

MVP Health Care[®]

2024 Medicare Part D Formulary

(List of Covered Drugs)

For Medicare Advantage plan coverage through a former employer.

Please Read: This document contains information about the drugs we cover in this plan. This Formulary was updated on April 1, 2024. For more recent information or questions, please contact the MVP Medicare Customer Care Center.

Important Message About What You Pay for Vaccines: Our plan covers most Part D vaccines at no cost to you, even if you haven't paid your deductible.

Getting Help from Medicare: If you chose this plan because you were looking for insulin coverage at \$35 a month or less, it is important to know that you may have other options available to you for 2024 at even lower costs because of changes to the Medicare Part D program. Contact Medicare at **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, seven days a week for help comparing your options. TTY users should call 1-877-486-2048.

Additional Resources to Help: Please contact the MVP Medicare Customer Care Center at **1-800-665-7924** for additional information.

TTY users should call 711. Hours are seven days a week, 8 am-8 pm Eastern Time. April 1-September 30, call Monday-Friday, 8 am-8 pm.

Visit mvphealthcare.com/partdformulary for the most up-to-date Formulary listing.

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Note to existing members: This Formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (Formulary) refers to “we,” “us,” or “our,” it means MVP Health Care (MVP). When it refers to “plan” or “our plan,” it means Preferred Gold (HMO-POS), or USA Care (PPO).

This document includes a list of the drugs (Formulary) for our plan which is current as of April 1, 2024. For an updated Formulary, please contact us. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, Formulary, pharmacy network, and/or co-payments/co-insurance may change on January 1, 2025, and from time to time during the year.

What is the MVP Health Care Medicare Part D Formulary?

A Formulary is a list of covered drugs selected by MVP Health Care in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. MVP will generally cover the drugs listed in our Formulary as long as the drug is medically necessary, the prescription is filled at an MVP network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (Drug List) Change?

Most changes in drug coverage happen on January 1, but MVP may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

Changes That Can Affect You This Year

In the below cases, you will be affected by coverage changes during the year.

New Generic Drugs

We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.

- If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section entitled "How do I request an exception to the MVP Medicare Part D Formulary?" on page C.

Drugs Removed from the Market

If the Food and Drug Administration deems a drug on our Formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our Formulary and provide notice to members who take the drug.

Other Changes

We may make other changes that affect members currently taking a drug. For instance, we may add a new generic drug to replace a brand name drug currently on the Formulary; or add new restrictions to the brand name drug or move it to a different cost-sharing tier or both. Or we may add a generic drug that is not new to market to replace a brand name drug currently on the Formulary; or add new restrictions to the brand name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our Formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a one month supply of the drug (up to 30 days).

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled, "How Do I Request an Exception to the MVP Medicare Part D Formulary?"

Changes That Will Not Affect You If You Are Currently Taking the Drug

Generally, if you are taking a drug on our 2024 Formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2024 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year.

You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed Formulary is current as of April 1, 2024. To get updated information about the drugs covered by MVP Health Care, please contact us. Our contact information appears on the front and back cover pages.

In the event of a change or changes to the Formulary during the year, the changes also will be posted at mvphealthcare.com. The updated version of the comprehensive Formulary will be posted on the MVP website on a monthly basis as needed. To view the list of changes, visit mvphealthcare.com/partdformulary.

Or you may request an errata sheet (a copy of the 2024 Formulary changes) by calling the MVP Medicare Customer Care Center at the phone numbers on the back of your Member ID card.

How Do I Use the Formulary?

There are two ways to find your drug within the Formulary:

Medical Condition

The Formulary begins on page 1. 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 list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 115. The Index provides an alphabetical list of all the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index.

1. Look in the Index and find your drug.
2. Next to your drug, you will see the page number where you can find coverage information.
3. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are Generic Drugs?

MVP covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are There Any Restrictions on My Coverage?

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

Prior Authorization

MVP requires you or your physician 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.

Quantity Limits

For certain drugs, MVP limits the amount of the drug that MVP will cover. For example, MVP provides 30 tablets per 30 days per prescription for JANUVIA. This may be in addition to a standard one-month or three-month supply.

Step Therapy

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. You can find out if your drug has any additional requirements or limits by looking in the Formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization restriction and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

You can ask MVP to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the MVP Medicare Part D Formulary?" on the next page for information about how to request an exception.

What If My Drug is Not on the Formulary?

If your drug is not included in this Formulary (list of covered drugs), you should first contact the MVP Medicare Customer Care Center and ask if your drug is covered.

If you learn that MVP Health Care does not cover your drug, you have two options:

1. You can ask the MVP Medicare Customer Care Center for a list of similar drugs that are covered by MVP. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by MVP.
2. You can ask MVP to make an exception and cover your drug. See next section for information about how to request an exception.

How Do I Request an Exception to the MVP Medicare Part D Formulary?

You can ask MVP to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our Formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a Formulary drug at a lower cost-sharing level. If approved, this would lower the amount you must pay for your drug. **Note:** You may not ask us to cover a Tier 5 (Specialty Tier) Formulary drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, MVP limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, MVP will only approve your request for an exception if the alternative drugs included on the plan's Formulary, the lower cost-sharing drug, or additional utilization restrictions would not be as effective in treating your condition and/ or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a Formulary, tiering, or utilization restriction exception. **When you request a Formulary, tiering, or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What Do I Do Before I Can Talk to My Doctor About Changing My Drugs or Requesting an Exception?

As a new or continuing member in our plan, you may be taking drugs that are not on our Formulary. Or, you may be taking a drug that is on our Formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a Formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for

you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our Formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our Formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover up to a cumulative 31-day supply of that drug while you pursue a Formulary exception.

Members who are changing levels of care may be eligible for a transition supply of medication outside of their initial 90-day enrollment transition period. Level of care changes may include: entering or leaving a long-term care facility, discharge from hospital to home, and ending a skilled nursing facility stay and reverting to Part D Formulary coverage under your plan.

For More Information

For more detailed information about your MVP Health Care prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about MVP Health Care, please contact us. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)** 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. Or, visit [medicare.gov](https://www.medicare.gov).

The MVP Health Care Medicare Part D Formulary

The Formulary that begins on page 1 provides coverage information about most of the drugs covered by MVP Health Care. If you have trouble finding your drug in the list, turn to the Index that begins on page 115.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., JANUVIA) and generic drugs are listed in lower-case italics (e.g., *allopurinol*).

The information in the Requirements/Limits column tells you if MVP has any special requirements for coverage of your drug.

Abbreviations and Definitions of Formulary Terms

You may find one or more of the following abbreviations in the Formulary under the Requirements/Limits column next to a drug name.

Not Available at Mail Order (NM)

Certain drugs are not allowed through the mail order pharmacy program. These prescriptions can only be filled at a retail pharmacy.

Prior Authorization (PA)

For safety reasons and/or cost savings, MVP Health Care requires you or your doctor 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 first, MVP may not cover the drug.

Quantity Limits (QL)

For safety reasons and/or cost savings, for certain drugs MVP Health Care limits the amount of the drug that we will cover. For example, MVP provides one capsule per day for JANUVIA. This limit may be applied to a standard one-month or three-month supply.

Step Therapy (ST)

For safety reasons and/or cost savings, in some cases MVP Health Care 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.

Dispensing Limits (DL)

For safety reasons and/or cost savings, certain drugs are limited to a one-month supply through a retail pharmacy and are not available through the mail order program.

Limited Access (LA)

Some drugs are available only through a designated Specialty Pharmacy because of manufacturer limited distribution.

Part B versus Part D drug coverage (B/D)

Some drugs could be covered under the Part B (medical) or Part D (prescription drug) benefit, depending on certain criteria. This means that you or your doctor will need to submit a request to MVP so we can determine, based on Medicare guidelines, if your drug will be covered as Part B or Part D. Your cost sharing will be based on this determination.

Enhanced Drug (ED)

Certain enhanced plans offered through employer groups include additional prescription drug coverage for some Medicare-excluded drugs. Refer to your plan documents to see if you have one of these plans. Please note, these prescription drugs are not normally covered in a Medicare Prescription Drug Plan.

The amount you pay when you fill a prescription for these drugs does not count toward total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage.) In addition, if you are receiving extra help to pay for your prescriptions, you will not get any extra help to pay for this drug.

Tier Descriptions

Tier 1–Preferred Generic Drugs–\$0 cost

Tier 1 includes select generic drugs used to treat chronic conditions such as diabetes, high blood pressure, high cholesterol, and osteoporosis/bone health.

Tier 2–Generic Drugs

Tier 2 includes most other generic drugs on our Formulary. Generic drugs have the same active ingredients, strength, and effectiveness as the brand name versions, but generally at a much lower cost.

Tier 3–Preferred Brand Name Drugs

Tier 3 includes preferred brand drugs that have the lowest cost sharing for brand name drugs. Certain generic drugs may appear in Tier 3 due to potential safety concerns or the high cost of the drug.

Tier 4–Non-Preferred Brand Drugs

Tier 4 includes all other non-preferred brand-name and generic drugs on our Formulary. Part D drugs excluded from our Formulary must go through an exception process in order for MVP to cover them. If they are approved, they will be covered in Tier 4.

Tier 5–Specialty Drugs

Tier 5 includes high cost specialty generic and brand name drugs that cost \$950 or more for a one-month supply. Most drugs in Tier 5 are restricted to a one-month supply at retail, and are excluded from the mail order program and tier exception process.

For more detailed information about your MVP Health Care prescription drug coverage, please review your Evidence of Coverage and other plan materials. Refer to your prescription drug benefit Rider for information about drug tier costs.

Plan-covered insulin drugs have a \$35 maximum co-pay regardless of tier, and are not subject to the deductible.

Paxlovid is available in all plans at a \$0 cost-share. No prior authorization or step therapy required.

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Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
GOUT		
<i>allopurinol tab 100 mg</i>	2	
<i>allopurinol tab 300 mg</i>	2	
<i>colchicine tab 0.6 mg</i>	3	QL (60 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	2	
<i>febuxostat tab 40 mg</i>	3	QL (30 tabs / 30 days)
<i>febuxostat tab 80 mg</i>	3	QL (30 tabs / 30 days)
<i>probenecid tab 500 mg</i>	2	
MISCELLANEOUS		
<i>butalbital-acetaminophen tab 50-325 mg</i>	2	QL (60 tabs / 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	2	QL (60 caps / 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	2	QL (60 caps / 30 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	2	QL (60 tabs / 30 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	2	QL (60 caps / 30 days)
<i>tencon</i>	2	QL (60 tabs / 30 days)
NSAIDS		
<i>celecoxib cap 50 mg</i>	2	
<i>celecoxib cap 100 mg</i>	2	
<i>celecoxib cap 200 mg</i>	2	
<i>celecoxib cap 400 mg</i>	2	
<i>diclofenac potassium tab 50 mg</i>	2	
<i>diclofenac sodium tab delayed release 25 mg</i>	2	
<i>diclofenac sodium tab delayed release 50 mg</i>	2	
<i>diclofenac sodium tab delayed release 75 mg</i>	2	
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	2	
<i>diflunisal tab 500 mg</i>	2	
<i>etodolac cap 200 mg</i>	2	
<i>etodolac cap 300 mg</i>	2	
<i>etodolac tab 400 mg</i>	2	
<i>etodolac tab 500 mg</i>	2	
<i>fenoprofen calcium tab 600 mg</i>	2	
<i>flurbiprofen tab 100 mg</i>	2	

PA - Prior Authorization **QL** - Quantity Limits **NM** - Not available at mail-order **B/D** - Covered under Medicare B or D **LA** - Limited Access **ED** - Enhanced Drugs **DL** - Medication restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>ibu tab 600mg</i>	2	
<i>ibu tab 800mg</i>	2	
<i>ibuprofen tab 400 mg</i>	2	
<i>ibuprofen tab 600 mg</i>	2	
<i>ibuprofen tab 800 mg</i>	2	
<i>ketoprofen cap 25 mg</i>	2	
<i>ketoprofen cap er 24hr 200 mg</i>	3	
<i>meclofenamate sodium cap 50 mg</i>	2	
<i>meclofenamate sodium cap 100 mg</i>	2	
<i>mefenamic acid cap 250 mg</i>	2	
<i>meloxicam tab 7.5 mg</i>	2	
<i>meloxicam tab 15 mg</i>	2	
<i>nabumetone tab 500 mg</i>	2	
<i>nabumetone tab 750 mg</i>	2	
<i>naproxen dr</i>	3	
<i>naproxen sodium tab 275 mg</i>	2	
<i>naproxen sodium tab 550 mg</i>	2	
<i>naproxen tab 250 mg</i>	2	
<i>naproxen tab 375 mg</i>	2	
<i>naproxen tab 500 mg</i>	2	
<i>oxaprozin tab 600 mg</i>	2	
<i>piroxicam cap 10 mg</i>	2	
<i>piroxicam cap 20 mg</i>	2	
<i>salsalate tab 500 mg</i>	3	
<i>salsalate tab 750 mg</i>	3	
<i>sulindac tab 150 mg</i>	2	
<i>sulindac tab 200 mg</i>	2	

OPIOID ANALGESICS, LONG-ACTING

<i>buprenorphine td patch weekly 5 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 20 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>fentanyl td patch 72hr 12 mcg/hr</i>	2	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	2	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	2	QL (20 patches / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl td patch 72hr 75 mcg/hr</i>	3	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	3	QL (20 patches / 30 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate beads cap er 24hr 90 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	4	QL (30 caps / 30 days)
<i>morphine sulfate cap er 24hr 10 mg</i>	4	QL (90 caps / 30 days)
<i>morphine sulfate cap er 24hr 20 mg</i>	4	QL (90 caps / 30 days)
<i>morphine sulfate cap er 24hr 30 mg</i>	4	QL (90 caps / 30 days)
<i>morphine sulfate cap er 24hr 50 mg</i>	4	QL (90 caps / 30 days)
<i>morphine sulfate cap er 24hr 60 mg</i>	4	QL (60 caps / 30 days)
<i>morphine sulfate cap er 24hr 80 mg</i>	4	QL (60 caps / 30 days)
<i>morphine sulfate cap er 24hr 100 mg</i>	4	QL (60 caps / 30 days)
<i>morphine sulfate tab er 15 mg</i>	2	QL (90 tabs / 30 days)
<i>morphine sulfate tab er 30 mg</i>	2	QL (90 tabs / 30 days)
<i>morphine sulfate tab er 60 mg</i>	2	QL (60 tabs / 30 days)
<i>morphine sulfate tab er 100 mg</i>	2	QL (60 tabs / 30 days)
<i>morphine sulfate tab er 200 mg</i>	2	QL (60 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	3	QL (90 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	3	QL (90 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	3	QL (60 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	3	QL (60 tabs / 30 days)
<i>OXYCONTIN TAB 10MG ER</i>	4	QL (90 tabs / 30 days)
<i>OXYCONTIN TAB 15MG ER</i>	4	QL (90 tabs / 30 days)
<i>OXYCONTIN TAB 20MG ER</i>	4	QL (90 tabs / 30 days)
<i>OXYCONTIN TAB 30MG ER</i>	4	QL (90 tabs / 30 days)
<i>OXYCONTIN TAB 40MG ER</i>	4	QL (60 tabs / 30 days)
<i>OXYCONTIN TAB 60MG ER</i>	4	QL (60 tabs / 30 days)
<i>OXYCONTIN TAB 80MG ER</i>	4	QL (60 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 5 mg</i>	4	QL (90 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	4	QL (90 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 10 mg</i>	4	QL (90 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 15 mg</i>	4	QL (90 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 20 mg</i>	4	QL (90 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 30 mg</i>	4	QL (60 tabs / 30 days)
<i>oxymorphone hcl tab er 12hr 40 mg</i>	4	QL (60 tabs / 30 days)
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	3	QL (30 caps / 30 days)
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	3	QL (30 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	3	QL (30 caps / 30 days)
<i>tramadol hcl tab er 24hr 100 mg</i>	3	QL (30 tabs / 30 days)
<i>tramadol hcl tab er 24hr 200 mg</i>	3	QL (30 tabs / 30 days)
<i>tramadol hcl tab er 24hr 300 mg</i>	3	QL (30 tabs / 30 days)
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	3	QL (30 tabs / 30 days)
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	3	QL (30 tabs / 30 days)
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	3	QL (30 tabs / 30 days)

OPIOID ANALGESICS, SHORT-ACTING

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2	
<i>acetaminophen w/ codeine tab 300-15 mg</i>	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2	QL (360 tabs / 30 days)
<i>ascomp/codeine</i>	2	QL (60 caps / 30 days)
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	2	
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	2	QL (60 caps / 30 days)
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	2	QL (60 caps / 30 days)
<i>butorphanol tartrate inj 1 mg/ml</i>	2	
<i>butorphanol tartrate inj 2 mg/ml</i>	2	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	2	QL (4 bottles / 30 days)
<i>endocet tab 2.5-325</i>	2	QL (360 tabs / 30 days)
<i>endocet tab 5-325mg</i>	2	QL (360 tabs / 30 days)
<i>endocet tab 7.5-325mg</i>	2	QL (360 tabs / 30 days)
<i>endocet tab 10-325mg</i>	2	QL (360 tabs / 30 days)
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	4	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	2	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	3	
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	3	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	3	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	2	QL (150 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	2	QL (150 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	
<i>hydromorphone hcl tab 2 mg</i>	2	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	2	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	2	QL (250 tabs / 30 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	3	
<i>morphine sulfate oral soln 20 mg/5ml</i>	3	
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	3	
<i>morphine sulfate suppos 10 mg</i>	2	
<i>morphine sulfate tab 15 mg</i>	3	QL (300 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	3	QL (300 tabs / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	QL (120 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	2	
<i>oxycodone hcl tab 5 mg</i>	2	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	2	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	2	QL (360 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxymorphone hcl tab 5 mg</i>	3	QL (240 tabs / 30 days)
<i>oxymorphone hcl tab 10 mg</i>	3	QL (200 tabs / 30 days)
<i>tramadol hcl tab 50 mg</i>	2	
<i>tramadol hcl tab 100 mg</i>	2	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2	

ANESTHETICS

LOCAL ANESTHETICS

<i>lidocaine hcl local inj 2%</i>	2	
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	2	

ANTI-INFECTIVES

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	3	
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	2	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
<i>atovaquone susp 750 mg/5ml</i>	4	QL (300 mL / 30 days); DL
<i>aztreonam for inj 1 gm</i>	2	
<i>baciim</i>	2	
CAYSTON INH 75MG	5	NM, LA, PA; DL
<i>clindamycin hcl cap 75 mg</i>	2	
<i>clindamycin hcl cap 150 mg</i>	2	
<i>clindamycin hcl cap 300 mg</i>	2	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	2	
<i>clindamycin phosphate inj 600 mg/4ml</i>	2	
<i>clindamycin phosphate inj 900 mg/6ml</i>	2	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	4	
<i>dapsone tab 25 mg</i>	3	
<i>dapsone tab 100 mg</i>	3	
<i>daptomycin for iv soln 500 mg</i>	5	DL
DORIBAX INJ 250MG	4	
EMVERM CHW 100MG	5	DL

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Drug Name	Drug Tier	Requirements/Limits
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	4	
FIRVANQ SOL 25MG/ML	3	
FIRVANQ SOL 50MG/ML	3	
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	3	
<i>gentamicin in saline inj 0.8 mg/ml</i>	2	
<i>gentamicin in saline inj 1 mg/ml</i>	2	
<i>gentamicin in saline inj 1.2 mg/ml</i>	2	
<i>gentamicin in saline inj 1.6 mg/ml</i>	2	
<i>gentamicin sulfate inj 40 mg/ml</i>	2	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	2	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
IMPAVIDO CAP 50MG	5	DL
<i>ivermectin tab 3 mg</i>	2	
<i>linezolid for susp 100 mg/5ml</i>	5	DL
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	4	
<i>linezolid tab 600 mg</i>	2	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	2	
<i>methenamine hippurate tab 1 gm</i>	2	
<i>metronidazole in nacl</i>	2	
<i>metronidazole tab 250 mg</i>	2	
<i>metronidazole tab 500 mg</i>	2	
<i>neomycin sulfate tab 500 mg</i>	2	
<i>nitazoxanide tab 500 mg</i>	4	DL
<i>nitrofur mac cap 50mg</i>	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	3	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	3	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	3	
<i>pentamidine isethionate inh</i>	2	B/D
<i>pentamidine isethionate inj</i>	4	DL
<i>praziquantel tab 600 mg</i>	3	
<i>pyrimethamine tab 25 mg</i>	5	DL
<i>streptomycin sulfate for inj 1 gm</i>	4	
<i>sulfadiazine tab 500 mg</i>	3	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	2	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	2	
SYNERCID INJ 500MG	5	DL

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Drug Name	Drug Tier	Requirements/Limits
<i>tinidazole tab 250 mg</i>	2	
<i>tinidazole tab 500 mg</i>	2	
TOBI PODHALR CAP 28MG	3	NM, LA, PA; DL
<i>tobramycin nebu soln 300 mg/4ml</i>	5	B/D, NM; DL
<i>tobramycin nebu soln 300 mg/5ml</i>	5	B/D, NM; DL
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	2	B/D; DL
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	2	B/D; DL
<i>trimethoprim tab 100 mg</i>	2	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	3	DL
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	3	DL
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	2	DL
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	3	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	3	
XENLETA TAB 600MG	5	NM; DL
XIFAXAN TAB 200MG	4	QL (9 tabs / 30 days), PA; DL
ZEMDRI INJ 500MG/10	5	DL

ANTIFUNGALS

ABELCET INJ 5MG/ML	4	B/D
<i>amphotericin b for iv soln 50 mg</i>	3	B/D; DL
<i>fluconazole for susp 10 mg/ml</i>	2	
<i>fluconazole for susp 40 mg/ml</i>	2	
<i>fluconazole in dextrose</i>	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	2	DL
<i>fluconazole tab 50 mg</i>	2	
<i>fluconazole tab 100 mg</i>	2	
<i>fluconazole tab 150 mg</i>	2	
<i>fluconazole tab 200 mg</i>	2	
<i>flucytosine cap 250 mg</i>	2	
<i>flucytosine cap 500 mg</i>	2	
<i>griseofulvin microsize susp 125 mg/5ml</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>griseofulvin microsize tab 500 mg</i>	3	
<i>griseofulvin ultramicrosize tab 125 mg</i>	3	
<i>griseofulvin ultramicrosize tab 250 mg</i>	3	
<i>itraconazole cap 100 mg</i>	3	PA
<i>ketoconazole tab 200 mg</i>	4	
<i>micafungin sodium for iv soln 50 mg</i>	5	DL
<i>micafungin sodium for iv soln 100 mg</i>	5	DL
NOXAFIL SUS 40MG/ML	5	PA; DL
<i>nystatin tab 500000 unit</i>	2	
<i>posaconazole susp 40 mg/ml</i>	5	PA; DL
<i>posaconazole tab delayed release 100 mg</i>	5	PA; DL
<i>terbinafine hcl tab 250 mg</i>	2	QL (84 tabs / 365 days)
<i>voriconazole for inj 200 mg</i>	4	PA; DL
<i>voriconazole for susp 40 mg/ml</i>	5	DL
<i>voriconazole tab 50 mg</i>	4	DL
<i>voriconazole tab 200 mg</i>	3	

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 250-100 mg</i>	4	DL
<i>chloroquine phosphate tab 250 mg</i>	2	DL
<i>chloroquine phosphate tab 500 mg</i>	2	DL
COARTEM TAB 20-120MG	4	DL
<i>mefloquine hcl tab 250 mg</i>	2	DL
PRIMAQUINE TAB 26.3MG	4	DL
<i>quinine sulfate cap 324 mg</i>	2	QL (84 caps / 365 days); DL

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	2	NM
<i>abacavir sulfate tab 300 mg (base equiv)</i>	2	NM
APTIVUS CAP 250MG	5	NM; DL
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	4	NM
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	4	NM
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	4	NM
<i>darunavir tab 600 mg</i>	5	NM; DL
<i>darunavir tab 800 mg</i>	5	NM; DL
EDURANT TAB 25MG	5	NM; DL
<i>efavirenz cap 50 mg</i>	2	NM
<i>efavirenz cap 200 mg</i>	2	NM
<i>efavirenz tab 600 mg</i>	2	NM
<i>emtricitabine caps 200 mg</i>	3	NM
EMTRIVA SOL 10MG/ML	3	NM
<i>etravirine tab 100 mg</i>	5	NM; DL
<i>etravirine tab 200 mg</i>	5	NM; DL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
FUZEON INJ 90MG	3	NM, LA
INTELENCE TAB 25MG	4	NM
INVIRASE TAB 500MG	3	NM
ISENTRESS CHW 25MG	3	NM
ISENTRESS CHW 100MG	5	NM; DL
ISENTRESS HD TAB 600MG	5	NM; DL
ISENTRESS POW 100MG	4	NM
ISENTRESS TAB 400MG	5	NM; DL
<i>lamivudine oral soln 10 mg/ml</i>	2	NM
<i>lamivudine tab 150 mg</i>	2	NM
<i>lamivudine tab 300 mg</i>	2	NM
LEXIVA SUS 50MG/ML	4	NM
<i>maraviroc tab 150 mg</i>	5	NM; DL
<i>maraviroc tab 300 mg</i>	5	NM; DL
<i>nevirapine susp 50 mg/5ml</i>	3	NM
<i>nevirapine tab 200 mg</i>	2	NM
<i>nevirapine tab er 24hr 400 mg</i>	4	NM
NORVIR POW 100MG	4	NM
NORVIR SOL 80MG/ML	3	NM
NORVIR TAB 100MG	3	NM
PIFELTRO TAB 100MG	5	NM; DL
PREZISTA SUS 100MG/ML	4	NM
PREZISTA TAB 75MG	4	NM
PREZISTA TAB 150MG	4	NM
PREZISTA TAB 600MG	5	NM; DL
PREZISTA TAB 800MG	5	NM; DL
RETROVIR INJ 10MG/ML	4	NM
REYATAZ POW 50MG	5	NM; DL
<i>ritonavir tab 100 mg</i>	3	NM
RUKOBIA TAB 600MG ER	5	NM; DL
SELZENTRY SOL 20MG/ML	4	NM
SELZENTRY TAB 25MG	4	QL (120 tabs / 30 days), NM; DL
SELZENTRY TAB 75MG	5	NM; DL
SUNLENCA INJ	5	NM, LA; DL
SUNLENCA TAB 300MG	5	NM, LA; DL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	3	NM
TIVICAY PD TAB 5MG	4	NM
TIVICAY TAB 10MG	4	QL (30 tabs / 30 days), NM
TIVICAY TAB 25MG	5	NM; DL
TIVICAY TAB 50MG	5	NM; DL
TYBOST TAB 150MG	4	NM
VIRACEPT TAB 250MG	3	NM
VIRACEPT TAB 625MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
VIREAD POW 40MG/GM	3	NM
VIREAD TAB 150MG	3	NM
VIREAD TAB 200MG	3	NM
VIREAD TAB 250MG	3	NM
<i>zidovudine cap 100 mg</i>	2	NM
<i>zidovudine syrup 10 mg/ml</i>	2	NM
<i>zidovudine tab 300 mg</i>	2	NM
ANTIRETROVIRAL COMBINATION AGENTS		
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	3	NM
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	4	NM
BIKTARVY TAB	5	NM; DL
CIMDUO TAB 300-300	5	NM; DL
COMPLERA TAB	5	NM; DL
DELSTRIGO TAB	5	NM; DL
DESCOVY TAB 120-15MG	5	NM; DL
DESCOVY TAB 200/25MG	5	NM; DL
DOVATO TAB 50-300MG	5	NM; DL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	4	NM
EVOTAZ TAB 300-150	5	NM; DL
GENVOYA TAB	5	NM; DL
JULUCA TAB 50-25MG	5	NM; DL
<i>lamivudine-zidovudine tab 150-300 mg</i>	3	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	3	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	3	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	3	NM
ODEFSEY TAB	5	NM; DL
PREZCOBIX TAB 800-150	5	NM; DL
STRIBILD TAB	5	NM; DL
SYMTUZA TAB	5	NM; DL
TEMIXYS TAB 300-300	4	NM

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Drug Name	Drug Tier	Requirements/Limits
TRIUMEQ PD TAB	5	NM; DL
TRIUMEQ TAB	5	NM; DL
TRIZIVIR TAB	4	NM

ANTITUBERCULAR AGENTS

CAPASTAT SUL INJ 1GM	4	
<i>ethambutol hcl tab 100 mg</i>	2	
<i>ethambutol hcl tab 400 mg</i>	2	
<i>isoniazid inj 100 mg/ml</i>	2	
<i>isoniazid syrup 50 mg/5ml</i>	2	
<i>isoniazid tab 100 mg</i>	2	
<i>isoniazid tab 300 mg</i>	2	
PRETOMANID TAB 200MG	4	
PRIFTIN TAB 150MG	4	
<i>pyrazinamide tab 500 mg</i>	2	
<i>rifabutin cap 150 mg</i>	3	
<i>rifampin cap 150 mg</i>	2	
<i>rifampin cap 300 mg</i>	2	
<i>rifampin for inj 600 mg</i>	2	
SIRTURO TAB 20MG	5	NM, LA; DL
SIRTURO TAB 100MG	5	NM, LA; DL
TRECTOR TAB 250MG	4	

ANTIVIRALS

<i>acyclovir cap 200 mg</i>	2	
<i>acyclovir sodium iv soln 50 mg/ml</i>	2	B/D
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	2	
<i>acyclovir tab 800 mg</i>	2	
<i>adefovir dipivoxil tab 10 mg</i>	2	NM
<i>cidofovir iv inj 75 mg/ml</i>	2	
<i>entecavir tab 0.5 mg</i>	4	NM
<i>entecavir tab 1 mg</i>	4	NM
EPCLUSA PAK 150-37.5	5	NM, PA; DL
EPCLUSA PAK 200-50MG	5	NM, PA; DL
EPCLUSA TAB 200-50MG	5	NM, PA; DL
EPCLUSA TAB 400-100	5	NM, PA; DL
<i>famciclovir tab 125 mg</i>	2	
<i>famciclovir tab 250 mg</i>	2	
<i>famciclovir tab 500 mg</i>	2	
HARVONI PAK 33.75-150MG	5	NM, PA; DL
HARVONI PAK 45-200MG	5	NM, PA; DL
HARVONI TAB 90-400MG	5	NM, PA; DL
LAGEVRIO CAP 200MG	3	
<i>lamivudine tab 100 mg (hbv)</i>	2	NM
LIVTENCITY TAB 200MG	5	NM, LA; DL

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Drug Name	Drug Tier	Requirements/Limits
MAVYRET PAK 50-20MG	5	NM, PA; DL
MAVYRET TAB 100-40MG	5	NM, PA; DL
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	3	QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	3	QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	3	QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	3	QL (720 mL / 180 days)
PAXLOVID TAB 150-100	3	\$0 cost share
PAXLOVID TAB 300-100	3	\$0 cost share
PEGASYS INJ	5	NM; DL
PEGASYS INJ 180MCG/M	5	NM; DL
PREVYMIS TAB 240MG	5	DL
PREVYMIS TAB 480MG	5	DL
RELENZA MIS DISKHALE	4	QL (3 inhalers / 180 days)
<i>ribavirin cap 200 mg</i>	2	NM, PA; DL
<i>ribavirin tab 200 mg</i>	2	NM, PA; DL
<i>rimantadine hydrochloride tab 100 mg</i>	2	
SOVALDI PAK 150MG	5	NM, PA; DL
SOVALDI PAK 200MG	5	NM, PA; DL
SOVALDI TAB 200MG	5	NM, PA; DL
SOVALDI TAB 400MG	5	NM, PA; DL
<i>valacyclovir hcl tab 1 gm</i>	2	
<i>valacyclovir hcl tab 500 mg</i>	2	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	3	
VOSEVI TAB	5	NM, PA; DL
XOFLUZA TAB 40MG	4	QL (4 tabs / 180 days)
XOFLUZA TAB 80MG	4	QL (2 tabs / 180 days)
ZEPATIER TAB 50-100MG	5	NM, PA; DL

CEPHALOSPORINS

<i>cefaclor cap 250 mg</i>	2	
<i>cefaclor cap 500 mg</i>	2	
<i>cefadroxil cap 500 mg</i>	2	
<i>cefadroxil for susp 250 mg/5ml</i>	2	
<i>cefadroxil for susp 500 mg/5ml</i>	2	
<i>cefadroxil tab 1 gm</i>	2	
<i>cefazolin sodium for inj 1 gm</i>	2	
<i>cefazolin sodium for inj 10 gm</i>	2	
<i>cefazolin sodium for inj 500 mg</i>	2	
<i>cefdinir cap 300 mg</i>	2	
<i>cefdinir for susp 125 mg/5ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>cefdinir for susp 250 mg/5ml</i>	2	
<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for iv soln 2 gm</i>	2	
<i>cefixime cap 400 mg</i>	2	
<i>cefixime for susp 100 mg/5ml</i>	2	
<i>cefixime for susp 200 mg/5ml</i>	2	
<i>cefotetan disodium for inj 1 gm</i>	2	
<i>cefotetan disodium for inj 2 gm</i>	2	
<i>cefoxitin sodium for iv soln 1 gm</i>	2	
<i>cefoxitin sodium for iv soln 2 gm</i>	2	
<i>cefoxitin sodium for iv soln 10 gm</i>	2	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	2	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	2	
<i>cefpodoxime proxetil tab 200 mg</i>	2	
<i>cefprozil for susp 125 mg/5ml</i>	2	
<i>cefprozil for susp 250 mg/5ml</i>	2	
<i>cefprozil tab 250 mg</i>	2	
<i>cefprozil tab 500 mg</i>	2	
<i>ceftazidime for inj 1 gm</i>	2	
<i>ceftazidime for inj 6 gm</i>	2	
<i>ceftazidime for iv soln 2 gm</i>	2	
<i>ceftriaxone sodium for inj 1 gm</i>	2	
<i>ceftriaxone sodium for inj 2 gm</i>	2	
<i>ceftriaxone sodium for inj 10 gm</i>	2	
<i>ceftriaxone sodium for inj 250 mg</i>	2	
<i>ceftriaxone sodium for inj 500 mg</i>	2	
<i>cefuroxime axetil tab 250 mg</i>	2	
<i>cefuroxime axetil tab 500 mg</i>	2	
<i>cefuroxime sodium for inj 750 mg</i>	2	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	2	
<i>cephalexin cap 250 mg</i>	2	
<i>cephalexin cap 500 mg</i>	2	
<i>cephalexin for susp 125 mg/5ml</i>	2	
<i>cephalexin for susp 250 mg/5ml</i>	2	
<i>tazicef</i>	2	
TEFLARO INJ 400MG	4	
TEFLARO INJ 600MG	4	
ERYTHROMYCINS/MACROLIDES		
<i>azithromycin for susp 100 mg/5ml</i>	2	
<i>azithromycin for susp 200 mg/5ml</i>	2	
<i>azithromycin iv for soln 500 mg</i>	2	
<i>azithromycin tab 250 mg</i>	2	
<i>azithromycin tab 500 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin tab 600 mg</i>	2	
<i>clarithromycin for susp 125 mg/5ml</i>	2	
<i>clarithromycin for susp 250 mg/5ml</i>	2	
<i>clarithromycin tab 250 mg</i>	2	
<i>clarithromycin tab 500 mg</i>	2	
<i>clarithromycin tab er 24hr 500 mg</i>	2	
DIFICID SUS	5	PA; DL
DIFICID TAB 200MG	5	PA; DL
<i>e.e.s. 400</i>	3	
<i>ery-tab</i>	3	
ERYTHROCIN INJ 500MG	4	
<i>erythrocin stearate</i>	2	
<i>erythromycin ethylsuccinate tab 400 mg</i>	3	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin tab delayed release 250 mg</i>	2	
<i>erythromycin tab delayed release 333 mg</i>	2	
<i>erythromycin tab delayed release 500 mg</i>	2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	
FLUOROQUINOLONES		
<i>ciprofloxacin 200 mg/100ml in d5w</i>	2	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	2	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	2	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	2	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	2	
<i>ciprofloxacin iv soln 400 mg/40ml (1%)</i>	2	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	2	DL
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	2	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	2	DL
<i>levofloxacin oral soln 25 mg/ml</i>	2	
<i>levofloxacin tab 250 mg</i>	2	
<i>levofloxacin tab 500 mg</i>	2	
<i>levofloxacin tab 750 mg</i>	2	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	2	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	2	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	2	
PENICILLINS		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	2	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>amoxicillin (trihydrate) cap 250 mg</i>	2	
<i>amoxicillin (trihydrate) cap 500 mg</i>	2	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	2	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	2	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) tab 500 mg</i>	2	
<i>amoxicillin (trihydrate) tab 875 mg</i>	2	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	2	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	2	
<i>ampicillin cap 250 mg</i>	2	
<i>ampicillin cap 500 mg</i>	2	
<i>ampicillin for susp 250 mg/5ml</i>	2	
<i>ampicillin sodium for inj 1 gm</i>	2	
<i>ampicillin sodium for inj 2 gm</i>	2	
<i>ampicillin sodium for inj 125 mg</i>	2	
<i>ampicillin sodium for iv soln 10 gm</i>	2	
<i>BICILLIN C-R INJ 900/300</i>	4	
<i>BICILLIN C-R INJ 1200000</i>	4	
<i>BICILLIN L-A INJ 600000</i>	4	
<i>BICILLIN L-A INJ 1200000</i>	4	
<i>BICILLIN L-A INJ 2400000</i>	4	
<i>dicloxacillin sodium cap 250 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dicloxacillin sodium cap 500 mg</i>	2	
<i>nafcillin sodium for inj 1 gm</i>	2	
<i>nafcillin sodium for inj 2 gm</i>	2	
<i>nafcillin sodium for iv soln 10 gm</i>	2	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	2	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	2	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	2	
PEN GK/DEXTR INJ 20000/ML	4	
PEN GK/DEXTR INJ 40000/ML	4	
PEN GK/DEXTR INJ 60000/ML	4	
<i>penicillin g potassium for inj 20000000 unit</i>	2	
<i>penicillin g sodium for inj 5000000 unit</i>	2	
<i>penicillin v potassium for soln 125 mg/5ml</i>	2	
<i>penicillin v potassium for soln 250 mg/5ml</i>	2	
<i>penicillin v potassium tab 250 mg</i>	2	
<i>penicillin v potassium tab 500 mg</i>	2	
<i>pfizerpen</i>	2	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	2	
TETRACYCLINES		
<i>doxy 100</i>	3	
<i>doxycycline hyclate cap 50 mg</i>	2	
<i>doxycycline hyclate cap 100 mg</i>	2	
<i>doxycycline hyclate tab 20 mg</i>	2	
<i>doxycycline hyclate tab 100 mg</i>	2	
<i>doxycycline hyclate tab delayed release 50 mg</i>	3	
<i>doxycycline hyclate tab delayed release 75 mg</i>	4	
<i>doxycycline hyclate tab delayed release 100 mg</i>	4	
<i>doxycycline hyclate tab delayed release 150 mg</i>	4	
<i>doxycycline hyclate tab delayed release 200 mg</i>	4	
<i>doxycycline monohydrate cap 50 mg</i>	3	
<i>doxycycline monohydrate cap 75 mg</i>	3	
<i>doxycycline monohydrate cap 100 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	2	
<i>doxycycline monohydrate tab 50 mg</i>	2	
<i>doxycycline monohydrate tab 75 mg</i>	4	
<i>doxycycline monohydrate tab 100 mg</i>	2	
<i>doxycycline monohydrate tab 150 mg</i>	4	
<i>minocycline hcl cap 50 mg</i>	2	
<i>minocycline hcl cap 75 mg</i>	2	
<i>minocycline hcl cap 100 mg</i>	2	
<i>minocycline hcl tab 50 mg</i>	2	
<i>minocycline hcl tab 75 mg</i>	2	
<i>minocycline hcl tab 100 mg</i>	2	
<i>minocycline hcl tab er 24hr 45 mg</i>	4	
<i>minocycline hcl tab er 24hr 90 mg</i>	4	
<i>minocycline hcl tab er 24hr 135 mg</i>	4	
NUZYRA INJ 100MG	5	NM, LA; DL
NUZYRA TAB 150MG	5	NM, LA; DL
<i>tetracycline hcl cap 250 mg</i>	3	
<i>tetracycline hcl cap 500 mg</i>	3	
<i>tigecycline for iv soln 50 mg</i>	4	DL

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

<i>bendamustine hcl for iv soln 25 mg</i>	5	NM; DL
<i>bendamustine hcl for iv soln 100 mg</i>	5	NM; DL
BICNU INJ 100MG	4	
<i>busulfan inj 6 mg/ml</i>	5	DL
<i>carboplatin iv soln 50 mg/5ml</i>	2	DL
<i>carboplatin iv soln 150 mg/15ml</i>	2	
<i>carboplatin iv soln 450 mg/45ml</i>	2	DL
<i>carboplatin iv soln 600 mg/60ml</i>	2	DL
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	2	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	2	DL
CYCLOPHOSPH TAB 25MG	3	B/D
CYCLOPHOSPH TAB 50MG	3	B/D
<i>cyclophosphamide cap 25 mg</i>	3	B/D
<i>cyclophosphamide cap 50 mg</i>	3	B/D
GLEOSTINE CAP 10MG	4	NM
GLEOSTINE CAP 40MG	4	NM
GLEOSTINE CAP 100MG	4	NM
<i>ifosfamide for inj 1 gm</i>	2	
LEUKERAN TAB 2MG	3	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	2	
<i>oxaliplatin for iv inj 100 mg</i>	4	
<i>oxaliplatin iv soln 50 mg/10ml</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>oxaliplatin iv soln 100 mg/20ml</i>	4	
<i>thiotepa for inj 15 mg</i>	5	NM; DL
TREANDA INJ 25MG	5	NM, LA; DL
TREANDA INJ 100MG	5	NM, LA; DL
YONDELIS INJ 1MG	5	NM, LA; DL
ZANOSAR INJ 1GM	4	

ANTIBIOTICS

<i>bleomycin sulfate for inj 15 unit</i>	2	
<i>bleomycin sulfate for inj 30 unit</i>	2	B/D
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	2	
<i>doxorubicin hcl inj 2 mg/ml</i>	2	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	4	
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	3	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	2	DL
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	2	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	2	DL
<i>mitomycin for iv soln 5 mg</i>	4	
<i>mitomycin for iv soln 20 mg</i>	5	DL
<i>mitomycin for iv soln 40 mg</i>	5	DL

ANTIMETABOLITES

ARRANON INJ 5MG/ML	5	DL
<i>azacitidine for inj 100 mg</i>	5	NM; DL
<i>clofarabine iv soln 1 mg/ml</i>	5	DL
<i>cytarabine inj 20 mg/ml</i>	2	B/D
<i>cytarabine inj pf 20 mg/ml</i>	2	DL
<i>cytarabine inj pf 100 mg/ml</i>	2	B/D
<i>decitabine for inj 50 mg</i>	5	NM; DL
<i>fludarabine phosphate for inj 50 mg</i>	2	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	2	B/D; DL
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	2	B/D
<i>gemcitabine hcl for inj 1 gm</i>	2	
<i>gemcitabine hcl for inj 2 gm</i>	2	
<i>gemcitabine hcl for inj 200 mg</i>	2	
INQOVI TAB 35-100MG	5	NM, LA, PA; DL
LONSURF TAB 15-6.14	5	NM, LA, PA; DL
LONSURF TAB 20-8.19	5	NM, LA, PA; DL
<i>mercaptopurine tab 50 mg</i>	2	
<i>methotrexate sodium for inj 1 gm</i>	2	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	3	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	3	

Drug Name	Drug Tier	Requirements/Limits
ONUREG TAB 200MG	5	NM, LA, PA; DL
ONUREG TAB 300MG	5	NM, LA, PA; DL
PURIXAN SUS 20MG/ML	4	NM, LA
TABLOID TAB 40MG	4	

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	5	NM; DL
<i>abiraterone acetate tab 500 mg</i>	5	NM; DL
<i>anastrozole tab 1 mg</i>	2	
<i>bicalutamide tab 50 mg</i>	2	
ELIGARD INJ 7.5MG	4	NM; DL
ELIGARD INJ 22.5MG	4	NM
ELIGARD INJ 30MG	4	NM
ELIGARD INJ 45MG	4	NM
EMCYT CAP 140MG	3	
ERLEADA TAB 60MG	5	NM, LA; DL
ERLEADA TAB 240MG	5	NM, LA; DL
EULEXIN CAP 125MG	4	
<i>exemestane tab 25 mg</i>	3	
FASLODEX INJ 250/5ML	5	DL
FIRMAGON INJ 80MG	4	QL (4 vials / 28 days), NM; DL
FIRMAGON INJ 120MG	5	NM; DL
<i>flutamide cap 125 mg</i>	2	
<i>letrozole tab 2.5 mg</i>	2	
<i>leuprolide inj 1mg/0.2</i>	2	NM
LEUPROLIDE INJ 22.5MG	4	NM
LUPRON DEPOT INJ 3.75MG	4	NM; DL
LUPRON DEPOT INJ 7.5MG	5	NM; DL
LUPRON DEPOT INJ 11.25MG	5	NM; DL
LUPRON DEPOT INJ 22.5MG	5	NM; DL
LUPRON DEPOT INJ 30MG	5	NM; DL
LUPRON DEPOT INJ 45MG	5	NM; DL
LYSODREN TAB 500MG	3	NM, LA
<i>megestrol acetate tab 20 mg</i>	2	PA; DL
<i>megestrol acetate tab 40 mg</i>	2	PA; DL
<i>nilutamide tab 150 mg</i>	3	
NUBEQA TAB 300MG	5	NM, LA; DL
ORGOVYX TAB 120MG	5	NM, LA; DL
ORSERDU TAB 86MG	5	NM, LA; DL
ORSERDU TAB 345MG	5	NM, LA; DL
SOLTAMOX SOL 10MG/5ML	4	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	2	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>toremifene citrate tab 60 mg (base equivalent)</i>	5	DL
TRELSTAR MIX INJ 3.75MG	4	NM
TRELSTAR MIX INJ 11.25MG	4	NM
TRELSTAR MIX INJ 22.5MG	4	NM
XTANDI CAP 40MG	5	NM, LA; DL
XTANDI TAB 40MG	5	NM, LA; DL
XTANDI TAB 80MG	5	NM, LA; DL
YONSA TAB 125MG	5	NM, LA; DL

IMMUNOMODULATORS

<i>lenalidomide cap 5 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 10 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 15 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 20 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 25 mg</i>	5	NM, LA; DL
<i>lenalidomide caps 2.5 mg</i>	5	NM, LA; DL
POMALYST CAP 1MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 2MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 3MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 4MG	5	QL (30 caps / 30 days), NM, LA; DL
REVLIMID CAP 2.5MG	5	NM, LA; DL
REVLIMID CAP 5MG	5	NM, LA; DL
REVLIMID CAP 10MG	5	NM, LA; DL
REVLIMID CAP 15MG	5	NM, LA; DL
REVLIMID CAP 20MG	5	NM, LA; DL
REVLIMID CAP 25MG	5	NM, LA; DL
THALOMID CAP 50MG	5	NM, LA; DL
THALOMID CAP 100MG	5	NM, LA; DL
THALOMID CAP 150MG	5	NM, LA; DL
THALOMID CAP 200MG	5	NM, LA; DL

