



អង្គ ការ Neighborhood **INTEGRITY** (ផែនការ Medicare-Medicaid Plan)

រូបមន្តឆ្នាំ 2021៖ បញ្ជីថ្នាំដែលរ៉ាប់រង

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN
If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896, 8AM to 8PM, Monday – Friday; 8AM to 12PM on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. TTY/TDD: 711. For more information, visit www.nhpri.org/INTEGRITY. HPMS Approved Formulary File Submission ID: H9576. We have made no changes to this formulary since 08/2021.

គម្រោង Neighborhood INTEGRITY | បញ្ជីថ្នាំសំរាប់ឆ្នាំ២០២១ ដែលស្ថិតក្រោមការគ្រប់គ្រង (ទម្រង់)

សេចក្តីផ្តើម

ឯកសារនេះត្រូវបានគេហៅថា **បញ្ជីថ្នាំដែលមានការរ៉ាប់រង** (ត្រូវបានគេស្គាល់ផងដែរថាជាបញ្ជីថ្នាំ)។ វាប្រាប់អ្នកថាថ្នាំដែលមានវេជ្ជបញ្ជាមួយណា និងថ្នាំដែលមិនចាំបាច់ចេញវេជ្ជបញ្ជាដោយវេជ្ជបណ្ឌិត និងឧបករណ៍ដែលស្ថិតក្រោមការគ្រប់គ្រងដោយ Neighborhood INTEGRITY។ បញ្ជីថ្នាំគ្រប់អ្នកផងដែរថា ប្រសិនបើមានច្បាប់ពិសេសណាមួយ ឬការដាក់កម្រិតលើថ្នាំណាមួយដែលស្ថិតនៅក្រោមការគ្រប់គ្រងដោយគម្រោង Neighborhood INTEGRITY។ លក្ខខណ្ឌសំខាន់ៗនិងនិយមន័យរបស់ពួកគេ បានលេចឡើងក្នុងជំពូកមុននៃ *សៀវភៅណែនាំសមាជិក*។

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ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។ នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



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នេះជាបញ្ជីថ្នាំដែលសមាជិកអាចទទួល គម្រោង Neighborhood INTEGRITY.

- ❖ ផែនការរបស់ Neighborhood Health Plan នៃ Rhode Island គឺជាផែនការសុខភាពដែលចុះកិច្ចសន្យាជាមួយ Medicare និង Rhode Island Medicaid ដើម្បីផ្តល់អត្ថប្រយោជន៍នៃគម្ភវិធីទាំងពីរទៅអ្នកចុះឈ្មោះ។
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- ❖ អ្នកអាចពិនិត្យបញ្ជីថ្នាំដែលបានធ្វើបច្ចុប្បន្នភាពតាមប្រព័ន្ធអ៊ីនធឺណិតរបស់គម្រោង Neighborhood INTEGRITY តាមគេហទំព័រ www.nhpri.org/INTEGRITY.

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។ នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



- ❖ **ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call Member Services at 1-844-812-6896, 8 am to 8 pm, Monday - Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. Your call will be returned within the next business day. TTY users should call 711. The call is free.
- ❖ **ATENCIÓN:** Si usted habla español, servicios de asistencia con el idioma, de forma gratuita, están disponibles para usted. Llame a Servicios a los Miembros al 1-844-812-6896 (TTY 711), de 8 am a 8 pm, de lunes a viernes, de 8 am a 12 pm los sábados. En las tardes de los sábados, domingos y feriados, se le pedirá que deje un mensaje. Su llamada será devuelta dentro del siguiente día hábil. La llamada es gratuita.
- ❖ **ATENÇÃO:** Se você fala Português, o idioma, os serviços de assistência gratuita, estão disponíveis para você. Os serviços de chamada em 1-844-812-6896 TTY (711), 8 am a 8 pm, de segunda a sexta-feira; 8 am a 12 pm no sábado. Nas tardes de sábado, domingos e feriados, você pode ser convidado a deixar uma mensagem. A sua chamada será devolvido no próximo dia útil. A ligação é gratuita.
- ❖ សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ មានសេវាកម្មជំនួយផ្នែកភាសាដោយមិនគិតថ្លៃសម្រាប់អ្នក។ សូមទូរស័ព្ទទៅសេវាសមាជិកតាមរយៈលេខ 1-844-812-6896 (TTY 711) ចាប់ពីម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 យប់នៅថ្ងៃសៅរ៍។ នៅរៀងរាល់រសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យ និងថ្ងៃឈប់សម្រាក អ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការហៅរបស់អ្នកនឹងត្រូវបានគេហៅត្រឡប់មកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
- ❖ អ្នកអាចទទួលបានឯកសារនេះដោយឥតគិតថ្លៃក្នុងឬទម្រង់ផ្សេងៗ ដូចជាអក្សរពុម្ពធំ អក្សរសម្រាប់មនុស្សពិការភ្នែកឬជាសម្លេង។ សូមទូរស័ព្ទទៅសេវាសមាជិកតាមលេខ 1-844-812-6896 ពីម៉ោង 8 ព្រឹកដល់ម៉ោង 8 យប់ ថ្ងៃច័ន្ទដល់ថ្ងៃសុក្រពីម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។ នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ អ្នកប្រើ TTY គួរតែទូរស័ព្ទទៅ 711។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
- ❖ អ្នកអាចស្នើសុំឯកសារនេះនិងសម្ភារៈក្នុងពេលអនាគត ជាភាសាដែលអ្នកចង់បាននិង/ឬទម្រង់ជំនួសដោយទូរស័ព្ទទៅកាន់សេវាកម្មសមាជិក។ នេះត្រូវបានគេហៅថា "ការដាក់សំណើ"។ សេវាកម្មសមាជិកនឹងបញ្ជូនឯកសារការសំណើរបស់អ្នកទៅក្នុងកំណត់ត្រាសមាជិករបស់អ្នក ដូច្នេះអ្នកអាចទទួលបានឯកសារនិងក្នុងពេលអនាគតក្នុងភាសាដែលអ្នកចង់បាន និង/ឬទម្រង់ដែលអ្នកចង់បាន។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។ នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



អ្នកអាចផ្លាស់ប្តូរប្រលុបសំណើដែលបានដាក់ស្នើរបស់អ្នកនៅគ្រប់ពេលដោយទូរស័ព្ទទៅកាន់
សេវាកម្មសមាជិក។

B. សំណួរដែលគេតែងតែសួរ (Frequently Asked Questions, FAQ)

ស្វែងរកចម្លើយនៅទីនេះដើម្បីសួរអ្នកអំពីបញ្ជីឱសថដែលមានការរ៉ាប់រងនេះ។

អ្នកអាចសួរសំណួរដែលគេតែងតែសួរទាំងអស់ (Frequently Asked Questions, FAQ) ដើម្បីរៀនបន្ថែម
ឬស្វែងរកសំណួរនិងចម្លើយ។

B1. តើថ្នាំដែលមានវេជ្ជបញ្ជាក្នុង បញ្ជីឱសថដែលមានការរ៉ាប់រងជាអ្វី? (យើងហៅថា បញ្ជីឱសថដែលមានការរ៉ាប់រង ខ្លីៗហៅថា "បញ្ជីថ្នាំ")

ថ្នាំក្នុងបញ្ជីឱសថដែលមានការរ៉ាប់រងដែលចាប់ផ្តើមលើទំព័រ 1 គឺជាថ្នាំដែលបានគ្រប់គ្រងដោយគម្រោង
Neighborhood INTEGRITY។ ថ្នាំទាំងនេះគឺមាននៅក្នុងឱសថស្ថានក្នុងបណ្តាញរបស់យើង។
ឱសថស្ថានមួយគឺនៅក្នុងបណ្តាញរបស់ពួកយើង ប្រសិនបើយើងមានកិច្ចព្រមព្រៀងជាមួយពួកគេ
ដើម្បីធ្វើការជាមួយពួកគេនិងផ្តល់សេវាកម្មដល់អ្នក។ យើងសំដៅទៅឱសថស្ថានទាំងនេះដូចជា
"បណ្តាញឱសថស្ថាន"។

- គម្រោង Neighborhood INTEGRITY នឹងគ្របដណ្តប់ថ្លៃថ្នាំដែលចាំបាច់ទាំងអស់ក្នុងតារាងថ្នាំ
ប្រសិនបើ៖
 - វេជ្ជបណ្ឌិតរបស់អ្នកឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀតនិយាយថា
អ្នកត្រូវការពួកគេដើម្បីទទួលបានសុខភាពល្អ និង
 - អ្នកបំពេញវេជ្ជបញ្ជានៅតាមបណ្តាញឱសថស្ថានគម្រោង Neighborhood
INTEGRITY។
- គម្រោង Neighborhood INTEGRITY អាចមានជំហានបន្ថែមដើម្បីដំណើរការថ្នាំសំខាន់ៗ
(សូមមើលសំណួរ B4 ខាងក្រោម)។

អ្នកអាចឃើញបញ្ជីថ្នាំដែលបានធ្វើបច្ចុប្បន្នភាពផងដែរដែលយើងមាននៅក្នុងគេហទំព័ររបស់យើង
www.nhpri.org/INTEGRITY ឬទូរស័ព្ទ សេវាកម្មសមាជិក តាមលេខទូរស័ព្ទ 1-844-812-6896។

B2. តើបញ្ជីថ្នាំធ្លាប់ផ្លាស់ប្តូរទេ?

បាទ/ចាស និងគម្រោង Neighborhood INTEGRITY ត្រូវតែអនុវត្តតាមច្បាប់ Medicare និង Medicaid
នៅពេលធ្វើការផ្លាស់ប្តូរ។ យើងអាចបន្ថែមឬលុបចោលថ្នាំក្នុងបញ្ជីថ្នាំក្នុងកំឡុងពេលពេញមួយឆ្នាំ។

យើងអាចផ្លាស់ប្តូរច្បាប់ថ្នាំរបស់ពួកយើង។ ឧទាហរណ៍ យើងអាច៖

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-
6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



- សម្រេចដើម្បីតម្រូវឬមិនតម្រូវមុនពេលអនុម័តអំពីថ្នាំ។
(មុនពេលអនុម័តគឺជាការអនុញ្ញាតពី គម្រោង Neighborhood INTEGRITY
មុនពេលអ្នកអាចទទួលបានថ្នាំ)
- បន្ថែមឬផ្លាស់ប្តូរចំនួនថ្នាំដែលអ្នកអាចទទួល (បានហៅថាបរិមាណមានកំណត់)។
- បន្ថែមឬផ្លាស់ប្តូរថ្នាំតាមជំហានការព្យាបាលដែលមានកម្រិត។
(ការព្យាបាលតាមជំហានមានន័យថាអ្នកត្រូវតែព្យាយាមលើថ្នាំតែមួយមុខសិនមុនពេល
យើងនឹងប្រើថ្នាំផ្សេងទៀត។)

សម្រាប់ព័ត៌មានបន្ថែមអំពីច្បាប់ថ្នាំ សូមមើលសំណួរ B4។

ប្រសិនបើអ្នកលេបថ្នាំដែលបានគ្រប់ដណ្តប់នៅពេលចាប់ផ្តើមនៃឆ្នាំ
យើងនឹងមិនលុបឬផ្លាស់ប្តូរការគ្របដណ្តប់ថ្នាំក្នុងកំឡុងពេលឆ្នាំនេះលើកលែងតែ៖

- ព័ត៌មានមួយ ថ្នាំថោកជាងនៅលើទីផ្សារដែលមានប្រសិទ្ធភាពដូចគ្នានឹងថ្នាំក្នុងបញ្ជីថ្នាំ ឬ
- យើងរកឃើញថាថ្នាំមិនមានសុវត្ថិភាព ឬ
- ថ្នាំមួយត្រូវបានលុបពីទីផ្សារ។

សំណួរ B3 និង B6 ខាងក្រោម មានព័ត៌មានបន្ថែមអំពីអ្វីដែលបានកើតឡើង
នៅពេលបញ្ជីថ្នាំបានផ្លាស់ប្តូរ។

- អ្នកអាចពិនិត្យបញ្ជីថ្នាំដែលបានធ្វើបច្ចុប្បន្នភាពរបស់គម្រោង Neighborhood
INTEGRITY តាមគេហទំព័រ www.nhpri.org/INTEGRITY។
- អ្នកអាចទូរស័ព្ទផងដែរទៅកាន់ សេវាកម្មសមាជិក
ដើម្បីពិនិត្យបញ្ជីថ្នាំថ្មីតាមលេខទូរស័ព្ទ
1-844-812-6896 (TTY 711)។

B3. តើមានអ្វីកើតឡើងនៅពេលធ្វើការផ្លាស់ប្តូរបញ្ជីថ្នាំ?

បញ្ជីថ្នាំនឹងមានការផ្លាស់ប្តូរមួយចំនួននឹងកើតឡើងភ្លាមៗ។ ឧទាហរណ៍៖

- **ថ្នាំថ្មីទៅទីកន្លែងដែលបានប្រើប្រាស់បាន។** ជួនកាលថ្នាំថ្មីទៅទីកន្លែងមាន នៅលើទីផ្សារ
ដែលមានប្រសិទ្ធភាពដូចម៉ាកថ្នាំក្នុងបញ្ជីថ្នាំដែរ។ នៅពេលវាកើតឡើងនោះ
យើងអាចលុបម៉ាកឈ្មោះថ្នាំនិងបន្ថែមថ្នាំថ្មីទៅប៉ុន្តែតម្លៃថ្នាំថ្មីនៅតែដដែល។
នៅពេលយើងបន្ថែមថ្នាំទៅថ្មី យើងអាចសម្រេចចិត្តដើម្បីរក្សាទុកម៉ាកឈ្មោះថ្នាំលើបញ្ជី
ផងដែរ ប៉ុន្តែការផ្លាស់ប្តូរស្ថិតក្រោមការគ្របដណ្តប់របស់ច្បាប់ឬការកំណត់។
 - យើងមិនអាចប្រាប់អ្នកមុនពេលយើងធ្វើការផ្លាស់ប្តូរនេះទេ
ប៉ុន្តែយើងនឹងជឿជាក់ថាមានអំពីការផ្លាស់ប្តូរជាក់លាក់ដែលយើងបានផ្លាស់ប្តូរទៅអ្នក។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-
6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



- អ្នកឬអ្នកផ្តល់សេវាកម្មអាចស្នើសុំសម្រាប់ការលើកលែងពីការផ្លាស់ប្តូរទាំងនេះ។
យើងនឹងផ្ញើសេចក្តីជូនដំណឹងអំពីដំណាក់កាលដែលអ្នកស្នើសុំសម្រាប់ការលើកលែង។
សូមមើលសំណួរ B10 សម្រាប់ព័ត៌មានបន្ថែមអំពីការលើកលែង។

- **ថ្នាំមួយត្រូវបានយកចេញពីទីផ្សារ។** ប្រសិនបើរដ្ឋបាលចំណីអាហារនិងឱសថ (Food and Drug Administration, FDA) ផ្ដាច់ការណ៍
ថ្នាំមួយអ្នកកំពុងលេបគឺមិនមានសុវត្ថិភាពឬរោងចក្រផលិតថ្នាំមិនផលិត
យើងនឹងដកវាចេញពីបញ្ជី។ ប្រសិនបើអ្នកកំពុងប្រើថ្នាំយើងនឹងប្រាប់អ្នកឱ្យដឹង។
យើងនឹងផ្ញើសំបុត្រទៅអ្នកហើយសំបុត្រនឹងផ្តល់ការទូន្មានអ្នកពី
របៀបអនុវត្តតាមអ្នកផ្តល់សេវាកម្មនិងឱសថការីរបស់អ្នក។

យើងអាចធ្វើការផ្លាស់ប្តូរផ្សេងៗដែលប៉ះពាល់ដល់ថ្នាំដែលអ្នកប្រើប្រាស់។

យើងនឹងប្រាប់អ្នកមុនអំពីការផ្លាស់ប្តូរផ្សេងៗអំពីបញ្ជីថ្នាំ។ ការផ្លាស់ប្តូរនេះអាចកើតឡើងប្រសិនបើ៖

- រដ្ឋបាលចំណីអាហារនិងឱសថ (Food and Drug Administration, FDA)
ផ្តល់ការណែនាំថ្មីឬមានការណែនាំថ្មីអំពីថ្នាំ។
- យើងបន្ថែមថ្នាំទូទៅដែលមិនមែនជាថ្នាំថ្មីនៅលើទីផ្សារនិង
 - ជំនួសឈ្មោះម៉ាកថ្នាំថ្មីលើបញ្ជីថ្នាំ ឬ
 - ប្តូរការគ្របដណ្តប់ច្បាប់ឬការកំណត់សម្រាប់ឈ្មោះម៉ាកថ្នាំ។

នៅពេលការផ្លាស់ប្តូរទាំងនេះបានកើតឡើង យើងនឹង៖

- ប្រាប់អ្នកយ៉ាងហោចណាស់ 30 ថ្ងៃមុនពេលយើងធ្វើការផ្លាស់ប្តូរបញ្ជីថ្នាំ ឬ
- ជូនដំណឹងអោយអ្នកដឹងនិងផ្គត់ផ្គង់ថ្នាំអោយអ្នករយៈពេល 30
ថ្ងៃបន្ទាប់បានស្នើសុំបំពេញ។

នេះនឹងផ្តល់ពេលវេលាឱ្យអ្នកដើម្បីនិយាយជាមួយវេជ្ជបណ្ឌិតឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀត។
គាត់ឬនាងអាចជួយអ្នកសម្រេចចិត្ត៖

- ប្រសិនបើមានថ្នាំដែលស្រដៀងនឹងថ្នាំក្នុងបញ្ជីថ្នាំ អ្នកអាចយកជំនួស ឬ
- ថា កើតឡើងស្នើសុំការលើកលែងពីការផ្លាស់ប្តូរទាំងនេះ។ ដើម្បីរៀនបន្ថែមអំពីការលើកលែង
សូមមើលសំណួរ B10។

B4. តើមានការដាក់កម្រិតឬការកំណត់ថ្នាំណាខ្លះ

ដែលគ្របដណ្តប់ឬតម្រូវសកម្មភាពណាមួយដើម្បីទទួលបានថ្នាំដែរឬទេ?

ពិតមែនហើយ ថ្នាំខ្លះមានច្បាប់គ្របដណ្តប់ឬមានកម្រិតលើចំនួនដែលអ្នកអាចទទួលបាន។
ក្នុងករណីមួយចំនួន អ្នកឬវេជ្ជបណ្ឌិតមួយចំនួនឬអ្នកចេញវេជ្ជបញ្ជាដទៃទៀតត្រូវតែធ្វើអ្វីមួយមុនពេល
អ្នកទទួលបានថ្នាំ។ ឧទាហរណ៍៖

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-
6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



- **ការអនុម័តជាមុន (ឬការអនុញ្ញាតជាមុន)៖** សម្រាប់ថ្នាំមួយចំនួន អ្នកឬវេជ្ជបណ្ឌិតរបស់អ្នកឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀតត្រូវតែទទួលការយល់ព្រមពី គម្រោង Neighborhood INTEGRITY មុនពេលអ្នកបំពេញវេជ្ជបញ្ជារបស់អ្នក។ គម្រោង Neighborhood INTEGRITY អាចមិនគ្របដណ្តប់ថ្នាំប្រសិនបើអ្នកមិនទទួលការយល់ព្រម។
- **បរិមាណមានកំណត់៖** ពេលខ្លះគម្រោង Neighborhood INTEGRITY កំណត់ចំនួនថ្នាំដែលអ្នកអាចទទួលបាន។
- **ការព្យាបាលជាជំហានៗ ៖** ពេលខ្លះគម្រោង Neighborhood INTEGRITY តម្រូវឱ្យអ្នកធ្វើការព្យាបាលជាជំហានៗ។ នេះមានន័យថាអ្នកនឹងត្រូវតែសាកល្បង ថ្នាំតាមលំដាប់ដោយជាក់លាក់មួយសម្រាប់ស្ថានភាពសុខភាពរបស់អ្នក។ អ្នកអាចត្រូវសាកល្បងប្រើថ្នាំមួយមុនពេលដែលយើងនឹងប្រើប្រាស់ថ្នាំមួយផ្សេងទៀត។ ប្រសិនបើវេជ្ជបណ្ឌិតគិតថាថ្នាំទីមួយមិនមានប្រសិទ្ធភាពសម្រាប់អ្នក នោះយើងនឹងប្រើថ្នាំទីពីរ។

អ្នកអាចស្វែងរក ប្រសិនបើថ្នាំរបស់អ្នកមានកំរិតការប្តូរការកំណត់បន្ថែម ដោយរកមើលក្នុងតារាងនៅលើទំព័រទី 1-154។
អ្នកក៏អាចទទួលបានព័ត៌មានបន្ថែមដោយចូលទៅគេហទំព័ររបស់យើង www.nhpri.org/INTEGRITY
អ្នកក៏អាចស្នើសុំឱ្យយើងផ្ញើច្បាប់ចម្លងឱ្យអ្នកផងដែរ។

អ្នកអាចស្នើសុំការលើកលែងពីការកំណត់ទាំងនេះ។
នេះនឹងផ្តល់ពេលវេលាឱ្យអ្នកដើម្បីនិយាយជាមួយវេជ្ជបណ្ឌិតឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀត។
គាត់ឬនាងអាចជួយអ្នកក្នុងការសម្រេចចិត្ត
ប្រសិនបើមានថ្នាំស្រដៀងគ្នានៅក្នុងបញ្ជីថ្នាំដែលអ្នកអាចយកជំនួសបាន
ឬជាត្រូវស្នើសុំលើកលែងដែរឬទេ។ សូមមើលសំណួរ B10-B12
សម្រាប់ព័ត៌មានបន្ថែមអំពីការលើកលែង។

**B5. តើអ្នកនឹងដឹងដោយរបៀបណាប្រសិនបើថ្នាំដែលអ្នកចង់បាន
មានកំណត់ឬប្រសិនបើមានសកម្មភាពចាំបាច់ដើម្បីទទួលបានថ្នាំ?**

បញ្ជីឱសថដែលមានការរ៉ាប់រង នៅលើទំព័រ 1 មានជួរឈរដែលបានដាក់ស្លាក "Necessary actions, restrictions, or limits on use" ("សកម្មភាពចាំបាច់ការដាក់កម្រិតឬការកំណត់លើការប្រើប្រាស់")។

**B6. តើមានអ្វីកើតឡើងប្រសិនបើយើងផ្លាស់ប្តូរច្បាប់របស់យើងអំពីថ្នាំមួយចំនួន
(ឧទាហរណ៍ ការអនុញ្ញាតជាមុន (ការអនុម័ត) ចំនួនមានកំណត់និង /
ឬការដាក់កម្រិតការព្យាបាលជាជំហានៗ)?**

ក្នុងករណីមួយចំនួន យើងនឹងប្រាប់អ្នកជាមុន ប្រសិនបើយើងបន្ថែមឬផ្លាស់ប្តូរការអនុម័តជាមុន ចំនួនមានកំណត់និង / ឬការដាក់កម្រិតការព្យាបាលជាជំហានៗដោយប្រើថ្នាំ។ សូមមើលសំណួរ B3 សម្រាប់ព័ត៌មានបន្ថែមអំពីការជូនដំណឹងជាមុននេះ
និងស្ថានភាពដែលយើងមិនអាចមានលទ្ធភាពប្រាប់អ្នកទុកជាមុន
នៅពេលច្បាប់ថ្មីរបស់យើងនៅក្នុងបញ្ជីការផ្លាស់ប្តូរថ្នាំ។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



B7. តើអ្នកអាចស្វែងរកថ្នាំក្នុងបញ្ជីថ្នាំបានដោយរបៀបណា?

មានវិធីពីរយ៉ាងដើម្បីស្វែងរកថ្នាំ៖

- អ្នកអាចស្វែងតាមតួអក្សរ(ប្រសិនបើអ្នកដឹងពីការប្រកបអ្វីឈ្មោះថ្នាំ) ឬ
- អ្នកអាចស្វែងរកដោយប្រើលក្ខខណ្ឌវេជ្ជសាស្ត្រ។

ដើម្បីស្វែងរកតាមតួអក្សរ ចូលទៅផ្នែកលិបិក្រមឱសថដែលមានការរាប់រង។ អ្នកអាចស្វែងរក លើទំព័រ 155។

ដើម្បីស្វែងរកដោយប្រើលក្ខខណ្ឌវេជ្ជសាស្ត្រ រកផ្នែកមានដាក់ស្លាក "List of drugs by medical condition" ("បញ្ជីថ្នាំដោយលក្ខខណ្ឌវេជ្ជសាស្ត្រ") លើទំព័រ 1។
ថ្នាំក្នុងផ្នែកនេះគឺត្រូវបានធ្វើជាក្រុមក្នុងប្រភេទដោយផ្អែកលើប្រភេទលក្ខខណ្ឌថ្នាំដែលពួកវាត្រូវបានប្រើដើម្បីព្យាបាល។ ឧទាហរណ៍ ប្រសិនបើអ្នកមានបញ្ហាបេះដូង អ្នកគួរតែមើលទៅក្នុងប្រភេទ Cardiovascular (សរសៃឈាមបេះដូង)។
នោះគឺជាកន្លែងដែលអ្នកនឹងស្វែងរកថ្នាំដែលព្យាបាលបញ្ហាបេះដូង។

B8. តើនឹងមានអ្វីកើតឡើង ប្រសិនបើថ្នាំដែលអ្នកចង់ប្រើមិនមាននៅក្នុងបញ្ជីថ្នាំ?

ប្រសិនបើអ្នកមិនឃើញថ្នាំរបស់អ្នកក្នុងបញ្ជីថ្នាំ សូមទូរស័ព្ទទៅ សេវាកម្មសមាជិក តាមលេខ 1-844-812-6896 និងសួរពីវា។ ប្រសិនបើអ្នករកឃើញថាគម្រោង Neighborhood INTEGRITY នឹងមិនគ្របដណ្តប់ថ្នាំអ្នកអាចធ្វើរឿងមួយក្នុងចំណោមរឿងទាំងនេះ៖

- សួរ សេវាកម្មសមាជិក សម្រាប់បញ្ជីថ្នាំមួយដូចថ្នាំមួយដែលអ្នកចង់ប្រើ។
បន្ទាប់មកបង្ហាញបញ្ជីថ្នាំទៅកាន់វេជ្ជបណ្ឌិតឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀត។ គាត់ឬនាងអាចចេញវេជ្ជបញ្ជាថ្នាំមួយនៅក្នុងបញ្ជីថ្នាំដែលដូចនឹងថ្នាំមួយដែលអ្នកចង់ប្រើ។ ឬ
- អ្នកអាចស្នើសុំផែនការសុខភាពដើម្បីធ្វើការលើកលែងមួយដើម្បីគ្រប់គ្រងថ្នាំរបស់អ្នក។
សូមមើលសំណួរ B10-B12 សម្រាប់ព័ត៌មានបន្ថែមអំពីការលើកលែង។

B9. តើនឹងមានអ្វីកើតឡើង ប្រសិនបើអ្នកជាសមាជិកថ្មី របស់គម្រោង Neighborhood INTEGRITY នឹងមិនអាចស្វែងរកថ្នាំរបស់អ្នកក្នុងបញ្ជីថ្នាំឬមានបញ្ហាក្នុងការទទួលថ្នាំ?

យើងអាចជួយ។ យើងនឹងគ្រប់គ្រងផ្គត់ផ្គង់ថ្នាំរបស់អ្នកបណ្តោះអាសន្ន 30-ថ្ងៃនៅផ្នែក D ឬ 90-ថ្ងៃផ្គត់ផ្គង់ ការគ្រប់គ្រងថ្នាំរបស់អ្នកនៅ Rhode Island Medicaid រយៈពេល 90 ថ្ងៃតំបូង អ្នកគឺជា សមាជិកនៃគម្រោង Neighborhood INTEGRITY។

នេះនឹងផ្តល់ពេលវេលាឱ្យអ្នកដើម្បីនិយាយជាមួយវេជ្ជបណ្ឌិតឬអ្នកចេញវេជ្ជបញ្ជាផ្សេងទៀត។

គាត់ឬនាងអាចជួយអ្នកក្នុងការសម្រេចចិត្ត

ប្រសិនបើមានថ្នាំស្រដៀងគ្នានៅក្នុងបញ្ជីថ្នាំដែលអ្នកអាចយកជំនួសបាន

ឬថាតើត្រូវស្នើសុំលើកលែងដែរឬទេ។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។

នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។

ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



ប្រសិនបើវេជ្ជបញ្ជារបស់អ្នកត្រូវបានគេសរសេរក្នុងរយៈពេលតិចជាងនេះ
យើងនឹងអនុញ្ញាតឱ្យមានការបំពេញច្រើនដងរហូតដល់អតិបរមានៃថ្នាំ 30 ថ្ងៃ។

យើងនឹងផ្គត់ផ្គង់ការគ្រប់គ្រងថ្នាំរយៈពេល 30ថ្ងៃនៅ ផ្នែក D ឬ 90-ថ្ងៃ ផ្គត់ផ្គង់
ការគ្រប់គ្រងថ្នាំរបស់អ្នកនៅ Rhode Island Medicaid ប្រសិនបើ៖

- អ្នកកំពុងប្រើថ្នាំមួយដែលមិនមាននៅក្នុងបញ្ជីថ្នាំរបស់យើង ឬ
- ច្បាប់ផែនការសុខភាពមិនអនុញ្ញាតឱ្យអ្នកទទួលបានចំនួនទឹកប្រាក់ដែលបានដាក់បញ្ជា
ដោយអ្នកចេញវេជ្ជបញ្ជារបស់អ្នក ឬ
- ថ្នាំត្រូវឱ្យមានការយល់ព្រមជាមុនដោយគម្រោង Neighborhood INTEGRITY ឬ
- អ្នកកំពុងប្រើថ្នាំមួយដែលជាផ្នែកនៃការដាក់កម្រិតការព្យាបាលដោយជំហាន។

ប្រសិនបើអ្នកនៅក្នុងមណ្ឌលថែទាំមួយឬកន្លែងថែទាំរយៈពេលវែងផ្សេងទៀត
ហើយត្រូវការថ្នាំមួយដែលមិនមាននៅក្នុងបញ្ជីថ្នាំឬប្រសិនបើអ្នកមិនអាចទទួលបានថ្នាំដែលអ្នកត្រូវការ
យ៉ាងងាយស្រួលទេ យើងអាចជួយបាន។ ប្រសិនបើអ្នកបានស្ថិតនៅក្នុងផែនការច្រើនជាង 90 ថ្ងៃ
រស់នៅក្នុងកន្លែងថែទាំរយៈពេលវែង និងត្រូវការការផ្គត់ផ្គង់ភ្លាមៗ៖

- អ្នកនឹងគ្រប់គ្រងការផ្គត់ផ្គង់ថ្នាំមួយរយៈពេល 31ថ្ងៃ អ្នកត្រូវការ
(លុះត្រាតែអ្នកមានវេជ្ជបញ្ជាមួយរយៈពេលតិចជាងនេះ)
ថា តើអ្នកជាសមាជិកថ្មីនៃគម្រោង Neighborhood INTEGRITY។
- នេះគឺជាការបន្ថែមទៅនឹងការផ្គត់ផ្គង់បណ្តោះអាសន្នក្នុងអំឡុងពេល 90
ថ្ងៃដំបូងដែលអ្នកជាសមាជិកនៃគម្រោង Neighborhood INTEGRITY។

ប្រសិនបើកម្រិតនៃការថែទាំរបស់អ្នកផ្លាស់ប្តូរហើយអ្នកត្រូវការការផ្គត់ផ្គង់បន្ទាន់ៗ៖

- យើងនឹងគ្រប់គ្រងការផ្គត់ផ្គង់ថ្នាំរយៈពេល 31 ថ្ងៃ
ដែលអ្នកត្រូវការប្រសិនបើអ្នករស់នៅមណ្ឌលថែទាំរយៈពេលយូរឬ
- យើងនឹងគ្រប់គ្រងការផ្គត់ផ្គង់ថ្នាំរយៈពេល 30 ថ្ងៃ
ដែលអ្នកត្រូវការប្រសិនបើអ្នកមិនរស់នៅមណ្ឌលថែទាំរយៈពេលយូរឬ

B10. តើអ្នកអាចស្នើសុំការលើកលែងដើម្បីរ៉ាប់រងថ្នាំរបស់អ្នកទេ?

ពិតមែនហើយ។ អ្នកអាចស្នើសុំឱ្យគម្រោង Neighborhood INTEGRITY
ធ្វើការលើកលែងមួយលើការរ៉ាប់រងលើថ្នាំដែលមិនមាននៅក្នុងបញ្ជីថ្នាំ។

អ្នកក៏អាចស្នើសុំឱ្យយើងផ្លាស់ប្តូរច្បាប់ស្តីពីថ្នាំរបស់អ្នក។

- ឧទាហរណ៍ គម្រោង Neighborhood INTEGRITY
អាចកំណត់ចំនួនថ្នាំដែលយើងនឹងរ៉ាប់រង។ ប្រសិនបើថ្នាំរបស់អ្នកមានកំរិត
អ្នកអាចស្នើសុំយើងដើម្បីផ្លាស់ប្តូរការកំណត់និងការគ្រប់គ្រងបន្ថែមទៀត។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-
6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។



សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។

- ឧទាហរណ៍ផ្សេងទៀត៖ អ្នកអាចស្នើសុំយើងឲ្យបោះបង់ការរឹតបន្តឹងការព្យាបាលជាជំហានៗ ឬកម្រិតការអនុម័តជាមុន។

B11. តើអ្នកអាចស្នើសុំការលើកលែងមួយដោយយ៉ាងដូចម្តេច?

ដើម្បីស្នើសុំការលើកលែង សូមទូរស័ព្ទទៅ សេវាកម្មសមាជិក។ សេវាកម្មសមាជិក នឹងធ្វើការជាមួយអ្នកនិង អ្នកផ្តល់សេវាកម្មរបស់អ្នកដើម្បីជួយអ្នកស្នើសុំការលើកលែង។ អ្នកក៏អាចអានជំពូកទី 9 នៃ សៀវភៅណែនាំសមាជិក ដើម្បីរៀនបន្ថែមអំពីការលើកលែង។

B12. តើរយៈពេលយូរប៉ុន្មានក្នុងការទទួលបានការលើកលែង?

ដំបូងយើងត្រូវតែទទួលសេចក្តីថ្លែងការណ៍មួយពីអ្នកចេញវេជ្ជបញ្ជារបស់អ្នក ដែលគាំទ្រសំណើរបស់អ្នកសម្រាប់ការលើកលែង។ បន្ទាប់ពីយើងទទួលបានសេចក្តីថ្លែងការណ៍ យើងនឹងផ្តល់ឲ្យអ្នកធ្វើការសម្រេចចិត្តលើសំណើសុំលើកលែងរបស់អ្នកក្នុងរយៈពេល 72 ម៉ោង។

ប្រសិនបើអ្នកឬអ្នកចេញវេជ្ជបញ្ជារបស់អ្នកគិតថា សុខភាពរបស់អ្នកអាចមានគ្រោះថ្នាក់ ប្រសិនបើអ្នកត្រូវរង់ចាំ 72 ម៉ោងសម្រាប់ការសម្រេចចិត្ត អ្នកអាចស្នើសុំការលើកលែងជាបន្ទាន់មួយ។ នេះគឺជាការសម្រេចចិត្តដ៏លឿន។ ប្រសិនបើអ្នកចេញវេជ្ជបញ្ជារបស់អ្នកគាំទ្រសំណើរបស់អ្នក យើងនឹងឲ្យអ្នកធ្វើការសម្រេចចិត្តក្នុងរយៈពេល 24 ម៉ោងនៃសេចក្តីថ្លែងការណ៍គាំទ្ររបស់អ្នកចេញវេជ្ជបញ្ជារបស់អ្នក។

B13. តើថ្នាំទូទៅជាអ្វី?

ថ្នាំទូទៅត្រូវបានបង្កើតពីគ្រឿងផ្សំសកម្មដូចគ្នានឹងឈ្មោះថ្នាំដែលមានយីហោ។ ជាទូទៅពួកគេចំណាយតិចជាងឈ្មោះថ្នាំដែលមានយីហោ ហើយជាធម្មតាមិនមានឈ្មោះល្បីទេ។ ថ្នាំទូទៅគឺអនុម័តដោយរដ្ឋបាលចំណីអាហារនិងឱសថ (Food and Drug Administration, FDA)។ គម្រោង Neighborhood INTEGRITY រ៉ាប់រងទាំងថ្នាំទូទៅនិងថ្នាំដែលមានយីហោ។

B14. តើ OTC ជាអ្វី?

OTC គឺ "ថ្នាំមិនដែលអាចរកទិញបានដោយមិនមានវេជ្ជបញ្ជា" គម្រោង Neighborhood INTEGRITY រ៉ាប់រងលើថ្នាំដែលគ្មានវេជ្ជបញ្ជា (over-the-counter, OTC) មួយចំនួន នៅពេលពួកគេត្រូវបានសរសេរជាវេជ្ជបញ្ជាដោយអ្នកផ្តល់សេវារបស់អ្នក។

អ្នកអាចអានពីគម្រោង Neighborhood INTEGRITY បញ្ជីថ្នាំដើម្បីមើលថាថ្នាំមិនមានវេជ្ជបញ្ជា (over-the-counter, OTC) ណាខ្លះដែលមិនត្រូវបានរ៉ាប់រង។

B15. តើការទូទាត់ប្រាក់របស់អ្នកគឺជាអ្វី?

ក្នុងនាមជាសមាជិកនៃគម្រោង Neighborhood INTEGRITY អ្នកមិនមានការបង់ប្រាក់សម្រាប់ការចេញវេជ្ជបញ្ជានិងថ្នាំដែលគ្មានវេជ្ជបញ្ជាទេ (over-the-counter, OTC) ដរាបណាអ្នកធ្វើតាមច្បាប់របស់គម្រោង Neighborhood INTEGRITY។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។ នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។ ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។ សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



B16. ថ្នាំកំណត់ជាអ្វី?

ថ្នាំកំណត់ជាក្រុមថ្នាំក្នុងបញ្ជីថ្នាំ។

- ថ្នាំកំណត់ទី 1 ជាថ្នាំទូទៅ។
- ថ្នាំកំណត់ទី 2 ជាថ្នាំដែលមានយីហោ។
- ថ្នាំកំណត់ទី 3 ជាថ្នាំដែលលក់បានដោយមិនមានវេជ្ជបញ្ជា។

ផ្សេងទៀតអស់មិនមានការទូទាត់ប្រាក់ទេ។

C. ទិន្នភាពទូទៅនៃបញ្ជីឱសថដែលមានការរ៉ាប់រង

បញ្ជីឱសថដែលមានការធានារ៉ាប់រងផ្តល់ព័ត៌មានឱ្យអ្នកអំពីថ្នាំដែលរ៉ាប់រងដោយ គម្រោង Neighborhood INTEGRITY។ ប្រសិនបើអ្នកមានបញ្ហាក្នុងការស្វែងរកថ្នាំរបស់អ្នកនៅក្នុងបញ្ជី សូមចូលទៅ Index of Covered Drugs ដែលចាប់ផ្តើមលើទំព័រ 155។ លិបិក្រមរាយបញ្ជីឱសថដែលមានការរ៉ាប់រងទាំងអស់ពី Neighborhood INTEGRITYតាមក្នុងអក្សរ។

ចំណាំ: DP នៅជាប់ថ្នាំមួយមានន័យថាថ្នាំគឺមិនមែន "ថ្នាំផ្នែក D។"

ចំនួនទឹកប្រាក់ដែលអ្នកត្រូវចំណាយពេលអ្នកបំពេញវេជ្ជបញ្ជាសម្រាប់ថ្នាំនេះ

មិនរាប់បញ្ចូលតម្លៃថ្នាំទាំងអស់របស់អ្នកទេ (នោះគឺជាចំនួនទឹកប្រាក់ដែលអ្នកបង់

មិនបានជួយអ្នកមានលក្ខណៈគ្រប់គ្រាន់ក្នុងការទទួលបានការធានារ៉ាប់រងមហន្តរាយទេ)។

- ក្រៅពីនេះទៀតប្រសិនបើអ្នកកំពុងទទួលបានជំនួយបន្ថែមដើម្បីជំនួយលើការចេញវេជ្ជបញ្ជារបស់អ្នក អ្នកនឹងមិនទទួលបានជំនួយបន្ថែមណាមួយដើម្បីជំនួយសម្រាប់ថ្នាំទាំងនេះទេ។ សម្រាប់ព័ត៌មានបន្ថែមលើជំនួយបន្ថែម សូមមើលប្រអប់ហៅចេញ ខាងក្រោម។

ជំនួយបន្ថែម គឺជាកម្មវិធី Medicare

មួយដែលជួយមនុស្សដែលមានប្រាក់ចំណូលនិងធនធានមានកំណត់

កាត់បន្ថយថ្លៃថ្នាំតាមវេជ្ជបញ្ជា Medicare ផ្នែក D ដូចជាតម្លៃអតិបរមា

ការបន្ថែមនិងការបង់ថ្លៃ។ ជំនួយបន្ថែមត្រូវបានគេហៅផងដែរថា "ការឧបត្ថម្ភ

ប្រាក់សម្រាប់អ្នកចំណូលទាប" ឬ "LIS"។

- ថ្នាំទាំងនេះក៏មានច្បាប់ផ្សេងគ្នាផងដែរ សម្រាប់ការប្តឹងឧទ្ធរណ៍។ បញ្ជីឧទ្ធរណ៍គឺជាវិធីផ្តល់ការនៃការស្នើសុំពួកយើងឱ្យពិនិត្យមើលការសម្រេចចិត្តលើការរ៉ាប់រងហើយដើម្បីផ្លាស់ប្តូរប្រសិនបើអ្នកគិតថាយើងបានធ្វើកំហុសមួយ។ ឧទាហរណ៍

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។

នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។

ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



យើងអាចសម្រេចចិត្តថាថ្នាំដែលអ្នកចង់បាន
មិនត្រូវបានរ៉ាប់រងឬមិនមានការរ៉ាប់រងទៀតទេដោយ Medicare ឬ Rhode Island
Medicaid។

- ប្រសិនបើអ្នកឬវេជ្ជបណ្ឌិតមិនយល់ស្របនឹងការសម្រេចចិត្តរបស់យើង
អ្នកអាចធ្វើការប្តឹងឧទ្ធរណ៍បាន។ ដើម្បីស្នើសុំការណែនាំអំពីរបៀបប្តឹងឧទ្ធរណ៍
សូមទូរស័ព្ទទៅ សេវាកម្មសមាជិក តាមលេខ 1-844-812-6896 TTY 711។
អ្នកក៏អាចអានជំពូកទី 9 នៃសៀវភៅណែនាំសមាជិក
ដើម្បីរៀនពីវិធីសម្រេចចិត្តប្តឹងឧទ្ធរណ៍។

C1. ថ្នាំត្រូវបានដាក់ជាក្រុមតាមលក្ខខណ្ឌវេជ្ជសាស្ត្រ

ថ្នាំក្នុងផ្នែកនេះគឺត្រូវបានធ្វើជាក្រុមក្នុងប្រភេទដោយផ្អែកលើប្រភេទលក្ខខណ្ឌថ្នាំ
ដែលពួកវាត្រូវបានប្រើដើម្បីព្យាបាល។ ឧទាហរណ៍ ប្រសិនបើអ្នកមានបញ្ហាបេះដូង
អ្នកគួរតែមើលទៅក្នុងប្រភេទ Cardiovascular (សរសៃឈាមបេះដូង)។
នោះគឺជាកន្លែងដែលអ្នកនឹងស្វែងរកថ្នាំដែលព្យាបាលបញ្ហាបេះដូង។

នេះគឺជាអត្ថន័យនៃលេខកូដដែលបានប្រើនៅក្នុង "Necessary actions, restrictions, or limits on use"
("សកម្មភាពចាំបាច់ ការដាក់កម្រិត ឬការកំណត់លើការប្រើ") ដូចខាងក្រោម៖

B/D = ថ្នាំដែលមានវេជ្ជបញ្ជានេះមានការចាត់ចែងផ្នែក B ធៀបនឹងនឹង D ត្រូវការការអនុញ្ញាតជាមុន។
ថ្នាំនេះអាចត្រូវបានរ៉ាប់រងក្រោម Medicare ផ្នែក B ឬ D អាស្រ័យលើស្ថានភាព។
ព័ត៌មានអាចត្រូវការដាក់ជូនដោយពិពណ៌នាពីការប្រើប្រាស់និងការកំណត់ថ្នាំដើម្បីធ្វើការកំណត់។

DP = ថ្នាំនេះមិនមែនជាថ្នាំ ផ្នែក D ទេ។

QL = ចំនួនមានកំណត់។ ចំពោះថ្នាំសំខាន់ៗ គម្រោង Neighborhood INTEGRITY
កំណត់ចំនួននៃថ្នាំដែលគម្រោង Neighborhood INTEGRITY នឹងរ៉ាប់រង។

ST = ការព្យាបាលជាជំហានៗ។ ក្នុងករណីមួយចំនួនគម្រោង Neighborhood INTEGRITY
ដំបូងតម្រូវឱ្យអ្នកសាកល្បងប្រើថ្នាំជាក់លាក់ដើម្បីព្យាបាលស្ថានភាពវិជ្ជសាស្ត្ររបស់អ្នក
មុនពេលដែលយើងនឹងចំណាយលើថ្នាំផ្សេងទៀតសម្រាប់ស្ថានភាពរបស់អ្នក។ ឧទាហរណ៍ ប្រសិនបើថ្នាំ A
និងថ្នាំ B ទាំងពីរព្យាបាលស្ថានភាពវិជ្ជសាស្ត្ររបស់អ្នកគម្រោង Neighborhood INTEGRITY
នឹងមិនមាននៅក្នុងថ្នាំ B ទេ លើកលែងតែអ្នកព្យាយាមប្រើថ្នាំ A មុន។ ប្រសិនបើថ្នាំ A
មិនមានប្រសិទ្ធភាពសម្រាប់អ្នក គម្រោង Neighborhood INTEGRITY នឹងរ៉ាប់រងថ្នាំ B។

PA = ការអនុញ្ញាតជាមុន។ គម្រោង Neighborhood INTEGRITY
តម្រូវឱ្យអ្នកឬវេជ្ជបណ្ឌិតរបស់អ្នកទទួលបានការអនុញ្ញាតមុនសម្រាប់ថ្នាំដែលជាក់លាក់។
នេះមានន័យថាអ្នកត្រូវការទទួលបានការអនុម័តពី Neighborhood INTEGRITY

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-
6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។
នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។
ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។
សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



មុនពេលអ្នកបំពេញវេជ្ជបញ្ជារបស់អ្នក។ ប្រសិនបើអ្នកមិនទទួលបានការអនុម័តទេ គម្រោង Neighborhood INTEGRITY មិនអាចរ៉ាប់រងថ្នាំបានទេ។

NDS = ការផ្គត់ផ្គង់ដែលមិនអាចបន្ថែមបាន។ ថ្នាំនេះមិនមានឱ្យប្រើប្រាស់សម្រាប់ការផ្គត់ផ្គង់ច្រើនជាង 30 ថ្ងៃទេ។

LA = ដំណើរការមានកំណត់។ ថ្នាំនេះអាចរកបានតែតាមឱសថស្ថានជំនាញជាក់លាក់ប៉ុណ្ណោះ។

ប្រសិនបើអ្នកមានសំណួរ សូមទូរស័ព្ទទៅគម្រោង Neighborhood INTEGRITY តាមលេខ 1-844-812-6896 និង TTY 711, ម៉ោង 8 ព្រឹកដល់ 8 យប់ថ្ងៃច័ន្ទ - សុក្រ ម៉ោង 8 ព្រឹកដល់ 12 ថ្ងៃត្រង់ថ្ងៃសៅរ៍។

នៅរសៀលថ្ងៃសៅរ៍ ថ្ងៃអាទិត្យនិងថ្ងៃឈប់សម្រាកអ្នកអាចត្រូវបានស្នើសុំឱ្យទុកសារ។

ការទូរស័ព្ទរបស់អ្នកនឹងត្រូវបានផ្ញើមកវិញក្នុងថ្ងៃធ្វើការបន្ទាប់។ ការទូរស័ព្ទគឺឥតគិតថ្លៃ។

សម្រាប់ព័ត៌មានបន្ថែម សូមចូលទៅកាន់ www.nhpri.org/INTEGRITY។



ថ្នាំត្រូវបានដាក់ជាក្រុមតាមលក្ខខណ្ឌវេជ្ជសាស្ត្រ

RI_CY21_2T_MMP eff 09/01/2021

Drug Name

Last Updated: August/2021

Formulary ID: 00021237

Version: 15

**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION

GOUT - DRUGS TO TREAT GOUT

<i>allopurinol tab 100 mg</i>	\$0 (Tier 1)
<i>allopurinol tab 300 mg</i>	\$0 (Tier 1)
<i>colchicine tab 0.6 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	\$0 (Tier 1)
MITIGARE CAP 0.6MG	\$0 (Tier 2) QL (60 caps / 30 days)
<i>probenecid tab 500 mg</i>	\$0 (Tier 1)

