

2027



Formulary Formulario

EFFECTIVE JANUARY 1, 2027
EN VIGENCIA DESDE EL
1.º DE ENERO DE 2027



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.

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 “hemoflia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemoflia”, 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.

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	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate)	NF	QL(4 EA daily)
Amphetamines			dextroamphetamine sulfate CP24 5 MG	1B	
ADDERALL XR CP24 15 MG (Use amphetamine-dextroamphetamine)	NF		dextroamphetamine sulfate CP24 10 MG, 15 MG	1B	QL(4 EA daily)
ADDERALL XR CP24 20 MG, 25 MG, 30 MG (Use amphetamine-dextroamphetamine)	NF	QL(2 EA daily)	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	1B	
ADDERALL XR CP24 5 MG, 10 MG (Use amphetamine-dextroamphetamine)	NF	QL(1 EA daily)	dextroamphetamine sulfate TABS 5 MG, 10 MG	1B	QL(4 EA daily)
ADDERALL TABS 30 MG (Use amphetamine-dextroamphetamine)	NF	QL(2 EA daily)	EVEKEO TABS (Use amphetamine sulfate)	NF	PA
ADDERALL TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG (Use amphetamine-dextroamphetamine)	NF	QL(3 EA daily)	lisdexamfetamine dimesylate CAPS	1B	QL(1 EA daily); ST
amphetamine sulfate TABS	3	PA	lisdexamfetamine dimesylate CHEW	1B	QL(1 EA daily); ST
amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG	1B	QL(2 EA daily)	methamphetamine hcl	1B	QL(5 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine CP24 5 MG, 10 MG	1B	QL(1 EA daily)	VYVANSE CAPS (Use lisdexamfetamine dimesylate)	NF	QL(1 EA daily); ST
amphetamine-dextroamphetamine CP24 15 MG	1B		VYVANSE CHEW (Use lisdexamfetamine dimesylate)	NF	QL(1 EA daily); ST
amphetamine-dextroamphetamine TABS 30 MG	1B	QL(2 EA daily)	Anorexiants Non-Amphetamine		
amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG	1B	QL(3 EA daily)	phendimetrazine tartrate TABS	1B	PA
DESOXYN (Use methamphetamine hcl)	NF	QL(5 EA daily); AL(At least 6 yrs old)	phentermine hcl CAPS	1B	PA
			Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			atomoxetine hcl 60 MG, 80 MG, 100 MG	1B	QL(1 EA daily); AL(At least 6 yrs old)
			atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG	1B	QL(2 EA daily); AL(At least 6 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
INTUNIV (Use <i>guanfacine hcl (adhd)</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
STRATTERA 60 MG, 80 MG, 100 MG (Use <i>atomoxetine hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (Use <i>atomoxetine hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI 75 MG	3	QL(2 EA daily); PA
SUNOSI 150 MG	3	QL(1 EA daily); PA
Stimulants - Misc.		
APTENSIO XR CP24 (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily)
<i>armodafinil</i>	1B	QL(1 EA daily); AL(At least 17 yrs old); PA
CONCERTA TBCR 18 MG, 27 MG (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG, 54 MG (Use <i>methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
DAYTRANA PTCH (Use <i>methylphenidate</i>)	NF	QL(1 EA daily); 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)
FOCALIN XR CP24 (Use <i>dexmethylphenidate hcl</i>)	NF	QL(1 EA daily)
FOCALIN TABS (Use <i>dexmethylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
METADATE CD CPR (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
METHYLIN SOLN (Use <i>methylphenidate hcl</i>)	NF	QL(30 ML daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 EA daily)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 EA daily)
<i>methylphenidate hcl CHEW 10 MG</i>	1B	QL(5 EA daily)
<i>methylphenidate hcl CP24</i>	1B	QL(1 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CPR</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

Drug Name	Drug Tier	Requirements/ Limits
<i>modafinil 200 MG</i>	1B	QL(2 EA daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 EA daily); PA
NUVIGIL (Use <i>armodafinil</i>)	NF	QL(1 EA daily); AL(At least 17 yrs old); PA
PROVIGIL 100 MG (Use <i>modafinil</i>)	NF	QL(1 EA daily); PA
PROVIGIL 200 MG (Use <i>modafinil</i>)	NF	QL(2 EA daily); PA
RITALIN LA CP24 30 MG (Use <i>methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (Use <i>methylphenidate hcl</i>)	NF	QL(6 EA daily); AL(At least 6 yrs old)
RITALIN TABS 10 MG, 20 MG (Use <i>methylphenidate hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

Allergenic Extracts

GRASTEK SUBL	3	PA
PALFORZIA INITIAL DOSE 1-3YRS CSPK	3	PA

AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections

Aminoglycosides

<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
ARIKAYCE	4	PA
<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	

Drug Name	Drug Tier	Requirements/ Limits
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA
<i>neomycin sulfate TABS</i>	1B	
<i>streptomycin sulfate SOLR</i>	3	
TOBI NEBU (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA
<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
<i>tofacitinib citrate SOLN 1 MG/ML</i>	4	QL(20 ML daily); PA
<i>tofacitinib citrate TABS 5 MG, 10 MG</i>	4	QL(2 EA daily); PA
<i>tofacitinib citrate TB24 11 MG, 22 MG</i>	4	QL(1 EA daily); PA
XELJANZ XR TB24 11 MG, 22 MG (Use <i>tofacitinib citrate</i>)	4	QL(1 EA daily); PA
XELJANZ SOLN 1 MG/ML (Use <i>tofacitinib citrate</i>)	4	QL(20 ML daily); PA
XELJANZ TABS 5 MG, 10 MG (Use <i>tofacitinib citrate</i>)	4	QL(2 EA daily); PA

Antirheumatic Antimetabolites

OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
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Anti-TNF-alpha - Monoclonal Antibodies

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YUFLYMA-CD/UC/HS STARTER AJKT	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	<i>diclofenac potassium TABS 50 MG</i>	1B	
Gold Compounds			<i>diclofenac sodium TB24</i>	1B	
AURANOFIN 3 MG	3	QL(3 EA daily)	<i>diclofenac sodium TBEC</i>	1B	
RIDAURA	3	QL(3 EA daily)	<i>diclofenac w/ misoprostol TBEC</i>	1B	
Interleukin-6 Receptor Inhibitors			EC-NAPROSYN TBEC 375 MG (<i>Use naproxen</i>)	NF	
ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); PA	EC-NAPROSYN TBEC 500 MG (<i>Use naproxen</i>)	NF	QL(3 EA daily)
ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail; 20 ML per 28 days mail); PA	<i>etodolac CAPS</i>	1B	
ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail; 40 ML per 28 days mail); PA	<i>etodolac TABS</i>	1B	
ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); PA	<i>fenoprofen calcium TABS</i>	1B	QL(4 EA daily); ST
KEVZARA SOAJ	4	QL(0.082 ML daily); PA	<i>flurbiprofen TABS</i>	1B	
KEVZARA SOSY	4	QL(0.082 ML daily); PA	<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1B	RX/OTC
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>ibuprofen TABS 800 MG</i>	1B	
ALEVE TABS (<i>Use naproxen sodium</i>)	NF		<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
ANAPROX DS TABS (<i>Use naproxen sodium</i>)	NF		<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
ARTHROTEC TBEC (<i>Use diclofenac w/ misoprostol</i>)	NF		<i>indomethacin CPCR</i>	1B	
CELEBREX (<i>Use celecoxib</i>)	NF	QL(2 EA daily)	<i>ketoprofen CAPS 50 MG, 75 MG</i>	1B	
<i>celecoxib</i>	1B	QL(2 EA daily)	<i>ketorolac tromethamine TABS</i>	1B	QL(20 EA per fill retail; 20 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
DAYPRO TABS (<i>Use oxaprozin</i>)	NF		LODINE TABS (<i>Use etodolac</i>)	NF	
			LURBIPR TABS 100 MG (<i>Use flurbiprofen</i>)	NF	
			LURBIRO TABS 100 MG (<i>Use flurbiprofen</i>)	NF	
			<i>meloxicam TABS</i>	1A	QL(1 EA daily)
			<i>nabumetone</i>	1B	
			NAPROSYN TABS 500 MG (<i>Use naproxen</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>naproxen sodium TABS 550 MG</i>	1B	
<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	
TOLECTIN DS CAPS 400 MG (<i>Use tolmetin sodium</i>)	NF	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA XR TB24 PO 75 MG	4	QL(1 EA daily); PA
OTEZLA/OTEZLA XR INITIATION PK TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
OTEZLA TABS	4	QL(2 EA daily); PA
OTEZLA TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
OTEZLA TBPk	4	1 package(s) per 180 day(s) retail; PA
Pyrimidine Synthesis Inhibitors		
ARAVA (<i>Use leflunomide</i>)	NF	QL(1 EA daily)
<i>leflunomide</i>	1B	QL(1 EA daily)
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	4	QL(0.146 ML daily); PA
ENBREL SURECLICK SOAJ	4	QL(0.146 ML daily); PA
ENBREL SOLN	4	QL(0.146 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ML daily); PA
ENBREL SOSY 50 MG/ML	4	QL(0.286 ML daily); PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 EA daily)
ESGIC TABS (<i>Use butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
FIORICET CAPS (<i>Use butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
Salicylates		
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 325 MG</i>	1A	
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>diflunisal TABS</i>	1B	
<i>salsalate</i>	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Opioid Agonists			<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B	
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 EA daily); PA
DEMEROL SOLN IJ (<i>Use meperidine hcl</i>)	NF		<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 EA daily); PA
DILAUDID LIQD (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply	<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply
DILAUDID TABS (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply; QL(8 EA daily)	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ML per fill retail)
DISKETS TBSO 40 MG (<i>Use methadone hcl</i>)	NF	QL(2 EA daily)	<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (<i>Use morphine sulfate</i>)	NF		<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
FENTANYL CITRATE (PF) SOLN IJ 50 MCG/ML (<i>Use fentanyl citrate</i>)	NF	QL(2 ML daily); PA	<i>methadone hcl CONC</i>	1B	QL(10 ML daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 EA daily); PA	<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
<i>fentanyl citrate SOLN IJ 100 MCG/2ML</i>	3	QL(6 ML daily); PA	<i>methadone hcl SOLN PO 5 MG/5ML</i>	1B	QL(100 ML daily)
<i>fentanyl citrate SOLN IJ 50 MCG/ML</i>	3	QL(2 ML daily); PA	<i>methadone hcl SOLN PO 10 MG/5ML</i>	1B	QL(50 ML 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)	METHADONE HCL SOLN IJ (<i>Use methadone hcl</i>)	1B	
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 EA daily)
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA	<i>methadone hcl TABS 5 MG</i>	1B	QL(4 EA daily)
HYDROMORPHONE HCL PF SOLN IJ (<i>Use hydromorphone hcl</i>)	NF		<i>methadone hcl TBSO</i>	1B	QL(2 EA daily)
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply	METHADOSE SUGAR-FREE CONC (<i>Use methadone hcl</i>)	NF	QL(10 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
METHADOSE CONC (Use methadone hcl)	NF	QL(10 ML daily)
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	1B	QL(2 EA daily); PA
morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	1B	
morphine sulfate SOLN PO 20 MG/5ML	1B	New starts limited to 7 day supply; QL(50 ML daily)
morphine sulfate SOLN PO 10 MG/5ML	1B	New starts limited to 7 day supply; QL(100 ML daily)
morphine sulfate TABS	1B	New starts limited to 7 day supply; QL(6 EA daily)
morphine sulfate TBCR	1B	QL(2 EA daily)
MS CONTIN TBCR (Use morphine sulfate)	NF	QL(2 EA daily)
NUCYNTA TABS 50 MG (Use tapentadol hcl)	NF	QL(6 EA daily); PA
oxycodone hcl TABS	1B	New starts limited to 7 day supply; QL(12 EA daily)
oxymorphone hcl TABS	1B	QL(12 EA daily); PA
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG	1B	QL(2 EA daily); PA
oxymorphone hcl TB12 40 MG	1B	QL(4 EA daily); PA
ROXICODONE TABS 15 MG, 30 MG (Use oxycodone hcl)	NF	New starts limited to 7 day supply; QL(12 EA daily)
tapentadol hcl TABS 50 MG	3	QL(6 EA daily); PA
tramadol hcl TABS 50 MG	1A	New starts limited to 7 day supply; QL(8 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
tramadol hcl TB24	1B	QL(1 EA daily)
Opioid Combinations		
acetaminophen w/ codeine SOLN	1A	New starts limited to 7 day supply; QL(75 ML daily)
acetaminophen w/ codeine TABS 30 MG-300 MG	1A	New starts limited to 7 day supply; QL(12 EA daily)
acetaminophen w/ codeine TABS 15 MG-300 MG	1B	New starts limited to 7 day supply; QL(13 EA daily)
acetaminophen w/ codeine TABS 60 MG-300 MG	1B	New starts limited to 7 day supply; QL(6 EA daily)
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	3	New starts limited to 7 day supply; PA
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	1B	New starts limited to 7 day supply; PA
butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-300 MG	1B	New starts limited to 7 day supply
butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-325 MG	1B	New starts limited to 7 day supply; QL(6 EA daily)
butalbital-aspirin-cafeine w/cod	1B	New starts limited to 7 day supply; QL(6 EA daily)
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use butalbital-acetaminophen-cafeine w/ codeine)	NF	New starts limited to 7 day supply
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	1B	New starts limited to 7 day supply; QL(180 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1B	New starts limited to 7 day supply	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 EA daily)
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1A	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>buprenorphine hcl SOLN</i>	1B	
<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 EA daily)	<i>buprenorphine hcl SUBL</i>	1A	QL(3 EA daily)
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA	<i>buprenorphine PTWK</i>	1B	QL(0.143 EA daily); PA
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ML daily); PA
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)</i>	NF	New starts limited to 7 day supply; QL(12 EA daily)	<i>BUTRANS PTWK (Use buprenorphine)</i>	NF	QL(0.143 EA daily); PA
<i>PERCOCET TABS 325 MG-2.5 MG (Use oxycodone w/ acetaminophen)</i>	NF	New starts limited to 7 day supply; QL(13 EA daily)	<i>nalbuphine hcl 10 MG/ML</i>	3	QL(8 ML daily); PA
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)	<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
Opioid Partial Agonists			<i>SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)</i>	NF	QL(2 EA daily)
			<i>SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)</i>	NF	QL(3 EA daily)
			ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
			Androgens		
			<i>danazol CAPS</i>	1B	
			<i>methyltestosterone TABS</i>	3	
			<i>testosterone cypionate SOLN IM</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
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
CORTENEMA (Use hydrocortisone (intrarectal))	NF	
<i>hydrocortisone (intrarectal)</i>	1B	
UCERIS (Use budesonide (intrarectal))	NF	QL(3.2 GM daily); PA
Rectal Steroids		
ANUCORT-HC 25 MG (Use hydrocortisone acetate (rectal))	NF	
ANUSOL-HC EX (Use hydrocortisone (rectal))	NF	
ANUSOL-HC 25 MG (Use hydrocortisone acetate (rectal))	NF	
HEMMOREX-HC 25 MG, 30 MG (Use hydrocortisone acetate (rectal))	NF	
<i>hydrocortisone (rectal) EX</i>	1B	
<i>hydrocortisone acetate (rectal)</i>	1B	
PROCTOCORT (Use hydrocortisone acetate (rectal))	NF	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 GM daily)
RECTIV (Use nitroglycerin (intra-anal))	NF	QL(2 GM daily)
ANTHELMINTICS - Drugs to Treat Worm		

Drug Name	Drug Tier	Requirements/ Limits
Infections		
Anthelmintics		
<i>albendazole</i>	1B	PA
BILTRICIDE (Use praziquantel)	NF	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 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
<i>praziquantel</i>	1B	PA
STROMEKTOL (Use ivermectin)	NF	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 EA daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 EA daily)
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate)	NF	
<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-DUR PT24 (<i>Use nitroglycerin</i>)	NF	
<i>nitroglycerin OINT</i>	1B	
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
NITROSTAT SUBL (<i>Use nitroglycerin</i>)	NF	
ANTI-ANXIETY 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	
VISTARIL CAPS 25 MG (<i>Use hydroxyzine pamoate</i>)	NF	
Benzodiazepines		
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 EA daily)
<i>alprazolam TABS 2 MG</i>	1B	QL(4 EA daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
ATIVAN TABS 1 MG (<i>Use lorazepam</i>)	NF	QL(4 EA daily)
ATIVAN TABS 0.5 MG, 2 MG (<i>Use lorazepam</i>)	NF	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<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 0.5 MG, 2 MG</i>	1A	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	1A	QL(4 EA daily)
<i>oxazepam CAPS</i>	1B	
VALIUM TABS (<i>Use diazepam</i>)	NF	QL(4 EA daily)
XANAX XR TB24 (<i>Use alprazolam</i>)	NF	
XANAX TABS (<i>Use alprazolam</i>)	NF	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
NORPACE CAPS (<i>Use disopyramide phosphate</i>)	NF	
<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	

Drug Name	Drug Tier	Requirements/ Limits
TIKOSYN (Use dofetilide)	NF	
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		
cromolyn sodium NEBU	1B	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA 17 MCG/ACT (Use ipratropium bromide hfa)	NF	QL(0.44 GM daily)
INCRUSE ELLIPTA 62.5 MCG/ACT (Use umeclidinium bromide)	2	QL(1 EA daily)
ipratropium bromide hfa 17 MCG/ACT	1B	QL(0.44 GM daily)
ipratropium bromide SOLN 0.02 %	1B	QL(15 ML daily)
SPIRIVA HANDIHALER CAPS IN (Use tiotropium bromide)	NF	QL(1 EA daily)
SPIRIVA RESPIMAT AERS IN	2	QL(0.14 GM daily)
tiotropium bromide CAPS IN 18 MCG	1B	QL(1 EA daily)
TUDORZA PRESSAIR	2	QL(0.04 EA daily)
umeclidinium bromide 62.5 MCG/INH	1B	QL(1 EA daily)
Leukotriene Modulators		
ACCOLATE (Use zafirlukast)	NF	QL(2 EA daily)
montelukast sodium CHEW	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
montelukast sodium PACK	1B	QL(1 EA daily)
montelukast sodium TABS	1B	QL(1 EA daily)
SINGULAIR CHEW (Use montelukast sodium)	NF	QL(1 EA daily)
SINGULAIR PACK (Use montelukast sodium)	NF	QL(1 EA daily)
SINGULAIR TABS (Use montelukast sodium)	NF	QL(1 EA daily)
zafirlukast	1B	QL(2 EA daily)
zileuton TB12	3	QL(4 EA daily); PA
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (Use roflumilast)	NF	QL(1 EA daily)
roflumilast	1B	QL(1 EA daily)
Steroid Inhalants		
ALVESCO	3	PA
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (Use fluticasone furoate (inhalation))	NF	
ASMANEX (120 METERED DOSES) AEPB	2	QL(0.04 EA daily)
ASMANEX (14 METERED DOSES) AEPB	2	QL(0.04 EA daily)
ASMANEX (30 METERED DOSES) AEPB	2	QL(0.04 EA daily)
ASMANEX (60 METERED DOSES) AEPB	2	QL(0.04 EA daily)
ASMANEX HFA AERO	2	QL(0.44 GM daily)
beclomethasone dipropionate 40 MCG/ACT, 80 MCG/ACT	1B	
budesonide (inhalation) SUSP	1B	QL(4 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLOVENT HFA 44 MCG/ACT (<i>Use fluticasone propionate hfa</i>)	NF		<i>albuterol sulfate SYRP</i>	1B	
<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>albuterol sulfate TABS</i>	1B	
<i>fluticasone propionate (inhalation) AEPB</i>	1B		ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>Use umeclidinium-vilanterol</i>)	NF	
<i>fluticasone propionate hfa</i>	1B	QL(0.8 GM daily)	<i>arformoterol tartrate</i>	1B	QL(4 ML daily)
PULMICORT FLEXHALER AEPB 180 MCG/ACT	2	QL(0.07 EA daily)	BEVESPI AEROSPHERE	2	QL(0.36 GM daily)
PULMICORT FLEXHALER AEPB 90 MCG/ACT	2	QL(0.27 EA daily)	BREO ELLIPTA	2	
PULMICORT SUSP (<i>Use budesonide (inhalation)</i>)	NF	QL(4 ML daily); PA	BREO ELLIPTA (<i>Use fluticasone furoate-vilanterol</i>)	2	
QVAR REDHALER 40 MCG/ACT	2	QL(0.36 GM daily)	BREZTRI AEROSPHERE	2	QL(0.38 GM daily)
QVAR REDHALER 80 MCG/ACT	2	QL(0.72 GM daily)	BROVANA (<i>Use arformoterol tartrate</i>)	NF	QL(4 ML daily)
Sympathomimetics			<i>budesonide-formoterol fumarate dihydrate</i>	1B	
ADVAIR DISKUS AEPB (<i>Use fluticasone-salmeterol</i>)	NF		COMBIVENT RESPIMAT AERS	3	QL(0.16 GM daily); PA
ADVAIR HFA AERO (<i>Use fluticasone-salmeterol</i>)	NF		DULERA	2	
AIRDUO RESPICLICK 113/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF		<i>fluticasone furoate-vilanterol</i>	1B	
AIRDUO RESPICLICK 232/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF		<i>fluticasone-salmeterol AEPB</i>	1B	
AIRDUO RESPICLICK 55/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF		<i>fluticasone-salmeterol AERO</i>	1B	
AIRSUPRA	2		<i>formoterol fumarate NEBU</i>	1B	QL(4 ML daily)
<i>albuterol sulfate AERS</i>	1B		<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ML daily)
<i>albuterol sulfate NEBU</i>	1B		<i>levalbuterol hcl</i>	1B	
			<i>levalbuterol tartrate</i>	1B	QL(0.5 GM daily)
			PERFOROMIST NEBU (<i>Use formoterol fumarate</i>)	NF	QL(4 ML daily)
			PROAIR RESPICLICK AEPB	3	
			PROVENTIL HFA AERS (<i>Use albuterol sulfate</i>)	NF	
			SEREVENT DISKUS	2	

Drug Name	Drug Tier	Requirements/ Limits
STIOLTO RESPIMAT	2	QL(0.14 GM daily)
STRIVERDI RESPIMAT	2	
SYMBICORT (Use budesonide-formoterol fumarate dihydrate)	NF	
terbutaline sulfate SOLN	1B	
terbutaline sulfate TABS	1B	
TRELEGY ELLIPTA	2	QL(2 EA daily)
umeclidinium-vilanterol	2	QL(2 EA daily)
VENTOLIN HFA AERS (Use albuterol sulfate)	NF	
XOPENEX HFA (Use levalbuterol tartrate)	NF	
Xanthines		
theophylline ELIX	1B	
theophylline SOLN	1B	QL(56 ML daily)
theophylline TB12	1B	
theophylline TB24	1B	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
warfarin sodium TABS	1A	
Direct Factor Xa Inhibitors		
ELIQUIS DVT/PE STARTER PACK TBPB	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail
ELIQUIS TABS	2	QL(2 EA daily)
rivaroxaban SUSR 1 MG/ML	1B	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)
rivaroxaban TABS 2.5 MG	1B	QL(2 EA daily)
XARELTO STARTER PACK TBPB	2	1 max fill(s) per 365 day(s) retail
XARELTO SUSR 1 MG/ML (Use rivaroxaban)	NF	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
XARELTO TABS 15 MG	2	QL(2 EA daily)
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)
XARELTO TABS 2.5 MG (Use rivaroxaban)	NF	QL(2 EA daily)
Heparins And Heparinoid-Like Agents		
ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)	NF	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail)
ARIXTRA 2.5 MG/0.5ML (Use fondaparinux sodium)	NF	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail)
ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)	NF	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail)
ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)	NF	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail)
enoxaparin sodium SOLN IJ 300 MG/3ML	4	QL(6 ML daily)
enoxaparin sodium SOSY 40 MG/0.4ML	4	QL(0.8 ML daily)
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	4	QL(2 ML daily)
enoxaparin sodium SOSY 60 MG/0.6ML	4	QL(1.2 ML daily)
enoxaparin sodium SOSY 30 MG/0.3ML	4	QL(0.6 ML daily)
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	4	QL(1.6 ML daily)
fondaparinux sodium 5 MG/0.4ML	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail)
fondaparinux sodium 2.5 MG/0.5ML	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail)	FYCOMPA TABS 2 MG (<i>Use perampanel</i>)	NF	QL(6 EA daily); PA
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail)	FYCOMPA TABS 8 MG, 10 MG, 12 MG (<i>Use perampanel</i>)	NF	QL(1 EA daily); PA
FRAGMIN SOSY	4	PA	FYCOMPA TABS 6 MG (<i>Use perampanel</i>)	NF	QL(2 EA daily); PA
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1B		<i>perampanel</i> TABS 2 MG	1B	QL(6 EA daily); PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B		<i>perampanel</i> TABS 8 MG, 10 MG, 12 MG	1B	QL(1 EA daily); PA
LOVENOX SOLN IJ 300 MG/3ML (<i>Use enoxaparin sodium</i>)	NF	QL(6 ML daily)	<i>perampanel</i> TABS 4 MG	1B	QL(3 EA daily); PA
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>Use enoxaparin sodium</i>)	NF	QL(2 ML daily)	<i>perampanel</i> TABS 6 MG	1B	QL(2 EA daily); PA
LOVENOX SOSY 40 MG/0.4ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.8 ML daily)	Anticonvulsants - Benzodiazepines		
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.6 ML daily)	<i>clobazam</i> SUSP	1B	QL(16 ML daily); PA
LOVENOX SOSY 30 MG/0.3ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.6 ML daily)	<i>clobazam</i> TABS	1B	QL(2 EA daily); PA
LOVENOX SOSY 60 MG/0.6ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.2 ML daily)	<i>clonazepam</i> TABS	1A	
Thrombin Inhibitors			DIASTAT PEDIATRIC GEL (<i>Use diazepam (anticonvulsant)</i>)	NF	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>dabigatran etexilate mesylate CAPS</i>	1B		<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
<i>PRADAXA CAPS (Use dabigatran etexilate mesylate)</i>	NF		KLONOPIN TABS (<i>Use clonazepam</i>)	NF	
ANTICONVULSANTS - Drugs to Treat Seizures			NAYZILAM	4	QL(10 EA per 30 day(s) retail); PA
AMPA Glutamate Receptor Antagonists			ONFI SUSP (<i>Use clobazam</i>)	NF	QL(16 ML daily); PA
FYCOMPA TABS 4 MG (<i>Use perampanel</i>)	NF	QL(3 EA daily); PA	ONFI TABS (<i>Use clobazam</i>)	NF	QL(2 EA daily); PA
			VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
			VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	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 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin CAPS</i>	1B	
Anticonvulsants - Misc.			<i>gabapentin SOLN</i>	1B	QL(60 ML daily)
APTIOM 200 MG, 400 MG, 600 MG, 800 MG (Use <i>eslicarbazepine acetate</i>)	NF	QL(2 EA daily); ST	<i>gabapentin TABS</i> 600 MG, 800 MG	1B	
BANZEL SUSP (Use <i>rufinamide</i>)	NF	QL(80 ML daily); PA	KEPPRA XR TB24 (Use <i>levetiracetam</i>)	NF	QL(4 EA daily)
BANZEL TABS 400 MG (Use <i>rufinamide</i>)	NF	QL(8 EA daily); PA	KEPPRA SOLN PO 100 MG/ML (Use <i>levetiracetam</i>)	NF	QL(30 ML daily)
BANZEL TABS 200 MG (Use <i>rufinamide</i>)	NF	QL(2 EA daily); PA	KEPPRA TABS 500 MG (Use <i>levetiracetam</i>)	NF	QL(6 EA daily)
<i>brivaracetam</i> SOLN PO 10 MG/ML	1B	QL(20 ML daily); PA	KEPPRA TABS 1000 MG (Use <i>levetiracetam</i>)	NF	QL(3 EA daily)
BRIVIACT SOLN PO 10 MG/ML (Use <i>brivaracetam</i>)	3	QL(20 ML daily); PA	KEPPRA TABS 250 MG, 750 MG (Use <i>levetiracetam</i>)	NF	QL(4 EA daily)
<i>carbamazepine</i> CHEW	1B		<i>lacosamide</i> SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML	1B	QL(40 ML daily)
<i>carbamazepine</i> CP12 300 MG	1B	QL(4 EA daily)	<i>lacosamide</i> TABS	1B	QL(2 EA daily)
<i>carbamazepine</i> CP12 100 MG	1B		LAMICTAL ODT TBDP (Use <i>lamotrigine</i>)	NF	QL(1 EA daily)
<i>carbamazepine</i> CP12 200 MG	1B	QL(6 EA daily)	LAMICTAL CHEW 5 MG (Use <i>lamotrigine</i>)	NF	QL(100 EA daily)
<i>carbamazepine</i> SUSP	1B		LAMICTAL CHEW 25 MG (Use <i>lamotrigine</i>)	NF	QL(20 EA daily)
<i>carbamazepine</i> TABS	1B		LAMICTAL TABS (Use <i>lamotrigine</i>)	NF	
<i>carbamazepine</i> TB12 200 MG	1B	QL(6 EA daily)	<i>lamotrigine</i> CHEW 25 MG	1B	QL(20 EA daily)
<i>carbamazepine</i> TB12 100 MG, 400 MG	1B	QL(4 EA daily)	<i>lamotrigine</i> CHEW 5 MG	1B	QL(100 EA daily)
CARBATROL CP12 200 MG (Use <i>carbamazepine</i>)	NF	QL(6 EA daily)	<i>lamotrigine</i> TABS	1B	
CARBATROL CP12 300 MG (Use <i>carbamazepine</i>)	NF	QL(4 EA daily)	<i>lamotrigine</i> TBDP	1B	QL(1 EA daily)
CARBATROL CP12 100 MG (Use <i>carbamazepine</i>)	NF		<i>levetiracetam</i> SOLN PO 100 MG/ML, 500 MG/5ML	1B	QL(30 ML daily)
			<i>levetiracetam</i> TABS 1000 MG	1B	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 EA daily)	TEGRETOL SUSP (<i>Use carbamazepine</i>)	NF	
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 EA daily)	TEGRETOL TABS (<i>Use carbamazepine</i>)	NF	
<i>levetiracetam TB24</i>	1B	QL(4 EA daily)	TEGRETOL-XR TB12 200 MG (<i>Use carbamazepine</i>)	NF	QL(6 EA daily)
LYRICA CAPS 225 MG, 300 MG (<i>Use pregabalin</i>)	NF	QL(2 EA daily); ST	TEGRETOL-XR TB12 100 MG, 400 MG (<i>Use carbamazepine</i>)	NF	QL(4 EA daily)
LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (<i>Use pregabalin</i>)	NF	QL(3 EA daily); ST	TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)
LYRICA SOLN (<i>Use pregabalin</i>)	NF	QL(30 ML daily); ST	TOPAMAX SPRINKLE CPSP 25 MG (<i>Use topiramate</i>)	NF	QL(8 EA daily)
MYSOLINE (<i>Use primidone</i>)	NF		TOPAMAX TABS 50 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)
NEURONTIN CAPS (<i>Use gabapentin</i>)	NF		TOPAMAX TABS 200 MG (<i>Use topiramate</i>)	NF	QL(2 EA daily)
NEURONTIN SOLN (<i>Use gabapentin</i>)	NF	QL(60 ML daily)	TOPAMAX TABS 25 MG, 100 MG (<i>Use topiramate</i>)	NF	QL(4 EA daily)
NEURONTIN TABS (<i>Use gabapentin</i>)	NF		<i>topiramate CPSP 15 MG</i>	1B	QL(6 EA daily)
<i>oxcarbazepine SUSP</i>	1B	QL(40 ML daily)	<i>topiramate CPSP 25 MG</i>	1B	QL(8 EA daily)
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 EA daily)	<i>topiramate CS24</i>	3	PA
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 EA daily)	<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 EA daily)
<i>pregabalin CAPS 225 MG, 300 MG</i>	1B	QL(2 EA daily); ST	<i>topiramate TABS 50 MG</i>	1B	QL(6 EA daily)
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	1B	QL(3 EA daily); ST	<i>topiramate TABS 200 MG</i>	1B	QL(2 EA daily)
<i>pregabalin SOLN</i>	1B	QL(30 ML daily); ST	TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NF	QL(40 ML daily)
<i>primidone 50 MG, 250 MG</i>	1B		TRILEPTAL TABS 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(3 EA daily)
QUDEXY XR CS24 (<i>Use topiramate</i>)	NF	PA	TRILEPTAL TABS 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 EA daily)
<i>rufinamide SUSP</i>	3	QL(80 ML daily); PA	VIMPAT SOLN PO 10 MG/ML (<i>Use lacosamide</i>)	NF	QL(40 ML daily)
<i>rufinamide TABS 200 MG</i>	3	QL(2 EA daily); PA	VIMPAT TABS (<i>Use lacosamide</i>)	NF	QL(2 EA daily)
<i>rufinamide TABS 400 MG</i>	3	QL(8 EA daily); PA	ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NF	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>zonisamide CAPS</i>	1B	QL(6 EA daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ML daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 EA daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 EA daily)
FELBATOL SUSP (<i>Use felbamate</i>)	NF	QL(30 ML daily)
FELBATOL TABS 600 MG (<i>Use felbamate</i>)	NF	QL(6 EA daily)
FELBATOL TABS 400 MG (<i>Use felbamate</i>)	NF	QL(9 EA daily)
GABA Modulators		
SABRIL PACK (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); PA
SABRIL TABS (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); PA
<i>tiagabine hcl</i>	1B	
<i>vigabatrin PACK</i>	4	QL(6 EA daily); PA
<i>vigabatrin TABS</i>	4	QL(6 EA daily); PA
Hydantoins		
CEREBYX (<i>Use fosphenytoin sodium</i>)	NF	
DILANTIN (<i>Use phenytoin sodium extended</i>)	2	
DILANTIN	2	
DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>Use phenytoin</i>)	2	
DILANTIN SUSP (<i>Use phenytoin</i>)	2	
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>phenytoin SUSP</i>	1B	
Succinimides		
CELONTIN (<i>Use methsuximide</i>)	NF	QL(4 EA daily)
<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>Use ethosuximide</i>)	NF	QL(6 EA daily)
ZARONTIN SOLN (<i>Use ethosuximide</i>)	NF	QL(30 ML daily)
Valproic Acid		
DEPAKOTE ER TB24 (<i>Use divalproex sodium</i>)	NF	
DEPAKOTE TBEC (<i>Use divalproex sodium</i>)	NF	
<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	
REMERTON SOLTAB TBDP (<i>Use mirtazapine</i>)	NF	
REMERTON TABS 15 MG, 30 MG (<i>Use mirtazapine</i>)	NF	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	
<i>bupropion hcl TB12</i>	1B	
<i>bupropion hcl TB12</i>	1B	
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1B	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FORFIVO XL TB24 (<i>Use bupropion hcl</i>)	NF		FLUOXETINE HCL TABS (<i>Use fluoxetine hcl</i>)	NF	
WELLBUTRIN SR TB12 (<i>Use bupropion hcl</i>)	NF		<i>fluvoxamine maleate TABS</i>	1B	
WELLBUTRIN SR TB12 (<i>Use bupropion hcl</i>)	NF		LEXAPRO TABS (<i>Use escitalopram oxalate</i>)	NF	
WELLBUTRIN XL TB24 (<i>Use bupropion hcl</i>)	NF		<i>paroxetine hcl SUSP</i>	1B	
Monoamine Oxidase Inhibitors (MAOIs)			<i>paroxetine hcl TABS</i>	1B	
EMSAM	3	QL(1 EA daily)	<i>paroxetine hcl TB24</i>	1B	
MARPLAN	2	QL(6 EA daily)	PAXIL CR TB24 (<i>Use paroxetine hcl</i>)	NF	
NARDIL (<i>Use phenelzine sulfate</i>)	NF		PAXIL SUSP (<i>Use paroxetine hcl</i>)	NF	
PARNATE (<i>Use tranylcypromine sulfate</i>)	NF		PAXIL TABS (<i>Use paroxetine hcl</i>)	NF	
<i>phenelzine sulfate</i>	1B		PROZAC CAPS (<i>Use fluoxetine hcl</i>)	NF	
<i>tranylcypromine sulfate</i>	1B		<i>sertraline hcl CONC</i>	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			<i>sertraline hcl TABS</i>	1B	
SPRAVATO (56 MG DOSE)	4	PA	ZOLOFT CONC (<i>Use sertraline hcl</i>)	NF	
SPRAVATO (84 MG DOSE)	4	PA	ZOLOFT TABS (<i>Use sertraline hcl</i>)	NF	
Selective Serotonin Reuptake Inhibitors (SSRIs)			Serotonin Modulators		
CELEXA TABS (<i>Use citalopram hydrobromide</i>)	NF		<i>nefazodone hcl</i>	1B	
<i>citalopram hydrobromide SOLN</i>	1A		<i>trazodone hcl TABS</i>	1B	
<i>citalopram hydrobromide TABS</i>	1A		TRINTELLIX	3	QL(1 EA daily); PA
<i>escitalopram oxalate SOLN</i>	1B		VIIBRYD TABS (<i>Use vilazodone hcl</i>)	NF	
<i>escitalopram oxalate TABS</i>	1B		<i>vilazodone hcl TABS</i>	1B	
<i>fluoxetine hcl CAPS</i>	1A		Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>fluoxetine hcl CPDR</i>	1A		CYMBALTA CPEP (<i>Use duloxetine hcl</i>)	NF	
<i>fluoxetine hcl SOLN</i>	1B		<i>desvenlafaxine succinate</i>	1B	
<i>fluoxetine hcl TABS</i>	1B		<i>duloxetine hcl CPEP</i>	1B	
			EFFEXOR XR CP24 (<i>Use venlafaxine hcl</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FETZIMA TITRATION C4PK	3	PA	<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
FETZIMA CP24	3	QL(1 EA daily); PA	<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
PRISTIQ (Use desvenlafaxine succinate)	NF		<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 EA daily); PA
<i>venlafaxine hcl CP24</i>	1B		<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 EA daily); PA
<i>venlafaxine hcl TABS</i>	1B		<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG</i>	1B	QL(2 EA daily)
<i>venlafaxine hcl TB24</i>	1B		<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG</i>	1B	QL(1 EA daily)
Tricyclic Agents			DUETACT (Use pioglitazone hcl-glimepiride)	NF	QL(1 EA daily)
<i>amitriptyline hcl TABS</i>	1A		<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	QL(4 EA daily)
<i>amoxapine</i>	1B		<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	QL(2 EA daily)
ANAFRANIL (Use clomipramine hcl)	NF		<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	QL(2 EA daily)
<i>clomipramine hcl</i>	1B		<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	QL(4 EA daily)
<i>desipramine hcl TABS</i>	1B		GLYXAMBI	2	QL(1 EA daily)
<i>doxepin hcl CAPS</i>	1B		INVOKAMET XR TB24 1000 MG-150 MG, 1000 MG-50 MG, 500 MG-150 MG	3	QL(2 EA daily); PA
<i>doxepin hcl CONC</i>	1B		INVOKAMET XR TB24 500 MG-50 MG	3	QL(4 EA daily); PA
<i>imipramine hcl TABS</i>	1B		INVOKAMET TABS 500 MG-50 MG	3	QL(4 EA daily); PA
<i>imipramine pamoate</i>	1B		INVOKAMET TABS 1000 MG-150 MG, 1000 MG-50 MG, 500 MG-150 MG	3	QL(2 EA daily); PA
NORPRAMIN TABS 10 MG, 25 MG (Use desipramine hcl)	NF		JANUMET XR TB24 1000 MG-100 MG (Use sitagliptin phosphate-metformin hcl)	NF	QL(1 EA daily)
<i>nortriptyline hcl CAPS</i>	1B				
<i>nortriptyline hcl SOLN</i>	1B				
PAMELOR CAPS (Use nortriptyline hcl)	NF				
<i>protriptyline hcl</i>	1B				
<i>trimipramine maleate CAPS</i>	1B				
ANTIDIABETICS - Drugs to Regulate Blood Sugar					
Alpha-Glucosidase Inhibitors					
<i>acarbose</i>	1B	QL(3 EA daily)			
<i>miglitol</i>	1B	QL(3 EA daily)			
Antidiabetic Combinations					
ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl)	NF	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG (<i>Use sitagliptin phosphate-metformin hcl</i>)	NF	QL(2 EA daily)	SYNJARDY TABS	2	QL(2 EA daily)
JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (<i>Use sitagliptin phosphate-metformin hcl</i>)	NF	QL(2 EA daily)	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
JENTADUETO XR TB24 1000 MG-5 MG	3	QL(1 EA daily); PA	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
JENTADUETO XR TB24 1000 MG-2.5 MG	3	QL(2 EA daily); PA	XIGDUO XR TB24 PO 1000 MG-5 MG (<i>Use dapagliflozin free base-metformin hcl</i>)	NF	QL(2 EA daily)
JENTADUETO TABS	3	QL(2 EA daily); PA	XIGDUO XR TB24 PO (<i>Use dapagliflozin free base-metformin hcl</i>)	NF	QL(1 EA daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 EA daily)	XULTOPHY	3	QL(0.5 ML daily); PA
<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 EA daily)	Biguanides		
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 EA daily)	GLUMETZA TB24 (<i>Use metformin hcl</i>)	NF	
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 EA daily)	<i>metformin hcl TABS 1000 MG</i>	1A	QL(2.5 EA daily)
SEGLUROMET 1000 MG-2.5 MG, 1000 MG-7.5 MG, 500 MG-7.5 MG	3	QL(2 EA daily); PA	<i>metformin hcl TABS 850 MG</i>	0	QL(3 EA daily)
SEGLUROMET 500 MG-2.5 MG	3	QL(4 EA daily); PA	<i>metformin hcl TABS 500 MG</i>	1A	QL(5 EA daily)
<i>sitagliptin phosphate-metformin hcl TABS</i>	1B	QL(2 EA daily)	<i>metformin hcl TB24 750 MG</i>	1B	QL(3 EA daily)
<i>sitagliptin phosphate-metformin hcl TB24</i>	1B	QL(1 EA daily)	<i>metformin hcl TB24 500 MG</i>	1B	QL(4 EA daily)
<i>sitagliptin phosphate-metformin hcl TB24</i>	1B	QL(2 EA daily)	Diabetic Other		
SOLIQUA	3	QL(0.5 ML daily); PA	<i>diazoxide</i>	3	
STEGLUJAN	3	QL(1 EA daily); PA	GLUCAGON EMERGENCY SOLR IJ 1 MG (<i>Use glucagon</i>)	NF	QL(0.035 EA daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)	<i>glucagon SOLR IJ 1 MG</i>	1B	QL(0.035 EA daily)
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)	PROGLYCEM (<i>Use diazoxide</i>)	NF	
			Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
			<i>alogliptin benzoate</i>	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JANUVIA 25 MG, 50 MG, 100 MG (<i>Use sitagliptin phosphate</i>)	NF	QL(1 EA daily)	FIASP SOLN	1B	
ONGLYZA 5 MG (<i>Use saxagliptin hcl</i>)	NF	QL(1 EA daily)	HUMALOG JUNIOR KWIKPEN SOPN	1B	
<i>saxagliptin hcl</i>	1B	QL(1 EA daily)	HUMALOG KWIKPEN SOPN	1B	
<i>sitagliptin phosphate 25 MG, 50 MG, 100 MG</i>	1B	QL(1 EA daily)	HUMALOG KWIKPEN SOPN	1B	
TRADJENTA	3	QL(1 EA daily); PA	HUMALOG MIX 50/50 KWIKPEN SUPN	1B	
Incretin Mimetic Agents			HUMALOG MIX 50/50 SUSP	1B	
<i>liraglutide</i>	1B	Smart PA; QL(0.3 ML daily)	HUMALOG MIX 75/25 KWIKPEN SUPN	1B	
MOUNJARO	2	Smart PA; QL(0.072 ML daily)	HUMALOG MIX 75/25 SUSP	1B	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	Smart PA; QL(0.108 ML daily)	HUMALOG SOCT	1B	
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	Smart PA; QL(0.108 ML daily)	HUMALOG SOLN IJ	1B	
OZEMPIC (2 MG/DOSE) SOPN	2	Smart PA; QL(0.108 ML daily)	HUMULIN 70/30 KWIKPEN SUPN	2	
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	2	Smart PA; QL(1 EA daily)	HUMULIN 70/30 SUSP	2	
RYBELSUS TABS	2	Smart PA; QL(1 EA daily)	HUMULIN N KWIKPEN SUPN	2	
TRULICITY	2	Smart PA; QL(0.143 ML daily)	HUMULIN N SUSP	2	
VICTOZA (<i>Use liraglutide</i>)	NF	Smart PA; QL(0.3 ML daily)	HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ML daily)
Insulin			HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ML daily)
APIDRA SOLOSTAR SOPN	3	PA	HUMULIN R SOLN IJ	2	
APIDRA SOLN	3	PA	INSULIN ASPART FLEXPEN SOPN	1B	
FIASP FLEXTOUCH SOPN	1B		INSULIN ASPART SOLN IJ	1B	
FIASP PENFILL SOCT	1B		INSULIN GLARGINE MAX SOLOSTAR SOPN	2	
FIASP PUMPCART SOCT	1B		INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	2	
			INSULIN GLARGINE-YFGN SOLN	2	
			INSULIN GLARGINE-YFGN SOPN	2	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INSULIN LISPRO (1 UNIT DIAL) SOPN	1B		NOVOLOG PENFILL SOCT	1B	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1B		NOVOLOG RELION SOLN IJ	1B	
INSULIN LISPRO PROT & LISPRO SUPN	1B		NOVOLOG SOLN IJ	1B	
INSULIN LISPRO SOLN IJ	1B		REZVOGLAR KWIKPEN	3	PA
LANTUS SOLOSTAR SOPN	2		TOUJEO MAX SOLOSTAR SOPN	2	
NOVOLIN 70/30 FLEXPEN RELION SUPN	2		TOUJEO SOLOSTAR SOPN	2	
NOVOLIN 70/30 FLEXPEN SUPN	2		TRESIBA FLEXTOUCH SOPN	2	
NOVOLIN 70/30 RELION SUSP	2		TRESIBA SOLN	2	
NOVOLIN 70/30 SUSP	2		Insulin Sensitizing Agents		
NOVOLIN N FLEXPEN RELION SUPN	2		ACTOS (<i>Use pioglitazone hcl</i>)	NF	QL(1 EA daily)
NOVOLIN N FLEXPEN SUPN	2		<i>pioglitazone hcl</i>	1B	QL(1 EA daily)
NOVOLIN N RELION SUSP	2		Meglitinide Analogues		
NOVOLIN N RELION SUSP	2		<i>nateglinide</i>	1B	QL(3 EA daily)
NOVOLIN N SUSP	2		<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 EA daily)
NOVOLIN R FLEXPEN RELION SOPN IJ	2		<i>repaglinide 2 MG</i>	1B	QL(8 EA daily)
NOVOLIN R FLEXPEN SOPN IJ	2		Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
NOVOLIN R RELION SOLN IJ	2		<i>dapagliflozin TABS PO 5 MG, 10 MG</i>	1B	QL(1 EA daily)
NOVOLIN R SOLN IJ	2		FARXIGA TABS PO (<i>Use dapagliflozin</i>)	NF	QL(1 EA daily)
NOVOLOG 70/30 FLEXPEN RELION SUPN	1B		INVOKANA 100 MG	3	QL(2 EA daily); PA
NOVOLOG FLEXPEN RELION SOPN	1B		INVOKANA 300 MG	3	QL(1 EA daily); PA
NOVOLOG FLEXPEN SOPN	1B		JARDIANCE	2	QL(1 EA daily)
NOVOLOG MIX 70/30 FLEXPEN SUPN	1B		STEGLATRO 15 MG	3	QL(1 EA daily); PA
NOVOLOG MIX 70/30 RELION SUSP	1B		STEGLATRO 5 MG	3	QL(2 EA daily); PA
NOVOLOG MIX 70/30 SUSP	1B		Sulfonylureas		
			<i>glimepiride 1 MG, 2 MG</i>	1A	QL(4 EA daily)
			<i>glimepiride 4 MG</i>	1A	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>glipizide TABS 5 MG, 10 MG</i>	1A	QL(4 EA daily)
<i>glipizide TB24</i>	1A	QL(2 EA daily)
GLUCOTROL XL TB24 5 MG, 10 MG (<i>Use glipizide</i>)	NF	QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	QL(4 EA daily)
<i>glyburide TABS</i>	1A	QL(4 EA daily)

ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea

Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
LOMOTIL TABS (<i>Use diphenoxylate w/ atropine</i>)	NF	
<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	PA
<i>deferasirox TBSO</i>	4	PA
EXJADE TBSO (<i>Use deferasirox</i>)	NF	PA
JADENU SPRINKLE PACK (<i>Use deferasirox</i>)	NF	PA
JADENU TABS (<i>Use deferasirox</i>)	NF	PA
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		

Drug Name	Drug Tier	Requirements/ Limits
<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>	1A	
<i>naltrexone hcl</i>	1A	
NARCAN LIQD (<i>Use naloxone hcl</i>)	NF	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC

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 IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1B	QL(3.34 ML daily)
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 EA daily)
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 EA daily; 45 EA per fill retail; 45 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		
ANTIVERT TABS 50 MG (<i>Use meclizine hcl</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 EA daily)
TRANSDERM SCOP 1 MG/3DAYS (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)
TRANSDERM-SCOP (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
DICLEGIS TBEC (<i>Use doxylamine-pyridoxine</i>)	NF	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; 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	
MARINOL CAPS (<i>Use dronabinol</i>)	NF	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 EA daily)
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 EA daily)
<i>aprepitant CPPK PO</i>	1B	PA
EMEND BIPACK CAPS 80 MG (<i>Use aprepitant</i>)	NF	QL(0.134 EA daily)
EMEND TRIPACK CPPK PO (<i>Use aprepitant</i>)	NF	PA
VARUBI (180 MG DOSE) TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		

Drug Name	Drug Tier	Requirements/ Limits
Antifungals		
<i>amphotericin b IV</i>	3	
ANCOBON (<i>Use flucytosine</i>)	NF	
<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		
DIFLUCAN SUSR 40 MG/ML (<i>Use fluconazole</i>)	NF	
DIFLUCAN TABS 100 MG, 200 MG (<i>Use fluconazole</i>)	NF	
<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	
NOXAFIL SUSP (<i>Use posaconazole</i>)	NF	QL(20 ML daily)
NOXAFIL TBEC (<i>Use posaconazole</i>)	NF	QL(6 EA daily)
<i>posaconazole SUSP</i>	3	QL(20 ML daily)
<i>posaconazole TBEC</i>	3	QL(6 EA daily)
SPORANOX CAPS (<i>Use itraconazole</i>)	NF	QL(4 EA daily); PA
SPORANOX SOLN (<i>Use itraconazole</i>)	NF	QL(20 ML daily); PA
TOLSURA CAPS	4	PA
VFEND TABS 200 MG (<i>Use voriconazole</i>)	NF	QL(4 EA daily)
<i>voriconazole TABS</i>	1B	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
ANTI HISTAMINES - Drugs to Treat Allergies		
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate SOLN</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B	
<i>clemastine fumarate TABS 2.68 MG</i>	1B	
CLEMASZ TABS 2.68 MG (Use <i>clemastine fumarate</i>)	NF	
CLEMSZA TABS 2.68 MG (Use <i>clemastine fumarate</i>)	NF	
<i>diphenhydramine hcl CAPS 50 MG</i>	1A	
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ML daily)
Antihistamines - Non-Sedating		
<i>cetirizine hcl TABS</i>	1A	QL(1 EA daily)
CLARINEX TABS (Use <i>desloratadine</i>)	NF	QL(1 EA daily)
CLARITIN ALLERGY CHILDRENS SOLN (Use <i>loratadine</i>)	NF	
CLARITIN CHILDRENS CHEW (Use <i>loratadine</i>)	NF	
CLARITIN REDITABS TBDP (Use <i>loratadine</i>)	NF	
CLARITIN CAPS (Use <i>loratadine</i>)	NF	
CLARITIN CHEW (Use <i>loratadine</i>)	NF	
CLARITIN SOLN (Use <i>loratadine</i>)	NF	
CLARITIN TABS (Use <i>loratadine</i>)	NF	
<i>desloratadine TABS</i>	1B	QL(1 EA daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<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	
QUZYTIR SOLN IV	3	PA
XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML	2	QL(10 ML daily); RX/OTC
ZYRTEC ALLERGY TABS (Use <i>cetirizine hcl</i>)	NF	QL(1 EA daily)
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>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 EA daily)
VYTORIN (Use <i>ezetimibe-simvastatin</i>)	NF	QL(1 EA daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 EA daily); PA
LOVAZA (Use <i>omega-3-acid ethyl esters</i>)	NF	QL(4 EA daily)
<i>omega-3-acid ethyl esters</i>	1B	QL(4 EA daily)
VASCEPA 1 GM (Use <i>icosapent ethyl</i>)	NF	QL(4 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Bile Acid Sequestrants			FENOGLIDE TABS (<i>Use fenofibrate</i>)	NF	
<i>cholestyramine light PACK</i>	1B	QL(6 EA daily)	<i>gemfibrozil TABS</i>	1B	QL(2 EA daily)
<i>cholestyramine light POWD</i>	1B	QL(24 GM daily)	LOPID TABS (<i>Use gemfibrozil</i>)	NF	QL(2 EA daily)
<i>cholestyramine PACK</i>	1B	QL(6 EA daily)	TRICOR TABS (<i>Use fenofibrate</i>)	NF	QL(1 EA daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 GM daily)	TRILIPIX (<i>Use choline fenofibrate</i>)	NF	QL(1 EA daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 EA daily); PA	HMG CoA Reductase Inhibitors		
<i>colesevelam hcl TABS</i>	1B	QL(7 EA daily)	<i>atorvastatin calcium TABS</i>	1A	QL(1 EA daily)
COLESTID GRAN (<i>Use colestipol hcl</i>)	NF	QL(6 GM daily)	CRESTOR TABS (<i>Use rosuvastatin calcium</i>)	NF	QL(1 EA daily)
COLESTID PACK (<i>Use colestipol hcl</i>)	NF	QL(6 EA daily)	<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 EA daily)
COLESTID TABS (<i>Use colestipol hcl</i>)	NF	QL(16 EA daily)	<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 EA daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 GM daily)	LIPITOR TABS (<i>Use atorvastatin calcium</i>)	NF	QL(1 EA daily)
<i>colestipol hcl PACK</i>	1B	QL(6 EA daily)	<i>lovastatin TABS 40 MG</i>	1A	QL(2 EA daily); PV
<i>colestipol hcl TABS</i>	1B	QL(16 EA daily)	<i>lovastatin TABS 10 MG, 20 MG</i>	1A	QL(1 EA daily); PV
QUESTRAN LIGHT POWD (<i>Use cholestyramine light</i>)	NF	QL(24 GM daily)	<i>pravastatin sodium</i>	1B	QL(1 EA daily)
QUESTRAN PACK (<i>Use cholestyramine</i>)	NF	QL(6 EA daily)	<i>rosuvastatin calcium TABS</i>	1B	QL(1 EA daily)
QUESTRAN POWD (<i>Use cholestyramine</i>)	NF	QL(25.2 GM daily)	<i>simvastatin TABS</i>	1A	QL(1 EA daily)
WELCHOL PACK (<i>Use colesevelam hcl</i>)	NF	QL(1 EA daily); PA	ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>Use simvastatin</i>)	NF	QL(1 EA daily)
WELCHOL TABS (<i>Use colesevelam hcl</i>)	NF	QL(7 EA daily)	Intestinal Cholesterol Absorption Inhibitors		
Fibric Acid Derivatives			<i>ezetimibe</i>	1B	QL(1 EA daily)
<i>choline fenofibrate</i>	1B	QL(1 EA daily)	ZETIA (<i>Use ezetimibe</i>)	NF	QL(1 EA daily)
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1B	QL(1 EA daily)	Nicotinic Acid Derivatives		
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1B	QL(1 EA daily)	<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 EA daily)	Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); PA	ZESTRIL TABS (Use lisinopril)	NF	
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); PA	Agents for Pheochromocytoma		
REPATHA SOSY	4	QL(0.0714 ML daily); PA	DIBENZYLINE (Use phenoxybenzamine hcl)	NF	PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure			phenoxybenzamine hcl	3	PA
ACE Inhibitors			Angiotensin II Receptor Antagonists		
ACCUPRIL 20 MG, 40 MG (Use quinapril hcl)	NF		ATACAND (Use candesartan cilexetil)	NF	QL(1 EA daily)
ACCUPRIL 5 MG, 10 MG (Use quinapril hcl)	NF	QL(2 EA daily)	AVAPRO 150 MG, 300 MG (Use irbesartan)	NF	QL(1 EA daily)
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (Use ramipril)	NF		azilsartan medoxomil 40 MG, 80 MG	1B	QL(1 EA daily); ST
benazepril hcl	1A		BENICAR (Use olmesartan medoxomil)	NF	QL(1 EA daily)
captopril 25 MG, 50 MG, 100 MG	1B	QL(3 EA daily)	candesartan cilexetil	1B	QL(1 EA daily)
captopril 12.5 MG	1B		COZAAR (Use losartan potassium)	NF	QL(1 EA daily)
enalapril maleate TABS	1A		DIOVAN TABS (Use valsartan)	NF	QL(1 EA daily)
fosinopril sodium	1B		EDARBI 40 MG, 80 MG (Use azilsartan medoxomil)	3	QL(1 EA daily); ST
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	1A		irbesartan	1B	QL(1 EA daily)
LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl)	NF		losartan potassium	1A	QL(1 EA daily)
moexipril hcl	1B	QL(2 EA daily)	MICARDIS (Use telmisartan)	NF	QL(1 EA daily)
perindopril erbumine 2 MG, 8 MG	1B	QL(2 EA daily)	olmesartan medoxomil	1B	QL(1 EA daily)
perindopril erbumine 4 MG	1B		telmisartan	1B	QL(1 EA daily)
quinapril hcl 20 MG, 40 MG	1B		valsartan TABS	1B	QL(1 EA daily)
quinapril hcl 5 MG, 10 MG	1B	QL(2 EA daily)	Antiadrenergic Antihypertensives		
ramipril CAPS	1B		CARDURA (Use doxazosin mesylate)	NF	
trandolapril 1 MG, 2 MG	1B	QL(1 EA daily)	CATAPRES-TTS-1 PTWK (Use clonidine)	NF	QL(0.15 EA daily)
trandolapril 4 MG	1B	QL(2 EA daily)	CATAPRES-TTS-2 PTWK (Use clonidine)	NF	QL(0.15 EA daily)
VASOTEC TABS (Use enalapril maleate)	NF		CATAPRES-TTS-3 PTWK (Use clonidine)	NF	QL(0.15 EA daily)
			clonidine hcl TABS	1A	QL(8 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clonidine PTWK</i>	1B	QL(0.15 EA daily)	<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 EA daily)
<i>doxazosin mesylate</i>	1B		<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>guanfacine hcl</i>	1B		DIOVAN HCT (Use valsartan-hydrochlorothiazide)	NF	QL(1 EA daily)
<i>methyldopa TABS</i>	1B	QL(6 EA daily)	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 EA daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 EA daily)	<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>terazosin hcl</i>	1B		EXFORGE (Use amlodipine besylate-valsartan)	NF	QL(1 EA daily)
Antihypertensive Combinations			EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)	NF	
ACCURETIC 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	NF	QL(3 EA daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 EA daily)
ACCURETIC 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	NF	QL(4 EA daily)	HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (Use losartan potassium & hydrochlorothiazide)	NF	QL(1 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1B		HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide)	NF	QL(2 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST	<i>irbesartan-hydrochlorothiazide</i>	1B	
<i>amlodipine besylate-valsartan</i>	1B	QL(1 EA daily)	<i>lisinopril & hydrochlorothiazide</i>	1A	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3		<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1A	QL(2 EA daily)
ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)	NF		<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1A	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	1B		LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	NF	QL(1 EA daily)
AVALIDE (Use irbesartan-hydrochlorothiazide)	NF				
AZOR (Use amlodipine besylate-olmesartan medoxomil)	NF	ST			
<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)			
BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide)	NF				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	NF		trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	3	
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	NF		TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NF	ST
metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	1B	QL(1 EA daily)	valsartan-hydrochlorothiazide	1B	QL(1 EA daily)
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	1B		VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)	NF	
MICARDIS HCT (Use telmisartan-hydrochlorothiazide)	NF	QL(1 EA daily)	ZESTORETIC (Use lisinopril & hydrochlorothiazide)	NF	
olmesartan medoxomil-amlodipine-hydrochlorothiazide	1B	ST	Antihypertensives - Misc.		
olmesartan medoxomil-hydrochlorothiazide	1B		VECAMEYL	3	PA
quinapril-hydrochlorothiazide 12.5 MG-10 MG	1B	QL(3 EA daily)	Direct Renin Inhibitors		
quinapril-hydrochlorothiazide 12.5 MG-20 MG	1B	QL(4 EA daily)	aliskiren fumarate	1B	QL(1 EA daily)
quinapril-hydrochlorothiazide 25 MG-20 MG	1B	QL(2 EA daily)	TEKTURNA (Use aliskiren fumarate)	NF	QL(1 EA daily)
telmisartan-amlodipine	1B	QL(1 EA daily)	Selective Aldosterone Receptor Antagonists (SARAs)		
telmisartan-hydrochlorothiazide	1B	QL(1 EA daily)	eplerenone	1B	
TENORETIC 100 (Use atenolol & chlorthalidone)	NF		INSPIRA (Use eplerenone)	NF	
TENORETIC 50 (Use atenolol & chlorthalidone)	NF		Vasodilators		
trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	3	QL(1 EA daily)	hydralazine hcl SOLN	1B	
			hydralazine hcl TABS	1B	
			minoxidil 2.5 MG, 10 MG	1B	
			ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
			Anti-infective Agents - Misc.		
			metronidazole TABS 250 MG, 500 MG	1B	
			NEBUPENT IN (Use pentamidine isethionate)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>pentamidine isethionate IN</i>	1B	
<i>tinidazole</i>	1B	
<i>trimethoprim TABS</i>	1B	
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
BACTRIM TABS (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
<i>atovaquone</i>	1B	
MEPRON (<i>Use atovaquone</i>)	NF	
<i>nitazoxanide TABS</i>	1B	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
DAPTOMYCIN (<i>Use daptomycin</i>)	NF	
Glycopeptides		
FIRVANQ SOLR PO (<i>Use vancomycin hcl</i>)	NF	QL(300 ML per fill retail)
VANCOCIN CAPS (<i>Use vancomycin hcl</i>)	NF	QL(4 EA daily; 40 EA per fill retail)
<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		
CLEOCIN (<i>Use clindamycin hcl</i>)	NF	
CLEOCIN (<i>Use clindamycin palmitate hydrochloride</i>)	NF	
CLEOCIN PHOSPHATE SOLN IJ (<i>Use clindamycin phosphate</i>)	NF	
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML</i>	1B	
LINCOCIN (<i>Use lincomycin hcl</i>)	NF	
<i>lincomycin hcl</i>	1B	
Monobactams		
AZACTAM (<i>Use aztreonam</i>)	NF	
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Oxazolidinones			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
linezolid SUSR	1B				
linezolid TABS	1B	QL(2 EA daily); PA			
ZYVOX SUSR (Use linezolid)	NF				
ZYVOX TABS (Use linezolid)	NF	QL(2 EA daily); PA	MALARONE (Use atovaquone-proguanil hcl)	NF	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
Urinary Anti-infectives					
fosfomycin tromethamine	1B				
HIPREX (Use methenamine hippurate)	NF				
MACROBID (Use nitrofurantoin monohyd macro)	NF		Antimalarials		
MACRODANTIN (Use nitrofurantoin macrocrystal)	NF		chloroquine phosphate TABS 250 MG	1B	QL(3 EA daily)
methenamine hippurate	1B		chloroquine phosphate TABS 500 MG	1B	
nitrofurantoin	1B		DARAPRIM (Use pyrimethamine)	NF	QL(3 EA daily); PA
nitrofurantoin macrocrystal 50 MG, 100 MG	1B		hydroxychloroquine sulfate 200 MG	1B	QL(3 EA daily)
nitrofurantoin monohyd macro	1B		hydroxychloroquine sulfate 400 MG	1B	QL(1 EA daily)
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)			hydroxychloroquine sulfate 100 MG	1B	QL(4 EA daily)
Antimalarial Combinations			KRINTAFEL	3	QL(2 EA per 30 day(s) retail)
atovaquone-proguanil hcl	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	Drug Name	Drug Tier	Requirements/ Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	<i>pyridostigmine bromide SOLN PO</i>	1B	
			<i>pyridostigmine bromide TABS 60 MG</i>	1B	
			<i>pyridostigmine bromide TBCR</i>	1B	
			ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
			Antimycobacterial Agents		
PLAQUENIL (Use hydroxychloroquine sulfate)	NF	QL(3 EA daily)	<i>cycloserine</i>	1B	QL(4 EA daily)
<i>primaquine phosphate TABS</i>	3		<i>ethambutol hcl TABS</i>	1B	
PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)	NF		<i>isoniazid SOLN</i>	1B	
<i>pyrimethamine</i>	1B	QL(3 EA daily); PA	<i>isoniazid SYRP</i>	1B	
QUALAQUIN CAPS (Use quinine sulfate)	NF	PA	<i>isoniazid TABS</i>	1A	
<i>quinine sulfate CAPS 324 MG</i>	1B	PA	MYCOBUTIN (Use rifabutin)	NF	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS			PRETOMANID	3	PA
Antimyasthenic/Cholinergic Agents			PRIFTIN 150 MG (Use rifapentine)	3	
MESTINON SOLN PO (Use pyridostigmine bromide)	NF		<i>pyrazinamide</i>	1B	
MESTINON TABS (Use pyridostigmine bromide)	NF		<i>rifabutin</i>	1B	PA
MESTINON TBCR (Use pyridostigmine bromide)	NF		RIFADIN SOLR (Use rifampin)	NF	
NEOSTIGMINE METHYLSULFATE RFID SOSY (Use neostigmine methylsulfate)	NF	PA	<i>rifampin CAPS</i>	1B	
<i>neostigmine methylsulfate SOSY</i>	3	PA	<i>rifampin SOLR</i>	1B	
NEOSTIGMINE METHYLSULFATE SOSY (Use neostigmine methylsulfate)	NF	PA	<i>rifapentine 150 MG</i>	1B	
			SIRTURO	3	PA
			ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
			Alkylating Agents		
			<i>busulfan SOLN</i>	4	PA
			BUSULFEX SOLN (Use busulfan)	NF	PA
			<i>carmustine</i>	4	PA
			<i>cisplatin SOLN 100 MG/100ML</i>	4	PA
			<i>cyclophosphamide CAPS</i>	1B	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLEOSTINE 40 MG, 100 MG (<i>Use lomustine</i>)	NF	PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	
GLEOSTINE 10 MG (<i>Use lomustine</i>)	NF	PA	<i>nelarabine</i>	4	PA
LEUKERAN	4	PA	<i>pemetrexed disodium SOLR 500 MG</i>	4	PA
<i>lomustine 40 MG, 100 MG</i>	4	PA	<i>pralatrexate 20 MG/ML</i>	4	PA
<i>lomustine 10 MG</i>	4	PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	PA
<i>melphalan hcl IV</i>	1B		VIDAZA SUSR (<i>Use azacitidine</i>)	NF	PA
TEMODAR SOLR	4		XELODA (<i>Use capecitabine</i>)	NF	PA
<i>temozolomide CAPS</i>	4	PA	Antineoplastic - Angiogenesis Inhibitors		
TEPADINA 15 MG (<i>Use thiotepa</i>)	NF	PA	LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); PA
<i>thiotepa 15 MG</i>	4	PA	LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); PA
ZANOSAR	4	PA	LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); PA
Antimetabolites			LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); PA
ALIMTA SOLR 500 MG (<i>Use pemetrexed disodium</i>)	NF	PA	LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); PA
ALIMTA SOLR 100 MG (<i>Use pemetrexed disodium</i>)	NF		LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); PA
ARRANON (<i>Use nelarabine</i>)	NF	PA	LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); PA
<i>azacitidine SUSR</i>	4	PA	LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>capecitabine</i>	4	PA	ZALTRAP 100 MG/4ML	4	PA
<i>clofarabine</i>	4	PA	Antineoplastic - Antibodies		
<i>decitabine</i>	4	PA	ARZERRA	4	PA
<i>floxuridine</i>	4	PA	LOQTORZI	4	PA
<i>fludarabine phosphate SOLN</i>	4	PA	RUXIENCE	4	PA
<i>fludarabine phosphate SOLR</i>	4	PA	TRUXIMA	4	PA
FOLOTYN 20 MG/ML (<i>Use pralatrexate</i>)	NF	PA	Antineoplastic - EGFR Inhibitors		
<i>mercaptopurine TABS</i>	1B		<i>erlotinib hcl</i>	4	QL(1 EA daily); PA
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B		<i>gefitinib</i>	4	QL(2 EA daily); PA
<i>methotrexate sodium SOLR</i>	1B				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IRESSA (Use gefitinib)	NF	QL(2 EA daily); PA	megestrol acetate TABS	1B	
TARCEVA 100 MG, 150 MG (Use erlotinib hcl)	NF	QL(1 EA daily); PA	NILANDRON (Use nilutamide)	NF	QL(2 EA daily); PA
Antineoplastic - Hedgehog Pathway Inhibitors			nilutamide	4	QL(2 EA daily); PA
DAURISMO	4	PA	NUBEQA	4	QL(4 EA daily); PA
Antineoplastic - Hormonal and Related Agents			tamoxifen citrate TABS	0	
abiraterone acetate 250 MG	4	QL(4 EA daily); PA	toremifene citrate	1B	
abiraterone acetate 500 MG	4	QL(2 EA daily); PA	XTANDI CAPS	4	QL(4 EA daily); PA
anastrozole	1B	QL(1 EA daily)	XTANDI TABS 40 MG	4	QL(4 EA daily); PA
ARIMIDEX (Use anastrozole)	NF	QL(1 EA daily)	XTANDI TABS 80 MG	4	QL(2 EA daily); PA
AROMASIN (Use exemestane)	NF	QL(1 EA daily)	ZYTIGA 250 MG (Use abiraterone acetate)	NF	QL(4 EA daily); PA
bicalutamide	1B	QL(1 EA daily)	ZYTIGA 500 MG (Use abiraterone acetate)	NF	QL(2 EA daily); PA
CASODEX (Use bicalutamide)	NF	QL(1 EA daily)	Antineoplastic - Immunomodulators		
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	PA	pomalidomide 1 MG, 2 MG, 3 MG, 4 MG	4	QL(1 EA daily); PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); PA	POMALYST 1 MG, 2 MG, 3 MG, 4 MG (Use pomalidomide)	NF	QL(1 EA daily); PA
EMCYT	4	PA	Antineoplastic Antibiotics		
ERLEADA 60 MG	4	QL(4 EA daily); PA	bleomycin sulfate 15 UNIT	4	PA
ERLEADA 240 MG	4	QL(1 EA daily); PA	dactinomycin	4	PA
exemestane	4	QL(1 EA daily)	doxorubicin hcl SOLR 10 MG, 50 MG	4	PA
FARESTON (Use toremifene citrate)	NF		IDAMYCIN PFS 20 MG/20ML (Use idarubicin hcl)	NF	PA
FASLODEX SOSY (Use fulvestrant)	NF	QL(0.357 ML daily); PA	IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (Use idarubicin hcl)	NF	PA
FEMARA (Use letrozole)	NF		idarubicin hcl 5 MG/5ML, 10 MG/10ML	4	PA
fulvestrant SOSY	4	QL(0.357 ML daily); PA	idarubicin hcl 20 MG/20ML	4	PA
letrozole	1B		mitomycin SOLR IV 20 MG	4	PA
leuprolide acetate KIT IJ 1 MG/0.2ML	4	PA			
LYSODREN	4	PA			
megestrol acetate SUSP	1B				

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Drug Name	Drug Tier	Requirements/ Limits
<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	PA
<i>valrubicin</i>	4	PA
VALSTAR (Use <i>valrubicin</i>)	NF	PA
Antineoplastic Enzyme Inhibitors		
AFINITOR TABS (Use <i>everolimus</i>)	NF	QL(1 EA daily); PA
ALECENSA	4	QL(8 EA daily); PA
<i>dasatinib</i>	4	QL(1 EA daily); PA
<i>everolimus TABS</i>	4	QL(1 EA daily); PA
GLEEVEC TABS (Use <i>imatinib mesylate</i>)	NF	QL(2 EA daily); PA
<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); PA
JAKAFI	4	QL(2 EA daily); PA
<i>lapatinib ditosylate</i>	4	QL(6 EA daily); PA
LYNPARZA TABS	4	QL(4 EA daily); PA
NEXAVAR (Use <i>sorafenib tosylate</i>)	NF	QL(4 EA daily); PA
<i>pazopanib hcl</i>	4	QL(4 EA daily); PA
<i>pazopanib hcl</i>	4	QL(2 EA daily); PA
<i>sorafenib tosylate</i>	4	QL(4 EA daily); PA
SPRYCEL (Use <i>dasatinib</i>)	NF	QL(1 EA daily); PA
STIVARGA	4	QL(4 EA daily); PA
<i>sunitinib malate</i>	4	QL(1 EA daily); PA
SUTENT (Use <i>sunitinib malate</i>)	NF	QL(1 EA daily); PA
<i>temsirolimus</i>	4	QL(0.143 ML daily); PA
TORISEL (Use <i>temsirolimus</i>)	NF	QL(0.143 ML daily); PA
TURALIO 125 MG	4	PA

