

2024 MVP Health Care[®] Commercial Formulary (List of Covered Drugs)

Please Read: This document contains information about the drugs we cover in this plan.

This Formulary was updated on **May 1, 2024**. For more up-to-date information or other questions, please contact the MVP Customer Care Center.

You can reach the Customer Care Center using the phone number on the back of your MVP Member ID card, Monday–Friday, 8 am–6 pm (Eastern Time), (TTY 711).



For more detailed information about your MVP prescription drug coverage, please review your Certificate of Coverage or Summary Plan Description. Please be advised that this document is updated periodically, and changes may appear prior to their effective date to allow for member notification.

For the most up-to-date information or other questions, please contact the MVP Customer Care Center at the phone number on the back of your MVP Member ID card.

How do I use the Formulary?

There are two ways to find a drug within this Formulary document. On your keyboard, press *CTRL+F* to bring up a search window.

1. **Search by Medical Condition.** The drugs in this Formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular." If you know what your drug is used for, look for the category name in the document below. Then look under the category name for your drug.
2. **Search by Drug Name.** If you are not sure of the category, look for your drug in the Index. The Index provides an alphabetical list of all the drugs, both brand name and generic, included in this document. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information.

Are there coverage restrictions?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

PRIOR AUTHORIZATION (PA) MVP requires your provider to get prior authorization for certain drugs. This means that you will need to get approval from MVP before you fill your prescriptions. If you don't get approval, MVP may not cover the drug. Some drugs not listed in the Formulary follow approved MVP prior authorization policies. Please note that all new drugs will be excluded from the Formulary and require prior authorization until reviewed by the MVP Pharmacy and Therapeutics (P&T) Committee. The P&T Committee recommends drugs to be excluded from coverage if they do not have significant clinical and/or therapeutic advantages over drugs currently covered by MVP. The committee uses utilization, pharmaco-economic, and clinical data to develop the exclusions. However, not every member may be able to tolerate Formulary drugs due to clinical ineffectiveness or adverse/allergic reactions. A Formulary exception (prior authorization) process for these cases will allow members to receive otherwise non-covered medications.

QUANTITY LIMIT (QL) Some drugs in the Formulary have a maximum quantity that may be received over a specified time period. The list of drugs with quantity limits is subject to change and are marked by a "QL." The amount of drug covered is based on clinical considerations. If

you require more than the allowed quantity, the prescribing provider should initiate a request for coverage.

STEP THERAPY (ST) In some cases, MVP requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, MVP may not cover Drug B unless you try Drug A first. If Drug A does not work for you, MVP will then cover Drug B.

SPECIALTY DRUGS (SP) Specialty medications are used in the management of complex chronic or genetic conditions and certain catastrophic diseases. They are most often injectable medications but may also include oral agents. Drugs identified in the formulary as “SP” must be filled through the CVS Specialty Pharmacy or another pharmacy in the specialty network.

OVER-THE-COUNTER MEDICATIONS (OTC) Certain medications listed in the Formulary are available over the counter. For these to be covered by insurance, a prescription is required.

MEDICAL (M) These drugs are covered under your Medical benefit. Typically, these products are obtained and administered by your provider. If you do not receive these medications from your provider, they must be obtained from CVS Specialty pharmacy, or another pharmacy in the specialty network.

AGE Some medications have age restrictions to ensure they are used in appropriate age groups. If you are outside of the age restriction but require the use of a drug with an age edit, your provider can submit a request for coverage and tell us why you need this drug.

More information

Your provider is the person best suited to help you make decisions about prescription drugs, and the prescription drug information here is intended for consumer guidance only. This information relates to the Prescription Drug Formulary, generally, and may not describe your specific coverage. Your Certificate of Coverage or Summary Plan Description determines your benefits, limitations, and exclusions.

While every effort has been made to ensure accuracy, some information may be out of date. The Formulary is subject to change based on decisions made by the P&T Committee. New drugs are not covered until reviewed by the P&T Committee. Medications with an OTC equivalent are not a covered benefit. Drugs entering the market between 1938 and 1962 that were approved for safety but not effectiveness are called “DESI” drugs. DESI drugs are not covered on the MVP Commercial Formulary.

The information contained in the MVP Commercial Formulary is provided solely for the convenience of medical providers. MVP does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. The MVP Commercial Formulary is not intended to be a substitute for the knowledge, expertise, skill, and judgement of the medical provider in their choice of prescription drugs. The MVP Commercial Formulary is subject to

state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands, and mandatory generic drugs whenever applicable. MVP assumes no responsibility for the actions of any medical provider based upon reliance, in whole or part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

Your employer may have limited your coverage of certain prescription drugs. In the case of some drugs, MVP may limit coverage to a specific quantity or a specific course of treatment. MVP may also require prior authorization on some covered drugs. If you need more information about policies regarding a specific drug, consult your provider or contact the MVP Customer Care Center at the phone number on the back of your MVP Member ID card. If the medication you take is not listed below, contact the CVS Caremark Customer Care Center at the phone number listed on your MVP Member ID card.

MVP Commercial Effective 05/01/2024**Drug Name Drug Tier Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS****AMPHETAMINES**

ADDERALL TAB 5MG	3	
ADDERALL TAB 7.5MG	3	
ADDERALL TAB 10MG	3	
ADDERALL TAB 12.5MG	3	
ADDERALL TAB 15MG	3	
ADDERALL TAB 20MG	3	
ADDERALL TAB 30MG	3	
ADDERALL XR CAP 5MG	3	QL (60 caps every 30 days)
ADDERALL XR CAP 10MG	3	QL (60 caps every 30 days)
ADDERALL XR CAP 15MG	3	QL (60 caps every 30 days)
ADDERALL XR CAP 20MG	3	QL (60 caps every 30 days)
ADDERALL XR CAP 25MG	3	QL (60 caps every 30 days)
ADDERALL XR CAP 30MG	3	QL (60 caps every 30 days)
<i>amphetamine sulfate tab 5 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (60 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (60 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (60 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (60 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (60 caps every 30 days)

** - Subject to medical, pharmacy oral chemo or pharmacy diabetic copay per contract/rider **AGE** - Age Limit **LD** - Limited Distribution **NM** - Not available at mail-order **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (60 caps every 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	
DEXEDRINE CAP 10MG CR	3	QL (60 caps every 30 days)
DEXEDRINE CAP 15MG CR	3	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	1	
<i>dextroamphetamine sulfate tab 5 mg</i>	1	
<i>dextroamphetamine sulfate tab 10 mg</i>	1	
<i>dextroamphetamine sulfate tab 30 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 20 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 30 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 40 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 50 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 60 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate cap 70 mg</i>	1	QL (60 caps every 30 days)
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	1	QL (60 tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	1	QL (60 tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	1	QL (60 tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	1	QL (60 tabs every 30 days)
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	1	QL (60 tabs every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	1	QL (60 tabs every 30 days)
MYDAYIS CAP 12.5MG	2	QL (60 caps every 30 days)
MYDAYIS CAP 25MG	2	QL (60 caps every 30 days)
MYDAYIS CAP 37.5MG	2	QL (60 caps every 30 days)
MYDAYIS CAP 50MG	2	QL (60 caps every 30 days)
<i>procentra</i>	2	
VYVANSE CAP 10MG	3	QL (60 caps every 30 days)
VYVANSE CAP 20MG	3	QL (60 caps every 30 days)
VYVANSE CAP 30MG	3	QL (60 caps every 30 days)
VYVANSE CAP 40MG	3	QL (60 caps every 30 days)
VYVANSE CAP 50MG	3	QL (60 caps every 30 days)
VYVANSE CAP 60MG	3	QL (60 caps every 30 days)
VYVANSE CAP 70MG	3	QL (60 caps every 30 days)
VYVANSE CHW 10MG	3	QL (60 tabs every 30 days)
VYVANSE CHW 20MG	3	QL (60 tabs every 30 days)
VYVANSE CHW 30MG	3	QL (60 tabs every 30 days)
VYVANSE CHW 40MG	3	QL (60 tabs every 30 days)
VYVANSE CHW 50MG	3	QL (60 tabs every 30 days)
VYVANSE CHW 60MG	3	QL (60 tabs every 30 days)
<i>zenzedi tab 2.5mg</i>	1	
<i>zenzedi tab 7.5mg</i>	1	
<i>zenzedi tab 15mg</i>	1	
<i>zenzedi tab 20mg</i>	1	
ANALEPTICS		
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	NM
ANOREXIANTS NON-AMPHETAMINE		
ADIPEX-P CAP 37.5MG	3	QL (365 days per lifetime), NM
ADIPEX-P TAB 37.5MG	3	QL (365 days per lifetime), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>benzphetamine hcl tab 25 mg</i>	1	QL (365 days per lifetime), NM
<i>benzphetamine hcl tab 50 mg</i>	1	QL (365 days per lifetime), NM
<i>diethylpropion hcl tab 25 mg</i>	1	QL (365 days per lifetime), NM
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	QL (365 days per lifetime), NM
LOMAIRA TAB 8MG	3	QL (365 days per lifetime), NM
<i>phendimetrazine tartrate tab 35 mg</i>	1	QL (365 days per lifetime), NM
<i>phentermine hcl cap 15 mg</i>	1	QL (365 days per lifetime), NM
<i>phentermine hcl cap 30 mg</i>	1	QL (365 days per lifetime), NM
<i>phentermine hcl cap 37.5 mg</i>	1	QL (365 days per lifetime), NM
<i>phentermine hcl tab 37.5 mg</i>	1	QL (365 days per lifetime), NM
QSYMIA CAP 3.75-23	3	QL (365 days per lifetime), NM
QSYMIA CAP 7.5-46MG	3	QL (365 days per lifetime), NM
QSYMIA CAP 11.25-69	3	QL (365 days per lifetime), NM
QSYMIA CAP 15-92MG	3	QL (365 days per lifetime), NM
ANTI-OBESITY AGENTS		
CONTRAVE TAB 8-90MG	3	QL (365 days per lifetime), NM
IMCIVREE INJ 10MG/ML	3	PA
<i>orlistat cap 120 mg</i>	1	QL (365 days per lifetime), NM
SAXENDA INJ 18MG/3ML	2	PA
WEGOVY INJ 0.5MG	2	PA, NM
WEGOVY INJ 0.25MG	2	PA, NM
WEGOVY INJ 1.7MG	2	PA
WEGOVY INJ 1MG	2	PA, NM
WEGOVY INJ 2.4MG	2	PA
XENICAL CAP 120MG	3	QL (365 days per lifetime), NM

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Drug Name	Drug Tier	Requirements/Limits
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	QL (90 caps every 30 days)
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
INTUNIV TAB 1MG	3	
INTUNIV TAB 2MG	3	
INTUNIV TAB 3MG	3	
INTUNIV TAB 4MG	3	
KAPVAY TAB 0.1 MG	3	
QELBREE CAP 100MG ER	3	QL (60 capsule every 30 days)
QELBREE CAP 150MG ER	3	QL (60 capsule every 30 days)
QELBREE CAP 200MG ER	3	QL (60 capsule every 30 days)
STRATTERA CAP 10MG	3	QL (90 caps every 30 days)
STRATTERA CAP 18MG	3	QL (90 caps every 30 days)
STRATTERA CAP 25MG	3	QL (90 caps every 30 days)
STRATTERA CAP 40MG	3	QL (90 caps every 30 days)
STRATTERA CAP 60MG	3	QL (90 caps every 30 days)
STRATTERA CAP 80MG	3	QL (90 caps every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
STRATTERA CAP 100MG	3	QL (90 caps every 30 days)
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI TAB 75MG	2	QL (60 tabs every 30 days)
SUNOSI TAB 150MG	2	QL (60 tabs every 30 days)
STIMULANTS - MISC.		
APTENSIO XR CAP 10MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 15MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 20MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 30MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 40MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 50MG	3	QL (60 caps every 30 days)
APTENSIO XR CAP 60MG	3	QL (60 caps every 30 days)
<i>armodafinil tab 50 mg</i>	1	QL (60 tabs every 30 days)
<i>armodafinil tab 150 mg</i>	1	QL (60 tabs every 30 days)
<i>armodafinil tab 200 mg</i>	1	QL (60 tabs every 30 days)
<i>armodafinil tab 250 mg</i>	1	QL (60 tabs every 30 days)
CONCERTA TAB 18MG	3	QL (60 tabs every 30 days)
CONCERTA TAB 27MG	3	QL (60 tabs every 30 days)
CONCERTA TAB 36MG	3	QL (60 tabs every 30 days)
CONCERTA TAB 54MG	3	QL (60 tabs every 30 days)
DAYTRANA DIS 10MG/9HR	3	
DAYTRANA DIS 15MG/9HR	3	
DAYTRANA DIS 20MG/9HR	3	
DAYTRANA DIS 30MG/9HR	3	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	QL (60 caps every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	
<i>dexmethylphenidate hcl tab 5 mg</i>	1	
<i>dexmethylphenidate hcl tab 10 mg</i>	1	
FOCALIN TAB 2.5MG	3	
FOCALIN TAB 5MG	3	
FOCALIN TAB 10MG	3	
FOCALIN XR CAP 5MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 10MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 15MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 20MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 25MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 30MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 35MG	3	QL (60 caps every 30 days)
FOCALIN XR CAP 40MG	3	QL (60 caps every 30 days)
JORNAY PM CAP 20MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 40MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 60MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 80MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 100MG ER	3	QL (60 capsules per 30 days)
METHYLIN SOL 5MG/5ML	3	
METHYLIN SOL 10MG/5ML	3	
METHYLPHENID TAB 45MG ER	3	QL (60 tabs every 30 days)
METHYLPHENID TAB 63MG ER	3	QL (60 tabs every 30 days)

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

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab er 20 mg</i>	1	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	QL (60 tabs every 30 days)
METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 72 MG	3	QL (60 tabs every 30 days)
<i>methylphenidate td patch 10 mg/9hr</i>	1	
<i>methylphenidate td patch 15 mg/9hr</i>	1	
<i>methylphenidate td patch 20 mg/9hr</i>	1	
<i>methylphenidate td patch 30 mg/9hr</i>	1	
<i>modafinil tab 100 mg</i>	1	QL (60 tabs every 30 days)
<i>modafinil tab 200 mg</i>	1	QL (60 tabs every 30 days)
NUVIGIL TAB 50MG	3	QL (60 tabs every 30 days)
NUVIGIL TAB 150MG	3	QL (60 tabs every 30 days)
NUVIGIL TAB 200MG	3	QL (60 tabs every 30 days)
NUVIGIL TAB 250MG	3	QL (60 tabs every 30 days)
PROVIGIL TAB 100MG	3	QL (60 tabs every 30 days)
PROVIGIL TAB 200MG	3	QL (60 tabs every 30 days)
QUILLIVANT SUS 25MG/5ML	3	QL (360 mL every 30 days)
RELEXXII TAB 72MG ER	3	QL (60 tabs every 30 days)
RITALIN LA CAP 10MG	3	QL (60 caps every 30 days)
RITALIN LA CAP 20MG	3	QL (60 caps every 30 days)
RITALIN LA CAP 30MG	3	QL (60 caps every 30 days)
RITALIN LA CAP 40MG	3	QL (60 caps every 30 days)
RITALIN TAB 5MG	3	
RITALIN TAB 10MG	3	
RITALIN TAB 20MG	3	

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

ALLERGENIC EXTRACTS

GRASTEK SUB 2800BAU	3	PA
ODACTRA SUB	3	PA
PALFORZIA CAP ESCALAT	3	SP, PA, NM

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Drug Name	Drug Tier	Requirements/Limits
PALFORZIA CAP LEVEL 1	3	SP, PA, NM
PALFORZIA CAP LEVEL 2	3	SP, PA, NM
PALFORZIA CAP LEVEL 3	3	SP, PA, NM
PALFORZIA CAP LEVEL 4	3	SP, PA, NM
PALFORZIA CAP LEVEL 5	3	SP, PA, NM
PALFORZIA CAP LEVEL 6	3	SP, PA, NM
PALFORZIA CAP LEVEL 7	3	SP, PA, NM
PALFORZIA CAP LEVEL 8	3	SP, PA, NM
PALFORZIA CAP LEVEL 9	3	SP, PA, NM
PALFORZIA CAP LEVEL 10	3	SP, PA, NM
PALFORZIA POW LEVEL 11	3	SP, PA
PALFORZIA POW LEVEL 11	3	SP, PA, NM
RAGWITEK SUB	3	PA

AMINOGLYCOSIDES

AMINOGLYCOSIDES

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	1	NM
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	1	NM
BETHKIS NEB 300/4ML	3	SP, PA
<i>gentamicin sulfate inj 40 mg/ml</i>	1	NM
KITABIS PAK NEB 300/5ML	3	SP, PA
<i>neomycin sulfate tab 500 mg</i>	1	NM
<i>paromomycin sulfate cap 250 mg</i>	1	NM
TOBI NEB 300/5ML	3	SP, PA
TOBI PODHALR CAP 28MG	3	SP, PA
<i>tobramycin nebu soln 300 mg/4ml</i>	1	SP, PA
<i>tobramycin nebu soln 300 mg/5ml</i>	1	SP, PA
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	1	NM
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	1	NM

ANALGESICS - ANTI-INFLAMMATORY

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

ADALIMU-ADAZ INJ 40/0.4ML	2	SP, PA
HUMIRA INJ 10/0.1ML	2	SP, PA
HUMIRA INJ 20/0.2ML	2	SP, PA
HUMIRA INJ 40/0.4ML	2	SP, PA
HUMIRA KIT 40MG/0.8	2	SP, PA
HUMIRA PEDIA INJ CROHNS	2	SP, PA
HUMIRA PEN INJ 40/0.4ML	2	SP, PA
HUMIRA PEN INJ CD/UC/HS	2	SP, PA
HUMIRA PEN INJ PS/UV	2	SP, PA
HUMIRA PEN KIT CD/UC/HS	2	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN KIT PS/UV	2	SP, PA
HYRIMOZ INJ 40/0.4ML	2	SP, PA; (coverage restricted to Cordavis brand only)
HYRIMOZ INJ 40/0.8ML	2	SP, PA; (coverage restricted to Cordavis brand only)

ANTIRHEUMATIC - ENZYME INHIBITORS

RINVOQ TAB 15MG ER	2	SP, PA
RINVOQ TAB 30MG ER	2	SP, PA
RINVOQ TAB 45MG ER	2	SP, PA
XELJANZ SOL 1MG/ML	2	SP, PA
XELJANZ TAB 5MG	2	SP, PA
XELJANZ TAB 10MG	2	SP, PA
XELJANZ XR TAB 11MG	2	SP, PA
XELJANZ XR TAB 22MG	2	SP, PA

ANTIRHEUMATIC ANTIMETABOLITES

OTREXUP INJ 10MG	3	SP, PA
OTREXUP INJ 12.5/0.4	3	SP, PA
OTREXUP INJ 15MG	3	SP, PA
OTREXUP INJ 17.5/0.4	3	SP, PA
OTREXUP INJ 20MG	3	SP, PA
OTREXUP INJ 22.5/0.4	3	SP, PA
OTREXUP INJ 25MG	3	SP, PA
RASUVO INJ 7.5MG	3	SP, PA
RASUVO INJ 10MG	3	SP, PA
RASUVO INJ 12.5MG	3	SP, PA
RASUVO INJ 15MG	3	SP, PA
RASUVO INJ 17.5MG	3	SP, PA
RASUVO INJ 20MG	3	SP, PA
RASUVO INJ 22.5MG	3	SP, PA
RASUVO INJ 25MG	3	SP, PA
RASUVO INJ 30MG	3	SP, PA

GOLD COMPOUNDS

RIDAURA CAP 3MG	2	
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INTERLEUKIN-1 BLOCKERS

ARCALYST INJ 220MG	3	SP, PA
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INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)

KINERET INJ	3	SP, PA; LD
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INTERLEUKIN-6 RECEPTOR INHIBITORS

ACTEMRA INJ 162/0.9	3	SP, PA
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Drug Name	Drug Tier	Requirements/Limits
ACTEMRA INJ ACTPEN	3	SP, PA
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
CELEBREX CAP 50MG	3	
CELEBREX CAP 100MG	3	
CELEBREX CAP 200MG	3	
CELEBREX CAP 400MG	3	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
DAYPRO TAB 600MG	3	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	
EC-NAPROSYN TAB 375MG	3	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
FELDENE CAP 10MG	3	
FELDENE CAP 20MG	3	
<i>fenoprofen calcium tab 600 mg</i>	1	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibu</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	NM
<i>ketorolac tromethamine tab 10 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	1	
<i>mefenamic acid cap 250 mg</i>	1	QL (14 caps every 30 days)
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON TAB 600MG	3	
<i>naproxen dr</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
SPRIX SPR 15.75MG	3	PA, QL (5 bottles every 23 days), NM
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20/30	2	SP, PA, NM
OTEZLA TAB 30MG	2	SP, PA
PYRIMIDINE SYNTHESIS INHIBITORS		
ARAVA TAB 10MG	3	
ARAVA TAB 20MG	3	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25/0.5ML	2	SP, PA
ENBREL INJ 25MG	2	SP, PA
ENBREL INJ 50MG/ML	2	SP, PA
ENBREL MINI INJ 50MG/ML	2	SP, PA
ENBREL SRCLK INJ 50MG/ML	2	SP, PA
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	NM
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	NM
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	NM
ESGIC TAB	3	NM
<i>tencon</i>	1	NM

SALICYLATES

<i>aspirin ec low dose</i>	1	AGE, OTC, NM
<i>aspirin low tab 81mg ec</i>	1	OTC, NM
<i>aspirin tab delayed release 81 mg</i>	1	OTC, NM
<i>bayer chewable low dose</i>	1	AGE, OTC, NM
<i>diflunisal tab 500 mg</i>	1	
<i>goodsense aspirin</i>	1	AGE, OTC, NM
<i>salsalate tab 500 mg</i>	1	
<i>salsalate tab 750 mg</i>	1	
<i>st joseph low dose aspiri</i>	1	AGE, OTC, NM

ANALGESICS - OPIOID

OPIOID AGONISTS

ACTIQ LOZ 200MCG	3	PA, QL (60 lozenges every 30 days), NM
ACTIQ LOZ 400MCG	3	PA, QL (60 ea every 30 days), NM
ACTIQ LOZ 600MCG	3	PA, QL (60 ea every 30 days), NM
ACTIQ LOZ 800MCG	3	PA, QL (60 ea every 30 days), NM
ACTIQ LOZ 1200MCG	3	PA, QL (60 ea every 30 days), NM
ACTIQ LOZ 1600MCG	3	PA, QL (60 lozenges every 30 days), NM
CODEINE SULF TAB 60MG	3	NM
<i>codeine sulfate tab 30 mg</i>	1	NM
CONZIP CAP 100MG	3	QL (30 caps every 30 days), NM
CONZIP CAP 200MG	3	QL (30 caps every 30 days), NM
CONZIP CAP 300MG	3	QL (30 caps every 30 days), NM
DEMEROL INJ 100MG/ML	3	NM
DILAUDID LIQ 1MG/ML	3	NM
DILAUDID TAB 2MG	3	NM
DILAUDID TAB 4MG	3	NM
DILAUDID TAB 8MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	PA, QL (60 ea every 30 days), NM
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	ST, QL (20 patches every 30 days), NM
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	ST, QL (20 patches every 30 days), NM
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	ST, QL (20 patches every 30 days), NM
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	ST, QL (20 patches every 30 days), NM
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	ST, QL (20 patches every 30 days), NM
FENTORA TAB 100MCG	3	PA, QL (60 ea every 30 days), NM
FENTORA TAB 200MCG	3	PA, QL (60 ea every 30 days), NM
FENTORA TAB 400MCG	3	PA, QL (60 tabs every 30 days), NM
FENTORA TAB 600MCG	3	PA, QL (60 tabs every 30 days), NM
FENTORA TAB 800MCG	3	PA, QL (60 tabs every 30 days), NM
HYDROCODONE BITARTRATE CAP ER 12HR 10 MG	1	ST, QL (60 caps every 30 days), NM
HYDROCODONE BITARTRATE CAP ER 12HR 15 MG	1	ST, QL (60 caps every 30 days), NM
HYDROCODONE BITARTRATE CAP ER 12HR 20 MG	1	ST, QL (60 caps every 30 days), NM
HYDROCODONE BITARTRATE CAP ER 12HR 30 MG	1	ST, QL (60 caps every 30 days), NM
HYDROCODONE BITARTRATE CAP ER 12HR 40 MG	1	ST, QL (60 caps every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
HYDROCODONE BITARTRATE CAP ER 12HR 50 MG	1	ST, QL (60 caps every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	1	ST, QL (60 tabs every 30 days), NM
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	1	ST, QL (60 tabs every 30 days), NM
HYDROMORPHON SUP 3MG	3	NM
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	NM
<i>hydromorphone hcl tab 2 mg</i>	1	NM
<i>hydromorphone hcl tab 4 mg</i>	1	NM
<i>hydromorphone hcl tab 8 mg</i>	1	NM
HYSINGLA ER TAB 20 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 30 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 40 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 60 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 80 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 100 MG	3	ST, QL (60 tabs every 30 days), NM
HYSINGLA ER TAB 120 MG	3	ST, QL (60 tabs every 30 days), NM
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	NM
<i>meperidine hcl tab 50 mg</i>	1	NM
<i>methadone hcl conc 10 mg/ml</i>	1	NM
<i>methadone hcl soln 5 mg/5ml</i>	1	NM
<i>methadone hcl soln 10 mg/5ml</i>	1	NM
<i>methadone hcl tab 5 mg</i>	1	NM
<i>methadone hcl tab 10 mg</i>	1	NM
<i>methadone hcl tab for oral susp 40 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
METHADONE INJ 10MG/ML	1	NM
<i>methadose</i>	1	NM
METHADOSE CON 10MG/ML	3	NM
METHADOSE SF CON 10MG/ML	3	NM
<i>mitigo</i>	1	NM
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate beads cap er 24hr 45 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate beads cap er 24hr 60 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate beads cap er 24hr 90 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate beads cap er 24hr 120 mg</i>	1	ST, PA, QL (30 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 10 mg</i>	1	PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 20 mg</i>	1	ST, PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 30 mg</i>	1	PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 50 mg</i>	1	PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 60 mg</i>	1	ST, PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 80 mg</i>	1	ST, PA, QL (90 caps every 30 days), NM
<i>morphine sulfate cap er 24hr 100 mg</i>	1	ST, PA, QL (90 caps every 30 days), NM
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	NM
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	NM
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	NM
<i>morphine sulfate suppos 5 mg</i>	1	NM
<i>morphine sulfate suppos 10 mg</i>	1	NM
<i>morphine sulfate suppos 20 mg</i>	1	NM
<i>morphine sulfate suppos 30 mg</i>	1	NM
<i>morphine sulfate tab 15 mg</i>	1	NM
<i>morphine sulfate tab 30 mg</i>	1	NM
<i>morphine sulfate tab er 15 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab er 30 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>morphine sulfate tab er 60 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>morphine sulfate tab er 100 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>morphine sulfate tab er 200 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
MS CONTIN TAB 15MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
MS CONTIN TAB 30MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
MS CONTIN TAB 60MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
MS CONTIN TAB 100MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
MS CONTIN TAB 200MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
NUCYNTA ER TAB 50MG	3	QL (60 tabs every 30 days), NM
NUCYNTA ER TAB 100MG	3	QL (60 tabs every 30 days), NM
NUCYNTA ER TAB 150MG	3	QL (60 tabs every 30 days), NM
NUCYNTA ER TAB 200MG	3	QL (60 tablets per 30 days), NM
NUCYNTA ER TAB 250MG	3	QL (60 tabs every 30 days), NM
NUCYNTA TAB 50MG	3	NM
NUCYNTA TAB 75MG	3	NM
NUCYNTA TAB 100MG	3	NM
<i>oxycodone hcl cap 5 mg</i>	1	NM
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	NM
<i>oxycodone hcl soln 5 mg/5ml</i>	1	NM
<i>oxycodone hcl tab 5 mg</i>	1	NM
<i>oxycodone hcl tab 10 mg</i>	1	NM
<i>oxycodone hcl tab 15 mg</i>	1	NM
<i>oxycodone hcl tab 20 mg</i>	1	NM
<i>oxycodone hcl tab 30 mg</i>	1	NM
OXYCONTIN TAB 10MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
OXYCONTIN TAB 15MG ER	3	ST, PA, QL (90 tabs every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
OXYCONTIN TAB 20MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
OXYCONTIN TAB 30MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
OXYCONTIN TAB 40MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
OXYCONTIN TAB 60MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
OXYCONTIN TAB 80MG ER	3	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab 5 mg</i>	1	NM
<i>oxymorphone hcl tab 10 mg</i>	1	NM
<i>oxymorphone hcl tab er 12hr 5 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 10 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 15 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 20 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 30 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
<i>oxymorphone hcl tab er 12hr 40 mg</i>	1	ST, PA, QL (90 tabs every 30 days), NM
ROXICODONE TAB 15MG	3	NM
ROXICODONE TAB 30MG	3	NM
SUBSYS SPR 100MCG	3	PA, QL (60 ea every 30 days), NM
SUBSYS SPR 400MCG	3	PA, QL (60 ea every 30 days), NM
SUBSYS SPR 600MCG	3	PA, QL (60 ea every 30 days), NM
SUBSYS SPR 800MCG	3	PA, QL (60 ea every 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	1	QL (30 caps every 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	1	QL (30 caps every 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	1	QL (30 caps every 30 days), NM
<i>tramadol hcl tab 50 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl tab 100 mg</i>	1	NM
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	QL (30 tabs every 30 days), NM
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	QL (30 tabs every 30 days), NM
XTAMPZA ER CAP 9MG	3	ST, PA, QL (60 caps every 30 days), NM
XTAMPZA ER CAP 13.5MG	3	ST, PA, QL (60 caps every 30 days), NM
XTAMPZA ER CAP 18MG	3	ST, PA, QL (60 caps every 30 days), NM
XTAMPZA ER CAP 27MG	3	ST, PA, QL (60 caps every 30 days), NM
XTAMPZA ER CAP 36MG	3	ST, PA, QL (60 caps every 30 days), NM

OPIOID COMBINATIONS

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	NM
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	NM
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	NM
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	NM
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	NM
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	NM
<i>endocet</i>	1	NM
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	NM
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	NM
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
OPIOID PARTIAL AGONISTS		
BELBUCA MIS 75MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 150MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 300MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 450MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 600MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 750MCG	3	QL (60 films every 30 days), NM
BELBUCA MIS 900MCG	3	QL (60 films every 30 days), NM
BUPRENEX INJ 0.3MG/ML	3	NM
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	NM
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	NM
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	QL (90 films per 30 days), NM
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	QL (90 films per 30 days), NM
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	QL (90 films per 30 days), NM
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	QL (60 films per 30 days), NM
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	QL (90 films per 30 days), NM
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	QL (90 films per 30 days), NM
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	ST, PA, QL (4 patches every 21 days), NM
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	ST, PA, QL (4 patches every 21 days), NM
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	ST, PA, QL (4 patches every 21 days), NM
<i>buprenorphine td patch weekly 15 mcg/hr</i>	1	ST, PA, QL (4 patches every 21 days), NM
<i>buprenorphine td patch weekly 20 mcg/hr</i>	1	ST, PA, QL (4 patches every 21 days), NM
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	QL (4 canisters per 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
BUTRANS DIS 5MCG/HR	3	ST, PA, QL (4 patches every 21 days), NM
BUTRANS DIS 7.5/HR	3	ST, PA, QL (4 patches every 21 days), NM
BUTRANS DIS 10MCG/HR	3	ST, PA, QL (4 patches every 21 days), NM
BUTRANS DIS 15MCG/HR	3	ST, PA, QL (4 patches every 21 days), NM
BUTRANS DIS 20MCG/HR	3	ST, PA, QL (4 patches every 21 days), NM
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	1	NM
SUBOXONE MIS 2-0.5MG	3	QL (90 films per 30 days), NM
SUBOXONE MIS 4-1MG	3	QL (90 films per 30 days), NM
SUBOXONE MIS 8-2MG	3	QL (90 films per 30 days), NM
SUBOXONE MIS 12-3MG	3	QL (60 films per 30 days), NM
ZUBSOLV SUB 0.7-0.18	3	QL (90 films per 30 days), NM
ZUBSOLV SUB 1.4-0.36	3	QL (90 films per 30 days), NM
ZUBSOLV SUB 2.9-0.71	3	QL (90 films per 30 days), NM
ZUBSOLV SUB 5.7-1.4	3	QL (90 films per 30 days), NM
ZUBSOLV SUB 8.6-2.1	3	QL (60 films per 30 days), NM
ZUBSOLV SUB 11.4-2.9	3	QL (30 films per 30 days), NM

**ANDROGENS-ANABOLIC
ANABOLIC STEROIDS**

<i>oxandrolone tab 2.5 mg</i>	1	QL (60 tabs every 30 days), NM
<i>oxandrolone tab 10 mg</i>	1	QL (60 tabs every 30 days), NM

ANDROGENS

ANDRODERM DIS 2MG/24HR	3	PA, QL (30 patches every 30 days)
ANDRODERM DIS 4MG/24HR	3	PA, QL (30 ea every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
ANDROGEL GEL 1.62%	2	QL (150 gm every 30 days)
<i>danazol cap 50 mg</i>	1	NM
<i>danazol cap 100 mg</i>	1	NM
<i>danazol cap 200 mg</i>	1	NM
DEPO-TESTOST INJ 100MG/ML	3	PA, QL (10 ml / 30 days)
DEPO-TESTOST INJ 200MG/ML	3	PA, QL (10 ml / 30 days)
FORTESTA GEL 10MG/ACT	3	PA, QL (60 gm every 30 days)
JATENZO CAP 158MG	3	PA, QL (120 caps every 30 days)
JATENZO CAP 198MG	3	PA, QL (120 caps every 30 days)
JATENZO CAP 237MG	3	PA, QL (120 caps every 30 days)
KYZATREX CAP 100MG	3	PA
KYZATREX CAP 150MG	3	PA
KYZATREX CAP 200MG	3	PA
METHITEST TAB 10MG	3	PA, QL (30 tabs every 30 days)
<i>methyltestosterone cap 10 mg</i>	1	PA, QL (30 caps every 30 days)
NATESTO GEL 5.5MG	3	PA, QL (24 gm every 30 days)
TESTIM GEL 1%(50MG)	3	PA, QL (150 gm every 30 days)
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	QL (1 vial every 30 days)
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	QL (10 vials every 30 days)
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	QL (1 vial every 30 days)
<i>testosterone td gel 10mg/act (2%)</i>	1	QL (60 gm every 30 days)
<i>testosterone td gel 12.5 mg/act (1%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	QL (150 gm every 30 days)
<i>testosterone td soln 30 mg/act</i>	1	QL (90 mL every 30 days)
VOGELXO GEL PUMP 1%	3	PA, QL (150 gm every 30 days)
XYOSTED INJ 50/0.5	3	PA, QL (10 pens every 30 days)
XYOSTED INJ 75/0.5	3	PA, QL (10 pens every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
XYOSTED INJ 100/0.5	3	PA, QL (10 pens every 30 days)
ANORECTAL AGENTS		
INTRARECTAL STEROIDS		
CORTIFOAM AER 90MG	3	NM
RECTAL COMBINATIONS		
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	NM
<i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i>	1	NM
PROCTOFOAM AER HC 1%	3	NM
RECTAL STEROIDS		
<i>hydrocortisone cream 2.5%</i>	1	NM
<i>procto-med hc</i>	1	NM
<i>proctozone-hc</i>	1	NM
VASODILATING AGENTS		
RECTIV OIN 0.4%	3	NM
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide rectal foam 2 mg/act</i>	1	NM
<i>hydrocortisone enema 100 mg/60ml</i>	1	NM
UCERIS AER 2MG/ACT	3	NM
VASODILATING AGENTS		
<i>nitroglycerin oint 0.4%</i>	1	NM
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole tab 200 mg</i>	1	NM
BENZNIDAZOLE TAB 12.5MG	3	PA, NM
BENZNIDAZOLE TAB 100MG	3	PA, NM
BILTRICIDE TAB 600MG	3	NM
EMVERM CHW 100MG	3	QL (2 ea every 135 days), NM
<i>ivermectin tab 3 mg</i>	1	NM
<i>praziquantel tab 600 mg</i>	1	NM
STROMECTOL TAB 3MG	3	NM
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
IMPAVIDO CAP 50MG	3	PA, NM
<i>metronidazole tab 250 mg</i>	1	NM
<i>metronidazole tab 500 mg</i>	1	NM
NEBUPENT INH 300MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>pentamidine isethionate for inj soln 300 mg</i>	1	NM
<i>pentamidine isethionate for nebulization soln 300 mg</i>	1	NM
<i>tinidazole tab 250 mg</i>	1	NM
<i>tinidazole tab 500 mg</i>	1	NM
<i>trimethoprim tab 100 mg</i>	1	NM
XIFAXAN TAB 200MG	3	QL (9 tablets per 180 days), NM
XIFAXAN TAB 550MG	3	QL (126 tablets per lifetime)

ANTI-INFECTIVE MISC. - COMBINATIONS

BACTRIM DS TAB 800-160	3	NM
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	NM
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	NM
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	NM
<i>sulfatrim pediatric</i>	1	NM

ANTIPROTOZOAL AGENTS

ALINIA SUS 100/5ML	3	NM
ALINIA TAB 500MG	3	NM
<i>atovaquone susp 750 mg/5ml</i>	1	QL (QvT= 140 ml per 180 days), NM
MEPRON SUS	3	QL (QvT= 140 ml per 180 days), NM
<i>nitazoxanide tab 500 mg</i>	1	NM

CARBAPENEMS

<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	1	NM
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GLYCOPEPTIDES

FIRVANQ SOL 25MG/ML	3	NM
FIRVANQ SOL 50MG/ML	3	NM
VANCOCIN CAP 125MG	3	NM
VANCOCIN CAP 250MG	3	NM
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	NM
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	NM
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	1	NM
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	1	NM

LEPROSTATICS

<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
LINCOSAMIDES		
<i>clindamycin hcl cap 75 mg</i>	1	NM
<i>clindamycin hcl cap 150 mg</i>	1	NM
<i>clindamycin hcl cap 300 mg</i>	1	NM
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	NM
MONOBACTAMS		
<i>aztreonam for inj 1 gm</i>	1	NM
<i>aztreonam for inj 2 gm</i>	1	NM
CAYSTON INH 75MG	3	SP, PA, NM
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	1	NM
<i>linezolid tab 600 mg</i>	1	NM
SIVEXTRO TAB 200MG	3	NM
ZYVOX SUS 100MG/5M	3	NM
ZYVOX TAB 600MG	3	NM
PLEUROMUTILINS		
XENLETA TAB 600MG	3	NM
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	1	NM
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
ASPRUZYO SPR GRA 500MG	3	
ASPRUZYO SPR GRA 1000MG	3	
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	
NITRATES		
ISORDIL TAB 5MG	3	
<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
NITRO-BID OIN 2%	3	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<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	
NITROSTAT SUB 0.3MG	2	
NITROSTAT SUB 0.4MG	2	
NITROSTAT SUB 0.6MG	2	

ANTI-ANXIETY AGENTS

ANTI-ANXIETY AGENTS - MISC.

<i>buspirone hcl tab 5 mg</i>	1	NM
<i>buspirone hcl tab 7.5 mg</i>	1	NM
<i>buspirone hcl tab 10 mg</i>	1	NM
<i>buspirone hcl tab 15 mg</i>	1	NM
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	NM
<i>hydroxyzine hcl tab 10 mg</i>	1	NM
<i>hydroxyzine hcl tab 25 mg</i>	1	NM
<i>hydroxyzine hcl tab 50 mg</i>	1	NM
<i>hydroxyzine pamoate cap 25 mg</i>	1	NM
<i>hydroxyzine pamoate cap 50 mg</i>	1	NM
<i>hydroxyzine pamoate cap 100 mg</i>	1	NM
<i>meprobamate tab 200 mg</i>	1	NM
<i>meprobamate tab 400 mg</i>	1	NM

BENZODIAZEPINES

ALPRAZOLAM CON 1 MG/ML	2	NM
<i>alprazolam tab 0.5 mg</i>	1	NM
<i>alprazolam tab 0.25 mg</i>	1	NM
<i>alprazolam tab 1 mg</i>	1	NM
<i>alprazolam tab 2 mg</i>	1	NM
<i>alprazolam tab er 24hr 0.5 mg</i>	1	NM
<i>alprazolam tab er 24hr 2 mg</i>	1	NM
<i>alprazolam xr</i>	1	NM
<i>chlordiazepoxide hcl cap 5 mg</i>	1	NM
<i>chlordiazepoxide hcl cap 10 mg</i>	1	NM
<i>chlordiazepoxide hcl cap 25 mg</i>	1	NM
<i>clorazepate dipotassium tab 3.75 mg</i>	1	NM
<i>clorazepate dipotassium tab 7.5 mg</i>	1	NM
<i>clorazepate dipotassium tab 15 mg</i>	1	NM
<i>diazepam inj 5 mg/ml</i>	1	NM
<i>diazepam intensol</i>	1	NM
<i>diazepam oral soln 1 mg/ml</i>	1	NM
<i>diazepam tab 2 mg</i>	1	NM
<i>diazepam tab 5 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>diazepam tab 10 mg</i>	1	NM
<i>lorazepam tab 0.5 mg</i>	1	NM
<i>lorazepam tab 1 mg</i>	1	NM
<i>lorazepam tab 2 mg</i>	1	NM
<i>oxazepam cap 10 mg</i>	1	NM
<i>oxazepam cap 15 mg</i>	1	NM
<i>oxazepam cap 30 mg</i>	1	NM
VALIUM TAB 2MG	3	NM
VALIUM TAB 5MG	3	NM
VALIUM TAB 10MG	3	NM
XANAX TAB 0.5MG	3	NM
XANAX TAB 0.25MG	3	NM
XANAX TAB 1MG	3	NM
XANAX TAB 2MG	3	NM
XANAX XR TAB 0.5MG	3	NM
XANAX XR TAB 1MG	3	NM
XANAX XR TAB 2MG	3	NM
XANAX XR TAB 3MG	3	NM

ANTIARRHYTHMICS

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate cap 100 mg</i>	1	
<i>disopyramide phosphate cap 150 mg</i>	1	
NORPACE CAP 100MG	3	
NORPACE CAP 100MG CR	3	
NORPACE CAP 150MG	3	
NORPACE CAP 150MG CR	3	
<i>procainamide hcl inj 100 mg/ml</i>	1	NM
<i>quinidine gluconate tab er 324 mg</i>	1	
<i>quinidine sulfate tab 200 mg</i>	1	
<i>quinidine sulfate tab 300 mg</i>	1	

ANTIARRHYTHMICS TYPE I-B

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

ANTIARRHYTHMICS TYPE I-C

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

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Drug Name	Drug Tier	Requirements/Limits
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
RYTHMOL SR CAP 225MG	3	
RYTHMOL SR CAP 325MG	3	
RYTHMOL SR CAP 425MG	3	

ANTIARRHYTHMICS TYPE III

<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1	
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1	
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1	
MULTAQ TAB 400MG	3	
<i>pacerone</i>	1	
TIKOSYN CAP 125MCG	3	
TIKOSYN CAP 250MCG	3	
TIKOSYN CAP 500MCG	3	

ANTIASTHMATIC AND BRONCHODILATOR AGENTS

ANTI-INFLAMMATORY AGENTS

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	
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ANTIASTHMATIC - MONOCLONAL ANTIBODIES

FASENRA PEN INJ 30MG/ML	2	SP, PA
NUCALA INJ 40MG/0.4	2	SP, PA
NUCALA INJ 100MG/ML	2	SP, PA
XOLAIR INJ 75/0.5	2	SP, PA, NM
XOLAIR INJ 150MG/ML	2	SP, PA, NM
XOLAIR INJ 300/2ML	2	SP, PA, NM

BRONCHODILATORS - ANTICHOLINERGICS

ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	2	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
SPIRIVA AER 1.25MCG	2	
SPIRIVA CAP HANDIHLR	2	
SPIRIVA SPR 2.5MCG	2	
YUPELRI SOL	3	

LEUKOTRIENE MODULATORS

ACCOLATE TAB 10MG	3	
ACCOLATE TAB 20MG	3	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<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	
SINGULAIR CHW 4MG	3	
SINGULAIR CHW 5MG	3	
SINGULAIR GRA 4MG	3	
SINGULAIR TAB 10MG	3	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP TAB 250MCG	3	
DALIRESP TAB 500MCG	3	
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
STEROID INHALANTS		
ARMONAIR DIG AER 55MCG	3	QL (2 inhalers every 30 days)
ARMONAIR DIG AER 113MCG	3	QL (2 inhalers every 30 days)
ARMONAIR DIG AER 232MCG	3	QL (2 inhalers every 30 days)
ARNUITY ELPT INH 50MCG	2	
ARNUITY ELPT INH 100MCG	2	
ARNUITY ELPT INH 200MCG	2	
ASMANEX HFA AER 50MCG	3	AGE; PA Required for those 11 years and older
ASMANEX HFA AER 100 MCG	3	AGE; PA Required for those 11 years and older
ASMANEX HFA AER 200 MCG	3	AGE; PA Required for those 11 years and older
<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	3	
FLOVENT DISK AER 100MCG	3	
FLOVENT DISK AER 250MCG	3	
FLOVENT HFA AER 44MCG	3	
FLOVENT HFA AER 110MCG	3	
FLOVENT HFA AER 220MCG	3	
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	1	
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	1	
<i>fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)</i>	1	
<i>fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)</i>	1	
<i>fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)</i>	1	
PULMICORT INH 90MCG	3	
PULMICORT INH 180MCG	3	
QVAR REDIIHA AER 80MCG	2	
QVAR REDIIHAL AER 40MCG	2	
SYMPATHOMIMETICS		
AIRSUPRA AER 90-80MCG	3	NM
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</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>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
ANORO ELLIPT AER 62.5-25	2	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	1	
BEVESPI AER 9-4.8MCG	2	
BREO ELLIPTA INH 50-25MCG	2	
BREO ELLIPTA INH 100-25	2	
BREO ELLIPTA INH 200-25	2	
<i>breyndra aer 80/4.5</i>	1	
<i>breyndra aer 160/4.5</i>	1	
BREZTRI AERO AER SPHERE	2	
BROVANA NEB 15MCG	3	
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	
COMBIVENT AER 20-100	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	1	
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	1	
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	1	
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	1	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	1	NM
<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 conc 1.25 mg/0.5ml (base equiv)</i>	1	
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	
PERFOROMIST NEB 20MCG	3	
PROAIR DIGIH AER	3	
PROAIR RESPI AER	2	
SEREVENT DIS AER 50MCG	2	
STRIVERDI AER 2.5MCG	3	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	NM
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
TRELEGY AER 100MCG	2	
TRELEGY AER 200MCG	2	
VENTOLIN HFA AER	3	
<i>wixela inhub</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
XANTHINES		
THEO-24 CAP 100MG CR	3	
THEO-24 CAP 200MG CR	3	
THEO-24 CAP 300MG CR	3	
THEO-24 CAP 400MG ER	3	
<i>theophylline elixir 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven</i>	1	
<i>warfarin sodium tab 1 mg</i>	1	
<i>warfarin sodium tab 2.5 mg</i>	1	
<i>warfarin sodium tab 4 mg</i>	1	
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	
<i>warfarin sodium tab 7.5 mg</i>	1	
<i>warfarin sodium tab 10 mg</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS ST P TAB 5MG	2	NM
ELIQUIS TAB 2.5MG	2	
ELIQUIS TAB 5MG	2	
XARELTO STAR TAB 15/20MG	2	NM
XARELTO SUS 1MG/ML	2	
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
HEPARINS AND HEPARINOID-LIKE AGENTS		
ARIXTRA INJ 2.5/0.5	3	NM
ARIXTRA INJ 5/0.4ML	3	NM
ARIXTRA INJ 7.5/0.6	3	NM
ARIXTRA INJ 10/0.8ML	3	NM
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	1	NM
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	1	NM
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	1	NM
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	1	NM
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	1	NM
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	1	NM
FRAGMIN INJ 2500/0.2	3	NM
FRAGMIN INJ 2500/ML	3	NM
FRAGMIN INJ 5000/0.2	3	NM
FRAGMIN INJ 7500/0.3	3	NM
FRAGMIN INJ 10000/ML	3	NM
FRAGMIN INJ 12500UNT	3	NM
FRAGMIN INJ 15000UNT	3	NM
FRAGMIN INJ 18000UNT	3	NM
FRAGMIN INJ 95000UNT	3	NM
HEPARIN SOD INJ 5000/0.5	1	NM
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	NM
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	NM
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	1	NM
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	NM
LOVENOX INJ 30/0.3ML	3	NM
LOVENOX INJ 40/0.4ML	3	NM
LOVENOX INJ 60/0.6ML	3	NM
LOVENOX INJ 80/0.8ML	3	NM
LOVENOX INJ 100MG/ML	3	NM
LOVENOX INJ 120/0.8	3	NM
LOVENOX INJ 150MG/ML	3	NM
LOVENOX INJ 300/3ML	3	NM

ANTICONVULSANTS

AMPA GLUTAMATE RECEPTOR ANTAGONISTS

FYCOMPA SUS 0.5MG/ML	3	
FYCOMPA TAB 2MG	3	

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Drug Name	Drug Tier	Requirements/Limits
FYCOMPA TAB 4MG	3	
FYCOMPA TAB 6MG	3	
FYCOMPA TAB 8MG	3	
FYCOMPA TAB 10MG	3	
FYCOMPA TAB 12MG	3	

ANTICONVULSANTS - BENZODIAZEPINES

<i>clobazam suspension 2.5 mg/ml</i>	1	
<i>clobazam tab 10 mg</i>	1	
<i>clobazam tab 20 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 1 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 2 mg</i>	1	NM
<i>clonazepam tab 0.5 mg</i>	1	NM
<i>clonazepam tab 1 mg</i>	1	NM
<i>clonazepam tab 2 mg</i>	1	NM
DIASTAT ACDL GEL 5-10MG	3	NM
DIASTAT ACDL GEL 12.5-20	3	NM
DIASTAT PED GEL 2.5M GEL	3	NM
<i>diazepam rectal gel delivery system 2.5 mg</i>	1	NM
<i>diazepam rectal gel delivery system 10 mg</i>	1	NM
<i>diazepam rectal gel delivery system 20 mg</i>	1	NM
KLONOPIN TAB 0.5MG	3	NM
KLONOPIN TAB 1MG	3	NM
KLONOPIN TAB 2MG	3	NM
NAYZILAM SPR 5MG	2	NM
ONFI SUS 2.5MG/ML	3	
ONFI TAB 10MG	3	
ONFI TAB 20MG	3	
SYMPAZAN MIS 5MG	3	
SYMPAZAN MIS 10MG	3	
SYMPAZAN MIS 20MG	3	
VALTOCO SPR 5MG	2	NM
VALTOCO SPR 10MG	2	NM
VALTOCO SPR 15MG	2	NM
VALTOCO SPR 20MG	2	NM

ANTICONVULSANTS - MISC.

