

HMSA Essential Prescription Formulary

(Effective 01/01/2020)

INTRODUCTION

HMSA's Essential Prescription Formulary for commercial plan members is a new product to help keep health care affordable, while maintaining a patient's health and safety, and providing quality care.

HMSA Essential Prescription Formulary is a managed formulary. Drugs listed on this formulary are considered covered benefits.

Consistent with the principles of this formulary, new drugs will be reviewed by HMSA's Pharmacy & Therapeutics Committee (HMSA P&T Committee) to assess safety and effectiveness before any drug is added to the formulary. The HMSA P&T Committee is comprised of practicing physicians and pharmacists from our community.

In addition to new drugs, the HMSA P&T Committee reviews the formulary on a continuous basis with the help of HMSA staff. The formulary approval process is designed to ensure that clinical evidence and medical value are considered before cost. If drugs within a treatment class are clinically comparable, the committee will assess cost-effectiveness and choose agents with the best value.

PREFACE

The document is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action. Tier level and coverage criteria (if applicable) are notated next to each drug.

- Tier 1 - mostly Generic Drugs
- Tier 2 - mostly Preferred Drugs
- Tier 3 - mostly Other Brand Name Drugs
- Tier 4 - mostly Preferred Specialty Drugs
- Tier 5* - mostly Other Brand Name Specialty Drugs

*If applicable to your plan coverage

Zero (\$0) Copay - When obtained from a Participating Provider, HMSA pays 100% of Eligible Charge. You owe no copayment.

Please refer to your Plan's Prescription Drug Benefits Rider for the specific copayment or coinsurance amount associated with each tier.

ABBREVIATIONS USED IN THIS FORMULARY

- ACA - USPSTF recommended drugs covered at \$0.
- AGE - Age Limit: age requirements for coverage of drug
- DS - Diabetic Supply: Refer to plan benefits
- OC - Oral Chemotherapy: Refer to plan benefits
- PA - Prior Authorization: Requires that you or your physician receive approval from HMSA before we will cover your prescription
- QL - Quantity Limit: A limit on the amount of the drug that HMSA will cover
- SP - Specialty Drug with Network Requirements: Must go to a Specialty Network Provider, limited to a 30 days supply
- ST - Step Therapy: Requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition
- \$0 - Zero (\$0) Copay: When obtained from a Participating Provider, HMSA pays 100% of Eligible Charge. You owe no copayment.

EXCEPTION REQUEST

Drugs listed on this formulary are considered covered benefits. Certain medications on the list are covered if utilization management criteria are met (i.e. Step Therapy, Prior Authorization, Quantity Limits, etc.); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity. If a medication is not listed on the document, a formulary exception may be requested for coverage. Medical necessity or formulary exception requests will be reviewed based on drug-specific prior authorization criteria or standard non-formulary prescription request criteria.

To request a PA or an exception, please call or fax CVS Caremark®, HMSA's Pharmacy Benefit Manager

Call **Commercial 1** (855) 240-0543 toll-free

FAX **Commercial 1** (855) 762-5207 toll-free

This drug list is subject to change and drugs may be added or removed without notice. Please contact HMSA to confirm your drug plan coverage. This list is effective January 1, 2020.

LEGEND

ACA	USPSTF recommended drugs covered at \$0.
AGE	Age Limit
DS	Diabetic Supply: Refer to plan benefits
lowercase	Indicates generic drug
OC	Oral Chemotherapy: Refer to plan benefits
PA	Prior Authorization
QL	Quantity Limit
SP	Specialty Drug with network requirement
ST	Step Therapy
UPPERCASE	Indicates brand name drug
\$0	Zero (\$0) Copay

NOTE

The status of a drug on this list is current as of the date of this publication.

The list serves as a guide to product selection for our providers and members. The list is subject to change. Participating pharmacies have the most up-to-date formulary information at the time prescriptions are filled. New drugs, strengths, forms, and/or therapeutic categories introduced in the marketplace will be reflected in the formulary, as applicable, following the completion of HMSA's review process.

Not all generic drugs may be listed.

Coverage of a drug will depend on your drug plan.

HMSA's mission is to provide the people of Hawaii access to a sustainable, quality health care system that improves the overall health and well-being of our state.



An Independent Licensee of the Blue Cross and Blue Shield Association

HMSA CENTERS

Convenient evening and Saturday hours:

HMSA Center @ Honolulu

818 Keeaumoku St.

Monday through Friday, 8 a.m. - 6 p.m. | Saturday, 9 a.m. - 2 p.m.

HMSA Center @ Pearl City

Pearl City Gateway | 1132 Kuala St., Suite 400

Monday through Friday, 9 a.m. - 7 p.m. | Saturday, 9 a.m. - 2 p.m.

HMSA Center @ Hilo

Waiakea Center | 303A E. Makaala St.

Monday through Friday, 9 a.m. - 7 p.m. | Saturday, 9 a.m. - 2 p.m.

OFFICES

Visit your local HMSA office Monday through Friday, 8 a.m. - 4 p.m.:

Kailua-Kona, Hawaii Island | 75-1029 Henry St., Suite 301 | Phone: 329-5291

Kahului, Maui | 33 Lono Ave., Suite 350 | Phone: 871-6295

Lihue, Kauai | 4366 Kukui Grove St., Suite 103 | Phone: 245-3393

PHONE

948-6372 on Oahu

If you are calling from the U.S. Mainland, please call 1 (800) 776-4672. If you need to call a local Hawaii telephone number from the Mainland, the area code is 808.

Check hmsa.com/contact for our holiday schedule.

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This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers.

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
COX-II INHIBITORS		
<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	
GOUT		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine cap 0.6 mg</i>	1	QL (60 per 30 days); ST (Try allopurinol, probenecid or colchicine w/ probenecid)
<i>colchicine tab 0.6 mg</i>	1	QL (30 per 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
<i>febuxostat tab 40 mg</i>	1	QL (30 per 30 days); ST (Try allopurinol)
<i>febuxostat tab 80 mg</i>	1	QL (30 per 30 days); ST (Try allopurinol)
<i>probenecid tab 500 mg</i>	1	
ULORIC TAB 40MG	3	QL (30 per 30 days); ST (Try allopurinol)
ULORIC TAB 80MG	3	QL (30 per 30 days); ST (Try allopurinol)
NON-OPIOID ANALGESICS		
<i>butalbital-acetaminophen tab 50-300 mg</i>	1	QL (360 tabs per 30 days)
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL (360 tabs per 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	QL (390 caps per 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL (360 caps per 30 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL (360 tabs per 30 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL (360 caps per 30 days)
<i>esgic cap</i>	1	QL (360 caps per 30 days)
<i>tencon tab 50-325mg</i>	1	QL (360 tabs per 30 days)
NSAIDS		
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>diflunisal tab 500 mg</i>	1	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
<i>fenoprofen calcium cap 400 mg</i>	1	
<i>fenoprofen calcium tab 600 mg</i>	1	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
INDOCIN SUP 50MG	3	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>ketoprofen cap er 24hr 200 mg</i>	1	
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	1	
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>naproxen dr tab 375mg</i>	1	
<i>naproxen dr tab 500mg</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	1	
<i>naproxen susp 125 mg/5ml</i>	1	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>piroxicam cap 20 mg</i>	1	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 200 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
NSAIDS, COMBINATIONS		
<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	
NSAIDS, TOPICAL		
<i>diclofenac epolamine patch 1.3%</i>	1	
<i>diclofenac sodium gel 1%</i>	1	
<i>diclofenac sodium soln 1.5%</i>	1	
KETOROLAC GEL 2%	3	
OPIOID ANALGESICS		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	QL (5000 mL per 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	QL (400 tabs per 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	QL (400 tabs per 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	QL (400 tabs per 30 days)
<i>ascomp/cod cap 30mg</i>	1	QL (360 caps per 30 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	
<i>buprenorphine td patch weekly 15 mcg/hr</i>	1	
<i>buprenorphine td patch weekly 20 mcg/hr</i>	1	
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	QL (369 caps per 30 days)
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	QL (360 caps per 30 days)
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	QL (360 caps per 30 days)
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	QL (2 bottles per 30 days)
<i>codeine sulfate tab 30 mg</i>	1	QL (360 tabs per 30 days)
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	QL (120 per 30 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	QL (120 per 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	QL (120 per 30 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	QL (120 per 30 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	QL (120 per 30 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	QL (120 per 30 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	QL (15 per 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	QL (15 per 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	QL (15 per 30 days)
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	QL (15 per 30 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	QL (15 per 30 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	QL (5538 mL per 30 days)
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	QL (360 tabs per 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	QL (369 tabs per 30 days)
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	QL (180 tabs per 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	QL (369 tabs per 30 days)
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	QL (180 tabs per 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	QL (369 tabs per 30 days)
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	1	QL (180 tabs per 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	QL (180 tabs per 30 days)
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	QL (180 tabs per 30 days)
HYDROMORPHON SUP 3MG	3	QL (120 supps per 30 days)
<i>hydromorphone hcl tab 2 mg</i>	1	QL (360 tabs per 30 days)
<i>hydromorphone hcl tab 4 mg</i>	1	QL (180 tabs per 30 days)
<i>hydromorphone hcl tab 8 mg</i>	1	QL (180 tabs per 30 days)
<i>hydromorphone hcl tab er 24hr deter 8 mg</i>	1	QL (30 tabs per 30 days)
<i>hydromorphone hcl tab er 24hr deter 12 mg</i>	1	QL (30 tabs per 30 days)
<i>hydromorphone hcl tab er 24hr deter 16 mg</i>	1	QL (30 tabs per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab er 24hr deter 32 mg</i>	1	QL (30 tabs per 30 days)
LORTAB ELX 10-300MG	3	QL (6000 mL per 30 days)
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	
<i>meperidine hcl tab 50 mg</i>	1	QL (24 tabs per 30 days)
<i>meperidine hcl tab 100 mg</i>	1	QL (12 tabs per 30 days)
<i>methadone con 10mg/ml</i>	1	
<i>methadone hcl conc 10 mg/ml</i>	1	
<i>methadone hcl soln 5 mg/5ml</i>	1	
<i>methadone hcl soln 10 mg/5ml</i>	1	
<i>methadone hcl tab 5 mg</i>	1	
<i>methadone hcl tab 10 mg</i>	1	
METHADOSE CON 10MG/ML	3	
METHADOSE SF CON 10MG/ML	3	
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate beads cap er 24hr 90 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	1	QL (30 caps per 30 days)
<i>morphine sulfate cap er 24hr 10 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 20 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 30 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 40 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 50 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 60 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 80 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate cap er 24hr 100 mg</i>	1	QL (60 caps per 30 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	QL (1800 mL per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	QL (900 mL per 30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	QL (180 mL per 30 days)
<i>morphine sulfate tab 15 mg</i>	1	QL (180 tabs per 30 days)
<i>morphine sulfate tab 30 mg</i>	1	QL (180 tabs per 30 days)
<i>morphine sulfate tab er 15 mg</i>	1	QL (90 tabs per 30 days)
<i>morphine sulfate tab er 30 mg</i>	1	QL (90 tabs per 30 days)
<i>morphine sulfate tab er 60 mg</i>	1	QL (90 tabs per 30 days)
<i>morphine sulfate tab er 100 mg</i>	1	QL (90 tabs per 30 days)
<i>morphine sulfate tab er 200 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl cap 5 mg</i>	1	QL (360 caps per 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	QL (135 mL per 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	1	QL (2700 mL per 30 days)
<i>oxycodone hcl tab 5 mg</i>	1	QL (360 tabs per 30 days)
<i>oxycodone hcl tab 10 mg</i>	1	QL (180 tabs per 30 days)
<i>oxycodone hcl tab 15 mg</i>	1	QL (180 tabs per 30 days)
<i>oxycodone hcl tab 20 mg</i>	1	QL (180 tabs per 30 days)
<i>oxycodone hcl tab 30 mg</i>	1	QL (180 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	1	QL (90 tabs per 30 days)
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	1	QL (90 tabs per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	QL (369 tabs per 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	QL (369 tabs per 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	QL (369 tabs per 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	QL (369 tabs per 30 days)
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	1	QL (369 tabs per 30 days)
OXYCONTIN TAB 10MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 15MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 20MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 30MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 40MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 60MG CR	3	QL (90 tabs per 30 days)
OXYCONTIN TAB 80MG CR	3	QL (90 tabs per 30 days)
<i>oxymorphone hcl tab 5 mg</i>	1	QL (360 tabs per 30 days)
<i>oxymorphone hcl tab 10 mg</i>	1	QL (360 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 5 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 10 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 15 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 20 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 30 mg</i>	1	QL (60 tabs per 30 days)
<i>oxymorphone hcl tab er 12hr 40 mg</i>	1	QL (60 tabs per 30 days)
<i>pentazocine w/ naloxone tab 50-0.5 mg</i>	1	QL (360 tabs per 30 days)
<i>tramadol hcl tab 50 mg</i>	1	QL (240 tabs per 30 days)
<i>tramadol hcl tab er 24hr 100 mg</i>	1	QL (90 tabs per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl tab er 24hr 200 mg</i>	1	QL (60 tabs per 30 days)
<i>tramadol hcl tab er 24hr 300 mg</i>	1	QL (30 tabs per 30 days)
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	QL (90 tabs per 30 days)
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	QL (60 tabs per 30 days)
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	QL (30 tabs per 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL (40 tabs per 30 days)

ANTI-INFECTIVES

AMINOGLYCOSIDES

<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	1	

ANTIBACTERIALS, CEPHALOSPORINS, First Generation

<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	1	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	1	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin tab 500 mg</i>	1	

ANTIBACTERIALS, CEPHALOSPORINS, Second Generation

<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	1	
<i>cefaclor for susp 125 mg/5ml</i>	1	
<i>cefaclor for susp 250 mg/5ml</i>	1	
<i>cefaclor for susp 375 mg/5ml</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	

ANTIBACTERIALS, CEPHALOSPORINS, Third Generation

<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cefditoren pivoxil tab 400 mg (base equivalent)</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 tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
SUPRAX CAP 400MG	3	
SUPRAX CHW 100MG	3	
SUPRAX CHW 200MG	3	
SUPRAX SUS 100/5ML	3	
SUPRAX SUS 200/5ML	3	
SUPRAX SUS 500/5ML	3	

ANTIBACTERIALS, ERYTHROMYCINS/MACROLIDES

<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	
<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	
DIFICID TAB 200MG	3	PA
<i>e.e.s. 400 tab 400mg</i>	1	
<i>ery-tab tab 250mg ec</i>	1	
<i>ery-tab tab 333mg ec</i>	1	
<i>ery-tab tab 500mg ec</i>	1	
<i>erythrocin tab 250mg</i>	1	
<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 tab 250 mg</i>	1	
<i>erythromycin tab 500 mg</i>	1	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	1	

ANTIBACTERIALS, FLUOROQUINOLONES

CIPRO (5%) SUS 250MG/5	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<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	
ANTIBACTERIALS, PENICILLINS		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>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	
AUGMENTIN SUS 125/5ML	3	
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
ANTIBACTERIALS, SULFONAMIDES		
SULFADIAZINE TAB 500MG	3	
<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	
ANTIBACTERIALS, TETRACYCLINES		
ACTICLATE TAB 75MG	3	
ACTICLATE TAB 150MG	3	
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 75 mg</i>	1	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab 150 mg</i>	1	
<i>doxycycline hyclate tab delayed release 75 mg</i>	1	
<i>doxycycline hyclate tab delayed release 100 mg</i>	1	
<i>doxycycline hyclate tab delayed release 150 mg</i>	1	
<i>doxycycline hyclate tab delayed release 200 mg</i>	1	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 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 45 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 55 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 65 mg</i>	1	AGE: Min age 12 years

Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl tab er 24hr 80 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 90 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 105 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 115 mg</i>	1	AGE: Min age 12 years
<i>minocycline hcl tab er 24hr 135 mg</i>	1	AGE: Min age 12 years
<i>morgidox cap 1x100mg</i>	1	
<i>morgidox cap 2x100mg</i>	1	
SOLODYN TAB 55MG	3	AGE: Min age 12 years; ST (Try 2 generics, including minocycline)
SOLODYN TAB 65MG	3	AGE: Min age 12 years; ST (Try 2 generics, including minocycline)
SOLODYN TAB 80MG	3	AGE: Min age 12 years; ST (Try 2 generics, including minocycline)
SOLODYN TAB 105MG	3	AGE: Min age 12 years; ST (Try 2 generics, including minocycline)
SOLODYN TAB 115MG	3	AGE: Min age 12 years; ST (Try 2 generics, including minocycline)
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	1	
VIBRAMYCIN SYP 50MG/5ML	3	

ANTIFUNGALS

<i>clotrimazole troche 10 mg</i>	1	
<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>flucytosine cap 250 mg</i>	1	
<i>flucytosine cap 500 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>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	3	
NOXAFIL TAB 100MG	3	
<i>nystatin susp 100000 unit/ml</i>	1	
<i>nystatin tab 500000 unit</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>posaconazole tab delayed release 100 mg</i>	1	
SPORANOX SOL 10MG/ML	3	
<i>terbinafine hcl tab 250 mg</i>	1	
<i>voriconazole for susp 40 mg/ml</i>	1	
<i>voriconazole tab 50 mg</i>	1	
<i>voriconazole tab 200 mg</i>	1	
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<i>chloroquine phosphate tab 250 mg</i>	1	
<i>chloroquine phosphate tab 500 mg</i>	1	
COARTEM TAB 20-120MG	3	
<i>mefloquine hcl tab 250 mg</i>	1	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	
PRIMAQUINE TAB 26.3MG	3	
<i>quinine sulfate cap 324 mg</i>	1	
ANTIRETROVIRALS, ANTIRETROVIRAL COMBINATIONS		
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1	
ATRIPLA TAB	2	
BIKTARVY TAB	2	
COMPLERA TAB	3	
DELSTRIGO TAB	3	
DESCOVY TAB 200/25	2	coverage for pre-exposure prophylaxis under ACA
GENVOYA TAB	2	
JULUCA TAB 50-25MG	3	
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	
ODEFSEY TAB	2	
STRIBILD TAB	3	
SYMTUZA TAB	3	
TRIUMEQ TAB	3	
TRUVADA TAB 100-150	2	
TRUVADA TAB 133-200	2	
TRUVADA TAB 167-250	2	
TRUVADA TAB 200-300	2	coverage for pre-exposure prophylaxis under ACA
ANTIRETROVIRALS, CHEMOKINE RECEPTOR ANTAGONISTS		
SELZENTRY SOL 20MG/ML	3	
SELZENTRY TAB 25MG	2	
SELZENTRY TAB 75MG	2	

Drug Name	Drug Tier	Requirements/Limits
SELZENTRY TAB 150MG	2	
SELZENTRY TAB 300MG	2	
ANTIRETROVIRALS, INTEGRASE INHIBITORS		
ISENTRESS HD TAB 600MG	2	
ISENTRESS TAB 400MG	2	
TIVICAY TAB 10MG	2	
TIVICAY TAB 25MG	2	
TIVICAY TAB 50MG	2	
ANTIRETROVIRALS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS		
<i>efavirenz cap 50 mg</i>	1	
<i>efavirenz cap 200 mg</i>	1	
<i>efavirenz tab 600 mg</i>	1	
INTELENCE TAB 25MG	2	
INTELENCE TAB 100MG	2	
INTELENCE TAB 200MG	2	
<i>nevirapine tab 200 mg</i>	1	
<i>nevirapine tab er 24hr 100 mg</i>	1	
<i>nevirapine tab er 24hr 400 mg</i>	1	
PIFELTRO TAB 100MG	3	
RESCRIPTOR TAB 200MG	2	
SUSTIVA CAP 50MG	2	
SUSTIVA CAP 200MG	2	
SUSTIVA TAB 600MG	2	
ANTIRETROVIRALS, NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	
<i>didanosine delayed release capsule 200 mg</i>	1	
<i>didanosine delayed release capsule 250 mg</i>	1	
<i>didanosine delayed release capsule 400 mg</i>	1	
EMTRIVA CAP 200MG	2	
EPIVIR SOL 10MG/ML	3	
<i>lamivudine oral soln 10 mg/ml</i>	1	
<i>lamivudine tab 150 mg</i>	1	
<i>lamivudine tab 300 mg</i>	1	
<i>stavudine cap 15 mg</i>	1	
<i>stavudine cap 20 mg</i>	1	
<i>stavudine cap 30 mg</i>	1	
<i>stavudine cap 40 mg</i>	1	
VIDEX EC CAP 125MG	3	
ZIAGEN SOL 20MG/ML	3	
<i>zidovudine cap 100 mg</i>	1	
<i>zidovudine syrup 10 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>zidovudine tab 300 mg</i>	1	
ANTIRETROVIRALS, NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS		
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	
VIREAD TAB 150MG	2	
VIREAD TAB 200MG	2	
VIREAD TAB 250MG	2	
ANTIRETROVIRALS, PROTEASE INHIBITORS		
APTIVUS CAP 250MG	2	
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	
INVIRASE TAB 500MG	2	
KALETRA SOL	2	
KALETRA TAB 100-25MG	2	
KALETRA TAB 200-50MG	2	
LEXIVA TAB 700MG	2	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	
NORVIR TAB 100MG	2	
PREZISTA TAB 75MG	2	
PREZISTA TAB 150MG	2	
PREZISTA TAB 600MG	2	
PREZISTA TAB 800MG	2	
<i>ritonavir tab 100 mg</i>	1	
VIRACEPT TAB 250MG	2	
VIRACEPT TAB 625MG	2	
ANTITUBERCULAR AGENTS		
<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	3	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
ANTIVIRALS, CYTOMEGALOVIRUS AGENTS		
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANTIVIRALS, HEPATITIS AGENTS, Hepatitis B		
<i>adefovir dipivoxil tab 10 mg</i>	1	
<i>entecavir tab 0.5 mg</i>	1	
<i>entecavir tab 1 mg</i>	1	
EPIVIR HBV SOL 5MG/ML	3	
<i>lamivudine tab 100 mg (hbv)</i>	1	
VEMLIDY TAB 25MG	2	
ANTIVIRALS, HEPATITIS AGENTS, Hepatitis C		
EPCLUSA TAB 400-100	4	SP, PA; for genotypes 1, 2, 3, 4, 5, 6
HARVONI TAB 90-400MG	4	SP, PA; for genotypes 1, 4, 5, 6
MAVYRET TAB 100-40MG	4	SP, PA; for genotypes 1, 2, 3, 4, 5, 6
RIBAPAK PAK 800/DAY	3	PA
RIBAPAK PAK 1200/DAY	3	PA
RIBAPAK TAB 600/DAY	3	PA
RIBAPAK TAB 1000/DAY	3	PA
<i>ribasphere cap 200mg</i>	1	PA
<i>ribasphere tab 200mg</i>	1	PA
RIBASPHERE TAB 400MG	3	PA
<i>ribasphere tab 600mg</i>	1	PA
<i>ribavirin tab 200 mg</i>	1	PA
VOSEVI TAB	4	SP, PA; 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).
ANTIVIRALS, 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	3	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
ANTIVIRALS, INFLUENZA AGENTS		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	QL (56 per 180 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	QL (28 per 180 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	QL (28 per 180 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	QL (360 mL per 180 days)
RELENZA MIS DISKHALE	2	QL (80 per 180 days)
<i>rimantadine hydrochloride tab 100 mg</i>	1	
XOFLUZA TAB 20MG	3	QL (4 tabs per 180 days)
XOFLUZA TAB 40MG	3	QL (4 tabs per 180 days)

MISCELLANEOUS

<i>albendazole tab 200 mg</i>	1	
ALBENZA TAB 200MG	3	
ALINIA SUS 100/5ML	3	
ALINIA TAB 500MG	3	
<i>atovaquone susp 750 mg/5ml</i>	1	
<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	
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
DARAPRIM TAB 25MG	3	
<i>ivermectin tab 3 mg</i>	1	
<i>linezolid for susp 100 mg/5ml</i>	1	
<i>linezolid tab 600 mg</i>	1	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
MONUROL PAK GRANULES	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	
<i>praziquantel tab 600 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
<i>tinidazole tab 250 mg</i>	1	
<i>tinidazole tab 500 mg</i>	1	
<i>trimethoprim tab 100 mg</i>	1	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	
XIFAXAN TAB 200MG	3	
XIFAXAN TAB 550MG	3	

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

ALKERAN TAB 2MG	OC	oral chemotherapy - refer to plan benefits
CYCLOPHOSPH CAP 25MG	OC	oral chemotherapy - refer to plan benefits
CYCLOPHOSPH CAP 50MG	OC	oral chemotherapy - refer to plan benefits
<i>cyclophosphamide cap 25 mg</i>	OC	oral chemotherapy - refer to plan benefits
<i>cyclophosphamide cap 50 mg</i>	OC	oral chemotherapy - refer to plan benefits
EMCYT CAP 140MG	OC	oral chemotherapy - refer to plan benefits
GLEOSTINE CAP 10MG	OC	oral chemotherapy - refer to plan benefits
GLEOSTINE CAP 40MG	OC	oral chemotherapy - refer to plan benefits
GLEOSTINE CAP 100MG	OC	oral chemotherapy - refer to plan benefits
LEUKERAN TAB 2MG	OC	oral chemotherapy - refer to plan benefits
<i>melphalan tab 2 mg</i>	OC	oral chemotherapy - refer to plan benefits
MYLERAN TAB 2MG	OC	oral chemotherapy - refer to plan benefits
TEMODAR CAP 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TEMODAR CAP 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TEMODAR CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TEMODAR CAP 140MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TEMODAR CAP 180MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TEMODAR CAP 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
<i>temozolomide cap 5 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>temozolomide cap 20 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>temozolomide cap 100 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>temozolomide cap 140 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>temozolomide cap 180 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>temozolomide cap 250 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
VALCHLOR GEL 0.016%	4	SP, PA

ANTIMETABOLITES

<i>capecitabine tab 150 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>capecitabine tab 500 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>mercaptopurine tab 50 mg</i>	OC	oral chemotherapy - refer to plan benefits
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	OC	oral chemotherapy - refer to plan benefits
PURIXAN SUS 20MG/ML	OC	oral chemotherapy - refer to plan benefits
TABLOID TAB 40MG	OC	oral chemotherapy - refer to plan benefits
TREXALL TAB 5MG	OC	oral chemotherapy - refer to plan benefits
TREXALL TAB 7.5MG	OC	oral chemotherapy - refer to plan benefits
TREXALL TAB 10MG	OC	oral chemotherapy - refer to plan benefits
TREXALL TAB 15MG	OC	oral chemotherapy - refer to plan benefits
XATMEP SOL 2.5MG/ML	OC	SP, PA; oral chemotherapy - refer to plan benefits
XELODA TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
XELODA TAB 500MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
HORMONAL ANTINEOPLASTICS, ANTIANDROGENS		
<i>abiraterone acetate tab 250 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>bicalutamide tab 50 mg</i>	OC	oral chemotherapy - refer to plan benefits
CASODEX TAB 50MG	OC	oral chemotherapy - refer to plan benefits
ERLEADA TAB 60MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>flutamide cap 125 mg</i>	OC	oral chemotherapy - refer to plan benefits
NILANDRON TAB 150MG	OC	oral chemotherapy - refer to plan benefits
<i>nilutamide tab 150 mg</i>	OC	oral chemotherapy - refer to plan benefits
NUBEQA TAB 300MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
XTANDI CAP 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
YONSA TAB 125MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYTIGA TAB 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYTIGA TAB 500MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
HORMONAL ANTINEOPLASTICS, ANTIESTROGENS		
FARESTON TAB 60MG	OC	oral chemotherapy - refer to plan benefits
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	OC	oral chemotherapy - refer to plan benefits
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	OC	oral chemotherapy - refer to plan benefits
<i>toremifene citrate tab 60 mg (base equivalent)</i>	OC	oral chemotherapy - refer to plan benefits
HORMONAL ANTINEOPLASTICS, AROMATASE INHIBITORS		
<i>anastrozole tab 1 mg</i>	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
ARIMIDEX TAB 1MG	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits
AROMASIN TAB 25MG	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits
<i>exemestane tab 25 mg</i>	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits
FEMARA TAB 2.5MG	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits
<i>letrozole tab 2.5 mg</i>	OC	PA; (PA for males only); oral chemotherapy - refer to plan benefits

HORMONAL ANTINEOPLASTICS, PROGESTINS

<i>megestrol acetate susp 40 mg/ml</i>	OC	oral chemotherapy - refer to plan benefits
<i>megestrol acetate tab 20 mg</i>	OC	oral chemotherapy - refer to plan benefits
<i>megestrol acetate tab 40 mg</i>	OC	oral chemotherapy - refer to plan benefits

IMMUNOMODULATORS

POMALYST CAP 1MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
POMALYST CAP 2MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
POMALYST CAP 3MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
POMALYST CAP 4MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
REVLIMID CAP 2.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
REVLIMID CAP 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
REVLIMID CAP 10MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
REVLIMID CAP 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
REVLIMID CAP 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
REVLIMID CAP 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
THALOMID CAP 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
THALOMID CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
THALOMID CAP 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
THALOMID CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR DIS TAB 3MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR DIS TAB 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR TAB 2.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR TAB 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR TAB 7.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
AFINITOR TAB 10MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ALECENSA CAP 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ALUNBRIG PAK	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
ALUNBRIG TAB 30MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ALUNBRIG TAB 90MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ALUNBRIG TAB 180MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BALVERSA TAB 3MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BALVERSA TAB 4MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BALVERSA TAB 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BOSULIF TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BOSULIF TAB 400MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BOSULIF TAB 500MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
BRAFTOVI CAP 75MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CABOMETYX TAB 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CABOMETYX TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CABOMETYX TAB 60MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CALQUENCE CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CAPRELSA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
CAPRELSA TAB 300MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
COMETRIQ KIT 60MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
COMETRIQ KIT 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
COMETRIQ KIT 140MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
COPIKTRA CAP 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
COPIKTRA CAP 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
COTELLIC TAB 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
GILOTRIF TAB 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
GILOTRIF TAB 30MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
GILOTRIF TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
GLEEVEC TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
GLEEVEC TAB 400MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IBRANCE CAP 75MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IBRANCE CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
IBRANCE CAP 125MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ICLUSIG TAB 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ICLUSIG TAB 45MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA CAP 70MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA CAP 140MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA TAB 140MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA TAB 280MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA TAB 420MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IMBRUVICA TAB 560MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
INLYTA TAB 1MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
INLYTA TAB 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
INREBIC CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IRESSA TAB 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
JAKAFI TAB 5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
JAKAFI TAB 10MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
JAKAFI TAB 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
JAKAFI TAB 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
JAKAFI TAB 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI 200 PAK FEMARA	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI 400 PAK FEMARA	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI 600 PAK FEMARA	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI TAB 200DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI TAB 400DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
KISQALI TAB 600DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 4MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 8 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 10 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 12MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 14 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 18 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
LENVIMA CAP 20 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LENVIMA CAP 24 MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LORBRENA TAB 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LORBRENA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
MEKINIST TAB 0.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
MEKINIST TAB 2MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
MEKTOVI TAB 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
NERLYNX TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
NEXAVAR TAB 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
PIQRAY 200MG TAB DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
PIQRAY 250MG TAB DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
PIQRAY 300MG TAB DOSE	OC	SP, PA; oral chemotherapy - refer to plan benefits
ROZLYTREK CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ROZLYTREK CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
RYDAPT CAP 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SPRYCEL TAB 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SPRYCEL TAB 70MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SPRYCEL TAB 80MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SPRYCEL TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SPRYCEL TAB 140MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
STIVARGA TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SUTENT CAP 12.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SUTENT CAP 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SUTENT CAP 37.5MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SUTENT CAP 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TAFINLAR CAP 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TAFINLAR CAP 75MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TAGRISSE TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TAGRISSE TAB 80MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TARCEVA TAB 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TARCEVA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
TARCEVA TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TASIGNA CAP 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TASIGNA CAP 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TASIGNA CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TURALIO CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TYKERB TAB 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VERZENIO TAB 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VERZENIO TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VERZENIO TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VERZENIO TAB 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VITRAKVI CAP 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VITRAKVI CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VITRAKVI SOL 20MG/ML	OC	SP, PA; oral chemotherapy - refer to plan benefits
VIZIMPRO TAB 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VIZIMPRO TAB 30MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VIZIMPRO TAB 45MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
VOTRIENT TAB 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
XALKORI CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
XALKORI CAP 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
XOSPATA TAB 40MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZELBORAF TAB 240MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYDELIG TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYDELIG TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYKADIA CAP 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZYKADIA TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
MISCELLANEOUS		
<i>bexarotene cap 75 mg</i>	OC	SP, PA; oral chemotherapy - refer to plan benefits
DAURISMO TAB 25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
DAURISMO TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ERIVEDGE CAP 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>etoposide cap 50 mg</i>	OC	oral chemotherapy - refer to plan benefits
FARYDAK CAP 10MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
FARYDAK CAP 15MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
FARYDAK CAP 20MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
HYDREA CAP 500MG	OC	oral chemotherapy - refer to plan benefits
<i>hydroxyurea cap 500 mg</i>	OC	oral chemotherapy - refer to plan benefits
IDHIFA TAB 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
IDHIFA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<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	
LONSURF TAB 15-6.14	OC	SP, PA; oral chemotherapy - refer to plan benefits
LONSURF TAB 20-8.19	OC	SP, PA; oral chemotherapy - refer to plan benefits
LYNPARZA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LYNPARZA TAB 150MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
LYSODREN TAB 500MG	OC	oral chemotherapy - refer to plan benefits
MATULANE CAP 50MG	OC	oral chemotherapy - refer to plan benefits
MESNEX TAB 400MG	3	
NINLARO CAP 2.3MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
NINLARO CAP 3MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
NINLARO CAP 4MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
ODOMZO CAP 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
RUBRACA TAB 200MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
RUBRACA TAB 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
RUBRACA TAB 300MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
SIKLOS TAB 100MG	3	
TALZENNA CAP 0.25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TALZENNA CAP 1MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TARGRETIN CAP 75MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
TARGRETIN GEL 1%	3	PA
TIBSOVO TAB 250MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
<i>tretinoin cap 10 mg</i>	OC	oral chemotherapy - refer to plan benefits
VENCLEXTA TAB 10MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VENCLEXTA TAB 50MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VENCLEXTA TAB 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
VENCLEXTA TAB START PK	OC	SP, PA; oral chemotherapy - refer to plan benefits
VISTOGARD PAK 10GM	5	SP
XPOVIO PAK 60MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
XPOVIO PAK 80MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

Drug Name	Drug Tier	Requirements/Limits
XPOVIO PAK 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZEJULA CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
ZOLINZA CAP 100MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

TOPOISOMERASE INHIBITORS

HYCAMTIN CAP 0.25MG	OC	SP, PA; oral chemotherapy - refer to plan benefits
HYCAMTIN CAP 1MG	OC	SP, PA; oral chemotherapy - refer to plan benefits

CARDIOVASCULAR

ACE INHIBITOR/CALCIUM CHANNEL BLOCKER COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1
<i>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
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1

ACE INHIBITOR/DIURETIC COMBINATIONS

<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>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	
ACE INHIBITORS		
<i>benazepril hcl tab 5 mg</i>	1	
<i>benazepril hcl tab 10 mg</i>	1	
<i>benazepril hcl tab 20 mg</i>	1	
<i>benazepril hcl tab 40 mg</i>	1	
<i>captopril tab 12.5 mg</i>	1	
<i>captopril tab 25 mg</i>	1	
<i>captopril tab 50 mg</i>	1	
<i>captopril tab 100 mg</i>	1	
<i>enalapril maleate 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	
EPANED SOL 1MG/ML	3	AGE (Covered for ages 1 month to 12 years of age)
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
QBRELIS SOL 1MG/ML	3	AGE (Covered for ages 6 to 12 years of age)
<i>quinapril hcl tab 5 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
ADRENOLYTICS, CENTRAL		
<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 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>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	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
ALPHA BLOCKERS		
<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>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	

Drug Name	Drug Tier	Requirements/Limits
<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	

ANGIOTENSIN II RECEPTOR ANTAGONIST/CALCIUM CHANNEL BLOCKER COMBINATIONS

<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>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	

ANGIOTENSIN II RECEPTOR ANTAGONIST/CALCIUM CHANNEL BLOCKER/DIURETIC COMBINATIONS

<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>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	

Drug Name	Drug Tier	Requirements/Limits
ANGIOTENSIN II RECEPTOR ANTAGONIST/DIURETIC COMBINATIONS		
<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	
EDARBYCLOR TAB 40-12.5	3	
EDARBYCLOR TAB 40-25MG	3	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>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>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>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	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	1	
<i>candesartan cilexetil tab 8 mg</i>	1	
<i>candesartan cilexetil tab 16 mg</i>	1	
<i>candesartan cilexetil tab 32 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
EDARBI TAB 40MG	3	
EDARBI TAB 80MG	3	
<i>eprosartan mesylate tab 600 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 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	
ANTIARRHYTHMICS		
<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>disopyramide phosphate cap 100 mg</i>	1	
<i>disopyramide phosphate cap 150 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1	PA
<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>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
MULTAQ TAB 400MG	3	
NORPACE CAP 100MG CR	2	
NORPACE CAP 150MG CR	2	
<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	
<i>quinidine gluconate tab er 324 mg</i>	1	
<i>sorine tab 80mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sorine tab 120mg</i>	1	
<i>sorine tab 160mg</i>	1	
<i>sorine tab 240mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
ANTILIPEMICS, BILE ACID RESINS		
<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	
<i>prevalite pow 4gm</i>	1	
<i>prevalite pow 4gm pk</i>	1	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	QL (30 per 30 days)
ANTILIPEMICS, FIBRATES		
<i>ANTARA CAP 30MG</i>	3	
<i>ANTARA CAP 90MG</i>	3	
<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 50 mg</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 130 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
<i>fenofibrate tab 40 mg</i>	1	
<i>fenofibrate tab 48 mg</i>	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate tab 120 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	
<i>fenofibrate tab 160 mg</i>	1	
<i>gemfibrozil tab 600 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
ALTOPREV TAB 20MG ER	3	QL (30 per 30 days); ST (Try generic statin)
ALTOPREV TAB 40MG ER	3	QL (30 per 30 days); ST (Try generic statin)
ALTOPREV TAB 60MG ER	3	QL (30 per 30 days); ST (Try generic statin)
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	QL (30 per 30 days)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	QL (30 per 30 days)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	QL (30 per 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	QL (30 per 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	QL (30 per 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	QL (30 per 30 days)
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
LIVALO TAB 1MG	3	QL (30 per 30 days); ST (Try generic statin)
LIVALO TAB 2MG	3	QL (30 per 30 days); ST (Try generic statin)
LIVALO TAB 4MG	3	QL (30 per 30 days); ST (Try generic statin)
<i>lovastatin tab 10 mg</i>	1	AGE (40-75 years old covered at \$0)
<i>lovastatin tab 20 mg</i>	1	AGE (40-75 years old covered at \$0)
<i>lovastatin tab 40 mg</i>	1	AGE (40-75 years old covered at \$0)
<i>pravastatin sodium tab 10 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)

Drug Name	Drug Tier	Requirements/Limits
<i>pravastatin sodium tab 20 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>pravastatin sodium tab 40 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>pravastatin sodium tab 80 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 5 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 10 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>rosuvastatin calcium tab 20 mg</i>	1	QL (30 per 30 days)
<i>rosuvastatin calcium tab 40 mg</i>	1	QL (30 per 30 days)
<i>simvastatin tab 5 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>simvastatin tab 10 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>simvastatin tab 20 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>simvastatin tab 40 mg</i>	1	QL (30 per 30 days); AGE (40-75 years old covered at \$0)
<i>simvastatin tab 80 mg</i>	1	QL (30 per 30 days)
ANTILIPEMICS, NIACINS		
<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	
<i>niacor tab 500mg</i>	1	
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	
VASCEPA CAP 0.5GM	2	
VASCEPA CAP 1GM	2	
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
DUTOPROL TAB 25-12.5	3	
DUTOPROL TAB 50-12.5	3	
DUTOPROL TAB 100-12.5	3	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	1	
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	1	
BETA-BLOCKERS		
<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	
BYSTOLIC TAB 2.5MG	3	
BYSTOLIC TAB 5MG	3	
BYSTOLIC TAB 10MG	3	
BYSTOLIC TAB 20MG	3	
<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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<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>timolol maleate tab 5 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	

CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	QL (30 per 30 days)
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	QL (30 per 30 days)

Drug Name	Drug Tier	Requirements/Limits
CALCIUM CHANNEL BLOCKERS, DIHYDROPYRIDINES		
<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>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>nicardipine hcl cap 20 mg</i>	1	
<i>nicardipine hcl cap 30 mg</i>	1	
<i>nifedipine cap 10 mg</i>	1	
<i>nifedipine cap 20 mg</i>	1	
<i>nifedipine tab er 24hr 30 mg</i>	1	
<i>nifedipine tab er 24hr 60 mg</i>	1	
<i>nifedipine tab er 24hr 90 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</i>	1	
<i>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	
CALCIUM CHANNEL BLOCKERS, NON-DIHYDROPYRIDINES		
<i>CARDIZEM LA TAB 120MG</i>	3	
<i>cartia xt cap 120/24hr</i>	1	
<i>cartia xt cap 180/24hr</i>	1	
<i>cartia xt cap 240/24hr</i>	1	
<i>cartia xt cap 300/24hr</i>	1	
<i>dilt-xr cap 120mg</i>	1	
<i>dilt-xr cap 180mg</i>	1	
<i>dilt-xr cap 240mg</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 180 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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 coated beads tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 360 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 420 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>matzim la tab 180mg/24</i>	1	
<i>matzim la tab 240mg/24</i>	1	
<i>matzim la tab 300mg/24</i>	1	
<i>matzim la tab 360mg/24</i>	1	
<i>matzim la tab 420mg/24</i>	1	
<i>taztia xt cap 120mg/24</i>	1	
<i>taztia xt cap 180mg/24</i>	1	
<i>taztia xt cap 240mg/24</i>	1	
<i>taztia xt cap 300mg er</i>	1	
<i>taztia xt cap 360mg/24</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
DIGITALIS GLYCOSIDES		
<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digox tab 0.25mg</i>	1	
<i>digox tab 0.125mg</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
DIRECT RENIN INHIBITORS/DIURETIC COMBINATIONS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	
TEKTURNA HCT TAB 150-12.5	3	
TEKTURNA HCT TAB 150-25MG	3	
TEKTURNA HCT TAB 300-12.5	3	
TEKTURNA HCT TAB 300-25MG	3	
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>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
DIURETICS, DIURETIC COMBINATIONS		
ALDACTAZIDE TAB 25/25	3	
ALDACTAZIDE TAB 50/50	3	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	
DIURETICS, LOOP DIURETICS		
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
EDECIN TAB 25MG	3	
<i>ethacrynic acid tab 25 mg</i>	1	
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
<i>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	
DIURETICS, POTASSIUM-SPARING DIURETICS		
<i>amiloride hcl tab 5 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
<i>triamterene cap 100 mg</i>	1	
DIURETICS, THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
DIURIL SUS 250/5ML	3	
<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	
HEART FAILURE		
BIDIL TAB	3	
ENTRESTO TAB 24-26MG	2	QL (60 per 30 days)
ENTRESTO TAB 49-51MG	2	QL (60 per 30 days)
ENTRESTO TAB 97-103MG	2	QL (60 per 30 days)
VYNDAMAX CAP 61MG	5	SP, PA
VYNDAQEL CAP 20MG	5	SP, PA
MISCELLANEOUS		
<i>hydralazine hcl tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
NORTHERA CAP 100MG	4	SP, PA
NORTHERA CAP 200MG	4	SP, PA
NORTHERA CAP 300MG	4	SP, PA
<i>phenoxybenzamine hcl cap 10 mg</i>	1	
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	
NITRATES, ORAL		
<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 dinitrate tab er 40 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	
<i>nitro-time cap 2.5mg cr</i>	1	
<i>nitro-time cap 6.5mg cr</i>	1	
<i>nitro-time cap 9mg cr</i>	1	
<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	
NITRATES, SUBLINGUAL/TRANSLINGUAL		
<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 tl soln 0.4 mg/spray (400 mcg/spray)</i>	1	
NITRATES, TRANSDERMAL		
<i>minitran dis 0.1mg/hr</i>	1	
<i>minitran dis 0.2mg/hr</i>	1	
<i>minitran dis 0.4mg/hr</i>	1	
<i>minitran dis 0.6mg/hr</i>	1	
NITRO-BID OIN 2%	3	
NITRO-DUR DIS 0.1MG/HR	2	
NITRO-DUR DIS 0.2MG/HR	2	
NITRO-DUR DIS 0.3MG/HR	2	
NITRO-DUR DIS 0.4MG/HR	2	
NITRO-DUR DIS 0.6MG/HR	2	

Drug Name	Drug Tier	Requirements/Limits
NITRO-DUR DIS 0.8MG/HR	2	
<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	