Drug Name	Drug Tier	Requirements/ Limits
TYKERB (Use <i>lapatinib ditosylate</i>)	NF	QL(6 EA daily); PA
VERZENIO	4	QL(2 EA daily); PA
VOTRIENT (Use <i>pazopanib hcl</i>)	NF	QL(4 EA daily); PA
ZELBORAF	4	QL(8 EA daily); PA
ZOLINZA	4	QL(4 EA daily); PA
ZYDELIG	4	QL(2 EA daily); PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	PA
<i>arsenic trioxide 10 MG/10ML</i>	4	PA
<i>bexarotene</i>	4	PA
HYDREA (Use <i>hydroxyurea</i>)	NF	
<i>hydroxyurea</i>	1B	
MATULANE	4	PA
PHOTOFRIN	4	PA
PROLEUKIN	4	PA
TARGRETIN (Use <i>bexarotene</i>)	NF	PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	PA
Mitotic Inhibitors		
<i>eribulin mesylate</i>	4	PA
<i>etoposide CAPS</i>	4	PA
HALAVEN (Use <i>eribulin mesylate</i>)	NF	PA
IXEMPRA KIT 15 MG	4	PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Topoisomerase I Inhibitors			<i>bromocriptine mesylate</i> TABS 2.5 MG	1B	
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use <i>irinotecan hcl</i>)	NF	PA	<i>carbidopa-levodopa-entacapone</i>	1B	
HYCANTIN CAPS	4	PA	<i>carbidopa-levodopa</i> TABS	1B	
HYCANTIN SOLR (Use <i>topotecan hcl</i>)	NF		<i>carbidopa-levodopa</i> TBCR	1B	
<i>irinotecan hcl</i> 40 MG/2ML, 100 MG/5ML	4	PA	<i>carbidopa-levodopa</i> TBDP	1B	
<i>topotecan hcl</i> SOLN	4		NEUPRO	2	
TOPOTECAN HCL SOLN (Use <i>topotecan hcl</i>)	NF		PARLODEL CAPS (Use <i>bromocriptine mesylate</i>)	NF	
<i>topotecan hcl</i> SOLR	4		PARLODEL TABS (Use <i>bromocriptine mesylate</i>)	NF	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			<i>pramipexole dihydrochloride</i> TABS 0.125 MG	1B	QL(4 EA daily)
Antiparkinson Adjunctive Therapy			<i>pramipexole dihydrochloride</i> TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	1B	
<i>carbidopa</i>	3		<i>ropinirole hydrochloride</i> TABS	1B	
LODOSYN (Use <i>carbidopa</i>)	NF		<i>ropinirole hydrochloride</i> TB24 8 MG, 12 MG	1B	QL(2 EA daily); ST
Antiparkinson Anticholinergics			<i>ropinirole hydrochloride</i> TB24 2 MG, 4 MG, 6 MG	1B	QL(1 EA daily); ST
<i>benztropine mesylate</i> TABS	1B		SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use <i>carbidopa-levodopa</i>)	NF	
<i>trihexyphenidyl hcl</i> SOLN	1B		Antiparkinson Monoamine Oxidase Inhibitors		
<i>trihexyphenidyl hcl</i> TABS	1B		AZILECT (Use <i>rasagiline mesylate</i>)	NF	QL(1 EA daily); PA
Antiparkinson COMT Inhibitors			<i>rasagiline mesylate</i>	1B	QL(1 EA daily); PA
<i>entacapone</i>	1B	QL(8 EA daily)	<i>selegiline hcl</i> CAPS	1B	
TASMAR (Use <i>tolcapone</i>)	NF		<i>selegiline hcl</i> TABS	1B	
<i>tolcapone</i>	1B		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antiparkinson Dopaminergics			Antimanic Agents		
<i>amantadine hcl</i> CAPS	1B		<i>lithium</i>	1B	
<i>amantadine hcl</i> SOLN	1B				
<i>amantadine hcl</i> TABS	1B				
<i>apomorphine hydrochloride</i> SOCT	4	PA			
<i>bromocriptine mesylate</i> CAPS	1B				

Drug Name	Drug Tier	Requirements/ Limits
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
LITHOBID TBCR (<i>Use lithium carbonate</i>)	NF	
Antipsychotics - Misc.		
EQUETRO 100 MG	3	QL(2 EA daily); ST
EQUETRO 200 MG	3	QL(8 EA daily); ST
EQUETRO 300 MG	3	QL(4 EA daily); ST
GEODON 20 MG, 60 MG, 80 MG (<i>Use ziprasidone hcl</i>)	NF	QL(2 EA daily); AL(At least 18 yrs old)
LATUDA 80 MG (<i>Use lurasidone hcl</i>)	NF	QL(2 EA daily)
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (<i>Use lurasidone hcl</i>)	NF	QL(1 EA daily)
<i>lurasidone hcl</i> 20 MG, 40 MG, 60 MG, 120 MG	1B	QL(1 EA daily)
<i>lurasidone hcl</i> 80 MG	1B	QL(2 EA daily)
<i>ziprasidone hcl</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 EA daily); PA
FANAPT TITRATION PACK A	2	PA
INVEGA 3 MG, 6 MG, 9 MG (<i>Use paliperidone</i>)	NF	
<i>paliperidone</i>	1B	
RISPERDAL CONSTA (<i>Use risperidone microspheres</i>)	NF	QL(0.072 EA daily); PA
RISPERDAL SOLN (<i>Use risperidone</i>)	NF	
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>Use risperidone</i>)	NF	

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

Drug Name	Drug Tier	Requirements/Limits
SAPHRIS 2.5 MG (<i>Use asenapine maleate</i>)	NF	QL(4 EA daily); PA
SAPHRIS 5 MG, 10 MG (<i>Use asenapine maleate</i>)	NF	QL(2 EA daily); PA
SEROQUEL XR TB24 (<i>Use quetiapine fumarate</i>)	NF	
SEROQUEL TABS (<i>Use quetiapine fumarate</i>)	NF	AL(At least 10 yrs old)
ZYPREXA ZYDIS TBDP 20 MG (<i>Use olanzapine</i>)	NF	QL(1 EA daily)
ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (<i>Use olanzapine</i>)	NF	QL(2 EA daily)
ZYPREXA SOLR (<i>Use olanzapine</i>)	NF	QL(0.215 EA daily)
ZYPREXA TABS 2.5 MG, 5 MG (<i>Use olanzapine</i>)	NF	QL(4 EA daily)
ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (<i>Use olanzapine</i>)	NF	QL(2 EA daily)
Phenothiazines		
<i>chlorpromazine hcl SOLN</i>	3	
<i>chlorpromazine hcl TABS</i>	1B	
<i>fluphenazine hcl CONC</i>	1B	
<i>fluphenazine hcl ELIX</i>	1B	
<i>fluphenazine hcl SOLN</i>	1B	
<i>fluphenazine hcl TABS</i>	1B	
<i>perphenazine TABS</i>	1B	
<i>prochlorperazine</i>	1B	
<i>prochlorperazine maleate TABS</i>	1B	
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl TABS</i>	1B	
Quinolinone Derivatives		
ABILIFY TABS (<i>Use aripiprazole</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
<i>aripiprazole SOLN PO</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>aripiprazole TABS</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
REXULTI	3	PA
Thioxanthenes		
<i>thiothixene</i>	1B	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ML daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 EA daily)
APTIVUS CAPS	3	QL(4 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 EA daily)
BIKTARVY	3	QL(1 EA daily)
CABENUVA 600 MG/2ML-400 MG/2ML	3	QL(4 ML per 30 day(s) retail; 4 ML per 30 days mail)
CABENUVA 900 MG/3ML-600 MG/3ML	3	QL(6 ML per 30 day(s) retail; 6 ML per 30 days mail)
CIMDUO	3	QL(1 EA daily); ST
COMPLERA 200 MG-300 MG-25 MG (<i>Use emtricitabine- rilpivirine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
<i>darunavir TABS 800 MG</i>	1B	QL(1 EA daily)
<i>darunavir TABS 600 MG</i>	1B	QL(2 EA daily)
DELSTRIGO	3	QL(1 EA daily)
DESCOVY 200 MG-25 MG	3	QL(1 EA daily)
DOVATO	3	QL(1 EA daily)
EDURANT 25 MG (<i>Use rilpivirine hcl</i>)	3	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 EA daily)	ISENTRESS HD TABS	3	QL(2 EA daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 EA daily)	ISENTRESS CHEW	3	QL(6 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	ISENTRESS TABS	3	QL(2 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	JULUCA	3	QL(1 EA daily)
<i>efavirenz TABS</i>	1B	QL(1 EA daily)	KALETRA SOLN	2	QL(12.5 ML daily)
<i>emtricitabine CAPS</i>	1B	QL(1 EA daily)	KALETRA TABS (Use lopinavir-ritonavir)	NF	QL(4 EA daily)
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	<i>lamivudine SOLN</i>	1B	QL(30 ML daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 EA daily)	<i>lamivudine TABS 150 MG</i>	1B	QL(2 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 EA daily)	<i>lamivudine TABS 300 MG</i>	1B	QL(1 EA daily)
EMTRIVA CAPS (Use <i>emtricitabine</i>)	NF	QL(1 EA daily)	<i>lamivudine-zidovudine</i>	1B	QL(2 EA daily)
EMTRIVA SOLN	3	QL(24 ML daily)	<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ML daily)
EPIVIR SOLN (Use <i>lamivudine</i>)	NF	QL(30 ML daily)	<i>lopinavir-ritonavir TABS</i>	1B	QL(4 EA daily)
EPIVIR TABS 150 MG (Use <i>lamivudine</i>)	NF	QL(2 EA daily)	<i>maraviroc TABS 150 MG</i>	1B	QL(2 EA daily)
EPIVIR TABS 300 MG (Use <i>lamivudine</i>)	NF	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	1B	QL(4 EA daily)
<i>etravirine 100 MG</i>	1B	QL(4 EA daily)	<i>nevirapine SUSP</i>	1B	QL(40 ML daily)
<i>etravirine 200 MG</i>	1B	QL(2 EA daily)	<i>nevirapine TABS</i>	1B	QL(2 EA daily)
EVOTAZ	3	QL(1 EA daily)	<i>nevirapine TB24 400 MG</i>	1B	QL(1 EA daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 EA daily)	NORVIR PACK	3	QL(12 EA daily)
FUZEON SOLR	4	QL(2 EA daily)	NORVIR TABS (Use <i>ritonavir</i>)	NF	QL(12 EA daily)
GENVOYA	3	QL(1 EA daily)	ODEFSEY	3	QL(1 EA daily)
INTELENCE 25 MG	3	QL(8 EA daily)	PIFELTRO	3	QL(1 EA daily)
INTELENCE 100 MG (Use <i>etravirine</i>)	NF	QL(4 EA daily)	PREZCOBIX	3	QL(1 EA daily)
INTELENCE 200 MG (Use <i>etravirine</i>)	NF	QL(2 EA daily)	PREZISTA SUSP	3	QL(12 ML daily)
			PREZISTA TABS 600 MG (Use <i>darunavir</i>)	NF	QL(2 EA daily)
			PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
			PREZISTA TABS 800 MG (Use <i>darunavir</i>)	NF	QL(1 EA daily)
			RETROVIR CAPS (Use <i>zidovudine</i>)	NF	QL(6 EA daily)
			RETROVIR SOLN	3	QL(60 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
RETROVIR SYRP (<i>Use zidovudine</i>)	NF	QL(60 ML daily)
REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NF	QL(2 EA daily)
REYATAZ CAPS 300 MG (<i>Use atazanavir sulfate</i>)	NF	QL(1 EA daily)
<i>rilpivirine hcl</i> 25 MG	3	QL(1 EA daily)
<i>ritonavir</i> TABS	1B	QL(12 EA daily)
SELZENTRY SOLN	3	QL(30 ML daily)
SELZENTRY TABS 150 MG (<i>Use maraviroc</i>)	NF	QL(2 EA daily)
SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	NF	QL(4 EA daily)
STRIBILD	3	QL(1 EA daily)
SYMFI (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
SYMFI LO (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
SYMTUZA	3	QL(1 EA daily)
<i>tenofovir disoproxil fumarate</i> TABS	1B	QL(1 EA daily)
TIVICAY PD TBSO	3	QL(6 EA daily)
TIVICAY TABS 50 MG	3	QL(2 EA daily)
TRIUMEQ PD TBSO	3	QL(6 EA daily)
TRIUMEQ TABS	3	QL(1 EA daily)
TRUVADA (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
TYBOST	3	QL(1 EA daily)
VIRACEPT TABS 625 MG	3	QL(4 EA daily)
VIRACEPT TABS 250 MG	3	QL(10 EA daily)
VIREAD POWD	3	QL(7.5 GM daily)
VIREAD TABS (<i>Use tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)
ZIAGEN SOLN (<i>Use abacavir sulfate</i>)	NF	QL(32 ML daily)
<i>zidovudine</i> CAPS	1B	QL(6 EA daily)
<i>zidovudine</i> SYRP	1B	QL(60 ML daily)
<i>zidovudine</i> TABS	1B	QL(2 EA daily)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium</i> SOLR	1B	
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NF	QL(4 EA daily); PA
<i>valganciclovir hcl</i> TABS	1B	QL(4 EA daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 EA daily)
BARACLUDE TABS (<i>Use entecavir</i>)	NF	QL(1 EA daily)
<i>entecavir</i> TABS	4	QL(1 EA daily)
<i>lamivudine (hbv)</i> TABS	1B	QL(3 EA daily)
PEGASYS SOLN	4	QL(0.0714 ML daily); PA
PEGASYS SOSY	4	QL(0.072 ML daily); PA
<i>ribavirin (hepatitis c)</i> CAPS	1B	QL(7 EA daily)
<i>ribavirin (hepatitis c)</i> TABS 200 MG	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</i> CAPS	1A	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)
<i>acyclovir</i> SUSP	1B	QL(13.34 ML daily)
<i>acyclovir</i> TABS PO	1B	QL(5 EA daily)
<i>famciclovir</i> 500 MG	1B	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 EA daily)	Pressure		
<i>valacyclovir hcl 1 GM</i>	1B	QL(4 EA daily)	Alpha-Beta Blockers		
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 EA daily)	<i>carvedilol</i>	1A	
VALTREX 1 GM (<i>Use valacyclovir hcl</i>)	NF	QL(4 EA daily)	<i>carvedilol phosphate</i>	3	QL(1 EA daily)
VALTREX 500 MG (<i>Use valacyclovir hcl</i>)	NF	QL(2 EA daily)	COREG (<i>Use carvedilol</i>)	NF	
Influenza Agents			COREG CR (<i>Use carvedilol phosphate</i>)	NF	QL(1 EA daily)
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>labetalol hcl SOLN</i>	1B	
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 EA daily)
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail	<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 EA daily)	Beta Blockers Cardio-Selective		
TAMIFLU CAPS (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>acebutolol hcl CAPS</i>	1B	
TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>atenolol TABS</i>	1A	
BETA BLOCKERS - Drugs to Treat High Blood			<i>betaxolol hcl</i>	1B	
			<i>bisoprolol fumarate</i>	1B	
			BYSTOLIC 2.5 MG, 5 MG, 10 MG (<i>Use nebivolol hcl</i>)	NF	QL(1 EA daily)
			BYSTOLIC 20 MG (<i>Use nebivolol hcl</i>)	NF	QL(2 EA daily)
			LOPRESSOR TABS (<i>Use metoprolol tartrate</i>)	NF	
			<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	
			<i>metoprolol succinate TB24 200 MG</i>	1B	QL(2 EA daily)
			<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
			<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1A	
			<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
			<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
			TENORMIN TABS (<i>Use atenolol</i>)	NF	
			TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NF	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate)	NF		CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads)	NF	QL(2 EA daily)
Beta Blockers Non-Selective			CARDIZEM LA TB24 (Use diltiazem hcl)	NF	
BETAPACE AF (Use sotalol hcl (afib/afl))	NF		CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)	NF	
BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl)	NF	QL(2 EA daily)	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	1B	
CORGARD TABS 20 MG (Use nadolol)	NF	QL(3 EA daily)	diltiazem hcl coated beads CP24 180 MG, 240 MG	1B	QL(2 EA daily)
CORGARD TABS 40 MG (Use nadolol)	NF	QL(6 EA daily)	diltiazem hcl extended release beads	1B	
INDERAL LA CP24 (Use propranolol hcl)	NF	QL(2 EA daily)	diltiazem hcl extended release beads	1B	
nadolol TABS 80 MG	1B		diltiazem hcl CP12	1B	QL(2 EA daily)
nadolol TABS 20 MG	1B	QL(3 EA daily)	diltiazem hcl CP24	1B	
nadolol TABS 40 MG	1B	QL(6 EA daily)	diltiazem hcl SOLN 50 MG/10ML	1B	
pindolol TABS	1B		DILTIAZEM HCL SOLR	1B	
propranolol hcl CP24	1B	QL(2 EA daily)	diltiazem hcl TABS	1B	
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	1B		diltiazem hcl TB24	1B	
propranolol hcl TABS	1B		felodipine	1B	
sotalol hcl (afib/afl)	1B		isradipine CAPS	1B	
sotalol hcl TABS 80 MG, 120 MG, 160 MG	1B	QL(2 EA daily)	nicardipine hcl CAPS	1B	
sotalol hcl TABS 240 MG	1B		nicardipine hcl SOLN	1B	
timolol maleate TABS	1B		NICARDIPINE HCL SOLN (Use nicardipine hcl)	NF	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			nifedipine CAPS 10 MG	1B	
Calcium Channel Blockers			nifedipine CAPS 20 MG	1B	QL(9 EA daily)
amlodipine besylate TABS	1B		nifedipine TB24	1B	
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use nicardipine hcl)	NF		nifedipine TB24 90 MG	1B	QL(1 EA daily)
CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use diltiazem hcl coated beads)	NF		nifedipine TB24 60 MG	1B	QL(2 EA daily)
			nifedipine TB24	1B	
			nimodipine CAPS	1B	
			nisoldipine	1B	

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Drug Name	Drug Tier	Requirements/ Limits
NORVASC TABS (<i>Use amlodipine besylate</i>)	NF	
PROCARDIA XL TB24 (<i>Use nifedipine</i>)	NF	
SULAR 8.5 MG, 17 MG, 34 MG (<i>Use nisoldipine</i>)	NF	
TIAZAC (<i>Use diltiazem hcl extended release beads</i>)	NF	
TIAZAC (<i>Use diltiazem hcl extended release beads</i>)	NF	
VERAPAMIL HCL ER CP24 (<i>Use verapamil hcl</i>)	NF	
<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	
<i>verapamil hcl TBCR</i>	1B	
VERELAN PM CP24 (<i>Use verapamil hcl</i>)	NF	
VERELAN CP24 (<i>Use verapamil hcl</i>)	NF	QL(1 EA daily)
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1B	
<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (<i>Use digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG (<i>Use digoxin</i>)	NF	
LANOXIN TABS 250 MCG (<i>Use digoxin</i>)	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		

Drug Name	Drug Tier	Requirements/ Limits
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 EA daily)
BIDIL (<i>Use isosorbide dinitrate-hydralazine hcl</i>)	NF	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>Use amlodipine besylate-atorvastatin calcium</i>)	NF	QL(1 EA daily)
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>Use sacubitril-valsartan</i>)	NF	QL(2 EA daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
<i>sacubitril-valsartan TABS</i>	1B	QL(2 EA daily)
Impotence Agents		
<i>avanafil</i>	1B	QL(0.134 EA daily)
CIALIS 5 MG (<i>Use tadalafil</i>)	NF	BPH Only; QL(1 EA daily); PA
<i>sildenafil citrate</i>	1B	QL(0.1334 EA daily); PA
STENDRA (<i>Use avanafil</i>)	NF	QL(0.134 EA daily)
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 EA daily); PA
VIAGRA (<i>Use sildenafil citrate</i>)	NF	QL(0.1334 EA daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
FLOLAN 1.5 MG (<i>Use epoprostenol sodium</i>)	NF	PA
<i>treprostinil SOLN IJ</i>	4	PA
VELETRI (<i>Use epoprostenol sodium</i>)	NF	PA
Pulmonary Hypertension - Endothelin Receptor		

Drug Name	Drug Tier	Requirements/ Limits
Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); PA
<i>bosentan TABS</i>	4	QL(2 EA daily); PA
<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); PA
LETAIRIS (Use <i>ambrisentan</i>)	NF	QL(1 EA daily); PA
TRACLEER TABS (Use <i>bosentan</i>)	NF	QL(2 EA daily); PA
TRACLEER TBSO 32 MG (Use <i>bosentan</i>)	NF	QL(2 EA daily); PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (Use <i>tadalafil (pulmonary hypertension)</i>)	NF	QL(2 EA daily); PA
REVATIO SOLN (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(37.5 ML daily); PA
REVATIO SUSR (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(6 ML daily); PA
REVATIO TABS (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(3 EA daily); PA
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); 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); PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); PA
Sinus Node Inhibitors		
CORLANOR TABS (Use <i>ivabradine hcl</i>)	NF	QL(2 EA daily); PA
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 250 MG/5ML</i>	1B	
CEFOTAN IJ (Use <i>cefotetan disodium</i>)	NF	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	
<i>cefuroxime sodium IJ 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1B	
<i>cefdinir SUSR</i>	1B	
<i>cefixime CAPS</i>	1B	
<i>cefixime SUSR</i>	1B	ST
<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefpodoxime proxetil TABS</i>	1B	
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
Cephalosporins - 4th Generation		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefepime hcl SOLR IJ 1 GM</i>	1B		<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
Cephalosporins - 5th Generation			LO LOESTRIN FE TABS	0	
<i>ceftaroline fosamil 400 MG, 600 MG</i>	1B		MIRCETTE (Use <i>desogestrel-ethinyl estradiol (biphasic)</i>)	NF	
TEFLARO 400 MG, 600 MG (Use <i>ceftaroline fosamil</i>)	3		NATAZIA	0	
CONTRACEPTIVES - Drugs to Prevent Pregnancy			NEXTSTELLIS	0	
Combination Contraceptives - Oral			<i>norethin acet & estrad-fe CAPS</i>	0	
AVERI TABS PO	0		<i>norethin acet & estrad-fe CHEW</i>	0	
BALCOLTRA (Use <i>levonorgestrel-ethinyl estradiol-iron</i>)	NF		<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
BEYAZ (Use <i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	NF		<i>norethindrone & eth estradiol</i>	0	
<i>desogestrel & ethinyl estradiol</i>	0		<i>norethindrone & ethinyl estradiol-fe</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0		<i>norethindrone acet & eth estra TABS</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0		<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0		<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0		<i>norgestimate-ethinyl estradiol</i>	0	
<i>ethynodiol diacet & eth estrad</i>	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
FEMLYV TBDP	0		<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
<i>levonorgestrel & eth estradiol TABS</i>	0		SAFYRAL (Use <i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	NF	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0		SEASONIQUE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0		TAYTULLA CAPS (Use <i>norethin acet & estrad-fe</i>)	NF	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0		TYBLUME CHEW	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YASMIN 28 (<i>Use drospirenone-ethinyl estradiol</i>)	NF		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ML per 90 day(s) retail)
YAZ (<i>Use drospirenone-ethinyl estradiol</i>)	NF		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail)
Combination Contraceptives - Transdermal			Progestin Contraceptives - IUD		
<i>norelgestromin-ethinyl estradiol</i>	0		KYLEENA	0	
TWIRLA	0	QL(3 EA per 28 day(s) retail; 9 EA per 84 days mail)	LILETTA (52 MG)	0	
Combination Contraceptives - Vaginal			MIRENA (52 MG)	0	
ANNOVERA	0		SKYLA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 EA daily)	Progestin Contraceptives - Oral		
NUVARING (<i>Use etonogestrel-ethinyl estradiol</i>)	NF	QL(0.05 EA daily)	<i>norethindrone (contraceptive)</i>	0	
Copper Contraceptives - IUD			OPILL	0	
MIUDELLA	0		SLYND	0	QL(1 EA daily)
PARAGARD INTRAUTERINE COPPER	0		CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Emergency Contraceptives			Glucocorticosteroids		
ELLA	0		<i>budesonide CPEP</i>	1B	QL(3 EA daily)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0		CORTEF TABS (<i>Use hydrocortisone</i>)	NF	
Progestin Contraceptives - Implants			DEPO-MEDROL SUSP (<i>Use methylprednisolone acetate</i>)	NF	
NEXPLANON	0		DEPO-MEDROL SUSP	3	
Progestin Contraceptives - Injectable			DEXAMETHASONE INTENSOL CONC	1B	
DEPO-PROVERA SUSP IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail)	<i>dexamethasone ELIX</i>	1B	
DEPO-PROVERA SUSY IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail)	<i>dexamethasone SOLN</i>	1B	
DEPO-SUBQ PROVERA 104 SUSY SC	0		<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
			<i>hydrocortisone TABS</i>	1B	

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Drug Name	Drug Tier	Requirements/ Limits
KENALOG-40 SUSP (<i>Use triamcinolone acetonide</i>)	NF	
MEDROL TABS	3	
MEDROL TABS 4 MG, 8 MG, 16 MG (<i>Use methylprednisolone</i>)	NF	
MEDROL TBPB (<i>Use methylprednisolone</i>)	NF	
<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 TBPB</i>	1B	
ORAPRED ODT TBPB (<i>Use prednisolone sodium phosphate</i>)	NF	
PEDIAPRED SOLN (<i>Use prednisolone sodium phosphate</i>)	NF	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBPB</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 TBPB</i>	1B	
SOLU-CORTEF (<i>Use hydrocortisone sod succinate</i>)	NF	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	

Drug Name	Drug Tier	Requirements/ Limits
SOLU-MEDROL 500 MG, 1000 MG (<i>Use methylprednisolone sod succ</i>)	NF	
<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 200 MG</i>	1B	QL(3 EA daily)
<i>benzonatate 100 MG</i>	1B	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1B	QL(4 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUEP</i>	1B	
Misc. Respiratory Inhalants		
HYPERSAL NEBU (<i>Use sodium chloride (inhalant)</i>)	NF	
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
PULMOSAL NEBU 7 % (<i>Use sodium chloride (inhalant)</i>)	NF	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>Use isotretinoin</i>)	NF	AL(At least 12 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST	<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ML daily); AL(At least 12 yrs old)
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old)	<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); RX/OTC	<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur)</i>	NF	AL(At least 12 yrs old)	<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<i>AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)</i>	NF	AL(At least 12 yrs old)	<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
<i>BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)</i>	NF	AL(At least 12 yrs old); PA	<i>DIFFERIN CREA (Use adapalene)</i>	NF	AL(At least 12 yrs old)
<i>BENZEPRO CREAMY WASH LIQD</i>	2	AL(At least 12 yrs old)	<i>DIFFERIN GEL (Use adapalene)</i>	NF	AL(At least 12 yrs old); RX/OTC
<i>BENZEPRO FOAM 5.3 %</i>	2	AL(At least 12 yrs old)	<i>DIFFERIN LOTN</i>	2	AL(At least 12 yrs old); ST
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA	<i>EPIDUO FORTE GEL (Use adapalene-benzoyl peroxide)</i>	NF	
<i>benzoyl peroxide FOAM 9.8 %</i>	1B	AL(At least 12 yrs old)	<i>EPIDUO GEL (Use adapalene-benzoyl peroxide)</i>	NF	AL(At least 12 yrs old); ST
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old)	<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)	<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide LIQD 4 %, 10 %</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
<i>CLEOCIN-T LOTN (Use clindamycin phosphate (topical))</i>	NF	AL(At least 12 yrs old)	<i>KLARON (Use sulfacetamide sodium (acne))</i>	NF	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA	<i>PR BENZOYL PEROXIDE WASH LIQD</i>	2	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 GM daily)	<i>RETIN-A MICRO 0.04 % (Use tretinoin microsphere)</i>	NF	
<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)	<i>RETIN-A MICRO 0.1 % (Use tretinoin microsphere)</i>	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits
RETIN-A MICRO PUMP 0.1 % (<i>Use tretinoin microsphere</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
RETIN-A CREA (<i>Use tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
RETIN-A GEL (<i>Use tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
SSS 10-5 CREA 10 %-5 % (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	AL(At least 12 yrs old)
<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)
SUMADAN WASH LIQD (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	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
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
ZIANA (<i>Use clindamycin phosphate-tretinoin</i>)	NF	AL(At least 12 yrs old); ST
Antibiotics - Topical		

Drug Name	Drug Tier	Requirements/ Limits
<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
<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)
EXELDERM CREA (<i>Use sulconazole nitrate</i>)	NF	
EXELDERM SOLN (<i>Use sulconazole nitrate</i>)	NF	
<i>ketoconazole (topical) CREA</i>	1B	QL(10 GM daily)
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	NF	QL(4.5 GM daily); RX/OTC
LOTRIMIN AF CREA (Use clotrimazole (topical))	NF	QL(4.5 GM daily); RX/OTC
LOTRIMIN ULTRA (Use butenafine hcl)	NF	QL(6 GM daily)
luliconazole	1B	PA
LUZU (Use luliconazole)	NF	
naftifine hcl CREA 2 %	1B	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
naftifine hcl CREA 1 %	1B	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
nystatin (topical) CREA	1B	QL(10 GM daily)
nystatin (topical) OINT	1B	QL(6 GM daily)
nystatin (topical) POWD EX	1B	QL(10 GM daily)
nystatin-triamcinolone CREA	1B	QL(10 GM daily)
nystatin-triamcinolone OINT	1B	QL(4 GM daily)
oxiconazole nitrate CREA	1B	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail

Drug Name	Drug Tier	Requirements/ Limits
sulconazole nitrate CREA	1B	
sulconazole nitrate SOLN	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
tavaborole	1B	PA
Anti-inflammatory Agents - Topical		
diclofenac epolamine PTCH EX	1B	QL(2 EA daily); PA
diclofenac sodium (topical) GEL EX	1B	QL(3.34 GM daily); RX/OTC
FLECTOR PTCH EX (Use diclofenac epolamine)	NF	
Antineoplastic or Premalignant Lesion Agents - Topical		
bexarotene (topical)	4	PA
CARAC CREA (Use fluorouracil (topical))	NF	
diclofenac sodium (actinic keratoses) EX	1B	QL(3.34 GM daily); PA
EFUDEX CREA (Use fluorouracil (topical))	NF	QL(4 GM daily)
fluorouracil (topical) CREA 5 %	1B	QL(4 GM daily)
fluorouracil (topical) SOLN	1B	QL(2 ML daily)
PANRETIN	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
TARGRETIN (Use bexarotene (topical))	NF	PA
Antipruritics - Topical		
doxepin hcl (antipruritic)	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRUDOXIN (Use doxepin hcl (antipruritic))	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	IMULDOSA SOSY SC 45 MG/0.5ML	4	QL(0.012 ML daily); PA
			IMULDOSA SOSY SC 90 MG/ML	4	QL(0.018 ML daily); PA
			methoxsalen rapid	1B	QL(4 EA daily)
			PELLIX SOLN 0.005 % (Use calcipotriene)	NF	QL(4 ML daily); PA
			PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); PA
ZONALON (Use doxepin hcl (antipruritic))	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	PYZCHIVA SC 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
			STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); PA
			STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); PA
Antipsoriatics			tazarotene CREA 0.1 %	1B	QL(1 GM daily)
acitretin 25 MG	1B	QL(2 EA daily)	TAZORAC CREA 0.1 % (Use tazarotene)	NF	QL(1 GM daily)
acitretin 10 MG, 17.5 MG	1B	QL(1 EA daily)	TREMFYA ONE-PRESS SOPN SC 100 MG/ML	4	QL(0.018 ML daily); PA
calcipotriene CREA	1B	QL(4 GM daily); PA	TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
calcipotriene OINT	1B	QL(4 GM daily); PA	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); PA
calcipotriene SOLN	1B	QL(4 ML daily); PA	VECTICAL (Use calcitriol (topical))	NF	QL(3.34 GM daily)
calcitriol (topical)	1B	QL(3.34 GM daily)	YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); PA	YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); PA	YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); PA	Antiseborrheic Products		
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); PA	selenium sulfide LOTN 2.5 %	1B	
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			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SELSUN BLUE CARE MENS MAX STR LOTN (Use selenium sulfide)	NF		<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
SELSUN BLUE DAILY LOTN (Use selenium sulfide)	NF		<i>amcinonide OINT</i>	3	
SELSUN BLUE MEDICATED LOTN (Use selenium sulfide)	NF		<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 GM daily)
SELSUN BLUE MOISTURIZING LOTN (Use selenium sulfide)	NF		<i>betamethasone dipropionate (topical) LOTN</i>	1B	
SELSUN BLUE LOTN (Use selenium sulfide)	NF		<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 GM daily)
Antivirals - Topical			<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 GM daily)
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ML daily)
DENAVIR (Use penciclovir)	NF	QL(0.18 GM daily)	<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 GM daily)
<i>penciclovir</i>	3	QL(0.18 GM daily)	<i>betamethasone valerate CREA</i>	1B	QL(2.5 GM daily)
ZOVIRAX OINT (Use acyclovir topical)	NF	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate FOAM</i>	1B	QL(1.67 GM daily)
Burn Products			<i>betamethasone valerate LOTN</i>	1B	QL(5 ML daily)
<i>mafenide acetate PACK</i>	3		<i>betamethasone valerate OINT</i>	1B	QL(3 GM daily)
SILVADENE (Use silver sulfadiazine)	NF	QL(20 GM daily)	<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
<i>silver sulfadiazine</i>	1B	QL(20 GM daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
SULFAMYLON CREA	3		<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 GM daily); PA
Corticosteroids - Topical			<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 GM daily); PA
<i>alclometasone dipropionate CREA</i>	1B	QL(2 GM daily)			
<i>alclometasone dipropionate OINT</i>	1B	QL(3 GM daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clobetasol propionate FOAM</i>	1B	QL(3 GM daily); ST	<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 GM daily)
<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 GM daily); ST	<i>fluocinolone acetonide OIL</i>	1B	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 GM daily); PA	<i>fluocinolone acetonide OINT</i>	1B	QL(4 GM daily)
<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ML daily); PA	<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ML daily)
<i>clocortolone pivalate</i>	3	QL(3 GM daily)	<i>fluocinonide emulsified base</i>	1B	QL(2 GM daily)
CLODERM (Use <i>clocortolone pivalate</i>)	NF	QL(3 GM daily)	<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 GM daily)
CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 GM daily)
DERMA-SMOOTH/FS BODY OIL (Use <i>fluocinolone acetonide</i>)	NF	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>fluocinonide GEL</i>	1B	
DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i>)	NF	QL(8 ML daily)	<i>fluocinonide OINT</i>	1B	QL(2 GM daily)
<i>desonide CREA</i>	1B	QL(4 GM daily)	<i>fluocinonide SOLN</i>	1B	QL(2 ML daily)
<i>desonide LOTN</i>	1B	QL(4 ML daily)	<i>flurandrenolide CREA</i>	2	QL(2 GM daily)
<i>desonide OINT</i>	1B	QL(3 GM daily)	<i>flurandrenolide LOTN</i>	2	QL(2 ML daily)
<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 GM daily)	<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 GM daily)
<i>desoximetasone GEL</i>	1B	QL(3 GM daily)	<i>fluticasone propionate LOTN</i>	1B	QL(6 ML daily)
<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 GM daily)	<i>fluticasone propionate OINT</i>	1B	QL(4 GM daily)
<i>diflorasone diacetate CREA</i>	1B	PA	<i>halcinonide CREA</i>	1B	PA
<i>diflorasone diacetate OINT</i>	1B	PA	<i>halobetasol propionate CREA</i>	1B	QL(3.5 GM daily)
DIPROLENE OINT (Use <i>betamethasone dipropionate augmented</i>)	NF	QL(3.5 GM daily)	<i>halobetasol propionate OINT</i>	1B	QL(3.5 GM daily)
<i>fluocinolone acetonide CREA 0.01 %</i>	1B		HALOG CREA (Use <i>halcinonide</i>)	NF	PA
			HALOG OINT	3	PA
			<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 EA daily); RX/OTC
			<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 GM daily); RX/OTC
<i>hydrocortisone butyrate CREA</i>	1B	QL(3 GM daily)
<i>hydrocortisone butyrate OINT</i>	1B	QL(3 GM daily)
<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ML daily)
<i>hydrocortisone valerate CREA</i>	1B	
<i>hydrocortisone valerate OINT</i>	1B	
<i>mometasone furoate CREA</i>	1B	QL(3 GM daily)
<i>mometasone furoate OINT</i>	1B	QL(4 GM daily)
<i>mometasone furoate SOLN</i>	1B	QL(5 ML daily)
SYNALAR CREA (Use <i>fluocinolone acetonide</i>)	NF	QL(4 GM daily)
SYNALAR OINT (Use <i>fluocinolone acetonide</i>)	NF	QL(4 GM daily)
TACLONEX SUSP (Use <i>calcipotriene-betamethasone dipropionate</i>)	NF	ST
TOPICORT CREA 0.25 % (Use <i>desoximetasone</i>)	NF	QL(4 GM daily)
TOPICORT CREA 0.05 % (Use <i>desoximetasone</i>)	NF	
TOPICORT GEL (Use <i>desoximetasone</i>)	NF	QL(3 GM daily)
TOPICORT OINT 0.25 % (Use <i>desoximetasone</i>)	NF	QL(4 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 GM daily)
VANOS CREA (Use <i>fluocinonide</i>)	NF	QL(4 GM daily)
Eczema Agents		
DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); PA
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 GM daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1B	QL(12 EA per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
ELIDEL (Use <i>pimecrolimus</i>)	NF	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>pimecrolimus</i>	1B	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		

Drug Name	Drug Tier	Requirements/ Limits
CANTHARIDIN SOLN	3	PA
<i>podofilox SOLN</i>	1B	
YCANTH SOLN	3	PA
Local Anesthetics - Topical		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1B	PA
LIDODERM PTCH (<i>Use lidocaine</i>)	NF	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
METROCREAM CREA (<i>Use metronidazole (topical)</i>)	NF	QL(3 GM daily)
METROGEL GEL 1 % (<i>Use metronidazole (topical)</i>)	NF	QL(5 GM daily)
<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	
MIRVASO (<i>Use brimonidine tartrate (topical)</i>)	NF	QL(1 GM daily); PA
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1B	PA

Drug Name	Drug Tier	Requirements/ Limits
ELIMITE CREA (<i>Use permethrin</i>)	NF	
<i>ivermectin (pediculicide)</i>	1B	PA
<i>malathion</i>	1B	
NATROBA (<i>Use spinosad</i>)	NF	PA
OVIDE (<i>Use malathion</i>)	NF	
<i>permethrin CREA</i>	1B	
PERMETHRIN CREA 5 % (<i>Use permethrin</i>)	NF	
<i>permethrin LIQD EX spinosad</i>	1B	
<i>spinosad</i>	1B	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
Diagnostic Tests		
CHEMSTRIP K STRP	1B	
FORA GTEL BLOOD KETONE TEST	1B	
FORA TEST N'GO ADV-VOICE-6 CON	1B	
GOJJI BLOOD KETONE TEST	1B	
KETONE TEST STRP	1B	
KETOSTIX STRP	1B	
NOVA MAX PLUS KETONE TEST	1B	
PRECISION XTRA KETONE	1B	
RELION KETONE TEST STRP	1B	
RELION TRUE METRIX TEST STRIPS STRP	1B	QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1B	QL(3.34 EA daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Enzymes			Loop Diuretics		
Digestive Enzymes			<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
CREON CPEP	2	Non-FDA approved uses require Prior Authorization	<i>bumetanide TABS</i>	1B	QL(5 EA daily)
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	BUMEX TABS 0.5 MG (Use <i>bumetanide</i>)	NF	QL(5 EA daily)
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2		EDECRIN (Use <i>ethacrynic acid</i>)	NF	QL(16 EA daily)
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			<i>ethacrynic acid</i>	1B	QL(16 EA daily)
Carbonic Anhydrase Inhibitors			<i>furosemide SOLN IJ 10 MG/ML</i>	1B	
<i>acetazolamide sodium</i>	1B		<i>furosemide TABS</i>	1A	
<i>acetazolamide CP12</i>	1B	QL(2 EA daily)	LASIX TABS (Use <i>furosemide</i>)	NF	
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 EA daily)	<i>torseamide TABS</i>	1B	
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 EA daily)	Potassium Sparing Diuretics		
<i>methazolamide TABS</i>	1B	QL(6 EA daily)	ALDACTONE TABS (Use <i>spironolactone</i>)	NF	
Diuretic Combinations			<i>amiloride hcl TABS</i>	1B	
<i>amiloride & hydrochlorothiazide</i>	1B		DYRENIUM CAPS (Use <i>triamterene</i>)	NF	QL(3 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	1B		<i>spironolactone TABS</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1A		<i>triamterene CAPS</i>	1B	QL(3 EA daily)
<i>triamterene & hydrochlorothiazide TABS</i>	1A		Thiazides and Thiazide-Like Diuretics		
			<i>chlorthalidone 25 MG, 50 MG</i>	1A	
			DIURIL SUSP	2	QL(20 ML daily)
			<i>hydrochlorothiazide CAPS</i>	1B	QL(2 EA daily)
			<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 EA daily)
			<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.		

