide cap 250 mg</i> .....	63
<i>equivalent)</i> .....	65	<i>temozolomide cap 5 mg</i> .....	63

TENIVAC INJ 5-2LF .....	155	<i>tetracaine hcl ophth soln 0.5%</i> .....	145
<i>tenofovir disoproxil fumarate tab 300 mg</i>	79	<i>tetracycline hcl cap 250 mg</i> .....	154
<i>terazosin hcl cap 10 mg (base equivalent)</i>	59	<i>tetracycline hcl cap 500 mg</i> .....	154
<i>terazosin hcl cap 1 mg (base equivalent)</i>	59	TEZSPIRE INJ 210MG.....	34
<i>terazosin hcl cap 2 mg (base equivalent)</i>	59	THALOMID CAP 100MG .....	139
<i>terazosin hcl cap 5 mg (base equivalent)</i>	59	THALOMID CAP 50MG .....	139
<i>terbinafine hcl tab 250 mg</i> .....	53	<i>theophylline elixir 80 mg/15ml</i> .....	38
<i>terbutaline sulfate tab 2.5 mg</i> .....	38	<i>theophylline soln 80 mg/15ml</i> .....	38
<i>terbutaline sulfate tab 5 mg</i> .....	38	<i>theophylline tab er 12hr 300 mg</i> .....	38
<i>terconazole vaginal cream 0.4%</i> .....	158	<i>theophylline tab er 12hr 450 mg</i> .....	38
<i>terconazole vaginal cream 0.8%</i> .....	158	<i>theophylline tab er 24hr 400 mg</i> .....	38
<i>terconazole vaginal suppos 80 mg</i> .....	158	<i>theophylline tab er 24hr 600 mg</i> .....	38
<i>teriflunomide tab 14 mg</i> .....	152	<i>thioridazine hcl tab 100 mg</i> .....	76
<i>teriflunomide tab 7 mg</i> .....	152	<i>thioridazine hcl tab 10 mg</i> .....	76
TERIPARATIDE INJ 620/2.48.....	117	<i>thioridazine hcl tab 25 mg</i> .....	76
<i>teriparatide soln pen-inj 600 mcg/2.4ml</i>	117	<i>thioridazine hcl tab 50 mg</i> .....	76
TESTIM GEL 1%(50MG) .....	28	<i>thiothixene cap 10 mg</i> .....	77
TESTOST CYP INJ 200MG/ML.....	28	<i>thiothixene cap 1 mg</i> .....	77
<i>testosterone cypionate im inj in oil 100</i>		<i>thiothixene cap 2 mg</i> .....	77
<i>mg/ml</i> .....	28	<i>thiothixene cap 5 mg</i> .....	77
<i>testosterone cypionate im inj in oil 200</i>		THRIVITE RX TAB 29-1MG .....	142
<i>mg/ml</i> .....	28	<i>tiagabine hcl tab 12 mg</i> .....	42
<i>testosterone enanthate im inj in oil 200</i>		<i>tiagabine hcl tab 16 mg</i> .....	42
<i>mg/ml</i> .....	28	<i>tiagabine hcl tab 2 mg</i> .....	42
TESTOSTERONE INJ CYPIONAT.....	28	<i>tiagabine hcl tab 4 mg</i> .....	42
TESTOSTERONE MIS 100MG .....	28	TIKOSYN CAP 125MCG.....	34
TESTOSTERONE MIS 200MG .....	28	TIKOSYN CAP 250MCG.....	34
TESTOSTERONE MIS 25MG .....	28	TIKOSYN CAP 500MCG.....	34
TESTOSTERONE MIS 37.5MG .....	28	<i>timolol maleate ophth gel forming soln</i>	
TESTOSTERONE MIS 50MG .....	28	<i>0.25%</i> .....	144
TESTOSTERONE MIS 87.5MG .....	28	<i>timolol maleate ophth gel forming soln</i>	
<i>testosterone td gel 10mg/act (2%)</i> .....	28	<i>0.5%</i> .....	144
<i>testosterone td gel 12.5 mg/act (1%)</i> .....	28	<i>timolol maleate ophth soln 0.25%</i> .....	144
<i>testosterone td gel 20.25 mg/1.25gm</i>		<i>timolol maleate ophth soln 0.5%</i> .....	144
<i>(1.62%)</i> .....	28	<i>timolol maleate ophth soln 0.5% (once-</i>	
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	28	<i>daily)</i> .....	144
<i>testosterone td gel 25 mg/2.5gm (1%)</i> ....	28	<i>timolol maleate preservative free ophth soln</i>	
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>		<i>0.25%</i> .....	144
.....	28	<i>timolol maleate preservative free ophth soln</i>	
<i>testosterone td gel 50 mg/5gm (1%)</i> .....	28	<i>0.5%</i> .....	144
<i>testosterone td soln 30 mg/act</i> .....	28	<i>timolol maleate tab 10 mg</i> .....	83
TET/DIP TOX INJ 2-2 LF .....	155	<i>timolol maleate tab 20 mg</i> .....	83
<i>tetrabenazine tab 12.5 mg</i> .....	150	<i>timolol maleate tab 5 mg</i> .....	83
<i>tetrabenazine tab 25 mg</i> .....	150	<i>tinidazole tab 250 mg</i> .....	29

