

2026

Formulary

EFFECTIVE JANUARY 1, 2026



Formulary Introduction

FORMULARY

The Ambetter Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

- Tier 0** - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.
- Tier 1_A** - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 1_B** - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 2** - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.
- Tier 3** - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.
- Tier 4** - Highest copayment is for "specialty" drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management. Prescription drugs covered under the specialty tier may require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Services will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.
D/D+/C	Not applicable	Medications on the formulary with D/D+/C may take alternative copays for certain benefit designs. Please consult your benefit documents for more information.

Opioid Medications:

Medications identified on the formulary by "New starts limited to 7 day supply" allow up to two 7 day fills during any 28 day period and up to a total of 28 day non-consecutive supply in any 90 day period. This limit applies cumulatively to all opioid medications filled. For fills exceeding these limits, your providers may submit a Prior Authorization request.

Introducción al Formulario

FORMULARIO

El Formulario de Ambetter, o la Lista de medicamentos recetados, es una guía de los medicamentos de marca y genéricos disponibles que están aprobados por la Administración de Alimentos y Medicamentos (FDA) y que están cubiertos a través de su beneficio de medicamentos recetados. Los medicamentos genéricos tienen los mismos principios activos que los de marca y deben considerarse la primera línea de tratamiento. La FDA exige que los medicamentos genéricos sean seguros y funcionen igual que los medicamentos de marca. Si no hay un genérico disponible, podría haber más de un medicamento de marca para tratar una condición. Los medicamentos de marca preferidos figuran en el nivel 2 para ayudar a identificar los medicamentos de marca que son opciones de tratamiento clínicamente adecuadas, seguras y rentables, si un medicamento genérico del Formulario no es adecuado para su condición.

Tenga en cuenta que el Formulario no pretende ser una lista completa de los medicamentos cubiertos por su beneficio de medicamentos recetados. Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento. Esta lista se revisa y actualiza periódicamente y puede estar sujeta a cambios. Se pueden agregar o eliminar medicamentos, o se pueden incorporar requisitos adicionales para aprobar el uso continuado de un medicamento específico.

Es posible que determinados diseños de planes de beneficios de medicamentos recetados no cubran algunos productos o categorías, independientemente de que figuren en este documento. Revise sus beneficios para conocer las limitaciones de la cobertura y la parte que le corresponde pagar por sus medicamentos.

Clave de la lista de medicamentos:

Los medicamentos de marca aparecen en MAYÚSCULAS y los medicamentos genéricos aparecen en minúsculas.

Los medicamentos están cubiertos por diferentes niveles de copago en función de su beneficio:

- Nivel 0** - Sin copago para aquellos medicamentos que se usan para prevención y son obligatorios según la Ley de Cuidado de Salud Asequible. Los anticonceptivos orales seleccionados, la vitamina D, el ácido fólico para mujeres en edad fértil, las aspirinas de venta libre (OTC) y los productos para dejar de fumar pueden estar cubiertos en este nivel. Es posible que se apliquen ciertos límites de edad.
- Nivel 1_A** - El copago más bajo para medicamentos seleccionados que ofrecen el mayor valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 1_B** - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 2** - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.
- Nivel 3** - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.
- Nivel 4** - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

Autorización previa para medicamentos no incluidos en el Formulario

Para obtener autorización previa para un medicamento no incluido en el Formulario, su proveedor debe completar el formulario de autorización previa. Los servicios responderán por fax o teléfono en un plazo de 24 horas a partir de la recepción de toda la información necesaria para las solicitudes urgentes, y en un plazo de 72 horas en caso de solicitudes no urgentes, a menos que la legislación estatal exija una respuesta más rápida. Si la solicitud es denegada, el aviso de la denegación incluirá una explicación clara de los motivos específicos para denegar la solicitud de autorización previa, o si la autorización estaba incompleta, la explicación identificará la información material faltante necesaria para completar la solicitud.

Abreviaturas del Formulario:

Abreviatura	Plazo	Significado
AL	Límite de edad	Algunos medicamentos solo están cubiertos para determinadas edades.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para determinadas cantidades.
PA	Autorización previa	Su médico debe solicitar la aprobación de Ambetter antes de que algunos medicamentos tengan cobertura.
ST	Terapia escalonada	En algunos casos, usted primero debe probar un medicamento determinado antes de que Ambetter cubra otro medicamento para su condición médica. Por ejemplo, si tanto el medicamento A como el medicamento B tratan su condición médica, Ambetter podría no cubrir el medicamento B a menos que usted pruebe primero el medicamento A.
NF	No incluido en el Formulario	Este producto no está cubierto a menos que usted o su proveedor soliciten una excepción. Hay medicamentos alternativos que figuran a continuación del producto no cubierto.
RX/OTC	Medicamentos recetados y OTC	Estos medicamentos se fabrican tanto como medicamento recetado como de venta libre (OTC).
SP	Medicamento de especialidad	Estos productos son medicamentos de especialidad que pueden tener requisitos de surtido especiales.
SF	Surtido dividido	Al principio es posible que ciertos medicamentos solo estén disponibles en suministros incrementales cada 15 días hasta que usted se estabilice con el medicamento. Una vez transcurridos 90 días desde que comenzó a tomar este medicamento, es posible que esta restricción ya no se aplique.
D/D+/C	No se aplica	Los medicamentos que aparecen en el Formulario con los símbolos D/ D+/C pueden conllevar copagos alternativos para ciertos diseños de beneficio. Consulte sus documentos sobre los beneficios para obtener más información.

Medicamentos opioides:

Los medicamentos identificados en el Formulario como “Nuevos pedidos limitados a suministro de 7 días” permiten hasta dos surtidos de 7 días durante cualquier periodo de 28 días y hasta un total de 28 días no consecutivos en un periodo de 90 días. Este límite se aplica de forma acumulativa a todos los medicamentos opioides surtidos. Para surtidos que superen estos límites, sus proveedores pueden presentar una solicitud de autorización previa.

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
<i>amphetamine sulfate TABS</i>	3	PA
<i>amphetamine-dextroamphetamine CP24 15 MG</i>	1B	
<i>amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG</i>	1B	QL(1 EA daily)
<i>amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG</i>	1B	QL(3 EA daily)
<i>amphetamine-dextroamphetamine TABS 30 MG</i>	1B	QL(2 EA daily)
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 EA daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B	
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 EA daily)
<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 EA daily); ST
<i>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 EA daily); ST
<i>methamphetamine hcl</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)
Anorexiants Non-Amphetamine		

Drug Name	Drug Tier	Requirements/Limits
<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>phentermine hcl CAPS</i>	1B	PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRI)		
<i>SUNOSI 150 MG</i>	3	QL(1 EA daily); PA
<i>SUNOSI 75 MG</i>	3	QL(2 EA daily); PA
Stimulants - Misc.		
<i>armodafinil</i>	1B	QL(1 EA daily); AL(At least 17 yrs old); PA
<i>dexmethylphenidate hcl CP24</i>	1B	QL(1 EA daily)
<i>dexmethylphenidate hcl TABS</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 10 MG</i>	1B	QL(5 EA daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 EA daily)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(1 EA daily)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl CPCR</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	1B	QL(6 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1B	QL(3 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate PTCH</i>	1B	QL(1 EA daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 EA daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 EA daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASSTK SUBL	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
ARIKAYCE	4	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1B	
<i>gentamicin sulfate IJ 40 MG/ML</i>	1B	
<i>neomycin sulfate TABS</i>	1B	
<i>streptomycin sulfate SOLR</i>	3	
<i>tobramycin NEBU</i>	4	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ LQ SOLN	4	QL(12 ML daily); PA
RINVOQ TB24	4	QL(1 EA daily); PA
XELJANZ XR TB24	4	QL(1 EA daily); PA
XELJANZ SOLN	4	QL(20 ML daily); PA
XELJANZ TABS 10 MG	4	QL(2 EA daily); PA
XELJANZ TABS 5 MG	4	QL(2 EA daily); SP; PA
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	3	PA
Anti-TNF-alpha - Monoclonal Antibodies		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-AATY (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA-CD/UC/HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.143 EA daily); PA	HUMIRA-PED<40KG CROHNS STARTER PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (2 PEN) AJKT	4	QL(0.143 EA daily); PA	HUMIRA-PED>=40KG CROHNS START PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	HUMIRA-PED>=40KG UC STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-ADAZ SOAJ 80 MG/0.8ML	4	QL(0.0143 ML daily); PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	4	QL(0.143 ML daily); PA	SIMLANDI (1 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.143 ML daily); PA	SIMLANDI (1 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM (2 PEN) AJKT	4	QL(0.143 EA daily); PA	SIMLANDI (2 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	SIMLANDI (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	QL(0.143 EA daily); PA	SIMPONI ARIA SOLN	4	PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4	QL(0.143 EA daily); PA	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.143 EA daily); PA
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); PA			
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); PA			
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	QL(0.072 EA daily); PA			
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits
YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
YUFLYMA (2 PEN) AJKT	4	QL(0.143 EA daily); PA
YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
YUFLYMA-CD/UC/HS STARTER AJKT	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Gold Compounds		
AURANOFIN 3 MG	3	QL(3 EA daily)
RIDAURA	3	QL(3 EA daily)
Interleukin-1 Blockers		
ARCALYST	4	QL(0.286 EA daily); SP; PA
Interleukin-6 Receptor Inhibitors		
ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA
ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail; 40 ML per 28 days mail); SP; PA
ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail; 20 ML per 28 days mail); SP; PA
ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
KEVZARA SOAJ	4	QL(0.082 ML daily); PA
KEVZARA SOSY	4	QL(0.082 ML daily); PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<i>celecoxib</i>	1B	QL(2 EA daily)
<i>diclofenac potassium TABS 50 MG</i>	1B	
<i>diclofenac sodium TB24</i>	1B	
<i>diclofenac sodium TBEC</i>	1B	
<i>diclofenac w/ misoprostol TBEC</i>	1B	
<i>etodolac CAPS</i>	1B	
<i>etodolac TABS</i>	1B	
<i>fenoprofen calcium TABS</i>	1B	QL(4 EA daily); ST
<i>flurbiprofen TABS</i>	1B	
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1B	RX/OTC
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<i>ibuprofen TABS 800 MG</i>	1B	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
<i>indomethacin CPCR</i>	1B	
<i>ketoprofen CAPS 50 MG</i>	1B	
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 EA daily)
<i>meclofenamate sodium CAPS</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 EA daily); ST
<i>meloxicam TABS</i>	1A	QL(1 EA daily)
<i>nabumetone</i>	1B	
<i>naproxen sodium TABS 550 MG</i>	1B	
<i>naproxen SUSP</i>	1B	PA
<i>naproxen TABS</i>	1B	
<i>naproxen TBEC 500 MG</i>	1B	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
<i>OTEZLA TABS</i>	4	QL(2 EA daily); PA
<i>OTEZLA TBPk</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
<i>OTEZLA TBPk</i>	4	1 package(s) per 180 day(s) retail; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	1B	QL(1 EA daily)
Soluble Tumor Necrosis Factor Receptor Agents		
<i>ENBREL MINI SOCT</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SURECLICK SOAJ</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOLN</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOSY 50 MG/ML</i>	4	QL(0.286 ML daily); SP; PA
<i>ENBREL SOSY 25 MG/0.5ML</i>	4	QL(0.146 ML daily); PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 EA daily)
Salicylates		
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 325 MG</i>	1A	
<i>diflunisal TABS</i>	1B	
<i>salsalate</i>	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply
<i>CODEINE SULFATE TABS</i>	1B	New starts limited to 7 day supply
<i>fentanyl citrate LPOP</i>	1B	QL(4 EA daily); PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1B	QL(0.34 EA daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B		<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B	
<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)	<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ML daily)
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 EA daily); PA	<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ML daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 EA daily); PA	<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply	<i>morphine sulfate TBCR</i>	1B	QL(2 EA daily)
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ML per fill retail)	<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 EA daily); PA
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B		<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>oxymorphone hcl TABS</i>	1B	QL(12 EA daily); PA
<i>methadone hcl CONC</i>	1B	QL(10 ML daily)	<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 EA daily); PA
<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B		<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 EA daily); PA
<i>methadone hcl SOLN PO 5 MG/5ML</i>	1B	QL(100 ML daily)	SUBSYS LIQD 800 MCG	3	QL(8 EA daily); PA
<i>methadone hcl SOLN PO 10 MG/5ML</i>	1B	QL(50 ML daily)	<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 EA daily)
<i>METHADONE HCL SOLN IJ (methadone hcl)</i>	1B		<i>tramadol hcl TB24</i>	1B	QL(1 EA daily)
<i>methadone hcl TABS 5 MG</i>	1B	QL(4 EA daily)	Opioid Combinations		
<i>methadone hcl TABS 10 MG</i>	1B	QL(10 EA daily)	<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ML daily)
<i>methadone hcl TBSO</i>	1B	QL(2 EA daily)	<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 EA daily)
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
<i>butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply	Opioid Partial Agonists		
<i>butalbital-aspirin-cafeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 EA daily)
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1B	New starts limited to 7 day supply	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1B	New starts limited to 7 day supply; QL(180 ML daily)	<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply	<i>buprenorphine hcl SOLN</i>	1B	
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>buprenorphine hcl SUBL</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>buprenorphine PTWK</i>	1B	QL(0.143 EA daily); PA
			<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ML daily); PA
			<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
			<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones					
Androgens					

Drug Name	Drug Tier	Requirements/ Limits
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 EA daily); PA
<i>danazol CAPS</i>	1B	
<i>methylestosterone TABS</i>	1B	
<i>testosterone cypionate SOLN IM</i>	1B	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 GM daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	
<i>hydrocortisone acetate (rectal)</i>	1B	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 GM daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1B	PA
EMVERM CHEW	2	QL(2 EA daily; 6 EA per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail

Drug Name	Drug Tier	Requirements/ Limits
<i>ivermectin</i>	1B	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1B	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 EA daily)
<i>ranolazine TB12 500 MG</i>	1B	QL(3 EA daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1A	
NITRO-BID OINT	3	
<i>nitroglycerin CPCR</i>	1B	QL(4 EA daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
ANTIANSXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 5 MG</i>	1A	
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
Benzodiazepines		
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 EA daily)
<i>alprazolam TABS 2 MG</i>	1B	QL(4 EA daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN PO 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 EA daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 1 MG</i>	1A	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 EA daily)
<i>oxazepam CAPS</i>	1B	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl CP12</i>	1B	
<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1B	
<i>amiodarone hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>dofetilide</i>	1B	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
<i>FASENRA PEN SOAJ</i>	4	QL(0.036 ML daily); PA
<i>FASENRA SOSY 10 MG/0.5ML</i>	4	QL(0.018 ML daily); PA
<i>FASENRA SOSY 30 MG/ML</i>	4	QL(0.036 ML daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	C; QL(8 ML daily)
Bronchodilators - Anticholinergics		
<i>ATROVENT HFA</i>	3	QL(0.44 GM daily)
<i>INCRUSE ELLIPTA</i>	2	C; QL(1 EA daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1B	C; QL(15 ML daily)
<i>SPIRIVA RESPIMAT AERS</i>	2	C; QL(0.14 GM daily)
<i>tiotropium bromide monohydrate CAPS</i>	1B	C; QL(1 EA daily)
Leukotriene Modulators		
<i>montelukast sodium CHEW</i>	1B	C; QL(1 EA daily)
<i>montelukast sodium PACK</i>	1B	C; QL(1 EA daily)
<i>montelukast sodium TABS</i>	1B	C; QL(1 EA daily)
<i>zafirlukast</i>	1B	C; QL(2 EA daily)
<i>zileuton TB12</i>	3	QL(4 EA daily); PA
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
<i>roflumilast</i>	1B	QL(1 EA daily)
Steroid Inhalants		
<i>ALVESCO</i>	3	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARNUITY ELLIPTA 100 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	1B		<i>fluticasone furoate-vilanterol</i>	1B	
ARNUITY ELLIPTA 50 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	2		<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	
<i>budesonide (inhalation) SUSP</i>	1B	C; QL(4 ML daily); PA	<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	1B	C
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	1B		<i>fluticasone-salmeterol AERO</i>	1B	C
<i>fluticasone propionate (inhalation) AEPB</i>	1B	C	<i>formoterol fumarate NEBU</i>	1B	C; QL(4 ML daily)
<i>fluticasone propionate hfa</i>	1B	C; QL(0.8 GM daily)	<i>ipratropium-albuterol SOLN</i>	1B	C; QL(18 ML daily)
PULMICORT FLEXHALER AEPB	2	C	<i>levalbuterol hcl</i>	1B	C
QVAR REDHALER	2	C	<i>levalbuterol tartrate</i>	1B	C; QL(0.5 GM daily)
Sympathomimetics			PROAIR DIGIHALER	3	
AIRDUO DIGIHALER	3		PROAIR RESPICLIK AEPB	3	
<i>albuterol sulfate AERS</i>	1B	C	SEREVENT DISKUS	2	C
<i>albuterol sulfate NEBU</i>	1B	C	STIOLTO RESPIMAT	2	C
<i>albuterol sulfate SYRP</i>	1B	C	STRIVERDI RESPIMAT	2	C
<i>albuterol sulfate TABS</i>	1B	C	<i>terbutaline sulfate SOLN</i>	1B	C
<i>arformoterol tartrate</i>	1B	C; QL(4 ML daily)	<i>terbutaline sulfate TABS</i>	1B	C
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	2	C	TRELEGY ELLIPTA	2	C; QL(2 EA daily)
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2		<i>umeclidinium-vilanterol</i>	2	C; QL(2 EA daily)
BREZTRI AEROSPHERE	2	C; QL(0.38 GM daily)	Xanthines		
<i>budesonide-formoterol fumarate dihydrate</i>	1B		<i>theophylline ELIX</i>	1B	
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)	<i>theophylline SOLN</i>	1B	C; QL(56 ML daily)
DULERA	2	C	<i>theophylline TB12</i>	1B	C
			<i>theophylline TB24</i>	1B	C
			ANTICOAGULANTS - Blood Thinners		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Coumarin Anticoagulants			<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP
<i>warfarin sodium TABS</i>	1A				
Direct Factor Xa Inhibitors			<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail	<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
ELIQUIS TABS	2	QL(2 EA daily)	FRAGMIN SOSY	4	SP; PA
<i>rivaroxaban SUSR 1 MG/ML</i>	1B	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1B	
<i>rivaroxaban TABS 2.5 MG</i>	1B	QL(2 EA daily)	<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail	Thrombin Inhibitors		
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>dabigatran etexilate mesylate CAPS</i>	1B	
XARELTO TABS 15 MG	2	QL(2 EA daily)	ANTICONVULSANTS - Drugs to Treat Seizures		
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)	AMPA Glutamate Receptor Antagonists		
Heparins And Heparinoid-Like Agents			<i>perampanel TABS 4 MG</i>	1B	QL(3 EA daily); PA
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily)	<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1B	QL(1 EA daily); PA
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP	<i>perampanel TABS 2 MG</i>	1B	QL(6 EA daily); PA
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily; 30 Day(s) limit); SP	<i>perampanel TABS 6 MG</i>	1B	QL(2 EA daily); PA
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily; 30 Day(s) limit); SP	Anticonvulsants - Benzodiazepines		
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily)	<i>clobazam SUSP</i>	1B	QL(16 ML daily); PA
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily)	<i>clobazam TABS</i>	1B	QL(2 EA daily); PA
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	<i>clonazepam TABS</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail	DIACOMIT PACK 250 MG	4	QL(12 EA daily); PA
NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA	DIACOMIT PACK 500 MG	4	QL(6 EA daily); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	EPIDIOLEX	3	PA
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>	1B	QL(2 EA daily); ST
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin CAPS</i>	1B	
VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin SOLN</i>	1B	QL(60 ML daily)
Anticonvulsants - Misc.			<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 EA daily); PA	<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ML daily)
BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 EA daily); PA	<i>lacosamide TABS</i>	1B	QL(2 EA daily)
BRIVIACT SOLN PO 10 MG/ML	3	QL(20 ML daily); PA	<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 EA daily)
<i>carbamazepine CHEW 100 MG</i>	1B		<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 EA daily)
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 EA daily)	<i>lamotrigine TABS</i>	1B	
<i>carbamazepine CP12 100 MG</i>	1B		<i>lamotrigine TBDP</i>	1B	QL(1 EA daily)
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 EA daily)	<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ML daily)
<i>carbamazepine SUSP</i>	1B		<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 EA daily)
<i>carbamazepine TABS</i>	1B		<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 EA daily)
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 EA daily)	<i>levetiracetam TABS 500 MG</i>	1B	QL(6 EA daily)
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 EA daily)	<i>levetiracetam TB24</i>	1B	QL(4 EA daily)
DIACOMIT CAPS 500 MG	4	QL(6 EA daily); PA	<i>oxcarbazepine SUSP</i>	1B	QL(40 ML daily)
DIACOMIT CAPS 250 MG	4	QL(12 EA daily); PA	<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 EA daily)
			<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 EA daily)
			<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	1B	QL(3 EA daily); PA
			<i>pregabalin CAPS 225 MG, 300 MG</i>	1B	QL(2 EA daily); PA
			<i>pregabalin SOLN</i>	1B	QL(30 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>primidone 50 MG, 250 MG</i>	1B	
<i>rufinamide SUSP</i>	1B	QL(80 ML daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 EA daily); PA
<i>rufinamide TABS 400 MG</i>	1B	QL(8 EA daily); PA
TEGRETOL SUSP (<i>carbamazepine</i>)	2	
TEGRETOL TABS (<i>carbamazepine</i>)	2	
<i>topiramate CPSP 15 MG</i>	1B	QL(6 EA daily)
<i>topiramate CPSP 25 MG</i>	1B	QL(8 EA daily)
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 EA daily)
<i>topiramate TABS 200 MG</i>	1B	QL(2 EA daily)
<i>topiramate TABS 50 MG</i>	1B	QL(6 EA daily)
<i>zonisamide CAPS</i>	1B	QL(6 EA daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ML daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 EA daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 EA daily)
GABA Modulators		
<i>tiagabine hcl</i>	1B	
<i>vigabatrin PACK</i>	4	QL(6 EA daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 EA daily); SP; PA
Hydantoins		
DILANTIN	2	
DILANTIN (<i>phenytoin sodium extended</i>)	2	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>phenytoin</i>)	2	
DILANTIN SUSP (<i>phenytoin</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	
<i>phenytoin SUSP</i>	1B	
Succinimides		
<i>ethosuximide CAPS</i>	1B	QL(6 EA daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ML daily)
<i>methsuximide</i>	1B	QL(4 EA daily)
ZARONTIN CAPS (<i>ethosuximide</i>)	2	QL(6 EA daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1B	
<i>valproic acid CAPS</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1B	
<i>mirtazapine TBDP</i>	1B	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	D+/C
<i>bupropion hcl TB12</i>	1B	D+/C
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1B	
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 EA daily)
MARPLAN	2	QL(6 EA daily)
<i>phenelzine sulfate</i>	1B	
<i>tranylcypromine sulfate</i>	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		