PULMONARY ARTERIAL HYPERTENSION, ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg</i>	4	SP, QL (30 per 30 days), PA
<i>ambrisentan tab 10 mg</i>	4	SP, QL (30 per 30 days), PA
<i>bosentan tab 62.5 mg</i>	4	SP, QL (60 per 30 days), PA
<i>bosentan tab 125 mg</i>	4	SP, QL (60 per 30 days), PA
LETAIRIS TAB 5MG	4	SP, QL (30 per 30 days), PA
LETAIRIS TAB 10MG	4	SP, QL (30 per 30 days), PA
OPSUMIT TAB 10MG	4	SP, QL (30 per 30 days), PA
TRACLEER TAB 32MG	4	SP, QL (60 per 30 days), PA
TRACLEER TAB 62.5MG	4	SP, QL (60 per 30 days), PA
TRACLEER TAB 125MG	4	SP, QL (60 per 30 days), PA

PULMONARY ARTERIAL HYPERTENSION, PHOSPHODIESTERASE INHIBITORS

ADCIRCA TAB 20MG	4	SP, QL (60 per 30 days), PA
REVATIO SUS 10MG/ML	4	SP, QL (180 mL per 30 days), PA
REVATIO TAB 20MG	4	SP, QL (90 per 30 days), PA
<i>sildenafil citrate tab 20 mg</i>	4	SP, QL (90 per 30 days), PA
<i>tadalafil tab 20 mg (pah)</i>	4	SP, QL (60 per 30 days), PA

PULMONARY ARTERIAL HYPERTENSION, PROSTAGLANDIN VASODILATORS

ORENITRAM TAB 0.25MG	4	SP, QL (90 per 30 days), PA
ORENITRAM TAB 0.125MG	4	SP, QL (90 per 30 days), PA
ORENITRAM TAB 1MG	4	SP, QL (90 per 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
ORENITRAM TAB 2.5MG	4	SP, QL (90 per 30 days), PA
ORENITRAM TAB 5MG	4	SP, QL (90 per 30 days), PA
TYVASO REFIL SOL 0.6MG/ML	4	SP, QL (Max 1 ampule per day), PA
TYVASO SOL 0.6MG/ML	4	SP, QL (Max 1 ampule per day), PA
TYVASO START SOL 0.6MG/ML	4	SP, QL (Max 1 ampule per day), PA
VENTAVIS SOL 10MCG/ML	4	SP, QL (Max 9 ampules per day), PA
VENTAVIS SOL 20MCG/ML	4	SP, QL (Max 9 ampules per day), PA

PULMONARY ARTERIAL HYPERTENSION, SOLUBLE GUANYLATE CYCLASE STIMULATORS

ADEMPAS TAB 0.5MG	4	SP, QL (90 per 30 days), PA
ADEMPAS TAB 1.5MG	4	SP, QL (90 per 30 days), PA
ADEMPAS TAB 1MG	4	SP, QL (90 per 30 days), PA
ADEMPAS TAB 2.5MG	4	SP, QL (90 per 30 days), PA
ADEMPAS TAB 2MG	4	SP, QL (90 per 30 days), PA

VASOPRESSORS

<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	

CENTRAL NERVOUS SYSTEM

ANTIANSXIETY, BENZODIAZEPINES

<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	
<i>alprazolam orally disintegrating tab 1 mg</i>	1	
<i>alprazolam orally disintegrating tab 2 mg</i>	1	
<i>alprazolam tab 0.5 mg</i>	1	
<i>alprazolam tab 0.5mg xr</i>	1	
<i>alprazolam tab 0.25 mg</i>	1	
<i>alprazolam tab 1 mg</i>	1	
<i>alprazolam tab 2 mg</i>	1	
<i>alprazolam tab 2mg xr</i>	1	
<i>alprazolam tab 3mg xr</i>	1	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	
<i>clonazepam orally disintegrating tab 1 mg</i>	1	
<i>clonazepam orally disintegrating tab 2 mg</i>	1	
<i>clonazepam tab 0.5 mg</i>	1	
<i>clonazepam tab 1 mg</i>	1	
<i>clonazepam tab 2 mg</i>	1	
<i>clorazepate dipotassium tab 3.75 mg</i>	1	
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam tab 10 mg</i>	1	
KLONOPIN TAB 0.5MG	3	
KLONOPIN TAB 1MG	3	
KLONOPIN TAB 2MG	3	
<i>lorazepam con 2mg/ml</i>	1	
<i>lorazepam tab 0.5 mg</i>	1	
<i>lorazepam tab 1 mg</i>	1	
<i>lorazepam tab 2 mg</i>	1	
NAYZILAM SPR 5MG	3	QL (5 boxes / 30 days); AGE (Min age 12 years)
<i>oxazepam cap 10 mg</i>	1	
<i>oxazepam cap 15 mg</i>	1	
<i>oxazepam cap 30 mg</i>	1	
VALIUM TAB 2MG	3	
VALIUM TAB 5MG	3	
VALIUM TAB 10MG	3	
ANTIANXIETY, MISCELLANEOUS		
<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	1	
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone hcl tab 30 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clomipramine hcl cap 75 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>meprobamate tab 200 mg</i>	1	
<i>meprobamate tab 400 mg</i>	1	

ANTICONVULSANTS

BANZEL SUS 40MG/ML	3	
BANZEL TAB 200MG	3	
BANZEL TAB 400MG	3	
<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	
CARBATROL CAP 100MG	3	
CARBATROL CAP 200MG	3	
CARBATROL CAP 300MG	3	
CELONTIN CAP 300MG	3	
<i>clobazam suspension 2.5 mg/ml</i>	1	
<i>clobazam tab 10 mg</i>	1	
<i>clobazam tab 20 mg</i>	1	
DEPAKOTE ER TAB 250MG	3	
DEPAKOTE ER TAB 500MG	3	
DEPAKOTE SPR CAP 125MG	3	
DEPAKOTE TAB 125MG DR	3	
DEPAKOTE TAB 250MG DR	3	
DEPAKOTE TAB 500MG DR	3	
DIACOMIT CAP 250MG	3	
DIACOMIT CAP 500MG	3	
DIACOMIT PAK 250MG	3	
DIACOMIT PAK 500MG	3	
DIASTAT ACDL GEL 5-10MG	2	
DIASTAT ACDL GEL 12.5-20	2	
DIASTAT PED GEL 2.5M GEL	2	
<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	

Drug Name	Drug Tier	Requirements/Limits
DILANTIN CAP 30MG	3	
DILANTIN CAP 100MG	3	
DILANTIN CHW 50MG	3	
DILANTIN-125 SUS 125/5ML	3	
<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	
EPIDIOLEX SOL 100MG/ML	5	SP, PA
<i>epitol tab 200mg</i>	1	
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
FELBATOL TAB 400MG	3	
FELBATOL TAB 600MG	3	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
GABITRIL TAB 2MG	3	
GABITRIL TAB 4MG	3	
GABITRIL TAB 12MG	3	
GABITRIL TAB 16MG	3	
KEPPRA SOL 100MG/ML	3	
KEPPRA TAB 250MG	3	
KEPPRA TAB 500MG	3	
KEPPRA TAB 750MG	3	
KEPPRA TAB 1000MG	3	
KEPPRA XR TAB 500MG	3	
KEPPRA XR TAB 750MG	3	
LAMICTAL CHW 5MG	3	
LAMICTAL CHW 25MG	3	
LAMICTAL KIT START 35	3	
LAMICTAL KIT START 49	3	
LAMICTAL KIT START 98	3	
LAMICTAL ODT KIT	3	

Drug Name	Drug Tier	Requirements/Limits
LAMICTAL ODT TAB 25MG	3	
LAMICTAL ODT TAB 50MG	3	
LAMICTAL ODT TAB 100MG	3	
LAMICTAL ODT TAB 200MG	3	
LAMICTAL TAB 25MG	3	
LAMICTAL TAB 100MG	3	
LAMICTAL TAB 150MG	3	
LAMICTAL TAB 200MG	3	
LAMICTAL XR KIT	3	
LAMICTAL XR TAB 25MG	3	
LAMICTAL XR TAB 50MG	3	
LAMICTAL XR TAB 100MG	3	
LAMICTAL XR TAB 200MG	3	
LAMICTAL XR TAB 250MG	3	
LAMICTAL XR TAB 300MG	3	
<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 (35) starter kit</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1	
<i>lamotrigine tab 25 mg (84) & 100 mg (14) 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 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	
MYSOLINE TAB 50MG	3	

Drug Name	Drug Tier	Requirements/Limits
MYSOLINE TAB 250MG	3	
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	
<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	
OXTELLAR XR TAB 150MG	3	
OXTELLAR XR TAB 300MG	3	
OXTELLAR XR TAB 600MG	3	
<i>phenobarbital elixir 20 mg/5ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	
<i>phenobarbital tab 16.2 mg</i>	1	
<i>phenobarbital tab 30 mg</i>	1	
<i>phenobarbital tab 32.4 mg</i>	1	
<i>phenobarbital tab 60 mg</i>	1	
<i>phenobarbital tab 64.8 mg</i>	1	
<i>phenobarbital tab 97.2 mg</i>	1	
<i>phenobarbital tab 100 mg</i>	1	
PHENYTEK CAP 200MG	3	
PHENYTEK CAP 300MG	3	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 250 mg</i>	1	
QUDEXY XR CAP 25/24HR	3	
QUDEXY XR CAP 50/24HR	3	
QUDEXY XR CAP 100/24HR	3	
QUDEXY XR CAP 150/24HR	3	
QUDEXY XR CAP 200/24HR	3	
TEGRETOL SUS 100/5ML	3	
TEGRETOL TAB 200MG	3	
TEGRETOL-XR TAB 100MG	2	
TEGRETOL-XR TAB 200MG	2	
TEGRETOL-XR TAB 400MG	2	
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>tiagabine hcl tab 16 mg</i>	1	
TOPAMAX SPR CAP 15MG	3	
TOPAMAX SPR CAP 25MG	3	
TOPAMAX TAB 25MG	3	
TOPAMAX TAB 50MG	3	
TOPAMAX TAB 100MG	3	
TOPAMAX TAB 200MG	3	
<i>topiramate cap er 24hr sprinkle 25 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 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	
TRILEPTAL SUS 300MG/5M	3	
TRILEPTAL TAB 150MG	3	
TRILEPTAL TAB 300MG	3	
TRILEPTAL TAB 600MG	3	
TROKENDI XR CAP 25MG	3	
TROKENDI XR CAP 50MG	3	
TROKENDI XR CAP 100MG	3	
TROKENDI XR CAP 200MG	3	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	
VIMPAT SOL 10MG/ML	3	
VIMPAT TAB 50MG	3	
VIMPAT TAB 100MG	3	
VIMPAT TAB 150MG	3	
VIMPAT TAB 200MG	3	
ZARONTIN SOL 250/5ML	3	
ZONEGRAN CAP 25MG	3	
ZONEGRAN CAP 100MG	3	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
ANTIDEMENTIA		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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 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 5 mg (28) & 10 mg (21) titration pak</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
NAMENDA XR CAP TITRATIO	2	
<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	
ANTIDEPRESSANTS, MISCELLANEOUS		
ALENZIN TAB 174MG	3	
ALENZIN TAB 348MG	3	
ALENZIN TAB 522MG	3	
<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	
<i>bupropion hcl tab er 24hr 450 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
FORFIVO XL TAB 450MG	3	
<i>maprotiline hcl tab 25 mg</i>	1	
<i>maprotiline hcl tab 50 mg</i>	1	
<i>maprotiline hcl tab 75 mg</i>	1	
<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	
<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	
<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	
ANTIDEPRESSANTS, MONOAMINE OXIDASE INHIBITORS (MAOIs)		
EMSAM DIS 6MG/24HR	3	
EMSAM DIS 9MG/24HR	3	
EMSAM DIS 12MG/24H	3	
MARPLAN TAB 10MG	3	
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	
ANTIDEPRESSANTS, SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)		
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>fluoxetine hcl (p added) tab 10 mg</i>	1	
<i>fluoxetine hcl (p added) tab 20 mg</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>fluoxetine hcl tab 60 mg</i>	1	
FLUOXETINE TAB 60MG	3	
<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	
PAXIL SUS 10MG/5ML	3	
PEXEVA TAB 10MG	3	
PEXEVA TAB 20MG	3	
PEXEVA TAB 30MG	3	
PEXEVA TAB 40MG	3	
SARAFEM TAB 10MG	3	
SARAFEM TAB 20MG	3	
<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	
TRINTELLIX TAB 5MG	3	QL (120 per 30 days)
TRINTELLIX TAB 10MG	3	QL (60 per 30 days)
TRINTELLIX TAB 20MG	3	QL (30 per 30 days)
VIIBRYD KIT STARTER	3	
VIIBRYD TAB 10MG	3	
VIIBRYD TAB 20MG	3	
VIIBRYD TAB 40MG	3	
ANTIDEPRESSANTS, SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)		
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	
<i>desvenlafaxine tab er 24hr 50 mg</i>	1	QL (240 per 30 days)
<i>desvenlafaxine tab er 24hr 100 mg</i>	1	QL (120 per 30 days)
<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 60 mg (base eq)</i>	1	
FETZIMA CAP 20MG	3	QL (180 per 30 days)
FETZIMA CAP 40MG	3	QL (90 per 30 days)
FETZIMA CAP 80MG	3	QL (30 per 30 days)
FETZIMA CAP 120MG	3	QL (30 per 30 days)
FETZIMA CAP TITRATIO	3	QL (90 per 30 days)
<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	
ANTIDEPRESSANTS, TRICYCLIC ANTIDEPRESSANTS (TCAs)		
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxapine tab 50 mg</i>	1	
<i>amoxapine tab 100 mg</i>	1	
<i>amoxapine tab 150 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	
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl syrup 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
<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>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa tab 25 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<i>entacapone tab 200 mg</i>	1	
NEUPRO DIS 1MG/24HR	3	
NEUPRO DIS 2MG/24HR	3	
NEUPRO DIS 3MG/24HR	3	
NEUPRO DIS 4MG/24HR	3	
NEUPRO DIS 6MG/24HR	3	
NEUPRO DIS 8MG/24HR	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
RYTARY CAP 95MG	3	
RYTARY CAP 145MG	3	
RYTARY CAP 195MG	3	
RYTARY CAP 245MG	3	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
ZELAPAR TAB 1.25MG	3	
ANTIPSYCHOTICS, ATYPICALS		
<i>aripiprazole oral solution 1 mg/ml</i>	1	
<i>aripiprazole orally disintegrating tab 10 mg</i>	1	
<i>aripiprazole orally disintegrating tab 15 mg</i>	1	
<i>aripiprazole tab 2 mg</i>	1	
<i>aripiprazole tab 5 mg</i>	1	
<i>aripiprazole tab 10 mg</i>	1	
<i>aripiprazole tab 15 mg</i>	1	
<i>aripiprazole tab 20 mg</i>	1	
<i>aripiprazole tab 30 mg</i>	1	
<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	

Drug Name	Drug Tier	Requirements/Limits
FANAPT PAK	3	
FANAPT TAB 1MG	3	
FANAPT TAB 2MG	3	
FANAPT TAB 4MG	3	
FANAPT TAB 6MG	3	
FANAPT TAB 8MG	3	
FANAPT TAB 10MG	3	
FANAPT TAB 12MG	3	
LATUDA TAB 20MG	3	
LATUDA TAB 40MG	3	
LATUDA TAB 60MG	3	
LATUDA TAB 80MG	3	
LATUDA TAB 120MG	3	
<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>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>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>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 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
SAPHRIS SUB 2.5MG	3	
SAPHRIS SUB 5MG	3	
SAPHRIS SUB 10MG	3	
<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	
ANTIPSYCHOTICS, MISCELLANEOUS		
<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 hcl elixir 2.5 mg/5ml</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>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
<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	
NUPLAZID CAP 34MG	5	SP, PA
NUPLAZID TAB 10MG	5	SP, PA
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>perphenazine tab 16 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 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>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	
<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	
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (360 per 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (180 per 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (120 per 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (90 per 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (60 per 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (60 per 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	QL (360 per 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	QL (240 per 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	QL (180 per 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	QL (135 per 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	QL (120 per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	QL (90 per 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	QL (60 per 30 days)
APTENSIO XR CAP 10MG	3	QL (180 per 30 days)
APTENSIO XR CAP 15MG	3	QL (120 per 30 days)
APTENSIO XR CAP 20MG	3	QL (90 per 30 days)
APTENSIO XR CAP 30MG	3	QL (60 per 30 days)
APTENSIO XR CAP 40MG	3	QL (30 per 30 days)
APTENSIO XR CAP 50MG	3	QL (30 per 30 days)
APTENSIO XR CAP 60MG	3	QL (30 per 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	QL (120 per 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	QL (120 per 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	QL (120 per 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	QL (60 per 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	QL (30 per 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	QL (30 per 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	QL (30 per 30 days)
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
DAYTRANA DIS 10MG/9HR	3	QL (30 per 30 days)
DAYTRANA DIS 15MG/9HR	3	QL (30 per 30 days)
DAYTRANA DIS 20MG/9HR	3	QL (30 per 30 days)
DAYTRANA DIS 30MG/9HR	3	QL (30 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	QL (300 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	QL (150 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	QL (90 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	QL (60 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	QL (60 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	QL (30 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	QL (30 per 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	QL (30 per 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	QL (600 per 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	1	QL (300 per 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	1	QL (150 per 30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	QL (360 per 30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL (180 per 30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL (120 per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate tab 5 mg</i>	1	QL (360 per 30 days)
<i>dextroamphetamine sulfate tab 10 mg</i>	1	QL (180 per 30 days)
<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	
<i>metadate tab 20mg er</i>	1	QL (150 per 30 days)
<i>methamphetamine hcl tab 5 mg</i>	1	QL (150 per 30 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	QL (300 per 30 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	QL (150 per 30 days)
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	1	QL (300 per 30 days)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	QL (150 per 30 days)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	QL (90 per 30 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	QL (60 per 30 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	QL (90 per 30 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	QL (60 per 30 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	QL (60 per 30 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	QL (30 per 30 days)
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	QL (3000 mL per 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	QL (1500 mL per 30 days)
<i>methylphenidate hcl tab 5 mg</i>	1	QL (600 per 30 days)
<i>methylphenidate hcl tab 10 mg</i>	1	QL (300 per 30 days)
<i>methylphenidate hcl tab 20 mg</i>	1	QL (150 per 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	1	QL (300 per 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	1	QL (150 per 30 days)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	QL (180 per 30 days)
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	QL (120 per 30 days)
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	QL (90 per 30 days)
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	QL (60 per 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	QL (180 per 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	QL (120 per 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	QL (90 per 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	QL (60 per 30 days)

Drug Name	Drug Tier	Requirements/Limits
QUILLIVANT SUS 25MG/5ML	3	
RITALIN LA CAP 10MG	3	QL (300 per 30 days)
RITALIN LA CAP 20MG	3	QL (150 per 30 days)
RITALIN LA CAP 30MG	3	QL (90 per 30 days)
RITALIN LA CAP 40MG	3	QL (60 per 30 days)
VYVANSE CAP 10MG	3	QL (60 per 30 days)
VYVANSE CAP 20MG	3	QL (60 per 30 days)
VYVANSE CAP 30MG	3	QL (60 per 30 days)
VYVANSE CAP 40MG	3	QL (30 per 30 days)
VYVANSE CAP 50MG	3	QL (30 per 30 days)
VYVANSE CAP 60MG	3	QL (30 per 30 days)
VYVANSE CAP 70MG	3	QL (30 per 30 days)
<i>zenzedi tab 2.5mg</i>	1	QL (480 per 30 days)
<i>zenzedi tab 5mg</i>	1	QL (360 per 30 days)
<i>zenzedi tab 7.5mg</i>	1	QL (150 per 30 days)
<i>zenzedi tab 10mg</i>	1	QL (180 per 30 days)
<i>zenzedi tab 15mg</i>	1	QL (60 per 30 days)
<i>zenzedi tab 20mg</i>	1	QL (60 per 30 days)
<i>zenzedi tab 30mg</i>	1	QL (30 per 30 days)

FIBROMYALGIA

<i>pregabalin cap 25 mg</i>	1	QL (120 per 30 days)
<i>pregabalin cap 50 mg</i>	1	QL (120 per 30 days)
<i>pregabalin cap 75 mg</i>	1	QL (120 per 30 days)
<i>pregabalin cap 100 mg</i>	1	QL (120 per 30 days)
<i>pregabalin cap 150 mg</i>	1	QL (120 per 30 days)
<i>pregabalin cap 200 mg</i>	1	QL (90 per 30 days)
<i>pregabalin cap 225 mg</i>	1	QL (60 per 30 days)
<i>pregabalin cap 300 mg</i>	1	QL (60 per 30 days)
<i>pregabalin soln 20 mg/ml</i>	1	QL (900 mL per 30 days)
SAVELLA MIS TITR PAK	2	
SAVELLA TAB 12.5MG	2	
SAVELLA TAB 25MG	2	
SAVELLA TAB 50MG	2	
SAVELLA TAB 100MG	2	

HUNTINGTON'S DISEASE AGENTS

<i>tetrabenazine tab 12.5 mg</i>	4	SP, PA
<i>tetrabenazine tab 25 mg</i>	4	SP, PA

HYPNOTICS, BENZODIAZEPINES

<i>estazolam tab 1 mg</i>	1	
<i>estazolam tab 2 mg</i>	1	
<i>flurazepam hcl cap 15 mg</i>	1	
<i>flurazepam hcl cap 30 mg</i>	1	
<i>temazepam cap 7.5 mg</i>	1	
<i>temazepam cap 15 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>temazepam cap 22.5 mg</i>	1	
<i>temazepam cap 30 mg</i>	1	
<i>triazolam tab 0.25 mg</i>	1	
<i>triazolam tab 0.125 mg</i>	1	
HYPNOTICS, NON-BENZODIAZEPINES		
BELSOMRA TAB 5MG	3	
BELSOMRA TAB 10MG	3	
BELSOMRA TAB 15MG	3	
BELSOMRA TAB 20MG	3	
EDLUAR SUB 5MG	3	QL (30 per 30 days)
EDLUAR SUB 10MG	3	QL (30 per 30 days)
<i>eszopiclone tab 1 mg</i>	1	QL (30 per 30 days)
<i>eszopiclone tab 2 mg</i>	1	QL (30 per 30 days)
<i>eszopiclone tab 3 mg</i>	1	QL (30 per 30 days)
<i>ramelteon tab 8 mg</i>	1	
ROZEREM TAB 8MG	3	
SECONAL SOD CAP 100MG	3	QL (30 per 30 days)
<i>zaleplon cap 5 mg</i>	1	QL (90 per 30 days)
<i>zaleplon cap 10 mg</i>	1	QL (60 per 30 days)
<i>zolpidem tartrate sl tab 1.75 mg</i>	1	QL (30 per 30 days)
<i>zolpidem tartrate sl tab 3.5 mg</i>	1	QL (30 per 30 days)
<i>zolpidem tartrate tab 5 mg</i>	1	QL (30 per 30 days)
<i>zolpidem tartrate tab 10 mg</i>	1	QL (30 per 30 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	1	QL (30 per 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	1	QL (30 per 30 days)
HYPNOTICS, TRICYCLICS		
SILENOR TAB 3MG	3	
SILENOR TAB 6MG	3	
MIGRAINE, ERGOTAMINE DERIVATIVES		
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	1	
<i>ergotamine w/ caffeine tab 1-100 mg</i>	1	
<i>migergot sup 2/100</i>	1	
MIGRAINE, SELECTIVE SEROTONIN AGONIST/NSAID COMBINATIONS		
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	1	QL (9 tabs per 30 days)
TREXIMET TAB 85-500MG	3	QL (9 tabs per 30 days)
MIGRAINE, SELECTIVE SEROTONIN AGONISTS		
<i>almotriptan malate tab 6.25 mg</i>	1	QL (12 tabs per 30 days)
<i>almotriptan malate tab 12.5 mg</i>	1	QL (12 tabs per 30 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL (12 tabs per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL (12 tabs per 30 days)
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	1	QL (9 tabs per 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL (9 tabs per 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL (9 tabs per 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	QL (12 tabs per 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL (12 tabs per 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (12 tabs per 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (12 tabs per 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (12 units per 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (12 units per 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (5 inj per 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (4 inj per 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (5 inj per 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	1	QL (4 inj per 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	1	QL (5 inj per 30 days)
<i>sumatriptan succinate tab 25 mg</i>	1	QL (9 tabs per 30 days)
<i>sumatriptan succinate tab 50 mg</i>	1	QL (9 tabs per 30 days)
<i>sumatriptan succinate tab 100 mg</i>	1	QL (9 tabs per 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 tabs per 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (12 tabs per 30 days)
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs per 30 days)
<i>zolmitriptan tab 5 mg</i>	1	QL (12 tabs per 30 days)
ZOMIG SPR 2.5MG	3	QL (12 units per 30 days)
ZOMIG SPR 5MG	3	QL (12 units per 30 days)
MISCELLANEOUS		
FIRDAPSE TAB 10MG	5	SP, PA
<i>riluzole tab 50 mg</i>	1	
RUZURGI TAB 10MG	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
MOOD STABILIZERS		
EQUETRO CAP 100MG	3	
EQUETRO CAP 200MG	3	
EQUETRO CAP 300MG	3	
<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	
LITHIUM SOL 8MEQ/5ML	3	
LITHOBID TAB 300MG CR	2	
MULTIPLE SCLEROSIS		
AMPYRA TAB 10MG	4	SP, PA
AUBAGIO TAB 7MG	4	SP, PA
AUBAGIO TAB 14MG	4	SP, PA
<i>dalfampridine tab er 12hr 10 mg</i>	4	SP, PA
GILENYA CAP 0.5MG	4	SP, PA
MAVENCLAD PAK 10MG(4)	5	SP, PA
MAVENCLAD PAK 10MG(5)	5	SP, PA
MAVENCLAD PAK 10MG(6)	5	SP, PA
MAVENCLAD PAK 10MG(7)	5	SP, PA
MAVENCLAD PAK 10MG(8)	5	SP, PA
MAVENCLAD PAK 10MG(9)	5	SP, PA
MAVENCLAD PAK 10MG(10)	5	SP, PA
MAYZENT TAB 0.25MG	5	SP, PA
MAYZENT TAB 2MG	5	SP, PA
TECFIDERA CAP 120MG	4	SP, PA
TECFIDERA CAP 240MG	4	SP, PA
TECFIDERA MIS STARTER	4	SP, PA
MUSCULOSKELETAL THERAPY AGENTS		
AMRIX CAP 15MG	3	
AMRIX CAP 30MG	3	
<i>baclofen tab 5 mg</i>	1	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 20 mg</i>	1	
<i>carisoprodol tab 250 mg</i>	1	QL (1400 mg per day)
<i>carisoprodol tab 350 mg</i>	1	QL (1400 mg per day)
<i>chlorzoxazone tab 500 mg</i>	1	
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	1	
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	1	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	1	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
<i>dantrolene sodium cap 25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
LORZONE TAB 375MG	3	
LORZONE TAB 750MG	3	
<i>metaxalone tab 400 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>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	
MYASTHENIA GRAVIS		
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	1	
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tab 50 mg</i>	1	PA
<i>armodafinil tab 150 mg</i>	1	PA
<i>armodafinil tab 200 mg</i>	1	PA
<i>armodafinil tab 250 mg</i>	1	PA
<i>modafinil tab 100 mg</i>	1	PA
<i>modafinil tab 200 mg</i>	1	PA
XYREM SOL 500MG/ML	4	SP, PA
POSTHERPETIC NEURALGIA (PHN)		
GRALISE STAR MIS 300/600	3	
GRALISE TAB 300MG	3	
GRALISE TAB 600MG	3	
HORIZANT TAB 300MG ER	3	
HORIZANT TAB 600MG ER	3	
PSYCHOTHERAPEUTIC-MISCELLANEOUS, ALCOHOL DETERRENTS		
<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
PSYCHOTHERAPEUTIC-MISCELLANEOUS, ALPHA-2 ADRENERGIC AGONISTS		
LUCEMYRA TAB 0.18MG	3	QL (16 tabs per day, max 14 day supply per 90 days)
PSYCHOTHERAPEUTIC-MISCELLANEOUS, OPIOID ANTAGONISTS		
<i>naltrexone hcl tab 50 mg</i>	1	
NARCAN SPR	2	QL (2 cartons (4 nasal sprays) per 180 days)

Drug Name	Drug Tier	Requirements/Limits
PSYCHOTHERAPEUTIC-MISCELLANEOUS, PARTIAL OPIOID AGONIST/OPIOID ANTAGONIST COMBINATIONS		
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	
SUBOXONE MIS 2-0.5MG	2	
SUBOXONE MIS 4-1MG	2	
SUBOXONE MIS 8-2MG	2	
SUBOXONE MIS 12-3MG	2	
ZUBSOLV SUB 1.4-0.36	3	
ZUBSOLV SUB 5.7-1.4	3	
ZUBSOLV SUB 8.6-2.1	3	

PSYCHOTHERAPEUTIC-MISCELLANEOUS, PARTIAL OPIOID AGONISTS

<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	

PSYCHOTHERAPEUTIC-MISCELLANEOUS, PSEUDOBULBAR AFFECT AGENTS

NUEDEXTA CAP 20-10MG	3	
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PSYCHOTHERAPEUTIC-MISCELLANEOUS, SMOKING DETERRENTS

<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
CHANTIX PAK 0.5& 1MG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
CHANTIX PAK 1MG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
CHANTIX TAB 0.5MG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
CHANTIX TAB 1MG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0

Drug Name	Drug Tier	Requirements/Limits
NICODERM CQ DIS 7MG/24HR	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICODERM CQ DIS 14MG/24H	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICODERM CQ DIS 21MG/24H	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICORETTE GUM 2MG ORIG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICORETTE GUM 4MG ORIG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICORETTE LOZ 2MG ORIG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICORETTE LOZ 4MG ORIG	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine polacrilex gum 2 mg</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine polacrilex gum 4 mg</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine polacrilex lozenge 2 mg</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine polacrilex lozenge 4 mg</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine td patch 24hr 7 mg/24hr</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICOTROL INH	3	QL (Max 180 days per year); AGE: Min Age 19 years; \$0
NICOTROL NS SPR 10MG/ML	3	QL (Max 180 days per year); AGE: Min Age 19 years; \$0

Drug Name	Drug Tier	Requirements/Limits
PSYCHOTHERAPEUTIC-MISCELLANEOUS, VASOMOTOR SYMPTOM AGENTS		
BRISDELLE CAP 7.5MG	3	
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	
TARDIVE DYSKINESIA		
INGREZZA CAP 40-80MG	5	SP, PA
INGREZZA CAP 40MG	5	SP, PA
INGREZZA CAP 80MG	5	SP, PA
ENDOCRINE AND METABOLIC		
ANDROGENS		
METHITEST TAB 10MG	3	
<i>methyltestosterone cap 10 mg</i>	1	
NATESTO GEL 5.5MG	3	
<i>oxandrolone tab 2.5 mg</i>	1	
<i>oxandrolone tab 10 mg</i>	1	
<i>testosterone td gel 10mg/act (2%)</i>	1	QL (300 grams per 30 days)
<i>testosterone td gel 12.5 mg/act (1%)</i>	1	QL (300 grams per 30 days)
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	1	QL (150 grams per 30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	QL (150 grams per 30 days)
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	QL (300 grams per 30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	1	QL (150 grams per 30 days)
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	QL (300 grams per 30 days)
<i>testosterone td soln 30 mg/act</i>	1	QL (180 per 30 days)
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose tab 25 mg</i>	1	
<i>acarbose tab 50 mg</i>	1	
<i>acarbose tab 100 mg</i>	1	
<i>miglitol tab 25 mg</i>	1	
<i>miglitol tab 50 mg</i>	1	
<i>miglitol tab 100 mg</i>	1	
ANTIDIABETICS, AMYLIN ANALOGS		
SYMLINPEN 60 INJ 1000MCG	3	
SYMLINPEN 120 INJ 1000MCG	3	
ANTIDIABETICS, BIGUANIDE/SULFONYLUREA COMBINATIONS		
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
ANTIDIABETICS, BIGUANIDES		
<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	(generic for GLUCOPHAGE XR)
<i>metformin hcl tab er 24hr 750 mg</i>	1	(generic for GLUCOPHAGE XR)
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR/BIGUANIDE COMBINATIONS		
JANUMET TAB 50-500MG	2	
JANUMET TAB 50-1000	2	
JANUMET XR TAB 50-500MG	2	
JANUMET XR TAB 50-1000	2	
JANUMET XR TAB 100-1000	2	
JENTADUETO TAB 2.5-500	2	
JENTADUETO TAB 2.5-850	2	
JENTADUETO TAB 2.5-1000	2	
JENTADUETO TAB XR	2	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA TAB 25MG	2	
JANUVIA TAB 50MG	2	
JANUVIA TAB 100MG	2	
TRADJENTA TAB 5MG	2	
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
OZEMPIC INJ 2/1.5ML	2	
TRULICITY INJ 0.75/0.5	2	
TRULICITY INJ 1.5/0.5	2	
VICTOZA INJ 18MG/3ML	2	
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATIONS		
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATIONS		
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
ANTIDIABETICS, INSULIN SENSITIZERS		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	
ANTIDIABETICS, INSULINS		
HUMULIN R INJ U-500	1	
LANTUS INJ 100/ML	1	
LANTUS SOLOS INJ 100/ML	1	
NOVOLIN INJ 70/30	1	
NOVOLIN N INJ U-100	1	
NOVOLIN R INJ U-100	1	
NOVOLOG INJ 100/ML	1	
NOVOLOG INJ FLEXPEN	1	
NOVOLOG INJ PENFILL	1	
NOVOLOG MIX INJ 70/30	1	
NOVOLOG MIX INJ FLEXPEN	1	
ANTIDIABETICS, MEGLITINIDE/BIGUANIDE COMBINATIONS		
<i>repaglinide-metformin hcl tab 1-500 mg</i>	1	
<i>repaglinide-metformin hcl tab 2-500 mg</i>	1	
ANTIDIABETICS, MEGLITINIDES		
<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	
ANTIDIABETICS, MISCELLANEOUS		
CYCLOSET TAB 0.8MG	3	
ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR/BIGUANIDE COMBINATIONS		
INVOKAMET TAB 50-500MG	2	ST (Try metformin or metformin combinations)
INVOKAMET TAB 50-1000	2	ST (Try metformin or metformin combinations)
INVOKAMET TAB 150-500	2	ST (Try metformin or metformin combinations)
INVOKAMET TAB 150-1000	2	ST (Try metformin or metformin combinations)
INVOKAMET XR TAB 50-500MG	2	ST (Try metformin or metformin combinations)
INVOKAMET XR TAB 50-1000	2	ST (Try metformin or metformin combinations)

Drug Name	Drug Tier	Requirements/Limits
INVOKAMET XR TAB 150-500	2	ST (Try metformin or metformin combinations)
INVOKAMET XR TAB 150-1000	2	ST (Try metformin or metformin combinations)
SYNJARDY TAB	2	ST (Try metformin or metformin combinations)
SYNJARDY TAB 5-500MG	2	ST (Try metformin or metformin combinations)
SYNJARDY TAB 5-1000MG	2	ST (Try metformin or metformin combinations)
SYNJARDY TAB 12.5-500	2	ST (Try metformin or metformin combinations)
SYNJARDY XR TAB	2	ST (Try metformin or metformin combinations)
SYNJARDY XR TAB 5-1000MG	2	ST (Try metformin or metformin combinations)
SYNJARDY XR TAB 10-1000	2	ST (Try metformin or metformin combinations)
SYNJARDY XR TAB 25-1000	2	ST (Try metformin or metformin combinations)

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS

INVOKANA TAB 100MG	2	ST (Try metformin or metformin combinations)
INVOKANA TAB 300MG	2	ST (Try metformin or metformin combinations)
JARDIANCE TAB 10MG	2	ST (Try metformin or metformin combinations)
JARDIANCE TAB 25MG	2	ST (Try metformin or metformin combinations)