MISCELLANEOUS

<i>acetaminophen suppos 120 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen suppos 650 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen susp 160 mg/5ml</i>	\$0 (Tier 3) DP
<i>acetaminophen tab 325 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen tab er 650 mg</i>	\$0 (Tier 3) DP
<i>arthrts pain tab 650mg</i>	\$0 (Tier 3) DP
<i>aspirin low tab 81mg ec</i>	\$0 (Tier 3) DP
ASPIRIN SUP 600MG	\$0 (Tier 3) DP
<i>aspirin tab 325 mg</i>	\$0 (Tier 3) DP
<i>aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>aspirin tab delayed release 325 mg</i>	\$0 (Tier 3) DP
<i>betatemp sus 160/5ml</i>	\$0 (Tier 3) DP
<i>chld silapap liq 160/5ml</i>	\$0 (Tier 3) DP
<i>ecpirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>ed-apap liq 80mg/2.5</i>	\$0 (Tier 3) DP
FEVERALL INF SUP 80MG	\$0 (Tier 3) DP
<i>feverall sup 120mg</i>	\$0 (Tier 3) DP
FEVERALL SUP 325MG	\$0 (Tier 3) DP
<i>feverall sup 650mg</i>	\$0 (Tier 3) DP
<i>gnp aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>hm aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>8 hour pain tab 650mg</i>	\$0 (Tier 3) DP
<i>8hr pain rel tab 650mg</i>	\$0 (Tier 3) DP
<i>mapap cap 500mg</i>	\$0 (Tier 3) DP
<i>mapap tab 325mg</i>	\$0 (Tier 3) DP
<i>medi-tabs tab 500mg</i>	\$0 (Tier 3) DP
<i>non-aspirin sus 160/5ml</i>	\$0 (Tier 3) DP
<i>non-aspirin tab 325mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>non-aspirin tab 500mg</i>	\$0 (Tier 3) DP
<i>non-aspirin tab 500mg/rr</i>	\$0 (Tier 3) DP
<i>pain & fever sus 160/5ml</i>	\$0 (Tier 3) DP
<i>pain & fever tab 325mg</i>	\$0 (Tier 3) DP
<i>pain relief tab 500mg</i>	\$0 (Tier 3) DP
<i>pain relief tab 500mg/rr</i>	\$0 (Tier 3) DP
<i>pain relief tab 650mg</i>	\$0 (Tier 3) DP
<i>pain relieve sus 160/5ml</i>	\$0 (Tier 3) DP
<i>pain relieve tab 325mg</i>	\$0 (Tier 3) DP
<i>pain relieve tab 500mg</i>	\$0 (Tier 3) DP
<i>pain relieve tab 500mg/rr</i>	\$0 (Tier 3) DP
<i>pharbetol tab 325mg</i>	\$0 (Tier 3) DP
<i>pharbetol tab 500mg</i>	\$0 (Tier 3) DP
<i>qc aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>qc aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>sm aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>sm aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>tactinal chw children</i>	\$0 (Tier 3) DP
<i>tactinal tab 325mg</i>	\$0 (Tier 3) DP
<i>tactinal tab 500mg</i>	\$0 (Tier 3) DP
<i>tri-buff asa tab 325mg</i>	\$0 (Tier 3) DP

NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION

<i>celecoxib cap 50 mg</i>	\$0 (Tier 1) QL (240 caps / 30 days)
<i>celecoxib cap 100 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>celecoxib cap 200 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab delayed release 50 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab delayed release 75 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>diflunisal tab 500 mg</i>	\$0 (Tier 1)
<i>ec-naproxen tab 375mg</i>	\$0 (Tier 1)
<i>ec-naproxen tab 500mg</i>	\$0 (Tier 1)
<i>etodolac cap 200 mg</i>	\$0 (Tier 1)
<i>etodolac cap 300 mg</i>	\$0 (Tier 1)
<i>etodolac tab 400 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>etodolac tab 500 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 400 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 500 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 600 mg</i>	\$0 (Tier 1)
<i>flurbiprofen tab 100 mg</i>	\$0 (Tier 1)
<i>ibu tab 600mg</i>	\$0 (Tier 1)
<i>ibu tab 800mg</i>	\$0 (Tier 1)
<i>ibuprofen dro 50/1.25</i>	\$0 (Tier 3) DP
<i>ibuprofen ib chw 100mg</i>	\$0 (Tier 3) DP
<i>ibuprofen jr chw 100mg</i>	\$0 (Tier 3) DP
<i>ibuprofen sus 100/5ml</i>	\$0 (Tier 3) DP
<i>ibuprofen susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>ibuprofen tab 400 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 600 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 800 mg</i>	\$0 (Tier 1)
<i>medi-profen sus 40mg/ml</i>	\$0 (Tier 3) DP
<i>meloxicam tab 7.5 mg</i>	\$0 (Tier 1)
<i>meloxicam tab 15 mg</i>	\$0 (Tier 1)
<i>nabumetone tab 500 mg</i>	\$0 (Tier 1)
<i>nabumetone tab 750 mg</i>	\$0 (Tier 1)
<i>naproxen dr tab 375mg</i>	\$0 (Tier 1)
<i>naproxen dr tab 500mg</i>	\$0 (Tier 1)
<i>naproxen sodium tab 275 mg</i>	\$0 (Tier 1)
<i>naproxen sodium tab 550 mg</i>	\$0 (Tier 1)
<i>naproxen tab 250 mg</i>	\$0 (Tier 1)
<i>naproxen tab 375 mg</i>	\$0 (Tier 1)
<i>naproxen tab 500 mg</i>	\$0 (Tier 1)
<i>piroxicam cap 10 mg</i>	\$0 (Tier 1)
<i>piroxicam cap 20 mg</i>	\$0 (Tier 1)
<i>sm ibuprofen tab 100mg jr</i>	\$0 (Tier 3) DP
<i>sulindac tab 150 mg</i>	\$0 (Tier 1)
<i>sulindac tab 200 mg</i>	\$0 (Tier 1)

OPIOID ANALGESICS, LONG-ACTING

<i>buprenorphine td patch weekly 5 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 10 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>buprenorphine td patch weekly 15 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 20 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 25 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 50 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 20 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 30 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 40 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 60 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 80 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 100 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 120 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>methadone con 10mg/ml</i>	\$0 (Tier 1)	QL (90 mL / 30 days), PA
<i>methadone hcl soln 5 mg/5ml</i>	\$0 (Tier 1)	QL (450 mL / 30 days), PA
<i>methadone hcl soln 10 mg/5ml</i>	\$0 (Tier 1)	QL (450 mL / 30 days), PA
<i>methadone hcl tab 5 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>methadone hcl tab 10 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 15 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 30 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 60 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 100 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 200 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
OXYCONTIN TAB 10MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 15MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 20MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 30MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 40MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 60MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 80MG CR	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
<i>OPIOID ANALGESICS, SHORT-ACTING</i>		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0 (Tier 1)	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0 (Tier 1)	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0 (Tier 1)	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>butorphanol tartrate inj 1 mg/ml</i>	\$0 (Tier 2)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>butorphanol tartrate inj 2 mg/ml</i>	\$0 (Tier 2)	
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	\$0 (Tier 1)	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	\$0 (Tier 1)	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	\$0 (Tier 1)	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	\$0 (Tier 1)	QL (600 mL / 30 days)
<i>hydromorphone hcl tab 2 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
MORPHINE SUL INJ 2MG/ML	\$0 (Tier 2)	B/D
MORPHINE SUL INJ 4MG/ML	\$0 (Tier 2)	B/D
MORPHINE SUL INJ 5MG/ML	\$0 (Tier 2)	B/D
MORPHINE SUL INJ 8MG/ML	\$0 (Tier 2)	B/D
MORPHINE SUL INJ 10MG/ML	\$0 (Tier 2)	B/D
<i>morphine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 2)	B/D
<i>morphine sulfate iv soln pf 4 mg/ml</i>	\$0 (Tier 2)	B/D
<i>morphine sulfate iv soln pf 8 mg/ml</i>	\$0 (Tier 2)	B/D
<i>morphine sulfate iv soln pf 10 mg/ml</i>	\$0 (Tier 2)	B/D
<i>morphine sulfate oral soln 10 mg/5ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1)	QL (180 mL / 30 days)
<i>morphine sulfate tab 15 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>nalbuphine hcl inj 10 mg/ml</i>	\$0 (Tier 2)	
<i>nalbuphine hcl inj 20 mg/ml</i>	\$0 (Tier 2)	
<i>oxycodone hcl cap 5 mg</i>	\$0 (Tier 1)	QL (180 caps / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1)	QL (180 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days)
<i>oxycodone hcl tab 5 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	\$0 (Tier 1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	\$0 (Tier 1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>tramadol hcl tab 50 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)

ANESTHETICS - DRUGS FOR NUMBING

LOCAL ANESTHETICS

<i>lidocaine hcl local inj 0.5%</i>	\$0 (Tier 1)	B/D
<i>lidocaine hcl local inj 1%</i>	\$0 (Tier 1)	B/D
<i>lidocaine hcl local inj 2%</i>	\$0 (Tier 1)	B/D
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	\$0 (Tier 1)	B/D
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	\$0 (Tier 1)	B/D
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	\$0 (Tier 1)	B/D

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	\$0 (Tier 2)	NDS
ALINIA SUS 100/5ML	\$0 (Tier 2)	NDS, QL (180 mL / 30 days)
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	\$0 (Tier 1)	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>atovaquone susp 750 mg/5ml</i>	\$0 (Tier 2) NDS
<i>aztreonam for inj 1 gm</i>	\$0 (Tier 1)
<i>aztreonam for inj 2 gm</i>	\$0 (Tier 1)
CAYSTON INH 75MG	\$0 (Tier 2) NDS, LA, PA
<i>clindamycin hcl cap 75 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 150 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 300 mg</i>	\$0 (Tier 1)
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 9 gm/60ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 300 mg/2ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 600 mg/4ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 900 mg/6ml</i>	\$0 (Tier 1)
CLINDMYC/NAC INJ 300/50ML	\$0 (Tier 2)
CLINDMYC/NAC INJ 600/50ML	\$0 (Tier 2)
CLINDMYC/NAC INJ 900/50ML	\$0 (Tier 2)
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	\$0 (Tier 1)
<i>dapsone tab 25 mg</i>	\$0 (Tier 1)
<i>dapsone tab 100 mg</i>	\$0 (Tier 1)
<i>daptomycin for iv soln 350 mg</i>	\$0 (Tier 2) NDS
<i>daptomycin for iv soln 500 mg</i>	\$0 (Tier 2) NDS
DAPTOMYCIN SOL 350MG	\$0 (Tier 2) NDS
EMVERM CHW 100MG	\$0 (Tier 2) NDS, QL (12 tabs / 365 days)
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 0.8 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.6 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 10 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 40 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	\$0 (Tier 1)
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	\$0 (Tier 1)
<i>ivermectin tab 3 mg</i>	\$0 (Tier 1)
<i>linezolid for susp 100 mg/5ml</i>	\$0 (Tier 2) NDS, QL (1800 mL / 30 days)
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	\$0 (Tier 1)
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>linezolid tab 600 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>meropenem iv for soln 1 gm</i>	\$0 (Tier 1)
<i>meropenem iv for soln 500 mg</i>	\$0 (Tier 1)
<i>methenamine hippurate tab 1 gm</i>	\$0 (Tier 1)
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>metronidazole tab 250 mg</i>	\$0 (Tier 1)
<i>metronidazole tab 500 mg</i>	\$0 (Tier 1)
<i>neomycin sulfate tab 500 mg</i>	\$0 (Tier 1)
<i>nitazoxanide tab 500 mg</i>	\$0 (Tier 2) NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	\$0 (Tier 2)
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	\$0 (Tier 2)
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	\$0 (Tier 2)
<i>paromomycin sulfate cap 250 mg</i>	\$0 (Tier 1)
<i>pentamidine isethionate for nebulization soln 300 mg</i>	\$0 (Tier 1) B/D
<i>pentamidine isethionate for soln 300 mg</i>	\$0 (Tier 1)
PINWORM TAB MEDICINE	\$0 (Tier 3) DP
<i>praziquantel tab 600 mg</i>	\$0 (Tier 1)
<i>reeses med sus pinworm</i>	\$0 (Tier 3) DP
SIVEXTRO INJ 200MG	\$0 (Tier 2) NDS
SIVEXTRO TAB 200MG	\$0 (Tier 2) NDS
<i>streptomycin sulfate for inj 1 gm</i>	\$0 (Tier 2) NDS
SULFADIAZINE TAB 500MG	\$0 (Tier 2)
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	\$0 (Tier 1)
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	\$0 (Tier 1)
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	\$0 (Tier 1)
SYNERCID INJ 500MG	\$0 (Tier 2) NDS
<i>tobramycin nebu soln 300 mg/5ml</i>	\$0 (Tier 2) NDS, PA
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>trimethoprim tab 100 mg</i>	\$0 (Tier 1)
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	\$0 (Tier 1) QL (80 caps / 180 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	\$0 (Tier 1) QL (160 caps / 180 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	\$0 (Tier 1)
VANCOMYCIN INJ 1 GM	\$0 (Tier 2)
VANCOMYCIN INJ 500MG	\$0 (Tier 2)
VANCOMYCIN INJ 750MG	\$0 (Tier 2)

ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS

ABELCET INJ 5MG/ML	\$0 (Tier 2) B/D
AMBISOME INJ 50MG	\$0 (Tier 2) NDS, B/D
<i>amphotericin b for iv soln 50 mg</i>	\$0 (Tier 1) B/D
<i>caspofungin acetate for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>caspofungin acetate for iv soln 70 mg</i>	\$0 (Tier 2) NDS
<i>fluconazole for susp 10 mg/ml</i>	\$0 (Tier 1)
<i>fluconazole for susp 40 mg/ml</i>	\$0 (Tier 1)
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	\$0 (Tier 1)
<i>fluconazole tab 50 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 100 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 150 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 200 mg</i>	\$0 (Tier 1)
<i>flucytosine cap 250 mg</i>	\$0 (Tier 2) NDS
<i>flucytosine cap 500 mg</i>	\$0 (Tier 2) NDS
<i>griseofulvin microsize susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>griseofulvin microsize tab 500 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 125 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 250 mg</i>	\$0 (Tier 1)
<i>itraconazole cap 100 mg</i>	\$0 (Tier 1) PA
<i>ketoconazole tab 200 mg</i>	\$0 (Tier 1) PA
<i>micafungin sodium for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>micafungin sodium for iv soln 100 mg</i>	\$0 (Tier 2) NDS
NOXAFIL SUS 40MG/ML	\$0 (Tier 2) NDS, QL (630 mL / 30 days)
<i>nystatin tab 500000 unit</i>	\$0 (Tier 1)
<i>posaconazole tab delayed release 100 mg</i>	\$0 (Tier 2) NDS, QL (93 tabs / 30 days)
<i>terbinafine hcl tab 250 mg</i>	\$0 (Tier 1) QL (90 tabs / year)
<i>voriconazole for inj 200 mg</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole for susp 40 mg/ml</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole tab 50 mg</i>	\$0 (Tier 1) QL (480 tabs / 30 days), PA
<i>voriconazole tab 200 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days), PA

ANTIMALARIALS - DRUGS TO TREAT MALARIA

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	\$0 (Tier 1)
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 250 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 500 mg</i>	\$0 (Tier 1)
COARTEM TAB 20-120MG	\$0 (Tier 2)
<i>mefloquine hcl tab 250 mg</i>	\$0 (Tier 1)
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	\$0 (Tier 1)
PRIMAQUINE TAB 26.3MG	\$0 (Tier 2)
<i>quinine sulfate cap 324 mg</i>	\$0 (Tier 1) PA

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS
INFECTION**

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	\$0 (Tier 1)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	\$0 (Tier 1)
APTIVUS CAP 250MG	\$0 (Tier 2) NDS
APTIVUS SOL	\$0 (Tier 2) NDS
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	\$0 (Tier 1)
CRIXIVAN CAP 200MG	\$0 (Tier 2)
CRIXIVAN CAP 400MG	\$0 (Tier 2)
EDURANT TAB 25MG	\$0 (Tier 2) NDS
<i>efavirenz cap 50 mg</i>	\$0 (Tier 1)
<i>efavirenz cap 200 mg</i>	\$0 (Tier 1)
<i>efavirenz tab 600 mg</i>	\$0 (Tier 1)
<i>emtricitabine caps 200 mg</i>	\$0 (Tier 1)
EMTRIVA SOL 10MG/ML	\$0 (Tier 2)
<i>etravirine tab 100 mg</i>	\$0 (Tier 2) NDS
<i>etravirine tab 200 mg</i>	\$0 (Tier 2) NDS
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	\$0 (Tier 2) NDS
FUZEON INJ 90MG	\$0 (Tier 2) NDS
INTELENCE TAB 25MG	\$0 (Tier 2)
INTELENCE TAB 100MG	\$0 (Tier 2) NDS
INTELENCE TAB 200MG	\$0 (Tier 2) NDS
INVIRASE TAB 500MG	\$0 (Tier 2) NDS
ISENTRESS CHW 25MG	\$0 (Tier 2)
ISENTRESS CHW 100MG	\$0 (Tier 2) NDS
ISENTRESS HD TAB 600MG	\$0 (Tier 2) NDS
ISENTRESS POW 100MG	\$0 (Tier 2)
ISENTRESS TAB 400MG	\$0 (Tier 2) NDS
<i>lamivudine oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>lamivudine tab 150 mg</i>	\$0 (Tier 1)
<i>lamivudine tab 300 mg</i>	\$0 (Tier 1)
LEXIVA SUS 50MG/ML	\$0 (Tier 2)
<i>nevirapine susp 50 mg/5ml</i>	\$0 (Tier 1)
<i>nevirapine tab 200 mg</i>	\$0 (Tier 1)
<i>nevirapine tab er 24hr 100 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>nevirapine tab er 24hr 400 mg</i>	\$0 (Tier 1)
NORVIR POW 100MG	\$0 (Tier 2)
NORVIR SOL 80MG/ML	\$0 (Tier 2)
PIFELTRO TAB 100MG	\$0 (Tier 2) NDS
PREZISTA SUS 100MG/ML	\$0 (Tier 2) NDS, QL (400 mL / 30 days)
PREZISTA TAB 75MG	\$0 (Tier 2) QL (480 tabs / 30 days)
PREZISTA TAB 150MG	\$0 (Tier 2) NDS, QL (240 tabs / 30 days)
PREZISTA TAB 600MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
PREZISTA TAB 800MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
REYATAZ POW 50MG	\$0 (Tier 2) NDS
<i>ritonavir tab 100 mg</i>	\$0 (Tier 1)
RUKOBIA TAB 600MG ER	\$0 (Tier 2) NDS
SELZENTRY SOL 20MG/ML	\$0 (Tier 2) NDS
SELZENTRY TAB 25MG	\$0 (Tier 2)
SELZENTRY TAB 75MG	\$0 (Tier 2) NDS
SELZENTRY TAB 150MG	\$0 (Tier 2) NDS
SELZENTRY TAB 300MG	\$0 (Tier 2) NDS
<i>stavudine cap 15 mg</i>	\$0 (Tier 1)
<i>stavudine cap 20 mg</i>	\$0 (Tier 1)
<i>stavudine cap 30 mg</i>	\$0 (Tier 1)
<i>stavudine cap 40 mg</i>	\$0 (Tier 1)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	\$0 (Tier 1)
TIVICAY PD TAB 5MG	\$0 (Tier 2)
TIVICAY TAB 10MG	\$0 (Tier 2)
TIVICAY TAB 25MG	\$0 (Tier 2) NDS
TIVICAY TAB 50MG	\$0 (Tier 2) NDS
TROGARZO INJ 150MG/ML	\$0 (Tier 2) NDS, LA
TYBOST TAB 150MG	\$0 (Tier 2)
VIRACEPT TAB 250MG	\$0 (Tier 2) NDS
VIRACEPT TAB 625MG	\$0 (Tier 2) NDS
VIREAD POW 40MG/GM	\$0 (Tier 2) NDS
VIREAD TAB 150MG	\$0 (Tier 2) NDS
VIREAD TAB 200MG	\$0 (Tier 2) NDS
VIREAD TAB 250MG	\$0 (Tier 2) NDS
<i>zidovudine cap 100 mg</i>	\$0 (Tier 1)
<i>zidovudine syrup 10 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>zidovudine tab 300 mg</i>	\$0 (Tier 1)
ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	\$0 (Tier 1)
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	\$0 (Tier 2) NDS
BIKTARVY TAB	\$0 (Tier 2) NDS
CIMDUO TAB 300-300	\$0 (Tier 2) NDS
COMPLERA TAB	\$0 (Tier 2) NDS
DELSTRIGO TAB	\$0 (Tier 2) NDS
DESCOVY TAB 200/25MG	\$0 (Tier 2) NDS
DOVATO TAB 50-300MG	\$0 (Tier 2) NDS
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	\$0 (Tier 2) NDS
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	\$0 (Tier 2) NDS
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	\$0 (Tier 2) NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
EVOTAZ TAB 300-150	\$0 (Tier 2) NDS
GENVOYA TAB	\$0 (Tier 2) NDS
JULUCA TAB 50-25MG	\$0 (Tier 2) NDS
KALETRA TAB 100-25MG	\$0 (Tier 2)
KALETRA TAB 200-50MG	\$0 (Tier 2) NDS
<i>lamivudine-zidovudine tab 150-300 mg</i>	\$0 (Tier 1)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	\$0 (Tier 1)
<i>lopinavir-ritonavir tab 100-25 mg</i>	\$0 (Tier 1)
<i>lopinavir-ritonavir tab 200-50 mg</i>	\$0 (Tier 2) NDS
ODEFSEY TAB	\$0 (Tier 2) NDS
PREZCOBIX TAB 800-150	\$0 (Tier 2) NDS
STRIBILD TAB	\$0 (Tier 2) NDS

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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SYMTUZA TAB	\$0 (Tier 2) NDS
TEMIXYS TAB 300-300	\$0 (Tier 2) NDS
TRIUMEQ TAB	\$0 (Tier 2) NDS

ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS

<i>cycloserine cap 250 mg</i>	\$0 (Tier 2) NDS
<i>ethambutol hcl tab 100 mg</i>	\$0 (Tier 1)
<i>ethambutol hcl tab 400 mg</i>	\$0 (Tier 1)
<i>isoniazid syrup 50 mg/5ml</i>	\$0 (Tier 1)
<i>isoniazid tab 100 mg</i>	\$0 (Tier 1)
<i>isoniazid tab 300 mg</i>	\$0 (Tier 1)
PASER GRA 4GM	\$0 (Tier 2)
PRIFTIN TAB 150MG	\$0 (Tier 2)
<i>pyrazinamide tab 500 mg</i>	\$0 (Tier 1)
<i>rifabutin cap 150 mg</i>	\$0 (Tier 1)
<i>rifampin cap 150 mg</i>	\$0 (Tier 1)
<i>rifampin cap 300 mg</i>	\$0 (Tier 1)
<i>rifampin for inj 600 mg</i>	\$0 (Tier 1)
SIRTURO TAB 20MG	\$0 (Tier 2) NDS, LA, PA
SIRTURO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
TRECTOR TAB 250MG	\$0 (Tier 2)

ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS

<i>acyclovir cap 200 mg</i>	\$0 (Tier 1)
<i>acyclovir sodium iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>acyclovir susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>acyclovir tab 400 mg</i>	\$0 (Tier 1)
<i>acyclovir tab 800 mg</i>	\$0 (Tier 1)
<i>adefovir dipivoxil tab 10 mg</i>	\$0 (Tier 2) NDS
BARACLUDE SOL	\$0 (Tier 2) NDS
<i>entecavir tab 0.5 mg</i>	\$0 (Tier 1)
<i>entecavir tab 1 mg</i>	\$0 (Tier 1)
EPCLUSA TAB 200-50MG	\$0 (Tier 2) NDS, PA
EPCLUSA TAB 400-100	\$0 (Tier 2) NDS, PA
EPIVIR HBV SOL 5MG/ML	\$0 (Tier 2)
<i>famciclovir tab 125 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 250 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 500 mg</i>	\$0 (Tier 1)
<i>ganciclovir sodium for inj 500 mg</i>	\$0 (Tier 1) B/D
HARVONI PAK	\$0 (Tier 2) NDS, PA
HARVONI PAK 45-200MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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HARVONI TAB 45-200MG	\$0 (Tier 2) NDS, PA
HARVONI TAB 90-400MG	\$0 (Tier 2) NDS, PA
<i>lamivudine tab 100 mg (hbv)</i>	\$0 (Tier 1)
MAVYRET TAB 100-40MG	\$0 (Tier 2) NDS, PA
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	\$0 (Tier 1) QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	\$0 (Tier 1) QL (1080 mL / year)
PEGASYS INJ	\$0 (Tier 2) NDS, PA
PEGASYS INJ 180MCG/M	\$0 (Tier 2) NDS, PA
RELENZA MIS DISKHALE	\$0 (Tier 2) QL (6 inhalers / year)
<i>ribavirin cap 200 mg</i>	\$0 (Tier 1)
<i>ribavirin tab 200 mg</i>	\$0 (Tier 1)
<i>rimantadine hydrochloride tab 100 mg</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 1 gm</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 500 mg</i>	\$0 (Tier 1)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	\$0 (Tier 1)
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	\$0 (Tier 1)
VEMLIDY TAB 25MG	\$0 (Tier 2) NDS, PA
VOSEVI TAB	\$0 (Tier 2) NDS, PA
XOFLUZA TAB 20MG	\$0 (Tier 2) QL (2 tabs / 180 days)
XOFLUZA TAB 40MG	\$0 (Tier 2) QL (2 tabs / 180 days)

CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS

<i>cefaclor cap 250 mg</i>	\$0 (Tier 1)
<i>cefaclor cap 500 mg</i>	\$0 (Tier 1)
CEFACLOR ER TAB 500MG	\$0 (Tier 2)
<i>cefaclor for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefaclor for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefaclor for susp 375 mg/5ml</i>	\$0 (Tier 1)
<i>cefadroxil cap 500 mg</i>	\$0 (Tier 1)
<i>cefadroxil for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefadroxil for susp 500 mg/5ml</i>	\$0 (Tier 1)
CEFAZOLIN INJ 1GM/50ML	\$0 (Tier 2)
<i>cefazolin sodium for inj 1 gm</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cefazolin sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>cefazolin sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>cefazolin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
CEFAZOLIN SOL	\$0 (Tier 2)
<i>cefdinir cap 300 mg</i>	\$0 (Tier 1)
<i>cefdinir for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefdinir for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefepime hcl for inj 1 gm</i>	\$0 (Tier 1)
<i>cefepime hcl for inj 2 gm</i>	\$0 (Tier 1)
<i>cefixime for susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>cefixime for susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>cefoxitin sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>cefoxitin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>cefoxitin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil tab 100 mg</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil tab 200 mg</i>	\$0 (Tier 1)
<i>cefprozil for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefprozil for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefprozil tab 250 mg</i>	\$0 (Tier 1)
<i>cefprozil tab 500 mg</i>	\$0 (Tier 1)
<i>ceftazidime for inj 1 gm</i>	\$0 (Tier 1)
<i>ceftazidime for inj 2 gm</i>	\$0 (Tier 1)
<i>ceftazidime for inj 6 gm</i>	\$0 (Tier 1)
CEFTAZIDIME/ SOL D5W 1GM	\$0 (Tier 2)
CEFTAZIDIME/ SOL D5W 2GM	\$0 (Tier 2)
<i>ceftriaxone sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 250 mg</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>cefuroxime axetil tab 250 mg</i>	\$0 (Tier 1)
<i>cefuroxime axetil tab 500 mg</i>	\$0 (Tier 1)
<i>cefuroxime sodium for inj 7.5 gm</i>	\$0 (Tier 1)
<i>cefuroxime sodium for inj 750 mg</i>	\$0 (Tier 1)
<i>cefuroxime sodium for iv soln 1.5 gm</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>cephalexin cap 250 mg</i>	\$0 (Tier 1)
<i>cephalexin cap 500 mg</i>	\$0 (Tier 1)
<i>cephalexin for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cephalexin for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>tazicef inj 1gm</i>	\$0 (Tier 1)
<i>tazicef inj 2gm</i>	\$0 (Tier 1)
<i>tazicef inj 6gm</i>	\$0 (Tier 1)
TEFLARO INJ 400MG	\$0 (Tier 2) NDS
TEFLARO INJ 600MG	\$0 (Tier 2) NDS

ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS

<i>azithromycin for susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>azithromycin for susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>azithromycin iv for soln 500 mg</i>	\$0 (Tier 1)
<i>azithromycin powd pack for susp 1 gm</i>	\$0 (Tier 1)
<i>azithromycin tab 250 mg</i>	\$0 (Tier 1)
<i>azithromycin tab 500 mg</i>	\$0 (Tier 1)
<i>azithromycin tab 600 mg</i>	\$0 (Tier 1)
<i>clarithromycin for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>clarithromycin for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>clarithromycin tab 250 mg</i>	\$0 (Tier 1)
<i>clarithromycin tab 500 mg</i>	\$0 (Tier 1)
<i>clarithromycin tab er 24hr 500 mg</i>	\$0 (Tier 1)
DIFICID SUS	\$0 (Tier 2) NDS
DIFICID TAB 200MG	\$0 (Tier 2) NDS
<i>ery-tab tab 250mg ec</i>	\$0 (Tier 1)
<i>ery-tab tab 333mg ec</i>	\$0 (Tier 1)
<i>ery-tab tab 500mg ec</i>	\$0 (Tier 1)
ERYTHROCIN INJ 500MG	\$0 (Tier 2)
<i>erythrocin tab 250mg</i>	\$0 (Tier 1)
<i>erythromycin ethylsuccinate tab 400 mg</i>	\$0 (Tier 1)
<i>erythromycin tab 250 mg</i>	\$0 (Tier 1)
<i>erythromycin tab 500 mg</i>	\$0 (Tier 1)
<i>erythromycin tab delayed release 250 mg</i>	\$0 (Tier 1)
<i>erythromycin tab delayed release 333 mg</i>	\$0 (Tier 1)
<i>erythromycin tab delayed release 500 mg</i>	\$0 (Tier 1)
<i>erythromycin w/ delayed release particles cap 250 mg</i>	\$0 (Tier 1)

FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS

CIPRO (10%) SUS 500MG/5	\$0 (Tier 2)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>ciprofloxacin 200 mg/100ml in d5w</i>	\$0 (Tier 1)
<i>ciprofloxacin 400 mg/200ml in d5w</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	\$0 (Tier 1)
<i>levofloxacin iv soln 25 mg/ml</i>	\$0 (Tier 1)
<i>levofloxacin oral soln 25 mg/ml</i>	\$0 (Tier 1)
<i>levofloxacin tab 250 mg</i>	\$0 (Tier 1)
<i>levofloxacin tab 500 mg</i>	\$0 (Tier 1)
<i>levofloxacin tab 750 mg</i>	\$0 (Tier 1)
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	\$0 (Tier 1)

PENICILLINS - DRUGS TO TREAT INFECTIONS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	\$0 (Tier 1)
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) cap 250 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) cap 500 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) tab 500 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) tab 875 mg</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0 (Tier 1)
<i>ampicillin cap 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 125 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 250 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 10 gm</i>	\$0 (Tier 1)
<i>BICILLIN L-A INJ 600000</i>	\$0 (Tier 2)
<i>BICILLIN L-A INJ 1200000</i>	\$0 (Tier 2)
<i>BICILLIN L-A INJ 2400000</i>	\$0 (Tier 2)
<i>dicloxacillin sodium cap 250 mg</i>	\$0 (Tier 1)
<i>dicloxacillin sodium cap 500 mg</i>	\$0 (Tier 1)
<i>nafcillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 10 gm</i>	\$0 (Tier 2) NDS
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	\$0 (Tier 1)	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 2)	NDS
PEN G PROC INJ 600000	\$0 (Tier 2)	
PEN GK/DEXTR INJ 40000/ML	\$0 (Tier 2)	
PEN GK/DEXTR INJ 60000/ML	\$0 (Tier 2)	
<i>penicillin g potassium for inj 5000000 unit</i>	\$0 (Tier 1)	
<i>penicillin g potassium for inj 20000000 unit</i>	\$0 (Tier 1)	
<i>penicillin g sodium for inj 5000000 unit</i>	\$0 (Tier 1)	
<i>penicillin v potassium for soln 125 mg/5ml</i>	\$0 (Tier 1)	
<i>penicillin v potassium for soln 250 mg/5ml</i>	\$0 (Tier 1)	
<i>penicillin v potassium tab 250 mg</i>	\$0 (Tier 1)	
<i>penicillin v potassium tab 500 mg</i>	\$0 (Tier 1)	
<i>pfizerpen inj 5mu</i>	\$0 (Tier 1)	
<i>pfizerpen inj 20000000</i>	\$0 (Tier 1)	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0 (Tier 1)	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0 (Tier 1)	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0 (Tier 1)	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0 (Tier 1)	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0 (Tier 1)	

TETRACYCLINES - DRUGS TO TREAT INFECTIONS

<i>doxy 100 inj 100mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate cap 50 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate cap 100 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate for inj 100 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate tab 20 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate tab 100 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate cap 50 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate cap 100 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 50 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 75 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 100 mg</i>	\$0 (Tier 1)
<i>minocycline hcl cap 50 mg</i>	\$0 (Tier 1)
<i>minocycline hcl cap 75 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>minocycline hcl cap 100 mg</i>	\$0 (Tier 1)
<i>mondoxyne nl cap 100mg</i>	\$0 (Tier 1)
<i>tetracycline hcl cap 250 mg</i>	\$0 (Tier 1) PA
<i>tetracycline hcl cap 500 mg</i>	\$0 (Tier 1) PA
<i>tigecycline for iv soln 50 mg</i>	\$0 (Tier 2) NDS
TIGECYCLINE INJ 50MG	\$0 (Tier 2) NDS

ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER

ALKYLATING AGENTS

BENDEKA INJ 100/4ML	\$0 (Tier 2) NDS, B/D
<i>carboplatin iv soln 50 mg/5ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 150 mg/15ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 450 mg/45ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 600 mg/60ml</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
CYCLOPHOSPH INJ 1GM	\$0 (Tier 2) NDS, B/D
CYCLOPHOSPH TAB 25MG	\$0 (Tier 2) B/D
CYCLOPHOSPH TAB 50MG	\$0 (Tier 2) B/D
CYCLOPHOSPHA INJ 500MG	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclophosphamide cap 50 mg</i>	\$0 (Tier 1) B/D
<i>cyclophosphamide for inj 1 gm</i>	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide for inj 2 gm</i>	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide for inj 500 mg</i>	\$0 (Tier 2) NDS, B/D
LEUKERAN TAB 2MG	\$0 (Tier 2) NDS
<i>oxaliplatin for iv inj 50 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin for iv inj 100 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin iv soln 50 mg/10ml</i>	\$0 (Tier 1) B/D
<i>oxaliplatin iv soln 100 mg/20ml</i>	\$0 (Tier 1) B/D
<i>oxaliplatin iv soln 200 mg/40ml</i>	\$0 (Tier 1) B/D
<i>paraplatin inj 1000mg</i>	\$0 (Tier 1) B/D

ANTIBIOTICS

<i>adriamycin inj 20mg</i>	\$0 (Tier 1) B/D
<i>doxorubicin hcl inj 2 mg/ml</i>	\$0 (Tier 1) B/D
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	\$0 (Tier 1) B/D
ANTIMETABOLITES	
<i>ALIMTA INJ 100MG</i>	\$0 (Tier 2) NDS, B/D
<i>ALIMTA INJ 500MG</i>	\$0 (Tier 2) NDS, B/D
<i>azacitidine for inj 100 mg</i>	\$0 (Tier 2) NDS, B/D
<i>cytarabine inj 20 mg/ml</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 1 gm</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 2 gm</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 200 mg</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>mercaptopurine tab 50 mg</i>	\$0 (Tier 1)
<i>methotrexate sodium for inj 1 gm</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>ONUREG TAB 200MG</i>	\$0 (Tier 2) NDS, LA, PA
<i>ONUREG TAB 300MG</i>	\$0 (Tier 2) NDS, LA, PA
<i>PURIXAN SUS 20MG/ML</i>	\$0 (Tier 2) NDS
<i>TABLOID TAB 40MG</i>	\$0 (Tier 2)
HORMONAL ANTINEOPLASTIC AGENTS	
<i>abiraterone acetate tab 250 mg</i>	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>abiraterone acetate tab 500 mg</i>	\$0 (Tier 2) NDS, PA
<i>anastrozole tab 1 mg</i>	\$0 (Tier 1)
<i>bicalutamide tab 50 mg</i>	\$0 (Tier 1)
EMCYT CAP 140MG	\$0 (Tier 2)
ERLEADA TAB 60MG	\$0 (Tier 2) NDS, LA, PA
<i>exemestane tab 25 mg</i>	\$0 (Tier 1)
<i>flutamide cap 125 mg</i>	\$0 (Tier 1)
<i>fulvestrant inj 250 mg/5ml</i>	\$0 (Tier 2) NDS, B/D
<i>letrozole tab 2.5 mg</i>	\$0 (Tier 1)
<i>leuprolide acetate inj kit 5 mg/ml</i>	\$0 (Tier 1) PA
LUPRON DEPOT INJ 3.75MG	\$0 (Tier 2) NDS, PA
LUPRON DEPOT INJ 11.25MG	\$0 (Tier 2) NDS, PA
LYSODREN TAB 500MG	\$0 (Tier 2) NDS
<i>megestrol acetate tab 20 mg</i>	\$0 (Tier 2)
<i>megestrol acetate tab 40 mg</i>	\$0 (Tier 2)
<i>nilutamide tab 150 mg</i>	\$0 (Tier 2) NDS
NUBEQA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
ORGOVYX TAB 120MG	\$0 (Tier 2) NDS, LA, PA
SOLTAMOX SOL 10MG/5ML	\$0 (Tier 2) NDS
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	\$0 (Tier 1)
<i>toremifene citrate tab 60 mg (base equivalent)</i>	\$0 (Tier 2) NDS
TRELSTAR MIX INJ 3.75MG	\$0 (Tier 2) NDS, PA
TRELSTAR MIX INJ 11.25MG	\$0 (Tier 2) NDS, PA
XTANDI CAP 40MG	\$0 (Tier 2) NDS, LA, PA
XTANDI TAB 40MG	\$0 (Tier 2) NDS, LA, PA
XTANDI TAB 80MG	\$0 (Tier 2) NDS, LA, PA
ZYTIGA TAB 500MG	\$0 (Tier 2) NDS, LA, PA

IMMUNOMODULATORS

POMALYST CAP 1MG	\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA
POMALYST CAP 2MG	\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA
POMALYST CAP 3MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
POMALYST CAP 4MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
REVLIMID CAP 2.5MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 5MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 10MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 15MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 20MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 25MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
THALOMID CAP 50MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
THALOMID CAP 100MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
THALOMID CAP 150MG	\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA
THALOMID CAP 200MG	\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA

MISCELLANEOUS

<i>bexarotene cap 75 mg</i>	\$0 (Tier 2) NDS, PA
<i>hydroxyurea cap 500 mg</i>	\$0 (Tier 1)
INQOVI TAB 35-100MG	\$0 (Tier 2) NDS, LA, PA
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
KISQALI 200 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 400 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 600 PAK FEMARA	\$0 (Tier 2) NDS, PA
LONSURF TAB 15-6.14	\$0 (Tier 2) NDS, PA
LONSURF TAB 20-8.19	\$0 (Tier 2) NDS, PA
MATULANE CAP 50MG	\$0 (Tier 2) NDS, LA
SYNRIBO INJ 3.5MG	\$0 (Tier 2) NDS, PA
<i>tretinoin cap 10 mg</i>	\$0 (Tier 2) NDS

MITOTIC INHIBITORS

ABRAXANE INJ 100MG	\$0 (Tier 2) NDS, B/D
<i>docetaxel for inj conc 20 mg/ml</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 20MG/2ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 80MG/4ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 80MG/8ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 160/8ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 160/16ML	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	\$0 (Tier 2) NDS, B/D
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>toposar inj 1gm/50ml</i>	\$0 (Tier 1) B/D
<i>toposar inj 100/5ml</i>	\$0 (Tier 1) B/D
<i>vincristine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 1) B/D
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D

MOLECULAR TARGET AGENTS

AFINITOR DIS TAB 2MG	\$0 (Tier 2) NDS, QL (150 tabs / 30 days), PA
AFINITOR DIS TAB 3MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
AFINITOR DIS TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
AFINITOR TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG PAK	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 30MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 90MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 180MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
AVASTIN INJ	\$0 (Tier 2) NDS, LA, PA
AVASTIN INJ 400/16ML	\$0 (Tier 2) NDS, LA, PA
AYVAKIT TAB 100MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TAB 200MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TAB 300MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
BALVERSA TAB 3MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 4MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 5MG	\$0 (Tier 2) NDS, LA, PA
BORTEZOMIB INJ 3.5MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 100MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 400MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 500MG	\$0 (Tier 2) NDS, PA
BRAFTOVI CAP 75MG	\$0 (Tier 2) NDS, LA, PA
BRUKINSA CAP 80MG	\$0 (Tier 2) NDS, LA, PA
CABOMETYX TAB 20MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 60MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CALQUENCE CAP 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 60MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 100MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 140MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 15MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 25MG	\$0 (Tier 2) NDS, LA, PA
COTELLIC TAB 20MG	\$0 (Tier 2) NDS, LA, PA
DAURISMO TAB 25MG	\$0 (Tier 2) NDS, LA, PA
DAURISMO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ERIVEDGE CAP 150MG	\$0 (Tier 2) NDS, LA, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 2.5 mg</i>	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 5 mg</i>	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 7.5 mg</i>	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
FARYDAK CAP 10MG	\$0 (Tier 2)	NDS, LA, PA
FARYDAK CAP 15MG	\$0 (Tier 2)	NDS, LA, PA
FARYDAK CAP 20MG	\$0 (Tier 2)	NDS, LA, PA
FOTIVDA CAP 0.89MG	\$0 (Tier 2)	NDS, QL (21 caps / 28 days), LA, PA
FOTIVDA CAP 1.34MG	\$0 (Tier 2)	NDS, QL (21 caps / 28 days), LA, PA
GAVRETO CAP 100MG	\$0 (Tier 2)	NDS, LA, PA
GILOTRIF TAB 20MG	\$0 (Tier 2)	NDS, LA, PA
GILOTRIF TAB 30MG	\$0 (Tier 2)	NDS, LA, PA
GILOTRIF TAB 40MG	\$0 (Tier 2)	NDS, LA, PA
HERCEP HYLEC SOL 60-10000	\$0 (Tier 2)	NDS, PA
HERCEPTIN INJ 150MG	\$0 (Tier 2)	NDS, PA
HERZUMA INJ 150MG	\$0 (Tier 2)	NDS, PA
HERZUMA INJ 420MG	\$0 (Tier 2)	NDS, PA
IBRANCE CAP 75MG	\$0 (Tier 2)	NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 100MG	\$0 (Tier 2)	NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 125MG	\$0 (Tier 2)	NDS, QL (21 caps / 28 days), LA, PA
IBRANCE TAB 75MG	\$0 (Tier 2)	NDS, QL (21 tabs / 28 days), LA, PA
IBRANCE TAB 100MG	\$0 (Tier 2)	NDS, QL (21 tabs / 28 days), LA, PA
IBRANCE TAB 125MG	\$0 (Tier 2)	NDS, QL (21 tabs / 28 days), LA, PA
ICLUSIG TAB 10MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
ICLUSIG TAB 15MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
ICLUSIG TAB 30MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ICLUSIG TAB 45MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TAB 50MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TAB 100MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	\$0 (Tier 2)	NDS, QL (90 tabs / 30 days), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	\$0 (Tier 2)	NDS, QL (56 caps / 28 days), LA, PA
IMBRUVICA CAP 140MG	\$0 (Tier 2)	NDS, QL (120 caps / 30 days), LA, PA
IMBRUVICA TAB 140MG	\$0 (Tier 2)	NDS, QL (112 tabs / 28 days), LA, PA
IMBRUVICA TAB 280MG	\$0 (Tier 2)	NDS, QL (56 tabs / 28 days), LA, PA
IMBRUVICA TAB 420MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
IMBRUVICA TAB 560MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
INLYTA TAB 1MG	\$0 (Tier 2)	NDS, QL (180 tabs / 30 days), LA, PA
INLYTA TAB 5MG	\$0 (Tier 2)	NDS, QL (120 tabs / 30 days), LA, PA
INREBIC CAP 100MG	\$0 (Tier 2)	NDS, LA, PA
IRESSA TAB 250MG	\$0 (Tier 2)	NDS, LA, PA
JAKAFI TAB 5MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 10MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 15MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 20MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 25MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), LA, PA
KADCYLA INJ 100MG	\$0 (Tier 2)	NDS, B/D
KADCYLA INJ 160MG	\$0 (Tier 2)	NDS, B/D
KANJINTI INJ 420MG	\$0 (Tier 2)	NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
KANJINTI SOL 150MG	\$0 (Tier 2) NDS, PA
KEYTRUDA INJ 100MG/4M	\$0 (Tier 2) NDS, PA
KISQALI TAB 200DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 400DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 600DOSE	\$0 (Tier 2) NDS, PA
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	\$0 (Tier 2) NDS, PA
LENVIMA CAP 4MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 8 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 10 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 12MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 14 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 18 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 20 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 24 MG	\$0 (Tier 2) NDS, LA, PA
LORBRENA TAB 25MG	\$0 (Tier 2) NDS, LA, PA
LORBRENA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
LUMAKRAS TAB 120MG	\$0 (Tier 2) NDS, LA, PA
LYNPARZA TAB 100MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
LYNPARZA TAB 150MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
MEKINIST TAB 0.5MG	\$0 (Tier 2) NDS, LA, PA
MEKINIST TAB 2MG	\$0 (Tier 2) NDS, LA, PA
MEKTOVI TAB 15MG	\$0 (Tier 2) NDS, LA, PA
MONJUVI INJ 200MG	\$0 (Tier 2) NDS, LA, PA
MVASI INJ 100MG	\$0 (Tier 2) NDS, LA, PA
MVASI INJ 400MG	\$0 (Tier 2) NDS, LA, PA
NERLYNX TAB 40MG	\$0 (Tier 2) NDS, LA, PA
NEXAVAR TAB 200MG	\$0 (Tier 2) NDS, LA, PA
NINLARO CAP 2.3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 4MG	\$0 (Tier 2) NDS, PA
ODOMZO CAP 200MG	\$0 (Tier 2) NDS, LA, PA
OGIVRI INJ 150MG	\$0 (Tier 2) NDS, PA
OGIVRI INJ 420MG	\$0 (Tier 2) NDS, PA
ONTRUZANT INJ 150MG	\$0 (Tier 2) NDS, PA
ONTRUZANT INJ 420MG	\$0 (Tier 2) NDS, PA
PEMAZYRE TAB 4.5MG	\$0 (Tier 2) NDS, LA, PA
PEMAZYRE TAB 9MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PEMAZYRE TAB 13.5MG	\$0 (Tier 2) NDS, LA, PA
PHESGO SOL	\$0 (Tier 2) NDS, LA, PA
PIQRAY 200MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 250MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 300MG TAB DOSE	\$0 (Tier 2) NDS, PA
QINLOCK TAB 50MG	\$0 (Tier 2) NDS, LA, PA
RETEVMO CAP 40MG	\$0 (Tier 2) NDS, LA, PA
RETEVMO CAP 80MG	\$0 (Tier 2) NDS, LA, PA
RIABNI SOL 100/10ML	\$0 (Tier 2) NDS, LA, PA
RIABNI SOL 500/50ML	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 100MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 500MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ HYCELA	\$0 (Tier 2) NDS, LA, PA
ROZLYTREK CAP 100MG	\$0 (Tier 2) NDS, LA, PA
ROZLYTREK CAP 200MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 200MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 250MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
RUXIENCE INJ 100/10ML	\$0 (Tier 2) NDS, PA
RUXIENCE INJ 500/50ML	\$0 (Tier 2) NDS, PA
RYDAPT CAP 25MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 20MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 50MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 70MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 80MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 100MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 140MG	\$0 (Tier 2) NDS, PA
STIVARGA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
SUTENT CAP 12.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 25MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 37.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 50MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
TABRECTA TAB 150MG	\$0 (Tier 2) NDS, PA
TABRECTA TAB 200MG	\$0 (Tier 2) NDS, PA
TAFINLAR CAP 50MG	\$0 (Tier 2) NDS, LA, PA
TAFINLAR CAP 75MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TAGRISSO TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
TAGRISSO TAB 80MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
TALZENNA CAP 0.25MG	\$0 (Tier 2) NDS, LA, PA
TALZENNA CAP 1MG	\$0 (Tier 2) NDS, LA, PA
TASIGNA CAP 50MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 150MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 200MG	\$0 (Tier 2) NDS, PA
TAZVERIK TAB 200MG	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 840/14	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 1200/20	\$0 (Tier 2) NDS, LA, PA
TEPMETKO TAB 225MG	\$0 (Tier 2) NDS, LA, PA
TIBSOVO TAB 250MG	\$0 (Tier 2) NDS, LA, PA
TRAZIMERA INJ 150MG	\$0 (Tier 2) NDS, PA
TRAZIMERA INJ 420MG	\$0 (Tier 2) NDS, PA
TRUSELTIQ CAP 50MG	\$0 (Tier 2) NDS, LA, PA
TRUSELTIQ CAP 75MG	\$0 (Tier 2) NDS, LA, PA
TRUSELTIQ CAP 100MG	\$0 (Tier 2) NDS, LA, PA
TRUSELTIQ CAP 125MG	\$0 (Tier 2) NDS, LA, PA
TRUXIMA INJ 100/10ML	\$0 (Tier 2) NDS, PA
TRUXIMA INJ 500/50ML	\$0 (Tier 2) NDS, PA
TUKYSA TAB 50MG	\$0 (Tier 2) NDS, LA, PA
TUKYSA TAB 150MG	\$0 (Tier 2) NDS, LA, PA
TURALIO CAP 200MG	\$0 (Tier 2) NDS, LA, PA
UKONIQ TAB 200MG	\$0 (Tier 2) NDS, LA, PA
VELCADE INJ 3.5MG	\$0 (Tier 2) NDS, PA
VENCLEXTA TAB 10MG	\$0 (Tier 2) QL (112 tabs / 28 days), LA, PA
VENCLEXTA TAB 50MG	\$0 (Tier 2) NDS, QL (112 tabs / 28 days), LA, PA
VENCLEXTA TAB 100MG	\$0 (Tier 2) NDS, QL (180 tabs / 30 days), LA, PA
VENCLEXTA TAB START PK	\$0 (Tier 2) NDS, QL (42 tabs / 28 days), LA, PA
VERZENIO TAB 50MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 150MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 200MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI CAP 25MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
VITRAKVI CAP 100MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI SOL 20MG/ML	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 15MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 30MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 45MG	\$0 (Tier 2) NDS, LA, PA
VOTRIENT TAB 200MG	\$0 (Tier 2) NDS, LA, PA
XALKORI CAP 200MG	\$0 (Tier 2) NDS, LA, PA
XALKORI CAP 250MG	\$0 (Tier 2) NDS, LA, PA
XOSPATA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 40MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 50MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 60MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 80MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 100MG	\$0 (Tier 2) NDS, LA, PA
ZEJULA CAP 100MG	\$0 (Tier 2) NDS, LA, PA
ZELBORAF TAB 240MG	\$0 (Tier 2) NDS, LA, PA
ZIRABEV INJ 100/4ML	\$0 (Tier 2) NDS, PA
ZIRABEV INJ 400/16ML	\$0 (Tier 2) NDS, PA
ZOLINZA CAP 100MG	\$0 (Tier 2) NDS, PA
ZYDELIG TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ZYDELIG TAB 150MG	\$0 (Tier 2) NDS, LA, PA
ZYKADIA TAB 150MG	\$0 (Tier 2) NDS, LA, PA