MISCELLANEOUS

BESREMI SOL 500MCG	5	NM, LA; DL
<i>bexarotene cap 75 mg</i>	5	NM; DL
<i>dacarbazine for inj 100 mg</i>	2	
<i>dacarbazine for inj 200 mg</i>	2	
ERWINAZE INJ 10000UNT	5	LA; DL
<i>hydroxyurea cap 500 mg</i>	2	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	4	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	4	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	4	
IWILFIN TAB 192MG	5	NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
KISQALI 200 PAK FEMARA	5	NM, PA; DL
KISQALI 400 PAK FEMARA	5	NM, PA; DL
KISQALI 600 PAK FEMARA	5	NM, PA; DL
MATULANE CAP 50MG	5	NM, LA; DL
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	2	NM; DL
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	2	NM
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	2	NM; DL
NIPENT INJ 10MG	5	DL
PROLEUKIN INJ 22MU	5	NM; DL
<i>topotecan hcl for inj 4 mg (base equiv)</i>	5	DL
<i>tretinoin cap 10 mg</i>	5	DL
WELIREG TAB 40MG	5	NM, LA; DL

MITOTIC INHIBITORS

ABRAXANE INJ 100MG	5	NM, LA; DL
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 160/16ML	3	
ETOPOPHOS INJ 100MG	4	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	2	
HALAVEN INJ 1MG/2ML	5	NM; DL
IXEMPRA KIT INJ 15MG	5	NM; DL
JEVTANA INJ 60/1.5ML	5	NM, LA; DL
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	2	DL
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	2	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	2	DL
<i>toposar</i>	2	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	3	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	3	

MOLECULAR TARGET AGENTS

AFINITOR DIS TAB 2MG	5	NM, PA; DL
AFINITOR DIS TAB 3MG	5	NM, PA; DL
AFINITOR DIS TAB 5MG	5	NM, PA; DL
AKEEGA TAB 50/500MG	5	NM, LA, PA; DL
AKEEGA TAB 100/500	5	NM, LA, PA; DL
ALECENSA CAP 150MG	5	NM, LA, PA; DL
ALUNBRIG PAK	5	NM, LA, PA; DL
ALUNBRIG TAB 30MG	5	NM, LA, PA; DL
ALUNBRIG TAB 90MG	5	NM, LA, PA; DL
ALUNBRIG TAB 180MG	5	NM, LA, PA; DL
ARZERRA CON 100/5ML	5	NM, LA; DL

Drug Name	Drug Tier	Requirements/Limits
AUGTYRO CAP 40MG	5	NM, LA, PA; DL
AVASTIN INJ	5	NM, LA; DL
AVASTIN INJ 400/16ML	5	NM, LA; DL
AYVAKIT TAB 25MG	5	NM, LA, PA; DL
AYVAKIT TAB 50MG	5	NM, LA, PA; DL
AYVAKIT TAB 100MG	5	NM, LA, PA; DL
AYVAKIT TAB 200MG	5	NM, LA, PA; DL
AYVAKIT TAB 300MG	5	NM, LA, PA; DL
BALVERSA TAB 3MG	5	NM, LA, PA; DL
BALVERSA TAB 4MG	5	NM, LA, PA; DL
BALVERSA TAB 5MG	5	NM, LA, PA; DL
BELEODAQ INJ 500MG	5	NM, LA; DL
BOSULIF CAP 50MG	5	NM, PA; DL
BOSULIF CAP 100MG	5	NM, PA; DL
BOSULIF TAB 100MG	5	NM, PA; DL
BOSULIF TAB 400MG	5	NM, PA; DL
BOSULIF TAB 500MG	5	NM, PA; DL
BRAFTOVI CAP 75MG	5	NM, LA, PA; DL
BRUKINSA CAP 80MG	5	NM, LA, PA; DL
CABOMETYX TAB 20MG	5	NM, LA, PA; DL
CABOMETYX TAB 40MG	5	NM, LA, PA; DL
CABOMETYX TAB 60MG	5	NM, LA, PA; DL
CALQUENCE CAP 100MG	5	NM, LA, PA; DL
CALQUENCE TAB 100MG	5	NM, LA, PA; DL
CAPRELSA TAB 100MG	3	QL (60 tabs / 30 days), NM, LA, PA; DL
CAPRELSA TAB 300MG	3	QL (30 tabs / 30 days), NM, LA, PA; DL
COMETRIQ (60MG DOSE)	5	NM, LA, PA; DL
COMETRIQ KIT 100MG	5	NM, LA, PA; DL
COMETRIQ KIT 140MG	5	NM, LA, PA; DL
COPIKTRA CAP 15MG	5	NM, LA, PA; DL
COPIKTRA CAP 25MG	5	NM, LA, PA; DL
COTELLIC TAB 20MG	5	NM, LA, PA; DL
CYRAMZA INJ 100/10ML	5	NM, LA; DL
CYRAMZA INJ 500/50ML	5	NM, LA; DL
DARZALEX SOL 100MG/5M	5	NM, LA; DL
DARZALEX SOL 400MG/20	5	NM, LA; DL
DAURISMO TAB 25MG	5	NM, LA, PA; DL
DAURISMO TAB 100MG	5	NM, LA, PA; DL
EMPLICITI INJ 300MG	5	NM, LA; DL
EMPLICITI INJ 400MG	5	NM, LA; DL
ERBITUX INJ 100MG	5	NM; DL
ERBITUX INJ 200MG	5	NM; DL
ERIVEDGE CAP 150MG	5	NM, LA; DL

PA - Prior Authorization **QL** - Quantity Limits **NM** - Not available at mail-order **B/D** - Covered under Medicare B or D **LA** - Limited Access **ED** - Enhanced Drugs **DL** - Medication restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	5	NM; DL
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	5	NM; DL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	5	NM; DL
<i>everolimus tab 2.5 mg</i>	5	NM, PA; DL
<i>everolimus tab 5 mg</i>	5	NM, PA; DL
<i>everolimus tab 7.5 mg</i>	5	NM, PA; DL
<i>everolimus tab 10 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 2 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 3 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 5 mg</i>	5	NM, PA; DL
EXKIVITY CAP 40MG	5	NM, LA, PA; DL
FARYDAK CAP 10MG	5	NM, LA, PA; DL
FARYDAK CAP 15MG	5	NM, LA, PA; DL
FARYDAK CAP 20MG	5	NM, LA, PA; DL
FOTIVDA CAP 0.89MG	5	NM, LA, PA; DL
FOTIVDA CAP 1.34MG	5	NM, LA, PA; DL
FRUZAQLA CAP 1MG	5	NM, LA, PA; DL
FRUZAQLA CAP 5MG	5	NM, LA, PA; DL
GAVRETO CAP 100MG	5	NM, LA, PA; DL
<i>gefitinib tab 250 mg</i>	5	NM, PA; DL
GILOTRIF TAB 20MG	5	NM, LA; DL
GILOTRIF TAB 30MG	5	NM, LA; DL
GILOTRIF TAB 40MG	5	NM, LA; DL
HERCEPTIN INJ 150MG	5	NM, LA; DL
HERCEPTIN INJ 440MG	5	DL
IBRANCE CAP 75MG	5	NM, LA, PA; DL
IBRANCE CAP 100MG	5	NM, LA, PA; DL
IBRANCE CAP 125MG	5	NM, LA, PA; DL
IBRANCE TAB 75MG	5	NM, LA, PA; DL
IBRANCE TAB 100MG	5	NM, LA, PA; DL
IBRANCE TAB 125MG	5	NM, LA, PA; DL
ICLUSIG TAB 10MG	5	NM, LA, PA; DL
ICLUSIG TAB 15MG	5	NM, LA, PA; DL
ICLUSIG TAB 30MG	5	NM, LA, PA; DL
ICLUSIG TAB 45MG	5	NM, LA, PA; DL
IDHIFA TAB 50MG	5	NM, LA, PA; DL
IDHIFA TAB 100MG	5	NM, LA, PA; DL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	5	QL (90 tabs / 30 days), NM, PA; DL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	5	QL (60 tabs / 30 days), NM, PA; DL
IMBRUVICA CAP 70MG	5	NM, LA, PA; DL
IMBRUVICA CAP 140MG	5	NM, LA, PA; DL
IMBRUVICA SUS 70MG/ML	5	NM, LA, PA; DL
IMBRUVICA TAB 140MG	5	NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
IMBRUVICA TAB 280MG	5	NM, LA, PA; DL
IMBRUVICA TAB 420MG	5	NM, LA, PA; DL
IMBRUVICA TAB 560MG	5	NM, LA, PA; DL
INLYTA TAB 1MG	5	NM, LA, PA; DL
INLYTA TAB 5MG	5	NM, LA, PA; DL
INREBIC CAP 100MG	5	QL (120 caps / 30 days), NM, LA, PA; DL
IRESSA TAB 250MG	5	NM, LA, PA; DL
ISTODAX INJ 10MG	5	NM; DL
JAKAFI TAB 5MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 10MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 15MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 20MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 25MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAYPIRCA TAB 50MG	5	NM, LA, PA; DL
JAYPIRCA TAB 100MG	5	NM, LA, PA; DL
KADCYLA INJ 100MG	5	NM, LA; DL
KADCYLA INJ 160MG	5	NM, LA; DL
KEYTRUDA INJ 100MG/4M	5	NM, LA; DL
KISQALI 200 DOSE	5	NM, PA; DL
KISQALI 400 DOSE	5	NM, PA; DL
KISQALI 600 DOSE	5	NM, PA; DL
KOSELUGO CAP 10MG	5	NM, LA, PA; DL
KOSELUGO CAP 25MG	5	NM, LA, PA; DL
KRAZATI TAB 200MG	5	NM, LA, PA; DL
KYPROLIS SOL 30MG	5	NM, LA; DL
KYPROLIS SOL 60MG	5	NM, LA; DL
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	5	NM; DL
LARTRUVO INJ 10MG/ML	5	LA; DL
LARTRUVO INJ 190/19ML	5	LA; DL
LENVIMA CAP 4MG	5	NM, LA, PA; DL
LENVIMA CAP 8 MG	5	NM, LA, PA; DL
LENVIMA CAP 10 MG	5	NM, LA, PA; DL
LENVIMA CAP 12MG	5	NM, LA, PA; DL
LENVIMA CAP 14 MG	5	NM, LA, PA; DL
LENVIMA CAP 18 MG	5	NM, LA, PA; DL
LENVIMA CAP 20 MG	5	NM, LA, PA; DL
LENVIMA CAP 24 MG	5	NM, LA, PA; DL
LORBRENA TAB 25MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
LORBRENA TAB 100MG	5	NM, LA, PA; DL
LUMAKRAS TAB 120MG	5	NM, LA, PA; DL
LUMAKRAS TAB 320MG	5	NM, LA, PA; DL
LYNPARZA TAB 100MG	5	NM, LA, PA; DL
LYNPARZA TAB 150MG	5	NM, LA, PA; DL
LYTGOBI TAB 4MG	5	NM, LA, PA; DL
MEKINIST SOL 0.05/ML	5	NM, LA, PA; DL
MEKINIST TAB 0.5MG	5	NM, LA, PA; DL
MEKINIST TAB 2MG	5	NM, LA, PA; DL
MEKTOVI TAB 15MG	5	NM, LA, PA; DL
NERLYNX TAB 40MG	5	NM, LA, PA; DL
NEXAVAR TAB 200MG	5	NM, LA, PA; DL
NINLARO CAP 2.3MG	5	NM, PA; DL
NINLARO CAP 3MG	5	NM, PA; DL
NINLARO CAP 4MG	5	NM, PA; DL
ODOMZO CAP 200MG	5	NM, LA, PA; DL
OGSIVEO TAB 50MG	5	NM, LA, PA; DL
OJJAARA TAB 100MG	5	NM, LA, PA; DL
OJJAARA TAB 150MG	5	NM, LA, PA; DL
OJJAARA TAB 200MG	5	NM, LA, PA; DL
<i>pazopanib hcl tab 200 mg (base equiv)</i>	5	NM; DL
PEMAZYRE TAB 4.5MG	5	NM, LA, PA; DL
PEMAZYRE TAB 9MG	5	NM, LA, PA; DL
PEMAZYRE TAB 13.5MG	5	NM, LA, PA; DL
PERJETA INJ 420/14ML	5	NM, LA; DL
PIQRAY 200MG TAB DOSE	5	NM, PA; DL
PIQRAY 250MG TAB DOSE	5	NM, PA; DL
PIQRAY 300MG TAB DOSE	5	NM, PA; DL
QINLOCK TAB 50MG	5	NM, LA, PA; DL
RETEVMO CAP 40MG	5	NM, LA, PA; DL
RETEVMO CAP 80MG	5	NM, LA, PA; DL
REZLIDHIA CAP 150MG	5	NM, LA; DL
RITUXAN INJ 100MG	5	NM, LA; DL
RITUXAN INJ 500MG	5	NM, LA; DL
ROZLYTREK CAP 100MG	5	NM, LA, PA; DL
ROZLYTREK CAP 200MG	5	NM, LA, PA; DL
ROZLYTREK PAK 50MG	5	NM, LA, PA; DL
RUBRACA TAB 200MG	5	NM, LA, PA; DL
RUBRACA TAB 250MG	5	NM, LA, PA; DL
RUBRACA TAB 300MG	5	NM, LA, PA; DL
RYDAPT CAP 25MG	5	NM, PA; DL
SCEMBLIX TAB 20MG	5	NM, PA; DL
SCEMBLIX TAB 40MG	5	NM, PA; DL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	5	NM, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 20MG	5	NM, PA; DL
SPRYCEL TAB 50MG	5	NM, PA; DL
SPRYCEL TAB 70MG	5	NM, PA; DL
SPRYCEL TAB 80MG	5	NM, PA; DL
SPRYCEL TAB 100MG	5	NM, PA; DL
SPRYCEL TAB 140MG	5	NM, PA; DL
STIVARGA TAB 40MG	5	NM, LA, PA; DL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	5	NM, PA; DL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	5	NM, PA; DL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	5	NM, PA; DL
<i>sunitinib malate cap 50 mg (base equivalent)</i>	5	NM, PA; DL
TABRECTA TAB 150MG	5	NM, PA; DL
TABRECTA TAB 200MG	5	NM, PA; DL
TAFINLAR CAP 50MG	5	NM, LA; DL
TAFINLAR CAP 75MG	5	NM, LA; DL
TAFINLAR TAB 10MG	5	NM, LA; DL
TAGRISSE TAB 40MG	5	NM, LA, PA; DL
TAGRISSE TAB 80MG	5	NM, LA, PA; DL
TALZENNA CAP 0.1MG	5	NM, LA, PA; DL
TALZENNA CAP 0.5MG	5	NM, LA, PA; DL
TALZENNA CAP 0.25MG	5	NM, LA, PA; DL
TALZENNA CAP 0.35MG	5	NM, LA, PA; DL
TALZENNA CAP 0.75MG	5	NM, LA, PA; DL
TALZENNA CAP 1MG	5	NM, LA, PA; DL
TASIGNA CAP 50MG	5	NM; DL
TASIGNA CAP 150MG	5	NM; DL
TASIGNA CAP 200MG	5	NM; DL
TAZVERIK TAB 200MG	5	NM, LA, PA; DL
TECENTRIQ INJ 1200/20	5	NM, LA; DL
TECVAYLI INJ 30MG/3ML	5	NM, LA, PA; DL
TECVAYLI INJ 153/1.7	5	NM, LA, PA; DL
TEPMETKO TAB 225MG	5	NM, LA, PA; DL
TIBSOVO TAB 250MG	5	NM, LA; DL
TORISEL INJ 25MG/ML	5	NM; DL
TRUQAP TAB 160MG	5	NM, LA, PA; DL
TRUQAP TAB 200MG	5	NM, LA, PA; DL
TRUSELTIQ CAP 50MG	5	LA, PA; DL
TRUSELTIQ CAP 75MG	5	LA, PA; DL
TRUSELTIQ CAP 100MG	5	LA, PA; DL
TRUSELTIQ CAP 125MG	5	LA, PA; DL
TUKYSA TAB 50MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
TUKYSA TAB 150MG	5	NM, LA, PA; DL
TURALIO CAP 125MG	5	NM, LA, PA; DL
TURALIO CAP 200MG	5	NM, LA, PA; DL
UKONIQ TAB 200MG	5	NM, LA, PA; DL
VANFLYTA TAB 17.7MG	5	NM, LA, PA; DL
VANFLYTA TAB 26.5MG	5	NM, LA, PA; DL
VECTIBIX INJ 100MG	5	NM, LA; DL
VECTIBIX INJ 400MG	5	NM, LA; DL
VENCLEXTA TAB 10MG	4	NM, LA, PA; DL
VENCLEXTA TAB 50MG	4	NM, LA, PA; DL
VENCLEXTA TAB 100MG	5	NM, LA, PA; DL
VENCLEXTA TAB START PK	5	NM, LA, PA; DL
VERZENIO TAB 50MG	5	NM, LA, PA; DL
VERZENIO TAB 100MG	5	NM, LA, PA; DL
VERZENIO TAB 150MG	5	NM, LA, PA; DL
VERZENIO TAB 200MG	5	NM, LA, PA; DL
VITRAKVI CAP 25MG	5	NM, LA, PA; DL
VITRAKVI CAP 100MG	5	NM, LA, PA; DL
VITRAKVI SOL 20MG/ML	5	NM, LA, PA; DL
VIZIMPRO TAB 15MG	5	NM, LA, PA; DL
VIZIMPRO TAB 30MG	5	NM, LA, PA; DL
VIZIMPRO TAB 45MG	5	NM, LA, PA; DL
VONJO CAP 100MG	5	QL (120 caps / 30 days), NM, LA, PA; DL
VOTRIENT TAB 200MG	5	NM, LA; DL
XALKORI CAP 20MG	5	NM, LA, PA; DL
XALKORI CAP 50MG	5	NM, LA, PA; DL
XALKORI CAP 150MG	5	NM, LA, PA; DL
XALKORI CAP 200MG	5	NM, LA, PA; DL
XALKORI CAP 250MG	5	NM, LA, PA; DL
XOSPATA TAB 40MG	5	NM, LA, PA; DL
XPOVIO 40 MG TWICE WEEKLY	5	NM, LA, PA; DL
XPOVIO PAK 40MG	5	NM, LA, PA; DL
XPOVIO PAK 50MG	5	NM, LA, PA; DL
XPOVIO PAK 60MG	5	NM, LA, PA; DL
XPOVIO PAK 80MG	5	NM, LA, PA; DL
ZEJULA CAP 100MG	5	NM, LA, PA; DL
ZEJULA TAB 100MG	5	NM, LA, PA; DL
ZEJULA TAB 200MG	5	NM, LA, PA; DL
ZEJULA TAB 300MG	5	NM, LA, PA; DL
ZELBORAF TAB 240MG	5	NM, LA, PA; DL
ZOLINZA CAP 100MG	5	NM; DL
ZYDELIG TAB 100MG	5	NM, LA, PA; DL
ZYDELIG TAB 150MG	5	NM, LA, PA; DL
ZYKADIA TAB 150MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
PROTECTIVE AGENTS		
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	4	
ELITEK INJ 1.5MG	5	DL
ELITEK INJ 7.5MG	5	DL
<i>leucovorin calcium for inj 50 mg</i>	2	
<i>leucovorin calcium for inj 100 mg</i>	2	
<i>leucovorin calcium for inj 200 mg</i>	2	
<i>leucovorin calcium for inj 350 mg</i>	2	
<i>leucovorin calcium tab 5 mg</i>	2	
<i>leucovorin calcium tab 10 mg</i>	2	
<i>leucovorin calcium tab 15 mg</i>	3	
<i>leucovorin calcium tab 25 mg</i>	4	
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	5	NM; DL
<i>mesna inj 100 mg/ml</i>	2	
MESNEX TAB 400MG	3	

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	2	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	2	

ACE INHIBITORS

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

Drug Name	Drug Tier	Requirements/Limits
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	2	
<i>eplerenone tab 50 mg</i>	2	
KERENDIA TAB 10MG	4	
KERENDIA TAB 20MG	4	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
ALPHA BLOCKERS		
<i>doxazosin mesylate tab 1 mg</i>	2	
<i>doxazosin mesylate tab 2 mg</i>	2	
<i>doxazosin mesylate tab 4 mg</i>	2	
<i>doxazosin mesylate tab 8 mg</i>	2	
<i>prazosin hcl cap 1 mg</i>	2	
<i>prazosin hcl cap 2 mg</i>	2	
<i>prazosin hcl cap 5 mg</i>	2	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	2	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	2	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	2	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	2	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	2	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	2	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	2	
EDARBYCLOR TAB 40-12.5	4	
EDARBYCLOR TAB 40-25MG	4	
ENTRESTO TAB 24-26MG	3	
ENTRESTO TAB 49-51MG	3	
ENTRESTO TAB 97-103MG	3	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	2	
<i>telmisartan-amlodipine tab 40-5 mg</i>	2	
<i>telmisartan-amlodipine tab 40-10 mg</i>	2	
<i>telmisartan-amlodipine tab 80-5 mg</i>	2	
<i>telmisartan-amlodipine tab 80-10 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	2	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	

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<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	2	
<i>candesartan cilexetil tab 8 mg</i>	2	
<i>candesartan cilexetil tab 16 mg</i>	2	
<i>candesartan cilexetil tab 32 mg</i>	2	
EDARBI TAB 40MG	4	
EDARBI TAB 80MG	4	
<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>	2	
<i>olmesartan medoxomil tab 20 mg</i>	2	
<i>olmesartan medoxomil tab 40 mg</i>	2	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	
ANTIARRHYTHMICS		
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	2	
<i>amiodarone hcl tab 100 mg</i>	2	
<i>amiodarone hcl tab 200 mg</i>	2	
<i>amiodarone hcl tab 400 mg</i>	2	
<i>disopyramide phosphate cap 100 mg</i>	2	
<i>disopyramide phosphate cap 150 mg</i>	2	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	3	NM
<i>dofetilide cap 250 mcg (0.25 mg)</i>	3	NM
<i>dofetilide cap 500 mcg (0.5 mg)</i>	3	NM
<i>flecainide acetate tab 50 mg</i>	2	
<i>flecainide acetate tab 100 mg</i>	2	
<i>flecainide acetate tab 150 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mexiletine hcl cap 150 mg</i>	3	
<i>mexiletine hcl cap 200 mg</i>	3	
<i>mexiletine hcl cap 250 mg</i>	3	
MULTAQ TAB 400MG	4	
NORPACE CAP 100MG CR	4	
NORPACE CAP 150MG CR	4	
<i>pacerone</i>	2	
<i>procainamide hcl inj 100 mg/ml</i>	2	
<i>propafenone hcl cap er 12hr 225 mg</i>	3	
<i>propafenone hcl cap er 12hr 325 mg</i>	3	
<i>propafenone hcl cap er 12hr 425 mg</i>	3	
<i>propafenone hcl tab 150 mg</i>	2	
<i>propafenone hcl tab 225 mg</i>	2	
<i>propafenone hcl tab 300 mg</i>	2	
<i>quinidine gluconate tab er 324 mg</i>	3	
<i>quinidine sulfate tab 200 mg</i>	3	
<i>quinidine sulfate tab 300 mg</i>	3	
<i>sorine</i>	2	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	2	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	2	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	2	
<i>sotalol hcl tab 80 mg</i>	2	
<i>sotalol hcl tab 120 mg</i>	2	
<i>sotalol hcl tab 160 mg</i>	2	
<i>sotalol hcl tab 240 mg</i>	2	
ANTILIPEMICS, FIBRATES		
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	2	
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	2	
<i>fenofibrate micronized cap 43 mg</i>	2	
<i>fenofibrate micronized cap 67 mg</i>	2	
<i>fenofibrate micronized cap 130 mg</i>	2	
<i>fenofibrate micronized cap 134 mg</i>	2	
<i>fenofibrate micronized cap 200 mg</i>	2	
<i>fenofibrate tab 40 mg</i>	2	
<i>fenofibrate tab 48 mg</i>	2	
<i>fenofibrate tab 54 mg</i>	2	
<i>fenofibrate tab 120 mg</i>	2	
<i>fenofibrate tab 145 mg</i>	2	
<i>fenofibrate tab 160 mg</i>	2	
<i>gemfibrozil tab 600 mg</i>	2	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	2	
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	2	
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	3	
LIVALO TAB 1MG	4	
LIVALO TAB 2MG	4	
LIVALO TAB 4MG	4	
<i>lovastatin tab 10 mg</i>	1	
<i>lovastatin tab 20 mg</i>	1	
<i>lovastatin tab 40 mg</i>	1	
<i>pitavastatin calcium tab 1 mg</i>	4	
<i>pitavastatin calcium tab 2 mg</i>	4	
<i>pitavastatin calcium tab 4 mg</i>	4	
<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	
ANTILIPEMICS, MISCELLANEOUS		
<i>cholestyramine light powder 4 gm/dose</i>	2	
<i>cholestyramine powder packets 4 gm</i>	2	
<i>colesevelam hcl tab 625 mg</i>	4	
<i>colestipol hcl granule packets 5 gm</i>	2	
<i>colestipol hcl tab 1 gm</i>	2	
<i>ezetimibe tab 10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>icosapent ethyl cap 0.5 gm</i>	3	
<i>icosapent ethyl cap 1 gm</i>	3	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	3	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	3	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	3	
<i>niacor</i>	3	
<i>omega-3-acid ethyl esters cap 1 gm</i>	3	
PRALUENT INJ 75MG/ML	3	QL (2 injections / 28 days), NM, PA; DL; (coverage restricted to Regeneron and Sanofi US brands only)
PRALUENT INJ 150MG/ML	3	QL (2 injections / 28 days), NM, PA; DL; (coverage restricted to Regeneron and Sanofi US brands only)
<i>prevalite</i>	2	
VASCEPA CAP 0.5GM	4	
VASCEPA CAP 1GM	4	
WELCHOL PAK 3.75GM	4	
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<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	
BETA-BLOCKERS		
<i>acebutolol hcl cap 200 mg</i>	2	
<i>acebutolol hcl cap 400 mg</i>	2	
<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>	2	
<i>betaxolol hcl tab 20 mg</i>	2	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carvedilol phosphate cap er 24hr 10 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	3	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
<i>labetalol hcl iv soln 5 mg/ml</i>	2	
<i>labetalol hcl tab 100 mg</i>	2	
<i>labetalol hcl tab 200 mg</i>	2	
<i>labetalol hcl tab 300 mg</i>	2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nadolol tab 20 mg</i>	2	
<i>nadolol tab 40 mg</i>	2	
<i>nadolol tab 80 mg</i>	2	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	3	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	3	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	3	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	3	
<i>pindolol tab 5 mg</i>	2	
<i>pindolol tab 10 mg</i>	2	
<i>propranolol hcl cap er 24hr 60 mg</i>	2	
<i>propranolol hcl cap er 24hr 80 mg</i>	2	
<i>propranolol hcl cap er 24hr 120 mg</i>	2	
<i>propranolol hcl cap er 24hr 160 mg</i>	2	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>timolol maleate tab 5 mg</i>	2	
<i>timolol maleate tab 10 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate tab 20 mg</i>	2	
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
<i>cartia xt</i>	2	
<i>dilt-xr</i>	2	
<i>diltiazem hcl cap er 12hr 60 mg</i>	2	
<i>diltiazem hcl cap er 12hr 90 mg</i>	2	
<i>diltiazem hcl cap er 12hr 120 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	2	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	2	
<i>diltiazem hcl tab 30 mg</i>	2	
<i>diltiazem hcl tab 60 mg</i>	2	
<i>diltiazem hcl tab 90 mg</i>	2	
<i>diltiazem hcl tab 120 mg</i>	2	
<i>diltiazem hcl tab er 24hr 120 mg</i>	2	
<i>diltiazem hcl tab er 24hr 180 mg</i>	2	
<i>diltiazem hcl tab er 24hr 240 mg</i>	2	
<i>diltiazem hcl tab er 24hr 300 mg</i>	2	
<i>diltiazem hcl tab er 24hr 360 mg</i>	2	
<i>diltiazem hcl tab er 24hr 420 mg</i>	2	
<i>felodipine tab er 24hr 2.5 mg</i>	2	
<i>felodipine tab er 24hr 5 mg</i>	2	
<i>felodipine tab er 24hr 10 mg</i>	2	
<i>isradipine cap 2.5 mg</i>	2	
<i>isradipine cap 5 mg</i>	2	
<i>matzim la tab 180mg/24</i>	2	
<i>matzim la tab 240mg/24</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>matzim la tab 300mg/24</i>	2	
<i>matzim la tab 360mg/24</i>	2	
<i>matzim la tab 420mg/24</i>	2	
<i>nicardipine hcl cap 20 mg</i>	2	
<i>nicardipine hcl cap 30 mg</i>	2	
<i>nifedipine tab er 24hr 30 mg</i>	2	
<i>nifedipine tab er 24hr 60 mg</i>	2	
<i>nifedipine tab er 24hr 90 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	2	
<i>nimodipine cap 30 mg</i>	4	
<i>nisoldipine tab er 24hr 8.5 mg</i>	4	
<i>nisoldipine tab er 24hr 17 mg</i>	4	
<i>nisoldipine tab er 24hr 20 mg</i>	4	
<i>nisoldipine tab er 24hr 25.5 mg</i>	4	
<i>nisoldipine tab er 24hr 30 mg</i>	4	
<i>nisoldipine tab er 24hr 34 mg</i>	4	
<i>nisoldipine tab er 24hr 40 mg</i>	4	
<i>taztia xt</i>	2	
<i>tiadylt er</i>	2	
<i>verapamil hcl cap er 24hr 100 mg</i>	2	
<i>verapamil hcl cap er 24hr 120 mg</i>	2	
<i>verapamil hcl cap er 24hr 180 mg</i>	2	
<i>verapamil hcl cap er 24hr 200 mg</i>	2	
<i>verapamil hcl cap er 24hr 240 mg</i>	2	
<i>verapamil hcl cap er 24hr 300 mg</i>	2	
<i>verapamil hcl cap er 24hr 360 mg</i>	2	
<i>verapamil hcl tab 40 mg</i>	2	
<i>verapamil hcl tab 80 mg</i>	2	
<i>verapamil hcl tab 120 mg</i>	2	
<i>verapamil hcl tab er 120 mg</i>	2	
<i>verapamil hcl tab er 180 mg</i>	2	
<i>verapamil hcl tab er 240 mg</i>	2	
DIURETICS		
<i>acetazolamide cap er 12hr 500 mg</i>	2	
<i>acetazolamide tab 125 mg</i>	2	
<i>acetazolamide tab 250 mg</i>	2	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	2	
<i>amiloride hcl tab 5 mg</i>	2	
<i>bumetanide tab 0.5 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>bumetanide tab 1 mg</i>	2	
<i>bumetanide tab 2 mg</i>	2	
<i>chlorthalidone tab 25 mg</i>	2	
<i>chlorthalidone tab 50 mg</i>	2	
<i>furosemide inj 10 mg/ml</i>	2	
<i>furosemide oral soln 10 mg/ml</i>	2	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	
<i>methazolamide tab 25 mg</i>	2	
<i>methazolamide tab 50 mg</i>	2	
<i>metolazone tab 2.5 mg</i>	2	
<i>metolazone tab 5 mg</i>	2	
<i>metolazone tab 10 mg</i>	2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>toremide tab 5 mg</i>	2	
<i>toremide tab 10 mg</i>	2	
<i>toremide tab 20 mg</i>	2	
<i>toremide tab 100 mg</i>	2	
<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	
<i>triamterene cap 50 mg</i>	2	
<i>triamterene cap 100 mg</i>	2	
MISCELLANEOUS		
<i>ADRENALIN INJ 1MG/ML</i>	3	
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	3	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	3	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	3	
<i>clonidine hcl tab 0.1 mg</i>	2	
<i>clonidine hcl tab 0.2 mg</i>	2	
<i>clonidine hcl tab 0.3 mg</i>	2	
CORLANOR TAB 5MG	4	
CORLANOR TAB 7.5MG	4	
<i>digoxin inj 0.25 mg/ml</i>	2	
<i>digoxin oral soln 0.05 mg/ml</i>	3	
<i>digoxin tab 125 mcg (0.125 mg)</i>	2	QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	2	
<i>droxidopa cap 100 mg</i>	5	QL (90 caps / 30 days), NM; DL
<i>droxidopa cap 200 mg</i>	5	QL (180 caps / 30 days), NM; DL
<i>droxidopa cap 300 mg</i>	5	QL (180 caps / 30 days), NM; DL
<i>hydralazine hcl tab 10 mg</i>	2	
<i>hydralazine hcl tab 25 mg</i>	2	
<i>hydralazine hcl tab 50 mg</i>	2	
<i>hydralazine hcl tab 100 mg</i>	2	
LANOXIN TAB 0.25MG	4	
LANOXIN TAB 0.125MG	4	QL (30 tabs / 30 days)
<i>metyrosine cap 250 mg</i>	5	DL
<i>midodrine hcl tab 2.5 mg</i>	2	
<i>midodrine hcl tab 5 mg</i>	2	
<i>midodrine hcl tab 10 mg</i>	2	
<i>minoxidil tab 2.5 mg</i>	2	
<i>minoxidil tab 10 mg</i>	2	
<i>ranolazine tab er 12hr 500 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ranolazine tab er 12hr 1000 mg</i>	3	
VERQUVO TAB 2.5MG	4	
VERQUVO TAB 5MG	4	
VERQUVO TAB 10MG	4	
VYNDAMAX CAP 61MG	5	NM, LA, PA; DL

NITRATES

<i>isosorbide dinitrate tab 5 mg</i>	2	
<i>isosorbide dinitrate tab 10 mg</i>	2	
<i>isosorbide dinitrate tab 20 mg</i>	2	
<i>isosorbide dinitrate tab 30 mg</i>	2	
<i>isosorbide mononitrate tab 10 mg</i>	2	
<i>isosorbide mononitrate tab 20 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	2	
NITRO-BID OIN 2%	3	
NITRO-DUR DIS 0.1MG/HR	4	
NITRO-DUR DIS 0.2MG/HR	4	
NITRO-DUR DIS 0.3MG/HR	4	
NITRO-DUR DIS 0.4MG/HR	4	
NITRO-DUR DIS 0.6MG/HR	4	
NITRO-DUR DIS 0.8MG/HR	4	
NITROGLYCER INJ 5MG/ML	3	
<i>nitroglycerin sl tab 0.3 mg</i>	2	
<i>nitroglycerin sl tab 0.4 mg</i>	2	
<i>nitroglycerin sl tab 0.6 mg</i>	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	2	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	2	
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TAB 0.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 2.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TAB 2MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
<i>alyq</i>	5	NM, PA; DL
<i>ambrisentan tab 5 mg</i>	5	NM, LA, PA; DL
<i>ambrisentan tab 10 mg</i>	5	NM, LA, PA; DL
OPSUMIT TAB 10MG	5	NM, LA, PA; DL
<i>sildenafil citrate for suspension 10 mg/ml</i>	5	QL (180 mL / 30 days), NM, PA; DL
<i>sildenafil citrate tab 20 mg</i>	2	QL (90 tabs / 30 days), NM, PA; DL
<i>tadalafil tab 20 mg (pah)</i>	5	NM, PA; DL
TYVASO DPI POW 16-32-48	5	NM, LA, PA; DL
TYVASO DPI POW 16-32MCG	5	NM, LA, PA; DL
TYVASO DPI POW 16MCG	5	NM, LA, PA; DL
TYVASO DPI POW 32-48MCG	5	NM, LA, PA; DL
TYVASO DPI POW 32MCG	5	NM, LA, PA; DL
TYVASO DPI POW 48MCG	5	NM, LA, PA; DL
TYVASO DPI POW 64MCG	5	NM, LA, PA; DL
UPTRAVI TAB 200MCG	5	NM, LA, PA; DL
UPTRAVI TAB 400MCG	5	NM, LA, PA; DL
UPTRAVI TAB 600MCG	5	NM, LA, PA; DL
UPTRAVI TAB 800MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1000MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1200MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1400MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1600MCG	5	NM, LA, PA; DL
VENTAVIS SOL 10MCG/ML	5	NM, LA, PA; DL
VENTAVIS SOL 20MCG/ML	5	NM, LA, PA; DL

CENTRAL NERVOUS SYSTEM

ANORECTIC AGENTS

<i>benzphetamine hcl tab 50 mg</i>	2	ED
CONTRAVE TAB 8-90MG	4	ED, PA
<i>diethylpropion hcl tab 25 mg</i>	2	ED
<i>diethylpropion hcl tab er 24hr 75 mg</i>	2	ED
<i>phendimetrazine tartrate tab 35 mg</i>	2	ED
<i>phentermine hcl cap 15 mg</i>	2	ED
<i>phentermine hcl cap 30 mg</i>	2	ED
<i>phentermine hcl cap 37.5 mg</i>	2	ED
<i>phentermine hcl tab 37.5 mg</i>	2	ED
QSYMIA CAP 3.75-23	4	ED, PA
QSYMIA CAP 7.5-46MG	4	ED, PA
QSYMIA CAP 11.25-69	4	ED, PA
QSYMIA CAP 15-92MG	4	ED, PA
SAXENDA INJ 18MG/3ML	4	ED, PA
XENICAL CAP 120MG	4	ED, PA

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Drug Name	Drug Tier	Requirements/Limits
ANTI ANXIETY		
ALPRAZOLAM CON 1 MG/ML	3	DL
<i>alprazolam tab 0.5 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	2	QL (150 tabs / 30 days)
<i>bupirone hcl tab 5 mg</i>	2	
<i>bupirone hcl tab 7.5 mg</i>	2	
<i>bupirone hcl tab 10 mg</i>	2	
<i>bupirone hcl tab 15 mg</i>	2	
<i>bupirone hcl tab 30 mg</i>	2	
<i>chlordiazepoxide hcl cap 5 mg</i>	2	
<i>chlordiazepoxide hcl cap 10 mg</i>	2	
<i>chlordiazepoxide hcl cap 25 mg</i>	2	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	2	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	2	
<i>fluvoxamine maleate tab 25 mg</i>	2	
<i>fluvoxamine maleate tab 50 mg</i>	2	
<i>fluvoxamine maleate tab 100 mg</i>	2	
<i>lorazepam intensol</i>	2	DL
<i>lorazepam tab 0.5 mg</i>	2	
<i>lorazepam tab 1 mg</i>	2	
<i>lorazepam tab 2 mg</i>	2	
LOREEV XR CAP 1.5MG	4	
LOREEV XR CAP 1MG	4	
LOREEV XR CAP 2MG	4	
LOREEV XR CAP 3MG	4	
<i>oxazepam cap 10 mg</i>	2	
<i>oxazepam cap 15 mg</i>	2	
<i>oxazepam cap 30 mg</i>	2	
ANTIDEMENTIA		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 5 mg</i>	2	
<i>donepezil hydrochloride tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 23 mg</i>	2	
<i>ergoloid mesylates tab 1 mg</i>	2	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	3	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	3	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	2	
<i>galantamine hydrobromide tab 4 mg</i>	2	
<i>galantamine hydrobromide tab 8 mg</i>	2	
<i>galantamine hydrobromide tab 12 mg</i>	2	
<i>memantine hcl cap er 24hr 7 mg</i>	3	
<i>memantine hcl cap er 24hr 14 mg</i>	3	
<i>memantine hcl cap er 24hr 21 mg</i>	3	
<i>memantine hcl cap er 24hr 28 mg</i>	3	
<i>memantine hcl oral solution 2 mg/ml</i>	2	
<i>memantine hcl tab 5 mg</i>	2	
<i>memantine hcl tab 10 mg</i>	2	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	2	
NAMZARIC CAP 7-10MG	4	
NAMZARIC CAP 14-10MG	4	
NAMZARIC CAP 21-10MG	4	
NAMZARIC CAP 28-10MG	4	
NAMZARIC CAP PACK	4	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	2	
<i>rivastigmine transdermal</i>	3	
ANTIDEPRESSANTS		
<i>amitriptyline hcl tab 10 mg</i>	3	
<i>amitriptyline hcl tab 25 mg</i>	3	
<i>amitriptyline hcl tab 50 mg</i>	3	
<i>amitriptyline hcl tab 75 mg</i>	3	
<i>amitriptyline hcl tab 100 mg</i>	3	
<i>amitriptyline hcl tab 150 mg</i>	3	
<i>amoxapine tab 25 mg</i>	2	
<i>amoxapine tab 50 mg</i>	2	
<i>amoxapine tab 100 mg</i>	2	
<i>amoxapine tab 150 mg</i>	2	
AUVELITY TAB 45-105MG	4	
<i>bupropion hcl tab 75 mg</i>	2	
<i>bupropion hcl tab 100 mg</i>	2	
<i>bupropion hcl tab er 12hr 100 mg</i>	2	
<i>bupropion hcl tab er 12hr 150 mg</i>	2	
<i>bupropion hcl tab er 12hr 200 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl tab er 24hr 150 mg</i>	3	
<i>bupropion hcl tab er 24hr 300 mg</i>	3	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	2	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	2	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	2	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	2	
<i>clomipramine hcl cap 25 mg</i>	3	
<i>clomipramine hcl cap 50 mg</i>	3	
<i>clomipramine hcl cap 75 mg</i>	3	
<i>desipramine hcl tab 10 mg</i>	2	
<i>desipramine hcl tab 25 mg</i>	2	
<i>desipramine hcl tab 50 mg</i>	2	
<i>desipramine hcl tab 75 mg</i>	2	
<i>desipramine hcl tab 100 mg</i>	2	
<i>desipramine hcl tab 150 mg</i>	2	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	3	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	3	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	3	
<i>doxepin hcl cap 10 mg</i>	3	
<i>doxepin hcl cap 25 mg</i>	3	
<i>doxepin hcl cap 50 mg</i>	3	
<i>doxepin hcl cap 75 mg</i>	3	
<i>doxepin hcl cap 100 mg</i>	3	
<i>doxepin hcl cap 150 mg</i>	3	
<i>doxepin hcl conc 10 mg/ml</i>	3	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	3	
EMSAM DIS 6MG/24HR	5	DL
EMSAM DIS 9MG/24HR	5	DL
EMSAM DIS 12MG/24H	5	DL
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	2	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	2	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	2	
FETZIMA CAP 20MG	4	
FETZIMA CAP 40MG	4	
FETZIMA CAP 80MG	4	
FETZIMA CAP 120MG	4	
FETZIMA CAP TITRATIO	4	
<i>fluoxetine hcl cap 10 mg</i>	2	
<i>fluoxetine hcl cap 20 mg</i>	2	
<i>fluoxetine hcl cap 40 mg</i>	2	
<i>fluoxetine hcl solution 20 mg/5ml</i>	2	
<i>fluoxetine hcl tab 10 mg</i>	2	
<i>fluoxetine hcl tab 20 mg</i>	3	
<i>imipramine hcl tab 10 mg</i>	3	
<i>imipramine hcl tab 25 mg</i>	3	
<i>imipramine hcl tab 50 mg</i>	3	
MARPLAN TAB 10MG	4	
<i>mirtazapine orally disintegrating tab 15 mg</i>	2	
<i>mirtazapine orally disintegrating tab 30 mg</i>	2	
<i>mirtazapine orally disintegrating tab 45 mg</i>	2	
<i>mirtazapine tab 7.5 mg</i>	2	
<i>mirtazapine tab 15 mg</i>	2	
<i>mirtazapine tab 30 mg</i>	2	
<i>mirtazapine tab 45 mg</i>	2	
<i>nefazodone hcl tab 50 mg</i>	2	
<i>nefazodone hcl tab 100 mg</i>	2	
<i>nefazodone hcl tab 150 mg</i>	2	
<i>nefazodone hcl tab 200 mg</i>	2	
<i>nefazodone hcl tab 250 mg</i>	2	
<i>nortriptyline hcl cap 10 mg</i>	2	
<i>nortriptyline hcl cap 25 mg</i>	2	
<i>nortriptyline hcl cap 50 mg</i>	2	
<i>nortriptyline hcl cap 75 mg</i>	2	
<i>nortriptyline hcl soln 10 mg/5ml</i>	2	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	2	
<i>paroxetine hcl tab 10 mg</i>	2	
<i>paroxetine hcl tab 20 mg</i>	2	
<i>paroxetine hcl tab 30 mg</i>	2	
<i>paroxetine hcl tab 40 mg</i>	2	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl tab er 24hr 25 mg</i>	3	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	3	
<i>phenelzine sulfate tab 15 mg</i>	2	
<i>protriptyline hcl tab 5 mg</i>	2	
<i>protriptyline hcl tab 10 mg</i>	2	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	2	
<i>sertraline hcl tab 25 mg</i>	2	
<i>sertraline hcl tab 50 mg</i>	2	
<i>sertraline hcl tab 100 mg</i>	2	
<i>tranylcypromine sulfate tab 10 mg</i>	2	
<i>trazodone hcl tab 50 mg</i>	2	
<i>trazodone hcl tab 100 mg</i>	2	
<i>trazodone hcl tab 150 mg</i>	2	
<i>trazodone hcl tab 300 mg</i>	2	
<i>trimipramine maleate cap 25 mg</i>	3	
<i>trimipramine maleate cap 50 mg</i>	3	
<i>trimipramine maleate cap 100 mg</i>	3	
TRINTELLIX TAB 5MG	4	
TRINTELLIX TAB 10MG	4	
TRINTELLIX TAB 20MG	4	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	3	
VENLAFAXINE TAB 112.5MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>vilazodone hcl tab 10 mg</i>	3	
<i>vilazodone hcl tab 20 mg</i>	3	
<i>vilazodone hcl tab 40 mg</i>	3	
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl cap 100 mg</i>	2	
<i>amantadine hcl soln 50 mg/5ml</i>	2	
<i>amantadine hcl tab 100 mg</i>	2	
<i>benztropine mesylate inj 1 mg/ml</i>	3	
<i>benztropine mesylate tab 0.5 mg</i>	2	
<i>benztropine mesylate tab 1 mg</i>	2	
<i>benztropine mesylate tab 2 mg</i>	2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab 10-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab er 25-100 mg</i>	2	
<i>carbidopa & levodopa tab er 50-200 mg</i>	2	
<i>carbidopa tab 25 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	3	
<i>entacapone tab 200 mg</i>	3	
INBRIJA CAP 42MG	5	NM, LA; DL
NEUPRO DIS 1MG/24HR	4	
NEUPRO DIS 2MG/24HR	4	
NEUPRO DIS 3MG/24HR	4	
NEUPRO DIS 4MG/24HR	4	
NEUPRO DIS 6MG/24HR	4	
NEUPRO DIS 8MG/24HR	4	
NOURIANZ TAB 20MG	5	NM, LA; DL