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Drug Name	Drug Tier	Requirements/ Limits
SPRAVATO (56 MG DOSE)	4	PA
SPRAVATO (84 MG DOSE)	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide SOLN</i>	1A	
<i>citalopram hydrobromide TABS</i>	1A	D/C
<i>escitalopram oxalate SOLN</i>	1B	
<i>escitalopram oxalate TABS</i>	1B	D+/C
<i>fluoxetine hcl CAPS</i>	1A	D/C
<i>fluoxetine hcl CPDR</i>	1A	
<i>fluoxetine hcl SOLN</i>	1B	
<i>fluoxetine hcl TABS</i>	1B	
<i>fluvoxamine maleate TABS</i>	1B	D+/C
<i>paroxetine hcl SUSP</i>	1B	
<i>paroxetine hcl TABS</i>	1B	D/C
<i>paroxetine hcl TB24</i>	1B	
<i>sertraline hcl CONC</i>	1B	
<i>sertraline hcl TABS</i>	1B	D/C
Serotonin Modulators		
<i>nefazodone hcl</i>	1B	
<i>trazodone hcl TABS</i>	1B	
TRINTELLIX	3	QL(1 EA daily); PA
VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail
<i>vilazodone hcl TABS</i>	1B	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>desvenlafaxine succinate</i>	1B	
<i>duloxetine hcl CPEP</i>	1B	D/C

Drug Name	Drug Tier	Requirements/ Limits
FETZIMA TITRATION C4PK	3	PA
FETZIMA CP24	3	QL(1 EA daily); PA
<i>venlafaxine hcl CP24</i>	1B	D+/C
<i>venlafaxine hcl TABS</i>	1B	D/C
<i>venlafaxine hcl TB24</i>	1B	
Tricyclic Agents		
<i>amitriptyline hcl TABS</i>	1A	D/C
<i>amoxapine</i>	1B	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl TABS</i>	1B	
<i>doxepin hcl CAPS</i>	1B	
<i>doxepin hcl CONC</i>	1B	
<i>imipramine hcl TABS</i>	1B	D+/C
<i>imipramine pamoate</i>	1B	
<i>nortriptyline hcl CAPS</i>	1B	
<i>nortriptyline hcl SOLN</i>	1B	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate CAPS</i>	1B	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 EA daily)
<i>miglitol</i>	1B	QL(3 EA daily)
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 EA daily); PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 EA daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>glipizide-metformin hcl</i> 250 MG-2.5 MG, 500 MG-2.5 MG	1B	D+; QL(2 EA daily)
<i>glipizide-metformin hcl</i> 500 MG-5 MG	1B	D+; QL(4 EA daily)
<i>glyburide-metformin</i> 250 MG-1.25 MG	1B	D+; QL(2 EA daily)
<i>glyburide-metformin</i> 500 MG-2.5 MG, 500 MG-5 MG	1B	D+; QL(4 EA daily)
GLYXAMBI	2	QL(1 EA daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 EA daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 EA daily)
JANUMET TABS	2	QL(2 EA daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 EA daily)
<i>pioglitazone hcl-metformin hcl</i> TABS	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-2.5 MG	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-5 MG, 500 MG-5 MG	1B	QL(1 EA daily)
SOLIQUA	2	QL(0.5 ML daily); PA
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
SYNJARDY TABS	2	QL(2 EA daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Biguanides		
<i>metformin hcl</i> TABS 850 MG	0	QL(3 EA daily)
<i>metformin hcl</i> TABS 1000 MG	1A	D+; QL(2.5 EA daily)
<i>metformin hcl</i> TABS 500 MG	1A	D+; QL(5 EA daily)
<i>metformin hcl</i> TB24 750 MG	1B	D+; QL(3 EA daily)
<i>metformin hcl</i> TB24 500 MG	1B	D+; QL(4 EA daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	D+; QL(0.035 EA daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 EA daily)
JANUVIA	2	QL(1 EA daily)
<i>saxagliptin hcl</i>	1B	QL(1 EA daily)
Incretin Mimetic Agents		
<i>liraglutide</i>	1B	QL(0.3 ML daily); PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.054 ML daily); PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); PA
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
RYBELSUS TABS	2	QL(1 EA daily); PA
TRULICITY	2	QL(0.143 ML daily); PA
Insulin		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA

Drug Name	Drug Tier	Requirements/ Limits
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	D; QL(1.34 ML daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	D; QL(1.34 ML daily)
INSULIN ASP PROT & ASP FLEXPEN SUPN	1B	D
INSULIN ASPART PROT & ASPART SUSP	1B	D
INSULIN GLARGINE-YFGN SOLN	2	D
INSULIN GLARGINE-YFGN SOPN	2	D
INSULIN LISPRO (1 UNIT DIAL) SOPN	1B	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1B	
INSULIN LISPRO PROT & LISPRO SUPN	1B	
INSULIN LISPRO SOLN IJ	1B	D
NOVOLIN 70/30 FLEXPEN SUPN	2	D
NOVOLIN 70/30 SUSP	2	D
NOVOLIN N FLEXPEN SUPN	2	D
NOVOLIN N SUSP	2	D
NOVOLIN R FLEXPEN SOPN IJ	2	D
NOVOLIN R SOLN IJ	2	D
NOVOLOG FLEXPEN SOPN	1B	D
NOVOLOG PENFILL SOCT	1B	D
NOVOLOG SOLN IJ	1B	D
REZVOGLAR KWIKPEN	3	PA
SEMGLEE (YFGN) SOLN	2	D
SEMGLEE (YFGN) SOPN	2	D
TRESIBA FLEXTOUCH SOPN	2	D
TRESIBA SOLN	2	D
Insulin Sensitizing Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>pioglitazone hcl</i>	1B	D+; QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 EA daily)
<i>repaglinide 2 MG</i>	1B	QL(8 EA daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 EA daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 EA daily)
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG</i>	1A	D+; QL(4 EA daily)
<i>glimepiride 4 MG</i>	1A	D+; QL(2 EA daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1A	D+; QL(4 EA daily)
<i>glipizide TB24</i>	1A	D+; QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	D+; QL(4 EA daily)
<i>glyburide TABS</i>	1A	D+; QL(4 EA daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 EA daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 EA daily)
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1B	QL(3.34 ML daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 EA daily)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 EA daily)
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 EA daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol CAPS</i>	1B	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 EA daily)
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 EA daily)
<i>aprepitant CAPS</i>	1B	PA
VARUBI (180 MG DOSE) TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
<i>amphotericin b IV</i>	3	
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1B	
<i>griseofulvin ultramicrosize</i>	1B	
<i>nystatin TABS</i>	1B	
<i>terbinafine hcl TABS</i>	1B	QL(1 EA daily)
Imidazole-Related Antifungals		
CRESEMBA CAPS 186 MG	3	PA
<i>fluconazole SUSP</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluconazole TABS</i>	1B		<i>loratadine TBDP</i>	1B	
<i>itraconazole CAPS</i>	1B	QL(4 EA daily); PA	QUZYTIR SOLN IV	3	PA
<i>itraconazole SOLN</i>	1B	QL(20 ML daily); PA	Antihistamines - Phenothiazines		
<i>ketoconazole</i>	1B		<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>posaconazole SUSP</i>	3	QL(20 ML daily)	<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 EA daily)
TOLSURA CAPS	4	PA	<i>promethazine hcl TABS</i>	1B	
<i>voriconazole TABS</i>	1B	QL(4 EA daily)	Antihistamines - Piperidines		
ANTIHISTAMINES - Drugs to Treat Allergies			<i>cyproheptadine hcl SYRP</i>	1B	
Antihistamines - Ethanolamines			<i>cyproheptadine hcl TABS</i>	1B	
<i>carbinoxamine maleate SOLN</i>	1B		ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
<i>carbinoxamine maleate TABS 4 MG</i>	1B		Antihyperlipidemics - Combinations		
<i>clemastine fumarate SYRP</i>	1B		<i>ezetimibe-simvastatin</i>	1B	QL(1 EA daily)
<i>clemastine fumarate TABS 2.68 MG</i>	1B		Antihyperlipidemics - Misc.		
<i>diphenhydramine hcl CAPS 50 MG</i>	1A		<i>icosapent ethyl 1 GM</i>	1B	QL(4 EA daily); PA
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B		<i>omega-3-acid ethyl esters</i>	1B	D+; QL(4 EA daily)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ML daily)	Bile Acid Sequestrants		
Antihistamines - Non-Sedating			<i>cholestyramine light PACK</i>	1B	QL(6 EA daily)
<i>cetirizine hcl TABS</i>	1A	QL(1 EA daily)	<i>cholestyramine light POWD</i>	1B	QL(24 GM daily)
<i>desloratadine TABS</i>	1B	QL(1 EA daily)	<i>cholestyramine PACK</i>	1B	QL(6 EA daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 EA daily)	<i>cholestyramine POWD</i>	1B	QL(25.2 GM daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ML daily); RX/OTC	<i>colesevelam hcl PACK</i>	1B	QL(1 EA daily); PA
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 EA daily); RX/OTC	<i>colesevelam hcl TABS</i>	1B	QL(7 EA daily)
<i>loratadine CAPS</i>	1B		<i>colestipol hcl GRAN</i>	1B	QL(6 GM daily)
<i>loratadine CHEW</i>	1B		<i>colestipol hcl PACK</i>	1B	QL(6 EA daily)
<i>loratadine SOLN</i>	1B		<i>colestipol hcl TABS</i>	1B	QL(16 EA daily)
<i>loratadine TABS</i>	1A		Fibric Acid Derivatives		
			<i>choline fenofibrate</i>	1B	D+; QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	QL(1 EA daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	D+; QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	D+; QL(1 EA daily)
<i>gemfibrozil TABS</i>	1B	D+; QL(2 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1A	D+; QL(1 EA daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 EA daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	1A	D+; QL(2 EA daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1A	D+; QL(1 EA daily); PV
<i>pravastatin sodium</i>	1B	D+; QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	1B	QL(1 EA daily)
<i>simvastatin TABS</i>	1A	D+; QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	D+; QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); PA
REPATHA SOSY	4	QL(0.0714 ML daily); PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		

Drug Name	Drug Tier	Requirements/ Limits
ACE Inhibitors		
<i>benazepril hcl</i>	1A	D+
<i>captopril 12.5 MG</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 EA daily)
<i>enalapril maleate TABS</i>	1A	D+
<i>fosinopril sodium</i>	1B	D+
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1A	D+
<i>moexipril hcl</i>	1B	QL(2 EA daily)
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 EA daily)
<i>ramipril CAPS</i>	1B	D+
<i>trandolapril 1 MG, 2 MG</i>	1B	D+; QL(1 EA daily)
<i>trandolapril 4 MG</i>	1B	D+; QL(2 EA daily)
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1B	QL(1 EA daily)
EDARBI	3	QL(1 EA daily); ST
<i>irbesartan</i>	1B	D+; QL(1 EA daily)
<i>losartan potassium</i>	1A	D+; QL(1 EA daily)
<i>olmesartan medoxomil</i>	1B	D+; QL(1 EA daily)
<i>telmisartan</i>	1B	QL(1 EA daily)
<i>valsartan TABS</i>	1B	D+; QL(1 EA daily)
Antiadrenergic Antihypertensives		
<i>clonidine hcl TABS</i>	1A	D+; QL(8 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clonidine PTWK</i>	1B	QL(0.15 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1A	D+; QL(2 EA daily)
<i>doxazosin mesylate</i>	1B		<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1A	D+; QL(1 EA daily)
<i>guanfacine hcl</i>	1B		<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 EA daily)
<i>methyldopa TABS</i>	1B	QL(6 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>prazosin hcl CAPS</i>	1B	QL(4 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>terazosin hcl</i>	1B		<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
Antihypertensive Combinations			<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1B		<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 EA daily)
<i>amlodipine besylate-valsartan</i>	1B	QL(1 EA daily)	<i>telmisartan-amlodipine</i>	1B	QL(1 EA daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3		<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	1B		<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 EA daily)	<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B		<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 EA daily)	Antihypertensives - Misc.		
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B		VECAMEYL	3	PA
<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B		Direct Renin Inhibitors		
<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 EA daily)	<i>aliskiren fumarate</i>	1B	QL(1 EA daily)
<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 EA daily)			
<i>irbesartan-hydrochlorothiazide</i>	1B	D+			
<i>lisinopril & hydrochlorothiazide</i>	1A	D+			

Drug Name	Drug Tier	Requirements/ Limits
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1B	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1B	
<i>hydralazine hcl TABS</i>	1B	D+
<i>minoxidil 2.5 MG, 10 MG</i>	1B	D+
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	1B	
<i>pentamidine isethionate IN</i>	1B	
<i>tinidazole</i>	1B	
<i>trimethoprim TABS</i>	1B	
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
Carbapenems		