Drug Name	Drug Tier	Requirements/ Limits
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 150 MG (Use risedronate sodium)	NF	QL(0.036 EA daily); PA
ACTONEL TABS 35 MG (Use risedronate sodium)	NF	QL(0.143 EA daily); PA
alendronate sodium TABS 35 MG, 70 MG	1A	QL(0.143 EA daily)
alendronate sodium TABS 5 MG, 10 MG	1A	QL(1 EA daily)
ATELVIA TBEC (Use risedronate sodium)	NF	PA
calcitonin (salmon) NA	1B	QL(0.14 ML daily)
FORTEO SOPN (Use teriparatide)	NF	QL(0.09 ML daily); PA
FOSAMAX PLUS D	3	QL(0.143 EA daily); PA
FOSAMAX TABS 70 MG (Use alendronate sodium)	NF	QL(0.143 EA daily)
ibandronate sodium SOLN	4	PA
ibandronate sodium TABS	1B	QL(0.036 EA daily)
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	4	PA
PAMIDRONATE DISODIUM SOLN	4	PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; PA
RECLAST SOLN (Use zoledronic acid)	NF	PA
risedronate sodium TABS 35 MG	1B	QL(0.143 EA daily); PA
risedronate sodium TABS 5 MG, 30 MG	1B	QL(1 EA daily); PA
risedronate sodium TABS 150 MG	1B	QL(0.036 EA daily); PA
risedronate sodium TBEC	1B	PA

Drug Name	Drug Tier	Requirements/ Limits
teriparatide SOPN	4	QL(0.09 ML daily); PA
TYMLOS	4	PA
zoledronic acid SOLN 5 MG/100ML	4	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	PA
clomiphene citrate TABS	3	PA
GnRH/LHRH Antagonists		
ganirelix acetate	4	PA
GANIRELIX ACETATE (Use ganirelix acetate)	NF	PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	PA
GENOTROPIN CART SC	4	PA
NORDITROPIN FLEXPRO SOPN	4	PA
Hormone Receptor Modulators		
EVISTA (Use raloxifene hcl)	NF	QL(1 EA daily)
OSPHEA	3	PA
raloxifene hcl	0	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	PA
Metabolic Modifiers		
ALDURAZYME	4	PA
betaine	4	PA
BUPHENYL POWD (Use sodium phenylbutyrate)	NF	PA
BUPHENYL TABS (Use sodium phenylbutyrate)	NF	PA
calcitriol CAPS	1B	
calcitriol SOLN PO	1B	
cinacalcet hcl	1B	QL(4 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CYSTADANE (Use betaine)	NF	PA	DESMOPRESSIN ACETATE SOLN NA	4	PA
doxercalciferol CAPS	1B		desmopressin acetate TABS 0.2 MG	1B	QL(8 EA daily)
doxercalciferol SOLN	1B		desmopressin acetate TABS 0.1 MG	1B	QL(6 EA daily)
LUMIZYME	4	PA	vasopressin SOLN IV	4	PA
MYALEPT	4	PA	VASOPRESSIN SOLN IV 20 UNIT/ML (Use vasopressin)	NF	PA
paricalcitol CAPS	1B		VASOSTRICT SOLN IV (Use vasopressin)	NF	PA
paricalcitol SOLN	1B		Prolactin Inhibitors		
ROCALTROL CAPS (Use calcitriol)	NF		cabergoline	1B	
ROCALTROL SOLN PO (Use calcitriol)	NF		Somatostatic Agents		
SENSIPAR (Use cinacalcet hcl)	NF	QL(4 EA daily); PA	octreotide acetate SOLN	4	PA
sodium phenylbutyrate POWD	1B	PA	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	NF	PA
sodium phenylbutyrate TABS	1B	PA	Vasopressin Receptor Antagonists		
STRENSIQ	4	PA	JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)	NF	QL(2 EA daily); PA
ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	NF		SAMSCA TABS PO (Use tolvaptan (hyponatremia))	NF	QL(2 EA daily); PA
ZEMPLAR SOLN (Use paricalcitol)	NF		tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	4	QL(2 EA daily); PA
Posterior Pituitary Hormones			tolvaptan TABS	4	QL(2 EA daily); PA
DDAVP PF SOLN IJ (Use desmopressin acetate)	NF	PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	NF	PA	Estrogen Combinations		
DDAVP TABS 0.2 MG (Use desmopressin acetate)	NF	QL(8 EA daily)	ACTIVELLA TABS 1 MG-0.5 MG (Use estradiol & norethindrone acetate)	NF	
DDAVP TABS 0.1 MG (Use desmopressin acetate)	NF	QL(6 EA daily)	ANGELIQ	3	
desmopressin acetate spray	1B		BIJUVA	3	
desmopressin acetate spray refrigerated 0.01 %	1B		CLIMARA PRO	3	
desmopressin acetate SOLN IJ	1B	PA	COMBIPATCH PTTW	3	

Drug Name	Drug Tier	Requirements/ Limits
COVARYX 2.5 MG-1.25 MG (Use esterified estrogens & methyltestosterone)	NF	
COVARYX HS 1.25 MG-0.625 MG (Use esterified estrogens & methyltestosterone)	NF	
DUAVEE	3	
EEMT 2.5 MG-1.25 MG (Use esterified estrogens & methyltestosterone)	NF	
EEMT HS 1.25 MG-0.625 MG (Use esterified estrogens & methyltestosterone)	NF	
esterified estrogens & methyltestosterone	3	
estradiol & norethindrone acetate TABS	3	
ESTRATEST H.S. (Use esterified estrogens & methyltestosterone)	NF	
norethindrone acetate-ethinyl estradiol	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 EA daily)
Estrogens		
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NF	
DELESTROGEN (Use estradiol valerate)	NF	
DEPO-ESTRADIOL	3	
DIVIGEL GEL (Use estradiol)	NF	
ELESTRIN GEL	3	
ESTRACE TABS (Use estradiol)	NF	
estradiol valerate	1B	

Drug Name	Drug Tier	Requirements/ Limits
estradiol GEL	3	
estradiol GEL	1B	
estradiol PTTW	1B	QL(0.572 EA daily)
estradiol PTWK	1B	
estradiol TABS	1B	
ESTROGEL GEL (Use estradiol)	NF	
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	1B	QL(1 EA daily)
EVAMIST SOLN	3	
MENEST 2.5 MG	3	
MENOSTAR PTWK	3	
MINIVELLE PTTW (Use estradiol)	NF	QL(0.572 EA daily)
PREMARIN SOLR	2	
PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated)	NF	QL(1 EA daily)
VIVELLE-DOT PTTW (Use estradiol)	NF	QL(0.572 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	1B	
CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	NF	
levofloxacin in d5w 500 MG/100ML	1B	
levofloxacin SOLN PO	1B	
levofloxacin TABS 250 MG, 750 MG	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>levofloxacin TABS 500 MG</i>	1A		APRISO CP24 (<i>Use mesalamine</i>)	NF	
<i>moxifloxacin hcl in sodium chloride</i>	1B		AZULFIDINE EN-TABS TBEC (<i>Use sulfasalazine</i>)	NF	
<i>moxifloxacin hcl TABS</i>	1B		AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NF	
<i>ofloxacin 300 MG, 400 MG</i>	1B		<i>balsalazide disodium CAPS</i>	1B	QL(9 EA daily)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs			CANASA SUPP (<i>Use mesalamine</i>)	NF	
5-HT4 Receptor Agonists			COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NF	QL(9 EA daily)
<i>MOTEGRITY (Use prucalopride succinate)</i>	NF	QL(1 EA daily)	DELZICOL CPDR (<i>Use mesalamine</i>)	NF	
<i>prucalopride succinate</i>	1B	QL(1 EA daily)	DIPENTUM	2	
Agents for Chronic Idiopathic Constipation (CIC)			IMULDOSA SOLN IV 130 MG/26ML	4	QL(3.47 ML daily); PA
TRULANCE	2	QL(1 EA daily)	INFLECTRA SOLR	4	PA
Bile Acid Synthesis Disorder Agents			LIALDA TBEC (<i>Use mesalamine</i>)	NF	
CHOLBAM	4	PA	<i>mesalamine CP24</i>	1B	
Gallstone Solubilizing Agents			<i>mesalamine CPDR</i>	1B	
URSO FORTE TABS (<i>Use ursodiol</i>)	NF		<i>mesalamine ENEM</i>	3	
<i>ursodiol CAPS</i>	1B	QL(3 EA daily)	<i>mesalamine SUPP</i>	3	
<i>ursodiol TABS</i>	1B		<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
Gastrointestinal Chloride Channel Activators			<i>mesalamine TBEC 1.2 GM</i>	3	
AMITIZA (<i>Use lubiprostone</i>)	NF	QL(2 EA daily)	PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); PA
<i>lubiprostone</i>	1B	QL(2 EA daily)	RENFLEXIS	4	PA
Gastrointestinal Stimulants			SKYRIZI SOCT	4	QL(0.043 ML daily); PA
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B		SKYRIZI SOLN	4	QL(0.36 ML daily); PA
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ML daily)	<i>sulfasalazine TABS</i>	1B	
<i>metoclopramide hcl TABS</i>	1A	QL(6 EA daily)	<i>sulfasalazine TBEC</i>	1B	
REGLAN TABS (<i>Use metoclopramide hcl</i>)	NF	QL(6 EA daily)	TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.072 ML daily); PA
Inflammatory Bowel Agents			TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); PA

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

Drug Name	Drug Tier	Requirements/ Limits
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & citric acid</i>	1B	RX/OTC
UROCIT-K 10 TBCR (Use <i>potassium citrate (alkalinizer)</i>)	NF	
UROCIT-K 15 TBCR (Use <i>potassium citrate (alkalinizer)</i>)	NF	
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
ARGYLE STERILE SALINE 0.9 % (Use <i>sodium chloride (gu irrigant)</i>)	NF	
CURITY STERILE SALINE 0.9 % (Use <i>sodium chloride (gu irrigant)</i>)	NF	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	3	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 EA daily)
AVODART (Use <i>dutasteride</i>)	NF	QL(1 EA daily)
<i>dutasteride</i>	1B	QL(1 EA daily)
<i>dutasteride-tamsulosin hcl</i>	1B	PA
<i>finasteride</i>	1B	5 mg only

Drug Name	Drug Tier	Requirements/ Limits
JALYN (Use dutasteride-tamsulosin hcl)	NF	PA
PROSCAR (Use finasteride)	NF	5 mg only
RAPAFLO (Use silodosin)	NF	
silodosin	1B	
tamsulosin hcl	1B	
UROXATRAL (Use alfuzosin hcl)	NF	QL(1 EA daily)
Urinary Analgesics		
phenazopyridine hcl TABS 100 MG, 200 MG	1B	
PYRIDIUM TABS (Use phenazopyridine hcl)	NF	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
colchicine w/ probenecid	1B	
Gout Agents		
allopurinol 100 MG, 300 MG	1A	
colchicine TABS	1B	QL(1 EA daily)
febuxostat	1B	QL(1 EA daily); PA
ULORIC (Use febuxostat)	NF	QL(1 EA daily); PA
Uricosurics		
probenecid	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
BENEFIX KIT	4	PA
Bradykinin B2 Receptor Antagonists		

Drug Name	Drug Tier	Requirements/ Limits
FIRAZYR SOSY (Use icatibant acetate)	NF	QL(9 ML daily); PA
icatibant acetate SOSY	4	QL(9 ML daily); PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hematorheologic Agents		
pentoxifylline	1B	QL(3 EA daily)
Platelet Aggregation Inhibitors		
AGRYLIN 0.5 MG (Use anagrelide hcl)	NF	
anagrelide hcl	1B	
aspirin-dipyridamole	1B	QL(2 EA daily); PA
BRILINTA 60 MG, 90 MG (Use ticagrelor)	NF	QL(2 EA daily)
cilostazol	1B	
clopidogrel bisulfate 300 MG	1B	
clopidogrel bisulfate 75 MG	1A	QL(1 EA daily)
dipyridamole	1B	
EFFIENT (Use prasugrel hcl)	NF	QL(1 EA daily)
eptifibatide 200 MG/100ML	4	PA
PLAVIX 75 MG (Use clopidogrel bisulfate)	NF	QL(1 EA daily)
prasugrel hcl	1B	QL(1 EA daily)
ticagrelor 60 MG, 90 MG	1B	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		

Drug Name	Drug Tier	Requirements/ Limits
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	RX/OTC
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	PA
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	PA
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	3	QL(1 EA daily); PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	3	QL(1 EA daily); PA
FULPHILA	4	PA
LEUKINE SOLR IJ	4	PA
MIRCERA	4	PA
PROMACTA PACK 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); PA
PROMACTA TABS 12.5 MG, 25 MG, 50 MG, 75 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); 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 SOLN 15 MG/ML, 15 MG/ML</i>	0	AL(Up to 1 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>ferrous sulfate TABS</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	3	PA
CYKLOKAPRON SOLN (<i>Use tranexamic acid</i>)	NF	
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	3	QL(1 EA daily); PA
SILENOR (<i>Use doxepin hcl (sleep)</i>)	NF	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily)
AMBIEN TABS (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old)
<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
HALCION 0.25 MG (<i>Use triazolam</i>)	NF	
LUNESTA (<i>Use eszopiclone</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RESTORIL (Use temazepam)	NF	QL(1 EA daily)	peg 3350-potassium chloride-sod bicarbonate-sod chloride	1B	PA
temazepam 15 MG, 30 MG	1A	QL(1 EA daily)	sodium sulfate-potassium sulfate-magnesium sulfate	1B	
temazepam 7.5 MG, 22.5 MG	1B	QL(1 EA daily)	SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)	NF	
triazolam	1B		Laxatives - Miscellaneous		
zaleplon 5 MG	1B	QL(1 EA daily); AL(At least 18 yrs old)	lactulose SOLN	1B	
zaleplon 10 MG	1B	QL(2 EA daily); AL(At least 18 yrs old)	Stimulant Laxatives		
zolpidem tartrate TABS	1A	QL(1 EA daily); AL(At least 18 yrs old)	bisacodyl SUPP	1A	
zolpidem tartrate TBCR	1B	QL(1 EA daily)	bisacodyl TBEC	1A	
Selective Melatonin Receptor Agonists			DULCOLAX TBEC (Use bisacodyl)	NF	
ramelteon	1B	QL(1 EA daily); AL(At least 18 yrs old)	Surfactant Laxatives		
ROZEREM (Use ramelteon)	NF	QL(1 EA daily); AL(At least 18 yrs old)	docusate calcium	1A	QL(1 EA daily)
LAXATIVES - Bowel Treatment Drugs			docusate sodium CAPS 100 MG	1A	QL(4 EA daily)
Bulk Laxatives			docusate sodium CAPS 250 MG	1A	
calcium polycarbophil TABS	1B		MACROLIDES - Drugs to Treat Bacterial Infections		
Laxative Combinations			Azithromycin		
GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	NF		azithromycin PACK	1B	
MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	NF		azithromycin SUSR	1B	
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	1B		azithromycin TABS 250 MG	1B	QL(6 EA per fill retail; 6 per fill mail)
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM	0		azithromycin TABS 600 MG	1B	QL(0.286 EA daily)
			azithromycin TABS 500 MG	1B	QL(4 EA per fill retail; 4 per fill mail)
			ZITHROMAX TRI-PAK TABS (Use azithromycin)	NF	QL(4 EA per fill retail; 4 per fill mail)
			ZITHROMAX Z-PAK TABS (Use azithromycin)	NF	QL(6 EA per fill retail; 6 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZITHROMAX SUSR (<i>Use azithromycin</i>)	NF		DUREX EXTRA SENSITIVE THIN MISC	0	
ZITHROMAX TABS 500 MG (<i>Use azithromycin</i>)	NF	QL(4 EA per fill retail; 4 per fill mail)	DUREX TROPICAL MISC	0	
ZITHROMAX TABS 250 MG (<i>Use azithromycin</i>)	NF	QL(6 EA per fill retail; 6 per fill mail)	FANTASY LUBRICATED/SPERMICI DE MISC	0	
Clarithromycin			FANTASY LUBRICATED MISC	0	
<i>clarithromycin SUSR</i>	1B		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
<i>clarithromycin TABS</i>	1B				
<i>clarithromycin TB24</i>	1B				
Erythromycins			FEMCAP DEVI	0	
E.E.S. GRANULES SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KAMELEON LUBRICATED MISC	0	
ERYPED 200 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KIMONO COLORS DEVI	0	
ERYPED 400 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KIMONO MAXX-LARGE FLARE MISC	0	
<i>erythromycin base CPEP</i>	3		KIMONO MICRO THIN PLUS MISC	0	
<i>erythromycin base TABS</i>	3		KIMONO PLUS MISC	0	
<i>erythromycin base TBEC</i>	1B		KIMONO PS PLUS MISC	0	
<i>erythromycin ethylsuccinate SUSR</i>	1B		KIMONO PS MISC	0	
<i>erythromycin ethylsuccinate TABS</i>	3		KIMONO SENSATION PLUS MISC	0	
Fidaxomicin			KIMONO SENSATION MISC	0	
DIFICID TABS 200 MG (<i>Use fidaxomicin</i>)	NF		KIMONO SPECIAL DEVI	0	
<i>fidaxomicin TABS 200 MG</i>	1B		KIMONO MISC	0	
MEDICAL DEVICES AND SUPPLIES			MAXX PLUS MISC	0	
Contraceptives			MAXX MISC	0	
AIMSCO LUBRICATED MISC	0		OMNIFLEX DIAPHRAGM	0	
CAYA DPRH	0		REALITY LATEX CONDOMS MISC	0	
DUREX EXTRA SENSITIVE THIN DEVI	0		REALITY LATEX/ULTRA TEXTURED DEVI	0	
			REALITY LATEX/ULTRA THIN DEVI	0	
			TROJAN BARESKIN DEVI	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TROJAN MAGNUM MISC	0		WIDE-SEAL DIAPHRAGM 70	0	
TROJAN ULTRA THIN/SPERMICIDAL MISC	0		WIDE-SEAL DIAPHRAGM 75	0	
TROJAN ULTRA THIN MISC	0		WIDE-SEAL DIAPHRAGM 80	0	
TROJAN-ENZ LUBRICATED MISC	0		WIDE-SEAL DIAPHRAGM 85	0	
TROJAN-ENZ/SPERMICIDAL MISC	0		WIDE-SEAL DIAPHRAGM 90	0	
TRUE COVER DEVI	0		WIDE-SEAL DIAPHRAGM 95	0	
TRUSTEX COLOR CONDOMS + LUBE MISC	0		Diabetic Supplies		
TRUSTEX LUB/RIBBED/STUDDERED MISC	0		DEXCOM G6 RECEIVER	3	QL(1 EA per 365 day(s) retail); PA
TRUSTEX LUB/SPERMICIDE EX ST MISC	0		DEXCOM G6 SENSOR	3	QL(0.107 EA daily); PA
TRUSTEX LUB/SPERMICIDE XL MISC	0		DEXCOM G6 TRANSMITTER	3	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA
TRUSTEX LUBRICATED EX LARGE MISC	0		DEXCOM G7 15 DAY SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX LUBRICATED EXTRA ST MISC	0		DEXCOM G7 RECEIVER	3	QL(1 EA per 365 day(s) retail); PA
TRUSTEX LUBRICATED/SPERMICIDE MISC	0		DEXCOM G7 SENSOR	3	QL(0.107 EA daily); PA
TRUSTEX LUBRICATED MISC	0		FREESTYLE LIBRE 14 DAY READER	3	QL(1 EA per 365 day(s) retail); PA
TRUSTEX NATURAL CONDOMS + LUBE MISC	0		FREESTYLE LIBRE 14 DAY SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX RIA LUB/SPERMICIDE MISC	0		FREESTYLE LIBRE 2 PLUS SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX RIA LUBRICATED MISC	0		FREESTYLE LIBRE 2 READER	3	QL(1 EA per 365 day(s) retail); PA
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	0		FREESTYLE LIBRE 2 SENSOR	3	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 60	0		FREESTYLE LIBRE 3 PLUS SENSOR	3	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 65	0				

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Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LIBRE 3 READER	3	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 3 SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE READER	3	QL(1 EA per 365 day(s) retail); PA
ONETOUCH DELICA SAFETY LANCING	1B	QL(6.6667 EA daily); RX/OTC
RELION LANCET DEVICES 30G	1B	QL(6.6667 EA daily); RX/OTC
RELION LANCETS	1B	QL(6.6667 EA daily); RX/OTC
TRUE METRIX LEVEL 3 SOLN	1B	
Parenteral Therapy Supplies		
BD PEN NEEDLE NANO 2ND GEN	1B	QL(5 EA daily); RX/OTC
EMBECTA AUTOSHIELD DUO	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	1B	QL(5 EA daily)
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ML daily); PA
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); PA
EMGALITY SOAJ	2	QL(0.07 ML daily); PA
EMGALITY SOSY	2	QL(0.07 ML daily); PA
UBRELVY	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST

Drug Name	Drug Tier	Requirements/ Limits
Migraine Combinations		
CAFERGOT TABS (<i>Use ergotamine w/ caffeine</i>)	NF	QL(1.5 EA daily)
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 EA daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
TREXIMET (<i>Use sumatriptan-naproxen sodium</i>)	NF	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ML daily)
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
ERGOMAR SUBL	3	QL(0.667 EA daily)
MIGRANAL SOLN NA (<i>Use dihydroergotamine mesylate</i>)	NF	QL(0.267 ML daily)
Serotonin Agonists		
<i>almotriptan malate 12.5 MG</i>	3	QL(0.4 EA daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 6.25 MG</i>	3	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old); ST
FROVA (<i>Use frovatriptan succinate</i>)	NF	QL(0.4 EA daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 EA daily); AL(At least 18 yrs old); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)	<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	2	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)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>Use sumatriptan succinate</i>)	NF	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)
IMITREX TABS (<i>Use sumatriptan succinate</i>)	NF	QL(0.3 EA daily); AL(At least 18 yrs old)	<i>sumatriptan succinate TABS</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
MAXALT-MLT TBDP 10 MG (<i>Use rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>zolmitriptan SOLN</i>	1B	QL(0.2 EA daily); AL(At least 12 yrs old); ST
MAXALT TABS 10 MG (<i>Use rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>zolmitriptan TABS</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)	<i>zolmitriptan TBDP</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
RELPAK (<i>Use eletriptan hydrobromide</i>)	NF	QL(0.2 EA daily); AL(At least 18 yrs old); ST	ZOMIG SOLN (<i>Use zolmitriptan</i>)	NF	QL(0.2 EA daily); AL(At least 12 yrs old); ST
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)	MINERALS & ELECTROLYTES		
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)	Bicarbonates		
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)	<i>sodium acetate SOLN</i>	1B	
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)	SODIUM ACETATE SOLN (<i>Use sodium acetate</i>)	1B	
<i>sumatriptan</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old)	Calcium		
			<i>calcium chloride (dihydrate) SOLN</i>	1B	
			CALCIUM CHLORIDE SOLN 10 % (<i>Use calcium chloride (dihydrate)</i>)	NF	
			Electrolyte Mixtures		
			<i>electrolyte-148</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<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 % (Use potassium chloride in dextrose & sodium chloride)	1B	
KCL IN DEXTROSE-NACL (Use potassium chloride in dextrose & sodium chloride)	NF	
KCL-LACTATED RINGERS-D5W	1B	
NORMOSOL-M IN D5W	1B	
NORMOSOL-R PH 7.4	1B	
PLASMA-LYTE 148	1B	
PLASMA-LYTE A (Use electrolyte-a)	1B	
potassium chloride in dextrose 20 MEQ/L	1B	
potassium chloride in dextrose & sodium chloride 5 %-10 MEQ/L-0.45 %, 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 %	1B	
POTASSIUM CL IN DEXTROSE 5% 20 MEQ/L (Use potassium chloride in dextrose)	NF	
ringer's	1B	
Fluoride		
sodium fluoride CHEW	0	QL(1 EA daily)
Phosphate		
potassium phosphates 45 MMOLE/15ML	1B	

Drug Name	Drug Tier	Requirements/ Limits
POTASSIUM PHOSPHATES(66 MEQ K) (Use potassium phosphates)	NF	
Potassium		
KLOR-CON 10 TBCR 10 MEQ (Use potassium chloride)	NF	
KLOR-CON TBCR 8 MEQ (Use potassium chloride)	NF	
K-TAB TBCR 20 MEQ (Use potassium chloride)	NF	
potassium acetate SOLN 2 MEQ/ML	1B	
POTASSIUM ACETATE SOLN (Use potassium acetate)	NF	
potassium bicarbonate TBEF	1B	
potassium chloride microencapsulated crystals er	1B	
potassium chloride CPCR	1B	
potassium chloride PACK PO 20 MEQ	1B	PA
potassium chloride SOLN PO 10 %, 10 %	1B	
POTASSIUM CHLORIDE SOLN IV (Use potassium chloride)	NF	
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (Use potassium chloride)	1B	
potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ	1B	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
DEPEN TITRATABS TABS (Use penicillamine)	NF	QL(8 EA daily)
penicillamine TABS	1B	QL(8 EA daily)
SYPRINE (Use trientine hcl)	NF	QL(8 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); PA	NEORAL SOLN (<i>Use cyclosporine modified (for microemulsion)</i>)	NF	
Immunomodulators			PROGRAF CAPS (<i>Use tacrolimus</i>)	NF	
<i>lenalidomide</i>	4	QL(1 EA daily); PA	PROGRAF SOLN 5 MG/ML (<i>Use tacrolimus</i>)	2	
REVLIMID (<i>Use lenalidomide</i>)	NF	QL(1 EA daily); PA	RAPAMUNE TABS (<i>Use sirolimus</i>)	NF	
THALOMID 50 MG, 100 MG, 200 MG	4	QL(3 EA daily); PA	SANDIMMUNE CAPS (<i>Use cyclosporine</i>)	NF	
Immunosuppressive Agents			SIMULECT	3	
ATGAM	4	PA	<i>sirolimus TABS</i>	1B	
AZATHIOPRINE SODIUM	1B		<i>tacrolimus CAPS</i>	1B	
<i>azathioprine TABS</i>	1B		<i>tacrolimus SOLN 5 MG/ML</i>	1B	
CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NF		THYMOGLOBULIN	4	PA
CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NF		ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(20 EA daily); PA
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B		ZORTRESS 1 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(10 EA daily); PA
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B		Irrigation Solutions		
<i>cyclosporine CAPS</i>	1B		ARGYLE STERILE WATER (<i>Use water for irrigation, sterile</i>)	NF	
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA	<i>irrigation solutions, physiological</i>	1B	
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); PA	<i>lactated ringer's (irrigation)</i>	1B	
IMURAN TABS (<i>Use azathioprine</i>)	NF		<i>ringer's irrigation</i>	1B	
<i>mycophenolate mofetil CAPS</i>	1B		<i>water for irrigation, sterile</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B		Potassium Removing Agents		
<i>mycophenolate sodium</i>	1B		LOKELMA	3	QL(1 EA daily); PA
MYFORTIC (<i>Use mycophenolate sodium</i>)	NF		<i>sodium polystyrene sulfonate POWD</i>	1B	
NEORAL CAPS (<i>Use cyclosporine modified (for microemulsion)</i>)	NF				

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ML daily)
Anti-infectives - Throat		
<i>clotrimazole</i>	1B	
NYSTATIN (Use <i>nystatin (mouth-throat)</i>)	NF	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
PERIDEX (Use <i>chlorhexidine gluconate (mouth-throat)</i>)	NF	
Dental Products		
FLUORIDEX DAILY RENEWAL CONC 0.63 %	0	RX/OTC
PERIOMED CONC 0.63 %	0	RX/OTC
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
EVOXAC (Use <i>cevimeline hcl</i>)	NF	
<i>pilocarpine hcl (oral)</i>	1B	
SALAGEN (Use <i>pilocarpine hcl (oral)</i>)	NF	
MULTIVITAMINS		
Ped MV w/ Fluoride		

Drug Name	Drug Tier	Requirements/ Limits
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen TABS</i>	1B	
<i>carisoprodol TABS</i>	1B	
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 EA daily)
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 EA daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 EA daily)
<i>metaxalone 800 MG</i>	3	QL(4 EA daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
<i>orphenadrine citrate TB12</i>	1B	QL(2 EA daily)
SOMA TABS (Use <i>carisoprodol</i>)	NF	
<i>tizanidine hcl CAPS</i>	1B	
<i>tizanidine hcl TABS</i>	1B	
ZANAFLEX CAPS (Use <i>tizanidine hcl</i>)	NF	
ZANAFLEX TABS 4 MG (Use <i>tizanidine hcl</i>)	NF	
Direct Muscle Relaxants		
DANTRIUM CAPS 25 MG (Use <i>dantrolene sodium</i>)	NF	QL(4 EA daily)
<i>dantrolene sodium CAPS</i>	1B	QL(4 EA daily)
Muscle Relaxant Combinations		
<i>orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG</i>	1B	PA
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	
<i>olopatadine hcl (nasal)</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
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; 1 package(s) per fill mail
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 ML 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	
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</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	

Drug Name	Drug Tier	Requirements/ Limits
COMBIGAN <i>(Use brimonidine tartrate-timolol maleate)</i>	NF	
COSOPT <i>(Use dorzolamide hcl-timolol maleate)</i>	NF	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
MYDRIACYL SOLN <i>(Use tropicamide)</i>	NF	
<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>besifloxacin hcl 0.6 %</i>	1B	PA
BESIVANCE 0.6 % <i>(Use besifloxacin hcl)</i>	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B	
<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NATACYN	2		LOTEMAX OINT	3	PA
neomycin-bacitracin zn-polymyxin	1B		LOTEMAX SUSP (Use loteprednol etabonate)	NF	PA
OCUFLOX (Use ofloxacin (ophth))	NF		loteprednol etabonate GEL	1B	PA
ofloxacin (ophth)	1B		loteprednol etabonate SUSP	1B	PA
polymyxin b-trimethoprim	1B		loteprednol etabonate-tobramycin	1B	PA
sulfacetamide sodium (ophth) SOLN	1B		MAXIDEX SUSP OP	3	PA
tobramycin (ophth) SOLN	1B		MAXITROL OINT (Use neomycin-polymy-dexameth)	NF	
trifluridine	1B		MAXITROL SUSP (Use neomycin-polymy-dexameth)	NF	
VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	NF		neomycin-polymy-dexameth OINT	1B	
ZIRGAN GEL	2		neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	1B	
Ophthalmic Immunomodulators			neomycin-polymyxin-hc (ophth)	1B	QL(2.5 ML daily)
cyclosporine (ophth) EMUL	3	PA	PRED FORTE (Use prednisolone acetate (ophth))	NF	
RESTASIS EMUL (Use cyclosporine (ophth))	NF	PA	PRED MILD	3	PA
Ophthalmic Local Anesthetics			prednisolone acetate (ophth)	1B	
ALCAINE (Use proparacaine hcl)	NF		sulfacetamide sod-prednisolone SOLN	3	PA
proparacaine hcl	1B		tobramycin-dexamethasone SUSP	1B	
Ophthalmic Steroids			ZYLET 0.3 %-0.5 % (Use loteprednol etabonate-tobramycin)	3	PA
ALREX SUSP (Use loteprednol etabonate)	NF	PA	Ophthalmic Surgical Aids		
dexamethasone sodium phosphate (ophth)	1B	QL(0.4 ML daily)	HEALON PRO SOSY	3	PA
difluprednate	1B	PA	PROVISC SOSY	3	PA
DUREZOL (Use difluprednate)	NF	PA	Ophthalmics - Misc.		
fluorometholone (ophth) SUSP	1B				
FML FORTE SUSP	3	PA			
FML LIQUIFILM SUSP (Use fluorometholone (ophth))	NF				
LOTEMAX GEL (Use loteprednol etabonate)	NF	PA			