APTIOM TAB 200MG	3	
APTIOM TAB 400MG	3	
APTIOM TAB 600MG	3	
APTIOM TAB 800MG	3	

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Drug Name	Drug Tier	Requirements/Limits
BANZEL SUS 40MG/ML	3	
BANZEL TAB 200MG	3	
BANZEL TAB 400MG	3	
BRIVIACT SOL 10MG/ML	3	
BRIVIACT TAB 10MG	3	
BRIVIACT TAB 25MG	3	
BRIVIACT TAB 50MG	3	
BRIVIACT TAB 75MG	3	
BRIVIACT TAB 100MG	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	
DIACOMIT CAP 250MG	3	SP, PA; LD
DIACOMIT CAP 500MG	3	SP, PA; LD
DIACOMIT PAK 250MG	3	SP, PA; LD
DIACOMIT PAK 500MG	3	SP, PA; LD
ELEPSIA XR TAB 1000MG	3	
ELEPSIA XR TAB 1500MG	3	
EPIDIOLEX SOL 100MG/ML	3	SP
<i>epitol</i>	1	
EPRONTIA SOL 25MG/ML	3	
FINTEPLA SOL 2.2MG/ML	3	SP, PA; LD
<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	
KEPPRA SOL 100MG/ML	3	
KEPPRA TAB 250MG	3	
KEPPRA TAB 500MG	3	
KEPPRA TAB 750MG	3	
KEPPRA TAB 1000MG	3	

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Drug Name	Drug Tier	Requirements/Limits
KEPPRA XR TAB 500MG	3	
KEPPRA XR TAB 750MG	3	
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide tab 50 mg</i>	1	
<i>lacosamide tab 100 mg</i>	1	
<i>lacosamide tab 150 mg</i>	1	
<i>lacosamide tab 200 mg</i>	1	
LAMICTAL CHW 5MG	3	
LAMICTAL CHW 25MG	3	
LAMICTAL KIT START 35	3	NM
LAMICTAL KIT START 49	3	NM
LAMICTAL KIT START 98	3	NM
LAMICTAL ODT KIT	3	NM
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	NM
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 (42) & 100 mg (7) starter kit</i>	1	NM
<i>lamotrigine tab 35 x 25 mg starter kit</i>	1	NM
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1	NM
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	1	NM
<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	
LYRICA CAP 25MG	3	
LYRICA CAP 50MG	3	
LYRICA CAP 75MG	3	
LYRICA CAP 100MG	3	
LYRICA CAP 150MG	3	
LYRICA CAP 200MG	3	
LYRICA CAP 225MG	3	
LYRICA CAP 300MG	3	
LYRICA SOL 20MG/ML	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>pregabalin cap 25 mg</i>	1	
<i>pregabalin cap 50 mg</i>	1	
<i>pregabalin cap 75 mg</i>	1	
<i>pregabalin cap 100 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin cap 150 mg</i>	1	
<i>pregabalin cap 200 mg</i>	1	
<i>pregabalin cap 225 mg</i>	1	
<i>pregabalin cap 300 mg</i>	1	
<i>pregabalin soln 20 mg/ml</i>	1	
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 125 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	
<i>rufinamide susp 40 mg/ml</i>	1	
<i>rufinamide tab 200 mg</i>	1	
<i>rufinamide tab 400 mg</i>	1	
<i>subvenite</i>	1	
<i>subvenite starter kit/blu</i>	1	NM
<i>subvenite starter kit/gre</i>	1	NM
<i>subvenite starter kit/ora</i>	1	NM
TEGRETOL SUS 100/5ML	3	
TEGRETOL TAB 200MG	3	
TEGRETOL-XR TAB 100MG	3	
TEGRETOL-XR TAB 200MG	3	
TEGRETOL-XR TAB 400MG	3	
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 25 mg</i>	1	
<i>topiramate cap er 24hr 50 mg</i>	1	
<i>topiramate cap er 24hr 100 mg</i>	1	
<i>topiramate cap er 24hr 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	

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Drug Name	Drug Tier	Requirements/Limits
<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	
VIMPAT SOL 10MG/ML	2	
VIMPAT TAB 50MG	2	
VIMPAT TAB 100MG	2	
VIMPAT TAB 150MG	2	
VIMPAT TAB 200MG	2	
ZONISADE SUS 100MG/5	3	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
ZTALMY SUS 50MG/ML	3	PA

CARBAMATES

<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
XCOPRI PAK 100-150	3	
XCOPRI PAK 150-200	3	
XCOPRI STARTER PAK 12.5-25	3	NM
XCOPRI STARTER PAK 50-100	3	NM
XCOPRI STARTER PAK 150-200	3	NM
XCOPRI TAB 50MG	3	
XCOPRI TAB 100MG	3	
XCOPRI TAB 150MG	3	
XCOPRI TAB 200MG	3	

GABA MODULATORS

GABITRIL TAB 2MG	3	
GABITRIL TAB 4MG	3	
GABITRIL TAB 12MG	3	
GABITRIL TAB 16MG	3	
SABRIL POW 500MG	3	SP; LD
SABRIL TAB 500MG	3	SP
<i>tiagabine hcl tab 2 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
<i>vigabatrin powd pack 500 mg</i>	1	SP; LD
<i>vigabatrin tab 500 mg</i>	1	SP
HYDANTOINS		
DILANTIN CAP 30MG	2	
DILANTIN CAP 100MG	2	
DILANTIN CHW 50MG	2	
DILANTIN-125 SUS 125/5ML	2	
PHENYTEK CAP 200MG	1	
PHENYTEK CAP 300MG	1	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
SUCCINIMIDES		
CELONTIN CAP 300MG	2	
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>methsuximide cap 300 mg</i>	1	
ZARONTIN CAP 250MG	3	
ZARONTIN SOL 250/5ML	3	
VALPROIC ACID		
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	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	1	
<i>divalproex sodium tab delayed release 250 mg</i>	1	
<i>divalproex sodium tab delayed release 500 mg</i>	1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<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	
REMERON TAB 15MG	3	
REMERON TAB 30MG	3	
ANTIDEPRESSANT COMBINATIONS		
AUVELITY TAB 45-105MG	3	
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 150 mg</i>	1	
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
WELLBUTRIN TAB 100MG SR	3	
WELLBUTRIN TAB 150MG SR	3	
WELLBUTRIN TAB 200MG SR	3	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM DIS 6MG/24HR	3	
EMSAM DIS 9MG/24HR	3	
EMSAM DIS 12MG/24H	3	
MARPLAN TAB 10MG	3	
NARDIL TAB 15MG	3	
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
CELEXA TAB 10MG	3	
CELEXA TAB 20MG	3	
CELEXA TAB 40MG	3	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl tab 60 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	
LEXAPRO TAB 5MG	3	
LEXAPRO TAB 10MG	3	
LEXAPRO TAB 20MG	3	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	1	
<i>paroxetine hcl tab 10 mg</i>	1	
<i>paroxetine hcl tab 20 mg</i>	1	
<i>paroxetine hcl tab 30 mg</i>	1	
<i>paroxetine hcl tab 40 mg</i>	1	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	
PAXIL CR TAB 12.5MG	3	
PAXIL CR TAB 37.5MG	3	
PAXIL SUS 10MG/5ML	3	
PAXIL TAB 10MG	3	
PAXIL TAB 20MG	3	
PAXIL TAB 30MG	3	
PAXIL TAB 40MG	3	
PEXEVA TAB 10MG	3	
PEXEVA TAB 20MG	3	
PEXEVA TAB 30MG	3	
PROZAC CAP 10MG	3	
PROZAC CAP 20MG	3	
PROZAC CAP 40MG	3	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
ZOLOFT CON 20MG/ML	3	
ZOLOFT TAB 25MG	3	
ZOLOFT TAB 50MG	3	
ZOLOFT TAB 100MG	3	

SEROTONIN MODULATORS

<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	
<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	
TRINTELLIX TAB 5MG	2	
TRINTELLIX TAB 10MG	2	
TRINTELLIX TAB 20MG	2	
VIIBRYD KIT STARTER	2	NM
VIIBRYD TAB 10MG	2	
VIIBRYD TAB 20MG	2	
VIIBRYD TAB 40MG	2	
<i>vilazodone hcl tab 10 mg</i>	1	
<i>vilazodone hcl tab 20 mg</i>	1	
<i>vilazodone hcl tab 40 mg</i>	1	

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

CYMBALTA CAP 20MG	3	
CYMBALTA CAP 30MG	3	
CYMBALTA CAP 60MG	3	
DESVENLAFAX TAB 50MG ER	3	
DESVENLAFAX TAB 100MG ER	3	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	
DRIZALMA CAP 20MG DR	3	
DRIZALMA CAP 30MG DR	3	
DRIZALMA CAP 40MG DR	3	

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Drug Name	Drug Tier	Requirements/Limits
DRIZALMA CAP 60MG DR	3	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	
EFFEXOR XR CAP 37.5MG	3	
EFFEXOR XR CAP 75MG	3	
EFFEXOR XR CAP 150MG	3	
FETZIMA CAP 20MG	3	
FETZIMA CAP 40MG	3	
FETZIMA CAP 80MG	3	
FETZIMA CAP 120MG	3	
FETZIMA CAP TITRATIO	3	NM
PRISTIQ TAB 25MG	2	
PRISTIQ TAB 50MG	2	
PRISTIQ TAB 100MG	2	
<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	
TRICYCLIC AGENTS		
<i>amitriptyline hcl tab 10 mg</i>	1	
<i>amitriptyline hcl tab 25 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>amitriptyline hcl tab 50 mg</i>	1	
<i>amitriptyline hcl tab 75 mg</i>	1	
<i>amitriptyline hcl tab 100 mg</i>	1	
<i>amitriptyline hcl tab 150 mg</i>	1	
<i>amoxapine tab 25 mg</i>	1	
<i>amoxapine tab 50 mg</i>	1	
<i>amoxapine tab 100 mg</i>	1	
<i>amoxapine tab 150 mg</i>	1	
ANAFRANIL CAP 25MG	3	
ANAFRANIL CAP 50MG	3	
ANAFRANIL CAP 75MG	3	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	
<i>clomipramine hcl cap 75 mg</i>	1	
<i>desipramine hcl tab 10 mg</i>	1	
<i>desipramine hcl tab 25 mg</i>	1	
<i>desipramine hcl tab 50 mg</i>	1	
<i>desipramine hcl tab 75 mg</i>	1	
<i>desipramine hcl tab 100 mg</i>	1	
<i>desipramine hcl tab 150 mg</i>	1	
<i>doxepin hcl cap 10 mg</i>	1	
<i>doxepin hcl cap 25 mg</i>	1	
<i>doxepin hcl cap 50 mg</i>	1	
<i>doxepin hcl cap 75 mg</i>	1	
<i>doxepin hcl cap 100 mg</i>	1	
<i>doxepin hcl cap 150 mg</i>	1	
<i>doxepin hcl conc 10 mg/ml</i>	1	
<i>imipramine hcl tab 10 mg</i>	1	
<i>imipramine hcl tab 25 mg</i>	1	
<i>imipramine hcl tab 50 mg</i>	1	
<i>imipramine pamoate cap 75 mg</i>	1	
<i>imipramine pamoate cap 100 mg</i>	1	
<i>imipramine pamoate cap 125 mg</i>	1	
<i>imipramine pamoate cap 150 mg</i>	1	
NORPRAMIN TAB 10MG	3	
NORPRAMIN TAB 25MG	3	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>protriptyline hcl tab 10 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	1	
<i>trimipramine maleate cap 50 mg</i>	1	
<i>trimipramine maleate cap 100 mg</i>	1	

ANTIDIABETICS

ALPHA-GLUCOSIDASE INHIBITORS

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

ANTIDIABETIC - AMYLIN ANALOGS

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

ANTIDIABETIC COMBINATIONS

ACTOPLUS MET TAB 15-850MG	3	**
DUETACT TAB 30-2MG	3	**
DUETACT TAB 30-4MG	3	**
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	**
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	**
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	**
<i>glyburide-metformin tab 1.25-250 mg</i>	1	**
<i>glyburide-metformin tab 2.5-500 mg</i>	1	**
<i>glyburide-metformin tab 5-500 mg</i>	1	**
GLYXAMBI TAB 10-5 MG	2	**
GLYXAMBI TAB 25-5 MG	2	**
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	**
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	**
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	**
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	**
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	**
SOLIQUA INJ 100/33	2	**
SYNJARDY TAB	2	**
SYNJARDY TAB 5-500MG	2	**
SYNJARDY TAB 5-1000MG	2	**
SYNJARDY TAB 12.5-500	2	**

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Drug Name	Drug Tier	Requirements/Limits
SYNJARDY XR TAB	2	**
SYNJARDY XR TAB 5-1000MG	2	**
SYNJARDY XR TAB 10-1000	2	**
SYNJARDY XR TAB 25-1000	2	**
TRIJARDY XR TAB	2	**
XIGDUO XR TAB 2.5-1000	2	**
XIGDUO XR TAB 5-500MG	2	**
XIGDUO XR TAB 5-1000MG	2	**
XIGDUO XR TAB 10-500MG	2	**
XIGDUO XR TAB 10-1000	2	**
BIGUANIDES		
GLUMETZA TAB 500MG	3	PA; **
GLUMETZA TAB 1000MG	3	PA; **
<i>metformin hcl tab 500 mg</i>	1	**
<i>metformin hcl tab 850 mg</i>	1	**
<i>metformin hcl tab 1000 mg</i>	1	**
<i>metformin hcl tab er 24hr 500 mg</i>	1	**
<i>metformin hcl tab er 24hr 750 mg</i>	1	**
<i>metformin hcl tab er 24hr modified release 500 mg</i>	1	PA; **
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	1	PA; **
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	1	PA; **
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	1	PA; **
DIABETIC OTHER		
BAQSIMI ONE POW 3MG/DOSE	2	NM; **
<i>diazoxide susp 50 mg/ml</i>	1	**
GLUCAGEN INJ HYPOKIT	2	NM; **
GLUCAGON KIT 1MG	2	NM; **
GVOKE HYPO 2 INJ 1MG/.2ML	2	NM; **
GVOKE HYPO 2 INJ .5/.1ML	2	NM; **
GVOKE KIT SOL 1MG/0.2M	2	NM; **
GVOKE PFS INJ	2	NM; **
KORLYM TAB 300MG	3	SP, PA; LD
<i>mifepristone tab 300 mg</i>	1	SP, PA
PROGLYCEM SUS 50MG/ML	3	**
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA TAB 25MG	2	**
JANUVIA TAB 50MG	2	**
JANUVIA TAB 100MG	2	**

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Drug Name	Drug Tier	Requirements/Limits
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET TAB 0.8MG	3	**
INCRETIN MIMETIC AGENTS		
MOUNJARO INJ 2.5/0.5	2	PA, NM; **
MOUNJARO INJ 5MG/0.5	2	PA; **
MOUNJARO INJ 7.5/0.5	2	PA; **
MOUNJARO INJ 10MG/0.5	2	PA; **
MOUNJARO INJ 12.5/0.5	2	PA; **
MOUNJARO INJ 15MG/0.5	2	PA; **
OZEMPIC INJ 2MG/3ML	2	PA; **
OZEMPIC INJ 4MG/3ML	2	PA; **
OZEMPIC INJ 8MG/3ML	2	PA; **
RYBELSUS TAB 3MG	2	PA; **
RYBELSUS TAB 7MG	2	PA; **
RYBELSUS TAB 14MG	2	PA; **
TRULICITY INJ 0.75/0.5	2	PA; **
TRULICITY INJ 1.5/0.5	2	PA; **
TRULICITY INJ 3/0.5	2	PA; **
TRULICITY INJ 4.5/0.5	2	PA; **
VICTOZA INJ 18MG/3ML	2	PA, QL (3 pens every 30 days); **
INSULIN		
BASAGLAR INJ 100UNIT	2	**
FIASP INJ 100/ML	2	**
HUMULIN R INJ U-500	2	**
LANTUS INJ 100/ML	2	**
LANTUS SOLOS INJ 100/ML	2	**
NOVOLIN INJ 70/30	2	OTC; **
NOVOLIN N INJ 100 UNIT	2	OTC; **
NOVOLIN N INJ U-100	2	OTC; **
NOVOLIN R INJ 100 UNIT	2	OTC; **
NOVOLIN R INJ U-100	2	OTC; **
NOVOLOG INJ 100/ML	2	**
NOVOLOG INJ FLEXPEN	2	**
NOVOLOG INJ PENFILL	2	**
NOVOLOG MIX INJ 70/30	2	**
NOVOLOG MIX INJ FLEXPEN	2	**
TOUJEO MAX INJ 300/ML	2	**
TOUJEO SOLO INJ 300/ML	2	**
TRESIBA FLEX INJ 100UNIT	2	**
TRESIBA FLEX INJ 200UNIT	2	**
TRESIBA INJ 100UNIT	2	**

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Drug Name	Drug Tier	Requirements/Limits
INSULIN SENSITIZING AGENTS		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	**
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	**
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	**
MEGLITINIDE ANALOGUES		
<i>nateglinide tab 60 mg</i>	1	**
<i>nateglinide tab 120 mg</i>	1	**
<i>repaglinide tab 0.5 mg</i>	1	**
<i>repaglinide tab 1 mg</i>	1	**
<i>repaglinide tab 2 mg</i>	1	**
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA TAB 5MG	2	**
FARXIGA TAB 10MG	2	**
JARDIANCE TAB 10MG	2	**
JARDIANCE TAB 25MG	2	**
SULFONYLUREAS		
AMARYL TAB 1MG	3	**
AMARYL TAB 2MG	3	**
AMARYL TAB 4MG	3	**
<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 5 mg</i>	1	**
<i>glipizide tab er 24hr 10 mg</i>	1	**
<i>glipizide xl</i>	1	**
GLUCOTROL XL TAB 2.5MG	3	**
GLUCOTROL XL TAB 5MG	3	**
GLUCOTROL XL TAB 10MG	3	**
<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	**
GLYNASE TAB 1.5MG	3	**
GLYNASE TAB 3MG	3	**
GLYNASE TAB 6MG	3	**

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Drug Name	Drug Tier	Requirements/Limits
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	NM
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET CAP 100MG	3	NM
<i>deferasirox granules packet 90 mg</i>	1	SP
<i>deferasirox granules packet 180 mg</i>	1	SP
<i>deferasirox granules packet 360 mg</i>	1	SP
<i>deferasirox tab 90 mg</i>	1	SP
<i>deferasirox tab 180 mg</i>	1	SP
<i>deferasirox tab 360 mg</i>	1	SP
<i>deferasirox tab for oral susp 125 mg</i>	1	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	1	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	1	SP, PA
<i>deferiprone tab 500 mg</i>	1	SP
<i>deferiprone tab 1000 mg</i>	1	SP
EXJADE TAB 125MG	3	SP, PA
EXJADE TAB 250MG	3	SP, PA
EXJADE TAB 500MG	3	SP, PA
FERPRX 2-DAY TAB 1000MG	3	SP; LD
FERRIPROX SOL 100MG/ML	3	SP; LD
FERRIPROX TAB 500MG	3	SP; LD
JADENU SPRKL GRA 90MG	3	SP
JADENU SPRKL GRA 180MG	3	SP
JADENU SPRKL GRA 360MG	3	SP
JADENU TAB 90MG	3	SP
JADENU TAB 180MG	3	SP
JADENU TAB 360MG	3	SP
ANTIDOTES AND SPECIFIC ANTAGONISTS		
<i>deferoxamine mesylate for inj 2 gm</i>	1	SP, NM
DESFERAL INJ 500MG	1	SP, NM
DESFERAL INJ 500MG	3	SP, NM
OPIOID ANTAGONISTS		
KLOXXADO SPR 8MG	2	NM
LIFEMS NALOX INJ 2MG/2ML	3	NM
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	1	NM
<i>naltrexone hcl tab 50 mg</i>	1	NM
NARCAN SPR 4MG	2	NM
OPVEE SPR 2.7/0.1	3	NM
RIVIVE SPR 3/0.1ML	2	OTC, NM

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Drug Name	Drug Tier	Requirements/Limits
ZIMHI SOL	3	NM
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET TAB 50MG	3	QL (14 tabs every 23 days), NM
<i>granisetron hcl tab 1 mg</i>	1	QL (14 tabs every 23 days), NM
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	1	NM
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	1	NM
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	NM
<i>ondansetron hcl tab 4 mg</i>	1	NM
<i>ondansetron hcl tab 8 mg</i>	1	NM
<i>ondansetron hcl tab 24 mg</i>	1	NM
<i>ondansetron orally disintegrating tab 4 mg</i>	1	NM
<i>ondansetron orally disintegrating tab 8 mg</i>	1	NM
SANCUSO DIS 3.1MG	3	QL (2 patches every 23 days), NM
ANTIEMETICS - ANTICHOLINERGIC		
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	NM
TRANSDERM-SC DIS 1MG/3DAY	3	NM
<i>trimethobenzamide hcl cap 300 mg</i>	1	NM
ANTIEMETICS - MISCELLANEOUS		
AKYNZEO CAP 300-0.5	3	QL (2 caps every 23 days), NM
BONJESTA TAB 20-20MG	3	QL (60 tabs every 30 days), NM
DICLEGIS TAB 10-10MG	3	QL (60 tabs every 30 days), NM
<i>doxylamine-pyridoxine tab delayed release 10- 10 mg</i>	1	QL (60 tabs every 30 days), NM
<i>dronabinol cap 2.5 mg</i>	1	NM
<i>dronabinol cap 5 mg</i>	1	NM
<i>dronabinol cap 10 mg</i>	1	NM
MARINOL CAP 2.5MG	3	NM
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant capsule 40 mg</i>	1	QL (1 cap every 21 days), NM
<i>aprepitant capsule 80 mg</i>	1	QL (8 caps every 21 days), NM
<i>aprepitant capsule 125 mg</i>	1	QL (2 ea every 21 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1	QL (6 caps every 21 days), NM
EMEND CAP 80MG	3	QL (8 caps every 21 days), NM
EMEND SUS 125MG	3	QL (2 kits every 23 days), NM
EMEND TRIPAC PAK 80 & 125	3	QL (6 caps every 21 days), NM
VARUBI TAB 90MG	3	QL (4 tabs every 30 days), NM

ANTIFUNGALS

ANTIFUNGALS

ANCOBON CAP 250MG	3	NM
ANCOBON CAP 500MG	3	NM
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	NM
<i>griseofulvin microsize tab 500 mg</i>	1	NM
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	NM
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	NM
<i>nystatin tab 500000 unit</i>	1	NM
<i>terbinafine hcl tab 250 mg</i>	1	QL (168 tabs every year), NM

IMIDAZOLE-RELATED ANTIFUNGALS

CRESEMBA CAP 74.5MG	3	NM
CRESEMBA CAP 186 MG	3	NM
DIFLUCAN SUS 10MG/ML	3	NM
DIFLUCAN SUS 40MG/ML	3	NM
DIFLUCAN TAB 100MG	3	NM
DIFLUCAN TAB 150MG	3	NM
DIFLUCAN TAB 200MG	3	NM
<i>fluconazole for susp 10 mg/ml</i>	1	NM
<i>fluconazole for susp 40 mg/ml</i>	1	NM
<i>fluconazole tab 50 mg</i>	1	NM
<i>fluconazole tab 100 mg</i>	1	NM
<i>fluconazole tab 150 mg</i>	1	NM
<i>fluconazole tab 200 mg</i>	1	NM
<i>itraconazole cap 100 mg</i>	1	QL (QVT= 360 capsules per 365 days), NM
<i>itraconazole oral soln 10 mg/ml</i>	1	QL (QVT= 3600 ml per 365 days), NM
<i>ketoconazole tab 200 mg</i>	1	NM
NOXAFIL PAK 300MG	3	
NOXAFIL SUS 40MG/ML	3	

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Drug Name	Drug Tier	Requirements/Limits
NOXAFIL TAB 100MG	3	
<i>posaconazole susp 40 mg/ml</i>	1	
<i>posaconazole tab delayed release 100 mg</i>	1	
SPORANOX CAP 100MG	3	PA, NM
SPORANOX SOL 10MG/ML	3	PA, NM
TOLSURA CAP 65MG	3	PA, NM
VFEND SUS 40MG/ML	3	NM
VFEND TAB 50MG	3	NM
VFEND TAB 200MG	3	NM
VIVJOA CAP 150MG	3	NM
<i>voriconazole for susp 40 mg/ml</i>	1	NM
<i>voriconazole tab 50 mg</i>	1	NM
<i>voriconazole tab 200 mg</i>	1	NM

ANTI-HISTAMINES

ANTI-HISTAMINES - ETHANOLAMINES

<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	NM
<i>carbinoxamine maleate tab 4 mg</i>	1	NM
<i>clemastine fumarate tab 2.68 mg</i>	1	NM

ANTI-HISTAMINES - NON-SEDATING

CLARINEX TAB 5MG	3	NM
<i>desloratadine tab 5 mg</i>	1	NM
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	NM
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	NM

ANTI-HISTAMINES - PHENOTHIAZINES

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

ANTI-HISTAMINES - PIPERIDINES

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

ANTI-HYPERLIPIDEMICS

ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS

NEXLETOL TAB 180MG	3	PA
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ANTI-HYPERLIPIDEMICS - COMBINATIONS

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

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Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	
NEXLIZET TAB 180/10MG	3	PA
VYTORIN TAB 10-10MG	3	
VYTORIN TAB 10-20MG	3	
VYTORIN TAB 10-40MG	3	
VYTORIN TAB 10-80MG	3	
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl cap 0.5 gm</i>	1	
<i>icosapent ethyl cap 1 gm</i>	1	
LOVAZA CAP 1GM	3	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	
VASCEPA CAP 0.5GM	2	
VASCEPA CAP 1GM	2	
BILE ACID SEQUESTRANTS		
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>colesevelam hcl packet for susp 3.75 gm</i>	1	
<i>colesevelam hcl tab 625 mg</i>	1	
COLESTID POW 5GM	3	
COLESTID TAB 1GM	3	
<i>colestipol hcl granule packets 5 gm</i>	1	
<i>colestipol hcl tab 1 gm</i>	1	
<i>prevalite</i>	1	
QUESTRAN POW 4GM LITE	3	
WELCHOL PAK 3.75GM	2	
WELCHOL TAB 625MG	2	
FIBRIC ACID DERIVATIVES		
ANTARA CAP 90MG	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 48 mg</i>	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate tab 160 mg</i>	1	
<i>gemfibrozil tab 600 mg</i>	1	
LIPOFEN CAP 50MG	3	
LIPOFEN CAP 150MG	3	
LOPID TAB 600MG	3	
TRICOR TAB 48MG	3	
TRICOR TAB 145MG	3	
TRILIPIX CAP 45MG	3	
TRILIPIX CAP 135MG	3	

HMG COA REDUCTASE INHIBITORS

ATORVALIQ SUS 20MG/5ML	3	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
CRESTOR TAB 5MG	3	
CRESTOR TAB 10MG	3	
CRESTOR TAB 20MG	3	
CRESTOR TAB 40MG	3	
EZALLOR SPR CAP 5MG	3	
EZALLOR SPR CAP 10MG	3	
EZALLOR SPR CAP 20MG	3	
EZALLOR SPR CAP 40MG	3	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	
LESCOL XL TAB 80MG	3	
LIPITOR TAB 10MG	3	
LIPITOR TAB 20MG	3	
LIPITOR TAB 40MG	3	
LIPITOR TAB 80MG	3	
LIVALO TAB 1MG	3	
LIVALO TAB 2MG	3	
LIVALO TAB 4MG	3	
<i>lovastatin tab 10 mg</i>	1	
<i>lovastatin tab 20 mg</i>	1	
<i>lovastatin tab 40 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>pitavastatin calcium tab 1 mg</i>	1	
<i>pitavastatin calcium tab 2 mg</i>	1	
<i>pitavastatin calcium tab 4 mg</i>	1	
<i>pravastatin sodium tab 10 mg</i>	1	
<i>pravastatin sodium tab 20 mg</i>	1	
<i>pravastatin sodium tab 40 mg</i>	1	
<i>pravastatin sodium tab 80 mg</i>	1	
<i>rosuvastatin calcium tab 5 mg</i>	1	
<i>rosuvastatin calcium tab 10 mg</i>	1	
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	
<i>simvastatin tab 10 mg</i>	1	
<i>simvastatin tab 20 mg</i>	1	
<i>simvastatin tab 40 mg</i>	1	
<i>simvastatin tab 80 mg</i>	1	
ZOCOR TAB 10MG	3	
ZOCOR TAB 20MG	3	
ZOCOR TAB 40MG	3	
ZYPITAMAG TAB 2MG	3	
ZYPITAMAG TAB 4MG	3	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	
ZETIA TAB 10MG	3	
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
JUXTAPID CAP 5MG	3	SP, PA; LD
JUXTAPID CAP 10MG	3	SP, PA; LD
JUXTAPID CAP 20MG	3	SP, PA; LD
JUXTAPID CAP 30MG	3	SP, PA; LD
NICOTINIC ACID DERIVATIVES		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	
<i>niacor</i>	1	NM
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT INJ 75MG/ML	3	PA
PRALUENT INJ 150MG/ML	3	PA
ANTIHYPERTENSIVES		
ACE INHIBITORS		
ACCUPRIL TAB 5MG	3	
ACCUPRIL TAB 10MG	3	

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Drug Name	Drug Tier	Requirements/Limits
ACCUPRIL TAB 20MG	3	
ACCUPRIL TAB 40MG	3	
ALTACE CAP 1.25MG	3	
ALTACE CAP 2.5MG	3	
ALTACE CAP 5MG	3	
ALTACE CAP 10MG	3	
<i>benazepril hcl tab 5 mg</i>	1	
<i>benazepril hcl tab 10 mg</i>	1	
<i>benazepril hcl tab 20 mg</i>	1	
<i>benazepril hcl tab 40 mg</i>	1	
<i>captopril tab 12.5 mg</i>	1	
<i>captopril tab 25 mg</i>	1	
<i>captopril tab 50 mg</i>	1	
<i>captopril tab 100 mg</i>	1	
<i>enalapril maleate oral soln 1 mg/ml</i>	1	
<i>enalapril maleate tab 2.5 mg</i>	1	
<i>enalapril maleate tab 5 mg</i>	1	
<i>enalapril maleate tab 10 mg</i>	1	
<i>enalapril maleate tab 20 mg</i>	1	
EPANED SOL 1MG/ML	3	
<i>fosinopril sodium tab 10 mg</i>	1	
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
LOTENSIN TAB 10MG	3	
LOTENSIN TAB 20MG	3	
LOTENSIN TAB 40MG	3	
<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	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>ramipril cap 2.5 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
VASOTEC TAB 2.5MG	3	
VASOTEC TAB 5MG	3	
VASOTEC TAB 10MG	3	
VASOTEC TAB 20MG	3	
ZESTRIL TAB 2.5MG	3	
ZESTRIL TAB 5MG	3	
ZESTRIL TAB 10MG	3	
ZESTRIL TAB 20MG	3	
ZESTRIL TAB 30MG	3	
ZESTRIL TAB 40MG	3	

AGENTS FOR PHEOCHROMOCYTOMA

DIBENZYLINE CAP 10MG	2	NM
<i>metirosine cap 250 mg</i>	1	NM
<i>phenoxybenzamine hcl cap 10 mg</i>	1	NM

ANGIOTENSIN II RECEPTOR ANTAGONISTS

ATACAND TAB 4MG	3	
ATACAND TAB 8MG	3	
ATACAND TAB 16MG	3	
ATACAND TAB 32MG	3	
AVAPRO TAB 75MG	3	
AVAPRO TAB 150MG	3	
AVAPRO TAB 300MG	3	
BENICAR TAB 5MG	3	
BENICAR TAB 20MG	3	
BENICAR TAB 40MG	3	
<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	
COZAAR TAB 25MG	3	
COZAAR TAB 50MG	3	
COZAAR TAB 100MG	3	
DIOVAN TAB 40MG	3	
DIOVAN TAB 80MG	3	
DIOVAN TAB 160MG	3	
DIOVAN TAB 320MG	3	
EDARBI TAB 40MG	3	
EDARBI TAB 80MG	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	1	
<i>olmesartan medoxomil tab 20 mg</i>	1	
<i>olmesartan medoxomil tab 40 mg</i>	1	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan oral soln 4 mg/ml</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	

ANTIADRENERGIC ANTIHYPERTENSIVES

CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
<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>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>methyldopa tab 250 mg</i>	1	
<i>methyldopa tab 500 mg</i>	1	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
ACCURETIC TAB 10-12.5	3	
ACCURETIC TAB 20-12.5	3	
<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 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
AVALIDE TAB 150-12.5	3	
AVALIDE TAB 300-12.5	3	
BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	2	

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Drug Name	Drug Tier	Requirements/Limits
<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	
BENICAR HCT TAB 20-12.5	3	
BENICAR HCT TAB 40-12.5	3	
BENICAR HCT TAB 40-25MG	3	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	
DIOVAN HCT TAB 80/12.5	3	
DIOVAN HCT TAB 160-12.5	3	
DIOVAN HCT TAB 160-25MG	3	
DIOVAN HCT TAB 320-12.5	3	
DIOVAN HCT TAB 320-25MG	3	
EDARBYCLOR TAB 40-12.5	3	
EDARBYCLOR TAB 40-25MG	3	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
EXFORGE TAB 5-160MG	3	
EXFORGE TAB 5-320MG	3	
EXFORGE TAB 10-160MG	3	
EXFORGE TAB 10-320MG	3	
EXFORGEH/5- TAB 160-12.5	3	
EXFORGEH/5- TAB 160-25	3	
EXFORGEH/10- TAB 160-12.5	3	
EXFORGEH/10- TAB 160-25	3	
EXFORGEH/10- TAB 320-25	3	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>HYZAAR TAB 50-12.5</i>	3	
<i>HYZAAR TAB 100-12.5</i>	3	
<i>HYZAAR TAB 100-25</i>	3	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>LOTENSIN HCT TAB 10-12.5</i>	3	
<i>LOTENSIN HCT TAB 20-12.5</i>	3	
<i>LOTENSIN HCT TAB 20-25MG</i>	3	
<i>LOTREL CAP 5-10MG</i>	3	
<i>LOTREL CAP 5-20MG</i>	3	
<i>LOTREL CAP 10-20MG</i>	3	
<i>LOTREL CAP 10-40MG</i>	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>MICARDIS HCT TAB 40/12.5</i>	3	
<i>MICARDIS HCT TAB 80-25MG</i>	3	
<i>MICARDIS HCT TAB 80/12.5</i>	3	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
TEKTURNA HCT TAB 300-12.5	3	
TEKTURNA HCT TAB 300-25MG	3	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	
TENORETIC TAB 50	3	
TENORETIC TAB 100	3	
<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	
TRIBENZOR20- TAB 5-12.5MG	3	
TRIBENZOR40- TAB 5-12.5MG	3	
TRIBENZOR40- TAB 5-25MG	3	
TRIBENZOR40- TAB 10-12.5	3	
TRIBENZOR40- TAB 10-25MG	3	
<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	
ZIAC TAB 2.5/6.25	3	
ZIAC TAB 5-6.25MG	3	
ZIAC TAB 10/6.25	3	
<i>DIRECT RENIN INHIBITORS</i>		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	
TEKTURNA TAB 150MG	3	
TEKTURNA TAB 300MG	3	

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Drug Name	Drug Tier	Requirements/Limits
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SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)

<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	

VASODILATORS

<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl tab 25 mg</i>	1	
<i>hydralazine hcl tab 50 mg</i>	1	
<i>hydralazine hcl tab 100 mg</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	
<i>minoxidil tab 10 mg</i>	1	

ANTIMALARIALS

ANTIMALARIAL COMBINATIONS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	QL (42 tabs every year), NM
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	QL (42 tabs every year), NM
COARTEM TAB 20-120MG	3	QL (24 tabs every year), NM

ANTIMALARIALS

<i>chloroquine phosphate tab 250 mg</i>	1	QL (16 tabs every year)
<i>chloroquine phosphate tab 500 mg</i>	1	QL (16 tabs every year)
HYDROXYCHLOROQUINE SULFATE TAB 100 MG	1	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
HYDROXYCHLOROQUINE SULFATE TAB 300 MG	1	
HYDROXYCHLOROQUINE SULFATE TAB 400 MG	1	
<i>mefloquine hcl tab 250 mg</i>	1	QL (14 tabs every year)
PLAQUENIL TAB 200MG	3	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	3	QL (46 tabs every year), NM
<i>quinine sulfate cap 324 mg</i>	1	QL (84 caps every year), NM

ANTIMYASTHENIC/CHOLINERGIC AGENTS

ANTIMYASTHENIC/CHOLINERGIC AGENTS

FIRDAPSE TAB 10MG	3	SP, PA, NM; LD
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	1	NM
<i>pyridostigmine bromide tab 60 mg</i>	1	NM
<i>pyridostigmine bromide tab er 180 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		

<i>cycloserine cap 250 mg</i>	1	NM
<i>ethambutol hcl tab 100 mg</i>	1	NM
<i>ethambutol hcl tab 400 mg</i>	1	NM
<i>isoniazid inj 100 mg/ml</i>	1	NM
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
MYCOBUTIN CAP 150MG	3	NM
PRETOMANID TAB 200MG	3	NM
PRIFTIN TAB 150MG	2	NM
<i>pyrazinamide tab 500 mg</i>	1	NM
<i>rifabutin cap 150 mg</i>	1	NM
<i>rifampin cap 150 mg</i>	1	NM
<i>rifampin cap 300 mg</i>	1	NM
SIRTURO TAB 20MG	3	NM
SIRTURO TAB 100MG	3	NM

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

<i>cyclophosphamide cap 25 mg</i>	2	NM; **
<i>cyclophosphamide cap 50 mg</i>	2	NM; **
<i>cyclophosphamide for inj 1 gm</i>	1	NM
<i>cyclophosphamide for inj 2 gm</i>	1	NM
<i>cyclophosphamide for inj 500 mg</i>	1	NM
GLEOSTINE CAP 10MG	3	NM; **
GLEOSTINE CAP 40MG	3	NM; **
GLEOSTINE CAP 100MG	3	NM; **
LEUKERAN TAB 2MG	2	NM; **
<i>melphalan tab 2 mg</i>	2	NM; **
MYLERAN TAB 2MG	2	NM; **
TEMODAR CAP 100MG	3	NM; **
TEMODAR CAP 140MG	3	NM; **
<i>temozolomide cap 5 mg</i>	2	NM; **
<i>temozolomide cap 20 mg</i>	2	NM; **
<i>temozolomide cap 140 mg</i>	2	NM; **
<i>temozolomide cap 180 mg</i>	2	NM; **

ANTIMETABOLITES

<i>capecitabine tab 150 mg</i>	2	NM; **
<i>capecitabine tab 500 mg</i>	2	NM; **
<i>cytarabine inj pf 20 mg/ml</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>cytarabine inj pf 100 mg/ml</i>	1	NM
<i>mercaptopurine tab 50 mg</i>	1	NM; **
<i>methotrexate sodium for inj 1 gm</i>	1	NM
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	NM
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	NM
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	NM
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	NM
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	NM; **
ONUREG TAB 200MG	3	PA, NM; **
ONUREG TAB 300MG	3	PA, NM; **
PURIXAN SUS 20MG/ML	3	NM; **
TABLOID TAB 40MG	2	NM; **
TREXALL TAB 5MG	3	NM; **
TREXALL TAB 7.5MG	3	NM; **
TREXALL TAB 10MG	3	NM; **
TREXALL TAB 15MG	3	NM; **
XELODA TAB 150MG	3	NM; **
XELODA TAB 500MG	3	NM; **
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	3	NM; **
VENCLEXTA TAB 50MG	3	NM; **
VENCLEXTA TAB 100MG	3	NM; **
VENCLEXTA TAB START PK	3	NM; **
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	1	NM; **
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	1	NM; **
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	1	NM; **
EXKIVITY CAP 40MG	3	SP, NM; **
<i>gefitinib tab 250 mg</i>	1	NM; **
IRESSA TAB 250MG	3	NM; **
TARCEVA TAB 25MG	3	NM; **
TARCEVA TAB 100MG	3	NM; **
TARCEVA TAB 150MG	3	NM; **
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO TAB 25MG	3	PA, NM; **
DAURISMO TAB 100MG	3	PA, NM; **
ERIVEDGE CAP 150MG	3	NM; **
ODOMZO CAP 200MG	3	NM; **

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Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	1	NM; **
<i>abiraterone acetate tab 500 mg</i>	1	NM; **
<i>anastrozole tab 1 mg</i>	1	**
ARIMIDEX TAB 1MG	3	**
AROMASIN TAB 25MG	3	**
<i>bicalutamide tab 50 mg</i>	1	NM; **
CASODEX TAB 50MG	3	NM; **
EMCYT CAP 140MG	2	NM; **
ERLEADA TAB 60MG	3	NM; **
<i>exemestane tab 25 mg</i>	2	**
FARESTON TAB 60MG	3	**
FEMARA TAB 2.5MG	3	**
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	1	NM
<i>letrozole tab 2.5 mg</i>	1	**
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	1	SP, QL (9 cycles per lifetime), NM
LYSODREN TAB 500MG	3	NM; **
<i>megestrol acetate susp 40 mg/ml</i>	2	NM; **
<i>megestrol acetate tab 20 mg</i>	2	NM; **
<i>megestrol acetate tab 40 mg</i>	2	NM; **
NILANDRON TAB 150MG	2	NM; **
<i>nilutamide tab 150 mg</i>	2	NM; **
NUBEQA TAB 300MG	3	NM; **
ORGOVYX TAB 120MG	3	NM; **
ORSERDU TAB 86MG	3	NM; **, LD
ORSERDU TAB 345MG	3	NM; **, LD
SOLTAMOX SOL 10MG/5ML	3	**
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	**
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	**
<i>toremifene citrate tab 60 mg (base equivalent)</i>	1	**
XTANDI CAP 40MG	3	NM; **
XTANDI TAB 40MG	3	NM; **
XTANDI TAB 80MG	3	NM; **
YONSA TAB 125MG	3	NM; **
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG TAB 40MG	3	NM; **
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	3	NM; **
POMALYST CAP 2MG	3	NM; **
POMALYST CAP 3MG	3	NM; **

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Drug Name	Drug Tier	Requirements/Limits
POMALYST CAP 4MG	3	NM; **
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 60MG	3	PA, NM; **
XPOVIO PAK 80MG	3	PA, NM; **
ANTINEOPLASTIC COMBINATIONS		
INQOVI TAB 35-100MG	3	NM; **
KISQALI 200 PAK FEMARA	2	NM; **
KISQALI 400 PAK FEMARA	2	NM; **
KISQALI 600 PAK FEMARA	2	NM; **
LONSURF TAB 15-6.14	3	NM; **
LONSURF TAB 20-8.19	3	NM; **
ANTINEOPLASTIC ENZYME INHIBITORS		
AFINITOR DIS TAB 2MG	3	NM; **
AFINITOR DIS TAB 3MG	3	NM; **
AFINITOR DIS TAB 5MG	3	NM; **
AFINITOR TAB 2.5MG	3	NM; **
AFINITOR TAB 5MG	3	NM; **
AFINITOR TAB 7.5MG	3	NM; **
AFINITOR TAB 10MG	3	NM; **
ALECENSA CAP 150MG	3	NM; **
ALUNBRIG PAK	3	NM; **
ALUNBRIG TAB 30MG	3	NM; **
ALUNBRIG TAB 90MG	3	NM; **
ALUNBRIG TAB 180MG	3	NM; **
AYVAKIT TAB 100MG	3	PA, NM; **
AYVAKIT TAB 200MG	3	PA, NM; **
AYVAKIT TAB 300MG	3	PA, NM; **
BALVERSA TAB 3MG	3	NM; **
BALVERSA TAB 4MG	3	NM; **
BALVERSA TAB 5MG	3	NM; **
BOSULIF CAP 50MG	3	NM; **
BOSULIF CAP 100MG	3	NM; **
BOSULIF TAB 100MG	3	NM; **
BOSULIF TAB 400MG	3	NM; **
BOSULIF TAB 500MG	3	NM; **
BRAFTOVI CAP 75MG	3	NM; **
BRUKINSA CAP 80MG	3	NM; **
CABOMETYX TAB 20MG	2	NM; **
CABOMETYX TAB 40MG	2	NM; **
CABOMETYX TAB 60MG	2	NM; **
CALQUENCE TAB 100MG	3	PA, NM; **

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Drug Name	Drug Tier	Requirements/Limits
CAPRELSA TAB 100MG	3	NM; **
CAPRELSA TAB 300MG	3	NM; **
COMETRIQ KIT 100MG	3	PA, NM; **
COMETRIQ KIT 140MG	3	PA, NM; **
COPIKTRA CAP 15MG	3	NM; **
COPIKTRA CAP 25MG	3	NM; **
COTELLIC TAB 20MG	3	NM; **
<i>everolimus tab 2.5 mg</i>	1	NM; **
<i>everolimus tab 5 mg</i>	1	NM; **
<i>everolimus tab 7.5 mg</i>	1	NM; **
<i>everolimus tab 10 mg</i>	1	NM; **
<i>everolimus tab for oral susp 2 mg</i>	1	NM; **
<i>everolimus tab for oral susp 3 mg</i>	1	NM; **
<i>everolimus tab for oral susp 5 mg</i>	1	NM; **
FOTIVDA CAP 0.89MG	3	NM; **
FOTIVDA CAP 1.34MG	3	NM; **
GAVRETO CAP 100MG	3	NM; **
GILOTRIF TAB 20MG	3	NM; **
GILOTRIF TAB 30MG	3	NM; **
GILOTRIF TAB 40MG	3	NM; **
GLEEVEC TAB 100MG	3	NM; **
GLEEVEC TAB 400MG	3	NM; **
IBRANCE CAP 75MG	2	NM; **
IBRANCE CAP 100MG	2	NM; **
IBRANCE CAP 125MG	2	NM; **
IBRANCE TAB 125MG	2	NM; **
ICLUSIG TAB 15MG	3	NM; **
ICLUSIG TAB 45MG	3	NM; **
IDHIFA TAB 50MG	3	NM; **
IDHIFA TAB 100MG	3	NM; **
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	2	NM; **
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	2	NM; **
IMBRUVICA CAP 70MG	3	NM; **
IMBRUVICA CAP 140MG	3	NM; **
IMBRUVICA SUS 70MG/ML	3	NM; **
IMBRUVICA TAB 140MG	3	NM; **
IMBRUVICA TAB 280MG	3	NM; **
IMBRUVICA TAB 420MG	3	NM; **
IMBRUVICA TAB 560MG	3	NM; **
INLYTA TAB 1MG	3	NM; **
INLYTA TAB 5MG	3	NM; **
INREBIC CAP 100MG	3	PA, NM; **

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Drug Name	Drug Tier	Requirements/Limits
JAKAFI TAB 5MG	3	PA, NM; **
JAKAFI TAB 10MG	3	PA, NM; **
JAKAFI TAB 15MG	3	PA, NM; **
JAKAFI TAB 20MG	3	PA, NM; **
JAKAFI TAB 25MG	3	PA, NM; **
JAYPIRCA TAB 50MG	3	NM; **
JAYPIRCA TAB 100MG	3	NM; **
KISQALI TAB 200DOSE	2	NM; **
KISQALI TAB 400DOSE	2	NM; **
KISQALI TAB 600DOSE	2	NM; **
KOSELUGO CAP 10MG	3	PA, NM
KOSELUGO CAP 25MG	3	PA, NM
KRAZATI TAB 200MG	3	NM
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	2	NM; **
LENVIMA CAP 4MG	3	NM; **
LENVIMA CAP 10 MG	3	NM; **
LENVIMA CAP 12MG	3	NM; **
LENVIMA CAP 14 MG	3	NM; **
LENVIMA CAP 18 MG	3	NM; **
LENVIMA CAP 20 MG	3	NM; **
LENVIMA CAP 24 MG	3	NM; **
LORBRENA TAB 25MG	3	NM; **
LORBRENA TAB 100MG	3	NM; **
LUMAKRAS TAB 120MG	3	NM; **
LUMAKRAS TAB 320MG	3	NM; **
LYNPARZA TAB 100MG	3	NM; **
LYNPARZA TAB 150MG	3	NM; **
LYTGOBI TAB 4MG	3	NM; **
MEKINIST SOL 0.05/ML	3	NM; **
MEKINIST TAB 0.5MG	3	NM; **
MEKINIST TAB 2MG	3	NM; **
MEKTOVI TAB 15MG	3	NM; **
NERLYNX TAB 40MG	3	NM; **
NEXAVAR TAB 200MG	3	NM; **
NINLARO CAP 2.3MG	3	NM; **
NINLARO CAP 3MG	3	NM; **
NINLARO CAP 4MG	3	NM; **
<i>pazopanib hcl tab 200 mg (base equiv)</i>	1	NM; **
PEMAZYRE TAB 4.5MG	3	PA, NM; **
PEMAZYRE TAB 9MG	3	PA, NM; **
PEMAZYRE TAB 13.5MG	3	PA, NM; **
PIQRAY 200MG TAB DOSE	3	NM; **

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Drug Name	Drug Tier	Requirements/Limits
PIQRAY 250MG TAB DOSE	3	NM; **
PIQRAY 300MG TAB DOSE	3	NM; **
QINLOCK TAB 50MG	3	NM; **
RETEVMO CAP 40MG	3	PA, NM; **
RETEVMO CAP 80MG	3	PA, NM; **
REZLIDHIA CAP 150MG	3	NM; **
ROZLYTREK CAP 100MG	3	PA, NM; **
ROZLYTREK CAP 200MG	3	PA, NM; **
ROZLYTREK PAK 50MG	3	NM; **
RUBRACA TAB 200MG	3	NM; **
RUBRACA TAB 250MG	3	NM; **
RUBRACA TAB 300MG	3	NM; **
RYDAPT CAP 25MG	3	NM; **
SCSEMBLIX TAB 20MG	3	NM; **
SCSEMBLIX TAB 40MG	3	NM; **
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	1	NM; **
SPRYCEL TAB 20MG	3	NM; **
SPRYCEL TAB 50MG	3	NM; **
SPRYCEL TAB 70MG	3	NM; **
SPRYCEL TAB 80MG	3	NM; **
SPRYCEL TAB 100MG	3	NM; **
SPRYCEL TAB 140MG	3	NM; **
STIVARGA TAB 40MG	3	NM; **
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	1	NM; **
<i>sunitinib malate cap 25 mg (base equivalent)</i>	1	NM; **
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	1	NM; **
<i>sunitinib malate cap 50 mg (base equivalent)</i>	1	NM; **
SUTENT CAP 12.5MG	3	NM; **
SUTENT CAP 25MG	3	NM; **
SUTENT CAP 37.5MG	3	NM; **
SUTENT CAP 50MG	3	NM; **
TABRECTA TAB 150MG	3	PA, NM; **
TABRECTA TAB 200MG	3	PA, NM; **
TAFINLAR CAP 50MG	3	NM; **
TAFINLAR CAP 75MG	3	NM; **
TAFINLAR TAB 10MG	3	NM; **
TAGRISSE TAB 40MG	3	NM; **
TAGRISSE TAB 80MG	3	NM; **
TALZENNA CAP 0.1MG	3	NM; **
TALZENNA CAP 0.5MG	3	NM; **
TALZENNA CAP 0.25MG	3	NM; **
TALZENNA CAP 0.35MG	3	NM; **

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Drug Name	Drug Tier	Requirements/Limits
TALZENNA CAP 0.75MG	3	NM; **
TALZENNA CAP 1MG	3	NM; **
TASIGNA CAP 50MG	3	NM; **
TASIGNA CAP 150MG	3	NM; **
TASIGNA CAP 200MG	3	NM; **
TAZVERIK TAB 200MG	3	PA, NM; **
TEPMETKO TAB 225MG	3	NM; **
TIBSOVO TAB 250MG	3	PA, NM; **
TUKYSA TAB 50MG	3	NM; **
TUKYSA TAB 150MG	3	NM; **
TURALIO CAP 125MG	3	PA, NM; **
TYKERB TAB 250MG	3	NM; **
VERZENIO TAB 50MG	3	NM; **
VERZENIO TAB 100MG	3	NM; **
VERZENIO TAB 150MG	3	NM; **
VERZENIO TAB 200MG	3	NM; **
VITRAKVI CAP 25MG	3	PA, NM; **
VITRAKVI CAP 100MG	3	PA, NM; **
VITRAKVI SOL 20MG/ML	3	PA, NM; **
VIZIMPRO TAB 15MG	3	PA, NM; **
VIZIMPRO TAB 30MG	3	PA, NM; **
VIZIMPRO TAB 45MG	3	PA, NM; **
VONJO CAP 100MG	3	PA, NM; **
VOTRIENT TAB 200MG	3	NM; **
XALKORI CAP 20MG	3	NM; **
XALKORI CAP 50MG	3	NM; **
XALKORI CAP 150MG	3	NM; **
XALKORI CAP 200MG	3	NM; **
XALKORI CAP 250MG	3	NM; **
XOSPATA TAB 40MG	3	PA, NM; **
ZEJULA CAP 100MG	3	NM; **
ZEJULA TAB 100MG	3	NM; **
ZEJULA TAB 200MG	3	NM; **
ZEJULA TAB 300MG	3	NM; **
ZELBORAF TAB 240MG	3	NM; **
ZOLINZA CAP 100MG	3	PA, NM; **
ZYDELIG TAB 100MG	3	NM; **
ZYDELIG TAB 150MG	3	NM; **
ZYKADIA TAB 150MG	3	NM; **
ANTINEOPLASTIC ENZYMES		
ONCASPAR INJ 750/ML	3	SP, NM

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Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTICS MISC.		
ACTIMMUNE INJ 2MU/0.5	3	SP
BESREMI SOL 500MCG	3	
<i>bexarotene cap 75 mg</i>	2	NM; **
HYDREA CAP 500MG	3	NM; **
<i>hydroxyurea cap 500 mg</i>	1	NM; **
MATULANE CAP 50MG	3	SP, NM; LD
TARGRETIN CAP 75MG	3	NM; **
<i>tretinoin cap 10 mg</i>	2	NM; **
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
<i>leucovorin calcium inj 100 mg/10ml (10 mg/ml)</i>	1	NM
<i>leucovorin calcium tab 5 mg</i>	1	NM; **
<i>leucovorin calcium tab 10 mg</i>	1	NM; **
<i>leucovorin calcium tab 15 mg</i>	1	NM; **
<i>leucovorin calcium tab 25 mg</i>	1	NM; **
MESNEX TAB 400MG	2	NM; **
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	1	NM
MITOTIC INHIBITORS		
<i>etoposide cap 50 mg</i>	2	NM; **
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP 0.25MG	3	NM; **
HYCAMTIN CAP 1MG	3	NM; **
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
NOURIANZ TAB 20MG	3	
NOURIANZ TAB 40MG	3	
ANTIPARKINSON ADJUVANTS		
<i>carbidopa tab 25 mg</i>	1	
LODOSYN TAB 25MG	3	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
ANTIPARKINSON COMT INHIBITORS		
COMTAN TAB 200MG	3	
<i>entacapone tab 200 mg</i>	1	
ONGENTYS CAP 25MG	3	

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Drug Name	Drug Tier	Requirements/Limits
ONGENTYS CAP 50MG	3	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	3	SP, PA, NM
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	1	PA, NM
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 10-100 MG	1	
CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-100 MG	1	
CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-250 MG	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
DUOPA SUS 4.63-20	3	
INBRIJA CAP 42MG	3	SP; LD
MIRAPEX ER TAB 0.75MG	3	
MIRAPEX ER TAB 0.375MG	3	
MIRAPEX ER TAB 1.5MG	3	
MIRAPEX ER TAB 2.25MG	3	
MIRAPEX ER TAB 3.75MG	3	
MIRAPEX ER TAB 3MG	3	

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Drug Name	Drug Tier	Requirements/Limits
MIRAPEX ER TAB 4.5MG	3	
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	
PARLODEL TAB 2.5MG	3	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
RYTARY CAP 95MG	3	
RYTARY CAP 145MG	3	
RYTARY CAP 195MG	3	
RYTARY CAP 245MG	3	

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Drug Name	Drug Tier	Requirements/Limits
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
STALEVO 50 TAB	3	
STALEVO 75 TAB	3	
STALEVO 100 TAB	3	
STALEVO 125 TAB	3	
STALEVO 150 TAB	3	
STALEVO 200 TAB	3	

ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS

AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
XADAGO TAB 50MG	3	
XADAGO TAB 100MG	3	
ZELAPAR TAB 1.25MG	3	

ANTIPSYCHOTICS/ANTIMANIC AGENTS

ANTIMANIC AGENTS

<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
<i>lithium oral solution 8 meq/5ml</i>	1	
LITHOBID TAB 300MG CR	3	

ANTIPSYCHOTICS - MISC.

