



FROM



2026

Formulary

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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-dextroamphetamine CP24 5 MG, 10 MG</i>	1B	QL(1 EA daily)
<i>amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine CP24 15 MG</i>	1B	
<i>amphetamine-dextroamphetamine TABS 30 MG</i>	1B	QL(2 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>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 5 MG, 10 MG</i>	1B	QL(4 EA daily)
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<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		
<i>phendimetrazine tartrate TABS</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
<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 2.5 MG</i>	1B	QL(2 EA daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 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</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 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 PTCH</i>	1B	QL(1 EA daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 EA daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 EA daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK 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
Anti-TNF-alpha - Monoclonal Antibodies		
ADALIMUMAB-AATY (1 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-AATY (2 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-AATY (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADAZ SOAJ	4	QL(0.143 ML daily); PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.143 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-ADBM (2 PEN) AJKT	4	QL(0.143 EA 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-ADBM (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	SIMLANDI (1 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	QL(0.143 EA daily); PA	SIMLANDI (1 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4	QL(0.143 EA daily); PA	SIMLANDI (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	SIMLANDI (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); PA	SIMPONI ARIA SOLN	4	PA
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	YUFLYMA (1 PEN) AJKT	4	QL(0.143 EA daily); 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	YUFLYMA (2 PEN) AJKT	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	YUFLYMA (2 SYRINGE) PSKT	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	YUFLYMA-CD/UC/HS STARTER AJKT	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	Gold Compounds		
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	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	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	SP; PA
			ACTEMRA SOSY	4	SP; PA
			KEVZARA SOAJ	4	QL(0.082 ML daily); PA
			KEVZARA SOSY	4	QL(0.082 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
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 800 MG</i>	1B	
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<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)
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
<i>OTEZLA XR TB24 PO 75 MG</i>	4	QL(1 EA daily); PA
<i>OTEZLA/OTEZLA XR INITIATION PK TBPK</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
<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 25 MG/0.5ML</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOSY 50 MG/ML</i>	4	QL(0.286 ML daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 EA daily)	<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 EA daily)	<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B	
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 EA daily)	<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 EA daily)	<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 EA daily); PA
Salicylates			<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 EA daily); PA
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ML per fill retail)
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>aspirin TBEC 325 MG</i>	1A		<i>meperidine hcl TABS 50 MG</i>	1B	QL(6 EA daily)
<i>diflunisal TABS</i>	1B		<i>methadone hcl CONC</i>	1B	QL(10 ML daily)
<i>salsalate</i>	1B		<i>methadone hcl SOLN PO 5 MG/5ML</i>	1B	QL(100 ML daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
Opioid Agonists			<i>methadone hcl SOLN PO 10 MG/5ML</i>	1B	QL(50 ML daily)
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	METHADONE HCL SOLN IJ (methadone hcl)	1B	
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 EA daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 EA daily); PA	<i>methadone hcl TABS 5 MG</i>	1B	QL(4 EA daily)
<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>methadone hcl TBSO</i>	1B	QL(2 EA daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA			
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<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	<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ML daily)	<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ML 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 SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B		<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 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>morphine sulfate TBCR</i>	1B	QL(2 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 EA daily); PA	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>butalbital-aspirin-caffeine w/cod</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>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1B	New starts limited to 7 day supply
<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>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>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 EA daily); PA	<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>SUBSYS LIQD 800 MCG</i>	3	QL(8 EA daily); PA			
<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 EA daily)			
<i>tramadol hcl TB24</i>	1B	QL(1 EA daily)			
Opioid Combinations					
<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ML daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<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>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply	<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ML daily); PA
<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 EA daily)	<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA	<i>pentazocine w/ naloxone hcl</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)	SUBLOCADE SOSY 100 MG/0.5ML	3	QL(0.02 ML daily); 1 max fill(s) per 26 day(s) retail
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	SUBLOCADE SOSY 300 MG/1.5ML	3	QL(0.06 ML daily); 1 max fill(s) per 26 day(s) retail
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)	ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 1.4 MG-5.7 MG, 2.1 MG-8.6 MG, 2.9 MG-11.4 MG	3	QL(1 EA daily)
Opioid Partial Agonists			ZUBSOLV SUBL 0.71 MG-2.9 MG	3	QL(3 EA daily)
BRIXADI (WEEKLY) SOSY	3		ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	3		Androgens		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 EA daily)	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 EA daily); PA
<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>danazol CAPS</i>	1B	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 EA daily)	<i>methyltestosterone TABS</i>	1B	
<i>buprenorphine hcl SOLN</i>	1B		<i>testosterone cypionate SOLN IM</i>	1B	
<i>buprenorphine hcl SUBL</i>	1B	QL(3 EA daily)	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

Drug Name	Drug Tier	Requirements/ Limits
<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
<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	

Drug Name	Drug Tier	Requirements/ Limits
<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	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>buspirone hcl 5 MG</i>	1A	
<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	
Benzodiazepines		
<i>alprazolam TABS 2 MG</i>	1B	QL(4 EA daily)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	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)

Drug Name	Drug Tier	Requirements/ Limits
<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	
<i>dofetilide</i>	1B	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ML daily); PA
FASENRA SOSY 10 MG/0.5ML	4	QL(0.018 ML daily); PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ML daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	C; QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	3	QL(0.44 GM daily)
INCRUSE ELLIPTA	2	C; QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>ipratropium bromide SOLN 0.02 %</i>	1B	C; QL(15 ML daily)
SPIRIVA RESPIMAT AERS IN	2	C; QL(0.14 GM daily)
<i>tiotropium bromide CAPS IN 18 MCG</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		
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>budesonide (inhalation) SUSP</i>	1B	C; QL(4 ML daily); PA
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>fluticasone propionate (inhalation) AEPB</i>	1B	C
<i>fluticasone propionate hfa</i>	1B	C; QL(0.8 GM daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PULMICORT FLEXHALER AEPB	2	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>fluticasone furoate-vilanterol</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
QVAR REDHALER	2	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
Sympathomimetics			<i>fluticasone-salmeterol AERO</i>	1B	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>albuterol sulfate AERS</i>	1B	C	<i>formoterol fumarate NEBU</i>	1B	C; QL(4 ML daily)
<i>albuterol sulfate NEBU</i>	1B	C; QL(15 ML daily)	<i>ipratropium-albuterol SOLN</i>	1B	C; QL(18 ML daily)
<i>albuterol sulfate NEBU</i>	1B	C	<i>levalbuterol hcl</i>	1B	C; QL(12 ML daily)
<i>albuterol sulfate SYRP</i>	1B	C	<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B	C
<i>albuterol sulfate TABS</i>	1B	C	<i>levalbuterol tartrate</i>	1B	C; QL(0.5 GM daily)
<i>arformoterol tartrate</i>	1B	C; QL(4 ML daily)	SEREVENT DISKUS	2	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	2	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	STIOLTO RESPIMAT	2	C; 1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	STRIVERDI RESPIMAT	2	C
BREZTRI AEROSPHERE	2	C; QL(0.38 GM daily)	<i>terbutaline sulfate SOLN</i>	1B	C
<i>budesonide-formoterol fumarate dihydrate</i>	1B	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail	<i>terbutaline sulfate TABS</i>	1B	C
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)	TRELEGY ELLIPTA	2	C; QL(2 EA daily)
DULERA	2	C	<i>umeclidinium-vilanterol</i>	2	C; QL(2 EA daily)
			Xanthines		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>theophylline ELIX</i>	1B		<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily; 30 Day(s) limit); SP
<i>theophylline SOLN</i>	1B	C; QL(56 ML daily)	<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>theophylline TB12</i>	1B	C	<i>fondaparinux sodium 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML</i>	4	SP
<i>theophylline TB24</i>	1B	C	FRAGMIN SOSY	4	SP; PA
ANTICOAGULANTS - Blood Thinners			HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1B	
Coumarin Anticoagulants			<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
<i>warfarin sodium TABS</i>	1A		Thrombin Inhibitors		
Direct Factor Xa Inhibitors			<i>dabigatran etexilate mesylate CAPS</i>	1B	
ELIQUIS DVT/PE STARTER PACK TBPB	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail	ANTICONVULSANTS - Drugs to Treat Seizures		
ELIQUIS TABS	2	QL(2 EA daily)	AMPA Glutamate Receptor Antagonists		
<i>rivaroxaban SUSR 1 MG/ML</i>	1B	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1B	QL(1 EA daily); PA
<i>rivaroxaban TABS 2.5 MG</i>	1B	QL(2 EA daily)	<i>perampanel TABS 4 MG</i>	1B	QL(3 EA daily); PA
XARELTO STARTER PACK TBPB	2	1 max fill(s) per 365 day(s) retail	<i>perampanel TABS 6 MG</i>	1B	QL(2 EA daily); PA
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>perampanel TABS 2 MG</i>	1B	QL(6 EA daily); PA
XARELTO TABS 15 MG	2	QL(2 EA daily)	Anticonvulsants - Benzodiazepines		
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)	<i>clobazam SUSP</i>	1B	QL(16 ML daily); PA
Heparins And Heparinoid-Like Agents			<i>clobazam TABS</i>	1B	QL(2 EA daily); PA
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily)	<i>clonazepam TABS</i>	1A	
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily)	<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily)			
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily; 30 Day(s) limit); SP			
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA	<i>eslicarbazepine acetate</i> 200 MG, 400 MG, 600 MG, 800 MG	1B	QL(2 EA daily); ST
VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin CAPS</i>	1B	
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin SOLN</i>	1B	QL(60 ML daily)
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ML daily)
Anticonvulsants - Misc.			<i>lacosamide TABS</i>	1B	QL(2 EA daily)
BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 EA daily); PA	<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 EA daily)
BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 EA daily); PA	<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 EA daily)
BRIVIACT SOLN PO 10 MG/ML	3	QL(20 ML daily); PA	<i>lamotrigine TABS</i>	1B	
<i>carbamazepine CHEW 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 CP12 100 MG</i>	1B		<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 EA daily)
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 EA daily)	<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 EA daily)
<i>carbamazepine SUSP</i>	1B		<i>levetiracetam TABS 500 MG</i>	1B	QL(6 EA daily)
<i>carbamazepine TABS</i>	1B		<i>levetiracetam TB24</i>	1B	QL(4 EA daily)
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 EA daily)	<i>oxcarbazepine SUSP</i>	1B	QL(40 ML daily)
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 EA daily)	<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 EA daily)
DIACOMIT CAPS 250 MG	4	QL(12 EA daily); PA	<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 EA daily)
DIACOMIT CAPS 500 MG	4	QL(6 EA daily); PA	<i>pregabalin CAPS 225 MG, 300 MG</i>	1B	QL(2 EA daily); ST
DIACOMIT PACK 250 MG	4	QL(12 EA daily); PA	<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	1B	QL(3 EA daily); ST
DIACOMIT PACK 500 MG	4	QL(6 EA daily); PA	<i>pregabalin SOLN</i>	1B	QL(30 ML daily); ST
EPIDIOLEX	3	PA	<i>primidone 50 MG, 250 MG</i>	1B	
			<i>rufinamide SUSP</i>	1B	QL(80 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<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 25 MG</i>	1B	QL(8 EA daily)
<i>topiramate CPSP 15 MG</i>	1B	QL(6 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 600 MG</i>	1B	QL(6 EA daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 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 (<i>phenytoin sodium extended</i>)	2	
DILANTIN	2	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>phenytoin</i>)	2	
DILANTIN SUSP (<i>phenytoin</i>)	2	
<i>fosphenytoin sodium</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<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		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SPRAVATO (56 MG DOSE)	4	PA	FETZIMA CP24	3	QL(1 EA daily); PA
SPRAVATO (84 MG DOSE)	4	PA	<i>venlafaxine hcl</i> CP24	1B	D+/C
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>venlafaxine hcl</i> TABS	1B	D/C
<i>citalopram hydrobromide</i> SOLN	1A		<i>venlafaxine hcl</i> TB24	1B	
<i>citalopram hydrobromide</i> TABS	1A	D/C	Tricyclic Agents		
<i>escitalopram oxalate</i> SOLN	1B		<i>amitriptyline hcl</i> TABS	1A	D/C
<i>escitalopram oxalate</i> TABS	1B	D+/C	<i>amoxapine</i>	1B	
<i>fluoxetine hcl</i> CAPS	1A	D/C	<i>clomipramine hcl</i>	1B	
<i>fluoxetine hcl</i> CPDR	1A		<i>desipramine hcl</i> TABS	1B	
<i>fluoxetine hcl</i> SOLN	1B		<i>doxepin hcl</i> CAPS	1B	
<i>fluoxetine hcl</i> TABS	1B		<i>doxepin hcl</i> CONC	1B	
<i>fluvoxamine maleate</i> TABS	1B	D+/C	<i>imipramine hcl</i> TABS	1B	D+/C
<i>paroxetine hcl</i> SUSP	1B		<i>imipramine pamoate</i>	1B	
<i>paroxetine hcl</i> TABS	1B	D/C	<i>nortriptyline hcl</i> CAPS	1B	
<i>paroxetine hcl</i> TB24	1B		<i>nortriptyline hcl</i> SOLN	1B	
<i>sertraline hcl</i> CONC	1B		<i>protriptyline hcl</i>	1B	
<i>sertraline hcl</i> TABS	1B	D/C	<i>trimipramine maleate</i> CAPS	1B	
Serotonin Modulators			ANTIDIABETICS - Drugs to Regulate Blood Sugar		
<i>nefazodone hcl</i>	1B		Alpha-Glucosidase Inhibitors		
<i>trazodone hcl</i> TABS	1B		<i>acarbose</i>	1B	QL(3 EA daily)
TRINTELLIX	3	QL(1 EA daily); PA	<i>miglitol</i>	1B	QL(3 EA daily)
VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail	Antidiabetic Combinations		
<i>vilazodone hcl</i> TABS	1B		<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>alogliptin-pioglitazone</i> 30 MG-12.5 MG	1B	QL(2 EA daily); PA
<i>desvenlafaxine succinate</i>	1B		<i>alogliptin-pioglitazone</i> 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG	1B	QL(1 EA daily); PA
<i>duloxetine hcl</i> CPEP	1B	D/C	<i>dapagliflozin propanediol-metformin hcl</i> 1000 MG-5 MG	2	QL(2 EA daily)
FETZIMA TITRATION C4PK	3	PA	<i>dapagliflozin propanediol-metformin hcl</i> 1000 MG-10 MG	2	QL(1 EA daily)
			<i>glipizide-metformin hcl</i> 500 MG-5 MG	1B	D+; QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	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)	XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(2 EA daily)
<i>glyburide-metformin</i> 250 MG-1.25 MG	1B	D+; QL(2 EA daily)	XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
<i>glyburide-metformin</i> 500 MG-2.5 MG, 500 MG-5 MG	1B	D+; QL(4 EA daily)	XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 EA daily)
GLYXAMBI	2	QL(1 EA daily)	XULTOPHY	2	QL(0.5 ML daily); PA
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 EA daily)	Biguanides		
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 EA daily)	<i>metformin hcl</i> TABS 850 MG	0	QL(3 EA daily)
JANUMET TABS	2	QL(2 EA daily)	<i>metformin hcl</i> TABS 1000 MG	1A	D+; QL(2.5 EA daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 EA daily)	<i>metformin hcl</i> TABS 500 MG	1A	D+; QL(5 EA daily)
<i>pioglitazone hcl-metformin hcl</i> TABS	1B	QL(2 EA daily)	<i>metformin hcl</i> TB24 500 MG	1B	D+; QL(4 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-5 MG, 500 MG-5 MG	1B	QL(1 EA daily)	<i>metformin hcl</i> TB24 750 MG	1B	D+; QL(3 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-2.5 MG	1B	QL(2 EA daily)	Diabetic Other		
SOLIQUA	2	QL(0.5 ML daily); PA	<i>diazoxide</i>	3	
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)	<i>glucagon SOLR IJ</i> 1 MG	1B	D+; QL(0.035 EA daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
SYNJARDY TABS	2	QL(2 EA daily)	<i>alogliptin benzoate</i> 25 MG	1B	
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)	<i>alogliptin benzoate</i> 12.5 MG	1B	QL(1 EA daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)	JANUVIA	2	QL(1 EA daily)
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	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(0.054 ML daily); PA
			OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
			OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA	NOVOLOG PENFILL SOCT	1B	D
RYBELSUS TABS	2	QL(1 EA daily); PA	NOVOLOG SOLN IJ	1B	D
TRULICITY	2	QL(0.143 ML daily); PA	REZVOGLAR KWIKPEN	3	PA
Insulin			SEMGLEE (YFGN) SOLN	2	D
APIDRA SOLOSTAR SOPN	3	PA	SEMGLEE (YFGN) SOPN	2	D
APIDRA SOLN	3	PA	TRESIBA FLEXTOUCH SOPN	2	D
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	D; QL(1.34 ML daily)	TRESIBA SOLN	2	D
HUMULIN R U-500 KWIKPEN SOPN SC	2	D; QL(1.34 ML daily)	Insulin Sensitizing Agents		
INSULIN ASP PROT & ASP FLEXPEN SUPN	1B	D	<i>pioglitazone hcl</i>	1B	D+; QL(1 EA daily)
INSULIN ASPART PROT & ASPART SUSP	1B	D	Meglitinide Analogues		
INSULIN GLARGINE-YFGN SOLN	2	D	<i>nateglinide</i>	1B	QL(3 EA daily)
INSULIN GLARGINE-YFGN SOPN	2	D	<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 EA daily)
INSULIN LISPRO (1 UNIT DIAL) SOPN	1B		<i>repaglinide 2 MG</i>	1B	QL(8 EA daily)
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1B		Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
INSULIN LISPRO PROT & LISPRO SUPN	1B		<i>dapagliflozin propanediol</i>	2	QL(1 EA daily)
INSULIN LISPRO SOLN IJ	1B	D	FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 EA daily)
NOVOLIN 70/30 FLEXPEN SUPN	2	D	JARDIANCE	2	QL(1 EA daily)
NOVOLIN 70/30 SUSP	2	D	Sulfonylureas		
NOVOLIN N FLEXPEN SUPN	2	D	<i>glimepiride 1 MG, 2 MG</i>	1A	D+; QL(4 EA daily)
NOVOLIN N SUSP	2	D	<i>glimepiride 4 MG</i>	1A	D+; QL(2 EA daily)
NOVOLIN R FLEXPEN SOPN IJ	2	D	<i>glipizide TABS 5 MG, 10 MG</i>	1A	D+; QL(4 EA daily)
NOVOLIN R SOLN IJ	2	D	<i>glipizide TB24</i>	1A	D+; QL(2 EA daily)
NOVOLOG FLEXPEN SOPN	1B	D	<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		