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR/DPP-4 INHIBITOR COMBINATIONS		
GLYXAMBI TAB 10-5 MG	2	ST (Try metformin or metformin combinations)
GLYXAMBI TAB 25-5 MG	2	ST (Try metformin or metformin combinations)
ANTIDIABETICS, SULFONYLUREAS		
<i>glimepiride tab 1 mg</i>	1	
<i>glimepiride tab 2 mg</i>	1	
<i>glimepiride tab 4 mg</i>	1	
<i>glipizide tab 5 mg</i>	1	
<i>glipizide tab 10 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glipizide xl tab 2.5mg</i>	1	
<i>glipizide xl tab 5mg</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	
<i>tolbutamide tab 500 mg</i>	1	
ANTIDIABETICS, SUPPLIES		
ACCU-CHEK IN LIQ CONTROL	DS	Non-Preferred Diabetic Supply
ACCU-CHEK KIT FASTCLIX	DS	Preferred Diabetic Supply
ACCU-CHEK KIT MLTICLIX	DS	Preferred Diabetic Supply
ACCU-CHEK KIT SOFTCLIX	DS	Preferred Diabetic Supply
ACCU-CHEK LIQ ACT/GLUC	DS	Non-Preferred Diabetic Supply
ACCU-CHEK LIQ COMPACT	DS	Non-Preferred Diabetic Supply
ACCU-CHEK LIQ SMART	DS	Non-Preferred Diabetic Supply
ACCU-CHEK SOL	DS	Non-Preferred Diabetic Supply
ACCU-CHEK SOL COMFORT	DS	Non-Preferred Diabetic Supply
ACCU-CHEK SOL COMPACT	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
ACCU-CHEK TES ACTIVE	DS	Non-Preferred Diabetic Supply
ACCU-CHEK TES AVIVA	DS	Non-Preferred Diabetic Supply
ACCU-CHEK TES AVIVA PL	DS	Non-Preferred Diabetic Supply
ACCU-CHEK TES COMFORT	DS	Non-Preferred Diabetic Supply
ACCU-CHEK TES COMPACT	DS	Non-Preferred Diabetic Supply
ACCU-CHEK TES SMART	DS	Non-Preferred Diabetic Supply
ACCUTREND SOL GLUCOSE	DS	Non-Preferred Diabetic Supply
ACCUTREND TES GLUCOSE	DS	Non-Preferred Diabetic Supply
ACURA CONTRL SOL HIGH	DS	Non-Preferred Diabetic Supply
ACURA CONTRL SOL LOW	DS	Non-Preferred Diabetic Supply
ACURA CONTRL SOL NORMAL	DS	Non-Preferred Diabetic Supply
ACURA TES BLD GLUC	DS	Non-Preferred Diabetic Supply
ADVANCE LIQ CONTROL	DS	Non-Preferred Diabetic Supply
ADVANCE LIQ INTUITIO	DS	Non-Preferred Diabetic Supply
ADVANCE NORM LIQ CONTROL	DS	Non-Preferred Diabetic Supply
ADVANCE TES INTUITIO	DS	Non-Preferred Diabetic Supply
ADVANCE TES MICRO-DW	DS	Non-Preferred Diabetic Supply
ADVOCATE LIQ HIGH	DS	Non-Preferred Diabetic Supply
ADVOCATE LIQ LOW	DS	Non-Preferred Diabetic Supply
ADVOCATE TES	DS	Non-Preferred Diabetic Supply
ADVOCATE TES REDI-COD	DS	Non-Preferred Diabetic Supply
ADVOCATE TES REDICODE	DS	Non-Preferred Diabetic Supply
ADVOCATE+ SOL REDI-COD	DS	Non-Preferred Diabetic Supply
AGAMATRIX SOL HIGH	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
AGAMATRIX SOL NORM/HGH	DS	Non-Preferred Diabetic Supply
AGAMATRIX SOL NORMAL	DS	Non-Preferred Diabetic Supply
AGAMATRIX TES AMP	DS	Non-Preferred Diabetic Supply
AGAMATRIX TES JAZZ	DS	Non-Preferred Diabetic Supply
AGAMATRIX TES KEYNOTE	DS	Non-Preferred Diabetic Supply
AGAMATRIX TES PRESTO	DS	Non-Preferred Diabetic Supply
ALCOHOL PAD	DS	Preferred Diabetic Supply
ASCENSIA LIQ NORM CON	DS	Non-Preferred Diabetic Supply
ASCENSIA MIS AUTODISC	DS	Non-Preferred Diabetic Supply
ASSURE 3 LIQ CONTROL	DS	Non-Preferred Diabetic Supply
ASSURE 3 TES	DS	Non-Preferred Diabetic Supply
ASSURE 4 LIQ LEVEL1/2	DS	Non-Preferred Diabetic Supply
ASSURE 4 TES	DS	Non-Preferred Diabetic Supply
ASSURE DOSE SOL NORM/HGH	DS	Non-Preferred Diabetic Supply
ASSURE DOSE SOL NORMAL	DS	Non-Preferred Diabetic Supply
ASSURE II LIQ LEVEL1/2	DS	Non-Preferred Diabetic Supply
ASSURE II LIQ LEVEL 1	DS	Non-Preferred Diabetic Supply
ASSURE II TES	DS	Non-Preferred Diabetic Supply
ASSURE II TES CHECK	DS	Non-Preferred Diabetic Supply
ASSURE PRISM SOL LEVEL1/2	DS	Non-Preferred Diabetic Supply
ASSURE PRISM TES MULTI	DS	Non-Preferred Diabetic Supply
ASSURE PRO LIQ LEVEL1/2	DS	Non-Preferred Diabetic Supply
ASSURE PRO TES	DS	Non-Preferred Diabetic Supply
ASSURE TES PLATINUM	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
AT LAST SOL CONTROL	DS	Non-Preferred Diabetic Supply
AT LAST TES	DS	Non-Preferred Diabetic Supply
AUTOCODE TES BLD GLUC	DS	Non-Preferred Diabetic Supply
AUTODISC LIQ LOW/HIGH	DS	Non-Preferred Diabetic Supply
AUTOLET II KIT CLINISAF	DS	Preferred Diabetic Supply
AUTOLET LITE KIT	DS	Preferred Diabetic Supply
AUTOLET LITE KIT CLINISAF	DS	Preferred Diabetic Supply
AUTOLET LITE KIT STARTER	DS	Preferred Diabetic Supply
AUTOLET PLAT MIS 1.8MM	DS	Preferred Diabetic Supply
AUTOLET PLAT MIS 2.4MM	DS	Preferred Diabetic Supply
AUTOLET PLAT MIS 3.0MM	DS	Preferred Diabetic Supply
AUTOPEN MIS 1 UNIT	DS	Preferred Diabetic Supply
AUTOPEN MIS 1-21UNIT	DS	Preferred Diabetic Supply
AUTOPEN MIS 2 UNIT	DS	Preferred Diabetic Supply
AUTOPEN MIS 2-32UNIT	DS	Preferred Diabetic Supply
AUTOPEN MIS 2-42UNIT	DS	Preferred Diabetic Supply
AUTOSHIELD MIS 29X3/16"	DS	Preferred Diabetic Supply
AUTOSHIELD MIS 29X5/16"	DS	Preferred Diabetic Supply
AUTOSHIELD MIS 30GX5MM	DS	Preferred Diabetic Supply
BAYER BREEZE LIQ HIGH CNT	DS	Non-Preferred Diabetic Supply
BAYER BREEZE LIQ LOW CNTL	DS	Non-Preferred Diabetic Supply
BAYER BREEZE LIQ NORM CNT	DS	Non-Preferred Diabetic Supply
BD PEN MINI MIS	DS	Preferred Diabetic Supply
BD PEN MIS	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
BD PEN NEEDL MIS 29GX12.7	DS	Preferred Diabetic Supply
BD PEN NEEDL MIS 31GX5MM	DS	Preferred Diabetic Supply
BD PEN NEEDL MIS 31GX8MM	DS	Preferred Diabetic Supply
BD PEN NEEDL MIS 32GX4MM	DS	Preferred Diabetic Supply
BG STAR TES BLD GLUC	DS	Non-Preferred Diabetic Supply
BIOSCANNER TES GLUCOSE	DS	Non-Preferred Diabetic Supply
BLOOD GLUCOS TES	DS	Non-Preferred Diabetic Supply
BLOOD GLUCOS TES PREMIUM	DS	Non-Preferred Diabetic Supply
BLOOD GLUCOS TES STRIPS	DS	Non-Preferred Diabetic Supply
BREEZE 2 MIS TEST	DS	Non-Preferred Diabetic Supply
CAREFINE MIS 32GX4MM	DS	Preferred Diabetic Supply
CAREFINE MIS 32GX5MM	DS	Preferred Diabetic Supply
CAREFINE MIS 32GX6MM	DS	Preferred Diabetic Supply
CARESENS N TES	DS	Non-Preferred Diabetic Supply
CARESENS SOL CONTROL	DS	Non-Preferred Diabetic Supply
CHEK-STIX TES CONTROL	DS	Preferred Diabetic Supply
CHEMSTRIP K TES	DS	Preferred Diabetic Supply
CHEMSTRIP TES UGK	DS	Preferred Diabetic Supply
CLEVER CHEK TES	DS	Non-Preferred Diabetic Supply
CLEVER CHEK TES AUTO CD	DS	Non-Preferred Diabetic Supply
CLEVER CHEK TES VOICE	DS	Non-Preferred Diabetic Supply
CLEVER CHOIC TES MICRO	DS	Non-Preferred Diabetic Supply
CLEVR CHOICE LIQ HIGH	DS	Non-Preferred Diabetic Supply
CLEVR CHOICE LIQ LOW	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
CLEVR CHOICE TES AUTO-CD	DS	Non-Preferred Diabetic Supply
CLICKFINE MIS 31GX1/4"	DS	Preferred Diabetic Supply
CLICKFINE MIS 32GX5/32	DS	Preferred Diabetic Supply
CLINISTIX TES STRIPS	DS	Preferred Diabetic Supply
COMFORT EZ MIS 31GX5MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 31GX6MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 32GX4MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 32GX5MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 32GX6MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 32GX8MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 33GX4MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 33GX5MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 33GX6MM	DS	Preferred Diabetic Supply
COMFORT EZ MIS 33GX8MM	DS	Preferred Diabetic Supply
CONTOUR HIGH LIQ CONTROL	DS	Non-Preferred Diabetic Supply
CONTOUR LOW LIQ CONTROL	DS	Non-Preferred Diabetic Supply
CONTOUR NEXT SOL LEVEL 1	DS	Non-Preferred Diabetic Supply
CONTOUR NEXT SOL LEVEL 2	DS	Non-Preferred Diabetic Supply
CONTOUR NORM LIQ CONTROL	DS	Non-Preferred Diabetic Supply
CONTOUR TES BLD GLUC	DS	Non-Preferred Diabetic Supply
CONTOUR TES NEXT	DS	Non-Preferred Diabetic Supply
CONTROL AST TES	DS	Non-Preferred Diabetic Supply
CONTROL HIGH SOL UNISTRIP	DS	Non-Preferred Diabetic Supply
CONTROL LOW SOL UNISTRIP	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
CONTROL NORM SOL EASY STP	DS	Non-Preferred Diabetic Supply
CONTROL SOL LIQ HI/MID/L	DS	Non-Preferred Diabetic Supply
CONTROL SOL LIQ HIGH/LOW	DS	Non-Preferred Diabetic Supply
CONTROL SOL LIQ MID	DS	Non-Preferred Diabetic Supply
CONTROL SOL NORMAL	DS	Non-Preferred Diabetic Supply
CONTROL TES	DS	Non-Preferred Diabetic Supply
DIASTIX TES STRIPS	DS	Preferred Diabetic Supply
DIATRUE CONT SOL LEVEL 1	DS	Non-Preferred Diabetic Supply
DIATRUE CONT SOL LEVEL 2	DS	Non-Preferred Diabetic Supply
DIATRUE CONT SOL LEVEL 3	DS	Non-Preferred Diabetic Supply
DIATRUE PLUS TES STRIPS	DS	Non-Preferred Diabetic Supply
DUO-CARE LIQ LEVEL1/2	DS	Non-Preferred Diabetic Supply
DUO-CARE TES	DS	Non-Preferred Diabetic Supply
EASY COMFORT MIS 31GX1/4"	DS	Preferred Diabetic Supply
EASY COMFORT MIS 31GX3/16	DS	Preferred Diabetic Supply
EASY COMFORT MIS 32GX5/32	DS	Preferred Diabetic Supply
EASY PLUS II SOL HIGH	DS	Non-Preferred Diabetic Supply
EASY PLUS II SOL LOW	DS	Non-Preferred Diabetic Supply
EASY PLUS II TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASY PLUS TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASY STEP TES	DS	Non-Preferred Diabetic Supply
EASY TALK SOL HIGH	DS	Non-Preferred Diabetic Supply
EASY TALK SOL LOW	DS	Non-Preferred Diabetic Supply
EASY TALK SOL NORMAL	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
EASY TALK TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASY TOUCH MIS 29GX1/2"	DS	Preferred Diabetic Supply
EASY TOUCH MIS 31GX1/4"	DS	Preferred Diabetic Supply
EASY TOUCH MIS 31GX3/16	DS	Preferred Diabetic Supply
EASY TOUCH MIS 32GX1/4"	DS	Preferred Diabetic Supply
EASY TOUCH MIS 32GX3/16	DS	Preferred Diabetic Supply
EASY TOUCH MIS 32GX5/32	DS	Preferred Diabetic Supply
EASY TOUCH MIS 32GX6MM	DS	Preferred Diabetic Supply
EASY TOUCH SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
EASY TOUCH TES STRIPS	DS	Non-Preferred Diabetic Supply
EASY TRAK SOL HIGH	DS	Non-Preferred Diabetic Supply
EASY TRAK SOL LOW	DS	Non-Preferred Diabetic Supply
EASY TRAK SOL NORMAL	DS	Non-Preferred Diabetic Supply
EASY TRAK TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASYGLUCO SOL HIGH	DS	Non-Preferred Diabetic Supply
EASYGLUCO SOL LOW	DS	Non-Preferred Diabetic Supply
EASYGLUCO SOL NORMAL	DS	Non-Preferred Diabetic Supply
EASYGLUCO TES	DS	Non-Preferred Diabetic Supply
EASYGLUCO TES PLUS	DS	Non-Preferred Diabetic Supply
EASYMAX 15 SOL LEVEL 1	DS	Non-Preferred Diabetic Supply
EASYMAX 15 SOL LEVEL 2	DS	Non-Preferred Diabetic Supply
EASYMAX 15 TES	DS	Non-Preferred Diabetic Supply
EASYMAX SOL HIGH	DS	Non-Preferred Diabetic Supply
EASYMAX SOL LOW	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
EASYMAX SOL NORMAL	DS	Non-Preferred Diabetic Supply
EASYMAX TES	DS	Non-Preferred Diabetic Supply
EASYPLUS TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASYPRO PLUS TES	DS	Non-Preferred Diabetic Supply
EASYPRO TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EASYSSTEP HGH SOL CONTROL	DS	Non-Preferred Diabetic Supply
EASYSSTEP LOW SOL CONTROL	DS	Non-Preferred Diabetic Supply
ELEMENT CONT LIQ NORMAL	DS	Non-Preferred Diabetic Supply
ELEMENT LIQ HIGH	DS	Non-Preferred Diabetic Supply
ELEMENT LIQ LOW	DS	Non-Preferred Diabetic Supply
ELEMENT TES	DS	Non-Preferred Diabetic Supply
ELEMNT COMPA SOL LEVEL 2	DS	Non-Preferred Diabetic Supply
ELEMNT COMPA SOL LEVEL 3	DS	Non-Preferred Diabetic Supply
ELEMNT COMPA TES STRIPS	DS	Non-Preferred Diabetic Supply
EMBRACE CNTR LIQ HIGH	DS	Non-Preferred Diabetic Supply
EMBRACE EVO LIQ LEVEL 1	DS	Non-Preferred Diabetic Supply
EMBRACE EVO LIQ LEVEL 2	DS	Non-Preferred Diabetic Supply
EMBRACE EVO TES	DS	Non-Preferred Diabetic Supply
EMBRACE PRO LIQ GLUCOSE	DS	Non-Preferred Diabetic Supply
EMBRACE PRO TES	DS	Non-Preferred Diabetic Supply
EMBRACE SOL LOW	DS	Non-Preferred Diabetic Supply
EMBRACE TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EVENCARE + TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EVENCARE G2 SOL LOW/HIGH	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
EVENCARE G2 TES	DS	Non-Preferred Diabetic Supply
EVENCARE G3 SOL LOW/HIGH	DS	Non-Preferred Diabetic Supply
EVENCARE SOL LIQ LOW/HIGH	DS	Non-Preferred Diabetic Supply
EVENCARE TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EVOLUTION SOL NORMAL	DS	Non-Preferred Diabetic Supply
EVOLUTION TES AUTOCODE	DS	Non-Preferred Diabetic Supply
EXACTECH TES	DS	Non-Preferred Diabetic Supply
EXACTECH TES R-S-G	DS	Non-Preferred Diabetic Supply
EZ SMART PLS TES BLD GLUC	DS	Non-Preferred Diabetic Supply
EZ SMART TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FIFTY50 GLUC TES 2.0	DS	Non-Preferred Diabetic Supply
FIFTY50 MIS 31GX3/16	DS	Preferred Diabetic Supply
FIFTY50 SOL 2.0	DS	Non-Preferred Diabetic Supply
FORA BLOOD TES GLUCOSE	DS	Non-Preferred Diabetic Supply
FORA CONTROL SOL HIGH	DS	Non-Preferred Diabetic Supply
FORA CONTROL SOL LOW	DS	Non-Preferred Diabetic Supply
FORA CONTROL SOL NORMAL	DS	Non-Preferred Diabetic Supply
FORA D15G TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA D20 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA G20 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA G30/V10 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA GD20 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA GD50 TES	DS	Non-Preferred Diabetic Supply
FORA V10 TES BLD GLUC	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
FORA V12 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA V20 TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORA V30A TES BLD GLUC	DS	Non-Preferred Diabetic Supply
FORACARE GDH SOL HIGH	DS	Non-Preferred Diabetic Supply
FORACARE GDH SOL LOW	DS	Non-Preferred Diabetic Supply
FORACARE GDH SOL NORMAL	DS	Non-Preferred Diabetic Supply
FORACARE TES GD40	DS	Non-Preferred Diabetic Supply
FORACARE TES PREM V10	DS	Non-Preferred Diabetic Supply
FORACARE TES TST N GO	DS	Non-Preferred Diabetic Supply
FORTISCARE SOL CNTL HI	DS	Non-Preferred Diabetic Supply
FORTISCARE SOL CNTL LOW	DS	Non-Preferred Diabetic Supply
FORTISCARE SOL CNTL NML	DS	Non-Preferred Diabetic Supply
FREESTYLE LIQ CONTROL	DS	Non-Preferred Diabetic Supply
FREESTYLE TES	DS	Preferred Diabetic Supply
FREESTYLE TES INSULINX	DS	Preferred Diabetic Supply
FREESTYLE TES LITE	DS	Preferred Diabetic Supply
GE100 BLOOD TES GLUCOSE	DS	Non-Preferred Diabetic Supply
GE100 CONTRL SOL NORMAL	DS	Non-Preferred Diabetic Supply
GENTLE-LET MIS PLATFORM	DS	Preferred Diabetic Supply
GHT TEST TES STRIPS	DS	Non-Preferred Diabetic Supply
GLUC CONTROL LIQ NORMAL	DS	Non-Preferred Diabetic Supply
GLUC CONTROL SOL	DS	Non-Preferred Diabetic Supply
GLUC CONTROL SOL LEVEL 1	DS	Non-Preferred Diabetic Supply
GLUC CONTROL SOL LEVEL 2	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
GLUC CONTROL SOL MID	DS	Non-Preferred Diabetic Supply
GLUC CONTROL SOL NORMAL	DS	Non-Preferred Diabetic Supply
GLUCO PERFEC TES 3	DS	Non-Preferred Diabetic Supply
GLUCOCARD 01 LIQ NORM/HGH	DS	Non-Preferred Diabetic Supply
GLUCOCARD 01 SOL NORMAL	DS	Non-Preferred Diabetic Supply
GLUCOCARD 01 TES PLUS	DS	Non-Preferred Diabetic Supply
GLUCOCARD 01 TES SENSOR	DS	Non-Preferred Diabetic Supply
GLUCOCARD LIQ LEVEL 1	DS	Non-Preferred Diabetic Supply
GLUCOCARD SOL NORMAL	DS	Non-Preferred Diabetic Supply
GLUCOCARD SOL SHINE	DS	Non-Preferred Diabetic Supply
GLUCOCARD TES EXPRESSI	DS	Non-Preferred Diabetic Supply
GLUCOCARD TES SHINE	DS	Non-Preferred Diabetic Supply
GLUCOCARD TES VITAL	DS	Non-Preferred Diabetic Supply
GLUCOCARD TES X-SENSOR	DS	Non-Preferred Diabetic Supply
GLUCOCOM TES	DS	Non-Preferred Diabetic Supply
GLUCOCOM TES HIGH CON	DS	Non-Preferred Diabetic Supply
GLUCOCOM TES NORM CON	DS	Non-Preferred Diabetic Supply
GLUCONAVII TES STRIPS	DS	Non-Preferred Diabetic Supply
GLUCOSE CONT LIQ HIGH/LOW	DS	Non-Preferred Diabetic Supply
GLUCOSE CONT SOL HIGH	DS	Non-Preferred Diabetic Supply
GLUCOSE CONT SOL NORMAL	DS	Non-Preferred Diabetic Supply
GLUCOSE CONT SOL PRECISIO	DS	Non-Preferred Diabetic Supply
GMATE BLOOD TES GLUCOSE	DS	Non-Preferred Diabetic Supply
GMATE CONTRO SOL LEVEL 2	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
HEALTHPRO SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
HEALTHPRO TES STRIPS	DS	Non-Preferred Diabetic Supply
HYPOLANCE KIT LANCING	DS	Preferred Diabetic Supply
IN CONTROL MIS 31GX5MM	DS	Preferred Diabetic Supply
IN CONTROL MIS 31GX6MM	DS	Preferred Diabetic Supply
INCONTROL MIS 29GX12MM	DS	Preferred Diabetic Supply
INFINITY SOL HIGH CON	DS	Non-Preferred Diabetic Supply
INFINITY SOL LOW CON	DS	Non-Preferred Diabetic Supply
INFINITY SOL NORM CON	DS	Non-Preferred Diabetic Supply
INFINITY TES BLD GLUC	DS	Non-Preferred Diabetic Supply
INSULIN PEN MIS 29GX12MM	DS	Preferred Diabetic Supply
INSULIN PEN MIS 31GX8MM	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.3/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.3/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.3/30G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.3/30G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.3/31G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/27G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/28G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/28G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/30G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 0.5/30G	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRG MIS 0.5/31G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/25G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/26G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/27G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/27G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/28G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/28G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/29G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/30G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/30G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 1ML/31G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 2/27.5G	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 28GX1/2"	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 29GX1/2"	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 30GX5/16	DS	Preferred Diabetic Supply
INSULIN SYRG MIS 31GX5/16	DS	Preferred Diabetic Supply
INSUPEN MIS 32GX4MM	DS	Preferred Diabetic Supply
INSUPEN MIS 33GX4MM	DS	Preferred Diabetic Supply
INSUPEN SENS MIS 32GX6MM	DS	Preferred Diabetic Supply
INSUPEN SENS MIS 32GX8MM	DS	Preferred Diabetic Supply
INSUPEN ULTR MIS 29GX12MM	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
INSUPEN ULTR MIS 30GX8MM	DS	Preferred Diabetic Supply
INSUPEN ULTR MIS 31GX6MM	DS	Preferred Diabetic Supply
INSUPEN ULTR MIS 31GX8MM	DS	Preferred Diabetic Supply
KETO-DIASTIX TES	DS	Preferred Diabetic Supply
KETOCARE TES	DS	Preferred Diabetic Supply
KETONE TEST TES	DS	Preferred Diabetic Supply
KETOSTIX TES	DS	Preferred Diabetic Supply
KETOSTIX TES STRIP	DS	Preferred Diabetic Supply
LANCET CARRY MIS CASE	DS	Preferred Diabetic Supply
LANCET DEVIC MIS ADJUST	DS	Preferred Diabetic Supply
LANCET WITH MIS EJECTOR	DS	Preferred Diabetic Supply
LANCETS MICR MIS THIN 33G	DS	Preferred Diabetic Supply
LANCETS MIS	DS	Preferred Diabetic Supply
LANCETS MIS 21G COLR	DS	Preferred Diabetic Supply
LANCETS MIS 23G	DS	Preferred Diabetic Supply
LANCETS MIS 26G	DS	Preferred Diabetic Supply
LANCETS MIS 28G	DS	Preferred Diabetic Supply
LANCETS MIS 30G	DS	Preferred Diabetic Supply
LANCETS MIS 31G	DS	Preferred Diabetic Supply
LANCETS MIS 33G	DS	Preferred Diabetic Supply
LANCETS MIS ORANGE	DS	Preferred Diabetic Supply
LANCETS MIS ORIGINAL	DS	Preferred Diabetic Supply
LANCETS MIS THIN	DS	Preferred Diabetic Supply
LANCETS MIS THIN 26G	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
LANCETS MIS THIN 30G	DS	Preferred Diabetic Supply
LANCETS SUPR MIS THIN 28G	DS	Preferred Diabetic Supply
LANCETS THIN MIS	DS	Preferred Diabetic Supply
LANCETS THIN MIS 26G	DS	Preferred Diabetic Supply
LANCETS THIN MIS 30G	DS	Preferred Diabetic Supply
LANCETS ULTR MIS THIN	DS	Preferred Diabetic Supply
LANCETS ULTR MIS THIN 28G	DS	Preferred Diabetic Supply
LANCING DEVI MIS	DS	Preferred Diabetic Supply
LANCING DEVI MIS ADJUST	DS	Preferred Diabetic Supply
LANCING MIS DEVICE	DS	Preferred Diabetic Supply
LANCING PEN MIS	DS	Preferred Diabetic Supply
LANZO MIS LANCING	DS	Preferred Diabetic Supply
LB LANCET MIS 28G	DS	Preferred Diabetic Supply
LB LANCING MIS DEVICE	DS	Preferred Diabetic Supply
LIBERTY NEXT TES GEN	DS	Non-Preferred Diabetic Supply
LIBERTY TES	DS	Non-Preferred Diabetic Supply
LIFESCAN MIS UNISTIK2	DS	Preferred Diabetic Supply
LITE TOUCH MIS LANC DEV	DS	Preferred Diabetic Supply
LITE TOUCH MIS LANC PEN	DS	Preferred Diabetic Supply
LITE TOUCH MIS LANCETS	DS	Preferred Diabetic Supply
LITETOUCH MIS 29GX12.7	DS	Preferred Diabetic Supply
LITETOUCH MIS 31GX8MM	DS	Preferred Diabetic Supply
LONGS LANCET MIS STANDARD	DS	Preferred Diabetic Supply
LONGS LANCET MIS THIN	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
LONGS LANCET MIS ULTRA TH	DS	Preferred Diabetic Supply
MAXIMA BLOOD TES GLUCOSE	DS	Non-Preferred Diabetic Supply
MAXIMA SOL CONTROL	DS	Non-Preferred Diabetic Supply
MEDICHOICE MIS LANCET	DS	Preferred Diabetic Supply
MEDISENSE LIQ GLUC-KET	DS	Non-Preferred Diabetic Supply
MEDISENSE LIQ GLUC/KET	DS	Non-Preferred Diabetic Supply
MEDLANCE MIS 30G PLUS	DS	Preferred Diabetic Supply
MEDLANCE MIS EXTR 21G	DS	Preferred Diabetic Supply
MEDLANCE MIS LITE 25G	DS	Preferred Diabetic Supply
MEDLANCE MIS PLUS	DS	Preferred Diabetic Supply
MEDLANCE MIS PLUS 30G	DS	Preferred Diabetic Supply
MEDLANCE MIS UNV 21G	DS	Preferred Diabetic Supply
MEDLANCE PLS MIS 0.8MM	DS	Preferred Diabetic Supply
MEDLANCE PLS MIS EXTR 21G	DS	Preferred Diabetic Supply
MEDLANCE PLS MIS LITE 25G	DS	Preferred Diabetic Supply
MEDLANCE PLS MIS UNIV 21G	DS	Preferred Diabetic Supply
MEIJER LANCE MIS COLOR	DS	Preferred Diabetic Supply
MEIJER LANCE MIS UNIV 21G	DS	Preferred Diabetic Supply
MEIJER LANCE MIS UNIV 30G	DS	Preferred Diabetic Supply
MEIJER LANCE MIS UNIVERSA	DS	Preferred Diabetic Supply
MEIJER MIS LANCETS	DS	Preferred Diabetic Supply
MICRO THIN MIS LANC 33G	DS	Preferred Diabetic Supply
MICRODOT CON SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
MICRODOT TES	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
MICROLET MIS LANCETS	DS	Preferred Diabetic Supply
MICROTAINER MIS LANCET	DS	Preferred Diabetic Supply
MINI LANCING MIS DEVICE	DS	Preferred Diabetic Supply
MONOJECTOR MIS END CAPS	DS	Preferred Diabetic Supply
MONOLET MIS LANCETS	DS	Preferred Diabetic Supply
MONOLET OPD MIS LANCETS	DS	Preferred Diabetic Supply
MONOLETTOR MIS LANCETS	DS	Preferred Diabetic Supply
MULTI-LANCET KIT DEVICE	DS	Preferred Diabetic Supply
MULTI-LANCET MIS DEVICE	DS	Preferred Diabetic Supply
MYGLUCOHEALT MIS LANC 30G	DS	Preferred Diabetic Supply
MYGLUCOHEALT SOL LO/NL/HI	DS	Non-Preferred Diabetic Supply
MYGLUCOHEALT TES BLD GLUC	DS	Non-Preferred Diabetic Supply
NEUTEK 2TEK SOL CONTROL	DS	Non-Preferred Diabetic Supply
NEUTEK 2TEK TES STRIPS	DS	Non-Preferred Diabetic Supply
NEXGEN TES	DS	Non-Preferred Diabetic Supply
NEXGEN TES NORM CON	DS	Non-Preferred Diabetic Supply
NOVA MAX GLU LIQ /KET CON	DS	Non-Preferred Diabetic Supply
NOVA MAX TES GLUCOSE	DS	Non-Preferred Diabetic Supply
NOVA SAFETY MIS LANC 23G	DS	Preferred Diabetic Supply
NOVA SAFETY MIS LANC 28G	DS	Preferred Diabetic Supply
NOVA SURE MIS LANCETS	DS	Preferred Diabetic Supply
NOVA SUREFLX MIS LANC DEV	DS	Preferred Diabetic Supply
NOVOFINE AUT MIS 30GX8MM	DS	Preferred Diabetic Supply
NOVOFINE MIS 30GX8MM	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
NOVOFINE MIS 32GX6MM	DS	Preferred Diabetic Supply
NOVOFINE PLS MIS 32GX4MM	DS	Preferred Diabetic Supply
NOVOPEN ECHO MIS	DS	Preferred Diabetic Supply
NOVOTWIST MIS 32GX5MM	DS	Preferred Diabetic Supply
ON CALL EXPR SOL GLUCOSE	DS	Non-Preferred Diabetic Supply
ON CALL LANC MIS DEVICE	DS	Preferred Diabetic Supply
ON CALL MIS LANCETS	DS	Preferred Diabetic Supply
ON CALL PLUS MIS LANC DEV	DS	Preferred Diabetic Supply
ON CALL PLUS MIS LANCETS	DS	Preferred Diabetic Supply
ON CALL PLUS SOL CONTROL	DS	Non-Preferred Diabetic Supply
ON CALL PLUS TES BLD GLUC	DS	Non-Preferred Diabetic Supply
ON CALL TES EXPRESS	DS	Non-Preferred Diabetic Supply
ON CALL VIVD SOL CONTROL	DS	Non-Preferred Diabetic Supply
ON CALL VIVD TES BLD GLUC	DS	Non-Preferred Diabetic Supply
ON-THE-GO MIS LANC 30G	DS	Preferred Diabetic Supply
ONETOUCH FP MIS LANCETS	DS	Preferred Diabetic Supply
ONETOUCH MIS 30G	DS	Preferred Diabetic Supply
ONETOUCH MIS COMBO	DS	Preferred Diabetic Supply
ONETOUCH MIS LANC DEV	DS	Preferred Diabetic Supply
ONETOUCH MIS LANCETS	DS	Preferred Diabetic Supply
ONETOUCH SOL ULT CONT	DS	Non-Preferred Diabetic Supply
ONETOUCH SOL VERIO	DS	Non-Preferred Diabetic Supply
ONETOUCH SOL VERIO-HI	DS	Non-Preferred Diabetic Supply
ONETOUCH TES ULTRA BL	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
ONETOUCH TES VERIO	DS	Preferred Diabetic Supply
ONETOUCH US MIS LANCETS	DS	Preferred Diabetic Supply
OPTIUM TES	DS	Non-Preferred Diabetic Supply
OPTIUMEZ TES	DS	Non-Preferred Diabetic Supply
OPTUMRX CONT SOL LEVEL1/2	DS	Non-Preferred Diabetic Supply
OPTUMRX TES BLD GLUC	DS	Non-Preferred Diabetic Supply
PC LANCETS MIS 30G	DS	Preferred Diabetic Supply
PEN NEEDLE MIS 29GX1/2"	DS	Preferred Diabetic Supply
PEN NEEDLE MIS 32GX4MM	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 29GX1/2"	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 29GX12.7	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 29GX12MM	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 30GX5/16	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX1/4"	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX3/16	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX5/16	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX5MM	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX6MM	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 31GX8MM	DS	Preferred Diabetic Supply
PEN NEEDLES MIS 32GX4MM	DS	Preferred Diabetic Supply
PENLET II KIT BLOOD	DS	Preferred Diabetic Supply
PENLET II MIS REPL CAP	DS	Preferred Diabetic Supply
PERFECT 28G MIS LANCETS	DS	Preferred Diabetic Supply
PERFECT 30G MIS LANCETS	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
PHARMACY COU MIS LANCETS	DS	Preferred Diabetic Supply
POCKETCHEM SOL EZ	DS	Non-Preferred Diabetic Supply
POCKETCHEM TES EZ	DS	Non-Preferred Diabetic Supply
PRECISION LIQ CONTROL	DS	Preferred Diabetic Supply
PRECISION LIQ GLUC/KET	DS	Preferred Diabetic Supply
PRECISION LIQ NRML/MID	DS	Non-Preferred Diabetic Supply
PRECISION MIS 28G	DS	Preferred Diabetic Supply
PRECISION MIS 28G(T)	DS	Preferred Diabetic Supply
PRECISION PT TES OF CARE	DS	Preferred Diabetic Supply
PRECISION TES PCX	DS	Preferred Diabetic Supply
PRECISION TES PCX PLUS	DS	Preferred Diabetic Supply
PRECISION TES QID	DS	Preferred Diabetic Supply
PRECISION TES SOF-TACT	DS	Preferred Diabetic Supply
PRECISION TES XTRA	DS	Preferred Diabetic Supply
PRODIGY MIS 28G	DS	Preferred Diabetic Supply
PRODIGY MIS LANC DEV	DS	Preferred Diabetic Supply
PRODIGY NO TES CODING	DS	Non-Preferred Diabetic Supply
PRODIGY SOL HIGH	DS	Non-Preferred Diabetic Supply
PRODIGY SOL LOW	DS	Non-Preferred Diabetic Supply
PSS SAFE LAN MIS	DS	Preferred Diabetic Supply
PSS SEL LANC MIS	DS	Preferred Diabetic Supply
PSS SEL PLAT MIS	DS	Preferred Diabetic Supply
PTS PANELS TES GLUCOSE	DS	Non-Preferred Diabetic Supply
PX LANCETS MIS ULT THIN	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
QC LANCETS MIS 28G	DS	Preferred Diabetic Supply
QC LANCETS MIS 30G	DS	Preferred Diabetic Supply
QC LANCING MIS DEVICE	DS	Preferred Diabetic Supply
QUICKTEK LIQ SOLUTION	DS	Non-Preferred Diabetic Supply
QUICKTEK TES	DS	Non-Preferred Diabetic Supply
QUINTET AC TES BLD GLUC	DS	Non-Preferred Diabetic Supply
QUINTET CONT SOL HGH/NORM	DS	Non-Preferred Diabetic Supply
QUINTET TES BLD GLUC	DS	Non-Preferred Diabetic Supply
RA PEN NEEDL MIS 31GX3/16	DS	Preferred Diabetic Supply
RAPID-SAFE MIS LANCING	DS	Preferred Diabetic Supply
REFUAH PLUS SOL CONTROL	DS	Non-Preferred Diabetic Supply
REFUAH PLUS TES BLD GLUC	DS	Non-Preferred Diabetic Supply
RELION KIT LANCING	DS	Preferred Diabetic Supply
RELION LANCI MIS DEVICE	DS	Preferred Diabetic Supply
REVEAL TES BLD GLUC	DS	Non-Preferred Diabetic Supply
RIGHTEST ALT MIS ADAPTOR	DS	Preferred Diabetic Supply
RIGHTEST LIQ HIGH CON	DS	Non-Preferred Diabetic Supply
RIGHTEST LIQ NORM CON	DS	Non-Preferred Diabetic Supply
RIGHTEST MIS GD500	DS	Preferred Diabetic Supply
RIGHTEST TES GS100	DS	Non-Preferred Diabetic Supply
RIGHTEST TES GS300	DS	Non-Preferred Diabetic Supply
RIGHTEST TES GS550	DS	Non-Preferred Diabetic Supply
SELECT-LITE KIT DEV/LANC	DS	Preferred Diabetic Supply
SELECT-LITE MIS LANC DEV	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
SHOPKO LANC MIS DEVICE	DS	Preferred Diabetic Supply
SIMPLE DIAG MIS LANCING	DS	Preferred Diabetic Supply
SMART SENSE TES TEST	DS	Non-Preferred Diabetic Supply
SMARTEST SOL CONTROL	DS	Non-Preferred Diabetic Supply
SMARTEST TES BLD GLUC	DS	Non-Preferred Diabetic Supply
SOFTCLIX LAN MIS DEVICE	DS	Preferred Diabetic Supply
SOLUS V2 MIS LANC DEV	DS	Preferred Diabetic Supply
SOLUS V2 SOL HIGH	DS	Non-Preferred Diabetic Supply
SOLUS V2 SOL LOW	DS	Non-Preferred Diabetic Supply
SOLUS V2 TES AUDIBLE	DS	Non-Preferred Diabetic Supply
STERILANCE MIS 1.8MM	DS	Preferred Diabetic Supply
SUPREME II LIQ HIGH/LOW	DS	Non-Preferred Diabetic Supply
SUPREME TES	DS	Non-Preferred Diabetic Supply
SURE COMFORT MIS 29GX1/2"	DS	Preferred Diabetic Supply
SURE COMFORT MIS 30GX5/16	DS	Preferred Diabetic Supply
SURE COMFORT MIS 31GX3/16	DS	Preferred Diabetic Supply
SURE COMFORT MIS 32GX5/32	DS	Preferred Diabetic Supply
SURE COMFORT MIS 32GX6MM	DS	Preferred Diabetic Supply
SURE COMFORT MIS LANC PEN	DS	Preferred Diabetic Supply
SURE EDGE TES	DS	Non-Preferred Diabetic Supply
SURE-FINE MIS 29GX1/2"	DS	Preferred Diabetic Supply
SURE-FINE MIS 31GX3/16	DS	Preferred Diabetic Supply
SURE-PEN MIS	DS	Preferred Diabetic Supply
SURE-TEST TES EASYPLUS	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
SURECHEK TES BLD GLUC	DS	Non-Preferred Diabetic Supply
SURESTEP GLU SOL	DS	Non-Preferred Diabetic Supply
SURESTEP GLU SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
SURESTEP PRO TES	DS	Preferred Diabetic Supply
SURESTEP PRO TES HIGH CON	DS	Non-Preferred Diabetic Supply
SURESTEP PRO TES LOW CON	DS	Non-Preferred Diabetic Supply
SURESTEP PRO TES NORM CON	DS	Non-Preferred Diabetic Supply
SURESTEP SOL CONTROL	DS	Non-Preferred Diabetic Supply
TAI DOC SOL NORM CON	DS	Non-Preferred Diabetic Supply
TELCARE SOL LEVEL1/2	DS	Non-Preferred Diabetic Supply
TELCARE TES BLD GLUC	DS	Non-Preferred Diabetic Supply
TGT LANCET MIS ALTERNAT	DS	Preferred Diabetic Supply
TGT LANCING MIS ADV DEV	DS	Preferred Diabetic Supply
TGT LANCING MIS DEVICE	DS	Preferred Diabetic Supply
THIN LANCETS MIS	DS	Preferred Diabetic Supply
THIN LANCETS MIS 26G	DS	Preferred Diabetic Supply
THIN LANCETS MIS 30G	DS	Preferred Diabetic Supply
THINLETS GP MIS 26G	DS	Preferred Diabetic Supply
THINLETS MIS 28G(T)	DS	Preferred Diabetic Supply
1ST TIER UNI MIS 29GX12MM	DS	Preferred Diabetic Supply
1ST TIER UNI MIS 31GX5MM	DS	Preferred Diabetic Supply
1ST TIER UNI MIS 31GX6MM	DS	Preferred Diabetic Supply
1ST TIER UNI MIS 31GX8MM	DS	Preferred Diabetic Supply
TRUE METRIX SOL LEVEL 1	DS	Non-Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
TRUE METRIX SOL LEVEL 2	DS	Non-Preferred Diabetic Supply
TRUE METRIX SOL LEVEL 3	DS	Non-Preferred Diabetic Supply
TRUE METRIX TES GLUCOSE	DS	Non-Preferred Diabetic Supply
TRUECONTROL LIQ LEVEL 0	DS	Non-Preferred Diabetic Supply
TRUECONTROL LIQ LEVEL 1	DS	Non-Preferred Diabetic Supply
TRUEDRAW MIS LANC DEV	DS	Preferred Diabetic Supply
TRUETEST LIQ LEVEL 1	DS	Non-Preferred Diabetic Supply
TRUETEST LIQ LEVEL 2	DS	Non-Preferred Diabetic Supply
TRUETEST LIQ LEVEL 3	DS	Non-Preferred Diabetic Supply
TRUETRACK TES	DS	Non-Preferred Diabetic Supply
TRUETRACK TES BLD GLUC	DS	Non-Preferred Diabetic Supply
ULTI-LANCE MIS CLR TIP	DS	Preferred Diabetic Supply
ULTIMA TES	DS	Non-Preferred Diabetic Supply
ULTRALANCE MIS 1.8MM	DS	Preferred Diabetic Supply
ULTRATRAK TES ULTIMATE	DS	Non-Preferred Diabetic Supply
ULTRATRK PRO SOL	DS	Non-Preferred Diabetic Supply
ULTRATRK PRO SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
ULTRATRK PRO TES	DS	Non-Preferred Diabetic Supply
ULTRATRK ULT SOL HIGH/LOW	DS	Non-Preferred Diabetic Supply
UNIFINE PNTP MIS 29GX1/2"	DS	Preferred Diabetic Supply
UNIFINE PNTP MIS 29GX12MM	DS	Preferred Diabetic Supply
UNIFINE PNTP MIS 31GX3/16	DS	Preferred Diabetic Supply
UNIFINE PNTP MIS 31GX5MM	DS	Preferred Diabetic Supply
UNIFINE PNTP MIS 31GX6MM	DS	Preferred Diabetic Supply

Drug Name	Drug Tier	Requirements/Limits
UNISTIK 1 MIS 2.4MM	DS	Preferred Diabetic Supply
UNISTIK 1 MIS 3.0MM	DS	Preferred Diabetic Supply
UNISTIK 2 MIS	DS	Preferred Diabetic Supply
UNISTIK 2 MIS 1.8MM	DS	Preferred Diabetic Supply
UNISTIK 2 MIS 2.4MM	DS	Preferred Diabetic Supply
UNISTIK 2 MIS COMFORT	DS	Preferred Diabetic Supply
UNISTIK 2 MIS EXTRA	DS	Preferred Diabetic Supply
UNISTIK 2 MIS NEONATAL	DS	Preferred Diabetic Supply
UNISTIK 2 MIS NORMAL	DS	Preferred Diabetic Supply
UNISTIK 2 MIS SUPER	DS	Preferred Diabetic Supply
UNISTIK 3 MIS 1.8MM	DS	Preferred Diabetic Supply
UNISTIK 3 MIS COMFORT	DS	Preferred Diabetic Supply
UNISTIK 3 MIS EXTRA	DS	Preferred Diabetic Supply
UNISTIK 3 MIS NEONATAL	DS	Preferred Diabetic Supply
UNISTIK 3 MIS NORMAL	DS	Preferred Diabetic Supply
UNISTIK CZT MIS COMFORT	DS	Preferred Diabetic Supply
UNISTIK CZT MIS NORMAL	DS	Preferred Diabetic Supply
UNISTRIP1 TES GENERIC	DS	Non-Preferred Diabetic Supply
VANTAGE LANC MIS DEVICE	DS	Preferred Diabetic Supply
VICTORY SOL CONTROL	DS	Non-Preferred Diabetic Supply
VICTORY TES AGM-4000	DS	Non-Preferred Diabetic Supply
VOCAL POINT TES BLD GLUC	DS	Non-Preferred Diabetic Supply
WAVESENSE TES PRESTO	DS	Non-Preferred Diabetic Supply

CALCIUM RECEPTOR ANTAGONISTS

<i>cinacalcet hcl tab 30 mg (base equiv)</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	1	
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	1	
SENSIPAR TAB 30MG	2	
SENSIPAR TAB 60MG	2	
SENSIPAR TAB 90MG	2	
CALCIUM REGULATORS, BISPHOSPHONATES		
<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 40 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
FOSAMAX + D TAB 70-2800	3	
FOSAMAX + D TAB 70-5600	3	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	
<i>risedronate sodium tab 5 mg</i>	1	
<i>risedronate sodium tab 30 mg</i>	1	
<i>risedronate sodium tab 35 mg</i>	1	
<i>risedronate sodium tab 150 mg</i>	1	
<i>risedronate sodium tab delayed release 35 mg</i>	1	
CALCIUM REGULATORS, CALCITONINS		
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	
CARNITINE DEFICIENCY AGENTS		
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
CONTRACEPTIVES, BIPHASIC		
<i>azurette tab 28 day</i>	0	\$0
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	\$0
<i>kariva tab 28 day</i>	0	\$0
LO LOESTRIN TAB 1-10-10	3	
<i>pimtrea tab</i>	0	\$0
<i>viorele tab</i>	0	\$0
CONTRACEPTIVES, CONTINUOUS		
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	0	\$0
CONTRACEPTIVES, EMERGENCY CONTRACEPTION		
<i>aftera tab 1.5mg</i>	0	\$0
<i>econtra ez tab 1.5mg</i>	0	\$0
ELLA TAB 30MG	0	\$0
<i>fallback tab 1.5mg</i>	0	\$0
<i>levonorgestrel tab 1.5 mg</i>	0	\$0
<i>my way tab 1.5mg</i>	0	\$0
<i>next choice tab 1.5mg</i>	0	\$0

Drug Name	Drug Tier	Requirements/Limits
<i>opcicon tab 1.5mg</i>	0	\$0
PLAN B TAB 1.5MG	0	\$0
<i>take action tab 1.5mg</i>	0	\$0
CONTRACEPTIVES, EXTENDED CYCLE		
<i>amethia lo tab</i>	0	\$0
<i>amethia tab</i>	0	\$0
<i>ashlyna tab</i>	0	\$0
<i>camrese lo tab</i>	0	\$0
<i>camrese tab</i>	0	\$0
<i>daysee tab</i>	0	\$0
<i>fayosim tab</i>	0	\$0
<i>introvale tab</i>	0	\$0
<i>jolessa tab</i>	0	\$0
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	\$0
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	\$0
QUARTETTE TAB	3	
<i>rivelsa tab</i>	0	\$0
CONTRACEPTIVES, FOUR PHASE		
NATAZIA TAB	3	
CONTRACEPTIVES, MISCELLANEOUS		
CONCEPTROL GEL 4%	0	\$0
GYNOL II GEL 3%	0	\$0
SHUR-SEAL GEL 2%	0	\$0
<i>vcf vaginal gel contrace</i>	0	\$0
CONTRACEPTIVES, MONOPHASIC, 20 mcg Estrogen		
<i>aubra tab 0.1-0.02</i>	0	\$0
<i>aviane tab</i>	0	\$0
BEYAZ TAB	3	
<i>delyla tab 0.1-0.02</i>	0	\$0
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	\$0
FALESSA KIT	3	
<i>falmina tab</i>	0	\$0
<i>gianvi tab 3-0.02mg</i>	0	\$0
<i>junel 1/20 tab</i>	0	\$0
<i>junel fe tab 1/20</i>	0	\$0
<i>larin 24 tab fe 1/20</i>	0	\$0
<i>larin fe tab 1/20</i>	0	\$0
<i>larin tab 1/20</i>	0	\$0
<i>lessina tab</i>	0	\$0
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	\$0
<i>loryna tab 3-0.02mg</i>	0	\$0

Drug Name	Drug Tier	Requirements/Limits
<i>lutera tab</i>	0	\$0
<i>mibelas 24 chw fe</i>	0	\$0
<i>microgestin tab fe 1/20</i>	0	\$0
MINASTRIN 24 CHW FE	3	
<i>nikki tab 3-0.02mg</i>	0	\$0
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	0	\$0
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	\$0
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	0	\$0
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	0	\$0
<i>orsythia tab</i>	0	\$0
<i>sronyx tab</i>	0	\$0
<i>tarina fe tab 1/20</i>	0	\$0
CONTRACEPTIVES, MONOPHASIC, 25 mcg Estrogen		
<i>layolis fe chw</i>	0	\$0
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	\$0
CONTRACEPTIVES, MONOPHASIC, 30 mcg Estrogen		
<i>altavera tab</i>	0	\$0
<i>apri tab</i>	0	\$0
<i>chateal tab 0.15/30</i>	0	\$0
<i>cryselle-28 tab 28 tabs</i>	0	\$0
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	\$0
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	\$0
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	\$0
<i>elinest tab</i>	0	\$0
<i>emoquette tab</i>	0	\$0
<i>enskyce tab</i>	0	\$0
<i>junel 1.5/30 tab</i>	0	\$0
<i>junel fe tab 1.5/30</i>	0	\$0
<i>kurvelo tab 0.15/30</i>	0	\$0
<i>larin fe tab 1.5/30</i>	0	\$0
<i>larin tab 1.5/30</i>	0	\$0
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	\$0
<i>levora-28 tab 0.15/30</i>	0	\$0
<i>low-ogestrel tab</i>	0	\$0
<i>marlissa tab 0.15/30</i>	0	\$0
<i>microgestin tab 1.5/30</i>	0	\$0
<i>microgestin tab fe1.5/30</i>	0	\$0

Drug Name	Drug Tier	Requirements/Limits
<i>ocella tab 3-0.03mg</i>	0	\$0
<i>portia-28 tab</i>	0	\$0
<i>reclipsen tab</i>	0	\$0
SAFYRAL TAB	3	
<i>syeda tab 3-0.03mg</i>	0	\$0
<i>tydemy tab</i>	0	\$0
<i>zarah tab 3-0.03mg</i>	0	\$0
CONTRACEPTIVES, MONOPHASIC, 35 mcg Estrogen		
<i>alyacen tab 1/35</i>	0	\$0
<i>balziva tab</i>	0	\$0
<i>briellyn tab</i>	0	\$0
<i>cyclafem tab 1/35</i>	0	\$0
<i>dasetta tab 1/35</i>	0	\$0
<i>estarylla tab 0.25-35</i>	0	\$0
<i>kelnor tab 1/35</i>	0	\$0
<i>mono-linyah tab 0.25-35</i>	0	\$0
<i>necon tab 0.5/35</i>	0	\$0
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	\$0
<i>nortrel tab 0.5/35</i>	0	\$0
<i>nortrel tab 1/35</i>	0	\$0
<i>philith tab 0.4-35</i>	0	\$0
<i>pirmella tab 1/35</i>	0	\$0
<i>previfem tab</i>	0	\$0
<i>sprintec 28 tab 28 day</i>	0	\$0
<i>vyfemla tab 0.4-35</i>	0	\$0
<i>wera tab 0.5/35</i>	0	\$0
<i>wymzya fe chw 0.4mg-35</i>	0	\$0
<i>zovia 1/35e tab</i>	0	\$0
CONTRACEPTIVES, MONOPHASIC, 50 mcg Estrogen		
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	0	\$0
<i>kelnor 1/50 tab</i>	0	\$0
<i>ogestrel tab</i>	0	\$0
CONTRACEPTIVES, PROGESTIN ONLY		
<i>camila tab 0.35mg</i>	0	\$0
<i>deblitane tab 0.35mg</i>	0	\$0
<i>errin tab 0.35mg</i>	0	\$0
<i>heather tab 0.35mg</i>	0	\$0
<i>jencycla tab 0.35mg</i>	0	\$0
<i>lyza tab 0.35mg</i>	0	\$0
<i>nora-be tab 0.35mg</i>	0	\$0
<i>norethindrone tab 0.35 mg</i>	0	\$0
<i>norlyroc tab 0.35mg</i>	0	\$0
<i>sharobel tab 0.35mg</i>	0	\$0