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Drug Name	Drug Tier	Requirements/Limits
NOURIANZ TAB 40MG	5	NM, LA; DL
<i>pramipexole dihydrochloride tab 0.5 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	2	
<i>pramipexole dihydrochloride tab 1 mg</i>	2	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	3	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	3	
<i>ropinirole hydrochloride tab 0.5 mg</i>	2	
<i>ropinirole hydrochloride tab 0.25 mg</i>	2	
<i>ropinirole hydrochloride tab 1 mg</i>	2	
<i>ropinirole hydrochloride tab 2 mg</i>	2	
<i>ropinirole hydrochloride tab 3 mg</i>	2	
<i>ropinirole hydrochloride tab 4 mg</i>	2	
<i>ropinirole hydrochloride tab 5 mg</i>	2	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	2	
RYTARY CAP 95MG	4	
RYTARY CAP 145MG	4	
RYTARY CAP 195MG	4	
RYTARY CAP 245MG	4	
<i>selegiline hcl cap 5 mg</i>	3	
<i>selegiline hcl tab 5 mg</i>	3	
<i>tolcapone tab 100 mg</i>	5	DL
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	2	
<i>trihexyphenidyl hcl tab 2 mg</i>	2	
<i>trihexyphenidyl hcl tab 5 mg</i>	2	
ANTIPSYCHOTICS		
ABILIFY ASIM INJ 720MG	5	DL
ABILIFY ASIM INJ 960MG	5	DL
ABILIFY MAIN INJ 300MG	5	QL (1 injection / 28 days); DL
ABILIFY MAIN INJ 400MG	5	QL (1 injection / 28 days); DL
<i>aripiprazole oral solution 1 mg/ml</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>aripiprazole orally disintegrating tab 10 mg</i>	4	
<i>aripiprazole orally disintegrating tab 15 mg</i>	4	
<i>aripiprazole tab 2 mg</i>	4	
<i>aripiprazole tab 5 mg</i>	4	
<i>aripiprazole tab 10 mg</i>	4	
<i>aripiprazole tab 15 mg</i>	4	
<i>aripiprazole tab 20 mg</i>	4	
<i>aripiprazole tab 30 mg</i>	4	
ARISTADA INJ 441MG/1.	5	DL
ARISTADA INJ 662MG/2	5	DL
ARISTADA INJ 882MG/3	5	DL
ARISTADA INJ 1064MG	5	DL
ARISTADA INJ INITIO	5	DL
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	4	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	4	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	4	
CAPLYTA CAP 10.5MG	5	DL
CAPLYTA CAP 21MG	5	DL
CAPLYTA CAP 42MG	5	DL
<i>chlorpromazine hcl inj 50 mg/2ml</i>	3	
<i>chlorpromazine hcl tab 10 mg</i>	3	
<i>chlorpromazine hcl tab 25 mg</i>	3	
<i>chlorpromazine hcl tab 50 mg</i>	3	
<i>chlorpromazine hcl tab 100 mg</i>	3	
<i>chlorpromazine hcl tab 200 mg</i>	3	
<i>clozapine orally disintegrating tab 12.5 mg</i>	3	
<i>clozapine orally disintegrating tab 25 mg</i>	3	
<i>clozapine orally disintegrating tab 100 mg</i>	3	
<i>clozapine orally disintegrating tab 150 mg</i>	3	
<i>clozapine orally disintegrating tab 200 mg</i>	5	DL
<i>clozapine tab 25 mg</i>	2	
<i>clozapine tab 50 mg</i>	2	
<i>clozapine tab 100 mg</i>	2	
<i>clozapine tab 200 mg</i>	2	
FANAPT PAK	4	
FANAPT TAB 1MG	5	DL
FANAPT TAB 2MG	5	DL
FANAPT TAB 4MG	5	DL
FANAPT TAB 6MG	5	DL
FANAPT TAB 8MG	4	
FANAPT TAB 10MG	5	DL
FANAPT TAB 12MG	5	DL

Drug Name	Drug Tier	Requirements/Limits
<i>fluphenazine decanoate inj 25 mg/ml</i>	2	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	2	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	2	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	2	
<i>fluphenazine hcl tab 1 mg</i>	2	
<i>fluphenazine hcl tab 2.5 mg</i>	2	
<i>fluphenazine hcl tab 5 mg</i>	2	
<i>fluphenazine hcl tab 10 mg</i>	2	
GEODON INJ 20MG	4	DL
<i>haloperidol decanoate im soln 50 mg/ml</i>	2	
<i>haloperidol decanoate im soln 100 mg/ml</i>	2	
<i>haloperidol lactate inj 5 mg/ml</i>	2	
<i>haloperidol lactate oral conc 2 mg/ml</i>	2	
<i>haloperidol tab 0.5 mg</i>	2	
<i>haloperidol tab 1 mg</i>	2	
<i>haloperidol tab 2 mg</i>	2	
<i>haloperidol tab 5 mg</i>	2	
<i>haloperidol tab 10 mg</i>	2	
<i>haloperidol tab 20 mg</i>	2	
INVEGA HAFYE INJ 1092MG	5	QL (1 injection / 180 days); DL
INVEGA HAFYE INJ 1560MG	5	QL (1 injection / 180 days); DL
INVEGA SUST INJ 39/0.25	3	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	5	QL (1 injection / 28 days); DL
INVEGA SUST INJ 117/0.75	5	QL (1 injection / 28 days); DL
INVEGA SUST INJ 156MG/ML	5	QL (1 injection / 28 days); DL
INVEGA SUST INJ 234/1.5	5	QL (1 injection / 28 days); DL
INVEGA TRINZ INJ 273MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 410MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 546MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 819MG	5	QL (1 syringe / 90 days); DL
<i>loxapine succinate cap 5 mg</i>	2	
<i>loxapine succinate cap 10 mg</i>	2	
<i>loxapine succinate cap 25 mg</i>	2	
<i>loxapine succinate cap 50 mg</i>	2	
<i>lurasidone hcl tab 20 mg</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>lurasidone hcl tab 40 mg</i>	4	
<i>lurasidone hcl tab 60 mg</i>	4	
<i>lurasidone hcl tab 80 mg</i>	4	
<i>lurasidone hcl tab 120 mg</i>	4	
LYBALVI TAB 5-10MG	5	DL
LYBALVI TAB 10-10MG	5	DL
LYBALVI TAB 15-10MG	5	DL
LYBALVI TAB 20-10MG	5	DL
<i>molindone hcl tab 5 mg</i>	4	
<i>molindone hcl tab 10 mg</i>	4	
<i>molindone hcl tab 25 mg</i>	4	
NUPLAZID CAP 34MG	5	NM, LA, PA; DL
NUPLAZID TAB 10MG	5	NM, LA, PA; DL
<i>olanzapine for im inj 10 mg</i>	2	
<i>olanzapine orally disintegrating tab 5 mg</i>	3	
<i>olanzapine orally disintegrating tab 10 mg</i>	3	
<i>olanzapine orally disintegrating tab 15 mg</i>	3	
<i>olanzapine orally disintegrating tab 20 mg</i>	3	
<i>olanzapine tab 2.5 mg</i>	2	
<i>olanzapine tab 5 mg</i>	2	
<i>olanzapine tab 7.5 mg</i>	2	
<i>olanzapine tab 10 mg</i>	2	
<i>olanzapine tab 15 mg</i>	2	
<i>olanzapine tab 20 mg</i>	2	
<i>paliperidone tab er 24hr 1.5 mg</i>	4	
<i>paliperidone tab er 24hr 3 mg</i>	4	
<i>paliperidone tab er 24hr 6 mg</i>	4	
<i>paliperidone tab er 24hr 9 mg</i>	4	
<i>perphenazine tab 2 mg</i>	2	
<i>perphenazine tab 4 mg</i>	2	
<i>perphenazine tab 8 mg</i>	2	
<i>perphenazine tab 16 mg</i>	2	
PERSERIS INJ 90MG	5	DL
PERSERIS INJ 120MG	5	DL
<i>pimozide tab 1 mg</i>	2	
<i>pimozide tab 2 mg</i>	2	
<i>quetiapine fumarate tab 25 mg</i>	2	
<i>quetiapine fumarate tab 50 mg</i>	2	
<i>quetiapine fumarate tab 100 mg</i>	2	
<i>quetiapine fumarate tab 150 mg</i>	2	
<i>quetiapine fumarate tab 200 mg</i>	2	
<i>quetiapine fumarate tab 300 mg</i>	2	
<i>quetiapine fumarate tab 400 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	3	

PA - Prior Authorization **QL** - Quantity Limits **NM** - Not available at mail-order **B/D** - Covered under Medicare B or D **LA** - Limited Access **ED** - Enhanced Drugs **DL** - Medication restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tab er 24hr 200 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	3	
REXULTI TAB 0.5MG	5	DL
REXULTI TAB 0.25MG	5	DL
REXULTI TAB 1MG	5	DL
REXULTI TAB 2MG	5	QL (30 tabs / 30 days); DL
REXULTI TAB 3MG	5	QL (30 tabs / 30 days); DL
REXULTI TAB 4MG	5	QL (30 tabs / 30 days); DL
RISPERDAL INJ 12.5MG	4	DL
RISPERDAL INJ 25MG	4	DL
RISPERDAL INJ 37.5MG	4	DL
RISPERDAL INJ 50MG	4	DL
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	4	DL
<i>risperidone microspheres for im extended rel susp 25 mg</i>	4	DL
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	4	DL
<i>risperidone microspheres for im extended rel susp 50 mg</i>	4	DL
<i>risperidone orally disintegrating tab 0.5 mg</i>	3	
<i>risperidone orally disintegrating tab 0.25 mg</i>	3	
<i>risperidone orally disintegrating tab 1 mg</i>	3	
<i>risperidone orally disintegrating tab 2 mg</i>	3	
<i>risperidone orally disintegrating tab 3 mg</i>	3	
<i>risperidone orally disintegrating tab 4 mg</i>	3	
<i>risperidone soln 1 mg/ml</i>	2	
<i>risperidone tab 0.5 mg</i>	2	
<i>risperidone tab 0.25 mg</i>	2	
<i>risperidone tab 1 mg</i>	2	
<i>risperidone tab 2 mg</i>	2	
<i>risperidone tab 3 mg</i>	2	
<i>risperidone tab 4 mg</i>	2	
SECUADO DIS 3.8MG	5	DL
SECUADO DIS 5.7MG	5	DL
SECUADO DIS 7.6MG	5	DL
<i>thioridazine hcl tab 10 mg</i>	3	
<i>thioridazine hcl tab 25 mg</i>	3	
<i>thioridazine hcl tab 50 mg</i>	3	
<i>thioridazine hcl tab 100 mg</i>	3	
<i>thiothixene cap 1 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>thiothixene cap 2 mg</i>	2	
<i>thiothixene cap 5 mg</i>	2	
<i>thiothixene cap 10 mg</i>	2	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	2	
UZEDY INJ 50MG	5	DL
UZEDY INJ 75MG	5	DL
UZEDY INJ 100MG	5	DL
UZEDY INJ 125MG	5	DL
UZEDY INJ 150MG	5	DL
UZEDY INJ 200MG	5	DL
UZEDY INJ 250MG	5	DL
VERSACLOZ SUS 50MG/ML	5	DL
VRAYLAR CAP 1.5MG	5	DL
VRAYLAR CAP 3MG	5	DL
VRAYLAR CAP 4.5MG	5	DL
VRAYLAR CAP 6MG	5	DL
<i>ziprasidone hcl cap 20 mg</i>	2	
<i>ziprasidone hcl cap 40 mg</i>	2	
<i>ziprasidone hcl cap 60 mg</i>	2	
<i>ziprasidone hcl cap 80 mg</i>	2	
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	3	
ZYPREXA RELP INJ 210MG	4	NM; DL
ZYPREXA RELP INJ 300MG	5	NM; DL
ZYPREXA RELP INJ 405MG	5	NM; DL
ANTIEPILEPTIC AGENTS		
APTiom TAB 200MG	5	DL
APTiom TAB 400MG	5	DL
APTiom TAB 600MG	5	DL
APTiom TAB 800MG	5	DL
BRIVIACT INJ 50MG/5ML	5	DL
BRIVIACT SOL 10MG/ML	5	DL
BRIVIACT TAB 10MG	5	DL
BRIVIACT TAB 25MG	5	DL
BRIVIACT TAB 50MG	5	DL
BRIVIACT TAB 75MG	5	DL
BRIVIACT TAB 100MG	5	DL
<i>carbamazepine cap er 12hr 100 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine cap er 12hr 200 mg</i>	2	
<i>carbamazepine cap er 12hr 300 mg</i>	2	
<i>carbamazepine chew tab 100 mg</i>	2	
<i>carbamazepine susp 100 mg/5ml</i>	2	
<i>carbamazepine tab 200 mg</i>	2	
<i>carbamazepine tab er 12hr 100 mg</i>	2	
<i>carbamazepine tab er 12hr 200 mg</i>	2	
<i>carbamazepine tab er 12hr 400 mg</i>	2	
CELONTIN CAP 300MG	3	
<i>clobazam suspension 2.5 mg/ml</i>	4	
<i>clobazam tab 10 mg</i>	4	
<i>clobazam tab 20 mg</i>	4	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	2	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	2	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	2	
<i>clonazepam orally disintegrating tab 1 mg</i>	2	
<i>clonazepam orally disintegrating tab 2 mg</i>	2	
<i>clonazepam tab 0.5 mg</i>	2	
<i>clonazepam tab 1 mg</i>	2	
<i>clonazepam tab 2 mg</i>	2	
<i>clorazepate dipotassium tab 3.75 mg</i>	2	
<i>clorazepate dipotassium tab 7.5 mg</i>	2	
<i>clorazepate dipotassium tab 15 mg</i>	2	
DIACOMIT CAP 250MG	5	NM, LA, PA; DL
DIACOMIT CAP 500MG	5	NM, LA, PA; DL
DIACOMIT PAK 250MG	5	NM, LA, PA; DL
DIACOMIT PAK 500MG	5	NM, LA, PA; DL
DIASTAT ACDL GEL 5-10MG	4	
<i>diazepam inj 5 mg/ml</i>	3	DL
<i>diazepam intensol</i>	3	DL
<i>diazepam oral soln 1 mg/ml</i>	2	DL
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
<i>diazepam tab 2 mg</i>	2	
<i>diazepam tab 5 mg</i>	2	
<i>diazepam tab 10 mg</i>	2	
DILANTIN CAP 30MG	4	
DILANTIN CAP 100MG	4	
DILANTIN CHW 50MG	4	
DILANTIN-125 SUS 125/5ML	4	

Drug Name	Drug Tier	Requirements/Limits
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	2	
<i>divalproex sodium tab delayed release 125 mg</i>	2	
<i>divalproex sodium tab delayed release 250 mg</i>	2	
<i>divalproex sodium tab delayed release 500 mg</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	3	
<i>divalproex sodium tab er 24 hr 500 mg</i>	3	
EPIDIOLEX SOL 100MG/ML	5	NM, LA, PA; DL
<i>epitol</i>	2	
EPRONTIA SOL 25MG/ML	4	
<i>ethosuximide cap 250 mg</i>	2	
<i>ethosuximide soln 250 mg/5ml</i>	2	
<i>felbamate susp 600 mg/5ml</i>	2	
<i>felbamate tab 400 mg</i>	2	
<i>felbamate tab 600 mg</i>	2	
FINTEPLA SOL 2.2MG/ML	5	NM, LA; DL
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	2	
FYCOMPA SUS 0.5MG/ML	5	DL
FYCOMPA TAB 2MG	4	QL (30 tabs / 30 days); DL
FYCOMPA TAB 4MG	5	DL
FYCOMPA TAB 6MG	5	DL
FYCOMPA TAB 8MG	5	DL
FYCOMPA TAB 10MG	5	DL
FYCOMPA TAB 12MG	5	DL
<i>gabapentin cap 100 mg</i>	2	
<i>gabapentin cap 300 mg</i>	2	
<i>gabapentin cap 400 mg</i>	2	
<i>gabapentin oral soln 250 mg/5ml</i>	2	
<i>gabapentin tab 600 mg</i>	2	
<i>gabapentin tab 800 mg</i>	2	
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide tab 50 mg</i>	4	
<i>lacosamide tab 100 mg</i>	4	
<i>lacosamide tab 150 mg</i>	4	
<i>lacosamide tab 200 mg</i>	4	
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab 25 mg</i>	2	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	2	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	2	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	2	
<i>lamotrigine tab 100 mg</i>	2	
<i>lamotrigine tab 150 mg</i>	2	
<i>lamotrigine tab 200 mg</i>	2	
<i>lamotrigine tab chewable dispersible 5 mg</i>	2	
<i>lamotrigine tab chewable dispersible 25 mg</i>	2	
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	2	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	2	
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i>	2	
<i>lamotrigine tab er 24hr 25 mg</i>	4	
<i>lamotrigine tab er 24hr 50 mg</i>	4	
<i>lamotrigine tab er 24hr 100 mg</i>	4	
<i>lamotrigine tab er 24hr 200 mg</i>	4	
<i>lamotrigine tab er 24hr 250 mg</i>	4	
<i>lamotrigine tab er 24hr 300 mg</i>	4	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	3	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	3	
<i>levetiracetam oral soln 100 mg/ml</i>	2	
<i>levetiracetam tab 250 mg</i>	2	
<i>levetiracetam tab 500 mg</i>	2	
<i>levetiracetam tab 750 mg</i>	2	
<i>levetiracetam tab 1000 mg</i>	2	
<i>levetiracetam tab er 24hr 500 mg</i>	2	
<i>levetiracetam tab er 24hr 750 mg</i>	2	
<i>lorazepam inj 2 mg/ml</i>	3	DL
<i>lorazepam inj 4 mg/ml</i>	3	DL
<i>methsuximide cap 300 mg</i>	3	
<i>NAYZILAM SPR 5MG</i>	4	DL
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	2	
<i>oxcarbazepine tab 150 mg</i>	2	
<i>oxcarbazepine tab 300 mg</i>	2	
<i>oxcarbazepine tab 600 mg</i>	2	
<i>phenobarbital elixir 20 mg/5ml</i>	2	
<i>phenobarbital tab 15 mg</i>	2	
<i>phenobarbital tab 16.2 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>phenobarbital tab 30 mg</i>	2	
<i>phenobarbital tab 32.4 mg</i>	2	
<i>phenobarbital tab 60 mg</i>	2	
<i>phenobarbital tab 64.8 mg</i>	2	
<i>phenobarbital tab 97.2 mg</i>	2	
<i>phenobarbital tab 100 mg</i>	2	
<i>phenytoin chew tab 50 mg</i>	2	
<i>phenytoin sodium extended cap 100 mg</i>	2	
<i>phenytoin sodium extended cap 200 mg</i>	2	
<i>phenytoin sodium extended cap 300 mg</i>	2	
<i>phenytoin sodium inj 50 mg/ml</i>	2	
<i>phenytoin susp 125 mg/5ml</i>	2	
<i>pregabalin cap 25 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 50 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 75 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 100 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 150 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 200 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 225 mg</i>	3	QL (60 caps / 30 days)
<i>pregabalin cap 300 mg</i>	3	QL (60 caps / 30 days)
<i>pregabalin soln 20 mg/ml</i>	3	QL (946 mL / 30 days); DL
<i>primidone tab 50 mg</i>	2	
<i>primidone tab 125 mg</i>	2	
<i>primidone tab 250 mg</i>	2	
<i>roweepra</i>	2	
<i>rufinamide susp 40 mg/ml</i>	5	DL
<i>rufinamide tab 200 mg</i>	4	
<i>rufinamide tab 400 mg</i>	5	DL
SPRITAM TAB 250MG	4	
SPRITAM TAB 500MG	4	
SPRITAM TAB 750MG	4	
SPRITAM TAB 1000MG	4	
<i>subvenite</i>	2	
<i>subvenite starter kit/blu</i>	2	
<i>subvenite starter kit/gre</i>	2	
<i>subvenite starter kit/ora</i>	2	
SYMPAZAN MIS 5MG	4	
SYMPAZAN MIS 10MG	5	DL
SYMPAZAN MIS 20MG	5	DL
<i>tiagabine hcl tab 2 mg</i>	3	
<i>tiagabine hcl tab 4 mg</i>	3	
<i>tiagabine hcl tab 12 mg</i>	3	
<i>tiagabine hcl tab 16 mg</i>	3	
<i>topiramate cap er 24hr 25 mg</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>topiramate cap er 24hr 50 mg</i>	4	
<i>topiramate cap er 24hr 100 mg</i>	4	
<i>topiramate cap er 24hr 200 mg</i>	4	
<i>topiramate sprinkle cap 15 mg</i>	2	
<i>topiramate sprinkle cap 25 mg</i>	2	
<i>topiramate tab 25 mg</i>	2	
<i>topiramate tab 50 mg</i>	2	
<i>topiramate tab 100 mg</i>	2	
<i>topiramate tab 200 mg</i>	2	
<i>valproate sodium inj 100 mg/ml</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	2	
<i>valproic acid cap 250 mg</i>	2	
VALTOCO SPR 5MG	4	
VALTOCO SPR 10MG	4	
VALTOCO SPR 15MG	4	
VALTOCO SPR 20MG	4	
<i>vigabatrin powd pack 500 mg</i>	5	NM, LA; DL
<i>vigabatrin tab 500 mg</i>	5	NM, LA; DL
<i>vigadrone</i>	5	NM, LA; DL
<i>vigadrone tab 500mg</i>	5	NM, LA; DL
<i>vigpoder pow 500mg</i>	5	NM, LA; DL
VIMPAT INJ 200MG/20	4	
VIMPAT SOL 10MG/ML	4	
VIMPAT TAB 50MG	4	
VIMPAT TAB 100MG	4	
VIMPAT TAB 150MG	4	
VIMPAT TAB 200MG	4	
XCOPRI PAK 12.5-25	4	
XCOPRI PAK 50-100MG	5	DL
XCOPRI PAK 100-150	5	DL
XCOPRI PAK 150-200MG (MAINTENANCE)	5	DL
XCOPRI PAK 150-200MG (TITRATION)	5	DL
XCOPRI TAB 50MG	5	DL
XCOPRI TAB 100MG	5	DL
XCOPRI TAB 150MG	5	DL
XCOPRI TAB 200MG	5	DL
ZONISADE SUS 100MG/5	3	
<i>zonisamide cap 25 mg</i>	2	
<i>zonisamide cap 50 mg</i>	2	
<i>zonisamide cap 100 mg</i>	2	
ZTALMY SUS 50MG/ML	5	NM, LA, PA; DL
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	3	QL (30 caps / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	3	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	3	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	3	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	3	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	3	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 10 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 15 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 20 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 30 mg</i>	2	
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	3	
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	3	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	2	
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	2	
<i>dexmethylphenidate hcl tab 2.5 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl tab 5 mg</i>	2	
<i>dexmethylphenidate hcl tab 10 mg</i>	2	
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	4	
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	4	
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	4	
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	2	
<i>dextroamphetamine sulfate tab 5 mg</i>	2	
<i>dextroamphetamine sulfate tab 10 mg</i>	2	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	2	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	2	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	2	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	2	
<i>methylphenidate hcl cap er 10 mg (cd)</i>	4	
<i>methylphenidate hcl cap er 20 mg (cd)</i>	4	
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	4	
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	4	
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	4	
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	4	
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	4	
<i>methylphenidate hcl cap er 30 mg (cd)</i>	4	
<i>methylphenidate hcl cap er 40 mg (cd)</i>	4	
<i>methylphenidate hcl cap er 50 mg (cd)</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 60 mg (cd)</i>	4	
<i>methylphenidate hcl soln 5 mg/5ml</i>	2	
<i>methylphenidate hcl soln 10 mg/5ml</i>	2	
<i>methylphenidate hcl tab 5 mg</i>	2	
<i>methylphenidate hcl tab 10 mg</i>	2	
<i>methylphenidate hcl tab 20 mg</i>	2	
<i>methylphenidate hcl tab er 10 mg</i>	2	
<i>methylphenidate hcl tab er 20 mg</i>	4	
<i>methylphenidate hcl tab er 24hr 18 mg</i>	4	
<i>methylphenidate hcl tab er 24hr 27 mg</i>	4	
<i>methylphenidate hcl tab er 24hr 36 mg</i>	4	
<i>methylphenidate hcl tab er 24hr 54 mg</i>	4	
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	4	
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	4	
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	4	
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	4	
VYVANSE CAP 10MG	4	
VYVANSE CAP 20MG	4	
VYVANSE CAP 30MG	4	
VYVANSE CAP 40MG	4	
VYVANSE CAP 50MG	4	
VYVANSE CAP 60MG	4	
VYVANSE CAP 70MG	4	
HYPNOTICS		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	3	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	3	QL (30 tabs / 30 days)
<i>estazolam tab 1 mg</i>	2	DL
<i>estazolam tab 2 mg</i>	2	DL
<i>flurazepam hcl cap 15 mg</i>	2	DL
<i>flurazepam hcl cap 30 mg</i>	2	DL
HETLIOZ CAP 20MG	5	NM, LA, PA; DL
<i>ramelteon tab 8 mg</i>	3	QL (30 tabs / 30 days)
<i>tasimelteon capsule 20 mg</i>	5	NM, PA; DL
<i>temazepam cap 7.5 mg</i>	2	DL
<i>temazepam cap 15 mg</i>	2	DL
<i>temazepam cap 22.5 mg</i>	2	DL
<i>temazepam cap 30 mg</i>	2	DL
<i>triazolam tab 0.25 mg</i>	2	DL
<i>triazolam tab 0.125 mg</i>	2	DL
<i>zaleplon cap 5 mg</i>	3	QL (30 caps / 30 days); DL

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Drug Name	Drug Tier	Requirements/Limits
<i>zaleplon cap 10 mg</i>	3	QL (30 caps / 30 days); DL
<i>zolpidem tartrate tab 5 mg</i>	2	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab 10 mg</i>	2	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab er 6.25 mg</i>	2	QL (30 tabs / 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	2	QL (30 tabs / 30 days)

MIGRAINE

<i>AIMOVIG INJ 70MG/ML</i>	3	NM, PA
<i>AIMOVIG INJ 140MG/ML</i>	3	NM, PA
<i>AJOVY INJ 225/1.5</i>	3	NM, PA
<i>almotriptan malate tab 6.25 mg</i>	3	QL (12 tabs / 30 days)
<i>almotriptan malate tab 12.5 mg</i>	3	QL (8 tabs / 30 days)
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	5	QL (24 ampules / 30 days); DL
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	5	DL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	2	QL (8 tabs / 30 days)
<i>EMGALITY INJ 100MG/ML</i>	3	NM, PA
<i>EMGALITY INJ 120MG/ML</i>	3	NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	QL (43 tabs / 30 days)
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	3	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	2	QL (18 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	2	QL (9 tabs / 30 days)
<i>NURTEC TAB 75MG ODT</i>	3	QL (16 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	4	QL (12 units / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	4	QL (12 units / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	4	QL (8 vials / 30 days)
<i>sumatriptan succinate solution auto- injector 4 mg/0.5ml</i>	4	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto- injector 6 mg/0.5ml</i>	4	QL (8 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	2	QL (18 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate tab 50 mg</i>	2	QL (18 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	2	QL (9 tabs / 30 days)
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	3	QL (9 tabs / 30 days)
UBRELVY TAB 50MG	3	QL (16 tabs / 30 days)
UBRELVY TAB 100MG	3	QL (16 tabs / 30 days)
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	4	QL (12 units / 30 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	4	QL (12 units / 30 days)
<i>zolmitriptan odt tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan odt tab 5 mg</i>	2	QL (8 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	2	QL (8 tabs / 30 days)

MISCELLANEOUS

AUSTEDO TAB 6MG	5	NM, LA, PA; DL
AUSTEDO TAB 9MG	5	NM, LA, PA; DL
AUSTEDO TAB 12MG	5	NM, LA, PA; DL
AUSTEDO XR TAB 6MG	5	NM, PA; DL
AUSTEDO XR TAB 12MG	5	NM, PA; DL
AUSTEDO XR TAB 24MG	5	NM, PA; DL
AUSTEDO XR TAB TITR KIT	5	NM, PA; DL
ENSPRYNG INJ	5	NM, LA, PA; DL
EVRYSDI SOL	5	QL (240 mL / 30 days), NM, LA, PA; DL
EXSERVAN MIS 50MG	5	NM, LA; DL
FIRDAPSE TAB 10MG	5	NM, LA, PA; DL
HORIZANT TAB 300MG ER	4	
HORIZANT TAB 600MG ER	4	
INGREZZA CAP 40-80MG	5	NM, LA, PA; DL
INGREZZA CAP 40MG	5	NM, LA, PA; DL
INGREZZA CAP 60MG	5	NM, LA, PA; DL
INGREZZA CAP 80MG	5	NM, LA, PA; DL
<i>lithium carbonate cap 150 mg</i>	2	
<i>lithium carbonate cap 300 mg</i>	2	
<i>lithium carbonate cap 600 mg</i>	2	
<i>lithium carbonate tab 300 mg</i>	2	
<i>lithium carbonate tab er 300 mg</i>	2	
<i>lithium carbonate tab er 450 mg</i>	2	
LITHIUM SOL 8MEQ/5ML	3	
NUDEXTA CAP 20-10MG	3	PA; DL
<i>pyridostigmine bromide tab 60 mg</i>	2	
<i>pyridostigmine bromide tab er 180 mg</i>	3	
<i>riluzole tab 50 mg</i>	4	
TEGSEDI INJ 284/1.5	5	NM, LA, PA; DL
<i>tetrabenazine tab 12.5 mg</i>	4	NM, PA
<i>tetrabenazine tab 25 mg</i>	4	NM, PA

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Drug Name	Drug Tier	Requirements/Limits
ZURZUVAE CAP 20MG	5	NM, LA; DL
ZURZUVAE CAP 25MG	5	NM, LA; DL
ZURZUVAE CAP 30MG	5	NM, LA; DL

MULTIPLE SCLEROSIS AGENTS

AUBAGIO TAB 7MG	5	QL (30 tabs / 30 days), NM, LA; DL
AUBAGIO TAB 14MG	5	QL (30 tabs / 30 days), NM, LA; DL
AVONEX PEN KIT 30MCG	5	NM; DL
AVONEX PREFL KIT 30MCG	5	NM; DL
BAFIERTAM CAP 95MG	5	NM, LA; DL
BETASERON INJ 0.3MG	5	NM; DL
<i>dalfampridine tab er 12hr 10 mg</i>	3	QL (60 tabs / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	5	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 240 mg</i>	5	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	5	NM; DL
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	5	QL (30 caps / 30 days), NM; DL
GILENYA CAP 0.5MG	5	QL (30 caps / 30 days), NM; DL
GILENYA CAP 0.25MG	5	QL (30 caps / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	5	QL (30 syringes / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	5	NM; DL
<i>glatopa</i>	5	NM; DL; (40MG/ML)
<i>glatopa</i>	5	QL (30 mL / 30 days), NM; DL; (20MG/ML)
KESIMPTA INJ 20/.4ML	5	NM, LA; DL
MAYZENT STARTER PACK (7)	4	NM, LA
MAYZENT STARTER PACK (12)	5	NM, LA; DL
MAYZENT TAB 0.25MG	5	NM, LA; DL
MAYZENT TAB 1MG	5	NM, LA; DL
MAYZENT TAB 2MG	5	NM, LA; DL
PLEGRIDY INJ	5	NM, LA; DL
PLEGRIDY INJ PEN	5	NM, LA; DL
REBIF INJ 22/0.5	5	NM; DL
REBIF INJ 44/0.5	5	NM; DL
REBIF REBIDO INJ 22/0.5	5	NM; DL
REBIF REBIDO INJ 44/0.5	5	NM; DL
REBIF REBIDO INJ TITRATN	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
REBIF TITRTN INJ PACK	5	NM; DL
<i>teriflunomide tab 7 mg</i>	5	QL (30 tabs / 30 days), NM; DL
<i>teriflunomide tab 14 mg</i>	5	QL (30 tabs / 30 days), NM; DL
TYSABRI INJ 300/15ML	5	NM, LA; DL
VUMERITY CAP 231MG	5	NM, LA; DL
VUMERITY STARTER	5	LA; DL

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen tab 10 mg</i>	2	
<i>baclofen tab 20 mg</i>	2	
<i>cyclobenzaprine hcl tab 5 mg</i>	3	
<i>cyclobenzaprine hcl tab 10 mg</i>	3	
<i>metaxalone tab 800 mg</i>	3	DL
<i>methocarbamol tab 500 mg</i>	3	DL
<i>methocarbamol tab 750 mg</i>	3	DL
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	2	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	2	

NARCOLEPSY/CATAPLEXY

<i>armodafinil tab 50 mg</i>	4	QL (60 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	4	QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	4	QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	4	QL (30 tabs / 30 days), PA
<i>modafinil tab 100 mg</i>	3	QL (30 tabs / 30 days), PA
<i>modafinil tab 200 mg</i>	3	QL (60 tabs / 30 days), PA
SOD OXYBATE SOL 500MG/ML	5	QL (540 mL / 30 days), NM, LA, PA; DL
WAKIX TAB 4.45MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
WAKIX TAB 17.8MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
XYREM SOL 500MG/ML	5	QL (540 mL / 30 days), NM, LA, PA; DL

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	3	
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	2	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	2	
<i>buprenorphine hcl-naloxone hcl sl film 2- 0.5 mg (base equiv)</i>	3	QL (90 films / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	2	
<i>disulfiram tab 250 mg</i>	2	
<i>disulfiram tab 500 mg</i>	2	
KLOXXADO SPR 8MG	4	DL
<i>naloxone hcl inj 0.4 mg/ml</i>	2	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	2	DL
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	2	DL
<i>naltrexone hcl tab 50 mg</i>	2	
NICOTROL INH	4	
NICOTROL NS SPR 10MG/ML	4	
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	4	
<i>varenicline tartrate tab 1 mg (base equiv)</i>	4	
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	4	
VIVITROL INJ 380MG	5	NM; DL
ZIMHI SOL	4	DL

ENDOCRINE AND METABOLIC

ANDROGENS

ANDROGEL GEL 1.62%	4	
<i>depo-testost inj 100mg/ml</i>	2	
<i>depo-testost inj 200mg/ml</i>	2	
METHITEST TAB 10MG	4	
<i>methyltestosterone cap 10 mg</i>	4	
<i>oxandrolone tab 2.5 mg</i>	2	QL (120 tabs / 30 days)
<i>oxandrolone tab 10 mg</i>	3	
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	2	
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	2	
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	2	
<i>testosterone td gel 10mg/act (2%)</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone td gel 12.5 mg/act (1%)</i>	3	
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	3	
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	3	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	3	
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	3	
<i>testosterone td gel 50 mg/5gm (1%)</i>	3	
<i>testosterone td soln 30 mg/act</i>	3	

ANTIDIABETICS

<i>acarbose tab 25 mg</i>	2	
<i>acarbose tab 50 mg</i>	2	
<i>acarbose tab 100 mg</i>	2	
BYDUREON BC INJ 2/0.85ML	3	QL (4 pens / 28 days), PA
BYETTA INJ 5MCG	4	QL (1 pen / 30 days), PA
BYETTA INJ 10MCG	4	QL (1 pen / 30 days), PA
FARXIGA TAB 5MG	3	QL (30 tabs / 30 days)
FARXIGA TAB 10MG	3	QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	1	QL (240 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	1	QL (120 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	1	QL (60 tabs / 30 days)
<i>glip/metform tab 2.5-250m</i>	2	QL (240 tabs / 30 days)
<i>glip/metform tab 2.5-500m</i>	2	QL (120 tabs / 30 days)
<i>glip/metform tab 5-500mg</i>	2	QL (120 tabs / 30 days)
<i>glipizide tab 5 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	1	QL (60 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
INVOKAMET TAB 50-500MG	4	QL (60 tabs / 30 days)
INVOKAMET TAB 50-1000	4	QL (60 tabs / 30 days)
INVOKAMET TAB 150-500	4	QL (60 tabs / 30 days)
INVOKAMET TAB 150-1000	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-500MG	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-1000	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-500	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-1000	4	QL (60 tabs / 30 days)
INVOKANA TAB 100MG	4	QL (60 tabs / 30 days)
INVOKANA TAB 300MG	4	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	3	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	3	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	3	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	3	QL (30 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	3	QL (30 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	1	QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	1	QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	1	QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	1	QL (120 tabs / 30 days)
<i>metformin hcl tab er 24hr 750 mg</i>	1	QL (60 tabs / 30 days)
<i>miglitol tab 25 mg</i>	2	
<i>miglitol tab 50 mg</i>	2	
<i>miglitol tab 100 mg</i>	2	
MOUNJARO INJ 2.5/0.5	3	QL (4 pens / 28 days), PA
MOUNJARO INJ 5MG/0.5	3	QL (4 pens / 28 days), PA
MOUNJARO INJ 7.5/0.5	3	QL (4 pens / 28 days), PA
MOUNJARO INJ 10MG/0.5	3	QL (4 pens / 28 days), PA
MOUNJARO INJ 12.5/0.5	3	QL (4 pens / 28 days), PA
MOUNJARO INJ 15MG/0.5	3	QL (4 pens / 28 days), PA
<i>nateglinide tab 60 mg</i>	2	
<i>nateglinide tab 120 mg</i>	2	
OZEMPIC INJ 2MG/3ML	3	QL (1 pen / 28 days), PA
OZEMPIC INJ 4MG/3ML	3	QL (1 pen / 28 days), PA
OZEMPIC INJ 8MG/3ML	3	QL (1 pen / 28 days), PA
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	2	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	2	QL (90 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	2	
<i>repaglinide tab 1 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>repaglinide tab 2 mg</i>	2	
RYBELSUS TAB 3MG	3	QL (30 tabs / 30 days), PA
RYBELSUS TAB 7MG	3	QL (30 tabs / 30 days), PA
RYBELSUS TAB 14MG	3	QL (30 tabs / 30 days), PA
SYMLINPEN 60 INJ 1000MCG	4	
SYMLINPEN 120 INJ 1000MCG	4	
SYNJARDY TAB 5-500MG	3	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	3	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	3	QL (30 tabs / 30 days)
TRULICITY INJ 0.75/0.5	3	QL (4 pens / 28 days), PA
TRULICITY INJ 1.5/0.5	3	QL (4 pens / 28 days), PA
TRULICITY INJ 3/0.5	3	QL (4 pens / 28 days), PA
TRULICITY INJ 4.5/0.5	3	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)
ANTIDIABETICS, INSULINS		
BASAGLAR INJ 100UNIT	3	
BD SWAB REG PAD SNGL USE	3	
GAUZE PADS & DRESSINGS - PADS 2 X 2	3	
HUMALOG INJ 100/ML	3	
HUMALOG JR INJ 100/ML	3	
HUMALOG KWIK INJ 100/ML	3	
HUMALOG KWIK INJ 200/ML	3	
HUMALOG MIX INJ 50/50	3	

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Drug Name	Drug Tier	Requirements/Limits
HUMALOG MIX INJ 50/50KWP	3	
HUMALOG MIX INJ 75/25KWP	3	
HUMALOG MIX SUS 75/25	3	
HUMULIN INJ 70/30	3	
HUMULIN INJ 70/30KWP	3	
HUMULIN N INJ U-100	3	
HUMULIN N INJ U-100KWP	3	
HUMULIN R INJ U-100	3	
HUMULIN R INJ U-500	3	
INSULIN LISP INJ 100/ML	3	
INSULIN LISP INJ JUNIOR	3	
INSULIN LISP INJ PROTAMIN	3	
INSULIN PEN NEEDLE	3	
INSULIN SYRINGE (DISP) U-100 0.3 ML	3	
INSULIN SYRINGE (DISP) U-100 1 ML	3	
INSULIN SYRINGE (DISP) U-100 1/2 ML	3	
ISOPROPYL ALCOHOL 0.7 ML/ML	3	
LANTUS INJ 100/ML	3	
LANTUS SOLOS INJ 100/ML	3	
LEVEMIR INJ	3	
LEVEMIR INJ FLEXPEN	3	
LYUMJEV INJ 100UT/ML	3	
LYUMJEV KWPN INJ 100UT/ML	3	
LYUMJEV KWPN INJ 200UT/ML	3	
NEEDLES, INSULIN DISP., SAFETY	3	
OMNIPOD 5 G6 KIT INTRO	4	QL (1 kit / 365 days)
OMNIPOD 5 G6 MIS PODS	4	QL (10 pods / 30 days)
OMNIPOD DASH MIS PODS	4	QL (10 pods / 30 days)
OMNIPOD MIS CLASSIC	4	QL (10 pods / 30 days)
OMNIPOD PDM KIT CLASSIC	4	QL (1 kit / 365 days)
TOUJEO MAX INJ 300/ML	3	
TOUJEO SOLO INJ 300/ML	3	
TRESIBA FLEX INJ 100UNIT	3	
TRESIBA FLEX INJ 200UNIT	3	
TRESIBA INJ 100UNIT	3	
V-GO 20 KIT	4	QL (30 devices (1 box) / 30 days)
V-GO 30 KIT	4	QL (30 devices (1 box) / 30 days)
V-GO 40 KIT	4	QL (30 devices (1 box) / 30 days)
XULTOPHY INJ 100/3.6	3	
CALCIUM REGULATORS		
<i>alendronate sodium oral soln 70 mg/75ml</i>	2	
<i>alendronate sodium tab 10 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	
FORTEO INJ 600/2.4	5	QL (2.4 mL / 28 days), NM, PA; DL
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	4	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	2	
NATPARA INJ 25MCG	5	LA, PA; DL
NATPARA INJ 50MCG	5	LA, PA; DL
NATPARA INJ 75MCG	5	LA, PA; DL
NATPARA INJ 100MCG	5	LA, PA; DL
<i>pamidronate disodium iv soln 3 mg/ml</i>	2	
<i>pamidronate disodium iv soln 9 mg/ml</i>	2	
PROLIA INJ 60MG/ML	4	QL (2 injections / year), NM
<i>risedronate sodium tab 5 mg</i>	2	
<i>risedronate sodium tab 30 mg</i>	2	
<i>risedronate sodium tab 35 mg</i>	2	
<i>risedronate sodium tab 150 mg</i>	2	
<i>risedronate sodium tab delayed release 35 mg</i>	2	
<i>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml</i>	5	QL (2.4 mL / 28 days), NM, PA; DL
TERIPARATIDE INJ 620/2.48	5	QL (2.48 mL / 28 days), NM, PA; DL
XGEVA INJ	5	NM, PA; DL
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	NM
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	NM
CHELATING AGENTS		
CHEMET CAP 100MG	5	DL
<i>deferasirox granules packet 90 mg</i>	5	NM; DL
<i>deferasirox granules packet 180 mg</i>	5	NM; DL
<i>deferasirox granules packet 360 mg</i>	5	NM; DL
<i>deferasirox tab 90 mg</i>	4	NM; DL
<i>deferasirox tab 180 mg</i>	5	NM; DL
<i>deferasirox tab 360 mg</i>	5	NM; DL
<i>deferasirox tab for oral susp 125 mg</i>	4	NM
<i>deferasirox tab for oral susp 250 mg</i>	5	NM; DL
<i>deferasirox tab for oral susp 500 mg</i>	5	NM; DL
<i>deferiprone tab 500 mg</i>	5	NM, LA; DL
<i>deferiprone tab 1000 mg</i>	5	NM, LA; DL
DEPEN TITRA TAB 250MG	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
<i>penicillamine tab 250 mg</i>	5	NM; DL
<i>sodium polystyrene sulfonate powder</i>	2	
<i>sps</i>	2	
<i>trientine hcl cap 250 mg</i>	5	NM, PA; DL
VELTASSA POW 8.4GM	3	
VELTASSA POW 16.8GM	3	
VELTASSA POW 25.2GM	3	

CONTRACEPTIVES

<i>altavera</i>	2	
<i>alyacen 1/35</i>	2	
<i>amethia</i>	2	
<i>apri</i>	2	
<i>aranelle</i>	2	
<i>ashlyna</i>	2	
<i>aubra eq</i>	2	
<i>aviane</i>	2	
BALCOLTRA TAB 0.1-20	3	
<i>balziva</i>	2	
<i>blisovi 24 fe</i>	2	
<i>blisovi fe 1.5/30</i>	2	
<i>briellyn</i>	2	
<i>camila</i>	2	
<i>camrese lo</i>	3	
<i>cryselle-28</i>	2	
<i>cyred eq tab</i>	2	
<i>deblitane</i>	2	
<i>delyla</i>	2	
DEPO-SQ PROV INJ 104	4	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>dolishale</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	2	
<i>eluryng mis</i>	2	
<i>enilloring mis</i>	2	
<i>enpresse-28</i>	2	
<i>enskyce</i>	2	
<i>errin</i>	2	
<i>estarylla tab 0.25-35</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	2	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	2	
<i>falmina</i>	2	
<i>gemmily</i>	2	
<i>hailey 24 tab fe</i>	2	
<i>iclevia</i>	2	
<i>incassia tab 0.35mg</i>	2	
<i>introvale</i>	2	
<i>isibloom</i>	2	
<i>jasmiel</i>	2	
<i>joyeaux tab 0.1-20</i>	3	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	2	
<i>junel 1/20</i>	2	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	
<i>junel fe 24</i>	2	
<i>kaitlib fe</i>	2	
<i>kariva</i>	2	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	2	
<i>kurvelo</i>	2	
<i>larin 1.5/30</i>	2	
<i>larin 1/20</i>	2	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	2	
<i>leena</i>	3	
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levora 0.15/30-28</i>	2	
<i>loestrin 21 tab 1.5/30</i>	2	
<i>loestrin fe tab 1.5/30</i>	2	
<i>loestrin fe tab 1/20</i>	2	
<i>loestrin tab 1/20-21</i>	2	
<i>loryna</i>	2	
<i>low-ogestrel</i>	2	
<i>lutra</i>	2	
<i>lyleq</i>	2	
<i>lyza</i>	2	
<i>marlissa</i>	2	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	2	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	2	
<i>merzee</i>	2	
<i>microgestin 1.5/30</i>	3	
<i>microgestin 1/20</i>	3	
<i>microgestin 24 fe</i>	3	
<i>microgestin fe 1.5/30</i>	3	
<i>microgestin fe 1/20</i>	3	
<i>mili tab 0.25/35</i>	2	
<i>necon 0.5/35-28</i>	3	
NEXTSTELLIS TAB 3-14.2MG	3	
<i>nikki</i>	2	
<i>nora-be</i>	3	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	2	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	2	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	2	
<i>norethindrone ace-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	2	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>norethindrone tab 0.35 mg</i>	2	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>norlyroc</i>	2	
<i>nortrel 0.5/35 (28)</i>	2	
<i>nortrel 1/35</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>nortrel 7/7/7</i>	2	
<i>nylia 1/35</i>	2	
<i>nylia 7/7/7</i>	2	
<i>nymyo</i>	2	
<i>ocella tab 3-0.03mg</i>	2	
<i>pimtrea</i>	2	
<i>portia-28</i>	2	
<i>reclipsen</i>	2	
<i>setlakin</i>	2	
<i>sharobel</i>	2	
<i>SLYND TAB 4MG</i>	3	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda tab 3-0.03mg</i>	2	
<i>tarina 24 fe</i>	2	
<i>tarina fe 1/20 eq</i>	2	
<i>taysofy cap 1/20</i>	2	
<i>tilia fe</i>	2	
<i>tri-estaryll tab</i>	2	
<i>tri-legest fe</i>	2	
<i>tri-mili tab</i>	2	
<i>tri-nymyo</i>	2	
<i>tri-sprintec</i>	2	
<i>tri-vylibra tab</i>	2	
<i>trivora-28</i>	2	
<i>turqoz tab</i>	2	
<i>TYBLUME CHW 0.1-0.02</i>	3	
<i>tydemy</i>	2	
<i>velivet</i>	2	
<i>vestura</i>	2	
<i>vienva</i>	2	
<i>vyfemla</i>	2	
<i>vylibra tab 0.25-35</i>	2	
<i>wymzya fe</i>	2	
<i>xulane</i>	2	
<i>zafemy</i>	2	
<i>zovia 1/35</i>	2	
ENDOMETRIOSIS		
<i>danazol cap 50 mg</i>	2	
<i>danazol cap 100 mg</i>	2	
<i>danazol cap 200 mg</i>	2	
<i>SYNAREL SOL 2MG/ML</i>	3	
ESTROGENS		
<i>amabelz</i>	2	

Drug Name	Drug Tier	Requirements/Limits
BIJUVA CAP 0.5-100	3	
BIJUVA CAP 1-100MG	3	
<i>dotti</i>	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	2	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	2	
<i>estradiol tab 0.5 mg</i>	3	
<i>estradiol tab 1 mg</i>	3	
<i>estradiol tab 2 mg</i>	3	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	2	
<i>estradiol vaginal tab 10 mcg</i>	2	
<i>estradiol valerate im in oil 10 mg/ml</i>	3	
<i>estradiol valerate im in oil 20 mg/ml</i>	3	
<i>estropipate tab 1.5 mg</i>	2	
<i>estropipate tab 3 mg</i>	2	
<i>fyavolv</i>	2	
<i>jinteli tab 1mg-5mcg</i>	2	
<i>lyllana</i>	3	
<i>mimvey tab 1-0.5mg</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	2	
PREMARIN INJ 25MG	4	
PREMARIN TAB 0.3MG	3	
PREMARIN TAB 0.9MG	3	
PREMARIN TAB 0.45MG	3	
PREMARIN TAB 0.625MG	3	