<i>tinidazole tab 500 mg</i> .....	29	<i>topiramate tab 100 mg</i> .....	42
<i>tiopronin tab 100 mg</i> .....	127	<i>topiramate tab 200 mg</i> .....	42
<i>tiopronin tab delayed release 100 mg</i> ....	127	<i>topiramate tab 25 mg</i> .....	42
<i>tiopronin tab delayed release 300 mg</i> ....	127	<i>topiramate tab 50 mg</i> .....	42
<i>tiotropium bromide monohydrate inhal cap</i> <i>18 mcg (base equiv)</i> .....	35	<i>toremifene citrate tab 60 mg (base</i> <i>equivalent)</i> .....	65
TIVICAY PD TAB 5MG.....	79	<i>toremide tab 100 mg</i> .....	115
TIVICAY TAB 10MG.....	79	<i>toremide tab 10 mg</i> .....	115
TIVICAY TAB 25MG.....	79	<i>toremide tab 20 mg</i> .....	115
TIVICAY TAB 50MG.....	79	<i>toremide tab 5 mg</i> .....	115
<i>tizanidine hcl cap 2 mg (base equivalent)</i> .....	142	TPOXX CAP 200MG.....	82
<i>tizanidine hcl cap 4 mg (base equivalent)</i> .....	142	TRACLEER TAB 125MG.....	88
<i>tizanidine hcl cap 6 mg (base equivalent)</i> .....	142	TRACLEER TAB 32MG.....	88
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	142	TRACLEER TAB 62.5MG.....	88
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	142	<i>tramadol-acetaminophen tab 37.5-325 mg</i> .....	26
TLANDO CAP 112.5 MG.....	28	<i>tramadol hcl oral soln 5 mg/ml</i> .....	25
TOBI NEB 300/5ML.....	7	<i>tramadol hcl tab 50 mg</i> .....	25
TOBI PODHALR CAP 28MG.....	7	<i>tramadol hcl tab er 24hr 100 mg</i> .....	25
<i>tobramycin-dexamethasone ophth susp</i> <i>0.3-0.1%</i> .....	146	<i>tramadol hcl tab er 24hr 200 mg</i> .....	25
<i>tobramycin nebu soln 300 mg/4ml</i> .....	7	<i>tramadol hcl tab er 24hr 300 mg</i> .....	25
<i>tobramycin nebu soln 300 mg/5ml</i> .....	7	<i>tramadol hcl tab er 24hr biphasic release</i> <i>100 mg</i> .....	25
<i>tobramycin ophth soln 0.3%</i> .....	145	<i>tramadol hcl tab er 24hr biphasic release</i> <i>200 mg</i> .....	25
TOBREX OIN 0.3% OP.....	145	<i>tramadol hcl tab er 24hr biphasic release</i> <i>300 mg</i> .....	25
TODAY SPONGE MIS.....	158	<i>trandolapril tab 1 mg</i> .....	58
<i>tolcapone tab 100 mg</i> .....	71	<i>trandolapril tab 2 mg</i> .....	58
TOLECTIN 600 TAB 600MG.....	19	<i>trandolapril tab 4 mg</i> .....	58
<i>tolmetin sodium cap 400 mg</i> .....	19	<i>trandolapril-verapamil hcl tab er 1-240 mg</i> .....	61
<i>tolmetin sodium tab 600 mg</i> .....	19	<i>trandolapril-verapamil hcl tab er 2-180 mg</i> .....	61
<i>tolterodine tartrate cap er 24hr 2 mg</i> .....	157	<i>trandolapril-verapamil hcl tab er 2-240 mg</i> .....	61
<i>tolterodine tartrate cap er 24hr 4 mg</i> .....	157	<i>trandolapril-verapamil hcl tab er 4-240 mg</i> .....	62
<i>tolterodine tartrate tab 1 mg</i> .....	157	<i>tranexamic acid tab 650 mg</i> .....	131
<i>tolterodine tartrate tab 2 mg</i> .....	157	<i>tranylcypromine sulfate tab 10 mg</i> .....	43
<i>tolvaptan tab 15 mg</i> .....	122	<i>travoprost ophth soln 0.004%</i> <i>(benzalkonium free) (bak free)</i> .....	146
<i>tolvaptan tab 30 mg</i> .....	122	<i>trazodone hcl tab 100 mg</i> .....	45
<i>topiramate cap er 24hr 100 mg</i> .....	42	<i>trazodone hcl tab 150 mg</i> .....	45
<i>topiramate cap er 24hr 200 mg</i> .....	42		
<i>topiramate cap er 24hr 25 mg</i> .....	42		
<i>topiramate cap er 24hr 50 mg</i> .....	42		
<i>topiramate sprinkle cap 15 mg</i> .....	42		
<i>topiramate sprinkle cap 25 mg</i> .....	42		