Drug Name	Drug Tier	Requirements/ Limits
<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
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
KLOXXADO LIQD	3	
<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	
OPVEE NA	3	
VIVITROL	3	1 max fill(s) per 30 day(s) retail
ZIMHI SOSY	3	
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)

Drug Name	Drug Tier	Requirements/ Limits
<i>ondansetron hcl SOLN IV 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 4 MG</i>	1B	QL(1 EA daily)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<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 80 MG</i>	1B	QL(0.134 EA daily)
<i>aprepitant CAPS</i>	1B	PA
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
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 SUSR</i>	1B	
<i>fluconazole TABS</i>	1B	
<i>itraconazole CAPS</i>	1B	QL(4 EA daily); PA
<i>itraconazole SOLN</i>	1B	QL(20 ML daily); PA
<i>ketoconazole</i>	1B	
<i>posaconazole SUSP</i>	3	QL(20 ML daily)
TOLSURA CAPS	4	PA
<i>voriconazole TABS</i>	1B	QL(4 EA daily)
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate SOLN</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B	
<i>clemastine fumarate SYRP</i>	1B	
<i>clemastine fumarate TABS 2.68 MG</i>	1B	
<i>diphenhydramine hcl CAPS 50 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1B	
Antihistamines - Non-Sedating		
<i>cetirizine hcl TABS</i>	1A	QL(1 EA daily)
<i>desloratadine TABS</i>	1B	QL(1 EA daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 EA daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ML daily); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 EA daily); RX/OTC
<i>loratadine CAPS</i>	1B	
<i>loratadine CHEW</i>	1B	
<i>loratadine SOLN</i>	1B	
<i>loratadine TABS</i>	1A	
<i>loratadine TBDP</i>	1B	
Antihistamines - Phenothiazines		
<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 EA daily)
<i>promethazine hcl TABS</i>	1B	
Antihistamines - Piperidines		
<i>ciproheptadine hcl SYRP</i>	1B	
<i>ciproheptadine hcl TABS</i>	1B	
ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 EA daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 EA daily); PA
<i>omega-3-acid ethyl esters</i>	1B	D+; QL(4 EA daily)
Bile Acid Sequestrants		

Drug Name	Drug Tier	Requirements/ Limits
<i>cholestyramine light PACK</i>	1B	QL(6 EA daily)
<i>cholestyramine light POWD</i>	1B	QL(24 GM daily)
<i>cholestyramine PACK</i>	1B	QL(6 EA daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 GM daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 EA daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 EA daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 GM daily)
<i>colestipol hcl PACK</i>	1B	QL(6 EA daily)
<i>colestipol hcl TABS</i>	1B	QL(16 EA daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	D+; QL(1 EA daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	D+; QL(1 EA daily)
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	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		

Drug Name	Drug Tier	Requirements/ Limits
<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		
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 4 MG</i>	1B	
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 EA daily)
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 EA daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>ramipril CAPS</i>	1B	D+
<i>trandolapril 4 MG</i>	1B	D+; QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	1B	D+; QL(1 EA daily)
Agents for Pheochromocytoma		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>phenoxybenzamine hcl</i>	3	PA	<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 EA daily)
Angiotensin II Receptor Antagonists			<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>candesartan cilexetil</i>	1B	QL(1 EA daily)	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 EA daily)
EDARBI	3	QL(1 EA daily); ST	<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>irbesartan</i>	1B	D+; QL(1 EA daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>losartan potassium</i>	1A	D+; QL(1 EA daily)	<i>irbesartan-hydrochlorothiazide</i>	1B	D+
<i>olmesartan medoxomil</i>	1B	D+; QL(1 EA daily)	<i>lisinopril & hydrochlorothiazide</i>	1A	D+
<i>telmisartan</i>	1B	QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1A	D+; QL(1 EA daily)
<i>valsartan TABS</i>	1B	D+; QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1A	D+; QL(2 EA daily)
Antiadrenergic Antihypertensives			<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>clonidine hcl TABS</i>	1A	D+; QL(8 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 EA daily)
<i>clonidine PTWK</i>	1B	QL(0.15 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>doxazosin mesylate</i>	1B		<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
<i>guanfacine hcl</i>	1B		<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 EA daily)
<i>methyldopa TABS</i>	1B	QL(6 EA daily)	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 EA daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 EA daily)
<i>terazosin hcl</i>	1B				
Antihypertensive Combinations					
<i>amlodipine besylate-benazepril hcl</i>	1B				
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST			
<i>amlodipine besylate-valsartan</i>	1B	QL(1 EA daily)			
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3				
<i>atenolol & chlorthalidone</i>	1B				
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B				
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
<i>telmisartan-amlodipine</i>	1B	QL(1 EA daily)
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
Antihypertensives - Misc.		
VECAMYL	3	PA
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	1B	QL(1 EA daily)
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

Drug Name	Drug Tier	Requirements/ Limits
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		
<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	

Drug Name	Drug Tier	Requirements/ Limits
<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		
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	
<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

Drug Name	Drug Tier	Requirements/ Limits
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 400 MG</i>	1B	QL(1 EA daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 EA daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 EA daily)
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)
<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		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>neostigmine methylsulfate SOSY</i>	3	PA	LEUKERAN	4	SP; PA
<i>pyridostigmine bromide SOLN PO</i>	1B		<i>melphalan</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B		<i>melphalan hcl IV</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B		MYLERAN TABS	4	SP; PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)			<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA
Antimycobacterial Agents			TEMODAR SOLR	4	SP; PA
<i>cycloserine</i>	1B	QL(4 EA daily)	<i>temozolomide CAPS</i>	4	SP; PA
<i>ethambutol hcl TABS</i>	1B		<i>thiotepa 15 MG</i>	4	SP; PA
<i>isoniazid SOLN</i>	1B		ZANOSAR	4	SP; PA
<i>isoniazid SYRP</i>	1B		Antimetabolites		
<i>isoniazid TABS</i>	1A		<i>azacitidine SUSR</i>	4	SP; PA
PRIFTIN	3		<i>capecitabine</i>	4	SP; PA
<i>pyrazinamide</i>	1B		<i>clofarabine</i>	4	SP; PA
<i>rifabutin</i>	1B	PA	<i>decitabine</i>	4	SP; PA
<i>rifampin CAPS</i>	1B		<i>floxuridine</i>	4	SP; PA
<i>rifampin SOLR</i>	1B		<i>fludarabine phosphate SOLN</i>	4	SP; PA
SIRTURO	3	PA	<i>fludarabine phosphate SOLR</i>	4	SP; PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
Alkylating Agents			<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
<i>busulfan SOLN</i>	4	SP; PA	<i>mercaptopurine TABS</i>	1B	
<i>carmustine</i>	4	SP; PA	<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA	<i>methotrexate sodium SOLR</i>	1B	SP
<i>cyclophosphamide CAPS</i>	1B	PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>cyclophosphamide SOLR IJ</i>	4	SP; PA	<i>nelarabine</i>	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA	<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
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	TABLOID	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
			Antineoplastic - Angiogenesis Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INLYTA	4	QL(2 EA daily); SP; PA	TAGRISSO 40 MG	4	QL(2 EA daily); PA
LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); PA	TAGRISSO 80 MG	4	QL(1 EA daily); PA
LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); PA	VECTIBIX 100 MG/5ML	4	SP; PA
LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); PA	VIZIMPRO	4	QL(1 EA daily); PA
LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); PA	Antineoplastic - Hedgehog Pathway Inhibitors		
LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); PA	DAURISMO	4	PA
LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); PA	ERIVEDGE	4	QL(1 EA daily); SP; PA
LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); PA	ODOMZO	4	QL(1 EA daily); PA
LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); PA	Antineoplastic - Hormonal and Related Agents		
MVASI	4	PA	<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA
ZALTRAP 100 MG/4ML	4	SP; PA	<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); SP; PA
ZIRABEV	4	PA	<i>anastrozole</i>	1B	QL(1 EA daily)
Antineoplastic - Antibodies			<i>bicalutamide</i>	1B	QL(1 EA daily); SP
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 240 MG	4	QL(1 EA daily); PA
YERVOY	4	SP; PA	ERLEADA 60 MG	4	QL(4 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); 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(0.0357 EA daily); SP; PA
<i>erlotinib hcl</i>	4	QL(1 EA daily); SP; PA			
<i>gefitinib</i>	4	QL(2 EA daily); PA			
GILOTRIF	4	QL(1 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA	<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA	<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA	<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA
LYSODREN	4	SP; PA	<i>valrubicin</i>	4	SP; PA
<i>megestrol acetate SUSP</i>	1B		Antineoplastic Combinations		
<i>megestrol acetate TABS</i>	1B		KISQALI FEMARA (200 MG DOSE)	4	QL(2 EA daily); PA
<i>nilutamide</i>	1B	QL(2 EA daily)	KISQALI FEMARA (400 MG DOSE)	4	QL(2.5 EA daily); PA
NUBEQA	4	QL(4 EA daily); PA	KISQALI FEMARA (600 MG DOSE)	4	QL(3.25 EA daily); PA
ORGOVYX	4	PA	Antineoplastic Enzyme Inhibitors		
<i>tamoxifen citrate TABS</i>	0		ALECENSA	4	QL(8 EA daily); PA
<i>tamoxifen citrate TABS</i>	0		<i>bortezomib SOLR IJ</i>	4	SP; PA
<i>toremifene citrate</i>	1B		BORTEZOMIB SOLR IV 3.5 MG	4	SP; PA
TRELSTAR MIXJECT	4	SP; PA	CABOMETYX TABS	4	QL(1 EA daily); PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	4	SP; PA	CAPRELSA	4	QL(1 EA daily); SP; PA
XTANDI CAPS	4	QL(4 EA daily); SP; PA	COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 EA daily); PA	COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); PA	COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA
YONSA	4	QL(4 EA daily); PA	<i>dasatinib</i>	4	QL(1 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA	<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA	IBRANCE CAPS	4	QL(1 EA daily); PA
Antineoplastic - Immunomodulators			IBRANCE TABS	4	QL(1 EA daily); PA
POMALYST	4	QL(1 EA daily); PA	ICLUSIG	4	QL(1 EA daily); PA
Antineoplastic Antibiotics			<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA	JAKAFI	4	QL(2 EA daily); SP; PA
<i>dactinomycin</i>	4	SP; PA			
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA			
<i>idarubicin hcl 20 MG/20ML</i>	4	PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KISQALI (200 MG DOSE)	4	QL(2 EA daily); PA	TAZVERIK	4	PA
KISQALI (400 MG DOSE)	4	QL(2 EA daily); PA	<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); PA	TURALIO 125 MG	4	PA
KYPROLIS	4	PA	VERZENIO	4	QL(2 EA daily); PA
<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA	VITRAKVI CAPS	4	PA
LORBRENA	4	QL(1 EA daily); PA	VITRAKVI SOLN	4	PA
LUMAKRAS 120 MG, 240 MG	3	QL(2 EA daily); PA	XALKORI CAPS	4	QL(2 EA daily); SP; PA
LUMAKRAS 320 MG	3	QL(3 EA daily); PA	XOSPATA	4	PA
LYNPARZA TABS	4	QL(4 EA daily); PA	ZEJULA TABS	4	QL(1 EA daily); PA
MEKINIST TABS 2 MG	4	QL(1 EA daily); PA	ZELBORAF	4	QL(8 EA daily); SP; PA
MEKINIST TABS 0.5 MG	4	QL(3 EA daily); PA	ZOLINZA	4	QL(4 EA daily); SP; PA
<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA	ZYDELIG	4	QL(2 EA daily); PA
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); PA	Antineoplastics Misc.		
PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); PA	ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); PA	<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>romidepsin SOLR</i>	4	SP; PA	<i>bexarotene</i>	4	SP; PA
ROZLYTREK CAPS	4	PA	<i>hydroxyurea</i>	1B	
RUBRACA	4	QL(4 EA daily); PA	MATULANE	4	SP; PA
<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA	NIPENT	4	SP; PA
STIVARGA	4	QL(4 EA daily); SP; PA	PHOTOFRIN	4	SP; PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 EA daily); SP; PA	PROLEUKIN	4	SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 EA daily); PA	SYNRIBO	4	SP; PA
TAFINLAR CAPS	4	QL(4 EA daily); PA	<i>tretinoin (chemotherapy)</i>	1B	
TALZENNA	4	QL(1 EA daily); PA	UVADEX	4	SP; PA
TALZENNA	4	QL(1 EA daily); 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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>eribulin mesylate</i>	4	SP; PA	<i>apomorphine hydrochloride SOCT</i>	4	PA
ETOPOPHOS	4	SP; PA	<i>bromocriptine mesylate CAPS</i>	1B	
<i>etoposide CAPS</i>	4	SP; PA	<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA	<i>carbidopa-levodopa-entacapone</i>	1B	
IXEMPRA KIT 15 MG	4	SP; PA	<i>carbidopa-levodopa TABS</i>	1B	
<i>paclitaxel 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA	<i>carbidopa-levodopa TBCR</i>	1B	
<i>paclitaxel protein-bound particles</i>	4	SP; PA	<i>carbidopa-levodopa TBDP</i>	1B	
<i>vincristine sulfate</i>	4	SP; PA	NEUPRO	2	
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA	<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 EA daily)
Topoisomerase I Inhibitors			<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
HYCANTIN CAPS	4	SP; PA	<i>ropinirole hydrochloride TABS</i>	1B	
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA	<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 EA daily); ST
<i>topotecan hcl SOLR</i>	4	SP; PA	<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 EA daily); ST
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			Antiparkinson Monoamine Oxidase Inhibitors		
Antiparkinson Adjunctive Therapy			<i>rasagiline mesylate</i>	1B	QL(1 EA daily); PA
<i>carbidopa</i>	1B		<i>selegiline hcl CAPS</i>	1B	
Antiparkinson Anticholinergics			<i>selegiline hcl TABS</i>	1B	
<i>benztropine mesylate TABS</i>	1B		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
<i>trihexyphenidyl hcl SOLN</i>	1B		Antimanic Agents		
<i>trihexyphenidyl hcl TABS</i>	1B		<i>lithium</i>	1B	
Antiparkinson COMT Inhibitors			<i>lithium carbonate CAPS</i>	1B	
<i>entacapone</i>	1B	QL(8 EA daily)	<i>lithium carbonate TABS</i>	1B	
<i>tolcapone</i>	1B		<i>lithium carbonate TBCR</i>	1B	
Antiparkinson Dopaminergics			Antipsychotics - Misc.		
<i>amantadine hcl CAPS</i>	1B				
<i>amantadine hcl SOLN</i>	1B				
<i>amantadine hcl TABS</i>	1B				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EQUETRO 200 MG	3	QL(8 EA daily); ST	<i>loxapine succinate</i>	1B	
EQUETRO 100 MG	3	QL(2 EA daily); ST	<i>olanzapine SOLR</i>	1B	QL(0.215 EA daily)
EQUETRO 300 MG	3	QL(4 EA daily); ST	<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 EA daily)
<i>lurasidone hcl 80 MG</i>	1B	QL(2 EA daily)	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 EA daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 EA daily)	<i>olanzapine TBDP 20 MG</i>	1B	QL(1 EA daily)
<i>ziprasidone hcl</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 EA daily)
Benzisoxazoles			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1B	AL(At least 10 yrs old)
FANAPT	2	QL(2 EA daily); PA	<i>quetiapine fumarate TB24</i>	1B	
FANAPT TITRATION PACK A	2	PA	Phenothiazines		
<i>paliperidone</i>	1B		<i>chlorpromazine hcl SOLN</i>	3	
PERSERIS PRSY	2	QL(0.072 EA daily); PA	<i>chlorpromazine hcl TABS</i>	1B	
<i>risperidone microspheres</i>	1B	QL(0.072 EA daily); PA	<i>fluphenazine hcl CONC</i>	1B	
<i>risperidone SOLN</i>	1B		<i>fluphenazine hcl ELIX</i>	1B	
<i>risperidone TABS</i>	1B		<i>fluphenazine hcl SOLN</i>	1B	
<i>risperidone TBDP</i>	1B		<i>fluphenazine hcl TABS</i>	1B	
Butyrophenones			<i>perphenazine TABS</i>	1B	
<i>haloperidol decanoate</i>	1B	QL(0.036 ML daily)	<i>prochlorperazine</i>	1B	
<i>haloperidol lactate CONC</i>	1B		<i>prochlorperazine maleate TABS</i>	1B	
<i>haloperidol lactate SOLN</i>	1B		<i>thioridazine hcl</i>	1B	
<i>haloperidol TABS</i>	1B		<i>trifluoperazine hcl TABS</i>	1B	
Dibenzapines			Quinolinone Derivatives		
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 EA daily); PA	<i>aripiprazole SOLN PO</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 EA daily); PA	<i>aripiprazole TABS</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>clozapine TABS</i>	1B		REXULTI	3	PA
<i>clozapine TBDP 25 MG</i>	1B	QL(3 EA daily)	Thioxanthenes		
<i>clozapine TBDP 100 MG</i>	1B	QL(9 EA daily)	<i>thiothixene</i>	1B	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 EA daily)	ANTIVIRALS - Drugs to Treat Viral Infections		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Antiretrovirals			<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 EA daily)
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ML daily)	EMTRIVA SOLN	3	QL(24 ML daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 EA daily)	<i>etravirine 100 MG</i>	1B	QL(4 EA daily)
APTIVUS CAPS	3	QL(4 EA daily)	<i>etravirine 200 MG</i>	1B	QL(2 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 EA daily)	EVOTAZ	3	QL(1 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 EA daily)	<i>fosamprenavir calcium TABS</i>	1B	QL(4 EA daily)
BIKTARVY	3	QL(1 EA daily)	FUZEON SOLR	4	SP; PA
CABENUVA	3		GENVOYA	3	QL(1 EA daily)
CIMDUO	3	QL(1 EA daily); ST	INTELENCE 25 MG	3	QL(8 EA daily)
COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)	ISENTRESS HD TABS	3	QL(2 EA daily)
<i>darunavir TABS 800 MG</i>	1B	QL(1 EA daily)	ISENTRESS CHEW	3	QL(6 EA daily)
<i>darunavir TABS 600 MG</i>	1B	QL(2 EA daily)	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	QL(1 EA daily)	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>nevirapine SUSP</i>	1B	QL(40 ML daily)
			<i>nevirapine TABS</i>	1B	QL(2 EA daily)
			<i>nevirapine TB24 400 MG</i>	1B	QL(1 EA daily)
			NORVIR CAPS	2	QL(12 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
NORVIR PACK	3	QL(12 EA daily)
ODEFSEY	3	QL(1 EA daily)
PIFELTRO	3	QL(1 EA daily)
PREZCOBIX	3	QL(1 EA daily)
PREZISTA SUSP	3	QL(12 ML daily)
PREZISTA TABS 75 MG, 150 MG	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	
<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 250 MG	3	QL(10 EA daily)
VIRACEPT TABS 625 MG	3	QL(4 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	