PROTECTIVE AGENTS

<i>leucovorin calcium for inj 50 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 100 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 200 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 350 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 500 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium tab 5 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 10 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 15 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 25 mg</i>	\$0 (Tier 1)
MESNEX TAB 400MG	\$0 (Tier 2) NDS

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION
CONDITIONS****ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD
PRESSURE**

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	\$0 (Tier 1)
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>benazepril hcl tab 5 mg</i>	\$0 (Tier 1)
<i>benazepril hcl tab 10 mg</i>	\$0 (Tier 1)
<i>benazepril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>benazepril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>captopril tab 12.5 mg</i>	\$0 (Tier 1)
<i>captopril tab 25 mg</i>	\$0 (Tier 1)
<i>captopril tab 50 mg</i>	\$0 (Tier 1)
<i>captopril tab 100 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 2.5 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 5 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 10 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 20 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 10 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 20 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 40 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 2.5 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 5 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 10 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 20 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 30 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 40 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 15 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 2 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 4 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 8 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 5 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 10 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>ramipril cap 1.25 mg</i>	\$0 (Tier 1)
<i>ramipril cap 2.5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 10 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 1 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>trandolapril tab 2 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 4 mg</i>	\$0 (Tier 1)
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>eplerenone tab 25 mg</i>	\$0 (Tier 1)
<i>eplerenone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 25 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 100 mg</i>	\$0 (Tier 1)
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>doxazosin mesylate tab 1 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 2 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 4 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 8 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 1 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 2 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 5 mg</i>	\$0 (Tier 1)
<i>terazosin hcl cap 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 10 mg (base equivalent)</i>	\$0 (Tier 1)
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
ENTRESTO TAB 24-26MG	\$0 (Tier 2)	
ENTRESTO TAB 49-51MG	\$0 (Tier 2)	
ENTRESTO TAB 97-103MG	\$0 (Tier 2)	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>candesartan cilexetil tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 8 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 16 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 32 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>irbesartan tab 75 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>irbesartan tab 150 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>irbesartan tab 300 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>losartan potassium tab 25 mg</i>	\$0 (Tier 1)
<i>losartan potassium tab 50 mg</i>	\$0 (Tier 1)
<i>losartan potassium tab 100 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil tab 5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olmesartan medoxomil tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olmesartan medoxomil tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>telmisartan tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>telmisartan tab 80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>valsartan tab 40 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>valsartan tab 80 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>valsartan tab 160 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>valsartan tab 320 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 400 mg</i>	\$0 (Tier 1)
<i>disopyramide phosphate cap 100 mg</i>	\$0 (Tier 2)
<i>disopyramide phosphate cap 150 mg</i>	\$0 (Tier 2)
<i>dofetilide cap 125 mcg (0.125 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 250 mcg (0.25 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 500 mcg (0.5 mg)</i>	\$0 (Tier 1)
<i>flecainide acetate tab 50 mg</i>	\$0 (Tier 1)
<i>flecainide acetate tab 100 mg</i>	\$0 (Tier 1)
<i>flecainide acetate tab 150 mg</i>	\$0 (Tier 1)
MULTAQ TAB 400MG	\$0 (Tier 2)
NORPACE CAP 100MG CR	\$0 (Tier 2)
NORPACE CAP 150MG CR	\$0 (Tier 2)
<i>pacerone tab 100mg</i>	\$0 (Tier 1)
<i>pacerone tab 200mg</i>	\$0 (Tier 1)
<i>pacerone tab 400mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 325 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 425 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 300 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 300 mg</i>	\$0 (Tier 1)
<i>sorine tab 80mg</i>	\$0 (Tier 1)
<i>sorine tab 120mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>sorine tab 160mg</i>	\$0 (Tier 1)
<i>sorine tab 240mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 240 mg</i>	\$0 (Tier 1)
ANTILIPEMICS, FIBRATES	
<i>fenofibrate micronized cap 67 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 134 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 200 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 48 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 54 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 145 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 160 mg</i>	\$0 (Tier 1)
<i>gemfibrozil tab 600 mg</i>	\$0 (Tier 1)
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>lovastatin tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>lovastatin tab 20 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>lovastatin tab 40 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>pravastatin sodium tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pravastatin sodium tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pravastatin sodium tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pravastatin sodium tab 80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>simvastatin tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>simvastatin tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>simvastatin tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>simvastatin tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>simvastatin tab 80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>cholestyramine light powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine light powder packets 4 gm</i>	\$0 (Tier 1)
<i>cholestyramine powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine powder packets 4 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl packet for susp 3.75 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl tab 625 mg</i>	\$0 (Tier 1)
<i>colestipol hcl granule packets 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl granules 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl tab 1 gm</i>	\$0 (Tier 1)
<i>ezetimibe tab 10 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
JUXTAPID CAP 5MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 10MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 20MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 30MG	\$0 (Tier 2) NDS, LA, PA
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
PRALUENT INJ 75MG/ML	\$0 (Tier 2) PA
PRALUENT INJ 150MG/ML	\$0 (Tier 2) PA
<i>prevalite pow 4gm</i>	\$0 (Tier 1)
<i>prevalite pow 4gm pk</i>	\$0 (Tier 1)
VASCEPA CAP 0.5GM	\$0 (Tier 2)
VASCEPA CAP 1GM	\$0 (Tier 2)

BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>atenolol & chlorthalidone tab 50-25 mg</i>	\$0 (Tier 1)
<i>atenolol & chlorthalidone tab 100-25 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	\$0 (Tier 1)
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	\$0 (Tier 1)
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	\$0 (Tier 1)

BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>acebutolol hcl cap 200 mg</i>	\$0 (Tier 1)
<i>acebutolol hcl cap 400 mg</i>	\$0 (Tier 1)
<i>atenolol tab 25 mg</i>	\$0 (Tier 1)
<i>atenolol tab 50 mg</i>	\$0 (Tier 1)
<i>atenolol tab 100 mg</i>	\$0 (Tier 1)
<i>betaxolol hcl tab 10 mg</i>	\$0 (Tier 1)
<i>betaxolol hcl tab 20 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 5 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 10 mg</i>	\$0 (Tier 1)
BYSTOLIC TAB 2.5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 20MG	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>carvedilol tab 3.125 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 6.25 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 12.5 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 25 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 100 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 200 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 300 mg</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 25 mg</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 50 mg</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 100 mg</i>	\$0 (Tier 1)
<i>nadolol tab 20 mg</i>	\$0 (Tier 1)
<i>nadolol tab 40 mg</i>	\$0 (Tier 1)
<i>nadolol tab 80 mg</i>	\$0 (Tier 1)
<i>pindolol tab 5 mg</i>	\$0 (Tier 1)
<i>pindolol tab 10 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 60 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 80 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 160 mg</i>	\$0 (Tier 1)
<i>propranolol hcl oral soln 20 mg/5ml</i>	\$0 (Tier 1)
<i>propranolol hcl oral soln 40 mg/5ml</i>	\$0 (Tier 1)
<i>propranolol hcl tab 10 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 20 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 40 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 60 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 80 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 5 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 10 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 20 mg</i>	\$0 (Tier 1)

CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>cartia xt cap 120/24hr</i>	\$0 (Tier 1)
<i>cartia xt cap 180/24hr</i>	\$0 (Tier 1)
<i>cartia xt cap 240/24hr</i>	\$0 (Tier 1)
<i>cartia xt cap 300/24hr</i>	\$0 (Tier 1)
<i>dilt-xr cap 120mg</i>	\$0 (Tier 1)
<i>dilt-xr cap 180mg</i>	\$0 (Tier 1)
<i>dilt-xr cap 240mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>diltiazem hcl cap er 12hr 60 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl cap er 12hr 90 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl cap er 12hr 120 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	\$0 (Tier 1)	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	\$0 (Tier 1)	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	\$0 (Tier 1)	
<i>diltiazem hcl tab 30 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl tab 60 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl tab 90 mg</i>	\$0 (Tier 1)	
<i>diltiazem hcl tab 120 mg</i>	\$0 (Tier 1)	
<i>felodipine tab er 24hr 2.5 mg</i>	\$0 (Tier 1)	
<i>felodipine tab er 24hr 5 mg</i>	\$0 (Tier 1)	
<i>felodipine tab er 24hr 10 mg</i>	\$0 (Tier 1)	
<i>isradipine cap 2.5 mg</i>	\$0 (Tier 1)	
<i>isradipine cap 5 mg</i>	\$0 (Tier 1)	
<i>nicardipine hcl cap 20 mg</i>	\$0 (Tier 1)	
<i>nicardipine hcl cap 30 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>nifedipine tab er 24hr 30 mg</i>	\$0 (Tier 1)	
<i>nifedipine tab er 24hr 60 mg</i>	\$0 (Tier 1)	
<i>nifedipine tab er 24hr 90 mg</i>	\$0 (Tier 1)	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	\$0 (Tier 1)	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	\$0 (Tier 1)	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	\$0 (Tier 1)	
<i>nimodipine cap 30 mg</i>	\$0 (Tier 1)	
NYMALIZE SOL	\$0 (Tier 2)	NDS
<i>taztia xt cap 120mg/24</i>	\$0 (Tier 1)	
<i>taztia xt cap 180mg/24</i>	\$0 (Tier 1)	
<i>taztia xt cap 240mg/24</i>	\$0 (Tier 1)	
<i>taztia xt cap 300mg er</i>	\$0 (Tier 1)	
<i>taztia xt cap 360mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 120mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 180mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 240mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 300mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 360mg/24</i>	\$0 (Tier 1)	
<i>tiadylt cap 420mg/24</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 100 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 180 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 200 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 240 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 300 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl cap er 24hr 360 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl iv soln 2.5 mg/ml</i>	\$0 (Tier 1)	
<i>verapamil hcl tab 40 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab 80 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab 120 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab er 120 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab er 180 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab er 240 mg</i>	\$0 (Tier 1)	
DIURETICS - DRUGS TO TREAT HEART CONDITIONS		
<i>acetazolamide cap er 12hr 500 mg</i>	\$0 (Tier 1)	
<i>acetazolamide tab 125 mg</i>	\$0 (Tier 1)	
<i>acetazolamide tab 250 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	\$0 (Tier 1)
<i>amiloride hcl tab 5 mg</i>	\$0 (Tier 1)
<i>bumetanide inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>bumetanide tab 0.5 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 1 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 2 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 25 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 50 mg</i>	\$0 (Tier 1)
<i>furosemide inj 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 8 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide tab 20 mg</i>	\$0 (Tier 1)
<i>furosemide tab 40 mg</i>	\$0 (Tier 1)
<i>furosemide tab 80 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide cap 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 25 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 50 mg</i>	\$0 (Tier 1)
<i>indapamide tab 1.25 mg</i>	\$0 (Tier 1)
<i>indapamide tab 2.5 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 25 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 50 mg</i>	\$0 (Tier 1)
<i>metolazone tab 2.5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 10 mg</i>	\$0 (Tier 1)
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 1)
<i>torsemide tab 5 mg</i>	\$0 (Tier 1)
<i>torsemide tab 10 mg</i>	\$0 (Tier 1)
<i>torsemide tab 20 mg</i>	\$0 (Tier 1)
<i>torsemide tab 100 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	\$0 (Tier 1)
MISCELLANEOUS	
ADRENALIN INJ 1MG/ML	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	\$0 (Tier 1)
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.1 mg</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.2 mg</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.3 mg</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.2 mg/24hr</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.3 mg/24hr</i>	\$0 (Tier 1)
CORLANOR SOL 5MG/5ML	\$0 (Tier 2)
CORLANOR TAB 5MG	\$0 (Tier 2)
CORLANOR TAB 7.5MG	\$0 (Tier 2)
<i>digitek tab 0.25mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digitek tab 0.125mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digox tab 0.25mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digox tab 0.125mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>digoxin oral soln 0.05 mg/ml</i>	\$0 (Tier 1)
<i>digoxin tab 125 mcg (0.125 mg)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>droxidopa cap 100 mg</i>	\$0 (Tier 2) NDS, QL (90 caps / 30 days), PA
<i>droxidopa cap 200 mg</i>	\$0 (Tier 2) NDS, QL (180 caps / 30 days), PA
<i>droxidopa cap 300 mg</i>	\$0 (Tier 2) NDS, QL (180 caps / 30 days), PA
<i>guanfacine hcl tab 1 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab 2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydralazine hcl inj 20 mg/ml</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>methyldopa tab 250 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methyldopa tab 500 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>metyrosine cap 250 mg</i>	\$0 (Tier 2) NDS, PA
<i>midodrine hcl tab 2.5 mg</i>	\$0 (Tier 1)
<i>midodrine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>midodrine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>minoxidil tab 2.5 mg</i>	\$0 (Tier 1)
<i>minoxidil tab 10 mg</i>	\$0 (Tier 1)
NORTHERA CAP 100MG	\$0 (Tier 2) NDS, QL (90 caps / 30 days), LA, PA
NORTHERA CAP 200MG	\$0 (Tier 2) NDS, QL (180 caps / 30 days), LA, PA
NORTHERA CAP 300MG	\$0 (Tier 2) NDS, QL (180 caps / 30 days), LA, PA
<i>ranolazine tab er 12hr 500 mg</i>	\$0 (Tier 1)
<i>ranolazine tab er 12hr 1000 mg</i>	\$0 (Tier 1)

NITRATES - DRUGS TO TREAT HEART CONDITIONS

<i>isosorbide dinitrate tab 5 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 10 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 20 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 30 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab 10 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab 20 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	\$0 (Tier 1)
<i>minitran dis 0.1mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.2mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.4mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.6mg/hr</i>	\$0 (Tier 1)
NITRO-BID OIN 2%	\$0 (Tier 2)
NITRO-DUR DIS 0.3MG/HR	\$0 (Tier 2)
NITRO-DUR DIS 0.8MG/HR	\$0 (Tier 2)
<i>nitroglycerin sl tab 0.3 mg</i>	\$0 (Tier 1)
<i>nitroglycerin sl tab 0.4 mg</i>	\$0 (Tier 1)
<i>nitroglycerin sl tab 0.6 mg</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT
PULMONARY HYPERTENSION**

ADEMPAS TAB 0.5MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 1.5MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 1MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 2.5MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 2MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), LA, PA
<i>ambrisentan tab 5 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
<i>ambrisentan tab 10 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
<i>bosentan tab 62.5 mg</i>	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
<i>bosentan tab 125 mg</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
OPSUMIT TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
<i>sildenafil citrate tab 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	\$0 (Tier 2) NDS, LA, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	\$0 (Tier 2) NDS, LA, PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	\$0 (Tier 2) NDS, LA, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	\$0 (Tier 2) NDS, LA, PA
VENTAVIS SOL 10MCG/ML	\$0 (Tier 2) NDS, PA
VENTAVIS SOL 20MCG/ML	\$0 (Tier 2) NDS, PA

**CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM
DISORDERS****ANTIANXIETY - DRUGS TO TREAT ANXIETY**

<i>alprazolam tab 0.5 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>buspirone hcl tab 5 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 10 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 15 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 30 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 25 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 50 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 100 mg</i>	\$0 (Tier 1)
<i>lorazepam con 2mg/ml</i>	\$0 (Tier 1) QL (150 mL / 30 days)
<i>lorazepam conc 2 mg/ml</i>	\$0 (Tier 1) QL (150 mL / 30 days)
<i>lorazepam inj 2 mg/ml</i>	\$0 (Tier 1)
<i>lorazepam inj 4 mg/ml</i>	\$0 (Tier 1)
<i>lorazepam tab 0.5 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>lorazepam tab 1 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>lorazepam tab 2 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)

ANTICONVULSANTS - DRUGS TO TREAT SEIZURES

APTiom TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTiom TAB 400MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTiom TAB 600MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTiom TAB 800MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
BANZEL TAB 200MG	\$0 (Tier 2) NDS, PA
BANZEL TAB 400MG	\$0 (Tier 2) NDS, PA
BRIVIACT INJ 50MG/5ML	\$0 (Tier 2) PA
BRIVIACT SOL 10MG/ML	\$0 (Tier 2) NDS, QL (600 mL / 30 days), PA
BRIVIACT TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 25MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 50MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 75MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 100MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine cap er 12hr 100 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>carbamazepine cap er 12hr 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine cap er 12hr 300 mg</i>	\$0 (Tier 1)
<i>carbamazepine chew tab 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>carbamazepine tab 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 400 mg</i>	\$0 (Tier 1)
CELONTIN CAP 300MG	\$0 (Tier 2)
<i>clobazam suspension 2.5 mg/ml</i>	\$0 (Tier 1) QL (480 mL / 30 days), PA
<i>clobazam tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>clobazam tab 20 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
DIACOMIT CAP 250MG	\$0 (Tier 2) NDS, LA, PA
DIACOMIT CAP 500MG	\$0 (Tier 2) NDS, LA, PA
DIACOMIT PAK 250MG	\$0 (Tier 2) NDS, LA, PA
DIACOMIT PAK 500MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>diazepam conc 5 mg/ml</i>	\$0 (Tier 1)	QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam inj 5 mg/ml</i>	\$0 (Tier 1)	
<i>diazepam oral soln 1 mg/ml</i>	\$0 (Tier 1)	QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam rectal gel delivery system 2.5 mg</i>	\$0 (Tier 1)	
<i>diazepam rectal gel delivery system 10 mg</i>	\$0 (Tier 1)	
<i>diazepam rectal gel delivery system 20 mg</i>	\$0 (Tier 1)	
<i>diazepam tab 2 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 10 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	\$0 (Tier 2)	
DILANTIN CAP 100MG	\$0 (Tier 2)	
DILANTIN CHW 50MG	\$0 (Tier 2)	
DILANTIN-125 SUS 125/5ML	\$0 (Tier 2)	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 500 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 500 mg</i>	\$0 (Tier 1)	
EPIDIOLEX SOL 100MG/ML	\$0 (Tier 2)	NDS, QL (600 mL / 30 days), LA, PA
<i>epitol tab 200mg</i>	\$0 (Tier 1)	
<i>ethosuximide cap 250 mg</i>	\$0 (Tier 1)	
<i>ethosuximide soln 250 mg/5ml</i>	\$0 (Tier 1)	
<i>felbamate susp 600 mg/5ml</i>	\$0 (Tier 2)	NDS
<i>felbamate tab 400 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>felbamate tab 600 mg</i>	\$0 (Tier 1)
FINTEPLA SOL 2.2MG/ML	\$0 (Tier 2) NDS, QL (360 mL / 30 days), LA, PA
FYCOMPA SUS 0.5MG/ML	\$0 (Tier 2) NDS, QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FYCOMPA TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>gabapentin cap 100 mg</i>	\$0 (Tier 1) QL (1080 caps / 30 days)
<i>gabapentin cap 300 mg</i>	\$0 (Tier 1) QL (360 caps / 30 days)
<i>gabapentin cap 400 mg</i>	\$0 (Tier 1) QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	\$0 (Tier 1) QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>lamotrigine tab 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 150 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 5 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 50 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 250 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 300 mg</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	\$0 (Tier 1)	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	\$0 (Tier 1)	
<i>levetiracetam oral soln 100 mg/ml</i>	\$0 (Tier 1)	
<i>levetiracetam tab 250 mg</i>	\$0 (Tier 1)	
<i>levetiracetam tab 500 mg</i>	\$0 (Tier 1)	
<i>levetiracetam tab 750 mg</i>	\$0 (Tier 1)	
<i>levetiracetam tab 1000 mg</i>	\$0 (Tier 1)	
<i>levetiracetam tab er 24hr 500 mg</i>	\$0 (Tier 1)	
<i>levetiracetam tab er 24hr 750 mg</i>	\$0 (Tier 1)	
NAYZILAM SPR 5MG	\$0 (Tier 2)	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	\$0 (Tier 1)	
<i>oxcarbazepine tab 150 mg</i>	\$0 (Tier 1)	
<i>oxcarbazepine tab 300 mg</i>	\$0 (Tier 1)	
<i>oxcarbazepine tab 600 mg</i>	\$0 (Tier 1)	
PEGANONE TAB 250MG	\$0 (Tier 2)	
<i>phenobarbital elixir 20 mg/5ml</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital sodium inj 65 mg/ml</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 15 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 16.2 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 30 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 60 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>phenobarbital tab 100 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
PHENYTEK CAP 200MG	\$0 (Tier 2)	
PHENYTEK CAP 300MG	\$0 (Tier 2)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>phenytoin chew tab 50 mg</i>	\$0 (Tier 1)	
<i>phenytoin sodium extended cap 100 mg</i>	\$0 (Tier 1)	
<i>phenytoin sodium extended cap 200 mg</i>	\$0 (Tier 1)	
<i>phenytoin sodium extended cap 300 mg</i>	\$0 (Tier 1)	
<i>phenytoin sodium inj 50 mg/ml</i>	\$0 (Tier 1)	
<i>phenytoin susp 125 mg/5ml</i>	\$0 (Tier 1)	
<i>pregabalin cap 25 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 50 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 75 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 100 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 150 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 200 mg</i>	\$0 (Tier 1)	QL (90 caps / 30 days), PA
<i>pregabalin cap 225 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days), PA
<i>pregabalin cap 300 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days), PA
<i>pregabalin soln 20 mg/ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days), PA
<i>primidone tab 50 mg</i>	\$0 (Tier 1)	
<i>primidone tab 250 mg</i>	\$0 (Tier 1)	
<i>roweepra tab 500mg</i>	\$0 (Tier 1)	
<i>rufinamide susp 40 mg/ml</i>	\$0 (Tier 2)	NDS, PA
<i>rufinamide tab 200 mg</i>	\$0 (Tier 2)	NDS, PA
<i>rufinamide tab 400 mg</i>	\$0 (Tier 2)	NDS, PA
SPRITAM TAB 250MG	\$0 (Tier 2)	
SPRITAM TAB 500MG	\$0 (Tier 2)	
SPRITAM TAB 750MG	\$0 (Tier 2)	
SPRITAM TAB 1000MG	\$0 (Tier 2)	
<i>subvenite tab 25mg</i>	\$0 (Tier 1)	
<i>subvenite tab 100mg</i>	\$0 (Tier 1)	
<i>subvenite tab 150mg</i>	\$0 (Tier 1)	
<i>subvenite tab 200mg</i>	\$0 (Tier 1)	
SYMPAZAN MIS 5MG	\$0 (Tier 2)	QL (60 films / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
SYMPAZAN MIS 10MG	\$0 (Tier 2)	NDS, QL (60 films / 30 days), PA
SYMPAZAN MIS 20MG	\$0 (Tier 2)	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl tab 2 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 4 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 12 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 16 mg</i>	\$0 (Tier 1)	
<i>topiramate sprinkle cap 15 mg</i>	\$0 (Tier 1)	
<i>topiramate sprinkle cap 25 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 25 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 50 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 100 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 200 mg</i>	\$0 (Tier 1)	
<i>valproate sodium inj 100 mg/ml</i>	\$0 (Tier 1)	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	\$0 (Tier 1)	
<i>valproic acid cap 250 mg</i>	\$0 (Tier 1)	
VALTOCO SPR 5MG	\$0 (Tier 2)	
VALTOCO SPR 10MG	\$0 (Tier 2)	
VALTOCO SPR 15MG	\$0 (Tier 2)	
VALTOCO SPR 20MG	\$0 (Tier 2)	
<i>vigabatrin powd pack 500 mg</i>	\$0 (Tier 2)	NDS, QL (180 packets / 30 days), LA, PA
<i>vigabatrin tab 500 mg</i>	\$0 (Tier 2)	NDS, QL (180 tabs / 30 days), LA, PA
<i>vigadrone pow 500mg</i>	\$0 (Tier 2)	NDS, QL (180 packets / 30 days), LA, PA
VIMPAT INJ 200MG/20	\$0 (Tier 2)	NDS
VIMPAT SOL 10MG/ML	\$0 (Tier 2)	NDS, QL (1200 mL / 30 days)
VIMPAT TAB 50MG	\$0 (Tier 2)	QL (120 tabs / 30 days)
VIMPAT TAB 100MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
VIMPAT TAB 150MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
VIMPAT TAB 200MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	\$0 (Tier 2)	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0 (Tier 2)	NDS, QL (28 tabs / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
XCOPRI PAK 50-200MG	\$0 (Tier 2) NDS, QL (56 tabs / 28 days)
XCOPRI PAK 100-150	\$0 (Tier 2) NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200	\$0 (Tier 2) NDS, QL (28 tabs / 28 days)
XCOPRI PAK 150-200	\$0 (Tier 2) NDS, QL (56 tabs / 28 days)
XCOPRI TAB 50MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days)
XCOPRI TAB 100MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
XCOPRI TAB 150MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
XCOPRI TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>zonisamide cap 25 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 50 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 100 mg</i>	\$0 (Tier 1)

ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	\$0 (Tier 1)
<i>donepezil hydrochloride tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride tab 10 mg</i>	\$0 (Tier 1)
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	\$0 (Tier 1)
<i>galantamine hydrobromide tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 8 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 12 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>memantine hcl cap er 24hr 7 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 14 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 21 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 28 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>memantine hcl oral solution 2 mg/ml</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 5 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 10 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	\$0 (Tier 2) PA; PA if < 30 yrs
NAMZARIC CAP	\$0 (Tier 2)
NAMZARIC CAP 7-10MG	\$0 (Tier 2)
NAMZARIC CAP 14-10MG	\$0 (Tier 2)
NAMZARIC CAP 21-10MG	\$0 (Tier 2)
NAMZARIC CAP 28-10MG	\$0 (Tier 2)
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)

ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION

<i>amitriptyline hcl tab 10 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 25 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 50 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 75 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 100 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 150 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 25 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 50 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 100 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 150 mg</i>	\$0 (Tier 2)
<i>bupropion hcl tab 75 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab 100 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 150 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 200 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>bupropion hcl tab er 24hr 150 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 24hr 300 mg</i>	\$0 (Tier 1)
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	\$0 (Tier 1)
<i>clomipramine hcl cap 25 mg</i>	\$0 (Tier 2) PA
<i>clomipramine hcl cap 50 mg</i>	\$0 (Tier 2) PA
<i>clomipramine hcl cap 75 mg</i>	\$0 (Tier 2) PA
<i>desipramine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 25 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 50 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 75 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 100 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 150 mg</i>	\$0 (Tier 2)
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>doxepin hcl cap 10 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 25 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 50 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 75 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 100 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 150 mg</i>	\$0 (Tier 2)
<i>doxepin hcl conc 10 mg/ml</i>	\$0 (Tier 2)
DRIZALMA CAP 20MG DR	\$0 (Tier 2) QL (60 caps / 30 days), PA
DRIZALMA CAP 30MG DR	\$0 (Tier 2) QL (60 caps / 30 days), PA
DRIZALMA CAP 40MG DR	\$0 (Tier 2) QL (60 caps / 30 days), PA
DRIZALMA CAP 60MG DR	\$0 (Tier 2) QL (60 caps / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	\$0 (Tier 1)	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	\$0 (Tier 1)	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	\$0 (Tier 1)	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	\$0 (Tier 1)	
FETZIMA CAP 20MG	\$0 (Tier 2)	QL (60 caps / 30 days), PA
FETZIMA CAP 40MG	\$0 (Tier 2)	QL (60 caps / 30 days), PA
FETZIMA CAP 80MG	\$0 (Tier 2)	QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	\$0 (Tier 2)	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	\$0 (Tier 2)	PA
<i>fluoxetine hcl cap 10 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl cap 20 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl cap 40 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl solution 20 mg/5ml</i>	\$0 (Tier 1)	
<i>imipramine hcl tab 10 mg</i>	\$0 (Tier 2)	
<i>imipramine hcl tab 25 mg</i>	\$0 (Tier 2)	
<i>imipramine hcl tab 50 mg</i>	\$0 (Tier 2)	
MARPLAN TAB 10MG	\$0 (Tier 2)	QL (180 tabs / 30 days)
<i>mirtazapine orally disintegrating tab 15 mg</i>	\$0 (Tier 1)	
<i>mirtazapine orally disintegrating tab 30 mg</i>	\$0 (Tier 1)	
<i>mirtazapine orally disintegrating tab 45 mg</i>	\$0 (Tier 1)	
<i>mirtazapine tab 7.5 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>mirtazapine tab 15 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 30 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 45 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 50 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 250 mg</i>	\$0 (Tier 1)
<i>nortriptyline hcl cap 10 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 25 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 50 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 75 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl soln 10 mg/5ml</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 20 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 30 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 40 mg</i>	\$0 (Tier 2)
PAXIL SUS 10MG/5ML	\$0 (Tier 2) QL (900 mL / 30 days)
<i>phenelzine sulfate tab 15 mg</i>	\$0 (Tier 1)
<i>protriptyline hcl tab 5 mg</i>	\$0 (Tier 2)
<i>protriptyline hcl tab 10 mg</i>	\$0 (Tier 2)
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	\$0 (Tier 1)
<i>sertraline hcl tab 25 mg</i>	\$0 (Tier 1)
<i>sertraline hcl tab 50 mg</i>	\$0 (Tier 1)
<i>sertraline hcl tab 100 mg</i>	\$0 (Tier 1)
<i>tranylcypromine sulfate tab 10 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 50 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>trimipramine maleate cap 25 mg</i>	\$0 (Tier 2) QL (240 caps / 30 days)
<i>trimipramine maleate cap 50 mg</i>	\$0 (Tier 2) QL (120 caps / 30 days)
<i>trimipramine maleate cap 100 mg</i>	\$0 (Tier 2) QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	\$0 (Tier 2) QL (120 tabs / 30 days)
TRINTELLIX TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
TRINTELLIX TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 1)
VIIBRYD KIT STARTER	\$0 (Tier 2)
VIIBRYD TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
VIIBRYD TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
VIIBRYD TAB 40MG	\$0 (Tier 2) QL (30 tabs / 30 days)

ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE

<i>amantadine hcl cap 100 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>amantadine hcl syrup 50 mg/5ml</i>	\$0 (Tier 1)
<i>amantadine hcl tab 100 mg</i>	\$0 (Tier 1)
APOKYN INJ 10MG/ML	\$0 (Tier 2) NDS, QL (20 cartridges / 30 days), LA, PA
<i>benztropine mesylate inj 1 mg/ml</i>	\$0 (Tier 1)
<i>benztropine mesylate tab 0.5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>benztropine mesylate tab 1 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>benztropine mesylate tab 2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab 10-100 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>carbidopa & levodopa tab 25-100 mg</i>	\$0 (Tier 1)	
<i>carbidopa & levodopa tab 25-250 mg</i>	\$0 (Tier 1)	
<i>carbidopa & levodopa tab er 25-100 mg</i>	\$0 (Tier 1)	
<i>carbidopa & levodopa tab er 50-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0 (Tier 1)	
<i>entacapone tab 200 mg</i>	\$0 (Tier 1)	
KYNMOBI MIS 10MG	\$0 (Tier 2)	NDS, QL (150 films / 30 days), PA
KYNMOBI MIS 15MG	\$0 (Tier 2)	NDS, QL (150 films / 30 days), PA
KYNMOBI MIS 20MG	\$0 (Tier 2)	NDS, QL (150 films / 30 days), PA
KYNMOBI MIS 25MG	\$0 (Tier 2)	NDS, QL (150 films / 30 days), PA
KYNMOBI MIS 30MG	\$0 (Tier 2)	NDS, QL (150 films / 30 days), PA
NEUPRO DIS 1MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 2MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 3MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 4MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 6MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 8MG/24HR	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	\$0 (Tier 1)	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ropinirole hydrochloride tab 0.5 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 0.25 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 1 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 2 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 3 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 4 mg</i>	\$0 (Tier 1)
<i>ropinirole hydrochloride tab 5 mg</i>	\$0 (Tier 1)
<i>selegiline hcl cap 5 mg</i>	\$0 (Tier 1)
<i>selegiline hcl tab 5 mg</i>	\$0 (Tier 1)
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older

ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES

ABILIFY MAIN INJ 300MG	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ABILIFY MAIN INJ 400MG	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	\$0 (Tier 2) NDS, QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>aripiprazole orally disintegrating tab 15 mg</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>aripiprazole tab 2 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 1064MG	\$0 (Tier 2) NDS, QL (1 injection / 56 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ARISTADA INJ INITIO	\$0 (Tier 2) NDS
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
CAPLYTA CAP 42MG	\$0 (Tier 2) QL (30 caps / 30 days)
<i>chlorpromazine hcl inj 25 mg/ml</i>	\$0 (Tier 1)
<i>chlorpromazine hcl inj 50 mg/2ml</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 200 mg</i>	\$0 (Tier 1)
<i>clozapine orally disintegrating tab 12.5 mg</i>	\$0 (Tier 1) PA
<i>clozapine orally disintegrating tab 25 mg</i>	\$0 (Tier 1) PA
<i>clozapine orally disintegrating tab 100 mg</i>	\$0 (Tier 1) QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	\$0 (Tier 2) NDS, QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	\$0 (Tier 2) NDS, QL (135 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	\$0 (Tier 1)
<i>clozapine tab 50 mg</i>	\$0 (Tier 1)
<i>clozapine tab 100 mg</i>	\$0 (Tier 1) QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	\$0 (Tier 1) QL (135 tabs / 30 days)
FANAPT PAK	\$0 (Tier 2) PA
FANAPT TAB 1MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 2MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 4MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 8MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
FANAPT TAB 12MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
<i>fluphenazine decanoate inj 25 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl inj 2.5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl oral conc 5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 1 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 2.5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>haloperidol decanoate im soln 50 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol decanoate im soln 100 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate inj 5 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate oral conc 2 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol tab 0.5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 1 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 2 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 10 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 20 mg</i>	\$0 (Tier 1)
INVEGA SUST INJ 39/0.25	\$0 (Tier 2) QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 117/0.75	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 234/1.5	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 546MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 819MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
LATUDA TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
LATUDA TAB 40MG	\$0 (Tier 2) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LATUDA TAB 60MG	\$0 (Tier 2) QL (30 tabs / 30 days)
LATUDA TAB 80MG	\$0 (Tier 2) QL (60 tabs / 30 days)
LATUDA TAB 120MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>loxapine succinate cap 5 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 10 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 25 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 50 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 5 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 10 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 25 mg</i>	\$0 (Tier 1)
NUPLAZID CAP 34MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), LA, PA
NUPLAZID TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
<i>olanzapine for im inj 10 mg</i>	\$0 (Tier 1) QL (3 vials / 1 day)
<i>olanzapine orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine orally disintegrating tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 2.5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 1.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>perphenazine tab 2 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 4 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 8 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 16 mg</i>	\$0 (Tier 1)
PERSERIS INJ 90MG	\$0 (Tier 2) NDS, QL (1 injection / 30 days)
PERSERIS INJ 120MG	\$0 (Tier 2) NDS, QL (1 injection / 30 days)
<i>pimozide tab 1 mg</i>	\$0 (Tier 1)
<i>pimozide tab 2 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 25 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>quetiapine fumarate tab 50 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 100 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 200 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 300 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 400 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab er 24hr 50 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 150 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 200 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 300 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 400 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
REXULTI TAB 0.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
REXULTI TAB 0.25MG	\$0 (Tier 2) QL (60 tabs / 30 days)
REXULTI TAB 1MG	\$0 (Tier 2) QL (60 tabs / 30 days)
REXULTI TAB 2MG	\$0 (Tier 2) QL (60 tabs / 30 days)
REXULTI TAB 3MG	\$0 (Tier 2) QL (30 tabs / 30 days)
REXULTI TAB 4MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	\$0 (Tier 2) QL (2 injections / 28 days)
RISPERDAL INJ 25MG	\$0 (Tier 2) QL (2 injections / 28 days)
RISPERDAL INJ 37.5MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
RISPERDAL INJ 50MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
<i>risperidone orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 3 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone soln 1 mg/ml</i>	\$0 (Tier 1) QL (240 mL / 30 days)
<i>risperidone tab 0.5 mg</i>	\$0 (Tier 1)
<i>risperidone tab 0.25 mg</i>	\$0 (Tier 1)
<i>risperidone tab 1 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>risperidone tab 2 mg</i>	\$0 (Tier 1)
<i>risperidone tab 3 mg</i>	\$0 (Tier 1)
<i>risperidone tab 4 mg</i>	\$0 (Tier 1)
SECUADO DIS 3.8MG	\$0 (Tier 2) QL (30 patches / 30 days)
SECUADO DIS 5.7MG	\$0 (Tier 2) QL (30 patches / 30 days)
SECUADO DIS 7.6MG	\$0 (Tier 2) QL (30 patches / 30 days)
<i>thioridazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 1 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 2 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 5 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 10 mg</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
VERSACLOZ SUS 50MG/ML	\$0 (Tier 2) NDS, QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	\$0 (Tier 2) PA
VRAYLAR CAP 1.5MG	\$0 (Tier 2) NDS, QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
<i>ziprasidone hcl cap 20 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	\$0 (Tier 1)	QL (6 injections / 3 days)
ZYPREXA RELP INJ 210MG	\$0 (Tier 2)	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	\$0 (Tier 2)	NDS, QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	\$0 (Tier 2)	NDS, QL (1 vial / 28 days), PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	\$0 (Tier 1)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	\$0 (Tier 1)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	\$0 (Tier 1)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 caps / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl tab 5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl tab 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>metadate tab 20mg er</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl soln 5 mg/5ml</i>	\$0 (Tier 1)	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl soln 10 mg/5ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days), PA
<i>methylphenidate hcl tab 5 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl tab 10 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl tab 20 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl tab er 10 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl tab er 20 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
HYPNOTICS - DRUGS TO TREAT INSOMNIA		
BELSOMRA TAB 5MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
BELSOMRA TAB 10MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
BELSOMRA TAB 15MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
BELSOMRA TAB 20MG	\$0 (Tier 2)	QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>eszopiclone tab 1 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>eszopiclone tab 2 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>eszopiclone tab 3 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
HETLIOZ CAP 20MG	\$0 (Tier 2)	NDS, LA, PA
<i>temazepam cap 7.5 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam cap 15 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam cap 30 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days), PA; PA if 65 years and older
<i>zaleplon cap 5 mg</i>	\$0 (Tier 2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon cap 10 mg</i>	\$0 (Tier 2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>zolpidem tartrate tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 10 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES

<i>AIMOVIG INJ 70MG/ML</i>	\$0 (Tier 2)	QL (1 pen / 30 days), PA
<i>AIMOVIG INJ 140MG/ML</i>	\$0 (Tier 2)	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	\$0 (Tier 2)	NDS
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	\$0 (Tier 2)	NDS, QL (8 mL / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	\$0 (Tier 1)	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	\$0 (Tier 1)	QL (24 inhalers / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	\$0 (Tier 1)	QL (12 inhalers / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	\$0 (Tier 1)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	\$0 (Tier 1)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>sumatriptan succinate tab 25 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
UBRELVY TAB 50MG	\$0 (Tier 2) NDS, QL (16 tabs / 30 days), PA
UBRELVY TAB 100MG	\$0 (Tier 2) NDS, QL (16 tabs / 30 days), PA
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
MISCELLANEOUS	
AUSTEDO TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
AUSTEDO TAB 9MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), PA
AUSTEDO TAB 12MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), PA
INGREZZA CAP 40-80MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
INGREZZA CAP 40MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
INGREZZA CAP 60MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
INGREZZA CAP 80MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
<i>lithium carbonate cap 150 mg</i>	\$0 (Tier 1)
<i>lithium carbonate cap 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate cap 600 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab er 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab er 450 mg</i>	\$0 (Tier 1)
LITHIUM SOL 8MEQ/5ML	\$0 (Tier 2)
LYRICA CR TAB 82.5MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
LYRICA CR TAB 165MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
LYRICA CR TAB 330MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
NUEDEXTA CAP 20-10MG	\$0 (Tier 2)	QL (60 caps / 30 days), PA
<i>pregabalin tab er 24hr 82.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>pregabalin tab er 24hr 165 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>pregabalin tab er 24hr 330 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	\$0 (Tier 1)	
<i>riluzole tab 50 mg</i>	\$0 (Tier 1)	
<i>tetrabenazine tab 12.5 mg</i>	\$0 (Tier 2)	NDS, QL (90 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	\$0 (Tier 2)	NDS, QL (120 tabs / 30 days), PA

MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS

BETASERON INJ 0.3MG	\$0 (Tier 2)	NDS, QL (14 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	\$0 (Tier 1)	PA
GILENYA CAP 0.5MG	\$0 (Tier 2)	NDS, QL (28 caps / 28 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	\$0 (Tier 2)	NDS, QL (30 syringes / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	\$0 (Tier 2)	NDS, QL (12 syringes / 28 days), PA
<i>glatopa inj 20mg/ml</i>	\$0 (Tier 2)	NDS, QL (30 syringes / 30 days), PA
<i>glatopa inj 40mg/ml</i>	\$0 (Tier 2)	NDS, QL (12 syringes / 28 days), PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen tab 10 mg</i>	\$0 (Tier 1)	
<i>baclofen tab 20 mg</i>	\$0 (Tier 1)	
<i>carisoprodol tab 350 mg</i>	\$0 (Tier 2)	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 5 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 10 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>dantrolene sodium cap 25 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>dantrolene sodium cap 50 mg</i>	\$0 (Tier 1)
<i>dantrolene sodium cap 100 mg</i>	\$0 (Tier 1)
<i>methocarbamol tab 500 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methocarbamol tab 750 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	\$0 (Tier 1)
<i>vanadom tab 350mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older

NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS

<i>armodafinil tab 50 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
XYREM SOL 500MG/ML	\$0 (Tier 2) NDS, QL (540 mL / 30 days), LA, PA

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	\$0 (Tier 1)
<i>benzphetamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	\$0 (Tier 1) QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	\$0 (Tier 1)
CHANTIX PAK 0.5& 1MG	\$0 (Tier 2) PA
CHANTIX PAK 1MG	\$0 (Tier 2) PA
CHANTIX TAB 0.5MG	\$0 (Tier 2) PA
CHANTIX TAB 1MG	\$0 (Tier 2) PA
<i>diethylpropion hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>diethylpropion hcl tab er 24hr 75 mg</i>	\$0 (Tier 3) DP
<i>disulfiram tab 250 mg</i>	\$0 (Tier 1)
<i>disulfiram tab 500 mg</i>	\$0 (Tier 1)
<i>gnp nicotine gum 2mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine gum 2mg orig</i>	\$0 (Tier 3) DP
<i>gnp nicotine gum 4mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz 2mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz 4mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz mini 2mg</i>	\$0 (Tier 3) DP
<i>hm nicotine gum 2mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine gum 4mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine loz 2mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine loz 4mg mint</i>	\$0 (Tier 3) DP
<i>naloxone hcl inj 0.4 mg/ml</i>	\$0 (Tier 1)
<i>naloxone hcl inj 4 mg/10ml</i>	\$0 (Tier 1)
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	\$0 (Tier 1)
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	\$0 (Tier 1)
<i>naltrexone hcl tab 50 mg</i>	\$0 (Tier 1)
NARCAN SPR	\$0 (Tier 2)
<i>nicotine gum 4mg</i>	\$0 (Tier 3) DP
<i>nicotine pol loz 4mg mint</i>	\$0 (Tier 3) DP
<i>nicotine polacrilex gum 2 mg</i>	\$0 (Tier 3) DP
<i>nicotine polacrilex gum 4 mg</i>	\$0 (Tier 3) DP
<i>nicotine polacrilex lozenge 2 mg</i>	\$0 (Tier 3) DP
<i>nicotine polacrilex lozenge 4 mg</i>	\$0 (Tier 3) DP
<i>nicotine td patch 24hr 7 mg/24hr</i>	\$0 (Tier 3) DP
<i>nicotine td patch 24hr 14 mg/24hr</i>	\$0 (Tier 3) DP
<i>nicotine td patch 24hr 21 mg/24hr</i>	\$0 (Tier 3) DP
NICOTROL INH	\$0 (Tier 2)
NICOTROL NS SPR 10MG/ML	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>phendimetrazine tartrate cap er 24hr 105 mg</i>	\$0 (Tier 3) DP
<i>phendimetrazine tartrate tab 35 mg</i>	\$0 (Tier 3) DP
<i>phentermine hcl cap 15 mg</i>	\$0 (Tier 3) DP
<i>phentermine hcl cap 30 mg</i>	\$0 (Tier 3) DP
<i>phentermine hcl cap 37.5 mg</i>	\$0 (Tier 3) DP
<i>phentermine hcl tab 37.5 mg</i>	\$0 (Tier 3) DP
<i>QSYMIA CAP 3.75-23</i>	\$0 (Tier 3) DP
<i>QSYMIA CAP 7.5-46MG</i>	\$0 (Tier 3) DP
<i>QSYMIA CAP 11.25-69</i>	\$0 (Tier 3) DP
<i>QSYMIA CAP 15-92MG</i>	\$0 (Tier 3) DP
<i>sm nicotine gum 2mg</i>	\$0 (Tier 3) DP
<i>sm nicotine gum 2mg mint</i>	\$0 (Tier 3) DP
<i>sm nicotine gum 4mg</i>	\$0 (Tier 3) DP
<i>sm nicotine gum 4mg mint</i>	\$0 (Tier 3) DP
<i>sm nicotine loz 2mg mint</i>	\$0 (Tier 3) DP
<i>sm nicotine loz 4mg mint</i>	\$0 (Tier 3) DP
<i>thrive gum 2mg mint</i>	\$0 (Tier 3) DP
<i>VIVITROL INJ 380MG</i>	\$0 (Tier 2) NDS

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

<i>ANDRODERM DIS 2MG/24HR</i>	\$0 (Tier 2) QL (30 patches / 30 days), PA
<i>ANDRODERM DIS 4MG/24HR</i>	\$0 (Tier 2) QL (30 patches / 30 days), PA
<i>oxandrolone tab 2.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days), PA
<i>oxandrolone tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	\$0 (Tier 1) QL (300 gm / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	\$0 (Tier 1) QL (300 gm / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>testosterone td gel 50 mg/5gm (1%)</i>	\$0 (Tier 1) QL (300 gm / 30 days), PA
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ANTIDIABETICS

<i>acarbose tab 25 mg</i>	\$0 (Tier 1)
<i>acarbose tab 50 mg</i>	\$0 (Tier 1)
<i>acarbose tab 100 mg</i>	\$0 (Tier 1)
BYDUREON BC INJ 2/0.85ML	\$0 (Tier 2) QL (4 pens / 28 days)
BYDUREON PEN INJ 2MG	\$0 (Tier 2) QL (4 pens / 28 days)
BYETTA INJ 5MCG	\$0 (Tier 2) QL (1 pen / 30 days)
BYETTA INJ 10MCG	\$0 (Tier 2) QL (1 pen / 30 days)
FARXIGA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
FARXIGA TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>glipizide tab 5 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>glipizide xl tab 2.5mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide xl tab 5mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide xl tab 10mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	\$0 (Tier 2) QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET TAB 50-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 50MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 100MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
JENTADUETO TAB 2.5-850	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	\$0 (Tier 1) QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl tab er 24hr 750 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide tab 60 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>nateglinide tab 120 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
OZEMPIC INJ 2/1.5ML	\$0 (Tier 2) QL (1 pen / 28 days)
OZEMPIC INJ 2/1.5ML	\$0 (Tier 2) QL (2 pens / 28 days)
OZEMPIC INJ 4MG/3ML	\$0 (Tier 2) QL (1 pen / 28 days)
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 1 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 2 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
RYBELSUS TAB 3MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RYBELSUS TAB 7MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RYBELSUS TAB 14MG	\$0 (Tier 2) QL (30 tabs / 30 days)
SYNJARDY TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	\$0 (Tier 2) QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
TRIJARDY XR TAB	\$0 (Tier 2) QL (30 tabs / 30 days)
TRIJARDY XR TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
TRULICITY INJ 0.75/0.5	\$0 (Tier 2) QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	\$0 (Tier 2) QL (4 pens / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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TRULICITY INJ 3/0.5	\$0 (Tier 2) QL (4 pens / 28 days)
TRULICITY INJ 4.5/0.5	\$0 (Tier 2) QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	\$0 (Tier 2) QL (3 pens / 30 days)
XIGDUO XR TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0 (Tier 2) QL (30 tabs / 30 days)

ANTIDIABETICS, INSULINS

BASAGLAR INJ 100UNIT	\$0 (Tier 2)
BD ALCOHOL SWABS	\$0 (Tier 2)
FIASP FLEX INJ TOUCH	\$0 (Tier 2)
FIASP INJ 100/ML	\$0 (Tier 2)
FIASP PENFIL INJ U-100	\$0 (Tier 2)
GAUZE PADS 2" X 2"	\$0 (Tier 2)
HUMULIN R INJ U-500	\$0 (Tier 2) NDS
HUMULIN R INJ U-500	\$0 (Tier 2) NDS, B/D
INSULIN SAFETY NEEDLES	\$0 (Tier 2)
INSULIN SYRINGES: BD/ULTIMED/ALLISON/TRIVIDIA/MHC	\$0 (Tier 2)
LEVEMIR INJ	\$0 (Tier 2)
LEVEMIR INJ FLEXTUOC	\$0 (Tier 2)
NOVOLIN INJ 70/30	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN INJ 70/30 FP	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN N INJ 100 UNIT	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN N INJ U-100	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN R INJ 100 UNIT	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN R INJ U-100	\$0 (Tier 2) (brand RELION not covered)
NOVOLOG INJ 100/ML	\$0 (Tier 2) (brand RELION not covered)
NOVOLOG INJ FLEXPEN	\$0 (Tier 2) (brand RELION not covered)
NOVOLOG INJ PENFILL	\$0 (Tier 2) (brand RELION not covered)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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NOVOLOG MIX INJ 70/30	\$0 (Tier 2) (brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	\$0 (Tier 2) (brand RELION not covered)
OMNIPOD KIT STARTER	\$0 (Tier 2) QL (1 kit / year), PA
OMNIPOD MIS 5 PACK	\$0 (Tier 2) QL (10 boxes / 30 days), PA
PEN NEEDLES: NOVO/BD/ULTIMED/OWEN/TRIVIDIA	\$0 (Tier 2)
SOLIQUA INJ 100/33	\$0 (Tier 2) QL (10 pens / 30 days)
TRESIBA FLEX INJ 100UNIT	\$0 (Tier 2)
TRESIBA FLEX INJ 200UNIT	\$0 (Tier 2)
TRESIBA INJ 100UNIT	\$0 (Tier 2)
V-GO 20 KIT	\$0 (Tier 2) QL (1 kit / 30 days), PA
V-GO 30 KIT	\$0 (Tier 2) QL (1 kit / 30 days), PA
V-GO 40 KIT	\$0 (Tier 2) QL (1 kit / 30 days), PA
XULTOPHY INJ 100/3.6	\$0 (Tier 2) QL (5 pens / 30 days)