Drug Name	Drug Tier	Requirements/ Limits
<i>ertapenem sodium IJ</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	
Glycopeptides		
<i>vancomycin hcl CAPS</i>	1B	QL(4 EA daily; 40 EA per fill retail)
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ML per fill retail)
Leprostatics		
<i>dapsone</i>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
<i>lincomycin hcl</i>	1B	
Monobactams		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ML daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	
<i>linezolid TABS</i>	1B	QL(2 EA daily); PA
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	1B	
<i>methenamine hippurate</i>	1B	
<i>nitrofurantoin</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohyd macro</i>	1B	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 EA per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antimalarials		
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 EA daily)
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 EA daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 EA daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 EA daily)
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 EA daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN PO</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1B	QL(4 EA daily)
<i>ethambutol hcl TABS</i>	1B	
<i>isoniazid SOLN</i>	1B	
<i>isoniazid SYRP</i>	1B	
<i>isoniazid TABS</i>	1A	
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
<i>rifampin CAPS</i>	1B	
<i>rifampin SOLR</i>	1B	
SIRTURO	3	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
Alkylating Agents			<i>mercaptopurine TABS</i>	1B	
<i>busulfan SOLN</i>	4	SP; PA	<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>carmustine</i>	4	SP; PA	<i>methotrexate sodium SOLR</i>	1B	SP
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>cyclophosphamide CAPS</i>	1B	PA	<i>nelarabine</i>	4	SP; PA
<i>cyclophosphamide SOLR IJ</i>	4		<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
GLEOSTINE 10 MG	4	SP; PA	<i>pralatrexate 20 MG/ML</i>	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA	TABLOID	4	SP; PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA	Antineoplastic - Angiogenesis Inhibitors		
LEUKERAN	4	SP; PA	INLYTA	4	QL(2 EA daily); SP; PA
<i>melphalan</i>	1B		LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); PA
<i>melphalan hcl IV</i>	1B		LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); PA
MYLERAN TABS	4	SP; PA	LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA	LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); PA
TEMODAR SOLR	4		LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>temozolomide CAPS</i>	4	SP; PA	LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); PA
<i>thiotepa 15 MG</i>	4	SP; PA	LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); PA
ZANOSAR	4	SP; PA	LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); PA
Antimetabolites			MVASI	4	PA
<i>azacitidine SUSR</i>	4	SP; PA	ZALTRAP 100 MG/4ML	4	SP; PA
<i>capecitabine</i>	4	SP; PA	ZIRABEV	4	PA
<i>clofarabine</i>	4	SP; PA	Antineoplastic - Antibodies		
<i>decitabine</i>	4	SP; PA			
<i>floxuridine</i>	4	SP; PA			
<i>fludarabine phosphate SOLN</i>	4	SP; PA			
<i>fludarabine phosphate SOLR</i>	4	SP; PA			
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARZERRA	4	SP; PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
LOQTORZI	4	PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
RUXIENCE	4	PA	EMCYT	4	SP; PA
TRUXIMA	4	PA	ERLEADA 60 MG	4	QL(4 EA daily); PA
YERVOY	4	SP; PA	ERLEADA 240 MG	4	QL(1 EA daily); PA
Antineoplastic - Anti-HER2 Agents			<i>exemestane</i>	4	QL(1 EA daily); SP
KANJINTI	4	PA	FIRMAGON 80 MG	4	QL(0.143 EA daily); SP; PA
OGIVRI	4	PA	FIRMAGON (240 MG DOSE)	4	QL(0.143 EA daily); SP; PA
TRAZIMERA	4	PA	<i>fulvestrant SOSY</i>	4	QL(0.357 ML daily); SP; PA
TUKYSA	4	PA	<i>letrozole</i>	1B	
Antineoplastic - EGFR Inhibitors			<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
ERBITUX	4	SP; PA	LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0358 EA daily); SP; PA
<i>erlotinib hcl</i>	4	QL(1 EA daily); SP; PA	LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
<i>gefitinib</i>	4	QL(2 EA daily); PA	LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA
GILOTRIF	4	QL(1 EA daily); PA	LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA
TAGRISSO 80 MG	4	QL(1 EA daily); PA	LYSODREN	4	SP; PA
TAGRISSO 40 MG	4	QL(2 EA daily); PA	<i>megestrol acetate SUSP</i>	1B	
VECTIBIX 100 MG/5ML	4	SP; PA	<i>megestrol acetate TABS</i>	1B	
VIZIMPRO	4	QL(1 EA daily); PA	<i>nilutamide</i>	1B	QL(2 EA daily)
Antineoplastic - Hedgehog Pathway Inhibitors			NUBEQA	4	QL(4 EA daily); PA
DAURISMO	4	PA	ORGOVYX	4	PA
ERIVEDGE	4	QL(1 EA daily); SP; PA	<i>tamoxifen citrate TABS</i>	0	
ODOMZO	4	QL(1 EA daily); PA	<i>toremifene citrate</i>	1B	
Antineoplastic - Hormonal and Related Agents			TRELSTAR MIXJECT	4	SP; PA
<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA	VABRINTY KIT SC 22.5 MG, 45 MG	4	SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); PA	XTANDI CAPS	4	QL(4 EA daily); SP; PA
<i>anastrozole</i>	1B	QL(1 EA daily)			
<i>bicalutamide</i>	1B	QL(1 EA daily); SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XTANDI TABS 40 MG	4	QL(4 EA daily); PA	CAPRELSA	4	QL(1 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); PA	COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA
YONSA	4	QL(4 EA daily); PA	COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA	COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA	<i>dasatinib</i>	4	QL(1 EA daily); SP; PA
Antineoplastic - Immunomodulators			<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA
POMALYST	4	QL(1 EA daily); PA	IBRANCE CAPS	4	QL(1 EA daily); PA
Antineoplastic Antibiotics			IBRANCE TABS	4	QL(1 EA daily); PA
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA	ICLUSIG	4	QL(1 EA daily); PA
<i>dactinomycin</i>	4	SP; PA	<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA	JAKAFI	4	QL(2 EA daily); SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA	KISQALI (200 MG DOSE)	4	QL(2 EA daily); PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA	KISQALI (400 MG DOSE)	4	QL(2 EA daily); PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA	KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); PA
<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA	KYPROLIS	4	PA
<i>valrubicin</i>	4	SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA
Antineoplastic Combinations			LORBRENA	4	QL(1 EA daily); PA
KISQALI FEMARA (200 MG DOSE)	4	QL(2 EA daily); PA	LUMAKRAS 120 MG, 240 MG	3	QL(2 EA daily); PA
KISQALI FEMARA (400 MG DOSE)	4	QL(2.5 EA daily); PA	LUMAKRAS 320 MG	3	QL(3 EA daily); PA
KISQALI FEMARA (600 MG DOSE)	4	QL(3.25 EA daily); PA	LYNPARZA TABS	4	QL(4 EA daily); PA
Antineoplastic Enzyme Inhibitors			MEKINIST SOLR	4	QL(40 ML daily); PA
ALECENSA	4	QL(8 EA daily); PA	MEKINIST TABS 2 MG	4	QL(1 EA daily); PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	MEKINIST TABS 0.5 MG	4	QL(3 EA daily); PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA
CABOMETYX TABS	4	QL(1 EA daily); PA			

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Drug Name	Drug Tier	Requirements/ Limits
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); PA
PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); PA
PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>romidepsin SOLR</i>	4	SP; PA
ROZLYTREK CAPS	4	PA
RUBRACA	4	QL(4 EA daily); PA
<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA
STIVARGA	4	QL(4 EA daily); SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 EA daily); PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 EA daily); SP; PA
TAFINLAR CAPS	4	QL(4 EA daily); PA
TAFINLAR TBSO	4	QL(30 EA daily); PA
TALZENNA	4	QL(1 EA daily); PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
TURALIO 125 MG	4	PA
VERZENIO	4	QL(2 EA daily); PA
VITRAKVI CAPS	4	PA
VITRAKVI SOLN	4	PA
XALKORI CAPS	4	QL(2 EA daily); SP; PA
XOSPATA	4	PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 EA daily); PA
ZEJULA TABS 100 MG	4	QL(3 EA daily); PA
ZELBORAF	4	QL(8 EA daily); SP; PA
ZOLINZA	4	QL(4 EA daily); SP; PA
ZYDELIG	4	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
<i>hydroxyurea</i>	1B	
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
<i>eribulin mesylate</i>	4	SP; PA
ETOPOPHOS	4	SP; PA
<i>etoposide CAPS</i>	4	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	PA
IXEMPRA KIT 15 MG	4	SP; PA
<i>paclitaxel 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
Topoisomerase I Inhibitors		
<i>HYCAMTIN CAPS</i>	4	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLN</i>	4	
<i>topotecan hcl SOLR</i>	4	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate TABS</i>	1B	
<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>trihexyphenidyl hcl TABS</i>	1B	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1B	QL(8 EA daily)
<i>tolcapone</i>	1B	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1B	
<i>amantadine hcl SOLN</i>	1B	
<i>amantadine hcl TABS</i>	1B	
<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>bromocriptine mesylate CAPS</i>	1B	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>carbidopa-levodopa-entacapone</i>	1B	
<i>carbidopa-levodopa TABS</i>	1B	
<i>carbidopa-levodopa TBCR</i>	1B	
<i>carbidopa-levodopa TBDP</i>	1B	
<i>NEUPRO</i>	2	

Drug Name	Drug Tier	Requirements/ Limits
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 EA daily)
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 EA daily); ST
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 EA daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 EA daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1B	
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
Antipsychotics - Misc.		
<i>EQUETRO 200 MG</i>	3	QL(8 EA daily); ST
<i>EQUETRO 100 MG</i>	3	QL(2 EA daily); ST
<i>EQUETRO 300 MG</i>	3	QL(4 EA daily); ST
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 EA daily)
<i>lurasidone hcl 80 MG</i>	1B	QL(2 EA daily)
<i>ziprasidone hcl</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
<i>FANAPT</i>	2	QL(2 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits
FANAPT TITRATION PACK A	2	PA
<i>paliperidone</i>	1B	
PERSERIS PRSY	2	QL(0.072 EA daily); PA
<i>risperidone microspheres</i>	1B	QL(0.072 EA daily); PA
<i>risperidone SOLN</i>	1B	
<i>risperidone TABS</i>	1B	
<i>risperidone TBDP</i>	1B	
Butyrophenones		
<i>haloperidol decanoate</i>	1B	QL(0.036 ML daily)
<i>haloperidol lactate CONC</i>	1B	
<i>haloperidol lactate SOLN</i>	1B	
<i>haloperidol TABS</i>	1B	
Dibenzapines		
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 EA daily); PA
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 EA daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 EA daily)
<i>clozapine TBDP 25 MG</i>	1B	QL(3 EA daily)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 EA daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 EA daily)
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 EA daily)
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 EA daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 EA daily)
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 EA daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1B	AL(At least 10 yrs old)
<i>quetiapine fumarate TB24</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
Phenothiazines		
<i>chlorpromazine hcl SOLN</i>	3	
<i>chlorpromazine hcl TABS</i>	1B	
<i>fluphenazine hcl CONC</i>	1B	
<i>fluphenazine hcl ELIX</i>	1B	
<i>fluphenazine hcl SOLN</i>	1B	
<i>fluphenazine hcl TABS</i>	1B	
<i>perphenazine TABS</i>	1B	
<i>prochlorperazine</i>	1B	
<i>prochlorperazine maleate TABS</i>	1B	
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl TABS</i>	1B	
Quinolinone Derivatives		
<i>aripiprazole SOLN PO</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
REXULTI	3	PA
Thioxanthenes		
<i>thiothixene</i>	1B	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ML daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 EA daily)
APTIVUS CAPS	3	QL(4 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 EA daily)
BIKTARVY	3	QL(1 EA daily)
CABENUVA	3	
CIMDUO	3	QL(1 EA daily); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)	ISENTRESS CHEW	3	QL(6 EA daily)
<i>darunavir TABS</i>	1B		ISENTRESS TABS	3	QL(2 EA daily)
DELSTRIGO	3	QL(1 EA daily)	JULUCA	3	QL(1 EA daily)
DESCOVY 200 MG-25 MG	3		KALETRA SOLN	2	QL(12.5 ML daily)
DOVATO	3	QL(1 EA daily)	<i>lamivudine SOLN</i>	1B	QL(30 ML daily)
EDURANT	3	QL(1 EA daily)	<i>lamivudine TABS 300 MG</i>	1B	QL(1 EA daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 EA daily)	<i>lamivudine TABS 150 MG</i>	1B	QL(2 EA daily)
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 EA daily)	<i>lamivudine-zidovudine</i>	1B	QL(2 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	LEXIVA SUSP	3	QL(56 ML daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ML daily)
<i>efavirenz TABS</i>	1B	QL(1 EA daily)	<i>lopinavir-ritonavir TABS</i>	1B	QL(4 EA daily)
<i>emtricitabine CAPS</i>	1B	QL(1 EA daily)	<i>maraviroc TABS 150 MG</i>	1B	QL(2 EA daily)
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	1B	QL(4 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 EA daily)	<i>nevirapine SUSP</i>	1B	QL(40 ML daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 EA daily)	<i>nevirapine TABS</i>	1B	QL(2 EA daily)
EMTRIVA SOLN	3	QL(24 ML daily)	<i>nevirapine TB24 400 MG</i>	1B	QL(1 EA daily)
<i>etravirine 100 MG</i>	1B	QL(4 EA daily)	NORVIR CAPS	2	QL(12 EA daily)
<i>etravirine 200 MG</i>	1B	QL(2 EA daily)	NORVIR PACK	3	QL(12 EA daily)
EVOTAZ	3	QL(1 EA daily)	ODEFSEY	3	QL(1 EA daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 EA daily)	PIFELTRO	3	QL(1 EA daily)
FUZEON SOLR	4	SP; PA	PREZCOBIX	3	QL(1 EA daily)
GENVOYA	3	QL(1 EA daily)	PREZISTA SUSP	3	QL(12 ML daily)
INTELENCE 25 MG	3	QL(8 EA daily)	PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
ISENTRESS HD TABS	3	QL(2 EA daily)	RETROVIR SOLN	3	
			<i>ritonavir TABS</i>	1B	QL(12 EA daily)
			SELZENTRY SOLN	3	QL(30 ML daily)
			SELZENTRY TABS 25 MG, 75 MG	3	QL(2 EA daily)
			STRIBILD	3	QL(1 EA daily)
			SYMTUZA	3	

Drug Name	Drug Tier	Requirements/ Limits
<i>tenofovir disoproxil fumarate TABS</i>	1B	
TIVICAY PD TBSO	3	
TIVICAY TABS	3	QL(2 EA daily)
TRIUMEQ PD TBSO	3	
TRIUMEQ TABS	3	QL(1 EA daily)
TRIZIVIR	3	QL(2 EA daily)
TYBOST	3	QL(1 EA daily)
VIRACEPT TABS 625 MG	3	QL(4 EA daily)
VIRACEPT TABS 250 MG	3	QL(10 EA daily)
VIREAD POWD	3	QL(7.5 GM daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)
<i>zidovudine CAPS</i>	1B	QL(6 EA daily)
<i>zidovudine SYRP</i>	1B	QL(60 ML daily)
<i>zidovudine TABS</i>	1B	QL(2 EA daily)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium SOLR</i>	1B	
<i>valganciclovir hcl TABS</i>	1B	QL(4 EA daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 EA daily); SP
<i>entecavir TABS</i>	4	QL(1 EA daily); SP
<i>lamivudine (hbv) TABS</i>	1B	QL(3 EA daily); SP
PEGASYS SOLN	4	QL(0.0714 ML daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ML daily); PA
<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 EA daily)
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1B	QL(7 EA daily)
SOFOSBUVIR-VELPATASVIR TABS	1B	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
SOVALDI TABS 200 MG	3	QL(1 EA daily); PA
SOVALDI TABS 400 MG	3	QL(1 EA daily); SP; PA
VOSEVI	4	QL(1 EA daily); PA
Herpes Agents		
<i>acyclovir CAPS</i>	1A	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)
<i>acyclovir SUSP</i>	1B	QL(13.34 ML daily)
<i>acyclovir TABS PO</i>	1B	QL(5 EA daily)
<i>famciclovir 500 MG</i>	1B	QL(4 EA daily)
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 EA daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 EA daily)
<i>valacyclovir hcl 1 GM</i>	1B	QL(4 EA daily)
Influenza Agents		
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 EA daily)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1A	D+

Drug Name	Drug Tier	Requirements/ Limits
<i>carvedilol phosphate</i>	3	QL(1 EA daily)
<i>labetalol hcl SOLN</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	D+
<i>labetalol hcl TABS 300 MG</i>	1B	D+; QL(8 EA daily)
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	1B	
<i>atenolol TABS</i>	1A	D+
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	D+
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	D+
<i>metoprolol succinate TB24 200 MG</i>	1B	D+; QL(2 EA daily)
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1A	D+
<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
Beta Blockers Non-Selective		
<i>HEMANGEOL SOLN PO</i>	4	QL(75 ML daily); PA
<i>nadolol TABS 20 MG</i>	1B	QL(3 EA daily)
<i>nadolol TABS 40 MG</i>	1B	QL(6 EA daily)
<i>nadolol TABS 80 MG</i>	1B	
<i>pindolol TABS</i>	1B	
<i>propranolol hcl CP24</i>	1B	QL(2 EA daily)
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl TABS</i>	1B	
<i>sotalol hcl (afib/afl)</i>	1B	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 EA daily)
<i>sotalol hcl TABS 240 MG</i>	1B	
<i>timolol maleate TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	D+
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 EA daily)
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl extended release beads 420 MG</i>	1B	
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	D+
<i>diltiazem hcl CP12</i>	1B	QL(2 EA daily)
<i>diltiazem hcl CP24</i>	1B	D+
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<i>DILTIAZEM HCL SOLR</i>	1B	
<i>diltiazem hcl TABS</i>	1B	D+
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	D+
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 EA daily)
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine TB24 60 MG</i>	1B	D+; QL(2 EA daily)
<i>nifedipine TB24 90 MG</i>	1B	D+; QL(1 EA daily)
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 30 MG</i>	1B	D+
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 EA daily)
<i>verapamil hcl TABS</i>	1B	D+
<i>verapamil hcl TBCR</i>	1B	D+
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1B	
<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (<i>digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 EA daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
Impotence Agents		
<i>avanafil</i>	1B	QL(0.134 EA daily)
<i>sildenafil citrate</i>	1B	QL(0.1334 EA daily); PA
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 EA daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
ORENITRAM TBCR	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	4	PA

Drug Name	Drug Tier	Requirements/ Limits
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 EA daily); PA
<i>bosentan TABS 125 MG</i>	4	QL(2 EA daily); SP; PA
<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); SP; PA
TRACLEER TBSO 32 MG (<i>bosentan</i>)	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ML daily); PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 EA daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRA VI TITRATION TBPK	4	1 max fill(s) per 180 day(s) retail; PA
UPTRA VI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); PA
UPTRA VI TABS 200 MCG	4	PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		

Drug Name	Drug Tier	Requirements/ Limits
ADEMPAS	4	QL(3 EA daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	
<i>cefuroxime sodium IJ 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1B	
<i>cefdinir SUSR</i>	1B	
<i>cefixime CAPS</i>	1B	
<i>cefixime SUSR</i>	1B	ST
<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefpodoxime proxetil TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl SOLR IV 2 GM</i>	1B	
Cephalosporins - 5th Generation		
TEFLARO	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	
<i>ethynodiol diacet & eth estrad</i>	0	
FALESSA	0	
FEMLYV TBDP	0	
<i>levonorgestrel & eth estradiol TABS</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
LO LOESTRIN FE TABS	0	
NATAZIA	0	
NEXTSTELLIS	0	
<i>norethin acet & estrad-fe CAPS</i>	0	

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Drug Name	Drug Tier	Requirements/ Limits
<i>norethin acet & estrad-fe CHEW</i>	0	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>norethindrone & eth estradiol</i>	0	
<i>norethindrone & ethinyl estradiol-fe</i>	0	
<i>norethindrone acet & eth estra TABS</i>	0	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>norgestimate-ethinyl estradiol</i>	0	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
TYBLUME CHEW	0	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	0	
TWIRLA	0	QL(3 EA per 28 day(s) retail; 9 EA per 84 days mail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 EA daily)
Copper Contraceptives - IUD		
MIUDELLA INTRAUTERINE COPPER	0	
PARAGARD INTRAUTERINE COPPER	0	
Emergency Contraceptives		
ELLA	0	

Drug Name	Drug Tier	Requirements/ Limits
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Implants		
NEXPLANON	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ML per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ML per 90 day(s) retail)
Progestin Contraceptives - IUD		
KYLEENA	0	
LILETTA (52 MG)	0	
MIRENA (52 MG)	0	
SKYLA	0	
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 EA daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1B	QL(3 EA daily)
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone ELIX</i>	1B	
<i>dexamethasone SOLN</i>	1B	
<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
<i>hydrocortisone sod succinate 100 MG</i>	1B	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPk</i>	1B	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBPk</i>	3	
<i>prednisolone SOLN</i>	1B	
<i>prednisolone TABS</i>	1B	
<i>prednisone SOLN</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TABS 1 MG, 5 MG</i>	1B	
<i>prednisone TBPk</i>	1B	
SOLU-CORTEF 250 MG	3	
SOLU-CORTEF 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		