Drug Name	Drug Tier	Requirements/ Limits
<i>valganciclovir hcl TABS</i>	1B	QL(4 EA daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 EA daily); SP; PA
<i>entecavir TABS</i>	4	QL(1 EA daily); SP; PA
<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
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 125 MG, 250 MG</i>	1B	QL(3 EA daily)
<i>famciclovir 500 MG</i>	1B	QL(4 EA daily)
<i>valacyclovir hcl 1 GM</i>	1B	QL(4 EA daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>oseltamivir phosphate</i> SUSR	1B	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>nadolol</i> TABS 20 MG	1B	QL(3 EA daily)
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	<i>nadolol</i> TABS 40 MG	1B	QL(6 EA daily)
<i>rimantadine hydrochloride</i> TABS	1B	QL(2 EA daily)	<i>nadolol</i> TABS 80 MG	1B	
BETA BLOCKERS - Drugs to Treat High Blood Pressure			<i>pindolol</i> TABS	1B	
Alpha-Beta Blockers			<i>propranolol hcl</i> CP24	1B	QL(2 EA daily)
<i>carvedilol</i>	1A	D+	<i>propranolol hcl</i> SOLN PO 20 MG/5ML, 40 MG/5ML	1B	
<i>carvedilol phosphate</i>	3	QL(1 EA daily)	<i>propranolol hcl</i> TABS	1B	
<i>labetalol hcl</i> SOLN	1B		<i>sotalol hcl (afib/afl)</i>	1B	
<i>labetalol hcl</i> TABS 100 MG, 200 MG	1B	D+	<i>sotalol hcl</i> TABS 80 MG, 120 MG, 160 MG	1B	QL(2 EA daily)
<i>labetalol hcl</i> TABS 300 MG	1B	D+; QL(8 EA daily)	<i>sotalol hcl</i> TABS 240 MG	1B	
Beta Blockers Cardio-Selective			<i>timolol maleate</i> TABS	1B	
<i>acebutolol hcl</i> CAPS	1B		CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>atenolol</i> TABS	1A	D+	Calcium Channel Blockers		
<i>betaxolol hcl</i>	1B		<i>amlodipine besylate</i> TABS	1B	D+
<i>bisoprolol fumarate</i>	1B	D+	<i>diltiazem hcl coated beads</i> CP24 180 MG, 240 MG	1B	QL(2 EA daily)
<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	1B	D+	<i>diltiazem hcl coated beads</i> CP24 120 MG, 300 MG, 360 MG	1B	
<i>metoprolol succinate</i> TB24 200 MG	1B	D+; QL(2 EA daily)	<i>diltiazem hcl extended release beads</i> 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	1B	D+
<i>metoprolol tartrate</i> SOLN IV 5 MG/5ML	1B		<i>diltiazem hcl extended release beads</i> 420 MG	1B	
<i>metoprolol tartrate</i> TABS 25 MG, 50 MG, 100 MG	1A	D+	<i>diltiazem hcl</i> CP12	1B	QL(2 EA daily)
<i>nebivolol hcl</i> 20 MG	3	QL(2 EA daily)	<i>diltiazem hcl</i> CP24	1B	D+
<i>nebivolol hcl</i> 2.5 MG, 5 MG, 10 MG	3	QL(1 EA daily)	<i>diltiazem hcl</i> SOLN 50 MG/10ML	1B	
Beta Blockers Non-Selective			DILTIAZEM HCL SOLR	1B	
HEMANGEOL SOLN PO	4	QL(75 ML daily); PA	<i>diltiazem hcl</i> TABS	1B	D+
			<i>diltiazem hcl</i> TB24	1B	
			<i>felodipine</i>	1B	D+
			<i>isradipine</i> CAPS	1B	
			<i>nicardipine hcl</i> CAPS	1B	

Drug Name	Drug Tier	Requirements/ Limits
<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</i>	1B	
<i>nifedipine TB24 30 MG</i>	1B	D+
<i>nifedipine TB24 90 MG</i>	1B	D+; QL(1 EA daily)
<i>nifedipine TB24 60 MG</i>	1B	D+; QL(2 EA daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	
<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	
<i>LANOXIN SOLN IJ (digoxin)</i>	2	
<i>LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (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	
<i>sacubitril-valsartan TABS</i>	1B	QL(2 EA daily)

Impotence Agents

Drug Name	Drug Tier	Requirements/ Limits
<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
<i>ORENITRAM TBCR</i>	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
<i>TYVASO REFILL KIT SOLN IN</i>	4	PA
<i>TYVASO STARTER KIT SOLN IN</i>	4	PA
<i>TYVASO SOLN IN</i>	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
<i>TRACLEER TBSO 32 MG (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

Drug Name	Drug Tier	Requirements/ Limits
Agonist		
UPTRAVI TITRATION TBPK	4	1 max fill(s) per 180 day(s) retail; PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); PA
UPTRAVI TABS 200 MCG	4	PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	4	QL(3 EA daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl</i> TABS	3	QL(2 EA daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil</i> CAPS	1B	
<i>cefadroxil</i> SUSR	1B	
<i>cefadroxil</i> TABS	1B	
<i>cefazolin sodium</i> SOLR IJ 1 GM, 10 GM, 500 MG	1B	
<i>cephalexin</i> CAPS	1B	
<i>cephalexin</i> SUSR	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor</i> CAPS	1B	
<i>cefaclor</i> SUSR 250 MG/5ML	1B	
<i>cefotetan disodium</i> IJ 1 GM, 2 GM	1B	
<i>cefoxitin sodium</i> IV 1 GM, 2 GM	1B	
<i>cefprozil</i> SUSR	1B	
<i>cefprozil</i> TABS	1B	
<i>cefuroxime axetil</i> TABS	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>cefuroxime sodium</i> IJ 750 MG	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir</i> CAPS	1B	
<i>cefdinir</i> SUSR	1B	
<i>cefixime</i> CAPS	1B	
<i>cefixime</i> SUSR	1B	ST
<i>cefpodoxime proxetil</i> SUSR	1B	
<i>cefpodoxime proxetil</i> TABS	1B	
<i>ceftazidime</i> IJ 1 GM, 6 GM	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl</i> SOLR IV 2 GM	1B	
Cephalosporins - 5th Generation		
TEFLARO	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
AVERI TABS PO	0	
<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	
FEMLYV TBDP	0	
<i>levonorgestrel & eth estradiol</i> TABS	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0		ANNOVERA	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0		<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 EA daily)
<i>levonorgestrel-ethinyl estradiol-iron</i>	0		Emergency Contraceptives		
LO LOESTRIN FE TABS	0		ELLA	0	
NATAZIA	0		<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
NEXTSTELLIS	0		Progestin Contraceptives - Injectable		
<i>norethin acet & estrad-fe CAPS</i>	0		DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>norethin acet & estrad-fe CHEW</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ML per 90 day(s) retail)
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(1 ML per 90 day(s) retail)
<i>norethindrone & eth estradiol</i>	0		Progestin Contraceptives - Oral		
<i>norethindrone & ethinyl estradiol-fe</i>	0		<i>norethindrone (contraceptive)</i>	0	
<i>norethindrone acet & eth estra TABS</i>	0		OPILL	0	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0		SLYND	0	QL(1 EA daily)
<i>norethindrone-eth estradiol (triphasic)</i>	0		CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
<i>norgestimate-ethinyl estradiol</i>	0		Glucocorticosteroids		
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0		<i>budesonide CPEP</i>	1B	QL(3 EA daily)
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0		<i>deflazacort TABS</i>	4	PA
TYBLUME CHEW	0		DEPO-MEDROL SUSP	3	
Combination Contraceptives - Transdermal			DEXAMETHASONE INTENSOL CONC	1B	
<i>norelgestromin-ethinyl estradiol</i>	0		<i>dexamethasone ELIX</i>	1B	
TWIRLA	0	QL(3 EA per 28 day(s) retail)	<i>dexamethasone SOLN</i>	1B	
Combination Contraceptives - Vaginal			<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	
			<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

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone TABS</i>	1B	
<i>MEDROL TABS</i>	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	
<i>SOLU-CORTEF 500 MG, 1000 MG</i>	3	2 max fill(s) per 30 day(s) retail
<i>SOLU-CORTEF 250 MG</i>	3	
<i>SOLU-MEDROL 2 GM</i>	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		
<i>benzonatate 100 MG</i>	1B	QL(6 EA daily)
<i>benzonatate 200 MG</i>	1B	QL(3 EA daily)
<i>benzonatate 150 MG</i>	1B	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitartrate-homatropine methylbromide TABS</i>	3	PA
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B	
Misc. Respiratory Inhalants		
<i>HYPERSAL NEBU</i>	1B	
<i>NEBUSAL NEBU</i>	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
<i>BENZEPRO CREAMY WASH LIQD</i>	2	AL(At least 12 yrs old)
<i>BENZEPRO FOAM 5.3 %</i>	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 10 %</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>benzoyl peroxide LIQD 4 %</i> , 10 %	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, 20 MG, 30 MG, 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 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>tretinoin microsphere 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin CREA 0.025 %</i> , 0.05 %, 0.1 %	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>tretinoin GEL 0.01 %</i> , 0.025 %	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)
<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

Drug Name	Drug Tier	Requirements/ Limits
<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)
<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

Drug Name	Drug Tier	Requirements/ Limits
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		
<i>doxepin hcl (antipruritic)</i>	3	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
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 EA daily)
<i>acitretin 25 MG</i>	1B	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>calcipotriene CREA</i>	1B	QL(4 GM daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 GM daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ML daily); PA
<i>calcitriol (topical)</i>	1B	QL(3.34 GM daily)
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); PA
<i>methoxsalen rapid</i>	1B	QL(4 EA daily)
PYZCHIVA SC 45 MG/0.5ML	4	QL(0.012 ML daily); PA
PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); PA
PYZCHIVA 90 MG/ML	4	QL(0.018 ML daily); PA
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); PA
SKYRIZI SOSY	4	QL(0.025 ML daily); PA
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); PA
STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>tazarotene CREA 0.1 %</i>	1B	QL(1 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	4	QL(0.018 ML daily); PA
TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); PA
YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
Antiseborrheic Products		
<i>selenium sulfide LOTN 2.5 %</i>	1B	
Antivirals - Topical		
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<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)
SULFAMYLLON CREA	3	
Corticosteroids - Topical		
<i>alclometasone dipropionate CREA</i>	1B	QL(2 GM daily)
<i>alclometasone dipropionate OINT</i>	1B	QL(3 GM daily)
<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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 GM daily); PA
<i>amcinonide OINT</i>	3		<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ML daily); PA
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 GM daily)	<i>clocortolone pivalate</i>	3	QL(3 GM daily)
<i>betamethasone dipropionate (topical) LOTN</i>	1B		CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 GM daily)	<i>desonide CREA</i>	1B	QL(4 GM daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 GM daily)	<i>desonide LOTN</i>	1B	QL(4 ML daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ML daily)	<i>desonide OINT</i>	1B	QL(3 GM daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 GM daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 GM daily)	<i>desoximetasone GEL</i>	1B	QL(3 GM daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 GM daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ML daily)	<i>diflorasone diacetate CREA</i>	1B	PA
<i>betamethasone valerate OINT</i>	1B	QL(3 GM daily)	<i>diflorasone diacetate OINT</i>	1B	PA
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST	<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 GM daily)
<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST	<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 GM daily); PA	<i>fluocinolone acetonide OIL</i>	1B	QL(8 ML daily)
<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 GM daily); PA	<i>fluocinolone acetonide OINT</i>	1B	QL(4 GM daily)
<i>clobetasol propionate FOAM</i>	1B	QL(3 GM daily); ST	<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ML daily)
<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 GM daily); ST	<i>fluocinonide emulsified base</i>	1B	QL(2 GM daily)
			<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 GM daily)
			<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 GM daily)
			<i>fluocinonide GEL</i>	1B	
			<i>fluocinonide OINT</i>	1B	QL(2 GM daily)
			<i>fluocinonide SOLN</i>	1B	QL(2 ML daily)
			<i>flurandrenolide CREA</i>	2	QL(2 GM daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>flurandrenolide</i> LOTN	2	QL(2 ML daily)	<i>triamcinolone acetonide (topical)</i> LOTN 0.025 %	1B	
<i>fluticasone propionate</i> CREA 0.05 %	1B	QL(4 GM daily)	<i>triamcinolone acetonide (topical)</i> LOTN 0.1 %	1B	QL(6 ML daily)
<i>fluticasone propionate</i> LOTN	1B	QL(6 ML daily)	<i>triamcinolone acetonide (topical)</i> OINT 0.025 %, 0.1 %	1B	QL(15.15 GM daily)
<i>fluticasone propionate</i> OINT	1B	QL(4 GM daily)	<i>triamcinolone acetonide (topical)</i> OINT 0.5 %	1B	QL(6 GM daily)
<i>halcinonide</i> CREA	1B	PA	Eczema Agents		
<i>halobetasol propionate</i> CREA	1B	QL(3.5 GM daily)	DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); PA
<i>halobetasol propionate</i> OINT	1B	QL(3.5 GM daily)	DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); PA
HALOG OINT	3	PA	DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); PA
<i>hydrocortisone (topical)</i> CREA 1 %, 2.5 %	1B	QL(15.15 GM daily); RX/OTC	DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); PA
<i>hydrocortisone (topical)</i> LOTN 2.5 %	1B		Emollients		
<i>hydrocortisone (topical)</i> OINT 1 %, 2.5 %	1B	QL(15.15 GM daily); RX/OTC	<i>lactic acid (ammonium lactate)</i> CREA	1B	QL(12.9 GM daily); RX/OTC
<i>hydrocortisone butyrate</i> CREA	1B	QL(3 GM daily)	<i>lactic acid (ammonium lactate)</i> LOTN 12 %	1B	RX/OTC
<i>hydrocortisone butyrate</i> OINT	1B	QL(3 GM daily)	Enzymes - Topical		
<i>hydrocortisone butyrate</i> SOLN	1B	QL(5 ML daily)	SANTYL OINT	3	PA
<i>hydrocortisone valerate</i> CREA	1B		Immunomodulating Agents - Topical		
<i>hydrocortisone valerate</i> OINT	1B		<i>imiquimod</i> 5 %	1B	QL(12 EA per fill retail; 12 per fill mail)
<i>mometasone furoate</i> CREA	1B	QL(3 GM daily)	Immunosuppressive Agents - Topical		
<i>mometasone furoate</i> OINT	1B	QL(4 GM daily)	<i>pimecrolimus</i>	1B	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>mometasone furoate</i> SOLN	1B	QL(5 ML daily)	<i>tacrolimus (topical)</i> OINT	1B	AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical)</i> CREA 0.1 %	1B	QL(3.34 GM daily)	Keratolytic/Antimitotic/Vesicant Agents		
<i>triamcinolone acetonide (topical)</i> CREA 0.5 %	1B	QL(5 GM daily)	<i>podofilox</i> SOLN	1B	
<i>triamcinolone acetonide (topical)</i> CREA 0.025 %	1B	QL(15.15 GM daily)	Local Anesthetics - Topical		

Drug Name	Drug Tier	Requirements/ Limits
<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
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 1 %</i>	1B	QL(5 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 GM daily)
<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		

Drug Name	Drug Tier	Requirements/ Limits
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 Enzymes		
Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
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
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		

Drug Name	Drug Tier	Requirements/ Limits
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 EA daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 EA daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 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	
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>torsemide 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	
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 EA daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 EA daily)
<i>indapamide TABS 2.5 MG</i>	1A	QL(2 EA daily)
<i>indapamide TABS 1.25 MG</i>	1A	QL(1 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 5 MG, 10 MG</i>	1A	QL(1 EA daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1A	QL(0.143 EA daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ML daily)
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 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 TABS 5 MG, 30 MG</i>	1B	QL(1 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 5 MG/100ML</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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
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
GENOTROPIN CART SC	4	PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
NORDITROPIN FLEXPPO SOPN 30 MG/3ML	4	PA
ZORBTIVE SC	4	SP; PA
Hormone Receptor Modulators		
OSPHENA	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