CAPLYTA CAP 10.5MG	3	
CAPLYTA CAP 21MG	3	
CAPLYTA CAP 42MG	3	
EQUETRO CAP 100MG	3	
EQUETRO CAP 200MG	3	
EQUETRO CAP 300MG	3	
LATUDA TAB 20MG	3	
LATUDA TAB 40MG	3	
LATUDA TAB 60MG	3	
LATUDA TAB 80MG	3	
LATUDA TAB 120MG	3	
<i>lurasidone hcl tab 20 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>lurasidone hcl tab 40 mg</i>	1	
<i>lurasidone hcl tab 60 mg</i>	1	
<i>lurasidone hcl tab 80 mg</i>	1	
<i>lurasidone hcl tab 120 mg</i>	1	
NUPLAZID CAP 34MG	3	SP, PA
NUPLAZID TAB 10MG	3	SP, PA
VRAYLAR CAP 1.5-3MG	2	NM
VRAYLAR CAP 1.5MG	2	
VRAYLAR CAP 3MG	2	
VRAYLAR CAP 4.5MG	2	
VRAYLAR CAP 6MG	2	
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	
BENZISOXAZOLES		
INVEGA TAB 1.5MG	3	
INVEGA TAB 3MG	3	
INVEGA TAB 6MG	3	
INVEGA TAB 9MG	3	
<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	
RISPERDAL SOL 1MG/ML	3	
RISPERDAL TAB 0.5MG	3	
RISPERDAL TAB 1MG	3	
RISPERDAL TAB 2MG	3	
RISPERDAL TAB 3MG	3	
RISPERDAL TAB 4MG	3	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>risperidone tab 4 mg</i>	1	
BUTYROPHENONES		
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	NM
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	NM
<i>haloperidol lactate inj 5 mg/ml</i>	1	NM
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
DIBENZAPINES		
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	NM
<i>clozapine orally disintegrating tab 25 mg</i>	1	NM
<i>clozapine orally disintegrating tab 100 mg</i>	1	NM
<i>clozapine orally disintegrating tab 150 mg</i>	1	NM
<i>clozapine orally disintegrating tab 200 mg</i>	1	NM
<i>clozapine tab 25 mg</i>	1	NM
<i>clozapine tab 50 mg</i>	1	NM
<i>clozapine tab 100 mg</i>	1	NM
<i>clozapine tab 200 mg</i>	1	NM
CLOZARIL TAB 25MG	3	NM
CLOZARIL TAB 100MG	3	NM
<i>loxapine succinate cap 5 mg</i>	1	
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
<i>olanzapine for im inj 10 mg</i>	1	NM
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab 100 mg</i>	1	
<i>quetiapine fumarate tab 150 mg</i>	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
SAPHRIS SUB 2.5MG	3	
SAPHRIS SUB 5MG	3	
SAPHRIS SUB 10MG	3	
SEROQUEL TAB 25MG	3	
SEROQUEL TAB 50MG	3	
SEROQUEL TAB 100MG	3	
SEROQUEL TAB 200MG	3	
SEROQUEL TAB 300MG	3	
SEROQUEL TAB 400MG	3	
SEROQUEL XR TAB 50MG	3	
SEROQUEL XR TAB 150MG	3	
SEROQUEL XR TAB 200MG	3	
SEROQUEL XR TAB 300MG	3	
SEROQUEL XR TAB 400MG	3	
VERSACLOZ SUS 50MG/ML	3	NM
ZYPREXA INJ 10MG	3	NM
ZYPREXA TAB 2.5MG	3	
ZYPREXA TAB 5MG	3	
ZYPREXA TAB 7.5MG	3	
ZYPREXA TAB 10MG	3	
ZYPREXA TAB 15MG	3	
ZYPREXA TAB 20MG	3	
ZYPREXA ZYDI TAB 5MG	3	
ZYPREXA ZYDI TAB 10MG	3	
ZYPREXA ZYDI TAB 15MG	3	
ZYPREXA ZYDI TAB 20MG	3	
PHENOTHIAZINES		
<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>compro</i>	1	NM
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
<i>fluphenazine hcl tab 2.5 mg</i>	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	
<i>perphenazine tab 16 mg</i>	1	
<i>prochlorperazine 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	NM
<i>thioridazine hcl tab 10 mg</i>	1	
<i>thioridazine hcl tab 25 mg</i>	1	
<i>thioridazine hcl tab 50 mg</i>	1	
<i>thioridazine hcl tab 100 mg</i>	1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	

QUINOLINONE DERIVATIVES

ABILIFY TAB 2MG	3	
ABILIFY TAB 5MG	3	
ABILIFY TAB 10MG	3	
ABILIFY TAB 15MG	3	
ABILIFY TAB 20MG	3	
ABILIFY TAB 30MG	3	
<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	
REXULTI TAB 0.5MG	3	
REXULTI TAB 0.25MG	3	
REXULTI TAB 1MG	3	
REXULTI TAB 2MG	3	

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Drug Name	Drug Tier	Requirements/Limits
REXULTI TAB 3MG	3	
REXULTI TAB 4MG	3	
THIOXANTHENES		
<i>thiothixene cap 1 mg</i>	1	
<i>thiothixene cap 2 mg</i>	1	
<i>thiothixene cap 5 mg</i>	1	
<i>thiothixene cap 10 mg</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	
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	
BIKTARVY TAB	2	
CIMDUO TAB 300-300	2	
COMBIVIR TAB 150-300	3	
COMPLERA TAB	3	
<i>darunavir tab 600 mg</i>	1	
<i>darunavir tab 800 mg</i>	1	
DELSTRIGO TAB	3	
DESCOVY TAB 120-15MG	2	
DESCOVY TAB 200/25MG	2	
DOVATO TAB 50-300MG	2	
EDURANT TAB 25MG	2	
<i>efavirenz cap 50 mg</i>	1	
<i>efavirenz cap 200 mg</i>	1	
<i>efavirenz tab 600 mg</i>	1	
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	
<i>emtricitabine caps 200 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	
EMTRIVA CAP 200MG	2	
EMTRIVA SOL 10MG/ML	2	
EPIVIR SOL 10MG/ML	3	
EPIVIR TAB 150MG	3	
EPIVIR TAB 300MG	3	
EPZICOM TAB 600-300	2	
<i>etravirine tab 100 mg</i>	1	
<i>etravirine tab 200 mg</i>	1	
EVOTAZ TAB 300-150	3	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	
FUZEON INJ 90MG	2	
GENVOYA TAB	2	
INTELENCE TAB 25MG	3	
INTELENCE TAB 100MG	3	
INTELENCE TAB 200MG	3	
ISENTRESS CHW 25MG	2	
ISENTRESS CHW 100MG	2	
ISENTRESS HD TAB 600MG	2	
ISENTRESS POW 100MG	2	
ISENTRESS TAB 400MG	2	
JULUCA TAB 50-25MG	3	
KALETRA SOL	3	
KALETRA TAB 100-25MG	3	
KALETRA TAB 200-50MG	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>lamivudine-zidovudine tab 150-300 mg</i>	1	
LEXIVA TAB 700MG	3	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	
<i>maraviroc tab 150 mg</i>	1	
<i>maraviroc tab 300 mg</i>	1	
NEVIRAPINE SUSP 50 MG/5ML	1	
<i>nevirapine tab 200 mg</i>	1	
<i>nevirapine tab er 24hr 100 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>nevirapine tab er 24hr 400 mg</i>	1	
NORVIR POW 100MG	2	
NORVIR TAB 100MG	2	
ODEFSEY TAB	2	
PIFELTRO TAB 100MG	3	
PREZCOBIX TAB 800-150	3	
PREZISTA SUS 100MG/ML	2	
PREZISTA TAB 75MG	2	
PREZISTA TAB 150MG	2	
PREZISTA TAB 600MG	3	
PREZISTA TAB 800MG	3	
RETROVIR CAP 100MG	3	
RETROVIR SYP 50MG/5ML	3	
REYATAZ CAP 200MG	3	
REYATAZ CAP 300MG	3	
REYATAZ POW 50MG	3	
<i>ritonavir tab 100 mg</i>	1	
RUKOBIA TAB 600MG ER	3	
SELZENTRY SOL 20MG/ML	2	
SELZENTRY TAB 25MG	2	
SELZENTRY TAB 75MG	2	
SELZENTRY TAB 150MG	2	
SELZENTRY TAB 300MG	2	
<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	
STRIBILD TAB	2	
SUNLENCA TAB 300MG	3	NM
SYMFI LO TAB	3	
SYMFI TAB	3	
SYMTUZA TAB	2	
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	SP
TIVICAY PD TAB 5MG	3	
TIVICAY TAB 10MG	3	
TIVICAY TAB 25MG	3	
TIVICAY TAB 50MG	3	
TRIUMEQ PD TAB	2	
TRIUMEQ TAB	2	
TRIZIVIR TAB	3	
TYBOST TAB 150MG	3	
VIRACEPT TAB 250MG	2	

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Drug Name	Drug Tier	Requirements/Limits
VIRACEPT TAB 625MG	2	
VIREAD POW 40MG/GM	2	SP
VIREAD TAB 150MG	2	SP
VIREAD TAB 200MG	2	SP
VIREAD TAB 250MG	2	SP
VIREAD TAB 300MG	2	SP
ZIAGEN SOL 20MG/ML	3	
ZIAGEN TAB 300MG	3	
<i>zidovudine cap 100 mg</i>	1	
<i>zidovudine syrup 10 mg/ml</i>	1	
<i>zidovudine tab 300 mg</i>	1	
ANTIVIRAL COMBINATIONS		
PAXLOVID TAB 150-100	3	QL (40 tablets per 30 days), NM
PAXLOVID TAB 300-100	3	QL (60 tablets per 30 days), NM
CMV AGENTS		
LIVTENCITY TAB 200MG	3	
PREVYMIS TAB 240MG	3	
PREVYMIS TAB 480MG	3	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	1	SP
BARACLUDE SOL	3	SP
BARACLUDE TAB 0.5MG	3	SP
BARACLUDE TAB 1MG	3	SP
<i>entecavir tab 0.5 mg</i>	1	SP
<i>entecavir tab 1 mg</i>	1	SP
EPCLUSA PAK 150-37.5	2	SP, PA, NM
EPCLUSA PAK 200-50MG	2	SP, PA, NM
EPCLUSA TAB 400-100	2	SP, PA, NM
HARVONI PAK	2	SP, PA, NM
HARVONI PAK 45-200MG	2	SP, PA, NM
HARVONI TAB 90-400MG	2	SP, PA, NM
<i>lamivudine tab 100 mg (hbv)</i>	1	SP
MAVYRET PAK 50-20MG	2	SP, PA, NM
MAVYRET TAB 100-40MG	2	SP, PA, NM
PEGASYS INJ	2	SP, PA, NM
PEGASYS INJ 180MCG/M	2	SP, PA, NM
<i>ribavirin cap 200 mg</i>	1	SP, PA, NM

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Drug Name	Drug Tier	Requirements/Limits
SOVALDI PAK 150MG	3	SP, PA, NM
SOVALDI PAK 200MG	3	SP, PA, NM
SOVALDI TAB 400MG	3	SP, PA, NM
VEMLIDY TAB 25MG	3	SP
VOSEVI TAB	2	SP, PA, NM

HERPES AGENTS

<i>acyclovir cap 200 mg</i>	1	NM
<i>acyclovir susp 200 mg/5ml</i>	1	NM
<i>acyclovir tab 400 mg</i>	1	NM
<i>acyclovir tab 800 mg</i>	1	NM
<i>famciclovir tab 125 mg</i>	1	NM
<i>famciclovir tab 250 mg</i>	1	NM
<i>famciclovir tab 500 mg</i>	1	NM
<i>valacyclovir hcl tab 1 gm</i>	1	NM
<i>valacyclovir hcl tab 500 mg</i>	1	NM
VALTREX TAB 1GM	3	NM
VALTREX TAB 500MG	3	NM

INFLUENZA AGENTS

<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	QL (21 caps every 180 days), NM
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	QL (21 caps every 180 days), NM
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	QL (21 caps every 180 days), NM
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	QL (180 mL every 180 days), NM
RELENZA MIS DISKHALE	3	QL (1 inhaler every 180 days), NM
<i>rimantadine hydrochloride tab 100 mg</i>	1	NM
TAMIFLU CAP 30MG	3	QL (21 caps every 180 days), NM
TAMIFLU CAP 45MG	3	QL (21 caps every 180 days), NM
TAMIFLU CAP 75MG	3	QL (21 caps every 180 days), NM
TAMIFLU SUS 6MG/ML	3	QL (180 mL every 180 days), NM
XOFLUZA TAB 20MG	3	QL (2 tabs every 180 days), NM
XOFLUZA TAB 40MG	3	QL (2 per 180 days), NM
XOFLUZA TAB 80MG	3	QL (2 per 180 days), NM

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Drug Name	Drug Tier	Requirements/Limits
MISC. ANTIVIRALS		
TEMBEXA SUS 10MG/ML	3	NM
TEMBEXA TAB 100MG	3	NM
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol phosphate cap er 24hr 10 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	1	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
COREG CR CAP 10MG	3	
COREG CR CAP 20MG	3	
COREG CR CAP 40MG	3	
COREG CR CAP 80MG	3	
<i>labetalol hcl tab 100 mg</i>	1	
<i>labetalol hcl tab 300 mg</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>betaxolol hcl tab 10 mg</i>	1	
<i>betaxolol hcl tab 20 mg</i>	1	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	
BYSTOLIC TAB 2.5MG	3	
BYSTOLIC TAB 5MG	3	
BYSTOLIC TAB 10MG	3	
BYSTOLIC TAB 20MG	3	
LOPRESSOR TAB 50MG	3	
LOPRESSOR TAB 100MG	3	
<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	

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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 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	
TOPROL XL TAB 25MG	3	
TOPROL XL TAB 50MG	3	
TOPROL XL TAB 100MG	3	
TOPROL XL TAB 200MG	3	
BETA BLOCKERS NON-SELECTIVE		
BETAPACE AF TAB 80MG	3	
BETAPACE AF TAB 120MG	3	
BETAPACE AF TAB 160MG	3	
BETAPACE TAB 80MG	3	
BETAPACE TAB 120MG	3	
BETAPACE TAB 160MG	3	
CORGARD TAB 20MG	3	
CORGARD TAB 40MG	3	
HEMANGEOL SOL 4.28/ML	3	
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>sotalol hcl (afib/afI) tab 80 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl (afib/afI) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afI) 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	
SOTYLIZE SOL 5MG/ML	3	
<i>timolol maleate tab 5 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
TIMOLOL MALEATE TAB 20 MG	2	

CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
CARDIZEM CD CAP 120MG/24	3	
CARDIZEM CD CAP 180MG/24	3	
CARDIZEM CD CAP 240MG/24	3	
CARDIZEM CD CAP 300MG/24	3	
CARDIZEM LA TAB 120MG	3	
CARDIZEM LA TAB 180MG	3	
CARDIZEM LA TAB 240MG	3	
CARDIZEM LA TAB 300MG/24	3	
CARDIZEM LA TAB 360MG	3	
CARDIZEM LA TAB 420MG/24	3	
<i>cartia xt</i>	1	
<i>dilt-xr</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 coated beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl tab 120 mg</i>	1	
<i>diltiazem hcl tab er 24hr 120 mg</i>	1	
<i>diltiazem hcl tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl tab er 24hr 360 mg</i>	1	
<i>diltiazem hcl tab er 24hr 420 mg</i>	1	
<i>felodipine tab er 24hr 2.5 mg</i>	1	
<i>felodipine tab er 24hr 5 mg</i>	1	
<i>felodipine tab er 24hr 10 mg</i>	1	
<i>isradipine cap 2.5 mg</i>	1	
<i>isradipine cap 5 mg</i>	1	
KATERZIA SUS 1MG/ML	3	
<i>matzim la</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	NM
<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	
NORLIQVA SOL 1MG/ML	3	
NORVASC TAB 2.5MG	3	
NORVASC TAB 5MG	3	

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Drug Name	Drug Tier	Requirements/Limits
NORVASC TAB 10MG	3	
PROCARDIA XL TAB 30MG CR	3	
PROCARDIA XL TAB 60MG CR	3	
PROCARDIA XL TAB 90MG CR	3	
SULAR TAB 8.5MG ER	3	
SULAR TAB 17MG ER	3	
SULAR TAB 34MG ER	3	
<i>taztia xt</i>	1	
<i>taztia xt cap 300mg er</i>	1	
<i>tiadytl cap 180mg/24</i>	1	
<i>tiadytl cap 240mg/24</i>	1	
<i>tiadytl er</i>	1	
TIAZAC CAP 120MG/24	3	
TIAZAC CAP 180MG/24	3	
TIAZAC CAP 240MG/24	3	
TIAZAC CAP 300MG/24	3	
TIAZAC CAP 360MG/24	3	
TIAZAC CAP 420MG/24	3	
<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	
VERELAN CAP 120MG SR	3	
VERELAN CAP 180MG SR	3	
VERELAN CAP 240MG SR	3	
VERELAN CAP 360MG SR	3	
VERELAN PM CAP 100MG ER	3	
VERELAN PM CAP 200MG ER	3	
VERELAN PM CAP 300MG ER	3	

CARDIOTONICS

CARDIAC GLYCOSIDES

<i>digox tab 0.25mg</i>	1	
<i>digox tab 0.125mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<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	

CARDIOVASCULAR AGENTS - MISC.

CARDIAC MYOSIN INHIBITORS

CAMZYOS CAP 2.5MG	3	SP, PA, QL (30 caps per 30 days)
CAMZYOS CAP 5MG	3	SP, PA, QL (30 caps per 30 days)
CAMZYOS CAP 10MG	3	SP, PA, QL (30 caps per 30 days)
CAMZYOS CAP 15MG	3	SP, PA, QL (30 caps per 30 days)

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
BIDIL TAB	3	
CADUET TAB 5-10MG	3	
CADUET TAB 5-20MG	3	
CADUET TAB 5-40MG	3	
CADUET TAB 5-80MG	3	
CADUET TAB 10-10MG	3	

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Drug Name	Drug Tier	Requirements/Limits
CADUET TAB 10-20MG	3	
CADUET TAB 10-40MG	3	
CADUET TAB 10-80MG	3	
ENTRESTO TAB 24-26MG	3	
ENTRESTO TAB 49-51MG	3	
ENTRESTO TAB 97-103MG	3	
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	1	

IMPOTENCE AGENTS

CAVERJECT IM KIT 10MCG	3	QL (6 each every 30 days), NM
CAVERJECT INJ 40MCG	3	QL (6 vials every 30 days), NM
CAVERJECT KIT 20MCG	3	QL (6 kits every 30 days), NM
EDEX KIT 10MCG	3	QL (6 each every 30 days), NM
EDEX KIT 20MCG	3	QL (6 kits every 30 days), NM
EDEX KIT 40MCG	3	QL (6 kits every 30 days), NM
MUSE SUP 250MCG	3	QL (6 sup every 30 days), NM
MUSE SUP 500MCG	3	QL (6 sup every 30 days), NM
MUSE SUP 1000MCG	3	QL (6 sup every 30 days), NM
<i>sildenafil citrate tab 25 mg</i>	1	QL (4 tabs every 30 days), NM
<i>sildenafil citrate tab 50 mg</i>	1	QL (4 tabs every 30 days), NM
<i>sildenafil citrate tab 100 mg</i>	1	QL (4 tabs every 30 days), NM
<i>tadalafil tab 10 mg</i>	1	QL (4 tabs every 30 days), NM
<i>tadalafil tab 20 mg</i>	1	QL (4 tabs every 30 days), NM
<i>ildenafil hcl orally disintegrating tab 10 mg</i>	1	QL (4 tabs every 30 days), NM
<i>ildenafil hcl tab 2.5 mg</i>	1	QL (4 tabs every 30 days), NM
<i>ildenafil hcl tab 5 mg</i>	1	QL (4 tabs every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>vardenafil hcl tab 10 mg</i>	1	QL (4 tabs every 30 days), NM
<i>vardenafil hcl tab 20 mg</i>	1	QL (4 tabs every 30 days), NM

PROSTAGLANDIN VASODILATORS

ORENITRAM TAB 0.25MG	3	SP, PA
ORENITRAM TAB 0.125MG	3	SP, PA
ORENITRAM TAB 1MG	3	SP, PA
ORENITRAM TAB 2.5MG	3	SP, PA
ORENITRAM TAB 5MG	3	SP, PA
ORENITRAM TAB MONTH 1	3	SP, PA
ORENITRAM TAB MONTH 2	3	SP, PA
ORENITRAM TAB MONTH 3	3	SP, PA
TYVASO DPI POW 16-32-48	3	SP, PA, NM
TYVASO DPI POW 16-32MCG	3	SP, PA, NM
TYVASO DPI POW 16MCG	3	SP, PA
TYVASO DPI POW 32-48MCG	3	SP, PA
TYVASO DPI POW 32MCG	3	SP, PA
TYVASO DPI POW 48MCG	3	SP, PA
TYVASO DPI POW 64MCG	3	SP, PA
TYVASO START SOL 0.6MG/ML	3	SP, PA
VENTAVIS SOL 10MCG/ML	3	SP, PA
VENTAVIS SOL 20MCG/ML	3	SP, PA

PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg</i>	1	SP, PA
<i>ambrisentan tab 10 mg</i>	1	SP, PA
LETAIRIS TAB 5MG	3	SP, PA
LETAIRIS TAB 10MG	3	SP, PA
OPSUMIT TAB 10MG	3	SP, PA
TRACLEER TAB 32MG	3	SP, PA
TRACLEER TAB 62.5MG	3	SP, PA
TRACLEER TAB 125MG	3	SP, PA

PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS

ADCIRCA TAB 20MG	3	SP, PA
<i>alyq</i>	1	SP, PA
LIQREV SUS 10MG/ML	3	SP, PA
REVATIO SUS 10MG/ML	3	SP, PA
REVATIO TAB 20MG	3	SP, PA
<i>sildenafil citrate tab 20 mg</i>	1	SP, PA
<i>tadalafil tab 20 mg (pah)</i>	1	SP, PA
TADLIQ SUS 20MG/5ML	3	PA

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Drug Name	Drug Tier	Requirements/Limits
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PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI PACK TAB 200/800	3	SP, PA, NM
UPTRAVI TAB 200MCG	3	SP, PA
UPTRAVI TAB 400MCG	3	SP, PA
UPTRAVI TAB 600MCG	3	SP, PA
UPTRAVI TAB 800MCG	3	SP, PA
UPTRAVI TAB 1000MCG	3	SP, PA
UPTRAVI TAB 1200MCG	3	SP, PA
UPTRAVI TAB 1400MCG	3	SP, PA
UPTRAVI TAB 1600MCG	3	SP, PA

PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR

ADEMPAS TAB 0.5MG	3	SP, PA
ADEMPAS TAB 1.5MG	3	SP, PA
ADEMPAS TAB 1MG	3	SP, PA
ADEMPAS TAB 2.5MG	3	SP, PA
ADEMPAS TAB 2MG	3	SP, PA

SINUS NODE INHIBITORS

CORLANOR TAB 5MG	3	
CORLANOR TAB 7.5MG	3	

TRANSTHYRETIN STABILIZERS

VYNDAMAX CAP 61MG	3	SP, PA
VYNDAQEL CAP 20MG	3	SP, PA

VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)

VERQUVO TAB 2.5MG	3	
VERQUVO TAB 5MG	3	
VERQUVO TAB 10MG	3	

CEPHALOSPORINS

CEPHALOSPORINS - 1ST GENERATION

<i>cefadroxil cap 500 mg</i>	1	NM
<i>cefadroxil for susp 250 mg/5ml</i>	1	NM
<i>cefadroxil for susp 500 mg/5ml</i>	1	NM
<i>cefadroxil tab 1 gm</i>	1	NM
<i>cefazolin sodium for inj 1 gm</i>	1	NM
<i>cefazolin sodium for inj 2 gm</i>	1	NM
<i>cefazolin sodium for inj 3 gm</i>	1	NM
<i>cefazolin sodium for inj 10 gm</i>	1	NM
<i>cefazolin sodium for inj 500 mg</i>	1	NM
<i>cephalexin cap 250 mg</i>	1	NM
<i>cephalexin cap 500 mg</i>	1	NM
<i>cephalexin cap 750 mg</i>	1	NM
<i>cephalexin for susp 125 mg/5ml</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>cephalexin for susp 250 mg/5ml</i>	1	NM
CEPHALOSPORINS - 2ND GENERATION		
<i>cefaclor cap 250 mg</i>	1	NM
<i>cefaclor cap 500 mg</i>	1	NM
CEFACLOR ER TAB 500MG	2	NM
<i>cefaclor for susp 125 mg/5ml</i>	1	NM
<i>cefaclor for susp 250 mg/5ml</i>	1	NM
<i>cefaclor for susp 375 mg/5ml</i>	1	NM
<i>cefprozil for susp 125 mg/5ml</i>	1	NM
<i>cefprozil for susp 250 mg/5ml</i>	1	NM
<i>cefprozil tab 250 mg</i>	1	NM
<i>cefprozil tab 500 mg</i>	1	NM
<i>cefuroxime axetil tab 250 mg</i>	1	NM
<i>cefuroxime axetil tab 500 mg</i>	1	NM
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir cap 300 mg</i>	1	NM
<i>cefdinir for susp 125 mg/5ml</i>	1	NM
<i>cefdinir for susp 250 mg/5ml</i>	1	NM
<i>cefixime for susp 100 mg/5ml</i>	1	NM
<i>cefixime for susp 200 mg/5ml</i>	1	NM
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	NM
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	1	NM
<i>cefpodoxime proxetil tab 100 mg</i>	1	NM
<i>cefpodoxime proxetil tab 200 mg</i>	1	NM
<i>ceftazidime for inj 6 gm</i>	1	NM
<i>ceftriaxone sodium for inj 1 gm</i>	1	PA, NM
<i>ceftriaxone sodium for inj 2 gm</i>	1	PA, NM
<i>ceftriaxone sodium for inj 10 gm</i>	1	PA, NM
<i>ceftriaxone sodium for inj 250 mg</i>	1	QL (4 vials every 23 days), NM
<i>ceftriaxone sodium for inj 500 mg</i>	1	QL (8 vials every 23 days), NM
SPECTRACEF TAB 400MG	3	NM
SUPRAX CAP 400MG	3	NM
SUPRAX CHW 100MG	3	NM
SUPRAX CHW 200MG	3	NM
SUPRAX SUS 200/5ML	3	NM
SUPRAX SUS 500/5ML	3	NM
<i>tazicef</i>	1	NM
TAZICEF	1	NM

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Drug Name	Drug Tier	Requirements/Limits
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		

<i>altavera</i>	1	
<i>alyacen 1/35</i>	1	
<i>alyacen 7/7/7</i>	1	
<i>alyacen tab 7/7/7</i>	1	
<i>amethia</i>	1	
<i>apri</i>	1	
<i>aranelle</i>	1	
<i>ashlyna</i>	1	
<i>aubra eq tab 0.1-0.02</i>	1	
<i>aurovela 1.5/30</i>	1	
<i>aurovela 24 fe</i>	1	
<i>aurovela fe 1/20</i>	1	
<i>aviane</i>	1	
<i>azurette tab</i>	1	
<i>balziva</i>	1	
BEYAZ TAB	3	
<i>blisovi fe tab 1.5/30</i>	1	
<i>briellyn</i>	1	
<i>camrese</i>	1	
<i>camrese lo</i>	1	
<i>charlotte 24 chw fe 1/20</i>	1	
<i>chateal eq tab 0.15/30</i>	1	
<i>cryselle-28</i>	1	
<i>cyred</i>	1	
<i>dasetta 1/35</i>	1	
<i>dasetta 7/7/7</i>	1	
<i>daysee</i>	1	
<i>delyla</i>	1	
<i>dolishale tab 90-20mcg</i>	1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
<i>elinest</i>	1	
<i>enpresse-28</i>	1	
<i>estarylla</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>falmina</i>	1	
<i>fayosim</i>	1	
<i>finzala chw fe 1/20</i>	1	
GENERESS FE CHW	3	
<i>hailey 24 fe</i>	1	
<i>introvale</i>	1	
<i>isibloom</i>	1	
<i>isibloom tab</i>	1	
<i>jasmiel</i>	1	
<i>jasmiel tab 3-0.02mg</i>	1	
<i>jolessa</i>	1	
<i>juleber</i>	1	
<i>junel 1.5/30</i>	1	
<i>junel 1/20</i>	1	
<i>junel fe 1.5/30</i>	1	
<i>junel fe 1/20</i>	1	
<i>junel fe 24</i>	1	
<i>junel fe 24 tab 1/20</i>	1	
<i>kariva</i>	1	
<i>kelnor 1/35</i>	1	
<i>kelnor 1/50</i>	1	
<i>kurvelo</i>	1	
<i>larin 1.5/30</i>	1	
<i>larin 1/20</i>	1	
<i>larin 24 fe</i>	1	
<i>larin fe 1.5/30</i>	1	
<i>larin fe 1/20</i>	1	
<i>larin tab 1.5/30</i>	1	
<i>leena</i>	1	
<i>lessina</i>	1	
<i>levonest</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levora 0.15/30-28</i>	1	
LO LOESTRIN TAB 1-10-10	2	
<i>loestrin 1.5/30-21</i>	3	
<i>loestrin 1/20-21</i>	3	
<i>loestrin fe 1.5/30</i>	3	
<i>loestrin fe 1/20</i>	1	
<i>loryna</i>	1	
LOSEASONIQUE TAB	3	
<i>low-ogestrel</i>	1	
<i>lutra</i>	1	
<i>marlissa</i>	1	
<i>microgestin tab 1/20</i>	1	
<i>microgestin tab fe1.5/30</i>	1	
<i>mili</i>	1	
MINASTRIN 24 CHW FE	3	
MIRCETTE TAB 28 DAY	3	
<i>mono-lynyah</i>	1	
NATAZIA TAB	3	
<i>necon tab 1/35</i>	1	
NEXTSTELLIS TAB 3-14.2MG	3	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>nortrel 7/7/7</i>	1	
<i>ocella</i>	1	
<i>orsythia tab</i>	1	
<i>philith</i>	1	
<i>pimtrea</i>	1	
<i>pimtrea tab</i>	1	
<i>portia-28</i>	1	
QUARTETTE TAB	3	
<i>reclipsen</i>	1	
<i>rivelsa</i>	1	
SAFYRAL TAB	3	
SEASONIQUE TAB	3	
<i>setlakin</i>	1	
<i>sprintec 28</i>	1	
<i>sronyx</i>	1	
<i>syeda</i>	1	
<i>tarina 24 fe</i>	1	
<i>tarina fe tab 1/20 eq</i>	1	
TAYTULLA CAP 1MG/20MC	3	
<i>tilia fe tab</i>	1	
<i>tri-estarylla</i>	1	
<i>tri-legest fe</i>	1	
<i>tri-linyah</i>	1	
<i>tri-lo-estarylla</i>	1	
<i>tri-lo-marzia</i>	1	
<i>tri-lo-sprintec</i>	1	
<i>tri-mili</i>	1	
<i>tri-sprintec</i>	1	
<i>tri-sprintec tab</i>	1	
<i>tri-vylibra</i>	1	
<i>tri-vylibra lo</i>	1	
<i>trivora-28</i>	1	
<i>tydemy tab</i>	1	
<i>velivet</i>	1	
<i>vienva</i>	1	
<i>viorele</i>	1	
<i>volnea</i>	1	
<i>vyfemla tab 0.4-35</i>	1	
<i>vylibra</i>	1	
<i>vylibra tab 0.25-35</i>	1	
<i>wera</i>	1	
YASMIN 28 TAB 3-0.03MG	3	

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Drug Name	Drug Tier	Requirements/Limits
YAZ TAB 3-0.02MG	3	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
TWIRLA DIS 120-30	3	
xulane	1	
COMBINATION CONTRACEPTIVES - VAGINAL		
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	1	
NUVARING MIS	3	
EMERGENCY CONTRACEPTIVES		
econtra ez	1	OTC, NM
my choice	1	OTC, NM
my way	1	OTC, NM
new day	1	OTC, NM
opcicon one-step	1	OTC, NM
option 2	1	OTC, NM
react	1	OTC, NM
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA INJ 150MG/ML	3	QL (4 injections every 300 days), NM
DEPO-SQ PROV INJ 104	3	QL (4 injections every 300 days), NM
medroxyprogesterone acetate im susp 150 mg/ml	1	QL (4 injections every 300 days), NM
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	1	QL (4 injections every 300 days), NM
PROGESTIN CONTRACEPTIVES - ORAL		
camila	1	
deblitane	1	
errin	1	
heather	1	
incassia	1	
lyza	1	
nora-be	1	
norethindrone tab 0.35 mg	1	
norlyroc	1	
OPILL TAB 0.075MG	2	OTC
sharobel	1	
SLYND TAB 4MG	3	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
budesonide delayed release particles cap 3 mg	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>budesonide tab er 24hr 9 mg</i>	1	NM
CORTEF TAB 5MG	3	NM
CORTEF TAB 10MG	3	NM
CORTEF TAB 20MG	3	NM
<i>deflazacort tab 6 mg</i>	1	SP, PA, NM
<i>deflazacort tab 18 mg</i>	1	SP, PA, NM
<i>deflazacort tab 30 mg</i>	1	SP, PA, NM
<i>deflazacort tab 36 mg</i>	1	SP, PA, NM
DEXAMETHASON CON 1MG/ML	3	NM
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	1	NM
<i>dexamethasone soln 0.5 mg/5ml</i>	1	NM
<i>dexamethasone tab 0.5 mg</i>	1	NM
<i>dexamethasone tab 0.75 mg</i>	1	NM
<i>dexamethasone tab 1 mg</i>	1	NM
<i>dexamethasone tab 1.5 mg</i>	1	NM
<i>dexamethasone tab 2 mg</i>	1	NM
<i>dexamethasone tab 4 mg</i>	1	NM
<i>dexamethasone tab 6 mg</i>	1	NM
EMFLAZA SUS 22.75/ML	3	SP, PA, NM; LD
EMFLAZA TAB 6MG	3	SP, PA, NM; LD
EMFLAZA TAB 18MG	3	SP, PA, NM; LD
EMFLAZA TAB 30MG	3	SP, PA, NM; LD
EMFLAZA TAB 36MG	3	SP, PA, NM; LD
<i>hydrocortisone tab 5 mg</i>	1	NM
<i>hydrocortisone tab 10 mg</i>	1	NM
<i>hydrocortisone tab 20 mg</i>	1	NM
MEDROL TAB 2MG	3	NM
MEDROL TAB 4MG	3	NM
MEDROL TAB 8MG	3	NM
MEDROL TAB 16MG	3	NM
<i>methylprednisolone tab 4 mg</i>	1	NM
<i>methylprednisolone tab 8 mg</i>	1	NM
<i>methylprednisolone tab 16 mg</i>	1	NM
<i>methylprednisolone tab 32 mg</i>	1	NM
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	NM
<i>millipred tab 5mg</i>	1	NM
ORTIKOS CAP 6MG ER	3	NM
ORTIKOS CAP 9MG ER	3	NM
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	NM
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	NM
<i>prednisolone soln 15 mg/5ml</i>	1	NM
<i>prednisone oral soln 5 mg/5ml</i>	1	NM
<i>prednisone tab 1 mg</i>	1	NM
<i>prednisone tab 2.5 mg</i>	1	NM
<i>prednisone tab 5 mg</i>	1	NM
<i>prednisone tab 10 mg</i>	1	NM
<i>prednisone tab 20 mg</i>	1	NM
<i>prednisone tab 50 mg</i>	1	NM
<i>prednisone tab therapy pack 5 mg (21)</i>	1	NM
<i>prednisone tab therapy pack 5 mg (48)</i>	1	NM
<i>prednisone tab therapy pack 10 mg (21)</i>	1	NM
<i>prednisone tab therapy pack 10 mg (48)</i>	1	NM
SOLU-CORTEF INJ 100MG	3	NM
SOLU-CORTEF INJ 250MG	3	NM
SOLU-CORTEF INJ 500MG	3	NM
SOLU-CORTEF INJ 1000MG	3	NM
SOLU-MEDROL INJ 40MG	3	NM
SOLU-MEDROL INJ 125MG	3	NM
SOLU-MEDROL INJ 1000MG	3	NM
UCERIS TAB 9MG	3	NM

MINERALOCORTICOIDS

<i>fludrocortisone acetate tab 0.1 mg</i>	1	
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COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>benzonatate cap 100 mg</i>	1	NM
<i>benzonatate cap 200 mg</i>	1	NM
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	NM
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	NM
<i>hydromet</i>	1	NM

COUGH/COLD/ALLERGY COMBINATIONS

<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	OTC, NM
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	NM
<i>prometh vc syp 6.25-5/5</i>	1	NM
<i>prometh vc/ syp codeine</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	NM
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	NM
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	NM
TUXARIN ER TAB 54.3-8MG	3	NM
TUZISTRA XR SUS	3	PA, NM

MISC. RESPIRATORY INHALANTS

<i>sodium chloride soln nebu 0.9%</i>	1	NM
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MUCOLYTICS

<i>acetylcysteine inhal soln 10%</i>	1	NM
<i>acetylcysteine inhal soln 20%</i>	1	NM

DERMATOLOGICALS

ACNE PRODUCTS

<i>acutane cap 10mg</i>	1	NM
<i>acutane cap 20mg</i>	1	NM
<i>acutane cap 30mg</i>	1	NM
<i>adapalene cream 0.1%</i>	1	NM
<i>adapalene gel 0.1%</i>	1	NM
<i>adapalene gel 0.3%</i>	1	NM
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	NM
<i>amnestem</i>	1	NM
<i>benzepro</i>	1	NM
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	NM
<i>bp 10-1</i>	1	NM
<i>claravis</i>	1	NM
<i>claravis cap 20mg</i>	1	NM
CLEOCIN-T LOT 1%	3	NM
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	NM
<i>clindamycin phosphate gel 1%</i>	1	NM
<i>clindamycin phosphate lotion 1%</i>	1	NM
<i>clindamycin phosphate soln 1%</i>	1	NM
<i>clindamycin phosphate swab 1%</i>	1	NM
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	NM
<i>dapsone gel 5%</i>	1	NM
<i>ery</i>	1	NM
<i>erythromycin gel 2%</i>	1	NM
<i>erythromycin soln 2%</i>	1	NM
<i>isotretinoin cap 10 mg</i>	1	NM
<i>isotretinoin cap 20 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>isotretinoin cap 25 mg</i>	1	NM
<i>isotretinoin cap 30 mg</i>	1	NM
<i>isotretinoin cap 35 mg</i>	1	NM
<i>isotretinoin cap 40 mg</i>	1	NM
KLARON LOT 10%	3	NM
SOD SUL/SULF EMU 10-5%	3	PA, NM
sss 10%-5%	1	NM
sss 10-5	1	NM
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cleanser 9-4%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cleanser 10-5%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	1	NM
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i>	1	NM
sulfacleanse 8/4	1	NM
sulfamez wash	1	NM
<i>tretinoin cream 0.1%</i>	1	NM
<i>tretinoin cream 0.05%</i>	1	NM
<i>tretinoin cream 0.025%</i>	1	NM
<i>tretinoin gel 0.01%</i>	1	NM
<i>tretinoin gel 0.05%</i>	1	NM
<i>tretinoin gel 0.025%</i>	1	NM
WINLEVI CRE 1%	3	NM
zenatane	1	NM

AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS

VEREGEN OIN 15%	3	NM
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ANTI-INFLAMMATORY AGENTS - TOPICAL

<i>diclofenac epolamine patch 1.3%</i>	1	NM
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	NM
<i>diclofenac sodium soln 1.5%</i>	1	NM
<i>diclofenac sodium soln 2%</i>	1	NM
FLECTOR DIS 1.3%	3	NM

ANTIBIOTICS - TOPICAL

ALTABAX OIN 1%	3	NM
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Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate oint 0.1%</i>	1	NM
<i>mupirocin oint 2%</i>	1	NM
ANTIFUNGALS - TOPICAL		
<i>ciclodan</i>	1	QL (20 mL every year), NM
<i>ciclopirox gel 0.77%</i>	1	NM
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	NM
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	NM
<i>ciclopirox shampoo 1%</i>	1	NM
<i>ciclopirox solution 8%</i>	1	QL (20 mL every year), NM
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	NM
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	NM
<i>econazole nitrate cream 1%</i>	1	NM
EXELDERM CRE 1%	3	NM
EXELDERM SOL 1%	3	NM
JUBLIA SOL 10%	3	PA, NM
KERYDIN SOL 5%	3	PA, NM
<i>ketoconazole cream 2%</i>	1	QL (120 gm every 30 days), NM
<i>ketoconazole shampoo 2%</i>	1	NM
<i>luliconazole cream 1%</i>	1	NM
LUZU CRE 1%	3	NM
<i>naftifine hcl cream 1%</i>	1	NM
<i>naftifine hcl cream 2%</i>	1	NM
<i>naftifine hcl gel 2%</i>	1	NM
NAFTIN GEL 1%	3	NM
NAFTIN GEL 2%	3	NM
<i>nyamyc</i>	1	NM
<i>nystatin cream 100000 unit/gm</i>	1	NM
<i>nystatin oint 100000 unit/gm</i>	1	NM
<i>nystatin topical powder 100000 unit/gm</i>	1	NM
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	NM
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	NM
<i>nystop</i>	1	NM
<i>sulconazole nitrate cream 1%</i>	1	NM
<i>sulconazole nitrate solution 1%</i>	1	NM
<i>tavaborole soln 5%</i>	1	PA, NM
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene gel 1%</i>	1	NM
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA, NM
EFUDEX CRE 5%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil cream 0.5%</i>	1	NM
<i>fluorouracil cream 5%</i>	1	NM
<i>fluorouracil soln 2%</i>	1	NM
<i>fluorouracil soln 5%</i>	1	NM
PANRETIN GEL 0.1%	2	NM
TARGRETIN GEL 1%	3	NM
VALCHLOR GEL 0.016%	3	PA, NM

ANTIPRURITICS - TOPICAL

<i>doxepin hcl cream 5%</i>	1	PA, NM
PRUDOXIN CRE 5%	3	PA, NM
ZONALON CRE 5%	3	PA, NM

ANTIPSORIATICS

<i>acitretin cap 10 mg</i>	1	NM
<i>acitretin cap 17.5 mg</i>	1	NM
<i>acitretin cap 25 mg</i>	1	NM
<i>calcipotriene cream 0.005%</i>	1	QL (60 gm every 30 days), NM
<i>calcipotriene oint 0.005%</i>	1	QL (60 gm every 30 days), NM
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	QL (60 mL every 30 days), NM
<i>calcitrene</i>	1	QL (60 gm every 30 days), NM
<i>calcitriol oint 3 mcg/gm</i>	1	NM
COSENTYX INJ 75MG/0.5	2	SP, PA
COSENTYX INJ 150MG/ML	2	SP, PA
COSENTYX INJ 300DOSE	2	SP, PA
COSENTYX PEN INJ 150MG/ML	2	SP, PA
COSENTYX PEN INJ 300DOSE	2	SP, PA
COSENTYX UNO INJ 300/2ML	2	SP, PA
DOVONEX CRE 0.005%	3	QL (60 gm every 30 days), NM
SKYRIZI INJ 150MG/ML	2	SP, PA
SKYRIZI PEN INJ 150MG/ML	2	SP, PA
STELARA INJ 45MG/0.5	2	SP, PA
STELARA INJ 90MG/ML	2	SP, PA
<i>tazarotene cream 0.1%</i>	1	NM
<i>tazarotene gel 0.1%</i>	1	NM
<i>tazarotene gel 0.05%</i>	1	NM
TAZORAC CRE 0.1%	3	NM
TAZORAC CRE 0.05%	3	NM
TAZORAC GEL 0.1%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
TAZORAC GEL 0.05%	3	NM
TREMFYA INJ 100MG/ML	2	SP, PA
ZORYVE CRE 0.3%	3	NM
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide lotion 2.5%</i>	1	NM
<i>selenium sulfide shampoo 2.3%</i>	1	NM
<i>selenium sulfide shampoo 2.25%</i>	1	NM
<i>sulfacetamide sodium liquid 10%</i>	1	NM
<i>sulfacetamide sodium shampoo 10%</i>	1	NM
ANTIVIRALS - TOPICAL		
<i>acyclovir oint 5%</i>	1	NM
DENAVIR CRE 1%	3	NM
<i>penciclovir cream 1%</i>	1	NM
ZOVIRAX OIN 5%	3	NM
BURN PRODUCTS		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	NM
SILVADENE CRE 1%	3	NM
<i>silver sulfadiazine cream 1%</i>	1	NM
ssd	1	NM
SULFAMYLON CRE 85MG/GM	3	NM
CORTICOSTEROIDS - TOPICAL		
<i>alclometasone dipropionate cream 0.05%</i>	1	NM
<i>alclometasone dipropionate oint 0.05%</i>	1	NM
<i>amcinonide lotion 0.1%</i>	1	NM
AMCINONIDE OINT 0.1%	2	NM
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	NM
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	NM
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	NM
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	NM
<i>betamethasone dipropionate cream 0.05%</i>	1	NM
<i>betamethasone dipropionate lotion 0.05%</i>	1	NM
<i>betamethasone dipropionate oint 0.05%</i>	1	NM
<i>betamethasone valerate aerosol foam 0.12%</i>	1	NM
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	NM
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	NM
<i>clobetasol propionate cream 0.05%</i>	1	NM
<i>clobetasol propionate e</i>	1	NM
<i>clobetasol propionate gel 0.05%</i>	1	NM
<i>clobetasol propionate lotion 0.05%</i>	1	NM
<i>clobetasol propionate oint 0.05%</i>	1	QL (120 gm every 30 days), NM
<i>clobetasol propionate soln 0.05%</i>	1	NM
DERMA-SMOOTH OIL /FS BODY	3	NM
<i>desonide cream 0.05%</i>	1	NM
<i>desonide lotion 0.05%</i>	1	NM
<i>desonide oint 0.05%</i>	1	NM
DESOWEN CRE 0.05%	3	NM
<i>desoximetasone cream 0.05%</i>	1	NM
<i>desoximetasone cream 0.25%</i>	1	NM
<i>desoximetasone gel 0.05%</i>	1	NM
<i>desoximetasone oint 0.05%</i>	1	NM
<i>desoximetasone oint 0.25%</i>	1	NM
<i>desoximetasone spray 0.25%</i>	1	NM
<i>diflorasone diacetate cream 0.05%</i>	1	QL (60 gm every 30 days), NM
<i>diflorasone diacetate oint 0.05%</i>	1	QL (60 gm every 30 days), NM
DIPROLENE OIN 0.05%	3	NM
EPIFOAM AER 1%	3	NM
<i>fluocinolone acetonide cream 0.01%</i>	1	NM
<i>fluocinolone acetonide cream 0.025%</i>	1	NM
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	NM
<i>fluocinolone acetonide oint 0.025%</i>	1	NM
<i>fluocinolone acetonide soln 0.01%</i>	1	NM
<i>fluocinonide cream 0.05%</i>	1	NM
<i>fluocinonide gel 0.05%</i>	1	NM
<i>fluocinonide oint 0.05%</i>	1	NM
<i>fluocinonide soln 0.05%</i>	1	NM
<i>flurandrenolide cream 0.05%</i>	1	QL (60 gm every 30 days), NM
<i>flurandrenolide lotion 0.05%</i>	1	QL (120 ml every 30 days), NM
<i>fluticasone propionate cream 0.05%</i>	1	NM
<i>fluticasone propionate lotion 0.05%</i>	1	NM
<i>fluticasone propionate oint 0.005%</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>halobetasol propionate cream 0.05%</i>	1	NM
<i>halobetasol propionate oint 0.05%</i>	1	NM
<i>hydrocortisone butyrate lotion 0.1%</i>	1	QL (59 mL every 30 days), NM
<i>hydrocortisone butyrate oint 0.1%</i>	1	NM
<i>hydrocortisone butyrate soln 0.1%</i>	1	NM
<i>hydrocortisone lotion 2.5%</i>	1	NM
<i>hydrocortisone oint 2.5%</i>	1	NM
<i>hydrocortisone valerate cream 0.2%</i>	1	NM
<i>hydrocortisone valerate oint 0.2%</i>	1	NM
<i>mometasone furoate cream 0.1%</i>	1	NM
<i>mometasone furoate oint 0.1%</i>	1	NM
<i>mometasone furoate solution 0.1% (lotion)</i>	1	NM
TEXACORT SOL 2.5%	3	NM
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	1	NM
<i>triamcinolone acetonide cream 0.1%</i>	1	NM
<i>triamcinolone acetonide cream 0.5%</i>	1	NM
<i>triamcinolone acetonide cream 0.025%</i>	1	NM
<i>triamcinolone acetonide lotion 0.1%</i>	1	NM
<i>triamcinolone acetonide lotion 0.025%</i>	1	NM
<i>triamcinolone acetonide oint 0.1%</i>	1	NM
<i>triamcinolone acetonide oint 0.5%</i>	1	NM
<i>triamcinolone acetonide oint 0.025%</i>	1	NM
<i>triderm</i>	1	NM
ECZEMA AGENTS		
DUPIXENT INJ 100/0.67	2	SP, PA
DUPIXENT INJ 200/1.14	2	SP, PA
DUPIXENT INJ 200MG	2	SP, PA
DUPIXENT INJ 300/2ML	2	SP, PA
EMOLLIENT/KERATOLYTIC AGENTS		
CEM-UREA SOL 45%	2	NM
HYDRO 40 AER FOAM	3	NM
<i>umecta mousse</i>	1	NM
<i>urea cream 39%</i>	1	NM
<i>urea cream 40%</i>	1	NM
<i>urea cream 45%</i>	1	NM
<i>urea hydrating</i>	1	NM
<i>urea nail</i>	1	NM
ENZYMES - TOPICAL		
SANTYL OIN 250/GM	3	QL (90 grams per 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod cream 5%</i>	1	NM
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
ELIDEL CRE 1%	3	NM
HYFTOR GEL 0.2%	3	NM
<i>pimecrolimus cream 1%</i>	1	NM
PROTOPIC OIN 0.1%	3	NM
PROTOPIC OIN 0.03%	3	NM
<i>tacrolimus oint 0.1%</i>	1	NM
<i>tacrolimus oint 0.03%</i>	1	NM
KERATOLYTIC/ANTIMITOTIC AGENTS		
CONDYLOX GEL 0.5%	3	NM
PODOCON-25 SOL	3	NM
<i>podofilox gel 0.5%</i>	1	NM
<i>podofilox soln 0.5%</i>	1	NM
PYROGALL ACD OIN	2	NM
<i>salicylic acid er film-forming soln 28.5%</i>	1	NM
LOCAL ANESTHETICS - TOPICAL		
<i>glydo</i>	1	NM
<i>lidocaine hcl cream 3%</i>	1	NM
<i>lidocaine hcl soln 4%</i>	1	NM
<i>lidocaine oint 5%</i>	1	NM
<i>lidocaine patch 5%</i>	1	NM
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	NM
LIDODERM DIS 5%	3	NM
MISC. TOPICAL		
DRYSOL SOL 20%	3	NM
QBREXZA PAD 2.4%	3	NM
XERAC-AC SOL 6.25%	3	NM
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OIN 2%	2	NM
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	NM
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	1	NM
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	1	QL (120 capsules per 365 days), NM
FINACEA AER 15%	2	NM
FINACEA GEL 15%	3	NM
<i>ivermectin cream 1%</i>	1	NM
METROCREAM CRE 0.75%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
METROGEL GEL 1%	3	NM
METROLOTION LOT 0.75%	3	NM
<i>metronidazole cream 0.75%</i>	1	NM
<i>metronidazole gel 0.75%</i>	1	NM
<i>metronidazole gel 1%</i>	1	NM
<i>metronidazole lotion 0.75%</i>	1	NM
ORACEA CAP 40MG	3	QL (120 capsules per 365 days), NM
RHOFADE CRE 1%	3	NM
SOOLANTRA CRE 1%	2	NM

SCABICIDES & PEDICULICIDES

<i>crotan</i>	1	NM
<i>ivermectin lotion 0.5%</i>	1	OTC, NM
<i>lindane shampoo 1%</i>	1	NM
<i>malathion lotion 0.5%</i>	1	NM
NATROBA SUS 0.9%	3	NM
OVIDE LOT 0.5%	3	NM
<i>permethrin cream 5%</i>	1	NM
<i>spinosad susp 0.9%</i>	1	NM

DIAGNOSTIC PRODUCTS

DIAGNOSTIC DRUGS

METOPIRONE CAP 250MG	3	NM
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DIAGNOSTIC TESTS

KETOSTIX TES STRIP	1	OTC, NM
ONETOUCH TES ULTRA	2	QL (200 strips per 30 days), OTC, NM

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	

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Drug Name	Drug Tier	Requirements/Limits
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
SUCRAID SOL 8500/ML	3	SP; LD
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	3	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	1	NM
<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	

DIURETIC COMBINATIONS

<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
MAXZIDE TAB 75-50	3	
MAXZIDE-25 TAB	3	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	

LOOP DIURETICS

<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	1	
<i>furosemide inj 10 mg/ml</i>	1	NM
<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	

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Drug Name	Drug Tier	Requirements/Limits
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
LASIX TAB 20MG	3	
LASIX TAB 40MG	3	
LASIX TAB 80MG	3	
<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	
POTASSIUM SPARING DIURETICS		
ALDACTONE TAB 25MG	3	
ALDACTONE TAB 50MG	3	
ALDACTONE TAB 100MG	3	
<i>amiloride hcl tab 5 mg</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
<i>triamterene cap 100 mg</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
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	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ADRENAL STEROID INHIBITORS		
ISTURISA TAB 1MG	3	SP; LD
ISTURISA TAB 5MG	3	SP; LD
ISTURISA TAB 10MG	3	SP; LD
RECORLEV TAB 150MG	3	
BONE DENSITY REGULATORS		
ACTONEL TAB 35MG	3	
ACTONEL TAB 150MG	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>alendronate sodium oral soln 70 mg/75ml</i>	1	
<i>alendronate sodium tab 5 mg</i>	1	
<i>alendronate sodium tab 10 mg</i>	1	
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
ATELVIA TAB	3	
FORTEO INJ 600/2.4	2	SP
FOSAMAX + D TAB 70-2800	3	
FOSAMAX + D TAB 70-5600	3	
FOSAMAX TAB 70MG	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	NM
<i>risedronate sodium tab 35 mg</i>	1	
<i>risedronate sodium tab 150 mg</i>	1	
<i>risedronate sodium tab delayed release 35 mg</i>	1	
<i>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml</i>	1	
TERIPARATIDE INJ 620/2.48	2	SP
TYMLOS INJ	2	SP

FERTILITY REGULATORS

CHOR GONADOT INJ 10000UNT	3	SP, QL (9 cycles per lifetime), NM
<i>clomid tab 50mg</i>	1	QL (30 tabs every 30 days), NM
FOLLISTIM AQ INJ 300UNIT	2	SP, QL (9 cycles per lifetime), NM
FOLLISTIM AQ INJ 600UNIT	2	SP, QL (9 cycles per lifetime), NM
FOLLISTIM AQ INJ 900UNIT	2	SP, QL (9 cycles per lifetime), NM
GONAL-F INJ 450UNIT	3	SP, QL (9 cycles per lifetime), NM
GONAL-F INJ 1050UNIT	3	SP, QL (9 cycles per lifetime), NM
GONAL-F RFF INJ 75UNIT	3	SP, QL (9 cycles per lifetime), NM
GONAL-F RFF INJ 300/0.5	3	SP, QL (9 cycles per lifetime), NM
GONAL-F RFF INJ 450/0.75	3	SP, QL (9 cycles per lifetime), NM

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Drug Name	Drug Tier	Requirements/Limits
GONAL-F RFF INJ 900/1.5	3	SP, QL (9 cycles per lifetime), NM
MENOPUR INJ 75UNIT	2	SP, QL (9 cycles per lifetime), NM
NOVAREL INJ 5000UNIT	3	SP, QL (9 cycles per lifetime), NM
NOVAREL INJ 10000UNT	3	SP, QL (9 cycles per lifetime), NM
OVIDREL INJ	3	SP, QL (9 cycles per lifetime), NM
PREGNYL INJ 10000UNT	3	SP, QL (9 cycles per lifetime), NM
GNRH/LHRH ANTAGONISTS		
CETROTIDE KIT 0.25MG	3	SP, QL (9 cycles per lifetime), NM
GANIRELIX AC INJ 250/0.5	3	SP, QL (9 cycles per lifetime), NM
ORILISSA TAB 150MG	2	NM
ORILISSA TAB 200MG	2	NM
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ 10MG	2	SP
SOMAVERT INJ 15MG	2	SP
SOMAVERT INJ 20MG	2	SP
SOMAVERT INJ 25MG	2	SP
SOMAVERT INJ 30MG	2	SP
GROWTH HORMONES		
NORDITROPIN INJ 5/1.5ML	2	SP, PA
NORDITROPIN INJ 10/1.5ML	2	SP, PA
NORDITROPIN INJ 15/1.5ML	2	SP, PA
NORDITROPIN INJ 30/3ML	2	SP, PA
NUTROPIN AQ INJ 10MG/2ML	2	SP, PA
NUTROPIN AQ INJ 20MG/2ML	2	SP, PA
NUTROPIN AQ INJ NUSPIN 5	2	SP, PA
SEROSTIM INJ 4MG	3	SP, PA
SEROSTIM INJ 5MG	3	SP, PA
SEROSTIM INJ 6MG	3	SP, PA
HORMONE RECEPTOR MODULATORS		
EVISTA TAB 60MG	3	
OSPHENA TAB 60MG	3	
<i>raloxifene hcl tab 60 mg</i>	1	AGE
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX INJ 40MG/4ML	3	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
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LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS

SYNAREL SOL 2MG/ML	2	NM
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METABOLIC MODIFIERS

<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	
CARBAGLU TAB 200MG	3	SP, PA; LD
<i>carglumic acid soluble tab 200 mg</i>	1	SP, PA; LD
CARNITOR SOL 1GM/10ML	3	
CARNITOR TAB 330MG	3	
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	1	SP
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	1	SP
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	1	SP
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
GALAFOLD CAP 123MG	3	SP, PA; LD
KUVAN POW 100MG	3	PA
KUVAN POW 500MG	3	PA
KUVAN TAB 100MG	3	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
MYALEPT INJ 11.3MG	3	SP, PA; LD
NITYR TAB 2MG	3	SP, PA; LD
NITYR TAB 5MG	3	SP, PA; LD
NITYR TAB 10MG	3	SP, PA; LD
OLPRUVA PAK 2GM	3	SP
OLPRUVA PAK 3GM	3	SP
OLPRUVA PAK 4 GM	3	SP
OLPRUVA PAK 5GM	3	SP
OLPRUVA PAK 6.67GM	3	SP
OLPRUVA PAK 6GM	3	SP
ORFADIN CAP 2MG	3	SP, PA; LD
ORFADIN CAP 5MG	3	SP, PA; LD
ORFADIN CAP 10MG	3	SP, PA; LD
ORFADIN CAP 20MG	3	SP, PA; LD
ORFADIN SUS 4MG/ML	3	SP, PA; LD
PALYNZIQ INJ 2.5/0.5	3	SP, PA
PALYNZIQ INJ 10/0.5ML	3	SP, PA
PALYNZIQ INJ 20MG/ML	3	SP, PA
PHEBURANE MIS 483/GM	3	PA
RAVICTI LIQ 1.1GM/ML	3	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
RAYALDEE CAP 30MCG	3	
<i>sapropterin dihydrochloride powder packet 100 mg</i>	1	PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	1	PA
<i>sapropterin dihydrochloride tab 100 mg</i>	1	PA
SENSIPAR TAB 30MG	3	SP
SENSIPAR TAB 60MG	3	SP
SENSIPAR TAB 90MG	3	SP
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	1	SP
<i>sodium phenylbutyrate tab 500 mg</i>	1	SP
STRENSIQ INJ 18/0.45	3	SP, PA; LD
STRENSIQ INJ 28/0.7ML	3	SP, PA; LD
STRENSIQ INJ 40MG/ML	3	SP, PA; LD
STRENSIQ INJ 80/0.8ML	3	SP, PA; LD
XURIDEN POW 2GM	3	SP, PA; LD
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB 10MG	3	
KERENDIA TAB 20MG	3	
NATRIURETIC PEPTIDES		
VOXZOGO INJ 0.4MG	3	SP, PA
VOXZOGO INJ 0.56MG	3	SP, PA
VOXZOGO INJ 1.2MG	3	SP, PA
POSTERIOR PITUITARY HORMONES		
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	1	NM
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
PROGESTERONE RECEPTOR ANTAGONISTS		
<i>mifepristone tab 200 mg</i>	1	NM
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	NM
SOMATOSTATIC AGENTS		
MYCAPSSA CAP 20MG	3	SP; LD
SIGNIFOR INJ 0.3MG/ML	3	SP, PA; LD
SIGNIFOR INJ 0.6MG/ML	3	SP, PA; LD

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Drug Name	Drug Tier	Requirements/Limits
SIGNIFOR INJ 0.9MG/ML	3	SP, PA; LD
SOMATULINE INJ 60/0.2ML	3	SP, NM
SOMATULINE INJ 90/0.3ML	3	SP, NM
SOMATULINE INJ 120/.5ML	3	SP, NM

VASOPRESSIN RECEPTOR ANTAGONISTS

JYNARQUE PAK 15MG	3	SP, PA, NM; LD
JYNARQUE PAK 30-15MG	3	SP, PA, NM; LD
JYNARQUE PAK 45-15MG	3	SP, PA, NM; LD
JYNARQUE PAK 60-30MG	3	SP, PA, NM; LD
JYNARQUE PAK 90-30MG	3	SP, PA, NM; LD
JYNARQUE TAB 15MG	3	SP, PA, NM; LD
JYNARQUE TAB 30MG	3	SP, PA, NM; LD
SAMSCA TAB 15MG	3	SP, QL (60 Tablets every 180 days), NM; LD
SAMSCA TAB 30MG	3	SP, QL (60 Tablets every 180 days), NM; LD
<i>tolvaptan tab 15 mg</i>	1	SP, QL (60 tabs every 180 days), NM; LD
<i>tolvaptan tab 30 mg</i>	1	SP, QL (60 Tablets every 180 days), NM; LD

ESTROGENS

ESTROGEN COMBINATIONS

ACTIVELLA TAB 1-0.5MG	3	
<i>amabelz tab 1-0.5mg</i>	1	
ANGELIQ TAB 0.5-1MG	3	
ANGELIQ TAB 0.25-0.5	3	
BIJUVA CAP 0.5-100	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PRO DIS WEEKLY	2	
COMBIPATCH DIS	3	
DUAVEE TAB 0.45-20	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>jinteli</i>	1	
<i>mimvey</i>	1	
MYFEMBREE TAB	2	NM
<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	
ORIAHNN CAP	2	NM

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Drug Name	Drug Tier	Requirements/Limits
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	
ESTROGENS		
CLIMARA DIS 0.1MG	3	
CLIMARA DIS 0.05MG	3	
CLIMARA DIS 0.06MG	3	
CLIMARA DIS 0.025MG	3	
CLIMARA DIS 0.075MG	3	
CLIMARA DIS 0.0375MG	3	
DEPO-ESTRADI INJ 5MG/ML	3	NM
DIVIGEL GEL 1MG/GM	3	
ELESTRIN GEL 0.06%	3	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	NM
<i>estradiol valerate im in oil 40 mg/ml</i>	1	NM
ESTROGEL GEL	3	

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Drug Name	Drug Tier	Requirements/Limits
EVAMIST SPR 1.53MG	3	
MENEST TAB 0.3MG	3	
MENEST TAB 0.625MG	3	
MENEST TAB 1.25MG	3	
MENOSTAR DIS 14MCG	3	
MINIVELLE DIS 0.1MG	3	
MINIVELLE DIS 0.05MG	3	
MINIVELLE DIS 0.025MG	3	
MINIVELLE DIS 0.075MG	3	
MINIVELLE DIS 0.0375MG	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	
VIVELLE-DOT DIS 0.1MG	3	
VIVELLE-DOT DIS 0.05MG	3	
VIVELLE-DOT DIS 0.025MG	3	
VIVELLE-DOT DIS 0.075MG	3	
VIVELLE-DOT DIS 0.0375MG	3	

FLUOROQUINOLONES

FLUOROQUINOLONES

BAXDELA TAB 450MG	3	NM
CIPRO (5%) SUS 250MG/5	3	NM
CIPRO (10%) SUS 500MG/5	3	NM
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	NM
LEVAQUIN TAB 750MG	3	NM
<i>levofloxacin oral soln 25 mg/ml</i>	1	NM
<i>levofloxacin tab 250 mg</i>	1	NM
<i>levofloxacin tab 500 mg</i>	1	NM
<i>levofloxacin tab 750 mg</i>	1	NM
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	NM
<i>ofloxacin tab 300 mg</i>	1	NM
<i>ofloxacin tab 400 mg</i>	1	NM

GASTROINTESTINAL AGENTS - MISC.