Drug Name	Drug Tier	Requirements/ Limits
<i>benzonatate 100 MG</i>	1B	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1B	QL(4 EA daily)
<i>benzonatate 200 MG</i>	1B	QL(3 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUEr</i>	1B	
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); RX/OTC
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old)
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>benzoyl peroxide LIQD 4 %</i> , <i>10 %</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 ML daily)
<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ML daily); AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>isotretinoin 10 MG</i> , <i>20 MG</i> , <i>30 MG</i> , <i>40 MG</i>	3	AL(At least 12 yrs old); PA
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old)
<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1B	AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>tretinoin CREA 0.025 %</i> , <i>0.05 %</i> , <i>0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>tretinoin GEL 0.01 %</i> , <i>0.025 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
Agents for External Genital and Perianal Warts		
VEREGEN	3	QL(1 GM daily)
Antibiotics - Topical		
ALTABAX	2	QL(15 GM per 30 day(s) retail; 15 GM per 30 days mail)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 GM daily)
<i>gentamicin sulfate (topical) OINT</i>	1B	
<i>mupirocin OINT</i>	1B	QL(6 GM daily)
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA
Antifungals - Topical		
<i>butenafine hcl</i>	1B	QL(6 GM daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciclopirox olamine SUSP</i>	1B	
<i>ciclopirox GEL</i>	1B	QL(3.35 GM daily)
<i>ciclopirox SHAM</i>	1B	QL(10 ML daily)
<i>ciclopirox SOLN</i>	1B	QL(0.22 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 GM daily); RX/OTC
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ML daily); RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 GM daily)
<i>clotrimazole w/ betamethasone LOTN</i>	1B	
<i>econazole nitrate CREA</i>	1B	QL(85 GM per fill retail; 85 per fill mail)
ERTACZO	3	QL(2.15 GM daily)
<i>ketoconazole (topical) CREA</i>	1B	QL(10 GM daily)
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ML daily)
<i>luliconazole</i>	1B	PA
<i>naftifine hcl CREA 2 %</i>	1B	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>naftifine hcl CREA 1 %</i>	1B	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>nystatin (topical) CREA</i>	1B	QL(10 GM daily)
<i>nystatin (topical) OINT</i>	1B	QL(6 GM daily)
<i>nystatin (topical) POWD EX</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone CREA</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone OINT</i>	1B	QL(4 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1B	
<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 EA daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 GM daily); RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 GM daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 GM daily)
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ML daily)
PANRETIN	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
Antipruritics - Topical		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	SKYRIZI SOSY	4	QL(0.025 ML daily); PA
Antipsoriatics			STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>acitretin 25 MG</i>	1B	QL(2 EA daily)	STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 EA daily)	STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
<i>calcipotriene CREA</i>	1B	QL(4 GM daily); PA	STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 GM daily); PA	STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ML daily); PA	<i>tazarotene CREA 0.1 %</i>	1B	QL(1 GM daily)
<i>calcitriol (topical)</i>	1B	QL(3.34 GM daily)	TREMFYA ONE-PRESS SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); PA	TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); PA	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); PA	YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); PA	YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); PA	YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); PA	Antiseborrheic Products		
<i>methoxsalen rapid</i>	1B	QL(4 EA daily)	<i>selenium sulfide LOTN 2.5 %</i>	1B	
PYZCHIVA 90 MG/ML	4	QL(0.018 ML daily); PA	Antivirals - Topical		
PYZCHIVA SC 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); PA	<i>penciclovir</i>	3	QL(0.18 GM daily)
			Burn Products		
			<i>mafenide acetate PACK</i>	3	
			<i>silver sulfadiazine</i>	1B	QL(20 GM daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SULFAMYLLON CREA	3		<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
Corticosteroids - Topical			<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>alclometasone dipropionate CREA</i>	1B	QL(2 GM daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 GM daily); PA
<i>alclometasone dipropionate OINT</i>	1B	QL(3 GM daily)	<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 GM daily); PA
<i>amcinonide CREA</i>	1B	QL(60 GM per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate FOAM</i>	1B	QL(3 GM daily); ST
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 GM daily); ST
<i>amcinonide OINT</i>	3		<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 GM daily); PA
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 GM daily)	<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ML daily); PA
<i>betamethasone dipropionate (topical) LOTN</i>	1B		<i>clocortolone pivalate</i>	3	QL(3 GM daily)
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 GM daily)	CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 GM daily)	<i>desonide CREA</i>	1B	QL(4 GM daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ML daily)	<i>desonide LOTN</i>	1B	QL(4 ML daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 GM daily)	<i>desonide OINT</i>	1B	QL(3 GM daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 GM daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 GM daily)	<i>desoximetasone GEL</i>	1B	QL(3 GM daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ML daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate OINT</i>	1B	QL(3 GM daily)	<i>diflorasone diacetate CREA</i>	1B	PA
			<i>diflorasone diacetate OINT</i>	1B	PA
			<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
			<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 GM daily)
			<i>fluocinolone acetonide OIL</i>	1B	QL(8 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluocinolone acetonide OINT</i>	1B	QL(4 GM daily)	<i>hydrocortisone valerate OINT</i>	1B	
<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ML daily)	<i>mometasone furoate CREA</i>	1B	QL(3 GM daily)
<i>fluocinonide emulsified base</i>	1B	QL(2 GM daily)	<i>mometasone furoate OINT</i>	1B	QL(4 GM daily)
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 GM daily)	<i>mometasone furoate SOLN</i>	1B	QL(5 ML daily)
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 GM daily)	<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 GM daily)
<i>fluocinonide GEL</i>	1B		<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 GM daily)
<i>fluocinonide OINT</i>	1B	QL(2 GM daily)	<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 GM daily)
<i>fluocinonide SOLN</i>	1B	QL(2 ML daily)	<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ML daily)
<i>flurandrenolide CREA</i>	2	QL(2 GM daily)	<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>flurandrenolide LOTN</i>	2	QL(2 ML daily)	<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 GM daily)
<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 GM daily)	<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 GM daily)
<i>fluticasone propionate LOTN</i>	1B	QL(6 ML daily)	Eczema Agents		
<i>fluticasone propionate OINT</i>	1B	QL(4 GM daily)	DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); PA
<i>halcinonide CREA</i>	1B	PA	DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); PA
<i>halobetasol propionate CREA</i>	1B	QL(3.5 GM daily)	DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ML daily); PA
<i>halobetasol propionate OINT</i>	1B	QL(3.5 GM daily)	DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); PA
HALOG OINT	3	PA	DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); PA
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 GM daily); RX/OTC	Emollients		
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B		<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 GM daily); RX/OTC
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 GM daily); RX/OTC	<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
<i>hydrocortisone butyrate CREA</i>	1B	QL(3 GM daily)	Enzymes - Topical		
<i>hydrocortisone butyrate OINT</i>	1B	QL(3 GM daily)	SANTYL OINT	3	PA
<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ML daily)			
<i>hydrocortisone valerate CREA</i>	1B				

Drug Name	Drug Tier	Requirements/ Limits
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1B	QL(12 EA per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
<i>pimecrolimus</i>	1B	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox SOLN</i>	1B	
Local Anesthetics - Topical		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1B	PA
SYNERA PTCH	3	QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 GM daily); PA
Rosacea Agents		
<i>azelaic acid GEL</i>	1B	QL(1.67 GM daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA
<i>metronidazole (topical) CREA</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>metronidazole (topical) LOTN</i>	1B	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1B	PA
<i>ivermectin (pediculicide)</i>	1B	PA
<i>malathion</i>	1B	
<i>permethrin CREA</i>	1B	
<i>permethrin LIQD EX</i>	1B	
<i>spinosad</i>	1B	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 EA daily)
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
Diagnostic Tests		
CHEMSTRIP K STRP	1B	D
FORA GTEL BLOOD KETONE TEST	1B	D
FORA TEST N'GO ADV-VOICE-6 CON	1B	D
GOJJI BLOOD KETONE TEST	1B	D
KETONE TEST STRP	1B	D
KETOSTIX STRP	1B	D
NOVA MAX PLUS KETONE TEST	1B	D
PRECISION XTRA KETONE	1B	D
RELION KETONE TEST STRP	1B	D
RELION TRUE METRIX TEST STRIPS STRP	1B	D; QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1B	D; QL(3.34 EA daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive		

Drug Name	Drug Tier	Requirements/ Limits
Enzymes		
Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 EA daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 EA daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 EA daily)
<i>methazolamide TABS</i>	1B	QL(6 EA daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1A	
<i>triamterene & hydrochlorothiazide TABS</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 EA daily)
<i>ethacrynic acid</i>	1B	QL(16 EA daily)
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	1B	
<i>furosemide TABS</i>	1A	
<i>torseamide TABS</i>	1B	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 EA daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1A	
DIURIL SUSP	2	QL(20 ML daily)
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 EA daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 EA daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 EA daily)
<i>indapamide TABS 1.25 MG</i>	1A	QL(1 EA daily)
<i>indapamide TABS 2.5 MG</i>	1A	QL(2 EA daily)
<i>metolazone</i>	1B	QL(2 EA daily)
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1A	QL(0.143 EA daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1A	QL(1 EA daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
FOSAMAX PLUS D	3	QL(0.143 EA daily); PA
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 EA daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 EA daily); PA
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 EA daily); PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 EA daily); PA
<i>risedronate sodium TBEC</i>	1B	PA
<i>teriparatide SOPN</i>	4	QL(0.09 ML daily); SP; PA
TYMLOS	4	PA
<i>zoledronic acid SOLN</i>	4	SP; PA
Corticotropin		
ACTHAR GEL PEN SC 40 UNIT/0.5ML, 80 UNIT/ML	3	PA
ACTHAR GEL	3	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	PA
<i>clomiphene citrate TABS</i>	3	PA
NOVAREL IM 10000 UNIT	4	PA
GnRH/LHRH Antagonists		
<i>ganirelix acetate</i>	4	PA
ORILISSA	2	PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	PA

Drug Name	Drug Tier	Requirements/ Limits
GENOTROPIN CART SC	4	PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
ZORBTIVE SC	4	SP; PA
Hormone Receptor Modulators		
OSPHERA	3	PA
<i>raloxifene hcl</i>	0	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	4	SP; PA
SYNAREL	4	SP; PA
Metabolic Modifiers		
ALDURAZYME	4	SP; PA
<i>betaine</i>	4	SP; PA
<i>calcitriol CAPS</i>	1B	
<i>calcitriol SOLN IV</i>	1B	
<i>cinacalcet hcl</i>	1B	QL(4 EA daily); SP; PA
<i>doxercalciferol CAPS</i>	1B	
<i>doxercalciferol SOLN</i>	1B	
ELAPRASE	4	SP; PA
MYALEPT	4	PA
<i>nitisinone CAPS</i>	4	PA
<i>paricalcitol CAPS</i>	1B	
<i>paricalcitol SOLN</i>	1B	
<i>sodium phenylbutyrate POWD</i>	1B	PA
<i>sodium phenylbutyrate TABS</i>	1B	PA
Posterior Pituitary Hormones		

Drug Name	Drug Tier	Requirements/ Limits
<i>desmopressin acetate spray</i>	1B	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1B	
<i>desmopressin acetate SOLN IJ</i>	1B	PA
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 EA daily)
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 EA daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SIGNIFOR	4	PA
Vasopressin Receptor Antagonists		
<i>tolvaptan TABS</i>	4	QL(2 EA daily); SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ANGELIQ	3	
BIJUVA	3	
CLIMARA PRO	3	
COMBIPATCH PTTW	3	
DUAVEE	3	
<i>esterified estrogens & methyltestosterone</i>	3	
<i>estradiol & norethindrone acetate TABS</i>	3	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 EA daily)
Estrogens		

Drug Name	Drug Tier	Requirements/ Limits
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<i>estradiol GEL</i>	3	
<i>estradiol GEL</i>	1B	
<i>estradiol PTTW</i>	1B	QL(0.572 EA daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
EVAMIST SOLN	3	
MENEST 2.5 MG	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 200 MG/100ML</i>	3	
<i>levofloxacin in d5w 500 MG/100ML</i>	1B	
<i>levofloxacin SOLN PO</i>	1B	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
<i>prucalopride succinate</i>	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	2	QL(1 EA daily)
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	1B	QL(3 EA daily)
<i>ursodiol TABS</i>	1B	
Gastrointestinal Chloride Channel Activators		
<i>lubiprostone</i>	1B	QL(2 EA daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ML daily)
<i>metoclopramide hcl TABS</i>	1A	QL(6 EA daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1B	QL(9 EA daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1B	
<i>mesalamine CPDR</i>	1B	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); PA
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ML daily); PA
SKYRIZI SOLN	4	QL(0.36 ML daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ML daily); PA
STEQEYMA	4	QL(3.47 ML daily); PA
<i>sulfasalazine TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>sulfasalazine TBEC</i>	1B	
TREMFYA CROHNS INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); PA
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.072 ML daily); PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); PA
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); PA
YESINTEK 130 MG/26ML	4	QL(3.47 ML daily); PA
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 EA daily)
LINZESS	2	QL(1 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	
MOVANTIK	3	QL(1 EA daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		

Drug Name	Drug Tier	Requirements/ Limits
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & citric acid</i>	1B	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 EA daily)
<i>dutasteride</i>	1B	QL(1 EA daily)
<i>dutasteride-tamsulosin hcl</i>	1B	PA
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1B	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1A	
<i>colchicine TABS</i>	1B	QL(1 EA daily)
<i>febuxostat</i>	1B	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Uricosurics		
<i>probenecid</i>	1B	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	4	PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	4	QL(9 ML daily); PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 EA daily); PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1A	QL(1 EA daily)
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>dipyridamole</i>	1B	
<i>eptifibatide 200 MG/100ML</i>	4	PA
<i>prasugrel hcl</i>	1B	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1B	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat		

Drug Name	Drug Tier	Requirements/ Limits
Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 EA daily); PA
<i>miglustat</i>	4	QL(3 EA daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	3	QL(1 EA daily); PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	3	QL(1 EA daily); PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA	4	PA
NYVEPRIA	4	PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA
Hematopoietic Mixtures		

Drug Name	Drug Tier	Requirements/ Limits
HEMATINIC/FOLIC ACID	1B	QL(1 EA daily)
Iron		
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	0	AL(Up to 1 yrs old)
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	PA
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 EA daily)
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 EA daily)
<i>triazolam</i>	1B	
<i>zaleplon 5 MG</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits
<i>zaleplon 10 MG</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1A	QL(1 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1B	QL(1 EA daily)
Orexin Receptor Antagonists		
<i>BELSOMRA</i>	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1B	
Laxative Combinations		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM</i>	0	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1B	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1A	
<i>bisacodyl TBEC</i>	1A	
Surfactant Laxatives		
<i>docusate calcium</i>	1A	QL(1 EA daily)
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>docusate sodium CAPS 250 MG</i>	1A	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	1B	
<i>azithromycin SUSR</i>	1B	
<i>azithromycin TABS 250 MG</i>	1B	QL(6 EA per fill retail; 6 per fill mail)
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 EA daily)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 EA per fill retail; 4 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
Erythromycins		
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1B	
<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>erythromycin ethylsuccinate TABS</i>	3	
Fidaxomicin		
<i>DIFICID TABS 200 MG (fidaxomicin)</i>	2	
<i>fidaxomicin TABS 200 MG</i>	1B	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
<i>AIMSCO LUBRICATED MISC</i>	0	
<i>CAYA DPRH</i>	0	
<i>DUREX EXTRA SENSITIVE THIN DEVI</i>	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DUREX EXTRA SENSITIVE THIN MISC	0		REALITY LATEX/ULTRA TEXTURED DEVI	0	
DUREX TROPICAL MISC	0		REALITY LATEX/ULTRA THIN DEVI	0	
FANTASY LUBRICATED/SPERMICIDE MISC	0		TROJAN MAGNUM MISC	0	
FANTASY LUBRICATED MISC	0		TROJAN ULTRA THIN/SPERMICIDAL MISC	0	
FC2 FEMALE CONDOM	0	QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TROJAN ULTRA THIN MISC	0	
FEMCAP DEVI	0		TROJAN-ENZ LUBRICATED MISC	0	
KAMELEON LUBRICATED MISC	0		TROJAN-ENZ/SPERMICIDAL MISC	0	
KIMONO COLORS DEVI	0		TRUE COVER DEVI	0	
KIMONO MAXX-LARGE FLARE MISC	0		TRUSTEX COLOR CONDOMS + LUBE MISC	0	
KIMONO MICRO THIN PLUS MISC	0		TRUSTEX LUB/RIBBED/STUDED MISC	0	
KIMONO PLUS MISC	0		TRUSTEX LUB/SPERMICIDE EX ST MISC	0	
KIMONO PS PLUS MISC	0		TRUSTEX LUB/SPERMICIDE XL MISC	0	
KIMONO PS MISC	0		TRUSTEX LUBRICATED EX LARGE MISC	0	
KIMONO SENSATION PLUS MISC	0		TRUSTEX LUBRICATED EXTRA ST MISC	0	
KIMONO SENSATION MISC	0		TRUSTEX LUBRICATED/SPERMICIDE MISC	0	
KIMONO SPECIAL DEVI	0		TRUSTEX LUBRICATED MISC	0	
KIMONO MISC	0		TRUSTEX NATURAL CONDOMS + LUBE MISC	0	
K-Y ME & YOU EXTRA LUBRICATED DEVI	0		TRUSTEX RIA LUB/SPERMICIDE MISC	0	
K-Y ME & YOU INTENSE DEVI	0		TRUSTEX RIA LUBRICATED MISC	0	
MAXX PLUS MISC	0		TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	0	
MAXX MISC	0				
OMNIFLEX DIAPHRAGM	0				
REALITY LATEX CONDOMS MISC	0				

Drug Name	Drug Tier	Requirements/ Limits
WIDE-SEAL DIAPHRAGM 60	0	
WIDE-SEAL DIAPHRAGM 65	0	
WIDE-SEAL DIAPHRAGM 70	0	
WIDE-SEAL DIAPHRAGM 75	0	
WIDE-SEAL DIAPHRAGM 80	0	
WIDE-SEAL DIAPHRAGM 85	0	
WIDE-SEAL DIAPHRAGM 90	0	
WIDE-SEAL DIAPHRAGM 95	0	
Diabetic Supplies		
FREESTYLE LIBRE 14 DAY READER	3	PA
FREESTYLE LIBRE 14 DAY SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE 2 PLUS SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE 2 READER	3	PA
FREESTYLE LIBRE 2 SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE 3 PLUS SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE 3 READER	3	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 3 SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE READER	3	PA
ONETOUCH DELICA SAFETY LANCING	1B	D; RX/OTC
RELION LANCET DEVICES 30G	1B	D; RX/OTC
RELION LANCETS	1B	D; RX/OTC
SELECT LANCETS	1B	6.66/day

Drug Name	Drug Tier	Requirements/ Limits
SELECT LANCETS	1	6.66/day
TRUE METRIX LEVEL 3 SOLN	1B	D
Parenteral Therapy Supplies		
BD PEN NEEDLE NANO 2ND GEN	1B	D; QL(5 EA daily); RX/OTC
EMBECTA AUTOSHIELD DUO	1B	D; QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO	1B	D; QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	1B	D; QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	1B	D; QL(5 EA daily)
SELECT INSULIN SYRINGES	1B	5/day; #
SELECT INSULIN SYRINGES	1	5/day
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ML daily); PA
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); PA
EMGALITY SOAJ	2	QL(0.07 ML daily); PA
EMGALITY SOSY	2	QL(0.07 ML daily); PA
UBRELVY 50 MG	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); ST
UBRELVY 100 MG	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ML daily)
ERGOMAR SUBL	3	QL(0.667 EA daily)
Serotonin Agonists		
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 EA daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 EA daily); AL(At least 18 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>zolmitriptan SOLN</i>	1B	QL(0.2 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TABS</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TBDP</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
MINERALS & ELECTROLYTES		
Bicarbonates		
<i>sodium acetate SOLN</i>	1B	
SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B	
Calcium		
<i>calcium chloride (dihydrate) SOLN</i>	1B	
Electrolyte Mixtures		
<i>electrolyte-148</i>	1B	
<i>electrolyte-a</i>	1B	
IONOSOL-MB IN D5W	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ISOLYTE-P IN D5W	1B		<i>potassium chloride microencapsulated crystals er</i>	1B	
ISOLYTE-S	1B		<i>potassium chloride CPCR</i>	1B	
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (<i>potassium chloride in dextrose & sodium chloride</i>)	1B		<i>potassium chloride PACK PO 20 MEQ</i>	1B	PA
KCL-LACTATED RINGERS-D5W	1B		<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B	
NORMOSOL-M IN D5W	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B	
NORMOSOL-R PH 7.4	1B		<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1B	
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	1B		MISCELLANEOUS THERAPEUTIC CLASSES		
PLASMA-LYTE A (<i>electrolyte-a</i>)	1B		Chelating Agents		
<i>potassium chloride in dextrose 20 MEQ/L</i>	1B		<i>penicillamine CAPS</i>	1B	PA
<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1B		<i>penicillamine TABS</i>	1B	QL(8 EA daily)
<i>ringer's</i>	1B		<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA
Fluoride			Immunomodulators		
<i>sodium fluoride CHEW</i>	0	QL(1 EA daily)	<i>lenalidomide 20 MG</i>	4	QL(1 EA daily); PA
Phosphate			<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
<i>potassium phosphates 45 MMOLE/15ML</i>	1B		THALOMID	4	QL(3 EA daily); SP; PA
Potassium			Immunosuppressive Agents		
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		ATGAM	4	SP; PA
<i>potassium bicarbonate TBEF</i>	1B		AZATHIOPRINE SODIUM	1B	
			<i>azathioprine TABS</i>	1B	
			<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
			<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
			<i>cyclosporine CAPS</i>	1B	
			<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); SP; PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA
<i>mycophenolate mofetil CAPS</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B	
<i>mycophenolate sodium</i>	1B	
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1B	
<i>tacrolimus CAPS</i>	1B	
THYMOGLOBULIN	4	SP; PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1B	
<i>lactated ringer's (irrigation)</i>	1B	
<i>ringer's irrigation</i>	1B	
<i>water for irrigation, sterile</i>	1B	
Potassium Removing Agents		
LOKELMA	3	QL(1 EA daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
Anti-infectives - Throat		