Drug Name	Drug Tier	Requirements/ Limits
<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		
<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 0.2 MG</i>	1B	QL(8 EA daily)
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 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		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Estrogen Combinations			<i>levofloxacin in d5w 500 MG/100ML</i>	1B	
BIJUVA	3	PA	<i>levofloxacin SOLN PO</i>	1B	
CLIMARA PRO	3		<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
DUAVEE	3	PA	<i>levofloxacin TABS 500 MG</i>	1A	
<i>norethindrone acetate-ethinyl estradiol</i>	1B		<i>moxifloxacin hcl in sodium chloride</i>	1B	
PREMPHASE	2		<i>moxifloxacin hcl TABS</i>	1B	
PREMPRO	2	QL(1 EA daily)	<i>ofloxacin 300 MG, 400 MG</i>	1B	
Estrogens			GASTROINTESTINAL AGENTS - MISC. -		
DEPO-ESTRADIOL	3		Miscellaneous Gastrointestinal Drugs		
ELESTRIN GEL	3		5-HT4 Receptor Agonists		
<i>estradiol valerate</i>	1B		<i>prucalopride succinate</i>	1B	QL(1 EA daily)
<i>estradiol GEL</i>	1B		Agents for Chronic Idiopathic Constipation (CIC)		
<i>estradiol GEL</i>	3		TRULANCE	2	QL(1 EA daily)
<i>estradiol PTTW</i>	1B	QL(0.572 EA daily)	Gallstone Solubilizing Agents		
<i>estradiol PTWK</i>	1B		<i>ursodiol CAPS</i>	1B	QL(3 EA daily)
<i>estradiol TABS</i>	1B		<i>ursodiol TABS</i>	1B	
<i>estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG</i>	1B	QL(1 EA daily)	Gastrointestinal Chloride Channel Activators		
EVAMIST SOLN	3		<i>lubiprostone</i>	1B	QL(2 EA daily)
MENEST 2.5 MG	3		Gastrointestinal Stimulants		
MENOSTAR PTWK	3		<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
PREMARIN SOLR	2		<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ML daily)
PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (<i>estrogens, conjugated</i>)	2	QL(1 EA daily)	<i>metoclopramide hcl TABS</i>	1A	QL(6 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			Inflammatory Bowel Agents		
Fluoroquinolones			<i>balsalazide disodium CAPS</i>	1B	QL(9 EA daily)
BAXDELA SOLR	3	PA	DIPENTUM	2	
BAXDELA TABS	3	PA	INFLECTRA SOLR	4	PA
<i>ciprofloxacin hcl TABS</i>	1B		<i>mesalamine CP24</i>	1B	
<i>ciprofloxacin in d5w 200 MG/100ML</i>	3		<i>mesalamine CPDR</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>mesalamine ENEM</i>	3		<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>mesalamine SUPP</i>	3		<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)	<i>lanthanum carbonate CHEW</i>	1B	
<i>mesalamine TBEC 1.2 GM</i>	3		<i>sevelamer carbonate PACK</i>	1B	
PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); PA	<i>sevelamer carbonate TABS</i>	1B	
RENFLEXIS	4	PA	GENITOURINARY AGENTS - MISCELLANEOUS -		
SKYRIZI SOCT	4	QL(0.043 ML daily); PA	Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
SKYRIZI SOLN	4	QL(0.36 ML daily); PA	Alkalinizers		
STELARA 130 MG/26ML	4	QL(3.47 ML daily); PA	<i>potassium citrate (alkalinizer) TBCR</i>	1B	
STEQEYMA	4	QL(3.47 ML daily); PA	<i>sodium citrate & citric acid</i>	1B	RX/OTC
<i>sulfasalazine TABS</i>	1B		Cystinosis Agents		
<i>sulfasalazine TBEC</i>	1B		CYSTAGON CAPS	3	PA
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.072 ML daily); PA	Genitourinary Irrigants		
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); PA	<i>acetic acid 0.25 %</i>	1B	
TREMFYA SOLN IV	4	QL(0.72 ML daily); PA	<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); PA	<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
YESINTEK 130 MG/26ML	4	QL(3.47 ML daily); PA	SORBITOL 3 %	1B	
Intestinal Acidifiers			SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1B	
<i>lactulose (encephalopathy)</i>	1B		Interstitial Cystitis Agents		
Irritable Bowel Syndrome (IBS) Agents			ELMIRON CAPS	2	QL(3 EA daily)
<i>alosetron hcl</i>	1B	QL(2 EA daily)	Prostatic Hypertrophy Agents		
LINZESS	2	QL(1 EA daily)	<i>alfuzosin hcl</i>	1B	QL(1 EA daily)
Peripheral Opioid Receptor Antagonists			<i>dutasteride</i>	1B	QL(1 EA daily)
<i>alvimopan</i>	1B		<i>dutasteride-tamsulosin hcl</i>	1B	
MOVANTIK	3	QL(1 EA daily); PA	<i>finasteride</i>	1B	5 mg only
Phosphate Binder Agents			<i>silodosin</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl</i> TABS 100 MG, 200 MG	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
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		

Drug Name	Drug Tier	Requirements/ Limits
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 EA daily); PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1A	QL(1 EA daily)
<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 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 25 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 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

Drug Name	Drug Tier	Requirements/ Limits
<i>eltrombopag olamine</i> PACK 12.5 MG, 25 MG	3	QL(1 EA daily); PA
<i>eltrombopag olamine</i> TABS 12.5 MG, 25 MG, 50 MG, 75 MG	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		
HEMATINIC/FOLIC ACID	1B	QL(1 EA daily)
Iron		
<i>ferrous sulfate</i> SOLN 15 MG/ML, 15 MG/ML	0	AL(Up to 1 yrs old)
<i>ferrous sulfate</i> TABS 325 MG, 65 MG, 325 MG	0	
<i>ferrous sulfate</i> TBEC 325 MG	0	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid</i> TABS	1B	PA
<i>tranexamic acid</i> SOLN 1000 MG/10ML	1B	
<i>tranexamic acid</i> TABS	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital</i> ELIX	1B	
<i>phenobarbital</i> TABS	1B	
Hypnotics - Tricyclic Agents		

Drug Name	Drug Tier	Requirements/ Limits
<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</i> 7.5 MG, 22.5 MG	1B	QL(1 EA daily)
<i>temazepam</i> 15 MG, 30 MG	1A	QL(1 EA daily)
<i>triazolam</i>	1B	
<i>zaleplon</i> 5 MG	1B	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon</i> 10 MG	1B	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate</i> TABS	1A	QL(1 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate</i> TBCR	1B	QL(1 EA daily)
Orexin Receptor Antagonists		
BELSOMRA	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</i> TABS	1B	
Laxative Combinations		
CLENPIQ SOLN	0	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	0	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i> SOLR	0	

Drug Name	Drug Tier	Requirements/ Limits
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	0	
PEG-PREP	0	
PLENVU	0	
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	0	
SUFLAVE	0	
SUTAB	0	
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)
<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 500 MG</i>	1B	QL(4 EA per fill retail; 4 per fill mail)
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 EA daily)
<i>azithromycin TABS 250 MG</i>	1B	QL(6 EA per fill retail; 6 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
Erythromycins		

Drug Name	Drug Tier	Requirements/ Limits
<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		
DIFICID TABS 200 MG (<i>fidaxomicin</i>)	2	
<i>fidaxomicin TABS 200 MG</i>	1B	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC	0	
CAYA DPRH	0	
DUREX EXTRA SENSITIVE THIN DEVI	0	
DUREX EXTRA SENSITIVE THIN MISC	0	
DUREX TROPICAL MISC	0	
FANTASY LUBRICATED/SPERMICI DE MISC	0	
FANTASY LUBRICATED 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
FEMCAP DEVI	0	
KAMELEON LUBRICATED MISC	0	
KIMONO COLORS DEVI	0	
KIMONO MAXX-LARGE FLARE MISC	0	
KIMONO MICRO THIN PLUS MISC	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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/SPERMICI DE 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		WIDE-SEAL DIAPHRAGM 60	0	
OMNIFLEX DIAPHRAGM	0		WIDE-SEAL DIAPHRAGM 65	0	
REALITY LATEX CONDOMS MISC	0		WIDE-SEAL DIAPHRAGM 70	0	
REALITY LATEX/ULTRA TEXTURED DEVI	0		WIDE-SEAL DIAPHRAGM 75	0	
REALITY LATEX/ULTRA THIN DEVI	0		WIDE-SEAL DIAPHRAGM 80	0	
TROJAN BARESKIN DEVI	0		WIDE-SEAL DIAPHRAGM 85	0	
TROJAN MAGNUM MISC	0		WIDE-SEAL DIAPHRAGM 90	0	
TROJAN ULTRA THIN/SPERMICIDAL MISC	0		WIDE-SEAL DIAPHRAGM 95	0	
TROJAN ULTRA THIN MISC	0		Diabetic Supplies		
TROJAN-ENZ LUBRICATED MISC	0		FREESTYLE LIBRE 14 DAY READER	3	PA
TROJAN-ENZ/SPERMICIDAL MISC	0				
TRUE COVER DEVI	0				
TRUSTEX COLOR CONDOMS + LUBE MISC	0				
TRUSTEX LUB/RIBBED/STUDDERED MISC	0				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FREESTYLE LIBRE 14 DAY SENSOR	3	QL(0.072 EA daily); PA	Receptor Antag		
FREESTYLE LIBRE 2 PLUS SENSOR	3	QL(0.072 EA daily); PA	AIMOVIG	2	QL(0.04 ML daily); PA
FREESTYLE LIBRE 2 READER	3	PA	EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); PA
FREESTYLE LIBRE 2 SENSOR	3	QL(0.072 EA daily); PA	EMGALITY SOAJ	2	QL(0.07 ML daily); PA
FREESTYLE LIBRE 3 PLUS SENSOR	3	QL(0.072 EA daily); PA	EMGALITY SOSY	2	QL(0.07 ML daily); PA
FREESTYLE LIBRE 3 READER	3	QL(1 EA per 365 day(s) retail); PA	UBRELVY 50 MG	3	QL(10 EA per 30 day(s) retail); ST
FREESTYLE LIBRE 3 SENSOR	3	QL(0.072 EA daily); PA	UBRELVY 100 MG	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST
FREESTYLE LIBRE READER	3	PA	Migraine Combinations		
ONETOUCH DELICA SAFETY LANCING	1B	D; RX/OTC	<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 EA daily)
RELION LANCET DEVICES 30G	1B	D; RX/OTC	<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
RELION LANCETS	1B	D; RX/OTC	Migraine Products		
SELECT LANCETS	1B	6.66/day	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ML daily)
TRUE METRIX LEVEL 3 SOLN	1B	D	<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
Parenteral Therapy Supplies			ERGOMAR SUBL	3	QL(0.667 EA daily)
BD PEN NEEDLE NANO 2ND GEN	1B	D; QL(5 EA daily); RX/OTC	Serotonin Agonists		
EMBECTA AUTOSHIELD DUO	1B	D; QL(5 EA daily); RX/OTC	<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 EA daily); AL(At least 12 yrs old); ST
EMBECTA PEN NEEDLE NANO	1B	D; QL(5 EA daily); RX/OTC	<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
EMBECTA PEN NEEDLE NANO 2 GEN	1B	D; QL(5 EA daily); RX/OTC	<i>eletriptan hydrobromide</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old); ST
EMBECTA PEN NEEDLE ULTRAFINE	1B	D; QL(5 EA daily)			
SELECT INSULIN SYRINGES	1B	5/day			
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches					
Calcitonin Gene-Related Peptide (CGRP)					

Drug Name	Drug Tier	Requirements/Limits
<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)
<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

Drug Name	Drug Tier	Requirements/Limits
<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	
ISOLYTE-P IN D5W	1B	
ISOLYTE-S	1B	
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (<i>potassium chloride in dextrose & sodium chloride</i>)	1B	
KCL-LACTATED RINGERS-D5W	1B	
NORMOSOL-M IN D5W	1B	
NORMOSOL-R PH 7.4	1B	
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	1B	
PLASMA-LYTE A (<i>electrolyte-a</i>)	1B	
<i>potassium chloride in dextrose 20 MEQ/L</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 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>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA
<i>ringer's</i>	1B		Immunomodulators		
Fluoride			<i>lenalidomide 20 MG</i>	4	QL(1 EA daily); PA
<i>sodium fluoride CHEW</i>	0	QL(1 EA daily)	<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
Phosphate			THALOMID	4	QL(3 EA daily); SP; PA
<i>potassium phosphates 45 MMOLE/15ML</i>	1B		Immunosuppressive Agents		
Potassium			ATGAM	4	SP; PA
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		AZATHIOPRINE SODIUM	1B	
<i>potassium bicarbonate TBEF</i>	1B		<i>azathioprine TABS</i>	1B	
<i>potassium chloride microencapsulated crystals er</i>	1B		<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
<i>potassium chloride CPCR</i>	1B		<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
<i>potassium chloride PACK PO 20 MEQ</i>	1B	PA	<i>cyclosporine CAPS</i>	1B	
<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B		<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B		<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); SP; PA
<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1B		<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA
MISCELLANEOUS THERAPEUTIC CLASSES			<i>mycophenolate mofetil CAPS</i>	1B	
Chelating Agents			<i>mycophenolate mofetil TABS</i>	1B	
<i>penicillamine CAPS</i>	1B	PA	<i>mycophenolate sodium</i>	1B	
<i>penicillamine TABS</i>	1B	QL(8 EA daily)	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		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>irrigation solutions, physiological</i>	1B		<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
<i>lactated ringer's (irrigation)</i>	1B		Prenatal Vitamins		
<i>ringer's irrigation</i>	1B		CLASSIC PRENATAL TABS	2	QL(1 EA daily)
<i>water for irrigation, sterile</i>	1B		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)
Potassium Removing Agents			EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)
LOKELMA	3	QL(1 EA daily); PA	FT PRENATAL TABS	2	QL(1 EA daily)
<i>sodium polystyrene sulfonate POWD</i>	1B		GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B		GNP PRENATAL TABS	2	QL(1 EA daily)
MOUTH/THROAT/DENTAL AGENTS			KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
Anesthetics Topical Oral			MASONATAL TABS	2	QL(1 EA daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B		M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ML daily)	MULTI PRENATAL TABS	2	QL(1 EA daily)
Anti-infectives - Throat			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
<i>clotrimazole</i>	1B		NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
<i>nystatin (mouth-throat)</i>	1B		NEONATAL PRENATAL TABS	2	QL(1 EA daily)
Antiseptics - Mouth/Throat			NEONATAL VITAMIN TABS	2	QL(1 EA daily)
<i>chlorhexidine gluconate (mouth-throat)</i>	1B		NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC
Dental Products			ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC
<i>stannous fluoride CONC</i>	0	RX/OTC	ONE VITE WOMENS TABS	2	QL(1 EA daily)
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					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)	Central Muscle Relaxants		
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC	<i>baclofen TABS</i>	1B	
PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	<i>carisoprodol TABS</i>	1B	
PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)	<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 EA daily)
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)	<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 EA daily)
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)	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 EA daily)
PRENATAL TABS	2	QL(1 EA daily)	<i>metaxalone 800 MG</i>	1B	QL(4 EA daily)
PRENATRIX TABS	2	QL(1 EA daily); RX/OTC	<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
PRENATRYL TABS	2	QL(1 EA daily); RX/OTC	<i>orphenadrine citrate TB12</i>	1B	QL(2 EA daily)
PX PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)	<i>tizanidine hcl CAPS</i>	1B	
QC PRENATAL TABS	2	QL(1 EA daily)	<i>tizanidine hcl TABS</i>	1B	
SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)	Direct Muscle Relaxants		
THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC	<i>dantrolene sodium CAPS</i>	1B	QL(4 EA daily)
TRICARE TABS	2	QL(1 EA daily); RX/OTC	Muscle Relaxant Combinations		
VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC	<i>orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG</i>	3	PA
WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC	NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			Nasal Antiallergy		
			<i>azelastine hcl</i>	1B	
			<i>olopatadine hcl (nasal)</i>	1B	
			Nasal Anticholinergics		
			<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ML daily)
			<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
			Nasal Steroids		
			<i>budesonide (nasal)</i>	1B	
			<i>flunisolide (nasal)</i>	1B	1 package(s) per fill retail

Drug Name	Drug Tier	Requirements/ Limits
<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); 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</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX/DEXTROSE (4.25/10)	3	
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	

Drug Name	Drug Tier	Requirements/ Limits
<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	
<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	
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		

Drug Name	Drug Tier	Requirements/ Limits
<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	
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1B	
Ophthalmics - Misc.		
ALOCRIL	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	

Drug Name	Drug Tier	Requirements/ Limits
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)
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	1B	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<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	
<i>ciprofloxacin-fluocinolone acetamide</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		

Drug Name	Drug Tier	Requirements/ Limits
<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	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<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		

Drug Name	Drug Tier	Requirements/ Limits
<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	
<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)
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)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 EA daily)	<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 EA daily)	<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily)
<i>galantamine hydrobromide CP24</i>	1B	QL(1 EA daily)	LEMTRADA	4	QL(1.2 ML daily); PA
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ML daily)	PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); PA
<i>galantamine hydrobromide TABS</i>	1B	QL(2 EA daily)	PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); PA
<i>memantine hcl TABS</i>	1B		PLEGRIDY SOAJ	4	QL(0.036 ML daily); PA
<i>memantine hcl TABS</i>	1B	QL(2 EA daily)	PLEGRIDY SOSY SC	4	QL(0.036 ML daily); PA
<i>rivastigmine tartrate CAPS</i>	1B		REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
Combination Psychotherapeutics			REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA
<i>chlordiazepoxide-amitriptyline</i>	1B		REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
<i>perphenazine-amitriptyline</i>	1B	QL(4 EA daily)	REBIF SOSY	4	QL(0.214 ML daily); SP; PA
Fibromyalgia Agents			<i>teriflunomide</i>	4	QL(1 EA daily)
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
SAVELLA TABS	2	QL(2 EA daily); PA	<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
Movement Disorder Drug Therapy			<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
AUSTEDO TABS	4	QL(4 EA daily); PA	Pseudobulbar Affect (PBA) Agents		
<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA	NUDEXTA	3	QL(2 EA daily); PA
Multiple Sclerosis Agents			Psychotherapeutic and Neurological Agents - Misc.		
AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA	<i>ergoloid mesylates TABS</i>	1B	
AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA	<i>pimozide</i>	1B	
BETASERON KIT	4	QL(0.5 EA daily); SP; PA	Smoking Deterrents		
<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA	<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 EA daily)
<i>dimethyl fumarate CDPK</i>	1B	QL(2 EA daily)			
<i>dimethyl fumarate CPDR</i>	1B	QL(2 EA daily)			
<i>fingolimod hcl</i>	4	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nicotine polacrilex GUM</i>	0		Tetracyclines		
<i>nicotine polacrilex LOZG</i>	0		<i>demeclocycline hcl TABS</i>	1B	
NICOTINE KIT	0		<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 EA daily)	<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 EA daily)
NICOTROL NS SOLN	0		<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 EA daily)
NICOTROL INHA	0		<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>varenicline tartrate TABS</i>	0	QL(2 EA daily)	<i>doxycycline hyclate CAPS</i>	1B	QL(2 EA daily)
<i>varenicline tartrate TBPk</i>	0		<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 EA daily)
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>minocycline hcl CAPS</i>	1B	QL(3 EA daily)
Alpha-Proteinase Inhibitor (Human)			<i>minocycline hcl TABS</i>	1B	QL(3 EA daily)
PROLASTIN-C SOLN	4	PA	<i>tetracycline hcl CAPS</i>	1B	QL(8 EA daily)
PROLASTIN-C SOLR	4	PA	THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Cystic Fibrosis Agents			Antithyroid Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA	<i>methimazole TABS</i>	1B	
ORKAMBI PACK	4	QL(2 EA daily); PA	<i>propylthiouracil</i>	1B	
ORKAMBI TABS	4	QL(4 EA daily); PA	Thyroid Hormones		
PULMOZYME	4	QL(2.5 ML daily); SP; PA	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
TRIKAFTA TBPk	4	QL(3 EA daily); PA	ARMOUR THYROID TABS	2	QL(1 EA daily)
Pulmonary Fibrosis Agents			EVEXITHROID TABS 180 MG	2	QL(1 EA daily)
OFEV	4	QL(2 EA daily); PA	<i>levothyroxine sodium TABS</i>	1A	
<i>pirfenidone CAPS</i>	4		<i>liothyronine sodium SOLN</i>	1B	
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); PA	<i>liothyronine sodium TABS</i>	1B	
SULFONAMIDES - Drugs to Treat Bacterial Infections			NP THYROID TABS	1B	QL(1 EA daily)
Sulfonamides					
<i>sulfadiazine TABS</i>	1B				
TETRACYCLINES - Drugs to Treat Bacterial Infections					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SYNTHROID TABS (levothyroxine sodium)	2		glycopyrrolate TABS 2 MG	1B	QL(6 EA daily)
TOXOIDS			methscopolamine bromide	1B	
Toxoid Combinations			H-2 Antagonists		
ADACEL SUSP	0		cimetidine TABS	1B	RX/OTC
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0		famotidine in nacl SOLN	1B	
BOOSTRIX SUSP	0		famotidine SUSR	1B	QL(10 ML daily)
BOOSTRIX SUSY	0		famotidine TABS 20 MG, 40 MG	1B	RX/OTC
DAPTACEL	0		nizatidine CAPS	1B	
INFANRIX	0		Misc. Anti-Ulcer		
KINRIX SUSY	0		sucralfate SUSP	1B	QL(40 ML daily)
PEDIARIX SUSY	0		sucralfate TABS	1B	QL(4 EA daily)
PENTACEL	0		Proton Pump Inhibitors		
QUADRACEL SUSP	0		dexlansoprazole	3	QL(1 EA daily)
QUADRACEL SUSY	0		esomeprazole magnesium CPDR 20 MG	1B	QL(2 EA daily); RX/OTC
TDVAX SUSP	0		esomeprazole magnesium CPDR 40 MG	3	QL(1 EA daily)
TENIVAC SUSP 2 LFU-5 LFU	0		esomeprazole magnesium TBEC	1B	QL(2 EA daily)
TETANUS-DIPHThERIA TOXOIDS TD SUSP	0		lansoprazole CPDR 30 MG	1B	
VAXELIS SUSP	0		lansoprazole CPDR 15 MG	1B	QL(2 EA daily); RX/OTC
VAXELIS SUSY	0		NEXIUM 24HR TBEC 20 MG	1B	QL(2 EA daily)
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			omeprazole magnesium CPDR	1B	QL(4 EA daily)
Antispasmodics			omeprazole CPDR	1B	QL(2 EA daily)
atropine sulfate SOSY IJ 0.25 MG/5ML	1B		omeprazole TBEC	1B	QL(2 EA daily)
chlordiazepoxide hcl- clidinium bromide	1B		pantoprazole sodium TBEC 40 MG	1B	
dicyclomine hcl CAPS	1B		pantoprazole sodium TBEC 20 MG	1B	QL(1 EA daily)
dicyclomine hcl SOLN PO	1B		rabeprazole sodium TBEC	1B	QL(1 EA daily)
dicyclomine hcl TABS	1B		Ulcer Drugs - Prostaglandins		
glycopyrrolate SOLN IJ 4 MG/20ML	1B				
glycopyrrolate TABS 1 MG	1B				