5-HT4 RECEPTOR AGONISTS

MOTEGRITY TAB 1MG	3	
MOTEGRITY TAB 2MG	3	

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Drug Name	Drug Tier	Requirements/Limits
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE TAB 3MG	3	
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM CAP 50MG	3	SP, PA; LD
CHOLBAM CAP 250MG	3	SP, PA; LD
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA TAB 5MG	3	SP, PA
OCALIVA TAB 10MG	3	SP, PA
GALLSTONE SOLUBILIZING AGENTS		
CHENODAL TAB 250MG	3	SP, NM; LD
URSO 250 TAB 250MG	3	
URSO FORTE TAB 500MG	3	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone cap 8 mcg</i>	1	
<i>lubiprostone cap 24 mcg</i>	1	
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	NM
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	NM
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 200MCG	3	PA; LD
BYLVAY CAP 400MCG	3	PA; LD
BYLVAY CAP 600MCG	3	PA; LD
BYLVAY CAP 1200MCG	3	PA; LD
LIVMARLI SOL 9.5MG/ML	3	PA
INFLAMMATORY BOWEL AGENTS		
APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	3	NM
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	NM
CANASA SUP 1000MG	3	NM
COLAZAL CAP 750MG	3	NM
<i>mesalamine cap dr 400 mg</i>	1	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine enema 4 gm</i>	1	NM
<i>mesalamine suppos 1000 mg</i>	1	NM
<i>mesalamine tab delayed release 1.2 gm</i>	1	
<i>mesalamine tab delayed release 800 mg</i>	1	NM
PENTASA CAP 250MG CR	2	
PENTASA CAP 500MG CR	2	
SKYRIZI INJ 180/1.2	2	SP, PA
SKYRIZI INJ 360/2.4	2	SP, PA
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose</i>	1	
<i>generlac</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	1	PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	1	PA
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
LOTRONEX TAB 0.5MG	3	PA
LOTRONEX TAB 1MG	3	PA
VIBERZI TAB 75MG	3	PA
VIBERZI TAB 100MG	3	PA
LIVE FECAL MICROBIOTA		
VOWST CAP	3	SP, PA, QL (12 capsules per 30 days), NM
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK TAB 12.5MG	2	NM
MOVANTIK TAB 25MG	2	NM
SYMPROIC TAB 0.2MG	3	NM
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	
FOSRENOL CHW 500MG	3	
FOSRENOL CHW 750MG	3	
FOSRENOL CHW 1000MG	3	
FOSRENOL POW 750MG	3	
FOSRENOL POW 1000MG	3	

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Drug Name	Drug Tier	Requirements/Limits
<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	
PHOSLYRA SOL	3	
RENAGEL TAB 800MG	3	
REVELA POW 0.8GM	3	
REVELA POW 2.4GM	3	
REVELA TAB 800MG	3	
<i>sevelamer carbonate packet 0.8 gm</i>	1	
<i>sevelamer carbonate packet 2.4 gm</i>	1	
<i>sevelamer carbonate tab 800 mg</i>	1	
<i>sevelamer hcl tab 400 mg</i>	1	
<i>sevelamer hcl tab 800 mg</i>	1	
VELPHORO CHW 500MG	2	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT 5MG	3	SP, PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB 250MG	3	
GENITOURINARY AGENTS - MISCELLANEOUS		
ACIDIFIERS		
K-PHOS TAB NO 2	2	NM
ALKALINIZERS		
ORACIT SOL	2	NM
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	NM
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	NM
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	NM
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	2	SP
CYSTAGON CAP 150MG	2	SP
PROCYSBI CAP 25MG	3	SP, PA; LD
PROCYSBI CAP 75MG	3	SP, PA; LD
GENITOURINARY IRRIGANTS		
<i>sodium chloride irrigation soln 0.9%</i>	1	NM
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP 100MG	3	NM
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
AVODART CAP 0.5MG	3	

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Drug Name	Drug Tier	Requirements/Limits
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
ENTADFI CAP 5-5MG	3	NM
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	3	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	3	
RAPAFLO CAP 8MG	3	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	
<i>tadalafil tab 2.5 mg</i>	1	PA, QL (30 tabs every 30 days)
<i>tadalafil tab 5 mg</i>	1	PA, QL (30 tabs every 30 days)
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	3	

URINARY ANALGESICS

<i>phenazopyridine hcl tab 100 mg</i>	1	NM
<i>phenazopyridine hcl tab 200 mg</i>	1	NM
PYRIDIUM TAB 100MG	3	NM
PYRIDIUM TAB 200MG	3	NM

URINARY STONE AGENTS

THIOLA EC TAB 100MG	1	SP; LD
THIOLA EC TAB 300MG	1	SP; LD
THIOLA TAB 100MG	3	SP; LD
<i>tiopronin tab 100 mg</i>	1	SP; LD

GOUT AGENTS

GOUT AGENT COMBINATIONS

<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
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GOUT AGENTS

<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine cap 0.6 mg</i>	1	QL (60 caps every 23 days), NM
<i>colchicine tab 0.6 mg</i>	1	QL (60 tabs every 23 days), NM
COLCRYS TAB 0.6MG	3	QL (60 tabs every 23 days), NM
<i>febuxostat tab 40 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>febuxostat tab 80 mg</i>	1	
MITIGARE CAP 0.6MG	3	QL (60 caps every 23 days), NM
ULORIC TAB 40MG	3	PA
ULORIC TAB 80MG	3	PA
ZYLOPRIM TAB 100MG	3	
ZYLOPRIM TAB 300MG	3	
URICOSURICS		
<i>probenecid tab 500 mg</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA		
GIVLAARI INJ 189MG/ML	3	SP, PA, NM; LD
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR INJ 30MG/3ML	3	SP, PA, NM
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	1	SP, PA, NM
COMPLEMENT INHIBITORS		
EMPAVELI INJ 1080MG	3	PA, NM
HAEGARDA INJ 2000UNIT	3	SP, PA, NM
HAEGARDA INJ 3000UNIT	3	SP, PA, NM
TAVNEOS CAP 10MG	3	
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	3	SP, PA; LD
TAVALISSE TAB 150MG	3	SP, PA; LD
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
PLASMA KALLIKREIN INHIBITORS		
TAKHZYRO INJ 150MG/ML	3	SP, PA
TAKHZYRO INJ 300/2ML	3	SP, PA
PLATELET AGGREGATION INHIBITORS		
AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	NM
<i>dipyridamole tab 25 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
EFFIENT TAB 5MG	3	
EFFIENT TAB 10MG	3	
PLAVIX TAB 75MG	3	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	
ZONTIVITY TAB 2.08MG	3	

HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

CERDELGA CAP 84MG	3	SP, PA
<i>miglustat cap 100 mg</i>	1	SP, PA; LD
ZAVESCA CAP 100MG	3	SP, PA; LD

AGENTS FOR SICKLE CELL ANEMIA

DROXIA CAP 200MG	2	
DROXIA CAP 300MG	2	
DROXIA CAP 400MG	2	
OXBRYTA TAB 500MG	3	SP, PA

AGENTS FOR SICKLE CELL DISEASE

ENDARI POW 5GM	3	SP, NM; LD
OXBRYTA TAB 300MG	3	PA
OXBRYTA TAB 300MG	3	SP, PA

COBALAMINS

<i>cyanocobalamin inj 1000 mcg/ml</i>	1	NM
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FOLIC ACID/FOLATES

<i>fa-8</i>	1	AGE, OTC
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	1	OTC, NM

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 10MCG	3	NM
ARANESP INJ 25MCG	3	NM
ARANESP INJ 40MCG	3	NM
ARANESP INJ 60MCG	3	NM
ARANESP INJ 100MCG	3	NM
ARANESP INJ 150MCG	3	NM
ARANESP INJ 200MCG	3	NM
ARANESP INJ 300MCG	3	NM
ARANESP INJ 500MCG	3	NM
DOPTELET TAB 20MG	3	SP, PA, NM
EPOGEN INJ 2000/ML	3	NM
EPOGEN INJ 3000/ML	3	NM

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Drug Name	Drug Tier	Requirements/Limits
EPOGEN INJ 4000/ML	3	NM
EPOGEN INJ 20000/ML	3	NM
FULPHILA INJ 6/0.6ML	3	NM
FYLNETRA INJ 6MG/0.6	3	NM
LEUKINE INJ 250MCG	3	NM
MIRCERA INJ 30MCG	3	NM
MIRCERA INJ 50MCG	3	NM
MIRCERA INJ 75MCG	3	NM
MIRCERA INJ 100MCG	3	NM
MIRCERA INJ 120MCG	3	NM
MIRCERA INJ 150MCG	3	NM
MIRCERA INJ 200MCG	3	NM
MULPLETA TAB 3MG	3	SP, PA, NM
NEULASTA INJ 6MG/0.6M	3	NM
NEUPOGEN INJ 300/0.5	3	NM
NEUPOGEN INJ 300MCG	3	NM
NEUPOGEN INJ 480/0.8	3	NM
NEUPOGEN INJ 480MCG	3	NM
NIVESTYM INJ 300/0.5	2	NM
NIVESTYM INJ 300MCG	2	NM
NIVESTYM INJ 480/0.8	2	NM
NIVESTYM INJ 480MCG	2	NM
NYVEPRIA INJ 6/0.6ML	3	NM
PROCRIT INJ 2000/ML	3	NM
PROCRIT INJ 3000/ML	3	NM
PROCRIT INJ 4000/ML	3	NM
PROCRIT INJ 20000/ML	3	NM
PROCRIT INJ 40000/ML	3	NM
PROMACTA POW 12.5MG	3	SP
PROMACTA TAB 12.5MG	3	SP
PROMACTA TAB 25MG	3	SP
PROMACTA TAB 50MG	3	SP
PROMACTA TAB 75MG	3	SP
RELEUKO INJ 300MCG	3	SP, NM
RELEUKO INJ 480MCG	3	SP, NM
RETACRIT INJ 2000UNIT	2	NM
RETACRIT INJ 3000UNIT	2	NM
RETACRIT INJ 4000UNIT	2	NM
RETACRIT INJ 10000UNT	2	NM
RETACRIT INJ 40000UNT	2	NM
STIMUFEND INJ 6/0.6ML	3	SP, NM
UDENYCA INJ 6MG/0.6	2	NM

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Drug Name	Drug Tier	Requirements/Limits
UDENYCA INJ 6MG/.6ML	2	NM
ZARXIO INJ 300/0.5	3	NM
ZARXIO INJ 480/0.8	3	NM
ZIEXTENZO INJ 6/0.6ML	3	NM

STEM CELL MOBILIZERS

MOZOBIL INJ	3	SP, NM
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	1	SP, NM

HEMOSTATICS

HEMOSTATICS - SYSTEMIC

AMICAR SOL 0.25/ML	3	NM
AMICAR TAB 500MG	3	NM
AMICAR TAB 1000MG	3	NM
<i>aminocaproic acid tab 500 mg</i>	1	NM
<i>aminocaproic acid tab 1000 mg</i>	1	NM
<i>tranexamic acid tab 650 mg</i>	1	NM

HEMOSTATICS - TOPICAL

MONSELS FERR SOL SUBSULF	2	NM
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HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

BARBITURATE HYPNOTICS

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

HYPNOTICS - TRICYCLIC AGENTS

<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	1	QL (30 tabs every 30 days), NM
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	1	QL (30 tabs every 30 days), NM
SILENOR TAB 3MG	3	PA, QL (30 tabs every 30 days), NM
SILENOR TAB 6MG	3	PA, QL (30 tabs every 30 days), NM

NON-BARBITURATE HYPNOTICS

AMBIEN CR TAB 6.25MG	3	ST, PA, QL (30 tabs every 30 days), NM
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Drug Name	Drug Tier	Requirements/Limits
AMBIEN CR TAB 12.5MG	3	ST, PA, QL (30 tabs every 30 days), NM
AMBIEN TAB 5MG	3	ST, PA, QL (30 tabs every 30 days), NM
AMBIEN TAB 10MG	3	ST, PA, QL (30 tabs every 30 days), NM
DORAL TAB 15MG	3	QL (30 tabs every 30 days), NM
EDLUAR SUB 5MG	3	PA, QL (30 tabs every 30 days), NM
EDLUAR SUB 10MG	3	ST, PA, QL (30 tabs every 30 days), NM
<i>estazolam tab 1 mg</i>	1	QL (30 tabs every 30 days), NM
<i>estazolam tab 2 mg</i>	1	QL (30 tabs every 30 days), NM
<i>eszopiclone tab 1 mg</i>	1	QL (30 tabs every 30 days), NM
<i>eszopiclone tab 2 mg</i>	1	QL (30 tabs every 30 days), NM
<i>eszopiclone tab 3 mg</i>	1	QL (30 tabs every 30 days), NM
HALCION TAB 0.25MG	3	QL (30 tabs every 30 days), NM
LUNESTA TAB 1MG	3	ST, PA, QL (30 tabs every 30 days), NM
LUNESTA TAB 2MG	3	ST, PA, QL (30 tabs every 30 days), NM
LUNESTA TAB 3MG	3	ST, PA, QL (30 tabs every 30 days), NM
RESTORIL CAP 7.5MG	3	QL (30 caps every 30 days), NM
RESTORIL CAP 15MG	3	QL (30 caps every 30 days), NM
RESTORIL CAP 30MG	3	QL (30 caps every 30 days), NM
<i>temazepam cap 7.5 mg</i>	1	QL (30 caps every 30 days), NM
<i>temazepam cap 15 mg</i>	1	QL (30 caps every 30 days), NM
<i>temazepam cap 30 mg</i>	1	QL (30 caps every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>triazolam tab 0.25 mg</i>	1	QL (30 tabs every 30 days), NM
<i>triazolam tab 0.125 mg</i>	1	QL (30 tabs every 30 days), NM
<i>zaleplon cap 5 mg</i>	1	QL (30 caps every 30 days), NM
<i>zaleplon cap 10 mg</i>	1	QL (30 caps every 30 days), NM
<i>zolpidem tartrate sl tab 1.75 mg</i>	1	ST, PA, QL (30 ea every 30 days), NM
<i>zolpidem tartrate sl tab 3.5 mg</i>	1	PA, QL (30 ea every 30 days), NM
<i>zolpidem tartrate tab 5 mg</i>	1	QL (30 tabs every 30 days), NM
<i>zolpidem tartrate tab 10 mg</i>	1	QL (30 tabs every 30 days), NM
<i>zolpidem tartrate tab er 6.25 mg</i>	1	QL (30 tablets per 30 days), NM
<i>zolpidem tartrate tab er 12.5 mg</i>	1	QL (30 tablets per 30 days), NM
ZOLPIMIST SPR 5MG	3	ST, QL (1 unit every 30 days), NM
ZOLPIMIST SPR 5MG	3	ST, QL (2 units every 30 days), NM

OREXIN RECEPTOR ANTAGONISTS

BELSOMRA TAB 5MG	3	ST, QL (30 tabs every 30 days), NM
BELSOMRA TAB 10MG	3	ST, QL (30 tabs every 30 days), NM
BELSOMRA TAB 15MG	3	ST, QL (30 tabs every 30 days), NM
BELSOMRA TAB 20MG	3	ST, QL (30 tabs every 30 days), NM
DAYVIGO TAB 5MG	3	ST, QL (30 tabs every 30 days), NM
DAYVIGO TAB 10MG	3	ST, QL (30 tabs every 30 days), NM
QUVIVIQ TAB 25MG	3	ST, QL (30 tabs every 30 days), NM
QUVIVIQ TAB 50MG	3	ST, QL (30 tabs every 30 days), NM

SELECTIVE MELATONIN RECEPTOR AGONISTS

HETLIOZ CAP 20MG	3	SP, PA; LD
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Drug Name	Drug Tier	Requirements/Limits
HETLIOZ LQ SUS 4MG/ML	3	SP, PA; LD
<i>ramelteon tab 8 mg</i>	1	QL (30 tablets every 30 days), NM
ROZEREM TAB 8MG	2	ST, PA, QL (30 tablets every 30 days), NM
ROZEREM TAB 8MG	2	ST, PA, QL (30 tabs every 30 days), NM
<i>tasimelteon capsule 20 mg</i>	1	SP, PA; LD

LAXATIVES

LAXATIVE COMBINATIONS

<i>gavilyte-c</i>	1	NM
<i>gavilyte-g</i>	1	NM
GOLYTELY SOL	3	NM
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	NM
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	NM
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	1	AGE, NM
SUPREP BOWEL SOL PREP KIT	3	NM
SUTAB TAB	3	NM

LAXATIVES - MISCELLANEOUS

<i>constulose</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	

MACROLIDES

AZITHROMYCIN

<i>azithromycin for susp 100 mg/5ml</i>	1	NM
<i>azithromycin for susp 200 mg/5ml</i>	1	NM
<i>azithromycin powd pack for susp 1 gm</i>	1	NM
<i>azithromycin tab 250 mg</i>	1	NM
<i>azithromycin tab 500 mg</i>	1	NM
<i>azithromycin tab 600 mg</i>	1	NM
ZITHROMAX POW 1GM PAK	3	NM
ZITHROMAX SUS 100/5ML	3	NM
ZITHROMAX SUS 200/5ML	3	NM
ZITHROMAX TAB 500MG	3	NM
ZITHROMAX TAB TRI-PAK	3	NM
ZITHROMAX TAB Z-PAK	3	NM

CLARITHROMYCIN

<i>clarithromycin for susp 125 mg/5ml</i>	1	NM
<i>clarithromycin for susp 250 mg/5ml</i>	1	NM
<i>clarithromycin tab 250 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>clarithromycin tab 500 mg</i>	1	NM
<i>clarithromycin tab er 24hr 500 mg</i>	1	NM

ERYTHROMYCINS

<i>e.e.s. 400 tab 400mg</i>	1	NM
E.E.S. GRAN SUS 200/5ML	3	NM
<i>ery-tab tab 250mg ec</i>	1	NM
<i>ery-tab tab 500mg ec</i>	1	NM
ERYPED SUS 200/5ML	3	NM
ERYPED SUS 400/5ML	3	NM
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	1	NM
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	1	NM
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	NM
<i>erythromycin tab 250 mg</i>	1	NM
<i>erythromycin tab 500 mg</i>	1	NM
<i>erythromycin tab delayed release 333 mg</i>	1	NM

FIDAXOMICIN

DIFICID TAB 200MG	3	NM
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MEDICAL DEVICES AND SUPPLIES

DIABETIC SUPPLIES

DEXCOM G6 MIS RECEIVER	2	ST, QL (1 Receiver every 365 days), NM; **
DEXCOM G6 MIS SENSOR	2	ST, QL (1 Sensor every 10 days), NM; **
DEXCOM G6 MIS TRANSMIT	2	ST, QL (1 Transmitter every 90 days), NM; **
DEXCOM G7 MIS RECEIVER	2	QL (1 Receiver every 365 days), NM; **
DEXCOM G7 MIS SENSOR	2	QL (1 Sensor every 10 days), NM; **
FREESTY LIBR KIT 2 SENSOR	2	ST, QL (1 Sensor every 14 days), NM; **
FREESTY LIBR MIS 2 READER	2	ST, QL (1 Receiver every 365 days), NM; **
FREESTYLE KIT SENSOR	2	ST, QL (1 Sensor every 14 days), NM; **
FREESTYLE MIS READER	2	ST, QL (1 Receiver every 365 days), NM; **
OMNIPOD 5 G6 KIT INTRO	2	QL (1 per 365 days), NM
OMNIPOD 5 G6 MIS PODS	2	QL (10 pods per 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
OMNIPOD DASH KIT INTRO	2	QL (1 per 365 days), NM
OMNIPOD DASH KIT PDM	2	QL (1 kit / 365 days), NM
OMNIPOD DASH MIS PODS	2	QL (10 pods per 30 days), NM
OMNIPOD GO KIT 10UNT/DY	2	QL (10 pods/30 days), NM
OMNIPOD GO KIT 15UNT/DY	2	QL (10 pods/30 days), NM
OMNIPOD GO KIT 25UNT/DY	2	QL (10 pods/30 days), NM
OMNIPOD GO KIT 35UNT/DY	2	QL (10 pods/30 days), NM
OMNIPOD MIS CLASSIC	2	QL (10 pods per 30 days), NM
ONETOUCH KIT VERIO RE	2	OTC, NM
V-GO 20 KIT	2	QL (1 box / 30 days), NM
V-GO 30 KIT	2	QL (1 box / 30 days), NM
V-GO 40 KIT	2	QL (1 box / 30 days), NM

MIGRAINE PRODUCTS

CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

AIMOVIG INJ 70MG/ML	2	ST
AIMOVIG INJ 140MG/ML	2	ST
AJOVY INJ 225/1.5	2	ST
EMGALITY INJ 100MG/ML	2	ST
EMGALITY INJ 120MG/ML	2	ST
NURTEC TAB 75MG ODT	2	QL (16 tablets per 30 days), NM
UBRELVY TAB 50MG	2	QL (16 tabs every 30 days), NM
UBRELVY TAB 100MG	2	QL (16 tabs every 30 days), NM

MIGRAINE COMBINATIONS

<i>ergotamine w/ caffeine tab 1-100 mg</i>	1	QL (40 tabs every 28 days), NM
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	1	PA, QL (9 tablets per 30 days), NM
TREXIMET TAB 85-500MG	3	PA, QL (9 tablets per 30 days), NM

MIGRAINE PRODUCTS

<i>dihydroergotamine mesylate inj 1 mg/ml</i>	1	PA, QL (30 ampules every 30 days), NM
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	1	PA, QL (8 mL every 30 days), NM
ERGOMAR SUB 2MG	3	NM
MIGRANAL SPR 4MG/ML	3	PA, QL (8 mL every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POW 50MG	3	QL (9 packets every 45 days), NM
<i>diclofenac potassium (migraine) packet 50 mg</i>	1	QL (9 packets per 45 days), NM
ELYXYB SOL 120/4.8	3	QL (6 bottles per 45 days), NM
SEROTONIN AGONISTS		
<i>almotriptan malate tab 6.25 mg</i>	1	QL (12 tabs every 30 days), NM
<i>almotriptan malate tab 12.5 mg</i>	1	QL (8 ea every 30 days), NM
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL (12 tabs every 30 days), NM
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL (8 tabs every 30 days), NM
FROVA TAB 2.5MG	3	PA, QL (12 tabs every 30 days), NM
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	1	QL (12 tabs every 30 days), NM
IMITREX INJ 4MG/0.5	1	QL (12 injections every 30 days), NM
IMITREX INJ 4MG/0.5	3	PA, QL (12 injections every 30 days), NM
IMITREX INJ 6MG/0.5	3	PA, QL (8 injections every 30 days), NM
IMITREX SPR 5MG/ACT	3	PA, QL (12 inhalers every 30 days), NM
IMITREX SPR 20MG/ACT	3	PA, QL (12 inhalers every 30 days), NM
IMITREX TAB 25MG	3	PA, QL (18 tabs every 30 days), NM
IMITREX TAB 50MG	3	PA, QL (18 tabs every 30 days), NM
IMITREX TAB 100MG	3	PA, QL (9 tabs every 30 days), NM
MAXALT TAB 10MG	3	PA, QL (12 tabs every 30 days), NM
MAXALT-MLT TAB 10MG	3	PA, QL (12 tabs every 30 days), NM
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL (18 tabs every 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL (9 tabs every 30 days), NM
ONZETRA XSAI MIS 11MG	3	PA, QL (30 nosepieces every 30 days), NM
RELPAX TAB 20MG	3	PA, QL (12 tabs every 30 days), NM
RELPAX TAB 40MG	3	PA, QL (8 tabs every 30 days), NM
REYVOW TAB 50MG	3	PA, QL (4 tabs every 30 days), NM
REYVOW TAB 100MG	3	PA, QL (4 tabs every 30 days), NM
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	QL (12 tabs every 30 days), NM
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL (12 tabs every 30 days), NM
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (12 tabs every 30 days), NM
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (12 tabs every 30 days), NM
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (12 inhalers every 30 days), NM
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (12 inhalers every 30 days), NM
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (8 injections every 30 days), NM
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (12 injections every 30 days), NM
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (8 injections every 30 days), NM
<i>sumatriptan succinate tab 25 mg</i>	1	QL (18 tabs every 30 days), NM
<i>sumatriptan succinate tab 50 mg</i>	1	QL (18 tabs every 30 days), NM
<i>sumatriptan succinate tab 100 mg</i>	1	QL (9 tabs every 30 days), NM
TOSYMRA SOL 10MG	3	PA, QL (18 SPRAYS EVERY 30 DAYS), NM
ZEMBRACE SYM INJ 3/0.5ML	3	PA, QL (12 injections per 30 days), NM
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	1	QL (12 doses per 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 ea every 30 days), NM
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (8 tabs every 30 days), NM
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs every 30 days), NM
<i>zolmitriptan tab 5 mg</i>	1	QL (8 tabs every 30 days), NM
ZOMIG SPR 2.5MG	3	PA, QL (12 doses per 30 days), NM
ZOMIG SPR 5MG	3	PA, QL (12 doses per 30 days), NM
ZOMIG TAB 2.5MG	3	PA, QL (12 tabs every 30 days), NM
ZOMIG TAB 5MG	3	PA, QL (8 tabs every 30 days), NM

MINERALS & ELECTROLYTES

FLUORIDE

<i>nafrinse</i>	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	1	AGE
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	AGE
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	1	

MAGNESIUM

MAGNEBIND TAB 400	2	OTC, NM
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PHOSPHATE

K-PHOS TAB	2	
<i>phospho-trin k500</i>	1	

POTASSIUM

EFFER-K TAB 10MEQ	3	NM
EFFER-K TAB 20MEQ	3	NM
<i>klor-con</i>	1	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<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	

SODIUM

<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	NM
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ZINC

GALZIN CAP 25MG	2	NM
GALZIN CAP 50MG	2	NM

MISCELLANEOUS THERAPEUTIC CLASSES

CHELATING AGENTS

CUPRIMINE CAP 250MG	3	SP, PA, NM
CUVRIOR TAB 300MG	3	PA, NM
DEPEN TITRA TAB 250MG	3	SP, NM
<i>penicillamine cap 250 mg</i>	1	SP, PA, NM
<i>penicillamine tab 250 mg</i>	1	SP, NM
SYPRINE CAP 250MG	3	SP, PA, NM
<i>trientine hcl cap 250 mg</i>	1	SP, PA, NM
<i>trientine hcl cap 500 mg</i>	1	SP, PA, NM

IMMUNOMODULATORS

JOENJA TAB 70MG	3	PA
<i>lenalidomide cap 5 mg</i>	1	NM; **
<i>lenalidomide cap 10 mg</i>	1	NM; **
<i>lenalidomide cap 15 mg</i>	1	NM; **
<i>lenalidomide cap 20 mg</i>	1	NM; **
<i>lenalidomide cap 25 mg</i>	1	NM; **
<i>lenalidomide caps 2.5 mg</i>	1	NM; **
REVLIMID CAP 2.5MG	3	NM; **
REVLIMID CAP 5MG	3	NM; **
REVLIMID CAP 10MG	3	NM; **
REVLIMID CAP 15MG	3	NM; **
REVLIMID CAP 20MG	3	NM; **
REVLIMID CAP 25MG	3	NM; **

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Drug Name	Drug Tier	Requirements/Limits
THALOMID CAP 50MG	3	
THALOMID CAP 100MG	3	
THALOMID CAP 150MG	3	
THALOMID CAP 200MG	3	
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL CAP 0.5MG	3	
ASTAGRAF XL CAP 1MG	3	
ASTAGRAF XL CAP 5MG	3	
AZASAN	1	
<i>azathioprine tab 50 mg</i>	1	
CELLCEPT CAP 250MG	3	
CELLCEPT SUS 200MG/ML	3	
CELLCEPT TAB 500MG	3	
<i>cyclosporine cap 25 mg</i>	1	
<i>cyclosporine cap 100 mg</i>	1	
<i>cyclosporine modified cap 50 mg</i>	1	
<i>cyclosporine modified cap 100 mg</i>	1	
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	
ENSPRYNG INJ	3	SP, PA
ENVARUSUS XR TAB 0.75MG	3	
ENVARUSUS XR TAB 1MG	3	
ENVARUSUS XR TAB 4MG	3	
<i>everolimus tab 0.5 mg</i>	1	
<i>everolimus tab 0.25 mg</i>	1	
<i>everolimus tab 0.75 mg</i>	1	
<i>everolimus tab 1 mg</i>	1	
<i>gengraf</i>	1	
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	3	
MYFORTIC TAB 360MG	3	
NEORAL CAP 25MG	3	
NEORAL CAP 100MG	3	
NEORAL SOL 100MG/ML	3	
PROGRAF CAP 0.5MG	3	
PROGRAF CAP 1MG	3	

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Drug Name	Drug Tier	Requirements/Limits
PROGRAF CAP 5MG	3	
PROGRAF GRA 0.2MG	3	
PROGRAF GRA 1MG	3	
RAPAMUNE SOL 1MG/ML	3	
RAPAMUNE TAB 0.5MG	3	
RAPAMUNE TAB 1MG	3	
RAPAMUNE TAB 2MG	3	
REZUROCK TAB 200MG	3	PA
SANDIMMUNE CAP 25MG	3	
SANDIMMUNE CAP 100MG	3	
SANDIMMUNE SOL 100MG/ML	3	
<i>sirolimus tab 0.5 mg</i>	1	
<i>sirolimus tab 1 mg</i>	1	
<i>sirolimus tab 2 mg</i>	1	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	
<i>tacrolimus cap 5 mg</i>	1	
ZORTRESS TAB 0.5MG	3	
ZORTRESS TAB 0.25MG	3	
ZORTRESS TAB 0.75MG	3	
ZORTRESS TAB 1MG	3	
IRRIGATION SOLUTIONS		
<i>water for irrigation, sterile irrigation soln</i>	1	NM
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS		
VIJOICE TAB 50MG	3	SP, PA
VIJOICE TAB 125MG	3	SP, PA
VIJOICE TAB 250MG	3	SP, PA
POTASSIUM REMOVING AGENTS		
LOKELMA PAK 5GM	3	
LOKELMA PAK 10GM	3	
<i>sodium polystyrene sulfonate powder</i>	1	NM
<i>sps</i>	1	NM
<i>sps sus 15gm/60</i>	1	NM
VELTASSA POW 8.4GM	3	
VELTASSA POW 16.8GM	3	
VELTASSA POW 25.2GM	3	
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP 50MG	3	PA
ZOKINVY CAP 75MG	3	PA
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 200MG/ML	3	SP

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Drug Name	Drug Tier	Requirements/Limits
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl viscous soln 2%</i>	1	NM
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	NM
<i>nystatin susp 100000 unit/ml</i>	1	NM
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	NM
DEBACTEROL SOL 30-50%	2	NM
<i>periogard sol 0.12%</i>	1	NM
DENTAL PRODUCTS		
<i>clinpro 5000</i>	1	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
PREVDNT 5000 GEL 1.1-5%	3	NM
PREVIDENT GEL 1.1%	3	
PREVIDENT SOL 0.2%	3	
<i>sf 5000 plus</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>oralone dental paste</i>	1	NM
<i>triamcinolone acetonide dental paste 0.1%</i>	1	NM
THROAT PRODUCTS - MISC.		
<i>cevimeline hcl cap 30 mg</i>	1	
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
MULTIVITAMINS		
MULTIPLE VITAMINS W/ MINERALS		
MULTI VITAMN TAB MINERALS	3	OTC, NM
PED MV W/ FLUORIDE		
<i>multivit/fl chw 0.5mg</i>	1	NM
<i>multivitamin with fluorid</i>	1	OTC, NM
<i>multivitamin/fluoride</i>	1	NM
<i>tri-vit/fluo dro 0.5mg</i>	1	NM
<i>tri-vit/fluo dro 0.25mg</i>	1	NM
PRENATAL VITAMINS		
CITRANATAL MIS B-CALM	3	NM
CONCEPT OB CAP	3	NM
NEONATAL 19 TAB	3	NM
NEONATAL FE TAB	3	NM
NEONATAL/DHA MIS	3	NM
SE-NATAL 19 TAB	3	NM

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Drug Name	Drug Tier	Requirements/Limits
VITAFOL-ONE CAP	3	NM
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen oral soln 5 mg/5ml</i>	1	NM
<i>baclofen oral soln 10 mg/5ml</i>	1	NM
<i>baclofen susp 25 mg/5ml</i>	1	NM
<i>baclofen tab 5 mg</i>	1	NM
<i>baclofen tab 10 mg</i>	1	NM
<i>baclofen tab 20 mg</i>	1	NM
<i>carisoprodol tab 250 mg</i>	1	NM
<i>carisoprodol tab 350 mg</i>	1	NM
<i>cyclobenzaprine hcl tab 5 mg</i>	1	NM
<i>cyclobenzaprine hcl tab 10 mg</i>	1	NM
<i>fexmid</i>	1	NM
FLEQSUVY SUS 25MG/5ML	3	NM
LYVISPAH GRA 5MG	3	NM
LYVISPAH GRA 10MG	3	NM
LYVISPAH GRA 20MG	3	NM
<i>methocarbamol tab 500 mg</i>	1	NM
<i>methocarbamol tab 750 mg</i>	1	NM
<i>orphenadrine citrate inj 30 mg/ml</i>	1	NM
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	NM
OZOBAX DS SOL 10MG/5ML	3	NM
OZOBAX SOL 5MG/5ML	3	NM
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	NM
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	NM
ZANAFLEX TAB 4MG	3	NM
DIRECT MUSCLE RELAXANTS		
DANTRIUM CAP 25MG	3	NM
<i>dantrolene sodium cap 25 mg</i>	1	NM
<i>dantrolene sodium cap 50 mg</i>	1	NM
<i>dantrolene sodium cap 100 mg</i>	1	NM
MUSCLE RELAXANT COMBINATIONS		
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	1	NM
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	NM
DYMISTA SPR 137-50	3	NM
RYALTRIS SPR 665-25	3	NM

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Drug Name	Drug Tier	Requirements/Limits
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	NM
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	NM
<i>olopatadine hcl nasal soln 0.6%</i>	1	NM
PATANASE SPR 0.6%	3	NM
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL STEROIDS		
BECONASE AQ SUS 0.042%	3	NM
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	NM
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	NM
OMNARIS SPR	3	NM
QNASL AER 80MCG	3	NM
QNASL CHILD SPR 40MCG	3	NM
XHANCE MIS 93MCG	3	NM
ZETONNA AER 37MCG	3	NM
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA ORS SUS 105/5ML	3	SP, PA
RELYVRIO PAK 3-1GM	3	SP, PA, NM
<i>riluzole tab 50 mg</i>	1	
TIGLUTIK SUS 50/10ML	3	PA
FRIEDRICH'S ATAXIA AGENTS		
SKYCLARYS CAP 50MG	3	PA
RETT SYNDROME AGENTS		
DAYBUE SOL 200MG/ML	3	PA
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI SOL	3	SP, PA, QL (240 mL every 30 days); LD
NUTRIENTS		
LIPIDS		
DOJOLVI LIQ 100%	3	SP, PA
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT MIS 5MG OP	3	NM
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl ophth soln 0.5%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
BETIMOL SOL 0.25%	3	
BETOPTIC-S SUS 0.25% OP	3	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	1	SP
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	3	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 2-0.5%OP	3	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	1	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	1	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	
TIMOPTIC-XE SOL 0.25% OP	3	
CYCLOPLEGIC MYDRIATICS		
<i>atropine sulfate ophth oint 1%</i>	1	
<i>atropine sulfate ophth soln 1%</i>	1	
CYCLOGYL SOL 0.5% OP	3	
CYCLOGYL SOL 1% OP	3	
CYCLOGYL SOL 2% OP	3	
ISOPTO ATROP SOL 1% OP	3	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
MIOTICS		
PHOSPHOLINE SOL 0.125%OP	2	
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
VUITY SOL 1.25% OP	3	
OPHTHALMIC ADRENERGIC AGENTS		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	2	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	NM
<i>brimonidine tartrate ophth soln 0.1%</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
IOPIDINE SOL 1% OP	3	NM
SIMBRINZA SUS 1-0.2%	3	
OPHTHALMIC ANTI-INFECTIVES		
AZASITE SOL 1%	3	NM
<i>bacitracin ophth oint 500 unit/gm</i>	1	NM
<i>bacitracin-polymyxin b ophth oint</i>	1	NM
BESIVANCE SUS 0.6%	3	NM
CILOXAN OIN 0.3% OP	3	NM
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	NM
<i>erythromycin ophth oint 5 mg/gm</i>	1	NM
<i>gatifloxacin ophth soln 0.5%</i>	1	NM
<i>gentamicin sulfate ophth soln 0.3%</i>	1	NM
<i>levofloxacin ophth soln 0.5%</i>	1	NM
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	NM
NATACYN SUS 5% OP	3	NM
<i>neo-polycin</i>	1	NM
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	NM
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	NM
OCUFLOX DRO 0.3% OP	3	NM
<i>ofloxacin ophth soln 0.3%</i>	1	NM
<i>polycin</i>	1	NM
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	NM
POLYTRIM SOL OP	3	NM
<i>sulfacetamide sodium ophth oint 10%</i>	1	NM
<i>sulfacetamide sodium ophth soln 10%</i>	1	NM
<i>tobramycin ophth soln 0.3%</i>	1	NM
TOBREX OIN 0.3% OP	3	NM
<i>trifluridine ophth soln 1%</i>	1	NM
VIGAMOX DRO 0.5%	3	NM
ZIRGAN GEL 0.15%	3	NM
ZYMAXID SOL 0.5%	3	NM
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine (ophth) emulsion 0.05%</i>	1	
RESTASIS EMU 0.05% OP	2	
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	2	

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Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA SOL 0.02%	2	
ROCKLATAN DRO	2	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE SOL 20MCG/ML	3	SP, PA, NM; LD
OPHTHALMIC STEROIDS		
ALREX SUS 0.2%	3	NM
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	NM
BLEPHAMIDE SUS OP	3	NM
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	NM
<i>difluprednate ophth emulsion 0.05%</i>	1	NM
DUREZOL EMU 0.05%	3	NM
EYSUVIS DRO 0.25%	3	NM
FLAREX SUS 0.1% OP	3	NM
<i>fluorometholone ophth susp 0.1%</i>	1	NM
FML FORTE SUS 0.25% OP	3	NM
INVELTYS SUS 1%	3	NM
LOTEMAX GEL 0.5%	2	NM
LOTEMAX OIN 0.5%	2	NM
LOTEMAX SM GEL 0.38%	2	NM
LOTEMAX SUS 0.5%	3	NM
<i>loteprednol etabonate ophth gel 0.5%</i>	1	NM
<i>loteprednol etabonate ophth susp 0.2%</i>	1	NM
MAXIDEX SUS 0.1% OP	3	NM
MAXITROL OIN 0.1% OP	3	NM
MAXITROL SUS 0.1% OP	3	NM
<i>neo-polycin hc</i>	1	NM
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	NM
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	NM
<i>neomycin-polymyxin-hc ophth susp</i>	1	NM
PRED MILD SUS 0.12% OP	3	NM
PRED SOD PHO SOL 1% OP	3	NM
<i>prednisolone acetate ophth susp 1%</i>	1	NM
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	NM
TOBRADEX OIN 0.3-0.1%	3	NM
TOBRADEX ST SUS 0.3-0.05	3	NM
TOBRADEX SUS 0.3-0.1%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	NM
ZYLET SUS 0.5-0.3%	3	NM
OPHTHALMICS - MISC.		
ACULAR LS SOL 0.4%	3	NM
ACULAR SOL 0.5% OP	3	NM
ALOCRI SOL 2%	3	NM
ALOMIDE SOL 0.1% OP	3	NM
<i>azelastine hcl ophth soln 0.05%</i>	1	NM
<i>bepotastine besilate ophth soln 1.5%</i>	1	NM
BEPREVE DRO 1.5%	3	NM
<i>brinzolamide ophth susp 1%</i>	1	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	1	NM
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	NM
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	NM
BROMSITE DRO 0.075%	3	NM
<i>cromolyn sodium ophth soln 4%</i>	1	NM
CYSTADROPS SOL 0.37%	3	SP, PA; LD
CYSTARAN SOL 0.44%	3	SP, PA; LD
<i>diclofenac sodium ophth soln 0.1%</i>	1	NM
<i>dorzolamide hcl ophth soln 2%</i>	1	
<i>epinastine hcl ophth soln 0.05%</i>	1	NM
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	NM
ILEVRO DRO 0.3% OP	3	NM
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	NM
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	NM
LASTACFT SOL 0.25%	3	OTC, NM
NEVANAC SUS 0.1% OP	3	NM
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	NM
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	NM
PATADAY SOL 0.2%	3	OTC, NM
PATADAY SOL 0.7%	3	OTC, NM
PROLENSA SOL 0.07%	3	NM
UPNEEQ SOL 0.1%	3	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
LUMIGAN SOL 0.01%	2	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
TRAVATAN Z DRO 0.004%	3	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
XALATAN SOL 0.005%	3	
XELPROS EMU 0.005%	3	
ZIOPTAN DRO 0.0015%	3	

OTIC AGENTS

OTIC AGENTS - MISCELLANEOUS

<i>acetic acid otic soln 2%</i>	1	NM
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OTIC ANTI-INFECTIVES

CETRAXAL SOL 0.2%	3	NM
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	NM
<i>ofloxacin otic soln 0.3%</i>	1	NM

OTIC COMBINATIONS

<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	NM
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	1	NM
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	NM
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	NM

OTIC STEROIDS

DERMOTIC OIL 0.01%	3	NM
<i>flac</i>	1	NM
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	NM
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	NM

OXYTOCICS

OXYTOCICS

<i>methergine</i>	1	QL (28 tabs every year), NM
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PASSIVE IMMUNIZING AND TREATMENT AGENTS

IMMUNE SERUMS

HEPAGAM B INJ	2	SP, NM
HYPERHEP B INJ	2	SP, NM
NABI-HB INJ	2	SP, NM
RHOPHYLAC INJ 1500/2ML	2	SP, NM
WINRHO SDF INJ 1500UNIT	2	SP, NM

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Drug Name	Drug Tier	Requirements/Limits
WINRHO SDF INJ 2500UNIT	2	SP, NM
WINRHO SDF INJ 5000UNIT	2	SP, NM
WINRHO SDF INJ 15000UNT	2	SP, NM

PENICILLINS

AMINOPENICILLINS

<i>amoxicillin (trihydrate) cap 250 mg</i>	1	NM
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	NM
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	NM
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	NM
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	NM
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	NM
<i>ampicillin cap 500 mg</i>	1	NM

NATURAL PENICILLINS

<i>penicillin v potassium for soln 125 mg/5ml</i>	1	NM
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	NM
<i>penicillin v potassium tab 250 mg</i>	1	NM
<i>penicillin v potassium tab 500 mg</i>	1	NM

PENICILLIN COMBINATIONS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	NM
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1	NM
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	NM
AUGMENTIN SUS ES-600	3	NM
AUGMENTIN TAB 500MG	3	NM

PENICILLINASE-RESISTANT PENICILLINS

<i>dicloxacillin sodium cap 250 mg</i>	1	NM
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Drug Name	Drug Tier	Requirements/Limits
<i>dicloxacillin sodium cap 500 mg</i>	1	NM
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>megestrol acetate susp 625 mg/5ml</i>	1	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	NM
PROMETRIUM CAP 100MG	3	
PROMETRIUM CAP 200MG	3	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
LUCEMYRA TAB 0.18MG	3	QL (168 tabs every 180 days), NM
ANTI-CATAPLECTIC AGENTS		
XYREM SOL 500MG/ML	3	PA, QL (540 ML every 30 days), NM; LD
XYWAV SOL 0.5GM/ML	3	PA, QL (540 ML every 30 days), NM
ANTIDEMENTIA AGENTS		
ADLARITY DIS 5MG/DAY	3	
ADLARITY DIS 10MG/DAY	3	
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	
ARICEPT TAB 23MG	3	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	

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Drug Name	Drug Tier	Requirements/Limits
EXELON DIS 13.3/24	3	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	1	
<i>memantine hcl cap er 24hr 21 mg</i>	1	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	1	NM
NAMENDA TAB 5-10MG	3	NM
NAMENDA TAB 5MG	3	
NAMENDA TAB 10MG	3	
NAMENDA XR CAP 7MG	3	
NAMENDA XR CAP 14MG	3	
NAMENDA XR CAP 21MG	3	
NAMENDA XR CAP 28MG	3	
NAMZARIC CAP	3	NM
NAMZARIC CAP 7-10MG	3	
NAMZARIC CAP 14-10MG	3	
NAMZARIC CAP 21-10MG	3	
NAMZARIC CAP 28-10MG	3	
RAZADYNE ER CAP 8MG	3	
RAZADYNE ER CAP 16MG	3	
RAZADYNE ER CAP 24MG	3	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	1	
COMBINATION PSYCHOTHERAPEUTICS		
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<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	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
FIBROMYALGIA AGENTS		
SAVELLA MIS TITR PAK	3	NM
SAVELLA TAB 12.5MG	3	
SAVELLA TAB 25MG	3	
SAVELLA TAB 50MG	3	
SAVELLA TAB 100MG	3	
HYPOLACTIVE SEXUAL DESIRE DISORDER (HSDD) AGENTS		
ADDYI TAB 100MG	3	PA
VYLEESI INJ 1.75/0.3	3	PA, NM
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO TAB 6MG	2	SP, PA
AUSTEDO TAB 9MG	2	SP, PA
AUSTEDO TAB 12MG	2	SP, PA
AUSTEDO XR TAB 6MG	2	SP, PA
AUSTEDO XR TAB 12MG	2	SP, PA
AUSTEDO XR TAB 24MG	2	SP, PA
AUSTEDO XR TAB TITR KIT	2	SP, PA, NM
INGREZZA CAP 40-80MG	3	SP, PA, NM; LD
INGREZZA CAP 40MG	3	SP, PA; LD
INGREZZA CAP 60MG	3	SP, PA; LD
INGREZZA CAP 80MG	3	SP, PA; LD
<i>tetrabenazine tab 12.5 mg</i>	1	SP, PA
<i>tetrabenazine tab 25 mg</i>	1	SP, PA
XENAZINE TAB 12.5MG	3	SP, PA
XENAZINE TAB 25MG	3	SP, PA
MULTIPLE SCLEROSIS AGENTS		
AMPYRA TAB 10MG	3	SP
AUBAGIO TAB 7MG	3	SP
AUBAGIO TAB 14MG	3	SP
AVONEX PEN KIT 30MCG	2	SP
AVONEX PREFL KIT 30MCG	2	SP
BAFIERTAM CAP 95MG	2	SP
BETASERON INJ 0.3MG	2	SP
COPAXONE INJ 20MG/ML	2	SP
COPAXONE INJ 40MG/ML	2	SP
<i>dalfampridine tab er 12hr 10 mg</i>	1	SP

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Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate capsule delayed release 120 mg</i>	1	SP
<i>dimethyl fumarate capsule delayed release 240 mg</i>	1	SP
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	1	NM
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	1	SP
GILENYA CAP 0.5MG	3	SP
GILENYA CAP 0.25MG	3	SP
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	1	SP
<i>glatopa</i>	1	SP
KESIMPTA INJ 20/.4ML	3	SP, PA
MAVENCLAD PAK 10MG(4)	3	SP, PA, NM
MAVENCLAD PAK 10MG(5)	3	SP, PA, NM
MAVENCLAD PAK 10MG(6)	3	SP, PA, NM
MAVENCLAD PAK 10MG(7)	3	SP, PA, NM
MAVENCLAD PAK 10MG(8)	3	SP, PA, NM
MAVENCLAD PAK 10MG(9)	3	SP, PA, NM
MAVENCLAD PAK 10MG(10)	3	SP, PA, NM
MAYZENT PAK STARTER	2	SP, NM
MAYZENT TAB 0.25MG	2	SP
MAYZENT TAB 1MG	2	SP
MAYZENT TAB 2MG	2	SP
PLEGRIDY INJ	2	SP
PLEGRIDY INJ PEN	2	SP
PONVORY TAB 20MG	3	SP, PA
PONVORY TAB STARTER	3	SP, PA, NM
REBIF INJ 22/0.5	2	SP
REBIF INJ 44/0.5	2	SP
REBIF REBIDO INJ 22/0.5	2	SP
REBIF REBIDO INJ 44/0.5	2	SP
REBIF TITRTN INJ PACK	2	SP
<i>teriflunomide tab 7 mg</i>	1	SP
<i>teriflunomide tab 14 mg</i>	1	SP
VUMERITY CAP 231MG	2	SP
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
<i>gabapentin (once-daily) tab 300 mg</i>	1	PA
<i>gabapentin (once-daily) tab 600 mg</i>	1	PA
GRALISE TAB 300MG	3	PA
GRALISE TAB 450MG	3	PA
GRALISE TAB 600MG	3	PA

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Drug Name	Drug Tier	Requirements/Limits
GRALISE TAB 750MG	3	PA
GRALISE TAB 900MG	3	PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA CAP 20-10MG	3	PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT TAB 300MG ER	3	PA
HORIZANT TAB 600MG ER	3	PA
SMOKING DETERRENTS		
APO-VARENICL TAB 0.5MG	2	NM; Maximum 168 day supply per calendar year.
APO-VARENICL TAB 1MG	2	NM; Maximum 168 day supply per calendar year.
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine polacrilex</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
<i>eql nicotine polacrilex</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
<i>goodsense nicotine polacr</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 7MG/24HR	3	OTC, NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 14MG/24H	3	OTC, NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 21MG/24H	3	OTC, NM; Maximum 168 day supply per calendar year.
NICORETTE LOZ 2MG MINT	3	OTC, NM; Maximum 168 day supply per calendar year.
NICORETTE LOZ 4MG MINT	3	OTC, NM; Maximum 168 day supply per calendar year.