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
<i>pilocarpine hcl (oral)</i>	1B	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 EA daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 EA daily)
EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)
FT PRENATAL TABS	2	QL(1 EA daily)
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)
GNP PRENATAL TABS	2	QL(1 EA daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
MASONATAL TABS	2	QL(1 EA daily)
M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 EA daily); RX/OTC	PRENATRIX TABS	2	QL(1 EA daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	PRENATRYL TABS	2	QL(1 EA daily); RX/OTC
NEONATAL PRENATAL TABS	2	QL(1 EA daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
NEONATAL VITAMIN TABS	2	QL(1 EA daily)	QC PRENATAL TABS	2	QL(1 EA daily)
NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC	RA PRENATAL FORMULA TABS	2	QL(1 EA daily)
ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC	RA PRENATAL TABS	2	QL(1 EA daily)
ONE VITE WOMENS TABS	2	QL(1 EA daily)	SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC	TRICARE TABS	2	QL(1 EA daily); RX/OTC
PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC
PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)	WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
PRENATAL/IRON TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	Central Muscle Relaxants		
PRENATAL TABS	2	QL(1 EA daily)	<i>baclofen TABS</i>	1B	
			<i>carisoprodol TABS</i>	1B	
			<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 EA daily)
			<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 EA daily)
			<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 EA daily)
			<i>metaxalone 800 MG</i>	1B	QL(4 EA daily)
			<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
			<i>orphenadrine citrate TB12</i>	1B	QL(2 EA daily)
			<i>tizanidine hcl CAPS</i>	1B	
			<i>tizanidine hcl TABS</i>	1B	
			Direct Muscle Relaxants		
			<i>dantrolene sodium CAPS</i>	1B	QL(4 EA daily)
			NASAL AGENTS - SYSTEMIC AND TOPICAL -		

Drug Name	Drug Tier	Requirements/ Limits
Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ML daily)
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal)</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 GM daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX/DEXTROSE (4.25/10)	3	

Drug Name	Drug Tier	Requirements/ Limits
CLINIMIX/DEXTROSE (4.25/5)	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ML daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	3	
BESIVANCE	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B	
<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
NATACYN	2	
<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>ofloxacin (ophth)</i>	1B	
<i>polymyxin b-trimethoprim</i>	1B	
<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tobramycin (ophth) SOLN</i>	1B	
<i>trifluridine</i>	1B	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
<i>cyclosporine (ophth) EMUL</i>	3	PA
Ophthalmic Local Anesthetics		
<i>proparacaine hcl</i>	1B	
Ophthalmic Steroids		
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ML daily)
<i>difluprednate</i>	1B	PA
<i>fluorometholone (ophth) SUSP</i>	1B	
FML FORTE SUSP	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1B	PA
<i>loteprednol etabonate SUSP</i>	1B	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-polymy-dexameth OINT</i>	1B	
<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	1B	
<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ML daily)
PRED MILD	3	PA
<i>prednisolone acetate (ophth)</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1B	
ZYLET	3	PA
Ophthalmic Surgical Aids		
HEALON PRO SOSY	3	PA
PROVISC SOSY	3	PA
Ophthalmics - Misc.		
ALOCRIAL	3	PA
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1B	
<i>bepotastine besilate</i>	3	PA
<i>brinzolamide</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	
CYSTARAN	2	QL(2.143 ML daily); PA
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	
LASTACRAFT	3	PA
NEVANAC	3	QL(0.2 ML daily); ST
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ML daily); RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	1B	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>travoprost SOLN</i>	1B	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ML daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	PA
<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ML daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
Otic Steroids		
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	0	
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IV 10 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
<i>penicillin g potassium 5000000 UNIT</i>	1B	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>naftillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 10 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>megestrol acetate (appetite)</i>	1B	PA
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1B	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	
<i>lofexidine hcl</i>	1B	QL(224 EA per 14 day(s) retail); PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 EA daily)
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 EA daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 EA daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 EA daily)
<i>galantamine hydrobromide CP24</i>	1B	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 EA daily)
<i>memantine hcl TABS</i>	1B	
<i>memantine hcl TABS</i>	1B	QL(2 EA daily)
<i>rivastigmine tartrate CAPS</i>	1B	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
SAVELLA TABS	2	QL(2 EA daily); PA
Movement Disorder Drug Therapy		
AUSTEDO TABS	4	QL(4 EA daily); PA
<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA
AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA
BETASERON KIT	4	QL(0.5 EA daily); SP; PA
<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA
<i>dimethyl fumarate CDPK</i>	1B	QL(2 EA daily)
<i>dimethyl fumarate CPDR</i>	1B	QL(2 EA daily)
<i>fingolimod hcl</i>	3	QL(1 EA daily); PA
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily)
LEMTRADA	4	QL(1.2 ML daily); PA
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); PA
PLEGRIDY SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY SOSY SC	4	QL(0.036 ML daily); PA
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ML daily); SP; PA
<i>teriflunomide</i>	3	QL(1 EA daily); PA
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	3	QL(2 EA daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 EA daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	
NICOTINE KIT	0	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 EA daily)
NICOTROL NS SOLN	0	
NICOTROL INHA	0	
<i>varenicline tartrate TABS</i>	0	QL(2 EA daily)
<i>varenicline tartrate TBPk</i>	0	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
PROLASTIN-C SOLR	4	PA

Drug Name	Drug Tier	Requirements/ Limits
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA
ORKAMBI PACK	4	QL(2 EA daily); PA
ORKAMBI TABS	4	QL(4 EA daily); PA
PULMOZYME	4	QL(2.5 ML daily); SP; PA
TRIKAFTA TBPk	4	QL(3 EA daily); PA
Pulmonary Fibrosis Agents		
OFEV	4	QL(2 EA daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 EA daily); PA
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 EA daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline hyclate CAPS</i>	1B	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 EA daily)
<i>minocycline hcl TABS</i>	1B	QL(3 EA daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID TABS	1B	QL(1 EA daily)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC INJ	0	

Drug Name	Drug Tier	Requirements/ Limits
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	0	
VAXELIS SUSP	0	
VAXELIS SUSY	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN PO</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>methscopolamine bromide</i>	1B	
H-2 Antagonists		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	
<i>famotidine SUSR</i>	1B	QL(10 ML daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC
<i>nizatidine CAPS</i>	1B	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1B	QL(40 ML daily)
<i>sucralfate TABS</i>	1B	QL(4 EA daily)
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	3	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 EA daily)
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1B	
NEXIUM 24HR TBEC 20 MG	1B	QL(2 EA daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 EA daily)
<i>omeprazole CPDR</i>	1B	QL(2 EA daily)
<i>omeprazole TBEC</i>	1B	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 EA daily)
<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>rabeprazole sodium TBEC</i>	1B	QL(1 EA daily)
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1B	QL(4 EA daily)
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 EA daily); RX/OTC
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	1B	QL(1 EA daily)
<i>fesoterodine fumarate</i>	1B	QL(1 EA daily)
<i>oxybutynin chloride SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride TABS 5 MG</i>	1B	
<i>oxybutynin chloride TB24</i>	1B	
<i>solifenacin succinate TABS</i>	1B	QL(1 EA daily)
<i>tolterodine tartrate CP24</i>	1B	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1B	
<i>trospium chloride CP24</i>	1B	QL(1 EA daily)
<i>trospium chloride TABS</i>	1B	QL(3 EA daily)
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
<i>mirabegron TB24</i>	3	PA
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 25 MG</i>	1B	
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 EA daily)
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	1B	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	0	
BEXSERO 0.5 ML	0	
CAPVAXIVE	0	
HIBERIX SOLR IJ	0	
MENACTRA	0	
MENQUADFI 0.5 ML	0	
MENVEO SOLN	0	
MENVEO SOLR	0	
PEDVAX HIB SUSP	0	
PENBRAYA	0	
PNEUMOVAX 23 SOLN	0	
PNEUMOVAX 23 SOSY	0	
PREVNAR 13	0	
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
TRUMENBA 0.5 ML	0	
VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail
Viral Vaccines		
ABRYSVO	0	
AFLURIA PRESERVATIVE FREE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail
AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail
AREXVY	0	
AUDENZ EMUL	0	
AUDENZ PRSY	0	
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
COMIRNATY SUSP	0	
COMIRNATY SUSY	0	
ENGRIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
ENGRIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
FLUAD	0	1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
FLUARIX SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail
FLULAVAL QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
FLULAVAL SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST	0	1 max fill(s) per 180 day(s) retail
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail	MRESVIA	0	
FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSP	0	
FLUZONE QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSY	0	
FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0	
FLUZONE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	PFIZER COVID-19 VAC BIVALENT	0	
GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 365 day(s) retail	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0	
GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 365 day(s) retail	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0	
HAVRIX 1440 EL U/ML	0		PFIZER-BIONT COVID-19 VAC-TRIS SUSP	0	
HAVRIX IM 720 EL U/0.5ML	0		PFIZER-BIONTECH COVID-19 VACC SUSP	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail	PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
IPOL	0		PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
JYNNEOS	0		PROQUAD SUSR	0	2 max fill(s) per 365 day(s) retail
M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail	RECOMBIVAX HB SUSP	0	
MNEXSPIKE SUSY 10 MCG/0.2ML	0		RECOMBIVAX HB SUSY	0	
MODERNA COVID-19 BIVALENT	0		ROTARIX SUSP	0	
MODERNA COVID-19 VAC 6M-11Y SUSP	0		ROTARIX SUSR	0	
MODERNA COVID-19 VAC 6M-11Y SUSY	0		ROTATEQ SOLN	0	
MODERNA COVID-19 VACCINE SUSP	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
			SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
			SPIKEVAX SUSP	0	
			SPIKEVAX SUSY	0	
			TWINRIX SUSY	0	
			VAQTA	0	

Drug Name	Drug Tier	Requirements/ Limits
VARIVAX SUSR	0	2 max fill(s) per 365 day(s) retail
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	0	
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	1B	
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 GM daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING 7.5 MCG/24HR	3	
FEMRING	3	
PREMARIN	2	QL(1.5 GM daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>epinephrine (anaphylaxis) SOAJ</i>	1B	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ML daily)
NIACIN ER TBCR	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacinamide TABS 100 MG</i>	1B	
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<i>niacin TABS</i>	1A	
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calcipotriene-betamethasone dipropionate OINT 39	carbamazepine TABS 12	cefoxitin sodium IV 1 GM, 2 GM ... 33
calcipotriene-betamethasone dipropionate SUSP 39	carbamazepine TB12 100 MG, 400 MG 12	cefpodoxime proxetil SUSR 33
calcitonin (salmon) NA 42	carbamazepine TB12 200 MG 12	cefpodoxime proxetil TABS 33
calcitriol (topical) 38	carbidopa 27	cefprozil SUSR 33
calcitriol CAPS 43	carbidopa-levodopa TABS 27	cefprozil TABS 33
calcitriol SOLN IV 43	carbidopa-levodopa TBCR 27	ceftazidime IJ 1 GM, 6 GM 33
calcium acetate (phosphate binder) CAPS 45	carbidopa-levodopa TBDP 27	cefuroxime axetil TABS 33
calcium acetate (phosphate binder) TABS 45	carbidopa-levodopa-entacapone .. 27	cefuroxime sodium IJ 750 MG 33
	carbinoxamine maleate SOLN 18	celecoxib 4
	carbinoxamine maleate TABS 4 MG . 18	cephalexin CAPS 33
	carisoprodol TABS 54	cephalexin SUSR 33
	carmustine 23	CERDELGA 47
	carteolol hcl (ophth) 55	cetirizine hcl TABS 18
	carvedilol 30	cevimeline hcl 53

CHEMET	16	ciclopirox SHAM	36	36
CHEMSTRIP K STRP	41	ciclopirox SOLN	36	clindamycin phosphate (topical) LOTN36
chloramphenicol sodium succinate 21		cidofovir	30	clindamycin phosphate (topical) SOLN36
chlordiazepoxide hcl CAPS	9	cilostazol	46	clindamycin phosphate (topical) SWAB36
chlordiazepoxide hcl-clidinium bromide	60	CIMDUO	28	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML21
chlordiazepoxide-amitriptyline	58	cimetidine TABS	60	clindamycin phosphate vaginal CREA64
chlorhexidine gluconate (mouth- throat)	53	cinacalcet hcl	43	clindamycin phosphate-benzoyl peroxide (refrigerate)36
chloroquine phosphate TABS 250 MG	22	ciprofloxacin hcl (ophth) SOLN	55	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %36
chloroquine phosphate TABS 500 MG	22	ciprofloxacin hcl (otic)	57	clindamycin phosphate-tretinoin ..36
chlorpromazine hcl SOLN	28	ciprofloxacin hcl TABS	44	CLINIMIX/DEXTROSE (4.25/10) ..55
chlorpromazine hcl TABS	28	ciprofloxacin in d5w 200 MG/100ML .	44	CLINIMIX/DEXTROSE (4.25/5) ...55
chlorthalidone 25 MG, 50 MG	42	ciprofloxacin-dexamethasone	57	clobazam SUSP
chlorzoxazone TABS 500 MG	54	ciprofloxacin-fluocinolone acetonide .	57	clobazam TABS
chlorzoxazone TABS 750 MG	54	cisplatin SOLN 100 MG/100ML ...	23	clobetasol propionate CREA 0.05 % . 39
cholecalciferol CAPS	64	citalopram hydrobromide SOLN ...	14	clobetasol propionate emollient base 0.05 %39
cholecalciferol TABS 10 MCG, 400 UNIT	64	citalopram hydrobromide TABS ...	14	clobetasol propionate FOAM39
cholestyramine light PACK	18	clarithromycin SUSR	48	clobetasol propionate GEL 0.05 % 39
cholestyramine light POWD	18	clarithromycin TABS	48	clobetasol propionate OINT 0.05 % 39
cholestyramine PACK	18	clarithromycin TB24	48	clobetasol propionate SOLN 0.05 % . 39
cholestyramine POWD	18	CLASSIC PRENATAL TABS	53	clocortolone pivalate39
choline fenofibrate	18	clemastine fumarate SYRP	18	clofarabine23
CHORIONIC GONADOTROPIN IM 43		clemastine fumarate TABS 2.68 MG .	18	
ciclopirox GEL	36	CLIMARA PRO	44	
ciclopirox olamine CREA	36	clindamycin hcl	21	
ciclopirox olamine SUSP	36	clindamycin palmitate hydrochloride .	21	
		clindamycin phosphate (topical) FOAM	36	
		clindamycin phosphate (topical) GEL		

clomiphene citrate TABS	43	colestipol hcl TABS	18	MG-800 MCG-400 UNIT-4 MCG-1.7
clomipramine hcl	14	COMBIPATCH PTTW	44	MG-18 MG-27 MG-1.5 MG-25 MG-
clonazepam TABS	11	COMBIVENT RESPIMAT AERS ..	10	263 MG-11 UNIT-4000 UNIT
clonidine hcl (adhd) TB12	1	COMETRIQ (100 MG DAILY DOSE)		cyanocobalamin SOLN IJ 1000
clonidine hcl TABS	19	KIT	25	MCG/ML
clonidine PTWK	20	COMETRIQ (140 MG DAILY DOSE)		cyclobenzaprine hcl TABS 5 MG, 10
clopidogrel bisulfate 300 MG	46	KIT	25	MG
clopidogrel bisulfate 75 MG	46	COMETRIQ (60 MG DAILY DOSE)		cyclophosphamide CAPS
clorazepate dipotassium TABS	9	KIT	25	cyclophosphamide SOLR IJ
clotrimazole (topical) CREA	37	COMIRNATY 5-11 YEARS SUSP 10		cycloserine
clotrimazole (topical) SOLN	37	MCG/0.3ML	62	cyclosporine (ophth) EMUL
clotrimazole	53	COMIRNATY SUSP	62	cyclosporine CAPS
clotrimazole vaginal CREA 1 % ...	64	COMIRNATY SUSY	62	cyclosporine modified (for
clotrimazole w/ betamethasone		COMPLERA 200 MG-300 MG-25 MG		microemulsion) CAPS
CREA	37	(emtricitabine-rilpivirine-tenofovir		cyclosporine modified (for
clotrimazole w/ betamethasone		disoproxil fumarate)	29	microemulsion) SOLN
LOTN	37	CORDRAN TAPE	39	cyclosporine SOLN IV 50 MG/ML .
clozapine TABS	28	CORTISPORIN-TC	57	cyproheptadine hcl SYRP
clozapine TBDP 100 MG	28	COSENTYX (300 MG DOSE) SOSY .		cyproheptadine hcl TABS
clozapine TBDP 12.5 MG, 150 MG		38		CYSTAGON CAPS
28		COSENTYX SENSOREADY (300		CYSTARAN
clozapine TBDP 25 MG	28	MG) SOAJ	38	dabigatran etexilate mesylate CAPS .
COARTEM	22	COSENTYX SENSOREADY PEN		11
codeine sulfate TABS 30 MG	5	SOAJ	38	dactinomycin
CODEINE SULFATE TABS	5	COSENTYX SOSY 150 MG/ML ...	38	dalfampridine
colchicine TABS	46	COSENTYX SOSY 75 MG/0.5ML .	38	danazol CAPS
colchicine w/ probenecid	46	COSENTYX UNOREADY SOAJ ...	38	dantrolene sodium CAPS
colesevelam hcl PACK	18	CREON CPEP	42	dapagliflozin propanediol
colesevelam hcl TABS	18	CRESEMBA CAPS 186 MG	17	dapagliflozin propanediol-metformin
colestipol hcl GRAN	18	cromolyn sodium (ophth)	56	hcl 1000 MG-10 MG
colestipol hcl PACK	18	cromolyn sodium NEBU	9	dapagliflozin propanediol-metformin
		crotamiton LOTN	41	hcl 1000 MG-5 MG
		CVS PRENATAL TABS 100 MG-2.6		dapsone
				21