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Drug Name	Drug Tier	Requirements/Limits
PREMARIN TAB 1.25MG	3	
PREMARIN VAG CRE 0.625MG	3	
PREMPRO TAB 0.3-1.5	3	
PREMPRO TAB 0.45-1.5	3	
PREMPRO TAB 0.625-2.5	3	
PREMPRO TAB 0.625-5	3	
yuvaferm	2	
GLUCOCORTICOIDS		
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	2	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	2	
<i>dexamethasone soln 0.5 mg/5ml</i>	2	
<i>dexamethasone tab 0.5 mg</i>	2	
<i>dexamethasone tab 0.75 mg</i>	2	
<i>dexamethasone tab 1 mg</i>	2	
<i>dexamethasone tab 1.5 mg</i>	2	
<i>dexamethasone tab 2 mg</i>	2	
<i>dexamethasone tab 4 mg</i>	2	
<i>dexamethasone tab 6 mg</i>	2	
<i>fludrocortisone acetate tab 0.1 mg</i>	2	
<i>hydrocortisone tab 5 mg</i>	2	
<i>hydrocortisone tab 10 mg</i>	2	
<i>hydrocortisone tab 20 mg</i>	2	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	2	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	2	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	2	
<i>methylprednisolone tab 4 mg</i>	2	
<i>methylprednisolone tab 8 mg</i>	2	
<i>methylprednisolone tab 16 mg</i>	2	
<i>methylprednisolone tab 32 mg</i>	2	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	2	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	2	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone soln 15 mg/5ml</i>	2	
<i>prednisolone tab 5 mg</i>	4	
PREDNISON CON 5MG/ML	3	
<i>prednisone oral soln 5 mg/5ml</i>	2	
<i>prednisone tab 1 mg</i>	2	
<i>prednisone tab 2.5 mg</i>	2	
<i>prednisone tab 5 mg</i>	2	
<i>prednisone tab 10 mg</i>	2	
<i>prednisone tab 20 mg</i>	2	
<i>prednisone tab 50 mg</i>	2	
SOLU-CORTEF INJ 100MG	3	
SOLU-CORTEF INJ 250MG	3	
SOLU-CORTEF INJ 500MG	3	
SOLU-CORTEF INJ 1000MG	3	
SOLU-MEDROL INJ 2GM	3	
SOLU-MEDROL INJ 40MG	3	
SOLU-MEDROL INJ 125MG	3	
SOLU-MEDROL INJ 500MG	3	
SOLU-MEDROL INJ 1000MG	3	
GLUCOSE ELEVATING AGENTS		
BAQSIMI ONE POW 3MG/DOSE	3	
<i>diazoxide susp 50 mg/ml</i>	3	
<i>glucagon (rdna) for inj kit 1 mg</i>	3	
GLUCAGON KIT 1MG	3	
GVOKE HYPO 2 INJ 1MG/.2ML	3	
GVOKE HYPO 2 INJ .5/.1ML	3	
GVOKE PFS INJ	3	
MISCELLANEOUS		
ACTHAR INJ 80UNIT	5	NM, LA, PA; DL
<i>betaine powder for oral solution</i>	4	NM, LA
<i>cabergoline tab 0.5 mg</i>	2	
<i>carglumic acid soluble tab 200 mg</i>	5	NM, LA; DL
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	3	B/D, NM
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	3	B/D, NM
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	3	B/D, NM
CORTROPHIN GEL 80UNIT	5	NM, LA, PA; DL
CYSTAGON CAP 50MG	3	NM, LA
CYSTAGON CAP 150MG	3	NM, LA
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	2	
<i>desmopressin acetate tab 0.2 mg</i>	2	
DOJOLVI LIQ 100%	5	NM, LA; DL

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Drug Name	Drug Tier	Requirements/Limits
EGRIFTA SV INJ 2MG	5	NM, LA, PA; DL
ENDARI POW 5GM	5	NM, LA; DL
GALAFOLD CAP 123MG	5	NM, LA, PA; DL
HUMATROPE INJ 6MG	5	NM, PA; DL
HUMATROPE INJ 12MG	5	NM, PA; DL
HUMATROPE INJ 24MG	5	NM, PA; DL
INCRELEX INJ 40MG/4ML	5	NM, LA; DL
ISTURISA TAB 1MG	5	NM, LA; DL
ISTURISA TAB 5MG	5	NM, LA; DL
JYNARQUE PAK 15MG	5	NM, LA, PA; DL
JYNARQUE PAK 30-15MG	5	NM, LA, PA; DL
JYNARQUE PAK 45-15MG	5	NM, LA, PA; DL
JYNARQUE PAK 60-30MG	5	NM, LA, PA; DL
JYNARQUE PAK 90-30MG	5	NM, LA, PA; DL
JYNARQUE TAB 15MG	5	NM, LA, PA; DL
JYNARQUE TAB 30MG	5	NM, LA, PA; DL
KORLYM TAB 300MG	5	QL (120 tabs / 30 days), NM, LA, PA; DL
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	3	
<i>levocarnitine tab 330 mg</i>	3	
LUPR DEP-PED INJ 7.5MG	5	NM; DL
LUPR DEP-PED INJ 11.25MG	5	NM; DL
LUPR DEP-PED INJ 15MG	5	NM; DL
LUPRON DEPOT INJ 45MG	5	NM; DL
<i>miglustat cap 100 mg</i>	5	NM, PA; DL
MYALEPT INJ 11.3MG	5	NM, LA, PA; DL
MYCAPSSA CAP 20MG	5	NM, LA; DL
<i>nitisinone cap 2 mg</i>	5	NM; DL
<i>nitisinone cap 5 mg</i>	5	NM; DL
<i>nitisinone cap 10 mg</i>	5	NM; DL
<i>nitisinone cap 20 mg</i>	5	NM; DL
NORDITROPIN INJ 5/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 10/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 15/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 30/3ML	5	NM, PA; DL
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	NM; DL
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	NM; DL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	NM; DL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	5	NM; DL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
ORFADIN CAP 20MG	5	NM, LA; DL
ORFADIN SUS 4MG/ML	5	NM, LA; DL
ORIAHNN CAP	5	DL
PROCYSBI GRA 75MG	5	NM, LA; DL
PROCYSBI GRA 300MG	5	NM, LA; DL
<i>raloxifene hcl tab 60 mg</i>	3	
RAVICTI LIQ 1.1GM/ML	5	NM, LA; DL
SANDOSTATIN KIT LAR 10MG	5	NM; DL
SANDOSTATIN KIT LAR 20MG	5	NM; DL
SANDOSTATIN KIT LAR 30MG	5	NM; DL
<i>sapropterin dihydrochloride powder packet 100 mg</i>	5	NM, PA; DL
<i>sapropterin dihydrochloride powder packet 500 mg</i>	5	NM, PA; DL
<i>sapropterin dihydrochloride tab 100 mg</i>	5	NM, PA; DL
SIGNIFOR INJ 0.3MG/ML	5	NM, LA; DL
SIGNIFOR INJ 0.6MG/ML	5	NM, LA; DL
SIGNIFOR INJ 0.9MG/ML	5	NM, LA; DL
SIGNIFOR LAR INJ 20MG	5	NM, LA; DL
SIGNIFOR LAR INJ 40MG	5	NM, LA; DL
SIGNIFOR LAR INJ 60MG	5	NM, LA; DL
SOMAVERT INJ 10MG	5	NM, LA; DL
SOMAVERT INJ 15MG	5	NM, LA; DL
SOMAVERT INJ 20MG	5	NM, LA; DL
SOMAVERT INJ 25MG	5	NM, LA; DL
SOMAVERT INJ 30MG	5	NM, LA; DL
<i>tolvaptan tab 15 mg</i>	5	NM, PA; DL
<i>tolvaptan tab 30 mg</i>	5	NM, PA; DL
VIJOICE TAB 50MG	5	NM, LA, PA; DL
VIJOICE TAB 125MG	5	NM, LA, PA; DL
VIJOICE TAB 250MG	5	NM, LA, PA; DL

PHOSPHATE BINDER AGENTS

AURYXIA TAB 210MG	5	PA; DL
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	2	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	2	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	3	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	3	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	3	
<i>sevelamer carbonate packet 0.8 gm</i>	3	
<i>sevelamer carbonate packet 2.4 gm</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>sevelamer carbonate tab 800 mg</i>	3	
<i>sevelamer hcl tab 400 mg</i>	3	
<i>sevelamer hcl tab 800 mg</i>	3	
PROGESTINS		
<i>medroxyprogesterone acetate tab 2.5 mg</i>	2	
<i>medroxyprogesterone acetate tab 5 mg</i>	2	
<i>medroxyprogesterone acetate tab 10 mg</i>	2	
<i>megestrol acetate susp 40 mg/ml</i>	2	PA; DL
<i>megestrol acetate susp 625 mg/5ml</i>	4	PA; DL
<i>norethindrone acetate tab 5 mg</i>	2	
<i>progesterone cap 100 mg</i>	2	
<i>progesterone cap 200 mg</i>	2	
THYROID AGENTS		
ARMOUR THYRO TAB 15MG	3	
ARMOUR THYRO TAB 30MG	3	
ARMOUR THYRO TAB 60MG	3	
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	
<i>euthyrox</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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl</i>	3	
<i>liothyronine sodium iv soln 10 mcg/ml</i>	2	
<i>liothyronine sodium tab 5 mcg</i>	2	
<i>liothyronine sodium tab 25 mcg</i>	2	
<i>liothyronine sodium tab 50 mcg</i>	2	
<i>methimazole tab 5 mg</i>	2	
<i>methimazole tab 10 mg</i>	2	
<i>np thyroid 15</i>	1	
<i>np thyroid 30</i>	1	
<i>np thyroid 60</i>	1	
<i>np thyroid 90</i>	1	
<i>np thyroid 120</i>	1	
<i>propylthiouracil tab 50 mg</i>	2	
SYNTHROID TAB 25MCG	3	
SYNTHROID TAB 50MCG	3	
SYNTHROID TAB 75MCG	3	
SYNTHROID TAB 88MCG	3	
SYNTHROID TAB 100MCG	3	
SYNTHROID TAB 112MCG	3	
SYNTHROID TAB 125MCG	3	
SYNTHROID TAB 137MCG	3	
SYNTHROID TAB 150MCG	3	
SYNTHROID TAB 175MCG	3	
SYNTHROID TAB 200MCG	3	
SYNTHROID TAB 300MCG	3	
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	
TIROSINT-SOL SOL 13MCG/ML	3	
TIROSINT-SOL SOL 25MCG/ML	3	
TIROSINT-SOL SOL 37.5/ML	3	

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Drug Name	Drug Tier	Requirements/Limits
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>	3	

VITAMIN D ANALOGS

<i>calcitriol cap 0.5 mcg</i>	2	
<i>calcitriol cap 0.25 mcg</i>	2	
<i>calcitriol inj 1 mcg/ml</i>	2	
<i>calcitriol oral soln 1 mcg/ml</i>	2	
<i>doxercalciferol cap 0.5 mcg</i>	4	
<i>doxercalciferol cap 1 mcg</i>	4	
<i>doxercalciferol cap 2.5 mcg</i>	4	
<i>paricalcitol cap 1 mcg</i>	4	
<i>paricalcitol cap 2 mcg</i>	4	
<i>paricalcitol cap 4 mcg</i>	4	
<i>paricalcitol iv soln 2 mcg/ml</i>	4	
RAYALDEE CAP 30MCG	5	DL

GASTROINTESTINAL

ANTIEMETICS

<i>aprepitant capsule 40 mg</i>	3	B/D, QL (1 cap / 30 days); DL
<i>aprepitant capsule 80 mg</i>	3	B/D, QL (8 caps / 30 days); DL
<i>aprepitant capsule 125 mg</i>	3	B/D, QL (2 caps / 30 days); DL
<i>aprepitant pak 80 & 125</i>	3	B/D, QL (6 caps / 30 days); DL
<i>compro</i>	2	
<i>dronabinol cap 2.5 mg</i>	3	QL (60 caps / 30 days), PA
<i>dronabinol cap 5 mg</i>	3	QL (60 caps / 30 days), PA
<i>dronabinol cap 10 mg</i>	3	QL (60 caps / 30 days), PA
<i>granisetron hcl tab 1 mg</i>	2	B/D, QL (30 tabs / 30 days); DL

Drug Name	Drug Tier	Requirements/Limits
<i>meclizine hcl tab 12.5 mg</i>	2	
<i>meclizine hcl tab 25 mg</i>	2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	2	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	2	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	2	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	2	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	2	DL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	3	B/D; DL
<i>ondansetron hcl tab 4 mg</i>	2	B/D; DL
<i>ondansetron hcl tab 8 mg</i>	2	B/D; DL
<i>ondansetron tab 4mg odt</i>	2	B/D; DL
<i>ondansetron tab 8mg odt</i>	2	B/D; DL
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	2	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>promethazine hcl inj 25 mg/ml</i>	2	
<i>promethazine hcl inj 50 mg/ml</i>	2	
<i>promethazine hcl suppos 12.5 mg</i>	2	DL
<i>promethazine hcl suppos 25 mg</i>	2	DL
<i>promethazine hcl syrup 6.25 mg/5ml</i>	2	DL
<i>promethazine hcl tab 12.5 mg</i>	2	DL
<i>promethazine hcl tab 25 mg</i>	2	DL
<i>promethazine hcl tab 50 mg</i>	2	DL
<i>promethegan</i>	2	DL
SANCUSO DIS 3.1MG	4	DL
<i>scopolamine td patch 72hr 1 mg/3days</i>	3	QL (10 patches / 30 days)
VARUBI TAB 90MG	4	B/D, QL (4 tabs / 30 days), NM; DL

ANTISPASMODICS

<i>dicyclomine hcl cap 10 mg</i>	2	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	2	
<i>dicyclomine hcl tab 20 mg</i>	2	
<i>glycopyrrolate inj 0.2 mg/ml</i>	2	
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	2	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	2	
<i>glycopyrrolate tab 1 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>glycopyrrolate tab 2 mg</i>	2	
<i>methscopolamine bromide tab 2.5 mg</i>	2	
<i>methscopolamine bromide tab 5 mg</i>	2	
H2-RECEPTOR ANTAGONISTS		
<i>famotidine for susp 40 mg/5ml</i>	2	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	2	
<i>famotidine preservative free inj 20 mg/2ml</i>	2	
<i>famotidine tab 20 mg</i>	2	
<i>famotidine tab 40 mg</i>	2	
<i>nizatidine cap 150 mg</i>	2	
<i>nizatidine cap 300 mg</i>	2	
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	2	
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium cap 750 mg</i>	2	
<i>budesonide delayed release particles cap 3 mg</i>	4	
<i>budesonide tab er 24hr 9 mg</i>	5	QL (30 tabs / 30 days); DL
<i>hydrocortisone enema 100 mg/60ml</i>	3	
<i>mesalamine cap dr 400 mg</i>	4	
<i>mesalamine cap er 24hr 0.375 gm</i>	3	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine suppos 1000 mg</i>	4	
<i>mesalamine tab delayed release 1.2 gm</i>	4	
<i>mesalamine tab delayed release 800 mg</i>	4	
<i>sulfasalazin tab 500mg dr</i>	2	
<i>sulfasalazine tab 500 mg</i>	2	
LAXATIVES		
<i>constulose</i>	2	
<i>enulose</i>	2	
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>generlac</i>	2	
<i>lactulose solution 10 gm/15ml</i>	2	
MOVIPREP SOL	4	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	
<i>peg-3350/electrolytes/asc</i>	2	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	2	
MISCELLANEOUS		
<i>aloseptron hcl tab 0.5 mg (base equiv)</i>	5	DL
<i>aloseptron hcl tab 1 mg (base equiv)</i>	5	DL

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	4	
<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	2	
GATTEX KIT 5MG	5	NM, LA, PA; DL
HELIDAC MIS THERAPY	4	
LINZESS CAP 72MCG	4	QL (30 caps / 30 days)
LINZESS CAP 145MCG	4	QL (30 caps / 30 days)
LINZESS CAP 290MCG	4	QL (30 caps / 30 days)
<i>loperamide hcl cap 2 mg</i>	2	
<i>lubiprostone cap 8 mcg</i>	3	QL (60 caps / 30 days)
<i>lubiprostone cap 24 mcg</i>	3	QL (60 caps / 30 days)
<i>misoprostol tab 100 mcg</i>	2	
<i>misoprostol tab 200 mcg</i>	2	
MOVANTIK TAB 12.5MG	3	
MOVANTIK TAB 25MG	3	
RELISTOR INJ 8/0.4ML	5	DL
RELISTOR INJ 12/0.6ML	5	DL
SUCRAID SOL 8500/ML	5	NM, LA; DL
<i>sucralfate susp 1 gm/10ml</i>	3	
<i>sucralfate tab 1 gm</i>	2	
SYMPROIC TAB 0.2MG	3	
TALICIA CAP	4	
<i>ursodiol cap 300 mg</i>	3	
<i>ursodiol tab 250 mg</i>	3	
<i>ursodiol tab 500 mg</i>	3	
VOWST CAP	5	QL (12 caps / 30 days), NM, LA, PA; DL
XERMELO TAB 250MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
XIFAXAN TAB 550MG	5	PA; DL
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	3	
CREON CAP 6000UNIT	3	
CREON CAP 12000UNT	3	
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	
ZENPEP CAP 3000UNIT	4	
ZENPEP CAP 5000UNIT	4	
ZENPEP CAP 10000UNT	4	
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	

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Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 25000UNT	4	
ZENPEP CAP 40000UNT	4	
ZENPEP CAP 60000UNT	4	

PROTON PUMP INHIBITORS

<i>dexlansoprazole cap delayed release 30 mg</i>	3	QL (30 caps / 30 days)
<i>dexlansoprazole cap delayed release 60 mg</i>	3	QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	3	QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	3	QL (30 caps / 30 days)
<i>lansoprazole cap delayed release 15 mg</i>	2	QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	2	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	1	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 20 mg</i>	1	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 40 mg</i>	1	QL (60 caps / 30 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
<i>rabeprazole sodium ec tab 20 mg</i>	2	QL (60 tabs / 30 days)

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	2	
<i>dutasteride cap 0.5 mg</i>	2	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	2	
<i>finasteride tab 5 mg</i>	2	
<i>silodosin cap 4 mg</i>	2	
<i>silodosin cap 8 mg</i>	2	
<i>tadalafil tab 2.5 mg</i>	3	QL (30 tabs / 30 days), PA; DL
<i>tadalafil tab 5 mg</i>	3	QL (30 tabs / 30 days), PA; DL
<i>tamsulosin hcl cap 0.4 mg</i>	2	

IMPOTENCE AGENTS

CAVERJECT IM KIT 10MCG	4	ED, QL (6 kits / 30 days)
CAVERJECT INJ 20MCG	4	ED, QL (6 vials / 30 days)
CAVERJECT INJ 40MCG	4	ED, QL (6 vials / 30 days)
CAVERJECT KIT 20MCG	4	ED, QL (6 kits / 30 days)
CIALIS TAB 10MG	4	ED, QL (4 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
CIALIS TAB 20MG	4	ED, QL (4 tabs / 30 days)
EDEX KIT 10MCG	4	ED, QL (6 kits / 30 days)
EDEX KIT 20MCG	4	ED, QL (6 kits / 30 days)
EDEX KIT 40MCG	4	ED, QL (6 kits / 30 days)
LEVITRA TAB 2.5MG	4	ED, QL (4 tabs / 30 days)
LEVITRA TAB 5MG	4	ED, QL (4 tabs / 30 days)
LEVITRA TAB 10MG	4	ED, QL (4 tabs / 30 days)
LEVITRA TAB 20MG	4	ED, QL (4 tabs / 30 days)
MUSE SUP 125MCG	4	ED, QL (6 sup / 30 days)
MUSE SUP 250MCG	4	ED, QL (6 sup / 30 days)
MUSE SUP 500MCG	4	ED, QL (6 sup / 30 days)
MUSE SUP 1000MCG	4	ED, QL (6 sup / 30 days)
<i>sildenafil citrate tab 25 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>sildenafil citrate tab 50 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>sildenafil citrate tab 100 mg</i>	2	ED, QL (4 tabs / 30 days)
STAXYN TAB 10MG	4	ED, QL (4 tabs / 30 days)
STENDRA TAB 50MG	4	ED, QL (4 tabs / 30 days)
STENDRA TAB 100MG	4	ED, QL (4 tabs / 30 days)
STENDRA TAB 200MG	4	ED, QL (4 tabs / 30 days)
<i>tadalafil tab 10 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>tadalafil tab 20 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>vardenafil hcl orally disintegrating tab 10 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>vardenafil hcl tab 2.5 mg</i>	2	ED, QL (4 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>vardenafil hcl tab 5 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>vardenafil hcl tab 10 mg</i>	2	ED, QL (4 tabs / 30 days)
<i>vardenafil hcl tab 20 mg</i>	2	ED, QL (4 tabs / 30 days)
VIAGRA TAB 25MG	4	ED, QL (4 tabs / 30 days)
VIAGRA TAB 50MG	4	ED, QL (4 tabs / 30 days)
VIAGRA TAB 100MG	4	ED, QL (4 tabs / 30 days)

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	2	
<i>bethanechol chloride tab 10 mg</i>	2	
<i>bethanechol chloride tab 25 mg</i>	2	
<i>bethanechol chloride tab 50 mg</i>	2	
ELMIRON CAP 100MG	4	
<i>flavoxate hcl tab 100 mg</i>	2	
<i>potassium citrate tab er 5 meq (540 mg)</i>	3	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	3	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	3	
<i>tiopronin tab 100 mg</i>	5	NM; DL

URINARY ANTISPASMODICS

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	3	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	3	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	4	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	4	
GEMTESA TAB 75MG	4	
MYRBETRIQ TAB 25MG	3	
MYRBETRIQ TAB 50MG	3	
<i>oxybutynin chloride solution 5 mg/5ml</i>	2	
<i>oxybutynin chloride tab 5 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	2	
<i>solifenacin succinate tab 5 mg</i>	3	
<i>solifenacin succinate tab 10 mg</i>	3	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	3	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	3	
<i>tolterodine tartrate tab 1 mg</i>	2	
<i>tolterodine tartrate tab 2 mg</i>	2	
<i>trospium chloride cap er 24hr 60 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>trosipium chloride tab 20 mg</i>	2	

VAGINAL ANTI-INFECTIVES

CLEOCIN SUP 100MG	4	
<i>clindamycin phosphate vaginal cream 2%</i>	2	
<i>metronidazole vaginal gel 0.75%</i>	2	
<i>terconazole vaginal cream 0.4%</i>	2	
<i>terconazole vaginal cream 0.8%</i>	2	
<i>terconazole vaginal suppos 80 mg</i>	2	
VANDAZOLE GEL 0.75%	3	

HEMATOLOGIC

ANTICOAGULANTS

<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	5	DL
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	4	
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	4	
ELIQUIS ST P TAB 5MG	3	
ELIQUIS TAB 2.5MG	3	
ELIQUIS TAB 5MG	3	
<i>enoxaparin sodium inj 300 mg/3ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	4	DL
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	4	DL
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	5	DL
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	5	DL
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	5	DL
FRAGMIN INJ 2500/0.2	4	DL
FRAGMIN INJ 5000/0.2	4	DL
FRAGMIN INJ 7500/0.3	5	DL

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FRAGMIN INJ 10000/ML	5	DL
FRAGMIN INJ 12500UNT	5	DL
FRAGMIN INJ 15000UNT	5	DL
FRAGMIN INJ 18000UNT	5	DL
FRAGMIN INJ 95000UNT	5	DL
HEP SOD/D5W INJ 25000UNT	3	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	3	
<i>jantoven</i>	2	
PRADAXA CAP 75MG	4	
PRADAXA CAP 110MG	4	
PRADAXA CAP 150MG	4	
<i>warfarin sodium tab 1 mg</i>	2	
<i>warfarin sodium tab 2 mg</i>	2	
<i>warfarin sodium tab 2.5 mg</i>	2	
<i>warfarin sodium tab 3 mg</i>	2	
<i>warfarin sodium tab 4 mg</i>	2	
<i>warfarin sodium tab 5 mg</i>	2	
<i>warfarin sodium tab 6 mg</i>	2	
<i>warfarin sodium tab 7.5 mg</i>	2	
<i>warfarin sodium tab 10 mg</i>	2	
XARELTO STAR TAB 15/20MG	3	
XARELTO SUS 1MG/ML	3	
XARELTO TAB 2.5MG	3	
XARELTO TAB 10MG	3	
XARELTO TAB 15MG	3	
XARELTO TAB 20MG	3	
HEMATOPOIETIC GROWTH FACTORS		
GRANIX INJ 300/0.5	5	NM; DL
GRANIX INJ 300/1ML	5	NM; DL
GRANIX INJ 480/0.8	5	NM; DL
GRANIX INJ 480/1.6	5	NM; DL
MOZOBIL INJ	5	NM, LA; DL
NIVESTYM INJ 300/0.5	5	NM; DL
NIVESTYM INJ 300MCG	5	NM; DL
NIVESTYM INJ 480/0.8	5	NM; DL
NIVESTYM INJ 480MCG	5	NM; DL
PROCRIT INJ 2000/ML	3	B/D, NM
PROCRIT INJ 3000/ML	3	B/D, NM
PROCRIT INJ 4000/ML	3	B/D, NM
PROCRIT INJ 10000/ML	3	B/D, NM
PROCRIT INJ 20000/ML	5	B/D, NM; DL

Drug Name	Drug Tier	Requirements/Limits
PROCRIT INJ 40000/ML	5	B/D, QL (8 vials / 30 days), NM; DL
UDENYCA INJ 6MG/0.6	5	NM; DL
UDENYCA INJ 6MG/.6ML	5	NM; DL

MISCELLANEOUS

<i>aminocaproic acid tab 500 mg</i>	3	DL
<i>aminocaproic acid tab 1000 mg</i>	3	DL
<i>anagrelide hcl cap 0.5 mg</i>	4	
<i>anagrelide hcl cap 1 mg</i>	4	
CABLIVI KIT 11MG	5	NM, LA; DL
<i>cilostazol tab 50 mg</i>	2	
<i>cilostazol tab 100 mg</i>	2	
CINRYZE SOL 500 UNIT	5	NM, LA, PA; DL
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	5	NM, PA; DL
MULPLETA TAB 3MG	5	NM, PA; DL
ORLADEYO CAP 110MG	5	NM, LA, PA; DL
ORLADEYO CAP 150MG	5	NM, LA, PA; DL
OXBRYTA TAB 300MG	5	NM, LA; DL
OXBRYTA TAB 500MG	5	NM, LA; DL
<i>pentoxifylline tab er 400 mg</i>	2	
PROMACTA PAK 25MG	5	NM, LA, PA; DL
PROMACTA POW 12.5MG	5	NM, LA, PA; DL
PROMACTA TAB 12.5MG	5	NM, LA, PA; DL
PROMACTA TAB 25MG	5	NM, LA, PA; DL
PROMACTA TAB 50MG	5	NM, LA, PA; DL
PROMACTA TAB 75MG	5	NM, LA, PA; DL
RUCONEST INJ 2100UNIT	5	NM, LA, PA; DL
TAKHZYRO INJ 150MG/ML	5	NM, LA, PA; DL
TAKHZYRO INJ 300/2ML	5	NM, LA, PA; DL
TAVNEOS CAP 10MG	5	NM, LA; DL
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	3	

PLATELET AGGREGATION INHIBITORS

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	3	
BRILINTA TAB 60MG	3	
BRILINTA TAB 90MG	3	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	2	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	3	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	3	

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS

DUPIXENT INJ 100/0.67	5	NM, PA; DL
DUPIXENT INJ 200/1.14	5	NM, PA; DL
DUPIXENT INJ 200MG	5	NM, PA; DL
DUPIXENT INJ 300/2ML	5	NM, PA; DL
ENBREL INJ 25/0.5ML	5	NM, PA; DL
ENBREL INJ 25MG	5	NM, PA; DL
ENBREL INJ 50MG/ML	5	NM, PA; DL
ENBREL MINI INJ 50MG/ML	5	NM, PA; DL
ENBREL SRCLK INJ 50MG/ML	5	NM, PA; DL
HUMIRA INJ 10/0.1ML	5	NM, PA; DL
HUMIRA INJ 20/0.2ML	5	NM, PA; DL
HUMIRA INJ 40/0.4ML	5	NM, PA; DL
HUMIRA KIT 40MG/0.8	5	NM, PA; DL
HUMIRA PEDIA INJ CROHNS	5	NM, PA; DL
HUMIRA PEN INJ 40/0.4ML	5	NM, PA; DL
HUMIRA PEN INJ 40MG/0.8	5	NM, PA; DL
HUMIRA PEN INJ 80/0.8ML	5	NM, PA; DL
HUMIRA PEN INJ CD/UC/HS	5	NM, PA; DL
HUMIRA PEN INJ PS/UV	5	NM, PA; DL
HUMIRA PEN KIT CD/UC/HS	5	NM, PA; DL
HUMIRA PEN KIT PED UC	5	NM, PA; DL
HUMIRA PEN KIT PS/UV	5	NM, PA; DL
KINERET INJ	5	NM, PA; DL
LITFULO CAP 50MG	5	NM, LA, PA; DL
OTEZLA TAB 10/20/30	5	NM, PA; DL
OTEZLA TAB 30MG	5	NM, PA; DL
RINVOQ TAB 15MG ER	5	NM, PA; DL
RINVOQ TAB 30MG ER	5	NM, PA; DL
RINVOQ TAB 45MG ER	5	NM, PA; DL
SKYRIZI INJ 150DOSE	5	NM, PA; DL
SKYRIZI INJ 150MG/ML	5	NM, PA; DL
SKYRIZI INJ 180/1.2	5	NM, PA; DL
SKYRIZI INJ 360/2.4	5	NM, PA; DL
SKYRIZI PEN INJ 150MG/ML	5	NM, PA; DL
STELARA INJ 45MG/0.5	5	NM, LA, PA; DL; (vials)
STELARA INJ 45MG/0.5	5	NM, PA; DL; (syringes)
STELARA INJ 90MG/ML	5	NM, PA; DL
TALTZ INJ 80MG/ML	5	NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
XELJANZ SOL 1MG/ML	5	NM, PA; DL
XELJANZ TAB 5MG	5	NM, PA; DL
XELJANZ TAB 10MG	5	NM, PA; DL
XELJANZ XR TAB 11MG	5	NM, PA; DL
XELJANZ XR TAB 22MG	5	NM, PA; DL

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate tab 200 mg</i>	3	
<i>leflunomide tab 10 mg</i>	3	
<i>leflunomide tab 20 mg</i>	3	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	2	
RIDAURA CAP 3MG	3	DL
XATMEP SOL 2.5MG/ML	4	DL

IMMUNOGLOBULINS

BIVIGAM INJ 10%	5	NM, LA, PA; DL
GAMASTAN INJ	4	NM, LA, PA
GAMMAGARD INJ 2.5GM/25	5	NM, PA; DL
GAMMAGARD INJ 5GM/50ML	5	NM, PA; DL
GAMMAGARD INJ 10GM/100	5	NM, PA; DL
GAMMAGARD INJ 20GM/200	5	NM, PA; DL
GAMMAGARD INJ 30GM/300	5	NM, PA; DL
GAMMAGARD SD INJ 5GM HU	5	NM, PA; DL
GAMMAGARD SD INJ 10GM HU	5	NM, PA; DL
GAMMAKED INJ 1GM/10ML	5	NM, PA; DL
GAMMAKED INJ 5GM/50ML	5	NM, PA; DL
GAMMAKED INJ 10GM/100	5	NM, PA; DL
GAMMAKED INJ 20GM/200	5	NM, PA; DL
GAMMAPLEX INJ 5%	5	NM, LA, PA; DL
GAMMAPLEX INJ 10%	5	NM, LA, PA; DL
GAMUNEX-C INJ 1GM/10ML	5	NM, PA; DL
GAMUNEX-C INJ 5GM/50ML	5	NM, PA; DL
GAMUNEX-C INJ 10GM/100	5	NM, PA; DL
GAMUNEX-C INJ 20GM/200	5	NM, PA; DL
GAMUNEX-C INJ 40/400ML	5	NM, PA; DL
OCTAGAM INJ 1GM	5	NM, PA; DL
OCTAGAM INJ 2GM/20ML	5	NM, PA; DL
PANZYGA SOL 1GM/10ML	5	NM, PA; DL
PANZYGA SOL 2.5/25ML	5	NM, PA; DL
PANZYGA SOL 5GM/50ML	5	NM, PA; DL
PANZYGA SOL 10/100ML	5	NM, PA; DL
PANZYGA SOL 20/200ML	5	NM, PA; DL
PANZYGA SOL 30/300ML	5	NM, PA; DL
PRIVIGEN INJ 20GRAMS	5	NM, PA; DL

Drug Name	Drug Tier	Requirements/Limits
IMMUNOMODULATORS		
ACTIMMUNE INJ 2MU/0.5	5	NM, LA, PA; DL
ARCALYST INJ 220MG	5	NM, LA, PA; DL
BEYFORTUS INJ 50/0.5ML	5	DL
BEYFORTUS INJ 100MG/ML	5	DL
GRASTEK SUB 2800BAU	4	PA; DL
INTRON A INJ 10MU	3	NM, LA; DL
INTRON A INJ 18MU	3	NM, LA; DL
INTRON A INJ 25MU	5	NM; DL
INTRON A INJ 50MU	5	NM, LA; DL
ODACTRA SUB	4	PA; DL
SYNAGIS INJ 100MG/ML	5	NM; DL
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CAP 0.5MG	4	B/D, NM
ASTAGRAF XL CAP 1MG	4	B/D, NM
ASTAGRAF XL CAP 5MG	4	B/D, NM
ATGAM INJ 250MG	5	DL
<i>azasan</i>	4	B/D
AZATHIOPRINE INJ 100MG	3	B/D
<i>azathioprine tab 50 mg</i>	2	B/D
<i>azathioprine tab 75 mg</i>	2	B/D
<i>azathioprine tab 100 mg</i>	2	B/D
BENLYSTA INJ 120MG	5	NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	5	QL (4 auto-injectors / 28 days), NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	5	QL (4 syringes / 28 days), NM, LA, PA; DL
BENLYSTA INJ 400MG	5	NM, LA, PA; DL
<i>cyclosporine cap 25 mg</i>	3	B/D, NM
<i>cyclosporine cap 100 mg</i>	3	B/D, NM
<i>cyclosporine iv soln 50 mg/ml</i>	2	B/D, NM
<i>cyclosporine modified cap 25 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 50 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 100 mg</i>	2	B/D, NM
<i>cyclosporine modified oral soln 100 mg/ml</i>	2	B/D, NM
ENVARUSUS XR TAB 0.75MG	4	B/D, NM
ENVARUSUS XR TAB 1MG	4	B/D, NM
ENVARUSUS XR TAB 4MG	4	B/D, NM
<i>everolimus tab 0.5 mg</i>	5	B/D, NM; DL
<i>everolimus tab 0.25 mg</i>	4	B/D, QL (60 tabs / 30 days), NM; DL
<i>everolimus tab 0.75 mg</i>	5	B/D, NM; DL
<i>everolimus tab 1 mg</i>	5	B/D, NM; DL
<i>gengraf</i>	2	B/D, NM

Drug Name	Drug Tier	Requirements/Limits
LUPKYNIS CAP 7.9MG	5	QL (180 caps / 30 days), NM, LA, PA; DL
<i>mycophenolate mofetil cap 250 mg</i>	2	B/D, NM
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	2	B/D, NM
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	3	B/D, NM
<i>mycophenolate mofetil tab 500 mg</i>	2	B/D, NM
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	3	B/D, NM
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	3	B/D, NM
NEORAL CAP 25MG	4	B/D, NM
NEORAL CAP 100MG	4	B/D, NM
NEORAL SOL 100MG/ML	4	B/D, NM
NULOJIX INJ 250MG	5	B/D, NM; DL
PROGRAF GRA 0.2MG	4	B/D, NM
PROGRAF GRA 1MG	4	B/D, NM
PROGRAF INJ 5MG/ML	4	B/D, NM
RAPAMUNE TAB 0.5MG	4	B/D, NM
RAPAMUNE TAB 1MG	4	B/D, NM
RAPAMUNE TAB 2MG	4	B/D, NM
REZUROCK TAB 200MG	5	NM, LA, PA; DL
SANDIMMUNE CAP 25MG	3	B/D, NM
SANDIMMUNE CAP 100MG	3	B/D, NM
SANDIMMUNE SOL 100MG/ML	3	B/D, NM
SIMULECT INJ 10MG	4	B/D
SIMULECT INJ 20MG	4	B/D
<i>sirolimus oral soln 1 mg/ml</i>	4	B/D, NM
<i>sirolimus tab 0.5 mg</i>	3	B/D, NM
<i>sirolimus tab 1 mg</i>	3	B/D, NM
<i>sirolimus tab 2 mg</i>	3	B/D, NM
<i>tacrolimus cap 0.5 mg</i>	2	B/D, NM
<i>tacrolimus cap 1 mg</i>	2	B/D, NM
<i>tacrolimus cap 5 mg</i>	2	B/D, NM
THYMOGLOBULN INJ 25MG	3	B/D
VACCINES		
ABRYSVO INJ	3	
ACTHIB INJ	3	
ADACEL INJ	3	
AREXVY INJ 120MCG	3	
BCG VACCINE INJ 50MG	4	
BEXSERO INJ	3	
BOOSTRIX INJ	3	
DAPTACEL INJ	3	

Drug Name	Drug Tier	Requirements/Limits
DIP/TET PED INJ 25-5LFU	3	
ENGERIX-B INJ 10/0.5ML	3	B/D
ENGERIX-B INJ 20MCG/ML	3	B/D
GARDASIL 9 INJ	4	
HAVRIX INJ 720UNIT	3	
HAVRIX INJ 1440UNIT	3	
HEPLISAV-B INJ 20/0.5ML	3	B/D
HIBERIX SOL 10MCG	3	
IMOVAX RABIE INJ 2.5/ML	3	
INFANRIX INJ	3	
IPOL INJ INACTIVE	4	
IXCHIQ INJ	3	
IXIARO INJ	4	
JYNNEOS INJ	3	
KINRIX INJ	3	
M-M-R II INJ	3	
MENACTRA INJ	3	
MENQUADFI INJ	3	
MENVEO INJ	3	
MENVEO SOL	3	
PEDIARIX INJ 0.5ML	3	
PEDVAX HIB INJ	4	
PENBRAYA INJ	3	
PENTACEL INJ	3	
PREHEVBRIIO SUS 10MCG/ML	3	B/D
PRIORIX INJ	3	
PROQUAD INJ	4	
QUADRACEL INJ	3	
QUADRACEL INJ 0.5ML	3	
RABAVERT INJ	3	DL
RECOMBIVA HB INJ 5MCG/0.5	3	B/D
RECOMBIVA HB INJ 10MCG/ML	3	B/D
RECOMBIVA-HB INJ 40MCG/ML	3	B/D
ROTARIX SUS	4	
ROTATEQ SOL	4	
SHINGRIX INJ 50/0.5ML	3	QL (2 injections in lifetime)
TDVAX INJ 2-2 LF	3	
TENIVAC INJ 5-2LF	3	
TICOVAC INJ	3	
TRUMENBA INJ	3	
TWINRIX INJ	3	
TYPHIM VI INJ	4	
VAQTA INJ 25/0.5ML	3	
VAQTA INJ 50UNT/ML	3	

PA - Prior Authorization **QL** - Quantity Limits **NM** - Not available at mail-order **B/D** - Covered under Medicare B or D **LA** - Limited Access **ED** - Enhanced Drugs **DL** - Medication restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
VARIVAX INJ	3	
YF-VAX INJ	4	

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D10W/NAACL INJ 0.2%	3	
DEXTROSE 2.5% W/ SODIUM CHLORIDE 0.45%	3	
<i>dextrose 5% in lactated ringers</i>	3	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	3	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	3	
ISOLYTE-P INJ /D5W	4	DL
ISOLYTE-S INJ PH 7.4	4	DL
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	2	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	3	
KCL/D5W/LACT INJ 20MEQ/L	3	
<i>lactated ringer's solution</i>	3	
<i>magnesium sulfate inj 50%</i>	3	
<i>mult electro inj ph 5.5</i>	4	DL
PLASMA-LYTE INJ -148	4	DL
PLASMA-LYTE INJ -A	4	DL
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	3	
<i>potassium chloride inj 2 meq/ml</i>	2	
<i>ringer's solution</i>	3	
<i>sodium chloride iv soln 0.9%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>sodium chloride iv soln 0.45%</i>	3	
<i>sodium chloride iv soln 3%</i>	3	
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>effervescent pot chloride</i>	2	
<i>klor-con</i>	2	
<i>klor-con 8</i>	3	
<i>klor-con 10</i>	3	
<i>klor-con m10</i>	2	
<i>klor-con m15</i>	3	
<i>klor-con m20</i>	2	
<i>klor-con/ef</i>	2	
<i>potassium chloride cap er 8 meq</i>	2	
<i>potassium chloride cap er 10 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	2	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	3	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	3	
<i>potassium chloride powder packet 20 meq</i>	2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	2	
<i>potassium chloride tab er 10 meq</i>	2	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	3	
<i>sodium fluoride 2.2 mg</i>	2	
IV NUTRITION		
<i>dextrose inj 5%</i>	2	
<i>dextrose inj 10%</i>	3	
INTRALIPID INJ 20%	4	B/D; DL
INTRALIPID INJ 30%	4	B/D; DL
NUTRILIPID EMU 20%	4	B/D; DL
PREMASOL SOL 10%	3	B/D; DL
PROSOL INJ 20%	4	B/D; DL
TRAVASOL INJ 10%	3	B/D; DL
TROPHAMINE INJ 10%	4	B/D; DL
OPHTHALMIC		
ANTI-INFECTIVE/ANTI-INFLAMMATORY		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	2	
<i>neo-polycycin oin hc 1%op</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2	
TOBRADEX OIN 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	2	

ANTI-INFECTIVES

AZASITE SOL 1%	4	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	2	
BESIVANCE SUS 0.6%	4	
CILOXAN OIN 0.3% OP	4	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	2	
<i>erythromycin ophth oint 5 mg/gm</i>	2	
<i>gatifloxacin ophth soln 0.5%</i>	2	
<i>gentamicin sulfate ophth soln 0.3%</i>	2	
<i>levofloxacin ophth soln 0.5%</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	2	
NATACYN SUS 5% OP	3	
<i>neo-polycin oin op</i>	2	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	2	
<i>ofloxacin ophth soln 0.3%</i>	2	
<i>polycin oin op</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	2	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	2	
<i>tobramycin ophth soln 0.3%</i>	2	
TOBREX OIN 0.3% OP	4	
<i>trifluridine ophth soln 1%</i>	2	
ZIRGAN GEL 0.15%	4	

ANTI-INFLAMMATORIES

<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	2	
<i>diclofenac sodium ophth soln 0.1%</i>	2	
<i>difluprednate ophth emulsion 0.05%</i>	3	
EYSUVIS DRO 0.25%	4	
FLAREX SUS 0.1% OP	4	
<i>fluorometholone ophth susp 0.1%</i>	3	
<i>flurbiprofen sodium ophth soln 0.03%</i>	2	
FML FORTE SUS 0.25% OP	4	
<i>ketorolac tromethamine ophth soln 0.4%</i>	2	
<i>ketorolac tromethamine ophth soln 0.5%</i>	2	
LOTEMAX OIN 0.5%	3	
LOTEMAX SM GEL 0.38%	4	
<i>loteprednol etabonate ophth gel 0.5%</i>	3	
<i>loteprednol etabonate ophth susp 0.5%</i>	3	
MAXIDEX SUS 0.1% OP	3	
NEVANAC SUS 0.1% OP	4	
PRED MILD SUS 0.12% OP	4	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	3	
PROLENSA SOL 0.07%	4	
ANTIALLERGICS		
ALOMIDE SOL 0.1% OP	4	
<i>azelastine hcl ophth soln 0.05%</i>	2	
<i>bepotastine besilate ophth soln 1.5%</i>	2	
<i>cromolyn sodium ophth soln 4%</i>	2	
<i>epinastine hcl ophth soln 0.05%</i>	2	
ZERVIAE DRO 0.24%	3	
ANTIGLAUCOMA		
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	2	
<i>betaxolol hcl ophth soln 0.5%</i>	2	
BETOPTIC-S SUS 0.25% OP	4	
<i>bimatoprost ophth soln 0.03%</i>	2	
<i>brimonidine tartrate ophth soln 0.2%</i>	2	
<i>brimonidine tartrate ophth soln 0.15%</i>	3	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	2	
<i>brinzolamide ophth susp 1%</i>	2	
<i>carteolol hcl ophth soln 1%</i>	2	
<i>dorzolamide hcl ophth soln 2%</i>	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	2	
IOPIDINE SOL 1% OP	4	
<i>latanoprost ophth soln 0.005%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levobunolol hcl ophth soln 0.5%</i>	2	
LUMIGAN SOL 0.01%	3	
<i>pilocarpine hcl ophth soln 1%</i>	3	
<i>pilocarpine hcl ophth soln 2%</i>	3	
<i>pilocarpine hcl ophth soln 4%</i>	3	
RHOPRESSA SOL 0.02%	3	
ROCKLATAN DRO	3	
SIMBRINZA SUS 1-0.2%	4	
<i>timolol maleate ophth gel forming soln 0.5%</i>	2	
<i>timolol maleate ophth gel forming soln 0.25%</i>	2	
<i>timolol maleate ophth soln 0.5%</i>	2	
<i>timolol maleate ophth soln 0.25%</i>	2	
<i>timolol maleate preservative free ophth soln 0.5%</i>	2	
<i>timolol maleate preservative free ophth soln 0.25%</i>	2	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	2	
VYZULTA SOL 0.024%	4	

MISCELLANEOUS

<i>atropine sulfate ophth soln 1%</i>	3	
<i>cyclosporine (ophth) emulsion 0.05%</i>	3	
CYSTADROPS SOL 0.37%	5	NM, LA, PA; DL
CYSTARAN SOL 0.44%	5	NM, LA, PA; DL
EYLEA INJ 2/0.05ML	5	NM, LA; DL
LUCENTIS SOL 0.3MG	5	NM, LA; DL
LUCENTIS SOL 0.5MG	5	NM, LA; DL
OXERVATE SOL 20MCG/ML	5	NM, LA; DL
RESTASIS EMU 0.05% OP	3	
RESTASIS MUL EMU 0.05% OP	3	
XIIDRA DRO 5%	3	

OTIC

OTIC AGENTS

<i>acetic acid otic soln 2%</i>	3	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
<i>flac oil 0.01%</i>	2	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	2	
<i>neomycin-polymyxin-hc otic soln 1%</i>	2	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>ofloxacin otic soln 0.3%</i>	2	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25	3	
BEVESPI AER 9-4.8MCG	3	
BREZTRI AERO AER SPHERE	3	
COMBIVENT AER 20-100	3	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	2	B/D
TRELEGY AER 100MCG	3	
TRELEGY AER 200MCG	3	
ANTICHOLINERGICS		
ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	3	
<i>ipratropium bromide inhal soln 0.02%</i>	2	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	2	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	2	
YUPELRI SOL	4	B/D
ANTI-HISTAMINES		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	2	
<i>azelastine spr 0.1%</i>	2	
<i>cyproheptadine hcl tab 4 mg</i>	3	
<i>desloratadine tab 5 mg</i>	2	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	2	
<i>desloratadine tab orally disintegrating 5 mg</i>	2	
<i>diphenhydramine hcl inj 50 mg/ml</i>	2	
<i>hydroxyzine hcl tab 10 mg</i>	2	
<i>hydroxyzine hcl tab 25 mg</i>	2	
<i>hydroxyzine hcl tab 50 mg</i>	2	
<i>hydroxyzine pamoate cap 25 mg</i>	2	
<i>hydroxyzine pamoate cap 50 mg</i>	2	
<i>hydroxyzine pamoate cap 100 mg</i>	2	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	2	
<i>levocetirizine dihydrochloride tab 5 mg</i>	2	
<i>olopatadine hcl nasal soln 0.6%</i>	2	
BETA AGONISTS		
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	2	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	2	B/D