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Drug Name	Drug Tier	Requirements/ Limits
ACULAR (Use ketorolac tromethamine (ophth))	NF	
ACULAR LS (Use ketorolac tromethamine (ophth))	NF	
ALOCRIIL	3	PA
ALOMIDE	3	PA
azelastine hcl (ophth)	1B	
AZOPT (Use brinzolamide)	NF	
bepotastine besilate	3	PA
BEPREVE (Use bepotastine besilate)	NF	PA
brinzolamide	1B	
bromfenac sodium (ophth)	1B	
BROMSITE (Use bromfenac sodium (ophth))	NF	
cromolyn sodium (ophth)	1B	
CYSTARAN	2	QL(2.143 ML daily); PA
diclofenac sodium (ophth)	1B	
dorzolamide hcl	1B	
epinastine hcl (ophth)	1B	
flurbiprofen sodium	1B	
ketorolac tromethamine (ophth)	1B	
ketotifen fumarate (ophth) 0.035 %	1B	
olopatadine hcl 0.2 %	1B	RX/OTC
olopatadine hcl 0.1 %	1B	QL(0.34 ML daily)
PROLENSA (Use bromfenac sodium (ophth))	NF	
ZERVIAE	3	QL(2 EA daily); PA
Prostaglandins - Ophthalmic		
bimatoprost SOLN	1B	
latanoprost SOLN	1B	
tafluprost	1B	

Drug Name	Drug Tier	Requirements/ Limits
TRAVATAN Z SOLN (Use travoprost)	NF	
travoprost SOLN	1B	
XALATAN SOLN (Use latanoprost)	NF	
ZIOPTAN (Use tafluprost)	NF	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
acetic acid (otic)	1B	QL(0.5 ML daily)
Otic Anti-infectives		
CETRAXAL (Use ciprofloxacin hcl (otic))	NF	
ciprofloxacin hcl (otic)	1B	
ofloxacin (otic)	1B	
Otic Combinations		
ciprofloxacin-dexamethasone	1B	
ciprofloxacin-fluocinolone acetonide	1B	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
neomycin-polymyxin-hc (otic) SOLN	1B	QL(2 ML daily)
neomycin-polymyxin-hc (otic) SUSP	1B	
OTOVEL (Use ciprofloxacin-fluocinolone acetonide)	NF	
Otic Steroids		
DERMOTIC (Use fluocinolone acetonide (otic))	NF	
fluocinolone acetonide (otic)	1B	
hydrocortisone w/acetic acid	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		

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Drug Name	Drug Tier	Requirements/ Limits
Immune Serums		
GAMUNEX-C	4	PA
Monoclonal Antibodies		
BEYFORTUS	0	
ENFLONISIA SOSY IM 105 MG/0.7ML	0	
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IJ 1 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
<i>penicillin g potassium 5000000 UNIT</i>	1B	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW 57 MG-400 MG</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin & pot clavulanate TB12</i>	1B	
AUGMENTIN ES-600 SUSR (Use <i>amoxicillin & pot clavulanate</i>)	NF	
AUGMENTIN TABS 125 MG-500 MG (Use <i>amoxicillin & pot clavulanate</i>)	NF	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>naftillin sodium IJ 1 GM</i>	1B	
<i>oxacillin sodium IJ 1 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	
PROMETRIUM CAPS (Use <i>progesterone</i>)	NF	
PROVERA 5 MG, 10 MG (Use <i>medroxyprogesterone acetate</i>)	NF	
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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lofexidine hcl</i>	1B	QL(224 EA per 14 day(s) retail; 224 EA per 14 days mail); PA	<i>milnacipran hcl MISC</i>	1B	1 max fill(s) per 365 day(s) retail; PA
LUCEMYRA (Use <i>lofexidine hcl</i>)	NF	QL(224 EA per 14 day(s) retail; 224 EA per 14 days mail); PA	<i>milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG</i>	1B	QL(2 EA daily); PA
Antidementia Agents			SAVELLA TITRATION PACK MISC (Use <i>milnacipran hcl</i>)	NF	1 max fill(s) per 365 day(s) retail; PA
ARICEPT TABS 5 MG, 23 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(1 EA daily)	SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use <i>milnacipran hcl</i>)	NF	QL(2 EA daily); PA
ARICEPT TABS 10 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(2 EA daily)	Movement Disorder Drug Therapy		
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 EA daily)	<i>tetrabenazine</i>	4	QL(3 EA daily); PA
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 EA daily)	XENAZINE (Use <i>tetrabenazine</i>)	NF	QL(3 EA daily); PA
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 EA daily)	Multiple Sclerosis Agents		
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 EA daily)	AMPYRA (Use <i>dalfampridine</i>)	NF	QL(2 EA daily); PA
<i>galantamine hydrobromide CP24</i>	1B	QL(1 EA daily)	AUBAGIO (Use <i>teriflunomide</i>)	NF	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ML daily)	AVONEX PEN AJKT	4	QL(0.0714 EA daily); PA
<i>galantamine hydrobromide TABS</i>	1B	QL(2 EA daily)	AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); PA
KISUNLA	4	PA	BETASERON KIT	4	QL(0.5 EA daily); PA
<i>memantine hcl TABS</i>	1B		COPAXONE SOSY 40 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(0.43 ML daily)
<i>memantine hcl TABS</i>	1B	QL(2 EA daily)	COPAXONE SOSY 20 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(1 ML daily)
NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i>)	NF		<i>dalfampridine</i>	4	QL(2 EA daily); PA
<i>rivastigmine tartrate CAPS</i>	1B		<i>dimethyl fumarate CDPK</i>	1B	QL(2 EA daily)
Combination Psychotherapeutics			<i>dimethyl fumarate CPDR</i>	1B	QL(2 EA daily)
<i>chlordiazepoxide-amitriptyline</i>	1B		<i> fingolimod hcl</i>	3	QL(1 EA daily)
<i>perphenazine-amitriptyline</i>	1B	QL(4 EA daily)	GILENYA (Use <i> fingolimod hcl</i>)	NF	QL(1 EA daily)
Fibromyalgia Agents			<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily)
LEMTRADA	4	QL(1.2 ML daily); PA
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); PA
PLEGRIDY SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY SOSY IM	4	QL(0.036 ML daily); PA
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); PA
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; PA
REBIF SOSY	4	QL(0.214 ML daily); PA
TECFIDERA CDPK (<i>Use dimethyl fumarate</i>)	NF	QL(2 EA daily)
TECFIDERA CPDR (<i>Use dimethyl fumarate</i>)	NF	QL(2 EA daily)
<i>teriflunomide</i>	3	QL(1 EA daily)
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 EA daily)
CHANTIX CONTINUING MONTH PAK TABS (<i>Use varenicline tartrate</i>)	NF	QL(2 EA daily)
CHANTIX STARTING MONTH PAK TBPK (<i>Use varenicline tartrate</i>)	NF	
CHANTIX TABS (<i>Use varenicline tartrate</i>)	NF	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
NICORETTE MINI LOZG 4 MG (<i>Use nicotine polacrilex</i>)	NF	
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	
NICOTINE KIT	0	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 EA daily)
NICOTROL NS SOLN	0	
NICOTROL INHA	0	
<i>varenicline tartrate TABS</i>	0	QL(2 EA daily)
<i>varenicline tartrate TBPK</i>	0	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); PA
PULMOZYME	4	QL(2.5 ML daily); PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS (<i>Use pirfenidone</i>)	NF	QL(1 EA daily); PA
ESBRIET TABS (<i>Use pirfenidone</i>)	NF	QL(1 EA daily); PA
<i>nintedanib esylate 100 MG, 150 MG</i>	4	QL(2 EA daily); PA
OFEV 100 MG, 150 MG (<i>Use nintedanib esylate</i>)	NF	QL(2 EA daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 EA daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); PA
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 EA daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial		

Drug Name	Drug Tier	Requirements/ Limits
Infections		
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline hyclate CAPS</i>	1B	QL(2 EA daily)
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 EA daily)
<i>minocycline hcl TABS</i>	1B	QL(3 EA daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 EA daily)
<i>VIBRAMYCIN CAPS (Use doxycycline hyclate)</i>	NF	QL(2 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
<i>ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG</i>	2	
<i>AMERITHROID TABS 180 MG, 240 MG, 300 MG</i>	2	QL(1 EA daily)
<i>ARMOUR THYROID TABS</i>	2	QL(1 EA daily)
<i>CYTOMEL TABS (Use liothyronine sodium)</i>	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>EVEXITHROID TABS 180 MG</i>	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1A	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
<i>NP THYROID TABS</i>	1B	QL(1 EA daily)
<i>SYNTHROID TABS (Use levothyroxine sodium)</i>	2	
TOXOIDS		
Toxoid Combinations		
<i>ADACEL SUSP</i>	0	
<i>ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML</i>	0	
<i>BOOSTRIX SUSP</i>	0	
<i>BOOSTRIX SUSY</i>	0	
<i>DAPTACEL</i>	0	
<i>INFANRIX</i>	0	
<i>KINRIX SUSY</i>	0	
<i>PEDIARIX SUSY</i>	0	
<i>PENTACEL</i>	0	
<i>QUADRACEL SUSP</i>	0	
<i>QUADRACEL SUSY</i>	0	
<i>TDVAX SUSP</i>	0	
<i>TENIVAC SUSP 2 LFU-5 LFU</i>	0	
<i>TETANUS-DIPHTHERIA TOXOIDS TD SUSP</i>	0	
<i>VAXELIS SUSP</i>	0	
<i>VAXELIS SUSY</i>	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>BENTYL SOLN IM (Use dicyclomine hcl)</i>	NF	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dicyclomine hcl CAPS</i>	1B		DEXILANT (Use dextansoprazole)	NF	QL(1 EA daily)
<i>dicyclomine hcl SOLN PO</i>	1B		<i>dextansoprazole</i>	3	QL(1 EA daily)
<i>dicyclomine hcl TABS</i>	1B		<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1B		<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 EA daily)	<i>esomeprazole magnesium TBEC</i>	1B	QL(2 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1B		<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 EA daily); RX/OTC
LIBRAX (Use chlordiazepoxide hcl-clidinium bromide)	NF		<i>lansoprazole CPDR 30 MG</i>	1B	
<i>methscopolamine bromide</i>	1B		NEXIUM 24HR CPDR (Use esomeprazole magnesium)	1B	QL(2 EA daily); RX/OTC
ROBINUL-FORTE TABS (Use glycopyrrolate)	NF	QL(6 EA daily)	NEXIUM 24HR TBEC 20 MG	1B	QL(2 EA daily)
ROBINUL TABS (Use glycopyrrolate)	NF		NEXIUM CPDR 20 MG (Use esomeprazole magnesium)	NF	RX/OTC
H-2 Antagonists			NEXIUM CPDR 40 MG (Use esomeprazole magnesium)	NF	QL(1 EA daily)
<i>cimetidine TABS</i>	1B	RX/OTC	<i>omeprazole magnesium CPDR</i>	1B	QL(4 EA daily)
<i>famotidine in nacl SOLN</i>	1B		<i>omeprazole CPDR</i>	1B	QL(2 EA daily)
<i>famotidine SUSR</i>	1B	QL(10 ML daily)	<i>omeprazole TBEC</i>	1B	QL(2 EA daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC	<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>nizatidine CAPS</i>	1B		<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 EA daily)
PEPCID TABS (Use famotidine)	NF	RX/OTC	PREVACID 24HR CPDR (Use lansoprazole)	NF	QL(2 EA daily); RX/OTC
<i>ranitidine hcl TABS 150 MG, 300 MG</i>	1B		PREVACID CPDR 30 MG (Use lansoprazole)	NF	
Misc. Anti-Ulcer			PROTONIX TBEC 20 MG (Use pantoprazole sodium)	NF	QL(1 EA daily)
CARAFATE SUSP (Use sucralfate)	NF	QL(40 ML daily)	PROTONIX TBEC 40 MG (Use pantoprazole sodium)	NF	
CARAFATE TABS (Use sucralfate)	NF	QL(4 EA daily)	<i>rabeprazole sodium TBEC</i>	1B	QL(1 EA daily)
<i>sucralfate SUSP</i>	1B	QL(40 ML daily)			
<i>sucralfate TABS</i>	1B	QL(4 EA daily)			
Proton Pump Inhibitors					
ACIPHEX TBEC (Use rabeprazole sodium)	NF	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
Ulcer Drugs - Prostaglandins		
CYTOTEC (Use misoprostol)	NF	QL(4 EA daily)
misoprostol	1B	QL(4 EA daily)
Ulcer Therapy Combinations		
amoxicillin-clarithromycin w/ lansoprazole THPK	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
bismuth subcitrate potassium-metronidazole-tetracycline	3	QL(120 EA per 10 day(s) retail; 120 EA per 10 days mail); PA
omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	1B	QL(1 EA daily); RX/OTC
PYLERA (Use bismuth subcitrate potassium-metronidazole-tetracycline)	NF	QL(120 EA per 10 day(s) retail; 120 EA per 10 days mail); PA
ZEGERID CAPS 1100 MG-40 MG (Use omeprazole-sodium bicarbonate)	NF	
ZEGERID CAPS 1100 MG-20 MG (Use omeprazole-sodium bicarbonate)	NF	QL(1 EA daily); RX/OTC
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
darifenacin hydrobromide	1B	QL(1 EA daily)
DETROL LA CP24 (Use tolterodine tartrate)	NF	QL(1 EA daily)
DETROL TABS (Use tolterodine tartrate)	NF	
fesoterodine fumarate	1B	QL(1 EA daily)
oxybutynin chloride SOLN	1B	

Drug Name	Drug Tier	Requirements/ Limits
oxybutynin chloride TABS 5 MG	1B	
oxybutynin chloride TB24	1B	
solifenacin succinate TABS	1B	QL(1 EA daily)
tolterodine tartrate CP24	1B	QL(1 EA daily)
tolterodine tartrate TABS	1B	
TOVIAZ (Use fesoterodine fumarate)	NF	QL(1 EA daily)
tropium chloride CP24	1B	QL(1 EA daily)
tropium chloride TABS	1B	QL(3 EA daily)
VESICARE TABS (Use solifenacin succinate)	NF	QL(1 EA daily)
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
mirabegron TB24	3	PA
MYRBETRIQ TB24 (Use mirabegron)	NF	PA
Urinary Antispasmodics - Cholinergic Agonists		
bethanechol chloride 25 MG	1B	
bethanechol chloride 5 MG, 10 MG, 50 MG	1B	QL(4 EA daily)
Urinary Antispasmodics - Direct Muscle Relaxants		
flavoxate hcl	1B	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	0	
BEXSERO 0.5 ML	0	
CAPVAXIVE	0	
HIBERIX SOLR IJ	0	
MENQUADFI 0.5 ML	0	
MENVEO SOLN	0	
MENVEO SOLR	0	
PEDVAXHIB SUSP 7.5 MCG/0.5ML	0	
PENBRAYA	0	

Drug Name	Drug Tier	Requirements/ Limits
PENMENVY SUSR IM	0	AL(At least 10 yrs old - Up to 25 yrs old)
PNEUMOVAX 23 SOLN	0	
PNEUMOVAX 23 SOSY	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 SUSY 0.5 ML	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AREXVY	0	
AUDENZ EMUL	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AUDENZ PRSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
COMIRNATY SUSP	0	
COMIRNATY SUSY	0	

Drug Name	Drug Tier	Requirements/ Limits
ENGRIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
ENGRIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
FLUAD	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT SUSY	0	Limit 1 dose per season; 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
FLUBLOK SOSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLULAVAL SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	JYNNEOS	0	
FLUMIST	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MFLUSIVA SUSY IM 0.38 ML	0	1 max fill(s) per 180 day(s) retail
FLUZONE HIGH-DOSE QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail
FLUZONE HIGH-DOSE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MNEXSPIKE SUSY 10 MCG/0.2ML	0	
FLUZONE QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VAC 6M-11Y SUSY	0	
FLUZONE SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	MRESVIA	0	
FLUZONE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSY	0	
GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 365 day(s) retail	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0	
GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 365 day(s) retail	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0	
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0		PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail	PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
IPOL IJ	0		PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
			PROQUAD SUSR	0	2 max fill(s) per 365 day(s) retail
			RECOMBIVAX HB SUSP	0	
			RECOMBIVAX HB SUSY	0	
			ROTARIX SUSP	0	
			ROTATEQ SOLN	0	
			SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
			SHINGRIX IM 50 MCG/0.5ML	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
SPIKEVAX SUSP	0	
SPIKEVAX SUSY	0	
TWINRIX SUSY	0	
VAQTA	0	
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	
VARIVAX SUSR	0	2 max fill(s) per 365 day(s) retail
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	0	
VCF VAGINAL CONTRACEPTIVE FILM	0	
Vaginal Anti-infectives		
CLEOCIN CREA (<i>Use clindamycin phosphate vaginal</i>)	NF	
<i>clindamycin phosphate vaginal CREA</i>	1B	
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		
PHEXX	0	
PHEXXI	0	

Drug Name	Drug Tier	Requirements/ Limits
Vaginal Estrogens		
ESTRACE CREA (<i>Use estradiol vaginal</i>)	NF	QL(2 GM daily)
<i>estradiol vaginal CREA</i>	1B	QL(2 GM daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING 7.5 MCG/24HR	3	
FEMRING	3	
PREMARIN	2	QL(1.5 GM daily)
VAGIFEM TABS (<i>Use estradiol vaginal</i>)	NF	
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
EPIPEN 2-PAK SOAJ (<i>Use epinephrine (anaphylaxis)</i>)	NF	
EPIPEN JR 2-PAK SOAJ (<i>Use epinephrine (anaphylaxis)</i>)	NF	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	
DRISDOL CAPS (<i>Use ergocalciferol</i>)	NF	

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		
<i>ascorbic acid SOLN IJ</i>	3	QL (0.4 ML daily)
NIACIN ER TBCR	1B	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacin CPCR 250 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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amoxicillin & pot clavulanate SUSR	sodium) 5	150 MCG/0.3ML, 200 MCG/0.4ML,
76	anastrozole 35	300 MCG/0.6ML, 500 MCG/ML 64
amoxicillin & pot clavulanate TABS	ANCOBON (Use flucytosine) 25	ARAVA (Use leflunomide) 6
76	ANGELIQ 59	AREXVY 82
amoxicillin & pot clavulanate TB12 76	ANNOVERA 47	arformoterol tartrate 13
amoxicillin CAPS 76	ANORO ELLIPTA 25 MCG/ACT-62.5	ARGYLE STERILE SALINE 0.9 %
amoxicillin CHEW 125 MG, 250 MG .	MCG/ACT (Use umeclidinium-	(Use sodium chloride (gu irrigant)) 62
76	vilanterol) 13	ARGYLE STERILE WATER (Use
amoxicillin SUSR 125 MG/5ML 76	ANTIVERT TABS 50 MG (Use	water for irrigation, sterile) 71
amoxicillin SUSR 200 MG/5ML, 250	meclizine hcl) 24	ARICEPT TABS 10 MG (Use
MG/5ML, 400 MG/5ML 76	ANUCORT-HC 25 MG (Use	donepezil hydrochloride) 77
amoxicillin TABS 76	hydrocortisone acetate (rectal)) 10	ARICEPT TABS 5 MG, 23 MG (Use
amoxicillin-clarithromycin w/	ANUSOL-HC 25 MG (Use	donepezil hydrochloride) 77
lansoprazole THPK 81	hydrocortisone acetate (rectal)) 10	ARIKAYCE 3
amphetamine sulfate TABS 1	ANUSOL-HC EX (Use	ARIMIDEX (Use anastrozole) 35
amphetamine-dextroamphetamine	hydrocortisone (rectal)) 10	aripiprazole SOLN PO 39
CP24 15 MG 1	ANZEMET TABS 50 MG 24	aripiprazole TABS 39

ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)	14	aspirin TBEC 81 MG	6	AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate) 76	
ARIXTRA 2.5 MG/0.5ML (Use fondaparinux sodium)	14	aspirin-dipyridamole	63	AURANOFIN 3 MG	5
ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)	14	ATACAND (Use candesartan cilexetil)	28	AVALIDE (Use irbesartan-hydrochlorothiazide)	29
ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)	14	ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)	29	avanafil	44
armodafinil	2	atazanavir sulfate CAPS 150 MG, 300 MG	39	AVAPRO 150 MG, 300 MG (Use irbesartan)	28
ARMOUR THYROID TABS	79	atazanavir sulfate CAPS 200 MG	39	AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur) 49	
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (Use fluticasone furoate (inhalation))	12	ATELVIA TBEC (Use risedronate sodium)	58	AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	49
AROMASIN (Use exemestane) ...	35	atenolol & chlorthalidone	29	AVERI TABS PO	46
ARRANON (Use nelarabine)	34	atenolol TABS	42	AVODART (Use dutasteride)	62
arsenic trioxide 10 MG/10ML	36	ATGAM	71	AVONEX PEN AJKT	77
ARTHROTEC TBEC (Use diclofenac w/ misoprostol)	5	ATIVAN TABS 0.5 MG, 2 MG (Use lorazepam)	11	AVONEX PREFILLED PSKT	77
ARZERRA	34	ATIVAN TABS 1 MG (Use lorazepam)	11	azacitidine SUSR	34
ascorbic acid SOLN IJ	85	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG	1	AZACTAM (Use aztreonam)	31
asenapine maleate 2.5 MG	38	atomoxetine hcl 60 MG, 80 MG, 100 MG	1	AZATHIOPRINE SODIUM	71
asenapine maleate 5 MG, 10 MG .	38	atorvastatin calcium TABS	27	azathioprine TABS	71
ASMANEX (120 METERED DOSES) AEPB	12	atovaquone	31	azelaic acid GEL	56
ASMANEX (14 METERED DOSES) AEPB	12	atovaquone-proguanil hcl	32	azelastine hcl (ophth)	75
ASMANEX (30 METERED DOSES) AEPB	12	atracurium besylate 50 MG/5ML, 100 MG/10ML	73	azelastine hcl	72
ASMANEX (60 METERED DOSES) AEPB	12	ATROVENT HFA 17 MCG/ACT (Use ipratropium bromide hfa)	12	AZILECT (Use rasagiline mesylate) .	37
ASMANEX HFA AERO	12	AUBAGIO (Use teriflunomide)	77	azilsartan medoxomil 40 MG, 80 MG	28
aspirin CHEW	6	AUDENZ EMUL	82	azithromycin PACK	65
aspirin TABS 325 MG	6	AUDENZ PRSY	82	azithromycin SUSR	65
aspirin TBEC 325 MG	6	AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)	76	azithromycin TABS 250 MG	65
				azithromycin TABS 500 MG	65

azithromycin TABS 600 MG 65	12.5 MG-20 MG, 6.25 MG-5 MG ... 29	betamethasone dipropionate (topical) LOTN 53
AZOPT (Use brinzolamide) 75	benazepril hcl 28	betamethasone dipropionate (topical) OINT 53
AZOR (Use amlodipine besylate- olmesartan medoxomil) 29	BENEFIX KIT 63	betamethasone dipropionate augmented CREA 53
aztreonam 1 GM 31	BENICAR (Use olmesartan medoxomil) 28	betamethasone dipropionate augmented LOTN 53
AZULFIDINE EN-TABS TBEC (Use sulfasalazine) 61	BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) ... 29	betamethasone dipropionate augmented OINT 53
AZULFIDINE TABS (Use sulfasalazine) 61	BENTYL SOLN IM (Use dicyclomine hcl) 79	betamethasone valerate CREA ... 53
bacitracin (ophthalmic) 73	BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin) 49	betamethasone valerate FOAM ... 53
baclofen TABS 72	BENZEPRO CREAMY WASH LIQD . 49	betamethasone valerate LOTN 53
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim) ... 31	BENZEPRO FOAM 5.3 % 49	betamethasone valerate OINT 53
BACTRIM TABS (Use sulfamethoxazole-trimethoprim) ... 31	benzonatate 100 MG 48	BETAPACE AF (Use sotalol hcl (afib/af)) 43
BALCOLTRA (Use levonorgestrel- ethinyl estradiol-iron) 46	benzonatate 150 MG 48	BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl) 43
balsalazide disodium CAPS 61	benzonatate 200 MG 48	BETASERON KIT 77
BANZEL SUSP (Use rufinamide) .. 16	benzoyl peroxide FOAM 9.8 % 49	betaxolol hcl (ophth) SOLN 73
BANZEL TABS 200 MG (Use rufinamide) 16	benzoyl peroxide GEL 10 % 49	betaxolol hcl 42
BANZEL TABS 400 MG (Use rufinamide) 16	benzoyl peroxide GEL 5 % 49	bethanechol chloride 25 MG 81
BARACLUDE TABS (Use entecavir) . 41	benzoyl peroxide LIQD 4 %, 10 % .49	bethanechol chloride 5 MG, 10 MG, 50 MG 81
BAXDELA SOLR 60	benzoyl peroxide-erythromycin GEL . 49	BEVESPI AEROSPHERE 13
BAXDELA TABS 60	benztropine mesylate TABS 37	bexarotene (topical) 51
BD PEN NEEDLE NANO 2ND GEN . 68	bepotastine besilate 75	bexarotene 36
beclomethasone dipropionate 40 MCG/ACT, 80 MCG/ACT 12	BEPREVE (Use bepotastine besilate) 75	BEXSERO 0.5 ML 81
benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG ... 29	besifloxacin hcl 0.6 % 73	BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium) ... 46
benazepril & hydrochlorothiazide	BESIVANCE 0.6 % (Use besifloxacin hcl) 73	BEYFORTUS 76
	betaine 58	bicalutamide 35
	betamethasone dipropionate (topical) CREA 53	BIDIL (Use isosorbide dinitrate-

hydralazine hcl)	44	bromocriptine mesylate CAPS	37	bupropion hcl TB24 150 MG, 300 MG	18
BIJUVA	59	bromocriptine mesylate TABS 2.5 MG	37	buspirone hcl 5 MG	11
BIKTARVY	39	BROMSITE (Use bromfenac sodium (ophth))	75	buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG	11
BILTRICIDE (Use praziquantel) ...	10	BROVANA (Use arformoterol tartrate)	13	busulfan SOLN	33
bimatoprost SOLN	75	budesonide (inhalation) SUSP	12	BUSULFEX SOLN (Use busulfan) ..	33
bisacodyl SUPP	65	budesonide (intrarectal)	10	butalbital-acetaminophen TABS 50 MG-325 MG	6
bisacodyl TBEC	65	budesonide (nasal)	73	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG	6
bismuth subcitrate potassium-metronidazole-tetracycline	81	budesonide CPEP	47	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	6
bisoprolol & hydrochlorothiazide ..	29	budesonide-formoterol fumarate dihydrate	13	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	6
bisoprolol fumarate	42	bumetanide SOLN 0.25 MG/ML ...	57	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	8
bleomycin sulfate 15 UNIT	35	bumetanide TABS	57	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	8
BOOSTRIX SUSP	79	BUMEX TABS 0.5 MG (Use bumetanide)	57	butalbital-aspirin-caffeine CAPS	6
BOOSTRIX SUSY	79	BUPHENYL POWD (Use sodium phenylbutyrate)	58	butalbital-aspirin-caffeine w/cod	8
bosentan TABS	45	BUPHENYL TABS (Use sodium phenylbutyrate)	58	butenafine hcl	50
bosentan TBSO 32 MG	45	buprenorphine hcl SOLN	9	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	9
BREO ELLIPTA (Use fluticasone furoate-vilanterol)	13	buprenorphine hcl SUBL	9	butorphanol tartrate NA 10 MG/ML ..	9
BREO ELLIPTA	13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	9	BUTRANS PTWK (Use buprenorphine)	9
BREZTRI AEROSPHERE	13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	9	BYSTOLIC 2.5 MG, 5 MG, 10 MG (Use nebivolol hcl)	42
BRILINTA 60 MG, 90 MG (Use ticagrelor)	63	buprenorphine hcl-naloxone hcl dihydrate SUBL	9	BYSTOLIC 20 MG (Use nebivolol hcl)	42
brimonidine tartrate (topical)	56	buprenorphine PTWK	9	CABENUVA 600 MG/2ML-400 MG/2ML	39
brimonidine tartrate 0.15 %, 0.2 %	73	bupropion hcl (smoking deterrent)	78		
brimonidine tartrate-timolol maleate .	73	bupropion hcl TABS	18		
brinzolamide	75	bupropion hcl TB12	18		
brivaracetam SOLN PO 10 MG/ML	16				
BRIVIACT SOLN PO 10 MG/ML (Use brivaracetam)	16				
bromfenac sodium (ophth)	75				

CABENUVA 900 MG/3ML-600 MG/3ML	39	candesartan cilexetil-hydrochlorothiazide	29	carbinoxamine maleate SOLN	26
cabergoline	59	CANTHARIDIN SOLN	56	carbinoxamine maleate TABS 4 MG .	26
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium)	44	capecitabine	34	CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use nicardipine hcl) ..	43
CAFERGOT TABS (Use ergotamine w/ caffeine)	68	captopril 12.5 MG	28	CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use diltiazem hcl coated beads)	43
calcipotriene CREA	52	captopril 25 MG, 50 MG, 100 MG .	28	CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads)	43
calcipotriene OINT	52	CAPVAXIVE	81	CARDIZEM LA TB24 (Use diltiazem hcl)	43
calcipotriene SOLN	52	CARAC CREA (Use fluorouracil (topical))	51	CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)	43
calcipotriene-betamethasone dipropionate OINT	53	CARAFATE SUSP (Use sucralfate) 80		CARDURA (Use doxazosin mesylate)	28
calcipotriene-betamethasone dipropionate SUSP	53	CARAFATE TABS (Use sucralfate) 80		carisoprodol TABS	72
calcitonin (salmon) NA	58	carbamazepine CHEW	16	carmustine	33
calcitriol (topical)	52	carbamazepine CP12 100 MG	16	carteolol hcl (ophth)	73
calcitriol CAPS	58	carbamazepine CP12 200 MG	16	carvedilol	42
calcitriol SOLN PO	58	carbamazepine CP12 300 MG	16	carvedilol phosphate	42
calcium acetate (phosphate binder) CAPS	62	carbamazepine SUSP	16	CASODEX (Use bicalutamide)	35
calcium acetate (phosphate binder) TABS	62	carbamazepine TABS	16	CATAPRES-TTS-1 PTWK (Use clonidine)	28
calcium chloride (dihydrate) SOLN	69	carbamazepine TB12 100 MG, 400 MG	16	CATAPRES-TTS-2 PTWK (Use clonidine)	28
CALCIUM CHLORIDE SOLN 10 % (Use calcium chloride (dihydrate)) .	69	carbamazepine TB12 200 MG	16	CATAPRES-TTS-3 PTWK (Use clonidine)	28
calcium polycarbophil TABS	65	CARBATROL CP12 100 MG (Use carbamazepine)	16	CAYA DPRH	66
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl)	37	CARBATROL CP12 200 MG (Use carbamazepine)	16	CAYSTON	31
CANASA SUPP (Use mesalamine) 61		CARBATROL CP12 300 MG (Use carbamazepine)	16	cefaclor CAPS	45
candesartan cilexetil	28	carbidopa	37	cefaclor SUSR 250 MG/5ML	45
		carbidopa-levodopa TABS	37		
		carbidopa-levodopa TBCR	37		
		carbidopa-levodopa TBDP	37		
		carbidopa-levodopa-entacapone ..	37		

cefadroxil CAPS	45	cephalexin CAPS	45	CHOLBAM	61
cefadroxil SUSR	45	cephalexin SUSR	45	cholecalciferol CAPS	84
cefadroxil TABS	45	CEREBYX (Use fosphenytoin sodium)	18	cholecalciferol TABS 10 MCG, 400 UNIT	84
cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	45	cetirizine hcl TABS	26	cholestyramine light PACK	27
cefdinir CAPS	45	CETRAXAL (Use ciprofloxacin hcl (otic))	75	cholestyramine light POWD	27
cefdinir SUSR	45	cevimeline hcl	72	cholestyramine PACK	27
cefepime hcl SOLR IJ 1 GM	46	CHANTIX CONTINUING MONTH PAK TABS (Use varenicline tartrate) .	78	cholestyramine POWD	27
cefixime CAPS	45	CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate) ...	78	choline fenofibrate	27
cefixime SUSR	45	CHANTIX TABS (Use varenicline tartrate)	78	CHORIONIC GONADOTROPIN IM 58	
CEFOTAN IJ (Use cefotetan disodium)	45	CHEMET	24	CIALIS 5 MG (Use tadalafil)	44
cefotetan disodium IJ 1 GM, 2 GM	45	CHEMSTRIP K STRP	56	ciclopirox GEL	50
cefoxitin sodium IV 1 GM, 2 GM ...	45	chloramphenicol sodium succinate 31		ciclopirox olamine CREA	50
cefpodoxime proxetil SUSR	45	chlordiazepoxide hcl CAPS	11	ciclopirox olamine SUSP	50
cefpodoxime proxetil TABS	45	chlordiazepoxide hcl-clidinium bromide	79	ciclopirox SHAM	50
cefprozil SUSR	45	chlordiazepoxide-amitriptyline	77	ciclopirox SOLN	50
cefprozil TABS	45	chlorhexidine gluconate (mouth-throat)	72	cidofovir	41
ceftaroline fosamil 400 MG, 600 MG .	46	chloroquine phosphate TABS 250 MG	32	cilostazol	63
ceftazidime IJ 1 GM, 6 GM	45	chloroquine phosphate TABS 500 MG	32	CIMDUO	39
cefuroxime axetil TABS	45	chlorpromazine hcl SOLN	39	cimetidine TABS	80
cefuroxime sodium IJ 750 MG	45	chlorthalidone 25 MG, 50 MG	57	cinacalcet hcl	58
CELEBREX (Use celecoxib)	5	chlorzoxazone TABS 500 MG	72	CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	60
celecoxib	5	chlorzoxazone TABS 750 MG	72	ciprofloxacin hcl (ophth) SOLN	73
CELEXA TABS (Use citalopram hydrobromide)	19			ciprofloxacin hcl (otic)	75
CELLCEPT CAPS (Use mycophenolate mofetil)	71			ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	60
CELLCEPT TABS (Use mycophenolate mofetil)	71			ciprofloxacin-dexamethasone	75
CELONTIN (Use methsuximide) ..	18			ciprofloxacin-fluocinolone acetonide .	75
				cisplatin SOLN 100 MG/100ML	33

citalopram hydrobromide SOLN ... 19	0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol) 60	clobetasol propionate GEL 0.05 % 54
citalopram hydrobromide TABS ... 19		clobetasol propionate OINT 0.05 % 54
CLARINEX TABS (Use desloratadine) 26	clindamycin hcl 31	clobetasol propionate SOLN 0.05 % . 54
clarithromycin SUSR 66	clindamycin palmitate hydrochloride . 31	clocortolone pivalate 54
clarithromycin TABS 66	clindamycin phosphate (topical) FOAM 49	CLODERM (Use clocortolone pivalate) 54
clarithromycin TB24 66	clindamycin phosphate (topical) GEL 49	clofarabine 34
CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine) 26	clindamycin phosphate (topical) LOTN 49	clomiphene citrate TABS 58
CLARITIN CAPS (Use loratadine) .26	clindamycin phosphate (topical) SOLN 49	clomipramine hcl 20
CLARITIN CHEW (Use loratadine) 26	clindamycin phosphate (topical) SWAB 49	clonazepam TABS 15
CLARITIN CHILDRENS CHEW (Use loratadine) 26	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML 31	clonidine hcl (adhd) TB12 2
CLARITIN REDITABS TBDP (Use loratadine) 26	clindamycin phosphate vaginal CREA 84	clonidine hcl TABS 28
CLARITIN SOLN (Use loratadine) .26	clindamycin phosphate-benzoyl peroxide (refrigerate) 49	clonidine PTWK 29
CLARITIN TABS (Use loratadine) .26	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 % 49	clopidogrel bisulfate 300 MG 63
clemastine fumarate TABS 2.68 MG . 26	clindamycin phosphate-tretinoin .. 49	clopidogrel bisulfate 75 MG 63
CLEMASZ TABS 2.68 MG (Use clemastine fumarate) 26	CLINIMIX/DEXTROSE (4.25/10) ..73	clorazepate dipotassium TABS 11
CLEMSZA TABS 2.68 MG (Use clemastine fumarate) 26	CLINIMIX/DEXTROSE (4.25/5) ...73	clotrimazole (topical) CREA 50
CLEOCIN (Use clindamycin hcl) ..31	clobazam SUSP 15	clotrimazole (topical) SOLN 50
CLEOCIN (Use clindamycin palmitate hydrochloride) 31	clobazam TABS 15	clotrimazole 72
CLEOCIN CREA (Use clindamycin phosphate vaginal) 84	clobetasol propionate CREA 0.05 % . 53	clotrimazole vaginal CREA 1 % ... 84
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate) 31	clobetasol propionate emollient base 0.05 % 53	clotrimazole w/ betamethasone CREA 50
CLEOCIN-T LOTN (Use clindamycin phosphate (topical)) 49	clobetasol propionate FOAM 54	clotrimazole w/ betamethasone LOTN 50
CLIMARA PRO 59		clozapine TABS 38
CLIMARA PTWK 0.025 MG/24HR,		clozapine TBDP 100 MG 38
		clozapine TBDP 12.5 MG, 150 MG 38
		clozapine TBDP 25 MG 38
		CLOZARIL TABS (Use clozapine) .38