CALCIUM REGULATORS

<i>alendronate sodium oral soln 70 mg/75ml</i>	\$0 (Tier 1)
<i>alendronate sodium tab 10 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 35 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 70 mg</i>	\$0 (Tier 1)
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	\$0 (Tier 1) B/D
FORTEO INJ 620/2.48	\$0 (Tier 2) NDS, PA
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	\$0 (Tier 1) B/D
NATPARA INJ 25MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 50MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 75MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 100MCG	\$0 (Tier 2) NDS, PA
<i>pamidronate disodium for inj 30 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium for inj 90 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 3 mg/ml</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 9 mg/ml</i>	\$0 (Tier 1) B/D
PAMIDRONATE INJ 6MG/ML	\$0 (Tier 2) B/D
PROLIA SOL 60MG/ML	\$0 (Tier 2) QL (1 injection / 180 days)
<i>risedronate sodium tab 5 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 35 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 150 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>risedronate sodium tab delayed release 35 mg</i>	\$0 (Tier 1)
TYMLOS INJ	\$0 (Tier 2) NDS, PA
XGEVA INJ	\$0 (Tier 2) NDS, PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	\$0 (Tier 1) B/D
<i>zoledronic acid iv soln 4 mg/100ml</i>	\$0 (Tier 1) B/D
<i>zoledronic acid iv soln 5 mg/100ml</i>	\$0 (Tier 1) B/D

CHELATING AGENTS

CHEMET CAP 100MG	\$0 (Tier 2)
<i>clovique cap 250mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 90 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 180 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 360 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 90 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 180 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 360 mg</i>	\$0 (Tier 2) NDS, PA
LOKELMA PAK 5GM	\$0 (Tier 2)
LOKELMA PAK 10GM	\$0 (Tier 2)
<i>penicillamine tab 250 mg</i>	\$0 (Tier 2) NDS
<i>sodium polystyrene sulfonate powder</i>	\$0 (Tier 1)
<i>sps sus 15gm/60</i>	\$0 (Tier 1)
<i>trientine hcl cap 250 mg</i>	\$0 (Tier 2) NDS, PA
VELTASSA POW 8.4GM	\$0 (Tier 2) PA
VELTASSA POW 16.8GM	\$0 (Tier 2) PA
VELTASSA POW 25.2GM	\$0 (Tier 2) PA

CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL

<i>afirmelle tab 0.1-0.02</i>	\$0 (Tier 1)
<i>altavera tab</i>	\$0 (Tier 1)
<i>alyacen tab 1/35</i>	\$0 (Tier 1)
<i>alyacen tab 7/7/7</i>	\$0 (Tier 1)
<i>amethia tab</i>	\$0 (Tier 1)
<i>apri tab</i>	\$0 (Tier 1)
<i>aranelle tab</i>	\$0 (Tier 1)
<i>ashlyna tab</i>	\$0 (Tier 1)
<i>aubra eq tab 0.1-0.02</i>	\$0 (Tier 1)
<i>aurovela 24 tab fe 1/20</i>	\$0 (Tier 1)
<i>aurovela fe tab 1.5/30</i>	\$0 (Tier 1)
<i>aurovela fe tab 1/20</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>aurovela tab 1/20</i>	\$0 (Tier 1)	
<i>aviane tab</i>	\$0 (Tier 1)	
<i>ayuna tab</i>	\$0 (Tier 1)	
<i>azurette tab 28 day</i>	\$0 (Tier 1)	
<i>balziva tab</i>	\$0 (Tier 1)	
<i>bekyree tab</i>	\$0 (Tier 1)	
<i>blisovi 24 tab fe 1/20</i>	\$0 (Tier 1)	
<i>blisovi fe tab 1.5/30</i>	\$0 (Tier 1)	
<i>briellyn tab</i>	\$0 (Tier 1)	
<i>camila tab 0.35mg</i>	\$0 (Tier 1)	
<i>camrese lo tab</i>	\$0 (Tier 1)	
<i>camrese tab</i>	\$0 (Tier 1)	
<i>caziant pak</i>	\$0 (Tier 1)	
<i>chateal tab 0.15/30</i>	\$0 (Tier 1)	
<i>cryselle-28 tab 28 tabs</i>	\$0 (Tier 1)	
<i>cyclafem tab 1/35</i>	\$0 (Tier 1)	
<i>cyclafem tab 7/7/7</i>	\$0 (Tier 1)	
<i>cyred eq tab</i>	\$0 (Tier 1)	
<i>dasetta tab 1/35</i>	\$0 (Tier 1)	
<i>dasetta tab 7/7/7</i>	\$0 (Tier 1)	
<i>daysee tab</i>	\$0 (Tier 1)	
<i>deblitane tab 0.35mg</i>	\$0 (Tier 1)	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	\$0 (Tier 1)	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	\$0 (Tier 1)	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	\$0 (Tier 1)	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	\$0 (Tier 1)	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	\$0 (Tier 1)	
<i>elinest tab</i>	\$0 (Tier 1)	
<i>ELLA TAB 30MG</i>	\$0 (Tier 2)	
<i>eluryng mis</i>	\$0 (Tier 1)	
<i>emoquette tab</i>	\$0 (Tier 1)	
<i>enpresse-28 tab</i>	\$0 (Tier 1)	
<i>enskyce tab</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>errin tab 0.35mg</i>	\$0 (Tier 1)
<i>estarylla tab 0.25-35</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	\$0 (Tier 1)
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	\$0 (Tier 1)
<i>falmina tab</i>	\$0 (Tier 1)
<i>fayosim tab</i>	\$0 (Tier 1)
<i>femynor tab 0.25-35</i>	\$0 (Tier 1)
<i>gianvi tab 3-0.02mg</i>	\$0 (Tier 1)
<i>hailey 24 tab fe</i>	\$0 (Tier 1)
<i>hailey tab 1.5/30</i>	\$0 (Tier 1)
<i>heather tab 0.35mg</i>	\$0 (Tier 1)
<i>iclevia tab</i>	\$0 (Tier 1)
<i>incassia tab 0.35mg</i>	\$0 (Tier 1)
<i>introvale tab</i>	\$0 (Tier 1)
<i>isibloom tab</i>	\$0 (Tier 1)
<i>jasmiel tab 3-0.02mg</i>	\$0 (Tier 1)
<i>jolessa tab</i>	\$0 (Tier 1)
<i>juleber tab</i>	\$0 (Tier 1)
<i>junel 1.5/30 tab</i>	\$0 (Tier 1)
<i>junel 1/20 tab</i>	\$0 (Tier 1)
<i>junel fe 24 tab 1/20</i>	\$0 (Tier 1)
<i>junel fe tab 1.5/30</i>	\$0 (Tier 1)
<i>junel fe tab 1/20</i>	\$0 (Tier 1)
<i>kaitlib fe chw</i>	\$0 (Tier 1)
<i>kariva tab 28 day</i>	\$0 (Tier 1)
<i>kelnor 1/50 tab</i>	\$0 (Tier 1)
<i>kelnor tab 1/35</i>	\$0 (Tier 1)
<i>kurvelo tab 0.15/30</i>	\$0 (Tier 1)
<i>larin 24 tab fe 1/20</i>	\$0 (Tier 1)
<i>larin fe tab 1.5/30</i>	\$0 (Tier 1)
<i>larin fe tab 1/20</i>	\$0 (Tier 1)
<i>larin tab 1.5/30</i>	\$0 (Tier 1)
<i>larin tab 1/20</i>	\$0 (Tier 1)
<i>larissia tab</i>	\$0 (Tier 1)
<i>layolis fe chw</i>	\$0 (Tier 1)
<i>leena tab</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>lessina tab</i>	\$0 (Tier 1)
<i>levonest tab</i>	\$0 (Tier 1)
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg</i>	\$0 (Tier 1)
<i>levora-28 tab 0.15/30</i>	\$0 (Tier 1)
<i>lillow tab 0.15/30</i>	\$0 (Tier 1)
<i>loestrin 21 tab 1.5/30</i>	\$0 (Tier 1)
<i>loestrin fe tab 1.5/30</i>	\$0 (Tier 1)
<i>loestrin fe tab 1/20</i>	\$0 (Tier 1)
<i>loestrin tab 1/20-21</i>	\$0 (Tier 1)
<i>loryna tab 3-0.02mg</i>	\$0 (Tier 1)
<i>low-ogestrel tab</i>	\$0 (Tier 1)
<i>lutra tab</i>	\$0 (Tier 1)
<i>lyleq tab 0.35mg</i>	\$0 (Tier 1)
<i>lyza tab 0.35mg</i>	\$0 (Tier 1)
<i>marlissa tab 0.15/30</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	\$0 (Tier 1)
<i>melodetta chw 24 fe</i>	\$0 (Tier 1)
<i>mibelas 24 chw fe</i>	\$0 (Tier 1)
<i>microgestin tab 1.5/30</i>	\$0 (Tier 1)
<i>microgestin tab 1/20</i>	\$0 (Tier 1)
<i>microgestin tab fe1.5/30</i>	\$0 (Tier 1)
<i>microgestin tab fe 1/20</i>	\$0 (Tier 1)
<i>mili tab 0.25/35</i>	\$0 (Tier 1)
<i>mono-linyah tab 0.25-35</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>necon tab 0.5/35</i>	\$0 (Tier 1)
<i>nikki tab 3-0.02mg</i>	\$0 (Tier 1)
<i>nora-be tab 0.35mg</i>	\$0 (Tier 1)
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0 (Tier 1)
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	\$0 (Tier 1)
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	\$0 (Tier 1)
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	\$0 (Tier 1)
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	\$0 (Tier 1)
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	\$0 (Tier 1)
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0 (Tier 1)
<i>norethindrone tab 0.35 mg</i>	\$0 (Tier 1)
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	\$0 (Tier 1)
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	\$0 (Tier 1)
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	\$0 (Tier 1)
<i>norlyroc tab 0.35mg</i>	\$0 (Tier 1)
<i>nortrel tab 0.5/35</i>	\$0 (Tier 1)
<i>nortrel tab 7/7/7</i>	\$0 (Tier 1)
<i>nylia tab 7/7/7</i>	\$0 (Tier 1)
<i>nymyo tab 0.25-35</i>	\$0 (Tier 1)
<i>ocella tab 3-0.03mg</i>	\$0 (Tier 1)
<i>orsythia tab</i>	\$0 (Tier 1)
<i>philith tab 0.4-35</i>	\$0 (Tier 1)
<i>pimtrea tab</i>	\$0 (Tier 1)
<i>pirmella tab 1/35</i>	\$0 (Tier 1)
<i>portia-28 tab</i>	\$0 (Tier 1)
<i>previfem tab</i>	\$0 (Tier 1)
<i>reclipsen tab</i>	\$0 (Tier 1)
<i>rivelsa tab</i>	\$0 (Tier 1)
<i>setlakin tab</i>	\$0 (Tier 1)
<i>sharobel tab 0.35mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>simliya tab 28 day</i>	\$0 (Tier 1)
<i>simpesse tab</i>	\$0 (Tier 1)
<i>sprintec 28 tab 28 day</i>	\$0 (Tier 1)
<i>sronyx tab</i>	\$0 (Tier 1)
<i>syeda tab 3-0.03mg</i>	\$0 (Tier 1)
<i>tarina 24 fe tab</i>	\$0 (Tier 1)
<i>tarina fe tab 1/20 eq</i>	\$0 (Tier 1)
<i>tilia fe tab</i>	\$0 (Tier 1)
<i>tri-estaryll tab</i>	\$0 (Tier 1)
<i>tri-legest tab fe</i>	\$0 (Tier 1)
<i>tri-lynyah tab</i>	\$0 (Tier 1)
<i>tri-lo tab estaryll</i>	\$0 (Tier 1)
<i>tri-lo- tab marzia</i>	\$0 (Tier 1)
<i>tri-lo- tab sprintec</i>	\$0 (Tier 1)
<i>tri-lo-mili tab</i>	\$0 (Tier 1)
<i>tri-mili tab</i>	\$0 (Tier 1)
<i>tri-nymyo tab</i>	\$0 (Tier 1)
<i>tri-previfem tab</i>	\$0 (Tier 1)
<i>tri-sprintec tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab lo</i>	\$0 (Tier 1)
<i>trivora-28 tab</i>	\$0 (Tier 1)
<i>tulana tab 0.35mg</i>	\$0 (Tier 1)
<i>tydemy tab</i>	\$0 (Tier 1)
<i>velivet pak</i>	\$0 (Tier 1)
<i>vestura tab 3-0.02mg</i>	\$0 (Tier 1)
<i>vienva tab 0.1-20</i>	\$0 (Tier 1)
<i>violele tab</i>	\$0 (Tier 1)
<i>vyfemla tab 0.4-35</i>	\$0 (Tier 1)
<i>vylibra tab 0.25-35</i>	\$0 (Tier 1)
<i>wera tab 0.5/35</i>	\$0 (Tier 1)
<i>wymzya fe chw 0.4mg-35</i>	\$0 (Tier 1)
<i>xulane dis 150-35</i>	\$0 (Tier 1)
<i>zafemy dis 150/35</i>	\$0 (Tier 1)
<i>zarah tab 3-0.03mg</i>	\$0 (Tier 1)
<i>zovia 1/35e tab</i>	\$0 (Tier 1)
<i>zumandimine tab 3-0.03mg</i>	\$0 (Tier 1)
ENDOMETRIOSIS	
<i>danazol cap 50 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>danazol cap 100 mg</i>	\$0 (Tier 1)
<i>danazol cap 200 mg</i>	\$0 (Tier 1)
SYNAREL SOL 2MG/ML	\$0 (Tier 2) NDS

ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES

<i>amabelz tab 0.5-0.1</i>	\$0 (Tier 2)
<i>amabelz tab 1-0.5mg</i>	\$0 (Tier 2)
DELESTROGEN INJ 10MG/ML	\$0 (Tier 2)
<i>dotti dis 0.1mg</i>	\$0 (Tier 2)
<i>dotti dis 0.05mg</i>	\$0 (Tier 2)
<i>dotti dis 0.025mg</i>	\$0 (Tier 2)
<i>dotti dis 0.075mg</i>	\$0 (Tier 2)
<i>dotti dis 0.0375mg</i>	\$0 (Tier 2)
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	\$0 (Tier 2)
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	\$0 (Tier 2)
<i>estradiol tab 0.5 mg</i>	\$0 (Tier 2)
<i>estradiol tab 1 mg</i>	\$0 (Tier 2)
<i>estradiol tab 2 mg</i>	\$0 (Tier 2)
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.05 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.06 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.025 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.075 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	\$0 (Tier 2)
<i>estradiol vaginal cream 0.1 mg/gm</i>	\$0 (Tier 1)
<i>estradiol vaginal tab 10 mcg</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 20 mg/ml</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 40 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>jinteli tab 1mg-5mcg</i>	\$0 (Tier 2)
<i>lopreeza tab 1-0.5mg</i>	\$0 (Tier 2)
<i>lyllana dis 0.1mg</i>	\$0 (Tier 2)
<i>lyllana dis 0.05mg</i>	\$0 (Tier 2)
<i>lyllana dis 0.025mg</i>	\$0 (Tier 2)
<i>lyllana dis 0.075mg</i>	\$0 (Tier 2)
<i>lyllana dis 0.0375mg</i>	\$0 (Tier 2)
<i>mimvey tab 1-0.5mg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	\$0 (Tier 2)
<i>yuvaferm tab 10mcg</i>	\$0 (Tier 1)

GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE

<i>cortisone acetate tab 25 mg</i>	\$0 (Tier 1)
DEXAMETHASON CON 1MG/ML	\$0 (Tier 2)
<i>dexamethasone elixir 0.5 mg/5ml</i>	\$0 (Tier 1)
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	\$0 (Tier 1)
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	\$0 (Tier 1)
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	\$0 (Tier 1)
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	\$0 (Tier 1)
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	\$0 (Tier 1)
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	\$0 (Tier 1)
<i>dexamethasone soln 0.5 mg/5ml</i>	\$0 (Tier 1)
<i>dexamethasone tab 0.5 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 0.75 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 1 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 1.5 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 2 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 4 mg</i>	\$0 (Tier 1)
<i>dexamethasone tab 6 mg</i>	\$0 (Tier 1)
<i>fludrocortisone acetate tab 0.1 mg</i>	\$0 (Tier 1)
<i>hydrocortisone tab 5 mg</i>	\$0 (Tier 1)
<i>hydrocortisone tab 10 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>hydrocortisone tab 20 mg</i>	\$0 (Tier 1)
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	\$0 (Tier 1) B/D
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	\$0 (Tier 1) B/D
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	\$0 (Tier 1) B/D
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	\$0 (Tier 1) B/D
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	\$0 (Tier 1) B/D
<i>methylprednisolone tab 4 mg</i>	\$0 (Tier 1) B/D
<i>methylprednisolone tab 8 mg</i>	\$0 (Tier 1) B/D
<i>methylprednisolone tab 16 mg</i>	\$0 (Tier 1) B/D
<i>methylprednisolone tab 32 mg</i>	\$0 (Tier 1) B/D
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	\$0 (Tier 1)
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	\$0 (Tier 1) B/D
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	\$0 (Tier 1) B/D
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	\$0 (Tier 1) B/D
<i>PREDNISON CON 5MG/ML</i>	\$0 (Tier 2) B/D
<i>prednisone oral soln 5 mg/5ml</i>	\$0 (Tier 1) B/D
<i>prednisone tab 1 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 2.5 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 5 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 10 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 20 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 50 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab therapy pack 5 mg (21)</i>	\$0 (Tier 1)
<i>prednisone tab therapy pack 5 mg (48)</i>	\$0 (Tier 1)
<i>prednisone tab therapy pack 10 mg (21)</i>	\$0 (Tier 1)
<i>prednisone tab therapy pack 10 mg (48)</i>	\$0 (Tier 1)
<i>SOLU-CORTEF INJ 100MG</i>	\$0 (Tier 2)
<i>SOLU-CORTEF INJ 250MG</i>	\$0 (Tier 2)
<i>SOLU-CORTEF INJ 500MG</i>	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SOLU-CORTEF INJ 1000MG	\$0 (Tier 2)
GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR	
<i>diazoxide susp 50 mg/ml</i>	\$0 (Tier 2) NDS
GVOKE HYPO 2 INJ 1MG/.2ML	\$0 (Tier 2)
GVOKE HYPO 2 INJ .5/.1ML	\$0 (Tier 2)
GVOKE PFS INJ	\$0 (Tier 2)
MISCELLANEOUS	
ALDURAZYME INJ 2.9MG/5M	\$0 (Tier 2) NDS, LA, PA
<i>cabergoline tab 0.5 mg</i>	\$0 (Tier 1)
CARBAGLU TAB 200MG	\$0 (Tier 2) NDS, LA, PA
CERDELGA CAP 84MG	\$0 (Tier 2) NDS, PA
CEREZYME INJ 400UNIT	\$0 (Tier 2) NDS, LA, PA
CHARCOAL POW	\$0 (Tier 3) DP
CHEMSTRIP TES UGK	\$0 (Tier 3) DP
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	\$0 (Tier 1) B/D, QL (120 tabs / 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (120 tabs / 30 days)
CYSTADANE POW	\$0 (Tier 2) NDS, LA
CYSTAGON CAP 50MG	\$0 (Tier 2) LA, PA
CYSTAGON CAP 150MG	\$0 (Tier 2) LA, PA
<i>desmopressin acetate inj 4 mcg/ml</i>	\$0 (Tier 2) NDS
<i>desmopressin acetate nasal spray soln 0.01%</i>	\$0 (Tier 1)
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	\$0 (Tier 1)
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	\$0 (Tier 2) NDS
<i>desmopressin acetate tab 0.1 mg</i>	\$0 (Tier 1)
<i>desmopressin acetate tab 0.2 mg</i>	\$0 (Tier 1)
DIASCREEN 3 MIS	\$0 (Tier 3) DP
DIASCREEN 5 MIS	\$0 (Tier 3) DP
DIASCREEN 6 MIS	\$0 (Tier 3) DP
DIASCREEN 7 MIS	\$0 (Tier 3) DP
DIASCREEN 8 MIS	\$0 (Tier 3) DP
DIASCREEN 9 MIS	\$0 (Tier 3) DP
DIASCREEN 10 MIS	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
DIASCREEN MIS 1G	\$0 (Tier 3) DP
DIASCREEN MIS 2GK	\$0 (Tier 3) DP
DIASCREEN MIS 4OBL	\$0 (Tier 3) DP
DIASTIX TES STRIPS	\$0 (Tier 3) DP
FABRAZYME INJ 5MG	\$0 (Tier 2) NDS, LA, PA
FABRAZYME INJ 35MG	\$0 (Tier 2) NDS, LA, PA
GENOTROPIN INJ 0.2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 5MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 12MG	\$0 (Tier 2) NDS, PA
INCRELEX INJ 40MG/4ML	\$0 (Tier 2) NDS, LA, PA
KETO-DIASTIX TES	\$0 (Tier 3) DP
KORLYM TAB 300MG	\$0 (Tier 2) NDS, LA, PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	\$0 (Tier 1) B/D
<i>levocarnitine tab 330 mg</i>	\$0 (Tier 1) B/D
LUMIZYME INJ 50MG	\$0 (Tier 2) NDS, LA, PA
LUPR DEP-PED INJ 3M 30MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 7.5MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 11.25MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 15MG	\$0 (Tier 2) NDS, PA
<i>miglustat cap 100 mg</i>	\$0 (Tier 2) NDS, QL (90 caps / 30 days), PA
NAGLAZYME INJ 1MG/ML	\$0 (Tier 2) NDS, LA, PA
<i>nitisinone cap 2 mg</i>	\$0 (Tier 2) NDS, PA
<i>nitisinone cap 5 mg</i>	\$0 (Tier 2) NDS, PA
<i>nitisinone cap 10 mg</i>	\$0 (Tier 2) NDS, PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	\$0 (Tier 1) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	\$0 (Tier 2) NDS, PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	\$0 (Tier 2) NDS, PA
OSPHENA TAB 60MG	\$0 (Tier 2) PA
<i>raloxifene hcl tab 60 mg</i>	\$0 (Tier 1)
<i>sapropterin dihydrochloride powder packet 100 mg</i>	\$0 (Tier 2) NDS, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	\$0 (Tier 2) NDS, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	\$0 (Tier 2) NDS, PA
SIGNIFOR INJ 0.3MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.6MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.9MG/ML	\$0 (Tier 2) NDS, LA, PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	\$0 (Tier 2) NDS, PA
<i>sodium phenylbutyrate tab 500 mg</i>	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 60/0.2ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 90/0.3ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 120/.5ML	\$0 (Tier 2) NDS, PA
SOMAVERT INJ 10MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 15MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 20MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 25MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 30MG	\$0 (Tier 2) NDS, LA, PA
STIMATE SOL 1.5MG/ML	\$0 (Tier 2) NDS

PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS

AURYXIA TAB 210MG	\$0 (Tier 2) NDS, QL (360 tabs / 30 days), PA
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	\$0 (Tier 1) QL (360 caps / 30 days)
<i>calcium acetate (phosphate binder) tab 667 mg</i>	\$0 (Tier 1) QL (360 tabs / 30 days)
<i>sevelamer carbonate packet 0.8 gm</i>	\$0 (Tier 2) NDS, QL (540 packets / 30 days)
<i>sevelamer carbonate packet 2.4 gm</i>	\$0 (Tier 2) NDS, QL (180 packets / 30 days)
<i>sevelamer carbonate tab 800 mg</i>	\$0 (Tier 1) QL (540 tabs / 30 days)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES**

<i>medroxyprogesterone acetate tab 2.5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 10 mg</i>	\$0 (Tier 1)
<i>megestrol acetate susp 40 mg/ml</i>	\$0 (Tier 2)
<i>megestrol acetate susp 625 mg/5ml</i>	\$0 (Tier 2) PA
<i>norethindrone acetate tab 5 mg</i>	\$0 (Tier 1)

THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS

<i>euthyrox tab 25mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 50mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 75mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 88mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 100mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 112mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 125mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 137mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 150mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 175mcg</i>	\$0 (Tier 1)
<i>euthyrox tab 200mcg</i>	\$0 (Tier 1)
<i>levo-t tab 25mcg</i>	\$0 (Tier 1)
<i>levo-t tab 50mcg</i>	\$0 (Tier 1)
<i>levo-t tab 75mcg</i>	\$0 (Tier 1)
<i>levo-t tab 88mcg</i>	\$0 (Tier 1)
<i>levo-t tab 100mcg</i>	\$0 (Tier 1)
<i>levo-t tab 112mcg</i>	\$0 (Tier 1)
<i>levo-t tab 125mcg</i>	\$0 (Tier 1)
<i>levo-t tab 137mcg</i>	\$0 (Tier 1)
<i>levo-t tab 150mcg</i>	\$0 (Tier 1)
<i>levo-t tab 175mcg</i>	\$0 (Tier 1)
<i>levo-t tab 200 mcg</i>	\$0 (Tier 1)
<i>levo-t tab 300 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 25 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 50 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 75 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 88 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 100 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 112 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 125 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 137 mcg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>levothyroxine sodium tab 150 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 175 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 200 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 300 mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 25mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 50mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 75mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 88mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 100mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 112mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 125mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 137mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 150mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 175mcg</i>	\$0 (Tier 1)
<i>levoxyl tab 200mcg</i>	\$0 (Tier 1)
<i>liothyronine sodium tab 5 mcg</i>	\$0 (Tier 1)
<i>liothyronine sodium tab 25 mcg</i>	\$0 (Tier 1)
<i>liothyronine sodium tab 50 mcg</i>	\$0 (Tier 1)
<i>methimazole tab 5 mg</i>	\$0 (Tier 1)
<i>methimazole tab 10 mg</i>	\$0 (Tier 1)
<i>propylthiouracil tab 50 mg</i>	\$0 (Tier 1)
SYNTHROID TAB 25MCG	\$0 (Tier 2)
SYNTHROID TAB 50MCG	\$0 (Tier 2)
SYNTHROID TAB 75MCG	\$0 (Tier 2)
SYNTHROID TAB 88MCG	\$0 (Tier 2)
SYNTHROID TAB 100MCG	\$0 (Tier 2)
SYNTHROID TAB 112MCG	\$0 (Tier 2)
SYNTHROID TAB 125MCG	\$0 (Tier 2)
SYNTHROID TAB 137MCG	\$0 (Tier 2)
SYNTHROID TAB 150MCG	\$0 (Tier 2)
SYNTHROID TAB 175MCG	\$0 (Tier 2)
SYNTHROID TAB 200MCG	\$0 (Tier 2)
SYNTHROID TAB 300MCG	\$0 (Tier 2)
<i>unithroid tab 25mcg</i>	\$0 (Tier 1)
<i>unithroid tab 50mcg</i>	\$0 (Tier 1)
<i>unithroid tab 75mcg</i>	\$0 (Tier 1)
<i>unithroid tab 88mcg</i>	\$0 (Tier 1)
<i>unithroid tab 100mcg</i>	\$0 (Tier 1)
<i>unithroid tab 112mcg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>unithroid tab 125mcg</i>	\$0 (Tier 1)
<i>unithroid tab 137mcg</i>	\$0 (Tier 1)
<i>unithroid tab 150mcg</i>	\$0 (Tier 1)
<i>unithroid tab 175mcg</i>	\$0 (Tier 1)
<i>unithroid tab 200mcg</i>	\$0 (Tier 1)
<i>unithroid tab 300mcg</i>	\$0 (Tier 1)

VITAMIN D ANALOGS

<i>calcitriol cap 0.5 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol cap 0.25 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol inj 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>calcitriol oral soln 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 1 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 2 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 4 mcg</i>	\$0 (Tier 1) B/D
RAYALDEE CAP 30MCG	\$0 (Tier 2) NDS

GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS

ANTACIDS

<i>advanced sus antacid</i>	\$0 (Tier 3) DP
<i>almacone dbl sus strength</i>	\$0 (Tier 3) DP
ALUM HYDROX SUS 320/5ML	\$0 (Tier 3) DP
<i>antacid fast sus relief</i>	\$0 (Tier 3) DP
<i>antacid plus sus anti-gas</i>	\$0 (Tier 3) DP
<i>antacid plus sus gas rel</i>	\$0 (Tier 3) DP
<i>antacid sus</i>	\$0 (Tier 3) DP
<i>antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>antacid sus max st</i>	\$0 (Tier 3) DP
<i>antacid sus mint crm</i>	\$0 (Tier 3) DP
<i>antacid sus reg st</i>	\$0 (Tier 3) DP
<i>antacid/sime sus ds</i>	\$0 (Tier 3) DP
<i>gnp antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>hm antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>mag-al plus liq</i>	\$0 (Tier 3) DP
<i>mag-al plus liq xs</i>	\$0 (Tier 3) DP
MAGN OXIDE POW HEAVY	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg</i>	\$0 (Tier 3) DP
<i>mi-acid sus</i>	\$0 (Tier 3) DP
<i>milantex sus ex st</i>	\$0 (Tier 3) DP
<i>milantex sus original</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>mintox plus chw</i>	\$0 (Tier 3) DP
<i>mintox sus max st</i>	\$0 (Tier 3) DP
<i>qc antacid sus</i>	\$0 (Tier 3) DP
<i>qc antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>sb antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>sm antacid sus advanced</i>	\$0 (Tier 3) DP
<i>sm antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>sm antacid/ sus antigas</i>	\$0 (Tier 3) DP
SODIUM POW BICARBON	\$0 (Tier 3) DP
URO-MAG CAP 140MG	\$0 (Tier 3) DP

ANTI-DIARRHEAL

<i>anti-diarrhe cap 2mg</i>	\$0 (Tier 3) DP
<i>anti-diarrhe tab 2mg</i>	\$0 (Tier 3) DP
<i>bismatrol chw 262mg</i>	\$0 (Tier 3) DP
<i>bismatrol sus 262/15ml</i>	\$0 (Tier 3) DP
<i>bismuth subsalicylate chew tab 262 mg</i>	\$0 (Tier 3) DP
<i>diarrhea rel sus 262/15ml</i>	\$0 (Tier 3) DP
<i>gnp k-pec sus 262/15ml</i>	\$0 (Tier 3) DP
<i>loperamide cap 2mg</i>	\$0 (Tier 3) DP
<i>medi-bismuth chw 262mg</i>	\$0 (Tier 3) DP
PECTIN POW	\$0 (Tier 3) DP
<i>peptic relf chw 262mg</i>	\$0 (Tier 3) DP
<i>pink bismuth chw 262mg</i>	\$0 (Tier 3) DP
<i>pink bismuth tab 262mg</i>	\$0 (Tier 3) DP
<i>sm anti-diar tab 2mg</i>	\$0 (Tier 3) DP
<i>stomach relf chw 262mg</i>	\$0 (Tier 3) DP
<i>stomach relf sus 262/15ml</i>	\$0 (Tier 3) DP
<i>stomach relf tab 262mg</i>	\$0 (Tier 3) DP

ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING

<i>aprepitant capsule 40 mg</i>	\$0 (Tier 1) B/D
<i>aprepitant capsule 80 mg</i>	\$0 (Tier 1) B/D
<i>aprepitant capsule 125 mg</i>	\$0 (Tier 1) B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	\$0 (Tier 1) B/D
<i>compro sup 25mg</i>	\$0 (Tier 1)
<i>dronabinol cap 2.5 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)
<i>dronabinol cap 5 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>dronabinol cap 10 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)
EMEND SUS 125MG	\$0 (Tier 2) B/D
<i>granisetron hcl inj 1 mg/ml</i>	\$0 (Tier 1)
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	\$0 (Tier 1)
<i>granisetron hcl tab 1 mg</i>	\$0 (Tier 1) B/D
<i>meclizine hcl tab 12.5 mg</i>	\$0 (Tier 2)
<i>meclizine hcl tab 25 mg</i>	\$0 (Tier 2)
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	\$0 (Tier 1)
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	\$0 (Tier 1)
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>ondansetron hcl oral soln 4 mg/5ml</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 4 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 8 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 24 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron orally disintegrating tab 4 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron orally disintegrating tab 8 mg</i>	\$0 (Tier 1) B/D
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	\$0 (Tier 1)
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>prochlorperazine suppos 25 mg</i>	\$0 (Tier 1)
<i>promethazine hcl inj 25 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl inj 50 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl syrup 6.25 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl tab 12.5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl tab 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>promethazine hcl tab 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>scopolamine td patch 72hr 1 mg/3days</i>	\$0 (Tier 2) QL (10 patches / 30 days), PA; PA if 70 years and older

ANTISPASMODICS - DRUGS FOR STOMACH SPASMS

<i>dicyclomine hcl cap 10 mg</i>	\$0 (Tier 2)
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	\$0 (Tier 2)
<i>dicyclomine hcl tab 20 mg</i>	\$0 (Tier 2)
<i>glycopyrrolate tab 1 mg</i>	\$0 (Tier 1)
<i>glycopyrrolate tab 2 mg</i>	\$0 (Tier 1)

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

<i>famotidine for susp 40 mg/5ml</i>	\$0 (Tier 1) QL (300 mL / 30 days)
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	\$0 (Tier 1)
<i>famotidine inj 20 mg/2ml</i>	\$0 (Tier 1)
<i>famotidine inj 40 mg/4ml</i>	\$0 (Tier 1)
<i>famotidine inj 200 mg/20ml</i>	\$0 (Tier 1)
<i>famotidine tab 20 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>famotidine tab 40 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>nizatidine cap 150 mg</i>	\$0 (Tier 1)
<i>nizatidine cap 300 mg</i>	\$0 (Tier 1)

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium cap 750 mg</i>	\$0 (Tier 1)
<i>budesonide delayed release particles cap 3 mg</i>	\$0 (Tier 1)
<i>budesonide tab er 24hr 9 mg</i>	\$0 (Tier 2) NDS
<i>hydrocortisone enema 100 mg/60ml</i>	\$0 (Tier 1)
<i>mesalamine cap dr 400 mg</i>	\$0 (Tier 1) QL (180 caps / 30 days)
<i>mesalamine cap er 24hr 0.375 gm</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>mesalamine enema 4 gm</i>	\$0 (Tier 1)
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	\$0 (Tier 1)
<i>mesalamine suppos 1000 mg</i>	\$0 (Tier 1)
<i>mesalamine tab delayed release 1.2 gm</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>sulfasalazine tab 500 mg</i>	\$0 (Tier 1)
<i>sulfasalazine tab delayed release 500 mg</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****LAXATIVES**

<i>bisacodyl suppos 10 mg</i>	\$0 (Tier 3) DP
<i>bisacodyl tab 5mg ec</i>	\$0 (Tier 3) DP
<i>constulose sol 10gm/15</i>	\$0 (Tier 1)
<i>docu liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docu soft cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate cal cap 240mg</i>	\$0 (Tier 3) DP
<i>docusate sod cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate sod liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docusate sodium cap 100 mg</i>	\$0 (Tier 3) DP
<i>docusate sodium liquid 150 mg/15ml</i>	\$0 (Tier 3) DP
<i>docusil cap 100mg</i>	\$0 (Tier 3) DP
<i>docusol mini ene</i>	\$0 (Tier 3) DP
<i>ducodyl tab 5mg ec</i>	\$0 (Tier 3) DP
<i>enemeez mini ene</i>	\$0 (Tier 3) DP
ENEMEEZ PLUS ENE 20-283	\$0 (Tier 3) DP
<i>enulose sol 10gm/15</i>	\$0 (Tier 1)
<i>epsom salt gra</i>	\$0 (Tier 3) DP
EPSOM SALT POW	\$0 (Tier 3) DP
<i>gavilyte-c sol</i>	\$0 (Tier 1)
<i>gavilyte-g sol</i>	\$0 (Tier 1)
<i>gavilyte-n sol flav pk</i>	\$0 (Tier 1)
<i>generlac sol 10gm/15</i>	\$0 (Tier 1)
<i>gentle laxat sup 10mg</i>	\$0 (Tier 3) DP
<i>gentle laxat tab 5mg ec</i>	\$0 (Tier 3) DP
<i>glycerin suppos 1 gm</i>	\$0 (Tier 3) DP
<i>gnp bisa-lax tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp glycerin sup 1.2gm</i>	\$0 (Tier 3) DP
<i>gnp laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 25mg</i>	\$0 (Tier 3) DP
GOLYTELY SOL	\$0 (Tier 2)
<i>hm epsom gra salt</i>	\$0 (Tier 3) DP
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	\$0 (Tier 1)
<i>lactulose solution 10 gm/15ml</i>	\$0 (Tier 1)
<i>medi-natural tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>medi-natural tab 8.6mg</i>	\$0 (Tier 3) DP
MINERAL OIL	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
MINERAL OIL HEAVY	\$0 (Tier 3) DP
MINERAL OIL LIGHT	\$0 (Tier 3) DP
<i>nat veg lax tab 8.6mg</i>	\$0 (Tier 3) DP
<i>naturl fiber pow 28.3%</i>	\$0 (Tier 3) DP
NULYTELY SOL LMN/LIME	\$0 (Tier 2)
PEDIA-LAX LIQ 50MG	\$0 (Tier 3) DP
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	\$0 (Tier 1)
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	\$0 (Tier 1)
PLENVU SOL	\$0 (Tier 2)
<i>qc epsom gra salt</i>	\$0 (Tier 3) DP
<i>qc laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>qc natural pow vegetabl</i>	\$0 (Tier 3) DP
<i>qc senna tab 8.6mg</i>	\$0 (Tier 3) DP
<i>ra epsom gra salt</i>	\$0 (Tier 3) DP
RA EPSOM GRA SALT/LVN	\$0 (Tier 3) DP
<i>ra glycerin sup 80.7%</i>	\$0 (Tier 3) DP
<i>reguloid pow 28.3%</i>	\$0 (Tier 3) DP
<i>reguloid pow 48.57%</i>	\$0 (Tier 3) DP
<i>reguloid pow 58.6%</i>	\$0 (Tier 3) DP
<i>sb docusate tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>sb fib lax pow 33%</i>	\$0 (Tier 3) DP
<i>sb laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>senna-lax tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senna-s tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>senna-tabs tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senna-time s tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>senna-time tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senno tab 8.6mg</i>	\$0 (Tier 3) DP
<i>sennosides syrup 8.8 mg/5ml</i>	\$0 (Tier 3) DP
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	\$0 (Tier 3) DP
<i>silace liq 10mg/ml</i>	\$0 (Tier 3) DP
<i>silace syp 60/15ml</i>	\$0 (Tier 3) DP
<i>sm fiber pow 28.3%</i>	\$0 (Tier 3) DP
<i>sm fiber pow 48.57%</i>	\$0 (Tier 3) DP
<i>sm fiber pow 58.6%</i>	\$0 (Tier 3) DP
<i>sm laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>stool softnr cap 100mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>stool softnr cap 250mg</i>	\$0 (Tier 3) DP
<i>stool softnr syp 60/15ml</i>	\$0 (Tier 3) DP
<i>stool softnr tab 8.6-50mg</i>	\$0 (Tier 3) DP
SUPREP BOWEL SOL PREP KIT	\$0 (Tier 2)
<i>trilyte sol</i>	\$0 (Tier 1)
<i>womans laxat tab 5mg ec</i>	\$0 (Tier 3) DP

MISCELLANEOUS

<i>alosetron hcl tab 0.5 mg (base equiv)</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
<i>cromolyn sodium oral conc 100 mg/5ml</i>	\$0 (Tier 1)
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	\$0 (Tier 2)
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	\$0 (Tier 2)
GATTEX KIT 5MG	\$0 (Tier 2) NDS, LA, PA
LINZESS CAP 72MCG	\$0 (Tier 2) QL (30 caps / 30 days)
LINZESS CAP 145MCG	\$0 (Tier 2) QL (30 caps / 30 days)
LINZESS CAP 290MCG	\$0 (Tier 2) QL (30 caps / 30 days)
<i>loperamide hcl cap 2 mg</i>	\$0 (Tier 1)
<i>misoprostol tab 100 mcg</i>	\$0 (Tier 1)
<i>misoprostol tab 200 mcg</i>	\$0 (Tier 1)
MOVANTIK TAB 12.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
MOVANTIK TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RELISTOR INJ 8/0.4ML	\$0 (Tier 2) NDS, PA
RELISTOR INJ 12/0.6ML	\$0 (Tier 2) NDS, PA
<i>sucralfate tab 1 gm</i>	\$0 (Tier 1)
TRULANCE TAB 3MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>ursodiol cap 300 mg</i>	\$0 (Tier 1)
<i>ursodiol tab 250 mg</i>	\$0 (Tier 1)
<i>ursodiol tab 500 mg</i>	\$0 (Tier 1)
XIFAXAN TAB 550MG	\$0 (Tier 2) NDS, PA

PANCREATIC ENZYMES

CREON CAP 3000UNIT	\$0 (Tier 2)
CREON CAP 6000UNIT	\$0 (Tier 2)
CREON CAP 12000UNT	\$0 (Tier 2)
CREON CAP 24000UNT	\$0 (Tier 2)
CREON CAP 36000UNT	\$0 (Tier 2)
ZENPEP CAP 3000UNIT	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ZENPEP CAP 5000UNIT	\$0 (Tier 2)
ZENPEP CAP 10000UNT	\$0 (Tier 2)
ZENPEP CAP 15000UNT	\$0 (Tier 2)
ZENPEP CAP 20000UNT	\$0 (Tier 2)
ZENPEP CAP 25000	\$0 (Tier 2)
ZENPEP CAP 40000	\$0 (Tier 2)

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

DEXILANT CAP 30MG DR	\$0 (Tier 2) QL (30 caps / 30 days)
DEXILANT CAP 60MG DR	\$0 (Tier 2) QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	\$0 (Tier 1) QL (30 caps / 30 days), ST
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	\$0 (Tier 1) QL (30 caps / 30 days), ST
<i>lansoprazole cap delayed release 15 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	\$0 (Tier 1)
<i>omeprazole cap delayed release 20 mg</i>	\$0 (Tier 1)
<i>omeprazole cap delayed release 40 mg</i>	\$0 (Tier 1)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	\$0 (Tier 1)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	\$0 (Tier 1)
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	\$0 (Tier 1)
<i>rabeprazole sodium ec tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS

BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE

<i>alfuzosin hcl tab er 24hr 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>dutasteride cap 0.5 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>finasteride tab 5 mg</i>	\$0 (Tier 1)
<i>tamsulosin hcl cap 0.4 mg</i>	\$0 (Tier 1)

MISCELLANEOUS

<i>acetic acid irrigation soln 0.25%</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 5 mg</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 10 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>bethanechol chloride tab 25 mg</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 50 mg</i>	\$0 (Tier 1)
POT CITRATE GRA	\$0 (Tier 3) DP
<i>potassium citrate tab er 5 meq (540 mg)</i>	\$0 (Tier 1)
<i>potassium citrate tab er 10 meq (1080 mg)</i>	\$0 (Tier 1)
<i>potassium citrate tab er 15 meq (1620 mg)</i>	\$0 (Tier 1)

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

MYRBETRIQ TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
MYRBETRIQ TAB 50MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>oxybutynin chloride syrup 5 mg/5ml</i>	\$0 (Tier 1)
<i>oxybutynin chloride tab 5 mg</i>	\$0 (Tier 1)
<i>oxybutynin chloride tab er 24hr 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 15 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>solifenacin succinate tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>solifenacin succinate tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>tolterodine tartrate cap er 24hr 2 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days), ST
<i>tolterodine tartrate cap er 24hr 4 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days), ST
<i>tolterodine tartrate tab 1 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), ST
<i>tolterodine tartrate tab 2 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), ST
TOVIAZ TAB 4MG	\$0 (Tier 2) QL (30 tabs / 30 days)
TOVIAZ TAB 8MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>trosipium chloride tab 20 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2%</i>	\$0 (Tier 1)
<i>clotrimazole cre 1% vag</i>	\$0 (Tier 3) DP
<i>clotrimazole cre 3 day</i>	\$0 (Tier 3) DP
<i>clotrimazole vaginal cream 1%</i>	\$0 (Tier 3) DP
<i>3 day vaginl cre 2%</i>	\$0 (Tier 3) DP
<i>metronidazole vaginal gel 0.75%</i>	\$0 (Tier 1)
<i>miconazole 3 kit combinat</i>	\$0 (Tier 3) DP
<i>miconazole 3 kit combo pk</i>	\$0 (Tier 3) DP
<i>miconazole 7 cre 2%</i>	\$0 (Tier 3) DP
<i>miconazole 7 cre tube/kit</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>miconazole 7 sup 100mg</i>	\$0 (Tier 3) DP
<i>miconazole nitrate vaginal cream 2%</i>	\$0 (Tier 3) DP
<i>sm micon 7 sup 100mg</i>	\$0 (Tier 3) DP
<i>terconazole vaginal cream 0.4%</i>	\$0 (Tier 1)
<i>terconazole vaginal cream 0.8%</i>	\$0 (Tier 1)
<i>terconazole vaginal suppos 80 mg</i>	\$0 (Tier 1)
<i>vandazole gel 0.75%</i>	\$0 (Tier 1)

HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS

ANTICOAGULANTS - BLOOD THINNERS

<i>ELIQUIS ST P TAB 5MG</i>	\$0 (Tier 2) QL (74 tabs / 30 days)
<i>ELIQUIS TAB 2.5MG</i>	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>ELIQUIS TAB 5MG</i>	\$0 (Tier 2) QL (74 tabs / 30 days)
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 100 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 150 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 300 mg/3ml</i>	\$0 (Tier 1)
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	\$0 (Tier 1)
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	\$0 (Tier 2) NDS
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	\$0 (Tier 2) NDS
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	\$0 (Tier 2) NDS
<i>HEP SOD/NAACL INJ 25000UNT</i>	\$0 (Tier 2)
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	\$0 (Tier 1)
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	\$0 (Tier 1)
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	\$0 (Tier 1)
<i>HEPARIN/NAACL INJ 25000UNT</i>	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>jantoven tab 1mg</i>	\$0 (Tier 1)
<i>jantoven tab 2.5mg</i>	\$0 (Tier 1)
<i>jantoven tab 2mg</i>	\$0 (Tier 1)
<i>jantoven tab 3mg</i>	\$0 (Tier 1)
<i>jantoven tab 4mg</i>	\$0 (Tier 1)
<i>jantoven tab 5mg</i>	\$0 (Tier 1)
<i>jantoven tab 6mg</i>	\$0 (Tier 1)
<i>jantoven tab 7.5mg</i>	\$0 (Tier 1)
<i>jantoven tab 10mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 1 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 2 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 2.5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 3 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 4 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 6 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 7.5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 10 mg</i>	\$0 (Tier 1)
XARELTO STAR TAB 15/20MG	\$0 (Tier 2) QL (51 tabs / 30 days)
XARELTO TAB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XARELTO TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 15MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)

HEMATOPOIETIC GROWTH FACTORS

PROCRIT INJ 2000/ML	\$0 (Tier 2) PA
PROCRIT INJ 3000/ML	\$0 (Tier 2) PA
PROCRIT INJ 4000/ML	\$0 (Tier 2) PA
PROCRIT INJ 10000/ML	\$0 (Tier 2) PA
PROCRIT INJ 20000/ML	\$0 (Tier 2) NDS, PA
PROCRIT INJ 40000/ML	\$0 (Tier 2) NDS, PA
ZARXIO INJ 300/0.5	\$0 (Tier 2) NDS, PA
ZARXIO INJ 480/0.8	\$0 (Tier 2) NDS, PA

IRON

EZFE 200 CAP 200MG	\$0 (Tier 3) DP
FE SULFATE POW	\$0 (Tier 3) DP
FERAHEME INJ 510/17ML	\$0 (Tier 3) DP
<i>ferate tab 27mg</i>	\$0 (Tier 3) DP
<i>ferosul elx 220/5ml</i>	\$0 (Tier 3) DP
<i>ferosul tab 325mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
FERRETTS IPS SOL	\$0 (Tier 3) DP
FERRETTS TAB 325MG	\$0 (Tier 3) DP
<i>ferrex 150 cap 150mg</i>	\$0 (Tier 3) DP
FERRIMIN 150 TAB	\$0 (Tier 3) DP
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	\$0 (Tier 3) DP
FERROUS GLUC TAB 324MG	\$0 (Tier 3) DP
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous gluconate tab 324 mg (37.5 mg elemental iron)</i>	\$0 (Tier 3) DP
FERROUS SULF TAB 324MG EC	\$0 (Tier 3) DP
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	\$0 (Tier 3) DP
FERROUS SULFATE SYRUP 300 MG/5ML (60 MG/5ML ELEMENTAL FE)	\$0 (Tier 3) DP
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	\$0 (Tier 3) DP
<i>ferrousul tab 325mg</i>	\$0 (Tier 3) DP
FOLITAB 500 TAB	\$0 (Tier 3) DP
FUSION CAP	\$0 (Tier 3) DP
<i>gnp iron tab 45mg</i>	\$0 (Tier 3) DP
<i>gnp iron tab 65mg</i>	\$0 (Tier 3) DP
<i>hm iron tab 65mg</i>	\$0 (Tier 3) DP
INTEGRA CAP	\$0 (Tier 3) DP
<i>iron 100 tab plus</i>	\$0 (Tier 3) DP
<i>iron 100/c tab 100-250</i>	\$0 (Tier 3) DP
NOVAFERRUM CAP 50MG	\$0 (Tier 3) DP
NOVAFERRUM DRO 15MG/ML	\$0 (Tier 3) DP
NOVAFERRUM LIQ 125	\$0 (Tier 3) DP
<i>nu-iron 150 cap 150mg</i>	\$0 (Tier 3) DP
<i>poly-iron cap 150mg</i>	\$0 (Tier 3) DP
PROFE CAP 180MG	\$0 (Tier 3) DP
SLOW REL FE TAB 143MG CR	\$0 (Tier 3) DP
<i>slow release tab 47.5mg</i>	\$0 (Tier 3) DP
<i>sm iron slow tab 160mg cr</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>sm iron tab 325mg</i>	\$0 (Tier 3) DP
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	\$0 (Tier 3) DP
VENOFER INJ 20MG/ML	\$0 (Tier 3) DP
<i>wee care sus 15/1.25</i>	\$0 (Tier 3) DP
MISCELLANEOUS	
<i>anagrelide hcl cap 0.5 mg</i>	\$0 (Tier 1)
<i>anagrelide hcl cap 1 mg</i>	\$0 (Tier 1)
BERINERT INJ 500UNIT	\$0 (Tier 2) NDS, QL (24 boxes / 30 days), LA, PA
<i>cilostazol tab 50 mg</i>	\$0 (Tier 1)
<i>cilostazol tab 100 mg</i>	\$0 (Tier 1)
DOPTelet TAB 20MG	\$0 (Tier 2) NDS, LA, PA
DROXIA CAP 200MG	\$0 (Tier 2)
DROXIA CAP 300MG	\$0 (Tier 2)
DROXIA CAP 400MG	\$0 (Tier 2)
ENDARI POW 5GM	\$0 (Tier 2) NDS, LA, PA
HAEGARDA INJ 2000UNIT	\$0 (Tier 2) NDS, QL (30 vials / 30 days), LA, PA
HAEGARDA INJ 3000UNIT	\$0 (Tier 2) NDS, QL (20 vials / 30 days), LA, PA
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	\$0 (Tier 2) NDS, QL (9 syringes / 30 days), PA
<i>pentoxifylline tab er 400 mg</i>	\$0 (Tier 1)
PROMACTA PAK 25MG	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
PROMACTA POW 12.5MG	\$0 (Tier 2) NDS, QL (360 packets / 30 days), LA, PA
PROMACTA TAB 12.5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 25MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 50MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
PROMACTA TAB 75MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	\$0 (Tier 1)
<i>tranexamic acid tab 650 mg</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****PLATELET AGGREGATION INHIBITORS**