PA - Prior Authorization QL - Quantity Limits NM - Not available at mail-order B/D -
Covered under Medicare B or D LA - Limited Access ED - Enhanced Drugs DL -
Medication restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	2	B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	2	B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	2	B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	2	
<i>albuterol sulfate tab 2 mg</i>	2	
<i>albuterol sulfate tab 4 mg</i>	2	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	4	B/D; DL
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	4	B/D; DL
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	2	B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	2	B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	2	B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	2	B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	3	
SEREVENT DIS AER 50MCG	3	
<i>terbutaline sulfate inj 1 mg/ml</i>	2	
<i>terbutaline sulfate tab 2.5 mg</i>	2	
<i>terbutaline sulfate tab 5 mg</i>	2	
VENTOLIN HFA AER	3	
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	2	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	2	
<i>montelukast sodium tab 10 mg (base equiv)</i>	2	
<i>zafirlukast tab 10 mg</i>	2	
<i>zafirlukast tab 20 mg</i>	2	
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	2	B/D; DL
<i>acetylcysteine inhal soln 20%</i>	2	B/D; DL
ARALAST NP INJ 1000MG	5	NM, LA, PA; DL
BRONCHITOL CAP 40MG	4	NM, LA, PA
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	B/D
DALIRESP TAB 250MCG	4	DL
DALIRESP TAB 500MCG	4	DL
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	3	QL (4 pens / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	3	QL (4 pens / 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	3	QL (4 pens / 30 days)
ESBRIET CAP 267MG	5	NM, LA, PA; DL
ESBRIET TAB 267MG	5	NM, LA, PA; DL
ESBRIET TAB 801MG	5	NM, LA, PA; DL
FASENRA INJ 30MG/ML	5	NM, LA, PA; DL
FASENRA PEN INJ 30MG/ML	5	NM, LA, PA; DL
GLASSIA INJ	5	NM, LA, PA; DL
KALYDECO GRA 5.8MG	5	NM, LA, PA; DL
KALYDECO GRA 13.4MG	5	NM, LA, PA; DL
KALYDECO PAK 25MG	5	NM, LA, PA; DL
KALYDECO PAK 50MG	5	NM, LA, PA; DL
KALYDECO PAK 75MG	5	NM, LA, PA; DL
KALYDECO TAB 150MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
OFEV CAP 100MG	5	NM, LA, PA; DL
OFEV CAP 150MG	5	NM, LA, PA; DL
ORKAMBI GRA 75-94MG	5	NM, LA, PA; DL
ORKAMBI GRA 100-125	5	NM, LA, PA; DL
ORKAMBI GRA 150-188	5	NM, LA, PA; DL
ORKAMBI TAB 100-125	5	NM, LA, PA; DL
ORKAMBI TAB 200-125	5	NM, LA, PA; DL
<i>pirfenidone cap 267 mg</i>	5	NM, PA; DL
<i>pirfenidone tab 267 mg</i>	5	NM, PA; DL
<i>pirfenidone tab 534 mg</i>	5	NM, PA; DL
<i>pirfenidone tab 801 mg</i>	5	NM, PA; DL
PROLASTIN-C INJ 1000MG	5	NM, LA, PA; DL
PULMOZYME SOL 1MG/ML	5	B/D, NM; DL
<i>roflumilast tab 250 mcg</i>	4	DL
<i>roflumilast tab 500 mcg</i>	4	DL
SYMDEKO TAB 50-75MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
THEO-24 CAP 100MG CR	4	
THEO-24 CAP 200MG CR	4	
<i>theophylline tab er 12hr 300 mg</i>	3	
<i>theophylline tab er 12hr 450 mg</i>	3	
<i>theophylline tab er 24hr 400 mg</i>	2	
<i>theophylline tab er 24hr 600 mg</i>	2	
TRIKAFTA TAB	5	QL (84 tabs / 28 days), NM, LA, PA; DL
XOLAIR INJ 75/0.5	5	NM, LA, PA; DL
XOLAIR INJ 150MG/ML	5	NM, LA, PA; DL
XOLAIR SOL 150MG	5	NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
ZEMAIRA INJ 1000MG	5	NM, LA, PA; DL
NASAL STEROIDS		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	2	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	2	
<i>mometasone furoate nasal susp 50 mcg/act</i>	2	
XHANCE MIS 93MCG	3	
STEROID INHALANTS		
ARNUITY ELPT INH 50MCG	3	
ARNUITY ELPT INH 100MCG	3	
ARNUITY ELPT INH 200MCG	3	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	3	B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	3	B/D
<i>budesonide inhalation susp 1 mg/2ml</i>	3	B/D
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	3	
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	3	
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	3	
<i>fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)</i>	3	
<i>fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)</i>	3	
<i>fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)</i>	3	
PULMICORT INH 90MCG	4	
PULMICORT INH 180MCG	4	
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR HFA AER 45/21	4	
ADVAIR HFA AER 115/21	4	
ADVAIR HFA AER 230/21	4	
BREO ELLIPTA INH 50-25MCG	3	
BREO ELLIPTA INH 100-25	3	
BREO ELLIPTA INH 200-25	3	
DULERA AER 50-5MCG	4	
DULERA AER 100-5MCG	4	
DULERA AER 200-5MCG	4	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	2	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	2	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>wixela inhub</i>	2	

TOPICAL

DERMATOLOGY, ACNE

ACANYA GEL 1.2-2.5%	4	
<i>accutane</i>	3	
<i>amneesteem cap 10mg</i>	3	
<i>amneesteem cap 20mg</i>	3	
<i>amneesteem cap 40mg</i>	3	
<i>avita cre 0.025%</i>	3	PA
AZELEX CRE 20%	4	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	3	
<i>claravis cap 10mg</i>	3	
<i>claravis cap 20mg</i>	3	
<i>claravis cap 30mg</i>	3	
<i>claravis cap 40mg</i>	3	
<i>clindacin mis etz 1%</i>	2	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	3	
<i>clindamycin phosphate gel 1%</i>	2	
<i>clindamycin phosphate lotion 1%</i>	2	
<i>clindamycin phosphate soln 1%</i>	2	
<i>clindamycin phosphate swab 1%</i>	2	
<i>ery</i>	2	
<i>erythromycin gel 2%</i>	2	
<i>erythromycin soln 2%</i>	2	
<i>isotretinoin cap 10 mg</i>	3	
<i>isotretinoin cap 20 mg</i>	3	
<i>isotretinoin cap 30 mg</i>	3	
<i>isotretinoin cap 40 mg</i>	3	
<i>sulfacetamide sodium lotion 10% (acne)</i>	2	
<i>tretinoin cream 0.1%</i>	3	PA; DL
<i>tretinoin cream 0.05%</i>	3	PA; DL
<i>tretinoin cream 0.025%</i>	3	PA; DL
<i>tretinoin gel 0.01%</i>	3	PA
<i>tretinoin gel 0.05%</i>	3	PA
<i>tretinoin gel 0.025%</i>	3	PA
<i>zenatane cap 10mg</i>	3	
<i>zenatane cap 20mg</i>	3	
<i>zenatane cap 30mg</i>	3	
<i>zenatane cap 40mg</i>	3	

DERMATOLOGY, ANTIBIOTICS

ALTABAX OIN 1%	4	
<i>gentamicin sulfate cream 0.1%</i>	2	
<i>gentamicin sulfate oint 0.1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mupirocin calcium cream 2%</i>	2	
<i>mupirocin oint 2%</i>	2	
<i>silver sulfadiazine cream 1%</i>	3	
<i>ssd</i>	3	
SULFAMYLON CRE 85MG/GM	3	

DERMATOLOGY, ANTIFUNGALS

<i>ciclopirox gel 0.77%</i>	2	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	2	
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	2	
<i>ciclopirox shampoo 1%</i>	3	
<i>ciclopirox solution 8%</i>	2	DL
<i>clotrimazole cream 1%</i>	2	
<i>clotrimazole soln 1%</i>	2	QL (90 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	3	QL (90 gm / 30 days)
<i>ketoconazole cream 2%</i>	2	
<i>luliconazole cream 1%</i>	2	
<i>naftifine hcl cream 1%</i>	3	
<i>naftifine hcl cream 2%</i>	3	
<i>nyamyc</i>	2	
<i>nystatin cream 100000 unit/gm</i>	2	
<i>nystatin oint 100000 unit/gm</i>	2	
<i>nystatin topical powder 100000 unit/gm</i>	2	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	3	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	3	
<i>nystop</i>	2	
<i>oxiconazole nitrate cream 1%</i>	4	

DERMATOLOGY, ANTIPSORIATICS

<i>acitretin cap 10 mg</i>	3	
<i>acitretin cap 17.5 mg</i>	3	
<i>acitretin cap 25 mg</i>	3	
<i>calcipotriene cream 0.005%</i>	4	
<i>calcipotriene oint 0.005%</i>	4	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	4	
<i>calcitriol oint 3 mcg/gm</i>	3	
<i>methoxsalen rapid cap 10 mg</i>	5	DL
<i>tazarotene gel 0.1%</i>	4	
<i>tazarotene gel 0.05%</i>	4	

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole shampoo 2%</i>	2	
<i>selenium sulfide lotion 2.5%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort</i>	2	
<i>alclometasone dipropionate cream 0.05%</i>	2	
<i>alclometasone dipropionate oint 0.05%</i>	2	
<i>amcinonide oint 0.1%</i>	3	
<i>betamethasone dipropionate augmented cream 0.05%</i>	2	
<i>betamethasone dipropionate augmented gel 0.05%</i>	2	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	3	
<i>betamethasone dipropionate augmented oint 0.05%</i>	3	
<i>betamethasone dipropionate cream 0.05%</i>	2	
<i>betamethasone dipropionate lotion 0.05%</i>	2	
<i>betamethasone dipropionate oint 0.05%</i>	2	
<i>betamethasone valerate aerosol foam 0.12%</i>	4	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	2	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	4	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	4	
<i>clobetasol propionate cream 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate e</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate emulsion foam 0.05%</i>	4	QL (100 gm / 30 days)
<i>clobetasol propionate foam 0.05%</i>	4	QL (100 gm / 30 days)
<i>clobetasol propionate gel 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate lotion 0.05%</i>	4	QL (120 mL / 30 days)
<i>clobetasol propionate oint 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	4	QL (120 mL / 30 days)
<i>clobetasol propionate soln 0.05%</i>	4	QL (100 mL / 30 days)
<i>clobetasol propionate spray 0.05%</i>	4	QL (120 mL / 30 days)
<i>clocortolone pivalate cream 0.1%</i>	2	
<i>clodan sha 0.05%</i>	4	QL (120 mL / 30 days)
<i>desonide cream 0.05%</i>	4	QL (90 gm / 30 days)
<i>desonide lotion 0.05%</i>	4	QL (120 mL / 30 days)
<i>desonide oint 0.05%</i>	4	QL (90 gm / 30 days)
<i>diflorasone diacetate cream 0.05%</i>	4	QL (60 gm / 30 days)
<i>diflorasone diacetate oint 0.05%</i>	4	QL (60 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide cream 0.01%</i>	2	
<i>fluocinolone acetonide cream 0.025%</i>	2	
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide sc</i>	3	QL (120 mL / 30 days)
<i>fluocinolone acetonide soln 0.01%</i>	3	QL (120 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	2	
<i>fluocinonide emulsified base cream 0.05%</i>	2	
<i>fluocinonide gel 0.05%</i>	2	
<i>fluocinonide oint 0.05%</i>	2	
<i>fluocinonide soln 0.05%</i>	3	QL (120 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	2	
<i>halobetasol propionate cream 0.05%</i>	3	QL (120 gm / 30 days)
<i>halobetasol propionate oint 0.05%</i>	3	QL (120 gm / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	3	
<i>hydrocortisone butyrate oint 0.1%</i>	3	
<i>hydrocortisone butyrate soln 0.1%</i>	3	
<i>hydrocortisone lotion 2.5%</i>	2	
<i>hydrocortisone oint 2.5%</i>	2	
<i>hydrocortisone valerate cream 0.2%</i>	3	
<i>hydrocortisone valerate oint 0.2%</i>	3	
<i>mometasone furoate cream 0.1%</i>	2	
<i>mometasone furoate oint 0.1%</i>	2	
<i>mometasone furoate solution 0.1% (lotion)</i>	2	
<i>tovet</i>	4	QL (100 gm / 30 days)
<i>triamcinolone acetonide cream 0.1%</i>	2	
<i>triamcinolone acetonide cream 0.5%</i>	2	
<i>triamcinolone acetonide cream 0.025%</i>	2	
<i>triamcinolone acetonide lotion 0.1%</i>	2	
<i>triamcinolone acetonide lotion 0.025%</i>	2	
<i>triamcinolone acetonide oint 0.1%</i>	2	
<i>triamcinolone acetonide oint 0.5%</i>	2	
<i>triamcinolone acetonide oint 0.025%</i>	2	
<i>triderm</i>	2	
VERDESO AER 0.05%	5	QL (100 gm / 30 days); DL
DERMATOLOGY, LOCAL ANESTHETICS		
<i>lidocaine oint 5%</i>	3	PA
<i>lidocaine patch 5%</i>	3	QL (90 patches / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	QL (30 gm / 30 days)
<i>lidocan iii pad 5%</i>	3	QL (90 patches / 30 days), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>acyclovir oint 5%</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>azelaic acid gel 15%</i>	2	
<i>bexarotene gel 1%</i>	5	NM, PA; DL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	2	QL (500 gm / 30 days)
<i>diclofenac sodium soln 1.5%</i>	3	QL (300 mL / 30 days)
<i>doxepin hcl cream 5%</i>	4	QL (45 gm / 30 days); DL
EUCRISA OIN 2%	4	
FLUOROPLEX CRE 1%	5	DL
<i>fluorouracil cream 0.5%</i>	5	DL
<i>fluorouracil cream 5%</i>	3	
<i>fluorouracil soln 2%</i>	2	
<i>fluorouracil soln 5%</i>	2	
<i>hydrocortisone perianal cream 2.5%</i>	2	
HYFTOR GEL 0.2%	5	NM, LA; DL
<i>imiquimod cream 5%</i>	3	
<i>lactic acid (ammonium lactate) cream 12%</i>	2	
<i>lactic acid (ammonium lactate) lotion 12%</i>	2	
<i>metronidazole cream 0.75%</i>	2	
<i>metronidazole gel 0.75%</i>	2	
<i>metronidazole lotion 0.75%</i>	2	
PANRETIN GEL 0.1%	5	DL
<i>penciclovir cream 1%</i>	4	DL
<i>pimecrolimus cream 1%</i>	3	
<i>podofilox soln 0.5%</i>	2	
<i>procto-med hc</i>	2	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	
QBREXZA PAD 2.4%	4	QL (30 pledgets / 30 days)
RECTIV OIN 0.4%	4	
<i>tacrolimus oint 0.1%</i>	3	
<i>tacrolimus oint 0.03%</i>	3	
TARGRETIN GEL 1%	5	NM, PA; DL
VALCHLOR GEL 0.016%	5	NM, LA, PA; DL
ZYCLARA PUMP CRE 2.5%	5	DL
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>malathion lotion 0.5%</i>	2	
<i>permethrin cream 5%</i>	2	
<i>spinosad susp 0.9%</i>	2	
DERMATOLOGY, WOUND CARE AGENTS		
<i>lactated ringer's for irrigation</i>	3	
REGRANEX GEL 0.01%	5	QL (30 gm / 30 days); DL
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Drug Name	Drug Tier	Requirements/Limits
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<i>water for irrigation, sterile irrigation soln</i>	3	
MOUTH/THROAT/DENTAL AGENTS		
ARESTIN MIS 1MG	4	NM
<i>cevimeline hcl cap 30 mg</i>	3	
<i>chlorhexidine gluconate soln 0.12%</i>	2	
<i>clotrimazole troche 10 mg</i>	2	
<i>lidocaine hcl viscous soln 2%</i>	2	
<i>nystatin susp 100000 unit/ml</i>	2	
<i>periogard</i>	2	
<i>pilocarpine hcl tab 5 mg</i>	2	
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		BIVIGAM INJ 10%	96

<i>bleomycin sulfate for inj 15 unit</i>	19	<i>budesonide inhalation susp 1 mg/2ml</i>	108
<i>bleomycin sulfate for inj 30 unit</i>	19	<i>budesonide tab er 24hr 9 mg</i>	87
<i>blisovi 24 fe</i>	74	<i>bumetanide tab 0.5 mg</i>	39
<i>blisovi fe 1.5/30</i>	74	<i>bumetanide tab 1 mg</i>	40
BOOSTRIX INJ	98	<i>bumetanide tab 2 mg</i>	40
BOSULIF CAP 100MG	23	<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	4
BOSULIF CAP 50MG	23	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	67
BOSULIF TAB 100MG	23	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	67
BOSULIF TAB 400MG	23	<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	68
BOSULIF TAB 500MG	23	<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	67
BRAFTOVI CAP 75MG	23	<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	68
BREO ELLIPTA INH 100-25	108	<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	68
BREO ELLIPTA INH 200-25	108	<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	68
BREO ELLIPTA INH 50-25MCG	108	<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	68
BREZTRI AERO AER SPHERE	105	<i>buprenorphine td patch weekly 10 mcg/hr</i>	2
<i>briellyn</i>	74	<i>buprenorphine td patch weekly 15 mcg/hr</i>	2
BRILINTA TAB 60MG	94	<i>buprenorphine td patch weekly 20 mcg/hr</i>	2
BRILINTA TAB 90MG	94	<i>buprenorphine td patch weekly 5 mcg/hr</i>	2
<i>brimonidine tartrate ophth soln 0.15%</i>	103	<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	2
<i>brimonidine tartrate ophth soln 0.2%</i>	103	<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	68
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	103	<i>bupropion hcl tab 100 mg</i>	45
<i>brinzolamide ophth susp 1%</i>	103	<i>bupropion hcl tab 75 mg</i>	45
BRIVIACT INJ 50MG/5ML	55	<i>bupropion hcl tab er 12hr 100 mg</i>	45
BRIVIACT SOL 10MG/ML	55	<i>bupropion hcl tab er 12hr 150 mg</i>	45
BRIVIACT TAB 100MG	55	<i>bupropion hcl tab er 12hr 200 mg</i>	45
BRIVIACT TAB 10MG	55	<i>bupropion hcl tab er 24hr 150 mg</i>	46
BRIVIACT TAB 25MG	55	<i>bupropion hcl tab er 24hr 300 mg</i>	46
BRIVIACT TAB 50MG	55	<i>bupirone hcl tab 10 mg</i>	44
BRIVIACT TAB 75MG	55	<i>bupirone hcl tab 15 mg</i>	44
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	102	<i>bupirone hcl tab 30 mg</i>	44
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	102	<i>bupirone hcl tab 5 mg</i>	44
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	49		
BRONCHITOL CAP 40MG	106		
BRUKINSA CAP 80MG	23		
<i>budesonide delayed release particles cap 3 mg</i>	87		
<i>budesonide inhalation susp 0.25 mg/2ml</i>	108		
<i>budesonide inhalation susp 0.5 mg/2ml</i>	108		

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butalbital-acetaminophen-caffeine cap 50-300-40 mg..... 1
butalbital-acetaminophen-caffeine cap 50-325-40 mg..... 1
butalbital-acetaminophen-caffeine tab 50-325-40 mg..... 1
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg..... 4
butalbital-aspirin-caffeine cap 50-325-40 mg 1
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 CABOMETYX TAB 20MG23
 CABOMETYX TAB 40MG23
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<i>carbidopa & levodopa tab er 25-100 mg</i>	49	<i>cefazolin sodium for inj 1 gm</i>	13
<i>carbidopa & levodopa tab er 50-200 mg</i>	49	<i>cefazolin sodium for inj 10 gm</i>	13
<i>carbidopa tab 25 mg</i>	49	<i>cefazolin sodium for inj 500 mg</i>	13
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	49	<i>cefdinir cap 300 mg</i>	13
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	49	<i>cefdinir for susp 125 mg/5ml</i>	13
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	49	<i>cefdinir for susp 250 mg/5ml</i>	14
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	49	<i>cefepime hcl for inj 1 gm</i>	14
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	49	<i>cefepime hcl for iv soln 2 gm</i>	14
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	49	<i>cefixime cap 400 mg</i>	14
<i>carboplatin iv soln 150 mg/15ml</i>	18	<i>cefixime for susp 100 mg/5ml</i>	14
<i>carboplatin iv soln 450 mg/45ml</i>	18	<i>cefixime for susp 200 mg/5ml</i>	14
<i>carboplatin iv soln 50 mg/5ml</i>	18	<i>cefotetan disodium for inj 1 gm</i>	14
<i>carboplatin iv soln 600 mg/60ml</i>	18	<i>cefotetan disodium for inj 2 gm</i>	14
<i>carglumic acid soluble tab 200 mg</i>	80	<i>cefoxitin sodium for iv soln 1 gm</i>	14
<i>carteolol hcl ophth soln 1%</i>	103	<i>cefoxitin sodium for iv soln 10 gm</i>	14
<i>cartia xt</i>	38	<i>cefoxitin sodium for iv soln 2 gm</i>	14
<i>carvedilol phosphate cap er 24hr 10 mg</i>	37	<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	14
<i>carvedilol phosphate cap er 24hr 20 mg</i>	37	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	14
<i>carvedilol phosphate cap er 24hr 40 mg</i>	37	<i>cefpodoxime proxetil tab 100 mg</i>	14
<i>carvedilol phosphate cap er 24hr 80 mg</i>	37	<i>cefpodoxime proxetil tab 200 mg</i>	14
<i>carvedilol tab 12.5 mg</i>	37	<i>cefprozil for susp 125 mg/5ml</i>	14
<i>carvedilol tab 25 mg</i>	37	<i>cefprozil for susp 250 mg/5ml</i>	14
<i>carvedilol tab 3.125 mg</i>	37	<i>cefprozil tab 250 mg</i>	14
<i>carvedilol tab 6.25 mg</i>	37	<i>cefprozil tab 500 mg</i>	14
<i>CAVERJECT IM KIT 10MCG</i>	89	<i>ceftazidime for inj 1 gm</i>	14
<i>CAVERJECT INJ 20MCG</i>	89	<i>ceftazidime for inj 6 gm</i>	14
<i>CAVERJECT INJ 40MCG</i>	89	<i>ceftazidime for iv soln 2 gm</i>	14
<i>CAVERJECT KIT 20MCG</i>	89	<i>ceftriaxone sodium for inj 1 gm</i>	14
<i>CAYSTON INH 75MG</i>	6	<i>ceftriaxone sodium for inj 10 gm</i>	14
<i>cefaclor cap 250 mg</i>	13	<i>ceftriaxone sodium for inj 2 gm</i>	14
<i>cefaclor cap 500 mg</i>	13	<i>ceftriaxone sodium for inj 250 mg</i>	14
<i>cefadroxil cap 500 mg</i>	13	<i>ceftriaxone sodium for inj 500 mg</i>	14
<i>cefadroxil for susp 250 mg/5ml</i>	13	<i>cefuroxime axetil tab 250 mg</i>	14
<i>cefadroxil for susp 500 mg/5ml</i>	13	<i>cefuroxime axetil tab 500 mg</i>	14
<i>cefadroxil tab 1 gm</i>	13	<i>cefuroxime sodium for inj 750 mg</i>	14
		<i>cefuroxime sodium for iv soln 1.5 gm</i>	14
		<i>celecoxib cap 100 mg</i>	1
		<i>celecoxib cap 200 mg</i>	1
		<i>celecoxib cap 400 mg</i>	1
		<i>celecoxib cap 50 mg</i>	1
		<i>CELONTIN CAP 300MG</i>	56
		<i>cephalexin cap 250 mg</i>	14
		<i>cephalexin cap 500 mg</i>	14
		<i>cephalexin for susp 125 mg/5ml</i>	14

<i>cephalexin for susp 250 mg/5ml</i>	14	<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	102
<i>cevimeline hcl cap 30 mg</i>	114	<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	104
CHEMET CAP 100MG	73	<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	15
<i>chlordiazepoxide hcl cap 10 mg</i>	44	<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	15
<i>chlordiazepoxide hcl cap 25 mg</i>	44	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	15
<i>chlordiazepoxide hcl cap 5 mg</i>	44	<i>ciprofloxacin iv soln 400 mg/40ml (1%)</i>	15
<i>chlorhexidine gluconate soln 0.12%</i>	114	<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	104
<i>chloroquine phosphate tab 250 mg</i>	9	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	18
<i>chloroquine phosphate tab 500 mg</i>	9	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i> ..	18
<i>chlorpromazine hcl inj 50 mg/2ml</i>	51	<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	46
<i>chlorpromazine hcl tab 10 mg</i>	51	<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	46
<i>chlorpromazine hcl tab 100 mg</i>	51	<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	46
<i>chlorpromazine hcl tab 200 mg</i>	51	<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	46
<i>chlorpromazine hcl tab 25 mg</i>	51	<i>claravis cap 10mg</i>	109
<i>chlorpromazine hcl tab 50 mg</i>	51	<i>claravis cap 20mg</i>	109
<i>chlorthalidone tab 25 mg</i>	40	<i>claravis cap 30mg</i>	109
<i>chlorthalidone tab 50 mg</i>	40	<i>claravis cap 40mg</i>	109
<i>cholestyramine light powder 4 gm/dose</i>	35	<i>clarithromycin for susp 125 mg/5ml</i> ..	15
<i>cholestyramine powder packets 4 gm</i> ..	35	<i>clarithromycin for susp 250 mg/5ml</i> ..	15
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	34	<i>clarithromycin tab 250 mg</i>	15
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	34	<i>clarithromycin tab 500 mg</i>	15
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<i>ciclopirox gel 0.77%</i>	110	<i>clindacin mis etz 1%</i>	109
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	110	<i>clindamycin hcl cap 150 mg</i>	6
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	110	<i>clindamycin hcl cap 300 mg</i>	6
<i>ciclopirox shampoo 1%</i>	110	<i>clindamycin hcl cap 75 mg</i>	6
<i>ciclopirox solution 8%</i>	110	<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	6
<i>cidofovir iv inj 75 mg/ml</i>	12	<i>clindamycin phosphate gel 1%</i>	109
<i>cilostazol tab 100 mg</i>	94	<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	6
<i>cilostazol tab 50 mg</i>	94	<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	6
CILOXAN OIN 0.3% OP	102		
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<i>cinacalcet hcl tab 30 mg (base equiv)</i>	80		
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	80		
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	80		
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<i>clindamycin phosphate in d5w iv soln</i>		<i>clonidine hcl tab 0.1 mg</i>	41
900 mg/50ml	6	<i>clonidine hcl tab 0.2 mg</i>	41
<i>clindamycin phosphate inj 600 mg/4ml</i>		<i>clonidine hcl tab 0.3 mg</i>	41
.....	6	<i>clopidogrel bisulfate tab 300 mg (base</i>	
<i>clindamycin phosphate inj 900 mg/6ml</i>		<i>equiv)</i>	95
.....	6	<i>clopidogrel bisulfate tab 75 mg (base</i>	
<i>clindamycin phosphate lotion 1% ...</i>	109	<i>equiv)</i>	94
<i>clindamycin phosphate soln 1%</i>	109	<i>clorazepate dipotassium tab 15 mg ..</i>	56
<i>clindamycin phosphate swab 1%</i>	109	<i>clorazepate dipotassium tab 3.75 mg</i>	56
<i>clindamycin phosphate vaginal cream</i>		<i>clorazepate dipotassium tab 7.5 mg</i>	56
2%	92	<i>clotrimazole cream 1%</i>	110
<i>clindamycin phosph-benzoyl peroxide</i>		<i>clotrimazole soln 1%</i>	110
<i>(refrig) gel 1.2 (1)-5%</i>	109	<i>clotrimazole troche 10 mg</i>	114
<i>clobazam suspension 2.5 mg/ml</i>	56	<i>clotrimazole w/ betamethasone cream</i>	
<i>clobazam tab 10 mg</i>	56	1-0.05%	110
<i>clobazam tab 20 mg</i>	56	<i>clozapine orally disintegrating tab 100</i>	
<i>clobetasol propionate cream 0.05%</i>	111	<i>mg</i>	51
<i>clobetasol propionate e</i>	111	<i>clozapine orally disintegrating tab 12.5</i>	
<i>clobetasol propionate emulsion foam</i>		<i>mg</i>	51
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<i>clobetasol propionate foam 0.05% .</i>	111	<i>mg</i>	51
<i>clobetasol propionate gel 0.05%</i>	111	<i>clozapine orally disintegrating tab 200</i>	
<i>clobetasol propionate lotion 0.05% .</i>	111	<i>mg</i>	51
<i>clobetasol propionate oint 0.05% ...</i>	111	<i>clozapine orally disintegrating tab 25</i>	
<i>clobetasol propionate shampoo 0.05%</i>		<i>mg</i>	51
.....	111	<i>clozapine tab 100 mg</i>	51
<i>clobetasol propionate soln 0.05% ...</i>	111	<i>clozapine tab 200 mg</i>	51
<i>clobetasol propionate spray 0.05% .</i>	111	<i>clozapine tab 25 mg</i>	51
<i>clocortolone pivalate cream 0.1% ...</i>	111	<i>clozapine tab 50 mg</i>	51
<i>clodan sha 0.05%</i>	111	COARTEM TAB 20-120MG.....	9
<i>clofarabine iv soln 1 mg/ml</i>	19	<i>colchicine tab 0.6 mg.....</i>	1
<i>clomipramine hcl cap 25 mg</i>	46	<i>colchicine w/ probenecid tab 0.5-500</i>	
<i>clomipramine hcl cap 50 mg</i>	46	<i>mg</i>	1
<i>clomipramine hcl cap 75 mg</i>	46	<i>colesevelam hcl tab 625 mg</i>	35
<i>clonazepam orally disintegrating tab</i>		<i>colestipol hcl granule packets 5 gm ..</i>	35
0.125 mg	56	<i>colestipol hcl tab 1 gm</i>	35
<i>clonazepam orally disintegrating tab</i>		<i>colistimethate sod for inj 150 mg</i>	
0.25 mg	56	<i>(colistin base activity)</i>	6
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CORLANOR TAB 7.5MG	41	<i>dacarbazine for inj 200 mg</i>	21
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CREON CAP 6000UNIT	88	<i>dapsone tab 100 mg.....</i>	6
<i>cromolyn sodium ophth soln 4%</i>	103	<i>dapsone tab 25 mg</i>	6
<i>cromolyn sodium oral conc 100 mg/5ml</i>	88	DAPTACEL INJ	98
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	106	<i>daptomycin for iv soln 500 mg.....</i>	6
<i>cryselle-28</i>	74	<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	91
<i>cyclobenzaprine hcl tab 10 mg</i>	67	<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	91
<i>cyclobenzaprine hcl tab 5 mg.....</i>	67	<i>darunavir tab 600 mg</i>	9
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<i>cyclophosphamide cap 25 mg</i>	18	DARZALEX SOL 400MG/20	23
<i>cyclophosphamide cap 50 mg</i>	18	<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	19
<i>cyclosporine (ophth) emulsion 0.05%</i>	104	DAURISMO TAB 100MG.....	23
<i>cyclosporine cap 100 mg</i>	97	DAURISMO TAB 25MG	23
<i>cyclosporine cap 25 mg.....</i>	97	<i>deblitane.....</i>	74
<i>cyclosporine iv soln 50 mg/ml.....</i>	97	<i>decitabine for inj 50 mg</i>	19
<i>cyclosporine modified cap 100 mg ...</i>	97	<i>deferasirox granules packet 180 mg .</i>	73
<i>cyclosporine modified cap 25 mg.....</i>	97	<i>deferasirox granules packet 360 mg .</i>	73
<i>cyclosporine modified cap 50 mg.....</i>	97	<i>deferasirox granules packet 90 mg ...</i>	73
<i>cyclosporine modified oral soln 100 mg/ml.....</i>	97	<i>deferasirox tab 180 mg</i>	73
<i>cyproheptadine hcl tab 4 mg</i>	105	<i>deferasirox tab 360 mg</i>	73
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<i>cyred eq tab</i>	74	<i>deferasirox tab for oral susp 250 mg</i>	73
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CYSTAGON CAP 50MG.....	80	<i>deferiprone tab 500 mg</i>	73
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<i>cytarabine inj 20 mg/ml</i>	19	<i>delyla</i>	74
<i>cytarabine inj pf 100 mg/ml</i>	19	DEPEN TITRA TAB 250MG	73
<i>cytarabine inj pf 20 mg/ml</i>	19	DEPO-MEDROL INJ 20MG/ML.....	79
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D10W/NAACL INJ 0.2%	100	DEPO-MEDROL INJ 80MG/ML.....	79
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	92	DEPO-SQ PROV INJ 104	74
		<i>depo-testost inj 100mg/ml</i>	68

<i>depo-testost inj 200mg/ml</i>	68	<i>dexlansoprazole cap delayed release</i>	60
<i>DESCOVY TAB 120-15MG</i>	11	<i>mg</i>	89
<i>DESCOVY TAB 200/25MG</i>	11	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desipramine hcl tab 10 mg</i>	46	<i>10 mg</i>	61
<i>desipramine hcl tab 100 mg</i>	46	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desipramine hcl tab 150 mg</i>	46	<i>15 mg</i>	61
<i>desipramine hcl tab 25 mg</i>	46	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desipramine hcl tab 50 mg</i>	46	<i>20 mg</i>	61
<i>desipramine hcl tab 75 mg</i>	46	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desloratadine tab 5 mg</i>	105	<i>25 mg</i>	61
<i>desloratadine tab orally disintegrating</i>		<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>2.5 mg</i>	105	<i>30 mg</i>	61
<i>desloratadine tab orally disintegrating</i>		<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>5 mg</i>	105	<i>35 mg</i>	61
<i>desmopressin acetate nasal spray soln</i>		<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>0.01% (refrigerated)</i>	80	<i>40 mg</i>	61
<i>desmopressin acetate tab 0.1 mg</i>	80	<i>dexmethylphenidate hcl cap er 24 hr 5</i>	
<i>desmopressin acetate tab 0.2 mg</i>	80	<i>mg</i>	61
<i>desogest-eth estrad & eth estrad tab</i>		<i>dexmethylphenidate hcl tab 10 mg</i>	62
<i>0.15-0.02/0.01 mg(21/5)</i>	74	<i>dexmethylphenidate hcl tab 2.5 mg</i>	61
<i>desogestrel & ethinyl estradiol tab 0.15</i>		<i>dexmethylphenidate hcl tab 5 mg</i>	62
<i>mg-30 mcg</i>	74	<i>dextrazoxane hcl for inj 250 mg (base</i>	
<i>desonide cream 0.05%</i>	111	<i>equivalent)</i>	29
<i>desonide lotion 0.05%</i>	111	<i>dextroamphetamine sulfat cap er 24hr</i>	
<i>desonide oint 0.05%</i>	111	<i>10 mg</i>	62
<i>desvenlafaxine succinate tab er 24hr</i>		<i>dextroamphetamine sulfat cap er 24hr</i>	
<i>100 mg (base equiv)</i>	46	<i>15 mg</i>	62
<i>desvenlafaxine succinate tab er 24hr</i>		<i>dextroamphetamine sulfat cap er 24hr</i>	
<i>25 mg (base equiv)</i>	46	<i>5 mg</i>	62
<i>desvenlafaxine succinate tab er 24hr</i>		<i>dextroamphetamine sulfat oral</i>	
<i>50 mg (base equiv)</i>	46	<i>solution 5 mg/5ml</i>	62
<i>dexamethasone sodium phosphate inj</i>		<i>dextroamphetamine sulfat tab 10 mg</i>	
<i>10 mg/ml</i>	79	.....	62
<i>dexamethasone sodium phosphate inj</i>		<i>dextroamphetamine sulfat tab 5 mg</i>	62
<i>120 mg/30ml</i>	79	<i>dextrose 10% w/ sodium chloride</i>	
<i>dexamethasone sodium phosphate</i>		<i>0.45%</i>	100
<i>ophth soln 0.1%</i>	103	<i>DEXTROSE 2.5% W/ SODIUM</i>	
<i>dexamethasone soln 0.5 mg/5ml</i>	79	<i>CHLORIDE 0.45%</i>	100
<i>dexamethasone tab 0.5 mg</i>	79	<i>dextrose 5% in lactated ringers</i>	100
<i>dexamethasone tab 0.75 mg</i>	79	<i>dextrose 5% w/ sodium chloride 0.2%</i>	
<i>dexamethasone tab 1 mg</i>	79	.....	100
<i>dexamethasone tab 1.5 mg</i>	79	<i>dextrose 5% w/ sodium chloride 0.45%</i>	
<i>dexamethasone tab 2 mg</i>	79	.....	100
<i>dexamethasone tab 4 mg</i>	79	<i>dextrose 5% w/ sodium chloride 0.9%</i>	
<i>dexamethasone tab 6 mg</i>	79	.....	100
<i>dexlansoprazole cap delayed release 30</i>		<i>dextrose inj 10%</i>	101
<i>mg</i>	89	<i>dextrose inj 5%</i>	101

DIACOMIT CAP 250MG.....	56	<i>difluprednate ophth emulsion 0.05%</i>	
DIACOMIT CAP 500MG.....	56	.....	103
DIACOMIT PAK 250MG.....	56	<i>digoxin inj 0.25 mg/ml.....</i>	41
DIACOMIT PAK 500MG.....	56	<i>digoxin oral soln 0.05 mg/ml</i>	41
DIASTAT ACDL GEL 5-10MG	56	<i>digoxin tab 125 mcg (0.125 mg)</i>	41
<i>diazepam inj 5 mg/ml.....</i>	56	<i>digoxin tab 250 mcg (0.25 mg).....</i>	41
<i>diazepam intensol</i>	56	<i>dihydroergotamine mesylate inj 1</i>	
<i>diazepam oral soln 1 mg/ml</i>	56	<i>mg/ml.....</i>	64
<i>diazepam rectal gel delivery system 10</i>		<i>dihydroergotamine mesylate nasal</i>	
<i>mg</i>	56	<i>spray 4 mg/ml</i>	64
<i>diazepam rectal gel delivery system 2.5</i>		DILANTIN CAP 100MG	56
<i>mg</i>	56	DILANTIN CAP 30MG	56
<i>diazepam rectal gel delivery system 20</i>		DILANTIN CHW 50MG	56
<i>mg</i>	56	DILANTIN-125 SUS 125/5ML	56
<i>diazepam tab 10 mg</i>	56	<i>diltiazem hcl cap er 12hr 120 mg</i>	38
<i>diazepam tab 2 mg.....</i>	56	<i>diltiazem hcl cap er 12hr 60 mg</i>	38
<i>diazepam tab 5 mg.....</i>	56	<i>diltiazem hcl cap er 12hr 90 mg</i>	38
<i>diazoxide susp 50 mg/ml.....</i>	80	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac potassium tab 50 mg</i>	1	<i>120 mg</i>	38
<i>diclofenac sodium gel 1% (1.16%</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diethylamine equiv)</i>	113	<i>180 mg</i>	38
<i>diclofenac sodium ophth soln 0.1%. 103</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac sodium soln 1.5%.....</i>	113	<i>240 mg</i>	38
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>25 mg</i>	1	<i>300 mg</i>	38
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>50 mg</i>	1	<i>360 mg</i>	38
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl extended release beads</i>	
<i>75 mg</i>	1	<i>cap er 24hr 360 mg</i>	38
<i>diclofenac sodium tab er 24hr 100 mg 1</i>		<i>diltiazem hcl extended release beads</i>	
<i>diclofenac w/ misoprostol tab delayed</i>		<i>cap er 24hr 420 mg</i>	38
<i>release 50-0.2 mg</i>	1	<i>diltiazem hcl iv soln 50 mg/10ml (5</i>	
<i>diclofenac w/ misoprostol tab delayed</i>		<i>mg/ml)</i>	38
<i>release 75-0.2 mg</i>	1	<i>diltiazem hcl tab 120 mg.....</i>	38
<i>dicloxacillin sodium cap 250 mg</i>	16	<i>diltiazem hcl tab 30 mg.....</i>	38
<i>dicloxacillin sodium cap 500 mg</i>	17	<i>diltiazem hcl tab 60 mg.....</i>	38
<i>dicyclomine hcl cap 10 mg.....</i>	86	<i>diltiazem hcl tab 90 mg.....</i>	38
<i>dicyclomine hcl oral soln 10 mg/5ml .86</i>		<i>diltiazem hcl tab er 24hr 120 mg.....</i>	38
<i>dicyclomine hcl tab 20 mg</i>	86	<i>diltiazem hcl tab er 24hr 180 mg.....</i>	38
<i>diethylpropion hcl tab 25 mg</i>	43	<i>diltiazem hcl tab er 24hr 240 mg.....</i>	38
<i>diethylpropion hcl tab er 24hr 75 mg 43</i>		<i>diltiazem hcl tab er 24hr 300 mg.....</i>	38
DIFICID SUS	15	<i>diltiazem hcl tab er 24hr 360 mg.....</i>	38
DIFICID TAB 200MG	15	<i>diltiazem hcl tab er 24hr 420 mg.....</i>	38
<i>diflorasone diacetate cream 0.05%. 111</i>		<i>dilt-xr</i>	38
<i>diflorasone diacetate oint 0.05% 111</i>		<i>dimethyl fumarate capsule delayed</i>	
<i>diflunisal tab 500 mg</i>	1	<i>release 120 mg</i>	66

<i>dimethyl fumarate capsule delayed release 240 mg</i>	66	<i>doxazosin mesylate tab 2 mg</i>	31
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	66	<i>doxazosin mesylate tab 4 mg</i>	31
DIP/TET PED INJ 25-5LFU	99	<i>doxazosin mesylate tab 8 mg</i>	31
<i>diphenhydramine hcl inj 50 mg/ml</i> .	105	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	63
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	88	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	63
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	88	<i>doxepin hcl cap 10 mg</i>	46
<i>disopyramide phosphate cap 100 mg</i>	33	<i>doxepin hcl cap 100 mg</i>	46
<i>disopyramide phosphate cap 150 mg</i>	33	<i>doxepin hcl cap 150 mg</i>	46
<i>disulfiram tab 250 mg</i>	68	<i>doxepin hcl cap 25 mg</i>	46
<i>disulfiram tab 500 mg</i>	68	<i>doxepin hcl cap 50 mg</i>	46
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	57	<i>doxepin hcl cap 75 mg</i>	46
<i>divalproex sodium tab delayed release 125 mg</i>	57	<i>doxepin hcl cap 10 mg/ml</i>	46
<i>divalproex sodium tab delayed release 250 mg</i>	57	<i>doxepin hcl cream 5%</i>	113
<i>divalproex sodium tab delayed release 500 mg</i>	57	<i>doxercalciferol cap 0.5 mcg</i>	85
<i>divalproex sodium tab er 24 hr 250 mg</i>	57	<i>doxercalciferol cap 1 mcg</i>	85
<i>divalproex sodium tab er 24 hr 500 mg</i>	57	<i>doxercalciferol cap 2.5 mcg</i>	85
DOCETAXEL INJ 160/16ML	22	<i>doxorubicin hcl inj 2 mg/ml</i>	19
DOCETAXEL INJ 80MG/4ML	22	<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	19
<i>dofetilide cap 125 mcg (0.125 mg)</i> ...	33	<i>doxy 100</i>	17
<i>dofetilide cap 250 mcg (0.25 mg)</i>	33	<i>doxycycline hyclate cap 100 mg</i>	17
<i>dofetilide cap 500 mcg (0.5 mg)</i>	33	<i>doxycycline hyclate cap 50 mg</i>	17
DOJOLVI LIQ 100%	80	<i>doxycycline hyclate tab 100 mg</i>	17
<i>dolishale</i>	74	<i>doxycycline hyclate tab 20 mg</i>	17
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	44	<i>doxycycline hyclate tab delayed release 100 mg</i>	17
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	44	<i>doxycycline hyclate tab delayed release 150 mg</i>	17
<i>donepezil hydrochloride tab 10 mg</i> ...	44	<i>doxycycline hyclate tab delayed release 200 mg</i>	17
<i>donepezil hydrochloride tab 23 mg</i> ...	44	<i>doxycycline hyclate tab delayed release 50 mg</i>	17
<i>donepezil hydrochloride tab 5 mg</i>	44	<i>doxycycline hyclate tab delayed release 75 mg</i>	17
DORIBAX INJ 250MG	6	<i>doxycycline monohydrate cap 100 mg</i>	17
<i>dorzolamide hcl ophth soln 2%</i>	103	<i>doxycycline monohydrate cap 50 mg</i>	17
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	103	<i>doxycycline monohydrate cap 75 mg</i>	17
<i>dotti</i>	78	<i>doxycycline monohydrate for susp 25 mg/5ml</i>	18
DOVATO TAB 50-300MG	11	<i>doxycycline monohydrate tab 100 mg</i>	18
<i>doxazosin mesylate tab 1 mg</i>	31	<i>doxycycline monohydrate tab 150 mg</i>	18
		<i>doxycycline monohydrate tab 50 mg</i>	18

<i>doxycycline monohydrate tab 75 mg</i>	18	<i>efavirenz-lamivudine-tenofovir df tab</i>	
<i>dronabinol cap 10 mg</i>	85	<i>400-300-300 mg</i>	11
<i>dronabinol cap 2.5 mg</i>	85	<i>efavirenz-lamivudine-tenofovir df tab</i>	
<i>dronabinol cap 5 mg</i>	85	<i>600-300-300 mg</i>	11
<i>drospirenone-ethinyl estradiol tab 3-</i>		<i>effervescent pot chloride</i>	101
<i>0.02 mg</i>	74	EGRIFTA SV INJ 2MG.....	81
<i>drospirenone-ethinyl estradiol tab 3-</i>		<i>eletriptan hydrobromide tab 20 mg</i>	
<i>0.03 mg</i>	74	<i>(base equivalent)</i>	64
DROXIA CAP 200MG	94	<i>eletriptan hydrobromide tab 40 mg</i>	
DROXIA CAP 300MG	94	<i>(base equivalent)</i>	64
DROXIA CAP 400MG	94	ELIGARD INJ 22.5MG.....	20
<i>droxidopa cap 100 mg</i>	41	ELIGARD INJ 30MG	20
<i>droxidopa cap 200 mg</i>	41	ELIGARD INJ 45MG	20
<i>droxidopa cap 300 mg</i>	41	ELIGARD INJ 7.5MG	20
DULERA AER 100-5MCG	108	ELIQUIS ST P TAB 5MG	92
DULERA AER 200-5MCG	108	ELIQUIS TAB 2.5MG	92
DULERA AER 50-5MCG.....	108	ELIQUIS TAB 5MG	92
<i>duloxetine hcl enteric coated pellets</i>		ELITEK INJ 1.5MG	29
<i>cap 20 mg (base eq)</i>	46	ELITEK INJ 7.5MG	29
<i>duloxetine hcl enteric coated pellets</i>		ELMIRON CAP 100MG	91
<i>cap 30 mg (base eq)</i>	46	<i>eluryng mis</i>	74
<i>duloxetine hcl enteric coated pellets</i>		EMCYT CAP 140MG.....	20
<i>cap 40 mg (base eq)</i>	46	EMGALITY INJ 100MG/ML.....	64
<i>duloxetine hcl enteric coated pellets</i>		EMGALITY INJ 120MG/ML.....	64
<i>cap 60 mg (base eq)</i>	46	EMPLICITI INJ 300MG.....	23
DUPIXENT INJ 100/0.67	95	EMPLICITI INJ 400MG.....	23
DUPIXENT INJ 200/1.14.....	95	EMSAM DIS 12MG/24H	46
DUPIXENT INJ 200MG.....	95	EMSAM DIS 6MG/24HR	46
DUPIXENT INJ 300/2ML	95	EMSAM DIS 9MG/24HR	46
<i>dutasteride cap 0.5 mg</i>	89	<i>emtricitabine caps 200 mg</i>	9
<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>		<i>emtricitabine-tenofovir disoproxil</i>	
<i>mg</i>	89	<i>fumarate tab 100-150 mg</i>	11
E		<i>emtricitabine-tenofovir disoproxil</i>	
<i>e.e.s. 400</i>	15	<i>fumarate tab 133-200 mg</i>	11
EDARBI TAB 40MG	33	<i>emtricitabine-tenofovir disoproxil</i>	
EDARBI TAB 80MG	33	<i>fumarate tab 167-250 mg</i>	11
EDARBYCLOR TAB 40-12.5	32	<i>emtricitabine-tenofovir disoproxil</i>	
EDARBYCLOR TAB 40-25MG	32	<i>fumarate tab 200-300 mg</i>	11
EDEX KIT 10MCG	90	EMTRIVA SOL 10MG/ML.....	9
EDEX KIT 20MCG	90	EMVERM CHW 100MG	6
EDEX KIT 40MCG	90	<i>enalapril maleate & hydrochlorothiazide</i>	
EDURANT TAB 25MG.....	9	<i>tab 10-25 mg</i>	29
<i>efavirenz cap 200 mg</i>	9	<i>enalapril maleate & hydrochlorothiazide</i>	
<i>efavirenz cap 50 mg</i>	9	<i>tab 5-12.5 mg</i>	29
<i>efavirenz tab 600 mg</i>	9	<i>enalapril maleate tab 10 mg</i>	30
<i>efavirenz-emtricitabine-tenofovir df tab</i>		<i>enalapril maleate tab 2.5 mg</i>	30
<i>600-200-300 mg</i>	11	<i>enalapril maleate tab 20 mg</i>	30