COARTEM	32	COPAXONE SOSY 20 MG/ML (Use glatiramer acetate)	77	methytestosterone)	60
codeine sulfate TABS 30 MG	7	COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)	77	COZAAR (Use losartan potassium) 28	
CODEINE SULFATE TABS	7	CORDRAN TAPE	54	CREON CPEP	57
COLAZAL CAPS (Use balsalazide disodium)	61	COREG (Use carvedilol)	42	CRESTOR TABS (Use rosuvastatin calcium)	27
colchicine TABS	63	COREG CR (Use carvedilol phosphate)	42	cromolyn sodium (ophth)	75
colchicine w/ probenecid	63	CORGARD TABS 20 MG (Use nadolol)	43	cromolyn sodium NEBU	12
colesevelam hcl PACK	27	CORGARD TABS 40 MG (Use nadolol)	43	crotamiton LOTN	56
colesevelam hcl TABS	27	CORLANOR TABS (Use ivabradine hcl)	45	CURITY STERILE SALINE 0.9 % (Use sodium chloride (gu irrigant))	62
COLESTID GRAN (Use colestipol hcl)	27	CORTEF TABS (Use hydrocortisone)	47	cyanocobalamin SOLN IJ 1000 MCG/ML	64
COLESTID PACK (Use colestipol hcl)	27	CORTENEMA (Use hydrocortisone (intrarectal))	10	cyclobenzaprine hcl TABS 5 MG, 10 MG	72
COLESTID TABS (Use colestipol hcl)	27	CORTISPORIN-TC	75	cyclophosphamide CAPS	33
colestipol hcl GRAN	27	COSENTYX (300 MG DOSE) SOSY . 52		cycloserine	33
colestipol hcl PACK	27	COSENTYX SENSOREADY (300 MG) SOAJ	52	cyclosporine (ophth) EMUL	74
colestipol hcl TABS	27	COSENTYX SENSOREADY PEN SOAJ	52	cyclosporine CAPS	71
COMBIGAN (Use brimonidine tartrate-timolol maleate)	73	COSENTYX SOSY 150 MG/ML ...	52	cyclosporine modified (for microemulsion) CAPS	71
COMBIPATCH PTTW	59	COSENTYX SOSY 75 MG/0.5ML .	52	cyclosporine modified (for microemulsion) SOLN	71
COMBIVENT RESPIMAT AERS ..	13	COSENTYX UNOREADY SOAJ ..	52	CYKLOKAPRON SOLN (Use tranexamic acid)	64
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	82	COSOPT (Use dorzolamide hcl- timolol maleate)	73	CYMBALTA CPEP (Use duloxetine hcl)	19
COMIRNATY SUSP	82	COVARYX 2.5 MG-1.25 MG (Use esterified estrogens & methyltestosterone)	60	cyproheptadine hcl SYRP	26
COMIRNATY SUSY	82	COVARYX HS 1.25 MG-0.625 MG (Use esterified estrogens &		cyproheptadine hcl TABS	26
COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	39			CYSTADANE (Use betaine)	59
CONCERTA TBCR 18 MG, 27 MG (Use methylphenidate hcl)	2			CYSTAGON CAPS	62
CONCERTA TBCR 36 MG, 54 MG (Use methylphenidate hcl)	2			CYSTARAN	75
				CYTOMEL TABS (Use liothyronine	

sodium) 79	DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate) 59	DEPO-SUBQ PROVERA 104 SUSY SC 47
CYTOTEC (Use misoprostol) 81	DDAVP TABS 0.1 MG (Use desmopressin acetate) 59	DERMA-SMOOTH/FS BODY OIL (Use fluocinolone acetonide) 54
dabigatran etexilate mesylate CAPS .15	DDAVP TABS 0.2 MG (Use desmopressin acetate) 59	DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide) 54
dactinomycin 35	decitabine 34	DERMOTIC (Use fluocinolone acetonide (otic)) 75
dalfampridine 77	deferasirox PACK 24	DESCOVY 200 MG-25 MG 39
DALIRESP (Use roflumilast) 12	deferasirox TABS 24	desipramine hcl TABS 20
danazol CAPS 9	deferasirox TBSO 24	desloratadine TABS 26
DANTRIUM CAPS 25 MG (Use dantrolene sodium) 72	DELESTROGEN (Use estradiol valerate) 60	desloratadine TBDP 2.5 MG 26
dantrolene sodium CAPS 72	DELSTRIGO 39	desmopressin acetate SOLN IJ ...59
dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG 20	DELZICOL CPDR (Use mesalamine) 61	DESMOPRESSIN ACETATE SOLN NA 59
dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG 20	demeclocycline hcl TABS 79	desmopressin acetate spray 59
dapagliflozin TABS PO 5 MG, 10 MG 23	DEMEROL SOLN IJ (Use meperidine hcl) 7	desmopressin acetate spray refrigerated 0.01 % 59
dapsone 31	DENAVIR (Use penciclovir) 53	desmopressin acetate TABS 0.1 MG 59
DAPTACEL 79	DEPAKOTE ER TB24 (Use divalproex sodium) 18	desmopressin acetate TABS 0.2 MG 59
DAPTOMYCIN (Use daptomycin) .31	DEPAKOTE TBEC (Use divalproex sodium) 18	desogestrel & ethinyl estradiol 46
daptomycin 500 MG 31	DEPEN TITRATABS TABS (Use penicillamine) 70	desogestrel-ethinyl estradiol (biphasic) 46
DARAPRIM (Use pyrimethamine) 32	DEPO-ESTRADIOL 60	desogestrel-ethinyl estradiol (triphasic) 46
darifenacin hydrobromide 81	DEPO-MEDROL SUSP (Use methylprednisolone acetate) 47	desonide CREA 54
darunavir TABS 600 MG 39	DEPO-MEDROL SUSP 47	desonide LOTN 54
darunavir TABS 800 MG 39	DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive)) 47	desonide OINT 54
dasatinib 36	DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive)) 47	desoximetasone CREA 0.25 % 54
DAURISMO 35		desoximetasone GEL 54
DAYPRO TABS (Use oxaprozin) ...5		desoximetasone OINT 0.25 % 54
DAYTRANA PTCH (Use methylphenidate) 2		
DDAVP PF SOLN IJ (Use desmopressin acetate) 59		

DESOXYN (Use methamphetamine hcl)	1	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1	DIFFERIN LOTN	49
desvenlafaxine succinate	19	dextroamphetamine sulfate TABS 5 MG, 10 MG	DIFICID TABS 200 MG (Use fidaxomicin)	66
DETROL LA CP24 (Use tolterodine tartrate)	81	DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))	diflorasone diacetate CREA	54
DETROL TABS (Use tolterodine tartrate)	81	diazepam (anticonvulsant) GEL ...	diflorasone diacetate OINT	54
dexamethasone ELIX	47	diazepam CONC	DIFLUCAN SUSR 40 MG/ML (Use fluconazole)	25
DEXAMETHASONE INTENSOL CONC	47	diazepam SOLN PO 5 MG/5ML ...	DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)	25
dexamethasone sodium phosphate (ophth)	74	diazepam TABS	diflunisal TABS	6
dexamethasone SOLN	47	diazoxide	difluprednate	74
dexamethasone TABS 0.5 MG, 0.75 MG	47	DIBENZYLINE (Use phenoxybenzamine hcl)	digoxin SOLN PO 0.05 MG/ML	44
dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	47	DICLEGIS TBEC (Use doxylamine-pyridoxine)	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	44
DEXCOM G6 RECEIVER	67	diclofenac epolamine PTCH EX ...	dihydroergotamine mesylate SOLN IJ 1 MG/ML	68
DEXCOM G6 SENSOR	67	diclofenac potassium TABS 50 MG .	dihydroergotamine mesylate SOLN NA 4 MG/ML	68
DEXCOM G6 TRANSMITTER	67	diclofenac sodium (actinic keratoses) EX	DILANTIN (Use phenytoin sodium extended)	18
DEXCOM G7 15 DAY SENSOR ..	67	diclofenac sodium (ophth)	DILANTIN	18
DEXCOM G7 RECEIVER	67	diclofenac sodium (topical) GEL EX 51	DILANTIN INFATABS CHEW (Use phenytoin)	18
DEXCOM G7 SENSOR	67	diclofenac sodium TB24	DILANTIN SUSP (Use phenytoin) .	18
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) ...	1	diclofenac sodium TBEC	DILANTIN-125 SUSP (Use phenytoin)	18
DEXILANT (Use dexlansoprazole) 80		diclofenac w/ misoprostol TBEC	DILAUDID LIQD (Use hydromorphone hcl)	7
dexlansoprazole	80	dicloxacillin sodium	DILAUDID TABS (Use hydromorphone hcl)	7
dexmethylphenidate hcl CP24	2	dicyclomine hcl CAPS	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	43
dexmethylphenidate hcl TABS	2	dicyclomine hcl SOLN PO	diltiazem hcl coated beads CP24 180 MG, 240 MG	43
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicyclomine hcl TABS		
dextroamphetamine sulfate CP24 5 MG	1	DIFFERIN CREA (Use adapalene) 49		
		DIFFERIN GEL (Use adapalene) ..		49

diltiazem hcl CP12	43	divalproex sodium TBEC	18	MG, 75 MG	79
diltiazem hcl CP24	43	DIVIGEL GEL (Use estradiol)	60	doxycycline hyclate CAPS	79
diltiazem hcl extended release beads	43	docusate calcium	65	doxycycline hyclate TABS 20 MG, 100 MG	79
diltiazem hcl SOLN 50 MG/10ML ..	43	docusate sodium CAPS 100 MG ..	65	doxylamine-pyridoxine TBEC	25
DILTIAZEM HCL SOLR	43	docusate sodium CAPS 250 MG ..	65	DRISDOL CAPS (Use ergocalciferol) 84	
diltiazem hcl TABS	43	dofetilide	11	dronabinol CAPS	25
diltiazem hcl TB24	43	donepezil hydrochloride TABS 10 MG	77	drosiprenone-ethinyl estradiol	46
dimethyl fumarate CDPK	77	donepezil hydrochloride TABS 5 MG, 23 MG	77	drosiprenone-ethinyl estradiol-levomefolate calcium	46
dimethyl fumarate CPDR	77	donepezil hydrochloride TBDP 10 MG	77	DROXIA CAPS	63
DIOVAN HCT (Use valsartan-hydrochlorothiazide)	29	donepezil hydrochloride TBDP 5 MG 77		DUAVEE	60
DIOVAN TABS (Use valsartan)	28	dorzolamide hcl	75	DUETACT (Use pioglitazone hcl-glimepiride)	20
DIPENTUM	61	dorzolamide hcl-timolol maleate ..	73	DULCOLAX TBEC (Use bisacodyl) 65	
diphenhydramine hcl CAPS 50 MG 26		DOVATO	39	DULERA	13
diphenhydramine hcl ELIX 12.5 MG/5ML	26	doxazosin mesylate	29	duloxetine hcl CPEP	19
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	26	doxepin hcl (antipruritic)	51	DUPIXENT SOAJ 200 MG/1.14ML 55	
diphenoxylate w/ atropine LIQD ...	24	doxepin hcl (sleep)	64	DUPIXENT SOAJ 300 MG/2ML ...	55
diphenoxylate w/ atropine TABS ..	24	doxepin hcl CAPS	20	DUPIXENT SOSY 200 MG/1.14ML 55	
DIPROLENE OINT (Use betamethasone dipropionate augmented)	54	doxepin hcl CONC	20	DUPIXENT SOSY 300 MG/2ML ...	55
dipyridamole	63	doxercalciferol CAPS	59	DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (Use morphine sulfate) ...	7
DISKETS TBSO 40 MG (Use methadone hcl)	7	doxercalciferol SOLN	59	DUREX EXTRA SENSITIVE THIN DEVI	66
disopyramide phosphate CAPS ...	11	doxorubicin hcl SOLR 10 MG, 50 MG	35	DUREX EXTRA SENSITIVE THIN MISC	66
disulfiram	76	doxycycline (monohydrate) CAPS 50 MG, 100 MG	79	DUREX TROPICAL MISC	66
DIURIL SUSP	57	doxycycline (monohydrate) CAPS 75 MG	79	DUREZOL (Use difluprednate) ...	74
divalproex sodium TB24	18	doxycycline (monohydrate) TABS 100 MG	79		
		doxycycline (monohydrate) TABS 50			

dutasteride	62	electrolyte-a	70	emtricitabine CAPS	40
dutasteride-tamsulosin hcl	62	ELESTRIN GEL	60	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	40
DYRENIUM CAPS (Use triamterene) 57		eletriptan hydrobromide	68	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	40
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	66	ELIDEL (Use pimecrolimus)	55	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	40
EC-NAPROSYN TBEC 375 MG (Use naproxen)	5	ELIGARD KIT SC 7.5 MG	35	EMTRIVA CAPS (Use emtricitabine) .	40
EC-NAPROSYN TBEC 500 MG (Use naproxen)	5	ELIGARD SC 22.5 MG, 30 MG, 45 MG	35	EMTRIVA SOLN	40
econazole nitrate CREA	50	ELIMITE CREA (Use permethrin) .	56	EMVERM CHEW	10
EDARBI 40 MG, 80 MG (Use azilsartan medoxomil)	28	ELIQUIS DVT/PE STARTER PACK TBPK	14	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 29	
EDECIN (Use ethacrynic acid) ..	57	ELIQUIS TABS	14	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 29	
EDURANT 25 MG (Use rilpivirine hcl)	39	ELLA	47	enalapril maleate TABS	28
EEMT 2.5 MG-1.25 MG (Use esterified estrogens & methyltestosterone)	60	ELMIRON CAPS	62	ENBREL MINI SOCT	6
EEMT HS 1.25 MG-0.625 MG (Use esterified estrogens & methyltestosterone)	60	eltrombopag olamine PACK 12.5 MG, 25 MG	64	ENBREL SOLN	6
efavirenz CAPS 200 MG	40	eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG	64	ENBREL SOSY 25 MG/0.5ML	6
efavirenz CAPS 50 MG	40	EMBECTA AUTOSHIELD DUO ..	68	ENBREL SOSY 50 MG/ML	6
efavirenz TABS	40	EMBECTA PEN NEEDLE NANO .	68	ENBREL SURECLICK SOAJ	6
efavirenz-emtricitabine-tenofovir disoproxil fumarate	40	EMBECTA PEN NEEDLE NANO 2 GEN	68	ENFLONSIA SOSY IM 105 MG/0.7ML	76
efavirenz-lamivudine-tenofovir disoproxil fumarate	40	EMBECTA PEN NEEDLE ULTRAFINE	68	ENERGIX-B SUSP 20 MCG/ML ...	82
EFFEXOR XR CP24 (Use venlafaxine hcl)	19	EMCYT	35	ENERGIX-B SUSY	82
EFFIENT (Use prasugrel hcl)	63	EMEND BIPACK CAPS 80 MG (Use aprepitant)	25	enoxaparin sodium SOLN IJ 300 MG/3ML	14
EFUDEX CREA (Use fluorouracil (topical))	51	EMEND TRIPACK CPPK PO (Use aprepitant)	25	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	14
electrolyte-148	69	EMGALITY (300 MG DOSE) SOSY 68		enoxaparin sodium SOSY 30 MG/0.3ML	14
		EMGALITY SOAJ	68	enoxaparin sodium SOSY 40	
		EMGALITY SOSY	68		
		EMSAM	19		

MG/0.4ML	14	ergoloid mesylates TABS	78	esomeprazole magnesium CPDR 40 MG	80
enoxaparin sodium SOSY 60 MG/0.6ML	14	ERGOMAR SUBL	68	esomeprazole magnesium TBEC ..	80
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	14	ergotamine w/ caffeine TABS	68	estazolam	64
entacapone	37	eribulin mesylate	36	esterified estrogens & methyltestosterone	60
entecavir TABS	41	ERLEADA 240 MG	35	ESTRACE CREA (Use estradiol vaginal)	84
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (Use sacubitril-valsartan)	44	ERLEADA 60 MG	35	ESTRACE TABS (Use estradiol) ..	60
EPIDUO FORTE GEL (Use adapalene-benzoyl peroxide)	49	erlotinib hcl	34	estradiol & norethindrone acetate TABS	60
EPIDUO GEL (Use adapalene- benzoyl peroxide)	49	ERTACZO	50	estradiol GEL	60
epinastine hcl (ophth)	75	ertapenem sodium IJ	31	estradiol PTTW	60
epinephrine (anaphylaxis) SOAJ ..	84	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	66	estradiol PTWK	60
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	84	ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	66	estradiol TABS	60
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	84	erythromycin (acne aid) PADS	49	estradiol vaginal CREA	84
EPIVIR SOLN (Use lamivudine) ...	40	erythromycin (acne aid) SOLN	49	estradiol vaginal TABS	84
EPIVIR TABS 150 MG (Use lamivudine)	40	erythromycin (ophth)	73	estradiol valerate	60
EPIVIR TABS 300 MG (Use lamivudine)	40	erythromycin base CPEP	66	ESTRATEST H.S. (Use esterified estrogens & methyltestosterone) ..	60
eplerenone	30	erythromycin base TABS	66	ESTRING RING 7.5 MCG/24HR ..	84
epoprostenol sodium	44	erythromycin base TBEC	66	ESTROGEL GEL (Use estradiol) ..	60
eptifibatide 200 MG/100ML	63	erythromycin ethylsuccinate SUSR 66		estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	60
EQUETRO 100 MG	38	erythromycin ethylsuccinate TABS	66	eszopiclone	64
EQUETRO 200 MG	38	ESBRIET CAPS (Use pirfenidone) 78		ethacrynic acid	57
EQUETRO 300 MG	38	ESBRIET TABS (Use pirfenidone) 78		ethambutol hcl TABS	33
ergocalciferol CAPS	85	escitalopram oxalate SOLN	19	ethosuximide CAPS	18
ergocalciferol SOLN PO 200 MCG/ML	85	escitalopram oxalate TABS	19	ethosuximide SOLN	18
		ESGIC TABS (Use butalbital- acetaminophen-caffeine)	6	ethynodiol diacet & eth estrad	46
		eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	16	etodolac CAPS	5
		esomeprazole magnesium CPDR 20 MG	80		

etodolac TABS	5	famotidine in nacl SOLN	80	FEMRING	84
etonogestrel-ethinyl estradiol	47	famotidine SUSR	80	fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ...	27
etoposide CAPS	36	famotidine TABS 20 MG, 40 MG ..	80	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	27
etravirine 100 MG	40	FANAPT	38	FENOGLIDE TABS (Use fenofibrate)	27
etravirine 200 MG	40	FANAPT TITRATION PACK A	38	fenoprofen calcium TABS	5
EUCRISA	56	FANTASY LUBRICATED MISC ...	66	FENTANYL CITRATE (PF) SOLN IJ 50 MCG/ML (Use fentanyl citrate) ..	7
EVAMIST SOLN	60	FANTASY LUBRICATED/SPERMICIDE MISC 66		fentanyl citrate LPOP	7
EVEKEO TABS (Use amphetamine sulfate)	1	FARESTON (Use toremifene citrate)	35	fentanyl citrate SOLN IJ 100 MCG/2ML	7
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	71	FARXIGA TABS PO (Use dapagliflozin)	23	fentanyl citrate SOLN IJ 50 MCG/ML 7	
everolimus (immunosuppressant) 1 MG	71	FASENRA PEN SOAJ	12	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	7
everolimus TABS	36	FASENRA SOSY 10 MG/0.5ML ...	12	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	64
EVEXITHROID TABS 180 MG	79	FASENRA SOSY 30 MG/ML	12	ferrous sulfate TABS	64
EVISTA (Use raloxifene hcl)	58	FASLODEX SOSY (Use fulvestrant) . 35		ferrous sulfate TBEC 325 MG	64
EVOTAZ	40	FC2 FEMALE CONDOM	66	fesoterodine fumarate	81
EVOXAC (Use cevimeline hcl)	72	febuxostat	63	FETZIMA CP24	20
EXELDERM CREA (Use sulconazole nitrate)	50	felbamate SUSP	18	FETZIMA TITRATION C4PK	20
EXELDERM SOLN (Use sulconazole nitrate)	50	felbamate TABS 400 MG	18	FIASP FLEXTOUCH SOPN	22
exemestane	35	felbamate TABS 600 MG	18	FIASP PENFILL SOCT	22
EXFORGE (Use amlodipine besylate-valsartan)	29	FELBATOL SUSP (Use felbamate) 18		FIASP PUMPCART SOCT	22
EXFORGE HCT (Use amlodipine- valsartan-hydrochlorothiazide)	29	FELBATOL TABS 400 MG (Use felbamate)	18	FIASP SOLN	22
EXJADE TBSO (Use deferasirox) .	24	FELBATOL TABS 600 MG (Use felbamate)	18	fidaxomicin TABS 200 MG	66
ezetimibe	27	felodipine	43	finasteride	62
ezetimibe-simvastatin	26	FEMARA (Use letrozole)	35	fingolimod hcl	77
famciclovir 125 MG, 250 MG	42	FEMCAP DEVI	66	FIORICET CAPS (Use butalbital-	
famciclovir 500 MG	41	FEMLYV TBDP	46		

acetaminophen-caffeine) 6	FLULAVAL SUSY 83	fluphenazine hcl TABS 39
FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (Use butalbital- acetaminophen-caffeine w/ codeine) . 8	FLUMIST 83	flurandrenolide CREA 54
	flunisolide (nasal) 73	flurandrenolide LOTN 54
FIRAZYR SOSY (Use icanitabant acetate) 63	fluocinolone acetonide (otic) 75	flurazepam hcl 64
	fluocinolone acetonide CREA 0.01 % 54	flurbiprofen sodium 75
FIRVANQ SOLR PO (Use vancomycin hcl) 31	fluocinolone acetonide CREA 0.025 % 54	flurbiprofen TABS 5
flavoxate hcl 81	fluocinolone acetonide OIL 54	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT 13
flecainide acetate 11	fluocinolone acetonide OINT 54	fluticasone furoate-vilanterol 13
FLECTOR PTCH EX (Use diclofenac epolamine) 51	fluocinolone acetonide SOLN 54	fluticasone propionate (inhalation) AEPB 13
FLOLAN 1.5 MG (Use epoprostenol sodium) 44	fluocinonide CREA 0.05 % 54	fluticasone propionate CREA 0.05 % 54
FLOVENT HFA 44 MCG/ACT (Use fluticasone propionate hfa) 13	fluocinonide CREA 0.1 % 54	fluticasone propionate hfa 13
floxuridine 34	fluocinonide emulsified base 54	fluticasone propionate LOTN 54
FLUAD 82	fluocinonide GEL 54	fluticasone propionate OINT 54
FLUAD QUADRIVALENT 82	fluocinonide OINT 54	fluticasone-salmeterol AEPB 13
FLUARIX QUADRIVALENT SUSY 82	fluocinonide SOLN 54	fluticasone-salmeterol AERO 13
FLUARIX SUSY 82	FLUORIDEX DAILY RENEWAL CONC 0.63 % 72	fluvastatin sodium CAPS 20 MG ..27
FLUBLOK SOSY 82	fluorometholone (ophth) SUSP 74	fluvastatin sodium CAPS 40 MG ..27
FLUCELVAX QUADRIVALENT SUSY 82	fluorouracil (topical) CREA 5 % ...51	fluvoxamine maleate TABS 19
FLUCELVAX SUSP 82	fluorouracil (topical) SOLN 51	FLUZONE HIGH-DOSE QUADRIVALENT 83
FLUCELVAX SUSY 82	fluoxetine hcl CAPS 19	FLUZONE HIGH-DOSE SUSY 83
fluconazole SUSR 25	fluoxetine hcl CPDR 19	FLUZONE QUADRIVALENT SUSY 83
fluconazole TABS 25	fluoxetine hcl SOLN 19	FLUZONE SUSP 83
flucytosine 25	FLUOXETINE HCL TABS (Use fluoxetine hcl) 19	FLUZONE SUSY 83
fludarabine phosphate SOLN 34	fluoxetine hcl TABS 19	FML FORTE SUSP 74
fludarabine phosphate SOLR 34	fluphenazine hcl CONC 39	FML LIQUIFILM SUSP (Use fluorometholone (ophth)) 74
fludrocortisone acetate TABS 48	fluphenazine hcl ELIX 39	
	fluphenazine hcl SOLN 39	

FOCALIN TABS (Use dexamethylphenidate hcl)	2	FREESTYLE LIBRE 14 DAY READER	67	galantamine hydrobromide CP24	77
FOCALIN XR CP24 (Use dexamethylphenidate hcl)	2	FREESTYLE LIBRE 14 DAY SENSOR	67	galantamine hydrobromide SOLN	77
folic acid TABS	64	FREESTYLE LIBRE 2 PLUS SENSOR	67	galantamine hydrobromide TABS	77
FOLOTYN 20 MG/ML (Use pralatrexate)	34	FREESTYLE LIBRE 2 READER	67	GAMUNEX-C	76
fondaparinux sodium 10 MG/0.8ML 15		FREESTYLE LIBRE 2 SENSOR	67	ganciclovir sodium SOLR	41
fondaparinux sodium 2.5 MG/0.5ML . 14		FREESTYLE LIBRE 3 PLUS SENSOR	67	ganirelix acetate (Use ganirelix acetate)	58
fondaparinux sodium 5 MG/0.4ML .14		FREESTYLE LIBRE 3 READER	68	ganirelix acetate	58
fondaparinux sodium 7.5 MG/0.6ML . 15		FREESTYLE LIBRE 3 SENSOR	68	GARDASIL 9 SUSP 0.5 ML	83
FORA GTBL BLOOD KETONE TEST	56	FREESTYLE LIBRE 3 READER	68	GARDASIL 9 SUSY 0.5 ML	83
FORA TEST N'GO ADV-VOICE-6 CON	56	FREESTYLE LIBRE READER	68	gatifloxacin (ophth)	73
FORFIVO XL TB24 (Use bupropion hcl)	19	FROVA (Use frovatriptan succinate) 68		gefitinib	34
formoterol fumarate NEBU	13	frovatriptan succinate	68	gemfibrozil TABS	27
FORTEO SOPN (Use teriparatide)	58	FULPHILA	64	GENOTROPIN CART SC	58
FOSAMAX PLUS D	58	fulvestrant SOSY	35	GENOTROPIN MINIRQUICK PRSY	58
FOSAMAX TABS 70 MG (Use alendronate sodium)	58	furosemide SOLN IJ 10 MG/ML	57	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 %	3
fosamprenavir calcium TABS	40	furosemide TABS	57	gentamicin sulfate (ophth) SOLN	73
fosfomycin tromethamine	32	FUZEON SOLR	40	gentamicin sulfate (topical) CREA	50
fosinopril sodium & hydrochlorothiazide	29	FYCOMPA TABS 2 MG (Use perampanel)	15	gentamicin sulfate (topical) OINT	50
fosinopril sodium	28	FYCOMPA TABS 4 MG (Use perampanel)	15	gentamicin sulfate IJ 40 MG/ML	3
fosphenytoin sodium	18	FYCOMPA TABS 6 MG (Use perampanel)	15	GENVOYA	40
FOSRENOL CHEW (Use lanthanum carbonate)	62	FYCOMPA TABS 8 MG, 10 MG, 12 MG (Use perampanel)	15	GEODON 20 MG, 60 MG, 80 MG (Use ziprasidone hcl)	38
FRAGMIN SOSY	15	gabapentin CAPS	16	GILENYA (Use fingolimod hcl)	77
		gabapentin SOLN	16	glatiramer acetate SOSY 20 MG/ML	77
		gabapentin TABS 600 MG, 800 MG 16		glatiramer acetate SOSY 40 MG/ML	78
				GLEEVEC TABS (Use imatinib mesylate)	36

GLEOSTINE 10 MG (Use lomustine) 34	GOLYTELY SOLR (Use peg 3350- kcl-sod bicarb-sod chloride-sod sulfate) 65	HEMMOREX-HC 25 MG, 30 MG (Use hydrocortisone acetate (rectal)) 10
GLEOSTINE 40 MG, 100 MG (Use lomustine) 34	granisetron hcl SOLN IV 1 MG/ML 24	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML 15
glimepiride 1 MG, 2 MG 23	granisetron hcl TABS 24	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 15
glimepiride 4 MG 23	GRASTEK SUBL 3	HEPLISAV-B SOSY 83
glipizide TABS 5 MG, 10 MG 24	griseofulvin microsize SUSP 25	HIBERIX SOLR IJ 81
glipizide TB24 24	griseofulvin microsize TABS 25	HIPREX (Use methenamine hippurate) 32
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG 20	griseofulvin ultramicrosize 25	HUMALOG JUNIOR KWIKPEN SOPN 22
glipizide-metformin hcl 500 MG-5 MG 20	guanfacine hcl (adhd) 2	HUMALOG KWIKPEN SOPN 22
GLUCAGON EMERGENCY SOLR IJ 1 MG (Use glucagon) 21	guanfacine hcl 29	HUMALOG MIX 50/50 KWIKPEN SUPN 22
glucagon SOLR IJ 1 MG 21	GYNAZOLE-1 84	HUMALOG MIX 50/50 SUSP 22
GLUCOTROL XL TB24 5 MG, 10 MG (Use glipizide) 24	HAEGARDA SOLR SC 63	HUMALOG MIX 75/25 KWIKPEN SUPN 22
GLUMETZA TB24 (Use metformin hcl) 21	HALAVEN (Use eribulin mesylate) 36	HUMALOG MIX 75/25 SUSP 22
glyburide micronized 1.5 MG, 3 MG, 6 MG 24	halcinonide CREA 54	HUMALOG SOCT 22
glyburide TABS 24	HALCION 0.25 MG (Use triazolam) 64	HUMALOG SOLN IJ 22
glyburide-metformin 250 MG-1.25 MG 20	HALDOL DECANOATE (Use haloperidol decanoate) 38	HUMIRA (2 PEN) AJKT 80 MG/0.8ML 4
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG 20	halobetasol propionate CREA 54	HUMIRA (2 PEN) AJKT 4
glycine (gu irrigant) SOLN 1.5 % .. 62	halobetasol propionate OINT 54	HUMIRA (2 SYRINGE) PSKT 4
glycopyrrolate SOLN IJ 4 MG/20ML 80	HALOG CREA (Use halcinonide) . 54	HUMIRA-CD/UC/HS STARTER AJKT 4
glycopyrrolate TABS 1 MG 80	HALOG OINT 54	HUMIRA-PED>/=40KG UC STARTER AJKT 4
glycopyrrolate TABS 2 MG 80	haloperidol decanoate 38	HUMIRA-PS/UV/ADOL HS STARTER AJKT 4
GLYXAMBI 20	haloperidol lactate CONC 38	HUMIRA-PSORIASIS/UEVIT
GOHIBIC 63	haloperidol lactate SOLN 38	
GOJJI BLOOD KETONE TEST ... 56	haloperidol TABS 38	
	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML 83	
	HEALON PRO SOSY 74	
	HEMATINIC/FOLIC ACID 64	

STARTER AJKT	4	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	9	hydromorphone hcl TABS	7
HUMULIN 70/30 KWIKPEN SUPN 22				hydromorphone hcl TB24 32 MG ...	7
HUMULIN 70/30 SUSP	22	hydrocodone-acetaminophen TABS 325 MG-2.5 MG	9	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	7
HUMULIN N KWIKPEN SUPN	22	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	9	hydroxychloroquine sulfate 100 MG 32	
HUMULIN N SUSP	22	hydrocodone-ibuprofen 7.5 MG-200 MG	9	hydroxychloroquine sulfate 200 MG 32	
HUMULIN R SOLN IJ	22	hydrocortisone (intrarectal)	10	hydroxychloroquine sulfate 400 MG 32	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	22	hydrocortisone (rectal) EX	10	hydroxyurea	36
HUMULIN R U-500 KWIKPEN SOPN SC	22	hydrocortisone (topical) CREA 1 %, 2.5 %	54	hydroxyzine hcl SOLN 50 MG/ML .	11
HYCAMPIN CAPS	37	hydrocortisone (topical) LOTN 2.5 % .	54	hydroxyzine hcl SYRP	11
HYCAMPIN SOLR (Use topotecan hcl)	37	hydrocortisone (topical) OINT 1 %, 2.5 %	55	hydroxyzine hcl TABS	11
hydralazine hcl SOLN	30	hydrocortisone acetate (rectal)	10	hydroxyzine pamoate CAPS	11
hydralazine hcl TABS	30	hydrocortisone butyrate CREA	55	HYPERSAL NEBU (Use sodium chloride (inhalant))	48
HYDREA (Use hydroxyurea)	36	hydrocortisone butyrate OINT	55	HYPERSAL NEBU	48
hydrochlorothiazide CAPS	57	hydrocortisone butyrate SOLN	55	HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (Use losartan potassium & hydrochlorothiazide)	29
hydrochlorothiazide TABS 12.5 MG 57		hydrocortisone sod succinate 100 MG	47	HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide)	29
hydrochlorothiazide TABS 25 MG, 50 MG	57	hydrocortisone TABS	47	ibandronate sodium SOLN	58
hydrocodone bitartrate CP12	7	hydrocortisone vaginal	84	ibandronate sodium TABS	58
hydrocodone bitartrate T24A	7	hydrocortisone valerate CREA	55	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML	5
hydrocodone polistirex-chlorpheniramine polistirex SUER .	48	hydrocortisone valerate OINT	55	ibuprofen TABS 400 MG, 600 MG ..	5
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	8	hydrocortisone w/acetic acid	75	ibuprofen TABS 800 MG	5
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	9	hydromorphone hcl LIQD	7	icatibant acetate SOSY	63
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	9	HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl)	7	icosapent ethyl 1 GM	26
		hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	7	IDAMYCIN PFS 20 MG/20ML (Use idarubicin hcl)	35

IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (Use idarubicin hcl) 35	INFLECTRA SOLR 61	MG, 1000 MG-50 MG, 500 MG-150 MG 20
idarubicin hcl 20 MG/20ML 35	INSPIRA (Use eplerenone) 30	INVOKAMET XR TB24 500 MG-50 MG 20
idarubicin hcl 5 MG/5ML, 10 MG/10ML 35	INSULIN ASPART FLEXPEN SOPN . 22	INVOKANA 100 MG 23
imatinib mesylate TABS 36	INSULIN ASPART SOLN IJ 22	INVOKANA 300 MG 23
imipramine hcl TABS 20	INSULIN GLARGINE MAX SOLOSTAR SOPN 22	IONOSOL-MB IN D5W 70
imipramine pamoate 20	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML 22	IPOLE IJ 83
imiquimod 5 % 55	INSULIN GLARGINE-YFGN SOLN 22	ipratropium bromide (nasal) 0.03 % 73
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML 69	INSULIN GLARGINE-YFGN SOPN 22	ipratropium bromide (nasal) 0.06 % 73
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML 69	INSULIN LISPRO (1 UNIT DIAL) SOPN 23	ipratropium bromide hfa 17 MCG/ACT 12
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate) 69	INSULIN LISPRO JUNIOR KWIKPEN SOPN 23	ipratropium bromide SOLN 0.02 % 12
IMITREX TABS (Use sumatriptan succinate) 69	INSULIN LISPRO PROT & LISPRO SUPN 23	ipratropium-albuterol SOLN 13
IMULDOSA SOLN IV 130 MG/26ML . 61	INSULIN LISPRO SOLN IJ 23	irbesartan 28
IMULDOSA SOSY SC 45 MG/0.5ML 52	INTELENCE 100 MG (Use etravirine) 40	irbesartan-hydrochlorothiazide 29
IMULDOSA SOSY SC 90 MG/ML .52	INTELENCE 200 MG (Use etravirine) 40	IRESSA (Use gefitinib) 35
IMURAN TABS (Use azathioprine) 71	INTELENCE 25 MG 40	irinotecan hcl 40 MG/2ML, 100 MG/5ML 37
INCRELEX 58	INTUNIV (Use guanfacine hcl (adhd)) 2	irrigation solutions, physiological .71
INCRUSE ELLIPTA 62.5 MCG/ACT (Use umeclidinium bromide) 12	INVEGA 3 MG, 6 MG, 9 MG (Use paliperidone) 38	ISENTRESS CHEW 40
indapamide TABS 1.25 MG 57	INVOKAMET TABS 1000 MG-150 MG, 1000 MG-50 MG, 500 MG-150 MG 20	ISENTRESS HD TABS 40
indapamide TABS 2.5 MG 57	INVOKAMET TABS 500 MG-50 MG . 20	ISENTRESS TABS 40
INDERAL LA CP24 (Use propranolol hcl) 43	INVOKAMET XR TB24 1000 MG-150	ISOLYTE-P IN D5W 70
indomethacin CAPS 25 MG, 50 MG 5		ISOLYTE-S 70
indomethacin CPCR 5		isoniazid SOLN 33
INFANRIX 79		isoniazid SYRP 33
		isoniazid TABS 33
		ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate) 10

isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	10	JENTADUETO XR TB24 1000 MG-2.5 MG	21	ketoconazole	25
isosorbide dinitrate-hydralazine hcl 44		JENTADUETO XR TB24 1000 MG-5 MG	21	KETONE TEST STRP	56
isosorbide mononitrate TABS	10	JULUCA	40	ketoprofen CAPS 50 MG, 75 MG ...	5
isosorbide mononitrate TB24	11	JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)	59	ketorolac tromethamine (ophth) ...	75
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	49	JYNNEOS	83	ketorolac tromethamine TABS	5
isradipine CAPS	43	KALETRA SOLN	40	KETOSTIX STRP	56
itraconazole CAPS	25	KALETRA TABS (Use lopinavir-ritonavir)	40	ketotifen fumarate (ophth) 0.035 %	75
itraconazole SOLN	25	KALYDECO TABS	78	KEVZARA SOAJ	5
ivabradine hcl TABS	45	KAMELEON LUBRICATED MISC ..	66	KEVZARA SOSY	5
ivermectin (pediculicide)	56	KCL IN DEXTROSE-NACL (Use potassium chloride in dextrose & sodium chloride)	70	KIMONO COLORS DEVI	66
ivermectin	10	KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (Use potassium chloride in dextrose & sodium chloride)	70	KIMONO MAXX-LARGE FLARE MISC	66
IXEMPRA KIT 15 MG	36	KCL-LACTATED RINGERS-D5W ..	70	KIMONO MICRO THIN PLUS MISC .	66
JADENU SPRINKLE PACK (Use deferasirox)	24	KENALOG-40 SUSP (Use triamcinolone acetonide)	48	KIMONO MISC	66
JADENU TABS (Use deferasirox) ..	24	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	16	KIMONO PLUS MISC	66
JAKAFI	36	KEPPRA TABS 1000 MG (Use levetiracetam)	16	KIMONO PS MISC	66
JALYN (Use dutasteride-tamsulosin hcl)	63	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	16	KIMONO PS PLUS MISC	66
JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl)	21	KEPPRA TABS 500 MG (Use levetiracetam)	16	KIMONO SENSATION MISC	66
JANUMET XR TB24 1000 MG-100 MG (Use sitagliptin phosphate-metformin hcl)	20	KEPPRA XR TB24 (Use levetiracetam)	16	KIMONO SENSATION PLUS MISC	66
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl)	21	ketconazole (topical) CREA	50	KIMONO SPECIAL DEVI	66
JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate)	22	ketconazole (topical) SHAM 2 % ..	50	KINRIX SUSY	79
JARDIANCE	23			KISUNLA	77
JENTADUETO TABS	21			KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use tobramycin)	3
				KLARON (Use sulfacetamide sodium (acne))	49
				KLONOPIN TABS (Use clonazepam)	15
				KLOR-CON 10 TBCR 10 MEQ (Use	

potassium chloride) 70	lamivudine-zidovudine 40	LENVIMA (8 MG DAILY DOSE) ..34
KLOR-CON TBCR 8 MEQ (Use potassium chloride) 70	lamotrigine CHEW 25 MG 16	LETAIRIS (Use ambrisentan) 45
KRINTAFEL 32	lamotrigine CHEW 5 MG 16	letrozole 35
K-TAB TBCR 20 MEQ (Use potassium chloride) 70	lamotrigine TABS 16	leucovorin calcium SOLR 36
KYLEENA 47	lamotrigine TBDP 16	leucovorin calcium TABS 36
labetalol hcl SOLN 42	LANOXIN SOLN IJ (Use digoxin) .44	LEUKERAN 34
labetalol hcl TABS 100 MG, 200 MG .42	LANOXIN TABS 250 MCG (Use digoxin) 44	LEUKINE SOLR IJ 64
labetalol hcl TABS 300 MG 42	LANOXIN TABS 62.5 MCG, 125 MCG (Use digoxin) 44	leuprolide acetate KIT IJ 1 MG/0.2ML 35
lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML 16	lansoprazole CPDR 15 MG 80	levalbuterol hcl 13
lacosamide TABS 16	lansoprazole CPDR 30 MG 80	levalbuterol tartrate 13
lactated ringer's (irrigation) 71	lanthanum carbonate CHEW 62	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML 16
lactic acid (ammonium lactate) CREA 55	LANTUS SOLOSTAR SOPN 23	levetiracetam TABS 1000 MG 16
lactic acid (ammonium lactate) LOTN 12 % 55	lapatinib ditosylate 36	levetiracetam TABS 250 MG, 750 MG 17
lactulose (encephalopathy) 62	LASIX TABS (Use furosemide) 57	levetiracetam TABS 500 MG 17
lactulose SOLN 65	latanoprost SOLN 75	levetiracetam TB24 17
LAMICTAL CHEW 25 MG (Use lamotrigine) 16	LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use lurasidone hcl) 38	levobunolol hcl 0.5 % 73
LAMICTAL CHEW 5 MG (Use lamotrigine) 16	LATUDA 80 MG (Use lurasidone hcl) 38	levocetirizine dihydrochloride SOLN 26
LAMICTAL ODT TBDP (Use lamotrigine) 16	leflunomide 6	levocetirizine dihydrochloride TABS 26
LAMICTAL TABS (Use lamotrigine) 16	LEMTRADA 78	levofloxacin (ophth) 0.5 % 73
lamivudine (hbv) TABS 41	lenalidomide 71	levofloxacin in d5w 500 MG/100ML 60
lamivudine SOLN 40	LENVIMA (10 MG DAILY DOSE) .34	levofloxacin SOLN PO 60
lamivudine TABS 150 MG 40	LENVIMA (12 MG DAILY DOSE) .34	levofloxacin TABS 250 MG, 750 MG .60
lamivudine TABS 300 MG 40	LENVIMA (14 MG DAILY DOSE) .34	levofloxacin TABS 500 MG 61
	LENVIMA (18 MG DAILY DOSE) .34	levonorgestrel & eth estradiol TABS 46
	LENVIMA (20 MG DAILY DOSE) .34	levonorgestrel (emergency oc) 1.5
	LENVIMA (24 MG DAILY DOSE) .34	
	LENVIMA (4 MG DAILY DOSE) ..34	

MG	47	LIPITOR TABS (Use atorvastatin calcium)	27	loratadine CHEW	26
levonorgestrel-eth estradiol (triphasic)	46	liraglutide	22	loratadine SOLN	26
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	46	lisdexamfetamine dimesylate CAPS 1		loratadine TABS	26
levonorgestrel-ethinyl estradiol (continuous)	46	lisdexamfetamine dimesylate CHEW 1		loratadine TBDP	26
levonorgestrel-ethinyl estradiol-iron 46		lisinopril & hydrochlorothiazide ...	29	lorazepam CONC	11
levorphanol tartrate TABS 2 MG	7	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	28	lorazepam TABS 0.5 MG, 2 MG ...	11
levothyroxine sodium TABS	79	lithium	37	lorazepam TABS 1 MG	11
LEXAPRO TABS (Use escitalopram oxalate)	19	lithium carbonate CAPS	38	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	29
LIALDA TBEC (Use mesalamine) .	61	lithium carbonate TABS	38	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG .	29
LIBRAX (Use chlorthalidone hcl-clidinium bromide)	80	lithium carbonate TBCR	38	losartan potassium	28
lidocaine hcl (mouth-throat) 2 % ...	72	LITHOBID TBCR (Use lithium carbonate)	38	LOTEMAX GEL (Use loteprednol etabonate)	74
lidocaine hcl (mouth-throat) 4 % ...	72	LO LOESTRIN FE TABS	46	LOTEMAX OINT	74
lidocaine hcl GEL 2 %	56	LODINE TABS (Use etodolac)	5	LOTEMAX SUSP (Use loteprednol etabonate)	74
lidocaine hcl PRSY	56	LODOSYN (Use carbidopa)	37	LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl)	28
lidocaine hcl SOLN	56	lofexidine hcl	77	LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	29
lidocaine PTCH 5 %	56	LOKELMA	71	LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	30
lidocaine-prilocaine CREA	56	LOMOTIL TABS (Use diphenoxylate w/ atropine)	24	loteprednol etabonate GEL	74
LIDODERM PTCH (Use lidocaine) 56		lomustine 10 MG	34	loteprednol etabonate SUSP	74
LILETTA (52 MG)	47	lomustine 40 MG, 100 MG	34	loteprednol etabonate-tobramycin	74
LINCOCIN (Use lincomycin hcl) ..	31	loperamide hcl CAPS	24	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	30
lincomycin hcl	31	LOPID TABS (Use gemfibrozil) ...	27	LOTRIMIN AF CREA (Use	
linezolid SUSR	32	lopinavir-ritonavir SOLN	40		
linezolid TABS	32	lopinavir-ritonavir TABS	40		
LINZESS	62	LOPRESSOR TABS (Use metoprolol tartrate)	42		
liothyronine sodium SOLN	79	LOQTORZI	34		
liothyronine sodium TABS	79	loratadine CAPS	26		

clotrimazole (topical)) 51	LURBIRO TABS 100 MG (Use flurbiprofen) 5	MAXX PLUS MISC 66
LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical)) 51	LUZU (Use luliconazole) 51	meclizine hcl TABS 12.5 MG 25
LOTRIMIN ULTRA (Use butenafine hcl) 51	LYNPARZA TABS 36	meclizine hcl TABS 25 MG 25
LOTRONEX (Use alosetron hcl) ..62	LYRICA CAPS 225 MG, 300 MG (Use pregabalin) 17	MEDROL TABS 4 MG, 8 MG, 16 MG (Use methylprednisolone) 48
lovastatin TABS 10 MG, 20 MG ...27	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin) 17	MEDROL TABS 48
lovastatin TABS 40 MG 27	LYRICA SOLN (Use pregabalin) ...17	MEDROL TBPK (Use methylprednisolone) 48
LOVAZA (Use omega-3-acid ethyl esters) 26	LYSODREN 35	medroxyprogesterone acetate (contraceptive) SUSP IM 47
LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium) 15	MACROBID (Use nitrofurantoin monohyd macro) 32	medroxyprogesterone acetate (contraceptive) SUSY IM 47
LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) .15	MACRODANTIN (Use nitrofurantoin macrocrystal) 32	medroxyprogesterone acetate 10 MG 76
LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium) 15	mafenide acetate PACK 53	medroxyprogesterone acetate 2.5 MG, 5 MG 76
LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium) 15	MALARONE (Use atovaquone-proguanil hcl) 32	mefloquine hcl 33
LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium) 15	malathion 56	megestrol acetate (appetite) 76
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .15	maraviroc TABS 150 MG 40	megestrol acetate SUSP 35
loxapine succinate 38	maraviroc TABS 300 MG 40	megestrol acetate TABS 35
lubiprostone 61	MARINOL CAPS (Use dronabinol) 25	meloxicam TABS 5
LUCEMYRA (Use lofexidine hcl) ..77	MARPLAN 19	melphalan hcl IV 34
luliconazole 51	MATULANE 36	memantine hcl TABS 77
LUMIZYME 59	MAXALT TABS 10 MG (Use rizatriptan benzoate) 69	MENEST 2.5 MG 60
LUNESTA (Use eszopiclone) 64	MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate) 69	MENOSTAR PTWK 60
lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG 38	MAXIDEX SUSP OP 74	MENQUADFI 0.5 ML 81
lurasidone hcl 80 MG 38	MAXITROL OINT (Use neomycin-polymyx-dexameth) 74	MENVEO SOLN 81
LURBIPR TABS 100 MG (Use flurbiprofen) 5	MAXITROL SUSP (Use neomycin-polymyx-dexameth) 74	MENVEO SOLR 81
	MAXX MISC 66	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML 7
		meperidine hcl SOLN PO 50 MG/5ML 7
		meperidine hcl TABS 50 MG 7

meprobamate	11	methadone hcl TABS 5 MG	7	methylphenidate hcl TABS 10 MG, 20 MG	2
MEPRON (Use atovaquone)	31	methadone hcl TBSO	7	methylphenidate hcl TABS 5 MG ...	2
mercaptopurine TABS	34	METHADOSE CONC (Use methadone hcl)	8	methylphenidate hcl TB24 18 MG, 27 MG	2
mesalamine CP24	61	METHADOSE SUGAR-FREE CONC (Use methadone hcl)	7	methylphenidate hcl TB24 36 MG, 54 MG	2
mesalamine CPDR	61	methamphetamine hcl	1	methylphenidate hcl TBCR 10 MG, 20 MG	2
mesalamine ENEM	61	methazolamide TABS	57	methylphenidate hcl TBCR 18 MG, 27 MG	2
mesalamine SUPP	61	methenamine hippurate	32	methylphenidate hcl TBCR 36 MG, 54 MG	2
mesalamine TBEC 1.2 GM	61	methimazole TABS	79	methylphenidate PTCH	2
MESTINON SOLN PO (Use pyridostigmine bromide)	33	methocarbamol TABS 500 MG, 750 MG	72	methylprednisolone acetate SUSP	48
MESTINON TABS (Use pyridostigmine bromide)	33	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	34	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	48
MESTINON TBCR (Use pyridostigmine bromide)	33	methotrexate sodium SOLR	34	methylprednisolone TABS	48
METADATE CD CPR (Use methylphenidate hcl)	2	methotrexate sodium TABS 2.5 MG 34		methylprednisolone TBPK	48
metaxalone 800 MG	72	methoxsalen rapid	52	methyltestosterone TABS	9
metformin hcl TABS 1000 MG	21	methscopolamine bromide	80	metoclopramide hcl SOLN IJ 5 MG/ML	61
metformin hcl TABS 500 MG	21	methsuximide	18	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	61
metformin hcl TABS 850 MG	21	methyl dopa TABS	29	metoclopramide hcl TABS	61
metformin hcl TB24 500 MG	21	METHYLIN SOLN (Use methylphenidate hcl)	2	metolazone	57
metformin hcl TB24 750 MG	21	methylphenidate hcl CHEW 10 MG	2	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	30
methadone hcl CONC	7	methylphenidate hcl CHEW 2.5 MG	2	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	30
METHADONE HCL SOLN IJ (Use methadone hcl)	7	methylphenidate hcl CHEW 5 MG	2	metoprolol succinate TB24 200 MG 42	
methadone hcl SOLN IJ 10 MG/ML	7	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG	2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG	42
methadone hcl SOLN PO 10 MG/5ML	7	methylphenidate hcl CP24 30 MG	2		
methadone hcl SOLN PO 5 MG/5ML	7	methylphenidate hcl CP24	2		
methadone hcl TABS 10 MG	7	methylphenidate hcl CPR	2		
		methylphenidate hcl SOLN	2		

metoprolol tartrate SOLN IV 5 MG/5ML	42	minoxidil 2.5 MG, 10 MG	30	100 MG	8
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	42	mirabegron TB24	81	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	8
METROCREAM CREA (Use metronidazole (topical))	56	MIRCERA	64	morphine sulfate SOLN PO 10 MG/5ML	8
METROGEL GEL 1 % (Use metronidazole (topical))	56	MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	46	morphine sulfate SOLN PO 20 MG/5ML	8
metronidazole (topical) CREA	56	MIRENA (52 MG)	47	morphine sulfate TABS	8
metronidazole (topical) GEL 0.75 % 56		mirtazapine TABS	18	morphine sulfate TBCR	8
metronidazole (topical) GEL 1 % ..	56	mirtazapine TBDP	18	MOTEGRITY (Use prucalopride succinate)	61
metronidazole (topical) LOTN	56	MIRVASO (Use brimonidine tartrate (topical))	56	MOTOFEN	24
metronidazole TABS 250 MG, 500 MG	30	misoprostol	81	MOUNJARO	22
metronidazole vaginal	84	mitomycin SOLR IV 20 MG	35	MOVANTIK	62
mexiletine hcl	11	mitoxantrone hcl 25 MG/12.5ML ..	36	MOVIPREP (Use peg 3350-kcl-nacl- na sulfate-na ascorbate-ascorbic acid)	65
MFLUSIVA SUSY IM 0.38 ML	83	MIUDELLA	47	moxifloxacin hcl (ophth) SOLN OP	73
MICARDIS (Use telmisartan)	28	M-M-R II SOLR	83	moxifloxacin hcl in sodium chloride	61
MICARDIS HCT (Use telmisartan- hydrochlorothiazide)	30	MNEXSPIKE SUSY 10 MCG/0.2ML . 83		moxifloxacin hcl TABS	61
miconazole nitrate vaginal SUPP 200 MG	84	modafinil 100 MG	3	MRESVIA	83
midodrine hcl	84	modafinil 200 MG	3	MS CONTIN TBCR (Use morphine sulfate)	8
miglitol	20	MODERNA COVID-19 VAC 6M-11Y SUSY	83	mupirocin OINT	50
MIGRANAL SOLN NA (Use dihydroergotamine mesylate)	68	moexipril hcl	28	MYALEPT	59
milnacipran hcl MISC	77	mometasone furoate (nasal) SUSP 73		MYCOBUTIN (Use rifabutin)	33
milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG	77	mometasone furoate CREA	55	mycophenolate mofetil CAPS	71
MINIVELLE PTTW (Use estradiol) 60		mometasone furoate OINT	55	mycophenolate mofetil TABS	71
minocycline hcl CAPS	79	mometasone furoate SOLN	55	mycophenolate sodium	71
minocycline hcl TABS	79	montelukast sodium CHEW	12	MYDRIACYL SOLN (Use tropicamide)	73
		montelukast sodium PACK	12	MYFORTIC (Use mycophenolate	
		montelukast sodium TABS	12		
		morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG,			

sodium) 71	nebivolol hcl 2.5 MG, 5 MG, 10 MG 42	NEURONTIN SOLN (Use gabapentin) 17
MYRBETRIQ TB24 (Use mirabegron) 81	nebivolol hcl 20 MG 42	NEURONTIN TABS (Use gabapentin) 17
MYSOLINE (Use primidone) 17	NEBUPENT IN (Use pentamidine isethionate) 30	nevirapine SUSP 40
nabumetone 5	NEBUSAL NEBU 48	nevirapine TABS 40
nadolol TABS 20 MG 43	nefazodone hcl 19	nevirapine TB24 400 MG 40
nadolol TABS 40 MG 43	nelarabine 34	NEXAVAR (Use sorafenib tosylate) . 36
nadolol TABS 80 MG 43	neomycin sulfate TABS 3	NEXIUM 24HR CPDR (Use esomeprazole magnesium) 80
nafcillin sodium IJ 1 GM 76	neomycin-bacitracin zn-polymyxin 74	NEXIUM 24HR TBEC 20 MG 80
naftifine hcl CREA 1 % 51	neomycin-polymy-dexameth OINT 74	NEXIUM CPDR 20 MG (Use esomeprazole magnesium) 80
naftifine hcl CREA 2 % 51	neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 % 74	NEXIUM CPDR 40 MG (Use esomeprazole magnesium) 80
nalbuphine hcl 10 MG/ML 9	neomycin-polymyxin-hc (ophth) ...74	NEXPLANON 47
naloxone hcl LIQD 24	neomycin-polymyxin-hc (otic) SOLN . 75	NEXTSTELLIS 46
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML 24	neomycin-polymyxin-hc (otic) SUSP . 75	niacin (antihyperlipidemic) TBCR ..27
naltrexone hcl 24	NEORAL CAPS (Use cyclosporine modified (for microemulsion)) 71	niacin CPCR 250 MG 85
NAMENDA TITRATION PAK TABS (Use memantine hcl) 77	NEORAL SOLN (Use cyclosporine modified (for microemulsion)) 71	NIACIN ER TBCR 85
NAPROSYN TABS 500 MG (Use naproxen) 5	NEOSTIGMINE METHYLSULFATE RFID SOSY (Use neostigmine methysulfate) 33	niacin TABS 85
naproxen sodium TABS 550 MG ... 6	NEOSTIGMINE METHYLSULFATE SOSY (Use neostigmine methysulfate) 33	niacin TBCR 85
naproxen TABS 6	neostigmine methysulfate SOSY ..33	niacinamide TABS 100 MG 85
naproxen TBEC 500 MG 6	NEO-SYNALAR 50	niacinamide TABS 500 MG 85
naratriptan hcl 69	NEUPRO 37	nicardipine hcl CAPS 43
NARCAN LIQD (Use naloxone hcl) 24	NEURONTIN CAPS (Use gabapentin) 17	NICARDIPINE HCL SOLN (Use nicardipine hcl) 43
NARDIL (Use phenelzine sulfate) .19		nicardipine hcl SOLN 43
NATACYN 74		NICORETTE MINI LOZG 4 MG (Use nicotine polacrilex) 78
NATAZIA 46		NICOTINE KIT 78
nateglinide 23		nicotine polacrilex GUM 78
NATROBA (Use spinosad) 56		
NAYZILAM 15		

nicotine polacrilex LOZG	78	norelgestromin-ethinyl estradiol ...	47	NORVIR PACK	40
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	78	norethin acet & estrad-fe CAPS ...	46	NORVIR TABS (Use ritonavir)	40
NICOTROL INHA	78	norethin acet & estrad-fe CHEW ..	46	NOVA MAX PLUS KETONE TEST 56	
NICOTROL NS SOLN	78	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	46	NOVAVAX COVID-19 VACCINE SUSY	83
nifedipine CAPS 10 MG	43	norethindrone & eth estradiol	46	NOVOLIN 70/30 FLEXPEN RELION SUPN	23
nifedipine CAPS 20 MG	43	norethindrone & ethinyl estradiol-fe 46		NOVOLIN 70/30 FLEXPEN SUPN	23
nifedipine TB24 60 MG	43	norethindrone (contraceptive)	47	NOVOLIN 70/30 RELION SUSP ..	23
nifedipine TB24 90 MG	43	norethindrone acet & eth estra TABS 46		NOVOLIN 70/30 SUSP	23
nifedipine TB24	43	norethindrone acetate TABS	76	NOVOLIN N FLEXPEN RELION SUPN	23
NILANDRON (Use nilutamide)	35	norethindrone acetate-ethinyl estradiol	60	NOVOLIN N FLEXPEN SUPN	23
nilutamide	35	norethindrone acetate-ethinyl estradiol-fe	46	NOVOLIN N RELION SUSP	23
nimodipine CAPS	43	norethindrone-eth estradiol (triphasic)	46	NOVOLIN N SUSP	23
nintedanib esylate 100 MG, 150 MG . 78		norgestimate-ethinyl estradiol (triphasic)	46	NOVOLIN R FLEXPEN RELION SOPN IJ	23
nisoldipine	43	norgestimate-ethinyl estradiol	46	NOVOLIN R FLEXPEN SOPN IJ ..	23
nitazoxanide TABS	31	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	46	NOVOLIN R RELION SOLN IJ	23
NITRO-DUR PT24 (Use nitroglycerin)	11	NORMOSOL-M IN D5W	70	NOVOLIN R SOLN IJ	23
nitrofurantoin	32	NORMOSOL-R PH 7.4	70	NOVOLOG 70/30 FLEXPEN RELION SUPN	23
nitrofurantoin macrocrystal 50 MG, 100 MG	32	NORPACE CAPS (Use disopyramide phosphate)	11	NOVOLOG FLEXPEN RELION SOPN	23
nitrofurantoin monohyd macro	32	NORPRAMIN TABS 10 MG, 25 MG (Use desipramine hcl)	20	NOVOLOG FLEXPEN SOPN	23
nitroglycerin (intra-anal)	10	nortriptyline hcl CAPS	20	NOVOLOG MIX 70/30 FLEXPEN SUPN	23
nitroglycerin OINT	11	nortriptyline hcl SOLN	20	NOVOLOG MIX 70/30 RELION SUSP	23
nitroglycerin PT24	11	NORVASC TABS (Use amlodipine besylate)	44	NOVOLOG MIX 70/30 SUSP	23
NITROGLYCERIN SOLN IV	11			NOVOLOG PENFILL SOCT	23
nitroglycerin SUBL	11			NOVOLOG RELION SOLN IJ	23
NITROSTAT SUBL (Use nitroglycerin)	11				
nizatidine CAPS	80				
NORDITROPIN FLEXPEN SOPN	58				

NOVOLOG SOLN IJ	23	olanzapine TABS 2.5 MG, 5 MG ...	38	ONFI SUSP (Use clobazam)	15
NOXAFIL SUSP (Use posaconazole)	25	olanzapine TABS 7.5 MG, 10 MG, 15	38	ONFI TABS (Use clobazam)	15
NOXAFIL TBEC (Use posaconazole)	25	olanzapine TBDP 20 MG	38	ONGLYZA 5 MG (Use saxagliptin	22
NP THYROID TABS	79	olanzapine TBDP 5 MG, 10 MG, 15	38	OPILL	47
NUBEQA	35	olmesartan medoxomil	28	ORAPRED ODT TBDP (Use	48
NUCYNTA TABS 50 MG (Use	8	olmesartan medoxomil-amlodipine-	30	prednisolone sodium phosphate) ..	48
tapentadol hcl)	8	hydrochlorothiazide	30	orphenadrine citrate TB12	72
NUVARING (Use etonogestrel-	47	olmesartan medoxomil-	30	orphenadrine w/ aspirin & caff 385	72
ethinyl estradiol)	47	hydrochlorothiazide	30	MG-30 MG-25 MG	72
NUVAXOVID COVID-19 VACCINE	83	olopatadine hcl (nasal)	72	oseltamivir phosphate CAPS	42
SUSY 5 MCG/0.5ML	83	olopatadine hcl 0.1 %	75	oseltamivir phosphate SUSR	42
NUVIGIL (Use armodafinil)	3	olopatadine hcl 0.2 %	75	OSPHENA	58
NYSTATIN (Use nystatin (mouth-	72	omega-3-acid ethyl esters	26	OTEZLA TABS	6
throat))	72	omeprazole CPDR	80	OTEZLA TBPK	6
nystatin (mouth-throat)	72	omeprazole magnesium CPDR ...	80	OTEZLA XR TB24 PO 75 MG	6
nystatin (topical) CREA	51	omeprazole TBEC	80	OTEZLA/OTEZLA XR INITIATION	6
nystatin (topical) OINT	51	omeprazole-sodium bicarbonate	81	PK TBPK	6
nystatin (topical) POWD EX	51	CAPS 1100 MG-20 MG	81	OTOVEL (Use ciprofloxacin-	75
nystatin TABS	25	OMNIFLEX DIAPHRAGM	66	fluocinolone acetonide)	75
nystatin-triamcinolone CREA	51	ondansetron hcl SOLN IJ 4 MG/2ML .	24	OTREXUP SOAJ 10 MG/0.4ML, 12.5	3
nystatin-triamcinolone OINT	51	ondansetron hcl SOLN PO 4	24	MG/0.4ML, 15 MG/0.4ML, 17.5	3
octreotide acetate SOLN	59	MG/5ML	24	MG/0.4ML, 22.5 MG/0.4ML, 25	3
OCUFLOX (Use ofloxacin (ophth))	74	ondansetron hcl SOSY	24	MG/0.4ML	3
ODEFSEY	40	ondansetron hcl TABS 24 MG	24	OVIDE (Use malathion)	56
OFEV 100 MG, 150 MG (Use	78	ondansetron hcl TABS 4 MG	24	oxacillin sodium IJ 1 GM	76
nintedanib esylate)	78	ondansetron hcl TABS 8 MG	24	oxaprozin TABS	6
ofloxacin (ophth)	74	ondansetron TBDP 4 MG	24	oxazepam CAPS	11
ofloxacin (otic)	75	ondansetron TBDP 8 MG	24	oxcarbazepine SUSP	17
ofloxacin 300 MG, 400 MG	61	ONETOUCH DELICA SAFETY	68	oxcarbazepine TABS 150 MG, 300	17
olanzapine SOLR	38	LANCING	68	MG	17
				oxcarbazepine TABS 600 MG	17
				oxiconazole nitrate CREA	51

OXISTAT LOTN	51	pantoprazole sodium TBEC 40 MG 80	PEGASYS SOSY	41	
oxybutynin chloride SOLN	81	PARAGARD INTRAUTERINE COPPER	47	PELLIX SOLN 0.005 % (Use calcipotriene)	52
oxybutynin chloride TABS 5 MG ...	81	paricalcitol CAPS	59	pemetrexed disodium SOLR 500 MG 34	
oxybutynin chloride TB24	81	paricalcitol SOLN	59	PENBRAYA	81
oxycodone hcl TABS	8	PARLODEL CAPS (Use bromocriptine mesylate)	37	penciclovir	53
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	9	PARLODEL TABS (Use bromocriptine mesylate)	37	penicillamine TABS	70
oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	9	PARNATE (Use tranlycypromine sulfate)	19	PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML ..	76
oxymorphone hcl TABS	8	paroxetine hcl SUSP	19	penicillin g potassium 5000000 UNIT 76	
oxymorphone hcl TB12 40 MG	8	paroxetine hcl TABS	19	penicillin g sodium	76
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 8		paroxetine hcl TB24	19	penicillin v potassium SOLR	76
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	22	PAXIL CR TB24 (Use paroxetine hcl)	19	penicillin v potassium TABS	76
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	22	PAXIL SUSP (Use paroxetine hcl) ..	19	PENMENVY SUSR IM	82
OZEMPIC (2 MG/DOSE) SOPN ...	22	PAXIL TABS (Use paroxetine hcl) ..	19	PENTACEL	79
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	22	pazopanib hcl	36	pentamidine isethionate IN	31
PALFORZIA INITIAL DOSE 1-3YRS CSPK	3	PEDIAPRED SOLN (Use prednisolone sodium phosphate) ..	48	pentazocine w/ naloxone hcl	9
paliperidone	38	PEDIARIX SUSY	79	pentoxifylline	63
palonosetron hcl SOLN	24	pediatric multivitamins w/fl CHEW ..	72	PEPCID TABS (Use famotidine) ..	80
PAMELOR CAPS (Use nortriptyline hcl)	20	PEDVAXHIB SUSP 7.5 MCG/0.5ML .	81	perampanel TABS 2 MG	15
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	58	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	65	perampanel TABS 4 MG	15
PAMIDRONATE DISODIUM SOLN 58		peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM 65		perampanel TABS 6 MG	15
PANRETIN	51	peg 3350-potassium chloride-sod bicarbonate-sod chloride	65	perampanel TABS 8 MG, 10 MG, 12 MG	15
pantoprazole sodium TBEC 20 MG 80		PEGASYS SOLN	41	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	9
				PERCOCET TABS 325 MG-2.5 MG (Use oxycodone w/ acetaminophen) .	9
				PERFOROMIST NEBU (Use	

formoterol fumarate) 13	PIFELTRO 40	pomalidomide 1 MG, 2 MG, 3 MG, 4 MG 35
PERIDEX (Use chlorhexidine gluconate (mouth-throat)) 72	pilocarpine hcl (oral) 72	POMALYST 1 MG, 2 MG, 3 MG, 4 MG (Use pomalidomide) 35
perindopril erbumine 2 MG, 8 MG . 28	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 73	posaconazole SUSP 25
perindopril erbumine 4 MG 28	pimecrolimus 55	posaconazole TBEC 25
PERIOMED CONC 0.63 % 72	pimozide 78	POTASSIUM ACETATE SOLN (Use potassium acetate) 70
PERMETHRIN CREA 5 % (Use permethrin) 56	pindolol TABS 43	potassium acetate SOLN 2 MEQ/ML . 70
permethrin CREA 56	pioglitazone hcl 23	potassium bicarbonate TBEF 70
permethrin LIQD EX 56	pioglitazone hcl-glimepiride 21	potassium chloride CPCR 70
perphenazine TABS 39	pioglitazone hcl-metformin hcl TABS . 21	potassium chloride in dextrose & sodium chloride 5 %-10 MEQ/L-0.45 %, 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 % 70
perphenazine-amitriptyline 77	pirfenidone CAPS 78	potassium chloride in dextrose 20 MEQ/L 70
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP 83	pirfenidone TABS 267 MG, 801 MG 78	potassium chloride microencapsulated crystals er 70
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP 83	pirfenidone TABS 534 MG 78	potassium chloride PACK PO 20 MEQ 70
phenazopyridine hcl TABS 100 MG, 200 MG 63	piroxicam CAPS 6	POTASSIUM CHLORIDE SOLN IV (Use potassium chloride) 70
phendimetrazine tartrate TABS 1	PLAQUENIL (Use hydroxychloroquine sulfate) 33	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (Use potassium chloride) 70
phenelzine sulfate 19	PLASMA-LYTE 148 70	potassium chloride SOLN PO 10 %, 10 % 70
phenobarbital ELIX 64	PLASMA-LYTE A (Use electrolyte-a) 70	potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ 70
phenobarbital TABS 64	PLAVIX 75 MG (Use clopidogrel bisulfate) 63	potassium citrate (alkalinizer) TBCR . 62
phenoxybenzamine hcl 28	PLEGRIDY SOAJ 78	POTASSIUM CL IN DEXTROSE 5% 20 MEQ/L (Use potassium chloride in
phentermine hcl CAPS 1	PLEGRIDY SOSY IM 78	
phenytoin CHEW 18	PLEGRIDY STARTER PACK SOAJ . 78	
phenytoin sodium extended 100 MG, 200 MG, 300 MG 18	PLEGRIDY STARTER PACK SOSY SC 78	
phenytoin sodium SOLN 18	PNEUMOVAX 23 SOLN 82	
phenytoin SUSP 18	PNEUMOVAX 23 SOSY 82	
PHEXX 84	podofilox SOLN 56	
PHEXXI 84	polymyxin b-trimethoprim 74	
PHOTOFRIN 36		

dextrose) 70	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG 48	primidone 50 MG, 250 MG 17
potassium phosphates 45 MMOLE/15ML 70	prednisone TBPk 48	PRIORIX SUSR 83
POTASSIUM PHOSPHATES(66 MEQ K) (Use potassium phosphates) 70	pregabalin CAPS 225 MG, 300 MG 17	PRISTIQ (Use desvenlafaxine succinate) 20
PR BENZOYL PEROXIDE WASH LIQD 49	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 17	PROAIR RESPICLICK AEPB 13
PRADAXA CAPS (Use dabigatran etexilate mesylate) 15	pregabalin SOLN 17	probenecid 63
pralatrexate 20 MG/ML 34	PREHEVBRIO 83	procainamide hcl SOLN 500 MG/ML . 11
pramipexole dihydrochloride TABS 0.125 MG 37	PREMARIN 84	PROCARDIA XL TB24 (Use nifedipine) 44
pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG 37	PREMARIN SOLR 60	prochlorperazine 39
prasugrel hcl 63	PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated) 60	prochlorperazine maleate TABS ...39
pravastatin sodium 27	PREMPHASE 60	PROCTOCORT (Use hydrocortisone acetate (rectal)) 10
praziquantel 10	PREMPRO 60	progesterone CAPS 76
prazosin hcl CAPS 29	PRETOMANID 33	PROGLYCEM (Use diazoxide) ... 21
PRECISION XTRA KETONE 56	PREVACID 24HR CPDR (Use lansoprazole) 80	PROGRAF CAPS (Use tacrolimus) 71
PRED FORTE (Use prednisolone acetate (ophth)) 74	PREVACID CPDR 30 MG (Use lansoprazole) 80	PROGRAF SOLN 5 MG/ML (Use tacrolimus) 71
PRED MILD 74	PREVNAR 20 82	PROLENSA (Use bromfenac sodium (ophth)) 75
prednisolone acetate (ophth) 74	PREZCOBIX 40	PROLEUKIN 36
prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML 48	PREZISTA SUSP 40	PROLIA SOSY 58
prednisolone sodium phosphate TBDP 48	PREZISTA TABS 600 MG (Use darunavir) 40	PROMACTA PACK 12.5 MG, 25 MG (Use eltrombopag olamine) 64
prednisolone SOLN 48	PREZISTA TABS 75 MG, 150 MG 40	PROMACTA TABS 12.5 MG, 25 MG, 50 MG, 75 MG (Use eltrombopag olamine) 64
prednisolone TABS 48	PREZISTA TABS 800 MG (Use darunavir) 40	promethazine hcl SUPP 12.5 MG, 25 MG 26
prednisone SOLN 48	PRIFTIN 150 MG (Use rifapentine) 33	promethazine hcl SUPP 50 MG ... 26
prednisone TABS 1 MG, 5 MG 48	PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate) 33	promethazine hcl TABS 26
	primaquine phosphate TABS 33	PROMETRIUM CAPS (Use

progesterone) 76	budesonide (inhalation)) 13	quetiapine fumarate TB24 38
propafenone hcl CP12 11	PULMOSAL NEBU 7 % (Use sodium chloride (inhalant)) 48	quinapril hcl 20 MG, 40 MG 28
propafenone hcl TABS 11	PULMOZYME 78	quinapril hcl 5 MG, 10 MG 28
proparacaine hcl 74	PYLERA (Use bismuth subcitrate potassium-metronidazole-tetracycline) 81	quinapril-hydrochlorothiazide 12.5 MG-10 MG 30
propranolol hcl CP24 43	pyrazinamide 33	quinapril-hydrochlorothiazide 12.5 MG-20 MG 30
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML 43	PYRIDIDIUM TABS (Use phenazopyridine hcl) 63	quinapril-hydrochlorothiazide 25 MG-20 MG 30
propranolol hcl TABS 43	pyridostigmine bromide SOLN PO .33	quinidine sulfate TABS 11
propylthiouracil 79	pyridostigmine bromide TABS 60 MG 33	quinine sulfate CAPS 324 MG 33
PROQUAD SUSR 83	pyridostigmine bromide TBCR 33	QUZYTIR SOLN IV 26
PROSCAR (Use finasteride) 63	pyrimethamine 33	QVAR REDHALER 40 MCG/ACT .13
PROTONIX TBEC 20 MG (Use pantoprazole sodium) 80	PYZCHIVA 130 MG/26ML 61	QVAR REDHALER 80 MCG/ACT .13
PROTONIX TBEC 40 MG (Use pantoprazole sodium) 80	PYZCHIVA 45 MG/0.5ML 52	rabeprazole sodium TBEC 80
protriptyline hcl 20	PYZCHIVA 90 MG/ML 52	raloxifene hcl 58
PROVENTIL HFA AERS (Use albuterol sulfate) 13	PYZCHIVA SC 45 MG/0.5ML 52	ramelteon 65
PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate) 76	QUADRACEL SUSP 79	ramipril CAPS 28
PROVIGIL 100 MG (Use modafinil) .3	QUADRACEL SUSY 79	ranitidine hcl TABS 150 MG, 300 MG 80
PROVIGIL 200 MG (Use modafinil) .3	QUALAQUIN CAPS (Use quinine sulfate) 33	ranolazine TB12 1000 MG 10
PROVISC SOSY 74	QUDEXY XR CS24 (Use topiramate) 17	ranolazine TB12 500 MG 10
PROZAC CAPS (Use fluoxetine hcl) .19	QUESTRAN LIGHT POWD (Use cholestyramine light) 27	RAPAFLO (Use silodosin) 63
prucalopride succinate 61	QUESTRAN PACK (Use cholestyramine) 27	RAPAMUNE TABS (Use sirolimus) 71
PRUDOXIN (Use doxepin hcl (antipruritic)) 52	QUESTRAN POWD (Use cholestyramine) 27	rasagiline mesylate 37
PULMICORT FLEXHALER AEPB 180 MCG/ACT 13	quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG 38	REALITY LATEX CONDOMS MISC .66
PULMICORT FLEXHALER AEPB 90 MCG/ACT 13		REALITY LATEX/ULTRA TEXTURED DEVI 66
PULMICORT SUSP (Use		REALITY LATEX/ULTRA THIN DEVI 66
		REBIF REBIDOSE SOAJ 78