Drug Name	Drug Tier	Requirements/Limits
CONTRACEPTIVES, TRANSDERMAL		
<i>xulane dis 150-35</i>	0	\$0
CONTRACEPTIVES, TRIPHASIC		
<i>alyacen tab 7/7/7</i>	0	\$0
<i>aranelle tab</i>	0	\$0
<i>caziant pak</i>	0	\$0
<i>cyclafem tab 7/7/7</i>	0	\$0
<i>dasetta tab 7/7/7</i>	0	\$0
<i>enpresse-28 tab</i>	0	\$0
<i>leena tab</i>	0	\$0
<i>levonest tab</i>	0	\$0
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	\$0
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	\$0
<i>nortrel tab 7/7/7</i>	0	\$0
<i>pirmella tab 7/7/7</i>	0	\$0
<i>tilia fe tab</i>	0	\$0
<i>tri-estaryll tab</i>	0	\$0
<i>tri-legest tab fe</i>	0	\$0
<i>tri-linyah tab</i>	0	\$0
<i>tri-lo tab estaryll</i>	0	\$0
<i>tri-lo- tab marzia</i>	0	\$0
<i>tri-lo- tab sprintec</i>	0	\$0
<i>tri-sprintec tab</i>	0	\$0
<i>trivora-28 tab</i>	0	\$0
<i>velivet pak</i>	0	\$0
CONTRACEPTIVES, VAGINAL		
NUVARING MIS	0	\$0
ENDOMETRIOSIS		
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	1	
ORILISSA TAB 150MG	5	SP, QL (30 tabs per 30 days), PA
ORILISSA TAB 200MG	5	SP, QL (60 tabs per 30 days), PA
SYNAREL SOL 2MG/ML	2	
ESTROGEN/PROGESTIN, ORAL		
ANGELIQ TAB 0.5-1MG	3	
ANGELIQ TAB 0.25-0.5	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey lo tab 0.5-0.1</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
<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	
PREFEST TAB	3	
PREMPHASE TAB	2	
PREMPRO TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-5	2	
ESTROGEN/PROGESTIN, TRANSDERMAL		
CLIMARA PRO DIS WEEKLY	3	
COMBIPATCH DIS	3	
COMBIPATCH DIS .05/.14	3	
ESTROGEN/SELECTIVE ESTROGEN RECEPTOR MODULATOR COMBINATIONS		
DUAVEE TAB 0.45-20	2	
ESTROGENS, ORAL		
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
MENEST TAB 0.3MG	3	
MENEST TAB 0.625MG	3	
MENEST TAB 1.25MG	3	
PREMARIN TAB 0.3MG	2	
PREMARIN TAB 0.9MG	2	
PREMARIN TAB 0.45MG	2	
PREMARIN TAB 0.625MG	2	
PREMARIN TAB 1.25MG	2	
ESTROGENS, TRANSDERMAL		
DIVIGEL GEL 0.5MG	3	
DIVIGEL GEL 0.25MG	3	
DIVIGEL GEL 1MG/GM	3	
ELESTRIN GEL 0.06%	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	2	
MENOSTAR DIS 14MCG	3	
ESTROGENS, VAGINAL		
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
ESTRING MIS 2MG	3	
FEMRING MIS 0.1MG/24	3	
FEMRING MIS 0.05/24H	3	
PREMARIN VAG CRE 0.625MG	2	
<i>yuvaferm tab 10mcg</i>	1	
FERTILITY REGULATORS, OVULATION STIMULANTS, SYNTHETIC		
<i>clomiphene citrate tab 50 mg</i>	1	refer to plan benefits
GLUCOCORTICOIDS		
<i>cortisone acetate tab 25 mg</i>	1	
DEXAMETHASON CON 1MG/ML	3	
<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	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<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 (35)</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	3	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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 10 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	1	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	1	
PREDNISON CON 5MG/ML	3	
<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	
GLUCOSE ELEVATING AGENTS		
GLUCAGEN INJ HYPOKIT	2	
GLUCAGON KIT 1MG	2	
HYPERPARATHYROID TREATMENT, VITAMIN D ANALOGS		
<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>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
MISCELLANEOUS		
<i>cabergoline tab 0.5 mg</i>	1	
CYSTADANE POW	2	
CYSTAGON CAP 50MG	4	SP, PA
CYSTAGON CAP 150MG	4	SP, PA
GALAFOLD CAP 123MG	5	SP, PA
<i>methylergonovine maleate tab 0.2 mg</i>	1	
PHENYLKETONURIA TREATMENT AGENTS		
KUVAN POW 100MG	4	SP, PA
KUVAN POW 500MG	4	SP, PA
KUVAN TAB 100MG	4	SP, PA
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	3	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</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	
POTASSIUM-REMOVING AGENTS		
<i>kionex sus 15gm/60</i>	1	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	1	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	1	
<i>sps sus 15gm/60</i>	1	
PROGESTINS, ORAL		
<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 micronized cap 100 mg</i>	1	
<i>progesterone micronized cap 200 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PROGESTINS, VAGINAL		
CRINONE GEL 4% VAG	3	
CRINONE GEL 8% VAG	3	
ENDOMETRIN SUP 100MG	3	refer to plan benefits
SELECTIVE ESTROGEN RECEPTOR MODULATORS		
OSPHENA TAB 60MG	3	
<i>raloxifene hcl tab 60 mg</i>	1	AGE (females min age 35 years covered at \$0)
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	
SSKI SOL 1GM/ML	3	
THYROID AGENTS, THYROID SUPPLEMENTS		
CYTOMEL TAB 5MCG	3	
CYTOMEL TAB 25MCG	3	
CYTOMEL TAB 50MCG	3	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</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	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	

Drug Name	Drug Tier	Requirements/Limits
SYNTHROID TAB 75MCG	2	
SYNTHROID TAB 88MCG	2	
SYNTHROID TAB 100MCG	2	
SYNTHROID TAB 112MCG	2	
SYNTHROID TAB 125MCG	2	
SYNTHROID TAB 137MCG	2	
SYNTHROID TAB 150MCG	2	
SYNTHROID TAB 175MCG	2	
SYNTHROID TAB 200MCG	2	
SYNTHROID TAB 300MCG	2	
TIROSINT CAP 13MCG	3	
TIROSINT CAP 25MCG	3	
TIROSINT CAP 50MCG	3	
TIROSINT CAP 75MCG	3	
TIROSINT CAP 88MCG	3	
TIROSINT CAP 100MCG	3	
TIROSINT CAP 112MCG	3	
TIROSINT CAP 125MCG	3	
TIROSINT CAP 137MCG	3	
TIROSINT CAP 150MCG	3	
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 137mcg</i>	1	
<i>unithroid tab 150mcg</i>	1	
<i>unithroid tab 175mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	
UREA CYCLE DISORDERS		
BUPHENYL TAB 500MG	4	SP, PA
RAVICTI LIQ 1.1GM/ML	4	SP, PA
<i>sodium phenylbutyrate tab 500 mg</i>	4	SP, PA
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE PAK 45-15MG	5	SP, PA
JYNARQUE PAK 60-30MG	5	SP, PA
JYNARQUE PAK 90-30MG	5	SP, PA
SAMSCA TAB 15MG	4	SP, PA
SAMSCA TAB 30MG	4	SP, PA
VASOPRESSINS		
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	2	

GASTROINTESTINAL

ANTIDIARRHEALS

<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>loperamide hcl cap 2 mg</i>	1	
MYTESI TAB 125MG	3	

ANTIEMETICS

<i>aprepitant capsule 40 mg</i>	1	
<i>aprepitant capsule 80 mg</i>	1	
<i>aprepitant capsule 125 mg</i>	1	
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1	QL (1 pak per 15 days)
CESAMET CAP 1MG	3	
<i>compro sup 25mg</i>	1	
DICLEGIS TAB 10-10MG	3	
<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	
EMEND CAP 40MG	2	
EMEND CAP 80MG	2	
EMEND CAP 125MG	2	
EMEND TRIPAC PAK 80 & 125	2	QL (1 pak per 15 days)
<i>granisetron hcl tab 1 mg</i>	1	
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</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	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	
<i>ondansetron hcl tab 4 mg</i>	1	
<i>ondansetron hcl tab 8 mg</i>	1	
<i>ondansetron hcl tab 24 mg</i>	1	
<i>ondansetron orally disintegrating tab 4 mg</i>	1	
<i>ondansetron orally disintegrating tab 8 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>phenadoz sup 12.5mg</i>	1	
<i>phenadoz sup 25mg</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>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 syrup 6.25 mg/5ml</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	
<i>promethegan sup 12.5mg</i>	1	
<i>promethegan sup 25mg</i>	1	
<i>promethegan sup 50mg</i>	1	
SANCUSO DIS 3.1MG	3	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
TRANSDERM-SC DIS 1.5MG	3	
<i>trimethobenzamide hcl cap 300 mg</i>	1	
ZUPLENZ MIS 4MG	3	
ZUPLENZ MIS 8MG	3	
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	
GLYCOPYRROLA TAB 1.5MG	3	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>propantheline bromide tab 15 mg</i>	1	
CHOLELITHOLYTICS		
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</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 20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
<i>nizatidine oral soln 15 mg/ml</i>	1	
<i>ranitidine hcl cap 150 mg</i>	1	
<i>ranitidine hcl cap 300 mg</i>	1	
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	1	
<i>ranitidine hcl tab 150 mg</i>	1	
<i>ranitidine hcl tab 300 mg</i>	1	
INFLAMMATORY BOWEL DISEASE, ORAL AGENTS		
APRISO CAP 0.375GM	2	
<i>balsalazide disodium cap 750 mg</i>	1	
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	1	
DIPENTUM CAP 250MG	3	
<i>mesalamine cap dr 400 mg</i>	1	
<i>mesalamine tab delayed release 1.2 gm</i>	1	
<i>mesalamine tab delayed release 800 mg</i>	1	
PENTASA CAP 250MG CR	3	
PENTASA CAP 500MG CR	3	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
UCERIS TAB 9MG	3	
INFLAMMATORY BOWEL DISEASE, RECTAL AGENTS		
<i>colocort ene 100mg</i>	1	
CORTIFOAM AER 90MG	3	
<i>hydrocortisone enema 100 mg/60ml</i>	1	
<i>mesalamine enema 4 gm</i>	1	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	1	QL (28 per 28 days)
<i>mesalamine suppos 1000 mg</i>	1	
SFROWASA ENE 4GM	3	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION/CHRONIC IDIOPATHIC CONSTIPATION		
AMITIZA CAP 8MCG	3	
AMITIZA CAP 24MCG	3	
LINZESS CAP 72MCG	3	
LINZESS CAP 145MCG	3	
LINZESS CAP 290MCG	3	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	1	
<i>alose tron hcl tab 1 mg (base equiv)</i>	1	
LAXATIVES		
<i>constulose sol 10gm/15</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-c sol</i>	0	\$0
<i>gavilyte-g sol</i>	0	\$0
<i>gavilyte-h kit</i>	0	\$0
<i>gavilyte-n sol flav pk</i>	0	\$0
KRISTALOSE PAK 10GM	3	
KRISTALOSE PAK 20GM	3	
LACTULOSE PAK 10GM	3	
<i>lactulose solution 10 gm/15ml</i>	1	
MOVIPREP SOL	2	
OSMOPREP TAB 1.5GM	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	0	\$0
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	0	\$0
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	0	\$0
PREPOPIK PAK	3	
SUPREP BOWEL SOL PREP KIT	3	
<i>trilyte sol</i>	0	\$0
MISCELLANEOUS		
CARAFATE SUS 1GM/10ML	3	
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
OCALIVA TAB 5MG	5	SP, PA
OCALIVA TAB 10MG	5	SP, PA
RECTIV OIN 0.4%	3	
<i>sucralfate tab 1 gm</i>	1	
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
ZENPEP CAP 3000UNIT	3	
ZENPEP CAP 5000UNIT	3	
ZENPEP CAP 10000UNT	3	
ZENPEP CAP 15000UNT	3	

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 20000UNT	3	
ZENPEP CAP 25000UNT	3	
ZENPEP CAP 40000	3	
PROSTAGLANDINS		
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
PROTON PUMP INHIBITORS		
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	
<i>lansoprazole cap delayed release 15 mg</i>	1	
<i>lansoprazole cap delayed release 30 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	1	
NEXIUM GRA 2.5MG DR	3	
NEXIUM GRA 5MG DR	3	
NEXIUM GRA 10MG DR	3	
NEXIUM GRA 20MG DR	3	
NEXIUM GRA 40MG DR	3	
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
PREVACID TAB 15MG STB	3	
PREVACID TAB 30MG STB	3	
PRILOSEC POW 2.5MG	3	
PRILOSEC POW 10MG	3	
PROTONIX PAK	3	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
SALIVA STIMULANTS		
<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	
STEROIDS, RECTAL		
<i>ana-lex kit</i>	1	
<i>lidocaine-hydrocortisone acetate rectal cream kit 2-2%</i>	1	
<i>lidocaine-hydrocortisone acetate rectal cream kit 3-0.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%</i>	1	
PROCORT CRE	3	
<i>procto-pak cre 1%</i>	1	
PROCTOFOAM AER HC 1%	3	
<i>proctosol hc cre 2.5%</i>	1	
<i>proctozone cre -hc 2.5%</i>	1	

ULCER THERAPY COMBINATIONS

<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	1	
OMECLAMOX- MIS PAK	3	
PYLERA CAP	3	

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	
CIALIS TAB 2.5MG	3	AGE (Min age 18 years); ST (Try other BPH drugs); males only
CIALIS TAB 5MG	3	AGE (Min age 18 years); ST (Try other BPH drugs); males only
<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>tadalafil tab 2.5 mg</i>	1	AGE (Min age 18 years); ST (Try other BPH drugs); males only
<i>tadalafil tab 5 mg</i>	1	AGE (Min age 18 years); ST (Try other BPH drugs); males only
<i>tamsulosin hcl cap 0.4 mg</i>	1	

ERECTILE DYSFUNCTION, ALPROSTADIL AGENTS

MUSE SUP 125MCG	3	
MUSE SUP 250MCG	3	
MUSE SUP 500MCG	3	
MUSE SUP 1000MCG	3	

MISCELLANEOUS

<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	
<i>cytra k gra crystals</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cytra-2 sol</i>	1	
<i>cytra-k sol</i>	1	
ELMIRON CAP 100MG	2	
FEM PH GEL	3	
INTRAROSA SUP 6.5MG	2	
K-PHOS TAB	3	
K-PHOS TAB NO 2	3	
<i>phospha 250 tab neutral</i>	1	
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1	
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
<i>taron gra crystals</i>	1	
THIOLA EC TAB 100MG	5	SP, PA
THIOLA EC TAB 300MG	5	SP, PA
THIOLA TAB 100MG	5	SP, PA
<i>virt-phos tab 250 neut</i>	1	

URINARY ANTISPASMODICS

<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>flavoxate hcl tab 100 mg</i>	1	
GELNIQUE GEL 10%	3	
MYRBETRIQ TAB 25MG	3	
MYRBETRIQ TAB 50MG	3	
<i>oxybutynin chloride syrup 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	
OXYTROL DIS 3.9MG/24	3	
<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	
TOVIAZ TAB 4MG	3	
TOVIAZ TAB 8MG	3	
<i>tropium chloride cap er 24hr 60 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>trosipium chloride tab 20 mg</i>	1	
VAGINAL ANTI-INFECTIVES		
CLEOCIN SUP 100MG	3	
<i>clindamycin phosphate vaginal cream 2%</i>	1	
CLINDESSE CRE 2%	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole 3 sup 200mg</i>	1	
NUVESSA GEL 1.3%	3	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	1	
<i>vandazole gel 0.75%</i>	1	
HEMATOLOGIC		
ANTICOAGULANTS, ORAL		
BEVYXXA CAP 40MG	3	QL (60 caps per 180 days)
BEVYXXA CAP 80MG	3	QL (60 caps per 180 days)
COUMADIN TAB 1MG	3	
COUMADIN TAB 2.5MG	3	
COUMADIN TAB 2MG	3	
COUMADIN TAB 3MG	3	
COUMADIN TAB 4MG	3	
COUMADIN TAB 5MG	3	
COUMADIN TAB 6MG	3	
COUMADIN TAB 7.5MG	3	
COUMADIN TAB 10MG	3	
ELIQUIS TAB 2.5MG	2	
ELIQUIS TAB 5MG	2	
<i>jantoven tab 1mg</i>	1	
<i>jantoven tab 2.5mg</i>	1	
<i>jantoven tab 2mg</i>	1	
<i>jantoven tab 3mg</i>	1	
<i>jantoven tab 4mg</i>	1	
<i>jantoven tab 5mg</i>	1	
<i>jantoven tab 6mg</i>	1	
<i>jantoven tab 7.5mg</i>	1	
<i>jantoven tab 10mg</i>	1	
PRADAXA CAP 75MG	2	
PRADAXA CAP 110MG	2	
PRADAXA CAP 150MG	2	
<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	

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>warfarin sodium tab 10 mg</i>	1	
XARELTO STAR TAB 15/20MG	2	
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
HEMOSTATICS, SYSTEMIC		
AMICAR SOL 0.25/ML	3	
AMICAR TAB 500MG	3	
AMICAR TAB 1000MG	3	
<i>aminocaproic acid tab 500 mg</i>	1	
<i>aminocaproic acid tab 1000 mg</i>	1	
<i>tranexamic acid tab 650 mg</i>	1	
IRON CHELATING AGENTS		
<i>deferasirox tab for oral susp 125 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	4	SP, PA
EXJADE TAB 125MG	4	SP, PA
EXJADE TAB 250MG	4	SP, PA
EXJADE TAB 500MG	4	SP, PA
FERRIPROX SOL 100MG/ML	4	SP, PA
FERRIPROX TAB 500MG	4	SP, PA
FERRIPROX TAB 1000MG	4	SP, PA
MISCELLANEOUS		
CHEMET CAP 100MG	2	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>pentoxifylline tab er 400 mg</i>	1	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin chw 81mg</i>	0	\$0; QL (100 tabs per fill); AGE (Min age 12 years)
<i>aspirin tab 325mg</i>	0	\$0
<i>aspirin tab delayed release 81 mg</i>	0	\$0; QL (100 tabs per fill); AGE (Min age 45 years)
<i>aspirin tab delayed release 325 mg</i>	0	\$0; QL (100 tabs per fill); AGE (Min age 45 years)
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	
<i>aspirin m/s tab 500mg</i>	0	\$0

Drug Name	Drug Tier	Requirements/Limits
<i>bayer adv tab 500mg</i>	0	\$0
<i>bayer asa tab 325mg</i>	0	\$0
<i>bayer asa tab 500mg</i>	0	\$0
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<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>eq aspirin tab 500mg ec</i>	0	\$0; QL (100 tabs per fill); AGE (Min age 45 years)
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	
<i>ra aspirin tab 500mg</i>	0	\$0
PLATELET SYNTHESIS INHIBITOR		
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
THROMBOCYTOPENIA AGENTS		
DOPTELET TAB 20MG	5	SP, QL (15 tabs per 10 days), PA
MULPLETA TAB 3MG	5	SP, QL (7 tabs per 14 days), PA
PROMACTA POW 12.5MG	4	SP, PA
PROMACTA TAB 12.5MG	4	SP, PA
PROMACTA TAB 25MG	4	SP, PA
PROMACTA TAB 50MG	4	SP, PA
PROMACTA TAB 75MG	4	SP, PA
TAVALISSE TAB 100MG	5	SP, PA
TAVALISSE TAB 150MG	5	SP, PA
IMMUNOLOGIC AGENTS		
ALLERGENIC EXTRACTS		
ORALAIR SUB 300 IR	3	
AUTOIMMUNE AGENTS		
OLUMIANT TAB 2MG	5	SP, PA
OTEZLA TAB 10/20/30	4	SP, PA
OTEZLA TAB 30MG	4	SP, PA
XELJANZ TAB 5MG	4	SP, PA
XELJANZ TAB 10MG	4	SP, PA
XELJANZ XR TAB 11MG	4	SP, PA
DISEASE-MODIFYING ANTIRHEUMATIC DRUGS (DMARDs)		
CUPRIMINE CAP 250MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
<i>penicillamine cap 250 mg</i>	1	
IMMUNOSUPPRESSANTS, ANTIMETABOLITES		
AZASAN TAB 75 MG	3	
AZASAN TAB 100MG	3	
<i>azathioprine tab 50 mg</i>	1	
CELLCEPT CAP 250MG	2	
CELLCEPT SUS 200MG/ML	2	
CELLCEPT TAB 500MG	2	
IMURAN TAB 50MG	3	
<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	
IMMUNOSUPPRESSANTS, CALCINEURIN INHIBITORS		
ASTAGRAF XL CAP 0.5MG	3	
ASTAGRAF XL CAP 1MG	3	
ASTAGRAF XL CAP 5MG	3	
<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	
<i>engraf cap 25mg</i>	1	
<i>engraf cap 100mg</i>	1	
<i>engraf sol 100mg/ml</i>	1	
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	
SANDIMMUNE CAP 25MG	2	
SANDIMMUNE CAP 100MG	2	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	
<i>tacrolimus cap 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
IMMUNOSUPPRESSANTS, RAPAMYCIN DERIVATIVE		
RAPAMUNE SOL 1MG/ML	3	
RAPAMUNE TAB 0.5MG	3	
RAPAMUNE TAB 1MG	3	
RAPAMUNE TAB 2MG	3	
<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	
ZORTRESS TAB 0.5MG	3	
ZORTRESS TAB 0.25MG	3	
ZORTRESS TAB 0.75MG	3	
MISCELLANEOUS		
DIAGNOSTIC AGENTS		
E-Z-PAQUE SUS 60%	3	
ENTERO VU SUS 24%	3	
GLUCAGEN INJ 1MG	2	
POLIBAR PLUS SUS 105%	3	
TAGITOL V SUS 40%	3	
VARIBAR HONE SUS 40%	3	
VARIBAR NECT SUS 40%	3	
VARIBAR THIN SUS HONEY	3	
VOLUMEN SUS 0.1%	3	
NUTRITIONAL / SUPPLEMENTS		
ELECTROLYTES, POTASSIUM		
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<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 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	

Drug Name	Drug Tier	Requirements/Limits
VITAMINS AND MINERALS, FOLIC ACID/COMBINATIONS		
<i>fa-8 tab 0.8mg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
<i>folic acid cap 0.8 mg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
<i>folic acid tab 800mcg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
<i>sm folic acid tab 400mcg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
<i>yl folic acid tab 400mcg</i>	0	\$0; AGE (Covered for ages 55 years and under); females only
VITAMINS AND MINERALS, MISCELLANEOUS		
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
<i>fluoritab chw 0.5mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>fluoritab chw 0.25mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>fluoritab chw 1mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>fluoritab chw 2.2mg</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>fluoritab dro 0.125mg</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>flura-drops dro 0.25mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>ludent chw 0.5mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>ludent chw 0.25mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)

Drug Name	Drug Tier	Requirements/Limits
<i>ludent chw 1mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>nafrinse chw 1mg f</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>nafrinse dro 0.125mg</i>	0	\$0; AGE (Covered for ages 16 years and under)
NASCOBAL SPR 500MCG	2	
<i>phytonadione tab 5 mg</i>	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	0	\$0; AGE (Covered for ages 16 years and under)

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS, LONG ACTING

ANORO ELLIPT AER 62.5-25	2	
STIOLTO AER 2.5-2.5	2	

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS, SHORT ACTING

COMBIVENT AER 20-100	2	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	

ANTICHOLINERGIC/BETA AGONIST/STEROID INHALANT COMBINATIONS

TRELEGY AER ELLIPTA	2	
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Drug Name	Drug Tier	Requirements/Limits
ANTICHOLINERGICS		
ATROVENT HFA AER 17MCG	2	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
SPIRIVA AER 1.25MCG	2	
SPIRIVA CAP HANDIHLR	2	
SPIRIVA SPR 2.5MCG	2	
ANTIHIISTAMINE/DECONGESTANT COMBINATIONS		
<i>prometh/pe syp 6.25-5/5</i>	1	
ANTIHIISTAMINES, SEDATING		
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>clemastine fumarate tab 2.68 mg</i>	1	
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
<i>pharbedryl cap 50mg</i>	1	
ANTITUSSIVE COMBINATIONS, NON-OPIOID		
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
ANTITUSSIVE COMBINATIONS, OPIOID		
<i>guaiaatuss ac syp 100-10/5</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>guaifenesin sol dac</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>guaifenesin syp 100-10/5</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	QL (300 mL per 30 days); AGE (Covered for ages greater than 18 years old)

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	1	QL (900 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	1	QL (180 per 30 days); AGE (Covered for ages greater than 18 years old)
<i>hydromet syp 5-1.5/5</i>	1	QL (900 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>iophen c-nr liq 100-10/5</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>prometh/pe/ syp codeine</i>	1	QL (900 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	QL (900 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml</i>	1	QL (900 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>relcof c sol 100-6.3</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>virtussin ac sol 100-10/5</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)
<i>virtussin sol dac</i>	1	QL (1800 mL per 30 days); AGE (Covered for ages greater than 18 years old)

ANTITUSSIVES

<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	

BETA AGONISTS, INHALANTS, Long Acting: Hand-held Active

Inhalation

STRIVERDI AER 2.5MCG	2	
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Drug Name	Drug Tier	Requirements/Limits
BETA AGONISTS, INHALANTS, Long Acting: Nebulized Passive Inhalation		
BROVANA NEB 15MCG	3	
PERFOROMIST NEB 20MCG	3	
BETA AGONISTS, INHALANTS, Short Acting		
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1	
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	
PROAIR HFA AER	2	
PROAIR RESPI AER	2	
VENTOLIN HFA AER	2	
XOPENEX HFA AER	3	
BETA AGONISTS, ORAL AGENTS		
<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>albuterol sulfate tab er 12hr 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 8 mg</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
CYSTIC FIBROSIS		
BETHKIS NEB 300/4ML	4	SP, PA
CAYSTON INH 75MG	4	SP, PA
KALYDECO PAK 25MG	4	SP, PA
KALYDECO PAK 50MG	4	SP, PA
KALYDECO PAK 75MG	4	SP, PA
KALYDECO TAB 150MG	4	SP, PA
KITABIS PAK NEB 300/5ML	4	SP, PA
ORKAMBI GRA 100-125	5	SP, PA
ORKAMBI GRA 150-188	5	SP, PA

Drug Name	Drug Tier	Requirements/Limits
ORKAMBI TAB 100-125	5	SP, PA
ORKAMBI TAB 200-125	5	SP, PA
PULMOZYME SOL 1MG/ML	4	SP, PA
SYMDEKO TAB 50-75MG	5	SP, PA
SYMDEKO TAB 100-150	5	SP, PA
TOBI NEB 300/5ML	5	SP, PA
TOBI PODHALR CAP 28MG	5	SP, PA
<i>tobramycin nebu soln 300 mg/5ml</i>	4	SP, PA

LEUKOTRIENE MODULATORS

<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
<i>zileuton tab er 12hr 600 mg</i>	1	
ZYFLO TAB 600MG	3	

MAST CELL STABILIZERS

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	
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MEDICAL SUPPLIES

AIRZONE PEAK MIS FLOW MTR	0	\$0
MASK VORTEX/ MIS BABY DUC	0	\$0
MASK VORTEX/ MIS DUCK	0	\$0
MASK VORTEX/ MIS FROG	0	\$0
MASK VORTEX/ MIS LADY BUG	0	\$0
PEAK AIR FLO MIS ADLT/PED	0	\$0
VORTEX VALVE MIS CHAMBER	0	\$0
VORTEX/MASK MIS CHILDS	0	\$0
VORTEX/MASK MIS TODDLER	0	\$0

MISCELLANEOUS

<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NEBUSAL NEB 6%	3	
<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	

Drug Name	Drug Tier	Requirements/Limits
NASAL ANTIHISTAMINES		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	1	
NASAL STEROIDS/COMBINATIONS		
DYMISTA SPR 137-50	3	ST (Try fluticasone and flunisolide)
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	
QNASL AER 80MCG	3	ST (Try fluticasone and flunisolide)
QNASL CHILD SPR 40MCG	3	ST (Try fluticasone and flunisolide)
PHOSPHODIESTERASE-4 INHIBITORS		
DALIRESP TAB 250MCG	3	
DALIRESP TAB 500MCG	3	
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	4	SP, PA
ESBRIET TAB 267MG	4	SP, PA
ESBRIET TAB 801MG	4	SP, PA
OFEV CAP 100MG	4	SP, PA
OFEV CAP 150MG	4	SP, PA
STEROID INHALANTS		
ALVESCO AER 80MCG	3	
ALVESCO AER 160MCG	3	
ARNUITY ELPT INH 50MCG	2	
ARNUITY ELPT INH 100MCG	2	
ARNUITY ELPT INH 200MCG	2	
ASMANEX 7 AER 110MCG	2	
ASMANEX 14 AER 220MCG	2	
ASMANEX 30 AER 110MCG	2	
ASMANEX 30 AER 220MCG	2	
ASMANEX 60 AER 220MCG	2	
ASMANEX 120 AER 220MCG	2	
ASMANEX HFA AER 100 MCG	2	
ASMANEX HFA AER 200 MCG	2	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	
<i>budesonide inhalation susp 1 mg/2ml</i>	1	
FLOVENT DISK AER 50MCG	2	
FLOVENT DISK AER 100MCG	2	

Drug Name	Drug Tier	Requirements/Limits
FLOVENT DISK AER 250MCG	2	
FLOVENT HFA AER 44MCG	2	
FLOVENT HFA AER 110MCG	2	
FLOVENT HFA AER 220MCG	2	
PULMICORT INH 90MCG	2	
PULMICORT INH 180MCG	2	
QVAR REDIHA AER 80MCG	2	
QVAR REDIHAL AER 40MCG	2	

STEROID/BETA AGONIST COMBINATIONS

ADVAIR HFA AER 45/21	2	QL (1 inhaler per 30 days)
ADVAIR HFA AER 115/21	2	QL (1 inhaler per 30 days)
ADVAIR HFA AER 230/21	2	QL (1 inhaler per 30 days)
BREO ELLIPTA INH 100-25	2	
BREO ELLIPTA INH 200-25	2	
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	1	QL (1 inhaler per 30 days)
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	1	QL (1 inhaler per 30 days)
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	1	QL (1 inhaler per 30 days)
SYMBICORT AER 80-4.5	2	
SYMBICORT AER 160-4.5	2	
<i>wixela inhub aer 100/50</i>	1	QL (1 inhaler per 30 days)
<i>wixela inhub aer 250/50</i>	1	QL (1 inhaler per 30 days)
<i>wixela inhub aer 500/50</i>	1	QL (1 inhaler per 30 days)

XANTHINES

ELIXOPHYLLIN ELX 80/15ML	3	
THEO-24 CAP 100MG CR	2	
THEO-24 CAP 200MG CR	2	
THEO-24 CAP 300MG CR	2	
THEO-24 CAP 400MG ER	2	
<i>theochron tab 100mg cr</i>	1	
<i>theochron tab 200mg cr</i>	1	
<i>theochron tab 300mg cr</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	

Drug Name	Drug Tier	Requirements/Limits
TOPICAL		
DERMATOLOGY, ACNE, Oral		
ABSORICA CAP 10MG	3	
ABSORICA CAP 20MG	3	
ABSORICA CAP 25MG	3	
ABSORICA CAP 30MG	3	
ABSORICA CAP 35MG	3	
ABSORICA CAP 40MG	3	
<i>claravis cap 10mg</i>	1	
<i>claravis cap 20mg</i>	1	
<i>claravis cap 30mg</i>	1	
<i>claravis cap 40mg</i>	1	
<i>myorisan cap 10mg</i>	1	
<i>myorisan cap 20mg</i>	1	
<i>myorisan cap 40mg</i>	1	
<i>zenatane cap 10mg</i>	1	
<i>zenatane cap 20mg</i>	1	
<i>zenatane cap 30mg</i>	1	
<i>zenatane cap 40mg</i>	1	
DERMATOLOGY, ACNE, Topical		
ACANYA GEL 1.2-2.5%	3	
ACZONE GEL 5%	3	
ACZONE GEL 7.5%	3	
<i>adapalene cream 0.1%</i>	1	
<i>adapalene gel 0.1%</i>	1	
<i>adapalene gel 0.3%</i>	1	
<i>adapalene lotion 0.1%</i>	1	
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	
<i>avita cre 0.025%</i>	1	
AZELEX CRE 20%	3	
BENZAC AC LIQ 5% WASH	3	
BENZIQ GEL 5.25%	3	
BENZIQ LS GEL 2.75%	3	
<i>benziq wash liq 5.25%</i>	1	
<i>benzoyl per liq 5% wash</i>	1	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	1	
<i>clindamycin phosphate gel 1%</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	1	
<i>dapsone gel 5%</i>	1	
<i>ery pad 2%</i>	1	
<i>erythromycin gel 2%</i>	1	
<i>erythromycin pads 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
FABIOR AER 0.1%	3	
<i>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	3	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
<i>tazarotene cream 0.1%</i>	1	
TAZORAC CRE 0.1%	2	
TAZORAC CRE 0.05%	2	
TAZORAC GEL 0.1%	2	
TAZORAC GEL 0.05%	2	
<i>tretinoin cream 0.1%</i>	1	
<i>tretinoin cream 0.05%</i>	1	
<i>tretinoin cream 0.025%</i>	1	
<i>tretinoin gel 0.01%</i>	1	
<i>tretinoin gel 0.05%</i>	1	
<i>tretinoin gel 0.025%</i>	1	
<i>tretinoin microsphere gel 0.1%</i>	1	
<i>tretinoin microsphere gel 0.04%</i>	1	
DERMATOLOGY, ACTINIC KERATOSIS		
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	
FLUOROPLEX CRE 1%	3	
<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	
<i>imiquimod cream 3.75%</i>	1	
LEVULAN KERA SOL 20%	3	
PICATO GEL 0.05%	3	
PICATO GEL 0.015%	3	
ZYCLARA CRE 3.75%	3	
ZYCLARA PUMP CRE 2.5%	3	
ZYCLARA PUMP CRE 3.75%	3	
DERMATOLOGY, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS		
CORTISPORIN CRE 0.5%	2	
CORTISPORIN OIN 1%	3	

Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGY, ANTIBIOTICS		
ALTABAX OIN 1%	3	
CENTANY OIN 2%	3	
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>mupirocin calcium cream 2%</i>	1	
<i>mupirocin oint 2%</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	
DERMATOLOGY, ANTIFUNGALS		
<i>ciclodan sol 8%</i>	1	
<i>ciclopirox gel 0.77%</i>	1	
<i>ciclopirox kit 8%</i>	1	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox solution 8%</i>	1	
<i>clotrimazole cream 1%</i>	1	
<i>clotrimazole soln 1%</i>	1	
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>econazole nitrate cream 1%</i>	1	
ERTACZO CRE 2%	3	
EXELDERM SOL 1%	3	
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	1	
<i>ketoconazole shampoo 2%</i>	1	
<i>luliconazole cream 1%</i>	1	
LUZU CRE 1%	3	ST (Try generic topical antifungal)
MENTAX CRE 1%	3	
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	1	
<i>naftifine hcl cream 1%</i>	1	
<i>naftifine hcl cream 2%</i>	1	
NAFTIN GEL 1%	3	
NAFTIN GEL 2%	3	
<i>nyamyc pow 100000</i>	1	
<i>nystatin cream 100000 unit/gm</i>	1	
<i>nystatin oint 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
<i>nystop pow 100000</i>	1	
OXISTAT LOT 1%	3	
VUSION OIN	3	
XOLEGEL GEL 2%	3	
DERMATOLOGY, ANTIPSORIATICS, ORAL		
<i>acitretin cap 10 mg</i>	1	
<i>acitretin cap 17.5 mg</i>	1	
<i>acitretin cap 25 mg</i>	1	
<i>methoxsalen rapid cap 10 mg</i>	1	
DERMATOLOGY, ANTIPSORIATICS, Topical		
<i>calcipotriene cream 0.005%</i>	1	
<i>calcipotriene oint 0.005%</i>	1	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	1	
<i>calcitrene oin 0.005%</i>	1	
<i>calcitriol oint 3 mcg/gm</i>	1	
SORILUX AER 0.005%	3	
TACLONEX SUS	3	
DERMATOLOGY, ANTISEBORRHEICS		
<i>selenium sulfide lotion 2.5%</i>	1	
DERMATOLOGY, ATOPIC DERMATITIS, Topical		
EUCRISA OIN 2%	3	QL (1 tube per 30 days)
<i>pimecrolimus cream 1%</i>	1	
<i>tacrolimus oint 0.1%</i>	1	
<i>tacrolimus oint 0.03%</i>	1	
DERMATOLOGY, CORTICOSTEROID COMBINATIONS		
EPIFOAM AER 1%	3	
DERMATOLOGY, CORTICOSTEROIDS, High Potency		
<i>amcinonide cream 0.1%</i>	1	
<i>amcinonide lotion 0.1%</i>	1	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	1	
<i>desoximetasone oint 0.25%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>desoximetasone spray 0.25%</i>	1	
<i>diflorasone diacetate cream 0.05%</i>	1	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
DERMATOLOGY, CORTICOSTEROIDS, Low Potency		
<i>ala-cort cre 1%</i>	1	
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
<i>desonide cream 0.05%</i>	1	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
DERMATOLOGY, CORTICOSTEROIDS, Medium Potency		
<i>betamethasone valerate aerosol foam 0.12%</i>	1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	
CORDRAN 80X3 TAP 4MCG/CM	3	
<i>desoximetasone cream 0.05%</i>	1	
<i>desoximetasone oint 0.05%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	1	
<i>flurandrenolide lotion 0.05%</i>	1	
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>hydrocortisone butyrate cream 0.1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	1	
<i>hydrocortisone butyrate lotion 0.1%</i>	1	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	1	
<i>mometasone furoate cream 0.1%</i>	1	
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
<i>prednicarbate cream 0.1%</i>	1	
<i>prednicarbate oint 0.1%</i>	1	
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	1	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>triderm cre 0.1%</i>	1	

DERMATOLOGY, CORTICOSTEROIDS, Very High Potency

<i>betamethasone dipropionate augmented gel 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	1	
<i>clobetasol propionate foam 0.05%</i>	1	QL (100 grams per 30 days)
<i>clobetasol propionate gel 0.05%</i>	1	QL (100 grams per 30 days)
<i>clobetasol propionate lotion 0.05%</i>	1	QL (200 mL per 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	1	QL (240 mL per 30 days)
<i>clobetasol propionate soln 0.05%</i>	1	QL (100 mL per 30 days)
<i>clobetasol propionate spray 0.05%</i>	1	QL (240 mL per 30 days)
<i>diflorasone diacetate oint 0.05%</i>	1	
<i>halobetasol propionate cream 0.05%</i>	1	QL (100 grams per 30 days)
<i>halobetasol propionate oint 0.05%</i>	1	QL (100 grams per 30 days)

DERMATOLOGY, EMOLLIENTS

<i>lactic acid (ammonium lactate) cream 12%</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
<i>urea in zinc undecylenate-lactic acid vehicle emulsion 50%</i>	1	
DERMATOLOGY, LOCAL ANALGESICS		
<i>lidocaine patch 5%</i>	1	QL (90 per 30 days)
QUTENZA KIT 8% 1-PCH	3	
QUTENZA KIT 8% 2-PCH	3	
DERMATOLOGY, LOCAL ANESTHETICS		
<i>lidocaine hcl gel 2%</i>	1	
<i>lidocaine hcl soln 4%</i>	1	QL (100 mL per 30 days)
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	
<i>lidocaine oint 5%</i>	1	QL (100 grams per 30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	QL (60 grams per 30 days)
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>acyclovir cream 5%</i>	1	
<i>acyclovir oint 5%</i>	1	
CONDYLOX GEL 0.5%	3	
DENAVIR CRE 1%	3	
<i>doxepin hcl cream 5%</i>	1	QL (90 grams per 30 days)
GENADUR LIQ	3	
<i>imiquimod cream 5%</i>	1	
PANRETIN GEL 0.1%	3	
<i>podofilox soln 0.5%</i>	1	
<i>salicylic acid cream 6% & cleanser liqd kit</i>	1	
SANTYL OIN 250/GM	3	
TRI-CHLOR LIQ 80%	3	
VEREGEN OIN 15%	3	
XERESE CRE 5-1%	3	
ZOVIRAX CRE 5%	3	
DERMATOLOGY, ROSACEA LESIONS		
<i>azelaic acid gel 15%</i>	1	
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	1	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
NORITATE CRE 1%	3	
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGY, SCABICIDES AND PEDICULICIDES		
<i>crotan lot 10%</i>	1	
EURAX CRE 10%	3	
EURAX LOT 10%	3	
<i>lindane shampoo 1%</i>	1	
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
SKLICE LOT 0.5%	3	
<i>spinosad susp 0.9%</i>	1	
MOUTH/THROAT/DENTAL AGENTS, MISCELLANEOUS		
ARESTIN MIS 1MG	3	
CAPHOSOL SOL	3	
<i>chlorhexidine gluconate soln 0.12%</i>	1	
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
NUMOISYN LIQ	3	
<i>oralone dent pst 0.1%</i>	1	
<i>paroex sol 0.12%</i>	1	
<i>periogard sol 0.12%</i>	1	
<i>stannous fluoride conc 0.63%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
OPHTHALMIC, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	2	
BLEPHAMIDE SUS OP	2	
<i>neo-polycin oin hc 1%op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
ZYLET SUS 0.5-0.3%	2	
OPHTHALMIC, ANTI-INFECTIVES		
AZASITE SOL 1%	3	
<i>bacitracin ophth oint 500 unit/gm</i>	1	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUS 0.6%	3	

Drug Name	Drug Tier	Requirements/Limits
CILOXAN OIN 0.3% OP	2	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentak oin 0.3% op</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
MOXEZA SOL 0.5%	3	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
<i>neo-polycin oin op</i>	1	
<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>polycin oin op</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	
OPHTHALMIC, ANTI-INFLAMMATORY, Nonsteroidal		
ACUVAIL SOL 0.45%	3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
ILEVRO DRO 0.3% OP	3	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
NEVANAC SUS 0.1%	3	
PROLENSA SOL 0.07%	3	
OPHTHALMIC, ANTI-INFLAMMATORY, Steroidal		
ALREX SUS 0.2%	2	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
DUREZOL EMU 0.05%	3	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML FORTE SUS 0.25% OP	3	
FML OIN 0.1% OP	3	
LOTEMAX GEL 0.5%	2	
LOTEMAX OIN 0.5%	2	
LOTEMAX SUS 0.5%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
MAXIDEX SUS 0.1% OP	3	
PRED MILD SUS 0.12% OP	2	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
OPHTHALMIC, ANTIALLERGICS		
ALOCRI SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>azelastine hcl ophth soln 0.05%</i>	1	
BEPREVE DRO 1.5%	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
<i>epinastine hcl ophth soln 0.05%</i>	1	
LASTACFT SOL 0.25%	3	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PAZEO DRO 0.7%	3	
OPHTHALMIC, ANTIFUNGALS		
NATACYN SUS 5% OP	3	
OPHTHALMIC, ANTIVIRALS		
<i>trifluridine ophth soln 1%</i>	1	
ZIRGAN GEL 0.15%	2	
OPHTHALMIC, BETA-BLOCKERS, Nonselective		
BETIMOL SOL 0.5%	3	
BETIMOL SOL 0.25%	3	
<i>carteolol hcl ophth soln 1%</i>	1	
ISTALOL SOL 0.5% OP	3	
<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	
TIMOPTIC OCU SOL 0.5% OP	3	
TIMOPTIC OCU SOL 0.25% OP	3	
OPHTHALMIC, BETA-BLOCKERS, Selective		
<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETOPTIC-S SUS 0.25% OP	3	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITOR/BETA-BLOCKER COMBINATIONS		
COSOPT PF SOL 2%-0.5%	3	

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl-timolol maleate ophth sol</i> 22.3-6.8 mg/ml pf	1	
<i>dorzolamide hcl-timolol maleate ophth soln</i> 22.3-6.8 mg/ml	1	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITOR/SYMPATHOMIMETIC COMBINATIONS		
SIMBRINZA SUS 1-0.2%	3	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITORS		
AZOPT SUS 1% OP	3	
<i>dorzolamide hcl ophth soln 2%</i>	1	
OPHTHALMIC, DRY EYE DISEASE		
RESTASIS EMU 0.05%	2	QL (Max 2 vials per day)
RESTASIS MUL EMU 0.05%	2	QL (1 bottle per 30 days)
OPHTHALMIC, MISCELLANEOUS		
<i>altafrin sol 2.5% op</i>	1	
<i>altafrin sol 10% op</i>	1	
LACRISERT MIS 5MG OP	3	
OXERVATE SOL 20MCG/ML	5	SP, QL (28 vials/28 days, one 8-week treatment per year), PA
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
OPHTHALMIC, MYDRIATICS		
ATROPINE SUL SOL 1% OP	3	
CYCLOMYDRIL SOL OP	3	
<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>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
OPHTHALMIC, PARASYMPATHOMIMETICS		
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
OPHTHALMIC, PROSTAGLANDINS		
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
LUMIGAN SOL 0.01%	2	
TRAVATAN Z DRO 0.004%	3	
VYZULTA SOL 0.024%	3	
ZIOPTAN DRO 0.0015%	3	

Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC, RHO KINASE INHIBITOR/PROSTAGLANDIN COMBINATIONS		
ROCKLATAN DRO	3	
OPHTHALMIC, RHO KINASE INHIBITORS		
RHOPRESSA SOL 0.02%	3	
OPHTHALMIC, SYMPATHOMIMETIC/BETA-BLOCKER COMBINATIONS		
COMBIGAN SOL 0.2/0.5%	3	
OPHTHALMIC, SYMPATHOMIMETICS		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	3	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
OTIC, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS		
CIPRO HC SUS OTIC	3	
CIPRODEX SUS 0.3-0.1%	3	
COLY-MYCIN S SUS OTIC	3	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
OTIC, ANTI-INFECTIVES		
<i>acetic acid otic soln 2%</i>	1	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIC, MISCELLANEOUS		
<i>cortic-nd dro</i>	1	
<i>exotic-hc dro otic</i>	1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	