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Drug Name	Drug Tier	Requirements/Limits
NICORETTE ST GUM 2MG ORIG	3	OTC, NM; Maximum 168 day supply per calendar year.
NICORETTE ST GUM 4MG ORIG	3	OTC, NM; Maximum 168 day supply per calendar year.
NICOTINE SYS KIT TRANSDER	3	OTC, NM; Maximum 168 day supply per calendar year.
<i>nicotine td patch 24hr 7 mg/24hr</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
NICOTROL INH	3	NM; Maximum 168 day supply per calendar year.
NICOTROL NS SPR 10MG/ML	3	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine gum 2mg</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
<i>thrive</i>	1	OTC, NM; Maximum 168 day supply per calendar year.
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	1	NM; Maximum 168 day supply per calendar year.
<i>varenicline tartrate tab 1 mg (base equiv)</i>	1	NM; Maximum 168 day supply per calendar year.
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	1	NM
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
TEGSEDI INJ 284/1.5	3	SP, PA; LD
VASOMOTOR SYMPTOM AGENTS		
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	
RESPIRATORY AGENTS - MISC.		
CYSTIC FIBROSIS AGENTS		
BRONCHITOL CAP 40MG	3	SP
KALYDECO GRA 5.8MG	3	PA
KALYDECO GRA 13.4MG	3	PA; LD
KALYDECO PAK 50MG	3	SP, PA; LD
KALYDECO PAK 75MG	3	SP, PA; LD
KALYDECO TAB 150MG	3	SP, PA; LD
ORKAMBI GRA 75-94MG	3	SP, PA
ORKAMBI GRA 100-125	3	SP, PA; LD

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Drug Name	Drug Tier	Requirements/Limits
ORKAMBI GRA 150-188	3	SP, PA; LD
ORKAMBI TAB 100-125	3	SP, PA; LD
ORKAMBI TAB 200-125	3	SP, PA; LD
PULMOZYME SOL 1MG/ML	2	SP, PA
SYMDEKO TAB 100-150	3	SP, PA; LD
TRIKAFTA PAK 59.5MG	3	SP, PA
TRIKAFTA PAK 75MG	3	SP, PA
TRIKAFTA TAB	3	SP, PA; LD

PULMONARY FIBROSIS AGENTS

ESBRIET CAP 267MG	3	SP, PA
ESBRIET TAB 267MG	3	SP, PA
ESBRIET TAB 801MG	3	SP, PA
OFEV CAP 100MG	3	SP, PA
OFEV CAP 150MG	3	SP, PA
<i>pirfenidone cap 267 mg</i>	1	SP, PA
<i>pirfenidone tab 267 mg</i>	1	SP, PA
<i>pirfenidone tab 801 mg</i>	1	SP, PA

SULFONAMIDES

SULFONAMIDES

<i>sulfadiazine tab 500 mg</i>	1	NM
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TETRACYCLINES

AMINOMETHYLCYCLINES

NUZYRA TAB 150MG	3	NM
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TETRACYCLINES

<i>avidoxy</i>	1	NM
<i>coremino</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>demeclocycline hcl tab 150 mg</i>	1	NM
<i>demeclocycline hcl tab 300 mg</i>	1	NM
DORYX MPC TAB 120MG	3	NM
DORYX TAB 50MG	3	NM
DORYX TAB 200MG	3	NM
<i>doxycycline hyclate cap 50 mg</i>	1	NM
<i>doxycycline hyclate cap 100 mg</i>	1	NM
<i>doxycycline hyclate tab 20 mg</i>	1	NM
<i>doxycycline hyclate tab 100 mg</i>	1	NM
<i>doxycycline hyclate tab delayed release 50 mg</i>	1	NM
<i>doxycycline hyclate tab delayed release 75 mg</i>	1	NM
<i>doxycycline hyclate tab delayed release 100 mg</i>	1	NM
<i>doxycycline hyclate tab delayed release 150 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline hyclate tab delayed release 200 mg</i>	1	NM
<i>doxycycline monohydrate cap 50 mg</i>	1	NM
<i>doxycycline monohydrate cap 75 mg</i>	1	NM
<i>doxycycline monohydrate cap 100 mg</i>	1	NM
<i>doxycycline monohydrate cap 150 mg</i>	1	NM
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	NM
<i>doxycycline monohydrate tab 50 mg</i>	1	NM
<i>doxycycline monohydrate tab 75 mg</i>	1	NM
<i>doxycycline monohydrate tab 100 mg</i>	1	NM
<i>doxycycline monohydrate tab 150 mg</i>	1	NM
<i>minocycline hcl cap 50 mg</i>	1	NM
<i>minocycline hcl cap 75 mg</i>	1	NM
<i>minocycline hcl cap 100 mg</i>	1	NM
<i>minocycline hcl tab er 24hr 55 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 65 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 80 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 90 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 105 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 115 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>minocycline hcl tab er 24hr 135 mg</i>	1	QL (QVT= 84 capsules per 365 days), NM
<i>mondoxylene nl</i>	1	NM
SOLODYN TAB 55MG	3	QL (QVT= 84 capsules per 365 days), NM
SOLODYN TAB 65MG	3	QL (QVT= 84 capsules per 365 days), NM
SOLODYN TAB 80MG	3	QL (QVT= 84 capsules per 365 days), NM
SOLODYN TAB 105MG	3	QL (QVT= 84 capsules per 365 days), NM
SOLODYN TAB 115MG	3	QL (QVT= 84 capsules per 365 days), NM
<i>tetracycline hcl cap 250 mg</i>	1	NM
<i>tetracycline hcl cap 500 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
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THYROID AGENTS

ANTITHYROID AGENTS

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

THYROID HORMONES

ADTHYZA TAB 16.25MG	3	
ADTHYZA TAB 32.5MG	3	
ADTHYZA TAB 65MG	3	
ADTHYZA TAB 97.5MG	3	
ADTHYZA TAB 130MG	3	
ARMOUR THYRO TAB 15MG	3	
ARMOUR THYRO TAB 30MG	3	
ARMOUR THYRO TAB 60MG	3	
ARMOUR THYRO TAB 90MG	1	
ARMOUR THYRO TAB 90MG	3	
ARMOUR THYRO TAB 120MG	3	
ARMOUR THYRO TAB 180MG	3	
ARMOUR THYRO TAB 240MG	3	
ARMOUR THYRO TAB 300MG	3	
CYTOMEL TAB 5MCG	3	
CYTOMEL TAB 25MCG	3	
CYTOMEL TAB 50MCG	3	
ERMEZA SOL 150/5ML	3	
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine sodium cap 13 mcg</i>	1	
<i>levothyroxine sodium cap 25 mcg</i>	1	
<i>levothyroxine sodium cap 50 mcg</i>	1	
<i>levothyroxine sodium cap 75 mcg</i>	1	
<i>levothyroxine sodium cap 88 mcg</i>	1	
<i>levothyroxine sodium cap 100 mcg</i>	1	
<i>levothyroxine sodium cap 112 mcg</i>	1	
<i>levothyroxine sodium cap 125 mcg</i>	1	
<i>levothyroxine sodium cap 137 mcg</i>	1	
<i>levothyroxine sodium cap 150 mcg</i>	1	
<i>levothyroxine sodium cap 175 mcg</i>	1	
<i>levothyroxine sodium cap 200 mcg</i>	1	
<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	

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Drug Name	Drug Tier	Requirements/Limits
<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>levoxyl</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	
<i>np thyroid 15</i>	1	
<i>np thyroid 120</i>	1	
NP THYROID TAB 30MG	1	
NP THYROID TAB 60MG	1	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
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 37.5MCG	3	
TIROSINT CAP 44MCG	3	
TIROSINT CAP 50MCG	3	
TIROSINT CAP 62.5MCG	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	
TIROSINT CAP 175MCG	3	
TIROSINT CAP 200	3	

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Drug Name	Drug Tier	Requirements/Limits
TIROSINT-SOL SOL 13MCG/ML	3	
TIROSINT-SOL SOL 25MCG/ML	3	
TIROSINT-SOL SOL 37.5/ML	3	
TIROSINT-SOL SOL 44MCG/ML	3	
TIROSINT-SOL SOL 50MCG/ML	3	
TIROSINT-SOL SOL 62.5/ML	3	
TIROSINT-SOL SOL 75MCG/ML	3	
TIROSINT-SOL SOL 88MCG/ML	3	
TIROSINT-SOL SOL 100MCG	3	
TIROSINT-SOL SOL 112MCG	3	
TIROSINT-SOL SOL 125MCG	3	
TIROSINT-SOL SOL 137MCG	3	
TIROSINT-SOL SOL 150MCG	3	
TIROSINT-SOL SOL 175MCG	3	
TIROSINT-SOL SOL 200MCG	3	
<i>unithroid</i>	1	

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTISPASMODICS

ANASPAZ TAB 0.125MG	3	
CUVPOSA SOL 1MG/5ML	3	
<i>dicyclomine hcl cap 10 mg</i>	1	NM
<i>dicyclomine hcl tab 20 mg</i>	1	NM
GLYCATE TAB 1.5MG	3	NM
GLYCOPYRROLA TAB 1.5MG	3	NM
<i>glycopyrrolate inj 0.2 mg/ml</i>	1	NM
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	1	NM
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	1	NM
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	1	NM
<i>glycopyrrolate oral soln 1 mg/5ml</i>	1	NM
<i>glycopyrrolate tab 1 mg</i>	1	NM
<i>glycopyrrolate tab 2 mg</i>	1	NM
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
LEVBID TAB 0.375 ER	3	
LEVSIN TAB 0.125MG	3	
LEVSIN/SL SUB 0.125MG	3	
<i>methscopolamine bromide tab 2.5 mg</i>	1	NM
<i>methscopolamine bromide tab 5 mg</i>	1	NM
<i>nulev</i>	1	
<i>oscimin</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
H-2 ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	NM
<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	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	
MISC. ANTI-ULCER		
CARAFATE SUS 1GM/10ML	3	
CARAFATE TAB 1GM	3	
<i>sucralfate susp 1 gm/10ml</i>	1	
<i>sucralfate tab 1 gm</i>	1	
PROTON PUMP INHIBITORS		
ACIPHEX TAB 20MG	3	PA, QL (60 tabs every 30 days)
DEXILANT CAP 30MG DR	3	PA, QL (60 capsules every 30 days)
DEXILANT CAP 60MG DR	3	PA, QL (60 capsules every 30 days)
<i>dexlansoprazole cap delayed release 30 mg</i>	1	QL (60 capsules every 30 days)
<i>dexlansoprazole cap delayed release 60 mg</i>	1	QL (60 capsules every 30 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	QL (60 caps every 30 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	QL (60 caps every 30 days)
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	1	QL (60 packets every 30 days)
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	1	QL (60 packets every 30 days)
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	1	QL (60 packets every 30 days)
FIRST PANTPR SUS 4MG/ML	3	AGE; PA Required for those 7 years and older

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Drug Name	Drug Tier	Requirements/Limits
<i>lansoprazole cap delayed release 15 mg</i>	1	QL (60 caps every 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	1	QL (60 caps every 30 days)
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	1	QL (60 ea every 30 days)
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	1	QL (60 ea every 30 days)
NEXIUM CAP 20MG	3	PA, QL (60 caps every 30 days)
NEXIUM CAP 40MG	3	PA, QL (60 caps every 30 days)
NEXIUM GRA 2.5MG DR	3	PA, QL (60 packets every 30 days)
NEXIUM GRA 5MG DR	3	PA, QL (60 packets every 30 days)
NEXIUM GRA 10MG DR	3	PA, QL (60 packets every 30 days)
NEXIUM GRA 20MG DR	3	PA, QL (60 packets every 30 days)
NEXIUM GRA 40MG DR	3	PA, QL (60 packets every 30 days)
OMEPRAZOLE + SUS SYRSPEND	1	AGE; PA Required for those 7 years and older
<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	QL (60 tabs every 30 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (60 tabs every 30 days)
<i>pantoprazole sodium for delayed release susp packet 40 mg</i>	1	QL (60 packets every 30 days)
PREVACID CAP 30MG DR	3	PA, QL (60 caps every 30 days)
PREVACID TAB 15MG STB	3	QL (60 ea every 30 days)
PREVACID TAB 30MG STB	3	QL (60 ea every 30 days)
PRILOSEC POW 2.5MG	3	PA, QL (60 packets every 30 days)
PRILOSEC POW 10MG	3	PA, QL (60 packets every 30 days)
PROTONIX PAK 40MG	3	PA, QL (60 packets every 30 days)
PROTONIX TAB 20MG	3	PA, QL (60 tabs every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
PROTONIX TAB 40MG	3	PA, QL (60 tabs every 30 days)
RABEPRAZOLE CAP 10MG DR	3	PA, QL (60 capsules every 30 days)
<i>rabeprazole sodium ec tab 20 mg</i>	1	QL (60 tabs every 30 days)

ULCER DRUGS - PROSTAGLANDINS

CYTOTEC TAB 100MCG	3	
CYTOTEC TAB 200MCG	3	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	

ULCER THERAPY COMBINATIONS

<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	1	NM
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	1	NM
<i>omeppi</i>	1	PA, QL (60 caps every 30 days)
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	1	PA
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	1	PA
PYLERA CAP	3	NM
TALICIA CAP	3	NM
VOQUEZNA PAK DUAL PAK	3	NM
VOQUEZNA PAK TRIP PK	3	NM
ZEGERID CAP 40-1100	3	PA, QL (60 caps every 30 days)
ZEGERID POW 20-1680	3	PA
ZEGERID POW 40-1680	3	PA

URINARY ANTI-INFECTIVES

URINARY ANTI-INFECTIVES

MACROBID CAP 100MG	3	NM
MACRODANTIN CAP 25MG	3	NM
MACRODANTIN CAP 50MG	3	NM
MACRODANTIN CAP 100MG	3	NM
<i>methenamine hippurate tab 1 gm</i>	1	NM
MONUROL PAK GRANULES	3	NM
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	NM
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	NM
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	NM
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
DETROL LA CAP 2MG	3	
DETROL LA CAP 4MG	3	
DITROPAN XL TAB 5MG	3	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	1	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	1	
GELNIQUE GEL 10%	3	
<i>oxybutynin chloride solution 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	3	
TOVIAZ TAB 8MG	3	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
VESICARE LS SUS 5MG/5ML	3	
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ SUS 8MG/ML	2	
MYRBETRIQ TAB 25MG	2	
MYRBETRIQ TAB 50MG	2	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride tab 5 mg</i>	1	NM
<i>bethanechol chloride tab 10 mg</i>	1	NM
<i>bethanechol chloride tab 25 mg</i>	1	NM
<i>bethanechol chloride tab 50 mg</i>	1	NM
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
VAGINAL AND RELATED PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA SUP 6.5MG	3	
SPERMICIDES		
ENCARE SUP 100MG	3	OTC, NM
GYNOL II GEL 3%	3	OTC, NM
VAGINAL ANTI-INFECTIVES		
CLEOCIN CRE 2% VAG	3	NM
CLEOCIN SUP 100MG	3	NM
<i>clindamycin phosphate vaginal cream 2%</i>	1	NM
CLINDESSE CRE 2%	3	NM
GYNAZOLE-1 CRE 2%	3	NM
<i>metronidazole vaginal gel 0.75%</i>	1	NM
<i>terconazole vaginal cream 0.4%</i>	1	NM
<i>terconazole vaginal cream 0.8%</i>	1	NM
<i>terconazole vaginal suppos 80 mg</i>	1	NM
VANDAZOLE GEL 0.75%	2	NM
VAGINAL ESTROGENS		
ESTRACE VAG CRE 0.01%	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
ESTRING MIS 7.5/24HR	2	
FEMRING MIS 0.1MG/24	3	
FEMRING MIS 0.05/24H	3	
PREMARIN VAG CRE 0.625MG	2	
VAGIFEM TAB 10MCG	3	
<i>yuvafem</i>	1	
VAGINAL PROGESTINS		
CRINONE GEL 8% VAG	2	NM
ENDOMETRIN SUP 100MG	3	NM
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
ADRENALIN INJ 1MG/ML	2	NM
ADRENALIN INJ 30/30ML	2	NM
<i>epinephrine inj 1 mg/ml (1:1000)</i>	1	NM
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	1	NM
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	QL (2 PENS EVERY 30 DAYS), NM
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	QL (2 PENS EVERY 30 DAYS), NM
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	1	QL (2 PENS EVERY 30 DAYS), NM

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Drug Name	Drug Tier	Requirements/Limits
EPIPEN 2-PAK INJ 0.3MG	2	QL (2 PENS EVERY 30 DAYS), NM
EPIPEN-JR INJ 0.15MG	2	QL (2 PENS EVERY 30 DAYS), NM
SYMJEPI INJ 0.3MG	2	QL (2 PENS EVERY 30 DAYS), NM
SYMJEPI INJ 0.15MG	2	QL (2 PENS EVERY 30 DAYS), NM

NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

<i>droxidopa cap 100 mg</i>	1	SP, NM
<i>droxidopa cap 200 mg</i>	1	SP, NM
<i>droxidopa cap 300 mg</i>	1	SP, NM
NORTHERA CAP 100MG	3	SP, NM
NORTHERA CAP 200MG	3	SP, NM
NORTHERA CAP 300MG	3	SP, NM

VASOPRESSORS

EPINEPHRINE INJ 1MG/ML	3	NM
<i>midodrine hcl tab 2.5 mg</i>	1	NM
<i>midodrine hcl tab 5 mg</i>	1	NM
<i>midodrine hcl tab 10 mg</i>	1	NM

VITAMINS

OIL SOLUBLE VITAMINS

<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	NM
<i>phytonadione tab 5 mg</i>	1	NM

WATER SOLUBLE VITAMINS

<i>pyridoxine hcl inj 100 mg/ml</i>	1	NM
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ACTEMRA INJ ACTPEN	12
ACTIMMUNE INJ 2MU/0.5.....	74
ACTIQ LOZ 1200MCG	14
ACTIQ LOZ 1600MCG	14
ACTIQ LOZ 200MCG.....	14
ACTIQ LOZ 400MCG.....	14
ACTIQ LOZ 600MCG.....	14
ACTIQ LOZ 800MCG.....	14
ACTIVELLA TAB 1-0.5MG	119
ACTONEL TAB 150MG	114
ACTONEL TAB 35MG	114
ACTOPLUS MET TAB 15-850MG.....	47
ACULAR LS SOL 0.4%	147
ACULAR SOL 0.5% OP	147
<i>acyclovir cap 200 mg</i>	86
<i>acyclovir oint 5%</i>	108
<i>acyclovir susp 200 mg/5ml</i>	86
<i>acyclovir tab 400 mg</i>	86
<i>acyclovir tab 800 mg</i>	86
ADALIMU-ADAZ INJ 40/0.4ML	10
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	104
<i>adapalene cream 0.1%</i>	104
<i>adapalene gel 0.1%</i>	104
<i>adapalene gel 0.3%</i>	104
ADCIRCA TAB 20MG.....	94
ADDERALL TAB 10MG.....	1
ADDERALL TAB 12.5MG.....	1
ADDERALL TAB 15MG.....	1
ADDERALL TAB 20MG	1
ADDERALL TAB 30MG	1
ADDERALL TAB 5MG	1
ADDERALL TAB 7.5MG	1
ADDERALL XR CAP 10MG	1

ADDERALL XR CAP 15MG	1	<i>albuterol sulfate soln nebu 1.25 mg/3ml</i>	
ADDERALL XR CAP 20MG.....	1	<i>(base equiv)</i>	31
ADDERALL XR CAP 25MG.....	1	<i>albuterol sulfate syrup 2 mg/5ml.....</i>	31
ADDERALL XR CAP 30MG.....	1	<i>albuterol sulfate tab 2 mg</i>	31
ADDERALL XR CAP 5MG.....	1	<i>albuterol sulfate tab 4 mg.....</i>	31
ADDYI TAB 100MG.....	152	<i>alclometasone dipropionate cream 0.05%</i>	
<i>adefovir dipivoxil tab 10 mg</i>	85	.....	108
ADEMPAS TAB 0.5MG	95	<i>alclometasone dipropionate oint 0.05%.</i>	108
ADEMPAS TAB 1.5MG	95	ALDACTONE TAB 100MG.....	114
ADEMPAS TAB 1MG	95	ALDACTONE TAB 25MG.....	114
ADEMPAS TAB 2.5MG	95	ALDACTONE TAB 50MG.....	114
ADEMPAS TAB 2MG.....	95	ALECENSA CAP 150MG.....	69
ADIPEX-P CAP 37.5MG.....	3	<i>alendronate sodium oral soln 70 mg/75ml</i>	
ADIPEX-P TAB 37.5MG	3	.....	115
ADLARITY DIS 10MG/DAY	150	<i>alendronate sodium tab 10 mg</i>	115
ADLARITY DIS 5MG/DAY.....	150	<i>alendronate sodium tab 35 mg</i>	115
ADRENALIN INJ 1MG/ML.....	165	<i>alendronate sodium tab 5 mg.....</i>	115
ADRENALIN INJ 30/30ML	165	<i>alendronate sodium tab 70 mg</i>	115
ADTHYZA TAB 130MG.....	158	<i>alfuzosin hcl tab er 24hr 10 mg</i>	124
ADTHYZA TAB 16.25MG.....	158	ALINIA SUS 100/5ML	25
ADTHYZA TAB 32.5MG	158	ALINIA TAB 500MG.....	25
ADTHYZA TAB 65MG	158	<i>aliskiren fumarate tab 150 mg (base</i>	
ADTHYZA TAB 97.5MG	158	<i>equivalent)</i>	64
AFINITOR DIS TAB 2MG.....	69	<i>aliskiren fumarate tab 300 mg (base</i>	
AFINITOR DIS TAB 3MG.....	69	<i>equivalent)</i>	64
AFINITOR DIS TAB 5MG	69	<i>allopurinol tab 100 mg.....</i>	125
AFINITOR TAB 10MG	69	<i>allopurinol tab 300 mg</i>	125
AFINITOR TAB 2.5MG	69	<i>almotriptan malate tab 12.5 mg</i>	135
AFINITOR TAB 5MG.....	69	<i>almotriptan malate tab 6.25 mg</i>	135
AFINITOR TAB 7.5MG	69	ALOCRI SOL 2%	147
AGRYLIN CAP 0.5MG	126	ALOMIDE SOL 0.1% OP	147
AIMOVIG INJ 140MG/ML	134	<i>alose tron hcl tab 0.5 mg (base equiv).....</i>	123
AIMOVIG INJ 70MG/ML.....	134	<i>alose tron hcl tab 1 mg (base equiv).....</i>	123
AIRSUPRA AER 90-80MCG.....	31	ALPHAGAN P SOL 0.1%	144
AJOVY INJ 225/1.5.....	134	ALPHAGAN P SOL 0.15%.....	144
AKYNZEO CAP 300-0.5	52	ALPRAZOLAM CON 1 MG/ML.....	27
<i>albendazole tab 200 mg</i>	24	<i>alprazolam tab 0.25 mg.....</i>	27
<i>albuterol sulfate inhal aero 108 mcg/act</i>		<i>alprazolam tab 0.5 mg.....</i>	27
<i>(90mcg base equiv)</i>	31	<i>alprazolam tab 1 mg</i>	27
<i>albuterol sulfate soln nebu 0.083% (2.5</i>		<i>alprazolam tab 2 mg</i>	27
<i>mg/3ml).....</i>	31	<i>alprazolam tab er 24hr 0.5 mg</i>	27
<i>albuterol sulfate soln nebu 0.63 mg/3ml</i>		<i>alprazolam tab er 24hr 2 mg</i>	27
<i>(base equiv)</i>	31	<i>alprazolam xr</i>	27
		ALREX SUS 0.2%.....	146

ALTABAX OIN 1%	105	<i>amiodarone hcl tab 400 mg</i>	29
ALTACE CAP 1.25MG	58	<i>amitriptyline hcl tab 100 mg</i>	46
ALTACE CAP 10MG	58	<i>amitriptyline hcl tab 10 mg</i>	45
ALTACE CAP 2.5MG.....	58	<i>amitriptyline hcl tab 150 mg</i>	46
ALTACE CAP 5MG	58	<i>amitriptyline hcl tab 25 mg</i>	45
<i>altavera</i>	97	<i>amitriptyline hcl tab 50 mg</i>	46
ALUNBRIG PAK	69	<i>amitriptyline hcl tab 75 mg</i>	46
ALUNBRIG TAB 180MG.....	69	<i>amlodipine besylate-atorvastatin calcium</i>	
ALUNBRIG TAB 30MG	69	<i>tab 10-10 mg</i>	92
ALUNBRIG TAB 90MG	69	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>alyacen 1/35</i>	97	<i>tab 10-20 mg</i>	92
<i>alyacen 7/7/7</i>	97	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>alyacen tab 7/7/7</i>	97	<i>tab 10-40 mg</i>	92
<i>alyq</i>	94	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>amabelz tab 1-0.5mg</i>	119	<i>tab 10-80 mg</i>	92
<i>amantadine hcl cap 100 mg</i>	75	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>amantadine hcl soln 50 mg/5ml</i>	75	<i>tab 2.5-10 mg</i>	92
<i>amantadine hcl tab 100 mg</i>	75	<i>amlodipine besylate-atorvastatin calcium</i>	
AMARYL TAB 1MG.....	50	<i>tab 2.5-20 mg</i>	92
AMARYL TAB 2MG	50	<i>amlodipine besylate-atorvastatin calcium</i>	
AMARYL TAB 4MG	50	<i>tab 2.5-40 mg</i>	92
AMBIEN CR TAB 12.5MG.....	130	<i>amlodipine besylate-atorvastatin calcium</i>	
AMBIEN CR TAB 6.25MG	129	<i>tab 5-10 mg</i>	92
AMBIEN TAB 10MG.....	130	<i>amlodipine besylate-atorvastatin calcium</i>	
AMBIEN TAB 5MG.....	130	<i>tab 5-20 mg</i>	92
<i>ambrisentan tab 10 mg</i>	94	<i>amlodipine besylate-atorvastatin calcium</i>	
<i>ambrisentan tab 5 mg</i>	94	<i>tab 5-40 mg</i>	92
<i>amcinonide lotion 0.1%</i>	108	<i>amlodipine besylate-atorvastatin calcium</i>	
AMCINONIDE OINT 0.1%	108	<i>tab 5-80 mg</i>	92
<i>amethia</i>	97	<i>amlodipine besylate-benazepril hcl cap 10-</i>	
AMICAR SOL 0.25/ML.....	129	<i>40 mg</i>	61
AMICAR TAB 1000MG.....	129	<i>amlodipine besylate-benazepril hcl cap 2.5-</i>	
AMICAR TAB 500MG.....	129	<i>10 mg</i>	61
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>		<i>amlodipine besylate-benazepril hcl cap 5-</i>	
.....	10	<i>10 mg</i>	61
<i>amikacin sulfate inj 500 mg/2ml (250</i>		<i>amlodipine besylate-benazepril hcl cap 5-</i>	
<i>mg/ml)</i>	10	<i>20 mg</i>	61
<i>amiloride & hydrochlorothiazide tab 5-50</i>		<i>amlodipine besylate-benazepril hcl cap 5-</i>	
<i>mg</i>	113	<i>40 mg</i>	61
<i>amiloride hcl tab 5 mg</i>	114	<i>amlodipine besylate-olmesartan</i>	
<i>aminocaproic acid tab 1000 mg</i>	129	<i>medoxomil tab 10-20 mg</i>	61
<i>aminocaproic acid tab 500 mg</i>	129	<i>amlodipine besylate-olmesartan</i>	
<i>amiodarone hcl tab 100 mg</i>	29	<i>medoxomil tab 10-40 mg</i>	61
<i>amiodarone hcl tab 200 mg</i>	29		

<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	61	<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	149
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	61	<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	149
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	89	<i>amoxicillin (trihydrate) tab 500 mg</i>	149
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	89	<i>amoxicillin (trihydrate) tab 875 mg</i>	149
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	89	<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	149
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	61	<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	149
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	61	<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	149
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	61	<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	149
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	61	<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	149
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	61	<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	149
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	61	<i>amoxicillin & k clavulanate tab 250-125 mg</i>	149
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	61	<i>amoxicillin & k clavulanate tab 500-125 mg</i>	149
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	61	<i>amoxicillin & k clavulanate tab 875-125 mg</i>	149
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	61	<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	149
<i>amnestem</i>	104	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	1
<i>amoxapine tab 100 mg</i>	46	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	1
<i>amoxapine tab 150 mg</i>	46	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	1
<i>amoxapine tab 25 mg</i>	46	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	1
<i>amoxapine tab 50 mg</i>	46	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1
<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	163	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1
<i>amoxicillin (trihydrate) cap 250 mg</i>	149	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1
<i>amoxicillin (trihydrate) cap 500 mg</i>	149	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	149	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	2
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	149		
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	149		
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	149		

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	<i>aprepitant capsule 40 mg</i>	52
<i>amphetamine-dextroamphetamine tab 10 mg</i>	2	<i>aprepitant capsule 80 mg</i>	52
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	2	<i>aprepitant capsule therapy pack 80 & 125 mg</i>	53
<i>amphetamine-dextroamphetamine tab 15 mg</i>	2	<i>apri</i>	97
<i>amphetamine-dextroamphetamine tab 20 mg</i>	2	APRISO CAP 0.375GM	122
<i>amphetamine-dextroamphetamine tab 30 mg</i>	2	APTENSIO XR CAP 10MG	6
<i>amphetamine-dextroamphetamine tab 5 mg</i>	2	APTENSIO XR CAP 15MG	6
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	2	APTENSIO XR CAP 20MG	6
<i>amphetamine sulfate tab 5 mg</i>	1	APTENSIO XR CAP 30MG	6
<i>ampicillin cap 500 mg</i>	149	APTENSIO XR CAP 40MG	6
AMPYRA TAB 10MG	152	APTENSIO XR CAP 50MG	6
ANAFRANIL CAP 25MG	46	APTENSIO XR CAP 60MG	6
ANAFRANIL CAP 50MG	46	APTIOM TAB 200MG	35
ANAFRANIL CAP 75MG	46	APTIOM TAB 400MG	35
<i>anagrelide hcl cap 0.5 mg</i>	126	APTIOM TAB 600MG	35
<i>anagrelide hcl cap 1 mg</i>	126	APTIOM TAB 800MG	35
ANASPAZ TAB 0.125MG	160	APTIVUS CAP 250MG	82
<i>anastrozole tab 1 mg</i>	68	<i>aranelle</i>	97
ANCOBON CAP 250MG	53	ARANESP INJ 100MCG	127
ANCOBON CAP 500MG	53	ARANESP INJ 10MCG	127
ANDRODERM DIS 2MG/24HR	22	ARANESP INJ 150MCG	127
ANDRODERM DIS 4MG/24HR	22	ARANESP INJ 200MCG	127
ANDROGEL GEL 1.62%	23	ARANESP INJ 25MCG	127
ANGELIQ TAB 0.25-0.5	119	ARANESP INJ 300MCG	127
ANGELIQ TAB 0.5-1MG	119	ARANESP INJ 40MCG	127
ANORO ELLIPT AER 62.5-25	31	ARANESP INJ 500MCG	127
ANTARA CAP 90MG	55	ARANESP INJ 60MCG	127
ANZEMET TAB 50MG	52	ARAVA TAB 10MG	13
APOKYN INJ 10MG/ML	75	ARAVA TAB 20MG	13
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	75	ARCALYST INJ 220MG	11
APO-VARENICL TAB 0.5MG	154	<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	31
APO-VARENICL TAB 1MG	154	ARICEPT TAB 10MG	150
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	144	ARICEPT TAB 23MG	150
<i>aprepitant capsule 125 mg</i>	52	ARICEPT TAB 5MG	150
		ARIMIDEX TAB 1MG	68
		<i>aripiprazole orally disintegrating tab 10 mg</i>	81
		<i>aripiprazole orally disintegrating tab 15 mg</i>	81
		<i>aripiprazole oral solution 1 mg/ml</i>	81
		<i>aripiprazole tab 10 mg</i>	81
		<i>aripiprazole tab 15 mg</i>	81

<i>aripiprazole tab 20 mg</i>	81	ASPRUZYO SPR GRA 500MG	26
<i>aripiprazole tab 2 mg</i>	81	ASTAGRAF XL CAP 0.5MG	139
<i>aripiprazole tab 30 mg</i>	81	ASTAGRAF XL CAP 1MG	139
<i>aripiprazole tab 5 mg</i>	81	ASTAGRAF XL CAP 5MG	139
ARIXTRA INJ 10/0.8ML	33	ATACAND TAB 16MG	59
ARIXTRA INJ 2.5/0.5	33	ATACAND TAB 32MG	59
ARIXTRA INJ 5/0.4ML	33	ATACAND TAB 4MG	59
ARIXTRA INJ 7.5/0.6	33	ATACAND TAB 8MG	59
<i>armodafinil tab 150 mg</i>	6	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	82
<i>armodafinil tab 200 mg</i>	6	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	82
<i>armodafinil tab 250 mg</i>	6	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	82
<i>armodafinil tab 50 mg</i>	6	ATELVIA TAB	115
ARMONAIR DIG AER 113MCG	30	<i>atenolol & chlorthalidone tab 100-25 mg</i> ..	61
ARMONAIR DIG AER 232MCG	30	<i>atenolol & chlorthalidone tab 50-25 mg</i> ...	61
ARMONAIR DIG AER 55MCG	30	<i>atenolol tab 100 mg</i>	87
ARMOUR THYRO TAB 120MG	158	<i>atenolol tab 25 mg</i>	87
ARMOUR THYRO TAB 15MG	158	<i>atenolol tab 50 mg</i>	87
ARMOUR THYRO TAB 180MG	158	<i>atomoxetine hcl cap 100 mg (base equiv)</i> ..	5
ARMOUR THYRO TAB 240MG	158	<i>atomoxetine hcl cap 10 mg (base equiv)</i>	5
ARMOUR THYRO TAB 300MG	158	<i>atomoxetine hcl cap 18 mg (base equiv)</i>	5
ARMOUR THYRO TAB 30MG	158	<i>atomoxetine hcl cap 25 mg (base equiv)</i>	5
ARMOUR THYRO TAB 60MG	158	<i>atomoxetine hcl cap 40 mg (base equiv)</i>	5
ARMOUR THYRO TAB 90MG	158	<i>atomoxetine hcl cap 60 mg (base equiv)</i>	5
ARNUITY ELPT INH 100MCG	30	<i>atomoxetine hcl cap 80 mg (base equiv)</i>	5
ARNUITY ELPT INH 200MCG	30	ATORVALIQ SUS 20MG/5ML	56
ARNUITY ELPT INH 50MCG	30	<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	56
AROMASIN TAB 25MG	68	<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	56
ASACOL HD TAB 800MG	122	<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	56
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	79	<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	56
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	79	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	65
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	79	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	65
<i>ashlyna</i>	97	<i>atovaquone susp 750 mg/5ml</i>	25
ASMANEX HFA AER 100 MCG	30	<i>atropine sulfate ophth oint 1%</i>	144
ASMANEX HFA AER 200 MCG	30	<i>atropine sulfate ophth soln 1%</i>	144
ASMANEX HFA AER 50MCG	30	ATROVENT HFA AER 17MCG	29
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	126		
<i>aspirin ec low dose</i>	14		
<i>aspirin low tab 81mg ec</i>	14		
<i>aspirin tab delayed release 81 mg</i>	14		
ASPRUZYO SPR GRA 1000MG	26		

AUBAGIO TAB 14MG.....	152	<i>azithromycin for susp 200 mg/5ml.....</i>	132
AUBAGIO TAB 7MG.....	152	<i>azithromycin powd pack for susp 1 gm ...</i>	132
<i>aubra eq tab 0.1-0.02.....</i>	97	<i>azithromycin tab 250 mg.....</i>	132
AUGMENTIN SUS ES-600.....	149	<i>azithromycin tab 500 mg.....</i>	132
AUGMENTIN TAB 500MG.....	149	<i>azithromycin tab 600 mg.....</i>	132
<i>aurovela 1.5/30.....</i>	97	<i>aztreonam for inj 1 gm.....</i>	26
<i>aurovela 24 fe.....</i>	97	<i>aztreonam for inj 2 gm.....</i>	26
<i>aurovela fe 1/20.....</i>	97	AZULFIDINE TAB 500MG.....	122
AURYXIA TAB 210MG.....	123	AZULFIDINE TAB 500MG EN.....	122
AUSTEDO TAB 12MG.....	152	<i>azurette tab.....</i>	97
AUSTEDO TAB 6MG.....	152	B	
AUSTEDO TAB 9MG.....	152	<i>bacitracin ophth oint 500 unit/gm.....</i>	145
AUSTEDO XR TAB 12MG.....	152	<i>bacitracin-polymyxin b ophth oint.....</i>	145
AUSTEDO XR TAB 24MG.....	152	<i>bacitracin-polymyxin-neomycin-hc ophth</i>	
AUSTEDO XR TAB 6MG.....	152	<i>oint 1%.....</i>	146
AUSTEDO XR TAB TITR KIT.....	152	<i>baclofen oral soln 10 mg/5ml.....</i>	142
AUVELITY TAB 45-105MG.....	42	<i>baclofen oral soln 5 mg/5ml.....</i>	142
AVALIDE TAB 150-12.5.....	61	<i>baclofen susp 25 mg/5ml.....</i>	142
AVALIDE TAB 300-12.5.....	61	<i>baclofen tab 10 mg.....</i>	142
AVAPRO TAB 150MG.....	59	<i>baclofen tab 20 mg.....</i>	142
AVAPRO TAB 300MG.....	59	<i>baclofen tab 5 mg.....</i>	142
AVAPRO TAB 75MG.....	59	BACTRIM DS TAB 800-160.....	25
<i>aviane.....</i>	97	BAFIERTAM CAP 95MG.....	152
<i>avidoxy.....</i>	156	<i>balsalazide disodium cap 750 mg.....</i>	122
AVODART CAP 0.5MG.....	124	BALVERSA TAB 3MG.....	69
AVONEX PEN KIT 30MCG.....	152	BALVERSA TAB 4MG.....	69
AVONEX PREFL KIT 30MCG.....	152	BALVERSA TAB 5MG.....	69
AYVAKIT TAB 100MG.....	69	<i>balziva.....</i>	97
AYVAKIT TAB 200MG.....	69	BANZEL SUS 40MG/ML.....	36
AYVAKIT TAB 300MG.....	69	BANZEL TAB 200MG.....	36
AZASAN.....	139	BANZEL TAB 400MG.....	36
AZASITE SOL 1%.....	145	BAQSIMI ONE POW 3MG/DOSE.....	48
<i>azathioprine tab 50 mg.....</i>	139	BARACLUDGE SOL.....	85
<i>azelaic acid gel 15%.....</i>	111	BARACLUDGE TAB 0.5MG.....	85
<i>azelastine hcl-fluticasone prop nasal spray</i>		BARACLUDGE TAB 1MG.....	85
<i>137-50 mcg/act.....</i>	142	BASAGLAR INJ 100UNIT.....	49
<i>azelastine hcl nasal spray 0.1% (137</i>		BAXDELA TAB 450MG.....	121
<i>mcg/spray).....</i>	143	<i>bayer chewable low dose.....</i>	14
<i>azelastine hcl nasal spray 0.15% (205.5</i>		BECONASE AQ SUS 0.042%.....	143
<i>mcg/spray).....</i>	143	BELBUCA MIS 150MCG.....	21
<i>azelastine hcl ophth soln 0.05%.....</i>	147	BELBUCA MIS 300MCG.....	21
AZILECT TAB 0.5MG.....	77	BELBUCA MIS 450MCG.....	21
AZILECT TAB 1MG.....	77	BELBUCA MIS 600MCG.....	21
<i>azithromycin for susp 100 mg/5ml.....</i>	132	BELBUCA MIS 750MCG.....	21

BELBUCA MIS 75MCG	21	<i>betamethasone dipropionate augmented gel 0.05%</i>	108
BELBUCA MIS 900MCG	21	<i>betamethasone dipropionate augmented lotion 0.05%</i>	108
BELSOMRA TAB 10MG	131	<i>betamethasone dipropionate augmented oint 0.05%</i>	108
BELSOMRA TAB 15MG	131	<i>betamethasone dipropionate cream 0.05%</i>	108
BELSOMRA TAB 20MG	131	<i>betamethasone dipropionate lotion 0.05%</i>	108
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<i>clomipramine hcl cap 50 mg</i>	46	COARTEM TAB 20-120MG	65
<i>clomipramine hcl cap 75 mg</i>	46	<i>codeine sulfate tab 30 mg</i>	14
<i>clonazepam orally disintegrating tab 0.125 mg</i>	35	CODEINE SULF TAB 60MG	14
<i>clonazepam orally disintegrating tab 0.25 mg</i>	35	COLAZAL CAP 750MG	122
<i>clonazepam orally disintegrating tab 0.5 mg</i>	35	<i>colchicine cap 0.6 mg</i>	125
<i>clonazepam orally disintegrating tab 1 mg</i>	35	<i>colchicine tab 0.6 mg</i>	125
<i>clonazepam orally disintegrating tab 2 mg</i>	35	<i>colchicine w/ probenecid tab 0.5-500 mg</i>	125
<i>clonazepam tab 0.5 mg</i>	35	COLCRYS TAB 0.6MG	125
<i>clonazepam tab 1 mg</i>	35	<i>colesevelam hcl packet for susp 3.75 gm</i> 55	
<i>clonazepam tab 2 mg</i>	35	<i>colesevelam hcl tab 625 mg</i>	55
<i>clonidine hcl tab 0.1 mg</i>	60	COLESTID POW 5GM.....	55
<i>clonidine hcl tab 0.2 mg</i>	60	COLESTID TAB 1GM	55
<i>clonidine hcl tab 0.3 mg</i>	60	<i>colestipol hcl granule packets 5 gm</i>	55
<i>clonidine hcl tab er 12hr 0.1 mg</i>	5	<i>colestipol hcl tab 1 gm</i>	55
<i>clonidine td patch weekly 0.1 mg/24hr</i>	60	COMBIGAN SOL 0.2/0.5%	144
<i>clonidine td patch weekly 0.2 mg/24hr</i>	60	COMBIPATCH DIS	119
<i>clonidine td patch weekly 0.3 mg/24hr</i>	60	COMBIVENT AER 20-100	31
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	126	COMBIVIR TAB 150-300	82
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	126	COMETRIQ KIT 100MG	70
<i>clorazepate dipotassium tab 15 mg</i>	27	COMETRIQ KIT 140MG	70
<i>clorazepate dipotassium tab 3.75 mg</i>	27	COMPLERA TAB	82
<i>clorazepate dipotassium tab 7.5 mg</i>	27	<i>compro</i>	80
<i>clotrimazole troche 10 mg</i>	141	COMTAN TAB 200MG	74
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	106	CONCEPT OB CAP	141
		CONCERTA TAB 18MG.....	6
		CONCERTA TAB 27MG	6

CONCERTA TAB 36MG	6	CRESTOR TAB 10MG	56
CONCERTA TAB 54MG	6	CRESTOR TAB 20MG	56
CONDYLOX GEL 0.5%	111	CRESTOR TAB 40MG	56
<i>constulose</i>	132	CRESTOR TAB 5MG	56
CONTRAVE TAB 8-90MG	4	CRINONE GEL 8% VAG	165
CONZIP CAP 100MG	14	<i>cromolyn sodium ophth soln 4%</i>	147
CONZIP CAP 200MG	14	<i>cromolyn sodium oral conc 100 mg/5ml</i>	122
CONZIP CAP 300MG	14	<i>cromolyn sodium soln nebu 20 mg/2ml</i> ...	29
COPAXONE INJ 20MG/ML	152	<i>croton</i>	112
COPAXONE INJ 40MG/ML	152	<i>cryselle-28</i>	97
COPIKTRA CAP 15MG	70	CUPRIMINE CAP 250MG.....	138
COPIKTRA CAP 25MG	70	CUVPOSA SOL 1MG/5ML	160
COREG CR CAP 10MG.....	87	CUVRIOR TAB 300MG	138
COREG CR CAP 20MG	87	<i>cyanocobalamin inj 1000 mcg/ml</i>	127
COREG CR CAP 40MG	87	<i>cyclobenzaprine hcl tab 10 mg</i>	142
COREG CR CAP 80MG	87	<i>cyclobenzaprine hcl tab 5 mg</i>	142
<i>coremino</i>	156	CYCLOGYL SOL 0.5% OP	144
CORGARD TAB 20MG.....	88	CYCLOGYL SOL 1% OP	144
CORGARD TAB 40MG.....	88	CYCLOGYL SOL 2% OP.....	144
CORLANOR TAB 5MG.....	95	<i>cyclophosphamide cap 25 mg</i>	66
CORLANOR TAB 7.5MG.....	95	<i>cyclophosphamide cap 50 mg</i>	66
CORTEF TAB 10MG	102	<i>cyclophosphamide for inj 1 gm</i>	66
CORTEF TAB 20MG	102	<i>cyclophosphamide for inj 2 gm</i>	66
CORTEF TAB 5MG.....	102	<i>cyclophosphamide for inj 500 mg</i>	66
CORTIFOAM AER 90MG	24	<i>cycloserine cap 250 mg</i>	66
COSENTYX INJ 150MG/ML	107	CYCLOSET TAB 0.8MG.....	49
COSENTYX INJ 300DOSE.....	107	<i>cyclosporine (ophth) emulsion 0.05%</i> ...	145
COSENTYX INJ 75MG/0.5	107	<i>cyclosporine cap 100 mg</i>	139
COSENTYX PEN INJ 150MG/ML.....	107	<i>cyclosporine cap 25 mg</i>	139
COSENTYX PEN INJ 300DOSE	107	<i>cyclosporine modified cap 100 mg</i>	139
COSENTYX UNO INJ 300/2ML	107	<i>cyclosporine modified cap 50 mg</i>	139
COSOFT PF SOL 2%-0.5%	144	<i>cyclosporine modified oral soln 100 mg/ml</i>	139
COSOFT SOL 2-0.5%OP	144	CYMBALTA CAP 20MG	44
COTELLIC TAB 20MG	70	CYMBALTA CAP 30MG	44
COZAAR TAB 100MG	59	CYMBALTA CAP 60MG	44
COZAAR TAB 25MG	59	<i>cyproheptadine hcl syrup 2 mg/5ml</i>	54
COZAAR TAB 50MG	59	<i>cyproheptadine hcl tab 4 mg</i>	54
CREON CAP 12000UNT.....	112	<i>cyred</i>	97
CREON CAP 24000UNT	112	CYSTADROPS SOL 0.37%	147
CREON CAP 3000UNIT	112	CYSTAGON CAP 150MG	124
CREON CAP 36000UNT.....	112	CYSTAGON CAP 50MG.....	124
CREON CAP 6000UNIT	112	CYSTARAN SOL 0.44%	147
CRESEMBA CAP 186 MG	53	<i>cytarabine inj pf 100 mg/ml</i>	67
CRESEMBA CAP 74.5MG.....	53		

<i>cytarabine inj pf 20 mg/ml</i>	66	<i>deferasirox granules packet 360 mg</i>	51
CYTOMEL TAB 25MCG	158	<i>deferasirox granules packet 90 mg</i>	51
CYTOMEL TAB 50MCG	158	<i>deferasirox tab 180 mg</i>	51
CYTOMEL TAB 5MCG.....	158	<i>deferasirox tab 360 mg</i>	51
CYTOTEC TAB 100MCG	163	<i>deferasirox tab 90 mg</i>	51
CYTOTEC TAB 200MCG	163	<i>deferasirox tab for oral susp 125 mg</i>	51
D		<i>deferasirox tab for oral susp 250 mg</i>	51
<i>dalfampridine tab er 12hr 10 mg</i>	152	<i>deferasirox tab for oral susp 500 mg</i>	51
DALIRESP TAB 250MCG	30	<i>deferiprone tab 1000 mg</i>	51
DALIRESP TAB 500MCG	30	<i>deferiprone tab 500 mg</i>	51
<i>danazol cap 100 mg</i>	23	<i>deferoxamine mesylate for inj 2 gm</i>	51
<i>danazol cap 200 mg</i>	23	<i>deflazacort tab 18 mg</i>	102
<i>danazol cap 50 mg</i>	23	<i>deflazacort tab 30 mg</i>	102
DANTRIUM CAP 25MG.....	142	<i>deflazacort tab 36 mg</i>	102
<i>dantrolene sodium cap 100 mg</i>	142	<i>deflazacort tab 6 mg</i>	102
<i>dantrolene sodium cap 25 mg</i>	142	DELSTRIGO TAB.....	82
<i>dantrolene sodium cap 50 mg</i>	142	<i>delyla</i>	97
<i>dapsone gel 5%</i>	104	<i>demeclocycline hcl tab 150 mg</i>	156
<i>dapsone tab 100 mg</i>	25	<i>demeclocycline hcl tab 300 mg</i>	156
<i>dapsone tab 25 mg</i>	25	DEMEROL INJ 100MG/ML	14
<i>darifenacin hydrobromide tab er 24hr 15</i> <i>mg (base equiv)</i>	164	DENAVIR CRE 1%	108
<i>darifenacin hydrobromide tab er 24hr 7.5</i> <i>mg (base equiv)</i>	164	<i>denta 5000 plus</i>	141
<i>darunavir tab 600 mg</i>	82	<i>dentagel</i>	141
<i>darunavir tab 800 mg</i>	82	DEPAKOTE ER TAB 250MG	41
<i>dasetta 1/35</i>	97	DEPAKOTE ER TAB 500MG	41
<i>dasetta 7/7/7</i>	97	DEPAKOTE SPR CAP 125MG	41
DAURISMO TAB 100MG.....	67	DEPAKOTE TAB 125MG DR.....	41
DAURISMO TAB 25MG.....	67	DEPAKOTE TAB 250MG DR.....	41
DAYBUE SOL 200MG/ML	143	DEPAKOTE TAB 500MG DR.....	41
DAYPRO TAB 600MG	12	DEPEN TITRA TAB 250MG.....	138
<i>daysee</i>	97	DEPO-ESTRADI INJ 5MG/ML.....	120
DAYTRANA DIS 10MG/9HR.....	6	DEPO-PROVERA INJ 150MG/ML	101
DAYTRANA DIS 15MG/9HR.....	6	DEPO-SQ PROV INJ 104	101
DAYTRANA DIS 20MG/9HR	6	DEPO-TESTOST INJ 100MG/ML	23
DAYTRANA DIS 30MG/9HR.....	6	DEPO-TESTOST INJ 200MG/ML.....	23
DAYVIGO TAB 10MG.....	131	DERMA-SMOOTH OIL /FS BODY	109
DAYVIGO TAB 5MG	131	DERMOTIC OIL 0.01%	148
DDAVP TAB 0.1MG.....	118	DESCOVY TAB 120-15MG	82
DDAVP TAB 0.2MG.....	118	DESCOVY TAB 200/25MG	82
DEBACTEROL SOL 30-50%	141	DESFERAL INJ 500MG	51
<i>deblitane</i>	101	<i>desipramine hcl tab 100 mg</i>	46
<i>deferasirox granules packet 180 mg</i>	51	<i>desipramine hcl tab 10 mg</i>	46
		<i>desipramine hcl tab 150 mg</i>	46
		<i>desipramine hcl tab 25 mg</i>	46