REBIF REBIDOSE TITRATION PACK SOAJ 78	REPATHA SURECLICK SOAJ 28	RIDAURA 5
REBIF SOSY 78	RESTASIS EMUL (Use cyclosporine (ophth)) 74	rifabutin 33
REBIF TITRATION PACK SOSY ..78	RESTORIL (Use temazepam) 65	RIFADIN SOLR (Use rifampin) 33
RECLAST SOLN (Use zoledronic acid) 58	RETACRIT 64	rifampin CAPS 33
RECOMBIVAX HB SUSP 83	RETIN-A CREA (Use tretinoin) 50	rifampin SOLR 33
RECOMBIVAX HB SUSY 83	RETIN-A GEL (Use tretinoin) 50	rifapentine 150 MG 33
RECTIV (Use nitroglycerin (intra- anal)) 10	RETIN-A MICRO 0.04 % (Use tretinoin microsphere) 49	rilpivirine hcl 25 MG 41
REGLAN TABS (Use metoclopramide hcl) 61	RETIN-A MICRO 0.1 % (Use tretinoin microsphere) 49	riluzole TABS 73
RELENZA DISKHALER 42	RETIN-A MICRO PUMP 0.1 % (Use tretinoin microsphere) 50	rimantadine hydrochloride TABS ..42
RELION KETONE TEST STRP ...56	RETROVIR CAPS (Use zidovudine) . 40	ringer's 70
RELION LANCET DEVICES 30G .68	RETROVIR SOLN 40	ringer's irrigation 71
RELION LANCETS 68	RETROVIR SYRP (Use zidovudine) . 41	RINVOQ LQ SOLN 3
RELION TRUE METRIX TEST STRIPS STRP 56	REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) .45	RINVOQ TB24 3
RELPAKX (Use eletriptan hydrobromide) 69	REVATIO SUSR (Use sildenafil citrate (pulmonary hypertension)) .45	risedronate sodium TABS 150 MG 58
REMERON SOLTAB TBDP (Use mirtazapine) 18	REVATIO TABS (Use sildenafil citrate (pulmonary hypertension)) .45	risedronate sodium TABS 35 MG .58
REMERON TABS 15 MG, 30 MG (Use mirtazapine) 18	REVLIMID (Use lenalidomide) 71	risedronate sodium TABS 5 MG, 30 MG 58
RENFLEXIS 61	REXULTI 39	risedronate sodium TBEC 58
RENVELA PACK (Use sevelamer carbonate) 62	REYATAZ CAPS 200 MG (Use atazanavir sulfate) 41	RISPERDAL CONSTA (Use risperidone microspheres) 38
RENVELA TABS (Use sevelamer carbonate) 62	REYATAZ CAPS 300 MG (Use atazanavir sulfate) 41	RISPERDAL SOLN (Use risperidone) 38
repaglinide 0.5 MG, 1 MG 23	REZVOGLAR KWIKPEN 23	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone) 38
repaglinide 2 MG 23	ribavirin (hepatitis c) CAPS 41	risperidone microspheres 38
REPATHA PUSHTRONEX SYSTEM SOCT 28	ribavirin (hepatitis c) TABS 200 MG 41	risperidone SOLN 38
REPATHA SOSY 28		risperidone TABS 38
		risperidone TBDP 38
		RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use methylphenidate hcl) 3
		RITALIN LA CP24 30 MG (Use

methylphenidate hcl) 3	rufinamide SUSP 17	MG, 500 MG-5 MG 21
RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl) 3	rufinamide TABS 200 MG 17	scopolamine 25
RITALIN TABS 5 MG (Use methylphenidate hcl) 3	rufinamide TABS 400 MG 17	SEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day)) 46
ritonavir TABS 41	RUXIENCE 34	SEGLUROMET 1000 MG-2.5 MG, 1000 MG-7.5 MG, 500 MG-7.5 MG 21
rivaroxaban SUSR 1 MG/ML 14	RYBELSUS TABS 22	SEGLUROMET 500 MG-2.5 MG ..21
rivaroxaban TABS 2.5 MG 14	SABRIL PACK (Use vigabatrin) ... 18	selegiline hcl CAPS 37
rivastigmine tartrate CAPS 77	SABRIL TABS (Use vigabatrin) 18	selegiline hcl TABS 37
rizatriptan benzoate TABS 10 MG .69	sacubitril-valsartan TABS 44	selenium sulfide LOTN 2.5 % 52
rizatriptan benzoate TABS 5 MG ..69	SAFYRAL (Use drospirenone-ethinyl estradiol-levomefolate calcium) ...46	SELSUN BLUE CARE MENS MAX STR LOTN (Use selenium sulfide) 53
rizatriptan benzoate TBDP 10 MG .69	SALAGEN (Use pilocarpine hcl (oral)) 72	SELSUN BLUE DAILY LOTN (Use selenium sulfide) 53
rizatriptan benzoate TBDP 5 MG ..69	salsalate 6	SELSUN BLUE MEDICATED LOTN (Use selenium sulfide) 53
ROBINUL TABS (Use glycopyrrolate) 80	SAMSCA TABS PO (Use tolvaptan (hyponatremia)) 59	SELSUN BLUE MOISTURIZING LOTN (Use selenium sulfide) 53
ROBINUL-FORTE TABS (Use glycopyrrolate) 80	SANDIMMUNE CAPS (Use cyclosporine) 71	SELZENTRY SOLN 41
ROCALTROL CAPS (Use calcitriol) 59	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate) 59	SELZENTRY TABS 150 MG (Use maraviroc) 41
ROCALTROL SOLN PO (Use calcitriol) 59	SANTYL OINT 55	SELZENTRY TABS 300 MG (Use maraviroc) 41
roflumilast 12	SAPHRIS 2.5 MG (Use asenapine maleate) 39	SENSIPAR (Use cinacalcet hcl) ..59
ropinirole hydrochloride TABS 37	SAPHRIS 5 MG, 10 MG (Use asenapine maleate) 39	SEREVENT DISKUS 13
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG 37	SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use milnacipran hcl) 77	SEROQUEL TABS (Use quetiapine fumarate) 39
ropinirole hydrochloride TB24 8 MG, 12 MG 37	SAVELLA TITRATION PACK MISC (Use milnacipran hcl) 77	SEROQUEL XR TB24 (Use quetiapine fumarate) 39
rosuvastatin calcium TABS 27	saxagliptin hcl 22	sertraline hcl CONC 19
ROTARIX SUSP 83	saxagliptin-metformin hcl 1000 MG-2.5 MG 21	sertraline hcl TABS 19
ROTATEQ SOLN 83	saxagliptin-metformin hcl 1000 MG-5	

sevelamer carbonate PACK 62	SIRTURO 33	SOLU-CORTEF (Use hydrocortisone sod succinate) 48
sevelamer carbonate TABS 62	sitagliptin phosphate 25 MG, 50 MG, 100 MG 22	SOLU-CORTEF 250 MG 48
SHINGRIX 83	sitagliptin phosphate-metformin hcl TABS 21	SOLU-CORTEF 500 MG, 1000 MG 48
SHINGRIX IM 50 MCG/0.5ML 83	sitagliptin phosphate-metformin hcl TB24 21	SOLU-MEDROL 2 GM 48
sildenafil citrate (pulmonary hypertension) SOLN 45	SKYLA 47	SOLU-MEDROL 500 MG, 1000 MG (Use methylprednisolone sod succ) 48
sildenafil citrate (pulmonary hypertension) SUSR 45	SKYRIZI PEN SOAJ 52	SOMA TABS (Use carisoprodol) ...72
sildenafil citrate (pulmonary hypertension) TABS 45	SKYRIZI SOCT 61	sorafenib tosylate 36
sildenafil citrate 44	SKYRIZI SOLN 61	SORBITOL 3 % 62
SILENOR (Use doxepin hcl (sleep)) . 64	SKYRIZI SOSY 52	SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML 62
silodosin 63	SLYND 47	sotalol hcl (afib/af) 43
SILVADENE (Use silver sulfadiazine) 53	SODIUM ACETATE SOLN (Use sodium acetate) 69	sotalol hcl TABS 240 MG 43
silver sulfadiazine 53	sodium acetate SOLN 69	sotalol hcl TABS 80 MG, 120 MG, 160 MG 43
SIMLANDI (1 PEN) AJKT 4	sodium chloride (gu irrigant) 0.9 % 62	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML 84
SIMLANDI (1 SYRINGE) PSKT 4	sodium chloride (inhalant) NEBU 7 % 48	SPIKEVAX SUSP 84
SIMLANDI (2 PEN) AJKT 4	sodium citrate & citric acid 62	SPIKEVAX SUSY 84
SIMLANDI (2 SYRINGE) PSKT 4	sodium fluoride CHEW 70	spinosad 56
SIMULECT 71	sodium phenylbutyrate POWD 59	SPIRIVA HANDIHALER CAPS IN (Use tiotropium bromide) 12
simvastatin TABS 27	sodium phenylbutyrate TABS 59	SPIRIVA RESPIMAT AERS IN 12
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa-levodopa) 37	sodium polystyrene sulfonate POWD 71	spironolactone & hydrochlorothiazide 57
SINGULAIR CHEW (Use montelukast sodium) 12	sodium polystyrene sulfonate SUSP CO 15 GM/60ML 72	spironolactone TABS 57
SINGULAIR PACK (Use montelukast sodium) 12	sodium sulfate-potassium sulfate-magnesium sulfate 65	SPORANOX CAPS (Use itraconazole) 25
SINGULAIR TABS (Use montelukast sodium) 12	SOFOSBUVIR-VELPATASVIR TABS 41	SPORANOX SOLN (Use itraconazole) 25
sirolimus TABS 71	solifenacin succinate TABS 81	SPRAVATO (56 MG DOSE) 19
	SOLQUA 21	

SPRAVATO (84 MG DOSE)	19	sulconazole nitrate CREA	51	sunitinib malate	36
SPRYCEL (Use dasatinib)	36	sulconazole nitrate SOLN	51	SUNOSI 150 MG	2
SSS 10-5 CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur) . . .	50	sulfacetamide sodium (acne)	50	SUNOSI 75 MG	2
stannous fluoride CONC	72	sulfacetamide sodium (ophth) SOLN . 74		SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate- magnesium sulfate)	65
STEGLATRO 15 MG	23	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	50	SUTENT (Use sunitinib malate) . . .	36
STEGLATRO 5 MG	23	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	50	SYMBICORT (Use budesonide- formoterol fumarate dihydrate)	14
STEGLUJAN	21	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	50	SYMFI (Use efavirenz-lamivudine- tenofovir disoproxil fumarate)	41
STENDRA (Use avanafil)	44	sulfacetamide sod-prednisolone SOLN	74	SYMFI LO (Use efavirenz- lamivudine-tenofovir disoproxil fumarate)	41
STEQEYMA 45 MG/0.5ML	52	sulfadiazine TABS	78	SYMTUZA	41
STEQEYMA 90 MG/ML	52	sulfamethoxazole-trimethoprim SOLN	31	SYNALAR CREA (Use fluocinolone acetonide)	55
STIOLTO RESPIMAT	14	sulfamethoxazole-trimethoprim SUSP	31	SYNALAR OINT (Use fluocinolone acetonide)	55
STIVARGA	36	sulfamethoxazole-trimethoprim TABS	31	SYNJARDY TABS	21
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (Use atomoxetine hcl)	2	SULFAMILYLON CREA	53	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	21
STRATTERA 60 MG, 80 MG, 100 MG (Use atomoxetine hcl)	2	sulfasalazine TABS	61	SYNJARDY XR TB24 1000 MG-25 MG	21
STRENSIQ	59	sulfasalazine TBEC	61	SYNTHROID TABS (Use levothyroxine sodium)	79
streptomycin sulfate SOLR	3	sulindac TABS	6	SYPRINE (Use trientine hcl)	70
STRIBILD	41	SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur) . . .	50	TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate)	55
STRIVERDI RESPIMAT	14	sumatriptan	69	tacrolimus (topical) OINT	55
STROMECTOL (Use ivermectin) . .	10	sumatriptan succinate SOAJ	69	tacrolimus CAPS	71
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sumatriptan succinate SOCT	69	tacrolimus SOLN 5 MG/ML	71
SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sumatriptan succinate SOLN 6 MG/0.5ML	69	tadalafil (pulmonary hypertension)	
sucralfate SUSP	80	sumatriptan succinate TABS	69		
sucralfate TABS	80	sumatriptan-naproxen sodium	68		
SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine)	44				

TABS	45	MG (Use carbamazepine)	17	testosterone cypionate SOLN IM ...	9
tadalafil 5 MG	44	TEGRETOL-XR TB12 200 MG (Use carbamazepine)	17	testosterone enanthate SOLN IM ..	10
tafluprost	75	TEKTURNa (Use aliskiren fumarate)	30	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	79
TAMIFLU CAPS (Use oseltamivir phosphate)	42	telmisartan	28	tetrabenazine	77
TAMIFLU SUSR (Use oseltamivir phosphate)	42	telmisartan-amlodipine	30	tetracycline hcl CAPS	79
tamoxifen citrate TABS	35	telmisartan-hydrochlorothiazide ...	30	THALOMID 50 MG, 100 MG, 200 MG	71
tamsulosin hcl	63	temazepam 15 MG, 30 MG	65	theophylline ELIX	14
tapentadol hcl TABS 50 MG	8	temazepam 7.5 MG, 22.5 MG	65	theophylline SOLN	14
TARCEVA 100 MG, 150 MG (Use erlotinib hcl)	35	TEMODAR SOLR	34	theophylline TB12	14
TARGRETIN (Use bexarotene (topical))	51	temozolomide CAPS	34	theophylline TB24	14
TARGRETIN (Use bexarotene) ...	36	temsirolimus	36	thioridazine hcl	39
TASMAR (Use tolcapone)	37	TENIVAC SUSP 2 LFU-5 LFU	79	thiotepa 15 MG	34
tavaborole	51	tenofovir disoproxil fumarate TABS 41		thiothixene	39
TAYTULLA CAPS (Use norethin acet & estrad-fe)	46	TENORETIC 100 (Use atenolol & chlorthalidone)	30	THYMOGLOBULIN	71
tazarotene CREA 0.1 %	52	TENORETIC 50 (Use atenolol & chlorthalidone)	30	THYROGEN 0.9 MG	56
TAZORAC CREA 0.1 % (Use tazarotene)	52	TENORMIN TABS (Use atenolol) .	42	tiagabine hcl	18
TDVAX SUSP	79	TEPADINA 15 MG (Use thiotepa) .	34	TIAZAC (Use diltiazem hcl extended release beads)	44
TECFIDERA CDPK (Use dimethyl fumarate)	78	terazosin hcl	29	ticagrelor 60 MG, 90 MG	63
TECFIDERA CPDR (Use dimethyl fumarate)	78	terbinafine hcl TABS	25	TIKOSYN (Use dofetilide)	12
TEFLARO 400 MG, 600 MG (Use ceftaroline fosamil)	46	terbutaline sulfate SOLN	14	timolol maleate (ophth) SOLG	73
TEGRETOL SUSP (Use carbamazepine)	17	terbutaline sulfate TABS	14	timolol maleate (ophth) SOLN	73
TEGRETOL TABS (Use carbamazepine)	17	terconazole vaginal CREA	84	timolol maleate TABS	43
TEGRETOL-XR TB12 100 MG, 400		terconazole vaginal SUPP	84	tinidazole	31
		teriflunomide	78	tiotropium bromide CAPS IN 18 MCG	12
		teriparatide SOPN	58	TIVICAY PD TBSO	41
		TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	10	TIVICAY TABS 50 MG	41
				tizanidine hcl CAPS	72

tizanidine hcl TABS	72	TOPICORT CREA 0.05 % (Use desoximetasone)	55	bosentan)	45
TOBI NEBU (Use tobramycin)	3	TOPICORT CREA 0.25 % (Use desoximetasone)	55	TRADJENTA	22
tobramycin (ophth) SOLN	74	TOPICORT GEL (Use desoximetasone)	55	tramadol hcl TABS 50 MG	8
tobramycin NEBU	3	TOPICORT OINT 0.25 % (Use desoximetasone)	55	tramadol hcl TB24	8
tobramycin-dexamethasone SUSP 74		topiramate CPSP 15 MG	17	tramadol-acetaminophen	9
TODAY SPONGE MISC	84	topiramate CPSP 25 MG	17	trandolapril 1 MG, 2 MG	28
tofacitinib citrate SOLN 1 MG/ML ...	3	topiramate CS24	17	trandolapril 4 MG	28
tofacitinib citrate TABS 5 MG, 10 MG 3		topiramate TABS 200 MG	17	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	30
tofacitinib citrate TB24 11 MG, 22 MG	3	topiramate TABS 25 MG, 100 MG .	17	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	30
tolcapone	37	topiramate TABS 50 MG	17	tranexamic acid SOLN 1000 MG/10ML	64
TOLECTIN DS CAPS 400 MG (Use tolmetin sodium)	6	TOPOTECAN HCL SOLN (Use topotecan hcl)	37	tranexamic acid TABS	64
tolmetin sodium CAPS	6	topotecan hcl SOLN	37	TRANSDERM SCOP 1 MG/3DAYS (Use scopolamine)	25
tolmetin sodium TABS 600 MG	6	topotecan hcl SOLR	37	TRANSDERM-SCOP (Use scopolamine)	25
TOLSURA CAPS	25	TOPROL XL TB24 200 MG (Use metoprolol succinate)	42	tranylcypromine sulfate	19
tolterodine tartrate CP24	81	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate) 43		TRAVATAN Z SOLN (Use travoprost)	75
tolterodine tartrate TABS	81	toremifene citrate	35	travoprost SOLN	75
tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	59	TORISEL (Use temsirolimus)	36	trazodone hcl TABS	19
tolvaptan TABS	59	torsemide TABS	57	TRELEGY ELLIPTA	14
TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	17	TOUJEO MAX SOLOSTAR SOPN 23		TREMFYA ONE-PRESS SOPN SC 100 MG/ML	52
TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	17	TOUJEO SOLOSTAR SOPN	23	TREMFYA PEN SOAJ 100 MG/ML 52	
TOPAMAX TABS 200 MG (Use topiramate)	17	TOVIAZ (Use fesoterodine fumarate)	81	TREMFYA PEN SOAJ SC 200 MG/2ML	61
TOPAMAX TABS 25 MG, 100 MG (Use topiramate)	17	TRACLEER TABS (Use bosentan) 45		TREMFYA SOLN IV	62
TOPAMAX TABS 50 MG (Use topiramate)	17	TRACLEER TBSO 32 MG (Use		TREMFYA SOSY 100 MG/ML	52
				TREMFYA SOSY SC 200 MG/2ML	

62	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG 57	TROJAN BARESKIN DEVI 66
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML 61	triamterene & hydrochlorothiazide TABS 57	TROJAN MAGNUM MISC 67
treprostinil SOLN IJ 44	triamterene CAPS 57	TROJAN ULTRA THIN MISC 67
TRESIBA FLEXTOUCH SOPN 23	triazolam 65	TROJAN ULTRA THIN/SPERMICIDAL MISC 67
TRESIBA SOLN 23	TRIBENZOR (Use olmesartan medoxomil-amlodipine- hydrochlorothiazide) 30	TROJAN-ENZ LUBRICATED MISC 67
tretinoin (chemotherapy) 36	TRICOR TABS (Use fenofibrate) ..27	TROJAN-ENZ/SPERMICIDAL MISC . 67
tretinoin CREA 0.025 %, 0.05 %, 0.1 % 50	trientine hcl 250 MG 71	tropicamide SOLN 0.5 % 73
tretinoin GEL 0.01 %, 0.025 % 50	trifluoperazine hcl TABS 39	tropicamide SOLN 1 % 73
tretinoin microsphere 0.1 % 50	trifluridine 74	tropium chloride CP24 81
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG 34	trihexyphenidyl hcl SOLN 37	tropium chloride TABS 81
TREXIMET (Use sumatriptan- naproxen sodium) 68	trihexyphenidyl hcl TABS 37	TRUE COVER DEVI 67
triamcinolone acetonide (mouth) ..72	TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG .21	TRUE METRIX BLOOD GLUCOSE TEST STRP 56
triamcinolone acetonide (nasal) AERO 73	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG 21	TRUE METRIX LEVEL 3 SOLN ...68
triamcinolone acetonide (topical) CREA 0.025 % 55	TRILEPTAL SUSP (Use oxcarbazepine) 17	TRULANCE 61
triamcinolone acetonide (topical) CREA 0.1 % 55	TRILEPTAL TABS 150 MG, 300 MG (Use oxcarbazepine) 17	TRULICITY 22
triamcinolone acetonide (topical) CREA 0.5 % 55	TRILEPTAL TABS 600 MG (Use oxcarbazepine) 17	TRUMENBA 0.5 ML 82
triamcinolone acetonide (topical) LOTN 0.025 % 55	TRILIPIX (Use choline fenofibrate) 27	TRUSTEX COLOR CONDOMS + LUBE MISC 67
triamcinolone acetonide (topical) LOTN 0.1 % 55	trimethobenzamide hcl CAPS 25	TRUSTEX LUB/RIBBED/STUDDED MISC 67
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 % 55	trimethoprim TABS 31	TRUSTEX LUB/SPERMICIDE EX ST MISC 67
triamcinolone acetonide (topical) OINT 0.5 % 55	trimipramine maleate CAPS 20	TRUSTEX LUBRICATED EX LARGE MISC 67
triamcinolone acetonide SUSP 40 MG/ML 48	TRINTELLIX 19	TRUSTEX LUBRICATED EXTRA ST MISC 67
	TRIUMEQ PD TBSO 41	TRUSTEX LUBRICATED MISC ...67
	TRIUMEQ TABS 41	

TRUSTEX LUBRICATED/SPERMICIDE MISC 67	UROCIT-K 10 TBCR (Use potassium citrate (alkalinizer)) 62	VALTREX 500 MG (Use valacyclovir hcl) 42
TRUSTEX NATURAL CONDOMS + LUBE MISC 67	UROCIT-K 15 TBCR (Use potassium citrate (alkalinizer)) 62	VANCOCIN CAPS (Use vancomycin hcl) 31
TRUSTEX RIA LUB/SPERMICIDE MISC 67	UROXATRAL (Use alfuzosin hcl) .63	vancomycin hcl CAPS 31
TRUSTEX RIA LUBRICATED MISC . 67	URSO FORTE TABS (Use ursodiol) . 61	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML .31
TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC 67	ursodiol CAPS 61	VANOS CREA (Use fluocinonide) .55
TRUVADA (Use emtricitabine- tenofovir disoproxil fumarate) 41	ursodiol TABS 61	VAQTA 84
TRUXIMA 34	UVADEX 36	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML 84
TUDORZA PRESSAIR 12	VAGIFEM TABS (Use estradiol vaginal) 84	varenicline tartrate TABS 78
TURALIO 125 MG 36	valacyclovir hcl 1 GM 42	varenicline tartrate TBPk 78
TWINRIX SUSY 84	valacyclovir hcl 500 MG 42	VARIVAX SUSR 84
TWIRLA 47	VALCYTE TABS (Use valganciclovir hcl) 41	VARUBI (180 MG DOSE) TBPk .. 25
TYBLUME CHEW 46	valganciclovir hcl TABS 41	VASCEPA 1 GM (Use icosapent ethyl) 26
TYBOST 41	VALIUM TABS (Use diazepam) ... 11	VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide) 30
TYKERB (Use lapatinib ditosylate) 36	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML 18	VASOPRESSIN SOLN IV 20 UNIT/ML (Use vasopressin) 59
TYMLOS 58	valproic acid CAPS 18	vasopressin SOLN IV 59
UBRELVY 68	valrubicin 36	VASOSTRICT SOLN IV (Use vasopressin) 59
UCERIS (Use budesonide (intrarectal)) 10	valsartan TABS 28	VASOTEC TABS (Use enalapril maleate) 28
UDENYCA ONBODY SOSY 64	valsartan-hydrochlorothiazide 30	VAXELIS SUSP 79
UDENYCA SOAJ 64	VALSTAR (Use valrubicin) 36	VAXELIS SUSY 79
UDENYCA SOSY 64	VALTOCO 10 MG DOSE LIQD 15	VAXNEUVANCE 82
ULORIC (Use febuxostat) 63	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML 15	VCF VAGINAL CONTRACEPTIVE FILM 84
umeclidinium bromide 62.5 MCG/INH 12	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML 16	VECAMEYL 30
umeclidinium-vilanterol 14	VALTOCO 5 MG DOSE LIQD 16	VECTICAL (Use calcitriol (topical))
	VALTREX 1 GM (Use valacyclovir hcl) 42	

52	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth)) 74	water for irrigation, sterile 71
VELETRI (Use epoprostenol sodium) 44	VIIBRYD TABS (Use vilazodone hcl) 19	WELCHOL PACK (Use colesevelam hcl) 27
VELPHORO 62	vilazodone hcl TABS 19	WELCHOL TABS (Use colesevelam hcl) 27
venlafaxine hcl CP24 20	VIMPAT SOLN PO 10 MG/ML (Use lacosamide) 17	WELLBUTRIN SR TB12 (Use bupropion hcl) 19
venlafaxine hcl TABS 20	VIMPAT TABS (Use lacosamide) ..17	WELLBUTRIN XL TB24 (Use bupropion hcl) 19
venlafaxine hcl TB24 20	vinorelbine tartrate 10 MG/ML 36	WIDE-SEAL DIAPHRAGM 60 67
VENTOLIN HFA AERS (Use albuterol sulfate) 14	VIRACEPT TABS 250 MG 41	WIDE-SEAL DIAPHRAGM 65 67
verapamil hcl CP24 100 MG, 200 MG, 300 MG 44	VIRACEPT TABS 625 MG 41	WIDE-SEAL DIAPHRAGM 70 67
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG 44	VIREAD POWD 41	WIDE-SEAL DIAPHRAGM 75 67
VERAPAMIL HCL ER CP24 (Use verapamil hcl) 44	VIREAD TABS (Use tenofovir disoproxil fumarate) 41	WIDE-SEAL DIAPHRAGM 80 67
verapamil hcl TABS 44	VIREAD TABS 150 MG, 200 MG, 250 MG 41	WIDE-SEAL DIAPHRAGM 85 67
verapamil hcl TBCR 44	VISTARIL CAPS 25 MG (Use hydroxyzine pamoate) 11	WIDE-SEAL DIAPHRAGM 90 67
VERELAN CP24 (Use verapamil hcl) 44	VISTOGARD 24	WIDE-SEAL DIAPHRAGM 95 67
VERELAN PM CP24 (Use verapamil hcl) 44	VITAMIN D2 TABS 400 UNIT 85	XALATAN SOLN (Use latanoprost) 75
VERZENIO 36	VIVELLE-DOT PTTW (Use estradiol) 60	XANAX TABS (Use alprazolam) ...11
VESICARE TABS (Use solifenacin succinate) 81	VORAXAZE 36	XANAX XR TB24 (Use alprazolam) 11
VFEND TABS 200 MG (Use voriconazole) 25	voriconazole TABS 25	XARELTO STARTER PACK TBPk 14
VIAGRA (Use sildenafil citrate) ...44	VOSEVI 41	XARELTO SUSR 1 MG/ML (Use rivaroxaban) 14
VIBRAMYCIN CAPS (Use doxycycline hyclate) 79	VOTRIENT (Use pazopanib hcl) ..36	XARELTO TABS 10 MG, 20 MG .. 14
VICTOZA (Use liraglutide) 22	VYTORIN (Use ezetimibe- simvastatin) 26	XARELTO TABS 15 MG 14
VIDAZA SUSR (Use azacitidine) ..34	VYVANSE CAPS (Use lisdexamfetamine dimesylate) 1	XARELTO TABS 2.5 MG (Use rivaroxaban) 14
vigabatrin PACK 18	VYVANSE CHEW (Use lisdexamfetamine dimesylate) 1	XELJANZ SOLN 1 MG/ML (Use tofacitinib citrate) 3
vigabatrin TABS 18	warfarin sodium TABS 14	XELJANZ TABS 5 MG, 10 MG (Use tofacitinib citrate) 3

XELJANZ XR TB24 11 MG, 22 MG (Use tofacitinib citrate)	3	YUFLYMA (2 PEN) AJKT	4	15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	57
XELODA (Use capecitabine)	34	YUFLYMA (2 SYRINGE) PSKT	4	ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT	57
XENAZINE (Use tetrabenazine) ..	77	YUFLYMA-CD/UC/HS STARTER AJKT	5	ZERVIATE	75
XHANCE EXHU	73	zafirlukast	12	ZESTORETIC (Use lisinopril & hydrochlorothiazide)	30
XIFAXAN 200 MG	31	zaleplon 10 MG	65	ZESTRIL TABS (Use lisinopril)	28
XIFAXAN 550 MG	31	zaleplon 5 MG	65	ZETIA (Use ezetimibe)	27
XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	21	ZALTRAP 100 MG/4ML	34	ZIAGEN SOLN (Use abacavir sulfate)	41
XIGDUO XR TB24 PO 1000 MG-5 MG (Use dapagliflozin free base- metformin hcl)	21	ZANAFLEX CAPS (Use tizanidine hcl)	72	ZIANA (Use clindamycin phosphate- tretinoin)	50
XOPENEX HFA (Use levalbuterol tartrate)	14	ZANAFLEX TABS 4 MG (Use tizanidine hcl)	72	zidovudine CAPS	41
XTANDI CAPS	35	ZANOSAR	34	zidovudine SYRP	41
XTANDI TABS 40 MG	35	ZARONTIN CAPS (Use ethosuximide)	18	zidovudine TABS	41
XTANDI TABS 80 MG	35	ZARONTIN SOLN (Use ethosuximide)	18	zileuton TB12	12
XULTOPHY	21	ZARXIO	64	ZIOPTAN (Use tafluprost)	75
XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML ..	26	ZEGERID CAPS 1100 MG-20 MG (Use omeprazole-sodium bicarbonate)	81	ziprasidone hcl	38
YASMIN 28 (Use drospirenone- ethinyl estradiol)	47	ZEGERID CAPS 1100 MG-40 MG (Use omeprazole-sodium bicarbonate)	81	ZIRGAN GEL	74
YAZ (Use drospirenone-ethinyl estradiol)	47	ZELBORAF	36	ZITHROMAX SUSR (Use azithromycin)	66
YCANTH SOLN	56	ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	59	ZITHROMAX TABS 250 MG (Use azithromycin)	66
YESINTEK 130 MG/26ML	62	ZEMPLAR SOLN (Use paricalcitol) 59		ZITHROMAX TABS 500 MG (Use azithromycin)	66
YESINTEK SOLN 45 MG/0.5ML ..	52	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-		ZITHROMAX TRI-PAK TABS (Use azithromycin)	65
YESINTEK SOSY 45 MG/0.5ML ..	52			ZITHROMAX Z-PAK TABS (Use azithromycin)	65
YESINTEK SOSY 90 MG/ML	52			ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin)	27
YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4			zoledronic acid SOLN 5 MG/100ML 58	
YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4				

ZOLINZA	36	olanzapine)	39
zolmitriptan SOLN	69	ZYPREXA ZYDIS TBDP 5 MG, 10	
zolmitriptan TABS	69	MG, 15 MG (Use olanzapine)	39
zolmitriptan TBDP	69	ZYRTEC ALLERGY TABS (Use	
ZOLOFT CONC (Use sertraline hcl)		cetirizine hcl)	26
19		ZYTIGA 250 MG (Use abiraterone	
ZOLOFT TABS (Use sertraline hcl)		acetate)	35
19		ZYTIGA 500 MG (Use abiraterone	
zolidem tartrate TABS	65	acetate)	35
zolidem tartrate TBCR	65	ZYVOX SUSR (Use linezolid)	32
ZOMIG SOLN (Use zolmitriptan) ..	69	ZYVOX TABS (Use linezolid)	32
ZONALON (Use doxepin hcl			
(antipruritic))	52		
ZONEGRAN CAPS 25 MG, 100 MG			
(Use zonisamide)	17		
zonisamide CAPS	18		
ZONTIVITY	63		
ZORTRESS 0.25 MG, 0.5 MG, 0.75			
MG (Use everolimus			
(immunosuppressant))	71		
ZORTRESS 1 MG (Use everolimus			
(immunosuppressant))	71		
ZOVIRAX OINT (Use acyclovir			
topical)	53		
ZYDELIG	36		
ZYLET 0.3 %-0.5 % (Use loteprednol			
etabonate-tobramycin)	74		
ZYPREXA SOLR (Use olanzapine)			
39			
ZYPREXA TABS 2.5 MG, 5 MG (Use			
olanzapine)	39		
ZYPREXA TABS 7.5 MG, 10 MG, 15			
MG, 20 MG (Use olanzapine)	39		
ZYPREXA ZYDIS TBDP 20 MG (Use			

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