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<i>albuterol sulfate inhal aero 108 mcg/act</i>		<i>mg</i>	54
<i>(90mcg base equiv)</i>	137	<i>alprazolam orally disintegrating tab 1 mg</i>	
<i>albuterol sulfate soln nebu 0.083% (2.5</i>		<i>mg</i>	54
<i>mg/3ml)</i>	137	<i>alprazolam orally disintegrating tab 2 mg</i>	
<i>albuterol sulfate soln nebu 0.5% (5</i>		<i>mg</i>	54
<i>mg/ml)</i>	137	<i>alprazolam tab 0.25 mg</i>	54
<i>albuterol sulfate soln nebu 0.63 mg/3ml</i>		<i>alprazolam tab 0.5 mg</i>	54
<i>(base equiv)</i>	137	<i>alprazolam tab 0.5mg xr</i>	54
<i>albuterol sulfate soln nebu 1.25 mg/3ml</i>		<i>alprazolam tab 1 mg</i>	54
<i>(base equiv)</i>	137	<i>alprazolam tab 2 mg</i>	54
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<i>amantadine hcl tab 100 mg</i>	65
<i>ambrisentan tab 10 mg</i>	53
<i>ambrisentan tab 5 mg</i>	53
<i>amcinonide cream 0.1%</i>	144
<i>amcinonide lotion 0.1%</i>	144
<i>amethia lo tab</i>	111
<i>amethia tab</i>	111
AMICAR SOL 0.25/ML	129
AMICAR TAB 1000MG.....	129
AMICAR TAB 500MG	129
<i>amiloride & hydrochlorothiazide tab 5-50</i> <i>mg</i>	50
<i>amiloride hcl tab 5 mg</i>	51
<i>aminocaproic acid tab 1000 mg</i>	129
<i>aminocaproic acid tab 500 mg</i>	129
<i>amiodarone hcl tab 100 mg</i>	42
<i>amiodarone hcl tab 200 mg</i>	42
<i>amiodarone hcl tab 400 mg</i>	42
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<i>amitriptyline hcl tab 10 mg</i>	64
<i>amitriptyline hcl tab 100 mg</i>	64
<i>amitriptyline hcl tab 150 mg</i>	64
<i>amitriptyline hcl tab 25 mg</i>	64
<i>amitriptyline hcl tab 50 mg</i>	64
<i>amitriptyline hcl tab 75 mg</i>	64
<i>amlodipine besylate tab 10 mg (base</i> <i>equivalent)</i>	48
<i>amlodipine besylate tab 2.5 mg (base</i> <i>equivalent)</i>	48

<i>amlodipine besylate tab 5 mg (base</i> <i>equivalent)</i>	48
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 10-10 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 10-20 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 10-40 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 10-80 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 2.5-10 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 2.5-20 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 2.5-40 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 5-10 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 5-20 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 5-40 mg</i>	47
<i>amlodipine besylate-atorvastatin calcium</i> <i>tab 5-80 mg</i>	47
<i>amlodipine besylate-benazepril hcl cap</i> <i>10-20 mg</i>	37
<i>amlodipine besylate-benazepril hcl cap</i> <i>10-40 mg</i>	37
<i>amlodipine besylate-benazepril hcl cap</i> <i>2.5-10 mg</i>	37
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>10 mg</i>	37
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>20 mg</i>	37
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>40 mg</i>	37
<i>amlodipine besylate-olmesartan</i> <i>medoxomil tab 10-20 mg</i>	40
<i>amlodipine besylate-olmesartan</i> <i>medoxomil tab 10-40 mg</i>	40
<i>amlodipine besylate-olmesartan</i> <i>medoxomil tab 5-20 mg</i>	40
<i>amlodipine besylate-olmesartan</i> <i>medoxomil tab 5-40 mg</i>	40
<i>amlodipine besylate-valsartan tab 10-</i> <i>160 mg</i>	40
<i>amlodipine besylate-valsartan tab 10-</i> <i>320 mg</i>	40

<i>amlodipine besylate-valsartan tab 5-160 mg</i>	40	<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	14
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	40	<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	14
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	40	<i>amoxicillin (trihydrate) tab 500 mg</i>	14
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	40	<i>amoxicillin (trihydrate) tab 875 mg</i>	14
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	40	<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	126
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	40	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	70
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	40	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	70
<i>amoxapine tab 100 mg</i>	65	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	70
<i>amoxapine tab 150 mg</i>	65	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	70
<i>amoxapine tab 25 mg</i>	64	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	70
<i>amoxapine tab 50 mg</i>	65	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	70
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	14	<i>amphetamine-dextroamphetamine tab 10 mg</i>	70
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	14	<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	70
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	14	<i>amphetamine-dextroamphetamine tab 15 mg</i>	70
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	14	<i>amphetamine-dextroamphetamine tab 20 mg</i>	71
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	14	<i>amphetamine-dextroamphetamine tab 30 mg</i>	71
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	14	<i>amphetamine-dextroamphetamine tab 5 mg</i>	70
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	14	<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	70
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	14	<i>ampicillin cap 500 mg</i>	14
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	14	<i>AMPYRA TAB 10MG</i>	76
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	14	<i>AMRIX CAP 15MG</i>	76
<i>amoxicillin (trihydrate) cap 250 mg</i>	14	<i>AMRIX CAP 30MG</i>	76
<i>amoxicillin (trihydrate) cap 500 mg</i>	14	<i>anagrelide hcl cap 0.5 mg</i>	130
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	14	<i>anagrelide hcl cap 1 mg</i>	130
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	14	<i>ana-lex kit</i>	125
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	14	<i>anastrozole tab 1 mg</i>	24
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	14	<i>ANGELIQ TAB 0.25-0.5</i>	114
		<i>ANGELIQ TAB 0.5-1MG</i>	114
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		<i>ANTARA CAP 30MG</i>	43
		<i>ANTARA CAP 90MG</i>	43
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<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	152	ASMANEX 7 AER 110MCG	139
<i>aprepitant capsule 125 mg</i>	121	ASMANEX HFA AER 100 MCG	139
<i>aprepitant capsule 40 mg</i>	121	ASMANEX HFA AER 200 MCG	139
<i>aprepitant capsule 80 mg</i>	121	<i>aspirin chw 81mg</i>	129
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	121	<i>aspirin tab 325mg</i>	129
<i>apri tab</i>	112	<i>aspirin tab delayed release 325 mg ...</i>	129
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<i>armodafinil tab 250 mg</i>	77	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	19
<i>armodafinil tab 50 mg</i>	77	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	19
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<i>atomoxetine hcl cap 40 mg (base equiv)</i>	71
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	71
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	71
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	44
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	44
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	44
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	44
<i>atovaquone susp 750 mg/5ml</i>	21
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	17
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<i>azelaic acid gel 15%</i>	147
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	139
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	139
<i>azelastine hcl ophth soln 0.05%</i>	150
AZELEX CRE 20%.....	141
<i>azithromycin for susp 100 mg/5ml</i>	13
<i>azithromycin for susp 200 mg/5ml</i>	13
<i>azithromycin powd pack for susp 1 gm</i>	13
<i>azithromycin tab 250 mg</i>	13
<i>azithromycin tab 500 mg</i>	13
<i>azithromycin tab 600 mg</i>	13
AZOPT SUS 1% OP.....	151
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B

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<i>bacitracin-polymyxin b ophth oint</i>	148
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	148
<i>baclofen tab 10 mg</i>	76
<i>baclofen tab 20 mg</i>	76
<i>baclofen tab 5 mg</i>	76
<i>balsalazide disodium cap 750 mg</i>	123
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BELSOMRA TAB 10MG.....	74	<i>(base equivalent)</i>	145
BELSOMRA TAB 15MG.....	74	<i>betamethasone valerate lotion 0.1%</i>	
BELSOMRA TAB 20MG.....	74	<i>(base equivalent)</i>	145
BELSOMRA TAB 5MG	74	<i>betamethasone valerate oint 0.1% (base</i>	
<i>benazepril & hydrochlorothiazide tab 10-</i>		<i>equivalent)</i>	145
<i>12.5 mg</i>	37	<i>betaxolol hcl ophth soln 0.5%</i>	150
<i>benazepril & hydrochlorothiazide tab 20-</i>		<i>betaxolol hcl tab 10 mg</i>	46
<i>12.5 mg</i>	37	<i>betaxolol hcl tab 20 mg</i>	46
<i>benazepril & hydrochlorothiazide tab 20-</i>		<i>bethanechol chloride tab 10 mg</i>	126
<i>25 mg</i>	37	<i>bethanechol chloride tab 25 mg</i>	126
<i>benazepril & hydrochlorothiazide tab 5-</i>		<i>bethanechol chloride tab 5 mg</i>	126
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<i>benazepril hcl tab 20 mg</i>	38	BETIMOL SOL 0.25%	150
<i>benazepril hcl tab 40 mg</i>	38	BETIMOL SOL 0.5%	150
<i>benazepril hcl tab 5 mg</i>	38	BETOPTIC-S SUS 0.25% OP	150
BENZAC AC LIQ 5% WASH	141	BEVYXXA CAP 40MG	128
BENZIQ GEL 5.25%	141	BEVYXXA CAP 80MG	128
BENZIQ LS GEL 2.75%.....	141	<i>bexarotene cap 75 mg</i>	34
<i>benziq wash liq 5.25%</i>	141	BEYAZ TAB	111
<i>benzonatate cap 100 mg</i>	136	BG STAR TES BLD GLUC	88
<i>benzonatate cap 150 mg</i>	136	<i>bicalutamide tab 50 mg</i>	24
<i>benzonatate cap 200 mg</i>	136	BIDIL TAB	51
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<i>benzoyl peroxide-erythromycin gel 5-3%</i>		<i>bimatoprost ophth soln 0.03%</i>	151
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<i>benztropine mesylate tab 1 mg</i>	65	<i>6.25 mg</i>	46
<i>benztropine mesylate tab 2 mg</i>	65	<i>bisoprolol & hydrochlorothiazide tab 2.5-</i>	
BEPREVE DRO 1.5%	150	<i>6.25 mg</i>	45
BESIVANCE SUS 0.6%	148	<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
<i>betamethasone dipropionate augmented</i>		<i>6.25 mg</i>	45
<i>cream 0.05%</i>	144	<i>bisoprolol fumarate tab 10 mg</i>	46
<i>betamethasone dipropionate augmented</i>		<i>bisoprolol fumarate tab 5 mg</i>	46
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<i>lotion 0.05%</i>	144	BLOOD GLUCOS TES	88
<i>betamethasone dipropionate augmented</i>		BLOOD GLUCOS TES PREMIUM	88
<i>oint 0.05%</i>	146	BLOOD GLUCOS TES STRIPS	88
<i>betamethasone dipropionate cream</i>		<i>bosentan tab 125 mg</i>	53
<i>0.05%</i>	144	<i>bosentan tab 62.5 mg</i>	53
<i>betamethasone dipropionate lotion</i>		BOSULIF TAB 100MG	27
<i>0.05%</i>	144	BOSULIF TAB 400MG	27
<i>betamethasone dipropionate oint 0.05%</i>		BOSULIF TAB 500MG	27
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 BREO ELLIPTA INH 200-25 140
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 BRILINTA TAB 60MG..... 130
 BRILINTA TAB 90MG..... 130
 brimonidine tartrate ophth soln 0.15%
 152
 brimonidine tartrate ophth soln 0.2% 152
 BRISDELLE CAP 7.5MG.....80
 bromfenac sodium ophth soln 0.09%
 (base equiv) (once-daily) 149
 bromocriptine mesylate cap 5 mg (base
 equivalent).....65
 bromocriptine mesylate tab 2.5 mg (base
 equivalent).....65
 BROVANA NEB 15MCG 137
 budesonide delayed release particles cap
 3 mg 123
 budesonide inhalation susp 0.25 mg/2ml
 139
 budesonide inhalation susp 0.5 mg/2ml
 139
 budesonide inhalation susp 1 mg/2ml 139
 budesonide tab er 24hr 9 mg 123
 bumetanide tab 0.5 mg 51
 bumetanide tab 1 mg 51
 bumetanide tab 2 mg 51
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 equiv).....78
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 equiv).....78
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 buprenorphine hcl-naloxone hcl sl film 2-
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 buprenorphine hcl-naloxone hcl sl film 4-
 1 mg (base equiv)78
 buprenorphine hcl-naloxone hcl sl film 8-
 2 mg (base equiv)78
 buprenorphine hcl-naloxone hcl sl tab 2-
 0.5 mg (base equiv)78
 buprenorphine hcl-naloxone hcl sl tab 8-
 2 mg (base equiv)78
 buprenorphine td patch weekly 10
 mcg/hr 7
 buprenorphine td patch weekly 15
 mcg/hr 7

buprenorphine td patch weekly 20
 mcg/hr..... 7
 buprenorphine td patch weekly 5 mcg/hr
 7
 buprenorphine td patch weekly 7.5
 mcg/hr..... 7
 bupropion hcl (smoking deterrent) tab er
 12hr 150 mg..... 78
 bupropion hcl tab 100 mg 61
 bupropion hcl tab 75 mg 61
 bupropion hcl tab er 12hr 100 mg 61
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 bupropion hcl tab er 24hr 150 mg 61
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 buspirone hcl tab 10 mg 55
 buspirone hcl tab 15 mg 55
 buspirone hcl tab 30 mg 55
 buspirone hcl tab 5 mg..... 55
 buspirone hcl tab 7.5 mg 55
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 5
 butalbital-acetaminophen tab 50-325 mg
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 butalbital-acetaminophen-caff w/ cod cap
 50-300-40-30 mg 7
 butalbital-acetaminophen-caff w/ cod cap
 50-325-40-30 mg 7
 butalbital-acetaminophen-caffeine cap
 50-300-40 mg..... 5
 butalbital-acetaminophen-caffeine cap
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<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	144	<i>carbamazepine cap er 12hr 200 mg ...</i>	56
<i>calcipotriene-betamethasone</i>		<i>carbamazepine cap er 12hr 300 mg ...</i>	56
<i>dipropionate oint 0.005-0.064%</i>	144	<i>carbamazepine chew tab 100 mg</i>	56
<i>calcitonin (salmon) nasal soln 200</i>		<i>carbamazepine susp 100 mg/5ml.....</i>	56
<i>unit/act.....</i>	110	<i>carbamazepine tab 200 mg</i>	56
<i>calcitrene oin 0.005%</i>	144	<i>carbamazepine tab er 12hr 100 mg</i>	56
<i>calcitriol cap 0.25 mcg</i>	117	<i>carbamazepine tab er 12hr 200 mg</i>	56
<i>calcitriol cap 0.5 mcg</i>	117	<i>carbamazepine tab er 12hr 400 mg</i>	56
<i>calcitriol oint 3 mcg/gm.....</i>	144	CARBATROL CAP 100MG.....	56
<i>calcitriol oral soln 1 mcg/ml</i>	117	CARBATROL CAP 200MG.....	56
<i>calcium acetate (phosphate binder) cap</i>		CARBATROL CAP 300MG.....	56
<i>667 mg (169 mg ca).....</i>	118	<i>carbidopa & levodopa orally</i>	
<i>calcium acetate (phosphate binder) tab</i>		<i>disintegrating tab 10-100 mg</i>	65
<i>667 mg</i>	118	<i>carbidopa & levodopa orally</i>	
CALQUENCE CAP 100MG	27	<i>disintegrating tab 25-100 mg</i>	65
<i>camila tab 0.35mg</i>	113	<i>carbidopa & levodopa orally</i>	
<i>camrese lo tab</i>	111	<i>disintegrating tab 25-250 mg</i>	66
<i>camrese tab</i>	111	<i>carbidopa & levodopa tab 10-100 mg .</i>	66
<i>candesartan cilexetil tab 16 mg</i>	41	<i>carbidopa & levodopa tab 25-100 mg .</i>	66
<i>candesartan cilexetil tab 32 mg</i>	41	<i>carbidopa & levodopa tab 25-250 mg .</i>	66
<i>candesartan cilexetil tab 4 mg.....</i>	41	<i>carbidopa & levodopa tab er 25-100 mg</i>	
<i>candesartan cilexetil tab 8 mg.....</i>	41	<i>.....</i>	66
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa & levodopa tab er 50-200 mg</i>	
<i>tab 16-12.5 mg.....</i>	41	<i>.....</i>	66
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>carbidopa tab 25 mg</i>	66
<i>tab 32-12.5 mg.....</i>	41	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>12.5-50-200 mg</i>	66
<i>tab 32-25 mg</i>	41	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>capecitabine tab 150 mg</i>	23	<i>18.75-75-200 mg</i>	66
<i>capecitabine tab 500 mg</i>	23	<i>carbidopa-levodopa-entacapone tabs 25-</i>	
CAPHOSOL SOL.....	148	<i>100-200 mg</i>	66
CAPRELSA TAB 100MG	27	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPRELSA TAB 300MG	27	<i>31.25-125-200 mg</i>	66
<i>captopril & hydrochlorothiazide tab 25-15</i>		<i>carbidopa-levodopa-entacapone tabs</i>	
<i>mg</i>	37	<i>37.5-150-200 mg</i>	66
<i>captopril & hydrochlorothiazide tab 25-25</i>		<i>carbidopa-levodopa-entacapone tabs 50-</i>	
<i>mg</i>	37	<i>200-200 mg</i>	66
<i>captopril & hydrochlorothiazide tab 50-15</i>		<i>carbinoxamine maleate tab 4 mg</i>	135
<i>mg</i>	38	CARDIZEM LA TAB 120MG	48
<i>captopril & hydrochlorothiazide tab 50-25</i>		CARDURA XL TAB 4MG	126
<i>mg</i>	38	CARDURA XL TAB 8MG	126
<i>captopril tab 100 mg</i>	38	CAREFINE MIS 32GX4MM	88
<i>captopril tab 12.5 mg</i>	38	CAREFINE MIS 32GX5MM	88
		CAREFINE MIS 32GX6MM	88

CARESENS N TES	88	<i>cefprozil tab 500 mg</i>	12
CARESENS SOL CONTROL	88	<i>cefuroxime axetil tab 250 mg</i>	12
<i>carisoprodol tab 250 mg</i>	76	<i>cefuroxime axetil tab 500 mg</i>	12
<i>carisoprodol tab 350 mg</i>	76	<i>celecoxib cap 100 mg</i>	5
<i>carteolol hcl ophth soln 1%</i>	150	<i>celecoxib cap 200 mg</i>	5
<i>cartia xt cap 120/24hr</i>	48	<i>celecoxib cap 400 mg</i>	5
<i>cartia xt cap 180/24hr</i>	48	<i>celecoxib cap 50 mg</i>	5
<i>cartia xt cap 240/24hr</i>	48	CELLCEPT CAP 250MG	131
<i>cartia xt cap 300/24hr</i>	48	CELLCEPT SUS 200MG/ML	131
<i>carvedilol phosphate cap er 24hr 10 mg</i>	46	CELLCEPT TAB 500MG	131
<i>carvedilol phosphate cap er 24hr 20 mg</i>	46	CELONTIN CAP 300MG	56
<i>carvedilol phosphate cap er 24hr 40 mg</i>	46	CENTANY OIN 2%.....	143
<i>carvedilol phosphate cap er 24hr 80 mg</i>	46	<i>cephalexin cap 250 mg</i>	12
<i>carvedilol tab 12.5 mg</i>	46	<i>cephalexin cap 500 mg</i>	12
<i>carvedilol tab 25 mg</i>	46	<i>cephalexin cap 750 mg</i>	12
<i>carvedilol tab 3.125 mg</i>	46	<i>cephalexin for susp 125 mg/5ml</i>	12
<i>carvedilol tab 6.25 mg</i>	46	<i>cephalexin for susp 250 mg/5ml</i>	12
CASODEX TAB 50MG	24	<i>cephalexin tab 250 mg</i>	12
CAYSTON INH 75MG	137	<i>cephalexin tab 500 mg</i>	12
<i>caziant pak</i>	114	CESAMET CAP 1MG	121
<i>cefaclor cap 250 mg</i>	12	<i>cevimeline hcl cap 30 mg</i>	125
<i>cefaclor cap 500 mg</i>	12	CHANTIX PAK 0.5& 1MG	78
<i>cefaclor for susp 125 mg/5ml</i>	12	CHANTIX PAK 1MG	78
<i>cefaclor for susp 250 mg/5ml</i>	12	CHANTIX TAB 0.5MG.....	78
<i>cefaclor for susp 375 mg/5ml</i>	12	CHANTIX TAB 1MG	78
<i>cefadroxil cap 500 mg</i>	12	<i>chateal tab 0.15/30</i>	112
<i>cefadroxil for susp 250 mg/5ml</i>	12	CHEK-STIX TES CONTROL	88
<i>cefadroxil for susp 500 mg/5ml</i>	12	CHEMET CAP 100MG	129
<i>cefadroxil tab 1 gm</i>	12	CHEMSTRIP K TES	88
<i>cefdinir cap 300 mg</i>	12	CHEMSTRIP TES UGK	88
<i>cefdinir for susp 125 mg/5ml</i>	12	<i>chlordiazepoxide hcl cap 10 mg</i>	55
<i>cefdinir for susp 250 mg/5ml</i>	12	<i>chlordiazepoxide hcl cap 25 mg</i>	55
<i>cefditoren pivoxil tab 200 mg (base</i> <i>equivalent)</i>	12	<i>chlordiazepoxide hcl cap 5 mg</i>	55
<i>cefditoren pivoxil tab 400 mg (base</i> <i>equivalent)</i>	13	<i>chlordiazepoxide hcl-clidinium bromide</i> <i>cap 5-2.5 mg</i>	122
<i>cefixime cap 400 mg</i>	13	<i>chlordiazepoxide-amitriptyline tab 10-25</i> <i>mg</i>	62
<i>cefixime for susp 100 mg/5ml</i>	13	<i>chlordiazepoxide-amitriptyline tab 5-12.5</i> <i>mg</i>	61
<i>cefixime for susp 200 mg/5ml</i>	13	<i>chlorhexidine gluconate soln 0.12%</i> ..	148
<i>cefpodoxime proxetil tab 100 mg</i>	13	<i>chloroquine phosphate tab 250 mg</i>	17
<i>cefpodoxime proxetil tab 200 mg</i>	13	<i>chloroquine phosphate tab 500 mg</i>	17
<i>cefprozil for susp 125 mg/5ml</i>	12	<i>chlorpromazine hcl tab 10 mg</i>	69
<i>cefprozil for susp 250 mg/5ml</i>	12	<i>chlorpromazine hcl tab 100 mg</i>	69
<i>cefprozil tab 250 mg</i>	12	<i>chlorpromazine hcl tab 200 mg</i>	69
		<i>chlorpromazine hcl tab 25 mg</i>	69
		<i>chlorpromazine hcl tab 50 mg</i>	69
		<i>chlorthalidone tab 25 mg</i>	51

<i>chlorthalidone tab 50 mg</i>	51	.....	14
<i>chlorzoxazone tab 500 mg</i>	76	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	14
<i>cholestyramine light powder 4 gm/dose</i>	43	.....	14
.....	43	<i>citalopram hydrobromide oral soln 10</i>	62
<i>cholestyramine light powder packets 4</i>	43	<i>mg/5ml</i>	62
<i>gm</i>	43	<i>citalopram hydrobromide tab 10 mg</i>	62
<i>cholestyramine powder 4 gm/dose</i>	43	<i>(base equiv)</i>	62
<i>cholestyramine powder packets 4 gm</i> ..	43	<i>citalopram hydrobromide tab 20 mg</i>	62
<i>choline fenofibrate cap dr 135 mg</i>	43	<i>(base equiv)</i>	62
<i>(fenofibric acid equiv)</i>	43	<i>citalopram hydrobromide tab 40 mg</i>	62
<i>choline fenofibrate cap dr 45 mg</i>	43	<i>(base equiv)</i>	62
<i>(fenofibric acid equiv)</i>	43	<i>claravis cap 10mg</i>	141
CIALIS TAB 2.5MG.....	126	<i>claravis cap 20mg</i>	141
CIALIS TAB 5MG.....	126	<i>claravis cap 30mg</i>	141
<i>ciclodan sol 8%</i>	143	<i>claravis cap 40mg</i>	141
<i>ciclopirox gel 0.77%</i>	143	<i>clarithromycin for susp 125 mg/5ml</i> ...	13
<i>ciclopirox kit 8%</i>	143	<i>clarithromycin for susp 250 mg/5ml</i> ...	13
<i>ciclopirox olamine cream 0.77% (base</i>	143	<i>clarithromycin tab 250 mg</i>	13
<i>equiv)</i>	143	<i>clarithromycin tab 500 mg</i>	13
<i>ciclopirox olamine susp 0.77% (base</i>	143	<i>clarithromycin tab er 24hr 500 mg</i>	13
<i>equiv)</i>	143	<i>clemastine fumarate tab 2.68 mg</i>	135
<i>ciclopirox shampoo 1%</i>	143	CLEOCIN SUP 100MG.....	128
<i>ciclopirox solution 8%</i>	143	CLEVER CHEK TES.....	88
<i>cilostazol tab 100 mg</i>	129	CLEVER CHEK TES AUTO CD.....	88
<i>cilostazol tab 50 mg</i>	129	CLEVER CHEK TES VOICE.....	88
CILOXAN OIN 0.3% OP.....	149	CLEVER CHOIC TES MICRO.....	88
<i>cimetidine hcl soln 300 mg/5ml</i>	122	CLEVR CHOICE LIQ HIGH.....	88
<i>cimetidine tab 200 mg</i>	122	CLEVR CHOICE LIQ LOW.....	88
<i>cimetidine tab 300 mg</i>	122	CLEVR CHOICE TES AUTO-CD.....	89
<i>cimetidine tab 400 mg</i>	122	CLICKFINE MIS 31GX1/4.....	89
<i>cimetidine tab 800 mg</i>	122	CLICKFINE MIS 32GX5/32.....	89
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	109	CLIMARA PRO DIS WEEKLY.....	115
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	110	<i>clindamycin hcl cap 150 mg</i>	21
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	110	<i>clindamycin hcl cap 300 mg</i>	21
CIPRO (5%) SUS 250MG/5.....	13	<i>clindamycin hcl cap 75 mg</i>	21
CIPRO HC SUS OTIC.....	152	<i>clindamycin palmitate hcl for soln 75</i>	21
CIPRODEX SUS 0.3-0.1%.....	152	<i>mg/5ml (base equiv)</i>	21
<i>ciprofloxacin for oral susp 500 mg/5ml</i>	13	<i>clindamycin phosphate foam 1%</i>	141
<i>(10%) (10 gm/100ml)</i>	13	<i>clindamycin phosphate gel 1%</i>	141
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>	149	<i>clindamycin phosphate lotion 1%</i>	141
<i>equivalent)</i>	149	<i>clindamycin phosphate soln 1%</i>	141
<i>ciprofloxacin hcl otic soln 0.2% (base</i>	152	<i>clindamycin phosphate swab 1%</i>	141
<i>equivalent)</i>	152	<i>clindamycin phosphate vaginal cream 2%</i>	128
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	13	.....	128
.....	13	<i>clindamycin phosphate-benzoyl peroxide</i>	142
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	13	<i>gel 1.2-2.5%</i>	142
.....	13	<i>clindamycin phosphate-benzoyl peroxide</i>	141
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	13	<i>gel 1-5%</i>	141

<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	142	<i>clorazepate dipotassium tab 7.5 mg ...</i>	55
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	141	<i>clotrimazole cream 1%</i>	143
CLINDESSE CRE 2%	128	<i>clotrimazole soln 1%</i>	143
CLINISTIX TES STRIPS	89	<i>clotrimazole troche 10 mg</i>	16
<i>clobazam suspension 2.5 mg/ml</i>	56	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	143
<i>clobazam tab 10 mg</i>	56	<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	143
<i>clobazam tab 20 mg</i>	56	<i>clozapine tab 100 mg</i>	67
<i>clobetasol propionate emulsion foam 0.05%</i>	146	<i>clozapine tab 200 mg</i>	67
<i>clobetasol propionate foam 0.05%</i>	146	<i>clozapine tab 25 mg</i>	67
<i>clobetasol propionate gel 0.05%</i>	146	<i>clozapine tab 50 mg</i>	67
<i>clobetasol propionate lotion 0.05%</i> ...	146	COARTEM TAB 20-120MG	17
<i>clobetasol propionate shampoo 0.05%</i>	146	<i>codeine sulfate tab 30 mg</i>	7
<i>clobetasol propionate soln 0.05%</i>	146	<i>colchicine cap 0.6 mg</i>	5
<i>clobetasol propionate spray 0.05%</i> ...	146	<i>colchicine tab 0.6 mg</i>	5
<i>clomiphene citrate tab 50 mg</i>	116	<i>colchicine w/ probenecid tab 0.5-500 mg</i>	5
<i>clomipramine hcl cap 25 mg</i>	55	<i>colesevelam hcl packet for susp 3.75 gm</i>	43
<i>clomipramine hcl cap 50 mg</i>	55	<i>colesevelam hcl tab 625 mg</i>	43
<i>clomipramine hcl cap 75 mg</i>	56	<i>colestipol hcl granule packets 5 gm</i>	43
<i>clonazepam orally disintegrating tab 0.125 mg</i>	55	<i>colestipol hcl granules 5 gm</i>	43
<i>clonazepam orally disintegrating tab 0.25 mg</i>	55	<i>colestipol hcl tab 1 gm</i>	43
<i>clonazepam orally disintegrating tab 0.5 mg</i>	55	<i>colocort ene 100mg</i>	123
<i>clonazepam orally disintegrating tab 1 mg</i>	55	COLY-MYCIN S SUS OTIC	152
<i>clonazepam orally disintegrating tab 2 mg</i>	55	COMBIGAN SOL 0.2/0.5%	152
<i>clonazepam tab 0.5 mg</i>	55	COMBIPATCH DIS	115
<i>clonazepam tab 1 mg</i>	55	COMBIPATCH DIS .05/.14	115
<i>clonazepam tab 2 mg</i>	55	COMBIVENT AER 20-100	134
<i>clonidine hcl tab 0.1 mg</i>	39	COMETRIQ KIT 100MG	28
<i>clonidine hcl tab 0.2 mg</i>	39	COMETRIQ KIT 140MG	28
<i>clonidine hcl tab 0.3 mg</i>	39	COMETRIQ KIT 60MG	28
<i>clonidine hcl tab er 12hr 0.1 mg</i>	71	COMFORT EZ MIS 31GX5MM	89
<i>clonidine td patch weekly 0.1 mg/24hr</i>	39	COMFORT EZ MIS 31GX6MM	89
<i>clonidine td patch weekly 0.2 mg/24hr</i>	39	COMFORT EZ MIS 32GX4MM	89
<i>clonidine td patch weekly 0.3 mg/24hr</i>	39	COMFORT EZ MIS 32GX5MM	89
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	130	COMFORT EZ MIS 32GX6MM	89
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	130	COMFORT EZ MIS 32GX8MM	89
<i>clorazepate dipotassium tab 15 mg</i>	55	COMFORT EZ MIS 33GX4MM	89
<i>clorazepate dipotassium tab 3.75 mg</i> ..	55	COMFORT EZ MIS 33GX5MM	89
		COMFORT EZ MIS 33GX6MM	89
		COMFORT EZ MIS 33GX8MM	89
		COMPLERA TAB	17
		<i>compro sup 25mg</i>	121
		CONCEPTROL GEL 4%	111
		CONDYLOX GEL 0.5%	147
		<i>constulose sol 10gm/15</i>	123

CONTOUR HIGH LIQ CONTROL.....	89	<i>cryselle-28 tab 28 tabs.....</i>	112
CONTOUR LOW LIQ CONTROL.....	89	CUPRIMINE CAP 250MG.....	130
CONTOUR NEXT SOL LEVEL 1.....	89	<i>cyclafem tab 1/35.....</i>	113
CONTOUR NEXT SOL LEVEL 2.....	89	<i>cyclafem tab 7/7/7</i>	114
CONTOUR NORM LIQ CONTROL.....	89	<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	76
CONTOUR TES BLD GLUC	89	<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	76
CONTOUR TES NEXT.....	89	<i>cyclobenzaprine hcl tab 10 mg</i>	76
CONTROL AST TES	89	<i>cyclobenzaprine hcl tab 5 mg</i>	76
CONTROL HIGH SOL UNISTRIP.....	89	<i>cyclobenzaprine hcl tab 7.5 mg</i>	76
CONTROL LOW SOL UNISTRIP.....	89	CYCLOMYDRIL SOL OP	151
CONTROL NORM SOL EASY STP.....	90	<i>cyclopentolate hcl ophth soln 0.5% ...</i>	151
CONTROL SOL LIQ HI/MID/L.....	90	<i>cyclopentolate hcl ophth soln 1%.....</i>	151
CONTROL SOL LIQ HIGH/LOW.....	90	<i>cyclopentolate hcl ophth soln 2%.....</i>	151
CONTROL SOL LIQ MID	90	CYCLOPHOSPH CAP 25MG.....	22
CONTROL SOL NORMAL.....	90	CYCLOPHOSPH CAP 50MG.....	22
CONTROL TES.....	90	<i>cyclophosphamide cap 25 mg.....</i>	22
COPIKTRA CAP 15MG	28	<i>cyclophosphamide cap 50 mg.....</i>	22
COPIKTRA CAP 25MG	28	CYCLOSET TAB 0.8MG.....	82
CORDRAN 80X3 TAP 4MCG/CM.....	145	<i>cyclosporine cap 100 mg</i>	131
<i>cortic-nd dro.....</i>	152	<i>cyclosporine cap 25 mg</i>	131
CORTIFOAM AER 90MG	123	<i>cyclosporine modified cap 100 mg</i>	131
<i>cortisone acetate tab 25 mg</i>	116	<i>cyclosporine modified cap 25 mg</i>	131
CORTISPORIN CRE 0.5%.....	142	<i>cyclosporine modified cap 50 mg</i>	131
CORTISPORIN OIN 1%.....	142	<i>cyclosporine modified oral soln 100</i>	
COSOPT PF SOL 2%-0.5%	150	<i>mg/ml</i>	131
COTELLIC TAB 20MG	28	<i>cyproheptadine hcl syrup 2 mg/5ml ..</i>	135
COUMADIN TAB 10MG	128	<i>cyproheptadine hcl tab 4 mg</i>	135
COUMADIN TAB 1MG	128	CYSTADANE POW	118
COUMADIN TAB 2.5MG	128	CYSTAGON CAP 150MG	118
COUMADIN TAB 2MG	128	CYSTAGON CAP 50MG	118
COUMADIN TAB 3MG	128	CYTOMEL TAB 25MCG	119
COUMADIN TAB 4MG	128	CYTOMEL TAB 50MCG	119
COUMADIN TAB 5MG	128	CYTOMEL TAB 5MCG	119
COUMADIN TAB 6MG	128	<i>cytra k gra crystals</i>	126
COUMADIN TAB 7.5MG	128	<i>cytra-2 sol.....</i>	127
CREON CAP 12000UNT.....	124	<i>cytra-k sol.....</i>	127
CREON CAP 24000UNT.....	124	D	
CREON CAP 3000UNIT	124	<i>dalfampridine tab er 12hr 10 mg</i>	76
CREON CAP 6000UNIT	124	DALIRESP TAB 250MCG.....	139
CRINONE GEL 4% VAG	119	DALIRESP TAB 500MCG.....	139
CRINONE GEL 8% VAG	119	<i>danazol cap 100 mg.....</i>	114
<i>cromolyn sodium ophth soln 4%.....</i>	150	<i>danazol cap 200 mg.....</i>	114
<i>cromolyn sodium oral conc 100 mg/5ml</i>		<i>danazol cap 50 mg</i>	114
.....	124	<i>dantrolene sodium cap 100 mg.....</i>	77
<i>cromolyn sodium soln nebu 20 mg/2ml</i>		<i>dantrolene sodium cap 25 mg</i>	76
.....	138	<i>dantrolene sodium cap 50 mg</i>	77
<i>crotan lot 10%.....</i>	148	<i>dapsone gel 5%</i>	142
		<i>dapsone tab 100 mg</i>	21

<i>dapsone tab 25 mg</i>	21	<i>desonide lotion 0.05%</i>	145
DARAPRIM TAB 25MG	21	<i>desonide oint 0.05%</i>	145
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	127	<i>desoximetasone cream 0.05%</i>	145
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	127	<i>desoximetasone cream 0.25%</i>	144
<i>dasetta tab 1/35</i>	113	<i>desoximetasone gel 0.05%</i>	144
<i>dasetta tab 7/7/7</i>	114	<i>desoximetasone oint 0.05%</i>	145
DAURISMO TAB 100MG.....	34	<i>desoximetasone oint 0.25%</i>	144
DAURISMO TAB 25MG.....	34	<i>desoximetasone spray 0.25%</i>	145
<i>daysee tab</i>	111	<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	64
DAYTRANA DIS 10MG/9HR	71	<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	63
DAYTRANA DIS 15MG/9HR	71	<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	63
DAYTRANA DIS 20MG/9HR	71	<i>desvenlafaxine tab er 24hr 100 mg</i>	64
DAYTRANA DIS 30MG/9HR	71	<i>desvenlafaxine tab er 24hr 50 mg</i>	64
<i>deblitane tab 0.35mg</i>	113	DEXAMETHASON CON 1MG/ML.....	116
<i>deferasirox tab for oral susp 125 mg</i> . 129		<i>dexamethasone elixir 0.5 mg/5ml</i>	116
<i>deferasirox tab for oral susp 250 mg</i> . 129		<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	149
<i>deferasirox tab for oral susp 500 mg</i> . 129		<i>dexamethasone soln 0.5 mg/5ml</i>	116
DELSTRIGO TAB.....	17	<i>dexamethasone tab 0.5 mg</i>	116
<i>delyla tab 0.1-0.02</i>	111	<i>dexamethasone tab 0.75 mg</i>	116
<i>demeclocycline hcl tab 150 mg</i>	15	<i>dexamethasone tab 1 mg</i>	116
<i>demeclocycline hcl tab 300 mg</i>	15	<i>dexamethasone tab 1.5 mg</i>	116
DENAVIR CRE 1%	147	<i>dexamethasone tab 2 mg</i>	116
DEPAKOTE ER TAB 250MG.....	56	<i>dexamethasone tab 4 mg</i>	116
DEPAKOTE ER TAB 500MG.....	56	<i>dexamethasone tab 6 mg</i>	116
DEPAKOTE SPR CAP 125MG	56	<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	116
DEPAKOTE TAB 125MG DR	56	<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	116
DEPAKOTE TAB 250MG DR	56	<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	116
DEPAKOTE TAB 500MG DR	56	<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	71
DESCOVY TAB 200/25.....	17	<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	71
<i>desipramine hcl tab 10 mg</i>	65	<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	71
<i>desipramine hcl tab 100 mg</i>	65	<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	71
<i>desipramine hcl tab 150 mg</i>	65	<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	71
<i>desipramine hcl tab 25 mg</i>	65	<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	71
<i>desipramine hcl tab 50 mg</i>	65	<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	71
<i>desipramine hcl tab 75 mg</i>	65		
<i>desmopressin acetate nasal spray soln 0.01%</i>	120		
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	121		
<i>desmopressin acetate tab 0.1 mg</i>	121		
<i>desmopressin acetate tab 0.2 mg</i>	121		
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	110		
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	112		
<i>desonide cream 0.05%</i>	145		

<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	71	<i>mg</i>	6
<i>dexmethylphenidate hcl tab 10 mg</i>	71	<i>diclofenac sodium tab er 24hr 100 mg</i> ..	6
<i>dexmethylphenidate hcl tab 2.5 mg</i>	71	<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	7
<i>dexmethylphenidate hcl tab 5 mg</i>	71	<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	7
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	71	<i>dicloxacillin sodium cap 250 mg</i>	14
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	71	<i>dicloxacillin sodium cap 500 mg</i>	14
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	71	<i>dicyclomine hcl cap 10 mg</i>	122
<i>dextroamphetamine sulfate tab 10 mg</i> ..	72	<i>dicyclomine hcl oral soln 10 mg/5ml</i> ..	122
<i>dextroamphetamine sulfate tab 5 mg</i> ..	72	<i>dicyclomine hcl tab 20 mg</i>	122
DIACOMIT CAP 250MG	56	<i>didanosine delayed release capsule 200 mg</i>	18
DIACOMIT CAP 500MG	56	<i>didanosine delayed release capsule 250 mg</i>	18
DIACOMIT PAK 250MG	56	<i>didanosine delayed release capsule 400 mg</i>	18
DIACOMIT PAK 500MG	56	DIFICID TAB 200MG	13
DIASTAT ACDL GEL 12.5-20	56	<i>diflorasone diacetate cream 0.05%</i> ...	145
DIASTAT ACDL GEL 5-10MG	56	<i>diflorasone diacetate oint 0.05%</i>	146
DIASTAT PED GEL 2.5M GEL	56	<i>diflunisal tab 500 mg</i>	6
DIASTIX TES STRIPS	90	<i>digitek tab 0.125mg</i>	50
DIATRUE CONT SOL LEVEL 1	90	<i>digitek tab 0.25mg</i>	50
DIATRUE CONT SOL LEVEL 2	90	<i>digox tab 0.125mg</i>	50
DIATRUE CONT SOL LEVEL 3	90	<i>digox tab 0.25mg</i>	50
DIATRUE PLUS TES STRIPS	90	<i>digoxin oral soln 0.05 mg/ml</i>	50
<i>diazepam oral soln 1 mg/ml</i>	55	<i>digoxin tab 125 mcg (0.125 mg)</i>	50
<i>diazepam rectal gel delivery system 10 mg</i>	56	<i>digoxin tab 250 mcg (0.25 mg)</i>	50
<i>diazepam rectal gel delivery system 2.5 mg</i>	56	<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	74
<i>diazepam rectal gel delivery system 20 mg</i>	56	DILANTIN CAP 100MG	57
<i>diazepam tab 10 mg</i>	55	DILANTIN CAP 30MG.....	57
<i>diazepam tab 2 mg</i>	55	DILANTIN CHW 50MG	57
<i>diazepam tab 5 mg</i>	55	DILANTIN-125 SUS 125/5ML.....	57
DICLEGIS TAB 10-10MG.....	121	<i>diltiazem hcl cap er 12hr 120 mg</i>	48
<i>diclofenac epolamine patch 1.3%</i>	7	<i>diltiazem hcl cap er 12hr 60 mg</i>	48
<i>diclofenac potassium tab 50 mg</i>	5	<i>diltiazem hcl cap er 12hr 90 mg</i>	48
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	142	<i>diltiazem hcl cap er 24hr 180 mg</i>	48
<i>diclofenac sodium gel 1%</i>	7	<i>diltiazem hcl cap er 24hr 240 mg</i>	49
<i>diclofenac sodium ophth soln 0.1%</i> ...	149	<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	49
<i>diclofenac sodium soln 1.5%</i>	7	<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	49
<i>diclofenac sodium tab delayed release 25 mg</i>	5	<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	49
<i>diclofenac sodium tab delayed release 50 mg</i>	5	<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	49
<i>diclofenac sodium tab delayed release 75 mg</i>	6	<i>diltiazem hcl coated beads cap er 24hr</i>	

360 mg.....	49	250 mg.....	57
diltiazem hcl coated beads tab er 24hr		divalproex sodium tab delayed release	
180 mg.....	49	500 mg.....	57
diltiazem hcl coated beads tab er 24hr		divalproex sodium tab er 24 hr 250 mg	
240 mg.....	49	.....	57
diltiazem hcl coated beads tab er 24hr		divalproex sodium tab er 24 hr 500 mg	
300 mg.....	49	.....	57
diltiazem hcl coated beads tab er 24hr		DIVIGEL GEL 0.25MG.....	115
360 mg.....	49	DIVIGEL GEL 0.5MG.....	115
diltiazem hcl coated beads tab er 24hr		DIVIGEL GEL 1MG/GM.....	115
420 mg.....	49	dofetilide cap 125 mcg (0.125 mg)	42
diltiazem hcl extended release beads cap		dofetilide cap 250 mcg (0.25 mg)	42
er 24hr 120 mg.....	49	dofetilide cap 500 mcg (0.5 mg)	42
diltiazem hcl extended release beads cap		donepezil hydrochloride orally	
er 24hr 180 mg.....	49	disintegrating tab 10 mg	60
diltiazem hcl extended release beads cap		donepezil hydrochloride orally	
er 24hr 240 mg.....	49	disintegrating tab 5 mg	60
diltiazem hcl extended release beads cap		donepezil hydrochloride tab 10 mg.....	61
er 24hr 300 mg.....	49	donepezil hydrochloride tab 23 mg.....	61
diltiazem hcl extended release beads cap		donepezil hydrochloride tab 5 mg	60
er 24hr 360 mg.....	49	DOPTELET TAB 20MG.....	130
diltiazem hcl extended release beads cap		dorzolamide hcl ophth soln 2%.....	151
er 24hr 420 mg.....	49	dorzolamide hcl-timolol maleate ophth	
diltiazem hcl tab 120 mg	49	sol 22.3-6.8 mg/ml pf.....	151
diltiazem hcl tab 30 mg.....	49	dorzolamide hcl-timolol maleate ophth	
diltiazem hcl tab 60 mg.....	49	soln 22.3-6.8 mg/ml.....	151
diltiazem hcl tab 90 mg.....	49	doxazosin mesylate tab 1 mg	39
dilt-xr cap 120mg.....	48	doxazosin mesylate tab 2 mg	39
dilt-xr cap 180mg.....	48	doxazosin mesylate tab 4 mg	39
dilt-xr cap 240mg.....	48	doxazosin mesylate tab 8 mg	39
DIPENTUM CAP 250MG.....	123	doxepin hcl cap 10 mg	65
diphenoxylate w/ atropine liq 2.5-0.025		doxepin hcl cap 100 mg.....	65
mg/5ml.....	121	doxepin hcl cap 150 mg.....	65
diphenoxylate w/ atropine tab 2.5-0.025		doxepin hcl cap 25 mg	65
mg	121	doxepin hcl cap 50 mg	65
dipyridamole tab 25 mg	130	doxepin hcl cap 75 mg	65
dipyridamole tab 50 mg	130	doxepin hcl conc 10 mg/ml	65
dipyridamole tab 75 mg	130	doxepin hcl cream 5%.....	147
disopyramide phosphate cap 100 mg ..	42	doxercalciferol cap 0.5 mcg.....	117
disopyramide phosphate cap 150 mg ..	42	doxercalciferol cap 1 mcg	117
disulfiram tab 250 mg.....	77	doxercalciferol cap 2.5 mcg.....	117
disulfiram tab 500 mg	77	doxycycline (rosacea) cap delayed	
DIURIL SUS 250/5ML.....	51	release 40 mg.....	147
divalproex sodium cap delayed release		doxycycline hyclate cap 100 mg	15
sprinkle 125 mg	57	doxycycline hyclate cap 50 mg	15
divalproex sodium tab delayed release		doxycycline hyclate tab 100 mg.....	15
125 mg.....	57	doxycycline hyclate tab 150 mg.....	15
divalproex sodium tab delayed release		doxycycline hyclate tab 20 mg.....	15