<i>enalapril maleate tab 5 mg</i>	30	<i>epinastine hcl ophth soln 0.05%</i>	103
ENBREL INJ 25/0.5ML	95	<i>epinephrine solution auto-injector 0.15</i>	
ENBREL INJ 25MG	95	<i>mg/0.15ml (1:1000)</i>	107
ENBREL INJ 50MG/ML	95	<i>epinephrine solution auto-injector 0.15</i>	
ENBREL MINI INJ 50MG/ML	95	<i>mg/0.3ml (1:2000)</i>	107
ENBREL SRCLK INJ 50MG/ML.....	95	<i>epinephrine solution auto-injector 0.3</i>	
ENDARI POW 5GM.....	81	<i>mg/0.3ml (1:1000)</i>	106
<i>endocet tab 10-325mg</i>	4	<i>epirubicin hcl iv soln 200 mg/100ml (2</i>	
<i>endocet tab 2.5-325</i>	4	<i>mg/ml)</i>	19
<i>endocet tab 5-325mg</i>	4	<i>epitol</i>	57
<i>endocet tab 7.5-325mg</i>	4	<i>eplerenone tab 25 mg</i>	31
ENGERIX-B INJ 10/0.5ML	99	<i>eplerenone tab 50 mg</i>	31
ENGERIX-B INJ 20MCG/ML	99	EPRONTIA SOL 25MG/ML	57
<i>enilloring mis</i>	74	ERBITUX INJ 100MG	23
<i>enoxaparin sodium inj 300 mg/3ml</i> ..	92	ERBITUX INJ 200MG	23
<i>enoxaparin sodium inj soln pref syr 100</i>		<i>ergoloid mesylates tab 1 mg</i>	44
<i>mg/ml</i>	92	<i>ergotamine w/ caffeine tab 1-100 mg</i>	
<i>enoxaparin sodium inj soln pref syr 120</i>		.....	64
<i>mg/0.8ml</i>	92	ERIVEDGE CAP 150MG.....	23
<i>enoxaparin sodium inj soln pref syr 150</i>		ERLEADA TAB 240MG	20
<i>mg/ml</i>	92	ERLEADA TAB 60MG	20
<i>enoxaparin sodium inj soln pref syr 30</i>		<i>erlotinib hcl tab 100 mg (base</i>	
<i>mg/0.3ml</i>	92	<i>equivalent)</i>	24
<i>enoxaparin sodium inj soln pref syr 40</i>		<i>erlotinib hcl tab 150 mg (base</i>	
<i>mg/0.4ml</i>	92	<i>equivalent)</i>	24
<i>enoxaparin sodium inj soln pref syr 60</i>		<i>erlotinib hcl tab 25 mg (base</i>	
<i>mg/0.6ml</i>	92	<i>equivalent)</i>	24
<i>enoxaparin sodium inj soln pref syr 80</i>		<i>errin</i>	74
<i>mg/0.8ml</i>	92	<i>ertapenem sodium for inj 1 gm (base</i>	
<i>enpresse-28</i>	74	<i>equivalent)</i>	7
<i>enskyce</i>	74	ERWINAZE INJ 10000UNT	21
ENSPRYNG INJ.....	65	<i>ery</i>	109
<i>entacapone tab 200 mg</i>	49	<i>ery-tab</i>	15
<i>entecavir tab 0.5 mg</i>	12	ERYTHROCIN INJ 500MG.....	15
<i>entecavir tab 1 mg</i>	12	<i>erythrocin stearate</i>	15
ENTRESTO TAB 24-26MG	32	<i>erythromycin ethylsuccinate tab 400</i>	
ENTRESTO TAB 49-51MG	32	<i>mg</i>	15
ENTRESTO TAB 97-103MG.....	32	<i>erythromycin gel 2%</i>	109
<i>enulose</i>	87	<i>erythromycin ophth oint 5 mg/gm</i> ..	102
ENVARUSUS XR TAB 0.75MG	97	<i>erythromycin soln 2%</i>	109
ENVARUSUS XR TAB 1MG.....	97	<i>erythromycin tab 250 mg</i>	15
ENVARUSUS XR TAB 4MG.....	97	<i>erythromycin tab 500 mg</i>	15
EPCLUSA PAK 150-37.5.....	12	<i>erythromycin tab delayed release 250</i>	
EPCLUSA PAK 200-50MG.....	12	<i>mg</i>	15
EPCLUSA TAB 200-50MG.....	12	<i>erythromycin tab delayed release 333</i>	
EPCLUSA TAB 400-100.....	12	<i>mg</i>	15
EPIDIOLEX SOL 100MG/ML.....	57		

<i>erythromycin tab delayed release 500 mg</i>	15	<i>estradiol td patch weekly 0.075 mg/24hr</i>	78
<i>erythromycin w/ delayed release particles cap 250 mg</i>	15	<i>estradiol td patch weekly 0.1 mg/24hr</i>	78
<i>ESBRIET CAP 267MG</i>	107	<i>estradiol vaginal cream 0.1 mg/gm</i> ..	78
<i>ESBRIET TAB 267MG</i>	107	<i>estradiol vaginal tab 10 mcg</i>	78
<i>ESBRIET TAB 801MG</i>	107	<i>estradiol valerate im in oil 10 mg/ml</i>	78
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	46	<i>estradiol valerate im in oil 20 mg/ml</i>	78
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	47	<i>estropipate tab 1.5 mg</i>	78
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	47	<i>estropipate tab 3 mg</i>	78
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	47	<i>ethambutol hcl tab 100 mg</i>	12
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	89	<i>ethambutol hcl tab 400 mg</i>	12
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	89	<i>ethosuximide cap 250 mg</i>	57
<i>estarylla tab 0.25-35</i>	74	<i>ethosuximide soln 250 mg/5ml</i>	57
<i>estazolam tab 1 mg</i>	63	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	74
<i>estazolam tab 2 mg</i>	63	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	75
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	78	<i>etodolac cap 200 mg</i>	1
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	78	<i>etodolac cap 300 mg</i>	1
<i>estradiol tab 0.5 mg</i>	78	<i>etodolac tab 400 mg</i>	1
<i>estradiol tab 1 mg</i>	78	<i>etodolac tab 500 mg</i>	1
<i>estradiol tab 2 mg</i>	78	<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	75
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	78	<i>ETOPOPHOS INJ 100MG</i>	22
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	78	<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	22
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	78	<i>etravirine tab 100 mg</i>	9
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	78	<i>etravirine tab 200 mg</i>	9
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	78	<i>EUCRISA OIN 2%</i>	113
<i>estradiol td patch weekly 0.025 mg/24hr</i>	78	<i>EULEXIN CAP 125MG</i>	20
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	78	<i>euthyrox</i>	83
<i>estradiol td patch weekly 0.05 mg/24hr</i>	78	<i>everolimus tab 0.25 mg</i>	97
<i>estradiol td patch weekly 0.06 mg/24hr</i>	78	<i>everolimus tab 0.5 mg</i>	97
		<i>everolimus tab 0.75 mg</i>	97
		<i>everolimus tab 1 mg</i>	97
		<i>everolimus tab 10 mg</i>	24
		<i>everolimus tab 2.5 mg</i>	24
		<i>everolimus tab 5 mg</i>	24
		<i>everolimus tab 7.5 mg</i>	24
		<i>everolimus tab for oral susp 2 mg</i>	24
		<i>everolimus tab for oral susp 3 mg</i>	24
		<i>everolimus tab for oral susp 5 mg</i>	24
		<i>EVOTAZ TAB 300-150</i>	11
		<i>EVRYSDI SOL</i>	65
		<i>exemestane tab 25 mg</i>	20
		<i>EXKIVITY CAP 40MG</i>	24

EXSERVAN MIS 50MG	65	<i>fenofibrate micronized cap 43 mg</i>	34
EYLEA INJ 2/0.05ML	104	<i>fenofibrate micronized cap 67 mg</i>	34
EYSUVIS DRO 0.25%.....	103	<i>fenofibrate tab 120 mg</i>	34
<i>ezetimibe tab 10 mg</i>	35	<i>fenofibrate tab 145 mg</i>	34
<i>ezetimibe-simvastatin tab 10-10 mg</i>	35	<i>fenofibrate tab 160 mg</i>	34
<i>ezetimibe-simvastatin tab 10-20 mg</i>	35	<i>fenofibrate tab 40 mg</i>	34
<i>ezetimibe-simvastatin tab 10-40 mg</i>	35	<i>fenofibrate tab 48 mg</i>	34
<i>ezetimibe-simvastatin tab 10-80 mg</i>	35	<i>fenofibrate tab 54 mg</i>	34
F		<i>fenoprofen calcium tab 600 mg</i>	1
<i>falmina</i>	75	<i>fentanyl citrate buccal tab 100 mcg</i> (base equiv)	4
<i>famciclovir tab 125 mg</i>	12	<i>fentanyl citrate buccal tab 200 mcg</i> (base equiv)	4
<i>famciclovir tab 250 mg</i>	12	<i>fentanyl citrate buccal tab 400 mcg</i> (base equiv)	4
<i>famciclovir tab 500 mg</i>	12	<i>fentanyl citrate buccal tab 600 mcg</i> (base equiv)	4
<i>famotidine for susp 40 mg/5ml</i>	87	<i>fentanyl citrate buccal tab 800 mcg</i> (base equiv)	4
<i>famotidine in nacl 0.9% iv soln 20</i> <i>mg/50ml</i>	87	<i>fentanyl citrate lozenge on a handle</i> 1200 mcg.....	5
<i>famotidine preservative free inj 20</i> <i>mg/2ml</i>	87	<i>fentanyl citrate lozenge on a handle</i> 1600 mcg.....	5
<i>famotidine tab 20 mg</i>	87	<i>fentanyl citrate lozenge on a handle</i> 200 mcg.....	4
<i>famotidine tab 40 mg</i>	87	<i>fentanyl citrate lozenge on a handle</i> 400 mcg.....	4
FANAPT PAK	51	<i>fentanyl citrate lozenge on a handle</i> 600 mcg.....	5
FANAPT TAB 10MG	51	<i>fentanyl citrate lozenge on a handle</i> 800 mcg.....	5
FANAPT TAB 12MG	51	<i>fentanyl td patch 72hr 100 mcg/hr</i>	3
FANAPT TAB 1MG	51	<i>fentanyl td patch 72hr 12 mcg/hr</i>	2
FANAPT TAB 2MG	51	<i>fentanyl td patch 72hr 25 mcg/hr</i>	2
FANAPT TAB 4MG	51	<i>fentanyl td patch 72hr 50 mcg/hr</i>	2
FANAPT TAB 6MG	51	<i>fentanyl td patch 72hr 75 mcg/hr</i>	3
FANAPT TAB 8MG	51	<i>fesoterodine fumarate tab er 24hr 4</i> <i>mg</i>	91
FARXIGA TAB 10MG.....	69	<i>fesoterodine fumarate tab er 24hr 8</i> <i>mg</i>	91
FARXIGA TAB 5MG	69	FETZIMA CAP 120MG.....	47
FARYDAK CAP 10MG	24	FETZIMA CAP 20MG.....	47
FARYDAK CAP 15MG	24	FETZIMA CAP 40MG.....	47
FARYDAK CAP 20MG	24	FETZIMA CAP 80MG.....	47
FASENRA INJ 30MG/ML	107	FETZIMA CAP TITRATIO	47
FASENRA PEN INJ 30MG/ML	107	<i>finasteride tab 5 mg</i>	89
FASLODEX INJ 250/5ML	20		
<i>febuxostat tab 40 mg</i>	1		
<i>febuxostat tab 80 mg</i>	1		
<i>felbamate susp 600 mg/5ml</i>	57		
<i>felbamate tab 400 mg</i>	57		
<i>felbamate tab 600 mg</i>	57		
<i>felodipine tab er 24hr 10 mg</i>	38		
<i>felodipine tab er 24hr 2.5 mg</i>	38		
<i>felodipine tab er 24hr 5 mg</i>	38		
<i>fenofibrate micronized cap 130 mg</i> ...34			
<i>fenofibrate micronized cap 134 mg</i> ...34			
<i>fenofibrate micronized cap 200 mg</i> ...34			

<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	113
.....66	
FINTEPLA SOL 2.2MG/ML	57
FIRDAPSE TAB 10MG	65
FIRMAGON INJ 120MG	20
FIRMAGON INJ 80MG.....	20
FIRVANQ SOL 25MG/ML	7
FIRVANQ SOL 50MG/ML	7
<i>flac oil 0.01%</i>	104
FLAREX SUS 0.1% OP	103
<i>flavoxate hcl tab 100 mg</i>	91
<i>flecainide acetate tab 100 mg</i>	33
<i>flecainide acetate tab 150 mg</i>	33
<i>flecainide acetate tab 50 mg</i>	33
<i>fluconazole for susp 10 mg/ml</i>	8
<i>fluconazole for susp 40 mg/ml</i>	8
<i>fluconazole in dextrose</i>	8
<i>fluconazole in nacl 0.9% inj 200</i>	
<i>mg/100ml</i>	8
<i>fluconazole tab 100 mg</i>	8
<i>fluconazole tab 150 mg</i>	8
<i>fluconazole tab 200 mg</i>	8
<i>fluconazole tab 50 mg</i>	8
<i>flucytosine cap 250 mg</i>	8
<i>flucytosine cap 500 mg</i>	8
<i>fludarabine phosphate for inj 50 mg</i> .	19
<i>fludrocortisone acetate tab 0.1 mg</i> ...	79
<i>flunisolide nasal soln 25 mcg/act</i>	
<i>(0.025%)</i>	108
<i>fluocinolone acetonide (otic) oil 0.01%</i>	
.....	104
<i>fluocinolone acetonide cream 0.01%</i>	
.....	112
<i>fluocinolone acetonide cream 0.025%</i>	
.....	112
<i>fluocinolone acetonide oint 0.025%</i>	112
<i>fluocinolone acetonide sc</i>	112
<i>fluocinolone acetonide soln 0.01%</i> ..	112
<i>fluocinonide cream 0.05%</i>	112
<i>fluocinonide emulsified base cream</i>	
<i>0.05%</i>	112
<i>fluocinonide gel 0.05%</i>	112
<i>fluocinonide oint 0.05%</i>	112
<i>fluocinonide soln 0.05%</i>	112
<i>fluorometholone ophth susp 0.1%</i> ..	103
FLUOROPLEX CRE 1%	113
<i>fluorouracil cream 0.5%</i>	113
<i>fluorouracil cream 5%</i>	113
<i>fluorouracil iv soln 1 gm/20ml (50</i>	
<i>mg/ml)</i>	19
<i>fluorouracil iv soln 5 gm/100ml (50</i>	
<i>mg/ml)</i>	19
<i>fluorouracil soln 2%</i>	113
<i>fluorouracil soln 5%</i>	113
<i>fluoxetine hcl cap 10 mg</i>	47
<i>fluoxetine hcl cap 20 mg</i>	47
<i>fluoxetine hcl cap 40 mg</i>	47
<i>fluoxetine hcl solution 20 mg/5ml</i>	47
<i>fluoxetine hcl tab 10 mg</i>	47
<i>fluoxetine hcl tab 20 mg</i>	47
<i>fluphenazine decanoate inj 25 mg/ml</i>	52
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	52
<i>fluphenazine hcl inj 2.5 mg/ml</i>	52
<i>fluphenazine hcl oral conc 5 mg/ml</i> ..	52
<i>fluphenazine hcl tab 1 mg</i>	52
<i>fluphenazine hcl tab 10 mg</i>	52
<i>fluphenazine hcl tab 2.5 mg</i>	52
<i>fluphenazine hcl tab 5 mg</i>	52
<i>flurazepam hcl cap 15 mg</i>	63
<i>flurazepam hcl cap 30 mg</i>	63
<i>flurbiprofen sodium ophth soln 0.03%</i>	
.....	103
<i>flurbiprofen tab 100 mg</i>	1
<i>flutamide cap 125 mg</i>	20
<i>fluticasone propionate aer pow ba 100</i>	
<i>mcg/act</i>	108
<i>fluticasone propionate aer pow ba 250</i>	
<i>mcg/act</i>	108
<i>fluticasone propionate aer pow ba 50</i>	
<i>mcg/act</i>	108
<i>fluticasone propionate cream 0.05%</i>	
.....	112
<i>fluticasone propionate hfa inhal aer</i>	110
<i>mcg/act (125/valve)</i>	108
<i>fluticasone propionate hfa inhal aer</i>	220
<i>mcg/act (250/valve)</i>	108
<i>fluticasone propionate hfa inhal aero</i>	44
<i>mcg/act (50/valve)</i>	108
<i>fluticasone propionate nasal susp</i>	50
<i>mcg/act</i>	108
<i>fluticasone propionate oint 0.005%</i>	112
<i>fluticasone-salmeterol aer powder ba</i>	
<i>100-50 mcg/act</i>	108

<i>fluticasone-salmeterol aer powder ba</i> <i>250-50 mcg/act</i>	108	FRAGMIN INJ 18000UNT	93
<i>fluticasone-salmeterol aer powder ba</i> <i>500-50 mcg/act</i>	108	FRAGMIN INJ 2500/0.2	92
<i>fluvastatin sodium cap 20 mg (base</i> <i>equivalent)</i>	35	FRAGMIN INJ 5000/0.2	92
<i>fluvastatin sodium cap 40 mg (base</i> <i>equivalent)</i>	35	FRAGMIN INJ 7500/0.3	92
<i>fluvastatin sodium tab er 24 hr 80 mg</i> <i>(base equivalent)</i>	35	FRAGMIN INJ 95000UNT	93
<i>fluvoxamine maleate cap er 24hr 100</i> <i>mg</i>	44	<i>frovatriptan succinate tab 2.5 mg (base</i> <i>equivalent)</i>	64
<i>fluvoxamine maleate cap er 24hr 150</i> <i>mg</i>	44	FRUZAQLA CAP 1MG	24
<i>fluvoxamine maleate tab 100 mg</i>	44	FRUZAQLA CAP 5MG	24
<i>fluvoxamine maleate tab 25 mg</i>	44	<i>furosemide inj 10 mg/ml</i>	40
<i>fluvoxamine maleate tab 50 mg</i>	44	<i>furosemide oral soln 10 mg/ml</i>	40
FML FORTE SUS 0.25% OP	103	<i>furosemide tab 20 mg</i>	40
<i>fondaparinux sodium subcutaneous inj</i> <i>10 mg/0.8ml</i>	92	<i>furosemide tab 40 mg</i>	40
<i>fondaparinux sodium subcutaneous inj</i> <i>2.5 mg/0.5ml</i>	92	<i>furosemide tab 80 mg</i>	40
<i>fondaparinux sodium subcutaneous inj</i> <i>5 mg/0.4ml</i>	92	FUZEON INJ 90MG	10
<i>fondaparinux sodium subcutaneous inj</i> <i>7.5 mg/0.6ml</i>	92	<i>fyavolv</i>	78
<i>formoterol fumarate soln nebu 20</i> <i>mcg/2ml</i>	106	FYCOMPA SUS 0.5MG/ML	57
FORTEO INJ 600/2.4	73	FYCOMPA TAB 10MG	57
<i>fosamprenavir calcium tab 700 mg</i> <i>(base equiv)</i>	9	FYCOMPA TAB 12MG	57
<i>fosfomycin tromethamine powd pack 3</i> <i>gm (base equivalent)</i>	7	FYCOMPA TAB 2MG	57
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 10-12.5 mg</i>	29	FYCOMPA TAB 4MG	57
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 20-12.5 mg</i>	30	FYCOMPA TAB 6MG	57
<i>fosinopril sodium tab 10 mg</i>	30	FYCOMPA TAB 8MG	57
<i>fosinopril sodium tab 20 mg</i>	30	G	
<i>fosinopril sodium tab 40 mg</i>	30	<i>gabapentin cap 100 mg</i>	57
<i>fosphenytoin sodium inj 100 mg/2ml</i> <i>(phenytoin equiv)</i>	57	<i>gabapentin cap 300 mg</i>	57
FOTIVDA CAP 0.89MG	24	<i>gabapentin cap 400 mg</i>	57
FOTIVDA CAP 1.34MG	24	<i>gabapentin oral soln 250 mg/5ml</i>	57
FRAGMIN INJ 10000/ML	93	<i>gabapentin tab 600 mg</i>	57
FRAGMIN INJ 12500UNT	93	<i>gabapentin tab 800 mg</i>	57
FRAGMIN INJ 15000UNT	93	GALAFOLD CAP 123MG	81
		<i>galantamine hydrobromide cap er 24hr</i> <i>16 mg</i>	44
		<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i>	44
		<i>galantamine hydrobromide cap er 24hr</i> <i>8 mg</i>	44
		<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	45
		<i>galantamine hydrobromide tab 12 mg</i>	45
		<i>galantamine hydrobromide tab 4 mg</i>	45
		<i>galantamine hydrobromide tab 8 mg</i>	45
		GAMASTAN INJ	96
		GAMMAGARD INJ 10GM/100	96
		GAMMAGARD INJ 2.5GM/25	96
		GAMMAGARD INJ 20GM/200	96

GAMMAGARD INJ 30GM/300	96	GLASSIA INJ.....	107
GAMMAGARD INJ 5GM/50ML	96	<i>glatiramer acetate soln prefilled syringe</i>	
GAMMAGARD SD INJ 10GM HU	96	20 mg/ml	66
GAMMAGARD SD INJ 5GM HU	96	<i>glatiramer acetate soln prefilled syringe</i>	
GAMMAKED INJ 10GM/100	96	40 mg/ml	66
GAMMAKED INJ 1GM/10ML.....	96	<i>glatopa</i>	66
GAMMAKED INJ 20GM/200	96	GLEOSTINE CAP 100MG	18
GAMMAKED INJ 5GM/50ML.....	96	GLEOSTINE CAP 10MG.....	18
GAMMAPLEX INJ 10%	96	GLEOSTINE CAP 40MG.....	18
GAMMAPLEX INJ 5%	96	<i>glimepiride tab 1 mg</i>	69
GAMUNEX-C INJ 10GM/100	96	<i>glimepiride tab 2 mg</i>	69
GAMUNEX-C INJ 1GM/10ML.....	96	<i>glimepiride tab 4 mg</i>	69
GAMUNEX-C INJ 20GM/200	96	<i>glip/metform tab 2.5-250m</i>	69
GAMUNEX-C INJ 40/400ML.....	96	<i>glip/metform tab 2.5-500m</i>	69
GAMUNEX-C INJ 5GM/50ML.....	96	<i>glip/metform tab 5-500mg</i>	69
GARDASIL 9 INJ.....	99	<i>glipizide tab 10 mg</i>	69
<i>gatifloxacin ophth soln 0.5%</i>	102	<i>glipizide tab 5 mg</i>	69
GATTEX KIT 5MG	88	<i>glipizide tab er 24hr 10 mg</i>	69
GAUZE PADS & DRESSINGS - PADS 2 X		<i>glipizide tab er 24hr 2.5 mg</i>	69
2	71	<i>glipizide tab er 24hr 5 mg</i>	69
<i>gavilyte-c</i>	87	<i>glucagon (rdna) for inj kit 1 mg</i>	80
<i>gavilyte-g</i>	87	GLUCAGON KIT 1MG	80
GAVRETO CAP 100MG.....	24	<i>glycopyrrolate inj 0.2 mg/ml</i>	86
<i>gefitinib tab 250 mg</i>	24	<i>glycopyrrolate inj 0.4 mg/2ml (0.2</i>	
<i>gemcitabine hcl for inj 1 gm</i>	19	mg/ml)	86
<i>gemcitabine hcl for inj 2 gm</i>	19	<i>glycopyrrolate inj 1 mg/5ml (0.2</i>	
<i>gemcitabine hcl for inj 200 mg</i>	19	mg/ml)	86
<i>gemfibrozil tab 600 mg</i>	34	<i>glycopyrrolate tab 1 mg</i>	86
<i>gemmily</i>	75	<i>glycopyrrolate tab 2 mg</i>	87
GEMTESA TAB 75MG.....	91	GLYXAMBI TAB 10-5 MG	69
<i>generlac</i>	87	GLYXAMBI TAB 25-5 MG	69
<i>gengraf</i>	97	<i>granisetron hcl tab 1 mg</i>	85
<i>gentamicin in saline inj 0.8 mg/ml</i>	7	GRANIX INJ 300/0.5.....	93
<i>gentamicin in saline inj 1 mg/ml</i>	7	GRANIX INJ 300/1ML.....	93
<i>gentamicin in saline inj 1.2 mg/ml</i>	7	GRANIX INJ 480/0.8.....	93
<i>gentamicin in saline inj 1.6 mg/ml</i>	7	GRANIX INJ 480/1.6.....	93
<i>gentamicin sulfate cream 0.1%</i>	109	GRASTEK SUB 2800BAU.....	97
<i>gentamicin sulfate inj 40 mg/ml</i>	7	<i>griseofulvin microsize susp 125 mg/5ml</i>	
<i>gentamicin sulfate oint 0.1%</i>	109	.....	8
<i>gentamicin sulfate ophth soln 0.3%</i> 102		<i>griseofulvin microsize tab 500 mg</i>	9
GENVOYA TAB	11	<i>griseofulvin ultramicrosize tab 125 mg</i> 9	
GEODON INJ 20MG.....	52	<i>griseofulvin ultramicrosize tab 250 mg</i> 9	
GILENYA CAP 0.25MG	66	<i>guanfacine hcl tab er 24hr 1 mg (base</i>	
GILENYA CAP 0.5MG	66	equiv)	62
GILOTRIF TAB 20MG.....	24	<i>guanfacine hcl tab er 24hr 2 mg (base</i>	
GILOTRIF TAB 30MG.....	24	equiv)	62
GILOTRIF TAB 40MG.....	24		

<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	62	HUMALOG INJ 100/ML	71
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	62	HUMALOG JR INJ 100/ML	71
GVOKE HYPO 2 INJ .5/.1ML	80	HUMALOG KWIK INJ 100/ML.....	71
GVOKE HYPO 2 INJ 1MG/.2ML.....	80	HUMALOG KWIK INJ 200/ML.....	71
GVOKE PFS INJ	80	HUMALOG MIX INJ 50/50	71
H		HUMALOG MIX INJ 50/50KWP.....	72
<i>hailey 24 tab fe</i>	75	HUMALOG MIX INJ 75/25KWP.....	72
HALAVEN INJ 1MG/2ML	22	HUMALOG MIX SUS 75/25	72
<i>halobetasol propionate cream 0.05%</i>	112	HUMATROPE INJ 12MG	81
<i>halobetasol propionate oint 0.05%</i> .	112	HUMATROPE INJ 24MG	81
<i>haloperidol decanoate im soln 100 mg/ml</i>	52	HUMATROPE INJ 6MG	81
<i>haloperidol decanoate im soln 50 mg/ml</i>	52	HUMIRA INJ 10/0.1ML	95
<i>haloperidol lactate inj 5 mg/ml</i>	52	HUMIRA INJ 20/0.2ML	95
<i>haloperidol lactate oral conc 2 mg/ml</i>	52	HUMIRA INJ 40/0.4ML	95
<i>haloperidol tab 0.5 mg</i>	52	HUMIRA KIT 40MG/0.8	95
<i>haloperidol tab 1 mg</i>	52	HUMIRA PEDIA INJ CROHNS.....	95
<i>haloperidol tab 10 mg</i>	52	HUMIRA PEN INJ 40/0.4ML.....	95
<i>haloperidol tab 2 mg</i>	52	HUMIRA PEN INJ 40MG/0.8	95
<i>haloperidol tab 20 mg</i>	52	HUMIRA PEN INJ 80/0.8ML.....	95
<i>haloperidol tab 5 mg</i>	52	HUMIRA PEN INJ CD/UC/HS.....	95
HARVONI PAK 33.75-150MG	12	HUMIRA PEN INJ PS/UV	95
HARVONI PAK 45-200MG	12	HUMIRA PEN KIT CD/UC/HS	95
HARVONI TAB 90-400MG	12	HUMIRA PEN KIT PED UC	95
HAVRIX INJ 1440UNIT	99	HUMIRA PEN KIT PS/UV	95
HAVRIX INJ 720UNIT	99	HUMULIN INJ 70/30	72
HELIDAC MIS THERAPY	88	HUMULIN INJ 70/30KWP	72
HEP SOD/D5W INJ 25000UNT.....	93	HUMULIN N INJ U-100	72
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	93	HUMULIN N INJ U-100KWP.....	72
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	93	HUMULIN R INJ U-100	72
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	93	HUMULIN R INJ U-500	72
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	93	<i>hydralazine hcl tab 10 mg</i>	41
HEPLISAV-B INJ 20/0.5ML.....	99	<i>hydralazine hcl tab 100 mg</i>	41
HERCEPTIN INJ 150MG	24	<i>hydralazine hcl tab 25 mg</i>	41
HERCEPTIN INJ 440MG	24	<i>hydralazine hcl tab 50 mg</i>	41
HETLIOZ CAP 20MG.....	63	<i>hydrochlorothiazide cap 12.5 mg</i>	40
HIBERIX SOL 10MCG	99	<i>hydrochlorothiazide tab 12.5 mg</i>	40
HORIZANT TAB 300MG ER.....	65	<i>hydrochlorothiazide tab 25 mg</i>	40
HORIZANT TAB 600MG ER.....	65	<i>hydrochlorothiazide tab 50 mg</i>	40
		<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	5
		<i>hydrocodone-acetaminophen tab 10-300 mg</i>	5
		<i>hydrocodone-acetaminophen tab 10-325 mg</i>	5
		<i>hydrocodone-acetaminophen tab 5-300 mg</i>	5

<i>hydrocodone-acetaminophen tab 5-325 mg</i>	5	IBRANCE CAP 75MG	24
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	5	IBRANCE TAB 100MG.....	24
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	5	IBRANCE TAB 125MG.....	24
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	5	IBRANCE TAB 75MG	24
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	5	<i>ibu tab 600mg</i>	2
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	5	<i>ibu tab 800mg</i>	2
<i>hydrocortisone butyrate cream 0.1%</i>	112	<i>ibuprofen tab 400 mg</i>	2
<i>hydrocortisone butyrate oint 0.1%</i>	112	<i>ibuprofen tab 600 mg</i>	2
<i>hydrocortisone butyrate soln 0.1%</i>	112	<i>ibuprofen tab 800 mg</i>	2
<i>hydrocortisone enema 100 mg/60ml</i>	87	<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	94
<i>hydrocortisone lotion 2.5%</i>	112	<i>iclevia</i>	75
<i>hydrocortisone oint 2.5%</i>	112	ICLUSIG TAB 10MG	24
<i>hydrocortisone perianal cream 2.5%</i>	113	ICLUSIG TAB 15MG	24
<i>hydrocortisone tab 10 mg</i>	79	ICLUSIG TAB 30MG	24
<i>hydrocortisone tab 20 mg</i>	79	ICLUSIG TAB 45MG	24
<i>hydrocortisone tab 5 mg</i>	79	<i>icosapent ethyl cap 0.5 gm</i>	36
<i>hydrocortisone valerate cream 0.2%</i>	112	<i>icosapent ethyl cap 1 gm</i>	36
<i>hydrocortisone valerate oint 0.2%</i>	112	<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	19
<i>hydromorphone hcl liqd 1 mg/ml</i>	5	<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	19
<i>hydromorphone hcl tab 2 mg</i>	5	<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	19
<i>hydromorphone hcl tab 4 mg</i>	5	IDHIFA TAB 100MG	24
<i>hydromorphone hcl tab 8 mg</i>	5	IDHIFA TAB 50MG	24
<i>hydroxychloroquine sulfate tab 200 mg</i>	96	<i>ifosfamide for inj 1 gm</i>	18
<i>hydroxyurea cap 500 mg</i>	21	<i>imatinib mesylate tab 100 mg (base equivalent)</i>	24
<i>hydroxyzine hcl tab 10 mg</i>	105	<i>imatinib mesylate tab 400 mg (base equivalent)</i>	24
<i>hydroxyzine hcl tab 25 mg</i>	105	IMBRUVICA CAP 140MG	24
<i>hydroxyzine hcl tab 50 mg</i>	105	IMBRUVICA CAP 70MG.....	24
<i>hydroxyzine pamoate cap 100 mg</i>	105	IMBRUVICA SUS 70MG/ML	24
<i>hydroxyzine pamoate cap 25 mg</i>	105	IMBRUVICA TAB 140MG	24
<i>hydroxyzine pamoate cap 50 mg</i>	105	IMBRUVICA TAB 280MG	25
HYFTOR GEL 0.2%	113	IMBRUVICA TAB 420MG	25
I		IMBRUVICA TAB 560MG	25
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	73	<i>imipenem-cilastatin intravenous for soln 250 mg</i>	7
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	73	<i>imipenem-cilastatin intravenous for soln 500 mg</i>	7
IBRANCE CAP 100MG.....	24	<i>imipramine hcl tab 10 mg</i>	47
IBRANCE CAP 125MG.....	24	<i>imipramine hcl tab 25 mg</i>	47
		<i>imipramine hcl tab 50 mg</i>	47
		<i>imiquimod cream 5%</i>	113
		IMOVAX RABIE INJ 2.5/ML	99

IMPAVIDO CAP 50MG.....	7	INVOKAMET TAB 150-500	69
INBRIJA CAP 42MG.....	49	INVOKAMET TAB 50-1000	69
<i>incassia tab 0.35mg</i>	75	INVOKAMET TAB 50-500MG	69
INCRELEX INJ 40MG/4ML	81	INVOKAMET XR TAB 150-1000.....	69
INCRUSE ELPT INH 62.5MCG	105	INVOKAMET XR TAB 150-500	69
<i>indapamide tab 1.25 mg</i>	40	INVOKAMET XR TAB 50-1000	69
<i>indapamide tab 2.5 mg</i>	40	INVOKAMET XR TAB 50-500MG.....	69
INFANRIX INJ	99	INVOKANA TAB 100MG	69
INGREZZA CAP 40-80MG.....	65	INVOKANA TAB 300MG	69
INGREZZA CAP 40MG	65	IOPIDINE SOL 1% OP	103
INGREZZA CAP 60MG	65	IPOL INJ INACTIVE.....	99
INGREZZA CAP 80MG	65	<i>ipratropium bromide inhal soln 0.02%</i>	
INLYTA TAB 1MG.....	25	.....	105
INLYTA TAB 5MG.....	25	<i>ipratropium bromide nasal soln 0.03%</i>	
INQOVI TAB 35-100MG	19	<i>(21 mcg/spray)</i>	105
INREBIC CAP 100MG	25	<i>ipratropium bromide nasal soln 0.06%</i>	
INSULIN LISP INJ 100/ML	72	<i>(42 mcg/spray)</i>	105
INSULIN LISP INJ JUNIOR	72	<i>ipratropium-albuterol nebu soln 0.5-</i>	
INSULIN LISP INJ PROTAMIN	72	<i>2.5(3) mg/3ml</i>	105
INSULIN PEN NEEDLE	72	<i>irbesartan tab 150 mg</i>	33
INSULIN SYRINGE (DISP) U-100 0.3		<i>irbesartan tab 300 mg</i>	33
ML.....	72	<i>irbesartan tab 75 mg</i>	33
INSULIN SYRINGE (DISP) U-100 1 ML		<i>irbesartan-hydrochlorothiazide tab</i>	
.....	72	<i>150-12.5 mg</i>	32
INSULIN SYRINGE (DISP) U-100 1/2		<i>irbesartan-hydrochlorothiazide tab</i>	
ML.....	72	<i>300-12.5 mg</i>	32
INTELENCE TAB 25MG	10	IRESSA TAB 250MG.....	25
INTRALIPID INJ 20%	101	<i>irinotecan hcl inj 100 mg/5ml (20</i>	
INTRALIPID INJ 30%	101	<i>mg/ml)</i>	21
INTRON A INJ 10MU	97	<i>irinotecan hcl inj 40 mg/2ml (20</i>	
INTRON A INJ 18MU	97	<i>mg/ml)</i>	21
INTRON A INJ 25MU	97	<i>irinotecan hcl inj 500 mg/25ml (20</i>	
INTRON A INJ 50MU	97	<i>mg/ml)</i>	21
<i>introvale</i>	75	ISENTRESS CHW 100MG.....	10
INVEGA HAFYE INJ 1092MG.....	52	ISENTRESS CHW 25MG.....	10
INVEGA HAFYE INJ 1560MG.....	52	ISENTRESS HD TAB 600MG.....	10
INVEGA SUST INJ 117/0.75.....	52	ISENTRESS POW 100MG	10
INVEGA SUST INJ 156MG/ML.....	52	ISENTRESS TAB 400MG	10
INVEGA SUST INJ 234/1.5.....	52	<i>isibloom</i>	75
INVEGA SUST INJ 39/0.25.....	52	ISOLYTE-P INJ /D5W	100
INVEGA SUST INJ 78/0.5ML	52	ISOLYTE-S INJ PH 7.4.....	100
INVEGA TRINZ INJ 273MG.....	52	<i>isoniazid inj 100 mg/ml</i>	12
INVEGA TRINZ INJ 410MG.....	52	<i>isoniazid syrup 50 mg/5ml</i>	12
INVEGA TRINZ INJ 546MG.....	52	<i>isoniazid tab 100 mg</i>	12
INVEGA TRINZ INJ 819MG.....	52	<i>isoniazid tab 300 mg</i>	12
INVIRASE TAB 500MG.....	10	ISOPROPYL ALCOHOL 0.7 ML/ML.....	72
INVOKAMET TAB 150-1000.....	69	<i>isosorbide dinitrate tab 10 mg</i>	42

<i>isosorbide dinitrate tab 20 mg</i>	42	JENTADUETO TAB 2.5-500	70
<i>isosorbide dinitrate tab 30 mg</i>	42	JENTADUETO TAB 2.5-850	70
<i>isosorbide dinitrate tab 5 mg</i>	42	JENTADUETO TAB XR 2.5-1000MG ...	70
<i>isosorbide mononitrate tab 10 mg</i> ...	42	JENTADUETO TAB XR 5-1000MG	70
<i>isosorbide mononitrate tab 20 mg</i> ...	42	JEVTANA INJ 60/1.5ML	22
<i>isosorbide mononitrate tab er 24hr 120</i>		<i>jinteli tab 1mg-5mcg</i>	78
<i>mg</i>	42	<i>joyeaux tab 0.1-20</i>	75
<i>isosorbide mononitrate tab er 24hr 30</i>		<i>juleber</i>	75
<i>mg</i>	42	JULUCA TAB 50-25MG.....	11
<i>isosorbide mononitrate tab er 24hr 60</i>		<i>junel 1.5/30</i>	75
<i>mg</i>	42	<i>junel 1/20</i>	75
<i>isotretinoin cap 10 mg</i>	109	<i>junel fe 1.5/30</i>	75
<i>isotretinoin cap 20 mg</i>	109	<i>junel fe 1/20</i>	75
<i>isotretinoin cap 30 mg</i>	109	<i>junel fe 24</i>	75
<i>isotretinoin cap 40 mg</i>	109	JYNARQUE PAK 15MG	81
<i>isradipine cap 2.5 mg</i>	38	JYNARQUE PAK 30-15MG	81
<i>isradipine cap 5 mg</i>	38	JYNARQUE PAK 45-15MG	81
ISTODAX INJ 10MG	25	JYNARQUE PAK 60-30MG	81
ISTURISA TAB 1MG	81	JYNARQUE PAK 90-30MG	81
ISTURISA TAB 5MG	81	JYNARQUE TAB 15MG	81
<i>itraconazole cap 100 mg</i>	9	JYNARQUE TAB 30MG	81
<i>ivermectin tab 3 mg</i>	7	JYNNEOS INJ	99
IWILFIN TAB 192MG	21	K	
IXCHIQ INJ.....	99	KADCYLA INJ 100MG	25
IXEMPRA KIT INJ 15MG.....	22	KADCYLA INJ 160MG	25
IXIARO INJ	99	<i>kaitlib fe</i>	75
J		KALYDECO GRA 13.4MG.....	107
JAKAFI TAB 10MG	25	KALYDECO GRA 5.8MG	107
JAKAFI TAB 15MG	25	KALYDECO PAK 25MG	107
JAKAFI TAB 20MG	25	KALYDECO PAK 50MG	107
JAKAFI TAB 25MG	25	KALYDECO PAK 75MG	107
JAKAFI TAB 5MG	25	KALYDECO TAB 150MG	107
<i>jantoven</i>	93	<i>kariva</i>	75
JANUMET TAB 50-1000	69	<i>kcl 10 meq/l (0.075%) in dextrose 5%</i>	
JANUMET TAB 50-500MG	69	<i>& nacl 0.45% inj</i>	100
JANUMET XR TAB 100-1000.....	70	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
JANUMET XR TAB 50-1000	70	<i>nacl 0.2% inj</i>	100
JANUMET XR TAB 50-500MG.....	69	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
JANUVIA TAB 100MG	70	<i>nacl 0.45% inj</i>	100
JANUVIA TAB 25MG.....	70	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
JANUVIA TAB 50MG.....	70	<i>nacl 0.9% inj</i>	100
JARDIANCE TAB 10MG	70	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	
JARDIANCE TAB 25MG	70	.....	100
<i>jasmiel</i>	75	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	
JAYPIRCA TAB 100MG.....	25	.....	100
JAYPIRCA TAB 50MG.....	25	<i>kcl 30 meq/l (0.224%) in dextrose 5%</i>	
JENTADUETO TAB 2.5-1000.....	70	<i>& nacl 0.45% inj</i>	100

<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	100	<i>labetalol hcl tab 100 mg</i>	37
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	100	<i>labetalol hcl tab 200 mg</i>	37
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	100	<i>labetalol hcl tab 300 mg</i>	37
KCL/D5W/LACT INJ 20MEQ/L.....	100	<i>lacosamide oral solution 10 mg/ml</i> ...	57
<i>kelnor 1/35</i>	75	<i>lacosamide tab 100 mg</i>	57
<i>kelnor 1/50</i>	75	<i>lacosamide tab 150 mg</i>	57
KERENDIA TAB 10MG	31	<i>lacosamide tab 200 mg</i>	57
KERENDIA TAB 20MG	31	<i>lacosamide tab 50 mg</i>	57
KESIMPTA INJ 20/.4ML	66	<i>lactated ringer's for irrigation</i>	113
<i>ketoconazole cream 2%</i>	110	<i>lactated ringer's solution</i>	100
<i>ketoconazole shampoo 2%</i>	110	<i>lactic acid (ammonium lactate) cream 12%</i>	113
<i>ketoconazole tab 200 mg</i>	9	<i>lactic acid (ammonium lactate) lotion 12%</i>	113
<i>ketoprofen cap 25 mg</i>	2	<i>lactulose solution 10 gm/15ml</i>	87
<i>ketoprofen cap er 24hr 200 mg</i>	2	LAGEVRIO CAP 200MG.....	12
<i>ketorolac tromethamine ophth soln 0.4%</i>	103	<i>lamivudine oral soln 10 mg/ml</i>	10
<i>ketorolac tromethamine ophth soln 0.5%</i>	103	<i>lamivudine tab 100 mg (hbv)</i>	12
KEYTRUDA INJ 100MG/4M	25	<i>lamivudine tab 150 mg</i>	10
KINERET INJ.....	95	<i>lamivudine tab 300 mg</i>	10
KINRIX INJ	99	<i>lamivudine-zidovudine tab 150-300 mg</i>	11
KISQALI 200 DOSE.....	25	<i>lamotrigine orally disintegrating tab 100 mg</i>	57
KISQALI 200 PAK FEMARA.....	22	<i>lamotrigine orally disintegrating tab 200 mg</i>	57
KISQALI 400 DOSE.....	25	<i>lamotrigine orally disintegrating tab 25 mg</i>	57
KISQALI 400 PAK FEMARA.....	22	<i>lamotrigine orally disintegrating tab 50 mg</i>	57
KISQALI 600 DOSE.....	25	<i>lamotrigine tab 100 mg</i>	58
KISQALI 600 PAK FEMARA.....	22	<i>lamotrigine tab 150 mg</i>	58
<i>klor-con</i>	101	<i>lamotrigine tab 200 mg</i>	58
<i>klor-con 10</i>	101	<i>lamotrigine tab 25 mg</i>	58
<i>klor-con 8</i>	101	<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	58
<i>klor-con m10</i>	101	<i>lamotrigine tab 35 x 25 mg starter kit</i>	58
<i>klor-con m15</i>	101	<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	58
<i>klor-con m20</i>	101	<i>lamotrigine tab chewable dispersible 25 mg</i>	58
<i>klor-con/ef</i>	101	<i>lamotrigine tab chewable dispersible 5 mg</i>	58
KLOXXADO SPR 8MG	68	<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	58
KORLYM TAB 300MG.....	81		
KOSELUGO CAP 10MG	25		
KOSELUGO CAP 25MG	25		
KRAZATI TAB 200MG	25		
<i>kurvelo</i>	75		
KYPROLIS SOL 30MG	25		
KYPROLIS SOL 60MG	25		
L			
<i>labetalol hcl iv soln 5 mg/ml</i>	37		