<i>trazodone hcl tab 300 mg</i> .....	45	<i>trifluoperazine hcl tab 2 mg (base equivalent)</i> .....	76
<i>trazodone hcl tab 50 mg</i> .....	45	<i>trifluoperazine hcl tab 5 mg (base equivalent)</i> .....	76
TRECTOR TAB 250MG .....	63	<i>trifluridine ophth soln 1%</i> .....	145
TRELEGY AER 100MCG.....	38	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i> ....	71
TRELEGY AER 200MCG.....	38	<i>trihexyphenidyl hcl tab 2 mg</i> .....	71
TREMFYA INJ 100MG/ML .....	101	<i>trihexyphenidyl hcl tab 5 mg</i> .....	71
TRESIBA FLEX INJ 100UNIT.....	50	TRIJARDY XR TAB.....	48
TRESIBA FLEX INJ 200UNIT.....	50	TRIKAFTA PAK 59.5MG.....	153
TRESIBA INJ 100UNIT.....	50	TRIKAFTA PAK 75MG.....	153
<i>tretinoin cap 10 mg</i> .....	70	TRIKAFTA TAB.....	153
<i>tretinoin cream 0.025%</i> .....	96	<i>trimethobenzamide hcl cap 300 mg</i> .....	52
<i>tretinoin cream 0.05%</i> .....	96	<i>trimethoprim tab 100 mg</i> .....	29
<i>tretinoin cream 0.1%</i> .....	96	<i>trimipramine maleate cap 100 mg</i> .....	47
<i>tretinoin gel 0.01%</i> .....	96	<i>trimipramine maleate cap 25 mg</i> .....	46
<i>tretinoin gel 0.025%</i> .....	96	<i>trimipramine maleate cap 50 mg</i> .....	47
<i>tretinoin gel 0.05%</i> .....	96	TRIUMEQ PD TAB.....	79
<i>tretinoin gel 0.08%</i> .....	96	TRIUMEQ TAB.....	79
<i>tretinoin gel 0.1%</i> .....	96	TROP/CYCL/PE SOL KETOROLA.....	144
<i>triamcinolone acetonide cream 0.025%</i> 103		TROP-PHENYL SOL 1-2.5%.....	144
<i>triamcinolone acetonide cream 0.1%</i> ..... 103		<i>trospium chloride cap er 24hr 60 mg</i> .....	157
<i>triamcinolone acetonide cream 0.5%</i> ..... 103		<i>trospium chloride tab 20 mg</i> .....	157
<i>triamcinolone acetonide dental paste 0.1%</i> .....	141	TRUDHESA AER 0.725MG.....	136
<i>triamcinolone acetonide lotion 0.025%</i> 104		TRUE FOCUS MIS BLOOD.....	114
<i>triamcinolone acetonide lotion 0.1%</i> ..... 104		TRUE METRIX TES GLUCOSE.....	114
<i>triamcinolone acetonide oint 0.025%</i> ..... 104		TRUETEST TES .....	114
<i>triamcinolone acetonide oint 0.1%</i> ..... 104		TRUETRACK TES.....	114
<i>triamcinolone acetonide oint 0.5%</i> ..... 104		TRUETRACK TES BLD GLUC .....	114
<i>triamterene &amp; hydrochlorothiazide cap</i> <i>37.5-25 mg</i> .....	115	TRUETRACK TES STRIPS.....	114
<i>triamterene &amp; hydrochlorothiazide tab 37.5- 25 mg</i> .....	115	TRULICITY INJ 0.75/0.5 .....	49
<i>triamterene &amp; hydrochlorothiazide tab 75- 50 mg</i> .....	115	TRULICITY INJ 1.5/0.5 .....	50
<i>triamterene cap 100 mg</i> .....	116	TRULICITY INJ 3/0.5 .....	50
<i>triamterene cap 50 mg</i> .....	116	TRULICITY INJ 4.5/0.5 .....	50
<i>triazolam tab 0.125 mg</i> .....	132	TRU METRIX TES STRIPS .....	114
<i>triazolam tab 0.25 mg</i> .....	132	TUKYSA TAB 150MG .....	64
<i>trientine hcl cap 250 mg</i> .....	138	TUKYSA TAB 50MG .....	64
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i> .....	76	TWIIST KIT REFILL .....	135
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i> .....	76	TWIIST KIT STARTER .....	136
		TWIIST REFIL KIT INFUSION .....	136
		TWYNEO CRE 0.1-3%.....	96
		TYENNE INJ 162/0.9 .....	17
		TYENNE INJ 162MG .....	17
		TYKERB TAB 250MG.....	70

TYMLOS INJ .....	117
TYVASO DPI POW 16-32-48 .....	87
TYVASO DPI POW 16-32MCG .....	87
TYVASO DPI POW 16MCG.....	87
TYVASO DPI POW 32-48MCG .....	87
TYVASO DPI POW 32MCG.....	87
TYVASO DPI POW 48MCG.....	87
TYVASO DPI POW 64MCG.....	87
TYVASO RF KT SOL 0.6MG/ML.....	88
TYVASO SOL 0.6MG/ML.....	88
TYVASO ST KT SOL 0.6MG/ML.....	88