<i>doxycycline hyclate tab 75 mg</i>	15
<i>doxycycline hyclate tab delayed release 100 mg</i>	15
<i>doxycycline hyclate tab delayed release 150 mg</i>	15
<i>doxycycline hyclate tab delayed release 200 mg</i>	15
<i>doxycycline hyclate tab delayed release 75 mg</i>	15
<i>doxycycline monohydrate cap 100 mg</i> .	15
<i>doxycycline monohydrate cap 150 mg</i> .	15
<i>doxycycline monohydrate cap 50 mg</i> ...	15
<i>doxycycline monohydrate cap 75 mg</i> ...	15
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	15
<i>doxycycline monohydrate tab 100 mg</i> .	15
<i>doxycycline monohydrate tab 150 mg</i> .	15
<i>doxycycline monohydrate tab 50 mg</i> ...	15
<i>doxycycline monohydrate tab 75 mg</i> ...	15
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	121
<i>dronabinol cap 10 mg</i>	121
<i>dronabinol cap 2.5 mg</i>	121
<i>dronabinol cap 5 mg</i>	121
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	112
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	111
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	112
DROXIA CAP 200MG	34
DROXIA CAP 300MG	34
DROXIA CAP 400MG	34
DUAVEE TAB 0.45-20.....	115
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	64
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	64
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	64
DUO-CARE LIQ LEVEL1/2	90
DUO-CARE TES	90
DUREZOL EMU 0.05%	149
<i>dutasteride cap 0.5 mg</i>	126
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	126
DUTOPROL TAB 100-12.5	46
DUTOPROL TAB 25-12.5.....	46

DUTOPROL TAB 50-12.5	46
DYMISTA SPR 137-50.....	139
E	
<i>e.e.s. 400 tab 400mg</i>	13
EASY COMFORT MIS 31GX1/4	90
EASY COMFORT MIS 31GX3/16	90
EASY COMFORT MIS 32GX5/32	90
EASY PLUS II SOL HIGH	90
EASY PLUS II SOL LOW	90
EASY PLUS II TES BLD GLUC.....	90
EASY PLUS TES BLD GLUC	90
EASY STEP TES	90
EASY TALK SOL HIGH.....	90
EASY TALK SOL LOW.....	90
EASY TALK SOL NORMAL	90
EASY TALK TES BLD GLUC	91
EASY TOUCH MIS 29GX1/2	91
EASY TOUCH MIS 31GX1/4	91
EASY TOUCH MIS 31GX3/16	91
EASY TOUCH MIS 32GX1/4	91
EASY TOUCH MIS 32GX3/16	91
EASY TOUCH MIS 32GX5/32	91
EASY TOUCH MIS 32GX6MM	91
EASY TOUCH SOL HIGH/LOW	91
EASY TOUCH TES STRIPS	91
EASY TRAK SOL HIGH	91
EASY TRAK SOL LOW	91
EASY TRAK SOL NORMAL.....	91
EASY TRAK TES BLD GLUC.....	91
EASYGLUCO SOL HIGH.....	91
EASYGLUCO SOL LOW	91
EASYGLUCO SOL NORMAL	91
EASYGLUCO TES	91
EASYGLUCO TES PLUS	91
EASYMAX 15 SOL LEVEL 1	91
EASYMAX 15 SOL LEVEL 2	91
EASYMAX 15 TES.....	91
EASYMAX SOL HIGH	91
EASYMAX SOL LOW	91
EASYMAX SOL NORMAL	92
EASYMAX TES	92
EASYPLUS TES BLD GLUC	92
EASYPRO PLUS TES	92
EASYPRO TES BLD GLUC	92
EASYSTEP HGH SOL CONTROL	92
EASYSTEP LOW SOL CONTROL	92
<i>econazole nitrate cream 1%</i>	143
<i>econtra ez tab 1.5mg</i>	110

EDARBI TAB 40MG	42	<i>enalapril maleate & hydrochlorothiazide</i>	
EDARBI TAB 80MG	42	<i>tab 5-12.5 mg.....</i>	38
EDARBYCLOR TAB 40-12.5	41	<i>enalapril maleate tab 10 mg.....</i>	38
EDARBYCLOR TAB 40-25MG.....	41	<i>enalapril maleate tab 2.5 mg.....</i>	38
EDECIN TAB 25MG	51	<i>enalapril maleate tab 20 mg.....</i>	38
EDLUAR SUB 10MG.....	74	<i>enalapril maleate tab 5 mg</i>	38
EDLUAR SUB 5MG	74	ENDOMETRIN SUP 100MG.....	119
<i>efavirenz cap 200 mg</i>	18	<i>enpresse-28 tab</i>	114
<i>efavirenz cap 50 mg</i>	18	<i>enskyce tab</i>	112
<i>efavirenz tab 600 mg</i>	18	<i>entacapone tab 200 mg.....</i>	66
ELEMENT CONT LIQ NORMAL	92	<i>entecavir tab 0.5 mg.....</i>	20
ELEMENT LIQ HIGH	92	<i>entecavir tab 1 mg</i>	20
ELEMENT LIQ LOW	92	ENTERO VU SUS 24%	132
ELEMENT TES	92	ENTRESTO TAB 24-26MG.....	51
ELEMNT COMPA SOL LEVEL 2.....	92	ENTRESTO TAB 49-51MG.....	51
ELEMNT COMPA SOL LEVEL 3.....	92	ENTRESTO TAB 97-103MG.....	51
ELEMNT COMPA TES STRIPS.....	92	<i>enulose sol 10gm/15.....</i>	124
ELESTRIN GEL 0.06%	115	EPANED SOL 1MG/ML.....	38
<i>eletriptan hydrobromide tab 20 mg (base</i>		EPCLUSA TAB 400-100	20
<i>equivalent).....</i>	74	EPIDIOLEX SOL 100MG/ML	57
<i>eletriptan hydrobromide tab 40 mg (base</i>		EPIFOAM AER 1%	144
<i>equivalent).....</i>	75	<i>epinastine hcl ophth soln 0.05%</i>	150
<i>elinest tab</i>	112	<i>epinephrine solution auto-injector 0.15</i>	
ELIQUIS TAB 2.5MG	128	<i>mg/0.3ml (1:2000).....</i>	134
ELIQUIS TAB 5MG	128	<i>epinephrine solution auto-injector 0.3</i>	
ELIXOPHYLLIN ELX 80/15ML	140	<i>mg/0.3ml (1:1000).....</i>	134
ELLA TAB 30MG	110	<i>epitol tab 200mg</i>	57
ELMIRON CAP 100MG	127	EPIVIR HBV SOL 5MG/ML.....	20
EMBRACE CNTR LIQ HIGH	92	EPIVIR SOL 10MG/ML.....	18
EMBRACE EVO LIQ LEVEL 1	92	<i>eplerenone tab 25 mg</i>	39
EMBRACE EVO LIQ LEVEL 2	92	<i>eplerenone tab 50 mg</i>	39
EMBRACE EVO TES	92	<i>eprosartan mesylate tab 600 mg</i>	42
EMBRACE PRO LIQ GLUCOSE	92	<i>eq aspirin tab 500mg ec</i>	130
EMBRACE PRO TES	92	EQUETRO CAP 100MG	76
EMBRACE SOL LOW	92	EQUETRO CAP 200MG	76
EMBRACE TES BLD GLUC.....	92	EQUETRO CAP 300MG	76
EMCYT CAP 140MG	22	<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	
EMEND CAP 125MG	121	.....	133
EMEND CAP 40MG	121	<i>ergotamine w/ caffeine tab 1-100 mg.</i>	74
EMEND CAP 80MG	121	ERIVEDGE CAP 150MG	34
EMEND TRIPAC PAK 80 & 125	121	ERLEADA TAB 60MG	24
<i>emoquette tab</i>	112	<i>erlotinib hcl tab 100 mg (base</i>	
EMSAM DIS 12MG/24H	62	<i>equivalent).....</i>	28
EMSAM DIS 6MG/24HR	62	<i>erlotinib hcl tab 150 mg (base</i>	
EMSAM DIS 9MG/24HR	62	<i>equivalent).....</i>	28
EMTRIVA CAP 200MG	18	<i>erlotinib hcl tab 25 mg (base equivalent)</i>	
<i>enalapril maleate & hydrochlorothiazide</i>		.....	28
<i>tab 10-25 mg</i>	38	<i>errin tab 0.35mg</i>	113

ERTACZO CRE 2%	143
ery pad 2%	142
ery-tab tab 250mg ec	13
ery-tab tab 333mg ec	13
ery-tab tab 500mg ec	13
erythrocin tab 250mg	13
erythromycin ethylsuccinate for susp 200 mg/5ml.....	13
erythromycin ethylsuccinate for susp 400 mg/5ml.....	13
erythromycin ethylsuccinate tab 400 mg	13
erythromycin gel 2%	142
erythromycin ophth oint 5 mg/gm	149
erythromycin pads 2%	142
erythromycin soln 2%	142
erythromycin tab 250 mg	13
erythromycin tab 500 mg	13
erythromycin w/ delayed release particles cap 250 mg	13
ESBRIET CAP 267MG	139
ESBRIET TAB 267MG	139
ESBRIET TAB 801MG	139
escitalopram oxalate soln 5 mg/5ml (base equiv)	62
escitalopram oxalate tab 10 mg (base equiv).....	62
escitalopram oxalate tab 20 mg (base equiv).....	63
escitalopram oxalate tab 5 mg (base equiv).....	62
esgic cap.....	5
esomeprazole magnesium cap delayed release 20 mg (base eq)	125
esomeprazole magnesium cap delayed release 40 mg (base eq)	125
estarylla tab 0.25-35	113
estazolam tab 1 mg	73
estazolam tab 2 mg	73
estradiol & norethindrone acetate tab 0.5-0.1 mg.....	114
estradiol & norethindrone acetate tab 1-0.5 mg	114
estradiol tab 0.5 mg	115
estradiol tab 1 mg	115
estradiol tab 2 mg	115
estradiol td patch twice weekly 0.025 mg/24hr	115

estradiol td patch twice weekly 0.0375 mg/24hr.....	116
estradiol td patch twice weekly 0.05 mg/24hr.....	115
estradiol td patch twice weekly 0.075 mg/24hr.....	115
estradiol td patch twice weekly 0.1 mg/24hr.....	115
estradiol td patch weekly 0.025 mg/24hr	116
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	116
estradiol td patch weekly 0.05 mg/24hr	116
estradiol td patch weekly 0.06 mg/24hr	116
estradiol td patch weekly 0.075 mg/24hr	116
estradiol td patch weekly 0.1 mg/24hr	116
estradiol vaginal cream 0.1 mg/gm ...	116
ESTRING MIS 2MG.....	116
ESTROGEL GEL	116
eszopiclone tab 1 mg	74
eszopiclone tab 2 mg	74
eszopiclone tab 3 mg	74
ethacrynic acid tab 25 mg.....	51
ethambutol hcl tab 100 mg	19
ethambutol hcl tab 400 mg	19
ethosuximide cap 250 mg	57
ethosuximide soln 250 mg/5ml.....	57
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg.....	113
etodolac cap 200 mg.....	6
etodolac cap 300 mg.....	6
etodolac tab 400 mg	6
etodolac tab 500 mg	6
etodolac tab er 24hr 400 mg	6
etodolac tab er 24hr 500 mg	6
etodolac tab er 24hr 600 mg	6
etoposide cap 50 mg.....	34
EUCRISA OIN 2%	144
EURAX CRE 10%	148
EURAX LOT 10%	148
EVAMIST SPR 1.53MG	116
EVENCARE + TES BLD GLUC	92
EVENCARE G2 SOL LOW/HIGH	92
EVENCARE G2 TES.....	93

EVENCARE G3 SOL LOW/HIGH	93	<i>felbamate susp 600 mg/5ml</i>	57
EVENCARE SOL LIQ LOW/HIGH	93	<i>felbamate tab 400 mg</i>	57
EVENCARE TES BLD GLUC	93	<i>felbamate tab 600 mg</i>	57
EVOLUTION SOL NORMAL.....	93	FELBATOL TAB 400MG.....	57
EVOLUTION TES AUTOCODE	93	FELBATOL TAB 600MG.....	57
EXACTECH TES	93	<i>felodipine tab er 24hr 10 mg</i>	48
EXACTECH TES R-S-G	93	<i>felodipine tab er 24hr 2.5 mg</i>	48
EXELDERM SOL 1%	143	<i>felodipine tab er 24hr 5 mg</i>	48
<i>exemestane tab 25 mg</i>	25	FEM PH GEL.....	127
EXJADE TAB 125MG.....	129	FEMARA TAB 2.5MG	25
EXJADE TAB 250MG.....	129	FEMRING MIS 0.05/24H	116
EXJADE TAB 500MG.....	129	FEMRING MIS 0.1MG/24.....	116
<i>exotic-hc dro otic</i>	152	<i>fenofibrate cap 150 mg</i>	43
EZ SMART PLS TES BLD GLUC.....	93	<i>fenofibrate cap 50 mg</i>	43
EZ SMART TES BLD GLUC.....	93	<i>fenofibrate micronized cap 130 mg</i>	43
<i>ezetimibe tab 10 mg</i>	43	<i>fenofibrate micronized cap 134 mg</i>	43
<i>ezetimibe-simvastatin tab 10-10 mg</i> ...	44	<i>fenofibrate micronized cap 200 mg</i>	43
<i>ezetimibe-simvastatin tab 10-20 mg</i> ...	44	<i>fenofibrate micronized cap 43 mg</i>	43
<i>ezetimibe-simvastatin tab 10-40 mg</i> ...	44	<i>fenofibrate micronized cap 67 mg</i>	43
<i>ezetimibe-simvastatin tab 10-80 mg</i> ...	44	<i>fenofibrate tab 120 mg</i>	43
E-Z-PAQUE SUS 60%.....	132	<i>fenofibrate tab 145 mg</i>	43
F		<i>fenofibrate tab 160 mg</i>	43
<i>fa-8 tab 0.8mg</i>	133	<i>fenofibrate tab 40 mg</i>	43
FABIOR AER 0.1%	142	<i>fenofibrate tab 48 mg</i>	43
FALESSA KIT	111	<i>fenofibrate tab 54 mg</i>	43
<i>fallback tab 1.5mg</i>	110	<i>fenopropfen calcium cap 400 mg</i>	6
<i>falmina tab</i>	111	<i>fenopropfen calcium tab 600 mg</i>	6
<i>famciclovir tab 125 mg</i>	20	<i>fentanyl citrate lozenge on a handle 1200</i>	1200
<i>famciclovir tab 250 mg</i>	20	<i>mcg</i>	8
<i>famciclovir tab 500 mg</i>	20	<i>fentanyl citrate lozenge on a handle 1600</i>	1600
<i>famotidine for susp 40 mg/5ml</i>	122	<i>mcg</i>	8
<i>famotidine tab 20 mg</i>	122	<i>fentanyl citrate lozenge on a handle 200</i>	200
<i>famotidine tab 40 mg</i>	123	<i>mcg</i>	7
FANAPT PAK	68	<i>fentanyl citrate lozenge on a handle 400</i>	400
FANAPT TAB 10MG	68	<i>mcg</i>	7
FANAPT TAB 12MG	68	<i>fentanyl citrate lozenge on a handle 600</i>	600
FANAPT TAB 1MG	68	<i>mcg</i>	8
FANAPT TAB 2MG	68	<i>fentanyl citrate lozenge on a handle 800</i>	800
FANAPT TAB 4MG	68	<i>mcg</i>	8
FANAPT TAB 6MG	68	<i>fentanyl td patch 72hr 100 mcg/hr</i>	8
FANAPT TAB 8MG	68	<i>fentanyl td patch 72hr 12 mcg/hr</i>	8
FARESTON TAB 60MG	24	<i>fentanyl td patch 72hr 25 mcg/hr</i>	8
FARYDAK CAP 10MG	34	<i>fentanyl td patch 72hr 50 mcg/hr</i>	8
FARYDAK CAP 15MG	35	<i>fentanyl td patch 72hr 75 mcg/hr</i>	8
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flunisolide nasal soln 25 mcg/act (0.025%).....	139	flurazepam hcl cap 15 mg.....	73
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fluocinolone acetonide cream 0.01%.	145	flurbiprofen sodium ophth soln 0.03%	149
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fluocinolone acetonide soln 0.01% ...	145	fluticasone propionate lotion 0.05% ..	145
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fluocinonide emulsified base cream 0.05%.....	145	fluticasone propionate oint 0.005% ...	145
fluocinonide gel 0.05%.....	145	fluticasone-salmeterol aer powder ba 113-14 mcg/act.....	140
fluocinonide oint 0.05%.....	145	fluticasone-salmeterol aer powder ba 232-14 mcg/act.....	140
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<i>fluvoxamine maleate cap er 24hr 150 mg</i>	56
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<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	38
<i>fosinopril sodium tab 10 mg</i>	38
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<i>furosemide oral soln 8 mg/ml</i>	51
<i>furosemide tab 20 mg</i>	51
<i>furosemide tab 40 mg</i>	51
<i>furosemide tab 80 mg</i>	51

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<i>gabapentin cap 300 mg</i>	57
<i>gabapentin cap 400 mg</i>	57
<i>gabapentin oral soln 250 mg/5ml</i>	57
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<i>gengraf sol 100mg/ml</i>	131	GLUCOCARD SOL NORMAL.....	95
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<i>gentamicin sulfate cream 0.1%</i>	143	GLUCOCARD TES EXPRESSI	95
<i>gentamicin sulfate oint 0.1%</i>	143	GLUCOCARD TES SHINE	95
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GLUC CONTROL SOL NORMAL	95	<i>griseofulvin ultramicrosize tab 125 mg</i> 16	
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mg 8
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hydrocodone-acetaminophen tab 5-325 mg 8
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<i>hydroxyzine pamoate cap 25 mg</i>	135
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<i>ibuprofen tab 400 mg</i>	6
<i>ibuprofen tab 600 mg</i>	6
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<i>imipramine pamoate cap 125 mg</i>	65
<i>imipramine pamoate cap 150 mg</i>	65
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<i>imiquimod cream 5%</i>	147
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<i>indomethacin cap 25 mg</i>	6
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INSULIN SYRG MIS 1ML	97
INSULIN SYRG MIS 1ML/25G	97
INSULIN SYRG MIS 1ML/26G	97
INSULIN SYRG MIS 1ML/27G	97
INSULIN SYRG MIS 1ML/28G	97
INSULIN SYRG MIS 1ML/29G	97
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<i>ipratropium bromide nasal soln 0.06%</i> (42 mcg/spray).....	138	<i>jantoven tab 3mg</i>	128
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<i>irbesartan tab 300 mg</i>	42	<i>jantoven tab 6mg</i>	128
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		JYNARQUE PAK 90-30MG.....	120
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		KALETRA SOL.....	19
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KEPPRA TAB 250MG.....	57	<i>labetalol hcl tab 300 mg</i>	46
KEPPRA TAB 500MG.....	57	LACRISERT MIS 5MG OP	151
KEPPRA TAB 750MG.....	57	<i>lactic acid (ammonium lactate) cream</i>	
KEPPRA XR TAB 500MG	57	<i>12%</i>	146
KEPPRA XR TAB 750MG	57	<i>lactic acid (ammonium lactate) lotion</i>	
KETOCARE TES	98	<i>12%</i>	147
<i>ketoconazole cream 2%</i>	143	<i>lactulose (encephalopathy) solution 10</i>	
<i>ketoconazole foam 2%</i>	143	<i>gm/15ml</i>	124
<i>ketoconazole shampoo 2%</i>	143	LACTULOSE PAK 10GM	124
<i>ketoconazole tab 200 mg</i>	16	<i>lactulose solution 10 gm/15ml</i>	124
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<i>ketorolac tromethamine ophth soln 0.4%</i>		LAMICTAL KIT START 98.....	57
.....	149	LAMICTAL ODT KIT	57
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KISQALI TAB 200DOSE	30	LAMICTAL XR TAB 100MG	58
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KLONOPIN TAB 1MG	55	LAMICTAL XR TAB 50MG.....	58
KLONOPIN TAB 2MG	55	<i>lamivudine oral soln 10 mg/ml</i>	18
<i>klor-con 10 tab 10meq er</i>	132	<i>lamivudine tab 100 mg (hbv)</i>	20
<i>klor-con 8 tab 8meq er</i>	132	<i>lamivudine tab 150 mg</i>	18
<i>klor-con m10 tab 10meq er</i>	132	<i>lamivudine tab 300 mg</i>	18
<i>klor-con m15 tab 15meq er</i>	132	<i>lamivudine-zidovudine tab 150-300 mg</i>	
<i>klor-con m20 tab 20meq er</i>	132	17
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<i>mg</i>	58	LANCETS ULTR MIS THIN 28G	99
<i>lamotrigine orally disintegrating tab 200 mg</i>	58	LANCING DEVI MIS	99
<i>lamotrigine orally disintegrating tab 25 mg</i>	58	LANCING DEVI MIS ADJUST	99
<i>lamotrigine orally disintegrating tab 50 mg</i>	58	LANCING MIS DEVICE	99
<i>lamotrigine tab 100 mg</i>	58	LANCING PEN MIS	99
<i>lamotrigine tab 150 mg</i>	58	<i>lansoprazole cap delayed release 15 mg</i>	125
<i>lamotrigine tab 200 mg</i>	58	<i>lansoprazole cap delayed release 30 mg</i>	125
<i>lamotrigine tab 25 mg</i>	58	<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	125
<i>lamotrigine tab 25 mg (35) starter kit</i> .	58	<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	125
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	58	<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	118
<i>lamotrigine tab 25 mg (84) & 100 mg (14) starter kit</i>	58	<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	118
<i>lamotrigine tab chewable dispersible 25 mg</i>	58	<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	118
<i>lamotrigine tab chewable dispersible 5 mg</i>	58	LANTUS INJ 100/ML.....	82
<i>lamotrigine tab er 24hr 100 mg</i>	58	LANTUS SOLOS INJ 100/ML	82
<i>lamotrigine tab er 24hr 200 mg</i>	58	LANZO MIS LANCING	99
<i>lamotrigine tab er 24hr 25 mg</i>	58	<i>larin 24 tab fe 1/20</i>	111
<i>lamotrigine tab er 24hr 250 mg</i>	58	<i>larin fe tab 1.5/30</i>	112
<i>lamotrigine tab er 24hr 300 mg</i>	58	<i>larin fe tab 1/20</i>	111
<i>lamotrigine tab er 24hr 50 mg</i>	58	<i>larin tab 1.5/30</i>	112
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LANCET DEVIC MIS ADJUST.....	98	LASTACFT SOL 0.25%	150
LANCET WITH MIS EJECTOR	98	<i>latanoprost ophth soln 0.005%</i>	151
LANCETS MICR MIS THIN 33G.....	98	LATUDA TAB 120MG	68
LANCETS MIS	98	LATUDA TAB 20MG	68
LANCETS MIS 21G COLR	98	LATUDA TAB 40MG	68
LANCETS MIS 23G.....	98	LATUDA TAB 60MG	68
LANCETS MIS 26G.....	98	LATUDA TAB 80MG	68
LANCETS MIS 28G.....	98	<i>layolis fe chw</i>	112
LANCETS MIS 30G.....	98	LB LANCET MIS 28G.....	99
LANCETS MIS 31G.....	98	LB LANCING MIS DEVICE.....	99
LANCETS MIS 33G.....	98	<i>leena tab</i>	114
LANCETS MIS ORANGE.....	98	<i>leflunomide tab 10 mg</i>	131
LANCETS MIS ORIGINAL	98	<i>leflunomide tab 20 mg</i>	131
LANCETS MIS THIN	98	LENVIMA CAP 10 MG.....	30
LANCETS MIS THIN 26G	98	LENVIMA CAP 12MG.....	30
LANCETS MIS THIN 30G	99	LENVIMA CAP 14 MG.....	30
LANCETS SUPR MIS THIN 28G	99	LENVIMA CAP 18 MG.....	30
LANCETS THIN MIS	99	LENVIMA CAP 20 MG.....	31
LANCETS THIN MIS 26G	99	LENVIMA CAP 24 MG.....	31
LANCETS THIN MIS 30G	99	LENVIMA CAP 4MG	30
LANCETS ULTR MIS THIN	99	LENVIMA CAP 8 MG.....	30

<i>lessina tab</i>	111	<i>levothyroxine sodium tab 100 mcg</i>	119
LETAIRIS TAB 10MG	53	<i>levothyroxine sodium tab 112 mcg</i>	119
LETAIRIS TAB 5MG	53	<i>levothyroxine sodium tab 125 mcg</i>	119
<i>letrozole tab 2.5 mg</i>	25	<i>levothyroxine sodium tab 137 mcg</i>	119
<i>leucovorin calcium tab 10 mg</i>	35	<i>levothyroxine sodium tab 150 mcg</i>	119
<i>leucovorin calcium tab 15 mg</i>	35	<i>levothyroxine sodium tab 175 mcg</i>	119
<i>leucovorin calcium tab 25 mg</i>	35	<i>levothyroxine sodium tab 200 mcg</i>	119
<i>leucovorin calcium tab 5 mg</i>	35	<i>levothyroxine sodium tab 25 mcg</i>	119
LEUKERAN TAB 2MG	22	<i>levothyroxine sodium tab 300 mcg</i>	119
<i>levalbuterol hcl soln nebu 0.31 mg/3ml</i> (base equiv)	137	<i>levothyroxine sodium tab 50 mcg</i>	119
<i>levalbuterol hcl soln nebu 0.63 mg/3ml</i> (base equiv)	137	<i>levothyroxine sodium tab 75 mcg</i>	119
<i>levalbuterol hcl soln nebu 1.25 mg/3ml</i> (base equiv)	137	<i>levothyroxine sodium tab 88 mcg</i>	119
<i>levalbuterol hcl soln nebu conc 1.25</i> <i>mg/0.5ml (base equiv)</i>	137	<i>levoxyl tab 100mcg</i>	119
<i>levalbuterol tartrate inhal aerosol 45</i> <i>mcg/act (base equiv)</i>	137	<i>levoxyl tab 112mcg</i>	119
<i>levetiracetam oral soln 100 mg/ml</i>	58	<i>levoxyl tab 125mcg</i>	119
<i>levetiracetam tab 1000 mg</i>	58	<i>levoxyl tab 137mcg</i>	119
<i>levetiracetam tab 250 mg</i>	58	<i>levoxyl tab 150mcg</i>	119
<i>levetiracetam tab 500 mg</i>	58	<i>levoxyl tab 175mcg</i>	119
<i>levetiracetam tab 750 mg</i>	58	<i>levoxyl tab 200mcg</i>	119
<i>levetiracetam tab er 24hr 500 mg</i>	58	<i>levoxyl tab 25mcg</i>	119
<i>levetiracetam tab er 24hr 750 mg</i>	58	<i>levoxyl tab 50mcg</i>	119
<i>levobunolol hcl ophth soln 0.5%</i>	150	<i>levoxyl tab 75mcg</i>	119
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	110	<i>levoxyl tab 88mcg</i>	119
<i>levocarnitine tab 330 mg</i>	110	LEVULAN KERA SOL 20%.....	142
<i>levofloxacin ophth soln 0.5%</i>	149	LEXIVA TAB 700MG	19
<i>levofloxacin oral soln 25 mg/ml</i>	14	LIBERTY NEXT TES GEN.....	99
<i>levofloxacin tab 250 mg</i>	14	LIBERTY TES.....	99
<i>levofloxacin tab 500 mg</i>	14	<i>lidocaine hcl gel 2%</i>	147
<i>levofloxacin tab 750 mg</i>	14	<i>lidocaine hcl laryngotracheal soln 4%</i> 148	
<i>levonest tab</i>	114	<i>lidocaine hcl soln 4%</i>	147
<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	111	<i>lidocaine hcl urethral/mucosal gel 2%</i> 147	
<i>levonorgestrel & ethinyl estradiol tab 0.1</i> <i>mg-20 mcg</i>	111	<i>lidocaine hcl urethral/mucosal gel</i> <i>prefilled syringe 2%</i>	147
<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	112	<i>lidocaine hcl viscous soln 2%</i>	148
<i>levonorgestrel tab 1.5 mg</i>	110	<i>lidocaine oint 5%</i>	147
<i>levonorgestrel-ethinyl estradiol</i> (continuous) <i>tab 90-20 mcg</i>	110	<i>lidocaine patch 5%</i>	147
<i>levonorg-eth est tab 0.1-0.02mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	111	<i>lidocaine-hydrocortisone acetate rectal</i> <i>cream kit 2-2%</i>	125
<i>levora-28 tab 0.15/30</i>	112	<i>lidocaine-hydrocortisone acetate rectal</i> <i>cream kit 3-0.5%</i>	125
		<i>lidocaine-hydrocortisone acetate rectal</i> <i>gel kit 3-2.5%</i>	126
		<i>lidocaine-prilocaine cream 2.5-2.5%</i> .147	
		LIFESCAN MIS UNISTIK2	99
		<i>lindane shampoo 1%</i>	148
		<i>linezolid for susp 100 mg/5ml</i>	21
		<i>linezolid tab 600 mg</i>	21
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LINZESS CAP 72MCG	123	<i>loryna tab 3-0.02mg</i>	111
<i>liothyronine sodium tab 25 mcg</i>	119	LORZONE TAB 375MG	77
<i>liothyronine sodium tab 5 mcg</i>	119	LORZONE TAB 750MG	77
<i>liothyronine sodium tab 50 mcg</i>	119	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril & hydrochlorothiazide tab 10-</i>		<i>tab 100-12.5 mg</i>	41
<i>12.5 mg</i>	38	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril & hydrochlorothiazide tab 20-</i>		<i>tab 100-25 mg</i>	41
<i>12.5 mg</i>	38	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril & hydrochlorothiazide tab 20-25</i>		<i>tab 50-12.5 mg</i>	41
<i>mg</i>	38	<i>losartan potassium tab 100 mg</i>	42
<i>lisinopril tab 10 mg</i>	38	<i>losartan potassium tab 25 mg</i>	42
<i>lisinopril tab 2.5 mg</i>	38	<i>losartan potassium tab 50 mg</i>	42
<i>lisinopril tab 20 mg</i>	38	LOTEMAX GEL 0.5%	149
<i>lisinopril tab 30 mg</i>	38	LOTEMAX OIN 0.5%	149
<i>lisinopril tab 40 mg</i>	39	LOTEMAX SUS 0.5%	149
<i>lisinopril tab 5 mg</i>	38	<i>loteprednol etabonate ophth susp 0.5%</i>	
LITE TOUCH MIS LANC DEV	99	.....	150
LITE TOUCH MIS LANC PEN	99	<i>lovastatin tab 10 mg</i>	44
LITE TOUCH MIS LANCETS	99	<i>lovastatin tab 20 mg</i>	44
LITETOUCH MIS 29GX12.7	99	<i>lovastatin tab 40 mg</i>	44
LITETOUCH MIS 31GX8MM	99	<i>low-ogestrel tab</i>	112
<i>lithium carbonate cap 150 mg</i>	76	<i>loxapine succinate cap 10 mg</i>	69
<i>lithium carbonate cap 300 mg</i>	76	<i>loxapine succinate cap 25 mg</i>	69
<i>lithium carbonate cap 600 mg</i>	76	<i>loxapine succinate cap 5 mg</i>	69
<i>lithium carbonate tab 300 mg</i>	76	<i>loxapine succinate cap 50 mg</i>	69
<i>lithium carbonate tab er 300 mg</i>	76	LUCEMYRA TAB 0.18MG	77
<i>lithium carbonate tab er 450 mg</i>	76	<i>ludent chw 0.25mg f</i>	133
LITHIUM SOL 8MEQ/5ML	76	<i>ludent chw 0.5mg f</i>	133
LITHOBID TAB 300MG CR	76	<i>ludent chw 1mg f</i>	134
LIVALO TAB 1MG	44	<i>luliconazole cream 1%</i>	143
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LONGS LANCET MIS STANDARD	99	LYNPARZA TAB 100MG	35
LONGS LANCET MIS THIN	99	LYNPARZA TAB 150MG	35
LONGS LANCET MIS ULTRA TH	100	LYSODREN TAB 500MG	35
LONSURF TAB 15-6.14	35	<i>lyza tab 0.35mg</i>	113
LONSURF TAB 20-8.19	35	M	
<i>loperamide hcl cap 2 mg</i>	121	<i>malathion lotion 0.5%</i>	148
<i>lopinavir-ritonavir soln 400-100 mg/5ml</i>		<i>maprotiline hcl tab 25 mg</i>	62
<i>(80-20 mg/ml)</i>	19	<i>maprotiline hcl tab 50 mg</i>	62
<i>lorazepam con 2mg/ml</i>	55	<i>maprotiline hcl tab 75 mg</i>	62
<i>lorazepam tab 0.5 mg</i>	55	<i>marlissa tab 0.15/30</i>	112
<i>lorazepam tab 1 mg</i>	55	MARPLAN TAB 10MG	62
<i>lorazepam tab 2 mg</i>	55	MASK VORTEX/ MIS BABY DUC	138
LORBRENA TAB 100MG	31	MASK VORTEX/ MIS DUCK	138
LORBRENA TAB 25MG	31	MASK VORTEX/ MIS FROG	138

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MATULANE CAP 50MG	35	<i>megestrol acetate tab 40 mg</i>	25
<i>matzim la tab 180mg/24</i>	49	MEIJER LANCE MIS COLOR	100
<i>matzim la tab 240mg/24</i>	49	MEIJER LANCE MIS UNIV 21G	100
<i>matzim la tab 300mg/24</i>	49	MEIJER LANCE MIS UNIV 30G	100
<i>matzim la tab 360mg/24</i>	49	MEIJER LANCE MIS UNIVERSA.....	100
<i>matzim la tab 420mg/24</i>	49	MEIJER MIS LANCETS.....	100
MAVENCLAD PAK 10MG(10).....	76	MEKINIST TAB 0.5MG	31
MAVENCLAD PAK 10MG(4).....	76	MEKINIST TAB 2MG	31
MAVENCLAD PAK 10MG(5).....	76	MEKTOVI TAB 15MG	31
MAVENCLAD PAK 10MG(6).....	76	<i>meloxicam tab 15 mg</i>	6
MAVENCLAD PAK 10MG(7).....	76	<i>meloxicam tab 7.5 mg</i>	6
MAVENCLAD PAK 10MG(8).....	76	<i>melphalan tab 2 mg</i>	22
MAVENCLAD PAK 10MG(9).....	76	<i>memantine hcl cap er 24hr 14 mg</i>	61
MAVYRET TAB 100-40MG	20	<i>memantine hcl cap er 24hr 21 mg</i>	61
MAXIDEX SUS 0.1% OP	150	<i>memantine hcl cap er 24hr 28 mg</i>	61
MAXIMA BLOOD TES GLUCOSE.....	100	<i>memantine hcl cap er 24hr 7 mg</i>	61
MAXIMA SOL CONTROL.....	100	<i>memantine hcl oral solution 2 mg/ml</i> .	61
MAYZENT TAB 0.25MG	76	<i>memantine hcl tab 10 mg</i>	61
MAYZENT TAB 2MG.....	76	<i>memantine hcl tab 5 mg</i>	61
<i>meclizine hcl tab 12.5 mg</i>	121	<i>memantine hcl tab 5 mg (28) & 10 mg</i>	61
<i>meclizine hcl tab 25 mg</i>	121	<i>(21) titration pak</i>	61
<i>meclofenamate sodium cap 100 mg</i>	6	MENEST TAB 0.3MG.....	115
<i>meclofenamate sodium cap 50 mg</i>	6	MENEST TAB 0.625MG	115
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MEDLANCE MIS 30G PLUS	100	<i>meperidine hcl oral soln 50 mg/5ml</i>	9
MEDLANCE MIS EXTR 21G	100	<i>meperidine hcl tab 100 mg</i>	9
MEDLANCE MIS LITE 25G	100	<i>meperidine hcl tab 50 mg</i>	9
MEDLANCE MIS PLUS.....	100	<i>meprobamate tab 200 mg</i>	56
MEDLANCE MIS PLUS 30G	100	<i>meprobamate tab 400 mg</i>	56
MEDLANCE MIS UNV 21G	100	<i>mercaptopurine tab 50 mg</i>	23
MEDLANCE PLS MIS 0.8MM.....	100	<i>mesalamine cap dr 400 mg</i>	123
MEDLANCE PLS MIS EXTR 21G	100	<i>mesalamine enema 4 gm</i>	123
MEDLANCE PLS MIS LITE 25G	100	<i>mesalamine rectal enema 4 gm &</i>	
MEDLANCE PLS MIS UNIV 21G	100	<i>cleanser wipe kit</i>	123
MEDROL TAB 2MG	116	<i>mesalamine suppos 1000 mg</i>	123
<i>medroxyprogesterone acetate tab 10 mg</i>		<i>mesalamine tab delayed release 1.2 gm</i>	
.....	118	.....	123
<i>medroxyprogesterone acetate tab 2.5</i>		<i>mesalamine tab delayed release 800 mg</i>	
<i>mg</i>	118	.....	123
<i>medroxyprogesterone acetate tab 5 mg</i>		MESNEX TAB 400MG.....	35
.....	118	<i>metadate tab 20mg er</i>	72
<i>mefenamic acid cap 250 mg</i>	6	<i>metaxalone tab 400 mg</i>	77
<i>mefloquine hcl tab 250 mg</i>	17	<i>metaxalone tab 800 mg</i>	77
<i>megestrol acetate susp 40 mg/ml</i>	25	<i>metformin hcl tab 1000 mg</i>	81
<i>megestrol acetate susp 625 mg/5ml</i> .	118	<i>metformin hcl tab 500 mg</i>	81

<i>metformin hcl tab 850 mg</i>	81	<i>methylphenidate hcl tab er 24hr 18 mg</i>	72
<i>metformin hcl tab er 24hr 500 mg</i>	81	<i>methylphenidate hcl tab er 24hr 27 mg</i>	72
<i>metformin hcl tab er 24hr 750 mg</i>	81	<i>methylphenidate hcl tab er 24hr 36 mg</i>	72
<i>methadone con 10mg/ml</i>	9	<i>methylphenidate hcl tab er 24hr 54 mg</i>	72
<i>methadone hcl conc 10 mg/ml</i>	9	<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	72
<i>methadone hcl soln 10 mg/5ml</i>	9	<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	72
<i>methadone hcl soln 5 mg/5ml</i>	9	<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	72
<i>methadone hcl tab 10 mg</i>	9	<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	72
<i>methadone hcl tab 5 mg</i>	9	<i>methylprednisolone tab 16 mg</i>	116
METHADOSE CON 10MG/ML.....	9	<i>methylprednisolone tab 32 mg</i>	117
METHADOSE SF CON 10MG/ML	9	<i>methylprednisolone tab 4 mg</i>	116
<i>methamphetamine hcl tab 5 mg</i>	72	<i>methylprednisolone tab 8 mg</i>	116
<i>methazolamide tab 25 mg</i>	50	<i>methylprednisolone tab therapy pack 4 mg (21)</i>	117
<i>methazolamide tab 50 mg</i>	50	<i>methyltestosterone cap 10 mg</i>	80
<i>methenamine hippurate tab 1 gm</i>	21	<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	121
<i>methimazole tab 10 mg</i>	119	<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	121
<i>methimazole tab 5 mg</i>	119	<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	121
METHITEST TAB 10MG	80	<i>metolazone tab 10 mg</i>	51
<i>methocarbamol tab 500 mg</i>	77	<i>metolazone tab 2.5 mg</i>	51
<i>methocarbamol tab 750 mg</i>	77	<i>metolazone tab 5 mg</i>	51
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	23	<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	46
<i>methoxsalen rapid cap 10 mg</i>	144	<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	46
<i>methyldopa tab 250 mg</i>	39	<i>metoprolol & hydrochlorothiazide tab 50- 25 mg</i>	46
<i>methyldopa tab 500 mg</i>	39	<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	46
<i>methylergonovine maleate tab 0.2 mg</i>	118	<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	47
<i>methylphenidate hcl cap er 10 mg (cd)</i> 72		<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	46
<i>methylphenidate hcl cap er 20 mg (cd)</i> 72		<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	46
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	72	<i>metoprolol tartrate tab 100 mg</i>	47
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	72	<i>metoprolol tartrate tab 25 mg</i>	47
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	72		
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	72		
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<i>methylphenidate hcl cap er 40 mg (cd)</i> 72			
<i>methylphenidate hcl cap er 50 mg (cd)</i> 72			
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<i>methylphenidate hcl soln 5 mg/5ml</i>72			
<i>methylphenidate hcl tab 10 mg</i>	72		
<i>methylphenidate hcl tab 20 mg</i>	72		
<i>methylphenidate hcl tab 5 mg</i>	72		
<i>methylphenidate hcl tab er 10 mg</i>	72		
<i>methylphenidate hcl tab er 20 mg</i>	72		

<i>metoprolol tartrate tab 50 mg</i>	47	<i>minocycline hcl tab er 24hr 55 mg</i>	15
<i>metronidazole cream 0.75%</i>	147	<i>minocycline hcl tab er 24hr 65 mg</i>	15
<i>metronidazole gel 0.75%</i>	147	<i>minocycline hcl tab er 24hr 80 mg</i>	16
<i>metronidazole gel 1%</i>	147	<i>minocycline hcl tab er 24hr 90 mg</i>	16
<i>metronidazole lotion 0.75%</i>	147	<i>minoxidil tab 10 mg</i>	52
<i>metronidazole tab 250 mg</i>	21	<i>minoxidil tab 2.5 mg</i>	52
<i>metronidazole tab 500 mg</i>	21	<i>mirtazapine orally disintegrating tab 15</i>	
<i>metronidazole vaginal gel 0.75%</i>	128	<i>mg</i>	62
<i>mexiletine hcl cap 150 mg</i>	42	<i>mirtazapine orally disintegrating tab 30</i>	
<i>mexiletine hcl cap 200 mg</i>	42	<i>mg</i>	62
<i>mexiletine hcl cap 250 mg</i>	42	<i>mirtazapine orally disintegrating tab 45</i>	
<i>mibelas 24 chw fe</i>	112	<i>mg</i>	62
<i>miconazole 3 sup 200mg</i>	128	<i>mirtazapine tab 15 mg</i>	62
<i>miconazole-zinc oxide-white petrolatum</i>		<i>mirtazapine tab 30 mg</i>	62
<i>oint 0.25-15-81.35%</i>	143	<i>mirtazapine tab 45 mg</i>	62
MICRO THIN MIS LANC 33G	100	<i>mirtazapine tab 7.5 mg</i>	62
MICRODOT CON SOL HIGH/LOW	100	<i>misoprostol tab 100 mcg</i>	125
MICRODOT TES	100	<i>misoprostol tab 200 mcg</i>	125
<i>microgestin tab 1.5/30</i>	112	<i>modafinil tab 100 mg</i>	77
<i>microgestin tab fe 1/20</i>	112	<i>modafinil tab 200 mg</i>	77
<i>microgestin tab fe1.5/30</i>	112	<i>moexipril hcl tab 15 mg</i>	39
MICROLET MIS LANCETS	101	<i>moexipril hcl tab 7.5 mg</i>	39
MICROTAINER MIS LANCET	101	<i>mometasone furoate cream 0.1%</i>	146
<i>midodrine hcl tab 10 mg</i>	54	<i>mometasone furoate nasal susp 50</i>	
<i>midodrine hcl tab 2.5 mg</i>	54	<i>mcg/act</i>	139
<i>midodrine hcl tab 5 mg</i>	54	<i>mometasone furoate oint 0.1%</i>	146
<i>migergot sup 2/100</i>	74	<i>mometasone furoate solution 0.1%</i>	
<i>miglitol tab 100 mg</i>	80	<i>(lotion)</i>	146
<i>miglitol tab 25 mg</i>	80	MONOJECTOR MIS END CAPS	101
<i>miglitol tab 50 mg</i>	80	MONOLET MIS LANCETS	101
<i>mimvey lo tab 0.5-0.1</i>	115	MONOLET OPD MIS LANCETS	101
<i>mimvey tab 1-0.5mg</i>	115	MONOLETTOR MIS LANCETS	101
MINASTRIN 24 CHW FE	112	<i>mono-lynyah tab 0.25-35</i>	113
MINI LANCING MIS DEVICE	101	<i>montelukast sodium chew tab 4 mg</i>	
<i>minitran dis 0.1mg/hr</i>	52	<i>(base equiv)</i>	138
<i>minitran dis 0.2mg/hr</i>	52	<i>montelukast sodium chew tab 5 mg</i>	
<i>minitran dis 0.4mg/hr</i>	52	<i>(base equiv)</i>	138
<i>minitran dis 0.6mg/hr</i>	52	<i>montelukast sodium oral granules packet</i>	
<i>minocycline hcl cap 100 mg</i>	15	<i>4 mg (base equiv)</i>	138
<i>minocycline hcl cap 50 mg</i>	15	<i>montelukast sodium tab 10 mg (base</i>	
<i>minocycline hcl cap 75 mg</i>	15	<i>equiv)</i>	138
<i>minocycline hcl tab 100 mg</i>	15	MONUROL PAK GRANULES	21
<i>minocycline hcl tab 50 mg</i>	15	<i>morgidox cap 1x100mg</i>	16
<i>minocycline hcl tab 75 mg</i>	15	<i>morgidox cap 2x100mg</i>	16
<i>minocycline hcl tab er 24hr 105 mg</i>	16	<i>morphine sulfate beads cap er 24hr 120</i>	
<i>minocycline hcl tab er 24hr 115 mg</i>	16	<i>mg</i>	9
<i>minocycline hcl tab er 24hr 135 mg</i>	16	<i>morphine sulfate beads cap er 24hr 30</i>	
<i>minocycline hcl tab er 24hr 45 mg</i>	15	<i>mg</i>	9