<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	58	LENVIMA CAP 20 MG	25
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i>	58	LENVIMA CAP 24 MG	25
<i>lamotrigine tab er 24hr 100 mg</i>	58	LENVIMA CAP 4MG	25
<i>lamotrigine tab er 24hr 200 mg</i>	58	LENVIMA CAP 8 MG	25
<i>lamotrigine tab er 24hr 25 mg</i>	58	<i>lessina</i>	75
<i>lamotrigine tab er 24hr 250 mg</i>	58	<i>letrozole tab 2.5 mg</i>	20
<i>lamotrigine tab er 24hr 300 mg</i>	58	<i>leucovorin calcium for inj 100 mg</i>	29
<i>lamotrigine tab er 24hr 50 mg</i>	58	<i>leucovorin calcium for inj 200 mg</i>	29
LANOXIN TAB 0.125MG	41	<i>leucovorin calcium for inj 350 mg</i>	29
LANOXIN TAB 0.25MG	41	<i>leucovorin calcium for inj 50 mg</i>	29
<i>lansoprazole cap delayed release 15 mg</i>	89	<i>leucovorin calcium tab 10 mg</i>	29
<i>lansoprazole cap delayed release 30 mg</i>	89	<i>leucovorin calcium tab 15 mg</i>	29
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	82	<i>leucovorin calcium tab 25 mg</i>	29
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	82	<i>leucovorin calcium tab 5 mg</i>	29
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	82	LEUKERAN TAB 2MG	18
LANTUS INJ 100/ML	72	<i>leuprolide inj 1mg/0.2</i>	20
LANTUS SOLOS INJ 100/ML	72	LEUPROLIDE INJ 22.5MG	20
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	25	<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	106
<i>larin 1.5/30</i>	75	<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	106
<i>larin 1/20</i>	75	<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	106
<i>larin fe 1.5/30</i>	75	<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	106
<i>larin fe 1/20</i>	75	<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	106
LARTRUVO INJ 10MG/ML	25	LEVEMIR INJ	72
LARTRUVO INJ 190/19ML	25	LEVEMIR INJ FLEXPEN	72
<i>latanoprost ophth soln 0.005%</i>	103	<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	58
<i>layolis fe</i>	75	<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	58
<i>leena</i>	75	<i>levetiracetam oral soln 100 mg/ml</i> ...	58
<i>leflunomide tab 10 mg</i>	96	<i>levetiracetam tab 1000 mg</i>	58
<i>leflunomide tab 20 mg</i>	96	<i>levetiracetam tab 250 mg</i>	58
<i>lenalidomide cap 10 mg</i>	21	<i>levetiracetam tab 500 mg</i>	58
<i>lenalidomide cap 15 mg</i>	21	<i>levetiracetam tab 750 mg</i>	58
<i>lenalidomide cap 20 mg</i>	21	<i>levetiracetam tab er 24hr 500 mg</i>	58
<i>lenalidomide cap 25 mg</i>	21	<i>levetiracetam tab er 24hr 750 mg</i>	58
<i>lenalidomide cap 5 mg</i>	21	LEVITRA TAB 10MG	90
<i>lenalidomide caps 2.5 mg</i>	21	LEVITRA TAB 2.5MG	90
LENVIMA CAP 10 MG	25	LEVITRA TAB 20MG	90
LENVIMA CAP 12MG	25	LEVITRA TAB 5MG	90
LENVIMA CAP 14 MG	25	<i>levobunolol hcl ophth soln 0.5%</i>	104
LENVIMA CAP 18 MG	25	<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	81

levocarnitine tab 330 mg.....	81	levothyroxine sodium tab 112 mcg ...	83
levocetirizine dihydrochloride soln 2.5		levothyroxine sodium tab 125 mcg ...	83
mg/5ml (0.5 mg/ml).....	105	levothyroxine sodium tab 137 mcg ...	83
levocetirizine dihydrochloride tab 5 mg		levothyroxine sodium tab 150 mcg ...	83
.....	105	levothyroxine sodium tab 175 mcg ...	83
levofloxacin in d5w iv soln 250		levothyroxine sodium tab 200 mcg ...	84
mg/50ml	15	levothyroxine sodium tab 25 mcg	83
levofloxacin in d5w iv soln 500		levothyroxine sodium tab 300 mcg ...	84
mg/100ml	15	levothyroxine sodium tab 50 mcg	83
levofloxacin in d5w iv soln 750		levothyroxine sodium tab 75 mcg	83
mg/150ml	15	levothyroxine sodium tab 88 mcg	83
levofloxacin ophth soln 0.5%	102	levoxyl.....	84
levofloxacin oral soln 25 mg/ml.....	15	LEXIVA SUS 50MG/ML	10
levofloxacin tab 250 mg	15	lidocaine hcl local inj 2%	6
levofloxacin tab 500 mg	15	lidocaine hcl local preservative free (pf)	
levofloxacin tab 750 mg	15	inj 0.5%	6
levoleucovorin calcium iv soln pf 175		lidocaine hcl viscous soln 2%	114
mg/17.5ml (base equiv)	29	lidocaine oint 5%	112
levonest	75	lidocaine patch 5%	112
levonorgestrel & ethinyl estradiol (91-		lidocaine-prilocaine cream 2.5-2.5%	
day) tab 0.15-0.03 mg	75	.....	112
levonorgestrel & ethinyl estradiol tab		lidocan iii pad 5%.....	112
0.1 mg-20 mcg	75	linezolid for susp 100 mg/5ml	7
levonorgestrel & ethinyl estradiol tab		linezolid iv soln 600 mg/300ml (2	
0.15 mg-30 mcg	75	mg/ml)	7
levonorgestrel-eth estra tab 0.05-		linezolid tab 600 mg	7
30/0.075-40/0.125-30mg-mcg	75	LINZESS CAP 145MCG	88
levonorgestrel-ethinyl estradiol		LINZESS CAP 290MCG	88
(continuous) tab 90-20 mcg.....	75	LINZESS CAP 72MCG	88
levonorg-eth est tab 0.1-0.02mg(84) &		liothyronine sodium iv soln 10 mcg/ml	
eth est tab 0.01mg(7)	75	.....	84
levonorg-eth est tab 0.15-0.03mg(84)		liothyronine sodium tab 25 mcg	84
& eth est tab 0.01mg(7)	75	liothyronine sodium tab 5 mcg	84
levora 0.15/30-28	76	liothyronine sodium tab 50 mcg	84
levothyroxine sodium cap 100 mcg...83		lisinopril & hydrochlorothiazide tab 10-	
levothyroxine sodium cap 112 mcg...83		12.5 mg	30
levothyroxine sodium cap 125 mcg...83		lisinopril & hydrochlorothiazide tab 20-	
levothyroxine sodium cap 13 mcg ...83		12.5 mg	30
levothyroxine sodium cap 137 mcg...83		lisinopril & hydrochlorothiazide tab 20-	
levothyroxine sodium cap 150 mcg...83		25 mg	30
levothyroxine sodium cap 175 mcg...83		lisinopril tab 10 mg.....	30
levothyroxine sodium cap 200 mcg...83		lisinopril tab 2.5 mg	30
levothyroxine sodium cap 25 mcg ...83		lisinopril tab 20 mg.....	30
levothyroxine sodium cap 50 mcg ...83		lisinopril tab 30 mg.....	30
levothyroxine sodium cap 75 mcg ...83		lisinopril tab 40 mg.....	30
levothyroxine sodium cap 88 mcg ...83		lisinopril tab 5 mg	30
levothyroxine sodium tab 100 mcg ...83		LITFULO CAP 50MG	95

<i>lithium carbonate cap 150 mg</i>	65	LOTEMAX SM GEL 0.38%	103
<i>lithium carbonate cap 300 mg</i>	65	<i>loteprednol etabonate ophth gel 0.5%</i>	103
<i>lithium carbonate cap 600 mg</i>	65	103
<i>lithium carbonate tab 300 mg</i>	65	<i>loteprednol etabonate ophth susp 0.5%</i>	103
<i>lithium carbonate tab er 300 mg</i>	65	103
<i>lithium carbonate tab er 450 mg</i>	65	<i>lovastatin tab 10 mg</i>	35
LITHIUM SOL 8MEQ/5ML.....	65	<i>lovastatin tab 20 mg</i>	35
LIVALO TAB 1MG.....	35	<i>lovastatin tab 40 mg</i>	35
LIVALO TAB 2MG.....	35	<i>low-ogestrel</i>	76
LIVALO TAB 4MG.....	35	<i>loxapine succinate cap 10 mg</i>	52
LIVTENCITY TAB 200MG.....	12	<i>loxapine succinate cap 25 mg</i>	52
<i>loestrin 21 tab 1.5/30</i>	76	<i>loxapine succinate cap 5 mg</i>	52
<i>loestrin fe tab 1.5/30</i>	76	<i>loxapine succinate cap 50 mg</i>	52
<i>loestrin fe tab 1/20</i>	76	<i>lubiprostone cap 24 mcg</i>	88
<i>loestrin tab 1/20-21</i>	76	<i>lubiprostone cap 8 mcg</i>	88
LONSURF TAB 15-6.14.....	19	LUCENTIS SOL 0.3MG.....	104
LONSURF TAB 20-8.19.....	19	LUCENTIS SOL 0.5MG.....	104
<i>loperamide hcl cap 2 mg</i>	88	<i>luliconazole cream 1%</i>	110
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<i>lorazepam tab 1 mg</i>	44	LUPRON DEPOT INJ 22.5MG.....	20
<i>lorazepam tab 2 mg</i>	44	LUPRON DEPOT INJ 3.75MG.....	20
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M		<i>melphalan hcl for inj 50 mg (base</i>	
<i>magnesium sulfate inj 50%</i>	100	<i>equiv)</i>	18
<i>malathion lotion 0.5%</i>	113	<i>memantine hcl cap er 24hr 14 mg</i>	45
<i>maraviroc tab 150 mg</i>	10	<i>memantine hcl cap er 24hr 21 mg</i>	45
<i>maraviroc tab 300 mg</i>	10	<i>memantine hcl cap er 24hr 28 mg</i>	45
<i>marlissa</i>	76	<i>memantine hcl cap er 24hr 7 mg</i>	45
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<i>matzim la tab 300mg/24</i>	39	<i>memantine hcl tab 5 mg</i>	45
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<i>150 mg/ml</i>	76	<i>mg</i>	87
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<i>mg</i>	83	<i>metformin hcl tab 1000 mg</i>	70
<i>medroxyprogesterone acetate tab 2.5</i>		<i>metformin hcl tab 500 mg</i>	70
<i>mg</i>	83	<i>metformin hcl tab 850 mg</i>	70
<i>medroxyprogesterone acetate tab 5 mg</i>		<i>metformin hcl tab er 24hr 500 mg</i>	70
.....	83	<i>metformin hcl tab er 24hr 750 mg</i>	70
<i>mefenamic acid cap 250 mg</i>	2	<i>methazolamide tab 25 mg</i>	40
<i>mefloquine hcl tab 250 mg</i>	9	<i>methazolamide tab 50 mg</i>	40
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<i>(25 mg/ml).....</i>	19	<i>methylphenidate hcl tab er 10 mg</i>	63
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<i>equiv)</i>	96	<i>methylphenidate hcl tab er 24hr 18 mg</i>	
<i>methoxsalen rapid cap 10 mg</i>	110	63
<i>methscopolamine bromide tab 2.5 mg</i>		<i>methylphenidate hcl tab er 24hr 27 mg</i>	
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<i>(xr)</i>	62	<i>release (osm) 36 mg</i>	63
<i>methylphenidate hcl cap er 24hr 15 mg</i>		<i>methylphenidate hcl tab er osmotic</i>	
<i>(xr)</i>	62	<i>release (osm) 54 mg</i>	63
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<i>(la).....</i>	62	<i>mg/ml.....</i>	79
<i>methylphenidate hcl cap er 24hr 20 mg</i>		<i>methylprednisolone acetate inj susp 80</i>	
<i>(xr)</i>	62	<i>mg/ml.....</i>	79
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<i>(la).....</i>	62	<i>methylprednisolone tab 32 mg.....</i>	79
<i>methylphenidate hcl cap er 24hr 40 mg</i>		<i>methylprednisolone tab 4 mg</i>	79
<i>(xr)</i>	62	<i>methylprednisolone tab 8 mg</i>	79
<i>methylphenidate hcl cap er 24hr 50 mg</i>		<i>methylprednisolone tab therapy pack 4</i>	
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.....	62	<i>metoclopramide hcl tab 10 mg (base</i>	
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.....	62	<i>metoclopramide hcl tab 5 mg (base</i>	
<i>methylphenidate hcl cap er 60 mg (cd)</i>		<i>equivalent)</i>	86
.....	63	<i>metolazone tab 10 mg</i>	40
<i>methylphenidate hcl soln 10 mg/5ml</i>	63	<i>metolazone tab 2.5 mg</i>	40

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100-25 mg	36	minocycline hcl cap 75 mg	18
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(tartrate equiv)	37	mg	47
metoprolol tartrate tab 100 mg	37	mirtazapine orally disintegrating tab 45	
metoprolol tartrate tab 25 mg.....	37	mg	47
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morphine sulfate tab er 15 mg 3
morphine sulfate tab er 200 mg 3
morphine sulfate tab er 30 mg 3
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<i>naproxen sodium tab 550 mg</i>	2	<i>neo-polycin oin op</i>	102
<i>naproxen tab 250 mg</i>	2	NEORAL CAP 100MG	98
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<i>equivalent)</i>	37	<i>niacin tab er 500 mg</i>	
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<i>equivalent)</i>	37	<i>niacin tab er 750 mg</i>	
<i>neбиволол hcl tab 5 mg (base</i>		<i>(antihyperlipidemic)</i>	36
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<i>nefazodone hcl tab 250 mg</i>	47	<i>nifedipine tab er 24hr 60 mg</i>	39
<i>nefazodone hcl tab 50 mg</i>	47	<i>nifedipine tab er 24hr 90 mg</i>	39
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.....	102	<i>60 mg</i>	39
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<i>1.75-10000-0.025mg-unt-mg/ml</i>	102	<i>90 mg</i>	39
<i>neomycin-polymyxin-dexamethasone</i>		<i>nikki</i>	76
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<i>nisoldipine tab er 24hr 25.5 mg</i>	39	<i>nora-be</i>	76
<i>nisoldipine tab er 24hr 30 mg</i>	39	NORDITROPIN INJ 10/1.5ML.....	81
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NITRO-DUR DIS 0.2MG/HR.....	42	<i>tab 1 mg-20 mcg</i>	76
NITRO-DUR DIS 0.3MG/HR.....	42	<i>norethindrone ace & ethinyl estradiol-fe</i>	
NITRO-DUR DIS 0.4MG/HR.....	42	<i>tab 1 mg-20 mcg</i>	76
NITRO-DUR DIS 0.6MG/HR.....	42	<i>norethindrone acetate tab 5 mg</i>	83
NITRO-DUR DIS 0.8MG/HR.....	42	<i>norethindrone acetate-ethinyl estradiol</i>	
<i>nitrofur mac cap 50mg</i>	7	<i>tab 0.5 mg-2.5 mcg</i>	78
<i>nitrofurantoin macrocrystalline cap 100</i>		<i>norethindrone acetate-ethinyl estradiol</i>	
<i>mg</i>	7	<i>tab 1 mg-5 mcg</i>	78
<i>nitrofurantoin macrocrystalline cap 25</i>		<i>norethindrone ac-ethinyl estrad-fe tab</i>	
<i>mg</i>	7	<i>1-20/1-30/1-35 mg-mcg</i>	76
<i>nitrofurantoin monohydrate</i>		<i>norethindrone tab 0.35 mg</i>	76
<i>macrocrystalline cap 100 mg</i>	7	<i>norgestimate & ethinyl estradiol tab</i>	
NITROGLYCER INJ 5MG/ML.....	42	<i>0.25 mg-35 mcg</i>	76
<i>nitroglycerin sl tab 0.3 mg</i>	42	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nitroglycerin sl tab 0.4 mg</i>	42	<i>35/0.215-35/0.25-35 mg-mcg</i>	76
<i>nitroglycerin sl tab 0.6 mg</i>	42	<i>norlyroc</i>	76
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>		NORPACE CAP 100MG CR	34
.....	42	NORPACE CAP 150MG CR	34
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>		<i>nortrel 0.5/35 (28)</i>	76
.....	42	<i>nortrel 1/35</i>	76
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>		<i>nortrel 7/7/7</i>	77
.....	42	<i>nortriptyline hcl cap 10 mg</i>	47
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>		<i>nortriptyline hcl cap 25 mg</i>	47
.....	42	<i>nortriptyline hcl cap 50 mg</i>	47
<i>nitroglycerin tl soln 0.4 mg/spray (400</i>		<i>nortriptyline hcl cap 75 mg</i>	47
<i>mcg/spray)</i>	42	<i>nortriptyline hcl soln 10 mg/5ml</i>	47
NITROSTAT SUB 0.3MG.....	42	NORVIR POW 100MG	10
NITROSTAT SUB 0.4MG.....	42	NORVIR SOL 80MG/ML.....	10

NORVIR TAB 100MG	10	ODACTRA SUB	97
NOURIANZ TAB 20MG	49	ODEFSEY TAB	11
NOURIANZ TAB 40MG	50	ODOMZO CAP 200MG	26
NOXAFIL SUS 40MG/ML	9	OFEV CAP 100MG	107
<i>np thyroid 120</i>	84	OFEV CAP 150MG	107
<i>np thyroid 15</i>	84	<i>ofloxacin ophth soln 0.3%</i>	102
<i>np thyroid 30</i>	84	<i>ofloxacin otic soln 0.3%</i>	105
<i>np thyroid 60</i>	84	<i>ofloxacin tab 300 mg</i>	15
<i>np thyroid 90</i>	84	<i>ofloxacin tab 400 mg</i>	15
NUBEQA TAB 300MG	20	OGSIVEO TAB 50MG	26
NUDEXTA CAP 20-10MG	65	OJJAARA TAB 100MG	26
NULOJIX INJ 250MG	98	OJJAARA TAB 150MG	26
NUPLAZID CAP 34MG	53	OJJAARA TAB 200MG	26
NUPLAZID TAB 10MG	53	<i>olanzapine for im inj 10 mg</i>	53
NURTEC TAB 75MG ODT	64	<i>olanzapine orally disintegrating tab 10</i>	
NUTRILIPID EMU 20%	101	<i>mg</i>	53
NUZYRA INJ 100MG	18	<i>olanzapine orally disintegrating tab 15</i>	
NUZYRA TAB 150MG	18	<i>mg</i>	53
<i>nyamyc</i>	110	<i>olanzapine orally disintegrating tab 20</i>	
<i>nylia 1/35</i>	77	<i>mg</i>	53
<i>nylia 7/7/7</i>	77	<i>olanzapine orally disintegrating tab 5</i>	
<i>nymyo</i>	77	<i>mg</i>	53
<i>nystatin cream 100000 unit/gm</i>	110	<i>olanzapine tab 10 mg</i>	53
<i>nystatin oint 100000 unit/gm</i>	110	<i>olanzapine tab 15 mg</i>	53
<i>nystatin susp 100000 unit/ml</i>	114	<i>olanzapine tab 2.5 mg</i>	53
<i>nystatin tab 500000 unit</i>	9	<i>olanzapine tab 20 mg</i>	53
<i>nystatin topical powder 100000</i>		<i>olanzapine tab 5 mg</i>	53
<i>unit/gm</i>	110	<i>olanzapine tab 7.5 mg</i>	53
<i>nystatin-triamcinolone cream 100000-</i>		<i>olmesartan medoxomil tab 20 mg</i> ...	33
<i>0.1 unit/gm-%</i>	110	<i>olmesartan medoxomil tab 40 mg</i> ...	33
<i>nystatin-triamcinolone oint 100000-0.1</i>		<i>olmesartan medoxomil tab 5 mg</i>	33
<i>unit/gm-%</i>	110	<i>olmesartan medoxomil-</i>	
<i>nystop</i>	110	<i>hydrochlorothiazide tab 20-12.5 mg</i>	
o		.....	32
<i>ocella tab 3-0.03mg</i>	77	<i>olmesartan medoxomil-</i>	
OCTAGAM INJ 1GM	96	<i>hydrochlorothiazide tab 40-12.5 mg</i>	
OCTAGAM INJ 2GM/20ML	96	.....	32
<i>octreotide acetate inj 100 mcg/ml (0.1</i>		<i>olmesartan medoxomil-</i>	
<i>mg/ml)</i>	81	<i>hydrochlorothiazide tab 40-25 mg</i> .	32
<i>octreotide acetate inj 1000 mcg/ml (1</i>		<i>olmesartan-amlodipine-</i>	
<i>mg/ml)</i>	81	<i>hydrochlorothiazide tab 20-5-12.5</i>	
<i>octreotide acetate inj 200 mcg/ml (0.2</i>		<i>mg</i>	32
<i>mg/ml)</i>	81	<i>olmesartan-amlodipine-</i>	
<i>octreotide acetate inj 50 mcg/ml (0.05</i>		<i>hydrochlorothiazide tab 40-10-12.5</i>	
<i>mg/ml)</i>	81	<i>mg</i>	32
<i>octreotide acetate inj 500 mcg/ml (0.5</i>			
<i>mg/ml)</i>	81		

<i>olmesartan-amlodipine- hydrochlorothiazide tab 40-10-25 mg</i>	<i>32</i>	<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	<i>13</i>
<i>olmesartan-amlodipine- hydrochlorothiazide tab 40-5-12.5 mg</i>	<i>32</i>	<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	<i>13</i>
<i>olmesartan-amlodipine- hydrochlorothiazide tab 40-5-25 mg</i>	<i>32</i>	<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	<i>13</i>
<i>olopatadine hcl nasal soln 0.6%</i>	<i>105</i>	<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	<i>13</i>
<i>omega-3-acid ethyl esters cap 1 gm</i>	<i>36</i>	<i>OTEZLA TAB 10/20/30</i>	<i>95</i>
<i>omeprazole cap delayed release 10 mg</i>	<i>89</i>	<i>OTEZLA TAB 30MG</i>	<i>95</i>
<i>omeprazole cap delayed release 20 mg</i>	<i>89</i>	<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	<i>17</i>
<i>omeprazole cap delayed release 40 mg</i>	<i>89</i>	<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	<i>17</i>
<i>OMNIPOD 5 G6 KIT INTRO</i>	<i>72</i>	<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	<i>17</i>
<i>OMNIPOD 5 G6 MIS PODS</i>	<i>72</i>	<i>oxaliplatin for iv inj 100 mg</i>	<i>18</i>
<i>OMNIPOD DASH MIS PODS</i>	<i>72</i>	<i>oxaliplatin iv soln 100 mg/20ml</i>	<i>19</i>
<i>OMNIPOD MIS CLASSIC</i>	<i>72</i>	<i>oxaliplatin iv soln 50 mg/10ml</i>	<i>18</i>
<i>OMNIPOD PDM KIT CLASSIC</i>	<i>72</i>	<i>oxandrolone tab 10 mg</i>	<i>68</i>
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	<i>86</i>	<i>oxandrolone tab 2.5 mg</i>	<i>68</i>
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	<i>86</i>	<i>oxaprozin tab 600 mg</i>	<i>2</i>
<i>ondansetron hcl oral soln 4 mg/5ml</i>	<i>86</i>	<i>oxazepam cap 10 mg</i>	<i>44</i>
<i>ondansetron hcl tab 4 mg</i>	<i>86</i>	<i>oxazepam cap 15 mg</i>	<i>44</i>
<i>ondansetron hcl tab 8 mg</i>	<i>86</i>	<i>oxazepam cap 30 mg</i>	<i>44</i>
<i>ondansetron tab 4mg odt</i>	<i>86</i>	<i>OXBRYTA TAB 300MG</i>	<i>94</i>
<i>ondansetron tab 8mg odt</i>	<i>86</i>	<i>OXBRYTA TAB 500MG</i>	<i>94</i>
<i>ONUREG TAB 200MG</i>	<i>20</i>	<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	<i>58</i>
<i>ONUREG TAB 300MG</i>	<i>20</i>	<i>oxcarbazepine tab 150 mg</i>	<i>58</i>
<i>OPSUMIT TAB 10MG</i>	<i>43</i>	<i>oxcarbazepine tab 300 mg</i>	<i>58</i>
<i>ORFADIN CAP 20MG</i>	<i>82</i>	<i>oxcarbazepine tab 600 mg</i>	<i>58</i>
<i>ORFADIN SUS 4MG/ML</i>	<i>82</i>	<i>OXERVATE SOL 20MCG/ML</i>	<i>104</i>
<i>ORGOVYX TAB 120MG</i>	<i>20</i>	<i>oxiconazole nitrate cream 1%</i>	<i>110</i>
<i>ORIAHNN CAP</i>	<i>82</i>	<i>oxybutynin chloride solution 5 mg/5ml</i>	<i>91</i>
<i>ORKAMBI GRA 100-125</i>	<i>107</i>	<i>oxybutynin chloride tab 5 mg</i>	<i>91</i>
<i>ORKAMBI GRA 150-188</i>	<i>107</i>	<i>oxybutynin chloride tab er 24hr 10 mg</i>	<i>91</i>
<i>ORKAMBI GRA 75-94MG</i>	<i>107</i>	<i>oxybutynin chloride tab er 24hr 15 mg</i>	<i>91</i>
<i>ORKAMBI TAB 100-125</i>	<i>107</i>	<i>oxybutynin chloride tab er 24hr 5 mg</i>	<i>91</i>
<i>ORKAMBI TAB 200-125</i>	<i>107</i>	<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	<i>5</i>
<i>ORLADEYO CAP 110MG</i>	<i>94</i>	<i>oxycodone hcl soln 5 mg/5ml</i>	<i>5</i>
<i>ORLADEYO CAP 150MG</i>	<i>94</i>	<i>oxycodone hcl tab 10 mg</i>	<i>5</i>
<i>ORSERDU TAB 345MG</i>	<i>20</i>		
<i>ORSERDU TAB 86MG</i>	<i>20</i>		

<i>oxycodone hcl tab 15 mg</i>	5	<i>paliperidone tab er 24hr 1.5 mg</i>	53
<i>oxycodone hcl tab 20 mg</i>	5	<i>paliperidone tab er 24hr 3 mg</i>	53
<i>oxycodone hcl tab 30 mg</i>	5	<i>paliperidone tab er 24hr 6 mg</i>	53
<i>oxycodone hcl tab 5 mg</i>	5	<i>paliperidone tab er 24hr 9 mg</i>	53
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	3	<i>pamidronate disodium iv soln 3 mg/ml</i>	73
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	3	<i>pamidronate disodium iv soln 9 mg/ml</i>	73
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	3	PANRETIN GEL 0.1%	113
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	3	<i>pantoprazole sodium ec tab 20 mg</i> (base equiv)	89
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	6	<i>pantoprazole sodium ec tab 40 mg</i> (base equiv)	89
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	5	PANZYGA SOL 10/100ML.....	96
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	5	PANZYGA SOL 1GM/10ML.....	96
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	6	PANZYGA SOL 2.5/25ML	96
OXYCONTIN TAB 10MG ER	3	PANZYGA SOL 20/200ML.....	96
OXYCONTIN TAB 15MG ER	3	PANZYGA SOL 30/300ML.....	96
OXYCONTIN TAB 20MG ER	3	PANZYGA SOL 5GM/50ML.....	96
OXYCONTIN TAB 30MG ER	3	<i>paricalcitol cap 1 mcg</i>	85
OXYCONTIN TAB 40MG ER	3	<i>paricalcitol cap 2 mcg</i>	85
OXYCONTIN TAB 60MG ER	3	<i>paricalcitol cap 4 mcg</i>	85
OXYCONTIN TAB 80MG ER	3	<i>paricalcitol iv soln 2 mcg/ml</i>	85
<i>oxymorphone hcl tab 10 mg</i>	6	<i>paroxetine hcl oral susp 10 mg/5ml</i> (base equiv)	47
<i>oxymorphone hcl tab 5 mg</i>	6	<i>paroxetine hcl tab 10 mg</i>	47
<i>oxymorphone hcl tab er 12hr 10 mg</i> ..	3	<i>paroxetine hcl tab 20 mg</i>	47
<i>oxymorphone hcl tab er 12hr 15 mg</i> ..	3	<i>paroxetine hcl tab 30 mg</i>	47
<i>oxymorphone hcl tab er 12hr 20 mg</i> ..	3	<i>paroxetine hcl tab 40 mg</i>	47
<i>oxymorphone hcl tab er 12hr 30 mg</i> ..	3	<i>paroxetine hcl tab er 24hr 12.5 mg</i> ..	47
<i>oxymorphone hcl tab er 12hr 40 mg</i> ..	3	<i>paroxetine hcl tab er 24hr 25 mg</i>	48
<i>oxymorphone hcl tab er 12hr 5 mg</i>	3	<i>paroxetine hcl tab er 24hr 37.5 mg</i> ..	48
<i>oxymorphone hcl tab er 12hr 7.5 mg</i> .	3	PAXLOVID TAB 150-100.....	13
OZEMPIC INJ 2MG/3ML	70	PAXLOVID TAB 300-100.....	13
OZEMPIC INJ 4MG/3ML	70	<i>pazopanib hcl tab 200 mg (base equiv)</i>	26
OZEMPIC INJ 8MG/3ML	70	PEDIARIX INJ 0.5ML	99
P		PEDVAX HIB INJ.....	99
<i>pacerone</i>	34	<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 236 gm</i>	87
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	22	<i>peg-3350/electrolytes/asc</i>	87
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	22	PEGASYS INJ	13
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	22	PEGASYS INJ 180MCG/M.....	13
		PEMAZYRE TAB 13.5MG	26
		PEMAZYRE TAB 4.5MG	26
		PEMAZYRE TAB 9MG.....	26
		PEN GK/DEXTR INJ 20000/ML.....	17

PEN GK/DEXTR INJ 40000/ML.....	17	<i>phenytoin chew tab 50 mg</i>	59
PEN GK/DEXTR INJ 60000/ML.....	17	<i>phenytoin sodium extended cap 100</i>	
PENBRAYA INJ	99	<i>mg</i>	59
<i> penciclovir cream 1%</i>	113	<i>phenytoin sodium extended cap 200</i>	
<i> penicillamine tab 250 mg</i>	74	<i>mg</i>	59
<i> penicillin g potassium for inj 20000000</i>		<i>phenytoin sodium extended cap 300</i>	
<i> unit</i>	17	<i>mg</i>	59
<i> penicillin g sodium for inj 5000000 unit</i>		<i>phenytoin sodium inj 50 mg/ml</i>	59
.....	17	<i>phenytoin susp 125 mg/5ml</i>	59
<i> penicillin v potassium for soln 125</i>		PIFELTRO TAB 100MG.....	10
<i> mg/5ml</i>	17	<i> pilocarpine hcl ophth soln 1%</i>	104
<i> penicillin v potassium for soln 250</i>		<i> pilocarpine hcl ophth soln 2%</i>	104
<i> mg/5ml</i>	17	<i> pilocarpine hcl ophth soln 4%</i>	104
<i> penicillin v potassium tab 250 mg</i>	17	<i> pilocarpine hcl tab 5 mg</i>	114
<i> penicillin v potassium tab 500 mg</i>	17	<i> pilocarpine hcl tab 7.5 mg</i>	114
PENTACEL INJ.....	99	<i> pimecrolimus cream 1%</i>	113
<i> pentamidine isethionate inh</i>	7	<i> pimozone tab 1 mg</i>	53
<i> pentamidine isethionate inj</i>	7	<i> pimozone tab 2 mg</i>	53
<i> pentoxifylline tab er 400 mg</i>	94	<i> pimtrea</i>	77
<i> perindopril erbumine tab 2 mg</i>	30	<i> pindolol tab 10 mg</i>	37
<i> perindopril erbumine tab 4 mg</i>	30	<i> pindolol tab 5 mg</i>	37
<i> perindopril erbumine tab 8 mg</i>	30	<i> pioglitazone hcl tab 15 mg (base equiv)</i>	
<i> periogard</i>	114	.....	70
PERJETA INJ 420/14ML	26	<i> pioglitazone hcl tab 30 mg (base equiv)</i>	
<i> permethrin cream 5%</i>	113	.....	70
<i> perphenazine tab 16 mg</i>	53	<i> pioglitazone hcl tab 45 mg (base equiv)</i>	
<i> perphenazine tab 2 mg</i>	53	.....	70
<i> perphenazine tab 4 mg</i>	53	<i> pioglitazone hcl-metformin hcl tab 15-</i>	
<i> perphenazine tab 8 mg</i>	53	<i> 500 mg</i>	70
PERSERIS INJ 120MG	53	<i> pioglitazone hcl-metformin hcl tab 15-</i>	
PERSERIS INJ 90MG	53	<i> 850 mg</i>	70
<i> pfizerpen</i>	17	<i> piperacillin sod-tazobactam sod for inj</i>	
<i> phendimetrazine tartrate tab 35 mg</i> .43		<i> 2.25 gm (2-0.25 gm)</i>	17
<i> phenelzine sulfate tab 15 mg</i>	48	<i> piperacillin sod-tazobactam sod for inj</i>	
<i> phenobarbital elixir 20 mg/5ml</i>	58	<i> 4.5 gm (4-0.5 gm)</i>	17
<i> phenobarbital tab 100 mg</i>	59	<i> piperacillin sod-tazobactam sod for inj</i>	
<i> phenobarbital tab 15 mg</i>	58	<i> 40.5 gm (36-4.5 gm)</i>	17
<i> phenobarbital tab 16.2 mg</i>	58	PIQRAY 200MG TAB DOSE.....	26
<i> phenobarbital tab 30 mg</i>	59	PIQRAY 250MG TAB DOSE.....	26
<i> phenobarbital tab 32.4 mg</i>	59	PIQRAY 300MG TAB DOSE.....	26
<i> phenobarbital tab 60 mg</i>	59	<i> pirfenidone cap 267 mg</i>	107
<i> phenobarbital tab 64.8 mg</i>	59	<i> pirfenidone tab 267 mg</i>	107
<i> phenobarbital tab 97.2 mg</i>	59	<i> pirfenidone tab 534 mg</i>	107
<i> phentermine hcl cap 15 mg</i>	43	<i> pirfenidone tab 801 mg</i>	107
<i> phentermine hcl cap 30 mg</i>	43	<i> piroxicam cap 10 mg</i>	2
<i> phentermine hcl cap 37.5 mg</i>	43	<i> piroxicam cap 20 mg</i>	2
<i> phentermine hcl tab 37.5 mg</i>	43	<i> pitavastatin calcium tab 1 mg</i>	35

<i>pitavastatin calcium tab 2 mg</i>	35	<i>potassium citrate tab er 5 meq (540</i>	
<i>pitavastatin calcium tab 4 mg</i>	35	<i>mg)</i>	91
PLASMA-LYTE INJ -148	100	PRADAXA CAP 110MG	93
PLASMA-LYTE INJ -A.....	100	PRADAXA CAP 150MG	93
PLEGRIDY INJ	66	PRADAXA CAP 75MG.....	93
PLEGRIDY INJ PEN.....	66	PRALUENT INJ 150MG/ML	36
<i>podofilox soln 0.5%</i>	113	PRALUENT INJ 75MG/ML	36
<i>polycin oin op</i>	102	<i>pramipexole dihydrochloride tab 0.125</i>	
<i>polymyxin b-trimethoprim ophth soln</i>		<i>mg</i>	50
<i>10000 unit/ml-0.1%</i>	102	<i>pramipexole dihydrochloride tab 0.25</i>	
POMALYST CAP 1MG	21	<i>mg</i>	50
POMALYST CAP 2MG	21	<i>pramipexole dihydrochloride tab 0.5</i>	
POMALYST CAP 3MG	21	<i>mg</i>	50
POMALYST CAP 4MG	21	<i>pramipexole dihydrochloride tab 0.75</i>	
<i>portia-28</i>	77	<i>mg</i>	50
<i>posaconazole susp 40 mg/ml</i>	9	<i>pramipexole dihydrochloride tab 1 mg</i>	
<i>posaconazole tab delayed release 100</i>		<i>mg</i>	50
<i>mg</i>	9	<i>pramipexole dihydrochloride tab 1.5</i>	
POT CHLORIDE INJ 10MEQ	100	<i>mg</i>	50
POT CHLORIDE INJ 20MEQ	100	<i>prasugrel hcl tab 10 mg (base equiv)</i>	95
POT CHLORIDE INJ 40MEQ	100	<i>prasugrel hcl tab 5 mg (base equiv)</i> .	95
<i>potassium chloride 20 meq/l (0.15%)</i>		<i>pravastatin sodium tab 10 mg</i>	35
<i>in dextrose 5% inj</i>	100	<i>pravastatin sodium tab 20 mg</i>	35
<i>potassium chloride cap er 10 meq</i> ..	101	<i>pravastatin sodium tab 40 mg</i>	35
<i>potassium chloride cap er 8 meq</i>	101	<i>pravastatin sodium tab 80 mg</i>	35
<i>potassium chloride inj 2 meq/ml</i>	100	<i>praziquantel tab 600 mg</i>	7
<i>potassium chloride microencapsulated</i>		<i>prazosin hcl cap 1 mg</i>	31
<i>crys er tab 10 meq</i>	101	<i>prazosin hcl cap 2 mg</i>	31
<i>potassium chloride microencapsulated</i>		<i>prazosin hcl cap 5 mg</i>	31
<i>crys er tab 15 meq</i>	101	PRED MILD SUS 0.12% OP	103
<i>potassium chloride microencapsulated</i>		PRED SOD PHO SOL 1% OP.....	103
<i>crys er tab 20 meq</i>	101	<i>prednisolone acetate ophth susp 1%</i>	
<i>potassium chloride oral soln 10% (20</i>		<i>mg/5ml (5 mg/5ml base)</i>	79
<i>meq/15ml)</i>	101	<i>prednisolone sod phosphate oral soln</i>	
<i>potassium chloride oral soln 20% (40</i>		<i>15 mg/5ml (base equiv)</i>	79
<i>meq/15ml)</i>	101	<i>prednisolone sodium phosphate oral</i>	
<i>potassium chloride powder packet 20</i>		<i>soln 25 mg/5ml (base eq)</i>	80
<i>meq</i>	101	<i>prednisolone soln 15 mg/5ml</i>	80
<i>potassium chloride tab er 10 meq</i> ...	101	<i>prednisolone tab 5 mg</i>	80
<i>potassium chloride tab er 20 meq</i>		PREDNISON CON 5MG/ML	80
<i>(1500 mg)</i>	101	<i>prednisone oral soln 5 mg/5ml</i>	80
<i>potassium chloride tab er 8 meq (600</i>		<i>prednisone tab 1 mg</i>	80
<i>mg)</i>	101	<i>prednisone tab 10 mg</i>	80
<i>potassium citrate tab er 10 meq (1080</i>		<i>prednisone tab 2.5 mg</i>	80
<i>mg)</i>	91	<i>prednisone tab 20 mg</i>	80
<i>potassium citrate tab er 15 meq (1620</i>			
<i>mg)</i>	91		

<i>prednisone tab 5 mg</i>	80	<i>prochlorperazine maleate tab 5 mg</i>	
<i>prednisone tab 50 mg</i>	80	<i>(base equivalent)</i>	86
<i>pregabalin cap 100 mg</i>	59	<i>prochlorperazine suppos 25 mg</i>	86
<i>pregabalin cap 150 mg</i>	59	PROCRIT INJ 10000/ML.....	93
<i>pregabalin cap 200 mg</i>	59	PROCRIT INJ 2000/ML	93
<i>pregabalin cap 225 mg</i>	59	PROCRIT INJ 20000/ML.....	93
<i>pregabalin cap 25 mg</i>	59	PROCRIT INJ 3000/ML	93
<i>pregabalin cap 300 mg</i>	59	PROCRIT INJ 4000/ML	93
<i>pregabalin cap 50 mg</i>	59	PROCRIT INJ 40000/ML.....	94
<i>pregabalin cap 75 mg</i>	59	<i>procto-med hc</i>	113
<i>pregabalin soln 20 mg/ml</i>	59	<i>proctosol hc</i>	113
PREHEVBRIO SUS 10MCG/ML	99	<i>proctozone-hc</i>	113
PREMARIN INJ 25MG	78	PROCYSBI GRA 300MG	82
PREMARIN TAB 0.3MG	78	PROCYSBI GRA 75MG	82
PREMARIN TAB 0.45MG.....	78	<i>progesterone cap 100 mg</i>	83
PREMARIN TAB 0.625MG.....	78	<i>progesterone cap 200 mg</i>	83
PREMARIN TAB 0.9MG	78	PROGRAF GRA 0.2MG	98
PREMARIN TAB 1.25MG.....	79	PROGRAF GRA 1MG.....	98
PREMARIN VAG CRE 0.625MG.....	79	PROGRAF INJ 5MG/ML	98
PREMASOL SOL 10%	101	PROLASTIN-C INJ 1000MG	107
PREMPRO TAB 0.3-1.5	79	PROLENSA SOL 0.07%.....	103
PREMPRO TAB 0.45-1.5.....	79	PROLEUKIN INJ 22MU	22
PREMPRO TAB 0.625-2.5.....	79	PROLIA INJ 60MG/ML	73
PREMPRO TAB 0.625-5.....	79	PROMACTA PAK 25MG	94
PRETOMANID TAB 200MG	12	PROMACTA POW 12.5MG.....	94
<i>prevalite</i>	36	PROMACTA TAB 12.5MG.....	94
PREVYMIS TAB 240MG	13	PROMACTA TAB 25MG	94
PREVYMIS TAB 480MG	13	PROMACTA TAB 50MG	94
PREZCOBIX TAB 800-150	11	PROMACTA TAB 75MG	94
PREZISTA SUS 100MG/ML.....	10	<i>promethazine hcl inj 25 mg/ml</i>	86
PREZISTA TAB 150MG	10	<i>promethazine hcl inj 50 mg/ml</i>	86
PREZISTA TAB 600MG	10	<i>promethazine hcl suppos 12.5 mg</i>	86
PREZISTA TAB 75MG	10	<i>promethazine hcl suppos 25 mg</i>	86
PREZISTA TAB 800MG	10	<i>promethazine hcl syrup 6.25 mg/5ml</i> 86	
PRIFTIN TAB 150MG	12	<i>promethazine hcl tab 12.5 mg</i>	86
PRIMAQUINE TAB 26.3MG	9	<i>promethazine hcl tab 25 mg</i>	86
<i>primidone tab 125 mg</i>	59	<i>promethazine hcl tab 50 mg</i>	86
<i>primidone tab 250 mg</i>	59	<i>promethegan</i>	86
<i>primidone tab 50 mg</i>	59	<i>propafenone hcl cap er 12hr 225 mg</i> 34	
PRIORIX INJ	99	<i>propafenone hcl cap er 12hr 325 mg</i> 34	
PRIVIGEN INJ 20GRAMS.....	96	<i>propafenone hcl cap er 12hr 425 mg</i> 34	
<i>probenecid tab 500 mg</i>	1	<i>propafenone hcl tab 150 mg</i>	34
<i>procainamide hcl inj 100 mg/ml</i>	34	<i>propafenone hcl tab 225 mg</i>	34
<i>prochlorperazine edisylate inj 10</i>		<i>propafenone hcl tab 300 mg</i>	34
<i>mg/2ml</i>	86	<i>propranolol hcl cap er 24hr 120 mg</i> ..	37
<i>prochlorperazine maleate tab 10 mg</i>		<i>propranolol hcl cap er 24hr 160 mg</i> ..	37
<i>(base equivalent)</i>	86	<i>propranolol hcl cap er 24hr 60 mg</i>	37

<i>propranolol hcl cap er 24hr 80 mg</i>	37
<i>propranolol hcl tab 10 mg</i>	37
<i>propranolol hcl tab 20 mg</i>	37
<i>propranolol hcl tab 40 mg</i>	37
<i>propranolol hcl tab 60 mg</i>	37
<i>propranolol hcl tab 80 mg</i>	37
<i>propylthiouracil tab 50 mg</i>	84
PROQUAD INJ	99
PROSOL INJ 20%	101
<i>protriptyline hcl tab 10 mg</i>	48
<i>protriptyline hcl tab 5 mg</i>	48
PULMICORT INH 180MCG	108
PULMICORT INH 90MCG	108
PULMOZYME SOL 1MG/ML	107
PURIXAN SUS 20MG/ML	20
<i>pyrazinamide tab 500 mg</i>	12
<i>pyridostigmine bromide tab 60 mg</i> ...	65
<i>pyridostigmine bromide tab er 180 mg</i>	65
<i>pyrimethamine tab 25 mg</i>	7
Q	
QBREXZA PAD 2.4%	113
QINLOCK TAB 50MG	26
QSYMIA CAP 11.25-69	43
QSYMIA CAP 15-92MG	43
QSYMIA CAP 3.75-23.....	43
QSYMIA CAP 7.5-46MG	43
QUADRACEL INJ.....	99
QUADRACEL INJ 0.5ML	99
<i>quetiapine fumarate tab 100 mg</i>	53
<i>quetiapine fumarate tab 150 mg</i>	53
<i>quetiapine fumarate tab 200 mg</i>	53
<i>quetiapine fumarate tab 25 mg</i>	53
<i>quetiapine fumarate tab 300 mg</i>	53
<i>quetiapine fumarate tab 400 mg</i>	53
<i>quetiapine fumarate tab 50 mg</i>	53
<i>quetiapine fumarate tab er 24hr 150</i> <i>mg</i>	53
<i>quetiapine fumarate tab er 24hr 200</i> <i>mg</i>	54
<i>quetiapine fumarate tab er 24hr 300</i> <i>mg</i>	54
<i>quetiapine fumarate tab er 24hr 400</i> <i>mg</i>	54
<i>quetiapine fumarate tab er 24hr 50 mg</i>	53
<i>quinapril hcl tab 10 mg</i>	30
<i>quinapril hcl tab 20 mg</i>	30
<i>quinapril hcl tab 40 mg</i>	30
<i>quinapril hcl tab 5 mg</i>	30
<i>quinidine gluconate tab er 324 mg</i> ...	34
<i>quinidine sulfate tab 200 mg</i>	34
<i>quinidine sulfate tab 300 mg</i>	34
<i>quinine sulfate cap 324 mg</i>	9
R	
RABAVERT INJ	99
<i>rabeprazole sodium ec tab 20 mg</i>	89
<i>raloxifene hcl tab 60 mg</i>	82
<i>ramelteon tab 8 mg</i>	63
<i>ramipril cap 1.25 mg</i>	30
<i>ramipril cap 10 mg</i>	31
<i>ramipril cap 2.5 mg</i>	30
<i>ramipril cap 5 mg</i>	31
<i>ranitidine hcl inj 50 mg/2ml (25</i> <i>mg/ml)</i>	87
<i>ranolazine tab er 12hr 1000 mg</i>	42
<i>ranolazine tab er 12hr 500 mg</i>	41
RAPAMUNE TAB 0.5MG	98
RAPAMUNE TAB 1MG	98
RAPAMUNE TAB 2MG	98
<i>rasagiline mesylate tab 0.5 mg (base</i> <i>equiv)</i>	50
<i>rasagiline mesylate tab 1 mg (base</i> <i>equiv)</i>	50
RAVICTI LIQ 1.1GM/ML.....	82
RAYALDEE CAP 30MCG	85
REBIF INJ 22/0.5	66
REBIF INJ 44/0.5	66
REBIF REBIDO INJ 22/0.5	66
REBIF REBIDO INJ 44/0.5	66
REBIF REBIDO INJ TITRATN	66
REBIF TITRTN INJ PACK	67
<i>reclipsen</i>	77
RECOMBIVA HB INJ 10MCG/ML.....	99
RECOMBIVA HB INJ 5MCG/0.5	99
RECOMBIVA-HB INJ 40MCG/ML.....	99
RECTIV OIN 0.4%	113
REGRANEX GEL 0.01%	113
RELENZA MIS DISKHALE.....	13
RELISTOR INJ 12/0.6ML.....	88
RELISTOR INJ 8/0.4ML	88
<i>repaglinide tab 0.5 mg</i>	70
<i>repaglinide tab 1 mg</i>	70
<i>repaglinide tab 2 mg</i>	71