<i>desipramine hcl tab 50 mg</i>	46	DEXCOM G6 MIS TRANSMIT	133
<i>desipramine hcl tab 75 mg</i>	46	DEXCOM G7 MIS RECEIVER	133
<i>desloratadine tab 5 mg</i>	54	DEXCOM G7 MIS SENSOR	133
<i>desmopressin acetate nasal spray soln</i>		DEXEDRINE CAP 10MG CR	2
<i>0.01% (refrigerated)</i>	118	DEXEDRINE CAP 15MG CR	2
<i>desmopressin acetate preservative free (pf)</i>		DEXILANT CAP 30MG DR	161
<i>inj 4 mcg/ml</i>	118	DEXILANT CAP 60MG DR	161
<i>desmopressin acetate tab 0.1 mg</i>	118	<i>dexlansoprazole cap delayed release 30</i>	
<i>desmopressin acetate tab 0.2 mg</i>	118	<i>mg</i>	161
<i>desonide cream 0.05%</i>	109	<i>dexlansoprazole cap delayed release 60</i>	
<i>desonide lotion 0.05%</i>	109	<i>mg</i>	161
<i>desonide oint 0.05%</i>	109	<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	
DESOWEN CRE 0.05%	109	.....	6
<i>desoximetasone cream 0.05%</i>	109	<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	
<i>desoximetasone cream 0.25%</i>	109	.....	6
<i>desoximetasone gel 0.05%</i>	109	<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	
<i>desoximetasone oint 0.05%</i>	109	.....	6
<i>desoximetasone oint 0.25%</i>	109	<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	
<i>desoximetasone spray 0.25%</i>	109	.....	6
<i>desvenlafaxine succinate tab er 24hr 100</i>		<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	
<i>mg (base equiv)</i>	44	.....	7
<i>desvenlafaxine succinate tab er 24hr 25 mg</i>		<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	
<i>(base equiv)</i>	44	.....	7
<i>desvenlafaxine succinate tab er 24hr 50 mg</i>		<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	
<i>(base equiv)</i>	44	.....	7
DESVENLAFAX TAB 100MG ER	44	<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	6
DESVENLAFAX TAB 50MG ER	44	<i>dexmethylphenidate hcl tab 10 mg</i>	7
DETROL LA CAP 2MG	164	<i>dexmethylphenidate hcl tab 2.5 mg</i>	7
DETROL LA CAP 4MG	164	<i>dexmethylphenidate hcl tab 5 mg</i>	7
DEXAMETHASON CON 1MG/ML	102	<i>dextroamphetamine sulfate cap er 24hr 10</i>	
<i>dexamethasone sodium phosphate inj 10</i>		<i>mg</i>	2
<i>mg/ml</i>	102	<i>dextroamphetamine sulfate cap er 24hr 15</i>	
<i>dexamethasone sodium phosphate ophth</i>		<i>mg</i>	2
<i>soln 0.1%</i>	146	<i>dextroamphetamine sulfate cap er 24hr 5</i>	
<i>dexamethasone soln 0.5 mg/5ml</i>	102	<i>mg</i>	2
<i>dexamethasone tab 0.5 mg</i>	102	<i>dextroamphetamine sulfate oral solution 5</i>	
<i>dexamethasone tab 0.75 mg</i>	102	<i>mg/5ml</i>	2
<i>dexamethasone tab 1.5 mg</i>	102	<i>dextroamphetamine sulfate tab 10 mg</i>	2
<i>dexamethasone tab 1 mg</i>	102	<i>dextroamphetamine sulfate tab 30 mg</i>	2
<i>dexamethasone tab 2 mg</i>	102	<i>dextroamphetamine sulfate tab 5 mg</i>	2
<i>dexamethasone tab 4 mg</i>	102	DIACOMIT CAP 250MG	36
<i>dexamethasone tab 6 mg</i>	102	DIACOMIT CAP 500MG	36
DEXCOM G6 MIS RECEIVER	133	DIACOMIT PAK 250MG	36
DEXCOM G6 MIS SENSOR	133	DIACOMIT PAK 500MG	36

DIASTAT ACDL GEL 12.5-20.....	35	<i>diethylpropion hcl tab 25 mg</i>	4
DIASTAT ACDL GEL 5-10MG.....	35	<i>diethylpropion hcl tab er 24hr 75 mg</i>	4
DIASTAT PED GEL 2.5M GEL	35	DIFICID TAB 200MG	133
<i>diazepam inj 5 mg/ml</i>	27	<i>diflorasone diacetate cream 0.05%</i>	109
<i>diazepam intensol</i>	27	<i>diflorasone diacetate oint 0.05%</i>	109
<i>diazepam oral soln 1 mg/ml</i>	27	DIFLUCAN SUS 10MG/ML	53
<i>diazepam rectal gel delivery system 10 mg</i>	35	DIFLUCAN SUS 40MG/ML	53
<i>diazepam rectal gel delivery system 2.5 mg</i>	35	DIFLUCAN TAB 100MG	53
<i>diazepam rectal gel delivery system 20 mg</i>	35	DIFLUCAN TAB 150MG	53
<i>diazepam tab 10 mg</i>	28	DIFLUCAN TAB 200MG	53
<i>diazepam tab 2 mg</i>	27	<i>diflunisal tab 500 mg</i>	14
<i>diazepam tab 5 mg</i>	27	<i>difluprednate ophth emulsion 0.05%</i>	146
<i>diazoxide susp 50 mg/ml</i>	48	<i>digoxin oral soln 0.05 mg/ml</i>	92
DIBENZYLINE CAP 10MG.....	59	<i>digoxin tab 125 mcg (0.125 mg)</i>	92
DICLEGIS TAB 10-10MG.....	52	<i>digoxin tab 250 mcg (0.25 mg)</i>	92
<i>diclofenac epolamine patch 1.3%</i>	105	<i>digox tab 0.125mg</i>	91
<i>diclofenac potassium (migraine) packet 50</i> <i>mg</i>	135	<i>digox tab 0.25mg</i>	91
<i>diclofenac potassium tab 50 mg</i>	12	<i>dihydroergotamine mesylate inj 1 mg/ml</i>	134
<i>diclofenac sodium (actinic keratoses) gel</i> <i>3%</i>	106	<i>dihydroergotamine mesylate nasal spray 4</i> <i>mg/ml</i>	134
<i>diclofenac sodium gel 1% (1.16%</i> <i>diethylamine equiv)</i>	105	DILANTIN-125 SUS 125/5ML.....	41
<i>diclofenac sodium ophth soln 0.1%</i>	147	DILANTIN CAP 100MG.....	41
<i>diclofenac sodium soln 1.5%</i>	105	DILANTIN CAP 30MG	41
<i>diclofenac sodium soln 2%</i>	105	DILANTIN CHW 50MG.....	41
<i>diclofenac sodium tab delayed release 25</i> <i>mg</i>	12	DILAUDID LIQ 1MG/ML.....	14
<i>diclofenac sodium tab delayed release 50</i> <i>mg</i>	12	DILAUDID TAB 2MG	14
<i>diclofenac sodium tab delayed release 75</i> <i>mg</i>	12	DILAUDID TAB 4MG	14
<i>diclofenac sodium tab er 24hr 100 mg</i>	12	DILAUDID TAB 8MG	14
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 50-0.2 mg</i>	12	<i>diltiazem hcl cap er 12hr 120 mg</i>	89
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 75-0.2 mg</i>	12	<i>diltiazem hcl cap er 12hr 60 mg</i>	89
<i>dicloxacillin sodium cap 250 mg</i>	149	<i>diltiazem hcl cap er 12hr 90 mg</i>	89
<i>dicloxacillin sodium cap 500 mg</i>	150	<i>diltiazem hcl coated beads cap er 24hr 360</i> <i>mg</i>	89
<i>dicyclomine hcl cap 10 mg</i>	160	<i>diltiazem hcl extended release beads cap</i> <i>er 24hr 120 mg</i>	89
<i>dicyclomine hcl tab 20 mg</i>	160	<i>diltiazem hcl extended release beads cap</i> <i>er 24hr 180 mg</i>	89
		<i>diltiazem hcl extended release beads cap</i> <i>er 24hr 240 mg</i>	89
		<i>diltiazem hcl extended release beads cap</i> <i>er 24hr 300 mg</i>	89
		<i>diltiazem hcl extended release beads cap</i> <i>er 24hr 360 mg</i>	90

<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	90	<i>divalproex sodium tab delayed release 250 mg</i>	41
<i>diltiazem hcl tab 120 mg</i>	90	<i>divalproex sodium tab delayed release 500 mg</i>	41
<i>diltiazem hcl tab 30 mg</i>	90	<i>divalproex sodium tab er 24 hr 250 mg</i>	41
<i>diltiazem hcl tab 60 mg</i>	90	<i>divalproex sodium tab er 24 hr 500 mg</i>	41
<i>diltiazem hcl tab 90 mg</i>	90	<i>DIVIGEL GEL 1MG/GM</i>	120
<i>diltiazem hcl tab er 24hr 120 mg</i>	90	<i>dofetilide cap 125 mcg (0.125 mg)</i>	29
<i>diltiazem hcl tab er 24hr 180 mg</i>	90	<i>dofetilide cap 250 mcg (0.25 mg)</i>	29
<i>diltiazem hcl tab er 24hr 240 mg</i>	90	<i>dofetilide cap 500 mcg (0.5 mg)</i>	29
<i>diltiazem hcl tab er 24hr 300 mg</i>	90	<i>DOJOLVI LIQ 100%</i>	143
<i>diltiazem hcl tab er 24hr 360 mg</i>	90	<i>dolishale tab 90-20mcg</i>	97
<i>diltiazem hcl tab er 24hr 420 mg</i>	90	<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	150
<i>dilt-xr</i>	89	<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	150
<i>dimethyl fumarate capsule delayed release 120 mg</i>	153	<i>donepezil hydrochloride tab 10 mg</i>	150
<i>dimethyl fumarate capsule delayed release 240 mg</i>	153	<i>donepezil hydrochloride tab 23 mg</i>	150
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	153	<i>donepezil hydrochloride tab 5 mg</i>	150
<i>DIOVAN HCT TAB 160-12.5</i>	62	<i>DOPTLET TAB 20MG</i>	127
<i>DIOVAN HCT TAB 160-25MG</i>	62	<i>DORAL TAB 15MG</i>	130
<i>DIOVAN HCT TAB 320-12.5</i>	62	<i>DORYX MPC TAB 120MG</i>	156
<i>DIOVAN HCT TAB 320-25MG</i>	62	<i>DORYX TAB 200MG</i>	156
<i>DIOVAN HCT TAB 80/12.5</i>	62	<i>DORYX TAB 50MG</i>	156
<i>DIOVAN TAB 160MG</i>	59	<i>dorzolamide hcl ophth soln 2%</i>	147
<i>DIOVAN TAB 320MG</i>	59	<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	144
<i>DIOVAN TAB 40MG</i>	59	<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	144
<i>DIOVAN TAB 80MG</i>	59	<i>DOVATO TAB 50-300MG</i>	82
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	51	<i>DOVONEX CRE 0.005%</i>	107
<i>DIPROLENE OIN 0.05%</i>	109	<i>doxazosin mesylate tab 1 mg</i>	60
<i>dipyridamole tab 25 mg</i>	126	<i>doxazosin mesylate tab 2 mg</i>	60
<i>dipyridamole tab 50 mg</i>	127	<i>doxazosin mesylate tab 4 mg</i>	60
<i>dipyridamole tab 75 mg</i>	127	<i>doxazosin mesylate tab 8 mg</i>	60
<i>disopyramide phosphate cap 100 mg</i>	28	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	129
<i>disopyramide phosphate cap 150 mg</i>	28	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	129
<i>disulfiram tab 250 mg</i>	150	<i>doxepin hcl cap 100 mg</i>	46
<i>disulfiram tab 500 mg</i>	150	<i>doxepin hcl cap 10 mg</i>	46
<i>DITROPAN XL TAB 5MG</i>	164	<i>doxepin hcl cap 150 mg</i>	46
<i>DIURIL SUS 250/5ML</i>	114	<i>doxepin hcl cap 25 mg</i>	46
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	41	<i>doxepin hcl cap 50 mg</i>	46
<i>divalproex sodium tab delayed release 125 mg</i>	41		

<i>doxepin hcl cap 75 mg</i>	46	<i>drospirenone-ethinyl estradiol tab 3-0.03</i>	
<i>doxepin hcl conc 10 mg/ml</i>	46	<i>mg</i>	97
<i>doxepin hcl cream 5%</i>	107	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>doxercalciferol cap 0.5 mcg</i>	117	<i>tab 3-0.02-0.451 mg</i>	97
<i>doxercalciferol cap 1 mcg</i>	117	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>doxercalciferol cap 2.5 mcg</i>	117	<i>tab 3-0.03-0.451 mg</i>	97
<i>doxycycline (rosacea) cap delayed release</i>		DROXIA CAP 200MG	127
<i>40 mg</i>	111	DROXIA CAP 300MG	127
<i>doxycycline hyclate cap 100 mg</i>	156	DROXIA CAP 400MG	127
<i>doxycycline hyclate cap 50 mg</i>	156	<i>droxidopa cap 100 mg</i>	166
<i>doxycycline hyclate tab 100 mg</i>	156	<i>droxidopa cap 200 mg</i>	166
<i>doxycycline hyclate tab 20 mg</i>	156	<i>droxidopa cap 300 mg</i>	166
<i>doxycycline hyclate tab delayed release</i>		DRYSOL SOL 20%	111
<i>100 mg</i>	156	DUAVEE TAB 0.45-20	119
<i>doxycycline hyclate tab delayed release</i>		DUETACT TAB 30-2MG	47
<i>150 mg</i>	156	DUETACT TAB 30-4MG	47
<i>doxycycline hyclate tab delayed release</i>		<i>duloxetine hcl enteric coated pellets cap 20</i>	
<i>200 mg</i>	157	<i>mg (base eq)</i>	45
<i>doxycycline hyclate tab delayed release 50</i>		<i>duloxetine hcl enteric coated pellets cap 30</i>	
<i>mg</i>	156	<i>mg (base eq)</i>	45
<i>doxycycline hyclate tab delayed release 75</i>		<i>duloxetine hcl enteric coated pellets cap 40</i>	
<i>mg</i>	156	<i>mg (base eq)</i>	45
<i>doxycycline monohydrate cap 100 mg</i> ...	157	<i>duloxetine hcl enteric coated pellets cap 60</i>	
<i>doxycycline monohydrate cap 150 mg</i>	157	<i>mg (base eq)</i>	45
<i>doxycycline monohydrate cap 50 mg</i>	157	DUOPA SUS 4.63-20	75
<i>doxycycline monohydrate cap 75 mg</i>	157	DUPIXENT INJ 100/0.67	110
<i>doxycycline monohydrate for susp 25</i>		DUPIXENT INJ 200/1.14	110
<i>mg/5ml</i>	157	DUPIXENT INJ 200MG	110
<i>doxycycline monohydrate tab 100 mg</i> ...	157	DUPIXENT INJ 300/2ML	110
<i>doxycycline monohydrate tab 150 mg</i> ...	157	DUREZOL EMU 0.05%	146
<i>doxycycline monohydrate tab 50 mg</i>	157	<i>dutasteride cap 0.5 mg</i>	125
<i>doxycycline monohydrate tab 75 mg</i>	157	<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	
<i>doxylamine-pyridoxine tab delayed release</i>		.....	125
<i>10-10 mg</i>	52	DYMISTA SPR 137-50	142
DRIZALMA CAP 20MG DR	44	E	
DRIZALMA CAP 30MG DR	44	<i>e.e.s. 400 tab 400mg</i>	133
DRIZALMA CAP 40MG DR	44	E.E.S. GRAN SUS 200/5ML	133
DRIZALMA CAP 60MG DR	45	EC-NAPROSYN TAB 375MG	12
<i>dronabinol cap 10 mg</i>	52	<i>econazole nitrate cream 1%</i>	106
<i>dronabinol cap 2.5 mg</i>	52	<i>econtra ez</i>	101
<i>dronabinol cap 5 mg</i>	52	EDARBI TAB 40MG	59
<i>drospirenone-ethinyl estradiol tab 3-0.02</i>		EDARBI TAB 80MG	59
<i>mg</i>	97	EDARBYCLOR TAB 40-12.5	62
		EDARBYCLOR TAB 40-25MG	62

EDEX KIT 10MCG.....	93	EMFLAZA TAB 36MG.....	102
EDEX KIT 20MCG.....	93	EMFLAZA TAB 6MG.....	102
EDEX KIT 40MCG.....	93	EMGALITY INJ 100MG/ML.....	134
EDLUAR SUB 10MG.....	130	EMGALITY INJ 120MG/ML.....	134
EDLUAR SUB 5MG.....	130	EMPAVELI INJ 1080MG.....	126
EDURANT TAB 25MG.....	82	EMSAM DIS 12MG/24H.....	42
<i>efavirenz cap 200 mg</i>	82	EMSAM DIS 6MG/24HR.....	42
<i>efavirenz cap 50 mg</i>	82	EMSAM DIS 9MG/24HR.....	42
<i>efavirenz-emtricitabine-tenofovir df tab</i>		<i>emtricitabine caps 200 mg</i>	82
600-200-300 mg.....	82	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
<i>efavirenz-lamivudine-tenofovir df tab 400-</i>		<i>tab 100-150 mg</i>	82
300-300 mg.....	82	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
<i>efavirenz-lamivudine-tenofovir df tab 600-</i>		<i>tab 133-200 mg</i>	82
300-300 mg.....	82	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
<i>efavirenz tab 600 mg</i>	82	<i>tab 167-250 mg</i>	83
EFFER-K TAB 10MEQ.....	137	<i>emtricitabine-tenofovir disoproxil fumarate</i>	
EFFER-K TAB 20MEQ.....	137	<i>tab 200-300 mg</i>	83
EFFEXOR XR CAP 150MG.....	45	EMTRIVA CAP 200MG.....	83
EFFEXOR XR CAP 37.5MG.....	45	EMTRIVA SOL 10MG/ML.....	83
EFFEXOR XR CAP 75MG.....	45	EMVERM CHW 100MG.....	24
EFFIENT TAB 10MG.....	127	<i>enalapril maleate & hydrochlorothiazide tab</i>	
EFFIENT TAB 5MG.....	127	10-25 mg.....	62
EFUDEX CRE 5%.....	106	<i>enalapril maleate & hydrochlorothiazide tab</i>	
ELEPSIA XR TAB 1000MG.....	36	5-12.5 mg.....	62
ELEPSIA XR TAB 1500MG.....	36	<i>enalapril maleate oral soln 1 mg/ml</i>	58
ELESTRIN GEL 0.06%.....	120	<i>enalapril maleate tab 10 mg</i>	58
<i>eletriptan hydrobromide tab 20 mg (base</i>		<i>enalapril maleate tab 2.5 mg</i>	58
<i>equivalent)</i>	135	<i>enalapril maleate tab 20 mg</i>	58
<i>eletriptan hydrobromide tab 40 mg (base</i>		<i>enalapril maleate tab 5 mg</i>	58
<i>equivalent)</i>	135	ENBREL INJ 25/0.5ML.....	13
ELIDEL CRE 1%.....	111	ENBREL INJ 25MG.....	13
<i>elinest</i>	97	ENBREL INJ 50MG/ML.....	13
ELIQUIS ST P TAB 5MG.....	33	ENBREL MINI INJ 50MG/ML.....	13
ELIQUIS TAB 2.5MG.....	33	ENBREL SRCLK INJ 50MG/ML.....	13
ELIQUIS TAB 5MG.....	33	ENCARE SUP 100MG.....	165
ELMIRON CAP 100MG.....	124	ENDARI POW 5GM.....	127
ELYXYB SOL 120/4.8.....	135	<i>endocet</i>	20
EMCYT CAP 140MG.....	68	ENDOMETRIN SUP 100MG.....	165
EMEND CAP 80MG.....	53	<i>enoxaparin sodium inj 300 mg/3ml</i>	33
EMEND SUS 125MG.....	53	<i>enoxaparin sodium inj soln pref syr 100</i>	
EMEND TRIPAC PAK 80 & 125.....	53	<i>mg/ml</i>	34
EMFLAZA SUS 22.75/ML.....	102	<i>enoxaparin sodium inj soln pref syr 120</i>	
EMFLAZA TAB 18MG.....	102	<i>mg/0.8ml</i>	34
EMFLAZA TAB 30MG.....	102		

<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	34	EPIVIR TAB 150MG	83
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	33	EPIVIR TAB 300MG	83
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	33	<i>eplerenone tab 25 mg</i>	65
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	34	<i>eplerenone tab 50 mg</i>	65
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	34	EPOGEN INJ 2000/ML	127
<i>enpresse-28</i>	97	EPOGEN INJ 20000/ML.....	128
ENSPRYNG INJ	139	EPOGEN INJ 3000/ML	127
<i>entacapone tab 200 mg</i>	74	EPOGEN INJ 4000/ML	128
ENTADFI CAP 5-5MG	125	EPRONTIA SOL 25MG/ML.....	36
<i>entecavir tab 0.5 mg</i>	85	EPZICOM TAB 600-300.....	83
<i>entecavir tab 1 mg</i>	85	<i>eql nicotine polacrilex</i>	154
ENTRESTO TAB 24-26MG	93	<i>eq nicotine polacrilex</i>	154
ENTRESTO TAB 49-51MG.....	93	EQUETRO CAP 100MG	77
ENTRESTO TAB 97-103MG	93	EQUETRO CAP 200MG	77
<i>enulose</i>	123	EQUETRO CAP 300MG	77
ENVARBUS XR TAB 0.75MG.....	139	<i>ergocalciferol cap 1.25 mg (50000 unit)</i> .	166
ENVARBUS XR TAB 1MG	139	<i>ergoloid mesylates tab 1 mg</i>	154
ENVARBUS XR TAB 4MG.....	139	ERGOMAR SUB 2MG.....	134
EPANED SOL 1MG/ML	58	<i>ergotamine w/ caffeine tab 1-100 mg</i>	134
EPCLUSA PAK 150-37.5.....	85	ERIVEDGE CAP 150MG	67
EPCLUSA PAK 200-50MG.....	85	ERLEADA TAB 60MG	68
EPCLUSA TAB 400-100	85	<i>erlotinib hcl tab 100 mg (base equivalent)</i>	67
EPIDIOLEX SOL 100MG/ML	36	<i>erlotinib hcl tab 150 mg (base equivalent)</i>	67
EPIFOAM AER 1%	109	<i>erlotinib hcl tab 25 mg (base equivalent)</i> ..	67
<i>epinastine hcl ophth soln 0.05%</i>	147	ERMEZA SOL 150/5ML	158
EPINEPHRINE INJ 1MG/ML	166	<i>errin</i>	101
<i>epinephrine inj 1 mg/ml (1:1000)</i>	165	<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	25
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	165	<i>ery</i>	104
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	165	ERYPED SUS 200/5ML	133
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	165	ERYPED SUS 400/5ML.....	133
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	165	<i>ery-tab tab 250mg ec</i>	133
EPIPEN 2-PAK INJ 0.3MG	166	<i>ery-tab tab 500mg ec</i>	133
EPIPEN-JR INJ 0.15MG	166	<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	133
<i>epitol</i>	36	<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	133
EPIVIR SOL 10MG/ML	83	<i>erythromycin ethylsuccinate tab 400 mg</i>	133
		<i>erythromycin gel 2%</i>	104
		<i>erythromycin ophth oint 5 mg/gm</i>	145
		<i>erythromycin soln 2%</i>	104
		<i>erythromycin tab 250 mg</i>	133
		<i>erythromycin tab 500 mg</i>	133

<i>erythromycin tab delayed release 333 mg</i>	<i>estradiol td patch twice weekly 0.025 mg/24hr</i>
.....133	.....120
<i>ESBRIET CAP 267MG</i>.....156	<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>.....120
<i>ESBRIET TAB 267MG</i>.....156	<i>estradiol td patch twice weekly 0.05 mg/24hr</i>.....120
<i>ESBRIET TAB 801MG</i>.....156	<i>estradiol td patch twice weekly 0.075 mg/24hr</i>.....120
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>.....43	<i>estradiol td patch twice weekly 0.1 mg/24hr</i>.....120
<i>escitalopram oxalate tab 10 mg (base equiv)</i>.....43	.....120
<i>escitalopram oxalate tab 20 mg (base equiv)</i>.....43	<i>estradiol td patch weekly 0.025 mg/24hr</i>.....120
<i>escitalopram oxalate tab 5 mg (base equiv)</i>.....43	<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>.....120
<i>ESGIC TAB</i>.....14	<i>estradiol td patch weekly 0.05 mg/24hr</i>.....120
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>.....161	<i>estradiol td patch weekly 0.06 mg/24hr</i>.....120
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>.....161	<i>estradiol td patch weekly 0.075 mg/24hr</i>.....120
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>.....161	<i>estradiol td patch weekly 0.1 mg/24hr</i>.....120
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>.....161	<i>estradiol vaginal cream 0.1 mg/gm</i>.....165
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>.....161	<i>estradiol valerate im in oil 20 mg/ml</i>.....120
<i>estarylla</i>.....97	<i>estradiol valerate im in oil 40 mg/ml</i>.....120
<i>estazolam tab 1 mg</i>.....130	<i>ESTRING MIS 7.5/24HR</i>.....165
<i>estazolam tab 2 mg</i>.....130	<i>ESTROGEL GEL</i>.....120
<i>ESTRACE TAB 0.5MG</i>.....120	<i>eszopiclone tab 1 mg</i>.....130
<i>ESTRACE TAB 1MG</i>.....120	<i>eszopiclone tab 2 mg</i>.....130
<i>ESTRACE TAB 2MG</i>.....120	<i>eszopiclone tab 3 mg</i>.....130
<i>ESTRACE VAG CRE 0.01%</i>.....165	<i>ethacrynic acid tab 25 mg</i>.....113
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>.....119	<i>ethambutol hcl tab 100 mg</i>.....66
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>.....119	<i>ethambutol hcl tab 400 mg</i>.....66
<i>estradiol tab 0.5 mg</i>.....120	<i>ethosuximide cap 250 mg</i>.....41
<i>estradiol tab 1 mg</i>.....120	<i>ethosuximide soln 250 mg/5ml</i>.....41
<i>estradiol tab 2 mg</i>.....120	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>.....97
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>.....120	<i>etodolac cap 200 mg</i>.....12
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>.....120	<i>etodolac cap 300 mg</i>.....12
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>.....120	<i>etodolac tab 400 mg</i>.....12
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>.....120	<i>etodolac tab 500 mg</i>.....12
<i>estradiol td gel 1 mg/gm (0.1%)</i>.....120	<i>etodolac tab er 24hr 400 mg</i>.....12
	<i>etodolac tab er 24hr 500 mg</i>.....12
	<i>etodolac tab er 24hr 600 mg</i>.....12
	<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>.....101
	<i>etoposide cap 50 mg</i>.....74

<i>etravirine tab 100 mg</i>	83	<i>ezetimibe-simvastatin tab 10-20 mg</i>	54
<i>etravirine tab 200 mg</i>	83	<i>ezetimibe-simvastatin tab 10-40 mg</i>	55
EUCRISA OIN 2%	111	<i>ezetimibe-simvastatin tab 10-80 mg</i>	55
<i>euthyrox</i>	158	<i>ezetimibe tab 10 mg</i>	57
EVAMIST SPR 1.53MG	121	F	
<i>everolimus tab 0.25 mg</i>	139	<i>fa-8</i>	127
<i>everolimus tab 0.5 mg</i>	139	<i>falmina</i>	98
<i>everolimus tab 0.75 mg</i>	139	<i>famciclovir tab 125 mg</i>	86
<i>everolimus tab 10 mg</i>	70	<i>famciclovir tab 250 mg</i>	86
<i>everolimus tab 1 mg</i>	139	<i>famciclovir tab 500 mg</i>	86
<i>everolimus tab 2.5 mg</i>	70	<i>famotidine for susp 40 mg/5ml</i>	161
<i>everolimus tab 5 mg</i>	70	<i>famotidine tab 20 mg</i>	161
<i>everolimus tab 7.5 mg</i>	70	<i>famotidine tab 40 mg</i>	161
<i>everolimus tab for oral susp 2 mg</i>	70	FARESTON TAB 60MG	68
<i>everolimus tab for oral susp 3 mg</i>	70	FARXIGA TAB 10MG	50
<i>everolimus tab for oral susp 5 mg</i>	70	FARXIGA TAB 5MG	50
EVISTA TAB 60MG	116	FASENRA PEN INJ 30MG/ML	29
EVOTAZ TAB 300-150	83	<i>fayosim</i>	98
EVRYSDI SOL	143	<i>febuxostat tab 40 mg</i>	125
EXELDERM CRE 1%	106	<i>febuxostat tab 80 mg</i>	126
EXELDERM SOL 1%	106	<i>felbamate susp 600 mg/5ml</i>	40
EXELON DIS 13.3/24	151	<i>felbamate tab 400 mg</i>	40
EXELON DIS 4.6MG/24	150	<i>felbamate tab 600 mg</i>	40
EXELON DIS 9.5MG/24	150	FELDENE CAP 10MG	12
<i>exemestane tab 25 mg</i>	68	FELDENE CAP 20MG	12
EXFORGEH/10- TAB 160-12.5	62	<i>felodipine tab er 24hr 10 mg</i>	90
EXFORGEH/10- TAB 160-25	62	<i>felodipine tab er 24hr 2.5 mg</i>	90
EXFORGEH/10- TAB 320-25	62	<i>felodipine tab er 24hr 5 mg</i>	90
EXFORGEH/5- TAB 160-12.5	62	FEMARA TAB 2.5MG	68
EXFORGEH/5- TAB 160-25	62	FEMRING MIS 0.05/24H	165
EXFORGE TAB 10-160MG	62	FEMRING MIS 0.1MG/24	165
EXFORGE TAB 10-320MG	62	<i>fenofibrate cap 150 mg</i>	55
EXFORGE TAB 5-160MG	62	<i>fenofibrate cap 50 mg</i>	55
EXFORGE TAB 5-320MG	62	<i>fenofibrate micronized cap 130 mg</i>	55
EXJADE TAB 125MG	51	<i>fenofibrate micronized cap 134 mg</i>	55
EXJADE TAB 250MG	51	<i>fenofibrate micronized cap 200 mg</i>	55
EXJADE TAB 500MG	51	<i>fenofibrate micronized cap 43 mg</i>	55
EXKIVITY CAP 40MG	67	<i>fenofibrate micronized cap 67 mg</i>	55
EYSUVIS DRO 0.25%	146	<i>fenofibrate tab 145 mg</i>	55
EZALLOR SPR CAP 10MG	56	<i>fenofibrate tab 160 mg</i>	56
EZALLOR SPR CAP 20MG	56	<i>fenofibrate tab 48 mg</i>	55
EZALLOR SPR CAP 40MG	56	<i>fenofibrate tab 54 mg</i>	55
EZALLOR SPR CAP 5MG	56	<i>fenopropfen calcium tab 600 mg</i>	12
<i>ezetimibe-simvastatin tab 10-10 mg</i>	54		

<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	15	FIRVANQ SOL 50MG/ML.....	25
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	15	<i>flac</i>	148
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	15	FLAREX SUS 0.1% OP	146
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	15	<i>flavoxate hcl tab 100 mg</i>	164
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	15	<i>flecainide acetate tab 100 mg</i>	28
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	15	<i>flecainide acetate tab 150 mg</i>	28
<i>fentanyl td patch 72hr 100 mcg/hr</i>	15	<i>flecainide acetate tab 50 mg</i>	28
<i>fentanyl td patch 72hr 12 mcg/hr</i>	15	FLECTOR DIS 1.3%	105
<i>fentanyl td patch 72hr 25 mcg/hr</i>	15	FLEQSUVY SUS 25MG/5ML.....	142
<i>fentanyl td patch 72hr 50 mcg/hr</i>	15	FLOMAX CAP 0.4MG	125
<i>fentanyl td patch 72hr 75 mcg/hr</i>	15	FLOVENT DISK AER 100MCG	30
FENTORA TAB 100MCG	15	FLOVENT DISK AER 250MCG.....	30
FENTORA TAB 200MCG.....	15	FLOVENT DISK AER 50MCG	30
FENTORA TAB 400MCG.....	15	FLOVENT HFA AER 110MCG	30
FENTORA TAB 600MCG.....	15	FLOVENT HFA AER 220MCG	30
FENTORA TAB 800MCG.....	15	FLOVENT HFA AER 44MCG	30
FERPRX 2-DAY TAB 1000MG	51	<i>fluconazole for susp 10 mg/ml</i>	53
FERRIPROX SOL 100MG/ML	51	<i>fluconazole for susp 40 mg/ml</i>	53
FERRIPROX TAB 500MG	51	<i>fluconazole tab 100 mg</i>	53
<i>fesoterodine fumarate tab er 24hr 4 mg</i> .	164	<i>fluconazole tab 150 mg</i>	53
<i>fesoterodine fumarate tab er 24hr 8 mg</i> .	164	<i>fluconazole tab 200 mg</i>	53
FETZIMA CAP 120MG.....	45	<i>fluconazole tab 50 mg</i>	53
FETZIMA CAP 20MG	45	<i>fludrocortisone acetate tab 0.1 mg</i>	103
FETZIMA CAP 40MG	45	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	143
FETZIMA CAP 80MG	45	.....	148
FETZIMA CAP TITRATIO	45	<i>fluocinolone acetonide (otic) oil 0.01%</i> ...	148
<i>fexmid</i>	142	<i>fluocinolone acetonide cream 0.01%</i>	109
FIASP INJ 100/ML.....	49	<i>fluocinolone acetonide cream 0.025%</i> ...	109
FINACEA AER 15%	111	<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	109
FINACEA GEL 15%	111	.....	109
<i>finasteride tab 5 mg</i>	125	<i>fluocinolone acetonide oint 0.025%</i>	109
<i>ingolimod hcl cap 0.5 mg (base equiv)</i> ..	153	<i>fluocinolone acetonide soln 0.01%</i>	109
FINTEPLA SOL 2.2MG/ML.....	36	<i>fluocinonide cream 0.05%</i>	109
<i>finzala chw fe 1/20</i>	98	<i>fluocinonide gel 0.05%</i>	109
FIRAZYR INJ 30MG/3ML	126	<i>fluocinonide oint 0.05%</i>	109
FIRDAPSE TAB 10MG	65	<i>fluocinonide soln 0.05%</i>	109
FIRST PANTPR SUS 4MG/ML	161	<i>fluorometholone ophth susp 0.1%</i>	146
FIRVANQ SOL 25MG/ML.....	25	<i>fluorouracil cream 0.5%</i>	107
		<i>fluorouracil cream 5%</i>	107
		<i>fluorouracil soln 2%</i>	107
		<i>fluorouracil soln 5%</i>	107
		<i>fluoxetine hcl cap 10 mg</i>	43
		<i>fluoxetine hcl cap 20 mg</i>	43
		<i>fluoxetine hcl cap 40 mg</i>	43

<i>fluoxetine hcl cap delayed release 90 mg</i>	43	<i>fluticasone-salmeterol inhal aerosol 230-21</i>	
<i>fluoxetine hcl solution 20 mg/5ml</i>	43	<i>mcg/act</i>	32
<i>fluoxetine hcl tab 60 mg</i>	43	<i>fluticasone-salmeterol inhal aerosol 45-21</i>	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	80	<i>mcg/act</i>	32
<i>fluphenazine hcl oral conc 5 mg/ml</i>	81	<i>fluvastatin sodium cap 20 mg (base</i>	
<i>fluphenazine hcl tab 10 mg</i>	81	<i>equivalent)</i>	56
<i>fluphenazine hcl tab 1 mg</i>	81	<i>fluvastatin sodium cap 40 mg (base</i>	
<i>fluphenazine hcl tab 2.5 mg</i>	81	<i>equivalent)</i>	56
<i>fluphenazine hcl tab 5 mg</i>	81	<i>fluvastatin sodium tab er 24 hr 80 mg (base</i>	
<i>flurandrenolide cream 0.05%</i>	109	<i>equivalent)</i>	56
<i>flurandrenolide lotion 0.05%</i>	109	<i>fluvoxamine maleate cap er 24hr 100 mg</i>	43
<i>flurbiprofen sodium ophth soln 0.03%</i>	147	<i>fluvoxamine maleate cap er 24hr 150 mg</i>	43
<i>flurbiprofen tab 100 mg</i>	12	<i>fluvoxamine maleate tab 100 mg</i>	43
<i>flurbiprofen tab 50 mg</i>	12	<i>fluvoxamine maleate tab 25 mg</i>	43
<i>fluticasone propionate aer pow ba 100</i>		<i>fluvoxamine maleate tab 50 mg</i>	43
<i>mcg/act</i>	31	<i>FML FORTE SUS 0.25% OP</i>	146
<i>fluticasone propionate aer pow ba 250</i>		<i>FOCALIN TAB 10MG</i>	7
<i>mcg/act</i>	31	<i>FOCALIN TAB 2.5MG</i>	7
<i>fluticasone propionate aer pow ba 50</i>		<i>FOCALIN TAB 5MG</i>	7
<i>mcg/act</i>	30	<i>FOCALIN XR CAP 10MG</i>	7
<i>fluticasone propionate cream 0.05%</i>	109	<i>FOCALIN XR CAP 15MG</i>	7
<i>fluticasone propionate hfa inhal aer 110</i>		<i>FOCALIN XR CAP 20MG</i>	7
<i>mcg/act (125/valve)</i>	31	<i>FOCALIN XR CAP 25MG</i>	7
<i>fluticasone propionate hfa inhal aer 220</i>		<i>FOCALIN XR CAP 30MG</i>	7
<i>mcg/act (250/valve)</i>	31	<i>FOCALIN XR CAP 35MG</i>	7
<i>fluticasone propionate hfa inhal aero 44</i>		<i>FOCALIN XR CAP 40MG</i>	7
<i>mcg/act (50/valve)</i>	31	<i>FOCALIN XR CAP 5MG</i>	7
<i>fluticasone propionate lotion 0.05%</i>	109	<i>folic acid tab 1 mg</i>	127
<i>fluticasone propionate oint 0.005%</i>	109	<i>folic acid tab 400 mcg</i>	127
<i>fluticasone-salmeterol aer powder ba 100-</i>		<i>FOLLISTIM AQ INJ 300UNIT</i>	115
<i>50 mcg/act</i>	32	<i>FOLLISTIM AQ INJ 600UNIT</i>	115
<i>fluticasone-salmeterol aer powder ba 113-</i>		<i>FOLLISTIM AQ INJ 900UNIT</i>	115
<i>14 mcg/act</i>	32	<i>fondaparinux sodium subcutaneous inj 10</i>	
<i>fluticasone-salmeterol aer powder ba 232-</i>		<i>mg/0.8ml</i>	34
<i>14 mcg/act</i>	32	<i>fondaparinux sodium subcutaneous inj 2.5</i>	
<i>fluticasone-salmeterol aer powder ba 250-</i>		<i>mg/0.5ml</i>	34
<i>50 mcg/act</i>	32	<i>fondaparinux sodium subcutaneous inj 5</i>	
<i>fluticasone-salmeterol aer powder ba 500-</i>		<i>mg/0.4ml</i>	34
<i>50 mcg/act</i>	32	<i>fondaparinux sodium subcutaneous inj 7.5</i>	
<i>fluticasone-salmeterol aer powder ba 55-14</i>		<i>mg/0.6ml</i>	34
<i>mcg/act</i>	32	<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	
<i>fluticasone-salmeterol inhal aerosol 115-21</i>			32
<i>mcg/act</i>	32	<i>FORTEO INJ 600/2.4</i>	115
		<i>FORTESTA GEL 10MG/ACT</i>	23

FOSAMAX + D TAB 70-2800	115	FUZEON INJ 90MG	83
FOSAMAX + D TAB 70-5600.....	115	FYCOMPA SUS 0.5MG/ML.....	34
FOSAMAX TAB 70MG	115	FYCOMPA TAB 10MG.....	35
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	83	FYCOMPA TAB 12MG.....	35
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	26	FYCOMPA TAB 2MG	34
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	62	FYCOMPA TAB 4MG	35
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	63	FYCOMPA TAB 6MG	35
<i>fosinopril sodium tab 10 mg</i>	58	FYCOMPA TAB 8MG	35
<i>fosinopril sodium tab 20 mg</i>	58	FYLNETRA INJ 6MG/0.6	128
<i>fosinopril sodium tab 40 mg</i>	58	G	
FOSRENOL CHW 1000MG	123	<i>gabapentin (once-daily) tab 300 mg</i>	153
FOSRENOL CHW 500MG.....	123	<i>gabapentin (once-daily) tab 600 mg</i>	153
FOSRENOL CHW 750MG	123	<i>gabapentin cap 100 mg</i>	36
FOSRENOL POW 1000MG	123	<i>gabapentin cap 300 mg</i>	36
FOSRENOL POW 750MG	123	<i>gabapentin cap 400 mg</i>	36
FOTIVDA CAP 0.89MG.....	70	<i>gabapentin oral soln 250 mg/5ml</i>	36
FOTIVDA CAP 1.34MG.....	70	<i>gabapentin tab 600 mg</i>	36
FRAGMIN INJ 10000/ML.....	34	<i>gabapentin tab 800 mg</i>	36
FRAGMIN INJ 12500UNT	34	GABITRIL TAB 12MG	40
FRAGMIN INJ 15000UNT.....	34	GABITRIL TAB 16MG	40
FRAGMIN INJ 18000UNT.....	34	GABITRIL TAB 2MG.....	40
FRAGMIN INJ 2500/0.2.....	34	GABITRIL TAB 4MG.....	40
FRAGMIN INJ 2500/ML.....	34	GALAFOLD CAP 123MG	117
FRAGMIN INJ 5000/0.2.....	34	<i>galantamine hydrobromide cap er 24hr 16 mg</i>	151
FRAGMIN INJ 7500/0.3.....	34	<i>galantamine hydrobromide cap er 24hr 24 mg</i>	151
FRAGMIN INJ 95000UNT	34	<i>galantamine hydrobromide cap er 24hr 8 mg</i>	151
FREESTYLE KIT SENSOR.....	133	<i>galantamine hydrobromide oral soln 4 mg/ml</i>	151
FREESTYLE MIS READER	133	<i>galantamine hydrobromide tab 12 mg</i>	151
FREESTY LIBR KIT 2 SENSOR.....	133	<i>galantamine hydrobromide tab 4 mg</i>	151
FREESTY LIBR MIS 2 READER	133	<i>galantamine hydrobromide tab 8 mg</i>	151
FROVA TAB 2.5MG.....	135	GALZIN CAP 25MG	138
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	135	GALZIN CAP 50MG	138
FULPHILA INJ 6/0.6ML	128	GANIRELIX AC INJ 250/0.5.....	116
<i>furosemide inj 10 mg/ml</i>	113	<i>gatifloxacin ophth soln 0.5%</i>	145
<i>furosemide oral soln 10 mg/ml</i>	113	GATTEX KIT 5MG	124
<i>furosemide oral soln 8 mg/ml</i>	113	<i>gavilyte-c</i>	132
<i>furosemide tab 20 mg</i>	113	<i>gavilyte-g</i>	132
<i>furosemide tab 40 mg</i>	114	GAVRETO CAP 100MG.....	70
<i>furosemide tab 80 mg</i>	114	<i>gefitinib tab 250 mg</i>	67
		GELNIQUE GEL 10%.....	164

<i>gemfibrozil tab 600 mg</i>	56	<i>glyburide micronized tab 3 mg</i>	50
GENERESS FE CHW.....	98	<i>glyburide micronized tab 6 mg</i>	50
<i>generlac</i>	123	<i>glyburide tab 1.25 mg</i>	50
<i>gengraf</i>	139	<i>glyburide tab 2.5 mg</i>	50
<i>gentamicin sulfate inj 40 mg/ml</i>	10	<i>glyburide tab 5 mg</i>	50
<i>gentamicin sulfate oint 0.1%</i>	106	GLYCATE TAB 1.5MG.....	160
<i>gentamicin sulfate ophth soln 0.3%</i>	145	GLYCOPYRROLA TAB 1.5MG.....	160
GENVOYA TAB.....	83	<i>glycopyrrolate inj 0.2 mg/ml</i>	160
GILENYA CAP 0.25MG.....	153	<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	160
GILENYA CAP 0.5MG.....	153	<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i> 160	
GILOTRIF TAB 20MG.....	70	<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	160
GILOTRIF TAB 30MG.....	70	<i>glycopyrrolate oral soln 1 mg/5ml</i>	160
GILOTRIF TAB 40MG.....	70	<i>glycopyrrolate tab 1 mg</i>	160
GIVLAARI INJ 189MG/ML.....	126	<i>glycopyrrolate tab 2 mg</i>	160
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	153	<i>glydo</i>	111
<i>glatopa</i>	153	GLYNASE TAB 1.5MG.....	50
GLEEVEC TAB 100MG.....	70	GLYNASE TAB 3MG.....	50
GLEEVEC TAB 400MG.....	70	GLYNASE TAB 6MG.....	50
GLEOSTINE CAP 100MG.....	66	GLYXAMBI TAB 10-5 MG.....	47
GLEOSTINE CAP 10MG.....	66	GLYXAMBI TAB 25-5 MG.....	47
GLEOSTINE CAP 40MG.....	66	GOLYTELY SOL.....	132
<i>glimepiride tab 1 mg</i>	50	GONAL-F INJ 1050UNIT.....	115
<i>glimepiride tab 2 mg</i>	50	GONAL-F INJ 450UNIT.....	115
<i>glimepiride tab 4 mg</i>	50	GONAL-F RFF INJ 300/0.5.....	115
<i>glipizide-metformin hcl tab 2.5-250 mg</i> ...47		GONAL-F RFF INJ 450/0.75.....	115
<i>glipizide-metformin hcl tab 2.5-500 mg</i> ...47		GONAL-F RFF INJ 75UNIT.....	115
<i>glipizide-metformin hcl tab 5-500 mg</i>.....47		GONAL-F RFF INJ 900/1.5.....	116
<i>glipizide tab 10 mg</i>	50	<i>goodsense aspirin</i>	14
<i>glipizide tab 5 mg</i>	50	<i>goodsense nicotine polacr</i>	154
<i>glipizide tab er 24hr 10 mg</i>	50	GRALISE TAB 300MG.....	153
<i>glipizide tab er 24hr 5 mg</i>	50	GRALISE TAB 450MG.....	153
<i>glipizide xl</i>	50	GRALISE TAB 600MG.....	153
GLUCAGEN INJ HYPOKIT.....	48	GRALISE TAB 750MG.....	154
GLUCAGON KIT 1MG.....	48	GRALISE TAB 900MG.....	154
GLUCOTROL XL TAB 10MG.....	50	<i>granisetron hcl tab 1 mg</i>	52
GLUCOTROL XL TAB 2.5MG.....	50	GRASTEK SUB 2800BAU.....	9
GLUCOTROL XL TAB 5MG.....	50	<i>griseofulvin microsize susp 125 mg/5ml</i> ...53	
GLUMETZA TAB 1000MG.....	48	<i>griseofulvin microsize tab 500 mg</i>	53
GLUMETZA TAB 500MG.....	48	<i>griseofulvin ultramicrosize tab 125 mg</i>	53
<i>glyburide-metformin tab 1.25-250 mg</i>.....47		<i>griseofulvin ultramicrosize tab 250 mg</i>	53
<i>glyburide-metformin tab 2.5-500 mg</i>.....47		<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	103
<i>glyburide-metformin tab 5-500 mg</i>.....47			
<i>glyburide micronized tab 1.5 mg</i>	50		

<i>guanfacine hcl tab 1 mg</i>	60	<i>heparin sodium (porcine) inj 20000 unit/ml</i>	34
<i>guanfacine hcl tab 2 mg</i>	60	<i>heparin sodium (porcine) inj 5000 unit/ml</i>	34
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	5	HETLIOZ CAP 20MG	131
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	5	HETLIOZ LQ SUS 4MG/ML.....	132
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	5	HORIZANT TAB 300MG ER.....	154
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	5	HORIZANT TAB 600MG ER.....	154
GVOKE HYPO 2 INJ .5/.1ML	48	HUMIRA INJ 10/0.1ML	10
GVOKE HYPO 2 INJ 1MG/.2ML.....	48	HUMIRA INJ 20/0.2ML.....	10
GVOKE KIT SOL 1MG/0.2M	48	HUMIRA INJ 40/0.4ML.....	10
GVOKE PFS INJ	48	HUMIRA KIT 40MG/0.8	10
GYNAZOLE-1 CRE 2%	165	HUMIRA PEDIA INJ CROHNS	10
GYNOL II GEL 3%	165	HUMIRA PEN INJ 40/0.4ML	10
H		HUMIRA PEN INJ CD/UC/HS	10
HAEGARDA INJ 2000UNIT	126	HUMIRA PEN INJ PS/UV	10
HAEGARDA INJ 3000UNIT	126	HUMIRA PEN KIT CD/UC/HS	10
<i>hailey 24 fe</i>	98	HUMIRA PEN KIT PS/UV	11
HALCION TAB 0.25MG.....	130	HUMULIN R INJ U-500.....	49
<i>halobetasol propionate cream 0.05%</i>	110	HYCAMTIN CAP 0.25MG.....	74
<i>halobetasol propionate oint 0.05%</i>	110	HYCAMTIN CAP 1MG	74
<i>haloperidol decanoate im soln 100 mg/ml</i>	79	<i>hydralazine hcl tab 100 mg</i>	65
<i>haloperidol decanoate im soln 50 mg/ml</i>	79	<i>hydralazine hcl tab 10 mg</i>	65
<i>haloperidol lactate inj 5 mg/ml</i>	79	<i>hydralazine hcl tab 25 mg</i>	65
<i>haloperidol lactate oral conc 2 mg/ml</i>	79	<i>hydralazine hcl tab 50 mg</i>	65
<i>haloperidol tab 0.5 mg</i>	79	HYDREA CAP 500MG	74
<i>haloperidol tab 10 mg</i>	79	HYDRO 40 AER FOAM	110
<i>haloperidol tab 1 mg</i>	79	<i>hydrochlorothiazide cap 12.5 mg</i>	114
<i>haloperidol tab 20 mg</i>	79	<i>hydrochlorothiazide tab 12.5 mg</i>	114
<i>haloperidol tab 2 mg</i>	79	<i>hydrochlorothiazide tab 25 mg</i>	114
<i>haloperidol tab 5 mg</i>	79	<i>hydrochlorothiazide tab 50 mg</i>	114
HARVONI PAK	85	<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	20
HARVONI PAK 45-200MG	85	<i>hydrocodone-acetaminophen tab 10-300 mg</i>	20
HARVONI TAB 90-400MG	85	<i>hydrocodone-acetaminophen tab 10-325 mg</i>	20
<i>heather</i>	101	<i>hydrocodone-acetaminophen tab 5-300 mg</i>	20
HEMANGEOL SOL 4.28/ML	88	<i>hydrocodone-acetaminophen tab 5-325 mg</i>	20
HEPAGAM B INJ.....	148	<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	20
HEPARIN SOD INJ 5000/0.5	34		
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	34		
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	34		

<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	20	<i>hydrocortisone lotion 2.5%</i>	110
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	103	<i>hydrocortisone oint 2.5%</i>	110
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	103	<i>hydrocortisone tab 10 mg</i>	102
HYDROCODONE BITARTRATE CAP ER 12HR 10 MG.....	15	<i>hydrocortisone tab 20 mg</i>	102
HYDROCODONE BITARTRATE CAP ER 12HR 15 MG	15	<i>hydrocortisone tab 5 mg</i>	102
HYDROCODONE BITARTRATE CAP ER 12HR 20 MG	15	<i>hydrocortisone valerate cream 0.2%</i>	110
HYDROCODONE BITARTRATE CAP ER 12HR 30 MG	15	<i>hydrocortisone valerate oint 0.2%</i>	110
HYDROCODONE BITARTRATE CAP ER 12HR 40 MG	15	<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	148
HYDROCODONE BITARTRATE CAP ER 12HR 50 MG	16	<i>hydromet</i>	103
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	16	<i>hydromorphone hcl liqd 1 mg/ml</i>	16
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	16	<i>hydromorphone hcl tab 2 mg</i>	16
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	16	<i>hydromorphone hcl tab 4 mg</i>	16
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	16	<i>hydromorphone hcl tab 8 mg</i>	16
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	16	HYDROMORPHON SUP 3MG	16
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	16	HYDROXYCHLOROQUINE SULFATE TAB 100 MG.....	65
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	16	<i>hydroxychloroquine sulfate tab 200 mg</i> ...65	
<i>hydrocodone-ibuprofen tab 10-200 mg</i> ...	20	HYDROXYCHLOROQUINE SULFATE TAB 300 MG.....	65
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	20	HYDROXYCHLOROQUINE SULFATE TAB 400 MG.....	65
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> ..	20	<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	68
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	103	<i>hydroxyurea cap 500 mg</i>	74
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	24	<i>hydroxyzine hcl syrup 10 mg/5ml</i>	27
<i>hydrocortisone butyrate lotion 0.1%</i>	110	<i>hydroxyzine hcl tab 10 mg</i>	27
<i>hydrocortisone butyrate oint 0.1%</i>	110	<i>hydroxyzine hcl tab 25 mg</i>	27
<i>hydrocortisone butyrate soln 0.1%</i>	110	<i>hydroxyzine hcl tab 50 mg</i>	27
<i>hydrocortisone cream 2.5%</i>	24	<i>hydroxyzine pamoate cap 100 mg</i>	27
<i>hydrocortisone enema 100 mg/60ml</i>	24	<i>hydroxyzine pamoate cap 25 mg</i>	27
		<i>hydroxyzine pamoate cap 50 mg</i>	27
		HYFTOR GEL 0.2%.....	111
		<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i> 160	
		<i>hyoscyamine sulfate tab disint 0.125 mg</i> 160	
		<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	160
		HYPERHEP B INJ.....	148
		HYRIMOZ INJ 40/0.4ML	11
		HYRIMOZ INJ 40/0.8ML	11
		HYSINGLA ER TAB 100 MG	16
		HYSINGLA ER TAB 120 MG	16
		HYSINGLA ER TAB 20 MG.....	16
		HYSINGLA ER TAB 30 MG.....	16

HYSINGLA ER TAB 40 MG.....	16	<i>imipramine pamoate cap 75 mg</i>	46
HYSINGLA ER TAB 60 MG.....	16	<i>imiquimod cream 5%</i>	111
HYSINGLA ER TAB 80 MG.....	16	IMITREX INJ 4MG/0.5	135
HYZAAR TAB 100-12.5	63	IMITREX INJ 6MG/0.5	135
HYZAAR TAB 100-25	63	IMITREX SPR 20MG/ACT	135
HYZAAR TAB 50-12.5	63	IMITREX SPR 5MG/ACT	135
I		IMITREX TAB 100MG	135
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	115	IMITREX TAB 25MG	135
IBRANCE CAP 100MG.....	70	IMITREX TAB 50MG	135
IBRANCE CAP 125MG	70	IMPAVIDO CAP 50MG	24
IBRANCE CAP 75MG.....	70	IMURAN TAB 50MG	139
IBRANCE TAB 125MG.....	70	INBRIJA CAP 42MG.....	75
<i>ibu</i>	12	<i>incassia</i>	101
<i>ibuprofen tab 400 mg</i>	12	INCRELEX INJ 40MG/4ML	116
<i>ibuprofen tab 600 mg</i>	12	INCRUSE ELPT INH 62.5MCG	29
<i>ibuprofen tab 800 mg</i>	12	<i>indapamide tab 1.25 mg</i>	114
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	126	<i>indapamide tab 2.5 mg</i>	114
ICLUSIG TAB 15MG.....	70	<i>indomethacin cap 25 mg</i>	12
ICLUSIG TAB 45MG.....	70	<i>indomethacin cap 50 mg</i>	12
<i>icosapent ethyl cap 0.5 gm</i>	55	<i>indomethacin cap er 75 mg</i>	12
<i>icosapent ethyl cap 1 gm</i>	55	INGREZZA CAP 40-80MG.....	152
IDHIFA TAB 100MG	70	INGREZZA CAP 40MG	152
IDHIFA TAB 50MG	70	INGREZZA CAP 60MG	152
ILEVRO DRO 0.3% OP	147	INGREZZA CAP 80MG	152
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	70	INLYTA TAB 1MG	70
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	70	INLYTA TAB 5MG.....	70
IMBRUVICA CAP 140MG	70	INQOVI TAB 35-100MG.....	69
IMBRUVICA CAP 70MG	70	INREBIC CAP 100MG.....	70
IMBRUVICA SUS 70MG/ML	70	INTELENCE TAB 100MG	83
IMBRUVICA TAB 140MG.....	70	INTELENCE TAB 200MG.....	83
IMBRUVICA TAB 280MG	70	INTELENCE TAB 25MG	83
IMBRUVICA TAB 420MG	70	INTRAROSA SUP 6.5MG	165
IMBRUVICA TAB 560MG	70	<i>introvale</i>	98
IMCIVREE INJ 10MG/ML.....	4	INTUNIV TAB 1MG.....	5
<i>imipramine hcl tab 10 mg</i>	46	INTUNIV TAB 2MG	5
<i>imipramine hcl tab 25 mg</i>	46	INTUNIV TAB 3MG	5
<i>imipramine hcl tab 50 mg</i>	46	INTUNIV TAB 4MG	5
<i>imipramine pamoate cap 100 mg</i>	46	INVEGA TAB 1.5MG.....	78
<i>imipramine pamoate cap 125 mg</i>	46	INVEGA TAB 3MG	78
<i>imipramine pamoate cap 150 mg</i>	46	INVEGA TAB 6MG	78
		INVEGA TAB 9MG	78
		INVELTYS SUS 1%	146
		IOPIDINE SOL 1% OP	145