**U**

UBRELVY TAB 100MG .....	136
UBRELVY TAB 50MG .....	136
UDENYCA INJ 6MG/6ML.....	131
UDENYCA INJ 6MG/0.6.....	131
UDENYCA ONBO INJ 6/0.6ML .....	131
UNISTRIP1 TES GENERIC.....	114
UPTRAVI PACK TAB 200/800 .....	88
UPTRAVI TAB 1000MCG .....	88
UPTRAVI TAB 1200MCG .....	88
UPTRAVI TAB 1400MCG .....	89
UPTRAVI TAB 1600MCG .....	89
UPTRAVI TAB 200MCG .....	88
UPTRAVI TAB 400MCG .....	88
UPTRAVI TAB 600MCG .....	88
UPTRAVI TAB 800MCG .....	88
urea cream 39%.....	104
urea cream 41%.....	104
urea cream 45%.....	104
urea cream 47%.....	104
ursodiol cap 300 mg .....	124
ursodiol tab 250 mg .....	124
ursodiol tab 500 mg .....	124

**V**

VABYSMO INJ 6/0.05ML .....	144
VAGIFEM TAB 10MCG .....	158
valacyclovir hcl tab 1 gm .....	81
valacyclovir hcl tab 500 mg .....	81
valganciclovir hcl for soln 50 mg/ml (base equiv).....	80
valganciclovir hcl tab 450 mg (base equivalent).....	80

valproate sodium oral soln 250 mg/5ml (base equiv).....	43
valproic acid cap 250 mg .....	43
valsartan-hydrochlorothiazide tab 160-12.5 mg .....	62
valsartan-hydrochlorothiazide tab 160-25 mg .....	62
valsartan-hydrochlorothiazide tab 320-12.5 mg .....	62
valsartan-hydrochlorothiazide tab 320-25 mg .....	62
valsartan-hydrochlorothiazide tab 80-12.5 mg .....	62
valsartan oral soln 4 mg/ml .....	58
valsartan tab 160 mg.....	58
valsartan tab 320 mg.....	58
valsartan tab 40 mg.....	58
valsartan tab 80 mg.....	58
VALTREX TAB 1GM .....	81
VALTREX TAB 500MG.....	81
vancomycin hcl cap 125 mg (base equivalent) .....	30
vancomycin hcl cap 250 mg (base equivalent) .....	30
vancomycin hcl for oral soln 25 mg/ml (base equivalent).....	30
vancomycin hcl for oral soln 50 mg/ml (base equivalent).....	30
vardenafil hcl orally disintegrating tab 10 mg .....	87
vardenafil hcl tab 10 mg.....	87
vardenafil hcl tab 2.5 mg .....	87
vardenafil hcl tab 20 mg.....	87
vardenafil hcl tab 5 mg .....	87
varenicline tartrate tab 0.5 mg (base equiv) .....	153
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....	153
varenicline tartrate tab 1 mg (base equiv) .....	153
VASCEPA CAP 0.5GM .....	55
VASCEPA CAP 1GM .....	55
VAXELIS INJ.....	155
VCF VAGINAL GEL CONTRACE .....	158