RESTASIS EMU 0.05% OP	104	<i>risperidone microspheres for im</i>	
RESTASIS MUL EMU 0.05% OP	104	<i>extended rel susp 12.5 mg</i>	54
RETEVMO CAP 40MG.....	26	<i>risperidone microspheres for im</i>	
RETEVMO CAP 80MG.....	26	<i>extended rel susp 25 mg</i>	54
RETROVIR INJ 10MG/ML	10	<i>risperidone microspheres for im</i>	
REVLIMID CAP 10MG	21	<i>extended rel susp 37.5 mg</i>	54
REVLIMID CAP 15MG	21	<i>risperidone microspheres for im</i>	
REVLIMID CAP 2.5MG	21	<i>extended rel susp 50 mg</i>	54
REVLIMID CAP 20MG	21	<i>risperidone orally disintegrating tab</i>	
REVLIMID CAP 25MG	21	<i>0.25 mg</i>	54
REVLIMID CAP 5MG.....	21	<i>risperidone orally disintegrating tab 0.5</i>	
REXULTI TAB 0.25MG	54	<i>mg</i>	54
REXULTI TAB 0.5MG	54	<i>risperidone orally disintegrating tab 1</i>	
REXULTI TAB 1MG.....	54	<i>mg</i>	54
REXULTI TAB 2MG.....	54	<i>risperidone orally disintegrating tab 2</i>	
REXULTI TAB 3MG.....	54	<i>mg</i>	54
REXULTI TAB 4MG.....	54	<i>risperidone orally disintegrating tab 3</i>	
REYATAZ POW 50MG	10	<i>mg</i>	54
REZLIDHIA CAP 150MG.....	26	<i>risperidone orally disintegrating tab 4</i>	
REZUROCK TAB 200MG.....	98	<i>mg</i>	54
RHOPRESSA SOL 0.02%	104	<i>risperidone soln 1 mg/ml</i>	54
<i>ribavirin cap 200 mg.....</i>	13	<i>risperidone tab 0.25 mg.....</i>	54
<i>ribavirin tab 200 mg.....</i>	13	<i>risperidone tab 0.5 mg.....</i>	54
RIDAURA CAP 3MG.....	96	<i>risperidone tab 1 mg</i>	54
<i>rifabutin cap 150 mg</i>	12	<i>risperidone tab 2 mg</i>	54
<i>rifampin cap 150 mg.....</i>	12	<i>risperidone tab 3 mg</i>	54
<i>rifampin cap 300 mg.....</i>	12	<i>risperidone tab 4 mg</i>	54
<i>rifampin for inj 600 mg</i>	12	<i>ritonavir tab 100 mg.....</i>	10
<i>riluzole tab 50 mg</i>	65	RITUXAN INJ 100MG.....	26
<i>rimantadine hydrochloride tab 100 mg</i>		RITUXAN INJ 500MG.....	26
<i>.....</i>	13	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
<i>ringer's solution</i>	100	<i>equivalent)</i>	45
<i>ringer's solution for irrigation</i>	113	<i>rivastigmine tartrate cap 3 mg (base</i>	
RINVOQ TAB 15MG ER.....	95	<i>equivalent)</i>	45
RINVOQ TAB 30MG ER.....	95	<i>rivastigmine tartrate cap 4.5 mg (base</i>	
RINVOQ TAB 45MG ER.....	95	<i>equivalent)</i>	45
<i>risedronate sodium tab 150 mg.....</i>	73	<i>rivastigmine tartrate cap 6 mg (base</i>	
<i>risedronate sodium tab 30 mg</i>	73	<i>equivalent)</i>	45
<i>risedronate sodium tab 35 mg</i>	73	<i>rivastigmine transdermal.....</i>	45
<i>risedronate sodium tab 5 mg</i>	73	<i>rizatriptan benzoate oral disintegrating</i>	
<i>risedronate sodium tab delayed release</i>		<i>tab 10 mg (base eq).....</i>	64
<i>35 mg.....</i>	73	<i>rizatriptan benzoate oral disintegrating</i>	
RISPERDAL INJ 12.5MG	54	<i>tab 5 mg (base eq).....</i>	64
RISPERDAL INJ 25MG	54	<i>rizatriptan benzoate tab 10 mg (base</i>	
RISPERDAL INJ 37.5MG	54	<i>equivalent)</i>	64
RISPERDAL INJ 50MG	54	<i>rizatriptan benzoate tab 5 mg (base</i>	
		<i>equivalent)</i>	64

ROCKLATAN DRO	104
<i>roflumilast tab 250 mcg</i>	107
<i>roflumilast tab 500 mcg</i>	107
<i>ropinirole hydrochloride tab 0.25 mg</i>	50
<i>ropinirole hydrochloride tab 0.5 mg</i> ..	50
<i>ropinirole hydrochloride tab 1 mg</i>	50
<i>ropinirole hydrochloride tab 2 mg</i>	50
<i>ropinirole hydrochloride tab 3 mg</i>	50
<i>ropinirole hydrochloride tab 4 mg</i>	50
<i>ropinirole hydrochloride tab 5 mg</i>	50
<i>ropinirole hydrochloride tab er 24hr 12</i> <i>mg (base equivalent)</i>	50
<i>ropinirole hydrochloride tab er 24hr 2</i> <i>mg (base equivalent)</i>	50
<i>ropinirole hydrochloride tab er 24hr 4</i> <i>mg (base equivalent)</i>	50
<i>ropinirole hydrochloride tab er 24hr 6</i> <i>mg (base equivalent)</i>	50
<i>ropinirole hydrochloride tab er 24hr 8</i> <i>mg (base equivalent)</i>	50
<i>rosuvastatin calcium tab 10 mg</i>	35
<i>rosuvastatin calcium tab 20 mg</i>	35
<i>rosuvastatin calcium tab 40 mg</i>	35
<i>rosuvastatin calcium tab 5 mg</i>	35
ROTARIX SUS	99
ROTATEQ SOL.....	99
<i>roweepra</i>	59
ROZLYTREK CAP 100MG.....	26
ROZLYTREK CAP 200MG.....	26
ROZLYTREK PAK 50MG.....	26
RUBRACA TAB 200MG.....	26
RUBRACA TAB 250MG.....	26
RUBRACA TAB 300MG.....	26
RUCONEST INJ 2100UNIT.....	94
<i>rufinamide susp 40 mg/ml</i>	59
<i>rufinamide tab 200 mg</i>	59
<i>rufinamide tab 400 mg</i>	59
RUKOBIA TAB 600MG ER.....	10
RYBELSUS TAB 14MG	71
RYBELSUS TAB 3MG	71
RYBELSUS TAB 7MG	71
RYDAPT CAP 25MG	26
RYTARY CAP 145MG	50
RYTARY CAP 195MG	50
RYTARY CAP 245MG	50
RYTARY CAP 95MG	50

S

<i>salsalate tab 500 mg</i>	2
<i>salsalate tab 750 mg</i>	2
SANCUSO DIS 3.1MG	86
SANDIMMUNE CAP 100MG.....	98
SANDIMMUNE CAP 25MG	98
SANDIMMUNE SOL 100MG/ML	98
SANDOSTATIN KIT LAR 10MG.....	82
SANDOSTATIN KIT LAR 20MG.....	82
SANDOSTATIN KIT LAR 30MG.....	82
SANTYL OIN 250/GM	114
<i>sapropterin dihydrochloride powder</i> <i>packet 100 mg</i>	82
<i>sapropterin dihydrochloride powder</i> <i>packet 500 mg</i>	82
<i>sapropterin dihydrochloride tab 100 mg</i>	82
SAXENDA INJ 18MG/3ML.....	43
SCEMBLIX TAB 20MG.....	26
SCEMBLIX TAB 40MG.....	26
<i>scopolamine td patch 72hr 1 mg/3days</i>	86
SECUADO DIS 3.8MG	54
SECUADO DIS 5.7MG	54
SECUADO DIS 7.6MG	54
<i>selegiline hcl cap 5 mg</i>	50
<i>selegiline hcl tab 5 mg</i>	50
<i>selenium sulfide lotion 2.5%</i>	110
SELZENTRY SOL 20MG/ML	10
SELZENTRY TAB 25MG.....	10
SELZENTRY TAB 75MG.....	10
SEREVENT DIS AER 50MCG	106
<i>sertraline hcl oral concentrate for</i> <i>solution 20 mg/ml</i>	48
<i>sertraline hcl tab 100 mg</i>	48
<i>sertraline hcl tab 25 mg</i>	48
<i>sertraline hcl tab 50 mg</i>	48
<i>setlakin</i>	77
<i>sevelamer carbonate packet 0.8 gm</i> .	82
<i>sevelamer carbonate packet 2.4 gm</i> .	82
<i>sevelamer carbonate tab 800 mg</i>	83
<i>sevelamer hcl tab 400 mg</i>	83
<i>sevelamer hcl tab 800 mg</i>	83
<i>sf 5000 plus</i>	114
<i>sharobel</i>	77
SHINGRIX INJ 50/0.5ML	99
SIGNIFOR INJ 0.3MG/ML.....	82

SIGNIFOR INJ 0.6MG/ML.....	82	SOLTAMOX SOL 10MG/5ML	20
SIGNIFOR INJ 0.9MG/ML.....	82	SOLU-CORTEF INJ 1000MG	80
SIGNIFOR LAR INJ 20MG.....	82	SOLU-CORTEF INJ 100MG	80
SIGNIFOR LAR INJ 40MG.....	82	SOLU-CORTEF INJ 250MG	80
SIGNIFOR LAR INJ 60MG.....	82	SOLU-CORTEF INJ 500MG	80
<i>sildenafil citrate for suspension 10</i>		SOLU-MEDROL INJ 1000MG.....	80
<i>mg/ml.....</i>	43	SOLU-MEDROL INJ 125MG	80
<i>sildenafil citrate tab 100 mg</i>	90	SOLU-MEDROL INJ 2GM	80
<i>sildenafil citrate tab 20 mg</i>	43	SOLU-MEDROL INJ 40MG	80
<i>sildenafil citrate tab 25 mg</i>	90	SOLU-MEDROL INJ 500MG	80
<i>sildenafil citrate tab 50 mg</i>	90	SOMAVERT INJ 10MG	82
<i>silodosin cap 4 mg.....</i>	89	SOMAVERT INJ 15MG	82
<i>silodosin cap 8 mg.....</i>	89	SOMAVERT INJ 20MG	82
<i>silver sulfadiazine cream 1%</i>	110	SOMAVERT INJ 25MG	82
SIMBRINZA SUS 1-0.2%	104	SOMAVERT INJ 30MG	82
SIMULECT INJ 10MG.....	98	<i>sorafenib tosylate tab 200 mg (base</i>	
SIMULECT INJ 20MG.....	98	<i>equivalent)</i>	26
<i>simvastatin tab 10 mg</i>	35	<i>sorine</i>	34
<i>simvastatin tab 20 mg</i>	35	<i>sotalol hcl (afib/afl) tab 120 mg</i>	34
<i>simvastatin tab 40 mg</i>	35	<i>sotalol hcl (afib/afl) tab 160 mg</i>	34
<i>simvastatin tab 5 mg</i>	35	<i>sotalol hcl (afib/afl) tab 80 mg.....</i>	34
<i>simvastatin tab 80 mg</i>	35	<i>sotalol hcl tab 120 mg</i>	34
<i>sirolimus oral soln 1 mg/ml</i>	98	<i>sotalol hcl tab 160 mg</i>	34
<i>sirolimus tab 0.5 mg.....</i>	98	<i>sotalol hcl tab 240 mg</i>	34
<i>sirolimus tab 1 mg</i>	98	<i>sotalol hcl tab 80 mg</i>	34
<i>sirolimus tab 2 mg</i>	98	SOVALDI PAK 150MG.....	13
SIRTURO TAB 100MG	12	SOVALDI PAK 200MG.....	13
SIRTURO TAB 20MG	12	SOVALDI TAB 200MG	13
SKYRIZI INJ 150DOSE	95	SOVALDI TAB 400MG	13
SKYRIZI INJ 150MG/ML.....	95	<i>spinosad susp 0.9%</i>	113
SKYRIZI INJ 180/1.2	95	<i>spironolactone & hydrochlorothiazide</i>	
SKYRIZI INJ 360/2.4	95	<i>tab 25-25 mg.....</i>	40
SKYRIZI PEN INJ 150MG/ML	95	<i>spironolactone tab 100 mg</i>	31
SLYND TAB 4MG.....	77	<i>spironolactone tab 25 mg.....</i>	31
SOD OXYBATE SOL 500MG/ML.....	67	<i>spironolactone tab 50 mg.....</i>	31
<i>sod sulfate-pot sulf-mg sulf oral sol</i>		<i>sprintec 28</i>	77
<i>17.5-3.13-1.6 gm/177ml.....</i>	87	SPRITAM TAB 1000MG.....	59
<i>sodium chloride irrigation soln 0.9%</i>		SPRITAM TAB 250MG.....	59
<i>.....</i>	114	SPRITAM TAB 500MG.....	59
<i>sodium chloride iv soln 0.45%</i>	101	SPRITAM TAB 750MG.....	59
<i>sodium chloride iv soln 0.9%</i>	100	SPRYCEL TAB 100MG.....	27
<i>sodium chloride iv soln 3%.....</i>	101	SPRYCEL TAB 140MG.....	27
<i>sodium fluoride 2.2 mg</i>	101	SPRYCEL TAB 20MG.....	27
<i>sodium polystyrene sulfonate powder</i>		SPRYCEL TAB 50MG.....	27
<i>.....</i>	74	SPRYCEL TAB 70MG.....	27
<i>solifenacin succinate tab 10 mg.....</i>	91	SPRYCEL TAB 80MG.....	27
<i>solifenacin succinate tab 5 mg</i>	91	<i>sps</i>	74

<i>sronyx</i>	77	<i>sumatriptan succinate tab 25 mg</i>	64
<i>ssd</i>	110	<i>sumatriptan succinate tab 50 mg</i>	65
STAXYN TAB 10MG	90	<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	65
STELARA INJ 45MG/0.5	95	<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	27
STELARA INJ 90MG/ML	95	<i>sunitinib malate cap 25 mg (base equivalent)</i>	27
STENDRA TAB 100MG	90	<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	27
STENDRA TAB 200MG	90	<i>sunitinib malate cap 50 mg (base equivalent)</i>	27
STENDRA TAB 50MG	90	SUNLENCA INJ	10
STIVARGA TAB 40MG	27	SUNLENCA TAB 300MG	10
<i>streptomycin sulfate for inj 1 gm</i>	7	<i>syeda tab 3-0.03mg</i>	77
STRIBILD TAB	11	SYMDEKO TAB 50-75MG	107
<i>subvenite</i>	59	SYMLINPEN 60 INJ 1000MCG	71
<i>subvenite starter kit/blu</i>	59	SYMLINPEN 120 INJ 1000MCG	71
<i>subvenite starter kit/gre</i>	59	SYMPAZAN MIS 10MG	59
<i>subvenite starter kit/ora</i>	59	SYMPAZAN MIS 20MG	59
SUCRAID SOL 8500/ML	88	SYMPAZAN MIS 5MG	59
<i>sucralfate susp 1 gm/10ml</i>	88	SYMPROIC TAB 0.2MG	88
<i>sucralfate tab 1 gm</i>	88	SYMTUZA TAB	11
<i>sulfacetamide sodium lotion 10% (acne)</i>	109	SYNAGIS INJ 100MG/ML	97
<i>sulfacetamide sodium ophth oint 10%</i>	102	SYNAREL SOL 2MG/ML	77
<i>sulfacetamide sodium ophth soln 10%</i>	102	SYNERCID INJ 500MG	7
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	102	SYNJARDY TAB 12.5-1000MG	71
<i>sulfadiazine tab 500 mg</i>	7	SYNJARDY TAB 12.5-500	71
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	7	SYNJARDY TAB 5-1000MG	71
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	7	SYNJARDY TAB 5-500MG	71
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	7	SYNJARDY XR TAB 10-1000	71
SULFAMYLON CRE 85MG/GM	110	SYNJARDY XR TAB 12.5-1000MG	71
<i>sulfasalazin tab 500mg dr</i>	87	SYNJARDY XR TAB 25-1000	71
<i>sulfasalazine tab 500 mg</i>	87	SYNJARDY XR TAB 5-1000MG	71
<i>sulindac tab 150 mg</i>	2	SYNTHROID TAB 100MCG	84
<i>sulindac tab 200 mg</i>	2	SYNTHROID TAB 112MCG	84
<i>sumatriptan nasal spray 20 mg/act</i> ..	64	SYNTHROID TAB 125MCG	84
<i>sumatriptan nasal spray 5 mg/act</i>	64	SYNTHROID TAB 137MCG	84
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	64	SYNTHROID TAB 150MCG	84
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	64	SYNTHROID TAB 175MCG	84
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	64	SYNTHROID TAB 200MCG	84
<i>sumatriptan succinate tab 100 mg</i>	65	SYNTHROID TAB 25MCG	84
		SYNTHROID TAB 300MCG	84
		SYNTHROID TAB 50MCG	84
		SYNTHROID TAB 75MCG	84
		SYNTHROID TAB 88MCG	84

T	
TABLOID TAB 40MG.....	20
TABRECTA TAB 150MG.....	27
TABRECTA TAB 200MG.....	27
<i>tacrolimus cap 0.5 mg</i>	98
<i>tacrolimus cap 1 mg</i>	98
<i>tacrolimus cap 5 mg</i>	98
<i>tacrolimus oint 0.03%</i>	113
<i>tacrolimus oint 0.1%</i>	113
<i>tadalafil tab 10 mg</i>	90
<i>tadalafil tab 2.5 mg</i>	89
<i>tadalafil tab 20 mg</i>	90
<i>tadalafil tab 20 mg (pah)</i>	43
<i>tadalafil tab 5 mg</i>	89
TAFINLAR CAP 50MG	27
TAFINLAR CAP 75MG	27
TAFINLAR TAB 10MG	27
TAGRISSO TAB 40MG	27
TAGRISSO TAB 80MG	27
TAKHZYRO INJ 150MG/ML.....	94
TAKHZYRO INJ 300/2ML.....	94
TALICIA CAP	88
TALTZ INJ 80MG/ML	95
TALZENNA CAP 0.1MG	27
TALZENNA CAP 0.25MG	27
TALZENNA CAP 0.35MG	27
TALZENNA CAP 0.5MG	27
TALZENNA CAP 0.75MG	27
TALZENNA CAP 1MG	27
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	20
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	20
<i>tamsulosin hcl cap 0.4 mg</i>	89
TARGRETIN GEL 1%	113
<i>tarina 24 fe</i>	77
<i>tarina fe 1/20 eq</i>	77
TASIGNA CAP 150MG.....	27
TASIGNA CAP 200MG.....	27
TASIGNA CAP 50MG	27
<i>tasimelteon capsule 20 mg</i>	63
TAVNEOS CAP 10MG	94
<i>taysofy cap 1/20</i>	77
<i>tazarotene gel 0.05%</i>	110
<i>tazarotene gel 0.1%</i>	110
<i>tazicef</i>	14
<i>taztia xt</i>	39
TAZVERIK TAB 200MG	27
TDVAX INJ 2-2 LF.....	99
TECENTRIQ INJ 1200/20	27
TECVAYLI INJ 153/1.7	27
TECVAYLI INJ 30MG/3ML	27
TEFLARO INJ 400MG.....	14
TEFLARO INJ 600MG.....	14
TEGSEDI INJ 284/1.5	65
<i>telmisartan tab 20 mg</i>	33
<i>telmisartan tab 40 mg</i>	33
<i>telmisartan tab 80 mg</i>	33
<i>telmisartan-amlodipine tab 40-10 mg</i>	32
<i>telmisartan-amlodipine tab 40-5 mg</i> .	32
<i>telmisartan-amlodipine tab 80-10 mg</i>	32
<i>telmisartan-amlodipine tab 80-5 mg</i> .	32
<i>telmisartan-hydrochlorothiazide tab 40- 12.5 mg</i>	32
<i>telmisartan-hydrochlorothiazide tab 80- 12.5 mg</i>	32
<i>telmisartan-hydrochlorothiazide tab 80- 25 mg</i>	32
<i>temazepam cap 15 mg</i>	63
<i>temazepam cap 22.5 mg</i>	63
<i>temazepam cap 30 mg</i>	63
<i>temazepam cap 7.5 mg</i>	63
TEMIXYS TAB 300-300.....	11
<i>tencon</i>	1
TENIVAC INJ 5-2LF.....	99
<i>tenofovir disoproxil fumarate tab 300 mg</i>	10
TEPMETKO TAB 225MG	27
<i>terazosin hcl cap 1 mg (base equivalent)</i>	31
<i>terazosin hcl cap 10 mg (base equivalent)</i>	31
<i>terazosin hcl cap 2 mg (base equivalent)</i>	31
<i>terazosin hcl cap 5 mg (base equivalent)</i>	31
<i>terbinafine hcl tab 250 mg</i>	9
<i>terbutaline sulfate inj 1 mg/ml</i>	106
<i>terbutaline sulfate tab 2.5 mg</i>	106
<i>terbutaline sulfate tab 5 mg</i>	106
<i>terconazole vaginal cream 0.4%</i>	92
<i>terconazole vaginal cream 0.8%</i>	92

<i>terconazole vaginal suppos 80 mg</i>	92	<i>thiothixene cap 5 mg</i>	55
<i>teriflunomide tab 14 mg</i>	67	THYMOGLOBULN INJ 25MG.....	98
<i>teriflunomide tab 7 mg</i>	67	<i>tiadylt er</i>	39
<i>teriparatide (recombinant) soln pen-inj</i>		<i>tiagabine hcl tab 12 mg</i>	59
<i>600 mcg/2.4ml</i>	73	<i>tiagabine hcl tab 16 mg</i>	59
TERIPARATIDE INJ 620/2.48.....	73	<i>tiagabine hcl tab 2 mg</i>	59
<i>testosterone cypionate im inj in oil 100</i>		<i>tiagabine hcl tab 4 mg</i>	59
<i>mg/ml</i>	68	TIBSOVO TAB 250MG	27
<i>testosterone cypionate im inj in oil 200</i>		TICOVAC INJ	99
<i>mg/ml</i>	68	<i>tigecycline for iv soln 50 mg</i>	18
<i>testosterone enanthate im inj in oil 200</i>		<i>tilia fe</i>	77
<i>mg/ml</i>	68	<i>timolol maleate ophth gel forming soln</i>	
<i>testosterone td gel 10mg/act (2%)</i> ...68		<i>0.25%</i>	104
<i>testosterone td gel 12.5 mg/act (1%)</i>		<i>timolol maleate ophth gel forming soln</i>	
.....	69	<i>0.5%</i>	104
<i>testosterone td gel 20.25 mg/1.25gm</i>		<i>timolol maleate ophth soln 0.25%</i> ..	104
<i>(1.62%)</i>	69	<i>timolol maleate ophth soln 0.5%</i>	104
<i>testosterone td gel 20.25 mg/act</i>		<i>timolol maleate preservative free ophth</i>	
<i>(1.62%)</i>	69	<i>soln 0.25%</i>	104
<i>testosterone td gel 25 mg/2.5gm (1%)</i>		<i>timolol maleate preservative free ophth</i>	
.....	69	<i>soln 0.5%</i>	104
<i>testosterone td gel 40.5 mg/2.5gm</i>		<i>timolol maleate tab 10 mg</i>	37
<i>(1.62%)</i>	69	<i>timolol maleate tab 20 mg</i>	38
<i>testosterone td gel 50 mg/5gm (1%)</i> 69		<i>timolol maleate tab 5 mg</i>	37
<i>testosterone td soln 30 mg/act</i>	69	<i>tinidazole tab 250 mg</i>	8
<i>tetrabenazine tab 12.5 mg</i>	65	<i>tinidazole tab 500 mg</i>	8
<i>tetrabenazine tab 25 mg</i>	65	<i>tiopronin tab 100 mg</i>	91
<i>tetracycline hcl cap 250 mg</i>	18	TIROSINT CAP 100MCG	84
<i>tetracycline hcl cap 500 mg</i>	18	TIROSINT CAP 112MCG	84
THALOMID CAP 100MG	21	TIROSINT CAP 125MCG	84
THALOMID CAP 150MG	21	TIROSINT CAP 137MCG	84
THALOMID CAP 200MG	21	TIROSINT CAP 13MCG	84
THALOMID CAP 50MG	21	TIROSINT CAP 150MCG	84
THEO-24 CAP 100MG CR.....	107	TIROSINT CAP 175MCG	84
THEO-24 CAP 200MG CR.....	107	TIROSINT CAP 200	84
<i>theophylline tab er 12hr 300 mg</i>	107	TIROSINT CAP 25MCG	84
<i>theophylline tab er 12hr 450 mg</i>	107	TIROSINT CAP 37.5MCG	84
<i>theophylline tab er 24hr 400 mg</i>	107	TIROSINT CAP 44MCG	84
<i>theophylline tab er 24hr 600 mg</i>	107	TIROSINT CAP 50MCG	84
<i>thioridazine hcl tab 10 mg</i>	54	TIROSINT CAP 62.5MCG	84
<i>thioridazine hcl tab 100 mg</i>	54	TIROSINT CAP 75MCG	84
<i>thioridazine hcl tab 25 mg</i>	54	TIROSINT CAP 88MCG	84
<i>thioridazine hcl tab 50 mg</i>	54	TIROSINT-SOL SOL 100MCG	85
<i>thiotepa for inj 15 mg</i>	19	TIROSINT-SOL SOL 112MCG	85
<i>thiothixene cap 1 mg</i>	54	TIROSINT-SOL SOL 125MCG	85
<i>thiothixene cap 10 mg</i>	55	TIROSINT-SOL SOL 137MCG	85
<i>thiothixene cap 2 mg</i>	55	TIROSINT-SOL SOL 13MCG/ML	84

TIROSINT-SOL SOL 150MCG.....	85	<i>toposar</i>	22
TIROSINT-SOL SOL 175MCG.....	85	<i>topotecan hcl for inj 4 mg (base equiv)</i>	
TIROSINT-SOL SOL 200MCG.....	85	.....	22
TIROSINT-SOL SOL 25MCG/ML	84	<i>toremifene citrate tab 60 mg (base</i>	
TIROSINT-SOL SOL 37.5/ML.....	84	<i>equivalent)</i>	21
TIROSINT-SOL SOL 44MCG/ML	85	TORISEL INJ 25MG/ML.....	27
TIROSINT-SOL SOL 50MCG/ML	85	<i>toremide tab 10 mg</i>	40
TIROSINT-SOL SOL 62.5/ML.....	85	<i>toremide tab 100 mg</i>	40
TIROSINT-SOL SOL 75MCG/ML	85	<i>toremide tab 20 mg</i>	40
TIROSINT-SOL SOL 88MCG/ML	85	<i>toremide tab 5 mg</i>	40
TIVICAY PD TAB 5MG.....	10	TOUJEO MAX INJ 300/ML	72
TIVICAY TAB 10MG.....	10	TOUJEO SOLO INJ 300/ML.....	72
TIVICAY TAB 25MG.....	10	<i>tovet</i>	112
TIVICAY TAB 50MG.....	10	TRADJENTA TAB 5MG	71
<i>tizanidine hcl tab 2 mg (base</i>		<i>tramadol hcl cap er 24hr biphasic</i>	
<i>equivalent)</i>	67	<i>release 100 mg</i>	3
<i>tizanidine hcl tab 4 mg (base</i>		<i>tramadol hcl cap er 24hr biphasic</i>	
<i>equivalent)</i>	67	<i>release 200 mg</i>	3
TOBI PODHALR CAP 28MG.....	8	<i>tramadol hcl cap er 24hr biphasic</i>	
TOBRADEX OIN 0.3-0.1%	102	<i>release 300 mg</i>	4
<i>tobramycin nebu soln 300 mg/4ml</i>	8	<i>tramadol hcl tab 100 mg</i>	6
<i>tobramycin nebu soln 300 mg/5ml</i>	8	<i>tramadol hcl tab 50 mg</i>	6
<i>tobramycin ophth soln 0.3%</i>	102	<i>tramadol hcl tab er 24hr 100 mg</i>	4
<i>tobramycin sulfate inj 10 mg/ml (base</i>		<i>tramadol hcl tab er 24hr 200 mg</i>	4
<i>equivalent)</i>	8	<i>tramadol hcl tab er 24hr 300 mg</i>	4
<i>tobramycin sulfate inj 80 mg/2ml (40</i>		<i>tramadol hcl tab er 24hr biphasic</i>	
<i>mg/ml) (base equiv)</i>	8	<i>release 100 mg</i>	4
<i>tobramycin-dexamethasone ophth susp</i>		<i>tramadol hcl tab er 24hr biphasic</i>	
<i>0.3-0.1%</i>	102	<i>release 200 mg</i>	4
TOBREX OIN 0.3% OP	102	<i>tramadol hcl tab er 24hr biphasic</i>	
<i>tolcapone tab 100 mg</i>	50	<i>release 300 mg</i>	4
<i>tolterodine tartrate cap er 24hr 2 mg</i>	91	<i>tramadol-acetaminophen tab 37.5-325</i>	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	91	<i>mg</i>	6
<i>tolterodine tartrate tab 1 mg</i>	91	<i>trandolapril tab 1 mg</i>	31
<i>tolterodine tartrate tab 2 mg</i>	91	<i>trandolapril tab 2 mg</i>	31
<i>tolvaptan tab 15 mg</i>	82	<i>trandolapril tab 4 mg</i>	31
<i>tolvaptan tab 30 mg</i>	82	<i>trandolapril-verapamil hcl tab er 1-240</i>	
<i>topiramate cap er 24hr 100 mg</i>	60	<i>mg</i>	30
<i>topiramate cap er 24hr 200 mg</i>	60	<i>trandolapril-verapamil hcl tab er 2-180</i>	
<i>topiramate cap er 24hr 25 mg</i>	59	<i>mg</i>	30
<i>topiramate cap er 24hr 50 mg</i>	60	<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>topiramate sprinkle cap 15 mg</i>	60	<i>mg</i>	30
<i>topiramate sprinkle cap 25 mg</i>	60	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>topiramate tab 100 mg</i>	60	<i>mg</i>	30
<i>topiramate tab 200 mg</i>	60	<i>tranexamic acid iv soln 1000 mg/10ml</i>	
<i>topiramate tab 25 mg</i>	60	<i>(100 mg/ml)</i>	94
<i>topiramate tab 50 mg</i>	60	<i>tranexamic acid tab 650 mg</i>	94

<i>tranylcypromine sulfate tab 10 mg</i> ...48	<i>triamterene & hydrochlorothiazide tab</i>
TRAVASOL INJ 10%.....101	75-50 mg .....40
<i>travoprost ophth soln 0.004%</i>	<i>triamterene cap 100 mg</i>.....40
<i>(benzalkonium free) (bak free)</i>....104	<i>triamterene cap 50 mg</i> .....40
<i>trazodone hcl tab 100 mg</i>.....48	<i>triazolam tab 0.125 mg</i>.....63
<i>trazodone hcl tab 150 mg</i>.....48	<i>triazolam tab 0.25 mg</i> .....63
<i>trazodone hcl tab 300 mg</i>.....48	<i>triderm</i> .....112
<i>trazodone hcl tab 50 mg</i> .....48	<i>trientine hcl cap 250 mg</i> .....74
TREANDA INJ 100MG .....19	<i>tri-estaryll tab</i>.....77
TREANDA INJ 25MG.....19	<i>trifluoperazine hcl tab 1 mg (base</i>
TRECTOR TAB 250MG .....12	<i>equivalent)</i> .....55
TRELEGY AER 100MCG.....105	<i>trifluoperazine hcl tab 10 mg (base</i>
TRELEGY AER 200MCG.....105	<i>equivalent)</i> .....55
TRELSTAR MIX INJ 11.25MG .....21	<i>trifluoperazine hcl tab 2 mg (base</i>
TRELSTAR MIX INJ 22.5MG.....21	<i>equivalent)</i> .....55
TRELSTAR MIX INJ 3.75MG.....21	<i>trifluoperazine hcl tab 5 mg (base</i>
TRESIBA FLEX INJ 100UNIT .....72	<i>equivalent)</i> .....55
TRESIBA FLEX INJ 200UNIT.....72	<i>trifluridine ophth soln 1%</i>.....102
TRESIBA INJ 100UNIT.....72	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>
<i>tretinoin cap 10 mg</i> .....22	.....50
<i>tretinoin cream 0.025%</i> .....109	<i>trihexyphenidyl hcl tab 2 mg</i> .....50
<i>tretinoin cream 0.05%</i> .....109	<i>trihexyphenidyl hcl tab 5 mg</i> .....50
<i>tretinoin cream 0.1%</i>.....109	TRIJARDY XR TAB ER 24HR 10-5-
<i>tretinoin gel 0.01%</i> .....109	1000MG .....71
<i>tretinoin gel 0.025%</i>.....109	TRIJARDY XR TAB ER 24HR 12.5-2.5-
<i>tretinoin gel 0.05%</i> .....109	1000MG .....71
<i>triamcinolone acetonide cream 0.025%</i>	TRIJARDY XR TAB ER 24HR 25-5-
.....112	1000MG .....71
<i>triamcinolone acetonide cream 0.1%</i>	TRIJARDY XR TAB ER 24HR 5-2.5-
.....112	1000MG .....71
<i>triamcinolone acetonide cream 0.5%</i>	TRIKAFTA TAB .....107
.....112	<i>tri-legend fe</i> .....77
<i>triamcinolone acetonide dental paste</i>	<i>trimethoprim tab 100 mg</i> 8
0.1% .....114	<i>tri-mili tab</i>.....77
<i>triamcinolone acetonide lotion 0.025%</i>	<i>trimipramine maleate cap 100 mg</i> ...48
.....112	<i>trimipramine maleate cap 25 mg</i>.....48
<i>triamcinolone acetonide lotion 0.1%</i>	<i>trimipramine maleate cap 50 mg</i>.....48
.....112	TRINTELLIX TAB 10MG .....48
<i>triamcinolone acetonide oint 0.025%</i>	TRINTELLIX TAB 20MG .....48
.....112	TRINTELLIX TAB 5MG .....48
<i>triamcinolone acetonide oint 0.1%</i> .112	<i>tri-nymyo</i>.....77
<i>triamcinolone acetonide oint 0.5%</i> .112	<i>tri-sprintec</i> .....77
<i>triamterene & hydrochlorothiazide cap</i>	TRIUMEQ PD TAB .....12
37.5-25 mg .....40	TRIUMEQ TAB .....12
<i>triamterene & hydrochlorothiazide tab</i>	<i>trivora-28</i> .....77
37.5-25 mg .....40	<i>tri-vylibra tab</i> .....77
	TRIZIVIR TAB .....12

TROPHAMINE INJ 10%.....	101	<i>ursodiol cap 300 mg</i>	88
<i>trospium chloride cap er 24hr 60 mg</i>	91	<i>ursodiol tab 250 mg</i>	88
<i>trospium chloride tab 20 mg</i>	92	<i>ursodiol tab 500 mg</i>	88
TRULICITY INJ 0.75/0.5	71	UZEDY INJ 100MG.....	55
TRULICITY INJ 1.5/0.5.....	71	UZEDY INJ 125MG.....	55
TRULICITY INJ 3/0.5.....	71	UZEDY INJ 150MG.....	55
TRULICITY INJ 4.5/0.5.....	71	UZEDY INJ 200MG.....	55
TRUMENBA INJ	99	UZEDY INJ 250MG.....	55
TRUQAP TAB 160MG.....	27	UZEDY INJ 50MG	55
TRUQAP TAB 200MG	27	UZEDY INJ 75MG	55
TRUSELTIQ CAP 100MG	27	V	
TRUSELTIQ CAP 125MG	27	<i>valacyclovir hcl tab 1 gm</i>	13
TRUSELTIQ CAP 50MG	27	<i>valacyclovir hcl tab 500 mg</i>	13
TRUSELTIQ CAP 75MG	27	VALCHLOR GEL 0.016%	113
TUKYSA TAB 150MG	28	<i>valganciclovir hcl tab 450 mg (base</i>	
TUKYSA TAB 50MG	27	<i>equivalent)</i>	13
TURALIO CAP 125MG.....	28	<i>valproate sodium inj 100 mg/ml</i>	60
TURALIO CAP 200MG.....	28	<i>valproate sodium oral soln 250 mg/5ml</i>	
<i>turqoz tab</i>	77	<i>(base equiv)</i>	60
TWINRIX INJ	99	<i>valproic acid cap 250 mg</i>	60
TYBLUME CHW 0.1-0.02.....	77	<i>valsartan tab 160 mg</i>	33
TYBOST TAB 150MG	10	<i>valsartan tab 320 mg</i>	33
<i>tydemy</i>	77	<i>valsartan tab 40 mg</i>	33
TYPHIM VI INJ	99	<i>valsartan tab 80 mg</i>	33
TYSABRI INJ 300/15ML.....	67	<i>valsartan-hydrochlorothiazide tab 160-</i>	
TYVASO DPI POW 16-32-48.....	43	<i>12.5 mg</i>	33
TYVASO DPI POW 16-32MCG	43	<i>valsartan-hydrochlorothiazide tab 160-</i>	
TYVASO DPI POW 16MCG.....	43	<i>25 mg</i>	33
TYVASO DPI POW 32-48MCG	43	<i>valsartan-hydrochlorothiazide tab 320-</i>	
TYVASO DPI POW 32MCG.....	43	<i>12.5 mg</i>	33
TYVASO DPI POW 48MCG.....	43	<i>valsartan-hydrochlorothiazide tab 320-</i>	
TYVASO DPI POW 64MCG.....	43	<i>25 mg</i>	33
U		<i>valsartan-hydrochlorothiazide tab 80-</i>	
UBRELVY TAB 100MG.....	65	<i>12.5 mg</i>	32
UBRELVY TAB 50MG	65	VALTOCO SPR 10MG.....	60
UDENYCA INJ 6MG/.6ML	94	VALTOCO SPR 15MG.....	60
UDENYCA INJ 6MG/0.6.....	94	VALTOCO SPR 20MG.....	60
UKONIQ TAB 200MG	28	VALTOCO SPR 5MG	60
<i>unithroid</i>	85	<i>vancomycin hcl cap 125 mg (base</i>	
UPTRAVI TAB 1000MCG	43	<i>equivalent)</i>	8
UPTRAVI TAB 1200MCG	43	<i>vancomycin hcl cap 250 mg (base</i>	
UPTRAVI TAB 1400MCG	43	<i>equivalent)</i>	8
UPTRAVI TAB 1600MCG	43	<i>vancomycin hcl for iv soln 1 gm (base</i>	
UPTRAVI TAB 200MCG	43	<i>equivalent)</i>	8
UPTRAVI TAB 400MCG	43	<i>vancomycin hcl for iv soln 10 gm (base</i>	
UPTRAVI TAB 600MCG	43	<i>equivalent)</i>	8
UPTRAVI TAB 800MCG	43		

<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	8	<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	48
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	8	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	48
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	8	<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	48
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	8	<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	48
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	8	<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	48
VANDAZOLE GEL 0.75%.....	92	<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	48
VANFLYTA TAB 17.7MG	28	<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	48
VANFLYTA TAB 26.5MG	28	<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	48
VAQTA INJ 25/0.5ML	99	<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	48
VAQTA INJ 50UNT/ML	99	VENLAFAXINE TAB 112.5MG	48
<i>vardenafil hcl orally disintegrating tab 10 mg</i>	90	VENTAVIS SOL 10MCG/ML	43
<i>vardenafil hcl tab 10 mg</i>	91	VENTAVIS SOL 20MCG/ML	43
<i>vardenafil hcl tab 2.5 mg</i>	90	VENTOLIN HFA AER.....	106
<i>vardenafil hcl tab 20 mg</i>	91	<i>verapamil hcl cap er 24hr 100 mg</i>	39
<i>vardenafil hcl tab 5 mg</i>	91	<i>verapamil hcl cap er 24hr 120 mg</i>	39
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	68	<i>verapamil hcl cap er 24hr 180 mg</i>	39
<i>varenicline tartrate tab 1 mg (base equiv)</i>	68	<i>verapamil hcl cap er 24hr 200 mg</i>	39
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	68	<i>verapamil hcl cap er 24hr 240 mg</i>	39
VARIVAX INJ.....	100	<i>verapamil hcl cap er 24hr 300 mg</i>	39
VARUBI TAB 90MG	86	<i>verapamil hcl cap er 24hr 360 mg</i>	39
VASCEPA CAP 0.5GM	36	<i>verapamil hcl tab 120 mg</i>	39
VASCEPA CAP 1GM	36	<i>verapamil hcl tab 40 mg</i>	39
VECTIBIX INJ 100MG	28	<i>verapamil hcl tab 80 mg</i>	39
VECTIBIX INJ 400MG	28	<i>verapamil hcl tab er 120 mg</i>	39
<i>velivet</i>	77	<i>verapamil hcl tab er 180 mg</i>	39
VELTASSA POW 16.8GM.....	74	<i>verapamil hcl tab er 240 mg</i>	39
VELTASSA POW 25.2GM.....	74	VERDESO AER 0.05%	112
VELTASSA POW 8.4GM.....	74	VERQUOVO TAB 10MG	42
VENCLEXTA TAB 100MG	28	VERQUOVO TAB 2.5MG	42
VENCLEXTA TAB 10MG.....	28	VERQUOVO TAB 5MG.....	42
VENCLEXTA TAB 50MG.....	28	VERSACLOZ SUS 50MG/ML.....	55
VENCLEXTA TAB START PK.....	28	VERZENIO TAB 100MG.....	28
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	48	VERZENIO TAB 150MG.....	28
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	48	VERZENIO TAB 200MG.....	28
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	48	VERZENIO TAB 50MG	28
		<i>vestura</i>	77
		V-GO 20 KIT.....	72
		V-GO 30 KIT.....	72

V-GO 40 KIT	72	VRAYLAR CAP 1.5MG	55
VIAGRA TAB 100MG	91	VRAYLAR CAP 3MG	55
VIAGRA TAB 25MG	91	VRAYLAR CAP 4.5MG	55
VIAGRA TAB 50MG	91	VRAYLAR CAP 6MG	55
<i>vienva</i>	77	VUMERITY CAP 231MG.....	67
<i>vigabatrin powd pack 500 mg</i>	60	VUMERITY STARTER	67
<i>vigabatrin tab 500 mg</i>	60	<i>vyfemla</i>	77
<i>vigadrone</i>	60	<i>vylibra tab 0.25-35</i>	77
<i>vigadrone tab 500mg</i>	60	VYNDAMAX CAP 61MG	42
<i>vigoder pow 500mg</i>	60	VYVANSE CAP 10MG	63
VIJOICE TAB 125MG	82	VYVANSE CAP 20MG	63
VIJOICE TAB 250MG	82	VYVANSE CAP 30MG	63
VIJOICE TAB 50MG.....	82	VYVANSE CAP 40MG	63
<i>vilazodone hcl tab 10 mg</i>	49	VYVANSE CAP 50MG	63
<i>vilazodone hcl tab 20 mg</i>	49	VYVANSE CAP 60MG	63
<i>vilazodone hcl tab 40 mg</i>	49	VYVANSE CAP 70MG	63
VIMPAT INJ 200MG/20	60	VYZULTA SOL 0.024%	104
VIMPAT SOL 10MG/ML	60	W	
VIMPAT TAB 100MG.....	60	WAKIX TAB 17.8MG.....	67
VIMPAT TAB 150MG.....	60	WAKIX TAB 4.45MG.....	67
VIMPAT TAB 200MG.....	60	<i>warfarin sodium tab 1 mg</i>	93
VIMPAT TAB 50MG	60	<i>warfarin sodium tab 10 mg</i>	93
<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	22	<i>warfarin sodium tab 2 mg</i>	93
<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	22	<i>warfarin sodium tab 2.5 mg</i>	93
VIRACEPT TAB 250MG	10	<i>warfarin sodium tab 3 mg</i>	93
VIRACEPT TAB 625MG	10	<i>warfarin sodium tab 4 mg</i>	93
VIREAD POW 40MG/GM	11	<i>warfarin sodium tab 5 mg</i>	93
VIREAD TAB 150MG.....	11	<i>warfarin sodium tab 6 mg</i>	93
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VITRAKVI SOL 20MG/ML	28	<i>wixela inhub</i>	109
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<i>voriconazole for inj 200 mg</i>	9	XALKORI CAP 250MG.....	28
<i>voriconazole for susp 40 mg/ml</i>	9	XALKORI CAP 50MG	28
<i>voriconazole tab 200 mg</i>	9	XARELTO STAR TAB 15/20MG.....	93
<i>voriconazole tab 50 mg</i>	9	XARELTO SUS 1MG/ML	93
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		XARELTO TAB 20MG	93

XATMEP SOL 2.5MG/ML.....	96
XCOPRI PAK 100-150	60
XCOPRI PAK 12.5-25	60
XCOPRI PAK 150-200MG (MAINTENANCE).....	60
XCOPRI PAK 150-200MG (TITRATION)	60
XCOPRI PAK 50-100MG	60
XCOPRI TAB 100MG.....	60
XCOPRI TAB 150MG.....	60
XCOPRI TAB 200MG.....	60
XCOPRI TAB 50MG	60
XELJANZ SOL 1MG/ML	96
XELJANZ TAB 10MG.....	96
XELJANZ TAB 5MG.....	96
XELJANZ XR TAB 11MG	96
XELJANZ XR TAB 22MG	96
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XENLETA TAB 600MG.....	8
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XOSPATA TAB 40MG	28
XPOVIO 40 MG TWICE WEEKLY	28
XPOVIO PAK 40MG	28
XPOVIO PAK 50MG	28
XPOVIO PAK 60MG	28
XPOVIO PAK 80MG	28
XTANDI CAP 40MG	21
XTANDI TAB 40MG	21
XTANDI TAB 80MG	21
<i>xulane</i>	77
XULTOPHY INJ 100/3.6	72
XYREM SOL 500MG/ML	67

Y

YF-VAX INJ.....	100
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YONSA TAB 125MG	21
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Z

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<i>zafirlukast tab 10 mg</i>	106
<i>zafirlukast tab 20 mg</i>	106
<i>zaleplon cap 10 mg</i>	64
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<i>zenatane cap 10mg</i>	109
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<i>zenatane cap 30mg</i>	109
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<i>zidovudine tab 300 mg</i>	11
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<i>ziprasidone hcl cap 20 mg</i>	55
<i>ziprasidone hcl cap 40 mg</i>	55
<i>ziprasidone hcl cap 60 mg</i>	55
<i>ziprasidone hcl cap 80 mg</i>	55
<i>ziprasidone mesylate for inj 20 mg</i> (base equivalent)	55
ZIRGAN GEL 0.15%.....	102
<i>zoledronic acid inj conc for iv infusion 4</i> <i>mg/5ml</i>	73

<i>zoledronic acid iv soln 5 mg/100ml</i> ...	73	<i>zonisamide cap 100 mg</i>	60
ZOLINZA CAP 100MG.....	28	<i>zonisamide cap 25 mg</i>	60
<i>zolmitriptan nasal spray 2.5 mg/spray</i>		<i>zonisamide cap 50 mg</i>	60
<i>unit</i>	65	<i>zovia 1/35</i>	77
<i>zolmitriptan nasal spray 5 mg/spray</i>		ZTALMY SUS 50MG/ML	60
<i>unit</i>	65	ZURZUVAE CAP 20MG.....	66
<i>zolmitriptan odt tab 2.5 mg</i>	65	ZURZUVAE CAP 25MG.....	66
<i>zolmitriptan odt tab 5 mg</i>	65	ZURZUVAE CAP 30MG.....	66
<i>zolmitriptan tab 2.5 mg</i>	65	ZYCLARA PUMP CRE 2.5%	113
<i>zolmitriptan tab 5 mg</i>	65	ZYDELIG TAB 100MG.....	28
<i>zolpidem tartrate tab 10 mg</i>	64	ZYDELIG TAB 150MG.....	28
<i>zolpidem tartrate tab 5 mg</i>	64	ZYKADIA TAB 150MG.....	28
<i>zolpidem tartrate tab er 12.5 mg</i>	64	ZYPREXA RELP INJ 210MG.....	55
<i>zolpidem tartrate tab er 6.25 mg</i>	64	ZYPREXA RELP INJ 300MG.....	55
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This Formulary was updated on April 1, 2024. For more recent information or other questions, please contact the MVP Medicare Customer Care Center.

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