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	\$0 (Tier 1)
BRILINTA TAB 60MG	\$0 (Tier 2)
BRILINTA TAB 90MG	\$0 (Tier 2)
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	\$0 (Tier 1)
<i>dipyridamole tab 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dipyridamole tab 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dipyridamole tab 75 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>prasugrel hcl tab 5 mg (base equiv)</i>	\$0 (Tier 1)
<i>prasugrel hcl tab 10 mg (base equiv)</i>	\$0 (Tier 1)

IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM**AUTOIMMUNE AGENTS**

ENBREL INJ 25/0.5ML	\$0 (Tier 2) NDS, QL (16 syringes / 28 days), PA
ENBREL INJ 25MG	\$0 (Tier 2) NDS, QL (16 vials / 28 days), PA
ENBREL INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 syringes / 28 days), PA
ENBREL MINI INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 injections / 28 days), PA
ENBREL SRCLK INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 injections / 28 days), PA
HUMIRA INJ 10/0.1ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA
HUMIRA INJ 20/0.2ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA
HUMIRA INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 injections / 28 days), PA
HUMIRA KIT 40MG/0.8	\$0 (Tier 2) NDS, QL (6 syringes / 28 days), PA
HUMIRA PEDIA INJ CROHNS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ 40MG/0.8	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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HUMIRA PEN INJ 80/0.8ML	\$0 (Tier 2) NDS, QL (4 pens / 28 days), PA
HUMIRA PEN INJ CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ PS/UV	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT PED UC	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT PS/UV	\$0 (Tier 2) NDS, PA
REMICADE INJ 100MG	\$0 (Tier 2) NDS, PA
RENFLEXIS INJ 100MG	\$0 (Tier 2) NDS, LA, PA
RINVOQ TAB 15MG ER	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
SKYRIZI INJ 150DOSE	\$0 (Tier 2) NDS, QL (7 kits / year), PA
SKYRIZI INJ 150MG/ML	\$0 (Tier 2) NDS, QL (7 syringes / year), PA
SKYRIZI PEN INJ 150MG/ML	\$0 (Tier 2) NDS, QL (7 pens / year), PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 vial / 28 days), LA, PA
STELARA INJ 90MG/ML	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
TALTZ INJ 80MG/ML	\$0 (Tier 2) NDS, QL (3 syringes / 28 days), LA, PA
XELJANZ SOL 1MG/ML	\$0 (Tier 2) NDS, QL (240 mL / 24 days), PA
XELJANZ TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
XELJANZ TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
XELJANZ XR TAB 22MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS) - DRUGS TO TREAT RHEUMATOID ARTHRITIS

<i>hydroxychloroquine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>leflunomide tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>leflunomide tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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methotrexate sodium tab 2.5 mg (base equiv)

\$0 (Tier 1)

XATMEP SOL 2.5MG/ML

\$0 (Tier 2) B/D

IMMUNOGLOBULINS

BIVIGAM INJ 10%

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ 5GM/50ML

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ 10/100ML

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ 10/200ML

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ 20/200ML

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ 20/400ML

\$0 (Tier 2) NDS, PA

FLEBOGAMMA INJ DIF 5%

\$0 (Tier 2) NDS, PA

GAMASTAN INJ

\$0 (Tier 2) B/D

GAMMAGARD INJ 1GM/10ML

\$0 (Tier 2) NDS, PA

GAMMAGARD INJ 2.5GM/25

\$0 (Tier 2) NDS, PA

GAMMAGARD INJ 5GM/50ML

\$0 (Tier 2) NDS, PA

GAMMAGARD INJ 10GM/100

\$0 (Tier 2) NDS, PA

GAMMAGARD INJ 20GM/200

\$0 (Tier 2) NDS, PA

GAMMAGARD INJ 30GM/300

\$0 (Tier 2) NDS, PA

GAMMAGARD SD INJ 5GM HU

\$0 (Tier 2) NDS, PA

GAMMAGARD SD INJ 10GM HU

\$0 (Tier 2) NDS, PA

GAMMAKED INJ 1GM/10ML

\$0 (Tier 2) NDS, PA

GAMMAKED INJ 5GM/50ML

\$0 (Tier 2) NDS, PA

GAMMAKED INJ 10GM/100

\$0 (Tier 2) NDS, PA

GAMMAKED INJ 20GM/200

\$0 (Tier 2) NDS, PA

GAMMAPLEX INJ 5%

\$0 (Tier 2) NDS, PA

GAMMAPLEX INJ 10%

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 1GM/10ML

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 2.5GM/25

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 5GM/50ML

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 10GM/100

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 20GM/200

\$0 (Tier 2) NDS, PA

GAMUNEX-C INJ 40/400ML

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 1GM

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 2.5GM

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 2GM/20ML

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 5GM

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 5GM/50ML

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 10/100ML

\$0 (Tier 2) NDS, PA

OCTAGAM INJ 10GM

\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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OCTAGAM INJ 20/200ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 25GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 30/300ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 1GM/10ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 2.5/25ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 5GM/50ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 10/100ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 20/200ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 30/300ML	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 5 GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 10GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 20GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 40GRAMS	\$0 (Tier 2) NDS, PA

IMMUNOMODULATORS

ACTIMMUNE INJ 2MU/0.5	\$0 (Tier 2) NDS, LA, PA
ARCALYST INJ 220MG	\$0 (Tier 2) NDS, PA
INTRON A INJ 10MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 18MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 25MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 50MU	\$0 (Tier 2) NDS, B/D

IMMUNOSUPPRESSANTS

<i>azathioprine tab 50 mg</i>	\$0 (Tier 1) B/D
BENLYSTA INJ 120MG	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 200MG/ML	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 400MG	\$0 (Tier 2) NDS, PA
<i>cyclosporine cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 50 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified oral soln 100 mg/ml</i>	\$0 (Tier 1) B/D
<i>everolimus tab 0.5 mg</i>	\$0 (Tier 2) NDS, B/D
<i>everolimus tab 0.25 mg</i>	\$0 (Tier 1) B/D
<i>everolimus tab 0.75 mg</i>	\$0 (Tier 2) NDS, B/D
<i>gengraf cap 25mg</i>	\$0 (Tier 1) B/D
<i>gengraf cap 100mg</i>	\$0 (Tier 1) B/D
<i>gengraf sol 100mg/ml</i>	\$0 (Tier 1) B/D
<i>mycophenolate mofetil cap 250 mg</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>mycophenolate mofetil tab 500 mg</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
NULOJIX INJ 250MG	\$0 (Tier 2) NDS, B/D
PROGRAF GRA 0.2MG	\$0 (Tier 2) B/D
PROGRAF GRA 1MG	\$0 (Tier 2) B/D
SANDIMMUNE SOL 100MG/ML	\$0 (Tier 2) B/D
<i>sirolimus oral soln 1 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>sirolimus tab 0.5 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 1 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 2 mg</i>	\$0 (Tier 2) NDS, B/D
<i>tacrolimus cap 0.5 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 1 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 5 mg</i>	\$0 (Tier 1) B/D
ZORTRESS TAB 1MG	\$0 (Tier 2) NDS, B/D

VACCINES

ACTHIB INJ	\$0 (Tier 2)
ADACEL INJ	\$0 (Tier 2)
BCG VACCINE INJ	\$0 (Tier 2)
BEXSERO INJ	\$0 (Tier 2)
BOOSTRIX INJ	\$0 (Tier 2)
DAPTACEL INJ	\$0 (Tier 2)
DIP/TET PED INJ 25-5LFU	\$0 (Tier 2) B/D
ENGRIX-B INJ 10/0.5ML	\$0 (Tier 2) B/D
ENGRIX-B INJ 20MCG/ML	\$0 (Tier 2) B/D
GARDASIL 9 INJ	\$0 (Tier 2)
HAVRIX INJ 720UNIT	\$0 (Tier 2)
HAVRIX INJ 1440UNIT	\$0 (Tier 2)
HIBERIX SOL 10MCG	\$0 (Tier 2)
IMOVAX RABIE INJ 2.5/ML	\$0 (Tier 2) B/D
INFANRIX INJ	\$0 (Tier 2)
IPOL INJ INACTIVE	\$0 (Tier 2)
IXIARO INJ	\$0 (Tier 2)
KINRIX INJ	\$0 (Tier 2)
M-M-R II INJ	\$0 (Tier 2)
MENACTRA INJ	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
MENQUADFI INJ	\$0 (Tier 2)
MENVEO INJ	\$0 (Tier 2)
PEDIARIX INJ 0.5ML	\$0 (Tier 2)
PEDVAX HIB INJ	\$0 (Tier 2)
PENTACEL INJ	\$0 (Tier 2)
PROQUAD INJ	\$0 (Tier 2)
QUADRACEL INJ	\$0 (Tier 2)
RABAVERT INJ	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 5MCG/0.5	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 10MCG/ML	\$0 (Tier 2) B/D
RECOMBIVA-HB INJ 40MCG/ML	\$0 (Tier 2) B/D
ROTARIX SUS	\$0 (Tier 2)
ROTATEQ SOL	\$0 (Tier 2)
SHINGRIX INJ 50/0.5ML	\$0 (Tier 2) QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	\$0 (Tier 2) B/D
TENIVAC INJ 5-2LF	\$0 (Tier 2) B/D
TRUMENBA INJ	\$0 (Tier 2)
TWINRIX INJ	\$0 (Tier 2)
TYPHIM VI INJ	\$0 (Tier 2)
VAQTA INJ 25/0.5ML	\$0 (Tier 2)
VAQTA INJ 50UNT/ML	\$0 (Tier 2)
VARIVAX INJ	\$0 (Tier 2)
YF-VAX INJ	\$0 (Tier 2)
ZOSTAVAX INJ	\$0 (Tier 2) QL (1 vial per lifetime)

MISCELLANEOUS MISCELLANEOUS

ACACIA POW	\$0 (Tier 3) DP
ACESULFAME POW POTASSIU	\$0 (Tier 3) DP
ACETIC ACID SOL 3%	\$0 (Tier 3) DP
ACETIC ACID SOL GLACIAL	\$0 (Tier 3) DP
ACETYL-L-CAR POW HCL	\$0 (Tier 3) DP
ALMOND OIL SWEET	\$0 (Tier 3) DP
ALOE VERA POW	\$0 (Tier 3) DP
ALUM AMMONIU POW	\$0 (Tier 3) DP
ASCORBYL POW PALMITAT	\$0 (Tier 3) DP
BANANA LIQ FLAVOR	\$0 (Tier 3) DP
BENZYL ALC LIQ	\$0 (Tier 3) DP
BETAINE POW ANHYDROU	\$0 (Tier 3) DP
BIOFLAVINOID POW LEMON	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
BIOFLAVONOID POW CITRUS	\$0 (Tier 3) DP
BIOTIN-D POW	\$0 (Tier 3) DP
BISMUTH SUBC POW	\$0 (Tier 3) DP
BITTERNESS POW NATURAL	\$0 (Tier 3) DP
BORIC ACID POW	\$0 (Tier 3) DP
BUFFER CREAM POW	\$0 (Tier 3) DP
BUTYLPARABEN POW	\$0 (Tier 3) DP
CALCIUM POW CITRATE	\$0 (Tier 3) DP
CALCIUM POW HYDROXID	\$0 (Tier 3) DP
CALCIUM POW SACCHARA	\$0 (Tier 3) DP
CARBOGEL GEL 940	\$0 (Tier 3) DP
CARBOHOL GEL 940	\$0 (Tier 3) DP
CARBOMER POW HOMOPOLY	\$0 (Tier 3) DP
CARBOXYMETHY POW SODIUM	\$0 (Tier 3) DP
CETYL ALCOHO GRA	\$0 (Tier 3) DP
CHERRY CON	\$0 (Tier 3) DP
CHERRY SYP	\$0 (Tier 3) DP
CHERRY SYP CONCENTR	\$0 (Tier 3) DP
CHLOROFORM SOL	\$0 (Tier 3) DP
CHOCOLATE CON FLAVOR	\$0 (Tier 3) DP
CHOLESTEROL POW ACETATE	\$0 (Tier 3) DP
CHRYSIN POW	\$0 (Tier 3) DP
CITRIC ACID GRA ANHYDROU	\$0 (Tier 3) DP
CITRIC ACID POW ANHYDROU	\$0 (Tier 3) DP
CLOVE OIL	\$0 (Tier 3) DP
COAL TAR SOL 20%	\$0 (Tier 3) DP
COCOA BUTTER MIS	\$0 (Tier 3) DP
COCONUT OIL	\$0 (Tier 3) DP
COENZYME Q10 POW	\$0 (Tier 3) DP
COLLODION LIQ	\$0 (Tier 3) DP
COLLODION LIQ FLEXIBLE	\$0 (Tier 3) DP
CORN STARCH POW	\$0 (Tier 3) DP
COTTONSEED OIL	\$0 (Tier 3) DP
CREATINE POW MONOHYDR	\$0 (Tier 3) DP
CROTON OIL	\$0 (Tier 3) DP
D-VITAMIN E POW SUCCINAT	\$0 (Tier 3) DP
DISTILLED LIQ WATER	\$0 (Tier 3) DP
ETHOXY ETHNL LIQ REAGENT	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 95%	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ETHYL ALCOHO SOL 95% USP	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 100%	\$0 (Tier 3) DP
ETHYL ALCOHO SOL SDA 95%	\$0 (Tier 3) DP
ETHYL OLEATE LIQ	\$0 (Tier 3) DP
FATTYBLEND MIS	\$0 (Tier 3) DP
FDC BLUE 1 POW	\$0 (Tier 3) DP
FDC BLUE 1 POW AL LAKE	\$0 (Tier 3) DP
FDC BLUE 2 POW	\$0 (Tier 3) DP
FDC GREEN #3 POW	\$0 (Tier 3) DP
FDC RED 40 POW	\$0 (Tier 3) DP
FDC RED #3 POW	\$0 (Tier 3) DP
FDC RED #40 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 5 POW	\$0 (Tier 3) DP
FDC YELLOW 5 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 6 POW	\$0 (Tier 3) DP
FERRIC POW SUBSULFA	\$0 (Tier 3) DP
FERRIC SUBSU SOL	\$0 (Tier 3) DP
FLAVORX LIQ	\$0 (Tier 3) DP
FULLERS POW EARTH	\$0 (Tier 3) DP
GLUCOSAMINE POW HCL	\$0 (Tier 3) DP
GLUCOSAMINE POW SULFATE	\$0 (Tier 3) DP
GLYCERIN LIQ	\$0 (Tier 3) DP
GLYCOLIC ACD CRY	\$0 (Tier 3) DP
GRAPE LIQ FLAVOR	\$0 (Tier 3) DP
GRAPE SEED OIL	\$0 (Tier 3) DP
GRAPE SYP	\$0 (Tier 3) DP
GREEN TEA EX LIQ 90%	\$0 (Tier 3) DP
HRT BASE CRE	\$0 (Tier 3) DP
HYDROCHL ACD LIQ 37%	\$0 (Tier 3) DP
HYDROPHILIC OIN	\$0 (Tier 3) DP
HYDROUS CRE EMULSIFI	\$0 (Tier 3) DP
INDOLE-3- POW CARBINOL	\$0 (Tier 3) DP
INOSITOL POW HEXANICO	\$0 (Tier 3) DP
ISOPROPYL LIQ PALMITAT	\$0 (Tier 3) DP
JELENE OIN	\$0 (Tier 3) DP
KARAYA GUM	\$0 (Tier 3) DP
KOJIC ACID POW	\$0 (Tier 3) DP
L-CITRULLINE POW	\$0 (Tier 3) DP
LACTIC ACID SOL	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LACTOSE POW	\$0 (Tier 3) DP
LACTOSE POW ANHYDROU	\$0 (Tier 3) DP
LACTOSE POW HYDROUS	\$0 (Tier 3) DP
LACTOSE POW MONOHYDR	\$0 (Tier 3) DP
LIP BALM OIN BASE	\$0 (Tier 3) DP
LIP BALM OIN NATURAL	\$0 (Tier 3) DP
LIPOBASE CRE	\$0 (Tier 3) DP
LIPOIC ACID POW	\$0 (Tier 3) DP
LIPOIL OIL	\$0 (Tier 3) DP
LIPOVAN BASE CRE	\$0 (Tier 3) DP
LOLLIBASE POW	\$0 (Tier 3) DP
LOZIBASE MIS	\$0 (Tier 3) DP
MAG CITRATE POW TRIBASIC	\$0 (Tier 3) DP
MALIC ACID POW	\$0 (Tier 3) DP
METHYL SULF CRY	\$0 (Tier 3) DP
METHYLCELLUL GEL 2%	\$0 (Tier 3) DP
METHYLCELLUL GEL 3%	\$0 (Tier 3) DP
METHYLCELLUL POW 1500CPS	\$0 (Tier 3) DP
METHYLCELLUL POW 4000CPS	\$0 (Tier 3) DP
METHYLPARABE POW	\$0 (Tier 3) DP
MICRODERM CRE BASE	\$0 (Tier 3) DP
MICROSOME CRE BASE	\$0 (Tier 3) DP
NA PHOS MONO POW ANHYDROU	\$0 (Tier 3) DP
NICE DISTILL LIQ WATER	\$0 (Tier 3) DP
OIL-ALMOND OIL SWEET	\$0 (Tier 3) DP
OIL-COCONUT OIL	\$0 (Tier 3) DP
ORA-BLEND SF SUS	\$0 (Tier 3) DP
ORA-BLEND SUS	\$0 (Tier 3) DP
ORA-HESIVE PST BASE	\$0 (Tier 3) DP
ORA-PLUS LIQ	\$0 (Tier 3) DP
ORA-SWEET SF SYP	\$0 (Tier 3) DP
ORA-SWEET SYP	\$0 (Tier 3) DP
ORANGE CONC LIQ	\$0 (Tier 3) DP
ORNITHINE POW HCL	\$0 (Tier 3) DP
OXALIC ACID CRY	\$0 (Tier 3) DP
PCCA BASE CRE 7542	\$0 (Tier 3) DP
PCCA MBK MIS FAT ACID	\$0 (Tier 3) DP
PEG 300 LIQ	\$0 (Tier 3) DP
PEG 1000 LIQ	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PEG 3350 POW	\$0 (Tier 3) DP
PEG BLEND OIN	\$0 (Tier 3) DP
PERUVIAN LIQ BALSAM	\$0 (Tier 3) DP
PFCB CRE	\$0 (Tier 3) DP
PHARMABASE CRE ANTIOXID	\$0 (Tier 3) DP
PHARMABASE CRE COSMETIC	\$0 (Tier 3) DP
PHARMABASE CRE LIGHT	\$0 (Tier 3) DP
PHARMABASE CRE VAGINAL	\$0 (Tier 3) DP
PHOSPHATIDYL POW 20%	\$0 (Tier 3) DP
PHYTOBASE CRE	\$0 (Tier 3) DP
PLO20 GEL FLOWABLE	\$0 (Tier 3) DP
PNA-HRT BASE CRE	\$0 (Tier 3) DP
POLOX GEL 20%	\$0 (Tier 3) DP
POLOX GEL 30%	\$0 (Tier 3) DP
POLOXAMER POW 407	\$0 (Tier 3) DP
POLY GLYCOL LIQ 1450	\$0 (Tier 3) DP
POLY GLYCOL POW 8000	\$0 (Tier 3) DP
POLYETHYLENE LIQ GLY 400	\$0 (Tier 3) DP
POLYOXYL 40 POW STEARATE	\$0 (Tier 3) DP
POLYSORBATE SOL 20	\$0 (Tier 3) DP
POT HYDROXID SOL 10%	\$0 (Tier 3) DP
POT HYDROXID SOL 20%	\$0 (Tier 3) DP
POT NITRATE GRA	\$0 (Tier 3) DP
POT NITRATE GRA PURIFIED	\$0 (Tier 3) DP
POT SORBATE CRY	\$0 (Tier 3) DP
POTASSIUM CRY BROMIDE	\$0 (Tier 3) DP
POTASSIUM MIS HYDROXID	\$0 (Tier 3) DP
PROPYLENE GL LIQ	\$0 (Tier 3) DP
PROPYLENE LIQ GLYCOL	\$0 (Tier 3) DP
PROPYPARABEN POW	\$0 (Tier 3) DP
PYRUVIC ACID LIQ	\$0 (Tier 3) DP
Q-DERM CRE	\$0 (Tier 3) DP
RASPBERRY LIQ FLAVOR	\$0 (Tier 3) DP
RDT BASE POW	\$0 (Tier 3) DP
RED YEAST POW RICE	\$0 (Tier 3) DP
SAFFLOWER OIL	\$0 (Tier 3) DP
SALTSTABLE CRE	\$0 (Tier 3) DP
SHEA BUTTER MIS	\$0 (Tier 3) DP
SIMPLE SYP	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SOD BENZOATE POW	\$0 (Tier 3) DP
SOD BROMIDE GRA	\$0 (Tier 3) DP
SOD METABISU GRA ANHYDR	\$0 (Tier 3) DP
SOD PERBORAT CRY	\$0 (Tier 3) DP
SOD PHOSPHAT GRA DIBASIC	\$0 (Tier 3) DP
SOD PROPION POW	\$0 (Tier 3) DP
SOD SULFITE POW ANHYDROU	\$0 (Tier 3) DP
SODIUM MIS HYDROXID	\$0 (Tier 3) DP
SODIUM POW BICARBON	\$0 (Tier 3) DP
SORBIC ACID POW	\$0 (Tier 3) DP
SORBITOL SOL 70%	\$0 (Tier 3) DP
SOYBEAN OIL	\$0 (Tier 3) DP
STEVIA POW EXTRACT	\$0 (Tier 3) DP
STRAWBERRY LIQ FLAVOR	\$0 (Tier 3) DP
SUPPOSIBLEND MIS	\$0 (Tier 3) DP
SUSPENDIT GEL	\$0 (Tier 3) DP
SYRSPEND SF SUS ALKA	\$0 (Tier 3) DP
TALC POW	\$0 (Tier 3) DP
TANGERINE POW FLAVOR	\$0 (Tier 3) DP
TARTARIC ACD GRA	\$0 (Tier 3) DP
TROCHIBASE MIS	\$0 (Tier 3) DP
TROCHIBASE S MIS	\$0 (Tier 3) DP
TROCHIBASE S MIS CLASSIC	\$0 (Tier 3) DP
TURPENTINE LIQ SPIRITS	\$0 (Tier 3) DP
TUTTI FRUTTI CON	\$0 (Tier 3) DP
U-BASE CRE	\$0 (Tier 3) DP
UNIBASE CRE	\$0 (Tier 3) DP
V-MAX CRE	\$0 (Tier 3) DP
VANIBASE CRE	\$0 (Tier 3) DP
VEEGUM MIS LUMP	\$0 (Tier 3) DP
VERSATILE CRE BASE	\$0 (Tier 3) DP
VERSIGEL CRE	\$0 (Tier 3) DP
VITAMIN K-1 POW	\$0 (Tier 3) DP
<i>white petrolatum gel</i>	\$0 (Tier 3) DP
WITEPSOL H15 MIS	\$0 (Tier 3) DP
XANTHAN GUM POW	\$0 (Tier 3) DP
XYLITOL POW	\$0 (Tier 3) DP

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS*****ELECTROLYTES***

<i>gnp pediatri sol electrol</i>	\$0 (Tier 3) DP
<i>oral electrolyte solution</i>	\$0 (Tier 3) DP
<i>oralyte sol</i>	\$0 (Tier 3) DP
<i>oralyte sol freeze</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol freezer</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol fruit</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol grape</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol unflavrd</i>	\$0 (Tier 3) DP

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	\$0 (Tier 1)
D5W/LYTES INJ #48	\$0 (Tier 2)
D5W/NACL INJ 0.3%	\$0 (Tier 2)
D10W/NACL INJ 0.2%	\$0 (Tier 2)
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
<i>dextrose 5% in lactated ringers</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.2%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.9%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
<i>dextrose 10% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
ISOLYTE-P INJ /D5W	\$0 (Tier 2)
ISOLYTE-S INJ	\$0 (Tier 2)
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
KCL/D5W/NACL INJ 0.3/0.9%	\$0 (Tier 2)
KCL/D5W/NACL INJ 0.15/0.2	\$0 (Tier 2)
<i>lactated ringer's solution</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
MAGNESIUM SU INJ 2GM/50ML	\$0 (Tier 2)	
MAGNESIUM SU INJ 4G/100ML	\$0 (Tier 2)	
MAGNESIUM SU INJ 20/500ML	\$0 (Tier 2)	
MAGNESIUM SU INJ 40G/1000	\$0 (Tier 2)	
MAGNESIUM SU INJ 80MG/ML	\$0 (Tier 2)	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0 (Tier 2)	
<i>magnesium sulfate inj 50%</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	\$0 (Tier 2)	
MG SO4/D5W INJ 10MG/ML	\$0 (Tier 2)	
PLASMA-LYTE INJ -148	\$0 (Tier 2)	
PLASMA-LYTE INJ -A	\$0 (Tier 2)	
POT CHL/NACL INJ 20MEQ/L	\$0 (Tier 1)	
POT CHL/NACL INJ 40MEQ/L	\$0 (Tier 1)	
POT CHLORIDE INJ 10MEQ	\$0 (Tier 2)	
POT CHLORIDE INJ 20MEQ	\$0 (Tier 2)	
POT CHLORIDE INJ 40MEQ	\$0 (Tier 2)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0 (Tier 1)	
<i>potassium chloride inj 2 meq/ml</i>	\$0 (Tier 1)	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 0.9%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 0.45%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 3%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 5%</i>	\$0 (Tier 1)	
TPN ELECTROL INJ	\$0 (Tier 2)	B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>klor-con 8 tab 8meq er</i>	\$0 (Tier 1)	
<i>klor-con 10 tab 10meq er</i>	\$0 (Tier 1)	
<i>klor-con m10 tab 10meq er</i>	\$0 (Tier 1)	
<i>klor-con m15 tab 15meq er</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>klor-con m20 tab 20meq er</i>	\$0 (Tier 1)
<i>klor-con pak 20meq</i>	\$0 (Tier 1)
M-NATAL PLUS TAB	\$0 (Tier 2)
PNV FOLIC AC TAB + IRON	\$0 (Tier 2)
<i>potassium chloride cap er 8 meq</i>	\$0 (Tier 1)
<i>potassium chloride cap er 10 meq</i>	\$0 (Tier 1)
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	\$0 (Tier 1)
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	\$0 (Tier 1)
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	\$0 (Tier 1)
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	\$0 (Tier 1)
<i>potassium chloride powder packet 20 meq</i>	\$0 (Tier 1)
<i>potassium chloride tab er 8 meq (600 mg)</i>	\$0 (Tier 1)
<i>potassium chloride tab er 10 meq</i>	\$0 (Tier 1)
<i>potassium chloride tab er 20 meq (1500 mg)</i>	\$0 (Tier 1)
PRENATAL TAB 27-1MG	\$0 (Tier 2)
PRENATAL TAB PLUS	\$0 (Tier 2)
PRENATAL VIT TAB LOW IRON	\$0 (Tier 2)
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0 (Tier 1)
TRICARE TAB PRENATAL	\$0 (Tier 2)

IV NUTRITION

AMINOSYN-PF INJ 7%	\$0 (Tier 2) B/D
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	\$0 (Tier 3) DP
CLINIMIX INJ 4.25/D5W	\$0 (Tier 2) B/D
CLINIMIX INJ 4.25/D10	\$0 (Tier 2) B/D
CLINIMIX INJ 5%/D15W	\$0 (Tier 2) B/D
CLINIMIX INJ 5%/D20W	\$0 (Tier 2) B/D
CLINIMIX INJ 6/5	\$0 (Tier 2) B/D
CLINIMIX INJ 8/10	\$0 (Tier 2) B/D
CLINIMIX INJ 8/14	\$0 (Tier 2) B/D
<i>clinisol sf inj 15%</i>	\$0 (Tier 1) B/D
CLINOLIPID EMU 20%	\$0 (Tier 2) B/D
COPPER SULF CRY	\$0 (Tier 3) DP
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>dextrose inj 5%</i>	\$0 (Tier 1)
<i>dextrose inj 10%</i>	\$0 (Tier 1)
<i>dextrose inj 50%</i>	\$0 (Tier 1) B/D
<i>dextrose inj 70%</i>	\$0 (Tier 1) B/D
FREAMINE HBC INJ 6.9%	\$0 (Tier 2) B/D
FREAMINE III INJ 10%	\$0 (Tier 2) B/D
<i>hepatamine sol 8%</i>	\$0 (Tier 2) B/D
INTRALIPID INJ 20%	\$0 (Tier 2) B/D
INTRALIPID INJ 30%	\$0 (Tier 2) B/D
NUTRILIPID EMU 20%	\$0 (Tier 2) B/D
<i>plenamine inj 15%</i>	\$0 (Tier 1) B/D
PREMASOL SOL 10%	\$0 (Tier 2) B/D
PROCALAMINE INJ 3%	\$0 (Tier 2) B/D
PROSOL INJ 20%	\$0 (Tier 2) B/D
TRAVASOL INJ 10%	\$0 (Tier 2) B/D
TROPHAMINE INJ 10%	\$0 (Tier 2) B/D
<i>zinc chloride inj 1 mg/ml</i>	\$0 (Tier 3) DP

MINERALS

BEELITH TAB	\$0 (Tier 3) DP
CA PHOS DIHY POW DIBASIC	\$0 (Tier 3) DP
CALCET PETIT TAB 200-250	\$0 (Tier 3) DP
CALCI-CHEW CHW 1250MG	\$0 (Tier 3) DP
<i>calcitrate tab</i>	\$0 (Tier 3) DP
<i>calcitrate tab 950mg</i>	\$0 (Tier 3) DP
<i>calcium 600 chw +d/miner</i>	\$0 (Tier 3) DP
<i>calcium 600 tab</i>	\$0 (Tier 3) DP
<i>calcium 600 tab + d</i>	\$0 (Tier 3) DP
<i>calcium 600 tab -d</i>	\$0 (Tier 3) DP
<i>calcium +d tab maximum</i>	\$0 (Tier 3) DP
CALCIUM CARB POW	\$0 (Tier 3) DP
CALCIUM CARB POW EX-LIGHT	\$0 (Tier 3) DP
CALCIUM CARB POW HEAVY	\$0 (Tier 3) DP
<i>calcium carb-vit d w/ minerals chew tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	\$0 (Tier 3) DP
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 600 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium citr tab w/vit d3</i>	\$0 (Tier 3) DP
<i>calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)</i>	\$0 (Tier 3) DP
<i>CALCIUM GLUC POW</i>	\$0 (Tier 3) DP
<i>CALCIUM LACT TAB 648MG</i>	\$0 (Tier 3) DP
<i>CALCIUM PHOS POW TRIBASIC</i>	\$0 (Tier 3) DP
<i>calcium plus tab 600 +d</i>	\$0 (Tier 3) DP
<i>calcium soft chw mlk choc</i>	\$0 (Tier 3) DP
<i>calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>calcium tab 600mg</i>	\$0 (Tier 3) DP
<i>calcium tab vit d</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 334-134-5 mg</i>	\$0 (Tier 3) DP
<i>calcium/d3 tab</i>	\$0 (Tier 3) DP
<i>calcium/d chw 500-400</i>	\$0 (Tier 3) DP
<i>cit calc/d tab 315-250</i>	\$0 (Tier 3) DP
<i>gnp ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>gnp ca/vit d chw minerals</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 600/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab cit +d3</i>	\$0 (Tier 3) DP
<i>gnp magnesiu tab 250mg</i>	\$0 (Tier 3) DP
<i>gnp zinc tab 50mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
MAG CARBONAT POW HEAVY	\$0 (Tier 3) DP
<i>mag-g tab 500mg</i>	\$0 (Tier 3) DP
MAGDELAY TAB 70MG	\$0 (Tier 3) DP
MAGNEBIND TAB 300	\$0 (Tier 3) DP
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 500 mg (mg supplement)</i>	\$0 (Tier 3) DP
<i>magnesium tab 250 mg</i>	\$0 (Tier 3) DP
<i>magnesium tab 250mg</i>	\$0 (Tier 3) DP
MAGONATE LIQ 1000/5ML	\$0 (Tier 3) DP
<i>manganese chloride inj 0.1 mg/ml</i>	\$0 (Tier 3) DP
<i>oysco 500 tab 500mg</i>	\$0 (Tier 3) DP
<i>oysco 500+d chw</i>	\$0 (Tier 3) DP
<i>oysco 500+d tab</i>	\$0 (Tier 3) DP
<i>oyst cal/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyst shell/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyster shell calcium tab 500 mg</i>	\$0 (Tier 3) DP
<i>oyster shell tab 500mg</i>	\$0 (Tier 3) DP
<i>potassium & sodium phosphates powder pack 280-160-250 mg</i>	\$0 (Tier 3) DP
RISACAL-D TAB	\$0 (Tier 3) DP
<i>sm ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>sm calcium chw</i>	\$0 (Tier 3) DP
<i>sm calcium/d tab 600-400</i>	\$0 (Tier 3) DP
SM CORAL CAL TAB 1000MG	\$0 (Tier 3) DP
<i>sm zinc tab 50mg</i>	\$0 (Tier 3) DP
SOD ACETATE POW ANHYDR	\$0 (Tier 3) DP
<i>zinc gluconate tab 50 mg (elemental zn)</i>	\$0 (Tier 3) DP
ZINC SULFATE CAP 50MG	\$0 (Tier 3) DP
<i>zinc sulfate tab 220 mg (50 mg zinc equivalent)</i>	\$0 (Tier 3) DP
<i>zinc tab 50 mg</i>	\$0 (Tier 3) DP
MISCELLANEOUS	
ASPARTAME POW	\$0 (Tier 3) DP
<i>coenzyme q10 cap 10 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>coenzyme q10 cap 30 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 30mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 50 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 60 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 75 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 100 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 100mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 150 mg</i>	\$0 (Tier 3) DP
COENZYME Q10 LIQ 30MG/5ML	\$0 (Tier 3) DP
COENZYME Q10 TAB 200MG	\$0 (Tier 3) DP
COQ-10 CAP 100MG TR	\$0 (Tier 3) DP
DIABETISWEET POW	\$0 (Tier 3) DP
<i>eq1 coq10 cap 100mg</i>	\$0 (Tier 3) DP
FRUCTOSE GRA	\$0 (Tier 3) DP
<i>gnp co q10 cap 60mg</i>	\$0 (Tier 3) DP
<i>gnp co q10 cap 100mg</i>	\$0 (Tier 3) DP
GOWEY TIN TINCTURE	\$0 (Tier 3) DP
<i>h2q cap 100mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 50mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 100mg</i>	\$0 (Tier 3) DP
L-ARGININE POW	\$0 (Tier 3) DP
L-CYSTINE POW	\$0 (Tier 3) DP
L-GLUTAMINE POW	\$0 (Tier 3) DP
L-GLUTATHION CRY	\$0 (Tier 3) DP
L-ISOLEUCINE POW	\$0 (Tier 3) DP
L-TYROSINE POW	\$0 (Tier 3) DP
L-VALINE POW	\$0 (Tier 3) DP
LECITHIN GRA	\$0 (Tier 3) DP
<i>prasterone (dhea) cap 25 mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 30mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 75mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 150mg</i>	\$0 (Tier 3) DP
<i>q-sorb co-q cap 100mg</i>	\$0 (Tier 3) DP
SACCHARIN POW	\$0 (Tier 3) DP
SACCHARIN POW SODIUM	\$0 (Tier 3) DP
<i>sm coq-10 cap 50mg</i>	\$0 (Tier 3) DP
SOD SACCHARI GRA	\$0 (Tier 3) DP
THREONINE POW	\$0 (Tier 3) DP

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****VITAMINS**

ADULT 50+ CAP OCUVITE	\$0 (Tier 3) DP
<i>animal shape chw</i>	\$0 (Tier 3) DP
<i>animal shape chw complete</i>	\$0 (Tier 3) DP
ANIMAL SHAPE CHW IRON	\$0 (Tier 3) DP
<i>antioxidant tab</i>	\$0 (Tier 3) DP
<i>antioxidant tab vitamins</i>	\$0 (Tier 3) DP
AQUADEKS CHW	\$0 (Tier 3) DP
<i>aquadeks dro</i>	\$0 (Tier 3) DP
AQUASOL A INJ 50000/ML	\$0 (Tier 3) DP
<i>aqueous e dro 50unt/ml</i>	\$0 (Tier 3) DP
<i>ascorbic acid cap er 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid chew tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid chew tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 1000 mg</i>	\$0 (Tier 3) DP
B-12 DOTS TAB 500MCG	\$0 (Tier 3) DP
<i>b-complex vitamin cap</i>	\$0 (Tier 3) DP
<i>b-complex vitamin tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c & calcium tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c tab</i>	\$0 (Tier 3) DP
<i>biotin cap 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 300 mcg</i>	\$0 (Tier 3) DP
<i>c 250 tab</i>	\$0 (Tier 3) DP
<i>c-500 chw 500mg</i>	\$0 (Tier 3) DP
<i>c-1000/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>c/rosehip tr tab 1000mg</i>	\$0 (Tier 3) DP
<i>ca citrate + tab</i>	\$0 (Tier 3) DP
<i>cal-mag-zinc tab +d3</i>	\$0 (Tier 3) DP
<i>calciferol dro 8000/ml</i>	\$0 (Tier 3) DP
<i>centamin liq</i>	\$0 (Tier 3) DP
<i>centavite liq</i>	\$0 (Tier 3) DP
<i>century tab</i>	\$0 (Tier 3) DP
<i>century tab mature</i>	\$0 (Tier 3) DP
<i>cerovite jr chw</i>	\$0 (Tier 3) DP
<i>cerovite tab advanced</i>	\$0 (Tier 3) DP
<i>cerovite tab senior</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
CERTAVITE TAB SENIOR	\$0 (Tier 3) DP
<i>certavite/ tab antioxi</i>	\$0 (Tier 3) DP
<i>chewabl vite chw childrns</i>	\$0 (Tier 3) DP
<i>chewable c chw 500mg</i>	\$0 (Tier 3) DP
<i>child chew chw iron</i>	\$0 (Tier 3) DP
<i>child chew chw vitamins</i>	\$0 (Tier 3) DP
<i>child chew/ chw extra c</i>	\$0 (Tier 3) DP
<i>childrens chw /iron</i>	\$0 (Tier 3) DP
CHILDRENS CHW COMPLETE	\$0 (Tier 3) DP
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 10 mcg (400 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 25 mcg (1000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 50 mcg (2000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 250 mcg (10000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 10 mcg (400 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	\$0 (Tier 3) DP
CL PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
<i>cod liver cap</i>	\$0 (Tier 3) DP
<i>cod liver oil cap</i>	\$0 (Tier 3) DP
COD LIVER OIL OIL	\$0 (Tier 3) DP
<i>complete tab</i>	\$0 (Tier 3) DP
<i>complete tab</i>	\$0 (Tier 3) DP
<i>complete tab senior</i>	\$0 (Tier 3) DP
<i>cyanocobalamin inj 1000 mcg/ml</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 100 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 250 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 500 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 2000 mcg</i>	\$0 (Tier 3) DP
<i>d3 cap 1000unit</i>	\$0 (Tier 3) DP
<i>d3 super str cap 2000unit</i>	\$0 (Tier 3) DP
<i>d 400 tab 400unit</i>	\$0 (Tier 3) DP
<i>daily vit tab</i>	\$0 (Tier 3) DP
<i>daily-vite tab</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>daily-vite/ tab iron</i>	\$0 (Tier 3) DP
DIALYVIT 800 TAB ZINC 15	\$0 (Tier 3) DP
<i>dialyvite d cap 5000unit</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800/d</i>	\$0 (Tier 3) DP
DIALYVITE TAB 800/ZINC	\$0 (Tier 3) DP
<i>e-400 cap 400unit</i>	\$0 (Tier 3) DP
ECEE PLUS TAB	\$0 (Tier 3) DP
<i>eldertonic liq</i>	\$0 (Tier 3) DP
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	\$0 (Tier 3) DP
<i>ergocalciferol soln 200 mcg/ml (8000 unit/ml)</i>	\$0 (Tier 3) DP
<i>essentl one tab daily</i>	\$0 (Tier 3) DP
<i>ester-c tab 500mg</i>	\$0 (Tier 3) DP
EZFE FORTE CAP	\$0 (Tier 3) DP
<i>folic acid inj 5 mg/ml</i>	\$0 (Tier 3) DP
<i>folic acid tab 1 mg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400 mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 800 mcg</i>	\$0 (Tier 3) DP
<i>geriaton liq</i>	\$0 (Tier 3) DP
GERIATRIC LIQ VITAMIN	\$0 (Tier 3) DP
<i>gnp b-50 tab balanced</i>	\$0 (Tier 3) DP
<i>gnp b-100 tab</i>	\$0 (Tier 3) DP
<i>gnp century tab</i>	\$0 (Tier 3) DP
<i>gnp century tab cardio</i>	\$0 (Tier 3) DP
GNP CENTURY TAB ENERGY	\$0 (Tier 3) DP
<i>gnp century tab mature</i>	\$0 (Tier 3) DP
<i>gnp century tab senior</i>	\$0 (Tier 3) DP
<i>gnp century tab ultimate</i>	\$0 (Tier 3) DP
<i>gnp healthy tab eyes</i>	\$0 (Tier 3) DP
<i>gnp little chw ones</i>	\$0 (Tier 3) DP
<i>gnp niacin tab 250mg tr</i>	\$0 (Tier 3) DP
<i>gnp one dail tab maximum</i>	\$0 (Tier 3) DP
<i>gnp opti-vit tab</i>	\$0 (Tier 3) DP
GNP PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
<i>gnp vit b1 tab 100mg</i>	\$0 (Tier 3) DP
<i>gnp vit b-6 tab 100mg</i>	\$0 (Tier 3) DP
<i>gnp vit b-12 tab 500mcg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>gnp vit b-12 tab 1000 cr</i>	\$0 (Tier 3) DP
<i>gnp vit c chw 500mg</i>	\$0 (Tier 3) DP
<i>gnp vit c loz 60mg</i>	\$0 (Tier 3) DP
<i>gnp vit c tab 250mg</i>	\$0 (Tier 3) DP
<i>gnp vit c tab 1000mg</i>	\$0 (Tier 3) DP
<i>gnp vit d tab 1000unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 200unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 400unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 1000unit</i>	\$0 (Tier 3) DP
<i>gnp zoochews chw gummies</i>	\$0 (Tier 3) DP
<i>healthy eyes cap supervis</i>	\$0 (Tier 3) DP
<i>healthy eyes tab</i>	\$0 (Tier 3) DP
<i>hm niacin tab 250mg</i>	\$0 (Tier 3) DP
<i>hm vit b1 tab 100mg</i>	\$0 (Tier 3) DP
<i>hm vitamin e cap 200unit</i>	\$0 (Tier 3) DP
<i>hm vitamin e cap 1000unit</i>	\$0 (Tier 3) DP
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	\$0 (Tier 3) DP
<i>i-vite prote tab</i>	\$0 (Tier 3) DP
<i>i-vite tab</i>	\$0 (Tier 3) DP
ICAPS AREDS TAB FORMULA	\$0 (Tier 3) DP
<i>icaps cap</i>	\$0 (Tier 3) DP
<i>icaps lutein cap /omega-3</i>	\$0 (Tier 3) DP
ICAPS LUTEIN TAB ZEAXANTH	\$0 (Tier 3) DP
<i>icaps mv tab</i>	\$0 (Tier 3) DP
INFUVITE INJ	\$0 (Tier 3) DP
INFUVITE INJ ADULT	\$0 (Tier 3) DP
INFUVITE INJ PEDIATRI	\$0 (Tier 3) DP
M.V.I PEDIAT INJ	\$0 (Tier 3) DP
MAXIMUM D3 CAP 325MCG	\$0 (Tier 3) DP
<i>mega multi tab men</i>	\$0 (Tier 3) DP
<i>mega multi tab women</i>	\$0 (Tier 3) DP
MEGA MULTIVI TAB MEN	\$0 (Tier 3) DP
MEGA MULTIVI TAB WOMEN	\$0 (Tier 3) DP
<i>mult vitamin tab essent</i>	\$0 (Tier 3) DP
<i>mult vitamin tab mens</i>	\$0 (Tier 3) DP
<i>mult vitamin tab womens</i>	\$0 (Tier 3) DP
<i>multi-delyn liq</i>	\$0 (Tier 3) DP
MULTI-DELYN LIQ /IRON	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>multi-vitam tab</i>	\$0 (Tier 3) DP
<i>multilex tab</i>	\$0 (Tier 3) DP
<i>multiple vitamins w/ minerals tab</i>	\$0 (Tier 3) DP
<i>nail-ex tab 2.5mg</i>	\$0 (Tier 3) DP
NASCOBAL SPR 500MCG	\$0 (Tier 3) DP
NEPHRONEX LIQ 0.9/5ML	\$0 (Tier 3) DP
<i>niacin cap 500mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 250 mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab 100 mg</i>	\$0 (Tier 3) DP
<i>niacin tab 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab er 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab er 750 mg</i>	\$0 (Tier 3) DP
NIACIN TR TAB 1000MG	\$0 (Tier 3) DP
NIACINAMIDE POW	\$0 (Tier 3) DP
<i>niacinamide tab 500 mg</i>	\$0 (Tier 3) DP
<i>nutr-e-sol liq 400/15ml</i>	\$0 (Tier 3) DP
OCUVITE CAP ADULT	\$0 (Tier 3) DP
<i>ocuvite tab lutein</i>	\$0 (Tier 3) DP
<i>ocuvite xtra tab</i>	\$0 (Tier 3) DP
<i>once daily tab</i>	\$0 (Tier 3) DP
<i>once daily tab iron</i>	\$0 (Tier 3) DP
ONCOVITE TAB	\$0 (Tier 3) DP
<i>one daily tab</i>	\$0 (Tier 3) DP
<i>one daily tab maximum</i>	\$0 (Tier 3) DP
<i>one daily tab men 50+</i>	\$0 (Tier 3) DP
<i>one daily tab mens</i>	\$0 (Tier 3) DP
<i>one daily tab mens 50+</i>	\$0 (Tier 3) DP
<i>one daily tab pls iron</i>	\$0 (Tier 3) DP
<i>one daily tab wom 50+</i>	\$0 (Tier 3) DP
<i>one daily tab womens</i>	\$0 (Tier 3) DP
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	\$0 (Tier 3) DP
<i>phytonadione inj 10 mg/ml</i>	\$0 (Tier 3) DP
<i>phytonadione tab 5 mg</i>	\$0 (Tier 3) DP
<i>poly vitamin chw</i>	\$0 (Tier 3) DP
<i>poly-vite sol /iron</i>	\$0 (Tier 3) DP
<i>polyvitamin chw /iron</i>	\$0 (Tier 3) DP
PRENATAL TAB	\$0 (Tier 3) DP
PRENATAL TAB 27-0.8MG	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
PRENATAL TAB LOW IRON	\$0 (Tier 3) DP
PRESERVISION CAP AREDS	\$0 (Tier 3) DP
PRESERVISION CAP AREDS 2	\$0 (Tier 3) DP
PRESERVISION CAP LUTEIN	\$0 (Tier 3) DP
PRESERVISION TAB AREDS	\$0 (Tier 3) DP
<i>prosight tab</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>qc therin-m tab</i>	\$0 (Tier 3) DP
<i>rena-vite tab</i>	\$0 (Tier 3) DP
<i>sentry tab</i>	\$0 (Tier 3) DP
<i>sentry tab senior</i>	\$0 (Tier 3) DP
<i>sm animal chw shapes</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-50</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-100</i>	\$0 (Tier 3) DP
<i>sm complete tab</i>	\$0 (Tier 3) DP
<i>sm complete tab adv form</i>	\$0 (Tier 3) DP
<i>sm complete tab senior</i>	\$0 (Tier 3) DP
<i>sm folic acid tab 400mcg</i>	\$0 (Tier 3) DP
<i>sm multiple tab vit/iron</i>	\$0 (Tier 3) DP
<i>sm multiple tab vitamins</i>	\$0 (Tier 3) DP
<i>sm opti-vita tab</i>	\$0 (Tier 3) DP
SM PRENATAL TAB VITAMINS	\$0 (Tier 3) DP
<i>sm vit b-6 tab 100mg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 100mcg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 500mcg</i>	\$0 (Tier 3) DP
<i>sm vit c/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c chw 500mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c tab 250mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 200unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 400unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 1000unit</i>	\$0 (Tier 3) DP
<i>stress form/ tab zinc</i>	\$0 (Tier 3) DP
<i>stress formu tab</i>	\$0 (Tier 3) DP
<i>stress formu tab w/iron</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
STUART ONE CAP	\$0 (Tier 3) DP
<i>super b comp tab vit c</i>	\$0 (Tier 3) DP
<i>super liq nu-thera</i>	\$0 (Tier 3) DP
SUPER POW NU-THERA	\$0 (Tier 3) DP
<i>super tab nu-thera</i>	\$0 (Tier 3) DP
<i>super vikaps tab</i>	\$0 (Tier 3) DP
<i>superplex-t tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab /iron</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab beta car</i>	\$0 (Tier 3) DP
THERA M PLUS TAB	\$0 (Tier 3) DP
<i>thera tab</i>	\$0 (Tier 3) DP
THERA TAB	\$0 (Tier 3) DP
<i>thera-m tab</i>	\$0 (Tier 3) DP
THERA-M TAB	\$0 (Tier 3) DP
<i>therapeutic- tab m</i>	\$0 (Tier 3) DP
<i>therems tab</i>	\$0 (Tier 3) DP
THEREMS-H TAB	\$0 (Tier 3) DP
THEREMS-M TAB	\$0 (Tier 3) DP
<i>thiamine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
<i>thiamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>thiamine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>total b/c tab</i>	\$0 (Tier 3) DP
UNICOMPLEX-M TAB	\$0 (Tier 3) DP
<i>vita-bee/c tab</i>	\$0 (Tier 3) DP
<i>vitamin a cap 3 mg (10000 unit)</i>	\$0 (Tier 3) DP
<i>vitamin a cap 8000unit</i>	\$0 (Tier 3) DP
<i>vitamin b12 tab 1000mcg</i>	\$0 (Tier 3) DP
<i>vitamin c tab 500mg</i>	\$0 (Tier 3) DP
<i>vitamin c tab 500mg tr</i>	\$0 (Tier 3) DP
<i>vitamin d3 dro 10mcg/ml</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 1000unit</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 50000unt</i>	\$0 (Tier 3) DP
<i>vitamin d tab 400unit</i>	\$0 (Tier 3) DP
<i>vitamin d tab 1000unit</i>	\$0 (Tier 3) DP
<i>vitamin d-3 tab 5000unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 100 unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 200 unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 400 unit</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>vitamin e cap 1000 unit</i>	\$0 (Tier 3) DP
<i>vite/iron chw children</i>	\$0 (Tier 3) DP
<i>womens one tab daily</i>	\$0 (Tier 3) DP
<i>zoo friends chw</i>	\$0 (Tier 3) DP
ZOO FRIENDS CHW COMPLETE	\$0 (Tier 3) DP
<i>zoo friends chw extra c</i>	\$0 (Tier 3) DP
<i>zoo friends chw gummies</i>	\$0 (Tier 3) DP

OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS

ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	\$0 (Tier 1)
BLEPHAMIDE OIN S.O.P.	\$0 (Tier 2)
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc ophth susp</i>	\$0 (Tier 1)
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	\$0 (Tier 1)
TOBRADEX OIN 0.3-0.1%	\$0 (Tier 2)
TOBRADEX ST SUS 0.3-0.05	\$0 (Tier 2)
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	\$0 (Tier 1)
ZYLET SUS 0.5-0.3%	\$0 (Tier 2)

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

<i>bacitracin ophth oint 500 unit/gm</i>	\$0 (Tier 1)
<i>bacitracin-polymyxin b ophth oint</i>	\$0 (Tier 1)
BESIVANCE SUS 0.6%	\$0 (Tier 2)
CILOXAN OIN 0.3% OP	\$0 (Tier 2)
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	\$0 (Tier 1)
<i>erythromycin ophth oint 5 mg/gm</i>	\$0 (Tier 1)
<i>gatifloxacin ophth soln 0.5%</i>	\$0 (Tier 1)
<i>gentak oin 0.3% op</i>	\$0 (Tier 1)
<i>gentamicin sulfate ophth soln 0.3%</i>	\$0 (Tier 1)
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	\$0 (Tier 1)
NATACYN SUS 5% OP	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0 (Tier 1)
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<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	\$0 (Tier 1)
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<i>ofloxacin ophth soln 0.3%</i>	\$0 (Tier 1)
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<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0 (Tier 1)
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<i>sulfacetamide sodium ophth oint 10%</i>	\$0 (Tier 1)
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<i>sulfacetamide sodium ophth soln 10%</i>	\$0 (Tier 1)
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<i>tobramycin ophth soln 0.3%</i>	\$0 (Tier 1)
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<i>trifluridine ophth soln 1%</i>	\$0 (Tier 1)
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<i>ZIRGAN GEL 0.15%</i>	\$0 (Tier 2)
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ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION

<i>ALREX SUS 0.2%</i>	\$0 (Tier 2)
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<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	\$0 (Tier 1)
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<i>BROMSITE DRO 0.075%</i>	\$0 (Tier 2)
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<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	\$0 (Tier 1)
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<i>diclofenac sodium ophth soln 0.1%</i>	\$0 (Tier 1)
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<i>DUREZOL EMU 0.05%</i>	\$0 (Tier 2)
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<i>FLAREX SUS 0.1% OP</i>	\$0 (Tier 2)
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<i>fluorometholone ophth susp 0.1%</i>	\$0 (Tier 1)
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<i>flurbiprofen sodium ophth soln 0.03%</i>	\$0 (Tier 1)
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<i>ILEVRO DRO 0.3% OP</i>	\$0 (Tier 2)
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<i>ketorolac tromethamine ophth soln 0.4%</i>	\$0 (Tier 1)
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<i>ketorolac tromethamine ophth soln 0.5%</i>	\$0 (Tier 1)
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<i>LOTEMAX OIN 0.5%</i>	\$0 (Tier 2)
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<i>PRED SOD PHO SOL 1% OP</i>	\$0 (Tier 2)
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<i>prednisolone acetate ophth susp 1%</i>	\$0 (Tier 1)
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<i>PROLENSA SOL 0.07%</i>	\$0 (Tier 2)
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ANTIALLERGICS - DRUGS TO TREAT ALLERGIES

<i>azelastine hcl ophth soln 0.05%</i>	\$0 (Tier 1)
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<i>bepotastine besilate ophth soln 1.5%</i>	\$0 (Tier 1)
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<i>BEPREVE DRO 1.5%</i>	\$0 (Tier 2)
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<i>cromolyn sodium ophth soln 4%</i>	\$0 (Tier 1)
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<i>eye allergy sol relief</i>	\$0 (Tier 3) DP
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<i>LASTACFT SOL 0.25%</i>	\$0 (Tier 2)
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<i>NAPHCON-A SOL OP</i>	\$0 (Tier 3) DP
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	\$0 (Tier 1)	
PAZEO DRO 0.7%	\$0 (Tier 2)	
ZERVIAE DRO 0.24%	\$0 (Tier 2)	
ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA		
ALPHAGAN P SOL 0.1%	\$0 (Tier 2)	
AZOPT SUS 1% OP	\$0 (Tier 2)	
<i>betaxolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)	
BETOPTIC-S SUS 0.25% OP	\$0 (Tier 2)	
<i>brimonidine tartrate ophth soln 0.2%</i>	\$0 (Tier 1)	
<i>brimonidine tartrate ophth soln 0.15%</i>	\$0 (Tier 1)	
<i>brinzolamide ophth susp 1%</i>	\$0 (Tier 1)	
<i>carteolol hcl ophth soln 1%</i>	\$0 (Tier 1)	
COMBIGAN SOL 0.2/0.5%	\$0 (Tier 2)	
<i>dorzolamide hcl ophth soln 2%</i>	\$0 (Tier 1)	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	\$0 (Tier 1)	
<i>latanoprost ophth soln 0.005%</i>	\$0 (Tier 1)	
<i>levobunolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)	
LUMIGAN SOL 0.01%	\$0 (Tier 2)	
<i>pilocarpine hcl ophth soln 1%</i>	\$0 (Tier 1)	
<i>pilocarpine hcl ophth soln 2%</i>	\$0 (Tier 1)	
<i>pilocarpine hcl ophth soln 4%</i>	\$0 (Tier 1)	
RHOPRESSA SOL 0.02%	\$0 (Tier 2)	
SIMBRINZA SUS 1-0.2%	\$0 (Tier 2)	
<i>timolol maleate ophth gel forming soln 0.5%</i>	\$0 (Tier 1)	
<i>timolol maleate ophth gel forming soln 0.25%</i>	\$0 (Tier 1)	
<i>timolol maleate ophth soln 0.5%</i>	\$0 (Tier 1)	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	\$0 (Tier 1)	
<i>timolol maleate ophth soln 0.25%</i>	\$0 (Tier 1)	
VYZULTA SOL 0.024%	\$0 (Tier 2)	
MISCELLANEOUS		
ATROPINE SUL SOL 1% OP	\$0 (Tier 2)	
CYSTADROPS SOL 0.37%	\$0 (Tier 2)	NDS, LA, PA
CYSTARAN SOL 0.44%	\$0 (Tier 2)	NDS, LA, PA
ISOPTO ATROP SOL 1% OP	\$0 (Tier 2)	
<i>proparacaine hcl ophth soln 0.5%</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
RESTASIS EMU 0.05%	\$0 (Tier 2)
RESTASIS MUL EMU 0.05%	\$0 (Tier 2)
XIIDRA DRO 5%	\$0 (Tier 2)

RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD

ANORO ELLIPT AER 62.5-25	\$0 (Tier 2) QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	\$0 (Tier 2) QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	\$0 (Tier 2) QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	\$0 (Tier 2) QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	\$0 (Tier 2) QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	\$0 (Tier 1) B/D
TRELEGY AER ELLIPTA	\$0 (Tier 2) QL (60 blisters / 30 days)

ANTICHOLINERGICS - DRUGS TO TREAT COPD

ATROVENT HFA AER 17MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
INCRUSE ELPT INH 62.5MCG	\$0 (Tier 2) QL (30 blisters / 30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	\$0 (Tier 1) B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	\$0 (Tier 1)
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	\$0 (Tier 1)

ANTI HISTAMINES - DRUGS TO TREAT ALLERGIES

<i>all day allg sol 1mg/ml</i>	\$0 (Tier 3) DP
<i>all day allg sol 5mg/5ml</i>	\$0 (Tier 3) DP
<i>all day allg tab 10mg</i>	\$0 (Tier 3) DP
<i>aller-chlor tab 4mg</i>	\$0 (Tier 3) DP
<i>aller-ease tab 60mg</i>	\$0 (Tier 3) DP
<i>aller-tec tab 10mg</i>	\$0 (Tier 3) DP
<i>allerclear tab 10mg</i>	\$0 (Tier 3) DP
<i>allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>allergy chld liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>allergy relf cap 25mg</i>	\$0 (Tier 3) DP
<i>allergy relf liq 12.5/5ml</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>allergy relf tab 10mg</i>	\$0 (Tier 3) DP
<i>allergy relf tab 25mg</i>	\$0 (Tier 3) DP
<i>allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>allergy tab 10mg</i>	\$0 (Tier 3) DP
<i>allergy-time tab 4mg</i>	\$0 (Tier 3) DP
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	\$0 (Tier 1)
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	\$0 (Tier 1)
<i>banophen cap 25mg</i>	\$0 (Tier 3) DP
<i>banophen cap 50mg</i>	\$0 (Tier 3) DP
<i>banophen tab 25mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl chew tab 5 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl chew tab 10 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	\$0 (Tier 1)
<i>cetirizine hcl tab 5 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl tab 10 mg</i>	\$0 (Tier 3) DP
<i>cetirizine sol 1mg/ml</i>	\$0 (Tier 3) DP
<i>cetirizine sol 5mg/5ml</i>	\$0 (Tier 3) DP
<i>chld allergy liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>chlor-phenir tab 4mg</i>	\$0 (Tier 3) DP
<i>comp allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>cyproheptadine hcl tab 4 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dayhist alrg tab 12 hour</i>	\$0 (Tier 3) DP
<i>diphenhist cap 25mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl cap 25 mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl cap 50 mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl inj 50 mg/ml</i>	\$0 (Tier 1)
<i>diphenhydramine hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>ed chlorped syp jr</i>	\$0 (Tier 3) DP
<i>fexofenadine hcl tab 60 mg</i>	\$0 (Tier 3) DP
<i>fexofenadine hcl tab 180 mg</i>	\$0 (Tier 3) DP
<i>fexofenadine tab 180mg</i>	\$0 (Tier 3) DP
<i>gnp all day tab allergy</i>	\$0 (Tier 3) DP
<i>gnp allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>gnp allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>gnp allergy tab 25mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>gnp dayhist tab 1.34mg</i>	\$0 (Tier 3) DP
<i>hm allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>hm allergy tab 25mg</i>	\$0 (Tier 3) DP
<i>hydroxyzine hcl im soln 25 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 10 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	\$0 (Tier 1)
<i>levocetirizine dihydrochloride tab 5 mg</i>	\$0 (Tier 1)
<i>loratadine sol 5mg/5ml</i>	\$0 (Tier 3) DP
<i>loratadine syp 5mg/5ml</i>	\$0 (Tier 3) DP
<i>loratadine tab 10 mg</i>	\$0 (Tier 3) DP
<i>loratadine tab 10mg</i>	\$0 (Tier 3) DP
<i>medi-phedryl cap 25mg</i>	\$0 (Tier 3) DP
<i>pharbechlor tab 4mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 25mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 50mg</i>	\$0 (Tier 3) DP
<i>qc allergy tab 10mg</i>	\$0 (Tier 3) DP
<i>siladryl alr liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>sm all day tab allergy</i>	\$0 (Tier 3) DP
<i>sm allergy tab 4mg</i>	\$0 (Tier 3) DP

BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days); (generic of Ventolin HFA)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	\$0 (Tier 1)
<i>albuterol sulfate tab 2 mg</i>	\$0 (Tier 1)
<i>albuterol sulfate tab 4 mg</i>	\$0 (Tier 1)
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days)
SEREVENT DIS AER 50MCG	\$0 (Tier 2) QL (60 inhalations / 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	\$0 (Tier 1)
<i>terbutaline sulfate tab 5 mg</i>	\$0 (Tier 1)
VENTOLIN HFA AER	\$0 (Tier 2) QL (2 inhalers / 30 days)
VENTOLIN HFA AER	\$0 (Tier 2) QL (6 inhalers / 30 days)

COUGH AND COLD

<i>aller/conges tab 10-240mg</i>	\$0 (Tier 3) DP
<i>allergy d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allergy rel/ tab deconges</i>	\$0 (Tier 3) DP
<i>allergy relf tab /nsl dec</i>	\$0 (Tier 3) DP
<i>allergy relf tab d-24</i>	\$0 (Tier 3) DP
<i>allergy-d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allergy/cong tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allgy comp-d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>ambi 10peh/ tab 400gfn</i>	\$0 (Tier 3) DP
<i>ambi 40pse/ tab 400gfn</i>	\$0 (Tier 3) DP
<i>benzonatate cap 100 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>benzonatate cap 200 mg</i>	\$0 (Tier 3) DP
<i>bromfed dm syp</i>	\$0 (Tier 3) DP
CAPCOF SYP 5-2-10MG	\$0 (Tier 3) DP
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	\$0 (Tier 3) DP
<i>child silfed liq 15mg/5ml</i>	\$0 (Tier 3) DP
<i>cold/allergy elx children</i>	\$0 (Tier 3) DP
<i>cough cont liq dm max</i>	\$0 (Tier 3) DP
<i>cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>cvs cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>decongestant tab 120mg er</i>	\$0 (Tier 3) DP
<i>dextromethorphan polistirex extended release susp 30 mg/5ml</i>	\$0 (Tier 3) DP
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	\$0 (Tier 3) DP
<i>diabetic tus liq 100/5ml</i>	\$0 (Tier 3) DP
<i>diabetic tus liq dm</i>	\$0 (Tier 3) DP
<i>diabetic tus liq max st</i>	\$0 (Tier 3) DP
<i>eq cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp suphedrn liq 15mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp tussin liq dm</i>	\$0 (Tier 3) DP
<i>gnp tussin liq dm cough</i>	\$0 (Tier 3) DP
<i>gnp tussin liq dm max</i>	\$0 (Tier 3) DP
<i>gnp tussin syp cf</i>	\$0 (Tier 3) DP
<i>guaiatuss ac syp 100-10/5</i>	\$0 (Tier 3) DP
<i>guaifenesin liquid 100 mg/5ml</i>	\$0 (Tier 3) DP
<i>guaifenesin syp 100-10/5</i>	\$0 (Tier 3) DP
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>hm cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>hm tussin liq adlt dm</i>	\$0 (Tier 3) DP
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	\$0 (Tier 3) DP
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	\$0 (Tier 3) DP
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	\$0 (Tier 3) DP
<i>hydromet syp 5-1.5/5</i>	\$0 (Tier 3) DP
LOHIST-DM SYP 5-2-10MG	\$0 (Tier 3) DP
<i>lorata-dine tab d 24hr</i>	\$0 (Tier 3) DP
<i>loratadine-d tab 10-240mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LORTUSS EX LIQ	\$0 (Tier 3) DP
M-CLEAR WC LIQ 100-6.3	\$0 (Tier 3) DP
<i>medi-tussin syp dm</i>	\$0 (Tier 3) DP
<i>mucus relief liq 100/5ml</i>	\$0 (Tier 3) DP
<i>mucus relief liq 400/20ml</i>	\$0 (Tier 3) DP
<i>nasal decong tab 10mg</i>	\$0 (Tier 3) DP
<i>nasal decong tab 30mg</i>	\$0 (Tier 3) DP
<i>nasal decong tab 120mg er</i>	\$0 (Tier 3) DP
NINJACOF-XG LIQ 200-8/5	\$0 (Tier 3) DP
<i>10peh/400gfn tab /20dm</i>	\$0 (Tier 3) DP
POLY-TUSSIN LIQ 10-4-10	\$0 (Tier 3) DP
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoephedr tab 120mg er</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 30 mg</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 60 mg</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>	\$0 (Tier 3) DP
<i>qc suphedrin tab 120mg sr</i>	\$0 (Tier 3) DP
<i>ra cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
REFENESEN TAB CHST CNG	\$0 (Tier 3) DP
<i>rynex pse liq</i>	\$0 (Tier 3) DP
<i>siltuss das liq 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin dm liq das</i>	\$0 (Tier 3) DP
<i>siltussin sa syp 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin-dm syp alc free</i>	\$0 (Tier 3) DP
<i>sm nasal dec tab 30mg</i>	\$0 (Tier 3) DP
<i>sm tussin cf liq</i>	\$0 (Tier 3) DP
<i>sm tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP
<i>sm tussin syp dm</i>	\$0 (Tier 3) DP
<i>sudogest pe tab 10mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 30mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 60mg</i>	\$0 (Tier 3) DP
<i>suphedrine tab 120mg er</i>	\$0 (Tier 3) DP
<i>trymine cg liq 225-7.5</i>	\$0 (Tier 3) DP
TUSNEL C SYP	\$0 (Tier 3) DP
<i>tusnel diabt liq 10-100/5</i>	\$0 (Tier 3) DP
TUSSICAPS CAP 10-8MG	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>tussin adult liq 100/5ml</i>	\$0 (Tier 3) DP
<i>tussin adult liq cgh/cong</i>	\$0 (Tier 3) DP
<i>tussin adult liq cold</i>	\$0 (Tier 3) DP
<i>tussin cf liq</i>	\$0 (Tier 3) DP
<i>tussin cf liq cgh/cold</i>	\$0 (Tier 3) DP
<i>tussin chest syp 100/5ml</i>	\$0 (Tier 3) DP
<i>tussin dm liq</i>	\$0 (Tier 3) DP
<i>tussin dm liq 100-10/5</i>	\$0 (Tier 3) DP
<i>tussin dm liq max</i>	\$0 (Tier 3) DP
<i>tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP

LEUKOTRIENE MODULATORS

<i>montelukast sodium chew tab 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>zafirlukast tab 10 mg</i>	\$0 (Tier 1)
<i>zafirlukast tab 20 mg</i>	\$0 (Tier 1)

MISCELLANEOUS

<i>acetylcysteine inhal soln 10%</i>	\$0 (Tier 1) B/D
<i>acetylcysteine inhal soln 20%</i>	\$0 (Tier 1) B/D
ARALAST NP INJ 500MG	\$0 (Tier 2) NDS, LA, PA
ARALAST NP INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
AYR SALINE KIT NETI RNS	\$0 (Tier 3) DP
AYR SALINE KIT RINSE	\$0 (Tier 3) DP
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	\$0 (Tier 3) DP
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	\$0 (Tier 1) B/D
DALIRESP TAB 250MCG	\$0 (Tier 2)
DALIRESP TAB 500MCG	\$0 (Tier 2)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	\$0 (Tier 1) (generic of EpiPen)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
ESBRIET CAP 267MG	\$0 (Tier 2) NDS, QL (270 caps / 30 days), PA
ESBRIET TAB 267MG	\$0 (Tier 2) NDS, QL (270 tabs / 30 days), PA
ESBRIET TAB 801MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
FASENRA INJ 30MG/ML	\$0 (Tier 2) NDS, LA, PA
FASENRA PEN INJ 30MG/ML	\$0 (Tier 2) NDS, LA, PA
KALYDECO PAK 25MG	\$0 (Tier 2) NDS, QL (56 packs / 28 days), PA
KALYDECO PAK 50MG	\$0 (Tier 2) NDS, QL (56 packs / 28 days), PA
KALYDECO PAK 75MG	\$0 (Tier 2) NDS, QL (56 packs / 28 days), PA
KALYDECO TAB 150MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
OFEV CAP 100MG	\$0 (Tier 2) NDS, QL (60 caps / 30 days), PA
OFEV CAP 150MG	\$0 (Tier 2) NDS, QL (60 caps / 30 days), PA
ORKAMBI GRA 100-125	\$0 (Tier 2) NDS, QL (56 packs / 28 days), PA
ORKAMBI GRA 150-188	\$0 (Tier 2) NDS, QL (56 packs / 28 days), PA
ORKAMBI TAB 100-125	\$0 (Tier 2) NDS, QL (112 tabs / 28 days), PA
ORKAMBI TAB 200-125	\$0 (Tier 2) NDS, QL (112 tabs / 28 days), PA
PROLASTIN-C INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
PULMOZYME SOL 1MG/ML	\$0 (Tier 2) NDS, PA
SYMDEKO TAB 50-75MG	\$0 (Tier 2) NDS, QL (56 tabs / 28 days), LA, PA
SYMDEKO TAB 100-150	\$0 (Tier 2) NDS, QL (56 tabs / 28 days), LA, PA
SYMJEPI INJ 0.3MG	\$0 (Tier 2)
SYMJEPI INJ 0.15MG	\$0 (Tier 2)
THEO-24 CAP 100MG CR	\$0 (Tier 2)
THEO-24 CAP 200MG CR	\$0 (Tier 2)
THEO-24 CAP 300MG CR	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
THEO-24 CAP 400MG ER	\$0 (Tier 2)
<i>theophylline soln 80 mg/15ml</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 300 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 450 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 400 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 600 mg</i>	\$0 (Tier 1)
TRIKAFTA TAB	\$0 (Tier 2) NDS, QL (84 tabs / 28 days), LA, PA
XOLAIR INJ 75/0.5	\$0 (Tier 2) NDS, LA, PA
XOLAIR INJ 150MG/ML	\$0 (Tier 2) NDS, LA, PA
XOLAIR SOL 150MG	\$0 (Tier 2) NDS, LA, PA
ZEMAIRA INJ 1000MG	\$0 (Tier 2) NDS, LA, PA

NASAL STEROIDS - DRUGS TO TREAT ALLERGIES

<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	\$0 (Tier 1) QL (3 bottles / 30 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	\$0 (Tier 1) QL (1 bottle / 30 days)

STERIOD INHALANTS - DRUGS TO TREAT ASTHMA

ARNUITY ELPT INH 50MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
ARNUITY ELPT INH 100MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
ARNUITY ELPT INH 200MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	\$0 (Tier 1) B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	\$0 (Tier 1) B/D
FLOVENT DISK AER 50MCG	\$0 (Tier 2) QL (180 inhalations / 30 days)
FLOVENT DISK AER 100MCG	\$0 (Tier 2) QL (240 inhalations / 30 days)
FLOVENT DISK AER 250MCG	\$0 (Tier 2) QL (240 inhalations / 30 days)
FLOVENT HFA AER 44MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 110MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 220MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
PULMICORT INH 90MCG	\$0 (Tier 2) QL (3 inhalers / 30 days)
PULMICORT INH 180MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT
ASTHMA AND COPD**

ADVAIR DISKU AER 100/50	\$0 (Tier 2) QL (60 inhalations / 30 days)
ADVAIR DISKU AER 250/50	\$0 (Tier 2) QL (60 inhalations / 30 days)
ADVAIR DISKU AER 500/50	\$0 (Tier 2) QL (60 inhalations / 30 days)
ADVAIR HFA AER 45/21	\$0 (Tier 2) QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	\$0 (Tier 2) QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	\$0 (Tier 2) QL (1 inhaler / 30 days)
BREO ELLIPTA INH 100-25	\$0 (Tier 2) QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	\$0 (Tier 2) QL (60 blisters / 30 days)
SYMBICORT AER 80-4.5	\$0 (Tier 2) QL (1 inhaler / 30 days)
SYMBICORT AER 160-4.5	\$0 (Tier 2) QL (1 inhaler / 30 days)

**TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS
DERMATOLOGY, ACNE**

<i>accutane cap 20mg</i>	\$0 (Tier 1) PA
<i>accutane cap 30mg</i>	\$0 (Tier 1) PA
<i>accutane cap 40mg</i>	\$0 (Tier 1) PA
<i>amnesteem cap 10mg</i>	\$0 (Tier 1) PA
<i>amnesteem cap 20mg</i>	\$0 (Tier 1) PA
<i>amnesteem cap 40mg</i>	\$0 (Tier 1) PA
<i>avita cre 0.025%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>avita gel 0.025%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	\$0 (Tier 1)
<i>claravis cap 10mg</i>	\$0 (Tier 1) PA
<i>claravis cap 20mg</i>	\$0 (Tier 1) PA
<i>claravis cap 30mg</i>	\$0 (Tier 1) PA
<i>claravis cap 40mg</i>	\$0 (Tier 1) PA
<i>clindamycin phosphate gel 1%</i>	\$0 (Tier 1) QL (75 gm / 30 days)
<i>clindamycin phosphate lotion 1%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>clindamycin phosphate soln 1%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>ery pad 2%</i>	\$0 (Tier 1)
<i>erythromycin soln 2%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>isotretinoin cap 10 mg</i>	\$0 (Tier 1) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>isotretinoin cap 20 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 30 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 40 mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 10mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 20mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 30mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 40mg</i>	\$0 (Tier 1) PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	\$0 (Tier 1)
<i>tretinoin cream 0.1%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>tretinoin cream 0.05%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>tretinoin cream 0.025%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>tretinoin gel 0.01%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>tretinoin gel 0.025%</i>	\$0 (Tier 1) QL (45 gm / 30 days), PA
<i>zenatane cap 10mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 20mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 30mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 40mg</i>	\$0 (Tier 1) PA

DERMATOLOGY, ANTIBIOTICS

<i>bacitr zinc oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>bacitracin zinc oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>gentamicin sulfate cream 0.1%</i>	\$0 (Tier 1) QL (30 gm / 30 days)
<i>gentamicin sulfate oint 0.1%</i>	\$0 (Tier 1)
<i>hm triple oin antibiot</i>	\$0 (Tier 3) DP
<i>mupirocin oint 2%</i>	\$0 (Tier 1) QL (220 gm / 30 days)
<i>sb triple oin antibiot</i>	\$0 (Tier 3) DP
<i>silver sulfadiazine cream 1%</i>	\$0 (Tier 1)
<i>sm antibioti oin 500/gm</i>	\$0 (Tier 3) DP
<i>sm triple oin antibiot</i>	\$0 (Tier 3) DP
<i>ssd cre 1%</i>	\$0 (Tier 1)
SULFAMYLON CRE 85MG/GM	\$0 (Tier 2)
<i>tri-biozene oin</i>	\$0 (Tier 3) DP
<i>triple antib oin</i>	\$0 (Tier 3) DP
<i>triple antib oin max st</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>triple antib oin plus</i>	\$0 (Tier 3) DP
DERMATOLOGY, ANTIFUNGALS	
<i>anti-fungal cre 1%</i>	\$0 (Tier 3) DP
<i>anti-fungal pow 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 2%</i>	\$0 (Tier 3) DP
<i>athlete foot cre 1%</i>	\$0 (Tier 3) DP
<i>baza antifun cre 2%</i>	\$0 (Tier 3) DP
BENZOIN TIN	\$0 (Tier 3) DP
<i>castellani paint</i>	\$0 (Tier 3) DP
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	\$0 (Tier 1) QL (90 gm / 30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>clotrimazole cre 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole cream 1%</i>	\$0 (Tier 1) QL (45 gm / 30 days)
<i>clotrimazole cream 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole soln 1%</i>	\$0 (Tier 1) QL (30 mL / 30 days)
<i>clotrimazole soln 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0 (Tier 1) QL (45 gm / 30 days)
<i>fungoid-d cre 1%</i>	\$0 (Tier 3) DP
<i>jock itch aer 1%</i>	\$0 (Tier 3) DP
<i>ketoconazole cream 2%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>miconazole nitrate cream 2%</i>	\$0 (Tier 3) DP
<i>nyamyc pow 100000</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>nystatin cream 100000 unit/gm</i>	\$0 (Tier 1) QL (30 gm / 30 days)
<i>nystatin oint 100000 unit/gm</i>	\$0 (Tier 1) QL (30 gm / 30 days)
<i>nystatin topical powder 100000 unit/gm</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>nystop pow 100000</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>podactin pow 1%</i>	\$0 (Tier 3) DP
<i>sm antifungl cre 1%</i>	\$0 (Tier 3) DP
<i>sm antifungl cre 2%</i>	\$0 (Tier 3) DP
<i>soothe&cool cre inzo 2%</i>	\$0 (Tier 3) DP
<i>terbinafine cre 1%</i>	\$0 (Tier 3) DP
<i>terbinafine hcl cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cre 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate powder 1%</i>	\$0 (Tier 3) DP

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)*****DERMATOLOGY, ANTIPSORIATICS***

<i>acitretin cap 10 mg</i>	\$0 (Tier 1) PA
<i>acitretin cap 17.5 mg</i>	\$0 (Tier 1) PA
<i>acitretin cap 25 mg</i>	\$0 (Tier 1) PA
<i>calcipotriene cream 0.005%</i>	\$0 (Tier 1) QL (120 gm / 30 days), PA
<i>calcipotriene oint 0.005%</i>	\$0 (Tier 1) QL (120 gm / 30 days), PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	\$0 (Tier 1) QL (120 mL / 30 days), PA
<i>calcitrene oin 0.005%</i>	\$0 (Tier 1) QL (120 gm / 30 days), PA
<i>tazarotene cream 0.1%</i>	\$0 (Tier 1) QL (60 gm / 30 days), PA
TAZORAC CRE 0.05%	\$0 (Tier 2) QL (60 gm / 30 days), PA

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole shampoo 2%</i>	\$0 (Tier 1) QL (120 mL / 30 days)
<i>selenium sulfide lotion 2.5%</i>	\$0 (Tier 1)

DERMATOLOGY, CORTICOSTEROIDS

<i>ala-cort cre 1%</i>	\$0 (Tier 1)
<i>ala-cort cre 2.5%</i>	\$0 (Tier 1)
<i>alclometasone dipropionate cream 0.05%</i>	\$0 (Tier 1)
<i>alclometasone dipropionate oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented cream 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented gel 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate cream 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate lotion 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	\$0 (Tier 1)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	\$0 (Tier 1)
<i>clobetasol e cre 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>clobetasol propionate cream 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>clobetasol propionate gel 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>clobetasol propionate oint 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>clobetasol propionate soln 0.05%</i>	\$0 (Tier 1) QL (50 mL / 30 days)
ENSTILAR AER	\$0 (Tier 2) QL (120 gm / 30 days), PA
<i>fluocinolone acetonide cream 0.01%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide cream 0.025%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oint 0.025%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide soln 0.01%</i>	\$0 (Tier 1) QL (90 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	\$0 (Tier 1) QL (120 gm / 30 days)
<i>fluocinonide emulsified base cream 0.05%</i>	\$0 (Tier 1) QL (120 gm / 30 days)
<i>fluocinonide gel 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>fluocinonide oint 0.05%</i>	\$0 (Tier 1) QL (60 gm / 30 days)
<i>fluocinonide soln 0.05%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	\$0 (Tier 1)
<i>fluticasone propionate oint 0.005%</i>	\$0 (Tier 1)
<i>halobetasol propionate cream 0.05%</i>	\$0 (Tier 1) QL (50 gm / 30 days)
<i>halobetasol propionate oint 0.05%</i>	\$0 (Tier 1) QL (50 gm / 30 days)
<i>hydrocortisone cream 1%</i>	\$0 (Tier 1)
<i>hydrocortisone cream 2.5%</i>	\$0 (Tier 1)
<i>hydrocortisone lotion 2.5%</i>	\$0 (Tier 1)
<i>hydrocortisone oint 2.5%</i>	\$0 (Tier 1)
<i>mometasone furoate cream 0.1%</i>	\$0 (Tier 1)
<i>mometasone furoate oint 0.1%</i>	\$0 (Tier 1)
<i>mometasone furoate solution 0.1% (lotion)</i>	\$0 (Tier 1)
<i>triamcinolone acetonide cream 0.1%</i>	\$0 (Tier 1) QL (454 gm / 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide cream 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.025%</i>	\$0 (Tier 1)
<i>triderm cre 0.5%</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****DERMATOLOGY, LOCAL ANESTHETICS**

<i>glydo gel 2%</i>	\$0 (Tier 1) QL (60 mL / 30 days), PA
<i>lidocaine hcl soln 4%</i>	\$0 (Tier 1) QL (50 mL / 30 days), PA
<i>lidocaine hcl urethral/mucosal gel 2%</i>	\$0 (Tier 1) QL (30 mL / 30 days), PA
<i>lidocaine oint 5%</i>	\$0 (Tier 1) QL (50 gm / 30 days), PA
<i>lidocaine patch 5%</i>	\$0 (Tier 1) QL (3 patches / 1 day), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	\$0 (Tier 1) QL (30 gm / 30 days), PA

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

BORIC ACID GRA	\$0 (Tier 3) DP
CALAMINE LOT	\$0 (Tier 3) DP
CALAMINE LOT 8-8%	\$0 (Tier 3) DP
CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
CALAMINE POW	\$0 (Tier 3) DP
CAMPBOR CRY	\$0 (Tier 3) DP
<i>capsaicin cre 0.1%</i>	\$0 (Tier 3) DP
<i>capsaicin cream 0.025%</i>	\$0 (Tier 3) DP
CAPSAICIN LIQ 0.15%	\$0 (Tier 3) DP
CLORPACTIN POW WCS-90	\$0 (Tier 3) DP
<i>diclofenac sodium gel 1%</i>	\$0 (Tier 1) QL (1000 gm / 30 days), PA
<i>fluorouracil cream 5%</i>	\$0 (Tier 1) QL (40 gm / 30 days)
<i>fluorouracil soln 2%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
<i>fluorouracil soln 5%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
FORMALDEHYDE SOL 37%	\$0 (Tier 3) DP
FREE & CLEAR SHA	\$0 (Tier 3) DP
GLYCOLIC ACD SOL 70%	\$0 (Tier 3) DP
<i>hydrocortisone perianal cream 2.5%</i>	\$0 (Tier 1)
<i>imiquimod cream 5%</i>	\$0 (Tier 1) QL (24 packets / 30 days)
JESSNERS SOL	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>metronidazole cream 0.75%</i>	\$0 (Tier 1)
<i>metronidazole gel 0.75%</i>	\$0 (Tier 1)
<i>metronidazole lotion 0.75%</i>	\$0 (Tier 1)
NEW SKIN AER	\$0 (Tier 3) DP
PENTRAVAN CRE	\$0 (Tier 3) DP
PENTRAVAN CRE PLUS	\$0 (Tier 3) DP
PICATO GEL 0.05%	\$0 (Tier 2) QL (2 tubes / 30 days)
PICATO GEL 0.015%	\$0 (Tier 2) QL (3 tubes / 30 days)
<i>podofilox soln 0.5%</i>	\$0 (Tier 1)
<i>procto-med cre hc 2.5%</i>	\$0 (Tier 1)
<i>procto-pak cre 1%</i>	\$0 (Tier 1)
<i>proctosol hc cre 2.5%</i>	\$0 (Tier 1)
<i>proctozone cre -hc 2.5%</i>	\$0 (Tier 1)
PX CALAMINE LOT	\$0 (Tier 3) DP
RA CALAMINE LOT	\$0 (Tier 3) DP
RECTIV OIN 0.4%	\$0 (Tier 2) QL (30 gm / 30 days)
<i>rosadan cre 0.75%</i>	\$0 (Tier 1)
SM CALAMINE LOT	\$0 (Tier 3) DP
SM CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
<i>tacrolimus oint 0.1%</i>	\$0 (Tier 1) QL (100 gm / 30 days)
<i>tacrolimus oint 0.03%</i>	\$0 (Tier 1) QL (100 gm / 30 days)
TANNIC ACID POW	\$0 (Tier 3) DP
TARGETIN GEL 1%	\$0 (Tier 2) NDS, QL (60 gm / 30 days), PA
VALCHLOR GEL 0.016%	\$0 (Tier 2) NDS, QL (60 gm / 30 days), LA, PA
<i>zostrix hp cre 0.1%</i>	\$0 (Tier 3) DP
ZOSTRIX NAT CRE 0.033%	\$0 (Tier 3) DP
DERMATOLOGY, SCABICIDES AND PEDICULIDES	
<i>gnp lice kit</i>	\$0 (Tier 3) DP
<i>lice killing sha</i>	\$0 (Tier 3) DP
<i>lice killing sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>lice treatmt lot 1%</i>	\$0 (Tier 3) DP
<i>lice treatmt sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>lice trtmnt liq</i>	\$0 (Tier 3) DP
<i>lice trtmnt liq 1%</i>	\$0 (Tier 3) DP
<i>licide sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>malathion lotion 0.5%</i>	\$0 (Tier 1)
<i>permethrin cream 5%</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>rid lice kil sha 0.33-4%</i>	\$0 (Tier 3) DP
DERMATOLOGY, WOUND CARE AGENTS	
REGRANEX GEL 0.01%	\$0 (Tier 2) NDS, QL (30 gm / 30 days), PA
SANTYL OIN 250/GM	\$0 (Tier 2)
<i>sodium chloride irrigation soln 0.9%</i>	\$0 (Tier 1)
<i>water for irrigation, sterile irrigation soln</i>	\$0 (Tier 1)
MOUTH/THROAT/DENTAL AGENTS	
<i>cevimeline hcl cap 30 mg</i>	\$0 (Tier 1)
<i>chlorhexidine gluconate soln 0.12%</i>	\$0 (Tier 1)
<i>clotrimazole troche 10 mg</i>	\$0 (Tier 1) QL (150 lozenges / 30 days)
<i>lidocaine hcl viscous soln 2%</i>	\$0 (Tier 1)
<i>nystatin susp 100000 unit/ml</i>	\$0 (Tier 1)
ORASEP SPR	\$0 (Tier 3) DP
<i>paroex sol 0.12%</i>	\$0 (Tier 1)
<i>periogard sol 0.12%</i>	\$0 (Tier 1)
<i>periomed con 0.63%</i>	\$0 (Tier 3) DP
<i>pilocarpine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>pilocarpine hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>triamcinolone acetonide dental paste 0.1%</i>	\$0 (Tier 1)
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR	
<i>acetic acid otic soln 2%</i>	\$0 (Tier 1)
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	\$0 (Tier 1)
<i>flac oil 0.01%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide (otic) oil 0.01%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic soln 1%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	\$0 (Tier 1)
<i>ofloxacin otic soln 0.3%</i>	\$0 (Tier 1)

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1		<i>acetaminophen w/ codeine tab 300-60</i>	
<i>10peh/400gfn tab /20dm</i>	143	<i>mg</i>	5
3		<i>acetazolamide cap er 12hr 500 mg</i>	45
<i>3 day vaginl cre 2%</i>	105	<i>acetazolamide tab 125 mg</i>	45
8		<i>acetazolamide tab 250 mg</i>	45
<i>8 hour pain tab 650mg</i>	1	<i>acetic acid irrigation soln 0.25%</i>	104
<i>8hr pain rel tab 650mg</i>	1	<i>acetic acid otic soln 2%</i>	154
A		ACETIC ACID SOL 3%	115
<i>abacavir sulfate-lamivudine tab 600-</i>		ACETIC ACID SOL GLACIAL	115
<i>300 mg</i>	14	<i>acetylcysteine inhal soln 10%</i>	144
<i>abacavir sulfate-lamivudine-zidovudine</i>		<i>acetylcysteine inhal soln 20%</i>	144
<i>tab 300-150-300 mg</i>	14	ACETYL-L-CAR POW HCL	115
<i>abacavir sulfate soln 20 mg/ml (base</i>		<i>acitretin cap 10 mg</i>	150
<i>equiv)</i>	12	<i>acitretin cap 17.5 mg</i>	150
<i>abacavir sulfate tab 300 mg (base</i>		<i>acitretin cap 25 mg</i>	150
<i>equiv)</i>	12	ACTHIB INJ	114
ABELCET INJ 5MG/ML	10	ACTIMMUNE INJ 2MU/0.5	113
ABILIFY MAIN INJ 300MG	64	<i>acyclovir cap 200 mg</i>	15
ABILIFY MAIN INJ 400MG	64	<i>acyclovir sodium iv soln 50 mg/ml</i>	15
<i>abiraterone acetate tab 250 mg</i>	23	<i>acyclovir susp 200 mg/5ml</i>	15
<i>abiraterone acetate tab 500 mg</i>	24	<i>acyclovir tab 400 mg</i>	15
ABRAXANE INJ 100MG	25	<i>acyclovir tab 800 mg</i>	15
ACACIA POW	115	ADACEL INJ	114
<i>acamprosate calcium tab delayed</i>		<i>adefovir dipivoxil tab 10 mg</i>	15
<i>release 333 mg</i>	76	ADEMPAS TAB 0.5MG	49
<i>acarbose tab 100 mg</i>	79	ADEMPAS TAB 1.5MG	49
<i>acarbose tab 25 mg</i>	79	ADEMPAS TAB 1MG	49
<i>acarbose tab 50 mg</i>	79	ADEMPAS TAB 2.5MG	49
<i>accutane cap 20mg</i>	147	ADEMPAS TAB 2MG	49
<i>accutane cap 30mg</i>	147	ADRENALIN INJ 1MG/ML	46
<i>accutane cap 40mg</i>	147	<i>adriamycin inj 20mg</i>	22
<i>acebutolol hcl cap 200 mg</i>	42	ADULT 50+ CAP OCUVITE	128
<i>acebutolol hcl cap 400 mg</i>	42	ADVAIR DISKU AER 100/50	147
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<i>acetaminophen suppos 650 mg</i>	1	ADVAIR HFA AER 115/21	147
<i>acetaminophen susp 160 mg/5ml</i>	1	ADVAIR HFA AER 230/21	147
<i>acetaminophen tab 325 mg</i>	1	ADVAIR HFA AER 45/21	147
<i>acetaminophen tab er 650 mg</i>	1	<i>advanced sus antacid</i>	97
<i>acetaminophen w/ codeine soln 120-12</i>		AFINITOR DIS TAB 2MG	26
<i>mg/5ml</i>	5	AFINITOR DIS TAB 3MG	26
<i>acetaminophen w/ codeine tab 300-15</i>		AFINITOR DIS TAB 5MG	26
<i>mg</i>	5	AFINITOR TAB 10MG	26
<i>acetaminophen w/ codeine tab 300-30</i>		<i>afirmelle tab 0.1-0.02</i>	83
<i>mg</i>	5	AIMOVIG INJ 140MG/ML	73
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<i>ala-cort cre 1%</i>	150	<i>allergy rel/ tab deconges</i>	141
<i>ala-cort cre 2.5%</i>	150	<i>allergy relf cap 25mg</i>	138
<i>albendazole tab 200 mg</i>	7	<i>allergy relf liq 12.5/5ml</i>	138
<i>albuterol sulfate inhal aero 108</i>		<i>allergy relf tab /nsl dec</i>	141
<i>mcg/act (90mcg base equiv)</i>	140	<i>allergy relf tab 10mg</i>	139
<i>albuterol sulfate soln nebu 0.083%</i>		<i>allergy relf tab 25mg</i>	139
<i>(2.5 mg/3ml)</i>	141	<i>allergy relf tab d-24</i>	141
<i>albuterol sulfate soln nebu 0.5% (5</i>		<i>allergy tab 10mg</i>	139
<i>mg/ml)</i>	141	<i>allergy tab 4mg</i>	139
<i>albuterol sulfate soln nebu 0.63</i>		<i>allergy-time tab 4mg</i>	139
<i>mg/3ml (base equiv)</i>	141	<i>aller-tec tab 10mg</i>	138
<i>albuterol sulfate soln nebu 1.25</i>		<i>allgy comp-d tab 5-120mg</i>	141
<i>mg/3ml (base equiv)</i>	141	<i>allopurinol tab 100 mg</i>	1
<i>albuterol sulfate syrup 2 mg/5ml</i>	141	<i>allopurinol tab 300 mg</i>	1
<i>albuterol sulfate tab 2 mg</i>	141	<i>almacone dbl sus strength</i>	97
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<i>ALECENSA CAP 150MG</i>	26	<i>alprazolam tab 0.25 mg</i>	49
<i>alendronate sodium oral soln 70</i>		<i>alprazolam tab 0.5 mg</i>	49
<i>mg/75ml</i>	82	<i>alprazolam tab 1 mg</i>	49
<i>alendronate sodium tab 10 mg</i>	82	<i>alprazolam tab 2 mg</i>	49
<i>alendronate sodium tab 35 mg</i>	82	<i>ALREX SUS 0.2%</i>	136
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<i>alfuzosin hcl tab er 24hr 10 mg</i>	104	<i>ALUM AMMONIU POW</i>	115
<i>ALIMTA INJ 100MG</i>	23	<i>ALUM HYDROX SUS 320/5ML</i>	97
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<i>aliskiren fumarate tab 150 mg (base</i>		<i>ALUNBRIG TAB 30MG</i>	26
<i>equivalent)</i>	47	<i>ALUNBRIG TAB 90MG</i>	26
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<i>aller-chlor tab 4mg</i>	138	<i>amantadine hcl tab 100 mg</i>	62
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<i>aller-ease tab 60mg</i>	138	<i>ambi 40pse/ tab 400gfn</i>	141
<i>allergy/cong tab 5-120mg</i>	141	<i>AMBISOME INJ 50MG</i>	10
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<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	7
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<i>amiloride hcl tab 5 mg</i>	46
<i>AMINOSYN-PF INJ 7%</i>	123
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	39
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	39
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	39
<i>amiodarone hcl tab 100 mg</i>	39
<i>amiodarone hcl tab 200 mg</i>	39
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<i>amitriptyline hcl tab 10 mg</i>	58
<i>amitriptyline hcl tab 150 mg</i>	58
<i>amitriptyline hcl tab 25 mg</i>	58
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<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	20
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	20
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	20
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<i>400-57 mg</i>	<i>19</i>	<i>(2-1) gm.....</i>	<i>20</i>
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<i>200-28.5 mg/5ml</i>	<i>19</i>	<i>soln 1.5 (1-0.5) gm</i>	<i>20</i>
<i>amoxicillin & k clavulanate for susp</i>		<i>ampicillin & sulbactam sodium for iv</i>	
<i>250-62.5 mg/5ml</i>	<i>19</i>	<i>soln 15 (10-5) gm</i>	<i>20</i>
<i>amoxicillin & k clavulanate for susp</i>		<i>ampicillin & sulbactam sodium for iv</i>	
<i>400-57 mg/5ml.....</i>	<i>19</i>	<i>soln 3 (2-1) gm</i>	<i>20</i>
<i>amoxicillin & k clavulanate for susp</i>		<i>ampicillin cap 500 mg</i>	<i>20</i>
<i>600-42.9 mg/5ml</i>	<i>19</i>	<i>ampicillin sodium for inj 125 mg</i>	<i>20</i>
<i>amoxicillin & k clavulanate tab 250-125</i>		<i>ampicillin sodium for inj 1 gm</i>	<i>20</i>
<i>mg</i>	<i>19</i>	<i>ampicillin sodium for inj 250 mg</i>	<i>20</i>
<i>amoxicillin & k clavulanate tab 500-125</i>		<i>ampicillin sodium for inj 2 gm</i>	<i>20</i>
<i>mg</i>	<i>19</i>	<i>ampicillin sodium for inj 500 mg</i>	<i>20</i>
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<i>mg</i>	<i>19</i>	<i>ampicillin sodium for iv soln 1 gm</i>	<i>20</i>
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<i>amphetamine-dextroamphetamine tab</i>		<i>anti-diarrhe tab 2mg</i>	<i>98</i>
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<i>aprepitant capsule 40 mg</i>	98
<i>aprepitant capsule 80 mg</i>	98
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	98
<i>apri tab</i>	83
APTIOM TAB 200MG	50
APTIOM TAB 400MG	50
APTIOM TAB 600MG	50
APTIOM TAB 800MG	50
APTIVUS CAP 250MG	12
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<i>aripiprazole oral solution 1 mg/ml</i>	64
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<i>aripiprazole tab 20 mg</i>	64
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<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	65
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	65
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<i>aspirin tab 325mg</i>	1
<i>aspirin tab 325 mg</i>	1
<i>aspirin tab 325mg ec</i>	1
<i>aspirin tab delayed release 325 mg</i>	1
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	12
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	12
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	12
<i>atenolol & chlorthalidone tab 100-25 mg</i>	41
<i>atenolol & chlorthalidone tab 50-25 mg</i>	41
<i>atenolol tab 100 mg</i>	42
<i>atenolol tab 25 mg</i>	42
<i>atenolol tab 50 mg</i>	42
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<i>atomoxetine hcl cap 18 mg (base equiv)</i>	70
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	70
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	70
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<i>benazepril & hydrochlorothiazide tab</i> 20-25 mg	34	<i>betamethasone valerate oint 0.1%</i> (base equivalent)	151
<i>benazepril & hydrochlorothiazide tab</i> 5- 6.25 mg	34	BETASERON INJ 0.3MG	75
<i>benazepril hcl tab</i> 10 mg	35	<i>betatemp sus</i> 160/5ml	1
<i>benazepril hcl tab</i> 20 mg	35	<i>betaxolol hcl ophth soln</i> 0.5%	137
<i>benazepril hcl tab</i> 40 mg	35	<i>betaxolol hcl tab</i> 10 mg	42
<i>benazepril hcl tab</i> 5 mg	35	<i>betaxolol hcl tab</i> 20 mg	42
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BENLYSTA INJ 120MG	113	<i>bethanechol chloride tab</i> 25 mg	105
BENLYSTA INJ 200MG/ML	113	<i>bethanechol chloride tab</i> 50 mg	105
BENLYSTA INJ 400MG	113	<i>bethanechol chloride tab</i> 5 mg	104
BENZOIN TIN	149	BETOPTIC-S SUS 0.25% OP	137
<i>benzonatate cap</i> 100 mg	141	BEVESPI AER 9-4.8MCG	138
<i>benzonatate cap</i> 200 mg	142	<i>bexarotene cap</i> 75 mg	25
<i>benzoyl peroxide-erythromycin gel</i> 5- 3%	147	BEXSERO INJ	114
<i>benzphetamine hcl tab</i> 50 mg	76	<i>bicalutamide tab</i> 50 mg	24
<i>benztropine mesylate inj</i> 1 mg/ml	62	BICILLIN L-A INJ 1200000	20
<i>benztropine mesylate tab</i> 0.5 mg	62	BICILLIN L-A INJ 2400000	20
<i>benztropine mesylate tab</i> 1 mg	62	BICILLIN L-A INJ 600000	20
<i>benztropine mesylate tab</i> 2 mg	62	BIKTARVY TAB	14
BENZYL ALC LIQ	115	BIOFLAVINOID POW LEMON	115
<i>bepotastine besilate ophth soln</i> 1.5%	136	BIOFLAVONOID POW CITRUS	116
BEPREVE DRO 1.5%	136	<i>biotin cap</i> 5 mg	128
BERINERT INJ 500UNIT	109	BIOTIN-D POW	116
BESIVANCE SUS 0.6%	135	<i>biotin tab</i> 300 mcg	128
BETAINE POW ANHYDROU	115	<i>biotin tab</i> 5 mg	128
<i>betamethasone dipropionate</i> <i>augmented cream</i> 0.05%	150	<i>bisacodyl suppos</i> 10 mg	101
<i>betamethasone dipropionate</i> <i>augmented gel</i> 0.05%	150	<i>bisacodyl tab</i> 5mg ec	101
<i>betamethasone dipropionate</i> <i>augmented lotion</i> 0.05%	150	<i>bismatrol chw</i> 262mg	98
<i>betamethasone dipropionate</i> <i>augmented oint</i> 0.05%	150	<i>bismatrol sus</i> 262/15ml	98
<i>betamethasone dipropionate cream</i> 0.05%	150	BISMUTH SUBC POW	116
<i>betamethasone dipropionate lotion</i> 0.05%	150	<i>bismuth subsalicylate chew tab</i> 262 mg	98
<i>betamethasone dipropionate oint</i> 0.05%	150	<i>bisoprolol & hydrochlorothiazide tab</i> 10-6.25 mg	42
		<i>bisoprolol & hydrochlorothiazide tab</i> 2.5-6.25 mg	42
		<i>bisoprolol & hydrochlorothiazide tab</i> 5- 6.25 mg	42
		<i>bisoprolol fumarate tab</i> 10 mg	42
		<i>bisoprolol fumarate tab</i> 5 mg	42
		BITTERNESS POW NATURAL	116
		BIVIGAM INJ 10%	112