VCF VAGINAL MIS CONTRACP.....	158	<i>verapamil hcl tab 40 mg</i> .....	85
VECTICAL OIN 3MCG/GM.....	101	<i>verapamil hcl tab 80 mg</i> .....	85
VELSIPITY TAB 2MG .....	125	<i>verapamil hcl tab er 120 mg</i> .....	85
VELTIN GEL.....	96	<i>verapamil hcl tab er 180 mg</i> .....	85
VEMLIDY TAB 25MG .....	81	<i>verapamil hcl tab er 240 mg</i> .....	85
VENCLEXTA TAB 100MG .....	64	VERASENS TES .....	114
VENCLEXTA TAB 10MG .....	64	VERQUVO TAB 10MG .....	89
VENCLEXTA TAB 50MG .....	64	VERQUVO TAB 2.5MG .....	89
VENCLEXTA TAB START PK.....	64	VERQUVO TAB 5MG .....	89
<i>venlafaxine hcl cap er 24hr 150 mg (base</i>		VERZENIO TAB 100MG .....	70
<i>equivalent)</i> .....	45	VERZENIO TAB 150MG .....	70
<i>venlafaxine hcl cap er 24hr 37.5 mg (base</i>		VERZENIO TAB 200MG .....	70
<i>equivalent)</i> .....	45	VERZENIO TAB 50MG .....	70
<i>venlafaxine hcl cap er 24hr 75 mg (base</i>		VFEND IV INJ 200MG .....	53
<i>equivalent)</i> .....	45	VIBERZI TAB 100MG .....	126
<i>venlafaxine hcl tab 100 mg (base</i>		VIBERZI TAB 75MG .....	126
<i>equivalent)</i> .....	45	VICTOZA INJ 18MG/3ML .....	50
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>		VIEKIRA PAK TAB .....	81
<i>.</i> .....	45	<i>vigabatrin powd pack 500 mg</i> .....	42
<i>venlafaxine hcl tab 37.5 mg (base</i>		<i>vigabatrin tab 500 mg</i> .....	42
<i>equivalent)</i> .....	45	VIJOICE GRA 50MG .....	140
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>		VIJOICE TAB 125MG .....	140
<i>.</i> .....	45	VIJOICE TAB 250MG .....	141
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>		VIJOICE TAB 50MG .....	140
<i>.</i> .....	45	<i>vilazodone hcl tab 10 mg</i> .....	45
<i>venlafaxine hcl tab er 24hr 150 mg (base</i>		<i>vilazodone hcl tab 20 mg</i> .....	45
<i>equivalent)</i> .....	45	<i>vilazodone hcl tab 40 mg</i> .....	45
<i>venlafaxine hcl tab er 24hr 225 mg (base</i>		VIMOVO TAB 375-20MG .....	19
<i>equivalent)</i> .....	45	VIMOVO TAB 500-20MG .....	19
<i>venlafaxine hcl tab er 24hr 37.5 mg (base</i>		VIOKACE TAB 10440.....	114
<i>equivalent)</i> .....	45	VIOKACE TAB 20880.....	114
<i>venlafaxine hcl tab er 24hr 75 mg (base</i>		VIREAD POW 40MG/GM .....	79
<i>equivalent)</i> .....	45	VIREAD TAB 150MG.....	79
VENTAVIS SOL 10MCG/ML .....	88	VIREAD TAB 200MG.....	79
VENTAVIS SOL 20MCG/ML .....	88	VIREAD TAB 250MG.....	79
VEOZAH TAB 45MG .....	119	VISTARIL CAP 25MG .....	32
<i>verapamil hcl cap er 24hr 100 mg</i> .....	85	VISTARIL CAP 50MG .....	32
<i>verapamil hcl cap er 24hr 120 mg</i> .....	85	VISTOGARD PAK 10GM.....	52
<i>verapamil hcl cap er 24hr 180 mg</i> .....	85	VITRAKVI CAP 100MG.....	70
<i>verapamil hcl cap er 24hr 200 mg</i> .....	85	VITRAKVI CAP 25MG.....	70
<i>verapamil hcl cap er 24hr 240 mg</i> .....	85	VITRAKVI SOL 20MG/ML .....	70
<i>verapamil hcl cap er 24hr 300 mg</i> .....	85	VIVAGUARD TES INO.....	114
<i>verapamil hcl cap er 24hr 360 mg</i> .....	85	VIZIMPRO TAB 15MG .....	64
<i>verapamil hcl tab 120 mg</i> .....	85	VIZIMPRO TAB 30MG .....	65



VIZIMPRO TAB 45MG.....	65	<i>warfarin sodium tab 2 mg</i> .....	38
VOGELXO GEL 1%(50MG).....	28	<i>warfarin sodium tab 3 mg</i> .....	38
VOGELXO GEL PUMP 1%.....	28	<i>warfarin sodium tab 4 mg</i> .....	38
VORANIGO TAB 10MG.....	70	<i>warfarin sodium tab 5 mg</i> .....	38
VORANIGO TAB 40MG.....	70	<i>warfarin sodium tab 6 mg</i> .....	38
<i>voriconazole for inj 200 mg</i> .....	54	<i>warfarin sodium tab 7.5 mg</i> .....	38
<i>voriconazole for susp 40 mg/ml</i> .....	54	WEGOVY INJ 0.25MG.....	4
VORICONAZOLE INJ 200MG.....	54	WEGOVY INJ 0.5MG.....	3
<i>voriconazole tab 200 mg</i> .....	54	WEGOVY INJ 1.7MG.....	4
<i>voriconazole tab 50 mg</i> .....	54	WEGOVY INJ 1MG.....	4
VOSEVI TAB.....	81	WEGOVY INJ 2.4MG.....	4
VOTRIENT TAB 200MG.....	70	WESCAP-PN CAP DHA.....	142
VOXZOGO INJ 0.4MG.....	121	WIDE-SEAL DPR KIT 60.....	134
VOXZOGO INJ 0.56MG.....	121	WIDE-SEAL DPR KIT 65.....	134
VOXZOGO INJ 1.2MG.....	121	WIDE-SEAL DPR KIT 70.....	134
VRAYLAR CAP 1.5-3MG.....	73	WIDE-SEAL DPR KIT 75.....	134
VRAYLAR CAP 1.5MG.....	73	WIDE-SEAL DPR KIT 80.....	134
VRAYLAR CAP 3MG.....	73	WIDE-SEAL DPR KIT 85.....	134
VRAYLAR CAP 4.5MG.....	73	WIDE-SEAL DPR KIT 90.....	134
VRAYLAR CAP 6MG.....	73	WIDE-SEAL DPR KIT 95.....	134
VTAMA CRE 1%.....	101	WINLEVI CRE 1%.....	96
VUITY SOL 1.25% OP.....	144	WYNZORA CRE.....	104
VUMERITY CAP 231MG.....	152	<b>X</b>	
VYNDAMAX CAP 61MG.....	89	XALKORI CAP 150MG.....	70
VYNDAQEL CAP 20MG.....	89	XALKORI CAP 200MG.....	70
VYVANSE CAP 10MG.....	2	XALKORI CAP 20MG.....	70
VYVANSE CAP 20MG.....	2	XALKORI CAP 250MG.....	70
VYVANSE CAP 30MG.....	2	XALKORI CAP 50MG.....	70
VYVANSE CAP 40MG.....	2	XARELTO STAR TAB 15/20MG.....	39
VYVANSE CAP 50MG.....	2	XARELTO SUS 1MG/ML.....	39
VYVANSE CAP 60MG.....	2	XARELTO TAB 10MG.....	39
VYVANSE CAP 70MG.....	2	XARELTO TAB 15MG.....	39
VYVANSE CHW 10MG.....	2	XARELTO TAB 2.5MG.....	39
VYVANSE CHW 20MG.....	2	XARELTO TAB 20MG.....	39
VYVANSE CHW 30MG.....	2	XELJANZ SOL 1MG/ML.....	14
VYVANSE CHW 40MG.....	2	XELJANZ TAB 10MG.....	15
VYVANSE CHW 50MG.....	2	XELJANZ TAB 5MG.....	14
VYVANSE CHW 60MG.....	2	XELJANZ XR TAB 11MG.....	15
<b>W</b>		XELJANZ XR TAB 22MG.....	15
WAKIX TAB 17.8MG.....	5	XELODA TAB 150MG.....	64
WAKIX TAB 4.45MG.....	5	XELODA TAB 500MG.....	64
<i>warfarin sodium tab 10 mg</i> .....	38	XENAZINE TAB 12.5MG.....	150
<i>warfarin sodium tab 1 mg</i> .....	38	XENAZINE TAB 25MG.....	150
<i>warfarin sodium tab 2.5 mg</i> .....	38	XENICAL CAP 120MG.....	4