<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	32	<i>isotretinoin cap 25 mg</i>	105
<i>ipratropium bromide inhal soln 0.02%</i>	29	<i>isotretinoin cap 30 mg</i>	105
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	143	<i>isotretinoin cap 35 mg</i>	105
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	143	<i>isotretinoin cap 40 mg</i>	105
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	63	<i>isradipine cap 2.5 mg</i>	90
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	63	<i>isradipine cap 5 mg</i>	90
<i>irbesartan tab 150 mg</i>	60	ISTURISA TAB 10MG	114
<i>irbesartan tab 300 mg</i>	60	ISTURISA TAB 1MG	114
<i>irbesartan tab 75 mg</i>	60	ISTURISA TAB 5MG	114
IRESSA TAB 250MG	67	<i>itraconazole cap 100 mg</i>	53
ISENTRESS CHW 100MG	83	<i>itraconazole oral soln 10 mg/ml</i>	53
ISENTRESS CHW 25MG	83	<i>ivermectin cream 1%</i>	111
ISENTRESS HD TAB 600MG	83	<i>ivermectin lotion 0.5%</i>	112
ISENTRESS POW 100MG	83	<i>ivermectin tab 3 mg</i>	24
ISENTRESS TAB 400MG	83	J	
<i>isibloom</i>	98	JADENU SPRKL GRA 180MG	51
<i>isibloom tab</i>	98	JADENU SPRKL GRA 360MG	51
<i>isoniazid inj 100 mg/ml</i>	66	JADENU SPRKL GRA 90MG	51
<i>isoniazid syrup 50 mg/5ml</i>	66	JADENU TAB 180MG	51
<i>isoniazid tab 100 mg</i>	66	JADENU TAB 360MG	51
<i>isoniazid tab 300 mg</i>	66	JADENU TAB 90MG	51
<i>isoproterenol hcl inj 0.2 mg/ml</i>	32	JAKAFI TAB 10MG	71
ISOPTO ATROP SOL 1% OP	144	JAKAFI TAB 15MG	71
ISORDIL TAB 5MG	26	JAKAFI TAB 20MG	71
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	93	JAKAFI TAB 25MG	71
<i>isosorbide dinitrate tab 10 mg</i>	26	JAKAFI TAB 5MG	71
<i>isosorbide dinitrate tab 20 mg</i>	26	JALYN CAP	125
<i>isosorbide dinitrate tab 30 mg</i>	26	<i>jantoven</i>	33
<i>isosorbide dinitrate tab 5 mg</i>	26	JANUMET TAB 50-1000	47
<i>isosorbide mononitrate tab 20 mg</i>	26	JANUMET TAB 50-500MG	47
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	26	JANUMET XR TAB 100-1000	47
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	26	JANUMET XR TAB 50-1000	47
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	26	JANUMET XR TAB 50-500MG	47
<i>isotretinoin cap 10 mg</i>	104	JANUVIA TAB 100MG	48
<i>isotretinoin cap 20 mg</i>	104	JANUVIA TAB 25MG	48
		JANUVIA TAB 50MG	48
		JARDIANCE TAB 10MG	50
		JARDIANCE TAB 25MG	50
		<i>jasmiel</i>	98
		<i>jasmiel tab 3-0.02mg</i>	98
		JATENZO CAP 158MG	23
		JATENZO CAP 198MG	23
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LASIX TAB 40MG.....	<i>levabuterol hcl soln nebu 0.63 mg/3ml</i>	
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<i>leucovorin calcium inj 500 mg/50ml (10</i>	<i>mg-20 mcg</i>	98
<i>mg/ml)</i>	<i>levonorgestrel-eth estra tab 0.05-</i>	
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<i>lisinopril tab 20 mg</i>	58	<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	63
<i>lisinopril tab 30 mg</i>	58	<i>losartan potassium tab 100 mg</i>	60
<i>lisinopril tab 40 mg</i>	58	<i>losartan potassium tab 25 mg</i>	60
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<i>lithium carbonate cap 300 mg</i>	77	LOTEMAX GEL 0.5%	146
<i>lithium carbonate cap 600 mg</i>	77	LOTEMAX OIN 0.5%	146
<i>lithium carbonate tab 300 mg</i>	77	LOTEMAX SM GEL 0.38%	146
<i>lithium carbonate tab er 300 mg</i>	77	LOTEMAX SUS 0.5%	146
<i>lithium carbonate tab er 450 mg</i>	77	LOTENSIN HCT TAB 10-12.5	63
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<i>loestrin fe 1/20</i>	99	LOTREL CAP 5-20MG	63
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<i>lopinavir-ritonavir tab 200-50 mg</i>	83	LOVENOX INJ 300/3ML	34
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<i>lorazepam tab 1 mg</i>	28	<i>low-ogestrel</i>	99
<i>lorazepam tab 2 mg</i>	28	<i>loxapine succinate cap 10 mg</i>	79
LORBRENA TAB 100MG	71	<i>loxapine succinate cap 25 mg</i>	79
LORBRENA TAB 25MG	71		

<i>loxapine succinate cap 50 mg</i>	79	<i>malathion lotion 0.5%</i>	112
<i>loxapine succinate cap 5 mg</i>	79	<i>maraviroc tab 150 mg</i>	83
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<i>megestrol acetate susp 625 mg/5ml</i>	150	<i>metformin hcl tab er 24hr modified release</i>	
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<i>megestrol acetate tab 40 mg</i>	68	<i>metformin hcl tab er 24hr modified release</i>	
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<i>meloxicam tab 15 mg</i>	13	48
<i>meloxicam tab 7.5 mg</i>	13	<i>methadone hcl conc 10 mg/ml</i>	16
<i>melphalan tab 2 mg</i>	66	<i>methadone hcl soln 10 mg/5ml</i>	16
<i>memantine hcl cap er 24hr 14 mg</i>	151	<i>methadone hcl soln 5 mg/5ml</i>	16
<i>memantine hcl cap er 24hr 21 mg</i>	151	<i>methadone hcl tab 10 mg</i>	16
<i>memantine hcl cap er 24hr 28 mg</i>	151	<i>methadone hcl tab 5 mg</i>	16
<i>memantine hcl cap er 24hr 7 mg</i>	151	<i>methadone hcl tab for oral susp 40 mg</i>	16
<i>memantine hcl oral solution 2 mg/ml</i>	151	METHADONE INJ 10MG/ML.....	17
<i>memantine hcl tab 10 mg</i>	151	<i>methadose</i>	17
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg</i>		METHADOSE CON 10MG/ML.....	17
<i>titration pack</i>	151	METHADOSE SF CON 10MG/ML.....	17
<i>memantine hcl tab 5 mg</i>	151	<i>methazolamide tab 25 mg</i>	113
MENEST TAB 0.3MG.....	121	<i>methazolamide tab 50 mg</i>	113
MENEST TAB 0.625MG	121	<i>methenamine hippurate tab 1 gm</i>	163
MENEST TAB 1.25MG	121	<i>methergine</i>	148
MENOPUR INJ 75UNIT	116	<i>methimazole tab 10 mg</i>	158
MENOSTAR DIS 14MCG	121	<i>methimazole tab 5 mg</i>	158
<i>meperidine hcl oral soln 50 mg/5ml</i>	16	METHITEST TAB 10MG	23
<i>meperidine hcl tab 50 mg</i>	16	<i>methocarbamol tab 500 mg</i>	142
<i>meprobamate tab 200 mg</i>	27	<i>methocarbamol tab 750 mg</i>	142
<i>meprobamate tab 400 mg</i>	27	<i>methotrexate sodium for inj 1 gm</i>	67
MEPRON SUS	25	<i>methotrexate sodium inj 50 mg/2ml (25</i>	
<i>mercaptopurine tab 50 mg</i>	67	<i>mg/ml)</i>	67
<i>mesalamine cap dr 400 mg</i>	122	<i>methotrexate sodium inj pf 1000 mg/40ml</i>	
<i>mesalamine cap er 24hr 0.375 gm</i>	122	<i>(25 mg/ml)</i>	67
<i>mesalamine cap er 500 mg</i>	122	<i>methotrexate sodium inj pf 250 mg/10ml</i>	
<i>mesalamine enema 4 gm</i>	123	<i>(25 mg/ml)</i>	67
<i>mesalamine suppos 1000 mg</i>	123	<i>methotrexate sodium inj pf 50 mg/2ml (25</i>	
<i>mesalamine tab delayed release 1.2 gm</i> ..	123	<i>mg/ml)</i>	67
<i>mesalamine tab delayed release 800 mg</i>		<i>methotrexate sodium tab 2.5 mg (base</i>	
.....	123	<i>equiv)</i>	67
MESNEX TAB 400MG	74	<i>methscopolamine bromide tab 2.5 mg</i> ...	160
<i>metformin hcl tab 1000 mg</i>	48	<i>methscopolamine bromide tab 5 mg</i>	160
<i>metformin hcl tab 500 mg</i>	48	<i>methsuximide cap 300 mg</i>	41
<i>metformin hcl tab 850 mg</i>	48	<i>methyl dopa tab 250 mg</i>	60

<i>methyl</i> dopa tab 500 mg	60	<i>methylphenidate hcl tab er osmotic release</i>	
METHYLIN SOL 10MG/5ML.....	7	(osm) 27 mg	9
METHYLIN SOL 5MG/5ML	7	<i>methylphenidate hcl tab er osmotic release</i>	
<i>methylphenidate hcl cap er 10 mg (cd)</i>	8	(osm) 36 mg	9
<i>methylphenidate hcl cap er 20 mg (cd)</i>	8	<i>methylphenidate hcl tab er osmotic release</i>	
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>		(osm) 54 mg	9
.....	8	METHYLPHENIDATE HCL TAB ER	
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>		OSMOTIC RELEASE (OSM) 72 MG.....	9
.....	8	<i>methylphenidate td patch 10 mg/9hr</i>	9
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>		<i>methylphenidate td patch 15 mg/9hr</i>	9
.....	8	<i>methylphenidate td patch 20 mg/9hr</i>	9
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>		<i>methylphenidate td patch 30 mg/9hr</i>	9
.....	8	METHYLPHENID TAB 45MG ER.....	7
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>		METHYLPHENID TAB 63MG ER.....	7
.....	8	<i>methylprednisolone tab 16 mg</i>	102
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>		<i>methylprednisolone tab 32 mg</i>	102
.....	8	<i>methylprednisolone tab 4 mg</i>	102
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>		<i>methylprednisolone tab 8 mg</i>	102
.....	8	<i>methylprednisolone tab therapy pack 4 mg</i>	
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>		(21)	102
.....	8	<i>methyltestosterone cap 10 mg</i>	23
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>		<i>metoclopramide hcl tab 10 mg (base</i>	
.....	8	equivalent)	122
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>		<i>metoclopramide hcl tab 5 mg (base</i>	
.....	8	equivalent)	122
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>		<i>metolazone tab 10 mg</i>	114
.....	8	<i>metolazone tab 2.5 mg</i>	114
<i>methylphenidate hcl cap er 30 mg (cd)</i>	8	<i>metolazone tab 5 mg</i>	114
<i>methylphenidate hcl cap er 40 mg (cd)</i>	8	METOPIRON CAP 250MG	112
<i>methylphenidate hcl cap er 50 mg (cd)</i>	8	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl cap er 60 mg (cd)</i>	8	25 mg	63
<i>methylphenidate hcl chew tab 10 mg</i>	8	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl chew tab 2.5 mg</i>	8	50 mg.....	63
<i>methylphenidate hcl chew tab 5 mg</i>	8	<i>metoprolol & hydrochlorothiazide tab 50-25</i>	
<i>methylphenidate hcl soln 10 mg/5ml</i>	8	mg	63
<i>methylphenidate hcl soln 5 mg/5ml</i>	8	<i>metoprolol succinate tab er 24hr 100 mg</i>	
<i>methylphenidate hcl tab 10 mg</i>	8	(tartrate equiv)	87
<i>methylphenidate hcl tab 20 mg</i>	8	<i>metoprolol succinate tab er 24hr 200 mg</i>	
<i>methylphenidate hcl tab 5 mg</i>	8	(tartrate equiv)	88
<i>methylphenidate hcl tab er 10 mg</i>	8	<i>metoprolol succinate tab er 24hr 25 mg</i>	
<i>methylphenidate hcl tab er 20 mg</i>	9	(tartrate equiv)	87
<i>methylphenidate hcl tab er 24hr 18 mg</i>	9	<i>metoprolol succinate tab er 24hr 50 mg</i>	
<i>methylphenidate hcl tab er osmotic release</i>		(tartrate equiv)	87
(osm) 18 mg	9	<i>metoprolol tartrate tab 100 mg</i>	88

<i>metoprolol tartrate tab 25 mg</i>	88	<i>minocycline hcl cap 75 mg</i>	157
<i>metoprolol tartrate tab 37.5 mg</i>	88	<i>minocycline hcl tab er 24hr 105 mg</i>	157
<i>metoprolol tartrate tab 50 mg</i>	88	<i>minocycline hcl tab er 24hr 115 mg</i>	157
<i>metoprolol tartrate tab 75 mg</i>	88	<i>minocycline hcl tab er 24hr 135 mg</i>	157
METROCREAM CRE 0.75%.....	111	<i>minocycline hcl tab er 24hr 55 mg</i>	157
METROGEL GEL 1%	112	<i>minocycline hcl tab er 24hr 65 mg</i>	157
METROLOTION LOT 0.75%.....	112	<i>minocycline hcl tab er 24hr 80 mg</i>	157
<i>metronidazole cream 0.75%</i>	112	<i>minocycline hcl tab er 24hr 90 mg</i>	157
<i>metronidazole gel 0.75%</i>	112	<i>minoxidil tab 10 mg</i>	65
<i>metronidazole gel 1%</i>	112	<i>minoxidil tab 2.5 mg</i>	65
<i>metronidazole lotion 0.75%</i>	112	MIRAPEX ER TAB 0.375MG.....	75
<i>metronidazole tab 250 mg</i>	24	MIRAPEX ER TAB 0.75MG	75
<i>metronidazole tab 500 mg</i>	24	MIRAPEX ER TAB 1.5MG	75
<i>metronidazole vaginal gel 0.75%</i>	165	MIRAPEX ER TAB 2.25MG	75
<i>metyrosine cap 250 mg</i>	59	MIRAPEX ER TAB 3.75MG	75
<i>mexiletine hcl cap 150 mg</i>	28	MIRAPEX ER TAB 3MG.....	75
<i>mexiletine hcl cap 200 mg</i>	28	MIRAPEX ER TAB 4.5MG	76
<i>mexiletine hcl cap 250 mg</i>	28	MIRCERA INJ 100MCG	128
MICARDIS HCT TAB 40/12.5.....	63	MIRCERA INJ 120MCG	128
MICARDIS HCT TAB 80/12.5.....	63	MIRCERA INJ 150MCG	128
MICARDIS HCT TAB 80-25MG	63	MIRCERA INJ 200MCG	128
<i>microgestin tab 1/20</i>	99	MIRCERA INJ 30MCG.....	128
<i>microgestin tab fe1.5/30</i>	99	MIRCERA INJ 50MCG.....	128
<i>midodrine hcl tab 10 mg</i>	166	MIRCERA INJ 75MCG.....	128
<i>midodrine hcl tab 2.5 mg</i>	166	MIRCETTE TAB 28 DAY	99
<i>midodrine hcl tab 5 mg</i>	166	<i>mirtazapine tab 15 mg</i>	42
<i>mifepristone tab 200 mg</i>	118	<i>mirtazapine tab 30 mg</i>	42
<i>mifepristone tab 300 mg</i>	48	<i>mirtazapine tab 45 mg</i>	42
<i>miglitol tab 100 mg</i>	47	<i>mirtazapine tab 7.5 mg</i>	42
<i>miglitol tab 25 mg</i>	47	<i>misoprostol tab 100 mcg</i>	163
<i>miglitol tab 50 mg</i>	47	<i>misoprostol tab 200 mcg</i>	163
<i>miglustat cap 100 mg</i>	127	MITIGARE CAP 0.6MG.....	126
MIGRANAL SPR 4MG/ML	134	<i>mitigo</i>	17
<i>mili</i>	99	<i>modafinil tab 100 mg</i>	9
<i>millipred tab 5mg</i>	102	<i>modafinil tab 200 mg</i>	9
<i>mimvey</i>	119	<i>moexipril hcl tab 15 mg</i>	58
MINASTRIN 24 CHW FE.....	99	<i>moexipril hcl tab 7.5 mg</i>	58
MINIVELLE DIS 0.025MG.....	121	<i>mometasone furoate cream 0.1%</i>	110
MINIVELLE DIS 0.0375MG.....	121	<i>mometasone furoate nasal susp 50</i>	
MINIVELLE DIS 0.05MG	121	<i>mcg/act</i>	143
MINIVELLE DIS 0.075MG.....	121	<i>mometasone furoate oint 0.1%</i>	110
MINIVELLE DIS 0.1MG	121	<i>mometasone furoate solution 0.1% (lotion)</i>	
<i>minocycline hcl cap 100 mg</i>	157	.....	110
<i>minocycline hcl cap 50 mg</i>	157	<i>mondoxyne nl</i>	157

<i>mono-lynyah</i>	99	<i>morphine sulfate tab er 60 mg</i>	18
MONSELS FERR SOL SUBSULF	129	MOTEGRITY TAB 1MG	121
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	29	MOTEGRITY TAB 2MG	121
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	30	MOUNJARO INJ 10MG/0.5	49
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	30	MOUNJARO INJ 12.5/0.5	49
MONUROL PAK GRANULES	163	MOUNJARO INJ 15MG/0.5	49
<i>morphine sulfate beads cap er 24hr 120 mg</i>	17	MOUNJARO INJ 2.5/0.5.....	49
<i>morphine sulfate beads cap er 24hr 30 mg</i>	17	MOUNJARO INJ 5MG/0.5.....	49
<i>morphine sulfate beads cap er 24hr 45 mg</i>	17	MOUNJARO INJ 7.5/0.5.....	49
<i>morphine sulfate beads cap er 24hr 60 mg</i>	17	MOVANTIK TAB 12.5MG.....	123
<i>morphine sulfate beads cap er 24hr 75 mg</i>	17	MOVANTIK TAB 25MG	123
<i>morphine sulfate beads cap er 24hr 90 mg</i>	17	<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	145
<i>morphine sulfate cap er 24hr 100 mg</i>	17	<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	121
<i>morphine sulfate cap er 24hr 10 mg</i>	17	MOZOBIL INJ	129
<i>morphine sulfate cap er 24hr 20 mg</i>	17	MS CONTIN TAB 100MG ER.....	18
<i>morphine sulfate cap er 24hr 30 mg</i>	17	MS CONTIN TAB 15MG ER	18
<i>morphine sulfate cap er 24hr 50 mg</i>	17	MS CONTIN TAB 200MG ER.....	18
<i>morphine sulfate cap er 24hr 60 mg</i>	17	MS CONTIN TAB 30MG ER	18
<i>morphine sulfate cap er 24hr 80 mg</i>	17	MS CONTIN TAB 60MG ER	18
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	17	MULPLETA TAB 3MG.....	128
<i>morphine sulfate oral soln 10 mg/5ml</i>	17	MULTAQ TAB 400MG	29
<i>morphine sulfate oral soln 20 mg/5ml</i>	17	<i>multivit/fl chw 0.5mg</i>	141
<i>morphine sulfate suppos 10 mg</i>	17	<i>multivitamin/fluoride</i>	141
<i>morphine sulfate suppos 20 mg</i>	17	<i>multivitamin with fluorid</i>	141
<i>morphine sulfate suppos 30 mg</i>	17	MULTI VITAMN TAB MINERALS	141
<i>morphine sulfate suppos 5 mg</i>	17	<i>mupirocin oint 2%</i>	106
<i>morphine sulfate tab 15 mg</i>	17	MUSE SUP 1000MCG	93
<i>morphine sulfate tab 30 mg</i>	17	MUSE SUP 250MCG	93
<i>morphine sulfate tab er 100 mg</i>	18	MUSE SUP 500MCG.....	93
<i>morphine sulfate tab er 15 mg</i>	17	MYALEPT INJ 11.3MG	117
<i>morphine sulfate tab er 200 mg</i>	18	MYCAPSSA CAP 20MG.....	118
<i>morphine sulfate tab er 30 mg</i>	18	<i>my choice</i>	101
		MYCOBUTIN CAP 150MG.....	66
		<i>mycophenolate mofetil cap 250 mg</i>	139
		<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	139
		<i>mycophenolate mofetil tab 500 mg</i>	139
		<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	139
		<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	139
		MYDAYIS CAP 12.5MG	3

MYDAYIS CAP 25MG.....	3
MYDAYIS CAP 37.5MG	3
MYDAYIS CAP 50MG	3
MYFEMBREE TAB.....	119
MYFORTIC TAB 180MG	139
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MYLERAN TAB 2MG.....	66
MYRBETRIQ SUS 8MG/ML	164
MYRBETRIQ TAB 25MG	164
MYRBETRIQ TAB 50MG.....	164
<i>my way</i>	101

N

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<i>nabumetone tab 500 mg</i>	13
<i>nabumetone tab 750 mg</i>	13
<i>nadolol tab 20 mg</i>	88
<i>nadolol tab 40 mg</i>	88
<i>nadolol tab 80 mg</i>	88
<i>nafrinse</i>	137
<i>naftifine hcl cream 1%</i>	106
<i>naftifine hcl cream 2%</i>	106
<i>naftifine hcl gel 2%</i>	106
NAFTIN GEL 1%	106
NAFTIN GEL 2%.....	106
NALFON TAB 600MG	13
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	51
<i>naltrexone hcl tab 50 mg</i>	51
NAMENDA TAB 10MG	151
NAMENDA TAB 5-10MG	151
NAMENDA TAB 5MG.....	151
NAMENDA XR CAP 14MG	151
NAMENDA XR CAP 21MG	151
NAMENDA XR CAP 28MG	151
NAMENDA XR CAP 7MG.....	151
NAMZARIC CAP	151
NAMZARIC CAP 14-10MG.....	151
NAMZARIC CAP 21-10MG.....	151
NAMZARIC CAP 28-10MG	151
NAMZARIC CAP 7-10MG	151
<i>naproxen dr</i>	13
<i>naproxen sodium tab 275 mg</i>	13
<i>naproxen sodium tab 550 mg</i>	13
<i>naproxen tab 500 mg</i>	13
<i>naproxen tab ec 500 mg</i>	13

<i>naratriptan hcl tab 1 mg (base equiv)</i>	135
<i>naratriptan hcl tab 2.5 mg (base equiv)</i> ...	136
NARCAN SPR 4MG.....	51
NARDIL TAB 15MG.....	42
NATACYN SUS 5% OP.....	145
NATAZIA TAB	99
<i>nateglinide tab 120 mg</i>	50
<i>nateglinide tab 60 mg</i>	50
NATESTO GEL 5.5MG.....	23
NATROBA SUS 0.9%	112
NAYZILAM SPR 5MG.....	35
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	88
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	88
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	88
<i>nebivolol hcl tab 5 mg (base equivalent)</i> ..	88
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<i>necon tab 1/35</i>	99
<i>nefazodone hcl tab 100 mg</i>	44
<i>nefazodone hcl tab 150 mg</i>	44
<i>nefazodone hcl tab 200 mg</i>	44
<i>nefazodone hcl tab 250 mg</i>	44
<i>nefazodone hcl tab 50 mg</i>	44
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	145
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	145
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	146
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	146
<i>neomycin-polymyxin-hc ophth susp</i>	146
<i>neomycin-polymyxin-hc otic soln 1%</i>	148
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	148
<i>neomycin sulfate tab 500 mg</i>	10
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NEUPOGEN INJ 480/0.8.....	128	NICORETTE ST GUM 4MG ORIG.....	155
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NEUPRO DIS 1MG/24HR.....	76	<i>nicotine td patch 24hr 7 mg/24hr</i>	155
NEUPRO DIS 2MG/24HR.....	76	NICOTROL INH.....	155
NEUPRO DIS 3MG/24HR.....	76	NICOTROL NS SPR 10MG/ML.....	155
NEUPRO DIS 4MG/24HR.....	76	<i>nifedipine cap 10 mg</i>	90
NEUPRO DIS 6MG/24HR.....	76	<i>nifedipine cap 20 mg</i>	90
NEUPRO DIS 8MG/24HR.....	76	<i>nifedipine tab er 24hr 30 mg</i>	90
NEURONTIN CAP 100MG.....	38	<i>nifedipine tab er 24hr 60 mg</i>	90
NEURONTIN CAP 300MG.....	38	<i>nifedipine tab er 24hr 90 mg</i>	90
NEURONTIN CAP 400MG.....	38	<i>nifedipine tab er 24hr osmotic release 30</i>	
NEURONTIN SOL 250/5ML.....	38	<i>mg</i>	90
NEURONTIN TAB 600MG.....	38	<i>nifedipine tab er 24hr osmotic release 60</i>	
NEURONTIN TAB 800MG.....	38	<i>mg</i>	90
NEVANAC SUS 0.1% OP.....	147	<i>nifedipine tab er 24hr osmotic release 90</i>	
NEVIRAPINE SUSP 50 MG/5ML.....	83	<i>mg</i>	90
<i>nevirapine tab 200 mg</i>	83	NILANDRON TAB 150MG.....	68
<i>nevirapine tab er 24hr 100 mg</i>	83	<i>nilutamide tab 150 mg</i>	68
<i>nevirapine tab er 24hr 400 mg</i>	84	<i>nimodipine cap 30 mg</i>	90
<i>new day</i>	101	NINLARO CAP 2.3MG.....	71
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NEXIUM CAP 20MG.....	162	NINLARO CAP 4MG.....	71
NEXIUM CAP 40MG.....	162	<i>nisoldipine tab er 24hr 17 mg</i>	90
NEXIUM GRA 10MG DR.....	162	<i>nisoldipine tab er 24hr 20 mg</i>	90
NEXIUM GRA 2.5MG DR.....	162	<i>nisoldipine tab er 24hr 25.5 mg</i>	90
NEXIUM GRA 20MG DR.....	162	<i>nisoldipine tab er 24hr 30 mg</i>	90
NEXIUM GRA 40MG DR.....	162	<i>nisoldipine tab er 24hr 34 mg</i>	90
NEXIUM GRA 5MG DR.....	162	<i>nisoldipine tab er 24hr 40 mg</i>	90
NEXLETOL TAB 180MG.....	54	<i>nisoldipine tab er 24hr 8.5 mg</i>	90
NEXLIZET TAB 180/10MG.....	55	<i>nitazoxanide tab 500 mg</i>	25
NEXTSTELLIS TAB 3-14.2MG.....	99	NITRO-BID OIN 2%.....	26
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>		<i>nitrofurantoin macrocrystalline cap 100 mg</i>	
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<i>niacin tab er 500 mg (antihyperlipidemic)</i>	57	<i>nitrofurantoin macrocrystalline cap 25 mg</i>	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	57	.....	163
<i>niacor</i>	57	<i>nitrofurantoin macrocrystalline cap 50 mg</i>	
<i>nicardipine hcl cap 20 mg</i>	90	163
<i>nicardipine hcl cap 30 mg</i>	90	<i>nitrofurantoin monohydrate</i>	
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<i>nitroglycerin sl tab 0.3 mg</i>	26	<i>norgestimate-eth estrad tab 0.18-35/0.215-</i>	
<i>nitroglycerin sl tab 0.4 mg</i>	26	<i>35/0.25-35 mg-mcg</i>	99
<i>nitroglycerin sl tab 0.6 mg</i>	26	NORLIQVA SOL 1MG/ML.....	90
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	27	<i>norlyroc</i>	101
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	27	NORPACE CAP 100MG	28
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	27	NORPACE CAP 100MG CR	28
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	27	NORPACE CAP 150MG	28
NITROSTAT SUB 0.3MG.....	27	NORPACE CAP 150MG CR	28
NITROSTAT SUB 0.4MG.....	27	NORPRAMIN TAB 10MG	46
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POMALYST CAP 4MG.....	69	<i>pravastatin sodium tab 40 mg</i>	57
PONVORY TAB 20MG.....	153	<i>pravastatin sodium tab 80 mg</i>	57
PONVORY TAB STARTER.....	153	<i>praziquantel tab 600 mg</i>	24
<i>portia-28</i>	100	<i>prazosin hcl cap 1 mg</i>	60
<i>posaconazole susp 40 mg/ml</i>	54	<i>prazosin hcl cap 2 mg</i>	60
<i>posaconazole tab delayed release 100 mg</i>	54	<i>prazosin hcl cap 5 mg</i>	60
<i>potassium chloride cap er 10 meq</i>	138	PRED MILD SUS 0.12% OP	146
<i>potassium chloride cap er 8 meq</i>	137	<i>prednisolone acetate ophth susp 1%</i>	146
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	138	<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	103
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	138	<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	103
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	138	<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	102
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	138	<i>prednisolone soln 15 mg/5ml</i>	103
<i>potassium chloride powder packet 20 meq</i>	138	<i>prednisone oral soln 5 mg/5ml</i>	103
<i>potassium chloride tab er 10 meq</i>	138	<i>prednisone tab 10 mg</i>	103
<i>potassium chloride tab er 8 meq (600 mg)</i>	138	<i>prednisone tab 1 mg</i>	103
<i>potassium citrate tab er 10 meq (1080 mg)</i>	124	<i>prednisone tab 2.5 mg</i>	103
<i>potassium citrate tab er 15 meq (1620 mg)</i>	124	<i>prednisone tab 20 mg</i>	103
<i>potassium citrate tab er 5 meq (540 mg)</i>	124	<i>prednisone tab 50 mg</i>	103
PRALUENT INJ 150MG/ML	57	<i>prednisone tab 5 mg</i>	103
PRALUENT INJ 75MG/ML	57	<i>prednisone tab therapy pack 10 mg (21)</i> .103	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	76	<i>prednisone tab therapy pack 10 mg (48)</i> 103	
<i>pramipexole dihydrochloride tab 1 mg</i>	76	<i>prednisone tab therapy pack 5 mg (21)</i> ...103	
		<i>prednisone tab therapy pack 5 mg (48)</i> ..103	

PRED SOD PHO SOL 1% OP	146	<i>primidone tab 125 mg</i>	39
PREFEST TAB	120	<i>primidone tab 250 mg</i>	39
<i>pregabalin cap 100 mg</i>	38	<i>primidone tab 50 mg</i>	39
<i>pregabalin cap 150 mg</i>	39	PRISTIQ TAB 100MG	45
<i>pregabalin cap 200 mg</i>	39	PRISTIQ TAB 25MG	45
<i>pregabalin cap 225 mg</i>	39	PRISTIQ TAB 50MG	45
<i>pregabalin cap 25 mg</i>	38	PROAIR DIGIH AER	32
<i>pregabalin cap 300 mg</i>	39	PROAIR RESPI AER	32
<i>pregabalin cap 50 mg</i>	38	<i>probenecid tab 500 mg</i>	126
<i>pregabalin cap 75 mg</i>	38	<i>procainamide hcl inj 100 mg/ml</i>	28
<i>pregabalin soln 20 mg/ml</i>	39	PROCARDIA XL TAB 30MG CR	91
PREGNYL INJ 10000UNT	116	PROCARDIA XL TAB 60MG CR	91
PREMARIN TAB 0.3MG	121	PROCARDIA XL TAB 90MG CR	91
PREMARIN TAB 0.45MG	121	<i>procentra</i>	3
PREMARIN TAB 0.625MG	121	<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	81
PREMARIN TAB 0.9MG	121	<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	81
PREMARIN TAB 1.25MG	121	<i>prochlorperazine suppos 25 mg</i>	81
PREMARIN VAG CRE 0.625MG	165	PROCRIT INJ 2000/ML	128
PREMPHASE TAB	120	PROCRIT INJ 20000/ML	128
PREMPRO TAB	120	PROCRIT INJ 3000/ML	128
PREMPRO TAB 0.3-1.5	120	PROCRIT INJ 4000/ML	128
PREMPRO TAB 0.45-1.5	120	PROCRIT INJ 40000/ML	128
PREMPRO TAB 0.625-5	120	PROCTOFOAM AER HC 1%	24
PRETOMANID TAB 200MG	66	<i>procto-med hc</i>	24
PREVACID CAP 30MG DR	162	<i>proctozone-hc</i>	24
PREVACID TAB 15MG STB	162	PROCYSBI CAP 25MG	124
PREVACID TAB 30MG STB	162	PROCYSBI CAP 75MG	124
<i>prevalite</i>	55	<i>progesterone cap 100 mg</i>	150
PREVDNT 5000 GEL 1.1-5%	141	<i>progesterone cap 200 mg</i>	150
PREVIDENT GEL 1.1%	141	<i>progesterone im in oil 50 mg/ml</i>	150
PREVIDENT SOL 0.2%	141	PROGLYCEM SUS 50MG/ML	48
PREVYMIS TAB 240MG	85	PROGRAF CAP 0.5MG	139
PREVYMIS TAB 480MG	85	PROGRAF CAP 1MG	139
PREZCOBIX TAB 800-150	84	PROGRAF CAP 5MG	140
PREZISTA SUS 100MG/ML	84	PROGRAF GRA 0.2MG	140
PREZISTA TAB 150MG	84	PROGRAF GRA 1MG	140
PREZISTA TAB 600MG	84	PROLENSA SOL 0.07%	147
PREZISTA TAB 75MG	84	PROMACTA POW 12.5MG	128
PREZISTA TAB 800MG	84	PROMACTA TAB 12.5MG	128
PRIFTIN TAB 150MG	66	PROMACTA TAB 25MG	128
PRILOSEC POW 10MG	162	PROMACTA TAB 50MG	128
PRILOSEC POW 2.5MG	162	PROMACTA TAB 75MG	128
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	65		

<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	PROZAC CAP 20MG.....	43
.....	PROZAC CAP 40MG.....	43
<i>promethazine hcl oral soln 6.25 mg/5ml</i> ..	PRUDOXIN CRE 5%	107
<i>promethazine hcl suppos 12.5 mg</i>	<i>pseudoephed-bromphen-dm syrup 30-2-10</i>	
<i>promethazine hcl suppos 25 mg</i>	<i>mg/5ml</i>	104
<i>promethazine hcl tab 12.5 mg</i>	PULMICORT INH 180MCG.....	31
<i>promethazine hcl tab 25 mg</i>	PULMICORT INH 90MCG	31
<i>promethazine hcl tab 50 mg</i>	PULMOZYME SOL 1MG/ML.....	156
<i>promethazine w/ codeine syrup 6.25-10</i>	PURIXAN SUS 20MG/ML.....	67
<i>mg/5ml</i>	PYLERA CAP	163
<i>promethegan</i>	<i>pyrazinamide tab 500 mg</i>	66
<i>prometh vc/ syp codeine</i>	PYRIDIDIUM TAB 100MG	125
<i>prometh vc syp 6.25-5/5</i>	PYRIDIDIUM TAB 200MG	125
PROMETRIUM CAP 100MG	<i>pyridostigmine bromide oral soln 60</i>	
PROMETRIUM CAP 200MG.....	<i>mg/5ml</i>	65
<i>propafenone hcl cap er 12hr 225 mg</i>	<i>pyridostigmine bromide tab 60 mg</i>	65
<i>propafenone hcl cap er 12hr 325 mg</i>	<i>pyridostigmine bromide tab er 180 mg</i>	65
<i>propafenone hcl cap er 12hr 425 mg</i>	<i>pyridoxine hcl inj 100 mg/ml</i>	166
<i>propafenone hcl tab 150 mg</i>	PYROGALL ACD OIN	111
<i>propafenone hcl tab 225 mg</i>	Q	
<i>propafenone hcl tab 300 mg</i>	QBRELIS SOL 1MG/ML.....	58
<i>propranolol hcl cap er 24hr 120 mg</i>	QBREXZA PAD 2.4%.....	111
<i>propranolol hcl cap er 24hr 160 mg</i>	QELBREE CAP 100MG ER	5
<i>propranolol hcl cap er 24hr 60 mg</i>	QELBREE CAP 150MG ER	5
<i>propranolol hcl cap er 24hr 80 mg</i>	QELBREE CAP 200MG ER.....	5
<i>propranolol hcl oral soln 20 mg/5ml</i>	QINLOCK TAB 50MG.....	72
<i>propranolol hcl oral soln 40 mg/5ml</i>	QNASL AER 80MCG.....	143
<i>propranolol hcl tab 10 mg</i>	QNASL CHILD SPR 40MCG	143
<i>propranolol hcl tab 20 mg</i>	QSYMIA CAP 11.25-69	4
<i>propranolol hcl tab 40 mg</i>	QSYMIA CAP 15-92MG.....	4
<i>propranolol hcl tab 60 mg</i>	QSYMIA CAP 3.75-23	4
<i>propranolol hcl tab 80 mg</i>	QSYMIA CAP 7.5-46MG.....	4
<i>propylthiouracil tab 50 mg</i>	QUARTETTE TAB.....	100
PROSCAR TAB 5MG.....	QUDEXY XR CAP 100/24HR.....	39
PROTONIX PAK 40MG	QUDEXY XR CAP 150/24HR.....	39
PROTONIX TAB 20MG.....	QUDEXY XR CAP 200/24HR	39
PROTONIX TAB 40MG.....	QUDEXY XR CAP 25/24HR.....	39
PROTOPIC OIN 0.03%	QUDEXY XR CAP 50/24HR	39
PROTOPIC OIN 0.1%	QUESTRAN POW 4GM LITE	55
<i>protriptyline hcl tab 10 mg</i>	<i>quetiapine fumarate tab 100 mg</i>	80
<i>protriptyline hcl tab 5 mg</i>	<i>quetiapine fumarate tab 150 mg</i>	80
PROVIGIL TAB 100MG.....	<i>quetiapine fumarate tab 200 mg</i>	80
PROVIGIL TAB 200MG.....	<i>quetiapine fumarate tab 25 mg</i>	80
PROZAC CAP 10MG.....	<i>quetiapine fumarate tab 300 mg</i>	80

<i>quetiapine fumarate tab 400 mg</i>	80
<i>quetiapine fumarate tab 50 mg</i>	80
<i>quetiapine fumarate tab er 24hr 150 mg</i> ..	80
<i>quetiapine fumarate tab er 24hr 200 mg</i> ..	80
<i>quetiapine fumarate tab er 24hr 300 mg</i> .	80
<i>quetiapine fumarate tab er 24hr 400 mg</i> .	80
<i>quetiapine fumarate tab er 24hr 50 mg</i>	80
QUILLIVANT SUS 25MG/5ML	9
<i>quinapril hcl tab 10 mg</i>	58
<i>quinapril hcl tab 20 mg</i>	58
<i>quinapril hcl tab 40 mg</i>	58
<i>quinapril hcl tab 5 mg</i>	58
<i>quinapril-hydrochlorothiazide tab 10-12.5</i> <i>mg</i>	64
<i>quinapril-hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	64
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	64
<i>quinidine gluconate tab er 324 mg</i>	28
<i>quinidine sulfate tab 200 mg</i>	28
<i>quinidine sulfate tab 300 mg</i>	28
<i>quinine sulfate cap 324 mg</i>	65
QUVIVIQ TAB 25MG.....	131
QUVIVIQ TAB 50MG	131
QVAR REDIIHA AER 80MCG	31
QVAR REDIIHAL AER 40MCG	31
R	
RABEPRAZOLE CAP 10MG DR	163
<i>rabeprazole sodium ec tab 20 mg</i>	163
RADICAVA ORS SUS 105/5ML	143
RAGWITEK SUB	10
<i>raloxifene hcl tab 60 mg</i>	116
<i>ramelteon tab 8 mg</i>	132
<i>ramipril cap 2.5 mg</i>	59
<i>ranolazine tab er 12hr 1000 mg</i>	26
<i>ranolazine tab er 12hr 500 mg</i>	26
RAPAFLO CAP 4MG.....	125
RAPAFLO CAP 8MG.....	125
RAPAMUNE SOL 1MG/ML	140
RAPAMUNE TAB 0.5MG	140
RAPAMUNE TAB 1MG.....	140
RAPAMUNE TAB 2MG.....	140
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	77

<i>rasagiline mesylate tab 1 mg (base equiv)</i> 77	
RASUVO INJ 10MG.....	11
RASUVO INJ 12.5MG.....	11
RASUVO INJ 15MG	11
RASUVO INJ 17.5MG.....	11
RASUVO INJ 20MG	11
RASUVO INJ 22.5MG	11
RASUVO INJ 25MG	11
RASUVO INJ 30MG	11
RASUVO INJ 7.5MG	11
RAVICTI LIQ 1.1GM/ML.....	117
RAYALDEE CAP 30MCG	118
RAZADYNE ER CAP 16MG	151
RAZADYNE ER CAP 24MG.....	151
RAZADYNE ER CAP 8MG	151
<i>react</i>	101
REBIF INJ 22/0.5	153
REBIF INJ 44/0.5	153
REBIF REBIDO INJ 22/0.5	153
REBIF REBIDO INJ 44/0.5	153
REBIF TITRTN INJ PACK	153
<i>reclipsen</i>	100
RECORLEV TAB 150MG	114
RECTIV OIN 0.4%.....	24
RELENZA MIS DISKHALE.....	86
RELEUKO INJ 300MCG	128
RELEUKO INJ 480MCG	128
RELEXXII TAB 72MG ER	9
RELPAK TAB 20MG.....	136
RELPAK TAB 40MG.....	136
RELYVRIO PAK 3-1GM	143
REMERON TAB 15MG.....	42
REMERON TAB 30MG	42
RENAGEL TAB 800MG	124
REVELA POW 0.8GM	124
REVELA POW 2.4GM	124
REVELA TAB 800MG.....	124
<i>repaglinide tab 0.5 mg</i>	50
<i>repaglinide tab 1 mg</i>	50
<i>repaglinide tab 2 mg</i>	50
RESTASIS EMU 0.05% OP	145
RESTORIL CAP 15MG.....	130
RESTORIL CAP 30MG.....	130
RESTORIL CAP 7.5MG	130

RETACRIT INJ 10000UNT	128	<i>risedronate sodium tab 30 mg</i>	115
RETACRIT INJ 2000UNIT	128	<i>risedronate sodium tab 35 mg</i>	115
RETACRIT INJ 3000UNIT	128	<i>risedronate sodium tab 5 mg.....</i>	115
RETACRIT INJ 40000UNT	128	<i>risedronate sodium tab delayed release 35</i>	
RETACRIT INJ 4000UNIT	128	<i>mg.....</i>	115
RETEVMO CAP 40MG	72	RISPERDAL SOL 1MG/ML.....	78
RETEVMO CAP 80MG	72	RISPERDAL TAB 0.5MG	78
RETROVIR CAP 100MG.....	84	RISPERDAL TAB 1MG	78
RETROVIR SYP 50MG/5ML	84	RISPERDAL TAB 2MG.....	78
REVATIO SUS 10MG/ML.....	94	RISPERDAL TAB 3MG.....	78
REVATIO TAB 20MG	94	RISPERDAL TAB 4MG	78
REVLIMID CAP 10MG.....	138	<i>risperidone orally disintegrating tab 0.25</i>	
REVLIMID CAP 15MG.....	138	<i>mg</i>	78
REVLIMID CAP 2.5MG	138	<i>risperidone orally disintegrating tab 0.5 mg</i>	
REVLIMID CAP 20MG	138	<i>.....</i>	78
REVLIMID CAP 25MG	138	<i>risperidone orally disintegrating tab 1 mg.</i>	78
REVLIMID CAP 5MG	138	<i>risperidone orally disintegrating tab 2 mg</i>	78
REXULTI TAB 0.25MG.....	81	<i>risperidone orally disintegrating tab 3 mg</i>	78
REXULTI TAB 0.5MG.....	81	<i>risperidone orally disintegrating tab 4 mg</i>	78
REXULTI TAB 1MG	81	<i>risperidone soln 1 mg/ml.....</i>	78
REXULTI TAB 2MG.....	81	<i>risperidone tab 0.25 mg</i>	78
REXULTI TAB 3MG	82	<i>risperidone tab 0.5 mg</i>	78
REXULTI TAB 4MG.....	82	<i>risperidone tab 1 mg</i>	78
REYATAZ CAP 200MG.....	84	<i>risperidone tab 2 mg.....</i>	78
REYATAZ CAP 300MG.....	84	<i>risperidone tab 3 mg.....</i>	78
REYATAZ POW 50MG.....	84	<i>risperidone tab 4 mg.....</i>	79
REYVOW TAB 100MG	136	RITALIN LA CAP 10MG	9
REYVOW TAB 50MG.....	136	RITALIN LA CAP 20MG	9
REZLIDHIA CAP 150MG	72	RITALIN LA CAP 30MG	9
REZUROCK TAB 200MG	140	RITALIN LA CAP 40MG	9
RHOFADE CRE 1%.....	112	RITALIN TAB 10MG	9
RHOPHYLAC INJ 1500/2ML.....	148	RITALIN TAB 20MG	9
RHOPRESSA SOL 0.02%.....	146	RITALIN TAB 5MG.....	9
<i>ribavirin cap 200 mg</i>	85	<i>ritonavir tab 100 mg</i>	84
RIDAURA CAP 3MG.....	11	<i>rivastigmine tartrate cap 3 mg (base</i>	
<i>rifabutin cap 150 mg</i>	66	<i>equivalent)</i>	151
<i>rifampin cap 150 mg</i>	66	<i>rivastigmine tartrate cap 4.5 mg (base</i>	
<i>rifampin cap 300 mg</i>	66	<i>equivalent)</i>	151
<i>riluzole tab 50 mg</i>	143	<i>rivastigmine tartrate cap 6 mg (base</i>	
<i>rimantadine hydrochloride tab 100 mg.....</i>	86	<i>equivalent)</i>	151
RINVOQ TAB 15MG ER.....	11	<i>rivastigmine td patch 24hr 13.3 mg/24hr.</i>	151
RINVOQ TAB 30MG ER.....	11	<i>rivastigmine td patch 24hr 4.6 mg/24hr ..</i>	151
RINVOQ TAB 45MG ER.....	11	<i>rivastigmine td patch 24hr 9.5 mg/24hr ..</i>	151
<i>risedronate sodium tab 150 mg</i>	115	<i>rivelsa.....</i>	100

RIVIVE SPR 3/0.1ML	51	<i>rufinamide tab 400 mg</i>	39
<i>rizatriptan benzoate oral disintegrating tab</i>		RUKOBIA TAB 600MG ER.....	84
<i>10 mg (base eq)</i>	136	RYALTRIS SPR 665-25	142
<i>rizatriptan benzoate oral disintegrating tab</i>		RYBELSUS TAB 14MG	49
<i>5 mg (base eq)</i>	136	RYBELSUS TAB 3MG.....	49
<i>rizatriptan benzoate tab 10 mg (base</i>		RYBELSUS TAB 7MG.....	49
<i>equivalent)</i>	136	RYDAPT CAP 25MG.....	72
<i>rizatriptan benzoate tab 5 mg (base</i>		RYTARY CAP 145MG	76
<i>equivalent)</i>	136	RYTARY CAP 195MG	76
ROCKLATAN DRO	146	RYTARY CAP 245MG	76
<i>roflumilast tab 250 mcg</i>	30	RYTARY CAP 95MG.....	76
<i>roflumilast tab 500 mcg</i>	30	RYTHMOL SR CAP 225MG	29
<i>ropinirole hydrochloride tab 0.25 mg</i>	76	RYTHMOL SR CAP 325MG	29
<i>ropinirole hydrochloride tab 0.5 mg</i>	76	RYTHMOL SR CAP 425MG.....	29
<i>ropinirole hydrochloride tab 1 mg</i>	76	S	
<i>ropinirole hydrochloride tab 2 mg</i>	76	SABRIL POW 500MG	40
<i>ropinirole hydrochloride tab 3 mg</i>	76	SABRIL TAB 500MG.....	40
<i>ropinirole hydrochloride tab 4 mg</i>	76	SAFYRAL TAB.....	100
<i>ropinirole hydrochloride tab 5 mg</i>	76	<i>salicylic acid er film-forming soln 28.5%</i> ..	111
<i>ropinirole hydrochloride tab er 24hr 12 mg</i>		<i>salsalate tab 500 mg</i>	14
<i>(base equivalent)</i>	76	<i>salsalate tab 750 mg</i>	14
<i>ropinirole hydrochloride tab er 24hr 2 mg</i>		SAMSCA TAB 15MG.....	119
<i>(base equivalent)</i>	76	SAMSCA TAB 30MG.....	119
<i>ropinirole hydrochloride tab er 24hr 4 mg</i>		SANCUSO DIS 3.1MG.....	52
<i>(base equivalent)</i>	76	SANDIMMUNE CAP 100MG	140
<i>ropinirole hydrochloride tab er 24hr 6 mg</i>		SANDIMMUNE CAP 25MG	140
<i>(base equivalent)</i>	76	SANDIMMUNE SOL 100MG/ML	140
<i>ropinirole hydrochloride tab er 24hr 8 mg</i>		SANTYL OIN 250/GM.....	110
<i>(base equivalent)</i>	76	SAPHRIS SUB 10MG	80
<i>rosuvastatin calcium tab 10 mg</i>	57	SAPHRIS SUB 2.5MG.....	80
<i>rosuvastatin calcium tab 20 mg</i>	57	SAPHRIS SUB 5MG.....	80
<i>rosuvastatin calcium tab 40 mg</i>	57	<i>sapropterin dihydrochloride powder packet</i>	
<i>rosuvastatin calcium tab 5 mg</i>	57	<i>100 mg</i>	118
ROXICODONE TAB 15MG.....	19	<i>sapropterin dihydrochloride powder packet</i>	
ROXICODONE TAB 30MG	19	<i>500 mg</i>	118
ROZEREM TAB 8MG.....	132	<i>sapropterin dihydrochloride tab 100 mg</i> ..	118
ROZLYTREK CAP 100MG.....	72	SAVELLA MIS TITR PAK	152
ROZLYTREK CAP 200MG	72	SAVELLA TAB 100MG.....	152
ROZLYTREK PAK 50MG.....	72	SAVELLA TAB 12.5MG	152
RUBRACA TAB 200MG	72	SAVELLA TAB 25MG.....	152
RUBRACA TAB 250MG	72	SAVELLA TAB 50MG.....	152
RUBRACA TAB 300MG	72	SAXENDA INJ 18MG/3ML.....	4
<i>rufinamide susp 40 mg/ml</i>	39	SCEMBLIX TAB 20MG	72
<i>rufinamide tab 200 mg</i>	39	SCEMBLIX TAB 40MG.....	72

<i>scopolamine td patch 72hr 1 mg/3days</i>	52	SIGNIFOR INJ 0.3MG/ML	118
SEASONIQUE TAB.....	100	SIGNIFOR INJ 0.6MG/ML	118
<i>selegiline hcl cap 5 mg</i>	77	SIGNIFOR INJ 0.9MG/ML	119
<i>selegiline hcl tab 5 mg</i>	77	<i>sildenafil citrate tab 100 mg</i>	93
<i>selenium sulfide lotion 2.5%</i>	108	<i>sildenafil citrate tab 20 mg</i>	94
<i>selenium sulfide shampoo 2.25%</i>	108	<i>sildenafil citrate tab 25 mg</i>	93
<i>selenium sulfide shampoo 2.3%</i>	108	<i>sildenafil citrate tab 50 mg</i>	93
SELZENTRY SOL 20MG/ML.....	84	SILENOR TAB 3MG.....	129
SELZENTRY TAB 150MG.....	84	SILENOR TAB 6MG.....	129
SELZENTRY TAB 25MG	84	<i>silodosin cap 4 mg</i>	125
SELZENTRY TAB 300MG.....	84	<i>silodosin cap 8 mg</i>	125
SELZENTRY TAB 75MG	84	SILVADENE CRE 1%	108
SE-NATAL 19 TAB	141	<i>silver sulfadiazine cream 1%</i>	108
SENSIPAR TAB 30MG.....	118	SIMBRINZA SUS 1-0.2%	145
SENSIPAR TAB 60MG	118	<i>simvastatin tab 10 mg</i>	57
SENSIPAR TAB 90MG	118	<i>simvastatin tab 20 mg</i>	57
SEREVENT DIS AER 50MCG.....	32	<i>simvastatin tab 40 mg</i>	57
SEROQUEL TAB 100MG.....	80	<i>simvastatin tab 5 mg</i>	57
SEROQUEL TAB 200MG	80	<i>simvastatin tab 80 mg</i>	57
SEROQUEL TAB 25MG.....	80	SINEMET TAB 10-100MG	77
SEROQUEL TAB 300MG	80	SINEMET TAB 25-100MG.....	77
SEROQUEL TAB 400MG	80	SINGULAIR CHW 4MG	30
SEROQUEL TAB 50MG.....	80	SINGULAIR CHW 5MG	30
SEROQUEL XR TAB 150MG	80	SINGULAIR GRA 4MG	30
SEROQUEL XR TAB 200MG	80	SINGULAIR TAB 10MG	30
SEROQUEL XR TAB 300MG	80	<i>sirolimus tab 0.5 mg</i>	140
SEROQUEL XR TAB 400MG	80	<i>sirolimus tab 1 mg</i>	140
SEROQUEL XR TAB 50MG.....	80	<i>sirolimus tab 2 mg</i>	140
SEROSTIM INJ 4MG	116	SIRTURO TAB 100MG.....	66
SEROSTIM INJ 5MG.....	116	SIRTURO TAB 20MG	66
SEROSTIM INJ 6MG.....	116	SIVEXTRO TAB 200MG.....	26
<i>sertraline hcl oral concentrate for solution</i>		SKYCLARYS CAP 50MG.....	143
<i>20 mg/ml</i>	43	SKYRIZI INJ 150MG/ML	107
<i>sertraline hcl tab 100 mg</i>	44	SKYRIZI INJ 180/1.2.....	123
<i>sertraline hcl tab 25 mg</i>	44	SKYRIZI INJ 360/2.4	123
<i>sertraline hcl tab 50 mg</i>	44	SKYRIZI PEN INJ 150MG/ML.....	107
<i>setlakin</i>	100	SLYND TAB 4MG.....	101
<i>sevelamer carbonate packet 0.8 gm</i>	124	<i>sm nicotine gum 2mg</i>	155
<i>sevelamer carbonate packet 2.4 gm</i>	124	<i>sodium chloride inj 2.5 meq/ml (14.6%)</i> .	138
<i>sevelamer carbonate tab 800 mg</i>	124	<i>sodium chloride irrigation soln 0.9%</i>	124
<i>sevelamer hcl tab 400 mg</i>	124	<i>sodium chloride soln nebu 0.9%</i>	104
<i>sevelamer hcl tab 800 mg</i>	124	<i>sodium fluoride chew tab 0.25 mg f (from</i>	
<i>sf 5000 plus</i>	141	<i>0.55 mg naf)</i>	137
<i>sharobel</i>	101		