Drug Name	Drug Tier	Requirements/ Limits
<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	
<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		

Drug Name	Drug Tier	Requirements/ Limits
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 SOLR	0	
PEDVAX HIB SUSP	0	
PENBRAYA	0	
PENMENVY SUSR IM	0	AL(At least 10 yrs old - Up to 25 yrs old)
PNEUMOVAX 23 SOLN	0	
PNEUMOVAX 23 SOSY	0	
PREVNAR 13	0	
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail
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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0		FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail
COMIRNATY SUSP	0		FLULAVAL QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
COMIRNATY SUSY	0		FLULAVAL SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail	FLUMIST	0	1 max fill(s) per 180 day(s) retail
ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail	FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUAD	0	1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail
FLUARIX SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT SUSY	0	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	FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail
FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail	FLUZONE SUSY	0	Limit 1 dose per season; 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	GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 365 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 365 day(s) retail
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0	1 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HEPLISAV-B SOSY	0	2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail	PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
IPOL IJ	0	1 max fill(s) per 365 day(s) retail	PROQUAD SUSR	0	2 max fill(s) per 365 day(s) retail
JYNNEOS	0		RECOMBIVAX HB SUSP	0	1 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 SUSY	0	1 max fill(s) per 365 day(s) retail
MNEXSPIKE SUSY 10 MCG/0.2ML	0		ROTARIX SUSP	0	
MODERNA COVID-19 BIVALENT	0		ROTATEQ SOLN	0	1 max fill(s) per 365 day(s) retail
MODERNA COVID-19 VAC 6M-11Y SUSP	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
MODERNA COVID-19 VAC 6M-11Y SUSY	0		SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
MODERNA COVID-19 VACCINE SUSP	0		SPIKEVAX SUSP	0	
MRESVIA	0		SPIKEVAX SUSY	0	
NOVAVAX COVID-19 VACCINE SUSP	0		TWINRIX SUSY	0	1 max fill(s) per 365 day(s) retail
NOVAVAX COVID-19 VACCINE SUSY	0		VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	1 max fill(s) per 365 day(s) retail
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0		VAQTA	0	1 max fill(s) per 365 day(s) retail
PFIZER COVID-19 VAC BIVALENT	0		VARIVAX SUSR	0	2 max fill(s) per 365 day(s) retail
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0		VAGINAL AND RELATED PRODUCTS		
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0		Spermicides		
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	0		TODAY SPONGE MISC	0	
PFIZER-BIONTECH COVID-19 VACC SUSP	0		VCF VAGINAL CONTRACEPTIVE FILM	0	
PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail	Vaginal Anti-infectives		
			clindamycin phosphate vaginal CREA	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(2.5 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 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	
FEMRING	3	PA
PREMARIN	2	QL(1.5 GM daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<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	

Drug Name	Drug Tier	Requirements/ Limits
<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		
NIACIN ER TBCR	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
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		cefadroxil SUSR	33	chloroquine phosphate TABS 250 MG	22
		cefadroxil TABS	33		
		cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	33		
		cefdinir CAPS	33		

chloroquine phosphate TABS 500 MG	22	63	
chlorpromazine hcl SOLN	28	clindamycin phosphate-benzoyl peroxide (refrigerate)	36
chlorpromazine hcl TABS	28	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	36
chlorthalidone 25 MG, 50 MG	42	clindamycin phosphate-tretinoin	36
chlorzoxazone TABS 500 MG	54	CLINIMIX/DEXTROSE (4.25/10)	55
chlorzoxazone TABS 750 MG	54	CLINIMIX/DEXTROSE (4.25/5)	55
cholecalciferol CAPS	64	clobazam SUSP	11
cholecalciferol TABS 10 MCG, 400 UNIT	64	clobazam TABS	11
cholestyramine light PACK	19	clobetasol propionate CREA 0.05 %	39
cholestyramine light POWD	19	clobetasol propionate emollient base 0.05 %	39
cholestyramine PACK	19	clobetasol propionate FOAM	39
cholestyramine POWD	19	clobetasol propionate GEL 0.05 %	39
choline fenofibrate	19	clobetasol propionate OINT 0.05 %	39
CHORIONIC GONADOTROPIN IM 43		clobetasol propionate SOLN 0.05 %	39
ciclopirox GEL	36	clocortolone pivalate	39
ciclopirox olamine CREA	36	clofarabine	23
ciclopirox olamine SUSP	36	clomipramine hcl	14
ciclopirox SHAM	36	clonazepam TABS	11
ciclopirox SOLN	36	clonidine hcl (adhd) TB12	1
cidofovir	30	clonidine hcl TABS	20
cilostazol	46	clonidine PTWK	20
CIMDUO	29	clopidogrel bisulfate 300 MG	46
cimetidine TABS	60	clopidogrel bisulfate 75 MG	46
cinacalcet hcl	43	clorazepate dipotassium TABS	8
ciprofloxacin hcl (ophth) SOLN	55	clotrimazole (topical) CREA	36
ciprofloxacin hcl (otic)	56	clotrimazole (topical) SOLN	36
ciprofloxacin hcl TABS	44		
ciprofloxacin in d5w 200 MG/100ML			
ciprofloxacin-dexamethasone	56		
ciprofloxacin-fluocinolone acetoneide	56		
cisplatin SOLN 100 MG/100ML	23		
citalopram hydrobromide SOLN	14		
citalopram hydrobromide TABS	14		
clarithromycin SUSR	48		
clarithromycin TABS	48		
clarithromycin TB24	48		
CLASSIC PRENATAL TABS	53		
clemastine fumarate SYRP	18		
clemastine fumarate TABS 2.68 MG	18		
CLENPIQ SOLN	47		
CLIMARA PRO	44		
clindamycin hcl	21		
clindamycin palmitate hydrochloride	21		
clindamycin phosphate (topical) FOAM	36		
clindamycin phosphate (topical) GEL	36		
clindamycin phosphate (topical) LOTN	36		
clindamycin phosphate (topical) SOLN	36		
clindamycin phosphate (topical) SWAB	36		
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	22		
clindamycin phosphate vaginal CREA			

clotrimazole	53	COMPLERA 200 MG-300 MG-25 MG (emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	29	cyclosporine modified (for microemulsion) SOLN	52
clotrimazole vaginal CREA 1 %	64	CORDRAN TAPE	39	cyclosporine SOLN IV 50 MG/ML .	52
clotrimazole w/ betamethasone CREA	37	CORTISPORIN-TC	56	cyproheptadine hcl SYRP	18
clotrimazole w/ betamethasone LOTN	37	COSENTYX (300 MG DOSE) SOSY .	38	cyproheptadine hcl TABS	18
clozapine TABS	28	COSENTYX SENSOREADY (300 MG) SOAJ	38	CYSTAGON CAPS	45
clozapine TBDP 100 MG	28	COSENTYX SENSOREADY PEN SOAJ	38	CYSTARAN	56
clozapine TBDP 12.5 MG, 150 MG 28		COSENTYX SOSY 150 MG/ML ...	38	dabigatran etexilate mesylate CAPS .	11
clozapine TBDP 25 MG	28	COSENTYX SOSY 75 MG/0.5ML .	38	dactinomycin	25
COARTEM	22	COSENTYX UNOREADY SOAJ ..	38	dalfampridine	58
codeine sulfate TABS 30 MG	5	CREON CPEP	41	danazol CAPS	7
CODEINE SULFATE TABS	5	CRESEMBA CAPS 186 MG	18	dantrolene sodium CAPS	54
colchicine TABS	46	cromolyn sodium (ophth)	56	dapagliflozin propanediol	16
colchicine w/ probenecid	46	cromolyn sodium NEBU	9	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	14
colesevelam hcl PACK	19	crotamiton LOTN	41	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	14
colesevelam hcl TABS	19	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	53	dapsone	21
colestipol hcl GRAN	19	cyanocobalamin SOLN IJ 1000 MCG/ML	46	DAPTACEL	60
colestipol hcl PACK	19	cyclobenzaprine hcl TABS 5 MG, 10 MG	54	daptomycin 500 MG	21
colestipol hcl TABS	19	cyclophosphamide CAPS	23	darifenacin hydrobromide	61
COMBIVENT RESPIMAT AERS ..	10	cyclophosphamide SOLR IJ	23	darunavir TABS 600 MG	29
COMETRIQ (100 MG DAILY DOSE) KIT	25	cycloserine	23	darunavir TABS 800 MG	29
COMETRIQ (140 MG DAILY DOSE) KIT	25	cyclosporine (ophth) EMUL	55	dasatinib	25
COMETRIQ (60 MG DAILY DOSE) KIT	25	cyclosporine CAPS	52	DAURISMO	24
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	62	cyclosporine modified (for microemulsion) CAPS	52	decitabine	23
COMIRNATY SUSP	62			deferasirox PACK	17
COMIRNATY SUSY	62			deferasirox TABS	17
				deferasirox TBSO	17
				deflazacort TABS	34

DELSTRIGO	29	dexamethasone ELIX	34	diclofenac sodium (actinic keratoses) EX	37
demeclocycline hcl TABS	59	DEXAMETHASONE INTENSOL CONC	34	diclofenac sodium (ophth)	56
DEPO-ESTRADIOL	44	dexamethasone sodium phosphate (ophth)	56	diclofenac sodium (topical) GEL EX 37	
DEPO-MEDROL SUSP	34	dexamethasone SOLN	34	diclofenac sodium TB24	4
DEPO-SUBQ PROVERA 104 SUSY SC	34	dexamethasone TABS 0.5 MG, 0.75 MG	34	diclofenac sodium TBEC	4
DESCOVY 200 MG-25 MG	29	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	34	diclofenac w/ misoprostol TBEC	4
desipramine hcl TABS	14	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	34	dicloxacillin sodium	57
desloratadine TABS	18	dexlansoprazole	60	dicyclomine hcl CAPS	60
desloratadine TBDP 2.5 MG	18	dexmethylphenidate hcl CP24	1	dicyclomine hcl SOLN PO	60
desmopressin acetate SOLN IJ ...	43	dexmethylphenidate hcl TABS	1	dicyclomine hcl TABS	60
DESMOPRESSIN ACETATE SOLN NA	43	dextroamphetamine sulfate CP24 10 MG, 15 MG	1	DIFFERIN LOTN	36
desmopressin acetate spray	43	dextroamphetamine sulfate CP24 5 MG	1	DIFICID TABS 200 MG (fidaxomicin) 48	
desmopressin acetate spray refrigerated 0.01 %	43	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1		diflorasone diacetate CREA	39
desmopressin acetate TABS 0.1 MG 43		dextroamphetamine sulfate TABS 5 MG, 10 MG	1	diflorasone diacetate OINT	39
desmopressin acetate TABS 0.2 MG 43		DIACOMIT CAPS 250 MG	12	diflunisal TABS	5
desogestrel & ethinyl estradiol	33	DIACOMIT CAPS 500 MG	12	difluprednate	56
desogestrel-ethinyl estradiol (biphasic)	33	DIACOMIT PACK 250 MG	12	digoxin SOLN PO 0.05 MG/ML	32
desogestrel-ethinyl estradiol (triphasic)	33	DIACOMIT PACK 500 MG	12	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	32
desonide CREA	39	diazepam (anticonvulsant) GEL ...	11	dihydroergotamine mesylate SOLN IJ 1 MG/ML	50
desonide LOTN	39	diazepam CONC	8	dihydroergotamine mesylate SOLN NA 4 MG/ML	50
desonide OINT	39	diazepam SOLN PO 5 MG/5ML	8	DILANTIN (phenytoin sodium extended)	13
desoximetasone CREA 0.25 %	39	diazepam TABS	8	DILANTIN	13
desoximetasone GEL	39	diazoxide	15	DILANTIN INFATABS CHEW (phenytoin)	13
desoximetasone OINT 0.25 %	39	diclofenac epolamine PTCH EX ...	37	DILANTIN SUSP (phenytoin)	13
desvenlafaxine succinate	14	diclofenac potassium TABS 50 MG .	4	DILANTIN-125 SUSP (phenytoin) .	13

diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	31	docusate sodium CAPS 100 MG	48	100 MG	59
diltiazem hcl coated beads CP24 180 MG, 240 MG	31	docusate sodium CAPS 250 MG	48	doxylamine-pyridoxine TBEC	17
diltiazem hcl CP12	31	dofetilide	9	dronabinol CAPS	17
diltiazem hcl CP24	31	donepezil hydrochloride TABS 10 MG	57	drospirenone-ethinyl estradiol	33
diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	31	donepezil hydrochloride TABS 5 MG, 23 MG	57	drospirenone-ethinyl estradiol-levomefolate calcium	33
diltiazem hcl extended release beads 420 MG	31	donepezil hydrochloride TBDP 10 MG	58	DROXIA CAPS	46
diltiazem hcl SOLN 50 MG/10ML	31	donepezil hydrochloride TBDP 5 MG 58		DUAVEE	44
DILTIAZEM HCL SOLR	31	dorzolamide hcl	56	DULERA	10
diltiazem hcl TABS	31	dorzolamide hcl-timolol maleate	55	duloxetine hcl CPEP	14
diltiazem hcl TB24	31	DOVATO	29	DUPIXENT SOAJ 200 MG/1.14ML 40	
dimethyl fumarate CDPK	58	doxazosin mesylate	20	DUPIXENT SOAJ 300 MG/2ML	40
dimethyl fumarate CPDR	58	doxepin hcl (antipruritic)	37	DUPIXENT SOSY 200 MG/1.14ML 40	
DIPENTUM	44	doxepin hcl (sleep)	47	DUPIXENT SOSY 300 MG/2ML	40
diphenhydramine hcl CAPS 50 MG 18		doxepin hcl CAPS	14	DUREX EXTRA SENSITIVE THIN DEVI	48
diphenhydramine hcl ELIX 12.5 MG/5ML	18	doxepin hcl CONC	14	DUREX EXTRA SENSITIVE THIN MISC	48
diphenhydramine hcl LIQD 12.5 MG/5ML	18	doxercalciferol CAPS	43	DUREX TROPICAL MISC	48
diphenoxylate w/ atropine LIQD	17	doxercalciferol SOLN	43	dutasteride	45
diphenoxylate w/ atropine TABS	17	doxorubicin hcl SOLR 10 MG, 50 MG	25	dutasteride-tamsulosin hcl	45
dipyridamole	46	doxycycline (monohydrate) CAPS 50 MG, 100 MG	59	econazole nitrate CREA	37
disopyramide phosphate CAPS	9	doxycycline (monohydrate) CAPS 75 MG	59	EDARBI	20
disulfiram	57	doxycycline (monohydrate) TABS 100 MG	59	EDURANT	29
divalproex sodium TB24	13	doxycycline (monohydrate) TABS 50 MG, 75 MG	59	efavirenz CAPS 200 MG	29
divalproex sodium TBEC	13	doxycycline hyclate CAPS	59	efavirenz CAPS 50 MG	29
docetaxel CONC 20 MG/ML	26	doxycycline hyclate TABS 20 MG,		efavirenz TABS	29
docusate calcium	48			efavirenz-emtricitabine-tenofovir disoproxil fumarate	29
				efavirenz-lamivudine-tenofovir	