XEPI CRE 1%.....	97	ZENPEP CAP 25000UNT .....	115
XHANCE MIS 93MCG.....	143	ZENPEP CAP 3000UNIT .....	115
XIFAXAN TAB 550MG .....	29	ZENPEP CAP 40000UNT .....	115
XIIDRA DRO 5%.....	145	ZENPEP CAP 5000UNIT .....	115
XOLAIR INJ 150MG/ML.....	34	ZENPEP CAP 60000UNT .....	115
XOLAIR INJ 300/2ML.....	34	ZEPATIER TAB 50-100MG.....	81
XOLAIR INJ 75/0.5.....	34	ZEPBOUND INJ 10/0.5ML .....	4
XOSPATA TAB 40MG .....	70	ZEPBOUND INJ 12.5MG .....	4
XTAMPZA ER CAP 13.5MG .....	25	ZEPBOUND INJ 15/0.5ML .....	4
XTAMPZA ER CAP 18MG .....	25	ZEPBOUND INJ 2.5MG .....	4
XTAMPZA ER CAP 27MG .....	25	ZEPBOUND INJ 5/0.5ML.....	4
XTAMPZA ER CAP 36MG .....	25	ZEPBOUND INJ 7.5MG .....	4
XTAMPZA ER CAP 9MG .....	25	ZEPOSIA 7DAY CAP STR PACK .....	152
XTANDI CAP 40MG .....	65	ZEPOSIA CAP 0.92MG .....	152
XTANDI TAB 40MG .....	65	ZEPOSIA CAP STR KIT.....	152
XTANDI TAB 80MG .....	65	ZIANA GEL.....	96
XYOSTED INJ 100/0.5.....	28	<i>zidovudine cap 100 mg</i> .....	79
XYOSTED INJ 50/0.5 .....	28	<i>zidovudine syrup 10 mg/ml</i> .....	80
XYOSTED INJ 75/0.5 .....	28	<i>zidovudine tab 300 mg</i> .....	80
<b>Y</b>		ZIEXTENZO INJ 6/0.6ML .....	131
YONSA TAB 125MG .....	65	<i>ziprasidone hcl cap 20 mg</i> .....	73
YUFLYMA 1PEN KIT 40/0.4ML .....	13	<i>ziprasidone hcl cap 40 mg</i> .....	73
YUFLYMA 1PEN KIT 80/0.8ML .....	13	<i>ziprasidone hcl cap 60 mg</i> .....	73
YUFLYMA 2PEN KIT 40/0.4ML .....	13	<i>ziprasidone hcl cap 80 mg</i> .....	73
YUFLYMA 2SYR KIT 20/0.2ML.....	13	<i>ziprasidone mesylate for inj 20 mg (base</i> <i>equivalent)</i> .....	74
YUFLYMA 2SYR KIT 40/0.4ML.....	13	ZITUVIMET TAB 50-1000 .....	48
YUFLYMA KIT 80/0.8ML .....	13	ZITUVIMET TAB 50-500MG .....	48
YUPELRI SOL .....	35	ZITUVIMET XR TAB 100-1000.....	48
YUSIMRY INJ 40/0.8ML.....	13	ZITUVIMET XR TAB 50-1000.....	48
<b>Z</b>		ZITUVIMET XR TAB 50-500MG.....	48
<i>zafirlukast tab 10 mg</i> .....	35	ZITUVIO TAB 100MG .....	49
<i>zafirlukast tab 20 mg</i> .....	35	ZITUVIO TAB 25MG .....	49
<i>zaleplon cap 10 mg</i> .....	132	ZITUVIO TAB 50MG .....	49
<i>zaleplon cap 5 mg</i> .....	132	ZOLINZA CAP 100MG.....	70
ZARXIO INJ 300/0.5.....	131	<i>zolmitriptan nasal spray 2.5 mg/spray unit</i> .....	137
ZARXIO INJ 480/0.8.....	131	<i>zolmitriptan nasal spray 5 mg/spray unit</i>	138
ZAVESCA CAP 100MG .....	129	<i>zolmitriptan orally disintegrating tab 2.5 mg</i> .....	138
ZEJULA TAB 100MG .....	70	<i>zolmitriptan orally disintegrating tab 5 mg</i> .....	138
ZEJULA TAB 200MG .....	70	<i>zolmitriptan tab 2.5 mg</i> .....	138
ZEJULA TAB 300MG .....	70	<i>zolmitriptan tab 5 mg</i> .....	138
ZELBORAF TAB 240MG .....	70		
ZENPEP CAP 10000UNT.....	115		
ZENPEP CAP 15000UNT.....	115		
ZENPEP CAP 20000UNT.....	115		