<i>morphine sulfate beads cap er 24hr 45 mg</i>	9	<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	131
<i>morphine sulfate beads cap er 24hr 60 mg</i>	9	<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	131
<i>morphine sulfate beads cap er 24hr 75 mg</i>	9	MYFORTIC TAB 180MG	131
<i>morphine sulfate beads cap er 24hr 90 mg</i>	9	MYFORTIC TAB 360MG	131
<i>morphine sulfate cap er 24hr 10 mg</i>	9	MYGLUCOHEALT MIS LANC 30G.....	101
<i>morphine sulfate cap er 24hr 100 mg</i> ...	9	MYGLUCOHEALT SOL LO/NL/HI.....	101
<i>morphine sulfate cap er 24hr 20 mg</i>	9	MYGLUCOHEALT TES BLD GLUC.....	101
<i>morphine sulfate cap er 24hr 30 mg</i>	9	MYLERAN TAB 2MG	22
<i>morphine sulfate cap er 24hr 40 mg</i>	9	<i>myorisan cap 10mg</i>	141
<i>morphine sulfate cap er 24hr 50 mg</i>	9	<i>myorisan cap 20mg</i>	141
<i>morphine sulfate cap er 24hr 60 mg</i>	9	<i>myorisan cap 40mg</i>	141
<i>morphine sulfate cap er 24hr 80 mg</i>	9	MYRBETRIQ TAB 25MG	127
<i>morphine sulfate oral soln 10 mg/5ml</i> ..	9	MYRBETRIQ TAB 50MG	127
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	10	MYSOLINE TAB 250MG	59
<i>morphine sulfate oral soln 20 mg/5ml</i> ..	10	MYSOLINE TAB 50MG.....	58
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<i>morphine sulfate tab er 100 mg</i>	10	<i>nabumetone tab 500 mg</i>	6
<i>morphine sulfate tab er 15 mg</i>	10	<i>nabumetone tab 750 mg</i>	6
<i>morphine sulfate tab er 200 mg</i>	10	<i>nadolol tab 20 mg</i>	47
<i>morphine sulfate tab er 30 mg</i>	10	<i>nadolol tab 40 mg</i>	47
<i>morphine sulfate tab er 60 mg</i>	10	<i>nadolol tab 80 mg</i>	47
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<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	149	<i>naftifine hcl cream 1%</i>	143
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	14	<i>naftifine hcl cream 2%</i>	143
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<i>mupirocin calcium cream 2%</i>	143	<i>naproxen dr tab 375mg</i>	6
<i>mupirocin oint 2%</i>	143	<i>naproxen dr tab 500mg</i>	6
MUSE SUP 1000MCG.....	126	<i>naproxen sodium tab 275 mg</i>	6
MUSE SUP 125MCG	126	<i>naproxen sodium tab 550 mg</i>	6
MUSE SUP 250MCG	126	<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	6
MUSE SUP 500MCG	126	<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	6
<i>my way tab 1.5mg</i>	110	<i>naproxen susp 125 mg/5ml</i>	6
<i>mycophenolate mofetil cap 250 mg</i> ... 131		<i>naproxen tab 250 mg</i>	6
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<i>mycophenolate mofetil tab 500 mg</i> ... 131		<i>naproxen tab 500 mg</i>	6
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<i>nateglinide tab 120 mg</i>	82	<i>nevirapine tab er 24hr 400 mg</i>	18
<i>nateglinide tab 60 mg</i>	82	NEXAVAR TAB 200MG	31
NATESTO GEL 5.5MG	80	NEXGEN TES.....	101
NAYZILAM SPR 5MG	55	NEXGEN TES NORM CON	101
NEBUSAL NEB 6%	138	NEXIUM GRA 10MG DR.....	125
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<i>nefazodone hcl tab 100 mg</i>	62	NEXIUM GRA 20MG DR.....	125
<i>nefazodone hcl tab 150 mg</i>	62	NEXIUM GRA 40MG DR.....	125
<i>nefazodone hcl tab 200 mg</i>	62	NEXIUM GRA 5MG DR	125
<i>nefazodone hcl tab 250 mg</i>	62	<i>next choice tab 1.5mg</i>	110
<i>nefazodone hcl tab 50 mg</i>	62	<i>niacin tab er 1000 mg</i>	
<i>neomycin sulfate tab 500 mg</i>	12	(antihyperlipidemic)	45
<i>neomycin-bacitrac zn-polymyx</i>		<i>niacin tab er 500 mg (antihyperlipidemic)</i>	
<i>5(3.5)mg-400unt-10000unt op oin ...</i>	149	.....	45
<i>neomycin-polymy-gramicid op sol 1.75-</i>		<i>niacin tab er 750 mg (antihyperlipidemic)</i>	
<i>10000-0.025mg-unt-mg/ml</i>	149	.....	45
<i>neomycin-polymyxin-dexamethasone</i>		<i>niacor tab 500mg</i>	45
<i>ophth oint 0.1%</i>	148	<i>nicardipine hcl cap 20 mg</i>	48
<i>neomycin-polymyxin-dexamethasone</i>		<i>nicardipine hcl cap 30 mg</i>	48
<i>ophth susp 0.1%</i>	148	NICODERM CQ DIS 14MG/24H	79
<i>neomycin-polymyxin-hc ophth susp ..</i>	148	NICODERM CQ DIS 21MG/24H	79
<i>neomycin-polymyxin-hc otic soln 1%</i>	152	NICODERM CQ DIS 7MG/24HR	79
<i>neomycin-polymyxin-hc otic susp 3.5</i>		NICORETTE GUM 2MG ORIG.....	79
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<i>neo-polycin oin hc 1%op</i>	148	NICORETTE LOZ 2MG ORIG.....	79
<i>neo-polycin oin op</i>	149	NICORETTE LOZ 4MG ORIG.....	79
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<i>neuac gel 1.2-5%</i>	142	<i>nicotine td patch 24hr 14 mg/24hr</i>	79
NEUPRO DIS 1MG/24HR	66	<i>nicotine td patch 24hr 21 mg/24hr</i>	79
NEUPRO DIS 2MG/24HR	66	<i>nicotine td patch 24hr 7 mg/24hr</i>	79
NEUPRO DIS 3MG/24HR	66	NICOTROL INH.....	79
NEUPRO DIS 4MG/24HR	66	NICOTROL NS SPR 10MG/ML.....	79
NEUPRO DIS 6MG/24HR	66	<i>nifedipine cap 10 mg</i>	48
NEUPRO DIS 8MG/24HR	66	<i>nifedipine cap 20 mg</i>	48
NEURONTIN CAP 100MG	59	<i>nifedipine tab er 24hr 30 mg</i>	48
NEURONTIN CAP 300MG	59	<i>nifedipine tab er 24hr 60 mg</i>	48
NEURONTIN CAP 400MG	59	<i>nifedipine tab er 24hr 90 mg</i>	48
NEURONTIN SOL 250/5ML	59	<i>nifedipine tab er 24hr osmotic release 30</i>	
NEURONTIN TAB 600MG	59	<i>mg</i>	48
NEURONTIN TAB 800MG	59	<i>nifedipine tab er 24hr osmotic release 60</i>	
NEUTEK 2TEK SOL CONTROL	101	<i>mg</i>	48
NEUTEK 2TEK TES STRIPS	101	<i>nifedipine tab er 24hr osmotic release 90</i>	

<i>mg</i>	48	<i>nizatidine oral soln 15 mg/ml</i>	123
<i>nikki tab 3-0.02mg</i>	112	<i>nora-be tab 0.35mg</i>	113
NILANDRON TAB 150MG	24	<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	112
<i>nilutamide tab 150 mg</i>	24	<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	112
<i>nimodipine cap 30 mg</i>	48	<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	112
NINLARO CAP 2.3MG	35	<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	112
NINLARO CAP 3MG	35	<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	112
NINLARO CAP 4MG	35	<i>norethindrone acetate tab 5 mg</i>	118
<i>nisoldipine tab er 24hr 17 mg</i>	48	<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	115
<i>nisoldipine tab er 24hr 20 mg</i>	48	<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	115
<i>nisoldipine tab er 24hr 25.5 mg</i>	48	<i>norethindrone tab 0.35 mg</i>	113
<i>nisoldipine tab er 24hr 30 mg</i>	48	<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	113
<i>nisoldipine tab er 24hr 34 mg</i>	48	<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	114
<i>nisoldipine tab er 24hr 40 mg</i>	48	<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	114
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NITRO-DUR DIS 0.2MG/HR	52	NORPACE CAP 150MG CR	42
NITRO-DUR DIS 0.3MG/HR	52	NORTHERA CAP 100MG	52
NITRO-DUR DIS 0.4MG/HR	52	NORTHERA CAP 200MG	52
NITRO-DUR DIS 0.6MG/HR	52	NORTHERA CAP 300MG	52
NITRO-DUR DIS 0.8MG/HR	53	<i>nortrel tab 0.5/35</i>	113
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	21	<i>nortrel tab 1/35</i>	113
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	21	<i>nortrel tab 7/7/7</i>	114
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	21	<i>nortriptyline hcl cap 10 mg</i>	65
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	21	<i>nortriptyline hcl cap 25 mg</i>	65
<i>nitrofurantoin susp 25 mg/5ml</i>	21	<i>nortriptyline hcl cap 50 mg</i>	65
<i>nitroglycerin cap er 2.5 mg</i>	52	<i>nortriptyline hcl cap 75 mg</i>	65
<i>nitroglycerin cap er 6.5 mg</i>	52	<i>nortriptyline hcl soln 10 mg/5ml</i>	65
<i>nitroglycerin cap er 9 mg</i>	52	NORVIR TAB 100MG	19
<i>nitroglycerin sl tab 0.3 mg</i>	52	NOVA MAX GLU LIQ /KET CON	101
<i>nitroglycerin sl tab 0.4 mg</i>	52	NOVA MAX TES GLUCOSE	101
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<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> ..	53	NOVOFINE AUT MIS 30GX8MM	101
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	52	NOVOFINE MIS 30GX8MM	101
<i>nitro-time cap 2.5mg cr</i>	52		
<i>nitro-time cap 6.5mg cr</i>	52		
<i>nitro-time cap 9mg cr</i>	52		
<i>nizatidine cap 150 mg</i>	123		
<i>nizatidine cap 300 mg</i>	123		

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<i>ofloxacin otic soln 0.3%</i>	<i>152</i>
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<i>olanzapine orally disintegrating tab 15 mg</i>	<i>68</i>

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<i>olanzapine tab 15 mg.....</i>	<i>68</i>
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<i>olanzapine tab 5 mg</i>	<i>68</i>
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<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	<i>68</i>
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<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg .</i>	<i>40</i>
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<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg... </i>	<i>40</i>
<i>olopatadine hcl nasal soln 0.6%.....</i>	<i>139</i>
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	<i>150</i>
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	<i>150</i>
OLUMIANT TAB 2MG	130
OMECLAMOX- MIS PAK.....	126
<i>omega-3-acid ethyl esters cap 1 gm... </i>	<i>45</i>
<i>omeprazole cap delayed release 10 mg</i>	<i>125</i>
<i>omeprazole cap delayed release 20 mg</i>	

.....	125	ORILISSA TAB 200MG	114
<i>omeprazole cap delayed release 40 mg</i>		ORKAMBI GRA 100-125.....	137
.....	125	ORKAMBI GRA 150-188.....	137
ON CALL EXPR SOL GLUCOSE	102	ORKAMBI TAB 100-125	138
ON CALL LANC MIS DEVICE	102	ORKAMBI TAB 200-125	138
ON CALL MIS LANCETS	102	<i>orphenadrine citrate tab er 12hr 100 mg</i>	
ON CALL PLUS MIS LANC DEV	102	.....	77
ON CALL PLUS MIS LANCETS	102	<i>orsythia tab</i>	112
ON CALL PLUS SOL CONTROL	102	<i>oseltamivir phosphate cap 30 mg (base</i>	
ON CALL PLUS TES BLD GLUC	102	<i>equiv)</i>	20
ON CALL TES EXPRESS	102	<i>oseltamivir phosphate cap 45 mg (base</i>	
ON CALL VIVD SOL CONTROL	102	<i>equiv)</i>	21
ON CALL VIVD TES BLD GLUC	102	<i>oseltamivir phosphate cap 75 mg (base</i>	
<i>ondansetron hcl oral soln 4 mg/5ml ..</i>	121	<i>equiv)</i>	21
<i>ondansetron hcl tab 24 mg</i>	121	<i>oseltamivir phosphate for susp 6 mg/ml</i>	
<i>ondansetron hcl tab 4 mg</i>	121	<i>(base equiv)</i>	21
<i>ondansetron hcl tab 8 mg</i>	121	OSMOPREP TAB 1.5GM.....	124
<i>ondansetron orally disintegrating tab 4</i>		OSPHENA TAB 60MG.....	119
<i>mg</i>	121	OTEZLA TAB 10/20/30	130
<i>ondansetron orally disintegrating tab 8</i>		OTEZLA TAB 30MG	130
<i>mg</i>	121	<i>oxandrolone tab 10 mg</i>	80
ONETOUCH FP MIS LANCETS	102	<i>oxandrolone tab 2.5 mg</i>	80
ONETOUCH MIS 30G.....	102	<i>oxaprozin tab 600 mg</i>	6
ONETOUCH MIS COMBO	102	<i>oxazepam cap 10 mg</i>	55
ONETOUCH MIS LANC DEV	102	<i>oxazepam cap 15 mg</i>	55
ONETOUCH MIS LANCETS.....	102	<i>oxazepam cap 30 mg</i>	55
ONETOUCH SOL ULT CONT	102	<i>oxcarbazepine susp 300 mg/5ml (60</i>	
ONETOUCH SOL VERIO	102	<i>mg/ml)</i>	59
ONETOUCH SOL VERIO-HI.....	102	<i>oxcarbazepine tab 150 mg</i>	59
ONETOUCH TES ULTRA BL	102	<i>oxcarbazepine tab 300 mg</i>	59
ONETOUCH TES VERIO	103	<i>oxcarbazepine tab 600 mg</i>	59
ONETOUCH US MIS LANCETS	103	OXERVATE SOL 20MCG/ML	151
ONEXTON GEL 1.2-3.75	142	OXISTAT LOT 1%	144
ON-THE-GO MIS LANC 30G.....	102	OXTELLAR XR TAB 150MG	59
<i>opcicon tab 1.5mg</i>	111	OXTELLAR XR TAB 300MG	59
OPSUMIT TAB 10MG	53	OXTELLAR XR TAB 600MG	59
OPTIUM TES	103	<i>oxybutynin chloride syrup 5 mg/5ml</i> .	127
OPTIUMEZ TES	103	<i>oxybutynin chloride tab 5 mg</i>	127
OPTUMRX CONT SOL LEVEL1/2	103	<i>oxybutynin chloride tab er 24hr 10 mg</i>	
OPTUMRX TES BLD GLUC	103	.....	127
ORALAIR SUB 300 IR	130	<i>oxybutynin chloride tab er 24hr 15 mg</i>	
<i>oralone dent pst 0.1%</i>	148	.....	127
ORENITRAM TAB 0.125MG.....	53	<i>oxybutynin chloride tab er 24hr 5 mg</i>	127
ORENITRAM TAB 0.25MG	53	<i>oxycodone hcl cap 5 mg</i>	10
ORENITRAM TAB 1MG	53	<i>oxycodone hcl conc 100 mg/5ml (20</i>	
ORENITRAM TAB 2.5MG	54	<i>mg/ml)</i>	10
ORENITRAM TAB 5MG	54	<i>oxycodone hcl soln 5 mg/5ml</i>	10
ORILISSA TAB 150MG.....	114	<i>oxycodone hcl tab 10 mg</i>	10

<i>oxycodone hcl tab 15 mg</i>	10	<i>paliperidone tab er 24hr 6 mg</i>	68
<i>oxycodone hcl tab 20 mg</i>	10	<i>paliperidone tab er 24hr 9 mg</i>	68
<i>oxycodone hcl tab 30 mg</i>	10	PANCREAZE CAP 10500UNT	124
<i>oxycodone hcl tab 5 mg</i>	10	PANCREAZE CAP 16800UNT	124
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	10	PANCREAZE CAP 21000UNT	124
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	10	PANCREAZE CAP 4200UNIT.....	124
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	10	PANRETIN GEL 0.1%.....	147
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	10	<i>pantoprazole sodium ec tab 20 mg (base</i> <i>equiv)</i>	125
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	10	<i>pantoprazole sodium ec tab 40 mg (base</i> <i>equiv)</i>	125
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	10	<i>paricalcitol cap 1 mcg</i>	117
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	10	<i>paricalcitol cap 2 mcg</i>	117
<i>oxycodone w/ acetaminophen tab 10-325</i> <i>mg</i>	11	<i>paricalcitol cap 4 mcg</i>	117
<i>oxycodone w/ acetaminophen tab 2.5-</i> <i>325 mg</i>	11	<i>paroex sol 0.12%</i>	148
<i>oxycodone w/ acetaminophen tab 5-325</i> <i>mg</i>	11	<i>paromomycin sulfate cap 250 mg</i>	12
<i>oxycodone w/ acetaminophen tab 7.5-</i> <i>325 mg</i>	11	<i>paroxetine hcl tab 10 mg</i>	63
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	11	<i>paroxetine hcl tab 20 mg</i>	63
OXYCONTIN TAB 10MG CR	11	<i>paroxetine hcl tab 30 mg</i>	63
OXYCONTIN TAB 15MG CR	11	<i>paroxetine hcl tab 40 mg</i>	63
OXYCONTIN TAB 20MG CR	11	<i>paroxetine hcl tab er 24hr 12.5 mg</i>	63
OXYCONTIN TAB 30MG CR	11	<i>paroxetine hcl tab er 24hr 25 mg</i>	63
OXYCONTIN TAB 40MG CR	11	<i>paroxetine hcl tab er 24hr 37.5 mg</i>	63
OXYCONTIN TAB 60MG CR	11	<i>paroxetine mesylate cap 7.5 mg (base</i> <i>equiv)</i>	80
OXYCONTIN TAB 80MG CR	11	PAXIL SUS 10MG/5ML	63
<i>oxymorphone hcl tab 10 mg</i>	11	PAZEO DRO 0.7%.....	150
<i>oxymorphone hcl tab 5 mg</i>	11	PC LANCETS MIS 30G	103
<i>oxymorphone hcl tab er 12hr 10 mg</i> ...	11	PEAK AIR FLO MIS ADLT/PED	138
<i>oxymorphone hcl tab er 12hr 15 mg</i> ...	11	<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 236 gm</i>	124
<i>oxymorphone hcl tab er 12hr 20 mg</i> ...	11	<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 240 gm</i>	124
<i>oxymorphone hcl tab er 12hr 30 mg</i> ...	11	<i>peg 3350-kcl-sod bicarb-nacl for soln</i> <i>420 gm</i>	124
<i>oxymorphone hcl tab er 12hr 40 mg</i> ...	11	PEN NEEDLE MIS 29GX1/2.....	103
<i>oxymorphone hcl tab er 12hr 5 mg</i>	11	PEN NEEDLE MIS 32GX4MM	103
<i>oxymorphone hcl tab er 12hr 7.5 mg</i> ..	11	PEN NEEDLES MIS 29GX1/2.....	103
OXYTROL DIS 3.9MG/24.....	127	PEN NEEDLES MIS 29GX12.7	103
OZEMPIC INJ 2/1.5ML.....	81	PEN NEEDLES MIS 29GX12MM.....	103
P		PEN NEEDLES MIS 30GX5/16	103
<i>paliperidone tab er 24hr 1.5 mg</i>	68	PEN NEEDLES MIS 31GX1/4	103
<i>paliperidone tab er 24hr 3 mg</i>	68	PEN NEEDLES MIS 31GX3/16	103
		PEN NEEDLES MIS 31GX5/16	103
		PEN NEEDLES MIS 31GX5MM	103
		PEN NEEDLES MIS 31GX6MM	103
		PEN NEEDLES MIS 31GX8MM	103
		PEN NEEDLES MIS 32GX4MM	103

<i>penicillamine cap 250 mg</i>	131	<i>phenobarbital tab 100 mg</i>	59
<i>penicillin v potassium for soln 125 mg/5ml</i>	14	<i>phenobarbital tab 15 mg</i>	59
<i>penicillin v potassium for soln 250 mg/5ml</i>	14	<i>phenobarbital tab 16.2 mg</i>	59
<i>penicillin v potassium tab 250 mg</i>	14	<i>phenobarbital tab 30 mg</i>	59
<i>penicillin v potassium tab 500 mg</i>	14	<i>phenobarbital tab 32.4 mg</i>	59
PENLET II KIT BLOOD	103	<i>phenobarbital tab 60 mg</i>	59
PENLET II MIS REPL CAP	103	<i>phenobarbital tab 64.8 mg</i>	59
PENTASA CAP 250MG CR	123	<i>phenobarbital tab 97.2 mg</i>	59
PENTASA CAP 500MG CR	123	<i>phenoxybenzamine hcl cap 10 mg</i>	52
<i>pentazocine w/ naloxone tab 50-0.5 mg</i>	11	<i>phenylephrine hcl ophth soln 10%</i>	151
<i>pentoxifylline tab er 400 mg</i>	129	<i>phenylephrine hcl ophth soln 2.5%</i>	151
PERFECT 28G MIS LANCETS	103	PHENYTEK CAP 200MG	59
PERFECT 30G MIS LANCETS	103	PHENYTEK CAP 300MG	59
PERFOROMIST NEB 20MCG	137	<i>phenytoin chew tab 50 mg</i>	59
<i>perindopril erbumine tab 2 mg</i>	39	<i>phenytoin sodium extended cap 100 mg</i>	59
<i>perindopril erbumine tab 4 mg</i>	39	<i>phenytoin sodium extended cap 200 mg</i>	59
<i>perindopril erbumine tab 8 mg</i>	39	<i>phenytoin sodium extended cap 300 mg</i>	59
<i>perlogard sol 0.12%</i>	148	<i>phenytoin susp 125 mg/5ml</i>	59
<i>permethrin cream 5%</i>	148	<i>philith tab 0.4-35</i>	113
<i>perphenazine tab 16 mg</i>	70	<i>phospha 250 tab neutral</i>	127
<i>perphenazine tab 2 mg</i>	69	<i>phytonadione tab 5 mg</i>	134
<i>perphenazine tab 4 mg</i>	69	PICATO GEL 0.015%	142
<i>perphenazine tab 8 mg</i>	69	PICATO GEL 0.05%	142
<i>perphenazine-amitriptyline tab 2-10 mg</i>	70	PIFELTRO TAB 100MG	18
<i>perphenazine-amitriptyline tab 2-25 mg</i>	70	<i>pilocarpine hcl ophth soln 1%</i>	151
<i>perphenazine-amitriptyline tab 4-10 mg</i>	70	<i>pilocarpine hcl ophth soln 2%</i>	151
<i>perphenazine-amitriptyline tab 4-25 mg</i>	70	<i>pilocarpine hcl ophth soln 4%</i>	151
<i>perphenazine-amitriptyline tab 4-50 mg</i>	70	<i>pilocarpine hcl tab 5 mg</i>	125
PERTZYE CAP 16000U	124	<i>pilocarpine hcl tab 7.5 mg</i>	125
PERTZYE CAP 8000UNIT	124	<i>pimecrolimus cream 1%</i>	144
PEXEVA TAB 10MG	63	<i>pimozide tab 1 mg</i>	70
PEXEVA TAB 20MG	63	<i>pimozide tab 2 mg</i>	70
PEXEVA TAB 30MG	63	<i>pimtrea tab</i>	110
PEXEVA TAB 40MG	63	<i>pindolol tab 10 mg</i>	47
<i>pharbedryl cap 50mg</i>	135	<i>pindolol tab 5 mg</i>	47
PHARMACY COU MIS LANCETS	104	<i>pioglitazone hcl tab 15 mg (base equiv)</i>	81
<i>phenadoz sup 12.5mg</i>	122	<i>pioglitazone hcl tab 30 mg (base equiv)</i>	81
<i>phenadoz sup 25mg</i>	122	<i>pioglitazone hcl tab 45 mg (base equiv)</i>	82
<i>phenelzine sulfate tab 15 mg</i>	62	<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	81
<i>phenobarbital elixir 20 mg/5ml</i>	59	<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	81

<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	81	<i>mg)</i>	127
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	81	<i>potassium citrate tab er 15 meq (1620 mg)</i>	127
PIQRAY 200MG TAB DOSE.....	31	<i>potassium citrate tab er 5 meq (540 mg)</i>	127
PIQRAY 250MG TAB DOSE.....	31	PRADAXA CAP 110MG.....	128
PIQRAY 300MG TAB DOSE.....	31	PRADAXA CAP 150MG.....	128
<i>pirmella tab 1/35</i>	113	PRADAXA CAP 75MG.....	128
<i>pirmella tab 7/7/7</i>	114	<i>pramipexole dihydrochloride tab 0.125 mg</i>	66
<i>piroxicam cap 10 mg</i>	6	<i>pramipexole dihydrochloride tab 0.25 mg</i>	66
<i>piroxicam cap 20 mg</i>	7	<i>pramipexole dihydrochloride tab 0.5 mg</i>	66
PLAN B TAB 1.5MG.....	111	<i>pramipexole dihydrochloride tab 0.75 mg</i>	66
POCKETCHEM SOL EZ.....	104	<i>pramipexole dihydrochloride tab 1 mg</i>	66
POCKETCHEM TES EZ.....	104	<i>pramipexole dihydrochloride tab 1.5 mg</i>	66
<i>podofilox soln 0.5%</i>	147	<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	66
POLIBAR PLUS SUS 105%.....	132	<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	66
<i>polycin oin op</i>	149	<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	66
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	149	<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	66
POMALYST CAP 1MG.....	25	<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	66
POMALYST CAP 2MG.....	25	<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	66
POMALYST CAP 3MG.....	25	<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	66
POMALYST CAP 4MG.....	25	<i>prasugrel hcl tab 10 mg (base equiv)</i>	130
<i>portia-28 tab</i>	113	<i>prasugrel hcl tab 5 mg (base equiv)</i>	130
<i>posaconazole tab delayed release 100 mg</i>	17	<i>pravastatin sodium tab 10 mg</i>	44
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	127	<i>pravastatin sodium tab 20 mg</i>	45
<i>potassium chloride cap er 10 meq</i>	132	<i>pravastatin sodium tab 40 mg</i>	45
<i>potassium chloride cap er 8 meq</i>	132	<i>pravastatin sodium tab 80 mg</i>	45
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	132	<i>praziquantel tab 600 mg</i>	21
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	132	<i>prazosin hcl cap 1 mg</i>	39
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	132	<i>prazosin hcl cap 2 mg</i>	39
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	132	<i>prazosin hcl cap 5 mg</i>	39
<i>potassium chloride powder packet 20 meq</i>	132	PRECISION LIQ CONTROL.....	104
<i>potassium chloride tab er 10 meq</i>	132	PRECISION LIQ GLUC/KET.....	104
<i>potassium chloride tab er 20 meq (1500 mg)</i>	132	PRECISION LIQ NRML/MID.....	104
<i>potassium chloride tab er 8 meq (600 mg)</i>	132	PRECISION MIS 28G.....	104
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	127	PRECISION MIS 28G(T).....	104
<i>potassium citrate tab er 10 meq (1080</i>			

PRECISION PT TES OF CARE	104	<i>pregabalin cap 200 mg</i>	73
PRECISION TES PCX	104	<i>pregabalin cap 225 mg</i>	73
PRECISION TES PCX PLUS	104	<i>pregabalin cap 25 mg</i>	73
PRECISION TES QID	104	<i>pregabalin cap 300 mg</i>	73
PRECISION TES SOF-TACT	104	<i>pregabalin cap 50 mg</i>	73
PRECISION TES XTRA	104	<i>pregabalin cap 75 mg</i>	73
PRED MILD SUS 0.12% OP	150	<i>pregabalin soln 20 mg/ml</i>	73
PRED SOD PHO SOL 1% OP	150	PREMARIN TAB 0.3MG	115
<i>prednicarbate cream 0.1%</i>	146	PREMARIN TAB 0.45MG	115
<i>prednicarbate oint 0.1%</i>	146	PREMARIN TAB 0.625MG	115
<i>prednisolone acetate ophth susp 1%</i>	150	PREMARIN TAB 0.9MG	115
<i>prednisolone sod phos orally disintegr</i> <i>tab 10 mg (base eq)</i>	117	PREMARIN TAB 1.25MG	115
<i>prednisolone sod phos orally disintegr</i> <i>tab 15 mg (base eq)</i>	117	PREMARIN VAG CRE 0.625MG	116
<i>prednisolone sod phos orally disintegr</i> <i>tab 30 mg (base eq)</i>	117	PREMPHASE TAB	115
<i>prednisolone sod phosph oral soln 6.7</i> <i>mg/5ml (5 mg/5ml base)</i>	117	PREMPRO TAB	115
<i>prednisolone sod phosphate oral soln 10</i> <i>mg/5ml (base equiv)</i>	117	PREMPRO TAB 0.3-1.5	115
<i>prednisolone sod phosphate oral soln 15</i> <i>mg/5ml (base equiv)</i>	117	PREMPRO TAB 0.45-1.5	115
<i>prednisolone sod phosphate oral soln 20</i> <i>mg/5ml (base equiv)</i>	117	PREMPRO TAB 0.625-5	115
<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i>	117	PREPOPIK PAK	124
<i>prednisolone syrup 15 mg/5ml (usp</i> <i>solution equivalent)</i>	117	PREVACID TAB 15MG STB	125
PREDNISON CON 5MG/ML	117	PREVACID TAB 30MG STB	125
<i>prednisone oral soln 5 mg/5ml</i>	117	<i>prevalite pow 4gm</i>	43
<i>prednisone tab 1 mg</i>	117	<i>prevalite pow 4gm pk</i>	43
<i>prednisone tab 10 mg</i>	117	<i>previfem tab</i>	113
<i>prednisone tab 2.5 mg</i>	117	PREZISTA TAB 150MG	19
<i>prednisone tab 20 mg</i>	117	PREZISTA TAB 600MG	19
<i>prednisone tab 5 mg</i>	117	PREZISTA TAB 75MG	19
<i>prednisone tab 50 mg</i>	117	PREZISTA TAB 800MG	19
<i>prednisone tab therapy pack 10 mg (21)</i>	117	PRIFTIN TAB 150MG	19
<i>prednisone tab therapy pack 10 mg (48)</i>	117	PRILOSEC POW 10MG	125
<i>prednisone tab therapy pack 5 mg (21)</i>	117	PRILOSEC POW 2.5MG	125
<i>prednisone tab therapy pack 5 mg (48)</i>	117	<i>primaquine phosphate tab 26.3 mg (15</i> <i>mg base)</i>	17
PREFEST TAB	115	PRIMAQUINE TAB 26.3MG	17
<i>pregabalin cap 100 mg</i>	73	<i>primidone tab 250 mg</i>	59
<i>pregabalin cap 150 mg</i>	73	<i>primidone tab 50 mg</i>	59
		PROAIR HFA AER	137
		PROAIR RESPI AER	137
		<i>probenecid tab 500 mg</i>	5
		<i>prochlorperazine maleate tab 10 mg</i> <i>(base equivalent)</i>	122
		<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	122
		<i>prochlorperazine suppos 25 mg</i>	122
		PROCORT CRE	126
		PROCTOFOAM AER HC 1%	126
		<i>procto-pak cre 1%</i>	126
		<i>proctosol hc cre 2.5%</i>	126

<i>proctozone cre -hc 2.5%</i>	126	<i>propranolol hcl cap er 24hr 80 mg</i>	47
PRODIGY MIS 28G.....	104	<i>propranolol hcl oral soln 20 mg/5ml</i> ...	47
PRODIGY MIS LANC DEV	104	<i>propranolol hcl oral soln 40 mg/5ml</i> ...	47
PRODIGY NO TES CODING.....	104	<i>propranolol hcl tab 10 mg</i>	47
PRODIGY SOL HIGH.....	104	<i>propranolol hcl tab 20 mg</i>	47
PRODIGY SOL LOW.....	104	<i>propranolol hcl tab 40 mg</i>	47
<i>progesterone micronized cap 100 mg</i>	118	<i>propranolol hcl tab 60 mg</i>	47
<i>progesterone micronized cap 200 mg</i>	118	<i>propranolol hcl tab 80 mg</i>	47
PROGRAF CAP 0.5MG	131	<i>propylthiouracil tab 50 mg</i>	119
PROGRAF CAP 1MG.....	131	PROTONIX PAK	125
PROGRAF CAP 5MG.....	131	<i>protriptyline hcl tab 10 mg</i>	65
PROLENSA SOL 0.07%	149	<i>protriptyline hcl tab 5 mg</i>	65
PROMACTA POW 12.5MG.....	130	<i>pseudoeph-chlorphen w/ hydrocodone</i>	
PROMACTA TAB 12.5MG	130	<i>soln 60-4-5 mg/5ml</i>	136
PROMACTA TAB 25MG.....	130	<i>pseudoephed-bromphen-dm syrup 30-2-</i>	
PROMACTA TAB 50MG.....	130	<i>10 mg/5ml</i>	135
PROMACTA TAB 75MG.....	130	PSS SAFE LAN MIS	104
<i>prometh/pe syp 6.25-5/5</i>	135	PSS SEL LANC MIS	104
<i>prometh/pe/ syp codeine</i>	136	PSS SEL PLAT MIS	104
<i>promethazine hcl suppos 12.5 mg</i>	122	PTS PANELS TES GLUCOSE	104
<i>promethazine hcl suppos 25 mg</i>	122	PULMICORT INH 180MCG	140
<i>promethazine hcl suppos 50 mg</i>	122	PULMICORT INH 90MCG	140
<i>promethazine hcl syrup 6.25 mg/5ml</i>	122	PULMOZYME SOL 1MG/ML.....	138
<i>promethazine hcl tab 12.5 mg</i>	122	PURIXAN SUS 20MG/ML	23
<i>promethazine hcl tab 25 mg</i>	122	PX LANCETS MIS ULT THIN	104
<i>promethazine hcl tab 50 mg</i>	122	PYLERA CAP	126
<i>promethazine w/ codeine syrup 6.25-10</i>		<i>pyrazinamide tab 500 mg</i>	19
<i>mg/5ml</i>	136	<i>pyridostigmine bromide tab 60 mg</i>	77
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>		<i>pyridostigmine bromide tab er 180 mg</i>	77
.....	135	Q	
<i>promethegan sup 12.5mg</i>	122	QBRELIS SOL 1MG/ML.....	39
<i>promethegan sup 25mg</i>	122	QC LANCETS MIS 28G	105
<i>promethegan sup 50mg</i>	122	QC LANCETS MIS 30G	105
<i>propafenone hcl cap er 12hr 225 mg</i> ...42		QC LANCING MIS DEVICE	105
<i>propafenone hcl cap er 12hr 325 mg</i> ...42		QNASL AER 80MCG	139
<i>propafenone hcl cap er 12hr 425 mg</i> ...42		QNASL CHILD SPR 40MCG	139
<i>propafenone hcl tab 150 mg</i>	42	QUARTETTE TAB.....	111
<i>propafenone hcl tab 225 mg</i>	42	QUDEXY XR CAP 100/24HR	59
<i>propafenone hcl tab 300 mg</i>	42	QUDEXY XR CAP 150/24HR	59
<i>proprantheline bromide tab 15 mg</i>	122	QUDEXY XR CAP 200/24HR	59
<i>proparacaine hcl ophth soln 0.5%</i>	151	QUDEXY XR CAP 25/24HR.....	59
<i>propranolol & hydrochlorothiazide tab</i>		QUDEXY XR CAP 50/24HR.....	59
<i>40-25 mg</i>	46	<i>quetiapine fumarate tab 100 mg</i>	68
<i>propranolol & hydrochlorothiazide tab</i>		<i>quetiapine fumarate tab 200 mg</i>	68
<i>80-25 mg</i>	46	<i>quetiapine fumarate tab 25 mg</i>	68
<i>propranolol hcl cap er 24hr 120 mg</i> ....47		<i>quetiapine fumarate tab 300 mg</i>	68
<i>propranolol hcl cap er 24hr 160 mg</i> ....47		<i>quetiapine fumarate tab 400 mg</i>	68
<i>propranolol hcl cap er 24hr 60 mg</i>	47	<i>quetiapine fumarate tab 50 mg</i>	68

<i>quetiapine fumarate tab er 24hr 150 mg</i>	68
<i>quetiapine fumarate tab er 24hr 200 mg</i>	68
<i>quetiapine fumarate tab er 24hr 300 mg</i>	68
<i>quetiapine fumarate tab er 24hr 400 mg</i>	68
<i>quetiapine fumarate tab er 24hr 50 mg</i>	68
QUICKTEK LIQ SOLUTION	105
QUICKTEK TES	105
QUILLIVANT SUS 25MG/5ML	73
<i>quinapril hcl tab 10 mg</i>	39
<i>quinapril hcl tab 20 mg</i>	39
<i>quinapril hcl tab 40 mg</i>	39
<i>quinapril hcl tab 5 mg</i>	39
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	38
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	38
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	38
<i>quinidine gluconate tab er 324 mg</i>	42
<i>quinine sulfate cap 324 mg</i>	17
QUINTET AC TES BLD GLUC	105
QUINTET CONT SOL HGH/NORM	105
QUINTET TES BLD GLUC	105
QUTENZA KIT 8% 1-PCH	147
QUTENZA KIT 8% 2-PCH	147
QVAR REDIIHA AER 80MCG	140
QVAR REDIIHAL AER 40MCG	140
R	
<i>ra aspirin tab 500mg</i>	130
RA PEN NEEDL MIS 31GX3/16	105
<i>rabeprazole sodium ec tab 20 mg</i>	125
<i>raloxifene hcl tab 60 mg</i>	119
<i>ramelteon tab 8 mg</i>	74
<i>ramipril cap 1.25 mg</i>	39
<i>ramipril cap 10 mg</i>	39
<i>ramipril cap 2.5 mg</i>	39
<i>ramipril cap 5 mg</i>	39
<i>ranitidine hcl cap 150 mg</i>	123
<i>ranitidine hcl cap 300 mg</i>	123
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	123
<i>ranitidine hcl tab 150 mg</i>	123
<i>ranitidine hcl tab 300 mg</i>	123

<i>ranolazine tab er 12hr 1000 mg</i>	52
<i>ranolazine tab er 12hr 500 mg</i>	52
RAPAMUNE SOL 1MG/ML	132
RAPAMUNE TAB 0.5MG	132
RAPAMUNE TAB 1MG	132
RAPAMUNE TAB 2MG	132
RAPID-SAFE MIS LANCING	105
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	67
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	67
RAVICTI LIQ 1.1GM/ML	120
<i>reclipsen tab</i>	113
RECTIV OIN 0.4%	124
REFUAH PLUS SOL CONTROL	105
REFUAH PLUS TES BLD GLUC	105
<i>relcof c sol 100-6.3</i>	136
RELENZA MIS DISKHALE	21
RELION KIT LANCING	105
RELION LANCI MIS DEVICE	105
<i>repaglinide tab 0.5 mg</i>	82
<i>repaglinide tab 1 mg</i>	82
<i>repaglinide tab 2 mg</i>	82
<i>repaglinide-metformin hcl tab 1-500 mg</i>	82
<i>repaglinide-metformin hcl tab 2-500 mg</i>	82
RESCRIPTOR TAB 200MG	18
RESTASIS EMU 0.05%	151
RESTASIS MUL EMU 0.05%	151
REVATIO SUS 10MG/ML	53
REVATIO TAB 20MG	53
REVEAL TES BLD GLUC	105
REVLIMID CAP 10MG	25
REVLIMID CAP 15MG	25
REVLIMID CAP 2.5MG	25
REVLIMID CAP 20MG	26
REVLIMID CAP 25MG	26
REVLIMID CAP 5MG	25
RHOPRESSA SOL 0.02%	152
RIBAPAK PAK 1200/DAY	20
RIBAPAK PAK 800/DAY	20
RIBAPAK TAB 1000/DAY	20
RIBAPAK TAB 600/DAY	20
<i>ribasphere cap 200mg</i>	20
<i>ribasphere tab 200mg</i>	20
RIBASPHERE TAB 400MG	20
<i>ribasphere tab 600mg</i>	20

<i>ribavirin tab 200 mg</i>	20	<i>equivalent)</i>	61
<i>rifabutin cap 150 mg</i>	21	<i>rivastigmine tartrate cap 6 mg (base</i>	
<i>rifampin cap 150 mg</i>	19	<i>equivalent)</i>	61
<i>rifampin cap 300 mg</i>	19	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	
RIGHTEST ALT MIS ADAPTOR.....	105	.....	61
RIGHTEST LIQ HIGH CON.....	105	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	
RIGHTEST LIQ NORM CON.....	105	.....	61
RIGHTEST MIS GD500	105	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	
RIGHTEST TES GS100.....	105	.....	61
RIGHTEST TES GS300.....	105	<i>rivelsa tab</i>	111
RIGHTEST TES GS550.....	105	<i>rizatriptan benzoate oral disintegrating</i>	
<i>riluzole tab 50 mg</i>	75	<i>tab 10 mg (base eq)</i>	75
<i>rimantadine hydrochloride tab 100 mg</i>	21	<i>rizatriptan benzoate oral disintegrating</i>	
<i>risedronate sodium tab 150 mg</i>	110	<i>tab 5 mg (base eq)</i>	75
<i>risedronate sodium tab 30 mg</i>	110	<i>rizatriptan benzoate tab 10 mg (base</i>	
<i>risedronate sodium tab 35 mg</i>	110	<i>equivalent)</i>	75
<i>risedronate sodium tab 5 mg</i>	110	<i>rizatriptan benzoate tab 5 mg (base</i>	
<i>risedronate sodium tab delayed release</i>		<i>equivalent)</i>	75
<i>35 mg</i>	110	ROCKLATAN DRO.....	152
<i>risperidone orally disintegrating tab 0.25</i>		<i>ropinirole hydrochloride tab 0.25 mg</i> ..	67
<i>mg</i>	68	<i>ropinirole hydrochloride tab 0.5 mg</i>	67
<i>risperidone orally disintegrating tab 0.5</i>		<i>ropinirole hydrochloride tab 1 mg</i>	67
<i>mg</i>	68	<i>ropinirole hydrochloride tab 2 mg</i>	67
<i>risperidone orally disintegrating tab 1 mg</i>		<i>ropinirole hydrochloride tab 3 mg</i>	67
.....	69	<i>ropinirole hydrochloride tab 4 mg</i>	67
<i>risperidone orally disintegrating tab 2 mg</i>		<i>ropinirole hydrochloride tab 5 mg</i>	67
.....	69	<i>ropinirole hydrochloride tab er 24hr 12</i>	
<i>risperidone orally disintegrating tab 3 mg</i>		<i>mg (base equivalent)</i>	67
.....	69	<i>ropinirole hydrochloride tab er 24hr 2 mg</i>	
<i>risperidone orally disintegrating tab 4 mg</i>		<i>(base equivalent)</i>	67
.....	69	<i>ropinirole hydrochloride tab er 24hr 4 mg</i>	
<i>risperidone soln 1 mg/ml</i>	69	<i>(base equivalent)</i>	67
<i>risperidone tab 0.25 mg</i>	69	<i>ropinirole hydrochloride tab er 24hr 6 mg</i>	
<i>risperidone tab 0.5 mg</i>	69	<i>(base equivalent)</i>	67
<i>risperidone tab 1 mg</i>	69	<i>ropinirole hydrochloride tab er 24hr 8 mg</i>	
<i>risperidone tab 2 mg</i>	69	<i>(base equivalent)</i>	67
<i>risperidone tab 3 mg</i>	69	<i>rosadan cre 0.75%</i>	147
<i>risperidone tab 4 mg</i>	69	<i>rosadan gel 0.75%</i>	147
RITALIN LA CAP 10MG	73	<i>rosuvastatin calcium tab 10 mg</i>	45
RITALIN LA CAP 20MG	73	<i>rosuvastatin calcium tab 20 mg</i>	45
RITALIN LA CAP 30MG	73	<i>rosuvastatin calcium tab 40 mg</i>	45
RITALIN LA CAP 40MG	73	<i>rosuvastatin calcium tab 5 mg</i>	45
<i>ritonavir tab 100 mg</i>	19	ROZEREM TAB 8MG	74
<i>rivastigmine tartrate cap 1.5 mg (base</i>		ROZLYTREK CAP 100MG	31
<i>equivalent)</i>	61	ROZLYTREK CAP 200MG	31
<i>rivastigmine tartrate cap 3 mg (base</i>		RUBRACA TAB 200MG	36
<i>equivalent)</i>	61	RUBRACA TAB 250MG	36
<i>rivastigmine tartrate cap 4.5 mg (base</i>		RUBRACA TAB 300MG	36