DAPTACEL	60	desogestrel-ethinyl estradiol (biphasic)	33	DIACOMIT CAPS 500 MG	12
daptomycin 500 MG	21	desogestrel-ethinyl estradiol (triphasic)	33	DIACOMIT PACK 250 MG	12
darifenacin hydrobromide	61	desonide CREA	39	DIACOMIT PACK 500 MG	12
darunavir TABS	29	desonide LOTN	39	diazepam (anticonvulsant) GEL ...	12
dasatinib	25	desonide OINT	39	diazepam CONC	9
DAURISMO	24	desoximetasone CREA 0.25 %	39	diazepam SOLN PO 5 MG/5ML	9
decitabine	23	desoximetasone GEL	39	diazepam TABS	9
deferasirox PACK	16	desoximetasone OINT 0.25 %	39	diazoxide	15
deferasirox TABS	16	desvenlafaxine succinate	14	diclofenac epolamine PTCH EX ...	37
deferasirox TBSO	16	dexamethasone ELIX	34	diclofenac potassium TABS 50 MG .	4
deflazacort TABS	34	DEXAMETHASONE INTENSOL CONC	34	diclofenac sodium (actinic keratoses) EX	37
DELSTRIGO	29	dexamethasone sodium phosphate (ophth)	56	diclofenac sodium (ophth)	56
demeclocycline hcl TABS	59	dexamethasone SOLN	34	diclofenac sodium (topical) GEL EX	37
DEPO-ESTRADIOL	44	dexamethasone TABS 0.5 MG, 0.75 MG	34	diclofenac sodium TB24	4
DEPO-MEDROL SUSP	34	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	35	diclofenac sodium TBEC	4
DEPO-SUBQ PROVERA 104 SUSY SC	34	dexlansoprazole	60	diclofenac w/ misoprostol TBEC	4
DESCOVY 200 MG-25 MG	29	dexmethylphenidate hcl CP24	1	dicloxacillin sodium	57
desipramine hcl TABS	14	dexmethylphenidate hcl TABS	1	dicyclomine hcl CAPS	60
desloratadine TABS	18	dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicyclomine hcl SOLN PO	60
desloratadine TBDP 2.5 MG	18	dextroamphetamine sulfate CP24 5 MG	1	dicyclomine hcl TABS	60
desmopressin acetate SOLN IJ ...	44	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG .	1	DIFFERIN LOTN	36
DESMOPRESSIN ACETATE SOLN NA	44	DIACOMIT CAPS 250 MG	12	DIFICID TABS 200 MG (fidaxomicin) 48	
desmopressin acetate spray	44			diflorasone diacetate CREA	39
desmopressin acetate spray refrigerated 0.01 %	44			diflorasone diacetate OINT	39
desmopressin acetate TABS 0.1 MG 44				diflunisal TABS	5
desmopressin acetate TABS 0.2 MG 44				difluprednate	56
desogestrel & ethinyl estradiol	33			digoxin SOLN PO 0.05 MG/ML	32
				digoxin TABS 62.5 MCG, 125 MCG,	

250 MCG	32	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	18	doxercalciferol CAPS	43
dihydroergotamine mesylate SOLN IJ 1 MG/ML	51	diphenoxylate w/ atropine LIQD ...	16	doxercalciferol SOLN	43
dihydroergotamine mesylate SOLN NA 4 MG/ML	51	diphenoxylate w/ atropine TABS ...	16	doxorubicin hcl SOLR 10 MG, 50 MG	25
DILANTIN (phenytoin sodium extended)	13	dipyridamole	46	doxycycline (monohydrate) CAPS 50 MG, 100 MG	59
DILANTIN	13	disopyramide phosphate CAPS	9	doxycycline (monohydrate) CAPS 75 MG	59
DILANTIN INFATABS CHEW (phenytoin)	13	disulfiram	58	doxycycline (monohydrate) TABS 100 MG	59
DILANTIN SUSP (phenytoin)	13	DIURIL SUSP	42	doxycycline (monohydrate) TABS 50 MG, 75 MG	59
DILANTIN-125 SUSP (phenytoin) .	13	divalproex sodium TB24	13	doxycycline hyclate CAPS	59
diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	31	divalproex sodium TBEC	13	doxycycline hyclate TABS 20 MG, 100 MG	60
diltiazem hcl coated beads CP24 180 MG, 240 MG	31	docetaxel CONC 20 MG/ML	26	doxylamine-pyridoxine TBEC	17
diltiazem hcl CP12	31	docusate calcium	48	dronabinol CAPS	17
diltiazem hcl CP24	31	docusate sodium CAPS 100 MG ..	48	drosiprenone-ethinyl estradiol	33
diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	31	docusate sodium CAPS 250 MG ..	48	drosiprenone-ethinyl estradiol- levomefolate calcium	33
diltiazem hcl extended release beads 420 MG	31	dofetilide	9	DROXIA CAPS	47
diltiazem hcl SOLN 50 MG/10ML ..	31	donepezil hydrochloride TABS 10 MG	58	DUAVEE	44
DILTIAZEM HCL SOLR	31	donepezil hydrochloride TABS 5 MG, 23 MG	58	DULERA	10
diltiazem hcl TABS	31	donepezil hydrochloride TBDP 10 MG	58	duloxetine hcl CPEP	14
diltiazem hcl TB24	31	donepezil hydrochloride TBDP 5 MG 58		DUPIXENT SOAJ 200 MG/1.14ML 40	
dimethyl fumarate CDPK	58	dorzolamide hcl	56	DUPIXENT SOAJ 300 MG/2ML ...	40
dimethyl fumarate CPDR	58	dorzolamide hcl-timolol maleate ..	55	DUPIXENT SOSY 100 MG/0.67ML 40	
DIPENTUM	45	DOVATO	29	DUPIXENT SOSY 200 MG/1.14ML 40	
diphenhydramine hcl CAPS 50 MG 18		doxazosin mesylate	20	DUPIXENT SOSY 300 MG/2ML ...	40
diphenhydramine hcl ELIX 12.5 MG/5ML	18	doxepin hcl (antipruritic)	38	DUREX EXTRA SENSITIVE THIN DEVI	48
		doxepin hcl (sleep)	47		
		doxepin hcl CAPS	14		
		doxepin hcl CONC	14		

DUREX EXTRA SENSITIVE THIN MISC	49	EMBECTA AUTOSHIELD DUO ...	50	ENERGIX-B SUSP 20 MCG/ML ...	62
DUREX TROPICAL MISC	49	EMBECTA PEN NEEDLE NANO ..	50	ENERGIX-B SUSY	62
dutasteride	46	EMBECTA PEN NEEDLE NANO 2 GEN	50	enoxaparin sodium SOLN IJ 300 MG/3ML	11
dutasteride-tamsulosin hcl	46	EMBECTA PEN NEEDLE ULTRAFINE	50	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11
econazole nitrate CREA	37	EMCYT	24	enoxaparin sodium SOSY 30 MG/0.3ML	11
EDARBI	19	EMGALITY (300 MG DOSE) SOSY 50		enoxaparin sodium SOSY 40 MG/0.4ML	11
EDURANT	29	EMGALITY SOAJ	50	enoxaparin sodium SOSY 60 MG/0.6ML	11
efavirenz CAPS 200 MG	29	EMGALITY SOSY	50	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11
efavirenz CAPS 50 MG	29	EMSAM	13	entacapone	27
efavirenz TABS	29	emtricitabine CAPS	29	entecavir TABS	30
efavirenz-emtricitabine-tenofovir disoproxil fumarate	29	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	29	EPIDIOLEX	12
efavirenz-lamivudine-tenofovir disoproxil fumarate	29	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	29	epinastine hcl (ophth)	56
ELAPRASE	43	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	29	epinephrine (anaphylaxis) SOAJ ..	64
electrolyte-148	51	EMTRIVA SOLN	29	eplerenone	21
electrolyte-a	51	EMVERM CHEW	8	epoprostenol sodium	32
ELESTRIN GEL	44	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		eptifibatide 200 MG/100ML	46
eletriptan hydrobromide	51	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		EQL PRENATAL FORMULA TABS 53	
ELIGARD KIT SC 7.5 MG	24	enalapril maleate TABS	19	EQUETRO 100 MG	27
ELIGARD SC 22.5 MG, 30 MG, 45 MG	24	ENBREL MINI SOCT	5	EQUETRO 200 MG	27
ELIQUIS DVT/PE STARTER PACK TBPK	11	ENBREL SOLN	5	EQUETRO 300 MG	27
ELIQUIS TABS	11	ENBREL SOSY 25 MG/0.5ML	5	ERBITUX	24
ELLA	34	ENBREL SOSY 50 MG/ML	5	ergocalciferol CAPS	64
ELMIRON CAPS	46	ENBREL SURECLICK SOAJ	5	ergocalciferol SOLN PO 200 MCG/ML	64
eltrombopag olamine PACK 12.5 MG, 25 MG	47			ergoloid mesylates TABS	59
eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG	47			ERGOMAR SUBL	51

ergotamine w/ caffeine TABS50	estradiol PTTW44	ezetimibe19
eribulin mesylate26	estradiol PTWK44	ezetimibe-simvastatin18
ERIVEDGE24	estradiol TABS44	FALESSA33
ERLEADA 240 MG24	estradiol vaginal CREA64	famciclovir 125 MG, 250 MG30
ERLEADA 60 MG24	estradiol vaginal TABS64	famciclovir 500 MG30
erlotinib hcl24	estradiol valerate44	famotidine in nacl SOLN60
ERTACZO37	ESTRING RING 7.5 MCG/24HR ..64	famotidine SUSR60
ertapenem sodium IJ21	eszopiclone47	famotidine TABS 20 MG, 40 MG ..60
erythromycin (acne aid) PADS36	ethacrynic acid42	FANAPT27
erythromycin (acne aid) SOLN36	ethambutol hcl TABS22	FANAPT TITRATION PACK A28
erythromycin (ophth)55	ethosuximide CAPS13	FANTASY LUBRICATED MISC ...49
erythromycin base CPEP48	ethosuximide SOLN13	FANTASY
erythromycin base TABS48	ethynodiol diacet & eth estrad33	LUBRICATED/SPERMICIDE MISC
erythromycin base TBEC48	etodolac CAPS4	49
erythromycin ethylsuccinate SUSR	etodolac TABS4	FASENRA PEN SOAJ9
48	etonogestrel-ethinyl estradiol34	FASENRA SOSY 10 MG/0.5ML9
erythromycin ethylsuccinate TABS 48	ETOPOPHOS26	FASENRA SOSY 30 MG/ML9
escitalopram oxalate SOLN14	etoposide CAPS26	FC2 FEMALE CONDOM49
escitalopram oxalate TABS14	etoposide SOLN 1 GM/50ML, 100	febuxostat46
eslicarbazepine acetate 200 MG, 400	MG/5ML, 500 MG/25ML26	felbamate SUSP13
MG, 600 MG, 800 MG12	etravirine 100 MG29	felbamate TABS 400 MG13
esomeprazole magnesium CPDR 20	etravirine 200 MG29	felbamate TABS 600 MG13
MG61	EUCRISA41	felodipine31
esomeprazole magnesium CPDR 40	EVAMIST SOLN44	FEMCAP DEVI49
MG61	everolimus (immunosuppressant)	FEMLYV TBDP33
esomeprazole magnesium TBEC ..61	0.25 MG, 0.5 MG, 0.75 MG53	FEMRING64
estazolam47	everolimus (immunosuppressant) 1	fenofibrate micronized 43 MG, 130
esterified estrogens &	MG53	MG19
methyltestosterone44	everolimus TABS25	fenofibrate micronized 67 MG, 134
estradiol & norethindrone acetate	EVOTAZ29	MG, 200 MG19
TABS44	exemestane24	fenofibrate TABS 48 MG, 54 MG, 145
estradiol GEL44		MG, 160 MG19

fenoprofen calcium TABS	4	FLUCELVAX SUSP	62	fluorouracil 500 MG/10ML	23
FENSOLVI (6 MONTH) SC	43	FLUCELVAX SUSY	62	fluoxetine hcl CAPS	14
fentanyl citrate LPOP	5	fluconazole SUSR	17	fluoxetine hcl CPDR	14
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5	fluconazole TABS	18	fluoxetine hcl SOLN	14
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	47	flucytosine	17	fluoxetine hcl TABS	14
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	47	fludarabine phosphate SOLN	23	fluphenazine hcl CONC	28
ferrous sulfate TBEC 325 MG	47	fludarabine phosphate SOLR	23	fluphenazine hcl ELIX	28
fesoterodine fumarate	61	fludrocortisone acetate TABS	35	fluphenazine hcl SOLN	28
FETZIMA CP24	14	FLULAVAL QUADRIVALENT SUSY . 62		fluphenazine hcl TABS	28
FETZIMA TITRATION C4PK	14	FLULAVAL SUSY	62	flurandrenolide CREA	40
fidaxomicin TABS 200 MG	48	FLUMIST	62	flurandrenolide LOTN	40
finasteride	46	FLUMIST QUADRIVALENT	62	flurazepam hcl	47
fingolimod hcl	58	flunisolide (nasal)	55	flurbiprofen sodium	56
FIRMAGON (240 MG DOSE)	24	fluocinolone acetate (otic)	57	flurbiprofen TABS	4
FIRMAGON 80 MG	24	fluocinolone acetate CREA 0.01 % 39		fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	10
flavoxate hcl	61	fluocinolone acetate CREA 0.025 %	39	fluticasone furoate-vilanterol	10
flecainide acetate	9	fluocinolone acetate OIL	39	fluticasone propionate (inhalation) AEPB	10
floxuridine	23	fluocinolone acetate OINT	40	fluticasone propionate (nasal) SUSP . 55	
FLUAD	62	fluocinolone acetate SOLN	40	fluticasone propionate CREA 0.05 % 40	
FLUAD QUADRIVALENT	62	fluocinonide CREA 0.05 %	40	fluticasone propionate hfa	10
FLUARIX QUADRIVALENT SUSY 62		fluocinonide CREA 0.1 %	40	fluticasone propionate LOTN	40
FLUARIX SUSY	62	fluocinonide emulsified base	40	fluticasone propionate OINT	40
FLUBLOK QUADRIVALENT	62	fluocinonide GEL	40	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	10
FLUBLOK SOSY	62	fluocinonide OINT	40	fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232	
FLUCELVAX QUADRIVALENT SUSP	62	fluocinonide SOLN	40		
FLUCELVAX QUADRIVALENT SUSY	62	fluorometholone (ophth) SUSP	56		
		fluorouracil (topical) CREA 5 % ...	37		
		fluorouracil (topical) SOLN	37		

MCG/ACT-14 MCG/ACT, 55	hydrochlorothiazide	20	ganirelix acetate	43
MCG/ACT-14 MCG/ACT	fosinopril sodium	19	GARDASIL 9 SUSP 0.5 ML	63
fluticasone-salmeterol AERO	fosphenytoin sodium	13	GARDASIL 9 SUSY 0.5 ML	63
fluvastatin sodium CAPS 20 MG ...	FRAGMIN SOSY	11	gatifloxacin (ophth)	55
fluvastatin sodium CAPS 40 MG ...	FREESTYLE LIBRE 14 DAY		gefitinib	24
fluvoxamine maleate TABS	READER	50	gemcitabine hcl SOLR 2 GM, 200	
FLUZONE HIGH-DOSE	FREESTYLE LIBRE 14 DAY		MG	23
QUADRIVALENT	SENSOR	50	gemfibrozil TABS	19
FLUZONE HIGH-DOSE SUSY	FREESTYLE LIBRE 2 PLUS		GENOTROPIN CART SC	43
FLUZONE QUADRIVALENT SUSP	SENSOR	50	GENOTROPIN MINIQUEL PRSY	43
63	FREESTYLE LIBRE 2 READER ..	50	gentamicin in saline 0.8 MG/ML-0.9	
FLUZONE QUADRIVALENT SUSY	FREESTYLE LIBRE 2 SENSOR ..	50	%, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9	
63	FREESTYLE LIBRE 3 PLUS		%, 1.6 MG/ML-0.9 %	2
FLUZONE SUSP	SENSOR	50	gentamicin sulfate (ophth) SOLN ..	55
FLUZONE SUSY	FREESTYLE LIBRE 3 READER ..	50	gentamicin sulfate (topical) CREA	36
FML FORTE SUSP	FREESTYLE LIBRE 3 SENSOR ..	50	gentamicin sulfate (topical) OINT ..	36
folic acid TABS	FREESTYLE LIBRE READER	50	gentamicin sulfate IJ 40 MG/ML	2
fondaparinux sodium 10 MG/0.8ML	frovatriptan succinate	51	GENVOYA	29
11	FT PRENATAL TABS	53	GILOTRIF	24
fondaparinux sodium 2.5 MG/0.5ML .	fulvestrant SOSY	24	glatiramer acetate SOSY 20 MG/ML .	
11	furosemide SOLN PO 8 MG/ML, 10		58	
fondaparinux sodium 5 MG/0.4ML .11	MG/ML	42	glatiramer acetate SOSY 40 MG/ML .	
fondaparinux sodium 7.5 MG/0.6ML .	furosemide TABS	42	58	
11	FUZEON SOLR	29	GLEOSTINE 10 MG	23
FORA GTEL BLOOD KETONE TEST	gabapentin CAPS	12	GLEOSTINE 40 MG, 100 MG	23
.....	gabapentin SOLN	12	glimepiride 1 MG, 2 MG	16
FORA TEST N'GO ADV-VOICE-6	gabapentin TABS 600 MG, 800 MG		glimepiride 4 MG	16
CON	12		glipizide TABS 5 MG, 10 MG	16
formoterol fumarate NEBU	galantamine hydrobromide CP24 ..	58	glipizide TB24	16
FOSAMAX PLUS D	galantamine hydrobromide SOLN ..	58	glipizide-metformin hcl 250 MG-2.5	
fosamprenavir calcium TABS	galantamine hydrobromide TABS ..	58	MG, 500 MG-2.5 MG	15
fosfomycin tromethamine	ganciclovir sodium SOLR	30	glipizide-metformin hcl 500 MG-5 MG	
fosinopril sodium &				