<i>zolpidem tartrate tab 10 mg</i> .....	132	ZORTRESS TAB 1MG .....	140
<i>zolpidem tartrate tab 5 mg</i> .....	132	ZORVOLEX CAP 18MG .....	19
<i>zolpidem tartrate tab er 12.5 mg</i> .....	132	ZORVOLEX CAP 35MG .....	19
<i>zolpidem tartrate tab er 6.25 mg</i> .....	132	ZOVIRAX SUS 200/5ML .....	81
ZOMACTON INJ 10MG .....	119	ZURZUVAE CAP 20MG .....	43
ZOMACTON INJ 5MG .....	119	ZURZUVAE CAP 25MG .....	43
<i>zonisamide cap 100 mg</i> .....	42	ZURZUVAE CAP 30MG .....	43
<i>zonisamide cap 25 mg</i> .....	42	ZYDELIG TAB 100MG .....	70
<i>zonisamide cap 50 mg</i> .....	42	ZYDELIG TAB 150MG .....	70
ZORBTIVE INJ 8.8MG .....	119	ZYKADIA TAB 150MG .....	70
ZORTRESS TAB 0.25MG .....	140	ZYMFENTRA INJ 120MG/ML .....	125
ZORTRESS TAB 0.5MG .....	140	ZYTIGA TAB 250MG .....	65
ZORTRESS TAB 0.75MG .....	140	ZYTIGA TAB 500MG .....	65

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)**.



10455 Mill Run Circle  
Owings Mills, MD 21117

**[carefirst.com/fedhmo](https://www.carefirst.com/fedhmo)**

CareFirst BlueChoice, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

SUM7291-1S (1/25)

# 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](mailto: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>**.

## 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 ሽፋን መረጃ ይዟል። ከተወሰኑ ቀን-ገደቦች በፊት ሊፈጽሟቸው የሚገቡ ነገሮች ሊኖሩ ስለሚችሉ እነዚህን ወሳኝ ቀናት ሊይዝ ይችላሉ። ይኸን መረጃ የማግኘት እና ያለምንም ክፍያ በቋንቋዎ እገዛ የማግኘት መብት አለዎት። አባል ከሆኑ ከመታወቂያ ካርድዎ በስተጀርባ ላይ ወደተጠቀሰው የስልክ ቁጥር መደወል ይችላሉ። አባል ካልሆኑ ደግሞ ወደ ስልክ ቁጥር 855-258-6518 ደውለው ዐን እንዲጫኑ እስኪነገርዎ ድረስ ንግግሩን መጠበቅ አለብዎ። አንድ ወኪል መልስ ሲሰጥዎ፣ የሚፈልጉትን ቋንቋ ያሳውቁ፣ ከዚያም ከተርጓሚ ጋር ይገናኛሉ።*