BLEPHAMIDE OIN S.O.P.	135	BUFFER CREAM POW	116
<i>blisovi 24 tab fe 1/20</i>	84	<i>bumetanide inj 0.25 mg/ml</i>	46
<i>blisovi fe tab 1.5/30</i>	84	<i>bumetanide tab 0.5 mg</i>	46
BOOSTRIX INJ	114	<i>bumetanide tab 1 mg</i>	46
BORIC ACID GRA	152	<i>bumetanide tab 2 mg</i>	46
BORIC ACID POW	116	<i>buprenorphine hcl-naloxone hcl sl film</i>	
BORTEZOMIB INJ 3.5MG	27	12-3 mg (base equiv)	76
<i>bosentan tab 125 mg</i>	49	<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>bosentan tab 62.5 mg</i>	49	2-0.5 mg (base equiv)	76
BOSULIF TAB 100MG	27	<i>buprenorphine hcl-naloxone hcl sl film</i>	
BOSULIF TAB 400MG	27	4-1 mg (base equiv)	76
BOSULIF TAB 500MG	27	<i>buprenorphine hcl-naloxone hcl sl film</i>	
BRAFTOVI CAP 75MG.....	27	8-2 mg (base equiv)	76
BREO ELLIPTA INH 100-25	147	<i>buprenorphine hcl-naloxone hcl sl tab</i>	
BREO ELLIPTA INH 200-25	147	2-0.5 mg (base equiv)	76
BREZTRI AERO AER SPHERE	138	<i>buprenorphine hcl-naloxone hcl sl tab</i>	
<i>briellyn tab</i>	84	8-2 mg (base equiv)	77
BRILINTA TAB 60MG	110	<i>buprenorphine hcl sl tab 2 mg (base</i>	
BRILINTA TAB 90MG	110	equiv).....	76
<i>brimonidine tartrate ophth soln 0.15%</i>		<i>buprenorphine hcl sl tab 8 mg (base</i>	
.....	137	equiv).....	76
<i>brimonidine tartrate ophth soln 0.2%</i>		<i>buprenorphine td patch weekly 10</i>	
.....	137	mcg/hr	3
<i>brinzolamide ophth susp 1%</i>	137	<i>buprenorphine td patch weekly 15</i>	
BRIVIACT INJ 50MG/5ML	50	mcg/hr	4
BRIVIACT SOL 10MG/ML	50	<i>buprenorphine td patch weekly 20</i>	
BRIVIACT TAB 100MG.....	50	mcg/hr	4
BRIVIACT TAB 10MG	50	<i>buprenorphine td patch weekly 5</i>	
BRIVIACT TAB 25MG	50	mcg/hr	3
BRIVIACT TAB 50MG	50	<i>buprenorphine td patch weekly 7.5</i>	
BRIVIACT TAB 75MG	50	mcg/hr	3
<i>bromfed dm syp</i>	142	<i>bupropion hcl (smoking deterrent) tab</i>	
<i>bromfenac sodium ophth soln 0.09%</i>		er 12hr 150 mg.....	77
(base equiv) (once-daily).....	136	<i>bupropion hcl tab 100 mg</i>	58
<i>bromocriptine mesylate cap 5 mg (base</i>		<i>bupropion hcl tab 75 mg</i>	58
equivalent).....	62	<i>bupropion hcl tab er 12hr 100 mg</i>	58
<i>bromocriptine mesylate tab 2.5 mg</i>		<i>bupropion hcl tab er 12hr 150 mg</i>	58
(base equivalent)	62	<i>bupropion hcl tab er 12hr 200 mg</i>	58
BROMSITE DRO 0.075%.....	136	<i>bupropion hcl tab er 24hr 150 mg</i>	59
BRUKINSA CAP 80MG	27	<i>bupropion hcl tab er 24hr 300 mg</i>	59
<i>budesonide delayed release particles</i>		<i>buspirone hcl tab 10 mg</i>	50
<i>cap 3 mg</i>	100	<i>buspirone hcl tab 15 mg</i>	50
<i>budesonide inhalation susp 0.25</i>		<i>buspirone hcl tab 30 mg</i>	50
<i>mg/2ml</i>	146	<i>buspirone hcl tab 5 mg</i>	50
<i>budesonide inhalation susp 0.5 mg/2ml</i>		<i>buspirone hcl tab 7.5 mg</i>	50
.....	146	<i>butorphanol tartrate inj 1 mg/ml</i>	5
<i>budesonide tab er 24hr 9 mg</i>	100	<i>butorphanol tartrate inj 2 mg/ml</i>	6

BUTYLPARABEN POW	116
BYDUREON BC INJ 2/0.85ML	79
BYDUREON PEN INJ 2MG.....	79
BYETTA INJ 10MCG	79
BYETTA INJ 5MCG	79
BYSTOLIC TAB 10MG	42
BYSTOLIC TAB 2.5MG.....	42
BYSTOLIC TAB 20MG	42
BYSTOLIC TAB 5MG.....	42

C

<i>c/rosehip tr tab 1000mg</i>	128
<i>c-1000/rh tab 1000mg</i>	128
<i>c 250 tab</i>	128
<i>c-500 chw 500mg</i>	128
<i>cabergoline tab 0.5 mg</i>	92
CABOMETYX TAB 20MG.....	27
CABOMETYX TAB 40MG.....	27
CABOMETYX TAB 60MG.....	27
<i>ca citrate + tab</i>	128
CALAMINE LOT.....	152
CALAMINE LOT 8-8%	152
CALAMINE LOT PHENOLAT	152
CALAMINE POW	152
CALCET PETIT TAB 200-250.....	124
CALCI-CHEW CHW 1250MG	124
<i>calciferol dro 8000/ml</i>	128
<i>calcipotriene cream 0.005%</i>	150
<i>calcipotriene oint 0.005%</i>	150
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	150
<i>calcitonin (salmon) nasal soln 200</i> <i>unit/act</i>	82
<i>calcitrate tab</i>	124
<i>calcitrate tab 950mg</i>	124
<i>calcitrene oin 0.005%</i>	150
<i>calcitriol cap 0.25 mcg</i>	97
<i>calcitriol cap 0.5 mcg</i>	97
<i>calcitriol inj 1 mcg/ml</i>	97
<i>calcitriol oral soln 1 mcg/ml</i>	97
<i>calcium/d3 tab</i>	125
<i>calcium/d chw 500-400</i>	125
<i>calcium +d tab maximum</i>	124
<i>calcium 600 chw +d/miner</i>	124
<i>calcium 600 tab</i>	124
<i>calcium 600 tab + d</i>	124
<i>calcium 600 tab -d</i>	124

<i>calcium acetate (phosphate binder) cap</i> <i>667 mg (169 mg ca)</i>	94
<i>calcium acetate (phosphate binder) tab</i> <i>667 mg</i>	94
<i>calcium carbonate (antacid) susp 1250</i> <i>mg/5ml</i>	124
<i>calcium carbonate-cholecalciferol chew</i> <i>tab 500 mg-100 unit</i>	124
<i>calcium carbonate-cholecalciferol tab</i> <i>250 mg-125 unit</i>	125
<i>calcium carbonate-cholecalciferol tab</i> <i>500 mg-200 unit</i>	125
<i>calcium carbonate-cholecalciferol tab</i> <i>500 mg-400 unit</i>	125
<i>calcium carbonate-cholecalciferol tab</i> <i>600 mg-200 unit</i>	125
<i>calcium carbonate-cholecalciferol tab</i> <i>600 mg-400 unit</i>	125
<i>calcium carbonate tab 1500 mg (600</i> <i>mg elemental ca)</i>	124
<i>calcium carbonate-vitamin d tab 500</i> <i>mg-200 unit</i>	125
<i>calcium carbonate-vitamin d tab 500</i> <i>mg-400 unit</i>	125
<i>calcium carbonate-vitamin d tab 600</i> <i>mg-125 unit</i>	125
CALCIUM CARB POW.....	124
CALCIUM CARB POW EX-LIGHT	124
CALCIUM CARB POW HEAVY	124
<i>calcium carb-vit d w/ minerals chew</i> <i>tab 600 mg-400 unit</i>	124
<i>calcium citrate-vitamin d tab 200 mg-</i> <i>250 unit (elemental ca)</i>	125
<i>calcium citr tab w/vit d3</i>	125
CALCIUM GLUC POW.....	125
CALCIUM LACT TAB 648MG.....	125
<i>calcium-magnesium-zinc tab 333-133-</i> <i>5 mg</i>	125
<i>calcium-magnesium-zinc tab 334-134-</i> <i>5 mg</i>	125
CALCIUM PHOS POW TRIBASIC	125
<i>calcium plus tab 600 +d</i>	125
CALCIUM POW CITRATE	116
CALCIUM POW HYDROXID	116
CALCIUM POW SACCHARA	116
<i>calcium soft chw mlk choc</i>	125
<i>calcium tab 500/d</i>	125

<i>calcium tab 600mg</i>	125
<i>calcium tab vit d</i>	125
<i>cal-mag-zinc tab +d3</i>	128
CALQUENCE CAP 100MG	27
<i>camila tab 0.35mg</i>	84
CAMPHOR CRY	152
<i>camrese lo tab</i>	84
<i>camrese tab</i>	84
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 16-12.5 mg</i>	37
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-12.5 mg</i>	37
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-25 mg</i> .	37
<i>candesartan cilexetil tab 16 mg</i>	38
<i>candesartan cilexetil tab 32 mg</i>	38
<i>candesartan cilexetil tab 4 mg</i>	38
<i>candesartan cilexetil tab 8 mg</i>	38
CAPCOF SYP 5-2-10MG	142
CA PHOS DIHY POW DIBASIC	124
CAPLYTA CAP 42MG.....	65
CAPRELSA TAB 100MG.....	27
CAPRELSA TAB 300MG.....	27
<i>capsaicin cre 0.1%</i>	152
<i>capsaicin cream 0.025%</i>	152
CAPSAICIN LIQ 0.15%.....	152
<i>captopril tab 100 mg</i>	35
<i>captopril tab 12.5 mg</i>	35
<i>captopril tab 25 mg</i>	35
<i>captopril tab 50 mg</i>	35
CARBAGLU TAB 200MG.....	92
<i>carbamazepine cap er 12hr 100 mg</i> ..	50
<i>carbamazepine cap er 12hr 200 mg</i> ..	51
<i>carbamazepine cap er 12hr 300 mg</i> ..	51
<i>carbamazepine chew tab 100 mg</i>	51
<i>carbamazepine susp 100 mg/5ml</i>	51
<i>carbamazepine tab 200 mg</i>	51
<i>carbamazepine tab er 12hr 100 mg</i> ..	51
<i>carbamazepine tab er 12hr 200 mg</i> ..	51
<i>carbamazepine tab er 12hr 400 mg</i> ..	51
<i>carbidopa & levodopa orally</i> <i>disintegrating tab 10-100 mg</i>	62
<i>carbidopa & levodopa orally</i> <i>disintegrating tab 25-100 mg</i>	62
<i>carbidopa & levodopa orally</i> <i>disintegrating tab 25-250 mg</i>	62
<i>carbidopa & levodopa tab 10-100 mg</i>	62
<i>carbidopa & levodopa tab 25-100 mg</i>	63
<i>carbidopa & levodopa tab 25-250 mg</i>	63
<i>carbidopa & levodopa tab er 25-100</i> <i>mg</i>	63
<i>carbidopa & levodopa tab er 50-200</i> <i>mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>12.5-50-200 mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>18.75-75-200 mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>25-100-200 mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>31.25-125-200 mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>37.5-150-200 mg</i>	63
<i>carbidopa-levodopa-entacapone tabs</i> <i>50-200-200 mg</i>	63
CARBOGEL GEL 940.....	116
CARBOHOL GEL 940	116
CARBOMER POW HOMOPOLY	116
<i>carboplatin iv soln 150 mg/15ml</i>	22
<i>carboplatin iv soln 450 mg/45ml</i>	22
<i>carboplatin iv soln 50 mg/5ml</i>	22
<i>carboplatin iv soln 600 mg/60ml</i>	22
CARBOXYMETHY POW SODIUM	116
<i>carisoprodol tab 350 mg</i>	75
<i>carteolol hcl ophth soln 1%</i>	137
<i>cartia xt cap 120/24hr</i>	43
<i>cartia xt cap 180/24hr</i>	43
<i>cartia xt cap 240/24hr</i>	43
<i>cartia xt cap 300/24hr</i>	43
<i>carvedilol tab 12.5 mg</i>	42
<i>carvedilol tab 25 mg</i>	42
<i>carvedilol tab 3.125 mg</i>	42
<i>carvedilol tab 6.25 mg</i>	42
<i>caspofungin acetate for iv soln 50 mg</i>	10
<i>caspofungin acetate for iv soln 70 mg</i>	10
<i>castellani paint</i>	149
CAYSTON INH 75MG	8
<i>caziant pak</i>	84
<i>cefaclor cap 250 mg</i>	16

<i>cefaclor cap 500 mg</i>	16	<i>cefuroxime axetil tab 500 mg</i>	17
CEFACLOR ER TAB 500MG	16	<i>cefuroxime sodium for inj 7.5 gm</i>	17
<i>cefaclor for susp 125 mg/5ml</i>	16	<i>cefuroxime sodium for inj 750 mg</i>	17
<i>cefaclor for susp 250 mg/5ml</i>	16	<i>cefuroxime sodium for iv soln 1.5 gm</i>	
<i>cefaclor for susp 375 mg/5ml</i>	16		17
<i>cefadroxil cap 500 mg</i>	16	<i>celecoxib cap 100 mg</i>	2
<i>cefadroxil for susp 250 mg/5ml</i>	16	<i>celecoxib cap 200 mg</i>	2
<i>cefadroxil for susp 500 mg/5ml</i>	16	<i>celecoxib cap 400 mg</i>	2
CEFAZOLIN INJ 1GM/50ML	16	<i>celecoxib cap 50 mg</i>	2
<i>cefazolin sodium for inj 10 gm</i>	17	CELONTIN CAP 300MG	51
<i>cefazolin sodium for inj 1 gm</i>	16	<i>centamin liq</i>	128
<i>cefazolin sodium for inj 500 mg</i>	17	<i>centavite liq</i>	128
<i>cefazolin sodium for iv soln 1 gm</i>	17	<i>century tab</i>	128
CEFAZOLIN SOL	17	<i>century tab mature</i>	128
<i>cefdinir cap 300 mg</i>	17	<i>cephalexin cap 250 mg</i>	18
<i>cefdinir for susp 125 mg/5ml</i>	17	<i>cephalexin cap 500 mg</i>	18
<i>cefdinir for susp 250 mg/5ml</i>	17	<i>cephalexin for susp 125 mg/5ml</i>	18
<i>cefepime hcl for inj 1 gm</i>	17	<i>cephalexin for susp 250 mg/5ml</i>	18
<i>cefepime hcl for inj 2 gm</i>	17	CERDELGA CAP 84MG	92
<i>cefixime for susp 100 mg/5ml</i>	17	CEREZYME INJ 400UNIT	92
<i>cefixime for susp 200 mg/5ml</i>	17	<i>cerovite jr chw</i>	128
<i>cefoxitin sodium for inj 10 gm</i>	17	<i>cerovite tab advanced</i>	128
<i>cefoxitin sodium for iv soln 1 gm</i>	17	<i>cerovite tab senior</i>	128
<i>cefoxitin sodium for iv soln 2 gm</i>	17	<i>certavite/ tab antioxid</i>	129
<i>cefpodoxime proxetil for susp 100</i>		CERTAVITE TAB SENIOR	129
<i>mg/5ml</i>	17	<i>cetirizine hcl chew tab 10 mg</i>	139
<i>cefpodoxime proxetil for susp 50</i>		<i>cetirizine hcl chew tab 5 mg</i>	139
<i>mg/5ml</i>	17	<i>cetirizine hcl oral soln 1 mg/ml (5</i>	
<i>cefpodoxime proxetil tab 100 mg</i>	17	<i>mg/5ml)</i>	139
<i>cefpodoxime proxetil tab 200 mg</i>	17	<i>cetirizine hcl tab 10 mg</i>	139
<i>cefprozil for susp 125 mg/5ml</i>	17	<i>cetirizine hcl tab 5 mg</i>	139
<i>cefprozil for susp 250 mg/5ml</i>	17	<i>cetirizine-pseudoephedrine tab er 12hr</i>	
<i>cefprozil tab 250 mg</i>	17	<i>5-120 mg</i>	142
<i>cefprozil tab 500 mg</i>	17	<i>cetirizine sol 1mg/ml</i>	139
CEFTAZIDIME/ SOL D5W 1GM	17	<i>cetirizine sol 5mg/5ml</i>	139
CEFTAZIDIME/ SOL D5W 2GM	17	CETYL ALCOHO GRA	116
<i>ceftazidime for inj 1 gm</i>	17	<i>cevimeline hcl cap 30 mg</i>	154
<i>ceftazidime for inj 2 gm</i>	17	CHANTIX PAK 0.5& 1MG	77
<i>ceftazidime for inj 6 gm</i>	17	CHANTIX PAK 1MG	77
<i>ceftriaxone sodium for inj 10 gm</i>	17	CHANTIX TAB 0.5MG	77
<i>ceftriaxone sodium for inj 1 gm</i>	17	CHANTIX TAB 1MG	77
<i>ceftriaxone sodium for inj 250 mg</i>	17	CHARCOAL POW	92
<i>ceftriaxone sodium for inj 2 gm</i>	17	<i>chateal tab 0.15/30</i>	84
<i>ceftriaxone sodium for inj 500 mg</i>	17	CHEMET CAP 100MG	83
<i>ceftriaxone sodium for iv soln 1 gm</i> ..	17	CHEMSTRIP TES UGK	92
<i>ceftriaxone sodium for iv soln 2 gm</i> ..	17	CHERRY CON	116
<i>cefuroxime axetil tab 250 mg</i>	17	CHERRY SYP	116

CHERRY SYP CONCENTR.....	116	cholestyramine light powder 4 gm/dose	41
chewable c chw 500mg	129	cholestyramine light powder packets 4 gm	41
chewabl vite chw childrns	129	cholestyramine powder 4 gm/dose ...	41
child chew/ chw extra c	129	cholestyramine powder packets 4 gm	41
child chew chw iron	129	chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)	123
child chew chw vitamins	129	CHRY SIN POW	116
childrens chw /iron	129	ciclopirox olamine cream 0.77% (base equiv)	149
CHILDRENS CHW COMPLETE.....	129	ciclopirox olamine susp 0.77% (base equiv)	149
child silfed liq 15mg/5ml	142	cilostazol tab 100 mg	109
chld allergy liq 12.5/5ml.....	139	cilostazol tab 50 mg	109
chld silapap liq 160/5ml.....	1	CILOXAN OIN 0.3% OP	135
chlorhexidine gluconate soln 0.12%	154	CIMDUO TAB 300-300	14
CHLOROFORM SOL	116	cinacalcet hcl tab 30 mg (base equiv)	92
chloroquine phosphate tab 250 mg...	11	cinacalcet hcl tab 60 mg (base equiv)	92
chloroquine phosphate tab 500 mg...	11	cinacalcet hcl tab 90 mg (base equiv)	92
chlor-phenir tab 4mg	139	CIPRO (10%) SUS 500MG/5	18
chlorpromazine hcl inj 25 mg/ml	65	ciprofloxacin 200 mg/100ml in d5w ..	19
chlorpromazine hcl inj 50 mg/2ml ...	65	ciprofloxacin 400 mg/200ml in d5w ..	19
chlorpromazine hcl tab 100 mg	65	ciprofloxacin-dexamethasone otic susp 0.3-0.1%	154
chlorpromazine hcl tab 10 mg	65	ciprofloxacin hcl ophth soln 0.3% (base equivalent)	135
chlorpromazine hcl tab 200 mg	65	ciprofloxacin hcl tab 100 mg (base equiv)	19
chlorpromazine hcl tab 25 mg	65	ciprofloxacin hcl tab 250 mg (base equiv)	19
chlorpromazine hcl tab 50 mg	65	ciprofloxacin hcl tab 500 mg (base equiv)	19
chlorthalidone tab 25 mg	46	ciprofloxacin hcl tab 750 mg (base equiv)	19
chlorthalidone tab 50 mg	46	cisplatin inj 100 mg/100ml (1 mg/ml)	22
CHOCOLATE CON FLAVOR	116	cisplatin inj 200 mg/200ml (1 mg/ml)	22
cholecalciferol cap 1.25 mg (50000 unit)	129	cisplatin inj 50 mg/50ml (1 mg/ml) ..	22
cholecalciferol cap 10 mcg (400 unit)	129	citalopram hydrobromide oral soln 10 mg/5ml.....	59
cholecalciferol cap 125 mcg (5000 unit)	129	citalopram hydrobromide tab 10 mg (base equiv)	59
cholecalciferol cap 250 mcg (10000 unit)	129		
cholecalciferol cap 25 mcg (1000 unit)	129		
cholecalciferol cap 50 mcg (2000 unit)	129		
cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)	129		
cholecalciferol tab 10 mcg (400 unit)	129		
cholecalciferol tab 25 mcg (1000 unit)	129		
cholecalciferol tab 50 mcg (2000 unit)	129		
CHOLESTEROL POW ACETATE	116		

<i>citalopram hydrobromide tab 20 mg</i>		CLINIMIX INJ 8/10	123
<i>(base equiv)</i>	59	CLINIMIX INJ 8/14	123
<i>citalopram hydrobromide tab 40 mg</i>		<i>clinisol sf inj 15%</i>	123
<i>(base equiv)</i>	59	CLINOLIPID EMU 20%	123
<i>cit calc/d tab 315-250</i>	125	<i>clobazam suspension 2.5 mg/ml</i>	51
CITRIC ACID GRA ANHYDROU	116	<i>clobazam tab 10 mg</i>	51
CITRIC ACID POW ANHYDROU	116	<i>clobazam tab 20 mg</i>	51
<i>claravis cap 10mg</i>	147	<i>clobetasol e cre 0.05%</i>	151
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docusate cal cap 240mg	101	doxy 100 inj 100mg	21
docusate sod cap 100mg	101	doxycycline hyclate cap 100 mg	21
docusate sodium cap 100 mg.....	101	doxycycline hyclate cap 50 mg.....	21
docusate sodium liquid 150 mg/15ml		doxycycline hyclate for inj 100 mg ...	21
.....	101	doxycycline hyclate tab 100 mg	21
docusate sod liq 50mg/5ml.....	101	doxycycline hyclate tab 20 mg	21
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docu soft cap 100mg	101		21
		doxycycline monohydrate cap 50 mg	21

<i>doxycycline monohydrate tab 100 mg</i>	
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<i>doxycycline monohydrate tab 50 mg.</i>	21
<i>doxycycline monohydrate tab 75 mg.</i>	21
DRIZALMA CAP 20MG DR	59
DRIZALMA CAP 30MG DR	59
DRIZALMA CAP 40MG DR	59
DRIZALMA CAP 60MG DR	59
<i>dronabinol cap 10 mg</i>	99
<i>dronabinol cap 2.5 mg</i>	98
<i>dronabinol cap 5 mg</i>	98
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	84
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	84
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	84
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	84
DROXIA CAP 200MG	109
DROXIA CAP 300MG	109
DROXIA CAP 400MG	109
<i>droxidopa cap 100 mg</i>	47
<i>droxidopa cap 200 mg</i>	47
<i>droxidopa cap 300 mg</i>	47
<i>ducodyl tab 5mg ec</i>	101
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	60
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	60
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	60
DUREZOL EMU 0.05%	136
<i>dutasteride cap 0.5 mg</i>	104
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	104
D-VITAMIN E POW SUCCINAT	116
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<i>e-400 cap 400unit</i>	130
ECEE PLUS TAB	130
<i>ec-naproxen tab 375mg</i>	2
<i>ec-naproxen tab 500mg</i>	2
<i>ecpirin tab 325mg ec</i>	1
<i>ed-apap liq 80mg/2.5</i>	1
<i>ed chlorped syp jr</i>	139
EDURANT TAB 25MG	12
<i>efavirenz cap 200 mg</i>	12
<i>efavirenz cap 50 mg</i>	12
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	14
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	14
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	14
<i>efavirenz tab 600 mg</i>	12
<i>eldertonic liq</i>	130
<i>elimest tab</i>	84
ELIQUIS ST P TAB 5MG	106
ELIQUIS TAB 2.5MG	106
ELIQUIS TAB 5MG	106
ELLA TAB 30MG	84
<i>eluryng mis</i>	84
EMCYT CAP 140MG	24
EMEND SUS 125MG	99
<i>emoquette tab</i>	84
EMSAM DIS 12MG/24H	60
EMSAM DIS 6MG/24HR	60
EMSAM DIS 9MG/24HR	60
<i>emtricitabine caps 200 mg</i>	12
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	14
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	14
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	14
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	14
EMTRIVA SOL 10MG/ML	12
EMVERM CHW 100MG	8
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	34
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	34
<i>enalapril maleate tab 10 mg</i>	35
<i>enalapril maleate tab 2.5 mg</i>	35
<i>enalapril maleate tab 20 mg</i>	35
<i>enalapril maleate tab 5 mg</i>	35
ENBREL INJ 25/0.5ML	110
ENBREL INJ 25MG	110
ENBREL INJ 50MG/ML	110
ENBREL MINI INJ 50MG/ML	110
ENBREL SRCLK INJ 50MG/ML	110
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<i>enoxaparin sodium inj 100 mg/ml ..</i>	106	ERLEADA TAB 60MG	24
<i>enoxaparin sodium inj 120 mg/0.8ml</i>		<i>erlotinib hcl tab 100 mg (base</i>	
.....	106	<i>equivalent).....</i>	27
<i>enoxaparin sodium inj 150 mg/ml ..</i>	106	<i>erlotinib hcl tab 150 mg (base</i>	
<i>enoxaparin sodium inj 300 mg/3ml.</i>	106	<i>equivalent).....</i>	28
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	106	<i>erlotinib hcl tab 25 mg (base</i>	
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	106	<i>equivalent).....</i>	27
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	106	<i>errin tab 0.35mg.....</i>	85
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	106	<i>ertapenem sodium for inj 1 gm (base</i>	
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<i>entacapone tab 200 mg</i>	63	<i>ery-tab tab 333mg ec</i>	18
<i>entecavir tab 0.5 mg</i>	15	<i>ery-tab tab 500mg ec</i>	18
<i>entecavir tab 1 mg</i>	15	ERYTHROCIN INJ 500MG.....	18
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ENTRESTO TAB 49-51MG	37	<i>erythromycin ethylsuccinate tab 400</i>	
ENTRESTO TAB 97-103MG	37	<i>mg</i>	18
<i>enulose sol 10gm/15</i>	101	<i>erythromycin ophth oint 5 mg/gm ..</i>	135
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EPCLUSA TAB 400-100	15	<i>erythromycin tab 250 mg.....</i>	18
EPIDIOLEX SOL 100MG/ML.....	52	<i>erythromycin tab 500 mg.....</i>	18
<i>epinephrine solution auto-injector 0.15</i>		<i>erythromycin tab delayed release 250</i>	
<i>mg/0.15ml (1:1000)</i>	145	<i>mg</i>	18
<i>epinephrine solution auto-injector 0.15</i>		<i>erythromycin tab delayed release 333</i>	
<i>mg/0.3ml (1:2000).....</i>	144	<i>mg</i>	18
<i>epinephrine solution auto-injector 0.3</i>		<i>erythromycin tab delayed release 500</i>	
<i>mg/0.3ml (1:1000).....</i>	144	<i>mg</i>	18
<i>epirubicin hcl iv soln 200 mg/100ml (2</i>		<i>erythromycin w/ delayed release</i>	
<i>mg/ml)</i>	23	<i>particles cap 250 mg</i>	18
<i>epirubicin hcl iv soln 50 mg/25ml (2</i>		ESBRIET CAP 267MG	145
<i>mg/ml)</i>	22	ESBRIET TAB 267MG	145
<i>epitol tab 200mg</i>	52	ESBRIET TAB 801MG	145
EPIVIR HBV SOL 5MG/ML	15	<i>escitalopram oxalate soln 5 mg/5ml</i>	
<i>eplerenone tab 25 mg.....</i>	36	<i>(base equiv)</i>	60
<i>eplerenone tab 50 mg.....</i>	36	<i>escitalopram oxalate tab 10 mg (base</i>	
<i>epsom salt gra.....</i>	101	<i>equiv).....</i>	60
EPSOM SALT POW	101	<i>escitalopram oxalate tab 20 mg (base</i>	
<i>eq cough dm sus 30mg/5ml.....</i>	142	<i>equiv).....</i>	60
<i>eql coq10 cap 100mg.....</i>	127	<i>escitalopram oxalate tab 5 mg (base</i>	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>		<i>equiv).....</i>	60
.....	130	<i>esomeprazole magnesium cap delayed</i>	
<i>ergocalciferol soln 200 mcg/ml (8000</i>		<i>release 20 mg (base eq).....</i>	104
<i>unit/ml)</i>	130		

<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	104	ETHYL ALCOHO SOL 95%	116
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<i>estarylla tab 0.25-35</i>	85	ETHYL ALCOHO SOL SDA 95%	117
<i>ester-c tab 500mg</i>	130	ETHYL OLEATE LIQ	117
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<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	89	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	85
<i>estradiol tab 0.5 mg</i>	89	<i>etodolac cap 200 mg</i>	2
<i>estradiol tab 1 mg</i>	89	<i>etodolac cap 300 mg</i>	2
<i>estradiol tab 2 mg</i>	89	<i>etodolac tab 400 mg</i>	2
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	89	<i>etodolac tab 500 mg</i>	3
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	89	<i>etodolac tab er 24hr 400 mg</i>	3
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	89	<i>etodolac tab er 24hr 500 mg</i>	3
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	89	<i>etodolac tab er 24hr 600 mg</i>	3
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	89	<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	85
<i>estradiol td patch weekly 0.025 mg/24hr</i>	89	<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	26
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	89	<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	26
<i>estradiol td patch weekly 0.05 mg/24hr</i>	89	<i>etravirine tab 100 mg</i>	12
<i>estradiol td patch weekly 0.06 mg/24hr</i>	89	<i>etravirine tab 200 mg</i>	12
<i>estradiol td patch weekly 0.075 mg/24hr</i>	89	<i>euthyrox tab 100mcg</i>	95
<i>estradiol td patch weekly 0.1 mg/24hr</i>	89	<i>euthyrox tab 112mcg</i>	95
<i>estradiol vaginal cream 0.1 mg/gm</i> ..	89	<i>euthyrox tab 125mcg</i>	95
<i>estradiol vaginal tab 10 mcg</i>	89	<i>euthyrox tab 137mcg</i>	95
<i>estradiol valerate im in oil 20 mg/ml</i> .	89	<i>euthyrox tab 150mcg</i>	95
<i>estradiol valerate im in oil 40 mg/ml</i> .	89	<i>euthyrox tab 175mcg</i>	95
<i>eszopiclone tab 1 mg</i>	72	<i>euthyrox tab 200mcg</i>	95
<i>eszopiclone tab 2 mg</i>	72	<i>euthyrox tab 25mcg</i>	95
<i>eszopiclone tab 3 mg</i>	72	<i>euthyrox tab 50mcg</i>	95
<i>ethambutol hcl tab 100 mg</i>	15	<i>euthyrox tab 75mcg</i>	95
<i>ethambutol hcl tab 400 mg</i>	15	<i>euthyrox tab 88mcg</i>	95
<i>ethosuximide cap 250 mg</i>	52	<i>everolimus tab 0.25 mg</i>	113
<i>ethosuximide soln 250 mg/5ml</i>	52	<i>everolimus tab 0.5 mg</i>	113
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		<i>everolimus tab 5 mg</i>	28
		<i>everolimus tab 7.5 mg</i>	28
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<i>famciclovir tab 125 mg</i>	15
<i>famciclovir tab 250 mg</i>	15
<i>famciclovir tab 500 mg</i>	15
<i>famotidine for susp 40 mg/5ml</i>	100
<i>famotidine inj 200 mg/20ml</i>	100
<i>famotidine inj 20 mg/2ml</i>	100
<i>famotidine inj 40 mg/4ml</i>	100
<i>famotidine in nacl 0.9% iv soln 20</i> <i>mg/50ml</i>	100
<i>famotidine tab 20 mg</i>	100
<i>famotidine tab 40 mg</i>	100
FANAPT PAK	65
FANAPT TAB 10MG	65
FANAPT TAB 12MG	66
FANAPT TAB 1MG.....	65
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<i>felbamate susp 600 mg/5ml</i>	52
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<i>felbamate tab 600 mg</i>	53
<i>felodipine tab er 24hr 10 mg</i>	44
<i>felodipine tab er 24hr 2.5 mg</i>	44
<i>felodipine tab er 24hr 5 mg</i>	44
<i>femynor tab 0.25-35</i>	85
<i>fenofibrate micronized cap 134 mg</i> ...	40
<i>fenofibrate micronized cap 200 mg</i> ...	40
<i>fenofibrate micronized cap 67 mg</i>	40
<i>fenofibrate tab 145 mg</i>	40
<i>fenofibrate tab 160 mg</i>	40
<i>fenofibrate tab 48 mg</i>	40
<i>fenofibrate tab 54 mg</i>	40
<i>fentanyl citrate lozenge on a handle</i> <i>1200 mcg</i>	6
<i>fentanyl citrate lozenge on a handle</i> <i>1600 mcg</i>	6
<i>fentanyl citrate lozenge on a handle</i> <i>200 mcg</i>	6
<i>fentanyl citrate lozenge on a handle</i> <i>400 mcg</i>	6
<i>fentanyl citrate lozenge on a handle</i> <i>600 mcg</i>	6
<i>fentanyl citrate lozenge on a handle</i> <i>800 mcg</i>	6
<i>fentanyl td patch 72hr 100 mcg/hr</i>	4
<i>fentanyl td patch 72hr 12 mcg/hr</i>	4
<i>fentanyl td patch 72hr 25 mcg/hr</i>	4
<i>fentanyl td patch 72hr 50 mcg/hr</i>	4
<i>fentanyl td patch 72hr 75 mcg/hr</i>	4
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<i>ferate tab 27mg</i>	107
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FERROUS SULFATE SYRUP 300 MG/5ML (60 MG/5ML ELEMENTAL FE)	108	<i>fluconazole for susp 40 mg/ml</i>	10
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	108	<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	10
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	108	<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	11
FERROUS SULF TAB 324MG EC	108	<i>fluconazole tab 100 mg</i>	11
<i>ferrousul tab 325mg</i>	108	<i>fluconazole tab 150 mg</i>	11
FE SULFATE POW	107	<i>fluconazole tab 200 mg</i>	11
FETZIMA CAP 120MG	60	<i>fluconazole tab 50 mg</i>	11
FETZIMA CAP 20MG	60	<i>flucytosine cap 250 mg</i>	11
FETZIMA CAP 40MG	60	<i>flucytosine cap 500 mg</i>	11
FETZIMA CAP 80MG	60	<i>fludrocortisone acetate tab 0.1 mg</i> ...	90
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FEVERALL INF SUP 80MG	1	<i>fluocinolone acetate (otic) oil 0.01%</i>	154
<i>feverall sup 120mg</i>	1	<i>fluocinolone acetate cream 0.01%</i>	151
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<i>feverall sup 650mg</i>	1	<i>fluocinolone acetate oil 0.01% (body oil)</i>	151
<i>fexofenadine hcl tab 180 mg</i>	139	<i>fluocinolone acetate oil 0.01% (scalp oil)</i>	151
<i>fexofenadine hcl tab 60 mg</i>	139	<i>fluocinolone acetate oint 0.025%</i>	151
<i>fexofenadine tab 180mg</i>	139	<i>fluocinolone acetate soln 0.01%</i>	151
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<i>finasteride tab 5 mg</i>	104	<i>fluocinonide oint 0.05%</i>	151
FINTEPLA SOL 2.2MG/ML	53	<i>fluocinonide soln 0.05%</i>	151
<i>flac oil 0.01%</i>	154	<i>fluorometholone ophth susp 0.1%</i>	136
FLAREX SUS 0.1% OP	136	<i>fluorouracil cream 5%</i>	152
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FLEBOGAMMA INJ 10/100ML	112	<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	23
FLEBOGAMMA INJ 10/200ML	112	<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	23
FLEBOGAMMA INJ 20/200ML	112	<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	23
FLEBOGAMMA INJ 20/400ML	112	<i>fluorouracil soln 2%</i>	152
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FLEBOGAMMA INJ DIF 5%	112	<i>fluoxetine hcl cap 10 mg</i>	60
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<i>mg/ml</i>	91	<i>metronidazole lotion 0.75%</i>	153
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NORPACE CAP 150MG CR	39	<i>nystatin susp 100000 unit/ml</i>	154
NORTHERA CAP 100MG	48	<i>nystatin tab 500000 unit</i>	11
NORTHERA CAP 200MG	48	<i>nystatin topical powder 100000 unit/gm</i>	149
NORTHERA CAP 300MG	48	<i>nystop pow 100000</i>	149
<i>nortrel tab 0.5/35</i>	87	O	
<i>nortrel tab 7/7/7</i>	87	<i>ocella tab 3-0.03mg</i>	87
<i>nortriptyline hcl cap 10 mg</i>	61	OCTAGAM INJ 10/100ML	112
<i>nortriptyline hcl cap 25 mg</i>	61	OCTAGAM INJ 10GM	112
<i>nortriptyline hcl cap 50 mg</i>	61	OCTAGAM INJ 1GM	112
<i>nortriptyline hcl cap 75 mg</i>	61	OCTAGAM INJ 2.5GM	112
<i>nortriptyline hcl soln 10 mg/5ml</i>	61	OCTAGAM INJ 20/200ML	113
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NORVIR SOL 80MG/ML	13	OCTAGAM INJ 2GM/20ML	112
NOVAFERRUM CAP 50MG	108	OCTAGAM INJ 30/300ML	113
NOVAFERRUM DRO 15MG/ML	108	OCTAGAM INJ 5GM	112
NOVAFERRUM LIQ 125	108	OCTAGAM INJ 5GM/50ML	112
NOVOLIN INJ 70/30	81	<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	94
NOVOLIN INJ 70/30 FP	81	<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	93
NOVOLIN N INJ 100 UNIT	81	<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	93
NOVOLIN N INJ U-100	81	<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	94
NOVOLIN R INJ 100 UNIT	81	<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	93
NOVOLIN R INJ U-100	81	OCUVITE CAP ADULT	132
NOVOLOG INJ 100/ML	81	<i>ocuvite tab lutein</i>	132
NOVOLOG INJ FLEXPEN	81	<i>ocuvite xtra tab</i>	132
NOVOLOG INJ PENFILL	81	ODEFSEY TAB	14
NOVOLOG MIX INJ 70/30	82	ODOMZO CAP 200MG	30
NOVOLOG MIX INJ FLEXPEN	82	OFEV CAP 100MG	145
NOXAFIL SUS 40MG/ML	11	OFEV CAP 150MG	145
NUBEQA TAB 300MG	24	<i>ofloxacin ophth soln 0.3%</i>	136
NUEDEXTA CAP 20-10MG	75	<i>ofloxacin otic soln 0.3%</i>	154
<i>nu-iron 150 cap 150mg</i>	108	OGIVRI INJ 150MG	30
NULOJIX INJ 250MG	114	OGIVRI INJ 420MG	30
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olanzapine for im inj 10 mg	67	omeprazole cap delayed release 40 mg	104
olanzapine orally disintegrating tab 10 mg	67	OMNIPOD KIT STARTER	82
olanzapine orally disintegrating tab 15 mg	67	OMNIPOD MIS 5 PACK	82
olanzapine orally disintegrating tab 20 mg	67	once daily tab	132
olanzapine orally disintegrating tab 5 mg	67	once daily tab iron	132
olanzapine tab 10 mg	67	ONCOVITE TAB	132
olanzapine tab 15 mg	67	ondansetron hcl inj 40 mg/20ml (2 mg/ml)	99
olanzapine tab 2.5 mg	67	ondansetron hcl inj 4 mg/2ml (2 mg/ml)	99
olanzapine tab 20 mg	67	ondansetron hcl oral soln 4 mg/5ml..	99
olanzapine tab 5 mg	67	ondansetron hcl tab 24 mg	99
olanzapine tab 7.5 mg	67	ondansetron hcl tab 4 mg	99
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	37	ondansetron hcl tab 8 mg	99
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	38	ondansetron orally disintegrating tab 4 mg	99
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	38	ondansetron orally disintegrating tab 8 mg	99
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	37	one daily tab	132
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	37	one daily tab maximum	132
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	37	one daily tab men 50+	132
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	37	one daily tab mens	132
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	37	one daily tab mens 50+	132
olmesartan medoxomil tab 20 mg	38	one daily tab pls iron	132
olmesartan medoxomil tab 40 mg	38	one daily tab wom 50+	132
olmesartan medoxomil tab 5 mg	38	one daily tab womens	132
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		ONUREG TAB 300MG	23
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ORKAMBI TAB 100-125	145	oxycodone hcl tab 20 mg	7
ORKAMBI TAB 200-125	145	oxycodone hcl tab 30 mg	7
ORNITHINE POW HCL	118	oxycodone hcl tab 5 mg	7
orsythia tab.....	87	oxycodone w/ acetaminophen tab 10-325 mg.....	7
oseltamivir phosphate cap 30 mg (base equiv).....	16	oxycodone w/ acetaminophen tab 2.5-325 mg.....	7
oseltamivir phosphate cap 45 mg (base equiv).....	16	oxycodone w/ acetaminophen tab 5-325 mg.....	7
oseltamivir phosphate cap 75 mg (base equiv).....	16	oxycodone w/ acetaminophen tab 7.5-325 mg.....	7
oseltamivir phosphate for susp 6 mg/ml (base equiv)	16	OXYCONTIN TAB 10MG CR.....	5
OSPHERA TAB 60MG	94	OXYCONTIN TAB 15MG CR.....	5
oxacillin sodium for inj 1 gm (base equivalent)	20	OXYCONTIN TAB 20MG CR.....	5
oxacillin sodium for inj 2 gm (base equivalent)	21	OXYCONTIN TAB 30MG CR.....	5
oxacillin sodium for iv soln 10 gm (base equivalent)	21	OXYCONTIN TAB 40MG CR.....	5
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oxaliplatin iv soln 200 mg/40ml	22	oysco 500 tab 500mg	126
oxaliplatin iv soln 50 mg/10ml	22	oyst cal/d tab 500mg	126
oxandrolone tab 10 mg	78	oyster shell calcium tab 500 mg	126
oxandrolone tab 2.5 mg	78	oyster shell tab 500mg	126
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	54	oyst shell/d tab 500mg	126
oxcarbazepine tab 150 mg	54	OZEMPIC INJ 2/1.5ML.....	80
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oxcarbazepine tab 600 mg	54	P	
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oxybutynin chloride tab 5 mg.....	105	pacerone tab 200mg	39
oxybutynin chloride tab er 24hr 10 mg	105	pacerone tab 400mg	39
oxybutynin chloride tab er 24hr 15 mg	105	paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)	26
oxybutynin chloride tab er 24hr 5 mg	105	paclitaxel iv conc 150 mg/25ml (6 mg/ml)	26
oxycodone hcl cap 5 mg	7	paclitaxel iv conc 300 mg/50ml (6 mg/ml)	26
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	7	paclitaxel iv conc 30 mg/5ml (6 mg/ml)	26
oxycodone hcl soln 5 mg/5ml	7	pain & fever sus 160/5ml.....	2
oxycodone hcl tab 10 mg	7	pain & fever tab 325mg	2
		pain relief tab 500mg	2
		pain relief tab 500mg/rr.....	2
		pain relief tab 650mg	2
		pain relieve sus 160/5ml.....	2
		pain relieve tab 325mg.....	2

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<i>pain relieve tab 500mg/rr</i>	2	PEG 1000 LIQ	118
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<i>paliperidone tab er 24hr 3 mg</i>	67	<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
<i>paliperidone tab er 24hr 6 mg</i>	67	<i>for soln 236 gm</i>	102
<i>paliperidone tab er 24hr 9 mg</i>	67	<i>peg 3350-kcl-sod bicarb-nacl for soln</i>	
<i>pamidronate disodium for inj 30 mg</i> .82		<i>420 gm</i>	102
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.....	82	PEGASYS INJ.....	16
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<i>(base equiv)</i>	104	PEN GK/DEXTR INJ 60000/ML.....	21
<i>pantoprazole sodium for iv soln 40 mg</i>		PEN G PROC INJ 600000	21
<i>(base equiv)</i>	104	<i>penicillamine tab 250 mg</i>	83
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PANZYGA SOL 20/200ML.....	113	<i>unit</i>	21
PANZYGA SOL 30/300ML.....	113	<i>penicillin g sodium for inj 5000000 unit</i>	
PANZYGA SOL 5GM/50ML.....	113		21
<i>paraplatin inj 1000mg</i>	22	<i>penicillin v potassium for soln 125</i>	
<i>paricalcitol cap 1 mcg</i>	97	<i>mg/5ml</i>	21
<i>paricalcitol cap 2 mcg</i>	97	<i>penicillin v potassium for soln 250</i>	
<i>paricalcitol cap 4 mcg</i>	97	<i>mg/5ml</i>	21
<i>paroex sol 0.12%</i>	154	<i>penicillin v potassium tab 250 mg</i>	21
<i>paromomycin sulfate cap 250 mg</i>	9	<i>penicillin v potassium tab 500 mg</i>	21
<i>paroxetine hcl tab 10 mg</i>	61	PEN NEEDLES:	
<i>paroxetine hcl tab 20 mg</i>	61	NOVO/BD/ULTIMED/OWEN/TRIVIDIA	
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<i>paroxetine hcl tab 40 mg</i>	61	PENTACEL INJ.....	115
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PAXIL SUS 10MG/5ML.....	61	<i>nebulization soln 300 mg</i>	9
PAZEO DRO 0.7%	137	<i>pentamidine isethionate for soln 300</i>	
PCCA BASE CRE 7542	118	<i>mg</i>	9
PCCA MBK MIS FAT ACID	118	<i>pentoxifylline tab er 400 mg</i>	109
PECTIN POW	98	PENTRAVAN CRE	153
<i>ped elctrylt sol freezer</i>	121	PENTRAVAN CRE PLUS	153
<i>ped elctrylt sol fruit</i>	121	<i>peptic relf chw 262mg</i>	98
<i>ped elctrylt sol grape</i>	121	<i>perindopril erbumine tab 2 mg</i>	35
<i>ped elctrylt sol unflavrd</i>	121	<i>perindopril erbumine tab 4 mg</i>	35
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PEDIARIX INJ 0.5ML	115	<i>periogard sol 0.12%</i>	154