.....15	halobetasol propionate CREA40	HUMIRA-PS/UV/ADOL HS STARTER AJKT3
GLUCAGEN DIAGNOSTIC41	halobetasol propionate OINT40	HUMIRA-PSORIASIS/UVEIT STARTER AJKT3
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GNP PRENATAL/FOLIC ACID TABS53	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML11	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML7
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granisetron hcl TABS17	HUMIRA (2 PEN) AJKT 80 MG/0.8ML3	hydrocodone-acetaminophen TABS 325 MG-2.5 MG7
GRASTEK SUBL2	HUMIRA (2 PEN) AJKT3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG7
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guanfacine hcl20	HUMIRA-PED>=40KG UC STARTER AJKT3	
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hydrocortisone (rectal) EX8	hydroxyzine hcl SOLN 50 MG/ML ..8	indomethacin CAPS 25 MG, 50 MG 4
hydrocortisone (topical) CREA 1 %, 2.5 %40	hydroxyzine hcl SYRP8	indomethacin CPCR4
hydrocortisone (topical) LOTN 2.5 % . 40	hydroxyzine hcl TABS8	INFANRIX60
hydrocortisone (topical) OINT 1 %, 2.5 %40	hydroxyzine pamoate CAPS8	INFLECTRA SOLR45
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hydrocortisone butyrate OINT40	ibandronate sodium SOLN43	INSULIN ASPART PROT & ASPART SUSP16
hydrocortisone butyrate SOLN40	ibandronate sodium TABS43	INSULIN GLARGINE-YFGN SOLN 16
hydrocortisone sod succinate 100 MG35	IBRANCE CAPS25	INSULIN GLARGINE-YFGN SOPN 16
hydrocortisone TABS35	IBRANCE TABS25	INSULIN LISPRO (1 UNIT DIAL) SOPN16
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hydroxychloroquine sulfate 200 MG 22	imatinib mesylate TABS25	irbesartan19
	imipramine hcl TABS14	irbesartan-hydrochlorothiazide ...20
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isoniazid SYRP	22	KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (potassium chloride in dextrose & sodium chloride)	52	KISQALI (600 MG DOSE)	25
isoniazid TABS	22	KCL-LACTATED RINGERS-D5W ..	52	KISQALI FEMARA (200 MG DOSE) .	25
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ivermectin	8	KEVZARA SOAJ	4	labetalol hcl TABS 300 MG	31
IXEMPRA KIT 15 MG	26	KEVZARA SOSY	4	lacosamide SOLN IV 200 MG/20ML .	12
JAKAFI	25	KIMONO COLORS DEVI	49	lacosamide TABS	12
JANUMET TABS	15	KIMONO MAXX-LARGE FLARE MISC	49	lactated ringer's (irrigation)	53
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lactulose SOLN48	LENVIMA (4 MG DAILY DOSE) ..23	levonorgestrel-eth estradiol (triphasic)33
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lamivudine TABS 150 MG29	leucovorin calcium SOLR26	levonorgestrel-ethinyl estradiol-iron 33
lamivudine TABS 300 MG29	leucovorin calcium TABS26	levorphanol tartrate TABS 2 MG6
lamivudine-zidovudine29	LEUKERAN23	levothyroxine sodium TABS60
lamotrigine CHEW 25 MG12	LEUKINE SOLR IJ47	LEXIVA SUSP29
lamotrigine CHEW 5 MG12	leuprolide acetate KIT IJ 1 MG/0.2ML24	lidocaine hcl (mouth-throat) 2 % ...53
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lansoprazole CPDR 15 MG61	levetiracetam TABS 250 MG, 750 MG12	lidocaine PTCH 5 %41
lansoprazole CPDR 30 MG61	levetiracetam TABS 500 MG12	lidocaine-prilocaine CREA41
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LASTACRAFT56	levocetirizine dihydrochloride SOLN 18	linezolid SUSR21
latanoprost SOLN56	levocetirizine dihydrochloride TABS 18	linezolid TABS21
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LENVIMA (12 MG DAILY DOSE) .23		
LENVIMA (14 MG DAILY DOSE) .23		

lisdexamfetamine dimesylate CHEW . 1	LOTEMAX OINT	56	meclizine hcl TABS 12.5 MG	17
lisinopril & hydrochlorothiazide	loteprednol etabonate GEL	56	meclizine hcl TABS 25 MG	17
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	loteprednol etabonate SUSP	56	meclofenamate sodium CAPS	4
lithium	lovastatin TABS 10 MG, 20 MG	19	MEDROL TABS	35
lithium carbonate CAPS	lovastatin TABS 40 MG	19	medroxyprogesterone acetate (contraceptive) SUSP IM	34
lithium carbonate TABS	loxapine succinate	28	medroxyprogesterone acetate (contraceptive) SUSY IM	34
lithium carbonate TBCR	lubiprostone	45	medroxyprogesterone acetate 10 MG	57
LO LOESTRIN FE TABS	luliconazole	37	medroxyprogesterone acetate 2.5 MG, 5 MG	58
lofexidine hcl	LUMAKRAS 120 MG, 240 MG	25	mefenamic acid CAPS	4
LOKELMA	LUMAKRAS 320 MG	25	mefloquine hcl	22
loperamide hcl CAPS	LUPRON DEPOT (1-MONTH) KIT IM	24	megestrol acetate (appetite)	58
lopinavir-ritonavir SOLN	LUPRON DEPOT (3-MONTH) KIT IM	24	megestrol acetate SUSP	24
lopinavir-ritonavir TABS	LUPRON DEPOT (4-MONTH) IM	24	megestrol acetate TABS	24
LOQTORZI	LUPRON DEPOT (6-MONTH) IM	24	MEKINIST SOLR	25
loratadine CAPS	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	27	MEKINIST TABS 0.5 MG	25
loratadine CHEW	lurasidone hcl 80 MG	27	MEKINIST TABS 2 MG	25
loratadine SOLN	LYNPARZA TABS	25	meloxicam TABS	4
loratadine TABS	LYSODREN	24	melphalan	23
loratadine TBDP	mafenide acetate PACK	38	melphalan hcl IV	23
lorazepam CONC	malathion	41	memantine hcl TABS	58
lorazepam TABS 0.5 MG, 2 MG	maraviroc TABS 150 MG	29	MENACTRA	61
lorazepam TABS 1 MG	maraviroc TABS 300 MG	29	MENEST 2.5 MG	44
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losartan potassium	MAXIDEX SUSP OP	56	MENVEO SOLR	61
	MAXX MISC	49	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	6
	MAXX PLUS MISC	49		

meperidine hcl SOLN PO 50 MG/5ML	6	methimazole TABS	60	54 MG	2
meperidine hcl TABS 50 MG	6	methocarbamol TABS 500 MG, 750 MG	54	methylphenidate PTCH	2
meprobamate	8	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	23	methylprednisolone acetate SUSP	35
mercaptopurine TABS	23	methotrexate sodium SOLR	23	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	35
mesalamine CP24	45	methotrexate sodium TABS 2.5 MG 23		methylprednisolone TABS	35
mesalamine CPDR	45	methoxsalen rapid	38	methylprednisolone TBPk	35
mesalamine ENEM	45	methscopolamine bromide	60	methyltestosterone TABS	8
mesalamine SUPP	45	methsuximide	13	metoclopramide hcl SOLN IJ 5 MG/ML	45
mesalamine TBEC 1.2 GM	45	methylidopa TABS	20	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	45
mesalamine TBEC 800 MG	45	methylphenidate hcl CHEW 10 MG	1	metoclopramide hcl TABS	45
metaxalone 800 MG	54	methylphenidate hcl CHEW 2.5 MG	1	metolazone	42
metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 5 MG	1	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	20
metformin hcl TABS 500 MG	15	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG	1	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	20
metformin hcl TABS 850 MG	15	methylphenidate hcl CP24 30 MG	1	metoprolol succinate TB24 200 MG 31	
metformin hcl TB24 500 MG	15	methylphenidate hcl CP24	1	metoprolol succinate TB24 25 MG, 50 MG, 100 MG	31
metformin hcl TB24 750 MG	15	methylphenidate hcl CPCR	2	metoprolol tartrate SOLN IV 5 MG/5ML	31
methadone hcl CONC	6	methylphenidate hcl SOLN	2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	31
METHADONE HCL SOLN IJ (methadone hcl)	6	methylphenidate hcl TABS 10 MG, 20 MG	2	metronidazole (topical) CREA	41
methadone hcl SOLN IJ 10 MG/ML	6	methylphenidate hcl TABS 5 MG	2	metronidazole (topical) GEL 0.75 % 41	
methadone hcl SOLN PO 10 MG/5ML	6	methylphenidate hcl TB24 18 MG, 27 MG	2	metronidazole (topical) GEL 1 %	41
methadone hcl SOLN PO 5 MG/5ML 6		methylphenidate hcl TB24 36 MG, 54 MG	2	metronidazole (topical) LOTN	41
methadone hcl TABS 10 MG	6	methylphenidate hcl TBCR 10 MG, 20 MG	2	metronidazole TABS 250 MG, 500 MG	21
methadone hcl TABS 5 MG	6	methylphenidate hcl TBCR 18 MG, 27 MG	2		
methadone hcl TBSO	6	methylphenidate hcl TBCR 36 MG,			
methamphetamine hcl	1				
methazolamide TABS	42				
methenamine hippurate	21				

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mexiletine hcl	9	moexipril hcl	19	mycophenolate mofetil TABS	53
miconazole nitrate vaginal SUPP 200 MG	64	mometasone furoate (nasal) SUSP 55		mycophenolate sodium	53
midodrine hcl	64	mometasone furoate CREA	40	MYLERAN TABS	23
miglitol	14	mometasone furoate OINT	40	nabumetone	4
miglustat	47	mometasone furoate SOLN	40	nadolol TABS 20 MG	31
minocycline hcl CAPS	60	montelukast sodium CHEW	9	nadolol TABS 40 MG	31
minocycline hcl TABS	60	montelukast sodium PACK	9	nadolol TABS 80 MG	31
minoxidil 2.5 MG, 10 MG	21	montelukast sodium TABS	9	nafcillin sodium IV 10 GM	57
mirabegron TB24	61	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	6	naftifine hcl CREA 1 %	37
MIRCERA	47	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	6	naftifine hcl CREA 2 %	37
MIRENA (52 MG)	34	morphine sulfate SOLN PO 10 MG/5ML	6	naloxone hcl LIQD	17
mirtazapine TABS	13	morphine sulfate SOLN PO 20 MG/5ML	6	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	17
mirtazapine TBDP	13	morphine sulfate TABS	6	naltrexone hcl	17
misoprostol	61	morphine sulfate TBCR	6	naproxen sodium TABS 550 MG ...	4
mitomycin SOLR IV 20 MG	25	MOTOFEN	16	naproxen SUSP	4
mitoxantrone hcl 25 MG/12.5ML ..	25	MOVANTIK	45	naproxen TABS	4
MIUDELLA INTRAUTERINE COPPER	34	moxifloxacin hcl (ophth) SOLN OP	55	naproxen TBEC 500 MG	4
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MNEXSPIKE SUSY 10 MCG/0.2ML . 63		MRESVIA	63	NATAZIA	33
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modafinil 200 MG	2	mupirocin OINT	36	NAYZILAM	12
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				nelarabine	23
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neomycin-polymy-dexameth OINT 56	niacinamide TABS 500 MG64	nitroglycerin SUBL 8
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NEONATAL PRENATAL TABS54	NICOTROL NS SOLN 59	norethin acet & estrad-fe CHEW .. 34
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NORVIR CAPS	29	octreotide acetate SOLN	44	MG/5ML	17
NORVIR PACK	29	ODEFSEY	29	ondansetron hcl SOSY	17
NOVA MAX PLUS KETONE TEST		ODOMZO	24	ondansetron hcl TABS 24 MG	17
41		OFEV	59	ondansetron hcl TABS 4 MG	17
NOVAREL IM 10000 UNIT	43	ofloxacin (ophth)	56	ondansetron hcl TABS 8 MG	17
NOVAVAX COVID-19 VACCINE		ofloxacin (otic)	57	ondansetron TBDP 4 MG	17
SUSP	63	ofloxacin 300 MG, 400 MG	44	ondansetron TBDP 8 MG	17
NOVAVAX COVID-19 VACCINE		OGIVRI	24	ONE VITE WOMENS PLUS TABS	
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NOVOLIN 70/30 FLEXPEN SUPN	16	olanzapine TABS 2.5 MG, 5 MG ..	28	ONE VITE WOMENS TABS	54
NOVOLIN 70/30 SUSP	16	olanzapine TABS 7.5 MG, 10 MG, 15		ONETOUCH DELICA SAFETY	
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NOVOLIN N SUSP	16	olanzapine TBDP 20 MG	28	OPILL	34
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NOVOLOG PENFILL SOCT	16	olmesartan medoxomil-amlodipine-		ORKAMBI PACK	59
NOVOLOG SOLN IJ	16	hydrochlorothiazide	20	ORKAMBI TABS	59
NP THYROID TABS	60	olmesartan medoxomil-		ORLADEYO	46
NUBEQA	24	hydrochlorothiazide	20	orphenadrine citrate TB12	54
NUDEXTA	59	olopatadine hcl (nasal)	55	oseltamivir phosphate CAPS	30
NUVAXOVID COVID-19 VACCINE		olopatadine hcl 0.1 %	56	oseltamivir phosphate SUSR	30
SUSY 5 MCG/0.5ML	63	olopatadine hcl 0.2 %	56	OSPHERA	43
nystatin (mouth-throat)	53	omega-3-acid ethyl esters	18	OTEZLA TABS	5
nystatin (topical) CREA	37	omeprazole CPDR	61	OTEZLA TBPK	5
nystatin (topical) OINT	37	omeprazole magnesium CPDR ...	61	OTREXUP SOAJ 10 MG/0.4ML, 12.5	
nystatin (topical) POWD EX	37	omeprazole TBEC	61	MG/0.4ML, 15 MG/0.4ML, 17.5	
nystatin TABS	17	omeprazole-sodium bicarbonate		MG/0.4ML, 20 MG/0.4ML, 22.5	
		CAPS 1100 MG-20 MG	61		

MG/0.4ML, 25 MG/0.4ML	2	MG/25ML	26	pemetrexed disodium SOLR 500 MG	23
oxacillin sodium IV 10 GM	57	paclitaxel protein-bound particles	26	PENBRAYA	61
oxaliplatin SOLN 50 MG/10ML, 100		paliperidone	28	penciclovir	38
MG/20ML	23	palonosetron hcl SOLN	17	penicillamine CAPS	52
oxaprozin TABS	5	pamidronate disodium SOLN 30		penicillamine TABS	52
oxazepam CAPS	9	MG/10ML, 90 MG/10ML	43	PENICILLIN G POT IN DEXTROSE	
oxcarbazepine SUSP	12	PAMIDRONATE DISODIUM SOLN	43	40000 UNIT/ML, 60000 UNIT/ML ..	57
oxcarbazepine TABS 150 MG, 300		PANRETIN	37	penicillin g potassium 5000000 UNIT	57
MG	12	pantoprazole sodium TBEC 20 MG	61	penicillin g sodium	57
oxcarbazepine TABS 600 MG	12	61		penicillin v potassium SOLR	57
oxiconazole nitrate CREA	37	pantoprazole sodium TBEC 40 MG	61	penicillin v potassium TABS	57
OXISTAT LOTN	37	61		PENTACEL	60
oxybutynin chloride SOLN	61	PARAGARD INTRAUTERINE		pentamidine isethionate IN	21
oxybutynin chloride TABS 5 MG	61	COPPER	34	pentazocine w/ naloxone hcl	7
oxybutynin chloride TB24	61	paricalcitol CAPS	43	pentoxifylline	46
oxycodone hcl T12A 10 MG, 20 MG,		paricalcitol SOLN	43	perampanel TABS 2 MG	11
40 MG, 80 MG	6	paroxetine hcl SUSP	14	perampanel TABS 4 MG	11
oxycodone hcl TABS	6	paroxetine hcl TABS	14	perampanel TABS 6 MG	11
oxycodone w/ acetaminophen TABS		paroxetine hcl TB24	14	perampanel TABS 8 MG, 10 MG, 12	
325 MG-10 MG, 325 MG-5 MG, 325		pazopanib hcl	25	MG	11
MG-7.5 MG	7	PEDIARIX SUSY	60	perindopril erbumine 2 MG, 8 MG ..	19
oxycodone w/ acetaminophen TABS		pediatric multivitamins w/fl CHEW	53	perindopril erbumine 4 MG	19
325 MG-2.5 MG	7	PEDVAX HIB SUSP	61	permethrin CREA	41
oxymorphone hcl TABS	6	peg 3350-kcl-nacl-na sulfate-na		permethrin LIQD EX	41
oxymorphone hcl TB12 40 MG	6	ascorbate-ascorbic acid	48	perphenazine TABS	28
oxymorphone hcl TB12 5 MG, 7.5		peg 3350-kcl-sod bicarb-sod		perphenazine-amitriptyline	58
MG, 10 MG, 15 MG, 20 MG, 30 MG	6	chloride-sod sulfate SOLR 236 GM	48	PERSERIS PRSY	28
OZEMPIC (0.25 OR 0.5 MG/DOSE)		348		PFIZER COVID-19 VAC BIVALENT ..	63
SOPN	15	peg 3350-potassium chloride-sod		PFIZER COVID-19 VAC-TRIS 5-11Y	
OZEMPIC (1 MG/DOSE) SOPN 4		bicarbonate-sod chloride	48		
MG/3ML	15	PEGASYS SOLN	30		
OZEMPIC (2 MG/DOSE) SOPN	15	PEGASYS SOSY	30		
paclitaxel 100 MG/16.7ML, 150					

SUSP63	15	% , 5 %-20 MEQ/L-0.45 % , 5 %-20 MEQ/L-0.9 % , 5 %-30 MEQ/L-0.45 % , 5 %-40 MEQ/L-0.45 % , 5 %-40 MEQ/L-0.9 %52
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP63	PIQRAY (200 MG DAILY DOSE) .26	
	PIQRAY (250 MG DAILY DOSE) .26	
PFIZER-BIONT COVID-19 VAC-TRIS SUSP63	PIQRAY (300 MG DAILY DOSE) .26	potassium chloride in dextrose 20 MEQ/L52
PFIZER-BIONTECH COVID-19 VACC SUSP63	pirfenidone CAPS59	potassium chloride microencapsulated crystals er52
phenazopyridine hcl TABS 100 MG, 200 MG46	pirfenidone TABS 267 MG, 801 MG 59	
phendimetrazine tartrate TABS1	pirfenidone TABS 534 MG59	potassium chloride PACK PO 20 MEQ52
phenelzine sulfate13	piroxicam CAPS5	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 52
phenobarbital ELIX47	PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L52	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML52
phenobarbital TABS47	PLASMA-LYTE A (electrolyte-a) .52	potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ52
phenoxybenzamine hcl19	PLEGRIDY SOAJ58	potassium citrate (alkalinizer) TBCR .46
phentermine hcl CAPS1	PLEGRIDY SOSY SC58	potassium phosphates 45 MMOLE/15ML52
phenytoin CHEW13	PLEGRIDY STARTER PACK SOAJ .58	PR BENZOYL PEROXIDE WASH LIQD36
phenytoin sodium extended 100 MG, 200 MG, 300 MG13	PLEGRIDY STARTER PACK SOSY SC58	pralatrexate 20 MG/ML23
phenytoin sodium SOLN13	PNEUMOVAX 23 SOLN61	pramipexole dihydrochloride TABS 0.125 MG27
phenytoin SUSP13	PNEUMOVAX 23 SOSY61	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG27
PHEXXI64	podofilox SOLN41	prasugrel hcl46
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pimecrolimus41	potassium bicarbonate TBEF52	PRED MII D5
pimozide59	potassium chloride CPCR52	
pindolol TABS31	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 % , 5 %-0.15 %-0.9 % , 5 %-10 MEQ/L-0.45 % , 5 %-20 MEQ/L-0.2	
pioglitazone hcl16		
pioglitazone hcl-glimepiride15		
pioglitazone hcl-metformin hcl TABS .		