*Èdè Yorùbá (Yoruba) Ìtètíléko: Àkíyèsí yíì ní iwífún nípa isẹ adójútòfò rẹ. Ó le ní àwọn déèti pàtó o sì le ní láti gbé ìgbésé ní àwọn ojò gbèdèké kan. O ni ètò láti gba iwífún yíì àti irànlówó ní èdè rẹ lófèfè. Àwọn omọ-egbé gbòdò pe nómàbà fòdùn tò wà léyìn káàdì idánimò wọn. Àwọn mírán le pe 855-258-6518 kí o sì dúró nípasè ijíròrò tí tí a ó fi sọ fún ọ láti tẹ 0. Nígbatí aṣojú kan bá dáhùn, sọ èdè tí o fẹ a ó sì sọ ọ pò mò 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 pinakamahalagang 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। आपको कलकत्ता के मुख्य तथियों का उल्लेख है और आपके लिए ककसी तनयत समय-सीमा के भीतर काम करना ज़रूरी है। आपको यह जानकारी और संबंधित सियायता अपनी भाषा में तनि:शुल्क पाने का अधिकार है। सदस्यों को अपने पिचान पत्र के पीछे हदए गए फोन नंबर पर कॉल करना चाहिए। अन्य सभी लोग 855-258-6518 पर कॉल कर सकते हैं और जब तक 0 दबाने के लिए न क्ति

जाए, तब तक संवाद की प्रतीक्षा करें। जब कोई एजेंट उत्तर दे तो उसे अपनी भाषा बताएँ और आपको व्याख्याकार से कनेक्ट कर हदया जाएगा।

*Bàsóò-wùdù (Bassa) Tò Òùù Cáo! Bǎ nìà kè bá nyò bě ké m̀ gbo kpá bó nì fù à-fúá-tiǐn nyɛɛ jè dyí. Bǎ nìà kè bédé wé jéé bē bē m̀ ké dɛ wa mó m̀ ké nyuɛɛ nyu hwè bē wé bēa ké zi. ɔ̀ mò nì kpé bē m̀ ké bǎ nìà kè kè gbo-kpá-kpá m̀ ḿɛɛ dyé dé nì bídí-wùdù mú bē m̀ ké se wídí d̀ò péè. Kpooò nyò bē m̀é d́á fúùn-nòbà nìà dé waà I.D. káàè d́éin nyɛ. Nyò t̀òò séin m̀é d́á nòbà nìà kè: 855-258-6518, ké m̀ m̀é f̀ò tee bē wa ḱé m̀ gbo cɛ bē m̀ kè nòbà mòà 0 ḱé dyi pàd̀àin hwè. ɔ̀ jǔ ké nyò d̀ò dyi m̀ gǎ jǔǐn, pò wuɖu m̀ mó pòɛ dyiɛ, ké nyò d̀ò mu bó nìin bē ɔ̀ ké nì wuɖuò mú zà.*

*বাংলা (Bengali) লক্ষ্য করুন: এই নানাটিশে আপনার ববমা কভারজ সম্পর্কে তথ্য রশেশে। এর মশযয গুরুত্বপূর্ণে তাবরখ থাকাশত পাশর এবাং বনবদেষ্টে তাবরশখর মশযয আপনাশক পদশক্ষপ বনশত হশত পাশর। ববনা খরশে বনশজর ভাষাে এই তথ্য পাগোর এবাং সহােতা পাগোর অবযকার আপনার আশে। সদসযশদরশক তাশদর পবরেেপশের বপেশন থাকা নশশর কল করশত হশব। অশনযরা 855-258-6518 নশশর কল কশর 0 টিপশত না বলা পরেেস্ত অশপক্ষা করশত পাশরন। র্খন নকাশনা এশজন্ট উত্তর নদশবন তখন আপনার বনশজর ভাষার নাম বলুন এবাং আপনাশক নদাভাষীর সশে সাংরুক্ত করা হশব।*

(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۔

(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 شناساییشان 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 نحتاج 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證背面電話號碼。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)* Nrubama: Okwa a nwere ozi gbasara mkpuchi nchekwa onwe gi. O nwere ike inwe ubochi ndi di mkpa, i nwere ike ime ihe tupu ufodu ubochi njedebe. I nwere ikike inweta ozi na enyemaka a n'asusu gi na akwughi ugwo o bula. Ndi otu kwesiri ikpo akara ekwenti di n'azu nke kaadi njirimara ha. Ndi ozo niile nwere ike ikpo 855-258-6518 wee chere ububo ahụ ruo mgbe amanyere ipi 0. Mgbe onye nnochite anya zara, kwuo asusu 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 í hane'ígíí bii' dahóló bee éédahózin béeso ách'ááh naanil ník'ist'i'ígíí bá. Bii' dahólóq doo íyisíí yoolkaálígíí dóo t'áadoo le'é ádadoolyííligíí da yókeedgo t'áa doo bee e'e'aahí ájiil'ííh. Bee ná ahóót'í' díí bee í hane' dóo níká'ádoowoł t'áa nínizaad bee t'áa jiik'é. Atah danilínígíí béesh bee hane'é bee wólta'ígíí nit'izgo bee nee hódolzinígíí bikéédéé' bikáá' bich'í' hodoonihjí'. Aadóo náánałta' éi kójjí' dahóoolnih 855-258-6518 dóo yii diiłts'ííł yałtí'ígíí t'áa níléjį́ áádóo éi bikéé'dóo naasbaqas bił adidiilchil. Áká'anidaalwó'ígíí neidiitáągo, saad bee yániłt'i'ígíí yii diikił dóo ata' halne'é lá níká'ádoowoł.