disoproxil fumarate	29	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	29	EPIDIOLEX	12
ELAPRASE	43	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	29	epinastine hcl (ophth)	56
electrolyte-148	51	EMTRIVA SOLN	29	epinephrine (anaphylaxis) SOAJ ..	64
electrolyte-a	51	EMVERM CHEW	8	eplerenone	21
ELESTRIN GEL	44	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		epoprostenol sodium	32
eletriptan hydrobromide	50	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		eptifibatide 200 MG/100ML	46
ELIGARD KIT SC 7.5 MG	24	enalapril maleate TABS	19	EQL PRENATAL FORMULA TABS 53	
ELIGARD SC 22.5 MG, 30 MG, 45 MG	24	ENBREL MINI SOCT	4	EQUETRO 100 MG	28
ELIQUIS DVT/PE STARTER PACK TBPK	11	ENBREL SOLN	4	EQUETRO 200 MG	28
ELIQUIS TABS	11	ENBREL SOSY 25 MG/0.5ML	4	EQUETRO 300 MG	28
ELLA	34	ENBREL SOSY 50 MG/ML	4	ERBITUX	24
ELMIRON CAPS	45	ENBREL SURECLICK SOAJ	4	ergocalciferol CAPS	64
eltrombopag olamine PACK 12.5 MG, 25 MG	47	ENERGIX-B SUSP 20 MCG/ML ..	62	ergocalciferol SOLN PO 200 MCG/ML	64
eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG	47	ENERGIX-B SUSY	62	ergoloid mesylates TABS	58
EMBECTA AUTOSHIELD DUO ..	50	enoxaparin sodium SOLN IJ 300 MG/3ML	11	ERGOMAR SUBL	50
EMBECTA PEN NEEDLE NANO .50		enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11	ergotamine w/ caffeine TABS	50
EMBECTA PEN NEEDLE NANO 2 GEN	50	enoxaparin sodium SOSY 30 MG/0.3ML	11	eribulin mesylate	27
EMBECTA PEN NEEDLE ULTRAFINE	50	enoxaparin sodium SOSY 40 MG/0.4ML	11	ERIVEDGE	24
EMCYT	24	enoxaparin sodium SOSY 60 MG/0.6ML	11	ERLEADA 240 MG	24
EMGALITY (300 MG DOSE) SOSY 50		enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11	ERLEADA 60 MG	24
EMGALITY SOAJ	50	entacapone	27	erlotinib hcl	24
EMGALITY SOSY	50	entecavir TABS	30	ERTACZO	37
EMSAM	13			ertapenem sodium IJ	21
emtricitabine CAPS	29			erythromycin (acne aid) PADS	36
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	29			erythromycin (acne aid) SOLN	36
				erythromycin (ophth)	55
				erythromycin base CPEP	48
				erythromycin base TABS	48
				erythromycin base TBEC	48

erythromycin ethylsuccinate SUSR 48	ETOPOPHOS 27	FASENRA SOSY 10 MG/0.5ML 9
erythromycin ethylsuccinate TABS 48	etoposide CAPS 27	FASENRA SOSY 30 MG/ML 9
escitalopram oxalate SOLN 14	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML 27	FC2 FEMALE CONDOM 48
escitalopram oxalate TABS 14	etravirine 100 MG 29	febuxostat 46
eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG 12	etravirine 200 MG 29	felbamate SUSP 13
esomeprazole magnesium CPDR 20 MG 60	EUCRISA 41	felbamate TABS 400 MG 13
esomeprazole magnesium CPDR 40 MG 60	EVAMIST SOLN 44	felbamate TABS 600 MG 13
esomeprazole magnesium TBEC . 60	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG 52	felodipine 31
estazolam 47	everolimus (immunosuppressant) 1 MG 52	FEMCAP DEVI 48
estradiol GEL 44	everolimus TABS 25	FEMLYV TBDP 33
estradiol PTTW 44	EVEXITHROID TABS 180 MG 59	FEMRING 64
estradiol PTWK 44	EVOTAZ 29	fenofibrate micronized 43 MG, 130 MG 19
estradiol TABS 44	exemestane 24	fenofibrate micronized 67 MG, 134 MG, 200 MG 19
estradiol vaginal CREA 64	ezetimibe 19	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG 19
estradiol vaginal TABS 64	ezetimibe-simvastatin 18	fenoprofen calcium TABS 4
estradiol valerate 44	famciclovir 125 MG, 250 MG 30	FENSOLVI (6 MONTH) SC 43
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG 44	famciclovir 500 MG 30	fentanyl citrate LPOP 5
eszopiclone 47	famotidine in nacl SOLN 60	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR 5
ethacrynic acid 42	famotidine SUSR 60	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML 47
ethambutol hcl TABS 23	famotidine TABS 20 MG, 40 MG .. 60	ferrous sulfate TABS 325 MG, 65 MG, 325 MG 47
ethosuximide CAPS 13	FANAPT 28	ferrous sulfate TBEC 325 MG 47
ethosuximide SOLN 13	FANAPT TITRATION PACK A 28	fesoterodine fumarate 61
ethynodiol diacet & eth estrad 33	FANTASY LUBRICATED MISC ... 48	FETZIMA CP24 14
etodolac CAPS 4	FANTASY LUBRICATED/SPERMICIDE MISC 48	FETZIMA TITRATION C4PK 14
etodolac TABS 4	FARXIGA (dapagliflozin propanediol) 16	fidaxomicin TABS 200 MG 48
etonogestrel-ethinyl estradiol 34	FASENRA PEN SOAJ 9	

finasteride	45	fluocinolone acetonide (otic)	57	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	9
fingolimod hcl	58	fluocinolone acetonide CREA 0.01 % 39		fluticasone furoate-vilanterol	10
FIRMAGON (240 MG DOSE)	24	fluocinolone acetonide CREA 0.025 %	39	fluticasone propionate (inhalation) AEPB	9
FIRMAGON 80 MG	24	fluocinolone acetonide OIL	39	fluticasone propionate (nasal) SUSP . 55	
flavoxate hcl	61	fluocinolone acetonide OINT	39	fluticasone propionate CREA 0.05 % 40	
flecainide acetate	9	fluocinonide CREA 0.05 %	39	fluticasone propionate hfa	9
floxuridine	23	fluocinonide CREA 0.1 %	39	fluticasone propionate LOTN	40
FLUAD	62	fluocinonide emulsified base	39	fluticasone propionate OINT	40
FLUAD QUADRIVALENT	62	fluocinonide GEL	39	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	10
FLUARIX QUADRIVALENT SUSY 62		fluocinonide OINT	39	fluticasone-salmeterol AERO	10
FLUARIX SUSY	62	fluocinonide SOLN	39	fluvastatin sodium CAPS 20 MG ...	19
FLUBLOK QUADRIVALENT	62	fluorometholone (ophth) SUSP	56	fluvastatin sodium CAPS 40 MG ...	19
FLUBLOK SOSY	62	fluorouracil (topical) CREA 5 % ...	37	fluvoxamine maleate TABS	14
FLUCELVAX QUADRIVALENT SUSP	62	fluorouracil (topical) SOLN	37	FLUZONE HIGH-DOSE QUADRIVALENT	62
FLUCELVAX QUADRIVALENT SUSY	62	fluorouracil 500 MG/10ML	23	FLUZONE HIGH-DOSE SUSY	62
FLUCELVAX SUSP	62	fluoxetine hcl CAPS	14	FLUZONE QUADRIVALENT SUSP 62	
FLUCELVAX SUSY	62	fluoxetine hcl CPDR	14	FLUZONE QUADRIVALENT SUSY 62	
fluconazole SUSR	18	fluoxetine hcl SOLN	14	FLUZONE SUSP	62
fluconazole TABS	18	fluoxetine hcl TABS	14	FLUZONE SUSY	62
flucytosine	18	fluphenazine hcl CONC	28	FML FORTE SUSP	56
fludarabine phosphate SOLN	23	fluphenazine hcl ELIX	28	folic acid TABS	46
fludarabine phosphate SOLR	23	fluphenazine hcl SOLN	28	fondaparinux sodium 10 MG/0.8ML 11	
fludrocortisone acetate TABS	35	fluphenazine hcl TABS	28		
FLULAVAL QUADRIVALENT SUSY . 62		flurandrenolide CREA	39		
FLULAVAL SUSY	62	flurandrenolide LOTN	40		
FLUMIST	62	flurazepam hcl	47		
FLUMIST QUADRIVALENT	62	flurbiprofen sodium	56		
flunisolide (nasal)	54	flurbiprofen TABS	4		

fondaparinux sodium 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML 11	furosemide TABS 42	58
FORA GTEL BLOOD KETONE TEST 41	FUZEON SOLR 29	GLEOSTINE 10 MG 23
FORA TEST N'GO ADV-VOICE-6 CON 41	gabapentin CAPS 12	GLEOSTINE 40 MG, 100 MG 23
formoterol fumarate NEBU 10	gabapentin SOLN 12	glimepiride 1 MG, 2 MG 16
FOSAMAX PLUS D 42	gabapentin TABS 600 MG, 800 MG 12	glimepiride 4 MG 16
fosamprenavir calcium TABS 29	galantamine hydrobromide CP24 . 58	glipizide TABS 5 MG, 10 MG 16
fosfomycin tromethamine 22	galantamine hydrobromide SOLN . 58	glipizide TB24 16
fosinopril sodium & hydrochlorothiazide 20	galantamine hydrobromide TABS . 58	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG 15
fosinopril sodium 19	ganciclovir sodium SOLR 30	glipizide-metformin hcl 500 MG-5 MG 14
fosphenytoin sodium 13	ganirelix acetate 43	GLUCAGEN DIAGNOSTIC 41
FRAGMIN SOSY 11	GARDASIL 9 SUSP 0.5 ML 62	glucagon SOLR IJ 1 MG 15
FREESTYLE LIBRE 14 DAY READER 49	GARDASIL 9 SUSY 0.5 ML 62	glyburide micronized 1.5 MG, 3 MG, 6 MG 16
FREESTYLE LIBRE 14 DAY SENSOR 50	gatifloxacin (ophth) 55	glyburide TABS 16
FREESTYLE LIBRE 2 PLUS SENSOR 50	gefitinib 24	glyburide-metformin 250 MG-1.25 MG 15
FREESTYLE LIBRE 2 READER .. 50	gemcitabine hcl SOLR 2 GM, 200 MG 23	glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG 15
FREESTYLE LIBRE 2 SENSOR .. 50	gemfibrozil TABS 19	glycine (gu irrigant) SOLN 1.5 % .. 45
FREESTYLE LIBRE 3 PLUS SENSOR 50	GENOTROPIN CART SC 43	glycopyrrolate SOLN IJ 4 MG/20ML 60
FREESTYLE LIBRE 3 READER .. 50	GENOTROPIN MINIQUICK PRSY 43	glycopyrrolate TABS 1 MG 60
FREESTYLE LIBRE 3 SENSOR .. 50	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 % 2	glycopyrrolate TABS 2 MG 60
FREESTYLE LIBRE READER 50	gentamicin sulfate (ophth) SOLN .. 55	GLYXAMBI 15
frovatriptan succinate 51	gentamicin sulfate (topical) CREA . 36	GNP PRENATAL TABS 53
FT PRENATAL TABS 53	gentamicin sulfate (topical) OINT .. 36	GNP PRENATAL/FOLIC ACID TABS 53
fulvestrant SOSY 24	gentamicin sulfate IJ 40 MG/ML 2	GOHIBIC 46
furosemide SOLN PO 8 MG/ML, 10 MG/ML 42	GENVOYA 29	GOJJI BLOOD KETONE TEST ... 41
	GILOTRIF 24	granisetron hcl SOLN IV 1 MG/ML 17
	glatiramer acetate SOSY 20 MG/ML . 58	
	glatiramer acetate SOSY 40 MG/ML .	

granisetron hcl TABS 17	HUMIRA (2 PEN) AJKT 3	MG/15ML-7.5 MG/15ML 6
GRASTEK SUBL 2	HUMIRA (2 SYRINGE) PSKT 3	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML 6
griseofulvin microsize SUSP 18	HUMIRA-CD/UC/HS STARTER AJKT 3	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG 6
griseofulvin microsize TABS 18	HUMIRA-PED<40KG CROHNS STARTER PSKT 3	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG 7
griseofulvin ultramicrosize 18	HUMIRA-PED>=40KG CROHNS START PSKT 3	hydrocodone-acetaminophen TABS 325 MG-2.5 MG 7
guanfacine hcl (adhd) 1	HUMIRA-PS/UV/ADOL HS STARTER AJKT 3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG 7
guanfacine hcl 20	HUMIRA-PSORIASIS/UEIT STARTER AJKT 3	hydrocodone-ibuprofen 7.5 MG-200 MG 7
GYNAZOLE-1 64	HUMULIN R U-500 (CONCENTRATED) SOLN SC 16	hydrocortisone (intrarectal) 8
HAEGARDA SOLR SC 46	HUMULIN R U-500 KWIKPEN SOPN SC 16	hydrocortisone (rectal) EX 8
halcinonide CREA 40	HYCAMTIN CAPS 27	hydrocortisone (topical) CREA 1 %, 2.5 % 40
halobetasol propionate CREA 40	hydralazine hcl SOLN 21	hydrocortisone (topical) LOTN 2.5 % . 40
halobetasol propionate OINT 40	hydralazine hcl TABS 21	hydrocortisone (topical) OINT 1 %, 2.5 % 40
HALOG OINT 40	hydrochlorothiazide CAPS 42	hydrocortisone acetate (rectal) 8
haloperidol decanoate 28	hydrochlorothiazide TABS 12.5 MG 42	hydrocortisone butyrate CREA 40
haloperidol lactate CONC 28	hydrochlorothiazide TABS 25 MG, 50 MG 42	hydrocortisone butyrate OINT 40
haloperidol lactate SOLN 28	hydrocodone bitartrate CP12 5	hydrocortisone butyrate SOLN 40
haloperidol TABS 28	hydrocodone bitartrate T24A 5	hydrocortisone sod succinate 100 MG 34
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML 62	hydrocodone bitartrate-homatropine methylbromide TABS 35	hydrocortisone TABS 35
HEMANGEOL SOLN PO 31	hydrocodone polistirex- chlorpheniramine polistirex SUER .35	hydrocortisone vaginal 64
HEMATINIC/FOLIC ACID 47	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325	hydrocortisone valerate CREA 40
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML 11		hydrocortisone valerate OINT 40
heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 11		hydrocortisone w/acetic acid 57
HEPLISAV-B SOSY 63		
HIBERIX SOLR IJ 61		
HUMATROPE CART IJ 43		
HUMIRA (2 PEN) AJKT 80 MG/0.8ML 3		

hydromorphone hcl LIQD	5	idarubicin hcl 20 MG/20ML	25	INTELENCE 25 MG	29
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	5	idarubicin hcl 5 MG/5ML, 10 MG/10ML	25	IONOSOL-MB IN D5W	51
hydromorphone hcl TABS	5	ifosfamide SOLN 1 GM/20ML	23	IPOL IJ	63
hydromorphone hcl TB24 32 MG ...	5	ifosfamide SOLR	23	ipratropium bromide (nasal) 0.03 %	54
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	5	imatinib mesylate TABS	25	ipratropium bromide (nasal) 0.06 %	54
hydroxychloroquine sulfate 100 MG 22		imipramine hcl TABS	14	ipratropium bromide SOLN 0.02 % .	9
hydroxychloroquine sulfate 200 MG 22		imipramine pamoate	14	ipratropium-albuterol SOLN	10
hydroxychloroquine sulfate 400 MG 22		imiquimod 5 %	40	irbesartan	20
hydroxyurea	26	INCRELEX	43	irbesartan-hydrochlorothiazide	20
hydroxyzine hcl SOLN 50 MG/ML ..	8	INCRUSE ELLIPTA	9	irinotecan hcl 40 MG/2ML, 100 MG/5ML	27
hydroxyzine hcl SYRP	8	indapamide TABS 1.25 MG	42	irrigation solutions, physiological ..	53
hydroxyzine hcl TABS	8	indapamide TABS 2.5 MG	42	ISENTRESS CHEW	29
hydroxyzine pamoate CAPS	8	indomethacin CAPS 25 MG, 50 MG	4	ISENTRESS HD TABS	29
HYPERSAL NEBU	35	indomethacin CPCR	4	ISENTRESS TABS	29
HYQVIA	57	INFANRIX	60	ISOLYTE-P IN D5W	51
ibandronate sodium SOLN	42	INFLECTRA SOLR	44	ISOLYTE-S	51
ibandronate sodium TABS	42	INLYTA	24	isoniazid SOLN	23
IBRANCE CAPS	25	INSULIN ASP PROT & ASP FLEXPEN SUPN	16	isoniazid SYRP	23
IBRANCE TABS	25	INSULIN ASPART PROT & ASPART SUSP	16	isoniazid TABS	23
ibuprofen SUSP 100 MG/5ML, 200 MG/10ML	4	INSULIN GLARGINE-YFGN SOLN 16		isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	8
ibuprofen TABS 400 MG, 600 MG ..	4	INSULIN GLARGINE-YFGN SOPN 16		isosorbide dinitrate-hydralazine hcl	32
ibuprofen TABS 800 MG	4	INSULIN LISPRO (1 UNIT DIAL) SOPN	16	isosorbide mononitrate TABS	8
icatibant acetate SOSY	46	INSULIN LISPRO JUNIOR KWIKPEN SOPN	16	isosorbide mononitrate TB24	8
ICLUSIG	25	INSULIN LISPRO PROT & LISPRO SUPN	16	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	36
icosapent ethyl 1 GM	18	INSULIN LISPRO SOLN IJ	16	isradipine CAPS	31
				itraconazole CAPS	18

itraconazole SOLN	18	ketotifen fumarate (ophth) 0.035 % 56	K-Y ME & YOU INTENSE DEVI ...	49
ivabradine hcl TABS	33	KEVZARA SOAJ	KYPROLIS	26
ivermectin (pediculicide)	41	KEVZARA SOSY	labetalol hcl SOLN	31
ivermectin	8	KIMONO COLORS DEVI	labetalol hcl TABS 100 MG, 200 MG .	31
IXEMPRA KIT 15 MG	27	KIMONO MAXX-LARGE FLARE MISC	labetalol hcl TABS 300 MG	31
JAKAFI	25	KIMONO MICRO THIN PLUS MISC .	lacosamide SOLN IV 200 MG/20ML .	12
JANUMET TABS	15	48	lacosamide TABS	12
JANUMET XR TB24 1000 MG-100 MG	15	KIMONO MISC	lactated ringer's (irrigation)	53
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	15	KIMONO PLUS MISC	lactic acid (ammonium lactate) CREA	40
JANUVIA	15	KIMONO PS MISC	lactic acid (ammonium lactate) LOTN 12 %	40
JARDIANCE	16	KIMONO PS PLUS MISC	lactulose (encephalopathy)	45
JULUCA	29	KIMONO SENSATION MISC	lactulose SOLN	48
JYNNEOS	63	KIMONO SENSATION PLUS MISC 49	lamivudine (hbv) TABS	30
KALETRA SOLN	29	KIMONO SPECIAL DEVI	lamivudine SOLN	29
KALYDECO TABS	59	KINRIX SUSY	lamivudine TABS 150 MG	29
KAMELEON LUBRICATED MISC .	48	KISQALI (200 MG DOSE)	lamivudine TABS 300 MG	29
KANJINTI	24	KISQALI (400 MG DOSE)	lamivudine-zidovudine	29
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (potassium chloride in dextrose & sodium chloride)	51	KISQALI (600 MG DOSE)	lamotrigine CHEW 25 MG	12
KCL-LACTATED RINGERS-D5W	51	KISQALI FEMARA (200 MG DOSE) .	lamotrigine CHEW 5 MG	12
ketoconazole (topical) CREA	37	25	lamotrigine TABS	12
ketoconazole (topical) SHAM 2 % .	37	KISQALI FEMARA (400 MG DOSE) .	lamotrigine TBDP	12
ketoconazole	18	25	LANOXIN SOLN IJ (digoxin)	32
KETONE TEST STRP	41	KISQALI FEMARA (600 MG DOSE) .	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	32
ketoprofen CAPS 50 MG	4	25	lansoprazole CPDR 15 MG	60
ketorolac tromethamine (ophth) ...	56	KISQALI FEMARA (200 MG DOSE) .	lansoprazole CPDR 30 MG	60
ketorolac tromethamine TABS	4	25	lanthanum carbonate CHEW	45
KETOSTIX STRP	41	KISQALI FEMARA (400 MG DOSE) .	lapatinib ditosylate	26
		25		
		KISQALI FEMARA (600 MG DOSE) .		
		25		
		KLOXXADO LIQD		
		17		
		KP PRENATAL MULTIVITAMINS TABs		
		53		
		KRINTAFEL		
		22		
		K-Y ME & YOU EXTRA LUBRICATED DEVI		
		49		