<i>periomed con 0.63%</i>	154	<i>phenytoin sodium extended cap 300</i>	
<i>permethrin cream 5%</i>	153	<i>mg</i>	55
<i>perphenazine tab 16 mg</i>	67	<i>phenytoin sodium inj 50 mg/ml</i>	55
<i>perphenazine tab 2 mg</i>	67	<i>phenytoin susp 125 mg/5ml</i>	55
<i>perphenazine tab 4 mg</i>	67	<i>PHESGO SOL</i>	31
<i>perphenazine tab 8 mg</i>	67	<i>philith tab 0.4-35</i>	87
<i>PERSERIS INJ 120MG</i>	67	<i>PHOSPHATIDYL POW 20%</i>	119
<i>PERSERIS INJ 90MG</i>	67	<i>PHYTOBASE CRE</i>	119
<i>PERUVIAN LIQ BALSAM</i>	119	<i>phytonadione inj 10 mg/ml</i>	132
<i>PFCB CRE</i>	119	<i>phytonadione inj 1 mg/0.5ml (2</i>	
<i>pfizerpen inj 20000000</i>	21	<i>mg/ml)</i>	132
<i>pfizerpen inj 5mu</i>	21	<i>phytonadione tab 5 mg</i>	132
<i>pharbechlor tab 4mg</i>	140	<i>PICATO GEL 0.015%</i>	153
<i>pharbedryl cap 25mg</i>	140	<i>PICATO GEL 0.05%</i>	153
<i>pharbedryl cap 50mg</i>	140	<i>PIFELTRO TAB 100MG</i>	13
<i>pharbetol tab 325mg</i>	2	<i>pilocarpine hcl ophth soln 1%</i>	137
<i>pharbetol tab 500mg</i>	2	<i>pilocarpine hcl ophth soln 2%</i>	137
<i>PHARMABASE CRE ANTIOXID</i>	119	<i>pilocarpine hcl ophth soln 4%</i>	137
<i>PHARMABASE CRE COSMETIC</i>	119	<i>pilocarpine hcl tab 5 mg</i>	154
<i>PHARMABASE CRE LIGHT</i>	119	<i>pilocarpine hcl tab 7.5 mg</i>	154
<i>PHARMABASE CRE VAGINAL</i>	119	<i>pimozide tab 1 mg</i>	67
<i>phendimetrazine tartrate cap er 24hr</i>		<i>pimozide tab 2 mg</i>	67
<i>105 mg</i>	78	<i>pimtrea tab</i>	87
<i>phendimetrazine tartrate tab 35 mg</i> .	78	<i>pindolol tab 10 mg</i>	43
<i>phenelzine sulfate tab 15 mg</i>	61	<i>pindolol tab 5 mg</i>	43
<i>phenobarbital elixir 20 mg/5ml</i>	54	<i>pink bismuth chw 262mg</i>	98
<i>phenobarbital sodium inj 130 mg/ml</i> .	54	<i>pink bismuth tab 262mg</i>	98
<i>phenobarbital sodium inj 65 mg/ml</i> ..	54	<i>PINWORM TAB MEDICINE</i>	9
<i>phenobarbital tab 100 mg</i>	54	<i>pioglitazone hcl tab 15 mg (base equiv)</i>	
<i>phenobarbital tab 15 mg</i>	54		80
<i>phenobarbital tab 16.2 mg</i>	54	<i>pioglitazone hcl tab 30 mg (base equiv)</i>	
<i>phenobarbital tab 30 mg</i>	54		80
<i>phenobarbital tab 32.4 mg</i>	54	<i>pioglitazone hcl tab 45 mg (base equiv)</i>	
<i>phenobarbital tab 60 mg</i>	54		80
<i>phenobarbital tab 64.8 mg</i>	54	<i>piperacillin sod-tazobactam na for inj</i>	
<i>phenobarbital tab 97.2 mg</i>	54	<i>3.375 gm (3-0.375 gm)</i>	21
<i>phentermine hcl cap 15 mg</i>	78	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>phentermine hcl cap 30 mg</i>	78	<i>13.5 gm (12-1.5 gm)</i>	21
<i>phentermine hcl cap 37.5 mg</i>	78	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>phentermine hcl tab 37.5 mg</i>	78	<i>2.25 gm (2-0.25 gm)</i>	21
<i>PHENYTEK CAP 200MG</i>	54	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>PHENYTEK CAP 300MG</i>	54	<i>4.5 gm (4-0.5 gm)</i>	21
<i>phenytoin chew tab 50 mg</i>	55	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>phenytoin sodium extended cap 100</i>		<i>40.5 gm (36-4.5 gm)</i>	21
<i>mg</i>	55	<i>PIQRAY 200MG TAB DOSE</i>	31
<i>phenytoin sodium extended cap 200</i>		<i>PIQRAY 250MG TAB DOSE</i>	31
<i>mg</i>	55	<i>PIQRAY 300MG TAB DOSE</i>	31

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<i>piroxicam cap 10 mg</i>	3
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<i>podofilox soln 0.5%</i>	153
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<i>posaconazole tab delayed release 100</i> <i>mg</i>	11
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<i>potassium chloride 20 meq/l (0.15%)</i> <i>in dextrose 5% inj</i>	122
<i>potassium chloride cap er 10 meq</i> ..	123
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<i>potassium chloride microencapsulated</i> <i>crys er tab 20 meq</i>	123
<i>potassium chloride oral soln 10% (20</i> <i>meq/15ml)</i>	123
<i>potassium chloride oral soln 20% (40</i> <i>meq/15ml)</i>	123
<i>potassium chloride powder packet 20</i> <i>meq</i>	123
<i>potassium chloride tab er 10 meq</i> ...	123
<i>potassium chloride tab er 20 meq</i> <i>(1500 mg)</i>	123
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<i>potassium citrate tab er 10 meq (1080</i> <i>mg)</i>	105
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<i>pramipexole dihydrochloride tab 0.5</i> <i>mg</i>	63
<i>pramipexole dihydrochloride tab 0.75</i> <i>mg</i>	63
<i>pramipexole dihydrochloride tab 1.5</i> <i>mg</i>	63
<i>pramipexole dihydrochloride tab 1 mg</i>	63
<i>prasterone (dhea) cap 25 mg</i>	127
<i>prasugrel hcl tab 10 mg (base equiv)</i>	110
<i>prasugrel hcl tab 5 mg (base equiv)</i>	110
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<i>prednisone tab 50 mg</i>	91	PREZISTA TAB 75MG	13
<i>prednisone tab 5 mg</i>	91	PREZISTA TAB 800MG	13
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<i>prednisone tab therapy pack 10 mg (48)</i>	91	<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	11
<i>prednisone tab therapy pack 5 mg (21)</i>	91	PRIMAQUINE TAB 26.3MG	11
<i>prednisone tab therapy pack 5 mg (48)</i>	91	<i>primidone tab 250 mg</i>	55
PRED SOD PHO SOL 1% OP	136	<i>primidone tab 50 mg</i>	55
<i>pregabalin cap 100 mg</i>	55	PRIVIGEN INJ 10GRAMS.....	113
<i>pregabalin cap 150 mg</i>	55	PRIVIGEN INJ 20GRAMS.....	113
<i>pregabalin cap 200 mg</i>	55	PRIVIGEN INJ 40GRAMS.....	113
<i>pregabalin cap 225 mg</i>	55	PRIVIGEN INJ 5 GRAMS	113
<i>pregabalin cap 25 mg</i>	55	<i>probenecid tab 500 mg</i>	1
<i>pregabalin cap 300 mg</i>	55	PROCALAMINE INJ 3%	124
<i>pregabalin cap 50 mg</i>	55	<i>prochlorperazine edisylate inj 10 mg/2ml</i>	99
<i>pregabalin cap 75 mg</i>	55	<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	99
<i>pregabalin soln 20 mg/ml</i>	55	<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	99
<i>pregabalin tab er 24hr 165 mg</i>	75	<i>prochlorperazine suppos 25 mg</i>	99
<i>pregabalin tab er 24hr 330 mg</i>	75	PROCRIT INJ 10000/ML.....	107
<i>pregabalin tab er 24hr 82.5 mg</i>	75	PROCRIT INJ 2000/ML	107
PREMASOL SOL 10%	124	PROCRIT INJ 20000/ML.....	107
		PROCRIT INJ 3000/ML	107
		PROCRIT INJ 4000/ML	107
		PROCRIT INJ 40000/ML.....	107
		<i>procto-med cre hc 2.5%</i>	153
		<i>procto-pak cre 1%</i>	153

<i>proctosol hc cre 2.5%</i>	153	<i>prosight tab</i>	133
<i>proctozone cre -hc 2.5%</i>	153	PROSOL INJ 20%	124
PROFE CAP 180MG	108	<i>protriptyline hcl tab 10 mg</i>	61
PROGRAF GRA 0.2MG	114	<i>protriptyline hcl tab 5 mg</i>	61
PROGRAF GRA 1MG	114	<i>pseudoephed-bromphen-dm syrup 30-</i>	
PROLASTIN-C INJ 1000MG	145	<i>2-10 mg/5ml</i>	143
PROLENSA SOL 0.07%	136	<i>pseudoephedrine hcl tab 30 mg</i>	143
PROLIA SOL 60MG/ML	82	<i>pseudoephedrine hcl tab 60 mg</i>	143
PROMACTA PAK 25MG.....	109	<i>pseudoephedrine hcl tab er 12hr 120</i>	
PROMACTA POW 12.5MG.....	109	<i>mg</i>	143
PROMACTA TAB 12.5MG.....	109	<i>pseudoephedr tab 120mg er</i>	143
PROMACTA TAB 25MG.....	109	PULMICORT INH 180MCG	146
PROMACTA TAB 50MG.....	109	PULMICORT INH 90MCG	146
PROMACTA TAB 75MG.....	109	PULMOZYME SOL 1MG/ML	145
<i>promethazine-dm syrup 6.25-15</i>		PURIXAN SUS 20MG/ML.....	23
<i>mg/5ml</i>	143	PX CALAMINE LOT	153
<i>promethazine hcl inj 25 mg/ml</i>	99	<i>pyrazinamide tab 500 mg</i>	15
<i>promethazine hcl inj 50 mg/ml</i>	99	<i>pyridostigmine bromide tab 60 mg</i> ...	75
<i>promethazine hcl syrup 6.25 mg/5ml</i>	99	<i>pyridoxine hcl inj 100 mg/ml</i>	133
<i>promethazine hcl tab 12.5 mg</i>	99	<i>pyridoxine hcl tab 100 mg</i>	133
<i>promethazine hcl tab 25 mg</i>	99	<i>pyridoxine hcl tab 25 mg</i>	133
<i>promethazine hcl tab 50 mg</i>	100	<i>pyridoxine hcl tab 50 mg</i>	133
<i>promethazine w/ codeine syrup 6.25-</i>		PYRUVIC ACID LIQ	119
<i>10 mg/5ml</i>	143	Q	
<i>propafenone hcl cap er 12hr 225 mg</i> 39		<i>qc allergy tab 10mg</i>	140
<i>propafenone hcl cap er 12hr 325 mg</i> 39		<i>qc antacid sus</i>	98
<i>propafenone hcl cap er 12hr 425 mg</i> 39		<i>qc antacid sus anti-gas</i>	98
<i>propafenone hcl tab 150 mg</i>	39	<i>qc aspirin tab 325mg</i>	2
<i>propafenone hcl tab 225 mg</i>	39	<i>qc aspirin tab 325mg ec</i>	2
<i>propafenone hcl tab 300 mg</i>	39	<i>qc epsom gra salt</i>	102
<i>proparacaine hcl ophth soln 0.5%</i> ...137		<i>qc laxative sup 10mg</i>	102
<i>propranolol hcl cap er 24hr 120 mg</i> ..43		<i>qc natural pow vegetabl</i>	102
<i>propranolol hcl cap er 24hr 160 mg</i> ..43		<i>qc senna tab 8.6mg</i>	102
<i>propranolol hcl cap er 24hr 60 mg</i>43		<i>qc suphedrin tab 120mg sr</i>	143
<i>propranolol hcl cap er 24hr 80 mg</i>43		<i>qc therin-m tab</i>	133
<i>propranolol hcl oral soln 20 mg/5ml</i> ..43		Q-DERM CRE	119
<i>propranolol hcl oral soln 40 mg/5ml</i> ..43		QINLOCK TAB 50MG	31
<i>propranolol hcl tab 10 mg</i>	43	<i>q-sorb cap 150mg</i>	127
<i>propranolol hcl tab 20 mg</i>	43	<i>q-sorb cap 30mg</i>	127
<i>propranolol hcl tab 40 mg</i>	43	<i>q-sorb cap 75mg</i>	127
<i>propranolol hcl tab 60 mg</i>	43	<i>q-sorb co-q cap 100mg</i>	127
<i>propranolol hcl tab 80 mg</i>	43	QSYMIA CAP 11.25-69	78
PROPYLENE GL LIQ.....	119	QSYMIA CAP 15-92MG	78
PROPYLENE LIQ GLYCOL	119	QSYMIA CAP 3.75-23.....	78
<i>propylthiouracil tab 50 mg</i>	96	QSYMIA CAP 7.5-46MG	78
PROPYPARABEN POW	119	QUADRACEL INJ.....	115
PROQUAD INJ	115	<i>quetiapine fumarate tab 100 mg</i>	68

<i>quetiapine fumarate tab 200 mg</i>	68
<i>quetiapine fumarate tab 25 mg</i>	67
<i>quetiapine fumarate tab 300 mg</i>	68
<i>quetiapine fumarate tab 400 mg</i>	68
<i>quetiapine fumarate tab 50 mg</i>	68
<i>quetiapine fumarate tab er 24hr 150 mg</i>	68
<i>quetiapine fumarate tab er 24hr 200 mg</i>	68
<i>quetiapine fumarate tab er 24hr 300 mg</i>	68
<i>quetiapine fumarate tab er 24hr 400 mg</i>	68
<i>quetiapine fumarate tab er 24hr 50 mg</i>	68
<i>quinapril hcl tab 10 mg</i>	35
<i>quinapril hcl tab 20 mg</i>	35
<i>quinapril hcl tab 40 mg</i>	35
<i>quinapril hcl tab 5 mg</i>	35
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	34
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	35
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	35
<i>quinidine sulfate tab 200 mg</i>	39
<i>quinidine sulfate tab 300 mg</i>	39
<i>quinine sulfate cap 324 mg</i>	11
R	
<i>RABAVERT INJ</i>	115
<i>rabeprazole sodium ec tab 20 mg</i> ...	104
<i>RA CALAMINE LOT</i>	153
<i>ra cough dm sus 30mg/5ml</i>	143
<i>ra epsom gra salt</i>	102
<i>RA EPSOM GRA SALT/LVN</i>	102
<i>ra glycerin sup 80.7%</i>	102
<i>raloxifene hcl tab 60 mg</i>	94
<i>ramipril cap 1.25 mg</i>	35
<i>ramipril cap 10 mg</i>	35
<i>ramipril cap 2.5 mg</i>	35
<i>ramipril cap 5 mg</i>	35
<i>ranolazine tab er 12hr 1000 mg</i>	48
<i>ranolazine tab er 12hr 500 mg</i>	48
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	63
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	64

<i>RASPBERRY LIQ FLAVOR</i>	119
<i>RAYALDEE CAP 30MCG</i>	97
<i>RDT BASE POW</i>	119
<i>reclipsen tab</i>	87
<i>RECOMBIVA HB INJ 10MCG/ML</i>	115
<i>RECOMBIVA-HB INJ 40MCG/ML</i>	115
<i>RECOMBIVA HB INJ 5MCG/0.5</i>	115
<i>RECTIV OIN 0.4%</i>	153
<i>RED YEAST POW RICE</i>	119
<i>reeses med sus pinworm</i>	9
<i>REFENESEN TAB CHST CNG</i>	143
<i>REGRANEX GEL 0.01%</i>	154
<i>reguloid pow 28.3%</i>	102
<i>reguloid pow 48.57%</i>	102
<i>reguloid pow 58.6%</i>	102
<i>RELENZA MIS DISKHALE</i>	16
<i>RELISTOR INJ 12/0.6ML</i>	103
<i>RELISTOR INJ 8/0.4ML</i>	103
<i>REMICADE INJ 100MG</i>	111
<i>rena-vite tab</i>	133
<i>RENFLEXIS INJ 100MG</i>	111
<i>repaglinide tab 0.5 mg</i>	80
<i>repaglinide tab 1 mg</i>	80
<i>repaglinide tab 2 mg</i>	80
<i>RESTASIS EMU 0.05%</i>	138
<i>RESTASIS MUL EMU 0.05%</i>	138
<i>RETEVMO CAP 40MG</i>	31
<i>RETEVMO CAP 80MG</i>	31
<i>REVLIMID CAP 10MG</i>	25
<i>REVLIMID CAP 15MG</i>	25
<i>REVLIMID CAP 2.5MG</i>	25
<i>REVLIMID CAP 20MG</i>	25
<i>REVLIMID CAP 25MG</i>	25
<i>REVLIMID CAP 5MG</i>	25
<i>REXULTI TAB 0.25MG</i>	68
<i>REXULTI TAB 0.5MG</i>	68
<i>REXULTI TAB 1MG</i>	68
<i>REXULTI TAB 2MG</i>	68
<i>REXULTI TAB 3MG</i>	68
<i>REXULTI TAB 4MG</i>	68
<i>REYATAZ POW 50MG</i>	13
<i>RHOPRESSA SOL 0.02%</i>	137
<i>RIABNI SOL 100/10ML</i>	31
<i>RIABNI SOL 500/50ML</i>	31
<i>ribavirin cap 200 mg</i>	16
<i>ribavirin tab 200 mg</i>	16
<i>rid lice kil sha 0.33-4%</i>	154

<i>rifabutin cap 150 mg</i>	15	<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	58
<i>rifampin cap 150 mg</i>	15	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	58
<i>rifampin cap 300 mg</i>	15	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	58
<i>rifampin for inj 600 mg</i>	15	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	58
<i>riluzole tab 50 mg</i>	75	<i>rivelsa tab</i>	87
<i>rimantadine hydrochloride tab 100 mg</i>	16	<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	73
<i>RINVOQ TAB 15MG ER</i>	111	<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	73
<i>RISACAL-D TAB</i>	126	<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	73
<i>risedronate sodium tab 150 mg</i>	82	<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	73
<i>risedronate sodium tab 35 mg</i>	82	<i>ropinirole hydrochloride tab 0.25 mg</i>	64
<i>risedronate sodium tab 5 mg</i>	82	<i>ropinirole hydrochloride tab 0.5 mg</i>	64
<i>risedronate sodium tab delayed release 35 mg</i>	83	<i>ropinirole hydrochloride tab 1 mg</i>	64
<i>RISPERDAL INJ 12.5MG</i>	68	<i>ropinirole hydrochloride tab 2 mg</i>	64
<i>RISPERDAL INJ 25MG</i>	68	<i>ropinirole hydrochloride tab 3 mg</i>	64
<i>RISPERDAL INJ 37.5MG</i>	68	<i>ropinirole hydrochloride tab 4 mg</i>	64
<i>RISPERDAL INJ 50MG</i>	68	<i>ropinirole hydrochloride tab 5 mg</i>	64
<i>risperidone orally disintegrating tab 0.25 mg</i>	68	<i>rosadan cre 0.75%</i>	153
<i>risperidone orally disintegrating tab 0.5 mg</i>	68	<i>rosuvastatin calcium tab 10 mg</i>	40
<i>risperidone orally disintegrating tab 1 mg</i>	68	<i>rosuvastatin calcium tab 20 mg</i>	40
<i>risperidone orally disintegrating tab 2 mg</i>	68	<i>rosuvastatin calcium tab 40 mg</i>	40
<i>risperidone orally disintegrating tab 3 mg</i>	68	<i>rosuvastatin calcium tab 5 mg</i>	40
<i>risperidone orally disintegrating tab 4 mg</i>	68	<i>ROTARIX SUS</i>	115
<i>risperidone orally disintegrating tab 4 mg</i>	68	<i>ROTATEQ SOL</i>	115
<i>risperidone soln 1 mg/ml</i>	68	<i>roweepra tab 500mg</i>	55
<i>risperidone tab 0.25 mg</i>	68	<i>ROZLYTREK CAP 100MG</i>	31
<i>risperidone tab 0.5 mg</i>	68	<i>ROZLYTREK CAP 200MG</i>	31
<i>risperidone tab 1 mg</i>	68	<i>RUBRACA TAB 200MG</i>	31
<i>risperidone tab 2 mg</i>	69	<i>RUBRACA TAB 250MG</i>	31
<i>risperidone tab 3 mg</i>	69	<i>RUBRACA TAB 300MG</i>	31
<i>risperidone tab 4 mg</i>	69	<i>rufinamide susp 40 mg/ml</i>	55
<i>ritonavir tab 100 mg</i>	13	<i>rufinamide tab 200 mg</i>	55
<i>RITUXAN INJ 100MG</i>	31	<i>rufinamide tab 400 mg</i>	55
<i>RITUXAN INJ 500MG</i>	31	<i>RUKOBIA TAB 600MG ER</i>	13
<i>RITUXAN INJ HYCELA</i>	31	<i>RUXIENCE INJ 100/10ML</i>	31
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	58	<i>RUXIENCE INJ 500/50ML</i>	31
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	58	<i>RYBELSUS TAB 14MG</i>	80
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	58	<i>RYBELSUS TAB 3MG</i>	80
		<i>RYBELSUS TAB 7MG</i>	80
		<i>RYDAPT CAP 25MG</i>	31

<i>rynex pse liq</i>	143
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SACCHARIN POW	127
SACCHARIN POW SODIUM.....	127
SAFFLOWER OIL.....	119
SALTSTABLE CRE	119
SANDIMMUNE SOL 100MG/ML.....	114
SANTYL OIN 250/GM	154
<i>sapropterin dihydrochloride powder</i> <i>packet 100 mg</i>	94
<i>sapropterin dihydrochloride powder</i> <i>packet 500 mg</i>	94
<i>sapropterin dihydrochloride tab 100 mg</i>	94
<i>sb antacid sus anti-gas</i>	98
<i>sb docusate tab 8.6-50mg</i>	102
<i>sb fib lax pow 33%</i>	102
<i>sb laxative sup 10mg</i>	102
<i>sb triple oin antibiot</i>	148
<i>scopolamine td patch 72hr 1 mg/3days</i>	100
SECUADO DIS 3.8MG	69
SECUADO DIS 5.7MG	69
SECUADO DIS 7.6MG	69
<i>selegiline hcl cap 5 mg</i>	64
<i>selegiline hcl tab 5 mg</i>	64
<i>selenium sulfide lotion 2.5%</i>	150
SELZENTRY SOL 20MG/ML	13
SELZENTRY TAB 150MG	13
SELZENTRY TAB 25MG	13
SELZENTRY TAB 300MG	13
SELZENTRY TAB 75MG.....	13
<i>senna-lax tab 8.6mg</i>	102
<i>senna-s tab 8.6-50mg</i>	102
<i>senna-tabs tab 8.6mg</i>	102
<i>senna-time s tab 8.6-50mg</i>	102
<i>senna-time tab 8.6mg</i>	102
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	102
<i>sennosides syrup 8.8 mg/5ml</i>	102
<i>senno tab 8.6mg</i>	102
<i>sentry tab</i>	133
<i>sentry tab senior</i>	133
SEREVENT DIS AER 50MCG	141
<i>sertraline hcl oral concentrate for</i> <i>solution 20 mg/ml</i>	61
<i>sertraline hcl tab 100 mg</i>	61

<i>sertraline hcl tab 25 mg</i>	61
<i>sertraline hcl tab 50 mg</i>	61
<i>setlakin tab</i>	87
<i>sevelamer carbonate packet 0.8 gm</i> .	94
<i>sevelamer carbonate packet 2.4 gm</i> .	94
<i>sevelamer carbonate tab 800 mg</i>	94
<i>sharobel tab 0.35mg</i>	87
SHEA BUTTER MIS.....	119
SHINGRIX INJ 50/0.5ML.....	115
SIGNIFOR INJ 0.3MG/ML.....	94
SIGNIFOR INJ 0.6MG/ML.....	94
SIGNIFOR INJ 0.9MG/ML.....	94
<i>silace liq 10mg/ml</i>	102
<i>silace syp 60/15ml</i>	102
<i>siladryl alr liq 12.5/5ml</i>	140
<i>sildenafil citrate tab 20 mg</i>	49
<i>siltuss das liq 100/5ml</i>	143
<i>siltussin dm liq das</i>	143
<i>siltussin-dm syp alc free</i>	143
<i>siltussin sa syp 100/5ml</i>	143
<i>silver sulfadiazine cream 1%</i>	148
SIMBRINZA SUS 1-0.2%	137
<i>simliya tab 28 day</i>	88
<i>simpesse tab</i>	88
SIMPLE SYP	119
<i>simvastatin tab 10 mg</i>	41
<i>simvastatin tab 20 mg</i>	41
<i>simvastatin tab 40 mg</i>	41
<i>simvastatin tab 5 mg</i>	41
<i>simvastatin tab 80 mg</i>	41
<i>sirolimus oral soln 1 mg/ml</i>	114
<i>sirolimus tab 0.5 mg</i>	114
<i>sirolimus tab 1 mg</i>	114
<i>sirolimus tab 2 mg</i>	114
SIRTURO TAB 100MG	15
SIRTURO TAB 20MG	15
SIVEXTRO INJ 200MG	9
SIVEXTRO TAB 200MG	9
SKYRIZI INJ 150DOSE	111
SKYRIZI INJ 150MG/ML.....	111
SKYRIZI PEN INJ 150MG/ML	111
<i>slow release tab 47.5mg</i>	108
SLOW REL FE TAB 143MG CR.....	108
<i>sm all day tab allergy</i>	140
<i>sm allergy tab 4mg</i>	140
<i>sm animal chw shapes</i>	133
<i>sm antacid/ sus antigas</i>	98

<i>sm antacid sus advanced</i>	98	<i>sm vitamin e cap 1000unit</i>	133
<i>sm antacid sus anti-gas</i>	98	<i>sm vitamin e cap 200unit</i>	133
<i>sm antibioti oin 500/gm</i>	148	<i>sm vitamin e cap 400unit</i>	133
<i>sm anti-diar tab 2mg</i>	98	<i>sm vit b-12 tab 100mcg</i>	133
<i>sm antifungl cre 1%</i>	149	<i>sm vit b-12 tab 500mcg</i>	133
<i>sm antifungl cre 2%</i>	149	<i>sm vit b-6 tab 100mg</i>	133
<i>sm aspirin tab 325mg</i>	2	<i>sm vit c/rh tab 1000mg</i>	133
<i>sm aspirin tab 325mg ec</i>	2	<i>sm zinc tab 50mg</i>	126
<i>sm balanced tab b-100</i>	133	SOD ACETATE POW ANHYDR	126
<i>sm balanced tab b-50</i>	133	SOD BENZOATE POW	120
<i>sm ca/mg/zn tab</i>	126	SOD BROMIDE GRA	120
SM CALAMINE LOT	153	<i>sod ferric gluc cmplx in sucrose iv soln</i> 12.5 mg/ml (fe eq)	109
SM CALAMINE LOT PHENOLAT	153	<i>sodium chloride inj 2.5 meq/ml</i> (14.6%)	122
<i>sm calcium/d tab 600-400</i>	126	<i>sodium chloride irrigation soln 0.9%</i>	154
<i>sm calcium chw</i>	126	<i>sodium chloride iv soln 0.45%</i>	122
<i>sm complete tab</i>	133	<i>sodium chloride iv soln 0.9%</i>	122
<i>sm complete tab adv form</i>	133	<i>sodium chloride iv soln 3%</i>	122
<i>sm complete tab senior</i>	133	<i>sodium chloride iv soln 5%</i>	122
<i>sm coq-10 cap 50mg</i>	127	<i>sodium fluoride chew; tab; 1.1 (0.5 f)</i> mg/ml soln	123
SM CORAL CAL TAB 1000MG	126	SODIUM MIS HYDROXID	120
<i>sm fiber pow 28.3%</i>	102	<i>sodium phenylbutyrate oral powder 3</i> gm/teaspoonful	94
<i>sm fiber pow 48.57%</i>	102	<i>sodium phenylbutyrate tab 500 mg</i> ..	94
<i>sm fiber pow 58.6%</i>	102	<i>sodium polystyrene sulfonate powder</i>	83
<i>sm folic acd tab 400mcg</i>	133	SODIUM POW BICARBON	98, 120
<i>sm ibuprofen tab 100mg jr</i>	3	SOD METABISU GRA ANHYDR	120
<i>sm iron slow tab 160mg cr</i>	108	SOD PERBORAT CRY	120
<i>sm iron tab 325mg</i>	109	SOD PHOSPHAT GRA DIBASIC	120
<i>sm laxative sup 10mg</i>	102	SOD PROPION POW	120
<i>sm micon 7 sup 100mg</i>	106	SOD SACCHARI GRA	127
<i>sm multiple tab vit/iron</i>	133	SOD SULFITE POW ANHYDROU	120
<i>sm multiple tab vitamins</i>	133	<i>solifenacin succinate tab 10 mg</i>	105
<i>sm nasal dec tab 30mg</i>	143	<i>solifenacin succinate tab 5 mg</i>	105
<i>sm nicotine gum 2mg</i>	78	SOLQUA INJ 100/33	82
<i>sm nicotine gum 2mg mint</i>	78	SOLTAMOX SOL 10MG/5ML	24
<i>sm nicotine gum 4mg</i>	78	SOLU-CORTEF INJ 1000MG	92
<i>sm nicotine gum 4mg mint</i>	78	SOLU-CORTEF INJ 100MG	91
<i>sm nicotine loz 2mg mint</i>	78	SOLU-CORTEF INJ 250MG	91
<i>sm nicotine loz 4mg mint</i>	78	SOLU-CORTEF INJ 500MG	91
<i>sm opti-vita tab</i>	133	SOMATULINE INJ 120/.5ML	94
SM PRENATAL TAB VITAMINS	133	SOMATULINE INJ 60/0.2ML	94
<i>sm triple oin antibiot</i>	148	SOMATULINE INJ 90/0.3ML	94
<i>sm tussin cf liq</i>	143		
<i>sm tussin dm syp 100-10/5</i>	143		
<i>sm tussin syp dm</i>	143		
<i>sm vitamin c chw 500mg</i>	133		
<i>sm vitamin c tab 1000mg</i>	133		
<i>sm vitamin c tab 250mg</i>	133		

SOMAVERT INJ 10MG	94	STIVARGA TAB 40MG	31
SOMAVERT INJ 15MG	94	<i>stomach relf chw 262mg</i>	98
SOMAVERT INJ 20MG	94	<i>stomach relf sus 262/15ml</i>	98
SOMAVERT INJ 25MG	94	<i>stomach relf tab 262mg</i>	98
SOMAVERT INJ 30MG	94	<i>stool softnr cap 100mg</i>	102
<i>soothe&cool cre inzo 2%</i>	149	<i>stool softnr cap 250mg</i>	103
SORBIC ACID POW	120	<i>stool softnr syp 60/15ml</i>	103
SORBITOL SOL 70%	120	<i>stool softnr tab 8.6-50mg</i>	103
<i>sorine tab 120mg</i>	39	STRAWBERRY LIQ FLAVOR	120
<i>sorine tab 160mg</i>	40	<i>streptomycin sulfate for inj 1 gm</i>	9
<i>sorine tab 240mg</i>	40	<i>stress form/ tab zinc</i>	133
<i>sorine tab 80mg</i>	39	<i>stress formu tab</i>	133
<i>sotalol hcl (afib/afl) tab 120 mg</i>	40	<i>stress formu tab w/iron</i>	133
<i>sotalol hcl (afib/afl) tab 160 mg</i>	40	STRIBILD TAB	14
<i>sotalol hcl (afib/afl) tab 80 mg</i>	40	STUART ONE CAP	134
<i>sotalol hcl tab 120 mg</i>	40	<i>subvenite tab 100mg</i>	55
<i>sotalol hcl tab 160 mg</i>	40	<i>subvenite tab 150mg</i>	55
<i>sotalol hcl tab 240 mg</i>	40	<i>subvenite tab 200mg</i>	55
<i>sotalol hcl tab 80 mg</i>	40	<i>subvenite tab 25mg</i>	55
SOYBEAN OIL	120	<i>sucralfate tab 1 gm</i>	103
<i>spironolactone & hydrochlorothiazide</i>		<i>sudogest pe tab 10mg</i>	143
<i>tab 25-25 mg</i>	46	<i>sudogest tab 30mg</i>	143
<i>spironolactone tab 100 mg</i>	36	<i>sudogest tab 60mg</i>	143
<i>spironolactone tab 25 mg</i>	36	<i>sulfacetamide sodium lotion 10%</i>	
<i>spironolactone tab 50 mg</i>	36	<i>(acne)</i>	148
<i>sprintec 28 tab 28 day</i>	88	<i>sulfacetamide sodium ophth oint 10%</i>	
SPRITAM TAB 1000MG	55		136
SPRITAM TAB 250MG	55	<i>sulfacetamide sodium ophth soln 10%</i>	
SPRITAM TAB 500MG	55		136
SPRITAM TAB 750MG	55	<i>sulfacetamide sodium-prednisolone</i>	
SPRYCEL TAB 100MG	31	<i>ophth soln 10-0.23(0.25)%</i>	135
SPRYCEL TAB 140MG	31	SULFADIAZINE TAB 500MG	9
SPRYCEL TAB 20MG	31	<i>sulfamethoxazole-trimethoprim iv soln</i>	
SPRYCEL TAB 50MG	31	<i>400-80 mg/5ml</i>	9
SPRYCEL TAB 70MG	31	<i>sulfamethoxazole-trimethoprim susp</i>	
SPRYCEL TAB 80MG	31	<i>200-40 mg/5ml</i>	9
<i>sps sus 15gm/60</i>	83	<i>sulfamethoxazole-trimethoprim tab</i>	
<i>sronyx tab</i>	88	<i>400-80 mg</i>	10
<i>ssd cre 1%</i>	148	<i>sulfamethoxazole-trimethoprim tab</i>	
<i>stavudine cap 15 mg</i>	13	<i>800-160 mg</i>	10
<i>stavudine cap 20 mg</i>	13	SULFAMYLON CRE 85MG/GM	148
<i>stavudine cap 30 mg</i>	13	<i>sulfasalazine tab 500 mg</i>	100
<i>stavudine cap 40 mg</i>	13	<i>sulfasalazine tab delayed release 500</i>	
STELARA INJ 45MG/0.5	111	<i>mg</i>	100
STELARA INJ 90MG/ML	111	<i>sulindac tab 150 mg</i>	3
STEVIA POW EXTRACT	120	<i>sulindac tab 200 mg</i>	3
STIMATE SOL 1.5MG/ML	94	<i>sumatriptan nasal spray 20 mg/act</i> ..	73

<i>sumatriptan nasal spray 5 mg/act</i>	73
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	73
<i>sumatriptan succinate solution auto- injector 4 mg/0.5ml</i>	73
<i>sumatriptan succinate solution auto- injector 6 mg/0.5ml</i>	73
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	73
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	73
<i>sumatriptan succinate tab 100 mg</i>	74
<i>sumatriptan succinate tab 25 mg</i>	74
<i>sumatriptan succinate tab 50 mg</i>	74
<i>super b comp tab vit c</i>	134
<i>super liq nu-thera</i>	134
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<i>super tab nu-thera</i>	134
<i>super vikaps tab</i>	134
<i>suphedrine tab 120mg er</i>	143
<i>SUPPOSIBLEND MIS</i>	120
<i>SUPREP BOWEL SOL PREP KIT</i>	103
<i>SUSPENDIT GEL</i>	120
<i>SUTENT CAP 12.5MG</i>	31
<i>SUTENT CAP 25MG</i>	31
<i>SUTENT CAP 37.5MG</i>	31
<i>SUTENT CAP 50MG</i>	31
<i>syeda tab 3-0.03mg</i>	88
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<i>SYMBICORT AER 80-4.5</i>	147
<i>SYMDEKO TAB 100-150</i>	145
<i>SYMDEKO TAB 50-75MG</i>	145
<i>SYMJEPI INJ 0.15MG</i>	145
<i>SYMJEPI INJ 0.3MG</i>	145
<i>SYMPAZAN MIS 10MG</i>	56
<i>SYMPAZAN MIS 20MG</i>	56
<i>SYMPAZAN MIS 5MG</i>	55
<i>SYMTUZA TAB</i>	15
<i>SYNAREL SOL 2MG/ML</i>	89
<i>SYNERCID INJ 500MG</i>	10
<i>SYNJARDY TAB</i>	80
<i>SYNJARDY TAB 12.5-500</i>	80
<i>SYNJARDY TAB 5-1000MG</i>	80
<i>SYNJARDY TAB 5-500MG</i>	80
<i>SYNJARDY XR TAB</i>	80
<i>SYNJARDY XR TAB 10-1000</i>	80

<i>SYNJARDY XR TAB 25-1000</i>	80
<i>SYNJARDY XR TAB 5-1000MG</i>	80
<i>SYNRIBO INJ 3.5MG</i>	25
<i>SYNTHROID TAB 100MCG</i>	96
<i>SYNTHROID TAB 112MCG</i>	96
<i>SYNTHROID TAB 125MCG</i>	96
<i>SYNTHROID TAB 137MCG</i>	96
<i>SYNTHROID TAB 150MCG</i>	96
<i>SYNTHROID TAB 175MCG</i>	96
<i>SYNTHROID TAB 200MCG</i>	96
<i>SYNTHROID TAB 25MCG</i>	96
<i>SYNTHROID TAB 300MCG</i>	96
<i>SYNTHROID TAB 50MCG</i>	96
<i>SYNTHROID TAB 75MCG</i>	96
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<i>TABRECTA TAB 200MG</i>	31
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<i>tacrolimus cap 1 mg</i>	114
<i>tacrolimus cap 5 mg</i>	114
<i>tacrolimus oint 0.03%</i>	153
<i>tacrolimus oint 0.1%</i>	153
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<i>tactinal tab 325mg</i>	2
<i>tactinal tab 500mg</i>	2
<i>TAFINLAR CAP 50MG</i>	31
<i>TAFINLAR CAP 75MG</i>	31
<i>TAGRISSO TAB 40MG</i>	32
<i>TAGRISSO TAB 80MG</i>	32
<i>TALC POW</i>	120
<i>TALTZ INJ 80MG/ML</i>	111
<i>TALZENNA CAP 0.25MG</i>	32
<i>TALZENNA CAP 1MG</i>	32
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	24
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	24
<i>tamsulosin hcl cap 0.4 mg</i>	104
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<i>tarina fe tab 1/20 eq</i>	88	<i>terazosin hcl cap 2 mg (base equivalent)</i>	36
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TASIGNA CAP 150MG	32	<i>terbinafine cre 1%</i>	149
TASIGNA CAP 200MG	32	<i>terbinafine hcl cream 1%</i>	149
TASIGNA CAP 50MG	32	<i>terbinafine hcl tab 250 mg</i>	11
<i>tazarotene cream 0.1%</i>	150	<i>terbutaline sulfate tab 2.5 mg</i>	141
<i>tazicef inj 1gm</i>	18	<i>terbutaline sulfate tab 5 mg</i>	141
<i>tazicef inj 2gm</i>	18	<i>terconazole vaginal cream 0.4%</i>	106
<i>tazicef inj 6gm</i>	18	<i>terconazole vaginal cream 0.8%</i>	106
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<i>taztia xt cap 180mg/24</i>	45	<i>testosterone cypionate im inj in oil 200 mg/ml</i>	78
<i>taztia xt cap 240mg/24</i>	45	<i>testosterone enanthate im inj in oil 200 mg/ml</i>	78
<i>taztia xt cap 300mg er</i>	45	<i>testosterone td gel 12.5 mg/act (1%)</i>	78
<i>taztia xt cap 360mg/24</i>	45	<i>testosterone td gel 25 mg/2.5gm (1%)</i>	78
TAZVERIK TAB 200MG	32	<i>testosterone td gel 50 mg/5gm (1%)</i>	79
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<i>telmisartan-amlodipine tab 40-5 mg</i> .	38	THALOMID CAP 200MG	25
<i>telmisartan-amlodipine tab 80-10 mg</i>	38	THALOMID CAP 50MG	25
<i>telmisartan-amlodipine tab 80-5 mg</i> .	38	THEO-24 CAP 100MG CR	145
<i>telmisartan-hydrochlorothiazide tab 40- 12.5 mg</i>	38	THEO-24 CAP 200MG CR	145
<i>telmisartan-hydrochlorothiazide tab 80- 12.5 mg</i>	38	THEO-24 CAP 300MG CR	145
<i>telmisartan-hydrochlorothiazide tab 80- 25 mg</i>	38	THEO-24 CAP 400MG ER	146
<i>telmisartan tab 20 mg</i>	38	<i>theophylline soln 80 mg/15ml</i>	146
<i>telmisartan tab 40 mg</i>	39	<i>theophylline tab er 12hr 300 mg</i>	146
<i>telmisartan tab 80 mg</i>	39	<i>theophylline tab er 12hr 450 mg</i>	146
<i>temazepam cap 15 mg</i>	72	<i>theophylline tab er 24hr 400 mg</i>	146
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thiamine hcl tab 100 mg	134	tobramycin nebu soln 300 mg/5ml ...	10
thiamine hcl tab 50 mg	134	tobramycin ophth soln 0.3%	136
thioridazine hcl tab 100 mg	69	tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv).....	10
thioridazine hcl tab 10 mg	69	tobramycin sulfate inj 10 mg/ml (base equivalent).....	10
thioridazine hcl tab 25 mg	69	tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv).....	10
thioridazine hcl tab 50 mg	69	tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv).....	10
thiothixene cap 10 mg	69	tolnaftate cre 1%	149
thiothixene cap 1 mg	69	tolnaftate cream 1%	149
thiothixene cap 2 mg	69	tolnaftate powder 1%	149
thiothixene cap 5 mg	69	tolterodine tartrate cap er 24hr 2 mg	105
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tiadylt cap 120mg/24	45	tolterodine tartrate tab 2 mg	105
tiadylt cap 180mg/24	45	topiramate sprinkle cap 15 mg.....	56
tiadylt cap 240mg/24	45	topiramate sprinkle cap 25 mg.....	56
tiadylt cap 300mg/24	45	topiramate tab 100 mg	56
tiadylt cap 360mg/24	45	topiramate tab 200 mg	56
tiadylt cap 420mg/24	45	topiramate tab 25 mg	56
tiagabine hcl tab 12 mg	56	topiramate tab 50 mg	56
tiagabine hcl tab 16 mg	56	toposar inj 100/5ml.....	26
tiagabine hcl tab 2 mg	56	toposar inj 1gm/50ml	26
tiagabine hcl tab 4 mg	56	toremifene citrate tab 60 mg (base equivalent).....	24
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tigecycline for iv soln 50 mg	22	torsemide tab 10 mg	46
TIGECYCLINE INJ 50MG	22	torsemide tab 20 mg	46
tilia fe tab	88	torsemide tab 5 mg	46
timolol maleate ophth gel forming soln 0.25%	137	total b/c tab	134
timolol maleate ophth gel forming soln 0.5%	137	TOVIAZ TAB 4MG	105
timolol maleate ophth soln 0.25% ..	137	TOVIAZ TAB 8MG	105
timolol maleate ophth soln 0.5%	137	TPN ELECTROL INJ	122
timolol maleate ophth soln 0.5% (once-daily)	137	TRADJENTA TAB 5MG	80
timolol maleate tab 10 mg	43		
timolol maleate tab 20 mg	43		
timolol maleate tab 5 mg	43		
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<i>tramadol-acetaminophen tab 37.5-325 mg</i>	7
<i>tramadol hcl tab 50 mg</i>	7
<i>trandolapril tab 1 mg</i>	35
<i>trandolapril tab 2 mg</i>	36
<i>trandolapril tab 4 mg</i>	36
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	109
<i>tranexamic acid tab 650 mg</i>	109
<i>tranylcypromine sulfate tab 10 mg</i> ...	61
TRAVASOL INJ 10%.....	124
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TRAZIMERA INJ 420MG.....	32
<i>trazodone hcl tab 100 mg</i>	61
<i>trazodone hcl tab 150 mg</i>	61
<i>trazodone hcl tab 50 mg</i>	61
TRECATOR TAB 250MG	15
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<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	49
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	49
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	49
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	49
TRESIBA FLEX INJ 100UNIT.....	82
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<i>tretinoin cap 10 mg</i>	25
<i>tretinoin cream 0.025%</i>	148
<i>tretinoin cream 0.05%</i>	148
<i>tretinoin cream 0.1%</i>	148
<i>tretinoin gel 0.01%</i>	148
<i>tretinoin gel 0.025%</i>	148
<i>triamcinolone acetonide cream 0.025%</i>	151
<i>triamcinolone acetonide cream 0.1%</i>	151
<i>triamcinolone acetonide cream 0.5%</i>	151
<i>triamcinolone acetonide dental paste 0.1%</i>	154
<i>triamcinolone acetonide lotion 0.025%</i>	151
<i>triamcinolone acetonide lotion 0.1%</i>	151
<i>triamcinolone acetonide oint 0.025%</i>	151
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<i>triamcinolone acetonide oint 0.5%</i> ..	151
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	46
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	46
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	46
<i>tri-biozene oin</i>	148
<i>tri-buff asa tab 325mg</i>	2
TRICARE TAB PRENATAL	123
<i>triderm cre 0.5%</i>	151
<i>trientine hcl cap 250 mg</i>	83
<i>tri-estaryll tab</i>	88
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	69
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	69
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	69
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	69
<i>trifluridine ophth soln 1%</i>	136
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	64
<i>trihexyphenidyl hcl tab 2 mg</i>	64
<i>trihexyphenidyl hcl tab 5 mg</i>	64
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<i>tri-linyah tab</i>	88
<i>tri-lo-mili tab</i>	88
<i>tri-lo tab estaryll</i>	88
<i>tri-lo- tab marzia</i>	88
<i>tri-lo- tab sprintec</i>	88
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<i>tri-mili tab</i>	88
<i>trimipramine maleate cap 100 mg</i> ...	61
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<i>trimipramine maleate cap 50 mg</i>	61
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<i>tri-nymyo tab</i>	88	TUTTI FRUTTI CON	120
<i>triple antib oin</i>	148	TWINRIX INJ	115
<i>triple antib oin max st</i>	148	TYBOST TAB 150MG	13
<i>triple antib oin plus</i>	149	<i>tydemy tab</i>	88
<i>tri-previfem tab</i>	88	TYMLOS INJ	83
<i>tri-sprintec tab</i>	88	TYPHIM VI INJ	115
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<i>trivora-28 tab</i>	88	U-BASE CRE	120
<i>tri-vylibra tab</i>	88	UBRELVY TAB 100MG	74
<i>tri-vylibra tab lo</i>	88	UBRELVY TAB 50MG	74
TROCHIBASE MIS	120	UKONIQ TAB 200MG	32
TROCHIBASE S MIS	120	UNIBASE CRE	120
TROCHIBASE S MIS CLASSIC	120	UNICOMPLEX-M TAB	134
TROGARZO INJ 150MG/ML	13	<i>unithroid tab 100mcg</i>	96
TROPHAMINE INJ 10%	124	<i>unithroid tab 112mcg</i>	96
<i>trospium chloride tab 20 mg</i>	105	<i>unithroid tab 125mcg</i>	97
TRULANCE TAB 3MG	103	<i>unithroid tab 137mcg</i>	97
TRULICITY INJ 0.75/0.5	80	<i>unithroid tab 150mcg</i>	97
TRULICITY INJ 1.5/0.5	80	<i>unithroid tab 175mcg</i>	97
TRULICITY INJ 3/0.5	81	<i>unithroid tab 200mcg</i>	97
TRULICITY INJ 4.5/0.5	81	<i>unithroid tab 25mcg</i>	96
TRUMENBA INJ	115	<i>unithroid tab 300mcg</i>	97
TRUSELTIQ CAP 100MG	32	<i>unithroid tab 50mcg</i>	96
TRUSELTIQ CAP 125MG	32	<i>unithroid tab 75mcg</i>	96
TRUSELTIQ CAP 50MG	32	<i>unithroid tab 88mcg</i>	96
TRUSELTIQ CAP 75MG	32	URO-MAG CAP 140MG	98
TRUXIMA INJ 100/10ML	32	<i>ursodiol cap 300 mg</i>	103
TRUXIMA INJ 500/50ML	32	<i>ursodiol tab 250 mg</i>	103
<i>trymine cg liq 225-7.5</i>	143	<i>ursodiol tab 500 mg</i>	103
TUKYSA TAB 150MG	32	V	
TUKYSA TAB 50MG	32	<i>valacyclovir hcl tab 1 gm</i>	16
<i>tulana tab 0.35mg</i>	88	<i>valacyclovir hcl tab 500 mg</i>	16
TURALIO CAP 200MG	32	VALCHLOR GEL 0.016%	153
TURPENTINE LIQ SPIRITS	120	<i>valganciclovir hcl for soln 50 mg/ml</i>	
TUSNEL C SYP	143	(base equiv)	16
<i>tusnel diabt liq 10-100/5</i>	143	<i>valganciclovir hcl tab 450 mg (base</i>	
TUSSICAPS CAP 10-8MG	143	<i>equivalent)</i>	16
<i>tussin adult liq 100/5ml</i>	144	<i>valproate sodium inj 100 mg/ml</i>	56
<i>tussin adult liq cgh/cong</i>	144	<i>valproate sodium oral soln 250 mg/5ml</i>	
<i>tussin adult liq cold</i>	144	(base equiv)	56
<i>tussin cf liq</i>	144	<i>valproic acid cap 250 mg</i>	56
<i>tussin cf liq cgh/cold</i>	144	<i>valsartan-hydrochlorothiazide tab 160-</i>	
<i>tussin chest syp 100/5ml</i>	144	<i>12.5 mg</i>	38
<i>tussin dm liq</i>	144	<i>valsartan-hydrochlorothiazide tab 160-</i>	
<i>tussin dm liq 100-10/5</i>	144	<i>25 mg</i>	38
<i>tussin dm liq max</i>	144		

<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	38	VENCLEXTA TAB 10MG	32
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	38	VENCLEXTA TAB 50MG	32
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	38	VENCLEXTA TAB START PK.....	32
<i>valsartan tab 160 mg</i>	39	<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	62
<i>valsartan tab 320 mg</i>	39	<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	61
<i>valsartan tab 40 mg</i>	39	<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	61
<i>valsartan tab 80 mg</i>	39	<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	62
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<i>vandazole gel 0.75%</i>	106	<i>verapamil hcl iv soln 2.5 mg/ml</i>	45
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VAQTA INJ 25/0.5ML	115	<i>verapamil hcl tab 40 mg</i>	45
VAQTA INJ 50UNT/ML	115	<i>verapamil hcl tab 80 mg</i>	45
VARIVAX INJ	115	<i>verapamil hcl tab er 120 mg</i>	45
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