RUZURGI TAB 10MG	75
RYDAPT CAP 25MG	31
RYTARY CAP 145MG.....	67
RYTARY CAP 195MG.....	67
RYTARY CAP 245MG.....	67
RYTARY CAP 95MG	67

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<i>salicylic acid cream 6% & cleanser liqd kit</i>	147
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SAMSCA TAB 30MG	120
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SANDIMMUNE CAP 100MG.....	131
SANDIMMUNE CAP 25MG.....	131
SANTYL OIN 250/GM	147
SAPHRIS SUB 10MG	69
SAPHRIS SUB 2.5MG	69
SAPHRIS SUB 5MG	69
SARAFEM TAB 10MG.....	63
SARAFEM TAB 20MG.....	63
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SAVELLA TAB 100MG	73
SAVELLA TAB 12.5MG	73
SAVELLA TAB 25MG.....	73
SAVELLA TAB 50MG.....	73
<i>scopolamine td patch 72hr 1 mg/3days</i>	122
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SELECT-LITE MIS LANC DEV	105
<i>selegiline hcl cap 5 mg</i>	67
<i>selegiline hcl tab 5 mg</i>	67
<i>selenium sulfide lotion 2.5%</i>	144
SELZENTRY SOL 20MG/ML.....	17
SELZENTRY TAB 150MG	18
SELZENTRY TAB 25MG.....	17
SELZENTRY TAB 300MG	18
SELZENTRY TAB 75MG.....	17
SENSIPAR TAB 30MG	110
SENSIPAR TAB 60MG	110
SENSIPAR TAB 90MG	110
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	63
<i>sertraline hcl tab 100 mg</i>	63
<i>sertraline hcl tab 25 mg</i>	63
<i>sertraline hcl tab 50 mg</i>	63
<i>sevelamer carbonate packet 0.8 gm.</i> ..	118

<i>sevelamer carbonate packet 2.4 gm</i> ..	118
<i>sevelamer carbonate tab 800 mg</i>	118
<i>sevelamer hcl tab 400 mg</i>	118
SFROWASA ENE 4GM	123
<i>sharobel tab 0.35mg</i>	113
SHOPKO LANC MIS DEVICE.....	106
SHUR-SEAL GEL 2%	111
SIKLOS TAB 100MG	36
<i>sildenafil citrate tab 20 mg</i>	53
SILENOR TAB 3MG.....	74
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<i>silodosin cap 4 mg</i>	126
<i>silodosin cap 8 mg</i>	126
<i>silver sulfadiazine cream 1%</i>	143
SIMBRINZA SUS 1-0.2%	151
SIMPLE DIAG MIS LANCING	106
<i>simvastatin tab 10 mg</i>	45
<i>simvastatin tab 20 mg</i>	45
<i>simvastatin tab 40 mg</i>	45
<i>simvastatin tab 5 mg</i>	45
<i>simvastatin tab 80 mg</i>	45
<i>sirolimus oral soln 1 mg/ml</i>	132
<i>sirolimus tab 0.5 mg</i>	132
<i>sirolimus tab 1 mg</i>	132
<i>sirolimus tab 2 mg</i>	132
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<i>sm folic acid tab 400mcg</i>	133
SMART SENSE TES TEST	106
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<i>sodium chloride soln nebu 0.9%</i>	138
<i>sodium chloride soln nebu 10%</i>	138
<i>sodium chloride soln nebu 3%</i>	138
<i>sodium chloride soln nebu 7%</i>	138
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	127
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	134
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	134
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	134
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	134
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	134
<i>sodium fluoride tab 1 mg f (from 2.2 mg</i>	

<i>naf</i>).....	134	<i>sps sus 15gm/60</i>	118
<i>sodium phenylbutyrate tab 500 mg</i> ...	120	<i>sronyx tab</i>	112
<i>sodium polystyrene sulfonate oral susp</i>		<i>ssd cre 1%</i>	143
<i>15 gm/60ml</i>	118	SSKI SOL 1GM/ML.....	119
<i>sodium polystyrene sulfonate powder</i>	118	<i>stannous fluoride conc 0.63%</i>	148
<i>sodium polystyrene sulfonate rectal susp</i>		<i>stavudine cap 15 mg</i>	18
<i>30 gm/120ml</i>	118	<i>stavudine cap 20 mg</i>	18
SOFTCLIX LAN MIS DEVICE	106	<i>stavudine cap 30 mg</i>	18
<i>solifenacin succinate tab 10 mg</i>	127	<i>stavudine cap 40 mg</i>	18
<i>solifenacin succinate tab 5 mg</i>	127	STERILANCE MIS 1.8MM.....	106
SOLODYN TAB 105MG.....	16	STIMATE SOL 1.5MG/ML.....	121
SOLODYN TAB 115MG.....	16	STIOLTO AER 2.5-2.5.....	134
SOLODYN TAB 55MG	16	STIVARGA TAB 40MG.....	32
SOLODYN TAB 65MG	16	STRIBILD TAB.....	17
SOLODYN TAB 80MG	16	STRIVERDI AER 2.5MCG.....	136
SOLUS V2 MIS LANC DEV	106	SUBOXONE MIS 12-3MG.....	78
SOLUS V2 SOL HIGH	106	SUBOXONE MIS 2-0.5MG.....	78
SOLUS V2 SOL LOW	106	SUBOXONE MIS 4-1MG	78
SOLUS V2 TES AUDIBLE.....	106	SUBOXONE MIS 8-2MG	78
SORILUX AER 0.005%	144	<i>sucralfate tab 1 gm</i>	124
<i>sorine tab 120mg</i>	43	<i>sulfacetamide sodium lotion 10% (acne)</i>	
<i>sorine tab 160mg</i>	43	.....	142
<i>sorine tab 240mg</i>	43	<i>sulfacetamide sodium ophth oint 10%</i>	
<i>sorine tab 80mg</i>	42	.....	149
<i>sotalol hcl (afib/af) tab 120 mg</i>	43	<i>sulfacetamide sodium ophth soln 10%</i>	
<i>sotalol hcl (afib/af) tab 160 mg</i>	43	.....	149
<i>sotalol hcl (afib/af) tab 80 mg</i>	43	<i>sulfacetamide sodium-prednisolone</i>	
<i>sotalol hcl tab 120 mg</i>	43	<i>ophth soln 10-0.23(0.25)%</i>	148
<i>sotalol hcl tab 160 mg</i>	43	SULFADIAZINE TAB 500MG.....	15
<i>sotalol hcl tab 240 mg</i>	43	<i>sulfamethoxazole-trimethoprim susp</i>	
<i>sotalol hcl tab 80 mg</i>	43	<i>200-40 mg/5ml</i>	15
<i>spinosad susp 0.9%</i>	148	<i>sulfamethoxazole-trimethoprim tab 400-</i>	
SPIRIVA AER 1.25MCG.....	135	<i>80 mg</i>	15
SPIRIVA CAP HANDIHLR.....	135	<i>sulfamethoxazole-trimethoprim tab 800-</i>	
SPIRIVA SPR 2.5MCG.....	135	<i>160 mg</i>	15
<i>spironolactone & hydrochlorothiazide tab</i>		SULFAMYLLON CRE 85MG/GM.....	143
<i>25-25 mg</i>	50	<i>sulfasalazine tab 500 mg</i>	123
<i>spironolactone tab 100 mg</i>	39	<i>sulfasalazine tab delayed release 500 mg</i>	
<i>spironolactone tab 25 mg</i>	39	.....	123
<i>spironolactone tab 50 mg</i>	39	<i>sulindac tab 150 mg</i>	7
SPORANOX SOL 10MG/ML	17	<i>sulindac tab 200 mg</i>	7
<i>sprintec 28 tab 28 day</i>	113	<i>sumatriptan nasal spray 20 mg/act</i>	75
SPRYCEL TAB 100MG	32	<i>sumatriptan nasal spray 5 mg/act</i>	75
SPRYCEL TAB 140MG	32	<i>sumatriptan succinate inj 6 mg/0.5ml</i>	75
SPRYCEL TAB 20MG.....	31	<i>sumatriptan succinate solution auto-</i>	
SPRYCEL TAB 50MG.....	32	<i>injector 4 mg/0.5ml</i>	75
SPRYCEL TAB 70MG.....	32	<i>sumatriptan succinate solution auto-</i>	
SPRYCEL TAB 80MG.....	32	<i>injector 6 mg/0.5ml</i>	75

<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	75	SYMDEKO TAB 50-75MG	138
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	75	SYMLINPEN 60 INJ 1000MCG	80
<i>sumatriptan succinate tab 100 mg</i>	75	SYMLINPEN 120 INJ 1000MCG	80
<i>sumatriptan succinate tab 25 mg</i>	75	SYMTUZA TAB	17
<i>sumatriptan succinate tab 50 mg</i>	75	SYNAREL SOL 2MG/ML	114
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	74	SYNJARDY TAB	83
SUPRAX CAP 400MG	13	SYNJARDY TAB 12.5-500	83
SUPRAX CHW 100MG	13	SYNJARDY TAB 5-1000MG	83
SUPRAX CHW 200MG	13	SYNJARDY TAB 5-500MG	83
SUPRAX SUS 100/5ML	13	SYNJARDY XR TAB	83
SUPRAX SUS 200/5ML	13	SYNJARDY XR TAB 10-1000	83
SUPRAX SUS 500/5ML	13	SYNJARDY XR TAB 25-1000	83
SUPREME II LIQ HIGH/LOW	106	SYNJARDY XR TAB 5-1000MG	83
SUPREME TES	106	SYNTHROID TAB 100MCG	120
SUPREP BOWEL SOL PREP KIT	124	SYNTHROID TAB 112MCG	120
SURE COMFORT MIS 29GX1/2	106	SYNTHROID TAB 125MCG	120
SURE COMFORT MIS 30GX5/16	106	SYNTHROID TAB 137MCG	120
SURE COMFORT MIS 31GX3/16	106	SYNTHROID TAB 150MCG	120
SURE COMFORT MIS 32GX5/32	106	SYNTHROID TAB 175MCG	120
SURE COMFORT MIS 32GX6MM	106	SYNTHROID TAB 200MCG	120
SURE COMFORT MIS LANC PEN	106	SYNTHROID TAB 25MCG	119
SURE EDGE TES	106	SYNTHROID TAB 300MCG	120
SURECHEK TES BLD GLUC	107	SYNTHROID TAB 50MCG	119
SURE-FINE MIS 29GX1/2	106	SYNTHROID TAB 75MCG	120
SURE-FINE MIS 31GX3/16	106	SYNTHROID TAB 88MCG	120
SURE-PEN MIS	106	T	
SURESTEP GLU SOL	107	TABLOID TAB 40MG	23
SURESTEP GLU SOL HIGH/LOW	107	TACLONEX SUS	144
SURESTEP PRO TES	107	<i>tacrolimus cap 0.5 mg</i>	131
SURESTEP PRO TES HIGH CON	107	<i>tacrolimus cap 1 mg</i>	131
SURESTEP PRO TES LOW CON	107	<i>tacrolimus cap 5 mg</i>	131
SURESTEP PRO TES NORM CON	107	<i>tacrolimus oint 0.03%</i>	144
SURESTEP SOL CONTROL	107	<i>tacrolimus oint 0.1%</i>	144
SURE-TEST TES EASYPLUS	106	<i>tadalafil tab 2.5 mg</i>	126
SUSTIVA CAP 200MG	18	<i>tadalafil tab 20 mg (pah)</i>	53
SUSTIVA CAP 50MG	18	<i>tadalafil tab 5 mg</i>	126
SUSTIVA TAB 600MG	18	TAFINLAR CAP 50MG	32
SUTENT CAP 12.5MG	32	TAFINLAR CAP 75MG	32
SUTENT CAP 25MG	32	TAGITOL V SUS 40%	132
SUTENT CAP 37.5MG	32	TAGRISO TAB 40MG	32
SUTENT CAP 50MG	32	TAGRISO TAB 80MG	32
<i>syeda tab 3-0.03mg</i>	113	TAI DOC SOL NORM CON	107
SYMBICORT AER 160-4.5	140	<i>take action tab 1.5mg</i>	111
SYMBICORT AER 80-4.5	140	TALZENNA CAP 0.25MG	36
SYMDEKO TAB 100-150	138	TALZENNA CAP 1MG	36
		<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	24
		<i>tamoxifen citrate tab 20 mg (base</i>	

<i>equivalent)</i>	24	<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	41
<i>tamsulosin hcl cap 0.4 mg</i>	126	<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	41
TARCEVA TAB 100MG	32	<i>temazepam cap 15 mg</i>	73
TARCEVA TAB 150MG	33	<i>temazepam cap 22.5 mg</i>	74
TARCEVA TAB 25MG	32	<i>temazepam cap 30 mg</i>	74
TARGRETIN CAP 75MG	36	<i>temazepam cap 7.5 mg</i>	73
TARGRETIN GEL 1%	36	TEMODAR CAP 100MG.....	22
<i>tarina fe tab 1/20</i>	112	TEMODAR CAP 140MG.....	22
<i>taron gra crystals</i>	127	TEMODAR CAP 180MG.....	22
TASIGNA CAP 150MG.....	33	TEMODAR CAP 20MG	22
TASIGNA CAP 200MG.....	33	TEMODAR CAP 250MG.....	22
TASIGNA CAP 50MG	33	TEMODAR CAP 5MG	22
TASMAR TAB 100MG.....	67	<i>temozolomide cap 100 mg</i>	23
TAVALISSE TAB 100MG.....	130	<i>temozolomide cap 140 mg</i>	23
TAVALISSE TAB 150MG.....	130	<i>temozolomide cap 180 mg</i>	23
<i>tazarotene cream 0.1%</i>	142	<i>temozolomide cap 20 mg</i>	23
TAZORAC CRE 0.05%	142	<i>temozolomide cap 250 mg</i>	23
TAZORAC CRE 0.1%	142	<i>temozolomide cap 5 mg</i>	23
TAZORAC GEL 0.05%.....	142	<i>tencon tab 50-325mg</i>	5
TAZORAC GEL 0.1%	142	<i>tenofovir disoproxil fumarate tab 300 mg</i>	19
<i>taztia xt cap 120mg/24</i>	49	<i>terazosin hcl cap 1 mg (base equivalent)</i>	39
<i>taztia xt cap 180mg/24</i>	49	<i>terazosin hcl cap 10 mg (base equivalent)</i>	40
<i>taztia xt cap 240mg/24</i>	49	<i>terazosin hcl cap 2 mg (base equivalent)</i>	40
<i>taztia xt cap 300mg er</i>	49	<i>terazosin hcl cap 5 mg (base equivalent)</i>	40
<i>taztia xt cap 360mg/24</i>	49	<i>terbinafine hcl tab 250 mg</i>	17
TECFIDERA CAP 120MG.....	76	<i>terbutaline sulfate tab 2.5 mg</i>	137
TECFIDERA CAP 240MG.....	76	<i>terbutaline sulfate tab 5 mg</i>	137
TECFIDERA MIS STARTER.....	76	<i>terconazole vaginal cream 0.4%</i>	128
TEGRETOL SUS 100/5ML.....	59	<i>terconazole vaginal cream 0.8%</i>	128
TEGRETOL TAB 200MG.....	59	<i>terconazole vaginal suppos 80 mg</i>	128
TEGRETOL-XR TAB 100MG.....	59	<i>testosterone td gel 10mg/act (2%)</i>	80
TEGRETOL-XR TAB 200MG.....	59	<i>testosterone td gel 12.5 mg/act (1%)</i>	80
TEGRETOL-XR TAB 400MG.....	59	<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	80
TEKTURNA HCT TAB 150-12.5.....	50	<i>testosterone td gel 20.25 mg/act (1.62%)</i>	80
TEKTURNA HCT TAB 150-25MG	50	<i>testosterone td gel 25 mg/2.5gm (1%)</i>	80
TEKTURNA HCT TAB 300-12.5.....	50	<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	80
TEKTURNA HCT TAB 300-25MG	50	<i>testosterone td gel 50 mg/5gm (1%)</i> .	80
TELCARE SOL LEVEL1/2	107	<i>testosterone td soln 30 mg/act</i>	80
TELCARE TES BLD GLUC.....	107		
<i>telmisartan tab 20 mg</i>	42		
<i>telmisartan tab 40 mg</i>	42		
<i>telmisartan tab 80 mg</i>	42		
<i>telmisartan-amlodipine tab 40-10 mg</i> ..	40		
<i>telmisartan-amlodipine tab 40-5 mg</i> ...	40		
<i>telmisartan-amlodipine tab 80-10 mg</i> ..	40		
<i>telmisartan-amlodipine tab 80-5 mg</i> ...	40		
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	41		

<i>tetrabenazine tab 12.5 mg</i>	73	<i>timolol maleate ophth gel forming soln</i>	
<i>tetrabenazine tab 25 mg</i>	73	<i>0.5%</i>	150
<i>tetracaine hcl ophth soln 0.5%</i>	151	<i>timolol maleate ophth soln 0.25%</i>	150
<i>tetracycline hcl cap 250 mg</i>	16	<i>timolol maleate ophth soln 0.5%</i>	150
<i>tetracycline hcl cap 500 mg</i>	16	<i>timolol maleate ophth soln 0.5% (once-</i>	
TGT LANCET MIS ALTERNAT	107	<i>daily)</i>	150
TGT LANCING MIS ADV DEV	107	<i>timolol maleate tab 10 mg</i>	47
TGT LANCING MIS DEVICE	107	<i>timolol maleate tab 20 mg</i>	47
THALOMID CAP 100MG	26	<i>timolol maleate tab 5 mg</i>	47
THALOMID CAP 150MG	26	TIMOPTIC OCU SOL 0.25% OP	150
THALOMID CAP 200MG	26	TIMOPTIC OCU SOL 0.5% OP	150
THALOMID CAP 50MG	26	<i>tinidazole tab 250 mg</i>	21
THEO-24 CAP 100MG CR	140	<i>tinidazole tab 500 mg</i>	21
THEO-24 CAP 200MG CR	140	TIROSINT CAP 100MCG	120
THEO-24 CAP 300MG CR	140	TIROSINT CAP 112MCG	120
THEO-24 CAP 400MG ER	140	TIROSINT CAP 125MCG	120
<i>theochron tab 100mg cr</i>	140	TIROSINT CAP 137MCG	120
<i>theochron tab 200mg cr</i>	140	TIROSINT CAP 13MCG	120
<i>theochron tab 300mg cr</i>	140	TIROSINT CAP 150MCG	120
<i>theophylline soln 80 mg/15ml</i>	140	TIROSINT CAP 25MCG	120
<i>theophylline tab er 12hr 300 mg</i>	140	TIROSINT CAP 50MCG	120
<i>theophylline tab er 12hr 450 mg</i>	140	TIROSINT CAP 75MCG	120
<i>theophylline tab er 24hr 400 mg</i>	140	TIROSINT CAP 88MCG	120
<i>theophylline tab er 24hr 600 mg</i>	140	TIVICAY TAB 10MG	18
THIN LANCETS MIS	107	TIVICAY TAB 25MG	18
THIN LANCETS MIS 26G	107	TIVICAY TAB 50MG	18
THIN LANCETS MIS 30G	107	<i>tizanidine hcl cap 2 mg (base equivalent)</i>	
THINLETS GP MIS 26G	107	.....	77
THINLETS MIS 28G(T)	107	<i>tizanidine hcl cap 4 mg (base equivalent)</i>	
THIOLA EC TAB 100MG	127	.....	77
THIOLA EC TAB 300MG	127	<i>tizanidine hcl cap 6 mg (base equivalent)</i>	
THIOLA TAB 100MG	127	.....	77
<i>thioridazine hcl tab 10 mg</i>	70	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	
<i>thioridazine hcl tab 100 mg</i>	70	.....	77
<i>thioridazine hcl tab 25 mg</i>	70	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	
<i>thioridazine hcl tab 50 mg</i>	70	.....	77
<i>thiothixene cap 1 mg</i>	70	TOBI NEB 300/5ML	138
<i>thiothixene cap 10 mg</i>	70	TOBI PODHALR CAP 28MG	138
<i>thiothixene cap 2 mg</i>	70	TOBRADEX OIN 0.3-0.1%	148
<i>thiothixene cap 5 mg</i>	70	TOBRADEX ST SUS 0.3-0.05	148
<i>tiagabine hcl tab 12 mg</i>	59	<i>tobramycin nebu soln 300 mg/5ml</i>	138
<i>tiagabine hcl tab 16 mg</i>	60	<i>tobramycin ophth soln 0.3%</i>	149
<i>tiagabine hcl tab 2 mg</i>	59	<i>tobramycin-dexamethasone ophth susp</i>	
<i>tiagabine hcl tab 4 mg</i>	59	<i>0.3-0.1%</i>	148
TIBSOVO TAB 250MG	36	TOBREX OIN 0.3% OP	149
<i>tilia fe tab</i>	114	<i>tolbutamide tab 500 mg</i>	84
<i>timolol maleate ophth gel forming soln</i>		<i>tolcapone tab 100 mg</i>	67
<i>0.25%</i>	150	<i>tolmetin sodium cap 400 mg</i>	7

<i>tolmetin sodium tab 200 mg</i>	7	<i>tramadol-acetaminophen tab 37.5-325</i>	
<i>tolmetin sodium tab 600 mg</i>	7	<i>mg</i>	12
<i>tolterodine tartrate cap er 24hr 2 mg</i>	127	<i>trandolapril tab 1 mg</i>	39
<i>tolterodine tartrate cap er 24hr 4 mg</i>	127	<i>trandolapril tab 2 mg</i>	39
<i>tolterodine tartrate tab 1 mg</i>	127	<i>trandolapril tab 4 mg</i>	39
<i>tolterodine tartrate tab 2 mg</i>	127	<i>trandolapril-verapamil hcl tab er 1-240</i>	
TOPAMAX SPR CAP 15MG	60	<i>mg</i>	37
TOPAMAX SPR CAP 25MG	60	<i>trandolapril-verapamil hcl tab er 2-180</i>	
TOPAMAX TAB 100MG	60	<i>mg</i>	37
TOPAMAX TAB 200MG	60	<i>trandolapril-verapamil hcl tab er 2-240</i>	
TOPAMAX TAB 25MG.....	60	<i>mg</i>	37
TOPAMAX TAB 50MG.....	60	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>topiramate cap er 24hr sprinkle 100 mg</i>		<i>mg</i>	37
.....	60	<i>tranexamic acid tab 650 mg</i>	129
<i>topiramate cap er 24hr sprinkle 150 mg</i>		TRANSDERM-SC DIS 1.5MG	122
.....	60	<i>tranylcypromine sulfate tab 10 mg</i>	62
<i>topiramate cap er 24hr sprinkle 200 mg</i>		TRAVATAN Z DRO 0.004%.....	151
.....	60	<i>trazodone hcl tab 100 mg</i>	62
<i>topiramate cap er 24hr sprinkle 25 mg</i>	60	<i>trazodone hcl tab 150 mg</i>	62
<i>topiramate cap er 24hr sprinkle 50 mg</i>	60	<i>trazodone hcl tab 300 mg</i>	62
<i>topiramate sprinkle cap 15 mg</i>	60	<i>trazodone hcl tab 50 mg</i>	62
<i>topiramate sprinkle cap 25 mg</i>	60	TRELEGY AER ELLIPTA.....	134
<i>topiramate tab 100 mg</i>	60	<i>tretinoin cap 10 mg</i>	36
<i>topiramate tab 200 mg</i>	60	<i>tretinoin cream 0.025%</i>	142
<i>topiramate tab 25 mg</i>	60	<i>tretinoin cream 0.05%</i>	142
<i>topiramate tab 50 mg</i>	60	<i>tretinoin cream 0.1%</i>	142
<i>toremifene citrate tab 60 mg (base</i>		<i>tretinoin gel 0.01%</i>	142
<i>equivalent)</i>	24	<i>tretinoin gel 0.025%</i>	142
<i>toremide tab 10 mg</i>	51	<i>tretinoin gel 0.05%</i>	142
<i>toremide tab 100 mg</i>	51	<i>tretinoin microsphere gel 0.04%</i>	142
<i>toremide tab 20 mg</i>	51	<i>tretinoin microsphere gel 0.1%</i>	142
<i>toremide tab 5 mg</i>	51	TREXALL TAB 10MG	23
TOVIAZ TAB 4MG	127	TREXALL TAB 15MG	23
TOVIAZ TAB 8MG	127	TREXALL TAB 5MG.....	23
TRACLEER TAB 125MG	53	TREXALL TAB 7.5MG	23
TRACLEER TAB 32MG.....	53	TREXIMET TAB 85-500MG.....	74
TRACLEER TAB 62.5MG	53	<i>triamcinolone acetoneide aerosol soln</i>	
TRADJENTA TAB 5MG.....	81	<i>0.147 mg/gm</i>	146
<i>tramadol hcl tab 50 mg</i>	11	<i>triamcinolone acetoneide cream 0.025%</i>	
<i>tramadol hcl tab er 24hr 100 mg</i>	11	.....	146
<i>tramadol hcl tab er 24hr 200 mg</i>	12	<i>triamcinolone acetoneide cream 0.1%</i>	146
<i>tramadol hcl tab er 24hr 300 mg</i>	12	<i>triamcinolone acetoneide cream 0.5%</i>	145
<i>tramadol hcl tab er 24hr biphasic release</i>		<i>triamcinolone acetoneide dental paste</i>	
<i>100 mg</i>	12	<i>0.1%</i>	148
<i>tramadol hcl tab er 24hr biphasic release</i>		<i>triamcinolone acetoneide lotion 0.025%</i>	
<i>200 mg</i>	12	.....	146
<i>tramadol hcl tab er 24hr biphasic release</i>		<i>triamcinolone acetoneide lotion 0.1%</i>	146
<i>300 mg</i>	12	<i>triamcinolone acetoneide oint 0.025%</i>	146

<i>triamcinolone acetonide oint 0.1%</i>	146	TROKENDI XR CAP 50MG	60
<i>triamcinolone acetonide oint 0.5%</i>	145	<i>tropicamide ophth soln 0.5%</i>	151
<i>triamterene & hydrochlorothiazide cap</i>		<i>tropicamide ophth soln 1%</i>	151
<i>37.5-25 mg</i>	50	<i>trospium chloride cap er 24hr 60 mg</i> .	127
<i>triamterene & hydrochlorothiazide tab</i>		<i>trospium chloride tab 20 mg</i>	128
<i>37.5-25 mg</i>	51	TRUE METRIX SOL LEVEL 1	107
<i>triamterene & hydrochlorothiazide tab</i>		TRUE METRIX SOL LEVEL 2	108
<i>75-50 mg</i>	51	TRUE METRIX SOL LEVEL 3	108
<i>triamterene cap 100 mg</i>	51	TRUE METRIX TES GLUCOSE	108
<i>triamterene cap 50 mg</i>	51	TRUECONTROL LIQ LEVEL 0	108
<i>triazolam tab 0.125 mg</i>	74	TRUECONTROL LIQ LEVEL 1	108
<i>triazolam tab 0.25 mg</i>	74	TRUEDRAW MIS LANC DEV	108
TRI-CHLOR LIQ 80%	147	TRUETEST LIQ LEVEL 1	108
<i>triderm cre 0.1%</i>	146	TRUETEST LIQ LEVEL 2	108
<i>tri-estaryll tab</i>	114	TRUETEST LIQ LEVEL 3	108
<i>trifluoperazine hcl tab 1 mg (base</i>		TRUETRACK TES	108
<i>equivalent)</i>	70	TRUETRACK TES BLD GLUC	108
<i>trifluoperazine hcl tab 10 mg (base</i>		TRULICITY INJ 0.75/0.5	81
<i>equivalent)</i>	70	TRULICITY INJ 1.5/0.5	81
<i>trifluoperazine hcl tab 2 mg (base</i>		TRUVADA TAB 100-150	17
<i>equivalent)</i>	70	TRUVADA TAB 133-200	17
<i>trifluoperazine hcl tab 5 mg (base</i>		TRUVADA TAB 167-250	17
<i>equivalent)</i>	70	TRUVADA TAB 200-300	17
<i>trifluridine ophth soln 1%</i>	150	TURALIO CAP 200MG	33
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i> ...	67	<i>tydemy tab</i>	113
<i>trihexyphenidyl hcl tab 2 mg</i>	67	TYKERB TAB 250MG	33
<i>trihexyphenidyl hcl tab 5 mg</i>	67	TYVASO REFIL SOL 0.6MG/ML	54
<i>tri-legest tab fe</i>	114	TYVASO SOL 0.6MG/ML	54
TRILEPTAL SUS 300MG/5M	60	TYVASO START SOL 0.6MG/ML	54
TRILEPTAL TAB 150MG	60	U	
TRILEPTAL TAB 300MG	60	UCERIS TAB 9MG	123
TRILEPTAL TAB 600MG	60	ULORIC TAB 40MG	5
<i>tri-lynyah tab</i>	114	ULORIC TAB 80MG	5
<i>tri-lo tab estaryll</i>	114	ULTI-LANCE MIS CLR TIP	108
<i>tri-lo- tab marzia</i>	114	ULTIMA TES	108
<i>tri-lo- tab sprintec</i>	114	ULTRALANCE MIS 1.8MM	108
<i>trilyte sol</i>	124	ULTRATRAK TES ULTIMATE	108
<i>trimethobenzamide hcl cap 300 mg</i> ..	122	ULTRATRAK PRO SOL	108
<i>trimethoprim tab 100 mg</i>	21	ULTRATRAK PRO SOL HIGH/LOW	108
TRINTELLIX TAB 10MG	63	ULTRATRAK PRO TES	108
TRINTELLIX TAB 20MG	63	ULTRATRAK ULT SOL HIGH/LOW	108
TRINTELLIX TAB 5MG	63	UNIFINE PNTP MIS 29GX1/2	108
<i>tri-sprintec tab</i>	114	UNIFINE PNTP MIS 29GX12MM	108
TRIUMEQ TAB	17	UNIFINE PNTP MIS 31GX3/16	108
<i>trivora-28 tab</i>	114	UNIFINE PNTP MIS 31GX5MM	108
TROKENDI XR CAP 100MG	60	UNIFINE PNTP MIS 31GX6MM	108
TROKENDI XR CAP 200MG	60	UNISTIK 1 MIS 2.4MM	109
TROKENDI XR CAP 25MG	60	UNISTIK 1 MIS 3.0MM	109

UNISTIK 2 MIS	109	<i>valsartan tab 320 mg</i>	42
UNISTIK 2 MIS 1.8MM	109	<i>valsartan tab 40 mg</i>	42
UNISTIK 2 MIS 2.4MM	109	<i>valsartan tab 80 mg</i>	42
UNISTIK 2 MIS COMFORT	109	<i>valsartan-hydrochlorothiazide tab 160-</i>	
UNISTIK 2 MIS EXTRA	109	<i>12.5 mg</i>	41
UNISTIK 2 MIS NEONATAL.....	109	<i>valsartan-hydrochlorothiazide tab 160-25</i>	
UNISTIK 2 MIS NORMAL.....	109	<i>mg</i>	41
UNISTIK 2 MIS SUPER	109	<i>valsartan-hydrochlorothiazide tab 320-</i>	
UNISTIK 3 MIS 1.8MM	109	<i>12.5 mg</i>	41
UNISTIK 3 MIS COMFORT.....	109	<i>valsartan-hydrochlorothiazide tab 320-25</i>	
UNISTIK 3 MIS EXTRA	109	<i>mg</i>	41
UNISTIK 3 MIS NEONATAL.....	109	<i>valsartan-hydrochlorothiazide tab 80-</i>	
UNISTIK 3 MIS NORMAL.....	109	<i>12.5 mg</i>	41
UNISTIK CZT MIS COMFORT	109	<i>vancomycin hcl cap 125 mg (base</i>	
UNISTIK CZT MIS NORMAL	109	<i>equivalent)</i>	21
UNISTRIP1 TES GENERIC	109	<i>vancomycin hcl cap 250 mg (base</i>	
<i>unithroid tab 100mcg</i>	120	<i>equivalent)</i>	22
<i>unithroid tab 112mcg</i>	120	<i>vandazole gel 0.75%</i>	128
<i>unithroid tab 125mcg</i>	120	VANTAGE LANC MIS DEVICE	109
<i>unithroid tab 137mcg</i>	120	VARIBAR HONE SUS 40%	132
<i>unithroid tab 150mcg</i>	120	VARIBAR NECT SUS 40%.....	132
<i>unithroid tab 175mcg</i>	120	VARIBAR THIN SUS HONEY.....	132
<i>unithroid tab 200mcg</i>	120	VASCEPA CAP 0.5GM	45
<i>unithroid tab 25mcg</i>	120	VASCEPA CAP 1GM	45
<i>unithroid tab 300mcg</i>	120	<i>vcf vaginal gel contrace</i>	111
<i>unithroid tab 50mcg</i>	120	<i>velivet pak</i>	114
<i>unithroid tab 75mcg</i>	120	VEMLIDY TAB 25MG.....	20
<i>unithroid tab 88mcg</i>	120	VENCLEXTA TAB 100MG	36
<i>urea in zinc undecylenate-lactic acid</i>		VENCLEXTA TAB 10MG	36
<i>vehicle emulsion 50%</i>	147	VENCLEXTA TAB 50MG	36
<i>ursodiol cap 300 mg</i>	122	VENCLEXTA TAB START PK	36
<i>ursodiol tab 250 mg</i>	122	<i>venlafaxine hcl cap er 24hr 150 mg</i>	
<i>ursodiol tab 500 mg</i>	122	<i>(base equivalent)</i>	64
V		<i>venlafaxine hcl cap er 24hr 37.5 mg</i>	
<i>valacyclovir hcl tab 1 gm</i>	20	<i>(base equivalent)</i>	64
<i>valacyclovir hcl tab 500 mg</i>	20	<i>venlafaxine hcl cap er 24hr 75 mg (base</i>	
VALCHLOR GEL 0.016%	23	<i>equivalent)</i>	64
<i>valganciclovir hcl for soln 50 mg/ml</i>		<i>venlafaxine hcl tab 100 mg (base</i>	
<i>(base equiv)</i>	19	<i>equivalent)</i>	64
<i>valganciclovir hcl tab 450 mg (base</i>		<i>venlafaxine hcl tab 25 mg (base</i>	
<i>equivalent)</i>	19	<i>equivalent)</i>	64
VALIUM TAB 10MG	55	<i>venlafaxine hcl tab 37.5 mg (base</i>	
VALIUM TAB 2MG	55	<i>equivalent)</i>	64
VALIUM TAB 5MG	55	<i>venlafaxine hcl tab 50 mg (base</i>	
<i>valproate sodium oral soln 250 mg/5ml</i>		<i>equivalent)</i>	64
<i>(base equiv)</i>	60	<i>venlafaxine hcl tab 75 mg (base</i>	
<i>valproic acid cap 250 mg</i>	60	<i>equivalent)</i>	64
<i>valsartan tab 160 mg</i>	42	<i>venlafaxine hcl tab er 24hr 150 mg (base</i>	

<i>equivalent</i>).....	64	<i>virt-phos tab 250 neut</i>	127
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	64	<i>virtussin ac sol 100-10/5</i>	136
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	64	<i>virtussin sol dac</i>	136
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	64	VISTOGARD PAK 10GM	36
VENTAVIS SOL 10MCG/ML.....	54	VITRAKVI CAP 100MG	33
VENTAVIS SOL 20MCG/ML.....	54	VITRAKVI CAP 25MG.....	33
VENTOLIN HFA AER	137	VITRAKVI SOL 20MG/ML.....	33
<i>verapamil hcl cap er 24hr 100 mg</i>	50	VIZIMPRO TAB 15MG	33
<i>verapamil hcl cap er 24hr 120 mg</i>	50	VIZIMPRO TAB 30MG	33
<i>verapamil hcl cap er 24hr 180 mg</i>	50	VIZIMPRO TAB 45MG	33
<i>verapamil hcl cap er 24hr 200 mg</i>	50	VOCAL POINT TES BLD GLUC	109
<i>verapamil hcl cap er 24hr 240 mg</i>	50	VOLUMEN SUS 0.1%.....	132
<i>verapamil hcl cap er 24hr 300 mg</i>	50	<i>voriconazole for susp 40 mg/ml</i>	17
<i>verapamil hcl cap er 24hr 360 mg</i>	50	<i>voriconazole tab 200 mg</i>	17
<i>verapamil hcl tab 120 mg</i>	50	<i>voriconazole tab 50 mg</i>	17
<i>verapamil hcl tab 40 mg</i>	50	VORTEX VALVE MIS CHAMBER.....	138
<i>verapamil hcl tab 80 mg</i>	50	VORTEX/MASK MIS CHILDS	138
<i>verapamil hcl tab er 120 mg</i>	50	VORTEX/MASK MIS TODDLER.....	138
<i>verapamil hcl tab er 180 mg</i>	50	VOSEVI TAB	20
<i>verapamil hcl tab er 240 mg</i>	50	VOTRIENT TAB 200MG	34
VEREGEN OIN 15%	147	VUSION OIN	144
VERZENIO TAB 100MG.....	33	<i>vyfemla tab 0.4-35</i>	113
VERZENIO TAB 150MG.....	33	VYNDAMAX CAP 61MG.....	51
VERZENIO TAB 200MG.....	33	VYNDAQEL CAP 20MG	51
VERZENIO TAB 50MG.....	33	VYVANSE CAP 10MG	73
VIBRAMYCIN SYP 50MG/5ML.....	16	VYVANSE CAP 20MG	73
VICTORY SOL CONTROL	109	VYVANSE CAP 30MG	73
VICTORY TES AGM-4000	109	VYVANSE CAP 40MG	73
VICTOZA INJ 18MG/3ML.....	81	VYVANSE CAP 50MG	73
VIDEX EC CAP 125MG	18	VYVANSE CAP 60MG	73
VIIBRYD KIT STARTER	63	VYVANSE CAP 70MG	73
VIIBRYD TAB 10MG	63	VYZULTA SOL 0.024%.....	151
VIIBRYD TAB 20MG	63	W	
VIIBRYD TAB 40MG	63	<i>warfarin sodium tab 1 mg</i>	128
VIMPAT SOL 10MG/ML	60	<i>warfarin sodium tab 10 mg</i>	129
VIMPAT TAB 100MG.....	60	<i>warfarin sodium tab 2 mg</i>	128
VIMPAT TAB 150MG.....	60	<i>warfarin sodium tab 2.5 mg</i>	128
VIMPAT TAB 200MG.....	60	<i>warfarin sodium tab 3 mg</i>	128
VIMPAT TAB 50MG	60	<i>warfarin sodium tab 4 mg</i>	129
<i>viorele tab</i>	110	<i>warfarin sodium tab 5 mg</i>	129
VIRACEPT TAB 250MG	19	<i>warfarin sodium tab 6 mg</i>	129
VIRACEPT TAB 625MG	19	<i>warfarin sodium tab 7.5 mg</i>	129
VIREAD TAB 150MG.....	19	WAVESENSE TES PRESTO	109
VIREAD TAB 200MG.....	19	<i>wera tab 0.5/35</i>	113
VIREAD TAB 250MG.....	19	<i>wixela inhub aer 100/50</i>	140
		<i>wixela inhub aer 250/50</i>	140
		<i>wixela inhub aer 500/50</i>	140
		<i>wymzya fe chw 0.4mg-35</i>	113

X			
XALKORI CAP 200MG	34	ZENPEP CAP 20000UNT	125
XALKORI CAP 250MG	34	ZENPEP CAP 25000UNT	125
XARELTO STAR TAB 15/20MG	129	ZENPEP CAP 3000UNIT.....	124
XARELTO TAB 10MG	129	ZENPEP CAP 40000.....	125
XARELTO TAB 15MG	129	ZENPEP CAP 5000UNIT.....	124
XARELTO TAB 2.5MG	129	<i>zenzedi tab 10mg</i>	73
XARELTO TAB 20MG	129	<i>zenzedi tab 15mg</i>	73
XATMEP SOL 2.5MG/ML.....	23	<i>zenzedi tab 2.5mg</i>	73
XELJANZ TAB 10MG.....	130	<i>zenzedi tab 20mg</i>	73
XELJANZ TAB 5MG.....	130	<i>zenzedi tab 30mg</i>	73
XELJANZ XR TAB 11MG	130	<i>zenzedi tab 5mg</i>	73
XELODA TAB 150MG	23	<i>zenzedi tab 7.5mg</i>	73
XELODA TAB 500MG	24	ZIAGEN SOL 20MG/ML	18
XERESE CRE 5-1%	147	<i>zidovudine cap 100 mg</i>	18
XIFAXAN TAB 200MG	22	<i>zidovudine syrup 10 mg/ml</i>	18
XIFAXAN TAB 550MG	22	<i>zidovudine tab 300 mg</i>	19
XOFLUZA TAB 20MG	21	<i>zileuton tab er 12hr 600 mg</i>	138
XOFLUZA TAB 40MG	21	ZIOPTAN DRO 0.0015%	151
XOLEGEL GEL 2%.....	144	<i>ziprasidone hcl cap 20 mg</i>	69
XOPENEX HFA AER	137	<i>ziprasidone hcl cap 40 mg</i>	69
XOSPATA TAB 40MG	34	<i>ziprasidone hcl cap 60 mg</i>	69
XPOVIO PAK 100MG	37	<i>ziprasidone hcl cap 80 mg</i>	69
XPOVIO PAK 60MG	36	ZIRGAN GEL 0.15%	150
XPOVIO PAK 80MG	36	ZOLINZA CAP 100MG	37
XTANDI CAP 40MG	24	<i>zolmitriptan orally disintegrating tab 2.5</i>	
<i>xulane dis 150-35</i>	114	<i>mg</i>	75
XYREM SOL 500MG/ML.....	77	<i>zolmitriptan orally disintegrating tab 5</i>	
Y		<i>mg</i>	75
<i>yl folic aci tab 400mcg</i>	133	<i>zolmitriptan tab 2.5 mg</i>	75
YONSA TAB 125MG.....	24	<i>zolmitriptan tab 5 mg</i>	75
<i>yuvafem tab 10mcg</i>	116	<i>zolpidem tartrate sl tab 1.75 mg</i>	74
Z		<i>zolpidem tartrate sl tab 3.5 mg</i>	74
<i>zafirlukast tab 10 mg</i>	138	<i>zolpidem tartrate tab 10 mg</i>	74
<i>zafirlukast tab 20 mg</i>	138	<i>zolpidem tartrate tab 5 mg</i>	74
<i>zaleplon cap 10 mg</i>	74	<i>zolpidem tartrate tab er 12.5 mg</i>	74
<i>zaleplon cap 5 mg</i>	74	<i>zolpidem tartrate tab er 6.25 mg</i>	74
<i>zarah tab 3-0.03mg</i>	113	ZOMIG SPR 2.5MG.....	75
ZARONTIN SOL 250/5ML	60	ZOMIG SPR 5MG	75
ZEJULA CAP 100MG	37	ZONEGRAN CAP 100MG.....	60
ZELAPAR TAB 1.25MG.....	67	ZONEGRAN CAP 25MG	60
ZELBORAF TAB 240MG.....	34	<i>zonisamide cap 100 mg</i>	60
<i>zenatane cap 10mg</i>	141	<i>zonisamide cap 25 mg</i>	60
<i>zenatane cap 20mg</i>	141	<i>zonisamide cap 50 mg</i>	60
<i>zenatane cap 30mg</i>	141	ZORTRESS TAB 0.25MG	132
<i>zenatane cap 40mg</i>	141	ZORTRESS TAB 0.5MG	132
ZENPEP CAP 10000UNT.....	124	ZORTRESS TAB 0.75MG	132
ZENPEP CAP 15000UNT.....	124	<i>zovia 1/35e tab</i>	113
		ZOVIRAX CRE 5%.....	147

ZUBSOLV SUB 1.4-0.36	78	ZYDELIG TAB 100MG	34
ZUBSOLV SUB 5.7-1.4	78	ZYDELIG TAB 150MG	34
ZUBSOLV SUB 8.6-2.1	78	ZYFLO TAB 600MG.....	138
ZUPLENZ MIS 4MG	122	ZYKADIA CAP 150MG	34
ZUPLENZ MIS 8MG	122	ZYKADIA TAB 150MG	34
ZYCLARA CRE 3.75%	142	ZYLET SUS 0.5-0.3%	148
ZYCLARA PUMP CRE 2.5%	142	ZYTIGA TAB 250MG	24
ZYCLARA PUMP CRE 3.75%	142	ZYTIGA TAB 500MG	24