LASTACRAFT	56	levetiracetam TB24	12	lidocaine PTCH 5 %	41
latanoprost SOLN	56	levobunolol hcl 0.5 %	55	lidocaine-prilocaine CREA	41
leflunomide	4	levocetirizine dihydrochloride SOLN 18		lincomycin hcl	22
LEMTRADA	58	levocetirizine dihydrochloride TABS 18		linezolid SUSR	22
lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	52	levofloxacin (ophth) 0.5 %	55	linezolid TABS	22
lenalidomide 20 MG	52	levofloxacin in d5w 500 MG/100ML 44		LINZESS	45
LENVIMA (10 MG DAILY DOSE) .	24	levofloxacin SOLN PO	44	liothyronine sodium SOLN	59
LENVIMA (12 MG DAILY DOSE) .	24	levofloxacin TABS 250 MG, 750 MG . 44		liothyronine sodium TABS	59
LENVIMA (14 MG DAILY DOSE) .	24	levofloxacin TABS 500 MG	44	liraglutide	15
LENVIMA (18 MG DAILY DOSE) .	24	levonorgestrel & eth estradiol TABS 33		lisdexafetamine dimesylate CAPS 1	
LENVIMA (20 MG DAILY DOSE) .	24	levonorgestrel (emergency oc) 1.5 MG	34	lisdexafetamine dimesylate CHEW . 1	
LENVIMA (24 MG DAILY DOSE) .	24	levonorgestrel-eth estradiol (triphasic)	33	lisinopril & hydrochlorothiazide ...	20
LENVIMA (4 MG DAILY DOSE) ..	24	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	34	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	19
LENVIMA (8 MG DAILY DOSE) ..	24	levonorgestrel-ethinyl estradiol (continuous)	34	lithium	27
letrozole	24	levonorgestrel-ethinyl estradiol-iron 34		lithium carbonate CAPS	27
leucovorin calcium SOLR	26	levorphanol tartrate TABS 2 MG	5	lithium carbonate TABS	27
leucovorin calcium TABS	26	levothyroxine sodium TABS	59	lithium carbonate TBCR	27
LEUKERAN	23	LEXIVA SUSP	29	LO LOESTRIN FE TABS	34
LEUKINE SOLR IJ	47	lidocaine hcl (mouth-throat) 2 % ...	53	lofexidine hcl	57
leuprolide acetate KIT IJ 1 MG/0.2ML	24	lidocaine hcl (mouth-throat) 4 % ...	53	LOKELMA	53
levalbuterol hcl	10	lidocaine hcl GEL 2 %	41	loperamide hcl CAPS	17
levalbuterol hcl 1.25 MG/0.5ML	10	lidocaine hcl PRSY	41	lopinavir-ritonavir SOLN	29
levalbuterol tartrate	10	lidocaine hcl SOLN	41	lopinavir-ritonavir TABS	29
levetiracetam SOLN IV 500 MG/5ML 12				LOQTORZI	24
levetiracetam TABS 1000 MG	12			loratadine CAPS	18
levetiracetam TABS 250 MG, 750 MG	12			loratadine CHEW	18
levetiracetam TABS 500 MG	12			loratadine SOLN	18
				loratadine TABS	18
				loratadine TBDP	18

lorazepam CONC	8	mafenide acetate PACK	38	melphalan hcl IV	23
lorazepam TABS 0.5 MG, 2 MG	8	malathion	41	memantine hcl TABS	58
lorazepam TABS 1 MG	8	maraviroc TABS 150 MG	29	MENACTRA	61
LORBRENA	26	maraviroc TABS 300 MG	29	MENEST 2.5 MG	44
losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20	MARPLAN	13	MENOSTAR PTWK	44
losartan potassium & hydrochlorothiazide 12.5 MG-50 MG . 20		MASONATAL TABS	53	MENQUADFI 0.5 ML	61
losartan potassium	20	MATULANE	26	MENVEO SOLR	61
LOTEMAX OINT	56	MAXIDEX SUSP OP	56	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	5
loteprednol etabonate GEL	56	MAXX MISC	49	meperidine hcl SOLN PO 50 MG/5ML	5
loteprednol etabonate SUSP	56	MAXX PLUS MISC	49	meperidine hcl TABS 50 MG	5
lovastatin TABS 10 MG, 20 MG ...	19	meclizine hcl TABS 12.5 MG	17	meprobamate	8
lovastatin TABS 40 MG	19	meclizine hcl TABS 25 MG	17	mercaptopurine TABS	23
loxapine succinate	28	meclofenamate sodium CAPS	4	mesalamine CP24	44
lubiprostone	44	MEDROL TABS	35	mesalamine CPDR	44
luliconazole	37	medroxyprogesterone acetate (contraceptive) SUSP IM	34	mesalamine ENEM	45
LUMAKRAS 120 MG, 240 MG	26	medroxyprogesterone acetate (contraceptive) SUSY IM	34	mesalamine SUPP	45
LUMAKRAS 320 MG	26	medroxyprogesterone acetate 10 MG	57	mesalamine TBEC 1.2 GM	45
LUPRON DEPOT (1-MONTH) KIT IM	24	medroxyprogesterone acetate 2.5 MG, 5 MG	57	mesalamine TBEC 800 MG	45
LUPRON DEPOT (3-MONTH) KIT IM	25	mefenamic acid CAPS	4	metaxalone 800 MG	54
LUPRON DEPOT (4-MONTH) IM .	25	mefloquine hcl	22	metformin hcl TABS 1000 MG	15
LUPRON DEPOT (6-MONTH) IM .	25	megestrol acetate (appetite)	57	metformin hcl TABS 500 MG	15
lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	28	megestrol acetate SUSP	25	metformin hcl TABS 850 MG	15
lurasidone hcl 80 MG	28	megestrol acetate TABS	25	metformin hcl TB24 500 MG	15
LYNPARZA TABS	26	MEKINIST TABS 0.5 MG	26	metformin hcl TB24 750 MG	15
LYSODREN	25	MEKINIST TABS 2 MG	26	methadone hcl CONC	5
		meloxicam TABS	4	METHADONE HCL SOLN IJ (methadone hcl)	5
		melphalan	23	methadone hcl SOLN IJ 10 MG/ML .	5
				methadone hcl SOLN PO 10	

MG/5ML 5	methylphenidate hcl TABS 5 MG ... 2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG 31
methadone hcl SOLN PO 5 MG/5ML 5	methylphenidate hcl TB24 18 MG, 27 MG 2	metronidazole (topical) CREA 41
methadone hcl TABS 10 MG 5	methylphenidate hcl TB24 36 MG, 54 MG 2	metronidazole (topical) GEL 0.75 % 41
methadone hcl TABS 5 MG 5	methylphenidate hcl TBCR 10 MG, 20 MG 2	metronidazole (topical) GEL 1 % .. 41
methadone hcl TBSO 5	methylphenidate hcl TBCR 18 MG, 27 MG 2	metronidazole (topical) LOTN 41
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methazolamide TABS 42	methylphenidate PTCH 2	metronidazole vaginal 64
methenamine hippurate 22	methylprednisolone acetate SUSP 35	mexiletine hcl 9
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methocarbamol TABS 500 MG, 750 MG 54	methylprednisolone TABS 35	midodrine hcl 64
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methotrexate sodium TABS 2.5 MG 23	metoclopramide hcl SOLN IJ 5 MG/ML 44	minocycline hcl CAPS 59
methoxsalen rapid 38	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 44	minocycline hcl TABS 59
methscopolamine bromide 60	metolazone 42	minoxidil 2.5 MG, 10 MG 21
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methylphenidate hcl CHEW 2.5 MG 1	metoprolol succinate TB24 25 MG, 50 MG, 100 MG 31	mirtazapine TBDP 13
methylphenidate hcl CHEW 5 MG .. 1	metoprolol tartrate SOLN IV 5 MG/5ML 31	misoprostol 61
methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG 1		mitomycin SOLR IV 20 MG 25
methylphenidate hcl CP24 30 MG .. 1		mitoxantrone hcl 25 MG/12.5ML .. 25
methylphenidate hcl CP24 1		M-M-R II SOLR 63
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		modafinil 200 MG 2

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MODERNA COVID-19 VAC 6M-11Y SUSY63	mupirocin OINT 36	nefazodone hcl 14
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mometasone furoate (nasal) SUSP 55	mycophenolate mofetil CAPS52	neomycin-bacitracin zn-polymyxin 55
mometasone furoate CREA 40	mycophenolate mofetil TABS52	neomycin-polymy-dexameth OINT 56
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nystatin (topical) POWD EX	37	omeprazole TBEC	60	OSPHENA	43
nystatin TABS	18	omeprazole-sodium bicarbonate		OTEZLA TABS	4
nystatin-triamcinolone CREA	37	CAPS 1100 MG-20 MG	61	OTEZLA TBPK	4
nystatin-triamcinolone OINT	37	OMNIFLEX DIAPHRAGM	49	OTEZLA XR TB24 PO 75 MG	4
NYVEPRIA	47	ondansetron hcl SOLN IJ 4 MG/2ML .	17	OTEZLA/OTEZLA XR INITIATION	
octreotide acetate SOLN	43	ondansetron hcl SOLN PO 4		PK TBPK	4
ODEFSEY	30	MG/5ML	17	oxacillin sodium IV 10 GM	57
ODOMZO	24	ondansetron hcl SOSY	17	oxaliplatin SOLN 50 MG/10ML, 100	
OFEV	59	ondansetron hcl TABS 24 MG	17	MG/20ML	23
ofloxacin (ophth)	55	ondansetron hcl TABS 4 MG	17	oxaprozin TABS	4
ofloxacin (otic)	56	ondansetron hcl TABS 8 MG	17	oxazepam CAPS	9
ofloxacin 300 MG, 400 MG	44	ondansetron TBDP 4 MG	17	oxcarbazepine SUSP	12
OGIVRI	24	ondansetron TBDP 8 MG	17	oxcarbazepine TABS 150 MG, 300	
olanzapine SOLR	28	ONE VITE WOMENS PLUS TABS		MG	12
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olmesartan medoxomil	20	ORENITRAM TBCR	32	oxycodone hcl T12A 10 MG, 20 MG,	
olmesartan medoxomil-amlodipine-		ORGOVYX	25	40 MG, 80 MG	6
hydrochlorothiazide	20	ORILISSA	43	oxycodone hcl TABS	6
olmesartan medoxomil-		ORKAMBI PACK	59	oxycodone w/ acetaminophen TABS	
hydrochlorothiazide	20	ORKAMBI TABS	59	325 MG-10 MG, 325 MG-5 MG, 325	
olopatadine hcl (nasal)	54	ORLADEYO	46	MG-7.5 MG	7
olopatadine hcl 0.1 %	56	orphenadrine citrate TB12	54	oxycodone w/ acetaminophen TABS	
olopatadine hcl 0.2 %	56	orphenadrine w/ aspirin & caff 385		325 MG-2.5 MG	7
omega-3-acid ethyl esters	18	MG-30 MG-25 MG	54	oxymorphone hcl TABS	6
omeprazole CPDR	60	oseltamivir phosphate CAPS	30	oxymorphone hcl TB12 40 MG	6

OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	15	bicarbonate-sod chloride	48	perphenazine TABS	28
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	15	PEGASYS SOLN	30	perphenazine-amitriptyline	58
OZEMPIC (2 MG/DOSE) SOPN ...	16	PEGASYS SOSY	30	PERSERIS PRSY	28
paclitaxel 100 MG/16.7ML, 150 MG/25ML	27	PEG-PREP	48	PFIZER COVID-19 VAC BIVALENT .	63
paclitaxel protein-bound particles ..	27	pemetrexed disodium SOLR 500 MG 23		PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	63
paliperidone	28	PENBRAYA	61	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	63
palonosetron hcl SOLN	17	penciclovir	38	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	63
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	42	penicillamine CAPS	52	PFIZER-BIONTECH COVID-19 VACC SUSP	63
PAMIDRONATE DISODIUM SOLN 42		penicillamine TABS	52	phenazopyridine hcl TABS 100 MG, 200 MG	46
PANRETIN	37	PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML ..	57	phendimetrazine tartrate TABS	1
pantoprazole sodium TBEC 20 MG 60		penicillin g potassium 5000000 UNIT 57		phenelzine sulfate	13
pantoprazole sodium TBEC 40 MG 60		penicillin g sodium	57	phenobarbital ELIX	47
paricalcitol CAPS	43	penicillin v potassium SOLR	57	phenobarbital TABS	47
paricalcitol SOLN	43	penicillin v potassium TABS	57	phenoxybenzamine hcl	20
paroxetine hcl SUSP	14	PENMENVY SUSR IM	61	phentermine hcl CAPS	1
paroxetine hcl TABS	14	PENTACEL	60	phenytoin CHEW	13
paroxetine hcl TB24	14	pentamidine isethionate IN	21	phenytoin sodium extended 100 MG, 200 MG, 300 MG	13
pazopanib hcl	26	pentazocine w/ naloxone hcl	7	phenytoin sodium SOLN	13
PEDIARIX SUSY	60	pentoxifylline	46	phenytoin SUSP	13
pediatric multivitamins w/fl CHEW ..	53	perampanel TABS 2 MG	11	PHEXXI	64
PEDVAX HIB SUSP	61	perampanel TABS 4 MG	11	PHOTOFRIN	26
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	47	perampanel TABS 6 MG	11	PIFELTRO	30
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	47	perampanel TABS 8 MG, 10 MG, 12 MG	11	pilocarpine hcl (oral)	53
peg 3350-potassium chloride-sod		perindopril erbumine 2 MG, 8 MG .	19	pilocarpine hcl SOLN 1 %, 2 %, 4 % .	55
		perindopril erbumine 4 MG	19	pimecrolimus	40
		permethrin CREA	41		
		permethrin LIQD EX	41		

pimozide	58	potassium chloride CPCR	52	prazosin hcl CAPS	20
pindolol TABS	31	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 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 %	52	PRECISION XTRA KETONE	41
pioglitazone hcl	16	potassium chloride in dextrose 20 MEQ/L	51	PRED MILD	56
pioglitazone hcl-glimepiride	15	potassium chloride microencapsulated crystals er	52	prednisolone acetate (ophth)	56
pioglitazone hcl-metformin hcl TABS . 15		potassium chloride PACK PO 20 MEQ	52	PREDNISOLONE SODIUM PHOSPHATE	56
PIQRAY (200 MG DAILY DOSE) .	26	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 52		prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML	35
PIQRAY (250 MG DAILY DOSE) .	26	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	52	prednisolone sodium phosphate TBDP	35
PIQRAY (300 MG DAILY DOSE) .	26	potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ	52	prednisolone SOLN	35
pirfenidone CAPS	59	potassium citrate (alkalinizer) TBCR . 45		prednisolone TABS	35
pirfenidone TABS 534 MG	59	potassium phosphates 45 MMOLE/15ML	52	prednisone SOLN	35
piroxicam CAPS	4	PR BENZOYL PEROXIDE WASH LIQD	36	prednisone TABS 1 MG, 5 MG	35
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	51	pralatrexate 20 MG/ML	23	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	35
PLASMA-LYTE A (electrolyte-a) ..	51	pramipexole dihydrochloride TABS 0.125 MG	27	prednisone TBPB	35
PLEGRIDY SOAJ	58	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	27	pregabalin (once-daily) 330 MG ...	58
PLEGRIDY SOSY SC	58	prasugrel hcl	46	pregabalin (once-daily) 82.5 MG, 165 MG	58
PLEGRIDY STARTER PACK SOAJ . 58		pravastatin sodium	19	pregabalin CAPS 225 MG, 300 MG 12	
PLEGRIDY STARTER PACK SOSY SC	58	praziquantel	8	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ...	12
PLENVU	48			pregabalin SOLN	12
PNEUMOVAX 23 SOLN	61			PREHEVBRIO	63
PNEUMOVAX 23 SOSY	61			PREMARIN	64
podofilox SOLN	40			PREMARIN SOLR	44
polymyxin b-trimethoprim	55			PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (estrogens, conjugated)	44
POMALYST	25			PREMPHASE	44
posaconazole SUSP	18				
potassium acetate SOLN 2 MEQ/ML . 52					
potassium bicarbonate TBEF	52				

PREMPRO 44	prochlorperazine 28	23
PRENATAL ONE DAILY TABS 54	prochlorperazine maleate TABS ... 28	pyridostigmine bromide TBCR 23
PRENATAL PLUS TABS 54	progesterone CAPS 57	pyrimethamine 22
PRENATAL PLUS VITAMIN/MINERAL TABS 54	PROGRAF PACK 52	PYZCHIVA 130 MG/26ML 45
PRENATAL TABS 54	PROGRAF SOLN 52	PYZCHIVA 45 MG/0.5ML 38
PRENATAL VITAMIN AND MINERAL TABS 54	PROLASTIN-C SOLN 59	PYZCHIVA 90 MG/ML 38
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 54	PROLASTIN-C SOLR 59	PYZCHIVA SC 45 MG/0.5ML 38
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 54	PROLEUKIN 26	QC PRENATAL TABS 54
PRENATRIX TABS 54	PROLIA SOSY 42	QUADRACEL SUSP 60
PRENATRYL TABS 54	promethazine hcl SUPP 12.5 MG, 25 MG 18	QUADRACEL SUSY 60
PREVNAR 13 61	promethazine hcl SUPP 50 MG ... 18	quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG 28
PREVNAR 20 61	promethazine hcl TABS 18	quetiapine fumarate TB24 28
PREZCOBIX 30	propafenone hcl CP12 9	quinapril hcl 20 MG, 40 MG 19
PREZISTA SUSP 30	propafenone hcl TABS 9	quinapril hcl 5 MG, 10 MG 19
PREZISTA TABS 75 MG, 150 MG 30	proparacaine hcl 56	quinapril-hydrochlorothiazide 12.5 MG-10 MG 20
PRIFTIN 23	propranolol hcl CP24 31	quinapril-hydrochlorothiazide 12.5 MG-20 MG 20
primaquine phosphate TABS 22	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML 31	quinapril-hydrochlorothiazide 25 MG- 20 MG 20
primidone 50 MG, 250 MG 12	propranolol hcl TABS 31	quinidine sulfate TABS 9
PRIORIX SUSR 63	propylthiouracil 59	quinine sulfate CAPS 324 MG 22
probenecid 46	PROQUAD SUSR 63	QVAR REDHALER 10
procainamide hcl SOLN 500 MG/ML . 9	protriptyline hcl 14	rabeprazole sodium TBEC 60
	prucalopride succinate 44	raloxifene hcl 43
	PULMICORT FLEXHALER AEPB . 10	ramelteon 47
	PULMOZYME 59	ramipril CAPS 19
	PX PRENATAL MULTIVITAMINS TABs 54	ranolazine TB12 1000 MG 8
	pyrazinamide 23	ranolazine TB12 500 MG 8
	pyridostigmine bromide SOLN PO . 23	rasagiline mesylate 27
	pyridostigmine bromide TABS 60 MG.	