prednisolone acetate (ophth)56	PRENATAL TABS 54	PROGRAF PACK53
PREDNISOLONE SODIUM PHOSPHATE56	PRENATAL VITAMIN AND MINERAL TABS 54	PROGRAF SOLN53
prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML35	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG- 4000 UNIT-30 UNIT54	PROLASTIN-C SOLN59
prednisolone sodium phosphate TBDP35	PRENATAL/IRON TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG- 25 MG-4000 UNIT-30 UNIT54	PROLASTIN-C SOLR59
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prednisone TABS 1 MG, 5 MG 35	PREVNAR 20 61	promethazine hcl SUPP 50 MG ... 18
prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG35	PREZCOBIX29	promethazine hcl TABS18
prednisone TBPk35	PREZISTA SUSP29	propafenone hcl CP12 9
pregabalin (once-daily) 330 MG ...59	PREZISTA TABS 75 MG, 150 MG 29	propafenone hcl TABS9
pregabalin (once-daily) 82.5 MG, 165 MG 59	PRIFTIN22	proparacaine hcl56
pregabalin CAPS 225 MG, 300 MG 12	primaquine phosphate TABS22	propranolol hcl CP24 31
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 12	primidone 50 MG, 250 MG13	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML31
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PYZCHIVA 130 MG/26ML	45	RASUVO SOAJ 7.5 MG/0.15ML, 10		REXULTI	28
PYZCHIVA 45 MG/0.5ML	38	MG/0.2ML, 12.5 MG/0.25ML, 15		REZVOGLAR KWIKPEN	16
PYZCHIVA 90 MG/ML	38	MG/0.3ML, 17.5 MG/0.35ML, 20		ribavirin (hepatitis c) CAPS	30
PYZCHIVA SC 45 MG/0.5ML	38	MG/0.4ML, 22.5 MG/0.45ML, 25		ribavirin (hepatitis c) TABS 200 MG	
QC PRENATAL TABS	54	MG/0.5ML, 30 MG/0.6ML	2	30	
QUADRACEL SUSP	60	REALITY LATEX CONDOMS MISC .		RIDAURA	4
QUADRACEL SUSY	60	49		rifabutin	22
quetiapine fumarate TABS 25 MG, 50		REALITY LATEX/ULTRA		rifampin CAPS	22
MG, 100 MG, 200 MG, 300 MG, 400		TEXTURED DEVI	49	rifampin SOLR	22
MG	28	REALITY LATEX/ULTRA THIN DEVI		riluzole TABS	55
quetiapine fumarate TB24	28	49		rimantadine hydrochloride TABS ..	30
quinapril hcl 20 MG, 40 MG	19	REBIF REBIDOSE SOAJ	58	ringer's	52
quinapril hcl 5 MG, 10 MG	19	REBIF REBIDOSE TITRATION		ringer's irrigation	53
quinapril-hydrochlorothiazide 12.5		PACK SOAJ	58	RINVOQ LQ SOLN	2
MG-10 MG	20	REBIF SOSY	59	RINVOQ TB24	2
quinapril-hydrochlorothiazide 12.5		REBIF TITRATION PACK SOSY ..	59	risedronate sodium TABS 150 MG	43
MG-20 MG	20	RECOMBIVAX HB SUSP	63	risedronate sodium TABS 35 MG ..	43
quinapril-hydrochlorothiazide 25 MG-		RECOMBIVAX HB SUSY	63	risedronate sodium TABS 5 MG, 30	
20 MG	20	RELENZA DISKHALER	30	MG	43
quinidine sulfate TABS	9	RELION KETONE TEST STRP ...	41	risedronate sodium TBEC	43
quinine sulfate CAPS 324 MG	22	RELION LANCET DEVICES 30G .	50	risperidone microspheres	28
QUZYTIR SOLN IV	18	RELION LANCETS	50	risperidone SOLN	28
QVAR REDIHALER	10	RELION TRUE METRIX TEST		risperidone TABS	28
RA PRENATAL FORMULA TABS .	54	STRIPS STRP	41	risperidone TBDP	28
RA PRENATAL TABS	54	RENFLEXIS	45	ritonavir TABS	29
rabeprazole sodium TBEC	61	repaglinide 0.5 MG, 1 MG	16	rivaroxaban SUSR 1 MG/ML	11
raloxifene hcl	43	repaglinide 2 MG	16	rivaroxaban TABS 2.5 MG	11
ramelteon	48	REPATHA PUSHTRONEX SYSTEM		rivastigmine tartrate CAPS	58
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ranolazine TB12 1000 MG	8	REPATHA SOSY	19	rizatriptan benzoate TABS 5 MG ..	51
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roflumilast 9	selegiline hcl TABS 27	SIRTURO 22
romidepsin SOLR 26	selenium sulfide LOTN 2.5 % 38	SKYLA 34
ropinirole hydrochloride TABS 27	SELZENTRY SOLN 29	SKYRIZI PEN SOAJ 38
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG 27	SELZENTRY TABS 25 MG, 75 MG 29	SKYRIZI SOCT 45
ropinirole hydrochloride TB24 8 MG, 12 MG 27	SEMGLEE (YFGN) SOLN 16	SKYRIZI SOLN 45
rosuvastatin calcium TABS 19	SEMGLEE (YFGN) SOPN 16	SKYRIZI SOSY 38
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ROZLYTREK CAPS 26	sevelamer carbonate PACK 45	sodium acetate SOLN 51
RUBRACA 26	sevelamer carbonate TABS 45	sodium chloride (gu irrigant) 0.9 % 46
rufinamide SUSP 13	SHINGRIX 63	sodium chloride (inhalant) NEBU 7 % 35
rufinamide TABS 200 MG 13	SIGNIFOR 44	sodium citrate & citric acid 46
rufinamide TABS 400 MG 13	sildenafil citrate (pulmonary hypertension) SOLN 32	sodium fluoride CHEW 52
RUXIENCE 24	sildenafil citrate (pulmonary hypertension) SUSR 32	sodium phenylbutyrate POWD 43
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SANTYL OINT 40	silodosin 46	sodium polystyrene sulfonate SUSP CO 15 GM/60ML 53
SAVELLA TABS 58	silver sulfadiazine 38	sodium sulfate-potassium sulfate- magnesium sulfate 48
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saxagliptin hcl 15	SIMLANDI (1 SYRINGE) PSKT 3	solifenacin succinate TABS 61
saxagliptin-metformin hcl 1000 MG- 2.5 MG 15	SIMLANDI (2 PEN) AJKT 3	SOLQUA 15
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG 15	SIMLANDI (2 SYRINGE) PSKT 3	SOLU-CORTEF 250 MG 35
scopolamine 17	SIMPONI ARIA SOLN 3	SOLU-CORTEF 500 MG, 1000 MG
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35	STIOLTO RESPIMAT	10	sulindac TABS	5	
SOLU-MEDROL 2 GM	35	STIVARGA	26	sumatriptan	51
sorafenib tosylate	26	streptomycin sulfate SOLR	2	sumatriptan succinate SOAJ	51
SORBITOL 3 %	46	STRIBILD	29	sumatriptan succinate SOCT	51
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	46	STRIVERDI RESPIMAT	10	sumatriptan succinate SOLN 6 MG/0.5ML	51
sotalol hcl (afib/afib)	31	SUBSYS LIQD 800 MCG	6	sumatriptan succinate TABS	51
sotalol hcl TABS 240 MG	31	sucralfate SUSP	60	sumatriptan-naproxen sodium	51
sotalol hcl TABS 80 MG, 120 MG, 160 MG	31	sucralfate TABS	60	sunitinib malate 12.5 MG, 25 MG, 50 MG	26
SOVALDI TABS 200 MG	30	sulconazole nitrate CREA	37	sunitinib malate 37.5 MG	26
SOVALDI TABS 400 MG	30	sulconazole nitrate SOLN	37	SUNOSI 150 MG	1
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	63	sulfacetamide sodium (acne)	36	SUNOSI 75 MG	1
SPIKEVAX SUSP	63	sulfacetamide sodium (ophth) SOLN 56		SYMTUZA	29
SPIKEVAX SUSY	63	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	36	SYNAREL	43
spinosad	41	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	36	SYNERA PTCH	41
SPIRIVA RESPIMAT AERS	9	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	36	SYNJARDY TABS	15
spironolactone & hydrochlorothiazide	42	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	36	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15
spironolactone TABS	42	sulfacetamide sod-prednisolone SOLN	56	SYNJARDY XR TB24 1000 MG-25 MG	15
SPRAVATO (56 MG DOSE)	14	sulfadiazine TABS	59	SYNRIBO	26
SPRAVATO (84 MG DOSE)	14	sulfamethoxazole-trimethoprim SOLN	21	SYNTHROID TABS (levothyroxine sodium)	60
stannous fluoride CONC	53	sulfamethoxazole-trimethoprim SUSP	21	TABLOID	23
STELARA 130 MG/26ML	45	sulfamethoxazole-trimethoprim TABS	21	tacrolimus (topical) OINT	41
STELARA SOLN 45 MG/0.5ML	38	SULFAMYLON CREA	39	tacrolimus CAPS	53
STELARA SOSY 45 MG/0.5ML	38	sulfasalazine TABS	45	tadalafil (pulmonary hypertension) TABS	32
STELARA SOSY 90 MG/ML	38	sulfasalazine TBEC	45	tadalafil 5 MG	32
STEQEYMA	45			TAFINLAR CAPS	26
STEQEYMA 45 MG/0.5ML	38				
STEQEYMA 90 MG/ML	38				

TAFINLAR TBSO	26	terbutaline sulfate SOLN	10	tinidazole	21
tafluprost	56	terbutaline sulfate TABS	10	tiotropium bromide monohydrate CAPS	9
TAGRISSO 40 MG	24	terconazole vaginal CREA	64	TIVICAY PD TBSO	30
TAGRISSO 80 MG	24	terconazole vaginal SUPP	64	TIVICAY TABS	30
TAKHZYRO SOLN	46	teriflunomide	59	tizanidine hcl CAPS	54
TAKHZYRO SOSY	46	teriparatide SOPN	43	tizanidine hcl TABS	54
TALZENNA	26	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	8	tobramycin (ophth) SOLN	56
tamoxifen citrate TABS	24	testosterone cypionate SOLN IM ...	8	tobramycin NEBU	2
tamsulosin hcl	46	testosterone enanthate SOLN IM ...	8	tobramycin-dexamethasone SUSP 56	
tavorole	37	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	60	TODAY SPONGE MISC	64
tazarotene CREA 0.1 %	38	tetrabenazine	58	tolcapone	27
TAZVERIK	26	tetracycline hcl CAPS	60	tolmetin sodium CAPS	5
TDVAX SUSP	60	THALOMID	52	tolmetin sodium TABS 600 MG	5
TEFLARO	33	theophylline ELIX	10	TOLSURA CAPS	18
TEGRETOL SUSP (carbamazepine) . 13		theophylline SOLN	10	tolterodine tartrate CP24	61
TEGRETOL TABS (carbamazepine) . 13		theophylline TB12	10	tolterodine tartrate TABS	61
telmisartan	19	theophylline TB24	10	tolvaptan TABS	44
telmisartan-amlodipine	20	THERANATAL CORE NUTRITION TABS	54	topiramate CPSP 15 MG	13
telmisartan-hydrochlorothiazide ...	20	thioridazine hcl	28	topiramate CPSP 25 MG	13
temazepam 15 MG, 30 MG	47	thiotepa 15 MG	23	topiramate CS24	13
temazepam 7.5 MG, 22.5 MG	47	thiothixene	28	topiramate TABS 200 MG	13
TEMODAR SOLR	23	THYMOGLOBULIN	53	topiramate TABS 25 MG, 100 MG .	13
temozolomide CAPS	23	THYROGEN 0.9 MG	41	topiramate TABS 50 MG	13
temsirolimus	26	tiagabine hcl	13	topotecan hcl SOLN	27
TENIVAC INJ	60	ticagrelor 60 MG, 90 MG	46	topotecan hcl SOLR	27
tenofovir disoproxil fumarate TABS 30		timolol maleate (ophth) SOLG	55	toremifene citrate	24
terazosin hcl	20	timolol maleate (ophth) SOLN	55	torsemide TABS	42
terbinafine hcl TABS	17	timolol maleate TABS	31	TRACLEER TBSO 32 MG (bosentan)	32

tramadol hcl TABS 50 MG	6	tretinoin (chemotherapy)	26	trifluoperazine hcl TABS	28
tramadol hcl TB24	6	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	36	trifluridine	56
tramadol-acetaminophen	7	tretinoin GEL 0.01 %, 0.025 %	36	trihexyphenidyl hcl SOLN	27
trandolapril 1 MG, 2 MG	19	tretinoin microsphere 0.1 %	36	trihexyphenidyl hcl TABS	27
trandolapril 4 MG	19	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	23	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG .	15
trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	20	triamcinolone acetonide (mouth) ..	53	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15
trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	20	triamcinolone acetonide (nasal) AERO	55	TRIKAFTA TBPB	59
tranexamic acid SOLN 1000 MG/10ML	47	triamcinolone acetonide (topical) CREA 0.025 %	40	trimethobenzamide hcl CAPS	17
tranexamic acid TABS	47	triamcinolone acetonide (topical) CREA 0.1 %	40	trimethoprim TABS	21
tranylcypromine sulfate	13	triamcinolone acetonide (topical) CREA 0.5 %	40	trimipramine maleate CAPS	14
travoprost SOLN	57	triamcinolone acetonide (topical) LOTN 0.025 %	40	TRINTELLIX	14
TRAZIMERA	24	triamcinolone acetonide (topical) LOTN 0.1 %	40	TRIUMEQ PD TBSO	30
trazodone hcl TABS	14	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	40	TRIUMEQ TABS	30
TRELEGY ELLIPTA	10	triamcinolone acetonide (topical) OINT 0.5 %	40	TRIZIVIR	30
TRELSTAR MIXJECT	24	triamcinolone acetonide SUSP 40 MG/ML	35	TROJAN MAGNUM MISC	49
TREMFYA CROHNS INDUCTION SOAJ SC 200 MG/2ML	45	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	42	TROJAN ULTRA THIN MISC	49
TREMFYA ONE-PRESS SOAJ 100 MG/ML	38	triamterene & hydrochlorothiazide TABS	42	TROJAN ULTRA THIN/SPERMICIDAL MISC	49
TREMFYA PEN SOAJ 100 MG/ML 38	38	triazolam	47	TROJAN-ENZ LUBRICATED MISC 49	49
TREMFYA PEN SOAJ SC 200 MG/2ML	45	TRICARE TABS	54	TROJAN-ENZ/SPERMICIDAL MISC . 49	49
TREMFYA SOLN IV	45	trientine hcl 250 MG	52	tropicamide SOLN 0.5 %	55
TREMFYA SOSY 100 MG/ML	38			tropicamide SOLN 1 %	55
TREMFYA SOSY SC 200 MG/2ML 45	45			trospium chloride CP24	61
treprostinil SOLN IJ	32			trospium chloride TABS	61
TRESIBA FLEXTOUCH SOPN	16			TRUE COVER DEVI	49
TRESIBA SOLN	16			TRUE METRIX BLOOD GLUCOSE TEST STRP	41
				TRUE METRIX LEVEL 3 SOLN ...	50

TRULANCE	45	TYMLOS	43	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	12
TRULICITY	15	TYVASO REFILL KIT SOLN IN ...	32	VALTOCO 5 MG DOSE LIQD	12
TRUMENBA 0.5 ML	62	TYVASO SOLN IN	32	vancomycin hcl CAPS	21
TRUSTEX COLOR CONDOMS + LUBE MISC	49	TYVASO STARTER KIT SOLN IN	32	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	21
TRUSTEX LUB/RIBBED/STUDED MISC	49	UBRELVY 100 MG	50	VAQTA	63
TRUSTEX LUB/SPERMICIDE EX ST MISC	49	UBRELVY 50 MG	50	varenicline tartrate TABS	59
TRUSTEX LUB/SPERMICIDE XL MISC	49	UDENYCA ONBODY SOSY	47	varenicline tartrate TBPK	59
TRUSTEX LUBRICATED EX LARGE MISC	49	UDENYCA SOAJ	47	VARIVAX SUSR	64
TRUSTEX LUBRICATED EXTRA ST MISC	49	UDENYCA SOSY	47	VARUBI (180 MG DOSE) TBPK ...	17
TRUSTEX LUBRICATED MISC ...	49	umeclidinium-vilanterol	10	VAXELIS SUSP	60
TRUSTEX LUBRICATED/SPERMICIDE MISC 49		UPTRAVI TABS 200 MCG	32	VAXELIS SUSY	60
TRUSTEX NATURAL CONDOMS + LUBE MISC	49	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	32	VAXNEUVANCE	62
TRUSTEX RIA LUB/SPERMICIDE MISC	49	UPTRAVI TITRATION TBPK	32	VECAMEYL	20
TRUSTEX RIA LUBRICATED MISC . 49		ursodiol CAPS	45	VECTIBIX 100 MG/5ML	24
TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC	49	ursodiol TABS	45	VELPHORO	45
TRUXIMA	24	UVADEX	26	venlafaxine hcl CP24	14
TUKYSA	24	VABRINTY KIT SC 22.5 MG, 45 MG . 24		venlafaxine hcl TABS	14
TURALIO 125 MG	26	valacyclovir hcl 1 GM	30	venlafaxine hcl TB24	14
TWINRIX SUSY	63	valacyclovir hcl 500 MG	30	verapamil hcl CP24 100 MG, 200 MG, 300 MG	31
TWIRLA	34	valganciclovir hcl TABS	30	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	32
TYBLUME CHEW	34	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	13	verapamil hcl TABS	32
TYBOST	30	valproic acid CAPS	13	verapamil hcl TBCR	32
		valrubicin	25	VEREGEN	36
		valsartan TABS	19	VERZENIO	26
		valsartan-hydrochlorothiazide	20	vigabatrin PACK	13
		VALTOCO 10 MG DOSE LIQD	12	vigabatrin TABS	13
		VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	12	VIIBRYD STARTER PACK KIT	14

vilazodone hcl TABS	14	11	AJKT	4	
vincristine sulfate	26	XARELTO SUSR 1 MG/ML	zafirlukast	9	
vinorelbine tartrate 10 MG/ML	27	(rivaroxaban)	11	zaleplon 10 MG	48
VIRACEPT TABS 250 MG	30	XARELTO TABS 10 MG, 20 MG	11	zaleplon 5 MG	47
VIRACEPT TABS 625 MG	30	XARELTO TABS 15 MG	11	ZALTRAP 100 MG/4ML	23
VIREAD POWD	30	XELJANZ SOLN	2	ZANOSAR	23
VIREAD TABS 150 MG, 200 MG, 250 MG	30	XELJANZ TABS 10 MG	2	ZARONTIN CAPS (ethosuximide)	13
VISTOGARD	17	XELJANZ TABS 5 MG	2	ZARXIO	47
VITAMIN D2 TABS 400 UNIT	64	XELJANZ XR TB24	2	ZEJULA TABS 100 MG	26
VITATHELY WITH GINGER TABS 54		XEOMIN	55	ZEJULA TABS 200 MG, 300 MG	26
VITRAKVI CAPS	26	XHANCE EXHU	55	ZELBORAF	26
VITRAKVI SOLN	26	XIFAXAN 200 MG	21	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	42
VIZIMPRO	24	XIFAXAN 550 MG	21	ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	42
VORAXAZE	26	XOSPATA	26	zidovudine CAPS	30
voriconazole TABS	18	XTANDI CAPS	24	zidovudine SYRP	30
VOSEVI	30	XTANDI TABS 40 MG	25	zidovudine TABS	30
warfarin sodium TABS	11	XTANDI TABS 80 MG	25	zileuton TB12	9
water for irrigation, sterile	53	XULTOPHY	15	ziprasidone hcl	27
WESTAB PLUS TABS	54	YERVOY	24	ZIRABEV	23
WIDE-SEAL DIAPHRAGM 60	50	YESINTEK 130 MG/26ML	45	ZIRGAN GEL	56
WIDE-SEAL DIAPHRAGM 65	50	YESINTEK SOLN 45 MG/0.5ML	38	ZOLADEX 10.8 MG	25
WIDE-SEAL DIAPHRAGM 70	50	YESINTEK SOSY 45 MG/0.5ML	38	ZOLADEX 3.6 MG	25
WIDE-SEAL DIAPHRAGM 75	50	YESINTEK SOSY 90 MG/ML	38	zoledronic acid SOLN	43
WIDE-SEAL DIAPHRAGM 80	50	YONSA	25	ZOLINZA	26
WIDE-SEAL DIAPHRAGM 85	50	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	3		
WIDE-SEAL DIAPHRAGM 90	50	YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4		
WIDE-SEAL DIAPHRAGM 95	50	YUFLYMA (2 PEN) AJKT	4		
XALKORI CAPS	26	YUFLYMA (2 SYRINGE) PSKT	4		
XARELTO STARTER PACK TBP		YUFLYMA-CD/UC/HS STARTER			

zolmitriptan SOLN	51
zolmitriptan TABS	51
zolmitriptan TBDP	51
zolpidem tartrate TABS	48
zolpidem tartrate TBCR	48
zonisamide CAPS	13
ZONTIVITY	46
ZORBTIVE SC	43
ZYDELIG	26
ZYLET	56

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