<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	137	<i>sotalol hcl tab 160 mg</i>	89
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	137	<i>sotalol hcl tab 240 mg</i>	89
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	137	<i>sotalol hcl tab 80 mg</i>	89
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	118	SOTYLIZE SOL 5MG/ML	89
<i>sodium phenylbutyrate tab 500 mg</i>	118	SOVALDI PAK 150MG.....	86
<i>sodium polystyrene sulfonate powder</i>	140	SOVALDI PAK 200MG.....	86
SOD SUL/SULF EMU 10-5%.....	105	SOVALDI TAB 400MG.....	86
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	132	SPECTRACEF TAB 400MG.....	96
<i>solifenacin succinate tab 10 mg</i>	164	<i>spinosad susp 0.9%</i>	112
<i>solifenacin succinate tab 5 mg</i>	164	SPIRIVA AER 1.25MCG	29
SOLIQUA INJ 100/33.....	47	SPIRIVA CAP HANDIHLR	29
SOLODYN TAB 105MG	157	SPIRIVA SPR 2.5MCG.....	29
SOLODYN TAB 115MG	157	<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	113
SOLODYN TAB 55MG.....	157	<i>spironolactone tab 100 mg</i>	114
SOLODYN TAB 65MG.....	157	<i>spironolactone tab 25 mg</i>	114
SOLODYN TAB 80MG.....	157	<i>spironolactone tab 50 mg</i>	114
SOLTAMOX SOL 10MG/5ML	68	SPORANOX CAP 100MG	54
SOLU-CORTEF INJ 1000MG.....	103	SPORANOX SOL 10MG/ML.....	54
SOLU-CORTEF INJ 100MG	103	<i>sprintec 28</i>	100
SOLU-CORTEF INJ 250MG.....	103	SPRIX SPR 15.75MG	13
SOLU-CORTEF INJ 500MG	103	SPRYCEL TAB 100MG	72
SOLU-MEDROL INJ 1000MG.....	103	SPRYCEL TAB 140MG	72
SOLU-MEDROL INJ 125MG	103	SPRYCEL TAB 20MG.....	72
SOLU-MEDROL INJ 40MG.....	103	SPRYCEL TAB 50MG.....	72
SOMATULINE INJ 120/.5ML.....	119	SPRYCEL TAB 70MG.....	72
SOMATULINE INJ 60/0.2ML.....	119	SPRYCEL TAB 80MG.....	72
SOMATULINE INJ 90/0.3ML.....	119	<i>sps</i>	140
SOMAVERT INJ 10MG	116	<i>sps sus 15gm/60</i>	140
SOMAVERT INJ 15MG	116	<i>sronyx</i>	100
SOMAVERT INJ 20MG	116	<i>ssd</i>	108
SOMAVERT INJ 25MG.....	116	<i>sss 10%-5%</i>	105
SOMAVERT INJ 30MG	116	<i>sss 10-5</i>	105
SOOLANTRA CRE 1%.....	112	STALEVO 100 TAB	77
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	72	STALEVO 125 TAB.....	77
<i>sotalol hcl (afib/afl) tab 120 mg</i>	89	STALEVO 150 TAB.....	77
<i>sotalol hcl (afib/afl) tab 160 mg</i>	89	STALEVO 200 TAB.....	77
<i>sotalol hcl (afib/afl) tab 80 mg</i>	88	STALEVO 50 TAB	77
<i>sotalol hcl tab 120 mg</i>	89	STALEVO 75 TAB	77
		<i>stavudine cap 15 mg</i>	84
		<i>stavudine cap 20 mg</i>	84
		<i>stavudine cap 30 mg</i>	84
		<i>stavudine cap 40 mg</i>	84
		STELARA INJ 45MG/0.5	107

STELARA INJ 90MG/ML	107	<i>sulfacetamide sodium shampoo 10%</i>	108
STIMUFEND INJ 6/0.6ML	128	<i>sulfacetamide sodium w/ sulfur cleanser</i>	
STIVARGA TAB 40MG	72	10-2%	105
<i>st joseph low dose aspiri</i>	14	<i>sulfacetamide sodium w/ sulfur cleanser</i>	
STRATTERA CAP 100MG	6	10-5%	105
STRATTERA CAP 10MG	5	<i>sulfacetamide sodium w/ sulfur cleanser</i>	
STRATTERA CAP 18MG.....	5	9.8-4.8%	105
STRATTERA CAP 25MG.....	5	<i>sulfacetamide sodium w/ sulfur cleanser 9-</i>	
STRATTERA CAP 40MG.....	5	4%	105
STRATTERA CAP 60MG.....	5	<i>sulfacetamide sodium w/ sulfur cleansing</i>	
STRATTERA CAP 80MG.....	5	<i>pad 10-4%</i>	105
STRENSIQ INJ 18/0.45	118	<i>sulfacetamide sodium w/ sulfur cream 10-</i>	
STRENSIQ INJ 28/0.7ML	118	2%	105
STRENSIQ INJ 40MG/ML	118	<i>sulfacetamide sodium w/ sulfur cream 9.8-</i>	
STRENSIQ INJ 80/0.8ML.....	118	4.8%	105
STRIBILD TAB.....	84	<i>sulfacetamide sodium w/ sulfur lotion 10-</i>	
STRIVERDI AER 2.5MCG	32	5%	105
STROMECTOL TAB 3MG	24	<i>sulfacetamide sodium w/ sulfur lotion 9.8-</i>	
SUBOXONE MIS 12-3MG.....	22	4.8%	105
SUBOXONE MIS 2-0.5MG.....	22	<i>sulfacleanse 8/4</i>	105
SUBOXONE MIS 4-1MG.....	22	<i>sulfadiazine tab 500 mg</i>	156
SUBOXONE MIS 8-2MG	22	<i>sulfamethoxazole-trimethoprim susp 200-</i>	
SUBSYS SPR 100MCG.....	19	40 mg/5ml.....	25
SUBSYS SPR 400MCG.....	19	<i>sulfamethoxazole-trimethoprim tab 400-80</i>	
SUBSYS SPR 600MCG.....	19	mg.....	25
SUBSYS SPR 800MCG.....	19	<i>sulfamethoxazole-trimethoprim tab 800-</i>	
<i>subvenite</i>	39	160 mg	25
<i>subvenite starter kit/blu</i>	39	<i>sulfamez wash</i>	105
<i>subvenite starter kit/gre</i>	39	SULFAMYLON CRE 85MG/GM	108
<i>subvenite starter kit/ora</i>	39	<i>sulfasalazine tab 500 mg.....</i>	123
SUCRAID SOL 8500/ML.....	113	<i>sulfasalazine tab delayed release 500 mg</i>	
<i>sucralfate susp 1 gm/10ml</i>	161	.....	123
<i>sucralfate tab 1 gm</i>	161	<i>sulfatrim pediatric</i>	25
SULAR TAB 17MG ER.....	91	<i>sulindac tab 150 mg.....</i>	13
SULAR TAB 34MG ER.....	91	<i>sulindac tab 200 mg</i>	13
SULAR TAB 8.5MG ER.....	91	<i>sumatriptan-naproxen sodium tab 85-500</i>	
<i>sulconazole nitrate cream 1%.....</i>	106	mg	134
<i>sulconazole nitrate solution 1%</i>	106	<i>sumatriptan nasal spray 20 mg/act</i>	136
<i>sulfacetamide sodium liquid 10%</i>	108	<i>sumatriptan nasal spray 5 mg/act</i>	136
<i>sulfacetamide sodium lotion 10% (acne)</i>	105	<i>sumatriptan succinate inj 6 mg/0.5ml....</i>	136
<i>sulfacetamide sodium ophth oint 10%</i>	145	<i>sumatriptan succinate solution auto-</i>	
<i>sulfacetamide sodium ophth soln 10% ...</i>	145	<i>injector 4 mg/0.5ml.....</i>	136
<i>sulfacetamide sodium-prednisolone ophth</i>		<i>sumatriptan succinate solution auto-</i>	
<i>soln 10-0.23(0.25)%</i>	146	<i>injector 6 mg/0.5ml.....</i>	136

<i>sumatriptan succinate tab 100 mg</i>	136	SYNJARDY TAB 5-500MG	47
<i>sumatriptan succinate tab 25 mg</i>	136	SYNJARDY XR TAB	48
<i>sumatriptan succinate tab 50 mg</i>	136	SYNJARDY XR TAB 10-1000	48
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	72	SYNJARDY XR TAB 25-1000.....	48
<i>sunitinib malate cap 25 mg (base equivalent)</i>	72	SYNJARDY XR TAB 5-1000MG	48
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	72	SYNTHROID TAB 100MCG.....	159
<i>sunitinib malate cap 50 mg (base equivalent)</i>	72	SYNTHROID TAB 112MCG.....	159
SUNLENCA TAB 300MG.....	84	SYNTHROID TAB 125MCG	159
SUNOSI TAB 150MG	6	SYNTHROID TAB 137MCG	159
SUNOSI TAB 75MG	6	SYNTHROID TAB 150MCG.....	159
SUPRAX CAP 400MG.....	96	SYNTHROID TAB 175MCG	159
SUPRAX CHW 100MG	96	SYNTHROID TAB 200MCG.....	159
SUPRAX CHW 200MG	96	SYNTHROID TAB 25MCG.....	159
SUPRAX SUS 200/5ML.....	96	SYNTHROID TAB 300MCG.....	159
SUPRAX SUS 500/5ML.....	96	SYNTHROID TAB 50MCG	159
SUPREP BOWEL SOL PREP KIT.....	132	SYNTHROID TAB 75MCG.....	159
SUTAB TAB.....	132	SYNTHROID TAB 88MCG	159
SUTENT CAP 12.5MG.....	72	SYPRINE CAP 250MG.....	138
SUTENT CAP 25MG	72	T	
SUTENT CAP 37.5MG.....	72	TABLOID TAB 40MG	67
SUTENT CAP 50MG.....	72	TABRECTA TAB 150MG	72
syeda.....	100	TABRECTA TAB 200MG.....	72
SYMBYAX CAP 3-25MG	152	<i>tacrolimus cap 0.5 mg</i>	140
SYMBYAX CAP 6-25MG	152	<i>tacrolimus cap 1 mg</i>	140
SYMDEKO TAB 100-150	156	<i>tacrolimus cap 5 mg</i>	140
SYMFI LO TAB	84	<i>tacrolimus oint 0.03%</i>	111
SYMFI TAB	84	<i>tacrolimus oint 0.1%</i>	111
SYMJEPI INJ 0.15MG.....	166	<i>tadalafil tab 10 mg</i>	93
SYMJEPI INJ 0.3MG	166	<i>tadalafil tab 2.5 mg</i>	125
SYMLINPEN 60 INJ 1000MCG.....	47	<i>tadalafil tab 20 mg</i>	93
SYMLNPEN 120 INJ 1000MCG	47	<i>tadalafil tab 20 mg (pah)</i>	94
SYMPAZAN MIS 10MG	35	<i>tadalafil tab 5 mg</i>	125
SYMPAZAN MIS 20MG	35	TADLIQ SUS 20MG/5ML	94
SYMPAZAN MIS 5MG.....	35	TAFINLAR CAP 50MG	72
SYMPROIC TAB 0.2MG	123	TAFINLAR CAP 75MG	72
SYMTUZA TAB	84	TAFINLAR TAB 10MG	72
SYNAREL SOL 2MG/ML	117	<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	148
SYNJARDY TAB	47	TAGRISSO TAB 40MG.....	72
SYNJARDY TAB 12.5-500.....	47	TAGRISSO TAB 80MG.....	72
SYNJARDY TAB 5-1000MG.....	47	TAKHZYRO INJ 150MG/ML	126
		TAKHZYRO INJ 300/2ML	126
		TALICIA CAP	163
		TALZENNA CAP 0.1MG	72

TALZENNA CAP 0.25MG	72	TEGRETOL TAB 200MG.....	39
TALZENNA CAP 0.35MG	72	TEGRETOL-XR TAB 100MG.....	39
TALZENNA CAP 0.5MG	72	TEGRETOL-XR TAB 200MG	39
TALZENNA CAP 0.75MG	73	TEGRETOL-XR TAB 400MG	39
TALZENNA CAP 1MG.....	73	TEGSEDI INJ 284/1.5	155
TAMIFLU CAP 30MG.....	86	TEKTRUNA HCT TAB 300-12.5	64
TAMIFLU CAP 45MG.....	86	TEKTRUNA HCT TAB 300-25MG	64
TAMIFLU CAP 75MG	86	TEKTRUNA TAB 150MG.....	64
TAMIFLU SUS 6MG/ML	86	TEKTRUNA TAB 300MG	64
<i>tamoxifen citrate tab 10 mg (base</i>		<i>telmisartan-amlodipine tab 40-10 mg.....</i>	<i>64</i>
<i>equivalent)</i>	<i>68</i>	<i>telmisartan-amlodipine tab 40-5 mg</i>	<i>64</i>
<i>tamoxifen citrate tab 20 mg (base</i>		<i>telmisartan-amlodipine tab 80-10 mg.....</i>	<i>64</i>
<i>equivalent)</i>	<i>68</i>	<i>telmisartan-amlodipine tab 80-5 mg</i>	<i>64</i>
<i>tamsulosin hcl cap 0.4 mg.....</i>	<i>125</i>	<i>telmisartan-hydrochlorothiazide tab 40-</i>	
TARCEVA TAB 100MG	67	<i>12.5 mg.....</i>	<i>64</i>
TARCEVA TAB 150MG.....	67	<i>telmisartan-hydrochlorothiazide tab 80-12.5</i>	
TARCEVA TAB 25MG	67	<i>mg</i>	<i>64</i>
TARGRETIN CAP 75MG	74	<i>telmisartan-hydrochlorothiazide tab 80-25</i>	
TARGRETIN GEL 1%.....	107	<i>mg</i>	<i>64</i>
<i>tarina 24 fe</i>	<i>100</i>	<i>telmisartan tab 20 mg</i>	<i>60</i>
<i>tarina fe tab 1/20 eq</i>	<i>100</i>	<i>telmisartan tab 40 mg</i>	<i>60</i>
TASIGNA CAP 150MG	73	<i>telmisartan tab 80 mg</i>	<i>60</i>
TASIGNA CAP 200MG	73	<i>temazepam cap 15 mg.....</i>	<i>130</i>
TASIGNA CAP 50MG.....	73	<i>temazepam cap 30 mg.....</i>	<i>130</i>
<i>tasimelteon capsule 20 mg</i>	<i>132</i>	<i>temazepam cap 7.5 mg</i>	<i>130</i>
TASMAR TAB 100MG	75	TEMBEXA SUS 10MG/ML	87
<i>tavaborole soln 5%</i>	<i>106</i>	TEMBEXA TAB 100MG	87
TAVALISSE TAB 100MG	126	TEMODAR CAP 100MG.....	66
TAVALISSE TAB 150MG	126	TEMODAR CAP 140MG.....	66
TAVNEOS CAP 10MG.....	126	<i>temozolomide cap 140 mg</i>	<i>66</i>
TAYTULLA CAP 1MG/20MC.....	100	<i>temozolomide cap 180 mg</i>	<i>66</i>
<i>tazarotene cream 0.1%.....</i>	<i>107</i>	<i>temozolomide cap 20 mg</i>	<i>66</i>
<i>tazarotene gel 0.05%</i>	<i>107</i>	<i>temozolomide cap 5 mg</i>	<i>66</i>
<i>tazarotene gel 0.1%.....</i>	<i>107</i>	tencon.....	14
<i>tazicef</i>	<i>96</i>	<i>tenofovir disoproxil fumarate tab 300 mg</i>	<i>84</i>
TAZICEF.....	96	TENORETIC TAB 100	64
TAZORAC CRE 0.05%	107	TENORETIC TAB 50.....	64
TAZORAC CRE 0.1%.....	107	TEPMETKO TAB 225MG	73
TAZORAC GEL 0.05%	108	<i>terazosin hcl cap 10 mg (base equivalent)</i>	<i>61</i>
TAZORAC GEL 0.1%.....	107	<i>terazosin hcl cap 1 mg (base equivalent) ..</i>	<i>60</i>
<i>taztia xt</i>	<i>91</i>	<i>terazosin hcl cap 2 mg (base equivalent) .</i>	<i>60</i>
<i>taztia xt cap 300mg er</i>	<i>91</i>	<i>terazosin hcl cap 5 mg (base equivalent) .</i>	<i>60</i>
TAZVERIK TAB 200MG	73	<i>terbinafine hcl tab 250 mg</i>	<i>53</i>
TEGRETOL SUS 100/5ML	39	<i>terbutaline sulfate inj 1 mg/ml</i>	<i>32</i>

<i>terbutaline sulfate tab 2.5 mg</i>	32	<i>theophylline tab er 24hr 600 mg</i>	33
<i>terbutaline sulfate tab 5 mg</i>	32	THIOLA EC TAB 100MG.....	125
<i>terconazole vaginal cream 0.4%</i>	165	THIOLA EC TAB 300MG.....	125
<i>terconazole vaginal cream 0.8%</i>	165	THIOLA TAB 100MG.....	125
<i>terconazole vaginal suppos 80 mg</i>	165	<i>thioridazine hcl tab 100 mg</i>	81
<i>teriflunomide tab 14 mg</i>	153	<i>thioridazine hcl tab 10 mg</i>	81
<i>teriflunomide tab 7 mg</i>	153	<i>thioridazine hcl tab 25 mg</i>	81
<i>teriparatide (recombinant) soln pen-inj 600</i> <i>mcg/2.4ml</i>	115	<i>thioridazine hcl tab 50 mg</i>	81
TERIPARATIDE INJ 620/2.48.....	115	<i>thiothixene cap 10 mg</i>	82
TESTIM GEL 1%(50MG).....	23	<i>thiothixene cap 1 mg</i>	82
<i>testosterone cypionate im inj in oil 100</i> <i>mg/ml</i>	23	<i>thiothixene cap 2 mg</i>	82
<i>testosterone cypionate im inj in oil 200</i> <i>mg/ml</i>	23	<i>thiothixene cap 5 mg</i>	82
<i>testosterone enanthate im inj in oil 200</i> <i>mg/ml</i>	23	<i>thrive</i>	155
<i>testosterone td gel 10mg/act (2%)</i>	23	<i>tiadytl cap 180mg/24</i>	91
<i>testosterone td gel 12.5 mg/act (1%)</i>	23	<i>tiadytl cap 240mg/24</i>	91
<i>testosterone td gel 20.25 mg/1.25gm</i> <i>(1.62%)</i>	23	<i>tiadytl er</i>	91
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	23	<i>tiagabine hcl tab 12 mg</i>	41
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	23	<i>tiagabine hcl tab 16 mg</i>	41
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	23	<i>tiagabine hcl tab 2 mg</i>	40
<i>testosterone td gel 50 mg/5gm (1%)</i>	23	<i>tiagabine hcl tab 4 mg</i>	41
<i>testosterone td soln 30 mg/act</i>	23	TIAZAC CAP 120MG/24.....	91
<i>tetrabenazine tab 12.5 mg</i>	152	TIAZAC CAP 180MG/24.....	91
<i>tetrabenazine tab 25 mg</i>	152	TIAZAC CAP 240MG/24.....	91
<i>tetracycline hcl cap 250 mg</i>	157	TIAZAC CAP 300MG/24.....	91
<i>tetracycline hcl cap 500 mg</i>	157	TIAZAC CAP 360MG/24.....	91
TEXACORT SOL 2.5%.....	110	TIAZAC CAP 420MG/24.....	91
THALOMID CAP 100MG.....	139	TIBSOVO TAB 250MG.....	73
THALOMID CAP 150MG.....	139	TIGLUTIK SUS 50/10ML.....	143
THALOMID CAP 200MG.....	139	TIKOSYN CAP 125MCG.....	29
THALOMID CAP 50MG.....	139	TIKOSYN CAP 250MCG.....	29
THEO-24 CAP 100MG CR.....	33	TIKOSYN CAP 500MCG.....	29
THEO-24 CAP 200MG CR.....	33	<i>tilia fe tab</i>	100
THEO-24 CAP 300MG CR.....	33	<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	144
THEO-24 CAP 400MG ER.....	33	<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	144
<i>theophylline elixir 80 mg/15ml</i>	33	<i>timolol maleate ophth soln 0.25%</i>	144
<i>theophylline tab er 12hr 300 mg</i>	33	<i>timolol maleate tab 10 mg</i>	89
<i>theophylline tab er 12hr 450 mg</i>	33	TIMOLOL MALEATE TAB 20 MG.....	89
<i>theophylline tab er 24hr 400 mg</i>	33	<i>timolol maleate tab 5 mg</i>	89
		TIMOPTIC SOL 0.25% OP.....	144
		TIMOPTIC SOL 0.5% OP.....	144
		TIMOPTIC-XE SOL 0.25% OP.....	144
		TIMOPTIC-XE SOL 0.5% OP.....	144

<i>tinidazole tab 250 mg</i>	25	<i>tobramycin-dexamethasone ophth susp</i>	
<i>tinidazole tab 500 mg</i>	25	0.3-0.1%	147
<i>tiopronin tab 100 mg</i>	125	<i>tobramycin nebu soln 300 mg/4ml</i>	10
TIROSINT CAP 100MCG	159	<i>tobramycin nebu soln 300 mg/5ml</i>	10
TIROSINT CAP 112MCG	159	<i>tobramycin ophth soln 0.3%</i>	145
TIROSINT CAP 125MCG	159	<i>tobramycin sulfate inj 10 mg/ml (base</i>	
TIROSINT CAP 137MCG	159	<i>equivalent)</i>	10
TIROSINT CAP 13MCG.....	159	<i>tobramycin sulfate inj 80 mg/2ml (40</i>	
TIROSINT CAP 150MCG	159	<i>mg/ml) (base equiv)</i>	10
TIROSINT CAP 175MCG	159	TOBREX OIN 0.3% OP	145
TIROSINT CAP 200	159	<i>tolcapone tab 100 mg</i>	75
TIROSINT CAP 25MCG.....	159	<i>tolmetin sodium cap 400 mg</i>	13
TIROSINT CAP 37.5MCG.....	159	<i>tolmetin sodium tab 600 mg</i>	13
TIROSINT CAP 44MCG.....	159	TOLSURA CAP 65MG.....	54
TIROSINT CAP 50MCG.....	159	<i>tolterodine tartrate cap er 24hr 2 mg</i>	164
TIROSINT CAP 62.5MCG.....	159	<i>tolterodine tartrate cap er 24hr 4 mg</i>	164
TIROSINT CAP 75MCG.....	159	<i>tolterodine tartrate tab 1 mg</i>	164
TIROSINT CAP 88MCG.....	159	<i>tolterodine tartrate tab 2 mg</i>	164
TIROSINT-SOL SOL 100MCG	160	<i>tolvaptan tab 15 mg</i>	119
TIROSINT-SOL SOL 112MCG	160	<i>tolvaptan tab 30 mg</i>	119
TIROSINT-SOL SOL 125MCG.....	160	TOPAMAX SPR CAP 15MG	39
TIROSINT-SOL SOL 137MCG.....	160	TOPAMAX SPR CAP 25MG	39
TIROSINT-SOL SOL 13MCG/ML	160	TOPAMAX TAB 100MG	39
TIROSINT-SOL SOL 150MCG	160	TOPAMAX TAB 200MG	39
TIROSINT-SOL SOL 175MCG.....	160	TOPAMAX TAB 25MG	39
TIROSINT-SOL SOL 200MCG.....	160	TOPAMAX TAB 50MG.....	39
TIROSINT-SOL SOL 25MCG/ML.....	160	<i>topiramate cap er 24hr 100 mg</i>	39
TIROSINT-SOL SOL 37.5/ML.....	160	<i>topiramate cap er 24hr 25 mg</i>	39
TIROSINT-SOL SOL 44MCG/ML	160	<i>topiramate cap er 24hr 50 mg</i>	39
TIROSINT-SOL SOL 50MCG/ML	160	<i>topiramate cap er 24hr sprinkle 100 mg</i> ...	39
TIROSINT-SOL SOL 62.5/ML	160	<i>topiramate cap er 24hr sprinkle 150 mg</i> ...	39
TIROSINT-SOL SOL 75MCG/ML.....	160	<i>topiramate cap er 24hr sprinkle 200 mg</i> ..	39
TIROSINT-SOL SOL 88MCG/ML.....	160	<i>topiramate cap er 24hr sprinkle 25 mg</i>	39
TIVICAY PD TAB 5MG	84	<i>topiramate cap er 24hr sprinkle 50 mg</i>	39
TIVICAY TAB 10MG.....	84	<i>topiramate sprinkle cap 15 mg</i>	39
TIVICAY TAB 25MG	84	<i>topiramate sprinkle cap 25 mg</i>	39
TIVICAY TAB 50MG.....	84	<i>topiramate tab 100 mg</i>	40
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	142	<i>topiramate tab 200 mg</i>	40
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	142	<i>topiramate tab 25 mg</i>	39
TOBI NEB 300/5ML.....	10	<i>topiramate tab 50 mg</i>	40
TOBI PODHALR CAP 28MG	10	TOPROL XL TAB 100MG	88
TOBRADEX OIN 0.3-0.1%	146	TOPROL XL TAB 200MG	88
TOBRADEX ST SUS 0.3-0.05.....	146	TOPROL XL TAB 25MG	88
TOBRADEX SUS 0.3-0.1%	146	TOPROL XL TAB 50MG.....	88

<i>toremifene citrate tab 60 mg (base equivalent)</i>	68	<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	148
<i>torseamide tab 100 mg</i>	114	<i>trazodone hcl tab 100 mg</i>	44
<i>torseamide tab 10 mg</i>	114	<i>trazodone hcl tab 150 mg</i>	44
<i>torseamide tab 20 mg</i>	114	<i>trazodone hcl tab 300 mg</i>	44
<i>torseamide tab 5 mg</i>	114	<i>trazodone hcl tab 50 mg</i>	44
TOSYMRA SOL 10MG	136	TRELEGY AER 100MCG	32
TOUJEO MAX INJ 300/ML	49	TRELEGY AER 200MCG	32
TOUJEO SOLO INJ 300/ML	49	TREMFYA INJ 100MG/ML	108
TOVIAZ TAB 4MG	164	TRESIBA FLEX INJ 100UNIT	49
TOVIAZ TAB 8MG	164	TRESIBA FLEX INJ 200UNIT	49
TRACLEER TAB 125MG	94	TRESIBA INJ 100UNIT	49
TRACLEER TAB 32MG	94	<i>tretinoin cap 10 mg</i>	74
TRACLEER TAB 62.5MG	94	<i>tretinoin cream 0.025%</i>	105
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	20	<i>tretinoin cream 0.05%</i>	105
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	19	<i>tretinoin cream 0.1%</i>	105
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	19	<i>tretinoin gel 0.01%</i>	105
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	19	<i>tretinoin gel 0.025%</i>	105
<i>tramadol hcl tab 100 mg</i>	20	<i>tretinoin gel 0.05%</i>	105
<i>tramadol hcl tab 50 mg</i>	19	TREXALL TAB 10MG	67
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	20	TREXALL TAB 15MG	67
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	20	TREXALL TAB 5MG	67
<i>trandolapril tab 1 mg</i>	59	TREXALL TAB 7.5MG	67
<i>trandolapril tab 2 mg</i>	59	TREXIMET TAB 85-500MG	134
<i>trandolapril tab 4 mg</i>	59	<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	110
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	64	<i>triamcinolone acetonide cream 0.025%</i>	110
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	64	<i>triamcinolone acetonide cream 0.1%</i>	110
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	64	<i>triamcinolone acetonide cream 0.5%</i>	110
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	64	<i>triamcinolone acetonide dental paste 0.1%</i>	141
<i>tranexamic acid tab 650 mg</i>	129	<i>triamcinolone acetonide lotion 0.025%</i>	110
TRANSDERM-SC DIS 1MG/3DAY	52	<i>triamcinolone acetonide lotion 0.1%</i>	110
<i>tranylcypromine sulfate tab 10 mg</i>	42	<i>triamcinolone acetonide oint 0.025%</i>	110
TRAVATAN Z DRO 0.004%	148	<i>triamcinolone acetonide oint 0.1%</i>	110
		<i>triamcinolone acetonide oint 0.5%</i>	110
		<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	113
		<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	113
		<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	113
		<i>triamterene cap 100 mg</i>	114
		<i>triamterene cap 50 mg</i>	114

<i>triazolam tab 0.125 mg</i>	131	<i>trimipramine maleate cap 25 mg</i>	47
<i>triazolam tab 0.25 mg</i>	131	<i>trimipramine maleate cap 50 mg</i>	47
TRIBENZOR20- TAB 5-12.5MG	64	TRINTELLIX TAB 10MG	44
TRIBENZOR40- TAB 10-12.5.....	64	TRINTELLIX TAB 20MG	44
TRIBENZOR40- TAB 10-25MG.....	64	TRINTELLIX TAB 5MG.....	44
TRIBENZOR40- TAB 5-12.5MG.....	64	<i>tri-sprintec</i>	100
TRIBENZOR40- TAB 5-25MG	64	<i>tri-sprintec tab</i>	100
TRICOR TAB 145MG	56	TRIUMEQ PD TAB	84
TRICOR TAB 48MG.....	56	TRIUMEQ TAB	84
<i>triderm</i>	110	<i>tri-vit/fluo dro 0.25mg</i>	141
<i>trientine hcl cap 250 mg</i>	138	<i>tri-vit/fluo dro 0.5mg</i>	141
<i>trientine hcl cap 500 mg</i>	138	<i>trivora-28</i>	100
<i>tri-estarylla</i>	100	<i>tri-vylibra</i>	100
<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i>	81	<i>tri-vylibra lo</i>	100
<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i>	81	TRIZIVIR TAB	84
<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i>	81	TROKENDI XR CAP 100MG	40
<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i>	81	TROKENDI XR CAP 200MG	40
<i>trifluridine ophth soln 1%</i>	145	TROKENDI XR CAP 25MG.....	40
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	74	TROKENDI XR CAP 50MG.....	40
<i>trihexyphenidyl hcl tab 2 mg</i>	74	<i>tropicamide ophth soln 0.5%</i>	144
<i>trihexyphenidyl hcl tab 5 mg</i>	74	<i>tropicamide ophth soln 1%</i>	144
TRIJARDY XR TAB	48	<i>trospium chloride cap er 24hr 60 mg</i>	164
TRIKAFTA PAK 59.5MG.....	156	<i>trospium chloride tab 20 mg</i>	164
TRIKAFTA PAK 75MG	156	TRULANCE TAB 3MG.....	122
TRIKAFTA TAB.....	156	TRULICITY INJ 0.75/0.5	49
<i>tri-legest fe</i>	100	TRULICITY INJ 1.5/0.5	49
TRILEPTAL SUS 300MG/5M.....	40	TRULICITY INJ 3/0.5	49
TRILEPTAL TAB 150MG	40	TRULICITY INJ 4.5/0.5.....	49
TRILEPTAL TAB 300MG	40	TUKYSA TAB 150MG	73
TRILEPTAL TAB 600MG	40	TUKYSA TAB 50MG.....	73
<i>tri-linyah</i>	100	TURALIO CAP 125MG.....	73
TRILIPIX CAP 135MG.....	56	TUXARIN ER TAB 54.3-8MG.....	104
TRILIPIX CAP 45MG	56	TUZISTRA XR SUS	104
<i>tri-lo-estarylla</i>	100	TWIRLA DIS 120-30	101
<i>tri-lo-marzia</i>	100	TYBOST TAB 150MG	84
<i>tri-lo-sprintec</i>	100	<i>tydemy tab</i>	100
<i>trimethobenzamide hcl cap 300 mg</i>	52	TYKERB TAB 250MG	73
<i>trimethoprim tab 100 mg</i>	25	TYMLOS INJ.....	115
<i>tri-mili</i>	100	TYVASO DPI POW 16-32-48.....	94
<i>trimipramine maleate cap 100 mg</i>	47	TYVASO DPI POW 16-32MCG.....	94
		TYVASO DPI POW 16MCG.....	94
		TYVASO DPI POW 32-48MCG.....	94
		TYVASO DPI POW 32MCG	94
		TYVASO DPI POW 48MCG.....	94

TYVASO DPI POW 64MCG.....	94	VALIUM TAB 2MG.....	28
TYVASO START SOL 0.6MG/ML.....	94	VALIUM TAB 5MG.....	28
U		<i>valproate sodium oral soln 250 mg/5ml</i>	
UBRELVY TAB 100MG	134	<i>(base equiv)</i>	41
UBRELVY TAB 50MG	134	<i>valproic acid cap 250 mg</i>	41
UCERIS AER 2MG/ACT	24	<i>valsartan-hydrochlorothiazide tab 160-12.5</i>	
UCERIS TAB 9MG.....	103	<i>mg</i>	64
UDENYCA INJ 6MG/.6ML.....	129	<i>valsartan-hydrochlorothiazide tab 160-25</i>	
UDENYCA INJ 6MG/0.6	128	<i>mg</i>	64
ULORIC TAB 40MG	126	<i>valsartan-hydrochlorothiazide tab 320-12.5</i>	
ULORIC TAB 80MG	126	<i>mg</i>	64
<i>umecta mousse</i>	110	<i>valsartan-hydrochlorothiazide tab 320-25</i>	
<i>unithroid.....</i>	160	<i>mg</i>	64
UPNEEQ SOL 0.1%	147	<i>valsartan-hydrochlorothiazide tab 80-12.5</i>	
UPTRAVI PACK TAB 200/800	95	<i>mg</i>	64
UPTRAVI TAB 1000MCG.....	95	<i>valsartan oral soln 4 mg/ml.....</i>	60
UPTRAVI TAB 1200MCG.....	95	<i>valsartan tab 160 mg</i>	60
UPTRAVI TAB 1400MCG.....	95	<i>valsartan tab 320 mg.....</i>	60
UPTRAVI TAB 1600MCG.....	95	<i>valsartan tab 40 mg.....</i>	60
UPTRAVI TAB 200MCG	95	<i>valsartan tab 80 mg.....</i>	60
UPTRAVI TAB 400MCG	95	VALTOCO SPR 10MG	35
UPTRAVI TAB 600MCG	95	VALTOCO SPR 15MG.....	35
UPTRAVI TAB 800MCG	95	VALTOCO SPR 20MG.....	35
<i>urea cream 39%.....</i>	110	VALTOCO SPR 5MG	35
<i>urea cream 40%.....</i>	110	VALTREX TAB 1GM	86
<i>urea cream 45%.....</i>	110	VALTREX TAB 500MG	86
<i>urea hydrating</i>	110	VANCOCIN CAP 125MG.....	25
<i>urea nail</i>	110	VANCOCIN CAP 250MG.....	25
UROXATRAL TAB 10MG	125	<i>vancomycin hcl cap 125 mg (base</i>	
URSO 250 TAB 250MG	122	<i>equivalent).....</i>	25
<i>ursodiol cap 300 mg</i>	122	<i>vancomycin hcl cap 250 mg (base</i>	
<i>ursodiol tab 250 mg</i>	122	<i>equivalent).....</i>	25
<i>ursodiol tab 500 mg</i>	122	<i>vancomycin hcl for oral soln 25 mg/ml</i>	
URSO FORTE TAB 500MG	122	<i>(base equivalent).....</i>	25
V		<i>vancomycin hcl for oral soln 50 mg/ml</i>	
VAGIFEM TAB 10MCG	165	<i>(base equivalent).....</i>	25
<i>valacyclovir hcl tab 1 gm</i>	86	VANDAZOLE GEL 0.75%.....	165
<i>valacyclovir hcl tab 500 mg.....</i>	86	<i>vardenafil hcl orally disintegrating tab 10</i>	
VALCHLOR GEL 0.016%.....	107	<i>mg</i>	93
<i>valganciclovir hcl for soln 50 mg/ml (base</i>		<i>vardenafil hcl tab 10 mg</i>	94
<i>equiv)</i>	85	<i>vardenafil hcl tab 2.5 mg.....</i>	93
<i>valganciclovir hcl tab 450 mg (base</i>		<i>vardenafil hcl tab 20 mg.....</i>	94
<i>equivalent).....</i>	85	<i>vardenafil hcl tab 5 mg.....</i>	93
VALIUM TAB 10MG	28		

<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>
.....155	.....45
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>
.....155	.....45
<i>varenicline tartrate tab 1 mg (base equiv)</i>	VENTAVIS SOL 10MCG/ML.....94
.....155	VENTAVIS SOL 20MCG/ML.....94
VARUBI TAB 90MG.....53	VENTOLIN HFA AER.....32
VASCEPA CAP 0.5GM.....55	<i>verapamil hcl cap er 24hr 100 mg</i>.....91
VASCEPA CAP 1GM.....55	<i>verapamil hcl cap er 24hr 120 mg</i>.....91
VASOTEC TAB 10MG.....59	<i>verapamil hcl cap er 24hr 180 mg</i>.....91
VASOTEC TAB 2.5MG.....59	<i>verapamil hcl cap er 24hr 200 mg</i>.....91
VASOTEC TAB 20MG.....59	<i>verapamil hcl cap er 24hr 240 mg</i>.....91
VASOTEC TAB 5MG.....59	<i>verapamil hcl cap er 24hr 300 mg</i>.....91
<i>velivet</i>.....100	<i>verapamil hcl cap er 24hr 360 mg</i>.....91
VELPHORO CHW 500MG.....124	<i>verapamil hcl tab 120 mg</i>.....91
VELTASSA POW 16.8GM.....140	<i>verapamil hcl tab 40 mg</i>.....91
VELTASSA POW 25.2GM.....140	<i>verapamil hcl tab 80 mg</i>.....91
VELTASSA POW 8.4GM.....140	<i>verapamil hcl tab er 120 mg</i>.....91
VEMLIDY TAB 25MG.....86	<i>verapamil hcl tab er 180 mg</i>.....91
VENCLEXTA TAB 100MG.....67	<i>verapamil hcl tab er 240 mg</i>.....91
VENCLEXTA TAB 10MG.....67	VEREGEN OIN 15%.....105
VENCLEXTA TAB 50MG.....67	VERELAN CAP 120MG SR.....91
VENCLEXTA TAB START PK.....67	VERELAN CAP 180MG SR.....91
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	VERELAN CAP 240MG SR.....91
.....45	VERELAN CAP 360MG SR.....91
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	VERELAN PM CAP 100MG ER.....91
.....45	VERELAN PM CAP 200MG ER.....91
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	VERELAN PM CAP 300MG ER.....91
.....45	VERQUVO TAB 10MG.....95
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	VERQUVO TAB 2.5MG.....95
.....45	VERQUVO TAB 5MG.....95
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	VERSACLOZ SUS 50MG/ML.....80
.....45	VERZENIO TAB 100MG.....73
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	VERZENIO TAB 150MG.....73
.....45	VERZENIO TAB 200MG.....73
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	VERZENIO TAB 50MG.....73
.....45	VESICARE LS SUS 5MG/5ML.....164
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	VESICARE TAB 10MG.....164
.....45	VESICARE TAB 5MG.....164
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	VFEND SUS 40MG/ML.....54
.....45	VFEND TAB 200MG.....54
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	VFEND TAB 50MG.....54
.....45	V-GO 20 KIT.....134
	V-GO 30 KIT.....134

V-GO 40 KIT	134	VIZIMPRO TAB 30MG.....	73
VIBERZI TAB 100MG.....	123	VIZIMPRO TAB 45MG.....	73
VIBERZI TAB 75MG	123	VOGELXO GEL PUMP 1%.....	23
VICTOZA INJ 18MG/3ML.....	49	<i>volnea</i>	100
<i>vienva</i>	100	VONJO CAP 100MG	73
<i>vigabatrín powd pack 500 mg</i>	41	VOQUEZNA PAK DUAL PAK	163
<i>vigabatrín tab 500 mg</i>	41	VOQUEZNA PAK TRIP PK.....	163
VIGAMOX DRO 0.5%	145	<i>voriconazole for susp 40 mg/ml</i>	54
VIIBRYD KIT STARTER	44	<i>voriconazole tab 200 mg</i>	54
VIIBRYD TAB 10MG	44	<i>voriconazole tab 50 mg</i>	54
VIIBRYD TAB 20MG.....	44	VOSEVI TAB	86
VIIBRYD TAB 40MG.....	44	VOTRIENT TAB 200MG.....	73
VIJOICE TAB 125MG	140	VOWST CAP	123
VIJOICE TAB 250MG	140	VOXZOGO INJ 0.4MG	118
VIJOICE TAB 50MG	140	VOXZOGO INJ 0.56MG	118
<i>vilazodone hcl tab 10 mg</i>	44	VOXZOGO INJ 1.2MG.....	118
<i>vilazodone hcl tab 20 mg</i>	44	VRAYLAR CAP 1.5-3MG	78
<i>vilazodone hcl tab 40 mg</i>	44	VRAYLAR CAP 1.5MG.....	78
VIMPAT SOL 10MG/ML	40	VRAYLAR CAP 3MG	78
VIMPAT TAB 100MG	40	VRAYLAR CAP 4.5MG	78
VIMPAT TAB 150MG	40	VRAYLAR CAP 6MG	78
VIMPAT TAB 200MG.....	40	VUITY SOL 1.25% OP	144
VIMPAT TAB 50MG	40	VUMERITY CAP 231MG	153
VIOKACE TAB 10440	113	<i>vyfemla tab 0.4-35</i>	100
VIOKACE TAB 20880.....	113	VYLEESI INJ 1.75/0.3	152
<i>viorele</i>	100	<i>vylibra</i>	100
VIRACEPT TAB 250MG	84	<i>vylibra tab 0.25-35</i>	100
VIRACEPT TAB 625MG	85	VYNDAMAX CAP 61MG	95
VIREAD POW 40MG/GM	85	VYNDAQEL CAP 20MG.....	95
VIREAD TAB 150MG	85	VYTORIN TAB 10-10MG	55
VIREAD TAB 200MG.....	85	VYTORIN TAB 10-20MG.....	55
VIREAD TAB 250MG.....	85	VYTORIN TAB 10-40MG	55
VIREAD TAB 300MG.....	85	VYTORIN TAB 10-80MG	55
VITAFOL-ONE CAP	142	VYVANSE CAP 10MG.....	3
VITRAKVI CAP 100MG.....	73	VYVANSE CAP 20MG	3
VITRAKVI CAP 25MG	73	VYVANSE CAP 30MG	3
VITRAKVI SOL 20MG/ML	73	VYVANSE CAP 40MG.....	3
VIVELLE-DOT DIS 0.025MG	121	VYVANSE CAP 50MG.....	3
VIVELLE-DOT DIS 0.0375MG	121	VYVANSE CAP 60MG.....	3
VIVELLE-DOT DIS 0.05MG	121	VYVANSE CAP 70MG	3
VIVELLE-DOT DIS 0.075MG	121	VYVANSE CHW 10MG	3
VIVELLE-DOT DIS 0.1MG.....	121	VYVANSE CHW 20MG.....	3
VIVJOA CAP 150MG.....	54	VYVANSE CHW 30MG	3
VIZIMPRO TAB 15MG.....	73	VYVANSE CHW 40MG	3

VYVANSE CHW 50MG	3	XANAX XR TAB 2MG	28
VYVANSE CHW 60MG	3	XANAX XR TAB 3MG	28
W		XARELTO STAR TAB 15/20MG	33
<i>warfarin sodium tab 10 mg</i>	33	XARELTO SUS 1MG/ML	33
<i>warfarin sodium tab 1 mg</i>	33	XARELTO TAB 10MG	33
<i>warfarin sodium tab 2.5 mg</i>	33	XARELTO TAB 15MG	33
<i>warfarin sodium tab 4 mg</i>	33	XARELTO TAB 2.5MG.....	33
<i>warfarin sodium tab 5 mg</i>	33	XARELTO TAB 20MG.....	33
<i>warfarin sodium tab 6 mg</i>	33	XCOPRI PAK 100-150.....	40
<i>warfarin sodium tab 7.5 mg</i>	33	XCOPRI PAK 150-200	40
<i>water for irrigation, sterile irrigation soln</i>	140	XCOPRI STARTER PAK 12.5-25	40
WEGOVY INJ 0.25MG	4	XCOPRI STARTER PAK 150-200	40
WEGOVY INJ 0.5MG	4	XCOPRI STARTER PAK 50-100.....	40
WEGOVY INJ 1.7MG.....	4	XCOPRI TAB 100MG.....	40
WEGOVY INJ 1MG.....	4	XCOPRI TAB 150MG.....	40
WEGOVY INJ 2.4MG.....	4	XCOPRI TAB 200MG.....	40
WELCHOL PAK 3.75GM.....	55	XCOPRI TAB 50MG	40
WELCHOL TAB 625MG.....	55	XELJANZ SOL 1MG/ML	11
WELIREG TAB 40MG.....	68	XELJANZ TAB 10MG	11
WELLBUTRIN TAB 100MG SR	42	XELJANZ TAB 5MG.....	11
WELLBUTRIN TAB 150MG SR	42	XELJANZ XR TAB 11MG	11
WELLBUTRIN TAB 200MG SR	42	XELJANZ XR TAB 22MG.....	11
<i>wera</i>	100	XELODA TAB 150MG	67
WINLEVI CRE 1%	105	XELODA TAB 500MG	67
WINRHO SDF INJ 15000UNT	149	XELPROS EMU 0.005%.....	148
WINRHO SDF INJ 1500UNIT	148	XENAZINE TAB 12.5MG	152
WINRHO SDF INJ 2500UNIT	149	XENAZINE TAB 25MG.....	152
WINRHO SDF INJ 5000UNIT.....	149	XENICAL CAP 120MG.....	4
<i>wixela inhub</i>	32	XENLETA TAB 600MG	26
X		XERAC-AC SOL 6.25%.....	111
XADAGO TAB 100MG.....	77	XERMELO TAB 250MG.....	124
XADAGO TAB 50MG.....	77	XHANCE MIS 93MCG	143
XALATAN SOL 0.005%	148	XIFAXAN TAB 200MG	25
XALKORI CAP 150MG.....	73	XIFAXAN TAB 550MG	25
XALKORI CAP 200MG.....	73	XIGDUO XR TAB 10-1000.....	48
XALKORI CAP 20MG	73	XIGDUO XR TAB 10-500MG	48
XALKORI CAP 250MG.....	73	XIGDUO XR TAB 2.5-1000	48
XALKORI CAP 50MG	73	XIGDUO XR TAB 5-1000MG	48
XANAX TAB 0.25MG	28	XIGDUO XR TAB 5-500MG.....	48
XANAX TAB 0.5MG.....	28	XIIDRA DRO 5%.....	145
XANAX TAB 1MG.....	28	XOFLUZA TAB 20MG.....	86
XANAX TAB 2MG	28	XOFLUZA TAB 40MG	86
XANAX XR TAB 0.5MG.....	28	XOFLUZA TAB 80MG	86
XANAX XR TAB 1MG.....	28	XOLAIR INJ 150MG/ML	29

XOLAIR INJ 300/2ML.....	29	ZELAPAR TAB 1.25MG.....	77
XOLAIR INJ 75/0.5	29	ZELBORAF TAB 240MG	73
XOSPATA TAB 40MG.....	73	ZEMBRACE SYM INJ 3/0.5ML	136
XPOVIO PAK 60MG.....	69	<i>zenatane</i>	105
XPOVIO PAK 80MG.....	69	ZENPEP CAP 10000UNT	113
XTAMPZA ER CAP 13.5MG.....	20	ZENPEP CAP 15000UNT	113
XTAMPZA ER CAP 18MG	20	ZENPEP CAP 20000UNT	113
XTAMPZA ER CAP 27MG.....	20	ZENPEP CAP 25000UNT	113
XTAMPZA ER CAP 36MG	20	ZENPEP CAP 3000UNIT.....	113
XTAMPZA ER CAP 9MG.....	20	ZENPEP CAP 40000UNT	113
XTANDI CAP 40MG	68	ZENPEP CAP 5000UNIT.....	113
XTANDI TAB 40MG	68	ZENPEP CAP 60000UNT	113
XTANDI TAB 80MG	68	<i>zenzedi tab 15mg</i>	3
<i>xulane</i>	101	<i>zenzedi tab 2.5mg</i>	3
XURIDEN POW 2GM	118	<i>zenzedi tab 20mg</i>	3
XYOSTED INJ 100/0.5.....	24	<i>zenzedi tab 7.5mg</i>	3
XYOSTED INJ 50/0.5	23	ZESTRIL TAB 10MG.....	59
XYOSTED INJ 75/0.5.....	23	ZESTRIL TAB 2.5MG	59
XYREM SOL 500MG/ML	150	ZESTRIL TAB 20MG.....	59
XYWAV SOL 0.5GM/ML.....	150	ZESTRIL TAB 30MG.....	59
Y		ZESTRIL TAB 40MG.....	59
YASMIN 28 TAB 3-0.03MG	100	ZESTRIL TAB 5MG	59
YAZ TAB 3-0.02MG	101	ZETIA TAB 10MG	57
YONSA TAB 125MG	68	ZETONNA AER 37MCG.....	143
YUPELRI SOL	29	ZIAC TAB 10/6.25.....	64
<i>yuvafem</i>	165	ZIAC TAB 2.5/6.25	64
Z		ZIAC TAB 5-6.25MG	64
<i>zafirlukast tab 10 mg</i>	30	ZIAGEN SOL 20MG/ML.....	85
<i>zafirlukast tab 20 mg</i>	30	ZIAGEN TAB 300MG	85
<i>zaleplon cap 10 mg</i>	131	<i>zidovudine cap 100 mg</i>	85
<i>zaleplon cap 5 mg</i>	131	<i>zidovudine syrup 10 mg/ml</i>	85
ZANAFLEX TAB 4MG	142	<i>zidovudine tab 300 mg</i>	85
ZARONTIN CAP 250MG	41	ZIEXTENZO INJ 6/0.6ML.....	129
ZARONTIN SOL 250/5ML	41	ZIMHI SOL	52
ZARXIO INJ 300/0.5	129	ZIOPTAN DRO 0.0015%	148
ZARXIO INJ 480/0.8	129	<i>ziprasidone hcl cap 20 mg</i>	78
ZAVESCA CAP 100MG	127	<i>ziprasidone hcl cap 40 mg</i>	78
ZEGERID CAP 40-1100.....	163	<i>ziprasidone hcl cap 60 mg</i>	78
ZEGERID POW 20-1680.....	163	<i>ziprasidone hcl cap 80 mg</i>	78
ZEGERID POW 40-1680.....	163	ZIRGAN GEL 0.15%	145
ZEJULA CAP 100MG.....	73	ZITHROMAX POW 1GM PAK.....	132
ZEJULA TAB 100MG	73	ZITHROMAX SUS 100/5ML.....	132
ZEJULA TAB 200MG	73	ZITHROMAX SUS 200/5ML	132
ZEJULA TAB 300MG	73	ZITHROMAX TAB 500MG	132

ZITHROMAX TAB TRI-PAK.....	132	ZORTRESS TAB 0.25MG	140
ZITHROMAX TAB Z-PAK	132	ZORTRESS TAB 0.5MG.....	140
ZOCOR TAB 10MG	57	ZORTRESS TAB 0.75MG	140
ZOCOR TAB 20MG.....	57	ZORTRESS TAB 1MG.....	140
ZOCOR TAB 40MG	57	ZORYVE CRE 0.3%.....	108
ZOKINVY CAP 50MG.....	140	ZOVIRAX OIN 5%	108
ZOKINVY CAP 75MG	140	ZTALMY SUS 50MG/ML.....	40
ZOLINZA CAP 100MG.....	73	ZUBSOLV SUB 0.7-0.18	22
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	136	ZUBSOLV SUB 1.4-0.36	22
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>		ZUBSOLV SUB 11.4-2.9	22
.....	137	ZUBSOLV SUB 2.9-0.71	22
<i>zolmitriptan orally disintegrating tab 5 mg</i>		ZUBSOLV SUB 5.7-1.4.....	22
.....	137	ZUBSOLV SUB 8.6-2.1.....	22
<i>zolmitriptan tab 2.5 mg</i>	137	ZYDELIG TAB 100MG	73
<i>zolmitriptan tab 5 mg</i>	137	ZYDELIG TAB 150MG.....	73
ZOLOFT CON 20MG/ML	44	ZYKADIA TAB 150MG	73
ZOLOFT TAB 100MG	44	ZYLET SUS 0.5-0.3%	147
ZOLOFT TAB 25MG	44	ZYLOPRIM TAB 100MG	126
ZOLOFT TAB 50MG.....	44	ZYLOPRIM TAB 300MG.....	126
<i>zolpidem tartrate sl tab 1.75 mg</i>	131	ZYMAXID SOL 0.5%.....	145
<i>zolpidem tartrate sl tab 3.5 mg</i>	131	ZYPITAMAG TAB 2MG	57
<i>zolpidem tartrate tab 10 mg</i>	131	ZYPITAMAG TAB 4MG	57
<i>zolpidem tartrate tab 5 mg</i>	131	ZYPREXA INJ 10MG.....	80
<i>zolpidem tartrate tab er 12.5 mg</i>	131	ZYPREXA TAB 10MG	80
<i>zolpidem tartrate tab er 6.25 mg</i>	131	ZYPREXA TAB 15MG	80
ZOLPIMIST SPR 5MG.....	131	ZYPREXA TAB 2.5MG.....	80
ZOMIG SPR 2.5MG	137	ZYPREXA TAB 20MG.....	80
ZOMIG SPR 5MG	137	ZYPREXA TAB 5MG.....	80
ZOMIG TAB 2.5MG	137	ZYPREXA TAB 7.5MG.....	80
ZOMIG TAB 5MG	137	ZYPREXA ZYDI TAB 10MG.....	80
ZONALON CRE 5%.....	107	ZYPREXA ZYDI TAB 15MG.....	80
ZONISADE SUS 100MG/5.....	40	ZYPREXA ZYDI TAB 20MG	80
<i>zonisamide cap 100 mg</i>	40	ZYPREXA ZYDI TAB 5MG	80
<i>zonisamide cap 25 mg</i>	40	ZYVOX SUS 100MG/5M	26
<i>zonisamide cap 50 mg</i>	40	ZYVOX TAB 600MG.....	26
ZONTIVITY TAB 2.08MG	127		