REALITY LATEX CONDOMS MISC . 49	30	ropinirole hydrochloride TABS27
REALITY LATEX/ULTRA TEXTURED DEVI49	RIDAURA3	ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG27
REALITY LATEX/ULTRA THIN DEVI 49	rifabutin23	ropinirole hydrochloride TB24 8 MG, 12 MG27
REBIF REBIDOSE SOAJ58	rifampin CAPS23	rosuvastatin calcium TABS19
REBIF REBIDOSE TITRATION PACK SOAJ58	rifampin SOLR23	ROTARIX SUSP63
REBIF SOSY58	riluzole TABS55	ROTATEQ SOLN63
REBIF TITRATION PACK SOSY ..58	rimantadine hydrochloride TABS ..31	ROZLYTREK CAPS26
RECOMBIVAX HB SUSP63	ringer's52	RUBRACA26
RECOMBIVAX HB SUSY63	ringer's irrigation53	rufinamide SUSP12
RELENZA DISKHALER31	RINVOQ LQ SOLN2	rufinamide TABS 200 MG13
RELION KETONE TEST STRP ... 41	RINVOQ TB242	rufinamide TABS 400 MG13
RELION LANCET DEVICES 30G .50	risedronate sodium TABS 150 MG 42	RUXIENCE24
RELION LANCETS50	risedronate sodium TABS 35 MG .42	RYBELSUS TABS16
RELION TRUE METRIX TEST STRIPS STRP41	risedronate sodium TABS 5 MG, 30 MG42	sacubitril-valsartan TABS32
RENFLEXIS45	risedronate sodium TBEC42	salsalate5
repaglinide 0.5 MG, 1 MG16	risperidone microspheres28	SANTYL OINT40
repaglinide 2 MG16	risperidone SOLN28	SAVELLA TABS58
REPATHA PUSHTRONEX SYSTEM SOCT19	risperidone TABS28	SAVELLA TITRATION PACK MISC 58
REPATHA SOSY19	risperidone TBDP28	saxagliptin hcl15
REPATHA SURECLICK SOAJ19	ritonavir TABS30	saxagliptin-metformin hcl 1000 MG-2.5 MG15
RETACRIT47	rivaroxaban SUSR 1 MG/ML11	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG15
RETROVIR SOLN30	rivaroxaban TABS 2.5 MG11	scopolamine17
REXULTI28	rivastigmine tartrate CAPS58	SELECT INSULIN SYRINGES ...50
REZVOGLAR KWIKPEN16	rizatriptan benzoate TABS 10 MG .51	SELECT LANCETS50
ribavirin (hepatitis c) CAPS30	rizatriptan benzoate TABS 5 MG ..51	selegiline hcl CAPS27
ribavirin (hepatitis c) TABS 200 MG	rizatriptan benzoate TBDP 10 MG .51	selegiline hcl TABS27
	rizatriptan benzoate TBDP 5 MG ..51	selenium sulfide LOTN 2.5 %38
	roflumilast9	
	romidepsin SOLR26	

SELZENTRY SOLN	30	SKYRIZI SOCT	45	sotalol hcl (afib/afib)	31
SELZENTRY TABS 25 MG, 75 MG 30		SKYRIZI SOLN	45	sotalol hcl TABS 240 MG	31
SEMGLEE (YFGN) SOLN	16	SKYRIZI SOSY	38	sotalol hcl TABS 80 MG, 120 MG, 160 MG	31
SEMGLEE (YFGN) SOPN	16	SLYND	34	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	63
SEREVENT DISKUS	10	SM PRENATAL VITAMINS TABS	54	SPIKEVAX SUSP	63
sertraline hcl CONC	14	SODIUM ACETATE SOLN (sodium acetate)	51	SPIKEVAX SUSY	63
sertraline hcl TABS	14	sodium acetate SOLN	51	spinosad	41
sevelamer carbonate PACK	45	sodium chloride (gu irrigant) 0.9 %	45	SPIRIVA RESPIMAT AERS IN	9
sevelamer carbonate TABS	45	sodium chloride (inhalant) NEBU 7 %	35	spironolactone & hydrochlorothiazide	42
SHINGRIX	63	sodium citrate & citric acid	45	spironolactone TABS	42
SIGNIFOR	43	sodium fluoride CHEW	52	SPRAVATO (56 MG DOSE)	14
sildenafil citrate (pulmonary hypertension) SOLN	32	sodium phenylbutyrate POWD	43	SPRAVATO (84 MG DOSE)	14
sildenafil citrate (pulmonary hypertension) SUSR	32	sodium phenylbutyrate TABS	43	stannous fluoride CONC	53
sildenafil citrate (pulmonary hypertension) TABS	32	sodium polystyrene sulfonate POWD 53		STELARA 130 MG/26ML	45
sildenafil citrate	32	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	53	STELARA SOLN 45 MG/0.5ML ...	38
silodosin	45	sodium sulfate-potassium sulfate- magnesium sulfate	48	STELARA SOSY 45 MG/0.5ML ...	38
silver sulfadiazine	38	SOFOSBUVIR-VELPATASVIR TABS	30	STELARA SOSY 90 MG/ML	38
SIMLANDI (1 PEN) AJKT	3	solifenacin succinate TABS	61	STEQEYMA	45
SIMLANDI (1 SYRINGE) PSKT	3	SOLQUA	15	STEQEYMA 45 MG/0.5ML	38
SIMLANDI (2 PEN) AJKT	3	SOLU-CORTEF 250 MG	35	STEQEYMA 90 MG/ML	38
SIMLANDI (2 SYRINGE) PSKT	3	SOLU-CORTEF 500 MG, 1000 MG 35		STIOLTO RESPIMAT	10
SIMPONI ARIA SOLN	3	SOLU-MEDROL 2 GM	35	STIVARGA	26
SIMULECT	52	sorafenib tosylate	26	streptomycin sulfate SOLR	2
simvastatin TABS	19	SORBITOL 3 %	45	STRIBILD	30
sirolimus TABS	52	SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	45	STRIVERDI RESPIMAT	10
SIRTURO	23			SUBLOCADE SOSY 100 MG/0.5ML . 7	
SKYRIZI PEN SOAJ	38			SUBLOCADE SOSY 300 MG/1.5ML . 7	

SUBSYS LIQD 800 MCG	6	sumatriptan succinate TABS	51	tamoxifen citrate TABS	25
sucralfate SUSP	60	sumatriptan-naproxen sodium	50	tamsulosin hcl	46
sucralfate TABS	60	sunitinib malate 12.5 MG, 25 MG, 50		tavaborole	37
SUFLAVE	48	MG	26	tazarotene CREA 0.1 %	38
sulconazole nitrate CREA	37	sunitinib malate 37.5 MG	26	TAZVERIK	26
sulconazole nitrate SOLN	37	SUNOSI 150 MG	1	TDVAX SUSP	60
sulfacetamide sodium (acne)	36	SUNOSI 75 MG	1	TEFLARO	33
sulfacetamide sodium (ophth) SOLN .	55	SUTAB	48	TEGRETOL SUSP (carbamazepine) .	13
sulfacetamide sodium w/ sulfur		SYMTUZA	30	TEGRETOL TABS (carbamazepine) .	13
CREA 10 %-5 %	36	SYNAREL	43	telmisartan	20
sulfacetamide sodium w/ sulfur LIQD		SYNJARDY TABS	15	telmisartan-amlodipine	21
10 %-5 %	36	SYNJARDY XR TB24 1000 MG-10		telmisartan-hydrochlorothiazide ...	21
sulfacetamide sodium w/ sulfur LIQD		MG, 1000 MG-12.5 MG, 1000 MG-5		temazepam 15 MG, 30 MG	47
9 %-4.5 %	36	MG	15	temazepam 7.5 MG, 22.5 MG	47
sulfacetamide sod-prednisolone		SYNJARDY XR TB24 1000 MG-25		TEMODAR SOLR	23
SOLN	56	MG	15	temozolomide CAPS	23
sulfadiazine TABS	59	SYNRIBO	26	temsirolimus	26
sulfamethoxazole-trimethoprim SOLN		SYNTHROID TABS (levothyroxine		TENIVAC SUSP 2 LFU-5 LFU	60
.....	21	sodium)	60	tenofovir disoproxil fumarate TABS	30
sulfamethoxazole-trimethoprim SUSP		TABLOID	23	terazosin hcl	20
.....	21	tacrolimus (topical) OINT	40	terbinafine hcl TABS	18
sulfamethoxazole-trimethoprim TABS		tacrolimus CAPS	52	terbutaline sulfate SOLN	10
.....	21	tadalafil (pulmonary hypertension)		terbutaline sulfate TABS	10
SULFAMYLON CREA	38	TABS	32	terconazole vaginal CREA	64
sulfasalazine TABS	45	tadalafil 5 MG	32	terconazole vaginal SUPP	64
sulfasalazine TBEC	45	TAFINLAR CAPS	26	teriflunomide	58
sulindac TABS	4	tafluprost	56	teriparatide SOPN	42
sumatriptan	51	TAGRISSO 40 MG	24	TESTOSTERONE CYPIONATE	
sumatriptan succinate SOAJ	51	TAGRISSO 80 MG	24		
sumatriptan succinate SOCT	51	TAKHZYRO SOLN	46		
sumatriptan succinate SOLN 6		TAKHZYRO SOSY	46		
MG/0.5ML	51	TALZENNA	26		

SOLN IJ 200 MG/ML	7	tobramycin (ophth) SOLN	55	MG, 240 MG-4 MG	21
testosterone cypionate SOLN IM ...	7	tobramycin NEBU	2	tranexamic acid SOLN 1000 MG/10ML	47
testosterone enanthate SOLN IM ...	7	tobramycin-dexamethasone SUSP 56		tranexamic acid TABS	47
TETANUS-DIPHTHERIA TOXOIDS		TODAY SPONGE MISC	63	tranylcypromine sulfate	13
TD SUSP	60	tolcapone	27	travoprost SOLN	56
tetrabenazine	58	tolmetin sodium CAPS	4	TRAZIMERA	24
tetracycline hcl CAPS	59	tolmetin sodium TABS 600 MG	4	trazodone hcl TABS	14
THALOMID	52	TOLSURA CAPS	18	TRELEGY ELLIPTA	10
theophylline ELIX	11	tolterodine tartrate CP24	61	TRELSTAR MIXJECT	25
theophylline SOLN	11	tolterodine tartrate TABS	61	TREMFYA ONE-PRESS SOPN SC 100 MG/ML	38
theophylline TB12	11	tolvaptan TABS	43	TREMFYA PEN SOAJ 100 MG/ML 38	
theophylline TB24	11	topiramate CPSP 15 MG	13	TREMFYA PEN SOAJ SC 200 MG/2ML	45
THERANATAL CORE NUTRITION TABS	54	topiramate CPSP 25 MG	13	TREMFYA SOLN IV	45
thioridazine hcl	28	topiramate CS24	13	TREMFYA SOSY 100 MG/ML	38
thiotepa 15 MG	23	topiramate TABS 200 MG	13	TREMFYA SOSY SC 200 MG/2ML 45	
thiothixene	28	topiramate TABS 25 MG, 100 MG .	13	TREMFYA SOSY SC 200 MG/2ML 45	
THYMOGLOBULIN	52	topiramate TABS 50 MG	13	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	45
THYROGEN 0.9 MG	41	topotecan hcl SOLR	27	treprostinil SOLN IJ	32
tiagabine hcl	13	toremifene citrate	25	TRESIBA FLEXTOUCH SOPN	16
ticagrelor 60 MG, 90 MG	46	torsemide TABS	42	TRESIBA SOLN	16
timolol maleate (ophth) SOLG	55	TRACLEER TBSO 32 MG (bosentan)	32	tretinoin (chemotherapy)	26
timolol maleate (ophth) SOLN	55	tramadol hcl TABS 50 MG	6	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	36
timolol maleate TABS	31	tramadol hcl TB24	6	tretinoin GEL 0.01 %, 0.025 %	36
tinidazole	21	tramadol-acetaminophen	7	tretinoin microsphere 0.1 %	36
tiotropium bromide CAPS IN 18 MCG	9	trandolapril 1 MG, 2 MG	19	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	23
TIVICAY PD TBSO	30	trandolapril 4 MG	19	triamcinolone acetonide (mouth) ..	53
TIVICAY TABS	30	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21		
tizanidine hcl CAPS	54	trandolapril-verapamil hcl 240 MG-2			
tizanidine hcl TABS	54				

triamcinolone acetonide (nasal) AERO 55	TRIKAFTA TBPK 59	TRUSTEX LUB/SPERMICIDE EX ST MISC 49
triamcinolone acetonide (topical) CREA 0.025 % 40	trimethobenzamide hcl CAPS 17	TRUSTEX LUB/SPERMICIDE XL MISC 49
triamcinolone acetonide (topical) CREA 0.1 % 40	trimethoprim TABS 21	TRUSTEX LUBRICATED EX LARGE MISC 49
triamcinolone acetonide (topical) CREA 0.5 % 40	trimipramine maleate CAPS 14	TRUSTEX LUBRICATED EXTRA ST MISC 49
triamcinolone acetonide (topical) LOTN 0.025 % 40	TRINTELLIX 14	TRUSTEX LUBRICATED MISC ... 49
triamcinolone acetonide (topical) LOTN 0.1 % 40	TRIUMEQ PD TBSO 30	TRUSTEX LUBRICATED/SPERMICIDE MISC 49
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 % 40	TRIUMEQ TABS 30	TRUSTEX NATURAL CONDOMS + LUBE MISC 49
triamcinolone acetonide (topical) OINT 0.5 % 40	TRIZIVIR 30	TRUSTEX RIA LUB/SPERMICIDE MISC 49
triamcinolone acetonide SUSP 40 MG/ML 35	TROJAN BARESKIN DEVI 49	TRUSTEX RIA LUBRICATED MISC . 49
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG 42	TROJAN MAGNUM MISC 49	TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC 49
triamterene & hydrochlorothiazide TABS 42	TROJAN ULTRA THIN MISC 49	TRUXIMA 24
triamterene CAPS 42	TROJAN ULTRA THIN/SPERMICIDAL MISC 49	TUKYSA 24
triazolam 47	TROJAN-ENZ LUBRICATED MISC 49	TURALIO 125 MG 26
TRICARE TABS 54	TROJAN-ENZ/SPERMICIDAL MISC . 49	TWINRIX SUSY 63
trientine hcl 250 MG 52	tropicamide SOLN 0.5 % 55	TWIRLA 34
trifluoperazine hcl TABS 28	tropicamide SOLN 1 % 55	TYBLUME CHEW 34
trifluridine 55	trospium chloride CP24 61	TYBOST 30
trihexyphenidyl hcl SOLN 27	trospium chloride TABS 61	TYMLOS 42
trihexyphenidyl hcl TABS 27	TRUE COVER DEVI 49	TYVASO REFILL KIT SOLN IN ... 32
TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG . 15	TRUE METRIX BLOOD GLUCOSE TEST STRP 41	TYVASO SOLN IN 32
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG 15	TRUE METRIX LEVEL 3 SOLN ... 50	TYVASO STARTER KIT SOLN IN 32
	TRULANCE 44	UBRELVY 100 MG 50
	TRULICITY 16	UBRELVY 50 MG 50
	TRUMENBA 0.5 ML 61	
	TRUSTEX COLOR CONDOMS + LUBE MISC 49	
	TRUSTEX LUB/RIBBED/STUDDERED MISC 49	

UDENYCA ONBODY SOSY47	VAQTA63	VIRACEPT TABS 250 MG30
UDENYCA SOAJ47	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML63	VIRACEPT TABS 625 MG30
UDENYCA SOSY47	varenicline tartrate TABS59	VIREAD POWD30
umeclidinium-vilanterol10	varenicline tartrate TBPk59	VIREAD TABS 150 MG, 200 MG, 250 MG30
UPTRAVI TABS 200 MCG33	VARIVAX SUSR63	VISTOGARD17
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG33	VARUBI (180 MG DOSE) TBPk ...18	VITAMIN D2 TABS 400 UNIT64
UPTRAVI TITRATION TBPk33	VAXELIS SUSP60	VITATHELY WITH GINGER TABS 54
ursodiol CAPS44	VAXELIS SUSY60	VITRAKVI CAPS26
ursodiol TABS44	VAXNEUVANCE61	VITRAKVI SOLN26
UVADEX26	VCF VAGINAL CONTRACEPTIVE FILM63	VIVITROL17
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XIGDUO XR 1000 MG-2.5 MG, 1000		24000 UNIT-17000 UNIT-5000 UNIT,		
MG-5 MG	15	42000 UNIT-32000 UNIT-10000		
XOSPATA	26	UNIT, 63000 UNIT-47000 UNIT-		
XTANDI CAPS	25	15000 UNIT, 84000 UNIT-63000		
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YESINTEK 130 MG/26ML	45	zidovudine SYRP		30
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YUFLYMA (1 PEN) AJKT	3	ZIRABEV		24
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